

Operation of the Pneumatic Air Tube Transport System

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October 2021	October 2023	3

Purpose

To describe the operating procedures to be followed by all users of the pneumatic tube system.

Who should read this document?

Doctors, nurses, midwives, ward managers and all other Ward and Departmental staff who use the system.
 Laboratory and Pharmacy staff
 Serco managers

Key messages

These procedures must be followed to ensure safe delivery of the clinical specimens or pharmacy documentation being transported.

Red pods are for pathology samples only. Green pods are for pharmacy use only.

Core accountabilities

Production	Phil Tarbuck/John Stephens/Paul Bradshaw/Alan Speirs
Review and approval	Health & Safety Team
Ratification	Director of Future Hospitals
Dissemination	Pathology
Compliance	Site Services (the system owner)

Links to other policies and procedures

Version History

1.1	July 2012	Approved by Trust Health & Safety Committee
1.2	August 2012	Minor amendment to document
1.3	August 2014	General revision
1.4	December 2016	Minor amendments
2.0	March 2019	Minor amendments
3	October 2021	Minor amendments

The Trust is committed to creating a fully inclusive and accessible service. Making equality and diversity an integral part of the business will enable us to enhance the services we deliver and better meet the needs of patients and staff. We will treat people with dignity and respect, promote equality and diversity and eliminate all forms of discrimination, regardless of (but not limited to) age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage/civil partnership and pregnancy/maternity.

An electronic version of this document is available on Trust Documents.

Larger text, Braille and Audio versions can be made available upon request.

Standard Operating Procedures are designed to promote consistency in delivery, to the required quality standards, across the Trust. They should be regarded as a key element of the training provision for staff to help them to deliver their roles and responsibilities.

AMENDMENT HISTORY

Amendment		Superseded Issue No	New Issue No	Section(s) amended	Details of amendment
No.	Date				
1	05/03/2019	1.4	2.0	Throughout	Brought into line with SOP template. Document renumbered accordingly.
				4.2	Blood culture section updated.
				4.2 and Appendix 1	Non-gynae cytology may be podded
				7	Remove reference to Trust update.
				10	References updated
	01/06/2021	2.0	2.1	Section 3	References updated
				Section 4	Change of provider

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1 Introduction: Purpose and Scope

1. The System

One of the means whereby the Trust is able to transport laboratory specimens around the hospital site is a pneumatic tube system. It aims to provide a safe, efficient and rapid delivery service, improving specimen turnaround time and thus enabling patients and hospital staff to receive their test results in a timely manner.

The system was originally supplied by Swisslog, an international logistics company based in Switzerland. It consists of a network of uPVC tubing connecting fifty-one stations where specimens may be received or placed for transfer. The system is divided into five zones linked by a transfer unit at the level 05 plant room, from where pods are transferred across the five zones.

Each station has a unique four-digit numerical address. For despatch through the tubing, specimens are placed into specially designed cylindrical carriers. These are generally known as 'pods' and will be referred to as such throughout this document. Transportation is effected by blower units which determine the flow of the pod. Pods travel at 6 feet per second.

Most clinical areas are connected by the system to the three pathology laboratories – Combined Laboratories, Histopathology and Microbiology.

The system is also used for the transportation of paperwork to Pharmacy, e.g. drug charts. It is not suitable for pharmaceuticals as it does not provide the necessary level of security.

1.1 Pod Stations

The fifty-one pod stations have the following numerical addresses:

1.1.1 Pathology and Pharmacy

Combined laboratories	1101 and 1102
Microbiology	1103
Histopathology	1104
Pharmacy	1114

