

Best Practices for SaniiSwab™ Nasal Decolonization Use

The SaniiSwab™, two-step, alcohol-based decolonization method is a proven infection prevention practice that's easy to use and can be self-administered to deliver the required compliance necessary for successful HAI reduction outcomes.

INSTRUCTIONS FOR SANIISWAB™ USE

The SaniiSwab™ two-step, surgically proven nasal decolonization prep is easily incorporated into the healthcare facility's selected decolonization policy. Instructions for use (IFU) are as follows and can be self-administered in two easy steps:



STEP 1 PACKET: Open, remove and hold SaniiSwab™ handle between thumb and index finger. Insert swab — one into each nostril placing the swab against the nostril skin. Mechanically clean both nasal vestibules by rotating swabs in a circular motion at least seven times. Discard used cleansing swab and proceed to Step 2.



STEP 2 PACKET: Open, remove and hold SaniiSwab™ handle between thumb and index finger. Insert both swabs into cleansed nostrils placing swabs against the nostril skin. Sanitize the now clean nasal vestibules by rotating the swabs in a circular motion seven times. Discard the used sanitizing swab.

FREQUENCY OF SANIISWAB™ USE

Studies suggest the broader use of alcohol-based nasal decolonization protocols such as SaniiSwab™ for inpatient population in healthcare facilities enhances the reduction of HAIs, including the incidence of MRSA, bacteria and surgical site infections (SSIs).¹

While single daily use of SaniiSwabTM has been proven to be effective, more frequent daily applications of alcohol-based decolonization products must be delivered for colony suppression to minimize the opportunity for infection and pathogen transfer. The following are evidenced-based suggested use guidelines for adults and children over the age of twelve: $^{3.4}$

- Preoperative: Two to three times daily; initial application 3-5 days prior to scheduled surgical procedure
- · Day of Surgery: Within one hour immediately prior to surgical procedure and again post procedure
- Postoperative: Two to three times daily after surgery for two weeks or 5-7 days after discharge
- High-Risk Areas (ICU, Immunocompromised Patient Units): Two to three times daily
- Inpatient: One to two times per day
- Healthcare Practitioners (HCP): Two to three times per work shift based on length of shift in all high-risk areas

The importance of nasal decolonization as part of a facility's disinfection protocol for the reduction of HAIs cannot be understated. Prior research has found that higher S. aureus loads in the nares are associated with a higher likelihood of colonization and the potential for the development of infection.⁵

BACKGROUND

The use of SaniiSwab™, an alcohol-based nasal hygiene, decolonization technique has been proven to be an effective infection prevention practice supporting the reduction of hospital-associated infections (HAIs).6

Targeted decolonization and universal decolonization are policy strategies employed by healthcare facilities for the prevention of HAIs, particularly those caused by methicillin-resistant Staphylococcus aureus (MRSA).⁷

The CDC defines targeted decolonization as treatment for those individuals already known to be colonized with MRSA, while universal decolonization is therapy for all at-risk patients regardless of screening status.

Recent evidence suggests there is a movement away from the targeted approach reserved for high-risk patients to one that favors horizontal or a universal strategy, which incorporates more extended patient populations within the healthcare facility.8

REFERENCES

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