



## INODAYA Hospitals - Kakinada

Documentation code:

INH/HIC.Doc.No:05

### POLICY ON HAND HYGIENE GUIDELINES

Prepared date: 05/09/2023

Reference: HIC .3.b. NABH Standards – 5<sup>th</sup> Edition

Issue Date:05/09/2023

Issue no: 02

Review No: 1

Review date: 04/09/2024

## POLICY ON HAND HYGIENE GUIDELINES

### 1. PURPOSE:

- 1.1. To remove transient microbial contamination this has been acquired by recent contact with infected or colonized patients or environmental sources.
- 1.2. To prevent the transmission of potentially pathogenic organisms.

### 2. SCOPE:

This policy describes hand hygiene measures to be followed throughout **INODAYA Hospitals - Kakinada**. Hand hygiene is the single most important means of preventing the spread of infection and hospital-acquired infections.

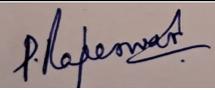
### 3. RESPONSIBILITIES:

**INODAYA Hospitals – Kakinada** personnel should follow the policies established here in.

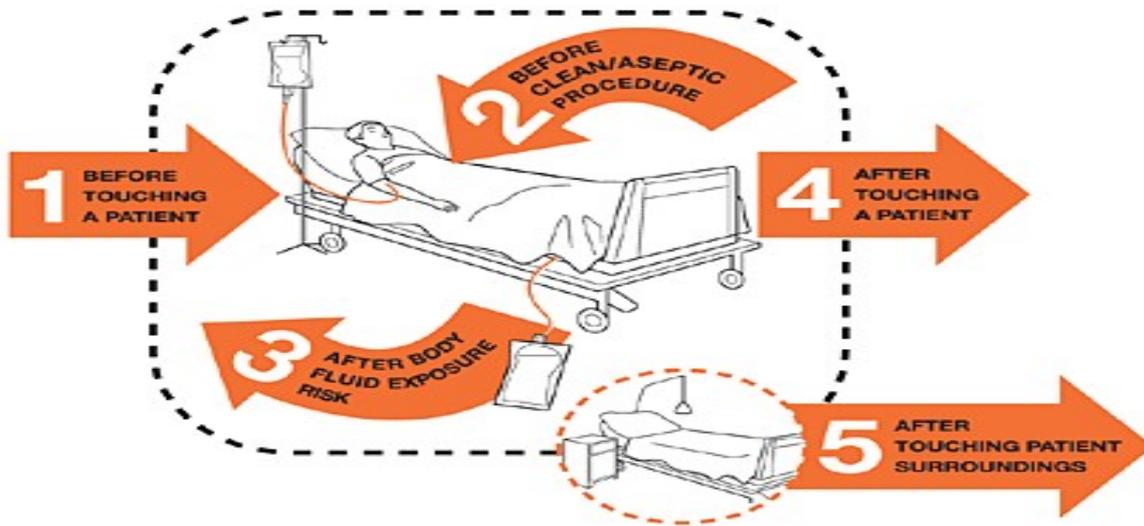
### 4. PROCEDURE:

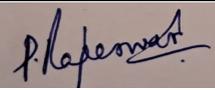
#### 4.1. General Policies

Standard Precautions indicate the use of disposable gloves when in contact with blood or body fluids, secretions, excretions, mucous membranes or non-intact skin. Hands are washed following removal of the disposable gloves

Prepared by: 	Verified by: 	Approved by: 
Dr.P.Rajeswari	Dr.D.N.S.Prakash	Mrs.G.Lakshmi Lavanya
Infection Control Officer	Medical Director	Chief executive Officer

**YOUR 5 MOMENTS FOR HAND HYGIENE**



Prepared by: 	Verified by: 	Approved by: 
Dr.P.Rajeswari	Dr.D.N.S.Prakash	Mrs.G.Lakshmi Lavanya
Infection Control Officer	Medical Director	Chief executive Officer



## INODAYA Hospitals - Kakinada

Documentation code:

INH/HIC.Doc.No:05

### POLICY ON HAND HYGIENE GUIDELINES

Prepared date: 05/09/2023

Reference: HIC .3.b. NABH Standards – 5<sup>th</sup> Edition

Issue Date:05/09/2023

Issue no: 02

Review No: 1

Review date: 04/09/2024

<b>1 BEFORE PATIENT CONTACT</b>	<p><b>WHEN?</b> Clean your hands before touching a patient when approaching him or her</p> <p><b>WHY?</b> To protect the patient against harmful germs carried on your hands</p>
<b>2 BEFORE AN ASEPTIC TASK</b>	<p><b>WHEN?</b> Clean your hands immediately before any aseptic task</p> <p><b>WHY?</b> To protect the patient against harmful germs, including the patient's own germs, entering his or her body</p>
<b>3 AFTER BODY FLUID EXPOSURE RISK</b>	<p><b>WHEN?</b> Clean your hands immediately after an exposure risk to body fluids (and after glove removal)</p> <p><b>WHY?</b> To protect yourself and the health-care environment from harmful patient germs</p>
<b>4 AFTER PATIENT CONTACT</b>	<p><b>WHEN?</b> Clean your hands after touching a patient and his or her immediate surroundings when leaving</p> <p><b>WHY?</b> To protect yourself and the health-care environment from harmful patient germs</p>
<b>5 AFTER CONTACT WITH PATIENT SURROUNDINGS</b>	<p><b>WHEN?</b> Clean your hands after touching any object or furniture in the patient's immediate surroundings, when leaving - even without touching the patient</p> <p><b>WHY?</b> To protect yourself and the health-care environment from harmful patient germs</p>

The newly developed “Five Moments for Hand Hygiene” approach has emerged from the WHO Guidelines on Hand Hygiene in Health Care to add value to any hand hygiene improvement strategy. This includes:

#### a. Before touching a patient

WHEN? Clean your hands before touching a patient.

