

Safety Note 73

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SHARPS INJURIES IN SCIENTIFIC RESEARCH

DOCUMENT CONTROL

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SUMMARY

Various research activities at the University (and off-site) involve sharps use, which on occasion lead to needlestick or similar sharps injuries. This Safety Note provides guidance to the research community on the minimum operational standard that should be put in place when sharps are used in a research environment.

1 SHARPS

Needles, blades (such as scalpels), metal wires and other medical/research instruments with a sharp edge or tip needed to carry out specific research or healthcare work and could cause an injury by cutting or pricking the skin are defined as sharps.

2 SHARPS INJURIES

Sharps injuries are a known risk in research, health and social care sector. Sharps contaminated with biological agents or chemicals can transmit diseases (including blood born viruses e.g. hepatitis B, C and human immunodeficiency virus) and/or introduce toxic chemicals into the body. Due to the transmission risk, sharps injuries can cause worry and stress to the injured person and can be serious.

3 WHO IS AT RISK

Those who directly handle sharps (e.g. researchers, technicians, academics, students and visiting students) and others (e.g. co-workers, cleaners, porters, maintenance workers, visitors and members of public).

4 RISK ASSESSMENT & LOCAL ARRANGEMENTS

Sharps are used for a variety of purposes in research, and the appropriate precautions and response to an injury will depend on the nature of the work and the hazards involved. All work involving sharps, whether undertaken on or off site (including field trips and work at other research facilities, institutions or universities), must be appropriately risk assessed before the work begins.

Where sharps are used in conjunction with biological agents, genetically modified organisms, human or animal tissue, or body fluids (including blood, saliva, urine and excrement), additional risk controls, approvals or authorisations may be required. These may include approval through the appropriate University committee or governance process, such as the Sub-Committee for Biological Safety or relevant ethics approval. Where the work involves particularly hazardous biological materials or other significant risks, consultation with Health and Safety Services should be undertaken to determine the appropriate controls and approval requirements, which may include health surveillance.

The risk assessment must identify the hazards associated with the sharps and establish a proportionate response to a sharps injury, taking account of the material involved, the route of exposure and the potential consequences of an injury. For this a decision flow chart is attached below ([Appendix 2](#)). The required response may range from washing a minor cut or injury under running water and applying a plaster, through to assessment by the Emergency

Department or Occupational Health referral to a specialist facility, or other arrangements such as quarantine or isolation where this may be appropriate.

For events such as this the Needlestick Sharps letter below ([Appendix1](#)) must be utilised.

Local arrangements must be established before work begins and should include, as a minimum:

- Local rules and a copy of the current, signed risk assessment, including details of the chemicals, biological agents, tissues or body fluids involved.
- Appropriate induction, training and authorisation requirements, together with records of completion.
- Emergency contact details and first aid arrangements, including arrangements for contacting appropriate medical or occupational health services.
- Arrangements for obtaining specialist medical advice and/or assessment where the risk assessment identifies a potential for significant exposure or injury.
- Consideration of whether health surveillance or other occupational health arrangements are required, based on the risks identified by the assessment.

The risk assessment should also consider the arrangements required for work undertaken away from the University, including access to appropriate first aid, emergency medical treatment, communication and transport arrangements.

All sharps' incidents and near misses must be reported via the - [Report an Incident online – University of Reading](#).

5 APPENDICES

Appendix 1 – Needlestick Sharps Letter 2026



Occupational Health Service

JJ Thomson Building, University of Reading,
Building 3, 1st Floor, Rooms 117A/117B, Whiteknights
Reading, Berkshire, RG6 6AF

Phone +44 (0)118 378 8635/8654

email occupationalhealth@reading.ac.uk

Emergency Department
Royal Berkshire Hospital
Reading

Date.....

Dear Emergency Department

Re University of Reading Employee/Student Sharps Injury

The following employee/student has experienced a sharps/splash incident whilst working in an area where the following are used:

- Unscreened human blood
- Faeces
- Saliva
- Urine

In view of the nature of the laboratory work it is unlikely a source patient can be identified.

Please note

The University of Reading does not have an Occupational Health Service that operates 24 hours a day / 7 days a week and this injury may have occurred outside of our usual hours.

The University of Reading Occupational Health Service is unable to take blood or provide Post Exposure Prophylaxis and hence this Employee/Student has been advised to attend the Emergency Department.

