



CRITERION

SUMMER 2016

"The Official Newsletter of the CBSPD, Inc."

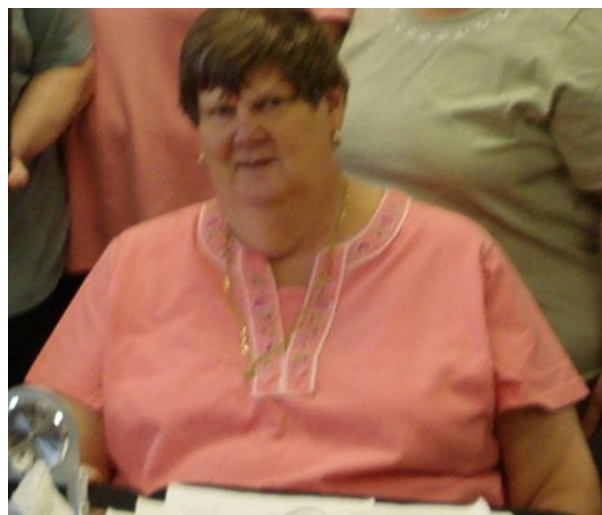
VOLUME 19, ISSUE 1

Chairperson's Message Karen Swanson LPN, CSPM

I would like to take this opportunity to pay tribute to board member Nora Wikander who passed away October 2015. Nora was one of several people back in 1988 who worked with a small group of Sterile Processing professionals to create this independent certification board known today as the CBSPD. She persevered along with her colleagues to create the certification board when many people had doubts it would come to fruition. She was there when the first exam was given in 1991.

Nora served as a CBSPD board member and chairperson of the Continuing Education Committee since 1991 until her passing. She was a wonderful resource for me when I was a new board member and throughout the years she has inspired many board members. Nora shared her knowledge and time through active involvement in Sterile Processing professional organizations. She served as a board member for the former American Society of Healthcare Central Service Personnel (ASHCSP) and was officer of the New Jersey CS Association. She was a member of the AAMI Sterilization Standards Committee for many years, and remained an active participant after she retired.

In 2011 Nora retired from her position as the Director of Central Service at St. Joseph Wayne Hospital in New Jersey. She continued to chair the CBSPD CEU committee and serve as an Executive Commissioner for the board. Nora was an author of *The Basics of Sterile Processing*. Nora's contributions to the Sterile Processing profession were many and will always be remembered. We offer our condolences to her family and close friend Tam Maresca.



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CBSPD WEBSITE

The CBSPD website will soon have a new look. Searching will be easier. Study material purchases and exam fee payments will be able to be done through the secure website. Visit the website often and watch for the changes.

FLEXIBLE ENDOSCOPE REPROCESSOR EXAM:

The CBSPD Board of Directors is launching an in-depth Job Analysis Survey to update our Flexible Endoscope examination content. The purpose of this Job Analysis is to verify the knowledge and skill sets required for competent performance in the reprocessing of flexible endoscopes. We hope to gain a large amount of insight into these domain items from professionals' evaluations. We greatly appreciate your participation and assistance.

The results of this survey will assist in defining the knowledge base and skill sets pertinent to the GI Scope field. Furthermore, the feedback compiled will validate the content of the exams to ensure that they accurately reflect the profound changes in the profession.

This survey is intended only for those individuals who have at least one year of experience in processing of flexible GI endoscopes and/or bronchoscopes. The survey may be accessed via our website at http://sterileprocessing.org/gi_jas_2016.htm

The survey ends at 12 AM Eastern Time, Saturday, August 20, 2016. The CBSPD greatly appreciates all those that take the time to participate in this important process.

STERILE PROCESSING UNIVERSITY UPDATES TEXTBOOKS:

The 2nd edition of The Basics of Flexible Endoscope Reprocessing is now available for sale. SPU has completely updated this textbook to comply with the recommendations from the Association for the Advancement of Medical Instrumentation (AAMI), AORN, SGNA, CDC, the FDA and other organizations.

The Basics of Sterile Processing 6th edition will be available for sale in July. The new 6th edition update includes 72 additional pages, over 20 new photos and all updated information on AAMI standards. Also included is new information on testing of TEE probes, emergency eyewash stations and how to test rigid containers.

