

PROCESS IMPROVEMENT INITIATIVE

STANDARDIZING THE LABELLING OF STERILE PACKS IN CSSD

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Rationale:

Discrepancies and disparities identified in sterile packs labeling

Objectives:

- Review in detail the current process of sterile packs labelling in CSSD.
- Identify current challenges in the labelling of sterile packs.
- To set and standardize the labeling process

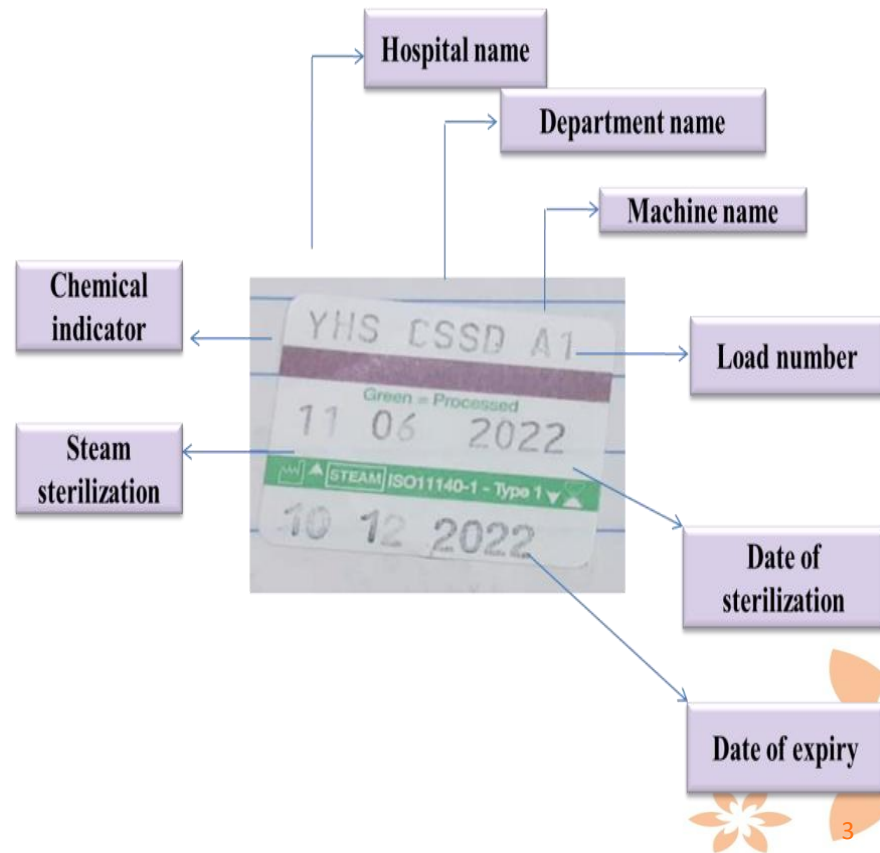
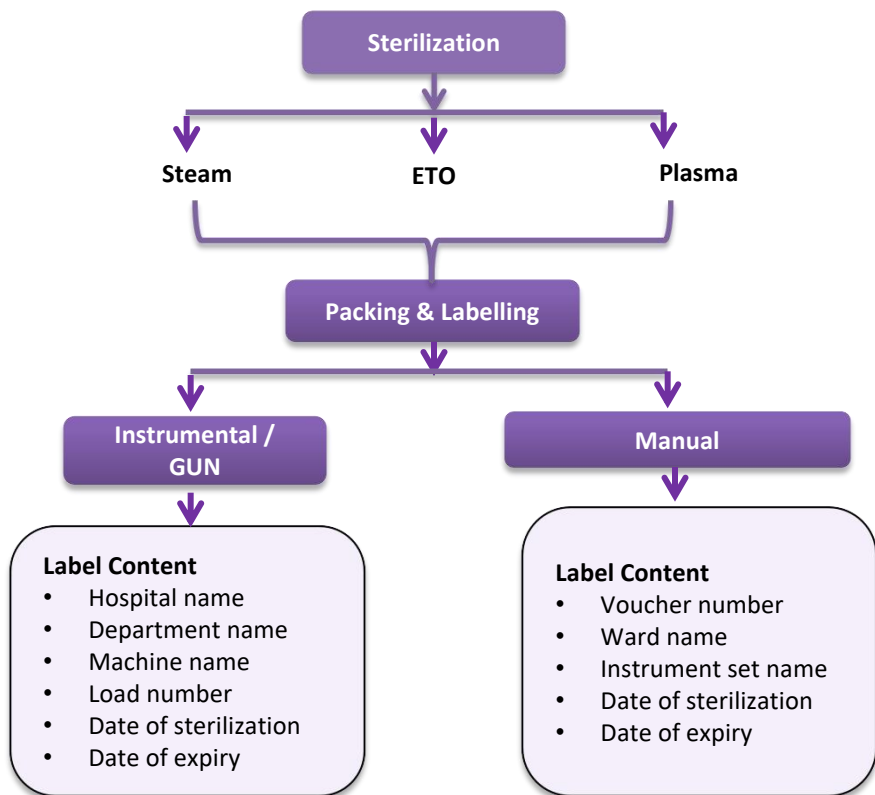
Study Period: 3 Weeks (between June to July 2022)

