The View from My Window: When COVID-19 Came to Sterile Processing

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In February 2020, the world swirled with rumors of a virus roaring through China and causing uncontrollable lung and breathing damage, which often resulted in death. These fatalities would not be calculated and then swept under the rug; instead, they would become a running tally of the dead versus the sick and dying. Chinese hospitals were so inundated with patients that the country started erecting temporary hospitals in a matter of weeks to house the overwhelming number of patients. By March, the virus would migrate to America and we now know that we were not prepared.

Deep in the basements, nooks, crannies and hallowed halls of the hospitals here in the US, Sterile Processing departments (SPDs) were working to process instruments and items around the clock. Processing departments were about to experience massive change. Best practices for not processing single-use devices (SUDs) would, in some cases, be disregarded (as seen by requests to reprocess used N95 respirators). The pandemic was no longer coming; it had arrived like a flood, tornado, earthquake, or hurricane into our lives. It was no longer a distant possibility that what was already happening in China or Italy could actually happen here - the sky had fallen here in the US.

Ready for the unexpected

With the first US cases of COVID-19, the SPDs stood taller; they were ready to fight the virus. SPDs have been fighting the war against viruses every day, and the best practice in an SPD is to get the item clean, make sure it works properly, and sterilize using the correct process according to the manufacturer's instructions for use (IFU). The functioning process for an SPD is receiving, transporting, handling, cleaning, decontamination, preparation, packaging, steam sterilization of reusable medical devices, quality process improvement, and new product evaluation. This scope of practice did not change due to the COVID-19 pandemic, as following standards and best practice allows us to deliver great patient care daily.

SP professionals stepped up to the plate to educate and share the process for eradicating viruses on instruments, pumps and other equipment. We SP professionals understand that viruses and bacteria are eliminated by using products that were developed to clean. Our main function was cleaning, and any technician was willing to outline the "how and why" when cleaning for COVID-19. Industry resources became readily accessible and sometimes were offered complimentary (this was the case for oneSOURCE, which made its COVID-19 database of IFU for ventilators, bypass machines, respirators and reusable gowns available to anyone without a membership). Necessary tools used to ensure patient safety, such as manuals for service, were also accessible, as needed, for the biomedical departments.

We also received invaluable help from our vendor partners as they dug deeper to make sure we would be able to say, "the more you know, the more you grow." Webinars became commonplace as industry professionals could no longer attend in-person annual meetings and receive those needed continuing education (CE) credits. Vendor companies specific to this profession have each, in their own way, worked hard to almost guarantee that every SP technician comes out of this pandemic battle more knowledgeable than at the onset.

We have no reason to not continue our educational quest. Each week, we can find webinars and CEs available for our specific job. COVID-19 updates and webinars from a number of vendors and healthcare associations have all set out to offer programming that raises awareness of new industry standards and current requirements for SP technicians, as well as prepare for post-pandemic processes.

Associations like the International Association of Healthcare Central Service Materiel Management (IAHCSMM), the Association for the Advancement of Medical Instrumentation (AAMI) and the Association of periOperative Registered Nurses (AORN) regularly provided relevant information regarding the processing of N95 respirator masks, as well as basic information for working in the SPD during this challenging time. We technicians will have no excuse for not knowing the where, how, why or when as we endeavor to care for the patients once a surge in surgical cases commences.

Accepting change – as safely as possible

Because our daily processes were not altered with the onset of a viral pandemic, we have evidence-based tools for the daily work done in an SPD. These job functions could be backed by ANSI/AAMI ST79:2017, *Comprehensive guide to steam sterilization and sterility assurance in health care facilities* and the AORN *Guidelines for Perioperative Practice*, and IAHCSMM's *Central Service Technical Manual*. Our SPDs have been cleaning a plethora of equipment contaminated with microorganisms, and we don't ask what is on the item – we just focus on ensuring we have properly cleaned the devices, so they are safe for use. This is the inherent responsibility of each and every SP professional from the day they enter this profession. We were, and remain, ready to serve our patients and healthcare team members daily.

The SP world was thrown into upheaval when the COVID-19 pandemic arrived, as we were asked to forgo some rules and best practices to help alleviate shortages of N95 respirators. Who knew a profession that has worked so hard to identify and follow policies would be faced with such circumstances? We are a group of professionals who follow specific IFU and are acutely aware that reprocessing single-use items goes against regulations, so imagine our disbelief when we were asked to reprocess N95 respirator masks. We had to read and reread the *Enforcement Policy for Sterilizers, Disinfectant Devices, and Air Purifiers During the Coronavirus Disease 2019 (COVID-19) Public Health Emergency Guidance for Industry and Food and Drug Administration Staff*. Change was coming for the benefit of our healthcare team members. I personally informed my team that this is a war and, in war times, rules change. I was willing to change if I had direction and clearance from all the powers that be. I am a leader who is willing to lead outside the boundaries if I am not harming anyone and I have guidance.

Initially, I spoke directly with my administrative leaders and our hydrogen peroxide sterilizer manufacturer and received confirmation as to what was being asked of my team - and reassurance that we would be doing no harm. We then, as a team, made the decision to move forward with the processing of N95 respirator masks. We would be decontaminating the mask by the process of hydrogen peroxide sterilization; this would eradicate the virus on our product and make it ready for continued use. My health system coordinated this as a contingency plan in response to the potential "what if" of running out of N95 respirator masks. It should be noted that this is only enforceable during the pandemic and once the need for increased medical care due to COVID-19 dissipates, so will this process, until the FDA gives further guidance on plans.

Conclusion

February 2020 began with many SP technicians concerned about getting CEs to maintain their certification status and many making plans to attend the IAHCSMM Annual Conference & Expo in Chicago. In just one month, our lives were turned upside down with demands to social distance, stay six feet apart, wash our hands, don't touch our face, and wear a mask – and then we as professionals were asked to decontaminate N95 respirators. What a difference a few weeks can make in our lives.

I am proud that with the openness to change, learn, grow and take our place as frontline staff, the SP teams all over the world have stepped into history as professionals who fight the fight, even when a pandemic comes to our doorsteps.