(please note: if you are already preparing to take the August or November exams and have the 5th edition of The Basics of Sterile Processing or 1st edition of The Basics of Endoscope Reprocessing you DO NOT need to purchase the updated additions.

Exams will be based on the new editions beginning February 2016)

CBSPD conference attendance 2016

The CBSPD exhibited at the 2016 annual conferences of AORN, SGNA and IAHCSMM. It is a wonderful experience to be able to meet so many of our certificants who visit our booth in the exhibit hall. We find many people have questions regarding CEUs and recertification and it is nice to be able to answer these questions in person. If you plan to attend any of these conferences in 2017 please stop by our booth to say hello.

Continuing Education (CEU) Article

By: Jeanette Bakker, CSPM and Angela Jensen, CSPDS

It is with great sadness that we announce the passing of Nora Wikander on October 17, 2015. Nora was one of the founders and longtime board member of CBSPD and she will be missed greatly. After numerous years in service, Teckla Maresca, another longtime board member and also one of the founders of CBSPD, has recently retired from the CEU Committee. The CBSPD Board of Directors and support staff would like to thank Teckla for the many years of dedicated service to the sterile processing profession. She has contributed greatly to CBSPD and it has been a great pleasure working alongside her and we wish her all the best in future endeavors.

The new Co-Chairs of the CEU Review Committee are Jeanette Bakker, CSPM and Angela Jensen, CSPDS. Jeanette and Angela have both served as board member representatives in the past and continued to serve on the CBSPD CE Review Committee when their representative terms ended.



There are several ways to obtain continuing education hours, here are just a few:

- Monthly pre-approved printed in-services through Healthcare Purchasing News at hponline.com.
- Criterion, the official newsletter of CBSPD, contains a preapproved in-service at sterileprocessing.org
- Contact Vendor Reps. who may offer programs for CE credits.
- Writing and submitting test questions to CBSPD, if approved, questions will earn you CE credit. For more information on this, visit sterileprocessing.org.
- Sterile Processing University offers CE credits.



- When submitting CE request(s) by mail, please include an email (if available) to ensure prompt delivery of your approval letter.
- Departmental in-services should be submitted at least **one month** in advance, but will be accepted up to **30** days after the presentation date.
- Review the **Continuing Education Protocols** at sterileprocessing.org to ensure your program content qualifies for CE credit.

The CE Review Committee is dedicated to helping certificants maintain certification and are available to answer any questions you might have by contacting us online at ceu.sterileprocessing.org or the CBSPD office.

Processing Creutzfeldt-Jakob Disease (CJD) contaminated instruments and equipment: A review of recommended practices for processing.

Karen Swanson, CSPM, CFER

Prion diseases, also known as transmissible spongiform encephalopathies (TSEs) are a family of rare progressive neurodegenerative disorders that affect both humans and animals. Creutzfeldt-Jakob disease (CJD), caused by prions, is a degenerative neurological disorder in humans. The disease was first reported in the 1920's by German neurologists, Dr. Creutzfeldt and Dr. Jakob after recognizing patients with this these symptoms. This disease has been linked to the use of contaminated human growth hormone, dura mater (the outermost membrane covering the brain and spinal cord), corneal grafts and neurosurgical instruments.

A prion is an abnormal protein. It is not folded in the way required for normal functioning. When it comes into contact with other proteins, it acts as a template, causing them to mis-fold as well, eventually causing a chain reaction that destroys cells. Prions cause brain damage which leads to the characteristic signs and symptoms of TSEs which includes rapid mental deterioration. Prions can remain dormant for many years. Once the symptoms of the disease appear, prion diseases are rapidly progressive and always fatal. According to the National Institute of Neurological Disorders and Stroke, there are approximately 300 diagnosed cases of CJD in the United States each year.

A person undergoing neurosurgery may not have a suspected diagnosis before the procedure, but the disease may be confirmed afterwards. Therefore, as a safety measure, facilities may choose to consider processing all instrumentation used in neurosurgical and posterior eye procedures in the same manner as instruments used in procedures involving suspected or confirmed CJD patients. (CDC,2015)

The ANSI/AAMI ST79A4:2013 (Annex C) Comprehensive guide to steam sterilization and sterility assurance in health care facilities has published guidelines for processing devices and equipment contaminated with high-risk tissues. According to Rutala and Weber (2010), in the United States, posterior eye tissue, brain tissue, and spinal cord tissue are currently considered to be high risk tissues. It is important to continuously check standards and recommended practices for new and updated information on the processing of prion-contaminated devices.

