

ENVIRONMENT OF CARE (EOC)



HOSPITAL OFF-SITES

EOC REFERENCE CARDS

SAFETY MANAGEMENT/HAZARD COMMUNICATION
FIRE SAFETY/SECURITY MANAGEMENT
MEDICAL EQUIPMENT MANAGEMENT
UTILITIES MANAGEMENT
HAZARDOUS MATERIALS AND WASTE MANAGEMENT
RADIATION PROTECTION SERVICES
EMERGENCY MANAGEMENT
SPILL RESPONSE/EOC TIPS



HAZARDOUS MATERIALS AND WASTE MANAGEMENT

Material	Description	Contact
Batteries (Alkaline)	Dispose in regular trash	Questions, EOC Off-site Coordinator, 4-4066
Batteries (Non-Alkaline/ Rechargeable)	Ni-CD, Ni-MH, Hg, Pb, Li-ion Large Lead Acid Batteries cannot go in regular trash.	EOC Off-site Coordinator, 4-4066
Cans/Bottles/Paper	Bottle and can recycling containers are available in some facilities. Place waste paper in blue recycling containers or, if confidential, put in confidential bins.	 Bottles/cans, blue paper bins: Campus Recycling, 2-9297 Confidential paper: Linen, 4-1461 (7AM-2:30 PM); off hours: Distribution Services, 4-2980
Chemotherapy / Hazardous Chemical Spill	Use appropriate spill kit. If over 1 gallon (50 ml/cc of hazardous drug) or assistance needed, call local Fire Dept or 911.	Need assistance, call local fire dept or 911 General questions, contact EH&S, 4-6783
Cylinders	For gas cylinder return, contact supplier.	For gas cylinder return, contact supplier. For black caps and used/unsed tags, contact EOC Off-site Coordinator, 4-4066
Electronic Equipment (computers, printers, monitors, TVs, cell phones)	Complete SUNY Property Control Form: http://naples.cc.sunysb.edu/ Admin/HRSForms.nsf/pub/SUSB0591/ \$FILE/SUSB0591.pdf	 Tape completed Property Control form on item. Contact Property Control at 2-1183 for pickup.
Hazardous Waste	Don't pour chemicals down the drain. For any chemical waste disposal questions, contact EH&S.	EOC Off-site Coordinator, 4-4066
Lamps (Flurosecent bulbs)	Don't discard used fluorescent bulbs in the trash.	EOC Off-site Coordinator, 4-4066
Pest Control	Hospital leased properties (Tech Park, Hampton Bays, Sleep, Clark House, Gyrodyne) have pest management contractor, coordinated by the Offsite Facilities Manager.	Tech Park + other hospital leased properties: Off-site Facility Manager, 4-4380 Other facilities: contact landlord
Radioactive Material	Coordinated by EH&S Radiation Protection Services.	EH&S, 4-6783
Refrigerator, Freezers, Air Conditioners	Refrigerant and hazardous materials must be removed prior to disposal.	EOC Off-site Coordinator, 4-4066
Regulated Medical Waste (RMW) or Red Bag Waste	Items soaked or saturated with blood or body fluids.	EOC Off-site Coordinator, 4-4066
Toner/ Printer Cartridges	Toner Cartridges: Return to manufacturer. Printer Cartridge: Place in interoffice envelope or box and address to University Recycling, Z= 6551.	EOC Off-site Coordinator, 4-4066



RADIATION PROTECTION SERVICES (RPS)



Radiation producing machines and radiation emitting sources are used at Stony Brook Medicine facilities for the diagnosis and treatment of diseases. Staff working in radiology, nuclear medicine, radiation oncology, and some laboratories must be specifically trained in the operation of radiation machines and the handling of radioactive materials and sources. Housekeepers, maintenance and other ancillary staff could have indirect contact and may be potentially exposed to radiation during performance of their normal duties. In addition, patient transport, operating room, and recovery room personnel may come in contact with radioiodine, brachytherapy (radioactive implant) and nuclear medicine patients.

Radiation Protection Services (RPS) establishes uniform policies and procedures for the <u>safe</u> use of ionizing radiation within the University, ensuring that operations conform with Federal, State and University regulations. RPS provides services to medical operations and staff to ensure that radiation exposure is maintained As Low As Reasonably Achievable (ALARA).

