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Developmental Disabilities Administration  
Diane K. Coughlin, Director

**EDUCATIONAL ALERT !!!**

**TO:** All DDA Service Providers

**FROM:** Diane K. Coughlin, Director *DKC*  
Developmental Disabilities Administration

**SUBJECT:** MRSA – Methicillin-resistant staphylococcus aureus

**DATE:** July 12, 2004

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The Developmental Disabilities Administration (DDA) has recently received inquiries requesting information about MRSA – Methicillin-resistant staphylococcus aureus from several agencies providing services to individuals with developmental disabilities. To assist providers in learning about MRSA, the DDA regional nurses have compiled the following information from the Centers for Disease Control and Prevention (CDC):

**What is MRSA?**

- MRSA stands for Methicillin resistant staphylococcus aureus.
- Staphylococcus aureus, often referred to simply as "staph" are bacteria commonly carried on the skin or nose of healthy people. Occasionally, staph can cause an infection, most of which are minor (such as pimples and boils) and can be treated without antibiotics.
- Staph bacteria can also cause serious infections (such as surgical wound infections and pneumonia). In the past, most serious staph bacteria infections were treated with a certain type of antibiotic related to penicillin.
- Over the past 50 years, treatment of these infections have become more difficult because staph bacteria have become resistant to various antibiotics, including the commonly used penicillin related antibiotics which include methicillin. These resistant bacteria are called methicillin-resistant staphylococcus aureus or MRSA

**How is MRSA transmitted/spread?**

- MRSA is spread from having direct contact with infected people, however it less likely to spread through the air.
- MRSA can live on inanimate objects such as furniture, tabletops, sheets, clothes, wound dressings, and other objects.

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### **Who is risk for getting MRSA?**

Everyone is at risk for getting MRSA however there is increased risk for:

- Individuals with many hospitalizations or staying in a healthcare facility (nursing home) over extended periods of time.
- Individuals that are elderly and medically frail.
- Individuals with invasive devices such as; urinary catheter, gastrostomy tubes/feeding tubes, open airway (tracheostomy).
- Individuals who are malnourished
- Individuals with open wounds, chronic renal failure, anemic, or respiratory issues (pneumonia).

### **How do I know if an individual that has an invasive device may be infected?**

- If you observe changes such as fever, increase in drainage, change in color of secretions or urine, the individual may be infected.

### **How can we prevent MRSA for direct care workers and individuals we serve in the community?**

- Routine hand washing, using soap, running water, and friction are necessary. Teach all staff to wash hands at least 20 to 30 seconds with antibacterial soaps. All direct care staff should wash hands between caring for consumers
- Provide and assist all consumers with good hand washing
- Use Universal Precautions with all consumers when providing direct care.
- Avoid sharing personal items of consumers (towels, razors, combs, clothing,).
- Inform all health care professionals at time of appointments of MRSA and document in consumer's medical record.

### **If an individual has MRSA should their laundry be cleaned and washed separately?**

- Yes each consumer's laundry should be washed separately, including bed linens and towels.
- Wash linens and clothes that become soiled with hot water and laundry detergent.
- Dry clothes in a hot dryer verses air-drying, heat helps kill bacteria.

### **If an individual returns to their community home diagnosed with an extreme case of MRSA what should we do?**

- Contact your agency health care professional or nurse for further instructions regarding treatment and continued recommendations for continued stay in the home with others. The individual may have to be placed in a nursing home facility for a short time.

### **If a doctor or healthcare provider has told me that an individual has a MRSA skin infection, what can I do to prevent others from getting infected?**

- The person with MRSA should have his/her own bedroom if possible or with another person who has MRSA.
- He/she may reside with a person with intact skin and no "tubes" if above is not permitted. The individual with the infection should not be placed with anyone that has another antibiotic resistant organism that is not MRSA.
- If excessive secretions or excessive wound drainage exists isolation gear could be required.
- Check with your agency nurse or health care professional regarding the protocol for the wearing of isolation gear (gloves, masks, gown, etc.) and the protocol on disposal of wound dressings, Kleenex, or other waste products.
- If area of a wound can be covered and drainage contained or invasive device covered (closed system) isolation or protective gear may not be necessary.

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- Follow your healthcare provider's instructions on proper care of the wound.
- Advise staff, family and other close contacts to wash their hands frequently with soap and warm water, especially if they change the person's bandages or touch the infected wound or potentially infectious materials.
- He/she may attend activities as long as infected/colonized site (other than nares) is covered

### **What is the difference between colonization and infection?**

- Colonization occurs when the staph bacteria are present on or in the body without causing illness. At any given time, approximately 25 to 30% of the population is considered colonized, due to staph bacteria in the nose.
- Infection occurs when the staph bacteria cause disease in the person.
- People may be colonized or infected with MRSA, the staph bacteria that are resistant to many antibiotics.
- A person colonized with MRSA of sputum (spit) does not need a mask if they can cover their mouth when coughing.
- A person with nasal colonization does not need to wear a mask outside of the room and may attend all activities. If they have a cold, they do not need a mask if they can control secretions.
- A person unable to control secretions or excessive wound drainage should not attend group activities.
- A person who is infected (not colonized) with MRSA in the respiratory tract, such as pneumonia or bronchitis, should wear a mask when leaving their room. **However, if active MRSA other treatments need to be initiated and health care professional immediately notified.**

I would advise that if you suspect an individual may have MRSA or if you have been notified by a health care provider that MRSA is present, please contact your regional nurse for assistance. Also, if you would like additional general information, please contact your regional nurses or visit the CDC website at: [http://www.cdc.gov/ncidod/hip/ARELIST/mrsa\\_comm\\_faq.htm](http://www.cdc.gov/ncidod/hip/ARELIST/mrsa_comm_faq.htm).

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