

CANADIAN INTRAVENOUS NURSES ASSOCIATION



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September 9, 2002

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Dockets Management Branch [HFA-305]
Food and Drug Administration
5630 Fishers Lane, Room 1061
Rockville, Maryland 20852

**RE: Docket No. 01P-0120; Medical Devices; Needle-Bearing Devices;
Request for Comments and Information**

To Whom It May Concern:

The Board of Directors of CINA, the Canadian Intravenous Nurses Association, is in support of the request by NAPPSI that the FDA take the important three steps listed below:

1. Publish NAPPSI's Notification to Clinicians on Sharps Injury Prevention stating:

- Healthcare workers who use or may be exposed to needles are at increased risk of needlestick injury. Such injuries can lead to serious or fatal infections with bloodborne pathogens such as hepatitis B virus, hepatitis C virus, or human immunodeficiency virus (HIV).
- In order to prevent bloodborne pathogens exposure, clinicians are advised to utilize both Primary and Secondary sharps injury prevention techniques.
- Primary prevention techniques eliminate the needs to introduce sharps into the workplace, thereby reducing the total number of sharps used.
- Secondary prevention techniques render safer those sharps that must be introduced into the workplace.
- The combination of Primary and Secondary Prevention maximizes healthcare worker safety with respect to blood-borne pathogens exposure from sharps injury

2. Disseminate information about NAPPSI's Safety Device List. This compilation lists the needlestick-safety technology of NAPPSI members and other companies, dividing them into "primary prevention" and "secondary prevention" categories. To view the entire list, go to <http://www.nappsi.org/safety.shtml>

3. Involve NAPPSI in discussions aimed at creating a voluntary consensus standard for devices listed in the HRG/SEIU petition, such as IV catheters and infusion equipment that do not have safety features.

Sincerely,

Sherry Kenwell, President CANADIAN INTRAVENOUS NURSES ASSOCIATION

c.c.

Food & Drug Administration
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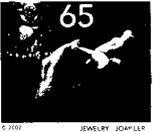
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