

# SESLHD PROCEDURE COVER SHEET



**Health**  
South Eastern Sydney  
Local Health District

<b>NAME OF DOCUMENT</b>	Methicillin-resistant <i>Staphylococcus Aureus</i> (MRSA) - Alert Removal
<b>TYPE OF DOCUMENT</b>	Procedure
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<b>EXECUTIVE SPONSOR</b>	Director, Clinical Governance and Medical Services
<b>AUTHOR</b>	SESLHD Infection Prevention and Control Working Party <a href="mailto:SESLHD-InfectionControl@health.nsw.gov.au">SESLHD-InfectionControl@health.nsw.gov.au</a>
<b>POSITION RESPONSIBLE FOR THE DOCUMENT</b>	SESLHD Infection Prevention and Control Committee
<b>FUNCTIONAL GROUP(S)</b>	Infection Control
<b>KEY TERMS</b>	Methicillin-resistant <i>Staphylococcus Aureus</i> , healthcare associated infections, swabbing, contact precautions
<b>SUMMARY</b>	To outline the process for Methicillin-resistant <i>Staphylococcus Aureus</i> Alert Removal.

## **COMPLIANCE WITH THIS DOCUMENT IS MANDATORY**

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**1. POLICY STATEMENT**

The aim of this procedure is to outline the process for Methicillin-resistant *Staphylococcus Aureus* (MRSA) alert removal to be able to de-isolate patients from contact precautions.

**2. BACKGROUND**

Patients with a MRSA positive clinical isolate will have an alert entered on their Electronic Medical Record (eMR), this alert is generally entered by the Infection Prevention and Control (IPC) department or their delegate. This alert remains in place for both current and future admissions.

Contact precautions and isolation into single rooms are routine Infection Prevention and Control (IPC) management strategies for patients with MRSA. While these strategies are effective, they are costly, decrease patient satisfaction, and have environmental consequences due to the significant use of Personal Protective Equipment (PPE). Patients with an alert for MRSA will also impact hospital patient flow, particularly around single room priorities for patients with other infectious diseases or competing clinical priorities.

Having an active MRSA alert removal program in place will allow for patients to be deisolated from contact precautions in the event they meet the criteria outlined in this procedure.

**3. RESPONSIBILITIES**

**3.1 Infection Prevention and Control or delegate will:**

- Guide the clinical staff in the MRSA alert removal process.
- Interpret pathology results.
- Approve or disapprove patients for MRSA alert removal once pathology results have been interpreted.
- Document and de-alert patients for MRSA in eMR.

**3.2.1 Clinical staff will:**

- Identify patients for MRSA alert removal.
- Seek approval from IPC department for MRSA alert removal.
- Provide patients with MRSA alert removal factsheet (**appendix 1**).
- Notify IPC once appropriate MRSA swabs have returned negative results.
- Remove contact precautions once approved and documented by IPC.

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**4. PROCEDURE**

Patients who satisfy **all** of the below criteria can have the MRSA alert removal process started:

- 1) The patient has not used any MRSA antibiotic therapy, or antiseptics specific to MRSA in last three months.
- 2) It has been at least six months since the patient has returned a positive MRSA specimen.
- 3) There are no invasive devices present that have been previously implicated in MRSA colonisation or infection.
- 4) Has had two negative MRSA swabs from the same body site (nose and groin) at least 24 hours apart and within the past 3 months.
- 5) Patient is no longer receiving care in an extreme risk clinical area e.g. intensive care, haematology, oncology, neonatal intensive care, renal and that patient is not undergoing cardiothoracic surgery.

Where patients either do not meet the criteria for deisolation or the screening results remain positive, the alert will remain in place. Where patients meet the criteria and receive two negative MRSA swabs, Infection Prevention and Control will document and remove the alerts.

