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and Hospital
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Surgical Attire

COPY

Policy

PURPOSE

To provide personnel with specific requirements for appropriate surgical attire and personal protective equipment (PPE) worn in the perioperative area of Denver Health and Hospital Authority (DHHA) to meet the requirements of surgical asepsis and promote staff and patient safety.

SCOPE

All DHHA employees, physicians, students, contract employees and visitors are responsible for correct implementation of this policy.

DHHA perioperative staff is responsible for the education of visitors and others as to appropriate apparel in the perioperative care setting.

Unit managers shall be responsible for ensuring that:

- A. Appropriate personal protective equipment (PPE) is always available and accessible in appropriate sizes.
- B. All employees are properly trained in the appropriate use of PPE.
- C. Employees use appropriate PPE unless the employee temporarily and briefly declines when,

under extraordinary life-threatening circumstances, it is the employee's professional judgment that in the specific instance it would prevent/delay the delivery of health care or public safety services, or increase the hazard for the worker or co-workers.

- D. Appropriate action will be taken with non-compliant employees, i.e., education, counseling, disciplinary action.

DEFINITIONS

Perioperative Area: Includes OR, Pre-op, PACU, SICU, and the perioperative locker room, lounges, and managerial offices.

Restricted Area: Refers to the individual Operating Room suites and the attached sub-sterile ante-rooms where masks are additionally required.

Semi-Restricted Area: Refers to the hallways behind the red lines where scrubs and head coverings are required.

POLICY

Surgical attire shall meet Occupational Safety and Health Administration (OSHA) requirements and AORN "Perioperative Standards and Recommended Practices: Surgical Attire". In addition, surgical attire follows DHHA policies regarding [Standard Precautions](#) and [Isolation Transmission-Based Precautions](#).

PROCESS

A. Surgical Scrubs:

1. All individuals who enter the semi-restricted and restricted areas must wear freshly laundered surgical attire or disposable surgical attire provided by the facility and intended for use within semi-restricted and restricted areas.
 - a. Avoid contacting the floor or other contaminated surfaces when donning clean surgical attire. Tucking of shirt is recommended but not required.
2. Reusable surgical attire will be laundered at DHHA, which follows health care accredited laundry standards. Scrubs shall not be laundered at home.
3. Surgical scrubs must be changed if they become wet or soiled. A shower may be necessary prior to donning fresh surgical attire.
4. Soiled or contaminated surgical scrubs should be returned to the designated laundry container and laundered daily.
 - a. Laundry will be protected when being transported to and from the DHHA laundry and in storage.
 - b. Linen storage areas will be cleaned on a scheduled basis.
5. Surgical attire includes the head cover, masks, scrub suit, warm-up jacket, and shoes.
6. Cover apparel, such as a lab coat, cover gown or other appropriate clothing should

be worn when exiting Pavilion A or Pavilion L. The cover apparel should be long-sleeve and full-length (knee length). Upon donning, it should be completely fastened when exiting buildings to protect the integrity of the scrub suit. Covering scrub attire may eliminate the need for donning a freshly laundered scrub suit upon reentry to the surgical department and consequently decrease costs. The covering should be removed prior to entering restricted and semi-restricted areas.

7. Use of a hospital-laundered warm-up jacket is an appropriate and recommended covering when leaving the surgical department, not the building.
8. In PreOP and the Post Anesthesia Care Unit (PACU), Non-linting fabrics, such as long-sleeve t-shirts, may be worn under surgical scrub attire. These non-linting fabrics should be home-laundered daily.
 - a. Personal clothing contaminated with blood, body fluids, or other potentially infectious materials must remain at the health care facility for laundering.
9. All personal clothing, such as T-shirts, that can be completely contained underneath the scrub top may be worn.
10. Surgical scrubs are laundered in facility and should not be worn by any perioperative personnel off campus.
11. Specific scrub colors are associated with each Pavilion. Pavilion A, Green; Pavilion L, Blue. These are subject to change.

B. Head/Face coverings:

1. A clean surgical head cover or hood that confines all hair and completely covers the ears, scalp skin, sideburns, and nape of the neck should be worn.
 - a. For facial hair not contained by a surgical mask, a clean beard cover that covers all facial hair should be worn when entering the restricted areas.
2. Disposable bouffant caps and hoods are single use and should be disposed of daily. Reusable scrub caps should be washed daily.
3. Red bouffant caps should be worn by all visitors who enter the perioperative surgical suites including student observers and product representatives.
4. No recommendation for type of head covers worn in semi-restricted and restricted areas.
5. Surgical head coverings should be removed at the end of the shift and when contaminated.

