



SNS COLLEGE OF NURSING
Saravanam Patti (po), Coimbatore.



DEPARTMENT OF NURSING

COURSE NAME : B.Sc. (Nursing) II Year.

SUBJECT : MEDICAL SURGICAL NURSING I


UNIT : IX-IMMUNOLOGICAL DISORDERS

TOPIC : STANDARD PRECAUTIONS



INTRODUCTION

- Standard precautions are meant to reduce the risk of transmission of blood borne and other pathogens from both recognized and unrecognized sources.
- They are the basic level of infection control precautions which are to be used, as a minimum, in the care of all patients.

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- A decorative graphic consisting of several overlapping, wavy bands of color. The colors transition from a vibrant magenta on the left to a bright cyan on the right, with a dark blue band in the middle.
- Standard safety precautions are the basic infection prevention and control measures necessary to reduce the risk of transmission of infectious agent from both unrecognized and unrecognized sources of infection.

What is Standard precautions ?

The tenets of Standard Precautions are that all patients are colonized or infected with microorganisms, whether or not there are signs or symptoms, and that a uniform level of should be used in the care of all patients.

The elements of Standard Precautions

The elements of Standard Precautions include:

- Hand hygiene.
- Use of gloves and other barriers (e.g., mask, eye protection, face shield, gown).
- Handling of patient care equipment and linen.
- Environmental control.
- Prevention of injury from sharps devices, and patient placement.
- Respiratory hygiene and cough etiquette

The elements of Standard Precautions



HAND HYGIENE

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HAND HYGIENE



HAND HYGIENE

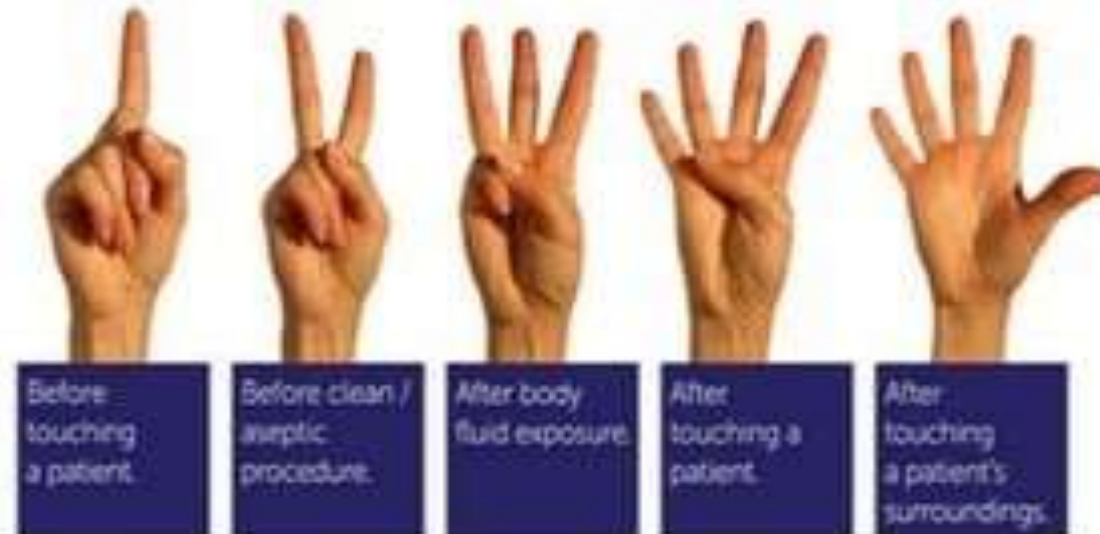
- Hand hygiene is a major elements of standard precautions and one of the most effective methods to prevent transmission of pathogens associated with health care.
- Hand hygiene is considered an important practice in reducing the transmission of infectious agents which cause HAIs.

