Two pairs of chemotherapy-tested gloves should be worn for all HD-handling activities. Change gloves every 30 minutes or immediately if damaged or knowingly contaminated. Gloves must be disposable and powder-free; made from nitrile, neoprene, or latex; and have a cuff long enough to cover the sleeves of the gown. Thickness will vary according to glove material. With chemotherapy preparation, use sterile gloves as the outer glove. (ASHP, 2006; Connor, 1999; Gonzalo-Garijo et al., 2012; NIOSH, 2008; Wallemacq, 2006)

Chemotherapy-tested gloves
The most recent standard for HD glove testing from the ASTM is D6978-05, which replaced the older (1999) standard of ASTM F739. The following are examples of products that meet the most recent ASTM D6978 standards. Gloves are tested for permeability by specific chemotherapy drugs. Ensure that the selected gloves have been tested against the types of chemotherapy used in practice. (Polovich, Power, Massoomi, & Connor, 2015)

The following list includes examples of gloves meeting ASTM D6978 standards, according to testing results and information from the manufacturer. The list is limited by space considerations and is not all-inclusive. Inclusion of a product or manufacturer does not imply endorsement by ONS or any other party.

Ansel, n.d.
*Micro-Touch® Nitra-Tex®*
Product Code: 6034010/6034014

Covidien, n.d.a
*ChemoPlus™ Latex Gloves*
Product Code: CT0191–CT0194

Kimberly-Clark Professional, 2014
*Purple Nitrile®*
Product Code: KC500
Two pairs of chemotherapy-tested gloves are recommended for use with the following activities (unless noted): (NIOSH, 2008, 2014)

**Receiving and unpacking HDs**

**Discontinuing infusions**

**Disposal of HDs**

**Sterile gloves for operating room use, sterile procedures, and sterile preparation**

**Handling excreta**

**Spill cleanup**

**Routine cleaning**

**Reconstituting, admixing, and manipulating HDs within PEC**

**Selecting Gloves for Practice**

When selecting gloves for practice, it is important to ensure that the product is functional and effective. Involve staff members in the product decision. Consider ordering samples of several types of chemotherapy-tested gloves, then have staff members trial the gloves in the clinical setting. Evaluate for quality, flexibility, durability, and other indicators identified by those using the gloves. Include price in the comparison.
Gowns used when handling chemotherapy are disposable and made of polyethylene-coated polypropylene or other laminate, lint-free, and low-permeability fabric. The gown has a solid front with long sleeves and tight/closed elastic or knit cuffs. No seams or closures are present on the front of the gown that could permit drugs to pass through. Gowns are designed for a single use and should not be re-applied after removal. (NIOSH, 2004a, 2008; USP, 2016)

Chemotherapy-tested gowns

Although no standard exists for testing gowns for HD permeability, some manufacturers have tested their product with several antineoplastic agents. Standards used in glove testing have been applied to test gown permeability and are available by request from the manufacturer. (Harrison & Kloos, 1999; Polovich et al., 2015; Polovich, 2011; Thompson, 2012)
The following list includes examples of gowns meeting NIOSH recommendations, according to testing results and information from the manufacturer. The list is limited by space considerations and is not all-inclusive. Inclusion of a product or manufacturer does not imply endorsement by ONS or any other party.

Selecting gowns for practice

As with glove selection, it is important to ensure that gowns are functional and effective. Encourage staff members to trial products that meet the NIOSH recommendations and practice needs.

Gown Use

Chemotherapy gowns must be worn during the following:

- Compounding (no longer than 3 hours)
- Administration
- Disconnection
- Disposal of HDs
- Spill clean-up
- Handling excreta (NIOSH, 2008, 2014)
Respiratory Protection

Respiratory protection is needed when cleaning HD spills or when there is a risk of exposure to HD aerosols or vapors through inhalation. Protection should be worn with intravesical administration or HIPEC. Respiratory protection should be selected based on the identified hazard. Fit-tested N-95 or N-100 particle masks are sufficient for most activities. For cleaning large spills, chemical cartridge-type respirators should be used. A standard surgical mask provides no protection and is not recommended. (Eisenberg, 2009; NIOSH, 2004b, 2006, 2015; USP, 2016)

<table>
<thead>
<tr>
<th>Activity</th>
<th>Type of Protection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Airborne particles</td>
<td>Fit-tested, NIOSH-certified N95 or more protective respirator</td>
</tr>
<tr>
<td>• Intravesical administration</td>
<td></td>
</tr>
<tr>
<td>• Spills that can be contained</td>
<td></td>
</tr>
<tr>
<td>within a spill kit</td>
<td></td>
</tr>
<tr>
<td>Gasses and vapors</td>
<td>Elastometric half-mask with a multi-gas cartridge and P100-filter. Replace filters</td>
</tr>
</tbody>
</table>
## Personal Protective Equipment for Use With Hazardous Drugs

<table>
<thead>
<tr>
<th><strong>Eye Protection</strong></th>
<th><strong>Section:</strong> Goggles are needed to provide protection against splashing to the eyes. Eyeglasses or safety glasses with side shields are not sufficient protection (NIOSH, 2008).</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Use:</strong></td>
<td>Potential for splashing, such as administration in the operating room, intravesicular administration, working above eye level, or when cleaning spills</td>
</tr>
<tr>
<td><strong>Section:</strong></td>
<td></td>
</tr>
</tbody>
</table>

## Eye Protection

<table>
<thead>
<tr>
<th><strong>Use:</strong></th>
<th>Face shields used to protect against splashing</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Section:</strong></td>
<td>Use face shield in combination with goggles to provide full protection against splashing to the eyes and face.</td>
</tr>
</tbody>
</table>

## Face Protection

<table>
<thead>
<tr>
<th><strong>Use:</strong></th>
<th>Used for protection from HD particulate or microbial contamination in clean rooms and other sensitive areas (NIOSH, 2008)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Section:</strong></td>
<td>Constructed of coated materials</td>
</tr>
</tbody>
</table>

## Head and Hair Cover

<table>
<thead>
<tr>
<th><strong>Use:</strong></th>
<th>Wear shoe covers when compounding HDs. Remove shoe covers when exiting the compounding room (NIOSH, 2008). Wear a second pair of shoe covers when entering the compounding area (USP, 2016).</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Section:</strong></td>
<td>Select disposable sleeve covers made of polyethylene-coated polypropylene or other laminate materials.</td>
</tr>
</tbody>
</table>

## Shoe Covers

<table>
<thead>
<tr>
<th><strong>Use:</strong></th>
<th>Provide protection from HD residue on arms that come in contact with surfaces of the BSC (NIOSH, 2008)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Section:</strong></td>
<td></td>
</tr>
</tbody>
</table>

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ASHP—American Society of Health-System Pharmacists; ASTM—American Society for Testing and Materials; BSC—biologic safety cabinet; C-PEC—containment primary engineering control; HD—hazardous drug; HIPEC—hyperthermic intraperitoneal chemotherapy; NIOSH—National Institute for Occupational Safety and Health; ONS—Oncology Nursing Society; PEC—primary engineering control; PPE—personal protective equipment; USP—U.S. Pharmacopeial Convention