

The Compendium of Infection Control Technologies

An Interview with the co-creators

By Drew Whitney

Dr. Joel Rossen and Ron Stoker have recently introduced a major reference book on sharps safety, blood exposure prevention, and infection control products, the *Compendium of Infection Control Technologies*. In the following interview, the authors discuss the origins of the book, their goals in creating it, and an overview of how the information provided will serve the healthcare community.

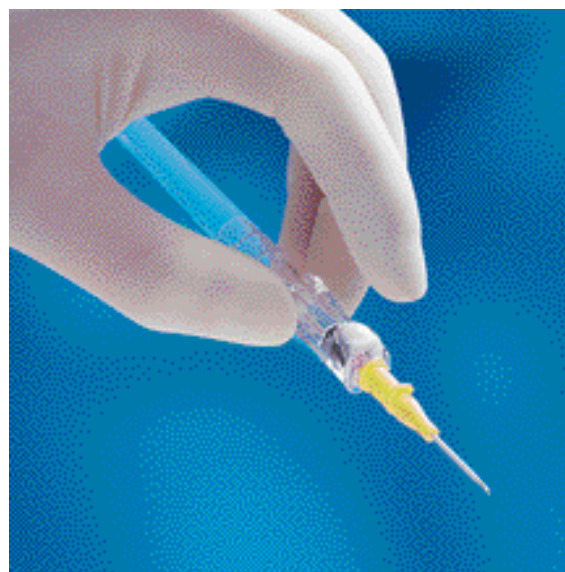
Managing Infection Control is delighted to be a sponsor of the *Compendium of Infection Control Technologies*. Who are the other sponsors and what are they doing to promote sharps safety and infection control?

We are grateful that *Managing Infection Control* magazine, Premier Safety Institute, ISIPS, AOHP, and NAPPSI (all of which are organizations devoted to infection control and sharps safety) have all agreed to be the original sponsors of the Compendium. We are grateful to them for their unselfish assistance in the compilation of the Compendium and for graciously informing their members and subscribers about the availability of this publication. We anticipate that a number of other organizations will be joining as sponsors to help promote the valuable information contained in the Compendium to their association members.

How will the Compendium help healthcare workers?

The Compendium will assist healthcare workers in gathering the information necessary to meet OSHA's mandates. According to OSHA's Bloodborne Pathogen Standard, every employer having one or more employees who have occupational exposure to blood or other potentially infectious bodily materials *must* have a written Exposure Control Plan that is designed to eliminate or minimize employee exposure.

This Exposure Control Plan, by statute, must be reviewed and updated at least annually. It must contain information that reflects new or modified tasks and procedures that affect occupational exposure. It must also reflect new or revised employee positions with occupational exposure.



A major portion of updating the Exposure Control Plan must be geared toward reflecting changes in technology that eliminate or reduce exposure to blood-borne pathogens. The standard mandates that each facility consider and implement appropriate commercially available and effective safer medical devices designed to eliminate or minimize occupational exposure. It further mandates that employers *must* solicit input from frontline healthcare workers who are potentially exposed to injuries from contaminated sharps in the identification, evaluation and selection of these products.

The Compendium assists healthcare facilities by providing information on more than 300 devices at their fingertips. It could easily take hundreds of hours to gather the information that is in the Compendium.

About the Authors

Joel Rossen is a veterinarian, a 1972 graduate of the University of Missouri and CEO of Biomedical Safety Technologies, LLC, and MicroStim® Technologies, Inc. He was a small animal practitioner for about 12 years before he decided to enter the world of medical device and manufacturing. In 1988, Dr. Rossen invented and patented a device known as the MicroStim®, which was the first portable biphasic microcurrent stimulator. Looking back, even that device was a sharps injury prevention device because it facilitated pain management without the use of needles. Via a series of coincidences, his devices became popular for the treatment of retinal dysfunctions including Age Related Macular Degeneration and Retinitis Pigmentosa, which is how most of them are used today.



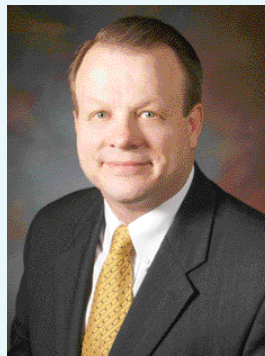
After manufacturing and selling his stimulators for 12 years, he licensed a new technology, a unique dressing, invented by anesthesiologist Dr. Robert Watson for the prevention of needlestick injuries. This device was a major breakthrough in injection bandaging technology because it was designed to be placed over an injection site, prior to the puncture. Use of this dressing permitted the provider to focus full attention on disposal of a contaminated sharp immediately upon completion of the injection, because the site was already dressed and needn't be dressed while the provider maintained possession of the contaminated sharp.

A fuller explanation of that dressing, the High-Risk Injection Patch, is beyond the scope of this article, but it can be seen as part of the Compendium Preview available at www.MedicalSafetyBook.com.

Dr. Rossen preceeded to create other devices of this type and he dubbed the technology Preemptive Bandaging™ because the distinctive dressings were engineered to preempt sharps injuries. This actually led to the creation of the Compendium. The path of least resistance was to create a medium to let the world know about all the infection control technologies that exist.

Thus, the idea of the Compendium, a publication needed by the manufacturers as much as by the medical community, was created. With over 100 medical device manufacturers and five organizational sponsors, this may be the largest cooperative effort ever attempted by the medical/pharmaceutical industry since the Physician Desk Reference (PDR.)

