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	Effective Date:	07-15-2022
	Document Type:	Policy
	Page Number:	1 of 6
	Department/Section:	Sterilization and Reprocessing Unit
	Document Title:	STORAGE POLICY

PURPOSE:

1. To ensure proper storage of all sterilized instruments, equipment and devices
2. To check and maintain the sterility of the instruments to the point-of-use or distribution.
3. To monitor and document all sterile instruments.

LEVEL:

Sterilization and Reprocessing Unit

DEFINITION OF TERMS:

Event-related Shelf Life- based on the principle that specific events, not time, are responsible for sterile products becoming contaminated.


Inventory Clerk- keeps track of the supplies and manages orders to facilitate production of services.

Shelf life- is defined as the time, under defined storage conditions, during which instruments remains safe to use.


Time-related Shelf Life- period of time during which sterility is presumed to be maintained.

POLICY:


1. The SRU shall have a designated area for the storage of all sterilized medical devices, equipment and instruments to avoid contamination.
 - 1.1. The area should be large enough to prevent crushing or damage to packages. In addition, it should be protected from moisture contamination, dust from adjacent areas and ventilation systems, and vermin.

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- 1.2. The use of closed shelves may help with storage of devices and equipment, in particular those that are infrequently used. However, if open shelves are used, devices shall be stored away from the floor, ceiling, window sills, sinks, and outside wall.
 - 1.3. Sterile supplies should be stored far enough from the floor (8 to 10 inches), the ceiling (5 inches unless near a sprinkler head [18 inches from sprinkler head]), and the outside walls (2 inches) to allow for adequate air circulation, ease of cleaning, and compliance with local fire codes (e.g., supplies must be at least 18 inches from sprinkler heads)¹.
2. The sterile storage area shall be a limited access area. Access shall be limited to specific staff to avoid contamination.
 - 2.1. In cleaning the sterile storage area, staff should minimize the amount of air turbulence, and excess moisture.
 - 2.2. Select damp, rather than dry cleaning cloth. Dusting or sweeping is performed whenever possible. Dry cleaning should be done carefully with a chemically treated dry mop or a vacuum cleaner equipped with an exhaust filter, rather than a broom.
 3. SRU shall maintain the integrity of each sterile package.
 - 3.1. Items that have been properly decontaminated, wrapped, sterilized, stored, and handled will remain sterile indefinitely, unless the integrity of the package is compromised.
 - 3.2. The integrity of the package is based on: the type of wrapper used; the method of sealing the package; the type of shelving used, including open or closed; the method and frequency of handling; the method, frequency, and conditions of transportation; the environmental conditions of the storage area, (e.g. temperature, humidity, ventilation, cleanliness; and, control and monitoring of access to storage areas).

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4. Wrapped packages of sterilized instruments shall be inspected before opening and use to ensure that the packaging has not been compromised (i.e., wet, torn, or punctured) during storage.
5. SHELF LIFE: Safe storage times for sterile packs vary with the porosity of the wrapper and storage conditions (e.g., open versus closed cabinets). Heat-sealed, plastic peel-down pouches and wrapped packs sealed in 3-mil (3/1000 inch) polyethylene overwrap have been reported to be sterile for as long as 9 months after sterilization. The 3-mil polyethylene is applied after sterilization to extend the shelf life for infrequently used items. Supplies wrapped in double-thickness muslin comprising four layers, or equivalent, remain sterile for at least 30 days. Any item that has been sterilized should not be used after the expiration date has been exceeded or if the sterilized package is wet, torn, or punctured¹.
 - 5.1. Storage practices for wrapped sterilized instruments can be either date- or event-related.
 - a) Time-Related- mostly instruments processed from the sterilizer and expire after a month. Once it expires, instruments are reprocessed to maintain sterility.
 - b) Event-Related- instruments processed from the sterrad machine, once the package is damaged, dropped to the floor and has holes, abrasions, tears, cuts, moisture or soiled, instruments must be reprocessed.
 - 5.2. Apply First In, First Out Rule for distribution of the packages.
6. Package that is dropped to the floor or exposed to moisture and soil shall be reprocessed.
7. An inventory tool shall be used to monitor assets and supplies and regular inspection of the storage area.

