### **CLEANING TECHNIQUES**

NO BROOMS → WEAR PPE → USE 3 BUCKET TROLLEY
 → UNIDIRECTIONAL WAY
 → PROPER DILUTION OF DISINFECTANT
 → DO NOT COUBLE DIP MOPS
 → 1 DIP COVERS 120 sq. Ft. Area
 → AFTER 240 sq. Ft. → CHANGE THE SOLUTION
 → PATIENT AREA
 → FIGURE OF 8 AREA

CLEANING AND DISINFECTION OF CLEANING EQUIPMENTS MOP SOAP WATER (WET) IMMERSE IN 0.5% HYPOCHLORITE SOLUTION 30 MINS **PLAIN WATER**  DRY MOP **OPEN AREA** → CLEAN WITH HAND HELD BRUSH MICROFIBRE MOPS WASH WITH MILD SOAP HOT WATER BUCKETS WASH WITH SOAP AND WATER ightarrow $\rightarrow$ 0.5% HYPOCHLORITE 30 MINS RINSE WITH PLAIN WATER CLEANING TROLLEY SOAP AND WATER 0.5% HYPOCHLORITE

### CLEANING SCHEDULE

	LOCATION	FREQUENCY	DEACENT
a)	WARD	2 TIMES/DAY (OR AS REQUIRED)	REAGENT
b)	OFFICE		ALDEHYDE
c)	PATIENT ROOM	2 TIMES/DAY (OR AS REQUIRED)	ALDEHYDE
		2 TIMES/DAY	ALDEHYDE
d)	PHARMACY	2 TIMES/DAY	QUAT
e)	RADIOLOGY	2 TIMES/DAY	
f)	PATIENT ROOM	2 TIMES/DAY	QUAT
	(ISOLATION WARD)	Z TIMES/DAT	ALDEHYDE
~1			
g)	TOILETS	3 TIMES/DAY (OR AS REQUIRED)	

# DILUTION OF SOD. HYPOCHLORITE

1:100 (1% DILUTION) SMALL BODY FLUID SPILL SMALL BLOOD SPILL (<10 ML) 1:10 (1% DILUTION) LARGE BODY FLUID SPILL LARGE BLOOD SPILL (>10 ML) 1:100 (1% DILUTION) LINEN DISINFECTION 0 5 MINS RINSE WITH PLAIN WATER 1:200 (0.5% DILUTION)

**CLEANING EQUIPMENTS** 

0

# OPILL MANAGEMENT

(LARGE, >10 ML)

→ CONFINE THE AREA

1

WEAR PPE (PERSONAL PROTECTIVE EQUIPMENT)

┺

COVER WITH NEWSPAPER / ABSORBENT CLOTH

J

POUR 10% HYPOCHLORITE SOLUTION

 $\mathbf{1}$ 

5 MINS WAIT

J

DISCARD THE PAPER/CLOTH

J

WIPE WITH MOP WITH 10% HYPOCHLORITE SOLUTION

### BMALL PPILL MANAGEMENT

(SMALL, FEW DROPS < 10 ML)

→ WEAR PERSONAL PROTECTIVE EQUIPMENT (PPE)

i.e. MASK, GLOVES, EYE GEAR, APRON, BOOT

WIPE WITH NEWSPAPER MOISTENED WITH HYPOCHLORITE SOLUTION (1%)

WAIT 5 MINS.

CLEAN WITH MOP MOISTENED WITH HYPOCHLORITE SOLUTION

DISPOSAL IN BIOHAZARD BAGS

## ISOLATION & BARRIER NURSING

- → RESTRICT VISITORS
- → REMOVE SHOES BEFORE ENTERING
- → BED SPACE
- 1.2 METER
- → KEEP BELONGINGS (BAGS) OUTSIDE
- → VISITORS SHOULD SIT IN PATIENT BED
- → CHILDREN BELOW 12 YRS. -

NOT ALLOWED

→ WEAR LMASK, APRON, GLOVES PRIOR ENTERING

#### **CLEANING OF ISOLATION WARD**

- → WEAR PPE
- → CLEAN ENVIRONMENT

1

**CLEAN BEDS** 

J

CLEAN TOILETS

 $\downarrow$ 

**CLEAN FLOORS** 

# TINEN MUNAMEMENT

K V DIRTY SOILED GREEN COLORED TROLLEY (WITH BLOOD, URINE, STOOL ETC.) KEEP IN DESIGNATED AREA IN YELLOW COLORED TROLLEY LAUNDRY KEEP IN DESIGNATED AREA IN LAUNDRY SOAK IN 0.5% BLEACHING SOLUTION 30 MIN. 1 RINSE WITH PLAIN WATER WASHING REPAIR IF NEEDED ← DRYING/HYDRO EXTRACTION

