**Introduction**

KEEP THIS MANUAL IN A VISIBLE LOCATION SO IT IS READILY ACCESSIBLE.

This manual is designed to outline those procedures and precautions to follow which will minimize the possibility of personal injury or extensive property damage due to unforeseen occurrences.

UTMB Health places high value on the safety and welfare of its employees, faculty, staff, students, patients and visitors. Anyone wishing more information regarding emergency procedures, or to report safety issues, should contact the UTMB Health department of Environmental Health and Safety (EHS) at (409) 772-1781.

The University of Texas Medical Branch Health will be referred to as “UTMB Health” throughout the manual. Be familiar with the information contained within this Emergency Manual. More information about specific emergencies may be found in the UTMB Health Policies and Procedures Handbook, or from your supervisor.

This manual was developed and approved by the Environment of Care Committee.
Cardiac Arrest – Code 99

If you discover someone who has suffered cardiac or respiratory arrest (they are unconscious and do not appear to be breathing), you should:

1. Note the time.
2. Summon help while remaining at the person’s side. Shout or yell if necessary.
3. Begin cardiopulmonary resuscitation if you know how, and continue CPR until the Code Team arrives and takes over.
4. If you are not in a healthcare facility that has immediate Code Team Response capabilities, activate your local EMS by dialing (9) 911.
**Chemical Spills and Exposures**

Chemical spills may include formaldehyde (formalin), gluteraldehyde (Cidex), trichloroacetic acid (TCA) and chemotherapeutic agents.

Personal protection is of primary importance and clean up of spills is secondary.

- Notify personnel in the immediate area that a spill or a chemical exposure has occurred.
- Evacuate nonessential personnel from area and isolate spill area.
- Attend to persons who may have been contaminated or exposed.
  - Flush eyes with water thoroughly or as specified by the SDS for that material.
  - Wash exposed skin with copious amounts of soap and water.
- Notify your supervisor and Environmental Health and Safety (EHS) at (409) 772-1781*.
- Stand by to advise EHS of immediate situation. EHS will either assist staff in clean up procedures for small spills or will dispatch the on-call person or the Hazardous Spill Response Team for clean up.

*After normal business hours (8:00 a.m. – 5:00 p.m.), contact the University Telephone Operator (dial [409] 772-1011) for the EHS On-call person.
Disaster: Hurricanes

Preparation is the key to surviving a hurricane. You need to know what your responsibility will be as outlined in the Institutional and Departmental plans. Posting of a “hurricane watch” by the Hurricane Center means a hurricane may strike in 24-48 hours. A “hurricane warning” is issued if a hurricane is expected to strike within 24 hours. Many times one or more tornadoes may accompany a hurricane. Remember storm surge, flash floods and tornadoes are the most potent killers associated with a hurricane.

The Specialty Care Center at Victory Lakes and the UTMB Health Off Campus Clinics & Facilities in the coastal region will generally not remain open during a hurricane. Therefore the primary role of staff prior to landfall is to prepare their facility and notify patients of any appointment cancellations.

Each off campus clinic or facility should initiate their pre-determined Departmental Plans and any pre-storm checklists should be followed to assure that facilities and assets are protected. Staff members may not leave their duty station until released by their manager/supervisor, and they must keep their emergency contact information up-to-date and remain in contact so that they can be called back to duty if needed or if the storm makes landfall in another location. Upon clearance by UTMB Environmental Health & Safety Department, pre-assigned personnel will return to their assigned work locations as soon as it is safe to do so in order to conduct damage assessments and/or to return to normal operations as soon as possible. If communications are lost with the Incident Command on the main campus, UTMB Health leadership is authorized to establish an Incident Command, if needed, in order to expedite recovery operations and return to normal operations as soon as possible.
### IN CASE OF FIRE

<table>
<thead>
<tr>
<th><strong>Rescue</strong></th>
<th>Patients and others from immediate danger.</th>
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</thead>
<tbody>
<tr>
<td><strong>Alarm</strong></td>
<td>By pulling the nearest fire alarm pull box and calling (9) 911.</td>
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<tr>
<td><strong>Contain</strong></td>
<td>Fire by closing all doors and windows and keeping hallway fire doors closed.</td>
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<tr>
<td><strong>Extinguish</strong></td>
<td>If the fire is small, fight it by using the proper extinguisher. Begin evacuation of patients, records, medications, and equipment.</td>
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Medical Equipment Failure

How do you know equipment is safe to use?

