

SUBJECT: CREUTZFELDT-JAKOB DISEASE PRECAUTIONS	REFERENCE #3023
	PAGE: 1 OF: 4
DEPARTMENT: CENTRAL SERVICE	EFFECTIVE:
APPROVED BY:	REVISED:

PURPOSE:

- To provide guidelines to control the transmission of Creutzfeldt-Jakob Disease (CJD) in the operating room.
- These guidelines will be followed for any patient known or suspected to have CJD. This includes the patient's family.
- To protect staff and patients from possible CJD transmission.

DEFINITION:

Creutzfeldt-Jakob Disease is a degenerative brain disorder which typically occurs in older people, 50-70 years of age. This disease is always fatal. CJD is caused by transmissible spongiform encephalopathy, and is termed a prion (consisting of protein) disease. As CJD prions are resilient to regular disinfection agents and techniques including steam sterilization, dry heat, ethylene oxide gas and chemical disinfection with either formaldehyde or glutaraldehyde, routine sterilization processes have not proven effective against the organism.

POLICY:

This policy is intended for personnel including, but not limited to, Surgical Services and Central Service staff who may come in contact with patients known or suspected to have CJD and/or come in contact with tissue and instruments used on patients known or suspected of having CJD.

PROCEDURE:

- Schedule case as last case of the day in a specific OR.
- Move all unnecessary equipment, supplies and furniture out of the operating room. Keep all storage areas closed.
- Post "Contact Isolation" signs on all OR doors.
- Access to the operating room will be limited to assigned staff only.
- The Surgical Services Nurse Manager will notify Pathology, Infection Control, Central Services and Environmental Services of the case.

SUBJECT: ETHYLENE OXIDE MONITORING - EMPLOYEE TRAINING AND EMERGENCY RESPONSE	REFERENCE #4011
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DEPARTMENT: CENTRAL SERVICE	EFFECTIVE:
APPROVED BY:	REVISED:

MONITORING:

- All ethylene oxide sterilizers and equipment shall be surveyed every six (6) months by an engineering service to meet OSHA and AQMD standards. This technical consultation report will be submitted to the Engineering Department for recommended repairs.
- All personnel who have contact with the ethylene oxide sterilizers shall be monitored on an individual basis monthly for exposure profiles. Exposure profiles shall be placed in ETO manual for three (3) years. At the end of three (3) years, this information shall be sent to storage for a period of 30 years.

EMPLOYEE TRAINING:

- The Ethylene Oxide Program has been developed to ensure the health and safety of personnel who are potentially exposed to ethylene oxide. This program covers all aspects of dealing with ethylene oxide including proper usage, handling techniques and precautions, medical surveillance and communication signs and labels.
 - Information and Training:
 - Upon an offer of employment, and before beginning his/her first day of work, each employee who will be exposed to ethylene oxide will be informed of the fact that the department in which he/she will work uses ethylene oxide for sterilization and each employee may be potentially exposed in the event of an equipment failure.
 - Symptoms of Exposure:
 - ◆ High concentration: coughing, severe skin burns, rashes, sores, headache, nausea, difficulty breathing, vomiting, destruction of red blood cells, pulmonary edema and death
 - ◆ Low concentration: delayed onset of symptoms
 - ◆ Acute exposure: diarrhea, vomiting, respiratory irritation and eye irritation
 - ◆ Chronic exposure: spontaneous abortions, reproductive problems, peripheral neuropathy, altered behavior, anemia, secondary respiratory infections, abnormal nerve conduction, velocity, cataracts and may cause sensitization (i.e., eye or upper respiratory irritation)

POSITION DESCRIPTION / PERFORMANCE EVALUATION

Job Title: Certified Central Service Technician

Supervised by: Central Service Manager,
Central Service Chief Technician

Prepared by: _____

Approved by: _____

Date: _____

Date: _____

Job Summary: Disassembles, cleans, assembles, sterilizes, and stores procedure trays, instruments, equipment and supplies according to prescribed procedures and aseptic technique under direct supervision. Completes requests to dispense equipment and supplies and assists in maintaining and processing patient charge records and maintaining department inventory. Participates in the department's performance improvement activities.