Ron Stoker is the Executive Director of ISIPS, the International Sharps Injury Prevention Society. Prior to founding ISIPS, he was the executive director of NAPPSI, the National Alliance for the Primary Prevention of Sharps Injuries. With more than six years focusing on sharps safety, Mr. Stoker frequently presents at national and international meetings and is the author of numerous articles focusing on sharps injury prevention and infection control. He is a biomedical engineer with degrees from the University of Utah and Brigham Young University.



Mr. Stoker has spent more than 25 years in the medical device industry with experience in research and development, clinical trials, marketing, and business development. He has worked for BD, CR Bard, Catheter Technology, Utah Medical Products, and Merit Medical Systems, Inc.

How does the Compendium assist healthcare facilities in gathering information about safety products?

Because of the new Bloodborne Pathogen Standard (BPS), healthcare facilities are taxed to locate, evaluate, or at least consider every medical device or engineering control that is available for prevention of sharps injuries. And, if evaluation of these devices was not difficult enough, locating and identifying the devices is even more difficult. A small facility could expect to put an extra nurse on full-time just to locate the devices that they had to then evaluate.

On the other side of that void are small medical device manufacturers that have been unable to create enough of a presence in the medical literature to be found by the very medical facilities that are required by law to evaluate their devices. We found that there was no central source where a healthcare facility could go to see what was on the market.

The Compendium brings information on a variety of sharps injury prevention, blood exposure prevention, and infection control products into one source. It helps to eliminate the thousand hours that would be necessary to gather all the information into one source.

How was the information on safety products gathered? With all of the new products coming out, how will you keep the Compendium current?

In order to make sure that the Compendium includes the most comprehensive list of safety devices, we have approached the medical device industry and offered manufacturers an opportunity of placing product information in the Compendium. This was done with phone calls, emails, and press releases. Dr. Rossen's son, Brent, developed a Website for the industry, where medical device manufacturers

could add their devices to the compendium by answering a series of questions, upload images, and add their contact information.

We soon found that the medical device industry was very enthusiastic about our project. The result is a most comprehensive list of safety products.

New companies have been joining our effort at the rate of two or three each week. That is important because by the time the book is in the hands of clinicians—it will already need updating.

That is a good thing! As a companion to the Compendium, we have created a Web presence, www.MedicalSafetyBook.com. Each Compendium comes with a free full-year membership to MedicalSafetyBook.com. The www.MedicalSafetyBook.com Website will be a continuing source for access to new safer medical devices as they become available.

Once an institution purchases the Compendium and joins medicalsafetybook.com they will be notified by e-mail whenever a new device becomes available. They won't happen upon it in some obscure journal several days after an OSHA inspector comes knocking on the door...they will know about the product first.

Healthcare facilities will be able to keep their sharps safety plan up-to-date with the confidence that they are aware of and have considered at least most of the devices that can make their facility safer.

We will continue to research and invite additional medical device companies to participate in the Compendium and on the Website. Major revisions of the printed Compendium and supplements will be available as needed.



Healthcare facilities will be able to keep their sharps safety plan up-to-date with the confidence that they are aware of and have considered at least most of the devices that can make their facility safer.



The Compendium appears to be more than just a printed book. Can you tell our readers about the interactive nature of your project and what is included in the digital edition of the Compendium?

Much thought went into publishing our book first in a digital format. The most important reason for our decision to publish the Compendium digitally first is interactivity.

In the printed book, each device is represented by a printed image about 2" x 2" square. There was very little flexibility. If we increased the size of the image, we had to decrease the text detailing information about the device. In the digital edition, when you are online, simply clicking on the image of almost any device will bring a high-resolution photo of the device into your browser. This will help you to envision the device's detailed characteristics and see how it works. The digital edition allows us to have links to additional information on each product including online brochures, videos, in-service information, etc.

Our sample procurement center greatly enhances the value of the publication. By law, facilities are responsible to obtain and test the devices. Out of the nearly 300 technologies in the book, an infection control officer may elect to procure and evaluate 20% or 30% or more of them. That could be 60 to 100 devices to evaluate. Simply making the phone calls to procure the devices could take a healthcare facility many hours or days or even weeks.

The Compendium's digital edition links to our sister site, www.MedicalSafetyBook.com, where a few or many different samples can be requested at one time. We send e-mails, directly to the pre-arranged representative at each of the manufacturers whose job it is to make sure that each healthcare facility gets the product samples they need for evaluation. Ordering samples through our sample procurement center will save you at least days of phone calls.

What product information is available in the Compendium? How can these products be evaluated for applicability to a particular hospital setting?

The heart of our compendium is called the SHIELD, which is an acronym for Sharps Hazard and Infection Limiting Devices. The Shield is a showcase of nearly 300 medical devices and references for making your practice safer.

We have included a section of device evaluation forms, tailored to many of the device categories. These forms can be a starting point for your device evaluations. Because the number of

scenarios in which these devices will be used is far greater than the number of books we expect to sell, the forms are, of necessity, rather generic. We strongly suggest that each practice go beyond the simple completion of the evaluation forms and establish scenarios and criteria not only for the practice in general, but for the various different procedures within the practice.

Sharps safety procedures can differ profoundly from one procedure to the next; a device chosen as the safest alternative for one department may not fare so well in another department. Be sure you consider every possible variable in creating, documenting, and implementing your sharps safety program.

This is the first edition of a work that will always be a work in progress. We plan to make the Compendium available and constantly update it for many years. It is not perfect, and we strive to continuously make it better. We welcome your suggestions. We want this publication to evolve into a fully comprehensive and indispensable tool for your infection control programs. We are committed to listen to you and to do our part to make that happen. You can e-mail your suggestions to suggestions@medicalsafetybook.com. †
