

The HELP Book

Healthcare
Emergency &
Lifesaving Plan

HCP Pro



Sharps Injury

If an employee has been exposed to a patient's body fluid, either through the skin (for example, a needlestick) or onto a mucous membrane (splash or spray to the eyes, nose, or mouth):

- Provide immediate first aid:
 - For a splash into the eyes, flush the eyes with lots of water.
 - For a needlestick, cut, wound, or splash onto the body or mucous membrane other than the eyes, wash the exposed body part with lots of soap and water.
 - Remove soiled clothing, wash skin, and change into clean clothing.
- Inform the Safety Officer (state name and telephone extension _____) as soon as possible after initial first aid.
- Obtain consent from patient to obtain blood sample to test for hepatitis B, hepatitis C, and HIV.
- Donate a blood sample for testing for hepatitis B, hepatitis C, and HIV.
- Complete a Sharps Injury Log or appropriate incident report form with the OSHA Safety Officer.
- Follow up with any recommended treatment and/or evaluation.



Definitions of Patient Body Fluid

- “Blood” includes plasma, platelets, wound exudates and medications derived from blood such as immune globulins, albumin, and factors 8 and 9.
- “Other Potentially Infectious Materials” (OPIM) include unfixed tissues or organs; body fluids such as cerebrospinal, synovial, pleural, peritoneal, pericardial, and amniotic fluids; semen and vaginal secretions; saliva (in dental procedures only); any body fluid visibly contaminated with blood; all body fluids in situations where it is difficult or impossible to differentiate between body fluids



Sharps Injury Information To Be Recorded and Retained with OSHA Records

- Where and when the sharps injury occurred.
- The type and brand of device in use.
- The exact circumstances surrounding the incident.

Evacuation Procedures

Emergencies That May Require Evacuation

- Bomb threat
- Chemical release/natural gas leak/radiation release
- Fire/explosion
- Aircraft/train/vehicle incident nearby
- High winds (expected and unexpected), other severe weather situations
- Civil unrest or outside disturbance

Evacuation Procedures

- Evacuate patients, visitors or personnel closest to the danger first. Close any fire doors between the danger and the individuals. Follow the evacuation route on the last page of this HELP Book.
- Assist visitors and patients to an outside assembly point (state where: _____) at least 50 feet from premises. If wind shifts smoke, evacuate to alternate points at least 50 feet farther up wind.
- Move non-ambulatory patients by means of appropriate carriers (wheelchair). If carriers are not available, use one of the following methods:

• Hip Carry (One Person)

Roll patient onto his or her side. With your back towards the patient, pull his arm over your shoulder and slide your other hand under the patient's armpit. Release your hold on the patient's arm, grip behind knees, then pull the patient against your hips and straighten up. To unload, back up against a wall, drop to one knee and let the patient slide down against the wall to the floor.

• Cradle Drop (One Person)

Fold blanket in half lengthwise and place it on the floor beside the exam table or chair. Slide one arm under the patient's neck and shoulders and the other under patient's knees. Pull patient to the end of the table/chair, drop down to one knee and lower patient so that your knee supports patient's back. Let the patient slide gently onto the blanket and pull from the room, head first, on the blanket.

• Swing Carry (Two Persons)

The first person raises the patient to a sitting position at the edge of the chair or exam table and places one arm behind the patient's shoulder and the other arm under the patient's knees. The second person places one arm behind the patient and grasps the first person's shoulders, then places the other arm under the patient's knees and grasps the first person's wrist. The patient sits on rescuers' clasped hands and wrists and leans back against their arms.

• Extremity Carry (Two Persons)

The first person raises the patient to a sitting position, then, from behind, reaches under the patient's armpits and grasps his or her own wrists in front of the patient's chest. The second person moves between the patient's legs with his or her back to the patient and encircles the patient's legs at the knees with each arm. The first person hugs and lifts, the second carries the patient's legs while the patient is moved feet first.

- Procedures for employees to follow who remain to operate critical facility operations (before they, too, evacuate): _____

- Employees should then proceed to this same assembly point and await instructions from the Safety Officer who will conduct a head count to assure full evacuation of employees from the premises.

- Evacuate internally only in the event of unexpected high winds or outside disturbance. Lock doors and dial 911 if this occurs. Internal assembly will be _____ (state location).

- Do not linger or leave premise unless instructed or as imminent danger dictates. Do not return to the building unless instructed to do so by the Safety Officer.