CAMDR
Canadian Association of Medical Device Reprocessing

ConMed CANADA

INFECTION PREVENTION

Pathway to Safety in Endoscopy
October 15th, 2014

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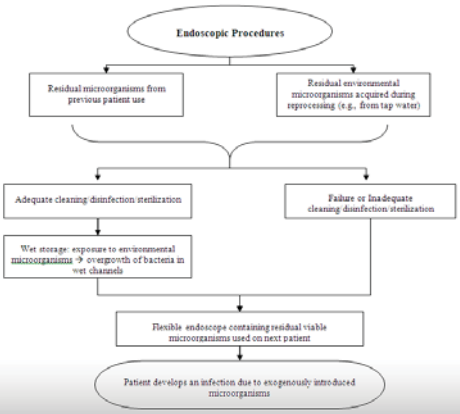
Exogenous Source of Microorganisms



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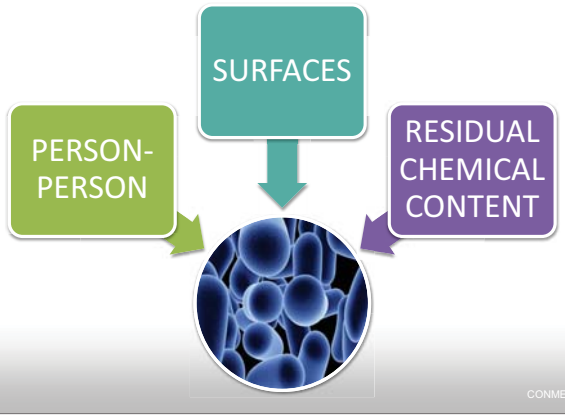
Cross Contamination: Definition



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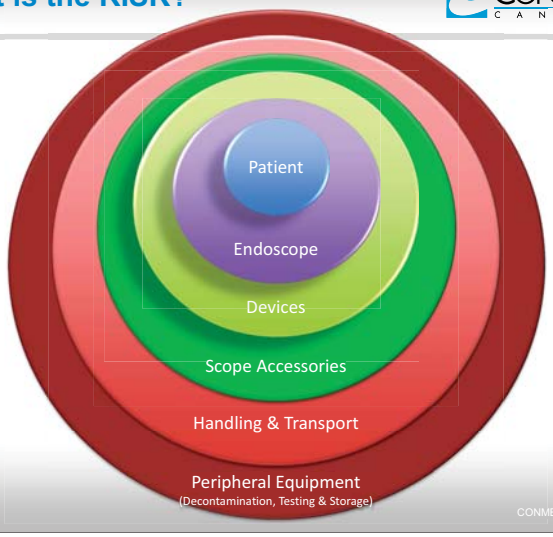
TOP 10 Technology hazards for 2014

THE LIST FOR 2014

1. Alarm hazards
2. Infusion pump medication errors
3. CT radiation exposures in pediatric patients
4. Data integrity failures in EHRs and other health IT systems
5. Occupational radiation hazards in hybrid ORs
6. Inadequate reprocessing of endoscopes and surgical instruments
7. Neglecting change management for networked devices and systems
8. Risks to pediatric patients from "adult" technologies
9. Robotic surgery complications due to insufficient training
10. Retained devices and unretrieved fragments

From #8 in 2013
to #6 in 2014

What is the RISK?



INFECTION PREVENTION

Key Preventive Measures

Major causes:

- lapses in currently accepted endoscope reprocessing protocols
- Defective equipment

Each step is important:

- Brush all channels & accessories even if not used
- Completely immerse in HLD
- Soak for required time
- Check concentration or MEC every time
- Follow manufactures instructions
- Change water filters regularly
- Leak Test

Safe Reprocessing

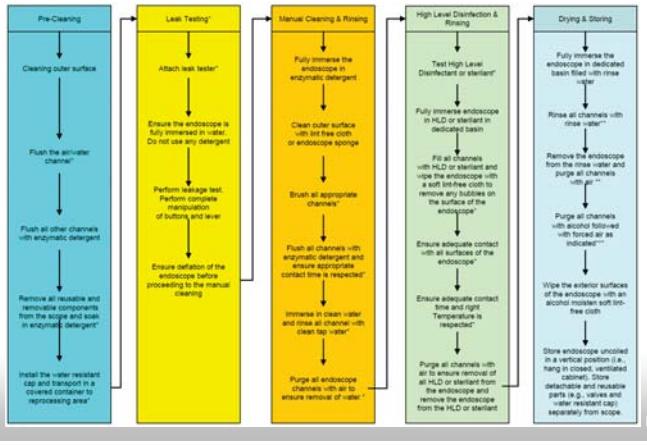
GOALS of safe reprocessing include:

- Infection control & prevention
- Minimizing damage to medical equipment/devices from foreign material *(e.g. blood, body fluids, saline and medications)* or inappropriate handling
- Minimizing time from the point of use to the medical device cleaning and decontamination

