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UNIVERSITY OF ILLINOIS MEDICAL CENTER AT CHICAGO  
CLINICAL CARE GUIDELINES

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**Subject:** Operating room sanitation

**OBJECTIVE**

A sanitized, safe, clean environment, free from dust and organic debris will be provided for all patients.

This goal will be achieved by:

- Consistently following a standardized program of sanitization of the operating suite.
- Following additional policies and procedures found in the Medical Center Policy & Procedure Manual, Infection Control Manual, and the Nursing Clinical Care Guidelines.

**POSITION STATEMENTS**

1. We at the University of Illinois Medical Center at Chicago believe that maintaining a safe and clean environment is paramount to the mission of the Medical Center.
2. We are committed to minimizing the rate of nosocomial infections patients and staff members.

**DEFINITIONS**

**Cleaning:** The process by which any type of soil including organic material, is removed. Cleaning is accomplished with detergent, water and scrubbing action.

**Contaminated:** The presence of potentially infectious pathogenic microorganisms on animate or inanimate objects.

**End-of-procedure cleaning:** Cleaning that is performed at the end of one surgical procedure before the start of another surgical procedure in the same room.

**Disinfection:** A process that removes contaminating infectious agents and renders reusable medical products for safe handling.

**Facility-approved agent:** A microorganism-killing agent registered with the US Environmental Protection Agency (EPA). The EPA classifies germicides as sporicides, general disinfectants, hospital disinfectants, detergents, sanitizers and others.

**Organic debris:** Blood, tissue, and body fluids.

**Terminal cleaning:** Cleaning that is performed at the completion of surgical practice settings' daily surgery schedules. Terminal cleaning is performed in surgical procedure rooms and scrub/utility areas, which include, but are not limited to surgical lights and external tracks, fixed and ceiling-mounted equipment, all furniture (including wheels and casters), equipment, handles of cabinets and push plates, ventilation faceplates, horizontal surfaces (e.g. tops of counters, fixed shelving), the entire floor, kick buckets, and scrub sinks.

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**PROCEDURES**

- A. General considerations
1. All measures shall reflect the principles to confine and contain contamination.
  2. Approved disinfectant is used for the cleaning of the operating room suite.
- B. Daily Cleaning
1. The top surfaces of the room furniture and the lights must be damp wiped prior to opening of supplies for the first scheduled procedure of the day.
  2. The flat surfaces of all equipment must be wiped prior to opening of supplies.
  3. Intra operative cleaning shall be conducted as follows:
    - a. The areas outside the sterile field which become contaminated with organic debris or blood must be promptly cleaned.
    - b. The contaminated area is cleaned with a hospital approved disinfectant. All materials are disposed of according to policy.
- C. End-of-Procedure Cleaning shall include, but not limited to:
1. Remove any trash or linen that did not fit into the case cart.
  2. Damp wiping of spillage (organic debris) from hampers, kick buckets and foot stools.
  3. Cleaning of operating room table.
  4. Damp wiping of IV poles, mayo stands, instrument and prep tables and operating room lights.
  5. Damp wiping of wall spots.
  6. Wet mopping floors for all cases.
- D. Following the surgical procedure, all items that have come in contact with the patient's blood or body fluids and the sterile field are considered contaminated.
1. Trash that is not exposed to blood or body fluids is disposed of in clear plastic bags
  2. Trash, including gloves and disposable gowns and drapes, are placed in a red Biohazard bags.
  3. Reusable linen is placed in a blue laundry container.
  4. Sharps and needles are placed in a puncture resistant container.

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- E. Following the procedure all items that have come in contact with the patient's blood or body fluids or the sterile field are considered contaminated.
1. All instruments, trays, basins and suction canisters are covered prior to transport to the decontamination area.
  2. Suction canisters containing blood and other body fluids are sealed and placed the proper containers in the dirty cart room.
- F. Terminal cleaning
1. Mechanical friction and use of a facility-approved agent are used to clean equipment and areas that should include, but are not limited to:
    - a. Cleaning of furniture and equipment
    - b. Cleaning and disinfection of kick buckets
    - c. Cleaning of cabinet doors, desks and operating room doors
    - d. Cleaning of scrub sink
    - e. Mopping floors.
    - f. Cleaning of housekeeping equipment.
- G. The cleaning schedule includes, but is not limited to a minimum of weekly cleaning of cabinets, shelves, walls, ceiling overhead tracts and air conditioning vents.
- H. Wet vacuuming of OR Floors monthly.
- I. Extra clear plastic, linen bags and biohazard bags are NOT to be stored on the bottom of the linen or garbage hampers.

**Reference:** Lobb, J., & Parker, N. (2004). Standards, recommended practices, and guidelines: With official AORN statements. Denver: AORN, Inc., pp. 221-232.

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