



Institution Name: Al Masarra Hospital					
Document Title: Policy and Procedure of Aseptic Technique					
Approval Process					
	Name	Title	Institution	Date	Signature
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Reviewed by	Noora Al Zadjali	HOD Infection Control	Al Masarra Hospital	24.5.2022	For :
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Acronyms:

AMRH	Al Masarra Hospital
CSSD	Central Sterile Supply Department
HCWs	Health Care Workers
HOD	Head of Department
PPE	Personal Protective Equipment
P&P	Policy & Procedure



Policy and Procedure of Aseptic Technique

1. Introduction

Aseptic technique is a practice designed to render and maintain objects and areas maximally free from microorganisms. Aseptic technique is used to keep the patient as free as possible from potentially pathogenic microorganisms when undertaking any clinical procedure. It is the policy that clinical procedures will be carried out using a high standard of aseptic technique or clean non touch technique with all appropriate sterile items being used for each procedure.

2. Scope

This document is applicable to all health care workers in Al Masarra Hospital (AMRH) whose work may involve invasive procedures; catheter and line insertion and care; wound dressing and other procedures requiring aseptic technique.

3. Purpose

3.1 To provide a standard on practices to reduce the number of microorganisms on hands, supplies and equipment during patient care practice to protect the patient from infection and to prevent the spread of pathogens.

4. Definitions

4.1 **Aseptic technique:** is a method employed to prevent contamination of wounds and other susceptible sites by potentially pathogenic organisms. An aseptic technique must be used during any procedure, which breaches the body's natural defences.

4.2 **Sterile:** means free from live bacteria or microorganism.

4.3 **Personal Protective Equipment (PPE):** refers to equipment worn to protect health care workers from and minimize exposure to blood borne pathogens during care giving.



5. Policy

5.1 The Infection Control Department of Al Masarra Hospital is dedicated to prevent contamination of wounds and other susceptible sites by potentially pathogenic organism thus aseptic technique must be maintained while dealing with open wounds or susceptible sites.

6. Procedure

6.1 Clean Technique (Medical Asepsis)

6.1.1 Use clean techniques for routine patient care procedures.

6.1.2 Prepare and organize equipment and supplies.

6.1.3 Reduce the number of skin microorganisms by adhering to proper hand hygiene practices.

6.1.4 Use clean or sterile single-use patient devices and equipment if available, or use reusable devices and equipment that have been properly cleaned and reprocessed.

6.1.5 Select an appropriate site on patient (isolate the area).

6.1.5.1 Prepare the patient's skin before the procedure by applying the hospital-approved antiseptic agent to the patient's clean skin.

6.1.5.2 Use correct skin preparation for the patient's body site.

6.1.5.3 Clean from the area that is clean to the area that is dirty.

6.1.5.4 Remove hair only when necessary; do so immediately before the procedure using clippers and **NOT** razors.

6.1.6 Use barrier techniques to reduce microbial transmission from patient to personnel.

6.1.6.1 Use a "**no-touch**" dressing technique to avoid the contamination of sterile supplies. Use sterile gloves or forceps for the application of dressings.

6.1.6.2 Wear a clean gown/apron to minimize the contamination of clothing.



6.1.6.3 Wear clean gloves to avoid direct contact with infectious materials.

6.1.7 Provide environmental controls to reduce microbial transmission.

6.1.7.1 Use negative-pressure rooms for patients with infectious agents that can be spread by airborne route.

6.1.7.2 Change the covers/sheets used on examination table, stretchers, or wheelchairs between patients.

6.2 Maintaining Asepsis

6.2.1 It is important to be fully prepared before starting any procedure.

6.2.2 Anticipate what is needed for the procedure.

6.2.3 Supplies required may include but are not limited to the following:

6.2.3.1 Clean trolley (tray)

6.2.3.2 Supplies (PPE, gauze, site prepping solutions)

6.2.3.3 Equipment (proper pack, size, type, amount)

6.2.3.4 Accessible disposal unit

6.2.3.5 Help (if required)

6.2.4 Avoid leaving the room/bedside to get supplies.

6.2.5 Follow the approved policy for the procedure being performed.

6.2.6 Change gloves (after removing old dressing and before applying clean dressing).

6.3 Other Recommendations to Maintain Asepsis

6.3.1 Clean and disinfect environmental surfaces routinely after each procedure.

6.3.1.1 Use clean equipment and supplies (mops, water, cleaning cloths).

6.3.1.2 Use detergent to remove soil.

6.3.2 Clean up body fluid spillage using hospital-approved disinfectant.

6.3.3 Dispose of all contaminated materials and supplies appropriately to avoid contaminating HCWs, patients and environmental surfaces.

6.3.4 Re processing of reusable equipment and surgical instruments must be done by the designated department.



6.3.5 Use special equipment for ventilation (e.g. high-efficiency particulate air filters or laminar air flow) when feasible.

7. Responsibility

7.1 Infection Prevention and Control Team Shall:

7.1.1 Update this policy and ensure that it represents best practice and is based on current evidenced based information.

7.2 Health Care Workers Shall:

7.2.1 Practice the aseptic technique according to the procedure mentioned above whenever come in counter with an open wound or susceptible site.

