

Hazard Communication/ Right-to-Know

for Medical Staff Office (MSO), Residents, Medical Students and Nursing Students

click. Environmental Health & Safety, 4-6783 https://ehs.stonybrook.edu/programs/healthcare-safety

Revised 1/2019



ENVIRONMENTAL HEALTH AND SAFETY

Any Questions or Concerns?

- For answers to questions or concerns regarding Environmental Health & Safety, please call:
 - Jill Kavoukian, Hospital Safety Officer, at 516-790-5046







Training Outline

- **Environment of Care** \geq
- **Occupational Injury &** \succ **Illness** Prevention
 - Injury Reporting
 - \triangleright Latex Allergy
 - Slips & Trips Prevention \triangleright
 - \triangleright **Ergonomics & Safe** Patient Handling
 - \triangleright **Respiratory Protection**
 - **Contaminated Sharps** Injury Prevention
 - Radiation Safety

- Hazard Communication/Right \succ to Know
 - Safety Data Sheets and \triangleright **Chemical Inventories**
 - Eyewashes/Safety Showers
 - Chemical Spill Response
 - Hazardous Drugs Safety
 - High Level Disinfectants & Ethylene Oxide Safety
 - Formaldehyde (Formalin) \triangleright Safety
 - \triangleright Waste Anesthetic Gases Safety
- **Environmental Awareness &** \triangleright Hazardous Waste
- \succ Transporting Infectious and **Biological Specimens**





Environment of Care (EOC) Reference Cards:

Located in front pocket of Dept's Emergency Management binder and on Intranet>Resources>Manuals

EOC Reference Cards

Re	esources
Committees & Initiatives : ▼ Departments / Divisions: ▼	» Attending Physician - NP - PA Privileges Resident Procedure Credentials: NEW INNOVATIONS
Vanuals:	 <u>Call Bell Logging</u> <u>Citrix Apps: EMR/STARS PowerChart</u> <u>Communications Toolkit (Logos, etc)</u> <u>Drug References:</u> <u>Drug Shortages</u> <u>Events: Tools to Promote & Use at Events</u>
& Also See: Outlook Office365 Instructions.pdf Policies and Procedures for SBM:	» Clinical & Professional Resources » Hospital Reporting Systems: ▼ » Facilities & Plant Operations (coming soon) » Find a Physician
 » Policy Manager for Policies & Procedures (Administrative, Nursing and Labs P & Ps) » Policy Manager User Guide 	 » HANYS ACOG Fetal monitoring: See Clinical & Prof Resources link above » HSC Lib - Health Sciences Center Library » Lawson Financial Portal
	» Lawson Support » Nursing » PeopleSoft » Physician Portal
Regulatory: ▼	 <u>Physician Well-Being Task Force</u> <u>Safety Data Sheets & Departmental Chemical</u> <u>Inventories</u> SB Safe Patient Safety Event Reporting
» SharePoint Sites Catalog	» Visual X Clinical Decision Support

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- Know who the Hospital Safety Officer is:
 > Jill Kavoukian
- 2. Always wear your Stony Brook ID badge.
- 3. Know proper procedure for Major Chemical Spill response.
 - Call University Police at 911 or 631-632-3333 from cell phone. (Off sites: call 911)
- 4. Know location of your department's Emergency Management Manual and Plan.
- 5. Know location of your unit's disaster kit for power outages (flashlights, batteries, extension cord, duct tape, glow sticks).
- 6. Know how to shut off an oxygen supply valve.



- Report hospital building issues to Plant Operations at 4-2400 or on hospital intranet under "My Requests">>"Facility Maintenance/Repair".
- 8. Report offsite building issues to Offsite EOC Manager at 4-4066 (Tech Park: contact Off site Facilities Management, 4-4380).
- 9. Know proper fire response procedures (RACE), locations of nearest fire alarm pull stations and how to use a fire extinguisher (PASS).
- 10. Secure your personal belongings.
- 11. Know how to access Chemical Inventories and Safety Data Sheets (SDS) on hospital intranet under "Resources".
- 12. Adhere to tobacco free policy.



Occupational Injury and Illness Prevention (OIIP) Program

Program Elements:

- Safety compliance component in all staff performance programs.
- Safety performance will be evaluated at least annually.
- Recognize employees who promote a safe and healthy work environment through the "You Got Caught Being Safe Program".
- Compliance with safe work practices and procedures will be enforced.

Review OIIP brochure

The Process/Two-Way Communication:

- New employee orientation and recertification training
- Daily briefing huddles
- Safety huddles
- Posted and distributed safety information

 OIIP News Brief
- Safety committees
- OIIP Work Group



Employee Injury/Illness Reporting

- If you experience an injury or illness at work, immediately report it to your supervisor and,
 - ✓ If necessary, seek medical attention at Employee Health & Wellness
 - \checkmark During off hours or if life threatening, go to ED).
- ✓ Fax a completed Employee Injury/Illness form to Fax number listed on form.
- For a contaminated sharps injury: follow instructions on "Blood borne Pathogens & Needlestick" icon on hospital intranet.
- ✓ Contact the NYS Accident Reporting System (ARS) at 888-800-0029.
- For additional information, refer to Admin Policy HR:0016, Employee Occupational Injury/Illness Reporting.

