Challenges of reprocessing new medical products

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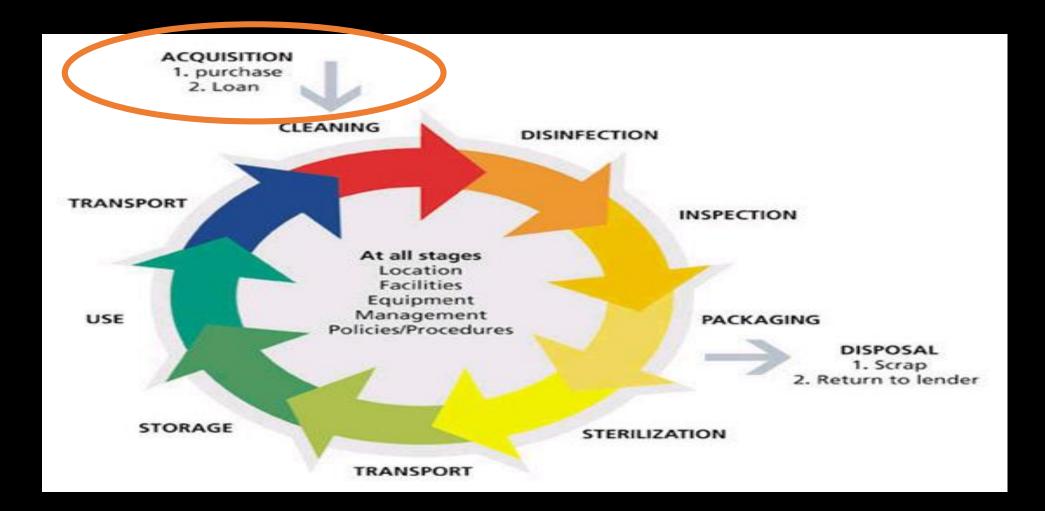
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Objectives :

- To identify challenges when processing new instruments.
- Mention contributing factors .
- Provide examples for complex devices .
- Suggested solutions .

Instrument Life Cycle

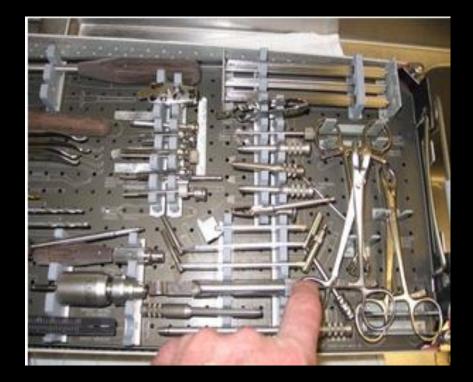


What is the new Instrument for you ?

- It could be loan.
- It could be made of new material .
- Purchased instrument with Difficult design .
- Require new Reprocessing requirements.
- New staff not familiar with existing instruments.

Loan Instruments

- 16% of the loaner instruments tested positive for blood.
- (AORN Journal;3/2007,Volume 85,#3; page 566)
- Particles of tissue were found in cannulated instruments
- (Pennsylvania Patient Safety Authority 2006;page 1)

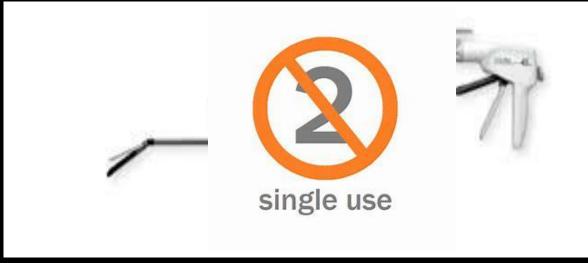


Instrument design

• Medical devices have become more complex the issues of how to perform acceptable cleaning, disinfection and sterilization have become greater.







Stakeholders include:

There are many stakeholders involved in cleaning, disinfection and sterilization of medical devices.

- Regulatory agencies, FDA, CDC, state departments or ministry of health;
- Manufacturers of medical devices.
- Reprocessors of medical devices.
- Standards setting organizations.
- Test labs.

Problems with cleaning medical devices include:

- The IFU is difficult to understand.
- The IFU is incomplete.
- The IFU is difficult (if not impossible) to follow.
- The person performing the cleaning process was not adequately trained.
- The person performing the cleaning process did not follow the process.

Examples

 Recently in 2014 and 2015 there have been several documented cases where duodenoscopes have been implicated in causing a HAI known as carbapenemresistant Enterobacteriaceae (CRE) (Cdc.gov, 2015)



GI Endoscopes debates : Shift from Disinfection to Sterilization

EDITORIAL

Editorials represent the opinions of the authors and JAMA and not those of the American Medical Association.

Gastrointestinal Endoscopes A Need to Shift From Disinfection to Sterilization?

