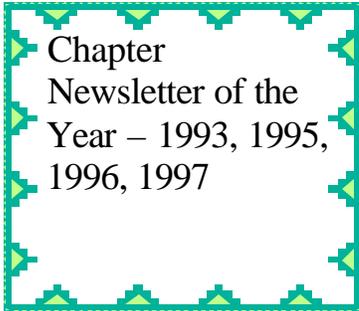


I HEARD IT THROUGH THE STEAMLINE

Volume 10, Issue 2

March 1999



Chapter
Newsletter of the
Year – 1993, 1995,
1996, 1997

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PRESIDENT'S MESSAGE



During my tenure as your president of the North Carolina Association for Hospital Central Service Professionals, I have been intrigued, overwhelmed, captivated, and blessed by having such gracious people to work with. I could not have been so successful in my endeavors, had it not been for all of you. The kind-ness and generosity shown to me as your president, is most complimentary. Please allow me to convey my personal thanks to the entire organization.

This coming May, I will have been your president for two years. How time flies when you are having fun. But, as they say, all good things must come to an end.

I would first like to thank my secretary, Vickie Steele for her tireless efforts as my secretary for both my roles, as president of the organization, as well as being my secretary at Forsyth Medical Center. She helped me get to where I needed to be; without her it would have been an impossible feat. To my boss, Mark Dozier, I thank him for all his support and

understanding, which helped to make my job easier. To the Board of Directors of this great organization, I thank you for all your excellent work and support. You are truly a great bunch of people to work with. To the entire member-ship, thank you for your support. Without you, we could not exist as an organization. The Board and I must also give a special thanks to each healthcare facility that has allowed the members of our organization to be a participant of the North Carolina Association for Hospital Central Service Professionals.

I hope we have met some, if not all of your needs, and addressed concerns through educational programs, networking with each other, and the sharing of knowledge and concerns, as well as supporting each other.

To Paul Hess, your incoming President, and Carl Winge, President-elect, I wish you both success as you assume your leadership roles this next year. I look forward to passing the presidency to Paul at our annual meeting at the Holiday Inn Woodlawn in Charlotte, North

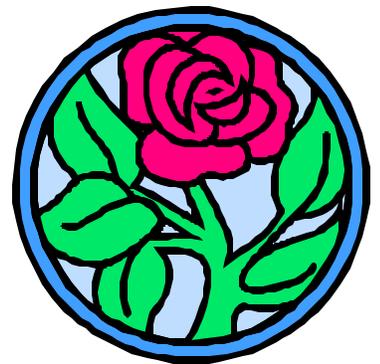
Carolina.

I look forward to working with this organization in the future and I hope that all of you will join me.

Again, thank your for all your assistance, information, and encouragement during my tenure. It was truly an experience, one that I will cherish for years to come.

See You In
Charlotte!

- Ruby P. Blackwell



**To love what you do
and can feel that it
matters – how could
anything be more
fun?**

- Katherine Jackson

In-service Education

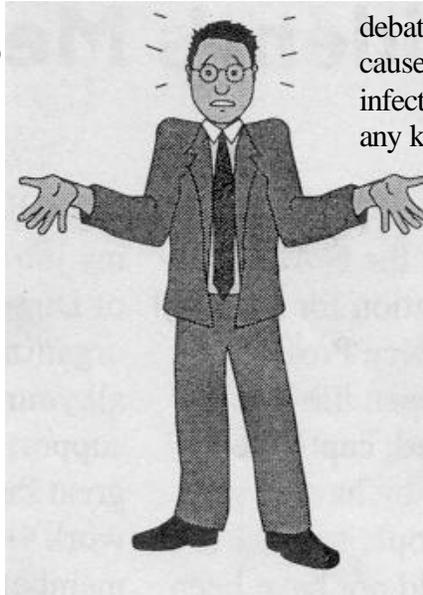
Creutzfeldt-Jakob Disease – The Challenge of the Millennium - By Janet Aultman

Creutzfeldt-Jakob Disease or CJD is a degenerative disease of the central nervous system that is always fatal. The disease is classified as a spongiform encephalopathy. This is because, in the advanced stages, the brain appears sponge-like. CJD has an incidence of one case per one million people per year.

