

HOSPITAL **EOC REFERENCE CARDS**



SAFETY MANAGEMENT/HAZARD COMMUNICATION
FIRE SAFETY
SECURITY MANAGEMENT
MEDICAL EQUIPMENT MANAGEMENT UTILITIES MANAGEMENT
HAZARDOUS MATERIALS & WASTE MANAGEMENT
RADIATION SAFETY

SPILL RESPONSE

CLEAR EGRESS/AIR PRESSURE MONITORS

Injury & Illness Prevention — Be Aware & Care

- If you see something, say something. Report unsafe conditions to your supervisor, University Police (911 or on cell: 631-632- 3333) or EH&S (4-6783).
- Be alert to your surroundings. Avoid rushing. If you see a wet floor, litter, or loose wires, take immediate action to prevent slip and trip injuries. Report damaged equipment immediately.
- Know location of your department's emergency equipment (e.g., eyewash, spill kit).
- Prior to using a new product, review the Safety Data Sheet (SDS) and product label. SDS are available on *ThePulse* under Resources A-Z or Manuals. EH&S can assist in using them.
- Follow work procedures and policies. If you are unfamiliar with a procedure, request training.
- Use lifting equipment or ask for assistance when handling patients or heavy items.
- Wear personal protective equipment (PPE) such as gloves, goggles, gowns, and N95 respirators, correctly and as required.

N95 & PAPR Respirator Information

- Prior to being issued a respirator you must be medically cleared, trained, and fit tested.
- Only wear the respirator make/model/size for which you were successfully fitted.
- Fit testing and training are required annually. (Hooded PAPRs only need training.)
- N95s:
 - Before each use: inspect your N95; mold metal nosepiece (if present) to nose; ensure straps are not twisted or crisscrossed, with the high strap as high as possible and the low strap low. Be sure not to have hair interfering with the seal. *Conduct user seal check*.
 - Discard N95 respirator when soiled or damaged. Reuse as directed.
 - Store N95 in labelled bag to prevent damage and contamination.

3M 1860S (small) → #24815	3M 1860 (regular) → #21723	
Honeywell DC365 (reg) → #175175	Honeywell DC365S → #186643	
Moldex1510 series → XS-51154, S-26414, M-24616, L-26415		

 Powered Air Purifying Respirators (PAPR) are available to bearded staff (with medical or religious approval from HR) for certain tasks. PAPRs are available from EH&S. Call 4-6783 during day or Security during off hours 4-2825.

Employee Injury/Illness Notification & Incident Investigation

- When injured or ill on the job, notify your supervisor. If necessary, get medical attention at Employee Health & Wellness. Go to the Emergency Department off-hours of for severe injuries.
- Employee Injury/Illness Report must be completed within 24 hours and faxed to 631-706-4230 (Hospital) or 631-632-2417 (Research Foundation).
- Employee, supervisor, witness, and medical provider must complete report sections. Employee keeps original, Supervisor keeps a copy. Complete a Sharps Injury Log if applicable. Supervisors should complete an Incident Investigation Report which includes root causes and corrective actions. All forms are available on ThePulse.
- Call the NYS Accident Reporting System (ARS) at 888-800-0029.
- Ensure medical provider accepts Workers' Compensation prior to a visit and inform the provider that
 the injury is work-related. Employee must notify their supervisor of time off due to injury/illness and
 provide medical documentation from their private physician to Timekeeping.

Timekeeping: 4-4377	Environmental Health & Safety: 4-6783
Employee Health & Wellness: 4-7767	Accident Reporting System: 888-800-0029

OSHA[®]QUICK

Hazard Communication Standard Pictogram

The Hazard Communication Standard (HCS) requires pictograms on labels to alert users of the chemical hazards to which they may be exposed. Each pictogram consists of a symbol on a white background framed within a red border and represents a distinct hazard(s). The pictogram on the label is determined by the chemical hazard classification.

