HIGH DESERT HEALTH SYSTEM
AMBULATORY SURGICAL CENTER

SUBJECT: V-115 G.I. ENDOSCOPES, USE & CARE	**POLICY #**: 1240
	VERSION: 1
APPROVED BY: ASC Approvers	
DATE APPROVED: 06/28/2016	

PURPOSE: To provide guidelines to assist personnel with the cleaning, decontamination, maintenance, handling, storage and sterilization of G.I. endoscopes, and related accessories.

POLICY: Endoscopes and related instrumentation are to be inspected, tested, used and processed according to following procedure which includes the manufacturer's instructions.

PROCEDURE:

1. Inspect endoscopes and related instrumentation for cleanliness, proper functioning and defects during the following:
    a. Prior to use
    b. During the procedure
    c. Immediately after use
    d. Prior to cleaning
    e. After rinsing
    f. After drying
    g. Prior to disinfection/sterilization
    h. Prior to storage
2. A pressure leak test will be performed after each use.
    a. Check video processor cap; make sure it is on securely.
    b. Perform a dry leak test first, for a minimum of 30 seconds
    c. Remove suction, air/water control buttons, and biopsy channel cap.

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d. Connect leak tester to the air vent on the light guide body. Inflate the leak tester until the needle reaches the middle of the green zone, and no further. Watch for drop in pressure as knobs are turned, bending the tip. If any drop in pressure, DO NOT immerse in cleaning solution. Keeping pressure up, manually clean outside of scope, place in red bag and then suitcase for shipment to repair facility. Leave leak tester in place and inflated.

e. Submerge the scope totally in the sink full of water and enzymatic cleaner (1/2 oz of enzymatic cleaner per gallon of water to equal five gallons of solution). Flex the tip of the scope, up and down, then left and right to expose any leaks in the bending rubber. Check to see if the arrow on the leak tester has moved.

f. Soak for two minutes while continuing leak test.

g. If no leaks are found, continue on to cleaning sterilization.

h. If a leak is discovered, while maintaining pressure on the leak tester, remove the scope from water, and dry the outside of the scope. Using syringe with air only carefully purge any liquid from channels. Place in red bag and then suitcase for shipping to repair facility.

i. If a leak is discovered, immediately notify the Nursing Director or designee.

3. Cleaning of the endoscope

a. Clean all valves with small brush and inspect O-rings.

b. Wipe off the outside of the scope with a sponge soaked in enzymatic cleaner. Paying attention to crevices and the opening at the distal end.

c. Run the blue end of cleaning brush through the port till it comes out the other end and then pulling the rest of the way out. Do this for all ports; beginning with the suction post on the light guide end. Brush all applicable ports at least two times or until clean. Attach adaptors, and flush with 60 ml of clean endozyme solution, through all ports until scope rinses clean.

d. Place an empty sink and flush all ports with clean tap water several times, then rinse outside of scope well. Place all valves in Steris machine.

e. Using a 60 ml syringe purge all fluids from scope. Remove adapters.

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f. Place in Steris High Level Disinfectant unit, connect with proper cleaning adapter and start machine. See Steris Operators Manual for instructions.

4. After high level disinfectant and prior to storage, all endoscopes with internal channels and lumens must be flushed thoroughly with 70% alcohol. After completely dry, all GI scopes will be hung in the Scope Closet OR Sterile Core. Prior to storing in the GI Closet remove control buttons, remove caps from the biopsy channels, and from the electrical connector to aid in the drying process.

5. Personnel processing endoscopes must receive device specific processing instructions to insure proper cleaning and sterilization.

6. Sterile water will be sued to fill the irrigation bottles.

7. Personal protective equipment (gloves, eyewear, covergown, etc.) will be readily available and will be used to protect workers from exposure to biologic and chemical agents. All personnel must be educated about the hazards present while performing or assisting at endoscopic procedures and during the reprocessing of endoscopic equipment. A spill containment plan specific for the liquid chemical sterilant being used will be available whenever and wherever endoscopic reprocessing occurs.

8. Chemical test strip will be used with every load to insure minimal effective concentration of the active ingredient.

9. Surgery personnel will demonstrate competency annually, regarding the appropriate handling, inspection, testing, use, and processing on endoscopes and related equipment.

10. The following information will be documented on the Steris printout paper:

    a. Serial number of endoscope

    b. Person processing endoscope

    c. Results of inspection process

    d. Leak test results

DOCUMENTATION

Documentation of endoscopic procedures and processing information will be maintained.

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1. The permanent record is to contain the following information:
    a. Persons providing patient care
    b. Medications, irrigations, solutions administered
    c. Specimen and cultures taken during the procedure
    d. Patient name
    e. Medical record number
    f. Date and time of procedure
    g. Diagnosis
    h. Physician
    i. Identification number of the scope

REFERENCES:

Pentax GI Video Endoscopes Operators Manual

AORN Perioperative Standards and Recommended Practices 2014

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