

LAC+USC MEDICAL CENTER POLICY

Subject: HAZARDOUS MEDICATION SPILLS	Original Issue Date: 8/13/18	Policy # 957
	Supersedes:	Effective Date: 8/13/18
Departments Consulted: Pharmacy Department Nursing Department Engineering Department	Reviewed & Approved by: Pharmacy and Therapeutics Committee Attending Staff Association Executive Committee Senior Executive Council	Approved by: (Signature on File) Chief Medical Officer
		(Signature on File) Chief Executive Officer

PURPOSE

- Hazardous medication spills must be managed appropriately to minimize potential harm to humans and the environment.
- This policy establishes procedures for management of hazardous medication spills, in compliance with relevant laws and regulations.

POLICY

- A. A chemotherapy spill kit must be located in all areas where routine handling of hazardous medications occurs. Supply Chain Operations is responsible for maintaining a central inventory of chemotherapy spill kits for replenishment of used, expired, or missing kits.
- B. Upon identification of a hazardous medication spill in a pharmacy location when there is immediate availability of pharmacy staff trained in hazardous medication use as described in Medical Center Policy 947, "Hazardous Medications," such personnel will assess the spill for local or advanced management and respond appropriately.
- C. Upon identification of a hazardous medication spill in a non-pharmacy location when there is immediate availability of nursing staff certified in cytotoxic medication use as described in Medical Center Policy 947, "Hazardous Medications," such personnel will assess the spill for local or advanced management and respond appropriately.
- D. Upon identification of a hazardous medication spill in a non-pharmacy location when there is no immediate availability of nursing staff certified in cytotoxic medication use, the identifying personnel will follow the procedure for advanced management.

DEFINITIONS

- C-PEC: containment primary engineering control
- MSDS: material safety data sheet

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- SDS: safety data sheet

PROCEDURE

A. Assessment of hazardous medication spills

1. Local management may be pursued for spills estimated to be less than 250 milliliters liquid or 250 grams powder.
2. Advanced management must be pursued for spills estimated to exceed 250 milliliters liquid or 250 grams powder.

B. Local management of hazardous medication spills

1. For hazardous medication spills amenable to local management, the term “qualified personnel” includes pharmacy staff trained in hazardous medication use and nursing staff certified in cytotoxic medication use as described in Medical Center Policy 947, “Hazardous Medications.”
2. The hazardous medication SDS or MSDS must be accessed and reviewed before beginning spill management. At minimum, the MSDS will be accessible via the medical center intranet at MSDS Online.
3. A chemotherapy gown, a double pair of chemotherapy gloves, an N95 respirator, a pair of safety glasses, and a facemask must be worn during spill management.
4. For spills located within a C-PEC, qualified personnel must dispose of the spill using a chemotherapy spill kit and deactivate, decontaminate, clean, and disinfect the interior of the C-PEC. When the spill has contaminated the filter of the C-PEC, the C-PEC must be left running but quarantined from further use until the vendor has replaced the filter.
5. For spills not located within a C-PEC, qualified personnel must dispose of the spill using a chemotherapy spill kit and submit a report to the medical center Safety Intelligence system.

C. Advanced management of hazardous medication spills

1. For hazardous medication spills requiring advanced management, personnel will immediately contact the medical center operator at x111 for notification of the medical center Engineering Department.

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2. Spills estimated to be less than 1000 milliliters liquid or less than 1000 grams powder will be initially reported as minor spills. Spills estimated to exceed these quantities will be assessed by the medical center Engineering Department for qualification as major spills. Policy HW101 will guide further management.

RESPONSIBILITY

Medical Center Staff

REFERENCES

- United States Pharmacopeia (USP) Chapter <800>: Hazardous Drugs – Handling in Healthcare Settings

REVISION DATES