


Name of Policy: <u>Equipment Cleaning</u>		
Policy Number:	3364-109-EQP-306	
Department:	Infection Control Hospital Administration Medical Staff	
Approving Officer:	Chair, Infection Control Committee Chief of Staff Chief Medical Officer	
Responsible Agent:	Infection Preventionist	
Scope:	The University of Toledo Medical Center and its Medical Staff	
		Effective Date: Initial Effective Date: 5/16/2005
<input type="checkbox"/> New policy proposal		<input type="checkbox"/> Minor/technical revision of existing policy
<input checked="" type="checkbox"/> Major revision of existing policy		<input type="checkbox"/> Reaffirmation of existing policy

(A) Policy Statement

Equipment cleaning will be managed after patient use by Environmental Services, Central Distribution Services ~~Department~~ and the Sterile Processing Department. It is the responsibility of all healthcare staff using multi-patient equipment (e.g., workstations on wheels) to manage, with manufacturer-approved products, the cleaning and disinfection of these devices to minimize risk, prevent cross-contamination, and ~~the~~ prevent the spread of pathogens within the facility.

(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 for optimal functionality and cleanliness. Disinfecting high touch objects decreases the potential of cross-contamination to patients and healthcare staff.

(C) Procedure for Inpatient areas

- (1) Moveable equipment (e.g., IV poles, wheelchairs, blood pressure monitors) must either be sent to Central Distribution Services ~~department~~ for cleaning and disinfection or must be wiped down at point of use with a hospital-approved disinfectant. Gloves are worn according to manufacturer recommendations when using disinfectant wipes.
- (2) Beds must be wiped down with an approved hospital disinfectant after patient discharge or during a patient's stay if gross contamination occurs. Wiping all "high touch" or "touchable" surfaces and ~~/~~equipment during routine daily cleaning is essential.
- (3) When cleaning non-critical equipment, the disinfectant should be applied according to manufacturer recommendations and must allow adequate dry time in order to meet this recommendation (located on the product label).
- (4) Follow the Infection Control Precautions Policy (3364-109-ISO-404) for choosing which disinfectant is most appropriate (e.g., use bleach products for rooms labeled Contact-D isolation, unless product manufacturer states otherwise).
- ~~(4) Non-invasive ~~U~~Ultrasound Probes that come into direct contact with blood or bodily fluids must be processed using High-Level Disinfection (HLD) to prevent cross contamination of infectious disease. All Ultrasound Probes ~~High Level Disinfected (HLD)~~ shall be. Ensure probe is cleaned immediately after the point of use with device manufacturer approved disinfectant wipe (see HLD~~

- Trophon Protocol). Probe must be taken to the Sterile Processing Department for further High Level Disinfection (HLD).
- (5)
- (6) All other equipment requiring High Level Disinfection (HLD) will be processed according to facility protocol(s) or sent to Endoscopy or the Sterile Processing Departments for processing (see 3364-139-1-03 High Level Disinfection).
- ~~Note: HLD requires a separate protocol or policy as well as annual staff competency review.~~
- (7) All equipment labeled as “single use” must be disposed of or sent for reprocessing when part of an FDA approved reprocessing/sustainability program (e.g., pulse oximetry). (see 3364-100-53-04 Reprocessing Single Use Medical Devices – Third Party Provider)
- ~~(8) All equipment present in the patient room upon patient discharge is cleaned by multiple disciplines during the discharge room clean process. For example, Environmental Services cleans feeding pumps, traction units, in-room computers & EPC pumps. Nursing during the discharge room clean discards suction canisters, cleans heating pads and cooling equipment. Respiratory Therapy removes and cleans ventilators, CPAP & BiPAP units. This includes the computers in room and the associated keyboards, mice, and bar scanners.~~
- (8)
- (9) Equipment in isolation precaution rooms will be cleaned according to the [Infection Control Precautions Policy \(3364-109-ISO-404\)](#).
- (10) Lead Aprons are to be cleaned and disinfected with hospital approved disinfectant when visibly soiled according to manufacturer recommendations.
- (11) Healthcare employees and office-ancillary staff using the workstations of wheels (WOW) and all WOW accessories (e.g., keyboards, mice, bar code scanners) are responsible for cleaning and disinfection of this equipment for intermittent cleaning of the devices, including but are not limited to, computer keyboards, mice, and bar code scanners before and after use in patient care areas using the following process:
- (a) Clean and disinfect the WOW ~~as needed~~ when visibly soiled.
 - (b) Clean and disinfect the A-WOW and its ancillary equipment when that enters in patient rooms or patient care areas, prior to entry and upon exiting the patient room/care area, using a hospital approved disinfectant (e.g., PDI Sani wipes, bleach wipe for C-diff).
 - (b) — specifically the keyboard, barcode scanner, mouse, and other high touch surfaces on the computer, will be cleaned and disinfected by the “user” prior to entry and upon exiting the patient room/care area, using a hospital approved disinfectant (e.g., PDI Sani wipes, bleach wipe for C-diff)
 - (i) Staff must follow all safety precautions and adequate dry time for product used.
 - (c) Perform hand hygiene before and after ~~All staff must clean their hands after patient contact and prior to~~ using the computer equipment. WOWs.
 - (d) Computer screen are to be cleaned using ~~Only use appropriate~~ hospital approved cleaner ~~on the computer screen~~ (e.g., product with 70% isopropyl alcohol).
- (12) Glucometer cleaning and disinfection must follow a 2-step process:
- (a) Cleaning with the first wipe to ensure all soil and organic matter are removed. Waiting for the proper contact/dwell time is not required in this step.

