

**OREGON DEPARTMENT OF CORRECTIONS**  
**Operations Division**  
**Health Services Section Policy and Procedure #P-D-03**

SUBJECT: CLINIC SPACE, EQUIPMENT, AND SUPPLIES

POLICY: Each institution health services program shall have adequate space, equipment, and supplies to provide the level of health care designated.

REFERENCE: OAR 291-124-020; 291-023-005 through 291-023-040;  
291-164-005 through 291-164-045  
NCCHC Standard P-D-03

PROCEDURE:

- A. Each institution shall designate space for the provision of on-site health care that includes at a minimum, privacy for the health care provider and patient to evaluate health problems. MSM or designee will inspect designated equipment and space regularly and include:
1. Examination and treatment rooms for medical, dental and mental health care.
  2. Secure storage of medical supplies, equipment, medications, and health care records.
  3. Interview rooms with a desk and chairs will be provided for psychiatric mental health services and group treatment activities.
  4. Laboratory and radiology services that are provided on-site shall meet licensure standards. Interpath lab manual is accessible using this link: <http://www.interpathlab.com/Pages/c.aspx>.
  5. An inmate waiting area with seats, drinking water, and access to toilets for inmate patients.
- B. The Medical Services Manager is responsible for maintaining an adequate inventory of equipment and supplies for use within their respective institution.
- C. The Medical Services Manager, or designee, will order equipment and supplies through the Pharmacy/Central Stores Unit according to purchasing procedures.
- D. Medical Services Managers, or designee, are responsible for maintaining the security and working condition of equipment and supplies within the unit according to inventory control and security procedures.
- E. All needles and syringes will be provided utilizing a locked bin exchange system. All items will be inventoried upon leaving the pharmacy, upon receipt of the bin

and whenever the seal on the bin has been broken. At least daily, inventory will be done on unsealed bins. All items used will be signed out on the decreasing count inventory sheets. All syringes, needles, and sharp instruments shall be maintained in accordance with institutional procedures governing needle, syringe and surgical instrument control.

- F. Each Medical Services area will maintain ready internet accessibility in order to allow research opportunities for Health Services Personnel.
- G. Each clinic will manage supplies for:
  1. \*Blood Glucose Monitoring
  2. \*Guaiac-Occult Blood Testing (Occult Blood Testing—Stool)
  3. \*Urinalysis by Chemstrip (Specimen Collection: Urine Screening for Glucose, Ketones, Protein, Blood, pH, and Specific Gravity)
  4. Urinary Albumin Testing
  5. \*Venipuncture
  6. Rapid INR Testing
  7. Centrifuge Use

See attachment I for applicable documentation to properly record the testing results. Current instructions for completion of these processes is available through the manufacturer's online resources or using Mosby's Skills (\* above indicates that Mosby Skills provides instructions). Mosby's Skills may be accessed using this address:

<http://login.mns.elsevierperformancemanager.com/Login.aspx?VirtualName=oregondepartmentofcorrections-orsalem>

Effective Date: \_\_\_\_\_

Review date: August 2014

Supersedes P&P dated: October 2013

	Medical Stores Directives	
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<b>TO:</b>	<b>DL Health Services Administrators</b> All DOC Institutions
<b>CC:</b>	<b>Medical Stores Staff</b>

<b>FROM:</b>	<b>June 17, 2005</b>
<b>Dr. Shelton</b> <b>Health Services Medical Director</b> <b>Oregon Department of Corrections</b>	

<b>SUBJECT:</b>	<b>CPAP Directive</b>
<b>Effective Date:</b>	<b>5/25/05</b>
<b>Supercedes Procedure Dated:</b>	<b>all prior S.O.P.s</b>

<b>Relating to / Policy cross reference</b>	<b>Relating to the purchase and maintenance of CPAP / BiPAP equipment. Transfer of equipment and discharge of inmates who require CPAP.</b>
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**All C-PAP machines & equipment must be approved through TLC.** Medical Stores must have a copy of the TLC authorization and the specific ordering info. pertaining to the individual Inmate, as follows:

