



In this study, we examined risk factors for and circumstances of injuries in operating rooms by combining and analyzing incidence reports and electronic records of every surgery in Kurume University Hospital (Kurume, Japan)” Yonezawa et al (2015).

Abstract:

Healthcare workers are exposed to serious infectious diseases via needlestick and sharps injuries. The operating room is a particularly important environment in which the risk for needlestick injuries is increased for surgical doctors. According to national surveillance studies, the proportion of needlestick and sharps injuries in operating rooms has been increasing for unknown reasons. In this study, we examined risk factors for and circumstances of injuries in operating rooms by combining and analyzing incidence reports and electronic records of every surgery in Kurume University Hospital (Kurume, Japan).

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The annual injury rate (reflecting the reporting rate) rose continuously from fiscal years 2007-2012. We conducted analyses focusing on surgeries that used general anesthesia, which accounted for 88.1% of the injuries. An analysis of the time of injury found that the number of injuries increased toward the end of the surgical procedure. A comparative analysis of surgeries by doctors who had experienced injury revealed risk for the injury increased when a procedure ended after 20:00. In addition, a comparative analysis of doctors

with and without injury experience who had similar level of operating time per year revealed that the number of working years was not lower in the injured doctors. Although the data analyzed in this study were confined to one university hospital, our approach and these results will form a basis on which to consider more effective measures to prevent injury in operating rooms.

Reference:

Yonezawa, Y., Yahara, K., Miura, M., Hieda, F., Yamakawa, R., Masunaga, K., Mishima, Y. and Watanabe, H. (2015) Risk factors for and circumstances of needlestick and sharps injuries of doctors in operating rooms: A study focusing on surgeries using general anesthesia at Kurume University Hospital, Japan. *Journal of Infection and Chemotherapy*. October 10th. .

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