NORTH MEMORIAL AMBULATORY SURGERY CENTER AT MAPLE GROVE
SAFE INJECTION PRACTICES

Purpose

Safe injection practices and policies are designed to prevent the transmission of infectious diseases to patients. Breaches in safe injection, infusion and medication vial handling practices can result in the transmission of bloodborne viruses and other microbial pathogens to patients.

Policy

Healthcare providers will utilize current standards of care to prevent cross contamination among patient and to prevent the transmission of infectious agents to patients during injection and infusion activities.

Resources

APIC Position Paper: Safe Injection, Infusion, and Medication Vial Practices in Healthcare, July 2009
CMS Conditions of Coverage for ASC 416.51 (a) Mitigation of risks associated with healthcare associated infections.
CDC Safe Injection Practices to Prevent Transmission of Infections to Patients, March 28, 2008

Aseptic Technique Procedure:

Perform hand hygiene prior to accessing supplies, handling vials and IV solutions, and preparing or administering medications.

- Use aseptic technique in all aspects of parenteral medication administration, medication vial use, injections and glucose monitoring procedures.
- Store and prepare medications and supplies in a clean area on a clean surface.
- Never store needles and syringes unwrapped as sterility cannot be assured.
- Discard all opened vials, IV solutions and prepared or opened syringes that were involved in an emergency situation.

IV Solution Procedure

- Never use intravenous solution containers (e.g., bags or bottles) to obtain flush solutions, etc. for more than one patient.
- Never use infusion supplies such as needles, syringes, flush solutions, administration sets or intravenous fluids on more than one patient.
- Begin/initiate administration of spiked IV solutions (IV bag entered by the tubing spike) within one hour of preparation. If administration is not begun within 1 hour of spiking the bag, the IV solution and tubing shall be promptly discarded.

- For IV solutions (have not been accessed by IV tubing spike), follow the pharmacy prepared or manufacturer prepared IV solution expiration date.
- Disinfect IV ports using friction and 70% alcohol[15], an iodophor[15] or an approved antiseptic agent. Allow to dry prior to accessing.

Flushing Procedure

- Use single-dose containers for flush solutions whenever possible.
- If a multidose vial must be used, it should be used for only one patient and then discarded. Each entry into the multidose vial must be with a new unused sterile needle and syringe even if the vial is dedicated to a single patient.

Syringe Procedure

- Use single-dose containers for flush solutions whenever possible.
- If a multidose vial must be used, it should be used for only one patient and then discarded. Each entry into the multidose vial must be with a new unused sterile needle and syringe even if the vial is dedicated to a single patient. Syringes
- Remove sterile needle/cannula and/or syringe from package just prior to use.
- Never use medication in a syringe for more than one patient. Changing the needle but not the syringe is NOT acceptable.
- Utilize sharps safety devices whenever possible.
- Discard syringes, needles and cannulas after being used directly on an individual patient or in their IV administration system.
- Dispose of used needles at the point of use in an approved sharps container.
- Do not prepare medication in one syringe to transfer to another syringe, i.e., nurse draws up solution into syringe then transfers the solution to a syringe with plunger removed or injected into the bevel of the syringe to then be injected into the patient.

Vials

- Always follow the manufacturer's instructions for storage and use.
- Use single-use or single-dose vials whenever possible.
- Always use a sterile syringe and needle/cannula when entering a vial. Never enter a vial with a syringe or needle/cannula that has been used on a patient.
- Cleanse the access diaphragm of vials using friction and 70% alcohol or other antiseptic. Allow to dry before inserting a device into the vial.
- Discard single-dose vials after use. Never use them again for the same or another patient.
- If a multidose vial must be used, it should be used for a single patient whenever possible. The risk of transmission posed by inappropriate handling of multi-dose vials has been clearly demonstrated and mandates a practice of one vial per one patient whenever possible. Infection transmission risk is reduced when multi-dose vials are dedicated to a single patient. If a multi-dose vial enters the immediate patient treatment area, it must be dedicated to

that patient only and discarded after use. An immediate patient area includes patient rooms, bays, procedure rooms and Operating rooms.

- Keep multidose vials away from the immediate patient environment. Opened multi-dose vials that never entered the immediate patient area must be disposed of 28 days after opening, unless specified otherwise by the manufacturer, or sooner if sterility is questioned or compromised.
- Date opened multi-dose vials to reflect date of expiration. (28 days from open date).
- Never store vials in clothing or pockets.
- Use filter needles to withdraw solution from an ampule.
- Never pool or combine leftover contents of vials for later use.
- Never leave a needle, cannula, or spike device inserted into a medication vial rubber stopper because it leaves the vial vulnerable to contamination.
- Exception to 28 day disposal of opened multidose vials: The CDC Immunization Program states opened multidose vaccines are to be discarded per manufacturer's expiration date or sooner if sterility is questioned or compromised.
- Inspect vials and discard if sterility has been, or is thought to be compromised.
- Examine the vial for any particulate matter, discoloration or turbidity. If present, do not use and discard immediately. All vials used during an emergency should be discarded as sterility cannot be guaranteed.

Blood Glucose Monitoring Device Procedure
Follow blood glucose monitoring device procedures, per manufacturer guidelines. See attached.