

# 2025

## Crouse Health

# OSHA Requirements for Healthcare

1. Hazard Communication Standard
2. Bloodborne Pathogen Standard
3. Patient with Tuberculosis
4. PPE Standard
5. Ionizing Radiation Standard
6. Exit Route Standards
7. Electrical Standards
8. Emergency Action Plan Standard
9. Fire Safety Standard

# 1. Hazard Communication

## Background

USP 800 is a new regulation intended to protect healthcare personnel and patients from medications identified as **hazardous drugs** (HDs).

These regulations apply to countless departments in the hospital including: Pharmacists, Pharmacy technicians, Nurses, Nursing Assistants, Providers, EVS team members, Maintenance team members, Transporters, etc.

**Goal:** All staff who handle hazardous drugs will be aware of the policies and procedures associated with hazardous drugs to prevent harm to patients, minimize exposures, and minimize contamination of work and patient care environments.

## How will I know if a drug I am handling is hazardous?

All Group 1 HDs will be labeled as "Chemotherapy" or "Anti-Neoplastic"  
All Group 2 and 3 HDs will be labeled as "Hazardous Drug."



CAUTION: ANTI-NEOPLASTIC MATERIAL  
- HANDLE PROPERLY



CAUTION: Hazardous Drug. Special Handling and Special Disposal Required



CAUTION: HAZARDOUS DRUG. OBSERVE SPECIAL HANDLING, ADMINISTRATION AND DISPOSAL REQUIREMENTS

## 2. Bloodborne Pathogens



- Approximately 5.6 million workers in health care and other facilities are at risk of exposure to bloodborne pathogens such as human immunodeficiency virus (HIV – the virus that causes AIDS), the hepatitis B virus (HBV), and the hepatitis C virus (HCV)
- OSHA's Bloodborne Pathogens standard prescribes safeguards to protect workers against the health hazards from exposure to blood and other potentially infectious materials, and to reduce their risk from this exposure

# Who is covered by the standard?

- All employees who could be “reasonably anticipated” as the result of performing their job duties to face contact with blood and other potentially infectious materials
- “Good Samaritan” acts such as assisting a co-worker with a nosebleed would not be considered occupational exposure

# How does exposure occur?

- Most common: needlesticks
- Cuts from other contaminated sharps (scalpels, broken glass, etc.)
- Contact of mucous membranes (for example, the eye, nose, mouth) or broken (cut or abraded) skin with contaminated blood

# Exposure Control Plan

Exposure Control Plan consists of:

- Hepatitis B immunizations for all employees potentially at risk for exposure obtained through the Employee Health Office
- Standard Precautions including gloves, gowns, masks, goggles, hand washing, and hand sanitizer, allow the employee to be safe when providing care or working with patients.
- Each task will require a different set of equipment or procedures that will keep you , the employee, safe. **Know what you need to use.**

As part of the Exposure Control Plan, the hospital is responsible to inform you that **ALL** individuals working in healthcare have the potential to be exposed to the following diseases:

**\*Hepatitis B**

**\*Hepatitis C**

**\*HIV**

These viruses can be found in the blood, semen, vaginal secretions, or in fluids that typically are located in joints, lungs, or in the spine. Additionally, amniotic fluid from the birth of a baby can contain these diseases.



**Hepatitis** is a viral infection that causes inflammation of the liver. Some individuals, once infected, can become chronic carriers.

Symptoms include: yellow skin or eyes, flu like symptoms, dark urine, nausea, extreme fatigue, or joint pain. Some individuals have no symptoms.

Hepatitis can be a chronic illness—one that lasts a lifetime---and can lead to liver damage or eventual death.

**Human Immunodeficiency Virus (HIV)** is a disease which weakens the body's immune system. The immune system helps the body fight infections.

It is caused by exposure to the blood, semen, or vaginal fluids of an infected individual.

The risk of getting HIV from a needle stick or sharp injury is 0.3%.



