

Australian College of Perioperative Nurses ACORN Double Gloving Standards¹



Recommendations by the Australian College of Perioperative Nurses (ACORN) aim to reduce the impact of NSSI injury and minimise contact of patient body fluids to operating room staff¹

30%

Of healthcare worker needlestick and sharps injuries (NSSI), occur in the operating room²



Glove micro-perforations are undetected in

82%

cases³ and allow for direct bacterial and viral passage onto hands



STAFF AND PATIENT SAFETY Management of sharps in the perioperative environment

Standard Statement 1:

Healthcare workers have a duty to double glove for surgical procedures and using double gloving indicator systems where available

Standard Statement 2:

The use of double gloves by the surgical scrub team may protect the team from occupational exposure to biohazardous material following skin penetration with a sharp

ASEPSIS AND CLINICAL CARE Infection Prevention

Standard Statement 8:

The nurse has a duty to comply with recommended practice of double gloving when scrubbed for invasive surgical procedures and use an indicator under glove system for optimal early identification of breaches and perforations

ASEPSIS AND CLINICAL CARE Surgical hand asepsis, gowning and gloving

Standard Statement 4:

Surgical scrub team members have a duty to double glove, donning the second pair of gloves prior to approaching the aseptic field

Surgical scrub team members have a duty to change gloves after a maximum of 1^{1/2} to 2 hours wear



“Although wearing gloves acts a barrier to pathogen transmission and reduces the risk of occupational exposure to blood and body fluids, wearing double gloves, preferably with a puncture indicator system, may provide more protection than single gloving”³

1. Australian College of Operating Nurses. Standards for Perioperative Nursing in Australia 15th Edition May 2018.

2. Murphy C L. The serious and ongoing issue of needlestick in Australian healthcare settings. Collegian 2013.

3. Harnoss JC et al Concentration of bacteria passing through puncture holes in surgical gloves American Journal of Infection Control, 38(2): 154-158, March 2010.