

# Thermal Washer Disinfectant Logbook

Revised to be in compliance with SHTM 01-01:  
2018

**Hospital / Location** \_\_\_\_\_

**Department** \_\_\_\_\_

**Reference Number** \_\_\_\_\_

**Serial Number** \_\_\_\_\_

**Start Date for Logbook** \_\_\_\_\_

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## NHSScotland Thermal Washer Disinfecter Logbook Form (TWDLOG)

In accordance with SHTM 01-01: 2018 Part D (3.47 periodic testing & section 4 table 7)

<b>WASHER DISINFECTOR DETAILS</b> -This logbook covers 1 year beginning		
Hospital/Location	Manufacturer	
Department	Ref No.	Ser No.

<b>CONTENTS</b>			
Included in this folder are the following forms :-			
Name of form	Code		Purpose
Plant Test History Record	PTHR1		A record of all routine testing for a year
Plant History Record	PHR1		A record of faults/maintenance
Daily Test Sheet	TWD1		Daily test sheet covering a week's tests
Weekly Test Sheet	TWD2		CP(D)'s weekly test sheet
Quarterly Test Sheet	TWD3A		CP(D)'s quarterly test sheet
Quarterly Test Sheet	TWD3B		CP(D)'s quarterly test sheet
Yearly Test Sheet	TWD4		CP(D)'s yearly test sheet
QA exercise for testing protein levels on RMDs	n/a		Refer to SHTM 01-01 Part A 12.24

<b>PERSONNEL</b>	(name/organisation)	Tel No.
Management		
User		
Operator(s)		
Competent Person (pressure systems)		
Authorising Engineer (Decontamination)		
Authorised Person (Decontamination)		
Competent Person(s) (Decontamination)		
Infection Control Manager/Decon Lead		
ICD/Microbiologist (Decontamination)		
Note that the personnel named in the last 7 categories should have appropriate qualifications/ training/ registration		

<b>PRESSURE SYSTEMS SAFETY REGULATIONS 2000 AND PRESSURE EQUIPMENT REGULATIONS 2016</b>		
This section to be filled in by the Competent Person (Pressure System) if the WD has a pressure vessel which is covered by the Regulations.		
Written scheme of inspection exists/is suitable		
Examination carried out on	Date	Inspected by
Result of examination / comments		

<b>REVIEW BY AUTHORISING ENGINEER (Decontamination)</b>		
Date	Comments on review	Signature

## NHSScotland - Daily Test Sheet Thermal Washer Disinfector Form (TWD1)

Tests to be carried out in accordance with SHTM 01-01: 2018 – Part D (3.47 periodic testing & section 4 table 7)

Location	Week beginning	Week
Department	Ref No.	Ser No.

<b>AUTOMATIC CONTROL TESTS.</b> Are multiple pre-set cycles available and used ? (YES/NO). If yes the cycle selected for the test should be rotated among those used. This should include a WD self disinfection cycle if available.								
Time/temperature required for thermal disinfection ( <b>tick box as applicable</b> ) As A <sub>0</sub> of 600 or greater required 600 then 70/75 °C for 100 mins <input type="checkbox"/> 80/85 °C for 10:00 mins <input type="checkbox"/> or 90/95 °C for 1:00 min <input type="checkbox"/>								
	Cycle number	Cycle selected	Disinfection temperature mid hold	Disinfection hold Time min:sec	Cycle complete indication	Result of test	Certified fit for use by User	PCD test optional
Monday			°C	:	YES/NO	PASS/FAIL		
Tuesday			°C	:	YES/NO	PASS/FAIL		
Wednesday			°C	:	YES/NO	PASS/FAIL		
Thursday			°C	:	YES/NO	PASS/FAIL		
Friday			°C	:	YES/NO	PASS/FAIL		
Saturday			°C	:	YES/NO	PASS/FAIL		
Sunday			°C	:	YES/NO	PASS/FAIL		
			°C	:	YES/NO	PASS/FAIL		

HOUSEKEEPING						
	Check door seals for any wear /tears	Check grommets / seals holding control probes etc for deterioration	Remove and clean strainers and filters	Check spray arm for rotation/free movement and blockages (on machine)	Check spray nozzles for blockage (paying particular attention to those fitted to carriages for cannulated instruments) (load carriers)	Detergent levels - Ensure sufficient additives available and that dosing system is functioning
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
Saturday						
Sunday						

<b>FAULTS-NEW OR EXISTING-ALSO ENTER IN PLANT HISTORY RECORD</b>

## NHSScotland - Weekly Test Sheet Thermal Washer Disinfector Form (TWD2)

Tests to be carried out in accordance with SHTM 01-01: 2018 – Part D (3.47 periodic testing & section 4 table 7)

Location	Week beginning	Week
Department	Ref No.	Ser No.

