

# Behind the Mask:

*Infection Preventionist Practice Forum*

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## Office Hours



- This session is NOT being recorded but please be aware of confidentiality as you share experiences and challenges.
- CE Credits are now available for Office Hours
  - You will receive an email within 2 business days with instructions on how to claim credit.
- If you have a questions
  - Raise hand and our admin will take you off mute OR
  - Enter your question into the Q&A
- If you have additional questions that are not answered, you can email us at [infoforipslice@nebraskamed.com](mailto:infoforipslice@nebraskamed.com)

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## Submitted Topics

IPC Practice in the OR

PPE use in the OR

PPE Donning and Doffing

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## Infection Prevention in the OR

### # 1 goal Support efforts for HAI prevention & patient safety

- Relationship building, collaboration, partnership
- Surgical scrub
- Patient prep
- Sterile field
- Surgical attire
- Aseptic and sterile technique
- Surgical Environment
- Instrument reprocessing
- Provide data for improvement opportunities

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## Infection Prevention in the OR



### Build relationship with perioperative staff

- Attend perioperative staff meetings
- Collaborate on improvement initiatives
- Perioperative team champion
  - Invite perioperative team members to report at ICC
- IP serves as a resource for OR issues

### Build relationship with perioperative leadership

- Invite perioperative leadership to risk assessment to help determine program goals
- Leadership review of SSIs and other HAIs
- Understand how CMS CoPs relate to perioperative services

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## Infection Prevention in the OR



### Surgical Scrub

Before donning sterile gloves  
1<sup>st</sup> scrub of the day  
Dried with sterile towel  
Follow MIFU



### Surgical Prep

Pre-op bathing  
Skin prep with alcohol-based antiseptic (1A)  
Maintain sterile prep



### Surgical Field

Maintain and monitor  
Sterile technique  
Minimize traffic  
Instrument

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## Infection Prevention in the OR



### Surgical attire

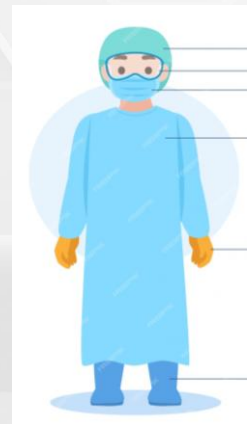
- Laundered in healthcare accredited laundry
- Restricted area
  - All hair (head and face) covered in semi-restricted areas
  - Masks cover mouth and nose when sterile supplies are opened
  - Sleeves for non-scrubbed personnel
- Semi-restricted area
  - All hair (head and face) covered in semi-restricted areas
  - No draping masks

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## PPE in the OR



- Personnel entering the semi-restricted and restricted (operating room) areas of the surgery suite should wear clean surgical attire,
- Must be laundered in a healthcare-accredited laundry in accordance with facility policy
- PPE in the OR includes:
  - Clean Hospital Issued Scrubs
  - Gowns (AAMI Level 4)
  - Sterile Gloves
  - Head Cover
  - Shoe Cover
    - Need process for shoes if they don't have shoe covers
  - Beard Cover
  - Jackets & Sleeves
    - Processes for items like cooling devices



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# PPE in the OR



**CMS**

Surgical attire (scrubs, surgical caps/hoods) covering all head and facial hair worn by all personnel and visitors in the semi-restricted and restricted areas

Wear a mask in OR when sterile field is opened (1B)

Fully cover hair on head and face (1B)

**CDC**

Laundering scrubs *unresolved*

Shoe covers- OSHA not SSI

Surgical gowns and drapes (1B) for the patient and scrubbed personnel should be used

**AORN**

Tie of masks tightly to mitigate the risk of transfer of organisms from the mouth or nose

When in the semi-restricted or restricted surgical areas, all personal clothing should be completely covered by the surgical attire.

