Future Issues:
- Blood culture and isolator collection technique
- Order of draw
- Causes and effects of hemolysis

Dispelling the myths:

MYTH #1
Samples clot when they sit for too long.
No. Not unless they are poorly mixed.

MYTH #2
The line on the label is a fill line.
No. Its just a line.

MYTH #3
Heparin can always be removed by flushing. Heparin can adhere to the lines causing prolonged results.

MYTH #4
The tube stopped filling by itself so it must be full enough. Air in the lines can take up blood space. That's why drawing a discard tube is recommended.

Coagulation Sample Collection
Minimizing Preanalytic Variables

What's changed? Why are we so picky?
Improved instrumentation and sensitivity increase risk of inaccurate results and improper therapy due to collection problems.

Place tourniquet for no longer than 1 minute. Prolonged phlebotomy causes low PT/APTT results. Traumatic phlebotomy causes longer clotting times.

Draw a discard tube if:
- Butterfly set up is used to draw blood.

Fill vacutainer tube to level controlled by vacuum.
- Tube must be 90% full to maintain blood:citrate ratio of 9:1.
- Do not force blood into tube with syringe plunger.
- Never transfer blood from one tube to another.

Collect coag samples after blood cultures and blood bank samples and before other vacutainers containing additives.

Transport to lab as soon as possible. Some clotting factors are sensitive to room temperature.

Proper Inversion Technique

Did the lab ever call you and request the recollect of a coag sample due to micro clots? Proper sample inversion allows the anticoagulant to disperse throughout the sample rapidly.

- Immediately after drawing; hold tube upright; gently invert 180° and back.
- Rocking, shaking and jiggling are NOT acceptable. Platelets are highly “excitable”!
- Each coag tube requires 3–4 full inversions