

Screening your baby for Methicillin-resistant Staphylococcus aureus (MRSA) on the Oxford Neonatal Unit

**Information for
parents and carers**

This leaflet has been written to tell you about MRSA screening of your baby when they are admitted to the Newborn Care Unit.

What is MRSA?

MRSA stands for Methicillin-Resistant Staphylococcus Aureus.

Everyone carries germs on their skin and these are mostly harmless. Staphylococcus aureus is a common germ found on the skin and in the nose of about a third of healthy people.

MRSA is a particular type of Staphylococcus aureus that has developed resistance to an antibiotic called methicillin and some other commonly used antibiotics. 'Resistance' means the germ is not killed by a particular antibiotic.

What is the difference between 'colonisation' and 'infection' with MRSA?

Many bacteria live on the skin – this is called colonisation. Most of the time MRSA lives harmlessly on the skin, but occasionally it can enter the body and cause harm – this is called MRSA infection.

Infections with MRSA or with *Staphylococcus aureus* can range from simple skin infections, such as boils or pimples, to more serious infections (wound or bloodstream infections).

Babies may be more vulnerable to infection if they have:

- an underlying medical condition, including being premature
- open wounds
- intravenous drips or tubes going into their body.

Why does my baby need an MRSA screen?

If we can find out whether your baby is carrying MRSA harmlessly on their skin, we can then plan their care more effectively. It is helpful to know if your baby is carrying MRSA, as this affects the antibiotics we would use to prevent or treat infections.

What is an MRSA screen?

Staff in the clinic or ward will explain the procedure to you and ask for your consent to go ahead. They will then take swabs from your baby's nose by wiping the skin with a cotton bud and send them to the laboratory for MRSA testing.

Results from these swabs are usually available in 2 to 3 working days. If the swabs grow MRSA we will tell you.

What will happen if the swabs are positive?

If your baby is found to be carrying MRSA, they are unlikely to suffer any harm. Carrying MRSA is no different from carrying other bacteria on the skin. However, if your baby develops an infection, we will use a different choice of antibiotics to treat them.

Even though MRSA is resistant to some of the more commonly used antibiotics, it can still be treated with alternative antibiotics.

If your baby is found to be MRSA positive, the medical staff will assess where the best place is for your baby to receive care. This may mean that they are looked after in a separate room.

The nurses and doctors wear gloves and aprons and will use alcohol gel or wash their hands before touching all babies on the Newborn Care Unit. This helps to prevent the spread of bacteria (such as MRSA) to other babies, some of whom may have a higher risk of developing an infection.

What if I am carrying MRSA?

Washing your hands or applying alcohol gel before touching your baby will prevent the spread of MRSA to your baby. Please be extra careful to make sure that you do this.

Can MRSA be removed from the skin?

If your baby is colonised with MRSA and is going to have surgery or the insertion of a type of tube called an 'intravenous long-line', we will use a decontamination treatment to reduce the amount of MRSA on their skin. This involves using an antiseptic wash lotion before the procedure. However, this process is unlikely to permanently remove MRSA from your baby's skin.

If baby is found to be colonised with MRSA we will offer decolonisation treatment to both parents, as well as treating baby.

Will MRSA stop my baby having an operation or other treatments?

No, MRSA will not prevent operations or other treatments.

Will my baby be tested more than once for MRSA?

Swabs will be taken when your baby is admitted to the Newborn Care Unit and every Sunday whilst they are on the Unit. They'll also have a swab when they are discharged from hospital.

If your baby needs surgery or invasive procedures, we may re-test them to find out if MRSA is still present on their skin.

If your baby is transferred to another hospital in the future, the other hospital may also screen your baby for MRSA, whether they were positive or not when with us.

Do I need to do anything different when I come to visit my baby if they are carrying MRSA?

Please wash and alcohol gel your hands when entering the Newborn Care Unit and before and after handling your baby.

Will my baby always have MRSA?

MRSA can eventually be replaced by other 'good' bacteria as your baby's natural skin flora develops.

Your baby will usually be re-screened for MRSA if they are admitted to hospital again.

Are there any risks to other members of my family?

MRSA is no greater risk to healthy individuals than the other bacteria we all carry on our skin.

Family members who frequently come into hospital should tell the clinician they are seeing that a close family member has MRSA.

Do I need to continue with frequent hand washing once my baby goes home?

No. The risk to your baby will be reduced once they are at home.

Further information

For further information about MRSA, please ask to speak to the clinical team on duty. If needed, they will ask a member of the Infection Prevention and Control team to come and speak with you.

You may also find further information on the NHS Choices website.

Website: www.nhs.uk

Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

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Oxford University Hospitals NHS Foundation Trust
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