

**DEPARTMENT:** Infection Control

**POLICY:** IC - 351

**SUBJECT:** Aseptic Technique

**PURPOSE:** Aseptic technique is an integral part of infection control. Asepsis is the absence of disease-producing organisms. Aseptic (sterile) techniques are those practices, which help to reduce the transmission of pathogenic organisms from one person or place to another.

**RESPONSIBILITY:**

- All Staff
- Infection Control

**POLICY:**

1. Aseptic techniques are used in the operating room, emergency room, radiology department, ICU, patient rooms, and clinics.
2. Aseptic techniques are used when performing any invasive procedure, e.g., insertion of an intravenous/central line, indwelling catheterization, or sterile dressing changes.
3. The following principles are to be applied in any area or procedure where sterility is required (surgical services follows specific guidelines set forth by AORN perioperative standards and recommendation):
  - a. Remove all contaminated materials (e.g. soiled linen, dressings, and excretions) away from patient.
  - b. Hands must be washed prior to procedure.
  - c. All articles used for the procedure must be sterile. If there is any question regarding the sterility of an item, consider it non-sterile and discard the item.
  - d. Don sterile gloves and/or gown, and mask, as required.
  - e. Sterile gloved hands are to be kept in view, not dropped below waistline or raised above shoulder level.
  - f. Sterile gowns are considered sterile only from the waist to shoulder level in front, including sleeves.
4. Persons who are designated as “sterile” touch only sterile items. Persons designated as “non-sterile” touch only items that are not sterile.
5. Establish a sterile field when performing procedures (e.g. spinal tap, suturing lacerations, dressing changes, wound irrigations, central line insertion) that require aseptic technique. All sets and trays should have an inner wrapper, sterile towel, or drape which can be used for this purpose. If not, use a sterile towel.
  - a. Prepare the sterile field immediately prior to use. An unattended sterile field and exposure to air increase the risk of contamination.
  - b. Keep sterile field and sterile supplies in view at all times. This helps prevent accidental contamination. Never turn your back to a sterile field.

- c. Only the top of a sterile field is considered sterile. Do not reach across the field. Never pass an unsterile item across a sterile field. Keep the area dry. Wetness with bleed through contaminates the field. Use impervious drapes.
  - d. Sterile solutions will be poured from unopened/new containers into receptacles on the sterile field only in the presence of the operator. All medication or solutions on the sterile field will be labeled.
  - e. Fixatives will NOT be placed on the sterile field.
  - f. Keep sterile items away from non-sterile items.
    - i. Establish an area away from the field for contaminated items.
    - ii. Check packages of IV tubing/extension tubing. Most are only sterile inside, along the fluid path, and should not be placed on the sterile field.
  - g. When the procedure is finished, remove and discard all disposables. The operator is responsible for properly discarding all sharps.
6. Dressing changes: Non-sterile gloves may be worn when removing soiled wound dressings. Wash hands before donning sterile gloves and applying new dressing.

**REVIEW AND REVISION STATEMENT:**

This policy will be reviewed and revised as necessary and at least annually by the Infection Control Practitioner, Physician Advisor, FNP, and the CEO.  
(original document date 10-1993).