Sharps Injuries among Nurses in Massachusetts Hospitals, 2002-2004

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MDPH Sharps Injury Prevention Regulations 105 CMR 130.1001 et seq.

Requires hospitals to:

- Incorporate the use of safe needle / sharps devices
- Maintain a written exposure control plan
 with procedures for selecting safe devices
- Maintain a Sharps Injury Log
- Report to MPDH annually

Data Source: MDPH Annual Summary of Sharps Injuries, 2002-2004 Preliminary Data; Do not cite or quote.



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Methods

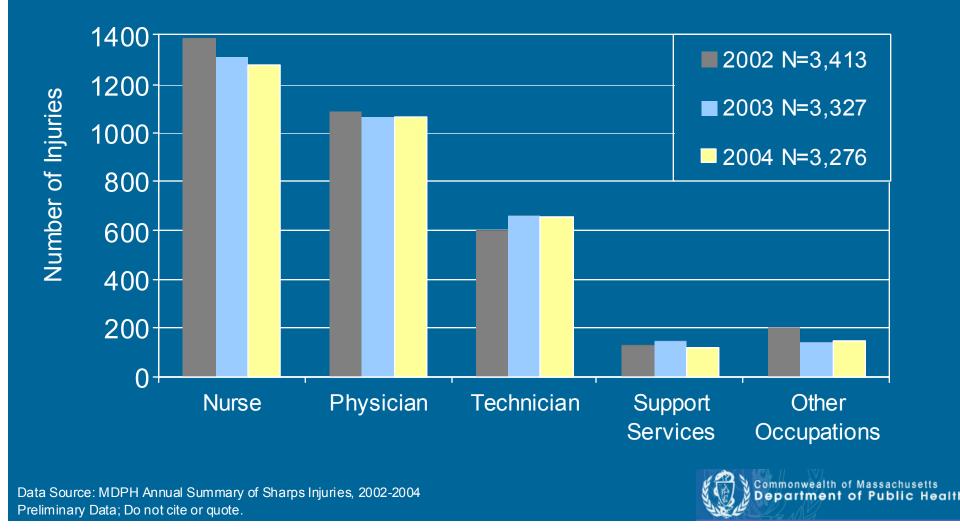
- Population under surveillance: All health care workers in Massachusetts hospitals licensed by MDPH
- Reportable exposure incident: BBP exposure that is the result of events that pierce the skin or mucous membranes
- Reporting period: January 1 December 31
- Data elements:
 - Date of exposure
 - Unique exposure ID
 - Employment status
 - Occupation
 - Department

- Device
- Was it a safety device?
- Brand / model of device
- Purpose or procedure
- How the injury occurred

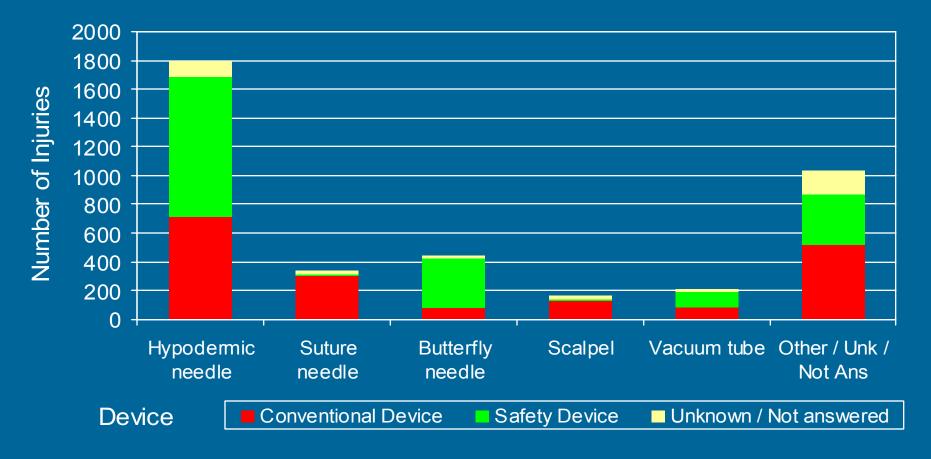


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Sharps Injuries among Massachusetts Hospital Workers by Occupation, 2002-2004, N=10,016

