### INFECTION PREVENTION CHECKLIST

**Ambulatory Surgical Center**

<table>
<thead>
<tr>
<th>STAFF NAME: ________________________________</th>
<th>DATE: ________________</th>
<th>TIME: ________</th>
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We appreciate your input.

Please send comments to: Hpaxton@che-east.org.

Thank you!

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### Self Assessment

<table>
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<tr>
<th></th>
<th>Pass</th>
<th>Fail</th>
<th>Re-Check</th>
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1. The facility provides supplies necessary for adherence to hand hygiene (e.g., soak, water, paper towels, alcohol-based hand rub) and ensures they are readily accessible to HCP patient care areas.

   - **Pass**
   - **Fail**

2. Staff perform hand hygiene:
   - Before donning gloves
   - After doffing gloves
   - Before direct patient contact
   - After direct patient contact
   - Before performing invasive procedure(s) (e.g., placing an IV)
   - After contact with blood, body fluids, or contaminated surfaces (even if gloves were worn)

3. Regarding gloves, staff will:
   - Wear gloves for procedures that might involve contact with blood or body fluids
   - Wear gloves when handling potentially contaminated patient equipment
   - Remove gloves before moving to the next task and/or patient

4. Fingernails must be kept short and clean. Artificial fingernails and/or extenders shall not be used by direct caregivers.