

# Sharps Injuries in USA Health Care Facilities

Year two of a National Survey

**Authors** Grimmond T & Good L

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**“Sharps injuries fell immediately following the Needlestick Safety and Prevention Act (NSPA) of 2001. However it is disturbing that the 2012 EXPO-S.T.O.P. incidence of 28.2 per 100 occupied beds is higher than the 22.2 rate found among the 58 EPINet hospitals in 2001.”** - Authors

## What was the study?

Blood Exposure (BE) among healthcare workers is a serious occupational risk that healthcare facilities strive to reduce. In the study:

**‘EXPO-S.T.O.P. 2012 Year two of a national survey of sharps injuries and mucocutaneous blood exposures among healthcare workers in USA Hospitals’**, a survey of top ‘sharps safe’ occupational health professionals was carried out to ascertain BE incidence in their hospitals for the 2012 calendar year.

Responses from 157 hospitals in 32 states were received making the survey the largest in the United States. Incidence rates were calculated and compared with EXPO-S.T.O.P.-2011, EPINet and MADPH 2010 survey results. Among respondents, the 5 with the lowest BE rates were interviewed to determine ‘Best Practices’ they have used.

## What were the results?

### Sharps Injury Incidence

Sharps Injury (SI) incidence was shown to have risen when compared with previous EXPO-S.T.O.P., EPINet and MADPH databases. The following figures show SI per 100 occupied beds for all hospitals covered in the relevant surveys:

- 2012 EXPO-S.T.O.P: 28.2
- 2012 MADPH: 24.0
- 2011 EXPO-S.T.O.P: 24.0
- 2011 EPINet data: 19.5
- 2001 EPINet data: 22.2

### Best practices

Low-exposure hospitals were found to be proactive in implementing continual education, communication, investigation and engagement regarding SI management.

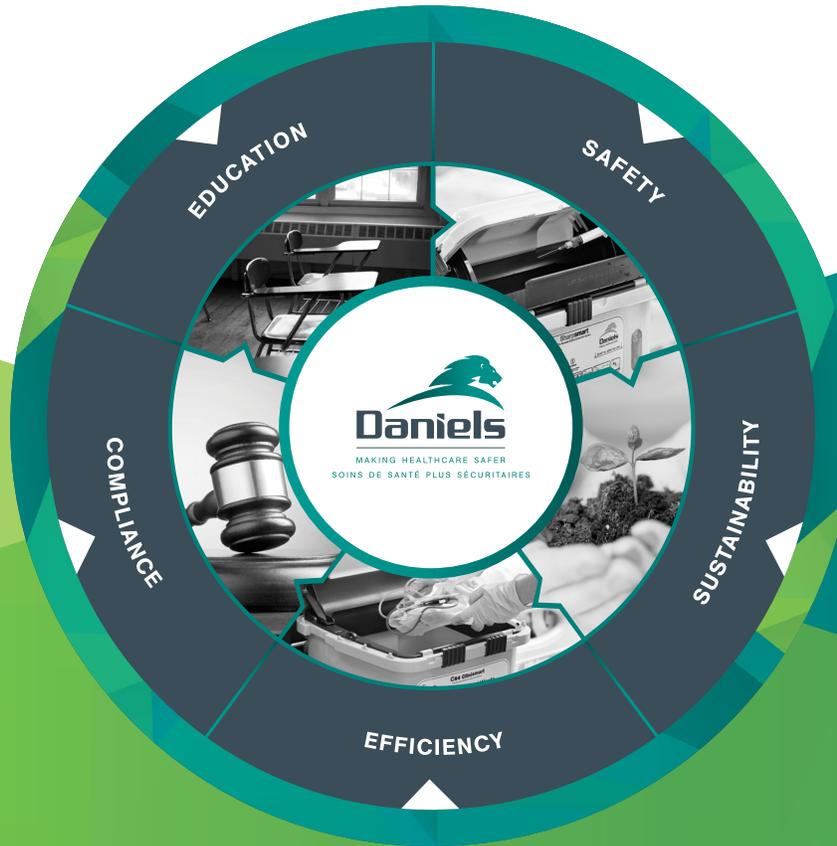
## What does this mean for you?

Healthcare Institutions cannot remain passive in their efforts to reduce Sharps Injuries. Simple compliance with OSHA (NSPA) law alone cannot eliminate Sharps Injuries. Aggressive research into how and why Sharps Injuries are still occurring is still essential to every institution.

Furthermore, facility wide commitment to the hierarchy of controls, including the elimination of risks and the implementation of safety engineered devices, is an essential part of Sharps Injury prevention.

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International committee of Medical Journal editors



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