

Massachusetts General Hospital Infection Control: *Do's* and *Don'ts*

Aspect	Do	Don't
Gowns and Gloves	<p><i>Do</i> tie precaution gowns at both neck and waist</p> <ul style="list-style-type: none"> • Ensure that gown provides full coverage of clothing, front and back • Ensure that gloves are pulled over cuff of gown 	<p><i>Don't</i> wear PPE outside the patient room e.g. in clean areas, nurse's station, supply room, hallway etc.</p>
Hand Hygiene	<p><i>Do</i> perform hand hygiene <u>before</u> and <u>after</u> contact with patient and patient environment</p> <p><i>Do</i> perform hand hygiene <u>before</u> and <u>after</u> glove use</p>	<p><i>Don't</i> use gloves as a substitute for hand hygiene</p> <p><i>Don't</i> touch beeper, cell phone, charts, any clean surfaces with unclean or gloved hands</p>
Fingernails	<p><i>Do</i> keep fingernails clean and short (no longer than ¼ in)</p> <p>If nail polish is worn, clear polish is preferred</p>	<p><i>Don't</i> wear artificial nails, gel nails or nail jewelry.</p> <p><i>Don't</i> wear nail polish that is chipped, cracked or scratched</p>
Standard Precautions (for all patients)	<p><i>Do</i> wear personal protective equipment (PPE = gloves, gowns, masks, goggles, face shields) based on risk of exposure</p> <ul style="list-style-type: none"> • Gowns if potential for splash of blood/body fluids • Face protection if potential for splash to face • Clean, non-sterile gloves when touching blood, body fluids, secretions, excretions, mucous membranes, broken skin and contaminated medical equipment <p><i>Do</i> remove PPE when task is complete and perform hand hygiene</p>	<p><i>Don't</i> touch clean items with gloved hands</p> <p><i>Don't</i> wear PPE outside the patient room (e.g. in clean areas, nurses' station, supply room, hallway etc.)</p> <p><i>Don't</i> wear masks around neck or on your head</p> <p><i>Don't</i> share reusable patient equipment without cleaning and disinfecting with hospital-approved disinfectant (e.g. Virex or Super Sani-Cloth)</p>
Transmission-based Precautions (for patients with specific diseases or organisms)	<p><i>Do</i> use Contact Precautions for: MRSA, VRE, MDROs</p> <p><i>Do</i> use Contact Precautions PLUS for C.-diff., norovirus:</p> <ul style="list-style-type: none"> • Wash hands with soap and water first, than disinfect with Cal Stat. after contact with patient • Ensure room and equipment are cleaned daily with bleach-based disinfectant (Dispatch or bleach wipes) <p><i>Do</i> Use Airborne or Droplet Precautions per IC Policy, for specifics;</p> <ul style="list-style-type: none"> • Call Infection Control Practitioner with questions 	<p><i>Don't</i> wear PPE outside the patient room e.g. in clean areas, nurses' station, supply room, hallway etc.</p> <p><i>Don't</i> wear masks around neck or on your head</p> <p><i>Don't</i> use an N-95 respirator unless you have been fit-tested and know your correct size</p>
Handoffs	<p><i>Do</i> communicate precaution status to receiving test/procedure area: by phone, by documenting in the chart, completing the "sticker to ride" and labeling the outside of the chart</p>	<p><i>Don't</i> send patient without informing the receiving area of patient's precaution status</p>
Isolation Precaution Patient Transport	<p><i>Do</i> have patients who are on Airborne or Droplet Precaution wear a <u>surgical mask</u> (NOT an N- 95 respirator)</p> <p><i>Do</i> have patient transport ready! e.g. clean dressings, drainage contained, clean pajamas/robe</p>	<p><i>Don't</i> wear PPE when transporting patients unless you are part of the team providing direct care during transport – there must be a clean team member (not wearing PPE) to open doors/elevators etc.</p>