All facilities should have policies and systems in place for identifying instruments and equipment potentially exposed to CJD. When CJD-contaminated instruments and equipment are sent to SPD for reprocessing, they should be identified by a form or tag that might say "SPECIAL PRION PROCESSING." (Rutala and Weber, 2010). OR and SPD personnel should be thoroughly trained on the proper tagging of equipment and on the special prion reprocessing protocols.

Healthcare facilities may have disposable instruments, which are commercially available for purchase, to be used for confirmed or highly suspected cases. If disposable instruments are not used it is important to keep the devices moist until cleaning can be performed to minimize drying of tissues and body fluids on the objects. Use of power drills or saws that are likely to contact high-risk tissue should be avoided. Power drills and saws by their very nature and design are difficult to clean and too expensive to discard (AORN, 2010a).

Following AAMI ST79 recommendations, the first step in processing is to clean the instruments according to the device manufacturer's instructions and the facility's procedures. Rutala and Weber (2010) noted that several reports have shown that available decontamination procedures that use enzymatic and/or alkaline detergents "could significantly reduce the infectivity of TSE agents and thus minimize or prevent the risk of iatrogenic transmission of undiagnosed or misdiagnosed CJD." Lumened devices can be difficult to clean. If cleaning cannot be effectively performed, lumened devices should not be processed. It is recommended that powered equipment or equipment that requires low-temperature sterilization not be used in procedures involving high-risk tissues, because there are no data on the effectiveness of cleaning and low temperature sterilization procedures used for equipment contaminated by such tissues.

After cleaning, the instruments should be steam sterilized unwrapped. The current recommended cycles are a minimum exposure time of 18 minutes at 273°F (134°C) in a prevacuum steam sterilizer or a minimum exposure time of one hour at 250°F (121°C) in a gravity-displacement steam sterilizer (ANSI/AAMI ST79). Immediate-use steam sterilization should not be used. It is important to verify that the device manufacturer(s) have validated extended cycles for prion-contaminated devices. If not, the device could be damaged (ANSI/AAMI ST79). Many neurosurgical and ophthalmology instrument manufacturers have included this information in their IFUs.

After cooling, the instruments should be assembled, packaged, and sterilized according to the instrument manufacturer's instructions. A record of the reprocessing procedures should be kept in the department's sterilization records.

AAMI also recommends a tracking system be in place that permits recall of devices used on high-risk tissue and high-risk patients. Whether computerized or manual, the tracking system should permit identification of the patient on which the devices were used, the date they were used, the procedure performed, and the surgeon's name. A suggested substitute for a computerized system is to use a steam-sterilizable two-part card, with an external chemical indicator that is affixed to the outside of instrument trays. When the tray is used, the bottom part of the card is removed and affixed to the patient's chart to identify all items used on the patient. To ensure accurate tracking of sets and devices, all items should be given a unique number. For example, if the facility has four craniotomy trays, they should be numbered #1, #2, #3, and #4 to identify the specific tray used on the patient.

Environmental surfaces and non-critical equipment contaminated with high-risk tissues should be cleaned with a detergent followed by decontamination with 5,000 ppm sodium hypochlorite (generally, a 1 part sodium hypochlorite to 10 parts water dilution of household bleach). All contaminated surfaces must be exposed to the disinfectant. It is important to first check with the device manufacturer to determine if the chemical used is compatible with their device.

Annex C in AAMI ST79 is intended to provide general guidance to hospital sterile processing departments for reprocessing instruments and medical devices that have been exposed to patients known or suspected to have Creutzfeldt-Jakob disease (CJD). This Annex is not intended to provide a detailed review. Health care facilities may consider other procedures as technologies are developed to inactivate prions. The recommendations in this Annex are based on information from the scientific literature and various health care authorities and are subject to ongoing review and modification.

Post test:

1. Prions are

- A. bacteria.
- B. viruses.
- C. proteins.
- D. Protozoa

2. Which of the following is considered to be "high risk tissue"?

- A. Liver
- B. Skin
- C. Brain
- D. Nasal

3. Which of the following statements is **TRUE** regarding prions?

- A. Prion diseases can be treated with antibiotics.
- B. Prion diseases progress rapidly and are always fatal.
- C. Prions are inactivated with 70% isopropyl alcohol.
- D. Prions are inactivated in a 1000 ppm solution of bleach.

