Title: MIC31000-MRSA Screen Type: Laboratory Services Program SOP

Issuing Authority: Director, Health Services Policy Number:
Next Review Date: Date Approved:

PROGRAM Standard Operating Procedure – Laboratory Services			
Title: MIC31000 - MRSA Screen	Policy Number:		
Program Name: Laboratory Services			
Applicable Domain: Lab, DI and Pharmacy Services			
Additional Domain(s):			
Effective Date:	Effective Date:		
Issuing Authority:	Issuing Authority:		
Director, Health Services	Director, Health Services		
Accreditation Canada Applicable Standard: N/A			

GUIDING PRINCIPLE:

Specimens are submitted to identify carriers of methicillin-resistant *Staphylococcus aureus* (MRSA). Swabs may be submitted from any body site, but most common are nasal, groin and wound swabs. Combined nasal/axilla/rectal/perineum swabs may also be processed. MRSA may occasionally be found exclusively in urine or sputum and specimens from such sites should be processed after consultation with Infection Prevention and Control.

MRSASelect II is a selective chromogenic medium for the isolation and direct identification of MRSA. The presence of an optimized salt concentration and an antibiotic-antifungal mixture inhibit the growth of yeasts and the majority of Gramnegative and Gram-positive bacteria with the exception of MRSA. Identification is based on the cleavage of a chromogenic substrate by an enzymatic activity specific to *Staphylococcus aureus*, leading to a pink colouration of the *Staphylococcus aureus* colonies at 18 to 28 hours.

PURPOSE/RATIONALE:

To screen for Methicillin Resistant *Staphylococcus aureus* (MRSA) on admission and as part of Multi-Resistant Organism (MRO) screens.

SCOPE/APPLICABILITY:

This procedure applies to Medical Laboratory Technologists (MLTs) processing specimens for MRSA screen.

SAMPLE INFORMATION:

Туре	Swab • Amie's with or without charcoal	
Source	Bilateral nasal or groin swabMRO screen: any site	

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Stability	 If the sample is received in the laboratory and processed greater than 48 hours from collection: Add specimen quality comment: "Delayed transport may adversely affect pathogen recovery" 			
Storage Requirements	Room temperature			
Criteria for rejection	 Unlabeled/mislabeled swabs Specimen container label does not match patient identification on requisition Duplicate specimens obtained with same collection method from same collection location within 24 hours 			

REAGENTS and/or MEDIA:

- MRSASelect II agar (MRS) and Blood agar (BA)
- Identification reagents: gram stain, catalase, Staph latex test and tube coagulase

SUPPLIES:

- Disposable inoculation needles
- Wooden sticks

EQUIPMENT

- 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.

- Ensure that appropriate hang hygiene practices be used.
- 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. Routine Practices 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 MIC60040-Culture Media Quality Control procedure
- Refer to Test Manual for reagent quality control procedures

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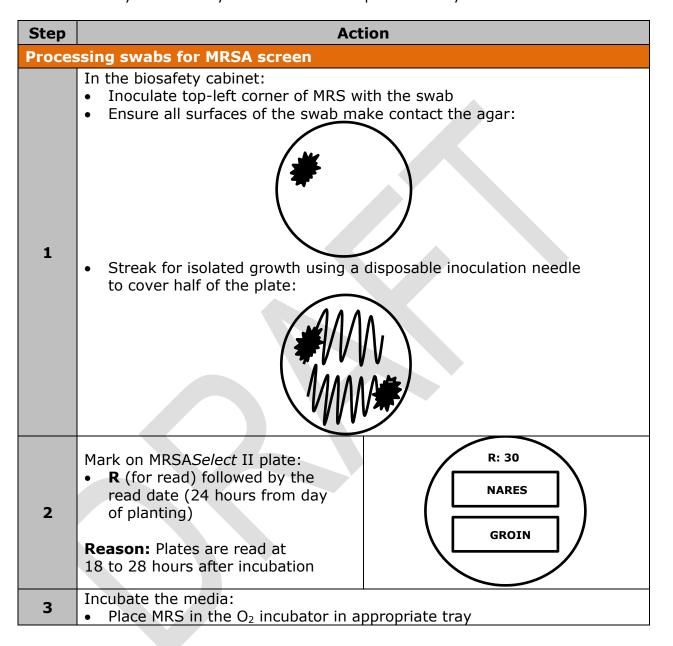
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PROCEDURE INSTRUCTIONS:

Monday to Friday: MRSA swabs are processed by 15:00

Saturday and Sunday: MRSA swabs are processed by 15:00



INTERPRETATION OF RESULTS:

