

STANDARD OPERATING PROCEDURE

Contra Costa County Operations "Patient Focused, Customer Centered, Caregiver Inspired"

SOP #: 212A Approved By:

Effective: January 2017

Disposable Supplies Chad Newland Updated: October 2022 Regional Director

A. Purpose

To clearly identify Disposable items designed for single patient use from items that are reusable after appropriate cleaning, and to provide guidance for proper disposal of soiled items when appropriate.

B. Policy

- I. Reusable items. These items shall be cleaned when soiled and after each patient contact:
- 1. EKG cables
- 2. Reusable pulse oximeter
- 3. Defibrillation cables
- 4. Laryngoscope handle
- 5. Laryngoscope blades
- 6. Magill forceps
- 7. IV arm boards
- 8. Glucometer
- 9. Pedi tape
- 10. KED
- 11. SMR's
- 12. Scoop stretcher
- 13. Patient tarp
- 14. PD board
- 15. BP cuff
- 16. Stethoscope
- 17. Restraints
- 18. Sager or hare traction device
- 19. Bandage shears
- 20. EZIO Drill
- II. Disposable items should be kept above the minimums levels listed on the DAL. If at any time during the shift a unit runs below the minimum required level, the crew must contact the area supervisor. All disposable items must be restocked at the end

of each shift so the unit is ready to go in service for its next shift. If, for any reason, the crew is unable to restock the unit (supplies unavailable etc.) the crew must notify the area supervisor AND leave a clearly visible note for the on• coming crew to inform them of the missing equipment.

- **III.** All medical waste must be disposed of in a clearly marked hazardous waste bag. Sharps must always be disposed of in a sharps container and never mixed with other medical waste. Sealed containers of sharps or bio-hazardous waste shall be left at a designated area at each station.
- **IV.** When durable items become soiled beyond the crew's ability to clean them for use with another patient, the area supervisor must be contacted.
- **V.** SOP #223.B.1.f requires that employees keep an extra uniform with them at all times in case theirs becomes soiled. Uniforms soiled with biohazardous material should be treated as biohazardous waste. Employees should notify their supervisor should a uniform require replacement.
- VI. Disposable item. The items listed below may only be used for a single patient contact:
 - 1. EKG electrodes
 - 2. Disposable pulse oximeter sensors
 - 3. Defibrillation *I* cardioversion pacing patches
 - 4. OPA
 - 5. NPA
 - 6. Ambu-bag
 - 7. Nasal cannula
 - 8. Non re-breather mask
 - 9. Oxygen extension tubing
 - 10. CPAP Mask and tubing
 - 11. TB mask
 - 12. Bite stick
 - 13. Suction tubing
 - 14. Yankour suction tip
 - 15. Hand-held nebulizer
 - 16. Mask nebulizer
 - 17. Combi-tube
 - 18. Endotracheal tube
 - 19. Stylette
 - 20. Endotracheal nebulizer set
 - 21. Endotracheal tube holder
 - 22. Tube check bulb
 - 23. C02 detector
 - 24. Needle thoracostomy kit
 - 25. IV catheters
 - 26. Tourniquets
 - 27. Razors
 - 28. All medications
 - 29. Alcohol betadine preps

SOP 212A Disposable supplies

- 30. All syringes
- 31. All needles
- 32. Twin pack
- 33. Luer lock
- 34. Saline locks
- 35. Extension tubing
- 36. IV saline solutions
- 37. Glucometer test strips
- 38. Glucometer lancets
- 39. Intra-osseus needle
- 40. Triage tags
- 41. Biohazard waste bags

J. Enforcement of Policy

1. Violations of this policy are subject to corrective action up to and including termination of employment.

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