1.1.2 Wards and Other Departments

Bickleigh Ward	4406	Neo-natal ICU	2207
Birch Ward	3301	Orthopaedic OPD	1117
Braunton Ward	4403	Penrose Ward	4407
Brent Ward	3311	PIU	3305
Central Delivery Suite	2208	Plym Day Case Unit	1116
Children's High Dependency Unit	3304	Postbridge Ward	1112
Children's Day Unit	3303	Primrose Unit	1119
Chestnut Unit	2214	Radiotherapy	1118
Clearbrook Ward	4405	REI	1110
Crownhill Ward	4402	Specimen Reception	2209
Clinical Coding	1220	Stannon Ward	3308
Day Assessment Ward	2206	Theatres, Cardiac	2213
Emergency Department	1115	Theatres, Gynae	2211
Erme Ward	1108	Theatres, Level 04	1111
Fal Ward	1109	Theatres, Level 07	1113
Front Desk (Porters)	2201	Thrushel Ward	2204
GU Medicine	2212	Torcross Ward	4404
Hartor Ward	3302	Torrington Ward	4401
Hembury Ward	3310	Venepuncture	2202
Lynher Ward	1107	Wildgoose Ward	3307
Mayflower Ward	2210	Wolf Ward	1106
Marlborough Ward	3309	Woodcock Ward	3306
Moorgate Ward	2205	X-ray	2203

1.2 Pods

Each station is issued with ten pods for transporting pathology specimens or pharmacy paperwork through the system. A station will have eight red and two green pods, each labelled with the station number and its own unique identifier.

RED pods are for pathology specimens only

GREEN pods are for pharmacy documents only*

* See 3.2.3. (4)

Wards that do not have a pod station may have a sharing arrangement with a neighbouring ward that does (e.g., Meavy shares the pods and use of the pod station on Lynher).

Each pod can be opened at both ends.

All pods are micro-chipped, enabling them to be 'auto-returned' to their home station, and their movements around the system to be traced.

Pods have a transparent central section enabling receiving staff to detect a leak or breakage before opening.

A band of black Velcro at each end of the pod enables it to fit snugly and move smoothly through the tube system.

1.3 'Free run'

Sometimes the words 'Free run' will be displayed at stations. This indicates that the system has detected a fault, such as a missing pod, a stray pod in the system, or a station that is full of pods and backing up into the tube network. This sets off a central alarm and a switchboard operator will then call in an engineer from Site Services to check the system.

The free run will take no more than 20 minutes during which it will purge the system. Any blocked or sticking pods it detects will be sent either to the assigned destination or more usually be diverted back to an auto-return unit on Level 6 in Combined Laboratories from where pods can be collected. *(DCL can be contacted 24/7 by going through switchboard and asking for either the Haematology or Chemistry Biomedical scientist.)*

During a free run affected zones are out of use, potentially delaying the transport of urgent samples. Free runs can be minimised by following the correct procedures outlined in this SOP.

1.4 Control Lights

Each pod station has a panel of three lights:

- a. *Green Light:* This lets the user know that a carrier pod has just been sent from the station. Do not try to send another carrier until the light goes off.
- b. *Yellow Light:* This lets the user know that the station is receiving a carrier or that the system is in service.
- c. *Red Light:* There is a fault at the user's station or another station. Call Site Services on 31300 to report.

2 Management

Ownership of the system belongs to Site Services.

Responsibility for this Standard Operating Procedure belongs to Pathology. During the production and review processes every effort should be made to engage with Site Services, Pharmacy, Infection Control and users of the system.

Responsibility for the training and education of staff groups in correct use of the system belongs to Pathology.

Managers are required to include an assessment of the pods in their ownership as part of the annual risk assessment process.

3 Regulatory Background

3.1 The Health and Safety at Work Act (1974), places a duty of care on all staff to themselves and to one another.

3.2 The Control of Substances Hazardous to Health Regulations (2002) require risk assessment and classifies biological agents as hazardous substances.

3.3 Provision and Use of Work Equipment Regulations (2008) – requires employers to ensure:

- that work equipment is maintained in an efficient state, in efficient working order and in good repair;
- that all persons who use work equipment have available to them adequate health and safety information and, where appropriate, written instructions pertaining to the use of the equipment;
- that all persons who use work equipment have received adequate training for purposes of health and safety.

