Abstract:

Safety-engineered devices (SEDs) have been developed to protect healthcare personnel (HCP) from needlestick and sharps injuries (NSIs). The aim of this study was to analyze NSIs associated with SEDs and non-SEDs among HCP in hospitals, medical offices and care facilities. Records from online questionnaires on NSIs were used. Causes of NSIs were compared for SED use and healthcare setting. A sample of 835 files was included. Injuries with SEDs accounted for 35.0% of all NSIs, whereas the proportions were higher in medical offices and lower in care facilities. NSIs in nurses were more often associated with SEDs than NSIs in physicians. NSIs from intravenous needles were associated with SEDs in more than 60% of cases in hospitals and medical offices and in about 30.0% of cases in care facilities. In contrast, suturing was associated with every fourth NSI in hospitals, of which fewer than 10.0% were associated with SEDs. In care facilities, SEDs were involved in 36.1% of NSIs during subcutaneous injections. NSIs during disposal accounted for 29.2% of total NSIs, of which 36.1% were associated with SEDs. Frequent reasons for SED-associated NSIs were technical problems, unexpected patient movement and problems during disposal. Our analysis shows that many NSIs are associated with SEDs. Continuous training is necessary in the handling and disposal of SEDs.

Reference:


Full Text