Wake Forest Baptist Medical Center	CP 1 Maintenance – Daily, Weekly, Monthly, As Needed	**Department:**	Central Processing Lab
		Effective Date:	04/2011
		Revised Date:	2/5/2019
		Contact:	Central Processing Lab Section Manager
CLIA Medical Director Signature:		**Approved Date:**	2/5/19

1. **General Procedure Statement:**

   a. **Purpose:** To provide laboratory testing personnel with guidelines for daily, weekly, monthly, and as needed maintenance

   b. **Responsible Department/Scope:**

      i. Procedure owner/Implementer: Central Processing
      ii. Procedure prepared by: Jennifer Hausman
      iii. Who performs procedure: Central Processing Team Members

2. **Procedure:**

   a. **Spin Rotation**

   Note: Upon completion of each item listed below, initial the Central Processing Spin Rotation Maintenance Checklist in the corresponding box for the item and date. If any checklist item is unacceptable, document the corrective action on the checklist.

      i. **Daily – 1st Shift**

         1. Complete Reproductive Endocrinology (RENDO) and Clemmons Allergy Packing Lists

            a. Follow Job Aide CP 1.1 RENDO and Clemmons Allergy Packing Lists

         2. Clean the work areas with disinfecting wipes and restock supplies

         3. Clean the inside of the centrifuges with disinfecting spray and paper towels

            a. Remove any specimen labels from the carriers

4. Record the Spin refrigerator and freezer temperatures according to procedure CP 2 Monitoring of Temperature Regulated Equipment

5. Check Hydrochloric acid (HCl), Boric Acid, and Acetic Acid expiration dates and volumes

    a. Verify the HCl has not expired

        i. If expired, follow Job Aide CP 1.2 Refilling HCl Dispenser

    b. Determine if sufficient volume of HCl remains in pump bottle

        i. If insufficient volume, follow Job Aide CP 1.2 Refilling HCl Dispenser

    c. Verify the Boric Acid and Acetic Acid have not expired

        i. If expired, replace with valid expiration preservatives
        ii. Disposal of expired reagents

            1. Remove from use
            2. Label EXPIRED
            3. Contact Environmental Health & Safety for pickup and disposal

6. Discard Extra Urine Culture tubes >72 hours old

    a. Verify and dispose rack in the computer

        i. Open "Container Storage" function
        ii. Select the rack to be discarded
        iii. Verify the Dispose date

            1. Dispose date should be the date you are disposing the samples or 4 days after the date placed in the storage rack

        iv. Select "Dispose All"
        v. Change the "Dispose" date to 4 days from the current date to begin using the rack for the current day's specimens
        vi. Close the "Container Storage" function

    b. Dispose of the specimens in the large biohazard trash (large gray container under the Spin counter)

c. Change the date label on the rack to the current date

Note: The racks should progress in chronological order (1, 2, 3, 4) to match the specimen dates chronologic order

7. Check autoclave buckets; change if full

   a. If bucket is full

      i. Tape the bags closed
      ii. Record CP, date and time, and initials on the tape
      iii. Bring the closed, full bucket to the Autoclave Room
      iv. Obtain a new autoclave bucket and line with 2 bags

         1. Extra autoclave buckets are located in the storage room behind the autoclaves in Microbiology

ii. Daily – 2nd Shift

1. Clean the work areas with disinfecting wipes and restock supplies
2. Clean the inside of the centrifuges with disinfecting spray and paper towels

   a. Remove any specimen labels from the carriers

3. Check HLA, Special Heme, Medical Genetics, PCR, and Allergy bins

   a. Process any samples for stability and move to the appropriate storage area
   b. Ensure samples are in the appropriate testing sections bin

4. Check autoclave buckets; change if full

   a. If bucket is full

      i. Tape the bags closed
      ii. Record CP, date and time, and initials on the tape
      iii. Bring the closed full bucket to the Autoclave Room
      iv. Obtain a new autoclave bucket and line with 2 bags

