Low Level Disinfection
Policy Owner: Epidemiology

POLICY STATEMENT
Reusable medical equipment will be disinfected between patient uses and according to manufacturer’s instructions for use. The patient’s environment is kept clean and disinfected regularly to prevent the spread of harmful pathogens amongst patients and healthcare workers, with each disciple having defined responsibilities.

AFFECTED STAKEHOLDERS
*Indicate all entities and persons within the Enterprise that are affected by this policy:*
- Hired Staff
- Housestaff/Residents & Clinical Fellows
- Leased staff
- Medical Staff (includes Physicians, PAs, APNs)
- Patient Care Services (Nursing, PCT’s, Unit Clerks)
- Professional Services (Laboratory, Radiology, Respiratory, Pharmacy; etc.)
- Vendors/Contractors
- Other:

DEFINITIONS

<table>
<thead>
<tr>
<th>Definition</th>
<th>Description</th>
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<tbody>
<tr>
<td>Cleaning</td>
<td>Removal of foreign material/soil from objects</td>
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<tr>
<td>Contact Time</td>
<td>Amount of time for surfaces to remain wet for adequate disinfection</td>
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<td>Decontamination</td>
<td>Use of physical or chemical means to remove, inactivate, or destroy pathogens, including those bloodborne, on a surface or item to the point where they are no longer capable of transmitting infectious particles and the surface or item is rendered safe for handling, use, or disposal.</td>
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<tr>
<td>Disinfection</td>
<td>A process that eliminates many or all microorganisms except spores and is done with liquid chemical or by pasteurization.</td>
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<tr>
<td>Low Level Disinfection</td>
<td>The elimination of most pathogenic bacteria.</td>
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PROCESS & PROCEDURES

General Principles

1. A soiled-to-clean work flow is established. This consistent pattern of work flow separates work areas and prevents cross-contamination of supplies and equipment.

2. The following areas are listed in the order in which the areas exist in the work flow scheme: (1) receiving; (2) decontamination (i.e. cleaning); (3) disinfecting; and (4) storage.

3. Equipment must be cleaned prior to disinfection, including removal of visible soil to allow for adequate disinfection. Appropriate cleaning solutions (i.e., water, soap, proteolytic) are used before disinfecting as per manufacturer’s instructions for use.
   a. All equipment must be free of tape and adhesive matter. Adhesive matter is removed with an adhesive remover.
   b. Cleaning will begin at the highest level of the equipment working downward and from the least soiled to the most soiled.

4. Low-to-intermediate level disinfection is indicated for reusable, noncritical items that ordinarily come into contact with intact skin or do not touch the patient.
   a. All patient care equipment must be disinfected between each patient use and when visibly soiled with a hospital approved disinfectant appropriate for low level disinfection. The disinfection solution must remain on the surface for contact time duration as per manufacturer’s instructions for use.
      i. Single patient use, disposable items (e.g., urinals, bedpans, and graduated containers) used for one patient are routinely cleaned. Cleaning is performed by the personnel assisting the patient in their use. Such items are discarded when the items become cracked, discolored, or if debris accumulates on the items. The aforementioned examples of equipment require routine cleaning by rinsing with tap water and storing in a manner that promotes drying after each use.
ii. Use of disinfectant wipes on large surface areas may require more than one wipe to achieve the appropriate contact time.

iii. A hospital approved spray disinfectant or appropriately diluted solution may be used with cloths to apply the disinfectant to surfaces for items with large surface areas. A clean unused cloth will be used for each piece of equipment and will be changed on the same piece of equipment when visibly soiled.

iv. If diluted solution must be moved to a secondary container, label that bottle with date and time the solution is mixed. The solution is good only for 24 hours.

   1. A label with the product name, manufacturer, and hazards associated with the chemical must be displayed on the secondary container (spray bottle). Labels are available in Central Distribution.

