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## ProMedica St. Luke's Hospital: Transitioning our Endoscope Reprocessing to a Higher Standard of Care

On September 14, Advanced Sterilization Products (ASP) hosted the seventh in a series of informational Webinars titled “Transitioning our Endoscope Reprocessing to a Higher Standard of Care.” The Webinar featured ProMedica St. Luke’s Hospital in Maumee, Ohio, and its recent transition from the STERIS® System 1 (SS1) to the EVOTECH® Endoscope Cleaner and Reprocessor (ECR). Members of the perioperative technology and GI teams shared their personal experiences, highlighting the benefits of adopting a higher standard of care for their endoscope reprocessing by transitioning to high-level disinfection with the EVOTECH® ECR.

If you were unable to attend the live broadcast of the Webinar, **an archive is now available for on-demand viewing at [http://www.aspii.com/us/media/webinar\\_video](http://www.aspii.com/us/media/webinar_video).**

### Featuring:

- **Barbara Trattler, RN, MPA, CNOR, CNA**  
Director, Clinical Education for ASP
- **Michelle Holtfreter, RN, BSN, CNOR**  
Perioperative Technology Coordinator, St. Luke’s Hospital
- **Robin Pressnell, RN**  
Endoscopy and Cystoscopy Charge Nurse, St. Luke’s Hospital

### Transitioning our Endoscope Reprocessing to a Higher Standard of Care Key Take-Aways:

- Michelle Holtfreter, RN, BSN, CNOR, perioperative technology coordinator for St. Luke’s Hospital, noted the benefits of utilizing a high-level disinfection system that eliminates the need for manual cleaning and stated, “One of our biggest concerns when transitioning from the SS1 was ensuring consistency in the cleaning of our scopes. There are several variants in the hand-washing process and we want to ensure that every patient receives the highest standard of care.”
- Robin Pressnell, RN, endoscopy and cystoscopy charge nurse for St. Luke’s Hospital, discussed their recent JCAHO and ISO-certification saying, “The reviewers came in, noticed that we had transitioned to the EVOTECH® ECR, and had only a few questions about our practice. I think they were only in my department for seven minutes. As soon

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as they saw that we were able to measure the various aspects of the process, and it was out of human hands, we were golden.”

### **Q&A Session:**

*Following are the most popular and pressing questions answered regarding the transition to high-level disinfection:*

**Q: If my facility has not yet replaced our SS1, is there still time to purchase and set up an EVOTECH® ECR for our endoscope reprocessing needs in time to meet the transition deadline?**

A: Yes. We have significantly ramped up our supply, but of course, the sooner an order is received, the faster we can anticipate and meet customer needs.

**Q: How quickly can the EVOTECH® ECR reprocess instruments?**

A: The EVOTECH® ECR offers quick turnaround time, allowing users to focus more on their patients and less on reprocessing. The dual independent basins of the EVOTECH® ECR offer cleaning\* and reprocessing in 33 minutes or less.

The EVOTECH® ECR also helps improve staff productivity, given it eliminates the manual cleaning\* cycle required with other disinfection modalities. Please note, it does not eliminate bedside pre-cleaning.

**Q: Why should I completely change systems when it seems easier to just move to an alternative model of our current system?**

A: Instead of thinking of this change as a problem, think of it as an opportunity for process improvement, like St. Luke’s Hospital did. Given the transition was directed by the FDA, now is the time to take a look at your current process and determine how you can optimize it.

**Q: I am hesitant to completely eliminate manual cleaning from our process. How can we be sure that automated cleaning with the EVOTECH® ECR would suffice?**

A: We know that moving from any process you’ve been using for a long period of time can cause a bit of concern. However, data since the introduction of the EVOTECH® ECR has shown that the EVOTECH® ECR cleaning cycle provides an effective, automated approach to flexible endoscope cleaning. Data has also shown that cleaning for endoscope surfaces and channels with the EVOTECH® ECR is superior to optimal manual cleaning.<sup>1</sup> Remember that the EVOTECH® ECR does not eliminate the need for bedside pre-cleaning.

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**Q: What type of monitoring system does the EVOTECH® ECR offer?**

A: The EVOTECH® ECR offers complete monitoring of critical cycle parameters including Minimum Effective Concentration or MEC, block detection, temperature, pressure and time ensuring compliance throughout the process. The onboard MEC monitor of EVOTECH® ECR assures the amount of CIDEX® OPA•C Solution in use is correct for each cycle and scope while eliminating the need for test strips and reducing worker exposure to chemicals. In addition, each endoscope channel is connected to a separate pump for proper perfusion based on endoscope make and model, allowing for automatic leak and blockage detection. This ensures the EVOTECH® ECR can maintain positive pressure in the endoscope to avoid fluid invasion and damage to the endoscope during reprocessing.

Lastly, the EVOTECH® ECR printer provides a complete record of all key information including endoscope, operator, physician and patient data, as well as cycle information process start and end times, MEC status, disinfection time, leak test information, and cycle stage times.

**Q: What solutions can be used with the EVOTECH® ECR?**

A: The EVOTECH® ECR reduces worker exposure to chemicals and delivers CIDEX® OPA•C Solution and CIDEZYME® XTRA Multi Enzymatic Detergent automatically ensuring that fresh product is used every time for every scope. CIDEX® OPA•C Solution is glutaraldehyde-free; safe for a wide range of materials common to flexible endoscopes including aluminum, polyurethane, and silicone rubber; has a low odor and does not require neutralization for disposal in accordance with state and local water regulations. It also requires no activation or mixing and does not require test strips.

CIDEZYME® XTRA Multi Enzymatic Detergent is biodegradable, inhibits rust, and is uniquely formulated with specialized enzymes to provide faster, more thorough penetration and effectively remove bioburdens. Its multiple-enzyme formula easily and naturally removes fats, lipids, protein, starches and carbohydrates.

**Q: Do you offer educational resources?**

A: Yes, at ASP we have a number of tools to help you make this transition as smooth and easy as possible, including individualized and personalized support. When you call us about making the transition, we immediately assess your needs and recommend the best options for your facility. In addition to equipment, we can assist you with training and education to help ensure that your facility operates with minimum downtime and maximum predictability.

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Our highly skilled team of field service engineers, dedicated technical support staff and licensed clinical professionals are available to answer your questions and to help ensure your facility operates efficiently at all times.

For more information about the EVOTECH® ECR and other ASP products, please visit our newly enhanced website at [www.ASPJJ.com](http://www.ASPJJ.com), which provides convenient, centralized access to the latest information from ASP. In addition, we have launched ASP's Infection Prevention TV YouTube site at [www.youtube.com/InfectionPrevention](http://www.youtube.com/InfectionPrevention), where you can find informational videos including the full archived presentations of ASP's first six Webinar series installments. For the most up to the minute information from ASP, you can also follow us on Twitter at [www.twitter.com/ASPJJ](http://www.twitter.com/ASPJJ).

### View the Webinar

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<sup>1</sup> Alfa MJ. "EVOTECH® Endoscope Cleaner and Reprocessor (ECR) Simulated-use and Clinical-use Evaluation of Cleaning Efficacy." *BMC Infect Dis.* 2010;910:200.

*\*Does not eliminate bedside pre-cleaning. Manual cleaning of medical devices (endoscopes) is not required prior to placement in the EVOTECH® ECR when selecting those cycles that contain a wash stage.*

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