Endoscopy Cleaning and Disinfecting Tracer Tool

	Met	Not Met	Comments
Pre Cleaning – begins in the procedure room			
Ensure that there is a leak-proof, puncture-proof container with a biohazard sticker affixed, in the Endoscopy Suite			
Don appropriate PPE (gloves, eyewear, apron/gown)			
Wipe the exterior of the scope with water, to remove any visible debris and other contaminates, followed by a wipe down with a sponge with approved detergent			
Suction and flush the channels through with water and detergent to remove any residue in the channel			
Remove buttons and discard (if disposable) or place in container for cleaning			
Brush the channel through until clean, and discard the brush			
Place the instrument into the leak-proof, puncture-proof container for transport			
Secure the container lid			
Remove gloves			
Perform hand hygiene			
Transport to Reprocessing Area			
Don clean gloves			
Transport the container to the scope cleaning room or case cart for Sterile Processing Department pick-up			
The endoscope is to remain moist but not be submerged			
If the endoscope is looped, it must be in large loops at least 12cm in diameter			
If accessories are non-disposable, they must be transported with the scope			
Remove gloves			
Perform hand hygiene			
Reprocessing Area			
Away from patient care/procedure room			
Don PPE (impervious gowns, gloves, eye protection, and simple mask or face shield)			
At least two sinks or a divided sink (leak test/soak and rinse) is needed to reprocess scopes			
Sinks are deep enough to loosely coil and submerge the endoscope			
Eyewash station is available, easily accessible, functional and tested per policy.			
A hand hygiene station is available			
Processing Area Layout:			
1 room processing area			
• 3 feet delineation between the dirty, decontamination area and clean area			

Applicable to the following Accreditation Programs: (X) Hospital (X) Critical Access Hospital ( ) Behavioral Health (X) Ambulatory Care (X) Office Based Surgery ( ) Disease Specific Certification ( ) Staffing Certification

Endoscopy Cleaning and Disinfecting Tracer Tool

	Met	Not Met	Comments
• The room has a Negative airflow			
2-room processing area			
• Decontamination area – has negative airflow			
• Clean area – has positive airflow			
NOTE: Unilateral flow from dirty (decontamination) to clean exists – travel across the decontamination area to go into the storage room is not acceptable			
Leak Testing - Detects damage to the interior/exterior of the endoscope			
Manual Cleaning			
Disassemble scope (removes valves, port covers, disposables)			
Attach leak tester			
Pressurize endoscope per manufacturer's information for use (IFU) recommended level			
Submerge endoscope in loose loop configuration			
Move all portions of the scopes (Flex, depress, right/left)			
Maintains pressure and inspects for at least 30 seconds			
Remove and depressurize			
If leak/damage is detected, report and follow facility repair procedures			
Automated Cleaning			
Disassemble scope (removes valves, port covers, disposables)			
Attach leak tester to computer and input data			
When indicated, manipulate scope as directed			
If leak/damage is detected, report and follow facility repair procedures			
Manual Cleaning and Rinse – Should be done as soon as possible after procedure			
Sinks are deep enough to loosely coil and submerge the endoscope			
Freshly prepared detergent solution per IFU			
Ensure the video cap is secure			
Submerge endoscope in loose loop configuration			
Wash with soft/lint-free cloth or sponge			
Channels cleaned with compatible size brush per model IFU (short choppy motions)			
Debris removed from brush with each pass			
Extra procedures followed for specialty scopes with elevators or small lumens per IFU			
Brush until no debris is visible			
Attach cleaning adapters or prepare for automated processor			
Flush channels with properly prepared detergent solution			
Soak in detergent solution if recommended per detergent IFU			
Flush channels with water per IFU			
Inspect for cleanliness, working parts			
Dry exterior with soft/lint-free cloth			
Manual High Level Disinfection (HLD)			
Prepare HLD solution per IFU			

Applicable to the following Accreditation Programs: (X) Hospital (X) Critical Access Hospital ( ) Behavioral Health (X) Ambulatory Care (X) Office Based Surgery ( ) Disease Specific Certification ( ) Staffing Certification

Regulatory Information may change over time as healthcare expectations change. This document is current as of the date noted within this footer

Endoscopy Cleaning and Disinfecting Tracer Tool

	Met	Not Met	Comments
Test Product for temp, MEC (minimum effective concentration) or MRC (minimum required concentration) per IFU before each use and document			
Immerse scope in HLD solution (ensure coiled loosely)			
Flush channels to fill and so that they come into contact with solution			
Cover with lid and utilize soaking time per solution IFU (may use timer)			
Rinse with water as required per solution IFU (IFU will state minimum amount of rinse water required. Facility may determine type of water)			
Flush lumens with at least 100ml water unless otherwise noted on solution IFU			
Remove scope and purge with air and 70% isopropyl alcohol			
Dry exterior with soft/lint-free cloth			
Automated High-Level Disinfection Reprocessor			
****NOTE** Depending on the type of reprocessor, some manual cleaning may need to be done before using the automated reprocessor. Please see the requirements for the specific reprocessor and manual cleaning instructions**			
Place endoscope into reprocessor with appropriate channel adapters per IFU			
If there are smaller reusable parts, process these in designated area with a scope			
Set the machine for the appropriate time and temperature relative to the HLD solution used			
If the air purge and alcohol cycle are not done with the reprocessor, remove the scope and purge channels with 70% isopropyl alcohol and air			
Remove adapters			
Dry exterior with soft/lint-free cloth			
Transport to storage area with gloves			
Storage			
Cabinet should contain doors			
Cabinet should not touch the floor ??			
Cabinet should be ventilated or meet the definition of a drying cabinet			
Inspect cabinet for cleanliness			
Store endoscopes vertically without touching the bottom of the cabinet or each other.			
If a drying cabinet is used, scopes may be stored horizontally in loose coils (see manufacturers' guidelines)			
Tag scopes with appropriate hang time per risk assessment and their accessories, if non-disposable.			
Establish cabinet cleaning intervals per risk assessment			

Applicable to the following Accreditation Programs: (X) Hospital (X) Critical Access Hospital ( ) Behavioral Health (X) Ambulatory Care (X) Office Based Surgery ( ) Disease Specific Certification ( ) Staffing Certification