



Bronllys Hospital, Bronllys, Brecon, Powys, LD3 0LU

This Patient Group Direction (PGD) must only be used by registered healthcare professionals who have been named and authorised by their organisation to practice under it. The most recent and in date final signed version of the PGD should be used. Healthcare professionals should always access the PGD via the PTHB internet to ensure that they are always working to the most up to date version

### **Patient Group Direction**

for the supply and/or administration of

chlorhexidine gluconate 4% w/v scrub (solution)

by registered nurses

for

skin disinfection of adults and children over 16 years old with a swab result positive for methicillin resistant staphylococcus aureus (MRSA)

in

Powys Teaching Health Board (PTHB), to include inpatients, individuals seen in pre-assessment clinic, and PTHB employees

Version number: **PGD 0253**

## Change history

<b>Version number</b>	<b>Change details</b>	<b>Date</b>
PGD 0253	Initial issue	21/04/26

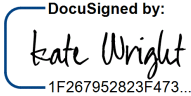


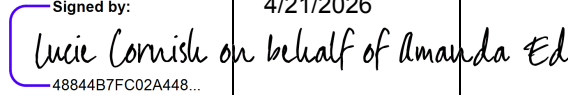
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**PGD authorisation**

Name	Job title and organisation	Signature	Date
<p><b>Senior Doctor Dr Kate Wright</b></p>	<p>Lead Doctor for PTHB</p>		<p>4/21/2026</p>
<p><b>Chief Pharmacist Jonathan Boyd</b></p>	<p>Chief Pharmacist for PTHB</p>		<p>4/24/2026</p>
<p><b>Senior Representative of Professional Group using the PGD Paul Hooton</b></p>	<p>Executive Director of Nursing and Midwifery for PTHB</p>		<p>4/21/2026</p>
<p><b>Clinical Governance Lead Lucie Cornish</b></p>	<p>Clinical Governance Lead for PTHB – Director of Improvement and Transformation</p>		<p>4/21/2026</p>

It is the responsibility of the organisation that has legal authority to authorise the PGD, to ensure that all legal and governance requirements are met. The authorising body accepts governance responsibility for the appropriate use of the PGD.

[Appendix A](#) provides a practitioner accreditation sheet. Individual practitioners must be authorised by name to work to this PGD.

Those using this PGD must ensure that it is organisationally authorised and signed by an appropriate authorising person, relating to the class of person by whom the product is to be supplied, in accordance with Human Medicines Regulations 2012 (HMR2012)<sup>1</sup>. **The PGD is not legal or valid without signed authorisation in accordance with [HMR2012 Schedule 16 Part 2](#).**

The final authorised copy of this PGD should be kept by PTHB for 25 years after the PGD expires. Practitioners and organisations must check that they are using the current version of the PGD.

<sup>1</sup> This includes any relevant amendments to legislation

## Training and competency of registered health professionals

<p><b>Qualifications and professional registration</b></p>	<p>Practitioners must only work under this PGD where they are competent to do so. Practitioners working under this PGD must also be a registered professional with the following body:</p> <ul style="list-style-type: none"> <li>nurses currently registered with the Nursing and Midwifery Council (NMC)</li> </ul> <p>Practitioners must also fulfil the additional requirements listed below, have a current contract of employment within PTHB and be working within pre-assessment clinics, inpatient areas, occupational health, or with the IP&amp;C (infection prevention and control) team across the Health Board.</p> <p>Check <a href="#">Appendix A – Staff Accredited to use this PGD</a> to confirm whether all the registered practitioners listed above have organisational authorisation to work under this PGD.</p>
<p><b>Initial training and knowledge requirements</b></p>	<p>The registered healthcare professional authorised to operate under this PGD must have undertaken appropriate education and training in:</p> <ul style="list-style-type: none"> <li>the competencies to undertake clinical assessment of individuals ensuring safe provision of the medicine listed in accordance with local policy.</li> <li>the administration and/or supply of chlorhexidine gluconate 4% w/v scrub and knowledge of its uses, contraindications and adverse effects.</li> </ul> <p>Additionally, practitioners:</p> <ul style="list-style-type: none"> <li>must be authorised by name as an approved practitioner under the current terms of this PGD before working to it</li> <li>must have undertaken appropriate training for working under PGDs for supply/administration of medicines. Recommended training <a href="#">eLfh PGD eLearning programme</a>. PTHB staff to access via <a href="#">ESR</a></li> <li>must be competent in the use of PGDs (see <a href="#">NICE Competency framework</a> for health professionals using PGDs)</li> <li>must have completed locally required training (including updates) in safeguarding children and vulnerable adults or a minimum of level 2 safeguarding or the equivalent, as relevant to the role</li> </ul>

