Infection Prevention & Control Guidelines for Foot Care Settings 2008

Contact Information
Pierce County Antibiotic Resistance Task Force
Infection Control and Prevention Committee

Gwenda Felizardo, RN, BSN, CIC
Group Health Cooperative, Infection Control
Felizardo.g@ghc.org
Phone: (253) 383-6374
Co-Chair, Infection Control and Prevention Committee, Pierce County Antibiotic Resistance Task Force

Marcia Patrick, RN, MN, CIC
MultiCare Health System
Director of Infection Control
marcia.patrick@multicare.org
Phone: (253) 403-1108
Co-Chair, Infection Control and Prevention Committee, Pierce County Antibiotic Resistance Task Force

Lois Lux, MSN, RN
Tacoma-Pierce County Health Department
Nurse Epidemiologist
llux@tpchd.org
Phone: (253) 798-6416

Susan Scanlan, DPM, Executive Director, Washington State Podiatric Medical Association (WSPMA) www.WSPMA.org
NWPODIATRY@aol.com
Phone: (206) 922-3587

Stephen Fuson, DPM, Tacoma, WA
sfuson@pacificpodiatrygroup.com

John Furman, CIC, COHN-S
Washington State Department of Labor
360-902-5666

ANTIBIOTIC RESISTANCE Task Force
Table of Contents

I. PURPOSE .............................................................................................................1
II. SUPPORTIVE DATA .............................................................................................1
III. OCCUPATIONAL HEALTH RISKS TO THE EMPLOYEE OR PROVIDER ........1
IV. ROOM APPROPRIATENESS FOR FOOT CARE .................................................2
V. ROOM SET-UP .....................................................................................................2
VI. INSTRUMENT PREPARATION ............................................................................2
VII. INSTRUMENT REPROCESSING .........................................................................3
VIII. SUPPLY SET-UP ..................................................................................................5
IX. PATIENT SAFETY ................................................................................................5
X. PROVIDER AND EMPLOYEE SAFETY ...............................................................6
XI. PERSONAL PROTECTIVE EQUIPMENT (PPE) ..................................................6
XII. PROCEDURE SAFETY .........................................................................................6
XIII. ROOM CLEAN-UP BETWEEN PATIENTS .......................................................7
XIV. END OF DAY ROOM CLEAN-UP .......................................................................8
XV. SANDING/BURRING DRILL AND VACUUM CLEANING .....................................9
XVI. GUIDELINE ATTACHMENTS ...........................................................................9
XVII. REFERENCES ..................................................................................................11
XVIII. ADDITIONAL WEBSITE RESOURCES ..........................................................12

ATTACHMENT 1: High Level Disinfectant Procedures ..............................................13
ATTACHMENT 2: OPA Competency Check List .......................................................15
ATTACHMENT 3: OPA Fact Sheet ...........................................................................17
ATTACHMENT 4: OPA Material Safety Data Sheet (MSDS) ....................................19
ATTACHMENT 5: Test Strip Monitoring Log ............................................................27
ATTACHMENT 6: OPA Neutralization Procedure ....................................................29
ATTACHMENT 7: Neutralizer (MSDS) ....................................................................31
ATTACHMENT 8: Ordering Resource List ...............................................................33
ATTACHMENT 9: Supply and Equipment List ..........................................................35
I. PURPOSE

To provide up-to-date information to ambulatory clinics and/or podiatry offices performing foot care who are responsible for providing a safe patient and employee environment that eliminates or minimizes the risk transmission of pathogens and infection.

These guidelines are targeted to the general family practice clinic or podiatric office where routine foot care is performed. The Centers for Medicare and Medicaid Services (CMS) defines routine foot care as "the cutting or removal of corns or calluses, the trimming of nails and other routine hygienic care."

II. SUPPORTIVE DATA

These guidelines address basic infection control practices and applications for routine foot care. The information set forth in these guidelines is based on federal and state regulations that include but are not limited to: Occupational, Safety and Health Act (OSHA), Washington State Department of Occupational Safety and Health (DOSH), the Environmental Protection Act (EPA), Washington State Department of Health (WA-DOH), and national infection control guidelines and recommendations that include but are not limited to the Centers for Disease Control and Prevention (CDC), Association for Professionals in Infection Control and Epidemiology (APIC), American Association for Medical Instrumentation (AAMI), and the United States Pharmacopoeia (USP) 797.

Sanding and burring precautions are identified separately within each section since additional precautions are needed to address the aerosolization of the nail and skin dust and environmental contamination that results.

III. OCCUPATIONAL HEALTH RISKS TO THE EMPLOYEE OR PROVIDER

A. Because injuries with sharps are a potential risk, DOSH/OSHA requires use of sharps with safety features. These safety sharps include scalpels, blades, and needles/syringes.

B. People who require foot care are in a high-risk group for carriage of multi drug-resistant organisms such as Methicillin Resistant Staphylococcus aureus, (MRSA) or Vancomycin Resistant Enterococcus (VRE).

C. Aerosolizing procedures can transmit pathogens and cause environmental contamination.

D. Use of sanders/burrs to trim nails results in large quantities of nail dust aerosols that contain keratin, keratin breakdown products, viable fungal components, yeasts, molds and bacteria.
IV. ROOM APPROPRIATENESS FOR FOOT CARE

A. Routine Foot Care: Any room is appropriate for routine foot care (trimming of nails, corns, calluses).

B. Sanding/Burring: A room dedicated to sanding and burring is recommended. Sanding/burring procedures generate dust aerosolization, contaminating the environment, equipment, and supplies in the room, increasing risk of pathogen transmission.

C. Settings NOT Recommended for Sanding:
   1. Minor operating room (MOR) or surgical procedure room, injection room, endoscopy areas.
   2. Exam rooms in medical offices that will be used for different types of patient exams between foot care sanding procedures.

V. ROOM SET-UP

A. Routine Foot Care: Assure room is visually clean and organized.

B. Sanding or Burring Procedures: Assure room is visually clean and organized. Nail dust aerosolization is an environmental contaminant that can transmit organisms either through direct contact or indirect contact with the environment.
   1. Cover exposed items on walls and counters with cloth or paper sheets or clear plastic bags when sanding/burring or aerosolizing procedures are anticipated.
   2. Remove or minimize room equipment.
   3. Turn on portable Hepa Air Filter Cleaner (if available).
   4. Use sanding/burring vacuum (if available).

VI. INSTRUMENT PREPARATION

Assure proper reprocessing, storage, and handling of all sterile and clean instruments.

A. Perform hand hygiene prior to accessing sterile instruments.

B. Use sterile instruments for procedures involving viable tissue.

C. May use either sterile or high level disinfected instruments for nail and foot care. This includes bandage scissors.

D. Remember single use sterile instruments are disposable and discarded after patient use.

E. Do NOT store sterile instruments in uniform pockets or on dirty surfaces.
VII. INSTRUMENT REPROCESSING

A. Clean Instruments First
   Soiled instruments must be thoroughly cleaned prior to sterilization to remove proteinaceous soil.
   1. Wear gloves, gown, and face protection (face shield) when cleaning instruments in a sink.
   2. Assure that all sharp ends of instruments are pointing in the same direction to avoid sharps injury.
   3. Place all instruments in the open position.
   4. Clean all instruments before leaving at night.
   5. Do NOT leave instruments soaking as rust occurs and could shorten the life of the instrument.
   6. Clean and dry all containers used for soaking.
   7. Clean soiled instruments as follows:
      i) Place instruments in the open position and submerge them in enzymatic detergent until ready to clean (prevents frying of debris).
      ii) Follow manufacturer’s dilution instructions for the enzymatic detergent.
      iii) Place instruments into ultrasonic bath to clean, if bath is available.
      iv) Change detergent water between batches of instruments (sink or ultrasonic unit).
      v) Clean, rinse, and dry instruments prior to packaging and sterilization process.
   8. Assure eye wash station is located in area where chemicals are used. (See Appendices 16 & 17 for more information.)