4. Reusable instruments used in a CJD suspected case should be

- A. kept moist.
- B. allowed to dry after use.
- C. wiped with gauze after use.
- D. sprayed with saline.

5. The **FIRST** step in processing CJD contaminated instruments is to

- A. sterilize in a prevac steam cycle.
- B. soak in an organic acid solution.
- C. soak in a high level disinfectant.
- D. clean according to manufacturers' instructions.

6. After cleaning, instruments from a suspected CJD case should be

- A. assembled, wrapped and sterilized.
- B. sterilized unwrapped in an appropriate cycle.
- C. inspected under a lighted magnifier.
- D. thoroughly dried before handling.

7. Which exposure time is recommended in a prevac steam cycle at 273° F (134° C) to process instruments from a suspected CJD case?

- A. 18 minutes
- B. 10 minutes
- C. 3 minutes
- D. 4 minutes

8. Which exposure time is recommended in a gravity steam cycle at 250°F (121°C) for processing instruments from a suspected CJD?

- A. 18 minutes
- B. 30 minutes
- C. 60 minutes
- D. 90 minutes

9. After unwrapped sterilized instruments have cooled they should be

- A. discarded in the facility's biohazardous waste system.
- B. placed in storage for use in another CJD suspected case.
- C. sent to the decontamination room for further processing in the washer disinfectant.
- D. assembled, packaged and sterilized according to the instrument manufacturers' instructions.

10. Environmental surfaces and non-critical equipment contaminated with high-risk tissues should be cleaned with a detergent followed by decontamination with

- A. quaternary ammonium compounds.
- B. a phenolic based disinfectant.
- C. 5,000 ppm sodium hypochlorite.
- D. 5,000 ppm sodium hydroxide.

KEY: 1-C, 2-C, 3-B, 4-A, 5-D, 6-B, 7-A, 8-C, 9-D, 10-C

References:

American National Standards/Association for the Advancement of Medical Instrumentation (ANSI/AAMI), ST79:2013

Centers for Disease Control and Prevention (CDC) 2015

National Institute of Neurological Disorders and Stroke. Bethesda MD. 2014

The Basics of Sterile Processing, 6th edition, 2016



1st National Conference Asociación Mexicana para el Procesamiento Estéril

(Mexican Association for Sterile Processing) “The Sterile Processing, a cornerstone in Patient Safety”

From June 9th to June 11th, the First National Conference of the Mexican Association for Sterile Processing – AMEXPE – was held at the Instituto Nacional de Medicina Genómica (National Institute of Genomic Medicine) in Mexico City. In attendance were 280 people, many of which, are important leaders in sterilization companies.

The conference represented a breaking point for sterile processing personnel. Three days were divided into modules. Each module represented an important performance factor for the sterile processing department, with selected sessions led by national as well as international key opinion leaders.

The conference featured speakers from the United States, Chile, Spain and Germany, who shared their knowledge and experience in sterile processing. One of the key speakers was Michelle Milner, who is the Technician representative of the CBSPD Board of Directors. She talked about the importance of being certified and her experience working in the SPD and how people changed once they become certified. This presentation was very important to clarify doubts regarding the veracity of the certification exam.



David Velez, current AMEXPE President, giving the initial speech of inauguration



The audience during the inauguration speech.



Michelle Milner with Martha Lara (left) and Enriqueta Barido (right)



Michelle Milner with Martha Lara (left) and Enriqueta Barido (right)



A general view of the auditorium at the closing of the conference.

In the discussion surrounding certification, the first international technical exam administered by the CBSPD was introduced in 2003. Mexico became the first site, outside the US, in applying for this specialty exam. Since then, the CBSPD technical certification exam has been administered for 13 years continuously. Examination sites are currently in Mexico City and Monterrey and beginning in August, Guadalajara and Acapulco will be added on. It is also gratifying knowing that the test has been taken not only by department staff, but also by medical epidemiologists who are aware of the importance of sterile processing in preventing infections.

