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INFECTION CONTROL

LETTERS TO THE EDITOR

Clarification of Guideline Recommendations

To the Editor:

It has come to our attention that there may be some misinterpretation of material contained in the *CDC Guidelines for the Prevention and Control of Nosocomial Infections.* The purpose of these general guidelines, published by the Hospital Infections Program, Center for Infectious Diseases, Centers for Disease Control, is to provide a central reference containing recommendations for preventing and controlling nosocomial infections. These recommendations are not intended to endorse any particular commercial product or to exclude use of other commercial products containing generic ingredients not mentioned in the guidelines. There are ingredients in products now available in the US which were not in existence when the guidelines were written.

Because of continuing developments in the infection control field, hospitals using the *CDC Guidelines* as a reference should not exclude consideration of a specific generic antiseptic, disinfectant, or other product simply because it is not mentioned in the guidelines. Hospital committees or personnel responsible for selecting products containing generic antimicrobial ingredients should also be guided by recent information in the scientific literature, data presented at scientific and infection control symposia or meetings, information available from the FDA or EPA on the indications for use and adequacy of such ingredients or products, documented information provided to them by manufacturers, and other factors deemed important when deciding on the choice of products.

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Self-sealing Sterilization Pouches

To the Editor:

A letter to the editor published in Volume 4(1) of *Infection Control* asks about self-sealing sterilization pouches. In reply, Dr. Mallison notes that the seal ". . . appears quite effective . . ."

The Association of Operating Room Nurses' Recommended Practices for Inhospital Packaging Materials specifies that "Materials used for inhospital wrapping and packaging should provide a seal of proven integrity."

Unless one can see the seal, it is difficult to ascertain the integrity of that seal before use. Pouches with a fold-over tab and press-on seal may obscure the corners under that tab. A very small length of delamination introduced along the side will not be resealed because the tab only contacts the end of the pouch. Therefore, I would be reluctant to use pouches that may be damaged during production and cannot be inspected in a meaningful way. Heat-sealed pouches do not have this inherent weakness.

The 2mm delamination flaw indicated on the unsealed pouch enclosed was also induced in the sealed pouch; in an evaluation here, this type of defect was not detected when sterilized pouches were inspected.

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George F. Mallison, MPH, PE, Consultant in Environmental and Infection Control, was invited to respond to Dr. Birnbaum's letter.

Without a study (eg, "Safe Storage Times for Sterile Packs," *Hospitals* 1974; 48:77-80) on the sterile storage time of the product in question when