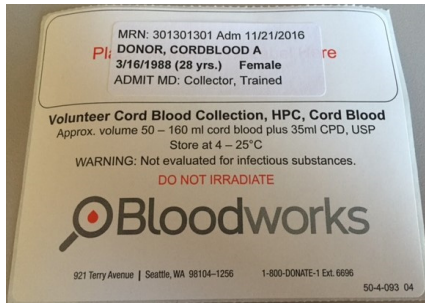
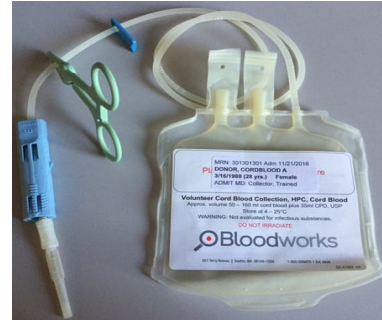


# CORD BLOOD COLLECTION Instructions

1. Affix **mother's hospital ID label** to the **HPC, Cord Blood** label.
- Affix over base label **on collection bag**.



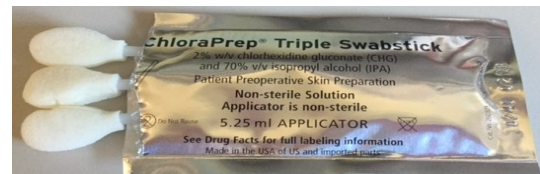
2. Snap **needle guard** onto tubing behind needle.
- Clamp **hemostat** behind needle guard.
- Loosely place **slide clamp** on tubing behind hemostat.



3. Select a venipuncture site close to the intended cord clamp.
- **Wipe the entire umbilical cord** with the provided cleansing towelette, removing as much biologic matter coating the cord as possible.



4. Swab venipuncture site, closest to cord clamp, with **Chloraprep** for **30 seconds**.
  - Allow site to **dry** at least **30 seconds**.
- \*n/a if C-section delivery in a sterile field*



5. Doubly **clamp and cut** the cord
- **Insert needle (bevel down)** into vein at cleaned site.
- **Release hemostat** to allow blood to flow into collection bag.
- Keep **bag below venipuncture site** to promote drainage.
- Gently **"milk" cord**.
- Gently **agitate bag** to mix blood with anticoagulant to prevent clotting.

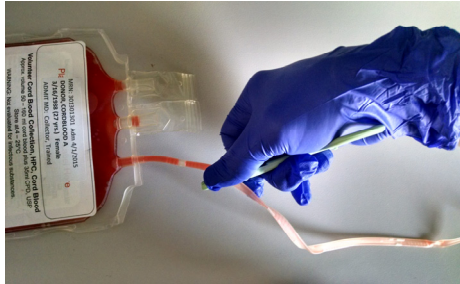


6. Collect blood until **flow ceases, vein collapses, and cord is white**.
- **Close slide clamp** on tubing to prevent air contamination.
- **Remove needle** from vein and **lock needle guard** over needle.

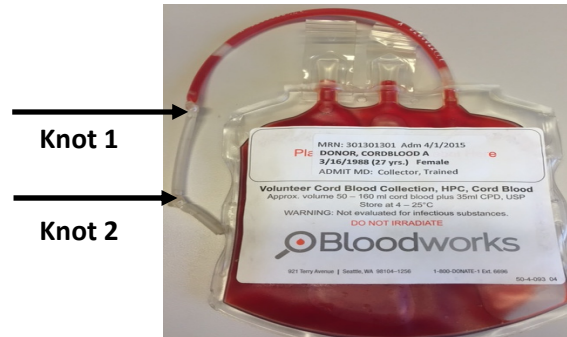


# CORD BLOOD COLLECTION Instructions

- 7**
- Apply pressure to tubing with edge of hemostat and **"strip" blood in tubing** into bag and mix blood with anticoagulant.
  - "Strip" tubing again.**



- 8**
- Tie **TWO TIGHT KNOTS** in the tubing
  - 1st knot about 6" from the bag.**
  - 2nd knot about 1" from first knot.**



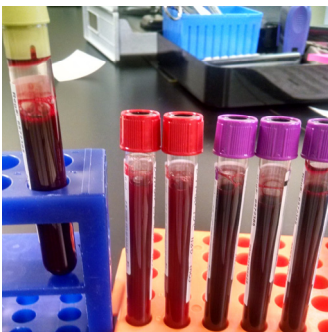
- 9**
- Cut tubing above 2nd knot** to remove needle.
  - Dispose of needle** in sharps container.
  - Gently **mix blood in bag.**
  - Verify bag is labeled.**
  - Place unit in zip-top bag.**



- 10**
- Complete Delivery Information Form.** Ensure other forms are **completed, signed, dated:**

- Delivery Information Form
- Consent
- Donor Screening Form (*Short or Full*)
- Maternal Samples form
- Donor Demographic Information Form, *if provided by donor*

- 11**
- Collect SIX, FULL, LABELED Maternal Samples** and **complete Maternal Samples form** if not already done.



- 12**
- PACKAGE FOR TRANSPORT.** Refer to inside of transport box for instructions.

**Contact #'s:**

206-689-6696 Main

**Thank You!**