

## CLEANING OF EQUIPMENT AND DECONTAMINATION POLICY

To be read in conjunction with the

Medical Devices Policy and the  
Decontamination of Non Lumened Endoscopic Equipment  
(including Cystoscopes and Nasendoscopes) Policy

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Applies to:	All members of staff working in Clinical areas

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## DOCUMENT CONTROL

<b>Reference</b> KA/May15/DP	<b>Version</b> 6	<b>Status</b> Final	<b>Author</b> Interim Lead for Infection Prevention and Control
<b>Amendments</b> Amended to reflect the acquisition of Somerset Community Health and changes to the Trusts governance structure and post implementation of alternative chlorine based cleaning solution. May 2015; Updated to reflect cleaning of birthing pools, Dental Inhalation and Sedation equipment, Ophthalmology Equipment and Braun Pro 4000 Ear Thermometer – all have been uploaded to IPC Intranet page and cross referenced			
<b>Document Summary:</b> To ensure that all equipment and environments are adequately decontaminated between patient use. This will limit the transmission of infection to other patients in accordance with the National Standards for Cleanliness within the NHS and CQC Code of Practice Outcome 8 Cleanliness and Infection Control			
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## CONTRIBUTION LIST Key individuals involved in developing the document

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## 1. INTRODUCTION

- 1.1 Health and Social Care settings contain a diverse population of micro-organisms. Equipment used in patient areas becomes contaminated with blood, other body fluids, secretions and excretions during the delivery of care. Therefore, both the environment and the equipment used in the delivery of care must be managed appropriately in order to limit the risk of contamination from micro-organisms, which in turn, could potentially lead to the spread of infection.
- 1.2 For the purposes of this policy, examples of care equipment includes items that are non-invasive and reusable such as stethoscopes, pump infusion devices, drip stands and x-ray machines.
- 1.3 The policy focuses on the general care of equipment. When particular infections/micro-organisms are present, further advice should be sought from the Infection Prevention and Control Team.
- [http://intranet.sompar.nhs.uk/information/infection\\_prevention\\_control.aspx](http://intranet.sompar.nhs.uk/information/infection_prevention_control.aspx)
- 1.4 Equipment used to care for particularly susceptible patients/clients (e.g. immuno-compromised) may require additional measures put in place under direction from the Infection Prevention and Control team

## 2. PURPOSE & RATIONALE

- 2.1 The aim of this policy is to reduce the risk of transmission of micro-organisms, and the subsequent spread of infection, by promoting effective cleaning and decontamination of the environment in which the patient is accommodated, and of the equipment used in the delivery of care.
- 2.2 This policy does not detail processes required for the Decontamination of Non Lumened Endoscopic Equipment (including Cystoscopes and Nasendoscopes). Specific guidance is available from the Somerset Partnership NHS Foundation Trust Decontamination Lead. See also Somerset Partnership NHS Foundation Trust Decontamination of Non Lumened Endoscopic Equipment (including Cystoscopes and Nasendoscopes) Policy and Medical Devices Policy.
- 2.3 Further information on detailed cleaning methods, equipment and schedules employed by the Housekeepers and domestic cleaning staff can be found in the Operational Cleaning Manual available via the Somerset Partnership NHS Foundation Trust intranet.

## 3. DUTIES AND RESPONSIBILITIES

- 3.1 **The Trust Board, via the Chief Executive will:**
- ensure there are effective and adequately resourced arrangements for complying with decontamination requirements within the Trust.
  - identify a board level lead for Infection Prevention and Control.

- ensure that the role and functions of the Director of Infection Prevention and Control are satisfactorily fulfilled by appropriate and competent persons as defined by DH, (2008).

### **3.2 Director of Infection Prevention and Control (DIPC) will;**

- Oversee the local control of and the implementation of the Cleaning of Equipment and Decontamination Policy.

### **3.3 The Infection Prevention and Control Assurance Group will**

- ensure that the policy and procedures relating to Cleaning of Equipment and Decontamination are continually reviewed and improved within the Trust.

