

# CLINICAL PROCEDURAL SKILLS

## VENEPUNCTURE

# TUTOR NOTES

### Duration of Session

45 Minutes

### Prior Knowledge

No prior knowledge is assumed. Students will have received the Venepuncture clinical procedural skills guidance document.

### Learning Objectives

- Demonstrate the ability to undertake venepuncture competently using an aseptic or non-touch technique.
- Explain the infection risks and appropriate preventative measures.
- Describe how to prepare a patient for venepuncture.
- Demonstrate an awareness of the NHSGGC policies pertinent to venepuncture.
- Identify appropriate personal protective equipment (PPE).
- Identify appropriate equipment for undertaking venepuncture
- Identify issues surrounding potential complications and discuss appropriate actions to prevent or treat these complications.
- Describe the procedure for reporting incidents and accidents involving self, patients and others.
- Demonstrate the accurate completion of records appropriate to venepuncture.

### Equipment Required

- Venepuncture Flashcard
- Venepuncture Tutor Notes
- Venepuncture prosthetic arm.
- Appropriate personal protective equipment (gloves, apron, face-mask)
- Accessible and functioning sharps bin.
- Cleaning swab
- Gauze

- Tape
- Vacutainer needles and butterfly needles
- Blood sampling bottles
- Sterile dressings (plasters)
- Tourniquet

### Session Plan

This session plan is for guidance purposes only

The emphasis of each section of the session should be to allow students the maximum time possible to practice the skill.

The flashcard included in these notes will be available as hard copies in the clinical procedural skill station.

5 minutes- Explain indications and usefulness of the skill.  
Discuss contraindications to venepuncture.

10 minutes- Tutor demonstrates the skill

25 minutes- Students practice the skill.

5 minutes- Summary and opportunity for questions

It is suggested to use a four-stage approach to demonstrate the skill.

<b>Stage One:</b>	Tutor Demonstrates the Skill in “real time”
<b>Stage Two:</b>	Tutor talks through the component parts of the skills whilst demonstrating again
<b>Stage Three:</b>	A student talks through the skill as the tutor demonstrates for a third time
<b>Stage Four:</b>	Students Practice the Skill



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### VENEPUNCTURE

#### PRE PROCEDURE

Introduce self, explain procedure and obtain consent from patient.

Perform appropriate hand hygiene and don PPE according to local protocol.

Collect a tray with the required equipment- sharp safe needle and quickshield or butterfly and vacutainer system.  
Select the necessary blood bottles.

Ensure the patient is comfortably positioned and select the site of venepuncture (antecubital fossa/dorsum of hand)

#### PROCEDURE

Palpate to identify the vein.

Apply disposable tourniquet approximately 7-8cm above venepuncture site.

Cleanse skin with alcohol swab – minimum of 15 secs and allow to dry naturally

Prepare equipment - connect sharp safe needle and quickshield or butterfly and vacutainer system.

Anchor the vein with non-dominant hand. Using dominant hand with open end of needle facing upwards advance the needle at approximately 30° angle to the skin.

Once flashback is visualised in flashback chamber, use non dominant hand to connect appropriate blood bottles into vacutainer holder, using order of draw if necessary.

Once all blood bottles have been adequately filled, release tourniquet and loosely cover puncture site with gauze using quickshield safety device - remove needle from vein and activate safety device cover over needle on nearest solid surface. In both instances, you should hear an audible click when safety device is activated

**SKIN TO BIN**- Dispose of the needle in a sharps bin.

#### POST PROCEDURE

Thank the patient and explain the procedure is over.

Apply pressure to puncture site until haemostasis is achieved - Apply sterile airstrip plaster if no patient allergies.  
Alternatively, gauze and tape may be used

Perform hand hygiene and dispose of PPE in accordance with local policy.

Confirm patient details and label the blood bottles in accordance with local policy. Send samples to the relevant laboratory