



ARROWHEAD REGIONAL MEDICAL CENTER
Department of Nursing (NRS)
Cardiac Services Policies and Procedures

Policy No. 123.00 Issue 1

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SECTION: PATIENT CARE

SUBSECTION: INFECTION CONTROL

SUBJECT: CLEANING OF TRANS ESOPHAGEAL ECHOCARDIOGRAM PROBE CABINET

APPROVED BY: _____
Department Manager

POLICY

It is the policy that Arrowhead Regional Medical Center (ARMC) Cardiac Services that all trans esophageal echocardiogram probe storage cabinets are cleaned and maintained in such a manner to prevent contamination of the high-level disinfected trans esophageal echocardiogram probes that are stored in locked cabinet.

PROCEDURES

- I. The trans esophageal echocardiogram probe storage chamber is cleaned the first day of the work week each week. The inside of the probe storage cabinet is wiped down by the clinic nursing staff with hospital approved disinfectant wipes according to manufacturer instructions for use.
- II. Clean disposable tray liner is placed at the bottom of the cleaned storage cabinet, and is changed each morning during regular working days.
 - A. Visually inspect the tray liner for stains each time a probe is removed and each time the tray liners are changed.
 - B. Report all stains on the tray liners immediately to the Charge nurse, Supervisor/Manager, Sterile Processing Department (SPD), Epidemiology, and Patient Safety Officer.
 - C. An Event Report is completed.
 - D. Anytime stain is noticed on the tray liner, all probes in the cabinet are removed from service and are sent back to Sterile Processing Department for reprocessing.
- III. Document the cleaning and wipe down on the trans esophageal echocardiogram probe Cabinet Cleaning Log.

REFERENCES: AMERICAN SOCIETY OF ECHODIOGRAPHY, AMERICAN NATIONAL STANDARDS INSTITUTE

DEFINITIONS: N/A

SUBJECT: CLEANING OF TRANS ESOPHAGEAL ECHOCARDIOGRAM
 PROBE CABINET

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ATTACHMENTS: **N/A**

APPROVAL DATE:	<u>11/04/2024</u>	Laura Rocha, Cardiac Services Unit Manager Department/Service Director, Manager or Supervisor
	<u>11/19/2024</u>	Nursing Standards Committee Applicable Administrator, Hospital or Medical Committee
	<u>11/20/2024</u>	Patient Safety and Quality Committee Applicable Administrator, Hospital or Medical Committee
	<u>1/9/2025</u>	Quality Management Committee Applicable Administrator, Hospital or Medical Committee
	<u>1/23/2025</u>	Medical Executive Committee Applicable Administrator, Hospital or Medical Committee
		Board of Supervisors Approved by the Governing Body

REPLACES: **N/A**

EFFECTIVE: **1/23/2025**

REVISED:

REVIEWED: