NORTHWEST TERRITORIES	Laboratory Stanton Territorial Hospital P.O. Box 10, 550 Byrne Road	Document Number: MIC30300	
Health and Social Services Authority		Version No: 2.0	Page: 1 of 6
		Distribution:	
		Microbiology Culture Manual	
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Document Name:		Date Reviewed: 11 January, 2017	
MRSA Screen – Chromogenic Agar		Next Review: 11 January, 2019	
Approved By:		Status: APPROVED	
Jennifer G. Daley Bernier, A/manager, Laboratory Services			

<u>PURPOSE</u>: To screen for *Methicillin Resistant Staphylococcus aureus* (MRSA) on admission, in Multi-resistant Organism (MRO) screens and from infected sites.

# **SAMPLE INFORMATION:**

Typo	Swab	
Туре	Amie's with or without charcoal	
	Bilateral nasal swab	
Source	Bilateral groin swab	
Source	<ul> <li>Other: drainages, wounds, sites of catheters, tracheostomy</li> </ul>	
	and other skin penetrating devices	
	If the sample is received in the laboratory and processed greater	
Stability	than 48 hours from collection:	
Stability	<ul> <li>Add specimen quality comment: "Delayed transport may</li> </ul>	
	adversely affect pathogen recovery".	
Storage	Room temperature	
Requirements		
Criteria for rejection	Unlabeled/mislabeled swabs	
and follow up action	2. Dry swabs	

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## **REAGENTS and/or MEDIA:**

Denim Blue agar (DEN) and Blood agar (BAP)

Identification reagents: rapid Staph

## **SUPPLIES:**

Wooden sticks

- Disposable inoculation needles
- Biosafety cabinet
- 35° ambient air incubator
- Vitek 2 and supplies

### **SPECIAL SAFETY PRECAUTIONS:**

Containment Level 2 facilities, equipment, and operational practices for work involving infectious or potential infectious materials or cultures.

- Lab gown must be worn when performing activities with potential pathogens.
- Gloves must be worn when direct skin contact with infected materials is unavoidable.
- Eye protection must be used when there is a known or potential risk of exposure of splashes.
- All procedures that may produce aerosols, or involve high concentrations or large volumes should be conducted in a biological safety cabinet (BSC).
- The use of needles, syringes and other sharp objects should be strictly limited.

All patient specimens are assumed to be potentially infectious. Universal precautions must be followed. Since viable micro-organisms are used, all cultures must be handled with appropriate precautions. All equipment in contact with cultures should be decontaminated by appropriate methods.

#### **QUALITY CONTROL:**

Refer to MIC60100 Non-Exempt Media Quality Control procedure Refer to Quality Control manual for reagent quality control procedures

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# **PROCEDURE INSTRUCTIONS:**

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\*Note: MRSA swabs are set up twice a day, Monday → Friday at noon and 17:00. On weekends, they are set up once a day before 15:00.

	lus, triey are set up office a day before 15.00				
Step		tion			
Proce	ocessing specimen for MRSA screening				
1	In the biosafety cabinet, inoculate the top-le swab, ensuring all surfaces of swab make of the swab make of	•			
2	Streak for confluent growth using a disposable inoculation needle.  Streak out to cover half the plate.				
3	Mark on Denim Blue plate:  • "R" (for Read) followed by the date 24 hours from day of planting i.e.: July 1 <sup>st</sup> • Time of planting i.e.: noon  Reason: Plates are read at approx. 18-24 hours after incubation.	R:July1*@ noon nares  groin			
4	Incubate plate in $O_2$ incubator at $35^\circ$ for $18$ -time of incubation.	24 hours in separate batches depending on			

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## **INTERPRETATION OF RESULTS:**

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Step	Action		
1	Remove culture plates after 18-24 hours incubation.		
2	Observe plates for denim blue colonies.  If: Then:		
	No growth OR White colonies Atypical growth	<ul> <li>Record observations in the LIS.</li> <li>No workup required.</li> <li>Record observations in the LIS.</li> </ul>	
	(i.e. colonies with blue "halos", colonies not typical denim blue color)	<ul> <li>Should not be interpreted as MRSA.</li> <li>Subculture isolate to BAP to perform further identification testing (i.e. catalase, repeat rapid Staph, tub coag).</li> <li>Atypical colonies that identify as Staphylococcus aureus need to have GPS performed to confirm oxacillin resistance.</li> </ul>	
	Denim Blue colonies seen	<ul> <li>Record observations in the LIS.</li> <li>If sufficient isolated colonies present, perform rapid Staph directly off Denim Blue agar.</li> <li>If sufficient isolated colonies are not present, subculture isolate to BAP to perform rapid Staph from the following day.</li> </ul>	

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## **REPORTING RESULTS:**

IF:	THEN:
No growth or white colonies present	Report:
	"No Methicillin Resistant Staphylococcus aureus
	(MRSA) isolated"
Denim blue colonies, rapid Staph	Add organism: "Staphylococcus aureus"
positive	Add quantity: "Isolated"
	Use canned culture comment: "***Methicillin Resistant***,
	This organism is cloxacillin resistant and is resistant to
	all beta-lactam agents"
	In order entry, copy report to Chief Medical Officer of Health
	(HPU1) and Infection Control (SOHS) if in-patient.

## **LIMITATIONS:**

- Heavy inoculation may lead to a blue/green haze appearance in the main inoculum which should not be interpreted as a positive result.
- Some Bacillus species may produce an atypical, very dark navy blue colored colony with a halo and crenated edge. Aerococcus species may also appear as dark navy blue colonies. If in doubt, subculture colonies to BA agar for further investigation.
- Incubation beyond 24 hours can result in false positive results. Suspicious colonies detected on a second day of incubation must be sub cultured for additional identification testing.

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## **REFERENCES:**

• Clinical Microbiology Procedures Handbook, 4<sup>th</sup> edition, ASM Press, 2016

 Jorgensen J.H., Pfaller M.A., Carroll K.C., Funke G., Landry M.L., Richter S.S., Warnock D.W. 2015. Manual of Clinical Microbiology, 11<sup>th</sup> edition, ASM Press, Washington, D.C.

• Oxoid Denim Blue agar package insert, May 2005

## **REVISION HISTORY:**

REVISION	DATE	Description of Change	REQUESTE D BY
1.0	11 Jan 2017	Initial Release	L. Steven
2.0	25 Apr 2018	Change to reflect new Vitek 2 instrument	L. Steven

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