B. Sterilize or High level Disinfect Next
   1. Instruments that penetrate tissue must be autoclaved (debridement, suture sets, incision & drainage instruments)
   2. Instruments must be cleaned thoroughly prior to sterilization.
   3. Instruments must be sterilized in an autoclave or in a high-level disinfectant solution 0.55% orthophthalaldehyde (OPA). The entire instrument must be immersed or autoclaved. Hot bead sterilizers do NOT provide complete sterilization of the instrument and should not be used.
   5. Always use hand sanitizer prior to handling clean/sterilized supplies to prevent microorganism contamination from your hands.
   6. Using a Sterilizer (autoclave)
      i) Follow Manufacturer’s instructions for use, maintenance, calibration, and cleaning of the sterilizer.
ii) Biologics must be done weekly and documented.
iii) An integrator must be placed in each instrument pack.
iv) An integrator must be placed in a tray of unpackaged instruments.

7. Using High Level Disinfection 0.55% orthophthalaldehyde (OPA)
i) Follow manufacturer’s instructions for high level disinfectant solution.
ii) Always wear gloves, gown and face protection when using OPA.
iii) Use in a well-ventilated room or use a portable ventilation Glutaraldehyde Utilization System (GUS).
iv) Use daily test strip testing and documentation prior to use.
v) Change solution every 14 days (or sooner if determined by test strip)
vi) Clean container used for soaking before refilling with new solution.

vii) Neutralized prior to disposal as per EPA, State and local authorities
viii) Assure proper instrument soaking time for high level disinfectant, rinse thoroughly, dry and store instruments in a clean covered location. OPA requires a 12 minute soak with a thorough rinse.
ix) Cover soaking container when not in use.
x) Keep chemical spill kit readily available in case of an OPA spill.

xi) Refer to the following attachments for more information:
• Attachment 1 High Level Disinfectant Procedure
• Attachment 2 OPA Competency Check List
• Attachment 3 OPA Fact Sheet
• Attachment 4 OPA Material Safety Data Sheet (MSDS)
• Attachment 5 Test Strip Monitoring Log
• Attachment 6 (HLD 6) OPA Neutralization Procedure
• Attachment 7 (HLD 7) Neutralizer MSDS
• Attachment 8 (HLD 8) Ordering Resource List
VIII. SUPPLY SET-UP
A. Prevent contamination of supplies.
B. Perform hand hygiene immediately before accessing supplies.
C. Use single use items and individually packaged items when possible.
   1. Always separate clean and dirty.
   2. Establish a clean area by placing a towel or blue chux on counter or mayo stand.
   3. Place a container away from the clean field to receive used instruments.
D. Place an open trash bag nearby for soiled items.
E. Take out only supplies expected to be used during procedure.
F. Place creams, ointments or solutions needed in labeled medicine cups and put original containers, jars or tubes away from the sterile set up.
G. Check unopened medications and creams monthly and discard per manufacturer’s expiration date.
H. Label opened multidose vials, topicals, and certain solutions with date opened and expiration date of 28 days.
I. Solutions (normal saline & sterile water for irrigation) do not contain preservatives and must be discarded within 24 hours or at end of day.
J. Tear tape or open supplies specific to need prior to start of procedure.
K. Store extra supplies away from set-up and in a clean, covered area.
L. Assure all equipment is cleaned and disinfected between patients.
M. Establish container to receive used instruments away from clean field.
N. Fill instrument soaking container with properly diluted enzymatic detergent to keep used instruments moist prior to cleaning and disinfecting.

IX. PATIENT SAFETY
Protect patient from flying nail clippings and nail dust.
A. Perform hand hygiene.
B. Offer patient face protection (face shield) to prevent eye/face contact with flying nail debris. Patient glasses are not protective.
C. Offer mask in addition to face shield if sanding or burring procedure is performed.
D. Position self and patient for comfort.
E. Position self for optimal viewing of the feet.
F. Place blue pad or towel under feet to establish clean area for feet.
G. Assist patient with the removal of any foot covering (wear gloves).
H. Remove corn pads and other dressings and place in regular trash bag (wear gloves).
X. PROVIDER AND EMPLOYEE SAFETY

Personal protective equipment, used appropriately, will reduce the risk of exposure to pathogens and minimize or prevent transmission to others.

XI. PERSONAL PROTECTIVE EQUIPMENT (PPE)

A. White coats and scrubs are NOT considered PPE.
B. Perform hand hygiene before applying PPE.
C. Glove for all wound care
D. Glove for all contact with non-intact skin, soiled dressings, padding, and for shoe removal.
E. Gowns and face protection; see Table I –next page
F. Masks (with or without eye protection) are recommended with all wound care to prevent:
   1. Inadvertent touching of face/hair/glasses/eyes with hands or gloved hands during procedure
   2. Employee shedding of respiratory/nasal droplets/"squames" into wound site during procedure
G. Remove gloves and PPE after completion of procedure and perform hand hygiene.
H. Gowns, masks, gloves are changed between patients.
I. Reusable face shields, goggles are cleaned between patients.
J. Hair and shoe covers may also be worn for sanding and burring procedures and do not have to be changed between patients.

XII. PROCEDURE SAFETY

Prevent environmental contamination

A. Perform hand hygiene
   1. When entering and exiting room.
   2. Between dirty and clean steps of the procedure.
   3. When moving away from the procedure to access additional supplies.
   4. When moving from a dirty task to a clean task, remove gloves and perform hand hygiene.
B. Prevent placing dirty items with clean items.
C. Wear appropriate PPE for the procedure performed.
D. Use only safer sharp devices (needles/syringes/scalpel blades)
E. Discard activated sharps into a sharps container
F. Assure floor is free of nail clippings when asking patient to walk barefoot.
G. Provide patient with a disposable antiseptic hand wipe—NOT an environmental disinfectant wipe-to clean feet after walking barefoot.
### Table 1: When to Use PPE

<table>
<thead>
<tr>
<th>Procedure</th>
<th>Fluid-resistant gown</th>
<th>Mask with eye, face protection</th>
<th>Mask without eye protection</th>
</tr>
</thead>
<tbody>
<tr>
<td>MRSA (colonized/infect ed) wound care</td>
<td>Required</td>
<td>Recommended if chance of splashing</td>
<td>Recommended if NO chance of splashing</td>
</tr>
<tr>
<td>Wound irrigation</td>
<td>Required</td>
<td>Required</td>
<td></td>
</tr>
<tr>
<td>Sanding/burring procedures</td>
<td>Required</td>
<td>Required</td>
<td></td>
</tr>
<tr>
<td>Incision &amp; Drainage</td>
<td>Required</td>
<td>Required</td>
<td></td>
</tr>
<tr>
<td>Debridement</td>
<td>Recommended</td>
<td>Recommended</td>
<td></td>
</tr>
<tr>
<td>Lengthy wound care procedure, complex, or large wounds</td>
<td>Required</td>
<td>Required if irrigating procedures are performed</td>
<td>Required if irrigating procedures NOT performed</td>
</tr>
</tbody>
</table>

### XIII. ROOM CLEAN-UP BETWEEN PATIENTS

Remove environmental contamination and establish a clean/disinfected environment for the next patient.

A. Wear gloves for cleaning.
B. Discard *all disposable used items* into trash, i.e., emery board, orange stick, burrs/sanders, gauze, and padding.
C. Discard *unused disposable items* exposed to contamination on the set up or those contaminated with nail dust.
D. Soak in enzymatic solution *all reusable instruments*, including burrs, nippers, scissors, etc. (Refer to instrument reprocessing on page 3).
E. Clean and disinfect all surfaces and equipment touched by patient or employee.
   1. Use disinfectant wipe to wipe all surfaces thoroughly and let air dry
   2. Clean thoroughly any surface that is visibly soiled; then re-clean with another wipe to disinfect.
   3. Change disinfectant wipe or cloth frequently.
   4. Clean all contaminated surfaces; they may include:
      - Exam table or chair
      - Counters
      - Light
• Patient face shield or goggles if reusable
• Low risk equipment: Monofilaments, percussion hammer, tuning fork

5. Clean Vinyl Floors
• Use dry or wet mop (like a Swiffer) to clean up debris, if vinyl floor is visibly dirty,
• Change disposable mop pad between clean-ups and discard used pad into trash.
• After clean-up, remove gloves and sanitize hands
• Sanitize hands when exiting room

6. Clean Carpeted floors
• May use a manual carpet sweeper to pick up nail clippings.
• Do NOT use an electric vacuum or dust buster until after last procedure of day.
• After clean-up, remove gloves and sanitize hands
• Sanitize hands when exiting room.

