

100 Heads Road, Private Bag 3003 Whanganui 4540, New Zealand

2 July 2015

Ms Rosemary Lynch

By email:

fyi-request-23767-76d78be9@requests.fyi.org.nz

Dear Ms Lynch

Official Information Act request

We are in receipt of your letter, transferred to DHBs from the Ministry of Health on 26 May 2015, which requests:

'How much money is spent annually on the purchase of hollow-bore needles for use in the NZ public healthcare system and who is the provider of those supplies?'

'What are the numbers and types of (hollow-bore) needles purchased annually for use in public health?'

'How many public health care workers, who have experienced a needle stick injury while in the workplace, tests positive for Hepatitis B or C virus or HIV annually?'

`Does the Ministry have any plans and/or policies in place to reduce instances of needle stick injuries in the public healthcare system?'

Please see the attached spreadsheet which gives costs and suppliers.

We have also attached the Whanganui District Health Board Procedure 'Blood / Body Fluid Accidental Exposure / Needlestick Injury or Sharp Non-needlestick Injury / Bite Injury Causing Skin Penetration' for your information.

Should you have any queries please contact our OIA co-ordinator: tricia.wells@wdhb.org.nz

Yours sincerely

Julie Patterson

Chief Executive Officer

nh A-Pattersa

Chief Executive Officer | Phone 06 348 1234 | Fax 06 3459390

Needle usage for WDHB for year 2014	r WDHB	for year 2014		1		-	
Item Number	20	Search Text	Description Line 2	qty 2014	Cost 2014	Supplier code	
W31142	¥	Fastin w/needles 222991		13	5343	10006	Johnson & Johnson Medical NZ
W2130	ΕĄ	Needle Biopsy Quick Core	QC18-6.0-10T (Min/5)	15	1125	10044	Obex Medical Ltd
W3128	EA	Needle Biopsy Quick Core		Ŋ	522.5	10044	Obex Medical Ltd
W30814	EA	Needle Quick Core Biopsy (6)		18	1350	10044	Obex Medical Ltd
W33206	PK	CY TwoFer Needle 16G	BX-2204940	2	70	10047	Rem Systems Limited
MEDS9026	BX	Needle Air Inlet Non-Return	Valve	49	3469.2	10047	Rem Systems Limited
W32776	ST	Intraosseous Needle Set 45mm	Set 45mm 15g EZ-10	10	1700	10080	Pharmaco NZ Ltd
DENT1101	BX	Needle Dental 30G Extra Short	13mm Bx/100	38	205.35	11576	Henry Schein New Zealand
DENT1102	æ	Needle Dental 27Gx22mm Short	Bx/100	18	61.2	11576	Henry Schein New Zealand
W5380	BX	Needle Dental 27Gx41mm Terumo	Bx/100	က	19.95	11576	Henry Schein New Zealand
W33629	BX	Needle 27G Medium Bx/100	L 35mm Terumo	∞	153.49	11576	Henry Schein New Zealand
W34392	Ą	HS228-2307 Needle Recapper-Aim	Safe Septo-Dont (Pk/4)	2	80.4	11576	Henry Schein New Zealand
W30905	EA	Plexufix Needle For Nerve	Blocks 22Fg X 2 Braun 332010	25	748.45	31322	Onelink (Health Support)
W24222	BX	Needle Spinal Tuohy 110Mm	(Box/10)	н	250	43451	Smiths Medical Australasia Pty Ltd
W32091	8X	Huber Gripper Needle $20 \mathrm{g} \times 1$	w/out Y sight 21-2717 (Box/12)	æ	534.75	43451	Smiths Medical Australasia Pty Ltd
W24318	BX	Gripper Needle $20 \mathrm{g} \times 1$	(Box/12)	ᆏ	187.77	43451	Smiths Medical Australasia Pty Ltd
W30401	BX	Needle Gripper 22G 19Mm With	Y Site (Box/12)	н	187.77	43451	Smiths Medical Australasia Pty Ltd
W31067	BX	Needle Gripper+ 20G X 19Mm	Without Y Site (Box/12)	₩	51.5	43451	Smiths Medical Australasia Pty Ltd
W31480	BX	Needle Gripper+ 20G X 25Mm	Without Y-Site (Box/12)	က	587.73	43451	Smiths Medical Australasia Pty Ltd
W31806	BX	Needle Gripper 20G x 19mm	21-2734-24	∞	1426	43451	Smiths Medical Australasia Pty Ltd
W34137	BX	FRVI-9001 Intraosseous Needle	Set 25mm 15g EZ-IO (Bx/5)	↽	725	909484	Frontier Medical Div of Pharmaco
MEDS7530	BX	Needle 18G X 1.5		156	217.45	911525	Becton Dickinson Ltd
MEDS7540	BX	Needle 20G X 1		13	44.2	911525	Becton Dickinson Ltd
MEDS7542	BX	Needle 21G X 1		46	159.62	911525	Becton Dickinson Ltd
MEDS7545	BX	Needle 22G X 1.5		76	263.72	911525	Becton Dickinson Ltd
MEDS7550	BX	Needle 23G X 1		18	62.46	911525	Becton Dickinson Ltd
MEDS7554	BX	Needle Blunt Fill 18G With	Filter	268	2859.2	911525	Becton Dickinson Ltd
MEDS7560	BX	Needle 25G X 5/8		9	20.82	911525	Becton Dickinson Ltd
MEDS7569	BX	Needle Spinal 22G X 1.5In	Quinke Point	П	32.25	911525	Becton Dickinson Ltd
MEDS7570	BX	Needle Spinal 18G X 3.5in	Quincke Point	2	32.25	911525	Becton Dickinson Ltd
MEDS7572	BX	Needle Spinal 20G X 3.5in	Quincke Point	9	32.25	911525	Becton Dickinson Ltd
MEDS7573	BX	Needle Spinal 22G X 3.5in	Quincke Point BX/25	13	32.25	911525	Becton Dickinson Ltd
MEDS7574	BX	Needle Spinal 25G X 3.5in	Quincke Point BX/25	4	32.25	911525	Becton Dickinson Ltd
MEDS7580	BX	Needle 27G X 11/2		18	62.64	911525	Becton Dickinson Ltd
MEDS7583	BX	Needle Spinal 25G X 3.5in	Whitacre Point	4	53.36	911525	Becton Dickinson Ltd
MEDS9501	BX	Needle 25G X 1.5		24	83.28	911525	Becton Dickinson Ltd
MEDS9891	BX	Needle 25G X 1		6	31.23	911525	Becton Dickinson Ltd

