What to Teach a New Technician

BY RICK SCHULTZ

With a shortage of Sterile Processing (SP) technicians, hospitals will often rush to hire and train new employees because of the immediate need for another staff member in the department. Very often, hospital executives do not want to address SP staffing issues until there is a quality problem, and they often outsource the employment and bring in agency technicians and managers to resolve the issues. This route is typically more costly than properly recruiting, hiring and training employees.

This band-aid approach is growing rapidly and there are many companies offering staffing solutions. Essentially, this approach is "robbing Peter to pay Paul" because they take technicians from one hospital system and put them in another hospital and charge a higher rate. This cycle where hospitals and companies poach employees adds to the shortage of SP technicians. From a training perspective, there must be a regimen in place that gives the new SP technician the full picture of how SP and surgery work together.

The initial mindset should be to hire slow and fire fast. If a new SP technician is not meeting their objectives, it's usually better to cut the losses and find the right person. Once the right person has been hired, it's beneficial to have them observe four or five surgeries of various specialties, so they can see the use of the product they are going to be putting together (trays). In the first week, new employees should be taught the importance of the job. It should be stressed that the instrument trays they are assembling could someday be used on a parent, child, spouse or friend.

Starting with instrument inspection, the new technician needs to know the basic instrument groups. These include:

- Scissors;
- Needle holders;
- Hemostats;
- Retractors;
- Suction devices;
- Scalpel handles;
- Tissue and dressing forceps; and
- Laparoscopic instrumentation.

Once these basic instrument groups are understood, it's important to create a training matrix where the new technician's knowledge and proficiency can be tested, tracked and monitored.

Create a Training Matrix:

	Ryan H.	Michelle S.	Liana V.	Patrick R.
Scissor Types	✓	✓	✓	✓
Inspection points	✓			
Sharpness Test	✓			
Lengths	✓			
Needle Holder Types		✓	✓	✓
Inspection Points				✓
Lengths				✓
Hemostat Types	✓		✓	
Inspection Points	✓		✓	
Lengths	✓			
Common Retractors				✓
Suction Devices	✓		✓	
Tissue & Dressing				✓
Scalpel Handles				✓

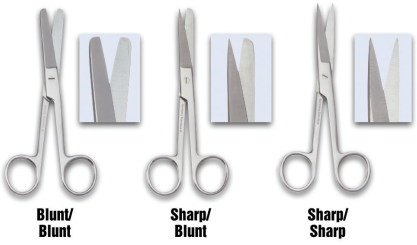
Scissors

Starting with scissors, the new technician must know the difference between the four types of Mayo scissors; these are very commonly-used scissors.

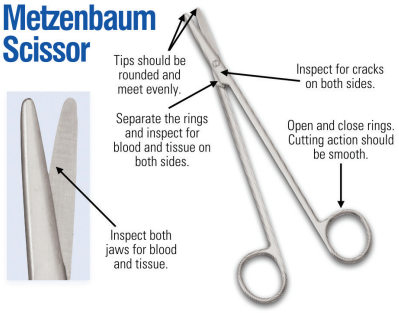
Mayo Scissors

To ensure the new technician understands the differences, the employee must be thoroughly trained and then tested. Another common scissor is the operating scissor; new technicians must know the differences between these scissors as well.

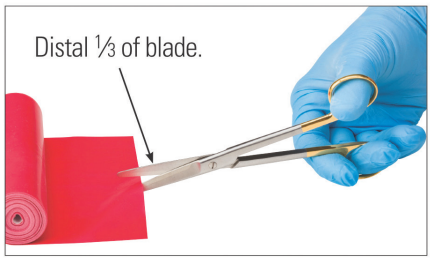
Operating Scissors



The inspection process for a scissor begins with an opening and closing action to ensure it glides (with no grinding) and is not loose. After the scissor is opened and closed a few times, the screw hinge and tips should be inspected for cracks and bioburden.



