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Laryngoscope handles: a potential for infection.

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Abstract

Laryngoscope handles do not usually come in direct contact with the patient's mucous membranes. Consequently, routine disinfection of laryngoscope handles is not currently standard practice unless gross contamination is clearly evident. Recent reports indicate that apparently clean handles may be contaminated with blood or body fluids. No report examined microbes on handles. The present article describes the incidence and types of microbes on laryngoscope handles after their use in the operating rooms of a 502-bed medical center in northwestern Pennsylvania. Twenty laryngoscope handles were cultured on Mueller Hinton 5% sheep blood agar plates. The plates were incubated at 37 degrees C for 48 hours and examined for growth. The identification, incidence, and susceptibility patterns of organisms were determined. Microorganisms were present on all 20 laryngoscope handles. Nine different types were isolated; some strains were resistant to multiple antibiotics. Organisms were categorized as contaminants or opportunistic pathogens. The presence of opportunistic pathogens places anesthesia providers and patients at risk of nosocomial infections. Based on the recommendations of the 1997 American Association of Nurse Anesthetists' Infection Control Guide and the results of the present study, institutional guidelines should be established for the use of disposable laryngoscope covers, high-level (destroying all microorganisms with the exception of high numbers of bacterial spores) disinfection, or sterilization of laryngoscope equipment between each patient use.