

**OLIVE VIEW-UCLA MEDICAL CENTER  
DEPARTMENT OF ANESTHESIOLOGY  
POLICY & PROCEDURE**

**NUMBER: 464  
VERSION: 4**

**SUBJECT/TITLE:** 064-INFECTIOIN CONTROL FOR ANESTHESIA MEDICATIONS

**POLICY:** Infection Control for Anesthesia Medications

**PURPOSE:** To ensure patients are not exposed to infection hazard from anesthesia staff, medications and equipment.

**DEPARTMENTS:** ANESTHESIOLOGY

**DEFINITIONS:** Infection Control Procedures for Anesthesia Medications includes: hand hygiene, sterile technique, safe handling of medication containers, safe injection practices, proper preparation and handling of infusions, notation of expiration time for medications, and proper handling of non-injectable items.

**PROCEDURE:**

1. Medication bottles must be inspected for cracks or turbid fluid before use. Medication in cracked bottles or bottles with turbid fluids must NOT be used & should be discarded.
2. Medication bottle caps should be wiped with alcohol before entering the bottle to remove medication. Medication should only be accessed with sterile needles.
3. Syringes and needles are not to be left in medication bottles.
4. Syringes filled with medications must have sterile, caps or plugs in preparation for needleless systems.
5. Needles should not be recapped.
6. Syringes with medications must be labeled with the name of the drug, concentration, date prepared and initials of the practitioner preparing the syringe, using proper drug labels, color-coded for drug types, as adopted by international convention. (This must be in accordance with Joint Commission Standards).
7. After each case, syringes should be discarded in a pharmaceutical waste container. Needles shall be disposed of in a "sharps" container.

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8. According to safe injection practices, the same needle should never be used from an I.V. site to the medication vial, due to the possibility of cross contamination.
9. Controlled drugs must be wasted at the end of each case. Proper documentation must take place.
10. All syringes with medication used during a case must be discarded at the end of the case. All syringes with emergency drugs drawn up to be available, must be discarded no later than 24 hours after being drawn up.
11. If possible, no medication should be injected in a blood administration line.
12. Needleless IV systems will be used.
13. If possible, medications should be injected at a stopcock rather than an injection port.
14. All needlesticks as well as blood/body fluid exposures must be reported as soon as possible. See the Olive View - UCLA Medical Center policy on blood and body fluid exposure.
15. Medication injected in the intrathecal/epidural spaces are to be from single dose vials without preservative.

References: Infection Control Manual	
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