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Endoscopy Department Tools of the Trade: Endoscope Reprocessing

Written by Matt Smith, Marketing Analyst, Healthmark Industries Co. | January 31, 2012



The following article is written by Matt Smith, marketing analyst for [Healthmark Industries Co.](#)

Cross contamination from flexible endoscopes remains one most health technology-related hazards. Every endoscopy department should be aware of their process for proper cleaning and review their current guidelines.

According to the SGNA, "Proper reprocessing of endoscopes and accessories is critical to the safe and successful treatment of patients" (ASGE, 2001). SGNA and ASGE support increased research in the areas of endoscope design and encourage manufacturers to develop flexible gastrointestinal endoscopes that can be easily disassembled for reprocessing and verification of cleaning and high level disinfection. "The use of non-immersible endoscopes is no longer acceptable because endoscopes that cannot be completely immersed in liquid cannot be adequately cleaned and high-level disinfected" (ASGE, 2001).

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Here are four useful tips when considering your process for endoscope cleaning:

1. Pre-cleaning (bedside cleaning), including adequate rinsing, is essential to endoscope reprocessing. This step will remove bio-burden left from the patient after use. Manufacturer instructions often recommend lint-free wipes for manual cleaning. Using the wipes immediately after patient-use, and prior to automated or manual disinfection, will help ensure any unwanted particles are removed.
2. If pre-cleaning isn't started right away, endoscopes should be soaked according to manufacturer's recommendation in an appropriate enzymatic detergent. This will help moisten the dried bio-burden and make it easier to clean during automatic washing.

3. Use parts bag for the endoscope valves and other detachable equipment that can be removed. This is recommended in the [myendosite guidelines](#) (pdf). This will prevent the endoscope's internal channels from retaining water, which could become contaminated with microorganisms and pose an increase risk of healthcare-acquired infections.

4. Use disinfection labels. Keep track of the last time each endoscope was reprocessed and keep your department organized through the decontamination process.

We know that flexible endoscopes are difficult to clean and organic soil can be left behind. How can you make sure your flexible endoscope has been cleaned properly of organic soil, like blood, protein, carbohydrates, etc. How can you see inside the lumens you just cleaned?

According to the "[Multisociety Guideline on Reprocessing Flexible Gastrointestinal Endoscopes: 2011](#)" (pdf), "Healthcare facilities should develop protocols to ensure that users can readily identify whether an endoscope is contaminated or is ready for patient use." The long narrow channels found in a flexible endoscope create a challenge not only to clean but to verify that they have been adequately cleaned.

AAMI ST 79 states, "... processing personnel are increasingly aware of the need to control and standardize the steps taken to ensure the sterility of devices for patient use. *Because disinfection and sterilization cannot be assured unless the cleaning process is successful, professionals in the field ought to seek out whatever means are available and practical to verify this function.* A quality system would call for monitoring and documenting decontamination processing parameters, whether the process is accomplished by hand or mechanically...."

Be sure to select the verification products that allow you to test for organic soil, such as blood, carbohydrate and proteins, which could be left behind if improperly cleaned.

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