

Collect blood in the serum tube first

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This short article is relevant for those people or institutions that use vacuumed tubes for venepuncture and does not apply to using a needle and syringe.

One of the disadvantages of using a vacuumed tube system for directly withdrawing blood is that there is always a possibility that the needle dislodges or that the vein collapses before all the necessary tubes are filled.

For a long time, this would involve an apology from myself to my patient and a second venepuncture to collect the necessary blood. This is actually a reason that to this day, I still prefer using a plain needle and syringe (despite the increased needlestick risk) for patients with either difficult access or who require blood in many tubes.

However, this is a trick that I learnt from experience:

Always collect blood in the serum tube first.



Vacutainer system

The reason for this is simple: **there are no additives in the serum tube and you can withdraw blood out of it to redistribute if necessary.**

Despite the serum tube being usually quite large, only a couple of millilitres of blood are necessary for most simple tests (e.g., UEC, LFTs, Ca, Mg, PO₄). If you have already collected 5-6 mL of blood and the vein collapses, you can easily (but carefully) redistribute this blood from the serum tube into any other necessary tubes (e.g., EDTA tube for FBC).

You must be quick, however, as once the blood has coagulated (usually 1-2 minutes), this trick is no longer feasible.

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