

INDICATOR	Met	Not Met	Comments
<b>GENERAL</b>			
Area is clean and free of dust and debris.			
Fire drills are up to date. Staff can verbalize the process for evacuating patients who are unable to evacuate themselves.			
Emergency Medical drills are conducted to test response.			
<b>MEDICAL RECORDS</b>			
Prior to conducting a diagnostic respiratory studies, staff verify the following: <ul style="list-style-type: none"> <li>• Correct patient</li> <li>• Correct protocol for the study</li> <li>• Correct parameters</li> </ul>			
Critical study/lab values are reported to the Provider and documented per policy.			
<b>FACILITIES AND EQUIPMENT</b>			
Equipment is cleaned per policy and the manufacturer IFU. Expectations are that staff have access to the equipment IFU and are following the cleaning and disinfection procedures listed there.			
Staff are utilizing disinfectant wipes as per policy and with appropriate contact times as defined by the IFU.			
All equipment daily/weekly/monthly quality control checks are completed and documented.			
All equipment requiring calibration is current.			
Ventilator preventive maintenance checks are current including cleaning/disinfecting/replacing valves and filters.			
Bronchoscopes are stored and reprocessed according to IFU (See Endoscopic Tracer Tool for additional details)			
<b>OXYGEN CYLINDERS</b>			
No more than 12-13 E-cylinders are stored within a 22,500 sq ft area. Cylinders that are in use are not considered to be in storage.			
Cylinders that are in use are attached to a cylinder stand or to medical equipment designed to receive and hold cylinders.			
Cylinders are not chained to portable or moveable apparatus.			
Where empty and full cylinders are stored together, empty cylinders are segregated from full cylinders.			

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For cylinders with internal pressure gauges, the facility has established a pressure at which the cylinders will be considered empty.			
Empty cylinders are clearly marked.			
Cylinders stored in the open (outdoors) are protected from weather extremes.			
<p>To keep personnel safe while they work in locations with increased hazards, appropriate signage is required. Precautionary signs must meet the following requirements:</p> <ul style="list-style-type: none"> <li>• Signs must be displayed on each door or gate of the storage room or enclosure.</li> <li>• Signs must be readable from a distance of 5 ft.</li> <li>• Signs must include the following language at a minimum: CAUTION: OXIDIZING GAS(ES) STORED WITHIN NO SMOKING</li> <li>• If the facility does not prohibit smoking, additional precautionary signs indicating where oxygen is being administered must be provided.</li> <li>• If the facility does prohibit smoking and signs are prominently spaced at all major entrances, the additional signage is not required.</li> </ul>			
<b>CLINICAL POLICIES AND PROTOCOLS</b>			
A qualified Doctor of Medicine or osteopathy directs the Respiratory Services Department.			
All policies are up to date and periodically reviewed according to the organization's timeframes.			
Written procedures or protocols are present for reporting critical testing results.			
Staff qualified to perform specific respiratory care procedures and the amount of supervision required to carry out the specific procedures is designated in writing.			
<b>STAFF COMPETENCIES AND QUALIFICATIONS</b>			
Staff certifications and licenses are up to date.			
Employees or contractors, who inspect, test, calibrate, and maintain Imaging services equipment are qualified to perform these actions.			