1. PROCEDURE FOR MAINTENANCE AND REPAIR PERSONNEL:

Occasions may arise when it is necessary for maintenance and repair personnel to enter operating rooms to effect repairs. If the maintenance or repair problem is such that the work can be delayed, work should be delayed until the next break between patient surgery. A basic tool kit containing pliers, screwdrivers, wrenches and hammer is maintained in a sterile condition in the Holding Room and should be used to prevent contamination. The following additional precautions are mandatory:

1. For any repairs in OR rooms, workers must remove their Engineering and Facilities clothes and wear white attire provided by OR personnel.
2. If a case is in progress, do not touch or allow equipment or debris to touch the sterile field (table on which instruments and sterile sheets are located).
3. If a case is in progress, inform the nurse in charge of any equipment or utility that must be deactivated or turned off. The Doctor, or person in charge, will determine whether to allow you to proceed with your work.

Procedure for Maintenance and Repair Personnel in Obstetrical Areas:

On those occasions when it is necessary for maintenance and repair personnel to enter obstetrical areas to effect repairs certain infection control procedures must be followed. For purposes of discussion the obstetrical areas can be divided into two categories of risk; the high risk area, which consists of the prepared or in use delivery room, and the low risk area which includes all other areas. The following precautions are applicable when effecting repairs in the high risk area. If the maintenance or repair problems such that work can be delayed, work should be delayed until the space is no longer in use. If the work cannot be delayed the following precautions are mandatory:

1. For any repairs in OR rooms, workers must remove their Engineering and Facilities clothes and wear white attire provided by OR personnel.
2. If a case is in progress, do not touch or allow equipment or debris to touch the sterile field (table on which instruments and sterile sheets are located).
3. If a case is in progress, inform the nurse in charge of any equipment or utility that must be deactivated or turned off.

When repairs or maintenance must be accomplished in low risk areas, workers are required to put on cover gown (wrap-around) prior to entering the area. Workers will advise the nurse in charge of the nature of their business prior to entering the area and are prohibited from entering the rooms during these periods when the babies are with the mothers.

Procedures for Maintenance and Repair in the Burn Unit:

The potential hazard of infection which exists for both patient and staff personnel in the burn unit environment makes it mandatory that strict infection control procedures be followed without exception. The following procedures shall be followed:

1. Enter the burn unit by the front entrance only.
2. Put a yellow wrap-around gown, which is available in a cart outside the entrance, prior to entering the unit.
3. Check with the nurse in charge for specific instructions regarding the maintenance problem. The nurse may be able to assist you by moving a patient to provide unobstructed working space.

4. Be aware that dirt and dust carry organisms which are deadly to a burn patient. Attempt to minimize the spread of dirt and dust.

5. If it is necessary to work above the patient, wear a hair cover.

6. Wash your equipment before leaving the unit. The nurse in charge will provide you with a disinfectant.

7. Leave your gown in the hamper inside the unit when you leave.

8. Wash your hands carefully after leaving the unit.

Procedure for Maintenance and Repair Personnel in Isolation Rooms:

Isolation serves one of two purposes; either to protect the patient for external hazards, or to protect the staff for the hazards of communicable disease emanating from the patient. Accordingly, for your own protection as well as protection for the patient, do not enter a room marked ‘isolation’ until you have checked with the nurse in charge to determine what is being isolated. The nurse will advise you of the necessary precautions.

Procedure for Minimize Access of Aspergillus to implant patients in OR # 10 or OR # 8:

The substantial threat posed by Aspergillus to implant patients requires that special efforts be made to reduce access during heart surgery which is normally conducted on OR # 10 or OR # 8. Accordingly, Engineering and Facilities maintenance personnel shall initiate and maintain on a semiannual basis replacement program for HEPA filters in OR # 10 and OR # 8 air handling systems. This filter change shall be coordinated with Hospital Housekeeping so that they can clean diffusers and ducts with a phenolic disinfectant at the time of the filter change.

Procedure for Recording Relative Humidity in Anesthetizing Locations:

Relative humidity of not less than 50 percent, at a temperature range of 70° ± 5° shall be maintained in anesthetizing locations, both flammable and nonflammable, and shall be recorded every day anesthetizing agents are used. The temperature which is maintained in operating rooms is chosen on the basis of the well being of the patient and the operating team. A relative humidity or not less than 50 percent at the temperature range is maintained while this relative humidity range is not sufficiently reliable for complete dissipation of electrostatic charges, it does reduce the hazard of electrostatic spark discharges.

In order to meet these requirements, the Energy Management Shop shall routinely measure the relative humidity in the operating rooms on Monday through Friday for each week, as well as upon request on weekends. The relative humidity shall be recorded on a chart posted on the bulletin board in the hallway of the operating room area, and when completed shall be filed in the E.M. Shop in the Hospital.
PROCEDURE FOR MAINTENANCE AND REPAIR PERSONNEL

ARCHIVE
Hospital Maintenance Procedure

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