**PURPOSE:**

In order to prevent the spread of infection from one person to another, a thorough cleaning of the CPR Training manikins is necessary after each training session.

The following policy delineates cleaning and decontamination procedures for CPR training manikins prior to reuse.

**PROCEDURES:**

1. Students, which may include staff or families, should be told that CPR training will involve physical contact with manikins.
2. Participants and instructors should refrain and postpone from participating in CPR training if

they are in the active stages of an infectious disease.

1. Prior to start of class, CPR students should notify the instructor before using the manikin if they have open sores or cuts on their hands, mouth, or area around the mouth, are seropositive for hepatitis B surface antigen (HBsAG) or have any chronic illness especially: HBV, AIDS or HIV positivity.
   1. The instructor will provide the student with an individual face to use during class. or the student can be the last person to use manikin before terminal cleaning is done..
2. Students should be instructed to perform hand hygiene, remove all lipstick, avoid eating, and dispose of chewing gum prior to contact with the manikin.
3. Students may use an individual protective face shield to use for adult and infant manikins. When using multiple manikins, students should be assigned in pairs (per manikin)
4. The instructor is responsible for cleaning the manikin during and after each class. In addition, the manikin should be routinely checked for signs of deterioration.
5. During infectious disease events of epidemiological importance (i.e., internal outbreaks, pandemics, etc) the cleaning and disinfection of CPR manikins will be modified in accordance to recommendations by American Heart Association and CHLA’s infection prevention program. See attachment 207.1 for AHA Cleaning and Disinfection guidelines.

Cleaning and Maintenance of Manikins

1. Cleaning of manikins between students
   1. After each student has practiced on the manikins, the face and the inside of the manikin’s mouth must be wiped with a solution of 70% isopropyl alcohol (alcohol prep pads) for 30 seconds and air-dried.
   2. If an individual face has been used, it should be removed before the next student and a new face attached.
2. Cleaning of manikins after class
   1. Manikins should be cleaned and decontaminated as soon as possible at the end of each class
   2. Manikin face and lungs should be removed with the disposable airway equipment being removed at the end of each class.
   3. All contaminated parts must be disassembled by personnel wearing protective gloves and wiped with hospital-approved disinfectant wipes.
      1. Faces will be soaked in bleach and water mixture (1/4 cup household bleach per gallon of tap water) for at least 10 minutes and then soaked in fresh tap water for at least 10 minutes. Faces are then air dried and placed in individual plastic bags for use.
   4. Ensure that all lungs have been changed per manufacturer's instruction and clean faces have been attached to manikins before they are stored.
   5. Deteriorated parts or surfaces that cannot be properly disinfected should be discarded or replaced.
3. Deep Cleaning of manikins
   1. On a quarterly basis, all external parts of manikins should be thoroughly washed with warm soapy water or bleach and water mixture (1/4 cup household bleach per gallon of tap water) for at least 10 minutes and then soaked in fresh tap water for at least 10 minutes. Parts are then air dried immediately afterwards.

**ATTACHMENT :**

1. [IC - 207.1: COVID-19 Pandemic Modifications – Use and Care of Manikins](https://secure.compliance360.com/ext/TXYzkuHDUPL8sxeNE9Y_wA==)

**REFERENCES:**

1. Equipment Decontamination Guidelines for CPR Training. American Heart Association, rev. October 2020.

**POLICY OWNER:**

*Director, Accreditation & Licensing, Infection Prevention, and Emergency Management*