



Rancho Los Amigos National Rehabilitation Center

DEPARTMENT OF NURSING

OPERATING ROOM

POLICY AND PROCEDURE

SUBJECT: SURGICAL HAND SCRUB

Policy No.: OR92
Supersedes: ALL
Reviewed Date: 01/16
Page: 1 of 2

Policy Statement: The surgical hand scrub procedure will be standardized for the surgical team.

Purpose of Procedure: To mechanically and chemically reduce microbial flora on the skin of hands and forearms of the surgical scrub team by:

1. Removing soil and transient microbes from hands and forearms.
2. Reducing resident microbial count to as low a level as possible.
3. Inhibiting rapid rebound growth of microbes.

Performed By: All participating members of the surgical scrub team.

Equipment: Antiseptic hand prep, disposable iodophor detergent scrub brush-sponge with nail cleaner and disposable 4% chlorhexidine gluconate with 4% isopropyl alcohol (Hibiclens) brush-sponge.

Procedural Steps:

1. Remove all jewelry from the hands and forearms.
KEY POINT: Jewelry, including watches is a reservoir for bacteria.
2. Check cuticles. Cuticles must be in good condition.
KEY POINT: Resident micro flora may be found below the surface of the skin.
3. Examine hands and forearms for good skin integrity. If lesions or breaks in skin present, notify charge nurse immediately.
KEY POINT: Open lesions and breaks in skin may harbor bacteria. Skin lesions present potential danger for contamination of the surgical wound.
4. Prior to scrubbing make sure of the following by looking into mirror over scrub sink:
KEY POINT: One cannot touch unsterile areas after scrubbing.
 - a. Adjust cap for comfort. Ascertain all hair, including facial hair, is covered.
KEY POINT: Hair of the surgical team can be the source of bacteria causing wound infections, therefore, should be completely confined. .
 - b. Adjust mask for comfort. Ascertain mask is not venting on sides.
KEY POINT: Face masks decrease dispersal by filtration and alter the direction of dispersal from the upper respiratory tract during talking, coughing and breathing.
5. Apply to clean, dry hands and nails. Cup hand and hold 1-2 inches from nozzle of surgical antiseptic hand prep. Depress foot pump completely to dispense each pump (2ml) of antiseptic hand prep.
KEY POINT: For the first use of each day, clean under nails with a nail stick.

Pump 1: Dispense one pump (2ml) of antiseptic hand prep into the palm of one hand. Dip the fingertips of the opposite hand into the hand prep and work it under the nails. Spread the remaining antiseptic hand prep evenly over the hand and up to just above the elbow covering all surfaces.

Pump 2: Using another 2 ml of antiseptic hand prep, repeat above procedure with the other hand.

Pump 3: Dispense another 2 ml of antiseptic hand prep into either hand and reapply to all aspects of both hands up to the wrist. Allow to dry before donning gloves.

KEY POINT: To facilitate drying, continue rubbing hand prep into hands until dry.

7. Surgical hand scrub should be used for the first scrub of the day or any time there is visible bioburden (i.e. dirt, oil or debris) If unable to use antiseptic hand prep use the following method with surgical brushes. Clean nails and subungual areas with nail cleaner provided in brush package. After use, dispose nail cleaner in appropriate receptacle provided.
8. Utilize counted stroke method as follows:
 - a. Nails-40 strokes
 - b. Finger, each side 10 strokes
 - c. Palmar surface of hand-10 strokes
 - d. Dorsal surface of hand-10 strokes
 - e. Divide forearm into thirds up to elbow. Encircle arm employing 40 strokes

KEY POINT:- Friction of brush against skin actually does the cleaning.
- Studies show that surgical scrubs reduce indigenous skin micro flora.

9. Holding sponge in right hand, start scrubbing using a circular motion beginning with small finger, scrub palmer surface and between fingers, proceed to ring finger, repeating the same procedure. Proceed to dorsum of thumb and dorsal surface of each finger.
10. Keep hands raised above the level of elbow.
KEY POINT: This allows the water and the detergent to flow away from scrubbed and clean area.
11. Discard brush in appropriate receptacle provided.
12. Rinse both arms and hands under the running water.
KEY POINT: Water must flow from scrubbed area and clean area off elbows to prevent contamination of previously scrubbed areas. Keep arms and elbows in front of body with elbows slightly flexed.
13. Proceed into the Operating Room by backing through the door. Keep hands raised above the level of elbow.
KEY POINT: Avoid contamination of hands and arms as you move from scrub sink into Operating Room.

Reviewed by: Susie Choi, BSN, CNOR

References:

Guidelines for Perioperative Practice 2015 Edition
Essentials of Perioperative Nursing, Fifth Edition

06/06 – Revised
08/09 – Revised
10/12 – Revised
01/12 - Reviewed

OR92