

## Appendix B: Physician Information

- A. This policy outlines the indications and methods for hand hygiene in a patient care setting at JHH. Hand Hygiene is the single most important prevention strategy for avoiding Healthcare Acquired Infections.
- B. Hand hygiene with either waterless hand sanitizer or soap and water is required:
  1. Upon entering and leaving a patient room or environment
    - Private or semi-private room: Hand hygiene is required upon room entrance and exit
    - All other patient rooms/areas with curtains: Hand hygiene is required upon crossing the curtain line
    - Patients not in rooms (in wheelchairs or stretchers in hallways): hand hygiene is required before and after patient contact
  2. Between patient contacts if more than one patient is in a room
  3. Before donning and after removing gloves
  4. Before moving to a clean body site from a contaminated body site during patient care
  5. Before and after handling an invasive device (e.g. peripheral vascular catheter, urinary catheter, central intravascular catheter), regardless of whether or not gloves are used
  6. *Note:* When carrying supplies or transporting a patient into or out of a room, hand hygiene is required as soon as hands are free.
- C. Hand hygiene with soap and water is required
  1. After contact with body fluids or excretions, mucous membranes, non-intact skin or wound dressings or items contaminated with these body fluids
  2. Before handling food or oral medications
  3. Before eating
  4. After using the rest room
  5. Any time hands are visibly soiled
  6. After caring for a patient on contact precautions for *C. difficile* or other spore forming organisms, rotavirus or norovirus. The physical action of washing and rinsing of hands is required because alcohols, chlorhexidine, iodophors, and other antiseptic agents have poor activity against these organisms.
  7. Before caring for a patient with a food allergy
  8. When there is a significant build-up of waterless hand sanitizer
- D. All staff have the responsibility to protect their patients by either intervening directly when they observe staff not adhering to this policy, or by reporting to their supervisor, or in Patient Safety Net.
- E. Artificial nails are not allowed for any staff with direct patient care