**DELIVERY TO WARDS IN COVERED TROLLEY** 

### STANDARD PRECAUTIONS

- → WASH HANDS
- → WEAR GLOVES
- → WEAR MASKS
- → WEAR GOWN

# KITCHEN STEPS

**RAW FOOD** 

STORAGE

1

**CLEANING OF THE ITEMS** 

FOOD PREPARATION

DISPOSAL OF WASTE ← ↓

STORAGE & DISPENSING OF PREPARED FOOD

# HAND WASH WHEN ?!

- → BEFORE PATIENT CONTACT
- → BEFORE ASEPTIC TASK
- → AFTER BODY FLUID EXPOSURE RISK
- → AFTER PATIENT CONTACT
- → AFTER CONTACT WITN PATIENT SURROUNDING

## WHEN TO USE GLOVES

- → CHANCE OF CONTACT WITH BODY FLUIDS
- → INVASIVE PROCEDURE
- → HANDLING SOILED INSTRUMENTS
- → DISPOSAL OF WASTE
- → HANDLING CHEMICALS

### BHW WASTE MANAGEMENT

BUCKET

TYPE OF TRANSPORT 1. YELLOW → YELLOW COLORED→ BMW TYPE OF WASTE PRE TREATMENT DISPOSAL ANATOMICAL INCINERATION TROLLEY WASTE SOILED WASTE INCINERATION (DRESSING, PLASTER, COTTON) EXPIRED MEDICINE **RETURN TO MANUFACTURER** CHEMICAL WASTE INCINERATION CHEMICAL LIQUID HYPOCHLORITE WASTE (LAB LIQUID SOLUTION WASTE) CHAMBER/ETP DISCARDED LINEN/ NON LCHLORINATED **MATTRESS** DISINFECTION 1 INCINERATION MICROBIOLOGY & → AUTOCLAVE → HYPOCHLORITE LAB WASTE SOLUTION CHAMBER/ETP DRAIN 2. RED → RED COLORED → BMW TUBE BOTTLE → AUTOCLAVE → **SHREDDER PLASTIC TROLLEY CATHETHER** 1 PLASTIC PART RECYCLER **OF SYRINGE** 3. WHITE → WHITE → NEEDLE, SYRINGE → AUTOCLAVE →  $\rightarrow$  BMW **SHREDDER** (PUNCTURE COLORED TROLLEY **PLASTIC** PROOF, **TAMPER PROOF** CONTAINER, LEAK PROOF) 4. BLUE → PUNCTURE PROOF → BMW → GLASS → AUTOCLAVE RECYCLER **LEAK PROOF** TROLLEY (BROKEN AMPU) CONTAINER

#### 1. PEP recommendations

#### a. Occupational Exposure

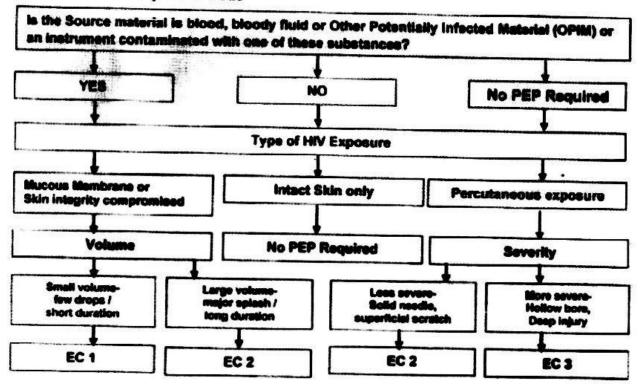
Exposure Codes *	HIV Source Code**	PEP Recommendations	Duration
1	1	Not warranted	
1	12		28 days
2	11		1
2	2	Recommended	
3	1 or 2	] .	1
2/3 Unknown		Consider PEP, if HIV prevalence is high in the given population & risk categorisation	

