



Issue: **Venesection Protocol**

Raised by: Clif Van Der Oest (Top End RMP)

Background: Venesections are performed in a number of Remote health centres on an ad hoc or semi regular basis. However, to date, there has been no agreed procedural protocol to support staff for this procedure.

Discussion: Various venesection protocols from other institutions were reviewed by Best Practice Group and a suitable procedural protocol for the remote setting has been generated.

A couple of related issues that in the past have created difficulty when performing venesection in Remote, have also been considered.

Firstly, the availability of a suitable drainage bag has been problematic. Therefore a dedicated blood collection bag has been added to the Remote Health Stock process, and health centres may now source the bag by that means.

Secondly, safe disposal of collected blood has been a legitimate concern. Whole blood is classed as 'Clinical Waste' in waste management terms. Remote Health has established guidelines for management of this type of waste in the Atlas item [Waste Management](#). The Venesection protocol that has been developed outlines the more specific expectations about how to contain and manage collected blood within the broader Waste Management guidelines.

Consultation: Julie Domanski (Transfusion Nurse, RDH), Australian Red Cross Blood Service (Alice Springs & Darwin)

- References:*
- Venesection Protocols from:
 - Peter MacCallum Cancer Centre
 - Bayside Health
 - Djerriwarrh Health Service
 - Therapeutic Venesection Learning Package, Bayside Health

Outcome: A [Venesection Protocol](#) has been endorsed for inclusion in the RHB **Additional Clinical Protocols folder**.

Blood collection bags for purpose of venesection are now available through the Remote Health Stock process.