

Safe Injection Practices

Safe injection practices are a vital component of healthcare organizations' infection prevention and control (IPC) protocols. Yet, despite established standards and guidance, lapses in injection safety still happen. These lapses can put patients and healthcare providers at risk of disease transmission and other harms, such as needlestick injuries. Unsafe injection practices also can lead to financial losses as a result of increased liability exposure and costs associated with potential loss of reputation.

To address these issues, healthcare organizations should include safe injection practices as part of their IPC policies, training, and core competencies for healthcare providers and staff members. This checklist offers key strategies for injection safety and can help organizational leaders evaluate their current protocols and identify improvement opportunities.¹

	Yes	No
Organizational Policies and Procedures		
Does your organization incorporate guidance on safe injection practices from the Centers for Disease Control and Prevention (CDC) and other professional organizations into its IPC policies?		
Does your organization's IPC policies include guidance related to hand hygiene and the use of personal protective equipment (e.g., gloving and using face masks during the administration of epidural injections)?		
Does your organization have and enforce protocols for the use of aseptic technique — i.e., handling, preparing, and storing medications and injection equipment/supplies to prevent microbial contamination?		
Does your organization's IPC policies require that medication preparation occurs only in a clean, dedicated medication prep area?		
Has your organization implemented policies and procedures for cleaning and disinfection of environmental surfaces?		

	Yes	No
Organizational Policies and Procedures (continued)		
Has your organization implemented policies and procedures to prevent drug diversion?		
Does your organization stock adequate injection supplies and equipment to prevent reuse of items?		
Has your organization implemented or considered technologies related to injection safety (e.g., auto-disable syringes or reuse prevention syringes)?		
Safe Injection Practices		
Are injections prepared as close as possible to the time of administration to the patient?		
Are needles/syringes removed from sterile packaging at the time of use and not in advance?		
Are intravenous (IV) bags opened or spiked as close to the time of use as possible?		
Are single-dose medication vials used whenever possible?		
Are multidose medication vials dedicated to a single patient whenever possible?		
If multidose vials must be used for more than one patient, are they maintained in a centralized medication area and kept out of patient treatment areas?		
Are medication vials entered with a new needle and a new syringe, even when obtaining additional doses for the same patient?		
Do providers put a date on multidose vials when they are first opened and discard them within 28 days unless the manufacturer specifies a different disposal date?		
Do providers swab the access diaphragms of medication vials with alcohol or an appropriate disinfectant before inserting a device into the vial?		
Are the following injection practices prohibited?		
 Administering medications from the same syringe to multiple patients (even if the needle or cannula on the syringe is changed)? 		

	Yes	No
Safe Injection Practices (continued)		
 Administering medications from a single-dose vial or IV solution bag to more than one patient? 		
Combining the leftover contents of single-dose vials for later use?		
Reusing syringes to enter medication vials/solutions?		
 Reusing IV administration supplies (e.g., bags, tubes, and connectors) on more than one patient? 		
Reusing vacutainer holders?		
Are used sharps disposed of at the point of care in sharps containers that are closable, puncture-resistant, and leak-proof?		
Do healthcare providers follow the CDC's infection control considerations for blood glucose monitoring and insulin administration?		
Do healthcare providers follow best practices for infection prevention during point-of-care testing?		
Are patient care areas appropriately spaced, and do patients have dedicated IV poles and chair-side tables?		
Do providers take precautions to ensure that potentially contaminated items do not come in contact with other patient care items?		
Are immediate-use compounded sterile preparations (CSPs) administered within 4 hours following the start of the preparation per United States Pharmacopeia–National Formulary standards for sterile compounding (USP <797>)?		
Training and Oversight		
Do providers who prepare and/or administer parenteral medications receive training on safe injection practices during orientation, annually, and when new equipment, technology, or procedures are introduced?		
Are providers required to demonstrate competency with safe injection practices following training?		

	Yes	No
Training and Oversight (continued)		
Do providers receive training on how to properly dispose of used syringes, needles, and IV administration supplies (e.g., bags, tubes, and connectors)?		
Does your organization routinely monitor providers to ensure adherence to safe injection protocols?		
Are any safety issues identified during monitoring documented, and do providers receive feedback?		

Learn More

For more information about IPC guidelines and best practices in various healthcare settings, see the following MedPro materials:

- Risk Resources: Infection Prevention & Control in Ambulatory Care Settings
- Risk Resources: Infection Prevention & Control in Dentistry
- Risk Resources: Infection Prevention & Control in Hospitals
- Risk Resources: Infection Prevention & Control in Senior Care Organizations

Endnotes

¹ Centers for Disease Control and Prevention. (2016, September). *Guide to infection prevention for outpatient settings:*Minimum expectations for safe care (Version 2.3). Retrieved from www.cdc.gov/healthcare-associated-infections/hcp/prevention-healthcare/outpatient-expectations.html; Centers for Disease Control and Prevention. (2024, May 15). Dental infection prevention and control: Best practices for safe injections. Retrieved from www.cdc.gov/dental-infection-control/hcp/dental-ipc-faqs/safe-injections.html; Centers for Disease Control and Prevention One & Only Campaign. (n.d.). Injection safety checklist. Retrieved from www.cdc.gov/injection-safety/media/pdfs/safe-injection-checklist-p.pdf; Centers for Disease Control and Prevention. (2024, March 26). Injection safety: Preventing unsafe injection practices. Retrieved from www.cdc.gov/injection-safety/hcp/clinical-safety/index.html; Centers for Disease Control and Prevention. (2024, April 12). Injection safety: Safe injection practices to prevent transmission of infections to patients. Retrieved from www.cdc.gov/injection-safety/hcp/clinical-guidance/index.html; American Society of Health-System Pharmacists. (2023). USP <797> key changes. Retrieved from www.ashp.org/-/media/assets/pharmacy-practice/resource-centers/compounding/docs/USP-797-Key-Changes.pdf

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