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**Owner:** Anne Eerkes: Mgr Operating Room Unit  
**Policy Area:** Operating Room  
**References:**  
**Applicability:** WA - Kadlec Regional Medical Center

## Procedural Department Dress Code, 32.16.01

Document Type: Policy, Procedure

### PURPOSE:

To outline guidelines and standards related to apparel and personal protective devices (PPEs) worn in all procedural areas of the Kadlec Regional Medical Center to include, but not limited to: Operating Room, Sterile Processing Department, Cath Lab, Birth Center and other procedural areas requiring "freshly laundered, hospital supplied" scrub attire.

### SUPPORTIVE INFORMATION:

Regulatory agencies require clean surgical attire worn in the restricted and semi-restricted areas of Surgical Services be "freshly-laundered, hospital supplied" scrubs. This allows the facility to maintain known infection control variables to a minimum by monitoring temperature, cycle length, storage, etc. of the laundering process. It also intends to exclude scrubs being stored in personal lockers subject to dust and other contaminants. This infection control/patient safety principle is based on covering skin surfaces that potentially shed skin cells, containing hair/jewelry to prevent inadvertent contamination of a sterile area or wound, minimizing the potential of cross contamination, and providing our patients with an environment that supports their healing. Regulating agencies with influence on this issue include Occupational Safety and Health Agency (OSHA), Centers for Disease Control (CDC), and The Joint Commission (TJC) with supporting research from American Association of Medical Instrumentation (AAMI), Association of peri-Operative Registered Nurses (AORN), and Association of Practitioners of Infection Control (APIC).

### POLICY:

KRMC is required to supply freshly laundered, hospital supplied scrubs for those individuals working in departments subject to this standard. Individuals are required to comply with the issues surrounding the standard as well, to include:

- Clean surgical attire must be worn in semi-restricted and restricted areas
- Disposable surgical attire is available, if needed
- Not storing scrubs in locker, unless individually packaged
- Changing scrub attire if soiled, being careful when removing shirts over their heads to prevent contamination
- Staff must change into street clothes prior to leaving each day and not wear scrubs home

- Changing all scrub attire anytime one travels outside the confines of the building
- All personal clothing must be contained by scrubs or surgical jacket
- The caregivers arms must be covered during performance of intraoperative patient skin antisepsis

In addition, disposable PPEs are worn to compliment the protective nature of the scrub attire from exposing the environment, or the patient, to undue bio-burden.

Required PPEs in the OR/SPD/Cath Lab/Birth Center include, but are not limited to:

- **Head/Hair/Beard cover** – The caregivers scalp and hair must be covered in the semi-restricted and restricted areas
  - Cloth caps may be worn but must be laundered regularly
  - Bouffant
  - Surgeon's hood
  - Beards must be contained/covered with a disposable beard cover
- **Jewelry** –
  - Scrubbed persons must remove all jewelry from fingertips to elbows prior to scrubbing, to include wedding rings/bands
  - Non-scrubbed personnel may wear watches/bracelets, if contained within the scrub jacket
  - Wedding rings/bands are preferred to be removed for non-scrubbed persons, but may be worn
  - All necklaces must be contained under scrub shirt/jacket
  - Earrings –
    - All earring types must be contained in the disposable head covering
- **Scrub shirt and pants** – Changed daily, or as needed, if soiled. Care is observed if visibly soiled to avoid facial exposure
- **Jacket** --The caregivers arms must be covered during performance of intraoperative patient skin antisepsis
- **Shoes/Shoe covers** – shoe covers should be donned when gross contamination can be reasonably anticipated or to cover shoes if they are not dedicated to the surgical area.
  - It is recommended to have dedicated shoes for the OR/SPD/Cath Lab/Birth Center.
  - Outside shoes have been associated with environmental contamination of the perioperative environment.
    - If contaminated or suspected to be contaminated, shoe covers shall be removed upon leaving the OR suite, disposed of and replaced, as appropriate.
  - If shoe covers are worn, they must be discarded daily
- **Hand Hygiene** –
  - A hand wash using soap and water or liquid skin scrub agent shall be performed by all non-direct caregiver staff upon arrival to the department.
  - Direct patient caregivers in procedural areas shall perform a 3 minute-hand wash using an approved surgical scrub agent at the beginning of their shift according to recommended manufacturer's guidelines. This does not include an alcohol based agent.
  - Nails will be maintained in compliance with house-wide policy #1128 that includes:
    - No artificial nails including, but not limited to, wraps, acrylics, tips, tapes, gel coatings
    - No fingernail polish shall be worn if working in, or having the potential of entering the operating room suites
    - If non-OR staff wearing nail polish or artificial nails enter any semi-restricted or restricted area of the department, they need to perform proper hand hygiene. They will be advised of this policy and prevented from scrubbing until compliance is complete or not scrub in. If not scrubbing in, gloves must be worn during direct patient care, if compliance is not immediately possible.

- Hand hygiene as directed by infection control and hospital practice will be employed. Hand hygiene dispensers are available in each procedural area, halls, selected rooms, etc.
- **Surgical Scrub**
  - A surgical hand scrub shall be performed by all members of the scrubbed procedural team prior to donning sterile gown/gloves. The hand scrub will be in accordance with manufacturer's recommendation using either an antimicrobial surgical scrub agent or an alcohol based antiseptic surgical hand rub that has met the United States Food and Drug Administration (FDA) requirements for surgical hand antisepsis.
- **Face Masks** – Approved face masks will be worn in OR suites any time sterile items are open.
  - A variety of masks are available for individual comfort.
    - NOTE: Those with ear loops are not allowed in the OR during procedures as they are intended to be used in procedural areas, not surgical, and do not have the same filtration properties.
    - All masks should be applied to "hug" all edges
  - All masks should be removed and disposed of in the garbage container at the end of the case
  - Masks shall be removed following each case and not worn outside the department
  - N95 respirator masks or PAPRs are available when needed
- **Eye Protection** – As advised by the CDC, eye protection should be employed when there is a reasonable chance of splash and in accordance with the Bloodborne Pathogen Exposure Control Plan.
  - Protection should fit well and not move easily
  - Some masks have shields attached
  - Anti-fog solution is available in the department to apply to glasses
  - Care of eye protection such as glasses, loops, etc. is the responsibility of the individual
  - A hand held spigot eye wash station is located in the soiled utility
- **Identification Badges** – All identification badges will be worn in accordance with KRMC policies and procedures and easily visible
- **Briefcases, backpacks, and other personal items**-- To prevent contamination, any personal items should be wiped with hospital disinfectant/cleaner before and after transporting into a semi-restricted or restricted area. If item cannot be wiped down, then it should be contained in a plastic bag or left in a designated area.

## Attachments

No Attachments

## Approval Signatures

Approver	Date
Kirk Harper: CNO	01/2020
Heather Shipman: Executive Assistant	12/2019
Anne Eerkes: Mgr Operating Room Unit	12/2019

## Applicability

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