Receptacle Tests-Annual (Patient Care Areas)

Facility:

Receptacle Tests

DATE INSPECTED Inspector's Signature: Page 1 NPFA 99-2012 A. Non-Hospital grade receptacles (normal & emergency powered) at patient bed locations & where deep sedation or general anesthesia is administered must be tested at intervals not exceeding 12 months. §6.3.4.1.3 B. All other receptacles (normal & emergency powered) in patient care rooms must be tested at intervals defined by documented performance §6.3.4.1.2 data. (Facility must have performance data to prove "other than annual" testing is warranted; otherwise test annually) TEST PROCEDURES: In each area, ID each outlet starting on the LH side of the main entry door and proceed counter-clockwise back to the entry door; test each ndividual outlet for the following 4 conditions. Record each on a separate line. Use added pages as needed. a. Visually inspect the device and cover that they are intact and in good condition (enter Pass/Fail evaluation in Col "E") §6.3.3.2.1 b. Use a receptacle tester and verify continuity of the ground (enter Pass/Fail evaluation in Col "F") §6.3.3.2.2 c. Use a receptacle tester and verify polarity (enter Pass/Fail evaluation in Col "G") §6.3.3.2.3 d. Use a ground blade tension tester and verify tension is no less than 4 oz. (enter Pass/Fail evaluation in Col "H") §6.3.3.2.4 TJC EC: none IF ANY TEST FAILS, ENTER IN COL "I" A FULL DESCRIPTION OF ISSUE, METHOD & DATE OF CORRECTION & WHO CORRECTED G Α Н

				"a"	"b"		"d"	
		*TYPE	DEVICE ID	Physical	Ground	"c"		
						_	_	
		OUTLET	(start L of door &	<u>Condition</u>	Continuity	Polarity Check		If Fail, Describe Corrective Action, Who
ROOM #	ROOM NAME		test all, ccw)	Pass/Fail	Pass/Fail	Pass/Fail	Pass/Fail	& Date
1								
2								
3								
4								
5								
6								
7								
8								
9								

^{*}Type Outlet: Enter HG=Hospital Grade; S=Single; D=Duplex; Q=Quad; M=Multiple (over 4) - Every plug-in location must be individually tested