HCS Pictograms and Hazards







Hazard Communication Safety Data Sheets

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

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

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

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

Section 4, First-aid measures includes important symptoms/effects, acute, delayed; required treatment.

Section 5, Fire-fighting measures lists suitable extinguishing techniques, equipment; chemical hazards from fire.

Section 6, Accidental release measures lists emergency procedures; protective equipment; proper methods of containment and cleanup.

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

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OSHA CARD

Hazard Communication Safety Data Sheets

Section 8, Exposure controls/personal protection lists OSHA's Permissible Exposure Limits (PELs); ACGIH Threshold Limit Values (TLVs); and any other exposure limit used or recommended by the chemical manufacturer, importer, or employer preparing the SDS where available as well as appropriate engineering 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 12. Ecological information

Section 13, Disposal considerations* Section 14, Transport information*

Section 15, Regulatory 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.

For more information



SHA® Occupational
Safety and Health
Administration



Pictograma para la norma sobre la comunicación de peligros

La norma de comunicación de peligros (HCS, por sus siglas en inglés) exige pictogramas en las etiquetas para siglas en ingles) exige piccogramas en las etiquetas para advertir a los usuarios de los peligros químicos a los que puedan estar expuestos. Cada pictograma representa un peligro definido y consiste en un símbolo sobre un fondo blanco enmarcado con un borde rojo. La clasificación del peligro químico determina el pictograma que

Pictogramas y peligros según la HCS





* DATOS RÁPIDOS

Fichas de datos de seguridad para la comunicación de peligros

La norma de comunicación de peligros (HCS, por sus siglas La norma de comunicación de peligros (HCS, por sus sigle en inglés) exige que los fabricantes, distribuidores o importadores de productos químicos proporcionen fichas de datos de seguridad (FDS) (conocidas anteriormente como hojas de información sobre la seguridad de los materiales o MSDS) para comunicar los peligros de los productos químicos peligrosos. A partir del 1.º de junio de 2015, la HCS exigirá que las nuevas FDS sigan un formato uniforme e incluyan los números de sección, los encabezados y la información pertinente bajo los encabezados siguientes:

Sección 1, Identificación del producto, incluye el identificador del producto; nombre, dirección y número de teléfono del fabricante o distribuidor: número de teléfono de emergencia; uso recomendado; y restricciones del uso

Sección 2, Identificación del peligro o peligros, describe todos los peligros relacionados con el producto químico y los elementos obligatorios de la etiqueta.

Sección 3, Composición/información sobre los componentes, incluye los datos acerca de ingredientes químicos y las declaraciones de secretos de fabricación.

Sección 4. Primeros auxilios, describe los síntomas o efectos agudos inmediatos y retardados importantes; y el tratamiento necesario.

Sección 5, Medidas de lucha contra incendios, enumera los medios y los equipos protectores adecuados para la extinción de incendios, y los peligros específicos de los productos químicos debidos al fuego.

Sección 6, Medidas que deben tomarse en caso de vertido accidental, menciona los procedimientos de emergencia, equipos protectores y métodos correctos para aislamiento y limpieza.

(Continúa al reverso)



Departamento de Trabajo de los EE. UU. www.osha.gov (800) 321-OSHA (6742)

A[®]DATOS RÁPIDOS

Fichas de datos de seguridad para la comunicación de peligros

Sección 7, Manipulación y almacenamiento, describe las precauciones para manipular y almacenar con seguridad los materiales, entre otras, las incompatibilidades.

Sección 8, Controles de exposición/proteción personal, enumera los límites de exposición permisibles (PEL) de la OSHA, valores límite umbrales (TLV), controles de ingeniería apropiados, y equipos de protección personal (EPP).

Sección 9, Propiedades físicas y químicas, menciona las características del producto químico.

Sección 10, Estabilidad y reactividad, describe la estabilidad química y la posibilidad de reacciones peligrosas.

Sección 11, Información toxicológica, enumera las vías de exposición, los síntomas y efectos agudos y crónicos relacionados, y las medidas numéricas de la toxicidad.

