

Status Report Work Team 'Instruments & Implants Marking'

Paris, France - September 20th, 2006 Volker Zeinar

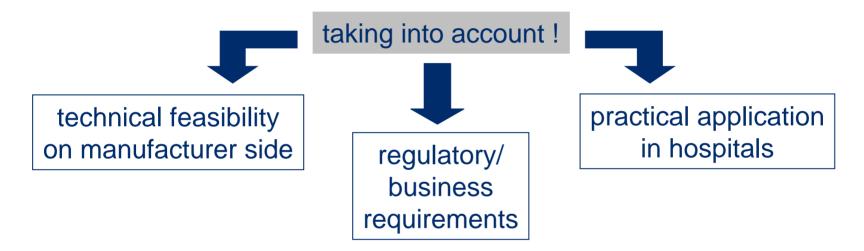
The global language of business

www.gs1.org



Objective, main topics, priorities

,Analysis of the necessity of marking instruments and implants.



Core questions: Right level of track & trace and which data do we need?

course of action March 2006

- concentrate on instruments (later implants)
- clarify processes, requirements, business drivers
- discussion level of track & trace
- define the necessary data
- possible data carriers





WT activities so far

get information

- Conference calls
- Personal interviews of hospitals (CSSD) or sterilization service providers
 - questionnaire (which process step information level for what ?)
 - approx. 30 interviews in 7 countries (EU, US, AP)
- Site visits
 - Hospital Europ. George Pompidou, Paris F : DataMatrix
 - Hospital Bichat, Paris F : RFID pilot
 - Decontamination Centre, Chorley UK
 - Central Manchester Hospital + Manchester Children's Univ. Hospital, UK
 - Health Edge, Stockport UK





Decontamination Centre Vernon Carus, Chorley UK

- first operating Super Centre in the UK
- capacity 1.5 mill. trays/year
- provide 3 hospitals, further will follow soon
- currently T+T on set level realized



- IMS software SAVANT
- possible data carrier
 - RFID (125 khz)
 - Dot Peen (matrix, 10 char)
 - Bar code / DataMatrix
- subsequent marking











Central Manchester Hospital + Children's University Hospital Manchester UK



laser bonded marking

- size 2.9 x 2.9 mil
- •subsequent marking (2-3€ per item)
- SCAN Track software

T+T on instrum. level possible, diff. CSSD work steps tracked on set level







 link to patient file by removable labels (set level)



Health Edge Surg. Instr. Processing Centre, Stockport UK

- CSSD Service provider
 - 60.000 trays per year / 2.000 loaner sets
- IMS software ,Fingerprint*
 - data carrier direkt marking : → currently the best ,Dot Peen' technology
 - subsequent marking
 - Internet based solution for T+T of loaner sets
 - via 'www' access to set content !!!



strongly support the definition of a harmonized instruments marking system based on GS1 Standards



Key findings

- Different opinions regarding the necessary level of track + trace
 - set level vs. single instrument level
 - mix e.g. on instr. level only for selected products (crucial, expensive, ...)
- We have business needs for track + trace on single instrument level
- Different business drivers for track + trace / direct marking
 - patient safety → frequently for crucial instruments (CJD infection)
 - personnel costs → concerns all instrum. (replace high qualified staff in CSSD)
- Most suitable work steps for track + trace issues :
 - PRE-DESINFECTION → completeness set
 - INSTR.CHECK and ASSEMBLING → identity individual instrument
- Hesitant willingness to invest on hospital side
 - appropriate IT infrastructure (HW, SW) → prerequisite for effective T+T
 - link CSSD documentation to patient file by removable labels
- Not all instruments can be marked! → with currently available technologies

Method of resolution: 4-Level-Concept

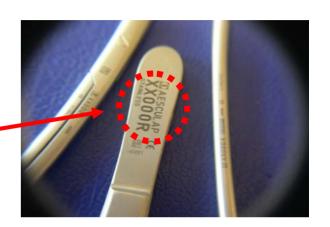




Level 1: Track + trace on set level



- human-readable code on set
- human-readable —code on instrument
- paper-based set list



Set name	e: xxxxxx		
Art.no.	Prod. Name	Qty	
XX00R	scissors	5	
SF9958	clamp	2	
VHG22D	spreador	6	
GX2005	mallet	2	



Level 2: Track + trace on set level



- human + machine-readable code on set
- human-readable code on instrument
- IT-based set list (bill of materials)



Set name: xxxxxx Set ID: 4022					
Art.no.	Prod. Name	Qty			
XX00R	scissors	5			
SF9958	clamp	2			
VHG22D	spreador	6			
GX2005	mallet	2			

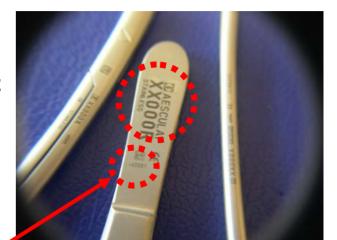




Level 3: Track + trace on instrument level 'indirect'



- human + machinereadable code on set
- human-readable code on instrument
- qualified IT-based set list



Serial No.

