



**American
Red Cross**

ARC SAC Advisory Hand Hygiene for First Aid Providers

Scientific Advisory Council

Overall Recommendation:

First aid:

As part of an overall program to improve hand hygiene practices of Certified Lay Responders and the Lay Community Responder:

- Educate individuals regarding the types of care activities that can result in hand contamination and the advantages and disadvantages of various methods used to clean and dry their hands as noted in the Scientific Review on Hand Hygiene.

Prior to rendering care to others or to self*, the Certified Lay Responder and the Lay Community Responder:

- For visibly soiled hands, first wash with soap and water.
- For not-visibly soiled hands, use hand rub, wash with soap and water, or both
 - When using soap and water, wet hands first with water, apply an amount of product recommended by the manufacturer, and rub hands together vigorously for at least 15 seconds, covering all surfaces of the hands, giving added attention to finger nails and jewelry. Rinse hands with water and dry thoroughly with a disposable towel. Use towel to turn off the faucet.)
 - When using an alcohol based hand rub, use an amount of gel recommended by the manufacturer; rub thoroughly over all surfaces of the hands, including nail areas and between fingers until product dries.
- Soap and alcohol-based handrub should not be used simultaneously (VII)
- Maintain a barrier (i.e., don gloves designed for first aid use [i.e., vinyl, nitrile] [CDCError! Bookmark not defined., p. 33])
 - A dressing, or extra clothes placed between provider and the victim's body fluids can serve as an improvised barrier.
 - Take care not to touch with the gloves any unclean object (including self) except for the first aid care location.

** The majority of first aid rendered is of non-life threatening nature, allowing for pre-care hand cleansing. If the situation (i.e., life threatening situation) or resources do not allow (i.e., disaster, no clean water) for all steps to be taken, the first aid provider should modify them as needed (ex, if no running water, continue use of hand gel or other waterless cleaning agent, or if no cleaning agents maintain a barrier with the cleanest materials available).*

During care:

- Wash hands or use gel and change gloves after rendering care for one victim and before rendering care for another victim.
 - Remove gloves by turning them inside out and dispose of them properly.
- Avoid touching one's own eyes, nose, and mouth while giving care. Avoid eating during first aid.

Post-care:

- Clean up the immediate vicinity to prevent secondary contamination of others or objects
 - Dispose of dressings, bandages, sharps, gloves and soiled clothing safely and correctly, while continuing to wear gloves.
 - Place waste materials inside a plastic bag, and then place that bag inside another plastic bag. Tie both securely. Do not place in rubbish bin. Seek advice from your local health department or EMS on disposal options.
- After removing gloves (or if no gloves were available):
 - Wash hands with soap and water thoroughly or use a waterless gel if the hands are not visibly soiled and no soap and water are available.

Special situations exist when no advanced professional care will be rendered, for example minor injuries or delayed help situations (i.e., wilderness, disaster).

- Hand hygiene is a priority that is difficult in the absence of large amounts of clean running water. Having resources to filter/ disinfect water or having waterless hand sanitizers is important in disaster kits and first aid kits.
- The CDC **Error! Bookmark not defined.** found that Hand-Hygiene Antiseptic Agents that contained a concentration 60%–95% alcohol were excellent as well as fast acting in reducing Gram-positive bacteria, Gram-negative bacteria, Mycobacteria, Fungi, Viruses. Soap and water cleaning is recommended if there is possible exposure to spores (ex. *Bacillus anthracis*).
- The use of hand sanitizers is recommended only as a part of a hand hygiene regimen and **not** for use in wound cleansing.

Questions to be addressed:

In a first aid situation (scene safety, unknown medical history of patient(s), limited resources & training, & time), what is the “best” practice of hand hygiene for the Certified Lay Responder and the Lay Community Responder?

(Alternatives when ideal can’t be met.)

Introduction/Overview:

Hand hygiene guidelines have been available for health care workers for many years. The American Red Cross Scientific Advisory Council is recommending improved hand hygiene practices, for first aid providers (professional and lay), in order to reduce the transmission of pathogenic microorganisms. Additional recommendations for hand sanitizing, skin care and glove use are also provided.

Summary:

The recommendations are based on the CDC’s work, as no contrary literature was noted after 2002. Since 2002, the SARS & pandemic flu possibilities have heightened the role of good hygiene in thwarting the spread of disease. In 2009 the WHO issued Guidelines on Hand Hygiene² which are consistent with recommendations made in the ARC SAC Advisory. The American Red Cross should train Certified Lay Responders and Lay Community Responders in the methodology of Universal Precautions, using appropriate personal protective equipment, and adapting resources for responding appropriately to different patient and scene needs.

When no advanced professional care will be rendered in first aid scenarios, for example minor injuries or delayed help situations (i.e., wilderness, disaster) proper hand hygiene elevates in priority. Having access to large amounts of clean water and soap is often difficult in disaster or wilderness settings. Having resources to filter/ disinfect water or having waterless hand sanitizers is important in disaster kits and first aid kits.

¹ Centers for Disease Control and Prevention. Recommendations of the Healthcare Infection Control Practices Advisory Committee and the HICPAC/SHEA/APIC/IDSA Hand Hygiene Task Force: Guideline for Hand Hygiene in Health-Care Settings. 2002: Oct. 51(RR16);1-44 <http://www.cdc.gov/mmwr/PDF/rr/rr5116.pdf> accessed 3/13/06.

² World Health Organization, WHO Guidelines on Hand Hygiene in Health Care, WHO, Geneva, Switzerland, 2009, http://whqlibdoc.who.int/publications/2009/9789241597906_eng.pdf.