

<https://www.sarstedt.com/en/products/laboratory/screw-cap-micro-tubes-reaction-tubes/screw-cap-micro-tubes/product/72.694.600/>

Sarstedt Screw cap micro tube, 2 ml, PCR Performance Tested, Low protein-binding

Order number: **72.694.600**



- **Specifications**

- **Brochures**

- **FAQ**

- **Instructions for Use**

- **Declarations of conformity**

Product description

Order number 72.694.600

Product description Screw cap micro tube, working volume: 2 ml, skirted conical base, with knurling, transparent, cap: natural, cap assembled, with printed writing space, with graduations, PCR Performance Tested, Low protein-binding, 100 piece(s)/minigrip bag

Product characteristics

Label/ Print	with print
Colour of print/label	white
Graduation	yes
Cap	standard screw cap
Knurls	yes
Base shape	skirted conical base
Volume of work	2 ml

Centrifugation max (RCF)	20000 x g
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Size

Diameter	10.8 mm
Length of product	44 mm

Material & colours

Product material	Polypropylene (PP)
Colour of product	transparent
Closure material	Polypropylene (PP)
Colour of cap	natural
O-ring material	Ethylene propylene diene rubber (EPDM)

Purity & certification

Satisfies the requirement	IATA
Product category	In-vitro diagnostic, CE
CE certified	CE
Purity standard	PCR Performance Tested
Batched	yes

Packaging

Minimum order qty.	1000
Type of smallest subpackaging	minigrip bag
Piece(s) / inner box	500
Piece (s) / outer case	1000
Piece(s) / pallet	110000
Depth of box	211 mm
Width of box	191 mm
Height of box	141 mm
Depth of case	398 mm
Width of case	223 mm
Height of case	160 mm
Case volume	0.0142 cbm
Weight of product	0.0016 kg
Weight of case	2.11 kg
EAN of inner box	4038917393119
EAN case	4038917393102

SAGES II Biospecimen Collection Schema

TUBE	Blood Volume	TEST	Spin/ Time	Aliquot Volume and Tube	Storage/ Special Instructions
1 x 10 ml GTT	FILL on ice	Plasma Biomarkers DNA extraction	Cold 1500g X15"	Use BD sterile pipettes for decanting Decant plasma: 1 cc or less (min. 1cc) into 5 clear color 1.5 cc tubes Use all plasma and aim to use all tubes	For reduced whole blood volume (difficult blood draw) evenly divide plasma into as many Eppe tubes as possible filling with not less than .1ml plasma Do not disturb buffy coat Label with labels "PLA" 1- 5 FREEZE - 80 ° F in study provided box Label with labels "WHO" 1
		Red cells and buffy coat DNA Extraction		Use BD sterile pipettes for decanting Decant RBCs and buffy coat into 1 x 50cc blue top falcons (1 falcon/GTT)	Immediately FREEZE upright - 80 ° F in study provided 4 x 4 box

Time Stamp Sheet: Please fill out for each "visit" or time point. Located in CRC lab in manila folder kept with sign in sheet.

SAGES II Blood Collection Protocol

GENERAL

- Clinical Research Center research blood must immediately be put on ice after the sample is taken (within 15 minutes of draw). It must be processed in as little time as possible but can be on ice for up to 4 hours if needed.
- CRC lab technician will notify the team if the sample is moderately or grossly hemolyzed. If the team hasn't heard from the CRC within 2 hours, call CRC front desk at 7-3351
- BIDMC team collects paper documents EVERY WEEK from the CRC, check for hemolysis status. Enter data into "CSF/Blood Quality Form" on redcap. Once entered, put in folder labeled "CRC Sample Forms – Recheck" for a second BIDMC team member to check that the information is entered correctly. Once the re-check is complete, file forms into the locked filing cabinet.
- If any samples are moderately to grossly hemolyzed, inform team immediately to redraw blood.
- BIDMC team collects samples from the CRC every two weeks, label the boxes correctly, and bring them to Research North.
- Simon and Towia enter blood information into redcap "CSF/Blood Quality Form" when removing samples for analysis
- For CSF: avoid splashing the sample around during transportation, tubes must be polypropylene
- Home blood draws should be avoided whenever possible
- AFTER COLLECTION: Team member who transported the sample to BIDMC should enter the details into the "Blood CSF Tracker" (see image below) on redcap (i.e. HSL team for Faulkner samples, BI team for BI and BWH samples)
- The CRC lab technician will also cross-check that the labels on the blood draw tubes, aliquot bag and tubes, and processing form are correct.