- Copy of TLC authorization
- Standard Options, machine style     *circle one*    CPAP     or    BiPAP
- Mask style and size
- Headgear style and size
- Chin strap style and size
- Humidifier if needed
- Therapeutic pressure settings per the Physician's Order

**Standard Procedure**

ODOC Medical Stores & Health Services has CPAP/BiPAP machines available for Inmate use. All ODOC owned CPAP /BiPAP machines will be maintained at the States expense and DOC will be responsible for filter changes, repairs and maintenance on the machine. **The Inmate will still pay for *any and all* patient specific items, such as masks, head gear, chin straps, tubing, etc. , and replacements thereof.**

**Inmate Ownership**

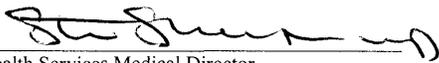
If an Inmate comes into the system with a machine, is given a machine by family members or purchase a machine, **all responsibility for upkeep and any and all maintenance, including repairs, filter changes and supplies pertaining to that machine belong to the Inmate and, for that reason patient ownership of machines is discouraged.** In order for the Inmate to purchase a CPAP machine, thus becoming the Inmate's Personal Property/Inmate Owned, Medical Stores must have a completed copy of the Necessary Medical Services Form (cd-1091H) stating that funds are available and being *held* for this purchase. Medical Stores can obtain the purchase costs for the cd-28 and Necessary Medical Services Form (cd-1091H). The patient/Inmate must be informed that they are responsible for any and all maintenance, upkeep, repairs.

**Discharge**

Chief Medical Officer (C.M.O.) and the Medical Director will review files of any and all Inmates nearing discharge whom the attending provider believes requires a CPAP/BiPAP machine in the community. Providers should make their recommendations to the C.M.O. and the Medical Director at least 30 days in advance of discharge and departure.

**Transfer**

Medical Stores must be notified of any Inmate being transferred within the ODOC that currently has a CPAP or BiPAP machine. All equipment including CPAP machines must be properly transferred from Institution location to Institution location, through Medical Stores. Appropriate identification/tracking numbers must be communicated so scheduled maintenance can be conducted on the appropriate machines.



Health Services Medical Director  
Oregon Department of Corrections

Addendum: Health Services Section Policy & Procedure  
# P-D-03 Clinic Space, Equipment and Supplies

**CRCI: Critical item control**

CRCI Health Services maintains surgical instruments, needles, syringes, and other sharp items in a manner that assures accountability and control.

**Instrument control:**

- 1) Instruments will be packaged, color coded and have an individual inventory attached to the storage container.
- 2) Items will be stored in a locked storage area in each exam room.
- 3) Inventory sign out sheets will be maintained for each container.
  - a. When an item is used the staff will sign out the item used on the inventory sheet.
  - b. Disposable items will be discarded in a sharps container.
  - c. Non-disposable items will be cleaned and placed in the instrument tray in the lab for the appropriate time. At the end of that time, the items are to be bagged and placed in the dental clinic for sterilizing. The dental assistant will process the instruments.
  - d. At the end of processing the instruments will be returned to the locked container and the container resealed with a red breakaway lock and the lock dated.
  - e. The inventory sheet will be signed, dated and the item returned noted.
- 4) The assigned nurse will verify the accountability of all instruments daily.
- 5) If the lock is intact and dated the signature will verify the integrity of the lock and the instruments do not need to be recounted.
- 6) If there is no lock the instruments must be counted and accounted for.
- 7) In no instance will a box be sealed that is not complete.
- 8) Any discrepancies will be documented on the daily charge nurse report and reported immediately to the Officer in Charge. An unusual incident report will be forwarded to the institution Security Manager.

