SPECIMEN OPTIMAL SAMPLING

BLOOD COLLECTION CHECKLIST

- Blood must be collected as soon as the patient develops clinical symptoms (fever), and prior to the initiation of antimicrobial therapy.
- **Do not** delay treatment if your patient is in a critical condition and/or septic.
- If the patient is already on antimicrobial therapy, collect blood before administering the next dose and / or when the patient spikes a fever.
- The detection of bacteraemia and fungaemia requires a quality blood sample for culture See local best practice recommendations for blood samples.

Note: bottles for fungaemia or TB are different to the standard aerobic / anaerobic set and will need to be taken separately.

- ◯ 1. Gather blood collection equipment; tourniquet, blood collection tubes, needles, syringes, blood collection sets (aerobic & anaerobic blood culture bottles), alcohol swabs / cotton wool, bandages.
- ◯ 2. Wash hands using soap and water or alcohol-based sanitiser.
- ◯ 3. Don personal protective equipment if appropriate.
- ◯ 4. Introduce yourself to the patient .
- ◯ 5. Match patient details to those on the laboratory request form.
- ◯ 6. Explain the procedure to the patient and obtain their consent.
- ◯ 7. Disinfect the top of the collection bottle with alcohol prior to inoculation.
- ◯ 8. Let the patient sit comfortably and position the arm appropriately.
- ◯ 9. Palpate and locate a suitable vein while wearing sterile gloves.
- ◯ 10. Disinfect the venepuncture site with alcohol (preferably 2% chlorhexidine in 70% isopropyl alcohol).

  Start from the centre, move downward and outward to cover an area of 2cm.

  Allow 30 seconds to dry before puncture.

- ◯ 11. Draw blood (for adults: 8-10 ml blood per bottle; for children: 2-5ml; for infants: 0.5-2ml, or according to facility protocol based on age / weight). Aseptically place into sterile blood culture bottles.
- ◯ 12. If **infective endocarditis** is suspected, state on form so laboratory knows that prolonged incubation is required. This requires multiple blood cultures, from **different venepuncture sites, taken at different time points** (i.e. sampling of 2 or 3 blood cultures spaced at intervals of at least 20 min, to detect transient or intermittent bacteraemia).
- ◯ 13. Complete all sections of the laboratory request form.
- ◯ 14. Label the sample correctly with patient's details, date and time sample was taken (can be handwritten or printed).
- ◯ 15. Dispose of infectious waste and sharps as per standard operating procedures (SOPs).
- ◯ 16. Send blood sample to laboratory for analysis in a leak-proof plastic bag, together with the completed laboratory request form.
- ◯ 17. Review within 72 hours or as soon and ID and/or AST results are available.

Blood-culture bottles should be kept at room temperature when transport is delayed.

*****Do not refrigerate blood culture bottles*****

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