



Title: **Hand Hygiene and Artificial Fingernails**
Issued Under: **Patient Care: Infection Control**
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PURPOSE AND SCOPE:

All staff, volunteers, students, physicians MUST practice hand hygiene with soap and water or an alcohol hand sanitizer. Hand hygiene has been proven to be the most essential method to prevent the spread of infection causing bacteria.

Hand hygiene opportunities include:

1. Before touching a patient
2. Before performing a clean or invasive procedure
3. After handling body fluids
4. After touching the patient, environment, or objects involved in the patients' care
5. Before and After removing gloves

POLICY:

All members of HHF are required to practice hand hygiene before touching a patient, before performing a clean or invasive procedure, after handling body fluids, after touching the patient, environment or objects involved in the patients' care and before and after removing gloves.

Artificial fingernails and natural nail length that exceeds ¼ inch is prohibited in staff, volunteers, students, physicians etc. that have direct patient contact or are involved in the preparation of sterile items that will be utilized on or by patients.

EQUIPMENT:

Soap, water, towel or hand sanitizers.

PROCEDURE:

- A. How to wash your hands:
1. Turn the water on in the sink.
 2. Wet hands and apply infection control approved liquid soap. Rub one hand against the other, being sure to rub between fingers, under nails and above wrists for a minimum 15 seconds.
 3. Rinse hands under the running water.
 4. Dry hands thoroughly.
 5. With a clean paper towel, turn the blades of the water faucet off.
- B. When to practice hand hygiene:
1. When arriving on duty.
 2. When the hands are visibly soiled use soap and water for hand hygiene, when hands are not visibly soiled hand sanitizer is the preferred method of hand hygiene.

3. Alcohol hand sanitizer is not an effective way to clean your hands when caring for a patient with known or suspected *Clostridium difficile* (C. diff). The mechanical action of washing with soap and water is the only way to effectively clean your hands.
4. Before and after contact with individual patients.
5. After contact with any items or surfaces in the patient's environment including healthcare equipment.
6. Upon leaving any bathroom facility.
7. After blowing or wiping the nose.
8. Before entering and upon leaving an isolation area, or after handling items from an isolation area.
9. Before performing a clean or invasive procedure .
10. Before and after eating.
11. On completion of duty.
12. Following removal of latex or vinyl gloves used for contact with a patient or environment, handling of patient specimens or soiled materials.
13. Staff is not permitted to bring in any lotions or soaps that have not been approved by the infection control department. These lotions may deactivate the antimicrobial properties of the soap.

CHARTING:

N/A

SPECIAL CONSIDERATIONS:

The artificial fingernail policy will be enforced by the department supervisor.

PERSONS PERMITTED TO PERFORM:

RN: X
 LPN: X
 PCA: X
 Physician: X
 Other: X

REFERENCES:

1. APIC Infection Control and Applied Epidemiology, Principles and Practice. 1996
2. Guidelines for Infection Control in Healthcare Personnel, CDC, Public Health Service, US Department of Health and Human Services, Hospital Infection Control. 1997
3. Disease Control and Prevention Law of 1955, otherwise known as Act 35. Commonwealth of Pennsylvania
4. American Hospital Association. Infection Control in the Hospital, Chicago, Ill., A.H.A., 4th ed., 1979.
5. Benenson, Abram S. Control of Communicable Diseases in Man, Washington, D.C., The American Public Health Association, 16th ed., 1995.
6. Department of Labor Occupational Safety and Health Administration, Federal Register, Dec. 6, 1991, 29CFR part 1920.1030 Occupational Exposure to Bloodborne Pathogens, Final Rule.
7. Department of Health and Human Services, and Human Services, Federal Register, Oct. 28, 1994, Vol.59, No.208, Centers for Disease Control and Prevention, Guidelines for Preventing the Transmission of Mycobacterium Tuberculosis in Healthcare Facilities, 1994; Notice.

8. Guideline for Hand Hygiene in Health-Care Settings, Recommendations of the HICPAC and the HICPAC/SHEA/APIC/IDSA Hand Hygiene Task Force. MMWR October 25, 2002/Vol.51/No. RR-16.

PERSONNEL RESPONSIBLE FOR DEVELOPMENT:

Infection Control Department

RELATED POLICIES AND PROCEDURES:

Isolation Precautions: Contact, Airborne/Droplet, AFB, MDRO for the Medical Center
Standard Precautions