Visit	Plasma/DNA GTT 10cc
Baseline	2
PACU/POD0*	2
POD2*	2
1 Month	2
Processed at:	CRC

*Note: For SAGES II participants, blood was collected for either the PACU/POD0 time point or the POD2 time point (not both time points).

CONTACT INFORMATION

BIDMC PAT: 617-667-6040

BIDMC PACU East: 617-667-3905

BWFH Weiner Center, Robin Kaufman: 617-983-7251

CRC: 617-667-3351

BASELINE BLOOD SAMPLE

- 3 GTT – 20cc for CRC, 10cc for CyTOF
- Blood sample should be drawn during the PAT visit whenever possible. If not available, can also be drawn at the CRC, any other medical appointments, at home, or if no other options in pre-op holding

Before Visit

- HSL team will notify BI team of appointment, BI team will schedule patient visit in CRC scheduler, google calendar, and outlook
- Prepare the appropriate tubes for the baseline blood draw using the Calendar and RedCap. Have another study member verify that the tubes are labeled correctly prior to drop off for processing

Blood Obtained at PAT (BIDMC)

- Day before PAT visit between 2:30pm and 4:00pm, go to PAT and binder clip 3 labeled study blood GTT in biohazard bag with patient label (study name, patient name, MRN, appointment date, staff name and cell number/pager, and sample instructions) to the front cover of the patient's chart. Also place in front of the chart a copy of the signed consent form and a bright green paper that will include study name and pager # of contact to pick up blood.
- When blood is drawn, the phlebotomist will notify the staff member that the sample is ready. The samples will not be put on ice until you get there so you must immediately retrieve the blood and put on ice.
- Bring to the CRC

Blood Obtained at PAT (BWFH, Weiner Center)

- Email Robin Kaufman 1-2 days prior to the patient's pre-operative visit:
rkaufman4@bwh.harvard.edu
- Sample email: Hi Robin, We have a SAGES II study participant coming in for their pre-op appointment on Tuesday 12/18 at 1:00pm. We were wondering if it may be possible to piggyback our research blood draw on the pre-op draw. I will drop off the tubes prior to the appointment and pick them up right after they are drawn. The patient's information is below: (pt name, MRN, surgery date). Thank you.
- Prepare biohazard bag with 3 GTT tubes with patient label (study name, pt name, MRN, appointment date, and YOUR name and cell number), include a copy of the signed consent form
- Drop off tubes and consent form at the Weiner Center front desk on day of PAT at least an hour before the appointment time— first floor of BWFH, go thru main entrance off Centre St and walk straight past the first elevators, Weiner Center will be the office with the glass walls on your left
- Make sure the nurse/front desk manager has your contact information in case they have questions – ask them to call your cell when the sample is ready
- Arrive at Weiner Center with ice once sample is ready, pick up tubes – put 2 on ice, 1 at room temp
- Bring tubes to BIDMC CRC immediately, text BIDMC team when you are on your way
- Confirm the study ID and patient info with BIDMC when you drop off the sample

Blood Obtained at PAT (BWH)

