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Celebrating Hearts

February was American Heart Month. Heart disease is the leading killer of Americans, taking the lives of 2,200 people each day. Also, 6.5 million are living with heart failure. Sterile Processing Technicians play a vital role in providing our surgeons and their staff with the vital instruments needed to serve our patients suffering the effects of cardiovascular diseases. This newsletter will bring some focus to the importance of the instruments we process and the story behind some of those familiar names we see every day. Our dedicated teams keep hearts beating every day!

The President's Message

Salutations WWCI members

Welcome to the winter wonderland of February and March.

When I think of February, I think of Valentine's Day, not snow, blizzard conditions or -30+ degrees. Valentine's day as a nation we are very passionate in sharing feelings with our loved ones. Approximately 180 million cards are sent, and 196 million roses bought.

That passion drives our actions and desire to make a difference in the world, one step at a time. I bring a similar passion to many aspects of my life, and I believe that many of you carry that passion for your departments and work flow.

Central Sterilization is the heart of the Hospital. We are the rhythmic beat of care, making sure that surgical patients are provided safe surgical tools. We make sure patients receiving minor procedures in their doctor's office have needed items and sterile supplies. We provide high quality service that is all part of patient care. We must celebrate while continuing to adapt and learn new technology to keep current for advancements in our field. You can't put a price on a healthy heart, but we can make sure we bring good habits and safe practices through education and awareness to best practice.

Take every opportunity to learn, grow, and expand your knowledge. Our spring workshop March 22 & 23rd has wonderful speakers to provide information and learning. The National IAHCSSM conference April 26-May 1 is another huge learning and networking experience.

I challenge you to find new opportunities to expand your knowledge through courses online, obtaining certifications, or networking with other Central Sterilization staff members near and far. Our career choice of the medical field changes every day, and knowledge is never lost, but built stronger as we grow in our profession.

Wishing you a happy spring

Peggy Barak

WWCI President



FEBRUARY CHAPTER MEETING

At our Feb meeting our education was on the AAMI ST79 self-assessment tool regarding Quality Processing Improvement that referred to section 14.2 of ST79 of the AAMI Standards. We had additional questions on how to meet the Quality Process Improvement standard. Marilyn Michels investigated, and we have the scoop on what she found.

This is a follow-up from the WWCI meeting held on February 27, 2019 at Gundersen. There was a discussion about a particular section in the AAMI ST79 self-assessment tool regarding 'Quality Process Improvement' that referred to section 14.2 of ST79 of the AAMI Standards. There was a general lack of understanding on how to meet this standard.

Upon review of this section of the standards I have come to appreciate even more the working relationship that is needed between Central Service staff and the Infection Preventionist. This section talks about the value of having a risk analysis done and a review of all the components in the self-assessment by a party outside of Central Service.

It also includes conducting a risk assessment with key stakeholders to identify the probability of potential threats, measures in place to safely process an item and the severity of consequences when there is a failure. This may be accomplished by conducting a Prospective Risk Analysis or a Failure Mode and Effect Analysis. Disciplines that have some experience with conducting a Prospective Risk Analysis (aka Hazard Vulnerability Assessment [HVA]) may include Infection Control, Quality, Safety or Emergency Management.

This assessment process needs to be multidisciplinary and include representation from those that are vested in you providing a safe product for patient care. This may include a representative from Surgery, Clinic, Distribution, Maintenance, Nursing, Risk Management, Quality, Nursing, Infection Control, Environmental Services, Dental, etc.

The first step in accomplishing this may be partnering with your Infection Preventionist and completing the self-assessment. The next step would use the self-assessment tool for the framework to develop the Prospective Risk Analysis. Once the tool

for the Prospective Risk Analysis is developed, have the multidisciplinary team conduct the risk analysis and identify the top risks that need to be resolved. And finally, once the risks have been identified, develop a corrective action plan to reduce the identified risks and take action.