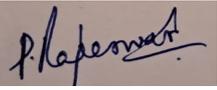
WHY? To protect the patient against harmful germs carried on your hands.

#### b. Before clean or aseptic procedure

WHEN? Clean your hands immediately before performing a clean or aseptic procedure.

WHY? To protect the patient against harmful germs, including the patient's own.

#### c. After body fluid exposure risk

Prepared by: 	Verified by: 	Approved by: 
Dr.P.Rajeswari	Dr.D.N.S.Prakash	Mrs.G.Lakshmi Lavanya
Infection Control Officer	Medical Director	Chief executive Officer



## INODAYA Hospitals - Kakinada

Documentation code:

INH/HIC.Doc.No:05

### POLICY ON HAND HYGIENE GUIDELINES

Prepared date: 05/09/2023

Reference: HIC .3.b. NABH Standards – 5<sup>th</sup> Edition

Issue Date:05/09/2023

Issue no: 02

Review No: 1

Review date: 04/09/2024

WHEN? Clean your hands immediately after an exposure risk to body fluids (and after glove removal).

WHY? To protect yourself and the healthcare environment from harmful germs of the patient.

#### d. After touching a patient

WHEN? Clean your hands after touching a patient and patient's immediate surroundings.

WHY? To protect yourself and the healthcare environment from harmful germs from the patient.

#### e. After touching patient surroundings

WHEN? Clean your hands after touching any object or furniture in the patient's immediate surroundings– even if the patient has not been touched.

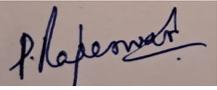
WHY? To protect yourself and the healthcare environment from harmful germs from the patient.

**System change:** Ensuring that the necessary infrastructure is in place to allow healthcare workers to practice hand hygiene. This includes two essential elements:

- Access to safe, continuous water supply as well as to soap and towels.

- Readily accessible alcohol-based hand rubs at the point of care.

**Training / Education:** Providing regular training on the importance of hand hygiene, based on the “My Five Moments for Hand Hygiene” approach, and the correct procedures for hand rubbing and hand washing, to all healthcare workers.

Prepared by: 	Verified by: 	Approved by: 
Dr.P.Rajeswari	Dr.D.N.S.Prakash	Mrs.G.Lakshmi Lavanya
Infection Control Officer	Medical Director	Chief executive Officer



## INODAYA Hospitals - Kakinada

Documentation code:

INH/HIC.Doc.No:05

### POLICY ON HAND HYGIENE GUIDELINES

Prepared date: 05/09/2023

Reference: HIC .3.b. NABH Standards – 5<sup>th</sup> Edition

Issue Date:05/09/2023

Issue no: 02

Review No: 1

Review date: 04/09/2024

### Evaluation and feedback: Monitoring hand hygiene practices and infrastructure

#### 4.2. Indications for hand washing and hand antisepsis

4.2.1. Wash hands with soap and water when visibly dirty or contaminated with proteinaceous material, or visibly soiled with blood or other body fluids, or if exposure to potential spore-forming organisms is strongly suspected or proven or after using the restroom

4.2.2. Preferably use an alcohol-based hand rub for routine hand antisepsis, if hands are not visibly soiled alternatively, wash hands with soap and water.

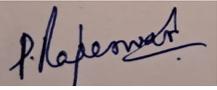
4.2.3. Wash hands with either plain or antimicrobial soap and water or rub hands with an alcohol-based formulation before handling medication or preparing food

4.2.4. When alcohol-based hand rub is already used, do not use antimicrobial soap concomitantly

#### 4.3. Hand Hygiene Indications:

4.3.1. With the exception of urgent situations in which hand hygiene cannot be achieved, staff always cleanse their hands as follows:

- a) On arrival for duty at the hospital, in order to remove microorganism from outside.

