



& areas maximally free of

sterile gowns, gloves, & drapes

by procedure risk & area where

procedure performed

microorganisms



**Sterile Technique Examples** 

 Insertion of central lines https://upload.wikimedia.org/wikipedia/commons/6/60/Blausen\_0181\_Cath eter\_CentralVenousAccessDevice\_NonTunneled.png

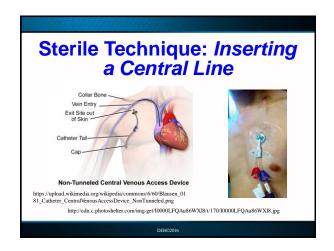
Insertion of urinary catheters

https://en.wikipedia.org/wiki/Urinary\_catheterizatio

Surgery

# Sterile (Aseptic) Technique · Goal: render & maintain objects · Maintain area of sterile field with • Wear appropriate attire as indicated







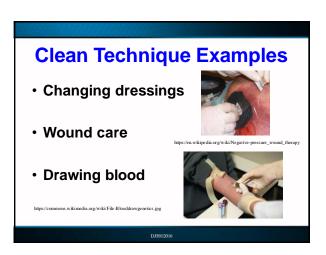




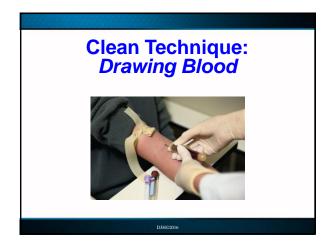
# **Clean Technique**

- Use barrier techniques to  $\downarrow$  microbial transmission from patient to HCW
- · Use meticulous hand hygiene
- Use "no-touch" dressing technique to avoid contamination of sterile supplies (or use sterile gloves for dressing application)
- Wear gown or gloves to ↓ contamination of clothing
- Wear clean gloves to avoid direct contact with infectious materials

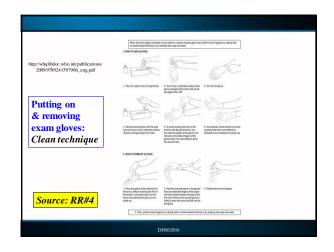
DJH©2016











# Why Do You Need to Know This?



- They are essential infectious disease prevention strategies
- They are important part of infection prevention & control
- Patient care practices involve both techniques in varying situations

DJH©2016

# **Hand Hygiene**

- One of the most important procedures for preventing transmission of disease-producing organisms or infections http://www.freestockphotos.biz/stockphoto/15286
- Many hospital outbreaks of infections related to inadequate hand hygiene

https://en.wikipedia.org/wiki/Hand\_washing

DJH©2016



#### **Definition of Terms 1**

- Hand hygiene: handwashing, antiseptic handwash, antiseptic hand rub, or surgical hand antisepsis
- Handwashing: washing hands with plain (non-antimicrobial) soap & water
- Hand antisepsis: refers to either antiseptic handwash or antiseptic hand rub
- Antiseptic handwash: washing hands with water & soap or other detergents containing an antiseptic agent



DJH©2016

#### **Definition of Terms 2**



- Alcohol-based hand rub: alcohol-containing preparation designed for application to hands to ↓ #'s viable microorganisms. In U.S., such preparations usually contain 60%-95% ethanol or isopropanol.
- Surgical hand antisepsis: Hand antisepsis performed preoperatively by surgical personnel to eliminate transient & 

  resident hand flora

DJH@2016

# Resident & Transient Skin Flora





https://commons.wikimedia.org/wiki/File:Stethoscope\_and\_Laptop\_Computer\_-\_Nci-vol-9713-300.jpg https://www.flickr.com/photos/82066314@N06/9223190460

DJH©201

#### **Transient Flora**

- · Colonize superficial layers of skin
- Often acquired by HCWs during contact with patients or environmental surfaces
- More amenable to removal by routine handwashing with plain soap & water
- Are organisms most frequently associated with HAI



JH©2016

## **Resident Flora**



- Attached to deeper skin layers
- More resistant to removal
- Less likely to be associated with HAI
- Examples: coagulase (-) Staph & diptheroids

DJH©2016

# **Hand Hygiene Agents**

https://www.flickr.com/photos/usdagov/7008312299

- · Plain (non-antimicrobial) soap
- Alcohols
- Chlorhexidine
- lodine & iodophors
- PCMX (Chloroxylenol)
- Hexachlorophene
- Triclosan
- Quaternary ammonium compounds

JH©2016



See RR#1: Appendix "Antimicrobial Spectrum &

of Hand-Hygiene Antiseptic

Characteristics

Agents'



# Special Situations

- None of the these agents are reliably sporicidal (Bacillus or Clostridium)
- Hands contaminated with B. anthracis or C. difficile-contaminated items should be washed with a non-antimicrobial or antimicrobial soap & water

https://en.wikipedia.org/wiki/Agar\_plate

DJH@2016

## **Complicated Issue**



- New terms
- RR#1
- · Old practices may no longer be sound
- Need to change how people do things
- Need to substantiate claims with studies
- Involves patient, staff, & visitor safety

JH©2016

# **Excuses for Not Washing Hands**



- · Not enough time
- Emergency
- No soap
- · No water
- "I was wearing gloves"
- "I'm not going to touch anything"

http://www.ijccm.org/articles/2011/15/1/images/IJCCM\_2 011\_15\_1\_6\_78215\_f12.jpg