For exam preparation, there are courses given in Mexico City with the support of the Escuela de Profesionales en Salud del Grupo Angeles (School for Healthcare Professionals of Angeles Group) and in Monterrey, with the support of the Asociacion Neolonesa de Profesionales en Esterilizacion Hospitalaria led by Martha Lara. Martha's commitment and dedication have contributed to raising practices in sterile processing in Monterrey and staff awareness about the importance of certification.

What is next? Collaborating with government institutions and leading companies to establish an official guide and regulations for Sterile Processing. In addition, there will be ongoing work on continuing education to elevate the clinical practices in sterile processing, and also so certified personnel can keep their certifications. There is a lot of work ahead, but we are committed as an association and as individuals, to make our country, Mexico, a better place. We thank the CBSPD for their support in raising practices in the sterile processing department and giving staff the pride of belonging to this department. Thank you and we strive for more!!

A picture to remember.....



Nancy Chobin during the ceremony of the first technical exam applied in Mexico City Angeles del Pedregal Hospital - August 2003

Report on the CBSPD Item Review Committee

The Item Review Co-Chairs continued to review all the CBSPD Item Banks for updating of references and verification of test specifications assigned to each question. Updating included retiring old questions or questions not currently relevant to the practice. We used the criterion that with 100 questions on each exam, every question must be one that tests the candidate's ability to provide safe practice.

Policies and procedures for Committee Membership, Committee responsibilities and review of Item Banks were developed and submitted to the Board of Directors in October, 2015.

REVIEW OF ITEM BANKS

GI BANK

A complete review of the GI bank was performed. An Item writing session for new GI/Endo reps was conducted. Assignments for writing questions given.

MANAGEMENT BANK

The bank was updated.

SURGICAL INSTRUMENT SPECIALIST BANK

In March, 2015, 3 sessions were held with Sue McManus and Karen Swanson to review the entire SIS bank. All references were updated. Thereafter, questions that were on hold or in various stages of development were completed and additional questions written. On 4/13/15 an Item Review meeting was conducted. A total of 59 new questions were approved for the bank.

AMBULATORY SURGERY BANK

The Ambulatory Surgery Bank was reviewed and all references updated.

TECHNICIAN BANK

It was reviewed and all references updated in August.

After each bank was updated, a list of approved questions in each domain, by exam was developed. This will make it easier to assign Item Writers the specific needs of each bank. Assignments were made. Item review questions developed.

Another project was review of the Job Analysis domains for each exam. The Co-Chairs ensured that all domains were clear to the item writers. All Domains were reviewed and clarifications added for Item Writers. This will also help when the Job Analysis Surveys are updated.

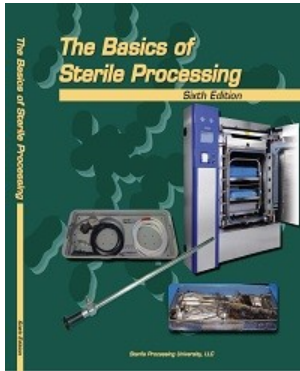
Due to the enormous task of updating all the banks, Item Writing Webinars were limited. Now that the banks have been updated these Meetings will resume.

The Item Review Committee is responsible to maintain five (5) Item Banks, more than most organizations. As such, we are recruiting for additional members to write and/or approve new questions for the respective banks. You will earn Continuing Education credits for your membership on the Committee. If interested, please contact: nancy.chobin@att.net or suemcmanus@comcast.net.

Respectfully submitted,
Nancy Chobin, RN, CSPM and Sue McManus, RN, CSPM
Co-Chairs, Item Review Committee

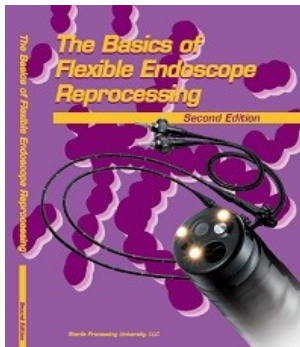
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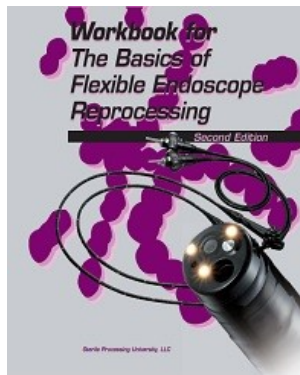
Certification for sterile processing personnel is quickly being required throughout the US. Don't wait until it is required. Get your education now! Sterile Processing University is here to help you succeed.