Services and products offered by RPS

- Inventorying, inspecting and surveying areas controlled for radiation safety
- · Providing staff and patients routine and special, tailored radiation safety training
- Administering the Personnel Monitoring Program (radiation badges)
- Supporting radiation safety for all uses of radiation in diagnosis and therapy
- Providing radiation survey instrument calibration service
- Administering the lead apron inspection program in compliance with Joint Commission requirements
- Emergency / radioactive spill response
- Managing of Low Level Radioactive Waste
- Providing non-ionizing radiation safety (Laser Safety, RF, EMF & ELF) support

Radiation Safety Tips

- Be aware of radiation and laser safety signage and do not enter posted areas without authorization from area manager/supervisor or RPS.
- Working in a radiological controlled area requires radiation safety training. Call RPS for training.
- Know how to keep your radiation exposure As Low As Reasonably Achievable (ALARA) using time, distance and shielding.
- Maintain security and control of all radioactive substances and sources in your work area.
- If issued dosimetry to measure your occupational radiation dose, wear badges and rings properly on the body as designated while working with radiation. Return badges to your department badge coordinator promptly at the end of the wear cycle (9th of the month).
- If wearing lead aprons/shields as PPE, before use inspect for damage and annual RPS inspection.
- If a radioactive spill occurs follow emergency procedures posted in your area. Questions, call RPS.

UH RPS Contacts:

- Associate Radiation Safety Officer University Hospital 8-2356 / short 3861-2631/ cell 631.506.1993
- Radiation Safety Associate
 4-3196 / short 3861-9006
- University Radiation Safety Officer 2-9676 / cell 631.872.0768



Radiological Incident Response (Off sites)

- **A. EXTREME HAZARDS:** High radiation levels or the possibility of airborne contamination from dry or volatile radioactive materials
 - Evacuate the area immediately. Close and lock the doors, or stand guard.
 - Call University Police at 631-632-3333 and have them contact the assigned staff from Radiation Protection Services (RPS).
 - If you have to leave the area, remove your shoes if you suspect contamination and do not touch anything if possible.
- **B. NON-EXTREME HAZARDS**: Spills or suspected spills of radioactive materials where material does not become airborne

1) Confine Contamination

- a. Localize the spill by placing absorbent material (i.e., chux or pad) on a liquid spill.
- b. Close door.
- c. Where possible, have ventilation adjusted to prevent spread of airborne contamination.
- d. Do not track contamination around the area. Check shoes with survey meter. Do not leave the spill area without surveying hands and feet.

2) Protect Personnel

- a. Alert other staff and nearby persons of the hazard.
- b. Remove contaminated clothing and wash contaminated parts of the body with soap and warm water (be especially thorough in flushing out wounds).
- c. If thorough washing with soap does not remove contamination from the body, call RPS at 631-632-6410 during normal business hours or University Police at 631-632-3333 off hours.

3) Decontaminate

- a. Trained staff will be expected to perform the major work of decontamination of their area. If assistance is needed, contact RPS at 631-632-6410 during normal business hours or University Police at 631-632-3333 off hours.
- b. All potentially contaminated persons and areas must be monitored after decontamination by trained personnel before normal work is resumed.
- c. Always contact RPS at 631-632-6410 within 24 hours after an incident.

Biological Spill Response

Staff wear nitrile gloves when cleaning up spills of blood or other potentially infectious materials (i.e., body fluids, unfixed tissue). If there is splash or splatter potential, eye/face protection and/or gown/lab coat is worn. The spill response is as follows:

1. Patient care areas:

- a. Clinical staff in affected area removes visible bulk biological material i.e., vomit, feces, urine) using a chux and discard in regular trash. However, if biological waste material is blood, it must be disposed in a red bag.
- b. The remainder of the spill is cleaned by clinical staff or Housekeeping contractor staff, if available, using the hospital approved disinfectant (HAD).
- 2. Non-patient care areas/Laboratories: Affected area staff covers the spill with absorbent material to contain spill and area staff or Housekeeping contractor staff, if available, performs spill cleanup using the HAD. Laboratory staff is responsible for decontaminating any affected lab equipment using the HAD.



EMERGENCY MANAGEMENT

COMPREHENSIVE PLAN ADDRESSES MANY POTENTIAL EVENTS

- Emergency Management Policies and Procedures Manual is on every clinical unit and in every department.
- Staff must know where their unit's Manual and power outage emergency kit (containing flashlights, batteries, glow sticks, extension cord and duct tape) are located. To replenish kits, contact the Off-site EOC Coordinator at 4-4066.

MANUAL TOPICS

- Command Post Policy
- External Disaster Policy
- Bomb Threat Policy
- Bioterrorism Policy
- Radiation/Hazmat Decontamination Policy
- Physical Plant Failure Plan
- Communication Failure Plan
- Weather Emergency Plan
- Medical Monitoring Equipment Failure Plan
- Fire & Evacuation Plan





DEPARTMENTAL PLANS

Every department must have a department specific emergency preparedness plan

- How would this department respond to an "event"?
- How would this department call in additional resources, i.e. personnel and equipment?
- How would this department allocate additional inpatient beds as needed?

