

## Safer Work Practices For Invasive Diagnostic Imaging

Diagnostic imaging employees respond to many crisis situations. In addition, this specialty performs many invasive procedures that involve sharps and needles often with limited time for preparation.

Depending on the procedure, there is a potential for exposure to blood and body fluid (BBF) exposure than on regular or routine procedures or tests. Patients may be confused, combative or poorly anaesthetized due to the emergency or critical nature of the situation.

All staff should follow general or common BBF precautions and general sharps container practices.

- Personal Protective Equipment (PPE) such as gloves, masks, gowns and face shields must be worn whenever there is a potential for a BBF exposure.
  - PPE must be readily available to staff.
  - Staff are expected to use the appropriate PPE and should remind co-workers to wear PPE when appropriate.
- Do not pass contaminated sharps from one person to another. Sharps should be placed directly into a sharps container whenever possible.

- Check with the patient's nurse and/or the log book to obtain special information you may need to know.
  - Ensure you assess the area for risks or signs that there may blood or body fluid present on the patient or linen – take appropriate precautions.
  - Whenever possible, introduce yourself, explain the procedure and get a “feel” for the patient before you perform any procedure that requires a sharp.
  - Difficulties or potential problems should be shared with the primary care nurse.
  - Where possible, obtain assistance when drawing blood or injecting medication if the patient is uncooperative, combative or confused.
  - Before you begin the procedure assure that you have a stable work surface and a needle disposal container available.
  - Butterfly needles are higher risk devices for needlesticks therefore:
    - limit the use of conventional devices;
    - always use a safety engineered butterfly where appropriate;
    - stretch out the butterfly tubing when removed from the package to reduce recoil;
- use care when putting the needle in the disposal container as it can flip out of the container.

- If needles or sharps are found on gurneys or beds, use forceps to pick them up rather than fingers even if gloved. Notify your manager / supervisor and manager of the sending department of the problem.
- High speed scanning requires rapid injection. This procedure requires quick movements and increases the risk of needlesticks.
  - Immediately disposed of sharps rather than dropped on the sterile field.
- Biopsy needles are very long and require a 5-10 gallon puncture resistant needle container for disposal.
- Abscess aspiration can expose employees to body fluids if a closed drainage system is not used.
- Some procedures may have suitable, safer alternatives such as using safety *N* catheters, which have a side port for injecting, or using plastic syringes on Myelogram trays.
- Radiation oncology tattooing uses a needle dipped in India ink and then used to puncture the patient's skin. Using a new kit called the “tattoo verification kit” may be safer.

## General Blood and Body Fluid Safe Work Practices

The purpose of safe work practices are to provide a safer work environment for health care workers who may be exposed to Blood and Body Fluids (BBF) by handling:

- Sharps
- Initiating intravenous or subcutaneous access
- Administering medication via IM, SC routes

Workers who may be exposed to other Blood and Body Fluids such as:

- Splashes
- Soiled laundry
- Bio-hazardous waste or
- Other body fluids.

By following appropriate procedures and practices you will have taken steps to improve the safety of co-workers, patients and your self.



## Sharps Containers

- Only approved sharps / biohazard containers should be used.
- Containers should have a fixed top or lid that prevents the contents from spilling out if tipped or knocked over. Containers should have a means of “locking” or securing the lid to prevent access to the contents when full.
- Portable sharps containers should be used when a fixed container is not within close proximity.
- Fixed sharps containers should be placed just below the health care worker's eye level so the disposal slot can be seen before moving his/her hand towards it.
- Sharps containers must be replaced when they are  $\frac{3}{4}$  full or the fill line is reached.
  - This helps to prevent over filling or the protrusion of sharps from the opening and / or the sides of the containers.
- Ensure that the correct type of sharps container is being used.
  - Some IV devices or needles have long guide wires, attached tubing or are longer than regular needles that are difficult to dispose of and need a deeper container (e.g. 5 gallon) so they do not spring out.

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# Sharps CARE

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