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PROCEDURE FOR BORROWING AN DUODENDOSCOPE OR AN ENDOSCOPE FROM ANOTHER HOSPITAL OR ENDOSCOPE SUPPLIER **Version Number Date of Issue** January 2020 **Reference Number** PBDEAHES-01-2020-MMcG-MS-NC-V1 **Review Interval** 3 yearly **Approved By** Signature :: Name: Seamus Hussey Title: Chairperson Endoscopy Committee Date: 1 / 3 / 2020 8worbs **Authorised By** Signature: Name: Sandra Morton Title: Clinical Nurse Manager 3 Date: 14/2/2020 Author/s Mary Scully, Clinical Nurse Manager II

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Niamh Clohessy, Theatre Quality Improvement Facilitator

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1.0 Introduction

CHI Crumlin's Operating Theatre Department is committed to best practice in the prevention of infection when borrowing an endoscope (Reusable Invasive Medical Devices (RIMD)) from another hospital or endoscope supplier.

2.0 Definition of Standard Operating Procedure

The term 'Standard Operating Procedure' is a way of carrying out a particular course of action and includes operations, investigations, pharmaceutical treatment examination and any other treatment carried out.

3.0 Applicable to

The Standard Operating Procedure is applicable to all relevant medical, nursing, Endoscopy HCA's and clinical engineering staff involved in the reprocessing and management of endoscopes.

4.0 Objectives of the Standard Operating Procedure

The objectives of this standard operating procedure is to provide specific instruction for all staff when borrowing, decontaminating, using, tracing and returning an endoscope or duodenoscope to the loaning hospital or an endoscopy supplier.

5.0 Definition / Terms

- Reusable Invasive Medical Devices (RIMDs); any device which in whole or part penetrates inside the body either through a body orifice or through skin surface is invasive. Flexible endoscopes are classified as "semi-critical" i.e. an item in contact with mucus membrane or non-intact skin, sterilisation preferred but at a minimum requires high level disinfection.
- **Borrower**; in the context of this document the borrower refers to the hospital that borrows a RIMD from another hospital or endoscope supplier.
- Supplier; a company or an organization who supplies RIMDs on loan or trial to a hospital.
- Loaning Register; a loaning register must be held by the lender to record details of patients on whom RIMDs have been used to ensure full traceability.
- **Cleaning**; in this context is the process that physically removes soiling including large numbers of microorganisms and the organic material on which they thrive.
- **Decontamination**; this is the combination of processes including cleaning and high level disinfection and sterilization used to render the RIMD safe for handling by staff and for use on the service users. Effective decontamination of RIMDs is an essential component in the prevention of healthcare associated infections.
- **High Level Disinfection**; this is defined as complete elimination of all microorganisms in or on an instrument, except for small numbers of bacterial spores.
- Endoscope Washer Disinfector (EWD); this describes a machine that is used to deliver a high level of cleaning and decontamination of endoscopes that incorporates a number of cycles from pre rinsing to washing to rinsing to drying with chemo thermal disinfection.
- **Duodenoscopes**; a long flexible lighted endoscope that is inserted through the mouth passing through the stomach into the duodenum and they are used for ERCP procedures. These contain a movable "elevator" mechanism at its tip. The purpose of the "elevator" is to adjust the tip positioning of the instruments carried through the tube.
- Endoscopic Retrograde Cholangiopancreatography (ERCP); this is defined as a diagnostic procedure used to examine and treat diseases of the liver bile ducts and pancreas.