Becton Dickinson Ltd	Becton Dickinson Ltd	Becton Dickinson Ltd	Becton Dickinson Ltd	Becton Dickinson Ltd	Becton Dickinson Ltd	Becton Dickinson Ltd	Becton Dickinson Ltd	Becton Dickinson Ltd	Becton Dickinson Ltd	Device Technologies New Zealand Ltd	Device Technologies New Zealand Ltd	Healthcare Logistics	CareFusion NZ 313 Ltd (Cardinal)	USL Medical (Continence) (Universal Spec	Capes Medical Supplies Ltd	
911525	911525	911525	911525	911525	911525	911525	911525	911525	911525	914267	914267	986560	1107651	1224444	1225148	
48.3	48.3	70.29	1734.2	3.47	66	76.73	9793.02	42	11.75	173.77	2000	5810	840	28.62	429.52	43977.26
7	თ	T	13	ᆏ	9	ᆏ	391	4	₩	П	7	14	4	80	2	
Quincke 405148	Quincke 405149	Whitacre 4050140	c/w Introducer Whitacre BX/25		Vacutainer Bx/50	Pink (Box/10)	18G×11/2"305180	0.25 x 8mm Thin Wall (Bx/100)	5mm (Bx/100)	Sample 23G (BX/50)	(Box/5)	(Box/25)	(Bx/5)		Taper Point 40mm No.3 (Bx/25)	
Needle Spinal 22G X 5in Bx/10	Needle Spinal 22G X 7in Bx/10	Needle Spinal 25G X 5in Pk/10	Needle Spinal 25G X 3.5in Set	Needle 26G X .5 (Box/100)	Needle Flashback 22g 301747	Spinal Needle Quincke 18g 6	Blunt fill Non Coring Needle	320471 Micro-Fine Pen Needle	320470 Micro-Fine Pen Needle	Needle Vygon Neosafe Blood	AR-13995N MF.Scorpion Needle	#4502116 Pencan Spinal Needle	Needle Trucut Biopsy 6 Inch.	Needle Verres Short 120Mm	Mayo Needle Half Circle Round	
ВХ	BX	¥	BX	ВХ	BX	BX	BX	BX	BX	BX	æ	BX	æ	EA	æ	
W29594	W30984	6066M	W11301	W7294	MEDS1014	W32203	MEDS2306	W34065	W34477	W31507	W32846	W31819	W7013	W6680	W7405	



