



Vice President and Chief Executive Officer of the Medical Center

MEDICAL CENTER POLICY NO. 0268

- A. SUBJECT: Management of Hazardous Drugs
- B. EFFECTIVE DATE: July 1, 2011 (R)
- C. POLICY:

The Medical Center provides safe management of hazardous drugs through drug selection, staff education and training, provision of equipment and personal protective gear and devices, and disposal procedures. Certain prescription drugs dispensed by the Pharmacy and used in providing healthcare at the University of Virginia Medical Center are classified as hazardous by the National Institute for Occupational Safety & Health (NIOSH) Hazardous Drug Formulary. These drugs may pose occupational risks to healthcare workers through acute and/or chronic workplace exposure. Exposure may occur during drug preparation, transport, or administration; during the disposal process; when handling patient excreta; and in the event of spills. University of Virginia Medical Center employees, who work with hazardous drugs, shall receive training in the handling, preparation, administration and disposal of any hazardous drug.

- D. PROCEDURE:
 - 1. The Office of Environmental Health and Safety, working with the Pharmacy, shall maintain an inventory and corresponding guidance documents (MSDS) of all hazardous drugs used in the Medical Center. MSDS sheets are available on the computer desktop ("MSDS") for use by all employees. The Pharmacy and Therapeutics Committee, in conjunction with the Pharmacy Department, shall be responsible for the regular review and update of this inventory.
 - 2. Managers of areas where hazardous drugs are present shall ensure that their employees receive training on the handling, preparation, administration and disposal of hazardous drugs and the use of closed system drug transfer devices. The Hazardous Drug Safe Handling module is available for training in NetLearning.
 - 3. All injectable hazardous drugs shall be compounded by the Pharmacy in a Class II Biological Safety Cabinet (BSC) designed specifically to prevent hazardous drugs from being released into the environment, and protect the operator. "Compounding" includes crushing, reconstituting or otherwise altering the state of the drug in which it was received.

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4. All hazardous drug Epic electronic medical record orders shall be labeled with a special hazardous substance warning.
5. All employees who handle hazardous drugs shall wear appropriate personal protective equipment (PPE) for the task. PPE may include powder-free nitrile gloves, low-lint, low-permeability disposable gowns and sleeve covers, and eye and face protection.
6. Incidents involving acute exposure to hazardous drugs shall be reported to Employee Health as soon as possible after initial emergency care.
7. Unused or partially used (greater than trace or 3% initial volume) hazardous drugs shall be disposed of in a plastic lined white bucket or returned to the Pharmacy. The white buckets are provided by Office of Environmental Health and Safety (OEHS), and units shall call them (982-4911) for pick-up when full. No sharps are allowed in the white buckets.
8. Hazardous drug waste (empty IV bags, tubing and other devices containing trace materials with or without attached sharps) shall be disposed of in the yellow sharps container. Yellow sharps containers are available in the Medical Center Storeroom. When the yellow container is full, unit staff shall seal it closed.

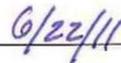
Environmental Services personnel shall pick up the yellow containers for disposal from the Soiled Utility Room; they will not pick up open containers.

9. A chart outlining proper disposal is maintained on line ([“Where does all that garbage go?”](#)) Units can obtain charts from the Safety Programs Manager.
10. A small number of drugs are classified to require that their containers, whether empty, full or partially used, be returned to the Pharmacy for disposal; this information shall be noted in the Epic electronic medical record order screen, label and Patient Treatment Plan.
11. Any questions about the handling, preparation, administration and disposal of any hazardous drug should be directed to the Pharmacy Drug Information Center at 924-8034 or employees may refer to drug information available through MicroMedex.

SIGNATURE:



R. Edward Howell, CEO, UVA Medical Center



DATE:

Medical Center Policy No. 0268 (R)
Approved September 2005
Revised June 2007, March 2009, June 2011
Approved by Chief Environment of Care Officer
Approved by Medical Center Administration