OpsAuditHub opsauditihub.com	DOC ID: **SAF-0164**	REVISION: **Rev 2.4 (2026)**
	STANDARD: **CDC Guidelines for Infection Control in Healthcare Personnel & OSHA 29 CFR 1910.1030 (Bloodborne Pathogens)**	AUDIT FREQUENCY: **Monthly Audit**

Ambulatory Clinic Infection Control Safety Audit Checklist

Operational Scope: This audit checklist defines the operational scope for evaluating pathogen transmission risks, hand hygiene compliance, and sterile processing protocols across ambulatory clinical spaces. The objective is to enforce strict hazard mitigation and ensure continuous adherence to healthcare infection control standards.

MANDATORY PPE:	Nitrile Medical Examination Gloves (ASTM D6319), Fluid-Resistant Surgical Mask with Visor or Eye Protection, Disposable Isolation Gown (AAMI Level 2 or Higher), N95 Respirator (for Airborne Precautions), Hand Hygiene Supplies (Alcohol-Based Hand Rub)
PREREQUISITES:	Verify current calibration and supply levels of all sanitation monitoring stations. | Review previous month's incident logs and corrective action records. | Ensure all clinical staff on shift have completed mandated pathogen safety briefings.

STANDARD PRECAUTIONS AND HAND HYGIENE INFRASTRUCTURE

#	COMPONENT / ITEM	VERIFICATION CRITERIA & ACCEPTANCE STANDARD	SEVERITY	STATUS
1	**Point-of-Care Hand Sanitizer Dispensers**	All dispensers are fully operational, unobstructed, filled with EPA-registered alcohol-based hand rub, and free of leaks.	**Critical (Immediate Out of Service)**	**[ ] PASS [ ] FAIL [ ] N/A**
2	**Handwashing Sinks in Examination Rooms**	Sinks are accessible, supplied with liquid soap and single-use towels, and demonstrate unhindered hot and cold water flow without drainage backups.	**Warning**	**[ ] PASS [ ] FAIL [ ] N/A**
3	**Personal Protective Equipment (PPE) Stations**	Caddys and wall-mounted dispensers outside each exam room are stocked with appropriate sizes of gloves, masks, and face shields.	**Warning**	**[ ] PASS [ ] FAIL [ ] N/A**
4	**Respiratory Hygiene Station at Reception**	Station contains tissues, no-touch waste receptacles, masks, and clear instructional signage for symptomatic patients.	**Standard**	**[ ] PASS [ ] FAIL [ ] N/A**

ENVIRONMENTAL CLEANING AND DISINFECTION PROTOCOLS

#	COMPONENT / ITEM	VERIFICATION CRITERIA & ACCEPTANCE STANDARD	SEVERITY	STATUS
5	**High-Touch Surface Disinfection Compliance**	Exam tables, counter tops, doorknobs, and computer keyboards are cleaned using hospital-grade disinfectant with verified contact times.	**Critical (Immediate Out of Service)**	**[ ] PASS [ ] FAIL [ ] N/A**
6	**Disinfectant Wipes and Solution Storage**	All germicidal wipe containers are tightly sealed to prevent evaporation, labeled with open dates, and stored according to fire safety codes.	**Warning**	**[ ] PASS [ ] FAIL [ ] N/A**
7	**Terminal Cleaning Logs**	Daily and weekly environmental cleaning logs are fully signed, dated, and up to date for all surgical and procedural suites.	**Standard**	**[ ] PASS [ ] FAIL [ ] N/A**

REGULATED MEDICAL WASTE AND SHARPS MANAGEMENT

#	COMPONENT / ITEM	VERIFICATION CRITERIA & ACCEPTANCE STANDARD	SEVERITY	STATUS
8	**Sharps Disposal Containers**	Sharps containers are mounted securely below eye level, not overfilled (below the fill line indicator), and permanently locked when full.	**Critical (Immediate Out of Service)**	**[ ] PASS [ ] FAIL [ ] N/A**
9	**Biohazard Waste Receptacles and Liners**	Red biohazard bags are leak-resistant, properly labeled with the universal biohazard symbol, and tied off securely when 3/4 full.	**Critical (Immediate Out of Service)**	**[ ] PASS [ ] FAIL [ ] N/A**
10	**Regulated Waste Storage and Transport**	Temporary accumulation area is secured against unauthorized access, free of pests, and complies with local medical waste holding time limits.	**Warning**	**[ ] PASS [ ] FAIL [ ] N/A**

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

COMPLIANCE NOTICE: This document must be archived for a minimum of 12 months in accordance with workplace safety recordkeeping guidelines.

DIGITAL INSPECTION UPGRADE: Run this audit on mobile/tablet, attach photos & automate compliance records. **Start Free Mobile Audit →**