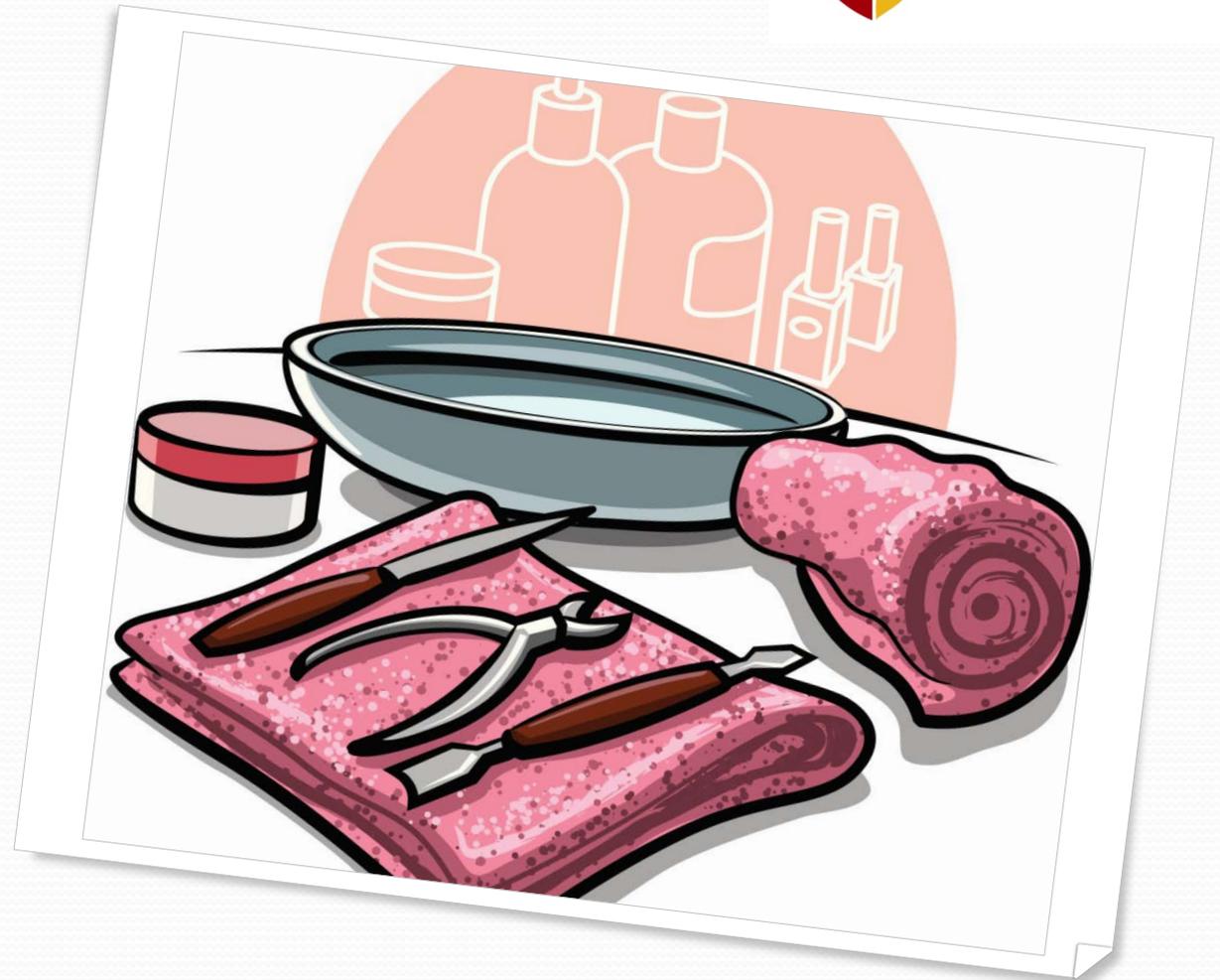


BASICS OF FOOT CARE



NORTH DAKOTA
DEPARTMENT of HEALTH





Purpose:
Keeping feet
healthy and pain
free while
preventing
infections.



Foot care equipment should be transported to the client in a clean container

Gather clean supplies for each client:

- foot basin
- towels
- Orange stick or cuticle pusher
- soap
- moisturizer
- gloves
- hand sanitizer
- nail clipper and/or nipper
- pumice file
- emery board
- Band-Aid



Personal Protective Equipment

Gloves are recommended to be worn throughout the procedure to prevent exposure to bacteria, fungi and viruses.

