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Questions can be sent to: editor@hpnonline.com
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Names and hospital identification will be withheld upon request.



Monitoring temperature in transit; pitfalls of plastic, solid-bottom trays

by Ray Taurasi

Q We are a multi-facility organization consisting of two hospitals, three surgery centers, and two endoscopy centers. We have started doing all of our reprocessing at one hospital. This means that we are transporting sterile case carts, sterile supplies and soiled goods to and from the various facilities. We monitor temperature and humidity in the sterile storage area at the hospital and I was wondering if there was any way I could monitor the temperature and humidity during transportation?

A There are different types of thermometers available on the market that can monitor the temperature and humidity in an area or location in which they are placed (see Figure 1). This data can be captured over a specified time period and some of the devices actually have Wi-Fi capability that can transmit the data to designated areas. Some of



Figure 1

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the monitoring devices retain the data that can be downloaded to a computer via a USB connection, filed for future reference, and retrieved for QA documentation. The saved data can also be generated into graphs, tables and other report formats (See Figure 2).

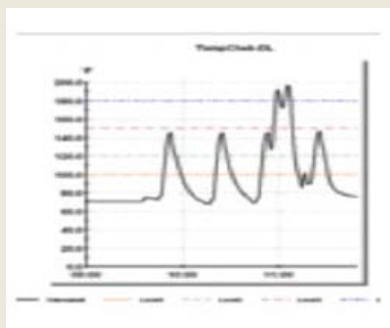


Figure 2

It is very important that you do take measures to control and monitor these conditions during transit. The transporting vehicle, e.g., truck or van, must have a controlled storage environment.

The use of a separate vehicle for sterile and soiled items would be the best practice but when one vehicle is being used simultaneously for transporting both soiled and clean items separate, secure, containment devices should be used and clearly identified. The storage compartment of the transporting vehicle should allow for separation of the clean and soiled containment devices. The containment devices and or carts should also be secured or locked in place in the transporting vehicle to prevent movement in transit. Strict regulations set by the Environmental Protection Agency and Department of Transportation must be enforced when transporting bio-hazardous material (such as contaminated surgical instruments, medical devices and waste). It is also important that you check with your state and individual municipalities for any additional or specific regulations they may have regarding the transportation of bio-hazardous materials.

Q I am the regional sterile processing nurse manger for a for a health system that is in the process of opening six new ambulatory surgery centers. The OR task force has come up with standardized instrument sets to be utilized by each center, has ordered the instrumentation and trays, and designated how each set is to be assembled. Of course, I was not part of the planning nor was I consulted. The instrument trays they have selected consist of solid plastic mayo trays (they look like cafeteria trays), and various sizes of shallow, non-perforated stainless steel pans.

Their procedure for set assembly also calls for ring-handled instruments to be closed to the second ratchet. Their rational for this is that many procedures do not use a scrub nurse and so the instruments are positioned on the trays in order of use so that the surgeon can take them as needed. Otherwise, they claim the open instruments might damage the wrap or cause injury to the doctor when he reaches for them. I am very concerned that the solid trays and plastic materials will cause wetness and possibly prevent adequate steam permeation. I have brought this matter up to the OR counsel chairperson, who is also my boss, and she stated that many of the team members have used these trays and pans in the past with no issues. She also said that most sets are small, with little metal mass, unlike the large sets that are used in acute care hospitals. Since we are so close to opening the new centers, and all the pans and trays are onsite, she told me we had to go on as planned and encouraged me to be open-minded, give it a try, and if any problems are detected to let her know and they would consider other options. Do you think this is a good idea?

A I agree with the concerns that solid bottom trays and pans should not be used for the reasons you noted. Plastic in of itself does not have the thermal captivity that stainless steel has and often presents a greater challenge to the drying process. Also, when not managed properly they are more prone to moisture retention and solid bottoms would certainly add to the potential of moisture formation and retention.

I believe it would be best to be proactive in your practices in order to obviate the onset of problems and sterilization failures. Waiting for a problem to occur is like playing Russian roulette with patients' safety. Reprocessing and sterilization procedures should be such that we prepare sets in a manner that will present the least degree of challenge to a successful sterilization process. I advocate that you adhere to best

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practices and follow current guidelines and recommendations.

The Association of periOperative Registered Nurses (AORN) recommendations clearly state that all hinged instruments should remain open and be disassembled during the sterilization process unless the instrument manufacturer has provided validated instructions to the contrary. The Association for the Advancement of Medical Instrumentation (AAMI) ST79 guidelines and recommendations state "instrument sets should be sterilized in perforated or wire-mesh-bottom trays or in containment devices such as specially designed rigid organizing trays or rigid sterilization container systems, with all instruments held open and unlocked." The rationale behind these recommended practices is to ensure sterilant permeation and exposure to all surfaces. The use of loose-fitting tip protectors on sharp instruments can minimize the risk of injury or damage to delicate instruments and packaging. Be certain that any tip protectors or other packaging aids have been validated for use with the method of sterilization and that they are used according to manufacturer's instructions. **HPN**

Ray Taurasi is Eastern Regional Director of Clinical Sales and Services for [Healthmark Industries](#). His healthcare career spans over three decades as an Administrator, Educator, Technologist and Consultant. He is a member of AORN, AHA, SGNA, AAMI and a past president of IAHCMM and has served on and contributed to many national committees with a myriad of professional organizations, manufacturers, corporations and prestigious healthcare networks. Taurasi has been a faculty member of numerous colleges teaching in the divisions of business administration and health sciences. In addition to this column he has authored several articles and has been a featured speaker on the international scene.

