Point of Care Testing (POCT) Inspection Checklist- Random

Name of the Facility: _____

Date of Inspection:_____/_____/_____

Ref.	Description	Yes	No	N/A	Remarks
5	**STANDARD ONE: GENERAL REQUIREMENTS**				
5.1	POCT services may be carried out in health facilities including home healthcare services, licensed by DHA and by DHA licensed healthcare professionals.				
5.3	Licensed health facilities shall maintain POCT equipment as recommended by the manufacturer and ensure all equipment are calibrated as per recommended protocols and have the records available.				
5.4	All maintenance records shall be documented.				
5.5	POCT services carried out shall be recorded and maintained in the patient Health Records.				
6	**STANDARD TWO: HEALTH FACILITY REQUIREMENTS**				
6.3	The area where POCT is conducted must be in a clean adequate environment, away from staff area and waste management rooms.				
6.4	The area where POCT is conducted does not need to be solely dedicated to performing POCT. For example, a consultation or nurse's room may be suitable				
6.5	POCT equipment and supplies shall be kept in an appropriate temperature as per manufacturers guidelines.				
6.5.1.	These temperatures will be monitored to confirm suitability of POCT use.				
6.6	The basic POCT list includes the following, but not				

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	limited to:					
6.6.1	Blood glucose glucometer					
6.6.2	HbA1c measurement					
6.6.3	Urine pregnancy tests					
6.6.4	Haemoglobin and Haematocrit (by finger prick)					
6.6.5	Urine dip stick for urine analysis					
6.6.6	Cardiac Troponin (FDA and/CE marked analysers) for myocardial infarction detection, Myoglobin and Fatty Acid Binding Protein (FABP)					
6.6.7	Full Blood count/ Complete Blood count					
6.6.8	D-dimer test					
6.6.9	Bilirubinometer					
6.6.10	Blood gas analyser with electrolytes					
6.6.11	Prothrombin Time (PT) and International Normalized Ratio (INR) for coagulation study					
6.6.12	Molecular POCT testing (NEAR Technology) CLIA Waived (FDA approved)					
6.6.13	COVID-19					
6.6.14	Flu A/B					
6.6.15	Streptococcal A					
6.6.16	RSV					
6.6.17	Rapid test kits for infectious disease limited to:					
a	Influenza virus- nasal swabs					
b	Rapid Strep A- nasal swabs					
c	Respiratory Syncytial Virus (RSV)- nasal swabs/ nasal wash					
d	Adeno virus- nasal swab					
e	Rota Virus- in stool					
f	Adenovirus- in stool					

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g	Malarial antigen- in blood					
h	Dengue Rapid Detection Test					
i	Giardia- in stool					
j	Cryptosporidium- in stool.					
k	COVID-19 Antigen (Nasal/Nasopharyngeal)					
l	H pylori - Stool					
m	Faecal Occult Blood – Stool					
n	Norovirus – Stool					
6.6.18	Molecular (PCR/NAT) genetic test for the following:					
a	HBC/HCV PCR (for virus detection)					
b	HIV PCR (for virus detection)					
6.7	Results from the POCT shall be used as a guide and/or confirmation based on disease management guidelines where test can be performed in an accredited DHA licensed Clinical Laboratory (if required).					
7	**STANDARD THREE: HEALTHCARE PROFESSIONAL REQUIREMENTS**					
7.1	POCT can be performed by licensed Pathologist or Laboratory Technician and also by licensed and trained non-laboratory healthcare professionals listed below:					
7.1.1	Physician					
7.1.2	Registered Nurse (RN) or Assistant Nurse (AN)					
7.1.3	Emergency Medical Technician - Advanced (Paramedic) EMT-P					
7.1.4	Cardiac Perfusionist.					
9	**STANDARD FIVE: EQUIPMENT SELECTION AND IMPLEMENTATION**					
9.3	The POCT coordinator, in conjunction with the manufacturer of the device, shall take responsibility for the initial installation, setting up and calibration of equipment and provide written standard operating procedures (SOP) for the use of instrument.					

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9.6	All POCT equipment shall have a preventive maintenance schedule and a service contract, together with a logbook documenting operational details, faults, repairs or other corrective action.					
9.7	There shall be appropriate backup arrangements for equipment.					
10	**STANDARD SIX: QUALITY CONTROL AND PATIENT SAFETY**					
b	Records of batch numbers of test kits used, opening dates and expiry dates must be kept for all reagents					
10.4.7	All results are recorded and maintained in the health records of the patients in alignment with the DHA Policy for Health Information Assets Management.					
10.4.9	All waste generated, because of POCT is handled as biohazard waste and disposed of according to DHA requirements.					
10.5.7	The identity of the physician performing the test shall be documented.					