Step	Action		
1	 Observe MRS plate at 18 to 24 hours (9:00 to 15:00) Examine for pink colonies 		
2	If no pink colonies are seen at 18 to 24 hours: Record observations in the LIS Workup complete MRSA not isolated		

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3	If pink colonies are seen at 18 to 24 hours: Record observations in the LIS If isolated colonies are present, perform Staph latex test If no isolated colonies are present, subculture pink colonies to BA			
	IF	THEN		
	Staph latex test NEGATIVE	Record observations in the LISWorkup completeMRSA not isolated		
4	Staph latex test POSITIVE	 Record observations in the LIS Select key 4 to add the media TC and Panel and to add the organism Staphylococcus aureus Perform TC Perform GPS 		

REPORTING INSTRUCTIONS:

IF	REPORT		
No pink colonies	• Report: "No Methicillin Resistant Staph aureus (MRSA) isolated"		
Pink colonies, Staph latex test NEGATIVE	Report: "No Methicillin Resistant Staph aureus (MRSA) isolated"		
Tube coagulase test NEGATIVE AND GPS Cefoxitin Screen POSITIVE or NEGATIVE	 Record observations in the LIS Verify Panel results Keep GPS results suppressed Suppress Staphylococcus aureus isolate ID: Change isolate # to a letter Report: "No Methicillin Resistant Staph aureus (MRSA) isolated" 		
Tube coagulase test POSITIVE AND GPS Cefoxitin Screen NEGATIVE	 Record observations in the LIS Verify Panel results Keep GPS results suppressed Suppress Staphylococcus aureus isolate ID: Change isolate # to a letter Report: "No Methicillin Resistant Staph aureus (MRSA) isolated" 		
Tube coagulase test POSITIVE AND GPS Cefoxitin Screen POSITIVE	 Record observations in the LIS Verify Panel results: Keep GPS results suppressed Verify the organism ID Staphylococcus aureus Ensure the quantitation is entered as "Isolated" The following isolate comment will be added: &cx00 In order entry, copy report to OCPHO (HPU1) In order entry, copy report to appropriate IPAC In order entry add ESO code "MRSA" 		

NOTE:

STH IPAC ward is SIPAC. IRH IPAC ward is IIPAC. Territorial IPAC ward is TIPAC

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LIMITATIONS:

1. Prolonged exposure to light (>8h) may result in reduced recovery and/or colouration of the QC organisms or patient isolates. Minimize exposure of plates to light both before and during incubation.

- 2. Incubation in CO² may result in false negative cultures. Incubate only in ambient air incubator.
- 3. Performance of this agar has been optimized for incubation at 35 37°C for 18 28h. Plates can be read any time within this timeframe. Lower or higher incubation temperatures and/or incubation times <18h may reduce the sensitivity of the agar.
- 4. When isolated light pink colonies are observed at 18h, plates should be reincubated up to 28h. If no change appears in the intensity of colouration, perform a tube coagulase test before reporting organism as MRSA.
- 5. Pinpoint pinkish colonies or red dots may appear on the agar plates. They should be considered as negative. If in doubt, confirm the identification of those colonies by further testing.
- 6. Some strains of *Corynebacterium imitans*, *Aerocuccus viridans* and *Staphylococcus cohnii* may develop heterogeneous pinkish colonies with a more intense colouration when in clusters, but colourless when colonies are isolated (which enables differentiation from MRSA colonies). If in doubt, confirm the identification of isolated pinkish colonies by doing a tube coagulase test.
- 7. Rare methicillin-susceptible *Staphylococcus aureus* (MSSA) strains may grow if their MICs are very close to the resistant breakpoint.
- 8. The growth requirements of certain MRSA strains can lead to their partial or total inhibition in culture on MRSA*Select* II agar.

CROSS-REFERENCES:

MIC60040-Culture Media Quality Control

REFERENCES:

- 1. Leber, A. (2016). *Clinical microbiology procedures handbook.* (4thed.) Washington, D.C.: ASM Press
- 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, 11th edition. Washington, D.C: ASM Press
- 3. Bio-Rad. (2016/03). MRSASelect II package insert

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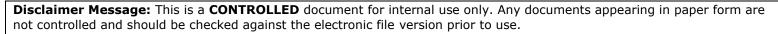
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APPROVAL:			
Date			

REVISION HISTORY:

REVISION	DATE	Description of Change	REQUESTED BY
1.0	11 Jan 17	Initial Release	L. Steven
2.0	30 Nov 18	Updated to include new Vitek 2 instrument	L. Steven
3.0	30 Dec 20	Procedure reviewed and added to NTHSSA policy template	L. Steven
4.0	31 Aug 22	Updated to reflect new MRSA agar MRSA <i>Select</i> II	L. Steven
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