

ASC Quality Collaboration

Safe Injection Practices: What CMS Surveyors Are Looking For

CMS surveyors use a worksheet to assess infection control practices during ASC surveys. The section of the worksheet used to assess safe injection practices is reproduced below. **Because this is the SAME TOOL a CMS surveyor will use to assess safe injection practices, it is also a useful SELF-ASSESSMENT tool for an ASC.**

Unless otherwise indicated, a “No” response to any question below will be cited as a deficient practice.

II. Injection Practices (injectable medications, saline, other infusates)

Observations are to be made of staff preparing and administering medications and performing injections (e.g., anesthesiologists, certified registered nurse anesthetists, nurses).

Unless otherwise indicated, a “No” response to any question below **must** be cited as a deficient practice in relation to 42 CFR 416.51(a).

If unable to observe is selected, please clarify in the surveyor notes box why it was not observed and attempt to assess by means of interview or documentation review.

NOTE: Some types of infection control breaches, including some specific to medication administration practices, pose a risk of bloodborne pathogen transmission that warrant engagement of public health authorities. When management review confirms that a survey has identified evidence of one or more of the breaches described in S&C: 14-36-All, in addition to taking appropriate enforcement action to ensure the deficient Medicare practices are corrected, the SA should also make the responsible State public health authority aware of the identified breach.

Practices to be Assessed	Was Practice Performed?	Surveyor Notes
A. Needles are used for only one patient.	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> <i>Unable to observe</i>	
B. Syringes are used for only one patient (<i>this includes manufactured prefilled syringes</i>).	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> <i>Unable to observe</i>	
C. The rubber septum on a medication, <i>whether unopened or previously accessed</i> , vial is disinfected with alcohol prior to piercing.	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> <i>Unable to observe</i>	
D. Medication vials are always entered with a new needle.	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> <i>Unable to observe</i>	

E. Medication vials are always entered with a new syringe

Yes
 No
 Unable to observe

F. Medications that are pre-drawn are labeled with the date and time of draw, initials of the person drawing, medication name, strength and *beyond-use* date and time

Yes
 No
 Unable to observe

NOTE: A "No" answer should result in citation as a deficient practice in relation to 42 CFR 416.48(a), Administration of Drugs

G. a. Single dose (single-use) medication vials are used for only one patient

Yes
 No
 Unable to observe

b. Bags of IV solutions are used for only one patient (*and not as a source of flush solution for multiple patients*).

Yes
 No
 Unable to observe

c. Medication administration tubing and connectors are used for only one patient

Yes
 No
 Unable to observe

H. *The ASC has voluntarily adopted a policy that medications labeled for multi-dose use for multiple patients are nevertheless only used for one patient.*

Yes
 No
 N/A

(Fill in N/A if no multi-dose medications/infusates are used).

(NOTE: a "No" answer to question H. does not indicate a breach in infection control practices and does not result in a citation. **However,** a "No" response to either or both of the related questions I and J should be cited).

If YES, please skip to "K"

If NO, you **must also** assess the practices **at questions "I and J":**

I. Multi-dose vials are dated when they are first opened and discarded within 28 days unless the manufacturer specifies a different (shorter or longer) date for that opened vial. Note: This is different from the expiration date for the vial. The multi-dose vial can be dated with either the date opened or the *beyond-use date* as per ASC policies and procedures, so long as it is clear what the date represents and the same policy is used consistently throughout the ASC.

Yes
 No
 Unable to observe

J. Multi-dose medication vials used for more than one patient are stored *appropriately* and *do not enter* the immediate patient *care area* (e.g., *operating room, anesthesia carts*). Yes
 No
 Unable to observe

NOTE: If multi-dose vials enter the immediate patient care area, they must be dedicated for single patient use and discarded immediately after use.

K. All sharps are disposed of in a puncture-resistant sharps container Yes
 No

L. Sharps containers are replaced when the fill line is reached Yes
 No
