Cleaning and Disinfection of Resident-Care Items and Equipment

Policy Statement

Resident-care equipment, including reusable items and durable medical equipment will be cleaned and disinfected according to current CDC recommendations for disinfection and the OSHA Bloodborne Pathogens Standard.

Policy Interpretation and Implementation

1. The following categories are used to distinguish the levels of sterilization/disinfection necessary for items used in resident care:
   a. **Critical items** consist of items that carry a high risk of infection if contaminated with any microorganism. Objects that enter sterile tissue (e.g., urinary catheters) or the vascular system (e.g., intravenous catheters) are considered critical items and must be sterile.
   b. **Semi-critical items** consist of items that may come in contact with mucous membranes or non-intact skin (e.g., respiratory therapy equipment). Such devices should be free from all microorganisms, although small numbers of bacterial spores are permissible. (Note: Some items that may come in contact with non-intact skin for a brief period of time (e.g., hydrotherapy tanks, bed side rails) are usually considered non-critical surfaces and are disinfected with intermediate-level disinfectants.)
   c. **Non-critical items** are those that come in contact with intact skin but not mucous membranes.
      (1) Non-critical resident-care items include bedpans, blood pressure cuffs, crutches and computers.
      (2) Most non-critical reusable items can be decontaminated where they are used (as opposed to being transported to a central processing location).
   d. **Reusable items** are cleaned and disinfected or sterilized between residents (e.g., stethoscopes, durable medical equipment).
      (1) **Single resident-use items** are cleaned/disinfected between uses by a single resident and disposed of afterwards (e.g., bedpans, urinals).
   e. **Single-use items** are disposed of after a single use (e.g., thermometer probe covers).
   f. **Reprocessed single-use devices** are those that have been previously used by a resident and then subjected to additional processing (manufacturing) for the purpose of an additional single use on another resident. Use of reprocessed single-use devices is permitted if:
      (1) The device is reprocessed by a FDA-registered third party preprocessor; and
      (2) There is documentation from the third party processor indicating that it has been cleared by the FDA to reprocess the device.

2. Critical and semi-critical items will be sterilized/disinfected in a central processing location and stored appropriately until use. Equipment to be processed will be labeled with at least the following information:
   a. That the equipment is contaminated;
   b. The address to which the equipment is to be shipped;
   c. The address from which the equipment was removed (including telephone number);
   d. The name of the person labeling the equipment; and
   e. The date and time the label was affixed to the equipment.

3. Durable medical equipment (DME) must be cleaned and disinfected before reuse by another resident.

4. Reusable resident care equipment will be decontaminated and/or sterilized between residents according to manufacturers’ instructions.

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5. Only equipment that is designated reusable shall be used by more than one resident.

6. Single use items will be discarded after a single use.

7. Intermediate and low-level disinfectants for non-critical items include:
   a. Ethyl or isopropyl alcohol;
   b. Sodium hypochlorite (5.25-6.15% diluted 1:500 or per manufacturer’s instructions);
   c. Phenolic germicidal detergents;
   d. Iodophor germicidal detergents; and
   e. Quaternary ammonium germicidal detergents (low-level disinfection only).

8. High-level disinfectants/liquid chemical sterilants will not be used for disinfection of non-critical items.

References

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