

Clean Hands Paper Tool

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If you have any questions or comments regarding this information please contact the Infection Prevention & Control Hand Hygiene Program at: Hand.Hygiene@ahs.ca.

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|--|------------------|--------------|
| Zone: <input type="checkbox"/> Calgary <input type="checkbox"/> Central <input type="checkbox"/> Edmonton <input type="checkbox"/> North <input type="checkbox"/> South | Facility: | Unit: |
| Reviewer: | Date: | Time: |

| Health Care Provider | | Hand Hygiene Moment Select one (1) | | | | Hand Hygiene Observation Select one (1) | | | Gloves | Additional Parameters | | | | Canned Comment |
|--|---------------------------------|---------------------------------------|---------|---------|-------------|--|------|------|--------|-----------------------|-----------|-------|---------|---|
| List of Healthcare Providers when using Clean Hands Paper Tool | Health Care Provider Descriptor | BEF-PAT/ENV | BEF-ASP | AFT-BFL | AFT-PAT/ENV | WASH | ABHR | MISS | GLOVES | NAILS | BRACELETS | RINGS | NO SOAP | List of Canned Comments when using Clean Hands Paper Tool |
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Original date: February 2019
Revised date: November 2020