DUTIES AND RESPONSIBILITIES:

E = Exceeds the Standard

M = Meets the Standard

NI = Needs Improvement

Demonstrates Competency in the Following Areas:

	<u>E</u>	<u>M</u>	<u>NI</u>
Sterilizes instruments, equipment, utensils, linen and supplies using various types of autoclaves and aerators. Loads autoclaves in the prescribed manner and set controls to specified time and temperature according to material and requirements of items being sterilized. Completes appropriate documentation records prior to sterilization. Reads and initials autoclave graph to verify appropriate sterilization cycle and provides required records for inspection.	2	1	0
Assembles all instrument procedure trays, linen packs and kits according to the prescribed manner using content lists as a guide. Wraps packages and handles all items following procedure. Marks items with identifying data and distributes or stores in designated area. Notifies supervisor when unable to replace parts or when equipment is deficient in the work area.	2	1	0
Dispenses products requested for sterile and nonsterile equipment and supplies. Assigns priority to emergency requests and issues required supplies and equipment based on knowledge of procedure intended. Assembles and wraps materials, instruments and supplies according to established aseptic technique.	2	1	0
Disassembles and cleans equipment such as suction machines, IV pumps, heating blankets, blood warmers, wheelchairs and walkers using approved disinfectants, detergents, soaps and cleaners. Reassembles equipment after cleaning and operates to test for proper functioning. Replaces lost or damaged parts such as tubes, containers and connectors from stock on hand. Completes required forms and transfers inoperable equipment to the appropriate holding area for repair.	2	1	0
Maintains assigned work areas and equipment in a clean and organized condition to maintain required standards for handling sterilized and clean materials and to maintain a safe work environment.	2	1	0
Assists in orientation of new employees to each work assignment area and overall department operation.	2	1	0
Performs other related duties as required such as examining sterilization/expiration dates; reporting inoperable equipment; making visual inventory inspections to maintain adequate stock and supply levels; tests effectiveness of autoclave function by assembling and placing culture spore tests following procedure; stores new and reprocessed equipment and supplies; cleans shelves and work areas and mops liquid spills from floors as necessary.	2	1	0

SUBJECT: HIGH-LEVEL DISINFECTION OF ENDOSCOPES	REFERENCE #6022
DEPARTMENT: CENTRAL SERVICE	PAGE: 1 OF: 2
APPROVED BY:	EFFECTIVE:
	REVISED:

PURPOSE:

To prevent cross contamination of patients when using the endoscope for multiple procedures.

POLICY:

- Endoscopes, which pass through normally sterile tissue, should be sterilized before each procedure. If this is not possible, at least high-level disinfection must be done. Following disinfection, the endoscope shall be rinsed with sterile water.
- Endoscopes which come in contact with mucous membranes, are considered semicritical and should receive high-level disinfection at a minimum.
- All endoscopes will be terminally disinfected at the end of each day's use and again before the first and each subsequent use throughout the next day.

PROCEDURE:

- All endoscopes shall receive mechanical cleaning prior to disinfection. Flexible endoscopes shall be cleaned with a manufacturer-approved enzymatic cleaner immediately following use.
 - The channels will be irrigated and brushed, if accessible.
 - Rinse all immersible parts of the endoscope with water.
 - Discard all detergent solutions after each use. Use disposable brushes for cleaning the channels or clean and sterilize the brushes after each use.
 - Conduct leak testing on flexible endoscopes prior to immersion. Remove endoscope from service, if it leaks, before it is cleaned and contact the manufacturer. See policy and procedure.
 - An EPA-registered sterilant/disinfectant shall be used on all endoscopes, per manufacturer's instructions.
 - Immersible surfaces, both internal and external, shall be in contact with the sterilant/disinfectant for a minimum of 20 minutes.

STEAM AND ETHYLENE OXIDE STERILIZATION FAILURE CHECKLIST

Checklists of potential causes of both steam and ethylene oxide sterilization failure are given below:

STEAM:
<input type="checkbox"/> Incomplete air removal caused by:
<input type="checkbox"/> Plugged drain screen
<input type="checkbox"/> Faulty vacuum pump
<input type="checkbox"/> Air trapped by the load configuration (i.e., beakers, basins)
<input type="checkbox"/> Packaging material which is impermeable to steam
<input type="checkbox"/> Inadequate door gasket seal
<input type="checkbox"/> Packs too large or too tightly wrapped
<input type="checkbox"/> Poor quality of steam:
<input type="checkbox"/> Wet steam, caused by inadequate trap in steam line (likely to be found in first load of the day)
<input type="checkbox"/> Super heated steam, caused by improper chamber heat-up or desiccated packaging materials
<input type="checkbox"/> Insufficient steam pressure
<input type="checkbox"/> Inadequate cycle temperature, caused by:
<input type="checkbox"/> Gauge error
<input type="checkbox"/> Long heat-up time of large loads
<input type="checkbox"/> Packaging material which inhibits flow of steam
<input type="checkbox"/> Insufficient time at temperature:
<input type="checkbox"/> Timer system off
<input type="checkbox"/> Exposure time too short
<input type="checkbox"/> Sterilizer loaded too tightly