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THE ASSOCIATION OF IMMEDIATE-USE STEAM STERILIZATION WITH THE INCIDENCE OF ORTHOPAEDIC SURGICAL SITE INFECTIONS. A PROPENSITY SCORE-MATCHED COHORT STUDY

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### **Appendix**

### **Supplemental Methods:**

System Sterile Processing and Logistics

### GENERAL STATEMENT of PURPOSE

The purpose of this document is to ensure consistency in the performance and safe operation of Immediate Use Steam Sterilization (IUSS).

### **POLICY**

It is the policy of Northwell Health that Immediate Use Steam Sterilization (IUSS) must be kept to a minimum; used only in an emergent procedure and when authorized by a nominated member of the management team.

### **SCOPE**

This policy applies to all Northwell Health employees, as well as medical staff, volunteers, students, trainees, physician office staff, contractors, trustees and other persons performing work for or at Northwell Health; faculty and students of the Donald and Barbara Zucker School of Medicine at Hofstra/Northwell or the Hofstra Northwell School of Graduate Nursing and Physician Assistant Studies conducting research on behalf of the Zucker School of Medicine on or at any Northwell Health facility.

### **DEFINITIONS**

**Emergent Procedure-** "Emergent" is defined as a clinical situation in which any delay incurred places the patient at risk of imminent harm to life, or serious threat to health.

Immediate Use Steam Sterilization (IUSS) - Describes sterilization of unwrapped devices for immediate use (not intended to be stored for later use). "Immediate use" is broadly defined as the shorted possible time between a sterilized item's removal from the sterilizer and its aseptic transfer to the sterile field. Immediacy implies that a sterilized item is used during the procedure for which it was sterilized and in a manner that minimizes its exposure to air and other environmental contaminants.

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### **PROCEDURE**

- 1. All Immediate Use Steam Sterilization require approval from Perioperative Leadership Team and/or designee.
- 2. Manufacturer's instructions for any device must support the use of IUSS.
- 3. If an item falls on the floor intra-operatively, every effort must be made to obtain a sterile alternative device.
- 4. If a sterile replacement is unavailable, then the contaminated instrument must be decontaminated in the sub-utility room with an enzymatic detergent according to Policy #SSPL1.2.1732, *Safe Handling and Decontamination of Soiled Instrumentation*.

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- 5. Select the appropriate cycle for the device being sterilized, either 4 minutes at 270°F/132°C for all non-porous, non-lumen items, or 10 minutes at 270°F/132°C for all items with a lumen, porous, or any item in an immediate use steam sterilization pack (always consult the manufacturer's instructions).
- 6. If the sterilizer is not located adjacent to the OR the item must be placed in an immediate use steam sterilization pack for transportation and sterilized for 10 minutes. Before use confirm the daily BI test has been carried out on the sterilizer used and a satisfactory result obtained.
- 7. A class 5 or 6 chemical integrator must be used within each sterilization container or tray used for IUSS.

NOTE: Only authorized trained and competent personnel will operate IUSS processes and verify that all parameters have been met at the completion of the sterilization cycle and be responsible for completion of the appropriate documentation. These tasks will be performed by a suitably trained and competent individual.

- 8. IUSS items MUST be used immediately and not stored for later use.
- 9. The "Immediate Use Steam Sterilization Log" must be completed with the following information: a) Date & Time
- b) Sterilizer Number
- c) Item Sterilized
- d) Reason for using IUSS
- e) Patient Identification Sticker
- f) Signature of person verifying cycle
- g) Operating Surgeon Emergent Procedure Attestation

# NOTE: These logs will be collected, reviewed, and maintained for 7 years Refer to policy #100.97 Records, Retention and Destruction IUSS MUST NOT BE PERFORMED ON THE FOLLOWING DEVICES:

- a) Implants or surgical instruments, except in a documented emergency situation when no other option is available and written authorization from the surgeon.
- b) Post-procedure decontamination of instruments used on patients classified as "high risk" of having Creutzfeldt-Jakob disease (CJD) or similar disorders.

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- c) Devices or loads that have not been validated to the IUSS cycles available.
- d) Devices that are sold sterile and intended for single-use only.