The AAMI standards indicate that a risk analysis should be completed annually and so this becomes a continuous improvement process to reduce risk to our patients.

Reference

AAMI ST79 Section 14.2.1

A risk analysis should be completed for all aspects of steam sterilization to identify any risk that could occur to personnel or patients. The problem risk analysis should identify, define and quantify the risk and identify actions that can be taken to resolve or prevent the risk. The system should be monitored to ensure that the risk has been corrected or prevented.

There should be a planned, systematic, and ongoing process for verifying compliance with procedures. Quality processes can be enhanced by audits that are conducted on a regular basis. The information from these activities should be summarized and made available to appropriate individuals or groups/teams.

According to FDA, a quality audit "means a systematic, independent examination of a manufacturer's quality system that is performed at defined intervals and at sufficient frequency to determine whether both quality system activities and the results of such activities comply with quality system procedures, that these procedures are implemented effectively, and that these procedures are suitable to achieve quality system objectives."

Marilyn Michels RN MSN CIC

Marilyn works in Infection Control with Gunderson Health System in La Crosse, Wisconsin.



Hosted by Alex Edwards of Today's WAXX 104.5

This walk is a fun filled day and a kid friendly event. You can come as you are or dress in costume, form a team or walk as an individual. Join us for a day of fun, food, friendship and prizes all while making a difference and brining awareness to NF.

Neurofibromatosis (NF) is a common neurological genetic disorder that has no cure. It can cause tumors to form on the nerves anywhere in the body at any time.

Nearly three million people worldwide have NF and, yet you have probably never heard of it. It affects more people than Muscular Dystrophy, Tay-Sachs and Huntington's disease combined, and it is estimated to occur in one of every 2,500-3,000 births.

Neurofibromatosis can be a devastating disorder. It can cause learning disorders, scoliosis, seizures, severe pain, cancer, disfigurement, deafness, blindness, and those are just a few things that affect NF patient's daily, and sadly in the case of many it can also lead to death.

By getting involved you can give those affected by NF hope that the cure is not that far off in the future. Come and enjoy the food, music, fun, and prizes all while making a difference in the fight against NF.

Kickin it in the Park for NF is Saturday May 18, 2019

Irvine Park, Chippewa Falls Main Pavilion

Registration and Fun starts @ 10 a.m. Walk at 11, lunch to follow

Preregister by April 26th and get a t-shirt at the walk

(\$20 in advance*/ \$25 day of event, kids 4-12 \$12 & 3 and under are free)



Upcoming Chapter Events & Certifications

Member New Certifications

New CIS certification member is:

Leslie Kronstedt

New Triple Crown Certification Chapter Member:

Leslie Kronstedt

The pursuit and achievement of certifications helps technicians follow best practices and stay ahead of the technology curve. Certified professionals truly demonstrate a commitment to education, development, and to the profession. Congratulations!



Upcoming Conferences To Plan For Now

- **2019 Spring Chapter Conference**
 - March 22 and 23, 2019 at Sacred Heart Hospital
 - Registration Deadline is March 8, 2019
 - 10 CE's can be earned for the conference

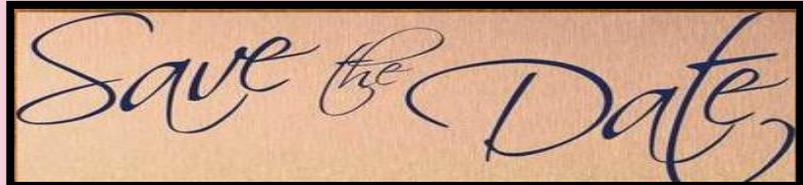
www.WWCIAHCSMM.org

- **National IAHCSSM Conference**
 - April 27 – May 1, 2019 in Anaheim California.

