Handwashing has been identified as one of the most critical elements of controlling risk of hospital acquired infections. Healthcare workers hands can be a source of nosocomial infections. Adherence to hand hygiene protocols is important to prevent the spread of health care-associated infections. While nurses and physicians both come in contact with patients, research has shown that physicians have higher non-compliance rates with handwashing protocols compared to nurses.

In the case of dermatology patients, where physicians often come in contact with open lesions, hand hygiene practices become even more important. In this study researchers look at the handwashing practices of physicians in a dermatology clinic in Israel.

**Methods**

The fingers of 13 dermatologist physicians were sampled for bacterial cultures and their hand hygiene practices were monitored by two observers. In addition, 51 dermatologists attending a professional conference completed a questionnaire on hand hygiene practice. A handwashing break in technique was defined as not washing hands before patient contact.

**Findings**

All physician hands were found to be contaminated. Average compliance was 31.4%. Main reasons reported in the survey were excessive work schedule, lack of awareness, reaction to disinfectants, and lack of readily available facilities. Authors also suggest the need for an active educational infection control program should be introduced in dermatology clinics.
Limitations

Authors admit that waterless alcohol-based handwashing could lead to higher handwashing rates but do not explore this in the study. Additionally, the study does not investigate the relationship of contaminated hands and the incidence of nosocomial infections.