HAND HYGIENE

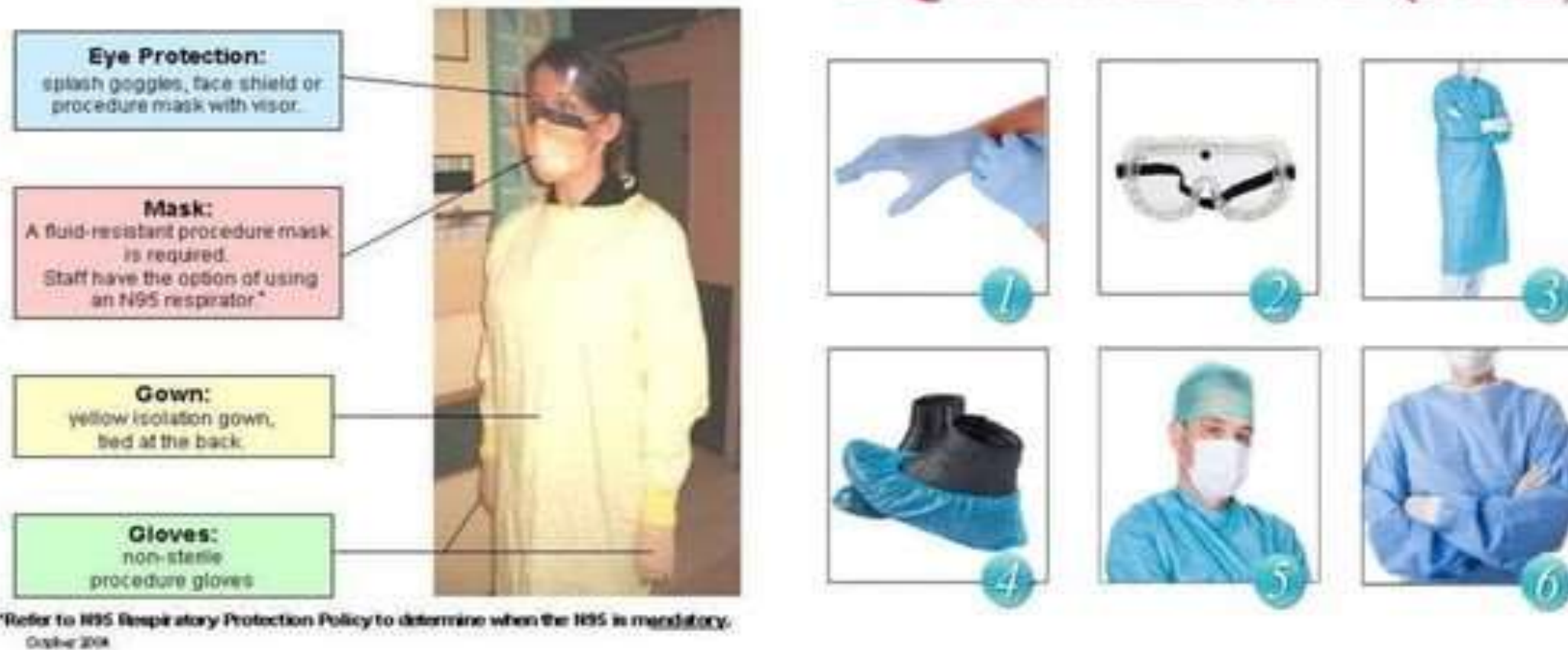
- When hands are visibly dirty or contaminated with biologic material from patient care, hands should be washed with soap and water.
- In intensive care units and other locations in which virulent or resistant organisms are likely to be present, antimicrobial agents (eg, chlorhexidine gluconate, iodophors, chloroxylenol, triclosan) may be used.
- Effective hand washing requires at least 15 seconds of vigorous scrubbing with special attention to the area around nail beds and between fingers, where there is high bacterial burden.



5 Movements for Hand hygiene



PERSONAL PROTECTIVE EQUIPMENT'S (PPE)



Eye Protection:
splash goggles, face shield or procedure mask with visor.

Mask:
A fluid-resistant procedure mask is required. Staff have the option of using an N95 respirator*

Gown:
yellow isolation gown, tied at the back.

Gloves:
non-sterile procedure gloves

*Refer to N95 Respiratory Protection Policy to determine when the N95 is mandatory.
October 2018

1. Glove
2. Goggles
3. Gown
4. Shoe cover
5. Mask
6. Cap

GLOVES



A decorative banner with a wavy, flowing design in shades of purple, pink, and blue, positioned at the top of the slide.

