



Nursing Service Guidelines Operating Room (OR)

- Title:** **OPERATING ROOM ATTIRE AND SURGICAL HAND ANTISEPSIS GUIDELINES**
- Responsibility:** All personnel entering the University of Toledo Medical Center (UTMC) OR.
- Purpose of Guidelines:** All persons entering the semi-restricted and restricted areas of the Operating Room (OR) are required to wear appropriate apparel. To provide a safe environment for surgical patients by minimizing external sources of contamination.

Procedure:

1. Criteria for Attire:
 - a. Only hospital-approved scrub attire may be worn.
 - b. Scrub attire must be laundered in a hospital approved laundry facility.
 - c. Scrub attire is not to be donned at home and worn into the OR or worn home from the OR.
2. Appropriate Attire
 - a. Proper attire in the semi-restricted areas shall include:
 1. Home laundering is acceptable for cloth caps, however, to meet regulatory requirements, if the cap is soiled with blood or other body fluids, it must remain at the facility and be laundered by a UTMC designated accredited laundering facility.
 2. Single-use or cloth head coverings to cover all hair on head.
 3. Disposable hood or cap for facial hair or hijab.
 4. Facial hair (e.g., beards, sideburns) must be covered with an acceptable cover and worn by all personnel and visitors with facial hair while in the restricted areas.
 5. UTMC provided scrub pants, scrub top and warm-up jacket(optional) shall be retrieved fresh before each shift prior to entering semi-restricted or restricted areas.
 6. Hospital badge shall be worn above the waist while at UTMC facilities.
 7. Proper attire in the restricted area of the operating room shall include a mask in addition to the attire prescribed for the semi-restricted area.
 - b. Attire NOT permitted in semi-restricted or restricted areas:
 1. Undershirts which extend beyond the scrub sleeves or length of scrub shirt
 2. White lab coats
 3. Jewelry that cannot be confined in scrubs or surgical masks cannot be worn at work while in the restricted areas. If earrings are worn, ear lobes need to be covered.

4. Attire that becomes wet or otherwise contaminated shall be promptly removed and fresh attire donned.
 - c. Masks are changed:
 1. In between each case
 2. If they become contaminated
 3. Before leaving the department
 - d. Proper scrub attire and warm-up jackets (if used) shall be donned clean and fresh daily or more often, if needed.
 - e. No personal protective equipment (PPE) is to be worn out of the department.
 - f. Fingernails must be 2mm in length or shorter. If the employee is not “scrubbing in” for a surgical case, nail polish may be worn as long as the polish is free from chips and cracks. Artificial nails (e.g., wraps, tips, acrylic, overlays, UV-cured polish) are prohibited in the OR.
3. Surgical Attire While Scrubbed:
 - a. Appropriate eye protection must be worn by all persons in the sterile surgical field
4. Upon leaving the OR:
 - a. Scrubs should be removed when leaving the hospital for the day.
 - b. Shoes designated for in-hospital use only are encouraged. Otherwise, shoe covers are required. Designated shoes must be free from visible soil, debris and blood.
 - c. If shoe covers are worn, they must be removed before leaving the area of their intended purpose (e.g., the OR).
 - d. If a cloth cap is worn, don a fresh surgical cap daily.
5. Surgical Hand Antisepsis
 - a. Surgical Hand Scrub
 1. Perform a traditional surgical hand scrub in the following manner:
 - i. Remove jewelry from hands and forearms.
 - ii. Don a surgical mask.
 - iii. If hands and forearms are visibly soiled, wash with soap and water.
 - iv. Clean subungual areas of nails under running water using a disposable nail cleaner.
 - v. Rinse hands and forearms under running water.
 - vi. Apply the amount of surgical hand scrub product recommended by the manufacturer to the hands and forearms using a soft, nonabrasive sponge.
 - vii. Scrub for length of time recommended by the manufacturer. The scrub should be timed to allow adequate product contact with skin.
 - viii. Visualize each finger, hand, and arm as having four sides to be scrubbed.
 - ix. Beginning with one hand and keeping the hand elevated, scrub all four sides of each finger, the hand, and the arm.
 - x. Repeat the process for the opposite hand and arm.
 - xi. If possible, turn the water off when it is not in use.
 - xii. Avoid splashing surgical attire.
 - xiii. Discard sponges in appropriate containers.

- xiv. Rinse hands and arms under running water in one direction from fingertips to elbows.
- xv. Hold hands higher than elbows and away from surgical attire.
- xvi. In the OR or invasive procedure room, dry hands, and arms with a sterile towel before donning a sterile surgical gown and gloves

b. Surgical Hand Rub

1. Perform surgical hand antisepsis using an alcohol-based surgical hand rub product in the following manner:
 - i. Remove jewelry from hands and forearms.
 - ii. Don a surgical mask.
 - iii. If hands and forearms are visibly soiled, wash with soap and water.
 - iv. Clean subungual areas of nails under running water using a disposable nail cleaner.
 - v. Rinse hands and forearms under running water.
 - vi. Dry hands and forearms thoroughly with a disposable towel.
 - vii. Apply the surgical hand rub product to the hands and arms according to the manufacturer's instructions for use (eg, amount, method, time).
 - viii. Repeat applications as directed.
 - ix. Rub hands and forearms thoroughly until completely dry.
 - x. In the OR or invasive procedure room, don a sterile gown and gloves.

Note: During COVID-19 pandemic please refer to the <https://www.utoledo.edu/coronavirus/docs/UTMC-Infection-Control-Procedures-Recommendations-OR-061920.pdf> for additional PPE information for the OR.

References

AORN Syntegrity® Solution. AORN Syntegrity® On-line Companion Guide; 2022.

Guideline for hand hygiene. In: *Guidelines for Perioperative Practice*. Denver, CO: AORN, Inc; 2022.

Reviewed by: Ronni Zona RN, CNOR; Samantha Eitiniear, MPH, REHS, Infection Preventionist; Ann Keegan, MPH, BSN, RN, CIC, Director, Infection Prevention

Approved: 7/02
Reviewed: 7/05, 7/08, 10/11, 10/14, 5/16, 12/22
Revised: 2/19, 10/20, 10/23
Reviewed by Policy & Standard Committee, 5/2016, 2/2019, 12/2022,