

KNOWLEDGE NETWORK* is a dynamic collection of educational resources designed to provide insight and information on relevant healthcare issues.

This value-added service provides knowledge to improve:

- Patient outcomes
- Staff competency
- Staff protection
- Hospital/facility risk reduction

Most programs are accredited to provide Continuing Education credit for Nurses, Respiratory Therapists, Surgical Technologists, or Central Service/Sterile Processing Department professionals.

Programs are available in several formats, including:

- DVDs and DVD/study guide combination programs, facilitated by your Kimberly-Clark representative
- Online courses Independent Study Guides, accessed at your convenience
- Aboard the Kimberly-Clark HAI Bus
- Presented live by Kimberly-Clark faculty, for your facility meetings and conferences

Enclosed is a complete listing of Knowledge Network* courses. Contact your Kimberly-Clark representative for more information about any of these courses.

Continuing Education Programs

Abbreviations: **AARC**=American Association for Respiratory Care; **ADA**=American Dental Association; **ANCC**=American Nurses Credentialing Center; **AST**=Association of Surgical Technologists; **CA Board** = California Board of Nursing; **CE**= continuing education; **CBSPD** = Certification Board for Sterile Processing and Distribution; **CH**=credit hour; **CRCE**= Certified Respiratory Continuing Education; **CS/SPD**= Central Service/Sterile Processing Department; **ESP**=Excellence in Sterile Processing; **IACET**= International Association for Continuing Education and Training; **IAHCSMM**= International Association of Healthcare Central Service Materiel Management; **IRT**= Interventional Radiologic Technologist; **RRT**= Respiratory Therapists; **ST**=Surgical Technologists

Title	Description	CE Credit	Format
A Bundle of Joy: Evidence-Based Prevention of BSIs: Multi-Center Success	This session reviews how one facility, The University of Pittsburgh Medical Center, developed standardized best practices to reduce the incidence of central-line associated bloodstream infections. Three essential components for their success – resources, support, leverage – are also discussed.	Nurses: 1.0 CH CA Board IACET: 0.1 (1 CH)	DVD Online
A Triangle of Concern: Air Currents, Barrier Fabrics, and Bacterial Penetration	Preventing disease transmission is a major concern for all members of the healthcare team. During an operative or invasive procedure, both the patient and healthcare worker are at risk for transmission of infectious agents, not only through blood and body fluids, but also through bacterial penetration of barrier fabrics facilitated by forced air currents. This continuing education activity will discuss the triangle of concern presented by bacterial penetration of barrier fabrics (e.g., surgical gowns, face masks, and sterilization wraps) through forced air currents and its implications for the perioperative nurse. The potential sources and activities that contribute to this triangle of concern will be reviewed. Ways to differentiate the ability of barrier fabrics to prevent bacterial penetration, including a review of the various types of fabrics and the bacterial filtration efficiency (BFE) test method, will be discussed. Finally, best practices to reduce or prevent this bacterial penetration through barrier fabrics will be outlined.	Nurses: 2.0 CH CA Board IACET: 0.2 (2 CH)	Online
Adequate Nutrition and Feeding Tubes in ALS	This course addresses what a feeding tube is, why it is recommended, and how it works is the first step in gathering information as you consider the features and benefits of a feeding tube in your strategic health care plan.	Not Accredited	Online
Airway Clearance: Optimize Outcomes, Reduce Risks	Breathing is vital to life, supplying the body with essential oxygen, removing carbon dioxide, balancing the blood's acid-base chemistry, and preventing alveolar collapse. If a person cannot maintain ventilation, cardiopulmonary arrest is imminent. A patient on intubated mechanical ventilation depends on the patency of either an endotracheal or tracheostomy tube. The presence of these artificial airways prevents effective mucociliary clearance and cough production, allowing for the accumulation of secretions within the tube. Bacteria rapidly form biofilm colonies throughout the secretions, anchoring to the tube's surface. Together secretions and biofilm continue to build and will eventually obstruct the airway, if not removed by periodic suctioning. This course reviews open and closed suction techniques and their advantages and disadvantages, identifies associated patient risks, discusses the unique needs of high risk patients, describes the potential for pathogen dispersion, and identifies airway clearance risk-reduction activities.	Nurses: 1.0 CH CA Board RRT: 1 CRCE AARC IACET: 0.1 (1 CH)	DVD Faculty

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Title	Description	CE Credit	Format
Ambulatory Surgery Centers Focus: Patient Complications Caused by Sterile Lint and Powder	Lint & Dust...Such little things. Must be inconsequential?! They're sterile, right? Why do I have a green haze on surfaces in my OR? What's that dust on my monitor screens? This is a true story about lint, powder and other very small particles in the ORs of Ambulatory Surgery Centers. We will discuss pathological mechanisms initiated by these often ignored contaminants including blood clots, granulomas, adhesions, immune distraction, amplified acute and chronic inflammation, sterile and infected abscesses. Patient complications include endophthalmitis, reduced fertility, brain abscess, pulmonary embolism, cardiac arrest, intestinal obstruction, infections, breast implant contracture, chronic joint inflammation, implant rejection, poor wound healing, and much, much more. Mechanisms, consequences, sources and prevention will be addressed with references and case report substantiation.	Nurses: 1.0 CH CA Board	Online
An Unkind Cut: Focus on Exogenous Factors in Preventing SSIs	Contributing factors culminating in any surgical site infection (SSI) potentially involve a large number of endogenous (patient related) and exogenous (non-patient related) possibilities. We cannot expect to ultimately be successful in preventing these infections unless we can recognize the diverse origins of wound contamination and understand how normal immune defenses can be thwarted, allowing infection to occur. Only by understanding these factors can we effectively implement means of eliminating their impact. This course focuses on the exogenous factors potentially contributed by surgical team members, the apparel and devices they use, the techniques they practice and the environment in which they operate.	Nurses: 1.0 CH CA Board IACET: 0.1 (1 CH)	DVD Faculty
An Unkind Cut: Preventing Infections in Surgery	The possibility of a number contributing factors to any surgical site infection (SSI) is complex. Yet we cannot expect to prevent SSIs unless we can recognize potential contributors, understand by what mechanisms they facilitate or allow infection to occur and implement practical means of eliminating or blocking their impact. This online will focus on factors potentially contributed by the surgical team, the practice of ingrained bad habits, conditions in the OR, and the use of "sterile-but-contaminated" instruments.	Nurses: 1.0 CH CA Board	Online
Biofilms in Medicine	A biofilm is an aggregate of microorganisms that attach tenaciously to surfaces and to themselves. When the environment is favorable, the organisms remain attached and begin to exude a slimy, glue-like protective coating shielding the highly organized community from soaps, disinfectants, antibiotics, high-velocity water sprays and sterilization. Yet the battered surviving microorganisms are still capable of launching successful infections. This course will discuss the formation and function of biofilms in nature, in human infections generally, and on medical implants and instruments specifically. It will explain how the handling of instruments and addressing the hospital environment can influence biofilm formation, ultimately impacting patient recovery, survival, and quality of life.	Nurses: 1.0 CH CA Board CS/SPD: 1 CH CBSPD CS/SPD: 1 CH IAHCSMM IACET: 0.1 (1 CH)	DVD Faculty

