|  |
| --- |
| **Biohazard or Infectious Material Spill Cleanup** |
| **Purpose** | This procedure provides instructions to cleanup a BIOHAZARD or INFECTIOUS MATERIAL SPILL. |
| **Policy Statements** | Children’s Minnesota Laboratory will ensure safe and appropriate containment and cleanup of biohazard and infectious materials while safeguarding the health and safety of laboratory staff. |
|  |  |
| **Supplies** | * Gloves
* Laboratory coat
* Face shield
* Face mask & eye protection
* Bleach solution
* Disinfectant, e.g. Oxivir Tb wipes, Sani-Cloth wipes
* Absorbents, e.g. paper towels, gauze pads
* Dustpan and brush
* Forceps
 |
|  |
| **Definitions** | **Small spills**: less than 50 mL, or manageable by employee**Large spills**: greater than or equal to 50 mL, or unmanageable by employee |
| **Procedure** | Follow the activities in the table below to clean up Biohazard or Infectious Material Spills.This includes, but is not limited to blood, body fluids and cultured organisms. |
|  | **Step** | **Action** |
|  | 1 | Protect yourself and others.* Avoid contact with the material.
* Individuals with a significant exposure to blood, body fluids or other potentially infectious materials (OPIM) should immediately stop working and follow the [Blood and Body Fluid Exposure](https://starnet.childrenshc.org/departments/InfectionControl/pdf/blood-or-body-fluid-exposure-packet-healthcare-worker-exposure-%28hospital-based-locations%29.pdf) process.
	+ The laboratory manager/supervisor should designate another individual for the spill cleanup procedure.
 |
|  | 2 | Secure the area.* Do not walk through or allow others to walk through the spilled material.
* Ensure no one enters the spill area without proper personal protective equipment (PPE).
* Contact the laboratory manager/supervisor or hospital security

(**Minneapolis: 5-7777 or St. Paul: 1-8899**) to report any spill of biohazard or infectious material that may be difficult to contain, e.g. large spill. |
|  | 3 | In the event of a large spill, aerosols may have been generated. Alert nearby staff, leave the area, close doors, and do not re-enter for 30 to 60 minutes. |
|  | 4 | Don appropriate PPE for the type of spill. At a minimum, this includes a lab coat and gloves. Mask and protective eyewear are additionally required for large spills. |
|  | 5 | Remove and discard broken glass or other objects using forceps, dustpan and brush. Place sharps into a biohazard-labeled sharps container. Clean forceps, dustpan and brush with disinfectant. |
|  | 6 | Isolate and contain the spill using absorbents (gauze pads, paper towels). |
|  | 7 | Disinfect spill site with a disinfectant such as Oxivir Tb wipes or a bleach solution. Leave disinfectant in contact with contaminated site according to manufacturer’s directions. Contact time may vary from 1 to 10 minutes depending on product used. To be effective the disinfectant must remain wet on the surface of the site for the entire contact time. Add more disinfectant if necessary. |
|  | 8 | Disinfect reusable materials and equipment before reuse.If repairs are needed on contaminated equipment, disinfect before repairs are performed. |
|  | 9 | Discard all materials, including gloves, in a biohazard waste container. |
|  | 10 | Wash hands with soap and water.  |
|  | Centrifuge Spill | Decontamination is required if tube breakage occurs and infectious or pathogenic material may be released into the area. 1. If breakage or spill occurs, do not open centrifuge for 30 minutes to reduce the risk of aerosols.
2. Wear gloves, lab coat, and face protection.
3. Remove debris, e.g. glass splinters, using a mechanical device such as a forceps.
4. Clean and disinfect centrifuge interior, rotors, safety cups or buckets following manufacturer’s instructions.
 |
|  |  |
| **Supporting Documents** | [912.02 Hazardous Material Spills](http://khan.childrensmn.org/manuals/policy/900/005313.asp)[912.04 Waste Management](http://khan.childrensmn.org/manuals/policy/900/005314.asp)[1202.00 Bloodborne Pathogen Exposure-Control Plan](http://khan.childrensmn.org/manuals/policy/1200/005626.asp) |
| **References** | 1. CLSI. Clinical Laboratory Safety; Approved Guideline – Third Edition. CLSI document GP17-A3. Clinical and Laboratory Standards Institute, Wayne, PA, 2012.
2. CLSI. Protection of Laboratory Workers from Occupationally Acquired Infections; Approved Guideline – Fourth Edition. CLSI document M29-A4. Clinical and Laboratory Standards Institute, Wayne, PA, 2014.
 |
|  |  |  |  |
| **Historical Record** | **Version** | **Written/Revised by:** | **Effective Date:** | **Summary of Revisions** |
| 1 | Carol Cram |  | Initial Version |
|  | 2 | Kerstin Halverson | 07/01/03 |  |
|  | 3 | Carol Buhl | 10/31/14 | Added reference to hospital Blood and Body Fluid Exposure process.Added ‘Secure the area’ section.Added information concerning broken glass and sharps.Reformatted to CMS.Added supporting documents.Added references.Renumbered from 13.3. |
|  | 4 | Carol Buhl | 07/31/15 | Added hyperlink to Blood and Body Fluid Exposure form.Added disinfection of contaminated equipment (#8). |
|  | 5 | Carol Buhl & Lab Safety Committee | 10/26/18 | Added definitions of small and large spills.Included additional PPE for large spills.Updated references. |
|  | 6 | Carol Buhl & Lab Safety Committee | 07/26/2019 | Added cleanup instructions for a centrifuge spill. |