INSTRUCTIONS FOR CORD BLOOD COLLECTION

Step 1
Maternal Blood Collection
1. Verify mother’s identification (Mother’s Name, Mother’s SS#, Donor/Kit #, this can be found on label on biohazard bag containing the maternal draw tubes.)
2. Collect mother’s blood post-delivery. Use IV line or perform venous stick.
3. Fill the six blood tubes provided in the labeled biohazard bag for maternal blood draw (3 red top tubes, 3 purple top tubes)
4. Label all tubes with the Mother’s Name, Mother’s SS#, Collection Date/Time, and Phlebotomist’s initials.
5. Place collected blood tubes in slots of absorbent pouch and then in biohazard bag provided.
6. Ensure patient label is attached to label on the provided biohazard bag containing the maternal blood draw tubes.

Step 2
Set-up Cord Blood Collection Unit
1. Use appropriate aseptic technique to open external foil pouch and remove the peel pouch outside of the sterile surgical field.
2. Open the peel pouch to release the unit and set into the sterile surgical field.
3. Discard both the external foil bag and peel pouch.
4. Inspect the set to ensure that the needle guard is between the clamp and the donor needle, ensure the cap is securely placed on the air vent, and close the pinch clamp on the unit’s tubing. (see diagram)

Step 3
Prepare the Umbilical Cord for Venipuncture
1. Clamp and cut the umbilical cord while mother remains in delivery position.
2. At the distal end of the cord, sterilize the puncture site (4-8 inches) by first using providone iodine swabs provided in kit (scrub 30 seconds, allow to dry).
3. Use the sterile alcohol pads to wash the site.

Step 4
Access Umbilical Cord and Start Collection
1. Remove the needle cover by twisting to break the seal and then remove in a smooth, straight motion.
2. Insert the needle (with needle bevel down) into the umbilical vein and open the clamp on the tubing.
3. Lower the bag and by gravity flow, collect as much cord blood as possible.
   Note: Lowering the bag to full extension will increase the flow rate.
4. Rotate the collection bag periodically to mix and prevent clotting. The collection should take approximately 3-7 minutes.
5. Collect as much cord blood as possible from this site.
6. Close the pinch clamp when blood flow has stopped.
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7. Withdraw the needle from the umbilical cord and align the finger contours of the needle hub so that they are parallel to the opening of the needle guard.
8. Slide the needle guard midway over the needle hub.
9. While holding the sides of the needle guard, grasp the tubing and pull smoothly to draw the needle in the needle guard and lock into place. Confirm that the needle is locked by listening for the second click as the needle is drawn into the needle guard. Ensure that the tubing cannot be pulled through the needle guard.
10. Place the collection bag on a work surface and fully extend the tubing above the bag.
11. Remove the tethered cap from the air vent. Allow the blood within the tubing to drain into the bag.
12. Fold vented tubing above the spike port and seal using the provided Hollister Cord Clamp and two metal crimps (folded tubing through above the cord clamp and press each metal crimp together to hold the tubing).
13. Cut tubing above the seals and discard the needles in a sharps container.

Note: Use the second donor needle/unit only if the blood flow ceases before the placenta appears empty, proceeding to step 2.

EX UTERO OPTION: If unable to collect cord blood before the placental delivery:
1. Place placenta in a sterile basin with the placental fetal side up.
2. Drape umbilical cord over the side to allow gravity flow.
3. Follow IN UTERO instructions, proceeding to Step 2.

Step 5
Required Labeling/Documentation and Preparing for Shipment
1. Complete all highlighted areas on the product label and apply to the collected cord blood unit. Also tie the labeled tie tag to the cord blood unit. (included in collection supplies)
2. Complete all sections of the Data Collection Record.
3. Attach a copy of the hospital labor and delivery record.
4. Place both in the pocket of the biohazard bag containing the cord blood unit and a temperature stabilizing gel pack.
5. Place biohazard bag with cord blood unit and documents, maternal blood specimens, and any unused/unopened supplies from the cord blood kit into the shipping container.
6. Parents or designee are responsible for preparing the shipping container and for following the transport/shipping instructions.

CORD BLOOD COLLECTION GUIDELINES:
1. The volume of the cord blood is greater than or equal to 30 mls, preferably between 75 mls and 150 mls.
2. Stored product meets clinically useful cellular levels.
3. No visible clots were present in the cord blood product and had no growth after 14 days.