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	<ul style="list-style-type: none"> <li>• must be familiar with chlorhexidine gluconate 4% w/v scrub and alert to changes in the <a href="#">BNF</a>, <a href="#">Summary of Product Characteristics</a> and treatment recommendations. Any changes must be reported to the service manager, for the purpose of arranging a PGD review</li> <li>• must have undertaken training appropriate to this PGD as required by local policy</li> <li>• must be competent to administer chlorhexidine gluconate 4% w/v scrub; this should be documented in the healthcare professional's CPD records</li> <li>• must have received training and be competent in the recognition, management of, and reporting of recognised adverse reactions, including anaphylaxis</li> <li>• must be competent in the administration of adrenaline 1 in 1000 and have up to date Basic Life Support (BLS) skills as a minimum</li> <li>• must have completed <a href="#">ESR online training</a>: Reducing Antimicrobial Resistance</li> <li>• must have awareness of PTHB antimicrobial guidance, available via <a href="#">Eolas</a> Medical</li> <li>• must have knowledge of the PTHB policy IPC 015 '<a href="#">Management of adults with MRSA</a>'</li> <li>• must have access to the PGD and associated online resources</li> </ul> <p><b>THE PRACTITIONER MUST BE AUTHORISED BY NAME, UNDER THE CURRENT VERSION OF THIS PGD BEFORE WORKING ACCORDING TO IT.</b></p>
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<p><b>Competency assessment</b></p>	<ul style="list-style-type: none"> <li>• Evidence of ongoing/refresher PGD training to be submitted to Line Manager annually- this should include an annual completion certificate of PGD e-learning or a dated screenshot of the PGD e-learning assessment results as proof of completion.</li> <li>• Staff operating under this PGD are encouraged to review their competency using the <a href="#">NICE Competency Framework for health professionals using PGDs</a>.</li> <li>• Practitioners operating under this PGD must be assessed as competent (see <a href="#">Appendix A</a>) and complete a self-declaration of competence to operate under this PGD in their Personal Appraisal and Development Review (PADR). The <b>personal development plan</b> (yellow) section of the PADR booklet should be used to record completion of Statutory and Mandatory training, including annual PGD e-learning.</li> <li>• Evidence of training in life support, anaphylaxis and safeguarding (at level relevant to the role).</li> <li>• Practitioners must be competent, recognise their own limitations and personal accountability and act accordingly.</li> </ul>
<p><b>Ongoing training and competency</b></p>	<ul style="list-style-type: none"> <li>• Updating at least every 2 years, or earlier in response to new local/national guidance (or other sources of medicines information), on the use of PGDs and chlorhexidine gluconate 4% w/v scrub.</li> <li>• Annual PGD training (<a href="#">eLfh PGD eLearning programme</a>)- evidence to be submitted to line manager annually.</li> <li>• Practitioners must ensure they are up to date with relevant issues and clinical skills and management of anaphylaxis, with evidence of appropriate Continued Professional Development (CPD), which must be retained and made available on request.</li> <li>• Compliance with all mandatory NHS training including life support and safeguarding at the level relevant to the role.</li> </ul> <p><b>It is the responsibility of the healthcare professional to maintain their own competency to practice within this PGD. If any training needs are identified these should be discussed with the senior individual responsible for authorising individuals to act under the PGD and further training provided as required.</b></p> <p><b>The decision to administer/supply any medication rests with the individual registered healthcare professional who must abide by the PGD and any associated organisational policies.</b></p>

