

**ARNOT HEALTH
POLICY & PROCEDURE MANUAL**

POLICY #: LS.PAL.0014

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TITLE: MASTECTOMY

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A woman who has had a **mastectomy** (removal of a breast) may also have lymphostasis (no lymph flow) due to lymph node removal adjacent to the breast. Without lymph flow on that particular side of the body, the patient is highly susceptible to infection and some chemical constituents may be altered. Also, the pressure from the tourniquet could lead to injuries in a patient who has had this type of surgery. Thus, venipuncture should **never** be performed on the same side as that of a mastectomy, unless approved by the physician.

The rule against drawing from the same side of a prior mastectomy is hard and fast: such draws require physician's permission. The standard for venipunctures published by the Clinical and Laboratory Standards Institute (CLSI), document H3, states physician's permission must be obtained before drawing on the same side of the mastectomy. The physician is in the best position to know the extent of lymph node removal, not the phlebotomist.

If the patient has had a double mastectomy, the back of the hands or finger sticks are alternative methods. However, the physician should be involved in determining suitable sites. This means that a physician's permission must still be obtained before drawing blood.

References:

Dennis J.Ernst, MT, ASCP, Director of Center for Phlebotomy Education, Inc.
Clinical and Laboratory Standards Institute (CLSI), document H3

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