**Needle & syringe control:**

- 1) Needles and syringes will be obtained weekly from Central Pharmacy using an exchange system. The locked syringe/needle box will be transported both to and from Central Pharmacy by DOC Transport.
- 2) The pharmacy technician at CRCI upon receipt of the incoming exchange box will itemize and verify the contents and separate the contents of the box into the lab needle kit and large needle/syringe kit.
- 3) A new perpetual inventory sheet will be placed in each kit and the boxes sealed with a red breakaway lock.

- a. When an item is removed for use the staff will initial each item in the appropriate numbered box in descending order.
  - b. All needles/syringes will be immediately placed in a biohazards sharps container.
  - c. The biohazard sharps container will be kept in a locked storage until removed from the premises by authorized methods.
  - d. The assigned nurse will verify the accountability of all needles/syringes daily.
- 4) The lab needle kit will be secured in a locked cupboard in room. The large needle and syringe kit will be secured in the diabetic cart in the medication room.
  - 5) The contents of the returning exchange box will be reconciled with the perpetual inventory sheets (the inventory sheet will be filed in the medication room). The box will then be sealed with a red breakaway lock and returned to Central Pharmacy by DOC Transport staff.
  - 6) Any discrepancies in the daily and exchange counts will be documented on the daily charge nurse report and reported immediately to the Officer in Charge. An unusual incident report will be forwarded to the institution Security Manager.
  - 7) The second shift OIC will weekly verify the contents of the needle and syringe boxes and will sign on the perpetual inventory sheet.

Addendum: Health Services Section Policy & Procedure  
#P-D-03 Clinic Space, Equipment and Supplies

**OSCI: Critical item control**

OSCI Health Services maintains surgical instruments, needles, syringes, and other sharp items in a manner that assures accountability and control.

**Instrument control:**

- 1) Instruments will be packaged; color-coded and have an individual inventory attached to the storage container.
- 2) Items will be stored in a locked medication room.
- 3) Inventory sign out sheets will be maintained for this container.
  - a. When an item is used the staff will sign out the item used on the inventory sheet.
  - b. Disposable items will be discarded in a sharps container.
  - c. Non-disposable items will be cleaned and placed in an instrument tray and then placed in the glass cabinet at north end of clinic for the appropriate amount of time. At the end of that time, the items are to be bagged and placed in the dental clinic for sterilizing.
  - d. At the end of processing, the instruments will be returned to the locked cart in the medication room.
  - e. The inventory sheet will be dated and the item returned noted.
- 4) The assigned nurse assigned to count will verify the accountability of all instruments as assigned by the MSM or designee.
- 5) Any discrepancies will be documented on the daily assignment report and reported immediately to the Officer in Charge as well as the Medical Services Manager. An unusual incident report will be forwarded to the institution Security Manager.
- 6) Monthly the inventory sheet will be given to the Medical Tech for archiving.

**Needle & syringe control:**

- 1) Needles and syringes will be obtained weekly from Central Pharmacy using an exchange system. The locked syringe/needle box will be transported both to and from Central Pharmacy by the OSCI Pharmacy Tech/HST or trained designated clinic staff.
- 2) The Health Services staff at OSCI upon receipt of the incoming exchange box will itemize and verify the contents.

- 3) A new perpetual inventory sheet will be placed in the needle box itself and kept locked.
  - a. When an item is removed for use the staff will initial each item in the appropriate numbered box in descending order.
  - b. All needles/syringes will be immediately placed in a biohazards sharps container after use.
  - c. The biohazard sharps container will be kept in a locked storage until removed from the premises by authorized methods.
  - d. The assigned nurse will verify the accountability of all needles/syringes as assigned by the MSM or designee.
- 4) Any discrepancies in the daily and exchange counts will be documented on the daily assignment report and reported immediately to the Officer in Charge as well as the Medical Services Manager. An unusual incident report will be forwarded to the institution Security Manager.
- 5) The contents of the returning exchange box will be reconciled with the perpetual inventory sheets (the inventory sheet will be left in the box and will be filed by Central Pharmacy). The box will then be sealed with a red breakaway lock and returned to Central Pharmacy by OSCI Pharmacy Technician or designated clinic staff.

