**SAFETY FEATURE EVALUATION FORM**

**SHARPS DISPOSAL CONTAINERS**

Date: __________  Department: ____________________  Occupation: ____________________

Product: ________________________________________  Number of times used: __________

Please circle the most appropriate answer for each question. Not applicable (N/A) may be used if the question does not apply to this particular product.

1. The container’s shape, its markings, or its color, imply danger.................................

   1  2  3  4  5  N/A

2. The implied warning of danger can be seen from the angle at which people
   commonly view it. (very short people, people in wheel chairs, children, etc.)..........

   1  2  3  4  5  N/A

3. The implied warning can be universally understood by visitors, children, and
   patients. ...................................................................................................................

   1  2  3  4  5  N/A

4. The container’s purpose is self-explanatory and easily understood by a worker
   who may be pressed for time or unfamiliar with the hospital setting..........................

   1  2  3  4  5  N/A

5. The container can accept sharps from any direction desired..................................

   1  2  3  4  5  N/A

6. The container can accept all sizes and shapes of sharps........................................

   1  2  3  4  5  N/A

7. The container allows single handed operation. (Only the hand holding the
   sharp should be near the container opening.)..........................................................

   1  2  3  4  5  N/A

8. It is difficult to reach in and remove a sharp. ..........................................................

   1  2  3  4  5  N/A

9. Sharps can go into the container without getting caught on the opening.............

   1  2  3  4  5  N/A

10. Sharps can go into the container without getting caught on any molded
    shapes in the interior................................................................................................

    1  2  3  4  5  N/A

11. The container is puncture resistant........................................................................

    1  2  3  4  5  N/A

12. When the container is dropped or turned upside down (even before it is
    permanently closed) sharps stay inside..................................................................

    1  2  3  4  5  N/A

13. The user can determine easily, from various viewing angles, when the container is
    full...........................................................................................................................

    1  2  3  4  5  N/A

14. When the container is to be used free-standing (no mounting bracket), it is stable
    and unlikely to tip over..........................................................................................

    1  2  3  4  5  N/A

15. It is safe to close the container. (Sharps should not protrude into the path of
    hands attempting to close the container.)............................................................

    1  2  3  4  5  N/A

16. The container closes securely. (e.g. if the closure requires glue, it may not
    work if the surfaces are soiled or wet.).................................................................

    1  2  3  4  5  N/A

17. The product has handles which allow you to safely transport a full
    container..................................................................................................................

    1  2  3  4  5  N/A

18. The product does not require extensive training to operate correctly..................

    1  2  3  4  5  N/A

Of the above questions, which three are the most important to your safety when using this product?

Are there other questions which you feel should be asked regarding the safety/utility of this product?