Name of Policy:	Disinfecting Procedure for Mobile Tablets	THE UNIVERSITY OF TOLEDO
Policy Number:	3364-109-EQP-307	
Department:	Infection Control Hospital Administration Medical Staff	
Approving Officer:	Director, Infection Prevention Chief Medical Officer	
Responsible Agent:	Infection Control Practitioner	
Scope:	The University of Toledo Medical Center	Effective Date:03/01/2023Initial Effective Date:04/08/2020
New policy proposal Minor/technical revision of existing policy X Major revision of existing policy Reaffirmation of existing policy		

(A) Policy Statement

Mobile tablets and other handheld scanning devices are becoming more popular in the healthcare environment; however, they may carry nosocomial pathogens due to the various ports and crevasses.

(B) Purpose of Policy

To ensure that appropriate cleaning and disinfection is performed as required to aid in preventing the transmission of infection, and to ensure actions are taken to keep equipment maintained in optimal functionality and cleanliness.

(C) Procedure

- 1. Disinfecting Products & Equipment Needed:
 - (a) Mobile tablets and devices will be cleaned and disinfected at point of use with a hospital approved EPA registered disinfectant.
 - (b) Perform hand hygiene prior to donning gloves.
 - (c) Don gloves according to manufacturer's recommendations prior to using disinfectant wipes.
- 2. Select disinfectant wipe per manufacture instruction for the selected device and wipe according to the manufacturer's instructions for use.
 - (a) Take precautions when using electronic device in Contract Precautions-D rooms as bleach in not always recommended for all products.
- 3. Prior to disinfection, unplug device from power source.
- 4. Disinfect the mobile device gently wiping the surfaces.
 - (a) Do not saturate or submerge in cleaning products.
 - (b) Disinfect device before and after use on each patient.
- 5. Perform hand hygiene before and after gloving and after disinfection completed.

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References:

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/s/ 02/27/2023 Michael Ellis, M.D. 02/27/2023 Date			
Michael Ellis M.D.			
Chief Medical Officer			
$\frac{/s}{2}$			
Ann Keegan Date Director Infection Prevention			
Review/Revision Completed By: Infection Control Committee			
Next Review Date: 03/2026			
Policies Superseded by This Policy:			