40 -35 -30 -25 -20 -15 -10 -5 -

DIHEOOL

## **Using Water Vs. Waterless**



https://www.google.com/url?sa=i&rcl=j&q=&esrc=s&source=images& cd=&cad=rja&uscl=&&ved=OehUKEwjc5138-MLKAHLLC&MKHVCOCgofjWeb&uf=https:%3A%2F%2Fwww.flick r.com%2Fphotos%2Foolalife%2F936244233&\$psig=AFQiCNGpWd ki02GUJ2EFPhrFwAV2BR9&Aust=1453741955454222



DJH@201

# **Handwashing**

- Suboptimal compliance by HCWs
- Location of sink may be a barrier
- Time factor
- Effects on skin- PH, lipid across skin water loss, microbial shedding



https://en.wikipedia.org/wiki/Hand\_washing

DJH©2016

# Hygienic Handrub with Alcohol Base



- Used only in program with sustained improvement in hand hygiene compliance & ↓ infection rates
- More convenient from excellent spreading & evaporation
- · No water necessary
- · Optimal action: bacteria, fungi, viruses, yeasts
- · Rapid acting

https://commons.wikimedia.org/wiki/File:Wallmounted\_hand\_sanitizer\_dispenser.JPG

Preferred method to decontaminate hands\*\*\*\*

DJH@201

# How to Clean without Water (hygienic hand rub)

- Spread recommended amount into palm of one hand
- Rub thoroughly over all surfaces until hands dry
- Not recommended when hands soiled with organic material
- Wash with soap & water after 5-10 times

DIHESON

# How to Wash with Soap & Water

- -wet hands
- -soap up
- -wash for 15 seconds
- -vigorously rub all surfaces
- -rinse
- -dry

Category IB Recommendation

https://www.flickr.com/photos/arlingtonva/4314530838

DJH©2016

#### **Category Recommendations**

- IA = strongly recommended for implementation & strongly supported by well-designed studies
- IB = strongly recommended for implementation & supported by some studies & strong theoretical rationale
- 1C, II & No Recommendation: Unresolved Issue

DJH©201

## Category IA

- If hands NOT visibly soiled, use alcoholbased hand rub for routinely decontaminating hands in all clinical situations\*\*\*
- Decontaminate hands after contact with body fluids, excretions, mucous membranes, nonintact skin, & wound dressings
- Exceptions: spore-contamination, visibly soiled
   \*\*\*= very important

DIHOMA



## **Category 1A**

https://www.flickr.com/photos/colalife/9362442935



 To improve hand hygiene adherence among personnel, make alcoholbased hand rub available at the entrance to the patient's room or at the bedside, other convenient locations, & in individual pocket-sized containers to be carried by HCWs.

DJH©2016

## **Category 1A**

As part of multi-disciplinary program to improve hand hygiene adherence, provide HCWs with a readily-accessible alcoholbased hand-rub product



Should NOT be placed near sink

TH©2016

# **Category 1A**

 If hands visibly dirty or contaminated with proteinaceous material or visibly soiled with blood or other body fluid, wash hands with either a non-antimicrobial soap and water or an antimicrobial soap & water



# Category 1A

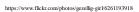
- Do NOT add soap to a partially empty soap dispenser
- "topping off" can lead to bacterial contamination of soap

DO NOT "top off-

https://pixabay.com/static/uploads/photo/2014/0 4/02/16/16/liquid-soap-306747\_960\_720.png

H©2016

#### **Lotions**





- Lotions protect hands from cracking
- When hands are cracked, don't get washed as often
- · Some protective qualities with lotions
- Some petroleum-based ingredients in lotions can damage integrity of latex gloves

DJH©201

# **Category IA**

 Provide HCWs with hand lotions or creams to minimize the occurrence of irritant contact dermatitis associated with hand antisepsis or handwashing



https://en.wikipedia.org/wiki/Lotion

DJH@201

## **Artificial Nails**



- https://commons.wikimedia.org/wiki/File:Tipsy.jpg
- More likely to harbor gram (-) organisms
- Traced to outbreaks of infection in neonatal intensive care units & others
- Chipped nail polish may support growth of \(^\pmu^\*\)'s of organisms on fingernails



https://www.flickr.com/photos/soaringbird/734134661

DJH©201

## **Category IA**

Do NOT wear artificial fingernails or extenders when having direct contact with patients at high risk (e.g., intensive care units, operating rooms)





JH©2016

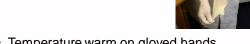
## **Surgical Hand Antisepsis**

- Bacteria on hands can cause wound infections
- Bacteria multiply rapidly on hands with plain soap
- 5 minutes as effective as 10
- 2-stage scrubs as effective as 5 minute antiseptic scrub
- Brushes can damage skin & increase shedding of bacteria from hands

## **Category IB**

- Scrub hands & forearms for length of time recommended by manufacturer (2-6 minutes)
- · Long scrub times (10 minutes) are NOT necessary

#### Why Wash After Removing **Gloves?**



- · Temperature warm on gloved hands
- · Moisture on gloved hands
- · Bacteria rapidly grow in such conditions
- · Gloves may tear

# **Monitoring Compliance**

# **Category 1A** Monitor HCWs' adherence with recommended hand-hygiene practices & provide personnel with information regarding their performance https://en.wikipedia.org/wiki/Doctor%E2%80%93patient\_relationship