

UTMB RESPIRATORY CARE SERVICES Procedure- Equipment Change-Out	Policy 7.3.56
Equipment Change-Out Formulated: 11/91	Effective: 06/01/97 Revised: 08/21/23 Reviewed: 08/21/23

Equipment Change-Out

Purpose	To provide infection control guidelines for respiratory care personnel at UTMB. All therapists are required to adhere to the following guidelines in order to decrease the likelihood of transmitting nosocomial infections to patients.
Audience	All employees of the Respiratory Care Services department.
Scope	Equipment changes will be performed according to specified frequency by a qualified respiratory care practitioner
Policy	Disposable equipment will never be reused. Equipment will be changed out according to the following schedule:

ADULTS:

- Closed circuit suction catheters: once a week or as needed in all areas
- Small Volume Nebulizers: will be dated and changed out weekly.
- Aerosol Nebulizers: as needed in all areas.
- Nasal cannulas, simple facemasks, and non-rebreather masks: as needed
- Nasal CPAP/BiPAP masks and tubing: as needed in all areas (except ISCU)
- Ventilator circuits: all components of the circuit will be changed out as needed in all areas
- Bacteria filters placed on the exhalation side of the ventilator secondary to nebulizer therapy will be changed once a shift.

ISCU:

- Suction Catheters will be changed out every day.
- Cannulas running at low flows and the cannula portion of a high flow set-up will be changed weekly.
- The circuit portion of the high flow set-up will be changed out bi-weekly.
- Nasal CPAP/BiPAP masks and tubing: all components of the circuit will be changed our bi-weekly and more often as necessary
- Ventilator circuits: all components of the circuit will be changed out as needed.
- Bacteria filters placed on the exhalation side of the ventilator secondary to nebulizer therapy will be changed once a shift.

Procedure	Equipment will be inspected with every treatment given. If it is soiled, it will be replaced. Equipment will be changed on schedule and disposed of
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according to Infection Control guidelines.

All equipment not in continuous use will be stored in a set-up bag to avoid contamination and accidental disposal.

Small pieces of reusable equipment that are contaminated are to be transported to the Respiratory Care Services Department or SPD in biohazard bag that is placed in a lined box, that has a dirty sticker. Refer to Epidemiology Policy Guidelines.

Do not reprocess any equipment or device that is manufactured for single use only.

Equipment in use (ventilators, etc.) will be cleaned once a shift with a disinfectant solution and more often as necessary. (Refer to the Processing and Sterilization Protocol Guidelines regarding further details on equipment cleaning.)

Infection Control

Follow procedures as outlined Healthcare Epidemiology Policies and Procedures: #2.24 Respiratory Care Services.
<http://www.utmb.edu/policy/hcepidem/search/02-24.pdf>

Corresponding Policies

RCS Policy and Procedure Manual, Infection Control, #7.3.3
RCS Policy and Procedure Manual, Processing and Sterilization Protocol, #7.3.4

References

AARC Clinical Practice Guidelines: "Ventilator Circuit Changes", Respiratory Care 1994, 39(8); 797-802

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