Current Status: Active PolicyStat ID: 9262948

Beaumont

 Origination:
 3/2/2021

 Effective:
 3/2/2021

 Last Approved:
 3/2/2021

 Last Revised:
 3/2/2021

 Next Review:
 3/2/2023

Document Contact: Jennie Green: Mgr

Laboratory

Area: Laboratory-Safety

Key Words:

Applicability: FH, GP, RO, Troy

Laboratory Pneumatic Tube System Spill Response

Document Type: Procedure

I. PURPOSE AND OBJECTIVE:

- A. This procedure is to guidance for handling spills within the pneumatic tube system, within tube system carriers and/or at pneumatic tube system points of receipt.
- B. Due to the amount of specimens transferred through the pneumatic tube system, it is recognized leaks from specimen bags are possible at times. Therefore, it is necessary that laboratory personnel be able to respond in a correct and timely manner to spills associated with the tube system. Personnel should appropriately label and place specimens in well-constructed containers with secure lids and sealed in fluid-tight bags before placement into the carrier and to follow all facilities maintenance guidelines to properly place specimens into the carrier (i.e. foam, do not over-pack carrier, etc.).

II. PERSONAL PROTECTIVE EQUIPMENT (PPE) AND SUPPLIES:

- A. Gloves
- B. Gown
- C. Face shield or chemical goggles, if necessary
- D. Appropriate hospital-approved disinfectant
- E. Paper towels
- F. Biohazard bags

III. PROCEDURE:

On receipt of a pneumatic tube carrier within which a biological specimen or other fluid has spilled or leaked from the primary container, follow the directive given below for notification and clean-up.

A. If the spill has leaked from the carrier and is visible on the exterior of the carrier, page facilities maintenance to alert the facilities maintenance tube system personnel of potential system contamination. Provide the tube station number from which the tube originated, as well as the tube station number of the final destination. If possible, provide information as to the nature of the material

which was spilled.

B. Biological Specimens

- 1. Wear PPE. If the spilled fluid is a biological specimen (i.e. blood, urine, other body fluid), be sure to also wear a gown and goggles or a face-shield while cleaning-up the spill.
- 2. Soak-up or wipe-up the spill with an adequate supply of paper towels; discard towels into a biohazard bag.
- 3. DO NOT pick-up bits of broken glass, if any, by hand. Use paper towels to brush glass into biohazard bag. Discard the bag into a hard-side biohazard container.
- 4. Discard contaminated foam inserts into the biohazard bag.
- 5. Wash contaminated carriers (inside and out) with a hospital-approved disinfectant, allowing for the appropriate contact time. Rinse with tap water and dry.
- 6. If there is carpet around the tube station and it becomes contaminated, soak the affected area with the appropriate hospital approved solution for 30 minutes then blot dry with paper towels. Contact Environmental Services to clean the carpet.
- 7. Hard-surfaced floors: wipe with disinfectant; rinse with water; dry with paper towels.

C. Other Fluids

- 1. If the fluid is a water-based solution, that is NOT hazardous, wipe-up or soak-up the liquid with paper towels. Discard soiled towels into the ordinary trash.
- 2. Soiled foam inserts with non-hazardous fluids: remove from the carrier, rinse well with water, squeeze water from foam and allow to air dry. Dry the carrier (inside and out) with paper towels.
- 3. If the fluid is hazardous, contact a manager or the Laboratory Safety/Chemical Hygiene Officer for assistance with clean-up using the appropriate spill-cleanup kit. Refer to the Laboratory Spill Clean Up Procedure and the Laboratory Chemical Hygiene Plan.

IV. REFERENCES:

- A. Management and Disposal of Infectious Waste & Sharps
- B. <u>Laboratory Chemical Hygiene Plan</u>

Attachments

No Attachments

Approval Signatures

Step Description	Approver	Date
Medical Directors	Vaishali Pansare: Chief, Pathology	3/2/2021
Medical Directors	Peter Millward: Chief, Pathology Service Line	2/22/2021
Medical Directors	Mitual Amin: Chair, Pathology - OUWB	2/22/2021

Step Description	Approver	Date
Medical Directors	John Pui: Chief, Pathology	2/22/2021
Policy and Forms Steering Committee (if needed)	Jennie Green: Mgr Laboratory	2/22/2021
Operations Directors	Elzbieta Wystepek: Dir, Lab Operations B	2/16/2021
Operations Directors	Amy Knaus: Dir, Lab Operations C	2/9/2021
Operations Directors	Brittnie Berger: Dir, Lab Operations C	2/9/2021
	Jennie Green: Mgr Laboratory	2/9/2021

Applicability

Farmington Hills, Grosse Pointe, Royal Oak, Troy

