

## Daily Hood Cleaning Documentation and Pump Calibration Competency (Pharmacists and Pharmacy Technicians)

The following-USP 797-Regulatory Requirements for Environmental Quality and Control (CCR 1735.6 [c], 1751.4 [c] [d]) are:

Site	Minimum Frequency	Person Responsible
ISO Class 5	At the beginning of each shift, before each batch, not longer than 30 minutes following the previous surface disinfection when ongoing compounding activities are occurring, after spills and when surface contamination is known or suspected. Sterile Isopropyl Alcohol 70% or sporicidal agent (monthly) i.e. PeridoxRTU will be used as a disinfectant.	CPhT, RPH
Storage shelving, bins, racks, medication containers*	Weekly per schedule (CCR 1751.4 [d])	CPhT, RPH
Counters and easily cleanable work surfaces	Daily	EVS
Floors≠	Daily	EVS
Mats # (Total 9 mats= 7 in Main IV Room + 2 in Chemo Room)	Daily	EVS
Walls≠	Weekly on Sunday of each week [CCR1751.4 [d])	EVS
Ceilings≠	Weekly on Sunday of each week (CCR1751.4 [d])	EVS

### USP 797 Guidelines & Sterile injectable Recordkeeping Requirements (CCR 1751.1 [b-4], 1751.4 [d]) & Compounding Facilities and Equipment (CCR 1735.6 [c,d])

Trained compounding personnel are responsible to clean and disinfect at regular intervals (refer to table above), and the procedures for cleaning and disinfecting the compounding areas are written in the standard operating procedures (refer to USP 797 and our USP 797 Quality Assurance Plan Policy). Before sterile compounding preparations (CSPs), cleaning and disinfecting surfaces in the Laminar Airflow Workbench and Biologic Safety Cabinets are the most critical practices.

#### A. Procedures

##### 1. Cleaning of Laminar Airflow Workbench (LAFW) and Biologic safety cabinet (BSC):

- a. Surfaces in LAFH and BSC, which are intimate to the exposure of critical sites, require disinfecting more frequently than do housekeeping surfaces such as walls and ceilings (refer to the table above)