Sección 12. Información ecotoxicológica* Sección 12, Información relativa a la eliminación de los productos* Sección 14, Información relativa al transporte* Sección 15, Información sobre la reglamentación*

Sección 16, Otras informaciones, incluye la fecha de preparación o de la última modificación.

*Nota: debido a que otros organismos regulan esta información, la OSHA no exigirá el cumplimiento de las secciones 12 a 15 (norma 29 CFR 1910.1200(g)(2)).

Los empleadores deben comprobar que los empleados tengan acceso fácil a las FDS. Consultar la descripción detallada del contenido de las FDS en el Apéndice D de la norma 29 CFR 1910.1200.

Para más información:



Departamento de Trabajo de los EE. UU. www.osha.gov (800) 321-OSHA (6742)

Emergency Phone Number: Fire/Smoke: Call 911

For a Code Red incident (fire and/or visible smoke): Call 911 and activate fire alarm by pulling manual station

If you have any Fire Safety questions, contact EH&S at 4-6783

RACE Procedures:

- Remove
- Alarm
- Confine
- Extinguish or Evacuate

<u>Fire Extinguisher Procedures</u> (PASS):

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

Fire Code Phrases:

Code Red: Fire/Smoke Emergency Over: All Clear

The Hospital Fire Safety group is responsible for the fire and life safety environment of care. The Fire Safety Program at the hospital is designed as a prevention program, and should that fail, ensures the facility and staff can handle any initial fire condition. 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, detection, and correction of potential hazards.

ADDITIONAL SERVICES OFFERED BY THE FIRE SAFETY GROUP:

- Fire Warden Training: A key element of the hospital's fire safety plan is fire wardens that coordinate evacuations in the event of a fire. Each area is required to have enough fire wardens for each shift to ensure at least one fire warden on duty.
- Fire Extinguisher Training: Small, incipient fires can usually be readily extinguished by staff with fire extinguishers that are located throughout the facility. Knowing not only the locations of extinguishers, but also how to use them is vitally important. The fire marshals have a burn simulator that supervisors can arrange to have their employees trained on, giving valuable hands-on live extinguisher training.
- > Site-Specific Fire Safety Training
- Fire Evacuation Plans



SECURITY MANAGEMENT

The Public Safety Department is responsible for providing and maintaining a safe and secure hospital environment.



The Public Safety Department consists of Public Safety Officers and armed sworn Police Officers who respond to calls for service and emergencies in the Hospital.

The Public Safety Office main number is (631) 444-2825.

In the *Event of an Emergency*, Dial 911 from any Hospital phone. If you are using a mobile phone dial (631) 632-3333.

- What to do in an Active Shooter event?
 Always know your exits. Utilize the Run, Hide and Fight principles. Shelter in place when it is not safe to exit. When safe to do so, help others and call University Police at 631-632-3333.
- I have a security concern who do I call?
 Contact a Public Safety Supervisor at 631-444-2825.



- How to I report suspicious activity? Report suspicious individuals or issues in real-time so that
 individuals can be confronted immediately instead of after the fact. Call University Police at 631-6323333.
- 4. How do I get card access to doors? The employee's supervisor must email_ <u>Christopher.Seidensticker@stonybrookmedicine.edu</u> with the name, ID number and access required.
- How do I install the SBU Guardian Safety App? Go to_ https://www.stonybrook.edu/commcms/emergency/alerts/guardian.html
- 6. **Do you have a lost and found?** Yes, it is in the Public Safety Office located in the HSC Library on Level 3. Room 148.
- 7. **How do I get an escort to my car?** Call the Public Safety Office and we will dispatch an officer to escort you.



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 OR 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 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 INSPECTION STICKER - Enter a BME Service Request if you find a device with an expired BME inspection sticker.