         1. Extra autoclave buckets are located in the storage room behind the autoclaves in Microbiology

iii. Daily – 3rd Shift

1. Clean the work areas with disinfecting wipes and restock supplies
2. Clean the inside of the centrifuges with disinfecting spray and paper towels
    a. Remove any specimen labels from the carriers
3. Check HLA, Special Heme, Medical Genetics, PCR, and Allergy bins
    a. Process any samples for stability and move to the appropriate storage area
    b. Ensure samples are in the appropriate testing sections bin
4. Check autoclave buckets; change if full
    a. If bucket is full
        i. Tape the bags closed
        ii. Record CP, date and time, and initials on the tape
        iii. Bring the closed full bucket to the Autoclave Room
        iv. Obtain a new autoclave bucket and line with 2 bags
            1. Extra autoclave buckets are located in the storage room behind the autoclaves in Microbiology
5. Change the extra rack at midnight
    a. Place the current day's extra rack in the walk-in refrigerator
    b. Dispose of the specimens in the oldest extra rack in the large biohazard trash (large gray container under the Spin counter)
    c. Place the empty rack into the Spin refrigerator labeled with the current date

iv. Weekly

Note: Some tasks may be performed on various days of the week, but must be performed at least once per week.

1. Rotate the "Rejected Sample" rack and "Hold" bin – Perform on Wednesday
2. Dispose of specimens held in the oldest rejected sample rack and hold bin in the large biohazard trash (large gray container under the Spin counter)
    - i. The discard date should be listed on the rack and bin
    - b. Rotate the "Current" label to the empty rack and bin
    - c. Update the start and discard dates
        - i. Start date: Current date
        - ii. Discard date: Two (2) weeks from current date
3. Perform eyewash maintenance
    - a. Follow Job Aide CP 1.3 Eyewash Maintenance
4. Clean and inspect centrifuge buckets, carriers, and rotors
    - a. Remove the centrifuge buckets and carriers from the medium and large centrifuges
    - b. Clean with disinfecting spray and paper towels
    - c. Inspect buckets, carriers, and rotor for cracks or other damage
        - i. If cracked or damaged, remove from service and notify management
    - d. Clean and inspect the rotor of the small centrifuges
        - i. If cracks or other damage are present, you may remove and/or replace the rotor per the Sorvall Legend Micro 21 Instructions for Use
            1. Notify management if cracks or damage are present
        - ii. If a large amount of blood is spilled in the rotor, you may remove, clean, and replace the rotor per the Sorvall Legend Micro 21 Instructions for Use

5. Verify the balance equilibrium

    a. Remove all items from both sides of the scale
    b. Allow the scale to stop moving
    c. Verify the balance pointer is at equilibrium

        i. If balance is not at equilibrium, use the Zero Adjust Knob at the right end of the beam to make adjustments until the balance is at equilibrium

6. Clean the interior surfaces of the biosafety cabinet

    a. Follow Job Aide CP 1.4 Cleaning the Biosafety Cabinet

7. Complete an inventory review using the Central Processing Supply Checklist

    a. ..\..\..\cp lab staff\FORMS\Supply Checklist.xlsx

v. **Monthly**

1. Clean the exterior surfaces of the biosafety cabinet

    a. Follow Job Aide CP 1.4 Cleaning the Biosafety Cabinet

2. Clean the interior compartments of the biosafety cabinet

    a. Follow Job Aide CP 1.4 Cleaning the Biosafety Cabinet

3. Clean the balance with canned air

    a. Aim the canned air nozzle into the opening below the weighing platform and spray to remove any dust
    b. Repeat on both sides

b. Tube Room Rotation

Note: Upon completion of each item listed below, initial the Central Processing Tube Rotation Maintenance Checklist in the corresponding box for the item and date. If any checklist item is unacceptable, document the corrective action on the checklist.

