

Disinfection of Ultrasound Transducers Used for Percutaneous Procedures

Intersocietal Position Statement

We, the undersigned organizations, wish to address the issue of disinfection of transcutaneous ultrasound transducers used for percutaneous procedures or for the purpose of monitoring other invasive procedures.

Current guidelines from multiple clinical societies have endorsed the use of low-level disinfection (LLD) for transcutaneous ultrasound transducer cleaning and disinfection used for guidance of percutaneous procedures.^{1–3} Some organizations are not congruent regarding their recommendations for disinfection.^{1, 4–7} In some cases, guidelines that address endocavity transducers are being misapplied to percutaneous and vascular-access applications. The Spaulding classification⁸ is meant for *intended* uses, and some of the above guidelines reclassify *intended non-critical applications* as semicritical.^{5–7} Recommendations for high-level disinfection (HLD) of sheathed probes used for percutaneous procedures are not evidence-based and will result in unwarranted and unnecessary use of resources, increasing the possibility of *safety events* if percutaneous procedures are performed without ultrasound guidance.⁹ This statement addresses several specific points that we regard as pivotal for determining when the use of HLD or a different level is appropriate. Specifically:

1. Ultrasound-guided percutaneous procedures are imaged transcutaneously, ie, through intact skin, to monitor procedures done percutaneously in conjunction with a transducer cover and can be safely performed in conjunction with LLD.^{10–12}
2. Transducer covers for transcutaneous procedures are meant to protect the sterility of the procedure, not to make the transducer sterile. An analogous situation exists for human hands in surgical procedures. The gloves that cover the hands adequately protect the procedure from contamination, even though only LLD via hand washing is performed prior to surgery. LLD via proper hand washing plus sterile gloves has been safely used for over a century and LLD of devices placed inside of sterile covers should be equally safe.^{10–12}
3. If contamination of covered transcutaneous transducers with blood or other bodily fluids occurs, it can be eliminated with low-level disinfectants that are effective against mycobacteria and bloodborne pathogens

Received February 1, 2021, from the . Manuscript accepted for publication February 2, 2021doi:10.1002/jum.15653

(including hepatitis B virus, hepatitis C virus, and HIV).^{13–17} Human hands are always cleaned LLD and covered with gloves.¹⁸

4. HLD was meant to clean instruments intended for contact with internal organs or mucous membranes.^{19–26} Evidence of infection from ultrasound (US) transducers relates to contaminated gel and improper cleaning of internal transducers.^{19, 20, 23–25, 27, 28}

We recommend cleaning and disinfection for the reprocessing of transducers used for percutaneous sheathed US procedures on the basis of the scientific and safety information available. We also call on other organizations that address this issue to disclose contributions from manufacturers of US disinfection equipment.

Respectfully,
American College of Emergency Physicians
American Institute of Ultrasound in Medicine
Association for Professionals in Infection Control and Epidemiology
Association for Vascular Access
Society for Healthcare Epidemiology of America