**SCCI: Critical item control**

SCCI Health Services maintains surgical instruments, needles, syringes, and other sharp items in a manner that assures accountability and control.

**Instrument control:**

- 1) Instruments will be packaged, color-coded and have an individual inventory attached to the storage container.
- 2) Items will be stored in a locked storage area in the exam room.
- 3) Inventory sign out sheets will be maintained for each container.
  - a. When an item is used the staff will sign out the item used on the inventory sheet.
  - b. Disposable items will be discarded in a sharps container.
  - c. Non-disposable items will be cleaned and placed in the instrument tray in the sink for the appropriate time. At the end of that time, the items are to be bagged and placed in the dental clinic for sterilizing. Medical staff will process the instruments.
  - d. At the end of processing the instruments will be returned to the locked container and the container resealed with a red breakaway lock and the lock dated.
  - e. The inventory sheet will be signed, dated and the item returned noted.
- 4) The assigned nurse will verify the accountability of all instruments daily.
- 5) If the lock is intact and dated the signature will verify the integrity of the lock and the instruments do not need to be recounted.
- 6) If there is no lock the instruments must be counted and accounted for.
- 7) In no instance will a box be sealed that is not complete.
- 8) Any discrepancies will be documented on the daily charge nurse report and reported immediately to the Officer in Charge. An unusual incident report will be forwarded to the institution Security Manager.

**Needle & syringe control:**

- 1) Needles and syringes will be obtained weekly from Central Pharmacy, using an exchange system. The locked syringe/needle box will be transported both to and from by DOC Transport or UPS.
- 2) The nurse at SCCI upon receipt of the incoming exchange box will itemize and verify the contents and separate the contents of the box into the lab needle kit and large needle/syringe kit.
- 3) A new perpetual inventory sheet will be placed in each kit and the boxes sealed with a red breakaway lock.

- a. When an item is removed for use the staff will initial each item in the appropriate numbered box in descending order.
  - b. All needles/syringes will be immediately placed in a biohazards sharps container.
  - c. The biohazard sharps container will be kept in a locked storage until removed from the premises by authorized methods.
  - d. The assigned nurse will verify the accountability of all needles/syringes daily.
- 4) The lab needle kit will be locked in the medication room.
  - 5) The contents of the returning exchange box will be reconciled with the perpetual inventory sheets (the inventory sheet will be filed in the medication room). The box will then be sealed with a red breakaway lock and returned to Central Pharmacy by DOC Transport staff or UPS.
  - 6) Any discrepancies in the daily and exchange counts will be documented on the daily charge nurse report and reported immediately to the Officer in Charge. An unusual incident report will be forwarded to the institution Security Manager.

Addendum: Health Services Division Policy & Procedure  
#P-D-03 Clinic Space, Equipment and Supplies

**OSP: Critical Item Control**

OSP Health Services maintains surgical instruments, needles, syringes, and other sharp items in a manner that assures accountability and control.

