

## Test Your Knowledge on MRSA & VRE

Check the correct answer	TRUE	FALSE
1. MRSA & VRE infects anyone who come in contact with it.	_____	_____
2. MRSA & VRE can be hard to get rid of once it is established in your facility	_____	_____
3. Open wounds give MRSA & VRE easy entry into the body.	_____	_____
4. Those who are already seriously ill are at high risk of MRSA & VRE infection.	_____	_____
5. Most cases of MRSA infection are the result of patient-to-patient contact.	_____	_____
6. MRSA & VRE can be spread only by HCW	_____	_____
7. MRSA is rarely spread through the air.	_____	_____
8. Symptoms of MRSA infection are different than symptoms of other kinds of staff infections.	_____	_____
9. The presence of enterococci in a patient GI tract is a sign of infection.	_____	_____
10. Wearing gloves when caring for patients makes hand washing unnecessary.	_____	_____
11. Equipment such as thermometers & stethoscopes etc. should be disinfected after each use.	_____	_____
12. Lab should report the presence of MRSA & VRE when noted on various cultures to Dr. – ICN – N.S. – C.C.	_____	_____

# Stevens Community Medical Center Courage Cottage

## Inservice Training Record

Date: October 21 & 30, 2003

Topic: MRSA & VRE Infection Control

For: All Courage Cottage Staff

Instructor: Bev Larson, SCMC Infection Control Nurse

Time Frame: 1 hour

### Inservice

◆ Methicillin Resistant Staphylococcus Aureus (MRSA)

A strain of bacteria, staph aureus, that is not cured by the antibiotic methicillin or many other antibiotics. Vancomycin is the only antibiotic used for MRSA at this time. Refer to the attached handout for further information on MRSA.

◆ Vancomycin Resistant Enterococcus (VRE)

A bacteria that is resistant to vancomycin. The most common VRE infections are in the bowel, urine, wounds, and blood. Please also refer to the attached handout on VRE. There is one for employees and one that could be given to patients and families.

Suggestions from the inservice for use at the Courage Cottage.

- Always wear gloves and use very good handwashing technique when working with residents with these types of infections. Handwashing should be done before caring for the resident, when you remove your gloves, and when you are finished caring for the resident. It is preferred to wash your hands in the residents bathroom, not the kitchen sink. Handwashing should be done at least 15 seconds preferably 30 seconds.
- Gowns should be worn during prolonged contact with the resident especially with any residents body fluids; eg. Urine, stool, wound drainage, and blood.
- Place a melt away bag inside a red striped linen bag for the residents laundry that needs to be washed. Close the linen bag before transporting it to the cart in the garage. West Wind Village picks up the laundry two days a week. (Tuesdays and Fridays) Call 589-7923 and ask for the laundry department if pick ups are needed in between these days.
- All garbage needs to be red bagged. When removing a garbage bag from the room, have a second person help you in the door way using a

clean bag to double bag soiled bag that was in the room. ADT is the incineration company that will pick up the infectious waste every Monday. We need to keep the garage door locked at all times now that we have this type of waste, including the red puncture containers, in the garage.

- The residents personal laundry can be washed in our washing machine using hot water. Wash each resident clothing separately from any other residents clothing or linens.
- Please DO NOT put residents blankets in the dryer to warm their blankets. Use a clean blanket instead.
- Remind the residents to wash their hands frequently. If residents touch common areas, such as the kitchen counter, cupboards, or refrigerator door, these areas should be disinfected at the end of each shift. Also remind visitors to wash their hands or use the hand sanitizers.

  
*Vicki Maanum R.N.*  
Vicki Maanum R.N.  
Hospice Coordinator

10/30/03  
Date

MRSA

### WATER SOLUBLE BAGS DIRECTIONS FOR USE

#### IN STORAGE:

1. Keep bags sealed within their protective overwrap until they're needed for use.
2. Once a bag is removed from the pack, keep the remaining bags within overwrap material. This gives some measure of protection against accidental exposure to moisture.
3. Store overwrapped water soluble bags at 45°F. to 86°F. temperature, and in relative humidity between 20% and 70%, for optimum shelf life.

#### AT SETUP and IN USE:

1. Handle the bag with dry hands only. Avoid any contact by moisture with the bag film to preserve the film's strength and integrity.
2. **IMPORTANT:** A linen item known to be dry should be the first item placed in the bag, so it will gravitate to the bottom. It provides a significant measure of protection to the bag in the event moist items are later placed in that bag.
3. Do not place overly wet items in the bag at any time. Remember: the bag is sensitive to moisture in any form.

#### AT CLOSURE:

1. Expect as much excess air as possible before closing bag, taking care to avoid expelling air in face. Reduction of trapped air content makes the closed bag a stronger unit for trans-shipment.
2. A red tie-tape is provided with every bag. Use it to close the bag; use NO OTHER type of closure device or means. Our tie-tape

is fashioned from special quickly-soluble film to insure opening of the bag during the laundry's initial cycling.

3. **Caution:** Do not knot the bag film as a means of closure. Such knots inhibit solubility during laundering.
4. The closed water soluble bag should be placed within another outer bag for movement within and outside the hospital. This reduces the chance of puncture or snagging enroute to the laundry **IN THE LAUNDRY:**

1. The closed water soluble bag should be placed in the wash wheel or tunnel. Pre-sorting is contraindicated because the soiled linen is assumed to be contaminated.
2. During the initial cold flush cycle, the bag will open and begin to disintegrate, allowing contact with the linen by the wash water. This will occur whether the bag is our hot or our cold water soluble type.
3. For complete liquefaction of the film we urge the following:
  - A. Do not overload the washer beyond its rated capacity.
  - B. Be sure the water temperature reaches at least 140°F. during the wash cycle.
  - C. The 140°F. water should have been swirling around the bag for 10-15 seconds **BEFORE** the wash chemicals (detergent, alkali, etc.) are injected. By that time the bag will have become a liquid, and physically incapable of reforming into film.

\*\*All bags individually folded/  
equipped with red tie-tape and seams.

MADF. IN U.S.A.

**Caution.** These Bags Are Packed in a Polyolefin Outer Wrap That Could Develop An Electrostatic Charge. Do Not Take The Outer Package Wrapping From These Bags Into The Operating Room, Or Other Hazardous Area!

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