1. Introduction and Who Guideline applies to

1.1 Aseptic technique is an essential procedure aimed at protecting patients from infection during invasive procedures. This is achieved by minimising the presence of pathogenic micro-organisms as much as is practically possible. Aseptic Non Touch Technique (ANTT) is a specific type of aseptic technique with a unique theory and practice framework (Rowley et al 2010).

2. Guideline Standards and Procedures

2.1. ANTT should be practiced by all staff during any invasive procedures, these can include: cannulation, intravenous line assembly, phlebotomy, wound care and urinary catheterisation, these are examples not an exhaustive list. There are posters demonstrating how asepsis can be achieved at the end of the guideline (See pictorial guides at the end of the guideline pages 4-9). If hard copies are required, to be obtained from the print room at the Leicester Royal Infirmary, the contact details are, extension, 6415 or email LRI Print Room lri.print@cubiquitymedia.com

2.2. The Key Principles of ANTT are:

2.2.1. Always clean hands effectively

2.2.2. Non Touch Technique Always – Consider appropriate Personal Protective equipment

2.2.3. Take appropriate equipment precautions – clean equipment

2.2.4. Take appropriate steps to protect Key parts at all times

2.3. A - Always clean hands effectively - Hand Hygiene

2.3.1. Hands should be cleaned at a range of times in order to prevent Healthcare Associated Infections (HAI) (UHL Hand Hygiene Policy Trust reference: B32/2003)

2.3.1. Before patient contact

2.3.2. Before a clean/aseptic procedure

2.3.3. After body fluid exposure/risk

2.3.4. After patient contact

2.3.5. After contact with the patients environment

2.4. N – Non touch technique always - Personal Protective Equipment

2.4.1. Prior to the task a risk assessment must be undertaken to determine appropriate Personal Protective Equipment for the procedure. (Preventing Transmission of Infective Agents and Isolation UHL Policy Trust reference: B62/2011).

2.4.2. Sterile gloves must be worn when there is a potential or actual risk of a key part being touched during the procedure, for example, wound care or catheterisation

2.4.3. Non-Sterile gloves are worn where there is no risk of a key part being contaminated, for example, drug preparation, drug delivery, cannulation or phlebotomy.

2.5. T – Take appropriate equipment precautions - Aseptic Field

2.5.1. A clean working environment is essential to ANTT. Before an ANTT procedure begins the aseptic field must be prepared. This may be a plastic tray or a dressing trolley depending upon the task to be undertaken.

2.5.2. Before the procedure can commence the aseptic field must be thoroughly cleaned and disinfected, by either Chlor-Clean or Clinell wipes. It is essential that the aseptic field is allowed time to dry before starting the procedure to ensure that the disinfection process has been completed.

2.5.3. After the procedure, the same cleaning and disinfection should take place as described in 2.5.2. and the tray/trolley must be stored in a clean and dry area of the unit or ward.

2.6. T – Take appropriate steps to protect key parts at all times

2.6.1. Key parts are those parts of equipment that if contaminated pose an increased risk of the patient acquiring an infection.

2.6.2. Key parts may come into contact with the patient directly or indirectly via an infusion or connection.

2.6.2.1. For example, in intravenous therapy key parts, would be the fluid to be infused and the equipment that comes into contact with the fluid such as needles tips, syringe tips and needle free connectors.

2.6.2.1. For example, in wound care, the dressing pack, dressings and sterile gloves can be considered key parts.

2.6.3. If a key part becomes contaminated during a procedure then the contaminated item should be disposed of and a new one used.

2.6.4. Key sites are any parts that are connected to the patient.

2.6.4.1. For example: Wounds, when they are exposed without a dressing and insertion sites of venous access devices.

3. Education and Training

3.1. ANTT is currently taught by the clinical skills department as an integral element of any task which includes any invasive procedure to be undertaken

3.1.1. Examples include, phlebotomy, catheterization, taking blood cultures and intravenous drug administration**.**

3.2. All relevant staff must complete ANTT theory training which is available to staff on the e-uhl website as an e-learning package. (https://www.euhl.nhs.uk)

4. Monitoring Compliance

What will be measured to monitor compliance	How will compliance be monitored	Monitoring Lead	Frequency	Reporting arrangements
Training records of relevant staff completing the ANTT e-learning training on HELM	Report Run from HELM	Line Managers	Every six months	CMG Infection Prevention meetings

5. Supporting References

Epic3: National Evidence-Based Guidelines for Preventing Healthcare-Associated Infections in NHS Hospitals in England- A.Bak, A.Browne, R.J. Pratt,C.M. Pellowe,J.Prieto,H.P. Loveday, M.Golsorkhi, A.Tingle, J.A. Wilson , Journal of Hospital Infection (2013) 65S, S1–S64 available from:http://www.his.org.uk/files/3113/8693/4808/epic3_National_Evidence-Based_Guidelines_for_Preventing_HCAI_in_NHSE.pdf

National Institute for Health and Clinical Excellence (NICE) (2012) Infection prevention and Control of healthcare-associated infections in primary and community care. NICE clinical guideline 139