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Title	Description	CE Credit	Format
Biofilms in Medicine: Implications for Ambulatory Surgical Centers	<p>A biofilm is a threat to optimal patient recovery. It is a collection of bacteria that attach tenaciously to an organic or inorganic surface and rapidly form a slimy/glue-like protective coating that shields this highly organized community of pathogens from assault soaps, disinfectants, antibiotics, the human immune defenses and even sterilization. Yet, these encased microorganisms are capable of launching either aggressive or insidious infections with remarkable stealth. This course will discuss the role of microbial biofilms in human infections generally, describe their formation sequence, explain how biofilms on poorly cleaned instruments and in the healthcare environment cause poor and often serious, patient outcomes while explaining these risks can be reduced. Patient consequences include loss of visual acuity, blood stream infections, breast implant contractures, device implant infections, severe Clostridium difficile outbreaks, tuberculosis, hepatitis, endocarditis, joint degradation, loss of muscle mass, significant disfigurement and even death.</p>	<p>Nurses: 1.0 CH CA Board</p>	<p>Online</p>
Biofilms in Medicine: Patients Threatened by Highly Organized militant Pathogens	<p>After advancing to a forward position near enemy lines, Roman infantryman would maneuver into an organized, protective, lethal military formation. With shields raised and swords pointed outward, the troops could withstand wave after wave of formidable assaults and yet stand ready to break out and attack when the enemy exhausted its weaponry. So it is with biofilms; organized bacteria that attach tenaciously to device and environmental surfaces and rapidly form a slimy/glue-like protective coating shielding the highly organized army of bacteria from soaps, disinfectants, antibiotics, and sterilization. Yet, they are capable of launching aggressive or insidious infections. This course will discuss the role of microbial biofilms in human infections generally, describe their formation on medical devices, and explain how biofilms in the healthcare environment and poorly cleaned instruments have caused notable outbreaks and poor patient outcomes.</p>	<p>Nurses: 1.0 CH CA Board</p>	<p>Online</p>

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Check the Label: Is the Mask a Level 1, 2, or 3 (and ... what's the difference?)	<p>In the healthcare setting, choosing the appropriate face mask is a key component in minimizing the spread of potentially infectious diseases. Face masks are worn to contain and filter droplets of microorganisms expelled from the mouth and nasopharynx during talking, sneezing, and coughing. This serves to protect others from exposure to infectious agents carried in an individual's nose or mouth. Face masks also are worn to protect healthcare workers from exposure to infectious material from patients (e.g., respiratory secretions and sprays of blood or body fluids, consistent with Standard Precautions and Droplet Precautions). Healthcare workers must choose the appropriate mask based on the anticipated level of exposure to infectious material. The ASTM F2100-11 Standard Specification for Performance of Materials Used in Medical Face Masks will assist with that choice by requiring a graphic display on the mask packaging rating the performance "level" of the mask. The purpose of this program is to review the reasons for face mask use in healthcare and to discuss the roles of the FDA and ASTM as relates to medical face masks. The new ASTM F2100-11 mask performance rating will be described with a review of how this new rating can assist with appropriate mask selection.</p>	Nurses: 1.0 CH CA Board	Online
Clostridium difficile: Pathogenicity, Complications, Prevention, The New	<p>In the US, Clostridium difficile occurs in about 3 million individuals annually, of whom approximately 500,000 require hospitalization and 15,000 die. Since 2004, there has been a dramatic incline in the incidence, disease severity, antibiotic resistance and mortality associated with C. difficile infections. This has been attributed to the ubiquitous use of antibiotics, an upward trend in antacid therapies, and the emergence of three new C. difficile strains: 027, 017 and 078. This course will discuss the pathogenic attributes of these new superbugs and present best methods for preventing nosocomial transmission. The importance of eliminating pathogen reservoirs and of asking the appropriate questions when selecting and preparing disinfectants will also be addressed.</p>	Nurses: 1.0 CH CA Board RRT: 1 CRCE AARC IACET: 0.1 (1 CH)	DVD Online Faculty *No RRT or IACET credit for Online format
Coming Clean 2010: An Essential for Reusable Medical Devices	<p>More than 46 million surgical procedures are performed each year in the United States, in addition to many more millions of invasive medical procedures. Reusable medical instruments and devices are utilized in all of these procedures, each requiring reprocessing in order to be safely reused. Appropriate cleaning is a critical step in the multi-step reprocessing of reusable instruments and medical devices. The importance of this step is often overlooked; however, if a device is not clean, it cannot be properly disinfected or sterilized. Thus, improper cleaning poses a considerable health risk. In this program, the risks associated with the improper or incomplete cleaning of medical instruments and devices are identified. Additionally, the components of cleaning solutions and factors that impact their effective use will be addressed.</p>	Nurses: 1.0 CH CA Board CS/SPD: 1 CH CBSPD CS/SPD: 1 CH IAHCSMM IACET: 0.1 (1 CH)	DVD Faculty

