Media-Fill Testing

Documentation of competence is required initially and again every 12 months.

Initial competency requires completing the gloved fingertip and thumb sampling no fewer than 3 separate times. Each fingertip and thumb evaluation must occur after performing separate and complete hand hygiene and garbing procedures.

1. Clean

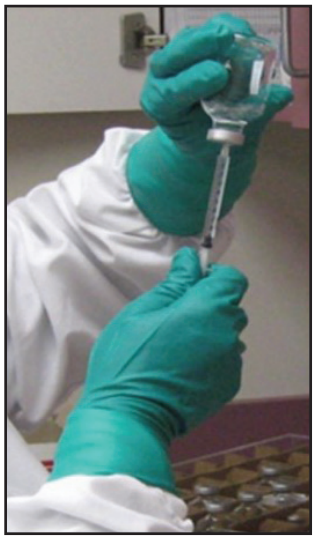
Perform USP 797-mandated cleaning and disinfecting of the PEC or AECA, hand hygiene and your clinic's garbing procedures.

Apply sterile 70% isopropyl alcohol to the horizontal work surface and allow to air dry.

2. Prepare

If you are using sterile materials, such as those included in a commercially-sold media-fill kit, do not further dilute the media unless specified by the manufacturer.

If your clinic mixes its own soybean-casein solution, dissolve nonsterile commercially available soybean-casein medium in nonbacteriostatic water to make a 3% nonsterile solution.



3. Transfer

Using a sterile syringe, draw up the soybean-casein solution (don't add diluent). Transfer the solution in the container-closure system used for serial dilution.

Prepare at least 1 container as the positive control to demonstrate growth promotion.

4. Incubate

Incubate the container(s) filled with test media solution in an incubator for two week-long periods to detect a broad spectrum of microorganisms:

Week 1 (7 days): 20˚- 25˚C/68˚-77˚F
Week 2 (7 days): 30˚-35˚C/86-95˚F

5. Evaluate

Look for visible turbidity (cloudiness) or other manifestations of growth in the media in one or more container-closure units on or before 14 days.

Pass: No visible turbidity indicates sterile transfer & competence in the procedure.

Fail: Any visible turbidity indicates failure. Personnel must re-do the procedure.

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