- (b) Disinfect with the second wipe to destroy pathogenic microorganisms, ensuring the surface of the Glucometer remains moist for the specified contact/dwell time.
- ~~(a)(c)~~ Clean and disinfect the area around the test strip port, the meter display (touchscreen) and the meter housing (entire meter surface).

(D) Procedure for Outpatient/Diagnostic areas

- (1) Moveable equipment (e.g., IV poles, Blood Pressure Monitors) must either be sent to Central Distribution Services~~Department~~ for cleaning and disinfection or must be wiped down at a determined routine frequency in the clinic (at least once a day) with a hospital-approved disinfectant or disinfectant wipe. Gloves may be worn when using disinfectant wipes unless manufacturer recommendations state otherwise.
- (2) If equipment becomes contaminated with bodily fluids or is in constant contact with the patient's skin, it must be wiped down at the point of use with a hospital-approved disinfectant. Gloves may be worn when using disinfectant wipes unless manufacturer recommendations state otherwise.
- ~~(2)(3)~~ Ultrasound probes that come into contact with blood or body fluids must be High Level Disinfected (HLD). Ensure probe is cleaned immediately after point of use with disinfectant wipe. Probe must be taken to the Sterile-terile Processing Department for further High Level High-Level Disinfection (HLD).
- (4) Glucometer cleaning and disinfection must follow a 2-step process:
 - (a) Cleaning with the first wipe to ensure all soil and organic matter are removed. Waiting for the proper contact/dwell time is not required in this step.
 - (b) Disinfect with the second wipe to destroy pathogenic microorganisms, ensuring the surface of the Glucometer remains moist for the specified contact/dwell time.
 - (c) Clean and disinfect the area around the test strip port, the meter display (touchscreen) and the meter housing (entire meter surface).
- ~~(3)~~ Glucometers must be wiped down at point of use with a hospital-approved disinfectant due to the risk of contact with blood.
- ~~(4)(5)~~ Exam tables, chairs, and pillows should be wiped with hospital-approved disinfectant wipes after each patient use.
- ~~(5)(6)~~ Wheelchairs will be cleaned weekly or when visibly soiled.
- ~~(6)(7)~~ Lead Aprons are to be cleaned and disinfected with hospital-approved disinfectant when visibly soiled according to manufacturer recommendations.
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- (8) Healthcare employees and ancillary staff using the workstations of wheels (WOW) and all WOW accessories (e.g., keyboards, mice, bar code scanners) are responsible for cleaning and disinfection of this equipment before and after use in patient care areas.
 - (e) Clean and disinfect the WOW when visibly soiled.
 - (f) Clean and disinfect the WOW and its ancillary equipment when in patient rooms or patient care areas, prior to entry and upon exiting the patient room/care area, using a hospital approved disinfectant (e.g., PDI Sani wipes, bleach wipe for C-diff).
 - (j) Staff must follow all safety precautions and adequate dry time for product used.
 - (g) Perform hand hygiene before and after using the WOWs.

- (h) Computer screen are to be cleaning using appropriate hospital approved cleaner (e.g., product with 70% isopropyl alcohol).
- ~~(7) Healthcare employees and office staff using the workstations of wheels (WOW) are responsible for intermittent cleaning of the devices, including but are not limited to, computer keyboards, mice, and bar code scanners before and after use in patient care areas using the following process:
 - ~~(a) Clean and disinfect the WOW as needed when visibly soiled.~~
 - ~~(b) A WOW that enters a patient room/care area, specifically the keyboard, barcode scanner, mouse, and other high touch surfaces on the computer, will be cleaned and disinfected by the "user" prior to entry and upon exiting the patient room/care area, using a hospital approved disinfectant (e.g., PDI Sani wipes, bleach wipe for C-diff)~~
 - ~~(i) Must follow all safety precautions and allow for adequate dry time of product.~~
 - ~~(c) All staff must clean their hands after patient contact and prior to using the computer equipment.~~
 - ~~(d) Only use appropriate hospital approved cleaner on the computer screen (e.g., product with 70% isopropyl alcohol).~~~~

References:

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Policies Superseded by This Policy: 31:EQP-301	