# ENDOSCOPY MICROBIOLOGY ALERTS PROCEDURE
## STANDARD OPERATING PROCEDURE

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1.0 Introduction

This document outlines the Microbiology Alert procedures relating to the Endoscopy areas in Theatre and OPD

2.0 Definition of terms

SOP: The term ‘Standard Operating Procedure’ is a way of carrying out a particular course of action and includes operations, investigations, pharmaceutical treatment, examinations and any other treatment carried out.

AER: Automated Endoscope Reprocessor.

External Source: Any external microbiology notification from outside the hospital including notifications from the HSE or the Health Products Regulatory Authority (HPRA) or other international bodies / competent authorities.

3.0 Applicable to

This SOP is applicable to CNM1, CNM2 and HCA's in Endoscopy and CNM2 Theatre Coordinator and Laboratory and Infection Control staff.

4.0 Objectives of Standard Operating Procedure

To carry out microbiological screening of the surfaces within the Endoscopy Extended storage cabinet on a monthly basis, to ensure that there are no microbiological contamination present.

5.0 Definition / Terms

Swab Samples: Microbiology samples taken through the swabbing process of surfaces.

6.0 Procedures

6.1 When a Microbiology Alert is received from the Laboratory or an External Source then the CNM receiving this notification should contact the Infection Control department.

6.2 If the alert is from an External Microbiology Alert then Infection Control will invoke the OLCHC Incident Management Policy to its conclusion.

6.3 If the alert is from the laboratory then the infection control department will make a decision as to whether there is a "Risk to the Patient” or not.

6.4 If there is a risk to the patient then then Infection Control will invoke the OLCHC Incident Management Policy to its conclusion.

6.5 If there is no risk to the patient then then Infection Control will notify the Theatre / OPD CNM and they will carry out the following.
6.6  The CNM in Theatre / OPD will write the relevant information into the Microbiology Alert form and then determine what is the appropriate immediate action required as per the options outlined in the Appendix 1 Endoscopy Microbiology Alert Algorithm. This will consist of one of the following actions.

6.7  **No Action required:**

If it has been determined that no further action is required then this will be recorded in the appropriate section of the Microbiology Alert form.

6.8  **Recall Scope from Storage / Quarantine: (Refer Appendix 2)**

If the scope is required to be recalled from Storage or from Quarantine then the CNM will carry out the following.

6.8.1  The CNM/HCA will arrange for the scope to be rewashed and reprocessed in the AER and then take a Sample and/or Swab the scope as per the relevant SOP.

6.8.2  The scope will then be placed in Quarantine if required.

6.8.3  The AER will be Thermal Disinfected if required.

6.8.4  The AER will be Water Sampled if required and samples are then brought to the Laboratory for testing.

6.8.5  The CNM / HCA will then complete the Microbiology Alert form and await the Test Results.

6.8.6  If there is no growth then the scope can be used and this should be recorded in the appropriate section of the Microbiology Alert form.

6.8.7  If the Alert is still present then contact Infection Control and repeat steps 6.8.1 – 6.8.5.

6.8.8  If the Alert is still present then send the scope to the Manufacturer for repair. As per the Sending a Pentax, Olympus or Wolf Endoscope for Repair procedure.

6.8.9  Then complete the Microbiology Alert form with the actions taken.

6.9  **Extended Endoscopy Storage Cabinet Microbiology/ IC Alert: (Refer Appendix 3)**

The CNM / HCA will carry out the following.

6.9.1  Quarantine the Extended Endoscopy Storage Cabinet, depending on the alert and if advised by infection control.

6.9.2  If it has been determined that no further action is required then this will be recorded in the appropriate section of the Microbiology Alert form.

6.9.3  The CNM / HCA will arrange scopes in the cabinet to be reprocessed in the AER.
6.9.4 The CNM / HCA will rewash the cabinet and then take a relevant swab of the Extended Endoscopy Storage Cabinet.

6.9.5 All samples are brought to the Laboratory for testing.

6.9.6 The CNM / HCA will then complete the Microbiology Alert form and await the test results.

6.9.7 If the Alert is still present then carry out the following:
   - Contact Infection Control and repeat steps 6.9.2 – 6.9.5.
   - Contact Clinical Engineering

6.9.8 Then complete the Microbiology Alert form with the actions taken.

6.10 AER Microbiology / IC Alert. (Refer Appendix 4)

   The CNM / HCA will carry out the following.

6.10.1 The AER will be Thermal Disinfected.

6.10.2 Take an open filtered water sample and then brought to the Laboratory for testing.

6.10.3 The CNM/HCA will then complete the Microbiology Alert form and await the Test Results.

6.10.4 If Alert is still present, contact Clinical Engineering / AER Engineer.

7.0 Implementation Plan

The implementation of this SOP is in line with the current practices of the OLCHC.

8.0 Evaluation and Audit

This SOP will be evaluated as part of the overall evaluation and audit throughout the Endoscopy department and hospital.

9.0 References


Nursing & Midwifery Board of Ireland (201) *Code of Professional Conduct and Ethics for Registered Nurses and Registered Midwives*. Dublin: Nursing & Midwifery Board of Ireland.

NMBI 2016 – Recording Clinical Practice


Nurses & Midwives Act (2011)


Medicinal Products (Prescription and Control of Supply) (Amendment) (No.2) Regulations 201 (S.I. No. 504/201)

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Appendix 1 - Endoscopy Microbiology Alert Algorithm

Endoscopy Microbiology Alert Algorithm

Microbiology Alert received from the Laboratory / External Source

Contact Infection Control

RISK TO PATIENT?

Laboratory Microbiology Alert: Commence recording information into the Microbiology Alert form

What “Immediate Action” is required?

External Microbiology Alert

What “Immediate Action” is required?

No Action

Recall Scope from Storage / Quarantine

Extended Endoscopy Storage Cabinet Microbiology / IC Alert

AER Washer / Disinfector Microbiology / IC Alert

Invoke OLCHC Incident Management Policy
Appendix 2 - Recall Scope from Storage / Quarantine

Recall Scope from Storage / Quarantine

1: Reprocess the scope Resample/ Reswab

2: Quarantine If Needed

3: Thermal Disinfect AER If Needed

4: Water Sample AER If Needed

5: All Samples brought to the Laboratory

Complete Microbiology Alert form and Await Test Results

Use Scope

If Alert Still Present

Contact Infection Control (REPEAT STEPS 1-5)

If Alert Still Present

Send Scope to the Manufacturer for repair

Complete Microbiology Alert form with actions
Appendix 3 – Extended Endoscopy Storage Cabinet Microbiology / IC Alert

Extended Endoscopy Storage Cabinet Microbiology/IC Alert

1: Quarantine If Needed

2: Clean scopes in the AER

3: Rewash and Re-Swab Storage Cabinet

4: All Samples brought to the Laboratory

5: Complete Microbiology Alert form and Await Test Results

If Alert Still Present

- Contact Infection Control (REPEAT STEPS 3 – 5)
- Contact Clinical Engineering

Complete Microbiology Alert form with actions

Theatre Department
Appendix 4 – AER Microbiology / IC Alert

AER Microbiology / IC Alert

1: Do a Thermal disinfect cycle

2: Take an open filtered water sample

3: All Samples brought to the Laboratory

4: Complete Microbiology Alert form and Await Test Results

If Alert Still Present contact Clinical Engineering / AER Engineer

Complete Microbiology Alert form with actions