i. Daily – 1st Shift

1. Check Surg Path (Surgical Pathology), Cyto (Cytology), PCR (Molecular Diagnostics), HLA, Special Heme, and Medical Genetics bins to ensure specimens are directed to the correct lab
    a. Review the tests for samples in each bin and verify the samples are in the correct bin for where the tests are performed
        i. If samples are in the wrong bin, move to the correct bin
    b. Verify samples with a Beaker packing list have the correct destination selected
        i. If samples have an incorrect packing list destination, correct the packing list before samples are picked up or delivered
2. Consolidate loose Surg Path, Cyto, and PCR samples into larger biohazard bags
    a. Place individual, small biohazard bags intended for the same testing lab into large biohazard bags
        i. Pack separate bags for each testing lab – Surg Path, Cyto, and PCR
3. Clean the work areas with disinfecting wipes and restock supplies

ii. Daily – 2nd Shift

1. Consolidate loose Surg Path, Cyto, and PCR samples into larger biohazard bags
    a. Place individual, small biohazard bags intended for the same testing lab into large biohazard bags
        i. Pack separate bags for each testing lab – Surg Path, Cyto, and PCR
2. Clean the work areas with disinfecting wipes and restock supplies

iii. Daily – 3rd Shift

1. Consolidate loose Surg Path, Cyto, and PCR samples into larger biohazard bags
    a. Place individual, small biohazard bags intended for the same testing lab into large biohazard bags
        i. Pack separate bags for each testing lab – Surg Path, Cyto, and PCR
2. Clean the work areas with disinfecting wipes and restock supplies
3. At midnight, pull all requisitions from folders
    a. Pull all manual requisitions, packing lists, and manifests from hanging folders in Central Processing
    b. Place all requisitions, packing lists, and manifests into the red bin labeled "Unsorted" in Client Services
4. At midnight, pull specimen logs from window
    a. Pull all specimen logs with documented specimens from the clipboard at the specimen drop-off window
    b. Place the specimen logs in the Central Processing Manager's folder

iv. Weekly

1. Stock and check expiration dates of supplies in Tube Room (e.g. lab coats, gloves)
    a. Verify all supplies stored in the Tube Room area have valid expiration dates
        i. If expired supplies are found, remove from use and properly dispose of
    b. Restock area with supplies, rotating inventory based on expiration dates
2. Check expiration date of phlebotomy supplies
    a. Verify all phlebotomy supplies have a valid expiration date
        i. If expired supplies are found, remove from use and properly dispose of

3. Check inventory of phlebotomy supplies

    a. Verify supply of phlebotomy supplies is adequate
    b. If additional supplies are needed, contact Inpatient Phlebotomy with a list of needed supplies

        i. Inpatient Phlebotomy will deliver as they are able

c. Other Equipment Maintenance

i. Equipment with a green identification tag will be maintained by clinical engineering per the Department of Pathology Laboratory Equipment Service Procedure

ii. Pumps and balances not labeled with a green identification tag will be maintained according to Chemistry procedure Miscellaneous Maintenance CL-CH172.

3. Review/Revision/Implementation:

a. All procedures must be reviewed at least every 2 years.
b. All new procedures and procedures that have major revisions must be signed by the Department Chairman.
c. All reviewed procedures and procedures with minor revisions can be signed by the designated section medical director.

4. Related Procedures:

a. CP 2 Monitoring of Temperature Regulated Equipment

    i. ..\..\..\cp lab staff\CP Procedures\CP 2 Monitoring of Temperature Regulated Equipment.pdf

b. Environmental Health and Safety Procedure Safety Check of Eyewash Stations and Safety Showers

    i. http://ishare.wakehealth.edu/GoverningPolicy/Policies/Safety%20Check%20of%20Eyewash%20Stations%20and%20Safety%20Showers.pdf

c. Department of Pathology Laboratory Equipment Service Procedure

    i. ..\..\..\cp lab staff\CP Procedures\Lab Compliance, QA, and Safety - Department of Pathology Laboratory Equipment Service Procedure.pdf

d. Chemistry Procedure Miscellaneous Maintenance CL-CH172

5. **References**

   a. Sorvall ST 15 Instruction Manual

   b. Sorvall Legend Micro 21 Instructions for Use

   c. Ohaus Harvard Trip Balance Series 1400 and 1500 Instruction Manual

   d. Labconco Purifier Logic+ Biological Safety Cabinets User's Manual

6. **Attachments:**

   a. Form CP 1.1 Central Processing Spin Rotation Maintenance Checklist

      i. ..\..\..\cp lab staff\FORMS\Spin Rotation Maintenance Checklist (Form CP 1.1).xls

