

Sterile Glove Application

● SKILL SNAPSHOT

Purpose

- Creates a sterile barrier on the hands without contaminating glove exteriors or the sterile field.

When to use

- Procedures requiring sterile technique such as catheter insertion, central-line care, sterile dressing changes, or invasive setup.

Supplies needed

- Correct-size sterile gloves; clean dry work surface; sterile field/PPE required for procedure.

● PREP + PATIENT SETUP

- Remove jewelry as policy requires; inspect hands and cover lesions.
- Perform hand hygiene and dry completely.
- Open all needed supplies before gloving; position package above waist on clean, dry

● VAULT TIP

- After gloving, park your hands together at chest level. It prevents most accidental contamination.

● STEP-BY-STEP

1. Check glove package integrity, size, sterility indicator, and expiration. Do not use a wet, torn, or opened package.
2. Open outer wrapper without touching inner package. Place inner package on clean, dry surface above waist.
3. Open inner wrapper by touching only folded paper edges; keep gloves on the sterile paper.
4. Identify dominant-hand glove. With nondominant bare hand, grasp only the inside folded cuff.
5. Lift glove without touching its exterior. Insert dominant hand, keeping cuff folded and fingers pointed away from unsterile surfaces.
6. With sterile dominant hand, slide fingers under the outside cuff of the second glove; touch only sterile exterior.
7. Lift second glove and insert nondominant hand. Keep sterile fingers away from bare wrist and skin.
8. After both gloves are on, interlace fingers above waist and away from the body to seat gloves.
9. Unfold/adjust cuffs by touching sterile exterior to sterile exterior only. Do not touch gown skin, package edges, or surfaces.
10. Keep hands in sight, above waist, and between shoulders. Never drop hands below the sterile field.
11. If contamination, tear, moisture, or uncertainty occurs, stop. Remove gloves, perform hand hygiene, and reglove with a new pair.
12. To remove after procedure, peel glove-to-glove, then skin-to-skin; discard and perform hand hygiene.

● SAFETY REMINDERS

- The inside cuff may be touched by the bare hand; glove exterior must remain sterile.
- One inch around an opened sterile field is considered contaminated.
- Moisture can cause strike-through contamination.
- When in doubt, change gloves.

● COMMON MISTAKES

- Touching glove exterior with bare fingers.
- Letting hands fall below waist.
- Reaching across an unsterile surface.
- Trying to ignore or "fix" contamination.

● DOCUMENTATION

- Usually documented within the sterile procedure.
- Sterile technique maintained.
- Break in technique and replacement supplies.
- Patient exposure/interventions if contamination occurred.
- Tolerance and procedure outcome.