Prepared by: 	Verified by: 	Approved by: 
Dr.P.Rajeswari	Dr.D.N.S.Prakash	Mrs.G.Lakshmi Lavanya
Infection Control Officer	Medical Director	Chief executive Officer



## INODAYA Hospitals - Kakinada

Documentation code:

INH/HIC.Doc.No:05

### POLICY ON HAND HYGIENE GUIDELINES

Prepared date: 05/09/2023

Reference: HIC .3.b. NABH Standards – 5<sup>th</sup> Edition

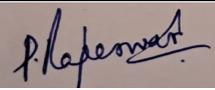
Issue Date:05/09/2023

Issue no: 02

Review No: 1

Review date: 04/09/2024

- b) On completion of duty, before leaving the hospital, to avoid taking hospital germs home.
  - c) Before entering and leaving a patient's room
  - d) Before and after each personal bodily function, e.g., eating, blowing nose, urination/defecation, combing hair or scratching.
  - e) Whenever hands are obviously soiled.
  - f) Before and after any physical contact with a patient.
  - g) After any contact with a patient's mucous membranes, blood, body fluids, secretions or excretions or other potentially infectious materials, e.g., regulated waste and cultures.
  - h) Before and after handling patient care devices such as intravascular catheters, urinary drainage systems and respiratory equipment or any an invasive device for patient care regardless of whether or not gloves are used
- 4.3.2. After contact with articles contaminated with a patient's blood, non-intact skin, or wound dressings body fluids or secretions and excretions, eg, used sputum containers, drainage material, urinals and bedpans.
- 4.3.3. Before preparing or serving food to a patient
- 4.3.4. Before and after collecting specimens from a patient
- 4.3.5. Before and after wearing gloves.
- 4.3.6. After leaving a contaminated area such as a soiled utility room

Prepared by: 	Verified by: 	Approved by: 
Dr.P.Rajeswari	Dr.D.N.S.Prakash	Mrs.G.Lakshmi Lavanya
Infection Control Officer	Medical Director	Chief executive Officer



## INODAYA Hospitals - Kakinada

Documentation code:

INH/HIC.Doc.No:05

### POLICY ON HAND HYGIENE GUIDELINES

Prepared date: 05/09/2023

Reference: HIC .3.b. NABH Standards – 5<sup>th</sup> Edition

Issue Date:05/09/2023

Issue no: 02

Review No: 1

Review date: 04/09/2024

4.3.7. Whenever hands are visibly dirty

4.3.8. As a general rule, when in doubt, health care workers should always wash their hands

#### 4.4. Duration of hand washing is the most important consideration

4.4.1. Ten to fifteen seconds for other routine hand washing

4.4.2. Two minutes at the beginning of duty

4.4.3. Two minutes before high-risk procedures e.g., IV handling, catheter care

4.4.4. Two minutes after heavy contamination e.g., dressing changes

4.4.5. Five minute scrubs are required for pre-operative hand washing

#### 4.5. Products for Hand washing

4.5.1. Plain soap: Liquid soap in sealed dispensers which is emptied thoroughly cleaned and refilled with a completely new solution on a regular basis. Liquid soap never be added to partially filled dispensers.

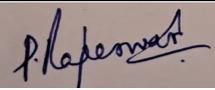
4.5.2. Products containing antimicrobial. A selection of antimicrobial hand washes approved by the Infection Control Committee is available for use.

#### 4.6. Indications for Hand washing with plain soap:

- During routine patient care
- After visiting the bathroom or any public area.

#### 4.7. Indications for Hand washing with Antiseptic products

4.7.1. Before invasive procedures (refer to department – specific infection control measures)

Prepared by: 	Verified by: 	Approved by: 
Dr.P.Rajeswari	Dr.D.N.S.Prakash	Mrs.G.Lakshmi Lavanya
Infection Control Officer	Medical Director	Chief executive Officer



## INODAYA Hospitals - Kakinada

Documentation code:

INH/HIC.Doc.No:05

### POLICY ON HAND HYGIENE GUIDELINES

Prepared date: 05/09/2023

Reference: HIC .3.b. NABH Standards – 5<sup>th</sup> Edition

Issue Date:05/09/2023

Issue no: 02

Review No: 1

Review date: 04/09/2024

4.7.2. Before and after leaving isolation rooms

4.7.3. In the intensive care units

4.7.4. In the Burns unit

4.8. When soap and running water are not readily available, a waterless alcohol based antiseptic hand cleanser used as an alternative

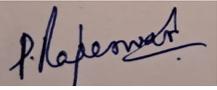
#### 4.9. Technique

##### 4.9.1. Precautions

- Keep nails short and clean
- Avoid wearing rings especially those with ridges or stones – bacterial counts are higher when rings are worn.
- Do not wear artificial nails or nail polish – they discourage vigorous hand washing & fingernail polish cracks providing microscopic areas for breeding bacteria)
- Do not wear wrist watches, bracelets and roll up long sleeves or remove long sleeved clothing – the wrists should be included when washing hands

##### 4.9.2. Hand hygiene technique

- Wet hands with water - Use running and clean water whenever possible.
- Apply the amount of 3 – 5 ml of liquid soap hand-washing agent necessary to cover all surfaces.
- Vigorously perform rotational hand rubbing on both hand palms and backs, interlace and interlock fingers to cover all surfaces, generating friction on all surfaces of the hands and fingers. The duration of this procedure is 1 Minutes

Prepared by: 	Verified by: 	Approved by: 
Dr.P.Rajeswari	Dr.D.N.S.Prakash	Mrs.G.Lakshmi Lavanya
Infection Control Officer	Medical Director	Chief executive Officer



## INODAYA Hospitals - Kakinada

Documentation code:

INH/HIC.Doc.No:05

### POLICY ON HAND HYGIENE GUIDELINES

Prepared date: 05/09/2023

Reference: HIC .3.b. NABH Standards – 5<sup>th</sup> Edition

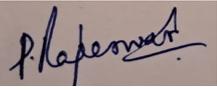
Issue Date:05/09/2023

Issue no: 02

Review No: 1

Review date: 04/09/2024

- d) Debris are removed from under the fingernails because the subungual area has higher microbial counts and contamination of the hands can increase when gloves provide a warm, moist environment
- e) Rinse hands thoroughly with water to remove residual soap
- f) Dry thoroughly with a single-use paper towel.
- g) When the sink does not have foot controls or an automatic shutoff, a dry paper towel is used to shut off the faucet in order to avoid recontamination of the hands.
- h) Make sure hands are dry. Use a method that does not re-contaminate hands.
- i) Paper towels are dispensed from holders that require the user to remove them one at a time. Hand-drying materials are placed near the sink in an area that will not become contaminated by splashed water
- j) Make sure towels are not used multiple times or by multiple people
- k) Avoid using hot water, as repeated exposure to hot water may increase the risk of dermatitis
- l) Duration of hand washing (seconds) is important, not only for mechanical action but also to allow antimicrobial products sufficient contact time to achieve the desired effect when they are used.
- m) Wash all surfaces thoroughly, including wrists, palms, backs of hands, fingers and under the fingernail.
- n) Regular soap is adequate to wash off most bacteria and viruses.

Prepared by: 	Verified by: 	Approved by: 
Dr.P.Rajeswari	Dr.D.N.S.Prakash	Mrs.G.Lakshmi Lavanya
Infection Control Officer	Medical Director	Chief executive Officer



## INODAYA Hospitals - Kakinada

Documentation code:

INH/HIC.Doc.No:05

### POLICY ON HAND HYGIENE GUIDELINES

Prepared date: 05/09/2023

Reference: HIC .3.b. NABH Standards – 5<sup>th</sup> Edition

Issue Date:05/09/2023

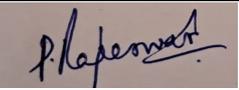
Issue no: 02

Review No: 1

Review date: 04/09/2024

### STEPS FOR PERFORMING HAND HYGIENE USING HAND WASH

(Each step should be repeated for both the hands)

Prepared by: 	Verified by: 	Approved by: 
Dr.P.Rajeswari	Dr.D.N.S.Prakash	Mrs.G.Lakshmi Lavanya
Infection Control Officer	Medical Director	Chief executive Officer



# INODAYA Hospitals - Kakinada

Documentation code:

INH/HIC.Doc.No:05

## POLICY ON HAND HYGIENE GUIDELINES

Prepared date: 05/09/2023

Reference: HIC .3.b. NABH Standards – 5<sup>th</sup> Edition

Issue Date:05/09/2023

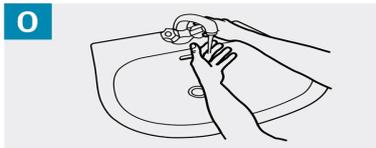
Issue no: 02

Review No: 1

Review date: 04/09/2024

### How to Hand Wash

Wash hands when visibly soiled. Otherwise, use handrub.  
Duration of the entire procedure: 40-60 seconds



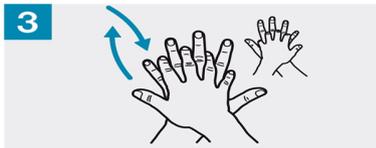
Wet hands with water;



Apply enough soap to cover all hand surfaces;



Rub hands palm to palm;



Right palm over left dorsum with interlaced fingers and vice versa;



Palm to palm with fingers interlaced;



Backs of fingers to opposing palms with fingers interlocked;



Rotational rubbing of left thumb clasped in right palm and vice versa;



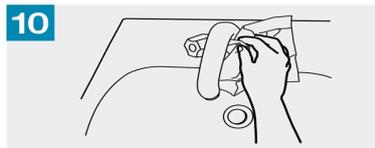
Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;



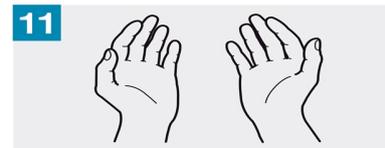
Rinse hands with water;



Dry hands thoroughly with a single use towel;



Use towel to turn off faucet;



Your hands are now safe.

### Wash or decontaminate hands:

- After handling any blood, body fluids, secretions, excretions, and contaminated items
- Between contact with different patients,

Prepared by:	Verified by:	Approved by:
Dr.P.Rajeswari	Dr.D.N.S.Prakash	Mrs.G.Lakshmi Lavanya
Infection Control Officer	Medical Director	Chief executive Officer



## INODAYA Hospitals - Kakinada

Documentation code:

INH/HIC.Doc.No:05

### POLICY ON HAND HYGIENE GUIDELINES

Prepared date: 05/09/2023

Reference: HIC .3.b. NABH Standards – 5<sup>th</sup> Edition

Issue Date:05/09/2023

Issue no: 02

Review No: 1

Review date: 04/09/2024

- c. Between tasks and procedures on the same patient to prevent cross contamination between different body sites,
- d. Immediately after removing gloves,
- e. Using a plain soap, antimicrobial agent, such as an alcoholic hand rub or water less antiseptic agent.

