Personal Protective Equipment

Why Is Personal Protective Equipment So Important?

Standard precautions are based on the principle that all blood, body fluids, secretions, excretions (except sweat), non-intact skin, and mucous membranes may contain transmissible infectious agents. Standard precautions apply to all patients in any setting. The Centers for Disease Control and Prevention (CDC) have issued several guidelines to protect patients and examiners from the spread of infectious disease. All clinicians examining patients are advised to study and observe these precautions at the CDC websites.

Remember: Proper Hand Hygiene

Perform hand hygiene before touching a patient, performing an aseptic procedure, or using gloves.

Perform hand hygiene after touching a patient or patient surroundings, exposure to body fluid, or using gloves.

Hand Washing
- Use soap and water.
- Wash hands, covering all surfaces.
- Wash hands for at least 20 seconds.
- Rinse hands with water.
- Use disposable towels to dry hands and to turn off the faucet.

Hand Rubbing
- Use an alcohol-based hand sanitizer.
- Rub hands together, covering all surfaces.
- Rub hands for a duration of 20-30 seconds until hands feel dry.


Gloves
- Gloves are not a substitute for hand hygiene.
- Change gloves and perform hand hygiene if gloves become damaged or soiled.
- Never wear the same pair of gloves when moving between different patients.
- Never wash or reuse disposable gloves.


Masks & Protective Eyewear
- Goggles should fit snugly over and around the eyes.
- Personal glasses are not considered adequate eye protection.
- Face shields should cover the forehead and wrap around the side of the face.
- Do not touch the front of the shield or goggles.

Masks & Protective Eyewear, from Lynn P: Taylor’s Clinical Nursing Skills, 2nd ed. Lippincott Williams & Wilkins, 2006, Skill 4-7, Figs. 3 & 4.

Figure Credits


Masks & Protective Eyewear, from Lynn P: Taylor’s Clinical Nursing Skills, 2nd ed. Lippincott Williams & Wilkins, 2006, Skill 4-7, Figs. 3 & 4.