



Patient Care Equipment or Device Cleaning and Disinfection Protocol

This document has been developed in accordance with current applicable infection control and regulatory guidelines. It is intended for use as a guideline only. At no time should this document replace existing documents established by the facility unless written permission has been obtained from the responsible facility manager.

PREFACE

The overall goal of infection prevention practices is to eliminate the risk of the transmission of pathogens between patients and between patients and the health care worker. The following recommendations should be implemented when cleaning and disinfecting. These procedures follow the Spaulding Classification of the level of care required for surfaces and instruments.

Non-critical equipment is devices or equipment that comes in contact with intact skin but not mucous membranes. Intact skin acts as an effective barrier to most microorganisms. Examples of non-critical equipment are bedpans, blood pressure cuffs, crutches, and patient care equipment like lifts, keyboards and monitors. There is virtually no risk of transmitting infectious agents to patients via non-critical items; however, these items could potentially contribute to secondary transmission by contaminated hands of Health Care Workers or by contact with medical equipment that will subsequently come in contact with patients.

PREPARATION

Although microorganisms are ubiquitous in health care settings, inanimate materials are seldom responsible for the direct spread of infections. Cleaning and maintenance prevent the build-up of soil, dust or other foreign material that can harbour pathogens and support their growth. Cleaning and disinfection of patient care equipment or devices after each use is important in limiting the transmission of organisms.

Appropriate personal protection should be taken for those responsible for the decontamination of a room or area.

PROTECTIVE BARRIERS

1. Disposable gloves. Gloves should be changed as required, i.e., when torn, when hands become wet inside the glove or when moving between patient rooms.
2. Household gloves can be worn, but they must be discarded when the cleaning is complete.
3. Protective Eye wear (goggles, face shield or mask with eye protection)
4. Masks (surgical or procedural masks sufficient)
5. Gowns

PRODUCTS

Accelerated Hydrogen Peroxide Surface Disinfectant (sold as 7% Virox 5 Concentrate, Virox 5 Ready-To-Use and/ or Virox 5 Wipes, 7% PerCept Concentrate, PerCept RTU or PerCept Wipes, 7% Accel Surface Cleaner Disinfectant Concentrate, Accel RTU or Accel Wipes) and 0.5% Accelerated Hydrogen Peroxide Tuberculocidal Surface Disinfectant (sold as Accel TB RTU or Accel TB Wipes)

1. Preparation of solution - Pre-mix and label from a controlled location 7% AHP Concentrate at a ratio of 1:16 (0.5% AHP).
2. Place mixed solution in either a labeled - flip top 1 Litre bottle or a small hand bucket.
3. AHP RTU is ready to use (0.5% AHP).
4. AHP Wipes are ready to use (0.5% AHP).



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PRODUCT GERMICIDAL EFFICACY

All products listed above are based upon Accelerated Hydrogen Peroxide – and have a Broad-Spectrum Sanitizing claim against vegetative bacteria, a Bactericidal claim against gram negative and gram positive vegetative bacteria as well as General Virucide Claim against Poliovirus Type 1, Sabin Strain, which includes inactivation of both enveloped and non-enveloped viruses. In addition to the General Virucide Claim, Accelerated Hydrogen Peroxide has been proven to show efficacy against HIV, Human Coronavirus, Human Rhinovirus, Human Rotavirus, Canine Parvovirus, Feline Calicivirus (Norovirus) and the H3N2 strain of Avian Influenza A.

The Tuberculocidal Surface Disinfectant (Accel TB) also carries a Fungicidal and Tuberculocidal claim.

SUMMARY OF PROCEDURES

Apply AHP Solution to either surface or to cloth. Clean all horizontal surfaces in the room ensuring that the cloth is changed when soiled. Place used cloth in a marked plastic-lined waste receptacle. Disinfect all horizontal surface of the room by reapplying the AHP Solution and allowing for a 5-minute contact time. If using cloth & bucket method with double dipping, once room has been cleaned discard all unused cleaning solution before proceeding to the next room. Allow surfaces to air dry or wipe dry if surfaces are still wet after the 5-minute contact time. Periodic rinsing of soft surfaces such as vinyl or naugahyde is suggested.

