# LAC+USC MEDICAL CENTER DEPARTMENT OF NURSING SERVICES POLICY

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Subject: SUPPLIES AND EQUIPMENT-Draft		Original		Policy #			
		Issue Date:	08/91	625			
		Supersedes:	Effective Date		ate:	te:	
		12/	/18		03	3/22	
Departments Consulted:	Reviewed & Approved by:	·	Approved by:				
Safety Office	Nurse Executive Council						
Supply Chain Operations	Pharmacy & Therapeutics Committee						
CPR Committee Facilities Management	Professional Practice Committee Attending Staff Association Executive		(signature on file) Nancy Blake				

## <u>PURPOSE</u>

To describe the process for managing medical and patient care supplies / equipment's in the LAC+USC Medical Center (LAC+USC).

## <u>POLICY</u>

Medical supplies and equipment are significant contributors to the cost, quality, and outcomes of care provided. LAC+USC maintain supplies and equipment as outlined below. Staff members are trained to use equipment safely and effectively; and qualified individuals maintain the equipment.

LAC+USC purchases and maintains adequate levels of supplies and shall purchase, lease, or contract to provide equipment for the care of patients.

### PROCEDURE

#### Medical and Patient Care Supplies/Equipment

- Medical and patient care supplies are received from Supply Chain Operations (SCO).
- SCO replenishes routinely used contracted medical and patient care supply products and personal protective equipment via Low Unit of Measure (LUM) Distribution.
- The Nurse Managers establish PAR levels for LUM Cart supplies.
- LUM supplies are delivered to the nursing units on a daily basis.
- Requests for emergency delivery of LUM supplies are called to SCO LUM Team or Warehouse Management.
- Service needs/problems are reported to the SCO Manager
- Supply products not on the LUM Cart or stocked in the SCO Warehouse are requested by entering a GHX requisition.

### Expiration Date

- Expiration date on sterile supplies shall be checked immediately prior to the item being used.
- Disposable outdated items shall be sent to SCO to be salvaged.

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• Reusable outdated items shall be returned to Central Service for repackaging and sterilization.

#### Care and Cleaning of Reusable Equipment/Supplies

- Equipment /supplies shall be sterilized or disinfected prior to use by another patient
- Equipment /supplies that can accept sterilization process (e.g., instruments, basins) shall be washed on the nursing unit with Pre-Klenz ™ solution to remove gross contaminates and placed in the designated location for pick up or brought down to Central Processing.
- Equipment/supplies that cannot accept sterilization process (e.g., electrical machines) shall have all surfaces wiped with hospital approved disinfectant and allowed to air dry prior to use and be labeled as ready for use.
- High level disinfection of objects shall be achieved by immersion in an EPA registered disinfectant in accordance with manufacturers' instructions.
- High level disinfection shall only be used on objects that come in contact with mucous membranes or non-intact skin.
- Objects that enter sterile tissue or the vascular system must be sterilized.
- Epidemiology identifies location that uses high-level disinfection and monitors for appropriate use.
- Dispose of high-level disinfection in the container provided and place in designated area for pick up and final disposal by designated Safety coordinator.

(Refer to Nursing Policies "Care, Cleaning, and Tracking of Medical Equipment" and "High Level Disinfection Procedure").

### Recalls / Defective Products

- SCO will coordinate/control supply recall documents.
- Plant Management Contract Maintenance Company will coordinate/control equipment recall documents.
- The Clinical Nursing Director/designee will be informed about the recalls and coordinate the process to remove supplies/equipment from stock/units.
- User that identifies a defective product shall immediately provide specific information to Nurse Manager/designee. The Nurse Manager/designee will notify SCO, Director of Value Analysis, Bio-Med.
- Defective supplies and/or equipment should be identified and sequestered for inspection.
- A Safety intelligence report (SI) shall be entered for defective supplies/equipment.
- Supply Chain will initiate product removal for return/exchange as necessary.