3.4 Management of Health and Safety at Work Regulations (1999) requires risk assessment.

3.5 Safe working and the prevention of infection in clinical laboratories and similar facilities, HSE (2003). Paragraphs 176 – 180 give guidance on the safe use of pneumatic air tube systems.

3.6 Safe use of pneumatic air tube transport systems for pathology specimens, HSE (1999). An HSE information sheet.

3.7 The ISO15189:2012 standard for medical laboratories (Requirements for quality and competence) require a documented procedure for monitoring the transportation of samples to ensure they are:

- transported within a time frame that is appropriate to the nature of the requested examinations and the laboratory discipline concerned
- within a temperature interval specified for sample collection and handling
- in such a way as to ensure the integrity of the sample and the safety of staff. (Para. 5.4.5)

3.8 HTM090 pneumatic air tube transport systems.

4 Key Duties / Responsibilities

4.1 When transporting specimens the Trust requires:

Care must be taken when collecting and handling clinical samples to ensure that the risk of infection to staff, private contractors and members of the public is kept to an absolute minimum. This includes the provision of relevant information and the prevention of leaks and spillages.

All specimens and accompanying paperwork must be transported in such a way as to maintain patient confidentiality at all times. They must never be left unattended in a public area.

(Specimen Transport Policy for UHPNT, issue 2.3, October 2017)

4.2 All users

1. Only enter Swisslog Pneumatic Tube System pods into the system. Any other item will cause a blockage in the system requiring the system to be shut down, impacting on patient care.
2. Do not use the system to transport personal items, such as pens.
3. Do not place your hand into the send or receive tubes.
4. Safe use

The safe use of the system is fundamentally reliant on three factors:

- d. The types of specimen suitable for despatch
 - o **Not all types of specimens may be placed into the system** (see point 12).
 - e. The design of the system, and especially of the specimen pod.
 - o It should be borne in mind that **the pods are not leak-proof**.
 - f. Giving staff the right **information and training** so that the proper operating procedures are always followed.
5. The primary concern in the transportation of clinical specimens using a pneumatic tube system is leakage into the pod and potentially into the system itself, thus exposing staff to biological hazards. Since the pods designed for the system installed in this Trust are not leak-proof, the emphasis must be on prevention and containment.
 6. To ensure that leaks do not occur, or that in the event of a leak it does not escape from the pod to contaminate the tube network, it is the responsibility of all users of the system to ensure that they are following the procedures described in this SOP.

7. All users must ensure that they are using a pod of the correct colour for the item they wish to transport through the system, i.e., **red** for pathology specimens, **green** for pharmacy paperwork.
8. All users must familiarise themselves with the reporting procedure and any contingency plan that needs to be followed in the event of a breakdown of the system.
9. All users must be aware of the correct procedure to follow in the event of contamination of a pod and of the system.
10. Worn or damaged pods
 - a. All users must take ownership of the pods belonging to their own area, and take responsibility for their condition.
 - b. Over time pods become chipped, the central Perspex area becomes cloudy, and the Velcro bands become worn and ineffective. Closures may become loose or ill-fitting. Pods showing signs of wear and tear should be assessed and possibly taken out of use.
 - c. Responsibility for the reporting of damaged pods rests with all users. They must be reported to Site Services (tel. 31300) who will collect the pod and repair or replace it.
 - d. All costs for replacement pods will be cross charged by Site Services to the owning area.
11. Faults in the system should be reported to the Site Services Department as soon as possible:
 - a. During the day call the helpdesk on 31300.
 - b. Out of hours contact Switchboard and ask for the Duty On-call Site Services Supervisor.

12. Sample types.

The following sample types **must not** be sent through the pod system:

- a. Specimens in glass containers

Blood cultures

Most blood culture bottles issued are now made of polycarbonate and may be sent in the pod system as normal.

If in exceptional circumstances the manufacturer needs to revert to using glass, they must be hand delivered.

