

FHS Lab Coat Guidelines/ Information

The lab coat processing program from soiled to clean is based on four critical components:

- Lab Coat Identification
- Service Times/Requisition – see appendix A (the requisitions is only to be used for labeling requests.
- Soiled Lab Coat Collection
- Clean Lab Coat return

The following are the procedures to be followed in ensuring the lab coats are returned within an acceptable period of time. If the following procedures are followed the turnaround time from soiled to clean is approximately one week.

There may be delays in the collection of soiled or delivery of clean lab coats within the 7 day period that may be beyond our control. Specifically they may include things like staffing shortages, equipment repairs at Mohawk Laundry, inclement weather and other. But every attempt will be made to return the product within a reasonable period of time.

A. Lab Coat Identification

It is critical all lab coats, both new and existing at the FHS are clean in order to be labeled. **Soiled lab coats will not be labeled.** If you currently have lab coats without labels you are encourage to have them washed and a “request for labelling” form completed using the procedure identified below.

In order to ensure the lab coats are returned to the proper area and to the proper staff they must contain the following information:

| | |
|---|-----------------------|
| Individuals name (if applicable) | <u>EXAMPLE</u> |
| Building/Lab Name and Location | Joe Smith |
| Account Number | MDCL 4064 |
| Hospital # | X-XXXXX-XXXX |
| | 5 |

Very Important!

It is essential all coats are labeled with a number 5, this is the identification for the McMaster site and is the only assurance they will be returned.

Clean/New lab coats needing labeling can be brought to the Customer Support Services linen room between the hours of 0600-1400 hrs, Monday through Friday. Yellow section, Level 1, Room 1T Linen.

B. Service Times/Service locations

Clean lab coat delivery and pick up of dirty occurs weekly between the hours of 1230-1330 as follows:

- Level 4 HSC-Tuesday
- MDCL-Wednesday
- Level 3 HSC-Thursday

Please ensure there is someone to allow access to your lab area during the service times.

C. Soiled Lab Coat Collection

Soiled lab coats are to be placed in the designated soiled collection hampers/containers located within your labs. See attached MDCL floor plan for location.

If the soiled pickup location is inaccessible (locked or no staff are present to linen porter during the designated service time, **lab staff** will be responsible for transporting clear bagged soiled lab coats to room 1T4 in the yellow section of the hospital next to HHS Receiving.

D. Clean Lab Coat Delivery

Clean lab coats are delivered at the same time soiled lab coats are collected (1230-1330 hrs). The clean lab coats will be delivered to each of the individual lab area. If your lab is inaccessible the lab coats will be hung on the door handle.

E. Customer Service

Every attempt will be made by the CSS leader to locate your lab coats if they are reported missing after 7 days. But if we are unable to locate your lab coat, you will be offered the opportunity to have your lab coat replaced by a gently used lab coat located in our surplus lab coat area.

If you have any concerns or questions please contact Al VanderVliet, Customer Support Services Porter Leader at extension 73082 or e-mail at vander@hhsc.ca.

