

# EMERGENCY INSTRUCTIONS AND SAFETY PROCEDURES



EXCEPTIONAL CARE. WITHOUT EXCEPTION.

Revised August 2007

## EMERGENCY CONTACT NUMBERS

- 4-6666 **CODE RED - (Fire or Smoke)** In the event of fire or smoke follow the **R.A.C.E.** fire plan and immediately call the emergency number.
- 4-7777 **CODE BLUE** - Hospital (Patient Areas) Call for any person suffering cardiac, respiratory distress, or other life threatening emergency in patient areas. When calling: **1)** identify yourself and phone number, **2)** whether adult or pediatric Code Blue, **3)** specific nature of affliction and **4)** building and room number.
- 4-4444 **CODE GREEN** - Any employee who witnesses an act of violence or immediate threat of an act of violence will immediately call Public Safety and state "**Code Green**". If the person calling feels unsafe, immediately leave the area and make the call at another location. When calling: **1)** Identify the person or persons involved in the incident and **2)** Identify the location of the incident.
- 4-4444 **PUBLIC SAFETY** - Immediate response to a suspicious person, altercation, lost and found property, etc...
- 4-6666 **CONTROL CENTER** - Emergencies and immediate response to FIRE/SMOKE, CHEMICAL SPILLS, UTILITY FAILURES etc...
- 4-6000 **STAT PAGE** - Hospital (Patient Areas) Call to page personnel quickly through the page operators.

CONTINUED ON REVERSE SIDE

**EMERGENCY CONTACT NUMBERS**  
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4-4444 **CODE PINK** Hospital (Patient Areas) To report an infant or child abduction

**Call Security!** Security will call 911 and escort Emergency Medical Services to location of incident. When calling: **1)** identify yourself **2)** phone number **3)** exact location and **4)** specific nature of affliction.

4-4444 MEDICAL EMERGENCIES (Medical School and Non-Patient Areas)

8-6860 Disaster Command Center

Fully activated during a Phase C Disaster

8-6886 Disaster Information Line

8-4144 Control Center - Non-Emergency Number

8-8830 Office of Health and Safety (EHS)

8-7001 Radiation Safety Office

## ELECTRICAL SAFETY/CLINICAL ENGINEERING

### ELECTRICAL SAFETY

- Electrical devices must be properly grounded: 3-prong or double insulated.
- Never use “cheaters” (convert 3-prong to 2-prong plugs).
- Check cords/devices for frayed or bare wires, or other defects prior to use.
- Avoid using extension cords.
- Never operate clinical equipment without proper training.
- BMC (Hospital) staff – reference Clinical Engineering’s web site: [www.internal.bmc.org/clinicalengineering/](http://www.internal.bmc.org/clinicalengineering/)
- Follow the manufacturer’s instructions for use and maintenance.
- Electrical devices must be UL approved or similar approval.
- Never operate electrical equipment with wet hands.
- If working near water, use designated GFCI (ground fault circuit interrupted) outlets.

CONTINUED ON REVERSE SIDE

## ELECTRICAL SAFETY/CLINICAL ENGINEERING

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Disconnect any electrical/medical device that:

Throws sparks • Blows a fuse • Gives even the slightest shock

- Remove the device from service immediately.

- Attach tag/note: “Do Not Use”, or a Broken Equipment Tag for BMC patient care equipment.
- Notify your supervisor and others in the immediate area.
- Call the Control Center at 8-4144 or your vendor for repairs (Non Patient Equipment).
- Hospital Patient Equipment – contact Clinical Engineering at 8-6061(NP) or 4-4692(MP).
- Incidents involving patient equipment must be reported through the *Incident Report Form* and forwarded to Quality Improvement/Risk Management as soon as possible (D7, BMC). Visit the @Work section on the BMC intranet to fill out a STARS Incident/Medication Safety Report.

## CELL PHONE USE

Minimize the potential for interference with medical devices

- Restrict use in hospital except for lobbies, cafeterias and waiting rooms
- Sensitive areas posted with signage.
- Phones should be off not on standby.

*For more information please view the BMC Wireless Communications Policy on the BMC Intranet*

# HAZARD COMMUNICATION

## CONTAINER LABELING

All chemicals must have labels containing information about that chemical, including the name of the chemical, the manufacturer and its hazardous properties. When you are working with chemicals, be sure to read the container label and follow any instructions and warnings. In addition, please reference the chemicals Material Safety Data Sheet (MSDS).

## MATERIAL SAFETY DATA SHEETS

A Material Safety Data Sheet (MSDS) is written by the manufacturer of the chemical, which provides specific information in order for you to work with that chemical safely. The MSDS provides the following information:

- Identity - Chemical name and manufacturer.
- Hazardous ingredients - including worker exposure limits.
- Fire and explosion information.
- Routes of exposure.
- Physical and chemical characteristics - boiling point, vapor pressure, appearance and odor.
- Reactivity - whether the substance is stable.
- Precautions for safe handling and use.
- Personal Protective Equipment (PPE) required to work safely.