HOSPITAL INCIDENT COMMAND SYSTEM

- Identifies the specific chain of command
- Identifies responsibilities for all individuals
- Provides for a rapid and effective means of communication and notification
- Preplanned comprehensive system to allow rapid mobilization of required resources

ACTIVATION OF PLAN

- Any employee who learns that a large number of disaster victims may be received in the Emergency Department should immediately notify their administrative supervisor who will call EMS at 4-1911.
- All employees must be aware that if the plan is activated they should speak with their supervisor to get instructions as to what their role is.

VOLUNTEERS WELCOME

CALL 4-6151 FOR INFORMATION ABOUT

- Patient Decontamination Team
- Hospital Emergency Radio Team
- Exercise Planning Teams
- Points of Distribution (POD) Teams

Employees should also have a personal household emergency plan!

Visit www.ready.gov



The emergency management manual and departmental specific plan should be referenced once the plan is activated.

T	en Critical Steps	for Handling Possible Bioterrorist Events
1	Maintain an index of suspicion.	In an otherwise healthy population, some associations are very suggestive, especially when seen in clusters, high numbers, or unusual presentations. Hemoptysis
2	Protect yourself and your patients.	Use appropriate personal protection equipment (PPE). Prophylaxis: vaccines, if available; or antibiotics, if risks are known.
3	Adequately assess the patient.	Review and assess the patient's history. Also, ask: • Are others ill? • Were there any unusual events? • Was there an uncontrolled food source or other environmental factor? • Was there vector exposure? • Has the patient been traveling? • What is the patient's immunization record? Perform a physical examination with special attention to the respiratory system, nervous system, skin condition, and hematologic and vascular status.
4	Decontaminate as appropriate.	Do not use bleach on exposed people. Soap, water and shampoo are perfectly adequate for all biological and most chemical agents. Chemically contaminated clothes should be removed and discarded safely. Biologically contaminated clothes can be laundered with soap, water and, perhaps, bleach.
5	Establish a diagnosis. All lab specimens to be hand carried and appropriately labeled. Do not use the pneumatic tube system.	Think clinically and epidemiologically; always send specimens for culture. Symptom (individuals) Possible Diagnosis Pulmonary Tularemia, plague, staph enterotoxin B (SEB) Neuromuscular Botulism, Venezuelan equine encephalitis (VEE) Bleeding/purpura VHF, ricin, plague (late) Rash (various types) VHF, T2 mycotoxin, smallpox, plague Flu-like symptoms Varies Immediate Symptoms (large numbers) Possible Diagnosis Pulmonary SEB, mustard, Lewisite, phosgene, cyanide Neurologic nerve gases, cyanide Delayed Symptoms (large numbers) Possible Diagnosis Pulmonary Biologic agents, mustard, phosgene Neurologic Botulism, VEE, other encephalitis
6	Render prompt treatment.	Doxycycline can be used to treat virtually everything (except virals or toxins) while awaiting lab results. Observe pediatric precautions as appropriate.
7	Provide good infection control.	Gown, gloves, mask and handwashing, and eyewear if necessary, are sufficient. Recommended isolation precautions for biologic agents include: Standard PrecautionsFor all individuals/patients Contact Precautions(herpes, etc.) Viral Hemorrhagic Fevers Droplet PrecautionsPneumonic Plague and Tularemia Airborne PrecautionsSmallpox
8	Contact Infection Control Nurse for all suspected infectious cases. All media contact should be channeled through SBUH Media Relations.	Agency Telephone Number SBUH Healthcare Epidemiology
9	Assist in the epidemiologic investigations.	Steps to be taken in an epidemiologic investigation so as to determine who may be at risk. Count cases; Relate to the at-risk population; Make comparisons; Develop hypotheses; Test hypotheses; Make inferences; Conduct studies; Interpret and evaluate.
10	Know and spread this information.	Adapted from a poster distributed by the NYS Department of Health Bureau of Communicable Disease Control from a lecture by Dr. Ted Cieslak, Colonel, US Army

CHEMICAL SPILL RESPONSE PROCEDURES (Off sites)

REMEMBER: FIRST AID FIRST, THEN ASSESS THE SPILL - Is the Spill Major or Minor?

