# Handling Spilled Cytotoxic Drugs Procedure

## Introduction and Aim
The purpose of this procedure is to ensure Cytotoxic Spillages are managed safely and appropriately.

## Objectives
- Ensure cytotoxic drug spillages are managed safely
- Ensure all staff have guidance in handling cytotoxic spillages

## Scope
This procedure applies to all of our staff in all locations, including those with honorary contracts, where cytotoxic drugs are prepared and administered.

## Equality and Health Impact Assessment
An Equality Health Impact Assessment (EHIA) has not been completed. This is because the procedure has been written to support the implementation the Management of Parenteral Cytotoxic Chemotherapy Policy. The Equality Impact Assessment completed for the policy found here to be no impact.

## Documents to read alongside this Procedure
- The Management of Parenteral Cytotoxic Chemotherapy Policy
- SOP on E-PIPAC in UHL
- Sop for managing a chemotherapy spill at home

## Approved by
Medicines Management Group

## Accountable
<table>
<thead>
<tr>
<th>Executive or Clinical Board Director</th>
<th>Medical Directorate</th>
</tr>
</thead>
</table>

## Author(s)
| Eurig Jenkins | Lead Pharmacist – Paediatric Oncology |
Summary of reviews/amendments

<table>
<thead>
<tr>
<th>Version Number</th>
<th>Date of Review Approved</th>
<th>Date Published</th>
<th>Summary of Amendments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>21/05/2013</td>
<td>17/10/2013</td>
<td>Updating of original procedure approved November 2004, with new spillage kits being used</td>
</tr>
<tr>
<td>2</td>
<td>07/11/2019</td>
<td>07/11/2019</td>
<td>Updated spillage procedure to include reference to E-PIPAC and Ambulatory Care. Updating of Ward List.</td>
</tr>
</tbody>
</table>
The Purpose of this procedure is to ensure Cytotoxic Spillages are managed safely

A kit containing the following equipment for dealing with spills is available on wards approved for the administration of cytotoxic drugs. There is a list of approved wards at the end of this procedure. The kit is called Berner Cytotoxic Spill Kit, Z+. Kits used will cover a spill of 1 litre. Each kit contains;

- One pair blue Berner gloves
- One pair green over gloves
- One pair of googles
- One pair of over shoes
- One Berner gown
- One facemask
- One chemosorb pad
- Three cleaning cloths
- Waste bags
- Two bag ties
- Report form
- Instructions for use

PROCEDURE

1. Clear the contaminated area and isolate from unprotected personnel.
2. Personnel dealing with the spillage should put on overshoes first, followed by gown.
3. Put on the blue latex Berner gloves (ensuring the glove cuff goes over the gown cuff).
4. Correctly don the facemask ensuring a close fit by pulling tight the two ends of the rubber band. Inhale/exhale hard several times to check breathing valve is functioning correctly.
5. Put on the goggles.
6. Put on the green gloves over the blue latex gloves.
7. Start to clean up the spillage, moving from areas of low contamination to areas of high contamination.
8. Pick out ruptured infusion bags or syringes with forceps, and place in a re-sealable plastic bag to contain further leakage before placing in a Sharpsafe container.
9. Take the Chemosorb pad and place over the spill—the special coating will bind liquids within a short time to a jelly like state.
10. Use the packaging box as sweeper and shovel to remove waste into gray/blue waste bags.
11. Use the cloths with water to clean area thoroughly and place cloths in grey/blue waste bags. It may be necessary to use more than one kit for large volume spillages.
12. Wash all contaminated surfaces with copious amounts of water. The water can be discharged down the waste pipes to the sewer with ample flushing.
13. Double wrap all contaminated items including bed linen, clothing, aprons, clothes, and dispose of as cytotoxic waste.
14. Remove green gloves only by pulling the cuff over the fingers and place in grey/blue waste bag.
15. Close and seal grey/blue bag with one of the seals provided.
16. Place grey/blue waste bag into white waste bag (marked cytotoxic waste).
17. Remove overshoes, goggles, blue gloves, mask and gown and place into white waste bag.
18. Close and seal white bag with second seal provided.
19. Place white bag into UHB yellow cytotoxic waste bag.
20. Label the sealed yellow bags with the name of the ward or department and a cytotoxic waste label.
21. Follow the Guidelines for the disposal of cytotoxic waste.
22. Complete a Datix Incident Form.
23. Order a new spill kit from Pharmacy.