### **3.4 Head of Infection Prevention and Control will**

- Ensure that the Infection Prevention and Control Team review and update the of Cleaning of Equipment and Decontamination policy as required;
- Ensure that the Infection Prevention and Control Team undertake quarterly audits of compliance with the Cleaning of Equipment and Decontamination policy;
- Ensure that a quarterly report is presented to the Infection Prevention and Control Assurance Group;
- Provide additional advice regarding the implementation of Cleaning of Equipment and Decontamination where required;
- Promote good practice and challenge poor compliance.

### **3.5 Department / Ward Managers will**

- Ensure employees are compliant with this policy;
- Ensure local risk assessments are carried out where necessary, for example to identify the use of appropriate personal protective equipment (PPE), adherence to safe practices and provision of resources.
- Ensure that Incidents which are reported are reviewed and subsequent actions taken as appropriate

### **3.6 Individual Employees**

- All healthcare staff must take responsibility for the areas in which they work to ensure care equipment is managed and potential infection resulting from contamination is avoided.
- All staff have a responsibility to ensure they are trained and competent in the processes required for effective cleaning and decontamination of care equipment
- Will ensure that any equipment that requires off site service or repair will be decontaminated appropriately.
- All staff are required to be compliant with this policy

### 3.7 **Learning and Development Team will**

- Maintain records of staff who attend training sessions.

### 3.8 **Trust Hotel Services Assurance Group will**

- Ensure that environmental cleaning schedules are clearly defined, documented and available for all staff

## 4. **DEFINITIONS**

4.1 **CLEANING** – A process which physically removes visible contamination (blood, body fluids, debris and accumulated deposits) and the majority of micro-organisms, normally using a general purpose detergent. This may also be achieved by the use of microfibre and water by trained domestic and housekeeping staff.

**A high standard of cleaning is essential with all surfaces having contact with the cleaning agent.**

4.2 **DISINFECTION** – A process used to reduce the number of viable micro-organisms to a level at which they are not harmful. The process may not inactivate some viruses and bacterial spores. Disinfection must be carried out after cleaning has taken place and is achieved by either heat or chemicals.

4.3 **STERILISATION** – A process that removes and destroys all micro-organisms including bacterial spores. This is achieved by the use of heat or chemicals to ensure that the item is sterile at the point of use.

4.4 **DECONTAMINATION** - Removal or neutralization of poisonous gas or other injurious agents from the environment.

4.5 **Single Patient Use Equipment**, as stated by manufacturer, may be used a number of times for one patient only, e.g. hoist slings, disposable blood pressure cuffs. Such equipment needs to be marked with the appropriate patient's name, where possible, and disposed of when no longer required.

4.6 **Single Use Equipment**, as stated by the manufacturer, must be used once only and must not be reused. Equipment is marked with the single use sign (shown below). Single Use equipment must not be reprocessed under any circumstances.

## 5. GENERAL PRINCIPLES

ALL MULTIPLE USE EQUIPMENT MUST BE DECONTAMINATED  
BETWEEN PATIENTS ACCORDING TO POLICY AND  
MANUFACTURERS' INSTRUCTIONS



### Single Use Sign

- 5.1 Manufacturers Instructions must be followed for decontamination of the equipment unless advised by the Somerset Partnership NHS Foundation Trust Infection Prevention and Control Team.
- 5.2 Heat treatment must be the first choice for sterilisation.
- 5.3 Use of chemicals requires a Control of Substances Hazardous to Health (COSHH) assessment to be carried out.
- 5.4 Local reprocessing should only be carried out in the clinical area as an exception and after a risk assessment by the Somerset Partnership NHS Foundation Trust Decontamination Lead.
- 5.5 Automated washing methods are preferred to manual cleaning as they are strictly controlled and regularly validated.
- 5.6 All equipment and furnishings must be easily washable, covered with material impermeable to water and fluids, be able to withstand regular cleaning with detergent and be in good condition.
- 5.7 All equipment must be stored dry.
- 5.8 All equipment purchased will be fit for the intended purpose, compatible with existing equipment, easy to clean and decontaminate using available processes and, where appropriate, be accompanied by cleaning, disinfection and sterilisation instructions.

