THE NURSE'S RESPONSIBILITY OF THE CMS (CENTRAL OF MATERIAL AND STERILIZATION) IN THE VALIDATION OF AUTOCLAVES, CHALLENGE OF THE LOADS AND IN CHOICE OF THE SUPPLIES.

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INTRODUCTION

For autoclaves validation is necessary to show by documentary evidence that the autoclave leads to the expected result according to NBR ISO 11134 technical norms, the metrological action to collect data time, temperature and pressure to document the sterilization cycles held by a specialized company.

OBJECTIVE

The objective is to recognize the role of nurses in the steps of the steam sterilization validation and its variables.

MATERIALS

Were selected necessary supplies for the procedure (surgical grade packaging and SMS, Class V and VI integrators, Bowie & Dick test, and packages biological challenges). Choice based according to RDC 15 (ANVISA Boarding Resolution), national and international recommendations. Load tests were prepared which simulated the actual daily conditions.

METHOD

Experience report as descriptive and qualitative tool of the nurse's role in the validation steps.

RESULTS

The nurse's role during validation is to control important variables in different times: before validation (assessment of the manufacturer and analysis of the water report); during validation (choice of loads representatives of reality, choice of packaging, load preparation, loading layout, choice of process indicators); and after sterilization (analysis of the material to search for water condensation and suggestive marks on packaging, process indicators and analysis of the sterilization report).

DISCUSSION

Each of the variables of the validation process, mentioned above, can influence the metrological result, affecting the penetration of steam and / or drying as well as in day-to-day, increase the risk of deviations in the reproduction process. The presence of the nurse during validation revealed this institution, for example, accurate observation showed negative results of chemical indicators; improper assembly of mixed load (container when placed in the upper part of the autoclave present water condensation, when in the upper was built with materials packed in surgical grade); presence of the droplets in surgical grade in the trachea inhaled load sterilization. In addition, the evaluation of the nurse advised to need for programming of three different cycles (Inhaled 121°C/30'; Mixed Load 134ºC/5' containers, sundry instruments, anesthetic circuit, surgical drapes packed in SMS; Prion 134ºC/18' in container)

CONCLUSION

It is fundamental to know every step of the autoclave validation and identify the parameters for release cycles. The nurse must act before, during and after validation to reduce the critical variables, reducing risks and variations in the reproduction of programmed cycles in day-to-day.

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