#### PEP regimen

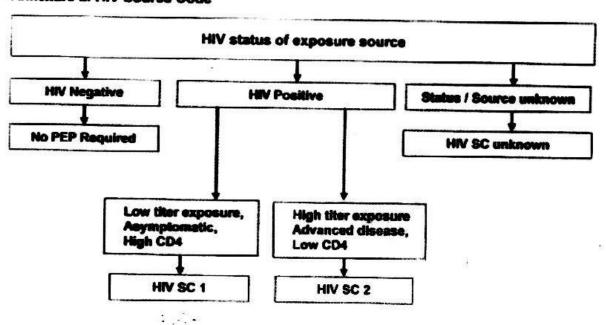
- a. Wherever PEP is indicated and source is ART naive or unknown: recommended regimen is Tenofovir 300 mg + Lamivudine 300 mg + Efavirenz 600 mg once daily for 28 days. Wherever available, single pill containing these formulations should libe used. Dual drug regimen should not be used any longer in any situation for PEP.
- b. The first dose of PEP regular should be administered as soon as possible, preferably within 2 hours of exposure and the subsequently dose should be given at bed time with clear instruction to take it 2-3 hours after dinner & to avoid fatty food in dinner.
- c. In case of intolerance to Efavirenz, regimen containing Tenofovir + Lamivudine + PI (ATV/r or LPV/r) can be used after expert consultation by an experienced physician
- d. In case of exposure where Source is on ART, Tenofovir 300 mg + Lamivudine 300 mg + Efavirenz 600 mg should be started immediately. And an expert opinion should be sought urgently by phone/e—mail from CoE/ART Plus center
- e. Appropriate and adequate counselling must be Provided regarding possible side effects adherence and follow up protocol

### 9. Assessing the exposure Code

### Annexure 1: HIV Exposure Code



#### Annexure 2: HIV Source Code



# Hydrogen Peroxide

(Example: Spor-Klenz®)

The following are the Standard Operating Procedures for the use of Hydrogen Peroxide as a cold sterilization product:

1. Agent used:

Hydrogen Peroxide

2. How agent is prepared:

Combine 1 part base concentrate to 99 parts cool tap water

How long agent is active once prepared:

Use immediately; do not store

- 4. The date of preparation of the sterilizing solution must be noted on the container.
- 5. The time required for sterilization of instruments/supplies:

11 hours

6. How the sterilant is removed prior to use in an aseptic technique:

Hydrogen Peroxide is removed by thoroughly rinsing with sterile saline or sterile water

# SOP on chemical Sterilization of Surgical Equipments

### Glutaraldehyde

(Example: Cidex®)

The following are the Standard Operating Procedures for the use of Glutaraldehyde as a cold sterilization product:

1. Agent used:

Glutaraldehyde

How agent is prepared:

Pour entire contents of the activator into the solution container and shake well. Solution should immediately turn green.

3. How long agent is active once prepared:

15 days

- 4. The date of preparation of the sterilizing solution must be noted on the container.
- 5. The time required for sterilization of instruments/supplies:

10 hours

6. How the sterilant is removed prior to use in an aseptic technique:

Glutaraldehyde is removed by thoroughly rinsing with sterile saline or sterile water

# SOP for making 1% Sodium Hypochlorite solution

- I. PROCEDURE [A. Preparation of (1% sodium hypochlorite]
- 1. Prepare fresh daily.
- 2. Record the date prepared on the bottles.
- 3. After 24 h, pour unused solution down the drain and flush the drain with running water to prevent corrosion of pipes.

#### 1. Preparation of Chlorine solution using Hypochlorite Solution

ommercially available ypochlorite solution	Concentration	Z Solution in ml	Add water in mile
*	2%	400	600
	1%	200	800
	0.50%	100	900
10%	0.50%	50	950
	1%	100	900
	ais and taken 28 masters subtant	200	

#### 2. Preparation Chlorine Solution using Bleaching powder Solution

	PREPARATION OF D	ILUTE SOLUTIONS OF	BLEACHING POWDER
gaching powder)	of water	sired concentration	Bleaching powder in grains per nice
	The street of	0.50%	25
		1%	50
20%	1 litre	2%	100
		5%	250
		10%	500
	1 Litre	0.50%	20
		1%	40
25%		2%	
		5%	200
		10%	400
		0.5%	17
		1%	33
30%	1 Litre	2%	67
		5%	167
A Laborate		10%	is eserced communications