

| <p align="center"><b>SBAR: Gloves for Administering Immunisations - January 2014</b><br/> <b>[Update to SBAR: ‘An evaluation of whether immunizers should wear gloves and whether vaccination sites should be cleaned if not visibly dirty’ (produced by HPS ICT March 2010)]</b></p> |   |
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| <b>Situation</b>  | Health Protection Scotland received an enquiry as to whether it is necessary for healthcare workers administering immunisations to wear gloves.   |
| <b>Background</b>   | <p>Health Protection Scotland’s Infection Control Team received a similar enquiry in 2010. An SBAR (‘An evaluation of whether immunizers should wear gloves and whether vaccination sites should be cleaned if not visibly dirty’) was produced in response to that enquiry.</p> <p>The 2010 SBAR reported that while there was no consensus in the scientific literature on this question, guidelines produced by both the World Health Organization (WHO) and the Centers for Disease Control and Prevention (CDC) stated that it is not usually necessary to wear gloves when administering immunisations.<sup>1;2</sup></p> <p>The following recommendations were made in the 2010 SBAR:</p> <ul style="list-style-type: none"> <li>• Gloves are usually unnecessary for immunisations.</li> <li>• When it is anticipated that there may be exposure to blood or body fluids gloves should be worn.</li> <li>• Gloves may also be worn to offer protection to healthcare workers from exposure to vaccination solutions; however delivery techniques such as the Z track injection technique may represent an effective alternative.</li> <li>• Gloves should be worn where advocated by the vaccine</li> </ul> |

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|                   | <p>manufacturer or by clinical consensus, for example as recommended by the CDC when administering smallpox vaccinations.</p> <p>This SBAR updates the 2010 SBAR to include more recently published evidence/guidance.</p>   |
| <b>Assessment</b> | <p>A search of the MEDLINE database using a search strategy similar to that used for the 2010 SBAR returned no relevant scientific literature on the topic published since 2010.</p> <p>The most up to date edition of the Department of Health “Green Book” still offers no recommendation on the use of gloves for administering immunisations.<sup>3</sup> The Royal College of Paediatrics and Child Health (RCPCH) position statement on injection technique has not been updated since its publication in 2002, so this institution also offers no specific recommendation on glove use for administering immunisations.<sup>4</sup></p> <p>The epic2 Guidelines were updated in 2013 with the publication of the epic3 Guidelines.<sup>5,6</sup> However the recommendation regarding glove use remains unchanged in the new guidelines – gloves must be worn for invasive procedures.<sup>5</sup> No definition of “invasive procedures” is provided in the Guidelines, so it is unclear whether this recommendation extends to administration of immunisations.<sup>5</sup></p> <p>In 2010, WHO published a toolkit on best practices for injections and related procedures that outlines indications for glove use in injection practice.<sup>7</sup> Specifically, the document states that gloves are not required for routine intradermal, subcutaneous and intramuscular injections if both the healthcare worker’s and the patient’s skin is intact.<sup>7</sup> The document further recommends that non-sterile, well-fitting, single-use gloves should be worn by the healthcare worker administering an injection: where there is a risk of contact with blood or body fluids; if the healthcare worker’s skin is not intact (e.g. through eczema or dry cracked skin); or if the patient’s</p> |

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|                       | <p>skin is not intact (e.g. through eczema, burns or skin infections).<sup>7</sup></p> <p>The CDC Advisory Committee on Immunization Practices (ACIP) published recommendations on immunisation in 2011.<sup>8</sup> The recommendations state that gloves are not required when administering vaccinations unless the person administering the vaccination is likely to come into contact with potentially infectious body fluids, or have open lesions on their hands.<sup>8</sup> There is a further recommendation that gloves, if worn, should be changed between patients.<sup>8</sup></p> <p>In summary, identified guidance published since 2010 is largely consistent with the guidance identified in the 2010 SBAR, and as such there is no significant change to the key existing recommendation that gloves are not normally required for administering immunisations. Guidance documents produced by WHO and CDC since 2010 recommend the use of gloves by healthcare workers administering immunisations if they have non-intact skin on their hands<sup>7,8</sup>; and WHO guidance recommends the use of gloves if the person receiving the immunisation has non-intact skin. As such, these recommendations are added to the recommendations outlined in the 2010 SBAR.<sup>7</sup></p> |
| <b>Recommendation</b> | <ul style="list-style-type: none"><li>• Gloves are not normally required for healthcare workers administering immunisations unless:<ul style="list-style-type: none"><li>○ It is anticipated that there may be exposure to blood or body fluids</li><li>○ They have non-intact skin on their hands</li><li>○ The person receiving the immunisation has non-intact skin</li></ul>Healthcare workers should wear non-sterile, single-use gloves in these circumstances.</li><li>• Gloves may also be worn to offer protection to</li></ul>   |

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|  | <p>healthcare workers from exposure to vaccination solutions; however delivery techniques such as the Z track injection technique may represent an effective alternative.</p> <ul style="list-style-type: none"><li>• Gloves should be worn where advocated by the vaccine manufacturer or by clinical consensus, for example as recommended by the CDC when administering smallpox vaccinations.</li></ul> |
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### **References**

- (1) Atkinson W, Wolfe S, Hamborsky J. Epidemiology and prevention of vaccine-preventable diseases. Washington D.C.: Centers for Disease Control and Prevention; 2009.
- (2) Hutin Y, Hauri A, Chiarello L. Best infection control practices for intradermal, subcutaneous, and intramuscular needle injections. Bulletin of the World Health Organization 2003;81(7).
- (3) Department of Health. Immunisation against infectious disease - updated version. London: Department of Health; 2013.
- (4) Royal College of Paediatrics and Child Health. Position statement on injection technique. London: Royal College of Paediatrics and Child Health; 2002.
- (5) Loveday HP, Wilson JA, Pratt RJ, Golsorkhi M, Tingle A, Bak A, et al. epic3: National Evidence-Based Guidelines for Preventing Healthcare-Associated Infections in NHS Hospitals in England. Journal of Hospital Infection 2014 Jan;86:Suppl-S70.
- (6) Pratt RJ, Pellowe CM, Wilson JA, Loveday HP, Harper PJ, Jones SR, et al. epic2: National evidence-based guidelines for preventing healthcare-associated infections in NHS hospitals in England. Journal of Hospital Infection 2007 Feb;65:Suppl-64.
- (7) World Health Organization. WHO Best practices for injections and related procedures toolkit. World Health Organization; 2010.
- (8) National Center for Immunization and Respiratory Diseases. General recommendations on immunization --- recommendations of the Advisory Committee on Immunization Practices (ACIP).[Erratum appears in MMWR Recomm Rep. 2011 Jul 29;60:993]. Morbidity & Mortality Weekly Report Recommendations & Reports 2011 Jan 28;60(2):1-64.