



## Clinical Process Instruction Manual

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### Gowning and Surgical Scrub Process Instruction

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#### Policy:

TGLN promotes recognized best practices to establish aseptic technique during tissue recovery. Aseptic technique refers to conditions and procedures used to exclude the introduction of microbial contamination. This process is performed by Tissue Recovery Coordinators (TRCs) and Multi Tissue Recovery Coordinators (MTRCs) during tissue recovery.

#### Process:

The (M)TRC is responsible for performing the process steps below.

The two alternatives for performing aseptic technique are the “Sterile Sleeve Process for Ocular Recovery” and “Gowning with a Circulator Process”. Steps for each method are detailed below.

#### **Sterile Sleeve Process for Ocular Recovery**

##### *Initial Preparation*

1. Cover hair with a surgical cap and a don surgical mask.
  - 1.1. Be certain all hair is covered.
  - 1.2. Dangling earrings must be removed, however pierced ear studs must be contained in the head cover. They are a potential contaminant to the sterile field.
  - 1.3. Adjust the mask snugly and comfortably over nose and mouth.
2. Don shoe covers.
3. Don a moisture impermeable gown.
4. Don eye protection or face shield
5. Prior to initiating scrub: ensure fingernails are trimmed, all nail polish are removed and all jewelries are removed from hands and arms.
  - 5.1. Nails should not reach beyond fingertips, to avoid glove puncture.
  - 5.2. Microorganisms may lodge in crevices of nail polish, artificial nails and jewelry.
6. Open the packages containing the sleeves and gloves, then place them on a dry surface:



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- 6.1. Open the folded inner package and flaps to expose the gloves and sleeves being careful not to touch the inner packages.
- 6.2. Do not touch gloves and sleeves inside the open packages.

#### *Three Alternatives for Hand Washing*

7. Water-based scrubbing process:
  - 7.1. Wet hands and forearms.
  - 7.2. Apply 2-3 ml of antiseptic soap from the dispenser to the hands or moisten scrub brush and lather.
  - 7.3. Wash the hands and arms several times thoroughly to 2 inches above the elbows.
  - 7.4. Rinse thoroughly under running water, with hands upward, allowing water to drip from the flexed elbows.
  - 7.5. Open the scrub brush container, remove nail cleaner, clean under nails carefully and dispose of the nail cleaner after use.
  - 7.6. Remove the brush from the container, wet hands and forearms and begin scrub using the time method described below.
  - 7.7. Discard the brush, rinse hands and arms thoroughly, keeping the hands elevated above the elbows. Keep hands and elbows in front and away from the body.
  - 7.8. During and after scrubbing, keep the hands higher than the elbows to allow water to flow from the cleanest area, the hands down to the upper arms.
  - 7.9. Do not contaminate hands if turning off the water.
8. Time Method (*five minute scrub*):
  - 8.1. Wet hands and forearms.
  - 8.2. Take the sterile scrub brush with soap from wrapper to begin scrub.
  - 8.3. Scrub each individual finger, nails and hands, a half-minute for each hand.
  - 8.4. Treat each finger as if it has four sides and clean each.
  - 8.5. Rinse the hands with hands upward, allowing the water to drip from the flexed elbows.
  - 8.6. Interlace the fingers to cleanse between them.
  - 8.7. Discard the brush.



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- 8.8. Fingers, hands, and arms are scrubbed by allotting a prescribed amount of time to each anatomic area in each step of the procedure.
9. Waterless Method:
  - 9.1. Hands should be pre-washed and nails cleaned with a nail pick under running water to remove gross debris and superficial microorganisms.
  - 9.2. Hands should be dried thoroughly before application of surgical hand antiseptic.
  - 9.3. Cup hand and hold 1-2 inches from the nozzle.
  - 9.4. Depress foot pump completely to dispense one pump (2 ml) of antiseptic hand prep.
  - 9.5. Dispense one pump (2 ml) of antiseptic hand prep into the palm of one hand.
  - 9.6. Dip the fingertips of the opposite hand into the hand prep and work it under the nails. Spread the remaining hand prep over the hand and up to just above the elbow covering all surfaces.
  - 9.7. Using another 2 ml of (Avagard) antiseptic hand prep, repeat above procedure with the other hand.
  - 9.8. Dispense another final 2 ml of antiseptic hand prep into either hand and reapply to all aspects of both hands up to the wrist. Allow to dry before donning gown sleeves and gloves.

#### *Gloving and Sleeving*

10. Applying Sterile Gloves and Sleeves:
  - 10.1. With left hand, grasp the cuff of the right glove on the fold at the very bottom.
  - 10.2. Pick up the glove and step back from the table.
  - 10.3. Insert the right hand into the glove and pull it on, leaving the cuff turned well down over the hand. Carefully grasp the cuff near the edge and pull it up over the wrist.
  - 10.4. Care should be taken not to touch the exterior of the glove.
  - 10.5. Slip the fingers of the gloved right hand under the everted cuff of the left glove.
  - 10.6. Insert the hand into left glove.
  - 10.7. With fingers of the right hand, pull the cuff of the left glove over the left wrist.
  - 10.8. Avoid touching the bare wrist.



