PURPOSE:

To define appropriate dress and expectations to present a professional image. To provide a work and patient care environment that is non-threatening, child friendly in terms of dress and attire. To define expectations based upon location and/or customer contact.

I. Professional, Clinical Attire:
   This is appropriate when working in the clinical setting with direct patient care.

   A. Clothing:
      1. Child friendly shirts which are long enough so that nothing is exposed (stomach, lower back, lower chest) when sitting, standing, bending, etc. This may include T-shirts, scrub attire. Shirts that provide advertising, ex. Gap, Old Navy, are not appropriate.
      2. Pants which are sweat pants or wind suit pants are not appropriate. Scrub attire or uniform slacks are appropriate.
      3. Undergarments will be worn and will not be visible by style or color.
      4. Low heeled, non-skid, clean shoes are to be worn. Closed toed shoes will be worn by employees involved in direct patient care.

   B. Hair:
      1. Hair should be a professional color (no green, purple, pink, blue, etc.), neat, and clean. Hair must be arranged to prevent it from falling into the employee’s face.
C. Jewelry:
   1. Jewelry should be conservative. Small earrings are encouraged to promote employee safety. Dangling earrings are discouraged. Facial piercing other than earrings are not permitted, i.e. eyebrow piercing, lip piercing, nose piercing, and tongue piercing.

D. Fragrances:
   1. Scented after shave, perfumes, or strong scents are not appropriate. Body odors should be addressed with good hygiene practices.

E. Nails:
   1. For staff having direct contact with patients, artificial nails, acrylic, or sculptured nails may not be worn. (QM 340, Fingernails)
   2. Nail polish may be worn but must be neat and free of chips, without ornaments, and a conservative color, reflective of professional standards.

F. Tattoos:
   1. Visible tattoos must be covered with appropriate attire.
   2. Visible tattoos are discouraged.

G. Identification:
   1. All personnel are required to wear identification provided by the hospital.
   2. Identification is to be worn above the waist and visible from the front.
   3. Identification should not have stickers, pins, or other items on the ID. (See policy)

II. Casual Business Attire:
   This is appropriate when working in an office environment with no patient contact, or when reporting to work to perform non-direct patient care activities.

A. Clothing:

   **Appropriate Casual Attire**
   1. Blouses
   2. Tank tops (must have 2 inch or wider strap).
   3. Jersey tops or t-shirts (long enough so that nothing is exposed when sitting or standing)
   4. Capri pants
   5. Khakis or slacks
   6. Dresses or skirts
   7. Sandals, closed shoes, or sneakers

   **Inappropriate Casual Attire**
   1. Midriff blouses, halter tops and low cut necklines
   2. Tank tops with strap less than 1 inch wide.
   3. Shirts containing printed statements and/or pictures that endorse sexual activity or violent behavior.
   4. Pants or jeans that are fitted below the waist
   5. Head gear (e.g., caps, visors, hats)
   6. Shorts
   7. Mini-skirts
Appropriate Casual Attire

8. Skorts
9. Sweat shirts or sweaters
10. Denim fitted above hip. (Should not be faded, frayed, or ripped.)
    *Only appropriate when reporting for non-scheduled activities such as PALS, BLS renewal, T&E, staff meetings, etc.

Inappropriate Casual Attire

8. Leggings

B. Hair:
   1. Hair should be a professional color (no green, purple, pink, blue, etc.), neat, and clean.

C. Other:
   1. See above for all other attire requirements.

III. Non-Compliance:
Employees who are out of compliance with this policy will be asked to correct the problem immediately. If the employee refuses to come into compliance with this policy, they may be asked to leave the unit/department without pay for the remainder of the shift and such will constitute an absence under the attendance policy. Progressive discipline will be followed as per policy.

* This policy does not supersede any departmental policy that is more restrictive.

ORIGINAL DATE: September 1974

REFERENCES:

Campbell, S., BNurs, PhD, RGN, RSCN, NDN Cert, RHV, FRSH; O'Malley, C., Dip HE, BSc, Adv Dip Health Sciences, RN(Child); Watson, D., BA, MPhil, PhD, C Psychol, AFBPsS; Charlwood, J., BA, RGN; Lowson, S.M., DMS, MA(Qual Mgr), RGN, RSCN. (2000). The image of the children’s nurse: a study of the qualities required by families of children’s nurses’ uniform. Journal of Clinical Nursing, 9, 71-82.

