

| Support Services No. 010 | |
|---|-----------------------|
| Task title: Receiving Specimens | |
| Description of Task: Patient specimens are handled while checking information on specimen container and accompanying paper. Receiving information is then entered into the Lab Information System. The paper work and samples are their to the appropriate areas for testing. | work. n dispatched |
| Infection Risks: Specimen containers may be contaminated. Computer keyboard may be contaminated from previous use. may leak contents, causing contamination. | Containers |
| Engineering Controls: Employee can use a safety splash shield when the specimen is visibly contaminated. | |
| Work Practice Controls: Employee wears gloves and buttoned laboratory coat while handling samples and using computer terminal. after removing gloves. Decontaminate computer keyboard and counter when there is obvious contamination | |
| Job titles of employees performing task: Manager, Supervisor, Med Tech, Lab Tech II, Lab Tech III | i) |
| Evaluation performed by: Carol Hataway, MT(ASCP) Date: 1 / 20/0 | 200 |
| Dept. Safety Committee Approval: Man Land Date: 670 - 2 | المراث |
| Approved 8/18/93, Revised 12/10/03, Reviewed 09/08/04, Revised 09/14/05, Reviewed 09/11/06, Revised 09/12/07, Reviewed 09/10/08, 09/09/09 Revised 09/14/11, Reviewed 12/12/12, 12/04/13, Revised 09/10/14, Reviewed 06/10/15, 06/08/16, 06/07/17, 06/20/18, 06/12/19, 06/10/20 | , 09/08/10, |

| Support Services No. 020 |
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| Bagging/Boxing Specimens for Transport to Off-site Testing Centers |
| Description of Task: Referred specimens are bagged and/or boxed for transport to off-site testing centers. Outside container is kept clean for the transporter. |
| Infection Risks: Specimen container may be contaminated, dropped and broken, causing spillage or may not be tightly closed and leaking may occur. |
| Engineering Controls: Triple packaging is used consisting of leak proof primary receptacles, leak proof secondary packaging and a rigid outer container. |
| Work Practice Controls: Employee wears gloves and buttoned laboratory coat. Wash hands after removing gloves. |
| Job titles of employees performing task: Manager, Supervisor, Med Tech, Lab Tech II, Lab Tech III |
| Faluation performed by: Carol Hataway, MT(ASCP) Date: 7/20/2020 |
| Carol Hataway, MT(ASOF) Dept. Safety Committee Approval: Chairman, Safety Committee Chairman, Safety Committee |
| Approved 8/18/93, Revised 12/10/03, Reviewed 09/08/04, 09/14/05, Revised 09/11/06, Reviewed 09/12/07, 09/10/08, 09/09/09, 09/08/10, 09/14/11, 12/12/12, 12/04/13, Revised 09/10/14, Reviewed 06/10/15, 06/08/16, 06/07/17, 06/20/18, 06/12/19, 06/10/20 |

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Task Evaluation Form

| Support Services No. 070 |
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| Sk title: Disposal of Specimens |
| Description of Task: Specimens no longer needed are disposed of in a biohazard bagged box or puncture resistant biohazard container. |
| Infection Risks: Employee may be contaminated by spilling specimens and breaking or uncapping containers, causing splashing. |
| Engineering Controls: Housekeeping personnel picks this biohazard waste up for disposal. |
| Work Practice Controls: Employee wears gloves and buttoned laboratory coat. Large volumes are placed in boxes lined with biohazard bags. Boxes are not be filled more than half full. Wash hands after removing gloves. |
| Job titles of employees performing task: Manager, Supervisor, Med Tech, Lab Tech II, Lab Tech III |
| Evaluation performed by: Carol Hataway, MT(ASCP) Date: 7 (Sections) |
| Dept. Safety Committee Approval: Date: Date: Date: Date: Date: Date: Date: |
| Approved 8/18/93, Revised 12/10/03, Reviewed 09/08/04, 09/14/05, 09/11/06, Revised 09/12/07, Reviewed 09/10/08, 09/09/09, 09/08/10, 09/14/11, 12/12/12, 12/04/13, Revised 09/10/14, Reviewed 06/10/15, 06/08/16, 06/07/17, 06/20/18, 06/12/19, 06/10/20 |

Task Evaluation Form

| Support Services No. 080 |
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| Specimen Storage |
| Specimen Storage |
| Description of Task: Specimens are stored at room temperature, in refrigerators or in freezers. |
| Infection Risks: Employees may become contaminated from outside of container, breakage of container while storing specimen or improper capping and spillage during storage. |
| Engineering Controls: None |
| Work Practice Controls: Employee wears gloves and buttoned laboratory coat. Refrigerators are decontaminated when there is a spill or obvious contamination. Wash hands after removing gloves. |
| Job titles of employees performing task: |
| Manager, Supervisor, Med Tech, Lab Tech I, Lab Tech II, Lab Tech III |
| Evaluation performed by: Carol Hataway, MT(ASCP) Date: 7/20/2000 |
| Carol Hataway, MT(ASCP) ot. Safety Committee Approval: Chairman, Safety Committee |
| Approved 8/18/93, Revised 12/10/03, Reviewed 09/08/04, Revised 09/14/05, Reviewed 09/11/06, Revised 09/12/07, Reviewed 09/10/08, 09/09/09, 09/08/10, 09/14/11, 12/12/12, 12/04/13, Revised 09/10/14, Reviewed 06/10/15, 06/08/16, 06/07/17, 06/20/18, 06/12/19, 06/10/20 |

| Command Comisson |
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| Support Services No. 130 |
| Task title: |
| Tube System Bin Cleaning |
| · · |
| Description of Task: The contents of the bin are removed and engineering is requested to shut down that station until it can be decontaminated. The spill is absorbed with paper towels which are disposed of in a biohazard waste container. The bin is sprayed well with the hospital approved disinfectant which left on for ten minutes. Paper towels are used to absorb as much of the disinfectant as possible. It is not necessary to rinse the bin. Several paper towels are placed in the bin, no more than ½ inches deep, to keep incoming carriers from becoming wet. Remove the paper towels after the excess moisture is absorbed. Engineering is notified to open the station for use. |
| Infection Risks: Employees can be contaminated by the spill or splattering while cleaning |
| Engineering Controls: None |
| Work Practice Controls: Employee wears gloves and buttoned laboratory coat. Wash hands after removing gloves. |
| Job titles of employees performing task: |
| Manager, Supervisor, Med Tech, Lab Tech I, Lab Tech II, Lab Tech III |
| Evaluation performed by: Carol Hataway, MT(ASCP) Date: Date: |
| Date: |
| Approved 12/10/03, Reviewed 099/08/04, 09/14/05, 09/11/06, Revised 09/12/07, Reviewed 09/10/08, 09/09/09, 09/08/10, 09/14/11, 12/12/12, 12/04/13, 09/10/14, 06/10/15, 06/08/16, 06/07/17, 06/20/18, 06/12/19, 06/10/20 |

| Task Evaluation Form |
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| Support Services No. 140 |
| Task title: Cleaning Tube System Carriers |
| Description of Task: All contents are removed from the carrier and cleaned when spills occur. The carrier is soaked with the hospital approved disinfectant and allowed to stand for 10 minutes. The carrier is rinsed with water and allowed to dry completely before being put back into use. The bands must be dry or the system can be shut down from swollen bands. If the foam insert has minor spills and there is no broken glass, it can be cleaned in the same manner as the carrier. |
| Infection Risks: Employees can be contaminated by the spill or cut by broken glass. |
| Engineering Controls: None |
| Work Practice Controls: Employee wears gloves and buttoned laboratory coat. If the liner is contaminated, dispose of into a biohazardous container. If broken glass is present, use forceps to remove the liner and dispose of into a sharps container. Wash hands after removing gloves. |
| Job titles of employees performing task: |
| Manager, Supervisor, Med Tech, Lab Tech I, Lab Tech II, Lab Tech III |
| Evaluation performed by: |
| Dept. Safety Committee Approval: Carol Hataway, MT(ASCP) Date: 6 10 30 50 50 50 50 50 50 50 50 50 50 50 50 50 |

Approved 12/10/03, Reviewed 09/08/04, 09/14/05, 09/11/06, Revised 09/12/07, Reviewed 09/10/08, 09/09/09, 09/08/10, 09/14/11, 12/12/12, 12/04/13, Revised 09/10/14, Reviewed 06/10/15, 06/08/16, 06/07/17, 06/20/18, 06/12/19, 06/10/20

| Task Evaluation Form |
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| Universal |
| No. 003 |
| Task title: Daily Quality Assurance Measures |
| Description of Task: Daily quality control procedures include observations and recording of the temperature levels of all refrigerators, freezers and instruments. |
| Infection Risks: Door handles and other surfaces may be contaminated. |
| Engineering Controls: None |
| Work Practice Controls: Employees wear gloves and if required by the section a fluid-resistant lab coat when touching contaminated surfaces in the laboratory, this includes refrigerator and freezer doors. Wash hands after glove removal. |
| Job titles of employees performing task: |
| Manager, Supervisor, Sr. Tech, Med Tech, MLT, Lab Tech II, Lab Tech I, Clinical Support Tech II, HTL, Sr. HT, HT |
| Evaluation performed by: Normalization Common MT (ACCP) Date: W-1530 |
| Donna Briscoe, MT(ASCP) Dept. Safety Committee Approval: Chairman, Safety Committee |

Approved 05/08/02, Reviewed 05/14/03, Revised 05/12/04, Reviewed 05/11/05, 05/10/06, 05/09/07, Revised 05/14/08, Reviewed 05/13/09, 05/12/10, 11/09/11, 12/12/12, 12/04/13, 09/10/14, 06/10/15, 06/08/16, 06/07/17, 06/20/18, 03/13/19, 06/10/20

| Task Evaluation Form |
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| Universal |
| No. 004 |
| Task title: Decontamination of Work Area |
| Description of Task: The task is performed whenever a spill or splash occurs, and at the beginning of each shift. The work area is decontaminated with a hospital approved disinfectant. |
| Infection Risks: Contamination of skin or open wound from contaminated surfaces. |
| Engineering Controls: None |
| Work Practice Controls: Wear gloves and fluid-resistant lab coats or aprons. Wash hands after glove removal. |
| Job titles of employees performing task: Manager, Supervisor, Sr. Tech, Med Tech, MLT, Lab Tech II, Lab Tech I, Clinical Support Tech II |
| Evaluation performed by: Down de MT (ASCP) Donna Briscoe, MT(ASCP) Dept. Safety Committee Approval: Date: 610-30 20 |
| Dept. Safety Committee Approval: |

Approved 05/08/02, Revised 05/14/03, 05/12/04, Reviewed 05/11/05, 05/10/06, 05/09/07, 05/14/08, 05/13/09, 05/12/10, 11/09/11, 12/12/12, 12/04/13, 09/10/14, 06/10/15, 06/08/16, 06/07/17, 06/20/18, 03/13/19, 06/10/20

| Task Evaluation Form |
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| Universal No. 005 |
| Task title: Telephone Usage in Lab Area |
| Description of Task: Utilizing telephone to make or answer calls in lab area. |
| Infection Risks: Handling telephone that has been contaminated with body fluids. |
| Engineering Controls: None |
| Work Practice Controls: Employees wear gloves when using telephones. Decontaminate telephones with hospital-approved disinfectant. Do not handle "clean phones" while wearing gloves. Wash hands after glove removal. |
| Job titles of employees performing task: Manager, Supervisor, Sr. Tech, QA Tech, Med Tech, MLT, Lab Tech II, Lab Tech I, HTL, Sr. HT, HT, Histology Assistant, Clinical Support Tech II |
| Evaluation performed by: Normal Man Accept Date: 6-15-80 Dept. Safety Committee Approval: Man Accept Date: 6-70-3020 |
| Dept. Safety Committee Approval: Date: 670-3020 Chairman, Safety Committee |

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| Task Evaluation Form |
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| Universal No. 006 |
| Task title: Using Lab Computer Systems |
| Description of Task: Computer keyboards are used for order entry, result entry and verification and information retrieval. |
| Infection Risks: Gloved hands may become soiled with body fluids in work areas, causing contamination of computer keyboards when used. |
| Engineering Controls: Use plastic keyboard covers if appropriate. |
| Work Practice Controls: Wear gloves when using a contaminated keyboard. Wash hands after glove removal. |
| Job titles of employees performing task: Manager, Supervisor, Sr. Tech, QA Tech, Med Tech, MLT, Lab Tech II, Lab Tech I, HTL, Sr. HT, HT, Histology Assistant, Clinical Support Tech II |
| Donna Briscoe, MT(ASCP) Dept. Safety Committee Approval: Date: 6-10-2020 |
| Dept. Safety Committee Approval: Man Lu Date: 6-10-2020 Chairman, Safety Committee |

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| Task Evaluation Form |
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| Universal |
| No. 007 |
| Task title: Recapping Vacutainer Tubes or Other Tubes |
| Description of Task: Tubes are held individually, recapped with plastic caps and then placed in a rack for storage. |
| Infection Risks: Possible spill or splash of serum or other body fluid |
| Engineering Controls: Plastic caps that cover the rim of the tubes are used to protect employees from tube breakage and splattering. |
| Work Practice Controls: Employees wear gloves and long-sleeved, water-resistant gown or plastic apron. Wash hands after glove removal. |
| Job titles of employees performing task: |
| Manager, Supervisor, Sr. Tech, Med Tech, MLT, Lab Tech II, Lab Tech I, QA Tech, Clinical Support Tech II |
| Evaluation performed by: Danna Briscoe, MT(ASCP) Dept. Safety Committee Approval: Date: 610 - 2020 |
| Dept. Safety Committee Approval: Date: 610 2020 |