7. Clean room used for sanding/burring procedure
   Use these additional safety precautions:
   • Wear gloves, gown, mask while cleaning room
   • Clean counter and wall covers ONLY at end of day cleaning
   • Wipe with disinfectant everything touched by the patient, provider and/or staff.
   • Wipe with disinfectant the sanding/burr unit and cord and Hepa Air Cleaner
   • Remove gloves, gown, mask and perform hand hygiene when done

XIV. END OF DAY ROOM CLEAN-UP
Remove environmental contamination and establish a clean/disinfected environment.
A. Cleaning all rooms:
   1. Wear gloves and wipe all horizontal surfaces with disinfectant.
   2. Disinfect keyboard, mouse and phone.
   3. Remove used instruments to reprocessing area. (Refer to instrument processing, page 3).
   4. Always end with hand hygiene. Room is ready to restock.

B. Cleaning rooms where sanding/burring procedures performed:
   1. Wear gloves, gown, mask.
   2. Remove carefully and discard all coverings from wall and counters, preventing aerosolization of nail dust, and place in regular trash. Rolling or folding coverings helps to contain dust. Do NOT shake coverings.
   3. Clean and disinfect all non-disposable equipment:
      - Sanding/burring unit and cord.
      - Turn off portable Hepa Air Cleaner then disinfect unit and cord.
      - Refer to XIV Sanding/Burring and Vacuum Cleaning (page 9).

XV. SANDING/BURRING DRILL AND VACUUM CLEANING
A. Wear gown, gloves, face protection.
B. Remove sanding and burr heads between patients. Discard disposable burrs, and reprocess non-disposable burrs.
C. Wipe entire sanding/burring unit and cord with disinfectant.
D. Open sanding/burring vacuum canister, carefully check vacuum bag.
E. Change bag when 2/3 full. Do not shake vacuum bag.
F. Discard bag in regular trash.
G. Wipe outside of canister and inside lid with disinfectant wipe, replace vacuum bag.
H. Store vacuum and drill in a clean area.
I. Remove gown, gloves, face protection and perform hand hygiene.

XVI. GUIDELINE ATTACHMENTS

Attachment 1  High Level Disinfectant Procedures
Attachment 2  OPA Competency Check
Attachment 3  OPA Fact Sheet
Attachment 4  OPA Material Safety Data Sheet (MSDS)
Attachment 5  Test Strip Monitoring Log
Attachment 6  OPA Neutralization Procedure
Attachment 7  Neutralizer MSDS
Attachment 8  Supply Ordering Resource List
Attachment 9  Supply and Equipment List
<table>
<thead>
<tr>
<th>Attachment</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td>Assessment of Infection Control Foot Care Practices (Check List)</td>
</tr>
<tr>
<td>11</td>
<td>Personal Protective Equipment (PPE)</td>
</tr>
<tr>
<td>12</td>
<td>Supply Care and Set-Up</td>
</tr>
<tr>
<td>13</td>
<td>Environmental Barriers for Sanding/Burring Procedures</td>
</tr>
<tr>
<td>14</td>
<td>Sanding/Burring Unit and Vacuum</td>
</tr>
<tr>
<td>15</td>
<td>HEPA Air Cleaner</td>
</tr>
<tr>
<td>16</td>
<td>How to Perform Eyewash/Drenching Hose Activation and Cleaning</td>
</tr>
<tr>
<td>17</td>
<td>Record Keeping for Eye Wash/Drench Hose Activation/Cleaning</td>
</tr>
</tbody>
</table>
XVII. REFERENCES

A. Association for Professionals in Infection Control and Epidemiology Textbook 2005, www.apic.org


XVIII. ADDITIONAL WEBSITE RESOURCES

A. OSHA Bloodborne Pathogen Standard
   d=10051

B. Model Plans for the OSHA Bloodborne Pathogens and Hazards
   Communication Standards
   www.osha.gov/Publications/osha3186.pdf

C. Bloodborne Pathogens
   www.lni.wa.gov/wisha/Rules/bbpathogens/default.htm

D. Chemical Hazard Communications
   www.lni.wa.gov/Safety/Basics/Programs/HazComm/default.asp

E. Enforcement Procedures for Occupational Exposure to Bloodborne
   Pathogens
   d=2570

F. Core Rules Emergency Washing (eye washing)
   www.lni.wa.gov/wisha/rules/corerules/HTML/296-800-150.htm#WAC296-800-
   150300-15030

G. Washington State Department of Health
   www.doh.wa.gov

H. Tacoma-Pierce County Health Department; Living with MRSA
   Booklet, MRSA Toolkit for Medical Offices and Outpatient Clinics
   www.tpchd.org/mrsa
Attachment 1
High Level Disinfection Procedure:
Equipment and Ortho-phthalaldehyde 0.55% (OPA) Solution
Handling and Usage

Purpose: All high-level disinfectants are utilized in a safe and effective manner to promote employee safety and provide safe instruments for patient care.

Note: Contact with OPA Solution may stain skin or clothing. If the solution contacts skin, wash with soap and water for a few minutes. The stain should disappear within 1 – 2 days. Solution may also stain equipment, and environmental surfaces such as walls, floors and countertops. Whitening toothpaste may be used to remove environmental staining.

Equipment

<table>
<thead>
<tr>
<th>OPA solution</th>
<th>Fluid resistant gown</th>
</tr>
</thead>
<tbody>
<tr>
<td>OPA test strips</td>
<td>Mask with eye shield</td>
</tr>
<tr>
<td>Test Strip Log</td>
<td>Timer</td>
</tr>
<tr>
<td>Whitening toothpaste</td>
<td>Soaking tray</td>
</tr>
<tr>
<td>Enzymatic detergent</td>
<td></td>
</tr>
</tbody>
</table>

PROCEDURE STEPS | KEY POINTS
--- | ---
Each staff member who uses OPA will complete the OPA Solution Competency Skill Checklist and training prior to OPA usage | See attached OPA Competency Skills Checklist
1. Put on personal protective equipment (PPE) - fluid resistant gown, face protection, gloves | PPE must be worn when working with this chemical, including when cleaning, disinfecting instruments.
2. Clean all instruments thoroughly | Clean instruments thoroughly with enzymatic detergent or foam before disinfection
   *OPA stains instruments that are not adequately cleaned*
3. Rinse instruments well | Residual detergent must be removed prior to disinfection
4. Remove excess moisture from instruments by drying gently | Wiping reduces the dilution of OPA solution left by residual rinse water
5. Pour OPA Solution into a clean solution tray
   *If not using entire gallon, date the original container with date opened and date expires* | Read manufacturer’s instructions.
   *Opened gallons of OPA solution may be stored for up to 75 days*
6. Record the date the solution was poured from the original container and the expire date for the newly mixed solution
   *Newly mixed solution can NOT be used after 14 days* | Document on OPA Test Strip Log
   See Log for procedure
   Perform test strip
7. Immerse cleaned, dry instrument completely in the OPA solution | Make sure instrument completely submerged and in the open position.

4/2008
### High Level Disinfection Procedure:

**Equipment and Ortho-phthalaldehyde 0.55% (OPA) Solution Handling and Usage**

<table>
<thead>
<tr>
<th>PROCEDURE STEPS (cont.)</th>
<th>KEY POINTS (cont.)</th>
</tr>
</thead>
</table>
| 8. Cover solution tray securely and soak instruments for 12 minutes at 20 degrees C (room temperature). | High-level disinfection is accomplished in 12 minutes.  
*Set timer for 12 minutes* |
| 9. After appropriate soak time, put on clean gloves (also clean fluid-resistant gown and face shield) to remove disinfected instrument from solution. | Prevents recontamination of disinfected instrument. |
| 10. Rinse instrument thoroughly using copious amounts of tap water. | Three (3) minute tap or filtered water rinse recommended. |
| 11. Rinse with ethyl or isoprophyl alcohol to remove water borne organisms. Dry item thoroughly and store in a clean manner, preferably covered, to minimize recontamination | Refer to manufacturer's instructions.  
*Perform hand hygiene, put on clean gloves before handling unwrapped disinfected equipment that touches mucous membranes or non-intact skin.* |
| 12. Test OPA Solution daily prior to use with OPA Solution Test Strips. Document on Test Strip log. | Verify that the Minimum Effective Concentration (MEC) of OPA (ortho-phthalaldehyde) is present. |

