HACKETTSTOWN REGIONAL MEDICAL CENTER LABORATORY POLICY MANUAL FINGERSTICK PROCEDURE

Effective Date: May, 2008 Policy No: PLEB 100.02 Cross Referenced: Origin: Phlebotomy

Reviewed Date: Authority: Laboratory Director

Revised Date: 01/12 Page: 1 of 1

PRINCIPLE: In most cases when it is impossible, especially in a child, to obtain a venipuncture sample, a finger stick sample is acceptable. One can use a finger stick to obtain a CBC and most chemistries. Coagulation testing, such as PT and PTT, as well blood cultures, cannot be done by finger stick.

EQUIPMENT:

1. Antiseptic swabs, 70% isopropanol

- 2. Gauze pads, 2 X 2"
- 3. BD Mictotainer Contact Activated Lancet
- 4. Microtainer collection tubes yellow SST or lavender EDTA

PROCEDURE:

- 1. Properly identify the patient.
- 2. Clean the chosen area with alcohol prep.
- 3. Use the fleshier part of the finger; usually thumb or ring finger is best. Older people might be more difficult due to callused fingers.
- 4. Place BD device on chosen finger. Hold the device between the thumb and index finger.
- 5. Push device and make puncture. Release immediately and remove lancet. Lancet will safely retract and should be discarded in sharps container. (either the small red SHARPS on the phlebotomy tray or the wall mounted SHARPS in the patient's room.
- 6. Always wipe the first drop of blood away. Squeeze and let up for a second, pumping the finger to bleed. Repeat this until tube is full. Remember that you are trying to obtain large drops of free falling blood. Constant squeezing will cause tissue fluids to be expressed and this may adversely interfere with test results or cause samples to be clotted.
- 7. Label the tubes according to the laboratory procedure.
- 8. Invert the EDTA tube several times to allow for proper mixing. Allow the SST tube to clot before centrifuging.

Reference: Becton Dickinson VACUTAINER® Systems Package Insert, January 2008.