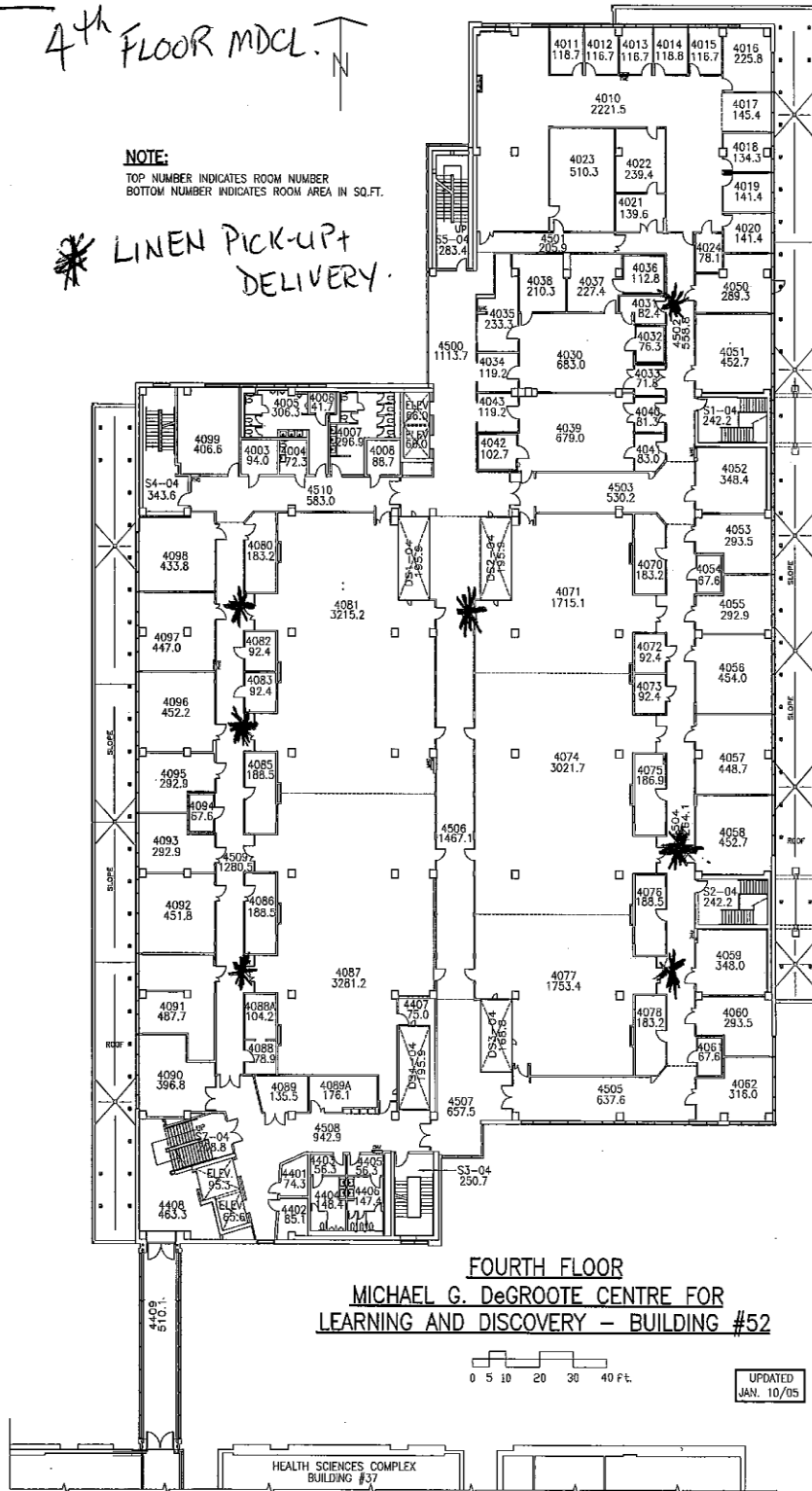
APRIL 16/13

4th FLOOR MDCL. ↑ N

NOTE:

TOP NUMBER INDICATES ROOM NUMBER
BOTTOM NUMBER INDICATES ROOM AREA IN SQ.FT.