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Does the Glove Fit: Critical Considerations for the Selection of Medical Gloves	Medical gloves are a critical component of barrier protection for healthcare personnel exposed to infectious substances and hazardous materials. Questions that should be asked when selecting medical gloves include: do the gloves fit the task at hand, what physical characteristics do they have, what potential complications might be experienced, and will their disposal have an impact on the environment? These are all issues that must be considered for appropriate glove selection. This educational program will address these issues by identifying considerations for medical glove selection and describing factors that affect their physical characteristics. Associated complications and environmental impact will also be reviewed.	Nurses: 1.0 CH CA Board CS/SPD 1.0 CH CBSPD	DVD Online *No CS/SPD credit for Online format
Enteral Feeding: Care & Maintenance of the Stoma Site and Feeding Tube	Today, in many homes, hospitals and long-term care facilities, there are patients who cannot or will not eat, and who require long-term nutritional support. Enteral feeding tubes are the lifeline that enables these patients to receive the nutrition and medications they need to survive. As a healthcare provider caring for patients requiring enteral feeding, it is important to become familiar with the individual types of feeding tubes, their components, care, potential complications and preventative measures. Optimal care and management by the multidiscipline care team are the keys to reducing complications and ensuring a more successful patient outcome.	Nurses: 1.0 CH CA Board	DVD/SG
Enteral Feeding: Care & Maintenance of the Stoma Site and Feeding Tube	Today, in many homes, hospitals and long-term care facilities, there are patients who cannot or will not eat, and who require long-term nutritional support. Enteral feeding tubes are the lifeline that enables these patients to receive the nutrition and medications they need to survive. As a healthcare provider caring for patients requiring enteral feeding, it is important to become familiar with the individual types of feeding tubes, their components, care, potential complications and preventative measures. Optimal care and management by the multidiscipline care team are the keys to reducing complications and ensuring a more successful patient outcome.	Nurses: 2.0 CH CA Board Dietitians: 2.0 CPEU IACET: 0.2 (2 CH)	Online
ESP: Are My Rigid Containers Maintaining Sterility	Rigid containers are convenient. But, are they as safe as the day you purchased them? Is your pre-use inspection checklist up to date? Is every important box checked each time? Have containers gone in for repairs as scheduled? Have you run tests to increase the confidence that post sterilized containers are maintaining content sterility? In this course we will work through the inspection list, discuss failure points often not thought to threaten sterility, and demonstrate how simple tests done in SPD can help increase confidence in barrier integrity or identify breaches you may have missed.	CS/SPD: 0.5 CH CBSPD CS/SPD: 0.5 CH IAHCSMM	Faculty

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ESP: Bacterial Filtration	This module describes the way wrap works as a microbial filter and defines the FDA's sterilization wrap classification system which impacts the hospital's ability to choose products. Also described are the most common ways of contaminating sterile packages and the three different barrier fabrics and their filtration capabilities.	CS/SPD: 1 CH CBSPD CS/SPD: 1 CH IAHCSMM	Facilitated study guide
ESP: Cost of Instrument Tray Processing	This module focuses on the analysis of the actual cost of processing a wrapped instrument tray through the sterile processing department. Calculations for compromised wrap, reprocessing labor, etc. are presented. Ultimately these calculations can be used to reduce total cost within the department. Participants will learn how to perform a cost of processing study and use the information to determine if costs can be reduced in one or more of three ways: 1) tray expiration/reprocessing costs, 2) price or amount of consumables used and 3) tray processing labor time optimization.	CS/SPD: 2 CH CBSPD CS/SPD: 2 CH IAHCSMM	Facilitated study guide
ESP: Decontamination Attire	This module defines decontamination, describes bloodborne pathogens, and identifies which are of special concern to health care workers. "Exposure incidents" are defined and the use of appropriate personal protective equipment (PPE) is described.	CS/SPD: 1 CH CBSPD CS/SPD: 1 CH IAHCSMM	Facilitated study guide
ESP: Evaluating Sterilization Wrap: What You Need to Know	As reported by the World Health Organization, healthcare-associated infections (HAIs) are the most frequent adverse event in health-care delivery worldwide. Solutions to this world-wide problem include the implementation of infection prevention and control measures. The appropriate selection and use of quality sterilization wrap plays an essential role in the implementation of these measures. This educational program will review sterilization wrap's four-fold role in the prevention of healthcare-associated infections and explore the desired performance attributes of sterilization wrap. Finally, information used to effectively compare and evaluate sterilization wrap will be described.	CS/SPD: 1 CH CBSPD CS/SPD: 1 CH IAHCSMM	DVD
ESP: Event-Related Sterility Maintenance: A Review	Since many events may compromise the sterility of packaging systems, careful planning, written policies, and continuous best practices must be employed to ensure safe and effective sterility maintenance. Fundamental to an event-related sterility maintenance or "ERSM" policy is a thorough understanding of the events that can affect sterility and the establishment and maintenance of written procedures that detail what action should be taken if a potential package-contaminating event occurs. This program will review the benefits of ERSM and identify factors that can compromise the sterility of a wrapped package. Practices required for the sterility maintenance of packaging systems will also be discussed.	CS/SPD: 1 CH CBSPD CS/SPD: 1 CH IAHCSMM	DVD Online

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ESP: Flash Sterilization	Flash Sterilization continues to be a controversial topic. This ESP defines flash sterilization, lists reasons for the increased routine usage of this type of sterilization, details the criteria for how to do it properly, explains the concerns about routine flashing, and gives ideas on how routine flash sterilization may be reduced.	CS/SPD: 1 CH CBSPD CS/SPD: 1 CH IAHCSMM	Facilitated study guide
ESP: In-Hospital Packaging Wrapping Methods	This module discusses two methods of wrapping, explores the continued rationale for using two sheets of wrap, and demonstrates the time-savings possible with simultaneous wrapping.	CS/SPD: 1 CH CBSPD CS/SPD: 1 CH IAHCSMM	Facilitated study guide
ESP: Lint From SPD in My Patient	Lint. So little I can hardly see it. Even if it did get in the patient, it's soft, it's sterile, and it will probably dissolve in a few days; right? No way! Most fibers will never dissolve. The patient's body will work hard to prevent the foreign invader from harming the rest of the body. If deposited in the bloodstream, a blood clot forms trying to trap the lint. If in the surgical wound, inflammatory response tries to kill the fibers. White blood cells consume the particle forming a white barnacle-like granuloma. Adhesions like spider webs try to tie-down the lint. Unfortunately, adhesions contract causing pain and even strangling vital organ functions.	CS/SPD: 0.5 CH CBSPD CS/SPD: 0.5 CH IAHCSMM	Faculty
ESP: Low Temperature Sterilization	This module explores the low temperature technology alternatives to steam including ethylene oxide in its various forms, gas plasma, liquid chemicals, and newer technologies in development.	CS/SPD: 1 CH CBSPD CS/SPD: 1 CH IAHCSMM	Facilitated study guide
ESP: Microbiology of Sterilization	This module defines sterilization in terms of healthcare facilities, describes the four phases of a microbe's life cycle, lists the factors which control the reproduction of microbes and identifies factors that can destroy them.	CS/SPD: 1 CH CBSPD CS/SPD: 1 CH IAHCSMM	Facilitated study guide
ESP: Package Cycle & Contamination Prevention	This module discusses the different demands put on packaging systems from preparing the contents to presentation at the surgical suite. Policy recommendations for handling the various stages of the package's cycle are provided. Wrap performance attributes required at each of these stages and options for test standards to compare and evaluate packaging performance at the various stages are discussed.	CS/SPD: 1 CH CBSPD CS/SPD: 1 CH IAHCSMM	Facilitated study guide