BME Inspected by: SJB Annual Due: 06/30/2021

BME Inspected by: SJB Semi-annual Due: 12/31/2020 BME Scheduled Inspection NOT Required

Procedure for entering a BME Service Request:

- Go to the Stony Brook Medicine Home Page, "*ThePulse*."
- Under "Quick Links," click "Support Requests" then click "BME Requests."
- 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

BME Number*:	
Department*:	
Requester Name*:	
Requester Phone*:	
Problem Description*:	~
Priority*:	
Requester Remarks:	
*These fields are required.	

UTILITIES MANAGEMENT

Mission Statement: To provide a safe, consistent, and comfortable environment for Stony Brook University Hospital's patients, staff, employees and visitors through continuous evaluation, improvement, and maintenance of utility systems.

Facilities and Plant Operations provides the following maintenance services: Heating, Ventilation & Air Conditioning (HVAC), Electric, Plumbing, General Building Maintenance, Lock & Key Control, Elevators and Automatic Doors.

Type of Service	Scope of Service:	Contact:
Emergency Services	24 hours a day, 7 days a week	4-2400
Routine Non-Emergencies	Non-Emergency Work Order Request	Customer completes a Maintenance Work Order Request on the hospital intranet (under "Support/Requests").

Equipment in the following areas are serviced by Emergency Power and Uninterruptible Power Supply (UPS battery backup):

 Delivery Rooms, Operating Rooms, Emergency Rooms, PACU, Newborn Nurseries and ICUs.

All red outlets are supplied with Emergency Power.

type of emergency	inadditiontocallingplantoperations(4-2400), do the following:
loss of power	all critical equipment should be connected to emergency power via the red outlets.
people stuck in	contactuniversitypolice(911fromcampusphoneor
elevator	631-632-3333 from cell phone)
automatic doors not working	contact plant operations (4-2400)
medical gas emergencies	contact respiratory care (4-2390)
ceiling leaks and overflowing sinks	contact hospital custodial services (4-1455)

Failure of:	What to Expect:	Who to Contact:	Responsibility of User:
Computer Systems	Systems Down	Information Technology (4-HELP)	Use backup manual/paper systems
Electrical power failure with emergency generators working	Many lights are out; red plug outlets working	Plant Operations (4-2400)	Ensure life support systems are on emergency power (red outlets). Ventilate patients by hand if necessary. Complete cases in progress ASAP. Use flashlights.
Electrical power failure—Total	Failure of all electrical systems	Plant Operations (4-2400), Respiratory Care, 8 AM- 5 PM (4-2390) Off hours: request on call Respiratory Care supervisors from Switchboard ("0" or 4-1077)	Utilize flashlights and lanterns, hand ventilate patients, manually regulate IVs, do not start new cases.
Elevators out of service	All vertical movement will be by stairwells.	Plant Operations (4-2400)	Review fire and evacuation plans. Establish services on lower floors. Use carry teams to move critical patients and equipment to other floors.
Elevator stopped between floors	Elevator alarm bell sounding	Plant Operations (4-2400), University Police (911 from campus phone or 631-632-3333 from cell phone)	Keep verbal contact with personnel entrapped in elevator and let them know that help is on the way.
Fire protection systems	No fire alarms or sprinklers	Plant Operations (4-2400), University Police (911 from campus phone or 631-632-3333 from cell phone)	Institute fire watch. Minimize fire hazards. Use phone to report fire.
Medical Gases	Gas alarms, no oxygen or medical air or nitrous oxide.	Plant Operations (4-2400), Respiratory Care, 8 AM- 5 PM (4-2390) Off hours: request on call Respiratory Care supervisors from Switchboard: 0" or 4-1077	Hand ventilate patients; transfer patients if necessary; use portable oxygen, and other gases. Call for additional portable cylinders.
Medical Vacuum	No vacuum; vacuum systems fail and in alarm mode.	Plant Operations (4-2400)	Call for portable vacuum. Obtain portable vacuum from crash cart. Finish cases in progress and do not start new cases.
Natural gas, failure, or leak	Odor, no flames on burner, etc.	Plant Operations (4-2400), Food Services (4-8083), University Police (911 from campus phone or 631-632-3333 from cell	Open windows if possible. Turn off gas equipment; do not use any spark producing devices, electric motors, switches, etc. Institute cold meal policy.
Nurse call system	No patient contact	Plant Operations (4-2400)	Use bedside patient telephone if possible. Move patients; use bells; detail a rover to check patients.
Patient Care, Medical Equipment	Equipment/system does not operate properly	Biomed Eng 4-HELP or 4-1420	Replace and tag defective equipment.
Sewer Stoppage	Drains backing up	Plant Operations (4-2400)	Do not flush toilets. Do not use water.
Steam Failure	Sterilizers inoperative, limited cooking. No heat/hot water.	Plant Operations (4-2400), Central Sterile Supply (4- 2380), Food Services (4- 8083)	Conserve sterile materials and linen; provide extra blankets; institute cold meal policy.
Telephones	No phone service	Switchboard ("0" or 4-1077)	Use overhead paging and pay phones. Use runners.
Water	Sinks and toilets inoperative.; Sprinkler system inoperative	Plant Operations (4-2400)	Conserve water. Use bottled water for drinking. Be sure to turn off water in sinks. Use red bag in toilet.
Water Non-potable	Tap water unsafe to drink	Plant Operations (4-2400), Food Services (4-8083)	Place "Non-potable water—Do Not Drink" signs at all drinking fountains, bottle-less water coolers and wash basins.
Ventilation	No ventilation; no heating or cooling	Plant Operations (4-2400)	If possible, open windows. Obtain blankets if needed. Restrict use of odorous/hazardous materials.



