

Loathing long sleeves; sorting soiled linens; the purpose of enzyme spray; handling heavy sets

By Ray Taurasi - December 15, 2016

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Q I am a certified SPD technician and have been working in the same hospital for several years. A couple months ago we had a dress-code policy change and are now required to wear long-sleeve warm-up jackets in the instrument assembly area. Our manager claims the change was mandated by infection control to provide a cleaner environment. I personally hate wearing the jackets and find them to be too warm and uncomfortable. I also fail to see how they provide a "cleaner" work environment as several of my coworkers wear the same jackets for several days without laundering them.

A Sterile processing personnel preparing and packaging surgical instrument sets should wear scrub attire that covers the arms fully and is fitted at the cuffs. Wearing long-sleeved attire, such as warm-up jackets, prevents the shedding of scaled skin (squames) and hairs on bare arms from depositing into instrument sets or packages. Organic matter, such as skin or hair, could attach to instruments and be transferred to the surgical incision site, exposing the patient to a greater risk of getting a surgical site infection or other serious postoperative complications. Just as is the case with scrub attire, a clean warm-up jacket should be worn each day and be changed whenever it becomes soiled during the day. Hospital attire, such as scrub wear and warm-up jackets, should never be laundered at home, only by the healthcare facility's laundry services. Both AAMI and AORN standards and guidelines address these issues.

Q I am the Director of Surgical Services at a small critical access hospital. We receive and process instruments and drapes from several local physician offices located outside of the hospital. Each facility must pre-clean their instruments and return them to the hospital in a container labeled with a biohazard symbol. My question is related to the cloth drapes that the offices use. Is it acceptable to have these drapes transported back to the hospital central processing department for cleaning and reprocessing? Should the soiled linens be handled in a special way?

A Soiled linens are considered a biohazard and should be handled in the same manner as other biohazardous items. They must be placed in a secure leak-proof containment device or package and clearly labeled or identified as a biohazard. The laundering of hospital linens requires following special laundering processes and standards. I assume that your central processing department doesn't actually clean and reprocess dirty linen and that you are just receiving and sending it to the laundry facility. If you are utilizing a commercial laundry service I would suggest that you consider having them pick up the soiled linens from your offsite locations and thus eliminate the unnecessary repeated handling of soiled materials. There are also strict DOT regulations for transporting biohazardous materials across public roadways. Municipal, county or state DOT regulations may differ so be certain to check which rules apply to your facility.

Q I am responsible for the cleaning and sterilization room at a large, privately owned medical outpatient facility. We have several specialty clinics and doctors' offices that we service. All instruments are sprayed with enzyme at the point of use and wrapped or covered with the linen drape. Although the instruments are pre-cleaned with the enzyme spray some of drapes may be soiled with blood on the inside. Would the instruments still have to be transported down to C&S in a rigid container?

A The instruments would still be considered contaminated. The enzyme spray is not really pre-cleaning the instruments. The enzymes, while wet, are helping to prevent drying and they are breaking down organic matter which helps facilitate removal of the soil during the cleaning process. I would suggest that you separate your soiled linen and instruments. According to OSHA regulations, contaminated instruments and sharps must be placed in a rigid, puncture/leak-proof container and labeled biohazardous.

Q I am an OR nurse and recently agreed to cover Sterile Processing temporarily. I was shocked to find that several sets exceed the 25-pound sterilization limit and am concerned that unsterile instruments may have been used on patients. I went through all of the QC records and have found no indication of failed BIs, sterilizer records or wet loads. All of our sets are in sterilization containers. What measures should we take should patients be notified?

A The 25-pound limit is more of an ergonomics parameter than a sterilization parameter. It's important that you follow the instruments' sterilization IFUs. Aside from the ergonomic concerns, excessively heavy instrument sets, especially those in wraps, may be more difficult to handle and more prone to tears and compromises in sterile packaging. It is a good idea to try to stay within the 25-pound limit for worker safety and to reduce the potential for associated industrial injuries. However, there are medical devices requiring sterilization that exceed the 25-pound limit. In such cases you will want to consider how to safely handle, store and transport those items while minimizing risks to staff safety.

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