Data Collection:

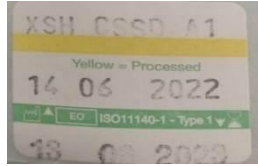
- Random Check of Sterile packs at all patient care areas.
- Staff interview.

Sampling:

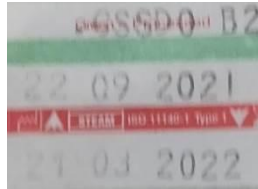
Type of Sterile Pack	CSSD	Other Areas
Steam Sterilized Packs	97	35
ETO Sterilized Packs	33	10
Plasma	Nil	05
No. of Packs Checked	130	50
Total	180	



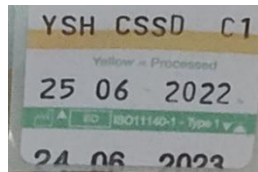
1. HOSPITAL NAME : 1HS,WHS,8HS,XHS,BHS



2. DEPARTMENT NAME : CSSD with numerical CSSD 0



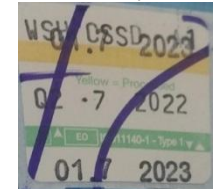
3. MACHINE NAME : Actual : A, B, C for steam sterilizers,
A,B for ETO sterilizer & A,B for Plasma sterilizer
(Variation: Plasma sterilizer does not have C machine).



4. LOAD NUMBER: Load numbers are not mentioned



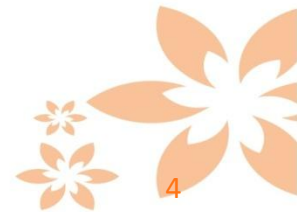
5. DATE OF STERILIZATION: Printing overlapping error, Printing is not clear, manually written dates