Staff working in laboratories must attend the annual Laboratory Safety Training provided by the Office of Environmental Health and Safety (OEHS). Go to [www.bumc.bu.edu/ehs](http://www.bumc.bu.edu/ehs) for training schedule. Specific training for lab personnel is required by the Chemical Hygiene Officer (CHO) including; the proper selection of PPE, the location of MSDS, safety showers, eye wash stations, fire extinguishers, hazardous waste areas, and other lab-specific information.

If you have any questions concerning a MSDS, or require a MSDS for a new product, see your CHO, call EHS at 8-8830 or go to [www.bumc.bu.edu/ehs](http://www.bumc.bu.edu/ehs).

# HAZARD COMMUNICATION

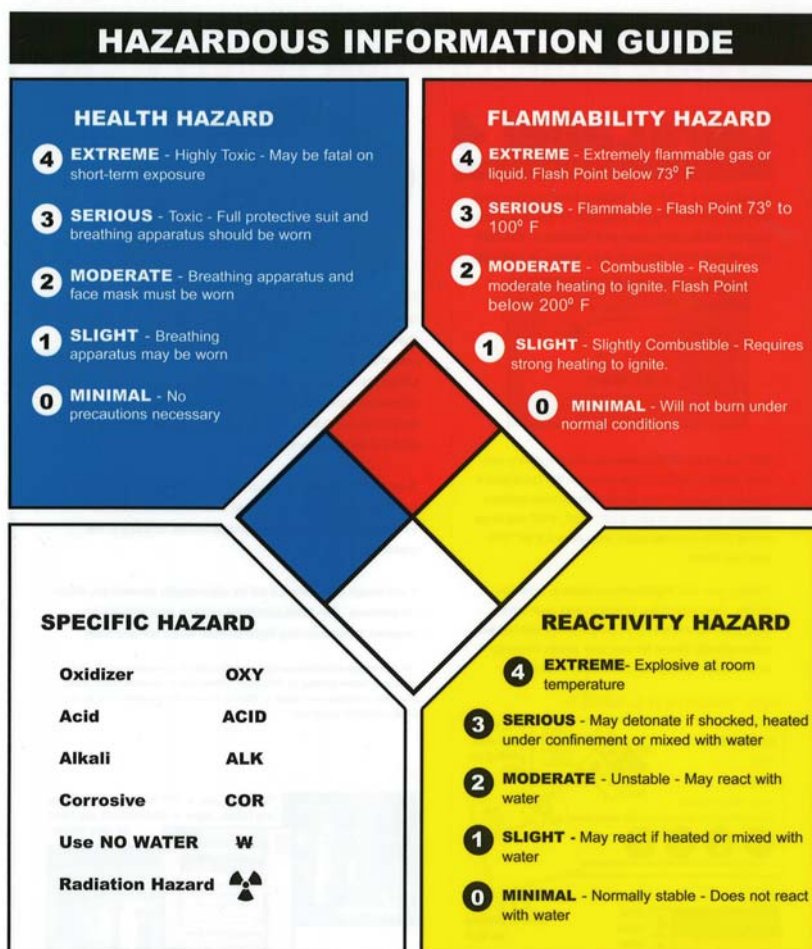
# HAZARD COMMUNICATION

## LABORATORY DOOR LABELING

The Boston Fire Department (BFD) requires the National Fire Protection Association (NFPA) 704 Diamond be posted on all laboratory doors entering into areas with chemical hazards. These labels are also provided on most chemical labels. Because these diamonds contain critical information for routine handling and fire conditions, these labels must be kept current by the Chemical Hygiene Officer (CHO). Contact OEHS for assistance with label changes.

## HAZARD RATING

A rating of 0-4 is used to indicate the hazard classification. **0-Minimal, 1-Slight, 2-Moderate, 3-Serious, and 4-Extreme**. The red section indicates the fire hazard, yellow – reactivity (stability), blue - health hazard, and the white section of the diamond is used to indicate the special hazards of the chemical such as; OX-Oxidizer, ACID-Acid, ALK-Alkali, COR-Corrosive, W-Water reactive.



# CHEMICAL HANDLING

## CHEMICAL HANDLING GUIDELINES

- Material Safety Data Sheets (MSDS) must be available in all work locations where chemicals exist.
- Prior to working with a chemical, always review the MSDS.
- Personal protective equipment (PPE) must be worn when working with chemicals.
- Keep eyewash stations and safety showers, fire extinguishers, fire alarm stations, and exits clear at all times.
- Never eat, drink, chew gum, store food, apply cosmetics or wear open-toed shoes in laboratory.
- Confine hair, loose clothing, and jewelry.
- Remove PPE, including gloves before entering common areas.
- Chemical and Biological spill kits must be readily available where hazards are present.
- Laboratory doors must be kept closed at all times.
- Do not store food in refrigerators used for chemicals. Refrigerators should be labeled with appropriate signage.
- Ensure chemicals are properly labeled.
- Do not store chemicals under sinks.
- Do not use equipment unless you have been properly instructed.
- Use best practices and equipment that minimize hazards.

