

THE REIGN OF THE RUBBER GLOVE.*

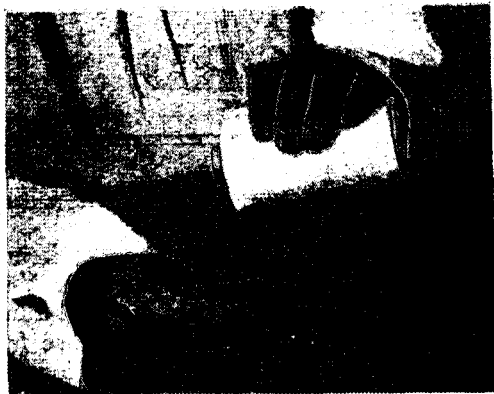


Fig. 1.—DUSTING THE HANDS WITH STERILE POWDER.

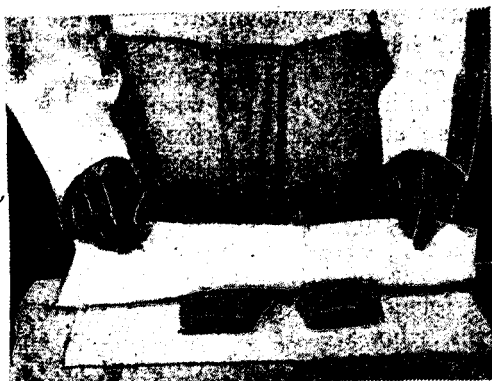


Fig. 2.—REMOVING THE STERILE WRAPPING FROM THE GLOVES.

Notice that the cuffs of the gloves were turned back before being sterilized.

The uses of rubber gloves as a protection for the hands are almost limitless. They now belong to the equipment of every kitchen as well as to the handbag of the surgeon and nurse. The uses they may serve is restricted only by their expense. They can be used to protect the hands from dirt, from stains, from irritating disinfectants, from infectious discharges, and infectious diseases. With good care and careful handling one pair should stand a number of weeks of ordinary use, but if the nurse finds it necessary to use gloves daily or a number of times a day they are soon useless, at least for aseptic work. A pair slightly torn or needle pricked may be so repaired, however, as to be of further use; if badly torn, the gloves may be repaired so that they can be used for non-sterile work.

* From *The Nurse*, a Journal of Practical Knowledge, U.S.A.

Mending Rubber Gloves.—Cut a circular patch from an old rubber glove. Then roughen the area about the hole or perforation with sandpaper. Apply rubber cement to the glove and to the patch, and stick the patch on and hold it until it dries. Sometimes a patch will loosen when boiled in water, but in this event another patch can be applied.

Care after Use.—After using, rubber gloves should be washed with soapy water, then sterilized by boiling five to ten minutes, thoroughly dried inside and out, and powdered freely, into the fingers as well as the hands of the gloves, to keep the surfaces from adhering. If not to be used often, it is a good plan to insert a piece of gauze into the gloves also to keep the surfaces apart.

Putting on Gloves.—Gloves are put on by both the wet and dry methods, but if the hands are to remain in the gloves for more than a few minutes, the dry method is preferable.

When removing, the gloves slip off easier if the hands are held under water. Whichever method is used, the difficulty in sterile work is in putting the gloves on under a strict aseptic technique. Regardless of the fact that the hands themselves have been sterilized, they should not be brought in contact with the outside surface of the glove when putting the gloves on.

The following is one surgeon's method, and is recommended because there is no break in the chain of asepsis, and the method is rapid. Here are the various steps of the method:—The surgeon's hands have been sterilized, and he has been helped into his sterile operating gown. He has powdered his hands with sterile powder (Fig. 1). It is far better to powder the hands than to powder the gloves. When the powder is put into the gloves it immediately works into



Fig. 3.—DRAWING THE GLOVE ON TO THE RIGHT HAND.

To avoid tearing always have two layers of the glove between the fingers. This is afforded by the turned-back cuff. The fingers of the left hand do not touch the outside of the glove.

previous page

next page