

Section: UTMB On-line Documentation Subject: Infection Control & Healthcare Epidemiology Policies and Procedures Topic: 01.14 - Hand Hygiene for All Healthcare Workers	01.14 - Policy 5/27/2025 - Revised 1979 - Author
--	---

01.14 - Hand Hygiene for All Healthcare Workers

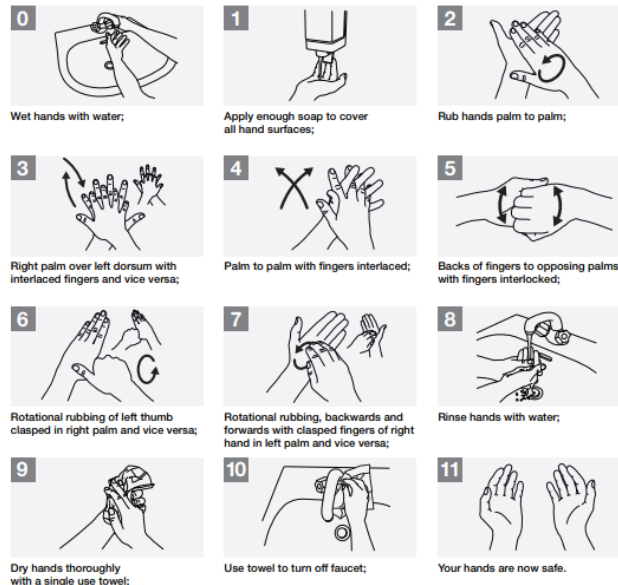
Purpose	To prevent the transmission of microorganisms from patient to patient and from inanimate surfaces to patients by the hands of all healthcare providers.
Audience	All employees of UTMB hospitals, clinics, contract workers, volunteers, and students.
Policy	• Hand hygiene shall be practiced before and after each patient contact (even if gloves are worn). All employees are required to wash, rinse, and dry their hands or apply an alcohol hand rub before beginning work, after using the rest room and prior to leaving work. • Antiseptic (antimicrobial) handwashing products or alcohol hand rub shall be used for hand hygiene. • An alcohol hand rub may be used for hand hygiene in place of an antimicrobial soap handwash. • Hands that are grossly contaminated must be washed with antimicrobial soap prior to hand disinfection with an alcohol hand rub. • Gloves shall be worn when exposure to blood or any other body fluids, excretions or secretions is likely. • For a given patient, site care shall start at the cleanest site (e.g., mouth care) and progress to the dirtiest site (e.g., urinary catheter care). When going from a dirty site to a clean site, hands must be washed, or an alcohol hand rub applied between sites.
Routine Handwashing Procedure	1. Wet the hands with clean, running water (warm or cold). 2. Apply enough soap to cover all hand surfaces. 3. Work up a good lather. 4. Apply with vigorous contact on all surfaces of the hands. 5. Scrub hands for at least 20 seconds. 6. Rinse your hands well under clean, running water. 7. Keep hands down so that run off will go into the sink and not down the arm. 8. Dry well thoroughly with paper towels and use the paper towels to turn off the faucet. 9. Discard the paper towels into the appropriate container.

Section: UTMB On-line Documentation Subject: Infection Control & Healthcare Epidemiology Policies and Procedures Topic: 01.14 - Hand Hygiene for All Healthcare Workers	01.14 - Policy 5/27/2025 - Revised 1979 - Author
--	---

How to Handwash?

WASH HANDS WHEN VISIBLY SOILED! OTHERWISE, USE HANDRUB

Duration of the entire procedure: 40-60 seconds



Hand Antiseptics

An alcohol hand rub may be substituted for antimicrobial soap as long as hands are not visibly soiled. The following technique should be used:

1. Apply enough alcohol hand rub to cover the entire surface of hands and fingers.
2. Rub the solution vigorously into hands until dry. This should take about 20 seconds.

Use of alcohol hand rubs may result in a sticky residue on the hands. Wash with lotion soap periodically to remove the hand rub residue.

Section: UTMB On-line Documentation Subject: Infection Control & Healthcare Epidemiology Policies and Procedures Topic: 01.14 - Hand Hygiene for All Healthcare Workers	01.14 - Policy 5/27/2025 - Revised 1979 - Author
--	---

How to Handrub?

RUB HANDS FOR HAND HYGIENE! WASH HANDS WHEN VISIBLY SOILED

 Duration of the entire procedure: 20-30 seconds



Fingernails

Healthcare workers (HCWs) with direct patient contact shall adhere to CDC and UTMB epidemiology guidelines.

HCWs must maintain fingernails so that their natural nail tips should not extend past the ends of their fingers. Artificial nail enhancements are not to be worn. This includes, but is not limited to, artificial nails, tips, wraps, appliques, acrylics, gel, shellac, glue, and any additional items applied to the nail surface. Nail polish is permitted, but anything applied to natural nails other than polish is considered an enhancement. Chipped nail polish supports the growth of organisms on fingernails and is strictly prohibited.

Additional requirements may apply to individual departments to comply with established standards of care in specialty areas (e.g., surgical services, food and nutrition, etc.).

Hand Antisepsis Prior to Surgical Procedures

HCWs who participate in surgical procedures must either perform a surgical scrub with an antimicrobial soap or hand and arm disinfection with an alcohol rub prior to donning sterile gloves and a sterile gown (*see policy 01.46 Guideline for Prevention of Surgical Site Infections*). If hands and arms are not grossly contaminated between cases, an alcohol rub may again be applied to hands and arms in place of a surgical scrub. If, at any time, hands are contaminated, they must be washed with an antiseptic soap and water or washed with lotion soap and water followed by application of an alcohol hand

Section: UTMB On-line Documentation	01.14 - Policy
Subject: Infection Control & Healthcare Epidemiology Policies and Procedures	5/27/2025 - Revised
Topic: 01.14 - Hand Hygiene for All Healthcare Workers	1979 - Author

rub.

