

OKLAHOMA DEPARTMENT OF CORRECTIONS
NURSING PRACTICE PROTOCOLS
VENIPUNCTURE
(Blood Drawing)

MSRM 140117.01.12.9
(R- 4/19)

All lab draws with the exception of intake labs must have a corresponding order by the medical provider or a documented Chronic Clinic/ Routine Physical/ Return from GPS Nursing Protocol. If there is no documented order or Chronic Clinic/ Routine Physical/ Return from GPS Nursing protocol for the labs, the nurse must write a verbal order and assign the order to the Medical Provider for signature. CMA's that hold a current phlebotomy certification may use this nursing protocol.

Labs that are not a part of the approved annual chronic clinic and/or annual periodic physical labs per guidelines require a written order by the health care provider.

Health Care Provider: _____

Chronic Clinic Labs Routine PE Labs Text order Labs

Lab Specimen Obtained: CBC CMP FLP A1C TSH/T4 Hep Profile Viral Load CD4
 RPR PT PSA Other: _____

Materials:

Safety Needle/Butterfly Needle/Huber Needle	Tourniquet
Syringes	Gloves
Alcohol wipes	Band-Aid/2X2 gauze or cotton ball/coban
Tape	Sharp Container

Safety:

1. Observe universal (standard) safety precautions. Observe all applicable isolation procedures.
2. Wash hands in warm, running water with hand washing product (approved by the Infection Control Committee) before and after each patient collection.
3. Gloves are to be worn during all venipuncture and changed between patient collections. Palpation of venipuncture can be performed without gloves providing the skin is not broken.
4. Needles and hubs are single use and are disposed of in an appropriate 'sharps' container as one unit.
Needles are never recapped, removed, broken, or bent after venipuncture procedure.
5. Gloves are to be discarded in the appropriate container immediately after the venipuncture procedure. All other items used for the procedure must be disposed of according to proper biohazardous waste disposal policy.
6. Contaminated surfaces must be cleaned with products approved by Infection Control Committee
7. In the case of an accidental needlestick, immediately wash the area with an antibacterial soap, express blood from the wound, and contact your supervisor.
8. If multiple tubes are needed, the **proper order of draw** to avoid cross contamination and erroneous results is as follows:
 1. Blood culture vials or bottles, sterile tubes
 2. Coagulation tube (light blue top)
 3. Serum tube with or without clot activator or silica gel (Red or Gold)
 4. Heparin tube (Green top)
 5. EDTA (Lavender top)
 6. Glycolytic inhibitor (Gray top)

Procedure:

- Inmate identified and procedure explained
 Hands washed/sanitized and gloves applied
 Inmate arm positioned, tourniquet applied, puncture site identified and cleansed
 Venipuncture site: _____
 Needle gauge size: 20 21 22 23 24 25 Butterfly Huber
 Number of attempts: 1 2 Other: _____
 Unable to obtain. Reason: _____ Notified: _____
 Pressure applied, no bleeding, swelling or redness observed
 Applied: (check all that apply) Band-Aid Gauze Cotton ball Tape Coban
 Inmate tolerated procedure, voiced no concerns
 Sharps disposed into biohazardous container
 Education/Intervention: Instructed patient to follow-up sick call if experiencing any signs and symptoms that warrant treatment. Inmate verbalizes understanding of instructions.

Progress Note: _____

RN/LPN/CMA Signature/Credentials: _____ **Date:** _____ **Time:** _____

Inmate Name
(Last, First)

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