FAQ From APIC GL November Webinar: *What an Infection Preventionist in Sterile Processing wants IPs to know about Sterile Processing.*

- How are intraop services maintaining instrument moisture throughout the procedure?
    - This is a great question! I would love to provide a simple answer to this but this is where I strongly recommend observing in your procedural areas to find out how they're doing it (or, are they doing it?). Often you may only see normal saline or medicated irrigation solutions on the sterile field. How are the instruments being cleaned of gross soils (including materials like bone cement, bone, matrixed materials like Gelfoam, etc.) by the scrub tech/nurse? Also, remember that if you look through a lot of instrument IFUs, often there will be instructions for how those instruments are to be maintained during the procedure. Especially with specialty instrumentation, there will often be instructions for how the scrubbed person should treat the instruments intraoperatively to keep them free of soils before they dry and become difficult to remove or contribute to biofilm formation.
- For prep and pack, are popcorn bags to hold certain instruments allowed inside trays?
    - I love that term, popcorn bags! This is where you have to look to the IFUs of that popcorn bag and whatever containment it's going into to see if they're validated for that purpose. In my experience there are some that are designed and validated for that purpose; what to remember is that the more times it may be folded closed (to keep the instruments contained) it will add layers that become a challenge for the sterilant to penetrate. Whatever your packaging materials, always be sure they're validated for the instruments you're packaging (especially with the proliferation of 3D-printed guides and implants—not all are validated for containers!) and they're validated for the purpose they're being used for.
- Related to the content on slide 37 - Is there a scale for these racks in SPD?
    - I'm not sure I'm looking at the correct slide to answer your question; feel free to reach out to me directly, Rebecca.Alvino@ucsf.edu
- Do you have a rounding tool you can share?
    - The rounding tool I created with my colleague back in 2019 is in need of a refresh (especially with the latest TJC standards updates). Let me see what I can find and recommend for you in the meantime!
- Can you talk about reprocessing or not reprocessing instruments stamped w/ "Pakistan?"
    - I sure can! Lots of different countries manufacture instruments of all different grades (surgical, floor-grade, single use) which relates to the quality of the metals used in producing the instruments. Often instruments that are single use may be manufactured and stamped "Pakistan". Unless you are a facility licensed and

recognized as a device manufacturer for reprocessing single-use devices, do NOT reprocess these.

- Is there a best practice to identify "single use" instruments when accidentally returned to SPD?
    - Yes! As mentioned in the previous bullet point, one of the clearest ways is to see if it is stamped as “Pakistani”. For those that aren’t clearly noted as “Pakistani” but may look disposable, prior to reprocessing look for an IFU to see if there is something to state it can be reprocessed. If not—or if there isn’t an IFU—then don’t reprocess it.
- What is usually the shelf time of sterile instruments and how long do we have to keep BI's for records?
    - Great question! I don’t want to give the answer I don’t like to give, but I must: It depends. The factors it depends on include:
        - Your facility policy. Time-related vs event-related sterility should be called out in a facility policy.
        - The IFUs for your packaging materials. Be aware there are some container systems that are not validated for shelf-life greater than one year; conversely there are also container systems validated for 360 days in their IFU but this is how long that manufacturer validated the system for the purposes of FDA submission. Be sure to carefully review all packaging IFUs to see if there are expiration dates (time-related sterility) or statements that explicitly state the support for event-related sterility under proper conditions.
        - The storage conditions for sterile items will absolutely impact the shelf life; improper conditions are considered “events” under event-related sterility.
        - For biological indicators the results are required to be held as part of your sterilization records. State/local regulatory requirements dictate the duration of time sterilization records need to be held for. For more information, refer to AAMI ST79 13.3.3 “Sterilizer records” and 13.3.4 “Record retention” for what records need to be held and the length of time basis. Be sure this is defined in your facility policy.
- We are trying to bring boroscope use in our SPD. Where would you recommend they start using it first?
    - Excellent! As you heard me say, borescopes are great tools for inspection so long as the users know what they’re looking at. I would ask your SPD teams what training they’ve had in identifying defects and what the actions will be when defects are identified. It’s a useful tool but it isn’t a “plug-and-play” technology. Once you’re comfortable with the borescope implementation and education of the users with what they’re looking at and actions that may be generated as a result of the defects identified, I suggest starting exclusively with flexible endoscopes.

- Does anyone wish to share how to access ANSI standards more affordably?
    - I hear this a lot! I wish I had a good answer for this but I don't. One way to get individual standards complimentary is to participate in the AAMI workgroups that develop the standards. There definitely needs to be IPs on these groups to provide a strong representation and subject matter expertise; it's also a great networking opportunity! Once the TIR or standard is published workgroup members receive a complimentary copy for their own use.