A. Demographics

B. B.1.

B.2.

Date/Time	:				
Hospital	:				
Department	:				
Name	:				
Current Position	:				
Years of Experience	:				
Pre-Evaluation Questionnaire					
Which of the following methods do you currently use to remove scalpel blades?					
○ Surgical Instruments (Needle Holders/Artery Forceps ○ Fingers					
○ Two-handed Blade Removers		○ Others :			
How do you rate the safety level of your current method of blade removal?					
Not Safe 🔿 1 🔿 2 🔿 3 🔿 4 🔿 5 Safe					

B.3.	Have you ever experienced a scalpel blade injury or a near miss?	() Yes	() No
B.4.	Do you know if someone who has experienced a scalpel blade injury or had a near miss? If Yes for above questions B.3. and/or B.4., please include a brief explanation:	⊖ Yes	🔿 No
B.5.	Do you currently uses a needle counter/needle pad?	⊖ Yes	() No
B.6.	If Yes to B.5., Does your current needle counter/needle pad? Incorporate a single-handed blade and safe containment feature?	removal O Yes	🔿 No
B.7.	If Yes to B.5., What is the count of the current needle counter/needle pad?		

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Qlicksmart BladeNeedleSYSTEM Evaluation Form

С.	Evaluation of Qlicksmart	BladeNeedleSYS	STEM		
C.1.	How were you trained to	use the BladeN	eedleSYSTEM?		
	○ Academic Specialist/M	Aanufacturer's F	Representative	○ Staff Nurse Educator	⊖ Videos
C.2.	Approximately, how mar	ny blunt scalpel	blades did you ren	nove during the training?	
	○ 1-5	○ 6-10	○ More than	10	
C.3.	How many attempts did i	t take to feel co	mfortable and com	petent in removing blades with th	ie
	BladeNeedleSYSTEM?	1-5	○ 6-10	○ More than 10	

Please fill the following statements based on your evaluation.

Scalpel Blade Removal		Your current method of scalpel blade removal		Qlicksmart BladeNeedleSYSTEM	
I worry about my personal safety when removing a used scalpel blade with	🔿 Yes	🔿 No	O Yes	🔿 No	
I worry about the safety of a new, inexperienced colleague removing a used blade with	🔿 Yes	🔿 No	🔿 Yes	🔿 No	
The blade could break if removed with	🔿 Yes	🔿 No	🔿 Yes	🔿 No	
The used blade could flick/fly off if removed with	🔿 Yes	🔿 No	🔿 Yes	🔿 No	
The removed blade presents a potential risk to downstream staff after removal with	🔿 Yes	🔿 No	🔿 Yes	🔿 No	
The used blade can be removed without the need to use my second hand using	🔿 Yes	🔿 No	🔿 Yes	🔿 No	
There is an audible, tactile or visual signal that the blade is safely removed, using	🔿 Yes	🔿 No	O Yes	🔿 No	
The contaminated blades are contained for safe disposal immediately after removal, using	🔿 Yes	🔿 No	🔿 Yes	🔿 No	
The used blade is safely contained when removed by	🔿 Yes	🔿 No	🔿 Yes	🔿 No	
I can perform a sharps count accurately when using		🔿 No	🔵 Yes	🔿 No	

Comments:

D. Evaluation Outcome

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D.1. Based on above evaluation, would the inclusion of the Qlicksmart BladeNeedleSYSTEM into current practice for

you and your inexperienced colleagues provide improved safety? \bigcirc \bigcirc

🔿 Yes 🛛 No

Thank you participating in the Qlicksmart safety evaluation.