**DISCARDING OPA-refer to Neutralizing Procedure (Attachment 6)**

| 13. Neutralize OPA with glycine | *Follow manufacturer's instructions* |
| 14. Discard OPA Solution down sewer after 14 days, even if the Test Strips indicate a concentration above the MEC. | Discard solution sooner if test strips indicate solution is below MEC.  
*Flush down sewer with copious amounts of water after neutralizing.* |
| 15. Soaking containers must be cleaned thoroughly when solution is changed. | After cleaning, wipe down with 1:10 solution of bleach and water. Let air dry. |

**ADDITIONAL INFORMATION**

| 16. Whitening toothpaste may be used to clean stains caused by OPA. | Apply small amount of toothpaste to stain, rub gently till stain disappears, rinse thoroughly. |
| 17. Secure soaking container lid when in use to prevent chemical vaporization and to prevent solution contamination. | |

**References:** OPA Solution Manufacturer's Instruction
### OPA Competency Skill Checklist

<table>
<thead>
<tr>
<th>ACTION</th>
<th>Comments/Evaluation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1. Demonstrates knowledge of guidelines for high-level disinfection</strong></td>
<td></td>
</tr>
<tr>
<td>- Utilizes Spaulding classification system for selection of medical devices for high-level disinfection; critical, semi-critical, and non-critical devices.</td>
<td>Reviewer Signature/Initials</td>
</tr>
<tr>
<td><strong>2. Identifies advantages of CIDEX® OPA use</strong></td>
<td></td>
</tr>
<tr>
<td>- Ortho-phthalaldehyde 0.55% - non-glutaraldehyde</td>
<td></td>
</tr>
<tr>
<td>- Near neutral pH of 7.4</td>
<td></td>
</tr>
<tr>
<td>- Light blue solution, low scent</td>
<td></td>
</tr>
<tr>
<td>- Rapid high-level disinfection – 12 minutes</td>
<td></td>
</tr>
<tr>
<td>- No surfactant</td>
<td></td>
</tr>
<tr>
<td>- Easy to use, requires no activation or mixing</td>
<td></td>
</tr>
<tr>
<td>- Excellent material compatibility</td>
<td></td>
</tr>
<tr>
<td>- Non-corrosive to metals, including carbon steel, aluminum, copper, and brass</td>
<td></td>
</tr>
<tr>
<td>- Non-toxic and non-sensitizing composition</td>
<td></td>
</tr>
<tr>
<td><strong>3. Demonstrates effective use of OPA</strong></td>
<td></td>
</tr>
<tr>
<td>- Understands importance of pre-cleaning devices</td>
<td></td>
</tr>
<tr>
<td>- Understands compatibility with enzymatic detergents which are near neutral (6-8) in pH</td>
<td></td>
</tr>
<tr>
<td>- Utilizes appropriate personal protective equipment</td>
<td></td>
</tr>
<tr>
<td>- Rinses and rough dries all surfaces and lumens before immersion</td>
<td></td>
</tr>
<tr>
<td>- Immerses devices completely, filling all lumens and eliminating air pockets</td>
<td></td>
</tr>
<tr>
<td>- Rinses devices following immersion according to manufacturer’s guidelines</td>
<td></td>
</tr>
<tr>
<td><strong>4. Identifies the following guidelines for use/reuse</strong></td>
<td></td>
</tr>
<tr>
<td>- Reusable for up to 14 days, providing MEC is verified</td>
<td></td>
</tr>
<tr>
<td>- Once opened, unused portion may be stored in original container for no longer than 75 days</td>
<td></td>
</tr>
<tr>
<td>- 2 year shelf-life for unopened containers</td>
<td></td>
</tr>
<tr>
<td>- Storage should be in the original sealed container at room temperature in a well-ventilated low traffic area</td>
<td></td>
</tr>
<tr>
<td><strong>5. Understands the importance of record keeping and monitoring</strong></td>
<td></td>
</tr>
<tr>
<td>- Records the date the container was opened</td>
<td></td>
</tr>
<tr>
<td>- Tests solution with OPA Solution Test Strip daily and records results for MEC. Dates Test Strip bottle with opened and expired dates.</td>
<td></td>
</tr>
<tr>
<td><strong>6. Understands limitations for use</strong></td>
<td></td>
</tr>
<tr>
<td>- Identifies solution cannot be used for sterilization</td>
<td></td>
</tr>
<tr>
<td>- Understands staining can occur on skin, clothing, instruments, equipment, and environmental surfaces on contact</td>
<td></td>
</tr>
<tr>
<td>- Knows that vapors may cause irritation to eyes, nose and throat</td>
<td></td>
</tr>
</tbody>
</table>
This Page Intentionally Left Blank
Solution Facts

- Safe to use on most any item that can be soaked in glutaraldehyde. If in doubt contact instrument manufacturer.
- High-level disinfection occurs in 12 minutes at room temperature.
- Safe to use in basin with lid
- No activation or mixing required.
- Soaking container with HLD must be covered to prevent chemical appearance change (film forms on OPA solution) or air contamination of solution. If solution appearance changes, stir solution, use test strip to check MEC level, and cover.
- 14 day reuse life
- Unopened containers – 2 year shelf life
- Open containers – 75 day shelf life
- Glutaraldehyde-free
- Accurate, easy to use (must use OPA Test Strips)
- Disposal - down sewer with copious amount water.
- Neutral pH - range of 7.2 to 7.8
- NOT a carcinogenic

Initial Switch Out to OPA

- Thoroughly wash and rinse trays with enzymatic cleaner. If unable to be autoclaved, wipe down with a 1:10 bleach water solution, let air dry, before using Cidex OPA.
- For automated scope washers, run system through one complete cycle with plain water before using Cidex OPA.

Cleaning Instruments Prior to Immersing in OPA

- Must be cleaned with an enzymatic cleaner, then rinsed thoroughly with water.
- If inadequate cleaning has occurred and protein residue remains on surface, staining from the OPA will occur. The gray color of the stained protein means inadequate cleaning has occurred.

Rinsing Instructions

- Following immersion in OPA solution, thoroughly rinse the device three times.
- Immerse or flush the device completely in a large volume of water of water.
- Repeat this procedure at least twice more.
- If OPA is not thoroughly removed through rinsing, the instrument residue can stain the mucosa and skin during next patient procedure.
- After rinsing with water, wipe outer part of scope with alcohol, rinse all lumens, then flush lumens with air to dry.

Staining

- OPA solution stains organic matter when device is improperly cleaned.
- OPA solution can also stain skin, clothing, and environmental surfaces.
- Avoid staining and chemical exposure by:
  - Wearing gown, gloves, face protection (face shield) during cleaning disinfection procedures.
  - Wearing only latex or nitrile gloves-change latex gloves every 10-15 minutes. Do not wear vinyl.
  - Covering surfaces with potential exposure with waterproof barrier (incontinent pad).
  - Rinsing the exposed surface with water immediately.
  - Rubbing (gently) the exposed surface with enzymatic cleaner or toothpaste.

Test Strip Use

- Immerse strip in solution for 1 full second
- Read test strip 90 seconds after immersion
- Test strips expire 90 days after opening container

Spills

- For spill neutralization, sprinkle approximately 25 grams of glycine (free base) powder per gallon of estimated OPA solution spill. With a mop or other tool, thoroughly blend the glycine into the spill. Allow 5 minutes for deactivation of OPA. Discard down sewer with copious water to prevent clogging. Rinse area and tools used with soap and water solution and follow with a water rinse. Wear PPE.
This Page Intentionally Left Blank
Thank you for using 3E’s MSDS Paperless Compliance™ service. This service may eliminate the requirement to maintain MSDS on site. Below is a list of the MSDS you requested. Please verify that the MSDS sheet(s) enclosed/attached match what you have ordered.

3E COMPANY does not develop, prepare, or review the contents of any MSDS; the MSDS is prepared by the manufacturer. The statements, technical information and recommendations contained herein are transmitted without warranty or guarantee of any kind, expressed or implied, by 3E COMPANY. Furthermore, 3E COMPANY assumes no responsibility for any loss, damage, or expense, direct or consequential, arising out of their use.

