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

REVISED 9/2020
Injury & Illness Prevention — Be Aware & Care

- **If you see something, say something.** Report unsafe conditions to your supervisor, University Police (911/cell: 631-632-3333) or EH&S (4-6783).
- **Be alert** to your surroundings. **Avoid rushing.**
- If you see a wet floor or lose wires, take immediate action to prevent slip/trip injuries.
- **Follow work procedures and policies.** If you are unfamiliar with a procedure, request training.
- 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.
- **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.
- Know **location of your department’s emergency equipment** (i.e., eyewash, spill kit).

N95 & PAPR Respirator Information

- Prior to being issued a respirator you must be medically cleared, and trained and fit tested.
- Only wear the respirator make/model/size you were fitted with.
- Fit testing and training are required annually for staff in Respiratory Protection Program.
- Before each use: inspect your respirator; mold metal nosepiece (if present) to nose; ensure straps are not twisted or crisscrossed; conduct user seal check.
- Discard N95 respirator when soiled or damaged. Reuse as directed.
- Store N95 in labelled bag to prevent damage and contamination.
- Powered Air Purifying Respirators (PAPR) are available to bearded staff with medical or religious approval from Human Resources.
- PAPRs are available from EH&S. Call 4-6783 during day or Security off hours 4-2825.

Order N95 Respirators through Lawson:
- 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

Employee Injury/Illness Notification & Incident Investigation

- When injured or ill on the job, notify your supervisor or designee.
- If medical attention is needed, go to Employee Health & Wellness. If life threatening injury or off-hours, go to the Emergency Department.
- Employee Injury/Illness Report must be completed within 24 hours and faxed to 631-706-4230 (Hospital staff) or 631-632-2417 (Research Foundation). Employee, supervisor, witness and medical provider must complete their report sections. Employee keeps original injury report and Supervisor keeps a copy. Complete a Sharps Injury Log if applicable.
- 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.
- Supervisors should complete an Incident Investigation Report which includes identifying immediate and root causes, and corrective actions. All forms are available on ThePulse.
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. As of June 1, 2015, the HCS will require 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 claims.

**Section 4, First-aid measures** includes important symptoms/effects, acute and chronic effects; numerical measures of toxicity.

**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. (Continued on other side)

**Section 8, Exposure controls/personal protection** lists OSHA’s Permissible Exposure Limits (PELs); Threshold Limit Values (TLVs); 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.

As of June 1, 2015, the Hazard Communication Standard (HCS) will require 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

<table>
<thead>
<tr>
<th>Health Hazard</th>
<th>Flame</th>
<th>Exclamation Mark</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carcinogen</td>
<td>Flammables</td>
<td>Irritant (skin and eye)</td>
</tr>
<tr>
<td>Mutagenicity</td>
<td>Pyrophorics</td>
<td>Skin Sensitizer</td>
</tr>
<tr>
<td>Reproductive Toxicity</td>
<td>Self-Heating</td>
<td>Acute Toxicity (harmful)</td>
</tr>
<tr>
<td>Respiratory Sensitizer</td>
<td>Emits Flammable Gas</td>
<td>Narcotic Effects</td>
</tr>
<tr>
<td>Target Organ Toxicity</td>
<td>Self-Reactives</td>
<td>Respiratory Tract Irritant</td>
</tr>
<tr>
<td>Aspiration Toxicity</td>
<td>Organic Peroxides</td>
<td>Hazardous to Ozone Layer (Non-Mandatory)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Gas Cylinder</th>
<th>Corrosion</th>
<th>Exploding Bomb</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gases Under Pressure</td>
<td>Skin Corrosion/ Burns</td>
<td>Explosives</td>
</tr>
<tr>
<td>Eye Damage</td>
<td>Corrosive to Metals</td>
<td>Self-Reactives</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Flame Over Circle</th>
<th>Environment</th>
<th>Skull and Crossbones</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oxidizers</td>
<td>Aquatic Toxicity</td>
<td>Acute Toxicity (fatal or toxic)</td>
</tr>
</tbody>
</table>
OSHA has updated the requirements for labeling of hazardous chemicals under its Hazard Communication Standard (HCS). As of June 1, 2015, all labels will be required to have pictograms, a signal word, hazard and precautionary statements, the product identifier, and supplier identification. A sample revised HCS label, identifying the required label elements, is shown on the right. Supplemental information can also be provided on the label as needed.

