

## HICPAC Sample Competency Verification Tool: Reprocessing Flexible Endoscopes

**Purpose:** Facilities can use this sample Competency Verification Tool as a template to develop their own tool to assess the competency of personnel tasked with processing all types of reusable flexible endoscopes and accessories. This sample tool is designed to be used in conjunction with the Audit Tool. Facilities are encouraged to use the tools together to verify competency and audit current practice as well as to ensure that their practices are consistent with “Essential Elements of a Reprocessing Program for Flexible Endoscopes – Recommendations of the Healthcare Infection Control Practices Advisory Committee.”

**Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

DEM = Demonstration      S = Skills Laboratory      RWM = Review of Written or Visual Materials/Policy      V = Verbalization  
 DO = Direct Observation      SBT = Scenario-based Training      P&P = Procedure Review (Specify P&P #s \_\_\_\_\_)      O = Other: \_\_\_\_\_  
 DA = Documentation Audit      CS = Controlled Simulation      KAT = Knowledge Assessment Test

Competency Statements/Performance Criteria	Verification Method [See legend above]	Not Met [Explain why]
<b>Precleaning</b>		
1. Precleans flexible endoscopes and accessories at the point of use as soon as possible after the endoscope has been removed from the patient (or the procedure is completed) and before organic material has dried on the surface or in the channels of the endoscope.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
2. Performs precleaning in accordance with the endoscope manufacturer’s instructions for use (IFU) and by	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
a. preparing a fresh solution of the cleaning product with properties recommended by the manufacturer;	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
b. washing the exterior surfaces of the endoscope with a soft, lint-free cloth or sponge saturated with the cleaning solution;	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
c. suctioning the cleaning solution through the suction and biopsy channels;	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
d. placing the distal end of the endoscope in the cleaning solution and suctioning the solution through the endoscope;	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	

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e. flushing the air, water, and other channels of the endoscope alternately with the cleaning solution and air, finishing with air;	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
f. visually inspecting the endoscope for damage;	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
g. discarding the cleaning solution and cleaning cloth or sponge after use.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
<b>Transporting</b>		
3. Transports the flexible endoscope and accessories to the endoscopy processing room as soon as possible after use.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
4. Keeps the endoscope wet or damp, but not submerged in liquid, during transport.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
5. Transports contaminated endoscopes and accessories to the decontamination area in a closed container or closed transport cart.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
a. Uses a container that is leak proof, puncture resistant, and large enough to contain all contents.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
b. Uses a container that is of sufficient size to accommodate the endoscope when the endoscope is coiled in large loops.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
6. Labels the transport cart or container with a biohazard legend.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
a. Securely affixes the biohazard label to the cart or container.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
7. Transports the accessories with the endoscope but contains them separately from the endoscope.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	

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8. Begins to process flexible endoscopes and accessories as soon as possible after transport to the endoscopy processing room or within the manufacturer's recommended time to processing. a. When it is not possible to initiate the cleaning process within the endoscope manufacturer's recommended time to cleaning, follows the manufacturer's IFU for delayed processing.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
b. Does not leave flexible endoscopes soaking in enzymatic cleaning solutions beyond the endoscope manufacturer's designated contact time unless this is recommended in the manufacturer's IFU for delayed processing.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
<b>Leak Testing</b> 9. Performs leak testing before manual cleaning and before the endoscope is placed into cleaning solutions.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
10. Performs leak testing in accordance with the endoscope and leak-testing equipment manufacturers' IFU and by a. removing all port covers and function valves;	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
b. placing the endoscope in a loose configuration;	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
c. pressurizing the endoscope to the recommended pressure;	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
d. manipulating all moving parts, including the elevator, and angulating the bending section of the distal end;	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
e. actuating video switches;	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
f. maintaining pressure and inspection for a minimum of 30 seconds.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	

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11. When an endoscope fails a leak test, removes it from service and sends for repair or replacement per facility policy and procedure.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
<b>Manual Cleaning</b> 12. Performs manual cleaning in accordance with the endoscope manufacturer's IFU.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
13. Performs manual cleaning using the type of water and cleaning solution recommended by the endoscope manufacturer.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
14. Performs manual cleaning using a freshly prepared cleaning solution.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
15. Follows the cleaning solution manufacturer's IFU for	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
a. water quality, hardness, and pH;	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
b. concentration and dilution;	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
c. water temperature;	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
d. contact time;	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
e. conditions of storage;	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
f. use life and shelf life.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	

