

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

**NUMBER: 2045
VERSION: 4**

SUBJECT/TITLE: HIS 14 - HAZARDOUS CHEMICAL EXPOSURE MONITORING

POLICY: Hazardous Chemical vapor monitoring shall be performed in accordance with the Olive View Medical Center Environment of Care Committee's requirements. (refer to SCH 1.0 Chemical Hygiene Plan)

PURPOSE: To set up an acceptable monitoring program in order to remain compliant with the Federal Formaldehyde Standard, OSHA CFR volume 29, Section 1910.

All new employees will be monitored initially, upon the completion of their training. Formaldehyde, Xylene and Alcohol monitoring devices will conform to OSHA's standards of performance. Results of the initial monitoring will determine how much of the Standard will apply. The initial monitoring process will be repeated each time there is a change in production, equipment, process, personnel, or control measures which may result in new or additional exposure to formaldehyde, alcohol and/or xylene

Employees will be notified verbally of the results of initial and periodic monitoring, as well as by placing the results in the "Vapor Monitoring" binder.

DEPARTMENTS: PATHOLOGY

EQUIPMENT: Formaldehyde, Alcohol and Xylene Monitoring Badges obtained from:
Advanced Chemical Sensors Co.
350 Oaks Lane
Pompano Beach, Florida 33069
(305) 979-0598

PROCEDURE:

- A. All new employees will be monitored initially, after completion of their training. They will be monitored for 8 hours. (TWA 0.75 ppm) for 8 hours and (STEL 2 ppm) for 15 minutes.
- B. If exposure levels are at or above the Action Level (0.5 ppm/8 hours) during the initial monitoring, periodic monitoring will be conducted every six months, an/or if the STEL is exceeded during initial monitoring, then periodic monitoring will occur once a year, under the worst possible conditions.

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- C. Periodic monitoring may be discontinued if two successive samples, taken at least seven days apart are below the Action Level and the STEL

- D. Twice annually, periodic monitoring will be conducted on employees involved in high-risk assignments/areas. One or two employees will be selected on a random basis. The employees selected for monitoring will include:
 - 1. Personnel working in anatomical (grossing) specimen processing areas.
 - 2. Any pathologist grossing tissue specimens, including residents.
 - 3. Personnel involved in chemical waste disposal.
 - 4. Personnel involved in tissue disposal.
 - 5. Personnel working in the FNA/Cytology staining area.
 - 6. Personnel working in the general histology area.

- E. Equipment to monitored:
 - 1. Tissue Processors

- F. Areas to be monitored:
 - 1. Frozen Section Room
 - 2. Morgue
 - 3. Flammable Storage
 - 4. Grossing Stations

- G. Employees working in these classifications may be involved in periodic monitoring:
 - 1. Tissue Analysis Technician I
 - 2. Tissue Analysis Technician Supervisor I
 - 3. Pathologist, in anatomical pathology
 - 4. Residents, in anatomical pathology
 - 5. Laboratory Assistant, Histology

H. Action Levels

	8 hr Time-Weighted Exposure Limit in ppm	Action Level (8hr Time-Weighted Exposure in ppm	15 min Short-Term Average Exposure Limit (STEL) in ppm
Formalin	0.75	0.5	2.0

- I. Response to “Action Level” reading:
 - 1. Hospital Safety Officer will be immediately notified.
 - 2. Laboratory Safety coordinator will be immediately notified.
 - 3. Investigations into assignments and work practices will be conducted.
 - 4. Corrective action will be taken as appropriate, which may involve change in work practices, equipment or workplace modifications.
 - 5. Monitoring will continue to be conducted at least 7 days apart. When 2 consecutive below action level and STEL readings are obtained, routinely scheduled monitoring will resume.

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References: Federal Register, Department of Labor, Part II, OSHA, CFR 29, Section 1910.1048. Janet Crookham Dapson, B.A., MLT (ASCP) & Richard Dapson, PhD., Hazardous Chemicals in the Histopathology Laboratory, Third Edition, Anatech Ltd., Battle Creek, MI 49015, 1995	
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