



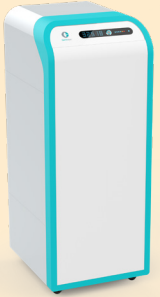
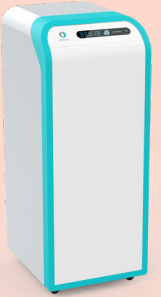
Know when to High Level Disinfect

DEFINED BY THE SPAULDING CLASSIFICATION



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Under the Spaulding classification the ultrasound probe is classified into **non-critical probe**, **semi-critical probe** and **critical probe** based on how the probe comes in contact with the patient's procedure site and the level of cross-infection risk.¹

Cross-Infection Risk	High Medium Low		
Spaulding Classification	Non-Critical	Semi-Critical	Critical
Probe contacts Patient Procedure Site	Probe contacts Intact skin	Probe contacts Non-intact skin (wound/burn) and Mucus Membrane	Probe contacts Sterile tissue, bodily fluids or bloodstream
Types of Procedures	Surface ultrasound (intact skin)	Surface ultrasound (broken skin) • broken scar/wound Endocavitary • transvaginal scans • transrectal scans	Surface ultrasound • nerve blocks • biopsies • central line placement • peripheral IV Access • vascular ablation • intraoperative procedures Endocavitary • transvaginal oocyte retrieval • transrectal prostate biopsy
Disinfection Level	Low-Level Disinfection  Extra protection with HLD 	High-level Disinfection 	Sterilisation or High Level Disinfection* 

*Probes classified as critical should be sterilised, if not possible can be high level disinfected and placed inside a sterile cover to prevent the contamination of a sterile field¹⁻³

Reference: **1.** ACIPC-ASUM. Guidelines for Reprocessing Ultrasound Transducers. Australasian Journal of Ultrasound in Medicine. 2017;20(1):30-40. **2.** CDC 2008. Guideline for Disinfection and Sterilization in Healthcare Facilities. **3.** FDA 2008. Information for Manufacturers Seeking Marketing Clearance of Diagnostic Ultrasound Systems and Transducers.