- b. Glass slides
- c. Any specimen known or suspected to be infected with *Mycobacterium tuberculosis*.
- d. Specimens from patients who have recently been given radioactive isotopes.
- e. Sharps, e.g. syringe with needle attached.

- f. Samples for blood gas analysis.
- g. Samples in formalin.
- h. Gynae cytology samples (non-gynae cytology may be podded)
- i. Any large volume samples.
- j. Specimens from patients known or suspected to be positive for viral haemorrhagic fever (e.g. Ebola, Marburg, Lassa fever).

Also, flammable substances must never be put into the pod system.

Instances of samples on this list being transported by pod must be reported on the Trust's incident reporting system (Datix).

4.3 Wards and departments

1. When despatching clinical samples, care must be taken to ensure that each sample is correctly packaged so as to prevent a leak, or contain one were it to occur:
 - a. Make sure the lid / cap of the specimen container is on firmly.
 - b. Make sure the specimen bag is sealed correctly. **Never** send a specimen through the system without placing it into a sealed specimen bag and then into a pod.
 - c. Bear in mind that specimens sent by ICM have no request form but each sample must still be placed into its individual specimen bag and sealed.
2. Always use the correct coloured pod: **red** for laboratories, **green** for Pharmacy.
3. Do not over-pack the pods. Make sure that any packaging materials are completely contained within the pod. If not, this will cause the pod to lodge in the system tubing and cause a shutdown.
4. Always enter the correct four-digit numerical address to ensure prompt delivery. An incorrect number will send the pod to the wrong address. If this happens, you will need to telephone the area and ask them to forward the pod to the correct destination.
5. The cabinet under the station is intended to be a receiving cabinet only. It is not designed as a storage area for pods and should not be used as such.
6. Check pods for wear and tear. Damaged, worn or insecure pods must be withdrawn from use and reported to Site Services on 31300. (See 3.2.1 section 11)
7. To cancel a remote alarm, enter your own address and confirm by pressing the 'E' key. Do this every time you collect a pod from your station.
8. If a pod is contaminated on the ward, disinfect it following your normal ward protocol before returning it to the system. If you suspect that the system has become contaminated, urgently contact Site Services on 31300. Immersing the pod in disinfectant / water will not disable the microchip.

It is the responsibility of the clinical risk manager to report spillages on Datix. Infection control advice is available during working hours and via the on call medical microbiologist in an emergency.

4.4 Laboratories

1. The pod reception box

- a. Keep it in a clean condition.
- b. It must be well padded with foam or bubble-wrap to absorb impact by the pods.
- c. Foam must be wrapped in plastic to provide a waterproof covering.
- d. Keep a regular check on the station to ensure that pods do not accumulate or back up into the tube network.

2. Pod reception

- a. Having received a pod, always examine the contents through the central Perspex area for any signs of contamination and remove the specimen(s) carefully.
- b. If there is no contamination, return the pod immediately to its sender.
- c. In the event of a leakage into the pod, follow the decontamination procedure described in the laboratory protocol.
- d. If the leak has contaminated the outside of the pod:
 - i. Do not enter any further pods into the system.
 - ii. Contact the Site Services Department immediately on 31300 and inform them of:
 1. The receiving station number
 2. The sending station number, if known
 3. The type of spill (i.e. specimen type and suspected amount)
 4. The time the contaminated pod arrived or was first noticed.
 - iii. Out of hours contact Switchboard and ask for the Duty On-call Site Services Supervisor. The Site Services department will then close down a section of the system that is appropriate for control of the spillage.
 - iv. Decontaminate the pod according to the laboratory's spillage policy. Pods must not be autoclaved as this will damage them.
 - v. Process or discard the sample appropriately according to the laboratory's policy for broken or leaking samples.

- vi. In addition to a laboratory coat, always wear gloves when handling a pod or any part of the system that has been contaminated as a result of spillage.
- vii. Dispose of all the materials used in a clean-up into a yellow bag or bin.
- viii. Report the incident on Datix.