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- If you know or suspect that you have a latex allergy, notify your supervisor and go to Employee Health & Wellness for an evaluation.
- Lawson requisitioning
 - Store Room items are labeled as LATEX or NON-LATEX in Lawson.





Preventing Slips/Trips/Falls

Preventing Slips - Reporting Unsafe Conditions

 On average, 20-25 staff annually experience reportable slip-related injuries resulting in fractures, strains or contusions. Each injured staff is out of work about 90 days.

If you see a wet or slippery floor, immediately clean it up safely or report it to appropriate staff for clean up.





Ergonomics Policy

EH&S is responsible for managing the Ergonomics Program in consultation with Employee Health & Wellness

Ergonomics: Science of human work focusing on designing work stations, tools & tasks for safety, and efficiency & comfort.

<u>Musculoskeletal Disorders:</u> (MSD) result from bodily reactions due to bending, climbing, crawling, reaching, twisting, overexertion, or repetitive motion.

 Injuries can occur to muscles, nerves, tendons, ligaments, joints, cartilage, and spinal discs in back, neck shoulder, elbow, wrist or hand.



<u>Reporting</u>: Employees need to report work related injuries to their supervisor.

Incident Trending: when a trend of MSD injuries is identified in an area, a hazard assessment will be conducted.

<u>Response</u>: Controls may be used to reduce hazards.

<u>**Training:</u>** General ergonomics awareness will be provided by EH&S during Orientation and recertification.</u>



Ergonomics – Quick Facts & Exercises

How we move and use our body can determine how healthy and comfortable we feel.





TRY THE FOLLOWING NOW...

- Move or change positions ~ every 30 minutes.
- Stand up when talking on the phone or when reading documents, if possible.
- 3. Practice the 20/20/20 rule: Every 20 minutes focus on something 20 feet away, for 20 seconds.



Ergonomics Evaluation

Request an ergonomic workstation evaluation

contact: EH&S at 4-6783

For additional information, refer to Admin policy EC:0034 Ergonomics and EH&S policy EHGS0001 Computer Workstations.





Safe Patient Handling



- NYS Regulation on Safe Patient Handling ⁶⁶
- Active Hospital SPH Committee
- SPH Icon on Intranet includes:
 - Educational Materials
 - Algorithms
 - Equipment
 - Standards & Policies



What is Safe Patient Handling?

A practice that creates a safe work environment for patients and healthcare workers by eliminating hazardous manual lifting tasks through the implementation of new technologies, such as mechanical lifts and repositioning devices.



Respiratory Protection Program

Staff in Respiratory Protection Program must be **annually trained and fit tested** with a hospital approved N95 respirator

Those in regular contact with patients with known or suspect TB or other airborne pathogens or hazards



3M 1860 or Moldex 1500 series



NURSING: annual fit testing during recert

RESIDENTS: Fit testing during Orientation

ALL OTHERS: Open <u>monthly fit testing</u> <u>schedule</u> listed on <u>Hospital's Intranet</u> under weekly announcements and Hot Topics.



- Anyone with <u>interfering facial hair</u> cannot be fit tested or wear a N95 respirator as the hair prevents an adequate seal. Staff w/ beard for religious or medical reasons can use a powered air purifying respirator (PAPR) available from EH&S.
- Significant weight gain or loss, dental or facial surgery, or other condition that may affect respirator fit: Get re-fitted, even if within a year of your last fit test.



PPE - N95 User Instructions:

- Prior to being issued a respirator you must be trained and fit tested by EH&S, and medically cleared by Employee Health. <u>Fit testing and training is required annually.</u>
- 2. Only wear the Type, Make, Model and Size respirator you were fitted with (e.g., N95, 3M 1860S). Keep fit test card with N95 information in your ID badge.
- 3. Prior to each use: inspect your respirator and review fitting instructions. Mold metal nosepiece to nose, if applicable. Ensure straps are not twisted, or crisscrossed. Conduct User Seal Check.
- 4. Put your respirator on BEFORE entering isolation room that requires a respirator.
- 5. Discard N95 respirator when soiled or damaged, unless directed otherwise.



Respiratory Protection Program



Position the respirator in your hands with the nose piece at your fingertips.



Cup the respirator in your hand allowing the headbands to hang below your hand. Hold the respirator under your chin with the nosepiece up.



The top strap goes over and rests at the top back of your head. The bottom strap is positioned around the neck and below the ears. Do not crisscross straps.



Place your fingertips from both hands at the top of the metal nose clip (if present). Slide fingertips down both sides of the metal strip to mold the nose area to the shape of your nose.



To Remove (Doffing):

DO NOT TOUCH the front of the respirator. It may be contaminated!



Remove by pulling the bottom strap over back of head, followed by the top strap, without touching the respirator.



Place in sealable plastic bag or discard in waste container if contaminated. WASH YOUR HANDS!



Reducing Contaminated Sharps Injuries

- ✓ If you are unsure how to use a device, seek guidance.
- Explain the procedure to the patient before any venipuncture.
- ✓ TAKE YOUR TIME... don't rush!
- Limit distractions and conversations.... avoid disturbing colleagues while they use a sharp.
- \checkmark Use safe passing zones.
- Communicate with team members when passing a sharp.
- Ensure the sharps safety feature is fully activated.



