**Guidelines for Management of Human Waste and Body Fluids in Long Term Care and Acute Care Facilities, 2nd Edition.**

<table>
<thead>
<tr>
<th>Situation</th>
<th>Appropriate management of human waste and body fluids in long term care (LTC) and acute care facilities is important for effective infection prevention and control practice.</th>
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<td>Background</td>
<td>Bedpans and commodes are used in LTC and acute care facilities for residents who are bedridden or who have limited mobility. Toilet collection/measurement containers (specimen hats) intercept stool and urine in the toilet or the commode. Hoppers have historically been installed in soiled utility rooms for the disposal of urine and stool from commode basins and bedpans as well as vomitus, other significant collections of bodily fluids and chemical products.</td>
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<td>Assessment</td>
<td>Human waste collection containers such as bedpans, commode basins and toilet hats which are not reprocessed properly can remain contaminated and lead to transmission of infectious agents. As well, manual emptying and cleaning of these items creates an occupational hazard for health care workers through exposure to bodily fluids, and aerosolization if spray wands are used.</td>
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**Recommendations**

1. Bedpan washer/disinfectors or macerators are preferred over manual cleaning and disinfection of bedpans and commode basins\(^1,2\).

2. Do not empty bedpans or commode basins into sinks or toilets\(^1\). Empty bedpans or commode buckets into the hopper, or place into a flusher/disinfector or macerator\(^2\).

3. Manual rinsing of bedpans, commode basins or toilet hats should not occur in the resident's/patient's bathroom or room. Hygienic bags are an option to reduce overall contamination of the bedpan or commode.

4. Do not leave soiled human waste collection containers to pile up on counters or in resident washrooms. Each facility must ensure that each care unit is able to handle the volume of bedpans, commodes and toilet collection containers requiring reprocessing\(^1\).

5. Cover the human waste collection containers for transport. Solidifiers may minimize the risk of spills\(^2\).

6. Reusable bedpans and commodes should be cleaned and disinfected with a low-level disinfectant after each use on the same resident/patient.

7. At a minimum, low level disinfection should occur between uses of reusable bedpans\(^3\), commodes\(^3\) or specimen hats on different residents/patients.

8. Soiled utility rooms should contain a clinical sink (hopper) or other equivalent flushing rim fixture\(^3\).

9. Spray wands should not be used. Disconnect any spray wands which are currently installed and do not install new ones. Rinsing hoses may remain connected as they do not aerosolize materials.

10. Preventive maintenance and verification of any operational parameters for equipment such as bedpan
washer/disinfectors, used for bedpan management must occur on a regular and ongoing basis.

11. Appropriate personal protective equipment must be worn whenever staff handle soiled commodes, bedpans or toilet hats.

12. When dealing with soiled linen, solid fecal matter that can be removed with a gloved hand should be disposed into a toilet, bedpan or hopper. Do not remove excrement by spraying with water.

13. In the event of suspected or confirmed case of *Clostridium difficile* infection, the organization should refer to the document, *Best Practice Guidelines for the Prevention & Management of Clostridium difficile Infection In Prehospital, Acute & Continuing Care*, by Infection Prevention and Control Nova Scotia for guidance.

14. Commercial dishwashers are not designed for cleaning and sanitizing bedpans or commodes.

### References


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