

TRAINING UPDATE

Lab Location: GEC, SGMC & WOMC
Department: All staff

Date Distributed: 6/2/2020
Due Date: 6/30/2020
Implementation: 6/3/2020

DESCRIPTION OF REVISION

| |
|--|
| Name of procedure: |
| Personal Protective Equipment (PPE) Usage SGAH.SA16 v3 |
| Description of change(s): |
| <p>Header: changed WAH to WOMC</p> <p>Section 5: added pandemic note</p> <p>Section 6: updated hospital policies</p> <p>Appendix A: added Eye/Face protection for plating swabs outside of BSC</p> <p>This revised SOP was implemented June 3, 2020</p> |

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

Non-Technical SOP

| | | |
|--------------------|--|-----------------|
| Title | Personal Protective Equipment (PPE) Usage | |
| Prepared by | Bryan Mason | Date: 3/24/2011 |
| Owner | Robert SanLuis, Stephanie Codina | Date: 5/24/2018 |

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

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1. PURPOSE

Personal protective equipment (PPE) is an integral part of employee protection from biological, chemical or radiological hazardous materials. Employees required to use PPE must be trained in the use of the PPE.

2. SCOPE

This SOP applies to all laboratory employees.

3. RESPONSIBILITY

Laboratory management is responsible for ensuring compliance with this SOP.

The Laboratory Services Director or designee is responsible for review and revision of this SOP as needed.

4. DEFINITIONS

Personal Protective Equipment (PPE) - Specialized equipment or apparel worn by an employee for the purpose of protection against a hazard. General items of personal apparel such as shirts and pants are not considered to be PPE.

Readily available – Available to personnel in adequate quantities at any time work is performed.

5. POLICY

- a. Personal Protective Equipment (PPE) shall be made readily available for use by employees. Adequate supplies of PPE shall be maintained within the work area at all times.
- b. Supervisors shall designate those tasks which require the use of PPE and shall provide training on the use of PPE. See Appendix A.
- c. Directors, Managers and Supervisors are responsible for enforcing the use of required PPE by employees within their department.
- d. Employees must use the designated PPE.
- e. PPE contaminated with biological material:
 - 1) Disposable items must be removed immediately and discarded in the biohazard waste.
 - 2) Reusable items must be decontaminated as instructed by the manufacturer. Contaminated reusable PPE shall not be used until the equipment has been decontaminated.
- f. PPE contaminated with chemical:
 - 1) Disposable items must be removed at once and disposed of as chemical hazardous waste.
 - 2) Reusable items must be removed immediately and decontaminated as instructed by the manufacturer. Contaminated reusable PPE shall not be worn until the equipment has been decontaminated.
- g. Contaminated personal protective equipment may be removed from the work area.
- h. Reusable PPE shall be cleaned at the expense of the Company. No PPE shall be taken from the work site and cleaned at home.
- i. Employees must remove all PPE prior to leaving the work area. See note below
- j. Employees are required to wear a mask or respirator during direct patient care as specified on the isolation posting when entering an isolation area. Masks and respirators are provided by the Adventist Healthcare hospitals. Respirator fit testing follows the specific hospital protocol.

Note: During pandemic events, PPE requirements may be altered by the hospital and/or other regulatory agencies. Employees must adhere to these policies and requirements.

6. RELATED DOCUMENTS

- Chemical Hygiene Plan, Safety SOP
- Bloodborne Pathogens Exposure Control Plan, Safety SOP
- Respiratory Protection Certification Process (Fit Testing), Phlebotomy procedure
- Masks & Respiratory Policy, IP3.0, Infection Prevention, White Oak Medical Center, available on Adventist Healthcare intranet
- Health Care Worker Respiratory Protection, AHC CP 91.0, AHC Clinical Policy, available on Adventist Healthcare intranet
- COVID-19 Healthcare Worker Mask Policy, AHC CP 182.0, AHC Clinical Policy, available on Adventist Healthcare intranet

7. REFERENCES

29CFR 1910.1450 *Occupational Exposure to Hazardous Chemicals in Laboratories*, OSHA.
 29CFR 1910.1030 Bloodborne Pathogen, OSHA

8. REVISION HISTORY

| Version | Date | Reason for Revision | Revised By | Approved By |
|---------|---------|---|------------|-------------|
| | | Supersedes Personal Protective Equipment (PPE) Usage, dated 3/1/2004 | | |
| 000 | 5/6/16 | Section 3: update job titles Section 5: remove CHY, QDNI and EHS Section 6: add phlebotomy SOP Footer: version # leading zero's dropped due to new EDCS in use as of 10/7/13 | L. Barrett | L. Loffredo |
| 1 | 5/24/18 | Updated owner Header: added other sites Section 6: updated hospital policies | L Barrett | R SanLuis |
| 2 | 5/18/20 | Header: changed WAH to WOMC Section 5: added pandemic note Section 6: updated hospital policies App A: added Face/Eye PPE for plating swabs outside BSC | L Barrett | R SanLuis |

9. ADDENDA AND APPENDICES

Appendix A - Task List of Required Personal Protective Equipment (PPE)

Appendix A

Task List of Required Personal Protective Equipment (PPE)

Required PPE marked with an “X”

| Task | Gloves | Face/Eye | Lab Coat | Comments |
|---|--------|----------|----------|--|
| Handling Specimens | | | | |
| Handling closed containers of biological/chemical materials | X | | X | Employee must make sure caps are tightly secured to containers. Use face/eye PPE if container is in dry ice. |
| Handling closed containers of biological materials contained inside of closed zip lock bags | | | | Any openings in the skin must be covered. |
| Handling open containers of biological/chemical materials | X | X | X | |
| Transferring biological/chemical materials (i.e., pouring, pipetting, etc.) | X | X | X | |
| Vortexing closed containers of biological/chemical materials | X | | X | Vortexing of open containers is not permitted. Make sure cap is secure before vortexing. |
| Performing work in a biological safety cabinet (BSC) or chemical fume hood | X | | X | The BSC face is pulled down to protect the face and eyes. |
| Plating swabs and environmental cultures outside of the BSC (Micro) | X | X | X | Take care not to “flick” the swab during plating. |
| Plating biological materials outside of the BSC (Micro) | X | X | X | For all unfixed biological matrices |
| Specimen Collection | | | | |
| Non-invasive phlebotomy procedures (i.e., urine collection) | X | | X | Splitting or pouring urines requires the use of eye/face protection. |
| Invasive phlebotomy procedures (i.e., blood collection) | X | | X | |
| Waste / Cleaning | | | | |
| Preparing medical waste for transport or removal | X | X | X | Handle waste bags only by the neck. |
| Cleaning a spill of biological material/chemical spill | X | X | X | Broken glass and sharps (if any) must be removed from the spill by the use of mechanical means. Hands must not be used to pick up broken glass. |
| Routine decontamination of work surfaces (end of shift) | X | X | X | |