Many injuries are during suturing and passing...

> PRACTICE SHARP SAFETY



- ✓ Immediately discard used sharp in sharps container to avoid injuring coworkers.
- ✓ When a sharps containers is ¾ full, contact Housekeeping at 4-1455.
 - ✓ Off-sites: contact Off-site EOC Coordinator at 4-4066
- ✓ Actively participate in trials of new safety devices
 Report all injuries and complete an Employee
 Injury/Illness Report and Sharps Injury Log.

For additional information, refer to <u>BBP/Needlestick icon</u> on <u>click</u>. hospital intranet under "Hot Topics" and Admin policy EC0061, Sharp Safety Device



Radiation Safety

Hospital Radiation Safety Officer is: Paul Zahra

- Be aware of radiation and laser safety signage. Do not enter without authorization from Area Manager or Radiation Protection Services (RPS).
- Protect yourself from radiation through: Time, Distance, and Shielding.
 - ALARA = As Low as Reasonably Achievable
- Maintain security and control of all radioactive substances and sources in your work area.





- When working around ionizing radiation, you must be issued a radiation dosimeter (badge) to routinely monitor your ionizing radiation exposure <u>if</u> exposure is likely to be over annual limits dictated by NYSDOH BERP.
- Some typical work areas where ionizing radiation is employed include: radiology facilities and equipment (Nuclear Medicine, CT, X-Ray, etc.); Radiation Oncology; areas/procedures using fluoroscopy.
- Contact RPS to perform a hazard evaluation to ascertain whether your work meets the criteria to be monitored.





- If issued dosimetry badges or rings to measure radiation dose, always wear properly.
- Return badges/rings promptly to your badge coordinator at end of wear cycle (9th of month).





- When wearing lead aprons/shields as PPE, inspect for damage before use and ensure the PPE is tagged indicating a current annual inspection by RPS.
- If a radioactive spill occurs, follow emergency procedures posted in your area.

> Questions? Call RPS:

- UH Associate RSO 631.638.2356 paul.zahra@stonybrookmedicine.edu
- UH Radiation Safety Specialist 631.444.3196 richwood.schurig@stonybrookmedicine.edu
- SBU RSO 631.632.9676 sean.harling@stonybrook.edu







OSHA Right to Know

OSHA Hazard Communication Standard 29CFR 1910.1200 and Required Posting

NY State Right-to-Know

Law (PESH) Article 28, requires public employers to develop programs to inform their employees of the potential hazards of chemicals found in the workplace.

Occupational Safety & Health Administration (OSHA) = private sector employees

Public Employees Safety & Health Bureau (PESH) = public (state & local) employees

Review OSHA Haz Comm Quick Cards





NYS Right To Know Law

Right to Know Law guarantees employees the right to information, training and education regarding toxic substances in the workplace

- Employees have access to Safety Data Sheets of hazardous chemicals used
- Guidelines for proper container labeling
- Information on what protective measures are available to prevent exposure or injuries
- Annual training requirements



Globally Harmonized System (GHS)

In 2013, OSHA revised the Hazard Communication Standard to align with the United Nations' Globally Harmonized System of Classification and Labeling of Chemicals (GHS)

Materials Safety Data Sheets (MSDS) are now called Safety Data Sheets (SDS)

New labeling requirements

Standardized 16-section format



12/6/2018



Department Chemical Inventory & Safety Data Sheets (SDSs)

Your department's chemical inventory & SDSs are on the Hospital Intranet

Resources		
Committees & Initiatives :	» <u>Attending Physician - NP - PA Privileges</u> <u>Resident Procedure Credentials:</u>	
Departments / Divisions:	 » <u>Call Bell Logging</u> » Citrix Apps: EMR/STARS PowerChart 	
Forms:	» Communications Toolkit (Logos, etc)	
Manuals:	 » <u>Drug Shortages</u> » <u>Events</u>: Tools to Promote & Use at Events » <u>Clinical & Profes</u>^hjonal Resources » Hospital Reporting Systems: ✓ 	
Microsoft Outlook 2010 On-Line Reference Also See: Outlook Office365 Instructions.pdf	 » Facilities & Plant Operations (coming soon) » Find a Physician » HANYS ACOG Fetal monitoring: See Clinical & Prof Resources link above » HSC Lib - Health Sciences Center Library 	
Policies and Procedures for SBM:	 » Lawson Financial Portal » Lawson Support » Nursing 	
» Policy Manager for Policies & Procedures (Administrative, Nursing and Labs P & Ps)	 » <u>PeopleSoft</u> » <u>Physician Portal</u> » <u>Safety Data Sheets & Departmental</u> 	
» <u>Policy Manager User Guide</u>	Chemical Inventories » <u>SB Safe- Patient Safety Event Reporting</u> » Visual2 Clinical Decision Support	
Other Policies and Procedures:		



Blue binders are obsolete!



Click on <u>Safety Data</u> <u>Sheets</u> link under "Resources", then Stony Brook Medicine>Hospital, ACP, ASC or Off-Site >Your Dept

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- ✤ On the Hospital Intranet page, scroll down to *Resources*.
- Select drop down for <u>Drug References</u> click. and select MicroMedex
- Type in the name of the drug in the search field and click "Search"
- Select "Toxicology," under Related Results
- Select MSDS.