Set name: xxxxxx Set ID: 4022						
Art.no.	Prod. Name	Serial No.	Qty			
XX00R	scissors	74550	1			
XX00R	scissors	74551	1			
VHG22D	clamp	38957A49	1			

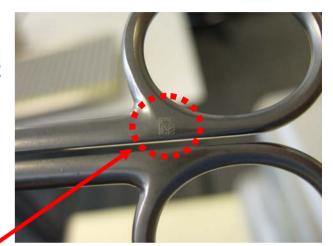




Level 4: Track + trace on instrument level 'direct'



- human + machinereadable code on set
- human + machinereadable code on instrument
- qualified IT-based set list



Serial No.

Set name: xxxxxx Set ID: 4022					
Art.no.	Prod. Name	Serial No.	Qty		
XX00R	scissors	74550	1		
XX00R	scissors	74551	1		
VHG22D	clamp	38957A49	1		





How to move forward?

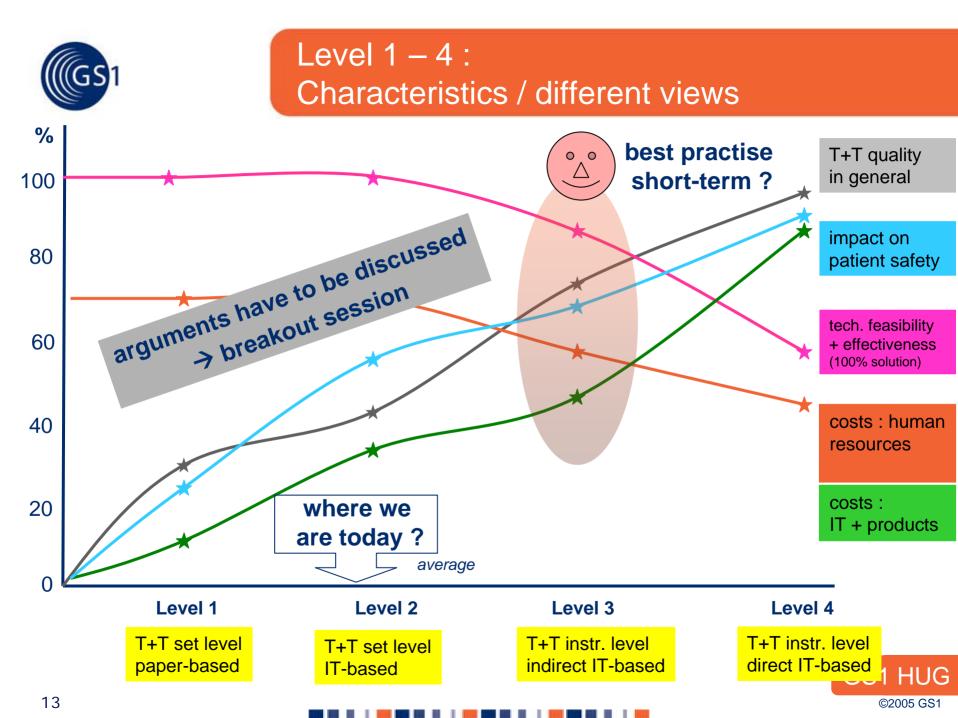
What is the right level of track + trace?

- Answer : It depends on ...
- Legal bodies, hospitals or sterilization service providers will decide it individually!

What can we do?

- Make the characteristics of the different levels transparent
 - description (Excel speadsheet) visuals of the characteristics (next slide)
- Describe business needs regarding product identification
- Discuss data concept for the different levels (set / instrument)
 - become part of new WT's 'Auto ID Data' + 'Serialisation' → short-term







Next steps

Breakout session (Sept. 21st)

- Complete and finish the description '4-Level-Solution'
 - Excel spreadsheet
 - consideration of comments from WT members
- Complete and finish the visualized chart of characteristics
 - PPT chart with graphs → arguments behind diff. views
- Describe business needs for sets / instruments ID
 - required data
 - discuss currently existing GS1 solutions

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(e.g. GTIN+serial no. vs. GIAI or anything <u>new</u>?)
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important influence factors (e.g. space issues)

Short-term: Sunset separate WT 'Instruments + Implants'





Thank you for your attention!

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