<b>AUTOMATIC CONTROL TEST-</b> Use a stopwatch for timings where no independent recorder is fitted. Where multiple pre-set cycles are available and used, the cycle selected for the test should be rotated among those used. This should include a WD self disinfection cycle if available.							
Cycle selected			Cycle count number				
Details of load							
Time/temperature required for thermal disinfection (tick box)							
As A <sub>0</sub> of 600 or greater required then 70/75 °C for 100 mins <input type="checkbox"/> 80/85 °C for 10:00 mins <input type="checkbox"/> or 90/95 °C for 1:00 min <input type="checkbox"/>							
Start t=0	Time stage starts	Time stage ends	Time for stage	Indicated temperature mid stage	Recorded temperature mid stage	Water pump pressure mid stage	Time / temp within limits
Pre Rinse	:	:	:	°C	°C	bar	PASS/FAIL
Pre-wash	:	:	:	°C	°C	bar	PASS/FAIL
Wash	:	:	:	°C	°C	bar	PASS/FAIL
Rinse	:	:	:	°C	°C	bar	PASS/FAIL
Ultrasonic	:	:	:	°C	°C	bar	PASS/FAIL
Rinse	:	:	:	°C	°C	bar	PASS/FAIL
Disinfect / rinse	:	:	:	°C	°C	bar	PASS/FAIL
Time above °C	:	:	:	°C	°C	bar	PASS/FAIL
Drying	:	:	:	°C	°C		PASS/FAIL
Cooling	:	:	:	°C	°C		PASS/FAIL
Total cycle time		:					PASS/FAIL
Visual display of cycle complete			YES / NO				
Cycle variables within validation limits			YES / NO		Disinfection time / temperature within limits		YES / NO
Door(s) remain locked until cycle complete			YES / NO				

<b>WEEKLY CHECKS</b>							
Doors seal integrity satisfactory			YES / NO				
Spray check		Rotation of arms <input type="checkbox"/>		Nozzles <input type="checkbox"/>			
Final rinse water quality		Conductivity		µS/cm		Satisfactory YES / NO	
Water Hardness (mg/L)		- Wash Stage:		Disinfect Stage:		Satisfactory YES / NO	
Cleaning efficacy test- residual soil detection			Type of test used			Result PASS / FAIL	
Comments							
Pre wash detergent level checks		Level		Amount used in week		Sufficient left for coming week YES / NO	
Wash detergent level checks		Level		Amount used in week		Sufficient left for coming week YES/ NO	
Ultrasonic Detergent level check		Level		Amount used in week		Sufficient left for coming week YES / NO	
Clean out chamber / filters		<input type="checkbox"/>					
Emergency stop satisfactory			YES / NO				
Doors interlock checks satisfactory			YES / NO				

<b>FAULTS-NEW OR EXISTING-ALSO ENTER IN PLANT HISTORY RECORD</b>	

TEST RESULT SATISFACTORY/UNSATISFACTORY		WASHER DISINFECTOR IS FIT/UNFIT FOR USE	
CP(D)	DATE	USER	DATE

## NHSScotland-Quarterly Test Sheet Thermal Washer Disinfector Form (TWD3A)

Tests to be carried out in accordance with SHTM 01-01: 2018 – Part D (3.47 periodic testing & section 4 table 7)

Location	Week beginning	Week
Department	Ref No.	Ser No.

<b>AUTOMATIC CONTROL TEST</b> Use a stopwatch for timings. Where multiple pre-set cycles are available and used, the cycle selected for the quarterly test should be rotated among those used. This should include a WD self disinfection cycle if available. All cycles in use to be tested at yearly test.									
Cycle selected			Cycle count number						
Details of load									
Measured temperatures from sensor adjacent to WD's control sensor									
Time/temperature required for thermal disinfection (tick box) As A <sub>0</sub> of 600 or greater required - then 70/75 °C for 100 mins <input type="checkbox"/> 80/85 °C for 10:00 mins <input type="checkbox"/> or 90/95 °C for 1:00 min <input type="checkbox"/>									
Start t=0	Time stage starts	Time stage ends	Time for stage	Indicated temperature mid stage	Recorded temperature mid stage	Measured temperature mid stage	Water pump pressure	Measured pump pressure	Time / temp within limits
Pre Rinse	:	:	:	°C	°C	°C	bar	bar	PASS/FAIL
Pre-wash	:	:	:	°C	°C	°C	bar	bar	PASS/FAIL
Wash	:	:	:	°C	°C	°C	bar	bar	PASS/FAIL
Rinse	:	:	:	°C	°C	°C	bar	bar	PASS/FAIL
Ultrasonic	:	:	:	°C	°C	°C	bar	bar	PASS/FAIL
Rinse	:	:	:	°C	°C	°C	bar	bar	PASS/FAIL
Disinfect / rinse	:	:	:	°C	°C	°C	bar	bar	PASS/FAIL
Time above °C	:	:	:	°C	°C	°C	bar	bar	PASS/FAIL
Drying	:	:	:	°C	°C	°C			PASS/FAIL
Cooling	:	:	:	°C	°C	°C			PASS/FAIL
Total cycle time	:	:	:						PASS/FAIL
Calibration of instruments within limits YES/NO					If not, then note inaccuracies below, and action.				
Outstanding inaccuracies									
If any calibration has been changed during this quarterly test, note below with initial error									
Visual display of cycle complete					YES / NO				
Cycle variables within validation limits					YES / NO				
Disinfection time / temperature within limits					YES / NO				
Door(s) remain locked until cycle complete YES / NO									

