

PROCEDURE FOR: Sterilization

- POLICY:
1. AORN Recommended Practices for Sterilization in the Perioperative Practice Setting will be used and the Association for the Advancement of Medical Instrumentation (AAMI) Standards and Recommendations for Sterilization in Health Care Facilities will be used as guidelines for practice.
  2. Manufacturer's recommendations will be followed to determine the most appropriate sterilization method and packaging to be used for individual items.
  3. Saturated steam under pressure will be used for to sterilize all heat- and moisture-stable items unless otherwise indicated by the manufacturer.
  4. Alternative methods of sterilization, including but not limited to ethylene oxide and low-temperature hydrogen peroxide gas plasma (JDH site only), peracetic acid and dry heat, will be used for heat- and/or moisture-sensitive items when indicated by the manufacturer.
  5. All loaned instrumentation and equipment that must be sterilized will be handled according to the procedure for: Loaned Instrumentation and Equipment: Inventory and Processing.
  6. Sterilized materials will be packaged, labeled, and stored in a manner to ensure sterility, and marked with the sterilization date. Event related sterility is standard of practice unless manufacturer's recommendations advise otherwise; each sterilized package will be evaluated individually prior to use for compromise or, if marked, for the sterilization expiration date.
  7. Steam sterilization integrators will be used internally and indicators used externally for all sterilized items. Biological spore test indicators will be used in all loads processed in CSS/IR and for all loads containing implants when processed in steam autoclaves in the surgical suites.
  8. Medical-grade, all-paper pouches will be used to organize instruments within sets; combination paper/plastic peel pouches will not be used for this purpose. When pouches are used within sets, they must each contain a sterilization integrator to confirm sterility of set contents.
  9. Flash sterilization will be used only as a last resort option, and not with implants except in cases of emergency when no other option is available. In an emergency when flash sterilization of an implant is unavoidable:
    - a. include a rapid-action biological spore-test indicator with the load;
    - b. quarantine the implant on the back table until results of the rapid-action test are known, whenever possible;
    - c. if implant must be used prior to obtaining results and the biological indicator is positive, report this to the charge nurse / ANM, who must inform the attending surgeon and Infection Control, and complete a Patient Safety Net report;

PROCEDURE FOR: Sterilization

- d. do not save the implant as sterile for future use, as  
resterilization must occur if implant is to be used later on.
10. Printed records for all sterilizers in the Perioperative Area  
will be stored in Central Sterile Supply.

APPROVAL: Nursing Standards Committee

EFFECTIVE DATE: 10/03, 12/08