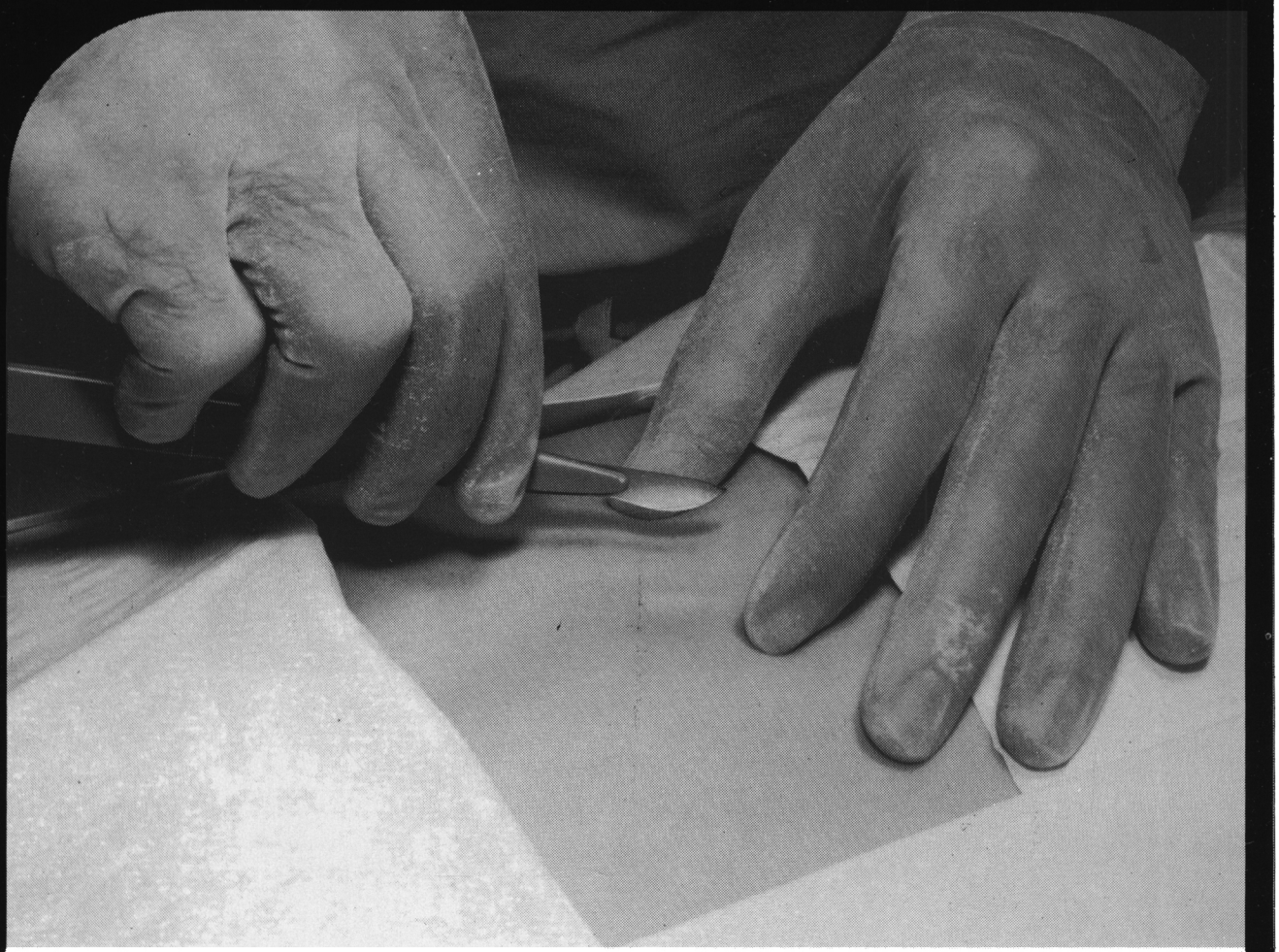

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Delayed results from culture tests are fine, but you also need Diack® and Vac controls to tell you instantly if something has gone wrong during sterilization. No waiting. No guessing. No worrying. As soon as you open that pack, a glance tells you if something is wrong. It may be a human error or a sterilizer malfunction . . . but Diack is there to tell you on the spot. Reliably. Simply. If the glass-enclosed pellet hasn't melted, something is definitely wrong. Diacks: 250° F. Vacs: 270° F. Simply reliable . . . reliably simple.

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CIDEX FORMULA 7* Solution stands on a proud record of safety and scientific acclaim. Now the Effectiveness Test Kit adds a new dimension of safety. Because no matter what solution you use, inadvertent dilution can occur. This simple, two-minute test pushes medical technology ahead in the same way that spore strips did for ETO and steam. You'll want the Effectiveness Test Kit as a routine link in your total patient care system. The Effectiveness Test Kit — one more reason why SURGIKOS sets the pace in hospital asepsis.