## CHEMICAL STORAGE ACIDS

- Store large bottles of acids on low shelves or in acid cabinets on trays.
- Segregate oxidizing acids from organic acids, flammables and combustible materials.
- Segregate acids from bases and active metals i.e. sodium, potassium and magnesium.
- Use bottle carriers or secondary containment when transporting acid bottles.
- Have spill control materials or acid neutralizers available in the event of a spill. A spill kit should be available at all times.

CONTINUED ON REVERSE SIDE

## CHEMICAL HANDLING

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## BASES

- Segregate bases from acids.
- Store solutions of inorganic hydroxides in polyethylene containers.
- Have spill control materials or caustic neutralizers available for caustic spills. A spill kit should be available at all times.

## FLAMMABLES

- Store in approved safety cans or cabinets.
- Segregate from oxidizing acids and oxidizers.
- Keep away from sources of ignition.
- Do not store cardboard boxes and other combustible materials inside flammables cabinets.
- Keep fire extinguishing and spill control equipment readily available.
- Store highly volatile flammable liquids in an explosion-proof refrigerator.

## OXIDIZERS

- Store in a cool, dry area.
- If storing one (1) gallon or larger, place in a labeled cabinet on a tray.
- Store away from flammable and combustible materials, such as paper, wood, etc.

## PEROXIDE FORMING CHEMICALS

- Store in airtight containers in a dark, cool, dry area.
- Label containers with receiving and opening dates.
- Dispose of peroxide forming chemicals prior to the expiration date or before peroxides form.

## COMPRESSED GASES

- Store in a secure and upright position.
- Secure cylinder 2/3 to 3/4 from floor.
- Label cylinders as full, empty or in use.
- When not in use, secure cylinder cap.
- Use a cylinder cart, remove manifolds, secure cap, and chain to cart for transport.

*Please contact OEHS at 8-8830 with any questions regarding the handling, storage, transportation or disposal of chemicals.*

# INFECTION CONTROL

## THE INFECTION CONTROL MANUAL

Includes the Tuberculosis (TB) Prevention Program and the Bloodborne Pathogens Exposure Prevention Plan and is available through [www.internal.bmc.org](http://www.internal.bmc.org) in section five of the policies and procedures manual.

The Manual describes procedures to prevent hospital-acquired infections, especially those caused by inserted and implanted devices, procedures and treatments, and transmission of microorganisms to patients and staff. All employees should review their departments Infection Control Policies to determine their role in the surveillance, prevention, and control of infection.

## HAND WASHING

Must be performed before and after all patient contact and upon removal of gloves. A waterless, anti-microbial hand disinfectant may be used if there is no visible contamination of hands. Additional waterless hand disinfectant will be distributed in the event of a water system failure.



## BLOOD AND BODY FLUIDS

Blood and body fluids of all patients must be handled as potentially infectious materials. Therefore, standard/universal precautions are used whenever direct contact or contamination with blood or Other Potentially Infectious Material (OPIM) is possible. The following personal protective equipment (PPE) must be used to prevent exposure.

Medical Gloves ▲ Fluid Resistant Gowns ▲ Goggles, Masks, and/or Face Shields

Biological safety cabinets and safety shields must be used where applicable.

Phenolic or chlorinated powder must be used to decontaminate blood spills or equipment contaminated with blood or OPIM. *See chemical and biohazard spill panel for more information.*

CONTINUED ON REVERSE SIDE

# INFECTION CONTROL INFECTION CONTROL

## PATIENT ISOLATION

Guidelines for placement of a patient on isolation can be found in the Infection Control Manual. For assistance or further information, please call Hospital Epidemiology at 4-4801(MP) or 8-7422(NP) or page the Infection Control Nurse.

Certain isolation rooms in the Hospital are equipped for patients with tuberculosis. To enter a room used for AFB isolation, a staff person must be cleared by Occupational and Environmental Medicine (OEM), be trained by Hospital Epidemiology and be fit tested for an N95 respirator. *Contact OEHS (8-8830) for more information.*

## BIOHAZARD WASTE/REGULATED MEDICAL WASTE

Regulated Medical Waste (red-bag waste) includes liquid or semiliquid blood or other potentially infectious material, or items caked with or so saturated that they would release blood or other potentially infectious material if compressed. Regulated waste also includes contaminated sharps. Regulated medical waste, red bags and sharps containers must be located at points of use and maintained in a sanitary condition, i.e. emptied prior to overflowing. *See biohazard waste panel for more information.*

# INCIDENT/ACCIDENT REPORTING

## INCIDENTS AND INJURIES

In the event of an incident such as a near miss or minor injury to a patient, student, visitor, or employee you should:

- Immediately report all details to your supervisor.
- If the incident warrants medical attention, go to Occupational & Environmental Medicine (OEM), 8-8400, on F5 (Preston), from 7:30 a.m. to 4:00 p.m. M-F, or the Emergency Departments at either the Menino or Newton Pavilion at any other time.
- An accident report must be completed for employee injuries.