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6.0 Procedure

- **6.1** Endoscopes are routinely sent out for service every 6 months (Olympus). To cover the Theatre Department needs, a borrowed endoscope must be secured from the relevant company i.e. a neonatal endoscope or colonoscope.
 - 6.1.1 The Endoscopy CNM II or the Endoscopy HCA will organize the borrowing of the required from the relevant company (Keymed Olympus).
 - 6.1.2 The CNM I / II or senior staff documents the contact name and number for follow up in the Endoscope Tracking Record Folder (kept in the Endoscopy decontamination room, drawer 2).
 - 6.1.3 Upon arrival and receipt of the borrowed Endoscope, all documentation & decontamination certificate is checked that is relevant to this borrowed Endoscope.
 - 6.1.4 A unique barcode will be applied by Clinical Engineering and this barcode number is written on the documentation and is also recorded on the Endoscope Tracking Record Folder.
 - 6.1.5 The borrowed Endoscope will be returned once the CHI Crumlin's Endoscope has been returned from service.
 - 6.1.6 The company is phoned (Keymed for Olympus) and informed that their borrowed Endoscope is now ready for collection. The contact name is documented in the Endoscopy Tracking Record Folder, dated and signed by sender.
 - 6.1.7 The Endoscope is wrapped and packed securely in its rigid suitcase, the relevant documentation form (See Appendix 2) decontamination certificate is returned with same. The suitcase is locked and the outside is covered in a plastic cover and the attached sticker "Used Medical Device" is applied to the suitcase. The suitcase is left at Theatre Reception for collection.
- **6.2** Borrowing a Duodenoscope for ERCP. ERCP is booked as per booking protocol by the GI Consultant and the CNM I / II or senior nurses will organize the borrowing of the duodenoscope as advised by the GI Consultant (from the relevant Endoscope supplier or hospital).
- **6.3** The CNM I / II is responsible for contacting the relevant hospital or the Endoscopy supplier via telephone requesting to borrow the duodenoscope along with the decontamination cert, manufacturer's processing instructions, tray content list with product code and specific cleaning brushes.
- **6.4** If borrowing a **new** duodenoscope from the Endoscope supplier, this requires documentation verifying that this duodenoscope has **not** been used on a patient.
- **6.5** The CNM I / II or senior staff nurse documents the contact name and telephone number for follow up and is recorded in the Endoscope Tracking Record Folder (kept in the Endoscopy decontamination room, drawer 2) and ensures all necessary accessories for use are included (See Appendix 1).
- **6.6** Upon arrival and receipt of the borrowed duodenoscope, all the necessary information, equipment and documentation is checked and the serial number and type of duodenoscope is recorded in the Endoscope Tracking Record Folder.
- 6.7 The borrowed duodenoscope is then unwrapped from its packaging paying particular attention to its integrity and reporting immediately any imperforations or faults that may be detected to the loaning hospital or Endoscopy supplier and the operating GI Consultant. This may indicate damage that occurred during the moving and handling while being delivered. If a fault is noted, this will be recorded in the Endoscopy Tracking Record Folder and an incident form will be filled out.
- **6.8** All duodenoscopes borrowed from outside CHI Crumlin's Operating Theatre department must be identified with a unique barcode applied by Clinical Engineering or EWD supplier prior to decontamination in the EWD (Wassenburg washer disinfector). The clinical engineer checks the number of channels and ensures that they can all be connected to the EWD (there is a 7th

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channel connection for the Olympus duodenoscope. This 7th channel connector is kept in the decontamination room press 2).

