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	STANDARD OPERATING PROCEDURE (SOP) <b>ClearSurf</b> (Surface decontamination for haemodialysis machines)	Review date	February 2011
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This SOP applies to all staff employed by NHS Greater Glasgow & Clyde (Acute Operating Division) and locum staff on fixed term contracts and volunteer staff.

### SOP Objective


To provide staff with information to ensure the adequate decontamination of haemodialysis machines and associated equipment

### NEW SOP

#### Document Control Summary

Approved by and date	Board Infection Control Committee ****
Date of Publication	February 2011
Developed by	Gail McCormack SCN, Renal Unit, Vale of Leven Hospital
Related Documents	NHSGGC Decontamination of equipment and the Environment NHSGGC BBV Policy
Distribution/Availability	Renal Unit, Vale of Leven Hospital
Implications of Race Equality and other diversity duties for this document	This policy must be implemented fairly and without prejudice whether on the grounds of ethnicity, gender, sexual orientation, religion, belief, disability or age.
Equality and Diversity Impact Assessment Completed	February 2011
Lead	Isobel (Ippy) Brown
Responsible Director	Jonathan Best

The most up-to-date version of this policy can be viewed at the following website:  
[www.nhsggc.org.uk/infectioncontrol](http://www.nhsggc.org.uk/infectioncontrol)


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## Introduction & Background

### CONTENT

1. Context
2. Purpose and Scope
3. Statement of protocol
4. References

#### 1. Context

The aim of dialysis is to replace the excretory function of the kidneys. During a haemodialysis treatment, the patient's blood is circulated outside the body through an extracorporeal circuit on a Haemodialysis machine.

To prevent the risk of infection and cross contamination, the surface of the haemodialysis machine must be cleaned and disinfected with a cleaning and disinfecting agent after every treatment. The recommended solution for this is Clearsurf 1%.

#### 2. Purpose and scope

To ensure that renal staff is aware of the correct procedure in cleaning dialysis machines to promote safety and infection control.

To minimise spillage risks for staff when preparing chemical solutions.


#### 3. Statement of protocol

**Solution concentration must be 1%** (any less than 0.25% lacks efficacy and may lead to bacteria resistance)


**A fresh bottle of solution must be made for each shift**

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<b>Procedure</b>	<p>To re constitute ClearSurf to a 1% solution: -</p> <p>To make 500mls of solution:</p> <ol style="list-style-type: none"> <li>1. Wear apron, gloves and protective eye wear for procedure</li> <li>2. Using the pump dispenser attached to the clearsurf canister, fill the measuring cup to the 5ml mark</li> <li>3. Pour this 5mls into a measuring bottle</li> <li>4. Make volume up to 500mls with cold water</li> <li>5. Label, date and sign the bottle every time fresh solution is made-up</li> <li>6. Use <b>one</b> dry wipe with solution per machine</li> <li>7. Ensure machine is not oversaturated with solution</li> <li>8. Always use a new cleaning wipe if the one in use gets contaminated with visible soiling (e.g. blood)</li> <li>9. Dispose of PPE's as per local policy</li> <li>10. Allow solution to dry for 15 minutes.</li> </ol>
<b>After Care</b>	<p>Follow the procedure for the preparation of 5008 Haemodialysis machines          Fresenius Medical Care (2009), operating instructions, Chpt 5.</p>

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### Evidence Based Requirements

#### 4. References

Fresenius Medical Care (2006)

Wille.B., (2003). Expert Opinion, microbicidal activity of clearsurf.

Schubert, R., (2002). Expert Opinion, microbicidal activity of clearsurf

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