



## GLOBAL RECOMMENDATIONS AND GUIDELINES ON DOUBLE GLOVING

Surgery poses an increased risk of bloodborne pathogen (BBP) exposure to healthcare workers and patients.<sup>1</sup> Surgical gloves have been recognized as an effective barrier to minimize this risk and reduce potential cross-contamination that can lead to the development of healthcare-associated infections.<sup>1</sup> Evidence supports the use of double gloving with a darker-colored underglove, as part of an indicator system, to decrease the risk from percutaneous injury and provide an effective barrier to BBP exposure.<sup>2</sup> Double gloving is a global standard endorsed by many professional healthcare organizations.

### Professional Organizations Recommendations in Support of Double Gloving

**WHO**  
World Health Organization  
<https://www.who.int/>

“Double gloving in countries where there is a high prevalence of Hep B (HBV), Hep C (HCV) and HIV for long surgical procedures (>30 minutes). **For contact with a large amount of body fluids or blood, high risk orthopedic procedures** are considered an appropriate practice.”<sup>3</sup>

**AORN**  
Association of periOperative Registered Nurses  
<https://aorn.org/>

“Scrubbed team members should **wear two pairs of sterile surgical gloves** (ie, double glove), and use a perforation indicator system.”<sup>4</sup>

**AAOS**  
American Academy of Orthopaedic Surgeons  
<https://www.aaos.org/>

Supports the **recommendation of double gloving** during all surgical procedures.<sup>5</sup>

**ACS**  
American College of Surgeons  
<https://www.facs.org/>

“The **universal adoption of the double glove** (or under glove) **technique to reduce exposure to body fluids resulting from the glove tears and sharps injuries**. In certain delicate operations, and in situations where it may compromise the safe conduct of the operation or safety of the patient, the surgeon may decide to forgo this safety measure.”<sup>6</sup>

**CDC**  
Centers for Disease Control and Prevention  
<https://www.cdc.gov/>

“**Double gloving provides an extra layer of safety** during direct patient care and during the PPE removal process. Utilizing different colored gloves for each layer helps to rapidly identify any breaches in glove integrity.”<sup>7</sup>

**ACORN**  
Australian College of periOperative Nurses  
<https://www.acorn.org.au/>

Standards contain recommendations that nurses shall “**double glove with a perforation indicator system**” and “**change gloves after a maximum wear time of 1.5 to 2 hours**”.<sup>8</sup>

**AST**  
Association of Surgical Technologists  
<https://www.ast.org/>

“Members of the sterile surgical team should **double glove for added protection** and consequently to reduce the risk of exposure to patient blood and body fluids. The team members **should wear a colored glove as the innermost glove**.”<sup>9</sup>

**AfPP**  
The Association for periOperative Practice  
<https://www.afpp.org.uk/>

“Recognize staff and environmental contamination risk from glove perforation and **double gloving with a different colour underglove may reduce this risk**.”<sup>10</sup>

**EORNA**  
European Operating Room Nurses Association  
<https://eorna.eu>

“**Double gloving is a recommended practice**”. The risk from perforation can also be decreased when a colored underglove is worn.<sup>11</sup>

**ORNAC**  
Operating Room Nurses Association of Canada  
<https://www.ornac.ca/>

“**Double gloving provides an additional barrier** and further reduces the risk of contamination and subsequent infection. Wearing two pairs of gloves **significantly reduces the number of perforations** to the inner glove.”<sup>12</sup>

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