

**ESRD CORE SURVEY WORKSHEET**  
**REUSE: OBSERVATION/INTERVIEW/REVIEW**

**Facility:** \_\_\_\_\_ **CCN:** \_\_\_\_\_

**Surveyor:** \_\_\_\_\_ **ID#:** \_\_\_\_\_

**Note:** This worksheet is intended for use while conducting “Dialyzer Reprocessing/reuse Review.” The observations of the set up/priming of reprocessed dialyzers in preparation for dialysis, and corresponding germicide tests and safety checks are conducted during “Observations of Hemodialysis Care and Infection Control Practices.”

Reuse Tech: \_\_\_\_\_ Date/time: \_\_\_\_\_

Reprocessing Equipment: \_\_\_\_\_ Germicide: \_\_\_\_\_

<b>Observations of Reprocessing Area</b>	<b>Triggers Identified?</b>	
OBSERVE: Does the reprocessing area and equipment appear clean, sanitary, and maintained?	<input type="checkbox"/> V318	<input type="checkbox"/> No
OBSERVE: Are there noticeable odors of germicide? If so, ASK: When/how are air levels of germicide tested?	<input type="checkbox"/> V318	<input type="checkbox"/> No
OBSERVE: Is the room temperature appropriate for storage of the germicide in use and the storage of reprocessed dialyzers?	<input type="checkbox"/> V321 <input type="checkbox"/> V345	<input type="checkbox"/> No
OBSERVE: Are used/dirty dialyzers reprocessed within 2 hours or refrigerated? Is the refrigerator temperature monitored?	<input type="checkbox"/> V331	<input type="checkbox"/> No
OBSERVE: Are reprocessed dialyzers protected from unauthorized access, damage, and contamination?	<input type="checkbox"/> V321	<input type="checkbox"/> No
<b>Observation and Interview with Reprocessing Personnel</b>	<b>Triggers Identified?</b>	
<b>PPE:</b> OBSERVE: Are staff using PPE appropriate to the tasks performed and the germicide (durable gloves, face shield/mask/goggles, gown)?	<input type="checkbox"/> V320	<input type="checkbox"/> No
<b>Germicide:</b> ASK: What are the germicide manufacturer's instructions for proper germicide storage? How long must dialyzers be filled with germicide before they can be used for dialysis? How long may a reprocessed dialyzer stay on the shelf (when a patient is absent) before it must be refilled with fresh germicide? What are the procedures for germicide/chemical spills? Are there readily available equipment & supplies in the case of splashes (i.e., eyewash station, spill kit) or spills of chemicals and/or germicide?	<input type="checkbox"/> V319 <input type="checkbox"/> V320 <input type="checkbox"/> V345	<input type="checkbox"/> No
<b>Dialyzer labeling:</b> ASK: When are patients' dialyzers labeled? How to you label dialyzers for patients with same or similar names?	<input type="checkbox"/> V328 <input type="checkbox"/> V330	<input type="checkbox"/> No

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<b>Observation and Interview with Reprocessing Personnel (continued)</b>	<b>Triggers Identified?</b>	
<b>Transportation of dirty dialyzers:</b> OBSERVE: Are used/dirty dialyzers transported in a clean/sanitary manner (all ports capped, not cross-contaminating other dialyzers)? If dialyzers are refrigerated, ASK: How long after dialysis must a dialyzer be reprocessed or refrigerated? What is the maximum time a dialyzer may be refrigerated prior to reprocessing?	<input type="checkbox"/> V331	<input type="checkbox"/> No
<b>Pre-cleaning procedures:</b> OBSERVE for 1-2 dialyzers: If header caps are removed, are the dialyzer headers, caps and o-rings cleaned and disinfected appropriately? Are water pressures at the pre-rinse sink monitored and maintained within dialyzer parameters? Is cross-contamination avoided by disinfecting equipment connections between dialyzers or the use of barrier adaptors? ASK: What quality of water is used for pre-cleaning the internal compartments of the dialyzers?	<input type="checkbox"/> V334  <input type="checkbox"/> V332  <input type="checkbox"/> V331  <input type="checkbox"/> V333	<input type="checkbox"/> No
<b>Review of Reuse QA Oversight</b>	<b>Triggers Identified?</b>	
REVIEW: 12 months of the following Reuse QA Audit results to verify they are routinely conducted:  <b>Quarterly:</b> Dialyzer labeling including verification of similar names warnings and appropriate labeling practices  Preparation for dialysis including observations of staff preparing reprocessed dialyzers for use in patients' treatments  <b>Semi-annual:</b> Reprocessing procedures including observations of reprocessing personnel performing dialyzer reprocessing procedures	<input type="checkbox"/> V366  <input type="checkbox"/> V368  <input type="checkbox"/> V367	<input type="checkbox"/> No
<b>Reprocessing Equipment Preventive Maintenance (PM) and Repair</b>	<b>Triggers ID'd?</b>	
REVIEW: 12 months of reprocessing equipment PM and repair logs: Are PM procedures and repairs performed by qualified personnel, in accordance with manufacturer's directions and recorded? Are the automated reprocessing systems calibrated per manufacturer DFU ( <i>this may be found in daily "start up logs"</i> )? Is equipment tested after repairs and before being placed back in service?	<input type="checkbox"/> V316  <input type="checkbox"/> V317	<input type="checkbox"/> No
<b>Reuse Adverse Occurrences</b>	<b>Triggers Identified?</b>	
REVIEW: 12 months of dialyzer "complaint" logs-recording of problems, events related to reprocessed dialyzers Were appropriate actions taken in response to serious events related to reprocessed dialyzers?	<input type="checkbox"/> V355 <input type="checkbox"/> V356 <input type="checkbox"/> V357 <input type="checkbox"/> V635	<input type="checkbox"/> No