

To: To All Clinical Staff and Professional Staff

From: Carina Desramaux, Manager, Pharmacy
Andrea Raynak, Director, Nursing Practice

Date: February 5, 2024

RE: **Administration and Hazardous Drug List – Protocol Change**

Following updated guidance to reduce potential risk with Hazardous Drugs, changes in protocol will be implemented to align with The Safe Pharmaceutical Handling Evaluation Collaborative newly created framework.

To support this change, updated steps will be implemented for all Nursing Staff when handling Hazardous Medications.

Please reference the attached list of medications to determine if your patient is receiving one of the medications. If the medication is on the list then you will need to adhere to the steps and guidance as below:

1. Call Pharmacy to obtain the medication if not available in Omnicell or patient specific bin or when manipulation is required (crushing). Please use Pharmacist on-call pager at (807) 624-4893.

NOTE: Phenytoin STAT is the exception and Nurses are to follow the instructions for mixing this medication. **Please reference attached instructions. Non-urgent dosing will be dispensed from Pharmacy.

2. As per policy (Hazardous Drugs- Safe Administration & Disposal: [SAF-2-4](#)): The below outlines the route of medication administration and the personal protective equipment required (PPE) when handling Hazardous Drugs.

Route	PPE
Parenteral (IV, IM, Subcutaneous)	Gloves and gown Spike medication with IV tubing at waist height Discard all tubing in red sharps
Oral	Gloves
Oral suspension	Gloves and gown
Topical	Gloves and gown

For disposal of the medication, staff must wear the above-mentioned PPE and dispose in the appropriate locations:

Item	Location
Non-sharp items	Red cytotoxic garbage bag (located in utility room)
Sharps	Large red isolation sharps containers (obtain from the Stores Department)

3. Ensure safe handling precautions of blood and body fluids after the administration of hazardous drugs for 7 days after administration (Safe Handling of Blood and Body Fluids Post Administration of Hazardous Drugs in the Hospital Setting: [SAF-2-07](#)):
 - a. Any medication waste or sharps is to be put into the large red sharps container.
 - b. All patient garbage is to be disposed of in the red garbage bag. The garbage to be kept inside the patient's room.
 - c. Cover the toilet with toilet lid (or blue pad if no lid present) when flushing to avoid spray exposure. Wear gloves, gown and face protection when dealing with urine or stool.
 - d. Use disposable items when possible.
 - e. All patient linen that could be contaminated (i.e., blood or bodily fluids), should be placed in a clear laundry bag.
 - i. If an item is completely saturated, please discard in the red garbage bag.

Please follow the above until further notice as we work through updating and training of all applicable staff.

As part of best practice, always reference the above to ensure safe handling of a hazardous medication.

If you should have any questions about this practice change, we ask that you please address them with your Manager.

Attachments (2)