

Managing Hazardous (Cytotoxic) Drug Spills

Drug spills may occur alone or together with one of the four steps in the drug delivery processes listed below:

- **Drug transportation**
- **Drug preparation**, for example-oral tablets that require dissolving in liquid prior to being administered via a NG feeding tube
- **Drug administration**, for example-Intramuscular or subcutaneous injections—drug escapes when a syringe is dropped onto the floor; Intravesicular (bladder)—patient experiences urinary incontinence
- **Disposal of supplies**

Step 1: Assessment And Immediate Management Of Patient And Staff

1. **Access** “Spill Kit” and place “Caution-Hazardous Drug Spill” signage on parameter of spill.
2. **Isolate** the spill area and determine the extent of the exposure.
3. **Isolate** individual(s) from spill as able.
4. **Wash** any affected skin (including patient) immediately with soap and water then flush area under tepid running tap water x 15 minutes.
5. **Flush** immediately all patient and staff eye splashes at eye wash station. In the event an eye wash station is not available use 1 L of normal saline with IV tubing attached. Following irrigation go directly to emergency for an immediate eye assessment.
6. **Wash** needle stick injury—puncture site with soap and running water x 15 minutes and squeeze puncture site to bleed freely. Following these steps go directly to occupational health (emergency if after hours).
7. **Change** clothing/linens as appropriate (follow safe handling of linen guidelines).

Step 2: Notification And Spill Clean Up

1. **Notify** Environmental Services (ext. 2309) reporting the location and extent of the spill.
2. **Don** Protective Equipment (PPE)-double glove, disposable gown, face shield, shoe covers and N95 mask).
3. **Clean up spill:**
Hard Surfaces:
 - Wipe up liquids by using absorbent pads;
 - Wipe up solids by using wet absorbent gauze pads
 - Pick up glass fragments using a small scoop and place in a puncture-proof container
 - Clean the spill area from least contaminated to most contaminated areas’ using a detergent solution followed by clean water
 - Use fresh detergent solutions to wash reusable items used to clean up the spill and items located in the spill area e.g. pump. Use water to rinse the washed items. Repeat the washing and rinsing.**Carpeted Surfaces:**
 - Use absorbent powder, not absorbent towels, to absorb the spill
 - Use a vacuum cleaner to remove the powder
 - Clean the carpet as usual
4. **Remove** contaminated items by notifying Central Processing Services (ext. 4020) for collection of non-disposable items e.g. pumps and the Porter Service (ext.4239 or pager #403 after hours) to remove contaminated items such as linens or other non-disposal items from the patient care areas (as per Environmental and CPS procedures). Ensure all contaminated: disposable items are placed into a Hazardous (Cytotoxic) waste container and non- disposable items are placed into a double laundry bag or double clear bags labeled with Hazardous (Cytotoxic) stickers or label as Hazardous (Cytotoxic).

Step 3: Documentation And Employee(s) Report

All employees exposed to the spill or involved in the cleanup will:

1. **Complete** an “Unusual Occurrence” and “Employee Incident Report” (Information to include-type of exposure e.g. eye splash, drug name, volume spilled e.g. less than 5mL or greater than 5 mL, method of administration, description of spill and procedure followed in clean up).
2. **Inform** patient of potential hazards, notify physician, and-document on patient record.
3. **Proceed** to Occupational Health & Safety or to Emergency after 2000 hrs or on Weekends.