- Gloves MUST be worn if you or the client have cuts, open wounds/sores, blisters, or visibly infected skin on hands, feet, or nails.
- Gloves MUST be changed between clients and hands should not be washed with gloves on. If gloves are soiled, gloves should be changed.
- Gloves become a mode of transmission when not removed immediately after the task performed.
- Perform hand hygiene immediately after gloves are removed.





Mask, gown and face shield should also be available:

- Eye shields or glasses may be worn to protect the care provider from nail clippings.
- Disposable mask may be worn to protect against the possibility of inhaling organisms that may be aerosolized during filing of nails.
- A clean gown or apron may be worn if the foot of the client is positioned on the lap of the care provider, to protect their clothing.



PROCEDURE:

- Perform hand hygiene.
- Take foot care supplies to side of client.
- Apply gloves.
- Assess client's feet:
 - for any open areas
 - redness
 - darkened areas
 - blisters
 - plantar warts
 - trauma
 - loss of sensation, etc.



- Foot care should not be done if any areas of concern are observed and referral to physician should be arranged.



If foot soaks are done:

- A clean towel should be placed underneath the clean foot basin.
- Soak the client's feet in warm water with mild soap.
- Using a second clean towel, dry the feet completely, especially between and under toes.
- If individual lotions are not used, dispense lotion into a small cup for each client.





If foot soaks are not done:

- Place a clean towel under the foot of client.
- A new orange stick can be used to clean under the nails and remove dead cuticle/skin.
- Nails should be trimmed straight across, do not round corners.
- Use new (or dedicated) emery board to smooth any sharp edges.
- Use new (or dedicated) pumice file to remove dry skin on heels, bottom and side of foot.
- Apply lotion to feet.
- Assist with application of socks and/or shoes.
- Client should not walk barefoot.



Note: If any bleeding occurs, with gloves on, wipe affected area with a skin antiseptic and apply a new Band-Aid. Follow up to monitor the healing process.

- Discard disposable orange stick, emery board, pumice.
- Place towels in covered dirty linen container.
- Place all instruments taken to side of client in designated dirty instrument container.
- Remove gloves.
- Perform hand hygiene.

Towels may be laundered using regular laundering procedure.



- ❑ If ointments or anti-hemorrhagic agent (such as styptic) are used on nicks, the product needs to be applied to a clean orange stick or applicator and then applied to keep product container clean.
- ❑ If multiple people have access to products, single use applications would be best to decrease potential for contamination of original container.





Shared clippers at nurse's stations, on treatment carts, in shower rooms, etc. being wiped with an alcohol wipe are NOT acceptable.

Items such as files, emery boards, pumices, or other items with coarse surfaces can not be disinfected and should be discarded after use or dedicated to one client.

Dedicated instruments and implements can not be kept with new or clean and disinfected instruments and implements, and should be the responsibility of the client and brought with them for each pedicure.



- ❑ Electric nail file (such as Dremel) heads can NOT be disinfected and should not be used unless the device has the ability to use disposable heads.
- ❑ The unit itself needs to be cleaned between uses with a disinfectant wipe following product recommendations, as well as equipment manufacturer's recommendations.
- ❑ **Only individuals trained in using these devices should be using them, as the use of this device increases the risk of cuts and nicks to the clients skin.**





The overall goal of infection prevention practices for foot care is to eliminate the risk of the transmission of pathogens between clients and between clients and the care provider.

Foot trauma during the procedure should be avoided to minimize the risk of acquiring infections for the client.

All health care workers providing foot care should be aware of protocols for the prevention of transmission of bloodborne pathogens.

<http://www.cdc.gov/niosh/topics/bbp/>



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DEFINITIONS:

☐ **Cleaning:** is the removal of foreign material (e.g., soil, and organic material) from objects and is normally accomplished using water with detergents or enzymatic products. Thorough cleaning is required before disinfection and sterilization because inorganic and organic materials that remain on the surfaces of instruments interfere with the effectiveness of these processes. Also, if soiled materials dry onto the instruments, the removal process becomes more difficult and the disinfection or sterilization process less effective or ineffective.

☐ **Disinfection:** is the process that eliminates many or all pathogenic microorganisms, with the exception of bacterial spores, from inanimate objects.



CLEANING FOOT CARE EQUIPMENT

- Don gloves.
- All items, including the wash basin and the container used to transport instruments, should be cleaned in warm water with a detergent to remove organic matter and rinsed, before they are disinfected.
- Any instrument taken to the side of the client, even if not used, must be reprocessed.
- A brush should be used on hinged items and on dried on debris under water.
- Remove gloves and perform hand hygiene.



