

१०० वर्षों तक स्वस्थ. सुखी व सम्पन्न जीने के लिए





JAIPUR, E-19, New light Colony, Gopal Pura Mod, Under Bhaskar Flyover Contact No.: 95726-95726, Email ID: shuddhihospital.jaipur@jeenasikho.co.in

Ref. No	Dated O.L.	08/21	 .

NC14/ HIC 3 A: Surveillance activities both active and passive needs to be appropriately directed for monitoring infection control and prevention practices. E.g. Surveillance checklist

> We are strictly following every step of hygiene, be it patient hygiene or employee hygiene, we closely monitor hygiene and infection control, both active and passive and maintaining this through surveillance check list (hand hygiene observation checklist) & follow it religiously





सुखी व सम्पन्न जीने के लिए





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Hand Hygiene

Pathogenic organisms from colonized and infected patients (and sometimes from the environment) transiently contaminate the hands of staff during normal clinical activities and can then be transferred to other patients. Hand transmission is one of the most important methods of spread of infectious agents in health care facilities. Proper hand hygiene is an effective method for preventing the transfer of microbes between staff and patients. Increasing hand-washing compliance by 1.5 - 2 folds would result in a 25-50-% decrease in the incidence of healthcare associated infections.

Wash hands with plain or antimicrobial soap and water or rub hands with an alcohol-based formulation before handling medication or preparing food

Hand hygiene must be practiced with five steps:

- 1. Before touching a patient.
- 2. Immediately before performing a clean or aseptic procedure, including handling an invasive device for patient care, regardless of whether or not gloves are used.
- 3. Promptly after contact with body fluids, excretions, mucous membranes, non-intact skin, or wound dressings regardless of whether or not gloves were used.
- 4. After touching a patient and his/her immediate surroundings, even when leaving the patient's side.
- 5. After contact with inanimate objects (including medical equipment and furniture) in the immediate vicinity of the patient.

Perform hand wash when hands are visibly dirty.

Hand Scrub

1. Hand scrub with medicated soap or hand rub with alcohol-based formulations - Either method is suitable for the prevention of treatment infection. The combined effect - rapid action at the beginning and inhibition of regrowth of bacteria under the gloved hands - is best achieved by using an alcohol-based soap











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STEPS FOR HAND PREPARATION -

Steps before starting treatment hand preparation -

- Keep nails short and pay attention to them when washing your hands most microbes on hands come from beneath the fingernails.
 - Do not wear artificial nails or nail polish.
 - Remove all jewellery (rings, watches, bracelets) before entering the procedure room
 - . Wash hands and arms up to elbows with a non-medicated soap before entering the procedure room area or if hands are visibly soiled
 - Clean subungual areas with a nail file. Nailbrushes should not be used as they may damage the skin and encourage shedding of cells. Nailbrushes, if used, must be sterile and used only once. Reusable autoclavable nail brushes are available commercially.

Protocol for scrub with a medicated soap -

Start timing. Scrub each side of each finger, between the fingers, and the back and front of the hand for two minutes.

- Proceed to scrub the arms, keeping the hand higher than the arm at all times. This helps to avoid recontamination of the hands by water from the elbows and prevents bacterialaden soap and water from contaminating the hands.
- Wash each side of the arm from wrist to the elbow for one minute.
- Repeat the process on the other hand and arm, keeping hands above elbows at all times. If the hand touches anything except the brush at any time, the scrub must be lengthened by one minute for the area that has been contaminated.
- Rinse hands and arms by passing them through the water in one direction only, from fingertips to elbow. Do not move the arm back and forth through the water.
- At all times during the scrub procedure, care should be taken not to splash water onto therapy attire.











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Protocol for surgical scrub with an alcohol-based preparation –

Start timing. Use sufficient product to keep hands and forearms wet with the hand rub throughout the procedure.

- After application of the alcohol-based product, allow hands and forearms to dry thoroughly before donning sterile gloves.
- If hands are visibly soiled, wash hands with plain soap before surgical hand scrub.

Training and compliance for hand-hygiene needs to be monitored. Availability of hand rubs, Soaps hand towels and water should be ensured. Hand hygiene training programme for doctors, nursing staff, and housekeeping staff needs to be done regularly for each category of staff. Hand hygiene compliance need to be monitored







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Date-	TO	98	22	Doctor		Doctor Therapist		Therapist			
Name C		Designation		Before Contact with Patient	After Contact with Patlent	Before Therapy Procedure	After Therapy Procedure	Staff Signature			
				WASH	SCRUB	WASH	SCRUB	1 -			
Rahul Sharma	Sr. C	onsu	ltant	<u></u>		V	L/	Pehr Dun			
Alok Kumar	Cor	nsulta	ant	V	~	~	~	Jen			
Himanshu	Cor	nsulta	ant			V		Himor			
Neha Bansal	Cor	nsulta	ant		V		~	Mel			
Manish Kumawat	N	lursin	g		V	<u></u>	V	flow			
Kavindra Kumar	Th	erap	ist	V		~	V	Jangy			
Rohini Pandey	Th	erapi	ist			V	V	Tohinker			
Rajesh	Th	erapi	ist	V	<u></u>			Lunger			
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WASH: Wash hands with medicated soap // SCRUB: Wash hands with alcohol based soap