**Blood Collection Hand Hygiene Practice Guidelines**

**AUDITING GUIDE**

**Background:**
Like any procedure, during the collection of blood there is a risk of direct introduction of pathogens into a patient’s body\(^1\). Effective hand hygiene immediately prior to performing any procedure is the single most effective way to minimise the risk of transmission of microorganisms\(^2\). HHA recommend the following guidelines as the “Gold Standard” in hand hygiene during the collection of blood specimens.

**Method:**

1. Identify all required equipment, retrieve required items from trolley/storage area and place everything in kidney dish.
2. Take all equipment into patient zone.
3. **Perform Hand Hygiene**
4. Check patient identification (Moment 1- must take place prior to any patient contact)
5. Prepare needle and vacutainer, place in kidney dish.
6. Position patient for procedure
7. Apply tourniquet to palpate and identify appropriate vein\(^*\)
8. Release tourniquet so that it remains in position but is not restricting blood flow
9. Ensure patient positioned and equipment ready for procedure
10. Tighten tourniquet\(^*\)
11. Perform Hand Hygiene (Moment 4- after touching patient & Moment 2- must take place immediately prior to insertion of needle, tourniquet tightening and releasing permitted)
12. **Perform Hand Hygiene** (Moments 3 & 1- must take place immediately after disposal of sharps and waste and on removal of gloves, no other environmental or patient contact permitted)
13. **Perform Hand Hygiene** (Moment 4 OR Moment 3- if potential body fluid exposure )
Notes:
- *Setting up the patient and application of tourniquet must always take place prior to performing hand hygiene and donning gloves for venipuncture.
- Tourniquets are commonly used on multiple patients and are have the potential to become highly contaminated \(^2\).
- Tourniquets are non critical items and require thorough cleaning between patients\(^3\). Where practicable, a clean tourniquet should be used for each patient.
- **Touching an applied tourniquet after performing hand hygiene can recontaminate the users hands (with the patients own skin flora).
- After performing hand hygiene and donning gloves for needle insertion it is best practice NOT to manipulate the applied tourniquet, although this may be unavoidable due to individual patient or clinician needs.
- If the tourniquet is touched after donning gloves, (e.g. for tightening and releasing purposes) contact should be kept to a minimum.

Reference: