

## TRAINING UPDATE

**Lab Location:** GEC, SGMC & WAH  
**Department:** All

**Date Distributed:** 1/8/2016  
**Due Date:** 1/31/2016  
**Implementation:** 2/1/2016

### DESCRIPTION OF PROCEDURE REVISION

<b>Name of procedure:</b>
<b>Routine Decontamination Procedure GEC/SGAH/WAH.SA08 v1</b>
<b>Description of change(s):</b>
Section 3: update job title Section 4 & 5: update disinfectant, add wipe Section 9: remove MSDS  <b>This revised SOP will be implemented on February 1, 2016</b>

Document your compliance with this training update by taking the quiz in the MTS system.

Non-Technical SOP

<b>Title</b>	<b>Routine Decontamination Procedure</b>	
<b>Prepared by</b>	Bryan Mason	Date: 1/24/2011
<b>Owner</b>	Lori Loffredo	Date: 1/24/2011

<b>Laboratory Approval</b>		
<b>Print Name and Title</b>	<b>Signature</b>	<b>Date</b>
<i>Refer to the electronic signature page for approval and approval dates.</i>		
Local Issue Date:		Local Effective Date:

<b>Review:</b>		
<b>Print Name</b>	<b>Signature</b>	<b>Date</b>

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### **1. PURPOSE**

It is essential that work areas be decontaminated on a routine basis. Each department handling biological specimens shall decontaminate all work areas used for biological specimen preparation or assay at the end of every shift and after a spill.

### **2. SCOPE**

This SOP applies at all employees who handle biological materials.

### **3. RESPONSIBILITY**

Department management (director, manager, supervisor) is responsible for implementation and use of this SOP at the department level.

The ~~Regional Laboratory Director~~ **Manager, EHS** is responsible for the review and revision of this SOP as needed.

### **4. DEFINITIONS**

~~Dispatch— Dispatch refers to the Dispatch disinfection product produced by Caltech. Dispatch is a stabilized bleach solution, having a one-year shelf life.~~

Clorox Healthcare Bleach Germicidal Cleaner – disinfectant product purchased in large jugs and poured into plain spray bottles. Spray bottles are labeled by lab staff each time the bottle is re-filled. The label must include the lot number and expiration date (copied from the jug), date filled and employee’s tech code / initials. The Safety Data Sheet (SDS) is available via SafeTec Material Safety Data Sheet (MSDS) System (website <http://www.quest.msds.com/>)

Wipes – hospital approved disposable disinfectant wipe

**5. PROCEDURE**

- a. Before performing decontamination, employee must put on gloves, fastened lab coat and eye/face protection.
- b. If sharp material is located in the decontamination area (usually due to a spill), remove the sharp material from the work area prior to decontamination using tongs or forceps. Dispose of any sharp material in an approved sharps container.
- c. Using disposable towels, wipe the area to remove any gross contamination due to blood or other biological materials.
- d. Apply the **approved hospital disinfectant** ~~Dispatch bleach solution~~ using the dispenser bottle. Take care not to splash the solution, or allow the solution to pool and run off of the surface. **A hospital approved disposable disinfectant wipe may be used instead of spray disinfectant.**
- e. Allow the solution to remain damp on the decontamination area for two (2) minutes.
- f. Wipe the solution from the work surface using disposable towels. Place the towels in a biohazard waste container for disposal.

**6. RELATED DOCUMENTS**

Bloodborne Pathogens Exposure Control Plan

**7. REFERENCES**

None

**8. REVISION HISTORY**

Version	Date	Reason for Revision	Revised By	Approved By
		Supersedes Routine Decontamination Procedure, dated 3/1/2004		
000	12/30/15	Section 3: update job title Section 4 & 5: update disinfectant, add wipe Section 9: remove MSDS Footer: version # leading zero's dropped due to new EDCS in use as of 10/7/13	L. Barrett	L. Loffredo

**9. ADDENDA AND APPENDICES**

~~Attachment 1 – Dispatch MSDS (see Attachment Tab of Infocard)~~

None

Form revised 3/31/00