TITLE: **LAB SPECIMEN COLLECTION INSTRUCTIONS – Heelstick**

EFFECTIVE DATE: 06/26/19

PERFORMED BY: Resource for Specimen Collections

MANUAL: Specimen Collection Manual

FORMULATED BY: Lab Phlebotomy Supervisor

HEELSTICK (INFANT)

A Patient must have two unique identifiers. The patient's first and last name on the hospital armband is the first identifier and the patient's ID # (Hosp #, Med Rec #) "or" the patient's DOB is the 2nd identifier. Do not use Room # as one of the unique identifiers. The collected specimen(s) must be labeled at the time of draw.

If using electronic identification device:

- Scan patient's hospital armband, perform blood draw, & label tube with the printed label.
- Complete collection process in the Computer System by scanning each labeled specimen tube.
- This is all done at bedside at time of draw.

If not using an electronic identification device:

- Use patient label / chart label. Have patient state name & DOB. Assure that the patient's stated name & DOB matches the label and the hospital armband. Use minimum of 2 appropriate identifiers when identifying the patient & labeling tube. Perform blood draw. Write date/time of draw & collector ID on the specimen label. This is all done at bedside at time of draw. Complete collection process in computer.

Heel-stick process:

- Identify patient correctly (as stated above). Use age appropriate care.
- Wash hands upon entering patient's room (before applying gloves) and before leaving patient room (after removal of gloves). Use other appropriate PPE as needed.
- Identify suitable site for heelstick: Select a puncture site that is on the most lateral and medial **sides** of the plantar surface / sole of the heel. Stick the sides of the heel only.
  - **Must use appropriate safety lancet device for normal newborn, for preemie, for toddler.**
  - Do not puncture through a previous puncture site
  - Do not puncture on the posterior curvature (back/tip end) of the heel.
  - Do not puncture through a bruised or swollen site.
  - Do not puncture the heel more the twice for any one collection.
- Warm the heel for up to 5-15 minutes as needed (best if warmed for 15 minutes).
- Gather supplies: safety lancet device, alcohol pad, gauze.
- Cleanse heel area well with alcohol. Wipe dry with gauze. Do not use cotton balls (due to fibers).
- Hold the foot with a firm grip. Wrap the forefinger around the arch and place the thumb proximal to the puncture site. Hold should be firm but careful; babies bruise easily and blood flow should not be restricted.
- Using appropriate safety lancet device, make a quick, deliberate puncture. A cut perpendicular (across) the lines of the heel print may allow blood to bead up rather than run down the heel.
- Wipe away first drop of blood with clean, dry gauze. (This first drop of blood may be

contaminated/diluted with tissue fluid.

- Apply (repeated) gentle intermittent pressure to obtain a big blood drop and good blood flow; (Don't squeeze or milk the heel; this can cause hemolysis.)
- Allow blood drop to flow freely into the microtainer. Gently flick / tap bottom of microtainer onto surface to allow mixing during collection.
- Fill microtainer to the appropriate level. Apply Cap tightly
- Gently invert filled microtainer 8-10 times immediately after collection.
- Label microtainer tube with appropriate information.
  - Patient's Name
  - Date of Birth or ID #, Med Rec #, or Hosp #
  - Date and Time of collection
  - Collector's initials
- Place clean, dry gauze on site. Apply pressure. Check site for bleeding / bruising before leaving the patient. Use bandage appropriate for infants (per Dr/Nurse).
- Discard safety lancet device in sharps box. Dispose of trash appropriately in trash bin.
- Remove gloves and wash hands/ disinfect hands.

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Revision Dates:	06/06/11 use appropriate lancet device for normal newborn, preemie, and toddler. 08/25/15 Removed this table at end of procedure. Updated effective date in header. 11/08/16 Piedmont Header. 12/24/18 using/not using electronic id device. 6/26/19 added trash bin.