**Clinical condition**

<p><b>Clinical condition or situation to which this PGD applies</b></p>	<p>Skin disinfection of adults and children over 16 years old with a swab result positive for MRSA.</p> <p>This PGD is intended to be used in conjunction with the IPC 015 <a href="#">MRSA policy</a> and the PTHB mupirocin 2% nasal ointment <a href="#">PGD</a>.</p> <p>In addition:</p> <ul style="list-style-type: none"> <li>• Any individual found to be a carrier of MRSA should be assessed for evidence of infection – see IPC 015 <a href="#">MRSA policy</a> for further details. Refer to <a href="#">Eolas</a> for recommended management of wounds/small skin lesions and contact microbiology for advice if there are large lesions or wounds that appear infected (also refer to <a href="#">Eolas</a>). The need for indwelling catheters and intravascular devices should be reviewed by the responsible clinician, as advised in IPC 015 <a href="#">MRSA policy</a>.</li> <li>• Additional precautions as outlined in IPC 015 <a href="#">MRSA policy</a> must be taken for inpatients who test positive for MRSA.</li> </ul> <p>If in doubt, seek medical advice.</p> <p><b>It is the responsibility of the administering/ supplying healthcare professional to ensure that the individual is within the inclusion criteria, and that there are no reasons for exclusion before proceeding with the treatment. If there is any reason for concern, seek medical advice.</b></p>
<p><b>Inclusion criteria</b></p>	<ul style="list-style-type: none"> <li>• Adult or child over 16 years old (to include inpatients, individuals seen in pre-assessment clinic, and PTHB employees)</li> <li>• Individual presenting with a swab result positive for MRSA</li> <li>• Medical and drug history taken, no reason for exclusion</li> <li>• Informed consent from the individual or a person legally able to act on their behalf, must be obtained for <a href="#">off label</a> use and recorded appropriately. The <a href="#">patient information leaflet</a> should be available to inform consent. NB Refer to <a href="#">PTHB Consent to Treatment and Examination Policy</a>. The individual should be informed they will be treated using a PGD.</li> <li>• No prescriber is available within a reasonable timeframe</li> </ul> <p>In case of any doubt, contact relevant <a href="#">doctor</a>.</p>

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	<p>Any vulnerable adult or child protection concerns should be referred to <a href="#">Safeguarding</a> and <a href="#">PTHB safeguarding policies</a> followed. Consider discussing with GP. Where there are safeguarding concerns (Child Protection or Protection of Vulnerable Adults, POVA), advice from the local Safeguarding team should be sought (see <a href="#">below</a>).</p>
<p><b>Exclusion Criteria</b> (Exclusion under this PGD does not necessarily mean the medication is contraindicated, but it would be outside its remit and another form of authorisation will be required)</p>	<ul style="list-style-type: none"> <li>• Conditions outside of the clinical situations criteria</li> <li>• No valid consent or individual/representative refuses treatment. Individuals for whom valid consent, or 'best-interests' decision, in accordance with the <a href="#">Mental Capacity Act 2005</a>, has not been obtained or received. Refer to section '<a href="#">action to be taken if individual/carer declines treatment</a>'</li> <li>• Children under 16 years old</li> <li>• Pregnancy or breastfeeding</li> <li>• Known allergy or hypersensitivity to chlorhexidine gluconate 4% w/v scrub or to any of the components - see <a href="https://products.mhra.gov.uk">https://products.mhra.gov.uk</a>. NB the product may contain soya oil, so must not be used if any allergy to soya or peanuts</li> <li>• Individuals with broken skin</li> <li>• Individuals with previous or existing dermatitis/eczema where the use of chlorhexidine gluconate may possibly exacerbate these condition(s)</li> <li>• Individuals with head or spinal injuries or a perforated ear drum - refer to a prescriber to assess the risks and benefits of use</li> <li>• Individual who remains MRSA positive after 2 attempts of decolonisation - <b>further issues are not covered under this PGD. NB</b> inpatients requiring a second decolonisation attempt should have this prescribed by a prescriber</li> <li>• Contraindications listed in <a href="#">SPC</a> and <a href="#">BNF</a></li> </ul> <p>If in doubt, discuss with <a href="#">IP&amp;C team</a> and <a href="#">medical staff</a>.</p> <p>Refer to section '<a href="#">action to be taken if individual excluded</a>'.</p>
<p><b>Cautions/reasons for seeking further advice from a prescriber</b></p>	<p>Seek medical advice if individual has complex multiple allergies, polypharmacy, or for any medical condition or medication of which the healthcare professional is unsure or uncertain.</p> <p>Check for any other medications that the individual is taking, including topical or inhaled products, food supplements and herbal or homeopathic products. See <a href="#">Drug interactions</a> section.</p>