   b. Form CP 1.2 Central Processing Tube Room Rotation Maintenance Checklist

      i. ..\..\..\cp lab staff\FORMS\Tube Rotation Maintenance Checklist (Form CP 1.2).xls

   c. Form CP 1.3 Central Processing Supply Checklist

      i. ..\..\..\cp lab staff\FORMS\Supply Checklist (Form CP 1.3).xlsx

   d. Job Aide CP 1.1 RENDO and Clemmons Allergy Packing Lists

      i. ..\..\..\cp lab staff\CP Procedures\CP 1.1 Job Aide - RENDO and Clemmons Packing Lists.pdf

   e. Job Aide CP 1.2 Refilling HCl Dispenser

      i. ..\..\..\cp lab staff\CP Procedures\CP 1.2 Job Aide - Refilling HCl Dispenser.pdf

   f. Job Aide CP 1.3 Eyewash Maintenance

      i. ..\..\..\cp lab staff\CP Procedures\CP 1.3 Job Aide - Eyewash Maintenance.pdf

   g. Job Aide CP 1.4 Cleaning the Biosafety Cabinet

      i. ..\..\..\cp lab staff\CP Procedures\CP 1.4 Job Aide - Cleaning the Biosafety Cabinet.pdf

h. Wake Forest Baptist Health Specimen Manifest

i. ..\..\..\cp lab staff\FORMS\Wake Forest Baptist Health Specimen Manifest.xlsx

7. Revised/Reviewed Dates and Signatures:

Review Date	Revision Description	Signature
2/5/2019	Updated SOP and Forms, created job aides. Combined SOP CP1 and CP3.	Jennifer A. Hausman, MLS(ASCP)SBB^{CM}

Central Processing Spin Rotation Maintenance Checklist

Month	Year	Manager Review: (Signature and Date)																													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
Daily Maintenance																															
1st Shift																															
Complete RENDO and Clemmons Allergy Packing Lists																															
Clean and restock work areas																															
Clean centrifuges																															
Record Spin refrigerator and freezer temperatures																															
Check HCL, Boric Acid, and Acetic Acid expiration dates and volumes; Replace if needed																															
Discard Extra Urine Culture tubes >72 hours old																															
Check autoclave buckets; change if full																															
2nd Shift																															
Clean and restock work areas																															
Clean centrifuges																															
Check HLA, Special Heme, Medical Genetics, PCR, & Allergy bins																															
Check autoclave buckets; change if full																															
3rd Shift																															
Clean and restock work areas																															
Clean centrifuges																															
Check HLA, Special Heme, Medical Genetics, PCR, & Allergy bins																															
Check autoclave buckets; change if full																															
Change extra rack																															
Weekly Maintenance																															
Rotate Rejected Sample rack and Hold bin																															
Perform Eyewash maintenance																															
Clean and inspect centrifuge buckets, carriers, and rotors																															
Verify balance equilibrium																															
Clean interior surfaces of biosafety cabinet																															
Complete inventory																															
Monthly Maintenance																															
Clean exterior surfaces of biosafety cabinet																															
Clean interior compartments of biosafety cabinet																															
Clean balance with canned air																															

Corrective Action

Central Processing Tube Rotation Maintenance Checklist

Month	Year	Manager Review: (Signature and Date)																														
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
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Check inventory of phlebotomy supplies																																