**Instrument Control:**

- 1) Instruments will be packaged and have an individual inventory attached to the storage container.
- 2) Items will be stored in a locked storage area: Medication Room, Infirmary Nurses Station, Clinic cabinet and secured medication carts.
- 3) Inventory sheets will be maintained for these areas.  
Medication Room:
  - a. When an item is used the staff will sign out the item used on the inventory sheet.
  - b. Used disposable items will be discarded in a sharps container
  - c. Used non-disposable items will be cleaned and placed in the instrument tray located in the clinic laboratory area cabinet. The instrument is then left in the cabinet for the appropriate time where it is then bagged and placed in the sterilizer for sterilization.
  - d. At the end of the processing the instruments will be returned to the Medication Room to the appropriate location.
  - e. The inventory sheet will be dated and the item returned will be noted.Infirmary Nurse, Clinic Cabinet, Secured Medication Carts:
  - a. When an item is used the staff will exchange an instrument for a key chit.
  - b. Used items will be cleaned as appropriate.
  - c. Items will be returned to location of storage in exchange for the key chit.
- 4) The assigned nurse will verify accountability of all instruments at the end of every shift with another nurse.
  - Medication Room Nurse:
    - Assigned to Medication Room and medication carts instruments.
    - Clinic instruments on non clinic days.
  - Infirmary Nurse:
    - Assigned to Infirmary instruments.
  - Clinic Nurse:
    - Assigned to Clinic instruments.
- 5) Any discrepancies will be documented on the daily charge nurse report and reported immediately to the Officer in Charge and Medical Service Management. An unusual incident report will be forwarded to the Institution Security Manager.
- 6) Monthly a copy of the inventory sheet will be sent to the Operations Captain and the original will be forwarded to Medical Service Management for archiving.

**Needle & Syringe Control:**

- 1) Needles and syringes will be obtained weekly from Central Pharmacy Stores at Central Health Services Administration using an exchange system. The locked syringe/needle box will be transported both to and from Central Stores by the OSP Pharmacy Technician/designee.
- 2) The Pharmacy Technician/designee at OSP upon receipt of the incoming exchange box will itemize and verify the contents.
- 3) A new perpetual inventory sheet will be placed in the needle box itself and kept locked.
  - a. When an item is removed for use the staff will initial each item in the appropriate numbered box in descending order.
  - b. All used needles/syringes will be immediately placed in a biohazards sharps container.
  - c. The biohazard sharps container will be kept in a locked storage until removed from the premises by authorized methods.
  - d. The assigned (medication room) nurse will verify the accountability of all needles/syringes at the end of every shift with another nurse.
- 4) The contents of the returning exchange box will be reconciled with the perpetual inventory sheets. The box will then be sealed with a red breakaway lock and returned to Central Stores by the OSP Pharmacy Technician/designee.
- 5) Any discrepancies in the daily and exchange counts will be documented on the daily charge nurse report and reported immediately to the Officer in Charge and Medical Service Management. An unusual incident report will be forwarded to the Institution Security Manager.
- 6) Weekly the perpetual inventory sheet will be sent back to Central Stores with the outgoing exchange box and a copy will be forwarded to Medical Service Management and to the Operations Captain.

Clinic Space, Equipment and Supplies  
Policy & Procedure #P-D-03

**CCCF: Critical item control**

CCCF Health Services maintains surgical instruments, needles, syringes, and other sharp items in a manner that assures accountability and control. This attachment further supplements CCCF Facility Procedure Tab #4 Control of Tools, Instruments, Equipment and Materials.

**Instrument control:**

- 1) All instruments will be maintained on an inventory system. The inventories will be maintained in 3-ring notebooks.
- 2) All medical instruments in the medium facility will be stored in a locked cart kept in the laboratory room. All medical instruments in the minimum facility will be kept in a bin which is kept in a locked cupboard in the medication room.
- 3) All dental instruments are maintained in the dental clinic work areas in both facilities.
- 4) As dictated by purpose/use instruments may be contained in sterile packaging.
- 5) Inventory sign out sheets are maintained for each area where instruments are stored.
  - a. Each time an item is taken from its area of storage, it will be signed out.
  - b. After use, non-disposable items will be cleaned, bagged, sterilized, and returned to locked storage.
  - c. Disposable items will be discarded in a sharps container.
- 6) Count of all medical instruments will occur three times daily by two health services personnel.
- 7) Count of all dental instruments occurs at the beginning and end of the workday.
- 8) Any discrepancies will be reported immediately to the Medical Services Manager or designee. If the discrepancy cannot be resolved the Officer in Charge will be contacted.
- 9) All tool inventory records are maintained by Health Services at CCCF as per archive standards.