## 6. RISK ASSESSMENT

<b>Low Risk</b>	<b>Examples</b>	<b>Suitable Method</b>
Items in contact with normal, intact skin	Patient Wash Bowls, commodes, hoists etc	Cleaning & drying with detergent and water
<b>Intermediate Risk</b>	<b>Examples</b>	<b>Suitable Method</b>
Items in contact with intact mucous membranes or other items contaminated with virulent or readily transmissible organism or items to be used on immune-compromised patients	Respiratory equipment, fibre-optic endoscopes	Disinfection required, whether by heat or chemicals
<b>High Risk</b>	<b>Examples</b>	<b>Suitable Method</b>
Items in contact with a break in the skin or mucous membranes or introduction into a sterile body area	Surgical instruments, intrauterine devices and associated dressings, and any indwelling device	Sterilization required

- All equipment should be cleaned/decontaminated between use on patients.
- A regular programme of cleaning should be in place for all equipment.
- Equipment should be cleaned and documented weekly as a minimum whether used or not (this is in addition to after every patient use)
- I am clean stickers should be placed on all reusable equipment once it has been cleaned/decontaminated, to indicate that it has been cleaned.

## 7 DECONTAMINATION – EQUIPMENT FOR REPAIR

- 7.1 All items being returned to Medical Electronics for repair or servicing should be decontaminated before sending and decontamination certificate attached. See Appendix B
- 7.2 Any equipment that is badly soiled must be placed in a sealed bag for cleaning by specialist contractors prior to repair. This clean will be organised by Medical Electronics on receipt of the item.
- 7.3 It is essential that decontamination does not damage equipment or surfaces. The following is a general guide.



7.4 If you are unsure about the method to use, contact any of the following as appropriate:

- [http://intranet.sompar.nhs.uk/information/infection\\_prevention\\_control.aspx](http://intranet.sompar.nhs.uk/information/infection_prevention_control.aspx) Somerset Partnership NHS Foundation Head of Infection Prevention and Control
- Somerset Partnership NHS Foundation Trust Head of Facilities or Local Housekeeping Supervisor.

## **8. GOOD PRACTICE POINTS**

8.1 Staff undertaking cleaning of healthcare equipment should ensure the required resources are close to hand and fit for purpose.

8.2 Staff undertaking cleaning of healthcare equipment must ensure fresh solutions are prepared for the purpose of cleaning.

8.3 Items must always be stored in designated storage areas and on shelving away from the floor.

8.4 Staff must use Personal Protective Equipment (PPE) to protect their uniforms when decontaminating equipment or environments.

## **9. TRAINING REQUIREMENTS**

9.1 The Trust will ensure that all necessary staff (qualified, unqualified, other clinical staff and bank staff) are appropriately trained in line with the organisation's training needs analysis. Staff Induction – Standard Infection Control Precautions;

- Hand Hygiene Training
- COSHH regulations - The safe use of chemical disinfectants and cleaning agents.
- Infection Prevention and Control Training
- Untoward Event Reporting

## **10. MONITORING COMPLIANCE AND EFFECTIVENESS**

### **10.1 Monitoring arrangements for compliance and effectiveness**

- Overall monitoring will be by the Infection Prevention and Control Assurance Group

### **10.2 Responsibilities for conducting the monitoring**

- The Quality Assurance Group will monitor procedural document compliance and effectiveness where they relate to clinical areas.