If you have any questions regarding the MSDS, or you would like further information on paperless compliance program, please call 3E Company at (800)-360-3220 or visit us at www.3ecompany.com

<table>
<thead>
<tr>
<th>PID</th>
<th>Manufacturer ORDERED/Actual</th>
<th>Product Name ORDERED/Actual</th>
<th>UPC</th>
<th>Item</th>
</tr>
</thead>
<tbody>
<tr>
<td>1162411</td>
<td>ADVANCED STERILIZATION/Advanced Sterilization Products</td>
<td>CIDEX OPA/Cidex OPA Solution</td>
<td>65314</td>
<td></td>
</tr>
</tbody>
</table>

END OF ORDER DETAIL - Request# 65314
Material Safety Data Sheet

MSDS-09588-0-001
Rev.: E
Product: CIDEX® OPA Solution
Issue Date: 6-28-05

1. IDENTIFICATION OF THE SUBSTANCE/PREPARATION AND THE COMPANY/UNDERTAKING

Supplier:
Advanced Sterilization Products
33 Technology Drive
Irvine, CA 92618

Customer service telephone: 1-800-755-5900
Emergency telephone number: 1-877-208-6653 24 hrs
Product name: CIDEX OPA Solution
Synonyms: None

2. COMPOSITION/INFORMATION ON INGREDIENTS

The ingredients at their given percentages in this product are not considered hazardous to your health.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>ortho-Phthalaldehyde (1,2 - benzenedicarboxaldehyde)</td>
<td>643-79-8</td>
<td>&lt;1</td>
<td>Not Determined</td>
<td>Not Determined</td>
<td>Not Determined</td>
<td>Not Determined</td>
</tr>
</tbody>
</table>

3. HAZARDS IDENTIFICATION

Emergency overview:
May cause eye, skin and respiratory irritation.
May elicit an allergic reaction.
CIDEX OPA Solution has been reported to cause anaphylactic-like reactions in bladder cancer patients undergoing repeated cystoscopy.
CIDEX OPA Solution should not be used to reprocess instruments for patients that have shown previous sensitivity to this solution or any of its ingredients.

Properties affecting health:
May cause sensitization by repeated skin contact.

Principle routes of exposure:
Oral: Not anticipated to be a significant route of occupational exposure.
Eye contact: May cause eye irritation and redness.
Skin contact: May cause skin irritation. Repeated exposure may cause skin dryness or cracking.
Exposure to skin may cause temporary staining.
Ingestion: Ingestion may cause gastrointestinal irritation, nausea, vomiting and diarrhea.
Exposure can irritate and discolor the tissues of the mouth, esophagus and other tissues of the digestive tract.

Company: ADVANCED STERILIZATION PRODUCTS
Product name: CIDEX® OPA Solution

Product code: ASPOPA
CO-12305-2
Inhalation: May cause irritation, including but not limited to discharge, coughing, wheezing tightness of chest and throat, difficulty breathing and stinging sensation in nose and throat, tingling of mouth and lips, headache, lose of smell and dry mouth. Symptoms are temporary and reversible.

Hazard information:
Target organ effects: None
Reproductive effects: Not a reproductive effector.
Mutagenic effects: Not mutagenic in the Ames assay.
Sensitization: May cause sensitization.

Carcinogenicity rating:

<table>
<thead>
<tr>
<th>Components</th>
<th>CAS Number</th>
<th>J &amp; J:</th>
<th>NTP:</th>
<th>IARC:</th>
<th>California Proposition 65 List:</th>
</tr>
</thead>
<tbody>
<tr>
<td>ortho-Phthalaldehyde</td>
<td>643-79-8</td>
<td>Not Determined</td>
<td>Not Determined</td>
<td>Not Determined</td>
<td>Not Determined</td>
</tr>
<tr>
<td>(1,2 - benzenedicarboxaldehyde)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Signs and symptoms: None.

Medical conditions aggravated by exposure: Inhalation of vapor may cause asthma-like symptoms (chest discomfort and tightness, difficulty with breathing) as well as aggravate pre-existing asthma.

4. FIRST AID MEASURES

Eye contact: In the case of contact with eyes, rinse immediately with plenty of water for 15 minutes and seek medical attention.

Ingestion: Do not induce vomiting. Rinse mouth followed by drinking a large quantity of water.

Inhalation: Move to fresh air immediately. If experiencing difficulty breathing, seek medical attention.

Skin contact: Wash contaminated areas thoroughly with soap and water. Remove contaminated clothing and wash before re-use. Seek medical attention if irritation develops or persists.

Protection of first-aiders: None.

Notes to physician: Probable damage to the mucosa from oral exposure may contraindicate the use of gastric lavage.
5. FIRE-FIGHTING MEASURES

- Flash point (°F): Not applicable
- Flash point (°C): Not applicable
- Autoignition temperature: Not applicable
- Flammable limits in air - lower (%): Not applicable
- NFPA rating:
- HMIS/ NFPA rating and classification:


diagram

- Suitable extinguishing media: Use any extinguishing agent which is suitable for the surrounding fire
- Extinguishing media which must not be used for safety reasons: None
- Specific methods: None
- Special protective equipment for firefighters: Wear self-contained breathing apparatus for fire fighting if necessary.
- Hazardous combustion products: None
- Explosivity: None
- Explosion limits:
  - lower: None
  - upper: None

6. ACCIDENTAL RELEASE MEASURES

- Personal precautions: Wear eye and skin protection while handling material for clean-up. Avoid breathing vapors and/or mists.
- Environmental precautions: Do not wash down sewers or waterways.
- Methods for cleaning up: If required, neutralize by sprinkling approximately 25 grams of glycine (CAS# 56-40-6) powder per gallon of CIDEX OPA Solution spill. Thoroughly blend the glycine into the spill using mop or other tools. Allow 5 minutes contact for neutralization. Pick up and transfer to properly labeled containers. Allow neutralization to continue for 1 hour and then dispose of in accordance with all applicable federal, state, and local regulations. Clean contaminated surface thoroughly.
7. HANDLING AND STORAGE

Handling:

Technical measures/precautions: Use in well ventilated area and use with appropriate exhaust ventilation, for example a minimum of 10 air exchanges per hour or as defined by state and local regulations.

Safe handling advice: Wear appropriate personal protection. Avoid contact with skin, eyes and clothing. Remove contaminated clothing and launder before reuse.

Storage:

Technical measures/storage conditions: This product should be stored between 59°F (15°C) and 86°F (30°C)

Keep containers tightly closed.

Incompatible products: Avoid contact with strong acids and bases. Keep from contact with oxidizing materials.

8. EXPOSURE CONTROLS / PERSONAL PROTECTION

Engineering controls: Ensure adequate ventilation.

Eye protection: Eye protection recommended.

Hand protection: Chemical resistant gloves recommended.

Skin and body protection Wear suitable protective clothing.

Respiratory protection: None required.

Other/general protection: None required.

9. PHYSICAL AND CHEMICAL PROPERTIES

Appearance: Clear liquid

Physical state: Liquid

Color: Light blue

pH: 7.2-7.8

Odor: Slight Odor

Boiling temperature (°F): 212

Boiling temperature (°C): 100

Freezing point/range (°C): 0

Freezing point/range (°F): 32

Specific gravity: 1.0003g/cc

Evaporation rate: similar to water

Water solubility: soluble

10. STABILITY AND REACTIVITY

Chemical stability: Stable under recommended storage conditions.

Hazardous polymerization: Hazardous polymerization does not occur.

Hazardous decomposition products: Unknown on product.
11. TOXICOLOGICAL INFORMATION

Acute toxicity
LD50/oral/rat (mg/kg) =     >5000 mg/kg
LD50  Dermal Rabbit (mg/kg):  >2000 mg/kg

Local effects
Oral:  Non-toxic
Eye irritation:  May cause eye irritation.
Skin irritation:  May cause skin irritation.
Inhalation:  Unknown on product.

Chronic toxicity
Oral:  Unknown on product.
Inhalation:  Unknown on product.
Dermal:  Unknown on product.

Subchronic toxicity
Oral:  Oral administration of o-phthalaldehyde to rats for 90 days resulted in a NOEL of 5mg/kg/day.
Dermal:  Unknown on product.

Specific effects
Corrosive effects:  Not corrosive.
Sensitization:  May elicit an allergic reaction.
Target organ effects:  None
Mutagenic effects:  Not mutagenic in Ames test.

Reproductive effects:  Unknown on product.
Developmental effects:  Oral administration of o-phthalaldehyde to pregnant rats indicated that at maternally non-toxic doses (less than 10 mg/kg/day) there was no developmental effect.

Carcinogenic effects:  Unknown on product.

12. ECOLOGICAL INFORMATION

Ecotoxicity:
Ecotoxicity effects:  Unknown on this product.
Aquatic toxicity effects:  This product is harmful to aquatic organisms.