- It has a green electrical safety tag which is not expired and the equipment is operating properly.
- If the sticker is out-of-date, remove the equipment from service and place a “Remove from Service” tag and call Clinical Equipment Services at (409) 747-6143.
- Equipment must have preventive maintenance and a repair history.
- If you do not know who does PM and repair, check with your manager.

What do you do when equipment does not work?

- Complete a “Remove from Service” tag, attach to equipment, and call the appropriate service representative in CES at (409) 747-6143.
- Service representative will let area know if equipment is defective, or if “user error” was the cause. User error is often due to poor design, poor labeling or poor instructions. This lets UTMB Health work with the manufacturer on problems.
- Additional staff education may be needed.

What do you do when a patient sustains an injury, illness, extended length of stay, or death (or could have) and a device is involved?

Risk Management should be notified of the incident and they report for UTMB under the Safe Medical Device Act (SMDA).

- Remove the equipment, any component, or disposable from use and hold for Risk Management to investigate.
- Complete an occurrence report and mail to Risk Management (RM).
- Depending on severity of event, call RM at (409) 772-4775 and Clinical Equipment Services at (409) 747-6143.
- CES will assess the equipment; RM will interview staff and prepare a report.
- The VP for Quality, Safety and Clinical Information determines if UTMB will submit a report to the FDA or manufacturer under the SMDA.
**Safe Medical Device Act (SMDA)**

A Medical Device includes nearly all the products used for patient care, except drugs and biologicals. A Medical Device can range from something as simple as suture material to something as sophisticated as advanced electronic equipment.

**Criteria for a Reportable Medical Device Incident**

- The medical device must be a contributor or cause of an event.
- The event must be a serious illness, injury or death, as described by one or more of the following:
  - Life threatening.
  - Results in permanent impairment of a body function or permanent damage to a body structure.
  - Necessitates medical or surgical intervention to preclude permanent impairment of a body function or permanent damage to a body structure.

**SMDA Incident Reporting**

- Immediately notify the attending physician, Risk Management (409-772-4775) and your supervisor.
- The attending physician will examine the patient.
- Secure and isolate the device, including any associated disposable items.
- After contacting Risk Management, complete an incident report.
- Forward the incident report to Risk Management.
- Risk Management will initiate an investigation.
Severe Weather Plan

Definitions

• **Severe thunderstorm watch**: Issued when conditions are right for severe thunderstorms. Be alert for changing conditions.

  **Severe thunderstorm warning**: Issued by the National weather Service when storms with strong winds, rain, and hail are expected in the area. A severe thunderstorm warning may last for up to one hour.

• **Tornado watch**: Issued when weather conditions exist that could produce a tornado. A tornado watch may last for several hours.

• **Tornado warning**: Issued when a tornado has actually been sighted and is threatening the community. At this time emergency messages are broadcast by the media. A tornado warning usually lasts for thirty minutes or less.

**Severe Thunderstorm Warning, Tornado Watch or Tornado Warning**

- Individuals who receive the weather statement call for their specific department must notify the manager on duty and contact those designated.
- Employees must be prepared to move all individuals to a safe area per the departmental plan and move unsecured equipment and hazardous chemicals to a safe area (if time allows).

- A damage assessment team will be formed to assess all damage from the tornado and determine priority of repair work needed.
- Structure damage (area involved, type, and extent of damage) is reported by the manager on duty to Business Operations and Facilities (BOF) by phone, if possible. If phone service is interrupted, a verbal message is taken to the Communication Center.
- Depending upon the extent of damage and number of injuries it may be necessary to implement the External Disaster Plan.