#### Medical School Employee Injuries

- Complete the Accident Reporting and Analysis (ARA) form. Forms are available through the Office of Human Resources, 560 Harrison Avenue.

#### BMC Employee Injuries

- Complete the Accident Reporting and Treatment (ART) form.

#### Medical School Near Misses and Other Incidents

- Contact the Office of Environmental Health and Safety (OEHS) at 8-8830 for reporting procedures.

#### BMC incidents must be reported through the Incident Reporting Policy

- Please report all incidents and injuries through the stars program at:

[www.stars-web.com/STARSWeb85/EntryPoint.asp?ClientId=BMC&userId=BMC&userPassword=BMC](http://www.stars-web.com/STARSWeb85/EntryPoint.asp?ClientId=BMC&userId=BMC&userPassword=BMC)

### SERIOUS INCIDENTS AND INJURIES

For an injury that requires immediate medical attention, and the individual cannot easily report to OEM or the Emergency Department, you should immediately:

- See Emergency Contact Information Panel
- Medical School and Non Patient areas - call SECURITY at 4-4444. Security will call the Emergency Medical Service (EMS), and escort the response team to the incident location.
- BMC Patient areas – call Code Blue (4-7777)
- Administer first aid, if properly trained.
- Secure the accident scene.
- Security will contact OEHS for additional response and for investigative purposes as necessary.
- OEHS will contact the Office of Quality Improvement/Risk Management and the Office of Personnel as necessary.
- The employee's supervisor should conduct an investigation and complete ARA form (Medical School) or the ART form (BMC).

*If in doubt as to whether or not the situation is an emergency, treat it as an emergency and follow the steps listed above*

## INCIDENT/ACCIDENT REPORTING

### EMERGENCY PREPAREDNESS (DISASTER)

Emergency/Disaster response plans are located at [www.internal.bmc.org](http://www.internal.bmc.org) Emergency/Disaster Response webpage. Hard copies are located in the following offices: Command Center, Office of Emergency Preparedness, Environmental Health and Safety, Central Administration, Nursing Supervisors, Public Safety Supervisors, and Senior Management.

Key personnel will be notified of the declaration of an emergency via the Send Word Now Emergency Notification System.

The Command Center will be activated during phase C, phase D events and as needed. The Command Center phone number is 4-6860 or 8-6860



The Emergency Preparedness or “Disaster” plan describes the response of the medical center to any event that may jeopardize the safety or well-being of patients, visitors, students, or personnel, disrupt services or stress hospital operations due to a sudden influx of casualties.

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SEE RELATED SECTIONS FOR THE FOLLOWING EVENTS:

- Fire Safety. (CODE RED). Implement the RACE plan, 4-6666.
- Bomb Threats. Contact Public Safety immediately, 4-4444.
- Utility Failure. Contact the Control Center, 4-6666.
- Chemical and Biohazard Spills. Contain spill if possible. Contact the Control Center, 4-6666.
- Weather Emergencies. Report to department.
- Code PINK. Contact Public Safety, 4-4444.
- Code GREEN. Contact Public Safety, 4-4444.

## OPERATIONAL PHASES OF THE EMERGENCY PREPAREDNESS PLAN

*Key personnel will be notified of the declaration of an Emergency via the **Send Word Now** Emergency System.*

**Phase A Advisory:** Administrative alert of a potential, impending, or actual event for which on-site personnel and resources are sufficient to manage the immediate response or casualty numbers under routine operations but that may become worse.

- Managers:** assess area supplies and staffing. No response necessary unless instructed to respond.
- All staff** should continue their normal duties.

**Phase B:** Response to an emergency event that stresses facility operations but can be managed by on-duty personnel and resources. The event impacts a portion of the institution and requires the response of some departments. The plan quickly mobilizes those resources needed to manage the event.

- Managers:** should contact their departments, inform personnel of the emergency, assess departmental resources and staffing and coordinate departmental response when directed to do so.
- All staff** should remain on duty and report to your immediate supervisor. Assist with the rescue of patients, visitors, students, and personnel from harm and follow the instructions of your supervisor. You will be released by your supervisor if not needed for response.

**Phase C:** Response to an emergency event that overwhelms facility operations and resources and requires the call in of additional staff, procurement of additional resources, alternatives for facility operations and services, and support from outside agencies. Establishes mechanisms to utilize city support. The command center will be activated.

- Managers:** should report to your departments, inform personnel of the emergency, assess departmental resources and staffing, call in additional staffing as needed and coordinate departmental response when directed to do so.
- All staff** will remain on duty and report to your immediate supervisor for assignment or deployment to an alternative assignment, assist with the rescue of patients, visitors, students, and personnel from harm and follow the instructions of your supervisor. The staffing pool may be opened to coordinate the assignment of staff to areas of need.

