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Flash Much?

Find out why AORN suggests you keep it to a minimum.

Flash sterilization is intended for emergency use. If it's become routine in your facility, AORN has an important message for you: Keep flashing to a minimum.

As a rule of thumb, the 2008 AORN Standards, Recommended Practices and Guidelines say that you should only flash when time prohibits all other options. This means you shouldn't flash solely because you don't have enough instruments in your inventory — the pressing need for quick turnover notwithstanding.

While it's easy to say that you should flash sterilize your instruments less often, no national benchmarks quantify what is and isn't an acceptable amount of flashing. The standards encourage you to keep track of how often you flash so you can make reducing this number, whatever it is, a part of quality improvement initiatives. This is true from a clinical perspective as well as a financial one, as buying enough instruments to maintain an adequate inventory is cheaper in the long run than constantly flashing or buying autoclaves for flashing.

When you must flash

When you do flash, the new recommended practices say that you should use closed rigid sterilization containers designed for flash sterilization cycles as opposed to open trays. The containers can reduce the risk of contamination when staff brings the instruments to the point of use by keeping them protected and sealed. What's more, it may not be possible to put them in the right position to ensure adequate air removal, steam contact or drying.

The recommended practices also say that you should use Class 5 chemical integrating indicators in each container or tray you flash. These are relatively inexpensive, so taking this extra step means spending a couple more dollars on each flash to ensure the instruments are effectively sterilized.

It's also important not to overload an instrument set. The recommended weight limit is 25 pounds; anything heavier could extend the time it takes for all the instruments to dry, because the outside items may get overheated while the steam may not be able to penetrate all the spaces inside the densely packed load. That much weight also puts your staff at risk for injuries when they lift and carry the trays.

If you're using pouches in instrument sets to keep your smaller instruments from being strewn about during flashing, the recommendations say you should only use medical-grade all-paper pouches. Don't use combination paper/plastic peel pouches in instrument sets; pouch manufacturers haven't validated the effectiveness of this combination, and these pouches could decrease the effectiveness of steam penetration during sterilization cycles.

When the cycle is done, take the instruments out of the machine as soon as possible and let them cool at room temperature (ideally on racks) in a spot where there are no drafts. Any

EXCEPTION, NOT THE RULE Only flash when time prohibits all other options, says AORN.

WHEN YOU MUST FLASH Use sterilization containers designed for flash sterilization cycles as opposed to open trays to reduce the risk of contamination.

manipulation or touching could cause condensation to wick through the wrapper. Don't just open the steam sterilizer doors after the cycle and leave the instruments inside to cool, because you may get wet packs caused by poor loading techniques or a true sterilizer malfunction. Even if these problems don't occur, drying will likely take longer than it would if you set the instruments in an open spot.

Be the master of your sterilization area

One of the most important points for sterilization is that the items must be cleaned, decontaminated and sterilized in a controlled environment. This means that you have to control the temperature, humidity and airflow through your processing room to be sure that no external factors are interfering with the drying process. It also means dressing appropriately for the occasion, such as wearing sturdier gloves than you use in an exam room.

In addition to being sure that all the instruments you sterilize are clean, you have to act as the gatekeeper for devices that come into your facility. AORN's newly added Recommendation X suggests that you establish a formal program with any vendors who provide loaner equipment. Since you really have no control over how the representative brings these instruments to your facility, you should assume that they're contaminated and arrange to have enough time to properly decontaminate and sterilize them. And "properly" in this case means not using flash sterilization. **OSM**

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Don't Forget the Expiration Date

CMS is known for requiring inpatient centers to label their wrapped and sterilized devices as part of the requirements for reimbursement, but our members in freestanding surgical centers say they've been cited for not including expiration dates as well. So no matter what kind of surgical setting you're in, be sure to affix to the wrapping or container a label indicating the date the item was sterilized and its load control number.

CMS also requires ambulatory surgical centers to affix an expiration date on sterilized items. Here you may want to check with your state and local regulations to see what the requirements are for your region, then set the expiration limits for your facility. Depending on how well wrapped and stored the item is, you can set an expiration date anywhere from 30 days to a year after sterilization.

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