Hand washing should be undertaken when hands are dirty or soiled and is the preferred technique when exposure to potential spore forming pathogens is suspected or proven.

Hand hygiene should be performed:
- a. Before direct contact with a patient including aseptic procedures
- b. After direct contact with a patient
- c. Immediately after exposure to body fluids or excretions
- d. After touching a patient’s surroundings
- e. Immediately after glove removal

**HAND WASHING WITH SOAP AND WATER**

1/ PREPARE HANDS: Remove wrist and hand jewellery; arms bare from the elbow down; fingernails should be short and clean (no false nails/polish); cuts and abrasions covered with waterproof dressings.

2/ Wet hands with clean, running water

3/ Apply soap to cover all surfaces of the hand

4/ Rub hands palm to palm

5/ Right palm on left dorsum, rub together with fingers interlaced, repeat with left palm on right dorsum

6/ Rub palm to palm with fingers interlaced, right hand over/left hand under, then swap

7/ Cusp backs of fingers into opposing palms and rub side to side

8/ Clasp right hand over left thumb and rub thumb in a rotational direction, repeat with left hand over right thumb

9/ Place fingertips of right hand into left palm and rub in a circular direction, repeat with left hand into right palm

10/ Rinse hands under running water. Avoid using hot water to prevent drying of skin

11/ Dry hands thoroughly using a single use towel

12/ Use the towel to turn off the faucet

13/ Hands are clean and dry and safe to undertake a task

Reference
The Joanna Briggs Institute. Recommended Practice, Basic Hand Hygiene: Health Professionals. The Joanna Briggs Institute EBP Database, JBI@Ovid. 2020; JBI2421.

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