HAZARDOUS MATERIALS AND WASTE MANAGEMENT

Batteries (Alkaline)	Alkaline batteries can be disposed in regular trash, but recycling is encouraged. Recycling containers are available.	Hospital Recycling, 4-1462
Batteries (Non-Alkaline/ Rechargeable)	Ni-Cd, Ni-MH, Hg, Pb, Li-ion and lead acid batteries cannot be disposed in regular trash.	Hospital Recycling, 4-1462
Bulbs	Used bulbs cannot be disposed in regular trash.	Plant Operations, 4-2400
Cans and Bottles	Bottles and cans are currently being collected in select patient areas for recycling.	Hospital Recycling, 4-1462
Cardboard	Flattened cardboard boxes are collected in UH by Hospital Custodial Services. Hospital Recycling collects cardboard from ASC, ACP & Tech Park.	Hospital Custodial Services, 4-1455 Hospital Recycling, 4-1462
Chemical Waste	Follow the chemical waste determination for proper disposal. Refer to EC0045, Hazardous Chemical Waste Management.	EH&S, 4-6783
Cylinders (gas)	For gas cylinder return, contact Receiving or supplier.	Pickup of empty or extra oxygen tanks: • M-F 8 AM-4:30 PM, call 5-8915 or 4-5498 (Receiving) • M-F 4:30 PM-8 AM & weekends & holidays, call 4-2980 (Distribution Services)
Electronic Equipment (computers, printers, monitors, TVs, cell phones)	Remove data from electronic equipment; for assistance call 4-HELP. Complete Property Control form "Report of Surplus Property" (SUSB0591).	1.Tape Property Control form on item. 2.Contact Recycling, 4-1462, for pickup.
Paper	Place waste paper in proper recycling containers or confidential bins.	Recycling, 4-1462 (7AM-2:30 PM) Off hours: Distribution Services, 4-2980
Pest Management	Hospital, MART, Pavilion ACP Ambulatory Surgery Center	Hospital Custodial Services, 4-1455 ACP Support Services, 8-0923 Environmental Services 4-9681
Pharmaceutical (Medication) Waste	Used or expired medication Trace chemo-yellow bags/yellow sharps One- or 3-gallon controlled substance container Two- or 8-gallon black container Propofol/epinephrine/integrilin/ nitroglycerin in locked container	 Return to Pharmacy bin, 4-2680 Hospital Custodial Services, 4-1455 Stericycle, page 631-262-4417 (off hours Pharmacy, 4-2680) EH&S, 4-6783 Hospital Custodial Services, 4-1455
Radioactive Material/Lasers	EH&S Radiation Safety manages program.	Radiation Safety, 8-2356, 4-3196 or 4-3659
Refrigerator, Freezers, Air Conditioners	Refrigerant and hazardous materials must be removed by Plant Operations prior to disposal.	Contact Plant Operations, 4-2400, to remove refrigerant. Complete Property Control form "Report of Surplus Property" and attach. Call Recycling, 4-1462 for pickup.
Regulated Medical Waste (RMW) or Red Bag Waste	Hospital Custodial Services manages red bag (RMW) waste and sharps containers.	Hospital Custodial Services, 4-1455
Scrap Metal	Scrap metal can be picked up from area/ unit.	Hospital Recycling, 4-1462
Toner/ Printer Cartridges	Toner can be picked up from your area/ unit or placed in drop off locations.	Hospital Recycling, 4-1462
Used Oil	Place in a covered container and affix "Used Oil" label available from EH&S.	EH&S, 4-6783

