UR Thompson Health COVID-19 Guidelines for Student and Intern Clinical Experiences



How to Handwash?

WASH HANDS WHEN VISIBLY SOILED! OTHERWISE, USE HANDRUB

① Duration of the entire procedure: 40-60 seconds



Wet hands with water;



Apply enough soap to cover all hand surfaces:



Rub hands palm to palm;



Right palm over left dorsum with interlaced fingers and vice versa;



Palm to palm with fingers interlaced;



Backs of fingers to opposing palms with fingers interlocked;



Rotational rubbing of left thumb clasped in right palm and vice versa;



Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;



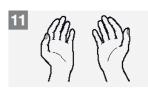
Rinse hands with water;



Dry hands thoroughly with a single use towel;



Use towel to turn off faucet;



Your hands are now safe.



Patient Safety

SAVE LIVES Clean Your Hands

reasonable precautions have been taken by the World Health Organization to verify the information contained in this document. However, the published material is being distributed without warranty of any kind, either expressed or implied. The responsibility for the interpretation and use of the material lies with the reader. In no event shall the World Health Organization be lable for damages arising from its use.

of THE HIG

How to Handrub?

RUB HANDS FOR HAND HYGIENE! WASH HANDS WHEN VISIBLY SOILED

① Duration of the entire procedure: 20-30 seconds



Apply a palmful of the product in a cupped hand, covering all surfaces;



Rub hands palm to palm;



Right palm over left dorsum with interlaced fingers and vice versa;



Palm to palm with fingers interlaced;



Backs of fingers to opposing palms with fingers interlocked;



Rotational rubbing of left thumb clasped in right palm and vice versa;



Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa:



Once dry, your hands are safe.



onable presultions have been based by the World Health Organization to verify the information contained in this occurrent. However, the published material to being distributed without warranty of any kind, their expressed or implicable. The responsibility for the interpretation and use of the materials less with the responsable or make the World Health Organization to be table for damages arting from its use.

WHO acknowledges the Höpitaus Universitaties de Genève (HUG), in particular the members of the intection Control Programme, for their active participation in developing this material.

HOW TO WEAR A SURGICAL MASK THROUGHOUT THE DAY



Always perform good hand hygiene before and after you put the mask on or take it off.



Be sure the mask is fitted over your ears and covers your nose and mouth.



Keep the mask with you throughout the day.



Once the mask is on, try not to touch or adjust it.



Avoid pulling it down or tucking it below your chin – the mask should either be fully on or taken off.



Gently remove the mask for breaks and meals.



Take care to keep the mask clean and dry – store the mask in an open bag or container (avoid sealed plastic bags).



Discard and replace a mask if:

- It's soiled or damaged.
- You have used it for one week.

Tune 19, 2000 11 45 sm







Reusing Your Disposable Stethoscopes

STOP! Effective Immediately: Do not discard your stethoscope. Follow the instructions below for cleaning your stethoscope between patients and safely reusing.

1. Decontamination

Use the hospital-approved disinfectant that is on your unit after each use and between patients.



- o Wet Contact Time: 1 minute
 - No sporicidal claim
 - Not for use for Cdiff Rooms/patient equipment



Follow the disinfectant contact time.



Why are we doing this?

Currently, disposable stethoscopes are in high demand and short supply, both locally and globally.



> Clorox Germicidal Bleach Wipes

- o Sporicidal
- Wet Contact Time
 - Cdiff: 3 minutes
 - Bacteria/Virus: 1 minute
- Used for all Cdiff room/patient equipment

Masking

Universal Masking: Is in effect at all URMC locations, and requires all faculty, staff, visitors and most patients to wear a mask in all locations, though mask type and when to wear differs based on location (Inpatient Care Area, Outpatient Patient Care Area, Other Areas). Tips on how to wear and care for a mask are also outlined below.

Inpatient Care Area**

- Faculty, staff and students: Must wear a surgical mask while in any common or shared areas of the inpatient care area.
 - Masks may be removed for socially distanced eating, or if you are alone in your private office (masking should resume if someone enters your office).
- Visitors: Must wear a face mask while in any common or shared areas of the
 facility. The mask may be either surgical or cloth and must cover both the mouth and the
 nose.
- Patients: Should wear a surgical mask in the presence of others, if they are able to
 mask themselves. This applies when any health care worker or visitor enters the room,
 and when patients leave their rooms.

Exceptions:

- Patients should remain masked, if they can tolerate it, while in a shared room during the period that testing results are pending. The curtain should always be drawn between patients.
- If patients are not able to place a mask on themselves, or to tolerate the mask, staff should not attempt to place a mask on the patient unless it is required for transportation of a patient on droplet precaution.

Outpatient Patient Care Area

- Faculty, staff and students: Must wear a surgical mask while in any common or shared areas of the patient care area.
 - Masks may be removed for socially distanced eating, or if you are alone in your private office (masking should resume if someone enters your office).
- Patients and visitors: Must wear a surgical mask or cloth face covering at all times in the facility.

Other Areas

- Faculty, staff and students: Must wear a surgical mask or cloth face covering while in any common or shared areas.
 - Masks may be removed for socially-distanced eating, or if alone in a private office.

FAQs about Universal Masking

Why was this decision made?

We know that the coronavirus spreads mainly person-to-person. The primary means of transmission is through respiratory droplets from a sneeze or cough that land on a surface (i.e., doorknobs, phones, countertops) that another person touches, and then rubs their nose or mouth. Droplets from a coughing or sneezing person within a few feet away can also land directly on the mucous membranes of the nose or mouth. This is why frequent hand washing and hand sanitizers are so strongly encouraged. Masks also prevent the virus on your hands – or dispersed from a cough – from reaching your nose and mouth. In summary, masking is an important step to reduce the risk of inadvertent exposure among co-workers, with our patients, our family and friends, and our community.

Can you explain to me what the difference is between droplets and aerosols?

When we talk about respiratory droplets, we're talking about mucus-like drops from a sneeze or a cough that contain the virus. These drops can travel several feet in the air before gravity pulls them down a few seconds later and they land on a surface. Research shows the coronavirus can survive on surfaces for several hours. That's why there's so much attention paid to washing your hands, not touching your face, and keeping six feet apart from others.

Aerosols are particles held in the air by physical and chemical forces. Fog is a good example of an aerosol; water droplets are suspended in air for hours or more, depending on factors like heat or humidity. While research studies have suggested that the coronavirus can be aerosolized under laboratory conditions, airborne spread does not play a major role in transmission.



Face Shield re-use

• Click the link below to review face shield re-use:

https://vimeo.com/405886665/aa7ab89fa8

- Click the link below to review PPE Mask Fit Check and Face Shield:
- https://vimeo.com/402522399/b8f353c55b

