



HEALTH HOLDING

HAFER ALBATIN HEALTH
CLUSTER
MATERNITY AND
CHILDREN HOSPITAL

Department:	Pharmaceutical Care Department		
Document:	Multidisciplinary Policy And Procedure (MPP)		
Title:	Storage And Management Of Hazardous Medications & Chemicals		
Applies To:	Pharmacists, Physicians & Nurses		
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1. PURPOSE:

- 1.1 To develop a set of safety rules and regulations that address the identification, selection, handling, storage, use and disposal of hazardous waste / materials at all areas covered by the Pharmacy Department.
- 1.2 To provide guidelines for the management of chemical spills / waste spills.
- 1.3 To establish guidelines for precautionary measures necessary to minimize accident or injury while performing duties.

2. DEFINITONS:

- 2.1 MSDS (Material Safety Data Sheet): Data Sheets detailing appropriate safety measures required to be carried out for each specific chemical or waste spill.
- 2.2 HEPA Filter: Special filter used in laminar flow hoods to purify the air inside the LFH.
- 2.3 Hazardous Material: Materials in various forms that can cause death, serious injury, long-lasting health effects, and damage to buildings, homes and other property.

3. POLICY:

- 3.1 The Pharmacy Department will apply the guidelines provided by the CBAHI standards to ensure that safety measures are in place for safe handling of hazardous medications and pharmaceutical chemicals.
- 3.2 The pharmacy personnel who generate hazardous waste must ensure proper identification, collection, documentation, packaging and disposal of hazardous material according to the Hospital Safety Policy and Procedures, and be able to manage chemical & hazardous spills as outlined in the MSDS.
- 3.3 The department of pharmacy shall provide and maintain Material Safety Data Sheets (MSDS) for all hazardous medications and pharmaceutical chemicals within the department, with the exception of human serum derived drugs, and infectious live vaccines.
- 3.4 Pharmacy staffs who are attempting to conceive, pregnant, or breast-feeding will be allowed to work in areas for handling chemicals and hazardous medications.

4. PROCEDURE:

- 4.1 Hazardous Chemicals (Material and Wastes): Hazardous materials include chemicals, flammable materials and chemotherapeutic agents as well as products considered as:
 - 4.1.1 Carcinogens - may cause cancer in humans.
 - 4.1.2 Mutagens - may cause changes in human genes or chromosomes.
 - 4.1.3 Teratogens - may cause birth defects in offspring.
 - 4.1.4 Neurotoxins - may cause damage to the nervous system (brain, spinal cord, etc).
- 4.2 Location of Hazardous Material:
 - 4.2.1 Drug store.
 - 4.2.2 In-Patient Pharmacy.
 - 4.2.3 Out-Patient pharmacy.

