

Station Implementation Tips-

Reprocessing of Medical Equipment

1. Set-Up
 - a. Gather all:
 - a. Supplies- various sized gloves and gowns, eye protection and masks, alcohol-based hand rub/hand sanitizer (with at least 60% alcohol content), various types of resident care equipment (e.g. rolling V/S monitor, Glucometer, pulse oximeter, etc.), various cleaning and disinfecting products, trash can
 - b. Teaching materials- PPT presentation, handouts, competency checklists, quiz copies
2. Provide a short overview of why cleaning and disinfecting resident care equipment is important
3. Demonstrate the principles of properly cleaning and disinfecting various pieces of equipment
4. Perform cleaning and disinfecting competency validation with each staff member and document results on competency checklist.
 - a. Set up a room simulation – ask staff member to clean and disinfect various resident care equipment
 - i. Vary the scenarios – say resident has C. diff, norovirus, influenza, COVID-19 which require different disinfectants
 - b. If staff member did not successfully complete the competency:
 - i. Provide and document remedial education
 - ii. Repeat competency validation and document results
 - c. Administer Reprocessing Reuseable Medical Equipment Quiz-keep completed quizzes in education file

Competency Checklist for Reprocessing Reusable Medical Equipment

Required Step	Competent - Yes	Competent - No
Correctly states when reusable medical equipment should be cleaned and disinfected 1. Prior to use on another resident or when soiled		
Correctly states how cleaning of medical equipment should be done 1. Use of appropriate product based on manufacturer's instructions 2. Use of friction		
Correctly states how to disinfect medical equipment Clean and disinfected reusable equipment stored appropriately 1. Follow manufacturer's instructions 2. Wears appropriate PPE 3. Uses EPA approved hospital grade disinfectant 4. States disinfectant contact time, either from memory or by identifying it on the disinfectant label-		
Maintains separation between clean and soiled equipment to prevent cross contamination		
Comments or follow up actions:		

Staff Signature

Validator Signature/Date

TIPS FOR MEETING THE CLEANING AND DISINFECTION OF BLOOD GLUCOSE METERS REQUIREMENTS IN SKILLED NURSING FACILITIES

The Centers for Disease Control and Prevention (CDC) has become increasingly concerned about the risks for transmitting hepatitis B virus (HBV) and other infectious diseases during assisted blood glucose monitoring.¹ An underappreciated risk of blood glucose testing is the opportunity for exposure to bloodborne viruses (HBV, hepatitis C virus, and HIV) through contaminated equipment and supplies if devices used for testing (e.g., blood glucose meters, fingerstick devices) are shared.¹

Outbreaks of hepatitis B virus (HBV) infection associated with blood glucose monitoring have been identified with increasing regularity, particularly in long-term care settings, such as nursing homes and assisted living facilities, where residents often require assistance with monitoring of blood glucose levels.¹ CMS has listed regulatory requirements for the use of blood glucose meters in nursing homes as part of F-tag 880 Infection Control.²

We have listed some tips to meeting the infection control and regulatory requirements based on review of common reasons facilities are cited for non-compliance with infection control regulations.

Whenever possible assign blood glucose meter to an individual person.¹

TIP: Label blood glucose meter with resident's name to protect against inadvertent use of the device for additional residents.

TIP: Place in storage bag in designated location to avoid cross-contamination via contact with other meters or equipment.

TIP: Consider a plastic "pencil case" that can be cleaned easily and assigned to a resident as a better choice than a plastic bag for storage.

If blood glucose meter must be shared, clean and disinfect it after every use, per manufacturer's instructions.¹ To prevent carry-over of blood and infectious agents.¹

TIP: Consult the manufacturer of the blood glucose meter(s) used in the facility to determine what products, meeting the criteria specified by the FDA, are compatible with their meter prior to using any EPA-registered disinfectant for disinfection purposes. If the manufacturer does not specify how the device should be cleaned and disinfected, then it should not be shared.²

TIP: Keep the manufacturer's recommended disinfectant in the medication cart and at other easily accessible locations.

¹ CDC Infection Prevention during Blood Glucose Monitoring and Insulin Administration, Last reviewed: March 2, 2011. [Considerations for Blood Glucose Monitoring and Insulin Administration | Injection Safety | CDC](#) Accessed 3-20-2024

² CMS State Operations Manual Appendix PP (page 767) - Guidance to Surveyors for Long Term Care, Rev. 211, 02-03-23, §483.80 Infection Control <https://www.cms.gov/medicare/provider-enrollment-and-certification/guidanceforlawsandregulations/downloads/appendix-pp-state-operations-manual.pdf> Accessed 3-20-2024

³ CDC Disinfection and Sterilization, Last reviewed: May 24, 2019. <https://www.cdc.gov/infection-control/hcp/disinfection-and-sterilization> Accessed 3-20-2024

TIPS FOR MEETING THE CLEANING AND DISINFECTION OF BLOOD GLUCOSE METERS REQUIREMENTS IN SKILLED NURSING FACILITIES

TIP: Make cleaning and disinfecting the blood glucose meter after use and the disinfectant to be used part of the blood glucose testing order on the Medication/Treatment Administration Record.

TIP: Use the disinfectant specified by the manufacturer in the instructions. The CDC has recommended practices in healthcare settings. This information can be found at:

<https://www.cdc.gov/injection-safety/hcp/infection-control/>²

TIP: In general, the disinfectant should be effective against HIV, Hepatitis C, and Hepatitis B virus. A list of Environmental Protection Agency (EPA) registered disinfectants can be found at the following website:

<https://www.epa.gov/pesticide-registration/selected-epa-registered-disinfectants>²

Ensure contact/dwell time for disinfectant is followed.

