

NCCP TEMPLATE SOP FOR LOCAL ADAPTATION

MANAGEMENT OF SACT DRUG SPILLAGES

This template SOP has been developed and approved by the NCCP, considering the input of the parenteral SACT Resilience Group. The template is developed considering best practice and supported by evidence, as referenced, where available and appropriate.

Please note that these template SOPs are the minimum requirements to be used in ACU processes which should be adopted and adapted as appropriate to the local processes and documentation templates. If these minimum requirements cannot be met, the reason for this should be clearly documented locally.

Version	Date	Amendment	Approved By
V1	30/11/2021		NCCP
V1a	11/01/2022	Wording on ocular management . Updated references	

All comments and feedback are welcome at oncologydrugs@cancercontrol.ie

1 Purpose

The purpose of this standard operating procedure is to:

- a. Describe the process for dealing with systemic anticancer therapy (SACT) drug spillages within the aseptic compounding unit (ACU) and any areas that have SACT drugs present
- b. Describe the recommended contents of spill kits.

2 Scope

The scope of this SOP includes the process that applies to all staff dealing with SACT drug spillages and the preparation of SACT spillage kits in an ACU.

3 Definitions

ACU	Aseptic Compounding Unit
MSDS	Material Safety Data Sheet
PPE	Personal Protection Equipment
SACT	Systemic Anti-Cancer Therapy

4 Responsibilities

It is the responsibility of the relevant person in the hospital pharmacy department/ACU manager to ensure all staff are trained in and adhere to this procedure.

It is the responsibility of all staff to comply with this procedure.

External visitors should be instructed in the ACU gowning procedure and the gowning process should be demonstrated to them.

- It is the responsibility of all staff to notify the ACU manager/Pharmacy manager of any infectious diseases or open lesions on the exposed surface of the body. The ACU manager/Pharmacy manager will decide on the fitness of the staff member to carry out activities in the preparation area or clean room and the specific protective measures that should be taken to avoid contamination of the

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product. If not adequate protection is possible, the person should not be allowed to be involved in preparation or compounding activities.

- It is the responsibility of the ACU/Pharmacy Manager to ensure that a spill kit is always adequately stocked and in date.

5 Procedure

The HSE Guideline on the Safe Handling of Cytotoxic Drugs (2021) collectively group SACT drugs as CMRs, i.e. carcinogenic, mutagenic, or toxic for reproduction and advise that all SACT should be handled in the same manner.

- Ensure that all areas where SACT drugs are present have an accessible spill kit to deal with any SACT spillage.
- All SACT spillages should immediately be dealt with as outlined below. This should be carried out by a trained member of staff with the assistance of another trained colleague.
- Priority should be given to personnel contamination (staff or patient) and referred to occupational health where necessary as per local policy.
- Domestic staff should not be requested to clean up a SACT spillage.
- Pregnant staff should not be involved in cleaning a SACT spillage.
- Once a spill kit has been used a replacement kit should be obtained as soon as possible as per local policy.
- All SACT spillages should be reported as a medicines safety incident in line with local reporting processes and the following should be considered for inclusion in the report:
 - Nature and location of the spillage.
 - Staff involved in the spillage and mopping up procedure.
 - Drug involved and extent of contamination.
 - Actions taken.
 - Any direct skin or eye contact.

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5.1 Management of a liquid spillage:

- All staff in the vicinity should be made aware of the spillage and evacuated where appropriate. A trained staff member should be appointed to assist the clean-up and not leave the spillage unattended
- A SACT spillage kit should be retrieved
- The spillage sign should be placed in a clearly visible position
- Relevant PPE stored in the spillage kit should be donned before managing the spillage such as gloves (2 pairs), goggles, face mask, gown, overshoes and apron (See appendix 1)
- The process of clean up should follow the order of area of least contamination to area of greatest contamination. Absorbent paper towels/pads in the kit should be placed over the spillage and the majority of the liquid absorbed. These wipes should then be placed in the waste bag supplied in the spill kit while ensuring not to create splashes.
- The cytotoxic container (infusion bag/syringe/broken vial/ampoule) should be placed into a yellow bag then sealed and placed in the cytotoxic sharps bin
- Broken vials or ampoules should be cleaned up using the scoop and paper towels supplied and then placed into the cytotoxic sharps bin.
- All areas should be cleaned with copious amounts of bottled water and dried with paper towels supplied and disposed of and sealed in the cytotoxic waste bag.
- The ACU team lead/manager should be notified about the spillage and one person should be responsible for managing the spillage
- Relevant wards should be notified that there may be a delay in the delivery of SACT

5.2 Management of a powder spillage:

- All staff in the vicinity should be made aware of the spillage and evacuated where appropriate. A staff member should be appointed to assist the clean-up and not leave the spillage unattended
- The ACU team lead/manager should be notified about the spillage and one person should be responsible for managing the spillage
- Relevant wards should be notified that there may be a delay in the delivery of SACT

