Safe Work Procedure for Preparing Inhaled (Nasal) Hazardous Drugs

Site Applicability

All Providence Health Care sites, including acute, long term care, and ambulatory care areas, where hazardous drugs are prepared outside of pharmacy.

Practice Level

Basic:

All clinicians with medication preparation and administration within their scope.

Requirements

A risk assessment (Appendix A) must be in place for this Safe Work Procedure to be followed.

Need to Know

- The final dosage form of a drug is a unit-dose packaged drug, ready to be administered to the patient without any preparation by the clinician.
- Preparation is any action taken to alter a drug product by means other than compounding or repackaging.
- When a hazardous drug is provided in the final dosage form the clinician is to follow the
 precautions outlined in the Control Matrix of the Exposure Control Program (<u>Appendix B</u>) for
 administration.
- This document outlines the steps to follow when preparation of the hazardous drug is required outside of pharmacy.
- Pharmacy dispensary will prime nasal sprays before dispensing them to the unit. Some devices
 require priming before each dose. For these devices, clinicians will need to prime the device at
 the point of care.
- Where possible preparation and administration of inhaled hazardous drugs should be done in a negative pressure room, or a single client room.
- All staff entering the room must don PPE, including respiratory protection, for a minimum of 1 hour following administration of an inhaled hazardous drug.
- Following administration of an inhaled hazardous drug, PPE including respiratory protection must be worn for 1 hour following administration by any staff entering the room.
- All areas where hazardous drugs are stored, prepared or administered must have a Cytotoxic Spill Kit available.

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Equipment and Supplies

- Accelerated hydrogen peroxide wipes (i.e. Accel Intervention)
- Plastic backed pad
- Plastic zipper sealed bag (e.g. biohazard bag)
- Absorbent material such as gauze, paper towel or tissue
- PPE:
 - Two pairs of chemo-approved gloves
 - Chemo-approved gown
 - Eye protection (i.e. a full face shield, or goggles)
 - Respiratory protection (i.e. a N95 mask for which the clinician has been fit-tested)

Procedure

Don PPE:

- 1. Two pairs of chemo-tested gloves
- 2. Chemo-approved gown
- 3. N95 respirator
- 4. Eye protection

Work Surface Preparation:

1. Place plastic backed pad on surface on which the hazardous drug will be prepared.

Priming a Hazardous Drug Nasal Spray

- 1. Place the absorbent material into the plastic zipper sealed bag.
- 2. **Prime the device according to manufacturer's directions** (e.g. number of pumps or to achieve the desired spray such as fine mist):
 - a. Place the nozzle of the device into the plastic bag in an upright position and spray until appropriately primed.
 - b. Carefully remove the nozzle and invert and seal the plastic bag, avoiding leaking or drips.
 - c. Dispose of the sealed bag into a cytotoxic waste container.

Cleaning

- 1. Clean and decontaminate the outside of the medication device, and then place in a clean zipper sealed bag.
- 2. After the procedure above the work surface must be cleaned and decontaminated using a two-step process using an accelerated hydrogen peroxide wipe (i.e. Accel Intervention).

Applying Signage:

1. Place sign (<u>Appendix C</u>) outside the room noting that PPE including respiratory protection period (a minimum of one hour following each administration of the drug) to allow for air clearance.

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2. Remove the sign when the period is complete.

Related Documents

• Low Level Cleaning and Disinfection (Infection Control)

References

Adapted from provincial Safe Work Procedure Hazardous Drugs Safe Work Procedure: Inhalation Therapy (Nasal Spray) Administration in Care Settings

Appendices

- Appendix A: Risk Assessment
- Appendix B: Providence Health Care Hazardous Drug Control Matrix
- Appendix C: Signage

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Generic template

Site:

STANDARD OPERATING PROCEDURE

Appendix A: Risk Assessment

A. Detailed Risk Assessment

☑ Ingestion (eating/drinking)☐ Puncture (needle stick)☐ Other (describe):

contamination?