	<p>This list is not exhaustive. Practitioners should consult the <a href="#">BNF/SPC</a> for further information.</p> <p>Contact <a href="#">doctor</a> for advice and document advice given.</p> <p>Under Section 128 and 130 of the Social Services and Wellbeing (Wales) Act 2014, staff have a duty to inform the Local Authority if they have reasonable cause to suspect that an adult or child is at risk. Any vulnerable adult or child protection concerns should be referred to <a href="#">Safeguarding</a> and the <a href="#">PTHB safeguarding policies</a> followed. Consider discussing with GP.</p> <p>Any safeguarding concerns need to be directed to Safeguarding Hub:</p> <ul style="list-style-type: none"> <li>• To generic email address: <a href="mailto:PowysTHB.Safeguarding@wales.nhs.uk">PowysTHB.Safeguarding@wales.nhs.uk</a></li> </ul> <p>And</p> <ul style="list-style-type: none"> <li>• Central Safeguarding number: 01686 252806</li> <li>• Out of hours: 0345 0544847</li> </ul> <p>Advice can also be sought from <a href="#">local Safeguarding leads</a></p>
<p><b>Arrangements for referral for medical advice</b></p>	<p>Contact relevant practitioner, depending on the specific situation:</p> <ul style="list-style-type: none"> <li>• <a href="#">IP&amp;C team</a></li> <li>• Occupational health 01874 712600 <a href="mailto:Powys.OccuptionalHealthAdmin@wales.nhs.uk">Powys.OccuptionalHealthAdmin@wales.nhs.uk</a></li> <li>• Consultant microbiologist</li> <li>• The ward doctor taking responsibility for inpatients</li> <li>• Individual's own GP</li> <li>• Individual's own obstetrician (if pregnant)</li> <li>• Surgical Consultant caring for individual (if being assessed in pre-admission clinic)</li> <li>• Nearest A&amp;E (in an emergency situation)</li> <li>• Ophthalmologist</li> </ul> <p>Refer to IPC 015 '<a href="#">Management of adults with MRSA</a>' for further information on transfer and discharge of inpatients.</p> <p>Record reason for referral and document advice given.</p>

<p><b>Action to be taken if individual excluded</b></p>	<p>Explain reason to individual/carer, record reason in the individual's notes and seek advice from the <a href="#">relevant practitioner</a>, depending on the specific situation (see <a href="#">Arrangements for referral for medical advice</a>).</p> <p>Discuss with <a href="#">IP&amp;C team</a> to recommend a suitable alternative, however the alternative treatment would need to be prescribed by a prescriber.</p> <p>Provide the individual with an MRSA information leaflet (found in Appendix B of IPC 015 <a href="#">MRSA policy</a>).</p>
<p><b>Action to be taken if individual/carer declines treatment</b></p>	<p>Explain consequences of refusing treatment and the reasons why the Health Board requests that the individual complies with eradication therapy, as per IPC 015 <a href="#">MRSA policy</a>.</p> <p>Provide the individual with an MRSA information leaflet (found in Appendix B of IPC 015 <a href="#">MRSA policy</a>). Make individual/their representative aware of alternative sources of treatment (ie. prescription via GP if appropriate).</p> <p>Document refusal in the individual's notes and any advice given.</p> <p>Inform the <a href="#">relevant practitioner</a> responsible for the individual and the <a href="#">IP&amp;C team</a>, as appropriate.</p> <p>Where appropriate, complete the letter on the WPAS system and send to the GP/inform the GP or follow local procedures as appropriate.</p>

**Details of the medicine**

<p><b>Name, form and strength of medicine</b></p>	<p>Chlorhexidine gluconate 4% w/v scrub (solution)</p>
<p><b>Legal category</b></p>	<p>GSL</p>
<p><b>Off-label use</b></p>	<p>This use is 'off label' and outside of the terms of the summary of product characteristics (<a href="#">SPC</a>). Use of Chlorhexidine gluconate 4% w/v scrub for skin disinfection in the management of colonisation of individuals with a positive swab result for MRSA is advised in the PTHB antimicrobial guidelines <a href="#">Eolas</a>, PTHB MRSA Policy <a href="#">IPC 015</a>, and <a href="#">NG125</a>. Consider, as part of the consent process, informing the individual/carer that the drug is being</p>