### CLINICAL REFERENCES/PROFESSIONAL SOCIETY GUIDELINES

AORN Perioperative Standards 2014, Recommended Practice: Sterilization Recommendation IV pg 581-582

### REFERENCES to REGULATIONS and/or OTHER RELATED POLICIES

IAHCSMM 7th Edition, 2016

AAMI Guidelines (2013), ST: 79; Section 8: Sterilization for Immediate Use, 8.6.2-8.6.2.5

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### #100.97 Records, Retention and Destruction

### Supplemental Table 1: Reason for IUSS by SSI

		SSI		
Reason for IUSS	No	Yes	Total*	
Diabandan	121	3	124	
Bioburden	97.58%	2.42%	124	
Domagad Itam	8	0	8	
Damaged Item	100%	0%	8	
Failed Indicator	11	1	12	
failed illuicator	91.67%	8.33%	12	
Jole in Wysen on Filter	1,098	14	1 110	
Iole in Wrap or Filter	98.74%	1.26%	1,112	
naarraat I ahal	22	0	22	
Incorrect Label	100%	0%	22	
tom Dranned	294	2	206	
Item Dropped	99.32%	0.68%	296	
tom Missing Evon Troy	210	2	212	
tem Missing From Tray	99.06%	0.94%	212	
oto Two	156	6	160	
Late Tray	96.30%	3.70%	162	
AD's Instrument	83	2	85	
ad s instrument	97.65%	2.35%	63	
Manufacturer Guideline	1	0	1	
Tanulacturer Guidenne	100%	0%	1	
Missing Indicator/Filter	89	3	92	
missing mulcator/filter	96.74%	3.26%	92	
Other	70	0	70	
<i>J</i> uier	100%	0%		
Re-Use	1,045	24	1.070	
	97.75%	2.25%	1,069	
Vet Pack/Tray	208	3	211	
vet i ack/ i i ay	98.58%	1.42%	211	
Vrang Itam in Trav	14	1	15	
Vrong Item in Tray	93.33%	6.67%	15	
Cotal	3,430	61	3,491	

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Abbreviations: immediate-use steam sterilization (IUSS), surgical site infection (SSI).

Supplemental Table 2: Comparability of the groups before and after PSM by IUSS status

Variable		IUSS	non-IUSS	Mean Difference	Standardized Difference
<b>A</b> ( )	Before PSM	61.53	63.41	-1.87917	-0.12750*
Age (years)	Matched	61.53	61.14	0.39223	0.02661
Procedure	Before PSM	159.05	128-2	30.8506	0.36965*
Time (min)	Matched	159.05	160.63	-1.57402	-0.01886
DMI (1ra/m²)	Before PSM	30.3	30.06	0.2458	0.03639
BMI $(kg/m^2)$	Matched	30.3	30-28	0.02985	0.00442
Diobatas	Before PSM	0.148	0.1665	-0.01849	-0.0508
Diabetes	Matched	0.148	0.1529	-0.00482	-0.01325
Candan	Before PSM	0.4498	0.4235	0.02627	0.05298
Gender	Matched	0.4498	0.4504	-0.00057	-0.00114
LIDDO	Before PSM	0.2365	0.2976	-0.0611	-0.13842*
HPRO	Matched	0.2365	0.2289	0.00766	0.01735
FUSN	Before PSM	0.3902	0.2271	0.16312	0.35872*
FUSIN	Matched	0.3902	0.4104	-0.02014	-0.04428
TAM	Before PSM	0.0848	0.0868	-0.00202	-0.0072
LAM	Matched	0.0848	0.0754	0.00936	0.03341
Hospital Site	Before PSM	0.0017	0.0306	-0.02891	-0.23081*
# 1	Matched	0.0017	0.0023	-0.00057	-0.00453
Hospital Site	Before PSM	0.0043	0.0038	0.00048	0.00763
# 2	Matched	0.0043	0.0037	0.00057	0.00897
Hospital Site	Before PSM	0.0908	0.0771	0.01369	0.04939
# 3	Matched	0.0908	0.0859	0.00482	0.01739
Hospital Site	Before PSM	0.04	0.106	-0.06606	-0.25597*
# 4	Matched	0.04	0.0397	0.00028	0.0011
Hospital Site	Before PSM	0.042	0.0974	-0.05544	-0.21902*
# 5	Matched	0.042	0.0431	-0.00113	-0.00448
Hospital Site	Before PSM	0.4399	0.1489	0.29097	0.67358*
# 6	Matched	0.4399	0.4368	0.00312	0.00722
Hospital Site	Before PSM	0.0241	0.0353	-0.01123	-0.06615
# 7	Matched	0.0241	0.0261	-0.00199	-0.0117
Hospital Site	Before PSM	0.0034	0.0672	-0.06376	-0.35087*
# 8	Matched	0.0034	0.0028	0.00057	0.00312

