

HHF - PROCEDURE

ORIGINAL DATE: 10/02

REVISED: 08/05

SUBJECT: NORMAL SALINE

PURPOSE: To describe the use and storage of normal saline.

Considerations

Normal saline is used for many treatment purposes including wound cleansing and as an agent for moisturizing gauze dressings for wound care.

Procedure

1. Normal saline should be used according to physician's order. The smallest container (e.g. – 500 ml) should be ordered.
2. Upon opening, the bottle of normal saline must be labeled with the date and time opened.
3. If the contents of a bottle of normal saline will not be used within a 24-hour period, the bottle must be stored in the patient's refrigerator or discarded at the end of the 24-hour period of time.
4. Normal saline that is kept refrigerated may be used for a 30-day period of time. If not used within 30 days, the bottle must be discarded and a new bottle opened.
5. Do not use any container of normal saline that has visible turbidity, leaks, cracks or particulate matter.
6. Open the container without contaminating the fluid, the inside neck of the bottle, or the inside of the top of the cap.
7. Place the cap face up when the container is open and being used. Replace the cap as soon as possible to reduce risk of contamination.
8. Pour the intended amount of saline into a secondary container.
9. Discard the solution if the integrity is compromised or solution is contaminated.
10. The clinician should also consider consulting with the ordering physician to determine if use of contact lens solution or other normal saline based wound cleansers (ex.- Sea Cleanse) with non-cytotoxic preservatives can be used to care for the patient. These products have extended shelf-lives (see manufacturer's information on the product or product insert) and can be kept at room temperature for a greater length of time than traditional normal saline.
11. The physician order in the medical record must reflect the type of cleansing solution ordered for the patient.

Reference:

"Irrigation Solution Storage and Use", Home Health Care Nurse, Volume 21, November, 2003, p. 754

Policy Committee: 06/14/05