Hygiene Practices when using shared equipment

Background
This notice applies to all UQ personnel (staff and students) who work with shared equipment. Shared equipment is used across all programs at the University. Examples include the use of laboratory microscopes, protective eyewear, UV viewing boxes and diving/snorkelling equipment. Shared equipment can be a potential source of infection transmission if adequate hygiene practices are not applied.

Transmission of infection
Infectious agents can be spread in a variety of ways, including:

- **Airborne** - coughs or sneezes release airborne pathogens, which are then inhaled by others.
- **Skin contact** - the transfer of some pathogens can occur through touch, or by sharing personal items
- **Contact with body fluids** - pathogens can be passed to another person’s body via cuts or abrasions, or through the mucus membranes of the mouth, nose and eyes.
- **Contaminated objects or food** – infectious pathogens can spread to food or other objects, via unclean hands or coughing or sneezing.

Personal hygiene practices when using shared equipment
The foundation of good infection control is to assume that everyone is potentially infectious. Infection control procedures relating to good personal hygiene include:

- **Hand washing** - the spread of many pathogens can be prevented with regular hand washing or through the use of an alcohol hand rub. Hands should be cleaned before and after touching laboratory surfaces or shared equipment and on removal of protective gloves.
- **Covering broken skin** - intact and healthy skin is a major barrier to pathogens. Any cuts or abrasions should be covered with a waterproof dressing.
- **Avoiding infectious disease transmission** – Persons with known infectious conditions such as influenza or common cold, eye or facial skin infections such as conjunctivitis, cold-sores or any other infectious skin lesions must not be permitted to use shared equipment whilst the condition remains potentially infectious.
- **Covering the nose and mouth with a tissue** when coughing or sneezing and ensure afterwards, hands are washed or gloves changed.
- **The use of an alcohol swab** impregnated - swabs containing 70% isopropyl alcohol to clean shared equipment before and after use. Alternatively* for surfaces that may be damaged by the application of alcohol can be thoroughly cleaned with soap and water and left to dry.

*For some specialised equipment, the manufacturer may have to be contacted for advice on the most appropriate method or cleaning solution to apply to specific equipment surfaces.

Recommendations:
Laboratory Managers and Supervisors at UQ must ensure that specific hygiene measures are in place for the use of shared equipment. Hygiene measures must be appropriate to the risk of infection transmission. All users of shared equipment must be advised to comply with the following instructions:

- Perform thorough **Hand cleaning** before and after skin contact with shared equipment.
- Clean shared equipment and PPE before and after use. Particularly those areas that may come into contact with mucus membranes of the eye, nose or mouth.
- Cover any skin cuts or skin abrasions with a waterproof dressing.
- Persons with infectious health conditions must avoid using shared equipment whilst remaining potentially infectious to others.