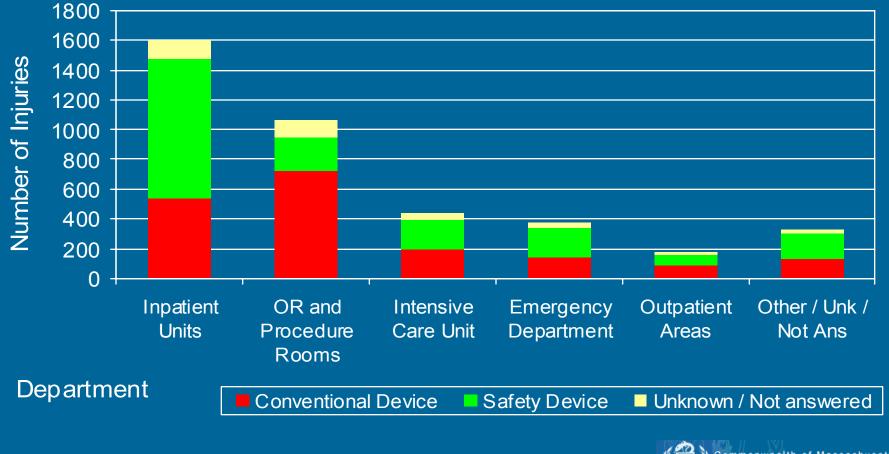


Sharps Injuries among Nurses by Device involved in the Injury, Massachusetts, 2002-2004, N=3,977





Sharps Injuries among Nurses by Department, Massachusetts, 2002-2004, N=3,977

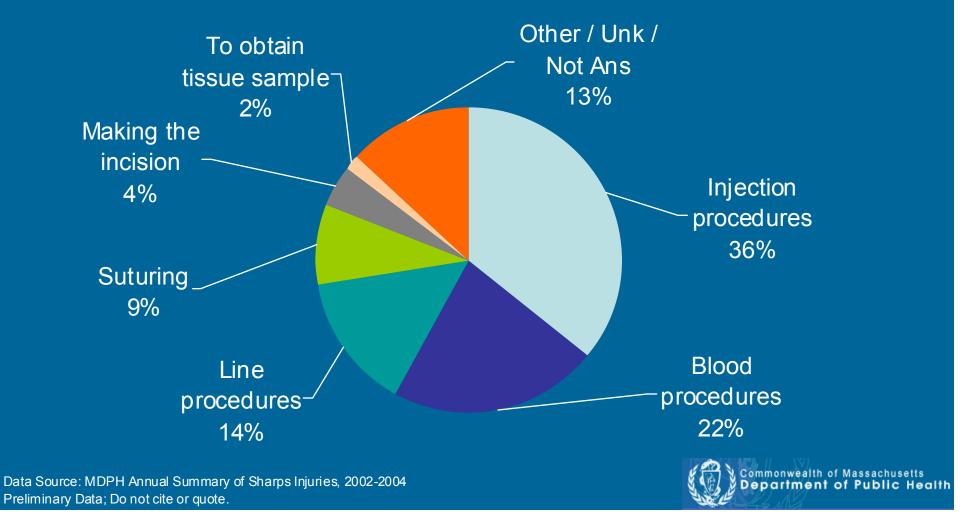


Data Source: MDPH Annual Summary of Sharps Injuries, 2002-2004 Preliminary Data; Do not cite or quote.

