OpsAuditHub opsauditihub.com	DOC ID: **SAF-0163**	REVISION: **Rev 2.4 (2026)**
	STANDARD: **CDC Guidelines for Infection Control in Healthcare Personnel / OSHA 29 CFR 1910.1030**	AUDIT FREQUENCY: **Monthly Audit**

Ambulatory Clinic Infection Control Inspection Checklist

Operational Scope: This inspection checklist establishes a systematic protocol for evaluating infection control practices and environmental hygiene across all ambulatory care areas. The objective is to mitigate biological hazards, prevent healthcare-associated infections (HAIs), and ensure strict compliance with federal safety mandates.

MANDATORY PPE:	Nitrile Examination Gloves (ASTM D6319), Fluid-Resistant Surgical Mask (ASTM Level 2 or 3), Disposable Isolation Gown, Eye Protection (Face Shield or Safety Glasses with Side Shields)
PREREQUISITES:	Review previous month's infection control corrective action logs. | Ensure inspection team has completed current bloodborne pathogen exposure control training. | Gather high-level surface adenosine triphosphate (ATP) luminometer or visual verification tools.

HAND HYGIENE INFRASTRUCTURE & PERSONAL PROTECTIVE EQUIPMENT (PPE)

#	COMPONENT / ITEM	VERIFICATION CRITERIA & ACCEPTANCE STANDARD	SEVERITY	STATUS
1	**Hand Sanitizer Dispensers**	Alcohol-based hand rub dispensers are fully operational, placed at appropriate heights, and refounded prior to depletion.	Warning	[ ] PASS [ ] FAIL [ ] N/A
2	**Handwashing Sinks**	Clinical sinks are unobstructed, supplied with non-antimicrobial/antimicrobial soap, single-use paper towels, and free of stagnant water.	Critical (Immediate Out of Service)	[ ] PASS [ ] FAIL [ ] N/A
3	**PPE Station Compliance**	Disposable gloves, isolation gowns, and masks are stocked in designated areas outside exam rooms in clean, undamaged packaging.	Warning	[ ] PASS [ ] FAIL [ ] N/A

ENVIRONMENTAL CLEANING & DISINFECTION PROTOCOLS

#	COMPONENT / ITEM	VERIFICATION CRITERIA & ACCEPTANCE STANDARD	SEVERITY	STATUS
4	**Exam Table & Surface Disinfection**	EPA-registered hospital-grade disinfectants are utilized with documented contact times between patient encounters.	Critical (Immediate Out of Service)	[ ] PASS [ ] FAIL [ ] N/A
5	**Reusable Medical Equipment (RME)**	Stethoscopes, pulse oximeters, and blood pressure cuffs are visually clean and wiped with approved germicidal wipes after each use.	Critical (Immediate Out of Service)	[ ] PASS [ ] FAIL [ ] N/A
6	**Sharps Container Management**	Sharps disposal containers are wall-mounted or upright, not filled past the designated fill line (approx. 3/4 full), and safely locked.	Critical (Immediate Out of Service)	[ ] PASS [ ] FAIL [ ] N/A
7	**Regulated Medical Waste Segregation**	Red biohazard bags and infectious waste bins are properly lined, sealed when full, and segregated from regular municipal waste.	Warning	[ ] PASS [ ] FAIL [ ] N/A

STERILIZATION, MEDICATION SAFETY, AND AIR HANDLING

#	COMPONENT / ITEM	VERIFICATION CRITERIA & ACCEPTANCE STANDARD	SEVERITY	STATUS
8	**Autoclave and Sterilization Logs**	Instrument sterilization cycles are documented with biological and chemical indicator results verified and logged daily.	Critical (Immediate Out of Service)	[ ] PASS [ ] FAIL [ ] N/A
9	**Medication Refrigeration Monitoring**	Vaccine and medication refrigerators maintain a constant temperature range of 36°F to 46°F (2°C to 8°C), recorded twice daily.	Critical (Immediate Out of Service)	[ ] PASS [ ] FAIL [ ] N/A
10	**Air Pressure Differentials**	Isolation rooms or specialized procedure areas maintain appropriate negative or positive directional airflow per engineering specs.	Critical (Immediate Out of Service)	[ ] PASS [ ] FAIL [ ] N/A

Certified Infection Preventionist / Lead Auditor Signature: _____	**Date / Time:** _____	**Badge / Cert #:** _____
Clinic Medical Director / Operations Manager Sign-off: _____	**Review Date:** _____	**Audit Status:** [ ] Approved [ ] Rectify

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