

Section: Division of Nursing  
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\* **PROCEDURE** \*  
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**MATERNAL SERVICES**  
(Scope)

**TITLE: CORD BLOOD CULTURES PROCEDURE**

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**PURPOSE:** To outline procedure for collection of cord blood specimen for culture.

**SUPPORTIVE DATA:** Cord blood is cultured to determine if bacteria is present in cord blood of at risk patients. At risk clients include all patients with rupture of membranes over 24 hours or foul odor of amniotic fluid and upon provider's order. Intact membranes present a partial barrier to intrauterine infection. Prolonged ruptured membranes may increase the risk of both fetal infection and maternal infection (chorioamnionitis).

<b>CONTENT:</b>	<b>PROCEDURE STEPS:</b>	<b>KEY POINTS:</b>
	1. Put on sterile gloves.	Use standard precautions.
	2. As soon as possible after birth, a culture of placental cord blood should be taken.	
	3. Examine cord for accessible vein.	Assemble equipment prior to delivery. Need blood culture bottle, 5cc syringe, 18 or 20 gauge needle, alcohol, and gloves.
	4. Swab cord with betadine and/or alcohol at desired site; draw blood through vein or artery from cut end or from side of cord, as if starting IV. Draw up 5cc of blood.	Minimum needed for testing is 1-3 cc.
	5. Swab top of blood bottle with alcohol; inject blood into tube and mix gently.	
	6. Label bottle taking care not to cover bar code. Take to lab promptly and notify technician that cultures are STAT.	Cultures should be started as soon as possible.
	7. Note length of time membranes ruptured on Apgar sheet and communicate to pediatrician.	Document collection of specimen on Nurse's Labor Notes and on Apgar form.