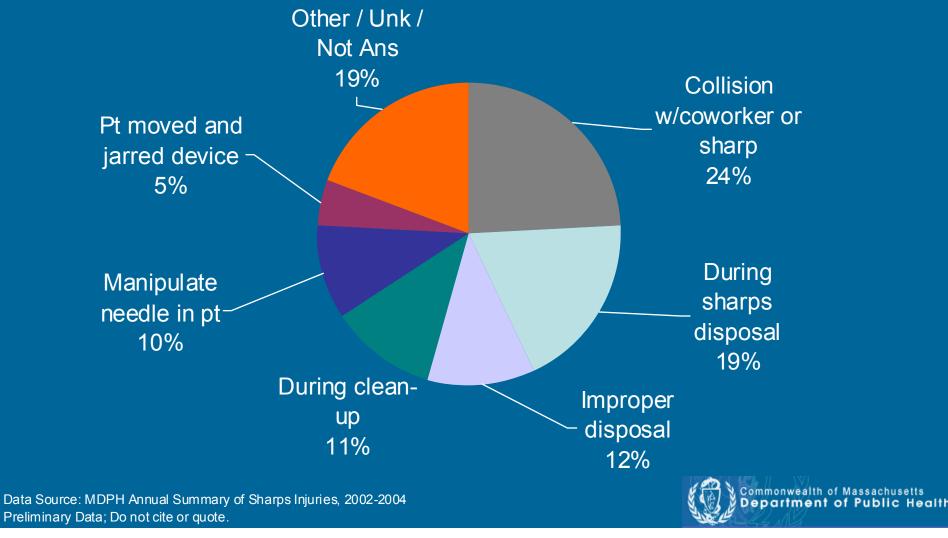


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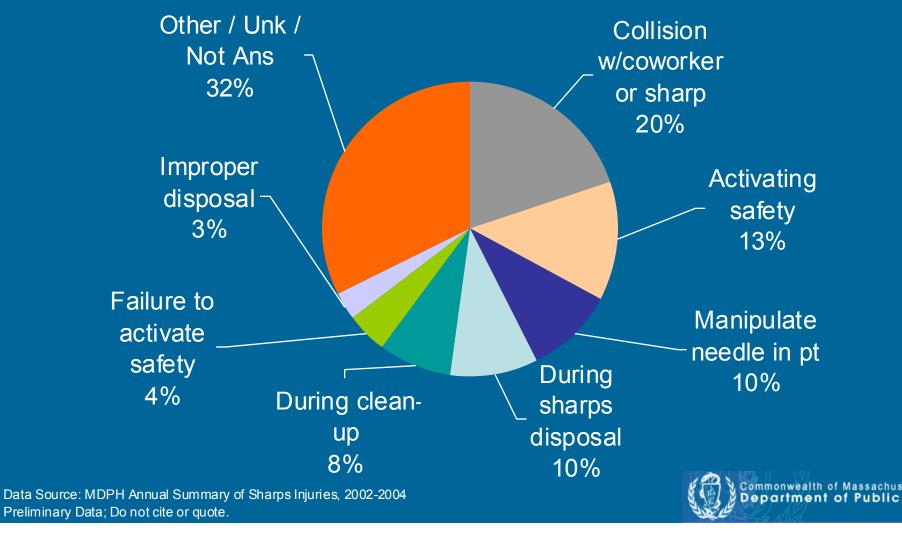
Sharps Injuries among Nurses by Procedure, Massachusetts, 2002-2004, N=3,977



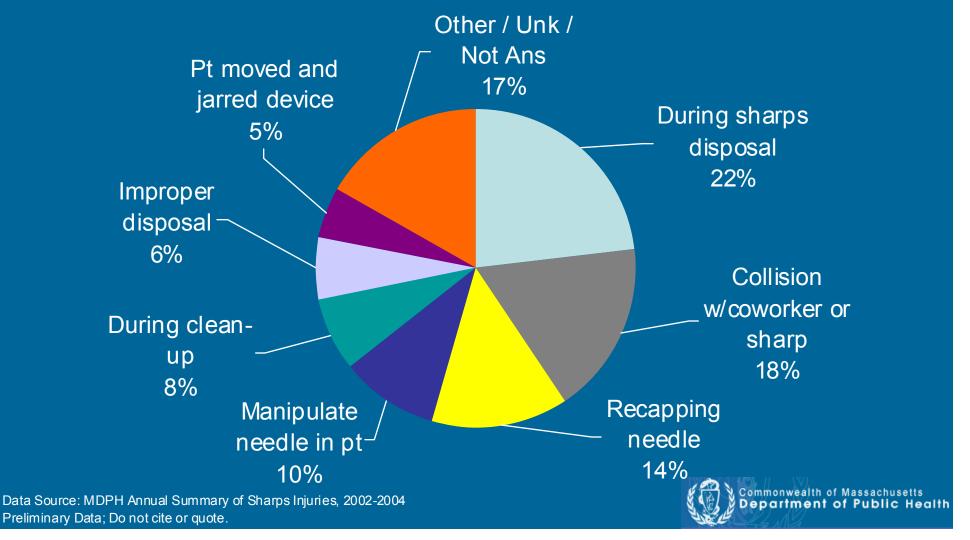
Sharps Injuries among Nurses during Blood Procedures with Conventional Devices, Massachusetts, 2002-2004, N=286



