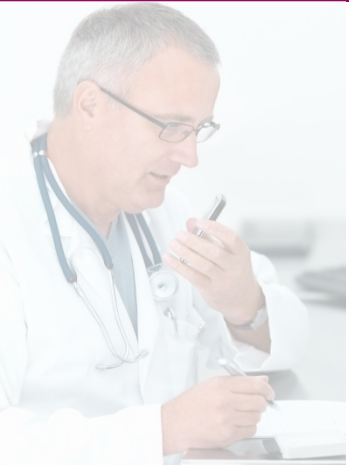


Managing the Mandatories

May 2024



EXTRAORDINARY CARE FOR EVERY GENERATION

In order to satisfy your annual requirements, please read this entire course.

Because there are several different locations within Covenant HealthCare, you will also need to review any departmental policies and procedures, specific to your area, for any of the topics covered in this course. If you have any questions, please contact your manager, Safety Officer/EM (3.7989), Safety Manager (3.4090), or Infection Prevention and Control. Quizzes are due by May 31, 2024. Newly hired employees must complete within 14 days of their start date.

USP <800>

First set of enforceable standards for handling hazardous medications.

- USP <800> applies to all healthcare personnel who will come in contact with hazardous drugs (HDs).
Examples: pharmacy, nursing, physicians, home healthcare workers, phlebotomy, environmental services, supply chain, etc.
- Requires all drugs on the NIOSH list to be considered hazardous.
An Assessment of Risk has been performed to exempt certain medications from the safety requirements.

Hazardous Drugs

NIOSH 2020 classifies drugs and medications into two categories:

- Group 1: Hazardous drugs that are classified as known or probable carcinogens.
- Group 2: Hazardous drugs but not classified as known or probable carcinogens.

Covenant's assessment of risk breaks these into 3 categories:

Group A

- NIOSH Table 1 antineoplastic injectable/topicals/oral liquids

Group B

- NIOSH Table 1 antineoplastic tablets/capsules

Group C

NIOSH Table 1 non-antineoplastic and NIOSH 2 all dosage forms

Hazardous Drugs

Potential Exposure

Workers may be exposed during:

- Receiving the drug
- Transport
- Dispensing
- Preparation
- Administration
- Spills
- Disposal
- Handling bodily fluids and linens

Occupational exposure to hazardous drugs can result in:

- Acute effects - (i.e., skin rashes and nausea).
- Chronic effects - (i.e., reproductive toxicity and cancer).

All personnel involved in the handling of hazardous drugs should be knowledgeable about safe practices required for handling and administering the drugs/medications.

**CAUTION:
Hazardous Drug
Special Handling
Special Disposal
Required**

Hazardous Drugs

Environmental Controls

- All HDs must be labeled to identify them for special handling and transported in a sealable bag to avoid spills
- No liquid hazardous medications will be sent in the pneumatic tube system
- Patient's MAR will reflect all PPE and disposal requirements

Admin Instructions: Group C Administration: Single chemo glove. Wear protective gown/eye/face protection if there is risk of a spill or patient is a spit/vomit risk.

Dispose of any remaining drug in black hazardous waste containers. Discard used PPE into regular trash.

Spill Management: Liquids or creams: Wearing a double chemo gloves wipe up with an absorbent material and dispose into black universal waste. Tablets/capsules: If dropped pick up with single glove and dispose into black hazardous waste containers.

Standard bodily fluid management.