# Universal Precautions

- Treat all human blood and certain body fluids as if they are infectious
- Must be observed in all situations where there is a potential for contact with blood or other potentially infectious materials

# Engineering Controls

These controls reduce employee exposure by either removing the hazard or isolating the worker. Examples:



- Sharps disposal containers
- Self-sheathing needles
- Safer medical devices
  - Needleless systems
  - Sharps with engineered sharps injury protections

# Safer Medical Devices

- *Needless Systems:* a device that does not use needles for the collection or withdrawal of body fluids, or for the administration of medication or fluids
- *Sharps with Engineered Sharps Injury Protections:* a non-needle sharp or a needle device used for withdrawing body fluids, accessing a vein or artery, or administering medications or other fluids, with a built-in safety feature or mechanism that effectively reduces the risk of an exposure incident



# Work Practice Controls

These controls reduce the likelihood of exposure by altering how a task is performed. Examples:

- Wash hands after removing gloves and as soon as possible after exposure
- Do not bend or break sharps
- No food or smoking in work areas



# Housekeeping

Work surfaces must be decontaminated with an appropriate disinfectant:

- After completion of procedures,
- When surfaces are contaminated, and
- At the end of the work shift

All contaminated equipment or work surfaces need to be disinfected between patients.



## Regulated Waste

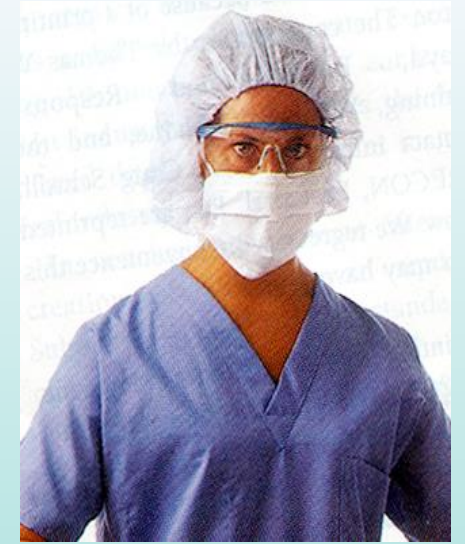
Must be placed in closeable, leak-proof containers built to contain all contents during handling, storing, transporting or shipping and be appropriately labeled or color-coded.

# 3. If a patient is admitted with TB

- The doors to the room must be kept closed.
- Engineering test the airflow into the room with a “smoke” test, to verify it is a negative pressure room.
- All Medical Team members must wear mask that filter the air referred to as N95 (e.g. “duck bill” or Gerson type) or a PAPR (positive air pressure).
- An Additional filtration machine is placed in the room only if the room does NOT have negative pressure.

# 4. Personal Protective Equipment

- Specialized clothing or equipment worn by an employee for protection against infectious materials
- Must be properly cleaned, laundered, repaired, and disposed of at no cost to employees
- Must be removed when leaving area or upon contamination
- All Medical Staff are required to have an annual N-95 Fit Test



## Examples of PPE

- Gloves
- Gowns
- Face shields
- Eye protection
- Mouthpieces and resuscitation devices

# Exposure or Spill onto an Healthcare Worker

## Hazardous Substance Exposure Plan P0911

- Personnel call for help if needed
- Contaminated clothing is removed immediately and disposed in trace HD waste receptacle
- The affected eye is flushed with water for at least 15 minutes using an eye wash station
- Wash affected skin with soap and water and rinse thoroughly
- Refer to drug-specific Safety Data Sheet for additional first aid measures
- Document the exposure in the occurrence reporting system

Report ALL exposures to the employee health office  
as part of the medical surveillance protocol



# Spills in the Hospital

## Hazardous Pharmaceutical Waste P0396

HD spills must be cleaned up as quickly as possible by a person familiar with the proper procedures, and all persons in the immediate area must be informed of the spill.

Spill kits containing absorbent materials, gowns, gloves, and wipes are available in the pharmacy and in all clinical areas. Spill kits should be used according to package directions.

If a spill contaminates a HEPA filter, the filter must be replaced.

Do NOT touch or walk through a HD spill to avoid spreading!



# Biohazard Warning Labels

- Warning labels required on:
  - Containers of regulated waste
  - Refrigerators and freezers containing blood and other potentially infectious materials
  - Other containers used to store, transport, or ship blood or other potentially infectious materials
- Red bags or containers may be substituted for labels



# Summary

- OSHA's Bloodborne Pathogens standard prescribes safeguards to protect workers against the health hazards from exposure to blood and other potentially infectious materials, and to reduce their risk from this exposure
- Implementation of this standard not only will prevent hepatitis B cases, but also will significantly reduce the risk of workers contracting AIDS, Hepatitis C, or other bloodborne diseases



