Low-level disinfection wipes are not approved by any regulatory bodies in North America for high-level disinfection of transvaginal probes

If a patient ever suggested they acquired an infection from the ultrasound exam, how could you prove otherwise?

If you are only using low-level or intermediate-level wipes or sprays to disinfect your probes, you could be putting your patients at risk.

Standards and guidelines in the United States and Canada require that probes used in endocavitary procedures must minimally undergo high-level disinfection (HLD) before they are used on the next patient.[1-3]

The AIUM Guidelines for cleaning and disinfection of ultrasound probes state “Routine high-level disinfection of internal probes between patients is mandatory.”[4]

Disinfection considerations to mitigate risk for patients, staff, and equipment

Does your disinfection solution kill HPV?

HPV has been shown to cause 99% of cervical cancers, yet there is conflicting evidence regarding whether common soaking disinfection methods such as glutaraldehyde and ortho-phthalaldehyde are effective at inactivating this virus on surfaces.[5-7]

Risk of contamination was almost 3X higher when comparing wipes with trophon technology.[8]

Are you confident your team is adequately disinfecting your probes every single time?

Manual disinfection is inconsistent. A recent study showed manual disinfection using wipes missed hard to reach areas and did not fully high-level disinfect the probe.[11] It only takes one inadequate disinfection to put patients at risk.

Automated high-level disinfection controls key variables and reduces the risk of human error, making it more reproducible than manual methods.

Is your disinfection protocol safe for your staff?

HLD foam and wipe solutions potentially expose users to harmful levels of chlorine dioxide and must be limited to 20 procedures per day per their own Instructions For Use (IFU) and federal guidelines.[9,10]

Is your disinfection protocol safe for your ultrasound probes?

Many chemical solutions are incompatible with certain probe materials, eventually leading to probe damage.[9]

Repeated manual wiping can lead to physical abrasion and probe damage.[11]

Is your disinfection solution impacting patient fertility?

Introduction of microbes into the female reproductive environment due to insufficient disinfection can cause dysbiosis and potentially lead to failed fertility cycles, infection, and adverse pregnancy outcomes.[12-14]

Are you using wipes?
Make sure to check the IFU on the wipes pack.

This product is not to be used as a terminal sterilant/high level disinfectant on any surface or instrument that (1) is introduced directly into the human body, either into or in contact with the bloodstream or normally sterile areas of the body, or (2) contacts intact mucous membranes but which does not ordinarily penetrate the blood barrier or otherwise enter normally sterile areas of the body. This product may be used to preclean or decontaminate critical or semi-critical medical devices prior to sterilization or high level disinfection. EPA / FDA MOU1.

If you're using wipes or spray to disinfect your probes, you could be putting your patients at risk.

These manual processes take up your valuable time and have the potential to miss hard to reach areas – meaning your probe isn't properly high-level disinfected.[15]

Business card

To speak to an ultrasound disinfection expert, visit www.nanosonics.us/WomensHealth

or scan this QR code

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