Hazardous Drugs

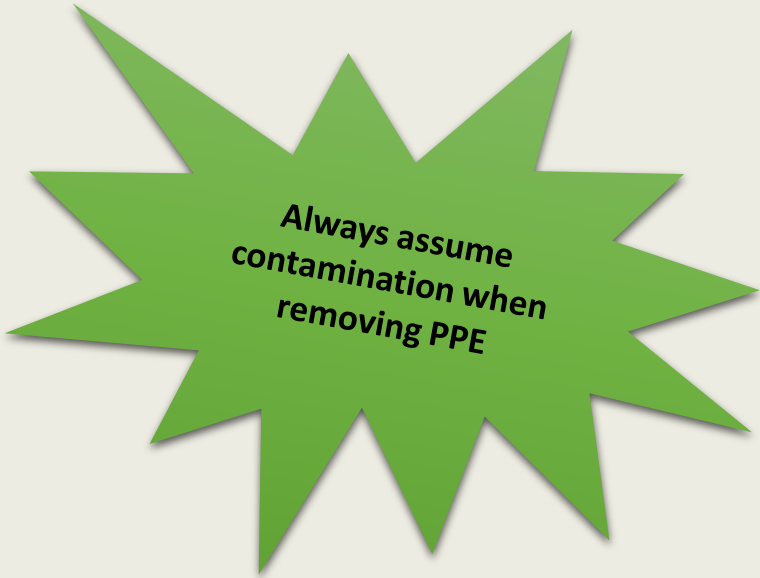
PPE – Gloves and Gowns

GLOVES

- Must be tested for use with chemotherapy drugs
 - Also denoted as being ASTM D6978 certified or its successor
- Should be worn at all times when handling hazardous drugs
- Must be changed after 30 minutes of wear, or if torn
- Wash hands immediately after removing gloves with soap and water

GOWNS

- Must be polyethylene coated
- Must close in the back
- Must have tight-fitting wrist cuffs placed over the first set of gloves and under the second set



***Always assume
contamination when
removing PPE***

Hazardous Drugs

Additional PPE

Eye and face protection should be worn whenever there is a possibility for splashing.

Splash Risk

- Infants
- Unruly/Combative Patients

Spit/Vomit Risk

- Infants
- Unruly/Combative patients
- Difficulty swallowing
- Pre-disposed to spitting



Respirators should be available in times of possible aerosolization
CAPR with an organic vapor filter or fit tested N95 mask

Medical Waste Management

- Healthcare entities nationwide produce more than 9 thousand pounds of waste daily. Healthcare waste poses a threat to the environment and employees if it is not disposed of properly. The EPA, DEQ and MIOSHA are responsible for protecting the environment and any employees who are exposed to waste. Improper waste disposal can cause harm to your coworkers, waste management employees and the environment.
- Covenant Healthcare has a waste management plan located in the safety manual (HMW-009 Waste Management Plan Including Batteries and Pharmaceutical).

The purpose of our plan is to:

- Prevent injuries to fellow coworkers
- Obey the law
- Create a safer environment



Medical Waste Management

Red Medical Waste Containers

- For sponges/dressings that are saturated with blood or body fluid, or containers of blood or body fluids that cannot be opened and rinsed out, i.e., blood transfusion bag
- **No** clean looking bed pans, urinals or pink basins. **No** paper garbage, gloves or urine cups, **No sharps, NO patient information (HIPAA)**

Items that go into red medical waste containers:

- Bone/Tissue
- Grossly contaminated PPE
- Blood Product IV Tubing
- Any tubing that contains body fluids
- Saturated gauze, sponges, bandages, etc.

**If the item is lightly squeezed will it drip blood or body fluid? When the blood or fluid is dried is it capable of flaking material off? If so the item should be disposed of as Regulated Medical Waste (RMW).*



Medical Waste Management

Sharps Containers

- For sharp items that can poke.
- **No** medicine vials, urinals, urine cups, urine, sheets or bedding, empty IV bags, Central line kits, paper products or gloves.

Items that must be placed in sharps containers:

- Blades
- Disposable razors
- Wire guides Lancets
- Scalpels
- Syringes and needles
- Teeth
- Surgical needles
- Guide wires
- IV Spikes if removed from IV bag
- Introducers, etc.
- Urine Cup Lids



Medical Waste Management

General Waste

- **EMPTY** medication vials, empty IV bags (with spike still inserted), empty syringes (separated from any needles), used medication cups, IVPB (piggyback) once HIPAA is removed or covered.
 - **Group C hazardous medication administration waste and PPE Included.**
- For all other trash including rinsed out bedpans, empty urinals, empty suction containers, the bottom of the emptied urine cup (no sharp) paper products and gloves. Double bagged soiled briefs.
- **Nothing** that could potentially poke or break the skin.
- ***NO patient information (HIPAA).***



Medical Waste Management

Trace Hazardous Waste

- **ALL** Group A hazardous medication administration waste: empty vials, empty IV bags (with spike still inserted), used PPE.
 - Empty syringes will not be separated from needles and placed whole in a separate yellow sharps bin
- Group B hazardous medication administration used PPE
- During treatment and for 48 hours after receiving a Group A or B medication: used rinsed out bedpans, empty urinals, empty suction containers, the bottom of the emptied urine cup (no sharp) paper products. Double bagged soiled briefs, or linens.
- **Nothing** that could potentially poke or break the skin.
- ***NO patient information (HIPAA).***



Medical Waste Management








Door Signs

Door signs will be used for patients receiving Group A & B medications.

