

Centrifugation

Ensure that tubes are properly seated in the centrifuge carrier. Incomplete seating may result in the separation of the VACUETTE® SAFETY Cap from the tube.

NOTE: Prior to centrifugation, VACUETTE® Serum Tubes must be allowed to clot thoroughly (minimum 30 minutes) after blood collection to minimize the buildup of fibrin in serum. Recommended time is based on intact clotting process. Patients with abnormal clotting require more time to complete the clot formation. Incomplete clotting may lead to contamination of the instrument and to erroneous results.

NOTE: VACUETTE® tubes should be centrifuged no later than 2 hours after collection. Extended contact of blood cells with the serum or plasma may lead to erroneous test results.

Tube Type	Recommended Inversions	Recommended g-force* relative centrifugal force (rcf)	Recommended Time* Minutes
VACUETTE® Serum Tubes (Clot Activator, No Additive)	5-10	Minimum 1500g	10
VACUETTE® Serum Clot Activator w/Gel Tubes	5-10	1800 g	10
VACUETTE® K2EDTA w/Gel Tubes	8-10	1800 – 2200 g	10
VACUETTE® Plasma Tubes (Lithium Heparin, Sodium Heparin, Glycolytic Inhibitor)	5-10	2000 – 3000 g	15
VACUETTE® Lithium Heparin w/Gel Tubes	5-10	1800 – 2200 g	10-15
VACUETTE® Coagulation Tubes (Sodium Citrate)	4		
Platelet tests (PRP)		150 g	5
Routine tests (PPP)		1500 – 2000 g	10
Preparation for deep freeze plasma (PFP)		2500 – 3000 g	20

*Alternate centrifugation settings for g-force and time may provide acceptable sample quality but these settings must be validated by the laboratory.

Barriers are more stable when tubes are spun in centrifuges with horizontal swing-out rotors rather than those with fixed angle heads. Centrifugation should be done in a temperature-controlled centrifuge that maintains 15-25°C. Higher temperatures could have negative effects on the physical properties of the gel. Ideal separation of serum or plasma is achieved in this temperature range.

NOTE: *It is not recommended to re-centrifuge tubes once the barrier has been formed.*