Society of Gastroenterology Nurses and Associates, Inc.

Surveillance FAQs

The purpose of this FAQ is to provide general information specific to the surveillance of gastrointestinal endoscopes.

1. **What is surveillance?**
   Surveillance is the monitoring of behavior, activities, or other changing information.

2. **What does surveillance of an endoscope mean?**
   Surveillance can be a process to evaluate effectiveness of endoscope reprocessing.

3. **What types of surveillance are available for endoscopy?**
   Two methods are currently available: Non-culture methods (e.g. assays for ATP, protein) provide immediate feedback about the adequacy of manual cleaning. Culture methods check for microbial growth, are employed after the completion of the reprocessing cycle, and may take up to 48 hours for results.

4. **Why consider surveillance?**
   Surveillance may reveal unexpected deficiencies, despite following recommended manufacturer's guidelines (Alfa, 2012). This may help reinforce adherence to reprocessing steps.

5. **Why is surveillance of endoscopes not routinely done?**
   Currently, there is insufficient data or standardized processes to support routine use of surveillance testing of endoscopes. Both surveillance methods can inherently produce false positive and false negative results. Other factors which influence the surveillance process include education, training, and financial resources. Discussions are underway to address surveillance as a quality assurance tool.

6. **What can I do now to address surveillance?**
   - Evaluate current reprocessing protocols and assess for risk **SGNA Resources for Quality and Safety**
   - Educate and train staff accordingly. Validate competency annually and when changes are made to the instructions for use (IFU).
   - Consider a multidisciplinary team approach (e.g., Infection preventionist, epidemiologist) to develop plans for a response to surveillance culture results or outbreaks.
   - Be vigilant of ongoing changes
   - Review the interim protocols for sampling, surveillance and culturing by the CDC. **SGNA Resources for Quality and Safety**
   - Review SGNA education and resources, such as Infection Prevention Champion program **SGNA Resources for Quality and Safety**

Reference

Alfa, M. J., Sepehri, S., Olson, N., & Wald, A. (2012). Establishing a clinically relevant bioburden benchmark: A quality indicator for adequate reprocessing and storage of flexible gastrointestinal endoscopes. *American Journal of Infection Control*. 40, 233-6.