

Letter to the Editor

Life Threatening Conditions to the Patient Receiving Service from Clinical Laboratory

Viroj Wiwanitkit

Wiwanitkit House, Bangkhuae, Bangkok ,Thailand

Sir, medical laboratory service is the basic medical service in all hospitals. In some situations, there can be a life threatening conditions, which is usually overlooked, to the patients who receive the service from the laboratory. First, hypoglycemia, a common complication in diabetic patient, is a serious condition that can lead to death. Of interest, fasting plasma glucose (FPG) determination is the common clinical chemistry test that requires the patients to fast for 8 – 12 hours before getting venipuncture. If the patient is on insulin and have to fast, the patient might develop severe hypoglycemia in the morning (1, 2). The case of sudden death during venipuncture is reported (2). Therefore, it is needed to well prepare the diabetic patient for the fasting. This should be applied to all blood tests requiring fasting, not only FPG (3,4). Second, falling is a common accident that is a serious episode for the elderly. Falling due to wet floor can be expected. In the venipuncture section of the laboratory, the patient's falling can be easily seen. Indeed, vagovagal reflex induced fainting is common in patient receiving blood collection (5). If there is no well-designed venipuncture chair, the patients can fall down, might have serious head injury, and can bring other deadly severe complications (5, 6). Finally, shock should al be mentioned. The laboratory in the hospital can face up the cases pending shock in its daily service during specimen collection or diagnostic procedure. The medical personnel in the laboratory have to observe the patients' clinical manifestation during laboratory procedures (6). If the

poor signs and symptoms can be seen, stopping of the procedure and monitoring for the patients' vital signs is suggested (6). Call for help should also be done in complicated cases. Although prevalence of life threatening episodes in the patients receiving service from medical laboratory is not high it is needed to take full concerns on those conditions.

References

1. Wiwanitkit V. Case of sudden death in venipuncture clinic. *Phlebology* 2004;(19):193.
2. Wiwanitkit V. A problematic case due to blood collection for fasting plasma glucose assessment. *Shiraz E Med J* 2006;7(3):1.
3. Hagon-Traub I, Polikar R. Diabetes: integrated hospital and home care. *Rev Med Suisse* 2007 Nov 14; 3(133):2593-7.
4. Taminato T. [Fasting plasma glucose for diagnosis of diabetes mellitus]. *Nippon Rinsho* 2005 Feb;63 Suppl 2:376-81.
5. Wiwanitkit V. A case study on patient management after venipuncture. *Chula Med J* 2006;(50):869-72.
6. Wiwanitkit V. Laboratory Safety. *Chula Med J* 2008;155-60.

Received: 19 April 2009

Accepted: 30 June 2009

Address communications to: Viroj Wiwanitkit, Wiwanitkit House, Bangkhuae, Bangkok, Thailand

Email: wviroj@yahoo.com