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**Quality and Accreditation Institute**  
Centre for Accreditation of Health and Social Care

**ADDITIONAL  
REQUIREMENTS  
FOR  
SAFE INJECTION PRACTICES**

SECOND EDITION  
MAY 2026



These Additional Requirements are developed to support applicant/ accredited Health Care Facilities (HCFs). These Additional Requirements constitute addendum to the requirements under various QAI accreditation standards and are applicable to applicant/ accredited HCFs. All applicant/ accredited HCFs may like to adopt and comply with these Additional Requirements.

QAI assessors of various accreditation programmes under the Centre for Accreditation of Health & Social Care (CAHSC) should check the adherence to these Additional Requirements during assessments.

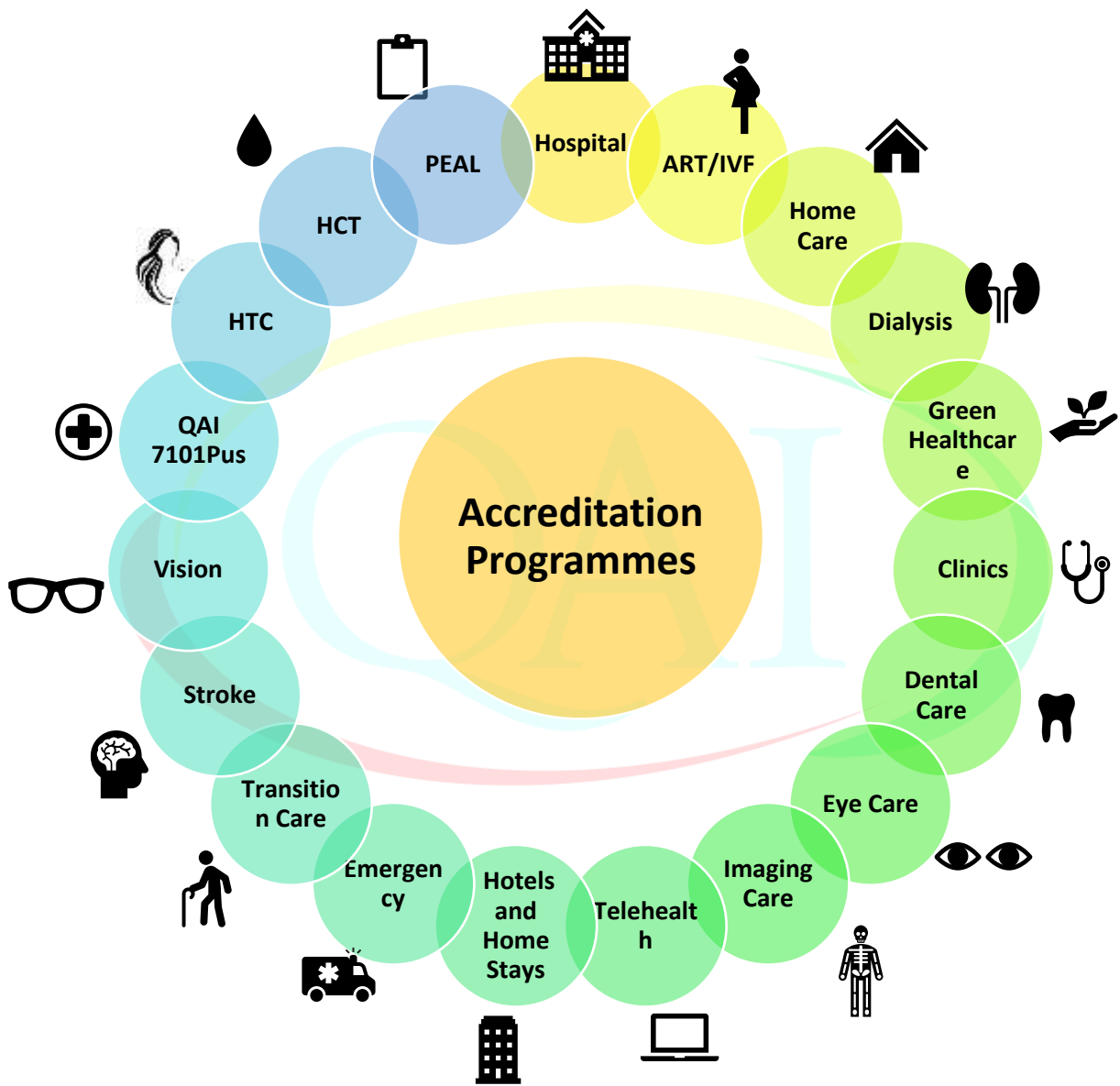


1. Safe injection and infusion practices are essential to minimize the risk of transmission of infectious agents during the preparation and administration of injections. Ensuring Safe Injection Practices helps to prevent transmission of infectious diseases from patient to patient, from patient to provider, and from provider to patient.
2. The Healthcare Facilities (HCFs) can develop own policies, procedures, and practices based on best practices and national/ international guidelines to ensure safety in injections and infusions. These need to be applied to use of needles, cannulas, central lines, infusion lines, and all intravenous delivery systems/ equipment.
3. At the minimum the following will be ensured in all patient areas –
  - (a) Use aseptic technique/ precautions to prevent contamination of sterile injection equipment.
  - (b) Do not administer medications from a syringe to multiple patients, even if the needle or cannula on the syringe is changed. Needles, cannulas, and syringes are not to be reused for another patient nor to access a medication or solution that might be used for a subsequent patient.
  - (c) Use fluid infusion and administration sets (i.e., intravenous bags, tubing and connectors) for one patient only and dispose appropriately after use. Consider a syringe or needle/ cannula contaminated, once it has been used to enter or connect to a patient's intravenous infusion bag or administration set.
  - (d) Use single-dose vials for parenteral medications whenever possible.
  - (e) Do not administer medications from single-dose vials or ampules to multiple patients or combine leftover contents for later use.
  - (f) If multidose vials must be used –
    - i. Both the needle or cannula and syringe used to access the multidose vial must be sterile.
    - ii. Needle must not be left in the vial.
    - iii. Vial diaphragm must be cleaned using 70% Isopropyl alcohol prior to inserting needle for withdrawal of drug.
    - iv. Define in the HCF policies, the maximum duration after which an opened vial can be discarded. Mark use by date of vial.
    - v. Do not keep in the immediate patient treatment area and store in accordance with the manufacturer's recommendations; discard if sterility is compromised or questionable or cannot be ascertained.
  - (g) Do not use bags or bottles of intravenous solution as a common source of supply for multiple patients.

#### References:

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1. Safe Injection Practices to Prevent Transmission of Infections to Patients, [https://www.cdc.gov/injection-safety/hcp/clinical-guidance/index.html#cdc\\_generic\\_section\\_1-iii-a-1-b-safe-injection-practices](https://www.cdc.gov/injection-safety/hcp/clinical-guidance/index.html#cdc_generic_section_1-iii-a-1-b-safe-injection-practices)
2. WHO guidelines on drawing blood: best practices in phlebotomy [https://iris.who.int/bitstream/handle/10665/44294/9789241599221\\_eng.pdf?sequence=1](https://iris.who.int/bitstream/handle/10665/44294/9789241599221_eng.pdf?sequence=1)
3. WHO guideline on the use of safety-engineered syringes for intramuscular, intradermal and subcutaneous injections in health care settings <https://iris.who.int/bitstream/handle/10665/250144/9789241549820-eng.pdf?sequence=1>



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