**Needle & syringe control:**

- 1) Needles and syringes will be obtained as needed from Central Pharmacy using an exchange system. UPS will be used to transport the locked syringe/needle boxes to and from Central Medical Stores.
- 2) When the syringe/needle boxes are sent from Central Medical Stores they will have a green lock on them. When the needle boxes are returned to Central Pharmacy they will have a red lock on them. A new inventory sheet will arrive with each box.
- 3) Upon receipt of the new syringe/needle boxes, the medication room technicians will verify the contents against the inventory sheet received with the box. Syringe/needle boxes will be relocked with a green lock and kept in the medium medication room until needed.
- 4) When the box is placed into use, the inventory sheet will remain with the box and use is as follows:
  - a. When an item is removed for use, staff will sign-out each item taken by initialing in the appropriate numbered box in descending order.
  - b. After use all needles/syringes will be immediately placed in a biohazards sharps container.
  - c. Unused needles/syringes may be placed in the secure recycle box(s) mounted on the walls in the medium lab and the minimum exam room.
- 5) When the box needs to be replaced, the contents will be reconciled against the inventory sheet. The inventory sheet is then placed in the box, a red lock placed on the box, and the box returned to the medium medication room. The box will then be returned to Central Medical Stores for replacement.
- 6) Count of all medical syringes/needles will occur three times daily by two health services personnel.
- 7) Count of all dental syringes/needles occurs at the beginning and end of the workday.
- 8) Any discrepancies will be reported immediately to the Medical Services Manager or designee. If the discrepancy cannot be resolved the Officer in Charge will be contacted.
- 9) Syringe/needle inventory sheets are maintained by Central Medical Stores as per archive standards.
- 10) Verification of count sheets are maintained by Health Services at CCCF as per archive standards.

Addendum: Health Services Division Policy & Procedure  
#P-D-03 Clinic Space, Equipment and Supplies

### **TRCI: Critical Item Control**

TRCI Health Services maintains surgical instruments, needles, syringes, and other sharp items in a manner that assures accountability and control.

#### **Instrument Control:**

1. Instruments will be packaged and have an individual inventory attached to the storage container.
2. Items will be stored in a locked storage area: Tool Room, Medication Room, Infirmary Nurses Station, Clinic cabinet and secured medication carts.
3. Inventory sheets will be maintained for these areas:

##### Medication Room and Clinic Areas:

- a. When an item is used the staff will chit out the item used on the inventory sheet.
- b. Used disposable items will be discarded in a sharps container.
- c. Used non-disposable items will be cleaned and placed in the instrument tray located in the Tool Room. The instrument is then left in the tool room for the appropriate time where it is then bagged and placed in the sterilizer for sterilization.
- d. At the end of the processing, the instruments will be returned to the appropriate area and/or shadow board.
- e. The inventory sheet will be dated and the item returned will be noted.

##### Infirmary Nurse, Clinic Cabinet, Secured Medication Carts:

- a. When an item is used the staff will exchange an instrument for a key chit.
  - b. Used items will be cleaned as appropriate.
  - c. Items will be returned to location of storage in exchange for the key chit.
4. The desk and/or assigned nurse will verify accountability of all instruments at the end of every shift with another nurse. This will include sharps in the lab and satellite pharmacy, Infirmary sharps and Clinic instruments.
  5. Any discrepancies will be documented with a memo and an unusual incident report will be forwarded to the Institution Security Manager. In addition, this information will be reported immediately to the Officer in Charge and Medical Service Management.
  6. Monthly, a copy of the inventory sheet will be sent to the Operations Captain and the original will be forwarded to Medical Service Management for archiving.