Corrective Action

Wake Forest® Baptist Medical Center

Central Processing Supply Checklist

Date: _____

Initials: _____

For items in packages, ONLY count unopened packages						
Description	**NS# /Item #**	**Min**	**Par**	**Max**	**On Hand**	**# Needed**
24 Hour Urine Jug Plastic Bags (CS)- unopened (250/CS; ordered indivually) - Bag Reclosable Slide Seal 3ml	02404525	0	0	1		
24 HR Urine Jug - Container Specimen 24.5x11.5x16CM 3L Urisafe (40/CS - order by cs)	NS00002661	20	40	80		
Amber Bags 3x5 (from Phlebotomy)(100 per package)	n/a	10	25	125		
Barcode labels (rolls) - Label Barcode Beaker	09097800	50	50	100		
Biohazard Bags - Large (pk) - Bag Specimen 15x12in (order by cs)	NS00005013	0	1	2		
Biohazard Bags - Small 6x9 (pk) - Bag Specimen THK2 MIL 9x6in	02406705	0	3	10		
Clear 12 x 75 Tube (CASE) - Tube Culture C5ml	NS00004819	1	2	3		
Cytolyt - unopened (Cytology)	n/a	0	1	2		
Decon Disinfectant (Fisher)	04-355-64	0	0.5	1		
Discard Waste Bin - Container Specimen 86oz	15045503	0	1	2		
Envirocide - unopened (Fisher)	50-043-2411	0	1	2		
Glove Liners Lg (pk) - Liner Glove LG	NS00003888	1	3	6		
Glove Liners Med (pk) - Liner Glove Med	NS00000774	1	3	6		
Glove liners, Cotton (JoAnn) (Fisher)	19-013538	2	3	5		
Gloves XS (Case)		0.5	0.5	1		
Gloves SM (CASE)	NS00004877	1	1	2		
Gloves Med (CASE)	NS00004876	1	1	2		
Gloves Lg (CASE)	NS00004875	1	1	2		
kleenex - Tissue Facial STD	08610008	6	10	15		
lab coat sm (pk) (10 pk/cs - Cardinal # C3660WHSK)	BXTC3660WHSK	2	4	14		
lab coat med (pk) (10 pk/cs - Cardinal # C3660WHMK)	BXTC3660WHMK	2	4	14		
lab coat lg (pk)(10 pk/cs - Cardinal # C3660WHLK)	BXTC3660WHLK	2	6	14		
lab coat xl (pk) (10 pk/cs - Cardinal # C3660WHXLK)	BXT3660WHXLK	2	4	14		
lab coat 2x(pk)(10 pk/cs - Cardinal # C3660W2XLK)	BXT3660W2XLK	2	4	14		
lab coat 5x ValueMax (pk)(Fisher)	23-900-519H	1	1	4		
Parafilm - (box) - Film Sealing 250ft x 2in	NS00000616	1	1	2		
Pipettes (box)	04075602	1	1	3		
Pipettes, Sterile (cs) - Pipetter 3.5ml transfer sterile (order by 1000 increments)	NS00002849	0	0	2		
Pipettes, Sterile Fine Tip (pk) - unopened	Micro	0	0	1		
Purple Caps (bag) - opened (Fisher)	22-010-010	0	0.5	1		
SANI-WIPES - Wipe Cleaning LG	02100601	6	8	12		
Sharps Container - Container Sharps XL	02820000	1	1	2		
UA clear Conical tubes (bag) (Fisher)	22-171-622	1	2	3		

Wake Forest® Baptist Medical Center

Central Processing Supply Checklist

Date: _____

Initials: _____

For items in packages, ONLY count unopened packages						
Description	**NS# /Item #**	**Min**	**Par**	**Max**	**On Hand**	**# Needed**
UA culture tubes (pk) - Tube Collection Round 75mm	04640050	1	2	4		
UA Cups (bag) - unopened (75 in a bag/sleeve) - Container Specimen 53mm 5 oz Sterile	15045503	0	1	2		
UA Vac. Tubes Yellow Top (pk) - Tube Urinalysis 100mm, 16mm	04080050	4	10	20		
Urine Transfer Device (bag) - Device Urinalysis 8 CM Vacuette Transfer Pipe (12 bags/case)	04080001	3	6	18		
Wypall Cleaning Wipes unopened (pk) - Wipe cleaning 14.4x12.5IN Wypall	08646001	0	1	2		
6N HCL	89026219	1	2	2		
Acetic Acid 15mL (Peds)	Sendouts	1	3	9		
Acetic Acid 25mL (Adult)	Sendouts	2	6	12		
Boric Acid 1gm tab (bottle)	89024677	1	1	2		
Sodium Carbonate	Sendouts	1	2	3		
Boric warning label (print shop)	n/a	100	200	300		
HCL warning label (print shop)	n/a	100	200	300		
Pen (pk)	Office Depot	1	2	4		
Sharpie (pk)	Office Depot	1	2	4		
Highlighter (pk)	Office Depot	1	1	3		
Red Tape (roll) - Tape Labeling 60yd x .75in	07576002	3	4	6		
Staples (Bostitch) (pk)	Office Depot	1	2	3		
Scotch Tape Rolls	Office Depot	1	3	10		
Large Rubberbands (pk)	Office Depot	1	1	2		