**Flooding**

- Low level areas of the island and mainland are prone to flooding, both from severe rains or from storm surges related to approaching hurricanes. Those employees living in these areas should allow extra time to evacuate, since these areas are impacted sooner.
- Certain entrances of the campus buildings may be inaccessible due to flooding. Alternate access routes should be identified in departmental plans.
Any person experiencing or observing acts or threats of violence should call the local Police at 911. Employees should also report the event to his/her immediate supervisor or nearest member of management. Local management should reasonably attempt to ensure the safety of other employees. Violent acts occurring in the workplace greatly affect the individual’s feelings of safety and security while at work and may have far reaching effects. Causes of violent acts may range from robbery attempts, domestic violence carried into the workplace, or specific individuals or groups being targeted for a variety of reasons. In order to provide employees with a safe environment in which to work, UTMB Health will not tolerate violence or threats of violence in the workplace. These terms have been defined as follows:

- An act of violence includes any physical action, whether intentional, reckless, or accidental that harms or threatens the safety of another individual in the workplace.
- A threat of violence includes any behavior that by its very nature could be interpreted by a reasonable person as intent to cause physical harm to another individual.
- Workplace includes all University facilities and off-campus locations where faculty, staff or agents are engaged in University business.

- Suspicious packages are any packages or items that do not appear to be consistent with what are expected during normal daily operations. Some indicators to watch for:
  - Misspelled words
  - Address to title only or incorrect title
  - Badly taped or sealed
  - Lopsided or uneven
  - Rigid or bulky
  - Oily stains, discolorations, or crystallization on the wrapper
  - Excessive tape or string
  - Protruding wires

Management Consultation
Employee Relations ......................... (409) 772-8696
Psychological Support After Event
Employee Assistance Program............ (409) 772-2485
Training on Workplace Violence Prevention
Employee Assistance Program.......... (409) 772-2485
Biological Wastes (Medical Waste)

Biological wastes are collected and disposed of in segregated waste streams which are identified by the collection container or the color of the bag. Please direct questions to Environmental Health and Safety (409) 747-0515.

Incineration (Yellow Bags)
Yellow bags identify “regulated medical waste” that will be treated by incineration. Yellow bag waste streams include trace amounts of chemotherapy medications (i.e., empty IV bags, gloves, tubing, etc.), non-hazardous pharmaceutical wastes, and pathological wastes consisting of animal and human body parts, tissues, fetuses, organs and human anatomical remains. The exception is syringes with needles used during chemo treatment which are disposed of in an approved leak-proof sharps container and then placed into a yellow bag for disposal.

Non-Hazardous Pharmaceutical Waste
- White containers with the blue lids are labeled “Non-Hazardous Pharmaceuticals”.
- Yellow containers (typically used for trace chemotherapy waste) may also be used for “Non-Hazardous Pharmaceuticals”.

Animal, Pathological and Microbiological Waste
- Disposal in a yellow bag.
- This category includes animal waste from animals intentionally exposed to pathogens, pathological waste (consisting of human body parts, tissues, fetuses, and human anatomical remains), trace chemotherapy wastes (empty bags, vials, gloves, masks, gowns, wipes etc.), and microbiological waste (cultures and stock of infectious agents).

Autoclave (Red Bags)
Medical waste collected in red bags is treated by steam sterilization (industrial autoclave) and maceration with final disposal in the landfill. Waste designated include medical wastes such as blood and blood products, microbiological wastes (i.e., cultures and vaccines), body fluids, sharps, other soiled disposable medical paraphernalia (i.e., gowns, gloves, bandages, tubes, bags, etc.). These wastes are disposed of in a red bag with the exception of sharps which are required to be disposed of in an approved leak-proof, hard plastic “red” sharps container.