- 4.3 Safe Handling And Disposal Of Hazardous Waste / Materials:
 - 4.3.1 The Pharmacy staffs working in areas where hazardous materials are used or stored are aware of and know how to safe handle dangerous substances and can change the HEPA filter of the TPN safety cabinets.
 - 4.3.2 The use of the hazardous materials in the Pharmacy Department will be reviewed annually by the Head of the Pharmacy Department or his Designee; and submit the findings to the Safety Department.
 - 4.3.3 All hazardous materials/chemicals are classified, labelled, and listed in areas where they are stored or used, as per department policy.
 - 4.3.4 All chemicals are stored in a separate place
 - 4.3.5 A Material Safety Data Sheet (MSDS) is to be obtained for every chemical stored or used and identified as hazardous.
 - 4.3.6 A master file of all MSDS will be kept and made available at the unit for those who are exposed to hazardous materials where they are kept or handled.
 - 4.3.7 All sharps, including hypodermic needles and syringes, suture needles, knife blades, trocars from drains and opened glass ampoules of medicines will be disposed of into puncture-resistant sharp containers.
 - 4.3.8 All hazardous medications and chemicals are received in the Pharmacy Department by specially designated personnel and stored in a designated area for chemicals only.
 - 4.3.9 Spill kits are available where hazardous material are stored or used, and staff is trained on how to handle spills
 - 4.3.10 Firefighting equipment should be kept at the storage area where flammable materials are stored.
 - 4.3.11 In case any staff's eyes contact with chemicals, there's in the Pharmacy Department a sink available for eye washing
 - 4.3.12 An OVR Form must be completed for all hazardous materials and waste spills and exposures, to be sent to The Safety Department for review and analysis. (Ref. to OVR policy).
- 4.4 Management of Chemical / Waste Spills: If a leak or spill is found, the following action should be taken:
 - 4.4.1 Identify the chemical before attempting to clean up any hazardous chemical spills.
 - 4.4.2 Obtain Material Safety Data Sheet (MSDS) on chemical, and apply the procedures for cleaning up that kind of chemical leak, or chemical spill.
 - 4.4.3 Alert people in the immediate area of spill, Supervisor and Safety Officer.
 - 4.4.4 Evacuate all personnel from the area and close all doors.
 - 4.4.5 Ensure adequate ventilation.
 - 4.4.6 Wait by the spill area in a safe distance, until assistance arrives to provide guidance to the Safety Officer.
 - 4.4.7 Complete an OVR Form for spill or leak.
- 4.5 Disposal of pharmacy Material:
 - 4.5.1 Non – contaminated materials from the pharmacy will be placed in a waste containers lines with plastic bags.
 - 4.5.2 This material will be removed daily by the Housekeeping Department.
 - 4.5.3 All sharp objects will be disposed in a sharp container.
- 4.6 Personnel Safety: All personnel hazards and accidents/incidents should be reported to the Head of the Pharmacy Department or designee
 - 4.7.1 General Safety Regulations:
 - 4.7.1.1 Potential exposure risks are in place for pharmacy staffs who are attempting to conceive, pregnant, or breast feeding involved in the for handling chemicals and hazardous medications and staff are offered alternative work assignment.
 - 4.7.1.2 Long hair will be confined to the back of the head when on duty.
 - 4.7.1.3 Hands will be washed frequently and thoroughly.
 - 4.7.1.4 Smoking is prohibited in all areas of the pharmacy including the washrooms.
 - 4.7.1.5 Eating and drinking should be restricted to the offices and lounge area of the pharmacy.

5. MATERIAL AND EQUIPMENT:

- 5.1 Patients' Medical Record (MR)
- 5.2 Hazardous Medications & Chemicals list
- 5.3 Physician order sheet
- 5.4 Prescription slip
- 5.5 OVR form

6. RESPONSIBILITIES:

- 6.1 Head of Pharmacy Department
- 6.2 FMS Department

7. APPENDICES:

- 7.1 N/A

8. REFERENCES:

- 8.1 Pharmacy Department DPP-PHD-046 Verbal and Telephone Orders, 2007.
- 8.2 The website at www.hopkinspharmacy.org, staff meetings and departmental newsletter.
- 8.3 APP-PH-001: Prohibited Abbreviations and Symbols, P.M.H 1436.

9. APPROVALS:

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Hazardous Medication list

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| <ul style="list-style-type: none">• Azathioprine• Cabergoline tablet• Carbamazepine tablet• Clomifene citrate tablet• Cyclophosphamide tablet• Cyclosporin tablet• Digoxine tablet• Dinoprostone• Methimazole tablet• Fluconazole capsule• Hydroxychloroquine sulphate• Hydroxyurea tablet• Letrozole tablet• Medroxyprogesterone tablet• Mycophenolate Mofetil tablet• Propylthiouracil tablet• Phenytoin tablet• Sodium Valproate tablet• Spironolactone tablet• Tacrolimus tablet• Tamoxifen tablet• Topiramate tablet• Vigabatrin tablet | <ul style="list-style-type: none">• Dihydroergotamine• Goserelin injection• Leuprolide injection• Lyophilized Human Chronic Gonadotrophin injection• Methotrexate injection• Misoprostol injection• Oxytocin injection• Urofollitropin injection• Voriconazole
<ul style="list-style-type: none">• Sodium Valproate syrup• Clonazepam syrup |
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The list was updated based on NOISH guidelines and available Medications at MCH.
Safe Practices to be followed by HCPs to avoid harm caused by Hazardous medications based on MCH's Material safety data sheets (MSDS).

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