106.061 Cleaning and Disinfection of Patient Care Equipment

POLICY:

Cleaning, disinfection and sterilization of patient care equipment at Ventura County Medical Center/Santa Paula Hospital and Ambulatory Care clinics is done in accordance with published guidelines and criteria. The manufacturer's instructions for cleaning, disinfection and sterilization must be followed. All personnel performing cleaning, disinfection and sterilization of patient care equipment must wear appropriate Personal Protective Equipment (PPE) for the task.

PROCEDURE:

I. GENERAL INFORMATION

Spaulding Classification of Patient Care Items and Equipment

A. Critical Items
   1. Must be sterile because these objects enter sterile tissue or the vascular system.
   2. Will be purchased as sterile or sterilized by approved methods as described in Surgery Department policies for Sterile Processing.
      a. Items purchased as sterile must be used before expiration date, if one is given. Inspect package integrity before use.
      b. Shelf life for items sterilized in the hospital is event-related or set date by manufacturer. Sterility is verified by intact wrappers, chemical package indicators, and records of sterilization equipment and parametric monitoring.
   3. Examples include, but are not limited to, surgical instruments, invasive devices and surgical implants.

B. Semi-Critical Items
   1. Semi-critical items come in contact with mucous membranes or non-intact skin.
   2. Examples include, but are not limited to, endoscopic equipment, cystoscopes, diaphragm fitting rings, respiratory and anesthesia equipment, esophageal pH probes, and vaginal ultrasound probes.
   3. Reprocessing by high level disinfection is documented by the clinical area doing the high-level
disinfection of equipment.

C. Non-Critical Items
   1. Non-critical items come in contact with intact skin, but not mucous membranes.
   2. **Must be cleaned, followed by low-level disinfection, between patient uses.**
   3. Examples of non-critical equipment are: blood pressure cuffs, portable pumps, and crutches.
   4. Examples of non-critical surfaces are: bed rails, bedside tables, and toys.

II. Soiled and/or Contaminated Items or Equipment
   1. Critical and semi-critical items or equipment must be cleaned, decontaminated and sterilized in accordance with Surgery policies and procedures.
   2. Non-critical items or equipment must be cleaned and decontaminated, followed by disinfection with an approved hospital intermediate-level disinfectant.
   3. Certain types of infections, such as Clostridium difficile, will warrant the use of an approved hospital bleach-based disinfectant for non-critical items or equipment. After drying, any salt residue can be wiped off with a damp cloth.
   4. **Respiratory equipment shall be cleaned and disinfected with intermediate-level disinfectants when used with cystic fibrosis patients.**

III. Definition of Terms
   A. **Cleaning** is the removal of organic and inorganic material from objects and surfaces. This is normally accomplished by using detergents or enzymatic products. Thorough cleaning is necessary before disinfection and sterilization because organic and inorganic materials that remain on the surface of instruments interfere with the effectiveness of these processes.
      1. Before placing in the biohazard bin, all forceps, clamps, etc should be placed in the open position.
      2. All items should sprayed with enzymatic cleaner until they are thoroughly wet or dripping with cleaner or according to the manufacturer’s instructions for use.
      3. If the biohazard bin is not picked up within four (4) hours, for locations on the hospital license or within 72 hours per manufacturer’s instructions for use at all other clinics, Sterile Processing should be contacted to pick up bin.
   B. **Decontamination** is the use of physical or chemical means to remove, inactivate, or destroy microorganisms on a surface or item. The selection and use of cleaning equipment, chemicals and exposure times suggested by the manufacturer should be followed to prevent damage to the items.
   C. **Disinfection** is a process that reduces the number of microorganisms (with the exception of bacterial spores) on inanimate objects. This is done most often by use of an approved hospital detergent/disinfectant.
      1. **High-level disinfection** destroys all forms of microbial life except for bacterial spores. This is usually performed by chemicals or wet pasteurization. Semi-critical items that touch mucous membranes should receive high-level disinfection, i.e., flexible endoscopes, laryngoscopes and other similar instruments.
      2. **Intermediate-level disinfection** utilizes hospital-grade disinfectant, or an EPA-approved tuberculocidal cleaner/disinfectant.
3. **Low-level disinfection** will inactivate most vegetative bacteria, some fungi, and some viruses, but cannot be relied upon to inactivate resistant microorganisms.

D. **Sterilization** is the complete destruction of all microbial life. It is accomplished by either a physical or chemical process such as steam under pressure, dry heat, or plasma hydrogen peroxide. All critical items must be sterile.

