

FACTSHEET 3: Use of personal protective equipment

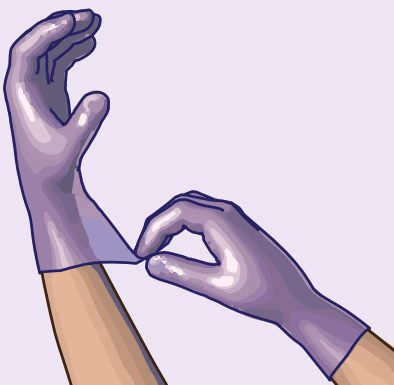
Personal protective equipment is used to protect staff and reduce opportunities for cross-transmission of micro-organisms. Selection should be based on an assessment of the risk of transmission of micro-organisms to the patient or carer, risk of contamination of health professionals' clothing and skin by patients' blood or body fluids, and the suitability of the equipment for the proposed use.

Gloves

Gloves must be:

- Worn when exposure to blood and/or other body fluids is likely/anticipated;
- Changed immediately after each patient and/or completion of a procedure or task;
- Changed if a perforation or puncture is suspected;
- Appropriate for use, fit for purpose and well-fitting.

Double-gloving is recommended during some exposure-prone procedures such as orthopaedic and gynaecological surgery or when attending major trauma incidents. Overuse of gloves is a concern in healthcare, gloves are not a substitute for appropriate hand hygiene practices.



Gowns and coveralls

Full-body gowns or fluid-repellent coveralls must be:

- Worn when there is a risk of extensive splashing of blood and/or other body fluids, e.g. in surgery;
- Changed between patients and/or after completion of a procedure or task.

Face protection

Eye/face protection (including full-face visors) must:

- Be worn when blood and/or other body fluid contamination to the eyes/face is anticipated/likely, e.g. by members of the surgical theatre team (regular corrective spectacles are not considered eye protection);
- Not be impeded by accessories such as piercing/false eyelashes.

They should be removed/changed:

- At the end of a procedure/task;
- If the integrity of the mask is breached, e.g. from moisture build-up after extended use or from gross contamination with blood or body fluids;
- In accordance with specific manufacturers' instructions.

Headwear

Headwear must be:

- Worn in theatre settings/clean rooms;
- Well-fitting and completely cover the hair;
- Changed/disposed of between clinical procedures/tasks or if contaminated with blood and/or body fluids.



Aprons

Aprons must be:

- Worn to protect uniform or clothes when contamination is likely/anticipated, e.g. direct care contact with a patient;
- Changed between patients and/or after completion of a procedure or task.

Footwear

Footwear must be:

- Non-slip, clean and well-maintained, and support and cover the entire foot to avoid contamination with blood or other body fluids or potential injury from sharps;
- Removed before leaving a care area where dedicated footwear is used, e.g. theatre.