# Methicillin-Resistant Staphylococcus aureus

Information for health care settings

Staphylococcus aureus, or staph, is a bacterium found in the nose or on the skin. Staph bacteria are usually harmless, but they can sometimes cause serious infection. Most staph infections can be treated with antibiotics, but some strains have developed antibiotic resistance. **Methicillin-resistant** Staphylococcus aureus (MRSA) bacteria are resistant to common antibiotics used to treat staph infections including methicillin, ampicillin, and other penicillins.

#### How is MRSA spread?

MRSA can spread through direct contact with patients or residents who are colonized or infected with it or by the hands or clothing of health care personnel (HCP). MRSA can also spread through contaminated surfaces or items in the patient's or resident's environment. A person who is **colonized** with MRSA carries the organism in or on their body, but it is not causing symptoms. People who are colonized can spread the organism to other people.

#### Who is at risk for MRSA?

People who are at higher risk for MRSA infections include those:

- Who receive frequent health care.
- Who require indwelling medical devices such as ventilators or urinary catheters.
- Who have surgery or wounds.

### How are MRSA infections treated?

Treatment of MRSA depends on the location and severity of the infection. Some infections are treated by draining the pimples or boils that develop on the skin, while others will require antibiotics. People who are colonized that do not show active signs of infection do not generally require treatment.

### Why is MRSA infection prevention important?

MRSA infections can sometimes spread throughout the body and cause more serious infections such as sepsis, pneumonia, and bloodstream infections. These types of infections are serious and can lead to death. MRSA bacteria can also pass their resistance to other bacteria, which can lead to widespread antibiotic resistance.



### What can HCP do to prevent the spread of MRSA?

## ☑ Practice consistent hand hygiene with alcohol-based hand sanitizer (ABHS) or soap and water.

HCP should perform hand hygiene **before and after** changing dressings, providing patient or resident care (such as bathing, dressing, or changing linen), and accessing indwelling devices. Patients and residents should also be encouraged to perform hand hygiene often.

## ☑ Increase the frequency of environmental cleaning and disinfection, especially for frequently touched surfaces.

Thoroughly clean and disinfect all shared patient and resident care equipment, such as lift slings and vital signs devices, after use. Be sure to follow the disinfectant's instructions for proper contact time. Whenever possible, use single-use, disposable, non-critical equipment or dedicate equipment to one patient or resident.

## ☑ Follow appropriate precautions and ensure personal protective equipment (PPE) is used properly.

#### For non-nursing home settings:

Follow your facility's multidrug-resistant organism (MDRO) isolation policy. Contact precautions may be implemented for patients or residents colonized or infected with an MDRO. HCP should wear a gown and gloves when interacting with the patient or resident or their environment. Further considerations for implementing additional precautions, such as proper room placement, can be found in the DHS *Guidelines for Prevention and Control of MDROs in Health Care Settings* (www.dhs.wisconsin.gov/publications/p4/p42513.pdf).

#### For nursing homes only:

Enhanced barrier precautions (EBPs) may be implemented based on a local risk assessment. EBPs may be used for residents who are colonized or infected with an MDRO or those with wounds or indwelling medical devices, regardless of MDRO status, when contact precautions don't otherwise apply. With EBPs, HCP should wear a gown and gloves during high-contact resident care activities. Further consideration for implementing additional precautions, such as proper room placement, can be found in DHS *Recommendations for Prevention and Control of Targeted MDROs in Wisconsin Nursing Homes* (www.dhs.wisconsin.gov/publications/p03250.pdf).

## ☑ Communicate MDRO status when patients or residents receive ancillary services or transfer to another health care facility.

When a person who is colonized or infected with an MDRO is transferred to another health care facility, leaves the facility for an outpatient clinic visit, or receives other ancillary services, the receiving facility must be informed of the person's MDRO status so that proper precautions can be taken in those settings.

## For more information, visit the Wisconsin HAI Prevention Program MRSA webpage (www.dhs.wisconsin.gov/disease/mrsa.htm)



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