



Purpose	To provide a guideline for immediate use of Chlorhexidine (CHG) Solution 2% w 70% Alcohol from a multi-use container at the bedside.
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 antiseptics. Infection Prevention and Control/Logistics identified this product as a safe and effective alternative.
Required Materials	<p>Chlorhexidine (CHG) Solution 2% w 70% Alcohol (500 ml bottle OR sterile container that solution was decanted into)</p> <p>Sterile applicator (e.g., swab with sponge, non-woven sponge)</p> <p>Facility approved disinfectant</p> <p>Alcohol-based hand rub (ABHR)</p> <p>Eye protection</p> <p>Gloves</p>

The Process:

Step	1) Process for Immediate Use at Bedside
1.0	<ul style="list-style-type: none"> - Safety Data Sheets (SDS) must be available. - Perform hand hygiene and clean/disinfect work surface using a facility approved disinfectant <ul style="list-style-type: none"> o 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) - Prepare sterile field <ul style="list-style-type: none"> o Ensure sterile field includes a sterile container to receive the solution and a sterile applicator to apply the solution to skin - Verify contents and expiration/discard date of solution. - The solution should be dispensed at point of use (e.g., in the patient’s room) from the 500 ml bottle or from the smaller container that solution was previously decanted into according to decanting SOP. Once dispensed (e.g., poured into a sterile bowl), it must not be left out of sight or unattended. - Once a bottle or container enters a patient’s room, it must be dedicated to that patient (single-patient use). <ul style="list-style-type: none"> o If SDO decides not to decant into smaller sterile containers and uses original 500 ml bottle, record the following information on the container when first opened: <ul style="list-style-type: none"> ▪ patient’s name (bottle is to be single-patient use) ▪ date of opening; ▪ date the container is to be discarded (30 days after opening or expiry date – whatever comes first); and ▪ initials of the person who opened the container



- Alternately, if SDO decides to decant into smaller sterile containers according to decanting SOP, record the following information on the container:
 - patient's name (**container is to be single-patient use**)
- Open the bottle. Hold the bottle in your dominant hand and hold the cap in your non-dominant hand.
- Carefully pour the amount of solution you need into the sterile container on your sterile field
 - Do not touch the bottle neck, rim or inside of the cap
- Recap the bottle and proceed with sterile procedure
- Store opened clearly labelled bottles in a clean area protected from contamination and dispose of on discard date recorded.
- Do not top-off or refill bottles; discard once empty as per site process.