

Methicillin-resistant *Staphylococcus aureus* (MRSA) screening policy: equine

- A nasal swab will be collected from all horses at the time of admission. This swab must be submitted to the Animal Health Laboratory with the MRSA culture form. An MRSA surveillance sheet will be provided for all inpatients at the time of admission and will be placed in the medical record. Veterinary technicians will co-ordinate swab collection, with the assistance of students and clinicians.
- Nasal swabs will also be collected from horses weekly during hospitalization and at the time of discharge.
- MRSA screening results will be coordinated by the Infection Control Practitioner (ICP). Upon identification of MRSA in an animal, the ICP will contact the attending clinician, the Chair of the Infection Control Committee, and representatives from animal housing and nursing. The owner will be notified by the attending clinician, ICP, or the Chair of the Infection Control Committee (at the direction of the attending clinician).
- MRSA positive horses will be moved immediately to the isolation unit. If medical reasons would preclude moving the horse to the isolation unit, approval of the Clinic Head and Chair of the Infection Control Committee must be obtained. Full barrier precautions (gloves, gown, overboots) must be worn whenever entering the stall or touching the affected horse.
- If an MRSA-positive horse is discharged (or was discharged prior to receipt of test results) the owners must be informed of infection control measures. This should be conveyed both verbally and on the Discharge Summary.
- Following discharge, all items that have been in contact with the horse or its environment will be discarded or disinfected. Twitch ropes will be discarded. The stall will be cleaned as per standard isolation protocols.
- Voluntary screening of OVC personnel is only indicated when there is epidemiological evidence supporting personnel-borne transmission *and* when transmission is ongoing despite implementation of enhanced infection control practices. The decision to perform personnel screening will be made by the Infection Control Committee, VTH, Occupational Health Services and Student Health Services. All testing will be voluntary and anonymous. The Infection Control Committee will receive a basic report of results (number tested, number positive) if there is no concern that this basic information would identify tested personnel.
- Colonized OVC personnel will not have any restrictions placed on their work duties. The decision regarding whether decolonization therapy is indicated will be made by the person and the attending physician.