

## QUESTIONNAIRE OF ACCIDENTAL SHARP OBJECTS INJURIES (ASOI)

Each year, hundreds of thousands of accidental sharps objects injuries (ASOI) occur in health care settings. Although the risk of acquiring HIV or Hepatitis infection from infected blood is very low, the psychosocial toll that these incidents take on professionals is inestimably high.

The aim of this questionnaire is, first, to assess the extent and circumstances of ASOI and the frequency of its reporting at our institution. Second, to learn from staff whether there are possible gaps in the present practice, training, prevention and follow up measures that could decrease the incident of ASOI and to mitigate its impact on professionals.

1. Has an ASOI happened to you?

Yes  No

2. If ASOI happened to you what device caused the injury?

- scalpel
- lancet
- needle
- sutures
- intravenous catheter
- other (please specify)

3. To your knowledge was the device contaminated with body fluids?

Yes  No

4. If the device was contaminated, to your knowledge was the body fluid infected?

Yes  No

5. If the device was contaminated with infected body fluid do you know what it was (please specify)

Yes  No

6. Did you report the incident?

Yes  No

7. If you did NOT report what was the reason for not reporting?

- sterile/clean needle stick
- did not perceive of the risk
- too busy
- dissatisfied with follow-up procedures
- other (please

specify) \_\_\_\_\_

8. Did you encounter any problems in either reporting the incident or receiving follow-up in a timely fashion?

Yes  No

9. If you encountered problems would you describe these in your own words?

10. What did the post ASOI protocol have you received consist of?

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11. Was counseling offered as part of the follow-up protocol?

Yes  No

12. Did you receive risk-reduction education?

Yes  No

13. Could you state some of the causes of ASOI that, in your opinion, may form a "chain of circumstances" to cause injuries?

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14. Do you have suggestions about how to best prevent ASOI?

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15. How could the hospital system better meet your needs/concerns?

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16. How would you identify yourself as to your profession?

- Nurse  Physician  
 Medical student  Resident physician  
 Other (please specify)  Phlebotomist  
 Housekeeping  Trainee  
 Beginning of training  Middle of training  
 End of training  
 Other (please specify)-