



# Handling sharps and needles; weekend protocols

by Ray Taurasi, Principal, Healthcare CS Solutions.

**Q** I am the safety officer of a physician's group which operates three ambulatory care clinics and a surgery center. I am in the process of developing the policy and procedure for the safe and appropriate handling and disposal of contaminated sharps and needles. What are the key issues I should address in these documents?

**A** The Occupational Safety Health Administration (OSHA) is a federal agency which issues and governs regulations relative to worker safety. OSHA does have strict regulations which include those relative to the proper handling of sharps such as needles and other devices used in a clinical environment. The Environmental Protection Agency (EPA) is another federal agency which is focused on environmental safety and preservation. The EPA issues and monitors strict regulations geared toward protecting and maintaining a healthy environment. There are EPA regulations that healthcare institutions must follow relative to the disposal of biohazardous materials including medical waste (e.g., the disposal of medical devices, supplies and the like which are contaminated with blood, body fluids or other organic matter).

OSHA and EPA regulations are governed by law and must be enforced and implemented, violations are subject to severe penalties including fines and possible closures. All sharps need to be disposed of in an OSHA-approved containment device clearly identifiable (labeled or color coded) as a contaminated sharps disposal container. Sharps containers can be made from a variety of materials including cardboard or plastic. To be acceptable by OSHA the container must be closable, puncture resistant, and leak-proof on all sides and the bottom. Sharps containers must be easily accessible to employees and located as close as feasible to the immediate area where sharps are used such as patient-care areas, surgical suite and support areas such as, central sterile processing, laundry and the like. OSHA mandates that each sharps container must either be labeled with the universal bio-

hazard symbol and the word "biohazard" (see figure 1) or be color-coded red. Sharps containers shall be maintained upright throughout use, replaced routinely, and not be allowed to overfill. When removing sharps containers from the area of use, the containers shall be:

- Closed immediately prior to removal or replacement to prevent spillage or protrusion of contents during handling, storage, transport, and or shipping
- Placed in a secondary container if leakage is possible. The secondary container must also be closable and constructed to contain all contents to prevent leakage during handling, storage, transport, and shipment. Secondary containers must also be labeled and or color coded as previously noted.
- Upon closure, duct tape may be used to secure the lid of a sharps container. A solid lid must be used, the tape cannot serve as the lid itself.

If used, reusable containers shall not be opened, emptied, or cleaned manually or in any other manner which would expose employees to the risk of percutaneous injury. Biohazardous waste must be handled in accordance with OSHA and EPA regulations. EPA like OSHA requires biohazard materials and waste be clearly identifiable via labeling and or color coding. Biohazard waste cannot be disposed of in a landfill but must be rendered safe prior



Figure 1

to disposal. While there are various means of rendering biohazardous materials safe for disposal including, decontamination, sterilization, incineration, chemical applications and other mechanical processes the process can be quite complicated and expensive. Therefore, most medical facilities utilize the services of a professional biohazard disposal company. It is critical that you verify that any services you employ are EPA compliant. It is also very important that you consult with your local and state departments of Public Health, EPA, and OSHA to ascertain if they have any additional regulations.

**Q** I am the lead tech of sterile processing and on Monday through Friday we run a Bowie Dick test on the first empty sterilization cycle every morning. We then run a BI test in the next cycle which contains instrument sets and supplies. On weekends the OR nurse and surgical techs do the processing and sterilization. Do they need to do a BI or not? So far, they have not been doing any testing. I want to be sure we are not doing anything wrong. I called the manufacturer and he wouldn't tell anything except to do what the facility tells us to do.

**A** The same sterilization and related quality control practices should be followed on weekends as are followed during the weekdays. You need to have precise policies and procedures for all aspects of your sterilization and QC process. Policies and procedures need to be documented, monitored and recorded accordingly. In developing policies and procedures, you should follow professional recommendation and guidelines such as those published by AAMI and AORN.

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