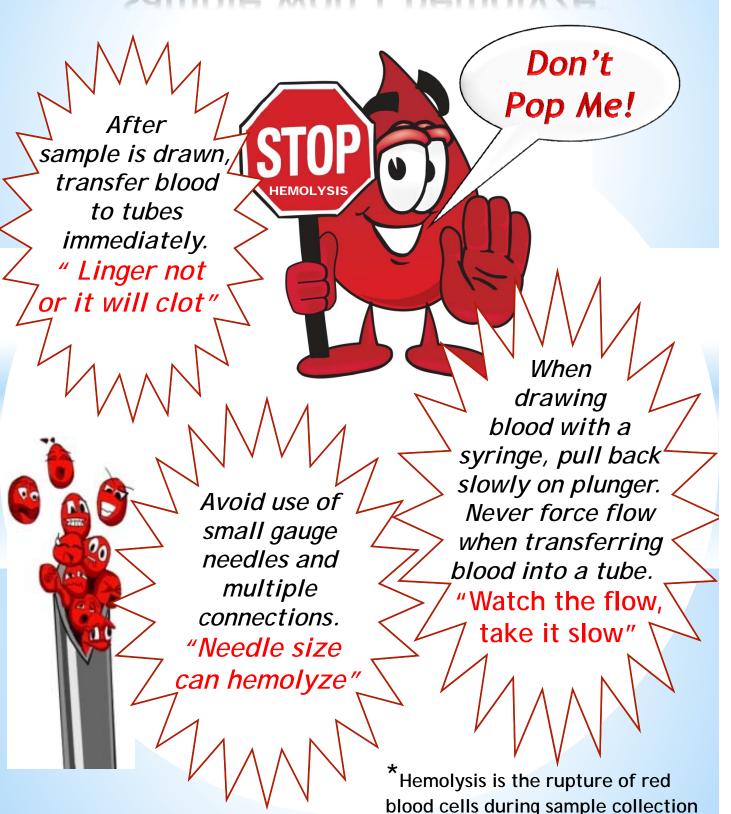
Some things to realize so the sample won't hemolyze*



How to Collect the Perfect Specimen

Send samples in tube system with padding

" Make it safe to lab, add a pad"

> For faster results draw 10 ml instead of 5 ml

"Lab will be \
thrilled if tubes
are filled"

For accurate results, don't lay syringe down after drawing

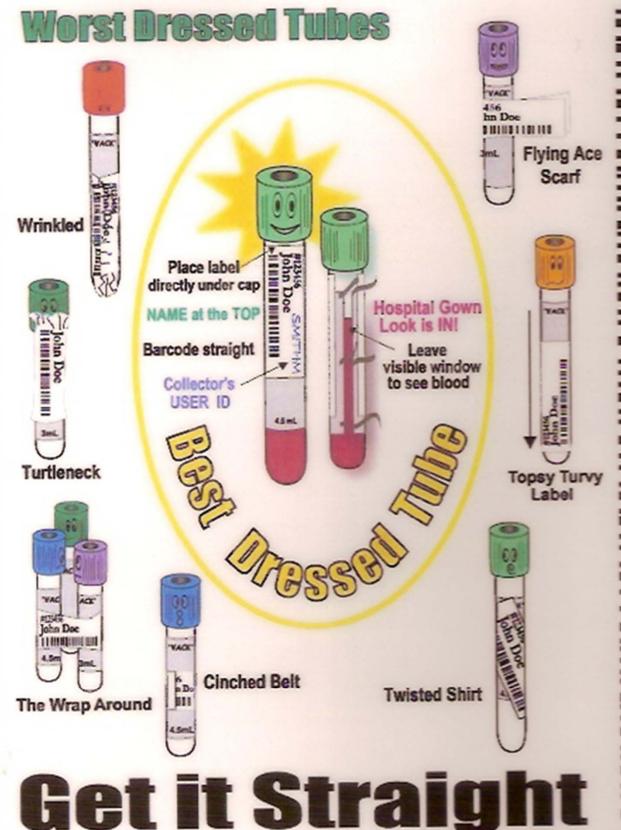
"Don't let blood settle. CBC will be meddled" Fill me up!

Draw from HUB not from tubing with secure connection

"Don't Flub, draw from the HUB" |

After transfer to tubes, slowly invert tubes
5 times

"Be swell,
mix it well"



Get it Straight Reduce the Wait

Order of Draw for Multiple Tube Collections

Reflects change in NCCLS recommended Order of Draw (NCCLS H3-A5, Vol 23, No 32, 8.10.2)

Closure Color	Collection Tube	Mix by Inverting
BD Vacutainer® Blood Collection Tubes (glass or plastic)		
	Blood Cultures - SPS	8 to 10 times
	Citrate Tube*	3 to 4 times
or	BD Vacutainer® SST™ Gel Separator Tube	5 times
	 Serum Tube (glass or plastic) 	5 times (plastic) none (glass)
	Heparin Tube	8 to 10 times
or 😝	 BD Vacutainer[®] PST[™] Gel Separator Tube With Heparin 	8 to 10 times
or	• EDTA Tube	8 to 10 times
	• Fluoride (glucose) Tube	8 to 10 times

*When using a winged blood collection set for venipuncture and a coagulation (citrate) tube is the first specimen tube to be drawn, a discard tube should be drawn first. The discard tube must be used to fill the blood collection set tubing's "dead space" with blood but the discard tube does not need to be completely filled. This important step will ensure maintenance of the proper blood-to-additive ratio of the blood specimen. The discard tube should be a nonadditive or coagulation tube.

NOTE: Always follow your facility's protocol for order of draw