Book your reservation and hotel accommodations now

IAHCSSM CURRENTLY OFFERS FIVE
(5) CERTIFICATIONS

CRCST CIS CER CHL CCSVP



Upcoming 2019 Meeting Dates and Events are:

March 22 & 23 - Spring Workshop at Sacred Heart Hospital - Eau Claire

March 22 - Chapter meeting following the Workshop - Sacred Heart Hospital - Eau Claire

April 28 - May 1 - Annual National IAHCSSM Conference - Anaheim CA

June 4th - Sacred Heart Hospital - Eau Claire

August 8th – Gunderson Health System - La Crosse

October- Open

December 13th - Marshfield Library – Marshfield

Reminder- If you would like to host a chapter meeting please contact westernwi09@gmail.com

SHOOTING FOR THE STARS WITH GROWTH, DEVELOPMENT, & LEADERSHIP

IAHCSMM'S TRIPLE CROWN CERTIFICATION

Last fall, I obtained my third IAHCSMM certification and became known as a triple crown holder. What is a triple crown certification exactly? Over 30,000 individuals currently hold CRCST status with IAHCSMM, but as of last year only 11% have also achieved a second certification. Even fewer (just 2%) hold all three certifications! In 2018 IAHCSMM launched the CER (Certified Endoscope Reprocessing) certification creating the Gold Crown for four certifications.

Certification as a CRCST, CIS, CHL, and/or CER helps to ensure that you possess the essential knowledge and skills necessary for managing critical departmental duties safely, effectively, and in accordance with the latest standards and best practices. Make it a goal to join these elite groups and earn the "Triple and Gold Crowns" to show that you have dedication to quality, safety and professionalism! For more information on obtaining certification, visit the Certification tab of IAHCSMM.org.

Leslie Kronstedt CRCST, CIS, CHL



Upcoming Elections

The election coming up at the March 22 meeting after the workshop, at Sacred Heart Hospital 5:00pm. If your unable to attend and need an absentee ballot to contact Bonnie Dahl: bbdahl@gundersenhealth.org Please take time to read the bios before the election. An email was sent on February 18, 2019.

President – Elect Nominees

EMILY MCDUGAL – GUNDERSON
HEALTH SYSTEM

LORI BUDTKE – MARSHFIELD
HEALTH SYSTEM

Secretary -Elect Nominee

NANCY HAMMES –
GUNDERSON HEALTH SYSTEM

Board Member Nominee

LORI COPPER – GUNDERSON
HEALTH SYSTEM



Cardiothoracic Surgical Instruments & the Legends who Made Them

Doctor Micheal Debakey (1908-2008)

performed the world's first successful coronary artery bypass in Houston Texas on November 23, 1964. Many people owe their lives to this man. Doctor Debakey's innovative artery grafts were first made in 1952 on his wife's sewing machine. They used Decron that they purchased at a fabric store. Doctor Debakey credited his mother with teaching him to sew, crochet, and knit that lead to the discovery.

Debakey literally saved his own life in 2006, when the repair for aortic aneurysm he pioneered was used to save him. At the time he was the oldest patient to undergo the procedure.

Debakey also invented the roller pump at age 23. A critical device that provided continuous blood flow during operations making open-heart procedures a reality.

Dr. Debakey began creating surgical devices in 1932 and the modes to use them. Many of the instruments we clean and prepare today in our sterile processing departments are the work of his labor of love.



Doctor Denton Cooley (1920 – 2016)