GLOVES

- Gloves provide an effective barrier for hands from the microflora associated with patient care.
- Gloves should be worn when a health care worker has contact with any patient's secretions or excretions and must be discarded after each patient care contact.

GLOVES

Wear when touching blood, body fluids, secretions, excretions, mucous membranes, nonintact skin.

Change between tasks and procedures on the same patient after contact with potentially infectious material.

Remove after use, before touching non-contaminated items and surfaces, and before going to another patient.

Perform hand hygiene immediately after removal.

Gloves must be:

Worn when exposure to blood and/or other body fluids is anticipated/likely.

Changed immediately after each patient and/or following completion of a procedure or task.

Changed if a perforation or puncture is suspected; and

Appropriate for use, fit for purpose and well-fitting to avoid excessive sweating and interference with dexterity.

GOWNS AND APRONS



Ideally, personal protection will include a plastic apron falling which a cloth apron can be used.

GOWNS AND APRONS

- Wear an apron or gown to protect skin and prevent soiling of clothing during procedures and patient care activities that are likely to generate splashing or sprays of blood, body fluids, secretions or excretions, or cause soiling of clothing.
- Select a gown or apron (i.e., long or short sleeves) that is appropriate for the activity and the amount of fluid likely to be encountered. If an apron is used, staff should ensure they are “bare-below-the-elbows”.
- Remove the used gown as promptly as possible and roll it up carefully and discard appropriately.
- Perform hand hygiene immediately after removal.

FACIAL PROTECTION (EYES, NOSE, AND MOUTH)

- When the health care provider is involved in an activity in which body fluids may be sprayed or splashed, appropriate barriers must be used. If a splash to the face may occur, goggles and facemask are warranted.
- If the health care worker is handling material that may soil clothing or is involved in a procedure in which clothing may be splashed with biologic material, a cover gown should be worn.

FACIAL PROTECTION (EYES, NOSE, AND MOUTH)



Facial protection (eyes, nose, and mouth)

Gown

1. Wear a surgical or procedure mask and eye protection (eye visor, goggles) or
 2. a face shield to protect mucous membranes of the eyes, nose, and mouth during activities that are likely to generate splashes or sprays of blood, body fluids, secretions, and excretions.
1. Wear to protect skin and prevent soiling of clothing during activities that are likely to generate splashes or sprays of blood, body fluids, secretions, or excretions.
 2. Remove soiled gown as soon as possible, and perform hand hygiene.

Linens

- Linens Handle, transport, and process used linen in a manner which:
 - Prevents skin and mucous membrane exposures and contamination of clothing.
 - Avoids transfer of pathogens to other patients and or the environment.

Handling of patient care equipment and linen

- Handle equipment soiled with blood, body fluids, secretions, and excretions in a manner that prevents skin and mucous membrane exposures, contamination of clothing, and transfer of pathogens to other patients or the environment.
- Clean, disinfect, and reprocess reusable equipment appropriately before use with another patient.

WASTE DISPOSAL

- Ensure safe waste management.
- Treat waste contaminated with blood, body fluids, secretions and excretions as clinical waste, in accordance with local regulations.
- Human tissues and laboratory waste that is directly associated with specimen processing should also be treated as clinical waste.
- Discard single use items properly.



YELLOW BAGS	RED BAGS	BLUE BAGS	BLACK CARBOY
<p>Infectious waste, bandages, gauze, cotton or any other objects in contact with body fluids, human body parts, placenta etc.</p>	<p>Plastic waste such as catheters, injection syringes, tubings, iv bottles</p>	<p>All types of glass bottles and broken glass articles, outdated & discarded medicines</p>	<p>Needles without syringes, blades, sharps and all metal articles.</p>

ENVIRONMENTAL CONTROL

- Ensure that the health service has adequate procedures for the routine care, cleaning and disinfection of environmental surfaces, beds, bedrails, bedside equipment and other frequently touched surfaces, and that these procedures are being followed.
- Use adequate procedures for the routine cleaning and disinfection of environmental and other frequently touched surfaces.

Respiratory hygiene and cough etiquette

- Education of health workers, patients and visitors.
- Covering mouth and nose when coughing or sneezing.
- Hand hygiene after contact with respiratory secretions.
- Spatial separation of persons with acute febrile respiratory symptoms.

THANK YOU