

Division of Laboratory Medicine

Bacteriology

MRSA

Most MRSA infections are healthcare-associated, but an increasing number of infections are community-acquired, with patients having no established risk factors for acquisition of MRSA. While infections with community-acquired MRSA (CA-MRSA) are usually mild they can be severe.

General information

Collection container (including preservatives): Collection using Liquid eSwabs under the direction of your local IPC Team.

Specimen type: Swab from Nose, Groin and manipulated wound sites.
Perineal swabs will be accepted if agreed with your local IPC Team.

Urine, Sputum and manipulated sites will be accepted if they are within local guidance and agreed with the IPC Team.

Double MRSA eSwab (nose & groin/perineum only)



Single eSwab (wound sites)



Charcoal swabs were phased out in early 2018

Liquid eSwabs (pink top containers) are now to be used for MRSA screening at the Oxford Road and Trafford campuses.

Collection: Use aseptic technique

Double MRSA eSwab (N+G, or Peri):

Dampen swab with one drop of sterile saline. Do not use the liquid from the eSwab as the whole amount is needed for the test.

Do not use excessive force, pressure or bending when collecting the swab or it could break.

Apply label vertically.

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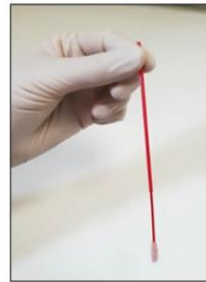
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Double eSwab: MRSA screening for nose and groin/perineum only



1. Open the peel pouch and hold with swabs and tube accessible.

Alternatively, the tube can be placed on a flat surface.



2. Take out the pink swab holding **only** the top half of the shaft.

3. Collect the first sample (groin/perineum).



4. Unscrew tube cap, insert swab into the liquid and 'swirl' for 5 seconds.

5. **Discard** the pink swab as tiger waste. Re-cap tube if required.



6. Take out the white swab holding **only** the top half of the shaft.

7. Collect the second sample (nose).



8. Unscrew tube cap, insert the swab into the tube and snap off at marked break point.

9. Discard the remaining plastic shaft.



10. Re-cap the tube with the white swab end and liquid inside.

Single MRSA eSWAB (all other sites):

Dampen swab with one drop of sterile saline. Do not use the liquid from the eSwab as the whole amount is needed for the test.

Do not use excessive force, pressure or bending when collecting the swab or it could break

Liquid eSwabs contain 1ml of liquid. No liquid should be discarded when collecting sample. Samples with insufficient liquid will be discarded.

Specimen transport: Specimens should be transported and processed as soon as possible.

Minimum volume of sample: 1ml. Liquid eSwabs contain 1ml of liquid. No liquid should be discarded when collecting sample. Samples with insufficient liquid will be discarded

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Special precautions: If processing is delayed, refrigeration is preferable to storage at ambient temperature. Delays of over 48hr are undesirable.

The white swabs should be used for nose swab as nose is the highest area of MRSA colonisation. The white swab should remain in the sample tube and is transferred to the laboratory.

Pink swab should **NEVER** transferred to the lab.

Laboratory information

Measurement units: Not applicable

Turnaround time: Negative screen at 1 working day
Positive MRSA result with sensitivities at 2 working days

Clinical information

Clinical decision points: Not applicable

Factors known to significantly affect the results: Collect specimens before antimicrobial therapy where possible.

(Last updated September 2019)