Decontamination of Nasendoscopes: Using a (Chlorine Dioxide) Multi-wipe System

1. Purpose

These operating instructions describe the interim method for decontamination of nasendoscopes using a manual (**chlorine dioxide**) multi-wipe system. Decontamination procedures should be performed in a designated room/area preferably separate from the clinical area. However, HAI risk-assessed procedures in the patient area are currently an interim solution where the nasendoscope cannot be returned to an EDU for processing through an endoscope washer disinfector.

These are manual decontamination procedures and to be fully effective, manufacturer's instructions and this SOP must be strictly adhered to.

2. Responsibilities

Clinical staff will undertake this procedure; all staff must be trained and competent in the methods of cleaning an endoscope.

The User (unit manager) has overall responsibility for the nasendoscope decontamination procedures within the department. Management should ensure that this procedure is available and followed by all staff involved in the decontamination process. Management should ensure that staff are trained on this procedure. Management take any required action when there is a non-conformance confirmed.

The Operator (person undertaking decontamination of the endoscope) performs this procedure.

All staff shall adhere to Standard infection control precautions listed in **National Infection Prevention and Control Manual (NIPCM)** Health Protection Scotland www.nipcm.hps.scot.nhs.uk/

3. Procedure

3.1 Preparation

Check the expiry/use by date on the product, if applicable
Do not use if past the use by date.

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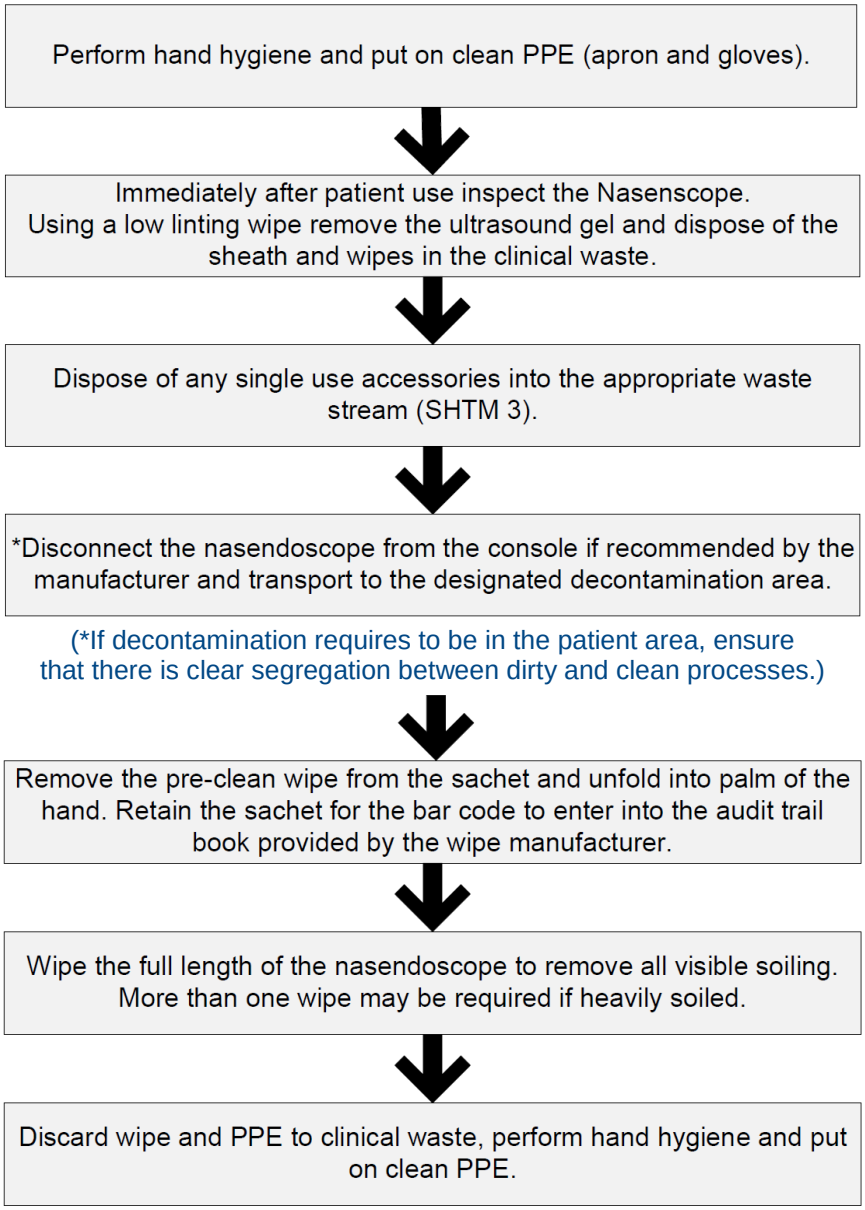
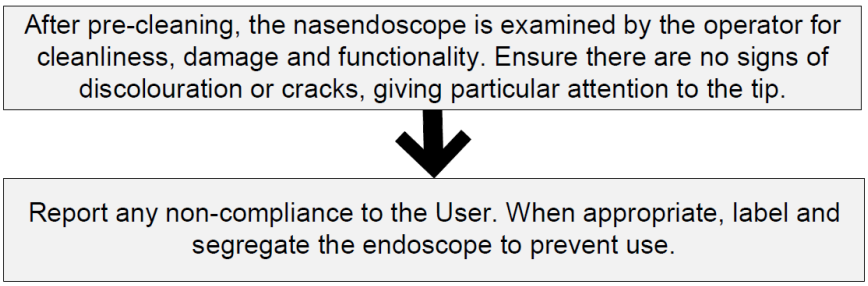
Take one of each of the wipes (pre-clean, disinfect and rinse) from the box and have ready for use and place on the work surface.