Human Blood, Blood Products and Sharps Containers
- Disposal in a red bag.
- This category includes bulk human blood and blood products (in concentrations greater than 100 mL) and sharps (scalpels and trocars).
Removal of Medical Waste
Patient care employees are responsible for collecting medical waste into the appropriate containers. Once the containers are full (i.e., sharps container or nonhazardous pharmaceutical container), place into the red or yellow bag and then place into the UTMB “labeled” medical waste cardboard boxes. All medical waste is treated and disposed of at the UTMB Medical Waste Processing Facility according to the color of the bag.

Transportation Services for Medical Waste
To arrange for medical waste transportation and disposal services contact the UTMB Office of the Sustainability Manager at (409) 747-2948. The UTMB Medical Waste Processing Facility technicians pick up and transport medical waste according to a set schedule. Upon pick up the technician is required to individually weigh and record the weight onto each waste container before transporting back to the Processing Facility on campus. The technician will prepare a shipping receipt and maintain records of all shipments of untreated medical waste for three years. Generators (UTMB Clinic) must also maintain records documenting the amount of medical waste generated at that location. The UTMB clinic will receive a pink copy of the shipping receipt and receive a white copy at a later date once the medical waste is treated and disposed of according to the municipal solid waste rules for medical waste. The clinic shall maintain these receipts for three years.
Blood/Body Fluid Exposures and Spills

Occupational Exposures to Bloodborne Pathogens

For ALL occupational exposures to bloodborne pathogens:

- Wash the area immediately with soap and water.
- For exposure to eyes, mouth or nose flush mucous membranes with water immediately or as soon as feasible following contact of such body areas with blood or other potentially infectious materials.
- Notify supervisor immediately.
- Call Employee Health Center/Student Wellness for information regarding blood and/or body fluid exposure management.

For employees on campus:
Employee Health Center (409) 747-9172  
(8:00 a.m. – 4:30 p.m., Monday – Friday)

For students on campus:
Student Wellness (409) 747-9508  
(8:00 a.m. – 5:00 p.m.)

After hours, weekends or holidays, report to the Emergency Department. Follow up with Employee Health/Student Wellness the next business day. The Access Center Hotline is staffed 24-hours a day, 7 days a week at 1-800-917-8906. Nurses are available to answer healthcare related questions.

Off-site clinics should follow the clinic’s specific policy for instructions. For more information, visit www.utmb.edu/policy/hcepidem/search/01-02.pdf

An occupational exposure requiring monitoring (and potentially requiring chemoprophylaxis) is defined as:

- Percutaneous injury (e.g., needle stick, laceration with a sharp object).
- Contact with mucous membranes or ocular membranes.
- Contact with non-intact skin (e.g., skin that is chapped, abraded).
- Contact with intact skin that is prolonged or involves an extensive area with Blood or other potentially infectious fluids (semen; vaginal secretions; and cerebrospinal, synovial, pleural, peritoneal, pericardial and amniotic fluids; bloody body fluids and unfixed tissue).

Cleanup of Blood Spills on Environmental Surfaces

- Put on gloves, cover gown, mask and eye protection. Wear double or heavy gloves to clean up spills if glass is present. Use forceps to pick up any sharp objects such as broken glass before the fluid is wiped up. Place glass in a puncture-resistant (sharps) container.
- Absorb spill with disposable absorbent material (e.g., paper towels, spill pads).
- Dispose of soiled absorbent material in regular trash unless dripping, then place in a red medical waste bag.
- Apply a hospital-grade disinfectant to the area of the spill.
RCRA-listed waste collection must be stored in a secured, designated location, where it is generated/accumulated (e.g., nurses’ station or medication room), and the container must be kept closed. This location is where hazardous waste is stored will be referred to as a “Satellite Accumulation Area.”

