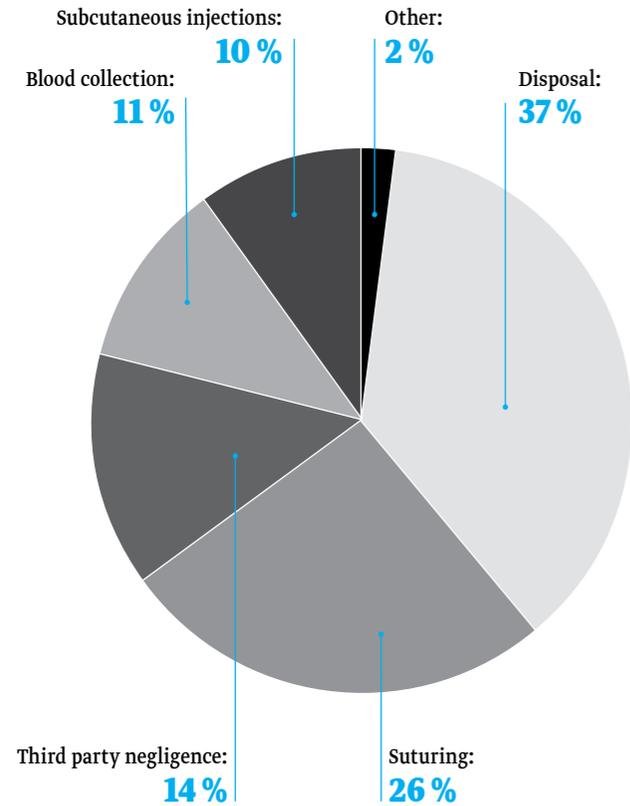


Reasons for needlestick injuries



Causes of needlestick injuries. Results of a survey of 682 health service employees from all over Germany (zm-online 30.07.2012, title story: **Nadelstichverletzungen im Gesundheitsdienst** (Needlestick injuries in the health service) by Nenad Kralj)

Literature

Further information and a list of publications on this subject are available on our website.

www.pfmmedical.com/nsv

Or you can access our publications list directly by scanning the QR code.



Contact

Please get in touch if you have any questions about our safety products and their everyday clinical use. We'll be glad to help.

pfm medical ag
Wankelstraße 60
50996 Köln, Germany

service@pfmmedical.com
T +49 (0)2236 9641-220
F +49 (0)2236 9641-51

pfm medical Information
EU directive on
prevention of needle
stick injuries

Improved protection against
sharps injuries becomes a legal
requirement in Europe.

www.pfmmedical.com

Europe-wide regulations for better protection against needlestick injuries.

Health sector employees and employers throughout Europe stand to benefit from Directive 2010/32/EU.

Background

Injuries from medical sharps, including needle sticks (scalpels, needles and cannulas) are one of the largest risks for workers in the hospital environment. Even the tiniest skin lesion can mean contact with a patient's blood possibly leading to serious infectious diseases such as hepatitis B or C or HIV. Experts assume on average one such injury per employee per year.

A further problem is that the effected employees tend to trivialise the injury. Many treat their own injuries and do not report them. However, for the injured worker, whether doctor, nurse or cleaning staff, it is extremely important that the injury is reported and laboratory tests are carried out straight away.

If an infection is confirmed, immediate measures can be taken. Moreover, reporting the incident also means that it can be recognised as an occupational illness. If no serious infection is found, the result liberates the injured person from uncertainty.

The aim of the directive is to reduce the risk of needle stick injuries for health sector employees throughout Europe by implementing different measures to achieve the safest working environment.

Reducing this type of incident also has an economic value as less working hours are lost as a result of injuries and the costs for examinations and treatment are reduced. (Each event is assumed to cost between 487 € and 3.465 € - not including the cost of follow-up treatments).

Effective prevention

Recent studies have shown that the incidents can be reduced considerably by applying certain measures after an in-depth risks evaluation of each area: appropriate education of staff, training on proper handling of instruments, raising risk awareness, improvement of working conditions as well as the usage of safety instruments with integrated protection mechanisms and special containers for sharps disposal.

Guidelines and implementation

For many years, efforts have been directed towards driving prevention in this area forward. However these efforts have not yet resulted satisfactory outcomes. The deadline for the implementation of the EU directive on prevention of sharps injuries ended on May 11th. This means that each EU member state is required to bring into force national legislation or legally binding agreements to implement the directive. The directive specifies minimum requirements and the Member states are free to adopt additional measures to protect workers. The requirements can be summarised in 5 points:

Point 1: working together for better results

Employer and employee representatives shall work together at the appropriate level to eliminate and prevent risks, protect the health and safety of workers and create a safe working environment.

Together they are to develop

- › a general prevention strategy
- › training programmes
- › procedures for health monitoring

Point 2: Assessment of risks

Risks must be evaluated in all work areas and situations where potential for injuries exists or exposure to blood or other potentially infectious materials is possible.

