

**University of Michigan Hospitals and Health Centers**

**INFECTION CONTROL – CLINIC SITE REVIEW FORM**

Site:  
 Address:  
 Phone:  
 Office Manager:  
 IC liaison:

Medical Director:  
 Administrator:  
 Nursing Manager:  
 Reviewer:  
 Date of Visit:

Recommendations in **bold print**.

	Yes	No	N/A	Recommendations, References, or Comments
<b>Manager Interview</b>				
Do you notify health department of reportable diseases?				
Is list from health department posted?				
Have all eligible staff received TB skin test within the past year?				
Are competencies up to date for staff who reprocess endoscopes, other instruments, use the autoclave?				
<b>Bloodborne Pathogen Standards</b>				<b>Include lab area in survey</b>
Have all staff received IC training on Safe Practices & Infectious Diseases & TB within the past year? NOTE: on-line competency alone does NOT meet the requirement				
Are eating, drinking observed where specimens, blood are handled?				
Are sharps containers, red bags, biohazard buckets located where needed?				
Do red bags, biohazard buckets contain regulated medical waste?				
<b>Employee Interview (sample # ___)</b>				
Do you know what to do if you have a body substance exposure, eg, needlestick?				
Can assigned staff verbalize toy cleaning procedure or policy?				
<b>Waiting Room</b>				
Is area clean?				
Are toys clean?				
<b>Exam/Treatment Room Assessment</b>				
Are exam gloves available?				
Are face protection (goggles, masks or faceshields) & gowns available?				
Are sharps containers < 3/4 full?				

	Yes	No	N/A	Recommendations, References, or Comments
Do red bags, biohazard buckets contain regulated medical waste?				
Are soap dispensers disposable, or if not, cleaned when empty (not topped off)?				
Is antimicrobial soap available for staff to use prior to invasive procedures?				
Are any patient care items under sink?				
Are any multi dose vials (MDVs) outdated?				
Is room clean, including exam table?				
Is disinfectant cleaner available?				
Are soiled & clean linen separated?				
Are clean, sterile supplies stored in closed cabinets, drawers or so as to avoid contamination?				
Are clean, sterile supplies away from splash zone of sink?				
Are irrigation solutions (500, liter bottles) labeled, discarded w/in 24 hours of opening?				
<b>Clean Storage Room or Area</b>				
Are patient care items off the floor?				
Are sterile packs rotated "first in first out"?				
Is "event-related" sterility used?				
<b>Refrigerators</b>				
Are separate refrigerators available for specimens, medications, patient food?				
Are temperature logs in use & up-to-date (temps logged daily)?				
Does specimen refrigerator have a biohazard label?				
Are any food, medications in specimen refrigerator?				
Are medications past expiration date, including multi-dose vials (MDVs)?				
<b>Utility Room</b>				
Do red bags or biohazard buckets contain only/mostly regulated medical waste?				
Are clean storage and soiled utility rooms separated?				
If glutaraldehyde is used, is ventilation adequate?				
<b>Process Observation</b>				
<b>Equipment Reprocessing</b>				
Are single use devices used once, then discarded?				
Are gloves, gowns, face protection available?				
Are written procedures available for each device reprocessed?				
Are devices that contact mucous membrane, non-intact skin high level disinfected?				

	Yes	No	N/A	Recommendations, References, or Comments
Are devices that contact sterile or vascular tissue sterilized?				
Does workflow proceed from soiled to decontaminated to disinfected/sterilized to storage?				
<b>Disinfectant Safely, Effectively Used:</b>				
Are containers: completely covered?				
Are devices completely immersed in disinfectant?				
Are items soaked at least 20 minutes?				
Is timer used to measure soak time?				
Are devices rinsed thoroughly after use?				
<b>Autoclave Maintained:</b>				
Is Spore check or Attest performed weekly or with every load if run less often?				
Is log up-to-date?				
If test is positive, are staff aware of follow-up procedure?				
Are items dated with date of sterilization?				

**Procedures & Equipment:**

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