Mobility:
Unknown on product.

Persistence / degradability:
Unknown on product.

Bioaccumulation:
Unknown on product.

Degradation:
Unknown on product.

13. DISPOSAL CONSIDERATIONS
Waste from residues / unused products: Waste disposal must be in accordance with appropriate US, Federal, State and International regulations. This product, if unaltered by use, may be disposed of by treatment at a permitted facility or as advised by your local hazardous waste regulatory authority. This product is not a hazardous waste as defined by EPA definitions.

Contaminated packaging: Do not re-use empty containers

Methods for cleaning up: If required, neutralize by sprinkling approximately 25 grams of glycine (CAS # 56-40-6) powder per gallon of CIDEX OPA Solution spill. Thoroughly blend the glycine into the spill using mop or other tools. Allow 5 minutes contact for neutralization. Pick up and transfer to properly labeled containers. Allow neutralization to continue for 1 hour and then dispose of in accordance with all applicable federal, state, and local regulations. Clean contaminated surface thoroughly.

14. TRANSPORT INFORMATION

DOT:
- DOT UN-No: Not applicable
- DOT shipping name: Not regulated
- Hazard class: Not applicable
- Subsidary risk (hazard class): Not applicable
- Packing group: Not applicable
- DOT reportable quantity (lbs): Not applicable

IMO/IMDG:
- Hazard class: Not applicable
- IMDG page: Not applicable
- IMDG-labels: Not applicable
- Packing group: Not applicable
- MFAG table No.: Not applicable
- Proper shipping name: Not regulated
- UN/ld No.: Not applicable

ADR/RID:
- Hazard class/packing group: Not applicable
- Item: Not applicable
- ADR/RID-labels: Not applicable
- UN/ld No.: Not applicable
- Proper shipping name: Not regulated
- TREM-card: Not applicable

IATA/ICAO:
- Hazard class: Not applicable
- Packing group: Not applicable
- Proper shipping name: Not regulated
- ID/UN No.: Not applicable
- IATA - label: Not applicable
- ERG #: Not applicable

TDG (Canada):
- Status: Not applicable
- Packing group: Not applicable

Company: ADVANCED STERILIZATION PRODUCTS
Product name: CIDEX® OPA Solution

Product code: ASPOPA
CO-12305-2
15. REGULATORY INFORMATION

SARA (311, 312) hazard class:
- Immediate health: None
- Delayed health: None
- Fire: None
- Sudden Release of Pressure Hazard: None
- Reactivity: None

TSCA inventory list: Listed under TSCA: Yes

WHMIS:
- WHMIS trade secret: None
- WHMIS hazard class: None

Canada DSL inventory list: Listed on DSL: Yes

Notes:
1. SARA = Superfund Amendments and the Reauthorization Act.
2. CERCLA = Comprehensive Environmental Response, Compensations and Liability Act.
3. FIFRA = Federal Insecticide, Fungicide and Rodenticide Act
4. TSCA = Toxic Substance Control Act
5. WHMIS = Canadian Workplace Hazardous Materials Information System
6. This product has been classified in accordance with the hazard criteria of the Controlled Products Regulations (CPR) and the MSDS contains all of the information required by the CPR.

16. OTHER INFORMATION

This data sheet contains changes from the previous version in section(s):
None

Additional advice: None

Literary Reference: None

MSDS format: North American Format - U.S. and Canada
This Material Safety Data Sheet was prepared in accordance with OSHA 29 CFR 1910.1200.

Disclaimer:
The information and recommendations contained herein are based upon tests believed to be reliable. However, Johnson and Johnson does not guarantee their accuracy or completeness NOR SHALL ANY OF THIS INFORMATION CONSTITUTE A WARRANTY, WHETHER EXPRESSED OR IMPLIED, AS TO THE SAFETY OF THE GOODS, THE MERCHANTABILITY OF THE GOODS, OR THE FITNESS OF THE GOODS FOR A PARTICULAR PURPOSE. Adjustment to conform to actual conditions of usage maybe required. Johnson and Johnson assumes no responsibility for results obtained or for incidental or consequential damages, including lost profits arising from the use of these data. No warranty against infringement of any patent, copyright or trademark is made or implied.

End of Safety Data Sheet
**Attachment 5**
**OPA Test Strip Monitoring Log**

Retain log for five (5) years.

4/2008

<table>
<thead>
<tr>
<th>Testing &amp; Recording</th>
<th>OPA Test Strips</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Test OPA solution daily (before 1st case).</td>
<td>• OPA Test Strip 60/bottle or 15/bottle</td>
</tr>
<tr>
<td>• Immerse OPA test strip in solution for 1 second.</td>
<td>• Date with expiration after opening bottle</td>
</tr>
<tr>
<td>• Read test strip 90 seconds after dipping in OPA solution.</td>
<td>• Keep lid sealed between uses.</td>
</tr>
<tr>
<td>• Do not use OPA solution if test strip indicates below minimum effective concentration level.</td>
<td>• Discard test strip open bottle after 90 days</td>
</tr>
<tr>
<td>• Do not use OPA solution beyond its stated reuse life of 14 days. Neutralize prior to disposal.</td>
<td></td>
</tr>
<tr>
<td>• Write “closed” next to the days the solution is not used or dept closed.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date Solution Changed</th>
<th># of Gallons Neutralized at Disposal</th>
<th>Date Solution Expires</th>
<th>Date Test Strips Expire (90 days after opening)</th>
<th>Day of Month</th>
<th>Test Start Time</th>
<th>Test Results (+) Pass</th>
<th>Test Results (-) Fail</th>
<th>Tested By (Initials)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>17</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>18</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>19</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>21</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>22</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>25</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>26</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>27</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>28</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>29</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>30</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>31</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Retain log for five (5) years.*
This Page Intentionally Left Blank
# OPA Neutralization and Disposal Procedure

**Regulatory Responsibility:** EPA and Local Health Departments

<table>
<thead>
<tr>
<th>OPA DISPOSAL PROCEDURE</th>
<th>EQUIPMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. At time of OPA disposal, neutralize OPA with glycine powder or solution at a ratio of 1 KemSure container per 1 gallon of OPA. Use whole container of KemSure for less than one gallon of OPA.</td>
<td>1. Gloves, water-resistant gowns or aprons, eye/face shield required for protection</td>
</tr>
<tr>
<td>2. Distribute KemSure powder or solution throughout OPA solution.</td>
<td>2. KemSure containers are usually stored with the OPA solution</td>
</tr>
<tr>
<td>3. After adding KemSure to OPA, wait 5 minutes or until color changes for neutralization, then discard down sewer followed by <strong>copious</strong> amounts of water.</td>
<td></td>
</tr>
<tr>
<td>4. Make sure sink or container is thoroughly cleaned and rinsed well to remove KemSure and OPA residue after disposal.</td>
<td></td>
</tr>
</tbody>
</table>
This Page Intentionally Left Blank
Thank you for using 3E’s MSDS Paperless Compliance™ service. This service may eliminate the requirement to maintain MSDS on site. Below is a list of the MSDS you requested. Please verify that the MSDS sheet(s) enclosed/attached match what you have ordered.

3E COMPANY does not develop, prepare, or review the contents of any MSDS; the MSDS is prepared by the manufacturer. The statements, technical information and recommendations contained herein are transmitted without warranty or guarantee of any kind, expressed or implied, by 3E COMPANY. Furthermore, 3E COMPANY assumes no responsibility for any loss, damage, or expense, direct or consequential, arising out of their use.

If you have any questions regarding the MSDS, or you would like further information on paperless compliance program, please call 3E Company at (800)-360-3220 or visit us at www.3ecompany.com

<table>
<thead>
<tr>
<th>PID</th>
<th>Manufacturer</th>
<th>Product Name</th>
<th>UPC</th>
<th>Item</th>
</tr>
</thead>
<tbody>
<tr>
<td>1045024</td>
<td>KEM/Kem Medical Products</td>
<td>KEMSURE OPA</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>NETURALIZER/KemSure Neutralizer</td>
<td></td>
<td>For OPA Disinfectant Solution</td>
</tr>
</tbody>
</table>

END OF ORDER DETAIL - Request# 69716
KemSure™ Neutralizer for OPA (ortho-phthalaldehyde) Disinfectant Solution

MATERIAL SAFETY DATA SHEET

CHEMTREC Assistance: (800) 424-9300

Kem Medical Products 1239 Newport Center Dr. East, Ste 108, Deerfield Beach, FL 33442

Date: 09/01/00

SECTION I - PRODUCT IDENTIFICATION

PRODUCT NAME: KemSure™ Neutralizer for OPA disinfectant solution
SYNONYM: N/A
FORMULA: Glycine, proprietary buffers
CAS: None Assigned

SECTION II - HEALTH SAFETY ALERT

Caution: Can cause irritation to skin and eyes. Harmful if swallowed. Avoid prolonged or repeated inhalation of vapors. Do not use this product until MSDS has been read and understood.