8. Document History and Version Control

Document History and Version Control			
Version	Description of Amendment	Author	Review Date
1	Initial Release	Siham Al Zadjali	January 2021
2	Review and Update	Siham Al Zadjali	April 2025
Written by	Reviewed by	Approved by	
Siham Al Zadjali	Noora Al Zadjali	Dr. Bader Al Habsi	

9. Related Documents

9.1 Appendix 1. Audit Tool



10. References

Title of book/journal/articles/ Website	Author	Year of Publication	Page
Infection Prevention & Control Manual.	GCC Centre for Infection Control. Ministry of National Guard. KSA	2013	201 - 203
Aseptic Technique	Association for Professionals in Infection Control (APIC) and Epidemiology	2009	Chapter 20



Appendices

Appendix 1. Audit Tool

Al Masarra Hospital
Infection Prevention & Control Department
Audit Tool

Department: _____ Date: _____

S.N.	Audit Process	Standard / Criteria	Yes	Partial	No	N/A	Comment
		A. STRUCTURE					
		Equipment and Supplies:					
1.	Observation	Are sterile single use items available?					
2.	Observation	Are color coded waste bags available (Black and Yellow)?					
3.	Observation	Is a site preparing solution available?					
4.	Observation	Are gauzes for site cleaning available?					
5.	Observation Interview	Is a negative pressure room available in case of Airborne disease?					
		Hand Hygiene Facilities					



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6.	Observation	Are antimicrobial soap and tissues available?					
7.	Observation	Is an antiseptic hand rub available?					
8.		Personal Protective Equipment (PPE):					
9.	Observation Interview	Are the PPEs available (Gown, apron, disposable gloves, and sterile gloves)?					
		B. PROCESS					
		Clean technique (medical asepsis):					
10.	Observation Interview	Is a clean technique for routine patient care procedures used?					
11.	Observation	Is the preparation and organizing of equipment and supplies needed done?					
12.	Observation Interview	Is the number of skin microorganisms reduced by adhering to proper hand hygiene practices?					
13.	Observation Interview	Are clean or sterile single-use patient devices and equipment if available or reusable devices and equipment that have been properly cleaned and reprocessed used?					
14.	Observation	Is an appropriate site on patient (isolate					



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		the area) selected?					
15.	Observation	Are barrier techniques to reduce microbial transmission from patient to personnel used?					
16.	Observation	Are environmental controls to reduce microbial transmission provided?					
		Maintaining Asepsis					
17.	Observation	Is the staff fully prepared before starting any procedure?					
18.	Observation	Does the staff anticipate what is needed for the procedure?					
19.	Observation	Does the staff avoid leaving the room/bedside to get supplies?					
20.	Observation	Does the staff follow the approved policy for the procedure being performed?					
21.	Interview Document review Observation	Does the staff change gloves (after removing old dressing and before applying clean dressing)?					
22.	Observation Interview	Is the environmental surfaces cleaned and disinfected routinely after each procedure?					
23.	Observation Interview	Are body fluid spillage cleaned up using hospital-approved					




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	Document review	disinfectant?					
24.	Observation Interview	Are all contaminated materials and supplies appropriately disposed of to avoid contaminating HCWs, pa					
25.	Observation Interview	Is the reprocessing of reusable equipment and surgical instruments done by the designated department?					
26.	Observation Interview	Is special equipment for ventilation (e.g. high-efficiency particulate air filters or laminar air flow) used when feasible?					



Appendix 2. Document Request Form

Document Request Form			
Section A: Completed by Document Requester			
1. Requester Details			
Name	Siham Al Zadjali	Date of Request	April 2022
Institute	Al Masarra Hospital	Mobile	93693628
Department	Infection Control and Sterilization Service	Email	siham.moht@hotmail.com
The Purpose of Request			
<input type="checkbox"/> Develop New Document	<input checked="" type="checkbox"/> Modification of Document	<input type="checkbox"/> Cancelling of Document	
1. Document Information			
Document Title	Policy and Procedure of Aseptic Technique		
Document Code	AMRH/IC/P&P/002/Vers.02		
Section B: Completed by Document Controller			
<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Cancelled	<input type="checkbox"/> Forward To:.....	
Comment and Recommendation:			
Name	Kunooz Al Balushi	Date	April 2022
Signature		Stamp	





Appendix 3. Document Validation Checklist

Document Validation Checklist .					
Document Title: Policy and Procedure of Aseptic Technique			Document Code: AMRH/IC/P&P/002/Vers.02		
No	Criteria	Meets the Criteria			Comments
		Yes	No	N/A	
1.	Approved format used				
1.1	Clear title – Clear Applicability	✓			
1.2	Index number stated	✓			
1.3	Header/ Footer complete	✓			
1.4	Accurate page numbering	✓			
1.5	Involved departments contributed	✓			
1.6	Involved personnel signature /approval	✓			
1.7	Clear Stamp	✓			
2.	Document Content				
2.1	Clear purpose and scope	✓			
2.2	Clear definitions	✓			
2.3	Clear policy statements (if any)	✓			
3.	Well defined procedures and steps				
3.1	Procedures in orderly manner	✓			
3.2	Procedure define personnel to carry out step	✓			
3.3	Procedures define the use of relevant forms			✓	
3.4	Procedures to define flowchart		✓		
3.5	Responsibilities are clearly defined	✓			
3.6	Necessary forms and equipment are listed	✓			
3.7	Forms are numbered	✓			
3.8	References are clearly stated	✓			
4.	General Criteria				
4.1	Policy is adherent to MOH rules and regulations	✓			
4.2	Policy within hospital/department scope	✓			
4.3	Relevant policies are reviewed	✓			
4.4	Items numbering is well outlined	✓			
4.5	Used of approved font type and size	✓			
4.6	Language is clear understood and well structured	✓			
Recommendation.....✓..... For implementation More revision To be cancelled.....					
Reviewed by: <u>Kunooz Al Balushi</u>			Reviewed by: <u>Ruvilee Ramel-Bueno</u>		

