I. Description

Describes the practices followed by Clinical Engineering to reduce infection risks associated with medical equipment.

II. Policy

A. Staff

1. Staff should adhere to guidelines established by the Occupational Health Service (OHS). Please refer to the Occupational Health Services policy: Infection Prevention and Screening Program: Occupational Health Service.

   a. Staff who enter patient rooms must be familiar with the placement and meaning of UNC Hospitals’ isolation precautions signs. Clinical Engineering staff who must enter an isolation room must follow the guidelines provided on the isolation sign. Nursing staff can assist in assuring that the proper protective equipment (PPE) is available and worn appropriately. An Infection Preventionist may be consulted if needed. The Infection Prevention policy: Isolation Precautions is to be used as a resource for detailed guidelines.

   b. Standard Precautions are followed for all patients. Staff should be familiar with and follow the Infection Prevention policies: Exposure Control Plan for Bloodborne Pathogens and the Tuberculosis Control Plan.

   c. Clinical Engineering staff who must enter the room of a patient on airborne
precautions should wear a properly fitting N95, a Controlled Air Purifying Respirator (CAPR), or a Powered Air-Purifying Respiratory (PAPR) per the Environmental Health and Safety policy: Respiratory Protection Program.

d. Clinical Engineering staff must perform hand hygiene as described in the Infection Prevention policy: Hand Hygiene and Use of Antiseptics for Skin Preparation.

e. PPE must be worn (e.g., gloves, protective eyewear, mask, gown) per Standard Precautions when working with equipment that may be contaminated with blood or other potentially infectious materials.

f. Infection prevention education (e.g., OSHA Bloodborne Pathogen and Tuberculosis training) is provided initially upon employment and annually via Learning Made Simple (LMS) modules.

B. Equipment

1. Clinical Engineering is not responsible for cleaning equipment. All equipment must be cleaned and decontaminated by the user prior to sending for routine service or repair. Clinical Engineering will not accept equipment that has not been cleaned.

2. When equipment needs to be serviced on the patient-care area, it must be cleaned and decontaminated prior to requesting service by Clinical Engineering staff.

3. Equipment that may have internal contamination with blood or other potentially infectious materials and cannot be accessed for decontamination must be labeled with a BIOHAZARD tag. The tag must state the area of suspected contamination. This alerts Clinical Engineering of the need to take precautions when performing the work. Consultation with Infection Prevention is available as needed.

C. Implementation

It is the responsibility of the Director of Clinical Engineering and their designee to implement this policy.

III. Related Policies

Environmental Health and Safety Policy: Respiratory Protection Program

Infection Prevention Policy: Exposure Control Plan for Bloodborne Pathogens

Infection Prevention Policy: Hand Hygiene and Use of Antiseptics for Skin Preparation

Infection Prevention Policy: Isolation Precautions

Infection Prevention Policy: Tuberculosis Control Plan

Occupational Health Services Policy: Infection Prevention and Screening Program: Occupational Health
## Approval Signatures

<table>
<thead>
<tr>
<th>Step Description</th>
<th>Approver</th>
<th>Date</th>
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<tbody>
<tr>
<td>Policy Stat Administrator</td>
<td>Kimberly Novak-Jones: Nurse Educator</td>
<td>09/2023</td>
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<td></td>
<td>Thomas Ivester: CMO/VP Medical Affairs</td>
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<td>Emily Vavalle: Dir Epidemiology</td>
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<td>Sherie Goldbach: Project Coordinator</td>
<td>09/2023</td>
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## Applicability

UNC Medical Center