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ESP: Peel Pouches	This module reviews the functional requirements of peel pouches in sterilization: how to choose the right pouch for the appropriate sterilization method and how to properly pack, seal and label the pouches. Also discussed are proper methods of loading pouches into the sterilizing chamber, storing the sterile pouches, and proper opening and presentation techniques to maintain sterility of the contents.	CS/SPD: 1 CH CBSPD CS/SPD: 1 CH IAHCSMM	Facilitated study guide
ESP: Pouches vs. Wrap	This module discusses the two main packaging options in the hospital environment – pouches and wrap. Examples and rationale for the use of different materials and wrapping methods are provided. The factors that influence the most appropriate type of packaging are discussed. Also presented are the four questions to ask regarding aseptic opening of a sterile package.	CS/SPD: 1 CH CBSPD CS/SPD: 1 CH IAHCSMM	Facilitated study guide
ESP: Returning Reusable Sharps for Decontamination	This module focuses on OSHA requirements for the return of reusable sharps. Included is an explanation of which instruments are classified as reusable, the definition of decontamination and a clarification of the requirements for reusable sharps containers. Considerations for establishing a facility policy for transporting and decontaminating reusable sharps is presented.	CS/SPD: 1 CH CBSPD CS/SPD: 1 CH IAHCSMM	Facilitated study guide
ESP: Selection and Use of Rigid Containers for Sterilization	Healthcare facilities have many single-use and multiple-use packaging options for sterilization. The selection and use of appropriate packaging systems can be challenging given the continuous development of sophisticated and complicated surgical devices and the increasing variety of sterilization processes. This program will enable the end user to have a better understanding of one type of packaging system: rigid containers. Considerations for the selection and use of rigid containers including appropriate inspection, preparation, assembly, sterilization practices, cleaning and decontamination will be reviewed. Measures for a comprehensive quality assurance program required for the optimal selection and use of rigid containers will also be addressed.	CS/SPD: 1 CH CBSPD CS/SPD: 1 CH IAHCSMM	DVD
ESP: Steam Sterilizer Loading	This module describes proper loading of the steam sterilizer and the elements which are necessary to assure proper sterilization of the load.	CS/SPD: 1 CH CBSPD CS/SPD: 1 CH IAHCSMM	Facilitated study guide

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ESP: Sterilization Wrap: Tear Identification & Handling Technique	There are many ways the sterility of a wrapped package can become compromised. Whether caused by moisture, soil, or physical damage, it is critical to recognize a potentially contaminated package and pull it from the inventory for reprocessing. By recognizing visual cues to package compromise and placing an emphasis on proper handling techniques, microorganism penetration and contamination of the contents can be avoided. This program will review factors that compromise the sterility of a wrapped package and identify the types of tears that may occur. Causes for these tears and prevention strategies through proper handling will also be discussed.	CS/SPD: 1 CH CBSPD CS/SPD: 1 CH IAHCSMM	DVD Online
ESP: Wet Packs: Strategies for Prevention and Resolution	A “wet pack” refers to a package that has residual moisture after the steam sterilization and cooling procedures have been completed. This moisture may be found on or within the package and is a major concern as moisture serves as a pathway for microorganisms and contamination of the packaged contents. Given this potential, all wet packs should be considered contaminated, necessitating re-packaging and reprocessing. To avoid this time-consuming and costly reprocessing, best practice strategies must be employed. This program will review the definition, consequences, and causes of wet packs. Strategies to prevent and resolve wet packs will also be discussed.	CS/SPD: 1 CH CBSPD CS/SPD: 1 CH IAHCSMM	DVD Online
ESP: Wrapping Trays for Sterilization	When wrapping trays for sterilization, primary objectives to keep in mind include achieving sterilization of the contents and maintenance of sterility when the trays are stored, handled or opened. Does the wrap you are using allow for appropriate sterilization? Is the technique you use to wrap trays for sterilization enable the package to withstand the contamination challenge via storage, handling, and opening? This educational program will provide information to assist the end user in answering these questions by reviewing key areas of focus for appropriate wrapping practice. Environmental considerations as well as sterilization wrap size and grade requirements will also be described. And finally, wrapping techniques and tips for wrapping trays will be explored.	CS/SPD: 1 CH CBSPD CS/SPD: 1 CH IAHCSMM	DVD

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Fire Safety in the Operating Room – Strategies for Keeping it Safe – Revised 2010	Fires in the operating room are always unexpected and can occur in a patient’s airway, face, body surface, surgical wound, and perineal area – potentially resulting in severe pain, disfigurement and, in some cases, death. Injuries are not limited to patients alone; they may also involve healthcare personnel. Regardless of who sustains physical injury, all individuals involved in the incident can experience long-term emotional trauma. Many healthcare professionals do not recognize the potential for fire, are skeptical that the threat exists as so few happen each year, or simply believe it will not happen to them. However, the threat of fire is real, and preventing operating room fires is a patient safety imperative. Therefore, it is vital that each member of the perioperative team understand the causes of these events and follow appropriate fire safety practices.	Nurses: 1.0 CH CA Board ST: 0.5 CH AST* IACET: 0.1 (1.0 CH)	DVD Faculty Online *No AST credit for Faculty format
Getting Your Hands Around Hand Hygiene	It has long been recognized that appropriate hand hygiene reduces the transmission of pathogenic microorganisms. In spite of this fact, overall compliance with hand hygiene guidelines continues to be suboptimal in healthcare facilities. Factors that contribute to this poor compliance include lack of knowledge, understaffing and overcrowding, poor access to hand-washing facilities, irritant contact dermatitis of the hands and lack of organizational commitment to appropriate hand hygiene. The purpose of this educational program is to describe the role hands play in the transmission of microorganisms, identify appropriate indications and techniques for hand hygiene, and to discuss hand hygiene adherence rates as well as strategies to increase compliance with recommended hand hygiene practices in healthcare facilities.	Nurses: 1.0 CH CA Board Dietitians: 1.0 CPEU* Radiologic Techs 1.0 CE (ASRT)* IACET: 0.1 (1.0 CH) *	DVD Faculty Online *No Dietitians, Radiologic Tech or IACET credit for Online format
Guess Who's Coming to Surgery?	Surgical site infections (SSIs) are a major post-operative concern for all members of the surgical team. Peri-operative personnel play a critical role in the prevention of SSIs by assessing individual patient factors that may increase the patient’s risk of a surgical site infection and planning appropriate interventions to reduce the risk. In this program, patient risk factors for SSIs and risk reduction strategies will be addressed.	Nurses: 1.0 CH CA Board ST: 0.5 CH AST* IACET: 1.0 (1 CH)	DVD Faculty Online *No AST credit for Faculty format