DISINFECTION

During nail care, small microscopic nicks in the skin can occur, creating the possibility of being contaminated with a bloodborne pathogen, not visible to the naked eye.

- ❑ All re-use equipment such as clippers/nippers, and foot basins should be cleaned and disinfected, **at a minimum**, with a hospital grade EPA registered disinfectant. A Tuberculocidal agent should be considered.
 - With spray disinfectants and wipes, covering of all surfaces and contact time can not always be guaranteed.
 - Any item that is known to be contaminated with blood and/or body fluids **must** be sterilized prior to reuse or disposed of.
 - The steps of cleaning and disinfecting can not be combined! Always remember these are **two** separate processes.



Before using any EPA-registered disinfectant product, users must read the label:

EPA-registered, hospital grade disinfectant must have an EPA registration number and state that it is a hospital grade disinfectant.

- Is it safe for the use intended?
- Will it damage the surfaces cleaned with it?
- What germs does it kill?
- What is the dilution ratio of the product? (How do I mix it correctly?)
- Is it effective in hard (tap) water or do I need to mix it with distilled water?



❑ Tuberculocidal product examples: Clorox bleach, some quaternary ammonium compound products, Barbicide Plus –

- Some products may cause staining to metal instruments with prolonged exposure.

- Before using a disinfectant, make sure it has been approved by your Infection Control Department/Committee for use.

❑ Studies have shown 70% Isopropyl alcohol is effective against Hepatitis B with a 20 minute contact time- but is not tuberculocidal, at this strength.



Staff **MUST** be trained in the proper reprocessing procedure and proper use of disinfectants.



- Make sure to adhere to concentration and contact/dwell times of disinfectants. **Approximates are not acceptable!**
- Follow product recommendations for storage temperature of solution and change solution as directed.
- All hinged instruments must be open.
- Do NOT add items once timing has begun.
- Remove instruments with gloved hand or lifter.
- Allow instruments to air dry on a clean towel.
- instruments that have been clean and disinfected need to be kept in a clean covered container until use.**



DECONTAMINATION



CLEANING
& Rinsing



DISINFECTION



USE OR STORAGE

A monitoring process
should be put in
place to make sure
short cuts are not
taken.





- ❑ When planning large number foot clinics, you must ensure that you have enough instrument sets and processing time to meet the client number.
- ❑ **Each client having their own dedicated equipment is always best!**
 - **Dedicated** Instruments that are not available for others use, at a minimum, should be cleaned with soap and water and dried between care routine.
- ❑ Educate the client on importance of not sharing their nail care items with others and keeping them clean and dry .





- Decontamination of pedicure chairs and home foot spa tubs need to be done according to manufacturer's instructions and state cosmetology regulations.
- They are not recommended for use with large foot care clinics due to reprocessing time required.



Your client's health and safety is always the priority.

One set of instruments for one client, one time!

Then follow proper decontamination procedure, using board of cosmetology regulations, Disinfectant manufacturer's recommendations and recommendations from the North Dakota Department of Health.



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Reference Sites:

<http://www.epa.gov/oppad001/chemregindex.htm>

http://www.spc.int/phs/pphsn/activities/picnet/SECTION_7.pdf

www.cdc.gov/hicpac/Disinfection_Sterilization/6_odisinfection.html

www.cdc.gov/hicpac/Disinfection_Sterilization/19_ooglossary.html

http://www.cdc.gov/hicpac/Disinfection_Sterilization/3_2contaminatedDevices.html

www.epa.gov/oppo0001/factsheets/footspa_disinfection.htm

www.education.nh.gov/instruction/school_health/documents/disinfectants.pdf

<http://www.infectioncontrolday.com/articles/2001/01/general-guidelines-for-use-of-chemical-disinfecta.aspx>

www.fda.gov/MedicalDevices/ProductsandMedicalProcedures/GeneralHospitalDevicesandSupplies/ucm208018.htm

<http://allnurses.com/foot-care-nursing/foot-care-infection-69660.html>

www.fda.gov/MedicalDevices/DeviceRegulationandGuidance/ReprocessingofSingle-UseDevices/UCM133514

<http://files.nailsmag.com/Handouts/NAILSDisinfectionChart.pdf>

www.cdc.gov/mmwr/preview/mmwrhtml/rr5217a2.htm#fig

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