### Storage of Patient Care Supplies in Utility Rooms

- Areas with one utility room will designate with signage a "Dirty Area" and a "Clean Area." Supplies are stored on the "Clean Area" side of a Utility Room in an enclosed cabinet with doors, cart with cover and/or sealed plastic bags.
- Areas with two utility rooms will designate with signage a "Dirty" and a "Clean" room. The supplies will be stored in the "Clean" utility room.

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- Utility rooms, treatment carts / supply carts that contain medications and syringes shall be locked at all times.
- Corrugated cardboard boxes are not to be stored in the patient care areas

### RESPONSIBILITY AND ACCOUNTABILITY

- Staff are responsible and accountable for the appropriate use of patient care supplies/equipment.
- Staff will report and submit a work ticket for any broken or malfunctioning equipment to BioMed.
- The Nurse Manager/designee is responsible and accountable for the planning and ordering of new supplies and equipment via Supply Chain.

### New/Experimental Medical/Patient Care Supplies

• Requests for new medical products and/or technology are submitted to the Director of Value Analysis for review and coordination of request. Any new items to be added to the crash cart must also be approved by the CPR Committee.

### **Donated Items**

• Any equipment donated to LAC+USC needs approval by the Director Value Analysis, as well as the appropriate department (e.g. Epidemiology, Bio-Med).

### Loan of County Equipment

- County equipment may be loaned to other agencies in an emergency, the loaning unit can relinquish the item, or if the borrower cannot obtain the item from a regular supplier.
- The loan must be authorized by the Clinical Nursing Director/designee or the administrator for that area.
- "Inventory Control, Equipment Location Change" form (# 749) must be completed and the nursing unit must follow up until the equipment is returned.

### Obtaining Unavailable Nursing Patient Care Equipment

- Obtaining vital unavailable nursing patient care equipment can be accomplished by:
  - Notifying the Nurse Manager/designee if borrowing from another patient care area within LAC+ USC facility.
  - Notifying Supply Chain, who will try to borrow from a local hospital/facility or work with nursing to purchase.
  - Notifying the Nursing Supervisor and /or AOD administrator if unresolved.

### Basic Life Support Equipment

- CPR teaching equipment (i.e. manikins and films) can only be utilized by current American Heart Association (AHA) Basic Life support (BLS) instructors.
- CPR teaching equipment must be cared for per AHA guidelines.

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#### Loss/Theft of County Equipment

- Loss/theft of equipment is reported to the nurse in charge. •
- Nurse in charge notifies his/her immediate supervisor and documents the details of the theft/loss to the Clinical Nursing Director/designee.
- Clinical Nursing Director/designee reports the theft to the Administrator, Los Angeles County Sheriff's Department or Supply Chain.

#### Equipment Operating Instructions

- Manufacturer's operating instructions for general clinical equipment are maintained by Facilities Management.
- Specialty units shall maintain instructions for specialty equipment on the unit.

#### Refrigerators (Biological, Breast Milk, Medication, and Nourishment)

- Shall be monitored daily for temperature readings:
  - Biological 36 to 46 degrees F
  - Breast Milk (freezer): 22° plus or minus 2 °F (-4° plus or minus 4°C)
  - Breast Milk (refrigerator): 35 to 39° F (1 to 4°C)
  - Medication 35 to 46 degrees F
  - Nourishment 45 degrees F or below -
- Cleaned weekly
- Facilities Management contracted maintenance company shall be notified for any refrigerator malfunctioning. Submit a service ticket through the Facility Repair Request icon on the intranet.
- A refrigerator maintenance log will be maintained.
- Only items identified by refrigerator type will be stored in that refrigerator (i.e. only medications in medication refrigerator).

#### Oxygen Cylinders

- Storage signage must be present as follows:
  - "Available for Use" signage is for O2 cylinders with 500-2500 p.s.i.
  - "Empty" signage is for O2 cylinders with less than 500 p.s.i.
  - "Available for Use" and "Empty" O2 cylinders require a physical separation when \_ stored.
- Storage of O2 cylinder in a clean room requires a used O2 cylinder to be cleaned with an approved disinfectant prior to placing back in the clean room.
- All O2 cylinders must be stored in an appropriate rack or cart.
- If a full 02 cylinder is needed for a procedure or cylinder needs to be exchanged, call (323) 409-6444.