### **10.3 Methodology to be used for monitoring**

- random sampling of staff and by questionnaire
- internal audits

- external auditor investigations and reports
- incident reporting and monitoring
- clinical effectiveness monitoring

#### 10.4 **Frequency of monitoring**

- monthly local audit
- surveillance
- annual In Patient audit

#### 10.5 **Process for reviewing results and ensuring improvements in performance occur.**

Audit results will be presented quarterly to the Infection Prevention and Control Assurance Group for consideration, identifying good practice, any shortfalls, action points and lessons learnt. This Group will be responsible for ensuring improvements, where necessary, are implemented.

Audit results will be presented quarterly to the relevant Best Practice Group.

### 11. **REFERENCES, ACKNOWLEDGEMENTS AND ASSOCIATED DOCUMENTS**

#### 11.1 **References**

**Department of Health** (2009), updated 2015, The Health and Social Care Act 2008, Code of Practice for health and social care on the prevention and control of infections and related guidance.

HTM 01-01 (2016) Management and decontamination of surgical instruments (medical devices) in acute care. London: Department of Health and Social Care.

**Control of substances Hazardous to Health (COSHH) Regulations** (2002) Statutory Instrument No. 2677 [on-line]. London: The Stationery Office. Available at: <http://www.legislation.hmsso.gov.uk>

*Clostridium difficile* infection: How to deal with the problem (DH; 2008)  
Available at:  
[http://www.hpa.org.uk/webc/HPAwebFile/HPAweb\\_C/1232006607827](http://www.hpa.org.uk/webc/HPAwebFile/HPAweb_C/1232006607827)

**A Matrons Charter: An Action Plan for Cleaner Hospitals 2004'**  
<http://www.dh.gov.uk>

#### **Toy Decontamination**

Avila-Aguero M L, et al (2004) Toys in a paediatric hospital: are they a bacterial source?

American Journal of Infection Control volume 32 number 5

Toy Cleaning Policy - UCSF Medical Centre, Infection Control Manual section 4.12 2001

Surviste J, (1996) The Toy Trap Uncovered Nursing Times volume 92 number 10

HPA Guidelines for control of infection and communicable disease in nurseries and other institutional early years settings. Issue 1 Dec 2003

AORN Online: Journal: Feb 05: Clinical Issues  
<http://www.aorn.org/journal/2005marci.htm>

## 11.2 **Cross reference to other procedural documents**

Consent and Capacity to Consent to Treatment Policy

Decontamination of Non Lumened Endoscopic Equipment (including Cystoscopes and Nasendoscopes)

Hand Hygiene Policy

Infection Prevention and Control Policy

Learning Development and Mandatory Training Policy

Medical Devices Policy

Record Keeping and Records Management Policy

Risk Management Policy and Procedure

Serious Incidents Requiring Investigation (SIRI) Policy

Staff Mandatory Training Matrix (Training Needs Analysis)

Standard Precautions and Use of PPE Policy

Trust Cleaning Manual

Untoward Event Reporting Policy and procedure

All current policies and procedures are accessible in the policy section of the public website (on the home page, click on 'Policies and Procedures').

Guidance on the Decontamination of individual specialist devices can be found at [http://intranet.sompar.nhs.uk/a\\_z\\_directory/infection\\_control.aspx](http://intranet.sompar.nhs.uk/a_z_directory/infection_control.aspx):

- Toy Decontamination Guidelines
- Decontamination of Suction units
- Decontamination of a Birthing Pool, Frome and Bridgwater Community Hospitals
- Decontamination of Dental Inhalation and Sedation Equipment
- Decontamination of Ophthalmology Equipment
- Decontamination of Braun Pro 4000 Ear Thermometer

## **12. APPENDICES**

12.1 For the avoidance of any doubt the appendices in this policy are to constitute part of the body of this policy and shall be treated as such.

- Appendix A Guide to decontamination of equipment and the environment
- Appendix B Decontamination Certificate
- Appendix C Spillage of Blood
- Appendix D Weekly Checklist

## Guide to Decontamination of Equipment and the Environment

This table is intended as a guide only. Regulations regarding decontamination of hospital equipment and the environment are constantly developing. It is essential that the user consults the manufacturer's instructions prior to use of any piece of medical equipment. In the event of uncertainty contact the infection control team for advice.

