Exam Specifications and Study Materials

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CAIP Examination Specification	Study Materials
1. Program Development, Implementation & Maintenance- 23 items	
A. Perform infection control risk assessment to guide oversight of the infection prevention program	- (1) and (2) https://www.ashe.org/ashe-publishes-updated-infection-control-risk-assessment
B. Identify nationally recognized infection control guidelines, regulations, or standards for applicability to the facility	-American Society for Gastrointestinal Endoscopy (ASGE) https://www.asge.org/home/practice-support/guidelines -*AORN Guidelines for Perioperative Practice https://www.aorn.org/guidelines -*Association for Professional in Infection Control and Epidemiology (APIC) https://apic.org/Resources/Overview -*Association for the Advancement of Medical Instrumentation (AAMI) https://store.aami.org/s/store -Center for Disease Control and Prevention (CDC)/Healthcare Infection Control Practices Advisory Committee (HICPAC) https://www.cdc.gov/infection-control/hcp/guidance/index.html) -Occupational Safety and Health Administrations (OSHA) https://www.osha.gov -Society for Healthcare Epidemiology of America (SHEA) https://shea-online.org/guidance -Society of Gastroenterological Nurses and Associates (SGNA) https://www.sgna.org/Practice-Resources/Standard-Setting-Resources)
C. Select guidelines, regulations, or standards to be included in the facility's infection prevention program	See 1. B.
D. Evaluate the facility's selected guidelines annually and as needed	(1) and (2)
E. Update infection prevention program as indicated	(1) and (2)
F. Coordinate exposure control plan with the infection prevention program	- (1) and (2) -Occupational Safety and Health Administration (Bloodborne Pathogens Standard) https://www.osha.gov/SLTC/bloodbornepathogens/standards.html -The National Institute for Occupational Safety and Health (NIOSH) https://www.cdc.gov/niosh/topics/correctionalhcw/plan.html
G. Present infection prevention program to leadership annually and as needed	(1) and (2)
H. Maintain a job description for the infection preventionist and review annually	(1) and (2)

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https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107_exhibit_351.pdf
(2) CMS State Operations Manual Appendix L-Guidance for Surveyors: Ambulatory Surgical Centers (§416.51 Condition for Coverage – Infection control)
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I. Maintain personal competence in infection prevention practices per facility policy	(1) and (2)
2. Education and Training- 30 items	
A. Ensure that healthcare workers receive training on the infection prevention program during orientation, annually, and as needed	(1) and (2)
B. Ensure that credentialed providers receive training on the infection prevention program at time of initial appointment, annually, and as needed	(1) and (2)
C. Assess need for educational offerings for healthcare workers	
1. OSHA training	Occupational Safety and Health Administration https://www.osha.gov/dcsp/compliance_assistance/quickstarts/health_care/index.html
2. bloodborne pathogen risk assessment	Occupational Safety and Health Administration (Bloodborne Pathogens Standard) https://www.osha.gov/bloodborne-pathogens
3. use of personal protection equipment	Occupational Safety and Health Administration (Personnel Protective Equipment) https://www.osha.gov/healthcare/standards
4. donning and doffing personal protection equipment and sterile attire	-*AORN Guidelines for Perioperative Practice https://www.aorn.org/guidelines -Centers for Disease Control and Prevention (CDC) (Healthcare Associated Infections-Protecting Healthcare Personnel) https://www.cdc.gov/infection-control/media/pdfs/Strive-PPE101-508.pdf
5. sharp safety	Centers for Disease Control and Prevention (CDC) (Sharps Safety for Healthcare Settings) https://www.cdc.gov/sharpssafety/tools.html
6. safe injection practices	-Centers for Disease Control and Prevention (CDC) (Injection Safety) https://www.cdc.gov/injectionsafety/providers.html -The One and Only Campaign http://www.oneandonlycampaign.org
7. hand hygiene	-Centers for Disease Control and Prevention (CDC) (Hand Hygiene in Healthcare Settings) https://www.cdc.gov/handhygiene/providers/index.html -World Health Organization (WHO) https://www.who.int/teams/integrated-health-services/infection-prevention-control/hand-hygiene