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Before you handle or open a chemical container,



Follow the directions to use the product safely!





Label format

Info on hazard, storage, PPE, handling, & first aid information

PRODUCT IDENTIFIER

20	DE	

Product Name

SUPPLIER IDENTIFICATION

Company Name		
Street Address		
City	State	
Postal Code	Country	
Emergency Phone Number		

PRECAUTIONARY STATEMENTS

Keep container tightly closed. Store in cool, well ventilated place that is locked. Keep away from heat/sparks/open flame. No smoking. Only use non-sparking tools. Use explosion-proof electrical equipment. Take precautionary measure against static discharge. Ground and bond container and receiving equipment.

Do not breathe vapors.

Wear Protective gloves.

Do not eat, drink or smoke when using this product.

Wash hands thoroughly after handling. Dispose of in accordance with local, regional, national, international regulations as specified.

In Case of Fire: use dry chemical (BC) or Carbon dioxide (CO₂) fire extinguisher to extinguish.

First Aid If exposed call Poison Center. If on skin (on hair): Take off immediately any contaminated clothing. Rinse skin with water.

SAMPLE LABEL

HAZARD PICTOGRAMS



SIGNAL WORD Danger

HAZARD STATEMENT

Highly flammable liquid and vapor. May cause liver and kidney damage.

SUPPLEMENTAL INFORMATION

ill weight:		Lot	Number
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Gross weight: _____ Fill Date: ____ Expiration Date: _____



Importance of a SDS

WHY IMPORTANT ???

- 1. Hazards
- 2. How to protect yourself from injury or illness
 - Exposure controls
 - Safe work practices
 - PPE to wear



- 3. What to do if a spill occurs
- 4. What to do if you or a co-worker are exposed
 - First aid
 - Emergency response
- 5. Environmental & disposal information



Standardized SDS Format

16 sections:

- 1. Identification
- 2. Hazards Identification
- 3. Composition/Ingredients
- 4. First Aid Measures
- 5. Fire Fighting Measures
- 6. Accidental Release Measures
- 7. Handling & Storage
- 8. Exposure Controls & Personal Protection

9. Physical & Chemical Properties

10. Stability & Reactivity

- 11. Toxicological Info.
- **12. Ecological Info.**
- 13. Disposal Info.
- 14. Transport Info.
- 15. Regulatory Info.
- 16. Other Info.





Safety Data Sheet: Clorox Clean-Up

2. HAZARDS IDENTIFICATION

Classification

This chemical is considered hazardous by the 2012 OSHA Hazard Communication Standard (29 CFR 1910.1200).



Precautionary Statements - Prevention

Wash hands and any exposed skin thoroughly after handling. Wear eye protection/face protection such as safety glasses.

SIGNAL WORD:

Indicates severity of hazard and alerts reader to a hazard

- Danger more severe hazard
- Warning less severe hazard

Only one signal word used on label & SDS

12/6/2018



Safety Data Sheet:

Let's Review: Household Cleaner: Clorox Clean-Up

2. HAZARDS IDENTIFICATION

Classification

This chemical is considered hazardous by the 2012 OSHA Hazard Communication Standard (29 CFR 1910.1200).

Skin corrosion/irritation Serious eye damage/eye irritation GHS Label elements, including precautionary statements Emergency Overview	Category 3 Category 2A	How this product could harm me if improperly handled	
Hazard Statements Causes mild skin irritation Causes serious eye irritation IRRITANT		2. Hazard ID — Pictogram	
Appearance Clear, pale yellow Physical State Liquid Odor Precautionary Statements - Prevention Wash hands and any exposed skin thoroughly after handling. Wear eye protection/face protection such as safety glasses. Vertical State Vertical State	Citrus, herbaceous, bleach	ATEMENTS	
Precautionary Statements - Response Eyes IF IN EYES: Rinse cautiously with water for several minutes. Remove contact lenses, if present and rinsing. If eye irritation persists: Get medical advice/attention. Skin If skin irritation occurs: Get medical advice/attention. Precautionary Statements - Storage None Precautionary Statements - Disposal None	Nature and degree of hazard		
None Hazards not otherwise classified (HNOC) The following medical conditions may be aggravated by exposure to high concentrations of vapor or mi	ist: heart conditions or		

Unknown Toxicity 0.08% of the mixture consists of ingredient(s) of unknown toxicity

chronic respiratory problems such as asthma, emphysema, or obstructive lung disease.
Stony Brook Medicine Pictograms and Hazard Classes on Labels and Safety Data Sheets





3. COMPOSITION/INFORMATION ON INGREDIENTS

Chemical Name	CAS-No	Weight %	Trade Secret
Sodium hypochlorite	7681-52-9	1 - 5	*
Sodium hydroxide	1310-73-2	0.1 - 1	*

* The exact percentage (concentration) of composition has been withheld as a trade secret.

4. FIRST AID MEASURES

First aid measures

- General Advice Show this safety data sheet to the doctor in attendance.
- Eye Contact
 Rinse immediately with plenty of water, also under the eyelids, for at least 15 minutes.

