



Ambulatory Clinic Policy and Procedure

Title:	Sterilization Procedures, Autoclaves	Policy Number:	7.10
		Version Number	3
Regulation Reference:	CDC	10/2010	12/2015
		Original Approval:	3/1996

POLICY STATEMENT:

It is the policy of Texas Tech University Health Science Center (TTUHSC) Ambulatory Clinics to prepare items for sterilization using the steam autoclave in accordance with accepted Infection Control and Prevention guidelines.

SCOPE:

This policy applies to all TTUHSC Ambulatory clinics operated through its schools.

PROCEDURE:

1. Autoclaves:

- a. Autoclaves shall have scheduled preventive maintenance as per manufacturers’ recommendations. Documentation of preventive maintenance shall be maintained by the department where the autoclave is located. Cleaning and routine maintenance of autoclaves shall comply with manufacturer’s recommendations and be documented.
- b. Autoclaves used daily should be monitored with biological testing for live spores on a weekly basis. Autoclaves that are used occasionally should be monitored once a month in the same way. Results are to be recorded and maintained by the department with the autoclaves.
- c. All personnel operating the autoclaves must receive proper training on its operation, cleaning, and maintenance from their supervisor or a designee.

2. Instruments:

- a. All items to be processed by steam sterilization should be handled, cleaned, disinfected, packaged, tested and sterilized per manufacturer’s recommendations. To obtain manufacturers’ guidelines for various instruments, check www.onesourcedoc.com or contact the manufacturer directly.
- b. Soiled instruments must be washed in a soiled utility area to prevent splattering or contaminating clean supplies or areas. Appropriate Personal Protective Equipment (PPE) should be worn including face shield, impermeable gown and gloves
- c. Items must be placed into approved wrappers or bags with heat sensitive autoclave strips or indicators. Test strips are used to document that proper temperature was achieved to assure sterilization.
- d. All hinged instruments are to be placed into wrappers prior to autoclaving in a fully open position.
- e. Log all load items with a load number, time, and date. Load number, time, date and temperature are required to enable the recall of items if temperature or weekly/monthly biological testing so indicates.
- f. Items from autoclave must be cooled for a sufficient length of time to prevent injury or burn to personnel
- g. All personnel engaged in preparation of items to be sterilized must have training by their supervisor

or a designee. Personnel training records/competency validation documentation for those persons involved in instrument processing will be maintained in each clinic that has an autoclave.

APPROVAL AUTHORITY:

This policy shall be recommended for approval by the Joint Ambulatory Policy Committee to the Council of Deans.

RESPONSIBILITY AND REVISIONS:

It is the responsibility of the Joint Ambulatory Policy Committee to review and initiate necessary revisions based on collaboration and input by and through Quality Improvement/Performance Improvement, Risk Management and the Office of Institutional Compliance.

Right To Change Policy:

TTUHSC reserves the right to interpret, change, modify, amend or rescind this policy in whole or in part at any time to reflect changes in policy and/or law.

CERTIFICATION:

This policy was approved by the Council of Deans on December 3, 2015.