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| Task Evaluation Form |
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| Universal |
| No. 008 |
| Task title: Centrifugation |
| Description of Task: Placement of tube of blood or other body fluid into a centrifuge and removal of same. |
| Infection Risks: Employee may become contaminated by: Contamination from outside of container Breakage of container Improper capping, resulting in spillage Trying to forcibly remove samples stuck in centrifuge |
| Engineering Controls: Centrifuges have self-locking lid. |
| Work Practice Controls: Employees wear gloves and plastic apron and/or lab coat. Centrifuges are decontaminated weekly, or when there is a spill or obvious contamination. Remove extra labels from tubes to prevent samples from becoming stuck in centrifuge. Call Biomedical Technology Services when tubes are stuck in the centrifuge. Wash hands after glove removal. |
| Job titles of employees performing task: Manager, Supervisor, Sr. Tech, QA Tech, Med Tech, MLT, Lab Tech II, Lab Tech I, Clinical Support Tech II |
| Evaluation performed by: bonnal rate MT(ACCP) Donna Briscoe, MT(ASCP) Dept. Safety Committee Approval: Date: 6-10-20 20 |
| Chairman, Safety Committee |

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| Task Evaluation Form Universal |
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| No. 010 |
| Task title: |
| Aliquoting Specimens |
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| Description of Task: Transfer of specimen to another container for storage or for testing. (e.g. samples into centrifuge tubes for extraction, reaction or sample cups for analyzers). |
| Infection Risks: |
| Employee or countertop may be contaminated by: |
| Splashing of specimens during transfer, contaminating countertop or employee Dropping specimen and breaking container, causing spill |
| Contamination from outside of container |
| |
| Engineering Controls: |
| A plastic shield maybe used. |
| Use plastic disposable pipettes to prevent accidental puncturing of gloves. |
| Place biohazard trash bin for disposables next to workstation. |
| Work Practice Controls: |
| ■ Employees wear gloves and plastic apron and/or lab coat. |
| Decontaminate countertops each shift and after an obvious spill. |
| Wash hands after glove removal. |
| Job titles of employees performing task: |
| |
| Manager, Supervisor, Sr. Tech, Med Tech, MLT, Lab Tech II, Lab Tech I, Clinical Support Tech II, |
| QA Tech |
| N 0 |
| Evaluation performed by: Down William Down Down Briscoe, MT(ASCP) Dept. Safety Committee Approval: Date: 610-2020 |
| Dept. Safety Committee Approval: Date: 610 - 2020 Chairman, Safety Committee |

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| | Task Evaluation Form |
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| | Universal |
| | No. 012 |
| | Task title: Transport of Specimens |
| | Description of Task: |
| | Transport of patient specimens. |
| | Infection Risks: |
| | Possible dropping of specimens, resulting in breakage and contamination of employees, floors, etc. |
| | Engineering Controls: Double containment carriers are used. |
| Work Practice Controls: | |
| | Employees wear gloves and lab coats or aprons while transporting specimens. Wash hands after glove removal. |
| | Job titles of employees performing task: |
| | Manager, Supervisor, Sr. Tech, QA Tech, Med Tech, MLT, Lab Tech II, Lab Tech I, Clinical Support Tech II, Sr. Phleb, Phleb I Phleb II |
| | Donna Briscoe, MT(ASCP) Dept. Safety Committee Approval: Date: 670 - Saco |
| | Dept. Safety Committee Approval: Date: 670 2000 Chairman, Safety Committee |

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| Task Evaluation Form | |
|---|--|
| Universal No. 014 | |
| Task title: Storage of Specimens | |
| Description of Task: Samples removed from each analyzer or work area are placed in a sample rack or container for storage. The rack or container is transported to storage. | |
| Infection Risks: Vacutainers and other tubes may be contaminated. Possible dropping of specimens resulting in breakage of containers, contaminating employees, floors, etc. | |
| Engineering Controls: Use plastic containers to double contain and transport specimens. Use carts for large numbers of samples. | |
| Work Practice Controls: Employees wear gloves and lab coats or aprons when filing and transporting specimens. Wash hands after glove removal. | |
| Job titles of employees performing task: Manager, Supervisor, Sr. Tech, Med Tech, MLT, Lab Tech II, Lab Tech I, Clinical Support Tech II, QA Tech | |
| Donna Briscoe, MT(ASCP) Dept. Safety Committee Approval: Date: 6-10-2000 | |
| Dept. Safety Committee Approval: Chairman, Safety Committee Date: 6-10-2000 | |

