

Home Health: CMS Will Consider Changes To OASIS.

In the July 17, 2002 Federal Register the Centers for Medicare and Medicaid Services (CMS) announced it is considering changing the Outcome Assessment Information Set (OASIS) that has been required since 1999 for home health agencies serving Medicare patients.

According to CMS, this is part of an overall effort to streamline unnecessarily burdensome or inefficient regulations that interfere with the quality of care and to streamline Medicare paperwork.

CMS has indicated that the development of this process can be followed by interested parties by logging on to CMS's OASIS website at <http://www.cms.hhs.gov/oasis/hhnew.asp>.

We have placed CMS's July 17, 2002 announcement on our website at <http://www.nursinglaw.com/cms.pdf>.

FEDERAL REGISTER, July 17, 2002
Pages 46949 – 46950

Needlesticks: FDA Considering Petition To Ban Unsafe Sharps.

The US Food and Drug Administration has been asked to consider an outright ban on the use of unsafe sharps in healthcare.

The FDA is asking for concerned institutions and individuals to submit their comments before September 18, 2002.

Comments (two copies) may be mailed to Dockets Management Branch (HFA-305), Food and Drug Administration, 5630 Fishers Lane Room 1061, Rockville MD 20852 or sent online at <http://www.fda.gov/dockets/ecomments>.

The FDA asks that persons submitting comments identify as specifically as possible the device they are talking about and what they think is wrong with it.

The FDA is also considering warning labels for devices such as standard injection syringes for which it would not be feasible to issue an outright ban.

FEDERAL REGISTER, June 20, 2002

In March, 2001 the Service Employees International Union and the Public Citizen's Health Research Group filed a formal petition with the FDA for an outright ban on non-needleless IV infusion equipment, butterfly syringes and IV catheters and blood collection devices that do not conform to the FDA's recommendations dating back to 1992 to reduce bloodborne pathogen exposure from sharps injuries.

According to the FDA, the most recent data available, collected in 1998, show that needlestick injuries are still a significant hazard to healthcare workers. Syringes account for 33% of the injuries, needles on IV lines 2%, butterfly needles 8%, vacuum tube blood collection needles 6% and IV catheter stylets and glass capillary tubes less than 1%.

Regulations issued by OSHA in consultation with the FDA in 2001 under The Needlestick Safety and Prevention Act of 2000 require healthcare employers, as part of their required exposure-control plan for employee needlestick injuries, to document the extent to which the employer uses, or has considered using, products that will minimize workplace exposure to needlesticks and other percutaneous injuries.

Under existing regulations employers must also document each year the extent to which they have made themselves aware of changes in technology in the last year that could reduce or minimize needlestick injuries to their employees.

As long as the exposure-control plan meets Federal guidelines, the use of older, more hazardous products is still allowed.

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