



A New Way to Escape Isolation for MRSA and/or VRE

Objectives

- × Review how studies have changed the need for isolation of certain Multi-Drug Resistant Organisms (MDROs)
- × Identify patients with a history of Methicillin-Resistant *Staphylococcus aureus* (MRSA) and/or Vancomycin-Resistant *Enterococcus* (VRE) that meet criteria for contact isolation removal

Background

- × Contact Precautions were first recommended by the Centers for Disease Control and Prevention (CDC) in 1970.
- × Over the ensuing decades more knowledge has been obtained.

Background

- × Some studies have suggested that patients in isolation were twice as likely to experience an adverse event
- × Patient isolation may be associated with decreased patient satisfaction



Background...

- × Bedside time for nursing
 - × Time saved by an average nurse is 30 minutes a day in patient care time if not caring for a patient in CP
 - × nursing assistances could save on average 24 minutes a day
- × Stewardship – savings on materials

Background...

- × Studies have found the discontinuation of Contact Precautions has not been associated with increased infection rates.

What is MRSA?

- × First introduced in 1960
- × First noted as a Healthcare Associated Infection in 1968
- × Since then MRSA infection have increased by 60%
- × Up to 30% of the population is colonized with Staph aureus in the nares
- × Spread via contact



What is VRE?

- × First introduced in Europe in 1988
- × First noted as an HAI in the early 1990s
- × Usually occur in Hospitalized patients
- × Spread by contact

What is MRSA/VRE removal project?

- × All Patients with a history of MRSA/VRE (even if they have completed hospital approved Clearance Cultures) will be assessed for high risk factors
- × This assessment will determine if they need to be placed into Contact Precautions or not.

Patient with a history of MRSA/VRE...

- × Upon admission all patients are screened for Multi Drug resistant organisms (MDROs)
- × If patient has a history of MRSA/VRE then the screening continues
- × Contact precautions would be initiated if patient meets any of the following criteria...
- × If patient has a history of other MDROs (CRE, ESBL, Etc..) contact precautions would be implemented

MRSA/VRE Patient Screening Conditions

- ☐ Draining Wound
- ☐ Colostomy/Ostomy
- ☐ Excessive Secretions
- ☐ Suspected Infection
- ☐ Chronic Indwelling Device
- ☐ None

*Suspected Infection (ex. suspected bacteremia, skin or soft tissue, respiratory, UTI)

*Chronic Indwelling Device (ex. urinary catheter, central line, tracheostomy, PEG)



Scenarios

Scenario #1

× A patient returns every three months for urinary stent change.

× The patient has a history of MRSA, the last positive MRSA culture was in urine May 2018

× The patient has a chronic indwelling catheter

× The patient is registered as an outpatient to the Same Day Surgery department

× Does this patient need to be on Contact Precautions?

Scenario #1 Rationale

- × A patient returns every three month for urinary stent change.
 - × The patient has a history of MRSA, the last positive MRSA culture was in urine May 2018
 - × The patient has a chronic indwelling catheter
 - × The patient is registered as an outpatient to the Same Day Surgery department

Contact Precautions are required

Scenario #2

- × Patient states a history of MRSA in a buttock wound in January 2012 at a facility in Phoenix, AZ but is not flagged in our system
- × Patient is now being admitted with cellulitis to the right elbow
- × Does this patient require contact precautions?

Scenario #2 Rationale

- × Patient states a history of MRSA in a buttock wound in January 2012 at a facility in Phoenix, AZ, but it is not flagged in our system
- × Patient is now being admitted with cellulitis to the right elbow

Contact Precautions are required

Scenario #3

- × 84 yr old woman admitted with cough, fever and question of pneumonia
 - × Patient had history of VRE to left leg, May 2018.
 - × Clearance cultures completed in December 2018 and all cultures were negative
 - × EMR states VRE Resolved
- × Does this patient require contact precautions?

Scenario #3 Rationale

- × 84 year old woman admitted with cough, fever and question of pneumonia
 - × Patient had history of VRE to left leg, May 2018
 - × Clearance cultures completed in December 2018 and all cultures were negative
 - × EMR states VRE Resolved

Contact Precautions are required

Scenario #4

- × 28 year old man admitted through the ER with a broken femur
 - × Patient has a history of MRSA to the blood, August 2017
 - × Patient has not had MRSA Clearance Cultures performed
- × Does this patient require contact precautions?

Scenario #4 Rationale

- × 28 year old man admitted through the ER with a broken femur
 - × Patient has a history of MRSA to the blood, August 2017
 - × Patient has not had MRSA Clearance Cultures performed

Contact precautions are not required

Take Homes

- × Nursing can continue contact precautions as they see fit
- × Infection Prevention will be stressing the importance of standard precautions for ALL patients

Take Homes...

- × Need for good hand hygiene
- × New process goes into effect on March 4th
- × Education will be assigned in the Avera Learning Center where available or by individual Leaders where it is not

References

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