By law, all applicable label instructions on EPA-registered products must be followed.³ Following the contact/dwell time ensures the disinfectant has enough time to kill the targeted organism.

TIP: Never fan or blow air on the surface to expedite the drying process!

TIP: Be sure disinfectant container is properly labeled and it is easy to read the contact/dwell time.

TIP: Do not place blood glucose meter inside medication cart or other designated location wet. Ensure dwell time has been met and blood glucose meter is dry before storing.

TIP: Use a timer to be sure you wait the entire contact/dwell time before storing.

¹ CDC Infection Prevention during Blood Glucose Monitoring and Insulin Administration, Last reviewed: March 2, 2011. [Considerations for Blood Glucose Monitoring and Insulin Administration | Injection Safety | CDC](#) Accessed 3-20-2024

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Perform Hand Hygiene (Hand washing with soap and water or use of an alcohol-based hand rub)

TIP: Wear gloves during blood glucose monitoring and during any other procedure that involves potential exposure to blood or body fluids.

TIP: Change gloves between resident contacts.

TIP: Change gloves that have touched potentially blood-contaminated objects or fingerstick wounds before touching clean surfaces. Discard gloves in appropriate receptacles.

TIP: Perform hand hygiene immediately after removal of gloves and before touching other medical equipment or supplies intended for use on other persons.¹

Place barrier under blood glucose meter when in resident's room or placed on top of medication cart to avoid spread of microorganisms and contamination of surfaces and other equipment or supplies.

TIP: Place clean and dry paper towel(s) under blood glucose meter before placing on resident table or on top of medication cart.

TIP: Make sure blood glucose meter is cleaned and stored appropriately after each use.

¹ CDC Infection Prevention during Blood Glucose Monitoring and Insulin Administration, Last reviewed: March 2, 2011. [Considerations for Blood Glucose Monitoring and Insulin Administration | Injection Safety | CDC](#) Accessed 3-20-2024

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Quiz: Reprocessing of Medical Equipment

Name _____

1. What information is important to read when looking at a disinfectant label?
 - A. Manufacturer's instructions for use
 - B. Contact time to follow
 - C. Type of germs the disinfectant can kill, e.g., bacteria, virus, spores
 - D. All of the above
2. Transfer lifts are considered noncritical equipment and should be disinfected with?
 - A. Low level disinfectant
 - B. Intermediate level disinfectant
 - C. High level disinfectant
 - D. Only needs cleaning not disinfecting
3. Which of the following is true regarding cleaning and disinfecting reusable medical equipment?
 - A. Cleaning must always be done before disinfecting
 - B. Reprocessed medical equipment and soiled equipment can be stored together
 - C. Keep the surface of medical equipment wet with a disinfectant for 30 seconds
 - D. None of the above
4. True or False: Nursing staff only need to wear personal protective equipment (PPE) if cleaning and disinfecting reusable medical equipment of a resident on transmission-based precautions
5. True or False: Environmental Services staff may be assigned to clean and disinfect reusable medical equipment.

Quiz Answer Key:

Reprocessing of Reusable Medical Equipment

Answer Key:

1. D
2. A
3. A
4. False
5. True

CLEANING

The physical removal of dust, soil, blood and secretions with water and detergents using mechanical action/friction. Cleaning does not kill microorganisms.

DISINFECTION

Chemical process for inactivating microorganisms on inanimate surfaces and objects.

CONTACT TIME

The time that a disinfectant must be in contact with a surface to ensure that disinfection has occurred. For most disinfectants, the surface should remain wet for the required contact time.

Determine cleaning frequency by the level of patient/resident contact and degree of soiling.

See chart below.

Surface	Low-Touch Surface	High-Touch Surface
Description	Surfaces that are minimally touched	Surfaces that are frequently touched
Example	Walls, ceilings, floors	Bedrails, overbed table, doorknobs, handwashing sinks
Cleaning Frequency	At least weekly and when visibly soiled	At least once daily

This material was prepared by Health Quality Innovators (HQI), a Quality Innovation Network-Quality Improvement Organization (QIN-QIO) under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services (HHS). Views expressed in this material do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific product or entity herein does not constitute endorsement of that product or entity by CMS or HHS. 1250W/HQI/QIN-QIO-0359-11/15/22

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LIST YOUR FACILITY'S PRODUCT BELOW:

Disinfectant Product	Contact/Wet/Kill Time
	minutes
	minutes
	minutes

Include multi-use electronic equipment in the cleaning and disinfection schedule, especially those items that are used during delivery of care and mobile devices that are moved in and out of patient/resident rooms frequently (e.g., daily). These items must be cleaned before use on another patient/resident.

Use EPA-registered disinfectants that have microbiocidal (i.e., killing) activity against the pathogens most likely to contaminate the patient/resident-care environment.

Check with equipment/surface manufacturer for cleaning product compatibility.

WEAR PERSONAL PROTECTIVE EQUIPMENT

Wear personal protective equipment (PPE) (e.g., gloves, gown) when handling items that are visibly soiled or may have been in contact with blood or body fluids and per the cleaning/disinfectant product recommendation.

To avoid spreading dirt and microorganisms, clean from cleaner to dirtier areas and top to bottom.



Selected EPA-Registered
Disinfectants | EPA



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