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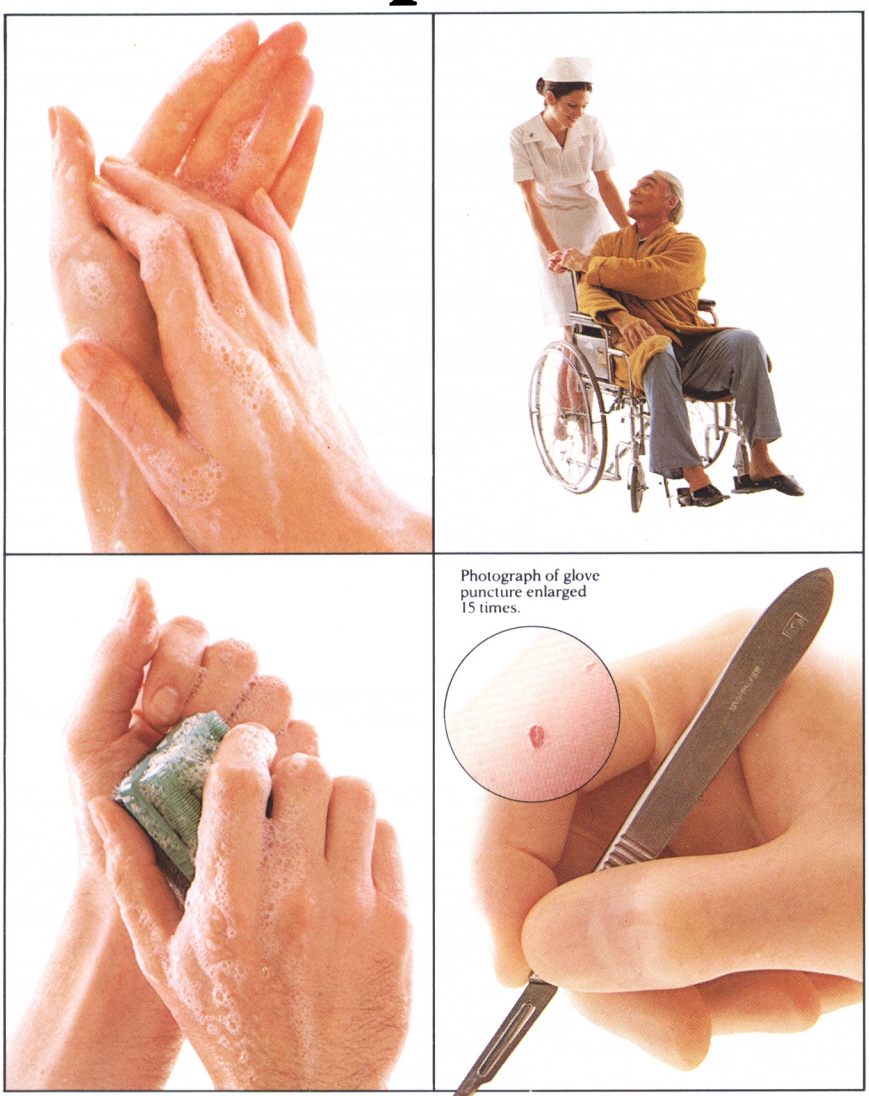
In patient contact and in the OR: Staff care ...not staph carriers.



Regular handwashing with pHisoHex reduces skin levels of gram-positive bacteria—especially staph, a major cause of hospital infection.[1] It helps to prevent transmission of gram-positive infections by personal contact. After regular use, an antibacterial film develops that provides sustained protection.

In the OR, pHisoHex retards bacterial regrowth inside the glove, providing extended protection in longer procedures and in cases of glove puncture.[2]

A gentle emulsion (pH 5.0 to 6.0), pHisoHex minimizes drying and cracking that invite bacterial colonization.

pHisoHex®
brand of
hexachlorophene detergent cleanser

contains a colloidal dispersion of hexachlorophene 3% (w/w) in a stable emulsion consisting of entsufon sodium, petrolatum, lanolin cholesterols, methylcellulose, polyethylene glycol, polyethylene glycol monostearate, lauryl myristyl diethanolamide, sodium benzoate, and water. pH is adjusted with hydrochloric acid. Entsufon sodium is a synthetic detergent (sodium octylphenoxyethoxyethyl ether sulfonate).

Before prescribing, please consult the following product information:

CLINICAL PHARMACOLOGY: pHisoHex is a bacteriostatic cleansing agent. It cleanses the skin thoroughly and has bacteriostatic action against staphylococci and other gram-positive bacteria. Cumulative antibacterial action develops with repeated use. This antibacterial residue is resistant to removal by many solvents, soaps, and detergents for several days.

pHisoHex has the same slight acidity as normal skin (pH value 5.0 to 6.0).