#### **Needle & Syringe Control:**

1. Needles and syringes will be obtained as needed from Eastside Medical Stores at Snake River Correctional Institution using an exchange system. The locked syringe/needle box will be transported both to and from the TRCI Mailroom by the TRCI designee.
2. Upon opening the sharps box, all contents will be counted and verified.
3. The new perpetual inventory sheet will be stored in the needle box itself and kept locked with the sharps.
  - a. When an item is removed for use the staff will initial each item in the appropriate numbered box in descending order.
  - b. All used needles/syringes will be immediately placed in a biohazards sharps container.
  - c. The biohazard sharps container will be kept in a locked storage until removed from the premises by authorized methods.
  - d. The assigned desk nurse will verify the accountability of all needles/syringes at the end of every shift with another nurse.
4. The contents of the returning exchange box will be reconciled with the perpetual inventory sheets. The box will then be sealed with a red breakaway lock and returned to TRCI Mailroom for shipping by the TRCI designee.
5. Any discrepancies in the daily and exchange counts will be documented and reported immediately to the Officer in Charge and Medical Service Management. An unusual incident report will be forwarded to the Institution Security Manager.

Addendum: Health Services Division Policy & Procedure  
#P-D-03 Clinic Space, Equipment and Supplies

### **PRCF: Critical Item Control**

PRCF Health Services maintains surgical instruments, needles, syringes, and other sharp items in a manner that assures accountability and control.

#### **Instrument Control:**

1. Instruments will be packaged and have an individual inventory attached to the storage container.
2. Items will be stored in a locked storage area: Medication Room.
3. Inventory sheets will be maintained for these areas:

##### Medication Room

- a. When an item is used the staff will sign out the tool.
  - b. Used disposable items will be discarded in a sharps container.
  - c. Used non-disposable items will be cleaned and placed in the instrument tray located in the Dental area. The instrument is then left in the Dental area for cleaning, bagging and then for sterilization.
  - d. At the end of the processing, the instruments will be returned to the appropriate area and/or shadow board.
4. The assigned nurse will verify the accountability of all instruments daily.
  5. If a discrepancy is noted the MSM will be notified, immediately.
  6. Any discrepancies will be documented with a memo and forwarded to the Institution OIC.
  7. The original inventory will be forwarded to Medical Services Manager for archiving.

#### **Needle & Syringe Control:**

1. Needles and syringes will be obtained as needed from Central Medical Stores at Snake River Correctional Institution using an exchange system. The locked syringe/needle box will be transported both to and from the PRCF Food Services area by an appropriate designee.
2. Upon opening the sharps box, all contents will be counted and verified by nursing staff then relocked until the box is in use.
3. The perpetual inventory sheet will be stored in the needle box itself and kept locked with the sharps.
  - a. When an item is removed for use, staff will initial each item in the appropriate numbered box in descending order.
  - b. All used needles/syringes will be immediately placed in a biohazards sharps container.
  - c. The biohazard sharps container will be kept in a locked storage until removed from the premises by authorized methods.
  - d. The assigned nurse will verify the accountability of all needles/sharps daily.
4. The contents of the returning exchange box will be reconciled with the perpetual inventory sheets. The box will then be sealed with a red breakaway lock and returned to PRCF Food Services area by an appropriate designee.
- 5) Any discrepancies in the daily and exchange counts will be documented and reported immediately to the Medical Service Manager, the OIC will be notified and a memo provided to the OIC.

## OREGON DEPARTMENT OF CORRECTIONS URINALYSIS TEST STRIP (Chemstrip 10)

Specific Gravity – 60 seconds

1.000	1.005	1.010	1.015	1.020	1.025	1.030

pH – immediate

5	6	7	8

Leukocytes – 60/120 seconds

Neg	Trace	+	++

Nitrite  
30 sec.

Neg.

Pos.

(Any pink color is considered positive)

Protein – 30/40 sec.

Neg	Trace	+	++	+++
		30 mg	100 mg	500 mg DL

Glucose – 60 sec.