A MAR Banner will prompt the provider to use the precautions

Hazardous Drug Precautions

FOR MEDICAL PROFESSIONAL STAFF

<p>Always wear this when handling BODILY FLUIDS.</p>  <p>Fluid resistant gown</p>  <p>Double gloves</p>  <p>Face shield if there is a chance of splashing/spraying</p>	 <p>Discard disposable diapers, pads, linens and gowns visibly wet with hazardous drug medication or bodily fluids in the yellow hazardous waste container.</p>
 <p>Discard used garb and empty packaging in the yellow hazardous waste container.</p>  <p>Discard any remaining medication in the black universal waste container.</p>	 <p>Always wash your hands with soap and water after removing garb or handling waste.</p>

Patient waste precautions date effective through ____/____/____.
Includes 48 hours from the last treatment.

Res. Div. (AQR) 1/20 12852 • In compliance of USP <800>, NIOSH and HFAP standards.

COVENANT
HealthCare
Extraordinary care for every generation.

Medical Waste Management

Controlled Substance Waster

For disposal of controlled substances.

Items that do go in the controlled substances containers:

- IV Contents
- Syringe Contents
- Vial and Ampoule Contents
- Patches
- Pills
- Tablets
- Capsules
- Oral Liquids

DO NOT PLACE IN THE CONTAINER:

- IV Bags and Tubing
- Syringes, Vials or Ampoules
- Drugs Other than Controlled Substances



Medical Waste Management

Pharmaceutical Waste Box

For disposal of medications.

Items that do go in the pharmaceutical containers:

- Partially empty medicine vials
- Medicine patches and it's wrapper
- Loose non-narcotic pills, ointments, syrups, liquids and suspensions
- All medicated IVs or IVPB with solution remaining once HIPAA is removed or covered. Clamp tubing first and place into a zip lock bag.
- Injectable containers
- Sponges soaked in liquid meds
- Supplies used for a hazardous medication spill cleanup
- ***NO urine cup lids***
- ***NO patient information (HIPAA)***



Medical Waste Management

Covenant HealthCare – Medical Waste Disposal: Quick Tips

Sharps Containers

- Wire Guides
- Needles
- Syringes
- Razors
- Scalpels/Lancets
- Small Glass Vials
- IV Tubing Spikes if tubing is removed from spike
- Urine Cup Lids

Biohazard Container (Red Bag/Container)

- Organs
- Body Tissues
- OVA & Parasite Transport Vials
- Blood Tubes
- Blood culture vials
- Placentas

Biohazard Container (Red Bag/Container)

- Blood saturated dressings
- Bloody tubing
- Blood Bags with attached tubing
- Pleuravacs
- JP Grenades
- Biohazard bin should not be filled more than 90% to allow for proper seal of the container.

Regular Trash

- Reduce waste as much as possible
- Reuse or recycle (including confidential documents, which should be placed in Shred bins)
- Dispose of food waste, packaging, paper, used supplies,
- Group C Waste and PPE

Chemotherapy Waste (Yellow or Black Container)

- Items used in the preparation and/or administration of chemotherapy agents IV bags or syringes with more than TRACE chemo in them need to go into the Pharmaceutical Waste (black)
- Group A & B hazardous: empty IV bags and tubing (if IV spike is NOT removed), used PPE, empty suction containers, empty bed pans, used administration supplies go into the Trace Waste (YELLOW).
- Any remaining drug waste where there is more than 3% of the vial, bag or syringe remains, Also, any remaining tablets/capsules or pieces of them (BLACK)

Reusable Items

- Separate instruments and supplies from linens and place linens in linen bags.
- Place instruments in soiled instrument tray. (Mark broken instruments with adhesive tape before placing in soiled instrument tray.)
- Place blood saturated linen in clear plastic bag before placing in linen bag.

Medical Waste Management

Covenant HealthCare – Medical Waste Disposal: Quick Tips, cont.

Pharmaceutical Waste (Black Container)

- Capsules or tablets
- Unused or partial vials of medication contain greater than 3% of the medication.
- Antibiotic or Medication bags with medication present without the set
- Syringes with medication without the needle
- Topical ointments (capped)
- Topical medication patches (non-controlled) fold in ½ and dispose in black container

Other General Information

- All containers must be appropriately labeled.
- All waste disposal buckets must be properly sealed before being picked up by EVS.
- Pleuravacs must be securely sealed prior to disposal in biohazard bin.
- Sharps container maximum capacity is 75%.
- Suction canisters must be emptied before placing in regular trash.