The incubation period of the disease can be as short as one year or as long as many years before symptoms become apparent. The disease is difficult to diagnose because symptoms mimic many other neurological diseases. The symptoms include confusion, anxiety, eating problems, hallucinations, volatile/violent behavior, and dementia. Currently, there is no laboratory screen available to detect CJD. In some cases, there may be an elevated protein level in the cerebrospinal fluid. An EEG may show abnormal patterns in the brain. Unfortunately, the only definitive diagnosis can be provided by a brain biopsy or at autopsy. Many times CJD is the diagnosis suspected after all others have been ruled out.

Because CJD is a spongiform encephalopathy, it is compared to bovine spongiform encephalopathy (BSE) or "Mad Cow Disease". Mad Cow Disease has been well known around the world because of the epidemic in Great Britain and the subsequent ban on the export of British beef. A variant form of CJD caused the deaths of 10 young people in Great Britain in the mid 1990's leading to speculation that these young people could have ingested infected beef and the disease was able to jump species.

The causative agent of CJD is a topic of great



debate. Some believe that the disease is caused by a prion (proteinaceous infectious particle) that is not a virus or any known infectious organism. It is theorized that prions change normal proteins into deadly ones by altering their shape. However, the debate continues.

There are three categories for classifying the ways that CJD is acquired. The first is sporadic. This means there is no known infectious source and no family history of the disease. The second is inherited, which accounts for

10 to 15 percent of CJD cases. The inherited cause seems to be a mutation in the gene coding for the prion protein. The third is through infection.

Transmission of CJD has been linked to corneal transplants, implantation of electrodes in the brain, dura mater grafts, contaminated surgical instruments, and the injection of natural human growth hormones taken from cadavers. Casual contact of family members with CJD patients have not demonstrated any increased risk.

Special precautions must be taken if a patient with suspected CJD is scheduled for surgery. All unnecessary equipment should be removed from the operating suite. Disposables must be used wherever possible. Powered instruments must be prohibited because they will produce

aerosols. After the procedure, contain, solidify, and incinerate any liquids. All disposable items must be incinerated.

Surgical instruments require special care. Open all box locks and jaws, wipe instruments with a disposable cloth, and place the instruments

“Special precautions must be taken if a patient with suspected CJD is scheduled for surgery.”

in a sterilization container. Sterilize for 18 minutes prevacuum 135°C or 60 minutes standard gravity 135°C. Verify the sterilization parameters. Wash the instruments in a washer / decontaminator, then package and sterilize for reuse.

The personal protective equipment used for routine decontamination is appropriate for CJD. As always, avoid splashing and the creation of aerosols. Avoid sharps injuries. Use durable gloves, vinyl gloves will not offer adequate protection. PPE should be disposed of and incinerated after use.

If you are assigned to decontam on the day CJD - contaminated instruments have to be processed, ask questions! Be sure you have the knowledge you need to protect yourself and future patients. All facilities should have policies and procedures for CJD. Communication is the key!

Post Test

1. CJD is a compound disease of the lymphatic system. **T F**
2. CJD is difficult to diagnose because the symptoms mimic many other diseases. **T F**
3. The spongiform encephalopathy known as CJD is related to the "Mad Cows and Englishman's Disease". **T F**
4. The proteinaceous infectious particle called a prion is really a very small virus. **T F**
5. The three ways CJD is acquired are sporadic, inherited, and infection. **T F**
6. Dura Mater grafts have been linked as an increased risk of acquiring CJD. **T F**
7. To be cost effective, use reusable gowns and drapes during procedures on CJD suspected patients. **T F**
8. Powered instruments should never be used on CJD patients. **T F**
9. Special decontamination procedures are needed for instruments used on CJD cases. **T F**
10. Proper decontamination for CJD instruments just requires processing through a sonic washer and a washer/sterilizer. **T F**

(Answer Key is On Page 4)

Sources:

What is CJD?