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16. Completely submerges the endoscope in the cleaning solution during the cleaning process. a. Detaches removable parts (e.g., valves, buttons, caps) from the endoscope and submerges them if recommended by the endoscope manufacturer's IFU.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
17. Cleans all exterior surfaces of the endoscope with a soft, lint-free cloth or sponge saturated with the cleaning solution.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
18. Cleans all accessible channels and the distal end of the endoscope with a cleaning brush of the length, width, and material recommended by the endoscope manufacturer.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
19. Manually actuates the endoscope valves while cleaning.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
20. Cleans and brushes the elevator mechanism (if present) and the recesses surrounding it with a cleaning brush of the length, width, and material recommended by the endoscope manufacturer. a. Raises and lowers the elevator mechanism throughout the manual cleaning process.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
21. Uses a clean brush for each endoscope cleaning. a. Visually inspects brushes and other items used to clean endoscope channels before use and does not use them if the integrity of the brush or other cleaning item is in question.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
22. Brushes the accessible channels of the endoscope multiple times until no debris appears on the brush. a. Removes debris from the brush before the brush is retracted back through the channel and after each pass by swirling the brush in the cleaning solution and rinsing it.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
23. Flushes the channels of the endoscope with cleaning solution.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	

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Competency Statements/Performance Criteria	Verification Method [See legend above]	Not Met [Explain why]
24. Flushes and rinses the exterior surfaces of the endoscope with tap water until all cleaning solution and residual debris is removed.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
25. Dries the exterior surfaces of the endoscope with a soft, lint-free cloth or sponge and purges all channels with air.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
26. Cleans, brushes, rinses, dries, and high-level disinfects or sterilizes all reusable parts (e.g., valves, buttons, port covers, tubing, water bottles), accessories (e.g., forceps) and cleaning implements (e.g., brushes, channel cleaning adapters).	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
a. High-level disinfects or sterilizes water and irrigation bottles at least daily.		
b. Does not allow any residual water or moisture to remain in the water bottle assembly.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
c. Uses sterile water to fill water and irrigation bottles.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
27. Discards single-use parts, accessories, and cleaning implements after each use and does not reprocess them.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
<b>Inspecting</b> 28. Visually inspects and evaluates endoscopes, accessories, and equipment for	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
a. cleanliness,		
b. missing parts,	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
c. clarity of lenses,	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	

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Competency Statements/Performance Criteria	Verification Method [See legend above]	Not Met [Explain why]
d. integrity of seals and gaskets,	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
e. moisture,	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
f. physical or chemical damage,	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
g. function.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
29. Uses lighted magnification to inspect endoscopes and accessories for cleanliness and damage, as needed.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
30. Removes defective endoscopes, accessories, and equipment from service and sends for repair or replacement per facility policy and procedure.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
<b>High-Level Disinfection or Sterilization</b>	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
31. Conducts mechanical or manual high-level disinfection or sterilization following mechanical cleaning as detailed in items 12-27 above .	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
<b>Mechanical methods</b>	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
32. Checks the expiration date of the high-level disinfectant or liquid chemical sterilant before each use.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
33. Uses a test strip or other FDA-cleared testing device specific to the disinfectant or liquid chemical sterilant and minimum effective concentration of the active ingredient for monitoring solution potency before each use.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	

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34. Performs mechanical processing in accordance with the endoscope manufacturer's IFU and the mechanical processor manufacturer's IFU. a. Verifies compatibility between the endoscope and the mechanical processor before processing.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
b. Positions the endoscope and accessories within the mechanical processor in a manner that ensures contact of the processing solutions with all surfaces of the endoscope.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
c. Ensures all connectors between the endoscope and the mechanical processor are connected correctly.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
d. Monitors the mechanical processing cycle to verify it is completed as programmed. • Repeats the entire mechanical cycle if interrupted or not completed as programmed.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
35. Performs mechanical processing using the cleaning, disinfectant, and sterilant solutions and chemicals recommended by the endoscope manufacturer and the mechanical processor manufacturer.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
36. Handles chemicals and solutions used for cleaning and processing flexible endoscopes and endoscope accessories in accordance with local, state, and federal regulations and the manufacturer's IFU. a. Verbalizes the location of the safety data sheets for chemicals used for cleaning and processing flexible endoscopes.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
b. Verbalizes the location of the chemical spill kit.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
<b>Manual methods</b>		
37. Checks the expiration date of the high-level disinfectant before each use.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
38. Uses a test strip or other FDA-cleared testing device specific to the disinfectant and minimum effective concentration of the active ingredient for monitoring solution potency before each use.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	



