

Protecting Staff Without Compromise

Sharps injuries are a very real danger for healthcare workers. Keeping your workers focused on the patient is of utmost importance. The right safety products can help your staff maintain a safe work environment and help reduce the chance of experiencing a sharp injury.

According to the CDC approximately

1,000 injuries/day

happen from sharp instruments at hospitals every year.



Each sharp injury can cost between

\$500 – \$3,000

per post exposure treatment.

If a patient contracts HIV, costs can spike as high as

\$20,000/year.



17% of sharps injuries are caused by *scalpel blades.*

49% of sharps injuries are to *Nurses or Surgery Attendants.*

90% of the time an injury occurs, *the sharp was contaminated.*

Along with compromising healthcare workers safety, lifetime medical costs can be more than

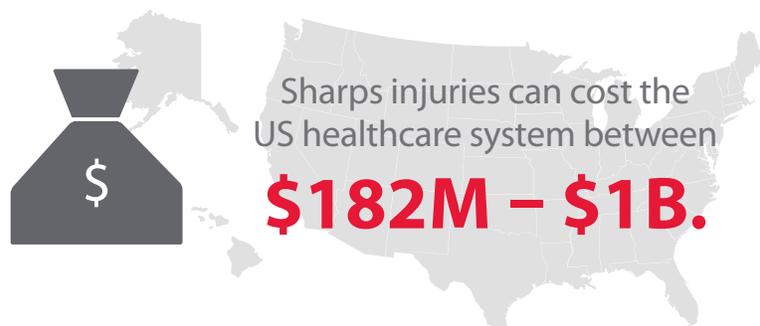
\$1 MILLION

for an infected person.



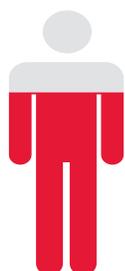
approximately
20x's
per day

injuries happen in the removing or attaching of blades to reusable handles.



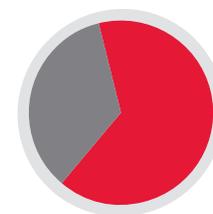
69%

of injuries happen during passing of the device.



35%

of sharps injuries happen in the operating room.



To enable your staff to provide the best possible care to their patients, while also complying to sharp safety regulations and to gain access to our wide breadth of safety scalpel devices, please contact your local Aspen Surgical representative or visit www.aspensurgical.com.

1. Panlilio AL, Cardo DM, Campbell S, Srivastava PU, Jagger H, Orelie JG et al. Estimate of the annual number of percutaneous injuries in U.S. healthcare workers [Abstract S-T2-01]. In: Program and abstracts of the 4th International Conference on Nosocomial and Healthcare-Associated Infections; Atlanta, March 5-9, 2000:61.
2. Jagger J, Berger R, Phillips EK, Parker G, Goma AE. Increase in Sharps Injuries in Surgical Settings Versus Nonsurgical Settings after Passage of National Needlestick Legislation. J Am Coll Surg 2010; 210: 496-502.
3. EPINet Report for Needlestick and Sharp Object Injuries Jan 2014-Dec 31 2014.
4. United States General Accounting Office. Occupational safety: selected cost and benefit implications of needlestick prevention devices for hospitals. GAO-01-60R; November 17, 2000.
5. Hellinger F and Fleishman J, "Estimating the National Cost of Treating People With HIV Disease: Patient, Payer, and Provider Data," Journal of Acquired Immune Deficiency Syndromes, Vol. 24 (2000), pp. 182-88.