### Key:

**GPD = GPD (general purpose detergent e.g. Hospec or a detergent wipe)**

**TD = Thermal disinfection**

**PLEASE NOTE:** in areas where 'universal' wipes are used, these have the same action as both the General Purpose Detergent (GPD) wipe so can be used in either instance below.

**In areas where equipment is in use with a patient suspected or known to have Norovirus or a Clostridium difficile infection, chlorine based solution should be used as per national policy, and the product of choice for the organisation is Tristel Fuse and Jet for surfaces (contains chlorine dioxide)**

**WARNING:** All electrical equipment should be disconnected from the mains prior to any cleaning and disinfection procedures.

## TRUST RECOMMENDED DECONTAMINATION METHODS

Medical Device	Cleaning Agent
<b>Alcohol Breathalyser (MH only)</b>	As per manufacturer's instructions
<b>Baby Scales</b>	Universal Detergent Wipe
<b>Baths; including Birthing Pools at Frome and Bridgwater Community Hospital</b>	As per Trust Cleaning Manual Recommendations
<b>Bath Hoist</b>	Universal Detergent Wipe
<b>Bed Frames</b>	Universal Detergent Wipe
<b>Bed Tables</b>	Universal Detergent Wipe
<b>Bladder Scanner (machine casing)</b>	As per manufacturer's instructions
<b>Bladder Scanner (probe)</b>	As per manufacturer's instructions
<b>Bowls (washing)</b>	Universal Detergent Wipe
<b>Catheter Stands</b>	Universal Detergent Wipe
<b>Commodes</b>	Universal Detergent Wipe
<b>Computers on Wheels</b>	Universal Detergent Wipe
<b>Defibrillators</b>	Universal Detergent Wipe
<b>Doppler Scanner (machine casing)</b>	As per manufacturer's instructions
<b>Doppler Scanner (probe)</b>	As per manufacturer's instructions
<b>Dressing trolleys and attachments (ward and theatre)</b>	Universal Detergent Wipe
<b>Ear phones and plugs</b>	Universal Detergent Wipe
<b>ECG Machine and leads</b>	Universal Detergent Wipe
<b>Electric Suction (casing)</b>	Universal Detergent Wipe
<b>Examination Couch</b>	Universal Detergent Wipe
<b>Foam troughs/wedges (orthopaedic)</b>	Universal Detergent Wipe
<b>Furniture and fittings</b>	Universal Detergent Wipe
<b>Height Measure</b>	Universal Detergent Wipe
<b>Patient Hoist</b>	Universal Detergent Wipe
<b>Infusion pumps (machine casings)</b>	Universal Detergent Wipe
<b>Infusion stand</b>	Universal Detergent Wipe
<b>Manual sphyg and cuffs</b>	Universal Detergent Wipe
<b>Mattresses, mattress covers and pillows</b>	Universal Detergent Wipe
<b>Medicine trolley</b>	Universal Detergent Wipe
<b>Nebuliser Casing (single patient use)</b>	Universal Detergent Wipe
<b>Otoscope/ophthalmoscope</b>	As per manufacturer's instructions
<b>Oxygen Cylinder</b>	Universal Detergent Wipe
<b>Patella Hammer</b>	Universal Detergent Wipe
<b>Patient warming system</b>	Universal Detergent Wipe
<b>Pulse oximeters</b>	Universal Detergent Wipe
<b>Scales</b>	Universal Detergent Wipe
<b>Stethoscopes</b>	Universal Detergent Wipe
<b>Telephones</b>	Universal Detergent Wipe
<b>Thermometer (casing)</b>	As per manufacturer's instructions
<b>Treatment trolley</b>	Universal Detergent Wipe
<b>Tuning forks</b>	Universal Detergent Wipe
<b>Vital Sign monitors</b>	Universal Detergent Wipe
<b>Walking aids (not patient's own)</b>	Universal Detergent Wipe
<b>Weighing Machines (standing and sitting)</b>	Universal Detergent Wipe
<b>Wheelchairs</b>	Universal Detergent Wipe
<b>Wipeable duvets and pillows</b>	Universal Detergent Wipe

### Decontamination Certificate

Before any equipment is re-used or sent for repair or storage both within and outside the Hospital it must be decontaminated.