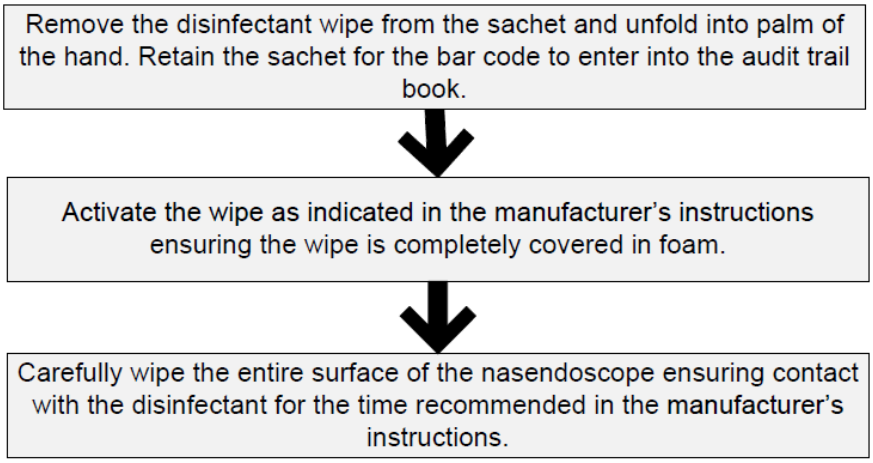
3.2 Pre-Cleaning



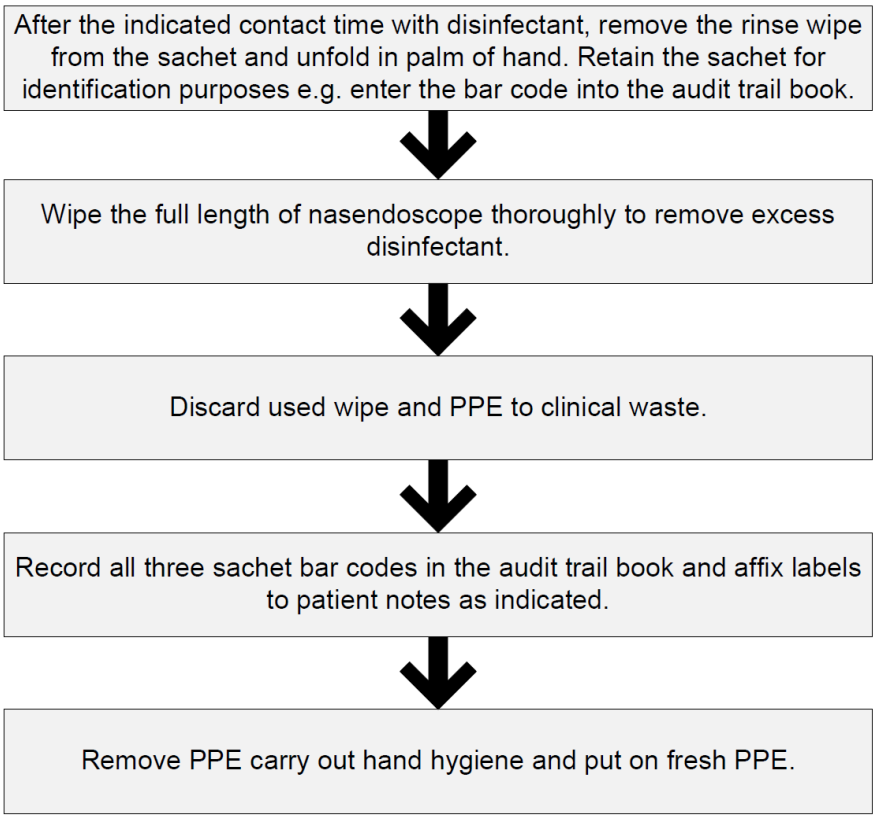
3.3 Inspection



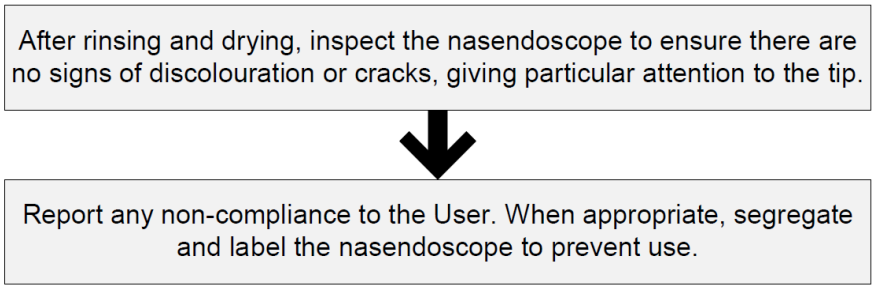
3.4 Disinfection



3.5 Rinse



3.6 Inspection – Post Disinfection



4. Product Release

After completion of the decontamination process, review the process to ensure acceptance criteria are being met:

- visual inspection ‘pass’;
- traceability records/tracking system complete.

The product is released after meeting the acceptance criteria and the completion of the traceability record. Traceability labels are attached to the patient records and system log books.

If a non-conformance is found during inspection of the nasendoscope, the management is informed in order to decide the appropriate corrective actions. Refer to SOP (PRO 179-200).

5. Records

System log books

Traceability records