References

1. AIUM. Guidelines for Cleaning and Preparing External- and Internal-Use Ultrasound Transducers and Equipment Between Patients as well as Safe Handling and Use of Ultrasound Coupling Gel; 2020. <https://www.aium.org/officialStatements/57>.
2. Guideline for Ultrasound Transducer Cleaning and Disinfection [policy statement]; 2018. <https://www.acep.org/patient-care/policy-statements/guideline-for-ultrasound-transducer-cleaning-and-disinfection/>.
3. Thompson J, Garrett JH. Transducer disinfection for evaluation and insertion of peripheral and central catheters for vascular access teams and clinicians. *J Vasc Access* 2018; 23:141–146.
4. Environmental Cleaning and Disinfection Recommendations. Interim Recommendations for US Community Facilities with Suspected/Confirmed Coronavirus Disease 2019. National Center for Immunization and Respiratory Diseases (NCIRD) and Division of Viral Diseases. <https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html>. Accessed March 6, 2020 [cited March 24, 2020].
5. SDMS. Guidelines for infection prevention and control in sonography: reprocessing the ultrasound transducer. *J Diagn Med Sonogr* 2020; 36:381–403.
6. World Federation for Ultrasound in Medicine and Biology Safety Committee. World Federation for Ultrasound in medicine and biology position statement: how to perform a safe ultrasound examination and clean equipment in the context of COVID-19. *Ultrasound Med Biol* 2020; 46:1821–1826.
7. Nyhsen CM, Humphreys H, Koerner RJ, et al. Infection prevention and control in ultrasound—best practice recommendations from the European Society of Radiology Ultrasound Working Group. *Insights Imaging* 2017; 8:523–535.
8. Spaulding E. Chemical disinfection and antisepsis in the hospital. *Hosp Res* 1957; 9:5–1.
9. Gase KA, McMullen KM, Wright MO. Survey responses to policy changes-overextended consequences. *Am J Infect Control* 2019; 47: 114–115.
10. Adhikari S, Blaivas M, Morrison D, Lander L. Comparison of infection rates among ultrasound-guided versus traditionally placed peripheral intravenous lines. *J Ultrasound Med* 2010; 29:741–747.
11. Caturelli E, Giacobbe A, Facciorusso D, et al. Free-hand technique with ordinary antisepsis in abdominal US-guided fine-needle punctures: three-year experience. *Radiology* 1996; 199:721–723.
12. Messina C, Sconfienza LM. Ultrasound-guided percutaneous irrigation of calcific tendinopathy. *Semin Musculoskelet Radiol* 2016; 20:409–413.
13. Rutala WA, Weber DJ. Guideline for Disinfection and Sterilization in Healthcare Facilities. Centers for Disease Control (CDC). <https://www.cdc.gov/infectioncontrol/guidelines/disinfection/>. 2008 revised 2019 cited 2020.
14. Sehulster LM, et al. Guidelines for environmental infection control in health-care facilities. Recommendations from CDC and the Healthcare Infection Control Practices Advisory Committee (HICPAC). 2004 revised 2019. Cited 2020. <https://www.cdc.gov/infectioncontrol/guidelines/environmental/index.html>.
15. Appendix A. Regulatory framework for disinfectants and sterilants. *Morb Mortal Wkly Rep* 2003; 52:62–64. <https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5217a2.htm>. Cited 2020.
16. Occupational Safety and Health Standards. Washington, DC: United States Department of Labor; 2020. <https://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.1030>. Cited 2020.
17. List B: EPA's Registered Tuberculocide Products Effective Against *Mycobacterium tuberculosis*. Washington, DC: United States Environmental Protection Agency; 2020. <https://www.epa.gov/sites/production/files/2020-09/documents/20200922listb.pdf>. Cited 2020.
18. Boyce JM, Pittet D. Guideline for hand hygiene in health-care settings: recommendations of the healthcare infection control practices advisory committee and the HICPAC/SHEA/APIC/IDSA hand hygiene task force. *Am J Infect Control* 2002; 30:S1–S46.
19. Seki M, Machida H, Yamagishi Y, Yoshida H, Tomono K. Nosocomial outbreak of multidrug-resistant *Pseudomonas aeruginosa* caused by damaged transesophageal echocardiogram probe used in cardiovascular surgical operations. *J Infect Chemother* 2013; 19:677–681.

20. Shaban RZ, Maloney S, Gerrard J, et al. Outbreak of health care-associated *Burkholderia cepacia* bacteremia and infection attributed to contaminated sterile gel used for central line insertion under ultrasound guidance and other procedures. *Am J Infect Control* 2017; 45:954–958.
21. Paz A, Bauer H, Potasman I. Multiresistant *Pseudomonas aeruginosa* associated with contaminated transrectal ultrasound. *J Hosp Infect* 2001; 49:148–149.
22. Ferhi K, Rouprêt M, Mozer P, et al. Hepatitis C transmission after prostate biopsy. *Case Rep Urol* 2013; 2013:797248.
23. Keizur JJ, Lavin B, Leidich RB. Iatrogenic urinary tract infection with *pseudomonas cepacia* after transrectal ultrasound guided needle biopsy of the prostate. *J Urol* 1993; 149: 523–526.
24. Abdelfattah R, Al-Jumaah S, Al-Qahtani A, et al. Outbreak of *Burkholderia cepacia* bacteraemia in a tertiary care Centre due to contaminated ultrasound probe gel. *J Hosp Infect* 2018; 98: 289–294.
25. US Food and Drug Administration Editor. *FDA Safety Communication. UPDATE on Bacteria Found in Other-Sonic Generic Ultrasound Transmission Gel Poses Risk of Infection*. Washington, DC: US Food and Drug Administration; 2012.
26. Medicines and Healthcare Products Regulatory Agency (UK). Reusable Transoesophageal Echocardiography, Transvaginal and Transrectal Ultrasound Probes (Transducers). Medical Device Alert; 2012.
27. Archived—Serious Risk of Infection From Ultrasound and Medical Gels—Revision. Government of Canada; 2004 [modified June 5, 2013]. Notice to hospitals—Important Safety Information on Ultrasound and Medical Gels. <https://www.healthycanadians.gc.ca/recall-alert-rappel-avis/hc-sc/2004/14289a-eng.php>. Accessed March 24, 2020.
28. O'Rourke M, Levan P, Khan T. Current use of ultrasound transmission gel for transesophageal echocardiogram examinations: a survey of cardiothoracic anesthesiology fellowship directors. *J Cardiothorac Vasc Anesth* 2014; 28:1208–1210.