A safe injection does not harm the recipient, does not expose the provider to any avoidable risk, and does not result in any waste that is dangerous for other people.

**USE STERILE INJECTION EQUIPMENT**

Always use a sterile syringe and needle from new, undamaged packaging.

For each injection, and to reconstitute each unit of medication.

Prevent contamination of the vials:

Wipe the access diaphragm (septum) with 70% alcohol (isopropyl alcohol or ethanol) on a swab or cotton wool ball before piercing the vial, and allow to air dry.

Pierce the septum with a sterile needle every time it is used.

Select pop-open ampoules whenever possible.

If using an ampoule that requires a metal file to open, protect fingers with a clean barrier (e.g. small gauze pad) when opening.

Use single dose vials every time it is possible. If you have a multi-dose vial, you must take more care to avoid contamination.

NEVER leave a needle in the stopper of the vial.

Prevent contamination of injection equipment and medication.

Always follow product specific recommendations for use, storage and handling.

Prepare each injection in a clean, designated area.

DO NOT use any medications with visible contamination or breaches of integrity (e.g. cracks, leaks).

DO NOT use a needle or syringe if the package has been punctured, torn or exposed to moisture.

Discard a needle that has touched any non-sterile surface.

**USE WHO-RECOMMENDED SYRINGES**

WHO recommends syringes with re-use prevention (RUP) features for all injections. RUP syringes with a sharps injury protection (SIP) feature are highly recommended wherever possible.
PRACTICE HAND HYGIENE

Practice hand hygiene before a clean procedure and after exposure to blood/bodily fluid and after each patient contact.

The use of gloves does not negate the need for hand hygiene.

Gloves are not needed for injections. Single-use gloves may be indicated if excessive bleeding is anticipated.

Wash or disinfect hands before preparing injection material and giving injections.

Avoid giving injections if skin integrity is compromised by local infection or other skin condition (e.g. weeping dermatitis).

Cover any small cuts.

Disinfect skin, using the following steps:

1. Apply a 60–70% alcohol-based solution (isopropyl alcohol or ethanol) on a single use swab or cotton wool ball.

2. **DO NOT** use methanol or methyl-alcohol as these are not safe for human use.

3. Wipe the area from the centre of the injection site working outwards, without going over the same area.

4. Apply the solution for 30 seconds then allow it to dry completely.

5. **DO NOT** use cotton balls stored wet in a multi-use container.

PREVENT ACCESS TO USED NEEDLES

Seal sharps containers and store in a secure area in preparation for transport and final disposal.

After closing and sealing sharps containers, secure and dispose of as soon as possible. Do not open, empty, re-use, or sell.

Manage sharps waste in an efficient, safe and environmentally friendly way.

Protect people from exposure to used injection equipment. If incineration is selected for final disposal of sharps waste, use high temperature incinerators (more than 1 000 degrees) with filters.

PREVENT NEEDLE-STICK INJURIES TO THE PROVIDER

Prevent the possibility of sudden patient movement during and after injection.

Avoid recapping and other hand manipulations of needles.

If recapping is necessary, use a single-handed scoop technique.

Discard used syringes as a single unit in a sharps container immediately.

Collect used syringes and needles at the point of use in an enclosed sharps container that is puncture and leak proof, and seal before completely full.