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	<p>offered in accordance with national and local guidance, but this is outside the product license.</p> <p>Medicines should be stored according to the conditions detailed in the <a href="#">storage</a> section below. However, in the event of an inadvertent or unavoidable deviation of these conditions the local Medicines Management team must be consulted. Where medicines have been assessed by a pharmacy professional in accordance with national or specific product recommendations/manufacturer advice as appropriate for continued use, this would constitute off-label supply/administration under this PGD. The responsibility for the decision to release the affected medicines for use lies with the pharmacy professional.</p>
<p><b>Route/method of administration</b></p>	<p>Topical –wash the whole body using 25ml chlorhexidine gluconate 4% w/v scrub (undiluted) as a soap substitute in the bath or shower. The individual should then rinse thoroughly with water and dry with a clean towel. On days 2 and 4, chlorhexidine gluconate 4% w/v scrub should also be used as a shampoo to wash the hair.</p> <p>If relevant, individuals confined to bed can be washed with chlorhexidine gluconate 4% w/v scrub using a standard bed-bath technique.</p> <p>Remove any chlorhexidine gluconate 4% scrub soaked materials, drapes or gowns before proceeding with an intervention. Do not use excessive quantities and do not allow the solution to pool in skin folds or under the individual or drip on sheets or other material in direct contact with the individual. Where occlusive dressings are to be applied to areas previously exposed to chlorhexidine gluconate 4% scrub, care must be taken to ensure no excess product is present prior to application of the dressing.</p> <p><b>Avoid contact with the eye</b> due to the risk of visual damage. If contaminated, wash out immediately and thoroughly with water, and seek <a href="#">medical/ophthalmologist advice</a>.</p> <p><b>For external use only.</b> Do not use in body openings/cavities (eg. nose and ears).</p>
<p><b>Dose and frequency</b></p>	<p>Wash the whole body using 25ml chlorhexidine gluconate 4% w/v scrub as a soap substitute in the bath or shower once a day for 5 days, also using as a shampoo to wash hair on days 2 and 4.</p>

<p><b>Quantity to be administered and/or supplied</b></p>	<p><b>PTHB inpatients</b>                  Bathing/showering with each daily 25ml dose must be recorded on the stat. section of the inpatient medication record (indicating that the hair has also been washed using chlorhexidine gluconate 4% w/v scrub on days 2 and 4) by the healthcare professional working to the PGD.  <b>NB. delegation of tasks is not permitted when working to a PGD. The inpatient must be re-assessed using the PGD</b> (by a registered healthcare professional who is authorised to work to the PGD) <b>before each daily dose is used</b>, to confirm that the medication continues to be appropriate for the individual. As the treatment duration should be a <b>total of 5 days</b>, a prescriber must prescribe the remainder of the treatment course as soon as possible (ensure the prescriber is aware of any stat doses that have been administered, so the correct total course length is prescribed).</p> <p><b>All other individuals</b>                  A 250ml bottle of chlorhexidine gluconate 4% w/v scrub may be supplied to the individual. The individual must be advised as stated in this PGD and a copy of the leaflet: How to apply chlorhexidine gluconate 4% w/v scrub (<a href="#">Appendix B</a>) provided.</p>
<p><b>Maximum or minimum treatment period</b></p>	<p>For <b>all individuals</b> the duration of each course of eradication therapy should be 5 days.</p> <p>Re-swab 48 hours after completion of a treatment course to confirm eradication. Refer to <a href="#">Eolas</a> for recommended actions to take depending on the swab results.</p> <p>If post treatment swabs remain positive, eligible individuals (seen in pre-assessment clinic or PTHB employees) may be instructed to commence a second 5 day course under this PGD. There will be a sufficient amount in the original bottle issued – a further supply will not be required. Inpatients requiring a second decolonisation attempt should have this prescribed by a prescriber. The <a href="#">IP&amp;C team</a> must also be contacted for all individuals who have a post treatment positive swab.</p> <p>Advice from the <a href="#">IP&amp;C team</a> is required if an individual remains positive after 2 attempts of decolonisation. Further issues are not covered under this PGD.</p>
<p><b>Storage</b></p>	<p>This product should be ordered via Oracle and stored in the original package.</p>

