

# Infection Prevention and Control FACT SHEET METHICILLIN RESISTANT STAPH AUREUS (MRSA)

Information for Patients and Visitors

### What is MRSA?

Staphylococcus aureus is a bacteria that lives on the skin and mucous membranes of healthy people. Occasionally S. aureus can cause an infection. When S. aureus develops resistance to certain antibiotics, it is called methicillin-resistant Staphylococcus aureus, or MRSA.

### How is MRSA Spread?

MRSA is spread from one person to another by contact. MRSA is most commonly spread via the contaminated hands of health care workers who acquire it from contact with colonized or infected patients, or after handling contaminated material or equipment. MRSA can live on hands and objects in the environment.

## What Special Precautions are needed for MRSA?

It is important that special precautions are taken to stop MRSA from spreading to other patients in the hospital. These precautions include:

- Single room (the door can remain open)
- A long-sleeved gown and gloves must be worn by everyone who enters your room; this is called personal protective equipment (PPE). A mask may be required if the patient is coughing.
- A sign will be placed at the doorway advising staff and visitors about the special precautions.
- The room and the equipment used in the room will be cleaned and disinfected regularly.
- Everyone who leaves your room must remove their PPE, gloves first, and then gown, before
  exiting the room and discard into the covered garbage hamper located just inside the doorway.
- Clean hands well with alcohol based hand rub, promptly after removal of PPE, before leaving the patient's room.
- Visitors must not eat or drink while visiting in the patient's room, see the 'Helpful Tips for Visitors to Isolation Rooms' information tear off sheet at the patient's doorway.

#### **How is MRSA Treated?**

For most patients MRSA does not require medication, if there is no infection. Often patients who are positive for MRSA are just carrying the bacteria on their skin or in their bowels or respiratory tract, and that is called being colonized. MRSA in colonized patients does not cause any harm if there are no symptoms or signs of infection, and usually no treatment is prescribed. Usually it is not recommended to use medication to remove the bacteria or de-colonize a patient who is a carrier; however it is advised that you discuss the risks and/or benefits of treatment with your physician.

## What about Family/Visitors?

Visitors are welcome but should ask for instructions from the nurse when visiting for the first time. It is important for visitors to closely follow PPE and hand hygiene instruction so that the bacteria does not spread to other patients. Visitors should not bring coats and personal items like purses or bags into the isolation room. Hooks are located outside some of the patient rooms or ask for a plastic bag from the nurse if the item must be brought into the room for security reasons.

### **Good Hand Hygiene Practices:**

Staff and visitors must practice good hand hygiene before and after they touch you or items in your room like the bed, medical equipment or wheelchair. Ask your nurse to show you the correct way to clean hands for yourself and visitors (15 seconds of soap and running water OR apply alcohol hand rub until hands are dry).

## Hands must be cleaned:

- After using the bathroom
- After blowing your nose

- Before eating and drinking
- Before and after you touch your dressing or wounds
- When your hands are visibly dirty (soiled)
- Before you leave your room

## What Will Happen at Home?

For hospitalized patients who are weakened by illness, and may have surgical incisions or catheters, MRSA can mean a higher risk for infection and that is why precautions are very important while in the hospital. Once a patient with MRSA goes home, the chance of spreading the bacteria to household members is small, but, we do recommend that you practice the following:

- Everyone who might help you with your personal hygiene or with going to the toilet should wash their hands after contact with you.
- Everyone should wash hands before preparing meals and before eating.
- Everyone should wash their hands well after using the toilet, and don't share hand towels.
- Clothing may be laundered in the same manner as the rest of the household laundry.
- No special cleaning of furniture or items (e.g. dishes) in the home is required.
- Always tell your physician, paramedics, nurses or other care providers that you have MRSA. This
  helps prevent spread to others.
- Upon return to the hospital always notify the healthcare worker that you have a history of MRSA.

## **Computer Alerts for MRSA**

- A record of the MRSA positive swabs will remain on our personal computer record so that if you return to our hospital, special precautions in a private room will be taken until MRSA screening swab results are known. The computer alert is never removed, as patients can carry these bacteria for a lifetime, and always have the potential to be positive again even after several negative swabs.
- Sometimes the precautions can be stopped during an admission if there is a record of three negative MRSA swabs, including negative swabs collected on the current admission. Removal of the precautions will only apply to that hospital stay; swabs must be collected on each admission before precautions can be stopped.

## References:

- Public Health Ontario (PHO). Provincial Infectious Diseases Advisory Committee (PIDAC). Annex A: Screening, Testing and Surveillance for Antibiotic-Resistant Organisms (AROs) February 2013. <a href="http://www.publichealthontario.ca/en/eRepository/PIDAC-IPC Annex A Screening Testing Surveillance AROs 2013.pdf">http://www.publichealthontario.ca/en/eRepository/PIDAC-IPC Annex A Screening Testing Surveillance AROs 2013.pdf</a>
- 2. Public Health Ontario (PHO). Provincial Infectious Diseases Advisory Committee (PIDAC) Routine Practices and Additional Precautions in All Health Care Settings. Third Edition November 2012. http://www.publichealthontario.ca/en/eRepository/RPAP All HealthCare Settings Eng2012.pdf

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