

Holyoke Medical Center, Inc.  
575 Beech Street  
Holyoke, MA 01040

## Laboratory

Category 3

### *Laboratory Fire Plan*

#### **Purpose**

To define laboratory responsibilities in the event of a fire.

#### **Principle**

It is the policy of the laboratory to establish effective fire control measures in accordance with hospital policy.

#### **Laboratory Safety Requirements for Fire Prevention**

For Fire Safety, all laboratory employees are required to know:

- How to report a fire using the RACE acronym
- The location of the nearest fire alarm and fire extinguishers (and how to operate)
- The location and use of heat resistant gloves- used to remove or handle hot vessels or turn off hot valves or handles. **Caution:** Heat resistant gloves are permeable. Steam or hot liquids can soak through and cause injury.
- The appropriate evacuation route for laboratory personnel
- The location and use of eyewash stations and the emergency shower (see Policy 3.03, Quality Control Eyewash Stations in this manual)
- Proper storage of flammable reagents- quantities of one gallon or over must be in safety cans. Bulk storage must be in a safety cabinet for flammables while small quantities, "in use", must be stored in well ventilated areas. Flammable liquids must not be stored in areas exposed to direct sunlight.
- Ignition source problems (i.e., open flames, heating elements, spark gaps, friction, static, etc.) must be reported to the department supervisor immediately. Keep ignition sources away from areas where flammable liquids are used/stored.
- All chemicals must be properly labeled with the NFPA labels according to hazardous rating standards
- There is no smoking on the hospital campus

#### **Procedure**

The Holyoke Medical Center Fire Plan will be followed by the Laboratory Department using the "RACE" system which stands for **R**escue, **A**nnounce, **C**ontrol, and **E**xtinguish. The following are other criteria specific to the department which must be followed:

1. In the event of a fire, code (333)(drill only), all employees who are out of the department either at lunch, break, or elsewhere do not need to return to the laboratory unless the drill is located in the laboratory. If the drill is located in the laboratory, staff should treat the drill as an actual code. During an actual code 333, all staff should return to their departments. Do not use elevators to

return. Use stairwells.

2. If the fire is in the Laboratory, each employee will either go to their specific department or an adjacent department, or the assigned meeting area listed below in paragraph 8 if the Fire Department has determined that the entire lab must be evacuated. During a **Fire Drill**, the Security Department is acting as the Fire Department. Their instructions should be followed.
3. **Third shift laboratory personnel will bring down elevators to the first floor and lock them out** (on first and second shift, Health Information Management personnel is responsible for this task). **Third shift laboratory personnel will report to the emergency department.**
4. If a fire is announced on second shift, **laboratory and other non-nursing personnel will report to the front lobby labor pool** to prevent personnel and visitors from entering the hospital during a Code "333".
3. **RESCUE** - The person discovering a fire within the department:
  - a. Directs any individuals within fire area away from the affected area to the front lobby area (or designated area, see #8). Evacuation should be horizontal and should take place along the right side of corridors and stairwells.
  - b. Assigns a co-worker to assist anyone needing special assistance.
4. **ANNOUNCE**- The person finding the fire, or his/her designee, will then:
  - a. Pull the alarm closest to the affected area.
  - b. Report the location of the fire via the hospital telephone system: Dial 333. **Announce "CODE 333"**. Give your name, location and a brief description of the fire. **Be specific as possible- the operator depends on the telephoned report.**

**NOTE:** There are 7 alarm stations within the Laboratory:

- Front corridor between Phlebotomy and the Blood Bank.
- Mailbox lobby area
- Outside Microbiology/Serology
- Outside the evening shift office.
- Outside the Chemistry Supervisor's Office.
- Outside the back door of the Hemo/Chemistry area between Chemistry and Cytology

5. **CONTROL**- On duty lab personnel will **control** the fire in its early stage.
  - a. If safety permits, close doors and windows.
  - b. Shut off electrical equipment whenever possible.
  - c. Shut off all hoods and blowers.
  - d. Locate the nearest extinguisher.
  - e. If trained, utilize the appropriate extinguisher to attempt to put out the fire.
6. **EXTINGUISH THE FIRE**

There are 14 extinguishers in the Laboratory. Each unit is an all-purpose ABC extinguisher except as designated. The following locations are listed below.

