President’s Message

Greetings,

Welcome Fall! Fall is a time for reflection. Don’t forget to take some time for you and view some beautiful foliage!

This Association is committed to sharing information that will assist you in your professional career development and allow you an opportunity to network with your peers.

Quarterly meetings are held in Winston-Salem, North Carolina or at a vendor’s place of business. Please see the specific brochure for each meeting.

In November, 2017, we will hold our fall meeting at the beautiful Hawthorne Inn in Winston-Salem, North Carolina. We invite all members from every state to join us. If you are not a member, we invite you to become one!

Lana L. Heecherf
NCAHCS-Past President 2017—2018

Winter is an etching, spring a watercolor, summer an oil painting and autumn a mosaic of them all.

Stanley Horowitz

The NCAHCS-P is now an affiliated chapter of the International Association of Healthcare Central Service Materiel Management
A review: How well do you know your basic surgical instruments?
Katrina Simpson, M.A., CST, CSPDT

Objectives:
- Identify the components and grades of a surgical instrument.
- List various classifications of surgical instrumentation.
- Describe how some general instrumentation are used in general surgical procedures.
- Define surgical instruments.

What are surgical instruments?
Surgical instruments are simple or complex tools used in the operative environment to perform various surgical procedures. Each surgical instrument has to undergo thorough inspection, cleaning, decontamination, and sterilization before they travel to the operative environment to be used on a surgical patient. Surgical instrumentation can also be used in emergency rooms, cath labs, labor and delivery suites, endoscopy suites, doctors offices, outpatient clinics, and more. Three distinct grades exist amid surgical instrumentation: surgical, floor, and disposable. Surgical instruments that can be reused and are made of the highest quality, originating from the United States and Germany are known as surgical grade instruments (Chobin, 2016). These instruments can last for several years. Floor grade instrumentation are also reusable instruments, however, with this grade, the instruments are created from stainless steel of a lower quality. Personnel may receive or contain surgical instrument kits in the emergency department, packaged and sterilized that are meant to be used only once. These are disposable instruments. Disposable instrumentation should never be resterilized and distributed to personnel for additional usage.
What are the various classifications of surgical instruments and how are they used?

There are nine distinct classifications of surgical instruments that will be discussed in this article and they all have specific functions. These classifications include: cutting/dissecting, clamping/occluding, grasping/holding, retracting/exposing, viewing, suturing/stapling, suctioning/aspirating, dilating/probing, and minimally invasive/laparoscopic. Instruments used to cut and dissect are typically knife handles or scissors. These instruments are specifically used to cut or dissect human tissue, and vessels. These instruments can also be used to cut sutures, surgical drains, dressings, or grafts. Before the surgical technician releases items to be delivered in the decontamination room, it is critical that all blades are removed from knife handles to prevent occupational hazards. Surgical instrumentation used to clamp and/or occlude are primarily used to clamp off bleeding vessels. This creates hemostasis. These instruments can also be used as tubing clamps, which occlude tubes. Common instruments used in the operative environment in this category are hemostats and Kelly or pean clamps. These instruments can come curved or straight.

Surgical instruments used to grasp and hold are typically surgical forceps, allis and babcock forceps. Unlike clamping and occluding instruments, these instruments are designed to pick-up, hold, or grasp human tissue, not occlude it. Retracting and exposing
Instruments are used in surgical procedures to retract back small or large organs or skin so that the surgical team has good exposure of the portion of the body being operated on. These surgical instruments come in various sizes and shapes. Some of the most common general retracting/exposing instrumentation are deavers, army-navy, goulet, harrington, and malleable retractors. Surgical instrumentation used for viewing are doing what the names states: “viewing” inside of orifices. Viewing instruments can view inside the nostrils, anus, or ear canal.

Suturing and stapling surgical instruments are used to reapproximate human tissue or vessels. Surgical technicians must ensure that surgical needles are not attached to suturing device once contaminated items are sent down to the decontamination department to decrease the risk of workplace hazards.

Surgical instruments used to suction or aspirate remove bodily fluids and/or excessive blood that may hinder optimum view of the surgical site. After wounds are irrigated, the surgical team may use a surgical instrument to suction excessive fluids from the surgical patient. Some common general instrumentation used for suctioning/aspirating are the poole and yankauer suction tips. Instruments used to dilate and probe are often used in genitourinary or gynecological procedures. These surgical devices can also be used in general procedures such as pilonidal cyst. Most commonly, these cyst are located at the tailbone of the male or female patient and are composed of hair and skin debris that form an abnormal cyst pocket in the skin (Mayo Clinic Staff, 2017). Once the cysts become infected it can become a very painful abscess resulting in the need for a surgical intervention. Although, these cyst occur in women, they more often occur in men and may be reoccurring (Mayo Clinic Staff, 2017). During the surgical procedure, the surgeon inserts a probe creating an opening for the abscess to drain properly to facilitate healing. Finally, minimally invasive or laparoscopic instrumentation are used to minimize scarring and creates a reduced recovery time. According to Chobin (2016), laparoscopic surgical procedures are much safer than traditional open procedures. Laparoscopic or minimally invasive procedures are performed through fine surgical incisions just big enough to insert specialized abdominal trocars. These trocars are used to serve as a gateway to the inside of the abdominal cavity. Long minimally invasive instruments are inserted through these trocars to repair or remove tissues or organs. Common minimally invasive procedures include laparoscopic cholecystectomies (Lap Chole) and appendectomies (Lap Appy). The sterile processing technician must be properly trained on how to disassemble these devices because their structures can make them difficult to clean.
What are the various components of the surgical instrument?
When discussing the anatomy or components of the surgical instrument the components of the hand-held instruments are commonly identified. The basic surgical instrument has jaws, a joint, shanks, finger rings, ratchets, and in scissors screws. Surgical instruments that clamp and occlude, cut and dissect have these components. The jaw is the area of the needle driver in which the surgical needle comes in direct contact. The jaw of the instrument also comes in direct contact with the patient (Chobin, 2016). The joint is where the box lock or screw is located and causes the instrument to hinge (Chambers & Roche 2010). The box lock is also the weakest component of the surgical instrument. The shank provides length to the surgical instrument in addition to a closing force. The longer the shank, the deeper the surgeon can go into the human cavity. The ratchet of the surgical instrument is very difficult to clean (Chobin, 2016). This component also closes the surgical instrument. On needle drivers, the ratchet allows the jaws to clamp down on the surgical needle. The actions of the jaw are controlled by the finger rings by an open and close motion. The surgeon inserts their fingers inside of the finger rings to manipulate the instrument in surgery. All components work together for effectiveness and proper functioning.