	<p>Stock must be securely stored according to <a href="#">PTHB Medicines policy (MMP 001)</a> and in conditions in line with the SPC, accessed via <a href="https://products.mhra.gov.uk">https://products.mhra.gov.uk</a>.</p>
<p><b>Drug interactions</b></p>	<p>None known - refer to <a href="#">BNF/SPC</a> (<a href="https://products.mhra.gov.uk">https://products.mhra.gov.uk</a>).</p> <p>Chlorhexidine is incompatible with soap and other anionic agents.</p> <p>Refer to a <a href="#">prescriber</a> if any concern and document advice given.</p>
<p><b>Identification, management of, and reporting of adverse effects</b></p>	<p>Serious allergic reactions (particularly on repeated use) which can cause breathing difficulties, weakness, collapse and death, and can sometimes be preceded by swelling (in particular lip/tongue and facial swelling) or low blood pressure, or rash.</p> <p>Allergic skin reactions eg. dermatitis, itching, redness, eczema, rash, hives, skin irritation, blisters, dryness, stinging or burning sensation. Delayed hypersensitivity reactions in the skin have been reported including allergic contact dermatitis.</p> <p>May cause chemical skin burns.</p> <p>Corneal erosion, epithelium defect/corneal injury, and significant permanent visual impairment (following accidental ocular exposure)- in case of any irritation, redness or pain in the eye, or visual disturbance, stop using the product and seek medical/ophthalmologist advice immediately.</p> <p>Inflammation of the membranes of the brain and spinal cord has been reported when they have come into direct contact with chlorhexidine.</p> <p>Chlorhexidine gluconate 4% w/v scrub is flammable. Do not use with ignition sources until dry. The product may contain bergamot oil (containing bergapten) which may increase sensitivity to UV light (natural and artificial sunlight).</p>

If any suspected adverse reaction, the individual must stop using chlorhexidine gluconate 4% w/v scrub and see a doctor (urgent medical treatment may be required for the serious side effects). [Medical advice](#) should be sought as appropriate. In addition, contact the [IP&C team](#) for advice during normal working hours.

This list is not exhaustive- a detailed list of adverse reactions is available in the [BNF](#) or [SPC](#).

Healthcare professionals and individuals/carers are encouraged to report suspected adverse reactions to the Medicines and Healthcare products Regulatory Agency (MHRA) using the Yellow Card reporting scheme on: <http://yellowcard.mhra.gov.uk> or search for MHRA Yellow Card in the Google Play or Apple App Store. For established medicines, serious adverse events in adults or all suspected adverse reactions in children that may be attributable to the medication should be reported. Guidance on the yellow card system is available at the back of the BNF, or using the above link.

Record all adverse drug reactions (ADRs) in the individual's medical record and the individual's GP should be informed. Report any suspected adverse reactions to a doctor:

- If the individual is a member of staff, inform the occupational health department
- If the individual has been seen in pre-admission clinic, inform the Surgical Consultant caring for the individual

In case of an acute anaphylactic reaction occurring, adequate treatment provision must be available for immediate use: Anaphylaxis and resuscitation equipment including adrenaline (1 in 1000) injection and a working telephone.

In case of anaphylaxis:

- Refer to [adrenaline \(epinephrine\) PGD 0017](#) and [anaphylaxis procedure](#)
- Request medical assistance urgently. If the GP is not immediately available dial 999 to transfer to A&E
- Ensure reaction is fully documented in individual's notes
- Ensure all individual's records are marked **ALLERGIC TO chlorhexidine gluconate 4% w/v scrub** (and state manufacturer).
- The individual may be advised to wear a MedicAlert or similar device to alert other healthcare providers

	<p>All significant adverse drug reactions should be reported via the <a href="#">Once for Wales Reporting System</a>.</p>
<p><b>Records to be kept</b></p>	<p>Record consultation details as required by local procedures. In addition, record:</p> <ul style="list-style-type: none"> <li>• Name, address and date of birth of individual</li> <li>• Name and address of GP with whom the individual is registered (or record where an individual is not registered with a GP)</li> <li>• That valid informed consent to treatment was obtained or a decision to treat was made in the individual’s best interests in accordance with the <a href="#">Mental Capacity Act 2005</a>. Record name of representative who gave consent, if appropriate</li> <li>• Medical and drug history taken, including any allergies and previous adverse events and nature of reaction</li> <li>• Reasons for inclusion or exclusion from PGD; any reasons for referral, referral arrangements made and any actions taken</li> <li>• Any advice received from medic and advice given to individual/carer</li> <li>• If the individual has refused treatment, and any advice given</li> <li>• That the drug is being supplied/administered in accordance with a PGD- record PGD title, number and version</li> <li>• That off label use has been discussed with the individual</li> <li>• As recommended in IPC 015 <a href="#">MRSA policy</a>, individual’s notes should be flagged with an alert MRSA sticker on the inside of the notes and/or electronically</li> <li>• Record any advice given about the medication including side effects, benefits, and action to take if any concerns.</li> </ul> <p>For <u>administration</u>, record:</p> <ul style="list-style-type: none"> <li>• Date and time of administration</li> <li>• Name, form, strength and dose administered</li> <li>• Route of administration</li> <li>• Expiry date</li> <li>• Details of any adverse reactions and actions taken</li> <li>• <b>Administration as a stat dose on the inpatient chart.</b> There MUST be a record of <b>each administration via PGD</b> of the medication on the stat. section of the inpatient medication administration record</li> </ul>

