HARDIN COUNTY GENERAL HOSPITAL
HOSPITAL-WIDE POLICY

Title: MDRO / MRSA CONTROL PROGRAM **Effective Date: 1/9/08**
Policy Number: 152 **Med Staff:**
Regulation: MRSA Screening and Reporting Act **Admin:**
CDC Guidelines

I. POLICY

In order to improve the prevention of hospital-associated infections due to drug resistant organisms such as MRSA and VRE, Hardin County General Hospital will:

A. Identify all MRSA-colonized patients and other at risk patients on our Medical-Surgical unit through active surveillance and testing.

B. Isolate identified MRSA-colonized or infected patients according to current CDC guidelines.

C. Monitor and strictly enforce hand hygiene requirements.

D. Maintain records and report cases as mandated.

II. DEFINITIONS

MDRO – Multi-Drug Resistant Organisms
MRSA – Methicillin Resistant Staph Aureus
GNB – Gram Negative Bacillus
VRE – Vancomycin Resistant Enterococcus
AST – Active Surveillance Testing
ICU – Intensive Care Unit

III. RESPONSIBILITY

Physicians
Nursing Personnel
Laboratory Personnel
Infection Control Nurse

IV. EQUIPMENT

Isolation equipment and supplies
Barrier Precautions
Culturettes

V. PROCEDURES
INFECTION CONTROL: CATEGORY I

1. Upon admission to the hospital, AST of the nares and any invasive device sites, open wounds or non-intact skin will be conducted on the following identified at-risk patients:

    a. Nursing Home Residents and other group residential people (i.e., Disabled Homes, Job Corps, etc.)

    b. Patients with history of long term hospitalizations or ICU stay;

    c. Immunocompromised patients (recent chemotherapy, long term prednisone therapy, lymphoma, etc.)

    d. Health care workers and family members living in same household;

    e. Prison workers and family members living in same household.

2. Screening will not be done on those known to have a previously positive MDRO/MRSA culture to include a re-admission to the hospital within 24 hours.
3. **Hand Hygiene practices are to be strictly adhered to and is everyone's responsibility.**
4. MDRO/MRSA/VRE positive cases will be placed in Contact Isolation. Contact Isolation may only be discontinued per CDC recommendations and facility policy.
5. The Ward Clerk will notify Housekeeping and Dietary of the need for specific cleaning and isolation requirements.
6. The Charge Nurse and the Infection Control Nurse (ICN) will be responsible for monitoring appropriate isolation policy requirements.
7. All Hospital-identified at-risk patients will be reported to the local Health Department by the ICN on a monthly basis.
8. Any intermediate or high level Vancomycin resistant strains are to be reported to the local Health Department by the ICN and/or Laboratory in 24 hours.

VI. DOCUMENTATION

1. A log of MDRO/MRSA/VRE cases shall be kept in the Laboratory and at the Nurses Station. Positive cases will be entered in to the log by the Charge Nurse, ICN, and Laboratory personnel to be used for future admission reference.
2. A distinction will be made between "Present on Admission (POA)" and "Occurred during the Hospital stay" by the Attending physician on discharge.
3. Data will be made available to Illinois Department of Public Health (IDPH) for public reporting purposes. Any report corrections or explanatory comments can be made by the Hospital within 30 days prior to information publication.
4. No Hospital report or IDPH disclosure may contain information identifying a patient, employee, or licensed professional.