   2. Spray bottles must be dated when use is initiated and discarded after 6 months.

v. Cloths used for cleaning and containers (i.e. buckets) used for holding disinfectants are cleaned after each use.

5. Appropriate personal protective equipment (PPE) must be worn when cleaning and disinfecting equipment (i.e., gloves, gown, and goggles).

6. Hand hygiene must be performed after cleaning and disinfecting equipment.

7. Bedside Mobile Workstations (BMW) must be disinfected each shift and between each patient use if enters patient rooms, diagnostic rooms, or procedure/treatment areas.

8. All equipment not cleaned in the room shall be transported to the unit or department’s decontamination area. Equipment must be covered during transport and designated biohazardous. Certain equipment may be further transported to the Central Distribution Decontamination for cleaning and disinfection utilizing the same transport process.

9. Items used for long periods of time are disinfected at least weekly.

10. Patients who remain in the hospital for over a month should have their room thoroughly cleaned. The bed should be cleaned or a new bed placed in the room. The bathroom should be cleaned and sanitized daily.

11. When medical devices are used throughout the institution it will be the responsibility of the user department to monitor and assure cleaning compliance,
i.e. Transportation Services will be responsible for cleaning wheelchairs and stretchers used by the service.

12. Open and closed storage cabinet shelves used for patients care supplies are disinfected routinely per defined unit schedule.

13. Clean equipment shall be stored in a clean, designated storage area. If not possible, a clean plastic bag will be placed over the equipment.

14. Disinfectants are disposed of by pouring these chemicals down a drain connected to the municipal sewer system with the water running.

Environmental Cleaning Responsibility

Environmental Services (EVS):

1. When a patient is discharged, EVS will clean the entire room including open/closed shelving using a single dip process. This includes all the furniture with special attention to the patient bed, over-the-bed table, remote control and phone. IV poles and pumps are the only medical equipment that EVS will clean. This is the only equipment that should remain in the room. All other equipment is taken to the soiled utility room for cleaning and disinfection or transport to the equipment decontamination area.

2. For all Environmental Services cleaning, the concentrated hospital approved disinfectant is used. The disinfectant is mixed according to manufacturer’s directions.

3. Patient rooms are disinfected daily with the appropriate disinfectant to include high touch (frequently touched) surfaces, the bathroom, sink clear and horizontal surfaces. General dusting and trash disposal is done daily and as needed. Patient room floors are mopped daily.

4. In the Emergency Department, EVS, in addition to daily and between-use cleaning, cleans and disinfects the beds on a quarterly basis by taking the beds off the unit for terminal cleaning.

5. Workstations will be dusted/cleaned by EVS when the surfaces are free of items. Department personnel (collaborating with EVS personnel) are responsible for moving items for EVS to allow for daily cleaning of work surfaces.

Patient Transport:
Patient transport cleans and maintains non-departmental stretchers and wheelchairs. Stretchers and wheelchairs are cleaned and disinfected with a hospital approved disinfectant after each use by Transport Services.

Nursing Unit:
If the equipment belongs to the nursing unit and is to stay on the unit, cleaning and disinfection will be done in the soiled utility room by the designated position responsible for cleaning and disinfecting unit equipment. Cleaning and disinfection should occur in a designated decontamination area.

**Clinics:**
Clinic personnel will be responsible for cleaning all equipment between patient use including clinic exam tables and stretchers. A thorough cleaning should be done at least once a week.

**Dietary Services:**
Food handlers cannot clean and disinfect equipment and then serve food.

Schedules for routine cleaning and disinfection of equipment shall be maintained by the unit/department. See attached addendum for an example of a cleaning. Each unit or department’s schedule should be specific to items used within the unit or department.

**REFERENCES, SUPPORTING DOCUMENTS, AND TOOLS**

**RELATED POLICIES**
- Disinfection Level Determination
- Hand Hygiene Policy
- High Level Disinfection
- Personal Protective Equipment

**APPROVED BY**
Chief Executive Officer, AU Medical Center  
Date: 09/28/2016