Clinical Briefing USA

Implementing everyday practice

Implementing traceability workflows for ultrasound probes

- It is important to correctly link the reprocessing record to the patient record for semi-critical and critical ultrasound probes when implementing traceability workflows.
- Improper linking may fail to demonstrate the probe was properly reprocessed prior to use in the event of an outbreak or patient infection.
- Documentation should demonstrate the probe was properly reprocessed at use.

Probe disinfection status when used

1. If a medical device is improperly disinfected or contaminated and then used on a patient, the patient becomes at risk of infection.
2. Ultrasound probe reprocessing before a procedure is integral to infection prevention.
3. The Spaulding classification determines reprocessing requirements based on how the device is intended to be used (Box 1).

If a probe was not properly reprocessed before being used on a patient, the patient is at risk of infection.

Proper reprocessing after this patient may protect the next patient, but not the patient just examined.

Box 1: The Spaulding classification depends on the intended use of the device.

"The first category is that of critical items, so called because the risk is great. They are either introduced beneath the surface of the body or attached to another object which is, i.e., transfer forceps scalpel blades, cardiac catheters, and plastic components of the heart-lung oxygenator. ***Consequently, critical items must be sterile when used[1]"***

"They make direct contact with mucous membranes but these tissues are intact and therefore constitute barriers to infection. ***Semicritical items need not be sterile when used, although this is desirable[1]"***

1. Spaulding EH. Chemical disinfection of medical & surgical materials. In: Lawrence C, Block SS, editor. Disinfection, sterilization, & preservation. Philadelphia (PA): Lea & Febiger; 1968. p. 517-31.

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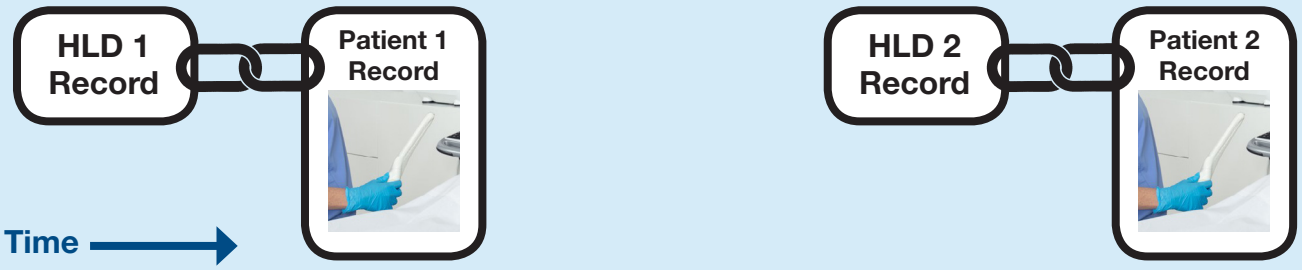
Illustrating record linking to complete traceability

- Linking the reprocessing record to the right patient is essential to demonstrate duty of care and manage potential outbreak situations (Box 2).

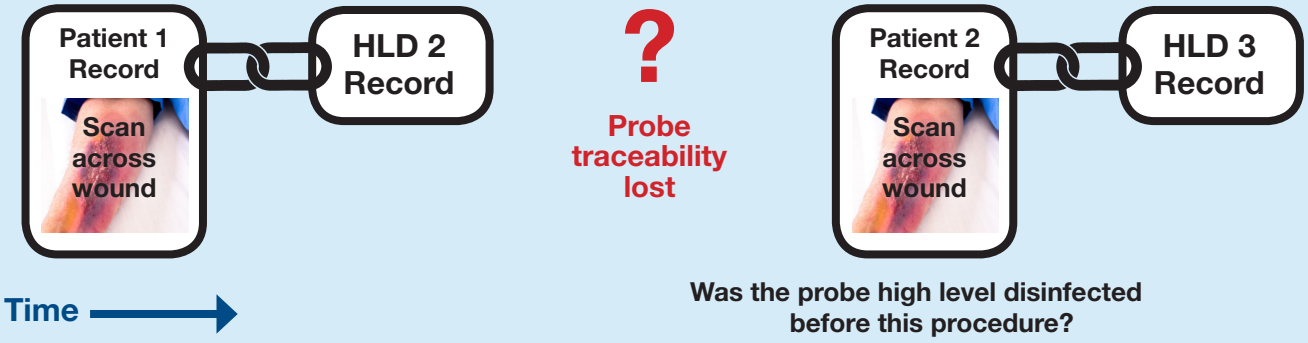
Box 2: Completing traceability for ultrasound probes



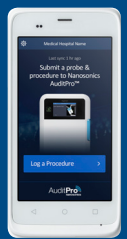
- In some departments, surface ultrasound probes can be classified as critical, semi-critical or non-critical depending on their intended use.

If the HLD record is linked to the last patient, and not the patient the probe is to be used on, it will be extremely difficult to rule out the probe in the event of a patient infection or outbreak (Box 3). This is because the probe may have been used in a non-critical procedure that was not tracked, or the probe may not have been properly stored.

Box 3: Improper traceability linking for ultrasound probes



Take a moment to observe your ultrasound traceability documentation. Would you be able to rule out improper ultrasound probe reprocessing in the event of a patient infection?



Learn how Nanosonics AuditPro can help meet your traceability needs.

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