

Multi-Ethnic Study of Atherosclerosis
Exam 5



Urine / Phlebotomy

QC Id#: _____ **Id#:** _____

Acrostic: _____

Phlebotomist ID

Date: / /
Month Day Year

PARTICIPANT QUESTIONS

- | | Yes | No | Don't Know |
|--|-----------------------|-----------------------|-----------------------|
| 1 Do you bleed or bruise easily? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 2 Have you ever been told you have a disorder relating to blood clotting or coagulation? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 3 Have you ever experienced fainting spells while having blood drawn? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 4 Do you have diabetes for which you take insulin or oral hypoglycemics? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

PROCEDURE

Blood Draw Type 5 Configuration

- 5 Was urine sample filled?
- YES → Yes No Partial *min 51mL*
- NO → Why was urine sample not taken?
- Participant unable to void
- Refused
- Other:

6 Time at start of venipuncture: : M

- 7 Was any blood drawn?
- Yes, full sample
- Yes, partial sample
- No, refused
- No, hard to stick
- No, other:

8 Elapsed time until tourniquet released: seconds
(120-seconds optimum)

9 Time at end of venipuncture: : M

10 Quality of venipuncture: Traumatic Clean

Mark all that apply

- Vein collapsed Multiple sticks
- Hematoma Vein hard to get
- Excessive duration of draw Leakage at venipuncture site

- 11 Blood Volume per tube:
- | | Yes | No | Partial | Other (specify volume):
<i>min ½ full</i> |
|----------------------|-----------------------|-----------------------|-----------------------|--|
| 1. Serum Cre. 3.5 mL | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> |
| 2. Serum 10 mL | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> |
| 3. EDTA 10 mL | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> |
| 4. Citrate 4.5 mL | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> |
| 5. Heparin 10 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> |
| 6. EDTA 2 mL (CBC) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> |
| 7. Serum 10 mL | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> |
| 8. EDTA 10 mL | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> |
| 9. SCAT 5 mL | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> |
| 10. EDTA 2 mL (WB) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="text"/> |

12 Participant selected as a quality control subject?
(Participant ID ends in 6)

(Blood)

- NO
- YES
- YES, but not enough blood for QC

(Urine)

- NO
- YES
- YES, but not enough urine for QC

Comments: _____