MEDICATION SAFETY

CYTOTOXIC AGENTS: SAFE HANDLING OF

PURPOSE

The safe handling and use of cytotoxic drugs within the regulating authority of the Department of Health Operational Circular OP1961/05 Safe handling of Cytotoxic Drugs and AS /NZS 3816:1998 Management of clinical and related wastes

BACKGROUND

Many cytotoxic drugs have been demonstrated to be mutagenic, carcinogenic and teratogenic and this guideline is intended to protect staff involved in the administration and disposal of these products. The primary focus during the use of cytotoxic drugs must be on safety procedures to avoid exposure and minimise potential hazards by highlighting a responsible approach to work practice.

KEY POINTS

1. Staff shall be fully informed of the potential but as yet unproven reproductive hazards of cytotoxic drugs.

2. Staff who are pregnant, breast feeding or actively trying to conceive should not handle cytotoxic agents.

3. Only personnel who have successfully completed a course of instruction and training shall be permitted to handle cytotoxic drugs, waste contaminated with cytotoxics, or spills.

4. The number of staff involved with cytotoxic agents shall be kept to a minimum.

5. Appropriate personal protective clothing and equipment (PPE) shall be used by all staff involved the administration and handling of cytotoxic drugs including waste and spillage clean up. The following PPE is recommended:
   a. A long sleeved gown made from impervious material with knit or elastic cuffs.
   b. Two pairs of mid arm length latex gloves to prevent hand contamination on removal, and to increase protection during handling.

6. All pre prepared products must be placed in labelled, sealed, impervious containers capable of protecting from spillage, leakage or breakage during transport. Should the product leak during delivery, do not handle the product. Inform the pharmacy department and complete a staff incident / Hazard form.

7. Only pre prepared, ready to administer products shall be used at KEMH. Under no circumstances are cytotoxics to be prepared by medical, nursing or midwifery staff.

8. When using the intramuscular route, only luer lock syringe fittings shall be used.
ORAL ADMINISTRATION

Use a “non-touch” technique when transferring tablets/capsules from their container into a medicine cup, to avoid direct handling.

- Tablets must not be crushed.
- Capsules must not be emptied or opened.
- A new medication syringe / cup should be used at the time of each oral cytotoxic dose
- Discard PPE and medication cup/syringe into a cytotoxic waste bin immediately after use.
- Wash hands following administration and disposal of cytotoxic agents and related waste.

INTRAMUSCULAR / INTRAVENOUS ADMINISTRATION

- Wear personal protective equipment (PPE) from the time of opening the outer packaging covering the cytotoxic drug.
- Double check the cytotoxic agent with another registered nurse / midwife immediately prior to the administration at the point of administration
- Administer the cytotoxic agent as per medical orders.
- Dispose of sharps into the purple cytotoxic sharps waste container.
- Remove PPE and dispose of gloves in the purple cytotoxic waste container.
- Wash hands following administration and disposal of cytotoxic agents and related waste.

DISPOSAL OF BODY WASTE PRODUCTS

- The wearing of personal protective equipment is required if this is performed by a staff member.
- The woman should be encouraged to use the ward toilet facilities. Advise her to flush the toilet twice with the lid down after use.
- If the woman is unable to use the departmental toilet facilities only disposable bedpans must be used.
- Disposable bedpans must be placed in the macerator without prior emptying.
- Any linen or PPE contaminated by body waste from women receiving chemotherapy shall be placed in identifiable disposable bags labelled ‘cytotoxic waste’ and then placed in the yellow clinical waste bins for incineration.
- This procedure must be followed for as long as the woman is receiving chemotherapy and for 48 hours post cessation of treatment or until discharge.
EMERGENCY SPILL PROCEDURE

- Cytotoxic spill kits are kept in Emergency Centre, Theatre and Ward 6. A spare kit is kept in pharmacy.
- Patients and staff not directly involved in the cytotoxic spill clean up procedure shall be removed from the contaminated area. Secure and limit access to the area of the spill by placing a warning sign in the appropriate position.
- Appropriate PPE must be worn by staff to protect against skin contact and inhalation exposure.
- Protect the patient from any further contamination.
- Accidental spillage into the eye, wash with water and seek medical advice.
- Clean up the area as per the cytotoxic spill kit instruction sheet. Wash hands thoroughly with soap and water after.
- All of the equipment used and all linen must be placed in identifiable disposal bags, labelled cytotoxic waste and then placed in the yellow waste bins for incineration.
- Carpet tiles must be removed and destroyed.
- Arrange hospital cleaning staff to re-clean the area.
- Details of the spillage must be recorded on an electronic CIMS form and Staff Incident / Hazard form.
- Arrange for a replacement spill kit.

REFERENCES (STANDARDS)


Victorian Workcover Authority. 2003. Handling cytotoxic drugs in the workplace. Worksafe Victoria, Melbourne, Australia


National Standards – 4: Medication Safety

Other related documents – SHPA Standards of Practice for the Safe Handling of Cytotoxic Drugs in Pharmacy Departments.

RESPONSIBILITY

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