

## RELIANCE EPS™ ENDOSCOPE PROCESSING SYSTEM "TRAIN THE TRAINER" WORKSHOP

### DEVICE TECHNOLOGIES MISSION STATEMENT:

To deliver superior health outcomes by providing patient access to the best medical systems available worldwide

### INTRODUCTION:

Device Technologies is pleased to introduce the new 1 day "Train the Trainer" Workshop developed to provide hospital staff with a strong foundation in critical training skills for the Reliance™ EPS Endoscope Processing System, to enable delivery of education to their facility's users of this equipment. This programme is conducted by our experienced Clinical Educators who are Registered Nurses with backgrounds in Perioperative, Sterilizing or Endoscopy nursing.



### PROGRAMME OUTCOMES:

1. Describe the concepts of Peracetic Acid for high level disinfection.
2. Describe the precautions and safeguards that must be followed when using the equipment.
3. Review important work practices related to the preparation of items for high level disinfection.
4. Describe the safety precautions and safe guards that must be followed when using the equipment.
5. Understand how to operate the equipment and its associated accessories.
6. Learn how to deliver the training to their staff using the EPS In-Service Checklist.
7. Learn the hands-on practical applications for a High Level Disinfection, D-SHORT and D-LONG cycles.
8. Perform routine maintenance and troubleshoot the system.

### INTENDED AUDIENCE:

Nurses and Technicians currently involved with the Reliance™ EPS Endoscope Processing System

### PROGRAMME INFORMATION:

Cost: \$120.00 incl.GST  
(morning tea, lunch, afternoon tea provided).  
Venue: Device Technologies Office Training Room  
105-111 Bakehouse Road, Kensington VIC 3031.



2015 MELBOURNE DATES - "TRAIN THE TRAINER" RELIANCE EPS™ WORKSHOP

APRIL 10TH    AUGUST 14TH    OCTOBER 16TH

**RELIANCE EPS™ ENDOSCOPE PROCESSING SYSTEM**  
**“TRAIN THE TRAINER” WORKSHOP**

**AGENDA**

8.30 Registration and Introductions

9.00 Reliance HLD™ chemistry  
• Characteristics and handling  
• DVD

10.00 MORNING TEA

10.15 Theory of Operation  
• Endoscope preparation  
• Process monitoring  
• Endoscope processing

11.30 Routine maintenance and Troubleshooting

11.45 Technical Service  
• Engineering components

12.30 LUNCH

13.00 PRACTICAL HANDS-ON SESSION

This session is designed to educate trainers in all the practical hands-on aspects of the Reliance™ EPS Endoscope Processing System. This will equip you with the knowledge required to deliver these applications to your staff, so they can operate the system appropriately and safely.

14.30 Afternoon Tea

14.45 CONDUCTING AN INSERVICE (Resources)

During this session participants will be instructed how to deliver an in-service to their staff on how to operate the Reliance™ EPS Endoscope Processing System using the STERIS in-service checklist. Participants will also be provided with all documentation and resources relevant for training, conducting competencies and managing quality assurance.

16.15 Tests / Certificates / Evaluations

17.00 Conclusion



**RELIANCE EPS™ ENDOSCOPE PROCESSING SYSTEM**  
**"TRAIN THE TRAINER" WORKSHOP**

All fields on this registration form are to be completed prior to its return to Device Technologies. Incomplete registration forms will not be processed.

Your place in this course will be confirmed with a confirmation letter. If you do not receive a confirmation letter please contact [otp@device.com.au](mailto:otp@device.com.au).

**REGISTRATION FORM**

Title \_\_\_\_\_ First name \_\_\_\_\_ Surname \_\_\_\_\_

Hospital \_\_\_\_\_ Dept \_\_\_\_\_

Address \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Phone \_\_\_\_\_ Mobile \_\_\_\_\_

Email \_\_\_\_\_

Device Technologies contact \_\_\_\_\_

**MELBOURNE 2015 "TRAIN THE TRAINER" RELIANCE EPS™ Dates:**

APRIL 10TH  AUGUST 14TH  OCTOBER 16TH

**Registration Fee:** 1 Day \$120 Inc. GST  **Special Diетaries:** \_\_\_\_\_

(Morning tea, lunch, afternoon tea provided)

Cheque   
(Please make cheque payable to  
Device Technologies Australia)

Order no.   
(An order number from the hospital is  
required before a Tax Invoice is issued)

Credit Card

Card Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp \_\_\_\_\_ / \_\_\_\_\_

Name (print) \_\_\_\_\_ Signature \_\_\_\_\_

\_\_\_\_\_  
Signature of attendee

\_\_\_\_\_  
Date