- Day before PAT visit between 2:30pm and 4:00pm (or first thing in the morning on day of PAT), go to PAT at the Weiner Center at BWH Main Campus 45 Francis St first floor, and binder clip 3 labeled study blood GTT in biohazard bag with patient label (study name, patient name, MRN, appointment date, and YOUR name and cell number) to the front cover of the patient's chart. Also place in front of the chart a copy of the signed consent form and a bright green paper that will include study name and pager # of contact to pick up blood.
- Wait at Weiner Center around the time of the patient's appointment to remind nurses you're there to pick up the blood and be ready to transport the samples (bring ice)
- When blood is drawn, the phlebotomist should notify the staff member that the sample is ready (they don't always do this – that's why it's important SAGES staff is waiting in the office). The samples will not be put on ice until you get there so you must immediately retrieve the blood and put on ice.
- Bring to the CRC

Blood Obtained at the BIDMC CRC

- The CRC will need a copy of the signed consent
- Meet patient in lobby, escort them to CRC, wait while blood is drawn
- Ensure microtube labels are correctly labeled, bring tubes to lab/ask CRC nurse to bring tubes to lab
- Offer patient water and snacks, escort them out when blood draw is over
- Offer patient a parking sticker if applicable
- CRC blood draws can happen before/after PAT or other doctor's visits in Longwood if preferred, and the interview can be completed at the same time if preferred

Blood Obtained at Patient Home

- Interviewer to bring appropriate materials to complete blood draw at home.
- Home phlebotomy protocol:
 1. Wash or sanitize hands
 2. Ask the patient if taking blood thinners (Coumadin, aspirin, etc)
 3. Create a sterile environment by placing chuck down on table
 4. Attach butterfly needle to vacutainer hub by screwing it in
 5. Select site for venipuncture and select appropriate size needle (23G is smaller than the 21G)
 6. Apply tourniquet.
 7. Put on gloves
 8. Palpate vein to make sure it's 'bouncy' (ie. The tourniquet is working)
 9. Prepare venipuncture site with an alcohol swab – rubbing somewhat vigorously for at least 10 seconds
 10. DO NOT PALPATE VENIPUNCTURE SITE AFTER CLEANSING.

11. Remove needle shield. Perform venipuncture with arm in a comfortable position for easy access. Needle should be doing in same direction as vein.
12. Observe for flash. If no flash, confirm correct position of needle cannula in vein and adjust needle in/out or up/down.
13. Can re-attempt the stick up to 2 times
14. Once a flash is obtained, push green top tube onto holder, puncturing diaphragm of stopper.
15. When tube is full, remove and place the next one into the holder
16. While each successive tube is filling, invert the previous tube containing additives 6 times. DO NOT SHAKE. Vigorous mixing can cause hemolysis.
17. Remove tourniquet if blood flow is very good while the tubes are filling – otherwise can remove tourniquet right after the last tube is filled.
18. As soon as blood stops flowing in the last tube place a sterile pad over venipuncture site and remove needle from vein by pressing the button on top of the butterfly needle (it will automatically retract)
19. Apply pressure to puncture site with dry, sterile swab for at least 2 minutes until bleeding stops.
20. Tape a new piece of gauze over site.
21. After the venipuncture, the top of the stopper may contain residual blood at the puncture site. Proper precautions should be taken when handling tubes to avoid contact with blood droplet.
22. Needle Disposal: After venipuncture, dispose of needle in sharps container. DO NOT RESHIELD
23. All other trash generated should be put in another biohazard bag and not disposed of at participant's home.
24. Transport in cooler labeled with a 'biohazard' sticker with an instant cold pack inside (cold pack gets cold for about 30 mins). Tubes should be kept in a biohazard bag inside the cooler and properly immobilized
25. Transport to CRC immediately for processing, aliquoting, labeling, and temporary storage

Blood Obtained at Pre-Op Holding Area

- The patient generally arrives at the pre-op holding area about 1.5 hours before their procedure is scheduled to start. Bring the signed consent, bright green study sheet and labeled tubes to the pre-op holding area as early as possible and ask the nurse to have the anesthesiologist draw the blood piggybacked on their clinical sample. They can then page the study staff when the sample is drawn or staff can wait there.
- If possible, drop off tubes for blood at the same time as you drop off tube for CSF collection - as early as possible
- Placing orders might be necessary (TBD - inform Ed, Tamara, or Tammy if orders are necessary and they can place them)
- Bring blood immediately to the CRC - 2 on ice, 1 room temp