- Waste containers must be in good condition and labeled with the words “hazardous waste.”
- Once the waste container is full, go online to schedule a chemical waste pick up at www.utmb.edu/bof/epm/default.asp. If you have questions contact EHS at (409) 747-0515.
- In the case of a spill of RCRA-listed hazardous pharmaceuticals, call EHS at (409) 772-1781. After hours, contact the University Telephone Operator by dialing “0” from a campus phone or (409) 772-1011. Request the EHS on-call person.

EPA’s Resource Conservation and Recovery Act (RCRA) hazardous waste determination criteria is used to classify pharmaceuticals listed in UTMB’s medication formulary. Pharmacy policy identifies RCRA medication requiring special disposal through Environmental Health and Safety.

Note: Syringes with needles used on a patient to inject RCRA labeled pharmaceuticals (i.e., insulin, vaccinations, and pain medications) shall be disposed of in the NEAREST red or blue sharps container.
What Goes in Which Box?
Disposal of Pharmaceuticals in Patient Care Areas

RED SHARPS BOX
All used or uncapped needles with or without syringes.

RCRA BLACK BOX
All of these listed medications and their containers. Full, partially used or empty.
- Alcohol (>24% conc.)
- Alprostadil
- Amyl nitrate
- Benzocaine Gel
- Bexarotene
- Chemotherapy (unused or partial)
- Coly-Mycin S Otic (drops)
- Cortisporin Otic (drops)
- Dexamethasone
- Influenza vaccine
- Insulin (all types)
- Lindane
- Meningococcal vaccine
- Naftifine
- Nicotine (unused patches only)
- Nitroglycerin (all forms)
- Paregoric
- Physostigmine salicylate
- Selenium (except TPN solution)
- Selenium sulfide
- Silver nitrate (Applicator Swabs)
- Silver sulfadiazine
- Warfarin

SEPARATE BLACK BOX – AEROSOLS
Benzocaine Spray

YELLOW OR BLUE BOX (white or clear with blue lid)
All other used, partially used or open medications and vials.
Place inside a yellow bag when full.

Trace Chemo – Trace Chemotherapy (spent/empty IV bags, gloves, tubing, etc.) must go into a yellow bag/yellow box.
Refer to Pharmacy Policy 7.53 Safe Handling and Spill Management Cytotoxic/Hazardous Agents.

Unused and Unopened Medication Returns
Return unopened medications to the pharmacy or place of purchase. If unable to return to the pharmacy or the place of purchase, the medication should be discarded in the appropriate container as specified above.
Refer to Pharmacy Policy 7.72 Disposal of Pharmaceuticals for updates.

Attention – Dispose of unused or expired hazardous chemicals by scheduling a pickup with EHS online @ http://www.utmb.edu/bof/epm/input.asp.
**Bomb Threat**

**If You Receive a Telephone Bomb Threat**

- Do not hang up.
- Remain calm.
- Try to prolong the conversation and get as much information as possible.
- Notify a co-worker of the situation and have them contact the Clinic Manager and the police at (9) 911. They should give the operator the location of the call, the phone number the call was made to and the name of the person taking the call.
- Co-worker should get the Emergency Procedures Manual and open to the Bomb threat Checklist page and hand to call receiver.
- Note what you hear. Are there background noises, such as music, voices, or cars?
- How does the caller’s voice sound? Any accent? What sex? What age? Any unusual words or phrases?
- Does the caller seem to know about UTMB or the Clinic?
- How is the bomb location described?
- Does the caller use a person’s name?
- Does the caller give his/her name?
- When the call is over, complete the Bomb Threat Report immediately and call (9) 911 to give the police dispatcher all the information you collected on the checklist. Identify yourself – give your name, phone number, department, building and room number.
- After this is done, notify your supervisor immediately. Then stand by for further instructions.
- If it is deemed necessary to evacuate, you will be notified by your supervisor or the overhead paging system. Evacuate via the primary route for your area, or by the alternate route if so directed.

**If You Discover a Bomb or Suspicious Item**

- Leave it untouched and secure area until Police arrive.
- Go to a telephone. Call (9) 911 and report a suspicious item. You may be asked to assist in a search, because you are familiar with the area.
Radioactive Material Incidents
In Clinical Laboratories

Radioactive material spills may be classified into two general categories, either minor or major.