#### Procedure

Step 0- Wet hands with water.

Step 1- Apply enough soap to cover all hand surfaces.

Step 2 - Rub hands palm against palm.

Step 3 - Right palm over left dorsum with interlaced fingers and vice versa.

Step 4 - Palm against palm with fingers interlaced.

Step 5 - Backs of fingers to opposing palms with fingers interlocked.

Step 6 - Rotational rubbing of left thumb clasped in right palm and vice versa.

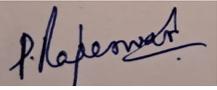
Step 7 - Rotational rubbing, backwards and forwards, with clasped fingers of right hand in left palm and vice versa.

Step 8 - Rinse hands with water.

Step 9 - Dry hands thoroughly with a single use towel.

Step 10 - Use towel to turn off faucet;

Step 11 - your hands are now safe.

Prepared by: 	Verified by: 	Approved by: 
Dr.P.Rajeswari	Dr.D.N.S.Prakash	Mrs.G.Lakshmi Lavanya
Infection Control Officer	Medical Director	Chief executive Officer



## INODAYA Hospitals - Kakinada

Documentation code:

INH/HIC.Doc.No:05

### POLICY ON HAND HYGIENE GUIDELINES

Prepared date: 05/09/2023

Reference: HIC .3.b. NABH Standards – 5<sup>th</sup> Edition

Issue Date:05/09/2023

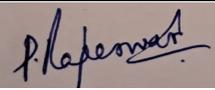
Issue no: 02

Review No: 1

Review date: 04/09/2024

#### 4.10. Use of Alcohol Based Hand-Rub

- 4.10.1. Hand rub should only be used on **VISIBLY CLEAN HANDS**.
- 4.10.2. Alcohol based hand rub is useful when there is a need for rapid hand-disinfection e.g. during ward rounds.
- 4.10.3. It must be remembered that alcohol is not a cleaning agent and is not recommended in the presence of physical dirt
- 4.10.4. Hand cleansing with an alcohol based waterless hand antiseptic cleanser can be accomplished by applying a amount of and briskly rubbing
- 4.10.5. Dispense thumbnail sized amount of solution antiseptic cleanser into palm
- 4.10.6. Ensure solution covers all hand surfaces
- 4.10.7. Rub vigorously, over all surfaces and under nails using hand wash technique, until dry. The duration of hand rub with AHD is 30 seconds.

Prepared by: 	Verified by: 	Approved by: 
Dr.P.Rajeswari	Dr.D.N.S.Prakash	Mrs.G.Lakshmi Lavanya
Infection Control Officer	Medical Director	Chief executive Officer



**INODAYA Hospitals - Kakinada**

Documentation code:

**INH/HIC.Doc.No:05**

**POLICY ON HAND HYGIENE GUIDELINES**

**Prepared date: 05/09/2023**

**Reference: HIC .3.b. NABH Standards – 5<sup>th</sup> Edition**

**Issue Date:05/09/2023**

**Issue no: 02**

**Review No: 1**

**Review date: 04/09/2024**

# How to Handrub?

**RUB HANDS FOR HAND HYGIENE! WASH HANDS WHEN VISIBLY SOILED**

**🕒 Duration of the entire procedure: 20-30 seconds**

**1a**



Apply a palmful of the product in a cupped hand, covering all surfaces;

**1b**

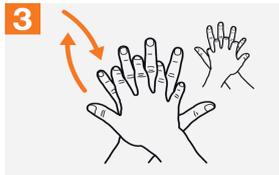


**2**



Rub hands palm to palm;

**3**



Right palm over left dorsum with interlaced fingers and vice versa;

**4**



Palm to palm with fingers interlaced;

**5**



Backs of fingers to opposing palms with fingers interlocked;

**6**



Rotational rubbing of left thumb clasped in right palm and vice versa;

**7**



Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;

**8**



Once dry, your hands are safe.



**World Health Organization**

**Patient Safety**  
A World Alliance for Safer Health Care

**SAVE LIVES**  
Clean Your Hands

All reasonable precautions have been taken by the World Health Organization to verify the information contained in this document. However, the published material is being distributed without warranty of any kind, either expressed or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall the World Health Organization be liable for damages arising from its use. WHO acknowledges the Hôpitaux Universitaires de Genève (HUG), in particular the members of the Infection Control Programme, for their active participation in developing this material.

**Prepared by:**

*P. Rajeswari*

**Verified by:**

*Dr. D.N.S. Prakash*

**Approved by:**

*G. Lakshmi Lavanya*

Dr.P.Rajeswari

Dr.D.N.S.Prakash

Mrs.G.Lakshmi Lavanya

Infection Control Officer

Medical Director

Chief executive Officer



## INODAYA Hospitals - Kakinada

Documentation code:

INH/HIC.Doc.No:05

### POLICY ON HAND HYGIENE GUIDELINES

Prepared date: 05/09/2023

Reference: HIC .3.b. NABH Standards – 5<sup>th</sup> Edition

Issue Date:05/09/2023

Issue no: 02

Review No: 1

Review date: 04/09/2024

Steps 1 - Apply a palm full of the product in a cupped hand, covering all surfaces.

