



# Infection Preventionist Onboarding Checklist:

A STRUCTURED  
TEMPLATE



**APIC**<sup>®</sup>

Association for Professionals in  
Infection Control and Epidemiology

## Welcome to the Infection Preventionist (IP) Onboarding Checklist.

This comprehensive checklist template is designed to guide the onboarding of infection prevention professionals through the essential steps, knowledge areas, and ongoing responsibilities required to effectively manage and prevent infections within healthcare facilities. The template can be adapted and customized to align with job setting, organizational goals, and role-specific purpose and responsibilities.

The checklist is divided into several sections, each focusing on different aspects of infection prevention and control (IPC). By following this checklist, you will gain a thorough understanding of IPC practices, meet key personnel, and ensure compliance with regulatory requirements. Periodically review and update the checklist to reflect any changes in IPC guidelines, standards, or organizational practices.

### Recommended timeline for completion based on IP Competency Level:

Novice and Becoming Proficient: within 90 days of hire

Proficient/Expert/Leader: within 30 days of hire

# Infection Prevention Checklist

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# Infection Prevention National Resources and Professional Organizations

## Instructions:

### National Organizations and Professional Organizations

- [National Healthcare Safety Network \(NHSN\)](#)
- [Secure Access Management Services](#)
- [Centers for Disease Control \(CDC\) Health Alert Network \(HAN Alerts\)](#)
- [Health Alert Network \(HAN Alerts\) State Health Department Health Alert Network \(HAN Alerts\)](#)
- [The Society for Health Care Epidemiology of America \(SHEA\)](#)
- [Infectious Disease Society of America \(IDSA\)](#)
- [International Federation of Infection Control \(IFIC\)](#)

### Paid Professional Societies/Memberships

- [Association for Professionals in Infection Control and Epidemiology \(APIC\)](#)
  - [Join APIC IP Talk](#)
  - [Join local APIC Chapter](#)
- [Association for Professionals in Infection Control and Epidemiology Text](#)
- [The Society for Healthcare Epidemiology of America \(SHEA\)](#)
- [Infectious Disease Society of America \(IDSA\)](#)
- [International Federation of Infection Control \(IFIC\)](#)
- [Association of Perioperative Registered Nurses \(AORN\)](#)
- [The Association for the Advancement of Medical Instrumentation \(AAMI\)](#)

# Introductions & Department Tours

**Instructions:** Begin by scheduling meetings with key personnel and departments listed in this section. These introductions will help you understand the roles and responsibilities of various team members and how they contribute to infection prevention. Shadowing in different departments is recommended to understand their processes and how infection prevention principles are integrated.

**Questions to Ask:**

INTRODUCTION & DEPARTMENT TOURS			
Key Department Personnel and Community Partners	Employee Name	Date Completed	Signature
<input type="checkbox"/> Infectious Disease Physician or Medical Director of Infection Prevention			
<input type="checkbox"/> Chief Nursing Officer or other nursing leadership/ Director			
<input type="checkbox"/> Chief Medical Officer/ Director			
<input type="checkbox"/> Nursing Unit Managers/ Directors			
<input type="checkbox"/> Ambulatory Nursing Manager/Director			
<input type="checkbox"/> Education Manager/Director			
<input type="checkbox"/> Quality Management Manager/Director			
<input type="checkbox"/> Patient Safety Officer/ Director			
<input type="checkbox"/> Risk Management Manager/ Director			
<input type="checkbox"/> Employee Health Manager/ Director			
<input type="checkbox"/> Regulatory and/or compliance leader/Director			
<input type="checkbox"/> Information Technology Manager/Director			
<input type="checkbox"/> Respiratory Therapy Manager/Director			
<input type="checkbox"/> Laboratory Manager/Director			
<input type="checkbox"/> Pharmacy Manager/Director			
<input type="checkbox"/> Dietary Manager/Director			
<input type="checkbox"/> Environmental Services Manager/Director			



# Shadow Opportunities

**Instructions:** Schedule times to shadow individuals listed in this section. Shadowing will allow you to develop connections with the various departments and provide insight regarding their processes and procedures and the infection prevention implications.

