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| Name of Policy: <u>Decontamination of Surgical Instruments</u> Policy Number: 3364-139-7-03 Department: Sterile Processing Approving Officer: Associate Vice President Associate Executive Director Responsible Agent: Operations Manager, Sterile Processing Scope: The University of Toledo Medical Center Sterile Processing Department |  Effective Date: July 30, 2009 Initial Effective Date: March, 1987 |
| <input type="checkbox"/> New policy proposal <input checked="" type="checkbox"/> Major revision of existing policy | <input type="checkbox"/> Minor/technical revision of existing policy <input type="checkbox"/> Reaffirmation of existing policy |

(A) Policy Statement

All instruments and reusable patient care equipment received into the Decontamination area of Sterile Processing and the O.R. will be considered contaminated and must be processed by sterile processing in a specific manner.

(B) Purpose of Policy

To provide properly cleaned and processed instruments and equipment for use in the hospital and clinics.

(C) Procedure

1. Items will be received into decontamination according to SPD policy #3364-139-7-01 and #3364-139-7-02.
2. Proper attire in the Sterile Processing Decontamination area will be:
 - Head Cover
 - Shoe Covers
 - Plastic or latex rubber gloves
 - Goggles or face shields
 - Facemask
 - Cover Gown / Plastic Apron
 - Surgical Scrub Suit
3. Surgical Instruments
 - Surgical Instrument sets received into the Decontamination area of Sterile Processing and the O.R. are sorted in accordance with policy # 3364-139-7-06.
 - Visible soil is removed by soaking instruments in a premixed enzyme solution and/or placing the instruments in an ultrasonic washer. Some items will require manual cleaning using an instrument brush and/or washcloth. An approved cleaning detergent may be used in addition to an enzyme soak.
 - Cleaned instruments are rinsed with tap water making sure all visible soil has been removed.
 - Lumen instruments must be cleaned using a small brush then flushed using a syringe filled first with enzyme solution and then tap water.
 - All hand washed items must be washed, holding the instruments underwater and brushing away from the body to prevent aerosolization of contaminated fluids.
 - Instruments able to withstand high temperatures will be run through a washer/decontaminator cycle, See policy 3364-139-7-4, otherwise hand-washed instruments may be sent through to the Prep & Pack (Clean) room for final inspection and setup.
 - If an instrument is found to have visible contaminants during inspection, it will be sent back through to Decontamination and reprocessed.
4. Reusable Needles
 - See policy 3364-139-7-07

5. Glass Syringes

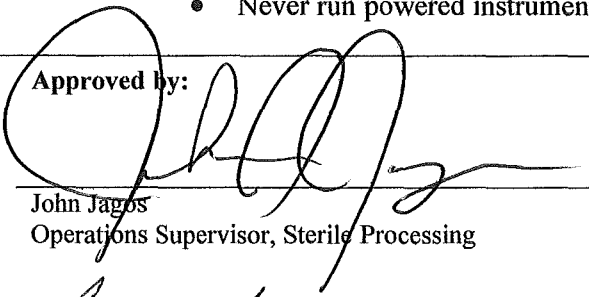

- See policy 3364-139-7-08

6. Patient Care Equipment

- See policy 3364-7-05

7. Powered Instruments

- Follow manufacturer guidelines.
- Hand wash instrument, cords and hoses with approved detergent or enzyme cleaner.
- Never immerse powered instrument in water unless manufacturer instructions specify.
- Wipe electrical cords and hoses with detergent or enzyme soaked cloth.
- Use a soft bristled brush to clean hard to reach areas.
- Rinse with tap water being careful to avoid getting water inside of instrument or hoses.
- Never run powered instruments through the washer / decontaminator.

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| Approved by: |  | <u>8/5/09</u> Date | Review/Revision Date: | 1987 1996 1988 2002 1989 2005 1990 5/2007 1991 7/2009 1992 1993 |
| John Jagos | Operations Supervisor, Sterile Processing | | | |
|  | Norma Tomlinson, RN, MSN, NE-BC Associate Vice President, Associate Executive Director | <u>8/14/09</u> Date | | |
| <i>Review/Revision Completed By:</i> Operations Supervisor, Sterile Processing | | | Next Review Date: July 1, 2012 | |
| Policies Superseded by This Policy: SP-7-03 | | | | |

It is the responsibility of the reader to verify with the responsible agent that this is the most current version of the policy.