

Title: SURGICAL ATTIRE

Scope:

This policy applies to all persons entering the semi-restricted or restricted perioperative and procedural areas at all MultiCare Health System (MHS) facilities.

This scope applies to all inpatient areas at MultiCare Health System. It includes Tacoma General, Mary Bridge, Allenmore, Good Samaritan, Auburn Medical Center, Covington Medical Center and Valley Hospital.

Policy Statement:

- A. This policy establishes the guidelines for attire worn within the semi-restricted and restricted perioperative and procedural areas of MultiCare Health System, for the purposes of promoting high-level cleanliness and hygiene, and preventing contamination that may pass from personnel to patient and vice-versa.
- B. All personnel entering the semi-restricted and restricted areas of the surgical suite, as defined in "Traffic Patterns in the Surgical Suite", should be in surgical attire intended for use only within the surgical suite or procedure unit.
 - 1. Restricted areas are defined as:
 - a. Operating Rooms, includes Tacoma General, Allenmore, Mary Bridge Children's, Good Samaritan, Auburn, Covington ASC, Gig Harbor ASC and Baker ASC.
 - b. Birth Center (operating and sub-sterile areas)
 - c. Cardiac Catheterization Lab
 - 2. Semi-restricted areas are defined as:
 - a. Central Service/Sterile Processing (Tacoma General, Mary Bridge Children's, Allenmore, Good Samaritan, Auburn, Covington, Gig Harbor and Baker ASC's)
 - b. MHS Pharmacy Clean Room Operations/IV Admixture
 - c. GI/Special Procedure units if they are built within a perioperative area that require staff to pass through a semi-restricted corridor to access Interventional Radiology
- C. Staff members required to change into scrubs or surgical attire will be paid for changing time.

I. Procedure:

- A. Every staff member of MultiCare has the responsibility to comply with this policy. Managers and/or supervisors shall make on the spot corrections when violations of this policy are observed.
- B. The MultiCare or contract laundry service will launder MultiCare-purchased scrub attire.
- C. MultiCare scrubs will be available to those locations noted above in the Policy Statement.
- D. Staff working in areas not designated restricted or semi-restricted are not authorized to obtain or wear MultiCare surgical scrub suits or warm-up coats.
- E. All staff are responsible for prudent scrub use and return to MultiCare. Scrubs are not intended for home or personal use. Possession of scrubs off MultiCare property is considered theft and will lead to progressive discipline up to and including termination (Human Resources Policy: Progressive Guidance).
- F. Personnel entering restricted or semi-restricted areas are required to wear clean scrubs/surgical attire for use only within those areas. If surgical attire is worn into the institution from outside, the attire must be changed prior to entering restricted surgical areas to minimize the potential for contamination.
- G. For personnel entering the area for only brief periods (e.g. ED staff transporting a critical patient into the OR or Cardiac Cath lab, workers who are coming in to assess or repair a problem) the following is acceptable:
 - 1. TG: staff may don a clean gown or jumpsuit at the door, due to the distance from the locker rooms to the ORs.
 - 2. MGSB: staff must don either a jumpsuit or scrubs before entry into the surgical areas. OB surgical area does not have jumpsuits available so scrubs are required for all entry. A clean gown with long sleeves and below the knee length may be used in the Cardiac and Interventional Radiology areas.
 - 3. AH, AMC and all 3 ASC's: staff must don either a jumpsuit or scrubs before entry.
- H. All scrubs will be placed in designated laundry bags for laundering at the end of the work shift.
- I. Any clothing (whether purchased by MultiCare or not) soiled during work performance with blood or other potentially infectious materials is authorized to be laundered by the MultiCare Laundry (per Bloodborne Pathogens Exposure Control Plan, Appendix E.)
- J. Alternate uniforms are not intended for use as scrub clothing to enter

the restricted areas.