SHADOW OPPORTUNITIES			
Department	Employee Name	Date Completed	Signature
<input type="checkbox"/> Respiratory therapy			
<input type="checkbox"/> Laboratory			
<input type="checkbox"/> Microbiology			
<input type="checkbox"/> Med/Surg RN			
<input type="checkbox"/> ED RN			
<input type="checkbox"/> Dietary			
<input type="checkbox"/> Environmental services			
<input type="checkbox"/> Sterile Processing			
<input type="checkbox"/> Surgery			

# Committee Participation

**Instructions:** Review current committees pertaining to infection prevention. Request invitations to each. Understand meeting frequency and infection prevention reporting requirements.

COMMITTEE PARTICIPATION		
Committees	Meeting Frequency	Reporting Requirements
<input type="checkbox"/> Infection Prevention & Control Committee		
<input type="checkbox"/> Antimicrobial Stewardship Committee		
<input type="checkbox"/> Environment of Care Committee		
<input type="checkbox"/> Patient Safety Committee		
<input type="checkbox"/> Quality Committee (QAPI)		

# Infection Prevention Key Topics to Learn

**Instructions:** Review current key topics as related to infection prevention. Several examples of important questions to ask are included, as answers will vary depending on your setting. In addition, locate and review the policy that is applicable to the various topics/sections.

TOPIC 1: ACCREDITATION & REGULATORY REQUIREMENTS		
Required Learning/ Tasks to Complete	Questions to Ask	Applicable Policies/SOPs (every column)
<b>Regulations &amp; Standards:</b> State & federal infection control regulations, requirements, and standards	What accrediting bodies govern your facility?	
<b>Communicable Disease Reporting:</b> Required state communicable diseases reporting & the corresponding reporting timeframe	<a href="#">CMS</a> and Department of Public Health (state/local) requires specific reporting based on your facility. After reviewing the requirements, discuss with a team member how these requirements are met at your facility.  Who is responsible for notifying the state of reportable conditions and how are health departments notified?	
<b>Survey Readiness:</b> Prepare survey documentation. Include the following: <ul style="list-style-type: none"> <li><input type="checkbox"/> Infection Control Program Policy</li> <li><input type="checkbox"/> Infection Control Annual Risk Assessment</li> <li><input type="checkbox"/> Infection Control Annual Plan</li> <li><input type="checkbox"/> Current year's IPC data</li> <li><input type="checkbox"/> Previous year's IPC data with year-end summary</li> <li><input type="checkbox"/> State Health Department's reportable diseases, including state reported HAIs</li> <li><input type="checkbox"/> Outbreak investigations</li> <li><input type="checkbox"/> One year of IPC Committee meeting minutes</li> <li><input type="checkbox"/> Training of IPC staff, including evaluations, continuing education, competencies</li> <li><input type="checkbox"/> Antimicrobial Stewardship Program</li> <li><input type="checkbox"/> Be familiar with your facilities antibiogram</li> </ul>	What is your role in a health department/CMS inspection or accreditation survey?	

## TOPIC 1: ACCREDITATION & REGULATORY REQUIREMENTS

Required Learning/ Tasks to Complete	Questions to Ask	Applicable Policies/SOPs (every column)
<p><b>Infection Prevention &amp; Control Plan:</b> Identify the elements and scope of your facility's Infection Prevention Plan. The IP Plan should include the following elements:</p>	<p>Has an annual infection prevention risk assessment has been performed?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <ul style="list-style-type: none"> <li>• If not completed, a multidisciplinary team will be needed to complete</li> <li>• See <a href="#">Appendix B</a> for required risk assessment elements and examples</li> <li>• Annual infection prevention goals should be developed based on risk assessment findings.</li> <li>• Goals should be assessed throughout the course of the year.</li> </ul>	<p>Infection Prevention &amp; Control Plan <i>Annual review and approval required</i></p>
<p><b>TB Control Plan:</b> Identify the elements and scope of your TB Control Plan</p>	<p>What is the process if a known or suspected case of tuberculosis (TB) is admitted to your facility?</p> <hr/> <p>What is your testing policy?</p> <hr/> <p>What is your test method:</p> <p><input type="checkbox"/> IGRA</p> <p><input type="checkbox"/> TST</p> <hr/> <p>What frequency is TB screening done for healthcare workers?</p> <hr/> <p>How are staff monitored for exposure to TB and development of TB disease (e.g. Annual PPD, blood assay testing)</p>	<p>BBP Exposure and Control Plan <i>Annual review and approval required</i></p>
<p><b>Bloodborne Pathogen (BBP) Exposure Control Plan:</b> Identify the elements and scope of your BBP Exposure Control Plan</p>	<p>Does it meet Occupational Safety and Health Administration (OSHA) BBP Standards?</p>	<p>BBP Exposure and Control Plan <i>Annual review and approval required</i></p>