Launder scrubs by an approved company or home laundering

All personnel should cover head and facial hair, including sideburns and the nape of the neck, when in the semi-restricted and restricted areas

A clean, low-lint surgical head cover or hood that confines all hair and covers scalp skin should be worn

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# Infection Prevention in the OR



**Environmental Cleaning**

- EPA registered hospital grade disinfectant
- Horizontal surfaces wiped before first case
- High touch surfaces cleaned between patient
- Terminal cleaning after last case and every 24 hours
- Anesthesia equipment (high touch, terminal and internal components)



**Air handling**

- Ventilation requirements
- Positive
- >15 ach (3 are outside air)
- 90% filtration
- Temperature and humidity
- Self closing doors
- Air vents clean



**Instrument Reprocessing**

- Spaulding Classification
- Reprocessing steps
- Automated equipment
- Process Monitoring

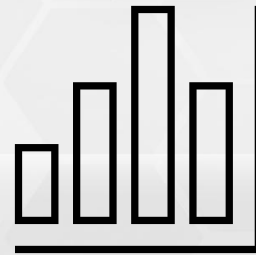
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## Infection Prevention in the OR



### Provide data for improvement opportunities:

- SSI
- Environmental data
- Instrument reprocessing
- Hand Hygiene
- PPE compliance
- Antimicrobial stewardship and prophylaxis
- Outcome metrics



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## Infection Prevention in the OR



### Great Resources

- Centers for Disease Control and Prevention Guideline for the Prevention of Surgical Site Infection
  - <http://jamanetwork.com/journals/jamasurgery/fullarticle/10.1001/jamasurg.2017.0904>
- Guideline for the Prevention of Surgical Site Infection (1999)
  - <https://stacks.cdc.gov/view/cdc/7160>
- AORN
- AAMI ST 79- Sterilization
- AAMI ST 91- High Level Disinfection
- Wisconsin Division of Public Health
  - [DHS SSI Guidance](#)
- APIC
  - [APIC ImplementationPreventionGuide\\_Web\\_FIN03.pdf](#)

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# PPE Donning & Doffing



## Key Principles:

- Based route of transmission & nature of the patient interaction
- Used to protect the wearer from exposure
- The order of putting on (donning) PPE influences how PPE should be safely removed (doffed) to avoid contamination
- Hand hygiene should be performed prior to donning PPE
- Don PPE prior to contact with the patient (e.g., prior to entering the patient room)
- Doff PPE prior to exiting the patient care environment (except respirators)
  - Methodical doffing to minimize the risk of exposure to the healthcare worker
- After doffing immediately perform hand hygiene prior to moving on to other tasks

### SPECIAL PATHOGENS

#### NETEC.ORG

- IPC learning journey course
- PPE 101/102



#### UNMC HEROES



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# PPE Donning & Doffing Steps



## SEQUENCE FOR PUTTING ON PERSONAL PROTECTIVE EQUIPMENT (PPE)

The type of PPE used will vary based on the level of precautions required, such as standard and contact, droplet or airborne infection isolation precautions. The procedure for putting on and removing PPE should be tailored to the specific type of PPE.

### 1. GOWN

- Fully cover torso from neck to knees, arms to end of wrists, and wrap around the back
- Fasten in back of neck and waist



### 2. MASK OR RESPIRATOR

- Secure ties or elastic bands at middle of head and neck
- Fit flexible band to nose bridge
- Fit snug to face and below chin
- Fit-check respirator



### 3. GOGGLES OR FACE SHIELD

- Place over face and eyes and adjust to fit



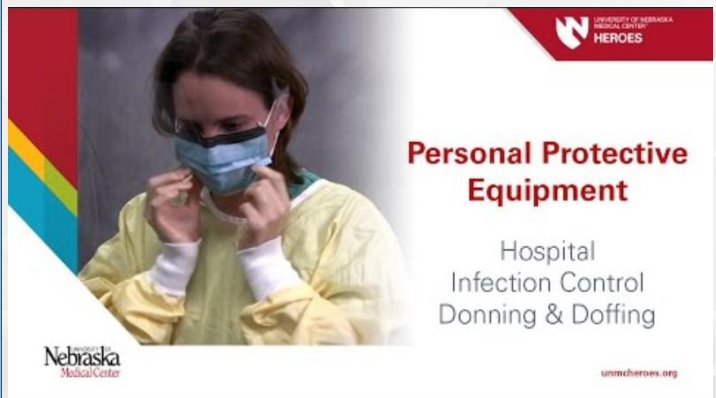
### 4. GLOVES

- Extend to cover wrist of isolation gown



## USE SAFE WORK PRACTICES TO PROTECT YOURSELF AND LIMIT THE SPREAD OF CONTAMINATION

- Keep hands away from face
- Limit surfaces touched
- Change gloves when torn or heavily contaminated
- Perform hand hygiene



