

# Collection of Blood Cultures by Central Line: DO IT RIGHT

## WHY?

Diagnosis of septicemia is one of the most important functions of the microbiology laboratory.

Inadequate volumes result in higher contamination rates of blood cultures and result in false negative blood cultures.

Samples collected with proper technique and blood volume lead to accurate laboratory results and appropriate patient care.

### Volume is the KEY to proper blood collection:

Blood Volume per one BC ordered						
Patient Weight (kg)	Total Volume	First site (fs) Second site (ss)	1 <sup>st</sup> blood culture set		2 <sup>nd</sup> blood culture set	
			Orange top	Green top	Orange top	Green top
<4 kg	1 ml	1 ml	0.5	0.5	Repeat within 48 hours if positive for skin contaminant	
4-7.9 kg	3 ml	3 ml	1.5	1.5	Repeat within 48 hours if positive for skin contaminant	
8-13.9 kg	6 ml	3 ml fs / 3 ml ss	1.5	1.5	1.5	1.5
14-18.9 kg	12 ml	6 ml fs / 6 ml ss	3	3	3	3
19-25.9 kg	16 ml	8 ml fs / 8 ml ss	4	4	4	4
26-39.9 kg	20 ml	10 ml fs / 10 ml ss	5	5	5	5
40-53.9 kg	32 ml	16 ml fs / 16 ml ss	8	8	8	8
>54 kg	40 ml	20 ml fs / 20 ml ss	10	10	10	10

1.



- One blood culture set is one anaerobic bottle (orange label) and one aerobic bottle (green label).
- Remove caps from bottles.
- Use individual alcohol wipes to wipe top of bottles.
- Cover each bottle with an alcohol pad.

4.



- Attach blunt needle.
- **First:** Transfer half of the blood into the anaerobic (orange) bottle.
- **Second:** Transfer the remainder into the aerobic (green) bottle.
- Invert bottles 3-5 times to mix.

2.



- Scrub the hub with alcohol for 15 seconds.
- Allow to air dry.

5.



- Label bottles using computer generated patient ID label.
- Do not cover bottle bar codes or lot numbers.
- Include time/date/initials, volume and site.

3.



- Draw correct volume of blood based on above chart.