<http://members.aol.com/crjakob/brochure.html>

Creutzfeldt-Jakob Disease: Decontamination Issues, Infection Control & Sterilization Technology, September 1996

Creutzfeldt-Jakob Disease, Technical Bulletin #5504 - CALGON VESTAL Division, STERIS

Bovine Spongiform Encephalopathy (BSE) in the United Kingdom and Creutzfeldt-Jakob Disease (CJD) in the United States from www.cdc.gov

To receive 1.0 Contact Hours toward re-certification from NICHSPDP, complete the in-service "quiz" after reading the article. Send the completed "quiz" to:

This in-service has expired and can no longer be submitted for credit.

who will issue a certificate. Be sure and include your name and a return address to receive a certificate for contact hours.



**Answer Key for the Post Test
“Creutzfeldt-Jakob Disease”**

- 1. F
- 2. T
- 3. F
- 4. F
- 5. T
- 6. T
- 7. F
- 8. T
- 9. T
- 10. F



TREASURER’S

**R
E
P
O
R
T**



BALANCE (OCTOBER 1998)	\$15,142.17
DEPOSITS	1,881.00
EXPENSES	5,538.86
MONEY MARKET	11,030.87
BALANCE (January 1999)	\$22,515.18

**Spotlight on Members
by Linda Cook**

Election results are in. Congratulations to President Elect Carl Winge, returning board member -Janet Aultman, and three new board members - Patricia Allred, Susan Avery, and Dianne Fink.

Carl (Frye Regional Medical Center, Hickory) has been instrumental in the processes that have allowed our state organization to become an active and progressive affiliated chapter of the American Society for Healthcare Central Service Professionals. He has effectively served our chapter as a past president and as a past and present board member. He has represented Region 3 as a member of the Board of Directors of the ASHCSP.

Janet (North Carolina Baptist Hospital, Winston-Salem) has served as a member of our Board of Directors for the past six years. As editor of our award-winning newsletter, "I Heard It Through The Steamline", she has allowed our chapter to achieve national acclaim.

Patricia (Mercy Hospital, Charlotte) has enjoyed a career as a nurse in surgical services and in sterile processing. She believes that sterile processing is the core of the hospital. She is hoping that sterile processing will continue to gain the professional recognition it so rightfully deserves.

Susan (Halifax Regional Medical Center, Roanoke Rapids) has been an active and supportive member of NCAHCSP for ten years. Her exceptional knowledge of sterile processing has been evidenced by her performance in the "Sterile Bowl".

Diane (NorthEast Medical Center, Concord) came to sterile processing from an OR supervisor position. She was instrumental in organizing an educational program for sterile processing at Cabarrus College of Health Science and served as an instructor for the course.

We are all winners with the many years of experience and expertise that these professionals bring to our organization

Health Watch

Snack Attack – Don't Let Your Guard Down

Snacks make up about 25% of an adult's daily calorie intake and 75% of a child's. Reaching for something to nibble on between meals is a great way to round out your daily nutritional needs and keep your energy level up. A nutrition break between meals can satisfy hunger so you don't overeat once meal-time arrives. The key is to eat *before*

you get too hungry.

Try these snack options:

- ☺ Reach for graham crackers or ginger snaps and a glass of skim or 1% milk when you fancy something sweet.
- ☺ Freeze grapes or banana slices for a refreshing, naturally sweet treat.
- ☺ Toss plain popcorn with garlic powder and Parmesan cheese.
- ☺ Keep a variety of raw vegetables - zucchini sticks,

broccoli, red peppers, carrots, and celery - ready to eat when the munchies strike.

- ☺ Grab an ounce of Cheerios or Chex cereal, or a hand full of pretzels.
- ☺ Top whole-grain crackers, rice cakes, or 1/2 bagel with nonfat cream cheese and a fruit or vegetable slice.
- ☺ Microwave a baked potato and top it with salsa (baked potatoes rate highest on the "fill you up" scale). Or, try a baked sweet potato.

Oven Fried Vegetables



- ¼ c. margarine, melted
- 1 Egg
- 1 tsp. Water
- ½ c. flour
- ½ tsp. Salt
- ½ tsp. Pepper
- 3 c. cut up fresh vegetables

Preheat oven to 400°. Melt margarine in small dish. In another small dish, beat egg and add water. In yet another small dish, mix flour, salt, and pepper. Dip vegetables pieces in egg mixture, then flour mixture.