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Title	Description	CE Credit	Format
Have Bug, Will Travel: An Infection in Transit	Healthcare-associated infections (HAIs) affect over 1.4 million people every day globally. In the U.S., there are over 2 million new cases of HAIs annually. HAIs are currently the 5 th leading cause of death in hospitals-over 90,000 deaths. It is estimated that HAIs increase hospital costs by almost \$7 billion annually in the U.S. alone. For these reasons, healthcare facilities are focusing on the eradication of infectious agents causing HAIs and on proper containment when an outbreak occurs. Eradication and containment depend upon educating all healthcare workers in proper procedures (e.g. proper hand-washing, cleaning patient care areas and equipment effectively, putting on and removing personal protective equipment correctly). The purpose of this presentation is to educate healthcare workers regarding the magnitude of the problem of HAIs, the ease with which contamination and contact transfer occurs, and best practice strategies and resources to prevent the transmission of HAIs.	Nurses: 1.0 CH CA Board CS/SPD: 1 CH CBSPD CS/SPD: 1 CH IAHCSMM IACET: 0.1 (1 CH)	DVD Faculty
How New Technologies and Practices Will Impact Patient Safety	Keeping updated on the application of information technology advances can improve personnel performance and directly impact patient care by shifting priorities from financial management to optimizing clinical and operational performance thereby creating a safer patient environment. The presenter addresses the driving forces for patient safety in the future and focuses on the role of information technology as it applies to electronic medical records (EMR), computerized provider order entry, robotic automation, telemedicine, integrated medical devices, bar coding, radiofrequency identification systems, and new facility construction. The purpose of this educational activity is to present the future benefits of information technology that improve patient safety and quality of care and increase efficiencies.	Nurses: 1 CH CA Board RRT: 1 CRCE AARC* IACET: 0.1 (1 CH)	DVD Online *No RRT credit for Online
Influenza: a Seasonal and Pandemic Threat	This program provides an update on the importance of annual outbreaks of influenza and the chances of a pandemic that would overwhelm medical facilities and personnel. The virology of influenza will be presented, and the physical and financial impact of influenza, the complications associated with influenza, the symptoms of infection and influenza diagnostics will be addressed as well. Also, the vaccination preparation process will be discussed as will the efficacy of current treatment by M2 and Neurominidase inhibitors. A brief summation of the next pandemic virus that has the potential to quickly impact the world will also be presented.	Nurses: 1 CH CA Board IACET: 0.1 (1 CH)	DVD Online

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Title	Description	CE Credit	Format
<p>It'll All Come Out in the Wash: Evaluating the Performance of Surgical Fabrics</p>	<p>In today's surgical practice settings, the risk of transmitting infectious agents is a primary concern for the surgical team. Surgical fabrics (ie, gowns, drapes, and sterilization wraps) are intended to protect both patients as well as members of the surgical team from this risk; however, multi-use and single-use fabrics vary in the level of the protection, comfort, and cost-effectiveness they provide. Therefore, perioperative personnel must understand the differences between multi-use and single-use surgical fabrics in order to select the appropriate product to provide a safe environment of care for both patients and staff members. This continuing education activity will provide a review of the key criteria for evaluating the performance of surgical fabrics. The historical evolution of surgical barrier fabrics will be reviewed. The critical traits of quality surgical fabrics will be outlined, including a discussion of their clinical significance in the perioperative practice setting, with a focus on linting and barrier protection. Important test data that should be obtained from the manufacturer and used in the evaluation of surgical fabrics will be reviewed. Finally, the differences in the essential qualities of multi-use and single-use barrier fabrics will be discussed.</p>	<p>Nurses: 2 CH CA Board</p> <p>ST: 4.0 CH AST</p> <p>IACET: 0.2 (2 CH)</p>	<p>Online</p>
<p>Microaspiration and the Risk of VAP: Endotracheal Tube Considerations</p>	<p>The purpose of this self-study activity is to highlight the role of microaspiration in the development of VAP in the ICU to minimize the incidence of VAP in mechanically ventilated patients. There is increasing evidence that microaspiration of contaminated oropharyngeal and gastroesophageal secretions in the airways of intubated and mechanically ventilated patients is implicated in the pathogenesis of ventilator-associated pneumonia (VAP). The incidence and mortality rates of VAP in intensive care units are increasing despite improvements in antimicrobial therapy and use of a variety of preventive measures. Physicians, critical care nurses, advanced practice nurses, infection control specialists, and all healthcare professionals who treat intubated and mechanically ventilated patients need to make well informed and evidence-based decisions to provide quality patient care. This course initially will focus on the impact of intubation on normal body defenses and explore how microaspiration contributes to tracheal colonization and the pathogenesis of VAP. Risk factors for microaspiration and VAP in adult and pediatric mechanically ventilated patients will be addressed. Evidence-based guidelines from the ATS, IDSA and the CDC for the prevention and management of VAP will be summarized and supplemented with recommendations for minimizing microaspiration and VAP. The recent SHEA/IDSA compendium of strategies for prevention of hospital acquired infections will be featured.</p>	<p>Nurses: 1.0 CH CA Board</p> <p>RRT: 1 CRCE AARC</p> <p>IACET: 0.1 (1 CH)</p>	<p>Online</p>

