

## Capillary Puncture (Heelstick) Checkoff

Phlebotomy students will be observed by an authorized experienced clinical instructor. Each item on the checklist must be performed for each heelstick. After observation, the clinical instructor will sign name and date. A phlebotomy student is considered capable of performing a heelstick after completing five (5) successful, observed heelsticks. Each phlebotomy student should perform a minimum of 10 heelsticks, preferably 15 *if this skill is available at your site*.

Name of Phlebotomy Student: \_\_\_\_\_

TASK	Draw #:	#1	#2	#3	#4	#5
1. Review request form(s). Gather appropriate supplies for test(s) ordered.						
2. Check for any isolation notices and follow instructions accordingly if present.						
3. Verify name and patient number by checking ID band or other form(s) of ID. <i>(This is the most important step in the collection procedure.)</i>						
4. Identify self and purpose of visit. (To child or parents of infant.)						
5. Check for diet restrictions. (If the test requires a fasting specimen, be sure patient is fasting.)						
6. Wash hands by accepted nursery scrub technique. (Scrub up to forearm for 3 minutes.) For outpatients wash hands according to the accepted protocol.						
7. Position the patient.						
8. Position equipment in appropriate place close to patient. Verify that necessary microtainers or other supplies are present.						
9. Put on gloves.						
10. Select heel.						
11. Warm the heel if cold. Massage foot gently 5 or 6 times to aid blood flow.						
12. Clean the site with an alcohol prep. Allow to air dry.						
13. Remove the lancet from its protective wrapper, if necessary.						
14. Hold heel gently but firmly with your thumb above and well away from the puncture site. The puncture site should be on the side of the baby's heel. Most lancets are semi-automated and retract. Position the lancet firmly on the skin, DO NOT cause indentation as this may result in a puncture of an unacceptable depth. <i>Do not exceed a depth of 2.4 mm on infants, particularly neonates..</i>						
15. Wipe the first drop of blood away with a clean gauze.						
16. Collect specimen by applying moderate pressure and allowing blood to flow from cut into the collection device or filter paper. Gently massage to obtain proper amount of blood.						
17. Mix anticoagulated tubes during collection by shaking gently or flicking occasionally.						
18. When collection is completed, apply clean gauze to the site and apply pressure until the bleeding has stopped.						

19. If using microtainer, remove the collection device from the microtainer and replace the cap. Invert to mix making sure that the bubble travels from top to bottom 2-3 times.					
20. Apply a gauze bandage when bleeding stops. <b>DO NOT BANDAGE A PUNCTURE SITE THAT IS STILL BLEEDING.</b> Open the gauze bandage, wrap it around the heel/ankle and tie loosely. <b><i>Do not use a bandaid.</i></b>					
21. At bedside, correctly label tubes with appropriate information. <i>(This is the second most important step in the heelstick procedure.)</i>					
22. Discard used equipment and trash properly.					
23. Thank family member if present.					
24. Remove gloves and wash hands.					

Signature

Date

1st draw supervised by: \_\_\_\_\_

2nd draw supervised by: \_\_\_\_\_

3rd draw supervised by: \_\_\_\_\_

4th draw supervised by: \_\_\_\_\_

5th draw supervised by: \_\_\_\_\_