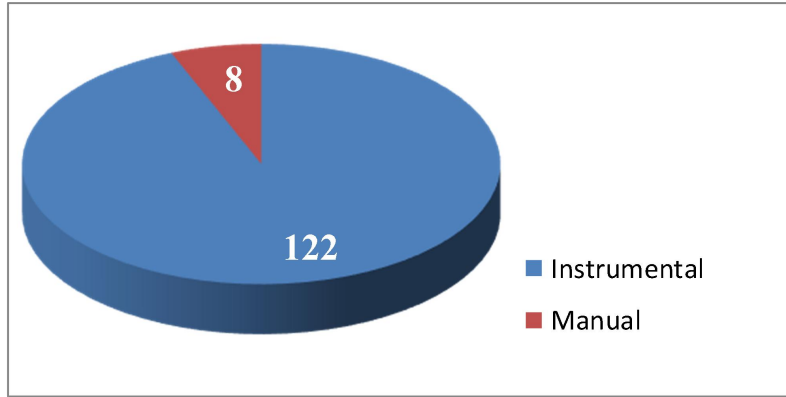
6. NO DEFINED LABEL CONTENT FOR PLASMA

7. STAFF AWARENESS GAP

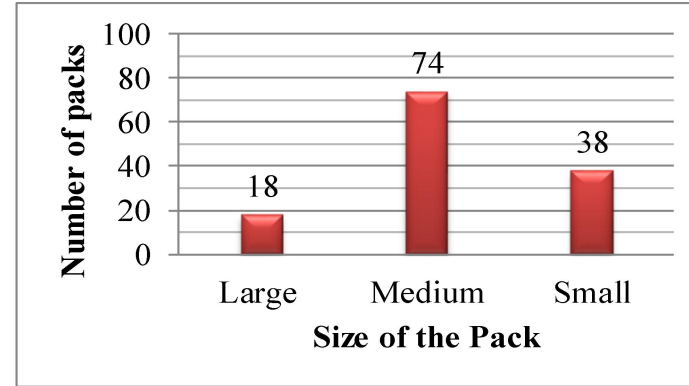
8. INADEQUATE RESOURCES



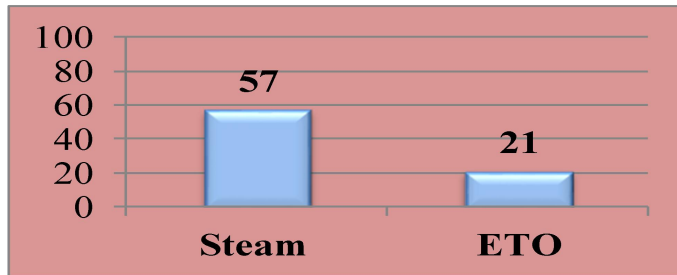
No. of manual & equipment labelled packs checked at CSSD



