

**SUNY DOWNSTATE MEDICAL CENTER
UNIVERSITY HOSPITAL OF BROOKLYN
POLICY AND PROCEDURE**

No: US-001

Subject: OPA SPILLS

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Prepared by: Vincent Monte

Original Issue Date: 3/2015

Reviewed by: Donna McKenzie, EMBA.,

Supersedes: 3/2015

Tina Riha, PT., DPT.,MPA

Effective Date: 4/2016

T.J.C. Standards: EC. 02.02.01 (EP.1,3, &11) The hospital maintains a written, current inventory of hazardous materials and waste that it uses, stores, or generates (**EP4**) The hospital implements its procedures in response to hazardous material and waste spills or exposures.

Approved by: Rhonda Osborne, M.D.

Related Policies (LAB-37)

Steven Ostrow, M.D.

Deborah Reede, M.D

Harry Zinn, M.D.

Issued by: Radiology Department

I. PURPOSE:

A planned protocol to properly handle CIDEX OPA solution spills and maintain a safe working environment.

II. DEFINITION:

III. POLICY:

In the event of a spill of OPA solution, the Technologist on duty will utilize the spill kit to clean and neutralize the solution spilled.

IV. RESPONSIBILITIES:

All Ultra sound staff technologist, Residents, Physicians utilizing OPA solution to clean the probes.

V. PROCEDURES /GUIDELINES:

- i) The technologist will open the spill kit which is located in the storage cabinet in the ultrasound suite

- ii) The technologist will wear protective garments to include a non-permeable gown, face shield, respirator, and gloves contained in the kit.
- iii) The technologist will use the powered neutralizer found in the kit to cover the entire spill.
- iv) The technologist will place the absorbing pillows on top of the spill allowing time for the pillows to absorb the neutralizer.
- v) The technologist will pick up the pillows and place them in the plastic spill bag found in the kit.
- vi) The technologist will seal and mark the bag as toxic material.
- vii) The technologist will contact the environmental service department to pick up and properly dispose of the bag

VII: REASON FOR REVISION:

Review

VIII. ATTACHMENTS:

MSDS-OPA Solution & Neutralizer Kit

Guidelines for The Safe Use of Ortho-phthalaldehyde (OPA)-April 2013

<http://www.downstate.edu/regulatory/pdf/policies/LAB-37.pdf>

IX: REFERENCES:

Joint commission Standards

Date Reviewed	Revision Required (Check One)		Responsible Staff Name and Title
3/2015	Yes		Donna McKenzie, Director Radiology
4/2016		(No)	Vincent Monte, Associate Dir. Radiology
	Yes	No	
	Yes	No	