Decolonization Do’s and Don’ts

**DO**

* **DO** use chlorhexidine gluconate (CHG) to replace all bathing needs.
* **DO** massage CHG firmly onto skin to bind skin proteins and prevent bacteria for 24 hours.
* **DO** pay special attention to neck, joints, and skin folds.
* **DO** clean 6 inches of any lines, tubing, or devices closest to body.
* **DO** give CHG baths to all patients every day, for entirety of unit stay.
* **DO** use nasal decolonization twice a day for 5 days of unit stay.
* **DO** use over superficial wounds, sutures, and semipermeable dressings.
* **DO** only use CHG-compatible lotions and skin products.

**DON’T**

* **DO NOT** get CHG into eyes or ear canals.
* **DO NOT** rinse or wipe off CHG. Let air dry.
* **DO NOT** use CHG on deep or large wounds.
* **DO NOT** flush CHG cloths (discard in trash, not toilet or commode).
* **DO NOT** save open CHG packs for later use.
* **DO NOT** use CHG or nasal decolonization if patient is allergic to the product.

**Refer to** [**Decolonization Protocol**](http://www.ahrq.gov/hai/tools/mrsa-prevention/toolkit/decolonization-protocols.html) **for Step-By-Step Instructions**

AHRQ Pub. No. 25-0007

October 2024

**Adapted from** “Universal ICU Decolonization: An Enhanced Protocol”:

[*https://www.ahrq.gov/hai/universal-icu-decolonization/index.html*](https://www.ahrq.gov/hai/universal-icu-decolonization/index.html)

and

“Toolkit for Decolonization of Non-ICU Patients With Devices”:

[*https://www.ahrq.gov/hai/tools/abate/index.html*](https://www.ahrq.gov/hai/tools/abate/index.html)