Procedure

Blood / Body Fluid Accidental Exposure. **Needlestick Injury or Sharp Non Needlestick Injury** Bite Injury Causing Skin Penetration

Applicable to:

Authorised by: Manager, Centre for Patient

Whanganui District Health Board

Safety & Service Quality

Contact person: Clinical Nurse Specialist,

Infection Prevention & Control

1. Purpose

That all accidental blood/body fluid exposure is cared for in the same way

Needlestick injuries carry a risk of transmitting infections, notably hepatitis B and C, and HIV. Background prevalence of HIV is very low in the community. Background prevalence of hepatitis B carriage is about 1% in the general population, and slightly higher among IV users. Background prevalence of hepatitis C is low in the general community but high among IV users.

The estimated risks of transmission of infection from a single needlestick injury where the source is known to be virus positive are:

Hepatitis B:

6-30%

Hepatitis C:

2%

HIV:

0.3%

These risks vary depending on circumstances, such as depth of injury, and viral load of source. In a majority of cases the source will not be virus positive for any of these agents.

2. Scope

This procedure applies to all Whanganui District Health Board (WDHB) employees (permanent, temporary and casual), visiting medical officers, and other partners in care, contractors, consultants and volunteers.

Definitions 3.

Needlestick injuries - This is the piercing of any skin/mucus membrane by a sharp object which was unintentional

Blood/body fluid exposure - Is the touching of any foreign blood/body fluid to the health care workers skin/mucus membrane which was unintentional.

Bite - The skin is broken and there is exposure to body fluid e.g. saliva.

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4. Procedure

- Immediate local treatment of wound by washing with soap and water and decontaminating of mucous membrane or skin by washing/flushing thoroughly with water. Rinse eye out if contaminated, remove contact lens if insitu.
- Notify manager or person in charge of your area
- Go to the emergency department for medical assistance
- Enter incident on "Riskman". You will be prompted to complete a blood/body fluid exposure extension of the Riskman incident. This will assist you in identifying your risk along with guiding you if further assessment is required. Print a copy of the incident report. If worker is unsure of exposure risk or if further assessment is required a medical officer will need to assess the risk of Hepatitis B, C or HIV.

Monday to Friday (normal working hours)

- Contact the duty nurse manager, and the Emergency Department
- In rural areas, contact duty nurse manager and the local medical officer

After Hours

- Contact duty nurse manager and present to the Emergency Department
- In rural areas contact the duty nurse manager and the local medical officer or use the Emergency Department Whanganui hospital

If worker is unsure of exposure risk or if further assessment is required, contact Clinical Nurse Specialist Infection Control, or the Emergency Department during normal working hours, Monday to Friday. After hours, contact Medical Officer, Emergency Department, Whanganui Hospital. In rural areas, contact the local Medical Officer or use the Emergency Department Medical Officer, Whanganui Hospital.

Enter on Riskman. If further assessment is required report to the Medical Officer in the Emergency department who will then assess the risk of Hepatitis B, C or HIV

If the exposure carries a high risk of Hepatitis Infection

Check worker's Hepatitis B vaccination status. If immune status is unknown, take blood for Hepatitis B serology

Test the staff member for hepatitis C if the source is known to be hepatitis C positive or has risk factors. Patient's consent to be obtained if blood is required for hepatitis B or hepatitis C antibody. Test source patient's blood where possible. Fill in Laboratory Request Form. Label "Urgent Staff Accident"

Hepatitis B immunoglobulin to be administered to the exposed healthcare worker with no immunity to hepatitis B if the exposure is deemed to be high risk. Follow CDC MMWR recommendations. There is no vaccine or prophylaxis for hepatitis C exposure

If the exposure carries a high risk of HIV infection

Test the source patient for HIV, following the protocols of obtaining patient consent (oral consent is required and is to be documented in the patient medical notes) and give pre-test counselling. If patient refuses test refer to Infection Control as soon as possible within normal working hours, who will assess the patient risk for HIV guided by New Zealand HIV statistics and the patient at risk factors. If the patient's blood is negative for HIV no further action is required. If the patient is known to be HIV positive or when assessing a patient the risk is thought to be high, the healthcare worker is to be referred to Physician on Duty for further advice re prophylaxis. HIV testing and pre-test counselling will be offered after obtaining consent.

