Contact precautions (CP) in hospitals are a method of infection control in the transmission of multi-drug resistant organisms. Unfortunately, even though colonization with nasal methicillin-resistant Staphylococcus aureus (MRSA) is common in asymptomatic patients (3.8-4.5%) (6,7), patients are screened for nasal MRSA since it associated with higher morbidity and mortality. However, those who test positive for nasal MRSA are kept on CP even with a cleared MRSA infection(1). At TJUH, patients were kept on CP for 24 months after a positive swab regardless of location. This, unfortunately, led to unintended negative consequences: delay in patient transfer to other facilities (e.g. rehabilitation) (3), lower patient satisfaction (4), decreased health care provider time with patients (5), and increased health care expenditures.

Methods & Intervention

In early phases of the quality improvement initiative, we performed a systematic review of the literature and a review of our institutional MRSA infection rates. Due to the compelling findings we obtained, the infection control committee approved shortening the duration of CP to 12 months – effectively cutting it in half.

Results

Our preliminary results do not indicate an increase in the MRSA infection rate. In fact there appears to be a trend down which maybe due to increased compliance and adherence to policies with less cases. In addition to the patient infections, we will also monitor the expenditure the hospital spends on gowns, gloves, disposable stethoscopes, and other materials required to maintain CP. We intend to compare the data before and after the intervention. If the results are encouraging, we will likely forego CP altogether, which has become policy in several other institutions.

References