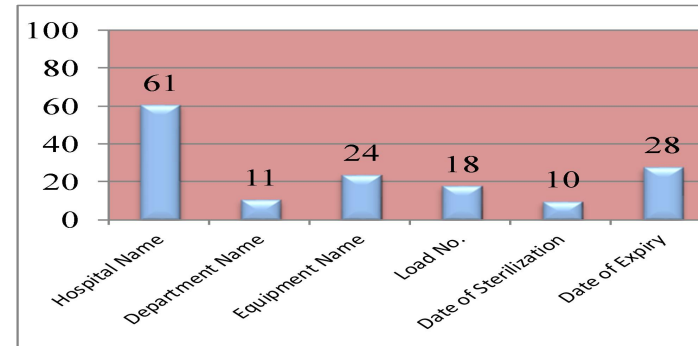
Different Size of Packs checked at CSSD



Total no. of variations identified in Labelling at CSSD

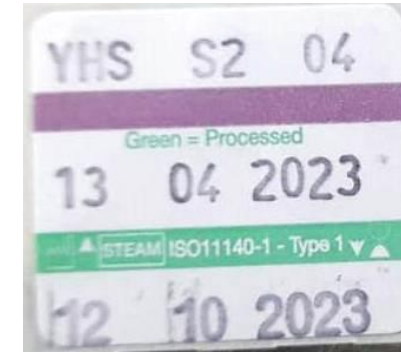


Category-wise variations in labelling at CSSD

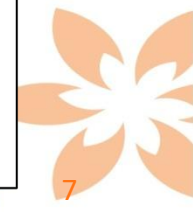
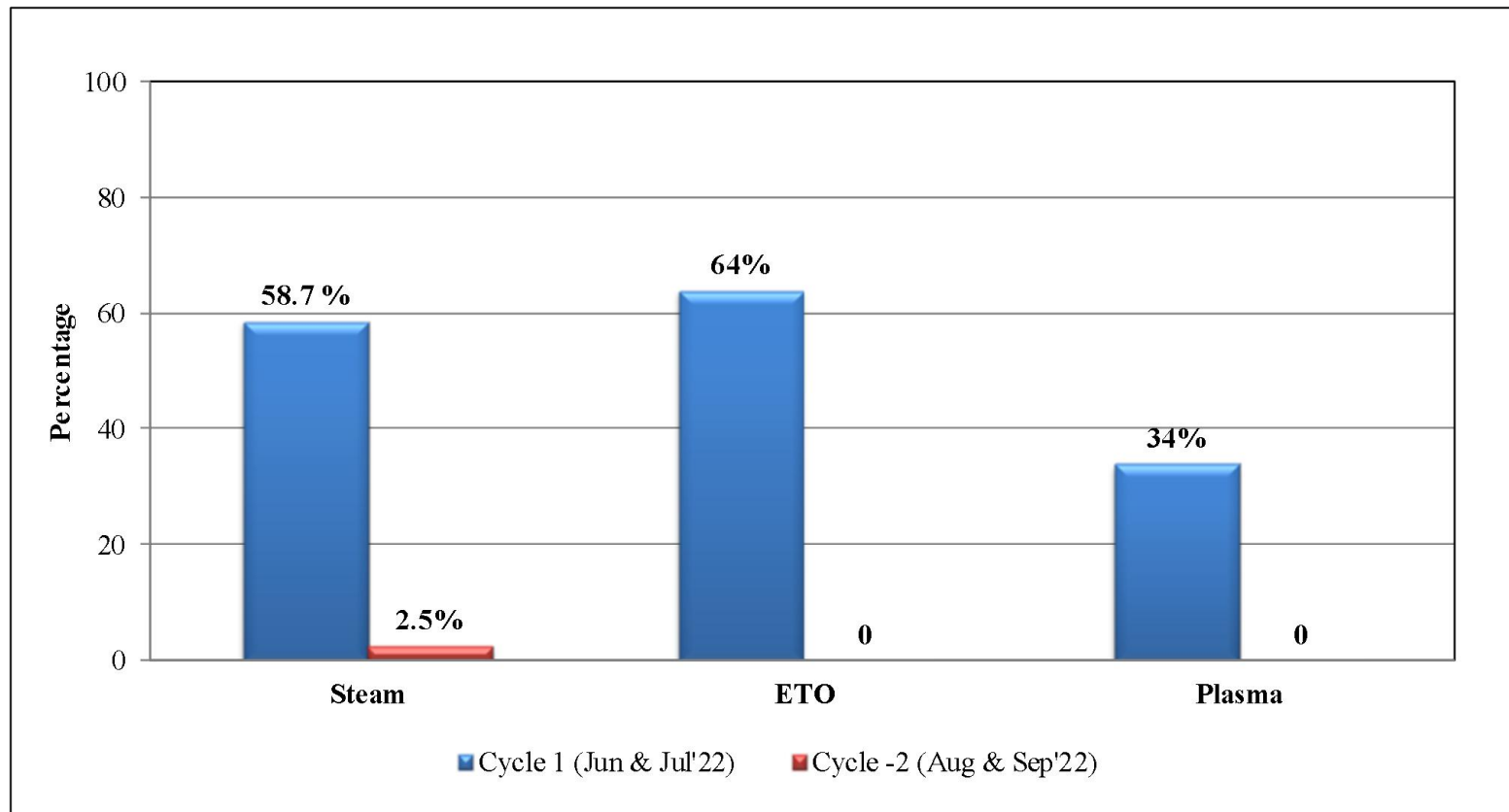


CHANGES – STRUCTURAL & PROCESS

- **Revised and made uniform content** on labelling of sterile packs.
- **Alpha Numeric identification** of sterilizers :
Steam Sterilizers as **S1, S2 & S3**. ETO as **E1, E2& E3**
& Plasma Sterilizer as **P1**.
- **Dedicated Labelling Guns** for each equipment :
Procured 05 new Guns and labelled them with equipment name.
- **Standard Operation Procedure** on Labelling of Sterile Packs.
- **Focused Training** of CSSD , OT, Cathlab, CTOT, Nursing etc on revised Labelling process and its content.



