Instruction guide for venesection

Purpose

This is a step by step guide to provide instruction on how to perform therapeutic venesection

- Maintaining patient safety
- Promoting best practice and correct technique
- Understand the referral form and the procedure

Audience/Scope

A Registered Nurse who has level one IV certification and is CDHB certified in cannulation and phlebotomy

Associated Documents

- CDHB Manual, Volume 2 - Legal and Quality
- Informed Consent
- New Zealand Blood Service documents found on CDHB intranet
- The referral is found under Therapeutic Venesection in the Haematology Red Book on line
- CDHB Venepuncture Self Learning Package on line

Prescription

- The prescription for this procedure is an electronic version and can be found under therapeutic venesection in the CDHB Haematology Red Book.
- The referral form lists diagnosis, medical history, treatment required and frequency of visits, blood tests, target range, volume of blood to be removed and replacement fluid if required.
- Recordings- BP, pulse, oxygen saturation, blood results and record of the procedure are recorded on the reverse side of the form.

Equipment

- Medi norm 600ml high volume bottle
- Terumo Safety Winged Infusion Set 19g 10.1x19mm
- Codan extension tube BC 541 85cm length
- Luer lock Connector Lot 1033613
- Chlorhexidine 2% and Alcohol 70% wipes, pressure dot , Multisorb gauze square and micro pore tape.
- 10 ml syringe for blood test checking CBC and iron studies as directed on the prescription.
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**Post procedure:**
- Offer the patient a biscuit and a drink tea/water
- Check insertion site
- Record amount of blood drawn and the patients recordings on the referral form
- Document in the clinical notes the patients hydration status and recommended volume of fluid input in the next 24 hours (2-3 litres)
- Patient is required to stay for up to 30minutes post procedure

**Waste management**
- On completion of the procedure ensure the tubing is closed using the slide clamp to ensure that blood cannot escape from the container.
- Dispose of the medi norm container and the tubing into the yellow waste bag.
- The butterfly needle is disposed of in the yellow sharps container.
- Refer to Blood and Body Fluid Volume 10
Trouble Shooting

- **Postural drop:** Should this happen pre or post procedure the patient will require replacement IV fluids therefore a 22g/24g cannula will need to be inserted.

- **Slow blood flow during the procedure:** The patient’s diagnosis can influence blood flow. The flow rate can be increased by asking the patient to slowly and repeatedly squeeze on a ball. This activates the ‘muscle pump’ encouraging the venous flow along the vein.

- **Slow or cessation of blood flow:** If the blood flows stops remove the butterfly and select another vein to perform the venepuncture. Follow steps 2-6 in the procedure chart page 2.

- **Haematoma:** Can occur at site, apply cold compress

Reference:
