Perform venepuncture

using a smooth, clean entry with a 16-gauge needle.

 Ask the donor to open and close the fist slowly every 10–12 seconds during collection.







 Remove the tourniquet when the blood flow is established or after 2 minutes, whichever comes first.

• Monitor the donor.

Look for:

- sweating, pallor or complaints of feeling faint that may precede fainting;
- development of a haematoma at the injection site;
- changes in blood flow that may indicate the needle has moved in the vein, and needs to be repositioned.

12 • Mix the collected blood gently with the anticoagulant,

either manually or by continuous mechanical mixing, about every 30 seconds during the donation.

13 • Once sufficient blood has been collected,

 Withdraw the needle gently and then give the patient a clean gauze or dry cotton-wool ball to apply to the site with gentle pressure.



- Collect samples.
- Cut off the needle using a sterile pair of scissors.
- Collect blood samples for laboratory testing.

• Care for the donor after the donation.

- Ask the donor to remain in the chair and relax for a few minutes.
- Inspect the site; if it is not bleeding, apply a bandage to the site; if it is bleeding, apply further pressure.
- Before the donor leaves the donation room, ensure that the person can stand up without dizziness and without a drop in blood pressure.
- Offer the donor refreshments.

15 • Ensure the blood unit and samples are stored and delivered appropriately.

Practical guidance on venepuncture for blood donation







WHO guidelines on drawing blood: **Best practices in phlebotomy**

• Assemble equipment

Include a closed





containing anticoagulant, with an integrally attached tube and needle.

2 • Perform hand hygiene.

(if using soap and water, dry hands with single-use towels)



3 • Identify and prepare the donor.

Ask the donor to state his full name.



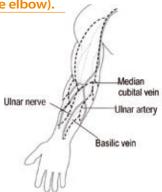
Label blood collection bag and test tubes.

Ensure that:

- the blood collection bag is of the correct type;
- the labels on the blood collection bag and satellite bags, sample tubes and donor records have the correct patient name and number.



- Palpate the area; locate a vein of a good size that is visible, straight and clear.
- The vein should be visible without applying the tourniquet.



6 • Apply a tourniquet

or blood pressure cuff inflated to 40–60 mm Hg.



7 • Ask the donor

to form a fist so that the veins are more prominent.



8 • Put on well-fitting, non-sterile gloves.



9 • Disinfect the site.

If visibly dirty, wash with soap and water, and then wipe dry with single-use towels.



- One-step procedure (recommended takes about one minute):
- > use a product combining 2% chlorhexidine gluconate in 70% isopropyl alcohol;
- > cover the area and ensure that the skin is in contact with the disinfectant for at least 30 seconds;
- > allow to dry completely (30 seconds).
- Two-step procedure (if chlorhexidine gluconate in 70% isopropyl alcohol disinfectant is not available, use this procedure takes about two minutes):
- > step 1 use 70% isopropyl alcohol;
- cover the area and ensure that the skin is in contact with the disinfectant for at least 30 seconds:
- allow to dry completely (about 30 seconds);
- > step 2 use tincture of iodine or chlorhexidine (2%);
- cover the area and ensure that the skin is in contact with the disinfectant for at least 30 seconds:
- allow to dry completely (30 seconds).

DO NOT touch the site after disinfection.