**Phase D:** Response to catastrophic event in the city of Boston that overwhelm institutional and city resources. The command center will be activated and can be contacted at 4-6860. All available resources will be used to provide the best possible care to the greatest number possible. Emergency operations will supersede any and all “normal” operational or service functions and reporting structures. Utilities, traffic access, and communication systems may be limited or unavailable.

**Managers:** should report to your departments, inform personnel of the emergency, assess departmental resources and staffing, call in additional staffing if able, and coordinate departmental response as directed by the incident commander.

**All staff on duty** will remain on duty and report to your immediate supervisor for assignment or deployment to the staffing pool for reassignment, assist with the rescue of patients, visitors, students, and personnel from harm and follow the instructions of your supervisor. A staffing pool will be activated to coordinate the redeployment of personnel to areas of need.

**Off duty staff** should ensure the safety and well being of your family and report to the staffing pool as soon as safely possible. On duty staff will be released as soon as replacements are available.

## EMERGENCY PREPAREDNESS (DISASTER)

## EMERGENCY PREPAREDNESS (DISASTER)

### IN RESPONSE TO THESE EVENTS

- Remove individuals from areas of risk. Remove equipment if appropriate.
- Call the appropriate number as listed on the Emergency Contact Numbers section.
- Contact your supervisor before leaving your work area if possible.
- Managers/supervisors paged, must notify their own staff to mobilize resources.
- The Incident Commander or alternate will be notified by the Control Center.
- As necessary, Power Plant Command Center will be activated
- The Command Center phone number is 4-6860.
- Public Safety will secure exits/entrances as necessary and direct media to designated location.
- All employees are expected to report to their departments for instructions.
- Reference the Emergency Preparedness Plan for more detailed instructions. Copies are available in the Emergency Departments, Control Center, Command Center, and BMC's Central Administrators office.

## FIRE SAFETY

Upon the detection of SMOKE or FIRE, follow the "RACE" plan described below.

### THE R.A.C.E FIRE PLAN

|                       |  |
|-----------------------|--|
| <b>Rescue/Remove</b>  | remove person(s) from the immediate fire scene/room.   |
| <b>Alert/Activate</b> | the nearest fire alarm pull station, call out "CODE RED", Dial 4-6666 to state the exact location and explain details  |
| <b>Confine</b>        | fire and smoke by closing ALL doors to rooms and areas.  |
| <b>Extinguish</b>     | a small fire by using a portable fire extinguisher if possible or use to escape large fires.<br><b>Evacuate</b> horizontally to another fire zone if necessary (patient building), or vertically by stairs (non-patient building), according to procedure. |

## PROTOCOL

Do not use elevators to evacuate unless directed by the Boston Fire Department.

In certain departments, more specific fire plans have been developed because of special needs. Become familiar with your area-specific fire plan.

In the Medical School and non-patient areas, handicapped or personnel requiring assistance during evacuation should be evacuated to the nearest stairwell (area of refuge). Report the exact location to CONTROL at 4-6666 for a BFD assisted evacuation. (Example: Evans Building, Stair 1, level 6). Stairwells are posted with signs specifying an exact location.

Assist fire response team and the Boston Fire Department (BFD) as requested.

## FIRE SAFETY

### FIRE EXTINGUISHERS



Class "A" Fire - Wood, paper, textiles, other ordinary combustibles of Fires



Class "B" Fire - Flammable liquids, oils, solvents, paint, grease, etc.



Class "C" Fire - Electrical: Live or energized electric wires or equipment



Class "D" Fire Flammable metals

**K**

Class "K" Fire Combustible cooking media / appliances using oils and fats cooking

#### Recommended Type of Extinguisher

##### Class "A" or "ABC" Extinguisher

Uses water, water-based chemical, foam, or multi-purpose dry chemical. A strictly Class A extinguisher contains only water.

##### Class "ABC" or "BC" Extinguisher

Uses foam, dry chemical, or carbon dioxide to put out the fire by smothering it or cutting off the oxygen.

##### Class "ABC" or "BC" Extinguisher

Uses foam, dry chemical, or carbon dioxide to put out fire by smothering it or cutting off the oxygen.

Class "D" Uses dry chemical to put out fire by smothering it or cutting off the oxygen.

##### Class "K" Extinguisher

Uses wet chemical or dry chemical type to put out fire by smothering it or cutting off the oxygen.

## FIRE EXTINGUISHER USE – P.A.S.S.

THE ACRONYM "P.A.S.S." DESCRIBES THE FOUR-STEPS USED IN OPERATING A FIRE EXTINGUISHER.

- Pull Pull the safety pin on the extinguisher.
- Aim Aim the hose of the extinguisher at the base of the fire.
- Squeeze Squeeze the handle to discharge the material.
- Sweep Sweep the hose across the base of the fire from side to side.

## FIRE EXTINGUISHERS

### **BOMB THREATS/INFANT-CHILD ABDUCTION**

#### SUSPICIOUS LETTER OR PACKAGE

- Leaking with something unusual
- Ticking
- Exposed wiring or other suspicious hardware
- No return address
- Incorrect address

• Addressed to someone unknown or name misspelled Note: There may be any combination of the above, simply one may not warrant suspicion.

