



## **Degree of Adherence to Contact Precautions by Healthcare Workers in the Medical Laboratory**

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### **Authors' contributions**

*This work was carried out in collaboration among all authors. All authors read and approved the final manuscript.*

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**Conference Abstract**

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### **ABSTRACT**

**Objective:** To determine adherence to contact precautions, and trends in knowledge, attitudes, and adherence by healthcare workers in a selected medical laboratory.

**Methods:** The study design was quantitative, cross-sectional, and observational. Medical technologists and laboratory aides of one laboratory operating by the GYS 170 Standard were studied for twenty-four days. Firstly, compliance and supply availability were discretely observed and recorded on standardized tally charts. Secondly, thirty questionnaires were randomly distributed to determine knowledge of, attitudes to, and self-perceived compliance with contact precautions; twenty-four were returned. Data was analyzed in Microsoft Excel 2007 via percentages for observational results and averages for questionnaire results. Actual and perceived adherences were compared. Pearson's  $\chi^2$  test was used to determine association between variables.

**Results:** Of 2,564 events, compliance (72.4%) was greater than non-compliance (27.4%). Medical technologists were more non-compliant (74.1%) than laboratory aides (37.7%). Staff were more likely to practice hand hygiene upon leaving (84.1%) than entering (39.9%). Laboratory coats were most used (86.2%) and gloves the least (69.9%). Also, gloving was associated with hand hygiene and with laboratory coat usage. The questionnaires revealed low knowledge, positive attitudes and low perceived compliance among workers. Finally, perceived adherence was larger than actual adherence. A p-value of less than 0.05 was determined to be statistically significant.

**Conclusion:** Although supplies and guidelines exist and are positively received by workers, implementation is a challenge. Low knowledge and actual compliance, especially among medical technologists, is risky. Therefore, stricter initiatives and educational training are necessary.

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## **COMPETING INTERESTS**

Authors have declared that no competing interests exist.

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