Talking Points for Patients: Chlorhexidine Gluconate Bathing

**Feel free to customize this handout to your unit’s current practices. To avoid confusion, remove questions that do not apply to your unit.**

Patients may have questions regarding chlorhexidine gluconate (CHG) bathing. Below are some suggested responses to common patient questions.

**REMEMBER:** Your **enthusiasm** and **encouragement** will be the greatest predictors of a patient’s willingness to accept decolonization.

### Why do I need to bathe/shower with CHG?

This is part of your protection against infection while you are here in our unit. We provide a chlorhexidine gluconate, or CHG, bath to patients in the unit to prevent infection. CHG is deeply cleansing and works better than regular soap and water to remove germs and protect you from infection. It has been used on millions of patients in hospitals across the country to clean their skin and protect them from germs.

### Why is CHG used for patients in this unit?

Some common bacteria can live on the skin and in the nose, which normally are not dangerous. However, during high-risk periods, like when you are hospitalized, you are more vulnerable to the bacteria that can cause serious infection. This unit provides all patients with a daily no-rinse bath using a special skin cleanser that removes potentially harmful bacteria on the skin and reduces the risk of infection. This bath is part of a strategy called “decolonization,” and it has been proven to protect patients from infection and reduce the risk of having antibiotic-resistant bacteria on your body. Ultimately, we want to prevent infections for our patients, including you.

### I am too tired, and I don’t feel like bathing/showering.

I understand that you must be tired, but this bath is important to protect you from bacteria and other germs. It will only take 5 to 10 minutes and will leave you feeling refreshed. I will help you. If you are too tired right now, we can find a better time and I can come back later.

### I don’t think I can bathe/shower because I have an IV (or another device).

Because you have a device, bathing with CHG is even more important to prevent infection and keep germs away from your skin. As part of the bath, we will clean your lines and devices with CHG after we clean your skin. I will help you apply the CHG over the dressing and on the device itself to make sure that everything on or near your body is clean.

### I don’t feel clean after bathing/showering with CHG. I prefer soap and water.

I know we usually think of baths as having soapy water, but the CHG cleanser actually works better than soap and water to remove germs from the skin. In fact, CHG continues to kill germs for up to 24 hours after it dries. It is deeply cleansing, and clinical studies have proven that it prevents infection better than soap and water.

### Why do the CHG cloths leave my skin feeling sticky?

The sticky feeling is temporary and is due to lotion or aloe vera mixed in with the CHG. These moisturizers can cause a brief sticky feeling that will go away completely when dry. After a few minutes, you will find that it leaves your skin soft, without any stickiness.

**NOTE: The sticky feeling only occurs if your hospital has purchased ready-made CHG cloths.**

### Can I use CHG soap on wounds or skin rashes?

Yes. In fact, cleaning skin wounds and rashes is particularly important since germs can enter the body where your skin is broken. However, it is not appropriate for use on all wounds. I will help you with that part of your bathing.

**NOTE: CHG should be used to clean over wounds except those that are large or deep (e.g., packed wounds).**

### Can I use my own soap/bodywash with CHG?

No, other soaps may prevent CHG from working. Some soaps can inactivate the ingredient in CHG that fights germs. CHG works better than regular soap and water to protect you, so it is important that you only use the soap that we give you during your stay.

### I would prefer to use my own shampoo/face soap. Is this OK?

Other soaps and shampoos can interfere and weaken the CHG’s protection. We strongly encourage you to use only CHG while you are here. CHG can be used as both a soap and a shampoo.

However, if you prefer to use your own shampoo or face soap, you must use them prior to applying CHG and not after. Try to apply the soap or shampoo only to your face and hair and avoid getting it on other parts of your body so that the CHG will work to prevent germs when applied afterwards. Make sure to rinse the shampoo or face soap off thoroughly before applying the CHG.

### Can I use my own lotion/skin products/hair products with CHG?

No, other lotions and personal care products may prevent CHG from working. Some products can interfere with the germ-fighting ingredient. CHG keeps working after it dries to protect you from germs, so it is important that you stop using any other products during your time here that might prevent CHG from working.

### I would prefer to apply the CHG myself. Is this OK?

**If your unit allows patients to do their own bath:**

I can give you [**a handout with important instructions on how to bathe properly with CHG**](https://www.ahrq.gov/sites/default/files/wysiwyg/hai/tools/mrsa/074-dec-patient-instructions-cloth.docx). Remember to read the instructions carefully, as the CHG will not protect you if it is not done correctly.

These CHG cloths have a special no-rinse soap that works better than soap and water to remove germs that can cause infection. Massage the skin well with these cloths to remove skin germs.

* Start with one cloth for your face, neck, and chest; make sure to avoid your eyes and ears.
* Use a different cloth for your shoulders, arms, and hands.
* Use a cloth for your abdomen, groin, and perineum.
* Use a cloth for your right leg and foot.
* Use a cloth for your left leg and foot.
* Finally, use the last cloth for your back and your buttocks.

Then let your skin air dry. Do not rinse off the CHG since the CHG continues to keep germs away for 24 hours.

Do not forget to clean all skin areas, including deep in your joints and between and under skin folds. Most patients need help with some areas. I can help you with any hard-to-reach areas as well as help you clean on and around your lines or drains.

**If your unit allows patients to use CHG in the shower:**

I can give you [**a handout with important instructions on how to shower with CHG**](https://www.ahrq.gov/sites/default/files/wysiwyg/hai/tools/mrsa/073-dec-patient-instructions-chg-showering.docx). Remember to read the instructions carefully, as the CHG will protect you only if it is used correctly.

* Clean your face with a small amount of CHG. Be careful not to get it into your eyes or ears. Rinse well.
* Turn the water off before you use the CHG, to prevent the CHG from rinsing off too soon.
* Firmly rub the CHG onto your skin to ensure you get a deep clean. Do not get CHG in your eyes or ears. Clean your body from the top down. For best results, leave CHG soap on the skin for at least 2 minutes. Then rinse it off and dry yourself thoroughly.
* Do not forget to clean all skin areas, including your neck, behind your knees, and between and under all skin folds. Most patients need help with some areas. I can help you with any hard-to-reach areas as well as help you clean on and around your lines or drains.

### The label for liquid CHG says it can be used for routine bathing (skin, wound, and general skin cleansing), but CHG cloths are labeled as preoperative. Is it okay to use the cloths for routine bathing?

Yes, both CHG liquid and CHG cloths are safe to use for routine bathing. The cloths are labeled based upon the original studies performed by the manufacturer to market the product. Since then, many large clinical trials have now shown that routine CHG bathing reduces serious infections, even in critically ill patients. In fact, nearly all U.S. hospitals now use CHG as their soap for routine bathing of ICU patients. This type of routine bath has been used in millions of patients and is well tolerated and safe. Our goal is to prevent infection and protect you while you are here.

**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)

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