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**What is MRSA?**

MRSA stands for meticillin-resistant Staphylococcus aureus. Staphylococcus aureus (S. aureus) is a bacterium (germ) commonly found on the skin and often causes no harm.

Meticillin is an antibiotic used to treat infections caused by S. aureus. When S. aureus becomes resistant to meticillin and a range of other antibiotics (the antibiotic no longer works against the bacterium) it is called meticillin-resistant Staphylococcus aureus or MRSA. This does not mean that someone who has an infection caused by MRSA cannot be treated, just that they will have to be given different antibiotics to the ones usually used.

About one in three of us permanently carry S. aureus bacteria in our nose or on the surface of our skin (especially in folds like the armpit or groin) without being aware of it or getting an infection. This is completely normal and is known as being colonised by the bacteria. Another one third of people will carry S. aureus from time to time.

In the same way, people can carry MRSA in their nose or on their skin without them being aware of it or having any symptoms. Far fewer people are colonised with MRSA - it lives harmlessly on the skin of about 1 in 30. People who have recently been in hospital or are admitted frequently are more likely to carry MRSA.

**When does MRSA become harmful?**

Most of the time MRSA does not cause any problems and people who are colonised with the bacteria do not look or feel different from anyone else.

But you can sometimes after surgery get an infection caused by S. aureus, including MRSA if not treated prior to surgery. This usually happens when the germ gets into your body through a break in your skin and cause a wound or skin infection. Occasionally, it can cause more serious infections. For example, it may get into your bloodstream and cause septicaemia (blood poisoning).

**Who is most at risk of an MRSA infection?**

MRSA does not normally infect healthy people, even if they are colonised. Although it is possible for people outside hospital to become infected, MRSA infections are most common in those who are already in hospital. This is because:

* Patients often have a way for the bacteria to get into their body, such as through a surgical wound, a catheter or a drip into a vein

**How is MRSA spread?**

You can pick up MRSA at home. You may become colonised or develop an infection.

It can be spread:

* From person to person by touching someone who is colonised or infected
* By touching or sharing towels or sheets with someone who is colonised or infected
* By touching room surfaces or objects that have MRSA on them.

**How do I know if I have MRSA?**

Almost all Kinvara Private Hospital patients admitted to hospital are now tested (screened) for MRSA. This helps us to reduce the chance of patients getting an MRSA infection or passing MRSA on to another patient.

The test involves using swabs – cotton buds – to take samples from key areas. We ask for swabs to be taken from the inside of your nose and your groin.

* If you are coming in for a planned (elective) procedure, you will be screened before by your GP (home doctor) or a pre-admission nurse.

**How is MRSA treated?**

If your screening swab results come back as MRSA positive, you will be informed by either the Pre-admission Nurse or your GP, or if in hospital, by one of the Kinvara team. You will then be given with skin wash and nasal ointment treatment, which will suppress the amount of MRSA.

**How to use the skin wash lotion**

The pink-coloured antiseptic skin wash lotion comes in a bottle and must be used as prescribed. You should use it as a liquid soap/ shampoo for a shower, bath or wash every day for 5 days. **Day 5 needs to be the day prior to admission**.

Avoid getting it in your eyes or ears.

1. Wet your skin.

2. Put the skin wash on a clean, damp flannel and use it to thoroughly clean your whole body, working downwards.

3. Make sure you wash your skin for at least one minute, in particular your face, nose, armpits and groin.

4. Rinse off with clean water.

5. Next, wash your hair with the lotion.

6. Rinse off with clean water.

7. Wash your hair on day one and five.

* Do not share the bottle with anyone else.
* Do not use it with other shampoos, soaps or moisturisers.
* Ask us for a new bottle if you run out.

**How to use the ointment**

The antibiotic nose ointment comes in a small tube. You need to use it three times a day.

1. Squeeze a small amount of the ointment on to a clean finger.

2. Put the ointment on the insides of both of your nostrils.

3. Using clean fingers, gently press both nostrils together for a few seconds to thoroughly spread the ointment over the inside of your nose.

**Who can I contact with queries and concerns?**

If you or your carers have any questions about your treatment or any information in this leaflet, please do not hesitate to ask one of the members of the nursing or medical staff on your ward.

You can also contact the Infection Prevention and Control team at our hospital sites.

Kieth O’Brien (Infection Control Lead) Kinvara Private Hospital, 2 Clifton Lane, Rotherham, S65 2AJ Tel: 01709 464200 Email: [theatres@kinvarahospital.co.uk](mailto:theatres@kinvarahospital.co.uk)

Visit the NHS Choices site for more information about MRSA www.nhs.uk