

**OLIVE VIEW-UCLA MEDICAL CENTER
POLICY & PROCEDURE**

NUMBER: 11401

VERSION: 1

SUBJECT/TITLE: TRANSPORTING- CONTAMINATED INSTRUMENTS FROM NON-OR AREAS TO CENTRAL STERILE PROCESSING

POLICY: Per the Association for the Advancement of Medical Instrumentation (AAMI) standards, definitive cleaning of contaminated instruments should occur after immediate use - to prevent the formation of biofilm. Containers, used for transport, should be marked with a biohazard label or by other means of identifying contaminated contents. Transportation to Central Sterile Processing should occur as soon as possible.

Only staff trained in the transportation of contaminated instruments may perform the procedure.

PURPOSE:

- To provide criteria and guidelines/procedures for transporting contaminated instruments from non-OR areas to where they will be decontaminated.
- To prevent blood and body fluids on contaminated instruments from coming in contact with personnel, corridors, and other areas during transport.

DEPARTMENTS: Non-Operating Room Area (Non-OR), Central Sterile Processing (CS)

GUIDELINES:

A. Cleaning

1. Sterile instruments used in procedures outside the OR must have visible debris removed.
2. Employees must wear appropriate Personal Protective Equipment (PPE) and follow Infection Control practices when handling contaminated instruments.
3. A disposable sponge moistened with water (not saline) will be used to wipe visible debris from instruments. Be careful not to splash.
4. To minimize the formation of bacteria, an enzymatic cleaner will be used.

B. Containment

1. Contaminated items should be contained during their transport from the point of use to the decontamination area.
2. Containers, devices, or carts must be marked with a biohazard label.
3. Puncture resistant, leak-proof, closed containers must be used.
4. Items should be moist, but not soaked.

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C. Transportation

1. The pick-up and transportation of soiled items should be scheduled so that the items are transported and cleaned as soon as possible.
2. Central Sterile will provide scheduled and as needed pick up to all areas.

PROCEDURE:

A. Preparation for Transportation and Decontamination from Non-OR areas

1. Immediately after a procedure, while at the patient's bedside, treatment room or examination room, the trained staff will:
 - a. Don gloves
 - b. Place the contaminated equipment in a closed, leak resistant, biohazard labeled container/cart; or in a biohazard instrument humidity pack*
 - c. Remove dirty gloves, Perform hand hygiene, don clean gloves
 - d. Transport the container/cart immediately to the Dirty Utility Room
2. In the Dirty Utility Room, trained staff will:
 - a. Don PPE (gown, face shield/goggles, and mask)
 - b. Remove visible debris with a disposable sponge moistened with water (**not saline**)
 - c. Spray the instruments with designated enzymatic cleanser
 - d. Place the lid on the container, making sure it has a biohazard label attached to it
3. Pick-Up/Transport to CS:
 - a. CS staff will pick up containers with contaminated instruments from the non-OR Dirty Utility Room twice a day and will provide a clean container for future use
 - b. Unit staff will transport biohazard containers to CS that are remaining after the second pick up **or** if the instruments are immediately needed
 - c. *If a biohazard humidity pack is used, it will be transported by area staff immediately to CS

B. Receipt of Contaminated Containers by the Central Services

4. Once a container with contaminated instruments is received in Central Sterile Processing:
 - a. CS staff will remove the contaminated instruments from the container and proceed with the CS policy and procedures for decontamination/sterilization.
 - b. If non-OR staff have transported contaminated instruments to CS, the CS staff will provide a clean container.

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References: AAMI, Consolidated Text 2014 – <i>Handling, Collection, and Transport of Contaminated Items: 6.3, 6.4, 6.5</i> , pgs 47-49.	
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