

## The Management of a Blood Borne Pathogen Exposure / Inoculation Injury Policy

**Working Title:** Needle Stick Injury Policy

**PURPOSE:**

To outline the procedure and guidelines to be followed in the event of a blood borne pathogen exposure/inoculation injury

**SCOPE: All DCU Staff, researchers and students**

**1. POLICY STATEMENT:**

The aim of this policy is to prevent the acquisition of blood borne infections by the recipient following a blood borne pathogen exposure/inoculation injury.

**2. DEFINITION(S)**

- Inoculation – The penetration of the skin by a sharp object such as a needle, glass or scalpel blade.
- Splash- Blood, body fluid or blood-contaminated liquid splashed into the eye, mouth or onto the skin surface that has an open cut or abrasion.
- Bite or scratch- Human bite or scratch that breaks the skin.
- Recipient- The member of staff or person suffering the injury.
- Donor- The source of the blood/body fluid

**3. PROCEDURE:**

Every effort should be made to prevent and avoid an inoculation injury or exposure to contaminated material (Appendix A). However, in the event of such an exposure, the following protocol must be followed;

**First Aid**

Immediate first aid must be carried out following injury sustained as follows:

**Needle-stick/Sharps Injury:**

- Encourage gentle free bleeding of the wound under running water. The wound should not be sucked.
- Wash the wound thoroughly under running water. A nail brush should not be used.
- Cover the wound with a waterproof dressing to avoid further contact with blood/body fluids.
- Report incident to Manager/ Supervisor
- Attend the accident and emergency department of the nearest hospital; Mater/Beaumont.

*Needle Stick and Contaminated Sharps Injury - The Management of a Blood Borne Pathogen Exposure / Inoculation Injury*

- Document incident on DCU Injury/Incident Report Form with Manager/Supervisor.

**Mucocutaneous Exposure (Eyes, Mouth, Mucous membranes):**

- Wash the affected area with copious amounts of water.
- Report incident to Manager/ Supervisor
- Attend the accident and emergency department of the nearest hospital; Mater/Beaumont
- Document incident on DCU Injury/Incident Report Form with Manager/Supervisor.

**Eye Splash:**

- Irrigate the affected eye with copious amounts of saline or water before and after removal of contact lenses.
- Report incident to Manager/ Supervisor
- Attend the accident and emergency department of the nearest hospital ; Mater /Beaumont
- Document incident on DCU Injury/Incident Report Form with Manager/Supervisor.

#### **4. Responsibilities**

##### **Staff / Researchers**

It is the responsibility of **all staff** and students including researchers and medical professionals within DCU to:

- To dispose of sharps/glass safely into designated sharps container
- To dispose of needle and syringe as single unit into nearest sharps container
- To use designated procedure tray for carrying sharps
- **Never to recap, bend, break or manipulate used needles**
- To report sharps injuries immediately
- To follow the procedures contained within this policy (in particular attendance at hospital accident and emergency department)
- To attend follow up appointment with DCU Health Risk Management Specialist

##### **Manager/Supervisor:**

It is the responsibility of the Manager/Supervisor:

- To provide training in management of sharps and sharps injuries to all staff and students who may be exposed to occupational blood borne viruses.
- To provide appropriate sharps disposal facilities.
- To ensure that this policy is implemented in all situations where a sharps injury occurs.
- To organise referral of the recipient to the accident and emergency department of the nearest hospital ;Mater/Beaumont
- To record the incident on the DCU Injury/Incident Report Form
- To inform the Health and Safety Office for recipient follow-up.

##### **Health & Safety Officer**

It is the responsibility of the Health and Safety Office

- To refer all reported needle stick injuries to the DCU Health Risk Management Specialist for follow up.

##### **Health Risk Management Specialist**

It is the responsibility of the Health Risk Management Specialist

- To review hospital discharge letter with the recipient and close out the incident

##### **References:**

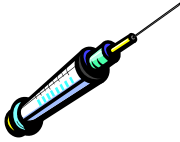
DCU Vaccination Policy [http://www.dcu.ie/safety/pdfs/vaccination\\_policy.pdf](http://www.dcu.ie/safety/pdfs/vaccination_policy.pdf)

Guidance from US CDC

<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5409a1.htm>

<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5011a1.htm>

Guidance for Clinical Health Care Workers: Protection against infection with Blood-Borne Viruses. Recommendations of the Expert Advisory Group on AIDS and the Advisory Group on Hepatitis. UK Health Departments, (March 1998)



## The Management of Sharps

## APPENDIX A

### Sharps

A Sharp is categorised as any object that has been used in the diagnosis, treatment or prevention of disease and that is likely to cause a puncture, wound or cut to the skin. Examples include needles, scalpels, razors, lancets, contaminated broken glass, guidewires, and sharp tips of intravenous giving sets, stitches cutters or any other disposable sharp instrument or item.

Sharps instruments frequently cause injury to health care workers and are a major cause of transmission of blood-borne pathogen infections (e.g. hepatitis). It is important that all staff and students within DCU including researchers and medical professionals are familiar with the correct management of sharps to prevent injury to oneself or colleague.

The following steps outline the correct management of sharps:

- Ensure correct assembly of sharps container
- All sharps containers should be wall mounted or off the floor
- Sign and date label on sharps container
- Never carry needles or sharps by hand or in pockets
- Use designated procedure tray for carrying sharps and ensure the tray is clean after use
- Never recap, bend, break or manipulate used needles
- Dispose of needle and syringe as single unit into nearest sharps container
- Place used syringes, needles and other sharp items in designated sharp's container i.e.
  - Yellow sharps containers with blue trim for disposal of sharps including: needles, syringes, scalpels, sharp tips of I.V. sets, slides, blood stained or contaminated glass, stitch cutters, guidewires/trochars and Razors
  - Yellow sharps containers with purple trim for disposal of needles, syringes, sharp items, cartridges and broken glass which have been used for the administration of cytotoxic drugs
- Never place needle and syringe into already full sharps container
- Once the sharps container has reached 3/4 full, close and lock lid and apply designated tag for traceability
- Sign and date sharps container when locked
- Leave locked sharps container in designated area at point of origin for collection
- Report any problems with the sharps container to the supplier

**Those generating sharps materials are responsible for their safe storage and disposal**

### EMERGENCY ACTION FLOWCHART

IF YOU HAVE EXPERIENCED AN OCCUPATIONAL BLOOD EXPOSURE OR SHARPS INJURY DURING THE COURSE OF YOUR WORK, IMMEDIATELY TAKE THE FOLLOWING STEPS

#### STEP 1 – IMMEDIATE FIRST AID

**Deep prick/Inoculation:**

- Encourage the blood to flow out by squeezing the wound
- **Do not** suck the puncture wound
- Wash/cleanse wound with soap and water or an antibacterial wash
- Do not use nailbrush
- Cover wound with a band-aid

**Skin Exposure:**

- Wash affected area with copious amounts of water

**Eye Splash:**

- If wearing contact lenses remove them immediately
- Irrigate/wash affected eye with copious amounts of water or eyewash



#### STEP 2 – REPORTING

- Report to Manager/Supervisor
- **Attend for urgent medical treatment at your nearest hospital accident and emergency department (Mater / Beaumont). It is important that treatment is started as soon as possible after the incident**
- Manager/Supervisor to complete the DCU Injury/Incident Report Form



#### STEP 3 – FOLLOW UP AND COUNSELLING

- Referral by H&S Office to DCU Health Risk Management Specialist
- Appropriate counselling and follow up with DCU Health Risk Management Specialist and Infectious Diseases Consultant as required
- Further blood testing if indicated