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8. Temperature and humidity of the storage area shall be checked at the beginning of the shift. The storage area shall have a controlled temperature (may be as high as 23° C or 75°F) and relative humidity should not exceed 70%.
9. The Inventory Clerk shall check the functionality of the machine, inspect missing and lacking items, maintenance and replacement of damage devices and tools, request for restocks, instrument and tools costing and evaluation and purchasing.
10. SRU Head shall perform Spot Check Inventory and facilitate the annual inventory together with the clerk and the Surgical Complex Clerk.
11. All inventories shall be recorded and kept for three (3) years.

DOCUMENTATION:


New Policy

DISSEMINATION:

1. Hospital Policies
2. Hospital Communicator

REFERENCE:


¹*Sterilizing Practices | Disinfection & Sterilization Guidelines | Guidelines Library | Infection Control | CDC. (n.d.). CDC. Retrieved June 6, 2022, from <https://www.cdc.gov/infectioncontrol/guidelines/disinfection/sterilization/sterilizing-practices.html#:~:text=The%20sterile%20storage%20area%20should,should%20not%20exceed%2070%25>).*

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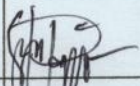
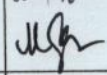
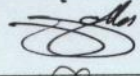
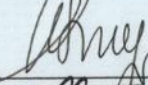

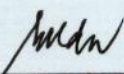


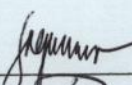
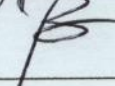
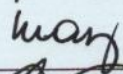
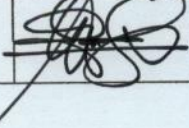
The Sterile Supply Departments Quick Guide Manual. (n.d.). Infection Control Directorate Ministry of Health-Kuwait. Retrieved May 29, 2022, from <http://www.icdkwt.com/pdf/policiesandguidelines/decontamination/guidelines-english.pdf>


World Health Organization. (2016). *Decontamination and Reprocessing of Medical Devices for Health-care Facilities.* Retrieved May 29, 2022, from <https://apps.who.int/iris/bitstream/handle/10665/250232/9789241549851-eng.pdf>

AST Education and Professional Standards Committee. (2009, April 16). *Standards of Practice for the Decontamination of Surgical Instruments.* AST. Retrieved March 30, 2022, from https://www.ast.org/uploadedFiles/Main_Site/Content/About_Us/Standard_Decontamination_%20Surgical_Instruments_.pdf

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APPROVAL:

	Name/Title	Signature	Date
Prepared by:	LEA MAY PANUGALING Sterilization and Reprocessing Unit Technician		7/7/22
	MELANIE MOJENO-SAN FRANCISCO, RN Surgical Suites Staff Nurse		7/7/22
Verified:	PAUL WILSON T. JALLA, RN Sterilization and Reprocessing Unit Head		7/7/22
	MARIA AGNES A. SARIOGO, RN, MN Surgical Complex Manager		7/7/22
	RICHARD S. MONTILIJAO, RN OIC Policy Development		7/7/22
	SHALAINA SOCORO L. DURAN, RN Nurse Manager for Operations		7/7/2022
	HANNAH KHAY S. TREYES, RN, MN Chief Nurse		07/07/2022
Reviewed:	DENNIS C. ESCALONA, MN, FPCHA, FPSQua Quality Assurance Supervisor		07/07/2022
Recommending Approval:	MARIA LIZA C. PERAREN, RN, MAN Nursing Service Division Head		7/7/22
	FREDERIC IVAN L. TING, MD OIC- Total Quality Division		7/8/22
	MA. ANTONIA GENSOLI, MD, FPPS, FPCHA Vice President- Chief Medical Officer		7-8-22
Approved:	GENESIS GOLDI D. GOLINGAN President and CEO		8/21/22

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PURPOSE:

1. To ensure proper storage of all sterilized instruments, equipment and devices
2. To *check and maintain the sterility of the instruments to the point-of-use or distribution.*
3. To monitor and document all sterile instruments.