<b>WEEKLY CHECKS</b>										
Doors seal integrity satisfactory					YES / NO					
Spray check		Rotation of arms <input type="checkbox"/>			Nozzles <input type="checkbox"/>					
Final rinse water quality		Conductivity			µS/cm		satisfactory YES / NO			
Cleaning efficacy test		<input type="checkbox"/> Type of test used			Result Pass / Fail					
Comments										
Details of chemicals										
Pre wash			Wash			Ultrasonic				
Pre wash detergent level checks		Level	Amount used in week			Sufficient left for coming week <input type="checkbox"/>				
Wash detergent level checks		Level	Amount used in week			Sufficient left for coming week <input type="checkbox"/>				
Ultrasonic tank detergent level checks		Level	Amount used in week			Sufficient left for coming week <input type="checkbox"/>				
Clean out chamber / filters <input type="checkbox"/>					Emergency stop satisfactory YES / NO			Doors interlock checks (as detailed in form TWD4) satisfactory		YES / NO

<b>FAULTS-NEW OR EXISTING-ALSO ENTER IN PLANT HISTORY RECORD</b>									

TEST RESULT SATISFACTORY/UNSATISFACTORY				WASHER DISINFECTOR IS FIT/UNFIT FOR USE					
TEST PERSON			DATE	USER			DATE		



## NHSScotland-Yearly Test Sheet Thermal Washer Disinfector Form (TWD4)

To be filled in along with Quarterly Test Sheets TWD3A and TWD3B to complete a Yearly Test.  
Tests to be carried out in accordance with SHTM 01-01: 2018 – Part D (3.47 periodic testing & section 4 table 7)

Location	Week beginning	Week
Department	Ref No.	Ser No.

<b>DETERGENT AND OTHER CHEMICALS</b>				
Manufacturer of detergent / chemical				
Name of detergent / chemical				
Type of detergent				
Recommended dosage	ml/litre g/litre µS/cm	ml/litre g/litre µS/cm	ml/litre g/litre µS/cm	ml/litre g/litre µS/cm
Volume of water from manufacturer	litres	litres	litres	litres
Measured volume of water	litres	litres	litres	litres
Measured chemical dose	ml	ml	ml	ml
Measured concentration ml/litre	ml/litre	ml/litre	ml/litre	ml/litre
Recommended temperature range	°C	°C	°C	°C
Actual measured temp. range	°C	°C	°C	°C
Note : Where recommended dosage is expressed as %, multiply by 10 to get ml/litre. 1 cc=1 ml. 100ppm=1 ml/litre				
Comments				

<b>YEARLY SAFETY , FAULT AND FAIL CHECKS</b>	
Chemical dosing low level test	Satisfactory - Yes/No
Over temperature protection	Satisfactory - Yes/No
Sensor failure : pressure	Satisfactory - Yes/No
Sensor failure : temperature	Satisfactory - Yes/No
Low pump pressure switch setting      bar      tested pressure      bar	
Door check : cycle start	
Door check : locked in cycle	
Door check : double door	
Door check : cycle fail lock	Satisfactory - Yes/No
Load carrier checks	
Alignment with water connection	
Spray arms	
Ultrasonic activity test if applicable	

<b>ENVIRONMENTAL TESTS</b>	
Air quality test	Satisfactory - Yes/No
Aerosol discharge	Satisfactory - Yes/No
Water vapour discharge	Satisfactory - Yes/No
Rinse water chemical purity	Satisfactory - Yes/No
Rinse water endotoxin	Satisfactory - Yes/No
Process residues: chemical additives	Satisfactory - Yes/No
Load dryness	Satisfactory - Yes/No
Free draining	Satisfactory - Yes/No
Efficacy of drain discharge trap	Satisfactory - Yes/No

TEST RESULT SATISFACTORY/UNSATISFACTORY	WASHER DISINFECTOR IS FIT/UNFIT FOR USE		
CP(D)	DATE	USER	DATE

## NHSScotland - Plant Test History Record Sheet-Form (PTHR1)

Type of equipment		
Hospital/Location	Start date for this sheet	
Department	Ref No.	Ser No.

<b>WEEKLY TEST RECORD</b>											
Week number	Date of weekly test	Tester initials	Week number	Date of weekly test	Tester initials	Week number	Date of weekly test	Tester initials	Week number	Date of weekly test	Tester initials
1			14			27			40		
2			15			28			41		
3			16			29			42		
4			17			30			43		
5			18			31			44		
6			19			32			45		
7			20			33			46		
8			21			34			47		
9			22			35			48		
10			23			36			49		
11			24			37			50		
12			25			38			51		
13			26			39			52		

<b>QUARTERLY TEST RECORD</b>											
Week number	Quarterly test date	Tester initials	Week number	Quarterly test date	Tester initials	Week number	Quarterly test date	Tester initials	Week number	Quarterly test date	Tester initials

<b>YEARLY TEST RECORD</b>			Week number.	Yearly test date	Tester initials	Week number	Yearly test date	Tester initials			



