POLICY

Hand hygiene is necessary by all health care and service personnel for prevention of hospital acquired infections and to reduce the incidence of cross-transmission of microorganisms within the medical facility.

PROCEDURES

1. Hand hygiene requirements:
   A. Prior to and between all patient contacts.
   B. Before and after all patient care and procedures.
   C. **Before donning gloves and after removing gloves.**
   D. After visit to restroom.
   E. Whenever hands become soiled or contaminated.

2. Hand washing technique:
   A. Turn on water faucet, adjust temperature.
   B. Wet hands.
   C. Apply approved hand cleanser onto hands.
   D. Rub hands vigorously on all surfaces for 15 – 30 seconds.
   E. Avoid splashing to lessen contamination of other skin surfaces.
   F. Rinse thoroughly. Keep hands down allowing runoff to go into the sink and not down arms.
   G. Dry hands well.
   H. In order to prevent re-contamination of hands; use paper towel to turn off water faucet and to open door.
   I. Discard paper towel in appropriate container after use.

3. Alcohol Based Waterless Antiseptic Agents:
   A. Waterless antiseptic agent may be used under the following circumstances:
      a. Routine disinfection of hands when not visibly soiled with blood or body fluids.
      b. When immediate access to hand washing facilities is limited.
      c. During an emergent situation.
   B. Waterless antiseptic agents are **NOT** to be used when caring for a patient in isolation for *Clostridium difficile*, hands are to be washed with soap and water.
APPROVALS

SIGNATURES:

[Signature]

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