

## 40-110 Appendix C - MRSA Decolonization Criteria Algorithm – Acute Care

**NOTE:** Any licensed nurse or physician can initiate a review of the criteria for any client who is MRSA positive.

### Step 1 - Are any of the following exclusion criteria present?

- Sputum positive
- Open wounds greater than 1 cm
- Indwelling devices (i.e., IV, Catheter, etc.)
- Living with family or close contacts who are MRSA positive
- Inadequate resources to carry out decolonization process
- Mupirocin or Fusidic acid resistant
- Continued use of antibiotics

Yes

No

Stop

### Step 2 - Does the client have Wandering Behaviour?

Decolonization may still be considered for clients with wandering behavior **if** staff can ensure hand hygiene with only liquid soap or alcohol-based hand rub (do not use the Chlorhexidine gluconate (CHG) 2% liquid soap solution) 48 hours prior to screening swabs being collected.

No

Yes

Stop

### Step 3 - Compliance

Clients must also be compliant with daily bathing routine, which may include the use of CHG wipes.

Yes

No

Stop

- 1) Physician/MRP to order nares/groin surveillance for MRSA.
- 2) Send the specimen to the lab.  
**Important: Specify "decolonization" on the laboratory requisition.**  
The lab will test for sensitivity to Mupirocin or Fusidic acid.
- 3) When sensitivity result is back, have the physician order the appropriate nasal ointment/cream from pharmacy. Then continue to [Appendix D – Decolonization Protocol – Acute Care](#).