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8. vaccination compliance	-Centers for Disease Control and Prevention (CDC) (Healthcare Providers and Professionals) https://www.cdc.gov/vaccines/hcp/index.html -Centers for Disease Control and Prevention (CDC) (Recommended Vaccines for Healthcare Workers) https://www.cdc.gov/vaccines/adults/rec-vac/hcw.html -Center for Disease Control and Prevention (CDC) (Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Settings, 2005) https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5417a1.htm?s_cid=rr5417a1_e
9. aseptic technique	* AORN Guidelines for Perioperative Practice
10. skin antisepsis	* AORN Guidelines for Perioperative Practice
11. surgical hand antisepsis (i.e., scrub)	* AORN Guidelines for Perioperative Practice
12. documentation of surgical wound classification	https://www.cdc.gov/nhsn/pdfs/pscmanual/9pscssicurrent.pdf
D. Facilitate education on infection prevention practices	(2)
E. Share surveillance findings with healthcare workers	(2)
F. Review educational information provided to patients and families	(2)
3. Surveillance: Data Collection & Analysis- 37 items	
A. Conduct regularly scheduled infection surveys with practitioners	(2)
B. Inform patients to report signs and symptoms of infection to ASC and physician	(2)
C. Perform investigation of post-operative infections	(2)
D. Gather post-operative infection information	(2)
1. post-op telephone calls	
2. practitioner's query	
E. Develop audit procedures for infection prevention strategies including:	(1)
1. hand hygiene	See 2. C. 7.
2. safe injection practices	See 2. C. 6.
3. use of personal protective equipment	See 2. C. 3.

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4. cleaning, disinfection, and sterilization	*ANSI/AAMI ST79:2017 (Comprehensive guide to steam sterilization and sterility assurance in health care facilities)
5. transmission-based precautions (e.g., contact, droplet)	Centers for Disease Control and Prevention (CDC) (Transmission Based Precautions) https://www.cdc.gov/infectioncontrol/basics/transmission-based-precautions.html
6. cleaning of point of care devices	(1)
7. vaccination compliance	See 2. C. 8.
8. tuberculosis screening and surveillance	Centers for Disease Control and Prevention (CDC) (Tuberculosis) https://www.cdc.gov/tb-healthcare-settings/hcp/screening-testing/index.html
F. Develop audit procedures for environmental infection control:	(1)
1. housekeeping	-* AORN Guidelines for Perioperative Practice -Center for Disease Control and Prevention (CDC)- Guidelines for Environmental Infection Control in Healthcare Facilities https://www.cdc.gov/infection-control/hcp/environmental-control/index.html
3. pre-op, PACU, operating room/ procedure room turnover	-* AORN Guidelines for Perioperative Practice -Center for Disease Control and Prevention (CDC)- Guidelines for Environmental Infection Control in Healthcare Facilities https://www.cdc.gov/infection-control/media/pdfs/guideline-environmental-h.pdf
3. HVAC requirements	* AORN Guidelines for Perioperative Practice
4. temperature & humidity logs	* AORN Guidelines for Perioperative Practice
5. damaged/worn/rusty equipment	* AORN Guidelines for Perioperative Practice
6. building maintenance	* AORN Guidelines for Perioperative Practice
G. Participate in the CMS quality reporting program	https://www.qualitynet.org
H. Analyze collected data	CMS State Operations Manual Appendix L-Guidance for Surveyors: Ambulatory Surgical Centers (§416.43 Condition for Coverage – Quality Assessment and Performance Improvement) https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_l_ambulatory.pdf
I. Use data to identify trends	See 3. H.
J. Use trends to develop an action plan	See 3. H.
K. Present action plan to healthcare workers and leadership	See 3. H.

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L. Present data summaries to healthcare workers and leadership	See 3. H.
M. Periodically review action plan to determine its effectiveness	See 3. H.
4. Infection Prevention Strategies- 30 items	
A. Develop policies and procedures related to infection prevention	(2)
B. Develop infection prevention strategies including:	
1. hand hygiene	See 2. C. 7.
2. safe injection practices	See 2. C. 6.
3. use of personal protective equipment	See 2. C. 3.
4. transmission-based precautions (e.g., contact, droplet)	See 3. E. 5
5. patient placement, transfer, and discharge	-Centers for Disease Control and Prevention (CDC) (Infection Control- Isolation Precautions) https://www.cdc.gov/infectioncontrol/guidelines/isolation/index.html
6. cleaning of point of care devices	See 3. E. 6.
7. vaccination compliance	See 2. C. 8.
8. tuberculosis screening and surveillance	See 3. E. 8.
9. recalls: contaminated equipment, food, medications, supplies	-U.S. Food and Drug Administration Services (FDA)-MedWatch https://www.fda.gov/Safety/MedWatch/default.htm
10. implantable tissue management	* AORN Guidelines for Perioperative Practice
11. traffic control (e.g., observers in OR, restricted areas, access to OR)	* AORN Guidelines for Perioperative Practice
12. maintaining integrity of patient care areas during construction and renovation	Center for Disease Control and Prevention (CDC)- Guidelines for Environmental Infection Control in Healthcare Facilities https://www.cdc.gov/infection-control/media/pdfs/guideline-environmental-h.pdf
13. post-op infection investigations	Center for Disease Control and Prevention (CDC) Guidelines for Isolation Precautions: Preventing transmission of Infectious Agents in Healthcare Settings https://www.cdc.gov/infection-control/hcp/isolation-precautions/index.html

