

## **Massachusetts Department of Developmental Services Risk Management Protocols**

**Subject:     METHICILLIN RESISTANT STAPHYLOCOCCUS AUREUS – MRSA**

### **What is it?**

Methicillin resistant staphylococcus aureus (MRSA), is a bacteria that can colonize or infect people. MRSA is a strain of the bacteria Staphylococcus Aureus, which is resistant to the antibiotics Methicillin, Nafcillin or Oxacillin. **Staphylococcus aureus** is a type of bacteria (germ) that is commonly found on the skin and mucous membranes (such as inside the nose). These same bacteria may cause disease when:

- An open wound or nick in the skin allows the bacteria to enter the body;
- There is a place where the bacteria can accumulate and multiply, e.g. alongside a catheter or any plastic prosthesis;
- The body's resistance to infection is diminished; and/or
- Other helpful bacteria have been destroyed by antibiotics.

MRSA is **transmitted by direct person-to-person contact, usually on the hands of caregivers**. Transmission mode is determined by source of infection. **If a person has no signs of infection, there is no need to test individuals for the presence of the bacteria.**

MRSA is distinguished from most other bacteria because it is particularly resistant to antibiotics. With the increased incidence of MRSA in hospital and other health facilities, increased numbers of individuals diagnosed with MRSA are living in the community. Proper management for infected individuals will prevent the spread of infection to other individuals and personnel.

### **Common Definitions:**

Colonized Individual (carrier): Any person who is found to be culture-positive for MRSA, but has no signs or symptoms of infection caused by the organism (asymptomatic).

Community Acquired Infection: An infection acquired from a non-hospital source.

Decolonize: To administer topical and/or systemic antimicrobial agents for the purpose of eradicating MRSA carriage by an individual.

Infected Person: Any individual who has laboratory and clinical evidence of disease (symptoms of illness) caused by MRSA

Nosocomial Infection: An infection acquired in a hospital.

Outbreak: An increase in the incidence of MRSA above its expected normal level. An outbreak is suggested if there are three or more cases that are linked by person (e.g., same health care provider), place (e.g., same wing, room) or time (onsets within 10 days of one another) of occurrence in a given facility.

Standard Precautions: A system of protective actions that assumes that all body substances may contain potentially infectious material. It requires good hand washing technique and use of barriers such as gloves, gowns, masks and eye protection to prevent transmission based on source of infection.

Universal Precautions: A system of protective actions similar to Standard Precautions but which apply only to blood spills or body fluids.

### What risk does this present?

- Sepsis – (Life threatening condition caused by overwhelming infection of the bloodstream)
- Risk of outbreak or transmission to other individuals who may be in poor health or have a weakened immune system

### How is managed?

- It is the expectation of the Department of Developmental Services (DDS) that MRSA is managed in the individual's environment(s) with as little disruption as possible to their routine.
- Universal Precautions
- Information regarding the individual's status relative to this issue is to be handled in the same manner as any medical information according to HIPAA regulations.
- Notify the DDS Area Office Nurse, and other relevant programs, immediately of a new diagnosis or change in diagnosis regarding this issue.

### Where and to whom do these recommendations and protocols apply?

These guidelines apply to the care in all settings of any individual supported by DDS who has MRSA. These guidelines apply to all staff.

### Where can I find additional help?

- NIH – [www.nih.gov](http://www.nih.gov)
- CDC – [www.cdc.gov](http://www.cdc.gov)
- DPH – [www.mass.gov/dph](http://www.mass.gov/dph)