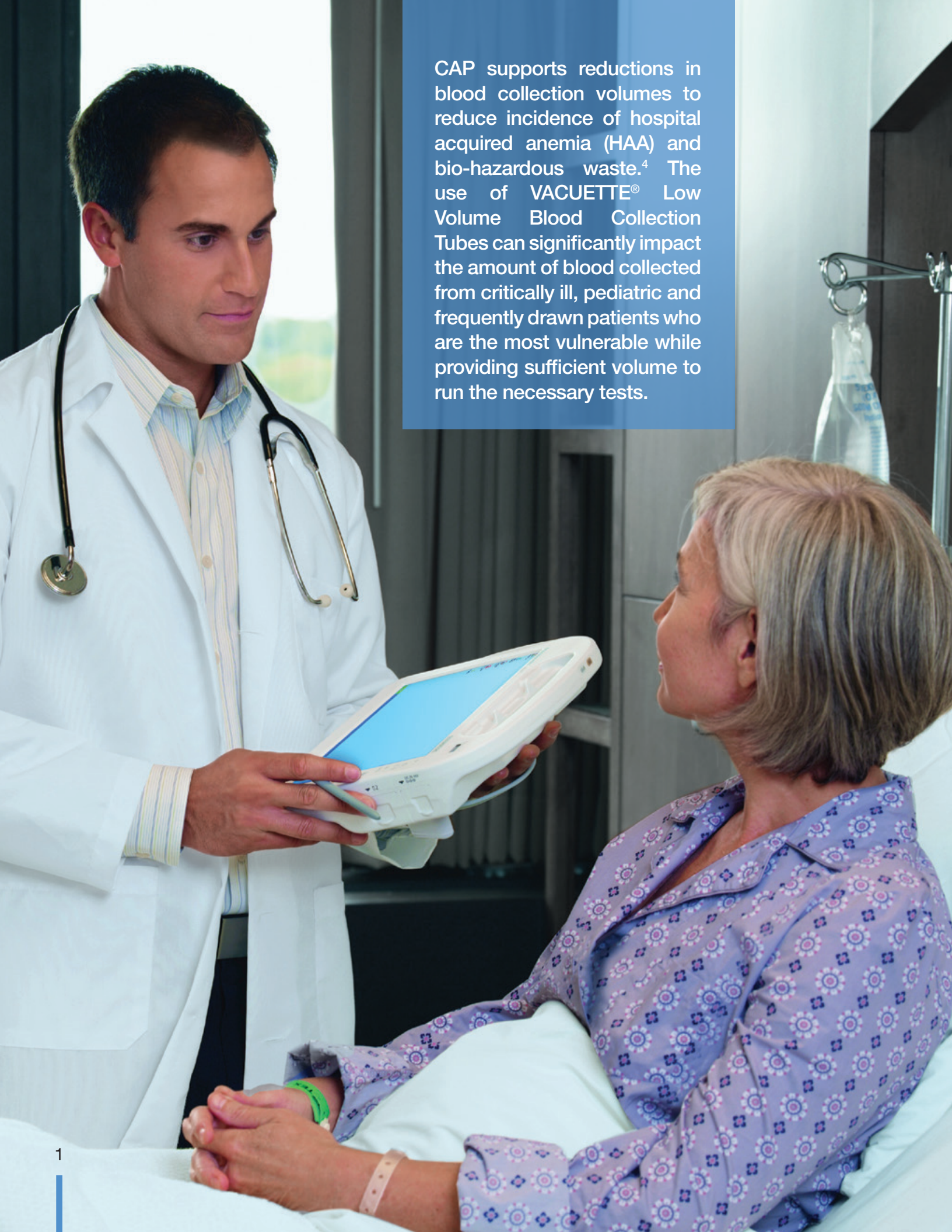




Exclusively from Greiner Bio-One...

VACUETTE®

Low Volume Blood Collection Tubes



CAP supports reductions in blood collection volumes to reduce incidence of hospital acquired anemia (HAA) and bio-hazardous waste.⁴ The use of VACUETTE® Low Volume Blood Collection Tubes can significantly impact the amount of blood collected from critically ill, pediatric and frequently drawn patients who are the most vulnerable while providing sufficient volume to run the necessary tests.