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- 10.9. Take a sterile sleeve and unfold.
  - 10.10. Place hand under the fold (cuff) of the sleeve and insert other hand and arm into the sleeve.
    - 10.10.1. If the sterile sleeve doesn't have a fold(cuff), create one prior to donning.
    - 10.10.2. If there are two sterile sleeves in a pack with no fold (cuff), place one of the sleeves on the open sterile inner glove packet from which your first glove was just removed.
  - 10.11. Pull sleeve all the way up the arm until the wrist cuff reaches the wrist.
  - 10.12. DO NOT pull sleeve cuff past the glove cuff, exposing the skin.
  - 10.13. Repeat for other sleeve.
  - 10.14. Then repeat the above gloving procedure with the second pair of gloves, pulling the glove cuffs *over* the sleeve cuff.
  - 10.15. It is strongly recommended that two sets of gloves be worn. This not only gives more protection from accidental exposure but allows for the removal of the top set if they become contaminated. During a procedure, if something that is non-sterile is touched, the glove becomes contaminated.
11. After scrubbing in, applying sterile gloves and sleeves, drape the donor with the 4 sterile drapes, sticking them on by applying the adhesive backing to the side closest to the eyes
  12. Removing Contaminated Glove(s):

Follow the instructions below to remove the contaminated glove:

    - 12.1. With your non-contaminated hand, grasp the *inside* of the contaminated glove and remove it inside out.
    - 12.2. You must do this without touching your exposed skin.
    - 12.3. Wipe off any powder on the gloves with a clean piece of gauze.
    - 12.4. You are now ready to continue the procedure.
  13. Wash hands with soap and water after the surgical procedure.

### Gowning with a Circulator Process

14. Circulator hand disinfection:



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- 14.1. Remove all jewelry such as rings, watches, and bracelets from fingers and wrists.
- 14.2. Wash hands with cleanser and dry hands with a clean paper towel.
15. Circulator non-sterile gowning process:
  - 15.1. Cover hair with a surgical cap and don a surgical mask.
  - 15.2. Be certain all hair is covered by head gear.
  - 15.3. Pierced ear studs must be contained in the head cover.
  - 15.4. Adjust mask snugly and comfortably over nose and mouth.
  - 15.5. Don shoe covers.
  - 15.6. Don a non-sterile gown.
  - 15.7. Don eye protector or face shield
16. Refer to Sterile Sleeve for Ocular Recovery Process sections 5, 6 and 7 for surgical scrub
17. Surgical Gowning Process:
  - 17.1. Open the outside packaging of the sterile gown and gloves appropriately prior to the surgical scrub
  - 17.2. Surgical gowns are folded with the inside facing the environment to facilitate picking up and donning the gown without touching the sterile outside surface.
  - 17.3. With one hand, pick up the entire folded gown from the wrapper by grasping the gown however being careful to touch on the inside top layer which is exposed.
  - 17.4. Hold the gown's neck and allow it to unfold, being careful that it doesn't touch any unsterile objects.
  - 17.5. Slide arms part way into the sleeves of the gown, keeping hands at shoulder level away from the body.
  - 17.6. Slide your arms further into the gown sleeves; when your fingertips are even with the proximal edge of the cuff, grasp the inside seam at the juncture of gown sleeve and cuff using your thumb and index finger. Be careful that no part of your hand protrudes from the sleeve cuff.
  - 17.7. Using the left hand, and keeping it within the gowns left sleeve, pick up the right glove by grasping the folded cuff.



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- 17.8. Extend the right forearm with the palm facing upward. Place the palm of the glove against the palm of the right hand ensuring the fingers point up the forearm. Grasp the top edge of the cuff, above the palm with the right hand.
- 17.9. Grasp the back of the cuff in the left hand and turn it over the end of the right sleeve and hand. The hand remains in the gown's sleeve.
- 17.10. Grasp the top of the right glove and underlying gown sleeve with the sleeve-covered left hand. Pull the glove on, over extended right fingers until it completely covers the gown's cuff.
- 17.11. Glove the left hand in the same manner, reversing hands.
- 17.12. The gloved right hand may be used to pull on the left glove.
- 17.13. The circulator adjusts the gown over the scrub's shoulders by grasping the inside surface of the gown at the shoulder seams and secures the gown.
- 17.14. The circulator also secures the gown at the waist by grasping the waist inner tie.
- 17.15. The only part of the donned surgical gown that is considered sterile are the sleeves below the axillary area and the front from the waist level to a few inches below the neck opening.

#### Records:

- *No records.*

#### References:

- *No references.*