Safe injection practices are not optional. They are a basic expectation anywhere injections are administered. It may be hard to believe, but over the last decade, syringe reuse and misuse of medication vials have resulted in dozens of outbreaks and the need to alert over 100,000 patients to seek testing for bloodborne pathogens such as Hepatitis B virus, Hepatitis C virus, and HIV.

**Injection Safety is Every Provider’s Responsibility**

**About the Safe Injection Practices Coalition**

The Safe Injection Practices Coalition (SIPC) is a partnership of healthcare-related organizations led by the Centers for Disease Control and Prevention that was formed to promote safe injection practices in all U.S. healthcare settings. The SIPC has developed the One & Only Campaign – a public health education and awareness campaign – aimed at both healthcare providers and patients to advance and promote safe injection practices.

The following organizations are members of the SIPC:

- Accreditation Association for Ambulatory Health Care (AAAHC)
- American Association of Nurse Anesthetists (AANA)
- Ambulatory Surgery Foundation
- Association for Professionals in Infection Control and Epidemiology, Inc (APIC)
- BD (Becton, Dickinson and Company)
- Centers for Disease Control and Prevention (CDC)
- CDC Foundation
- Coviden
- HONORReform Foundation
- Hospira
- National Association of County & City Health Officials (NACCHO)
- Nebraska Medical Association (NMA)
- Nevada State Medical Association (NSMA)
- Premier healthcare alliance
- US Food and Drug Administration – Safe Use Initiative (Advisor)

For more information about the SIPC and to view additional resources, including videos and other materials, please visit:

www.OneandOnlycampaign.org
Injection safety guidelines from CDC

- Never administer medications from the same syringe to more than one patient, even if the needle is changed.
- After a syringe or needle has been used to enter or connect to a patient’s IV it is contaminated and should not be used on another patient or to enter a medication vial.
- Never enter a vial with a used syringe or needle.
- Never use medications packaged as single-dose vials for more than one patient.
- Assign medications packaged as multi-dose vials to a single patient whenever possible.
- Do not use bags or bottles of intravenous solution as a common source of supply for more than one patient.
- Follow proper infection control practices during the preparation and administration of injected medications.
- Wear a surgical mask when placing a catheter or injecting material into the spinal canal or subdural space.

Unsafe Injection Practices and Disease Transmission

Reuse of syringes can transmit infectious diseases such as Hepatitis C virus (HCV). The syringe does not have to be used on multiple patients for this to occur.

1. New needle and syringe are used to draw medication.
2. When used on an HCV-infected patient, backflow from the injection contaminates the syringe. Changing the needle does not prevent contamination of the syringe.
3. When reused to obtain medication, the contaminated syringe contaminates the medication vial.
4. If the contaminated vial is used for other patients, they can become infected with HCV.

Three things every provider needs to know about injection safety

1. Needles and syringes are single use devices. They should not be used for more than one patient or reused to draw up additional medication.
2. Do not administer medications from a single-dose vial or IV bag to multiple patients.
3. Limit the use of multi-dose vials and dedicate them to a single patient whenever possible.

Source: Centers for Disease Control and Prevention (CDC).
http://www.cdc.gov/injectionsafety/providers/provider_faqs.html

Remember:
ONE Needle,
ONE Syringe,
ONLY ONE Time.

How can healthcare providers ensure that injections are performed correctly?

Healthcare providers can review medication preparation and administration procedures with staff and colleagues to ensure that safe practices are understood and followed by all.


Adapted from MMWR (May 16, 2008 / 57(19);513-517)