After the Visit

- Bring 1 10cc GTT to research north at room temperature, within four hours between 9:30am and 3:30pm (can be earlier or later but this is Simon's preference since it takes 1-2 hours to isolate the cells)
- Bring the remaining 2 10cc GTT to the CRC ON ICE as soon as possible (within four hours)

POD2 BLOOD COLLECTION

BIDMC

- Prepare tubes as needed, have study team member verify the tubes are labeled correctly
- Schedule processing with CRC
- Drop off tube kit to patient room and tape to white board the night before draw
- On DOS, when patient has entered PACU email study Dr to enter blood orders for POD1 and POD2. Sample email:

Please enter orders for POD1 and POD2 for patient name and MRN.

Ordering instructions for POE

- 1) Go to the Portal
 - 2) Go to Provider Order Entry (just above OMR)
 - 3) Enter your username/password (same as your OMR and BIDMC login)
 - 4) In upper right corner of screen, find patient's inpatient unit. If you don't know the patient's unit, you can find the patient via "Other Patient" by entering the patient's name or MRN and searching in the system.
 - 5) When you get to the unit screen, find the patient's name and click on it.
 - 6) On the next screen, click on "Enter Orders" on left-hand column
 - 7) On the next screen, click on "Lab tests"
 - 8) On the next screen, click on "blood" among the various specimen options
 - 9) On the next screen, enter the text "Study Tubes" in the free text field next to Blood test
 - 10) On the next screen, click on "Study Tubes"
 - 11) The next screen should have "Study Tubes" with a check next to it.
- In the Comments box add the following text:

POD1:

"SAGE II Study bloods. Please DO NOT send to the lab. Please draw 3 already labeled tubes, found in biohazard bag left in room (on patient's white board) or in the SAGES II box at nurses station. Once blood is drawn, the larger tubes (10mL purple and green) go on ice, and the smaller tube (4mL green) stays at room temp. Give tubes to patient's nurse or place in SAGES II box at nurse's station. Please page 91419 when drawn"

Also, at the top of that screen, make sure "To be collected" is checked (that's the default). Under Specify Time, check "Morning of date", and enter the date for POD1 (11/14). Once this is all set, click "OK/Done" at bottom of this screen.

POD2:

"SAGES II Study bloods. Please DO NOT send to the lab. Please draw 1 already labeled tubes, found in biohazard bag left in room (on patient's white board) or in the SAGES II box at nurses station. Once blood is drawn, the tube stays at room temp. Give tubes to patient's nurse or place in SAGES II box at nurse's station. Please page 91419 when drawn"

Also, at the top of that screen, make sure "To be collected" is checked (that's the default). Under Specify Time, check "Morning of date", and enter the date for POD2 (11/15). Once this is all set, click "OK/Done" at bottom of this screen.

12) You should then see a screen with the order all written out in the lab orders. Please review to be sure it is correct. If it is correct, press the toggle for "Sign".

13) On next screen, enter your beeper number and OMR password (beeper not necessary)

14) On next screen, press "do not print"

15) You should then return to the main menu--you can exit out of POE.