 Remove contact lenses, if present and easy to do.
 Continue rinsing. Keep eye wide open while rinsing. Do not rub affected area. Get medical attention if irritation develops and persists.
- Skin Contact Take off contaminated clothing. Rinse skin immediately with plenty of water for 15-20 minutes. If irritation develops, call a doctor.
- Inhalation Move to fresh air. If breathing is affected, call a doctor.
- Ingestion Call a poison control center or doctor immediately. Have person sip a glassful of water if able to swallow. DO NOT induce vomiting unless told to do so by a poison control center or doctor.
- Protection of First-aiders Avoid contact with skin, eyes or clothing. Use personal protective equipment as required. Wear personal protective clothing (see section 8).

Most important symptoms and effects, both acute and delayed

Most Important Symptoms and Stinging and irritation of eyes. Effects

Indication of any immediate medical attention and special treatment needed

Notes to Physician

Treat symptomatically.

What do I do if this chemical get on my skin, in my eyes, or if I breathe it in?



Ingredients
 First Aid



5. FIRE-FIGHTING MEASURES

Suitable Extinguishing Media

Use extinguishing measures that are appropriate to local circumstances and the surrounding environment.

Unsuitable Extinguishing Media

CAUTION: Use of water spray when fighting fire may be inefficient.

Specific Hazards Arising from the Chemical No information available.

Explosion Data

Sensitivity to Mechanical Impact None.

Sensitivity to Static Discharge None.

Protective equipment and precautions for firefighters

As in any fire, wear self-contained breathing apparatus pressure-demand, MSHA/NIOSH (approved or equivalent) and full protective gear.

5. Fire Fighting Measures



Emergency Equipment – Eyewashes & Safety Showers

- Know locations of eyewashes and emergency showers in your area.
- Never block eyewashes or showers!
- Know how to use equipment.
 - Eyewash activation depends on style:
 - push paddle or pin
 - ✤ lift cover
 - swing down
 - swing over sink
 - Keep dust caps on eyewash when not in use. (Note: you don't need to remove caps before activation.)
 - Flush eyes for at least 15 minutes.
 - For shower, pull chain
- Practice activating eyewash.
- Any questions, ask your supervisor or EH&S (4-6783).







- User area must test eyewashes weekly (run water for 1 minute) and complete eyewash log.
- For operational issues (i.e., flow or temperature) contact Plant Operations at 4-2400. (Note: Off sites call 4-4066)
- Refer to Admin policy, EC0039, Emergency Safety Showers & Eyewashes.



6. ACCIDENTAL RELEASE MEASURES

Personal precautions, protective equipment and emergency procedures

- Personal Precautions Avoid contact with eyes, skin, and clothing. Use personal protective equipment as required.
- Other Information Refer to protective measures listed in Sections 7 and 8.
- Environmental precautions
- Environmental Precautions See Section 12 for ecological Information.

Methods and material for containment and cleaning up

Methods for Containment Prevent further leakage or spillage if safe to do so.

Methods for Cleaning Up Absorb and containerize. Wash residual down to sanitary sewer. Contact the sanitary treatment facility in advance to assure ability to process washed-down material.

7. HANDLING AND STORAGE

Precautions for safe handling Handling Handle in accordance with good industrial hygiene and safety practice. Avoid contact with skin, eyes or clothing. Do not eat, drink or smoke when using this product. Conditions for safe storage, including any incompatibilities Keep containers tightly closed in a dry, cool and well-ventilated place. Incompatible Products Products containing ammonia, toilet bowl cleaners, rust removers, or acids.

Accidental Release
 Measures
 Handling & Storage



Chemical Spill Response



Minor spills of less than 1 gallon (<50 ml for hazardous drugs) Cleaned up by trained staff using a spill kit.

Major spills over 1 gallon (>50 ml haz drugs) Call University Police at 911 (cell: 631-632-3333). Note: Offsites: Call 911

If at any time during clean up of a minor spill, you need assistance, call 911 (631-632-3333).





Spill Kits for Minor Chemical Spills

Glutaraldehyde/OPA Spill Kits

by GUS stations and areas where glutaraldehyde/Cidex OPA used

Chemotherapy Spill Kits

areas where chemotherapy prepared and/or administered

Formalin Spill Kits

labs and areas using formalin

Acid Spill Kits

powered industrial truck charging areas and other non-alkaline battery areas.

Only trained staff can use a minor spill kit. Unit Educators train clinical staff annually on applicable spill kits. Lab staff are trained annually during Lab Recertification. Off-site staff are trained by the off-site EOC Coordinator.

PC





8. EXPOSURE CONTROLS/PERSONAL PROTECTION

Control parameters

Exposure Guidelines

	Chemical Name	ACGIH TLV	OSHA PEL	NIOSH IDLH
5	Sodium hydroxide 1310-73-2	Ceiling: 2 mg/m ³	TWA: 2 mg/m ³	IDLH: 10 mg/m ³ Ceiling: 2 mg/m ³

ACGIH TLV: American Conference of Governmental Industrial Hygienists - Threshold Limit Value. OSHA PEL: Occupational Safety and Health Administration - Permissible Exposure Limits. NIOSH IDLH: Immediately Dangerous to Life or Health.

