## TEG Testing Requisition PRE-PHLEBOTOMY Checklist

(All questions in **bold** must be filled out and Req. returned with blood samples)

- 1. TEG testing is performed in the Lab between 7 AM and 12 PM. Call Lab at 8031 at least one hour prior to drawing any patient. Lab MUST be notified before the patient is drawn.
- 2. Blood should be drawn from 7 AM to 10 PM only. Order tests in SMS as a Timed Critical
- 3. Order of draw: Should not be the first tube drawn; use another Blue (Sodium citrate) as a discard tube. Please use 21 gauge needle for venipuncture.

5.	system as it may activate the platelets rendering the test results invalid.  For all TEG tests. Is or has the pt been on the following drugs in the past 5 hrs?	
	a. Heparin Yes No	
	b. Lovenox Yes No	
	c. Argatroban Yes No d. Brilinta Yes No	
	e. Has the patient been on Efficient (prasugrel)? Yes No	
	DosageTimeDate	
	DosageInne	
6.	For TEG Plavix (TEGP)	
	<ul> <li>a. 1 Sodium Citrate (Blue top, Label states BNS) and 1 Sodium Heparin (Dark Green Top stateds NPS)</li> </ul>	, label
	b. Has the patient been on Integrillin? Yes No	
	c. If Yes, time and date stopped	
	TimeDate (Pt must be off integrillin for FIVE (5) How	rs
	before sample is drawn to assure accurate results)	
	d. Is or has the patient been on <b>Plavix</b> or <b>Efficit</b> ( <b>prasugrel</b> )? Yes No	
	e. If <b>YES</b> , what was the last dosage, time and date?	
	DosageTimeDate	
7	DosageTimeDate	
7.	DosageTimeDate For TEG Aspirin (TEGA)	a label
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