3. Returning pods

- a. Always return pods to the sending ward or department as soon as possible after delivery. Use the auto-return tube.
- b. If the auto-return is not working, report the fault to Estates promptly on 31300.

Occasionally it is necessary to send urgent paperwork between laboratories. It is acceptable for them to use one of their green pods for this purpose.

4.5 Pharmacy

- 1. Only green pods may be used for sending documentation to Pharmacy.
- 2. The pods are to be used for transporting paperwork only, not pharmaceuticals.
- 3. Keep the reception box clean and well padded with foam or bubble-wrap to absorb impact by pods.
- 4. Keep a regular check on the station to ensure that pods do not accumulate or back up into the tube network.
- 5. Always return pods to the sending ward or department as soon as possible after delivery.
- 6. If paperwork is received in a red pod, treat it as an untoward incident and report it on Datix. Inform the sending ward or department.
- 7. If specimens are received by Pharmacy, report the incident on Datix and send the pod to Microbiology who will forward the specimens to the correct laboratory. If a green pod has been used, Microbiology staff will disinfect it before auto-returning it to its home station.

4.6 Site Services

1. Maintenance

- a. Site Services staff are responsible for day-to-day maintenance of the pods and system. They have a 3-monthly maintenance schedule in place for the transfer unit and sending stations, and a maintenance contract with Swisslog.
- b. A dial-in modem facility called “Teamviewer” has been set up to allow Swisslog remote access to the system. This assists in complex fault finding situations, reducing the time the system is down.
- c. Site services’ responsibilities include:
 - i. the programming of pods and the replacement of damaged micro-chips as and when necessary
 - ii. the repair or replacement of worn or damaged pods.

2. De-contamination of the tube network

- a. In the event of a spillage being reported in the network, identify the nature and extent of the spillage. Seek advice from the Infection Control and Microbiology departments and assess the risk.
- b. Formalin must not be sent through the system but if a formalin spillage is suspected, seek advice from the Histopathology department.
- c. Check the system control to confirm the route of the suspected pod and all transactions thereafter. Isolate from use.
- d. Clean and disinfect the isolated section of the system following the local protocol.
- e. Report the incident on Datix.

3. Responding to Faults

Communication regarding the pneumatic tube system operation status is the responsibility of Site Services.

- a. **Out-of-hours** – The on-call Estates tradesman should be contacted to investigate the fault via the on-call Estates Engineer. If the system cannot be brought into service the tradesman will feed back to the Engineer. The on-call Engineer will contact the on-call hospital manager via switchboard and instigate the sample collection/delivery procedure managed by Hotel Services.
- b. **In-hours** – Estates trades staff will investigate the fault and report back to the Estates operational management team if the system is non-operational. Estates will issue an e-mail Trust wide alert and Serco will provide manual sample collection as per SLA.

1. Screw tight the primary specimen container and label it correctly with the patient's details.
2. Place the specimen container into an intact plastic specimen bag and seal the bag.
 - a. Samples from different patients should not be sent in the same specimen bag.
 - b. The request form, where applicable, will be either attached to the specimen bag or placed in the external pocket of the bag. **A request form must never be placed in the same bag as the specimen.**
3. Place the specimen in its bag into a pod. More than one specimen bag may be placed into the pod, but do not over-pack.
4. Ensure that both ends of the pod are properly closed.

6 Procedures to Follow – Sending a Pod

1. Insert the pod into the loading port.
2. Enter the numerical address of the destination (see 1.1.1). Use the star key to change the address if it has been entered incorrectly.
3. When the correct address is displayed, confirm by pressing the 'E' key. If the display shows 'Destination accepted', the pod will leave automatically when the system is free. This may take seconds or minutes.
4. Do not remove the pod after the transaction has been confirmed.
5. Wait until the green light is extinguished before loading another pod.
6. Any pods found belonging to other stations should be returned to their home address as soon as possible to prevent possible delays in sending urgent pathology samples.