<sup>\*</sup>Frequency Missing (N = 35)

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Hospital Site	Before PSM	0.1086	0.0966	0.01198	0.03949
# 9	Matched	0.1086	0.1021	0.00652	0.0215
Hospital Site	Before PSM	0.0559	0.1249	-0.06905	-0.24256*
# 10	Matched	0.559	0.604	-0.00454	-0.01594
ASA Class 2	Before PSM	0.4685	0.4904	-0.02183	-0.04371
ASA Class 2	Matched	0.4685	0.4575	0.01106	0.02214
ASA Class 3	Before PSM	0.4742	0.4552	0.01898	0.03806
ASA Class 5	Matched	0.4742	0.4824	-0.00822	-0.01649
ASA Class 4	Before PSM	0.0335	0.0226	0.01085	0.06574
ASA Class 4	Matched	0.0335	0.0346	-0.00113	-0.00687
ASA Class 5	Before PSM	0.0006	0.0004	0.00019	0.00897
ASA Class 3	Matched	0.06	0.09	-0.00028	-0.01308
Wound Class	Before PSM	0.9824	0.9921	-0.00971	-0.08671
Would Class	Matched	0.9824	0.9861	-0.00369	-0.03292
Emergency	Before PSM	0.0493	0.0347	0.01462	0.07292
Procedure	Matched	0.0493	0.0442	0.0051	0.02545
Endoscopic	Before PSM	0.0099	0.0066	0.00332	0.03669
Procedure	Matched	0.0099	0.0096	0.00028	0.00313
Troumo	Before PSM	0.0374	0.0365	0.00094	0.00498
Trauma	Matched	0.0374	0.0352	0.00227	0.01202
Clasura	Before PSM	0.9994	0.9985	0.00089	0.02808
Closure	Matched	0.9994	0.9994	0	0

Standard deviation of all observations used to compute standardized differences

**Abbreviations:** immediate-use steam sterilization (IUSS), American Society of Anesthesiologists (ASA), knee prosthesis (KPRO), hip prosthesis (HPRO), laminectomy (LAM), fusion (FUSN), propensity score matching (PSM), clean (C), clean-contaminated (CC), contaminated (CO), dirty (D).

<sup>\*:</sup> Indicates significant difference before PSM as compared to after PSM.

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Supplemental Table 3: Table of Implant IUSS by SSI

		SSI	
<b>IUSS of Implant</b>	No	Yes	Total*
No	3,138	57	2 105
NO	98.22%	1.78%	3,195
Vac	199	3	202
Yes	98.51%	1.49%	202
Total	3,337	60	3,397

<sup>\*</sup>Frequency Missing (N = 129)

**Abbreviations:** immediate-use steam sterilization (IUSS), surgical site infection (SSI).

### Supplemental Table 4: Table of Number of Items Sterilized Using IUSS by SSI

		SSI		
	No	Yes	Total*	
	2,219	41		
Full Tray	98·19 %	1.81%	2,260	
	317	8		
<b>Multiple Items</b>	97·54 %	2.46%	325	
	928	12		
Single Items	98·72 %	1.28%	940	
Total	3,464	61	3,525	

<sup>\*</sup>Frequency Missing (N = 1)

**Abbreviations:** surgical site infection (SSI), immediate-use steam sterilization (IUSS).

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### **Supplemental Table 5: Table of Indicator Tape by SSI**

		SSI	
	No	Yes	Total*
Negative	3,023	54	3,077
Negative	98.3%	1.75%	
Positive	438	7	115
	98.4%	1.57%	445
Total	3461	61	3,522

<sup>\*</sup>Frequency Missing (N = 4)

Abbreviations: surgical site infection (SSI)