Minor Spill
A minor spill is one in which the extent of the contamination is limited to small laboratory surfaces or equipment. During the course of the spill, contamination is not spread either internally or externally to personnel. The radionuclide spilled is not such that the spill results in excessive external exposure to personnel. Control and cleanup of the spill does not result in serious delays in normal work procedures. In the event that a minor spill occurs in your area the following steps should be taken:
1. Notify all individuals in the area that a spill has occurred.
2. Cover the area of the spill with absorbent paper. Disposable pads or paper towels are excellent absorbers.
3. Disposable gloves must always be worn while cleaning up a spill. Change these gloves often. This will help eliminate internal or external contamination of you and others.
4. Using the absorbent material, carefully soak up any remaining liquid and dispose of the papers as radioactive waste.
5. Using a survey meter, check the area around the spill, and your hands and clothing for contamination. For spills of low energy beta emitters, such as H-3 or C-14, a wipe test will need to be performed in order to determine the presence of contamination.
6. Perform decontamination if necessary and perform follow up wipes to ensure that the area is clean. All materials used in the clean up are to be disposed of as radioactive waste.
7. Report the incident to Radiation Safety (22279)*.

Major Spill
A major spill is one in which contamination of large laboratory areas occurs, internal or external contamination of laboratory personnel occurs, the radionuclide spilled is such that excessive external exposure to personnel occurs, and/or serious delays in normal work procedures are a result. The following steps should be taken in the event of a major spill:
1. Inform all individuals not involved in the spill to vacate the area.
2. Cover the spill with absorbent pads but do not attempt to clean up.
3. In order to prevent further spread of contamination: confine the movement of any contaminated individuals. Also, prevent individuals not involved in the spill from entering the area.
4. Notify Radiation Safety of the spill (22279)* and they will evaluate the situation and provide technical assistance for clean up of the spill.
5. If external decontamination of an individual is necessary, flush the area with water and wash using a mild soap and lukewarm water. Scrubbing vigorously is not necessary and may result in damage to the excellent barrier the skin provides.

With either type of spill, please remember that it does not take much to spread contamination. It can be tracked around on the bottoms of shoes, by the movement of contaminated containers, handling tools, and gloves. Depending on the form of the material, it can actually travel on wind currents. Improper cleaning techniques may also result in the spread of contamination.

*After normal business hours (8:00 a.m. – 5:00 p.m.) contact the University PBX Operator (Dial 409-772-1011) for EHS On-call person.
Patients Receiving Therapeutic Amounts of Radionuclides

If an area is suspected to be contaminated due to the patient’s blood or body fluids that contain radioactive material, the following guidelines should be followed:

1. Contact Nuclear Medicine or the Radiation Safety Office. Refer to the Nurses’ Instruction Sheet in the patient’s chart for appropriate phone numbers.
2. Mark off the entire area of potential contamination. This must be done to prevent further spread of personnel contamination.
3. Ensure that personnel inside the area or those who have entered the area remain for monitoring. Do not allow individuals to move about the hospital.
4. Use absorbent material such as paper towels or diaper to contain the spill and prevent further contamination. Do not remove the materials until Radiation Safety or Nuclear Medicine arrives.

If an individual suspects that his or her skin or clothing has become contaminated with radioactive material, the following guidelines should be followed:

1. Contact Nuclear Medicine or Radiation Safety Office. Refer to Nurses’ Instruction Sheet in the patient’s chart for appropriate phone numbers.
2. Have the individual remain in the area near the patient’s room. Do not allow the individual to move about the hospital.
3. If the individual’s hands have become contaminated, have them wash them immediately with soap and water.
THIS CARD IS CURRENTLY BLANK. LET ME KNOW IF YOU HAVE ANY ADDITIONAL INFORMATION TO PLACE HERE.
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