

This form is used to record process parameters for High-Level Disinfection in community health care settings and will assist with tracking of medical devices used on clients in the event of a recall or follow-up investigation. It is not intended for documentation of endoscope reprocessing. For more information, see the <u>Best Practices for Cleaning, Disinfection and Sterilization of Medical</u> <u>Equipment/Devices</u> or email <u>ipac@oahpp.ca</u>.

HLD Name:______ Lot #:_____DIN:_____Date Decanted:______ Expiry Date:______

 Test Strips:
 Strip lot number:
 Date test strip bottle first opened:

Do not use after:_____(6 months after opening)

Date	Time	Test Results	Device	Contact Time	Initials
		🗆 pass 🛛 fail*			
		🛛 pass 🔲 fail*			
		🗆 pass 🛛 fail*			
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		🗆 pass 🛛 fail*			

* Requires system failures procedure documentation and follow up.

Print Name:	Signature:	Initials:
Print Name:	Signature:	Initials:
Print Name:	Signature:	Initials:

References:

Ontario Agency for Health Protection and Promotion (Public Health Ontario), Provincial Infectious Diseases Advisory Committee. Best practices for cleaning, disinfection and sterilization in all health care settings. 3rd ed. Toronto, ON: Queen's Printer for Ontario; 2013. Available from:

http://www.publichealthontario.ca/en/eRepository/PIDAC_Cleaning_Disinfection_and_Sterilization_2013.pdf

CSA Group. SPE 1112-14: The user handbook for medical device reprocessing in community health care settings. Toronto, ON: CSA Group; 2014.