⊠ Yes

□ No

All PHC acute, long

	term, and ambulatory sites				
Date of assessment:	02-FEB-2022	Next review date	02-FEB-2023		
		(1 year)			
Name of Drug:		Drug Group (1 or 2)	Group 2		
Route of Administration:	Nasal inhalation	Formulation:	Nasal spray		
 Reason pharmacy unable to provide final dosage form. Check all that apply: □ Biological safety cabinet (BSC)/ Containment – Primary Engineering Control (C-PEC) not available □ Pharmacy staff are not available (e.g. qualifications, outside of operational hours) □ Transportation limitations/restrictions ☑ Stability of drug □ Anticipated urgency (i.e. urgent need for drug administration) ☑ Other (describe): medication device requires priming prior to each administration 					
Proposed deviation from standard practice (e.g. drug will be crushed, mixed, combined etc.):Priming nasal spray devices					
 Based on the required type of preparation, what are the potential exposure routes (i.e. withou control measures in place, how could staff be exposed?). Check all that apply: Absorption (skin and eye contact) Inhalation 					

Unit:

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4. Based on the type of preparation and/or formulation, is there a risk of environmental

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B. Alternate Control Measures for Development of Safe Work Procedures

Use the list below to identify control measures for the development of Safe Work Procedures (SWP) or reviewing an existing Safe Work Procedure for applicability. Note that when identifying control measures, **the hierarchy of controls must be considered**. In this process, engineering controls must be considered prior to or, in addition to, personal protective equipment (PPE).

The following lists can help to identify control options. Check all that applies and provide details in the SWP on how the control measures are utilized to prevent exposure. Refer to the Exposure Control Plan: Managing the Risks.

1.	Proposed Engineering Control(s):
	☐ Closed System Transfer Device
	☐ Filtered Venting Device
	\square Pill crusher (enclosed system)
	\square Pill dissolver (enclosed system)
	☐ Pill cutter (enclosed system)
	oxtimes Other (describe): containment of the spray within a bag, and in a controlled
	environment.
	☐ None
2	Proposed Administrative Control(s)
2.	Proposed Administrative Control(s):
	☐ Education on the safe preparation technique and equipment
	☑ Identification of a location(s) for preparation which minimizes the number of individuals (staff, clients etc.) potentially exposed to hazardous drugs.
	 ✓ Methods used for minimizing surface contamination identified (e.g. using dedicated
	equipment, put an absorbent pad down)
	□ Products and processes are in place for cleaning space post-preparation
	☑ Drug transportation and storage practices identified
	□ Hazardous Drugs Spill kit is available and staff are trained on how to use it.
	= riazaradas brags opin kie is available ana stan are trained on now to use it.
3.	Required PPE (refer to ECP Control Matrix, Decision Support Tools, and consider all potential
	routes of exposure):
	□ Chemo-approved gloves (two pairs)
	□ Chemo-approved gown
	□ Respiratory protection
	☐ Other (describe):

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Recommendation for SWP:

C. Safe Work Procedure

A Safe Work Procedure must be written considering all of the factors identified in both the **A. Detailed Risk Assessment** and **B. Alternative Control Measures** sections above. The SWP must be approved as per this risk assessment process prior to the administration of the drug.

☐ Utilize a standardized Safe Work Procedure, all components are achievable.
☐ Modify an existing standardized Safe Work Procedure.
☐ Develop a unit or area based Safe Work Procedure.
\square No appropriate alternate practices or SWP can be identified, consult with your Health
Authority Hazardous Drugs Working Group.

