

Assessment of hygiene practices related to radiopharmacy shielded workstations

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Introduction – Objective

- Most of scintigraphy examinations require injection of radiopharmaceuticals (RP) prepared with aseptic conditions in:
 - ✓ An automated dispenser (AD)
 - ⇒ positon emission tomography radiotracers
 - ✓ A low-energy shielded workstation (LEW) ⇒ low-energy emitters
- Aim of this work: assess hygiene **practices** of pharmacy technicians (PT) and electro-radiology technicians (ERT)

Material and methods

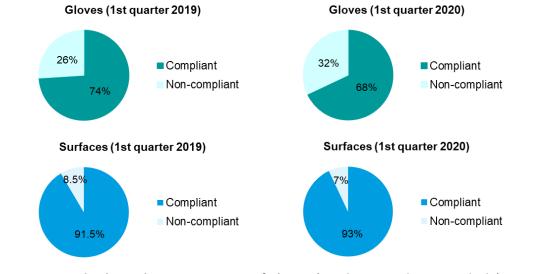
- Analysis of one-year results of surfaces and gloves' microbiological
- **Evaluation grid** drafted from this analysis and hygiene procedures in force
 - ✓ 25 items for PT (working only on LEW)
 - √ 45 items for ERT
- Microbiological surfaces and gloves' controls
- Audit: pharmacy resident evaluated each technician, integrated data into Excel® and analyzed results

Results

3 months (1st quarter 2020) ⇒ 18/22 technicians evaluated

- Technicians' clothing: 89% compliant
- LEW:
 - Non-sterile devices were correctly biodecontaminated at 82%
 - Daily cleaning: all steps were carried out according to existing procedures
- **AD:** daily cleaning steps: 93% compliant
- Professionals' knowledge about cleaning products: 100%

- Hand hygiene: only 17% when entering the unit
- LEW:
 - Gloves and surfaces not disinfected before starting activity at 82%
 - Daily cleaning: cleaning from the back to the front not followed at 36%
- **AD:** weekly cleaning ⇒ not cleaned the entire interior surface (20%) and not disinfected gloves (80%)
- Cleaning products' use not uniform
- Microbiological controls: not improved during audit



Major microbiological contamination of gloves (stock renewal not regularly)

Discussion – Conclusion

- didn't affect technicians' behavior
- Assessment highlighted:
 - Practices deviances and inhomogeneity, particularly on cleaning products' use ⇒ cleaning products' use defined (isopropyl alcohol and detergent-disinfectant)
 - Hygiene procedures too complex ⇒ reviewed to automate and harmonize practices
- Corrective action for gloves ⇒ implement an annually turn-over
- Audit results presentation and new hygiene procedures information to the staff ⇒ continuing professional development
- Pedagogic flyer on microbiological results will be shown monthly

Example: Presentation of april's microbiological results

