

## Hand Hygiene Guidelines for Department of Radiology

The UAB Health System has established guidelines for hand hygiene (see below). However, the following represents an additional guideline for a process related to hand cleansing to be used throughout all sites within the Department of Radiology:

This will apply whenever an individual working within the Department of Radiology enters a room with a patient and physical contact with that patient will occur. This applies to all members of the healthcare team, including, but not limited to, technologists, nurses and physicians. This guideline applies for both routine examinations and invasive procedures.

If the patient is sufficiently alert, any person to come in contact with the patient is expected to announce to the patient, prior to contact, that they will be washing or cleansing their hands. No specific statement is mandated, but examples would include: "Please let me wash my hands before I come to talk to you." or (when using towelettes) "As we start talking, I will be cleaning my hands."

One objective of this process is to inform and assure the patient that you are using hygienic procedures, which will help to instill confidence that fundamental precautions are being observed. Patients are often very appreciative of this action. The other objective is to help establish a habit that will increase compliance with the universal need for hand cleansing when working with patients.

Please also remember to cleanse one's hands after patient contact before leaving the room, rather than in a separate location. Relevant details about hand hygiene procedures themselves are excerpted below from: "UAB Hospital Interdisciplinary Standard: Standard Precautions", accessible in the SPP-SPR website on UAB computers or at <https://scr.hs.uab.edu>. Additional relevant documents are: "The Kirklin Clinic / Affiliated Clinics Interdisciplinary Standard: Universal/Standard Precautions" and "UAB Hospital Radiology Standard: Guidelines for Infection Control in Radiology", also available at SPP-SCR.

Policy approved by:

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#### 4.5.1. Hand Hygiene:

4.5.1.1. Avoid unnecessary touching of surfaces in close proximity to the patient to prevent both contamination of clean hands from environmental surfaces and transmission of pathogens from contaminated hands to surfaces.

4.5.1.2. When hands are visibly dirty or contaminated with proteinaceous material or are visibly soiled with blood or other body fluids, wash hands with either a non-antimicrobial soap and water or an antimicrobial soap and water.

4.5.1.2.1. Before eating and after using a restroom, wash hands with a non-antimicrobial soap and water or with an antimicrobial soap and water.

4.5.1.3. If hands are not visibly soiled, use an alcohol-based hand rub for routinely decontaminating hands in all clinical situations described below.

Alternately, wash hands with an antimicrobial soap and water.

4.5.1.3.1. Before direct contact with patients.

4.5.1.3.2. Before inserting indwelling urinary catheter, peripheral vascular or other invasive device.

4.5.1.3.3. After contact with a patient's intact skin (e.g. when taking a pulse or blood pressure or lifting a patient).

4.5.1.3.4. After contact with inanimate objects (including medical equipment) in the patient's immediate vicinity.

4.5.1.3.5. After contact with body fluids or excretions, mucous membranes non-intact skin and wound dressings if hands are not visibly soiled.

4.5.1.3.6. If moving from a contaminated body site to a clean body site during patient care.

4.5.1.3.7. After gloves are removed.

4.5.1.3.8. Between patient contacts.

4.5.1.3.9. When otherwise indicated to avoid transfer of microorganisms to other patients or environments.

4.5.1.4. *C. difficile* or other spores: Wash hands with soap and water if contact with spores (e.g., *C. difficile* or *Bacillus anthracis*) is likely to have occurred.

4.5.1.5. Plain (non-antimicrobial) soap shall be used in non-patient care areas:

4.5.1.5.1. Wet hands and apply liberal amount of soap.

4.5.1.5.2. Rub vigorously for at least 15 seconds covering all surfaces of the hands and fingers.

4.5.1.5.3. Rinse thoroughly with warm water. Avoid using hot water

because repeated exposure to hot water may increase the risk of dermatitis.

4.5.1.5.4. If the sink does not have foot controls, use a paper towel to shut off the faucet to avoid re-contaminating the hands.

4.5.1.6. Antimicrobial soap shall be used in all patient care areas, the operating room and other procedural areas, or in areas/situations as defined by the Hospital Infection Control Committee:

4.5.1.6.1. Wet hands and apply manufacturer recommended amount of soap.

4.5.1.6.2. Rub vigorously for at least 15 seconds covering all surfaces of the hands and fingers.

4.5.1.6.3. Rinse thoroughly with warm water. Avoid using hot water because repeated exposure to hot water may increase the risk of dermatitis.

4.5.1.6.4. If the sink does not have foot controls, use a paper towel to shut off the faucet to avoid contaminating the hands.

4.5.1.6.5. Personnel in the operating room should refer to procedure for surgical scrub.

4.5.1.7. Alcohol based hand rub shall be available for use throughout the Hospital.

4.5.1.7.1. Hands should be free of visible soil.

4.5.1.7.2. Apply manufacturer recommended amount of product to palm of one hand and rub hands together covering all surfaces of hands and fingers until hands are dry. Do not rinse with water.

4.5.1.8. Hospital-supplied hand lotion that is approved for healthcare worker use by Infection Control may be used after handwashing to help prevent skin drying. Lotions brought in from home shall not be used in patient care areas.

4.5.2. Personal protective equipment (PPE):

4.5.2.1. Gloves:

4.5.2.1.1. Gloves (clean non-sterile gloves) shall be worn when touching moist body substances, and contaminated items.

4.5.2.1.1.1. Put on clean gloves before touching mucous membranes and non-intact skin.

4.5.2.1.1.2. Remove gloves promptly after use (in a manner that prevents contamination of skin), before touching non-contaminated items and environmental surfaces, and before going to another patient, and wash hands immediately.

4.5.2.1.1.2.1. Grasp contaminated glove by the cuff and pull glove towards fingers. Glove will be turned inside out leaving

contamination inside the glove. Discard gloves appropriately.  
4.5.2.1.1.3. Change gloves during patient care if the hands will move from a contaminated body-site (e.g., perineal area) to a clean body-site (e.g., face).