



Their first defence is you.

3M[™] Avagard[™] Antiseptic CHG Surgical Hand Rub (Chlorhexidine Gluconate 1% w/w and Ethyl Alcohol 61% w/w)

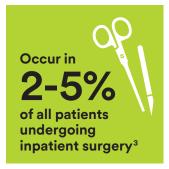
Surgical Antiseptic Hand Rub and HCP Antiseptic Hand Rub



Clean hands. Protected patients.

As a child you learned that clean hands helped you stay healthy and stop the spread of germs. Now, as an adult you know that proper hand hygiene can help stop the spread of Healthcare-Associated Infections (HAIs). The CDC states that "Practicing hand hygiene is a simple yet effective way to prevent infections," yet healthcare workers (HCW) generally clean their hands less than half as often as they should.¹

WHO reports that nearly all HAIs can be prevented through proper hand hygiene at the right time.² However, statistics show the challenge of the situation; HAIs:



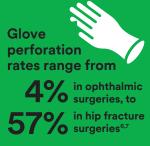












Inside the OR: an effective answer.

The right surgical scrub can make a big difference. 3M™ Avagard™ Antiseptic CHG Surgical Hand Rub contains two active ingredients: the immediate bacterial kill of ethanol and the long-term action of CHG.

Avagard™ Antiseptic CHG Surgical Hand Rub can be used for the first scrub of the day and every scrub of the day.

Surgical hand scrubs and antiseptics should not only provide effective microbial kill, but protect and maintain skin barrier integrity as well, thereby reducing the risk of colonisation and shedding of infectious agents.⁸ 3M™ Avagard™ Antiseptic CHG Surgical Hand Rub is formulated in an emollient-rich lotion base to help maintain the skin's integrity.

Additionally, because Avagard Antiseptic CHG Surgical Hand Rub is applied without water or scrub brushes, mechanical trauma can be avoided.



You deserve a scientific solution.

Sustained antimicrobial activity with added moisturisers make hand hygiene an easy habit.

Outside the OR: continued protection.

In contrast to the OR, healthcare workers in the ICU come into contact with many surfaces that harbour potential pathogens. These surfaces, referred to as high touch surfaces, include light switches, bedside tables, bed rails, telephones, door handles, keyboards, and medical equipment among others. Pathogens are known to survive on inanimate surfaces for months. The risk for transmission of pathogens from contaminated surfaces to the patient via healthcare workers' hands is significant.

Avagard Antiseptic CHG Surgical Hand Rub combines the instant power of ethanol with long-lasting chlorhexidine gluconate to accomplish both the immediate and continued protection needed for patient care.





Stopping bacteria wherever you are.

Choosing an effective, persistent hand antiseptic can help create a safer facility.

So, whether in the operating room, PACU, ICU, or other areas in your facility, remember the basics of practicing hand hygiene to reduce microorganisms on your hands.

Ordering Information

	Catalog Number	Product Name	Items/Case
For a second sec	9200	3M™ Avagard™ Antiseptic CHG Surgical Hand Rub (500 mL)(Dispenser Bottle)	8
	9201A [*] 9201 ^{**}	3M™ Avagard™ Wall Bracket and Foot Pump (Use with 9200)	10 1"
Case	9202	3M™ Avagard™ Wall Bracket and Hand Pump (Use with 9200, not in the OR)	1
	9228	3M™ Avagard™ Hands Free Wall Dispenser (Use with 9200)	4
ANGARO	9204	3M™ Avagard™ Nail Cleaners 9204	(6 Containers/ Case, 150 cleaners

References

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- Anderson DJ, Podgorny K, Berrios-Torres SI, et al. Strategies to prevent surgical site infections in acute care hospitals: 2014 Update. Infect Control Hosp Epidemiol. 2014;35(6):605–27.
- World Health Organization. WHO Guidelines on Hand Hygiene in Health Care. Geneva, Switzerland: World Health Organization; 2009.
- Harnoss JC, Partecke LI, Heidecke CD, Huebner NO, Kramer A, Assadian O. Concentration of bacteria passing through puncture holes in surgical gloves. Am J Infect Control. 2010;38:154-158.
- 6. Nakazawa M, Sato K, Mizuno K. Incidence of perforations in rubber gloves during ophthalmic surgery. Opthalmic Surg. 1984;15:236-240.
- Eckersley JR, Williamson DM. Glove punctures in an orthopaedic trauma unit. Injury. 1990;21:177-178.
- Larson E, Norton Hughes CA, Pyrek JD, Sparks SM, Cagatay EU, Bartkus JM. Changes in bacterial flora associated with skin damage on hands of health care personnel. Am J Infect Control. 1998; 26:513–521.
- 9. Kramer A, Schwebke I, Kampf G. How long do nosocomial pathogens persist on inanimate surfaces? BMC Infect Dis. 2006;6:130.
- Weinstein RA. Epidemiology and control of nosocomial infections in adult intensive care units. Am J Med. 1991; 91 (Issue 3, Suppl 2): S179-184.

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For more information contact your 3M Sales Representative on 1300 363 454 (Australia) or 0800 80 81 82 (New Zealand)

per container)