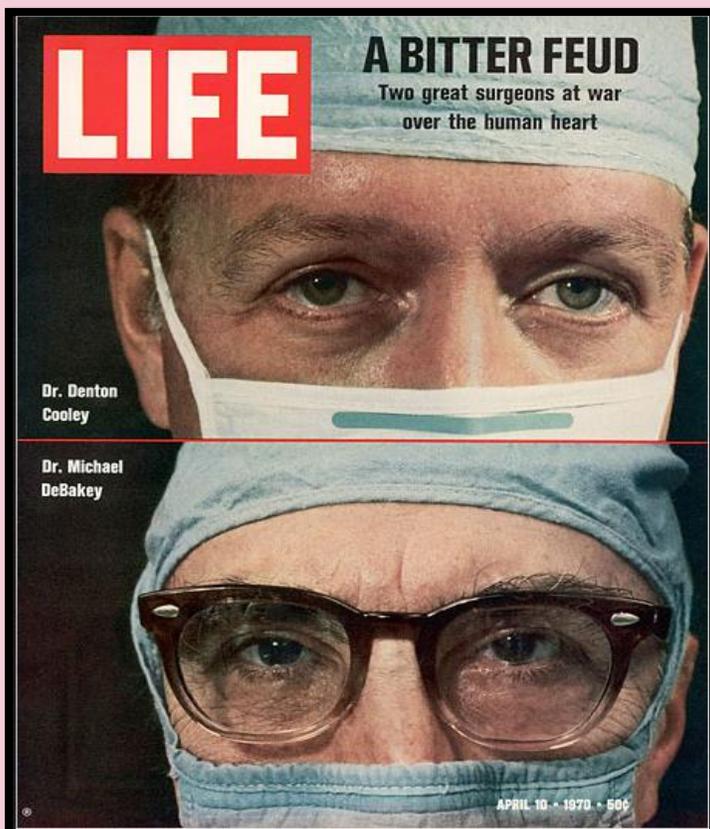
He began his surgical career under the direction of Alfred Blalock MD. He quickly earned a reputation for his surgical dexterity and intellect. Dr. Cooley later came under the supervision of another surgical great Dr. Debakey in 1952 at the Baylor College of Medicine, Houston Texas.

In 1986, Cooley completed the first successful heart transplant, one year later the first artificial heart. Dr. Cooley started a 40-year old feud the day he implanted the world's, first artificial heart. Dr. Debakey has been developing the total artificial heart and expected to be the first to implant one. A very public feud was born that pushed these giants into a race of epic proportions.

The Debakey and Cooley developed techniques to repair an aortic aneurysm and bypass blockages in the leg and neck. Cooley devised a method to reduce the amount of transfused blood needed when using DeBakey's heart & lung machine. Cooley was an expert in correcting congenital heart defects in infants and children.

Dr. Cooley had performed over 10,000 cardiac surgeries by 1972. He often was completing 25 operations in a day surpassing any other surgeon in the world.

Among his many contributions, Cooley developed several atraumatic vascular clamps that are still used daily in cardiac surgeries around the world.



Dr. Victor Satinsky (1912-1997) was the son of Russian immigrants, who was taken in by his 2 aunts and 2 uncles following the death of both of his parents when he was six-years-old. Victor, one brother, and two sisters grew up with between two sets of remaining family members. There were 19 cousins all together under two roofs. His uncle encouraged him to attend college to be a doctor as a response to the economic hardships of the great depression.

During his World War II service, shortly after D-day, Satinsky and his commanding officer opened the chest wound of a soldier. They discovered shrapnel in the man's heart. With encouragement from Satinsky the two men successfully removed the object from the heart creating a lifelong passion for cardiothoracic surgery.

Following the war, Victor returned home to Philadelphia to begin his career. From 1946 to 1977 he was credited with 30 major medical innovations including operational procedures and improving existing techniques. He is most remembered for developing coronary bypass. The famous Satinsky clamps are now the standard instrument used in vascular surgery.



Doctor Willis Potts (1895 – 1968) financed his medical career by working on his family farm. He matured quickly and developed a good work ethic since his father died shortly after his birth. Early in his career Doctor Potts focused on his passion for pediatric surgery in Chicago, IL. He had left to continue his training in Boston, MA when it was interrupted for his service in World War II. He completed his training upon his return.

Potts settled in at the Children's Memorial Hospital in Chicago and quickly began to make a name for himself in pediatric cardiovascular surgery. In 1946, Potts developed the procedure to treat tetralogy of Fallot that bears his name: a shunt for the palliation of cyanotic babies that involved a direct connection of the descending aorta with the left pulmonary artery.