SCOPE:


Applies to all Sterilization and Reprocessing Unit of Dr. Pablo O. Torre of Memorial Hospital

PERSON RESPONSIBLE:

Sterilization and Reprocessing Unit Technician, Inventory Clerk, SRU Head

PROCEDURE:

1. Limit access to the storage area.
2. Check the temperature and humidity of the storage area at the beginning of the shift. Ensure that they are within the recommended range.
3. Store the sterile items according to the guidelines stated in the policy.
4. Maintain the integrity of each sterile package.
5. Apply First In, First Out Rule for distribution of the packages.
6. Minimize the amount of air turbulence and excess moisture in cleaning the sterile storage area.
7. Inspect wrapped packages of sterilized instruments before releasing from the storage area to ensure that the packaging has not been compromised (i.e., wet, torn, or punctured) during storage.
8. Reprocess packages that are dropped to the floor or exposed to moisture and soil.
9. Use an inventory tool to monitor assets and supplies and do regular inspection of the storage area.

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10. Perform Spot Check Inventory and facilitate the annual inventory together with the clerk and the Surgical Complex Clerk.
11. Record all inventories and keep for three (3) years.


REFERENCE:

¹*Sterilizing Practices | Disinfection & Sterilization Guidelines | Guidelines Library | Infection Control | CDC.* (n.d.). CDC. Retrieved June 6, 2022, from <https://www.cdc.gov/infectioncontrol/guidelines/disinfection/sterilization/sterilizing-practices.html#:~:text=The%20sterile%20storage%20area%20should,should%20not%20exceed%2070%25>).


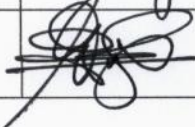
The Sterile Supply Departments Quick Guide Manual. (n.d.). Infection Control Directorate Ministry of Health-Kuwait. Retrieved May 29, 2022, from <http://www.icdkwt.com/pdf/policiesandguidelines/decontamination/guidelines-english.pdf>


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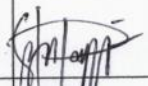
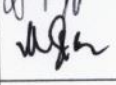
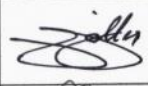





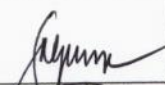

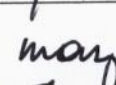
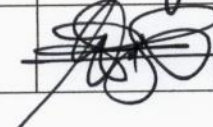
	Name/Title	Signature	Date
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	MELANIE MOJENO-SAN FRANCISCO, RN Surgical Suites Staff Nurse		7/7/22
Verified:	PAUL WILSON T. JALLA, RN Sterilization and Reprocessing Unit Head		7/7/22
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Reviewed:	DENNIS C. ESCALONA, MN, FPCHA, FPSQua Quality Assurance Supervisor		07/07/2022
Recommending Approval:	MARIA LIZA C. PERAREN, RN, MAN Nursing Service Division Head		7/7/22
	FREDERIC IVAN L. TING, MD OIC- Total Quality Division		7/8/22
	MA. ANTONIA GENSOLI, MD, FPPS, FPCHA Vice President- Chief Medical Officer		7.22.22
Approved:	GENESIS GOLDI D. GOLINGAN President and CEO		8/31/22

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KEY TASKS	PERSON RESPONSIBLE
1. Limits access to the storage area	SRU Head
2. Checks the temperature and humidity of the storage area at the beginning of the shift. Ensure that they are within the recommended range	SRU Technician
3. Stores the sterile items according to the guidelines	
4. Maintains the integrity of each sterile package	
5. Applies First In, First Out Rule for distribution of the packages	
6. Minimizes the amount of air turbulence and excess moisture in cleaning the sterile storage area	
7. Inspects the wrapped packages of sterilized instruments before releasing from the storage area to ensure that the packaging has not been compromised	
8. Reprocesses packages that are dropped to the floor or exposed to moisture and soil	Inventory Clerk
9. Uses an inventory tool to monitor assets and supplies and do regular inspection of the storage area	
10. Records all inventories and keep for three (3) years	SRU Technician