Step 2 - Rub hands palm against palm.

Step 3 - Right palm over left dorsum with interlaced fingers and vice versa.

Step 4 - Palm against palm with fingers interlaced.

Step 5 - Backs of fingers to opposing palms with fingers interlocked.

Step 6 - Rotational rubbing of left thumb clasped in right palm and vice versa.

Step 7 - Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa.

Step 8 - Once dry, your hands are safe.

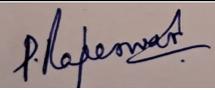
#### 4.11. Surgical hand preparation

4.11.1. If hands are visibly soiled, wash hands with plain soap before surgical hand preparation

4.11.2. Remove debris from underneath fingernails using a nail cleaner, preferably under running water

4.11.3. Sinks should be designed to reduce the risk of splashes

4.11.4. Remove rings, wrist-watch, and bracelets before beginning the surgical hand preparation

Prepared by: 	Verified by: 	Approved by: 
Dr.P.Rajeswari	Dr.D.N.S.Prakash	Mrs.G.Lakshmi Lavanya
Infection Control Officer	Medical Director	Chief executive Officer



## INODAYA Hospitals - Kakinada

Documentation code:

INH/HIC.Doc.No:05

### POLICY ON HAND HYGIENE GUIDELINES

Prepared date: 05/09/2023

Reference: HIC .3.b. NABH Standards – 5<sup>th</sup> Edition

Issue Date:05/09/2023

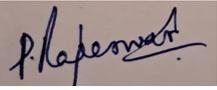
Issue no: 02

Review No: 1

Review date: 04/09/2024

- 4.11.5. Surgical hand antisepsis should be performed using either an antimicrobial soap or an alcohol-based hand rub, preferably with a product ensuring sustained activity, before donning sterile gloves
- 4.11.6. When performing surgical hand antisepsis using an antimicrobial soap, scrub hands and forearms for the length of time recommended by the manufacturer, 3 to 5 minutes.
- 4.11.7. When using an alcohol-based surgical hand rub product with sustained activity, follow the manufacturer's instructions. Apply the product on dry hands only
- 4.11.8. Do not combine surgical hand scrub and surgical hand rub with alcohol-based products sequentially
- 4.11.9. When using an alcohol-based product, use sufficient product to keep hands and forearms wet with the hand rub throughout the procedure
- 4.11.10. After application of the alcohol-based product as recommended, allow hands and forearms to dry thoroughly before donning sterile gloves

### STEPS FOR PERFORMING HAND HYGIENE FOR SURGICAL

Prepared by: 	Verified by: 	Approved by: 
Dr.P.Rajeswari	Dr.D.N.S.Prakash	Mrs.G.Lakshmi Lavanya
Infection Control Officer	Medical Director	Chief executive Officer

**(Each step should be repeated for both the hands)**

The handrubbing technique for surgical hand preparation must be performed on perfectly clean, dry hands. On arrival in the operating theatre and after having donned theatre clothing (cap/hat/bonnet and mask), hands must be washed with soap and water. After the operation when removing gloves, hands must be rubbed with an alcohol-based formulation or washed with soap and water if any residual talc or biological fluids are present (e.g. the glove is punctured).

Surgical procedures may be carried out one after the other without the need for handwashing, provided that the handrubbing technique for surgical hand preparation is followed (Images 1 to 17).



**1**  
Put approximately 5ml (3 doses) of alcohol-based handrub in the palm of your left hand, using the elbow of your other arm to operate the dispenser



**2**  
Dip the fingertips of your right hand in the handrub to decontaminate under the nails (5 seconds)



**3**  
Images 3–7: Smear the handrub on the right forearm up to the elbow. Ensure that the whole skin area is covered by using circular movements around the forearm until the handrub has fully evaporated (10-15 seconds)



**4**  
See legend for Image 3



**5**  
See legend for Image 3



**6**  
See legend for Image 3



**7**  
See legend for Image 3



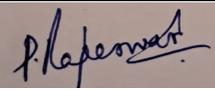
**8**  
Put approximately 5ml (3 doses) of alcohol-based handrub in the palm of your right hand, using the elbow of your other arm to operate the dispenser



**9**  
Dip the fingertips of your left hand in the handrub to decontaminate under the nails (5 seconds)

**Key steps**



Prepared by: 	Verified by: 	Approved by: 
Dr.P.Rajeswari	Dr.D.N.S.Prakash	Mrs.G.Lakshmi Lavanya
Infection Control Officer	Medical Director	Chief executive Officer



## INODAYA Hospitals - Kakinada

Documentation code:

INH/HIC.Doc.No:05

### POLICY ON HAND HYGIENE GUIDELINES

Prepared date: 05/09/2023

Reference: HIC .3.b. NABH Standards – 5<sup>th</sup> Edition

Issue Date:05/09/2023

Issue no: 02

Review No: 1

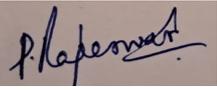
Review date: 04/09/2024

- Keep nails short and pay attention to them when washing your hands – most microbes on hands come from beneath the fingernails.
- Do not wear artificial nails or nail polish.
- Remove all jewellery (rings, watches, bracelets) before entering the operating theatre
- Wash hands and arms with a non-medicated soap before entering the operating theatre area or if hands are visibly soiled.
- Clean subungual areas with a nail file. Nailbrushes should not be used as they may damage the skin and encourage shedding of cells. If used, nailbrushes must be sterile, once only (single use).