	Minor Spill - Definition	Major Spill - Definition
•	Less than or equal to 1 gallon of chemical or Less than or equal to 50 cc/ml of a hazardous drug Only trained departmental staff in control of the chemical can respond to a minor spill. If the spill is larger than department staff feel they can safely clean, staff should call 911.	 More than 1 gallon of chemical <u>or</u> More than 50 cc/ml of a hazardous drug <u>or</u> Unknown hazardous chemical spill, any quantity
	Minor Spill Response	Major Spill Response
1.	Notify coworkers and evacuate necessary persons to a safe area.	 Notify coworkers and have area evacuated. Secure area by restricting access and posting
2.	Secure area by restricting access and posting signs.	signs.
	Remove any potential ignition sources and unplug nearby electrical equipment, if feasible. Review safety information on spilled chemical,	3. If possible, trained staff can use a spill kit/absorbent material to initially contain the spill prior to evacuation. Do not attempt to clean up a major spill.
	including the Safety Data Sheet (SDS) and product label.	4. Call 911 and give details of spill including specific location, chemical, quantity, and if anyone is injured.
5.	Locate appropriate spill kit and review spill kit instructions.	5. In case of an injury or chemical contamination:
6.	Don personal protective equipment (PPE) which typically includes chemical splash goggles, chemical resistant gloves, apron or lab coat. If splash potential exists, additional PPE such as a face shield or booties may be necessary.	 a. Wear PPE and move victim from spill area. b. Remove any contaminated clothing and place in a plastic bag for laundering or disposal. c. Locate nearest emergency safety shower or eyewash. Flush affected areas using eyewash or emergency shower, if available, with
7.	Confine and contain spill. Cover spill with appropriate absorbent material.	copious amounts of water for 15 minutes. d. If first aid trained, administer first aid as
8.	Clean up spill using a scoop or other suitable item and place material in appropriate disposal container.	appropriate. If possible, bring SDS or product label.e. If more than first aid is required, call for an
9.	Decontaminate spill surface with hospital approved disinfectant (HAD), as appropriate. <i>Note: for Hazardous Drug spill use HD Clean wipes instead of HAD.</i>	ambulance.6. Staff knowledgeable about the spill provides responders with all pertinent information and
10.	Carefully remove PPE, place non-reusable items in disposal container and thoroughly wash hands. Contact EH&S at 4-6783 for proper waste disposal.	SDS.7. The responders or designee informs staff when it
11.	Investigate cause of spill. Document spill, response, and corrective action with staff.	is safe to re-enter spill area.
12.	Replenish spill kit. Glutaraldehyde/OPA spill kit (Lawson # 41899), chemotherapy drug spill kit (Lawson # 60434) and Spill-X-FP for formalin spill kits (Lawson # 41858) are available through the Lawson system. Acid spill kits are available through	Revised 7/31/17



EOCTIPS FOR OFF SITES

- 1. Always wear your Stony Brook ID badge.
- 2. Follow the hospital's Tobacco-free Workplace policy.
- 3. Ensure any patient bathroom alarm cord is within 6" of the floor. Cord should not be wrapped around the grab bar.
- 4. Store all items off the floor.
- 5. Remove patient supplies from the outside shipping boxes before storing. Shipping boxes may be contaminated, and insects can nest between the corrugated sheets of paper.



- 6. Keep closed caption on the televisions in waiting rooms.
- 7. Monitor refrigerator temperatures per policy.
- 8. Ensure supplies and medications are not expired.
- 9. Ensure oxygen cylinders are secured in a rack or cart, labeled used or unused, and used and unused cylinders are segregated.
- 10. Know how to summons security assistance.
- 11. Secure your personal belongings.
- 12. Understand how to access your departmental chemical inventory and safety data sheets on the hospital intranet.
- 13. Know the location and how to use the eyewash.
- 14. Know the locations of fire alarm pull stations, if provided, and fire extinguishers. Don't block any emergency equipment.
- 15. Understand your responsibilities during an emergency.
- 16. Be familiar with who to contact for the maintenance and repair of critical equipment.





SAFETY MANAGEMENT

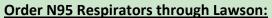
Occupational Injury & Illness Prevention (OIIP) Tips—Be Aware & Care

- If you see something, say something. Immediately report unsafe conditions to your supervisor, EH&S (4-6783), or University Police.
- Be careful and alert to your surroundings. If you see a wet floor, please take immediate action to remedy, or call appropriate personnel.
- Follow applicable work procedures and policies.
 If you are unfamiliar with a specific procedure, request training.
- Prior to using a new product, review the Safety
 Data Sheet (SDS), and product label. SDS are located on Hospital Intranet under "Resources".
- **Use lifting equipment** or ask for assistance when handling patients, heavy supplies or equipment.
- Wear personal protective equipment (PPE) such as gloves, goggles, gown or N95 respirator, as required.
- Avoid rushing as you or others may be injured.
- Secure loose wires to minimize tripping hazards.
- See Admin EC:0046, Occupational Injury and Illness Prevention (OIIP) for more information.

