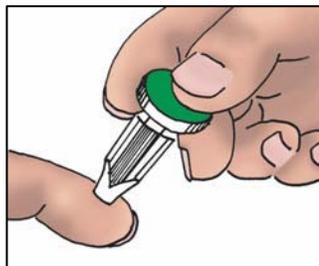
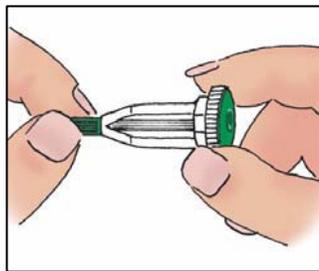


Fingerstick Protocol

Follow these tips to help you consistently perform good fingersticks and hence accurate lipid results (and don't forget to wear your gloves!)



- Finger should be clean and dry.
- Use one of the middle fingers of the non-writing hand.
- Hand should be warm and relaxed – to warm the hand you can wash the patient's hand in warm water or gently massage the finger from base to tip several times to bring the blood to the fingertip.
- **Clean the finger with an alcohol swab**, to remove any fats from soap/make up (could interfere with Trig readings)
- **Dry finger thoroughly with sterile gauze** to wipe off residual alcohol solution of any fats
- **Prepare a single use retractable blade lancet** designed to generate a sample of adequate volume (35µL). [This is equivalent to two large drops of blood]. *We recommend the use of the yellow Haemolance or Unistik Extra 3 lancets: to remove protective cover, turn and twist in one movement (a full turn), (standard Diabetic lancets do **not** produce sufficient volume of blood).*
- **Perform a deep and firm puncture**- best position is the side of the middle finger, about 5mm from the edge of the nail. *(there are relatively few nerve endings here- so less painful, and it easier to let a drop of blood form on the side of the finger without it dispersing).* It may help to put the person's finger on the clinic table to allow you to press firmly down when activating the lancet. By pressing down really firmly you will ensure a deep enough penetration to get a good blood sample. *Don't worry you won't hurt them!*
- Dispose of the used lancet in a suitable sharps container
- Create a free flowing drop of blood - **Remember to wipe off the first large drop of blood**, as this may contain tissue fluid and tissue detritus. Keep the patient's hand below heart level. Squeeze the tip of the finger until a second large drop of blood forms.
- Hold the capillary tube (*Heparinised to avoid clotting*) at a slightly **descending angle** to the drop of blood. Touch the capillary tube into the drop of blood, and the tube will fill by capillary action. Usually you will need to create another drop of blood by squeezing the finger again, re-applying the capillary tube to the next drop of blood and then completely fill the capillary tube to the black mark. *Avoid collecting air bubbles in the capillary tube by ensuring that you place the capillary tube into a large enough drop of blood on the side of the finger.*
- **Dispense blood from the filled capillary tube** by pressing down on the black plunger until all the blood is in the well in the cassette. The blood should be dispensed within four minutes of collection. Dispose of the used capillary tube in the sharps container.
- **As soon as you have dispensed the blood sample** into the cassette, **place the cassette in the analyser and press 'Run'**.
- Wipe off any excess blood and have the patient apply pressure to the puncture with the gauze until the bleeding stops.