#### Protocol for surgical hand preparation using Medicated Hand Scrub

##### Procedural steps

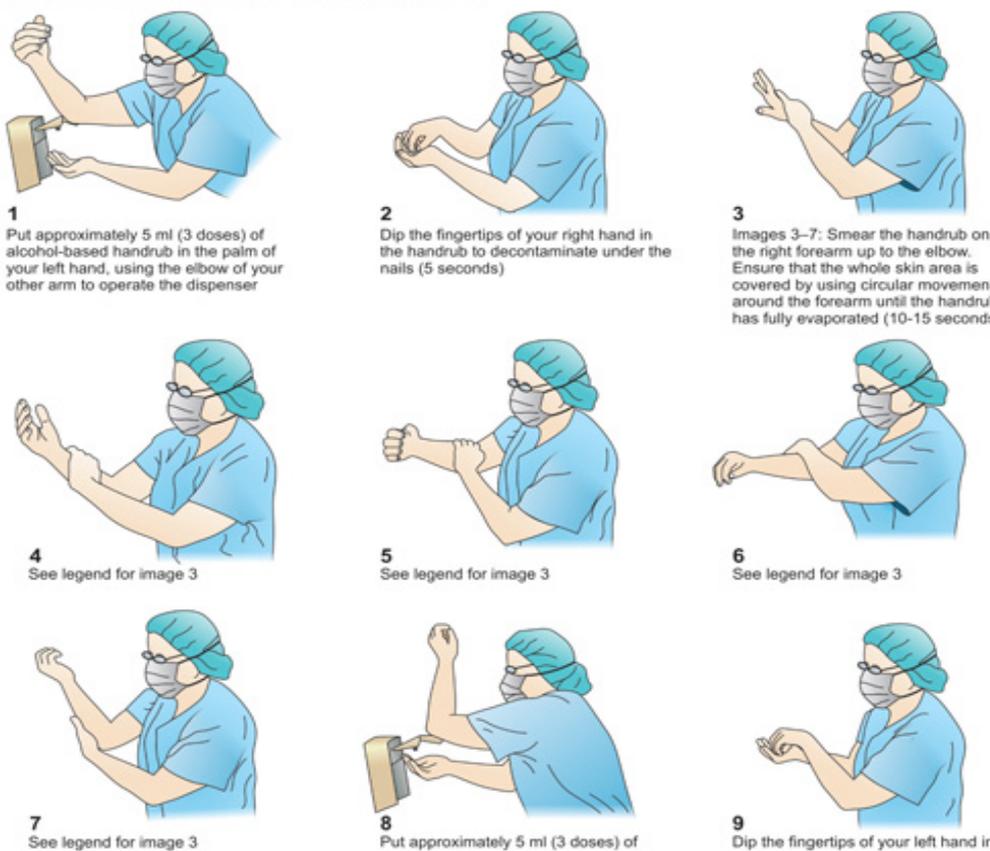
- Start timing. Scrub each side of each finger, between the fingers, and the back and front of the hand for 2 minutes.
- Proceed to scrub the arms, keeping the hand higher than the arm at all times. This helps to avoid recontamination of the hands by water from the elbows and prevents bacteria-laden soap and water from contaminating the hands.
- Wash each side of the arm from wrist to the elbow for 1 minute.
- Repeat the process on the other hand and arm, keeping hands above elbows at all times. If the hand touches anything at any time, the scrub must be lengthened by 1 minute for the area that has been contaminated.
- Rinse hands and arms by passing them through the water in one direction only, from fingertips to elbow. Do not move the arm back and forth through the water.
- Proceed to the operating theatre holding hands above elbows.
  - At all times during the scrub procedure, care should be taken not to splash water onto surgical attire.

Prepared by: 	Verified by: 	Approved by: 
Dr.P.Rajeswari	Dr.D.N.S.Prakash	Mrs.G.Lakshmi Lavanya
Infection Control Officer	Medical Director	Chief executive Officer

- Once in the operating theatre, hands and arms should be dried using a sterile towel and aseptic technique before donning gown and gloves.

The handrubbing technique for surgical hand preparation must be performed on perfectly clean, dry hands. On arrival in the operating theater and after having donned theater clothing (cap/hat/bonnet and mask), hands must be washed with soap and water. After the operation when removing gloves, hands must be rubbed with and alcohol-based formulation or washed with soap and water if any residual talc or biological fluids are present (e.g. the glove is punctured).