Most remarkable was the fact that Potts would often perform this procedure without a fee. For those who knew Potts, he was an imposing figure who stood 6 feet 2 inches tall, with large hands and long fingers; thus, out of necessity, Potts developed a number of fine scissors and forceps, still used today to create anastomoses between delicate vessels

When Dr. Potts began, he was the only pediatric heart surgeon in America. When he retired there was 75.

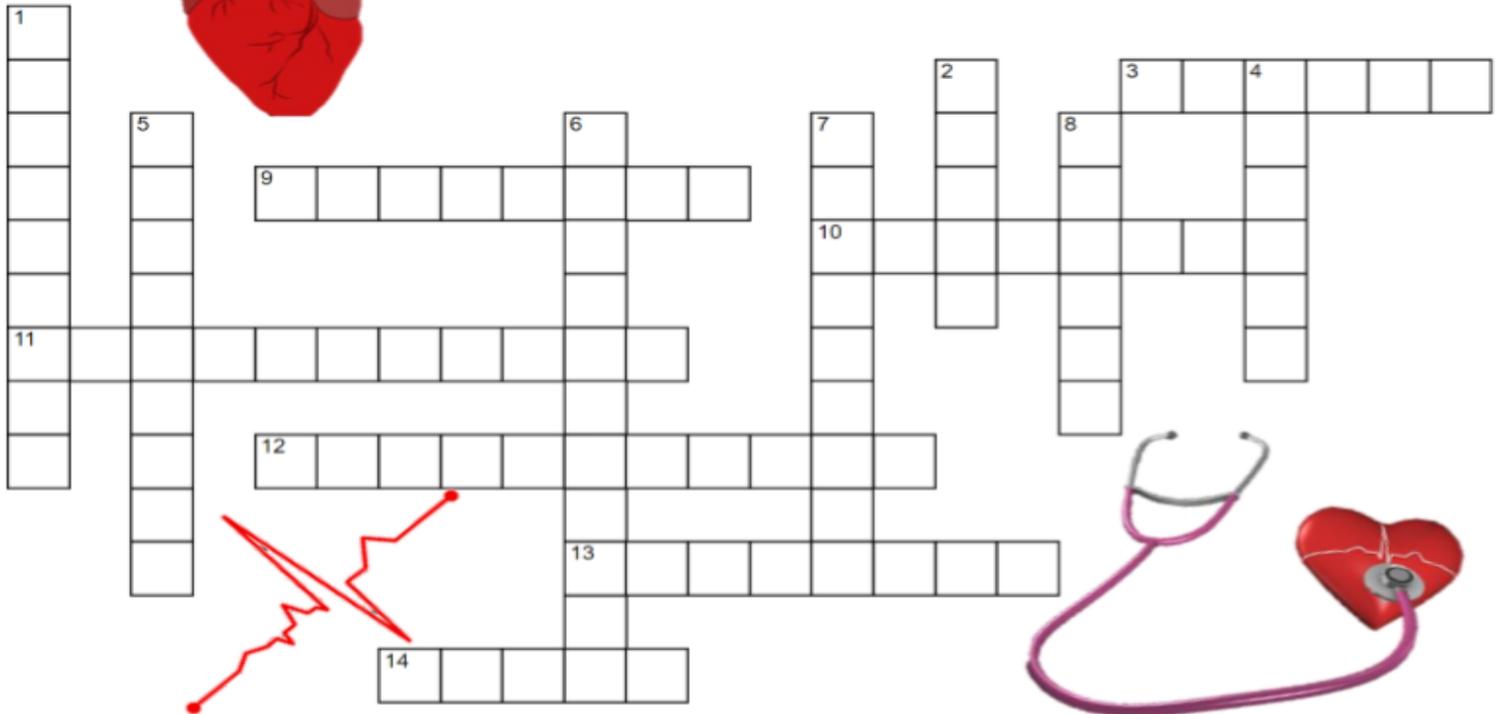
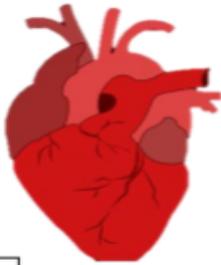
If you want to learn more about the amazing breakthroughs of the first open heart surgeries preformed HBO made a movie called "Something the Lord Made" in 2004. A dramatization of the relationship between heart surgery pioneers Alfred Blalock and Vivien Thomas.