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# PPE Donning & Doffing Steps



## HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE) EXAMPLE 1

There are a variety of ways to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. Here is one example. Remove all PPE before exiting the patient room except a respirator, if worn. Remove the respirator after leaving the patient room and closing the door. Remove PPE in the following sequence:

### 1. GLOVES

- Outside of gloves are contaminated!
- If your hands get contaminated during glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Using a gloved hand, grasp the palm area of the other gloved hand and peel off first glove
- Hold removed glove in gloved hand
- Slide fingers of ungloved hand under remaining glove at wrist and peel off second glove over first glove
- Discard gloves in a waste container



### 2. GOGGLES OR FACE SHIELD

- Outside of goggles or face shield are contaminated!
- If your hands get contaminated during goggles or face shield removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Remove goggles or face shield from the back by lifting head band or ear pieces
- If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container



### 3. GOWN

- Gown front and sleeves are contaminated!
- If your hands get contaminated during gown removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Unfasten gown ties, taking care that sleeves don't contact your body when reaching for ties
- Pull gown away from neck and shoulders, touching inside of gown only
- Turn gown inside out
- Fold or roll into a bundle and discard in a waste container



### 4. MASK OR RESPIRATOR

- Front of mask/respirator is contaminated — DO NOT TOUCH!
- If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front
- Discard in a waste container



### 5. WASH HANDS OR USE AN ALCOHOL-BASED HAND SANITIZER IMMEDIATELY AFTER REMOVING ALL PPE



PERFORM HAND HYGIENE BETWEEN STEPS IF HANDS BECOME CONTAMINATED AND IMMEDIATELY AFTER REMOVING ALL PPE

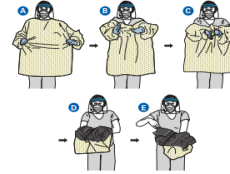


## HOW TO SAFELY REMOVE PERSONAL PROTECTIVE EQUIPMENT (PPE) EXAMPLE 2

Here is another way to safely remove PPE without contaminating your clothing, skin, or mucous membranes with potentially infectious materials. Remove all PPE before exiting the patient room except a respirator, if worn. Remove the respirator after leaving the patient room and closing the door. Remove PPE in the following sequence:

### 1. GOWN AND GLOVES

- Gown front and sleeves and the outside of gloves are contaminated!
- If your hands get contaminated during gown or glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp the gown in the front and pull away from your body so that the ties break, touching outside of gown only with gloved hands
- While removing the gown, fold or roll the gown inside-out into a bundle
- As you are removing the gown, peel off your gloves at the same time, only touching the inside of the gloves and gown with your bare hands. Place the gown and gloves into a waste container



### 2. GOGGLES OR FACE SHIELD

- Outside of goggles or face shield are contaminated!
- If your hands get contaminated during goggles or face shield removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Remove goggles or face shield from the back by lifting head band and without touching the front of the goggles or face shield
- If the item is reusable, place in designated receptacle for reprocessing. Otherwise, discard in a waste container



### 3. MASK OR RESPIRATOR

- Front of mask/respirator is contaminated — DO NOT TOUCH!
- If your hands get contaminated during mask/respirator removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Grasp bottom ties or elastics of the mask/respirator, then the ones at the top, and remove without touching the front
- Discard in a waste container



### 4. WASH HANDS OR USE AN ALCOHOL-BASED HAND SANITIZER IMMEDIATELY AFTER REMOVING ALL PPE



PERFORM HAND HYGIENE BETWEEN STEPS IF HANDS BECOME CONTAMINATED AND IMMEDIATELY AFTER REMOVING ALL PPE



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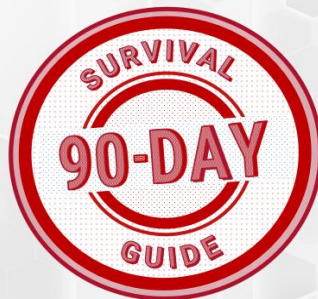
# Updates



## 90-Day Survival Guide is LIVE

### Next Webinar:

- Critical Device and Endoscope Reprocessing
- July 17<sup>th</sup> from 12-1CST
  - 30 minutes of post webinar office hours



The Infection Preventionist's Orientation Workbook  
Essential Instructions for the Survival Guide



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