Respirator Information

Monthly Respirator Fit Testing: EH&S' schedule for monthly training and fit testing is posted on:

- Hospital's weekly announcements, Intranet under "Hot Topics" and EH&S website
- ◆ Call EH&S at 4-6783 to RSVP.
- required annually for those in Respiratory Protection Program



- ♦ 3M 1860S (small): Lawson #24815
- 3M 1860 (regular): #21723
- Moldex 1510 (XS): #51154
- Moldex 1511 (S): #26414
- Moldex 1512 (M): #26416
- Moldex 1513 (L): #26415
- ⇒ Only wear the respirator make/model/size you were fitted with.

Reference: Admin EC:0038, Respiratory Protection Program

Employee Injury/Illness Notification Procedures

- ⇒ Notify your supervisor or designee.
- ⇒ If medical attention is needed, report to Employee Health & Wellness. If life threatening injury or off-hours, go to the ED.
- ⇒ Ensure Employee Injury/Illness Report form is completed within 24 hours and immediately fax to 706-4230 (Hospital staff) or 632-2417 (Research Foundation). Employee, supervisor, witness and medical provider must complete their sections. Retain original injury report; Supervisor keeps a copy. Also complete a Sharps Injury log if the injury involves a needlestick or other sharp. Both forms are available on the intranet in the "Resources" section, under "Forms".
- $\Rightarrow\;$ Call the NYS Accident Reporting System (ARS) at 888-800-0029.
- ⇒ Ensure medical provider accepts Workers' Compensation prior to an office visit and inform the provider that the injury is work-related. Employee must notify their supervisor of any time off due to injury/illness AND provide medical documentation from their private physician to Timekeeping. *Reference: Admin HR:0016, Employee Occupational Injury/Illness Reporting*

Important Contacts:

Timekeeping, 4-4377

Environmental Health & Safety, 4-6783

Employee Health & Wellness, 4-7767

HSO	Expiration Date:		1
OSHA 3492-02 2012	Fill weight: Lot Number: Gross weight: Fill Date:		First Ald First Ald In Stan (or hair: Take off immediately any contaminated If on skin (or hair: Take off immediately any contaminated clothing. Binse skin with water.
012	Directions for Use		In Case of Fire: use dry chemical (BC) or Carbon Dioxide (CO ₂) fire extinguisher to extinguish.
	brezeH Liquid and vapor. Statements Statements Statements statement shows a special statement		well-wendinated aloce that is locked. Welp away from heal/sparks/open flame. No smoking. Only use non-sparking tools. Use seydoson-proof electrical equipment. Isake precautionany measures against state discharge. Ground and bond containers and receiving equipment. West protective gloves. Do not eat, drink or smoke when using this product. Wash protective gloves. Wash protective gloves. Wash protective gloves.
	Signal Word Danger		Keep container tightly closed. Store in a cool,
	Sport leading to the sport of t		Company Name Street Address City City Country Emergency Phone Number
	emergotoiq breseH		CODE Product Vame Identifie
		SAMPLE LABEL	

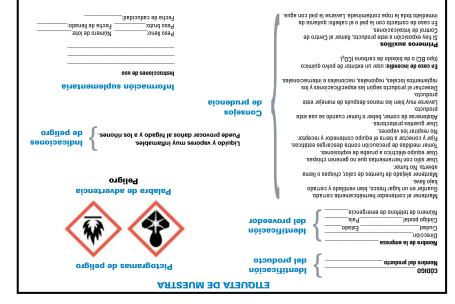
DZHY CARD

Hazard Communication Standard Labels

on the label as needed. right. Supplemental information can also be provided identifying the required label elements, is shown on the supplier identification. A sample revised HCS label, precautionary statements, the product identifier, and required to have pictograms, a signal word, hazard and Standard (HCS). As of June 1, 2015, all labels will be hazardous chemicals under its Hazard Communication deling of AHSO the requirements for labeling of

For more information:

Safety and Health Occupational (S478) AH20-1SE (008)



SOCIATION SOCIAL SOCIAL

comunicación de peligros Etiquetas para la norma sobre la

según sea necesario. puede contener también información suplementaria HCS, que indica los elementos obligatorios. La etiqueta muestra de una etiqueta modificada de acuerdo con la identificación del proveedor. A la derecha se presenta la consejos de prudencia, identificación del producto y la una palabra de advertencia, indicaciones de peligro, exigirá que todas las etiquetas incluyan pictogramas, los requisitos para las etiquetas de los productos químicos peligrosos. A partir del 1° de junio de 2015, se (HCS, por sus siglas en inglés), la OSHA ha actualizado De acuerdo con su norma de comunicación de peligros