Place on cookie sheet. Brush with melted margarine. Bake for 7-8 minutes on each side until

golden brown.

Nutritional Facts: (per serving)

Servings: 6 (½ c. each)
 Calories: 132, Protein: 3g,
 Carbohydrates: 11g, Fat: 9,
 Cholesterol: 35g, Fiber: 2g,
 Iron: 1mg, Calcium: 23g,
 Sodium: 291mg

IN THE NEWS...

Periodically, Northwest AHEC offers a Central Service Technician Training program. This is a 27-hour course designed to provide basic knowledge and skills for the entry-level



central service practitioner. It was developed utilizing training guidelines from the ASHCSP of the American Hospital Association. Northwest AHEC would like to determine the amount of interest

you have in attending this program. Please call Jan Hinton at 336.713.7014 and indicate if you are interested. You may respond by e-mail to jhinton@wfubmc.edu.

Upcoming Programs



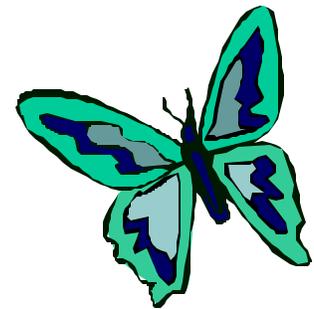
You will not want to miss our 1999 Annual Meeting and Exhibition “Nuggets

of Gold, Pearls of Wisdom, Celebrating 30 Years of Excellence”, to be held on May 5 - 7 at the Holliday Inn - Woodlawn in Charlotte. On Wednesday, May 5 the Annual Golf Tournament will be held at the Raintree

Country Club. On Thursday, May 6, Rose Marie Proietti of 3M Corporation will present "Basics of Sterilization / Decontamination" at the morning session. During lunch we will have the Awards Banquet. The Vendor Exhibition will conclude the day's program. On Friday, May 7, Edwin S. Ross from 3M Corporation will present "Continuous Quality Improvement / Total Quality Management" during the morning session. Our motivational program to

conclude the meeting that afternoon will be "Laugh and Learn with Ann White", presented by Ann White of The Speakers Network, Inc.

Other meeting dates are July 23 1999 and November 6, 1999.



SUPERVISOR'S CORNER

The 7 traits of effective leaders:
How many do you share?

Make others feel important. If your goals and decisions are self-centered, followers will lose their enthusiasm quickly. Emphasize their strengths and contributions, not your own.

Promote a vision. Followers need a clear idea of where you're leading them, and they need to understand why that goal is valuable to them. Your job as a leader is to provide that vision.

Follow the golden rule. Treat your followers the way you enjoy being treated. An abusive leader attracts few loyal followers.

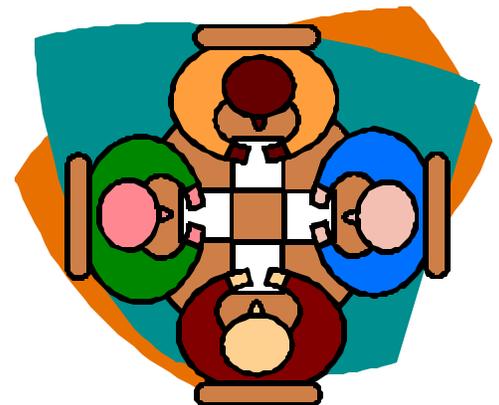
Admit mistakes. If people suspect that you're covering up your own errors, they'll hide their mistakes, too, and you'll lack valuable information for making decisions.

Criticize others only in private. Public praise encourages others to excel, but public criticism only embarrasses and alienates everyone.

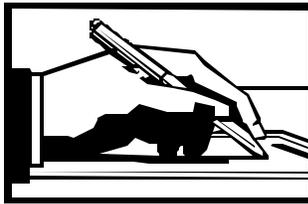
Stay close to the action. You need to be visible to the members of your organization. Talk to people, visit other offices and work sites, ask questions, and observe how business is being handled. Often you will gain new insights into your work and find new opportunities for motivating your followers.

