

# Best Practice combination - delivers compliant reprocessing of TOE and TRUS probes

Unique product enables high-level decontamination of instruments with non-immersible components using an endoscope washer-disinfector

An important consideration for today's endoscope decontamination units is the ability to reprocess transoesophageal echocardiography (TOE), transrectal ultrasound (TRUS) probes and transvaginal ultrasound probes (TVUS) probes.

It was one of the key requirements for the project team when planning the impressive new facility at Sandwell General Hospital.

"To achieve Best Practice of the CFPP 01-06 consideration needs to be given to the type of equipment to enable ultrasound probes to be decontaminated using an automated method."



Diane Beaman, decontamination manager at Sandwell and West Birmingham Hospitals NHS Trust, told *Inside Hospitals*. "When we

were planning our new department we drew up a criteria of the type of AER which we were looking for, which included full compliance with CFPP 01-06 and EN ISO 15883 part 4, and following the

The Scopevault device showing all components



release of the MHRA Medical Device Alert (MDA/2012/037) that it should be able to process reusable transoesophageal echocardiography (TOE) probes and transrectal ultrasound (TRUS) probes."

The trust's winning combination twins Getinge's ED-FLOW AERs with an adapted version of Neocare's Scopevault.

Scopevault is a unique device. It enables fully-compliant, high-level decontamination of instruments with non-immersible components using an automated endoscope reprocessor (AER).

The susceptible, non-immersible components of the probe are manually cleaned and disinfected before being safely locked away in a pressurised



vault, enabling the whole unit to be processed within the AER - just like a standard endoscope. However, it wasn't quite as easy as it had seemed. "The Scopevault did not fit the new AERs we had chosen," explained Diane. "So Neocare's Steve Ladley came in and modified the Scopevault so that it fitted Getinge's ED FLOW."

"This enabled us to comply with the Alert by using an automated method of decontamination that provided the quality assurance which surpassed manual cleaning and disinfection. Then not only do we meet the requirements of the MHRA Alert we also meet Best Practice detailed in CFPP 01-06 relating to the type of ultrasound probes which have non-immersible parts."

Describing Scopevault, Diane said: "It's a robust and simplistic device which achieves what we needed it to. It works by creating



a pressurised seal which prevents any ingress of water during the washing process.

"Steve created bases to cradle the unit while the probe is being loaded - red for the dirty area and white for use in the clean room. By having two colour coded bases which you don't have to move you reduce the amount of manual handling and potential risk of cross contamination. The inside of the Scopevault system and the accessories can be manually cleaned with detergent and water using a disposable cloth followed by a high level disinfectant wipe.

"Steve adapted a Getinge tray basket to house the Scopevault while it is inside the AER."

