

STATE OF OHIO



DEPARTMENT OF REHABILITATION  
AND CORRECTION

SUBJECT:	PAGE <u>1</u> OF <u>5</u>
Medical Environmental Issues	NUMBER: 68-MED-03
RULE/CODE REFERENCE: OAC 3701:1-66-04(B).	SUPERSEDES: 68-MED-03 Dated February 13, 2004
RELATED ACA STANDARDS: 4-4358; 4-4427	EFFECTIVE DATE: July 1, 2007
RELATED AUDIT STANDARDS:	APPROVED:  <i>Taney J. Collins</i>

**I. AUTHORITY**

This policy is issued in compliance with Ohio Revised Code 5120.01 which delegates to the Director of the Department of Rehabilitation and Correction the authority to manage and direct the total operations of the Department and to establish such rules and regulations as the Director prescribes.

**II. PURPOSE**

The purpose of this policy is to establish standard procedural guidelines in order that space, medical equipment, supplies and materials for health care service are provided and maintained as determined by the designated health authority.

**III. APPLICABILITY**

This policy shall be applicable to all employees and contractors involved directly or indirectly in the provision of the health care services to inmates.

**IV. DEFINITIONS**

Hemodialysis: A filtration process by which high concentrations of blood chemicals are diffused across a membrane into a less concentrated solution (dialysate) to remove accumulated toxins or drugs.

Radiation Dosimeter: A badge, worn by staff that records measurement of cumulative exposure to x-rays.

Steam autoclave: A pressurized chamber that uses steam and pressure to sterilize medical equipment requiring sterilization.

Sterilization: Process to eliminate all biological life.

**V. POLICY**

It is the policy of the Department of Rehabilitation and Correction to establish procedural guidelines, which provide for systematic, objective monitoring of specialized medical equipment. These guidelines shall address staff training, staff responsibilities, quality control, operational safety and limitations applicable within the institution environment.

## VI. PROCEDURES

### A. Autoclaving

1. Autoclaving shall be used to sterilize re-useable medical and dental instruments after each patient use. Institutions may use either steam or chemical autoclave techniques to sterilize instruments.
2. Each institution Health Care Administrator shall have a plan to address the decontamination of medical and dental instruments that conforms to the manufacturer's recommendations and specifications.
  - a. All persons who operate autoclaves must be trained in the safe and proper use of autoclaves that must include packaging, quality control, required maintenance and operational safety and limitations.
  - b. Such training must be documented and verifiable.
3. Proper sterilization requires the following conditions:
  - a. A temperature of 250 degrees Fahrenheit, at a pressure of 150 Pounds Per Square Inch (PSI) for at least 15 minutes;
  - b. The above conditions must be obtained uniformly for all packages in the autoclave cycle.
4. Periodic control tests must be run with autoclave loads to ensure proper sterilization is occurring. Control tests must be run on the following schedule:
  - a. Controls for medical equipment must be run at least monthly.
  - b. Controls for dental equipment must be run at least weekly.
5. Each autoclave cycle must be documented in a log maintained specifically for that purpose. The autoclave log must contain the following information:
  - a. All cycle and package ID numbers.
  - b. All control results.
6. Staffs that operate autoclaves are responsible for routine maintenance of autoclave units, as recommended by the manufacturer's operator manual. Any autoclave that is not operating properly shall not be used until it is repaired.

### B. Hemodialysis

1. Microbiological and chemical quality of dialysis water and the dialysate shall be monitored periodically in accordance with standards developed by the American Association of Medical Instruments (AAMI).

2. Additionally, each dialysis machine and work station must be disinfected every 24 hours in accordance with standards set by AAMI.
3. All policies and procedures concerning dialysis are contained in the Frazier Health Center Policy and Procedure manual, which shall be available on the Dialysis unit at all times.

C. Regulation of Sources of Radiation

1. All radiography equipment shall be calibrated as required by Ohio Administrative Code (OAC) at 3701:1-66-04(B).
2. All doors in the direct path of the primary beam shall be closed during X-ray examinations and shall provide structural radiation shielding barrier as required by Ohio law.
3. A Department of Health "Safe Operating Procedures" manual shall be available in each X-ray department.
4. All processing equipment shall be maintained in accordance with the manufacturer's recommendations.
5. All individuals that frequent an area where radiation is used must be instructed on potential health risks and safety precautions in accordance with OAC at 3701:1-66-04(B).
6. Documentation of such instruction will include:
  - a. Topics presented.
  - b. Discussion of each topic.
  - c. Date the instruction took place.
  - d. Name(s) of instructor(s)
  - e. Names of those who received the instruction.
7. Topics that must be included in such instruction consist of:
  - a. Presence of a restricted area
    - i. What area is restricted and where it is located.
    - ii. How the restricted area has been posted.
  - b. Occurrence of radiation sources
    - i. Where the radiation sources are located.
  - c. Precautions or procedures to minimize exposure
    - i. How exposure to radiation can be controlled or minimized in the facility.
    - ii. Methods of minimizing occupational exposure to "As Low As Reasonably Achievable" (ALARA).
    - iii. Location of the facility's Department of Health "Safe Operating Procedures" manual.

- d. Rules for protection of personnel from exposure.
    - i. The Ohio Radiation Protection rules that apply specifically to the institution.
    - ii. Where in the institution an Ohio “Notice to Employees” must be posted.
    - iii. Resources available for inquiries or concerns about radiation protection.
  - e. Requirements of personnel monitoring and reporting:
    - i. Specifically when personnel must be monitored.
    - ii. The level of radiation exposure an employee may receive.
    - iii. Reports of radiation exposure that are available and the location of these reports.
8. All employees who have received instruction on Regulations of Sources of Radiation will sign to acknowledge such instruction.

D. Medical equipment monitoring and testing

1. It is the responsibility of each medical unit to periodically monitor, and if necessary, recalibrate all medical equipment that requires such periodic maintenance. Such monitoring shall be done as recommended in the manufacturer’s operation manual. Such equipment may include, but is not limited to:
  - a. Blood glucose monitoring equipment
  - b. Pulse oximeters
  - c. Suction equipment
  - d. Oxygen equipment
  - e. EKG equipment
  - f. AED units
2. Each medical unit shall keep a written record of this maintenance.

E. Bio-hazardous Waste Disposal

Each institution shall have a plan to address management and disposal of bio-hazardous waste in accordance with Ohio Environmental Protection Agency rules and regulations and with 10-SAF-13, Regulated Waste Management / Decontamination of Medical and Dental Equipment.