William A. Rutala, PhD, MPH; David J. Weber, MD, MPH

More than 10 million gastrointestinal endoscopic procedures are performed annually in the United States for diagnostic purposes, therapeutic interventions, or both.¹ Because gastrointestinal endoscopes contact mucosal surfaces, use of a contaminated endoscope may lead to patient-to-patient transmission of potential pathogens with a subsequent risk of infection.¹

In this issue of JAMA, Epstein and colleagues² report findings from their investigation of a cluster of New Delhi metalloβ-lactamase (NDM)-producing *Escherichia coli* associated with gastrointestinal endoscopy that occurred from March 2013 to

Related article page 1447

July 2013 in a single hospital in northeastern Illinois. During the 5-month period, 9 paFirst, endoscopes are semicritical devices, which contact mucous membranes or nonintact skin, and require at least highlevel disinfection.^{3,4} High-level disinfection achieves complete elimination of all microorganisms, except for small numbers of bacterial spores. Because flexible gastrointestinal endoscopic instruments are heat labile, only high-level disinfection with chemical agents or low-temperature sterilization technologies are possible.³ However, no low-temperature sterilization technology is US Food and Drug Administration (FDA)-cleared for gastrointestinal endoscopes such as duodenoscopes.

Second, more health care-associated outbreaks and clusters of infection have been linked to contaminated endoscopes than to any other medical device.^{3,5} However, until now,

Rutala, Weber. JAMA 2014. 312:1405-1406; Rutala, Weber. Am J Infect Control. 2016;44:e1-e6; Rutala, Weber ICHE. 2015;36:643.

Cleaning Accessories.

Damage due to improper reprocessing is not covered by the warranty.

Note: A lid (68.001.602) is available for the washing basket. This can be used for sterilization, but is not required for machine washing.

Warning: Do not wash the system in the Synthes Vario Cases (68.001.255, 68.001.253).

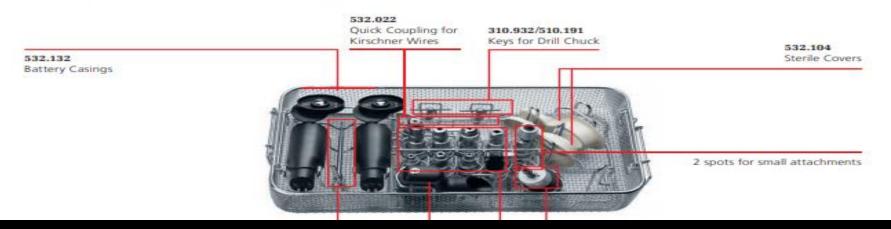
Dimensions of the Washing Basket (Length × Width × Height): Washing Basket without Lid: 50

 $\begin{array}{c} 500 \times 250 \times 112 \text{ mm} \\ 504 \times 250 \times 150 \text{ mm} \end{array}$

68.001.610

Washing Basket with Lid:

Washing Basket, size 1/1, for Colibri (II) and Small Battery Drive (II)



(Synthes.vo.llnwd.net, 2018.)

Robotic instruments

- Robotic instruments, with their complex structures, have a greater protein residue and lower cleaning efficacy as compared to conventional tools,
- the study found. The cleanings were 97.6 percent effective for robotic instruments and 99.1 percent effective for ordinary instruments.

(Beckershospitalreview.com, 2016)





Da Vinci washer basket

- Washer-Disinfectors:
- Type Testing according to ISO 15883-1
- Belimed WD 290
- Getinge T88
- Medisafe SI PCF
- Medisafe SI PCF Niagara
- Miele 8528
- Steelco DS1000
- Steelco DS610
- Specialized load carriers and cycles
- Refer to Appendices of user manuals



 Professional organizations are working to develop standards that all stakeholders follow.



- Manufacturers now look at cleaning, disinfection and sterilization as part of device design.
- Organizations like (FDA) is looking more closely at reprocessing issues when approving reusable medical devices.



• There is still the problem of devices that already exist and that continue to be sold.

For Reprocessing of those Instruments :

- ensuring that manufacturer's IFU's are scrupulously followed.
- employees perform return demonstrations to show that they understand how to perform a particular cleaning procedure.
- Quality assurance and close inspections must be done.
- The reprocessing process should be subjected to verifications.

• Finally more needs to be done to provide quality education, training and certification for the people who are expected to reprocess medical devices.

Take Home Message

- Patient and Staff Safety comes First .
- Be involved in the Purchasing process ,as part of the Product evaluation Committee .
- Follow manufacture instructions.
- Continuous Staff training and close monitoring.
- Involve the stakeholders in decision making .
- Verification process for the new products .

Reference

- 1. AORN Journal;3/2007,Volume 85,#3; page 566
- 2. Beckershospitalreview.com. (2016). *Robotic instruments are nearly impossible to clean completely, study shows: Removing all contamination from robotic surgical instruments, even after cleaning multiple times, is close to impossible, according to a study in Infection Control & Hospital Epidemiology, the journal of the Society for Healthcare Epidemiology of America.*. [online] Available at: https://www.beckershospitalreview.com/quality/robotic-instruments-are-nearly-impossible-to-clean-completely-study-shows.html [Accessed 13 Jul. 2019].
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- 5. Rutala, Weber. JAMA 2014. 312:1405-1406; Rutala, Weber. Am J Infect Control. 2016;44:e1-e6; Rutala, Weber ICHE. 2015;36:643.
- 6. Swenson, D. (2015). *Challenges to Reprocessing Medical Devices | Tuttnauer*. [online] Tuttnauer.com. Available at: https://tuttnauer.com/blog/challenges-to-reprocessing-medicaldevices [Accessed 10 Jul. 2019].
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