Other Pharmaceutical Waste

- Silver Nitrate (return to Pharmacy)
- Controlled substances need to be disposed of in the Controlled Substance bins following Covenant HealthCare and FDA guidelines
- Inhalers (return to Respiratory Therapy in black waste “aerosol” bin)
- Botox or Collodion (return to Pharmacy)
- Plain maintenance IV solutions (no meds added) – Drain remaining fluid and dispose of in regular trash with spike attached.

ACHC Quality Measures

- Are sharps properly disposed?
- Is other medical waste properly contained?
- Are biohazard waste bins and sharps containers properly sealed?
- Ensure that all sharp and pharmaceutical containers are dated when placed into service.
- These are being evaluated CHC wide.

Medical Waste Management

Waste Disposal Decision Tree



Medical Waste *Management*

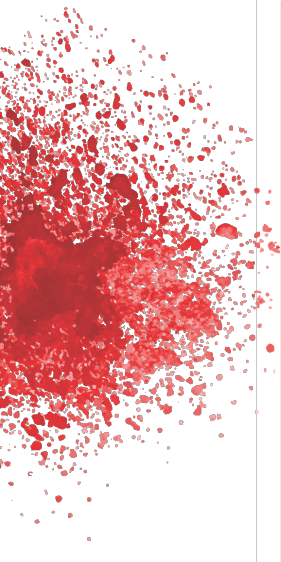
Quiz Questions

- **1. Dispose of inhaler by:**
 - a) Send to Pharmacy
 - b) Black waste bin labeled "aerosols" in the Respiratory Department
 - c) Seal in a Zip-Lock baggie
 - d) All of the Above
- **2. The PPE you were wearing is grossly contaminated with a bloodborne pathogen, you should dispose of the PPE in the:**
 - a) General Trash
 - b) In a red biohazard bag and place in the red medical waste containers
 - c) Pharmaceutical container
 - d) Trace chemotherapy container
- **3. True or False: Door signs will be utilized for patients receiving Group 1 medications.**
 - a) True
 - b) False
- **4. True or False: ASTM D6978 gloves are not chemotherapy approved PPE.**
 - a) True
 - b) False

Michigan's *Right to Know* Law

Employers have the responsibility to provide access to chemical information for workers whose jobs involve the routine use of hazardous chemicals.

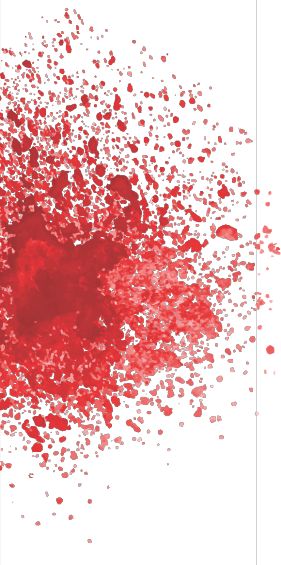
- Hazard determinations (inventories)
- Formal written hazard communication program (policies and procedures)
- Labeling (visible container identifications)
- Safety Data Sheets (SDS)
- Employee information and training
- Community and Fire Department notifications



Michigan's *Right to Know* Law

Employee Rights and Responsibilities:

- Be informed
- Request information and training not be discriminated against for requesting information
refuse to work in an area with unlabeled pipes/containers; and no SDS available
- Employees have the responsibility to:
 - Attend training sessions and ask if they do not know how to work with a particular material
 - Wear PPE when it is provided
 - Report hazardous conditions and act in a prudent manner



Chemical Safety

The Globally Harmonized System **GHS**

GHS Safety Data Sheets

Safety Data Sheets are a detailed source of information for learning about how to safely handle and use chemicals. All Safety Data Sheets will soon be written to follow the Globally Harmonized System (GHS), a worldwide effort by the United Nations to have common ways to describe chemicals and how to use them safely. With GHS, Safety Data Sheets from manufacturers in many countries will offer the same information in the same format.

