

ARO ADMISSION SCREENING – IP&C HIGHLIGHTS

Note: Refer to [Admission Screening for Antibiotic Resistant Organisms Operational Directive](#) in WRHA IP&C Manual for complete protocol

ARO ADMISSION SCREENING		
CONTACT IP&C	For any patients who have been admitted to hospital outside of Canada in last 6 months	
PURPOSE		
REDUCE HAIs	Reduce risk of healthcare associated transmission of antibiotic resistant organisms (AROs)	
DEFINITION		
ADMISSION	Any stay in hospital greater than (>) 24 hours, including any stay in Emergency > 24 continuous hours	
SCREENING, ISOLATION PRECAUTIONS, TESTING		
	METHICILLIN RESISTANT <i>STAPHYLOCOCCUS AUREUS</i> (MRSA)	CARBAPENEMASE- PRODUCING <i>ENTEROBACTERIACEAE</i> (CPE)
SCREENING CRITERIA	Confirm on each admission as well as at Pre-Operative Assessment Clinic (PAC) visit, if patient meets any screening criteria listed: <ul style="list-style-type: none"> Admitted to or directly transferred from a health care facility, including PCHs, within or outside Canada within previous 6 months, where admitted for more than 24 hours Inter-facility Transfer/Referral Form indicates admission screening required Identified as MRSA POS in flagging system Identified as MRSA PREV in flagging system Identified as MRSA SUS in flagging system Identified as MRSA contact Once known as MRSA POS and whose positive status is currently unknown Starting dialysis or new to dialysis unit Living in a correction setting or communal living setting (e.g., group home) NOTE: Do NOT collect screening cultures for patients admitted to Mental Health units. If patient then transferred to another area of facility, screen if above criteria met.	Confirm on each admission as well as at Pre-Operative Assessment Clinic (PAC) visit, if patient meets screening criteria listed: <ul style="list-style-type: none"> Admitted to or directly transferred from any facility known to have endemic transmission (as discussed with IP&C) in previous 6 months. Consider facilities within or outside Canada, including current facility Identified as CPE SUS in flagging system Identified as a CPE contact
PATIENTS REFUSING SCREENING	If MRSA screening refused , explain procedure/rationale for screening again. If still refused, where possible, place patient on <u>Contact Precautions</u> for duration of stay; notify IP&C	If CPE screening refused , explain procedure/rationale for screening again. If still refused, isolate patient and place on <u>Contact Precautions</u> for duration of stay; notify IP&C
SCREENING SPECIMENS	Specimen collection sites include: <ul style="list-style-type: none"> Anterior nares (both nares, one swab) Open wounds/lesions/incisions/invasive device insertion sites (e.g., central lines). Do not collect from closed/healed wounds/lesions/incisions Send specimen(s) to Microbiology Laboratory 	CONTACT IP&C/delegate prior to specimen collection Specimen collection from rectal/ostomy site. NOTE: Peri-rectal swabs, instead of rectal swabs may be submitted for neonatal, pediatric, adolescent & immune-compromised patients. <ul style="list-style-type: none"> Send specimen to Microbiology Laboratory. *Ensure lab requisition specifies CPE*
CONTACT PRECAUTIONS	Implement Contact Precautions and notify IP&C when patients meet ANY following criteria: <ul style="list-style-type: none"> Identified as MRSA POS in flagging system Admitted to or directly transferred from an acute care hospital (including ER) outside Canada within previous 6 months, pending screening results Patients who have received hemodialysis treatment outside Manitoba where negative screening cultures obtained within 7 days prior to arrival at WRHA facility are not available, pending screening results Refusal of MRSA screening despite explanation of procedure/rationale having been repeated NOTE: not all patients who have tested positive for MRSA are identified in EPR. If documentation from other sources indicates patient has MRSA, notify ICP.	Implement Contact Precautions and notify IP&C when patients meet ANY following criteria: <ul style="list-style-type: none"> Identified CPE POS in flagging system Identified as CPE SUS in flagging system Admitted to or directly transferred from an acute care hospital (including ER) outside Canada within previous 6 months, pending screening results as directed by IP&C Currently being screened for CPE with culture results pending Refusal of CPE screening despite explanation of procedure/rationale having been repeated. Isolate those who refuse screening. Place on <u>Contact Precautions</u> for entire stay; notify IP&C NOTE: not all patients who have tested positive for CPE are identified in EPR. If documentation from other sources indicates patient has CPE, notify ICP.