# Multi-drug resistant organisms (MDRO) employee guidelines

Outlines the recommended approaches for the care and treatment of employees and specialists with MDRO.

## Who are these guidelines for?

All SCH employees and specialists.

## Why is this important?

The global threat of microbial resistance is increasing. By employing a standardised approach to MDRO treatment and decolonisation, we can reduce the risks of spread of antibiotic-resistant organisms in our hospitals.

## Employee and clinical team treatment of colonisation or infection

- Any treatment or decolonisation will be carried out in consultation with the staff member's healthcare provider.
- Consultation with a clinical microbiologist is advisable before commencing antimicrobial treatment where this is considered necessary.
- Decolonisation of employees with VRE, CPE and ESBL is not recommended.
- Decolonisation of employees with MRSA is possible using the following regime:
  - o Mupirocin (Bactroban) or antiseptic (Betadine ointment if no allergies to iodine are identified) to the anterior nares twice
  - Use of antiseptic washes for daily showers using an appropriate antiseptic (Chlorhexidine 4% or Povidone iodine in detergent solution)
  - Hair washing twice weekly using the antiseptic wash
  - o Treatment of infected skin lesions, if present, should also be considered (consult medical microbiologist if antibiotics are considered)
- The treatment regime is usually for 5-7 days. Any longer than this, irritation and resistance may result
- Following topical treatment, obtain 3 sets of screening swabs to ensure MRSA clearance. The first set should be taken at least 48 hours after treatment is stopped and the subsequent tests at least 24 hours apart.
- Give advice about managing any skin conditions or infections and care with antibiotic treatment in the future.

#### Refer to:



Employee MDRO screening and management flowchart

## **Associated documents**



### Multi-drug resistant organisms (MDRO) patient guidelines

Outlines the recommended approaches for the admission, care and treatment of patients with MDRO.

#### **CONTENT CONTROL**

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