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## EMERGENCY EQUIPMENT

### Emergency Resuscitation Cart:

- Equipment must be:
  - Appropriate to the patient population(s) served
  - In working order
  - Available and ready for use
  - Plugged into a working electrical outlet and moved to an emergency (red) electrical outlet during a power failure.
- Only supplies and equipment listed on the Medical Center CPR committee inventory list will be stored in the emergency cart (Refer to the LAC + USC CPR Committee homepage for crash cart contents list).
- CPR drug supply is stored in a clearly marked portable container sealed by Pharmacy.
  - CPR drug box lists the drug content and earliest expiration date of any drug.
  - Only drugs listed on the Medical Center CPR committee inventory list will be stored in the emergency cart.
- Maintenance of the emergency resuscitation cart is the responsibility of the Clinical Equipment Room.
  - The cart must be cleaned and stocked in an orderly manner per the Medical Center CPR committee inventory list.
- Maintenance of the emergency equipment and readiness for use is the responsibility of the Nurse Manager/designee on each unit. The Nurse Manager/designee ensures that:
  - The cart is locked when not in use (with numbered locks).
  - The cart is checked by an RN or LVN responsible for maintenance at the beginning of each shift. S/he ensures the cart remains locked (lock number verified on Check Log), earliest drug/intravenous fluid expiration date from drawer three recorded on outside of cart has not expired, supply expiration sticker on drawer one has not expired, defibrillator and suction are functioning, oxygen cylinder with 2500 p.s.i., bag valve mask, CPR stool are available, and that the cart is plugged into a functioning electrical outlet.
  - A 30 Joule test will be performed weekly. During the test the defibrillator must remained plugged in.
- Emergency resuscitation carts shall be exchanged by the Clinical Equipment Room (ext. 98570) for the following:
  - The cart has been opened
  - Any of the contents inside the cart have expired
- An Emergency Equipment Log is maintained for each emergency resuscitation cart.

## First- Aid and Non-Arrest Medication Boxes

The First- Aid and Non- Arrest Medication Boxes are used in place of the emergency resuscitation cart.

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The locations of the First- Aid and Non-Arrest Medication Boxes include:

- Augustus Hawkins
- Rand Schrader

#### First-Aid Box

- Maintenance of the First- Aid and Automatic External Defibrillator are the responsibility of the Nurse Manager/designee on each unit. The Nurse Manager/designee ensures that the box is:
  - Clean
  - Stocked in an orderly manner per the inventory list
  - Does not have an expired supplies sticker
  - Locked when not in use (with numbered locks)
  - Checked by an RN or LVN responsible for maintenance at the beginning of each shift. S/he ensures the box remains locked (lock number verified on Check Log), and that an O2 tank with at least 1000 p.s.i. is present.
- The Nurse Manager/designee will check the inventory, resupply and relock, after the first aid box has been used.

#### Non- Arrest Medication Box

- Checked by an RN or LVN at the beginning of each shift to assess lock and expiration date of box, if unlocked or has an expired sticker, contact Pharmacy
- Located in the medication room
- An Emergency Equipment Log is maintained for each box

Operating Rooms and Emergency Rooms maintain emergency equipment as outlined per the Unit Structure Standards.

### REFERENCE

LAC+ USC CPR Committee The Joint Commission Environment of Care Standards LAC +USC Medical Center Policy # 603, Medical Products and Supplies LAC+USC Medical Center Policy # 604, Preventive Maintenance Building and Equipment LAC+USC Medical Center Policy # 620, Product Recalls LAC+USC Medical Center Policy # 621, Equipment: Reporting Lost or Stolen LAC+USC Medical Center Policy # 623, Equipment: Loan to Other Agencies LAC+USC Medical Center Policy # 638, Equipment and Supplies Procurement

# REVISION DATES

92, 93, 94, 95, 96, 98, 99, 00, 4/05, 12/08, 8/09, 4/11, 2/12, 4/14, 11/16, 07/17, 12/18, 03/22