On September 13, 1946, Diane Schnell (shown in the photo with Dr. Potts) became the first patient to undergo a historic aortopulmonary anastomosis. The procedure was made possible by a special vascular clamp developed by Potts, which he perfected the use of with Caesar, his dog. After the surgery, Diane recovered quickly and left the hospital 19 days later.

Prioritize the fun and the Learning Will Come!

CIRCULATORY SYSTEM CROSSWORD



Across

- 3) A wall which separates the left and right side of the heart
- 9) A large blood vessel which carries deoxygenated blood to the right atrium
- 10) Blood vessels which carry blood away from the heart
- 11) A substance that can block arteries
- 12) Microscopic blood vessels which connect arteries to veins
- 13) A valve in the heart between the left atrium and left ventricle
- 14) Blood vessels which carry blood to the heart

Down

- 1) The lower chamber of the heart
- 2) A large blood vessel which carries blood away from the heart to be distributed to the rest of the body
- 4) Fluid portion of blood
- 5) Blood is pumped from the heart to the lungs via the artery
- 6) A protein found in red blood cells that transport oxygen
- 7) Small fragments of cells. Are involved in the process of forming clots
- 8) Chamber of the heart where blood from veins collects

Answers to the Crossword puzzle are on the Last page – Good Luck!

Prioritize the fun and the Learning Will Come!

NAME THAT INSTRUMENT AND SPECIALTY

(Answer on the last page)



Wanted... Reader Feedback

I want to know, what do you want to see in our newsletters? You all have great ideas so voice them to me. Maybe a member spot light each new edition to get to know our members? Games, Recipes, some sort of specific education? Please send me your feedback and interests.

Thanks -Leslie Kronstedt

LKronstedt@gmail.com



IAHCSMM WEBINARS

A series of webinars is available, complimentary to IAHCSMM members (with a small \$15.00 fee for non-members). These webinars on varying topics can be used for general Central Service/Sterile Processing learning or Continuing Education (CE) for certification renewals. Completion of any IAHCSMM webinar provides 1 CE hour. Take advantage of 17 different courses to brush up on your skills.

You Got to Nourish to Flourish

Italian Fish Stew

Ingredients and Directions:

about 8 oz fish cut up
6 oz shrimp cut in 1/2
Some imitation crab meat cut up
(add last just to warm up & cook the fish threw)

1 chopped onion
2 stalks celery sliced,
1 clove garlic sliced Thinly
1 tea dried **oregano**, or more to **taste**
salt & Pepper
olive oil – simmer above
Add
1/4 c sweet wine-or chicken stock
1 c chicken broth (I use dry soup base)
14.5 can diced tomatoes
8 oz tomato sauce
celery, carrots, diced potatoes
simmer med-low, while making dumplings.



Hungarian egg noodle dumplings (If you want to)

2 c flour
2 eggs beaten
salt & pepper
3/4 c warm water
2 Tbs melted butter
combine flour & salt, pepper—make a well in center of a lg bowl
add eggs & little bit water
continue adding water in small amounts until the dough is formed should be thin (But thicker than cake batter) enough that it will be able to be pressed through small wholes of a flat cheese grater.
(Or use small pasta like small shells.)
Rest dough-- until salt water comes to a boil.
work in small batches -- press dough through the grater with a lg spoon into the water, boil for 2-3 min. or float to top of the water. Remove with a slotted spoon- in colander- drain put in bowl with melted butter (OR Fry in a pan W/butter, salt & pepper for more flavor).