II. The following applies to all staff wearing scrubs or other surgical attire:

- A. Scrub clothes will be laundered between wearing.
- B. Scrub clothes will be changed whenever visibly soiled or wet; when surgical staff moves between surgical facilities and at the end of day.
- C. Staff will wear scrub attire that consists of pants, shirt and long-sleeved warm-up jackets. The warm-up scrub jacket is required to be worn, ensuring forearms are covered, when opening the sterile field, when performing the pre-operative skin prep, and while assembling and packaging items for sterilization. The scrub jacket is not required to be worn when not performing the skin prep or opening sterile items to the sterile field or for personnel remaining outside of the surgical sterile field. When the scrub jacket is worn in restricted areas of the unit, it must always be snapped closed, in order to avoid contamination of the sterile field by the jacket.
- D. Surgical attire design and composition should minimize bacterial shedding. Staff may wear O.R. approved clean surgical gowns as warm-up attire if not performing the above mentioned tasks. Street clothes will not be visible when worn under scrubs. A crew-neck t-shirt may be worn under the scrub top and visible at the scrub top neckline, in order to provide warmth or to contain chest hair. Scrub techs may only wear short-sleeve t-shirts in order to perform a proper surgical scrub of hands and arms. Long-sleeve t-shirts may be worn by non-scrubbed personnel, but the sleeves must be covered by a scrub jacket or hospital-laundered lab coat.
- E. Hospital laundered lab coats may be worn in the restricted and semi-restricted areas of the department, in place of the scrub jacket. Like the scrub clothes, the lab coats will be laundered daily between wearings.
- F. Personnel in scrub attire may walk outside between buildings on the same facility campus without needing to change scrub attire prior to re-entering the restricted and semi-restricted areas. Personnel who travel between campuses via car or shuttle, must change their scrub attire prior to re-entering the restricted and semi-restricted areas.
- G. Shoe covers are considered personal protective equipment (PPE) and are optional for the protection of the wearers shoes:
 - 1. Shoe covers/protective leg covers, aprons, etc. may be used when blood or body fluid contamination is expected
 - 2. If shoe covers are worn they should be changed whenever they become torn, wet or soiled.

3. Shoe covers must be removed before leaving the procedural area. They are considered PPE and are not to be worn outside of the procedural area, Pre-op or PACU. Hand hygiene must be performed after removing shoe covers.
 4. Shoes worn in the restricted and semi-restricted areas must be clean and must have enclosed toes and provide protection from liquid spills. Shoes are not required to be "dedicated" O.R. shoes.
- H. All head and facial hair, including sideburns and neckline, will be covered when in the semi-restricted and restricted areas of the surgical environment
1. The surgical hat or hood should be clean, free of lint, and must confine all hair.
 2. The surgical hat or hood design and composition should minimize microbial dispersal.
 3. Home laundered cloth surgical hats may be worn, with the following restrictions:
 - a. Hats must be changed daily.
 - b. Must be covered with a disposable hair cover, upon entering the semi-restricted area of the unit. Facial hair must be fully covered by a surgical hood and mask when in the restricted areas of the department.
 4. While wearing scrub attire, the surgical hat should not be removed when leaving the perioperative or procedural department, crossing the red or black line that defines the restricted area.
The purpose of the head covering is to contain hair and minimize microbial dispersal that may be shed onto scrub attire.
- I. Surgical masks will be worn in restricted areas where open sterile supplies or scrubbed persons may be located
1. Masks should cover both mouth and nose and be secured in a manner that prevents venting
 2. A fresh surgical mask should be donned before the individual participates in each new procedure. The mask should be discarded and replaced whenever it becomes wet or soiled. Hand hygiene should be performed each time a mask is removed and discarded.
 - a. Surgical masks should not be worn hanging around the neck. At the end of a procedure or completion of a task within the restricted area, the mask should be removed and discarded. An exception to this is when the RN or MD is leaving the restricted area for a short conversation with a patient or family member and immediately returning to the OR or procedure room. They are allowed to take down their mask to speak with the patient or family member and then don the mask again to re-enter the O.R.

or procedure room.

