**Appendix D: MRSA Decolonization Protocol**

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

### Seven Day Protocol

<table>
<thead>
<tr>
<th>Time</th>
<th>Product</th>
<th>Details</th>
<th>Additional Information</th>
<th>Completed</th>
</tr>
</thead>
</table>
| Day 1 to 7    | **Antimicrobial nasal cream applied to each nostril** (Mupirocin 2% or Fucidic Acid 2%) | - Obtain physician order  
- **Apply ointment twice daily for 7 days**  
  - Place a small amount of ointment (size of a match head) onto a cotton tipped swab  
  - Massage gently around the inside of the nostril, making sure not to insert it too deeply (no more than 2-3 cm).  
  - Repeat on other side. | AM 1 PM 1  
AM 2 PM 2  
AM 3 PM 3  
AM 4 PM 4  
AM 5 PM 5  
AM 6 PM 6  
AM 7 PM 7 | Day 1  
Day 2  
Day 3  
Day 4  
Day 5  
Day 6  
Day 7 |
| Day 1 & 7     | **CARE**  
- Daily changes of clean clothes, pyjamas and linens (bed linens as often as possible) including towels. Daily cleaning of room. | | Day 1  
Day 2  
Day 3  
Day 4  
Day 5  
Day 6  
Day 7 | |
| *Mornings*    | **MORNING**  
Shower or bath  
Chlorhexidine 2% liquid soap solution | - Wet hair and body.  
- Apply CHG 2% liquid soap solution to all body surfaces.  
- Pay special attention to skin folds at armpits, under breasts, groin and perineum areas.  
- Ensure the CHG product is left on skin and hair for one minute, then rinse well to remove all soap residues.  
- Body lotions may be used to prevent excessive drying of the skin.  
- Regular shampoo may be used in addition to CHG product if preferred. | (continued on next page) | Day 1  
Day 2  
Day 3  
Day 4  
Day 5  
Day 6  
Day 7 |

**Start date:**  
_______  

**End date:**  
_______  

**Date:**  
_______
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<tbody>
<tr>
<td>Evenings</td>
<td></td>
<td>- Do not allow this product to come in contact with your eyes, ears, mouth and mucous membranes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Day 1 to 7</td>
<td>EVENING</td>
<td>2% Chlorhexidine gluconate (pre-moistened) cloths are to be used to wipe down the client’s body once a day</td>
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</table>

**CHG Cloth Protocol:**

- Use 1 clean cloth to prep each area of the body in order as shown in steps 1 to 6. (See diagram). Complete the top part of body, cover lightly then move to lower part of body. Wipe each area in a back-and-forth motion. Be sure to wipe each area thoroughly.

1. Wipe the **chin, neck, chest and stomach**
2. Wipe both **arms**, starting each with the shoulder ending at the fingertips. **Be sure to thoroughly wipe the arm pit areas**
3. Wipe the first **leg** starting at the thigh and ending at the toes
4. Wipe the **other leg**, starting at the thigh ending at the toes
5. Wipe the **back** starting at the base of the neck and ending at the waist. Cover as much area as possible
6. Wipe your **right and left hips, then groin and buttocks**
   - Do not rinse, apply lotions, moisturizers or makeup after application.
   - Discard wipes in the garbage (do not flush CHG cloth/wipe)
   - Allow client’s skin to air dry.
   - Dress in clean sleepwear.

<table>
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<th>Day 7</th>
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**Retest to determine success of process**

Wait 48 hours after decolonization protocol is completed i.e. the client must be treatment-free (i.e. no anti-staphylococcal antibiotics (see policy), CHG 2% products or ointment in use) before collecting screening swabs.

- 3 consecutive negative sets of swabs from the **nares and groin**, each one week apart, without intervening antibiotics or CHG soaps/ointments, are required for a decolonization to be declared successful.

<table>
<thead>
<tr>
<th>Culture #1</th>
<th>Culture #2</th>
<th>Culture #3</th>
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Two decolonization attempts can be tried if necessary. Clients who still test positive after two attempts will be considered chronic carriers.

**How to collect a nares swab:**

1. Moisten star swab with culture media in the tube.
2. Insert swab about 2 cm into nares
   - Gently rotate around the inner surface, clockwise x2, then counter-clockwise x2.
   - Using the same swab, repeat for other nares
3. Insert swab into tube
4. Push in pink plug and label specimen (tube) with date, site and client’s name.
5. Ensure that swab is sent to lab with requisition for MRSA follow-up.