HAND HYGIENE
Guideline at a Glance

FINGERNAILS AND SKIN CONDITION
• Maintain short, natural fingernails with tips no longer than 2 mm (0.08 inch).
• Do not wear artificial fingernails or extenders.
• Follow your facility’s policy and procedure on use of fingernail polish, including ultraviolet-cured (gel) nail polish.
• Use moisturizing skin care products approved by your health care organization to prevent hand dermatitis.
• Completely dry your hands before donning gloves.
• In the absence of visible soil, disinfect your hands with an alcohol-based hand rub.
• Wear cotton glove liners under non-sterile gloves and sterile cotton glove liners under sterile gloves, if desired.

Having unhealthy skin or fingernails may impede the removal of microorganisms from the hands during hand hygiene. Transmission to the patient of microorganisms that are harbored in unhealthy skin or fingernails may result in the patient developing a health care-associated infection.

HAND HYGIENE
• Perform hand hygiene:
  - before and after patient contact
  - before performing a clean or sterile task
  - after risk for blood or body fluid exposure
  - after contact with patient surroundings
  - when hands are visibly soiled
  - before and after eating
  - after using the restroom
• For hand washing:
  - remove jewelry from hands and wrists
  - wet hands thoroughly with water (avoid using hot water)
  - apply the amount of soap needed to cover all surfaces of the hands
  - rub hands together vigorously covering all surfaces of the hands and fingers for at least 15 seconds
  - rinse with water to remove all soap
  - dry hands thoroughly with a disposable paper towel
  - use a clean paper towel to turn off the water
• When using an alcohol-based hand rub:
  - remove jewelry from hands and wrists
  - apply the amount of alcohol-based hand rub recommended by the manufacturer to cover all surfaces of the hands
  - rub hands together, covering all surfaces of the hands and fingers until dry

Hand hygiene is critical for preventing the transmission of microorganisms from the hands of perioperative team members to the patient and the environment.
SURGICAL HAND SCRUB

- Follow the manufacturer’s instructions for use when using a surgical hand scrub.
- Remove jewelry from hands and wrists.
- Don a surgical mask.
- If hands are visibly soiled, wash hands with soap and water.
- Remove debris from underneath fingernails using a disposable nail cleaner under running water.
- Apply the amount of surgical hand scrub product recommended by the manufacturer to the hands and forearms using a soft, nonabrasive sponge.
- Scrub arms for the length of time recommended by the manufacturer.
- Visualize each finger, hand, and arm as having four sides, and wash all four sides effectively, keeping the hands elevated.
- Scrub for length of time recommended by the manufacturer.
- Avoid splashing surgical attire.
- Discard sponges if used.
- Rinse hands and arms under running water in one direction from fingertips to elbows.
- Hold hands higher than elbows and away from surgical attire.
- In the OR or procedure room, dry hands and arms with a sterile towel using sterile technique before donning a surgical gown and gloves.

Surgical hand antisepsis removes soil and transient microorganisms from the hands and suppresses the growth of resident microorganisms to reduce the risk that the patient will develop a surgical site infection.

SURGICAL HAND RUB

- Follow the manufacturer’s instructions for use.
- Remove jewelry from hands and wrists.
- Don a surgical mask.
- If hands are visibly soiled, wash hands with soap and water.
- Remove debris from underneath fingernails using a disposable nail cleaner under running water.
- Dry hands and forearms thoroughly with a disposable paper towel.
- Apply the surgical hand rub product to the hands and forearms according to the manufacturer’s instructions for use (amount, method, time).
- Allow hands and forearms to dry completely before using sterile technique to don a surgical gown and gloves.

Surgical hand antisepsis is the primary line of defense to protect the patient from pathogens on the hands of perioperative team members, whereas sterile surgical gloves are the secondary line of defense. Due to the risk for glove failure, the performance of surgical hand antisepsis is critical for the prevention of surgical site infections.