



**HEALTH RESEARCH ASSOCIATION**

1640 Marengo Street – 7<sup>th</sup> Floor  
Los Angeles, CA 90033

**POLICY & PROCEDURE**

Subject: <b>CHEMOTHERAPY &amp; CYTOTOXIC DRUG HANDLING</b>		Issued By: IDS PHARMACY	
		Approved By: Kathleen R. Hurtado R.Ph. HRA's President & CEO	
Policy #: 2011	Issue Date: November 1, 2006	Revised Date: August 20, 2007	Effective Date: September 30, 2007

Reference: Original Chemotherapy Drug Handling Policy dated 4-12-2006 and updated as of 11-1-2006.

**PURPOSE**

To describe procedures for handling anti-neoplastic drugs in order to maintain compliance with USP Chapter 797 guidelines on hazardous drug handling. *Note: The USP 797 Guidelines have been undergoing significant revisions in recent years and USP will give no information on when the update might be published. Until the new guidelines are published, IDS Staff will strictly adhere to the policies, procedures and guidelines described below. USP has issued written guidance recently, which states that, until the revisions are complete, the old USP 797 Guidelines remain in effect.*

**GENERAL POLICY & PROCEDURES**

- IDS STAFF MUST BE WELL-TRAINED & COMPETENT:** All IDS Staff working with chemotherapy (a.k.a. cytotoxic and/or anti-neoplastic) drugs must be well-trained and must demonstrate competency in the accurate and safe preparation of hazardous drugs;
- FAN/BLOWER & RE-SANITIZATION REQUIREMENTS:** Laminar air flow workbench (LAFW) blowers must either be operated continuously – 24 hours a day – or must be turned on for at least 30 minutes prior to compounding sterile or hazardous products. If the fan/blower is not kept on 24/7, the work area must be re-sanitized prior to each use;
- HOOD MUST BE CERTIFIED EVERY SIX MONTHS OR AFTER ANY RELOCATION:** The LAFW hood and cabinet must be recertified by a qualified technician every six months or at any time the cabinet is physically moved;
- USE YELLOW SHARPS CONTAINERS FOR CHEMOTHERAPY/CYTOTOXIC DRUGS & SUPPLIES:** Cytotoxic needles and syringes must be discarded into YELLOW chemotherapy sharps containers;
- REPLACE SHARPS CONTAINERS WHEN TWO-THIRDS FULL:** Whenever sharps containers are two-thirds full, they must be sealed and replaced.

Subject:		Issued By:	
<b>CHEMOTHERAPY &amp; CYTOTOXIC DRUG HANDLING</b>		IDS PHARMACY	
		Approved By: Kathleen R. Hurtado R.Ph. HRA's President & CEO	
Policy #:	Issue Date:	Revised Date:	Effective Date:
2011	November 1, 2006	August 20, 2007	September 30, 2007

**SPECIFIC GUIDELINES & PROCEDURES**

1. **PERSONNEL TRAINING AND EVALUATION:**

- a. All IDS Staff must review the “Technical Assistance Bulletin on Handling Cytotoxic and Hazardous Drugs” published by the American Society of Health-System Pharmacists and located here: [http://www.ashp.org/ahfs/d\\_agents/a390010.cfm](http://www.ashp.org/ahfs/d_agents/a390010.cfm); and
- b. All personnel must demonstrate knowledge of the appropriate procedures described in this document in the case of any accidental hazardous drug contact or spills;

2. **ADDITIONAL “GOWNING” RECOMMENDATION FOR CHEMOTHERAPY DRUGS:** Prior to reviewing the items below, please read the “Cover Yourself with ‘Scrubs’” section of the IDS Pharmacy’s “Sterile Admixture & Drug Compounding Policy & Procedure” on pages 2 and 3. Then read the additional requirements below:

- a. Eye protection must be worn;
- b. Two pairs of gloves shall be worn during the compounding of chemotherapy drugs. One pair must be worn under the gown cuff and the outer glove should be pulled up over the gown’s cuff;

3. **ADDITIONAL COMPOUNDING TECHNIQUES:** The following are in addition to the instructions contained in the IDS Pharmacy’s “Sterile Admixture & Drug Compounding Policy & Procedure,” which should be read prior to reading the items below:

- a. All chemotherapeutic agents are to be dispensed in a Ziploc-type bag;
- b. All chemotherapeutic agents must contain the following cautionary label: “Contains Cytotoxic Agent! After use, dispose of properly.”

Subject:		Issued By:	
<b>CHEMOTHERAPY &amp; CYTOTOXIC DRUG HANDLING</b>		IDS PHARMACY	
		Approved By: Kathleen R. Hurtado R.Ph. HRA's President & CEO	
Policy #:	Issue Date:	Revised Date:	Effective Date:
2011	November 1, 2006	August 20, 2007	September 30, 2007

4. **SPILL PROCEDURES OF CHEMOTHERAPEUTIC AGENTS:**

- a. As with chemotherapeutic compounding, “double gloving” is required whenever IDS Staff Members are cleaning up accidental spills of chemotherapeutic agents;
- b. Any and all contaminated items must be placed in a Ziploc-type bag prior to removal from the hood;
- c. Clean the hood thoroughly with bleach;
- d. USC's policies regarding cleaning up chemical spills can be found here: <http://capsnet.usc.edu/LabSafety/ChemicalSafety/ChemicalHygienePlan.cfm?LayoutOutFile=CAPSPDFFlashPaperLayout.cfm&Displayformat=PDF> and here: [http://capsnet.usc.edu/LabSafety/ChemicalSafety/documents/HMMP6\\_EP\\_000.pdf](http://capsnet.usc.edu/LabSafety/ChemicalSafety/documents/HMMP6_EP_000.pdf). Only trained IDS Staff should attempt to clean up small spills of hazardous chemicals inside the LAFW hood. To clean up a large spill, and spills outside of the LAFW hood, IDS Staff must contact USC's Department of Public Safety by calling (213) 740-6000 and request assistance from the USC Environmental Health & Safety Department's Hazmat Team.

**RESPONSIBILITY**

Pharmacist-in-Charge  
All IDS Staff