Proposed Methodology for Handling Cytotoxic And Other Potentially Hazardous Drug Contaminated Linen Safety and Health Plan for the Institutional Linen Industry

Reminder: There are no OSHA regulations currently in place specific to Linen Handling for Cytotoxic Contaminated textiles except general guidelines under the OSHA General Duty Clause Section 5(a)(1)

ALM’s Proposal Includes:
Step 1 - Recognize potentially contaminated linen
- Since linen-handling personnel cannot distinguish linens exposed to hazardous drugs we recommend that linen used by patients receiving a “hazardous drug” in the last 48 hours (and sometimes up to 7 days) be identified and bagged separately in order to identify its need for special handling. The direct care clinicians are the best equipped to make that identification since they are following special handling precautions when providing patient care.

Step 2 – Education and training:
- Review all applicable policies & procedures
- Review MSDS
- Participate in training on potential hazards, equipment, procedures & safeguards when working with linen exposed to hazardous drugs
- Become familiar with and able to recognize linens identified as hazardous
- Appropriate PPE
- Engineering or work practice controls
- Follow Standard Precautions

Step 3 - Work practice recommendations/controls should be developed into a written program/protocol and should include:
- Identification: Clinical staff responsible for administering the drug(s) are responsible for identifying the textiles as exposed to potentially hazardous drugs and communicating that information in a manner that will respect the patient’s privacy and protect the linen handler. The color coding or identification process (i.e. label, bag, color or tag of containers) is at the discretion of the facility but red (biohazard warning) should not be used. (Note: Yellow is standard practice for chemotherapy)
- Containment: Contain the textiles at the place of use in a leak proof container that identifies the contents as exposed to hazardous drugs. Place the bags in a second closed container for transportation to the laundry processing facility.
- Personal Protective Equipment: Should include but is not limited to two (2) pair of powder-free disposable chemotherapy gloves, disposable gowns made with a polyethylene coated polypropylene material with a closed front, long sleeves and elastic or knot closed cuffs, a face shield where there is a potential of splashes to the eyes, nose and/or mouth and other PPE as may be identified by the linen manager. PPE should be properly removed and disposed as required.
- Linen Processing: Empty the secondary container by placing the bags into a single batch washer (not Continuous Batch Washer/Tunnel Washer) without presorting. Remove the bags gently, to avoid aerosolizing contents, and dispose of bags as hazardous waste according to facility policy. Chemical formulas to be determined by the facility.
- Post-Sort: Since textiles are post-sorted personnel should continue to follow standard precautions and dispose of all foreign matter (sharps, fecal material, etc.) according to hazardous waste guidelines as specified by the facility.
- Second Processing: Pre-washed textiles may now be commingled with other textiles for a second washing. Use of a Continuous Batch Washer/Tunnel Washer is now acceptable.

ATTENTION: CONTINUED ON NEXT PAGE ➔
- **Medical Surveillance**: Procedures for reporting potential exposure and medical protocol should be developed in the event of a potential exposure.
- **Annual Evaluation**: All elements of the written program will be evaluated on at least an annual basis.

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