<b>NOTES</b>	
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## TOPIC 2: PREVENTING & CONTROLLING THE TRANSMISSION OF INFECTIOUS AGENTS

Required Learning/ Tasks to Complete	Questions to Ask	Applicable Policies
<p><b>Standard Precautions:</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Define each component of the chain of infection</li> <li><input type="checkbox"/> Understand the importance of standard precautions and what practices fall under these precautions                             <ul style="list-style-type: none"> <li>• Hand Hygiene</li> <li>• Safe Injection Practices</li> <li>• PPE</li> <li>• Respiratory hygiene/cough etiquette</li> <li>• Appropriate patient placement</li> <li>• Proper cleaning and disinfection of equipment and environment (<i>Review process for transporting dirty equipment</i>)</li> <li>• Proper textile and laundry handling</li> </ul> </li> </ul>	<p>What personal protective equipment (PPE) is available at your facility?</p> <hr/> <p>When and where should PPE be worn within your facility?</p>	<p>Standard Precautions Policy</p>
<p><b>Hand Hygiene</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Understand the importance of hand hygiene, the roles of hand hygiene products and when they should be used.</li> <li><input type="checkbox"/> Understand the various strategies to improve hand hygiene compliance</li> <li><input type="checkbox"/> Explore hand hygiene monitoring methods (manual versus electronic observations, hand hygiene product usage)</li> </ul>	<p>What guidelines does your facility follow for hand hygiene (CDC or WHO)?</p> <hr/> <p>How is hand hygiene compliance monitored?</p>	<p>Hand Hygiene Policy</p>

## TOPIC 2: PREVENTING & CONTROLLING THE TRANSMISSION OF INFECTIOUS AGENTS

Required Learning/ Tasks to Complete	Questions to Ask	Applicable Policies
<p><b>Enhanced Barrier Precautions (EBP):</b> Understand the EBP for the various communicable diseases, infections, and symptoms within long term care</p>	<p>In addition to Standard Precautions, Enhanced Barrier Precautions expand the use of gown and gloves beyond anticipated blood and body fluid exposures. They focus on use of gown and gloves during high-contact resident care activities that have been demonstrated to result in transfer of MDROs to hands and clothing of healthcare personnel, even if blood and body fluid exposure is not anticipated</p> <hr/> <p>Recommended for residents known to be colonized or infected with a MDRO as well as those at increased risk of MDRO acquisition (e.g., residents with wounds or indwelling medical devices)</p> <hr/> <p>When should staff use Contact Precautions versus Enhanced Barrier Precautions for a resident with a MDRO?</p>	<p>Enhanced Barrier Precautions Policy</p>
<p><b>Transmission-Based Precautions (TBP):</b> Understand the TBP requirements for the various communicable diseases, organisms, infections and symptoms.</p> <p><i>Applies to long term care/skilled nursing facilities.</i></p>	<p>What types of TBP are used at your facility. Examples include:</p> <ul style="list-style-type: none"> <li>• Contact</li> <li>• Droplet</li> <li>• Airborne</li> </ul> <hr/> <p>Who is responsible for initiating and discontinuing isolation of patients?</p> <hr/> <p>What is the process for identifying patients/residents with communicable diseases that require TBP?</p> <hr/> <p>Determine your facility's policies/procedures of the following for patients in TBP:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Patient placement</li> <li><input type="checkbox"/> Cohorting vs. use of private rooms</li> <li><input type="checkbox"/> Hand hygiene</li> <li><input type="checkbox"/> PPE</li> <li><input type="checkbox"/> Transportation</li> <li><input type="checkbox"/> Patient care equipment and supplies</li> <li><input type="checkbox"/> Handling of linen</li> <li><input type="checkbox"/> Visitor management</li> <li><input type="checkbox"/> Isolation discontinuation</li> <li><input type="checkbox"/> Routine and terminal (discharge) cleaning</li> </ul>	<p>Transmission-Based Precautions Policy</p>



## TOPIC 3: SURVEILLANCE & REPORTING

### Required Learning/ Tasks to Complete

### Questions to Ask

### Applicable Policies

#### Surveillance Plan:

Locate facility-specific surveillance plan

What is your facility's data collection process?

