

DECONTAMINATION OF EQUIPMENT PRIOR TO SERVICE

KEY POINTS

Contaminated medical equipment must be made safe before service or repair

There is a duty of care to inform engineers and others that equipment is safe or unsafe by using the "Permit to Work" form is available (see www.infectioncontrolservices.co.uk/forms.htm) and must be filled in by a nurse before work starts or before equipment is taken away

INTRODUCTION

Anyone who inspects, services repairs or transports medical, dental or laboratory equipment either on hospital premises or elsewhere has a right to expect that the equipment has been appropriately treated to minimise the risk of infection. Documentation is required to indicate the contamination status of the item.

This procedure refers to medical equipment from clinical areas sent for repair, servicing or decontamination to the following departments:





- District Supplies
- Works/Estates
- Outside contractors or manufacturer
- Medical Physics, etc

The procedure is designed to protect personnel handling the equipment from the risk of acquiring infection. This includes all staff working within the trusts and also those working for outside manufacturing commercial companies who are entitled to request a certificate of decontamination before accepting equipment for servicing.

The procedure does not apply to the processing of SSD instruments or linen. These will continue to be dealt with in the usual way.

The relevant advice is contained in the Medicines and Healthcare Products Agency Device Bulletin MHRA DB 2003(05), June 2003. **All** reusable medical devices and equipment to be inspected, serviced, repaired, returned to the lending organisation or disposed of should undergo decontamination. The devices and equipment should not expose the recipient to a biological, chemical or radio-active hazard.

Failure to comply with the legislative requirements could leave the Trust open to prosecution.

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PERMIT PROCEDURE

PERMIT TO WORK

Whenever equipment requires disinfection, repair or maintenance, the Nurse in Charge or the Head of Department must complete an appropriate permit label and attach it securely to the equipment concerned before despatch. The article or machine must be externally clean and safe to transport.

WHITE PERMIT LABEL

If the equipment has not been contaminated by either blood or body fluids, a white Permit Label should be attached before it is sent to the appropriate department for work. At UCLH (and in other hospitals by agreement with Estates/Works), this label will function as a "Permit to Work".

RED PERMIT LABEL

If the equipment may have been contaminated by blood or body fluids, a red Permit Label must be used and the apparatus decontaminated appropriately prior to being serviced or worked on internally.

Table 1: Classification of infection risk associated with the decontamination of medical devices and equipment. Adapted from "Sterilization, disinfection and cleaning of medical equipment: Guidance on decontamination from Microbiology Advisory Committee to the Department of Health Medical Devices Agency" (MAC manual) [2].

Risk	Application of item	Recommendation
High	<ul style="list-style-type: none"> In close contact with broken skin or broken mucous membrane Introduced into sterile body areas 	Cleaning followed by sterilisation*
Medium	<ul style="list-style-type: none"> In contact with mucous membranes contaminated with particularly virulen or readily transmissible organisms Prior to use on immunocompromised patients 	Cleaning followed by sterilisation or disinfection*
Low	<ul style="list-style-type: none"> In contact with healthy skin Not in contact with patient 	Cleaning only

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*Other factors to be taken into consideration when choosing a method of decontamination include the nature of the contamination, the time required for processing, the heat, pressure, moisture and chemical tolerance of the object, the availability of the processing equipment and the quality and risks associated with the decontamination method.

Note: Where sterilisation will damage equipment, cleaning followed by high level disinfection may be used as an alternative.

If the outer surface of the equipment is visibly soiled or it has been used for a patient in Source Isolation, it must be cleaned in accordance with the Disinfection Policy and then enclosed in two clear polythene bags. Both bags must be securely tied at the neck before attaching the red Permit Label. Protective clothing must be used when bagging and labelling the equipment.

In the event of contamination by HBV, HCV, HIV or TB, "Danger of infection" labels or "Biohazard" tape must be affixed to the outer covering.

NON-PORTABLE EQUIPMENT

For work requested on large or non-portable equipment, the appropriate Permit Label must be completed in the same manner. If decontamination is not required, complete the white Permit Label and contact the department for the work requested. If decontamination is indicated, complete the red Permit Label and contact the local Infection Control Team for decontamination within the ward or department.

Any member of staff who is in doubt as to which Permit Label to use, should contact a member of the Infection Control Team for advice.

CLEARANCE CERTIFICATE FOR INSPECTION

After following the agreed procedures, personnel from appropriate departments (e.g. endoscopy, CSSD, works, etc) will issue a "Clearance Certificate for Inspection, Servicing or Repair of Medical and Laboratory Equipment". This will function as a "Permit to Work" Certificate for outside contractors.

Equipment should be accepted for work only if this procedure has been followed.

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REFERENCES

Decontamination of equipment prior to service & repair. NHS Management Executive 1993 HSG (93)26. HMSO, London

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