

Information sheet

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BACTEC blood culture collection procedure

Key messages: 1. <u>Safety</u> 2. <u>Asepsis</u> - reduce contamination <u>Sensitivity</u> – collect correct volume

	Procedure	Reasons	
Before	Prepare equipment (below) — take them on a clean stainless steel tray with a sharps container to the bedside. Adults: two BACTEC bottles (aerobic and anaerobic); Children: single adult aerobic bottle; Infants and neonates: single PEDS-plus bottle (alternative adult aerobic bottle). Perform hand hygiene with alcohol hand rub as you arrive at the	Don't label the blood culture bottle away from the patient- labelling errors may occur. Don't collect from an old IV line! Hand hygiene before patient	
	patient's bed	contact!	
Preparation at bedside	 i) Identify the patient with care – "What is your name?" ii) Explain procedure and gain verbal consent from patient iii) Label the bottle (right). Request form ID must match. Request form must include requesting doctor with contact # iv) Steady the culture bottle(s) in a rack or small box; remove the cap and disinfect with alcohol swab; discard. v) Assemble needle & syringe (20/10/5/2mL as needed. 	Closed or leading questions may lead to patient mis-identification! Document at least 2 patient identifiers (name, MRN, DOB, sex; date and time of collection). Contact # for lab. to call result Caps are not sterile -reduce contamination by disinfection	
Collection	i) Tourniquet on; identify venepuncture site; ii) Repeat hand hygiene and put gloves on iii) Clean skin site with several alcohol swabs until no discoloration seen on swab; then use fresh swab to disinfect—use a circular motion moving outward from site. iv) WAIT 60 seconds! Venepuncture with no-touch technique; release tourniquet once in vein; collect- Adults: 16-20mLs; Children: 4-10mLs (volume=age in years) Infants- 1-3mLs Neonate 0.5-1mL v) Withdraw needle; apply cotton wool to site (don't touch needle with c/w); ask patient to apply pressure to c/wool.	Pre-procedure Hand Hygiene! At least 30 seconds required for last alcohol swab to disinfect. Don't re-palpate site— risk of culture contamination. Correct volume maximises detection sensitivity. Contamination may occur if c/w touches the needle!	

	Procedure	Reasons	
	i) With the blood culture bottle(s) held in the rack, inoculate with needle and syringe – keep fingers away from cap!	Use the same needle – changing the needle is a safety risk!	
Afterwards	 ii) Discard needle & syringe into sharps container. iii) Place adhesive tape over the c/wool at puncture site. iv) Remove gloves, discard waste and perform hand hygiene v) Transport bottle(s) and request form to lab. without delay (tie together with glove material). Don't refrigerate. 	Don't overfill—10mL per bottle (vacuum is strong- watch!) Post-procedure hand hygiene Check labelling and request form for accuracy and completeness	

Equipment

- Stainless tray (clean before use)
- Sharps container (or kidney dish)
- Alcohol hand rub & gloves
- Blood culture bottle(s) (check expiry date) & rack
- Syringes (20mL, 10mL, 5mL, 2mL) & needles (21G, 23G)
- Alcohol swabs
- Cotton wool & adhesive tape
- Lab request form (below)







Accession label with lab no: affix here	Microbiology Request Lab telephone: 3248193/183 Microbiologist, Dr G Ak	First Name: Place of residence DOB (preferred):	Admission Da Mos Surname: Borck 3 2 2 2005 Age:	Smith
Date sampled: 2//. Receipt in Lab:/_		☐ CSF ☐ Faeces ☐ MSU ☐ Sputum		□ IDC
Patient location (War / こん	d/Dept):	Other (e.g. central line tip)		
Clinical information: Slepsis Preumo Current antibiotics: Penicillin		body location: Left Right (circle) Test required: Microscopy Culture NOT acceptable: tips of IDC, NGT, wound drains or ET tubes One specimen can include two blood culture bottles collected from the same venepuncture. Otherwise, a separate request is required for every microbiology specimen.		
Requesting person (property)	rint clearly & phone #			3/2Signed: 1/2