



# USER INSTRUCTIONS

<b>SIZE</b> <b>Code</b>	<b>Small</b> <b>6001</b>	<b>Medium</b> <b>6002</b>	<b>Large</b> <b>6003</b>	<b>X-Large</b> <b>6004</b>
				
Scan for product info				

## RATIONALE FOR USING MEDICAL GLOVES

Intended for use in medical field to for two main reasons:

1. To reduce a user's risk of cross contamination when conducting medical examinations, diagnostic and therapeutic procedures and when handling contaminated material.
2. To reduce the risk of germ dissemination to the environment and of transmission from the health-care worker to the patient and vice versa, as well as from one patient to another.

### Limited use of gloves when possible:

Health-care workers should be trained in how to plan and perform procedures according to a rational sequence of events and to use non-touch techniques as much as possible in order to minimize the need for glove use and change.

Note: Gloves should be used during all patient-care activities that may involve exposure to blood and all other bodily fluids (including contact with mucous membrane and non-intact skin), and during contact precautions and outbreak situations.

**Caution:** Gloves do not provide absolute protection against hand contamination, as pathogens may gain access to hands via small defects in a glove or by contamination of hands during glove removal.

## GLOVE USE

Gloves are effective in preventing contamination of health-care workers' hands and helping reduce transmission of pathogens dependent upon two critical factors:

- They are used appropriately
- Timely hand hygiene is performed using hand rubbing with alcohol or hand washing with soap and water.

### Safe glove use involves:

- Using the correct technique for donning gloves that prevents their contamination
- Using the correct technique for doffing gloves that prevents health-care workers' hands becoming contaminated (see figure below on the technique for donning and doffing non-sterile examination gloves)

Note: Double gloving can be used as a precautionary measure for procedures with contact with large amounts of blood or body fluids. Doubling gloves can also provide protections when removing a contaminated outer glove.

**Caution:** Wearing gloves is in no way a substitute for hand hygiene, including rubbing hands with alcohol-based products or by handwashing with soap and water before donning gloves and after doffing gloves

## OTHER PRECAUTIONS

1. User should dry hands before putting the gloves on.
2. Before usage, inspect the gloves for any defect or imperfections.
3. Use of petroleum-based hand lotions or creams may adversely affect the integrity of nitrile gloves and some alcohol-based hand rubs may interact with residual powder on health-care workers' hands.
4. Use at least 1 pair of gloves per patient and procedure, these are disposable gloves.
5. When wearing gloves, change or remove gloves: during patient care if moving from a contaminated body site to another body site (including a mucous membrane, non-intact skin or a medical device within the same patient or the environment)
6. Do not let chemical substances get under the gloves through the cuff.
7. If a chemical substance reaches the skin, wash it away immediately with plenty of water with soap.
8. If the gloves get punctured, torn or broken during their use, take them off and put on the new ones.
9. Avoid using gloves that are dirty as they may cause irritation leading to skin inflammation or more serious damages.
10. The gloves should not be used in contact with open fire or to protect against any sharp tools.
11. The gloves are not intended for protection against welding, electric shock protection, ionizing radiation or from the effect of hot or cold objects.
12. The chemical penetration resistance has been assessed under laboratory conditions from samples taken from the palm only (except in case where the glove is equal to over 400mm – where the cuff is tested also) and relates only to the chemical tested and to the tested specimen. It can be different if the chemical is used in a mixture.
13. This information does not reflect the actual duration of protection in the workplace and the differentiation between mixtures and pure chemicals.
14. It is recommended to check that if gloves are suitable for intended use as the conditions at a workplace may differ from the test conditions, depending on the temperature, abrasion and degradation.
15. When used, protective gloves may provide less resistance to a dangerous chemical due to changes in physical properties. Movements, snagging, rubbing, degradation caused by the chemical contact etc., may reduce actual use time significantly.
16. If the integrity of a glove is compromised (e.g., punctured), it should be changed as soon as possible followed with hand hygiene.

## INDICATIONS FOR USE

Gloves must be worn according to precautions mentioned in this USER INSTRUCTIONS.

- A. The use of contaminated gloves caused by inappropriate storage, inappropriate moments and techniques for donning and removing, may also result in germ transmission.
- B. Also, the use of gloves when not indicated represents a waste of resources and does not contribute to a reduction of cross-transmission.

