

Status: v 0.0

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Owner: IP&C

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Chlorhexidine/Alcohol Solution Decanting Guidelines

Purpose	To provide a guideline for decanting of Chlorhexidine (CHG) Solution 2% w 70% Alcohol from a multi-use container into another container for immediate (same day) single-patient use.
Background	There are international shortages of Stevens- Applicator CHG 2% Sterile/Swabpad 2% CHG 70% Isopro products. Alternative solutions are required in order to ensure availability of these products for skin antisepsis. Infection Prevention and Control/Logistics identified this product as a safe and effective alternative.
Required Materials	Chlorhexidine (CHG) Solution 2% w 70% Alcohol 500 mL bottles Empty sterile container(s) for decanting into WHMIS Workplace Label Facility approved disinfectant Alcohol-based hand rub (ABHR) Eye protection Gloves

The Process:

Step	1) Space/Area for Decanting Chlorhexidine (CHG) Solution 2% w 70% Alcohol
1.1	 There must be a dedicated space/area. The decanting process shall not occur in patient/resident/client care areas. The space must have restricted or secured access The space must be designated a "clean" area The space must include an area for hand hygiene and donning/doffing personal protective equipment (PPE) The space must have adequate ventilation; avoid breathing in vapours The space must not have carpet The space must have a fire sprinkler system The space must have a fire extinguisher Eyewash station and safety shower in working area as required by SDS. There shall be spill response supplies as required according to the SDS available If spills occur, the area must be cleaned after

Step	2) Worker
2.1	 Dedicated worker(s) shall be orientated/trained on the decanting process as per organization protocols. Use protective gloves and eye protection as required by SDS.



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Step	3) Pr	ocess for Decanting into smaller container(s)
3.1	-	Safety Data Sheets (SDS) must be available when decanting. Decanting shall not occur near any sources of ignition or open flame, such as heat sealers Perform hand hygiene and clean/disinfect all decanting surfaces using a facility approved disinfectant A list of approved disinfectants can be found at https://sharedhealthmb.ca/files/facility-approved-disinfectants.pdf Perform hand hygiene and don PPE as required by SDS (gloves and eye protection at a minimum) Check the expiry date of the 500 ml bottle and discard if past the date of expiry. Decant solution from 500 ml bottle into one or more empty sterile containers: Remove caps of 500 mL bottle and empty sterile container(s). If setting caps down, ensure open side is up. Do not touch the bottle/container neck, rim, or inside of the cap. Fill empty sterile container(s) with solution from 500 ml bottle. Apply caps to filled container(s) and to 500 ml bottle. When finished decanting, remove PPE and perform hand hygiene When the 500 ml bottle is first opened, record the following information on the bottle: date of opening; date the bottle is to be discarded (30 days after opening or expiry date – whatever comes first); and initials of the person who opened the bottle Apply WHIMIS Workplace Label and record the following information on the filled sterile container(s): name of the patient date the container is to be discarded (same day it was decanted); and initials of the person who decanted the solution Store bottle/container(s) in a clean area protected from contamination and discard on discard date recorded on bottle/container(s). Do not top-off or refill any bottles or containers; discard once empty as per site process.