



Precautions

- PRP should be applied to the same patient from whom the blood was drawn.
- Storage of tubes containing blood at or below 0°C may result in tube breakage.
- Storage of tubes above 40°C may damage the gel stability.
- All liquid preservatives and anticoagulants are clear. Do not use tubes after their expiration date.
- Do not re-sterilize and do not attempt to clean this product.
- Do not use products if pouch is damaged.
- Use prepared platelet concentrate material within 4 hours after drawing blood from patient.

Caution

- Practice Universal Precautions. Process all procedures under controlled environment, use gloves, gowns, eye protection, other personal protective equipment and engineering controls to protect from blood splatter, blood leakage and potential exposure to blood-borne pathogens.
- All glass has the potential for breakage. Examine all glass for potential damage in transit before use and take precautionary measures during handling.
- Handle all biologic samples and blood collection “sharps” (lancets, needles, luer adapters, and blood collection sets) according to the policies and procedures. Obtain appropriate medical attention in the event of any exposure to biologic samples (for example, through a puncture injury) since they may transmit viral hepatitis, HIV (AIDS), or other infectious diseases. Utilize any built-in used needle protector, if the blood collection device provides one.
- Discard all blood collection “sharps” in biohazard containers approved for their disposal.
- Transferring a sample from a syringe to a tube is not recommended. Additional manipulation of sharps increases the potential for needlestick injury, in addition, depressing syringe plunger during transfer can create a positive pressure, forcefully displacing the stopper and sample and causing a potential blood exposure.
- Using a syringe for blood transfer may also cause over or under-filling of tubes, resulting in an incorrect blood-to-additive ratio and potentially incorrect analytic results.
- Underfilling of tubes will result in an incorrect blood-to-anticoagulant ratio and may lead to incorrect analytic results or poor product performance.