For more information:
OSHA Occupational Safety and Health Administration (800) 321-OSHA (6742) www.osha.gov

OSHA DATOS RÁPIDOS

Etiquetas para la norma sobre la comunicación de peligros

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

Para más información:
OSHA Administración de Seguridad y Salud Ocupacional (800) 321-OSHA (6742) www.osha.gov
The Hospital Fire Safety group is responsible for the fire and life safety environment of care for the hospital, Ambulatory Care Pavilion, and Ambulatory Surgery Center. The Fire Safety Program at the hospital is designed as a prevention program, and should that fail, ensures the facility and staff is capable of handling any 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.

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 a sufficient number of fire wardens for each shift to ensure at least one fire warden on duty. Training is provided by our fire marshals.

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: Our Right to Know training contains general fire safety information. Knowing specific actions to take for a fire in your unit can include a more in-depth understanding of your areas fire zone layout and other fire protection features. These site-specific fire safety classes can be provided on an as-needed basis.

Fire Evacuation Plans: Hand-in-hand with site specific fire evacuation, is having a fire evacuation plan drawing for each unit. Since the majority of the hospital’s population will not evacuate to the outside, knowing where the evacuation zones, or adjacent areas of refuge, are located is important. These drawings are posted in each unit and will indicate the fire barriers and areas of refuge to move patients while the fire is being extinguished. It is the responsibility of staff to be knowledgeable of the plan’s content.

EMERGENCY PHONE NUMBERS:
Fire/Smoke (Hospital): Call 911
Fire/Smoke (ASC/ACP): 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

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
Emergency Over: All Clear
Providing and maintaining a safe and secure hospital environment is the work of the University Police Department and Public Safety Staff.

The University Police Department offers many services to Stony Brook University Hospital through the presence of Police Officers and the Public Safety Staff in and around the Hospital and Health Science Center. The Public Safety Office can be reached at 4-2825 on-campus or (631) 444-2825 off-campus.

In the Event of an Emergency, Dial 911 from any Hospital or Campus phone. If you are using a non-campus phone or need to reach University Police from off-campus, dial (631) 632-3333.

Services offered include:

1. Access control of patients, visitors, guests and vendors
2. Assist staff with handling unruly or disruptive individuals
3. Crime prevention
4. Escort to and from parking areas (Call University Police at 911.)
5. Foot and motor patrol of the campus
6. Identify, report and follow-up on potential safety and security hazards
7. Lost and found
8. New staff orientation
9. Police response to criminal activity and investigation
10. Respond to incidents

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

1. Display your University ID, above your waist, at all times while within Stony Brook University Hospital or Health Science Center.
2. Report unauthorized visitors and guests to University Police (911).
3. Report any security issues or potential hazards to Public Safety staff immediately through University Police (911).
4. Secure all valuables when leaving your office or work area.
5. Comply with directives given by University Police Officers, Public Safety and Hospital Administration.

“Service is our Business”
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.
- 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 LOOK FOR:**

- **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.

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.
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.

<table>
<thead>
<tr>
<th>Type of Service</th>
<th>Scope of Service:</th>
<th>Contact:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Services</td>
<td>24 hours a day, 7 days a week</td>
<td>4-2400</td>
</tr>
<tr>
<td>Routine Non-Emergencies</td>
<td>Non-Emergency Work Order Request</td>
<td>Customer completes a Non-Emergency Work Order Request on the hospital intranet (under “Support/Requests”).</td>
</tr>
</tbody>
</table>

