HemoCue Hb 201 DM
Sample Collection Techniques

Venous and Arterial Samples

1. Mix the blood well before performing the measurement. Place a drop of blood onto a HYDROPHOBIC surface (i.e. a plastic film).
2. Make sure that the drop of blood is big enough to fill the cuvette completely. Introduce the cuvette tip (pointed end) into the middle of the drop. (The cuvette tip should touch the surface.)
3. Fill the cuvette in one continuous action. (The sample will be drawn up into the cuvette via capillary action.)
   It should never be topped up after the first filling. (Do not double dip.)
   Make sure that there are no bubbles in the filled cuvette; if present dispose of the cuvette and take a new sample from a fresh drop of blood.
4. Wipe off the excess blood on the outside of the cuvette tip. Make sure that no blood is drawn out of the cuvette in this procedure.
5. Place the filled cuvette into the cuvette holder and gently close the cuvette holder into the measuring position.

Finger prick

1. Make sure that the patient sits comfortably. The hand should be warm and relaxed. Increase the blood circulation by gently massaging. The patient's fingers should be straight, but not tense, to avoid stasis.
2. Use only the middle finger or the ring finger for sampling. Avoid finger with rings.
3. Using your thumb, lightly press the finger from the top of the knuckle to the tip. This stimulates the blood flow towards the sampling point.
4. It is important to use the correct lancet for Haemoglobin samples! High flow, pressure activated, "tri-bevel" point. Using the recommended lancet will not only provide a better bleed, it is much less painful for the patient, ask Radiometer for more details if you are not sure if you're using the correct lancet.
5. Move your thumb to the tip of the finger and squeeze. Prick at the side of finger which is facing the patient's thumb. Not only is the blood flow at its best at this point, it also causes the least pain.
6. Wipe away the first three drops of blood. This stimulates the blood flow and removes any excess interstitial fluid that would be present in the initial drop of blood. If necessary, apply light pressure again until another drop appears. It is vital to achieve a free flow of blood. Avoid "milking" from the base of the finger.
7. Make sure that the drop of blood is big enough to fill the cuvette completely. Introduce the cuvette tip (pointed end) into the middle of the drop. (The cuvette tip should touch the skin.)
8. Fill the cuvette in one continuous action. (The sample will be drawn up into the cuvette via capillary action.)
   It should never be topped up after the first filling. (Do not double dip.)
   Make sure that there are no bubbles in the filled cuvette; if present dispose of the cuvette and take a new sample from a fresh drop of blood.
9. Wipe off the excess blood on the outside of the cuvette tip. Make sure that no blood is drawn out of the cuvette in this procedure.
10. Place the filled cuvette into the cuvette holder and push the cuvette holder into the closed position in the analyser.