RADIATION SAFETY



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 Safety 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. Radiation Safety provides services to medical operations and staff to ensure that radiation expo- sure is maintained As Low As Reasonably Achievable (ALARA).

Services and products offered by Radiation Safety

- 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 (dosimeters)
- Supporting departments for all uses of radiation in diagnosis and therapy
- Providing radiation survey instrument calibration service
- Administering the lead apron inspection program
- Emergency / radioactive spill response
- Managing of Low-Level Radioactive Waste
- Providing non-ionizing radiation safety (RF, EMF & ELF) support

Radiation Safety Tips

- Be aware of radiation safety signage and do not enter posted areas without authorization from area manager/supervisor or Radiation Safety.
- Working in a radiological controlled area requires radiation safety training. Call Radiation Safety 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.
- If wearing lead aprons/shields as PPE, before use inspect for damage and annual inspection.

UH Radiation Safety Contacts:

Associate Radiation Safety Officer - University Hospital 8-2356 / 631-258-1244

Radiation Safety Associate 4-3196

University Radiation Safety Officer 2-9676



CHEMICAL SPILL RESPONSE PROCEDURES

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 University Police at 911 (cell: 631-632-3333). Minor Spill Response 	 More than 1 gallon of chemical or More than 50 cc/ml of a hazardous drug or Unknown hazardous chemical spill, any quantity Major Spill Response
	<u> </u>
 Notify coworkers and evacuate necessary persons to a safe area. Secure area by restricting access and posting signs. 	 Notify coworkers and have area evacuated. Secure area by restricting access and posting signs.
3. Remove any potential ignition sources and unplug nearby electrical equipment, if feasible.	3. If possible, trained staff can use a spill kit/absorbent material to initially contain the spill prior to evacuation. Do not attempt to
 Review safety information on spilled chemical, including the Safety Data Sheet (SDS) and product label. 	clean up a major spill. 4. Contact University Police at 911 (cell: 631-632-3333) and give details of spill including
Locate appropriate spill kit and review spill kit instructions.	specific location, chemical, quantity, and if anyone is injured.
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.	 5. In case of an injury or chemical contamination: 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
7. Confine and contain spill. Cover spill with appropriate absorbent material.	eyewash. Flush affected areas using eyewash or emergency shower, if available,
8. Clean up spill using a scoop or other suitable item and place material in appropriate disposal container.	with copious amounts of water for 15 minutes. d. If first aid trained, administer first aid as
 Decontaminate spill surface with hospital approved disinfectant (HAD), as appropriate. Note: for Hazardous Drug spill use HD Clean wipes instead of HAD. 	appropriate. Assist person to Employee Health & Wellness or Emergency Department (after hours) for treatment.
 Carefully remove PPE, place non-reusable items in disposal container and thoroughly wash hands. Contact EH&S at 4-6783 for proper waste disposal. 	If possible, bring SDS or product label.6. University Police contact EH&S Fire Marshals for spill response.
11. Investigate cause of spill. Document spill, response, and corrective action with staff.	7. Staff knowledgeable about the spill provides responders with all pertinent
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 EH&S.	information and SDS. 8. The responders or designee informs staff when it is safe to re-enter spill area. Revised 7/31/17
LIIWA.	1101000 / 11111

