Solutions Designed for Geisinger
Diversey Support Team

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  – Key Account Manager – Premier
  – 10+ years experience in the industry

• **Kathleen Feeney**
  – Healthcare Solutions Specialist
  – PA
  – 5+ years experience in the industry

• Provide integrated solutions and broad application expertise in:
  • Disinfectants and Cleaning Solutions
  • Dosing and Dispensing Technologies
  • Training and Consulting Services
  • Dedicated Sales and Service Organization
  • Develop customized solutions to meet facility needs
What Can Go Wrong When Cleaning And Disinfecting?

On the surface, a patient room can appear pathogen-free...but there's more to effective cleaning and disinfecting than meets the eye. Without optimal disinfectants and practices, the potential for HAIs from deadly pathogens remains.

**Germs Are Invisible**
It can be difficult to know how many pathogens are on a surface and if the pathogens have been killed.

**Compatibility With Cleaning Tools**
Efficacy diminishes when some disinfectants bind with cleaning tools.

**Safety Concerns Affect Proper Use**
Staff may be less likely to use disinfectants that can cause eye, skin and respiratory irritation.

**Who? What? When? How?**
Without clear roles and responsibilities, equipment and surfaces can be missed.

**Harsh On Surfaces And Assets**
Some disinfectants can shorten the usual life of assets.

**Inaccessible Means Ineffective**
Disinfectants that are out of sight are out of mind.

**Disinfectant Dries Before Pathogens Die**
Contact times should be greater or equal to the pathogen kill time.

**Unpleasant to Use**
Staff may find it difficult to perform well when dealing with chemicals with strong odors.

**Poorly Laundered Towels May Transmit Pathogens**
A possible barrier to effective cleaning and disinfection.

**Incorrect Disinfection Dilution Can Be Dangerous**
Too little or too much disinfectant can put patients, staff and visitors at risk.
Keeping the surface wet for the prescribed kill time is important:

- Label use directions indicate the length of time that a surface must remain wet in order to achieve disinfection.
- Many disinfectants dry or evaporate before the required contact time is achieved.
- If compliance with the label contact time requirement is not achieved, there is high probability that disinfection was not achieved, which may result in higher HAIs and potential penalties.
- CMS and Joint Commission are now routinely using a stopwatch to ensure that disinfectants are being applied according to required protocol.
The science of Accelerated Hydrogen Peroxide® (AHP®)
combined with the qualities of the ideal disinfectant

Fast
- 75 pathogen claims
- Achievable contact time
- One-minute contact time for:
  - Bacteria
  - Viruses
  - TB
  - Fungi

Effective
- Daily one-step disinfectant cleaner
- Sanitizing claims – soft and hard surfaces (30 seconds)
- Short contact time, can increase turnover efficiency and ensure compliance with label

Responsible
- No PPE Required
- Category IV in all 6 EPA toxicity studies – lowest level of hazard
- Non-irritating to eyes or skin
- Non-corrosive or damaging to most hard and soft surfaces

Sustainable
- Active breaks down to water and oxygen after use
- Free of volatile organic compounds
- Non-toxic
- 2-year shelf life
Always wear appropriate personal protective equipment.

Oxivir® Wipes
The everyday, everywhere hard surface disinfectant

- **Fast**
  - Kills 70+ pathogens in 1 minute or less
  - One-minute contact time for: Bacteria • Viruses • TB • Fungi

- **Effective**
  - Daily, one-step disinfectant cleaner
  - Short contact time, improves turnover efficiency

- **Responsible**
  - No PPE Required
  - Non-irritating to eyes or skin
  - Non-corrosive to common healthcare surfaces

- **Sustainable**
  - Biodegradable
  - Non-toxic
  - Active breaks down to water and oxygen
  - Free of volatile organic compounds

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**Sporicidal: (Defender Tab)**
The *Clostridium difficile* hard surface disinfectant

- **Contact Precautions**
  - PPE Required

- **Targeted**
  - Use for outbreaks or hyperendemic settings of *C. difficile*

- **Fast-Acting**
  - 4 minute contact time
  - Wipes and RTU

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The Program: Keep It Simple
Customized Training Program and Materials
Oxivir® 1 Large Wipes
Usage Directions

The usage directions are intended for use for daily (routine) or discharge (terminal) cleaning and disinfection protocols. Consult specific protocols for directions beyond the usage of this product.

Check the expiration data on the Oxivir® 1 wipe refill label prior to using.

1. Break the seal and pull off the lid of the new wipe container. Place the lid to the side.

2. Pull out the bag of wipes.

3. Tear or cut open the wipe package and place the bag back into the bucket.
4. Tuck the bag of wipes down into the bucket.

5. Find the first wipe in the center of the roll, and pull it up.

6. Thread the first wipe through the opening in the center of the lid and secure the lid.
Oxivir® 1 Large Wipes Usage Directions

Usage Directions, Continued.

For heavily soiled areas, pre-cleaning is necessary.

7. Pull a wipe from the canister at a 45 degree angle. Close the lid of the canister securely when finished so wipes will not dry out.

8. Clean and disinfect the hard, non-porous surfaces and equipment. Oxivir® 1 does both in one application.

9. Change wipes when the wipe is visibly soiled, when the wipe does not deposit liquid on the surface, or when you move to a new area (i.e., patient room to restroom).

10. Dispose of the wipe(s) in accordance with appropriate protocol. DO NOT FLUSH WIPES DOWN THE TOILET.

11. For refills, open bag as in Step 3 and replace into bucket.

12. Note new expiry date on the bucket for the new refill of wipes. Use sticker on the refill bag if available.