	<b>The Johns Hopkins Hospital</b> <b>Policy &amp; Procedure</b>	<i>Policy Number</i>	IFC027
		<i>Effective Date</i>	5/31/04
	<u>Subject</u> <b>PHYSICAL INTEGRITY OF STERILE PACKAGES</b>	<i>Page</i>	1 of 3
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**KEY WORDS:** physical integrity, shelf life, stock rotation

**POLICY**

Physical integrity of sterilized items is violated when a package is torn, dropped, wet or damaged. This is commonly referred to as an event. Hospital sterilized items will have an indefinite shelf life and will be considered sterile as long as the integrity of the package is not compromised.


The shelf life of sterilized items is event-related and not time related. It is dependent upon packaging materials, handling and storage conditions. Items sterilized at the JHH/JHU/JHMI will follow the event-related system.

**RESPONSIBILITIES**

JHH/JHU/JHMI Staff	Must check sterile packages prior to use to ensure that the integrity has been maintained.
Central Sterile	There must be consistency of <b>trained staff</b> in the selection, application and wrapping of sterile items (e.g. uniformed training for all staff in wrapping sterile items).
Housekeeping	Shelves must be damp wiped weekly and allowed to dry before placing sterile items back on shelf.

**PROCEDURES**

- I. Inspection of Sterile Packages
  - A. All sterile packages must be inspected before use.
  - B. Do not use if the package is torn, wet, soiled, or covered with dust.
  - C. Sealed packages, if dropped, may be used if inspected to ascertain that contamination/spoilage has not occurred and the package integrity is maintained.
- II. Storage of Sterile Supplies to maintain package integrity
  - A. Sterile packages should **not** be crushed, bent, compressed **or kept in groups with rubber bands.**
  - B. Storage areas must be maintained in such a manner as to prevent splashing. For example sterile packages should not be kept near or under sinks or sewer pipes.
  - C. Sterile goods should be stored on designated shelves or containers, away from liquids, plumbing valves and traps. **Closed shelving is preferred.**
  - D. Materials must be stored 8"-10" from the floor (**not placed on floors**) and 18"-20" from the ceiling and/or sprinkler head.

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- E. Environmental conditions (e.g. humidity and ventilation) must be considered, along with effective and appropriate packaging (e.g. impervious materials) when storing sterile items.
  - F. Ideally, the number of times an item is handled between sterilization and actual use is three or fewer times.
- III. Maintenance/rotation of sterile items
- A. Sterile storage must be arranged to facilitate stock rotation. Stock must be rotated according to the principle “first in, first out.”
  - B. Sterile items remaining on shelves and unused for **over one year** should be evaluated for continued use. In addition, inventoried items with slow turn over should be carefully evaluated to determine the necessity of stocking item.
- IV. Housekeeping in storage areas
- A. Floors must be wet vacuumed or wet mopped once daily or as often as necessary.
  - B. Shelves must be cleaned weekly.
  - C. Walls and ceilings must be cleaned as necessary.
  - D. There must be no sweeping, dry mopping, or dry dusting within the area.
- V. Distribution of Sterilized Articles
- A. All delivery carts must be covered during transport of sterile supplies.
  - B. All sterile items must be transported in a designated cart.

### **REFERENCES**

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### **SPONSOR**

- Medical Care Evaluation Committee

### **DEVELOPER**

- Hospital Epidemiology and Infection Control

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**COMMUNICATION & EDUCATION**

This policy will be communicated to the appropriate JHHS personnel via the following channels:

1. Supervisor/Department Managers Ensure employee compliance with this policy.
2. Hospital Epidemiology/Infection Control will include education about this policy in Nursing Orientation and unit-based education.
3. This policy will be placed in the Interdisciplinary Clinical Practice Manual on the JHH Intranet site <http://www.insidehopkinsmedicine.org/icpm>. Paper distributions will be made to the Functional Unit Nursing offices in the event of web access difficulty.
4. Placement of policy online at [www.hopkins-HEIC.org](http://www.hopkins-HEIC.org)

<b>REVIEW CYCLE</b>	■ Three (3) years	<b>MEDICAL BOARD</b>	Approval Date: 4/27/04 Effective Date: 5/31/04
VICE PRESIDENT FOR NURSING & PATIENT SERVICES  <hr/> Date:		VICE PRESIDENT FOR MEDICAL AFFAIRS  <hr/> Date:	

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