Normal	1/20 g/dL	1/10 g/dL	¼ g/dL	½ g/dL	1 g/dL

Ketones – 60 sec.

Neg	+	++	+++
	Small	Medium	Large

Urobilinogen – 10/30 sed

Normal	1 mg/dl	4 mg/dl	8 mg/dl
			12 mg/dl

Bilirubin – 30/60 sec

Neg	+	++	+++

Blood – 30/60 sec

Neg	About 5-10 ery/ut	About ery/ut	About 250 ery/ut

Hemoglobin

About 10 ery/ut	About 50 ery/ut	About 250 ery/ut

Lot No. \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Completed by: \_\_\_\_\_

Date: \_\_\_\_\_

Name \_\_\_\_\_

SID# \_\_\_\_\_

DOB \_\_\_\_\_

**OREGON DEPARTMENT OF CORRECTIONS  
URINALYSIS TEST STRIP—Diascreen 10**

**Urobilinogen—60 seconds (mg/dl)**

Normal	2	4	8

**Glucose—60 seconds (mg/dl)**

Normal	50	100	250	500	1000

**Ketone—60 seconds (mg/dl)**

Negative	Trace 5	+15	++40	+++80	++++160

**Bilirubin—60 seconds**

Negative	+	++	+++

**Protein—60 seconds (mg/dl)**

Negative	Trace	+30	++100	+++300	++++2000

**Nitrite—60 seconds**

		+ if an degree of uniform pink color	
Negative	Positive		

**Leukocytes—120 seconds**

Negative	Trace	+	++	+++

**Blood—60 seconds**

Negative	Trace (Non-Hemolyzed)	Moderate (Hemolyzed)	Trace (Hemolyzed)	Small +	Moderate ++	Large +++

**pH—60 seconds**

5	6	6.5	7	8	9

**Specific Gravity—60 seconds**

1.000	1.005	1.010	1.015	1.020	1.025	1.030

Lot No. \_\_\_\_\_ Expiration Date: \_\_\_\_\_

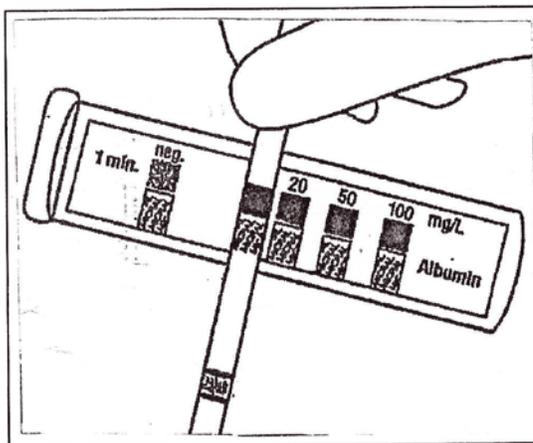
Complete by: \_\_\_\_\_

Date: \_\_\_\_\_

Name : _____
SID# : _____
DOB : _____

## OREGON DEPARTMENT OF CORRECTIONS Chemstrip® Micral® Urinary Albumin Lab Testing

1. Remove the storage vial from the refrigerator, remove a test strip.
2. Dip the Test Strip into the urine specimen container for 5 seconds, assuring that the urine level is between the two black lines.
3. Withdraw the strip carefully to avoid touching the sides of the urine container.
4. Place the strip on a non-absorbent surface or across the specimen container to allow the excess urine to drain.
5. After 1 minute, match the color of the test strip to the color code on the storage vial. After 5 minutes, the color will begin to fade and will become unreliable.
6. Return the test strip vial to the refrigerator as soon as the reading is completed.



Interpretation (Check one):

NEG      20      50      100      mg/L  
                 

Lot Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Analyst Name: \_\_\_\_\_

Date of Test: \_\_\_\_\_

Name _____
SID# _____
DOB _____