**SURGERY – STERILIZATION OF EQUIPMENT**

**HOSPITAL NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Date created or updated: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SX34.** The practice follows a written sterilization protocol that provides for appropriate sterile equipment and supplies.

**Template**

**Purpose:** (Establish a consistent approach in achieving the highest level of asepsis with each sterilizing task)

**Personnel:** (Designated practice team member(s) responsible for completing the task(s) outlined in the protocol)