Requisition Name: Ordered By:

Wake Forest Baptist Medical Center	**Job Aide CP 1.1 RENDO and Clemmons Allergy Packing Lists**	**Department:**	Central Processing Lab
		Effective Date:	2/11/2019
		Revised Date:	2/5/2019
		Contact:	Central Processing Lab Section Manager

Procedure:

Reproductive Endocrinology (RENDO) - manually generated

1. Open Wake Forest Baptist Health Specimen Manifest
    a. ..\..\..\cp lab staff\FORMS\Wake Forest Baptist Health Specimen Manifest.xlsx
2. Enter Location as "RENDO"
3. Date will default to current date
4. Enter the Patient's Last, First name and quantity of each specimen type
5. Total Count and Grand Total will automatically calculate
6. Document specific specimen information in the Notes box
7. Enter your name in the Preparer's Signature box
8. Print two (2) copies
9. Place one (1) copy with the samples in a biohazard bag
10. Place one (1) copy in the Outgoing Packing Lists folder

Clemmons Allergy – Beaker generated

1. Open "Packing List Editor" function
2. Click "Create"
3. Select "Miscellaneous Packing List"
4. Click "Accept"

5. Scan the barcode of each specimen to send in "Container" column
6. Select Destination as "Clemmons Lab"
7. Click "Ready"
8. Click "Picked Up"
9. Two (2) packing lists will automatically print
10. Initial both copies of the packing list
11. Place one (1) copy with the samples in a biohazard bag
12. Place one (1) copy in the Outgoing Packing Lists folder

Wake Forest Baptist Medical Center	**Job Aide** **CP 1.2 Refilling HCl Dispenser** CP 2/5/19	**Department:**	Central Processing Lab
		Effective Date:	2/11/2019
		Revised Date:	2/5/2019
		Contact:	Central Processing Lab Section Manager

Procedure:

Same Lot Number

1. Ensure all appropriate personal protective equipment (PPE) is used
2. Obtain the original container of 6N HCl from the corrosive cabinet in the supply storage room
3. Carry the bottle in a means to prevent spillage
4. Verify the lot number on the dispenser bottle matches the original container
5. Gently turn and remove the pump from the dispenser bottle
6. Place the pump on paper towels on the counter
7. Place the dispenser bottle in the sink
8. Pull the splash shield over the sink and bottle
9. Using the funnel, refill the dispenser bottle (leave room for the pump)
10. Replace the pump and gently tighten
11. Return the original bottle to the corrosive cabinet, carrying it in a means to prevent spillage

Different Lot Number

1. Ensure all appropriate personal protective equipment (PPE) is used
2. Obtain the original container of 6N HCl from the corrosive cabinet in the supply storage room
3. Carry the bottle in a means to prevent spillage
4. Verify the lot number on the dispenser bottle does not match the original container
5. Complete a new label with the lot number and expiration date from the original container
6. Gently turn and remove the pump from the dispenser bottle
7. Place the pump on paper towels on the counter

8. Dispose of the remaining 6N HCl
    a. Contain in an acid proof container
    b. Label "Discard"
    c. Contact Environmental Health and Safety for disposal
9. Rinse the dispenser bottle with copious amounts of water (i.e. 5-10 ml of water 3-5 times)
10. Allow bottle to air dry
11. Place the dispenser bottle in the sink
12. Pull the splash shield over the sink and bottle
13. Using the funnel, refill the dispenser bottle (leave room for the pump)
14. Replace the pump and gently tighten
15. Return the original bottle to the corrosive cabinet, carrying it in a means to prevent spillage

Disposal of Empty HCl Bottles

1. Label "Discard"
2. Contact Environmental Health and Safety for disposal

Wake Forest Baptist Medical Center	**Job Aide CP 1.3 Eyewash Maintenance**	**Department:**	Central Processing Lab
		Effective Date:	2/11/2019
		Revised Date:	2/5/2019
		Contact:	Central Processing Lab Section Manager

Procedure:

Note: The eyewash station shall be flushed and cleaned weekly to ensure the station is functioning properly.