- J. Scrubbed personnel must remove rings, bracelets and watches and confine all other jewelry within scrub attire, i.e.: necklaces, and earrings. The scrub hat must completely cover the ears of the scrub tech or surgeon if they are wearing earrings.
- K. Nails should be maintained in good repair at a length that allows proper cleaning during hand wash or scrub:
 - 1. Un-chipped nail polish is allowed that is fresher than four days. This is monitored by one's surgical conscience and lack of surgical infection.
 - 2. No artificial nails are allowed
- L. Identification badges should be worn secured on the scrub attire top or long-sleeved jacket and should be visible (for non-scrubbed personnel). Lanyards should not be worn hanging freely from the neck, in the OR, due to risk of contamination of the sterile field.
- M. Stethoscopes should not be worn around the neck and should be cleaned with a low-level disinfectant before and after each use.
- N. In compliance with Standard Precautions, protective barriers should be utilized to reduce the risk of exposure to potentially infective materials. Scrubs are not a barrier and are not considered personal protective equipment
 - 1. Gloves
 - a. Select gloves according to the task to be performed
 - b. Wear sterile gloves when performing sterile procedures
 - c. Wear non-sterile gloves for other tasks
 - d. Change gloves between patient contacts or after contact with contaminated items when the task is completed
 - e. Wash or gel hands before donning and after removing gloves
 - 2. Protective eyewear or face shields will be worn during all surgical procedures
 - a. Exceptions: Microscopic ophthalmologic procedure (i.e. cataracts and vitrectomies) which require scrub to follow procedure with aid of microscope; procedures where no spraying or splashing of body fluids is likely to occur. Procedures that require the use of a surgical loupe by the provider.
 - b. Acceptable protective eyewear includes disposable mask/shield combinations, reusable goggles or personal prescription glasses with side shields
 - c. Decontaminate reusable protective eyewear as promptly as

	<p>possible after use</p> <p>d. Discard disposable face shields after use</p> <p>3. Additional protective attire will be worn, such as fluid resistant aprons, gowns and shoe covers, when contact with blood or body fluids is potentially unavoidable (e.g. certain emergency situations, care of trauma patients, or other patients experiencing large blood losses, or when large volumes of irrigation are used)</p> <p>O. Briefcases, backpacks, and other personal items that are taken into the restricted or semi-restricted areas should be cleaned with a low-level disinfectant and should not be placed on the floor. This is monitored by one's surgical conscience as well as direct observation by team members, as these items enter the semi-restricted areas.</p> <p>P. Cell phones, tablets and other personal communication or hand-held electronic equipment should be cleaned with a low-level disinfectant according to the manufacturer's instructions for use, before and after being brought into the perioperative or procedural setting. This is monitored by one's surgical conscience and lack of surgical site infection.</p> <p>III. Definitions:</p> <p>Scrubs: Surgical suit, consisting of pants, top and warm-up jacket and/or surgical gown/cover coat, intended for use within restricted or semi-restricted areas of the hospital environment. These suits are purchased, maintained and laundered by MultiCare.</p> <p>Personal Protective Clothing: Special clothing and equipment worn to protect the individual and/or clothing from exposure to body fluids. This may include caps, impervious gowns, shoe covers, booties, face shields, gloves and goggles. The normal "uniform" worn for work and scrubs are not considered personal protective clothing.</p> <p>Alternate Uniforms: Distinctive clothing worn by specific non-operative departments or services, not provided by MultiCare</p>
	<p>References:</p> <p>AORN Perioperative Standards and Recommended Practices, current edition</p>
	<p>Related Policies:</p> <p>MHS P&P: "<i>Bloodborne Pathogens Exposure Control Plan</i>", "<i>Dress Code</i>", "<i>Progressive Guidance</i>", "<i>Personal Radiation protection Devices, Use of</i>"</p>
	<p>Points of Contact:</p> <p>MHS Nursing Director, Surgical Services: 253-403-4744;</p> <p>MGSB Director, Perioperative Services: 253-697-2239;</p> <p>Director, Infection Prevention and Control: 253-403-1108</p>
<p>Approval By: AMC Surgery Committee</p>	<p>Date of Approval: 9/15</p>

AMC WNS Committee	9/15
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MGSB Surgery Committee	9/15
MGSB WNS Committee	9/15
MGSB Anesthesia Committee	9/15
MGSB Medical Executive Committee	11/15
Tacoma Surgical Services Committee	9/15
Tacoma Anesthesia Committee	12/15
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West Pierce Medical Staff Operations Committee	12/15
Diagnostic and Procedure Committee	11/15
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<i>VH OR Director</i>	6/19
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This policy replaces MHS P&P "*Scrub Attire Management of and Changing Time*"

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