INDICATIONS AND USAGE: pHisoHex is indicated for use as a surgical scrub and a bacteriostatic skin cleanser. It may also be used to control an outbreak of gram-positive infection where other infection control procedures have been unsuccessful. Use only as long as necessary for infection control.

CONTRAINDICATIONS: pHisoHex should not be used on burned or denuded skin.

It should not be used as an occlusive dressing, wet pack, or lotion.

It should not be used routinely for prophylactic total body bathing.

It should not be used as a vaginal pack or tampon, or on any mucous membranes.

pHisoHex should not be used on persons with sensitivity to any of its components. It should not be used on persons who have demonstrated primary light sensitivity to halogenated phenol derivatives because of the possibility of cross-sensitivity to hexachlorophene.

WARNINGS: RINSE THOROUGHLY AFTER USE, especially from sensitive areas such as the scrotum and perineum.

Rapid absorption of hexachlorophene may occur with resultant toxic blood levels, when preparations containing hexachlorophene are applied to skin lesions such as ichthyosis congenita, the dermatitis of Letterer-Siwe's syndrome, or other generalized dermatological conditions. Application to burns has also produced neurotoxicity and death.

pHisoHex SHOULD BE DISCONTINUED PROMPTLY IF SIGNS OR SYMPTOMS OF CEREBRAL IRRITABILITY OCCUR.

Infants, especially premature infants or those with dermatoses, are particularly susceptible to hexachlorophene absorption. Systemic toxicity may be manifested by signs of stimulation (irritation) of the central nervous system, sometimes with convulsions.

Infants have developed dermatitis, irritability, generalized clonic muscular contractions and decerebrate rigidity following application of a 6 per cent hexachlorophene powder. Examination of brainstems of those infants revealed vacuolization like that which can be produced in newborn experimental animals following repeated topical application of 3 per cent hexachlorophene. Moreover, a study of histologic sections of premature infants who died of unrelated causes has shown a positive correlation between hexachlorophene baths and lesions in white matter of brains.

pHisoHex is intended for **external use only.** If swallowed, pHisoHex is harmful, especially to infants and children.

pHisoHex should not be poured into measuring cups, medicine bottles, or similar containers since it may be mistaken for baby formula or other medications.

PRECAUTION: pHisoHex suds that get into the eyes accidentally during washing should be rinsed out promptly and thoroughly with water.

ADVERSE REACTIONS: Adverse reactions to pHisoHex may include dermatitis and photosensitivity. Sensitivity to hexachlorophene is rare; however, persons who have developed phototallergy to similar compounds also may become sensitive to hexachlorophene.

In persons with highly sensitive skin, the use of pHisoHex may at times produce a reaction characterized by redness and/or mild scaling or dryness, especially when it is combined with such mechanical factors as excessive rubbing or exposure to heat or cold.

TREATMENT OF ACCIDENTAL INGESTION: The accidental ingestion of pHisoHex in amounts from 1 to 4 oz has caused anorexia, vomiting, abdominal cramps, diarrhea, dehydration, convulsions, hypotension and shock, and in several reported instances, fatalities.

If patients are seen early, the stomach should be evacuated by emesis or gastric lavage. Olive oil or vegetable oil (60 ml or 2 fl oz) may then be given to delay absorption of hexachlorophene, followed by a saline cathartic to hasten removal. Treatment is symptomatic and supportive; intravenous fluids (5% dextrose in physiologic saline solution) may be given for dehydration. Any other electrolyte derangement should be corrected. If marked hypotension occurs, vasopressor therapy is indicated. Use of opiates may be considered if gastrointestinal symptoms (cramping, diarrhea) are severe. Scheduled medical or surgical procedures should be postponed until the patient's condition has been evaluated and stabilized.

HOW SUPPLIED: pHisoHex is available in unbreakable plastic squeeze bottles of 5 oz (refillable) and 1 pt, and in plastic bottles of 1 gal.

Also available—¼ oz (8 ml) unit packets, boxes of 50.

pHisoHex should not be dispensed from, or stored in, containers with ordinary metal parts. A special type of stainless steel must be used or undesirable discoloration of the product or oxidation of metal may occur. Specially designed dispensers for hospital or office use may be obtained through your local dealer.

References: 1. Steere AC, Mallison GF: Handwashing practices for the prevention of nosocomial infections. *Ann Intern Med* 83:683-690, 1975. **2.** Data on file, Winthrop Laboratories.

3306

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The light of Alfred Nobel's genius still shines brightly. He was an innovative scientist and engineer, a brilliantly successful businessman, and a deeply humane philanthropist.

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