Please complete a log report for each employee exposure incident involving a **sharp** within 14 days of the date the incident is reported.

1. Complete this form in addition to the SFSU Incident Reporting Form for injuries related to occupational exposures.
2. Check the box that corresponds to the most appropriate answer. Type or print clearly.

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<th>Department</th>
<th>Phone</th>
<th>Date Completed</th>
<th>Date Signed</th>
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<tbody>
<tr>
<td>Supervisor Name</td>
<td>Supervisor Signature</td>
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### A. Date of Exposure Incident (Month-Day-Year)

/ / 

### Time of Injury

am pm 

### Report written by


### B. Identify the sharp involved (if known)

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<th>Type</th>
<th>Brand</th>
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* e.g. 18g needle/ABC Medical, “no stick” syringe

### Description of the exposure incident involving sharps:


### 1. Job Classification of Exposed Employee (Check all that apply)

- Custodian
- Grounds Worker
- Police Officer
- Coach/Trainer
- Gym Staff
- Plumber
- Food Service Worker
- Waste Management Staff
- Equipment Tech/Assistant
- Researcher/Lab Technician
- Animal Care Worker

### 2. Location/Work Area Where Exposure Occurred (Check all that apply)

- Athletic Field/Gym
- Recreation/Fitness Center
- Laboratory Classroom
- Animal Facility
- Research Laboratory
- Service/Mechanical Room
- Residential Site/Housing
- Machine Shop
- Loading Dock
- Bathroom
- Storage space/closet

### 3. Procedure Being Performed at Time of Incident (Check all that apply)

- Cutting/slicing
- Handling medical waste
- Handling sharps waste
- Handling trash/garbage
- Fixing pipes/drainage
- Maintaining equipment
- Gardening/grounds maintenance
- Washing dishes/glassware
- Research procedure (explain)

### 4. How Exposure Incident Occurred (Check all that apply)

- While using the sharp
- After use and before disposal of sharp
- While putting sharp into the disposal container
- Between steps of a multi-step procedure
- Disassembling equipment/pipes, etc.
- Sharp left in an inappropriate place (bench top, table, trash, sink, etc.)
- During a search with sharp hidden in bushes, clothing, baggage, etc.

### 5. Body Part Involved (Check all that apply)

- Finger
- Hand
- Arm
- Face/Head

### Did employee get medical attention?

- Yes
- No

If yes, was it First Aid Only?

- Yes
- No

### 6. Did the device being used have engineered sharp injury protection?

- Yes
- No
- Don’t know

Was the protective mechanism activated when it happened?

- Yes, fully
- Yes, partially
- No

When did the exposure incident occur? (Check one)

- Before Activation
- During Activation
- After Activation

### 7. Exposed Employee Opinion

If the sharp had no engineered sharps injury protection, do you have an opinion that such a mechanism could have prevented the injury?

- Yes
- No

Explain

### 8. Exposed Employee Opinion

Do you have an opinion that any other engineering, administrative or work practice control could have prevented the injury?

- Yes
- No

Explain

### 9. Employee interview summary/comments


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**Sharps Injury Log Report must be submitted to EH&S within 14 days** of the date the incident is reported. (Cal/OSHA 8CCR5193 (c)(2))

**Environment Health & Safety, ADM 260**

San Francisco State University

1600 Holloway Avenue CA 94132

Email: sfhhs@sfsu.edu

Phone: 415.338.2565