



Department of Pharmacy POLICY AND PROCEDURE

POLICY NUMBER: 1110
VERSION: 3

SUBJECT: Cleaning Policy for IV & CHEMO Rooms

PURPOSE: To protect the health and safety of our patients, visitors, and employees; to abide by all applicable laws, regulations, and professional standards.

POLICY: The following procedures shall be adhered to when cleaning pharmacy segregated compounding areas (i.e. IV room and Chemo room). The following procedures shall be implemented by janitorial services. Pharmacy personnel shall be responsible for cleaning within the compounding isolators per department policy and procedures.

PROCEDURE:

I. Training and Personal Protection

- A. Properly trained, garbed, and hand washed personnel may enter segregated compounding area.
 1. Training shall be done by Environmental Services and shall be documented.
- B. Cleaning personnel may not clean or enter segregated compounding area during compounding activities.
- C. Appropriate PPE must be worn
 2. IV room
 - a. Proper garbing includes shoes cover, hair cover, gown, gloves, face mask and goggles (if applicable when splashing is possible).
 3. Chemo room
 - a. Proper garbing includes double shoe covers, hair cover, chemo safe gown, two pairs of ASTM tested chemotherapy gloves, face mask and goggles (if applicable when splashing is possible)

II. Cleaning methods and materials

- A. Materials
 1. All cleaning material shall be used of non-shedding materials and dedicated for use in the segregated compounding areas. These materials shall not be removed from these areas.
 2. Mops or wipes used to clean the segregated compounding area shall be damp and not dripping wet.
- B. Methods
 1. Wipers/Mops shall be moved from left to right and from back to front, in parallel lines, starting from the cleanest area of the section being cleaned towards the door. The mops shall be moved in this order in efforts not to

contaminate or recontaminate clean area. Circular motions shall be avoided.

2. Mop heads/wipes shall be discarded after each section is cleaned.
 - a. Mop heads/wipes used in the chemo room shall be discarded in the black waste container
 3. Clean with select germicidal agent and follow with sterile alcohol, when applicable (see schedule)
 - a. A sporicidal agent shall be used at least once weekly
 - b. Cleaning agents shall be dated with open date and expiration date once opened
 - i. Discard agents that are opened and are not labeled with an expiration date.
 4. Ceiling, walls, and the top of the storage cabinets and isolators shall be cleaned weekly. This shall be done in the following order: ceiling, walls, and then floors.
 - a. Ceilings
 - i. Shall be cleaned weekly with select detergent. Ceilings shall be the first area cleaned when applicable. Cleaning shall start in the furthest corner from the door and move toward the door.
 - b. Walls
 - i. Shall be cleaned weekly with select detergent. After cleaning the ceiling, the walls shall be wiped from the top of the cleanest wall behind the isolator and moved towards the door.
 - c. Top of storage cabinet and isolator
 - i. Weekly monthly moving from front to back with select detergent
 5. Counters, carts, sinks, floors, and hot touch areas (such as light switch, door knobs, chairs, external surface of refrigerator/cabinets/drawers/isolator) within the segregated compounding room shall be cleaning daily.
 - a. Cleaning of the counters and hot touch areas shall be done with a select cleaning agent followed by sterile alcohol
 - b. Floors and shall be cleaned daily with select cleaning agent, and, when applicable, after cleaning the walls. The mopping shall start from under and around the isolator and move towards the doors.
 - c. Sinks shall be cleaned daily with select cleaning agent.
 6. Storage Shelving
 - a. Storage shelving, including inside of the refrigerator, shall be cleaned biannually with select cleaning agent
 - b. Pharmacy personnel shall remove all medication items and store them in proper storage area during this cleaning process.
 - c. The shelves and inside of the bins shall be cleaned approved low concentration bleach product.
 7. Dust and debris shall be moved when necessary from storage sites.
- C. Documentation- Documentation of cleaning shall be maintained and updated on a daily basis
- D. Cleaning agents/schedule

A. Schedule Table

| Surface | Frequency | Cleaning agent |
|---|------------------------------|---|
| Floors and sink | Daily Monthly | Approved low concentration quaternary ammonium Approved low concentration sodium hypochlorite |
| IV room counter, carts, and “hot touch” surfaces such light switch, door knobs, chairs, external surfaces of fridge, cabinets, drawers, isolators) | Daily Monthly | Approved low concentration quaternary ammonium (IV room) Approved low concentration sodium hypochlorite followed by sterile alcohol |
| Walls, Ceiling, Top of isolator and cabinet | Weekly Monthly | Approved low concentration quaternary ammonium Approved low concentration sodium hypochlorite |
| Storage Shelves (including refrigerator) | Biannually | Approved low concentration sodium hypochlorite |
| Chemo room counter | Daily | Low concentration sodium hypochlorite followed by sterile water followed by alcohol |

ATTACHMENT(S):
Cleaning Log

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|---|------------------------------|
| Approved By: Romina Panoussi (PHARMACY SERVICES CHIEF II) | |
| Date: 04/14/2017 | Original Date: Not Set |
| Reviewed: 04/14/2017 | Next Review Date: 04/14/2018 |
| Supersedes: | |