**HICPAC Sample Competency Verification Tool: Reprocessing Flexible Endoscopes**

Competency Statements/Performance Criteria	Verification Method [See legend above]	Not Met [Explain why]
39. Completely immerses the endoscope in the high-level disinfectant solution for the designated time according to the device and high-level disinfectant manufacturer's IFU.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
40. Flushes and fills lumens and ports with the high-level disinfectant, then completely immerses the items in the disinfectant solution for the designated time.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
41. Thoroughly rinses the endoscope and all of its channels and ports with water that meets the manufacturer's specifications or as recommended by professional organizations after disinfection. a. Rinses all removable parts and endoscope accessories.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
<b>May be required for both mechanical and manual methods</b> 42. Flushes endoscope lumens with 70% to 90% ethyl or isopropyl alcohol according to the endoscope manufacturer's IFU.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
43. Dries the exterior surfaces of the endoscope with a soft, lint-free cloth or sponge. a. Purges the endoscope channels with air.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
b. Dries all removable parts and endoscope accessories.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
<b>Sterilization</b> 44. Packages and sterilizes endoscopes and endoscope accessories in accordance with the manufacturers' IFU.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
<b>Storing</b> 45. Stores flexible endoscopes in accordance with the endoscope and storage cabinet manufacturers' IFU. a. Does not store flexible endoscopes in their original shipment cases.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
b. Stores flexible endoscopes with all valves open and removable parts detached, but stored with the endoscope.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	

**HICPAC Sample Competency Verification Tool: Reprocessing Flexible Endoscopes**

Competency Statements/Performance Criteria	Verification Method [See legend above]	Not Met [Explain why]
46. Wears clean, low-protein, powder-free, natural rubber latex gloves or latex-free gloves when handling processed endoscopes and when transporting them to and from the storage cabinet.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
47. Verbalizes facility-specific visual cue for identifying processed endoscopes.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
48. Visually inspects endoscopes and storage cabinets for cleanliness before placing endoscopes into or removing them from the cabinet.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
49. Stores sterile items in a sterile storage area per facility policy and procedure.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
<b>Recording</b>		
50. Records the following processing information:	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
a. date and time,		
b. identity of endoscope and endoscope accessories,	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
c. method and verification of cleaning and results of cleaning verification testing,	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
d. number or identifier of the mechanical processor or sterilizer and results of process efficacy testing,	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
e. identity of the persons performing the processing,	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
f. lot numbers of the processing solutions,	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	

**HICPAC Sample Competency Verification Tool: Reprocessing Flexible Endoscopes**

Competency Statements/Performance Criteria	Verification Method [See legend above]	Not Met [Explain why]
g. disposition of defective items or equipment,	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
h. maintenance of water systems, endoscopes and endoscope accessories, and processing equipment.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
51. Records the following procedural information: a. date and time,	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
b. identity of the patient,	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
c. procedure,	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
d. identity of the licensed independent practitioner performing the procedure,	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	
e. identity of the endoscope and endoscope accessories used during the procedure.	<input type="checkbox"/> DEM <input type="checkbox"/> S <input type="checkbox"/> RWM <input type="checkbox"/> V <input type="checkbox"/> DO <input type="checkbox"/> SBT <input type="checkbox"/> P&P <input type="checkbox"/> Other <input type="checkbox"/> DA <input type="checkbox"/> CS <input type="checkbox"/> KAT	

**This section to be completed by manager:**

The employee named below has completed facility-required competency verification activities related to reprocessing flexible endoscopes.

☐ Yes      ☐ No (Incompletely verified, see Action Plan)

**Action Plan:**

**Employee Name:** \_\_\_\_\_ **Employee Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Evaluator Name:** \_\_\_\_\_ **Evaluator Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Manager Name:** \_\_\_\_\_ **Manager Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Available from: <https://www.cdc.gov/hicpac/recommendations/flexible-endoscope-reprocessing.html>