



## Stethoscope Use and Cleaning

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The stethoscope is one of the most widely used pieces of reusable medical equipment. Each clinician is responsible for the safety and cleanliness of his/her stethoscope.

Stethoscopes come into direct contact with patients' skin and health care providers' hands. Numerous potential pathogens, including antibiotic resistant bacteria such as methicillin resistant *Staphylococcus aureus* (MRSA) and vancomycin resistant enterococcus (VRE) may be transferred to the stethoscope during typical use.

### **Cleaning/Disinfection:**

According to the Public Health Agency of Canada (PHAC, 1999) and Capital Health policy, devices such as stethoscopes should undergo cleaning and disinfection between each use.

This is accomplished through the use of an approved hospital-grade disinfectant wipe (such as a Virox wipe) or by wiping the stethoscope with a piece of gauze moistened with 70% alcohol. Pre-moistened alcohol swabs are not sufficient due to their small size.

Stethoscopes should be wiped from *clean to dirty*, typically from earpieces to bell/diaphragm.

### **Additional Precautions:**

When patients are placed on Additional Precautions, a stethoscope should be dedicated for use with this patient only (dedicated equipment).

If clinicians opt to use their own stethoscopes in the care of patients on Additional Precautions, they must assume full responsibility for the proper cleaning and disinfection of the stethoscope after use and before leaving that patient's environment.

### **Stethoscope Covers:**

Many clinicians have made attempts to personalize their stethoscopes through the application of fabric stethoscope covers or "cozies".

Fabric stethoscope covers will become contaminated during patient care activities and may act as a fomite for infection (Milam et al., 2001).

The application of a fabric stethoscope cover prevents the necessary cleaning and disinfection and therefore should not be used in any Capital Health facility.

### **References:**

Capital Health Infection Prevention and Control. (2007). Routine Practices. IC-04-002.

Milam, M.W., Hall, M., Pringle, T., & Buchanan, K. (2001). Bacterial contamination of fabric stethoscope covers: The velveteen rabbit of health care? *Infection Control and Hospital Epidemiology*, 22(10), 653-655.

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