



Sharps Injury Report (Confidential)

Exposed employee: _____ Date: _____

Job Classification: _____ Program: _____

Source patient: _____

Date & time of exposure: _____

Procedure being performed: _____

Instrument being used: _____ Brand: _____ Size: _____

Incident as described by exposed employee: _____

Was safety device used? Yes No

If so, was the safety feature activated? Yes No

Did the injury occur before *or* after activation of protective mechanism?

If a safety device was not used, could a safety device have prevented the injury?

Yes No

If so, how? _____

Could any of the following controls have prevented the injury? Describe how.

Engineering control _____

Administrative control _____

Work Practice control _____

Signatures

Dates

Exposed Employee: _____

Supervisor: _____

Safety Director: _____