7 Training and Education

HSE Guidance states:

"It is essential that all users of a pneumatic air tube transport system receive suitable and sufficient information, instruction and training to enable them to know the risks created by its use and of the precautions which are to be taken to control those risks."

(Safe use of pneumatic air tube transport systems for pathology specimens, HSE (1999))

In this Trust, training in use of the system is by means of:

1. Clinical induction (arranged by the Workforce Development Team)
 - a. A Powerpoint presentation for face-to-face sessions
 - b. An e-learning package, with assessment quiz

2. A laminated summary of instructions displayed in the laboratories, Pharmacy, and at all pod stations listed in 1.1.2., outlining the correct use of the system and key safety precautions described in this SOP. (See Appendices 1 to 3 at the end of this document)
3. Face-to-face training of Serco portering staff.

8 Monitoring and Assurance

- 8.1 The Pneumatic Tube System must be audited as part of the triennial Specimen Transport Audit by the Pathology Risk Assurance Group or their appointees.
- 8.2 The audit will be against the standards set by the Health & Safety Executive, UKAS, and the local practices set out in this SOP.
- 8.3 The audit will include:
 - Examining the condition of pods
 - Review of the use of the system (e.g., type of specimens being sent)
 - Review of training / education of staff
 - Review of incidents (incl. response times; system down-time)
 - Review of the risk assessment, this SOP (review alternate years unless triggered sooner), and the laminates.

9 Document Control

9.1 Approval

This document is approved by the Trust Health and Safety Committee and ratified by the Chair of that committee.

9.2 Dissemination and implementation

- 9.2.1 Following approval and ratification, this document will be published in the Trust's formal documents library and all staff will be notified through the Trust's normal notification process.
- 9.2.2 The document will be held electronically on the Pathology document control system, Q-Pulse, and disseminated to all Pathology staff for acknowledgment.
- 9.2.2 A hard copy will be held by each of the following departments: Combined Laboratories, Histopathology, Microbiology, Pharmacy, and Site Services.
- 9.2.3 Document control arrangements will be in accordance with *The Development and Management of Formal Documents* (accessible in the Trust Document Library), and will also meet the standards set by Clinical Pathology Accreditation.

9.3 Review

- 9.3.1 This document will be subject to review every two years, or before if amendments are necessary. Minor amendments may be made by the author, under delegated authority from the Chair of the Health & Safety Committee.
- 9.3.2 These must be ratified by the Health and Safety Committee Chair and must be reported, retrospectively, to the Committee.
- 9.3.3 Five or more minor amendments will constitute significant revision and trigger a review of the document. This will include a consultation with users.
- 9.3.4 All previous versions of the document will be retained electronically.
- 9.3.5 Following revision, hard copies of the new versions will be distributed to the five departments named above and their previous copies removed and destroyed.

10 | References

- Control of substances hazardous to health, HSE (2002).
- Safe working and the prevention of infection in clinical laboratories and similar facilities, HSE (2003).
- Safe use of pneumatic air tube transport systems for pathology specimens, HSE (1999).
- Transport of Infectious Substances: Best Practice Guidance for Microbiology Laboratories, Department of Health (2007).
- Specimen Transport Policy for University Hospitals Plymouth NHS Trust (2017).

Appendix 1

See page 17 for the laminated instructions placed at pod stations listed in 1.1.2.

Appendix 2

See page 18 for the laminated instructions placed at laboratory pod stations.

Appendix 3

See page 19 for the laminated instructions placed at the pharmacy pod station.

Ward Use of the Pneumatic Tube System

For further details see *Operation of the Pneumatic Air Tube Transport System* in the Trust Document Library.

Specimen types

The following must not be placed into the system:

Glass; sharps; formalin; specimens from patients with known or suspected TB or VHF, or recently given radioactive isotopes; samples for blood gas analysis; gynae-cytology samples; any large volume samples.

Packaging a specimen

- 1 Screw tight specimen container and label with correct patient details.
- 2 Place the container into an intact plastic specimen bag and seal the bag. Samples from different patients should not be sent in the same specimen bag.