- When paged, retrieve blood and bring 2 10cc GTT to the CRC (with aliquot tubes) and 1 10cc GTT to research north

BWH

- Schedule processing with CRC
- Drop off tube kit to patient room and tape to white board the night before draw
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BWFH

- Schedule processing with CRC
- The day before the draw, drop off tube kit to outpatient phlebotomy lab on the first floor – enter main entrance off Centre Street, walk straight past first set of elevators, turn right after elevators, and lab will be on your left
- Ask for Cora Wright (cwright20@bwh.harvard.edu) in the lab, give her the tubes in biohazard bags and explain they are for a patient who is/will be on the 7th floor after surgery: 1) 1 GTT with label that says LEAVE AT ROOM TEMP and 2) 2 GTT with label that says PUT ON ICE
- Labels should include: pt name, study name, pt MRN, date of draw, YOUR name, YOUR cell phone number), and instructions re: ice or room temp
- The main lab will call your number on the bag when sample is ready the next morning
- Go immediately to the main lab – enter through first floor Centre St entrance, walk to the very back left corner of the building (ask for directions at help desk if needed) to lab control, tell them you are picking up the study blood
- CRC sample should already be on ice, put on ice if it's not

- Bring blood immediately to BIDMC CRC, text BIDMC team when you are on your way

1 MONTH BLOOD COLLECTION

- Prepare tubes as needed, have study team member verify the tubes are labeled correctly
- Schedule processing with CRC
- At post-op appointment: follow similar instructions as PAT/pre-op appointment
- At home only when not possible at post-op appointment

ALIQUOT COLOR CODE KEY

- Baseline Blood
 - B_SAGES – Clear caps
 - BUFFY – Red caps
- DOS CSF
 - CSF_SAGES – Purple caps
- POD1
 - POD1_SAGES – Blue caps
- POD2
 - POD2_SAGES – Yellow caps
- 1 Month
 - 1M_SAGES – Green caps

TUBE LABEL RECHECK

- Compare ID in outlook calendar and Google calendar to the patient's name in Redcap to verify it's the correct patient prior to making labels
- Add patient ID, visit ID (from above), and date of draw to aliquot labels
- Print patient labels from 'BIDMC CCC'
- After BIDMC enters data from CRC paper form into the redcap CSF/Blood Quality Form, the initial checker enters their information (below) and a second team member must re-check the information using the CRC paper form
- Once paper form is re-checked, rechecker must write their initials on the CRC paper form and record recheck information in redcap:

Scheduling

- Generate schedules for the calendar using your defined events

Record Status Dashboard

- View data collection status of all records

Add / Edit Records

- Create new records or edit/view existing ones

Study ID: test

Select other record

Event: blood bsln

Data Collection Instruments:

- Data Safety Instructions
- Blood Quality
- Recheck

Applications

Calendar

Data Exports, Reports, and Stats

Data Comparison Tool

Field Comment Log

File Repository

Data Quality

REDCap Mobile App

External Modules

Reports

Search

Organize

Edits

Daily CAM-S + with 2week pending

Chart Delirium + with 2week pending

OMR done-->TEL pending

TEL done-->BSLN pending

BSLN done-->MBI SCMG Pending

Study ID

test

Initial Check

Initial Check Staff ID

Jacqueline Yee

Madeline D'Aquila

Sylvie Bertrand

Tatiana Abrantes

Shannon Malloy

Abigail Overstreet

reset

Initial Check Date

Today

M-D-Y

Initial Check Completed?

yes

no

reset

ReCheck

ReCheck Staff ID

Jacqueline Yee

Madeline D'Aquila

Sylvie Bertrand

Tatiana Abrantes

Shannon Malloy

Abigail Overstreet

reset

Recheck date

Today

M-D-Y

Recheck completed?

yes

no

reset

SAGES II POD0 Blood Collection Protocol

On Thursdays, call all patients scheduled for the following week to ask if they anticipate a POD0 discharge and make note of this, so that we can plan for a POD0 blood collection.

On Thursdays, also confirm with the CRC the latest time they can take samples each day for the following week (6:00pm is the cut-off time for bringing samples to the CRC)

All POD0 Blood Collections should be recorded in RedCap and the aliquots should indicate that the sample was a POD0.

Faulkner POD0 Blood Collections

We will proceed with collecting POD0 bloods if there is at **least an 8 hour window** from the time the patient started their surgery. POD0 bloods will not include a CyTOF due to limited processing availability.