Rowley S and Clare S (2011) ANTT: a standard approach to aseptic technique. Nursing Times Vol 107 No 36

6. Key Words

ANTT

Aseptic Non-Touch Technique

Sterile Procedures

Key parts

CONTACT AND REVIEW DETAILS	
Guideline Lead (Name and Title) Debbie McMahon, Specialist Infection Prevention Nurse	**Chief Nurse** **DIPAC**
Details of Changes made during review: 2.5.2. Distel wipe changed to Clinell wipe	


ANTT™
Aseptic Non Touch Technique
Cannulation
In preparation area
Clean hands
Don non-sterile gloves
Clean tray and allow to air dry
Dispose of waste
Gather equipment
Clean hands
Prepare equipment
Clean hands
Go directly to the patient
Palpate vein
Don non-sterile gloves
Clean the skin with a 2% Chlorhexidine and 70% isopropyl wipe then allow to dry
DO NOT TOUCH THE SITE AGAIN
Insert cannula and cover with transparent semi-permeable dressing
Scrub the hub using 2% Chlorhexidine and 70% Isopropyl wipe, then allow to dry
Flush
Dispose of waste into the appropriate bin
Clean hands
N.B. Contact with blood or body fluid? Wash hands with soap and water
Clean tray, allow to air dry then store
Key Parts
University Hospitals of Leicester NHS
NHS Trust

ANTT™
Aseptic Non Touch Technique

IV drug administration

In preparation area


Clean hands


Don non-sterile gloves


Clean tray and allow to air dry


Dispose of waste


Gather equipment


Clean hands


Consider using non-sterile gloves


Prepare drugs

Go directly to the patient


Clean hands immediately prior to procedure


Don non-sterile gloves


Scrub the hub with a 2%Chlorhexidine and 70% isopropyl wipe then allow to dry
DO NOT TOUCH THE SITE AGAIN


Administer drugs


Dispose of sharps at point of use


Clean hands
N.B. Contact with blood or body fluid? Wash hands with soap and water

Clean the blue tray, allow to air dry then store

Key Parts

University Hospitals of Leicester NHS
NHS Trust

ANTT™
Aseptic Non Touch Technique

Phlebotomy

In preparation area


Clean hands


Don non-sterile gloves


Clean tray and allow to air dry


Dispose of waste into appropriate bin


Clean hands


Gather equipment


Prepare equipment

Go directly to the patient


Clean hands


Palpate vein


Don non-sterile gloves


Clean the skin with a 2% Chlorhexidine and 70% isopropyl wipe then allow to dry
DO NOT TOUCH THE SITE AGAIN


Collect sample


Dispose of waste in appropriate bin


Clean hands
N.B. Contact with blood or body fluid? Wash hands with soap and water

Clean tray, allow to air dry then store

Key Parts

University Hospitals of Leicester NHS
NHS Trust

ANTT™
Aseptic Non Touch Technique

Wound care

In preparation area


Clean hands


Don non-sterile gloves


Clean trolley


Dispose of waste into appropriate bin


Clean hands


Gather equipment

Go directly to the patient


Clean hands


Prepare equipment and expose wound


Clean hands

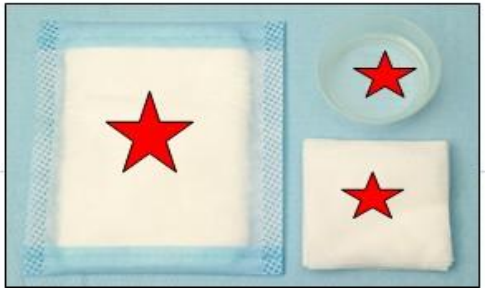

Don appropriate PPE and perform the procedure


Dispose of waste in appropriate bin


Clean hands
N.B. Contact with blood or body fluid? Wash hands with soap and water

Clean trolley, allow to dry then store

Key Parts



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ANTT™
Aseptic Non Touch Technique

Urinary catheterisation

In preparation area

Clean hands

Don non-sterile gloves

Clean trolley

Dispose of waste

Clean hands

Gather equipment

Go directly to the patient

Clean hands

Prepare Equipment and patient

Clean hands

Don appropriate PPE and then perform the procedure

Dispose of waste in appropriate bin

Clean hands
N.B. Contact with blood or body fluid? Wash hands with soap and water

Clean trolley, allow to dry then store

Key Parts

University Hospitals of Leicester NHS
NHS Trust

ANTT™
Aseptic Non Touch Technique

IV Line Assembly

In preparation area


Clean hands


Don non-sterile gloves


Clean tray with Chlor-Clean and allow to air dry


Dispose of waste in appropriate bin


Gather equipment and place around the tray


Clean hands


Prepare equipment

Go directly to the patient


Clean hands


Don non-sterile gloves


Scrub the hub using a 2% Chlorhexidine and 70% Isopropyl wipe then allow to dry


Attach IV line


Dispose of waste in appropriate bin


Clean hands
N.B. Contact with blood or body fluid? Wash hands with soap and water

Clean tray, allow to dry then store

Key Parts

University Hospitals of Leicester NHS
NHS Trust