Valves & Water Bottles

- Be aware of the issues involved in accessory device selection.
- Outbreaks involving removable parts such as suction valves have been reported.
  - Removal from the endoscope
  - Manual cleaning
  - High level disinfection / sterilization
- Water bottle + connecting tube should receive **high-level disinfection or sterilization at least daily**
- **Sterile water** should be used to fill the water bottle
- **Each** ERCP procedure requires a fresh sterile bottle with sterile water

Reprocessing Overview

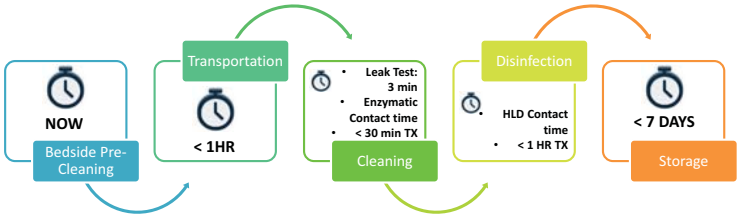


FLEXIBLE ENDOSCOPES & ACCESSORIES
Reprocessing Steps

Public Health Agency of Canada | Agence de santé publique du Canada

Nosocomial and Occupational Infections, Infection Prevention and Control Guideline for Flexible Gastrointestinal Endoscopy and Flexible Bronchoscopy, PART IV. ISSUES RELATED TO REPROCESSING FLEXIBLE ENDOSCOPES, http://www.phac-aspc.gc.ca/nois-sinp/guide/endo/part4-eng.php

It's all about TIME as per CSA Z314.8-14



CSA Group

CSA Z314.8-14

Pre-cleaning	• **ALL** channels should be flushed (used or unused) • Should be flushed with enzymatic detergent (Some OEM specify water but validate conditions*)
Transportation	• Scopes should be transported in a closed protective container • Scopes should be maintained moist
Cleaning	• Leak test (minimum 3 minutes) • Wait 30 seconds prior to immersing (confirm pressurization) • Automated Cleaning & leak testers should be used
Disinfection	• Use timer to validate HLD contact time & Submicron-filtered water
Drying and Storage	• Alcohol flush and air purge are a must (Air purge again even if AER does it) • Cabinets with HEPA-filtered air and channel purge
Accessories	• Need a minimum of daily reprocessing (per procedure for ERCP), Follow OEM instructions • Always keep separate from the endoscope in storage

2014 Reprocessing and Sterilization of Reusable Medical Devices

Section 1 Building a high performance reprocessing service
- Focus on educating and training all teams members
- Focus on reprocessing processes (as per Manufacturer)

Section 2 Complying with good reprocessing and sterilization practices
- Focus on reprocessing equipment and processes (as per the manufacturer)
- Focus on staff safety
- Focus on documenting practices

Section 3 Selecting, installing and maintaining reprocessing equipment
- Focus on maintaining and using equipment as per Manufacturer

Section 4 Monitoring quality and achieving positive outcomes
- No internal reprocessing of SUDs
- Focus on Manufacturer's instructions for reprocessing

Canadian Standards in GI

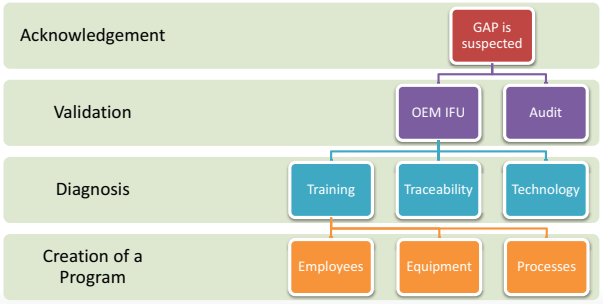
CSA

ACCREDITATION CANADA
AGRÉMENT CANADA

csgna Canadian Society of Gastroenterology Nurses & Associates

ENDOSCOPE MANAGEMENT PROGRAM

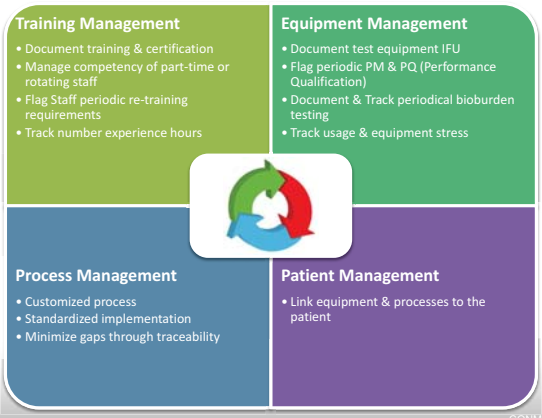
Now what?



Summary

1. Complex Medical Devices
   - Dirty devices potential biofilm formation ≥ 1 Hr.
   - Clean devices potential bacterial growth if WET + 24 Hrs.
2. Cross-contamination can occur
   - High volume of procedures / Lack of equipment
   - Complicated instructions
   - Inconsistent processes
3. There is a SOLUTION…Understand the tools available!
   - Acknowledgement
   - Validation
   - Diagnosis
   - Create a Program

SUSTAINABILITY



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