A DECADE AFTER the Bloodborne Pathogens (BBP) Standard was first issued in 1991, the Occupational Safety and Health Administration (OSHA) revised it in April 2001 to emphasize the requirement to use safety-engineered devices. Over the last several years, OSHA has sharply stepped up enforcement of the BBP Standard. Its recent compliance directive and letters of interpretation on the standard further underscore its commitment to reducing needle sticks through the use of safer devices and practices. (See Clarifying Key Points for details.)

Big jump in citations
According to data from OSHA’s office of health compliance assistance, between April 2001 and May 2002, the agency handed out 132 citations for failure to use engineering and work practice controls in states regulated by federal OSHA. That’s four times the number issued for this specific violation in the previous decade.

OSHA citations specify the corrective action required and the time allowed for follow-through. The actions can include fines up to $7,000 for serious violations and up to $70,000 for repeat violations. Fines imposed for BBP standard violations between April 2001 and May 2002 totaled $1.27 million.

Despite OSHA’s expanded efforts to enforce the standard, many health care facilities still don’t comply with the requirement to use safety devices. In a health and safety survey conducted by the American Nurses Association in 2001, almost 20% of nurse respondents said their facilities “do not provide safe needle devices for injections, I.V. insertions, and phlebotomy procedures, despite the implementation of the federal Needlestick Safety and Prevention Act.”

The implementation of safety devices isn’t optional, says OSHA. A facility has leeway only in choosing which device to use in a given category, such as which style of safety I.V. catheters or lancets to use. Exceptions are allowed only if no safety device is commercially available for a given procedure or if use of a safety device would jeopardize a patient or is medically contraindicated. In such cases, the facility must clearly document in its exposure plan its reasons for not using a safety device.

Crying poor doesn’t fly
The message that safety devices aren’t optional was clear in an “interpretation letter” OSHA sent to the American Academy of Pediatrics (AAP). In July 2001, the AAP president had requested an exemption

---

**Clarifying key points**

In November 2001, OSHA clarified these issues in its updated compliance directive for the Bloodborne Pathogens (BBP) Standard.

- **Removing phlebotomy needles from blood tube holders is prohibited.** Clearly stated in the compliance directive, this message was reinforced in a June 2002 interpretation letter OSHA sent to someone who’d requested clarification: “The increased manipulation required to remove a contaminated needle from a blood tube holder is unnecessary and may result in a needle stick from either the front or back end of the needle.”

- **Separating sharps from reusable syringes or reusable blood tube holders is prohibited.** OSHA says, “Sharps containers should not create additional hazards,…that using unwinders is "generally prohibited,"…and that “shearing or breaking of contaminated needles is prohibited.” To support its position, OSHA cites the 1991 BBP Standard: “Contaminated needles and other contaminated sharps shall not be bent, recapped, or removed, unless the employer can demonstrate that no alternative is feasible.”

- **Safety needles aren’t required for procedures that don’t involve contact with patient body fluids.** According to OSHA, “Needles that will not become contaminated by blood during use (such as those used only to draw medication from vials) are not required to have engineering controls under this standard. The needle used for the actual injection, however, must incorporate engineering controls.” Also, safety needles must be used for accessing I.V. ports.
Exposure Safety

We want to hear from you, so please feel free to get in touch. For best response, use the numbers and addresses listed below so you’ll reach the people who can help you right away.

Want to submit a manuscript or need author guidelines? Call us at 1-800-346-7844, ext. 7702. You can also view our author guidelines on our Web site, http://www.nursingcenter.com.

Have article-related comments, questions, or reactions? Write to Nursing2002 at 1111 Bethlehem Pike, P.O. Box 908, Springhouse, PA 19477-0908, or E-mail nursing@lww.com (please include your mailing address).

Want to subscribe? Or have problems with your subscription or billing, or need to change your address? Call 1-800-879-0498.

Looking for home-study continuing-education opportunities? Call the Continuing Education Department at 1-800-346-7844, ext. 6513, and ask about our CE products or call 1-800-530-2378 to order.

Want a copy of our annual index? Access it at http://www.nursingcenter.com or send a self-addressed, stamped business-sized envelope with your request to Nursing Index, 1111 Bethlehem Pike, P.O. Box 908, Springhouse, PA 19477-0908.

Have information on new products? Send it to Kristen Rippman at Nursing2002, 1111 Bethlehem Pike, P.O. Box 908, Springhouse, PA 19477-0908.

Have questions about the books or videocassettes we offer? Call our book division at 1-800-666-5597 (or 1-800-331-3170 if you’re calling on behalf of an institution).

Interested in getting copies or reprints of articles in Nursing? Quotes of up to 500 words from any issue are permitted, for noncommercial purposes, with credit to Nursing2002, except for articles bearing a copyright notice of others. Authorization to photocopy (reproduction of articles via photocopy equipment) up to 100 copies of items from Nursing2002 for educational, noncommercial purposes is granted at no cost by Lippincott Williams & Wilkins, except for articles bearing a copyright notice of others. Requests for other purposes or for over 100 copies are authorized provided that the appropriate fees are paid to the Copyright Clearance Center (CCC), 222 Rosewood Dr., Danvers, MA 01923, telephone 978-750-8400 (ref. Nursing2002, ISSN 0360-4039, specifying volume, number, date, and title of article). Reprints (nonauthor) in large quantities, for commercial or academic use, may be purchased from the publisher. For information and pricing, please contact Jorie Rayfield at: 410-528-8521 (phone), 410-528-4284 (fax), or jrayfield@lww.com (E-mail). For republishing information, write to Permissions Department, 351 W. Camden St., Baltimore, MD 21201; fax: 410-528-8560; E-mail: permissions@lww.com.

American Nurses Association 2001 Health and Safety Survey results:
http://nursingworld.org/surveys

OSHA directive 2-2.69: Enforcement Procedures for the Occupational Exposure to Bloodborne Pathogens:


OSHA Standard Interpretations: 11/26/2001—Response to the American Academy of Pediatrics Regarding the Needlestick Safety and Prevention Act:

OSHA Standard Interpretations: 6/12/2002—Re-use of blood tube holders:

Last accessed on September 5, 2002.