

ASU FACT SHEET

Handling and Disposal of Sharps

Introduction

Sharps are objects that can penetrate an individual's skin, such as hypodermic needles, glass Pasteur pipettes, scalpel blades, pipette tips, broken vials and glassware, slides, and coverslips. If human blood or other potentially infectious materials, as defined in the OSHA [Bloodborne Pathogens standard](#) (29 CFR 1910.1030), is present or may be present on the sharp, it is a contaminated sharp and appropriate personal protective equipment must be worn.

An accident or injury involving a contaminated sharp may result in an individual being infected with human immunodeficiency virus (HIV), hepatitis B virus (HBV), hepatitis C virus (HCV), or other bloodborne pathogens. Careful handling of contaminated sharps can prevent injury and reduce the risk of infection. The ASU [Bloodborne Pathogens Exposure Control Program](#) specifies measures to reduce these types of injuries and the risk of infection.

Safer Medical Devices

Wherever possible, departments are required to use safer medical devices, such as self-sheathing or retractable needles. These devices have built-in protection to guard workers against contact with the contaminated sharp. All individuals who may be potentially exposed to injuries from sharps are encouraged to provide input to their management and Environmental Health and Safety (EH&S) regarding the identification, evaluation, and selection of safer medical devices.

Sharps Containers

Used sharps must be discarded immediately or as soon as feasible into sharps containers. These containers must be puncture-resistant and the sides and the bottom must be leakproof. They must be appropriately labeled or color-coded red to warn everyone that the contents are hazardous. They must be closable (i.e., have a lid, flap, door, or other means of closing the container), and they must be kept upright to keep the sharps and any liquids from spilling out of the container.

During use, containers for used sharps must be easily accessible to personnel and located as close as is feasible to the immediate area where sharps are used or can be reasonably anticipated to be found. Sharps containers must also be maintained upright throughout use, replaced routinely, and not be allowed to overfill. When moving sharps containers from the area of use, the containers must be:

- Closed immediately prior to removal to prevent spillage or protrusion of contents during handling, storage, transport, or shipping; and
- Placed in a secondary container if leakage is possible. The second container must be:
 - closable;
 - constructed to contain all contents and prevent leakage during handling, storage, transport, or shipping;
 - appropriately labeled or color-coded; and
 - disposed of as regulated waste.

Reusable sharps containers must not be opened, emptied, or cleaned manually or in any other manner that would expose individuals to the risk of accident or injury. When full, sharps containers may be autoclaved provided that no hazardous chemicals are present in the container. Please contact EH&S Environmental Affairs to determine the appropriate method of disposal for sharps containers.

Recapping Needles

Contaminated sharps must never be sheared or broken. **Recapping, bending, or removing needles is prohibited.** However, in rare circumstances, recapping is permissible if it can be demonstrated by the department that no alternative is feasible or that such action is required by a specific procedure. Procedures that describe the recapping process must be written and included in the laboratory-specific safety plan. If recapping is necessary, individuals must use either a mechanical device or a one-handed technique. The cap **must not be** held in one hand while guiding the sharp into it or placing it over the sharp. A one-handed “scoop” technique uses the needle itself to pick up the cap, and then the cap is pushed against a hard surface to ensure a tight fit onto the device. The cap may also be held with tongs or forceps and placed over the needle. Immediately (or as soon as possible) after use, these sharps must be placed into appropriate containers until properly reprocessed or disposed.

Reporting an Accident or Injury

In the event of a needlestick, sharps injury, or exposure to human blood or other body fluid, immediately follow these steps:

- Wash cuts and/or other needlestick injury with soap and water;
- If there is exposure to the nose, mouth, or mucous membranes, flush with water;
- If there is exposure to the eyes, irrigate with clean water, saline, or sterile irrigants;
- Report the incident to your supervisor; and
- Immediately seek medical treatment.

It is highly recommended that post-exposure treatment, if indicated, be started as soon as possible following an exposure incident. If an exposure occurs, the individual should immediately go to ASU Health Services. If ASU Health Services is closed, emergency care may be obtained at the nearest emergency room and reported to ASU Health Services and EH&S the next business day. In addition, whenever someone is injured or becomes ill from work-related incidents, the Arizona Department of Administration requires the following forms to be completed in order to process Worker's Compensation Claims:

- [Employer Report of Injury](#)
- [Supervisor Incident Report](#)
- [EHS Incident Report](#)

Supervisors must report all accidents and injuries to EH&S. Federal, state, and local agencies may also need to be notified depending on the nature of the accident/injury. If the project involves recombinant or synthetic nucleic acids, the Institutional Biosafety Committee will be required to report any significant problems with or violations of the National Institutes of Health (NIH) [Guidelines for Research with Recombinant or Synthetic Nucleic Acid Molecules](#) and any significant research-related accidents or illnesses to the NIH within 30 days.

Additional Information

It is intended that the Principal Investigator (PI) and supervisory personnel will supplement this information with instruction and guidance regarding specific practices and procedures unique to the work being done in their facilities.