| **COMMON UNIT SPECIFIC AREAS TO MONITOR** | Person assigned to monitor | Week 1Date and Initials | Week 2Date and Initials | Week 3Date and Initials | Week 4Date and Initials |
| --- | --- | --- | --- | --- | --- |
| **CLEAN STORAGE ROOM** -Organize **weekly and PRN**. All supplies must be stored 8 inches above floor and 18 inches from the ceiling. No shipping boxes used as containers. |  |  |  |  |  |
| **STAFF LOUNGE -**Clean and organize **weekly and PRN** |  |  |  |  |  |
| **NURSING STATION**- Computers, keyboards, countertops, and phones are to be cleaned with disinfectant wipes **each shift and PRN**. |  |  |  |  |  |
| **MEDICATION CARTS** -Clean with disinfectant wipes and organize **weekly and PRN** |  |  |  |  |  |
| **PATIENT REFRIGERATORS**Clean with soap and water. Discard outdated or unlabeled food/drinks **weekly and PRN** |  |  |  |  |  |
| **MEDICATION REFRIGERATORS**Clean with soap and water. Discard outdated or unlabeled food/drinks **weekly and PRN** |  |  |  |  |  |
| **DICTATION AREA -**Organize and clean with disinfectant wipes **Weekly and PRN** |  |  |  |  |  |
| **NOURISHMENT ROOM AND MICROWAVE-** Clean microwave and ice machine with soap and water. Clean and organize cabinets. **Weekly and PRN** |  |  |  |  |  |
| **ICE MACHINE/COOLERS –** Clean cooler, ice scoop and scoop storage container according to IC Policy after each use and daily. Ice coolers used for non-consumables are labeled as such |  |  |  |  |  |
| **MEDICATION MACHINE** - Clean with disinfectant wipes **weekly and PRN** |  |  |  |  |  |
| **DEFIBRILLATOR -** Clean with disinfectant wipes **weekly and PRN** |  |  |  |  |  |
| **CRASH CART -** Clean with disinfectant wipes **weekly and PRN** |  |  |  |  |  |
| **CHART RACK AND CHARTS -** Clean with disinfectant wipes **weekly and PRN** |  |  |  |  |  |
| **BLANKET WARMER -** Clean with disinfectant wipes **weekly and PRN** |  |  |  |  |  |
| **LINEN HAMPERS AND ISOLATION CARTS-** Clean with disinfectant wipes **weekly and PRN** |  |  |  |  |  |
| **COMPUTERS ON WHEELS –**Clean with disinfectant wipes **weekly and PRN** |  |  |  |  |  |
| **HAND SANITIZERS –A**ssess for empty hand sanitizers and fill. Hand sanitizers should be in the following areas if there are no sinks: medication rooms, laundry areas, food preparation and storage areas, sterile supply processing areas, and soiled utility rooms |  |  |  |  |  |
| **PATIENT EQUIPMENT –**WHEELCHAIRS VITAL SIGN MACHINEOPTHALMOSCOPE AND OTOSCOPE DOPPLERTHERMOMETERS ACCUDATABLADDER SCANNERClean with disinfectant wipes **weekly and PRN** |  |  |  |  |  |
| **CHECK EXPIRATION DATES MONTHLY** |  |  |  |  |  |
| **CLEANING SOLUTIONS –**check to make sure they are mixed appropriately and are not expired  |  |  |  |  |  |
| **GENERAL ENVIRONMENT –** **Walk through and place work orders for the following:**Burnt out light bulbs RustCracks in floor or wall Cleanliness of floorsDamaged ceiling tiles Water intrusionDusty air vents |  |  |  |  |  |
| **Unit specific equipment – (please fill in your unit specific equipment and assignments)** |  |  |  |  |  |
| **General comments** |