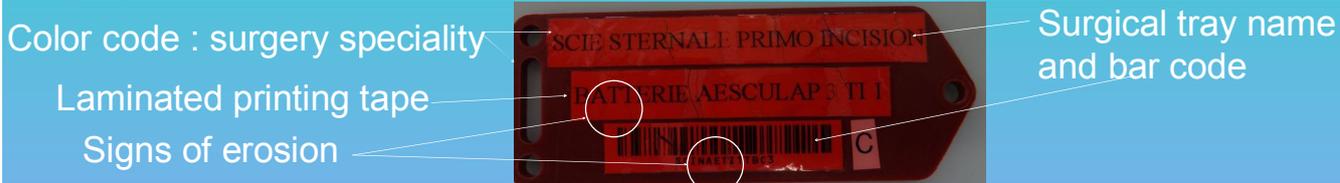


Comparison between laminated and non-laminated printing tape to identify surgical trays

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Introduction

In order to identify and trace surgical trays, we use descriptive plates with bar code. Sterilization containers are identified by the same method. We see signs of erosion of laminated ribbon after few sterilization cycles. As a consequence, a piece of ribbon may fall into the patient and remote infection. Erosion makes bar code illegible. Often production referent have to redo descriptive plate, it takes many time each day.



Materials and Methods

An accelerated ageing test was performed to compare laminated and non-laminated printing tape. 16 descriptive plates were created :

- 8 were identified with a laminated ribbon
- 8 were identified by a non-laminated ribbon.

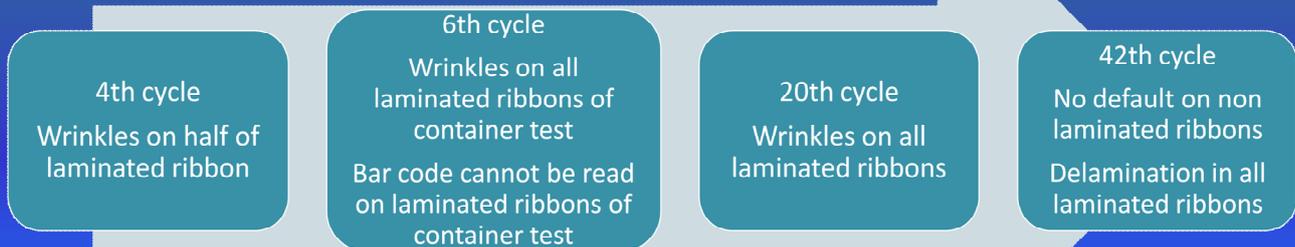


Descriptive plates were placed on a surgical tray test in multiple locations. 2 laminated and 2 non-laminated ribbons were placed on a sterilization container test.

The surgical tray test and the sterilization container test followed the sterilization process (washer-disinfector + autoclave sterilization). At the end of each cycle, the ribbon was evaluated according to:

- state of the ribbon,
- presence of wrinkles
- readability of the bar code.

Results and discussion :



We observe that frictions delete inscriptions on non laminated ribbon. Frictions should be avoided before first passage in sterilization process. This technique for identifying surgical tray let us independant and it has a lower cost than engraving. There is no difference between the two kind of printing tape on descriptive plates. However, non laminated ribbons resist more than laminated ribbons. But only white non laminated printing tape exists, color code of surgery speciality cannot be respected if using them.

Conclusion :

White non laminated printing tape is now used for bar code and container identification. Due to color code, surgical trays are identified by laminated ribbon