

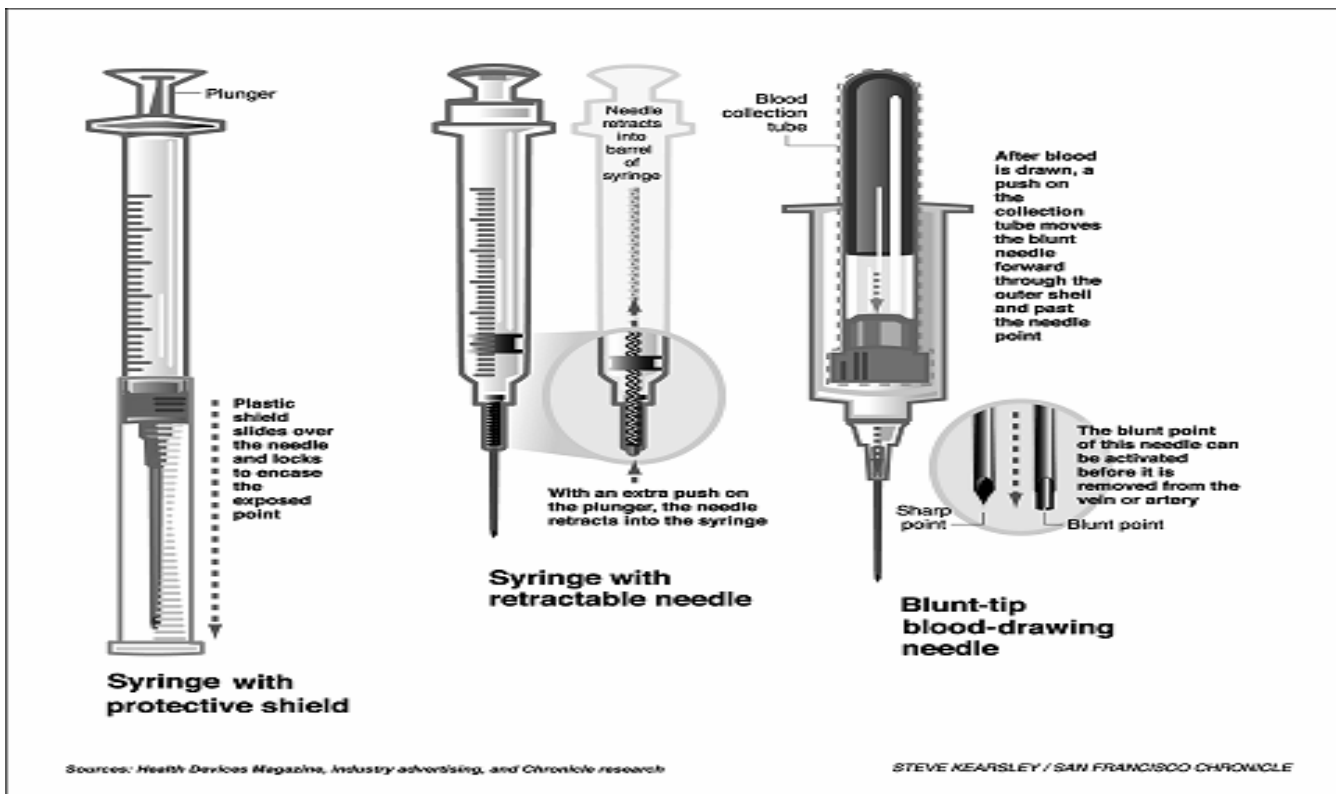
University of Medicine and Dentistry of New Jersey EOHSS FACTSHEET

OSHA/PEOSH Requirements for Safe Medical Devices

The "Needlestick Safety and Prevention Act" (H.R. 5178) was signed into law by President Clinton on November 6, 2000. This Act requires that healthcare facilities use "Safe Medical Devices" that have built-in safety features to prevent blood exposures caused by needlesticks. NJ Public Employees OSHA, (PEOSH), will enforce this requirement among state health care facilities located in NJ.

Health care facilities licensed by the State of NJ pursuant to P.L. 1971 c 136 (C.26:2H-1 et seq) must also comply with the "NJ Safety Needle Act" as promulgated on January 4, 2000. This law applies to most hospitals and some health care clinics but does not apply to the majority of UMDNJ outpatient facilities. An EOHSS factsheet on the NJ Safety Needle Law is available at: <http://www2.umdnj.edu/eohssweb/publications/safetyneedle.htm>.

EOHSS will be working with the administration of UMDNJ schools and units to assist them in complying with the safe medical device regulations wherever applicable.



Three Examples of Syringes with Safety Features¹

¹From: *NIOSH Alert: Preventing Needlestick Injuries in Health Care Settings*, (NIOSH) Publication No 2000-108. A free copy of this publication can be ordered at www.cdc.gov/niosh and can be accessed on-line at <http://www.cdc.gov/niosh/2000-108.html>.

A Summary of the key requirements of the Needlestick Safety and Prevention Act:

Employers must:

- 1. Evaluate and utilize Safe Medical Devices that eliminate or minimize the risk of exposure to blood and other body fluids. The following are examples of Safe Medical Devices:**
 - needles that retract into a syringe or vacuum tube holder;
 - sliding needle shields attached to disposable syringes and vacuum tube holders;
 - retractable finger/heel-stick lancets;
 - needleless connectors for IV delivery systems;
 - protected needle IV connectors;
 - hinged or sliding shields attached to phlebotomy needles, winged-steel needles, and blood gas needles;
 - protective encasements to receive an IV stylet as it is drawn from the catheter;
 - self-blunting phlebotomy and winged-steel needles; and,
 - plastic capillary tubes.
- 2. Rely on FDA approvals, other relevant evidence, internal injury data and observations to select Safe Medical Devices and to ensure their effectiveness.**
- 3. Provide effective training and education for employees whenever safer devices are utilized. Interactive sessions that provide the opportunity for discussion with a qualified trainer are required.**
- 4. Conduct inspections to ensure that safety devices are both available and being used appropriately.**
- 5. Develop a Sharps Injury Log.** This log will be used to document percutaneous exposures to contaminated needles or sharps and must state the specific type and brand of device involved, location where the incident occurred and an explanation of how the incident occurred.
- 6. Periodically review and update the Exposure Control Plan to reflect newer technology and include wording that commercially available devices will be considered and utilized where feasible.**
- 7. Solicit input from non-managerial employees in the selection and evaluation of Safe Medical Devices. Maintain documentation.**

Commercially Available Safe Medical Devices:

A list of Needleless Systems and Needles With Engineered Sharps Injury Protection is available at <http://table.jps.net/~jcone/disclaimer.html>

Additional information and resources pertaining to safe medical devices are available at the EOHSS Website at [http://www2.umdj.edu/eohssweb/hclinks.htm#Safe Medical Devices](http://www2.umdj.edu/eohssweb/hclinks.htm#Safe%20Medical%20Devices).