



**PRAIRIE NORTH REGIONAL  
HEALTH AUTHORITY**

**POLICIES & PROCEDURES**

**Number:** 15646  
**Category:** Continuing Care  
**Title:** Steam Sterilization of Foot Care  
Instruments

**Approved by:** VP Integrated Health Services

*Bloria A. King*

**Source:** Home Care Managers  
**Date Effective:** Sept. 29, 2014

<b>Review Date:</b>					
<b>Initial:</b>					

**PURPOSE**

To prevent transmission of infection through client contact with foot care instruments.

For the purpose of this policy:

**Nurse** will be used when referring to Registered Nurses, RN (Nurse Practitioner), Licensed Practical Nurses, Registered Psychiatric Nurses and Graduate Nurses collectively.

**Client** will be used when referring to clients, patients and residents.

**POLICY STATEMENT**

The Spaulding classification system categorizes medical devices by the risk of infection involved in their use. By ensuring foot care tools are correctly classified and the correct level of reprocessing is completed, transmission of infection between clients will be prevented.