STUDY TEXTBOOKS AND WORKBOOKS- FOR SELF STUDY. *This includes the NEW 6th edition of the Basics of Sterile Processing Textbook and Workbook. This edition includes 72 additional pages, over 20 new photos and all updated information on AAMI standards. Also included is new information on testing of TEE probes, emergency eyewash stations and how to test rigid containers. All material in the book is based on AAMI standards and is evidence-based.*



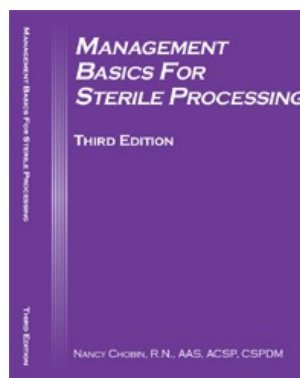
For MANAGERS and SUPERVISORS - *SPU offers the textbook, Management Basics for Sterile Processing, The Third Edition (2014). Indicated for SPD Managers and Supervisor or those who wish to become a manager or supervisor.*

Working in GI/ENDO? *IMPORTANT GI UPDATES, CRITICAL TO PATIENT SAFETY have been added to our UPDATED The Basics of Flexible Endoscope Reprocessing Textbook and Workbook SECOND editions. Both editions available for sale now.*



On-Line Courses. *No time to attend a school or need a more structured environment for learning? SPU offers three on-line courses: Sterile Processing Technician, Sterile Processing Ambulatory Surgery Technician and Flexible Endoscope Reprocessor. Learn at your own pace. The information is divided into modules and there is a practice quiz at the end of each chapter. There is also a practice finale exam at the end of the course. Learn from the convenience of your home.*

FOR EDUCATORS - *The instructional CD in Power Point for the Basics of Sterile Processing, Sixth edition, is currently being update and will be available by July 31st. The CD follows the course content for the SIXTH edition of The Basics of Sterile Processing. If you previously purchased a CD, you are eligible for an upgrade.*



Continuing Education Programs - *If already certified, maintain your certification with continuing education. All SPU In-services have been pre-approved for CBSPD Continuing Education credits. SPU educational materials are evidence-based ad updated continually so you get the most current information. We are constantly adding new inservices.*

POLICIES, PROCEDURES AND FORMS: - *SPU offers policies, procedures and documentation forms on line! Up-to-date and referenced to save you time. Customize to your format.*

Website: www.sterileprocessinguniversity.com

Phone: 201.937.1343



CBSPD, INC.
148 MAIN STREET
SUITE C-1
LEBANON, NJ 08833
USA

PRSRT STD
US Postage
PAID
Permit # 766
Rahway, NJ

**August 2015 - February 2016
CBSPD Certification Exam Stats**

**(Passing names listed at
www.sterileprocessing.org/new_members.htm)**

Technician: Total Sat for Exam = 2,671;
Total Passed = 1,691 (63%); Total Failed = 980 (37%)

Management: Total Sat for Exam = 63;
Total Passed = 35 (56%); Total Failed = 28 (44%)

Instrument Specialist: Total Sat for Exam = 43;
Total Passed = 31 (72%); Total Failed = 12 (28%)

Ambulatory Surgery: Total Sat for Exam = 36;
Total Passed = 18 (50%); Total Failed = 18 (50%)

GI Scope: Total Sat for Exam = 410;
Total Passed = 288 (70%); Total Failed = 122 (30%)

****Reminder to All Upcoming
October/November 2016 Re-certs****

Why retake the exam when after working full time for 5 years, you only need 10 points of education per year to re-certify (except for Supervisors/Managers)?

If you became certified or re-certified in October 2011, you are due for re-certification in October 2016. Please have your completed re-certification packet with payment into the CBSPD office no later than 9/13/16.

If you became certified or re-certified in November 2011, you are due for re-certification in November 2016. Please have your completed re-certification packet with payment into the CBSPD office no later than 10/13/16.

The CBSPD e-mails and mails out re-certification packets 6 months before your certification expires. If you have not received your packet yet, please contact our office to update your address and/or print one out from our downloads page at:

www.sterileprocessing.org/download.htm