Surgical procedures may be carried out one after the other without the need for hand washing, provided that the handrubbing technique for surgical hand preparation is followed (Images 1 to 17)



- Put approximately 5 ml (3 doses) of alcohol-based handrub in the palm of your left hand, using the elbow of your other arm to operate the dispenser
- Dip the fingertips of your right hand in the handrub to decontaminate under the nails (5 seconds)
- Images 3–7: Smear the handrub on the right forearm up to the elbow. Ensure that the whole skin area is covered by using circular movements around the forearm until the handrub has fully evaporated (10–15 seconds)
- See legend for image 3
- Put approximately 5 ml (3 doses) of alcohol-based handrub in the palm of your right hand, using the elbow of your other arm to operate the dispenser
- Dip the fingertips of your left hand in the handrub to decontaminate under the nails (5 seconds)

Prepared by:

*P. Rajeswari*

Verified by:

*Dr. D.N.S. Prakash*

Approved by:

*G. Lakshmi Lavanya*

Dr.P.Rajeswari

Dr.D.N.S.Prakash

Mrs.G.Lakshmi Lavanya

Infection Control Officer

Medical Director

Chief executive Officer



## INODAYA Hospitals - Kakinada

Documentation code:

INH/HIC.Doc.No:05

### POLICY ON HAND HYGIENE GUIDELINES

Prepared date: 05/09/2023

Reference: HIC .3.b. NABH Standards – 5<sup>th</sup> Edition

Issue Date:05/09/2023

Issue no: 02

Review No: 1

Review date: 04/09/2024

#### 4.12. Hand care:

##### 4.12.1. Dermatitis

Dermatitis may be related to frequent hand cleansing. Staff with dermatitis shall report to the staff clinic.

#### 4.13. Use Of Gloves

4.13.1. Gloves are an important protective measure; however the use of gloves should not negate the application of hand hygiene measures.

4.13.2. The same glove should **not**

- Be worn from one patient to another
- Be worn between clean and dirty procedures
- Be washed or cleaned with alcohol hand rubs, gels or wipes.

4.13.3. Hands should always be washed decontaminated **before and after** glove use.

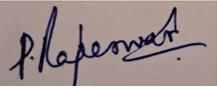
4.13.4. **Remember** - Gloves do not provide 100% protection against blood borne viruses and hands may become contaminated on removal of gloves

#### 4.14. Hand washing facilities

4.14.1. Sinks with elbow operated taps and hand washing facilities shall be

4.14.2. Conveniently located throughout Indus Hospitals facilities, i.e., in each patient room, examination room and all patient care areas

4.14.3. Located adjacent to rooms where diagnostic or invasive procedures are performed.

Prepared by: 	Verified by: 	Approved by: 
Dr.P.Rajeswari	Dr.D.N.S.Prakash	Mrs.G.Lakshmi Lavanya
Infection Control Officer	Medical Director	Chief executive Officer



## INODAYA Hospitals - Kakinada

Documentation code:

INH/HIC.Doc.No:05

### POLICY ON HAND HYGIENE GUIDELINES

Prepared date: 05/09/2023

Reference: HIC .3.b. NABH Standards – 5<sup>th</sup> Edition

Issue Date:05/09/2023

Issue no: 02

Review No: 1

Review date: 04/09/2024

4.14.4. Paper towel containers shall be refilled daily or as often as necessary to maintain an adequate supply

4.14.5. Hand creams are useful to protect skin from cracks and irritation caused by hand washing. If used, these products shall be supplied in small containers. The dispensing nozzle of the container shall not be touched when applying hand cream.

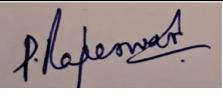
#### 4.15. Performance Indicators

4.15.1. The following performance indicators are recommended for measuring improvements in HCWs' hand-hygiene adherence:

- a) Periodically monitor and record adherence as the number of hand-hygiene episodes performed by personnel/number of hand-hygiene opportunities, by ward or by service. Provide feedback to personnel regarding their performance – through the WHO hand hygiene monitoring tool kit
- b) When outbreaks of infection occur, assess the adequacy of health-care worker hand hygiene.

#### 5. List of Records

S. No	Record Name	Responsibility	Retention Period
1	Hand Hygiene monitoring tool	Infection Control Nurse	1 Year
2	Training Program Register	Nursing superintendent	1 Year

Prepared by: 	Verified by: 	Approved by: 
Dr.P.Rajeswari	Dr.D.N.S.Prakash	Mrs.G.Lakshmi Lavanya
Infection Control Officer	Medical Director	Chief executive Officer



## INODAYA Hospitals - Kakinada

Documentation code:

INH/HIC.Doc.No:05

### POLICY ON HAND HYGIENE GUIDELINES

Prepared date: 05/09/2023

Reference: HIC .3.b. NABH Standards – 5<sup>th</sup> Edition

Issue Date:05/09/2023

Issue no: 02

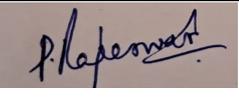
Review No: 1

Review date: 04/09/2024

#### 6. REFERENCES:

Guidelines for handling healthcare settings, CDC documents MMWR, October 2002

WHO Guidelines for Hand Hygiene 2009

Prepared by: 	Verified by: 	Approved by: 
Dr.P.Rajeswari	Dr.D.N.S.Prakash	Mrs.G.Lakshmi Lavanya
Infection Control Officer	Medical Director	Chief executive Officer