

Sterilisation Technician interview questions

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What to expect

Sterilisation Technician interviews are practical and standards focused. Employers want to know you understand the reprocessing loop end to end, that you will not release a load you cannot vouch for, and that you can keep pace when theatres are pushing. Expect questions about specific equipment, documentation and judgement calls at the bench.

- **Process and workflow:** Walking through the reprocessing cycle from receipt to release, to check you understand the sequence and why the order matters.
- **Technical and equipment:** Questions on washer-disinfectors, autoclaves, ultrasonic cleaners, indicators and how you confirm a load is safe to release.
- **Safety and infection control:** What you do when equipment fails, a cycle is compromised or a standard is at risk of being shortcut.
- **Behavioural:** Past examples of catching problems, working under pressure, and handling mistakes or near misses.
- **Scenario and client-facing:** Judgement calls when theatre or a clinic requests a tray before the process is finished, and how you communicate a no.

A short phone screen with the sterilising department manager usually comes first, covering your certificate, shift availability and right to work. The onsite stage often starts with a walk through the department so you can see the layout, followed by a panel with the manager and a senior technician. Some hospitals include a practical component where you inspect instruments or assemble a tray to a set list. Expect questions on standards and documentation, then reference checks, a police check and a pre-employment medical with immunisation evidence before an offer is confirmed.

1. Walk me through what happens to an instrument set from the moment it arrives in the department to when it goes back to theatre.

Why they ask

This is the core competency question. It shows whether you understand the reprocessing loop as a sequence, not a list of tasks, and whether you know where the points of failure sit.

How to structure your answer

Give a chronological walk-through. Cover receipt and sorting, decontamination, washing, inspection, assembly and wrapping, sterilisation, documentation, then storage and release. Name the check you perform at each handover so the interviewer hears where safety is verified.

Example answer

"The set arrives from theatre in a closed transport container and I check it against the delivery sheet before anything is opened. I sort the instruments into the decontamination area, keeping heavy items separate from fine ones and putting cannulated instruments on the right manifolds for the washer-disinfector. After the wash cycle I check the cycle record and then the instruments themselves, looking at hinges, ratchets, lumens and any residual soil. Anything damaged or not functioning goes out for repair and is replaced from stock. I then assemble to the set list, wrap or containerise the tray, and run it through the autoclave on the correct cycle for that load type. I record the load and check the indicators, and the tray is not released to theatre until the checks and the documentation are complete."

2. How do you know a sterilisation load has been processed correctly?

Why they ask

This tests whether you rely on a single indicator or understand that release is based on several checks together. It also reveals how seriously you take traceability.

How to structure your answer

Name the checks in the order you use them: physical cycle parameters, chemical indicators, biological indicator where required, and the written load record. Finish with the release rule and who authorises it.

Example answer

"There are several checks that build on each other. The autoclave records temperature, pressure and time, so I confirm the cycle met the parameters set for that load type. Every package has an external chemical indicator and each tray has one inside, and I check they have changed correctly. On the required schedule a biological indicator goes through with the load, and I incubate it and read the result before release. All of that goes into the load record with the batch and cycle numbers and my initials, so the tray can be traced back to that specific load. If any one of those checks is not right, the load is held and the supervisor decides what happens next."

3. Tell me about a time you found a problem with an instrument or a tray that others had missed.

Why they ask

Interviewers use this to see whether you inspect actively or just move trays along, and whether you escalate rather than quietly removing the item.

How to structure your answer

Use STAR. Set the situation at the bench, describe what you were inspecting, what you noticed, what you did about it, and what the outcome was for the department.

Example answer

"We had a batch of laparoscopic instruments come back on a busy afternoon and I was inspecting at the bench. One of the graspers had a hairline crack near the jaw that was easy to miss because it still closed properly in the hand. I pulled it out of the set, tagged it for repair, then checked the rest of the batch for the same fault and found two more with matching cracks. I told the supervisor and we removed all three from circulation and replaced them from stock. It turned out a whole consignment had the same issue, so the department quarantined the rest of that batch and it went back to the supplier. A jaw failing mid procedure is not something anyone wants to explain."

4. You are near the end of your shift and theatre calls for an urgent tray that was not on the list. What do you do?

Why they ask

A scenario question about pressure and priorities. Employers want to see that urgency does not push you into cutting the process short.

How to structure your answer

Show judgement under pressure. Establish the facts first, state what cannot be skipped, offer a realistic time, escalate the competing priorities, and document the request.

Example answer

"The first thing is not to promise anything before I know the facts. I would confirm which set and which case, and check whether the tray is already through the process or still needs full reprocessing. If it is still dirty it goes through the full cycle, no shortcuts, and I would give the theatre coordinator a realistic time rather than an optimistic one. If several urgent trays are competing, I would take that to the supervisor or shift coordinator, because that decision affects more than my bench. If it genuinely cannot be turned around in time, the coordinator needs to know early so the case can be planned around it. Then I would note what was requested and what was done."

5. What would you do if a washer-disinfector failed its cycle check at the start of a shift?

Why they ask

A safety and compliance question. It tests whether you isolate equipment properly and whether you understand that affected loads cannot be assumed sterile.

How to structure your answer

Lead with the immediate safety action, then containment of affected loads, then reporting, then the recovery plan so the department keeps running.

Example answer

"I would stop using that machine straight away and not run anything else through it. I would take it out of service, tag it so nobody loads it by accident, and report it to the supervisor immediately. Any load that was in the machine at the time would be held and quarantined rather than released, because if the cycle failed I cannot say those instruments are sterile. I would record the fault and the time in the equipment log and follow the department protocol for reprocessing affected items. Then I would work with the supervisor to move throughput onto the backup machine so the department keeps running safely."

6. How do you handle a request from a theatre nurse who wants a tray released before the load records are complete?

Why they ask

A client-facing question. It checks whether you can hold a line politely and whether you escalate rather than either giving in or becoming defensive.

How to structure your answer

Acknowledge the pressure, explain what is outstanding in plain terms, offer something concrete such as a time or a callback, state the limit clearly, and describe how you escalate if it continues.

Example answer

"I would explain what is still outstanding and why it matters, in plain terms and without being defensive. If a biological result is pending I can give the nurse the expected read time and offer to call the department the moment it clears. If it is a documentation gap I would fix what I can and get it signed off. What I would not do is release a tray because someone senior asked, if the checks are not finished. If the pressure keeps up I would take it to my manager so it is not just my call at the bench. In my experience people accept the answer when you give them a clear time and then follow through on it."