Para más información:

vog.sha.gov (S478) AH2O-1SE (008) Seguridad y Salud Administración de

OZHY GUER

Occupational Safety and Health For assistance, contact us. We can help. It's confidential

U.S. Department of Labor | www.osha.gov (800) 321 OSHA (6742)

Hazard Communication Safety Data Sheets

1, 2015, the HCS will require new SDSs to be in a uniform the hazards of hazardous chemical products. As of June Material Safety Data Sheets or MSDSs) to communicate format, and include the section numbers, the headings, provide Safety Data Sheets (SDSs) (formerly known as and associated information under the headings below: The Hazard Communication Standard (HCS) requires chemical manufacturers, distributors, or importers to

number; emergency phone number; recommended use; Section 1, Identification includes product identifier; manufacturer or distributor name, address, phone restrictions on use

Section 2, Hazard(s) identification includes all hazards regarding the chemical; required label elements.

includes information on chemical ingredients; trade secret Section 3, Composition/information on ingredients

Section 4, First-aid measures includes important symptoms/effects, acute, delayed; required treatment. Section 5, Fire-fighting measures lists suitable extinguishing

Section 6, Accidental release measures lists emergency procedures; protective equipment; proper methods of techniques, equipment; chemical hazards from fire.

Section 7, Handling and storage lists precautions for safe handling and storage, including incompatibilities.

containment and cleanup.

(Continued on other side)

or more information:



www.osha.gov (800) 321-OSHA (6742) U.S. Department of Labor

Hazard Communication Safety Data Sheets

Threshold Limit Values (TLVs); appropriate engineering Section 8, Exposure controls/personal protection lists OSHA's Permissible Exposure Limits (PELs); controls; personal protective equipment (PPE)

Section 9, Physical and chemical properties lists the chemical's characteristics. Section 10, Stability and reactivity lists chemical stability and possibility of hazardous reactions.

Section 11, Toxicological information includes routes of exposure; related symptoms, acute and chronic effects; numerical measures of toxicity.

Section 13, Disposal considerations* Section 15, Regulatory information* Section 12, Ecological information* Section 14, Transport information*

Section 16, Other information, includes the date of preparation or last revision.

*Note: Since other Agencies regulate this information, OSHA will not be enforcing Sections 12 through 15 29 CFR 1910.1200(g)(2)) Employers must ensure that SDSs are readily accessible to employees.

See Appendix D of 29 CFR 1910.1200 for a detailed description of SDS contents.

OSHA 3493-02 2012

® Occupational Safety and Health Administration

or more information:

OSHA 3493-02-2012

www.osha.gov (800) 321-OSHA (6742) U.S. Department of Labor

HCS Pictograms and Hazards

hazard(s). The pictogram on the label is determined by

the chemical hazard classification.

framed within a red border and represents a distinct

the chemical hazards to which they may be exposed. Each

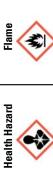
pictogram consists of a symbol on a white background

As of June 1, 2015, the Hazard Communication Standard (HCS) will require pictograms on labels to alert users of

Hazard Communication

Y I

Standard Pictogram



Exclamation Mark

- Pyrophorics Self-Heating Flammables Mutagenicity Carcinogen
 - Reproductive Toxicity
- Target Organ Toxicity Respiratory Sensitizer

Aspiration Toxicity

 Respiratory Tract Narcotic Effects Irritant Emits Flammable Gas Organic Peroxides Self-Reactives

Acute Toxicity (harmful)

Irritant (skin and eye)

Skin Sensitizer

- Layer (Non-Mandatory) Hazardous to Ozone

Exploding Bomb

Corrosion

Gas Cylinder

- - Skin Corrosion/

Gases Under Pressure

- Organic Peroxides Self-Reactives Explosives Eye DamageCorrosive to Metals

and Crossbones Environment (Non-Mandatory)

Flame Over Circle

Skull

Acute Toxicity

Aquatic Toxicity

Oxidizers

fatal or toxic) or more information:

Occupational
Safety and Health
Administration

www.osha.gov (800) 321-OSHA (6742) U.S. Department of Labor

OSHA 3491-02 2012



The **Fire Safety Program** at Stony Brook University Hospital's off-site facilities is designed as a prevention program. Safe building design and maintenance of protective

features is the first step in protecting building occupants. Our goal is the quick detection of potential hazards including those that could result in fire or smoke conditions as well as those that would prevent containment of fire or smoke or impede response or evacuation. The objective of the fire safety training and education program is to prevent risks through recognition and detection of potential hazards. Insuring appropriate staff response during emergencies is our number one priority. All staff are trained in RACE procedures.