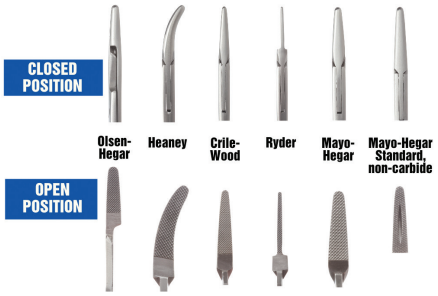
After the new technician understands the difference between each Mayo scissor and operating scissor, they must be taught how to test for sharpness. This should be a mandatory requirement. Every scissor must be sharp on the sterile field because every surgery starts with a scissor and ends with a needle holder.



Scissor should cleanly cut all the way to the tip.

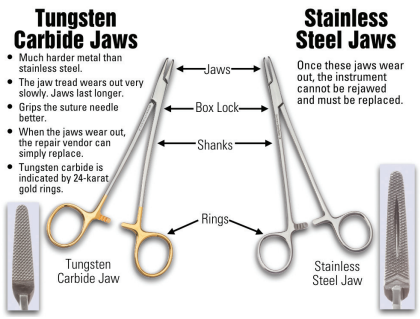
Needle holders

All new technicians should be using a training matrix and must memorize and be able to identify the six basic needle holder patterns.



Inspection of a needle holder starts with inspection of the jaw tread (this is the number one inspection point).

After inspecting tread wear of the jaws, the employee should move to the hinged area and inspect for cracks. After that, the rings should be separated and the hinged area on both sides should be inspected for bioburden.



There are two common types of needle holders: gold handled, which indicates tungsten carbide jaws, and standard, which have stainless steel jaws.

The new technician must know the difference between tungsten carbide jaws and standard jaws [tungsten carbide jaws (gold rings) can be replaced and the standard jaws cannot].

Hemostats

When training a new technician about hemostats, it is important that the proper name is always used to identify the hemostats. The six basic hemostats must be memorized, and the new technician should be able to identify and explain the differences of the six basic types.

Once the technician knows the difference between the six types of hemostats, they must then understand the inspection points of a hemostat. Visual inspection begins at the distal jaws.

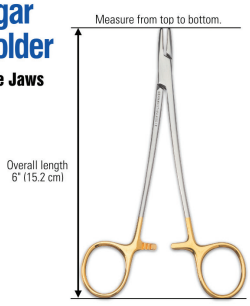
1. Look for bioburden at the distal jaws.
2. Inspect the hinge area (box lock) for cracks and bioburden on both sides of the instrument.
3. Separate the rings and inspect for bioburden.
4. With the rings separated, inspect the serrations for bioburden.
5. Test the ratchet by opening and closing. Be sure it clicks in each position.

How to properly measure

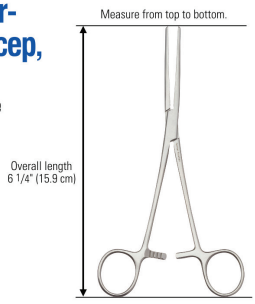
Along with knowing the proper names

Operating Scissor, Sharp/Blunt
How to Measure

Mayo-Hegar Needle Holder
Tungsten Carbide Jaws
How to Measure



Rochester-Pean Forcep, Straight
How to Measure



of common scissors, needle holders and hemostats, the new technician must know how to properly measure surgical instruments. To properly measure scissors, needle holders and hemostats, the measurement must be taken from the bottom of the ring to the distal tip. C

Note: In the July/August 2020 issue of PROCESS, this column will address new technician training for retractors, suction devices, scalpel handles, tissue and dressing forceps, and laparoscopic instruments.

RICK SCHULTZ, the Instrument Whisperer™, is an author, inventor and lecturer, and the retired Chief Executive Officer of Spectrum Surgical Instruments Corp. He served as contributing editor of IAHCSMM's Central Service Technical Manual (Fifth, Sixth, Seventh, Eighth Editions). Rick authored the textbooks *Inspecting Surgical Instruments: An Illustrated Guide and The World of Surgical Instruments: The Definitive Inspection Textbook*, which was released in June 2018. Schultz was named IAHCSMM's Educator of the Year in 2002, and in 2006, was named American Hospital Association Educator of the Year. In 2007, he was named by Healthcare Purchasing News as one of the 30 Most Influential People in Healthcare Sterile Processing. Schultz currently provides educational lectures to Central Service professionals at IAHCSMM's annual conferences and conducts operating room personnel lectures across the country.