GUIDELINE *ESSENTIALS*
KEY TAKEAWAYS

Instrument Cleaning

TAKEAWAY	EXPLANATION
Convene an interdisciplinary team to evaluate and select reusable medical devices (eg, surgical instruments) and equipment and supplies that will be used for processing.	• NEW The interdisciplinary team should include - sterile processing personnel, - surgeons, - perioperative RNs, - surgical technologists, - infection preventionists, - anesthesia professionals, - biomedical engineering personnel, - facility engineering personnel, and - other stakeholders determined by the health care organization (eg, an industrial hygienist when available, materials management personnel, others outside the perioperative setting). **1.2.1.**
Use a decontamination area that has adequate space and the equipment, utilities, and supplies to support instrument processing as described in the instrument manufacturers' instructions for use (IFU).	• A work environment that supports best practices has - manufacturers' IFU that are readily available and in a format that users can read and understand; **5.2.** - eyewash stations and a designated hand hygiene station(s); **2.4.** - NEW multiple sinks that are o designated for soaking and cleaning, intermediate rinse, and final rinse; o large enough to accommodate instrument trays; o at an ergonomically correct height; and o marked at the water level needed for cleaning solution measurement; - storage space for PPE and cleaning supplies; - automated equipment (eg, washer-disinfector, ultrasonic cleaner) consistent with the types of instruments to be cleaned and decontaminated; - adaptors and accessories to connect instruments with cleaning equipment and utilities; - NEW utilities that support decontamination, drying, inspection, and documentation, including o access to critical water for rinsing instruments; o a pressure-regulated, instrument air supply; o electrical capacity to power all equipment at the same time; o data lines to support electronic equipment for documentation of processing steps; and o accessories and supplies specified in the manufacturers' IFU for instruments to be processed. **2.5., 2.6.**

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NEW **Establish a process and frequency for monitoring the quality of water (eg, utility water, critical water) used in decontamination processes as part of the organization's water management program.**	• Water systems are susceptible to bacterial contamination. Routine quality evaluation can detect water-quality issues that can impede decontamination and sterilization processes. Water that does not meet the requirements specified in the detergent or the cleaning equipment manufacturers' IFU can adversely affect the efficacy of cleaning chemistries and can contain waterborne bacteria, including *Legionella* and *Pseudomonas* species. **3.1.** • Poor water quality can reduce the effectiveness of some disinfectants and cleaning chemicals by interacting with them to form insoluble precipitates, create deposit buildup blockages in valves and filters, leave a white-grey residue on instruments after drying, and cause irreparable damage to instruments. **3.2.** • Chloride is damaging to stainless steel and can cause pitting corrosion. **3.2.**
NEW **Establish a process and frequency for cleaning sink basins and drains in the decontamination area.**	• Sinks and basins can be reservoirs for pathogens. **9.7**. • Decontaminating sinks used for manual cleaning between uses is a mechanism for reducing risk of pathogen transmission. **9.7.**
Establish standard operating procedures for managing loaned instruments and other medical devices.	• The standard operating procedures for loaned instruments and devices should include - a process for requesting, approval, and communication about loaned items; - preprocedure requirements for the lender of the items, including instrument or reusable medical device delivery (eg, timing, location, documentation, communication) and delivery of manufacturers' IFU; - NEW shared responsibilities of the lender and the health care organization, including o education for personnel before processing and use; o a method for obtaining processing accessories required by the manufacturer's IFU; o inventory requirements and a process for taking inventory; o processes for handling, decontaminating, inspecting, packaging, and sterilizing the items before use; o instrument set weight limits; o processes for point-of-use treatment; o processes for postprocedure decontamination; o procedures for returning the item(s) to the lender; o documentation of processes and transactions related to loaned instruments; and o postprocedure responsibilities of the lender, including time requirements for vendor retrieval. **5.6.**

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Perform instrument and other medical device processing according to the manufacturers' IFU.	• Instructions for use provide users with validated techniques for processing instruments, and these validated techniques are required for reliable decontamination. **1.1.** • When selecting compatible products, review the validated manufacturer's IFU for the - surgical instrument or other medical device to be cleaned and decontaminated, - cleaning chemical (ie, detergent, enzymatic, disinfectant), and - cleaning equipment. **4.2.**

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