Reprocessing of Flexible Endoscopic Instruments

Contents

Purpose

- To ensure appropriate and adequate reprocessing of flexible endoscopes, probes and accessories is undertaken throughout the CDHB

Policy

Endoscopic instruments that require high-level disinfection or sterilisation are adequately and safely reprocessed in line with current best practice standards and guidelines.

Scope

Reprocessing staff in all CDHB areas that are using flexible endoscopes and probes.

In addition to this document, each area must hold their own detailed departmental cleaning and reprocessing procedures for all types of instruments used in their department.

Excludes rigid sigmoidoscopy cleaning – refer

Definitions

Endoscopic instruments include:

- Gastroscope
- Colonoscope
- Bronchoscope
- Flexible cystoscope
- Duodenoscope (ERCP)
- Trans oesophageal echocardiography (TOE) probe
- Ultrasonic vaginal probe
- Rectal probe
- ENT scopes (nasoendoscope)
- Oesophageal manometry catheter.

Roles and responsibilities

Delete if not needed. List the role titles and responsibilities, if relevant to this policy.

Associated documents

This policy is based on the current Australasian GESA/GENCA guidelines, which is the principal reference document for CDHB endoscopy procedures.

Reprocessing Rigid Sigmoidoscopy Equipment

Departmental Location procedures and policies for specific instruments and procedures

CDHB IPC Policy, Standard Precautions

1 Personnel

Personnel performing reprocessing of endoscopic instruments shall demonstrate competency in the care and reprocessing of instruments and related equipment. Where possible, training in the correct handling and / or use of equipment and products shall be provided by equipment/product representatives.

Competency shall be reassessed annually

Personnel shall also demonstrate competency in infection prevention and control and safe use of chemicals.

Appropriate personal protective equipment must be worn.

2 Reprocessing facilities

Work areas for reprocessing endoscopic instruments shall be planned and organised carefully to ensure staff safety and to protect reprocessed instruments from re- contamination or damage. Work flow should be from dirty to clean with segregation of areas where possible. Where required the work area should incorporate the following core facility components:

- A designated 'dirty' sink for cleaning instruments
- A 'dirty' bench adjacent to this sink for holding dismantled components awaiting cleaning and cleaned equipment awaiting high-level disinfection.
- An area for high-level disinfection of instruments. The size of this area will depend on the method of disinfection. Automated reprocessors will require plumbing.
- For areas that require manual rinsing a sink designated for rinsing clean instruments is required
- A 'clean' area for reassembly of the disinfected instrument prior to storage and reuse.

Ventilation of the reprocessing area is important to prevent inhalation of chemical fumes. Ventilation requirements will depend on the chemical products in use. Occupational Health & Safety will advise.

3 High level disinfection / sterilisation

3.1 General Principles

Endoscopic instruments are considered semi-critical devices according to Spaulding's classification as described below:

'Items that come into contact with mucous membrane or non-intact skin should be single use or sterilised after each use. Where this is not possible, high level disinfection is the minimum level of reprocessing acceptable.'

The IP&C Service must be consulted when considering the choice of sterilisation or high level disinfection methods

Personnel shall routinely inspect instruments and all related equipment and supplies for integrity, function, and cleanliness. Damaged or soiled instruments or accessories shall not be used.

3.2 Cleaning

Cleaning is the most important step in reprocessing of instruments and is an essential pre-requisite to disinfection or sterilisation

All instruments shall be pre-cleaned according to the manufacturer's guidelines immediately following the procedure. If immediate cleaning is not possible, the instrument must be wiped to remove excess soiling and then soaked until reprocessing is undertaken.

In some cases leak testing must be undertaken prior to soaking.

Follow the manufacturer's instruction for the preparation and use of an enzymatic detergent if used.

Detergent must be rinsed off the instrument prior to further reprocessing

3.3 Sterilisation

Reprocessing for each instrument shall be performed according to the manufacturer's instructions specific to that instrument - either sterilisation or high-level disinfection.

When a steriliser is used, manufacturer's instructions for use shall be followed. All sterilisation processes are undertaken in a dedicated sterilisation department or area.

3.4 High level disinfection

All disinfectant solutions used for endoscopic instruments and compatible accessories must be approved by the IP&C Service as a suitable high-level disinfectant. Manufacturer instructions shall be followed in the preparation, testing and use of the disinfectant solution. Manufacturer guidelines for exposure time and temperature shall be followed. Each instrument and it components shall be completely immersed in the disinfectant solution and all channels must be disinfected during reprocessing.

Following high-level disinfection, all instruments and accessories shall be rinsed and dried in accordance with manufacturer instructions.

When an automated processor is used, manufacturer's directions for processing shall be followed.

Disinfected and dried instruments shall be properly stored in a vertical position away from the reprocessing area in a location that will provide protection from contamination.

Reusable endoscopic accessories that disrupt or enter the mucosal barrier will be mechanically cleaned and sterilized after each patient use.

If automated processors and/or sterilizers are used, maintenance and repair shall be performed according to manufacturer instructions and shall be documented.

Measurement or evaluation

Compliance with reprocessing procedures is undertaken annually by the IP&C Service for all departments undertaking reprocessing of endoscopic instruments

References

GENCA, & GESA (2010). *Infection Control in Endoscopy* (3rd ed.) Victoria, Australia: Gastroenterological Society of Australia.

NZS 8134.3:2008 Health & Disability Services (Infection Prevention and Control) Standards.

AS/NZS 4187:2014, Reprocessing of reusable medical devices in health service organisations.

Policy Owner	Infection Prevention & Control Service
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