

**Subject** Hand Hygiene  
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**Section** Infection Control  
**Subsection** General  
**Category** Corporate  
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### References

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- B. "Recommended practices for hand hygiene in the perioperative setting. In: Perioperative Standards and Recommended Practices. Denver, CO: AORN, Inc; 2012:73-86" accessed 5/29/2015 at [http://www.aorn.org/Clinical\\_Practice/Clinical\\_FAQs/Hand\\_Antisepsis.aspx](http://www.aorn.org/Clinical_Practice/Clinical_FAQs/Hand_Antisepsis.aspx)
- C. CDC Guidelines for Hand Hygiene in Healthcare Settings Published 2002 Accessed 5/29/2015 at <http://www.cdc.gov/mmwr/PDF/rr/rr5116.pdf>
- D. World Health Organization Guidelines for Hand Hygiene in Healthcare (2009). Access 5/29/2015 at [http://whqlibdoc.who.int/publications/2009/9789241597906\\_eng.pdf](http://whqlibdoc.who.int/publications/2009/9789241597906_eng.pdf)

### Applicable To

All employees, volunteers and non-employees with privileges within the institution of Gundersen Lutheran Medical Center, Inc., and Gundersen Clinic, Ltd. [Gundersen Lutheran]. Highly recommended for patients and visitors

### Detail

#### PURPOSE:

- A. To reduce the transmission of infectious agents from person-to-person
- B. To reduce the risk of hospital associated infections

#### DEFINITIONS:

|   |   |
|---|---|
| <b>Alcohol-based hand rub</b>                             | An alcohol-containing preparation (liquid, gel or foam) designed for application to the hands to inactivate microorganisms and/or temporarily suppress their growth. Such preparations may contain one or more types of alcohol, other active ingredients with excipients, and humectants.                                |
| <b>Antimicrobial (medicated) soap</b>                     | Soap (detergent) containing an antiseptic agent at a concentration sufficient to inactivate microorganisms and/or temporarily suppress their growth. The detergent activity of such soaps may also dislodge transient microorganisms or other contaminants from the skin to facilitate their subsequent removal by water. |
| <b>Surgical hand antisepsis/surgical hand preparation</b> | Antiseptic hand wash or antiseptic hand rub performed pre-operatively by the surgical team to eliminate transient and reduce resident skin flora. Such antiseptics often have persistent antimicrobial activity.  |

### Implementation

Hand hygiene refers to a variety of practices aimed at reducing the microbial flora on the hands. Examples include handwashing, antiseptic hand wash, antiseptic hand rub, or surgical hand antisepsis.

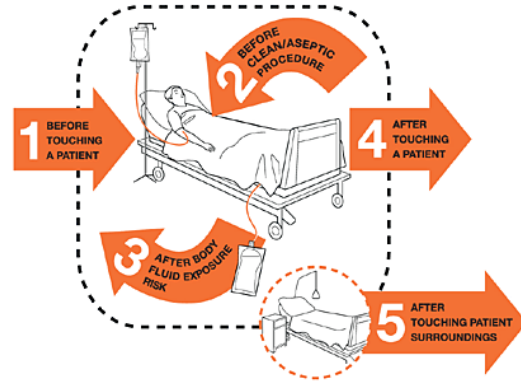
Gundersen Healthcare uses the WHO Guidelines for Hand Hygiene model "Five Moments for Hand Hygiene"

Hand Hygiene is performed using:

- A. Soap and water for visibly soiled hands or to remove spore-forming bacteria.
- B. Waterless, alcohol-based hand rubs are preferred products for routine hand hygiene
- C. Surgical scrub

The CDC recommends that alcohol-based hand rub product is readily available:

- A. at the entrance to each patient care room
- B. at the patient's bedside
- C. other convenient locations



### HAND HYGIENE PROCEDURE:

Hand hygiene is to be performed using either soap and water, or an alcohol based hand rub. Situations such as handling medication and preparing food may be done with either method. Below are indications for each method of hand hygiene:

#### A. Soap and Water

1. In handwashing sinks, use soap (plain lotion soap) and water as follows:
  - a. Wet hands with lukewarm water
  - b. Apply soap product per manufacturer's recommendations, usually 1-2 pumps from the dispenser
  - c. Rub hands together vigorously, covering all skin surfaces and under rings for 10-15 seconds
  - d. Rinse thoroughly
  - e. Dry hands with a disposable towel
  - f. Turn off the water faucet with a disposable towel
  - g. Discard used towel in waste receptacle
2. Wash hands with soap and water:
  - a. When hands are visibly soiled with dirt or proteinaceous contaminants such as blood, body fluids, secretions, and excretions
  - b. After removal of gloves
  - c. Contact with spore producing organisms (e.g., *C. difficile* or *Bacillus anthracis*) or certain viruses such as Norovirus, Norwalk virus or Rotovirus.
  - d. After using the toilet or performing perineal care
  - e. Before and after eating
  - f. Before an aseptic task such as inserting invasive devices

#### B. Alcohol-based Hand Rub with 60-69% alcohol content is the preferable option if hands are not visibly soiled.

1. Cleanse hands with alcohol-based hand rub:

- a. Use the manufacturer's recommendations for the alcohol-based rubs. Dispense about a quarter-size amount of the product into one hand. Rub hands together in a circular motion, interlacing fingers and rubbing around finger nails until dry (15 to 30 seconds). Spread product over both hands to wrists.
2. Indications for use:
  - a. Before and after direct patient contact
  - b. Before donning sterile gloves
  - c. After removing sterile or non-sterile gloves
  - d. After contact with patient's intact skin (e.g., taking pulse or blood pressure)
  - e. After contact with objects and equipment in the patient's immediate vicinity
  - f. When moving from a contaminated body site to a clean body site during patient care
  - g. Before preparing medications
  - h. Before inserting invasive devices
- C. **Surgical hand antisepsis** may be performed with either FDA approved surgical hand rub, or a plain lotion soap followed by an alcohol-based surgical hand rub with persistent activity.
  1. Remove hand and arm jewelry before surgical scrub
  2. Remove debris from underneath fingernails using a nail cleaner under running water.
  3. For surgical hand scrub use, rub for 2 to 5 minutes.
  4. For plain lotion soap followed by alcohol-based surgical hand rub use, the soap and water is to be used first on hands and forearms, then dried, followed by alcohol-based product for the time period recommended by the manufacturer.
  5. Allow alcohol-based product to dry before donning sterile gloves.
- D. Assist **patient and visitors** to perform hand hygiene
  1. Place hand hygiene products accessible to patient at bedside, preferable on the overbed table.
  2. Educate patient to product use; provide verbal prompts before meals and after toileting.
  3. Place alcohol gel dispensers next to prominently displayed Respiratory Etiquette signs.
  4. Mount alcohol gel dispensers in the patient room.
  5. Educate visitors to product use upon checking in at registration desk.

### **NAILS AND JEWELRY**

Any nail other than a natural nail is considered artificial. Artificial nails are defined as any fingernail enhancement, resin bonding, extensions, tips, gels, or acrylics. Studies have shown higher microbial counts under artificial nails than under natural nails before and after hand washing.

Jewelry should be kept to a minimum, e.g. limit the number of rings. Rings must be easy to clean beneath.

- A. Staff members may not wear artificial nails if they:
  1. Work in the perioperative environment
  2. Provide or assist with direct patient care
  3. Prepare or handle medications
  4. Handle sterile/clean supplies outside of the primary shipping container
  5. Handle, prepare or serve food in clinical/patient area
  6. Work with soiled or clean linens
  7. Perform decontamination or reprocessing activities

8. Perform environmental cleaning
  9. Routinely wear protective gloves for any reason
  10. Are prohibited by specific departmental policy
- B. Care of nails:
1. Keep natural nails short and trimmed (may not extend beyond the tip of the finger) to facilitate effective hand hygiene.
  2. Regular nail polish that is not chipped or cracked and less than 4 days old, is permitted unless prohibited by a departmental policy (for example: operating rooms/suites [OR], central services [CS], dietary, etc.). Regular nail polish does not contain glitter or other decorative additives and is easily removed with nail polish remover.