

**University of California, Davis
Health, Sacramento
Department of Pathology and Laboratory Medicine**

DRESS CODE

**Administrative Procedure
865.A**

PURPOSE:

The purpose of this Policy is to describe department specific guidelines for dress and personal appearance in accordance with UCDHS policies and procedures.

All laboratory personnel are members of the health-care delivery team and are representatives of UCDHS. As such, staff, from physician to volunteer, shall dress in appropriate business-like attire. This attire shall not only be proper to the individual's occupation/profession, but it shall also contribute to the highest standard of hospital hygiene, patient expectation and employee safety.

RELATED POLICIES:

Hospital dress: Hospital Policy ID 2904 (Standard of Dress and Personal Appearance)

Patient Care Standards Policy ID XIX-01 (Dress Code and Personal Appearance)

Dress Code – Standards for Operating Room Wearing Apparel Policy ID 2009

Criteria for Home Laundering Surgical Attire Policy ID 2009, Attachment A

Employee Apparel Program: <http://intranet.ucdmc.ucdavis.edu/eap/>

Scrub Color Chart: http://intranet.ucdmc.ucdavis.edu/eap/uniform_color_chart.shtml

Photo ID Badge: Hospital Policy ID 2900

Infection Control: Department Policy 200A

Personal Protective Equipment: Department Policy 276.A

A. STANDARD OF DRESS

1. The UCDHS identification badge is a required part of each employee's attire and must be worn unobstructed and clearly visible.
2. Apparel is to be maintained so that the attire is neat and clean, and free of frayed, worn or ripped areas.
3. Halter tops, tank tops, see-through attire, and athletic wear are not permitted.
4. Pants/slacks must be mid-calf length or longer.
5. Skirts/dresses must be professional in style. Hems or slits should be no shorter than 2 inches above the knee.
6. Shoes must be clean, safe and appropriate for type of work performed, and in good repair at all times.

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7. Personnel who work in the laboratory technical areas, or who regularly enter or pass through, must:
 - wear shoes with heels of rubber or non-skid composition and should be of an appropriate height and width so as not to be hazardous
 - wear shoes with closed toe and closed heel or heel strap
 - wear full length pants or equivalent.
8. Hats or sunglasses are not to be worn.
9. Headphones, ear buds or other devices are not to be worn.

B. GROOMING AND HYGIENE

1. Hair, beards, sideburns and moustaches must be worn in a manner that displays tidiness and cleanliness, maintaining proper safety and infection control. If hair is longer than shoulder length, it should be tied back. Hair accessories may be worn to tie hair back.
2. No extreme hair styles or unnatural colors are permitted.
3. Closeness and frequency of contact with patients, public and fellow employees demand a high degree of personal cleanliness at all times. Employees are expected to bathe regularly and use deodorants and exhibit satisfactory and sufficient dental hygiene. This closeness also dictates that staff should not use scented cosmetics, perfume, cologne or after-shave in the work place.
4. Make-up and jewelry should be simple and tasteful.
5. Piercings may be worn unless they pose a risk to staff safety. Managers in consultation with Human Resources, may determine whether piercings may pose a risk to staff safety.
6. Tattoos must be covered to the extent possible. Tattoos that are visible must not contain messages that are inconsistent with UCDCMC Policies and Procedures, the Principles of Community, or are otherwise inappropriate. Managers, in consultation with Human Resources, may determine whether a tattoo is inconsistent with UCDCMC Policies and Procedures, the Principles of Community, or are otherwise inappropriate or communicate an offensive message.

Any staff with direct patient contact may not wear artificial nails (includes acrylic or gel nail products) or silk wraps per Health System Infection Control Policy.

C. UNIFORMS

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1. Uniforms are required to be worn every day for staff providing patient care or who frequent patient care areas. This is defined as:
 - All CPTs
 - HCLAs in SARC and HBCs
 - Any other personnel who frequent patient care areas, including but not limited to. Bone Marrow Processing, POCT, HPCL and Cytotechnologists
 - Supervisors who can act in above capacities
2. Colors are assigned to the different roles in the health system. Technologists and technicians wear wine.
3. Long or short sleeved crew, turtle neck or V necked shirts may be worn under the uniform top. The shirt must be one color. Acceptable colors are white, grey or black. The shirt must be without writing, design, lace or embellishment.
4. Only Uniform jackets and vests with the approved UCD logo and issued through the UCD Employee Apparel Program may be worn over the scrub if permitted by unit or infection control practices.

D. SAFETY

1. Laboratory personnel may wear clean labcoats (long) over uniforms when in patient care areas if desired. This garment should be reserved for patient contact only and will be separate from other protective laboratory coats worn during specimen processing in the laboratory.
2. All protective garments used in work areas will be removed when leaving the laboratory for the cafeteria or other parts of the hospital.
3. Scrubs are considered clothes in the laboratory and lab coats must be worn over them in lab areas.
4. Other personal protective wear as required is described in Department Policy 276.A. Personal Protective Equipment.

E. EXCEPTION AND ENFORCEMENT

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1. Radical departures from conventional dress or grooming standards are not permitted regardless of the nature of the employee's job.
2. Exceptions to establish standards may be granted for medical or religious reasons with the proper documentation and the approval of the Pathology Lab Manager in consultation with Employee Labor Relations as necessary.
3. Employees, students and volunteers reporting to work improperly dressed or groomed will be sent home without pay at the discretion of management to make the appropriate corrections and may be subject to corrective action.

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PROCEDURE HISTORY

Date	Written/ Revised By	Revision	Approved Date	Approved By
6/89	D. Lowe	New	6/89	M. Gardner
3/93	D. Lowe	Revised	3/93	R. Cardiff
12/94	B. Andreos	Revised	12/94	B. Andreos
4/96	B. Andreos	Annual Review	04/96	B. Andreos
11/98	B. Andreos	Annual Review	11/98	R. Green
11/00	B. Andreos	Annual Review	11/00	E. Larkin
9/01	D. O'Sullivan	Revision	9/01	R. Green
10/01	D. O'Sullivan	Revision	10/01	R. Green
7/02	D. O'Sullivan	Revision	7/02	R. Green
11/03	D. O'Sullivan	Revision	11/03	R. Green
11/04	D. O'Sullivan	Annual Review	11/04	R. Green
2/06	D. O'Sullivan	Revision	2/06	R. Green
11/07	D. O'Sullivan	Annual Review	11/07	R. Green
04/08	D. Wright	Revised	04/08	R. Green
7/09	C. White	Reviewed	07/09	L. Howell
7/10	D. Wright	Revised	7/10	L. Howell
10/11	D. Wright	Annual Review	10/11	L. Howell
10/13	T. Cox	Biennial Review	10/13	L. Howell
10/14	E. Padilla	Revised	10/14	L. Howell
10/17	R. Scott	Revision	10/17	L. Howell via OnBase

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