  - a. Outside the doorway leading to the O/P Phlebotomy waiting area (BC)
  - b. In the corridor between Phlebotomy and the Blood Bank.
  - c. Outside the Phlebotomy Processing area
  - d. In the hall by the mailboxes.
  - e. In the break room adjacent to Chemistry (BC)

- f. In Hemo/Chemistry opposite the Shift supervisor's office
- g. In Hemo/Chemistry near the Hematology supervisor's office entrance
- h. Inside the Point of Care Testing Area (BC)
- i. In Hemo/Chemistry outside the Chemistry supervisor's office
- j. Outside the back door of Hemo/Chemistry
- k. In the corridor outside Histology
- l. In the Histology lab (BC)
- m. In the hall diagonally across from Microbiology
- n. In the Cytology lab (BC)

### **TYPES OF EXTINGUISHERS**

Class BC Extinguishers - Use for flammable liquids and electrical fires.

Class ABC Extinguishers - Multipurpose extinguisher for use on wood, cloth, paper, flammable liquids, electrical fires, and computer fires.

7. Once the appropriate fire extinguisher has been chosen, the acronym "PASS" should be used as a guide to the sequential steps for extinguisher use.
  - P** - pull the pin
  - A** - aim the nozzle at the base of the fire
  - S** - squeeze or press the handle
  - S** - sweep the stream of extinguishing agent from side to side at the base of the fire until the fire is out.
  
8. **Evacuate** the area if deemed necessary by the Fire Department and/or our Security Department using the designated routes.
  - a. Hemo/Chemistry, Cytology, Histology, Microbiology/Serology and Pathology offices shall be evacuated to the outside via the door adjacent to Serology. The emergency exit outside the Chemistry Supervisor's Office may also be utilized to vacate.
  - b. Blood Bank and Phlebotomy shall exit through the hospital's main entrance.
  
9. Evacuated employees will meet other personnel in the parking lot by the loading dock. Employees who are out of the laboratory area and unable to return to the laboratory, must report to the loading dock in order to be accounted for (drills are performed by Security, Security officers will direct employees during the drill, drills may be verbal explanations only, etc).

### **Fire Drills**

Every laboratory staff member is required to review the fire plan on an annual basis. Actual fire drill exiting does not need to occur, but there must be a physical evaluation of the escape routes performed yearly. Both must be documented.

**All hospital personnel are reviewed annually on fire safety and the use of fire extinguishers through our Risk Management Department.**

### **Responsibilities**

The Laboratory Safety Committee is charged with the ongoing review, evaluation and resolution of employee concerns regarding safety issues. The Laboratory Safety Officer is responsible for annual review and adequacy of safety equipment in coordination with Risk Management and the hospital's Environment of Care Committee.

### **References**

Administrative Policy and Procedure Manual, Holyoke Medical Center, Inc. Fire Plan, A08-C001,

January, 2010.


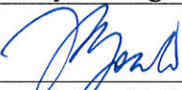
CAP Laboratory General Checklist. Revised 9-27-2007.

CAP Laboratory General Checklist. GEN.75400. 8.17.2016.

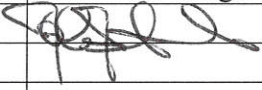
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Approved By:		
	John J. Szczepanek, MT (ASCP) Laboratory Manager	12/1/16 Date
		12/2/16 Date
	Thomas S. Gould, M.D. Medical Director	Date

Reviewed:

Date	Lab Manager/Designee	Date	Lab Manager/Designee
12/1/16			

Revision History			
Version	Summary of Changes	Author	Date
14	Rescue section clarified to match hospital policy	glik	12/5/12
15	Exit fire drill no longer necessary per CAP, Hospital change regarding fire drill included	glik	11/29/16

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**Laboratory Fire Evacuation Route Evaluation**

\_\_\_\_\_ conducted an inspection of the laboratory evacuation route.

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**Signature/Date**