Lotion

An individual may use a lotion to ease the dryness resulting from frequent hand hygiene and which may also prevent dermatitis resulting from glove use. However, hand lotion can become contaminated with pathogenic organisms and should not be shared with others or patients. Employees may have their own lotion but are required to keep their own bottle of lotion in a location where no one else can use it (e.g., locker or pocket). The lotion container must be labeled with the employee's name. The lotion may not be used on patients.

Allergic Contact Dermatitis Associated with Hand Hygiene Products

Allergic reactions to products applied to the skin may present as delayed type reactions or less commonly as immediate reactions. If a HCW suspects allergic contact dermatitis, they will be instructed to go to Employee Health to be evaluated by an employee health provider.

Soap and Water vs. Hand Sanitizer

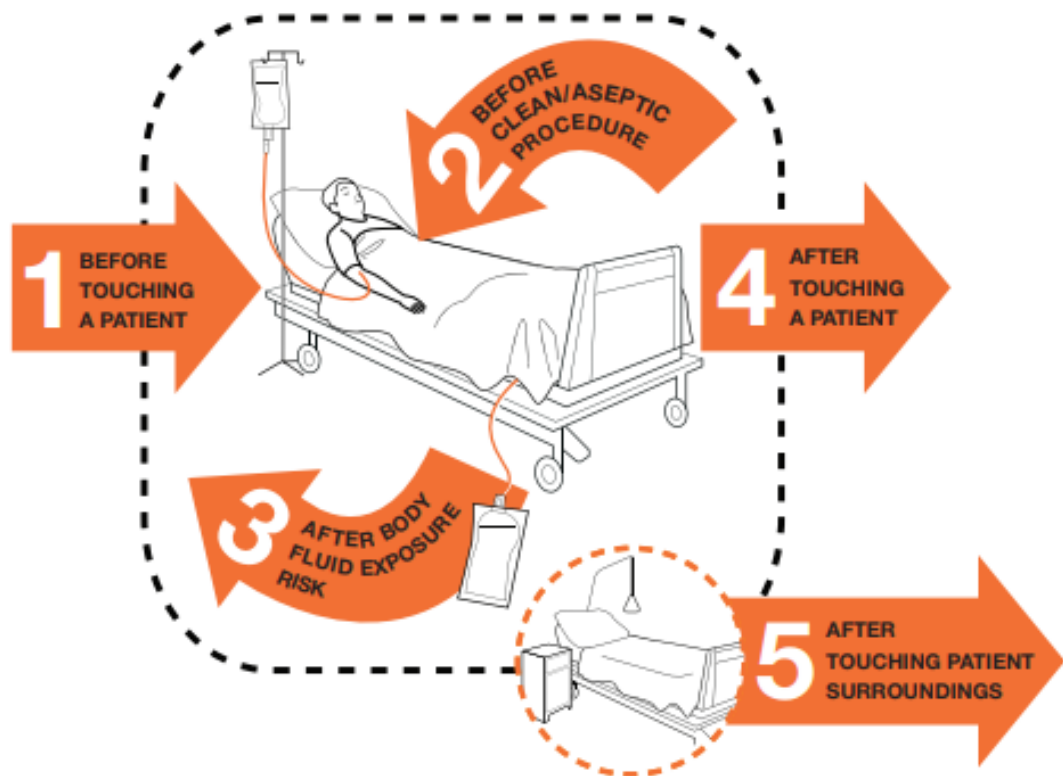
An alcohol-based hand sanitizer is the preferred method for cleaning your hands when they are not visibly dirty because it:

- Is more effective at killing potentially deadly germs on hands than soap.
- Is easier to use during the course of care, especially:
 - when moving from soiled to clean activities with the same patient or resident.
 - when moving between patients or residents in shared rooms or common areas.
- Improves skin condition with less irritation and dryness than soap and water

Reference

1. SHEA/IDSA/APIC Practice Recommendation: Strategies to prevent healthcare-associated infections through hand hygiene: 2022 Update. Part of ICHE Compendium 2022. Janet B. Glowicz, Emily Landon, Emily E. Sickbert-Bennett, Allison E. Aiello, et.all. Infection Control & Hospital Epidemiology / Volume 44 / Issue 3 / March 2023. Published online by Cambridge University Press: 08 February 2023, pp. 355-376
2. World Health Organization (WHO). Hand Hygiene.

Your 5 Moments for Hand Hygiene



1	BEFORE TOUCHING A PATIENT	WHEN?	Clean your hands before touching a patient when approaching him/her.
		WHY?	To protect the patient against harmful germs carried on your hands.
2	BEFORE CLEAN/ASEPTIC PROCEDURE	WHEN?	Clean your hands immediately before performing a clean/aseptic procedure.
		WHY?	To protect the patient against harmful germs, including the patient's own, from entering his/her body.
3	AFTER BODY FLUID EXPOSURE RISK	WHEN?	Clean your hands immediately after an exposure risk to body fluids (and after glove removal).
		WHY?	To protect yourself and the health-care environment from harmful patient germs.
4	AFTER TOUCHING A PATIENT	WHEN?	Clean your hands after touching a patient and her/his immediate surroundings, when leaving the patient's side.
		WHY?	To protect yourself and the health-care environment from harmful patient germs.
5	AFTER TOUCHING PATIENT SURROUNDINGS	WHEN?	Clean your hands after touching any object or furniture in the patient's immediate surroundings, when leaving – even if the patient has not been touched.
		WHY?	To protect yourself and the health-care environment from harmful patient germs.