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| **Facility Name:** | **Facility #:** | **Review Date:** | **Reviewer:** |

**COMPLETE THIS CHECKLIST FOR BOTH AUTOMATED AND MANUAL SCOPE REPROCESSING – for each type of high level disinfectant chemical, re-processing method and each type of automated endoscope reprocessor/scope washer.**

Does the Center perform Manual High level Disinfection (HLD)? \_\_\_Yes \_\_\_No

If yes, what items are manually high level disinfected?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

High Level Disinfectant (HLD) Chemical and Concentration:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Immersion/Exposure time required for HLD:\_\_\_\_\_\_\_\_ Temperature required for HLD:\_\_\_\_\_\_\_\_\_\_\_ Center Documenting Temp prior to each use:\_\_ Yes \_\_\_No

How does the Center measure Temperature?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Maximum days of use:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Actual Average days of use:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AER (Automated Endoscope Reprocessor/Scope Washer) Brand: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Make and Model: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of AER Machines: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Manufacturer instruction manual present: \_\_\_Yes \_\_\_No \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AER Service and Maintenance Performed By:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of last PM: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of last repair service/reason for repair:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Center has PM/Service Log/Binder: \_\_\_Yes \_\_\_No

High Level Disinfectant (HLD) Chemical and Concentration:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Immersion/Exposure time required for HLD:\_\_\_\_\_\_\_\_ Temperature required for HLD:\_\_\_\_\_\_\_\_\_\_\_ Center Documenting Temp prior to each use:\_\_ Yes \_\_\_No

Maximum days of use:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Actual Average days of use:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AER (Automated Endoscope Reprocessor/Scope Washer) Brand: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Make and Model: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of AER Machines: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Manufacturer’s instruction manual present: \_\_\_Yes \_\_\_No \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AER Service and Maintenance Performed By:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of last PM: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of last repair service/reason for repair:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Center has PM/Service Log/Binder: \_\_\_Yes \_\_\_No

High Level Disinfectant (HLD) Chemical and Concentration:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Immersion/Exposure time required for HLD:\_\_\_\_\_\_\_\_ Temperature required for HLD:\_\_\_\_\_\_\_\_\_\_\_ Center Documenting Temp prior to each use:\_\_ Yes \_\_\_No

Maximum days of use:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Actual Average days of use:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does the Center use an Autoclave/Sterilizer? \_\_\_Yes \_\_\_No \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Brand/Model/Type of Autoclave/Sterlizer(Gravity or Dynamic Air Removal/PreVac):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If yes, what items are sterilized? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Preventative Maintenance contract in place? \_\_\_Yes \_\_\_No Preventative Maintenance performed by:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Routine sterilizer cleaning is performed according to manufacturer’s instructions: \_\_\_Yes \_\_\_No \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sterilizer water is changed weekly and interior chamber is cleaned monthly or as per manufacturer’s instructions: \_\_\_Yes \_\_\_No \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Log is in place for sterilizer water change and interior chamber cleaning: \_\_\_Yes \_\_\_No\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other Comments/Information:

