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PURPOSE:

The purpose of this Policy and Procedure is to provide criteria and guidelines for sterile packaging and storage in the use of hospital and/or manufactured sterile items which are enclosed in a plastic/paper peel pouch, non-woven sterilization wrap, plastic wrap, and instrument containers. Also included in this Policy and Procedure is our statement regarding commercially prepared items labeled as "Single Use Only."

ACTION	KEY POINTS
Inspection of sterile packaging in an ongoing process. All sterile items will be inspected prior to opening onto the sterile field to insure package/container integrity is not compromised.	
The stock shall be rotated with the oldest item used first.	Stock rotation of sterile items help control supply volumes and decreases opportunities for contaminating events to occur.
Sterile Package Storage Conditions Sterile Packages should be stored under environmentally controlled conditions. A. Sterile Storage area temperature should be controlled and should not exceed 75°F (24°C) B. Humidity should not exceed 60% C. Minimum of six to ten air exchanges per hour, and air flow should be under positive pressure related to adjacent area D. Sterile items should be stored at least 8-10 inches above the floor, and in consideration and compliance of local fire codes.	
Commercially Prepared Items	
A. The expiration date of commercially prepared items will be as	

indicated on the package by the company, unless the integrity of the packaging material has been compromised, i.e. opened, wet, crushed, torn, punctured, broken or missing seal, is damaged in some other way, or is suspected of being compromised – discard as appropriate or contact supply purchaser for reprocessing information.	
B. Commercially prepared items that do not have an expiration date will be considered "sterile" and safe for patient use unless the integrity of the packaging material is compromised i.e. opened, wet, crushed, torn, punctured, broken or missing seal, is damaged in some other way, or is suspected of being compromised.	B. When the integrity of the item is determined to be compromised--open, wet, crushed or torn-- this packaging is to be saved and returned to the Sterile Processing Department supervisor.
C. Devices labeled as "single use only" will be disposed of after use. Single use items that have been opened and unused will also be disposed of. If a single use item reaches its expiration date and the item appears intact, the manufacturer will be contacted about extending the date or replacing the item.	C. Items labeled as "single use only" will be discarded after use.
Procedure for Hospital Sterilized Items	
A. Hospital sterilized items properly wrapped and processed will be considered "sterile" and safe for patient use as long as the package integrity is not compromised, i.e. opened, wet, crushed, torn, punctured, broken or missing seal, is damaged in some other way, or is suspected of being compromised.	A. When the integrity of the blue wrap on sterile trays is determined to be compromised--open, wet, crushed or torn-- this packaging is to be saved and returned to the Sterile Processing Department supervisor.
B. A load sticker will be placed on each sterile package for recall purposes only. The load sticker will include the sterilization date, the sterilizer number, and the load number. a. The Sterile Processing department employee who prepares the package for sterilization will also place his/her initials on the package/canister.	
C. All hospital processed items will be properly wrapped and processed in such a manner so as to provide an effective barrier to microorganisms. All items will include a sterilization indicator, both internally and externally. All packages will be inspected by the user before the package is opened. Visual verification of the external indicators exposure to sterilization will be verified with each item.	
D. Supplies will be rotated to ensure previously processed items are used before those more recently processed.	
E. Some items will remain on storage shelves for varying lengths of time. These items will be placed in plastic dust covers. The dust cover should be wiped off or removed before the item is used.	

REFERENCES:

"Recommended practices for Packaging Systems," in *Perioperative Standards and Recommended Practices For Inpatient and Ambulatory Settings* (Denver:AORN, Inc, 2013

"Recommended practices for Sterilization," in *Perioperative Standards and Recommended Practices for Inpatient and Ambulatory Settings*(Denver:AORN, Inc, 2013.

Retzlaff, K., Llewellyn, I. & Wiggy, Z. (2013). Recommended Practices for Packaging Systems, *Perioperative standards and Recommended Practices, 2013 Edition, Denver, Co: AORN.*

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Attachments:

No Attachments

Approval Signatures

Approver	Date
Chase Walters: Director, Education	12/2016
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