

REPROCESSING OF FLEXIBLE ENDOSCOPES AT KELOWNA GENERAL HOSPITAL

Summary of Changes

	NEW	Previous
BC Cancer		

PROCEDURE: BC CANCER – KELOWNA REPROCESSING OF FLEXIBLE ENDOSCOPES AT KELOWNA GENERAL HOSPITAL

1. Introduction

1.1. Introduction

The proper reprocessing of reusable medical devices, such as flexible endoscopes, is essential to provide safe care of patients examined with this type of equipment. At BC Cancer Kelowna the reprocessing of flexible endoscopes scopes utilized for nasopharyngeal procedures is usually performed on-site by nursing staff certified in using the Steris equipment. In certain circumstances it may be necessary to arrange for this service to be completed in the Kelowna General Hospital Medical Device Reprocessing (KGH MDR) department.

1.2. Focus

Flexible endoscope reprocessing at Kelowna General Hospital Medical Device Reprocessing (KGH MDR) department.

1.3. Health Organization Site Applicability

BC Cancer- Kelowna

1.4. Practice Level

This procedure applies to all staff involved in the process for flexible endoscope reprocessing after nasopharyngeal procedures at BC Cancer- Kelowna

1.5. Need to Know

Directives

1. Nurses involved in flexible endoscope reprocessing must have completed the mandatory education and certification requirements for BC Cancer-Kelowna
2. All flexible endoscopes scopes utilized for nasopharyngeal procedures must be cleaned on a weekly basis. Scopes not utilized in the course of the week must be sent to the KGH MDR department for a weekly cleaning.

1.6. Equipment and Supplies

- Flexible endoscope
- Red or KGH grey transport bins with lids
- Stainless steel transport cart
- Disinfectant cleaning wipes (i.e. Caviwipes)

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2. Procedure

2.1. Steps and Rationale

The team clerk will attach a slip stamped with patient identifiers to front of Head and Neck patient charts prior to appointment.

1. The Radiation Oncologist will select flexible endoscopes (scopes) from right to left in the scope cabinet. Flexible endoscopes will be moved across slots to ensure continuous rotation of the fleet.
2. The Radiation Oncologist will complete the nasopharyngeal procedure following the recommended infection control procedures for contact/droplet precautions.
 - Nasopharyngeal scoping is an Aerosol-Generating Medical Procedure (AGMP) as defined by the BC Centre for Disease Control (BCCDC).

When airborne precautions are required:

- a) Items in the scope room must be draped prior to the procedure.
 - b) Proper donning and doffing of Airborne precaution Personal Protective Equipment (PPE) including N-95 mask is required.
 - c) Staff must NOT enter the examination room to collect the scope until the 90 minute settling period is completed. This time must be indicated on the “Cleaning Communication Tool” and posted on the room door.
 - d) If there is a reduction in nasopharyngeal scope procedures being done, the requirement for weekly cleaning of scopes not in use may be waived by the Infection Control Nurse. If waived, scopes not in use must be labelled and stored in a separate location until reprocessed and placed back in circulation. When these scopes are put back into circulation, they must be sent for reprocessing prior to use again.
3. When complete, the Radiation Oncologist will insert the patient information slip into the red/grey transport bin with the scope utilized for the procedure and place on the designated transport cart (see exception 3.a).
 4. Transportation of Scopes
 - I. Prior to transporting scopes to KGH MDR department, the designated nurse must enter the following information, critical for contact tracing in the event of infection control issues, the:
 - a) Serial number of the soiled scope
 - b) BC Cancer patient identification
 - II. Discard the patient identification slip once this information is recorded on the tracking sheet in order to preserve patient confidentiality.

* A maximum of two scopes may be placed in one transport bin; scope heads cannot touch; a physical barrier is to be placed between scope heads (i.e. WypALL or lint-free green O.R. towel).

- III. Place the transport bin (ensure lid is secured) on the designated stainless steel cart.

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- a) A stainless steel cart must be used for scope transport to ensure adequate disinfection (plastic carts are not to be used). This cart may not be used for alternate purposes.
- b) The cart is to be cleaned with hospital grade disinfectant wipes (i.e. Caviwipes):
 - Prior to returning to the Ambulatory Care Unit from dropping off soiled scopes
 - Prior to the pick-up of cleaned scopes from KGH MDR
 - On a weekly basis
- IV. Transport scopes to the KGH MDR department for reprocessing. Place bins containing soiled scopes on the table inside the soiled area of KGH MDR department.
 - * Note- The KGH MDR Department is located on the third floor of the Interior Heart & Surgical Centre (IHSC) building. A functioning Chubb card is required for elevator access.
5. Scopes are retrieved from the clean utility cart outside the KGH MDR department the next business day. Return to BC Cancer ACU must be noted on the tracking sheet in the Scopes Record binder.
6. Scopes will be hung in the storage cabinet in ACU.

Weekly Cleaning (See exception 3.a.iv)

- I. The designated nurse will review the scope reprocessing tracking sheet in the scopes record binder to identify those that require a weekly cleaning.
- II. The inside of the scope storage cabinet is to be thoroughly cleaned with hospital grade disinfectant wipes each Friday morning

Damaged Scopes

If any scope is damaged, the designated nurse will:

- I. Record the serial number on the scope tracking sheet and indicate “Sent for repair”.
- II. Place the scope in a carrying case (stored ACU Room 8) and give to the Manager of Regional Centre Services.
- III. The Manager of Regional Centre Services will make arrangements for delivery of the damaged scope to the manufacturer for servicing or repairs as needed.
- IV. Upon return, the repaired scope must be noted as “Returned from repair” and then sent for reprocessing as per regular process.

3. Related Documents and References

3.1. Related Documents

[BC CANCER – KELOWNA Reprocessing of Flexible Endoscope Quality Assurance Procedure](#)

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Approving Body:	BC Cancer Kelowna Nursing Leadership Team		
Final Sign Off:	Name	Title	Date Signed
	Andrea Knox	Senior Practice Leader-Nursing	
Developed By:	Name	Dept.	HO
	Maureen Ryan	Clinical Nurse Leader, Radiation Therapy	BC Cancer - Kelowna
	Robin Moser	Radiation Therapy, LPN	BC Cancer - Kelowna
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