



WE LISTEN™

Advanced Medical Innovations™

Mission Industrial Park

8741 Shirley Avenue, Northridge, CA 91324 USA • Tel: (818) 701-7180 • Fax to Email (818) 350-5738 • Fax: (818) 701-9708
Website: www.amiwelisten.com • E-Mail: Sales@amiwelisten.com

PRODUCT TALK

SHARPS SAFETY STATION – SHARPS COUNTING & DISPOSAL SYSTEMS

SITUATION

In the U.S. today, wherever surgery is performed and suture needles and scalpel blades utilized, a potential puncture or cut is possible and, with that, a possibility of serious infection from the HIV or Hepatitis B virus, or other contagious infections. Every year approximately 8700 health care workers contract Hepatitis B and about 200 will die as a result. In addition, some who contract Hepatitis B will become carriers, passing the disease on to others.

In order to protect personnel from accidental needle sticks, traditional surgery room nursing personnel use rigid needle counters, which can control the counting and the disposing of the sharp items after a procedure in a safe manner.

All needles and scalpel blades must be counted in compliance with the AORN recommended standards and accounted for after each surgical procedure. 80% of the users will discard the needle counter in a larger sharp collection unit, thus wasting valuable space within the sharp collection unit and wasting money. The other 20% will discard needle counters in a red contamination bag, thus presenting the opportunity for the box to reopen exposing infectious sharps which could accidentally prick housekeeping personnel during the handling of red bags.

About 15% of sharps injuries occur in housekeeping who get pricked from an exposed sharp during cleaning.

In many surgical procedures Hypodermic needles are used for local anesthesia as one example:

Most of the time the practitioner will withdraw the medication from the ampoule with an 18 gauge needle. They will then recap the needle, exchange needles to a 28 gauge to inject in the port.

The recapping and exchanging of needles are a potential needle stick opportunity and should be eliminated. The recapping of a needle must also be done with one hand, yet most practitioners still use two hands which increases the risk of injury.

Also, the syringe and scalpel handle after use are left randomly on the Mayo Tray or back table with the sharp exposed, thus increasing the risk of a sharps injury.

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Most Current, Existing Standard Boxes: Ball and Socket Hinges – Friction clasp.

Deficiencies:

- 1) Hinges easy to break during shipping and when separating the 2 halves.
- 2) Clasp easy to open. When box falls on the floor, it opens and contaminated sharps are spread all over the floor. They then need to be picked up by nursing which is a risk factor for accidental stick.
- 3) 18% of needle sticks occur with housekeeping when grabbing red contaminated bags filled with Sharps boxes that open in the bag and expose housekeeping to needle sticks.
- 4) Blades protrude through the center of the box as small gaps exist, also exposing housekeeping to potential sharps injury.
- 5) Devon/Kendall/Tyco added yellow box locks to make it more secure. This was a band aide fix that most nurses (90%) do not use and activate and even if some do, it is not functional and there is a chance that the small yellow tabs will separate and fall into the surgical site. It is not x-ray detectable.
- 6) The standard needle counter box is a basic cosmetic box for eye shadows converted more than twenty years ago to a needle counter box.

SOLUTION

A new safer addition to the market place; the new Sharps Safety Station. The needle counter box with ultimate safety which makes it a sterile sharps collection unit that can be discarded securely in a red bag.

In addition, this line of needle counters, sharps collection and disposal boxes from AMI/PSI represents a new innovation for needle counters worldwide.

AMI/PSI Sharps Safety Station overcomes all of the above identified deficiencies and adds many more safety features. Here are some bullet points:

1) **Box Design**

- a) Three safety hinges instead of two ball and socket. If one should break, two will still make the box very functional and safe. The hinges will never separate once the box is closed.
- b) Closure: Automatic snap closure. Reopen for recount by pushing button in and up.
- c) Overlapping walls all around so blades will not go through the gaps.
- d) High impact durable plastic.
- e) ETO and GAMMA compatible

Bonus feature on all SSS boxes:

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- f) Integral scalpel shield (one for medium boxes and two for large boxes).
 - i) On shallow boxes, lay handle horizontal in the side slots or vertically in the deep ones.

2) **Other features**

- a) Scalpel Blade Remover - for all size and shape of Handle/Blades combinations. User friendly.
- b) Needle Recapper/Exchanger - one handed recapping and needle exchange when drawing medication (18 gauge needle), and then injecting (28 gauge needle). Example of application: Local anesthesia.

It is a fact that accidents occur with blades and needles since the surgeon/nurse lay the scalpel or syringe randomly in the sterile field (Mayo tray or back table) and accidentally sustain sharp injury during the procedure. With the SSS, you have a pre-determined parking place for the scalpels and syringes in surgery thus preventing sharp injury.

AMI/PSI Sharps Safety Station is the **State of the Art** device for handling sharps in surgery in a safe and deliberate manner. Use the State-of-the-Art defense with your customers.

AMI/PSI provides all common size boxes with all common types of components inside as per practitioners' preference. Adhesive, magnets, foam strips and foam block.

WHERE SOLD

Anywhere surgery is performed and sharps are used in the procedure and also through kit packers. Hospitals, surgery centers and physicians office base surgery.

DECISION MAKERS

O.R. Supervisors, managers, Head Nurse, Risk Management, Infection Control Nurse, Staff Nurses and Technicians.

COMPETITION

Our Sharps Safety Station is unique in many ways as explained before. All other companies who sell needle counters do not have anything equivalent to our features. You need to upgrade the customer to the ultimate in safety. If customers decide not to use the top of the line Sharps Safety Station, you can offer them our equivalent product (basic) to the one that they are currently using competitively (see our conversion chart in this booklet). You can later upgrade them to the ultimate in safety.

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They must use the State-of-the-Art product (Sharps Safety Station) or they might be legally responsible for punitive damages should a practitioner get injured on the job.

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