Appropriate engineering controls

Engineering Measures

Showers Eyewash stations Ventilation systems

8. Exposure Control & Personal Protective Equipment

Individual protection measures, such as personal protective equipment

Eye/Face Protection	If splashes are likely to occur: required for consumer use.	Wear safety glasses with side shields (or goggles). None
Skin and Body Protection	Wear protective gloves and pro	tective clothing.
Respiratory Protection	respiratory protection should be	l or irritation is experienced, NIOSH/MSHA approved e worn. Positive-pressure supplied air respirators may be aminant concentrations. Respiratory protection must be rrent local regulations.
Hygiene Measures	Remove and wash contaminate clothing. Do not eat, drink or s	ed clothing before re-use. Avoid contact with skin, eyes or moke when using this product.



9. PHYSICAL AND CHEMICAL PROPERTIES

Physical and Chemical Properties

Physical State Appearance Color

Property pH

Melting/freezing point Boiling point / boiling range Flash Point Evaporation rate Flammability (solid, gas) Flammability Limits in Air Upper flammability limit Lower flammability limit Vapor pressure Vapor density Specific Gravity Water Solubility Solubility in other solvents Partition coefficient: n-octan Autoignition temperature Decomposition temperature Kinematic viscosity Dynamic viscosity Explosive Properties Oxidizing Properties

Other Information

Softening Point VOC Content (%) Particle Size Particle Size Distribution Liquid Clear Pale yellow

Values

12.4 - 12.8 No data available No data available Not flammable No data available No data available

No data available No data available No data available Odor Odor Threshold

Remarks/ Method

None known None known None known None known None known None known

None known None known None known

Citrus, herbaceous, bleach No information available

9. Physical/Chemical Properties10. Stability & Reactivity

10. STABILITY AND REACTIVITY

Reactivity

Reacts with other household chemicals such as products containing ammonia, toilet bowl cleaners, rust removers, or acids to produce hazardous gases, such as chlorine and other chlorinated compounds.

Chemical stability

Stable under recommended storage conditions.

Possibility of Hazardous Reactions

None under normal processing.

Conditions to avoid

None known based on information supplied.

Incompatible materials

Products containing ammonia, toilet bowl cleaners, rust removers, vinegar, or acids.

Hazardous Decomposition Products

None known based on information supplied.





11. TOXICOLOGICAL INFORMATION

Information on likely routes of exposure

Product Information

Inhalation	Exposure to vapor or mist may irritate respiratory tract.)X
Eye Contact	May cause eye irritation.	
Skin Contact	Prolonged contact may cause irritation.	
Ingestion	Ingestion may cause irritation to mucous membranes and gastrointestinal tract, nause vomiting, and diarrhea.	ea,

Component Information

Chemical Name	LD50 Oral	LD50 Dermal	LC50 Inhalation
Sodium hypochlorite 7681-52-9	8200 mg/kg (Rat)	>10000 mg/kg (Rabbit)	-
Sodium hydroxide 1310-73-2	-	1350 mg/kg (Rabbit)	-

Information on toxicological effects

Symptoms May cause redness and tearing of the eyes.

Delayed and immediate effects as well as chronic effects from short and long-term exposure

Sensitization No information available.

Mutagenic Effects No information available.

11. Toxicological Info



12. ECOLOGICAL INFORMATION

Ecotoxicity Toxic to aquatic life with long lasting effects.

Persistence and Degradability No information available.

Bioaccumulation No information available.

Other adverse effects No information available.



13. DISPOSAL CONSIDERATIONS

Disposal methods

Dispose of in accordance with all applicable federal, state, and local regulations.

Contaminated Packaging

Do not reuse empty containers. Dispose of in accordance with all applicable federal, state, and local regulations.

14. TRANSPORT INFORMATION

DOT

NOT REGULATED

TDG

UN-No Proper Shipping Name Hazard Class Packing Group Description UN3082 ENVIRONMENTALLY HAZARDOUS SUBSTANCE, LIQUID, N.O.S. 9 III UN3082 ENVIRONMENTALLY HAZARDOUS SUBSTANCE LIQUID

UN3082, ENVIRONMENTALLY HAZARDOUS SUBSTANCE, LIQUID, N.O.S. (SOD HYPOCHLORITE), 9, III, MARINE POLLUTANT

How should I dispose of this product safely?

12. Ecological Info

14. Transport Info





13. Disposal Considerations

What must I do if I need to ship this product?



