

ICAR Environmental Cleaning Checklist



**INFECTION CONTROL
ASSESSMENT &
RESPONSE**

This resource was developed as part of the Infection Control Assessment & Response (ICAR) process for evaluating environmental cleaning and is adapted from, and to be used in conjunction with the CDC [Options for Evaluating Environmental Cleaning](#) resource. This document is intended to guide the placement of fluorescent markers in the healthcare environment. Refer to the NJDOH [Evaluation of Environmental Cleaning using Fluorescent Markers](#) resource for additional information.

Instructions: Complete the form by applying a fluorescent marker to ten (10) identified smooth solid surface areas within the environment being assessed, indicated by a checkmark (☒). Upon assessment of the cleaning process, record the results in the corresponding column for “cleaned” when there is no fluorescent marker remaining, or “not cleaned”, when fluorescent marker is identified using the UV light source.

Evaluator:		Date:	
Facility Name:		Location:	
Type of cleaning:	Routine cleaning	Terminal cleaning	Unoccupied cleaning
Patient/Resident Care Area Surfaces	Marker Applied	Cleaned	Not Cleaned*
Bed rails			
Bed remote			
Bed headboard			
Bed footboard			
Call bell			
Tray table			
Bedside table handle			
Telephone			
Chair armrest			
Curtain pull cord			
Room light switch			
Door handle (inner)			
Door handle (outer)			
Other:			
Bathroom [N/A: <input type="checkbox"/>	Marker Applied	Cleaned	Not Cleaned
Faucet handles			
Safety grab bar (adjacent to toilet/shower)			
Commode handles			
Toilet handle			
Light switch			
Door handle (inner)			
Door handle (outer)			
Other:			
Other (Terminal Cleaning Only) [N/A: <input type="checkbox"/>	Marker Applied	Cleaned	Not Cleaned
IV pole			
Ventilator control panel			
Reusable medical device: _____			
Other:			
Notes:			