# 5. Ionizing Radiation – Occupational dose



- Definition: Radiation a worker has received in 1 year while working
- At Crouse- departments with radiation use:
  - Radiology - Some OR cases or Hybrid OR
  - Oncology - Cardiology
- Patient as the source of radiation: Radioactive implant or radiopharmaceuticals being used
- Exposure during pregnancy-
  - Growth restriction - Malformations
  - Impaired brain function - Cancer
- Protection:
  - Minimize time, increase distance between you and the source, use proper shielding
- Comply with all radiation protection regulations and institutional policies and procedures

# MRI



- **Keep all metallic equipment out of the MRI magnet room.**
- **Only specially certified MRI safe equipment can enter.**
- **Patients and staff must be checked and certified safe to enter the scanner room.**
- **Use hand magnet to test objects.**
- **MRI personnel are responsible to check everyone who enters the scanner room.**



In the event of a Medical Emergency in the MRI Room:

- Patients will be moved out of the scanning room as soon as possible.
- MRI Personnel will start CPR and maintain CPR, if indicated.
- Crash Carts are **NEVER** brought into the scanning room.



# Lasers

Employees using lasers must be trained in their safe use. Laser equipment is labeled with power and wavelength information.

Laser equipment that can result in risk of injury is labeled with hazard warning signs, including **Caution** or **Danger** signs.



Good safety practices:

- 1) Use provided PPE
- 2) No jewelry
- 3) No direct looking into the laser

All lasers at Crouse are monitored by the Laser Safety Committee

# 6. Exit Route Standards



Formularize yourself with the exit routes.

Follow exit signs and posted emergency exit diagrams.

Irving building stairwells are on the east side of the building on both the North and South Ends.

Memorial Building Stairwells are located on the North and South Ends of the building.

# 7. Electrical Standards

- Only use equipment on which you have been trained.
- Hazards to look for:
  - Damaged broken cords
  - Loose connections
  - Water / liquid spills
  - Sparking/ smoking equipment
  - Loss of grounding
- Never use damaged or broken equipment.

The Safe Medical Device Act states anyone who witnesses, discovers, or otherwise becomes aware of information that a piece of equipment has, may cause, or contributes to the death of a patient *is responsible for immediately assessing the patient and reporting the incident.*



# 8. Emergency Action Plan Standards

## Codes

Code Blue: Adult Medical Emergency

Code White: Pediatric Medical Emergency

Code S: Medical Emergency *not* in the main hospital.

Code OB: Medical Emergency of OB patient on non-OB floor

Code Red: Fire

Code Amber: Potential Infant Abduction

Code Black: Severe Weather

Code Silver: Weapon

Within the hospital:  
To call a code: Dial X1755

In the event of a medical emergency involving a NON-PATIENT, the individual **MUST IMMEDIATELY be transported to the EMERGENCY ROOM ONLY (without any exceptions) for further care.** Prior to and during transport, BASIC LIFE SUPPORT (including ongoing CPR) will be provided. **Transport to ED should not be delayed**

# Security (x17826)

- Report any suspicious persons or activities immediately
- Wear your badge on upper torso at all times

How do I as a staff member respond to an active threat or active shooter?

**“Run, Hide, Fight”**



# Generator Back-Up

When normal power is interrupted, an emergency power system takes over selected systems. The system is powered by diesel fueled generators. The emergency power system comes on line within 10 seconds of normal power being interrupted.



All patient care equipment should be plugged into red outlets



# Hospital Incident Command System (HICS)

**CODE HICS means** the hospital is responding to a disaster, internal or external.

Identify patient acuity and those patients who could be moved to less acute area.

Identify staff members to participate in float pool if necessary.

If called at home to come in, find out where to park and bring your hospital ID.



# 9. Fire Safety Standards

There are three elements in every fire:

\*Heat      \*Oxygen      \*Fuel

If one element is missing, there can be no fire.



In the event of a fire, a Code Red is called.

“Code Red” and the location may be paged over head four times.



# Fire Safety Standard

- Code **RED**
  - Avoid elevators
  - Do not open fire doors before ALL Clear
  - Respiratory therapy / Engineering directs shut off of medical gases

Firewalls separate buildings into Fire and Smoke compartments.

- Each stairwell is a separate fire compartment.
- Patient rooms are within smoke compartments. The door to a patient room protects from smoke and fire.



In the event of a fire, remember to  
**RACE.**



To operate the Fire Extinguisher remember **PASS**

