

# Healthcare Attire: Scrubs and Uniforms

**Note:** If specific program protocols vary from the general recommendations provided in this BPR, refer to, and follow department specific recommendations.

Terms in bold are defined in the **Definitions** section.

If you have any questions or comments contact IPC at [ipcsurvstdadmin@ahs.ca](mailto:ipcsurvstdadmin@ahs.ca).

## Best practice recommendations

The aim of this document is to reduce the risk of cross-transmission of pathogens on healthcare attire.

1. Alberta Health Services (**AHS**) **issued attire**, including AHS provided scrubs, uniforms, lab coats and warm-up jackets, is provided to users in authorized areas by exchange cart, through linen rooms, scrub dispensing equipment or a combination of these methods.
  - 1.1 Don freshly laundered attire upon entry to the unit, e.g., attire is protected from contamination and changed if contamination occurs.
    - 1.1.1 Determine the use of cover-up attire, e.g., lab coats based on the practice setting. For example:
      - Within surgical settings non-scrubbed personnel wear a closed long-sleeved jacket to confine bacterial shedding. The jackets are changed and laundered daily.
      - Visitors spending a limited time in the operating room don one-piece coveralls or cover gowns before entry.
    - 1.2 When attire is visibly soiled and at the end of each shift:
      - 1.2.1 Discard single-use attire.
      - 1.2.2 Place reusable attire into a designated soiled laundry hamper.
    - 1.3 Do not wear or take AHS issued attire outside of the facility premises.
      - 1.3.1 Change attire worn outdoors, for any reason, upon re-entry to restricted or semi-restricted surgical areas due to potential contamination of the attire.
  2. Follow [routine practices](#) including [hand hygiene](#), [point-of-care risk assessment](#), and [personal protective equipment](#).
    - 2.1 Wear **clean** attire.
    - 2.2 Protect attire from exposure to blood and body fluids by wearing a gown during activities likely to cause splashes of fluids or contact with blood or body fluids.
      - Make sure the gown covers from neck to knees to wrist.
      - Tie gown at the back of neck and waist.
      - Remove soiled gown after use and:
        - place in waste container if disposable;
        - place in linen bag if reusable; and
        - perform hand hygiene.
  3. Regularly launder **personal attire** in a hot water wash cycle, followed by a cycle in the dryer. For example:
    - 3.1 Launder uniforms or lab coats that come in contact with the patient or **patient environment** after daily use and when visibly soiled.
    - 3.2 Launder lab coats with no contact with the patient, or the patient environment weekly and when visibly soiled, e.g., hang lab coats before contact with the patient on a designated coat hook.

### Definitions

**AHS issued attire** means attire issued for performing duties within the Alberta Health Services facilities and includes scrubs, uniforms, lab coats and warm-up jackets. Staff wear AHS issued attire in designated areas as required by department policy, including, but not limited to:

- Surgical settings and sterile supply;
- Critical care including all ICUs, e.g., NICU, PICU;
- Cardiac catheterization/angiography/neurovascular invasive procedure labs;
- Medical device reprocessing departments;
- Endoscopy;
- Nutrition, Food, Linen and Environmental Services;
- Emergency rooms;
- Respiratory;
- Diagnostic Imaging;
- Morgue.

**Patient environment** means the space extending about 2 metres around the patient, wherein microorganisms are predominantly from the patient.

**Personal attire** means attire, excluding AHS issued attire, worn by healthcare providers to perform duties within a healthcare setting.

**Clean** means laundered for each shift, free of visible contamination and in good repair.

### References

1. Bearman, G., Bryant K., Leekha S., Mayer J., Munoz-Price L.S., Murthy R., Palmore T., Rupp ME., White J. 2014. Expert Guidance: Healthcare Personnel Attire in Non-Operating Room Settings. *Infection Control and Hospital Epidemiology*. 35(2): 107-121. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4820072/>.
2. Operating Room Nurses Association of Canada (ORNAC). 2017. The ORNAC Standards, Guidelines, and Position Statements for Perioperative Registered Nurses. 13<sup>th</sup> Edition. Author. Toronto.
3. Palmore T., Bearman G. 2018. Guide to Infection Control in the Hospital: Chapter 60: Healthcare Personnel Attire in Non-Operating Room Settings. International Society for Infectious Diseases. Retrieved from [https://www.isid.org/wp-content/uploads/2018/04/ISID\\_InfectionControl\\_Chapter60.pdf](https://www.isid.org/wp-content/uploads/2018/04/ISID_InfectionControl_Chapter60.pdf)
4. Spruce L. 2016. Surgical Attire- A Matter of Preference or Evidence? *ORNAC Journal*. March 2016. 34(1):14-9, 25-31.

### AHS documents available on onsite

Respiratory Services Standard. 2016. Personal Appearance of Staff. Calgary Zone.

Perioperative Services. 2017. Dress Code in the Surgical Suite. RDRHC DTH NURS – III-22.

Glenrose Rehabilitation Hospital. 2018. Site Dress Code Information Sheet & Frequently Asked Questions (FAQ).

K-Bro. 2013. Laundry and Linen Services Guide.

LES Dress Code. 2016. Practice Support Document Standard. Linen and Environmental Services.

Nutrition and Food Services. 2012. Department Standard.

South Health Campus. 2013. Service Expectations for Linen Services. Director Linen Services. Calgary Zone.

Version	Date (YYYY-MM-DD)
Created	2019-05-01
Updated	
Revised	2020-08-26