

Frequently Asked Questions Wound Care

The majority of our nurses and certified nursing assistants (CNAs) feel comfortable using chlorhexidine (CHG) cloths on superficial wounds, but some do not. How would you suggest easing their concerns?

Remind all nursing staff that CHG cloths are safe to use on superficial wounds and stage 1 & 2 decubitus ulcers. Using the buddy system, in which nursing staff who are comfortable using CHG on superficial wounds buddy up with staff who are less comfortable, can also help.

Should I be concerned about CHG having a stinging effect on wounds?

Antiseptic over-the-counter products often contain alcohol and will sting when applied to wounds. In contrast, CHG cloths do not contain alcohol and will not sting. In fact, CHG cloths contain dimethicone and aloe vera which are moisturizers and actually have a soothing effect on the superficial wound area.

Will CHG be absorbed if I put it on a wound?

There is minimal to no systemic absorption when using CHG on a superficial wound. In addition, the CHG may be particularly important to get rid of bacteria in an open wound and prevent infection.

For what types of wounds is CHG safe?

CHG can be gently applied to any superficial wound, including stage 1 and 2 decubitus ulcers, friable skin/rash, and superficial burns. We do not recommend using CHG on packed wounds or wounds that are large or deep. Skin near and surrounding any wound should always be cleaned well.

Can I use CHG cloths over a closed surgical incision?

Yes. CHG is beneficial and should be applied over a closed surgical incision to eradicate bacteria and the reduce risk of infection.

What if my resident has a wound vac?

CHG should be applied over any semi-permeable or occlusive dressing. This includes wound dressings that meet that criteria, as well as wound vacs. Apply over the dressing and to any tube within 6 inches of the body. CHG can also be applied over sutured or stapled wounds. If the dressing is permeable (for example, gauze), then use CHG up to the dressing.

How firmly should I apply CHG cloths to a wound?

It depends on whether the wound is over a bony prominence or not. If the wound is not over a bony prominence, then CHG should be applied with a firm massage to ensure adequate contact and anti-bacterial activity. However, if the wound is in the location of a bony prominence, a *gentle massaging motion* should be used to avoid causing additional soft tissue damage or extension of the wound due to pressure against the bone.

I am having trouble with applying bandages after bathing my residents with CHG. Does CHG weaken bandage adhesive?

If you are having trouble applying a bandage after bathing a resident with CHG, it's usually because not enough time has elapsed to allow for complete drying. After bathing a resident, allow the CHG to completely dry for about 5 minutes. When completely dry, CHG will not affect the bandage adhesive. If you are in a rush, fanning the CHG dry is acceptable, but do not wipe off or blot dry. If the resident's skin still feels tacky, it may prevent the bandage from sticking properly.