References
A review: How well do you know your basic surgical instruments?
Post-Test 2017

1  Surgical grade instruments are made from high quality.
   TRUE     FALSE

2  Disposable instruments should only be used one time.
   TRUE     FALSE

3  One of the classifications of surgical instruments are clamping/occluding.
   TRUE     FALSE

4  Surgical scissors can be used to cut grafts.
   TRUE     FALSE

5  Dilating and probing instruments are never used in general surgery procedures.
   TRUE     FALSE

6  Instruments used for suctioning and aspirating are frequently used when there is minimal blood in the cavity.
   TRUE     FALSE

7  A Lap Appy is primarily performed using probing instrumentation.
   TRUE     FALSE

8  One of the strongest components of the surgical instrument is the box lock.
   TRUE     FALSE

9  Box locks are fairly easy to clean.
   TRUE     FALSE

10 Instruments can be manipulated in surgery once the surgeon grasps the finger rings.
   TRUE     FALSE

To receive one CEU credit, complete the quiz and send this page only, via normal mail:
   Lana Haecherl
   P. O. Box 568
   Pineville, NC  28134-0568

Your certificate will be sent via email if your score is greater than 70%. If you are not a member of NCAHCP, please include a
fee of $20.00 along with your Membership Application, found on the website (www.ncahcsp.org). Please allow at least six weeks
for processing.

CEU Expiration Date: August 31, 2022

PRINT NAME CLEARLY: __________________________________________

E-MAIL ADDRESS: _________________________________  □ (New e-mail address)

PHONE NUMBER: _______________________________
Oven Roasted Root Vegetables

1 large butternut squash, halved seeded and peeled
3 large Yukon gold potatoes
1 bunch of medium size beets, tops trimmed
1 medium red onion
2 large parsnips
6 cloves of garlic, peeled
2 T of olive oil
1 ½ t Kosher Salt
Freshly Ground black pepper

Place 2 baking sheets in oven and preheat to 425 degrees F

Cut all vegetables into 1 ½ inch cubes
Toss with the garlic and olive oil
Season with salt and pepper

Remove preheated baking sheets from oven. Brush pan with olive oil. Divide the vegetables evenly between the 2 pans spreading them out. Roast until golden brown or about 45 minutes

Enjoy

Tammy Franklin
Dear Steamie,

I work in a Dental Office and wanted to see if you could share some information on the correct processing of Dental Instruments? Is there a specific group that regulates this?

Dear Dental Tech

Thanks for your question. As always, the first process should be to review the manufacturer’s guidelines and instructions on reprocessing. Best Practices for the reprocessing of Dental Instruments come from, Centers for Disease Control (CDC), the American Dental Association (ADA) and the Joint Commission. Protocols for sterilization and disinfection differ according to the category of contamination. According to the CDC, dental instruments are classified using the following:

Critical- Instruments that are used to penetrate soft tissue or bone or enter into or contact the bloodstream or other normally sterile tissue. Sterilization must be achieved by either steam, dry heat or chemical vapor. Examples are:
Forceps, Scalpels, Bone Chisels, Scalers and dental burrs.

Semi Critical-Instruments that do not penetrate soft tissue or bone, but contact mucous membranes or non-intact skin. These should at a minimum undergo HLD or High Level Disinfection or sterilization. Examples are: Mirrors, Impression Trays and amalgam condensers.

Non Critical-Equipment that come only in contact with intact skin. Examples are: X-Ray heads, pulse oximeters, blood pressure cuffs etc. These items only require a low level disinfection.

Hope this information is helpful.

Steamie

- Please submit your questions to Dear Steamie.
- Please allow six weeks for CEU processing and plan accordingly.
Future Education Meetings

The Winter meeting is February 16, 2018 in Haw River, North Carolina at Anderson Products.

The annual meeting starts on April 18, 2018 in Myrtle Beach, South Carolina at the Hilton.

Visit our website www.ncahcsp.org You’ll find details as well as brochures and registration information. We are now IAHCSMM (www.iahcsmm.org) affiliated!
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If you are interested in serving on a committee please contact Lana Haecherl

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