Patient/family education	<p><i>Do</i> teach patient and family about infections and prevention strategies</p> <p><i>Do</i> use the IC website for patient information re: preventing infections in the hospital, MRSA, VRE, <i>C diff</i>, central line and surgical wound infections as well as the TV channel 31 and Hand Hygiene video</p>	<p><i>Don't</i> forget to document teaching and patient understanding in the medical record</p>
Clean/sterile/supply storage	<p><i>Do</i> handle supplies with only clean, ungloved hands</p> <p><i>Do</i> store supplies in clean supply room, closed bins, covered carts or cabinets</p> <p><i>Do</i> check for expired supplies</p>	<p><i>Don't</i> store supplies on window sills, under sinks, within 3 feet of sink, or on the floor</p> <p><i>Don't</i> allow external cardboard shipping boxes in clean areas (clean supply rooms, exam rooms etc.)</p>
Equipment cleaning	<p><i>Do</i> clean and disinfect patient care equipment with a hospital-approved disinfectant after each use (e.g. <i>Virex</i> or <i>Super Sani-Cloth</i>)</p>	<p><i>Don't</i> take equipment (e.g. <i>glucometers, stethoscope, BP cuff</i>) from one patient to the next without cleaning & disinfecting</p>
Utility rooms	<p><i>Do</i> keep doors closed at all times</p> <p><i>Do</i> keep clean and organized</p> <p><i>Do</i> ensure red biohazard container is covered</p>	<p><i>Don't</i> mix storage (<i>clean and dirty items</i>)</p> <p><i>Don't</i> have external shipping boxes in clean supply/utility rooms</p>
Labeling of open solutions	<p><i>Do</i> date sterile water and sterile saline when opened</p>	<p><i>Don't</i> use open sterile water and saline more than 24 hours after opening</p>
Multi-dose vials	<p><i>Do</i> date multi-dose vials; when cap removed or vial punctured, write the last date that the product is to be used but not to exceed 28 days</p> <p><i>Do</i> dedicate multi-dose vials to a single patient whenever possible. If a multi-dose vial enters the immediate patient treatment area, <i>do</i> dedicate to that patient only and discarded after use</p>	<p><i>Don't</i> use medication vial as multi-dose UNLESS vial is labeled as such by the manufacturer</p> <p><i>Don't</i> enter a multi-dose vial more than once UNLESS a new syringe/needle is used</p>
Nourishment refrigerators	<p><i>Do</i> label patient-specific food with name and date; discard after 3 days.</p> <p><i>Do</i> mark juice, whole milk, and skim milk with expiration date when opened; discard within 7 days after opening</p> <p><i>Do</i> discard outdated nourishments</p> <p>Check temps daily; call B & G if out of range and note on log</p>	<p><i>Don't</i> store staff food in patient food refrigerator</p>
Food and drink	<p><i>Do</i> limit food and drink* to staff lounges, conference rooms and private offices in patient care areas</p> <p>* drinks may be allowed in some limited areas where there is no risk of contamination as determined by local leadership</p>	<p><i>Don't</i> eat or drink in patient care areas or areas e.g. nurses station, chart racks, or where there is potential exposure to blood or body fluids <i>i.e. where specimens are aggregated.</i></p> <p>Food/drinks should never share surfaces with clean/sterile supplies or medications</p>
Occupational Health (OHS) 6-2217	<p><i>Do</i> wash hands with soap and water before eating or drinking</p> <p><i>Do</i> leave work if you become ill with a communicable illness</p> <p><i>Do</i> notify OHS if you develop symptoms of a communicable illness (e.g. <i>rash, diarrhea, prolonged cough, sore throat, conjunctivitis</i>).</p> <p><i>Do</i> report exposure to communicable diseases or blood/body fluid exposure to OHS</p>	<p><i>Don't</i> work sick with nausea, vomiting, diarrhea, influenza-like illness, strep throat or other communicable disease or if you have symptoms of or have been exposed to a communicable disease . When in doubt call OHS- 726-2217</p>