

**Notice to the Practice using this form. The purpose of this form is to supplement the existing medical practice policies and procedures. Use of this form should be done only in conjunction with proper legal advice in your state to determine if and how to incorporate the policies below with or without modification in accordance with applicable federal and state laws.**

<b>Subject: Medical Office Cleaning and Disinfecting Plan</b>			
Infection Control	Effective Date:	Reviewed Date:	

**PURPOSE:**

To establish guidelines for the cleaning, sanitizing and disinfecting of medical offices. These guidelines are to create the criteria that the organization’s staff, providers, and contracted employees (collectively, “Staff”) must follow to prevent infections of patient care areas and to prevent the spread of illness from Staff, patients, and visitors.

**GUIDELINES:**

- All exam rooms in the medical office will be cleaned, disinfected and sanitized between each patient and after the final patient of the day. For exam rooms and treatments areas, disposable surface wipes will be used. Per the manufacturer’s guidelines, these wipes are effective against bacteria, tuberculosis, fungi, and some viruses, including influenza. Contact time (also known as “wet” time) is stated on the container in minutes and is the time that the surface must remain wet in order for the wipes to be effective against all listed germs. The germicidal wipes are for use on any surface which comes into contact with a patient, such as bed, equipment, and counters. In the absence of appropriate disposable surface wipes alternative disinfecting substances that meet the EPA criteria may be used.
- For each entrance and common area of the medical office , alcohol-based hand sanitizers for hand hygiene will be made available for patient and Staff use.
- For any objects that come into contact with a patient’s intact skin, low-level disinfectant will be used. These objects include: stethoscope, otoscope, blood pressure cuff, and laser heads. Low-level disinfection is accomplished by wiping the item with an alcohol prep pad or by following the manufacturer’s guidelines for low-level disinfection. Alternatively appropriate disinfecting substances that meet the EPA criteria may be used.
- Sterilization and autoclaving are utilized for High-Level Disinfection consistent with the Centers for Disease Control and Prevention (“CDC”) and may be performed on-site or off-site by an equipment or instrument vendor. Instruments which require sterilization or autoclaving will be processed according the medical office’s policies.
- For disposable instruments, the tool will be placed in a Sharps Box immediately after use. Disposable instruments will not be re-sterilized. They are for single-use only.
- For used sharps items, such as needles, disposable scalpels, and used medication vials/ampules/syringes, these will be placed in a Sharps Box immediately after use. Sharps Boxes are available in each exam room and medication prep area. Used sharps items should not be transported outside of the exam room to minimize the risk of injury.

- For general housekeeping use, Clorox wipes, Lysol wipes, and/or similar products will be used. Periodic general housekeeping will be performed with a frequency based on census, environmental factors, community illness trends (strep, GI bug, flu, pink eye, etc.), and patient population. For example, during flu season, the medical office should increase the frequency of cleaning. The following areas should be given extra consideration when performing general housekeeping:
  - Doorknobs
  - Counters
  - Writing utensils shared by persons
  - Kiosks (computers, iPads, touchscreens)
  - Credit card machines
  - Clipboards
  - Bathroom facilities
  - Waiting room furniture and surfaces (chairs, tables, arm rests)
  - Refreshment / nutrition stations
  - Retail and sample areas accessible to patients
  
- When an individual with a known, contagious illness presents at the medical office, management will advise Staff of the potential exposure. Additionally, management must follow the sterilization and autoclaving policy set forth in these guidelines to insure those occupied by such contagious individual are disinfected, sanitized and cleaned prior to having any other persons enter the area(s).
  
- Each Staff member is responsible for the tidiness, cleanliness and organization of their workspace on a daily basis.
  
- In the event of a blood spill, a cleaning chemical (such as Clorox Healthcare Bleach Spray) with the ability to kill HIV and Hepatitis must be used by trained Staff.
  
- Management and site leaders should be involved in the cleaning and infection control decisions that may affect Staff, patients, and visitors. It is ultimately the Medical Director's responsibility to provide guidance for such practices and to ensure implementation of those best practices.

Management and site leaders should be tasked with reviewing and updating exposure control plans ("ECPs") to ensure that ECPs cover personal protective equipment, bloodborne pathogens, and disaster response. It is also recommended that once established, these ECPs become separate plans.