



Document Control: BG/REC/INF/001

INFECTION CONTROL STAFF COMPLIANCE CHECKLIST

Version: 01

Room: _____

Month: _____

Year: _____

Procedure		1.		2.		3.		4.		5.		6.		7.					
		MOR	EVN	NIG															
No. Staff in the Shift																			
1. No. of staff Compliant to PPE	Donning																		
	Duffing																		
2. No. of Staff Compliant to hand hygiene during procedure	Before																		
	After																		
3. No. of Staff Compliant to Cleaning and Decontamination	Work Bench before & after procedure																		
	Equipment's																		
4. No. of Staff Compliant to Safe Disposal	Laboratory Waste																		
	Sharps																		
	PPE																		
Name of Non-compliant staff																			
Initial of Infection Control Representative																			



BIOGENIX

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Procedure		8.		9.		10.		11.		12.		13.		14.					
		MOR	EVN	NIG															
No. Staff in the Shift																			
1. No. of staff Compliant to PPE	Donning																		
	Duffing																		
2. No. of Staff Compliant to hand hygiene during procedure	Before																		
	After																		
3. No. of Staff Compliant to Cleaning and Decontamination	Work Bench before & after procedure																		
	Equipment's																		
4. No. of Staff Compliant to Safe Disposal	Laboratory Waste																		
	Sharps																		
	PPE																		
Name of Non-compliant staff																			
Initial of Infection Control Representative																			



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Procedure		15.			16.			17.			18.			19.			20.			21.			
		MOR	EVN	NIG																			
No. Staff in the Shift																							
1. No. of staff Compliant to PPE	Donning																						
	Duffing																						
2. No. of Staff Compliant to hand hygiene during procedure	Before																						
	After																						
3. No. of Staff Compliant to Cleaning and Decontamination	Work Bench before & after procedure																						
	Equipment's																						
4. No. of Staff Compliant to Safe Disposal	Laboratory Waste																						
	Sharps																						
	PPE																						
Name of Non-compliant staff																							
Initial of Infection Control Representative																							



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Procedure		22.		23.		24.		25.		26.		27.		28.					
		MOR	EVN	NIG															
No. Staff in the Shift																			
1. No. of staff Compliant to PPE	Donning																		
	Duffing																		
2. No. of Staff Compliant to hand hygiene during procedure	Before																		
	After																		
3. No. of Staff Compliant to Cleaning and Decontamination	Work Bench before & after procedure																		
	Equipment's																		
4. No. of Staff Compliant to Safe Disposal	Laboratory Waste																		
	Sharps																		
	PPE																		
Name of Non-compliant staff																			
Initial of Infection Control Representative																			

Procedure

29.

30.

31.

Approved By: Dr. Sally Abdulla Ibrahim

Controlled

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		MOR	EVN	NIG	MOR	EVN	NIG	MOR	EVN	NIG
No. Staff in the Shift										
5. No. of staff Compliant to PPE	Donning									
	Duffing									
6. No. of Staff Compliant to hand hygiene during procedure	Before									
	During									
	After									
7. No. of Staff Compliant to Cleaning and Decontamination	Work Bench before & after procedure									
	Equipment's									
8. No. of Staff Compliant to Safe Disposal	Laboratory Waste									
	Sharps									
	PPE									
Name of Non-compliant staff										
Initial of Infection Control Representative										

Compiled by:

Final Remarks:

Verified by: Shivaraj M Naik, Infection Control Officer

Date: