

MRSA/MSSA Screening

What is MRSA/MSSA colonization and why is this so important?

- *Staphylococcus aureus*, often called “Staph,” are bacteria that live on the skin of about 25% to 30% of people. Bacteria are also called germs. Staph germs can be on the skin and in the nose of healthy people who do not have infections (this is known as colonization).
- All of us have germs on our skin. Having Staph germs in your nose or on your skin increases your risk of infection after surgery. This is because the skin has been cut, giving any germ a way to get into another area of your body.
- Antibiotics are used to treat Staph infections. Some Staph are easily treated with common penicillin-type antibiotics. These Staph germs are called Methicillin Sensitive *Staphylococcus aureus* or MSSA.
- However, common antibiotics do not kill some Staph because some they are “resistant” to these antibiotics. These Staph germs are called Methicillin Resistant *Staphylococcus aureus* or MRSA.

Why we swab your nose for MRSA/MSSA bacteria before surgery

- Together the MSSA and the MRSA bacteria cause more than 40% of infections after surgery. Anytime the skin is cut, there is a potential for bacteria from your skin to get inside the cut and cause infection. Your surgical team does many things to reduce the risk of infection, such as cleaning the skin prior to surgery and administering antibiotics, but the risk for infection is not zero.
- We swab your nose because it is the most likely place to find Staph aureus on your body.
- We want to do everything we can to reduce the chance of you getting a wound infection after your operation, but we need your help.

How do you know that you have Staphylococcus aureus (MRSA or MSSA)?

- The only way to tell is to rub the inside of your nose with a swab (like a Q-tip) and send the swab to the hospital lab for testing. We will swab both nostrils. Rubbing your nose with a swab does not hurt.

What happens if the test says you have Staph (MRSA or MSSA)?

- A positive test does not mean you cannot have your surgery and it also does not mean you have an infection. A positive test means you are *colonized* or living with *Staphylococcus aureus* on your skin.
- The morning of your surgery, the staff in AM Admit will give you a medication called mupirocin. This antibacterial ointment will be placed in your nose 2 times a day for 5 days (you will continue this at home if you are discharged before the 5 days are completed). This ointment will help eliminate the Staph aureus in your nose.
 - See below for instructions for the use of mupirocin.
- **If you are positive with MRSA**, the hospital staff will take extra precautions like wearing gowns and gloves when you are in the hospital to make sure that this germ doesn't spread to others. Your family & visitors your family & visitors will be asked to also wear gowns & gloves when visiting.

Bactroban/ Mupirocin Ointment use:

The medicine is an ointment and will come in one large tube. This will be started in AM admit the morning of your surgery. It will be given once in the morning and once at night for 5 days, or 10 applications.

- Place enough medicine to cover the tip of a cotton swab.
- Insert the cotton swab barely into the nose, just enough to cover the white tip.
- Do not insert the cotton swab deep into the nose.
- Move the cotton swab around each nostril to help spread the ointment.
- Then reapply with a new cotton swab to the other nostril.
- Press the sides of your nose together & gently massage to spread the medicine all over the inside of your nose

