



November 2018
Faculty of Science and Health

The Management of Inoculation (Sharps) Injury or Blood Borne Pathogen Exposure Policy

This policy applies to ALL sharps injuries where any hazardous substance (including, toxins, chemicals and human pathogens) is involved.

Working Title: Sharps Injury Policy including bites and splashes

Purpose

To outline the procedure and guidelines to be followed in the event of an inoculation (sharps) injury or blood borne pathogen exposure

Scope

All DCU Staff, Researchers and Students

Policy Statement

The aim of this policy is to prevent the acquisition of blood borne infections by the recipient following an inoculation (sharps) injury or blood borne pathogen exposure.

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- Any 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



Procedure

Every effort should be made to prevent and avoid an inoculation (sharps) 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:

Inoculation (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 (or use appropriate cleanser where specified). A nail brush should not be used.
- Cover the wound with a waterproof dressing.
- 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.

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 effected eye with copious amounts of saline or water.
- Contact lens wearers should irrigate as above before and after removal.
- 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.



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 (for 'Hamilton' type syringes, dispose of needle only)
- 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 staff member/researcher's Manager/Supervisor:

- To provide training in management of sharps and sharps injuries to all staff and students who may be exposed to sharps / 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 sharps 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

Guidance from US CDC

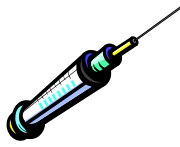
- <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5409a1.htm>
- <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5011a1.htm>



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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)

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The Management of Sharps - APPENDIX A

A Sharp is categorised as any object that has been (or potentially been) used in the

- i) diagnosis,
- ii) treatment or prevention of disease, or
- iii) for the transfer of any chemical/ biological reagent and which 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 a colleague.

The following steps outline the correct management of sharps:

- Ensure correct assembly of sharps container
- 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 sharps 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
- These designated sharps containers should be wall mounted or off the floor
- 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

APPENDIX B

Sharps Injury/Occupational Blood Exposure

Emergency Action Flowchart

If you have experienced a sharps injury or occupational blood exposure 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 (or specified cleansing agent)
- Do not use nailbrush
- Cover wound with a band-aid

Skin Exposure:

- Wash affected area with copious amounts of water/specified agent

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