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| | Universal |
|--------------------|---|
| Task title: | No. 017 |
| rack ado. | Phlebotomy - Venipuncture (Vacutainer) |
| Description of | Task: |
| Approforear places | opriate identification procedures are executed. A non-latex tourniquet is placed on the patient's arm above the rm. An appropriate vein is selected and the site area is cleansed with alcohol prep. A multi-sample needle is d on a needle holder and the skin and the vein are penetrated. Appropriate vacutainer tubes are then placed on eedle holder until all blood samples have been drawn. The tourniquet is removed, the needle holder is then rawn and a protective dressing is placed over the puncture wound. |
| Infection Risks | S: |
| | eedle sticks either from handling the vacutainer needle or from needles left in the room |
| | ontamination of skin from broken or contaminated vacutainers |
| | fection from airborne diseases such as TB |
| • C | ontamination of skin and mucous membranes from blood on puncture site or contamination from other body fluids |
| Engineering C | |
| | fter withdrawing the multi-sample needle, the phlebotomist activates the sheath to cover the needle with their |
| | numb while pointing the needle away from themselves and the patient. |
| | pecial disposal bins for sharps are in each patient's room. iohazard bags are used to transport blood samples from the patient's room back to the laboratory. |
| | and washing sinks and alcohol-based foam are available in each patient's room. |
| Work Practice | Controls: |
| ■ E | mployee wears gloves and long sleeved lab coat throughout the procedure and replaces the gloves between atients. |
| | eplace lab coats if soiled. |
| | Vash hands after glove removal in the patient's room. |
| | andle vacutainer tubes only if wearing gloves. ransport vacutainers in biohazard bags. |
| | se vacutainer needle holders only once. |
| | eedle disposal bins in the patient's room are emptied when 75% full. |
| | Vear masks and gowns and respirators if appropriate when dealing with patients in isolation precautions. |
| Job titles of en | nployees performing task: |
| | ger, Supervisor, Sr. Tech, QA Tech, Med Tech, MLT, Lab Tech II, Lead Phleb, Phleb I, Phleb II, Clinical Support |
| | |

| Evaluation performed by: | Leonard Johnson, PBT(ASCP) | Date: 6/17/20 |
|----------------------------------|----------------------------|-----------------|
| Dept. Safety Committee Approval: | Chairman, Safety Committee | Date: 6 10 2020 |

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| Task Evaluation Form |
|---|
| Universal |
| No. 018 |
| Task title: |
| Phlebotomy - Venipuncture (Syringe technique) |
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| Description of Task: |
| Appropriate identification procedures are executed. A non-latex tourniquet is placed on the patient's arm above the forearm. An appropriate vein is selected and the site area is cleansed with an alcohol prep. A hypodermic needle or a winged infusion set is placed on the syringe and the skin and the vein are penetrated. Blood is withdrawn using the syringe plunger until an adequate quantity of blood has been obtained. The blood is dispensed into the appropriate tubes utilizing a safety transfer device. The tourniquet is removed and a protective dressing is placed over the puncture wound. |
| Infection Risks: |
| Needle sticks either from handling the syringe or from needles left in the room |
| Contamination of skin from incorrect use of the syringe |
| Contamination of skin while dispensing aliquots of blood from syringe |
| Contamination of skin from broken or contaminated vacutainers |
| Infection from airborne diseases such as TB |
| Contamination of skin and mucous membranes from blood on puncture site or contamination from other body fluids |
| Engineering Controls: |
| After withdrawing the hypodermic needle or the winged infusion set, the phlebotomist activates the sheath to cover |
| the needle with their thumb while pointing the needle away from themselves and the patient. |
| Use a transfer device to dispense the blood into the appropriate tubes. |
| Special disposal bins for sharps are in each patient's room. |
| Phlebotomy trays with racks are used to transport blood samples from the patient's room back to the laboratory. |
| Hand washing sinks and alcohol-based foam are available in each patient's room. |
| Work Practice Controls: |
| Employee wears gloves and long sleeved lab coat throughout the procedure and replaces the gloves between |
| patients. |
| Replace lab coats if soiled. |
| Wash hands after glove removal in the patient's room. |
| Handle vacutainer tubes only if wearing gloves. |
| Transport vacutainers in biohazard bags. |
| Use vacutainer needle holders only once. |
| Needle disposal bins in the patient's room are emptied when 75% full. |
| Wear masks and gowns and respirators if appropriate when dealing with patients in isolation precautions. |
| Job titles of employees performing task: |

Job titles of employees performing task:

Manager, Supervisor, Sr. Tech, QA Tech, Med Tech, MLT, Lab Tech II, Lead Phleb, Phleb I, Phleb II, Clinical Support Tech II

Figure 1 Parts: 6/17/25

Dept. Safety Committee Approval: Many Sch. Date: 6-10-20ne

Chairman, Safety Committee

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| Task Eval | LISTIAN | - orm |
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Universal No. 019

Task title:

Heelstick/Fingerstick

Description of Task:

Appropriate identification procedures are executed. An appropriate site is selected and the site (heel, fingertip) is cleansed with alcohol prep. An appropriate fingerstick device or a heelstick device is placed on the site and released to penetrate the skin. The first drop of blood is wiped away with a 2 X 2 gauze. Subsequent drops are collected until all blood samples have been drawn. The lancet is discarded in an approved container in the patient's room. Pressure is held on puncture site until bleeding has stopped.

