



STOP STICKS CAMPAIGN



Photo by Getty Images

What to do following a sharps injury

The following post exposure information must be included in the facility's "Exposure Control Plan" and [included prior to new employee placement and in annual training curricula](#).

Step 1: Provide immediate care to the exposure site

- Wash puncture and small wounds with soap and water for 15 minutes. Be aware of wash station locations in your facility based on what shift you're working.
- Apply direct pressure to lacerations to control bleeding and seek medical attention.
- Flush mucous membranes with water:
 - Mouth: Rinse several times with water
 - Eyes:
 - Remove contact lenses.
 - If eye wash station available, flush eyes for 15 minutes.
 - If eye wash station not available, have a peer flush exposed eyes with 500 ml lactated ringers or normal saline.
 - If unable to do the above, then flush under the sink with water (preferably tepid) for 15 minutes or as tolerated. Keep the eyes open and rotate the eyeballs in all directions to remove contamination from around the eyes. Help may be needed to hold the eyelids open.

Step 2: Evaluate exposure and report



- Seek medical care to determine risk associated with exposure.
- Report blood and body fluid exposure immediately as it poses a risk of infection transmission.
- Reporting as soon as possible will assist obtaining a test from the source.
- Remember to complete an incident report (where applicable) so that a root cause investigation may occur that can result in preventing similar type incidents to others.

Table

Exposures posing risk of infection

- Percutaneous injury
- Mucous membrane exposure
- Non-intact skin exposure
- Bites resulting in blood exposure to either person involved

Substances posing risk of infection transmission

- Blood
- Body fluids, including saliva and urine visibility contaminated with blood
- Other potentially infectious materials (semen; vaginal secretions; and cerebrospinal, synovial, pleural, peritoneal, pericardial, and amniotic fluids) or tissue
- Concentrated virus or other bloodborne pathogen

For Employee or Occupational Health Provider

Step 3: Give post-exposure prophylaxis (PEP) for exposures posing risk of infection transmission



- HBV
 - Give PEP as soon as possible, preferably within 24 hours.
 - PEP can be given to pregnant women.
- HCV – PEP not recommended
- HIV
 - Initiate PEP as soon as possible, within hours of exposure.
 - Offer pregnancy testing to all women of childbearing age even if they are not known to be pregnant.

- Seek expert consultation if viral resistance is suspected.
 - Administer PEP for 4 weeks if tolerated.
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Step 4: Perform follow-up testing and provide counseling



- HBV exposures
 - Test for anti-HB 1 to 2 months after the last dose of the vaccine if only a vaccine is given.
 - Follow-up is not indicated if the exposed person is immune to HBV or has received HBIG PEP.
 - HCV exposures
 - Perform testing for anti-HCV and ALT 4 to 6 months after exposure.
 - Perform HCV RNA testing at 4 to 6 weeks if an earlier diagnosis of HCV infection is desired.
 - Confirm repeatedly reactive anti-HCV EIAs with supplemental tests.
 - HIV exposures
 - Evaluate exposed persons taking PEP within 72 hours after exposure and monitor them for drug toxicity for at least 2 weeks.
 - Perform HIV antibody testing for at least 6 months post-exposure (e.g., at baselines of 6 weeks, 3 months, and 6 months).
 - Perform HIV antibody testing for illness compatible with an acute retroviral syndrome.
 - Advise exposed persons to use precautions to prevent secondary transmission during the follow-up period.
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Resources

- [Updated U.S. Public Health Service Guidelines for Management of Occupational Exposures to HBV, HCV, and HIV and Recommendations for Postexposure Prophylaxis](#) 
- [CDC Sharps Safety for Healthcare Settings \(updated 2015\)](#)
- [Emergency Sharps Information](#)
- [Universal Precautions and 2007 HICPAC guidelines](#)
- [Management of Occupational Blood Exposures to HBV, HCV, or HIV – Poster](#) 

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Source: [Centers for Disease Control and Prevention](#)