| **Audit Step** | **Yes** | **No** | **N/A** | **Action Needed/Comments** |
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| 1. Confirm correct sterilization process per manufacturer’s instructions for each item sterilized.   Logs are present to verify dates, sterilization process, and lists each item contained in each load – along with staff initials.   * 1. Items to be sterilized are disassembled, manually cleaned, rinsed and packaged in peel pack/per manufacturer’s instructions. Instruments with hinges are placed in open position. Peel packs are dated.   2. Temperature and length of time of exposure required to achieve sterilization per manufacturer’s instructions are verified for each item that the Center is sterilizing.   3. Physical/Process indicators (printout or logs) are verified after each cycle that the proper cycle parameters/exposure time/temperature/drying time were met and staff initials printout/log.   4. Class 5 Chemical indicator strips (placed inside package) are verified after each sterilization cycle and initialed.   5. Biological indicators and controls are run at least weekly, after sterilizer malfunctions, after any failures and after repairs. Biological indicators verified and initialed.   6. Bowie Dick test performed daily for Dynamic Air Removal/Prevacuum sterilizers.   7. All logs are complete without lapses in documentation of dates and sterilization process. |  |  |  |  |
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| 1. Review the manual pre-cleaning process: Enzymatic detergents are diluted to the manufacturer’s recommendations, freshly prepared for one time use with each scope and discarded after one time use.    1. At the bedside when procedure is complete, soiled endoscopes are wiped and channels are flushed with water or fresh enzymatic detergent solution immediately after use (According to Manufacturer’s Instructions).    2. Scopes are transported in covered, impervious containers to the re-processing area.    3. Scopes are fully disassembled and leak tested.    4. Scopes are manually washed with enzymatic detergent using lint free cloth, channels are brushed, then flushed with water.    5. If using enzymatic containing cleaning sponges, manufacturer’s instructions are followed.    6. Valves are manually washed, brushed and rinsed with water.    7. A visual inspection for cleanliness is performed after rinsing. |  |  |  |  |
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| 1. Identify the HLD chemical agent, chemical concentration, immersion/exposure time and exposure temperature required for use during HLD for manual and/or automated process.    1. Exposure time and temperature varies among FDA approved HLD chemical. Refer to the manufacturer’s instructions or ASGE/SHEA Multisociety Guidelines.    2. The HLD chemical and concentration in use are approved for use with the Center’s brand of scopes.    3. The AER temperature is set correctly for the type of HLD.    4. The AER immersion/exposure time is set correctly for the type of HLD.    5. If manually reprocessing – The time and temperature are correctly identified and followed for the type of HLD. |  |  |  |  |
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| 1. Confirm AER machine printouts contain (or if AER does not print strip, then manual logs contain) the following: 2. Patient identification for each procedure 3. Serial number or other identifier of the endoscope reprocessed 4. MEC of HLD “pass or fail” documented 5. Temperature of HLD verified and documented with each cycle 6. Disinfection cycle, rinsing, alcohol and drying cycles completed 7. Staff confirms all the above with each cycle and documents with initials. 8. Documentation is maintained in a log containing AER machine printouts. 9. Documentation is maintained for manual processes and for AER machines which do not print. |  |  |  |  |
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| 1. For CUSTOM ULTRASONICS scope washers, verify that the “automated ultrasonic wash phase” is being utilized. (This wash phase should NOT be skipped). |  |  |  |  |
| 1. For AERs, confirm system diagnostics testing of machine conditions is performed, reviewed and documented per manufacturer’s recommendations - if applicable to type of AER. |  |  |  |  |
| 1. Endoscopes and channels are rinsed with sterile, filtered, or tap water after exposure to the HLD chemical according to manufacturer’s recommendations. |  |  |  |  |
| 1. Rinsed endoscopes and channels are then purged with forced air. |  |  |  |  |
| 1. All endoscope channels are then flushed with 70% alcohol followed by air purge according to scope manufacturer’s instructions.    1. If manual reprocessing, all channels are flushed with alcohol until the alcohol can be seen exiting the opposite end of each channel.    2. If using AER, alcohol flush and air purge are correctly programmed for each cycle or are performed manually at the end of the cycle per manufacturer’s instructions. |  |  |  |  |
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| 1. Disinfected endoscopes are dried with clean, lint free cloth, properly hung vertically with caps and valves removed, and stored in a covered and vented scope cabinet in a clean area – away from dirty reprocessing areas and ends of the scopes are not touching the floor of the scope cabinet.    1. Chux/liners in bottom of scope cabinet are changed daily. |  |  |  |  |
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| 1. The Center has a system to document dates of when scopes were last reprocessed so that intervals of storage can be determined. (AORN and APIC recommend maximum storage intervals of 5 and 7 days respectively.) Describe the documentation system the Center is using. |  |  |  |  |
| 1. Confirm quality control testing of test strips and MEC testing of the HLD chemical.    1. QC testing is performed for each new open bottle of MEC test strips according to manufacturer’s recommendations.    2. MEC test strips are used prior to each reprocessing cycle according to the manufacturer’s recommendations.    3. MEC test strip containers have opened and expiration dates documented. |  |  |  |  |
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| 1. Confirm the HLD chemical is labeled and changed according to the manufacturer’s recommendations.    1. In-use start and expiration dates are documented for EACH reservoir (each side) of the AER    2. Chemicals are discarded at the maximum days of reuse and/or when MEC strips show failure to show Minimum Effective Concentration. |  |  |  |  |
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| 1. Reusable water bottles are HLD or sterilized according to manufacturer’s instructions. |  |  |  |  |
| 1. Staff training and annual scope reprocessing competency is documented.    1. Sterilization competency is documented, if center is applicable. |  |  |  |  |
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| 1. For automated machines, repairs and maintenance are performed per the manufacturer’s recommendations.    1. A process is in place to ensure machine conditions are reset and the machine functions to meet the appropriate conditions after any repairs and maintenance are performed on the AER.    2. Filter changes are completed per manufacturer’s instructions & documented in logs.    3. Log of repairs is complete and organized. |  |  |  |  |
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| 17. If the Center uses an Olympus MAJ-855 reusable Auxiliary Water tube, verify the following:  a. MAJ-855 is manually cleaned after every use according to manufacturer’s instructions,  regardless of whether or not the flushing pump was used during the procedure.  b. After manual cleaning, MAJ-855 is either high level disinfected or steam sterilized according to  manufacturer’s instructions.  c. Center has verified that the AER manufacturer has approved the processing of the MAJ-855 in the AER  unit.  Note: Custom Ultrasonics contraindicates using the System 83 Plus Washer-Disinfector to reprocess the MAJ-855 tubing. |  |  |  |  |
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| 18. If the Center uses a flushing pump, verify the following:  a. Single use items used with the flushing pump are being used as such.  b. Reusable items (i.e. channel adapters, connecting tubing, pump cartridges and irrigation bottles) are  manually cleaned and high level disinfected or sterilized after each patient use according to  manufacturer’s instructions.  c. Sterile water is used for flushing – as per manufacturer’s instructions.  Note: AER units are not recommended for processing of most flushing pump accessories. |  |  |  |  |
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| **Audit Step** | **Yes** | **No** | **N/A** | **Action Needed/Comments** |
| 19. Verify the following employees have completed all required education as outlined in the Scope Reprocessing  Program and have documented competencies annually.   * Employees involved in procedure room set-up * Employees involved with assisting in procedure room * Employees involved with scope reprocessing |  |  |  |  |
| 20. Verify Scope Reprocessing audits are completed and submitted **MONTHLY** on Center Connect |  |  |  |  |

FOR ANY ISSUES IDENTIFIED ABOVE, RECORD CORRECTIVE ACTION:

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| ISSUE | ACTION | RESPONSIBILITY | TARGET DATE FOR COMPLETION |
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Attestation: I have reviewed the above reprocessing checklist and attest that the AER/Scope Washers, HLD chemicals, and reprocessing protocols are being followed according to manufacturer’s recommendations, SGNA standards and ASGE/SHEA Guidelines.

SIGNATURE OF CENTER DIRECTOR/ADMINISTRATOR: ­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIGNATURE OF AMSURG CLINICAL DIRECTOR: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_