**The certificate must accompany the equipment; failure to comply will result in return of the equipment.**

<b>Ward/Dept.</b>		
<b>Description of equipment</b>		
<b>Make</b>	<b>Model</b>	<b>Serial Number</b>

**Please select one box and tick accordingly**

<b>To the best of my knowledge this equipment has NOT been in contact with potentially infected material e.g. blood, body fluids and therefore has not been contaminated.</b>	
<b>This equipment MAY be contaminated by potentially infected material and has been decontaminated externally as per decontamination policy.</b>	
<b>This equipment MAY be contaminated but could not be decontaminated because, Please give details:</b>	

**The above piece(s) of equipment has been appropriately decontaminated following patient usage and is now ready for repair, service, storage or re-use.**

**SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_

**NAME** \_\_\_\_\_ **DESIGNATION** \_\_\_\_\_  
(Print)

**Blood and Body Fluid Spills**

Somerset Partnership **NHS**  
NHS Foundation Trust

# Spill Wipes

Soaks up spills safely,  
in seconds

Clinell Spill Wipes are specifically developed to deal with bodily fluid spills quickly and efficiently. For use on blood spills, body fluid spills and urine.



Clinell Spill Wipes - (NHS) 412288 / Order Code: (3324)



1 Wear recommended PPE.  
Tear open the pack.



2 Remove wipe.



3 Flux the active side (A) face down onto the spill. Leave to absorb for 10 seconds.



4 Push down on plastic coated top (B) and wipe until spill is fully absorbed.



5 Remove a different wipe from the packet.



6 Clean the spill area in an "S" shaped motion, from clean to dirty.



7 Put used wipe and empty sachet back into the pack.



8 If required, repeat steps 6-7 with the remaining wipe and repeat.



9 Dispose of packs as hazardous waste.

**Dispose of in hazardous waste. Do not flush or macerate.**

For more information, please contact the Infection Prevention and Control team.

**clinell** 020 7955 0000 | [www.clinell.com](http://www.clinell.com)

Full product information at:  
[www.clinell.com](http://www.clinell.com)



## MEDICAL DEVICES CLEANING CHECKLIST FOR EQUIPMENT USED WITHIN MENTAL HEALTH AND COMMUNITY SERVICES

ALL reusable medical devices must be decontaminated between patients, and must be kept clean and available for use. Any device found to be inadequately cleaned should be decontaminated immediately.

Weekly checks must be carried out to ensure that all devices are clean and the checklist below dated and signed. Completed checklists should be retained locally as evidence of good practice.

Clinical Area .....

Please score through any device NOT present within your clinical area

Medical Device	Cleaning Agent	DATE	DATE	DATE	DATE	DATE	DATE	DATE	DATE
Alcohol Breathalyser (MH only)	As per manufacturer's instructions								
Baby Scales	Universal Detergent Wipe								
Baths; including Birthing Pools at Frome and Bridgwater Community Hospital	As per Trust Cleaning Manual Recommendations								