On the day prior to the surgery, the research team will send a reminder email to Charlene Salvi informing her of the planned POD0 blood collection.

Research staff will speak with the PACU nurse manager (or any available nurse) before they leave Faulkner and provide them with a green sheet that states that the patient is in the SAGES Study and a member of the research team will be calling at 3 PM about a blood collection.

At 3PM a member of the team will contact the PACU at 617-983-4525 to ask when the patient will be discharged and notify them of the time they will be coming in for the blood draw. Planned time should be at least 8 hours from the start time of the surgery.

Between 3:30 and 5:30 research staff will arrive to the PACU with 2 GTT tubes for the blood collection. Before having staff draw the blood we will confirm with the nurse that the patient will be discharged that day.

- If it is determined that the patient will be staying overnight, the patient will not get the POD0 blood draw and the tubes will be left with Outpatient Phlebotomy for the POD1 blood draw with CyTOF the following day. (Make sure to have the third GTT on you in case this happens)
- If we proceed with the POD0 blood collection, the sample will be brought to the CRC for processing. At around 9pm research staff will check Epic to ensure patient has been discharged.
 - If patient stays overnight after getting a POD0 blood collection research staff will collect a POD1 blood with CyTOF the following day and POD2 blood will NOT be drawn.

BWH POD0 Blood Collections

We will proceed with collecting POD0 bloods if there is at **least an 8 hour window** from the time the patient started their surgery. POD0 bloods will not include a CyTOF due to limited processing availability.

Research staff will speak with the PACU nurse manager before they leave BWH and inform them that they will be returning anytime between 3:30 and 5:30 (timing depends on surgery start time and CRC availability) for a blood collection for the patient.

Between 3:30 and 5:30 research staff will arrive to the PACU with 2 GTT tubes for the blood collection. Before having staff draw the blood, we will confirm with the nurse that the patient will be discharged that day.

- If it is determined that the patient will be staying overnight the patient will not get the POD0 blood draw we will take the tubes back with us, so that we can meet CCI for the blood draw the following day. (Tubes will be left in PACU if this is a weekend or holiday blood draw because CCI will not be available to draw blood and BWH phlebotomy will need to be paged).
- If we proceed with the POD0 blood collection the sample will be brought to the CRC for processing. At around 9pm research staff will check Epic to ensure patient has been discharged. (Do not cancel POD1 blood draw with CCI until it is confirmed that the patient is discharged)
 - If patient stays overnight after getting a POD0 blood collection research staff will collect a POD1 blood with CyTOF the following day and POD2 blood will NOT be drawn.

BIDMC POD0 Blood Collections

We will proceed with collecting POD0 bloods if there is at **least an 8 hour window** from the time the patient started their surgery. POD0 bloods will not include a CyTOF due to limited processing availability.

Research staff will speak with the PACU nurse manager before they leave BIDMC and inform them that they will be returning anytime between 3:30 and 5:30 (timing depends on surgery start time and CRC availability) for a blood collection for the patient.

Once the patient is in the PACU we will inform Ed to enter the POD0 order. Between 3:30 and 5:30 research staff will arrive to the PACU with 2 GTT tubes for the blood collection. Before having staff draw the blood confirm we will confirm with the nurse that the patient will be discharged that day.

- If it is determined that the patient will be staying overnight, the patient will not get the POD0 blood draw and the tubes will be dropped off at Stoneman 7, or stay with the patient in the PACU if the patient stays there overnight. (Make sure to have the third GTT on you in case this happens). We will inform Ed of this change so that the POD1 and POD2 orders can be entered.
- If we proceed with the POD0 blood collection the sample will be brought to the CRC for processing. At around 9pm research staff will check OMR to ensure patient has been discharged.
 - If patient stays overnight after getting a POD0 blood collection research staff will collect a POD1 blood with CyTOF the following day and POD2 blood will NOT be drawn. Email should be sent to Ed to enter the POD1 order.