Follow these rules for Safety Data Sheets:

- Make sure you know where to find a Safety Data Sheet if you need one.
- All Safety Data Sheets can be found online on the VelocityEHS Online program. The link can be found on the internet homepage.
- Ask a supervisor for a Safety Data Sheet if you don't understand the information presented on the product label.
- Ask for help if you don't understand how to safely use a chemical after reading the Safety Data Sheet.

The screenshot shows the CovNet employee portal. The header includes the CovNet logo, a welcome message for Danielle Hassard, and the Covenant HealthCare logo with the tagline 'Extraordinary care for every generation.' A search bar is present with the text 'I'm searching for...'. The main navigation bar has tabs for Human Resources, Life at Covenant, Work Tools, Policies & References, Departments, and Our DNA. The 'Policies & References' dropdown menu is open, listing various manuals and documents. The item 'Safety Data Sheets- VelocityEHS' is highlighted with a red box. Below the navigation bar, there is a promotional banner for the 'Heart of Gold Award' with a 'LEARN MORE' button. At the bottom, there are sections for 'Employee Links', 'News and Safety Alerts', and 'Calendar of Upcoming Events'.

Chemical Safety

The Globally Harmonized System **GHS**

GHS Labels

Chemical labels and Safety Data Sheets are the key sources of information for learning how to safely handle and use a chemical. All chemical labels and Safety Data Sheets are written to follow the Globally Harmonized System (GHS).

Chemical labels that are compliant with GHS must have five things:

- A Product Identifier that gives the name of the chemical, part numbers or other identifiers and the name and address of the manufacturer or supplier.
- Signal Words that tell about the hazard level of the chemical. Danger is for severe hazards and Warning is for less severe hazards. Sometimes there is no signal word, but that does not mean that the product is hazard free.
- A Hazard Statement that describes what kind of harm the chemical can cause.
- Pictograms which are symbols that instantly identify the kind of hazard the chemical poses.
- Precautionary Statements that describe what needs to be done to be safe when using the chemical.

Follow these rules for labeling:

- Make sure all containers have a proper GHS label.
- If you use workplace labels, make sure they include the name of the product and information regarding the hazards of the product.
- Replace torn and/or damaged labels.
- Label smaller workplace containers that have had chemicals transferred into them if they are used during more than one work shift or by more than one employee.

Chemical Safety

The Globally Harmonized System **GHS**

Important Safety Information

- Ask if you don't know how to work with a chemical or product.
- Wear Personal Protective Equipment (PPE) whenever it is indicated -don't take short cuts.
- Know how to clean up spills safely.
- Know what information is on the SDS: located on the Hospital Network, or in the SDS book in your work area. Master books of SDS are located in the ECC and Safety Office.
- You are responsible for knowing how to work with chemicals in your area.
- Your employer is responsible for making sure information on chemicals is available to you.
- Education and training are provided; you are responsible for attendance and participation.
- If a label falls off and you know for sure what is in the container, place a new label on the container. If you are not sure, discard the container's contents appropriately.

Spill Management

- All employees are responsible for initial management of a spill (which may mean securing the area and contacting a contractor for cleanup).
- Always evacuate the immediate area and secure it so that no one further is exposed.
- Check the SDS for instructions on how to manage the spill.
- Use spill kits as appropriate.
- Wear PPE when required by hazard or policy.

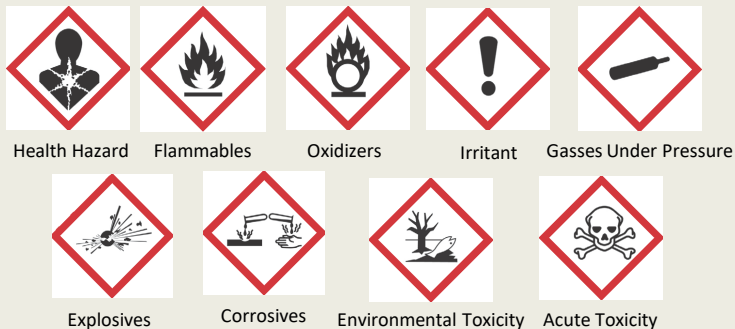
Chemical Safety

The Globally Harmonized System **GHS**

Pictograms

There are nine distinct pictograms that are part of the Hazard Communication Standard. The pictograms are symbols that show what kind of hazards a chemical has.

There can be one or more pictograms on a label depending on the hazards. The pictograms will always be a black symbol on a white background with a red diamond-shaped border.



