



2019 September Infection Prevention & Control TOPIC # 8 – How did that sharps injury occur?

Everyone knows not to recap needles or place sharps in bags but here are some points not often appreciated in an effort to reduce what is probably one of the worst experiences a health care worker can have.

Straight up dos

1. Make sure you are protected for hepatitis B – receptionists handle specimens and may have contact with body fluids e.g when cleaning toilets and body fluid spills. I would not let staff take blood unless protected. Check the handbook for those who do not appear to seroconvert with the normal immunisation method!
2. Ensure staff know that a sharp includes a retractable sharp e.g. glucose lancet as well as small glass vials.
3. Make sharps' bins and scalpel blade removers are fixed / bracketed to walls or trolleys. The instant you have to steady a free standing sharps container, you put yourself at unnecessary risk. Ask your supplier / waste contractor to install!!!! It is recommended to install sharps' bins so the opening of the bin is 1.2m from the floor for standing staff. Basically, make sure the shortest staff member can see the opening.
4. Ensure the sharps bin is right next to the field of operation so that all used sharps can be disposed immediately after use.
5. Ensure staff know what to do immediately after a body fluid exposure i.e. clean site, report to manager and stop work. Follow, if advised by an expert, by going soon after to casualty or infectious diseases physician for assessment and any necessary prophylaxis. Source will need separate assessment. We do not wait for test results when considering post exposure prophylaxis (advised within hours after exposure – risk done by expert)

Absolute don'ts

1. Never handle or be passed another person's used or undisposed sharp. It is mandated that the user of the sharp is responsible for his/her own safe sharps disposal. Refuse if asked!
2. Do not disconnect needles from syringes. Treat it as a sharps unit – injuries occur during disconnection unless you have a device to remove it.
3. Do not carry used exposed sharps around even in a tray – ensure the sharps bin is installed next to the field of work.
4. Do not compress or push down sharps into the bin even with a lid – the softer canister style is standard but if pressure is applied, the needles can actually come through the container! The fill line is there for a reason.
5. Never transport a full sharps bin through the practice without first closing it before moving it.

Margaret Jennings