It’s no secret that most nosocomial infections are transmitted on the hands of employees who don’t wash, or wash improperly.

**HAND WASHING**

All hospital personnel shall wash their hands upon reporting to work, after personal use of the toilet facilities, when hands are obviously soiled, after removal of gloves, before eating, and on completion of their work activity. Personnel shall always wash their hands when entering a patient room, before performing invasive procedures, before and after contact with wounds, after touching the patient or patient surroundings when leaving the room that is likely to be contaminated with virulent microorganisms and between episodes of hand contact with different patients.

**BASIC HAND WASHING PROCEDURE**

1. Turn on water faucet and adjust water flow to prevent splashing and set desired temperature.
2. Wet hands and wrist thoroughly holding them downward over the sink to enable the water to run toward the fingertips.
3. Take a portion of soap from dispenser and lather up well.
4. Scrub each hand with the other creating as much friction as possible by interlacing the fingers and moving the hands back and forth. Continue the scrubbing action until areas between the fingers, the back of hands, the palms and areas around the fingernails are cleaned. The least amount of time recommended for this step is 10 - 15 seconds.
5. Rinse the hands thoroughly by holding them under running water, with elbows higher than the hands so that water flows downward to the fingertips. All soap should be carefully removed to avoid roughening skin.
6. Dry wrist and hands with paper towels, working from the area of the wrists to the fingertips.
7. Since the faucet handle is considered contaminated, turn off the water by using a dry paper towel to cover the faucet handle.

Policy: **ALL** direct patient care givers are **not** to wear artificial nails or extenders and natural nails need to be no longer than ¼ inch. (HFAP Standard)

**HAND SANITIZER**

1.0 Cup hands slightly and using the fingertips of one hand, pull the nozzle toward you to dispense the foam sanitizer into the palm of your hand, applying enough product to wet your hands thoroughly.

2.0 Keeping your hand with the sanitizer in a horizontal position, clasp your other hand over it and rub them together.

3.0 Be sure to coat all surfaces of the hand thoroughly, including your palms, in between fingers and under fingernails, backs of hands and around wrists.

4.0 Rub hands briskly until they feel comfortably dry. It should take about 15 seconds.

**NOTE:** The sanitizer can be used in place of hand washing unless hands are visibly soiled or if the patient has Clostridium difficile. After 5 - 10 applications of the sanitizer, it is recommended to wash hands with soap and water to remove the build-up of emollients.

**NEEDLE SAFETY**

- Safety Devices must be activated one-handed and prior to disposal in a sharps container.
- Both the needle and syringe (whether clean or contaminated) is placed in the needle container as a single unit.
- Needles and syringes should not be forced into the containers.
- Needles and syringes should not be protruding out of the containers.
- Only sharps (needles, disposable scalpels, etc.) should be placed in the containers. Paper towels should never be disposed in these containers.
- The needle containers should be sealed and disposed of when two-thirds full.
- Needle containers are then placed in infectious waste containers, to be transported by Housekeeping (X-3/4 4537) for disposal.

**PERSONAL PROTECTIVE EQUIPMENT**

**PURPOSE:**
To reduce the transmission of disease from blood and body fluids, provide protection of mucus membranes, skin and clothing by the use of personal protective equipment (gloves, gown, mask and goggles).

**POLICY:**
All procedures and tasks are performed following Universal Blood and Body Fluid Precautions Policy and Procedure (Administrative Policy #9500-217). For specific direction regarding the required use of personal protective equipment (PPE), please refer to the task list outlined in the Exposure Control Plan, which is available in every department.