<b>Medical Device</b>	<b>Cleaning Agent</b>	<u>DATE</u>	<u>DATE</u>	<u>DATE</u>	<u>DATE</u>	<u>DATE</u>	<u>DATE</u>	<u>DATE</u>	<u>DATE</u>
<b>Bath Hoist</b>	Universal Detergent Wipe								
<b>Bed Frames</b>	Universal Detergent Wipe								
<b>Bed Tables</b>	Universal Detergent Wipe								
<b>Bladder Scanner (machine casing)</b>	As per manufacturer's instructions								
<b>Bladder Scanner (probe)</b>	As per manufacturer's instructions								
<b>Bowls (washing)</b>	Universal Detergent Wipe								
<b>Catheter Stands</b>	Universal Detergent Wipe								
<b>Commodes</b>	Universal Detergent Wipe								
<b>Computers on Wheels</b>	Universal Detergent Wipe								
<b>Defibrillators</b>	Universal Detergent Wipe								
<b>Doppler Scanner (machine casing)</b>	As per manufacturer's instructions								
<b>Accu Chek Performa meters (Roche) - Individual and Ward</b>	Universal Detergent Wipe								
<b>Coagu Chek XL Plus 9Roche) – Ward only</b>	Detergent Wipe – casing only								
<b>Doppler Scanner (probe)</b>	As per manufacturer's instructions								

<b>Medical Device</b>	<b>Cleaning Agent</b>	<u>DATE</u>	<u>DATE</u>	<u>DATE</u>	<u>DATE</u>	<u>DATE</u>	<u>DATE</u>	<u>DATE</u>	<u>DATE</u>
<b>Dressing trolleys and attachments (ward and theatre)</b>	Universal Detergent Wipe								
<b>Ear phones and plugs</b>	Universal Detergent Wipe								
<b>ECG Machine and leads</b>	Universal Detergent Wipe								
<b>Electric Suction (casing)</b>	Universal Detergent Wipe								
<b>Examination Couch</b>	Universal Detergent Wipe								
<b>Foam troughs/wedges (orthopaedic)</b>	Universal Detergent Wipe								
<b>Furniture and fittings</b>	Universal Detergent Wipe								
<b>Height Measure</b>	Universal Detergent Wipe								
<b>Patient Hoist</b>	Universal Detergent Wipe								
<b>Infusion pumps (machine casings)</b>	Universal Detergent Wipe								
<b>Infusion stand</b>	Universal Detergent Wipe								
<b>Manual sphyg and cuffs</b>	Universal Detergent Wipe								
<b>Mattresses, mattress covers and pillows</b>	Universal Detergent Wipe								
<b>Medicine trolley</b>	Universal Detergent Wipe								
<b>Nebuliser Casing (single patient use)</b>	Universal Detergent Wipe								
<b>Otoscope/ophthalmoscope</b>	As per manufacturer's instructions								

<b>Medical Device</b>	<b>Cleaning Agent</b>	<u>DATE</u>	<u>DATE</u>	<u>DATE</u>	<u>DATE</u>	<u>DATE</u>	<u>DATE</u>	<u>DATE</u>	<u>DATE</u>
<b>Tonometer (including prism)</b>	As per manufacturer's instructions								
<b>Oxygen Cylinder</b>	Universal Detergent Wipe								
<b>Patella Hammer</b>	Universal Detergent Wipe								
<b>Patient warming system</b>	Universal Detergent Wipe								
<b>Pulse oximeters</b>	Universal Detergent Wipe								
<b>Scales</b>	Universal Detergent Wipe								
<b>Stethoscopes</b>	Universal Detergent Wipe								
<b>Thermometer (casing)</b>	As per manufacturer's instructions								
<b>Treatment trolley</b>	Universal Detergent Wipe								
<b>Tuning forks</b>	Universal Detergent Wipe								
<b>Vital Sign monitors</b>	Universal Detergent Wipe								
<b>Walking aids (not patient's own)</b>	Universal Detergent Wipe								
<b>Weighing Machines (standing and sitting)</b>	Universal Detergent Wipe								
<b>Wheelchairs</b>	Universal Detergent Wipe								
<b>Wipeable duvets and pillows</b>	Universal Detergent Wipe								

**PLEASE ADD ANY ADDITIONAL ITEMS IDENTIFIED WITHIN YOUR AREA**

		DATE	DATE	DATE	DATE	DATE	DATE	DATE	DATE
Medical Device	Cleaning Agent								
Roche Coagu Chek XL Plus – Ward only	Universal Detergent Wipe – casing only								
Roche Accu Chek Performa meters - Individual and Ward	Universal Detergent								