Following the incident the Employee/Student has carried out the following first aid measures including:

Services Requested

I would be grateful if you can assess the employee/student and consider the following:

Was the source considered high risk for Hepatitis B:

Can a Hepatitis B Booster be given or a course of Hepatitis B commenced or does Hepatitis B immunoglobulin need to be considered?

See Green [book](#) Table [18.8](#) Hepatitis B prophylaxis for reported exposure incidents

https://assets.publishing.service.gov.uk/media/68385046e0f10eed80aafad9/Hepatitis-B-green_book-chapter-18-06-03-2025.pdf

Was the source considered a high-risk source for HIV:

Does Post Exposure Prophylaxis need to commence?

Was the Source a high risk for Hepatitis C:

After the appointment I would be grateful if you can provide the employee/student with a record of attendance and actions taken as this will help the University Occupational Health Service to arrange appropriate follow up.

Yours faithfully

Name of manager/supervisor completing form:

Occupational Health Team

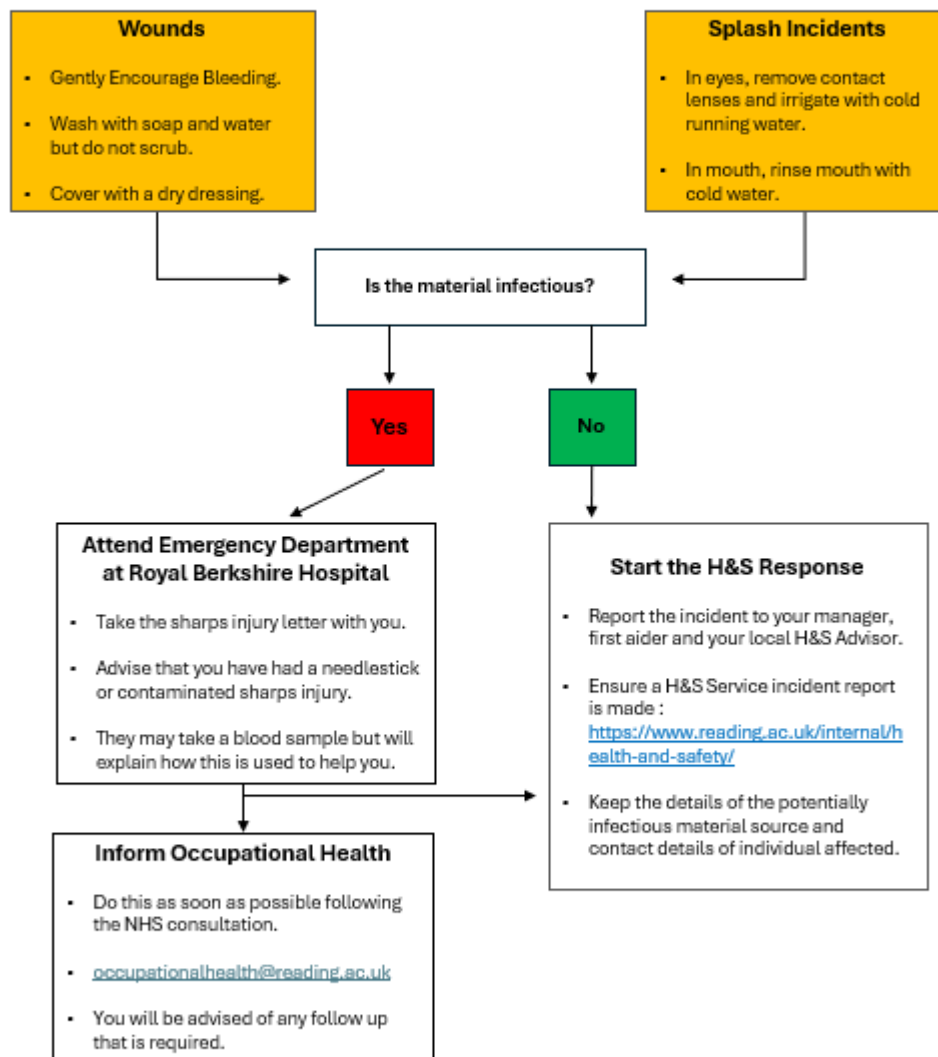
occupationalhealth@reading.ac.uk

Appendix 2 – Needlestick Poster 2026



Needlestick and sharps injury

What to do if they occur



University of Reading 25/08/2026. [OH](#) Services and H&S Services

6 REFERENCES

Occupational Health

Bloodborne viruses (BBV) - HSE