

You may be able to go home whilst you still have MRSA, and some patients may go home before all the MRSA tests are completed.

If it is necessary for you to be readmitted to hospital in the near future, the Infection Control Team may arrange for you to have further treatment and swabs by your G.P.

10. If I have MRSA, how can I find out more?

If you are unsure about what has been said to you about MRSA, ask a member of staff to arrange for the Infection Control Nurse to come and see you.

11. What happens when a patient who has MRSA goes home?

Unless you are expected to return to hospital in the near future, no further treatment or swabs will be necessary when you go home.

At home a person carrying MRSA on their skin will not cause any problems for family or friends.

It is very important to understand that normal social contact with somebody who has MRSA or has received treatment for MRSA is not a problem.

12. What should you do if you have any queries about MRSA when you are at home?

You should consult your General Practitioner or further information can be found on

http://www.hpa.org.uk/infections/topics_az/staphylo/MRSA_leaflet.pdf

Patient Information

Methicillin Resistant Staphylococcus aureus (MRSA)

1. What is MRSA?

Staphylococcus aureus is a very common germ which many people carry on their skin without any problems or infections developing. Some strains are resistant to particular antibiotics and these strains are referred to as Meticillin Resistant *Staphylococcus aureus* (MRSA) Both MRSA and *Staphylococcus aureus* can sometimes be carried by patients in hospital.

2. Where is it found?

Staphylococcus aureus can be found on many parts of the body but is usually found in the nose.

3. Are there any symptoms if you have the germ?

This germ is often present without any symptoms. When it does cause an infection, symptoms include boils, abscesses or wound infections.

4. Why do we hear so much about MRSA in relation to hospitals?

MRSA can be a problem in hospitals because it may cause infections in patients who are already ill. There are antibiotics available to treat the infections but the choice is limited. MRSA may be present in the nose and on the skin of patients without hospital staff being aware of this.

5. How does MRSA spread from person to person?

MRSA is spread mainly by touch. If MRSA simply settles on intact skin surfaces it will do no harm. However, occasionally it may, like all other germs, cause an infection.

6. How do we find out if someone is carrying MRSA if they have no signs or symptoms?

A swab is taken from an area of the body where the MRSA germ may be present. This is then tested in the bacteriology laboratory to establish the presence or otherwise of the germ.

7. What happens if you are found to have MRSA?

An assessment is made and if possible single room accommodation is found for you in the hospital. You may be prescribed a nasal ointment and an antiseptic skin cleanser for washing/showering. We will also ask if we can take further swabs. Patients who are isolated because of MRSA will be seen by an Infection Control nurse to discuss how MRSA may affect them.

8. Why are patients who have MRSA nursed in single rooms?

This is to try and prevent the germ being passed on to other sick patients. Whilst in the single room, the patient will be given treatment to try and get rid of the germ. It is important that visitors and staff who are caring for patients with MRSA remember to wash their hands before leaving the room.

9. When can patients who have been found to have MRSA be nursed on an open ward again?

If you need continuing care in hospital you will need to have 3 negative tests at weekly intervals for MRSA, before you can return to the open ward and mix with other patients.

MRSA is not itself a reason for you to be kept in hospital.