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Title	Description	CE Credit	Format
MRSA: Time for Action	Some strains of <i>Staphylococcus aureus</i> , an organism commonly found in human body flora, have built up immunity to numerous antibiotics including penicillinase-resistant penicillins such as methicillin. These strains are now referred to as Methicillin-resistant <i>Staphylococcus aureus</i> or MRSA. This program addresses the growing prevalence of MRSA, risk factors for the patient, modes of transmission, and strategies to reduce or eliminate its transmission.	Nurses: 1.0 CH CA Board RRT: 1 CRCE AARC IACET: 0.1 (1 CH)	DVD/SG Online
Oh, I Just Work in Sterile Processing	What do you have in common with the following individuals: a parachute packer, a brake repairman, a 911 operator, a bungee cord assembler, a pit crew member, an O-ring manufacturer, Ignaz Semmelweis, Joseph Lister, a scrub nurse, a Cardiovascular surgeon and a front-line infantryman? What is the difference between a job and a career? How do you differentiate between a task-worker and a professional? When can you say you do not need to learn anymore about what you are responsible for? What difference does it make? In this presentation we will explore just how important your answers to each of these questions are. You will be challenged to think deeply about your role in patient care and recovery. The answers you decide to leave with, will dictate the quality of your work and your level of satisfaction with what you do. They will significantly impact the quality of life for you, your family and your patients.	Nurses: 1.0 CH CA Board CS/SPD: 1.0 CH CBSPD CS/SPD: 1.0 CH IAHCSMM IACET: 0.1 (1 CH)	Faculty
On the Level: The New ASTM F2100 Mask Performance Rating	In the healthcare setting, choosing the appropriate face mask is a key component in minimizing the spread of potentially infectious diseases. It is recommended that dental healthcare workers choose masks that protects against microorganisms generated by them to others. Masks should also protect the wearer from large-particle droplet spatter that may contain bloodborne pathogens or other infectious microorganisms. The <i>ASTM F2100-11 Standard Specification for Performance of Materials Used in Medical Face Masks</i> will assist with that choice by requiring standardized testing and a graphic display on the primary mask packaging that rates the performance level of the mask. The purpose of this program is to review mask recommendations for dental professionals and to discuss the roles of the FDA and ASTM as relates to medical face masks. The new ASTM F2100-11 mask performance rating will be described with a review of how this new rating can assist with appropriate mask selection.	Nurses: 1.0 CH CA Board Dental: 1.0 CE ADA IACET: 0.1 (1 CH)*	DVD Faculty Online *No IACET credit for Online format

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Title	Description	CE Credit	Format
Pandemic Influenza: Perspective, Preparation, Protection, Personal Preparedness	An explanation of what makes Influenza A the most probable of Pandemic threats will be presented, utilizing the 2009-H1N1 and other pandemic strains in their historic context. There exists a tremendous amount of misinformation about how influenza is transmitted and how you can protect yourself and your patients from infection. This course will discuss the roles(or not!) of large droplet, droplet nuclei and touch transfer in the spread of influenza. The importance of reservoir disruption, personnel preparation, personal protective equipment and best practices will also be addressed. Practical recommendations will be described that can readily be put into practice by every hospital employee to help contain pandemic threats.	Nurses: 1.0 CH CA Board RRT: 1 CRCE AARC IACET: 0.1 (1 CH)	DVD Faculty
Preventing Central Line Complications: A Focus on Thrombosis & Infection	Central Lines are essential to for infusion of potent vasoactive drugs, highly osmotic or hypertonic solutions, total parenteral nutrition, incompatible medications, and cytotoxic drugs. Central lines are also essential for hemodialysis, hemofiltration and hemodynamic monitoring. Between 5 and 6 million central lines are placed annually in the United States. The profound impact of the complications associated with central lines is so critical that efforts to prevent their occurrence should be routine elements of quality improvement programs. The frequency of central line associated complications is estimated to be between 5% and 19% depending on definitions and numerous vulnerability factors. There are several preventative measures that can be taken before, during, and after catheter insertion to reduce associated complications. Many will be discussed in this course with emphasis on infection and thrombosis risk reduction.	Nurses: 1.0 CH CA Board IACET: 0.1 (1 CH)*	DVD Faculty Online No IACET credit for Online
Preventing Pressure Ulcers in Surgical Patients	Medical personnel are challenged with preventing pressure ulcers in the peri-operative environment due to prolonged periods of patient immobility, compromised circulatory function, and preexisting conditions of many surgical patient populations. While great strides have been made in protecting the patient, peri-operatively acquired pressure ulcers continue to occur. These skin injuries may result in extended hospital stays, increased medical costs, and prolonged morbidity. The healthcare facility may also incur costly financial and legal ramifications from these injuries. In this education program, the impact of surgical pressure ulcers, contributing factors for their development, and prevention strategies will be discussed.	Nurses: 1.0 CH CA Board ST: 0.5 CH AST* IACET: 0.1 (1 CH)	DVD Faculty Online *No AST credit for Faculty and online format
Respiratory Protection: Masks versus Respirators	Throughout history respiratory diseases such as pneumonic plague, smallpox, tuberculosis and pandemic flu have had a profound impact on worldwide morbidity and mortality. Advances in respiratory protection have contributed towards an effective means to control and prevent the spread of these diseases. It must be emphasized, however, that the effectiveness of this respiratory protection whether it be a face mask or respirator is dependent upon appropriate selection and use. The purpose of this educational program is to review the impact of droplet and airborne transmission of infectious diseases, describe types of respiratory protection used by healthcare personnel, identify appropriate respiratory protection for droplet and airborne precautions, and to discuss appropriate wearing and use of respiratory protection.	Nurses: 1.0 CH CA Board IACET: 0.1 (1 CH)	DVD Faculty

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Title	Description	CE Credit	Format
Roadmap to HAP and VAP: Neglecting Oral Care	<p>Hospital-acquired pneumonia (HAP) is the second most common nosocomial infection in acute care hospitals, with an estimated attributable mortality of 27% to 50%. Although the highest prevalence is among ventilated patients, pneumonia also occurs far too frequently in non-ventilated patients. Poor oral hygiene, especially in the critically ill, has been established as a significant risk factor. Changes in the chemistry and physiology of the oral cavity along with exposure to respiratory pathogens within hours of entering the intensive care unit (ICU) set the stage for bacteria-infested biofilm formation on the surfaces of teeth as well as the tongue, gingival crevices and other mucosal surfaces. These bacterial reservoirs stand ready to disperse pathogens for aspiration into the lungs where they can initiate infection. In fact, the CDC has stated that in 76% of ventilator-associated pneumonia (VAP) cases, the bacteria colonizing the mouth before pneumonia is diagnosed are the same as those causing the pneumonia. In this course we discuss the relevant alterations in oral physiology, phases of biofilm formation, means of pathogen colonization and the mechanisms of their aspiration, together with recognized oral care recommendations to be implemented as pneumonia preventative measures.</p>	<p>Nurses: 1.0 CH CA Board</p> <p>RRT: 1 CRCE AARC</p> <p>IACET: 0.1 (1 CH)</p>	<p>DVD Faculty</p>
SCIP: Surgical Care Improvement Project	<p>This specific presentation on the Surgical Care Improvement Project (SCIP) will benefit physicians and infection control specialists seeking guidance on the current status of SCIP initiatives by addressing prophylactic antibiotic issues, performance measures for surgical infection prevention, and public accountability programs to increase the quality of healthcare for surgical patients. This is a videotaped presentation enhanced with synchronized audio recordings and PowerPoint slides and includes a post-test and a course assessment to evaluate the value of this learning experience.</p>	<p>Nurses: 1.0 CH CA Board</p> <p>IACET: 0.1 (1 CH)</p>	<p>DVD Online</p>