FIRST AID
In all cases of contamination take the immediate first aid action measures suggested below, seek medical attention as soon as possible and complete a datix incident form.

- Contamination of the skin or mucous membranes: wash with copious amounts of water.
- Contamination of eye: rinse with copious amounts of Sodium chloride 0.9% or water if Sodium chloride 0.9% is not available. Sodium chloride 0.9% should be available at the Eye Wash Station, on each ward or clinical area.
- Inhalation: wash mouth out with water.
- Ingestion: see the individual COSHH datasheet to see if there is likely to be significant absorption from the gastro-intestinal tract. If there is no significant absorption, only local toxicity would be expected.
- In the case of needle stick injury, with a needle/syringe containing cytotoxic drugs: the area may be squeezed to express blood that may contain the drug and then held under running water. The area should be examined regularly for at least a week.

E-PIPAC
There are specific instructions on the handling of leaks/spills of chemotherapy during E-PIPAC Procedure in UHL. Please refer to Section 8 of the E-PIPAC SOP.

AMBULATORY CARE
There are specific instructions on the handling of leaks/spills in the Ambulatory Care situation. Please refer to SOP for Managing a Chemotherapy Spill at home.
WARDS AND DEPARTMENTS APPROVED FOR THE ADMINISTRATION OF PARENTERAL CYTOTOXIC CHEMOTHERAPY

1. Intrathecal Cytotoxic Chemotherapy

The following wards are approved for the administration of intrathecal chemotherapy:

<table>
<thead>
<tr>
<th>Site</th>
<th>Ward</th>
<th>Directorate</th>
</tr>
</thead>
<tbody>
<tr>
<td>UHW</td>
<td>Ambulatory Care Services (ACS)</td>
<td>ACS</td>
</tr>
<tr>
<td>UHW</td>
<td>Rainbow Day Beds</td>
<td>Child Health</td>
</tr>
<tr>
<td>UHW</td>
<td>Teenage Cancer Trust (TCT)</td>
<td>Child Health</td>
</tr>
<tr>
<td>UHW</td>
<td>Space Theatre Suite</td>
<td>Child Health</td>
</tr>
<tr>
<td>UHW</td>
<td>Paediatric Critical Care Unit (PCCU)</td>
<td>Child Health</td>
</tr>
<tr>
<td>UHW</td>
<td>B4 Haematology</td>
<td>Clinical Haematology</td>
</tr>
<tr>
<td>UHW</td>
<td>Haematology Day Centre (HDC)</td>
<td>Clinical Haematology</td>
</tr>
<tr>
<td>UHW</td>
<td>General Intensive Therapy Unit (GITU)</td>
<td>Critical Care</td>
</tr>
<tr>
<td>UHW</td>
<td>Radiology Department</td>
<td>Radiology</td>
</tr>
<tr>
<td>UHW</td>
<td>Main Theatres</td>
<td>Theatres</td>
</tr>
</tbody>
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There are fridges designated only for the storage of intrathecal cytotoxic chemotherapy on:

<table>
<thead>
<tr>
<th>Site</th>
<th>Ward</th>
<th>Room</th>
</tr>
</thead>
<tbody>
<tr>
<td>UHW</td>
<td>Teenage Cancer Trust (TCT)</td>
<td>2nd floor - Room 2F02A</td>
</tr>
<tr>
<td>UHW</td>
<td>Rainbow Day Beds</td>
<td>Anaesthetic Room</td>
</tr>
<tr>
<td>UHW</td>
<td>B4 Haematology</td>
<td>Treatment Room</td>
</tr>
<tr>
<td>UHW</td>
<td>HDC</td>
<td>Treatment Room</td>
</tr>
</tbody>
</table>

There are no wards or departments approved for administration of intrathecal cytotoxic chemotherapy at Llandough Hospital.

2. Other Parenteral cytotoxic chemotherapy

The following wards and departments are approved for the administration of cytotoxic chemotherapy by other parenteral routes:

<table>
<thead>
<tr>
<th>Site</th>
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</tr>
</thead>
<tbody>
<tr>
<td>UHW</td>
<td>Ambulatory Care Services (ACS)</td>
<td>ACS</td>
</tr>
<tr>
<td>UHW</td>
<td>Ambulatory care</td>
<td>Ambulatory Care</td>
</tr>
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