Indications for use arises under the follow scenarios:

- Gloves On**
- Before a sterile procedure
  - When anticipating contact with blood or another body fluid, regardless of the existence of sterile conditions and including contact with non-intact skin and mucous membrane
  - Contact with a patient (and his/her immediate surroundings) during contact precautions.

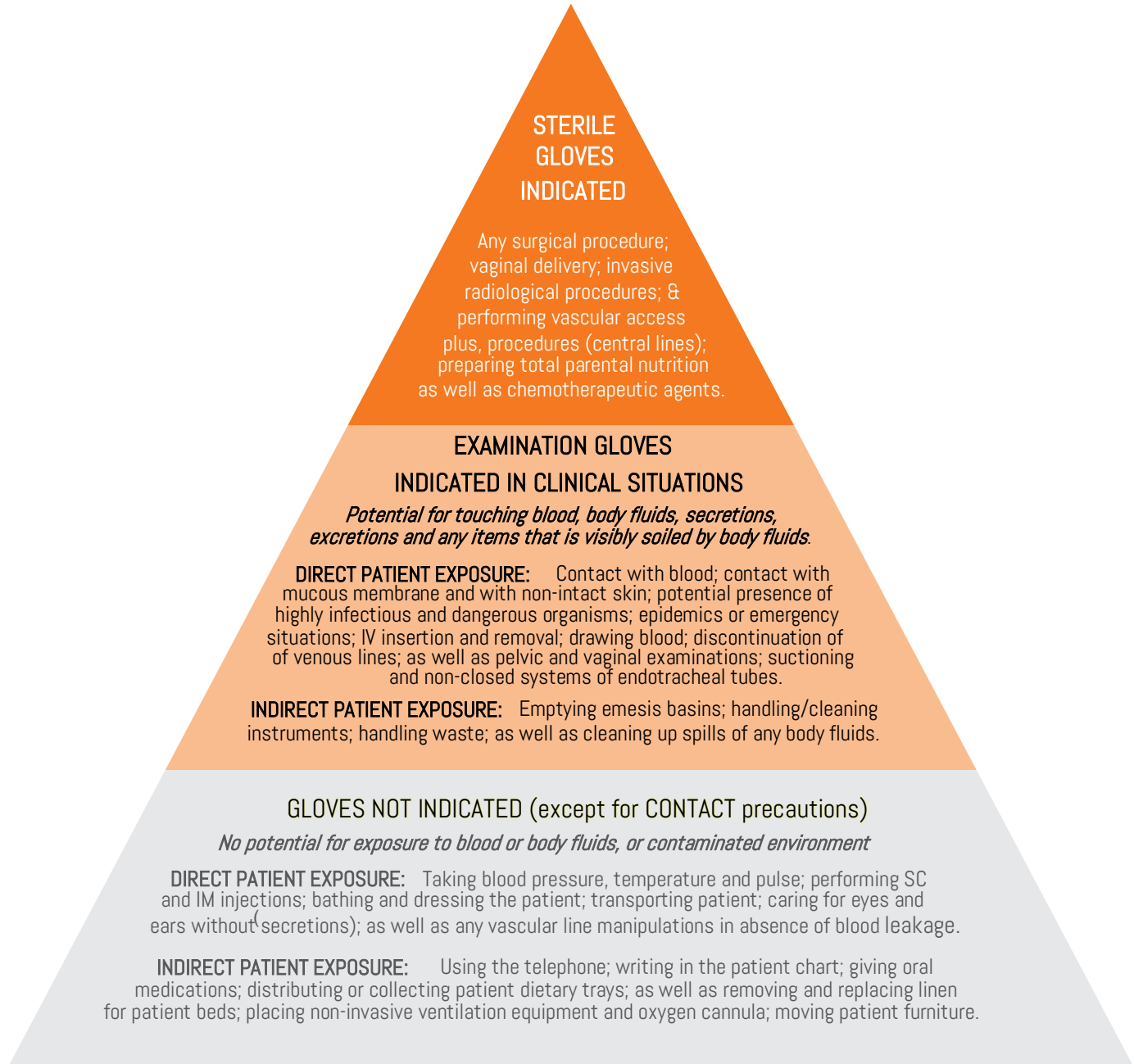
- Gloves Off**
- As soon as gloves are damaged (or non-integrity suspected)
  - When contact with blood, another body fluid, non-intact skin and mucous membrane has occurred and has ended
  - When in contact with patient and their surroundings or a contaminated body site on a patient has ended
  - When there is an indication for hand hygiene.