What data does your facility gather and where can you find it?

#### Medical Records:

Gain access to reports in your electronic medical record

What is the facility reporting process for:

- HAIs
- Environmental and occupational IP opportunities/gaps

#### Laboratory Reports:

Understand how to Interpret diagnostic/lab reports

What data analysis tools/resources are available?

Examples include:

- Tableau, Power BI

#### NHSN:

- Obtain details for your facility's CDC NHSN account
- Apply for Secure Access Management Services, or SAMS account
- Complete NHSN training as applicable. Topics include:
  - CLABSI
  - CAUTI
  - SSI
  - *C. difficile*
  - MRSA Bacteremia
  - VAE
- Partner with IT to identify pathways for infection data submission to NHSN & state-required entities
- Submit data to NHSN
- Sign up for CDC NHSN email alerts
- Know deadlines for required reporting

What NHSN component(s) does your facility use?

Examples include:

- Patient Safety Component (Acute Care/ Critical Access/Long-term Acute Care/ Inpatient Rehabilitation Facilities/ Inpatient Psychiatric Facilities)
- Healthcare Personnel Safety Component (Acute Care/Critical Access/Ambulatory Surgery Center/Long-term Acute Care/ Inpatient Rehabilitation Facilities/ Inpatient Psychiatric Facilities))
- Outpatient Procedure Component (Ambulatory Surgery Center)

What is your facility's NHSN surveillance plan and when is this data due? Examples include:

- CLABSI
- CAUTI
- SSI
- *C. difficile*
- MRSA Bacteremia
- VAE
- Antimicrobial use and Resistance (AUR) AU/AR/AUR
- Dialysis events
- Healthcare Personnel vaccination

Does your facility surveillance plan include non-NHSN definitions? Examples include:

- APIC HICPAC Guidelines for Home Health/ Home Hospice

### NOTES

## TOPIC 4: INFECTIOUS DISEASES & EPIDEMIOLOGY

Required Learning/ Tasks to Complete	Questions to Ask	Applicable Policies
Best practices for specimen collection, transportation, handling & storage e.g. blood, wound, respiratory & urine specimens		
MDRO identification & IP implications		
Steps to investigate a cluster/outbreak of an infectious origin		

## TOPIC 5: EMPLOYEE/OCCUPATIONAL HEALTH

Required Learning/ Tasks to Complete	Questions to Ask	Applicable Policies
<b>Illness Policy:</b> Review the healthcare worker illness or sick leave policy	How do healthcare workers report illnesses to employee health? If so, what is the best way to contact employee health?	
<b>Immunizations:</b> Determine current requirements for healthcare worker immunizations	What annual employee influenza vaccination campaign is in place?	
<input type="checkbox"/> Review CDC's list of recommended vaccines <input type="checkbox"/> Collaborate with occupational health to ensure vaccination reporting for facility by profession (e.g., medical staff, doctors, nurses)	What vaccines are required for employment?	
<input type="checkbox"/> Participate in healthcare worker influenza vaccination campaign		
<b>Occupational Safety and Health Administration (OSHA):</b>	What training is available for staff as required by (OSHA)?	BBP Exposure and Control Plan <i>Annual review and approval required</i>
<input type="checkbox"/> Review OSHA Bloodborne Pathogen Standard <input type="checkbox"/> Respiratory protection program <ul style="list-style-type: none"> <li>• TB healthcare worker history screening</li> <li>• N-95 particulate respirator versus PAPR</li> <li>• Fit testing requirements</li> </ul>	What is your role in the annual sharps safety risk assessment ?	