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14. common pathogens found in an ASC	Center for Disease Control and Prevention (CDC) Guidelines for Isolation Precautions: Preventing transmission of Infectious Agents in Healthcare Settings https://www.cdc.gov/infection-control/hcp/isolation-precautions/index.html
15. appropriate attire based on nationally recognized infection control guidelines, regulations, or standards	-* AORN Guidelines for Perioperative Practice -Occupational Safety and Health Administration (Personnel Protective Equipment) https://www.osha.gov/personal-protective-equipment -Association of Surgical Technologists AST Standards of Practice for Surgical Attire, Surgical Scrub, Hand Hygiene and Hand Washing http://www.ast.org/AboutUs/Surgical_Attire
C. Develop infection prevention strategies for the environment of care:	
1. housekeeping	See 3. F. 1
2. pre-op, PACU, OR/PR turnover	See 3. F. 1
3. HVAC requirements	See 3. F. 3.
4. temperature & humidity logs	See 3. F. 4.
5. damaged/worn/rusty equipment	See 3. F. 5.
6. building maintenance	See 3. F. 6.
7. Ensure documentation of surgical wound classification	See 2. C. 12.
5. Instrument/Equipment Cleaning, Disinfection, and Sterilization- 30 items	
A. Identify accepted standards and guidelines for cleaning, disinfection, and sterilization	-* ANSI/AAMI ST79:2017 (Comprehensive guide to steam sterilization and sterility assurance in health care facilities) -* AORN Guidelines for Perioperative Practice
B. Develop procedures for pre-cleaning of instruments and equipment	See 5. A.
C. Develop procedures for transfer of contaminated instruments/equipment to decontamination area	See 5. A.
D. Develop procedures for cleaning instruments/equipment per manufacturer's instructions for use (IFUs)	See 5. A.
1. manual	See 5. A.
2. automated	See 5. A.

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3. ultrasonic	See 5. A.
4. flushing devices	See 5. A.
E. Develop procedures for use of high-level disinfectants and enzymatic cleaning products per manufacturer's instructions for use (IFUs)	See 5. A.
F. Develop policies for transfer of equipment prior to repair or reprocessing	See 5. A.
G. Develop policies and guidelines for processing loaner equipment	See 5. A.
H. Develop policies and guidelines for sterilization per manufacturer's instructions or evidence-based guidelines:	See 5. A.
1. biological testing	See 5. A.
2. air-removal testing	See 5. A.
3. implant management	See 5. A.
4. wrapping and packaging	See 5. A.
5. storage	See 5. A.
6. physical & chemical indicators	See 5. A.
7. sterilizer parameters	See 5. A.
8. sterilizer cleaning and maintenance	See 5. A.
9. sterilizer load failure	See 5. A.
10. immediate-use steam sterilization	See 5. A.
11. short-cycle sterilization	See 5. A.
I. Develop policies and guidelines for reprocessing of endoscopy equipment and accessories per manufacturer's instructions or evidence-based guidelines	-* AORN Guidelines for Perioperative Practice -SGNA Standards of Infection Prevention in Reprocessing Flexible Gastrointestinal Endoscopes https://www.sgna.org/Practice/Standards-Practice-Guidelines

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1. pre-cleaning	See 5. I.
2. transport of contaminated equipment/supplies	See 5. I.
3. leak testing	See 5. I.
4. manual cleaning	See 5. I.
5. use of enzymatic detergents	See 5. I.
6. automatic endoscope reprocessor	See 5. I.
7. manual high-level disinfection	See 5. I.
8. use of high-level disinfectants	See 5. I.
9. testing efficacy of high-level disinfectant	See 5. I.
10. documentation to validate process completion	See 5. I.
11. ability to trace equipment/supply use to an individual patient	See 5. I.
12. transport and storage of equipment after high-level disinfection	See 5. I.

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