

Admission blood specimens are processed at Alberta Precision Laboratories and sent to the National Lab. Processing requires specific dedicated for Schedule 1 infection devices and PPE requirements for staff. Any subsequent bloodwork should be minimized and communicate with the Lab prior to drawing specimens to ensure appropriate staff and lab ready to receive specimens.

Equipment:

- ✓ Blood specimen kit (adult or pediatric) containing specimen tubes
(As per Alberta Precision Laboratories Edmonton Zone viral hemorrhagic fever 2022)
- ✓ Tourniquet
- ✓ Two butterfly blood-draw safety needles
- ✓ One vacutainer holder and transfer needle
- ✓ Four 2x2 gauze
- ✓ Four chlorhexidine swabs
- ✓ Adhesive tape/band-aids
- ✓ Three 20 mL sterile syringes (determine required volume including any blood cultures)
- ✓ One 10 mL syringe for discard
- ✓ Three sterile blunt fill needles
- ✓ One pre-filled 10 mL NS syringe
- ✓ Two clean blue pads for transfer of specimens out of patient room and handling outside of room
- ✓ Clean plastic or metal basin (to receive blood specimens from inside patient room)
- ✓ Two clean plastic specimen bags containing SuperSorb pads
- ✓ Two orange top solid plastic transport containers (SAF<T>PAK)

Prior to entering patient room, assess need for assistance to safely draw blood.

1. Call 7-6191, ask for Virologist-on-call and inform that SIU ready to draw blood.
2. Don appropriate SIU PPE.
3. Health Care Worker (HCW) outside of patient room prints specimen labels.
4. Explain procedure to patient and confirm patient identification. (2 client identifier)

Note: Reduce needle stick injury risk by assessing any patent IV for adequate blood return.

- ❖ If blood return easy (no risk of hemolyzed blood with difficult flow), use IV for specimen collection.
 - Stop IV infusion minimum 5 minutes, disconnect IV tubing and swab needleless connector/allow to dry
 - Draw and discard minimum 5 mL blood waste through needleless connector
 - Draw blood using steady gently pull to fill syringes
 - Flush IV catheter and restart IV infusion
 - Transfer blood to required specimen tubes/containers
- 5. If venipuncture required, select largest visible, palpable accessible vein and follow phlebotomy process.
Assess and if any concerns, second HCW to stabilize patient limb prior to blood draw to reduce needle stick injury risk.
- 6. Wipe filled tubes/containers with virucidal and allow to dry.

7. Wipe a second time and carefully place on to blue pad and allow to dry.
8. HCW outside of patient room dons PPE (gown, gloves and mask) and remains outside dirty area with basin, ready to receive specimens.
9. HCW inside room carefully transfers specimens to basin without touching tubes/containers.
10. Outside HCW wipes the tubes again with virucidal wipe and places on new clean blue pad to dry – HCW removes/discards gloves, performs hand hygiene and dons new gloves.
11. Each label is scanned into Connect Care and affixed to appropriate tube.
12. Specimens are transferred to the plastic specimen bags containing SuperSorb pads.
13. Once Lab personnel arrive, reconfirm patient ID and specimens are placed inside the two orange-top specimen transport containers.
(Lab to bring two new orange-top containers to leave at SIU)
14. Lab personnel confirm container lids are secure, place containers in Lab transport bucket and take specimens to the lab.



Example of orange -top specimen container (SAF<T>PAK)