- **6.9** Once everything is in order the CNM I / II or senior staff nurse will delegate and assist to either a staff nurse or an Endoscopy health care assistant to proceed with the decontamination process of the borrowed duodenoscope using in the EWD (Wassenburg washer disinfector) in accordance with hospital policy (Refer to SOP "Attire to be worn when Processing Endoscopes" & the SOP for "Leak Test and Manual Cleaning of Olympus Gastroscope and Colonoscope Post Procedure" plus paying particular attention to the movable "elevator" at its tip that is unique to the duodenoscope.
- **6.10** Post disinfection, using sterile gloves the integrity, cleanliness of the duodenoscope is inspected, the duodenoscope is then placed in a rigid box lined with clean-a-scope tray liner and covered with the green cover. This duodenoscope **must be used within three hours post disinfection time** (Refer to "SOP Loading and Unloading Endoscopes from the Extended Storage Cabinet").
- **6.11** The traceability printout is checked and is recorded in the patient's healthcare record and the Endoscopy Traceability book as per SOP "Flexible Endoscope Traceability".
- **6.12** Post procedure, the duodenoscope is immediately flushed and wiped down with detergent, by the operating GI Consultant. The nurse places the used duodenoscope into the rigid box and covers it with a red clean-a-scope tray liner, indicating that it is contaminated.
- 6.13 The duodenoscope is then taken to the Endoscopy Decontamination room where the nursing staff or Endoscopy health care assistant manually leak tests and cleans the used duodenoscope as per SOP "Leak Test & Manual Cleaning of Olympus Gastroscope and Colonoscope Post Procedure" plus pay particular attention to the movable "elevator" that is unique to the duodenoscope before being placed in the EWD (Wassenburg washer disinfector) for a high level of decontamination.
- **6.14** After decontamination the borrowed duodenoscope must be wrapped and packed securely along with the valid decontamination certificate and the EWD printout, which is then returned to the supplier / relevant hospital.
- **6.15** Once the borrowed duodenoscope has been returned to the lending hospital or the endoscopy supplier the nurse and or Endoscopy health care assistant records this information including the date, the time and the contact name into the Endoscope Tracking Record Folder (Log Book Appendix 1).
- **6.16** In the event of the patient having an infection control alert, the patient's medical record number is included in the information that is returned to the loaner.

7.0 Health and Safety

- **7.1** All equipment must be appropriately decontaminated for the purpose of which it is being used and staff must ensure that standards are maintained at all times in accordance with hospital policy.
- **7.2** Standard precautions apply for all patients at all times in all clinical settings. Transmission based precautions apply when there is a known or suspected risk of infection.
- **7.3** From a patient safety perspective unnecessary borrowing of RIMDs should be strongly discouraged in line with hospital policy.
- **7.4** Primary focus is patient safety. No medical, nursing or health care assistant staff can assume that a borrowed Endoscope (RIMD) is fit for purpose unless it is checked thoroughly, cleaned, decontaminated and reprocessed as per CHI Crumlin's hospital policy.

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8.0 References

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9.0 Appendices

Appendix 1

Log Book

Details of all Endoscopes which are borrowed from other institutions should be entered into a log book detailing:

- Name and description of the Endoscopes;
- Endoscopes identification / serial numbers (s);
- Names of the person to whom the Endoscopes is being borrowed from;
- Identify of the person who is making the request;
- Date of request;
- Expected date of return;
- Confirmation that the relevant supporting documentation required to track reprocess and use the Endoscopes have been received and are available to all person departments requirement that information;
- The unique identifier permitting traceability of the decontamination cycle (s) for the Endoscopes prior to use. Global Standard 1 (GS1) GIAI code;
- The unique identifier permitting traceability of the decontamination cycle (s) for Endoscopes after use:
- Confirmation that the owning institution has appropriate systems in place to maintain an effective borrowing history for the Endoscopes.

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INSTRUCTIONS FOR THE RETURN OF OLYMPUS ENDOSCOPES (INCLUDING NON-DISINFECTED INSTRUMENTS)



- Complete the equipment return form shown on the left.
- Place the endoscope inside the carrying case, taking care that the instrument fits into the case cut outs. If you experience problems, check that you are using the correct carrying case as each model of endoscope has different case inserts – for non-disinfected instruments, see step 7.
- Before closing the case, ensure that the necessary paperwork is enclosed, ie official order (for those instruments not covered by warranty or service contract), declaration of decontamination status form, covering letter etc.
- The carrying case must be locked; NO CLAIMS for missing items from unlocked cases will be accepted. Please retain your key as we have master keys at Olympus to open your case on arrival.
- Place the locked carrying case in the transport bag. Seal using the adhesive strips as shown on the right.





6. Arrange for collection of the equipment by courier in the normal way.

PROCEDURE FOR NON-DISINFECTED ENDOSCOPES



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 Follow the instructions on the bag containing the protective plastic sheet for non-disinfected Olympus endoscopes

KME 4347

If you have any queries regarding any information detailed above, please contact

Technical Services Helpdesk on 01-4260100