The request form, where applicable, will be either attached to the specimen bag or placed in the external pocket of the bag. **A request form must never be placed in the same bag as the specimen.**

- 3 Place the specimen in its bag into a pod and ensure that both ends of the pod are properly closed. Do not over-pack the pod. Note:

RED pods are for pathology specimens only

GREEN pods are for pharmacy documents only

Note: Do not use damaged pods. Report concerns to Site Services on 31300.

Sending a pod

- 1 Insert the pod into the loading port.
- 2 Enter the numerical address of the destination. Use the star key to change the address if it has been entered incorrectly.
- 3 When the correct address is displayed, confirm by pressing the 'E' key. If the display shows 'Destination accepted', the pod will leave automatically when the system is free. This may take seconds or minutes.
- 4 Do not remove the pod after the transaction has been confirmed.
- 5 Wait until the green light is extinguished before loading another pod.

Laboratory Use of the Pneumatic Tube System

For further details see *Operation of the Pneumatic Air Tube Transport System in the Trust Document Library*.

Pod Reception

- 1 Keep the reception box clean and well padded with foam to absorb impact from pods. Foam must be wrapped in plastic to provide a waterproof covering.
- 2 Keep a regular check on the station to ensure that pods do not accumulate or back up into the tube network.
- 3 Always examine a pod's contents through the central Perspex area for signs of contamination. Then open the pod and remove specimen(s) carefully.
- 4 If there is no contamination, return pod immediately to its sender.
- 5 If there has been a leakage into the pod, follow the decontamination procedure described in the laboratory protocol.
- 6 If the leak has contaminated the outside of the pod:
 - a. **Do not enter any further pods into the system**
 - b. Contact Site Services immediately on 31300 and tell them, i) the receiving station number; ii) the sending station number (if known); iii) the type of spill (i.e. specimen type and suspected amount; iv) the time the contaminated pod arrived or was first noticed.
 - c. Out of hours contact Switchboard and ask for Duty On-call Site Services Supervisor. The affected part of the system will then be closed down.
 - d. Decontaminate the pod according to the laboratory's spillage policy.
 - e. Process or discard the specimen. (See laboratory policy for leaking samples)
 - f. In addition to a lab coat, always wear gloves when handling a pod or any contaminated part of the system.
 - g. Dispose of all clean-up materials in a yellow bag or bin.
 - h. Report the incident on Datix.

Returning Pods

- 1 Always return pods to the sending ward or department as soon as possible after delivery. Use the auto-return tube (if not working, report to Site Services on 31300)
- 2 Insert the pod into the loading port and enter the numerical address of the destination. Use the star key to change the address if it has been entered incorrectly.
- 3 When the correct address is displayed, confirm by pressing the 'E' key. If the display shows 'Destination accepted', the pod will leave automatically when the system is free. This may take seconds or minutes. Do not remove the pod.

Note: Do not use damaged pods. Report concerns to Site Services on 31300.

Pharmacy Use of the Pneumatic Tube System

For further details see *Operation of the Pneumatic Air Tube Transport System* in the Trust Document Library.

Notes:

- A. Only **GREEN** pods are to be used for sending documentation to Pharmacy.
- B. The pods are to be used for transporting documentation only, not pharmaceuticals.

Pod Reception

- 1 Keep the reception box clean and well padded with foam to absorb impact from pods.
- 2 Keep a regular check on the station to ensure that pods do not accumulate or back up into the tube network.
- 3 Always return pods to the sending ward or department as soon as possible after delivery.
- 4 If paperwork is received in a **red** pod, treat it as an untoward incident and report it on Datix. Inform the sending ward or department.
- 5 If specimens are received by pharmacy, send the pod to Microbiology who will forward the specimens to the correct laboratory. Report the incident on Datix. If a green pod has been used, Microbiology staff will disinfect it before auto-returning it to its home station.
- 6 **Note: Do not use damaged pods. Report concerns to Site Services on 31300.**