GHS LABEL SAMPLE

ISOPROPYL ALCOHOL 99% ANHYDROUS

UN 1219. ISOPROPYL ALCOHOL

24 Hour EMERGENCY
NUMBER 444/555-6666

NET WEIGHT
32.00 LBS
14.51 KGS

Danger: Highly flammable liquid and vapor. Causes serious eye irritation. May cause drowsiness and dizziness.



PREVENTION

Keep away from sources of ignition - No smoking. Avoid contact with skin and eyes. Avoid breathing mist and vapors. In case of contact with eyes, rinse immediately with plenty of water and seek medical advice. Take precautionary measures against static discharges.

RESPONSE

IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing. IF ON SKIN (or hair): Remove/Take off immediately all contaminated clothing. Rinse skin with water/shower. IF INHALED: Remove victim to fresh air and keep at rest in a position comfortable for breathing. Avoid breathing. Wear protective gloves/eye protection/face protection. Wash hands thoroughly after handling.

STORAGE

Store in a well-ventilated place. Keep cool. Store locked up. Keep container tightly closed. Keep away from sources of ignition - No smoking

DISPOSAL

Dispose of contents and container to appropriate waste site or **reclaimer**, in accordance with local and national regulations.

Red River Chemicals 4688 Front Street, Riverdale, Illinois 44444
Emergency Phone Number: 444-555-6666

Check Your Knowledge

Who should initially take care of a spill or release?

- A) Call 5-2222 and ask for the spill team
- B) Environmental Services
- C) All employees are responsible for taking care of a spill or release initially even if it is only calling someone else and keeping people out of harm's way
- D) Engineering

Submit

Check Your Knowledge

It is important to always read the label on a product, even if you have used the product many times before and by reading the label you should be able to safely work with the product.

- A) True
- B) False

Submit

Check Your Knowledge

Pictograms can be found on Safety Data Sheets and product labels; the pictograms are intended to convey specific information about the hazards of a chemical. Safety Data Sheets can be found on the Intranet using MSDSOnline and product labels are found on the chemical containers.

- A) True
- B) False

Submit

“On-line” Safety Manual

To Access Covenant’s Safety Manual

The user needs to “sign on” to the network to have access.

“On-line” manuals can be accessed by:

1. Clicking on the **Google Chrome** or **Microsoft Edge** icon on your desktop.
2. Clicking on **Policies & References** tab.

The screenshot displays the Covenant HealthCare Employee Portal. At the top, the 'CovNet' logo is on the left, and the user's name 'Danielle Hassard' is on the right. A navigation bar contains tabs for 'Human Resources', 'Life at Covenant', 'Work Tools', 'Policies & References', 'Departments', and 'Our DNA'. The 'Policies & References' dropdown menu is open, showing a list of links including 'Infection Prevention Manual', 'Safety Manual', 'Covenant Policies and Procedures', 'Epic Knowledge Base', 'External Reference Manuals', 'ACHC Manual', 'HFAP Primary Stroke Manual', 'Infonet', 'Medication Formulary', 'Safety Data Sheets- VelocityEHS', 'Policies - Recently Approved', and 'Policies - Recently Approved Archive'. The 'Safety Manual' link is highlighted in yellow. Below the navigation bar, there is a 'Heart of Gold' award nomination banner and a search bar. The bottom of the page features three columns: 'Employee Links', 'News and Safety Alerts', and 'Calendar of Upcoming Events'.

“On-Line” Manuals

To Access the **velocityEHS** SDS Library

The user needs to “sign on” to the network to have access.

“On-line” manuals can be accessed by:

1. Clicking on the **Google Chrome** or **Microsoft Edge** icon on your desktop.
2. Clicking on **Policies & References** tab.
3. Click on **Safety Data Sheets**.

Searching the **velocityEHS** SDS Library

1. Click on **Safety Data Sheets** to open the program.
2. Enter the *name of the product* in the **search bar**.

Hard Copies of Safety Data Sheets are stored in the Safety office at Cooper and in the ECC.