## TOPIC 5: EMPLOYEE/OCCUPATIONAL HEALTH

Required Learning/ Tasks to Complete	Questions to Ask	Applicable Policies
<b>Communicable Disease Exposure Process:</b> Review healthcare worker communicable disease exposure policy	Determine who has the authority to require work restriction of healthcare worker in event of communicable disease transmission risk  How are physicians/providers, students, contract workers, patients, volunteers, and visitors handled if there is a communicable disease exposure	

## TOPIC 6: CLEANING, DISINFECTION, STERILIZATION AND ASEPSIS

Required Learning/ Tasks to Complete	Questions to Ask	Applicable Policies
Differentiate between cleaning, disinfection, high-level disinfection (HLD) and sterilization	What is your facility's processes for disinfection and sterilization <ul style="list-style-type: none"> <li>Observe processing of patient care equipment (non-critical, semi-critical and critical) in specialty areas</li> </ul>	
Understand the Spaulding classification of disinfection and sterilization	Does your facility perform Immediate Use Steam Sterilization (IUSS)? If so, what is the tracking process?	
Importance of decontaminating instruments/scopes	What is the current process for transporting dirty equipment?	
Learn key steps, terms and processes: <ul style="list-style-type: none"> <li>Event-related sterility</li> <li>Chemical and biological indicators</li> <li>Testing for effective levels of HLD solutions</li> <li>Documentation/monitoring requirements</li> <li>Tracking for instrument reprocessing</li> </ul>	What is the current policy for load recall procedures?	
Observe and review decontamination, packaging, storage in sterile processing	What is the current auditing/adherence monitoring process?	
Importance of manufacturer Instructions for use (IFU) for instruments and scopes	Do staff have access to manufacturer's instructions for use (IFUs)?	
Review types of biological/chemical indicators in use and manufacturer IFU	What records/logs are available in the department?	
Review HLD solutions in use and manufacturer IFU	Observe HLD and sterilization processes. Do practices meet standards and guidelines?	

## TOPIC 6: CLEANING, DISINFECTION, STERILIZATION AND ASEPSIS

Required Learning/ Tasks to Complete	Questions to Ask	Applicable Policies
Review steam sterilizers and high-level disinfectant equipment in use and manufacturer IFU		
Determine appropriate practices for reprocessing single-use devices	Does your facility participate in reuse of single-use devices (SUD)?	
FDA requirements for reprocessing and 510K device items		
Learn the special disinfection/sterilization requirements for resilient pathogens. For example: <ul style="list-style-type: none"> <li>• Creutzfeldt-Jakob Disease (CJD)</li> <li>• Human Papillomavirus (HPV)</li> </ul>		

## TOPIC 7: ENVIRONMENT OF CARE

Required Learning/ Tasks to Complete	Questions to Ask	Applicable Policies
Locate the facility water infection control risk assessment (ICRA) and water management plan	How does your facility currently monitor the water system?	Policies related to your facility's water management system
<input type="checkbox"/> Understand the water management plan must be reviewed annually <input type="checkbox"/> Identify water-related features or decorations in your facility (e.g., fountains, fish tanks) and how they impact infection prevention <input type="checkbox"/> Review the cleaning schedule, products used for cleaning, recommendations for environmental sampling	How often does the water management team meet?	
Learn the basics of construction phases as they impact infection prevention, including the Infection Control Risk Assessment (ICRA) for construction.	Where are the ICRA's stored /logged for record keeping?	Policies related to maintenance, renovation and construction. <i>Including IP construction policy and infection control risk assessment tool (ICRA)</i>
Appropriate reasons for environmental culturing		

## TOPIC 7: ENVIRONMENT OF CARE

### Required Learning/ Tasks to Complete

### Questions to Ask

### Applicable Policies

Review [USP 797 pharmacy](#) regulations pertinent to infection control

Review requirements for monitoring heating, ventilation and air conditioning (HVAC) systems

- Positive and negative differentials
- Air exchange requirements for specific areas
- Levels of air filtration (e.g., HEPA filtration)
- Parameters for temperature and humidity

Learn your facility's HVAC-related policies & practices

Review Environmental Cleaning practices pertinent to infection control

What cleaning and disinfecting products are in use throughout the facility?

- Locate your facility's product information grid that lists the products, a description & process for use

What is the process to review device-specific manufacturer IFUs?

What pest control practices are in place (e.g. bed bugs)?

- Is this a contracted service?

What are the current waste management practices?

- Handling, storage, and transport of biohazard waste

Who approves new products or equipment coming into the facility?

Cleaning in special circumstances and populations (e.g. surgery, NICU)

Who monitors cleaning effectiveness?

How is it reported?