SECTION III - HEALTH HAZARD INFORMATION

EYES: Direct contact with solution can produce moderate irritation
SKIN: Prolonged contact produces mild irritation
INHALATION: Prolonged or repeated inhalation produces nose or throat irritation.
INGESTION: Harmful if swallowed

SECTION IV - EMERGENCY AND FIRST AID PROCEDURES

EYE AND/OR SKIN CONTACT: In case of eye contact, immediately flush eyes with copious amounts of water for at least 15 minutes. Avoid adequate flushing of the eyes by separating the eyelids with fingers. In case of skin contact, immediately wash affected skin area and remove any contaminated clothing.
INHALATION: If irritating symptoms appear after prolonged exposure, remove to fresh air.
INGESTION: If swallowed, wash mouth with water provided person is conscious. Call a physician immediately.

SECTION V - FIRE AND EXPLOSION HAZARD INFORMATION

FLASH POINT & METHOD: N/A
FLAMMABLE LIMITS: N/A
EXTINGUISHABLE MEDIA: Water spray, dry chemical powder.
FIRE AND EXPLOSION HAZARDS: Evokes toxic fumes under fire conditions.

SECTION VI - SPILL, LEAK, AND DISPOSAL INFORMATION

SPILL OR LEAK PROCEDURES: Wear gloves. Small spills should be flushed with water. Very large spills, use personal respiratory protection and eye protection. Absorb material in clay and place in suitable container.
WASTE DISPOSAL: Shut off sources of ignition. Clean spill area with large amounts of water.

SECTION VII - REACTIVITY DATA

INCOMPATIBILITY: Strong oxidizers, monomethonium phosphate, sodium potassium alloy
TOXIC FUMES: Contact with strong acids may liberate nitrogen oxides and ammonia. Hazardous combustion or decomposition product: carbon dioxide. Carbon monoxide
CONDITIONS CONTRIBUTING TO HAZARDOUS POLYMORPHIZATION: None

SECTION VIII - PHYSICAL DATA

AUTO IGNITION TEMPERATURE: N/A
HEALTH 0
FLAMMABILITY 0
REACTIVITY 0
HAZARD SYMBOLS None
APPEARANCE/ODOOR: Colorless and odorless
SPECIFIC GRAVITY: 1.06
pH: 8.4

SECTION IX - SHIPPING INFORMATION

DOT PROPER SHIPPING NAME: N/A
DOT HAZARD CLASS: N/A
UN/NA NUMBER: N/A

SECTION X - COMMENTS

THE ABOVE INFORMATION IS BELIEVED TO BE CORRECT BUT DOES NOT PURPORT TO BE ALL INCLUSIVE AND SHALL BE USED ONLY AS A GUIDE. KEM MEDICAL PRODUCTS SHALL NOT BE HELD LIABLE FOR ANY DAMAGE RESULTING FROM HANDLING OR FROM CONTACT WITH THE ABOVE PRODUCT. UNLIMITED COPIES OF THIS DOCUMENT CAN BE MADE, BUT ARE FOR INTERNAL USE ONLY.
Attachment 8
High Level Disinfectant (HLD)
Supply Ordering Resource List

These are examples of companies that provide products in the various categories. There are many other companies that can be accessed through medical supply catalogs and the internet.

<table>
<thead>
<tr>
<th>Type of Product</th>
<th>Product &amp; Supplier Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>OPA</td>
<td>CIDEX [<a href="http://www.sterrad.com/Products">www.sterrad.com/Products</a> &amp; Services/CIDEX/CIDEX_OPA/](<a href="http://www.sterrad.com/Products">http://www.sterrad.com/Products</a> &amp; Services/CIDEX/CIDEX_OPA/)</td>
</tr>
<tr>
<td>OPA NEUTRALIZER</td>
<td>KEMSURE <a href="http://www.kemmed.com/neutralizing.htm">www.kemmed.com/neutralizing.htm</a></td>
</tr>
<tr>
<td>OPA SPILL KIT</td>
<td>KEMSURE <a href="http://www.kemmed.com/neutralizing.htm">www.kemmed.com/neutralizing.htm</a></td>
</tr>
<tr>
<td>SOAKING CONTAINERS</td>
<td>CIDEX [<a href="http://www.sterrad.com/Products">www.sterrad.com/Products</a> &amp; Services/CIDEX/CIDEX_Supplies/Trays/index.asp](<a href="http://www.sterrad.com/Products">http://www.sterrad.com/Products</a> &amp; Services/CIDEX/CIDEX_Supplies/Trays/index.asp)</td>
</tr>
<tr>
<td>ENZYMATIC DETERGENTS</td>
<td>Numerous products and companies-look for multiple (2 or more) enzyme component</td>
</tr>
<tr>
<td></td>
<td>Certol Pro-EZ AW solution (1/2 oz per gallon dilution) <a href="http://www.certol.com/medicalpromotions.aspx">www.certol.com/medicalpromotions.aspx</a></td>
</tr>
<tr>
<td></td>
<td>Ruhoff Endozyme AW <a href="http://www.ruhof.com/">www.ruhof.com/</a></td>
</tr>
<tr>
<td></td>
<td>Metrex <a href="http://www.metrex.com/index/metrex-products-us">www.metrex.com/index/metrex-products-us</a></td>
</tr>
<tr>
<td>Instrument Milk</td>
<td>Prevents instrument rusting- comes in a spray or solution</td>
</tr>
</tbody>
</table>
Attachment 9
Supply and Equipment List

May vary according to setting

Personal Protective Equipment (PPE)
- Cloth or paper fluid resistant gown
- Surgical mask with eye shield
- Goggles or safety glasses or face shield
- Exam gloves (nitrile or latex)
- Hair covers
- Shoe covers

Environmental Barriers, Containment
- Small trash bags (plastic)/saran wrap
- Portable HEPA Air Cleaner (Example: Austin Air 400)
  - HEPA carbon drum filter replacement (changed every 3-5 years)
  - White pre-filter (changed yearly)
- Sanding/burr vacuum
- Chux (blue incontinent pad)
- Towels
- Paper drapes
- Swiffer style wet or dry mop
- Manual carpet sweeper

Supplies
- Sanding/burring unit (ex: Dremel)
- Burrs and bands (metal or disposable)
- Scissors (sterile)
- Hemostat (sterile)
- Disposable knife blades (single use/safety)
- Orange sticks (single use)
- Curettes (single use)
- Emery boards (single use)
- Cotton swabs (individually packaged)
- Culture Tube
- Gauze (individually packaged)
- Toenail clippers (autoclave/high level disinfect)
- Variety of padding
- Band-Aids
- Moisturizing cream, NO alcohol added
- 30cc medication cups for creams/ointments

Environmental Cleaning/Disinfection
- Disinfectant wipe

Instrument Cleaning/Disinfection:
- Ultrasonic cleaner unit (optional)
- Enzymatic detergent
- OPA Solution (high level disinfectant)
- OPA Test Strips
- Covered basin for OPA
- Toothbrush
- Timer
- Autoclave

Resources:
- Living with MRSA booklet
  www.tpchd.org/mrsa or
  www.doh.wa.gov/Topics/Antibiotics/MRSA.htm
- Guidelines for Evaluation and Management of CA-MRSA SSTIs, 2007
  www.tpchd.org/page.php?id=131
- What to do about MRSA in Outpatient Clinics/Medical Offices
  (See infection control guidelines),
  www.tpchd.org/mrsa
## Assessment of Infection Control Foot Care Practices

