“MONITORING OF PHYSICAL AND CHEMICAL STERILIZATION PROCESS AS GOOD PRACTICES FOR PATIENT SAFETY - EXPERIENCE REPORT.”

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Introduction: Considering the complexity of a Center of Material and Sterilization, this report has as main objective to show the importance of the daily monitoring sterilization through physical, chemical and biological indicators as soon as to emphasize the importance of autoclaves preventive and corrective maintenance inside the monitoring process, once failure on this aspects will increase infection risk and reduce patient safety.

Materials and method: This script is based on the experience of nurses from a public hospital, who work on the materials and sterilization central unit. According with the resolution 15 from march/15/2012,wich establishes the good practices requirements for processing health products, daily this team realizes empty load tests in all autoclaves using the Chemical Indicator Class II (Bowie Dick).In other to test surgical boxes the chemical indicator Class IV or V is used. This indicator is putted inside the boxes, in the external package the chemical indicator Class I is fixed. Only after the negative reading of the biological indicator the materials will be ready to use. Besides, all physical parameters must be monitored, noted and stored on the hospital database for five years. As a preventive maintenance, monthly, the CMS supervisor and engineering team check the functionality of all mechanical equipments.

Results: Following the results of the method described above, the CMS Supervisor is able to verify the quality of all sterilization monitoring process. For example, after the analysis of non compliance report between 2013 and 2014, the CMS Supervisor was informed that ten incorrect chemical indicators monitoring were done. Still based on the resolution 15, the CMS team members who did the wrong monitoring received an individual training of the monitoring method. As a result, after the re-evaluation at 2015, the CMS supervisor did not receive any non compliance report until April.

Discussion: The CMS Nurse has the responsibility for the sterilization monitoring process execution. So, the team is oriented to use the chemical and biological indicators, once a failure on the monitoring will spoil the sterilization quality, representing serious risk to the population.

Conclusion: Based on this report, we can conclude that continuing education and sterilization daily monitoring is a way to reduce the patient risks and to contribute with safety practices.

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