



CHARLOTTESVILLE-ALBEMARLE RESCUE SQUAD

STANDARD OPERATING GUIDELINE

TOPIC: Single Use Items	S.O.G. # 3.11
Approved by: Lair D. Haugh, Chief	Revised: 9/1/2007 Approved: 9/1/2007

Purpose:

To provide a guideline for identification of single-use items, disposal of such items and restocking of supplies.

Identification of single-use items:

Single-use items shall include, but are not limited to:

- Oxygen delivery supplies – non-rebreather masks, nasal cannulas, oxygen tubing, and bag-valve masks, and pocket masks
- Airway supplies – oral-pharyngeal airways, nasal-pharyngeal airways, endotracheal tubes and stylettes, combitubes, King airways, ET tube holders, end-tidal CO₂ detectors, surgilube, and saline bullets
- Suction supplies – suction catheters, Toomey syringes, suction tubing and canisters,
- Trauma supplies – all bandaging supplies (gauze, bandages, trauma dressings, band-aids etc), cravats, cardboard splints, burn dressings, occlusive dressings, insect swabs, ammonia inhalants, C-collars, ice packs, heat packs and sterile saline
- Medical supplies – I.V. supplies (catheters, extension sets, alcohol preps, I.V. tubing, saline flushes, and I.V. bags), drug boxes (and all opened medications except NTG and ASA), oral glucose, bite sticks, OB kits, nebulizers, Emi hoops, and biohazard bags
- Monitor supplies – OxiCliq sensors, EKG electrodes, multifunction defib pads, ETCO₂ circuits (ET and nasal cannula), and razors
- PPE – latex/nitrile gloves, face masks, eyeshields, and gowns

All items which a provider feels cannot be reused without presenting a risk to the patient or provider for reasons including an infectious disease risk or a decrease in functionality should be disposed of or placed out of service. All sterile items and all items identified by the manufacturer as single-use should also be disposed of after use.

Restocking disposable items

Providers should insure that their vehicle is fully stocked at the start of each shift and after every call. Checklists are provided detailing all necessary equipment for the ambulances.



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Items such as non-rebreather masks, nasal cannulas, EKG electrodes, drug boxes and C-collars can be restocked at the hospital before the vehicle is returned to service. All other items should be restocked immediately upon return to the building.

Storage, transport and disposal of disposable items and medical waste

Any item “saturated or caked with human blood or body fluids that would release blood or body fluids in a liquid or semi-liquid state if compressed or would flake if handled” or which would create a risk of infectious disease if disposed of in regular trash should be considered biohazard waste. These items should be disposed of in a compartment or bag appropriately labeled as biohazard while in the ambulance and appropriately disposed of in a biohazard waste receptacle at either the station or the hospital after the call. All sharps must be disposed of immediately in an appropriate “sharps” container.

All of the waste and disposable items (no sharps or biohazard waste) should be disposed of in the regular trash either in the ambulance, at the hospital or upon return to the station.