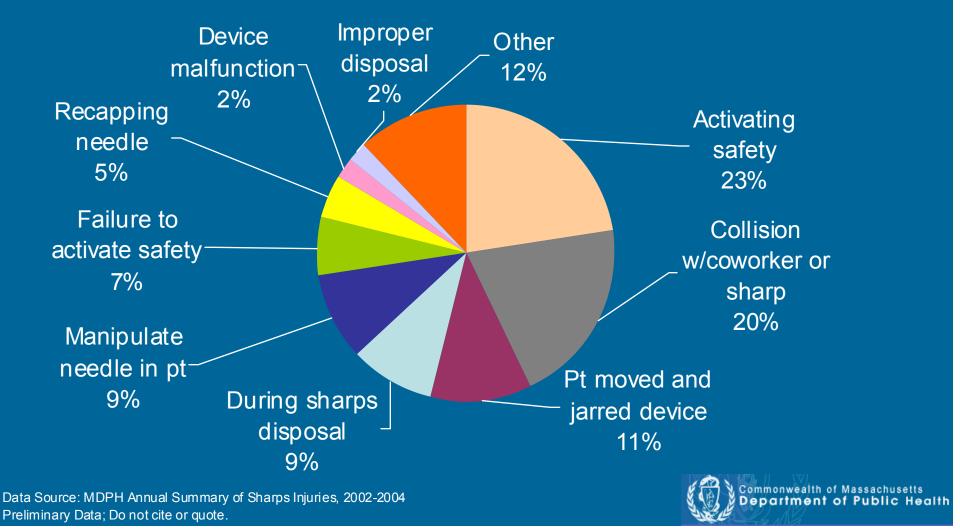
Sharps Injuries among Nurses during Blood Procedures with Safety Devices, Massachusetts, 2002-2004, N=539



Sharps Injuries to Nurses during Injection Procedures with Conventional Devices, Massachusetts, 2002-2004, N=528



Sharps Injuries to Nurses during Injection Procedures with Safety Devices, Massachusetts, 2002-2004, N=828



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Data Limitations

- Rate of underreporting is unknown and likely varies by hospital and occupation
- Statewide data on specific devices is difficult to interpret without purchasing information

Strengths

- Census of hospitals; not biased by voluntary reporting
- Concordance with federal requirements
- Provides a model to be used in other settings

Data Source: MDPH Annual Summary of Sharps Injuries, 2002-2004 Preliminary Data; Do not cite or quote.



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Conclusions

- Many standard devices are still in use; e.g. hypodermic needles
- Percentage of injuries involving devices with safety features is increasing
- Sharps disposal continues to be an issue
- More information about under-reporting is needed
- Conversions:
 - conventional \rightarrow safety
 - \rightarrow first generation \leftrightarrow second...fourth generation



Prevention

Elimination or Substitution

- \cdot suturing \Rightarrow glues
- · injection with needles \Rightarrow alternative delivery of medications

Engineering Controls

 · IV systems ⇒ needleless IV systems
 · conventional needles ⇒ retractable, blunting or self-shielding needles



Prevention

Administrative Controls

- · placement of sharps disposal containers
- purchasing policies
- injury reporting procedures

Work-practice Controls

no recapping
use of neutral zones



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www.mass.gov/dph/ohsp Needlesticks and Other Sharps Injuries

Data Source: MDPH Annual Summary of Sharps Injuries, 2002-2004 Preliminary Data; Do not cite or quote.



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