	15. R	EGULATORY INFO	RMATION]				
Chemical Inventories						<mark>15. [</mark>	Re	gulator	y Info	
TSCA	All compon from listing	ents of this product are e	ither on the ISCA 8(b)	Inventory or otherv	lise exempt					
DSL/NDSL	All compon	ents are on the DSL or N	DSL.							
TSCA - United States Toxic Su DSL/NDSL - Canadian Domest										6
U.S. Federal Regulation	IS									
SARA 313 Section 313 of Title III of the chemicals which are subject										
SARA 311/312 Hazard Cat	egories									
Acute Health Hazard Chronic Health Hazard		Yes No								
Fire Hazard	•	No							16. Oth	<u>or Into</u>
Sudden Release of Pre	essure Hazard	No								
Reactive Hazard		No								
Clean Water Act This product contains the follo and 40 CFR 122.42)	wing substances which	h are regulated pollutant		CWA -	-			16. OTHER	INFORMATION	
Sodium hypochlorite	Quantities	CWA - Toxic Pollutants	S CWA - Priority Poli	Sub	NFPA	Health Hazard	2	Flammability 0	Instability 0	Physical and Chemical Hazards -
7681-52-9	100 lb									
Sodium hydroxide 1310-73-2	1000 lb				HMIS	Health Hazard	2	Flammability 0	Physical Hazard 0	Personal Protection B
CERCLA This material, as supplied, cor Environmental Response Corr				under the Comprel	Prepared	Ву		Product Stewardship 23 British American Blv Latham, NY 12110 1-800-572-6501	d.	
Chemical Name	Hazardous Subst	ances RQs Extremely	Hazardous Substances RQs	RQ						
Sodium hypochlorite 7681-52-9	100 lb		-	RQ 100 lb f RQ 45.4 kg		Date		New		
Sodium hydroxide 1310-73-2	र्जे 1000 lb)	-	RQ 454 kg RQ 454 kg	Revision	Note		New		
EPA Statement This chemical is a pesticide pr requirements under federal pe required for safety data sheets required on the pesticide label	sticide law. These re and for workplace lab	quirements differ from the	ne classification criteria	and hazard inform	General E The infor date of its	Disclaimer mation provided in s publication. Th	e inforr	nation given is designed	ect to the best of our kno only as a guidance for	wledge, information and belief at the safe handling, use, processing, storage,

WARNING: EYE AND SKIN IRRITANT. Causes substantial but temporary eye injury. Do not get in eyes clothing. Avoid contact with skin. Wear protective eyewear. Wash thoroughly with soap and water after h before eating, drinking, chewing gum, or using tobacco. Remove and wash contaminated clothing before re Harmful if swallowed. For sensitive skin or prolonged use, wear gloves. Vapors may irritate. Avoid prolong

of vapors. Use only in well ventilated areas. Not recommended for use by persons with heart conditions or chronic respiratory problems such as asthma, emphysema or obstructive lung disease.



Hospital Chemical Hazards

Common hospital chemical hazards:

- 1. Hazardous Drugs (e.g., chemo)
- 2. High Level Disinfectants and Sterilizers
- 3. Formalin (formaldehyde)



Hospital Chemical Hazards

Hazardous Drugs

Uses: Patient treatment and therapy

Locations: Pharmacy, BMT and Oncology, OR, Radiation Oncology, Peds, Cancer Center

Routes of entry: Inhalation, skin

Health Hazard: Reproductive hazards (genotoxicity, teratogen, fertility), carcinogen, organ toxicity

Controls: Local ventilation, work practices, PPE

Reminder: Drug Safety Data Sheets found on Hospital Intranet under <u>Resources-Drug References</u>, Micromedex





Hospital Chemical Hazards

Hazardous Drugs (HD) Safety

- Look for "HD Precautions" sign on in-patient room doors
- Wear appropriate PPE
 - Anticipation of hand exposure wear double nitrile gloves, change out after 30 minutes
 - For chemo and for anticipation of body splash wear chemo gown
- Avoid crushing or cutting HD tablets
- Review HD Management policy, MM:0081



Hazardous Drug - as defined by NIOSH (National Institute of Occupational Health & Safety), any drug identified by at least 1 of the following 6 criteria: carcinogenicity, teratogenicity or other developmental toxicity, reproductive toxicity in humans, organ toxicity at low doses in humans or animals, genotoxicity, or new drugs that mimic existing HDs in structure or toxicity. Include drugs for cancer chemotherapy, antiviral drugs, hormones, some bioengineered drugs and other miscellaneous drugs and are identified on <u>NIOSH's List</u> of Antineoplastic and Other Hazardous Drugs in Healthcare Settings.



High Level Disinfection & Sterilizing Safety

Medivators Endoscope

Reprocessors (22% hydrogen peroxide HP & 5% peracetic acid) Endoscopy & CSS



These units are used for high level disinfecting or sterilizing of medical equipment. All units are automated, closed systems which greatly reduce risk of exposure!

Do NOT defeat safety controls



Trophon EPR (35% HP)

L&D, Ultrasound, ACP Imaging, Urology & ObGyn clinics

Sterrad 100S/NX/100NX (50-70% HP) CSS



High Level Disinfection & Sterilizing Safety



SIGNAL WORD: Danger

Uses: high level disinfectants

- Locations: Endoscopy, Radiology, OR, Heart Institute, labs, Cancer Center, offsites
- Route of Entry: Inhalation or skin Health Hazard: respiratory, eye and skin irritant
- Controls: Local ventilation (GUS station), keep containers closed, PPE

Glutaraldehyde & OPA





LOOK UP

symbols on

OSHA Quick Card

High Level Disinfection & Sterilizing Safety

Ethylene Oxide

Uses: gas sterilization of medical equipment and instruments

SIGNAL WORD: Danger

Location: Central Sterile Supply

Route of entry: Inhalation

Health Hazard: Carcinogen

Controls:

-Ventilation

-Abators & negative pressure







LOOK UP symbols on OSHA Quick Card SIGNAL WORD: Danger

Uses: Specimen preservative

Locations: Labs, Radiology, Endoscopy, OR, offsites, Cancer Center, Breast Center, Ambulatory Surgery Routes of entry: inhalation, skin Health Hazards: carcinogen, ENT irritant, skin irritant Controls:

- Use in chemical fume hood where feasible
- Minimize time containers are open
- Avoid spills, trained staff clean up spills immediately
- Wear PPE (e.g., nitrile gloves and gown/lab coat)



Hospital Chemical Hazards

ORIGINAL AND SECONDARY CONTAINERS MUST HAVE LABEL!



