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- HM.7.2.5 Hand disinfectants for waterless hand hygiene should be available at every chair/bed. Hands are washed before and after contact with each patient.
 - HM.7.2.6 Sinks are available in adequate number (preferably one for every 2-4 chair/beds) and are conveniently located.
 - HM.7.2.7 Staff members have the required knowledge for safe practices to avoid cross contamination.
 - HM.7.2.8 Sharp disposal containers are available at each chair/bed and elsewhere as needed within the unit. Needles and sharps are disposed appropriately.
 - HM.7.2.9 Infectious wastes are disposed in accordance with hospital's waste disposal policies.
 - HM.7.2.10 Surfaces of machines including the control panels, blood pressure cuffs and chairs/beds are disinfected after use with an approved disinfectant.
 - HM.7.2.11 Blood spills are cleaned properly.
 - HM.7.2.12 Equipment such as blood pressure cuffs, stethoscopes, clamps, scissors and thermometers are allocated to a single patient and are disinfected at the conclusion of each patient treatment session.
 - HM.7.2.13 Supplies and equipment are properly handled in a way that prevents contamination.
 - HM.7.2.14 A process is in place to ensure multi-dose vials are adequately labeled and used for single patient only.
 - HM.7.2.15 A process is in place for infection control procedures for dialysis machines between patients.
 - HM.7.2.16 A process is in place for appropriate cleaning and disinfection of the water treatment and distribution system.
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Standard Intent:

Hemodialysis patients are uniquely vulnerable to the development of healthcare-associated infections because of multiple factors including exposure to invasive devices, immunosuppression, the lack of physical barriers between patients in the outpatient hemodialysis environment, and frequent contact with healthcare workers during procedures and care. Evidence-based Infection control guidelines specific to the dialysis unit are established and implemented (Substandard HM.7.2.1 through HM.7.2.16).

HM.8 Patients and staff are protected from blood borne pathogens during hemodialysis.

- HM.8.1 All patients are screened for Hepatitis B, Hepatitis C and HIV at the beginning of dialysis.
- HM.8.2 Patient whose laboratory tests for HBsAg, anti HBs, HCV, or HIV are negative should be re-screened every 3-6 months.