

## NARES CULTURE FOR MRSA SCREENING

### I. INTRODUCTION

Active Surveillance Testing (AST) to detect newly admitted patients who are nasally colonized with MRSA is required in 2009 to comply with California Health and Safety Code Section 1255.8, 1288.55

### II. PURPOSE

The purpose is to establish a procedure for obtaining an anterior nares specimen for MRSA screening.

### III. SUPPLIES

1. For children, adolescents and adults: BD BBL CultureSwab Cat# 220109.



139C Double plastic swabs - red cap  
Throat, vaginal, wound and skin swabs.

50 swabs / box  
10 x 50 swabs / case

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### 2, For infants:

### MINI TIP LQ STUART



Suitable for ear, nose, throat, eye and male urethral swab sampling. The narrow dimension of the swab shafts and small tip provides a more practical device for some pediatric swab sampling.



**143C Regular aluminum wire - orange cap 50 swabs / box**  
Firm wire ideal design for male urethral sampling. **10 x 50 swabs / case**

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## IV. PROCEDURE

A. Both nostrils will be sampled with a paired sterile culture swab, using the following procedure to collect the swab:

1. Open the double-swab collection device by peeling back the outer packaging.
2. Remove the plastic transport tube. Twist off the tube cap and discard it. Note: the swabs should stay attached to the red cap at all times.
3. For patients <12 years of age, remove and discard one swab. For all others, use the double-swab. In all cases, collect the specimen from both nostrils using one or two swabs, depending on the age of the patient.
4. Assist the patient or ask him/her to tilt head back.
5. Moisten the swab tip with two drops of non-bacteriostatic sterile saline. NOTE: Do not use Stuart's transport medium - it is very irritating.
6. Insert swab tip into each nostril. Note: Insert only the white Dacron tip into the nostril and not any further in.
7. Rotate the swab against the inside of each nostril for 3 seconds - slight pressure with a finger on the outside of the nose helps to assure good contact between the swab and the

inside of the nose.

8. Using the same swab, repeat for second nostril, trying not to touch anything but the inside of the nose.
9. Return swab to the plastic transport tube and make sure the red cap is on tight.
10. Label the plastic transport tube with appropriate patient identifiers and ROMRS (rule out MRSA).
11. Transport labeled nares swab at ambient temperature to the microbiology laboratory (specimen processing area) in the plastic transport bag provided.

## **I. DOCUMENT INFORMATION**

- A. Legal Authority/References
  1. Health and Safety Code Section 1255.8, 1288.55
  
- B. Author/Original Date  
Kathy Mathews RN, CIC, Infection Control, [02/2009](#)
  
- C. Gatekeeper of Original Document  
Administrative Manual Coordinators and Editors and Infection Control
  
- D. Distribution and Training Requirements
  1. This policy resides in the Administrative Manual and Infection Control website.
  2. New documents or any revised documents will be distributed to Administrative Manual holders. The department/unit/clinic manager will be responsible for communicating this information to the applicable staff.
  
- E. Review and Revision History  
Yvonne Maldonado MD, Kathleen Gutierrez MD, Hayley Gans MD, Kathy Mathews RN, Tracey Stoll RN, Kathleen Carney RN, Integrated ID Committee 2/09
  
- F. Approvals  
Infection Control Committee, 2/09

## Nursing Clinical Practice Committee

### **References:**

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