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- A SACT spillage kit should be retrieved
- The spillage sign should be placed in a clearly visible position
- Relevant PPE stored in the spillage kit should be donned before managing the spillage such as gloves (2 pairs), goggles, face mask, gown, overshoes and apron (See appendix 1)
- The process of clean up should follow the order of area of least contamination to area of greatest contamination. Damp paper towels should be placed over the spillage and wiped up. These wipes should then be placed in the waste bag supplied in the spill kit while ensuring not to create splashes or a cloud of powder.
- Broken vials or ampoules should be cleaned up using the scoop and damp paper towels supplied and then placed into the cytotoxic sharps bin.
- All areas should be cleaned with copious amounts of bottled water and dried with paper towels supplied and disposed of in the cytotoxic waster bag.

5.3 Management of spillage in isolator

- The area around the spill should be isolated by a staff member.
- The ACU team lead/manager should be notified about the spillage and one person should be responsible for managing the spillage.
- Relevant wards should be notified that there may be a delay in the delivery of SACT.
- For liquid spillages a packet of dry wipes should be opened and placed over the spillage.
- For dry powder spillage dry wipes should be soaked in sterile water and placed over the powder.
- Sterile detergent can be used if needed to clean residue.

5.4 Spillage/splashback onto staff member (dermal and ocular)

- **Dermal:**
 - The clothing should be removed immediately and affected area should be rinsed immediately with water then large amounts of soapy water for 15 minutes.

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- If a large surface area of skin has come in contact the staff member should be directed to appropriate showers to clean
- Seek review by medical team for patients or Occupational Health as per local policy
- **Ocular:**
 - If an eye(s) have been splashed with SACT drugs, the affected eye(s) should be rinsed immediately with water for irrigation or sodium chloride 0.9% for irrigation using an eyebath for 15 minutes.
 - Each ACU should have a readily accessible first aid eyewash station with these solutions available.
 - The affected person involved should be referred Occupational Health and to the nearest specialist eye centre for further assessment if required.
 - The ACU manager should be informed as per local policy

5.5 Spillage on clothing of staff member

- The staff member should remove themselves from source of contamination.
- All items of contaminated clothing should be removed as soon as possible. Clothing with minimal contamination should be washed as per contaminated linen. (Place in linen bag and advise the staff member to wash the item(s) 3 times at the maximum temperature for that clothing – if unknown, wash at 40°C).
- Clothing with a large amount of contamination must be disposed of as contaminated/cytotoxic waste in a cytotoxic sharps bin.

5.6 Spillage on clothing of patient

- The patient should follow the instructions in the spillage kit provided by the hospital.
- Spillage on skin or clothes should be dealt with first before addressing spills on surfaces.
- The patient should remove themselves from the source of contamination.
- All items of contaminated clothing should be removed as soon as possible. Clothing with minimal contamination should be washed as per contaminated linen. (Place in linen bag and advise the staff member to wash the item(s) 3

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times at the maximum temperature for that clothing – if unknown, wash at 40°C).

- Clothing with a large amount of contamination must be disposed of as contaminated/cytotoxic waste in a cytotoxic sharps bin.

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6 References

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2. The Health Service Executive Guideline on the Safe Handling and Use of Cytotoxic Drugs, GD 002:00
3. NHS Pan Birmingham Guidelines for the Management of Spillage of Cytotoxic Drugs v4.
4. HSE Guideline on the Safe Handling & Use of Cytotoxic Drugs. 2016
5. Guidance for Handling the Spillage of Systemic Anti-Cancer Therapy (SACT) by The West Midlands Cancer Alliance Expert Advisory Group September 2020
6. <https://www.eviq.org.au/clinical-resources/administration-of-anti-cancer-drugs/188-safe-handling-and-waste-management-of-hazardous-spill-and-accidental-exposure-management>

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7 Appendix 1

7.1 Suggested Contents of Cytotoxic Spillage Kit

CYTOTOXIC SPILLAGE KIT	
1L bottle sterile water	1
Absorbent Pad (50 x 40cm)	2
Absorbent towels	Bundle
Chemotherapy spillage sign	1
Cytotoxic waste disposal bag	1
Disposable Chemoprotect Gown	1
Disposable scoop	1
Filtered face mask (FFP2 or FFP3)	1
Nitrile Gloves	2 pairs
Overshoes	1 pair
Plastic apron	1
Safety goggles (BS EN 166)	1
Copy of SACT Spillage SOP	1

7.2 Suggested Locations of Cytotoxic Spillage Kits

Haematology/Oncology Day ward x 2
 Theatre x 1 (if administration of SACT is performed)
 In-patient ward x 2
 Pharmacy delivery area x 1
 Pharmacy Aseptic Unit x 1
 Additional/spare kits

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