	<p>For <u>supply</u>, record</p> <ul style="list-style-type: none"> <li>• Date of supply</li> <li>• Name, form, strength, dose, frequency and quantity of medication supplied</li> <li>• Expiry date of medicine and batch number.</li> </ul> <p>The records must include the date, printed name and signature (or a password controlled e-records) of the healthcare professional responsible for administration/supply.</p> <p>All records should be clear, legible and contemporaneous.</p> <p>A record of all individuals receiving treatment under this PGD should be kept for audit purposes in accordance with local policy.</p> <p>Inform the individual's GP as appropriate. If the individual is PTHB staff, inform the occupational health department.</p> <p><b>Additional records</b> to be kept by <b>Preoperative Assessment Clinic</b></p> <p>Use log book to record:</p> <ul style="list-style-type: none"> <li>• Individual's details</li> <li>• Document off label use discussed with individual</li> <li>• Name and signature of nurse supplying chlorhexidine gluconate 4% w/v scrub</li> <li>• Confirmation of letter sent to GP</li> <li>• Confirmation of letter sent to Surgical Consultant</li> </ul>
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**Information**

<p><b>Written/verbal information to be given to individual or carer</b></p>	<ul style="list-style-type: none"> <li>• Provide <a href="#">patient information leaflet</a> and MRSA information leaflet (found in Appendix B of IPC 015 <a href="#">MRSA policy</a>)</li> <li>• Give appropriate advice regarding off-label use and provide a copy of <a href="#">Appendix B</a>, stating directions, frequency of use and how to apply chlorhexidine gluconate 4% scrub</li> <li>• Explain indications, contraindications and cautions, possible side effects and their management</li> <li>• Advise individual to stop using chlorhexidine gluconate 4% w/v scrub and see a doctor straight away, if they notice any of the <a href="#">side effects</a>, as they may need urgent medical treatment.</li> <li>• If providing medication to take home:             <ul style="list-style-type: none"> <li>○ draw individual/representative's attention to the information leaflet stating the dosage (<a href="#">Appendix B</a>) and advise on the dosage to be taken - see <a href="#">dosage</a> section</li> </ul> </li> </ul>
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	<ul style="list-style-type: none"> <li>○ advise that all medication must be kept out of the reach of children</li> <li>○ advise to stop using if <a href="#">side effects</a> occur, wash the skin and seek <a href="#">medical advice</a></li> <li>○ any product remaining at the end of treatment should be discarded in accordance with local requirements</li> <li>● Advise that the product is for external use only. Medical advice should be sought immediately via A&amp;E if the product is accidentally swallowed, showing the label/ container</li> <li>● Ensure individual is aware of the importance of compliance with treatment and follow-up screening 48 hours after the completion of the course</li> <li>● If relevant, ensure staff member is aware of restrictions to working (if necessary)</li> <li>● Inform individual that common bleaches (which contain hypochlorites) may cause brown stains to develop on fabrics which have previously been in contact with chlorhexidine.</li> <li>● The action of chlorhexidine gluconate 4% w/v scrub may be reduced if used with soap or detergents.</li> <li>● Chlorhexidine gluconate 4% w/v scrub is flammable. Do not use with ignition sources until dry.</li> <li>● If you go into hospital, let your doctor know if you are using chlorhexidine gluconate 4% w/v scrub.</li> <li>● Seek medical advice immediately if overdose occurs.</li> </ul>
<p><b>Follow-up advice to be given to individual or carer</b></p>	<ul style="list-style-type: none"> <li>● Inform individual of possible side effects and their management.</li> <li>● Advise individual to seek medical advice immediately if they have any unexpected reaction or other cause for concern. Outpatients/staff should contact GP via surgery or emergency on call service; PTHB inpatients should inform the staff caring for them.</li> <li>● Arrange for the individual to be re-tested for MRSA carriage after 48 hours have elapsed from completion of the course, then refer to IPC 015 <a href="#">MRSA policy</a> for further requirements/actions to be taken.</li> </ul>

