



Team Name: Surgical Team	Reference Number: CLI.6611.SG.002
Team Lead: Regional Surgical Lead	Program Area: Perioperative
Approved by: Regional Lead – Acute Care & Chief Nursing Officer	Policy Section: General
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Review Date:	
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**STANDARD GUIDELINE SUBJECT:**

Dress Code and General Conduct in the Perioperative Environment

**PURPOSE:**

- To promote evidenced based standards of practice for surgical attire related to apparel, and general conduct in the perioperative environment.
- To reduce the number of microorganisms in the perioperative environment and lessen patient’s risk for developing surgical site infections (SSIs).
- To ensure a safe environment for all patients and personnel entering the perioperative environment.

**BOARD POLICY REFERENCE:**

Executive Limitation (EL-02) – Treatment of Clients

**DEFINITIONS:**

**Additional Attire and Related Apparel:** Cosmetics/fragrances, fingernails, jewelry/wrist watches, name tags, maintenance and housekeeping department personnel attire, and visitor’s attire.

**Perioperative Environment:** Includes the semi-restricted and restricted areas of the operating rooms (ORs), as well as all other areas where surgery/invasive procedures are performed (ie. Endoscopy suites).

**Personal Protective Attire:** Protective equipment used in the perioperative setting which includes, but is not limited to waterproof, fluid resistant gowns, lead aprons, eyewear with side shields

and/or face shields/visors, sterile/non-sterile gloves, special procedure masks, or respirators, disposable shoe covers and isolation gown/masks.

**Restricted Areas:** Includes the OR and procedure room. OR personnel in this area are required to wear full surgical attire and cover all head and facial hair, including sideburns, beards, and necklines.

**Semi-Restricted Area:** Includes the peripheral support areas of the surgical suite and has storage areas for sterile and clean supplies, work areas for storage and processing instruments, and corridors leading to the restricted areas of the surgical suite.

**Surgical Attire:** Non-sterile apparel designed for the perioperative practice setting that includes two – piece pantsuits, scrub dresses and head coverings. Long sleeved facility laundered cover jackets may be worn.

**Unrestricted Area:** Area that is not defined as semi-restricted or restricted. Includes a central control point for designated personnel to monitor the entrance of patients, personnel, and material into the semi-restricted areas. For instance, locker rooms, break rooms, offices, waiting rooms, the preoperative admission area, post-anesthesia care units (PACUs) and access to procedure rooms. Street clothes are permitted in this area.

## **PROCEDURE:**

### **1. Surgical attire requirements:**

- Surgical attire is the property of the healthcare facility and does not leave the internal environment of the facility.
- All individuals entering semi-restricted and restricted areas don freshly hospital laundered scrubs attire prior to entering the perioperative environment.
- Personnel change into street clothes whenever they leave the healthcare facility or when travelling outdoors between buildings.
- After removing, the surgical attire is returned to a designated receptacle for washing or disposal. Surgical attire is not to be hung in the locker to be worn again at a later time.
- Surgical attire and personal protective attire are changed immediately if it becomes visibly soiled or wet (blood, body fluids, moist with perspiration, etc.)

### **2. All individuals entering the semi-restricted or restricted area of the OR wear surgical attire.**

**Exception: visitors (such as maintenance personnel, parents, law enforcement) may wear disposable one-piece coveralls or bunny suits with head covering provided by the site.**

- Two-piece pantsuit top is tucked into the pants. Drawstrings are tucked into pants.
- Long sleeved jackets laundered by the facility are worn by non-scrubbed personnel within restricted and semi-restricted areas. When worn, jackets are close fitting, fastened at the front, and cover the arms. When worn during the performance of

preoperative skin antisepsis, sleeves are tight fitting. Otherwise, a sterile sleeve is used to reduce the risk of contamination of the prepped area. Jackets are changed daily and laundered within the hospital facility after each use.

- Lab coats are not worn within the perioperative environment. If worn over scrubs outside of the perioperative environment, they are kept clean. Recommendations include laundering weekly or whenever dirty/soiled with bodily fluids. Guidance for home laundering includes the use of hot water with bleach, and heated drying.
- Personal clothing (e.g. undergarments, long sleeve shirts) that cannot be completely covered by surgical attire are not worn.
- Head covering are worn to cover the scalp, hair, and beard.
- Head covering are not removed when leaving the perioperative environment, as hair and microbes are shed onto the scrub attire.
- Single use head coverings are removed at the end of the shift, when changing into street clothes, or when contaminated and are discarded in a designated receptacle.
- Home laundered cloth hats or headgear worn due to cultural or religious reasons are to be completely covered with a disposable bouffant cap.

**3. All personnel wear a single, disposable, surgical mask in restricted areas and/or in the presence of open sterile supplies. The type of mask that offers the most appropriate protection for the specific circumstances is worn.**

- Masks are well-fitting and cover nose and mouth.
- Worn in designated restricted areas.
- Worn during sterile procedures and when patients are present in the OR/procedure room.
- Not be worn dangling around the neck or stored in a pocket.
- Removed by handling only the ties and discarded appropriately when leaving the restricted area.
- Changed between procedures or immediately when moist or visibly soiled.
- Fluid resistant masks with a clear splashguard visor or alternate eye protection are recommended for all scrub personnel.
- Reusable eye protection (such as goggles) are cleaned and disinfected according to the manufacturer's instructions, before and after the personnel assists with each new procedure.
- Consideration is taken for the mask filtration level and the clinical situation (e.g. isolation, precautions, plume, and laser).
- NIOSH Approved (N95 masks or equivalent) respirator masks are recommended when caring for patients with airborne infections.

**4. Footwear have closed toes and backs, low heels, non-skid soles, and provide protection from injury due to items, sharps, or fluids that may be dropped. Shoes are clean and dedicated for use within the perioperative area.**

- Shoe covers are worn in instances when gross contamination is anticipated. Discard when soiled or leaving the perioperative environment and perform hand hygiene.

- 5. Lead protective attire that may include aprons, vests, skirts and collars are worn when performing radiological procedures if a portable shield is not provided or is not appropriate.**
  - Visually inspect radiation protective devices before donning
  - Radiation protective devices are stored flat or hung vertically and never folded. Folding could lead to damage such as cracking, rendering the device less effective. It is recommended that lead aprons be hung on heavy –duty chrome hangers and not on a hook.
  
- 6. Identification badges are worn secured to the scrub attire top or long-sleeved jacket and cleaned with low level disinfectant regularly or when it becomes soiled.**
  - Lanyards are not permitted in the OR setting.
  
- 7. Make Up / Fragrances**
  - Facial make up is kept to a minimum
  - ORs are designated “scent free zones”. Fragrances or scented hygiene are not to be used/worn by staff.
  
- 8. Fingernails**
  - Fingernails are clean, short, natural, and appear healthy. Nail tip length is not longer than 2mm. Nail lengths reaching beyond fingertips can tear gloves.
  - Fingernail polish is not worn. Chipped or peeling polish provides a harbor for microorganisms.
  - Artificial nails, extenders, enhancers, gel nails are not permitted. Artificial nails and tips harbor high numbers of microorganisms.
  
- 9. All hand /arm jewelry (e.g. bracelets, rings, watches) are removed before entering the semi restricted and restricted areas**
  - Jewelry increases the bacterial count on skin, grate on the skin, and increase desquamation.
  - All other jewelry (e.g. body piercing, earrings, necklaces, false lashes etc.) or accessories are removed or confined within scrub attire.
  
- 10. Personal devices and items**
  - Backpacks, fanny packs, purses and briefcases are difficult to clean and may harbor microorganisms. These are not taken into the semi restricted or restricted areas.
  - Cellular phones, tablets and other personal communication or hand-held electronic devices are cleaned with a low-level disinfectant according to the manufacturer’s instruction, before and after being brought into the perioperative setting.
  - Personnel do not eat, drink, smoke, apply cosmetics, handle contact lens, store food or personal belongs in restricted and semi-restricted areas.

**11. All personnel wear personal protective equipment when there is a risk of exposure to biological / hazardous materials.**

- An impervious gown is worn over the scrub suit when splashes from irrigation, blood or body fluids are anticipated.
- Appropriate protective eyewear is worn. If there is a risk for ocular splash, spray, or aerosolized blood or body fluids, protective eyewear that provides a side shield is worn.
- Laser protective eyewear meets the safety standards.
- Non –sterile latex or vinyl gloves are worn to handle any materials or items contaminated by blood and body fluids. Gloves are removed immediately after use and hand hygiene is performed.
- Isolation attire is worn for contact with patients on infection precautions/isolation.
- NIOSH approved N95 masks or equivalent are worn for surgical patients infected with diseases that have airborne transmission (e.g. suspected or confirmed active tuberculosis).
- N95, laser masks, or equivalent are worn for all laser surgery or for cases where a large amount of electrosurgical smoke is generated.
- Other specific designated respiratory protection is worn according to specific infection control and workplace safety guidelines when indicated.

**REFERENCES:**

AORN (2019). Guidelines for Perioperative Practice. Denver: AORN

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Public Health Agency of Canada. (2012). *Hand hygiene practices in healthcare settings*. Retrieved May 17, 2022 from [Hand hygiene practices in healthcare settings : HP40-74/2012E-PDF - Government of Canada Publications - Canada.ca](https://www.canada.ca/content/dam/hc-sc/pdf/publications/HP40-74/2012E-PDF-Government%20of%20Canada%20Publications%20-%20Canada.ca)

Winnipeg Regional Health Authority (July, 2020). Dress Code and General Conduct in the Perioperative Environment Policy.