# HACKETTSTOWN REGIONAL MEDICAL CENTER CENTER FOR SLEEP RELATED DISORDERS POLICY AND PROCEDURES INFECTION CONTROL

Effective Date: June, 2010 Policy No: 7.015

Cross Referenced:

Reviewed Date: 04/12

Origin: Center for Sleep Disorders

Authority: Cardio/Pulmonary Manager

Revised Date: Page: 1 of 2

**PURPOSE:** Standard procedures to reduce the spread of infection help assure the safety of the staff and patients.

**POLICY:** All sleep staff will follow Universal Precautions and Bloodborne Pathogen Standards for contact with all patients.

All sleep staff members attend a New Employee Orientation Program upon being hired which covers Universal Precautions and Bloodborne/Airborne Pathogen standards for direct patient contact.

#### **PROCEDURE:**

- If a technician/technologist has an active acute viral infection (e.g., cold, flu), they should not be allowed to have direct patient contact.
- Patients with similar acute viral infections should not undergo testing as this may negatively
  influence the results of their sleep study. The test should be rescheduled at their earliest
  convenience.
- Personal Protective Equipment (PPEs) is used to guard against potentially infectious substances. This equipment includes gloves, masks, gowns, face shields, aprons, lab coats, respirators, goggles, and resuscitation bags. OSHA regulations require the following:
  - Employees are trained to use PPE properly.
  - Appropriate PPE is used each time the task is performed.
  - PPE be free of physical flaws that could compromise safety.
  - Gloves fit properly.
  - If blood or other infectious substances penetrate PPE, it is removed as soon as possible.
  - Before leaving the work area, all PPE must be removed and placed in the appropriate receptacle.
  - Always wash your hands.

In addition all New Hires at HRMC who have clinical/direct patient contact are fitted with a N95 respirator mask for the protection of airborne pathogens. The respirators are kept in the lab and can be used on an as needed basis. Fit testing is performed yearly as per hospital policies.

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#### **Hand Washing**

Hands should be considered important health care instruments, and as with any instrument used on a patient, they must be kept clean and as free of bacteria as possible. Hands, therefore, must be kept in good condition. Prevention of dermatitis, breaks in the skin, rashes, nail care, etc. should be of prime importance to the caregiver.

The following practices must be followed with any patient contact:

Hands, including wrists, must be washed for at least 10-15 seconds with approved hand-washing agent at the start of each work shift, and after direct patient contact, and when leaving or returning to the department.

- Hands and wrists should be thoroughly rinsed and dried after washing.
- Hand faucets should be shut off with a paper towel.
- Only hospital approved hand lotion should be applied to hands to prevent skin breakdown. Studies have shown bacterial growth in large containers of lotion. Personal containers of lotions are discouraged, if personal lotion is brought in it must not be a petroleum based lotion, as petroleum interferes with the integrity of exam gloves. Lotion containers should be no larger than 8-oz. and should not be shared between staff members as these products may easily become contaminated.

### **Nails**

- Nails must be kept short and well manicured. No more than one-quarter I inch (1/4") beyond the finger tip is considered acceptable.
- Nail polish must be free from chips or cracks, if worn at all.
- Artificial nails must not be worn. This includes tips, wraps and acrylics.
- Jewelry, including bracelets and ornate rings, must not be worn. Wrist watches should be removed or pushed up beyond the wrist when hand washing.

### **Gloves**

- Latex-free gloves are used during patient hookup or during any other period of direct contact with the patient (especially when handling bodily fluids).
- They must be removed after each patient and hands must be washed.

#### **Compliance**

The Manager of Cardio Pulmonary Services will be responsible for monitoring staff members for compliance with this policy.