C. Protective Shoes/footwear:

1. Shoes worn within the perioperative environment will meet Occupational Safety and Health Administration (OSHA) standards for protective footwear:
 - a. will be kept clean,
 - b. constructed to prevent exposures to blood and body fluids,
 - c. have closed toes and backs and non-skid soles,

- d. protective footwear will be worn to prevent injury from falling or rolling objects or objects that could pierce the soles of the shoes.
2. Dedicated OR shoes, that do not leave the building, may be worn without shoe covers.
3. Shoes worn outside the building must be covered with shoe covers while in the OR.

D. Protective Shoe Covers:

1. Must be worn to cover shoes that have been worn outside the building.
2. Must be removed prior to leaving the perioperative areas.
3. Must be worn to protect the feet when socks are not worn or during cases that have large amounts of blood or body fluids and irrigation.
4. Fluid-resistant knee-high shoe covers should be worn during Orthopedic, C-sections, and trauma cases when the risk of exposure to potentially infectious microorganisms can be anticipated.

E. Warm-up Jackets:

1. Encouraged to be worn by all non-scrubbed personnel while in the semi-restricted and restricted perioperative areas to help contain skin squames shed from bare arms.
2. Wear with the cuffs down to the wrists and the front of the jacket closed to prevent inadvertent contamination of sterile surgical field.
3. Must be removed and deposited in designated laundry bin before leaving, and shall be laundered only by DHHA Laundry Department. Warm-up jackets are not to be laundered outside of DHHA.
4. Disposable warm up jackets can be obtained in the operating room and must be disposed of when soiled, prior to leaving or returning to the department, and at the end of every shift.

F. Disposable Cover Suits:

Cover suits (disposable "bunny suits") are allowed to be worn in restricted perioperative areas by:

1. visitors with a focused purpose i.e clinician from another department caring for patient, officer escorting a Department of Corrections (DOC) patient,
2. Child Life Specialist,
3. a parent who is accompanying a child to the OR,
4. an employee performing repairs,
5. SICU staff assisting with patient transport to the surgical suite, or
6. Staff assisting with surgical cases during emergencies.

G. Identification Badges and Lanyards:

1. Must be visible and worn above the waist; and should be routinely cleaned.
2. Product Representatives must register, sign-in, and display RepTrax (Sec3ure by

IntelliCentrics) identification visibly on DHHA surgical scrub attire prior to being admitted to the perioperative area. Refer to 'Non-Pharmaceutical Supplier-Vendor Guidelines'.

H. Jewelry:

1. Necklaces must be contained within the scrub top.
2. Earrings must be contained within the surgical cap.
3. Bracelets must not be worn in the perioperative setting.
4. Rings and watches should be removed prior to hand washing and surgical hand scrubbing. Rings should not be worn by scrubbed personnel.

I. Fleece:

1. Fabrics made of 100% cotton and fleece collect and shed lint, may harbor micro-bacteria, and do not meet federal flammability standards and are not to be worn in restricted and semi-restricted areas.
2. No overcoats may be worn over scrub attire, except hospital laundered warm-up jackets. If anything else is worn over scrubs, the scrubs must be changed before entering the restricted and semi-restricted areas.

J. White lab coats:

1. White lab coats are not to be worn over scrubs unless laundered on a daily basis at DHHA. See A.6. for instructions for use.

K. Backpacks, brief cases, and fanny packs:

1. Backpacks, briefcases, and fanny packs cannot be brought into the restricted and semi-restricted areas.

L. Fingernails:

1. DHHA recognizes hand hygiene as the primary method of decreasing hospital acquired infections. Healthy skin and fingernail conditions must be maintained at all times.
2. Hand hygiene is a job requirement and DHHA policy [Hand Hygiene Policy for Infection Prevention](#) must be followed by all direct care providers.
3. Artificial nails (shellac, nail art/nail jewelry, sculpture, gel, tips, dips, resin, acrylic overlays, etc.) cannot be worn by health care personnel in the restricted and semi-restricted areas.
4. Although discouraged, nail polish may be worn if easily removed by acetone and if not chipped or cracked. Fingernails must be kept clean and must not extend more than ¼ inch beyond the fingertip.

EXTERNAL REFERENCES

- A. Occupational Exposure to Bloodborne Pathogens, 29 CFR 1910:1030
- B. AORN Recommended Practices for Surgical Attire and Hand Hygiene. (2019) In: *AORN*

Guidelines.

DHHA RELATED DOCUMENTS

[Hand Hygiene Policy for Infection Prevention](#)

[Standard Precautions](#)

[Isolation and Transmission-Based Precautions](#)

[Regulation of Pharmaceutical Industry Representatives](#)

ATTACHMENTS

None

Approval Signatures

Step Description	Approver	Date
	Kathy Boyle: Chief Nursing Officer	04/2023
	Thomas MacKenzie: Chief Quality Officer	04/2023
Infection Control and Prevention Committee	Jill Stanley Alcock: Executive Administrative Assistant	04/2023
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	Cyril Mauffrey: Physician - Orthopedic Surgeon	03/2023
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Formatting Review	Brooke Tidball: Document Control Program Manager	03/2023
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