If a suspicious letter or package is received, handle it as little as possible. Move away from the immediate area and immediately call Public Safety at 4-4444.

#### TELEPHONED BOMB THREAT

- Keep caller on phone as long as possible--DELAY--ask caller to repeat.
- Get as much information about caller as possible.
- Tell a nearby co-worker to contact Security 4-4444.
- Ask the following questions:◆Where is the bomb located?◆If time bomb, when is it set to explode?◆What kind of bomb is it?◆Why is caller doing this?
- Do not discuss the threat in public. Note details: sex, accent, speech impediment, age, background noises, unusual phrases, etc.

#### SEARCH

Public Safety will coordinate the search efforts and maintain a log of areas searched.

Staff will search their departments and call public safety at 4-4444 to report "All Clear" if nothing is found.

If a suspicious object is located:

Do not touch it

Move away from the immediate area

Call Public Safety at 4-4444 to report the location and description  
Evacuate patients, visitors, students, and employees from the immediate area when directed to do so  
by Public Safety

## BOMB THREATS/INFANT-CHILD ABDUCTION

### BOMB THREATS/INFANT-CHILD ABDUCTION

#### PROCEDURE

Upon discovery or report of a missing infant or child, or upon hearing the HUGS audible alarm, available personnel will immediately call Public Safety at 4-4444, provide a description of the infant/child and abductor (if known), and attempt to locate the infant child and if possible follow the abductor in order to properly identify to Public Safety Officers. Personnel other than Public Safety are not expected to detain the abductor. Staff should not disturb or touch anything in the area where the child was last located in order to preserve physical evidence for law enforcement officials.

A Public Safety Supervisor, as soon as practical, will call the Control Center to initiate the notification of a Code Pink Emergency Response as described in the Emergency Preparedness plan. The Control Center will contact Hospital Operations to initiate the over head announcement of a Code Pink and identify the location. Public Safety will establish the Command Center at the Power Plant.

The Page Operators will announce on the overhead voice page “Code Pink and the location”. This will serve as instruction to BMC Personnel to search their work areas and report to Security at 4-4444 when the search is complete.

*See Infant/Child Abduction Policy on the BMC Intranet.*

## UTILITY FAILURE

The Utility Failure Emergency Response Plan can be located at [www.internal.bmc.org](http://www.internal.bmc.org) Emergency/Disaster Response web page.

#### ELEVATORS

If you are in an elevator that becomes inoperable, call the Control Center at 4-6666 via the telephone in each elevator. The Control Center Technician will instruct you on how to perform a few simple procedures to get the elevator car moving again. If this fails, immediate assistance will be sent. Do not attempt to extricate yourself unless assisted by a trained elevator mechanic.

#### COMMUNICATION SYSTEMS

TELEPHONES: All emergency powered telephones are red for easy identification. There are user instructions posted on these phones. Public Safety will coordinate the distribution of radios to critical clinical areas and personnel if needed.

#### HEATING, VENTILATION, AIR CONDITIONING AND PLUMBING

Call the Control Center at 4-6666 to report any outage of any HVAC systems.

#### WATER

Call the Control Center at 4-6666 to report any problems with water systems. In the event of a water system failure,

bottled water delivered by support service personnel should be used for human consumption until the water system has been re-certified. Waterless soap will be distributed to patient areas.

## GAS AND VACUUM

In the event of a local or system-wide failure of gases call the Control Center at 4-6666.

### Oxygen:

- Immediately contact the Control Center at 4-6666 to report the oxygen failure.
- Rescue all oxygen dependent patients from harm.
- Prepare oxygen dependent patients for evacuation when directed to do so in the event that systems can not be restored quickly.

### Compressed Air:

- Immediately contact the Control Center at 4-6666 to report the compressed air failure.
- Rescue all vented patients from harm.
- Prepare vented patients for evacuation when directed to do so in the event that systems can not be restored quickly.

## EMERGENCY POWER SYSTEMS

In the event of a local or system wide failure, call the Control Center at 4-6666.

Emergency Power should be available to areas within 10 seconds to supply power to the red outlets from the emergency generators.

Ensure all critical equipment and one (1) computer is plugged into the RED emergency power outlets.

## UTILITY FAILURE

# WEATHER EMERGENCIES

Any weather-related event that may effect normal operations to the Medical Center may activate the Emergency Preparedness Plan. This plan assists the Medical Center in maintaining services when a situation exists that may prevent personnel, students, or visitors from entering or leaving the Medical Center for an extended period of time. Types of weather emergencies include: blizzards, floods, hurricanes, etc..

## IN RESPONSE TO WEATHER EMERGENCIES

See the Weather Emergency Plan located at [www.internal.bmc.org](http://www.internal.bmc.org) on the Emergency/Disaster Response webpage.

