



COLLEGE OF
PHYSICAL
THERAPISTS
OF ALBERTA

position statement

UNIVERSAL PRECAUTIONS/ROUTINE PRACTICES

Adherence to the most current Universal Precautions/Routine Practices is recommended at all times for the protection of both the physical therapist and the patient.

- ▶ Physical therapists¹ routinely use appropriate protection(s) (eg. gloves², masks³) to prevent skin and mucous membrane exposure when contact with a patient's blood or other body fluids is anticipated.
- ▶ Hands and other skin surfaces are washed immediately and thoroughly if contaminated with blood or other body fluids. Hands are washed immediately after gloves are removed.
- ▶ To minimize the need for emergency mouth-to-mouth resuscitation, mouthpieces, resuscitation bags, or other ventilation devices should be available for use in areas in which the need for resuscitation is predictable.
- ▶ Physical therapists who have exudative lesions, weeping dermatitis or any open lesion on hands should wear gloves when in direct patient contact or handling patient-care equipment. An open lesion that is not on the hands but is visible and could come into contact with patients should be covered.

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¹ Physical therapist, physiotherapist, physical therapy, physiotherapy, physiotherapie, physiotherapeute, PT and pht are official marks used with permission. The terms physical therapist and physical therapy are synonyms for physiotherapist and physiotherapy respectively.

² Gloves are worn for touching blood and body fluids, mucous membranes or non-intact skin, and when handling items or surfaces soiled with blood or body fluids. Gloves are changed after contact with each patient.

³ Masks and protective eyewear or face shields are worn during procedures that are likely to generate droplets of blood or other body fluids to prevent the exposure of mucous membranes of the mouth, nose and eyes. Gowns or aprons are worn during procedures that are likely to generate splashes of blood or other body fluids.