**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.**

<table>
<thead>
<tr>
<th>Type of Emergency</th>
<th>In Addition to Calling Plant Operations (4-2400), Do the Following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Loss of Power</td>
<td>All critical equipment should be connected to emergency power via the red outlets.</td>
</tr>
<tr>
<td>People Stuck in Elevator</td>
<td>Contact University Police (911 from campus phone or 631-632-3333 from cell phone)</td>
</tr>
<tr>
<td>Automatic Doors Not Working</td>
<td>Contact Plant Operations (4-2400)</td>
</tr>
<tr>
<td>Medical Gas Emergencies</td>
<td>Contact Respiratory Care (4-2390)</td>
</tr>
<tr>
<td>Ceiling Leaks and Overflowing Sinks</td>
<td>Contact Hospital Custodial Services (4-1455)</td>
</tr>
<tr>
<td>Failure of:</td>
<td>What to Expect:</td>
</tr>
<tr>
<td>------------------------------------------------</td>
<td>-----------------------------------------------------</td>
</tr>
<tr>
<td>Computer Systems</td>
<td>Systems Down</td>
</tr>
<tr>
<td>Electrical power failure with emergency generators working</td>
<td>Many lights are out; red plug outlets working</td>
</tr>
<tr>
<td>Electrical power failure—Total</td>
<td>Failure of all electrical systems</td>
</tr>
<tr>
<td>Elevators out of service</td>
<td>All vertical movement will be by stairwells.</td>
</tr>
<tr>
<td>Elevator stopped between floors</td>
<td>Elevator alarm bell sounding</td>
</tr>
<tr>
<td>Fire protection systems</td>
<td>No fire alarms or sprinklers</td>
</tr>
<tr>
<td>Medical Gases</td>
<td>Gas alarms, no oxygen or medical air or nitrous oxide.</td>
</tr>
<tr>
<td>Medical Vacuum</td>
<td>No vacuum; vacuum systems fail and in alarm mode.</td>
</tr>
<tr>
<td>Natural gas, failure or leak</td>
<td>Odor, no flames on burner, etc.</td>
</tr>
<tr>
<td>Nurse call system</td>
<td>No patient contact</td>
</tr>
<tr>
<td>Patient Care, Medical Equipment</td>
<td>Equipment/system does not operate properly</td>
</tr>
<tr>
<td>Sewer Stoppage</td>
<td>Drains backing up</td>
</tr>
<tr>
<td>Steam Failure</td>
<td>Sterilizers inoperative, limited cooking. No heat/hot water.</td>
</tr>
<tr>
<td>Telephones</td>
<td>No phone service</td>
</tr>
<tr>
<td>Water</td>
<td>Sinks and toilets inoperative; Sprinkler system inoperative</td>
</tr>
<tr>
<td>Water Non-potable</td>
<td>Tap water unsafe to drink</td>
</tr>
<tr>
<td>Ventilation</td>
<td>No ventilation; no heating or cooling</td>
</tr>
</tbody>
</table>

9/3/20
<table>
<thead>
<tr>
<th>Material</th>
<th>Description</th>
<th>Contacts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Batteries (Alkaline)</td>
<td>Alkaline batteries can be disposed in regular trash but recycling is encouraged. Recycling containers are available.</td>
<td>Hospital Recycling, 4-1462</td>
</tr>
<tr>
<td>Batteries (Non-Alkaline/ Rechargeable)</td>
<td>Ni-Cd, Ni-MH, Hg, Pb, Li-ion and lead acid batteries cannot be disposed in regular trash.</td>
<td>Hospital Recycling, 4-1462</td>
</tr>
<tr>
<td>Bulbs</td>
<td>Used bulbs cannot be disposed in regular trash.</td>
<td>Plant Operations, 4-2400</td>
</tr>
<tr>
<td>Cans and Bottles</td>
<td>Bottles and cans are currently being collected in select patient areas for recycling.</td>
<td>Hospital Recycling, 4-1462</td>
</tr>
<tr>
<td>Cardboard</td>
<td>Flattened cardboard boxes are collected in UH by Hospital Custodial Services. Hospital Recycling collects cardboard from ASC, ACP &amp; Tech Park.</td>
<td>Hospital Custodial Services, 4-1455</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Hospital Recycling, 4-1462</td>
</tr>
<tr>
<td>Cylinders (gas)</td>
<td>For gas cylinder return, contact Receiving or supplier.</td>
<td>Pickup of empty or extra oxygen tanks:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• M-F 8 AM-4:30 PM, call 5-8915 or 4-5498 (Receiving)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• M-F 4:30 PM-8 AM &amp; weekends &amp; holidays, call 4-2980 (Distribution Services)</td>
</tr>
<tr>
<td>Electronic Equipment</td>
<td>Remove data from electronic equipment; for assistance call 4-HELP. Complete Property Control form “Report of Surplus Property” (SUSB0591).</td>
<td>1. Tape Property Control form on item. 2. Contact Recycling, 4-1462, for pickup.</td>
</tr>
<tr>
<td>Hazardous Chemical Waste</td>
<td>Follow the hazardous waste determination for proper chemical waste disposal. Refer to Admin policy EC0045.</td>
<td>EH&amp;S, 4-6783</td>
</tr>
<tr>
<td>Paper</td>
<td>Place waste paper in proper recycling containers or confidential bins.</td>
<td>Recycling, 4-1462 (7AM-2:30 PM)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Off hours: Distribution Services, 4-2980</td>
</tr>
<tr>
<td>Pest Management</td>
<td>Hospital, MART, Pavilion ACP Ambulatory Surgery Center</td>
<td>Hospital Custodial Services, 4-1455</td>
</tr>
<tr>
<td></td>
<td></td>
<td>ACP Support Services, 8-0923</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Environmental Services 4-9681</td>
</tr>
<tr>
<td>Pharmaceutical (Medication) Waste</td>
<td>Trace chemo-yellow bags/yellow sharps Propofol/epi./integillin/nitroglycerin 1 gallon controlled substances 2 gallon/8 gallon black containers</td>
<td>Hospital Custodial Services, 4-1455</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Hospital Custodial Services, 4-1455 Stericycle, 631-576-7618</td>
</tr>
<tr>
<td></td>
<td></td>
<td>EH&amp;S, 4-6783</td>
</tr>
<tr>
<td>Radioactive Material/Lasers</td>
<td>EH&amp;S Radiation Safety manages program.</td>
<td>Radiation Safety, 8-2356, 4-3196 or 4-3659</td>
</tr>
<tr>
<td>Refrigerator, Freezers, Air Conditioners</td>
<td>Refrigerant and hazardous materials must be removed by Plant Operations prior to disposal.</td>
<td>1. Contact Plant Operations, 4-2400, to remove refrigerant. 2. Complete Property Control form “Report of Surplus Property” and attach. 3. Call Recycling, 4-1462 for pickup.</td>
</tr>
<tr>
<td>Regulated Medical Waste (RMW) or Red Bag Waste</td>
<td>Hospital Custodial Services manages red bag (RMW) waste and sharps containers.</td>
<td>Hospital Custodial Services, 4-1455</td>
</tr>
<tr>
<td>Scrap Metal</td>
<td>Scrap metal can be picked up from area/unit.</td>
<td>Hospital Recycling, 4-1462</td>
</tr>
<tr>
<td>Toner/ Printer Cartridges</td>
<td>Toner can be picked up from your area/unit or placed in drop off locations.</td>
<td>Hospital Recycling, 4-1462</td>
</tr>
<tr>
<td>Used Oil</td>
<td>Place in a covered container and affix “Used Oil” label available from EH&amp;S.</td>
<td>EH&amp;S, 4-6783</td>
</tr>
</tbody>
</table>
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 radiiodine, brachytherapy (radioactive implant) and nuclear medicine patients.