Infection Risks:

- Needle stick from handling the lancet or from needles left in the room
- Infection from airborne diseases, such as TB
- Contamination of skin while dispensing blood into appropriate tube or wiping first drop of blood
- Contamination of skin from broken or contaminated vacutainers
- Contamination of skin and mucous membranes from blood on puncture site or contamination from other body fluids

Engineering Controls:

- After penetrating the skin, the blade retracts into the plastic case and cannot be reused.
- Phlebotomy trays with racks are used to transport blood samples from the patient's room back to the laboratory
- Special disposal bins for sharps are in each patient's room.
- Hand washing sinks and alcohol-based foam are available in each patient's room

Work Practice Controls:

- Employee wears gloves and long sleeved lab coat throughout the procedure and replaces the gloves between patients.
- Replace lab coats if soiled.
- Wash hands after glove removal in the patient's room.
- Handle vacutainer tubes only if wearing gloves.
- Transport vacutainers in biohazard bags.
- Needle disposal bins in the patient's room are emptied when 75% full.
- Wear masks and gowns and respirators if appropriate when dealing with patients in isolation precautions.

Job titles of employees performing task:

Manager, Supervisor, Sr. Tech, QA Tech, Med Tech, MLT, Lab Tech II, Lead Phleb, Phleb I, Phleb II, Clinical Support
Tech II

Evaluation performed by:

Leonard Johnson, PBT(ASCP)

Date:

Chairman, Safety Committee

Date:

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| Universal No. 020 | |
|---|---|
| Task title: Phlebotomy - venipuncture (Butterfly) | |
| Description of Task: Appropriate identification procedures are executed. A non-latex tourniquet is forearm. An appropriate vein is selected and the site area is cleansed with alc is attached to a syringe or to an access device and the skin and the vein are procedures dispensed into the appropriate tubes. The tourniquet is removed, the winged protective dressing is placed over the puncture wound. | cohol prep. A winged infusion set (Butterny benetrated. Appropriate blood is drawn and |
| Infection Risks: Needle sticks either from handling the vacutainer needle or from needles Contamination of skin from broken or contaminated vacutainers Infection from airborne diseases such as TB Contamination of skin and mucous membranes from blood on puncture s | |
| Engineering Controls: After withdrawing the winged infusion set, the phlebotomist activates the swhile pointing the needle away from themselves and the patient. Use a transfer device to dispense the blood into the appropriate tubes via Special disposal bins for sharps are in each patient's room. Use phlebotomy trays with racks to transport blood samples from the patient Hand washing sinks and alcohol-based foam are available in each patient. | the butterfly. ent's room back to the laboratory. |
| Work Practice Controls: | |

Job titles of employees performing task:

Manager, Supervisor, Sr. Tech, QA Tech, Med Tech, MLT, Lab Tech II, Lead Phleb, Phleb I, Phleb II, Clinical Support Tech II

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| Evaluation performed by: Leonard Johnson, PBT(ASCP) | Date: 6/17/20 |
| Dept. Safety Committee Approval: Qhairman, Safety Committee | Date: 6 10 2000 |

Approved 06/11/03, Reviewed 05/12/04, 05/11/05, Revised 05/10/06, Reviewed 05/09/07, 05/14/08, Revised 05/13/09, Reviewed 0511/10, 11/09/11, 12/12/12, 12/04/13, 09/10/14, 06/10/15, 06/08/16, 06/07/17, Revised 06/20/18, Reviewed 03/13/19, 06/10/20

| Task Evaluation Form |
|---|
| Universal No. 021 |
| Task title: |
| Removing Caps from Tubes |
| Description of Task: The stoppers are removed from the vacutainer tubes. |
| Infection Risks: The outside of the vacutainer tube maybe contaminated The tube could be dropped or knocked over spilling serum or plasma Serum or plasma can be aerosolized when the stopper is removed |
| Engineering Controls: Face shield or Goggles and mask or Safety splash shield or Cover the stopper with a plastic backed biohazard wipe |
| Work Practice Controls: Wear gloves and lab coats or aprons while performing task. Decontaminate countertops each shift and after an obvious spill. Wash hands after glove removal. |
| Job titles of employees performing task: Manager, Supervisor, Sr. Tech, Med Tech, MLT, Lab Tech II, Lab Tech I, Clinical Support Tech II, QA Tech |
| Evaluation performed by: Donna Briscoe, MT (ASCP) Donna Briscoe, MT(ASCP) Dept. Safety Committee Approval: Date: 610 >000 |
| Dept. Safety Committee Approval: Chairman Safety Committee Date: 610 ->0 |