1. Pull the eyewash bar counter-clockwise over the sink to start the flow of water
2. Verify the water pressure freely removed the caps
3. Turn off eyewash station by pushing clockwise over the counter
4. Clean with gauze dampened with 1:10 bleach solution
    a. Ensure any calcium buildup has been removed
5. Pull the eyewash bar counter-clockwise over the sink to start the flow of water
6. Allow the water to flow from the eyewash station for at least three (3) minutes
7. Verify good water flow is maintained
8. If the eyewash station fails to operate properly, notify the hospital engineering department and document corrective action on the Central Processing Spin Rotation Maintenance Checklist

Wake Forest Baptist Medical Center	**Job Aide** **CP 1.4 Cleaning the Biosafety Cabinet** CP 2/5/19	**Department:**	Central Processing Lab
		Effective Date:	2/11/2019
		Revised Date:	2/5/2019
		Contact:	Central Processing Lab Section Manager

Procedure:

Note: The intent of cleaning of the biosafety cabinet is to provide a clean, neat work environment. The cleaning is not expected to result in a sterile environment.

Cleaning the Interior - Weekly

1. Ensure the UV light is off
2. Open the biosafety cabinet
    a. If opened above the sash height limit, you may silence the alarm by pressing the OK/Mute button
3. Remove all supplies/equipment from the biosafety cabinet
4. Clean all interior surfaces with disinfecting spray and paper towels
5. Allow disinfecting spray to dry
6. Replace all supplies/equipment
7. Lower the sash, but allow the biosafety cabinet to remain on for at least 2-3 minutes

Cleaning the Interior Compartments - Monthly

1. Ensure the UV light is off
2. Open the biosafety cabinet
    a. If opened above the sash height limit, you may silence the alarm by pressing the OK/Mute button

3. Turn off the blower by pressing the "Blower" button
4. Remove all supplies/equipment from the biosafety cabinet
5. Clean all interior surfaces with disinfecting spray and paper towels
6. Lift the work surface area by grasping the knob handles at either front corner
7. Clean under the work surface area with disinfecting spray and paper towels
8. Clean the top and bottom of the front grille with disinfecting spray and paper towels
9. Replace the work surface area
10. Allow disinfecting spray to dry
11. Replace all supplies/equipment
12. Lower the sash to the sash height limit or below, but do not close the sash
13. Turn on the blower by pressing the "Blower" button
14. Allow the biosafety cabinet to remain on for at least 3-5 minutes before use or closing the sash

Cleaning the Exterior - Monthly

1. Using a damp cloth, clean the exterior surface of the cabinet to remove any accumulated dust
    a. Disinfecting spray and paper towels may be used, as needed

Wake Forest Baptist Health Diagnostic Laboratories	Medical Center Boulevard Winston-Salem , NC 27157 Client Services : 877-933-9522 Fax: 336-716-8866	Location & Phone:	Date: 2/5/2019

PATIENT NAME	SPECIMEN TYPE AND QUANTITY											
	GLD	BL	LV	GR	DKB	PN	GRY	RD	YEL	UA	URINE CHEMISTRY	OTHER
Total Count	0	0	0	0	0	0	0	0	0	0	0	0
Grand total	0											

GLD= gold BL= blue LV= lavendar GR= Li or Na heparin DKB= dark blue PN=pink GRY= gray RD= red YEL= yellow URINALYSIS=conical tube for urinalysis testing URINE CHEMISTRY= clear tube for urine chemistry testing OTHER = please define in NOTES (body fluids, fecal occult blood, etc.)

Preparer's Signature	Notes:
Receiver's Initials, Date and Time of Receipt	