- C. When an indication for hand hygiene precedes a contact that also requires glove usage, hand rubbing with alcohol or hand washing should be performed before donning gloves.
- D. When an indication for hand hygiene follows a contact that has required gloves, hand rubbing with alcohol or hand washing should occur after removing gloves.
- E. When an indication for hand hygiene applies while the health-care worker is wearing gloves, then gloves should be removed to perform hand rubbing with alcohol or handwashing with soap and water.

## GLOVE PYRAMID

Used to aid the user in decision making on when to wear (and not wear) gloves, this Glove Pyramid details some clinical examples in which gloves are not indicated, and others in which examination or sterile gloves are indicated.

Hand hygiene should be performed when appropriate regardless of indications for glove use.



*Glover Pyramid, courtesy World Health Organization*

## INAPPROPRIATE GLOVE USE:

When an indication for hand hygiene precedes a contact that also requires glove usage, hand rubbing with alcohol or hand washing with soap and water should be performed before donning gloves.

When an indication for hand hygiene follows a contact that has required gloves, hand rubbing with alcohol or hand washing with soap and water should occur after doffing gloves.

The use of contaminated gloves caused by inappropriate storage, inappropriate movements and techniques for donning and doffing, may also result in germ transmission. It is recommended to store the gloves in dry place, between 10°- 30°C and to protect them against direct sunlight and fluorescent light. Recommended relative humidity in the room where the gloves are stored is 60 ±20%. Keep the gloves in a distance of not less than 3 feet from heating devices, sources of fire and ozone. Do not keep in direct vicinity of solvents, oils, fuels and lubricants.

## RE-USE/REPROCESSING:

As medical gloves are single-use items, the reuse of gloves after decontamination or reprocessing are not recommended and should be avoided, even if it is common practice in many health-care settings with low resources and where glove supply is limited.

At present no standardized, validated and affordable procedure for safe glove reprocessing exists.

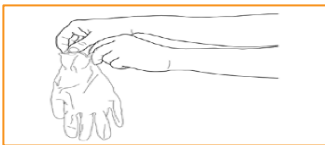
Every possible effort should be made to prevent glove reuse in health-care settings, such as educational activities to reduce inappropriate glove use, purchasing good quality disposable gloves and replenishing stocks in a timely manner.

Remove gloves after caring for a patient. Do not wear the same pair of gloves for the care of more than one patient.

## ILLUSTRATION OF CORRECTLY DONNING AND DOFFING REIGN GLOVES™



① Take out a glove from its original box



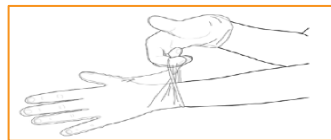
② Touch only a restricted surface of glove corresponding to the wrist \*at the top edge of the cuff.



③ Don the 1<sup>st</sup> glove from its original box.



④ Take the 2<sup>nd</sup> glove with the bare hand & touch only a restricted surface of glove corresponding to the wrist

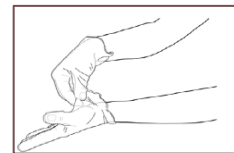


⑤ Avoid touching forearm skin with glove hand, turn extended surface of glove to be donned on the folded fingers of the gloved hand, thus permitting glove to 2<sup>nd</sup> hand

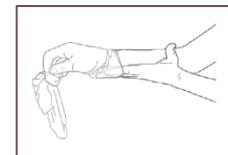


⑥ Once gloved, hands should not touch anything else that is not defined by indications and conditions for glove use.

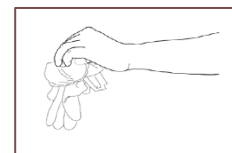
## How to Remove Gloves



① Pinch 1 glove at wrist level to remove it without touching skin of forearm, and peel away from hand, thus allowing glove to turn inside out



② Hold removed glove & slide fingers of ungloved hand on the inside between glove & wrist. Remove 2<sup>nd</sup> glove by rolling it down hand & fold into 1<sup>st</sup> glove



③ Discard removed gloves.