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Title	Description	CE Credit	Format
Search and Destroy: Eliminating Pathogens in the Patient Care Environment	<p>Between 1840 and 1870, tremendous strides were made towards preventing devastating infections in hospitalized patients. It was recognized that hand antisepsis together with cleaning and disinfection of the patient's environment were critical to optimal outcomes. Death rates dropped precipitously. As the decades passed through the next 100 years, improved hospital design, air filtration and especially the discovery of antibiotics all lead to the globally voiced conviction that most infections would be prevented and those that did occur could readily and successfully be treated. With the dramatic reduction in the incidence and severity of infections occurring and the general routine hygienic design of hospitals, the focus on the importance of the environment as a significant contributing factor to infection waned. This perceived lack of the importance of environmental contamination along with reduced resources, increasingly vulnerable patients, more virulent and persistent pathogens and the increasing prevalence of antibiotic resistance demands we reassess the importance of environmental contamination as a contributor to nosocomial infections. In this course, we will discuss evidence supporting the importance of this area of concern, the pathogens most likely to be transmitted via surface contamination and the best methods of successfully attacking these reservoirs for pathogen transmission.</p>	<p>Nurses: 1.0 CH CA Board</p> <p>RRT: 1 CRCE AARC</p> <p>IACET: 0.1 (1 CH)</p>	<p>DVD Faculty</p>
Selection and Care of Enteral Feeding Tubes, The	<p>Enteral nutrition is indicated for individuals with a functioning gastrointestinal tract whose oral nutrient intake is insufficient to meet estimated needs. In order to achieve optimal outcomes for patients who require enteral feeding, it is essential that healthcare professionals, indeed all caregivers of these patients, have a good understanding of the selection process as well as appropriate patient care required to prevent complications associated with enteral feeding tubes. The purpose of this educational activity is to discuss disease states that require enteral feeding, and to review the types of tubes used as well as the complications associated with the use of enteral feeding tubes. Nursing interactions to prevent and manage complications are also addressed.</p>	<p>Nurses: 1.0 CH CA Board</p> <p>Dietitians: 1.0 CPEU</p> <p>*Radiologic Tech 1.0 CE ASRT</p> <p>IACET: 0.1 (1 CH)</p>	<p>DVD Faculty Online</p> <p>*No Radiologic Tech credit for online</p>

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Title	Description	CE Credit	Format
Standard Precautions: Is Your Staff Really Protected?	This educational program has been developed for Infection Control Professionals, nurses, and other healthcare personnel who wear and/or select protective apparel in the healthcare environment. The purpose of this educational program is to provide information on the new 2007 Isolation Guidelines, the ANSI/AMMI PB70 textile standard and the four levels of apparel barrier protection available and considerations for the selection of gowns used in the clinical setting. A thorough understanding of these issues will enable healthcare personnel to make a more informed decision when selecting protective apparel. This course will discuss the changes in the 2007 CDC Isolation Guidelines, describe the relationship between Standard Precaution and Transmission-based Precaution use of protective apparel and infection prevention; the AAMI fabric barrier performance levels and criteria for protective apparel as well as system obstacles to the selection and use of appropriate protective apparel.	Nurses: 1.0 CH CA Board	Online
Sterile Lint & Particles: Do they Put Patients at Risk?	One of the most important attributes of a living organism is the capacity to self-repair. This ability is expected and observed every time a patient undergoes a major or minor invasive procedure. Needless to say, lack of this healing ability would render surgery useless and every injury, whether large or small, would be a potential death sentence. Suboptimal conditions can delay or interrupt the auto-processing sequence of repair and lead to various anomalies. One area related to wound healing that has had considerable focus in some surgical specialties, but is often neglected in others, is the impact of foreign microbody contamination, ie, minute pieces of debris left in the surgical site. The presence of these foreign microbodies can cause various postsurgical complications including blood clots, infection, amplified and prolonged inflammation, granulomas, and adhesions.. This education activity will discuss foreign debris-initiated post-surgical complications and their associated pathological mechanisms. It will review the sources of debris contamination, including a description of foreign microbody characteristics that can further amplify pathological responses, and provide recommendations for determining the sources of lint contamination and how to reduce its presence.	Nurses: 1.0 CH CA Board IACET: 0.1 (1 CH)	DVD Faculty

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Title	Description	CE Credit	Format
Strategies for the Diagnosis of VAP with Expanded Description of Blind Bronchoalveolar Lavage (Mini-BAL) Methods	<p>The major goals of any management strategy for patients with true Ventilator-Associated Pneumonia (VAP) are early diagnosis, then adequate doses of the correct antibiotic while avoiding overuse. The use of the wrong antibiotic can have dire consequences. Excessive use or overuse of antibiotics may allow multiple drug resistant strains of pathogens to evolve. According to Chastre, the only way to accomplish these goals is to follow these three steps:</p> <ol style="list-style-type: none"> 1. Obtain a lower respiratory tract sample for culture and microscopy before introduction of new antibiotics. 2. Immediately start broad spectrum empiric antimicrobial treatment unless signs of sepsis are absent and microscopy is negative. 3. Re-evaluate treatment on day 2 or 3 based upon pathogen identification and clinical outcomes. <p>This document discusses the various methods used in the diagnosis of VAP identifying the advantages and disadvantages of each approach. In addition, the recently introduced Blind Bronchoalveolar Lavage (mini-BAL) method is described in detail.</p>	<p>RRT: 1.5 CRCE AARC</p>	<p>Independent study guide</p>
Strategies to Prevent & Control Multidrug-Resistant Organisms	<p>In the prevention, management, and treatment of diseases caused by microorganisms that are resistant to antimicrobial agents, it is imperative to understand the different strategies to prevent and control multidrug-resistant organisms (MDROs). An overview of MDRO challenges: emergence and transmission of MDROs; control and management of MDROs, and strategies to reduce transmission of MDROs will be discussed during this presentation. The purpose of this educational activity is to focus attention on the growing challenge of MDROs in healthcare and the importance of reducing their transmission.</p>	<p>Nurses: 1.0 CH CA Board</p> <p>RRT: 1 CRCE AARC</p> <p>IACET: 0.1 (1 CH)</p>	<p>DVD Online</p>
Strike Force: Preventing Transmission When Pandemic Flu Hits Your Hospital	<p>There is a tremendous amount of misinformation about how influenza is transmitted, and how you can protect yourself and your patients from infection. This course, will discuss the roles (or not!) of large droplets, droplet nuclei and surface contamination in the spread of influenza. Scientific studies along with the epidemiology of actual patient and healthcare provider infections will be presented as we explore diversity of pathways. Reservoir disruption activities and the appropriate personal protective equipment will be addressed. Practical recommendations will be described that can readily be put into practice by every hospital employee and could help contain an influenza outbreak threat.</p>	<p>Nurses: 1.0 CH CA Board</p>	<p>Online</p>