IV. **GENERAL POLICIES**

A. Only clean equipment is stored in the clean equipment area.

B. Only soiled equipment is stored in the soiled or “dirty” utility room.

C. High-touch surfaces in patient rooms are cleaned at regular intervals, at least daily and upon discharge or transfer of the patient, as directed in the Environmental Services Policy and Procedure Manual.

D. Infant beds and cribs are cleaned on their respective units by Environmental Services according to manufacturer's recommendations and the Environmental Policy and Procedure Manual.

E. Agents and/or procedures used for cleaning, disinfecting, or sterilizing equipment shall be approved by Infection Control Committee.

F. In the event that non-critical items are needed immediately, they may be cleaned on the nursing floor by staff using hospital approved detergent/disinfectants.

G. It is the responsibility of the healthcare worker to make certain that only clean and disinfected equipment will be used between patients.

H. If it is unclear whether patient care equipment has been cleaned, it must be cleaned before patient use.

I. Clean, disinfected equipment is either bagged or tagged.

V. **PROCESS**

A. Patient Care Equipment managed by patient care units or services must be wiped with a hospital approved detergent/disinfectant **between** patients and when visibly soiled.

B. Manufacturer's Recommendations should be followed.

C. Use the Infection Control Committee List of Approved Disinfectants.

D. Grossly soiled items (visible blood and body fluids) must be cleaned prior to disinfection.

E. If a re-usable blood pressure is used, it must be disinfected between patients.

F. If a piece of equipment needs repair by the Biomedical Department, the equipment must be cleaned and disinfected prior to being sent to the Biomedical Department.

G. Equipment used by specialty departments in patient care areas must be cleaned by department personnel between patient use, when visibly soiled and before entering patient care areas. These items include but are not limited to:
   - portable x-ray machines
   - equipment carts
   - EEG machines
   - EKG machines

H. Clean equipment will be picked up from the clean side of the Sterile Processing Department.
I. Clean, disinfected equipment must be tagged or bagged to denote "ready for use."

![Clean Tag](image)

J. **Surfaces in Patient Rooms** will be cleaned daily and upon discharge/transfer by Environmental Services according to Environmental Services Policy and Procedure Manual.

K. In the absence of a manufacturer’s cleaning and disinfection instructions:
   1. Consult Biomedical Department and Infection Prevention and Control
   2. Clean non-critical medical equipment surfaces with a mild detergent.
   3. Cleaning will be followed by an application of an Infection Control Committee approved EPA registered disinfectant according to disinfectant label instructions.

VI. **HOSPITAL-APPROVED AGENTS FOR CLEANING AND DISINFECTION:**
   A. Infection Prevention and Control Committee, Approved List of Disinfectants – see below.
   B. Environmental Services: See Environmental Services Policy and Procedure Manual

**REFERENCES:**
A. CDC Guideline for Disinfection and Sterilization in Healthcare Facilities
B. CDC Guidelines for Environmental Infection Control in Healthcare Facilities
C. Occupational Safety and Health Administration Law
D. Central Supply Services Policy and Procedure Manual
E. Environmental Services Policy and Procedure Manual
F. Hospital Epidemiology and Infection Control, 3rd edition, Mayhall.
G. APIC Text of Infection Control and Epidemiology

### Infection Control Committee-Approved Disinfectants

**Brand Name:** **PDI Sani Cloth AF3**
- Intermediate level disinfectant
- Use for routine disinfection
- Use for disinfection post cleaning of blood and body fluids (CAL-OSHA requirement)
- **Three (3) minute contact time**

**Brand Name:** **PDI Super Sani Cloth**
- Intermediate level disinfectant
- Use for cleaning and disinfection
- Use for disinfection post cleaning of blood and body fluids (CAL-OSHA requirement)
- Can be used on equipment requiring alcohol based products
Two (2) minute contact time

Brand Name: **CLOROX Healthcare Bleach Germicidal Wipes** Intermediate level disinfectant
Use for disinfection if blood and body fluids present (CAL-OSHA requirement)
Use for disinfection when C difficile present (Contact Isolation with the brown colored sign)

Three (3) minute contact time

Semi-critical device (endoscope) (e.g. contact to mucus membranes, non-intact skin) high level disinfection solutions:
- Cidex
- Rapicide OPA
- Paracetic Acid

Brand Name: **Prepyme® Forever Wet**
Instrument Transport Humectant Pre-Cleaner
Used to prevent the adhesion of bio-burden to surgical instruments and scopes Neutral Ph so safe for all instruments and scopes
Keeps instruments moist for up to 72 hours

**NOTE:** For all listed disinfectants, the manufacturer's directions for both the device and the solution must be followed.

All revision dates: 3/21/2019, 5/1/2016, 10/1/2013, 10/1/2011

### Approval Signatures

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<tr>
<th>Step Description</th>
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