Make a game of competition. The competitive drive can be a valuable tool if you use it correctly. Set team goals, and reward members who meet or exceed them. Examine your failures and celebrate your group's successes.

(The Toastmaster, P.O. Box 9052, Mission Viejo, CA 92690)



Region 3 Report



It's time to make plans for this year's annual meeting of the ASHCSP. We're headed to sunny Florida, home of Mickey Mouse and oranges. This year's meeting will be held October 23 - 26 at the Radisson Twin Resorts in Orlando, Florida. This year's program will highlight the following: Disaster Preparedness, Life is More Than a Paycheck, Latex Sensitivity, Transport Issues, Future of Ethylene Oxide, Re-Use of Single Use Devices, Performance Indicators, Regulatory Update, Customer Service, Asset Management and Life Cycle Analysis. Clearly, another education- packed meeting. If you are interested in attending this year's conference,

feel free to contact me or Patti Costello at 312.422.3752 for more information. If you are not able to attend this year's conference, you may want to consider attending one, or all four, of the 1999 Audio-Teleconference Programs. This year's topics will be Flash Sterilization (May 27); Defining, Developing, and Implementing Performance Indicators (July 16); Re- Use of Single Use Devices Part I (November 19); and Re-Use of Single Use Devices Part II (December 3). This presents a very cost effective way to obtain quality education for a very small registration fee. Even though it is early in the

year, the ASHCSP board has been busy. We've recently signed a memorandum of understanding with AORN. This enables the ASHCSP membership to obtain materials from AORN at membership prices, as well as AORN members obtaining ASHCSP materials at membership prices. A great marketing tool to get our materials seen by a much larger audience. We are also working to expand our committees to include more representation from the membership, as well as other organizations as appropriate.

Frank Sizemore
President-elect ASHCSP

Membership Report by Linda Messick

WELCOME NEW MEMBERS! Beth Baisden, Frye Regional Medical Center; Mitchell W. Belton, STERIS Corporation; Lisa Warren Best, N.C. Baptist Hospitals, Inc.; Robert E. Browning, Durham Regional Hospital; Naomi Bryant, Mercy South; Daryl D. Chisholm, Forsyth Medical Center; Crystal D. Cox, Frye Regional Medical Center; Grace Edwards, Wayne Memorial Hospital; Jerry Falkowski, STERIS Corporation; Roselyn R. Graham, Durham Regional Hospital; Edna Hu, STERIS Corporation; Mryna Kauffman, RN, CNOR, STERIS Corporation; Juanita Lane, N.C Baptist Hospitals, Inc.; Teresa A. Martin, Mercy South; Marvin McKoy, LPN, Forsyth Medical Center; Lula Kimball Osborn, RN, Duke Medical Center; Genevieve R. Poteat, Grace Hospital; Tammy Ross, N.C. Baptist Hospitals, Inc.; J. Steven Schrum, Aesculap; Merle M. Smoak, Grace Hospital; Gladys Watters, Durham Regional Hospital

We have 129 members so far for 1999.

Member To-Do List

- Renew your membership for 1999. Need an application-down load off our web page, www.ncahcsp.org
- Send any changes in your address to Linda Messick (fax 336-716-5269 or e-mail lmessick@wfubmc.edu - we don't want you to miss anything.
- Change in job, promotions, awards? Please share your good fortune. Fax information to 336-716-5269 or e-mail jaultman@wfubmc.edu
- Mail registration for May annual meeting by 4/18/99 to avoid late fees. Program brochure enclosed in this mailing.

NCAHCSP MISSION STATEMENT

NCAHCSP WILL ESTABLISH ITSELF STATEWIDE AS THE LEADING EDUCATIONAL ORGANIZATION THROUGH INNOVATIVE PROGRAMS THAT ENHANCE THE DEVELOPMENT OF CENTRAL SERVICE PROFESSIONALS

"The secret of getting ahead is getting started. The secret of getting started is breaking your complex overwhelming tasks into small manageable tasks, and then starting on the first one."

- Mark Twain

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