

<b>Department:</b>	Laboratory and Blood Bank		
<b>Document:</b>	Multidisciplinary Policy and Procedure		
<b>Title:</b>	Laboratory Safety and Infection Control Training Program		
<b>Applies To:</b>	All Laboratory, Blood Bank Staff and Infection Control Staff		
<b>Preparation Date:</b>	January 01, 2025	<b>Index No:</b>	LB-MPP-004
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## 1. PURPOSE:

- 1.1 Laboratory has safety and infection control training program that includes initial training and competency assessment, annual training ,recertification and competency assessment

## 2. DEFINITONS:

- 2.1 Initial training: training done at first three months of the new employee.
- 2.2 Personal protective equipment (PPE) is protective clothing, helmets, goggles, or other garments or equipment designed to protect the wearer's body from injury or infection.
- 2.3 Occurrence variance report (OVR): Occurrence reports are used to report events that may have quality or risk management considerations and may require further follow up from other departments (Stanford Hospital and Clinics, 2008).

## 3. POLICY:

- 3.1 To perform work safely all employee must be trained at start of work, annually on recertification

## 4. PROCEDURE:

- 4.1 New laboratory employee goes to infection control and safety departments to receive training course and take competency certificate from both departments which is obligate to start work in laboratory.
- 4.2 Annually with contract renewal new training and competency on infection control and safety.
- 4.3 The Training program of safety and infection control consists of the following things:
  - 4.3.1 Training on response to Fire Accidents and other emergencies.
  - 4.3.2 Identification and handling of hazardous materials.
  - 4.3.3 Disposal of all Medical Waste (Biological Waste):
    - 4.3.3.1 All Biological Wastes are discarded into Yellow coloured Biohazard Bags.
    - 4.3.3.2 Domestic General Waste is differentiated from Biological waste and discarded in Blue coloured or Black Coloured bags.
    - 4.3.3.3 Bacteriological specimens and culture plates are disposed double-bagged with Biohazard symbol decontaminated by autoclaving and transported in covered trolleys.
    - 4.3.3.4 Blood and Body fluids are disposed double-bagged with Biohazard symbol and transported in covered trolleys.
    - 4.3.3.5 All sharp wastes are disposed of into Sharp containers.
  - 4.3.4 Safe handling of Chemical Reagents.
  - 4.3.5 Management of Biological Spill.
  - 4.3.6 Management of chemical Spill and use of MSDS.
  - 4.3.7 Use of PPE (Personal Protective Equipment).
  - 4.3.8 Preparation of Incident / Accident / OVR report.
  - 4.3.9 Use of Emergency shower and Eyewash station.
  - 4.3.10 Use of First-Aid kit.

- 4.3.11 Hand hygiene.
- 4.3.12 General guidelines of PPE (Personal Protective Equipment).
- 4.3.13 N95 Fit Test Policy.
- 4.3.14 Aseptic technique.

## 5. MATERIALS AND EQUIPMENT:

- 5.1 Laboratory Safety and Infection Control manual
- 5.2 Laboratory Policy and procedures on monitoring the safety and infection control
- 5.3 Laboratory Safety officer's Documents
- 5.4 MSDS (Material Safety data Sheet)
- 5.5 Training certificate of safety and IPC

## 6. RESPONSIBILITIES:

- 6.1 Laboratory director
- 6.2 Hospital IPC coordinator
- 6.3 Laboratory safety coordinator
- 6.4 Laboratory IPC coordinator

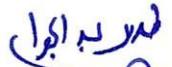
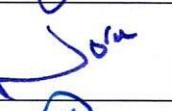
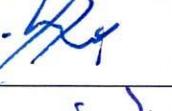
## 7. APPENDICES:

N/A

## 8. REFERENCES:

- 8.1 Laboratory Bio-safety Manual. 3rd Edition, 2004, WHO.

## 9. APPROVALS:

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