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Title	Description	CE Credit	Format
Surgical Gowns: Selection and Best Practices for Protection-with Study Guide	<p>In the perioperative practice environment, prevention of infection for both surgical patients and healthcare workers is an overriding goal. The appropriate selection and use of surgical gowns is a key component in infection control strategies. Therefore, perioperative personnel must be knowledgeable about the key considerations in selecting and using gowns effectively in the surgical practice setting. This continuing education activity will provide an overview of the key considerations in the selection and use of surgical gowns and a protective measure for both patients and staff. It will review the five criteria used in the selection of surgical gowns: barrier protection, flammability resistance, low linting, abrasion resistance, and comfort. The curious types of materials used in the manufacture of surgical gowns, as well as industry tests will be discussed. Best practices in the donning, use, and removal of surgical gowns will be explored. Upon completion of this continuing education activity, the participant should be able to: identify five criteria for the selection of surgical gowns, describe selection criteria for surgical gowns, and discuss best practices for surgical gown protection.</p>	<p>Nurses: 2.0 CH CA Board IACET: 0.2 (2 CH)</p>	<p>Online</p>
Unique Characteristics of <i>Clostridium difficile</i>, its Complications, and Strategies Required for its Prevention	<p><i>Clostridium difficile</i> is recognized as one of the most serious healthcare-associated infections occurring around the world today. Associated infections may be mild and resolve fairly rapidly after antibiotic cessation, or may be severe, lingering and life-threatening. Emergence of a new strain, increased virulence of the old pathogen, trending patient vulnerabilities, altered healthcare practices, new reservoirs, are all contributing to the aggressive success of this not-so-glamorous superbug. The purpose of this educational program is to discuss the impact of <i>Clostridium difficile</i> and to describe best practices and new technologies designed to prevent its transmission.</p>	<p>Nurses: 1.0 CH CA Board</p>	<p>Online</p>
Unplanned Hypothermia & the Surgical Patient – Revised 2010	<p>Unplanned hypothermia is a common occurrence in surgical patients. Complications associated with unplanned hypothermia include wound infections, cardiac dysfunction, coagulopathy, altered drug metabolism, delayed recovery to normothermia, and increased mortality in trauma patients. The purpose of this educational program is to review the causes and complications associated with unplanned hypothermia. The benefits of normothermia as well as recommended practices to maintain normothermia and prevent unplanned hypothermia will also be described.</p>	<p>Nurses: 1.0 CH CA Board IACET: 0.1 (1 CH)</p>	<p>DVD Faculty</p>

Abbreviations: **AARC**=American Association for Respiratory Care; **ADA**=American Dental Association; **ANCC**=American Nurses Credentialing Center; **AST**=Association of Surgical Technologists; **CA Board** = California Board of Nursing; **CE**= continuing education; **CBSPD** = Certification Board for Sterile Processing and Distribution; **CH**=credit hour; **CRCE**= Certified Respiratory Continuing Education; **CS/SPD**= Central Service/Sterile Processing Department; **ESP**=Excellence in Sterile Processing; **IACET**= International Association for Continuing Education and Training; **IAHCSMM**= International Association of Healthcare Central Service Materiel Management; **IRT**= Interventional Radiologic Technologist; **RRT**= Respiratory Therapists; **ST**=Surgical Technologists

Title	Description	CE Credit	Format
Ventilator-Associated Pneumonia: Preventing Infection, Reducing Trauma	Ventilator-associated pneumonia (VAP) is a serious complication of mechanical ventilation that increases the risk of patient morbidity and mortality. It has been reported that patients on continuous ventilation are as much as 21 times more likely to develop pneumonia than non-intubated patients. The endotracheal tube interferes with patient defenses as well as with reflexes that would normally prevent direct pathogen access to the lungs. Trauma to the trachea that may result from incorrect selection and/or use of the endotracheal tube may also be indirectly associated with VAP if the traumatized area becomes infected. This educational program will review the impact of ventilator-associated pneumonia and describe why ventilated patients are susceptible to pneumonia. Strategies to reduce the occurrence of VAP will also be discussed.	Nurses: 1.0 CH CA Board IACET: 0.1 (1 CH)	Faculty
Ventilator-Associated Pneumonia: Reducing the Risk	Hospital-acquired pneumonia, which can be prevented, is the leading cause of healthcare-associated infections among mechanically ventilated patients in the ICU. This program describes the epidemiology and microbiology of VAP. Risk factors and prevention strategies are also discussed.	Nurses: 1.0 CH CA Board RRT: 1 CRCE AARC	DVD/SG
Watch-out Performance Criteria: When Barrier Materials Fail	This educational activity focuses on the quality of barrier fabrics such as gowns, drapes and sterilization wraps. The various types of barrier fabrics are differentiated as related to performance. The critical quality traits that have proven effective are explained in detail. Vivid scenarios of consequences of poor quality are integrated throughout the presentation. The audience will have opportunity to ask questions and provide feedback regarding their experiences.	Nurses: 1.0 CH CA Board IACET: 0.1 (1 CH)	Faculty
What Do You Mean I Caused That Surgical Complication?	Sometimes we need to look at the past to understand how we can improve the here and now. Sometimes, we need to look at what we do every day to realize a risky move has become a habit. This course will look at lessons learned in remote surgery centers during war years that need to be reintroduced today to improve patient outcomes. We will identify recent studies identifying the role foreign debris in ASC procedures can be attracted to instruments, implanted in patients and cause complications including joint inflammation, blood clots, granulomas, adhesions, peritonitis, endophthalmitis, spinal meningitis and increased risk of infection. In this age of the waning antibiotic effectiveness and increased patient vulnerability, it is increasingly critical that we prevent post-surgical complications before they occur. This course will focus on several areas where we currently put patients at risk that can be corrected tomorrow.	Nurses: 1.0 CH CA Board	Online