In case of an Emergency, all staff should know:

- ⇒ Emergency exits,
- ⇒ Primary and secondary evacuation routes,
- ⇒ Agreed upon Assembly Area,
- ⇒ Fire extinguisher locations, and
- ⇒ Fire alarm pull station locations



FOR EMERGENCIES INVOLVING
FIRE/SMOKE OR LARGE HAZARDOUS
CHEMICAL SPILL:
CONTACT 911.

RACE Procedures:

- Remove
- Alarm
- Confine
- Extinguish or Evacuate

Fire Extinguisher Procedures:

- •Pull pin, start from 8 feet back
- Aim at base of fire
- •Squeeze handle
- •Sweep side-to-side

Fire Code Phrases:

Code Red: Fire/Smoke Code Green: All Clear

The University Hospital Off-Site Facilities are under the police jurisdictions of the local police departments. All off-site facilities should call 911 in the event of a police emergency. Reporting of criminal activities issues from patients, visitors and staff must be made to the local precinct using the county wide 911 system. The Off Site Facilities Manager provides security services at Tech Park through a contracted Security Company from 4:30 p.m. to 8:30 a.m. Monday through Friday and provides 24 hour service on weekends and Holidays. Contact the Off Site Facilities Manager at 444-4380 for information or service.

Tech Park Security Services:

- 1. Patrols all parking lots.
- 2. Logs the activities, which are reviewed by the Off Site Facilities Manager.
- 3. Tours each building during the shift, checking exterior doors and windows.
- 4. Checks personnel working after hours and on weekends.
- 5. Escorts visitors and employees, as directed by the Off Site Facilities Manager.
- 6. Provides access to closed buildings (prior notification must be made with the Off Site Facilities Manager).
- 7. Assists authorized staff with access to closed buildings when there are problems with locks or keypads.

As a Member of our Community, Help Create a Safe and Secure Environment:

- 1. Wear your University ID, above your waist, at all times while in an off-site location.
- 2. Report any Security issues or potential hazards to the Off Site Facility Manager, 4-4380
- 3. Secure all valuables when leaving your office or work area.

Personal Safety Tips:

- 1. Be aware of your surroundings.
- 2. Do not expose expensive jewelry, money or the contents of your purse or bag.
- 3. Do not carry large sums of money.
- 4. Never leave anything unattended in any area even if you are only leaving for a short break.
- 5. Be cautious with personal information.
- 6. Trust your instincts.
- 7. For an Active Shooter Event: Run. Hide. Fight.

REMEMBER, CRIME REQUIRES THREE BASIC THINGS: A CRIMINAL WITH A DESIRE, ABILITY AND OPPORTUNITY. YOU CANNOT CONTROL THE CRIMINAL'S DESIRE OR ABILITY, BUT YOU CAN MAKE SURE THEY DO NOT HAVE THE OPPORTUNITY.

"This Community Belongs To All Of Us."



MEDICAL EQUIPMENT MANAGEMENT

Biomedical Engineering Department (BME) is responsible for the maintenance and management of diagnostic and therapeutic equipment used in the care of patients at Stony Brook University Hospital.

HOURS – Biomedical Engineering is staffed Monday through Friday, excluding SUNY Holidays. Technicians are on call 24 hours/day for emergencies (ADN calls Operator to page Hospital or O.R. BME Technician).

PHONE – 4-1420 or 4-HELP **LOCATION** – HSC Level 1-141

BME performs Preventive Maintenance/Safety Checks (PMs) and inspections as required by each piece of medical equipment in the BME program as evidenced by a BME Inspection tag. You can check if preventative maintenance is due by checking the date on the BME Inspection tag. The date on the tag will represent the date equipment is due for inspection and the inspection interval (e.g. Annual).

HOW TO GET SERVICE:

- Go to the BME Service Request link using the procedure on the next page.
- Find the BME tag on the piece of equipment you are having trouble with and enter that number and a brief description of the problem onto the online request form.



BME Tag

Put broken equipment aside with printout of service request taped to the device so no one will use it.

WHAT TO DO IN CASE OF MEDICAL EQUIPMENT EMERGENCY:

- **DAYS** call BME at 4-1420 or 4-HELP.
- **OFF Hours** contact the ADN to have operator page the Hospital or O.R. BME Technician on call.
- INCIDENT REPORTING For any SB Safe event, record the BME # of equipment that could possibly have been involved in the patient/equipment incident. All equipment and disposables involved in the SB Safe event must be clearly labeled and sequestered for BME investigation.
- LOSS OF POWER Use only the red emergency outlets for emergency power.

