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### Background Information

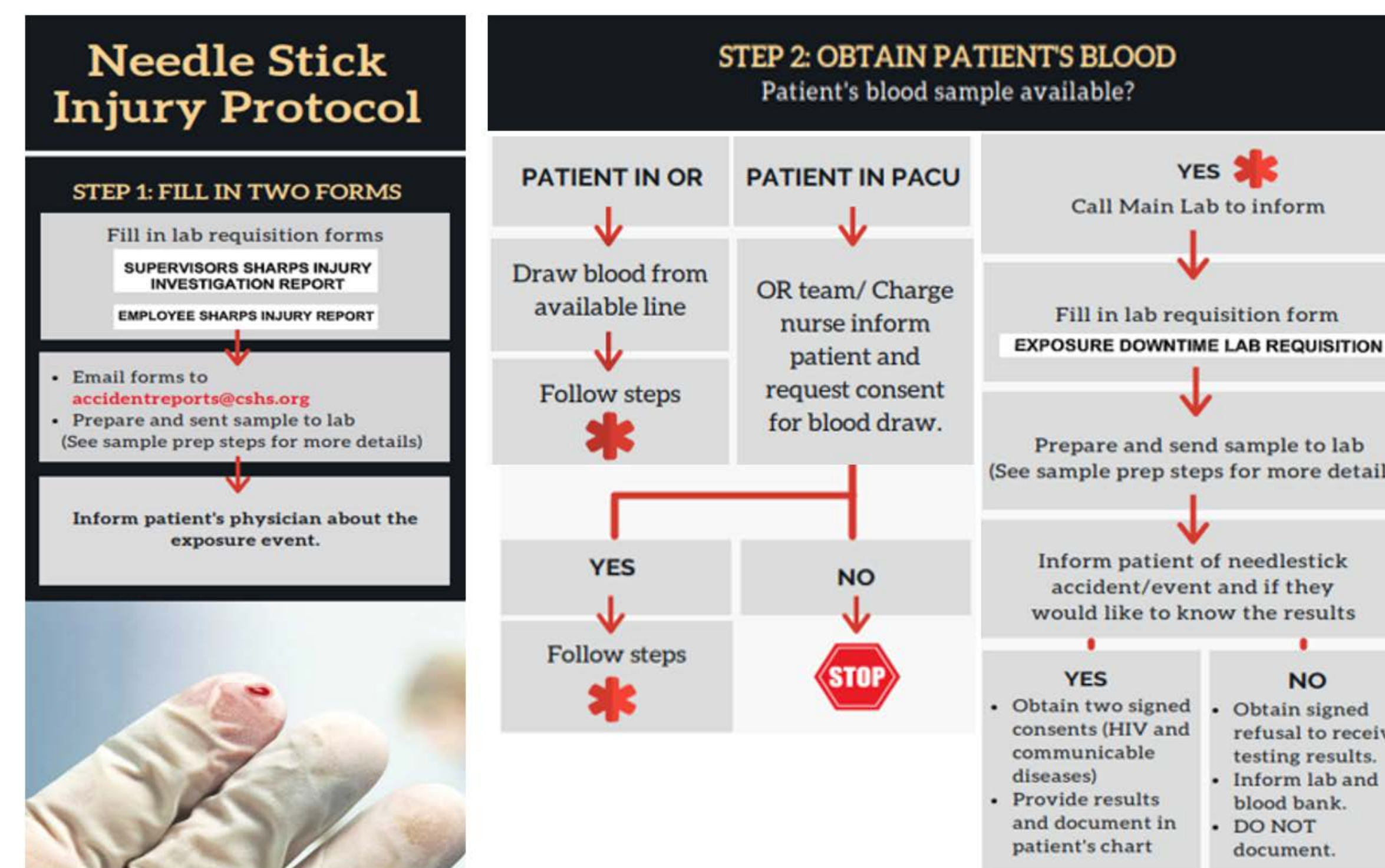
Our needlestick process was confusing and outdated. Often when needlesticks occurred in the perioperative area, no one knew what forms to fill out, who to notify and what labs needed to be drawn. A simpler standardized process was needed to disseminate within our department.

### Objectives of Project

- Standardize the needlestick process
- Reduce miscommunication and confusion among the perioperative nurses.

### Process of Implementation

- The operating room (OR) and post anesthesia care unit (PACU) educators met with perioperative leadership, the nurse practitioner from employee health services (EHS) and a charge nurse from PACU to discuss a plan for standardizing the process.
- A plan was devised to develop a needlestick kit that had everything the nurse would need if an event happened.
- Replaced the outdated binder with multiple confusing steps with a one-page infographic to list the step-by-step process when a needlestick occurs.
- Held Microsoft Teams and unit in-services to educate the perioperative staff prior to the roll out
- Emails were sent with the infographic to all perioperative staff informing them of the new process
- The kits were assembled with the infographic and necessary supplies needed in the event of a needlestick
- The needlestick kits were delivered to each OR and PACU.



**PATIENT CONSENT/REFUSAL TO CONSENT FORMS**

CEDARS-SINAI MEDICAL CENTER  
 CONSENT/ REFUSAL TO CONSENT TO COMMUNICABLE DISEASE TESTING/ REFUSAL TO RECEIVE RESULTS OF TESTING

CEDARS-SINAI  
 CONSENT FOR HIV BLOOD TEST

**BLOOD SAMPLE PREP**

- Put sticker with patient's name.
- Write "Attention: Source Patient".
- Use Needle Stick Kit to obtain sample (see pictures).

**FYI**

- You are covered by California law to draw blood in OR while patient under anesthesia even without consent.
- Please ask MD not to put orders for labs.
- Requisition for labs to be sent **only** by EHS personnel (7am-5pm) or AOD/ER (call 35180) for after hours.

### Statement of Successful Practice

After implementation of the needlestick kits and infographic, it has been noted that there has been less confusion among the staff and more collaboration between OR and PACU. We have seen less emails and phone calls on what to do in an event of a needlestick. EHS has noted since the implementation there has been a significant decrease in missing documents.

### Implications for Advancing the Practice of Perianesthesia Nursing

By Collaborating with OR and EHS and developing this needlestick kit and infographic, it has resulted in a more effective process with a positive impact within the department. As of February 2022, the reporting process had been digitized. The perioperative staff have been in-serviced on how to report an incident in CS-Safe instead of filling out paperwork.

As of February 22, 2022 all Employee Incident Reporting Forms have transitioned from Paper/Fillable PDFs to CS-Safe



**Step 1: Select the Employee Incident form**

Find a form

Star Site, Code Blue/ERT, Controlled Substances, Adverse Drug Reaction, Medication/Inf, Surgery/Procedure, Fall, Equipment/Medical Device, Skin Tear, Employee Incident, Safety/Security, Other Events

**Step 2: Fill out all known fields including indicated if the incident was a Sharps or Workplace Violent Event**

Employee Incident

General information about the employee incident (Also complete the online document until further notice)

Specific Event Type

Is this incident related to COVID-19?

Did the incident occur in the employee's assigned work area?

Did an injury occur?

Is this a workplace violence event?

Is this a sharps event?

**Step 3: Submit Form**

Delete, Exit, More Actions, Submit