

SHARPS INJURY LOG

Practice Name: _____

DATE OF INJURY	TIME OF INJURY	Type of DEVICE USED	DEPARTMENT or WORK AREA	Description of JOB PERFORMED & INJURY LOCATION	CASE/REPORT #	COMPLIANCE OFFICER COMMENTS

Attention: This report is used to log “sharps injuries” in the work place, and is used for **Evaluation Purposes Only**. Do Not include employee names. The *Sharps Injury Log* does not replace the *Sharps Injury Report*. OSHA Compliance Officers can review the *Sharps Injury Log* to look for injury patterns in a specific work area or with a specific instrument. Compliance Officers can determine if training or use of proper Personal Protective Equipment could have prevented the injury. Comment section should include whether Personal Protective Equipment was worn.