- Unplug all unnecessary equipment, appliances and sensitive electrical instruments.
- Unplug all computers, printers and fax machine.
- Keep one computer plugged into the RED emergency power outlets.
- Locate and distribute emergency response items stored in your units such as computer “downtime” forms and flashlights.
- Assist as needed or as directed by your supervisor.
- When conditions warrant, move staff/students away from windows.
- Contact your Supervisor before leaving your department



The hospital incident commander will direct the dissemination of specific instructions related to the type of weather emergency including:

- Movement of patients, visitors, students and employees to areas of safety.
- Movement of equipment to safe areas for storage.
- Resources available for staff unable to leave the hospital.

## CLOSING OR DELAYED OPENING

In the event weather conditions warrant that only essential personnel report to the Medical Center, each department must determine essential personnel status. Announcements will be made between the hours of 6:00 a.m. to 9:00 a.m. on the following radio and television stations

Radio WBUR 90.9 FM, WBMX 98.5 FM, WRKO 680 AM, WBZ 1030 AM

Television WBZ-TV Channel 4, WCBV-TV Channel 5, WHDH-TV Channel 7

The Disaster Information Line 638-6886 will be updated periodically to inform personnel of hospital status and weather specific instructions for staff.

# WEATHER EMERGENCIES

## CHEMICAL AND BIOHAZARD SPILLS

### CHEMICAL SPILL

- Remove any affected personnel from the area.
- Attend to injured personnel, as necessary.
- Call the Control Center at 4-6666.
- Contain the spill, unless doing so poses a risk, and alert others in the immediate area.
- Before attempting to clean up the spill, know what the chemical is and locate the appropriate MSDS (Material Safety Data Sheet).
- Smalls spills can be cleaned up using a chemical spill kit if it is safe to do so.

- Call EHS 8-8830 for assistance and guidance.

### CHEMICAL SPILL TO BODY

Immediately flood exposed area with water (faucet, safety shower) for at least 15 minutes.  
Call the Control Center at 4-6666.

### CHEMICAL SPLASH TO EYES

- For a splash to the eyes, immediately rinse eyes and inner surface of eyelid with water continuously for 15 minutes. Forcibly hold eye open to ensure effective wash.
- Locate the MSDS, follow instructions and seek medical attention.
- Go to Occupational & Environmental Medicine, (8-8400) on F5 (Preston), M-F 7:30 a.m. to 4:00 p.m. or the Emergency Department at either the Menino or Newton Pavilion at any other time.
- Report incident to supervisor.
- Supervisor shall complete the ARA or ART form. See Incident / Accident Reporting section.

### BLOOD/BODY FLUID SPILLS

- Isolate the area and alert personnel in immediate area of spill.
- Attend to injured or contaminated persons and remove them from exposure.
- Personal protective equipment must be worn such as gloves, protective clothing, and eye and face protection.
- Cover spill with paper towels or other absorbent materials. Use biohazard spill kit (if available).
- Soak absorbents with disinfectant and let sit over spill for at least 10 minutes.
- Use paper towels to wipe up the spill, working from the edges into the center.
- Clean spill area with fresh towels soaked in disinfectant.
- Place towels in red biohazard waste container.
- Call the Control Center at 4-6666. Control will notify Custodial Services (medical school) or Environmental Services (hospital) for clean up.

## CHEMICAL AND BIOHAZARD SPILLS

### RADIATION SPILL

Radiation spills can only be cleaned up by persons authorized to handle radioactive material.

#### MINOR

Minimal Exposure & Contamination Potential

#### MAJOR

Significant Exposure & Contamination Potential Stock solutions

< 500 uCi weak beta emitter spill e.g. H-3, C-14, S-35 > 500 uCi weak beta emitter spill

< 10 uCi hard beta emitter spill, e.g. P-32 > 10 uCi hard beta emitter spill

< 1 millicurie gamma emitter spill > 1 millicurie gamma emitter spill

### MINOR SPILLS OF LIQUIDS AND SOLIDS

- Notify persons in the area that a spill has occurred.
- Prevent the spread of contamination by covering the spill with absorbent paper, or wetted absorbent paper for solid spills.
- During regular office hours call the Radiation Protection Office at 8-7001. After hours call the Control Center at 4-6666.

- Clean up the spill using disposable gloves and absorbent paper. Place material into plastic bag for transfer to a radioactive waste container. Place contaminated gloves and any other contaminated material in bag.
- Seal and label bag properly.
- Survey the area with a low-range radiation detector survey meter if potential exists for external exposure.
- Wipe test if weak beta emitter. Check area around the spill. Also check your hands, clothing, and shoes for contamination.

## MAJOR SPILLS OF LIQUIDS AND SOLIDS

- Notify all personnel not involved in the spill to vacate the area.
- Prevent the spread of contamination by covering the spill with absorbent paper, or wetted paper for solids, and limit the movement of all personnel who may be contaminated.
- Shield the source if possible. Check personnel for contamination: hands, clothing, and shoes.
- Restrict access to the contaminated area and post appropriate signage. Consider closing the room and locking or otherwise securing the area to prevent re entry.
- During regular office hours call the Radiation Protection Office at 8-7001. After hours call the Control Center at 4-6666.