Waste Anesthetic Gases (WAG) Safety

- WAG = nitrous oxide and halogenated anesthetics (e.g., sevoflurane, isoflurane, desflurane).
 - exposure from leakage of patient's anesthetic breathing circuit during delivery of anesthetic and exhalations of patients recovering from anesthesia
- Use anesthesia delivery units with gas scavenging as per manufacturer's instructions.
- Face masks used for administrating inhaled anesthetics should be available in variety of sizes, pliable, provide effective seal to prevent leakage, and positioned on the patient's face properly.
- Wear PPE during spills of liquid anesthetic agents (gloves, goggles, face shields).





Environmental Awareness What happens to waste that is poured down the drain?

It goes to the Sewage Treatment Plant at the University and then into the Long Island Sound. Sewage Treatment Plant at the University Port Jefferson, NY

Do not put any hazardous waste down the drain. Follow Hazardous Waste disposal procedures.



How do I know if I have to manage a chemical as a hazardous or universal waste?

Most hazardous wastes & universal wastes have already been identified and are being collected.

 e.g., medications, paints, solvents and other lab chemicals

Review the Waste Determination

- Located in Safety Data Sheet database (SDSPro) on Hospital Intranet.
- For waste effluent from lab equipment or processes that contain multiple chemicals/products, EH&S maintains waste determinations.
- Any questions, contact EH&S at 4-6783.











What is a Hazardous Waste?

- A waste that exhibits one of the following characteristics:
 - Harmful or fatal when ingested or absorbed (Toxicity)
 - Unstable under normal conditions (Reactivity)
 - Flashpoint <60°C (140°F) (Ignitability)</p>
 - pH <2 or >12.5 (Corrosivity)

Or is listed in the applicable NYS regulations (6 NYCRR Part 371)



Chemical Waste Containers Use the proper waste disposal containers:

Pharmacy Return Box – Unused drugs





Black 2-gallon container – Drugs with a HW label



- Locked Container w/ fiberboard drum (Critical Care Areas) – epinephrine, propofol/diprivan, eptifibatide/integrilin and nitroglycerin
- Chemo container (Oncology Areas) –
 Chemotherapy waste



How should Hazardous Waste be stored?

- Hazardous waste is stored in a Satellite Accumulation Area (SAA) or a <90 Day Storage Area.
 - Store up to 55 gallons of waste in a SAA.
- Label waste with orange hazardous waste label.
- List name of hazardous waste on the label, along with hazard(s). No abbreviations permitted.
- Write date on <90 Day Storage Area label, but not on SAA label.
- Keep waste containers closed.
- Hazardous Waste contractor collects hazardous waste as per schedule.

Any hazardous waste questions, contact EH&S(4-6783).



			2-6410	
Rame	Date	Department	Location	Telephone
Name(s) of Hazardous Waste MATERIAL	FORM		HAZARD	
CHEMICAL SOLVENT BIOLOGICAL SUBSTANCE DRUG SUBSTANCE	SOLID LIQUID GAS Other (specify)	() IRRITAN AIR REAL WATER A FLAMMA CORROS	TIVE D C	POISON (TOXIC) DXIDIZER EXPLOS <i>IVE</i> Dther (specify)



Universal Waste

What is Universal Waste?

A special type of hazardous waste



Lamps (bulbs)

Contact Plant Operations at 4-2400 for pick up

Mercury-containing equipment

Thermometers, Thermostats, Sphygmomanometers (blood pressure monitors) Contact EH&S at 4-6783 for pick up





Batteries

Contact Hospital Recycling at 4-1462 for pick up





Infectious Substances/ Biological Specimen Shipping

- Training is required for:
 - Anyone who handles,
 - Offers for transport, or



- Transports infectious substances and/or biological specimens
- Training is required every two years.
- Training is available from EH&S, 4-6783.





Why are SDS important?

- a. Provide nutritional information
- b. Provide economics information
- c. Provide safety information about the material including what to do in the event of an exposure or spill
- d. Provide biomedical engineering information



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- d. Provide biomedical engineering information



What phone number would you call for a major chemical spill response?

- a. 321
- b. From a hospital phone call 911 or 631-632-3333 from a cell phone which will connect you with University Police (Off-sites call 911.)
- c. 444
- d. 311



What phone number would you call for a major chemical spill response?

- a. 321
- b. From a hospital phone call 911 or 631-632-3333 from a cell phone which will connect you with University Police (Off-sites call 911.)
- c. 444
- d. 311

Stony Brook Medicine Questions or Comments?

- Contact EH&S at 4-6783
 - Ask to speak to a staff member in the Healthcare Safety team!
- Email us at ehsafety@stonybrook.edu
- Review Admin and EH&S P&Ps on hospital intranet under "Resources"
- OSHA Hazard Communication Standard:
 - <u>https://www.osha.gov/dsg/hazcom/HCSFinalReg</u> <u>Txt.html</u>
- OSHA Hazard Communication Resources:
 - <u>https://www.osha.gov/dsg/hazcom/index.html</u>

