|  |  |  |
| --- | --- | --- |
| [Insert Facility Name Here] |  |  |
| [Insert Other Information Here ] |  |  |
|  |  |  |
|  |  |  |
| Operating or Procedure Room Cleaning Checklist—Before the first procedure of the day | **Completed** | **Not Applicable** |
| 1. Remove unnecessary equipment
 |  |  |
| 1. Damp dust from top to bottom:
 |  |  |
| * Overhead lights
 |  |  |
| * All reachable flat surfaces
 |  |  |
| * + Furniture
 |  |  |
| * + Booms
 |  |  |
| * + Equipment
 |  |  |
| * + Countertops
 |  |  |
|  |  |  |

|  |  |  |
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| Operating or Procedure RoomCleaning Checklist—End of procedure (after the patient has left the area) | Completed | **Not Applicable** |
| 1. Perform hand hygiene
 |  |  |
| 1. Don personal protective equipment (PPE)
 |  |  |
| 1. Collect linen
 |  |  |
| 1. Remove large debris from floor
 |  |  |
| 1. Remove trash and linen
 |  |  |
| 1. Clean and disinfect:
 |  |  |
| * Anesthesia cart, including the top and drawer handle
 |  |  |
| * Anesthesia equipment (IV poles and pumps)
 |  |  |
| * Anesthesia machine
 |  |  |
| * Patient monitors, including cables
 |  |  |
| * OR beds
 |  |  |
| * Reusable table straps
 |  |  |
| * Bed attachments
 |  |  |
| * Positioning devices
 |  |  |
| * Patient transfer devices
 |  |  |
| * Overhead procedure lights
 |  |  |
| * Tables
 |  |  |
| * Mayo stands
 |  |  |
| * Mobile and fixed equipment
 |  |  |
| * + - Suction regulators
 |  |  |
| * + - Medical gas regulators
 |  |  |
| * + - Imaging monitors
 |  |  |
| * + - Radiology equipment
 |  |  |
| * + - Electrosurgical units
 |  |  |
| * + - Microscopes
 |  |  |
| * + - Robots
 |  |  |
| * + - Lasers
 |  |  |
| 1. Clean floors if soiled or potentially soiled (splash, splatter, dropped item)
 |  |  |
| 1. Spot clean walls if visibly soiled
 |  |  |
| 1. Remove PPE
 |  |  |
| 1. Perform hand hygiene
 |  |  |

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| Operating or Procedure RoomCleaning Checklist—Terminal cleaning | Completed | **Not Applicable** |
| 1. All floors – wet vacuum or a single-use mop
 |  |  |
| 1. Anesthesia carts
 |  |  |
| 1. Anesthesia equipment
 |  |  |
| 1. Anesthesia machines
 |  |  |
| 1. Patient monitors, including cables
 |  |  |
| 1. OR beds
 |  |  |
| 1. Reusable table straps
 |  |  |
| 1. OR bed attachments
 |  |  |
| 1. Positioning devices
 |  |  |
| 1. Patient transfer devices
 |  |  |
| 1. Overhead procedure lights
 |  |  |
| 1. Tables and Mayo stands
 |  |  |
| 1. Mobile and fixed equipment
 |  |  |
| 1. Storage cabinets, supply carts, and furniture
 |  |  |
| 1. Light switches
 |  |  |
| 1. Door handles and push plates
 |  |  |
| 1. Telephones and mobile communication devices
 |  |  |
| 1. Computer accessories
 |  |  |
| 1. Chairs, stools, and step stools
 |  |  |
| 1. Trash and linen receptacles
 |  |  |

|  |  |  |
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| Pre- and Postoperative AreasCleaning Checklist—Patient Discharge | **Completed** | Not Applicable |
| 1. Perform hand hygiene
 |  |  |
| 1. Don personal protective equipment (PPE)
 |  |  |
| 1. Collect linen
 |  |  |
| 1. Clean and disinfect:
 |  |  |
| * + Patient monitors
 |  |  |
| * + Patient beds or stretchers including the straps, handles, side rails, and attachments
 |  |  |
| * + Over-bed tables
 |  |  |
| * + Television remote
 |  |  |
| * + Call lights
 |  |  |
| * + Infusion pumps and IV poles
 |  |  |
| 1. Clean floors if soiled or potentially soiled (eg, splash, splatter, dropped item)
 |  |  |
| 1. Spot clean walls if visibly soiled
 |  |  |
| 1. Remove PPE
 |  |  |
| 1. Perform hand hygiene
 |  |  |

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| Preoperative and Postoperative AreasCleaning Checklist—Terminal cleaning  | Completed | Not applicable |
| 1. All floors – wet vacuum or a single-use mop
 |  |  |
| 1. Patient monitors, including cables
 |  |  |
| 1. Patient beds or stretchers
 |  |  |
| 1. Over-bed table
 |  |  |
| 1. Television remote controls
 |  |  |
| 1. Call lights
 |  |  |
| 1. Mobile and fixed equipment
 |  |  |
| 1. Storage cabinets, supply carts, and furniture
 |  |  |
| 1. Light switches
 |  |  |
| 1. Door handles and push plates
 |  |  |
| 1. Telephones and mobile communication devices
 |  |  |
| 1. Computer accessories
 |  |  |
| 1. Chairs and stools
 |  |  |
| 1. Trash and linen receptacles
 |  |  |