### NOTES

## TOPIC 8: QUALITY IMPROVEMENT

### Required Learning/ Tasks to Complete

Understand the various performance improvement models, i.e., PDCA, DMAIC

### Questions to Ask

What infection prevention initiatives are currently being worked on at your facility? Examples could include:

- CLABSI, CAUTI, SSI, MDRO, etc

What are the facility goals and committee structure for infection control data and discussion?

### Applicable Policies

## TOPIC 9: EMERGENCY MANAGEMENT

### Required Learning/ Tasks to Complete

Locate and review your facility's emergency management/preparedness plan

### Questions to Ask

Collaborate with risk management/quality management in the identification and review of adverse and sentinel events:

### Applicable Policies

## TOPIC 10: CULTURE OF SAFETY

### Required Learning/ Tasks to Complete

Understand the importance of promoting a culture of safety and raising concerns professionally.

[CUS training \(Concerned, Uncomfortable, Safety Issue\)](#)

Can you think of instances where CUS training can come in hand? Consider using it when giving feedback for missed hand hygiene opportunities or anytime you see an infection prevention breach of concern.

Safety Culture in Healthcare Settings

What are some of the ways Infection Preventionist foster a culture of safety in the health care setting?

### Applicable Policies

# Tips

Make rounding in clinical spaces a routine practice (Refer to [APIC microlessons](#) for additional resources). Use data to prioritize focused rounding.

Round in:

- patient care areas
- procedural areas
- specialty care areas (rehab gyms, behavioral health facilities)
- locations that use & transport medical instruments
- locations that perform high level disinfection and/or sterilization of
- medical instruments
- locations where clean and/or sterile supplies are stored

Determine your role in annual infection prevention education

Ensure your training materials are up to date with current standards & guidelines

## Appendix A

ASSOCIATIONS RELEVANT TO INFECTION PREVENTION	
<b>AAHA</b>	<a href="#">American Animal Hospital Association (vet)</a>
<b>AAMI</b>	<a href="#">Association for the Advancement of Medical Instrumentation</a>
<b>ACHC</b>	<a href="#">Accreditation Commission for Health Care</a>
<b>ADS</b>	<a href="#">Association for Dental Safety</a>
<b>AORN</b>	<a href="#">Association of periOperative Registered NurseS</a>
<b>APIC</b>	<a href="#">Association for Professionals in Infection Prevention and Epidemiology</a>
<b>ASHRAE</b>	<a href="#">American Society of Heating, Refrigerating and Air-Conditioning Engineers</a>
<b>CBIC</b>	<a href="#">Certification Board of Infection Control</a>
<b>CMS</b>	<a href="#">Centers for Medicaid and Medicare</a>
<b>DNV</b>	<a href="#">Det Norske Veritas</a>
<b>FGI</b>	<a href="#">Facility Guidelines Institute</a>
<b>IDSA</b>	<a href="#">Infectious Disease Society of America</a>
<b>IFIC</b>	<a href="#">International Federation of Infection Control</a>
<b>NAHQ</b>	<a href="#">National Association for Healthcare Quality</a>
<b>NHSN</b>	<a href="#">National Healthcare Safety Network</a>
<b>SGNA</b>	<a href="#">Society of Gastroenterology Nurses and Associates</a>
<b>SHEA</b>	<a href="#">Society for Healthcare Epidemiology of America</a>
<b>TJC</b>	<a href="#">The Joint Commission</a>

## Appendix B

INFECTION PREVENTION REFERENCE MATERIALS
<a href="#">AAMI ST79</a>
<a href="#">AAMI ST91</a>
<a href="#">AAMI ST108</a>
<a href="#">APIC Guides</a>
<a href="#">APIC Ready Reference for Microbes</a>
<a href="#">AORN Guidelines</a>
<a href="#">APIC Online Text</a>
<a href="#">APIC Microlearning Hub</a>
<a href="#">AJIC Online</a>
<a href="#">CDC</a>
<a href="#">Centers for Medicare &amp; Medicaid (CMS) conditions of participation</a>
<a href="#">Construction &amp; Renovation</a>
<a href="#">HICPAC</a>
<a href="#">Infection Prevention and Control Risk Assessment</a>
<a href="#">NACCHO</a>
<a href="#">Redbook from the American Academy of Pediatrics</a>
<a href="#">SHEA Epi Text</a>
<a href="#">SGNA</a>
<a href="#">The Joint Commission</a>



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