Name of Policy: Monitoring Pathology Safety UTOLEDO **Policy Number**: 3364-107-405 Approving Officer: Medical Director, Clinical **Effective date:** 01/04/2025 **Pathology** Original effective date: 05/25/1998 **Responsible Agent**: Director, Clinical Pathology Administrative Director, Lab **Scope**: Pathology Laboratory University of Toledo Medical Center Key words: Safety officer, safety manuals, safety inspections, frequency, reporting safety issues. New policy proposal Minor/technical revision of existing policy \boxtimes Major revision of existing policy

(A) Policy statement

The Hospital Safety Officer, or appointee, will meet with the Pathology Department regarding safety issues during regularly scheduled Environmental Rounds.

Reaffirmation of existing policy

(B) Purpose of policy

To identify safety issues, devise an action plan, and monitor progress. To provide a method to relate compliance issues. To monitor and assess employee safety through periodic safety inspections.

(C) Procedure

- 1. Annual safety inspections (Environmental Rounds) will be conducted to review compliance issues, obtain safety recommendations from the safety team, and evaluate employee safety. The inspections will not be announced to the department.
- 2. Departmental safety manuals, Laboratory Chemical Hygiene Plan, and College of American Pathologists (CAP) safety checklists will be reviewed annually by the University of Toledo Health and Safety Office.

Any safety issues identified by Risk Management, laboratory staff, the Fire Marshall, or reported to the Safety Officer will be investigated and discussed as appropriate.

Approved by:

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Name: Amira Gohara, M.D.
Title: Medical Director, Clinical

Pathology

1/10/2025

Date

Review/Revision Completed by:

Joshua Otiso, Administrative Director, Lab **Policies Superseded by This Policy:**

• S-05

Initial effective date: 02/09/1995

Review/Revision Date: 01/04/2025

Next review date: 01/04/2027