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**OPERATING ROOM POLICY AND PROCEDURE**

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**NO: OR-IC 1.02**  
**APPROVAL DATE:**  
**EFFECTIVE DATE:**

**SUBJECT: Gowning and Gloving Technique**

**OBJECTIVE**

To prevent contamination to the surgical wound and help control infection via aseptic principles.

**POLICY**

Perioperative nursing staff will conduct proper aseptic technique of gowning and gloving during sterile surgical procedures.

**PROCEDURE**

1. Gowning: To don the gown, the scrub person:

- a. Will set up gown and gloves on a separate area, away from the sterile back table.
- b. Lifts the folded gown directly upward from the sterile package.
- c. Steps back from the table into an unobstructed area.
- d. Carefully locates the neckband and holds the inside front of the gown just below the neckband with both hands.
- e. Allows the gown to unfold while keeping the inside of the gown toward the body without touching the sterile exterior of the gown with bare hands (NOTE: If the gown does not unfold completely, then the circulating nurse may assist by pulling down the unfolded bottom inside the gown).
- f. Holds the hands at shoulder level and slips both arms into the armhole simultaneously.

2. Gloving:

- A. **Closed Glove Technique-** the scrub person's hands remain inside the sleeves and should not touch the cuffs. The closed glove technique should not be used when changing one or both gloves because once the hand has been passed through the cuffs, cuffs are contaminated.
  - a. Keeps both hands within the cuff so that the hands do not touch the cuff edges.
  - b. Grasps the folded cuff of the left glove with the right hand.
  - c. Holds the top edge of the cuff in the left hand above the palm.

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- d. Places the palm of the glove against the palm of the left hand- the glove fingers point up the forearm.
  - e. Grasps the back of the cuff in the right hand and turn it over the open end of the left sleeve and hand while holding the top of the left glove and underlying gown sleeve with the covered right hand.
  - f. Pulls the glove over the extended left finger onto the wrist by pushing the hand through the glove until it completely covers the cuff of the glove.
  - g. Gloves the right hand in the same manner by reversing the above steps.
  - h. Inspects the gloves for integrity after donning.
- B. **Open Glove Technique-** the scrub person's hands slide all the way through the sleeves out beyond the cuffs. When a glove must be changed without assistance during a surgical procedure, the open-glove technique is used.
- a. To change **one glove** during the procedure using the open-glove technique, the scrub person:
    - 1) Steps away from the sterile field.
    - 2) Extends the contaminated glove away from the sterile field so that the circulator, using exam gloves to protect his/her hands, can remove it.
    - 3) Lifts the new sterile glove under the cuff with the uncontaminated gloved hand.
    - 4) Inserts the hand into the glove and pulls it on, leaving the cuff turned well down over the hand and avoiding inward rolling of the cuff. The bare hand does not touch the outside of the glove.
    - 5) Rotates the arm and pulls the cuff of the glove up and over the sleeve cuff, letting the gloved fingers touch only the outside of the other glove.
  - b. To change **both gloves** during a procedure using an open-glove technique, the scrub person:
    - 1) Follows instructions 1 and 2 above.
    - 2) Picks up the left glove cuff, touching only the edge of the cuff with his or her right thumb and index finger.
    - 3) Pulls the glove onto the left hand and leaves the glove cuff turned down.
    - 4) Picks up the right glove with the gloved left hand, keeping the gloved fingers under the folded cuff.

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- 5) Slides the right hand fingers inside the right glove cuff and pulls the glove onto the right hand while avoiding inward rolling of the cuff.
- 6) Pulls the right glove cuff over the sleeve cuff by rotating the arm.
- 7) Places the gloved right-hand fingers under the folded left glove cuff, rotates the arm, and pulls the left glove cuff over the sleeve cuff.

**C. Double-Gloving Technique-** Perioperative nursing scrubbed personnel should wear two pairs of surgical gloves during surgical and other invasive procedure. Wearing two pairs of gloves helps to reduce glove perforations to the inner glove, preventing microbial transfer from the surgical team member to the patient or transfer of potentially infectious material from the patient to the surgical team member.