* LINEN PICK-UP
DELIVERY *



FOURTH FLOOR
MICHAEL G. DeGROOTE CENTRE FOR
LEARNING AND DISCOVERY - BUILDING #52

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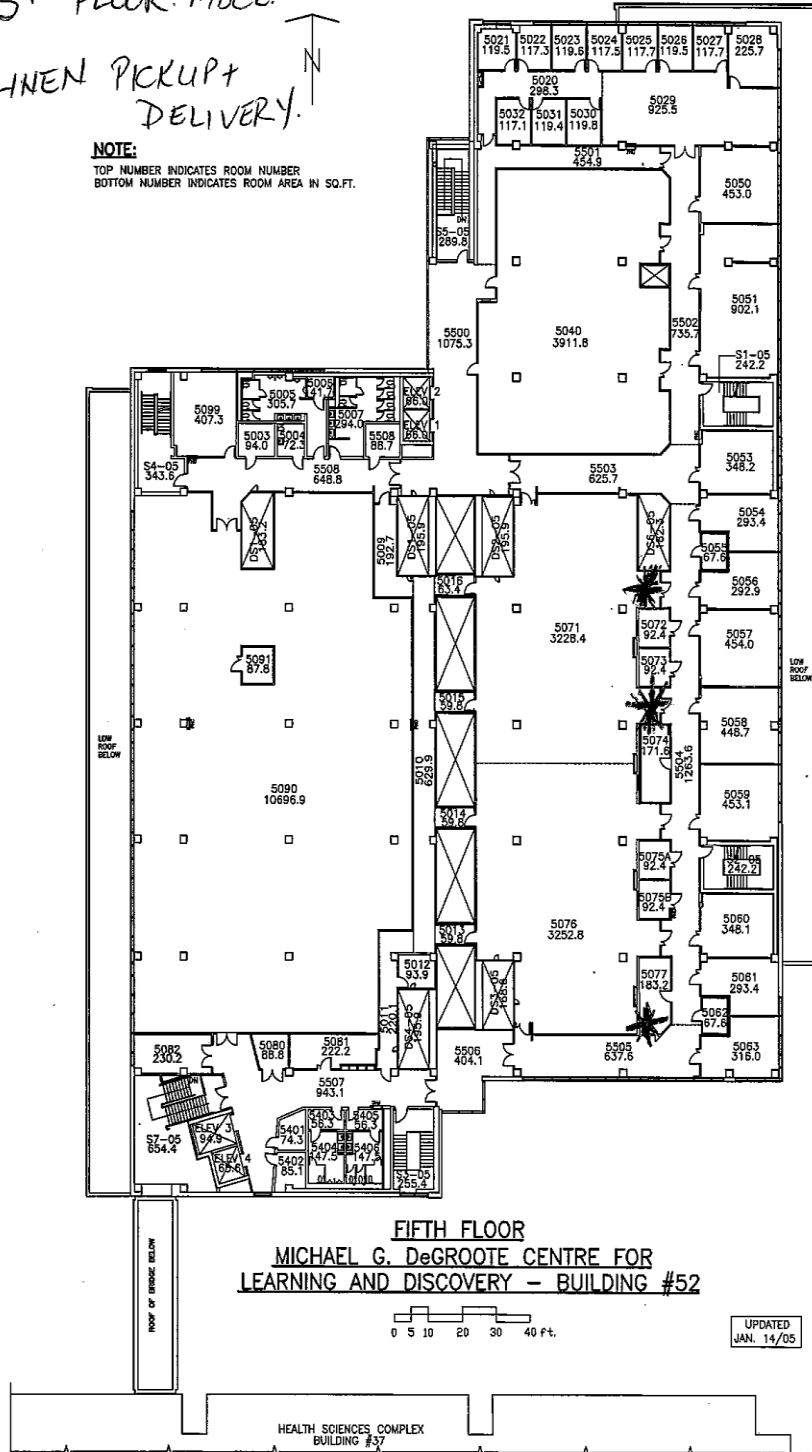
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JAN. 10/05

HEALTH SCIENCES COMPLEX
BUILDING #52

APR 16/13.
5TH FLOOR. MDCL.

★ LINEN PICKUP + DELIVERY.

NOTE:
TOP NUMBER INDICATES ROOM NUMBER
BOTTOM NUMBER INDICATES ROOM AREA IN SQ.FT.





Customer Support Services

Request for labeling

Customer Name: _____

Customer Phone (cell/work ext.): _____

Customer Email Address: _____

Site/Work Area: _____

Requisition Submitted by: _____

Submission Date: _____

Completion date: _____

General Information: _____

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