Approved 11/16/02, Revised 06/11/03, 05/12/04, Reviewed 05/11/05, 05/10/06, 05/09/07, 05/14/08, 05/13/09, 05/12/10, 11/09/11, 12/12/12, 12/04/13, 09/10/14, 06/10/15, 06/08/16, 06/07/17, 06/20/18, 03/13/19, 06/10/20

| Universal |
|---|
| No. 022 |
| Task title: |
| Cleanup of Biohazardous Spill |
| Description of Task: |
| Small Spill – Pick up any broken glass and discard in a broken glass container or a puncture-resistant sharps container. |
| Wipe up blood or body fluid with paper towels. Disinfect area with a hospital-approved disinfectant. Large Spill – Surround the area of the spill with absorbent paper towels to prevent spreading. Pick up any broken glass |
| and discard in a broken glass container or a puncture-resistant sharps container. Wipe up blood or body fluid with pape |
| towels. Disinfect area with a hospital-approved disinfectant. |
| Infection Risks: |
| The employee may cut himself with broken glass |
| Surfaces and the towels used for cleanup are contaminated with body fluids or blood |
| Engineering Controls: |
| Use mechanical devices (hemostat and/or two pieces of cardboard) to pick up sharps and broken glass. |
| Use puncture-resistant containers for disposal. |
| Biohazard trash bin for disposables are available. |

Job titles of employees performing task:

Wash hands after glove removal.

Work Practice Controls:

Manager, Supervisor, Sr. Tech, Med Tech, MLT, Lab Tech II, Lab Tech I, QA Tech, HTL, Sr. HT, HT, Clinical Support Tech II

Donna Briscoe, MT(ASCP)

Dept. Safety Committee Approval:

Chairman, Safety Committee

Disinfect all surfaces contaminated by the spill using the hospital-approved disinfectant.

Employees wear gloves and water-resistant lab coats or aprons.

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| Task Evaluation Form | |
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| Universal | |
| No. 023 Task title: | |
| Pneumatic Tube System | |
| | |
| Description of Task: | |
| Placement or removal of biological specimens into the pneumatic tube system. All users must have documented training before using the tube system. | |
| Infection Risks: | |
| Improperly closed container may leak or break. | |
| Breakage in the system can cause massive contamination to the system. | |
| Engineering Controls: | |
| Use carriers that lock and are not cracked or broken. | |
| The clasp lock must be working properly. | |
| Close the carriers tightly before shipping. | |
| Laboratory carriers bear a biohazard label and are not used to ship pharmacy products. | |
| Specimens must be double contained, sealed to prevent leakage and include an absorbent pad in the package. | |
| Work Practice Controls: | |
| Wear gloves and lab coats or aprons while performing task. | |
| Decontaminate countertops each shift and after an obvious spill. | |
| Wash hands after glove removal. | |
| Job titles of employees performing task: | |
| Manager, Supervisor, Sr. Tech, Med Tech, MLT, Lab Tech II, Clinical Support Tech II, QA Tech, Sr. Phleb, Phleb I, | |
| Phleb II, HTL, Sr. HT, HT | |
| | |
| Evaluation performed by: Down Briscoe, MT(ASCP) Donna Briscoe, MT(ASCP) Dept. Safety Committee Approval: May flu Date: 6-10-10-20 | |
| Dept. Safety Committee Approval: May flu Date: 6-10-10-20 | |

Approved 11/11/92, Revised 06/11/03, 05/12/04, 05/11/05, Reviewed 05/10/06, Revised 05/09/07, Reviewed 05/14/08, 05/13/09, 05/12/10, 11/09/11, 12/12/12, 12/04/13, 09/10/14, 06/10/15, 06/08/16, 06/07/17, 06/20/18, 03/13/19, 06/10/20

Chairman, Safety Committee

| Task Evaluation Form |
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| Universal |
| No. 024 |
| Task title: |
| Routine Maintenance on Centrifuges |
| Description of Task: Cleaning inside of centrifuges with a disinfectant solution. |
| Infection Risks: Possible contamination from any body fluid Possible puncture of gloves by broken glass in centrifuge |
| Engineering Controls: None |
| Work Practice Controls: Wear gloves and lab coats or aprons while performing task. Wash hands after glove removal. |
| Job titles of employees performing task: |
| Manager, Supervisor, Sr. Tech, Med Tech, MLT, Lab Tech II, Lab Tech I, Clinical Support Tech II, QA Tech, |
| Evaluation performed by: Jan 12 May MT (ASCP) Dept. Safety Committee Approval: Date: 61530 Date: 61530 |
| Dept. Safety Committee Approval: Date: 6 10-20 20 |
| Approved 09/01/93 Revised 08/13/03, 05/12/04, Reviewed 05/11/05, 05/10/06, 05/09/07, 05/14/08, 05/13/09, 05/12/10, 11/09/11, 12/12/12, 12/04/13, 09/10/14, 06/10/15, 06/08/16, 06/07/17, 06/20/18, 03/13/19, 06/10/20 |