**5. DOCUMENTATION**

- eMR progress notes

**6. REFERENCES**

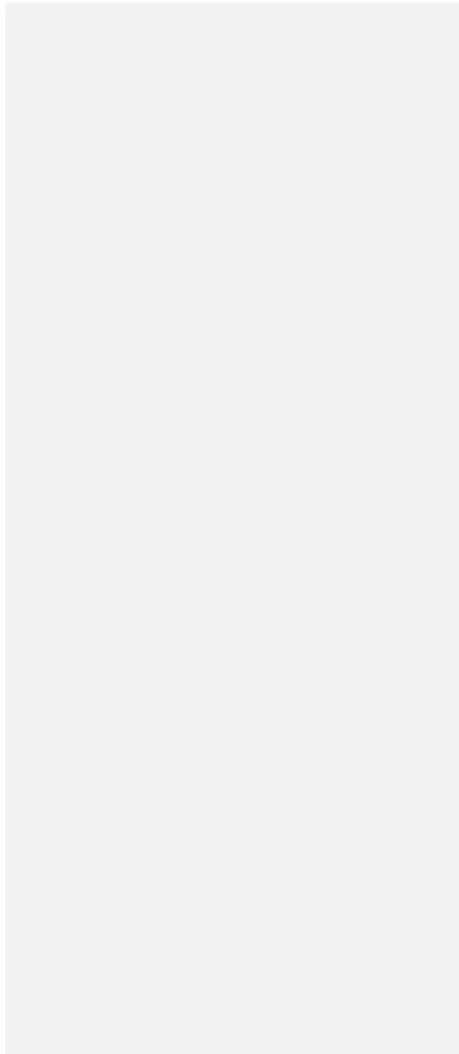
- [Clinical Excellence Commission \(2020\) Infection Prevention and Control Handbook](#)

**7. VERSION AND APPROVAL HISTORY**

Date	Version	Version and approval notes
24 June 2024	1.0	Developed by the SESLHD Infection Control Policy Working Party. Approved by SESLHD Infection Prevention and Control Committee and the SESLHD Clinical and Quality Council.

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Where can I find more information?

If you have any questions, please contact your doctor or ask the clinical staff caring for you in hospital.

Disclaimer: This factsheet provides basic general information only and is to be used as a quick guide, not as a complete resource on the subject.

References

Adapted from Clinical Excellence Commission. 2020. Infection Prevention and Control Practice Handbook.



Publication review date XXXX



MRSA Alert Removal

Information for patients



Produced by SESLHD Infection Prevention and Control Working Party February 2024

## SESLHD PROCEDURE

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**Why do I need to undergo MRSA  
clearance Screening?**

Your hospital records show that you had a bacteria called Methicillin Resistant *Staphylococcus aureus* (MRSA) found on testing of your skin, blood, urine, or wounds in the past. Usually, this bacteria lives on your skin and does not cause any problems, but if found in a wound or the blood it can be difficult to treat.

Your doctors have identified that you may be eligible for clearance screening. Some patients undergo a treatment called decolonisation which reduces this bacteria, and some patients will naturally clear this bacteria with time.

**How do I know I am able to undergo  
MRSA clearance screening?**

The following patients can begin the process for MRSA Clearance screening when

- More than 6 months has passed since the last positive MRSA result
- If there has been no exposure to MRSA antibiotic therapy, or antiseptic washes which have activity against MRSA in the last 3 months
- There are no invasive devices present that have been previously implicated in MRSA colonisation or infection
- There are no open wounds which have not healed
- It is unlikely you will be admitted to a high-risk clinical area such as during your stay.

**How do I undertake MRSA testing?**

- You will need to have two swabs at least 24 hours apart and within a 3 month period from your nose and groin

**What happens if both results are  
negative for MRSA?**

- You will be cleared of MRSA, and your medical record will be updated

**What happens if both results are  
positive for MRSA?**

- If your test results are positive for MRSA, then the new MRSA result will remain on your medical record
- When you are next admitted to hospital, staff will follow local protocols such as wearing Personal Protective Equipment.