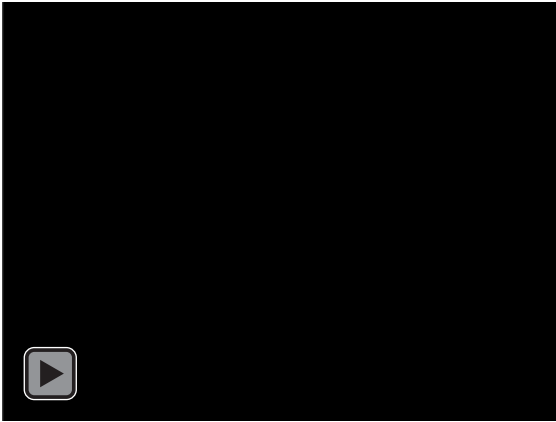


Scenario answers:



Critique on Phlebotomy Video: **Watch the 'Critiqued' video to follow along...**

- 1) Gloves are too big, should not be 'loose'.
- 2) Would not take cap off so close to participant.
- 3) Cotton balls should not be used to stop bleeding! Use Gauze & not cotton. Cotton can pull the platelet plug from the wound and cause bleeding when removed.
- 4) Pumping hand is no longer done...only make a fist and hold until needle is in vein. No pumping because this causes certain analytes to change from normal (some can increase & others decrease).
- 5) Undo needle cap away from the patients arm (she is way too close)!
- 6) The 'C' hold technique has been proven to be unsafe! The 'C' hold is where the thumb and forefinger straddle the needle entry point, with the thumb below, and the index finger above. This is not recommended for safety reasons; a reflex reaction could cause the needle to recoil as it comes out of the arm, and stick into the index finger. The "L" hold technique (thumb 1-2 inches below and slightly to the side of puncture site, and fingers grasping underneath the arm) is the proper way to anchor the vein and secure the patient's arm.

Relaxed veins can roll, that's why they are held down!

- 7) She stuck her Basilic vein, which may have an artery underneath it. Phlebotomist should first feel the Basilic vein area for a pulse. If a pulse is felt, perform the venipuncture somewhere else on the patient's arm.
- 8) Wrong order of draw: that results in contaminated specimen and inaccurate reading. The reason to follow the recommended order of draw is because additives can carry over from one tube to the next. The gold should have been filled first, then the lavender.

Draw Order: Coagulation tube (light blue), Non-Additive (Red Top), SST (Serum Separation Tube), then last is EDTA (purple top)

- 9) If possible, do not use finger to activate needle safety. Recommend using the table top to do this, only use thumb when there is no other way to close.

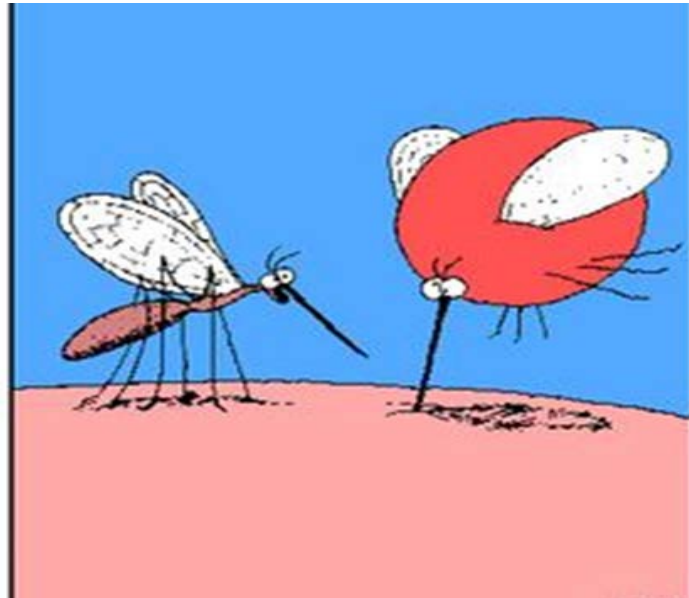
- 10) Do not let the patient hold down on the wound until after your needle is capped.
- 11) She had no gloves on when she discarded the needle!
- 12) Appears that the Sharps container is full, this should be closed once container is $\frac{3}{4}$ full.

Helpful hints:

She palpated with the same hand that she held her needle with. The phlebotomist should palpate with the same finger every time using the opposite hand then the one that you hold the needle with (reason: if she repositions for any reason, her palpating finger is free.).

Once the first tube is drawn, the tourniquet can be released, especially when drawing multiple tubes.

If possible, tie the tourniquet around the sleeve so it doesn't pinch the skin.



Pull Out Taquito, Pull OUT....you hit an ARTERY!!!



**" WHAT DO YOU MEAN YOU WERE
FIRED FOR DRINKING ON THE JOB!?"**