The screenshot shows the 'velocityEHS SDS Library' search interface. At the top, there is a navigation bar with 'COVENANT' logo and links for 'Chemical Management', 'Dashboard', 'SDS Search', 'Locations', and 'eBinder'. Below this is a search bar with 'All Categories' as a dropdown and 'envirox' entered in the search field. A 'Filters' button is visible on the left. The search results show '118 products match (0 selected)' with a 'Reset Search' link. A 'Sort By' dropdown is set to 'Revision Date (Descending)'. Three product entries are visible:

Product Name	Revision Date	Language	Regulatory Format
EnviroX Fresh Concentrate 118 (Concentrate & Dilutions) EnviroX LLC	04/16/2023	English	GHS SDS, US Ansl
EnviroX H2Orange2 Concentrate 117 (Concentrate & Dilutions) EnviroX LLC	04/05/2023	English	GHS SDS, US Ansl
EnviroX Green Certified: H2O2 Orange Tile and Grout Renovator (Formerly Grout Safe)			GHS SDS, US Ansl

CBRN



Chemical, Biological, Radiological and Nuclear Events

Chemical, biological, radiological and nuclear materials can be dispersed in the air we breathe, the water we drink or on surfaces we come in physical contact with. The dispersion method of these materials may be as simple as placing an open container in a high traffic area, using conventional spray devices (garden or commercial) or as elaborate as detonating an explosive device.

A BIOLOGICAL EVENT uses agents containing living organisms or materials derived from them that cause disease in or harm to humans, animals or plants, or cause deterioration of material. Biological agents may be used as liquid droplets, aerosols or dry powders. Onset of symptoms may take days to weeks and there will be no immediate characteristic side effects (i.e., colored residue, dead foliage, pungent odor or dead insect or animal life). Because symptom onset can be delayed in a biological incident, the area affected may be greater due to movement by affected individuals.

A CHEMICAL EVENT involves the dispersion of chemicals or toxins that cause disease in or harm to humans or other living organisms. A chemical attack is characterized by the rapid onset of medical symptoms -minutes to hours- and easily observed side effects.

A RADIOLOGICAL EVENT will typically use an explosive device to distribute radiological material. Symptoms may not appear for days or weeks. Radiological materials are colorless and odorless, so they are not recognized by human senses. Specialized equipment is required to determine the size of the area impacted as well as if the level of radioactivity presents an immediate or long-term health hazard.

Due to a delayed onset of symptoms in a radiological event, the affected area may be greater due to the movement of contaminated individuals into surrounding areas.

CBRN - DECONTAMINATION

Decontamination

In the event Covenant HealthCare receives self-transporting patients from an incident that requires decontamination our ECC is prepared to decontaminate and treat all patients that present to our ECC.

Generally, patients are decontaminated at the scene of an incident before they are transported by EMS to the ECC. In large events we need to plan for self-transporting patients to the ECC or if the event happened at a home where first responders were not called, and the patient was transported here.

Our ECC has a decontamination shower that can decontaminate two patients at one time. The water from the shower is stored in a holding tank and is secure from releasing the content until it is pumped out or determined it can go into the general wastewater sewer system.

If we receive more than four patients, we have a Zumro portable decontamination shower unit that can be setup outside. This unit is heated or air-conditioned, it has a self-containing bladder for the runoff (grey water) from the shower. In this unit we can shower patients that are mobile and in the event that we have patients that require backboards we have a patient conveyer that we can use to move the patient through the tent.

Covenant is a Level II Trauma Center for pediatric and adult patients, we have made adaptations to the decontamination process to accommodate infants, children and service animals if they should become contaminated.

CBRN

Decontamination Showers





Check Your Knowledge

Quiz Questions

1. Where can a physician find decontamination and treatment information on a chemical that a patient was exposed to?
 - a. Google
 - b. VelocityEHS
 - c. Emergency Response Guidebook
 - d. B & C
2. What are the two ways that the ECC can decontaminate patients?
 - a. Decontamination Shower
 - b. Patient Shower
 - c. Zumero tent
 - d. A&C

