

Hospital:-----
ICU: -----

ICU checklist

Date: ----/----/----- Total checklist standards= -----Total fulfilled checklist standards=-----Compliance %=-----

DISCRIPTION		YES	NO	N/A	COMMENTS
Staff					
1.	Nurse Patient ratio is up to the standard (1 :1 per shift in ICU)				
2.	Not showing any signs of infections				
3.	Hand Hygiene is strictly observed for all				
4.	No nail polish, no long nails, no artificial nails, no rings, no wrist watches, no artificial eyelash.				
5.	Staff use protective clothing when indicated (gown, mask, hair cover and gloves)				
6.	Janitors, technicians show no signs of infections observe personal hygiene (short nail ,covered hair) and follow good hand disinfection as indicated.				
Hand Hygiene					
7.	Appropriate alcohol hand rub is available in the following sites:				
	-Entrance door.				
	- Nurse station and desk				
	-Working surface in patient’s zone.				
	-Door of isolation room				
8.	Disinfectant liquid soap (Hibiscrub) paper towel available at all sinks				
9.	Sinks are available in appropriate number (ie, 1 sink : 4 beds).				
Clean environment					
10.	Floors, working surfaces, doors, walls, furniture, sinks, and toilets are clean, free of stains or contamination				
11.	Clean sterile store is clean, tidy and well ventilated .				
12.	All items are stored above floor level				
13.	Clean laundry store is clean and tidy				
14.	Dirty utility room is clean and tidy, disinfecting equipment is in working condition				
15.	Nurse’s tea room is clean and tidy				
16.	Nurses station and desk are clean and tidy				
17.	Janitors room is clean and tidy				

	DISCRIPTION	YES	NO	N/A	COMMENTS
Patient's room					
18.	Bed rails, all equipment around bed, IV stands are clean				
19.	Working surfaces, sink, cabinet drawers are clean and tidy				
20.	Bottles, ointment tubes, medical equipment and laryngoscope are clean and well arranged, the ambubag is sterile and kept in its intact pack				
21.	Tracheal suction is done aseptically using sterile water or normal saline.				
Clear date of start of use is required over each of the following items					
22.	Multi-dose vials and medicine bottles				
23.	IV solution in use				
24.	Terminal air filter to be changed every 48 hours				
25.	Sterile water in oxygen humidifier to be changed every 24hrs (if not in use leave dry)				
26.	Disinfectant containers and sterile water bottles				
27.	Ventilator tubing circuit to be changed every 4 days or if grossly contaminated, if nebulizer is used change every 24hrs.				
28.	Nasogastric tube feeding, maximum 4hrs out of refrigerator				
29.	Contaminated sharp container				
30.	Urine collecting bag .				
Daily					
31.	Bed linen changed daily and whenever soiled				
32.	Patient's gown changed daily and whenever soiled				
	Total				

Completed by: ----- Nurse in charge: -----