

8 Steps After Accidental Needlestick

IT'S A FEAR of every nurse. You rushed through a simple task or your attention got diverted for a few seconds. Then you realize you accidentally jabbed your finger with a sharp. What now?

First off: Do not panic. Needlesticks are an unfortunate part of the profession. Approximately 385,000 needlestick and sharps injuries are reported by hospital-based healthcare workers annually. Nurses account for about half of the incidents.

- **41%** of accidental needlesticks occur as a healthcare worker is using the sharp instrument.
- **40%** occur after use but before the sharp is properly disposed.
- **15%** occur during or after sharps disposal.

Stay calm and remember these steps to ensure your safety after an accidental sharps injury.

8 Steps to Follow

- 1 Remove** and properly dispose of the damaged glove.
- 2 Immediately** wash the area that sustained the stick with soap and water.
- 3 Alert** your manager and fill out any required forms. Adverse employee health incidents must be reported to the Occupational Safety and Health Administration.
- 4 Identify** the patient whom you used the needle on. If the patient's status is unknown, he or she will need to be tested for HIV and hepatitis (with consent).
- 5 Report** to your hospital's employee health department. A member of the team there will administer a rapid HIV diagnostic test and test for hepatitis.
- 6 If the source** patient tests positive for HIV or if his or her status is unverifiable, begin post-exposure prophylaxis as soon as possible and no later than 72 hours after the

incident. Treatment consists of two to three antiviral medications taken for 28 days.

7 If you have not been vaccinated against hepatitis B, get inoculated as soon as possible after exposure and no more than 7 days post-exposure.

8 Follow up with additional testing 6 weeks, 3 months and 6 months after the adverse incident.

Risks to the Healthcare Worker

Following this protocol is especially important, even though the risk of becoming infected with HIV or hepatitis is low. The risk of a healthcare professional becoming infected with hepatitis C after a needlestick injury that exposed him or her to hepatitis C-positive blood is approximately 1.8%.

For healthcare workers who have been inoculated against hepatitis B, the risk of infection with hepatitis B after a needlestick injury that exposed them to hepatitis B-positive blood is almost zero. For unvaccinated workers, the risk of infection after a needlestick from a hepatitis B-positive source ranges from 6% to 30%. For that reason, the American Nurses Association recommends all nurses receive the hepatitis B vaccine.

Officials have confirmed 58 cases of HIV transmission to healthcare workers in the United States. After exposure to HIV-positive blood through an accidental needlestick, the risk of infection is 0.23%.

Preventing Needlestick Injuries

The best protection against accidental sharps injuries is prevention.

NOTES:



- Needle-free or protected needle systems lower injuries related to IV connectors by 62% to 88%.
- The use of self-blunting needles can reduce phlebotomy injuries by 76%.
- The use of hinged needle shields can reduce phlebotomy injuries by 66%.
- Needle shields lower phlebotomy injuries by 82%.
- Butterfly-type needles with sliding shields reduce phlebotomy injuries by 23%.

With precautions, nurses can protect themselves against the workplace hazard of accidental needlesticks and other sharps-related incidents. ■

Sources:

American Nurses Association Needlestick Prevention Guide: http://www.who.int/occupational_health/activities/2needguid.pdf
Bloodborne Pathogens—Occupational Exposure: http://www.cdc.gov/oralhealth/infectioncontrol/faq/bloodborne_exposures.htm
Occupational HIV Transmission and Prevention Among Healthcare Workers: <http://www.cdc.gov/hiv/workplace/occupational.html>
Post-exposure Prophylaxis: <https://www.aids.gov/hiv-aids-basics/prevention/reduce-your-risk/post-exposure-prophylaxis/>
Safe in Common Needlestick Statistics: <http://www.safeincommon.org/needlestick-statistics>

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