Each incident must be evaluated on a case-by-case basis to determine a minor vs. a major spill. Above are basic criteria for minor vs. major spills.

# RADIATION SPILL

## GENERAL WASTE

### GENERAL WASTE

General waste is waste not contaminated with hazardous chemicals, infectious, radioactive or other physical agents.

#### Office Waste

Place in waste receptacle for Custodial or Environmental Services pickup. Waste will be taken to a designated dumpster.

#### Non-recyclable glass (Laboratory)

Place in cardboard box lined with a red bag (available from your building custodian or Environmental Services).

Chemical bottles that were used for acutely toxic materials, call EHS for disposal.

#### Plastic and Glass Pipettes (Laboratory)

- Place in cardboard box lined with red bag (available from your building Custodian (BUMC)/ (BMC) Environmental Services). *If biohazardous waste see Biohazardous Waste Panel.*

- When full, seal bag and close box with tape.
- Pipettes used with hazardous chemicals need to be disposed as chemical waste. *See Chemical Waste Section.*

## RECYCLABLE WASTE

Recyclable paper is placed in the blue recycling containers at designated areas throughout the medical center. Call Facilities Management 8-4211 (Medical School) or Environmental Services 4-5183 (Hospital) when container is full.

Batteries are recycled through the Office of Environmental Health and Safety. They are collected in identifiable, white plastic containers. They are provided to departments generating batteries for disposal. When the containers are near full, call OEHS at 8-8830 to arrange a pickup. If you would like a container for the collection of used batteries call OEHS at 8-8830.

Cathode Ray Tubes (CRT's) -Computer Monitors

Medical School – Call Custodial Services, 8-4211 for pick-up.

Hospital – Call Information Technology (IT), 4-4500 for pick-up.

## OFFICE EQUIPMENT / LABORATORY EQUIPMENT

Equipment beyond its useful life to be discarded such as Photocopiers, CPUs, keyboards, etc... OEHS at 638-8830. Laboratory equipment will need to be decontaminated by laboratory personnel prior to pick up. Contact OEHS for info.

# GENERAL WASTE

## CHEMICAL WASTE

### HAZARDOUS (CHEMICAL) WASTE DEFINED

Any solid, liquid, and gaseous chemical which is to be discarded, is unwanted, or is no longer useful and has been identified by the Environmental Protection Agency (EPA), the Massachusetts Department of Environmental Protection (MADEP), the Massachusetts Water Resources Authority (MWRA) or OEHS as hazardous and/or requiring special treatment storage and disposal.

### HAZARDOUS (CHEMICAL) WASTE

Hazardous Waste must be stored in a clean, compatible container with a sealable cap. Each waste container must have a HAZARDOUS WASTE LABEL affixed to it. All hazardous waste containers must be stored in the SATELLITE ACCUMULATION AREA (SAA). HAZARDOUS (CHEMICAL) WASTE LABELS Must be filled out with the

following information:

- 1 Hazardous Constituents must be listed in FULL English words (no abbreviations)
- 2 A statement of the hazard(s) must be made by checking the appropriate hazard boxes on the SAA label.
- 3 The associated hazard characteristics.
- 4 The date when the container is full.

Labeled Hazardous Waste containers must be stored in the SATELLITE ACCUMULATION AREA (SAA). A spill containment tray and satellite accumulation poster designate the SAA. Once a Labeled Hazardous Waste container is filled and dated, please visit the OEHS website at [www.bumc.bu.edu/ehs](http://www.bumc.bu.edu/ehs) to schedule a hazardous waste pick-up.

Pick-ups are conducted every Wednesday and Friday.

## CHEMICAL WASTE

### BIOHAZARD WASTE

**BIOHAZARDOUS WASTE IS CONTAMINATED WITH POTENTIALLY INFECTIOUS AGENTS OR TISSUES.**

Biohazard Waste is managed by:

Medical School (BUMC) – Facilities Management, 8-4211

Hospital (BMC) – Environmental Services, 4-5183

#### SHARPS

Place needles and syringes intact in a designated, leak-proof, puncture-resistant container with a biohazard symbol on it. Many sharps containers will be picked up automatically. If they become full prior to pickup, do not overfill, cover if container has closable lid, and call for pickup.

#### BLOOD AND BODILY FLUIDS, TISSUES AND LAB CULTURES

Place in cardboard box (available from your housekeeper or building custodian) lined with a red bag. Label with BIOHAZARD symbol. When full, fold bag and seal box.

#### AUTOCLAVABLE OR CHEMICALLY TREATABLE WASTE

Disinfect using steam sterilization or alternate chemical disinfectant that will kill organisms. Record the date, name, type of waste, temperature, dwell time and volume for each load that is rendered non infectious. Spore test autoclave monthly and record results.

#### PLASTIC / GLASS PIPETTES

Place in double lined cardboard box with biological waste. When full, fold bag and seal box.

# BIOHAZARD WASTE