

Double gloving prevents exposure to pathogens in OR

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(HealthDay) -- Double gloving during surgery reduces the risk for transmission of bloodborne pathogens to medical personnel as well as minimizing the transfer of health care-associated infections to patients, according to a study published in the March issue of the *AORN Journal*.

Denise Korniewicz, Ph.D., R.N., of the University of North Dakota in Grand Forks, and Maher El-Masri, Ph.D., R.N., of the University of Windsor in Canada, gathered information on <u>operating room</u> glove use by 702 providers (<u>medical residents</u>, registered nurses, attending physicians, surgical fellows, and surgical technologists) at two major medical centers and one <u>trauma center</u> during a 24-month period. Gloves were collected, coded, and tested following 4,580 events or surgeries.



The researchers note that 471 participants provided views about double gloving, with the <u>majority opinion</u> being favorable and 27.4 percent of respondents thinking double gloves were not needed. However, 36.7 percent thought double gloving was uncomfortable, 31.8 percent believed it caused numbness or tingling of the hand, 39.5 percent said it decreased sensation, and 25.3 percent believed double gloves decreased work efficiency. Of 37,794 gloves tested, 8,723 pairs were in the category of double gloves and the rate of visible defects was 0.3 percent in the inner glove, compared with a 1.3 percent defect rate found in single-glove usage.

"The frequency of seeing blood on the hand after surgery was greater with single gloving than with double gloving, and the frequency of changing gloves during surgery was significantly higher among those who double gloved with an indicator glove system versus double gloving alone," the authors write. "We recommend that surgical health care providers who experience difficulty with double gloving try to overcome these issues by using gloves that fit comfortably or are sized correctly for both the inner and outer pair."

More information: Abstract

Full Text (subscription or payment may be required)

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