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Identifying and reducing the cause of haemolysis in coagulation blood samples due to transport in a Pneumatic Tube System

Jen Cooper, Franziska Broell, Julie van der Hoop, Steve Kitchen. Royal Hallamshire Hospital, Haemophilia and Thrombosis Centre, Sheffield

Introduction

Pre-analytical errors represent 70-90% of laboratory errors. Of these 40-80% are due to in vitro haemolysis, which may occur during sample transport.

In-vitro haemolysis poses a particular problem for haemostasis testing, where samples are rejected because of known **interference** on both mechanical and optical coagulation detection systems.

Pneumatic tube systems (PTS) can induce in-vitro haemolysis from acceleration as specimens are transported from inpatient wards and local outpatient departments (ODP) to the lab for testing.

Aims:

1) Assess whether the PTS contributes to in-vitro haemolysis in coagulation samples, and 2) determine whether packaging carriers could reduce forces experienced by blood samples sent via PTS.

Methods

One each of 4 blood samples (Vacutainer plus, Becton Dickinson) from healthy volunteers (n=30) were paired with VitalVial data loggers and: 1) transported from a distant location to the laboratory via PTS in a

- transport carrier packaged with bubble wrap
- 2) same journey in an unpackaged carrier
- 3) hand-delivered (control)
- 4) transported from a nearby station via PTS without packaging.

All samples were analysed for haemolysis on a CS5100, and for concentration of plasma haemoglobin. VitalVial data loggers measured the cumulative number of shocks above 2 g as an area under the curve (Streichert et al Clin Chem 2011:57;1390) during transport across the different PTS lines, packaging conditions, and manual transport.

Re

3 of 30 samples transported unpackage haemolysis by analyser (10%).

No other samples were flagged, confirming and that packaging prevented haemolysis

The cumulative vibration experienced by long journey without packaging (p<0.05).

Packaging significantly reduced total vibra

Transport	n	Samples rejected for haemolysis	Data logger runs (n)	Cumulative shocks (AUC)	CV (%)
Hand delivered	30	0	19	18.2	93%
Short journey, Unpackaged	30	0	20	954	7%
Long journey, Packaged	30	0	20	926	14%
Long journey, Unpacked	30	3	19	1044	14%



The experimental protocol (left) and datalogger (Motryx VitalVial, VTO; right) used to measure the acceleration that specimens experienced in the pneumatic tube system. The data logger was placed inside the PTS canister as if it were a patient specimen.

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nd from the distant location were flagged f	1400 ⁻
su norr the distant location were hagged i	1200
	1000
ing that haemolysis had occurred in vitr is caused by long distance PTS transport.	`` , 800
	₹ 600
samples in the PTS was highest on the	400
	200
ration in the carrier (p<0.05).	0

Boxplots of the AUC, a cumulative 3-axis vibration parameter, across the four different transport methods, as measured with the Motryx VitalVial.

Packaging carriers significantly reduces vibration experienced within carriers in PTS and reduced in vitro haemolysis as detected by CS5100 analyser.

Data loggers were useful to quantify the extent of vibration and assess options to reduce it during transport via PTS with **associated improvements in diagnostic** quality.

Each laboratory should evaluate their own PTS for the induction of haemolysis in haemostasis samples.







Conclusion