Radiological Incident Response

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 911 (cell phone: 631-632-3333) and have them contact the assigned staff from Radiation Safety.
- If you must leave the area, remove your shoes if you suspect contamination and do not touch anything if possible.

NON-EXTREME HAZARDS: Spills or suspected spills of radioactive materials where materials 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 by contacting Plant Operations at 4-2400.
- 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 soapand warm water (be especially thorough in flushing out wounds).
- c. If thorough washing with soap does not remove contamination from the body, call Radiation Safety at 631-632-6410 during normal business hours or 911 off hours.

3) Decontaminate or Leave to Decay

- a. Trained staff should decontamination area remembering that decaying to background may be the best option. If assistance is needed, contact Radiation Safety at 631-632-6410 during normal business hours or 911 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 Radiation Safety 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 gown/lab coat are 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 Hospital Custodial Services staff using the hospital approved disinfectant (HAD).
- c. The used microfiber mop head is removed and placed in a plastic liner for laundering.
- 2. Non-patient care areas/Laboratories: Affected area staff covers the spill with absorbent material to contain spill and Hospital Custodial Services staff performs spill cleanup using the HAD, excluding lab equipment. Laboratory staff is responsible for decontaminating any affected lab equipment using the HAD.

9/2020

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CLEAR EGRESS CONTACT INFORMATION

EQUIPMENT/MATERIALS	CONTACT US
Beds/Stretchers	Request a pick-up through Capacity Management or call Distribution Services 4-2980
Commodes	Request a pick-up through Capacity Management or call Distribution Services 4-2980
Dietary Carts	For pick-up or issues call Dietary supervisors 4-8083
Gas Cylinders	Pick-up of empty or extra oxygen tanks: • M-F 8AM-4:30PM, call 5-8915 or 4-5498 (Receiving) • M-F 4:30PM-8AM & weekends, call 4-2980 (Distribution Services)
Linen Carts	Call Linen 4-1462 if the cart is no longer needed on the unit
Physical Therapy (PT) Stairs	Any concerns or inappropriate placement of stairs, call PT at 4-2620
Pumps	Request a pick-up through Capacity Management or call Distribution Services 4-2980
RIC/Patient Management Carts	For repair or adjustments, contact 4-HELP
Skids	Call Receiving 4-5498 Monday thru Friday for pick-up
Wheelchairs	Request a pick-up through Capacity Management or call Distribution Services 4-2980



CLEAR EGRESS

1) <u>Dietary Carts Do Not Fly Solo</u>: The Food Service Ambassador for each floor coordinates dietary cart pick-up with the Food Service elevator operator. The Ambassador contacts the operator and waits with the dirty cart being returned. Additionally, the elevator operator rounds on all floors checking the elevator lobbies continuously and additional assistance from supplemental Food Service staff checking the floors. For hot food deliveries, the Ambassador receives a phone call that the hot food is on its way up and they meet the elevator operator to reduce hallway time.

2) Physical Therapy Stairs Have a Parking Space on the Units:

