Traceability in sterilization is an essential element allowing to have all the information of the process at any time. The collected data is of significant size and its analyzes is time-consuming.

The use of an automatic query and distribution tool makes it possible to target the information sought, to save time and to transmit the information efficiently.

The implementation of this system has had a very positive result on our hospital because communication is an essential element between the sterilization unit and the operating blocs. Likewise, the automation of this system made it possible to anticipate and solve faster the problems related to our activity.

Aim

Traceability in sterilization is an essential element allowing to have all the information of the process at any time. The collected data is of significant size and its analyzes is time-consuming.

The use of an automatic query and distribution tool makes it possible to target the information sought, to save time and to transmit the information efficiently.

Methods

In order to carry out this type of operation, it is necessary to have a traceability software (Ecosoft® edited by MMM), an automatic query software, and a computer scientist mastering the database and its functioning.

A working group has been set up with computer scientists and pharmacists in order to target the information sought, to formulate queries and to test the results.

Several queries have been put in place with automatic mailing to the various actors involved:

- Daily query indicating the list of non-sterile reusable medical devices at 6:00 am, sent to the chiefs of operating blocks and pharmacists.
- Daily query indicating the list of missing or "to be checked" instruments by package at 8:00 am, sent to the chiefs of operating blocks, to operating room nurses and pharmacists.
- Daily query indicating machine defects at Day - 1 sent to pharmacists.
- Daily query indicating the production status at 5:00 pm and 7:00 pm sent to pharmacists.
- Monthly billing indicating the invoices for external hospitals sent to pharmacists and financial services.

Results

This tool has made it possible to optimize our methods of work and communication. The operating blocks have thus the necessary information on the equipment before the first operation.

Decision-making is thus faster, helping to reduce organizational stress and to improve the quality of life at work.

It also allowed us to have a global view of our activity and to improve our action plans. In the span of 3 years, we decreased the number of adverse events reports by 3 and the number of missing instruments by 3.

This system will allow us, in the long term, to adapt and prioritize the management of certain packages according to the time of day and the expected volume to be sterilized.

Conclusion

The implementation of this system has had a very positive result on our hospital because communication is an essential element between the sterilization unit and the operating blocs.

Likewise, the automation of this system made it possible to anticipate and solve faster the problems related to our activity.