

IMS competency validation guides are strictly advisory and confer no certifications or warranties. The evaluations are intended to help customers focus on personnel, processes, and equipment that may need attention. These competency guides are based upon original equipment manufacturer information and related professional society standards for practice and are not a substitute for meeting the requirements of accrediting organizations such as JCAHO or manufacturers' recommended practices.



## Reprocessing Rigid Endoscopes Competency Verification Checklist

INTEGRATED MEDICAL SYSTEMS INTERNATIONAL, INC.

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Employee Name / Title \_\_\_\_\_

Department / Date \_\_\_\_\_

Validator / Title \_\_\_\_\_

SKILLS EVALUATION	COMPLIANT WITH POLICY	NEEDS ASSISTANCE	CORRECTION PLAN	VALIDATOR INITIALS
Establishes appropriate work area with appropriate tools	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Wears personal protection/scrubs	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Follows OEM guidelines for reprocessing	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Handles scope with two hands	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Isolates scope from other instruments	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Carefully removes camera & other scope accessories	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Follows OEM guidelines for use of enzymatic detergent	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Removes blood & gross debris from scope using lint free towel and mild enzymatic detergent	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Gently dries scope with lint free towel	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Transports scope carefully & protected from other instruments	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Inspects exterior for nicks, dents, shaved/burned distal end	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Inspects shaft for straightness	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Inspects eyepiece exterior & window for damage	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Inspects light fibers with a light source (when available)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Inspects light cord when available	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Inspects image with reflected (not direct) light	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Inspects lens system by viewing through eyepiece from 8-12 inches away	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Tests focus when applicable	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Clean distal end with alcohol pad if needed	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Carefully inserts scope into sterilization container - DO NOT PRESS DOWN ON SHAFT	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Follows OEM guidelines for Sterilization	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
Identify and/or set aside scopes in need of repair	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

Action Plan \_\_\_\_\_

Performer's Signature \_\_\_\_\_

Today's Date \_\_\_\_\_

Validator's Signature \_\_\_\_\_

Review Date \_\_\_\_\_