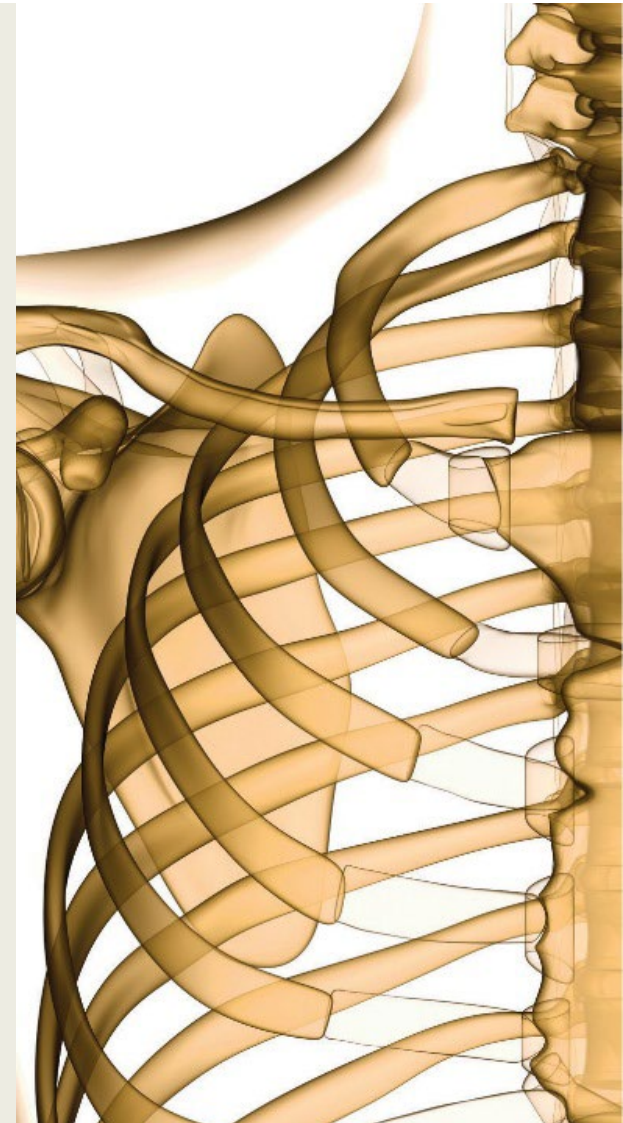
Radiation Safety

Radiation is something you can't smell, feel or touch, but can harm you if you are overexposed. The Covenant Radiation Safety Officer, Dan Dryden, MS, DABR, and the Radiation Safety Committee monitor policy and procedure, as well as exposure to radiation. Their job is to ensure our exposure to radiation is As Low As Reasonably Achievable (ALARA). Nuclear Medicine technologists provide monitoring of radioactivity should there be a spill, leak or terrorist attack using radioactive materials.

Mobile X-Ray

Mobile (portable) x-ray can produce some of the highest occupational radiation exposures. Protection for patients and hospital personnel is critical. The main goal in any radiographic procedure is to reduce the amount of radiation to the patient and staff while still achieving the best diagnostic image.

Mobile (portable) x-ray should only be used to perform radiographic procedures when it is medically inadvisable to transport the patient to the Imaging & Diagnostic (I&D) Department. Mobile (portable) machines are not designed to take the place of a fixed x-ray room. Images obtained in the I&D Department typically have superior diagnostic quality and should be obtained whenever possible.



Radiation Safety

You Can Eliminate Unnecessary Exposure by:

- Limiting the amount of time you are exposed.
- Staying a safe distance from the source (6 feet or more).
- Using proper shielding.

Safe Practices

- Use safe practices and radiation protection equipment including lead aprons to reduce exposure.
- Work quickly and efficiently to reduce the time spent exposed.
- Pay strict attention to warning signs and labels. Radioactive signs are yellow and purple color.
- Wear a radiation monitoring badge when indicated by your job. They do not prevent exposure, but they do indicate the amount and type of radiation received. These badges are required by the Nuclear Regulatory Commission (NRC) and by MIOSHA as well as by hospital policy and procedure.
- Always consult your manager or the Radiation Safety Officer if you must work around radiation and are pregnant.
- Follow instructions from the radiologic technologist when portable images are being taken, or during any other radiologic procedure.

Check Your Knowledge

Increasing a safe distance (6 feet or more) from the source of radiation:

- A) Will reduce the amount of radiation received
- B) Will increase the amount of radiation received
- C) Will not change the amount of radiation received
- D) Will result in the need of a better monitoring device

Submit

Check Your Knowledge

All Lead Aprons and Thyroid Shields need to be checked for holes and voids annually.

- A) True
- B) False

Submit

Check Your Knowledge

What precautions should be observed with the radiation safety practice of ALARA?

- A) Reducing time in proximity to the X-ray source
- B) Increasing distance from the X-ray source
- C) Increasing shielding around the X-ray source
- D) Monitoring exposure
- E) All of the above

Submit

CONGRATULATIONS!



Congratulations!

You have successfully completed this course! Please use the button below to exit and return to SABA Cloud in order to receive credit for this course.