

## 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](http://www.who.int/occupational_health/activities/2needguid.pdf)  
Bloodborne Pathogens—Occupational Exposure: [http://www.cdc.gov/oralhealth/infectioncontrol/faq/bloodborne\\_exposures.htm](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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