### Checklist

**Date:** _____  **Foot Care RM #__**  **Observer:** ______________________________

<table>
<thead>
<tr>
<th>MET NOT MET</th>
<th>STANDARD</th>
<th>Corrected Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Room and equipment are visually clean</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Hands are sanitized before handling clean supplies or set up</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Only specific items to be used on patient are placed out on designated clean area (towel or chux)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Ointments and creams are dispensed in medicine cups and placed on set-up</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Procedure trays or set up is done immediately before use</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Personal protective equipment is available</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Gloves removed and hand hygiene performed when moving from patient zone to access clean supplies</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Patient offered face protection during nail trimming procedure</td>
<td></td>
</tr>
</tbody>
</table>

### Between patient cleaning

- All items used on patient or unused items placed out on counter during procedure are discarded or disinfected between patients
- Gloves are worn during cleaning process
- Items touched by patient or health care workers are disinfected between patients
- Non-electric carpet sweeper or Swiffer style floor mop used to clean up floor debris between patients
- Used instruments are placed in open position with sharp ends pointing in same direction and saturated or submerged in enzymatic detergent prior to cleaning

### End of day cleaning

- Gloves worn during cleaning process
- All horizontal surfaces and equipment are disinfected
- Floor debris is removed
- Instruments cleaned and prepared for sterilization or high level disinfection

### Sanding/Burring Procedures (if performed)

- Room counters and wall equipment covered
- Provider wears gown, gloves, face protection
- Sander/burr replaced between patients
- Sander/burr unit disinfected between patients
### Attachment 10
Assessment of Infection Control Foot Care Practices
(Checklist)

<table>
<thead>
<tr>
<th>MET NOT</th>
<th>STANDARD</th>
<th>Corrected Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>Instrument Cleaning and Disinfection</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Gown, gloves, face protection worn during cleaning and high level disinfection procedures</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Enzymatic detergent used for cleaning is diluted according to manufacturer’s instructions</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Autoclave is cleaned and maintained according to manufacturer’s instructions</td>
<td></td>
</tr>
<tr>
<td></td>
<td>High level disinfect is used according to manufacturer’s instructions</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Eye wash station is present where cleaning procedures are performed</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Eye wash station is activated and cleaned weekly and documented</td>
<td></td>
</tr>
</tbody>
</table>

**TOTAL SCORE:** Standards (items) met divided by total standards assessed equals compliance percent (%)
## Examples of face protection

Reusuable goggles and face shield-mask changed between patients

---

**Example of full protection during sanding/burring procedures**

Gown and disposable face protection changed between patients

- Mask with attached eyeshield
- Important to tie back of gown
This Page Intentionally Left Blank
Attachment 12
Supply Care and Set-Up
 Practices that reduce supply contamination

*Always perform hand hygiene prior to accessing supplies.*

<table>
<thead>
<tr>
<th>Individually packaged items (tongue blades, applicators, instruments) in clean containers</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Drawer cleanliness and organization</th>
</tr>
</thead>
</table>
Attachment 12 (cont.)
Supply Care and Set-Up

- Chux or towel can be used as a clean surface for set-up of supplies used during foot care.
- Dispense ointments and creams into medicine cups and put original container away from set up.
- Small plastic ampules of normal saline can be used to clean a wound.
- Put out only items that will be used during procedure.
- Discard all unused and used items on set up including the chux after the procedure.

During sanding/burring procedures the set-up can be covered with part of the chux or towel to keep it clean.
Place chux or towel under patient’s feet. Place paper sheet on floor to capture the nail clippings during procedures.
Appendix 13

Environmental Barriers for Sanding/Burring Procedures

Examples

- Counter and wall equipment covered with paper sheets to prevent nail/skin dust contamination.
- Do not remove counter and wall barriers between patients if the room is dedicated to sanding/burring procedures during the day.

![Counter and wall equipment covered with paper sheets](image1)

- Clear plastic garbage bags cover monitor and CPU.
- Garbage bags removed at end of day clean up.
- Saran wrap covers the keyboard and mouse
- Saran wrap is changed between patients.

![Clear plastic garbage bags cover monitor and CPU](image2)
Attachment 13 (continued)
Environmental Barriers for Sanding/Burring Procedures

Examples

Cover with paper sheets items that will be exposed to nail dust.
Sanding/Burring Drill and Vacuum

Sanders and burrs may be disposable single use OR non-disposable and re-processable.

<table>
<thead>
<tr>
<th>One type of sanding/burring unit with attached vacuum.</th>
<th>Vacuum lid contains the disposable vacuum bag.</th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="image1" alt="Image of sanding/burring unit with attached vacuum" /></td>
<td><img src="image2" alt="Image of vacuum lid with disposable vacuum bag" /></td>
</tr>
</tbody>
</table>

Remove the sander/burr between patients and disinfect unit and cord. Replace sander/burr during clean set up.
Improper storage and gross contamination of supplies and equipment

- Case, sanders/burrs and unit are dust coated.
- Unused sanders/burrs are mixed with used.
Attachment 15
HEPA Air Cleaner

- High Efficiency Particulate Air (HEPA) cleaner removes 99.97% of dust and bacterial particulate from the air.
- It is helpful in removing nail/skin dust from the air during sanding/burring procedures.
- This is one example of a HEPA Air Cleaner that may be used during sanding/burring procedures. It has a 360 degree intake grill and a flat surface that could be used during procedures. Best to position unit by the patients feet, where sanding is occurring.
Attachment 16
Eyewash/Drench Hose Activation/Cleaning Record

Year________________Facility
Name:________________________________________

Instructions

• Activate eyewash station or drench hose weekly for 3 minutes with cold water to make sure it is operating properly and organisms are flushed from the pipes.
• Specify a specific day of the week for activating, preferably NOT Monday due to holidays.
• Clean end caps and faucet head with environmental disinfectant.
• Document date activated and initial under the date.
• Report problems immediately to supervisor.
• Cross out 5th week if month does not have 5th week.

<table>
<thead>
<tr>
<th>Month</th>
<th>Week 1</th>
<th>Week 2</th>
<th>Week 3</th>
<th>Week 4</th>
<th>Week 5</th>
</tr>
</thead>
<tbody>
<tr>
<td>January</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Initials</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>February</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Initials</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>March</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Initials</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>April</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Initials</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>May</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Initials</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>June</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Initials</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>July</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Initials</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>August</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Initials</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sept</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Initials</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>October</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Initials</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nov</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Initials</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dec</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Initials</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Initials Print Name Initials Print Name

Reference: OSHA/DOSH
Attachment 17  
Eyewash/Drench Hose and Activation Cleaning  

**Purpose:** To reduce microorganism and bioburden contamination of the eyewash station or drench hose and to assure proper functioning of the unit.

<table>
<thead>
<tr>
<th>Procedure Steps</th>
<th>Key Points</th>
</tr>
</thead>
</table>
| **Weekly Activation Of Plumbed Eye Wash Or Drench Hose** | **Equipment Needed:**  
Eyewash/Drench Hose Activation Record |
| 1. Clean end caps and faucet heads as described below.  
2. Activate the eye wash station or drench hose with cold water as per the manufacturer’s instructions.  
3. Allow cold water to run through station for 3 minutes.  
4. Turn water off  
6. Establish same day of week to activate and document the activation.  
7. Keep logs for one year per L&I (DOSH). | • End caps should pop off to allow water stream that should flow toward the individual, not toward the backsplash.  
• Cleaning reduces and prevents microorganism buildup between station uses and allows reduction of bioburden in eyewash station.  
• Because many holidays fall on Mondays, that is not the preferred day to activate.  
• OSHA requires weekly checks and expects standardization of the day to comply with the once a week testing. |

| **Cleaning** | **Equipment Needed:**  
- Environmental disinfectant (wipes or spray)  
- Clean, unused cloth or paper towel  
- Gloves |
| 1. Put clean gloves on.  
2. Dampen a clean, unused cloth or paper towel with disinfectant.  
3. Remove the end caps, wipe the station faucet heads, wipe the inside and outside of the end caps.  
4. Replace end caps. | • Always wear gloves when using disinfectant.  
• A clean, unused cloth prevents cross-contamination from other surfaces.  
• A disinfectant wipe may be used.  
• Check inside of end caps for mold or debris. |

| **Signage, Ordering, Problem Reporting** | **Equipment Needed:**  
**Eyewash signage:** Order the 5” x 7” “Eye Wash” sign from medical supply catalog. |
| 1. Order Eyewash signage if none present and place in a visible location near Eyewash (Do not use Eyewash signage for drench hoses).  
2. Immediately report problems to supervisor. |  

**References:**  
2. Core Rules- Emergency Washing (eyewash rules)  