Risk Assessment and Safe Work Procedure Developed By:					
Occupational Health and Safety	Hygienist, Occupational Health and Safety				
Pharmacy	Pharmacy Coordinator				
Professional Practice and Nursing	Practice Consultant				
Risk Assessment and Safe Work Procedure Endorsed By:					
Clinical Operations	Executive Director Acute Care				
	Program Director Seniors Care				
Occupational Health and Safety	Director, Occupational Health and Safety				
Professional Practice and Nursing	Director, Professional Practice and Nursing				
Pharmacy	Director, Pharmacy (Acute Care)				
	Director, Pharmacy (Long Term Care)				

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Appendix B: Providence Health Care Hazardous Drug Control Matrix

PROVIDENCE HEALTH CARE - HAZARDOUS DRUGS CONTROL MATRIX

			TROVIDEI	CE HEALITI CARE I	IAZARDOUS DRUGS CO	*			
BC Hazardous Drug Contr	rol Matrix		Group 1 歳						
Nursing Section		Parenteral (IV, IVe, IM, SUBCUT, IT, IP)	Oral Solid (Tablet, Capsule)	Oral Liquid	Topical, Rectal & Vaginal	Implants and Ophthalmic		Inhalation Therapy	
LABELLING MEDICATION	N		Temporary Interactions Drug INC.P 1 IN						
			Do not use tube system		Do not use tube system	Do not use tube system	if liquid		
TRANSPORT IN FACILITY	Υ		If transporting drugs in a reusable outer container - two pairs of chemo-approved gloves are required If transporting drugs in a disposable outer container (e.g. plastic bag), PPE is not required Ensure a Hazardous Drugs spill kit accompanies drug transport or is readily available						
			See Safe Work Procedures	1					
PRIMING IV	LINES		 Do not prime IV lines w 						
MEDICATION ADMINISTRATION		Gloves	two pairs of chemo- approved gloves	two pairs of chemo- one pair of two pairs of chemo-approved gloves					
Drugs in final dosage	PPE	Gown	chemo-approved gown	None	chemo-approved gown if risk of				chemo-approved gown
form (including when		Eye/Face	eye/face protection	None	eye/face protection if risk of sp	olash			eye protection
using CSTDs)		N95	None						N95 Required
WORK SURFACE	E CLEAN	IING	•		own, eye/face protection if risk of	fsplash			
PRECAUTIONAL Place precautionary signal entrance to cli	age at the	e bedside or	Use Accelerated Hydrogen Peroxide 0.5% (e.g. Accel Intervention wipes™) The precautionary period is 48 hours following each administration of a Group 1 HD During precautionary period Required PPE: two pairs of chemo-approved gloves, chemo-approved gown, eye/face protection if risk of splash for any activities for which there is a risk of contact with BBF Outside precautionary period Follow routine precautions when handling blood and body fluids						
During an individual's precautionary period all blood, urine and stool samples; other body fluids visibly contaminated with blood (exion organs not in fixatives must be labelled with a laboratory HD1 label All laboratory specimens from a patient in the precautionary period are to be placed in an outer sealed plastic bag. Blood specimens in placed in two sealed bags, with the outer bag labelled					` '				
During precautionary period: All linen to be placed in Group 1 HD labelled laundry bag Required PPE: two pairs of chemo-approved gloves, chemo-approved gown, eye/face protection if risk of splash Outside precautionary period: All linen to be placed in regular laundry bag Required PPE: Follow routine practices									
			Drug W	/aste	Sharps	BBF V			ste (e.g. PPE and packaging)
SPILL MANA(Hazardous drug spill kit hazardous drugs	s in all ar	eas where	Intact solid dosage form Required PPE: one pair of chemo-approved gloves All other dosage forms: Manage spills according to Hazardous Drug Spill Cleanup Procedures for size of spill. See Appendix L in ECP Manage spills according to Hazardous Drug Spill Cleanup Procedures for size of spill. See Appendix L in ECP						
WASTE MANAGEMENT Acute/Long Term Care (i.e., in facility)		Controlled Substances: Pharmaceutical Waste Bin Non-Controlled Substance Cytotoxic Waste Bin Required PPE:		Cytotoxic Sharps Container	Where possible, d through the sewer disposed of throug leak-proof cytotox	r. Where not gh sewer, use a	Cytotoxic co	ntainer	
			two pairs of chemo-app chemo-approved gown eye/face protection if ri	if risk of splash sk of splash	or SUBCUT = Subcutaneous IT				