Recommended Procedures for Cleaning and Disinfection of Patient Care Equipment

Contaminated patient care devices should be clearly identified and kept separate from clean patient care devices. Patient care devices include: Blood Pressure Cuffs, Stethoscopes, Thermometers, Glucometers, Otoscopes, O2 Sats, Wheel Chairs and Commodes etc. The contaminated devices should be cleaned in the dirty zone. Cleaning removes soil and body materials (e.g. blood, organic soils) and must occur as an integral first step before.

1. Gather all equipment, cleaning solutions and materials required to clean the patient care devices.
2. **WASH** hands and put gloves prior to cleaning the devices. Personal protective equipment should be changed if torn or soiled.
3. Visible or gross soil present and/or blood or body fluid spills must be removed prior to cleaning. [See Protocol for Cleaning & Disinfecting a Blood or Body Fluid spill.]
4. Clean all surfaces of the patient care equipment or devices. Where appropriate, dismantle the devices to ensure that all surfaces can be cleaned using the **AHP Solution**. To ensure that cross contamination does not occur use clean cloths for each device to be cleaned. If using an open bucket system, ensure that solutions do not become contaminated (**NO DOUBLE DIPPING**). Allow surfaces to remain wet for 30 seconds to achieve the 30-second Broad-Spectrum Sanitizing claim.
5. To disinfect all surfaces of the patient care devices, reapply the **AHP Solution** and allow surfaces to remain wet for 5-minutes to achieve the Bactericidal, General Virucide, Fungicidal and Tuberculocidal claim.
6. Soiled rags should be placed in a bag for laundering. Disposable cloths should be disposed as regular waste in garbage bags.
7. Remove and discard gloves, **WASH** hands.



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Recommended Procedures for Cleaning & Disinfecting of Blood & Body Fluid Spills

Appropriate personal protective equipment should be worn for cleaning up a body fluid spill. Gloves should be worn during the cleaning and disinfecting procedures. If the possibility of splashing exists, the worker should wear a face shield and gown. For large spills, overalls, gowns or aprons as well as boots or protective shoe covers should be worn. Personal protective equipment should be changed if torn or soiled, and always removed before leaving the location of the spill, and then wash hands.

1. **WASH** hands and put on gloves.
2. If the possibility of splashing exists, the worker should wear a face shield and gown. For large spills, overalls, gowns or aprons as well as boots or protective shoe covers should be worn. Personal protective equipment should be changed if torn or soiled and always removed before leaving the location of the spill.
3. Apply the **AHP Solution** to spill – wait 30 seconds.
4. Blot up the blood with disposable towels. Dispose of paper towel in plastic-lined waste receptacle.
5. Spray or wipe surface with the **AHP Solution** – wait 5 minutes. Wipe dry with disposable paper towel. Discard paper towel as above.
6. Remove gloves and dispose in plastic-lined waste receptacle.
7. **WASH** hands.

Disposal of Infectious Material

All cleaning cloths gloves and handled tools used for the decontamination of a suspected Avian Flu virus case must be placed in a clearly marked plastic lined waste receptacle. Decontaminate all wastes before disposal; steam sterilization, chemical disinfection and or incineration.

Instructions for Confirmatory Testing of 7% AHP Concentrate Surface Disinfectants

The Accelerated Hydrogen Peroxide Test Strip (Part No. AHP500) can be used for confirmatory testing when required by facility protocol. These strips are easy to use dip-and-read reagents strips for a pass or fail determination of the hydrogen peroxide concentration in the 7% AHP Concentrate Surface Disinfectant solution.

1. Remove a test strip and immediately close the container.
2. Dip the test strip into the Diluted AHP solution to be tested for 1-second ensuring that the reaction zone is completely wetted.
3. Remove the test strip and shake of excess liquid.
4. Wait for 120-seconds then compare the reaction zone with the colour scale.

NOTE: The purpose of confirmatory testing is not to extend the shelf life beyond the 30-day claim. Should the test strip show that the Diluted AHP Solution still meets the targeted level of hydrogen peroxide after 30 days the product **MUST** still be disposed to ensure compliance with testing and label claims.



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References:

Provincial Infectious Diseases Advisory Committee, Best Practices for Cleaning, Disinfection and Sterilization in All Healthcare Settings, 2006

Public Health Agency of Canada, Infection Control Guidelines for Hand Washing, Cleaning, Disinfection and Sterilization in Healthcare, Volume 24S8, 1998