Radiation Safety establishes uniform policies and procedures for the safe 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 exposure 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 / 631-402-2175
- 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
- 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).

## Major Spill - Definition
- More than 1 gallon of chemical or
- More than 50 cc/ml of a hazardous drug or
- Unknown hazardous chemical spill, any quantity

### Minor Spill Response
1. Notify coworkers and evacuate necessary persons to a safe area.
2. Secure area by restricting access and posting signs.
3. Remove any potential ignition sources and unplug nearby electrical equipment, if feasible.
4. Review safety information on spilled chemical, including the Safety Data Sheet (SDS) and product label.
5. Locate appropriate spill kit and review spill kit instructions.
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.
7. Confine and contain spill. Cover spill with appropriate absorbent material.
8. Clean up spill using a scoop or other suitable item and place material in appropriate disposal container.
9. Decontaminate spill surface with hospital approved disinfectant (HAD), as appropriate. *Note: for Hazardous Drug spill use HD Clean wipes instead of HAD.*
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.
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.

### Major Spill Response
1. Notify coworkers and have area evacuated.
2. Secure area by restricting access and posting signs.
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.
4. Contact University Police at 911 (cell: 631-632-3333) and give details of spill including specific location, chemical, quantity, and if anyone is injured.
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 eyewash. Flush affected areas using eyewash or emergency shower, if available, with copious amounts of water for 15 minutes.
   d. If first aid trained, administer first aid as appropriate. Assist person to Employee Health & Wellness or Emergency Department (after hours) for treatment. If possible, bring SDS or product label.
7. Staff knowledgeable about the spill provides responders with all pertinent information and SDS.
8. The responders or designee informs staff when it is safe to re-enter spill area.

