

IFPN Guideline for The Use of Protective Eye Wear

INTRODUCTION:

Healthcare workers are at risk through procedures that expose them to harmful body-fluids/ pathogens and patients are at risk due to their weakened and compromised immune system. With the implementation of Standard Precautions into the health care setting, it has become the responsibility of the employee and the employer to set standards and to implement protocols that will protect the caregiver and the receiver of care against undue exposure to bloodborne pathogens.

Employers and employees should be knowledgeable on the available Health and Safety regulations, in the Country or Province where they practice. The health care setting is prone to labor accidents involving the eyes due to the biological, chemical and physical risks, to which employees are exposed.

DEFINITIONS:

Universal precautions

A set of precautions designed to prevent transmission of HIV, HBV, and any other bloodborne pathogens, and body fluid, when providing first aid or health care. Under universal precautions, blood and certain body fluids of all patients are considered potentially infectious.

Standard Precautions

This is isolation precaution that synthesize the major features of body substance isolation and universal precautions to prevent a variety of organisms, and was developed for use in hospitals.

The implementation of Standard Precautions will protect the caregiver and the patient against transmission, and reduce the specific risk of contamination by bloodborne pathogens. Education in these preventative measures will provide caregivers with the methodologies to protect themselves against contamination by using the appropriate protective equipment. Facilities should provide employees and those who utilize the services of their facility with the appropriate Personal Protective Equipment (PPE). PPE may include, but is not limited to the following: protective barriers or clothing such as overshoes, fluid-resistant gowns, gloves, masks and protective eyewear. When working or when exposed to blood or any body fluid, double gloving and eye-shields are recommended.

GUIDELINE FOR THE USE OF:

GUIDELINE STATEMENT NUMBER	DATE RELEASED	DATE REVIEWED	REVIEW FREQENCY	DATE TO REVIEW POLICY
1009	2000	2007, May 2019	Every 4 years	May 2023



Protective eyewear

It is recommended that Healthcare Providers wear protective eyewear /faceshields during/when:

- in the scrub position;
- in the circulating position;
- the possibility of injury is increased, for example, during laser surgery and inadvertent splashes;
- there are exposures of mucous membranes of the mouth nose and eyes;
- there is exposure to splashes / sprays of blood and body-fluids; or
- during the collection of tissue, blood or body fluid specimens

Quality of Eyewear

- Protective eyewear must meet the basic safety requirements.
- Material must be resistant to puncturing, non-fogging, and have a lens that shapes to the contours
 of the face.
- Must be free of sharp edges and fit snuggly over the eyes nose and ears of the user.
- Fit as tightly as possible to the forehead/ brow and side of the eye.
- Extend down and over the mask to prevent splashes going up under the eyewear.
- Must be scratch-free and easily decontaminated.
- Reusable (preferably).
- If disposable, used according to manufacturer instructions.
- Visors /faceshields must be attached to masks and extend to the users' forehead.
- Visors/faceshields must fit snugly around the forehead and extend over the top rim of the mask

PREVENTION OF EXPOSURE

The perioperative practitioner should adhere to the following:

- Practice general infection control principles.
- Participate in appropriate training programs/and ongoing education programs.
- Develop risk management programs, policies, and protocols for prevention of exposure.
- Do continuous reporting of exposure/adverse events.
- Have access to preventative immunization programs.
- Be referred to follow-up counselling and treatment after exposure.
- Have free access to anti-retroviral medication.
- Review reporting systems regularly.
- Review of risk management programs continuously.
- Follow facility, region or national regulations surrounding the use, type and wearing of protective eyewear.
- Participate in activities, program and initiatives that raise awareness of splash prevention and compliance with recommended practices.

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- Have a process for health care providers to follow when a splash does occur and implement a plan of action based on the patient assessment of risk.
- Follow-up mechanism of incidents and support for workers who have been exposed.

Care of Eyewear

- Regular visual inspections of eyewear to ensure that lenses clean, clear, unscratched and intact.
- Cleaned after use, according to manufacturers instructions.
- Stored in a safe place, where it cannot be scratched.
- If disposable discarded following manufacturers recommendations.

References:

- ACORN (2018) Australian College of Perioperative Nurses: **Standards for Perioperative Nursing in Australia.**
- AfPP (2016) Association for Perioperative Practice: Harrogate UK: **Standards and Recommendations for Safe Perioperative Practice.**
- AORN (2019) American Operating Room Nurses Association: Denver USA: **Guidelines for Perioperative Practice.**
- ORNAC (2017) Operating Room Nurses Association of Canada: Standards for Perioperative Nursing Practice.

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