Contaminated devices should be contained from the point of use to the decontamination area, requiring direct access to the area through corridors or dedicated dumb waiters or elevators.

The first step in reprocessing a device after use is cleaning. Failure to properly clean an instrument may result in foreign material preventing the disinfection and/or sterilization process from working properly .

If a device is still soiled after cleaning, do you sterilize it? Why?

No, because you can’t sterilize dirty items, they have to be clean.

Floors and walls in the decontamination area should be made out of materials that can tolerate harsh chemicals. Walls should not be constructed of particulate or fiber-shedding materials. Spills or splashes are a common occurrence in the decontamination area , and this can create a need for frequent cleaning/disinfecting.

The ventilation system in decontamination should allow for no less than 10 air exchanges per hour. The temperature should be between 60 degrees F and 65 degrees F. The relative humidity should range from 30% to 60%.

Why should the temperature in decontamination be low?

Helps inhibit the growth of microorganisms, and the PPE worn in Decontamination is hot.

Lighting in Decontamination should be adequate for detailed cleaning and inspection.

Traffic should be restricted to personnel working in the area, and access to the area should be controlled. Emergency eyewash/shower equipment should be placed so that they are within 10 seconds or 30 meters of potential chemical exposure.

Why should special attention be given to the cleaning procedures in Decontamination?

There is a high microbial count in Decontamination and it’s the central point of handling contaminated devices.

Examples of these procedures include:

Horizontal work surfaces should be: cleaned and disinfected at the beginning and end of each shift.

Spills should be: spot cleaned immediately

Floors should be: cleaned and disinfected daily.

Tools such as mops used in this area should not be used in other areas of the department.

Since CS Techs don’t know the origin of contamination, they must assume that every item received in decontamination area can pose a potential risk.

If PPE becomes soaked with blood or other potentially infectious material and/or gloves become nicked or torn should be discarded immediately.

Jewelry should not be worn because it harbors bacteria. Since acrylic nails can support the growth of microorganisms, they should not be permitted. Food or drinks should NEVER enter the decontamination area.

Whenever CS Techs complete tasks, remove PPE, or move from one area to another, they should wash their hands because this is the most important step in preventing nosocomial infections. A separate sink for hand washing should be in the decontamination area, and it should be separated from sinks used to sort and prepare instruments for processing.

Due to Standard Precautions procedures, CS Techs should consider all items entering the area as contaminated.

Before a new staff member is assigned to the Decontamination area, he/she must receive a thorough and comprehensive orienatation.

What are Chelating Agents?

Chemical that hold hard water minerals and solution and prevent soaps and detergents from reacting with the minerals.

Effective chelating agents are:

1. non-abrasive

2. low-foaming

3. free-rinsing (completely removed with proper rinsing)

4. biodegradable

5. allow for rapid soil dispersion (get rid of or move soil quickly)

6. non-toxic

7. effective on all types of soil

8. have a long shelf life

9. cost effective

10. can be monitored for effective concentration and useful life.

The presence of chelating agents or sequestering agents helps minimize the formulation of insoluble deposits and prevents instrument spotting and scaling.

Detergent with a pH of 0-6 is acidic where a pH of 8-14 is alkalyne. Examples of acidity: vinegar and lemon juice . Example of alkalinity: soap. For most cleaning application, a neutral or mildly alkaline pH detergents are preferred.

What do the following enzymes do:

Protease: break down blood, mucous, feces, albumin(protein)

Lipase- break down fatty deposits, such as bone marrow and adipose tissue.

Amylase Catalyzes changes in starch