VACUETTE® Low Volume Blood Collection Tubes

Hospital-acquired anemia (HAA) is a condition resulting from treatment for an unrelated illness or ailment. It has been shown that the excessive blood drawn for laboratory testing contributes to this condition.

- In patients with Acute Myocardial Infarction (AMI), HAA is associated with over twice the phlebotomy volume of those without HAA.¹
- ICU patients are drawn 3.4 times per day averaging 41.5mL per day and 762mL for duration of stay compared to the average patient who is drawn 1.1 times per day with an average of 12.4mL and totaling 175mL for their duration of stay.²
- Patients average approximately 16 samples on days 2-7 in the ICU and can be as high as 23 samples in teaching hospitals relative to approximately 10 samples in non-teaching hospitals.³
- AMI patients have an 18% higher risk of developing moderate to severe HAA with every 50mL of blood drawn.¹
- Collections range from 2 to 120 times the volume required for analysis.⁴

Greiner Bio-One offers a complete line of low volume tubes with draw volumes of 1mL to 2.5mL to facilitate reduction of phlebotomy volumes, improve overall patient care and minimize the amount of discarded specimen to reduce waste.

VACUETTE® Low Volume Tubes offer the benefits of:

- Standard 13x75mm PET plastic tubes with color-coded safety caps*
- Availability of additives required for laboratory testing
- 12-month shelf life**
- Functional compatibility with instrumentation*
- Optimal blood to additive ratios for reduced blood volumes



Ordering Information

Cap Color	VWR Item No.	GBO Item No.	Draw Volume	Tube Size	Additive	Rack Qty	Case Qty
○	10755-336	454318	2mL	13 x 75mm	No Additive	50	1200
●	95057-365	454236	2mL	13 x 75mm	Clot Activator	50	1200
●	95057-381	454243	2.5mL	13 x 75mm	Clot Activator w/gel	50	1200
●	10755-702	454081	1mL	13 x 75mm	PREMIUM Lithium Heparin	50	1200
●	95057-399	454237	2mL	13 x 75mm	Lithium Heparin	50	1200
●	95057-409	454302	2mL	13 x 75mm	Sodium Heparin	50	1200
●	10755-700	454052	1mL	13 x 75mm	K ₂ EDTA	50	1200
●	95057-239	454428	2mL	13 x 75mm	K ₂ EDTA	50	1200
●	95057-221	454222	2mL	13 x 75mm	K ₃ EDTA	50	1200
●	95057-301	450413*	1mL	11 x 40mm	3.2% Sodium Citrate MiniCollect® Tube	50	1200
●	10755-338	454320	0.9mL	13 x 75mm	PREMIUM 3.2% Sodium Citrate	50	1200
●	95057-169	454322	1.8mL	13 x 75mm	3.2% Sodium Citrate	50	1200
●	95057-185	454238	2mL	13 x 75mm	Sodium Fluoride, Potassium Oxalate	50	1200

PREMIUM tubes have a twist cap rather than a pull cap.

*Polypropylene MiniCollect® Capillary Collection Tube for use with venous blood; carrier tube available. Instrument compatibility has not been established.

** Item #454320 shelf life = 6 months; item #450413 shelf life = 15 months.

Sources:

1. Salisbury AC, Reid KJ, Alexander KP, Masoudi FA, Lai SM, Chan PS, Bach RG, Wang TY, Spertus JA, Kosiborod M. Diagnostic blood loss from phlebotomy and hospital-acquired anemia during acute myocardial infarction. *Arch Intern Med*. 2011; 171(18): 1646-1653.
2. Woodhouse S. Complications of critical care: lab testing and iatrogenic anemia. *MLO - Medical Laboratory Observer*. 2001 Oct;33(10):28-31.
3. Zimmerman JE, Seneff MG, Sun X, et al. Evaluating laboratory usage in the intensive care unit: patient and institutional characteristics that influence frequency of blood sampling. *Crit Care Med* 1997;25:737-748.
4. Dale JC, Ruby SG. Specimen collection volumes for laboratory tests - A College of American Pathologists study of 140 laboratories. *Arch Pathol Lab Med*, February 2003; 127: 162-168.

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