Point 3: take preventive measures

If the risk evaluation shows increased risk of infection as a result of exposure to patient blood, the following measures are urgently necessary and must be systematically introduced into hospital procedure:

- › **avoid unnecessary use** of sharp/pointed instruments by implementing changed processes
- › **establish and introduce safe procedures** for handling, and disposing of sharp/pointed medical instruments and contaminated waste
- › with immediate effect, **recapping** of used needles **with protective caps is forbidden**
- › **provide medical devices** with integrated safety and protection mechanisms (e.g. Feather® safety scalpels with blade protection mechanism)
- › **introduce effective disposal procedures** (e.g. robust sharps containers and disposal bins for used needles, cannulas etc.)
- › **ensure use of personal protective equipment** (e.g. gloves, face masks, gowns etc.)
- › **make appropriate vaccinations available** to employees

Point 4: Information and awareness-raising

All employees, and especially all new staff members starting work, shall receive a focused introduction and practical instruction on:

- › **the correct use** of sharp/pointed medical instruments with integrated protective mechanisms
- › **risks associated** with blood or body fluids exposure
- › **preventative measures** including standard precautions, safe systems of work (including the ban on recapping) and, **the correct use of sharps bins and disposal procedures**
- › **the importance of immunisation** and how to access immunisation services;
- › **the reporting, response and monitoring procedures** and their importance
- › **measures to be taken** immediately in cases of injury

Employers have a duty to provide such training sessions on a regular basis and to release employees so that they can part in them.

Point 5: Reporting must be taken seriously

To protect and support injured workers, accidents and injuries with sharp/pointed devices must be reported to the employer immediately.

Safety devices

According to the guidance of the European Biosafety Network, safety devices meet the following criteria:

- › The device must not compromise patient care.
- › The device must perform reliably.
- › The safety mechanism must be an integral part of the safety device, not a separate accessory.
- › The device must be easy to use and must require only minimal changes of technique on the part of the health professional
- › The activation of the safety mechanism must be convenient and allow the care-giver to maintain appropriate control over the procedure
- › The device must not create other safety hazards or sources of blood exposure
- › A single-handed or automatic activation is preferable
- › The activation of the safety mechanism must manifest itself by means of an audible, tactile or visual sign to the health professional
- › The safety mechanisms should not be easily reversible once activated

Burden of proof

If employees suffer damage as a result of coming into contact with patients' blood, it is up to the employer to provide appropriate documentation proving compliance with the protective measures identified or explaining according reasons for non-compliance.

Safety Products

- › Safety Scalpel
- › Ophthalmic Safety Scalpel
- › EZ Huber™ Needle

www.pfmmedical.com



Safety Scalpel



Ophthalmic Safety Scalpel



EZ Huber™ Needle

Ordering Information

Safety Scalpel

REF	Figuration	PU
200140010	10	10
200140011	11	10
200140014	14	10
200140015	15	10
200140115	15c	10
200140020	20	10
200140021	21	10
200140022	22	10
200140023	23	10
200140024	24	10
200140025	25	10

Ophthalmic Safety Scalpel

REF	Type	Size	PU
200800715	Incisionsscalpel PSS-715	15°	5
200800722	Incisionsscalpel PSS-722	22°	5
200800730	Incisionsscalpel PSS-730	30°	5
200800745	Incisionsscalpel PSS-745	45°	5
200800622	Phacoscalpel PSS-7622 BUPS	2.2 mm	5
200800624	Phacoscalpel PSS-7624 BUPS	2.4 mm	5
200800625	Phacoscalpel PSS-7625 BUPS	2.5 mm	5
200800769	Phacoscalpel PSS-7628 B	2.8 mm	5
200807628	Phacoscalpel PSS-7628 BUPS	2.8 mm	5
200800761	Phacoscalpel PSS-7630 B	3.0 mm	5
200807630	Phacoscalpel PSS-7630 BUPS	3.0 mm	5
200807632	Phacoscalpel PSS-7632 BUPS	3.2 mm	5
200800763	Phacoscalpel PSS-7632 B	3.2 mm	5
200800764	Extensionscalpel PSS-7641 B	4.1 mm	5
200800772	Tellermesser PSS-7726 B	2.6 mm	5
200800791	Crescent Scalpel PSS-7926 B	2.6 mm	5
200802791	Crescent Scalpel PSS-7926 BU	2.6 mm	5

EZ Huber™ › Version: Extension 180 mm

REF	Size	Colour Code	PU
SHN19-60*	19 G x 15 mm	■ brown	25
SHG19-75	19 G x 19 mm	■ brown	25
SHG19-100	19 G x 25 mm	■ brown	25
SHG19-150	19 G x 38 mm	■ brown	25
SHN20-60*	20 G x 15 mm	■ yellow	25
SHG20-75	20 G x 19 mm	■ yellow	25
SHG20-100	20 G x 25 mm	■ yellow	25
SHG20-150	20 G x 38 mm	■ yellow	25
SHN22-60*	22 G x 15 mm	■ black	25
SHG22-75	22 G x 19 mm	■ black	25
SHG22-100	22 G x 25 mm	■ black	25
SHG22-150	22 G x 38 mm	■ black	25

* not CT-rated

Contact

Should you have further questions concerning our safety products and their applications our Customer Solutions Team is happy to advise you.

pfm medical ag
Wankelstraße 60
50996 Köln, Germany

service@pfmmedical.com
T +49 (0)2236 9641-220
F +49 (0)2236 9641-51