Healthcare Worker Survey

OMB No. 0920-0666
Exp. Date: xx-xx-20xx

*required for saving **required for completion ^required for exposure management

^Facility ID # : _____

^Survey Year: _____

^1. Which of the following best describes your occupation/work area?(check one):

_____ Surgical Medical Staff
_____ Non-Surgical Medical Staff
_____ Dental Staff
_____ Phlebotomist/IV team
_____ Nursing staff
_____ Technician
_____ Clerical/Administrative Staff
_____ Transport/Service
_____ Central Supply Staff
_____ Maintenance/engineering staff
_____ Housekeeping/Laundry Services
_____ Other Staff
_____ Security
_____ Medical Student
_____ Other Student

^2. In the past 12 months, have you been injured by a sharp object, such as a needle or scalpel, that was previously used on a patient (contaminated)?

____Yes ____No (If yes, complete 2. a. and b. below. If no, go to question 3.)

a. If yes, how many contaminated sharp object injuries did you sustain during in this time period? _____
b. For how many of these exposures did you complete/submit a blood/body fluid exposure report? _____

^3. In the past 12 months did blood or body fluids have direct contact (e.g., through a splash) with your eyes, nose, mouth or skin?

____Yes ____No (If yes, complete 3. a. and b. below. If no, go to question 4.)

a. If yes, how many blood/body fluid exposures did you sustain during this time period? _____
b. For how many of these exposures did you complete/submit a blood/body fluid exposure report? _____

**4. If you had sharps object injuries or blood/body fluid exposure you did not report, indicate why: (check all that apply)

____ I did not have time to report.
____ I did not know the reporting procedure.
____ I was concerned about confidentiality.
____ I thought I might be blamed or get in trouble for having the exposure.
____ I thought the source patient was low risk for HIV and/or hepatitis B or C.
____ I thought the type of exposure was low risk for HIV and/or hepatitis B or C.
____ I didn't think it was important to report
____ Other (please explain) _____

Custom Fields

Label		Label	
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Comment