PERCENTAGE OF VARIATIONS



Pre-Printed Labels on Big Packs

Name of the Pack : TKR Pack
 Type of Sterilization : Steam / ETO / Plasma
 Sterilizer & Lot / Batch No. : S/E/P – 01
 Packed Date : 02/08/2022
 Expiry Date : 02/01/2023
 Tech ID : MT64571

Instructions: Do not use if found damaged, Opened, Expired & Wet.

 Yashoda Hospital	STANDARD OPERATING PROCEDURE ON LABELING OF STERILIZED PACKS		Doc. No.: HIC/SOP-01 Issue No.: 01
	Prepared By  Mr. Kiran Kumar Sr. Manager - QA	Approved By  Dr. A. Gopi Krishna Sr. VP – Medical Services	Issued By  Mr. Vishwanath Head - QA

1. PURPOSE

To define standard labeling procedure of sterile packs at CSSD, Cathlab, CTOT & Operation Theatres.

2. SCOPE

Sterile pack (Small, Medium & Big) labeling at CSSD, Cathlab, CTOT & Operation Theatres, in the hospital.

3. DEFINITION (S)

3.1 Sterilization: Sterilization is defined as a process of complete elimination or destruction of all forms of microbial life (i.e., both vegetative and spore forms), which is carried out by various physical and chemical methods. Technically, there is reduction $\geq 10^6$ log colony forming units (CFU) of the most resistant spores achieved at the half-time of a regular cycle.

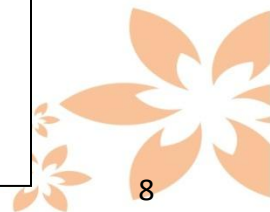
3.2 Decontamination and cleaning: Decontamination is the process of removal of pathogenic microorganisms from objects so that they are safe to handle. Cleaning is defined as removal of visible soil (e.g., organic and inorganic materials) from the surfaces and objects. Technically, it achieves minimum reduction of ≥ 1 log CFU of microorganisms.

3.3 Labeling: Labeling is defined as any written, graphic or electronic communications on packaging or on a separate associated label.

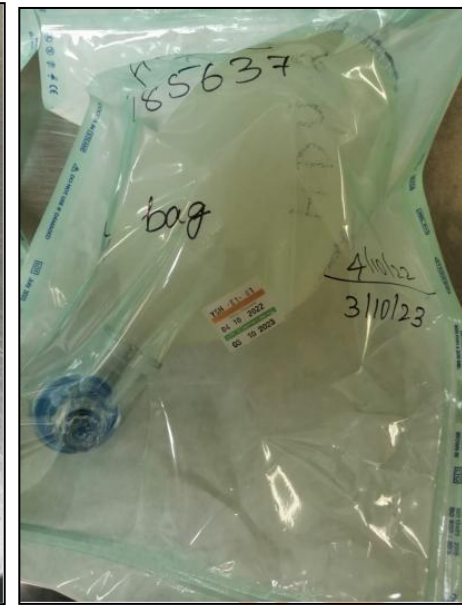
4. RESPONSIBILITY

4.1 Technicians at Central Sterile Supply department, OT, CTOT and Cathlab are responsible for implementing this procedure.

Doc Name: SOP on Labeling of Sterile Packs		Doc No: HIC/SOP-01	
Issue No: 01	Issue Date: 06/08/2022	Amend No: 00	Amend Date: --
Prepared By Mr. Kiran Kumar s	Approved By Dr. Gopikrishna	Issued By Quality Assurance Dept	Page 1 of 5
YASHODA HOSPITAL - SECUNDERABAD			



Revised Labelling Process.



THANK YOU