## Key references

1. BNF/BNF for children online: <https://bnf.nice.org.uk> accessed on 17/03/26
2. Summary of Product Characteristics:
  - Hydrex Surgical Scrub Chlorhexidine 4% w/v Skin Cleanser, last updated 17/09/2024; accessed via <https://products.mhra.gov.uk>
  - Hibiscrub, last updated 01/10/2024; accessed via <https://products.mhra.gov.uk>
3. Patient information Leaflets:
  - Hydrex Surgical Scrub Chlorhexidine 4% w/v Skin Cleanser, last updated 07/2024; accessed via <https://products.mhra.gov.uk>
  - Hibiscrub, last updated 07/2024; accessed via <https://products.mhra.gov.uk>
4. Antimicrobial Guidelines via [Eolas Medical](#) accessed 17/03/26
5. IPC 015 [Management of adults with MRSA](#) January 2023
6. [NG125](#) Surgical site infections: prevention and treatment. Last updated 19 August 2020
7. [NICE CKS MRSA in primary care](#). Last revised January 2024

## Appendix A: Staff Accredited to use this PGD

Authorising Manager: I confirm that the practitioners named below have declared themselves suitably trained and competent to work under this PGD. I give authorisation on behalf of Powys Teaching Health Board for the named healthcare professionals below who have signed the PGD to work under it.

*The authorising manager must use the competency checklist (below).*

Practitioner: *By signing this PGD you are indicating that you agree to its contents and that you will work within it. PGDs do not remove inherent professional obligations or accountability. It is the responsibility of each professional to practise only within the bounds of their own competence and professional code of conduct.*

I confirm that I have read and understood the content of this Patient Group Direction and that I am willing and competent to work to it within my professional code of conduct.

<b>Printed name of registered health professional</b>	<b>Signature of registered health professional</b>	<b>Printed name of senior representative authorising health professional</b>	<b>Signature of senior representative authorising health professional</b>	<b>Date</b>

The authorising manager should retain a copy of the list, which will be requested for audit purposes. This list should be kept by PTHB for 25 years after the PGD expires.

The healthcare professional should retain a copy of the document after signing.

**Competency check list for manager or senior team lead to use as part of the authorising process for health professionals to work to a Patient Group Direction (PGD).** Review of authorisation will take place on each PGD update and at the individual's annual PADR.

Name: Role:		Sign / Initial	Further training identified (Y/N) Specify in " comment s"	Comments
1	The PGD sign off is for the following PGD:(document the exact title and PGD number)			
2	We have discussed the expiry of the PGD and are using a version accessed electronically			
3	The member of staff has the appropriate qualifications and professional registration as outlined in the PGD			
4	The Patient Group Direction has been read in full by the staff member			
5	The identified training has been completed as specified in the PGD and is in date			
6	We have discussed some examples of inclusion criteria and exclusion criteria			
7	The staff member is confident in the administration method and doses			

Staff member print & sign name		Date
Manager or senior team lead to print & sign name		Date

Please send a copy of this completed form to individual's line manager, and to the staff member, in conjunction with the PGD Appendix A authorisation sheet. A copy of this form should also be kept by service lead in the training file.



## Appendix B:

### How to apply chlorhexidine gluconate 4% w/v scrub

- Wash hands before use.
- Wash the whole body using 25ml chlorhexidine gluconate 4% w/v scrub as a soap substitute in the bath or shower:
  - 25ml of the undiluted solution should be applied to moist skin using hands or a disposable cloth.
  - Begin with the face and work downwards, paying particular attention to the areas around the nose, underarms, groin / perianal area and in between your toes
  - Leave the solution on the skin for about 3 minutes
  - Rinse off the skin thoroughly with water and dry with a clean towel
  - **Not** to be used with soap or detergents, as the effect may be reduced
- The body should be washed with chlorhexidine gluconate 4% w/v scrub **once daily for 5 days**
- Also apply chlorhexidine gluconate 4% w/v scrub neat to wet hair, **using as a shampoo on days 2 and 4.**
- Wash hands after use
- **Avoid contact with the eyes** – if contaminated, wash out immediately and thoroughly with water and seek immediate medical/ophthalmologist advice
- **For external use only** – do not use in body openings/cavities (eg. nose and ears)
- Should only be used on intact skin