| Task Evaluation Form |
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| Universal No. 025 |
| Task title: Dumbwaiter Usage |
| Description of Task: The dumbwaiter is utilized to transport specimens within the laboratory system. Specimens are placed on trays or in racks in the dumbwaiter and sent to specific laboratory areas. |
| Infection Risks: The specimens, racks trays or the dumbwaiter can contaminate employees. |
| Engineering Controls: None |
| Work Practice Controls: Wear gloves and lab coats or aprons while performing task. Decontaminate dumbwaiter and containers daily and after an obvious spill. Wash hands after glove removal. |
| Job titles of employees performing task: Manager, Supervisor, Sr. Med Tech, QA Tech, Med Tech, MLT, Lab Tech II, Lab Tech I, Clinical Support Tech II, HTL, Sr. HT, HT |
| Dept. Safety Committee Approval: |
| Dept. Safety Committee Approval: Date: 6-10 dept. Chairman, Safety Committee |

Approved 12/10/03, Revised 09/08/04, 10/13/04, Reviewed 05/11/05, 05/10/06, 05/09/07, 05/14/08, 05/13/09, 05/12/10, 11/09/11, 12/12/12, 12/04/13, 09/10/14, 06/10/15, 06/08/16, 06/07/17, 06/20/18, 03/13/19, 06/10/20

| Task Evaluation Form |
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| Universal No. 026 |
| Task title: |
| Copiers |
| |
| Description of Task: Copiers are used in the work areas so as not to contaminate copiers in office areas. A paper towel is used to apply the hospital approved disinfectant to the outside surfaces of the copier. This is wiped off with a dry towel. |
| Infection Risks: Employees can be contaminated by touching surfaces that have come in contact with dirty gloves. |
| Engineering Controls: None |
| Work Practice Controls: Employees wear gloves and plastic aprons or a lab coat. Decontaminate the outside surfaces of the copier daily. Wash hands after glove removal. |
| Job titles of employees performing task: Manager, Supervisor, Sr. Med Tech, QA Tech, Med Tech, MLT, Lab Tech II, Lab Tech I, Clinical Support Tech II |
| Date: 6-10-10-10-10-10-10-10-10-10-10-10-10-10- |
| Dept. Safety Committee Approval: |
| Approved 12/10/03, Revised 09/08/04, Reviewed 05/11/05, 05/10/06, 05/09/07, 05/14/08, 05/13/09, 05/12/10, 11/09/11, 12/12/12, 12/04/13, 09/10/14, 06/10/15, 06/08/16, 06/07/17, 06/20/18, 03/13/19, 06/10/20 |

| Universal No. 027 |
|---|
| Task title: Specimen Refrigerator and Freezer Cleaning |
| Description of Task: Refrigerators and freezers are used for storing specimens at appropriate temperatures. These should be cleaned at prescribed intervals and when spills occur. |
| Infection Risks: Employees can be contaminated from spills or parts of the refrigerator or freezer |
| Engineering Controls: None |
| Work Practice Controls: Employees wear gloves and plastic aprons or a lab coat. Wash hands after glove removal. |
| Job titles of employees performing task: |
| Manager, Supervisor, Sr. Med Tech, QA Tech, Med Tech, MLT, Lab Tech II, Lab Tech I, Clinical Support Tech II |
| Evaluation performed by: Donna Briscoe, MT (ACP) Donna Briscoe, MT (ASCP) Dept. Safety Committee Approval: Date: 610 3030 |
| Dept. Safety Committee Approval: Date: 6 10 30 30 Chairman, Safety Committee |
| Approved 12/10/03, Revised 09/08/04, Reviewed 05/11/05, 05/10/06, 05/09/07, Revised 05/14/08, Reviewed 05/13/09, 05/12/10, 11/09/11, 12/12/12, 12/04/13, 09/10/14, 06/10/15, 06/08/16, 06/07/17, 06/20/18, 03/13/19, 06/10/20 |

| Task Evaluation Form |
|---|
| Universal |
| No. 029 |
| Task title: Discarding Patient Samples |
| Description of Task: At the end of the required retention period, patient samples are disposed of in biohazardous trash. |
| Infection Risks: The outside of the tubes may be contaminated with blood Tubes may be dropped and broken and result in splatter of blood on employee and cuts from broken glass Stoppers/parafilm may come off and result in spills. |
| Engineering Controls: Samples are transported from the storage refrigerator to the trash in secondary containers (racks) Samples are sealed inside a plastic bag before discard in biohazardous waste containers. |
| Work Practice Controls: |
| Job titles of employees performing task: Manager, Chief Tech, Supervisor, Sr. Med Tech, QA Specialist, Blood Bank Specialist, Med Tech, MLT, Lab Tech II, Lab Tech I, Clinical Support Tech II, Referral Coordinator |
| Evaluation performed by: Lossock MT(ASCP) Date: 6-15-50 Donna Briscoe, MT(ASCP) |
| Dept. Safety Committee Approval: May flow Date: 610 3000 |