

**Purpose** The purpose of this policy is to identify Personal Protective Equipment (PPE) and potential areas for use.

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**Responsibility** Employees with potential exposure to hazardous chemicals, blood, or other potentially infectious material.

Refer to Visitor Policy for specific instructions for PPE required for visitors.

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**Policy** Employees who may have potential occupational exposure shall be provided, without cost, appropriate equipment including gloves, fluid resistant gowns, face shields masks, eye protection with full side shields; as appropriate.

Personal protective equipment such as a full face shield or mask and protective eyewear with full side shield, fluid-resistant gowns and gloves will be worn to protect and prevent employees from blood or other potentially infectious materials to pass through to or reach the employee's skin, eyes, mouth, other mucous membranes, or work clothes when performing procedures during which spurting or spattering of blood might occur (e.g., during initiation and termination of dialysis, cleaning of dialyzers, and centrifugation of blood).

Protective eyewear is provided by the facility and must be eye protection intended to shield the wearer's eyes from certain hazards. Prescription corrective eyewear is **not** considered appropriate eye protection. For blood and body fluid hazards, this would be face shield or any other form of eye protection designed to prevent blood and OPIM to reach eyes under normal conditions of use and for the duration the PPE will be used.

Employees shall use personal protective equipment namely the combination of fluid-resistant gown, full face shield or mask and protective eyewear with full sideshield, gloves, in accordance with the type of patient contact expected and anticipated exposure.

Personal protective fluid resistant gowns shall be changed whenever visibly soiled or in disrepair. Fluid resistant gown may be reused by the original owner for as long as it is clean and intact.

All personal protective equipment shall be removed prior to leaving the treatment area.

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**Facemasks**

Facemasks create a physical barrier to help block large particles, splashes, sprays, or splatter from reaching the mouth and nose.

Facemasks are single-use only and must be discarded after the task for which they were needed is complete. Practice hand hygiene after mask removal to prevent cross-contamination.

Facemasks may not be maintained at the patient station (for example hung on the IV pole) for later use.

**Gloves**

A supply of clean, non-sterile gloves and a waste container shall be placed near each dialysis station or treatment area.

Disposable gloves must be used:

- When holding access bleeding sites.
- When performing venipunctures or other vascular access procedures
- When handling blood specimens.
- When handling contaminated dialysis equipment and accessories.
- When touching blood, body fluids, secretions, excretions, or items or surfaces potentially contaminated with these substances.
- When touching patients during activities with potential exposure to bloodborne pathogens and other potentially infectious material.
- When injecting solutions or medications.
- When touching any part of the dialysis machine or equipment at the dialysis station.

Gloves must be worn appropriately.

Change gloves and practice hand hygiene between each patient and/or station to prevent cross-contamination.

Remove gloves and wash hands after each patient contact, and after exposure to blood and body fluids. If hands are not visibly soiled, use of a waterless antiseptic hand rub is acceptable. (See **Hand Hygiene** policy).

Hand hygiene must always be performed after glove removal.

Avoid touching surfaces with gloved hands that will be touched with ungloved hands (for ex. patient charts and computers.)

If gloves are visibly contaminated, change gloves. Wash hands before putting on new gloves, touching any surfaces and before performing other activities.

**Printed copies are for reference only. Please refer to the electronic copy for the latest version.**

**NOTE:** When using latex gloves, skin care products which are petroleum based, including mineral oil based should not be used. According to OSHA, deterioration of latex gloves was noted when these products were used.

**Patient Care  
Activities**

<b>Designated Patient Care Activities</b>	<b>Gloves</b>	<b>Fluid Resistant Gown</b>	<b>Full Face Shield or Mask and Protective eyewear with full side shield</b>
Change gloves after each patient contact	X		
In area at risk for blood splatter or spill	X	X	X
When touching any part of the dialysis machine or equipment at the dialysis station while a patient is connected	X		
Setting up the dialysis machine	X		
Handling potentially contaminated items	X	X	
Connecting and priming dialyzer	X		
Handling used blood tubes	X	X	
Handling infectious waste	X	X	X
Actual contact w/blood, body fluids, mucous membranes or tissues	X	X	X
Potential contact w/blood, body fluids, mucous membranes or tissues	X	X	X
Stripping machine after patient treatment	X	X	X
Initiating dialysis for HD or PD	X	X	X
Terminating dialysis for HD or PD	X	X	X
Holding needle sites	X	X	X
Venipuncture or any access procedure	X	X	X

Change catheter dressing & to initiate or terminate HD treatment using a catheter	X	X	X
Collecting PD fluid samples or discarding	X	X	X
Potential chemical exposure (i.e. chemical disinfection of dialysis machine)	X	X	X

**Background**

OSHA Directive Number: CPL 2-2.69 Enforcement Procedures for the Occupational Exposure to Bloodborne Pathogens 1910.1030, 11/27/2001: “Requirements for the use of protective body clothing, such as fluid-resistant gowns, aprons, laboratory coats, clinic jackets, surgical caps, or shoe covers, and the degree to which the PPE must resist penetration, are performance-based. The employer must evaluate the task and the type of exposure expected and, based on the determination, select the “appropriate” personal protective clothing. Fluid-resistant laboratory coats or fluid-resistant gowns with long sleeves must be used for procedures in which exposure of the forearm to blood or other potentially infectious material (OPIM) is reasonably anticipated to occur.”

**Definition**

**Hand Hygiene** - A term that applies to either hand washing with soap and water or use of alcohol-based hand rubs to clean hands.

**Occupational Exposure** – Reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or other potentially infectious materials that may result from the performance of an employee’s duties.

**Other Potentially Infectious Materials** – The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids; (2) Any unfixed tissue or organ (other than intact skin) from a human (living or dead); and (3) HIV- containing cell or tissue cultures, organ cultures, and HIV- or HBV- containing culture medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV.

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**Related  
Policies &  
Procedures**

- Patient Education Policy
- Visitors Policy
- Hand Hygiene Policy
- Hand Hygiene Procedure

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