

Facility Sharps Safety Checklists

Exposure Control Plan

- ☐ Written exposure control plan
- ☐ Communication of hazards to employees including a list of all jobs and tasks with potential for bloodborne pathogen exposure
- ☐ Worker accessibility
- ☐ Reviewed and updated at least annually to document that safer medical devices designed to eliminate or minimize occupational exposure have been evaluated and implemented
- ☐ Reviewed and updated at least annually to document that the employer has solicited input from non-managerial employees responsible for direct patient care in the identification, evaluation, and selection of safety devices
- ☐ Updated annually to reflect changes in technology that eliminate or minimize exposure to bloodborne pathogens
- ☐ Post-exposure protocol

Sharps Injury Log

- ☐ Maintenance of a sharps injury log (OSHA 300 log) that includes
 - type and brand of device involved in exposure incident,
 - department or work area where exposure occurred,
 - explanation of how exposure occurred,
 - job classification of exposed workers,
 - procedure involved, and
 - device causing the injury was a safety or conventional design.
- ☐ Injured employees' confidentiality ensured when recording and maintaining information

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Employee's Sharps Safety

- ☐ Hepatitis B vaccinations
- ☐ Employee training on the OSHA's Bloodborne Pathogens Standard (29 CFR Part 1910.1030)

Venipuncture

- ☐ Blood-drawing devices with integrated safety features designed to prevent percutaneous injuries
 - shielded or self-blunting needles for vacuum tube phlebotomy
 - shielded, retracting or self-blunting butterfly-type needles
 - blood gas syringes with a hinged needle shield that can be put in place over the needle using a hands-free technique
- ☐ All unnecessary needles eliminated from use, including needles used for drawing blood from intravenous, arterial, and central lines, which can be replaced by needleless or blunt cannula devices
- ☐ Use of automatically retracting finger/heel stick lancets
- ☐ Plastic micro-bore capillary tubes for measuring hematocrit
- ☐ Replacement of glass blood collection vacuum tubes with plastic tubes
- ☐ Personnel advised not to manually recap or remove needles from blood-drawing devices
- ☐ Personnel advised not to reuse blood tube holders, which require manipulation of a blood-filled needle
- ☐ Practice of injecting blood through a stopper into a vacuum tube using an exposed needle discontinued
- ☐ Syringes are not used for venous blood drawing

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Vascular Access/IV Infusion

- ☐ Implementation of safety vascular access catheters that provide a protective shield for the stylet or blunt the stylet before or during its withdrawal from the patient
- ☐ Conversion to needleless or recessed needle IV infusion systems
- ☐ Elimination of conventional or safety syringes for accessing ports of needleless or recessed needle IV systems

Injection

- ☐ Syringes for subcutaneous or IM injections converted to devices that have integrated safety features (eg, sliding sleeves, retracting needles, hinged caps, needleless injection system)
- ☐ Use of blunt tip needles for medication withdrawal
- ☐ Safety-designed prefilled syringes, where available

Sharps Management and Disposal Devices

- ☐ Sharps disposal container (puncture resistant, leak proof, prevents over-filling, change indicator, and readily accessible)

References

Recommended practices for sharps safety. In: *Perioperative Standards and Recommended Practices*. Denver, CO: AORN, Inc; 2014:351-374.

Recommended practices for prevention of transmissible infections. In: *Perioperative Standards and Recommended Practices*. Denver, CO: AORN, Inc; 2014:385-420.

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