Follow up tests

Follow-up tests are required for any proven viral positive source, and in any case where HIV prophylaxis has been used. Ideally these are done at six weeks, three months, and six months post-exposure. Follow-up blood tests can also be considered if source status is unknown, or if the source is serology negative but with risk factors which indicate they may be in the window period for seroconversion.

If healthcare worker decides to have Post Exposure Prophylaxis (PEP) Therapy

Arrange follow up for healthcare worker with a Physician and obtain their signed consent for prophylaxis. During normal hours obtain post exposure drugs from Pharmacy. If after hours, use the Drug Cupboard. The exposed worker may put this on the riskman form Contact on call pharmacist for current regime

Follow up of blood/body fluid exposure incident

All personnel who complete a blood/body fluid exposure riskman will have their incident reviewed by their unit manager. The clinical nurse specialist infection prevention and control reviews all blood/body fluid exposure incidents entered on Riskman and relevant laboratory results. The staff member will be notified by the clinical nurse specialist infection prevention and control of laboratory results through internal mail systems (either electronic or hard copy) as soon as they are available.

5. Roles and responsibilities

Exposed worker

- Complete immediate first aid
- Notify line supervisor/ manager
- Action medical assistance from Emergency department
- Complete riskman
- Ensure ACC 45 form is completed and given to your supervisor/manager

Immediate supervisor

- Direct the injured worker to the body fluid /needlestick injury procedure
- Direct the exposed worker to the appropriate medical assistance
- Release the exposed worker from their job as soon as able to attend to injury
- Remind the exposed worker to complete riskman

Infection Prevention and Control

- Will follow up with the results of all blood tests
- Complete the riskman forms
- Send the results out of the workers blood tests, via email or hard copy in internal mail
- Ensure that post exposure follow up is appropriate
- Follow up care as necessary

Emergency department doctor

- Will ensure appropriate medical care has been given
- Order baseline blood tests
- Prescribe antibiotics if appropriate for bite injury
- Referral if necessary to medical physician
- Refer if necessary to infectious diseases physician
- Advise if immediate prophylaxis of antiviral medication is necessary
- Complete ACC 45 medical certificate

Health and Safety Quality Coordinator

Manage the ACC work injury claim if necessary with WellNZ

6. Measurement criteria

Riskman audits

7. References

Updated US Public Health Service Guidelines for the Management of Occupational Exposures to HBV, HCV and HIV and Recommendations for Post-exposure Prophylaxis. MMWR September 30, 2005.

8. Related Whanganui District Health Board documents

WDHB Injury management procedure

9. Appendicies

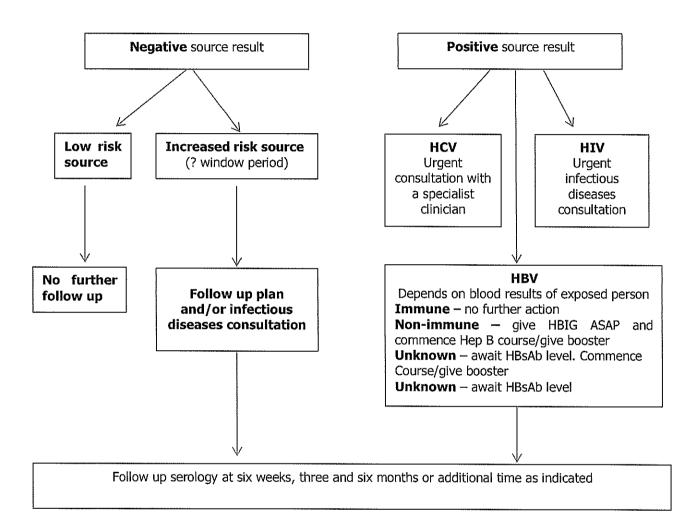
Appendix 1: Immediate Management Flow Chart – Source Identity Known Appendix 2: Immediate Management Flow Chart – Source Identity Unknown

10. Key words

Needlestick injury Sharps Blood/ body fluid Exposure Bite

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Immediate Management Flow Chart - Source Identity Known



Immediate Management Flow Chart - Source Identity Unknown

