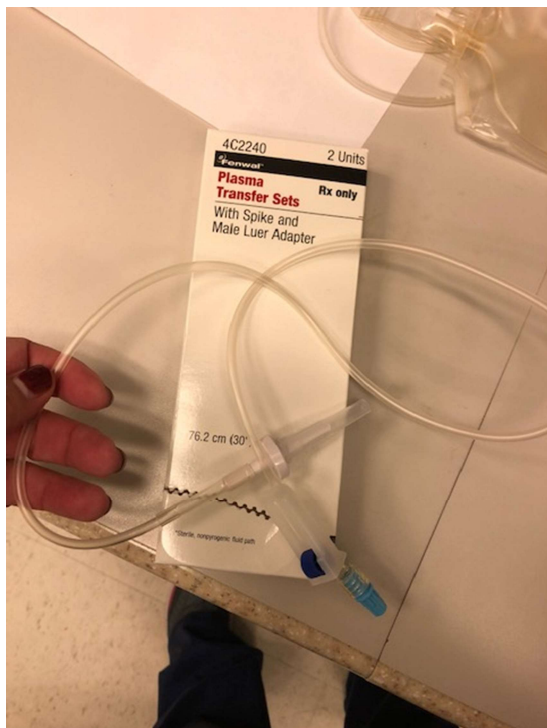
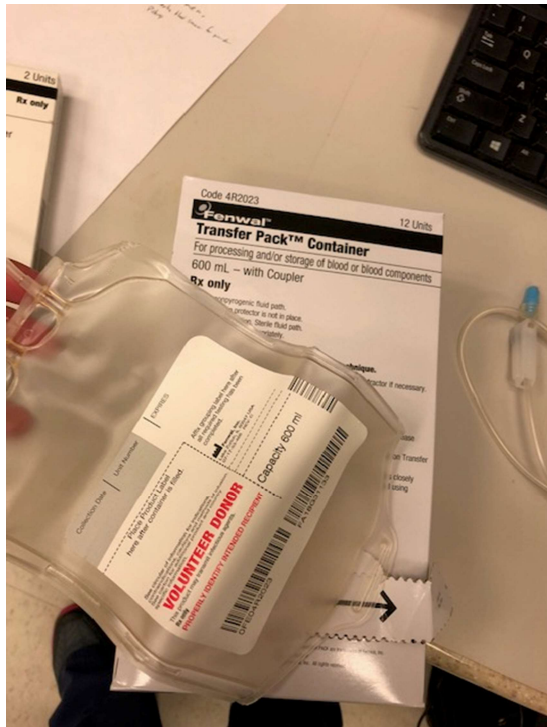


Therapeutic Phlebotomy Supplies to allow for closed system

January 2019 updated July 2020



Supplies Needed:

- Transfer Pack Container 600ml bag get from HEM4 unit or HATS dept
- Plasma Transfer Set with Spike and Male Luer Adapter
SAP# 18389
This only comes from general OR storeroom (call 55486, located on B2, via the material elevators in Zayed
- Stopcock (in HEM4 med room above sink)
- Leurlock syringe 60 ml (in pyxis)

- Follow provider orders for how much blood cc's to remove from a patient as a nurse communication order in EPIC
- If you are just removing for a patient with a HIGH hemoglobin then you would just remove blood per orders
- If you are doing what is called a "simple RBC exchange" for Sickle cell you should get the RBC unit from blood bank and then remove the amount of blood ordered from patient then administer unit of RBC(s).
- IF you are removing blood d/t Polycythemia Vera you would removed blood without transfusion afterwards.
- Assess vitals before and after removal of blood
- Need large bore PIV or central access
- Have saline flushes to flush if line gets sluggish (this usually happens primarily with PIV's)

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- Empty Bag: The long tubing with spike coming off of the empty bag needs to be tied off and not used for anything.
- Transfer tubing: Insert the spiked end of the transfer set tubing into the plasma collection bag (spike it like you would a blood product.)
- Attach the other end of the transfer set tubing to the stop-cock. Attach a syringe to the center piece of stop cock.
- Then connect end of stopcock (the male adapter) to the patient (needless connector either at the end of the PIV or Central line).

- Once you're all set up and connected to the patient: turn the stop-cock off the bag, and pull back on the syringe.
- Then turn the stop-sock off to the patient and push the blood into the bag. Keep going until you've collected all the volume ordered!
- Check vitals before and after removal of blood