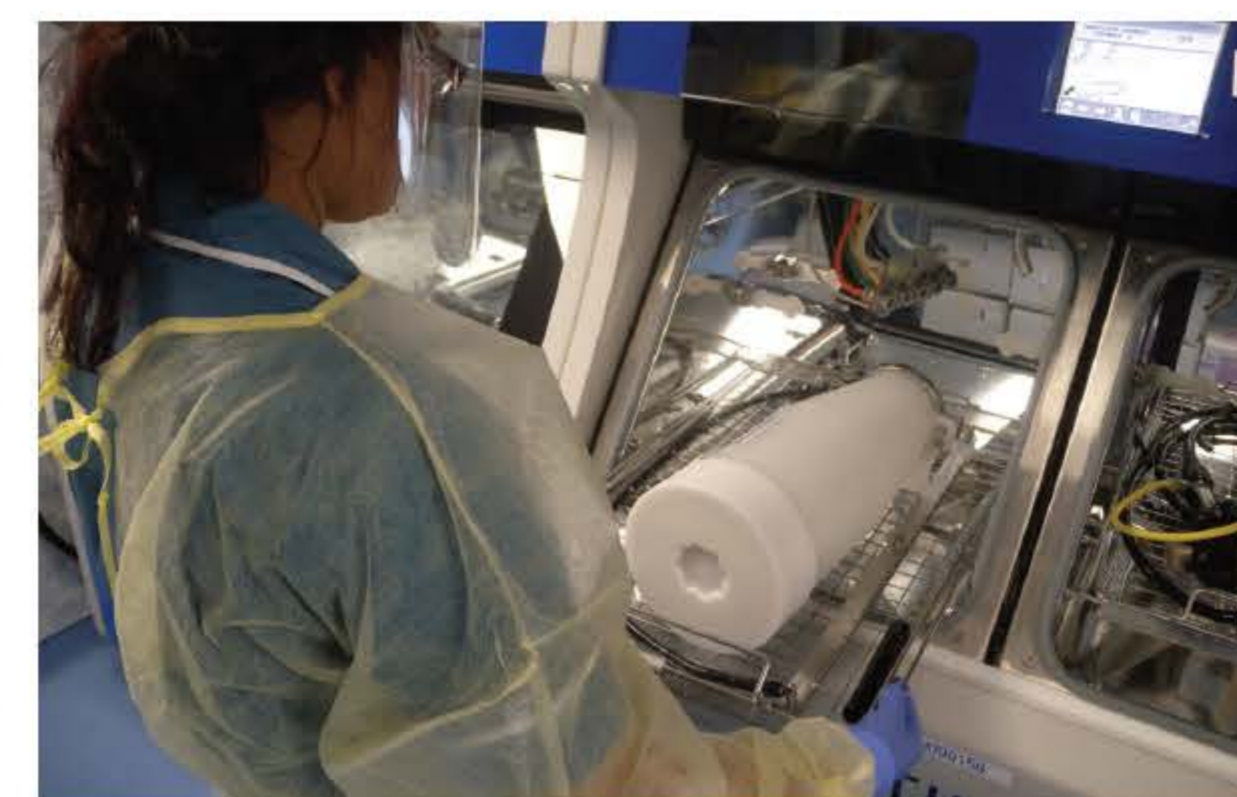
"The Scopevault is easy to use and it's robust. Steve himself delivered on site training. The staff that have used it have found it easy."

Diane said: "The Scopevault's an important piece of kit. It's used two or three times a week depending on activity. The introduction of the Scopevault has enabled the probes to be decontaminated on the site where they are used instead of having to transport them across to City Hospital for reprocessing. This has reduced the risk of damage to probes that can potentially be caused by transporting them."

Explaining the Scopevault process, Diane said: "Prior to loading the probe into the unit you manually clean it first with water and detergent. The cable and electrical connection which cannot be immersed are wiped with detergent and water using a slightly damp, disposable cloth, followed by a high level disinfectant wipe."

"To load the probe you pass it through the Scopevault, ensuring that only the parts that can be immersed are going to be exposed to water and disinfectant, so that the cable and electrical connection are in the body of the Scopevault."

"Then you close it up and pressurise it manually. When



you're confident you have no leaks you can load it into the AER chamber and reprocess it."

Scopevault designer Steve Ladley, of Neocare, explained: "Scopevault was designed to reprocess TOE probes in exactly the same way as endoscopes are reprocessed - using the same washer-disinfectors and the same validations."

"By using Scopevault, the TOE insertion tube is reprocessed in the same fully compliant manner that is applied to endoscopes. It has also been used with a range of instruments with components that are susceptible to water damage and different size seals are available."

Steve added: "Scopevault is tough and durable with very low whole-life costs and enables EN ISO 15883 Part 4 compliant reprocessing."

Since the original version of the device was introduced, Scopevault has achieved over 25,000 successful reprocessing cycles with perfect results.

Diane added: "Neocare have been fabulous, they've been a good support, very amenable to site visits and working with us so that we can move the quality of our service forward."

A peer reviewed article *The development of a new technique for the decontamination of transoesophageal echocardiography probes* appeared in the *Journal of Infection Prevention*. The article, written by Andrew Richardson, Charlie Cowan, Jan Walters and Paul Diprose of Southampton University Hospitals NHS Trust, is available online at <http://bj.i.sagepub.com/cgi/content/abstract/11/3/91>

You can view a watch a short video demonstration of Scopevault, showing the loading, pressure testing and unloading of the device, at [www.neocare.org.uk](http://www.neocare.org.uk)

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