Please find below the results of your literature search request.

If you would like the full text of any of the abstracts included, or would like a further search completed on this topic, please let us know.

We’d appreciate feedback on your satisfaction with this literature search. Please visit http://www.hello.nhs.uk/literature_search_feedback.asp and complete the form.

Thank you

**Literature search results**

<table>
<thead>
<tr>
<th>Search completed for:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Search required by:</td>
<td></td>
</tr>
<tr>
<td>Search completed on:</td>
<td>23/08/2012</td>
</tr>
<tr>
<td>Search completed by:</td>
<td>Ann Darling</td>
</tr>
</tbody>
</table>

**Search details**

Venepuncture – to update Trust training packs.

**Resources searched**

NHS Evidence; TRIP Database; Cochrane Library; BNI; CINAHL; EMBASE; MEDLINE; Google Scholar

*Database search terms*: venepuncture

*Google search string*: venepuncture/venipuncture

**Summary**


**Guidelines**

None found

**Evidence-based reviews**

None found

**Published research**

1. **Providing information to children before and during venepuncture.**
   Author(s) Hughes, Teresa
   Citation: Nursing Children & Young People, Jun 2012, vol. 24, no. 5, p. 23-28, 2046-2336 (June 2012)
   Publication Date: June 2012
Abstract: Qualitative research among health professionals into methods and outcomes of giving information to children aged 3 to 11, before and during the process of venepuncture. Areas examined included children's previous knowledge, their ability to understand information, type of information given and effects on children's ability to cope with the procedure. [ORIGINAL] 33 references

Source: BNI
Available in fulltext at EBSCOhost
Available in print at ULHT journal article requests. Complete the online form to obtain articles.

2. MRSA contaminated venepuncture tourniquets in clinical practice.
Author(s): Elhassan HA, Dixon T
Citation: Postgraduate Medical Journal, April 2012, vol./is. 88/1038(194-7), 0032-5473:1469-0756 (2012 Apr)
Publication Date: April 2012
Abstract: INTRODUCTION: Meticillin-resistant Staphylococcus aureus (MRSA) hospital-acquired infection is associated with increased patient mortality. National guidelines state that shared patient equipment must be cleaned after use. The authors sought to identify MRSA contamination in a sample of non-disposable venepuncture tourniquets and audit cleaning habits between patient contacts.MATERIALS AND METHODS: Fifty tourniquets were collected from junior doctors, nursing staff and wards from two district general hospitals in Essex, UK in 2007. A questionnaire was completed at the time of collection for each tourniquet. The tourniquets were cultured using standard microbiology techniques.FINDINGS: 18/50 (36%) tourniquets were positive for S. aureus and of these 6/50 (12%) were MRSA positive. 33/43 (77%) healthcare professionals using non-disposable tourniquets for venepuncture made no attempts at cleaning their tourniquets. 10/43 (23%) staff admitted to cleaning their tourniquets. The tourniquets were used for an average of 14 weeks on approximately three different patients per day. 30/50 (60%) tourniquets were visibly soiled and of these 13 were blood stained and 20/50 (40%) appeared 'clean'. Worn tourniquets when compared with the 'clean' tourniquets were more likely to be contaminated with S. aureus, 15/30 (50%) vs 3/20 (15%), and MRSA 5/30 (17%) vs 1/20 (5%).CONCLUSION: Non-disposable venepuncture tourniquets are contaminated with MRSA and pose a risk to patients. The majority of clinical staff do not clean them between patient contacts as recommended by guidelines. The use of non-disposable venepuncture tourniquets should be abandoned. The introduction of disposable tourniquets to clinical practice should be an adjunct to current measures for MRSA prevention.
Source: Medline
Available in fulltext at Highwire Press
Available in print at ULHT journal article requests. Complete the online form to obtain articles.

3. Venepuncture and cannulation: considering the ageing vein.
Author(s): Gabriel, Janice
Citation: British Journal of Nursing, 27 January 2012, vol./is. /0 -, 09660461
Publication Date: 27 January 2012
Abstract: Venepuncture and cannulation are among the most widely performed invasive procedures in health care today; yet little attention has been paid to the effects increasing age has on our venous systems and the challenges this creates for the health care professional, as well as the discomfort and potentially distressing experience for the patient (Powers, 1999; Schelper, 2003; Dougherty, 2008; Gabriel, 2011). A review of the literature has identified that there has been little published work in the area of the effects of ageing on the patient's venous system. The aim of this paper is to increase awareness, with the overall objective of improving the quality of patient care.
Source: CINAHL
Available in fulltext at EBSCOhost
Available in print at Grantham Hospital Staff Library
Available in print at ULHT journal article requests. Complete the online form to obtain articles.
Available in print at Pilgrim Hospital Staff Library
Author(s): Ford, Joanna, Phillips, Peter
Citation: Nursing Standard, 14 December 2011, vol./is. 26/15-17(42-49), 00296570
Publication Date: 14 December 2011
Abstract: This article describes an evaluation of seven sharp safety intravenous (IV) cannula devices in six Welsh NHS hospitals and the Welsh Ambulance Service. Products analysed included six passive devices designed to engage the safety feature automatically on withdrawal of the needle from the cannula and one active device that requires a button to be pressed to activate it. The companies concerned provided the devices and appropriate training. Participating healthcare workers used the safety device instead of the conventional device to perform IV cannulations during the evaluation and each type of device was evaluated in random order. Participants filled in a questionnaire for each device and then a further questionnaire comparing each one at the end of the process. Results showed that two of the passive devices were the most preferred. Most users stated that they would use either of these devices instead of the conventional device. It was not possible to identify a favourite between these two devices. Some devices were considered to be unfavourable. The main disadvantages that users experienced included slow flashback (where venepuncture is confirmed by blood visibly entering the device), blood leakage from the back of the device and resistance when withdrawing the needle from the cannula.
Source: CINAHL
Available in fulltext at EBSCOhost
Available in print at Grantham Hospital Staff Library
Available in print at ULHT journal article requests. Complete the online form to obtain articles.
Available in print at Louth County Hospital Medical Library
Available in print at Pilgrim Hospital Staff Library
Available in print at Lincoln County Hospital Professional Library

Author(s): Hands, C, Round, J, Thomas, J
Citation: Paediatric Nursing, Mar 2010, vol. 22, no. 2, p. 32-35, 0962-9513 (March 2010)
Publication Date: March 2010
Abstract: Research in a paediatric ward in a London hospital to investigate the distress experienced by children undergoing venepuncture and identify methods of improving practice. The views of children, parents and junior doctors are explored and use of play therapy or training to reduce pain and distress are considered. ([BNI unique abstract]) 9 references
Source: BNI
Available in fulltext at EBSCOhost
Available in print at ULHT journal article requests. Complete the online form to obtain articles.

Author(s): Bowden, T
Citation: British Journal of Cardiac Nursing, Feb 2010, vol. 5, no. 2, p. 66-71, 1749-6403 (February 2010)
Publication Date: February 2010
Abstract: Practical guidance on venous blood sampling. Mechanisms of the circulatory system, informed consent, infection control, and risks and side effects of venepuncture are discussed. Factors influencing venous site and device selection and the procedure for taking a sample using a Vacutainer vacuum collection system are described. ([BNI unique abstract]) 16 references
Source: BNI
Available in print at ULHT journal article requests. Complete the online form to obtain articles.
articles.

Google Scholar

From 1st 50 results…
Nothing found within the search dates.