WHAT TO



- UNREGISTERED EQUIPMENT All electrical medical equipment in the BME program should have a BME tag or a rental company tag. Our BME tag is evidence that the equipment has received an incoming inspection by BME. If you find a device without a BME tag, report this to BME by calling 4-1420 or 4-HELP. All new medical equipment purchases made by a department other than BME must have a BME Checklist completed and submitted to Purchasing as part of the procurement package.
- UNREPORTED BROKEN EQUIPMENT Contact BME for service using the service request link on the intranet or call 4-1420 during regular business hours.

BME Inspected by: SJB Annual Due: 06/30/2018 BME Inspected by: SJB Semi-annual Due: 12/31/2017

BME Scheduled Inspection NOT Required

Procedure for entering a BME Service Request:

- Go to the Stony Brook Medicine Home Page.
- Under "My Requests", Click on "BME Service Request".
- Enter all the required information and click on "Save".
- Click "Send to Printer" to get a copy of the work order.
- Tape the printed request on the device that requires service.

Work Order New

Total Tiew		
BME Number*:		
	- Select the Dep ▼	
Department*:	- Select the Dep	
Requester Name*:		
Requester Phone*:		
Problem Description*:	~	
Priority*:	- Routine	
Requester Remarks:	▼	
	5	Save

^{*}These fields are required.

UTILITY MANAGEMENT

Failure of:	What to Expect:	Who to contact:	Responsibility of User:
Computer Systems	Systems Down	Information Technology (Help Desk 4-HELP)	Use backup manual systems.
Electrical power failure with Emergency generator working (Building 37 and 181 only)	Many lights are out; red plug outlets are working	Off Site Facilities Manager, 4-4380	Ensure life support systems are on emergency power (red outlets). Complete cases in progress ASAP. Use flashlights.
Electrical power failure-Total	Failure of all electrical systems	Hospital Leased Properties*: Off Site Facilities Manager, 4-4380 Other facilities: contact landlord	Utilize flashlights.
Elevators out of service	All vertical movement will have to be by stairwell	Off Site Facility Manager, 4-4380 Bldg #6: Elevator Phone connects to the Elevator Company	Inform personnel that elevators are not working-use stairs
Elevator stopped between floors: People trapped	Elevator alarm bell sounding	Off Site Facility Manager, 4-4380 Setauket Fire Dept. 941-4441 Bldg #6: Elevator Phone Connects directly to the Elevator Company	Keep verbal contact with personnel entrapped in elevator
Fire Alarm Systems	No fire alarm or sprinklers	Hospital Leased Properties*: Off Site Facilities Manager, 4-4380 Other facilities: contact landlord	Institute fire watch. Minimize fire hazards. Use phone or runners to report fire.
Natural gas, failure or leak	Odor of gas	Hospital Leased Properties*: Off Site Facilities Manager, 4-4380 Other facilities: contact local Fire Dept. or 911	Open windows if possible. Do not use any spark producing devices, electric motors, switches, etc. Evacuate .
Patient Care, Medical Equipment	Equipment/system does not operate properly	Place work order into system. For emergency call 444-4025	Replace and tag defective equipment.
Sewer Stoppage	Drains back up	Hospital Leased Properties*: Off Site Facilities Manager, 4-4380 Other facilities: contact landlord	Do not flush toilets. Do not use water.
Telephones	No phone service	Telenet Supported Locations: Telephone Repair Service 632-7762 or Help Desk (4-HELP) Other facilities: contact phone service provider via cell phone	Use cellular phones or pay phone.
Water	Sinks and toilets inoperative. Sprinkler systems inoperative	Hospital Leased Properties*: Off Site Facilities Manager, 4-4380 Other facilities: contact landlord	Conserve water; use bottled water for drinking. Be sure to turn off water in sinks.
Water, Non-potable	Tap water unsafe to drink	Hospital Leased Properties*: Off Site Facilities Manager, 4-4380 Other facilities: contact landlord	Place "Non potable water-Do Not Drink" signs at all drinking fountains and wash basins.
Ventilation (HVAC)	No ventilation: no heating or cooling	Hospital Leased Properties*: Off Site Facilities Manager, 4-4380 Other facilities: contact landlord	If possible, open windows. Restrict use of odorous/hazardous materials.
Automatic doors not working	Cannot enter or exit building through primary entrance/ exit	Hospital Leased Properties*: Off Site Facilities Manager, 4-4380 Other facilities: contact landlord	Use other secondary entrance/exit. Post signs on non-functioning doors indicating where other doors are located.