Introduction

This frequently asked questions (FAQ) provides answers to common questions health care providers have about glove use and hand hygiene. Hand hygiene and gloves are important because they reduce hand contamination, prevent cross-contamination, and protect from infection.

The term “patient/resident” in this FAQ may also refer to clients receiving health care in other settings.

Q1. Why do I need to wear gloves?

Gloves are worn as a barrier to reduce the spread of germs that cause infections, prevent health care workers from exposure to blood, body fluids and contaminated environments, and to prevent injury (e.g. when handling chemicals).

Q2. When do I need to wear gloves?

Appropriate use of personal protective equipment (PPE) such as gloves, is based on the type of interaction with the patient/resident, the environment and the task that will be done. Gloves must be worn if hands will come in contact with blood, body fluids, non-intact skin or contaminated equipment and environmental surfaces. They must be put on just prior to the activity for which they are indicated. Gloves may also be required as part of Additional Precautions, or for protection from chemicals such as cleaning or disinfecting products.

Q3. When do I need to change my gloves?

Gloves are single use PPE and must never be washed or re-used. After completion of the task, gloves must be removed immediately and disposed of in a waste receptacle. Gloves must also be removed or changed when moving from a contaminated body site to a clean site of the same patient/resident. Dispose of gloves immediately if damaged, (e.g. tears or holes). It is important to clean your hands when changing gloves in between tasks, and between patients/residents.

Q4. Do I still need to clean my hands if I wear gloves?

Gloves provide a barrier against blood and body fluids, however hand contamination can still happen. Because gloves are not completely free of leaks, and tears/punctures can occur, hands must be cleaned before putting on gloves and after glove removal. Hands can also become contaminated during glove removal. Refer to the safe removal technique for instructions.
Q5. Is using alcohol-based hand rub (ABHR) on gloves an effective practice?

No! Never clean gloves with anything. ABHR is intended to be used for cleaning and disinfecting hands and should never be used to clean gloves. Use of ABHR on gloves can damage the glove material and create openings for germs to pass through.

Q6. Should two pairs of gloves (doubling gloving) be used?

Double gloving is not recommended for routine patient/resident care activities in a health care setting. Double gloving may reduce your ability to use your hands to perform certain tasks, cause discomfort and skin breakdown. Double gloving may also lead to missed opportunities for hand hygiene and increase the risk of contaminating yourself, others, or the environment. There are certain high risk tasks where double gloving may be indicated, but it should not be used for routine activities.

Q7. How do I maintain good skin health while wearing gloves?

It is important to ensure that your hands are clean and dry before putting on gloves, and only use gloves when indicated (i.e., risk assessment and Additional Precautions requirements). Select the correct size of gloves appropriate for the task, and remove gloves immediately after completing the task. Use lotion provided by your workplace to keep your hands moisturized and healthy. Refer to Protecting Your Hands Fact Sheet for Health Care Providers for additional tips on hand care.

Cotton glove liners may be used to assist in the management of occupational contact dermatitis. Refer to PHO’s Occupational Dermatitis webpage for additional glove selection resources.
Citation


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