*Revised 7/31/17*
Radiological Incident Response

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 911 (cell phone: 631-632-3333) and have them contact the assigned staff from Radiation Safety.
   - 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 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 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 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 maybe 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
<table>
<thead>
<tr>
<th>EQUIPMENT/MATERIALS</th>
<th>CONTACT US</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beds/Stretchers</td>
<td>Request a pick-up through Capacity Management or call Distribution Services 4-2980</td>
</tr>
<tr>
<td>Commodes</td>
<td>Request a pick-up through Capacity Management or call Distribution Services 4-2980</td>
</tr>
<tr>
<td>Dietary Carts</td>
<td>For pick-up or issues call Dietary supervisors 4-8083</td>
</tr>
<tr>
<td>Gas Cylinders</td>
<td>Pick-up of empty or extra oxygen tanks:</td>
</tr>
<tr>
<td></td>
<td>• M-F 8AM-4:30PM, call 5-8915 or 4-5498 (Receiving)</td>
</tr>
<tr>
<td></td>
<td>• M-F 4:30PM-8AM &amp; weekends, call 4-2980 (Distribution Services)</td>
</tr>
<tr>
<td>Linen Carts</td>
<td>Call Linen 4-1462 if the cart is no longer needed on the unit</td>
</tr>
<tr>
<td>Physical Therapy (PT) Stairs</td>
<td>Any concerns or inappropriate placement of stairs, call PT at 4-2620</td>
</tr>
<tr>
<td>Pumps</td>
<td>Request a pick-up through Capacity Management or call Distribution Services 4-2980</td>
</tr>
<tr>
<td>RIC/Patient Management Carts</td>
<td>For repair or adjustments, contact 4-HELP</td>
</tr>
<tr>
<td>Skids</td>
<td>Call Receiving 4-5498 Monday thru Friday for pick-up</td>
</tr>
<tr>
<td>Wheelchairs</td>
<td>Request a pick-up through Capacity Management or call Distribution Services 4-2980</td>
</tr>
</tbody>
</table>
1) **Dietary Carts No Longer Fly Solo:** 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 Find a Parking Space on the Units:**
- On MRN - stairs stored near the entrance to EEG
- On Level 5 near CACU - stairs stored in the area by the door to the mechanical room
- On 12S - stairs stored in the lounge
- On 8N, 9N, 15N, 15S, 16S and 18N - stairs stored in the alcoves
- If the stairs are moved from their storage space in the alcove for a patient, an alternative storage space is utilized.

3) **No Skid Left Behind:** When deliveries are made that require skids to be left behind, staff return to pick them up. Deliveries using skids are not made unless absolutely necessary. Call 4-5498 Monday thru Friday for pickup.

4) **Team Approach Puts Linen in its Place:** Small Rubbermaid carts are replacing the large metal racks. The large racks will be removed from service and the smaller carts will be used to distribute par levels for each room. The small carts are not to be stored in hallways.

5) **Recycling is a “Good Thing”:** We need your broken items so please don’t abandon in the hallway. Pick-up the phone and make the call to the Recycling Department at 4-1462. Recycling takes broken hampers, HIPAA bins, unwanted or broken furniture, chairs and file cabinets.

6) **Clear the Deck:** 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 set-up 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.
<table>
<thead>
<tr>
<th>Monitor Type</th>
<th>How to Use</th>
</tr>
</thead>
</table>
| **Price Room Monitor Deluxe**<br>(Model PMX-RPI-KP-RPS1-BAC)               | 1. Close door(s) leading into room.  
2. 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.  
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**<br>(Model 8630SM)                   | 1. Close door(s) leading into room.  
2. 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.  

## Air Pressure Monitors Fact Sheet

<table>
<thead>
<tr>
<th>Monitor Type</th>
<th>How to Use</th>
</tr>
</thead>
<tbody>
<tr>
<td>Setra/Phoenix Controls Room Condition Monitor (Model SRCM) MART Cancer Center and Pavilion</td>
<td>1. Close door(s) leading into room.</td>
</tr>
<tr>
<td></td>
<td>2. Observe monitor. <strong>If green “NORMAL” is displayed, the pressure level is acceptable.</strong></td>
</tr>
<tr>
<td></td>
<td>3. If yellow “DOOR” is displayed, recheck that all doors are closed fully.</td>
</tr>
<tr>
<td></td>
<td>4. <strong>If red “ALARM” is flashing, notify your supervisor, Plant Operations at 4-2400, and Healthcare Epidemiology at 4-7430.</strong></td>
</tr>
<tr>
<td></td>
<td>5. Room cannot be used as a pressure-required room until corrective measures are completed.</td>
</tr>
<tr>
<td></td>
<td>6. Once corrective measures are completed, observe monitor to confirm pressure is acceptable.</td>
</tr>
</tbody>
</table>

For additional information, refer to Administrative Policy and Procedure, EC0063 Management of Air Pressure.

Revised 1/15/2020