Purpose:

To communicate the decontamination process required for the use of BLS equipment that ensures the safest possible learning environment for individuals taking their training with Covenant Health.

Preventative Measures:

Adherence to hand hygiene minimizes the risk of communicable disease transmission.

Procedure:

Perform Hand Hygiene Prior To Entering CPR Class

At the registration desk prior to entering the CPR class each participant must clean their hands using an alcohol-based hand rub (i.e. Microsan).

To use: Use alcohol based hand rub if hands are not visibly soiled. No hand towels required. Dispense a thumbnail size (1-2 pumps) into palm. Briskly rub hands together in a regular washing motion, e.g. between fingers, around nails and on back of hands for 15-20 seconds.

Procedure on when to clean CPR Equipment:

1. BLS equipment should be decontaminated following each class.
2. Students should be given every opportunity to practice skills before testing at the end of class; if their manikin has been taken away and decontaminated then they will not have the benefit of this additional practice time.
3. Students should be tested using the manikin that they have been working with during the class. Sharing a testing manikin increases the risk of cross contamination.
4. Only clean equipment should be placed in the carrying containers for transportation. If equipment cannot be decontaminated at the teaching site then it should be placed in garbage bags for transportation to the site where decontamination will occur.

Procedure for “Re lunging” manikins

1. The only way to be certain that the lungs are clean in a manikin is to take them from the bag and put them in the manikin at the time of assembly just prior to the class. “Re lunging” manikins after they have been decontaminated, so they are ready for the next class date, increases the risk for cross contamination. This is particularly important for “Buddy dolls” and other manikins that are left out between classes as the lungs become subject to airborne contaminants. Training manikins, such as the ACTAR D-fib that are stored in contained bags may be considered exempt.
2. The training lungs that are used in this program are recyclable. In the event that too many manikins are assembled for the number of participants, wearing gloves, please disassemble the manikins and return the components to the storage containers for use in a subsequent class. There is no need to throw away training ports, filters and lungs that have not been used as long as they are handled appropriately by the instructor and not put back in original containers.
Procedure for Bag Valve Masks That Can Not Be Taken Apart

1. BVMs that do not come apart for cleaning, pose a risk of cross contamination if they are used on “contaminated” manikins. This type of BVM should only be used on clean manikins. If using BVM’s that cannot be disassembled, additional manikins should be assembled and made available for practice purposes during the BVM/advanced airway segments.

Procedure for Replacing AED pads

1. Once the AED pad loses its ability to stick or has become visibly dirty it must be replaced. It is the responsibility of the instructor to ensure that these pads are replaced at the end of the instructional class.

DECONTAMINATION OF CPR EQUIPMENT FALLS INTO THREE CATEGORIES:

CATEGORY ONE: Equipment that can be decontaminated using an acceptable cleansing wipes
(Note – If not using ACTAR manikins then follow manufacturer’s guidelines for manikin decontamination.)

Items in this category:

1. AED simulators
2. Adult ACTAR D-fib Manikin torsos/blue chest plates/heads/ mouth pieces
3. Infant ACTAR manikin torso/ blue chest plate/ orange lung connector
4. Pocket masks & cases
5. Bag valve masks (BVM) – one way valve assembly must be disassembled for cleaning
6. Floor practice mats
7. Containers holding the equipment
8. Mats

CATEGORY TWO: Equipment that cannot be reached with a disinfectant wipe
(Note – If not using ACTAR manikins then follow manufacturer’s guidelines for manikin decontamination.)

Items in this category:

1. Infant Head

CATEGORY THREE: Equipment that cannot be disinfected and reused

Items in this category:

1. One Way Valves
Cleaning Procedure for CATEGORY ONE and CATEGORY TWO using Accel PREVention Wipes 6 x 7 and Accel PREVention Ready to Use Solution

(Note – If not using ACTAR manikins then follow manufacturer’s guidelines for manikin decontamination.)

Personal Protective Equipment (PPE):

Wear protective gloves during manikin disassembly and decontamination. Gloves should be changed if torn or soiled. Perform hand hygiene after glove removal.

Dilutions:

Product is ready to use ready to use and does not require dilution.
Shelf Life: 24 months from the date of manufacture.
Expiry date is listed on the label.

Material Safety Data Sheet (MSDS):

Accel PREVention MSDS is located in the CPR Communication Binder.

Equipment Required:

- Accel PREVention wipe 6x7
- Accel PREVention RTU (ready to use) – 1 litre spray bottle
- Gloves
- Pail
- Water
- Disposable Cloths/Wipes
- Apron

Cleaning Procedure:

1. Gather all equipment, cleaning solutions and materials required to clean the items or surfaces.
2. Wear protective gloves during manikin disassembly and decontamination. Personal protective equipment should be changed if torn or soiled.
3. Disassemble manikins according to manufacturer’s directions. Masks must be cleaned inside and out. Masks that are difficult to wipe down due to size and condition should then be considered to fall in the second category and be sprayed. Make sure the one way valve is removed from all masks and discarded prior to cleaning.
4. Visible or gross soil present and/or blood or body fluid spills must be removed prior to cleaning and disinfection. (see procedure below)
5. Clean all storage containers prior to beginning the cleaning process.
6. For category one equipment, to clean and disinfect all surfaces, apply Accel PREVention wipes and allow surface to remain wet for 3 minutes to achieve the Batericidal, General Virucide, Fungicidal, and Tuberculocidal claims.
7. For **category two equipment**, to clean the inside cavity of the infant head apply Accel PREVention RTU using a spray nozzle. Place the nozzle inside the infant head and cover the opening where the nozzle was inserted as well as the mouth of the infant with a wipe to prevent any aerosols from escaping. Spray sufficient disinfectant to wet the entire inside cavity of the infant head so that it will remain wet for 3 minutes.

8. Change disposable wipes when soiled or when moving to a new ACTAR.
9. Disposable wipes should be disposed as regular waste in garbage bags.
10. Remove and discard gloves.
11. Perform hand hygiene.

**Special Note of Consideration:** If you notice a build up of detergent on the equipment due to the mild detergent found in Accel PREVention it is recommended that all equipment be wiped down with a damp cloth. This should be done after the 3 minute disinfection period has been completed.

**Cleaning Procedure when Blood or Body Fluids are Visible:**

1. Perform hand hygiene.
2. Put on gloves.
3. Apply Accel PREVention RTU to the blood/body fluid spills - wait 30 seconds.
4. Blot up the blood/body fluids with disposable wipes. Dispose of paper towel in plastic-lined waste receptacle.
5. Spray or wipe the surface with Accel PREVention RTU or Wipes – wait 3 minutes. Wipe dry with disposable paper towel. Discard paper towel as above.
6. Remove gloves and dispose in plastic-lined waste receptacle.
7. Perform hand hygiene.