

# MINIMAL BLOOD SAMPLING 2019

A snapshot audit of cumulative blood volume sampling to identify risk of iatrogenic anaemia. See full report at: [bit.ly/BMauditreports](http://bit.ly/BMauditreports)



## BACKGROUND

Repeated blood sampling can lead to iatrogenic anaemia.

**Preventing** iatrogenic anaemia could reduce the need for transfusion/intervention.



## LITERATURE

For every mL taken there is a **decrease** in Hb of **0.7g/L**.<sup>2</sup>



**Clinically significant** changes occur between **6.6–10g/L** (equivalent of **94–143mL**).



## OBJECTIVES

**Identify** policies and practices occurring in health services aimed at **reducing** iatrogenic anaemia.

Assess **total** blood volume taken from patients for **sampling**.



## RESULTS



**2%** [1/43] health services have a policy to **mimimise blood** sample collection.

**53%** Implementation of **minimal blood** sampling has not been considered.



**35%** Perceive small **volume** tubes are either unsuitable/unavailable.

**21%** **Barriers** are unknown.



## METHOD



Online **audit** of **136** health services in **4 jurisdictions**

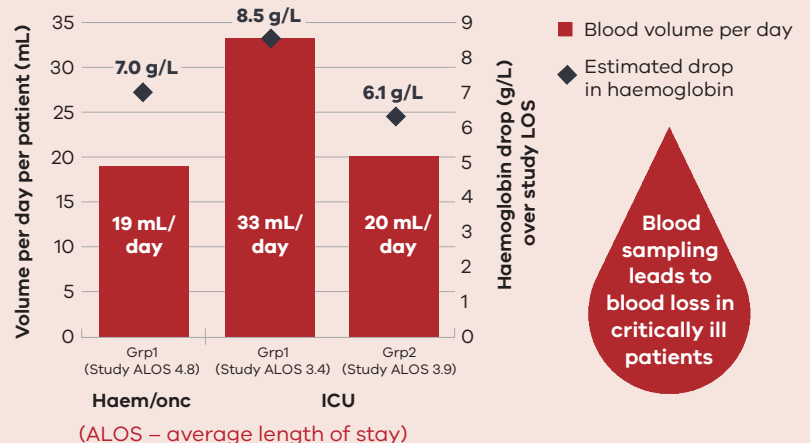


1 August to 20 September **2019**

Response rate:

**Policy n=43**  **32%**

**Practice<sup>1</sup> n=27**  **20%**



## CONCLUSION

The results show that there is potential for iatrogenic anaemia to develop in high acuity areas. Health services should regularly review and monitor phlebotomy practices.

<sup>1</sup> Practice – audit measuring daily blood volume loss through blood sampling

<sup>2</sup> Thavendiranathan P, Bagal A, Ebida A, Detsky AJ, Chaoudry NK (2005) J. Gen Med., Vol 20, pp520-4

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