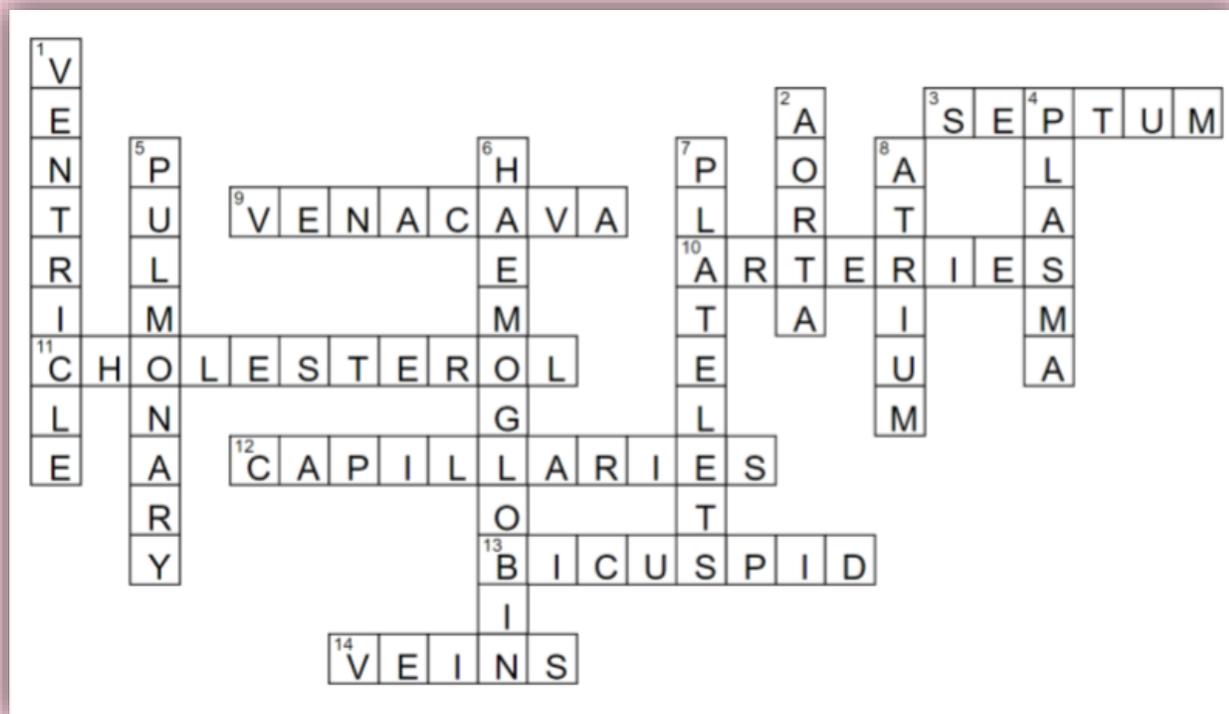
Add to soup pot (If the carrots are done).
Add Fish, Shrimp or any other sea food you want.
Add noodles & parsley
ENJOY!!!!

*Recipe Submitted from the
Kitchen of:*

Dana Makovec

There is a solution to everything

Cardiovascular Crossword Puzzle Solution



Instrument Answer

Name: Morse Favalaro Sternal Retractor

Use: Is an adjustable sternal retractor that is used in cardiovascular surgeries. This instrument can be used to spread open the space created in the sternum thus allowing more direct access to the surgical field. The retractor is strongly built and comes equipped with adjustable blades that allow insertion and subsequent spreading of the chest cavity.



- Dr. René Favalaro (July 12, 1923 – July 29, 2000)
- Was an Argentine cardiac surgeon best known for his pioneering work on coronary artery bypass surgery.