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### Purpose/Goal

To provide the learner with knowledge of AORN's guidelines related to *Staphylococcus aureus* decolonization for urgent procedures, hand hygiene before donning gloves, hand hygiene before skin prep, and scrubbing by stroke versus timed method.

### Objectives

1. Discuss practices that could jeopardize safety in the perioperative area.
2. Discuss common areas of concern that relate to perioperative best practices.
3. Describe the implementation of evidence-based practice in relation to perioperative nursing care.

### Accreditation

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Amber Wood, MSN, RN, CNOR, CIC, FAPIC, has no declared affiliation that could be perceived as posing a potential conflict of interest in the publication of this article.

The behavioral objectives for this program were created by Helen Starbuck Pashley, MA, BSN, CNOR, clinical editor, with consultation from Susan Bakewell, MS, RN-BC, director, Perioperative Education. Ms Starbuck Pashley and Ms Bakewell have no declared affiliations that could be perceived as posing potential conflicts of interest in the publication of this article.

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## CLINICAL ISSUES

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## THIS MONTH

Performing *Staphylococcus aureus* decolonization for urgent procedures

Key words: decolonization, *Staphylococcus aureus*, MRSA, MSSA, mupirocin.

Hand hygiene before donning gloves

Key words: hand hygiene, glove, personal protective equipment.

Hand hygiene before skin prep

Key words: hand hygiene, skin prep, sterile task, aseptic task.

Scrubbing by stroke versus timed method

Key words: surgical hand rub, surgical scrub, stroke method, timed method.

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## Performing *Staphylococcus aureus* decolonization for urgent procedures

### QUESTION:

At our facility, patients undergoing an elective total hip replacement who test positive for *Staphylococcus aureus* complete a five-day decolonization protocol before surgery (ie, nasal mupirocin, chlorhexidine bath). Should we start patients undergoing urgent hip fracture repair with total hip replacement on a decolonization protocol in the immediate preoperative phase?

### ANSWER:

Consult with your infection preventionist to determine whether patients with unknown or no screening results, such as patients undergoing urgent or emergency procedures, should be decolonized for *Staphylococcus aureus*.<sup>1,2</sup> When making this collaborative decision with the perioperative team, the infection preventionist and health care epidemiologist should consider the patient population (eg, high-risk

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