Acronyms: CSTD = Closed System Transfer Device | IV = Intravenous | IV

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PROVIDENCE HEALTH CARE - HAZARDOUS DRUGS CONTROL MATRIX

BC Hazardous Drug Con	itrol Matr	ix	Group 2							
Nursing Section			Parenteral (IV, IVe, IM, SUBCUT, IT, IP)	Oral Solid (Tablet, Capsule)	Oral Liquid	Topical, Rectal & Vaginal	Implants and Ophthalmic		Inhalation Therapy	
LABELLING MEDICATION	ON			Precautions Hazardo		HD2	_			
			Do not use tube system		Do not use tube system Do not use tube system if liquid					
TRANSPORT IN FACILITY If transporting drugs in a reusable outer container - two pairs of chemo-approved gloves are required If transporting drugs in a disposable outer container (e.g. plastic bag), PPE is not required Ensure a Hazardous Drugs spill kit accompanies drug transport or is readily available										
PREPARATION OF DRUGS BY NURSING	PROT	ONAL ECTIVE PMENT	See Safe Work Procedures							
PRIMING I			Do not prime IV lines	with hazardous drugs						
MEDICATION		Gloves	two pairs of chemo- approved gloves	one pair of chemo- approved gloves	two pairs of chemo-approved	gloves				
ADMINISTRATION Drugs in final dosage	PPE	Gown	chemo-approved gown	None		chemo-approved gown if risk of splash None			Chemo approved gown	
form (including when	1112	Eye/Face	eye/face protection if risk of splash	None	eye protection if risk of splash		None		eye protection	
using CSTDs)		N95	None						N95 required	
WORK SURFAC	E CLEA	NING	Wear two pairs of chemo-approved gloves, chemo-gown, eye/face protection if risk of splash Use Accelerated Hydrogen Peroxide 0.5% (e.g. Accel Intervention wipes™)							
PRECAUTIONARY PERIOD • Not applicable to Group 2 HD										
LABORA	TORY		 Use routine practices 	for collection, labelling and tr	ansport					
LAUNE	DRY		All linen to be placed	in regular laundry bags						
			Waste	Sharps		BBF Waste	Other Waste (e.g. PPE and packaging)		
			Intact solid dosage form Required PPE: one pair of	chemo-approved gloves	Follow routine precaution	ons				
Hazardous drug spill kits in all areas where hazardous drugs are handled		All other dosage forms: Manage spills according to Hazardous Drug Spill Procedures for size of spill. See Appendix L in ECP								
WASTE MANAGEMENT		Controlled Substances: Pharmaceutical Waste Bin		through the sewer disposed of throug use regular garbag			sewer. Where not hrough sewer parbage or			
WAS I E IMANAGEMENT		Non-Controlled Substances: Cytotoxic Waste Bin				cal or biohazardous er usual practices.				
Acute/Long Term Care (i.e., in facility)			Required PPE: one pair of chemo-appro chemo-approved gown eye/face protection if risi	•	Follow routine practices					

Acronyms: CSTD = Closed System Transfer Device IV = Intravenous IV = Intra

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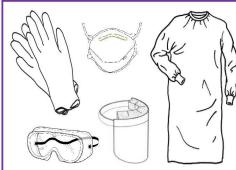
Appendix C: Signage

HAZARDOUS DRUGS RESPIRATORY PRECAUTIONS



Ends on:	Date:	Time:
		1 hour following the completion of hazardous drug administration

Precautions required for drug administration and entering patient room.



Wear personal protective equipment

- Two pairs of chemotherapy approved gloves
- A chemotherapy approved gown
- Respiratory protection (N95 respirator)
- Eye protection

Procedures

- Turn on negative pressure to room when available.
- Close door to room.
- Wear personal protective equipment including N95 respirator equipment during hazardous drug administration; and for a minimum of one hour following administration as noted above.
- For Group 1 Hazardous Drugs, apply Hazardous Drug Precautions signage and follow required precautions.

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	Program Director Seniors Care
	Director, Occupational Health and Safety
	Director, Professional Practice and Nursing
	Director, Pharmacy (Acute Care)
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