**Clinical Operations Policy**

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<th>SURGICAL INSTRUMENT POINT-OF-USE AND PRE-CLEANING</th>
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**I. SCOPE:**

This policy applies to (1) Tenet Healthcare Corporation and its wholly-owned subsidiaries and affiliates (each, an “Affiliate”); (2) any other entity or organization in which Tenet Healthcare Corporation or an Affiliate owns a direct or indirect equity interest greater than 50%; and (3) any facility in which an Affiliate either manages or controls the day-to-day operations of the facility (each, a “Tenet Entity”) (collectively, “Tenet”).

**II. PURPOSE:**

The purpose of this policy is to prevent organic material and debris from drying on surgical instruments making it challenging to clean and exposing personnel to blood borne pathogens and other potentially infectious organisms during transport and processing of surgical instruments.

**III. DEFINITIONS:**

A. “Cleaning” is the removal of all visible dust, soil, and any other foreign material.

B. “Point-of-Use” is the place where a product is used.

C. “PPE” stands for Personal Protective Equipment.

D. “Lumen” is the channel within a tube or cylinder type object.

E. “Cannula” is an insertion tube of an object.

F. “Impermeable” is not allowing fluid to pass through.

G. “Notch” is an indentation on an object.

**IV. POLICY:**

Surgical instruments will be pre-cleaned at the point-of-use and immediately after the procedure in accordance to the Association for the Advancement of Medical Instrumentation (AAMI) standards and guidelines.

**V. PROCEDURE:**

A. Pre-Procedure Setup
1. Assemble necessary equipment including instruments to be used, pre-treatment product, rigid transport container, surgical towels, gauze, sterile water, etc.

2. Verify rigid transport container is clean prior to bringing into procedure room.

B. Safety

1. Personal Protective Equipment (PPE) [gown, mask with shield or goggles, and gloves] must be worn during pre-cleaning process to protect employees from blood borne pathogens and other infectious diseases. Employees must also don and doff PPE properly.

C. Pre-Cleaning at the Point-of-Use

1. Pre-cleaning instruments as soon as possible after use can help prevent formation of biofilm and dried bioburden and blood. Bioburden or blood becomes more difficult to remove and clean when it is allowed to dry on instruments. Power tools, saws, cameras and drills are to be cleaned and kept moist after use according to their manufacturer guidelines.

2. Preparation for decontamination of instruments must begin at the point-of-use.
   a. During the procedure, employee will remove gross soil from instruments by wiping the surfaces with a lint free cloth or sterile surgical towel moistened with sterile water. Saline must not be used to wipe instrument surfaces.
   b. Employee will periodically use sterile water to irrigate instruments with lumens in areas where procedures are performed.
   c. A final irrigation of all lumens and cannulas with sterile water needs to be performed at the end of the case to ensure the amount of bioburden is decreased. Cannulas are to remain in the “open” position.

D. Pre-Cleaning Post Procedure

1. At the end of the procedure, employee is to remove and dispose of all sharps in the designated biohazard containers; the sharps include, but are not limited to:
   a. Suture Needles
b. Hypodermic Needles

c. Scalpel Blades

d. Electrosurgical cautery tips

e. Dermatome blades

f. Single use drill bits

g. Single use blades and burrs

2. Fluid is suctioned/removed from all containers used for instrument transport.

3. All instruments (used and unused) are to be completely opened. Sharp instruments including but not limited to towel clips and tenaculums may be latched on the first box lock notch to avoid injury.

4. The employee must open and disassemble any instrument with more than one piece according to the manufacturer’s instructions; and arrange in a manner that will permit contact of cleaning solutions with all surfaces of the instruments.

5. Separate heavier instruments from delicate instruments by placing delicate instruments on top of the heavier instruments to prevent damage to the delicate ones.

6. Place all instruments back in their original container or tray. Try not to mix or combine instrument sets.

7. Instruments must be kept moist until they are cleaned. A surgical instrument pre-treatment product must be applied to all instruments (used and unused) immediately following the procedure or as the patient exits the procedure room to maintain moisture during transport.

8. Using Tenet’s standardized pre-treatment product, apply pre-treatment product according to manufacturer’s instructions. Ensure surgical instrument pre-treatment product is fully saturated over all instrument surfaces or is applied in a manner to keep all instruments moist.

9. For procedure areas where patients do not leave the room after the procedure, a surgical lint free towel moistened with water (not saline) may be placed on the instruments before secure transport to closest soiled utility room. Pre-treatment
product will be applied upon arrival to the designated soiled utility area and the towel then removed before transport.

E. Transport to Decontamination Area

1. Contaminated instruments are transported to the decontamination area as soon as possible after completion of the procedure. This will prevent the pre-treatment product from drying on instruments before the instruments are cleaned.

2. Soiled instruments must be transported to the decontamination area in a closed rigid container (with lid containing latches) or enclosed transport cart. The container or cart must be:
   a. Leak proof
   b. Puncture resistant
   c. Large enough to contain all contents
   d. Labeled with a red biohazard sticker

3. Biohazard labels should be affixed to transport device so as to prevent separation from the contents.

4. Closed biohazard labeled rigid containers or carts should not be used to transport liquids.

5. Contaminated instruments and other items must be separated from clean and sterile supplies before transport to the processing area.

F. Responsible Person

The Tenet Entity Chief Nursing Officer (CNO) and Chief Operating Officer (COO) are responsible for ensuring that all personnel adhere to the requirements of this policy, that these procedures are implemented and followed at the Facility, and that instances of noncompliance with this policy are reported to the Chief Nursing Officer and VP of Patient Care Services.

G. Enforcement

All employees whose responsibilities are affected by this policy are expected to be
familiar with the basic procedures and responsibilities created by this policy. Failure to comply with this policy will be subject to appropriate performance management pursuant to all applicable policies and procedures, up to and including termination. Such performance management may also include modification of compensation, including any merit or discretionary compensation awards, as allowed by applicable law.

VI. REFERENCES:


VII. ATTACHMENTS:

- Attachment A: Pre-Cleaning Program Implementation Plan
- Attachment B: EDU Department and Job Title Requirements List
- Attachment C: Point of Use and Pre-Cleaning Competency Form