- MRN stairs stored near the entrance to EEG
- 12S stairs stored in the lounge
- 8N, 9N, 15N, 15S, 16S and 18N stairs stored in the alcoves
 - If stairs are moved from their alcove storage space for a patient, an alternative storage space is utilized.
- Level 5 near CACU stairs stored in the area by the door to the mechanical room
- Level 4 stairs stored next to staff lounge in Pre-Surgical Admissions
- 3) No Skid Left Behind: Deliveries using skids are not made unless absolutely necessary. When deliveries are made that require skids to be left behind, staff return to pick them up. Call Receiving at 4-5498 Monday thru Friday for pickup.
- **4)** Keep Linen in its Place: Small Rubbermaid linen carts replaced some of the large metal racks. Linen carts are not to be stored in hallways.
- **5)** Recycling is a "Good Thing": We need your broken items so please do not abandon in the hallway. Call the Recycling Department at 4-1462 for assistance. Recycling takes broken hampers, HIPAA bins, unwanted or broken furniture, chairs, and file cabinets.
- 6) <u>Clear the Deck</u>: Administrators, Managers and Directors located on Level 1 rotate responsibility weekly to ensure clear egress through coordination of efforts and rounding. This process focuses on eliminating excessive boxes, skids, and other stored items from blocking hallways on Level 1 and the loading dock.
- 7) Reducing the Hallway Patient "Carbon Footprint": Designated hallway areas are setup when the unit receives notification of a hallway patient being received to the unit. Once the patient is removed from the hallway location, all the equipment including the privacy curtains, chairs and other medical equipment are removed immediately.



Air Pressure Monitors Fact Sheet

Monitor Type

Price Room Monitor Deluxe (Model PMX-RPI-KP-RPS1-BAC)



How to Use

- 1. Close door(s) leading into room.
- Observe monitor. If green light is on, the pressure level is acceptable.
- 3. If red light flashes, notify your supervisor, Plant Operations at 4-2400, and Healthcare Epidemiology at 4-7430.
- 4. Room cannot be used as a pressure-required room until corrective measures are completed.
- 5. Once corrective measures are completed, observe monitor to confirm pressure is acceptable.

Placing Monitor in Unoccupied or Occupied Room Mode:

- 1. Press Enter/Menu button. "Occ. Passcode:" is displayed.
- Using up/down arrows, enter Down/Up/Up/Down.
- 3. Select either Occupied (alarms active) or Unoccupied (alarms disabled) using arrow.
- 4. Press Enter/Menu to save and exit. Note: If Unoccupied selected, blue light will be lit.

TSI Pressura Room Pressure Monitor (Model 8630SM)



- 1. Close door(s) leading into room.
- Observe monitor. If green light is on, the pressure level is acceptable.
- 3. If red light is on, notify your supervisor, Plant Operations at 4-2400, and Healthcare Epidemiology at 4-7430.
- 4. Room cannot be used as a pressure-required room until corrective measures are completed.
- 5. Once corrective measures are completed, observe monitor to confirm pressure is acceptable.

Placing Monitor in Unoccupied or Occupied Room Mode (for monitor with a key switch):

- 1. Turn key switch to Neg (Occupied) or Neutral (Unoccupied) position.
- 2. Key is available at Nurses' station. After hours, call Nursing Office for a key.
- 3. For replacement key, contact Plant Operations at 4-2400.

Monitor Type

Setra/Phoenix Controls Room Condition Monitor (Model SRCM) MART Cancer Center and Pavilion





For additional information, refer to Admin Policy & Procedure EC0063 Management of Air Pressure.

How to Use

- 1. Close door(s) leading into room.
- 2. Observe monitor. If green "NORMAL" is dis- played, the pressure level is acceptable.
- 3. If <u>yellow "DOOR"</u> is displayed, recheck that all doors are closed fully.
- 4. If red "ALARM" is flashing, notify your supervisor, Plant Operations at 4-2400, and Healthcare Epidemiology at 4-7430.
- Room cannot be used as a pressurerequired room until corrective measures are completed.
- 6. Once corrective measures are completed, observe monitor to confirm pressure is acceptable.
- 7. When room pressure requirement is not needed, change monitor status to Standby mode. On the touch screen, press on the word NEGATIVE or POSITIVE. Then, press the blue "Change ->" button to change setting to "Standby."





8. When room pressure requirement is needed, change monitor status back to Active mode by touching the word STANDBY. Then press the blue "Change ->" button to change setting to "Active."

Revised 12/23/2020