

Long-Term Care Survey Alert

Caregiver Safety: 5 Tips Help You Steer Clear of Sharps Injuries

Don't stick with this No. 1 bad habit known to cause injuries.

Prevention is the best remedy for needlestick and other sharps injuries, which can be largely avoided if you follow these key strategies.

1. Know the ropes for safely disposing of sharps. "OSHA requires you to put the needle and syringe together in the" sharps container, says **Terry Jo Gile**, a safety expert in Ft. Myers, Fla. She also notes that OSHA requires you to close and dispose of sharps containers when they are three-fourths full.

Most containers have a line on the label indicating the point beyond which they should not be filled, adds **Dennis Ernst, MT (ASCP)**, director of the Center for Phlebotomy Education in Corydon, Ind.

An accident waiting to happen: "Nurses should not allow sharps containers to overfill," stresses Ernst. He recounts, in fact, that he got stuck by a contaminated needle that poked through the bottom of an overflowing sharps container as he tried to force the container into a lock position. "The containers are punctureresistant -- not puncture-proof," Ernst warns.

2. Always use the needle product's safety features. "OSHA mandated use of safety needles in 2001, but that solved only half of the exposure risk dynamic," says Ernst. "People have to activate the safety features and make sure they are not recapping needles, which historically has been the single most notorious behavior leading to accidental needlesticks."

3. Have a plan for managing unpredictable resident behaviors. Patients, especially those in nursing home environments, can be unpredictable in how they react to having a needle come near them or pierce their skin, advises Ernst. "Nurses should stabilize the arm being punctured and make sure the person can't swing the other arm at you. Healthcare providers should seek assistance from another caregiver when that possibility even exists."

4. Don't use the old-fashioned lancets for finger-sticks. "Lancets by law must be retractable and single use," says Ernst. Even so, some facilities have "squirreled away" some of the old-fashioned lancets that don't automatically retract after using them. And use of such devices is an OSHA violation, he warns. "They pose a risk to anyone doing finger-sticks."

5. Use safe phlebotomy procedures. If you or other caregivers at your facility draw residents' blood for stat labs, as an example, pay close attention to your venipuncture technique. For one, never put your index finger above the puncture site while you're inserting the needle, Ernst cautions.

Also use a safety transfer device when evacuating blood from a syringe to a blood collection tube. When drawing blood with a syringe, "OSHA wants us to activate the safety features on the needle, remove it, discard it, and attach a safety transfer device" to fill the blood collection tubes, says Ernst. Too often, however, "the individual pulls the needle out of the patient's vein and punctures the stopper of the blood collection tube with the same needle." And that practice has caused many nurses to sustain a needlestick injury -- for example, you can impale a finger on the hand holding the tube, he cautions.