- When double gloves are worn, the perforation indicator system should be used. It is composed of a colored pair of surgical gloves worn beneath a standard pair of gloves.

### 3. Assisted Gowning and Gloving

1. Assisting gowning- The scrub person may assist another member in drying, gowning, and gloving by:
  - a. Opening the towel that the other member will use to dry his/her hands.
  - b. Laying the towel on the team member's hand without touching his/her hands.
  - c. Holding the gown at the neckband and carefully unfolding it.
  - d. Keeping the hands on the outside of the gown, forming a protective cuff of the neck and shoulder area as the person being gowned holds both arms outstretched.
  - e. Offering the inside of the gown to the other member so he or she can slip his or her hands into the sleeves.
  - f. Releasing the gown when the team members' hands are in the sleeves.
2. Assisted gloving- To glove another team member, the scrub person always gloves the other person's right hand first. The scrub person:
  - a. Picks up the glove with his/her fingers under the cuff.
  - b. Holds the palm of the glove toward the person being gloved.

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- c. Stretches the cuff to open the glove and holds his or her thumbs out to keep them from touching the other team member's bare hands.
  - d. As the other person inserts his or her hands into the glove, exerts upward firm pressure making sure the hand does not go below the waist.
  - e. Unfolds the inverted glove cuff over the cuff of the sleeve.
  - f. Gloves the left hand with the assistance of a team member by repeating the steps.
  - g. Hold the tie as the other team member turns to secure wraparound sterile gown when it is used.
3. Assisted re-gloving- When a team member other than the scrub nurse contaminates a glove during the surgical procedure, the circulator, using exam gloves so that his or her hands are protected, will grasp the outside of the glove and pull it off inside out. The scrub person then regloves the team member as described above in assisted gloving.
- a. The options for the scrub nurse who needs to change gloves are to: remove both gown and gloves, have another team member assist in regloving, or use the open-glove technique.
  - b. The closed-glove technique cannot be used to reglove. In closed gloving, the hand passes through the cuff of the gown, contaminating the edge of the cuff. This would cause the outside of the new glove to be contaminated.

### 4. Removing Gown and Gloves

At the end of the procedure, the gown is always removed before the gloves to prevent cross contamination of the wearer's scrub attire. The circulator can assist by unfastening the neck and back closures of the gown. The scrub person:

1. Grasps the shoulders of the gown, pulls it downward from the shoulder and off the arms, and turns the sleeves inside out.
2. Folds the contaminates surface of the gown on the inside and rolls it away from the body.
3. Discards the rolled gown in the appropriate receptacle.

As the gown comes off, it usually turns the cuffs of the gloves down. To remove the gloves, the wearer uses a glove-to-glove and then a skin-to-skin technique. This approach protects hands from the contaminated glove. The scrub person:

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1. Grasps the under cuff of the left glove with the gloved fingers on the right and pulls it off inside out.
2. Slips the ungloved fingers of the left hand inside the right glove and slips it off inside out.
3. Discards the gloves in the appropriate receptacle.
4. Performs hand hygiene.

Removing the gloves after removing the gown prevents the bare hands from contamination that would usually occur from handling the soiled gown.

**5. Maintaining a Sterile Field:**

The surgical team should take precautions to avoid contamination and maintain the sterile field. The hands should be kept above the waist and insight at all times.

The sterile areas are:

1. The front of the gown from the table level or sterile field to two inches below the neck.
2. The sleeves from two inches above the elbow to the cuff.
3. The surgical gloves.

The underarms are considered non-sterile. The back of the gown is not considered sterile even if it is the wraparound style. If any part of the sterile attire becomes contaminated, immediate corrective steps must be taken (e.g. if a glove becomes contaminated, it must be changed immediately). Once the original gloves are donned, the gown cuffs should be considered contaminated because the scrubbed hand passed through them.



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Date

6/15/20



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6/15/2020

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**References**

1. Association of Perioperative Registered Nurses (AORN). Sterile Technique Guidelines for Perioperative Practice. 2020.

**Rescission Date**

February 2017  
November 2013  
February 2007  
October 2004  
November 2001  
December 1998

**Policy Owner-** Robin Garrett, Senior Director, Perioperative Services