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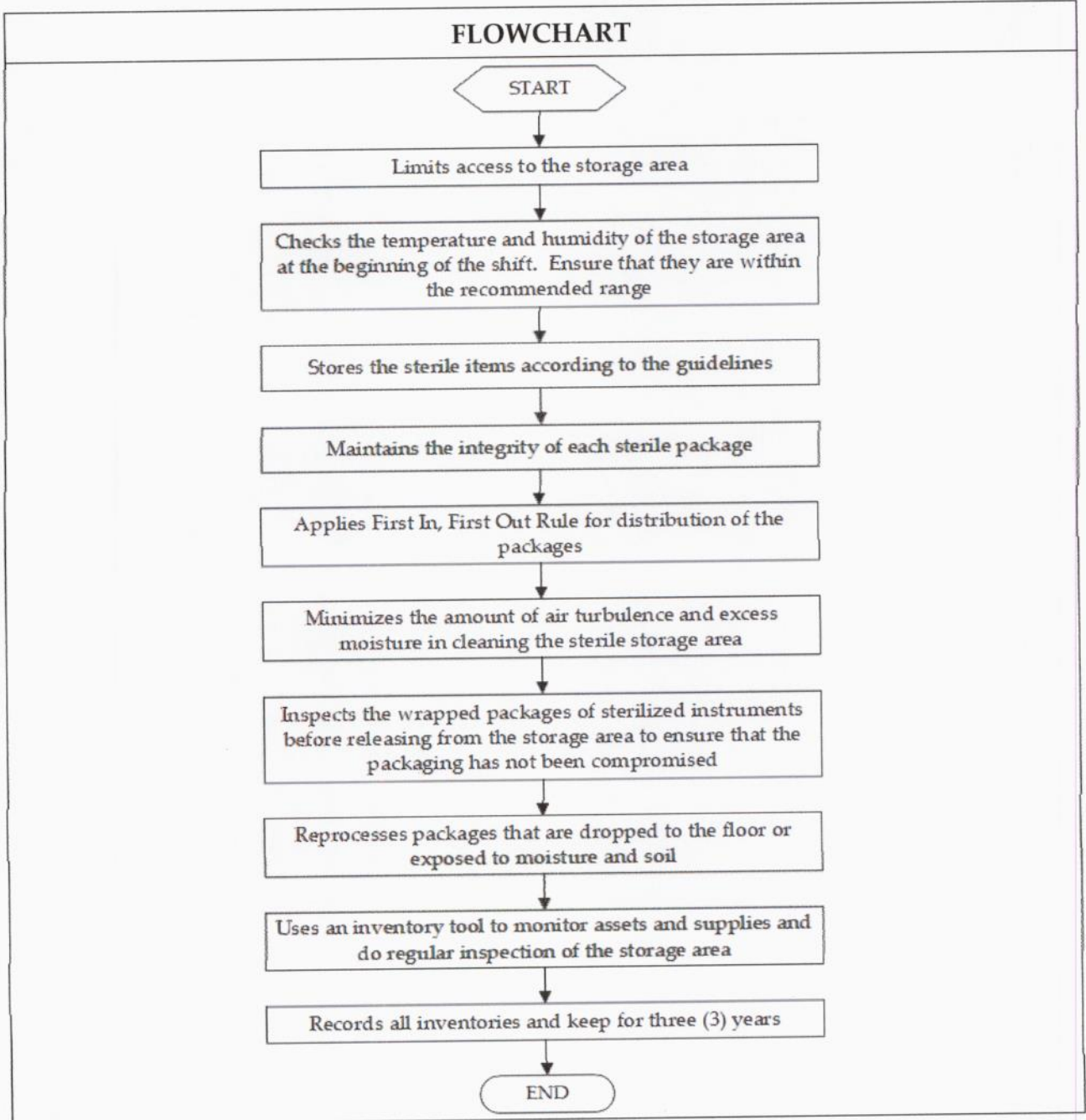



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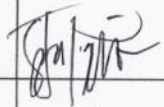
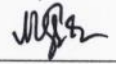

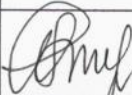

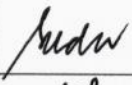




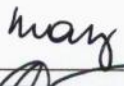
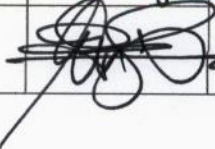
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FLOWCHART



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APPROVAL:

	Name/Title	Signature	Date
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	MELANIE MOJENO-SAN FRANCISCO, RN Surgical Suites Staff Nurse		7/7/22
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