

Decolonization of Non-ICU Patients With Devices



Section 11-7

Nursing Protocol Training

Nasal Mupirocin



Targeted Decolonization Introduction

- Our hospital is adopting a targeted decolonization protocol for adult non-intensive care unit (ICU) patients with selected medical devices:
 - Central lines
 - Midline catheters*
 - Lumbar drains

- From this training you will learn:
 - How to implement nasal decolonization with mupirocin for patients with medical devices who are also known to be methicillin-resistant *Staphylococcus aureus* (MRSA) carriers (by history, screening test [if performed], or clinical culture)
 - How to address special circumstances related to nasal decolonization
 - This training module will take approximately 5 minutes to complete

**NOTE: The ABATE Infection Trial showed the same 32% reduction in bloodstream infection for midlines as it did for central lines.*

Why Are We Targeting MRSA Carriers With Medical Devices?

- Body bacteria can cause infection in hospitals and nursing homes due to wounds, devices, and poor health of the patient
- Decolonization has been shown to prevent infections
 - For patients with multidrug-resistant organisms
 - In hospital ICUs
 - In long-term acute care hospitals
 - In hospital non-ICU patients with devices
- The **Active Bathing to Eliminate (ABATE) Infection Trial found that decolonization for adult non-ICU patients with specific medical devices reduced all-cause bloodstream infections by 32 percent and positive methicillin-resistant *Staphylococcus aureus* (MRSA) and vancomycin-resistant enterococcus (VRE) cultures by 37 percent¹**

¹ *Lancet*. 2019 Mar 23;393(10177):1205-15

Targeted Decolonization Allergies and Refusals

- If a patient with a device is allergic to mupirocin, do **NOT** apply mupirocin
- Do not apply mupirocin if a patient with a medical device has nasal packing or another anatomical condition precluding use of mupirocin in one or both nostrils
- As is the case with any medical care, patients can refuse the protocol, but your enthusiasm and encouragement can often help them understand the value of removing germs from their nose to protect them from infection

How Do I Perform Targeted Nasal Decolonization?

- For non-ICU patients with devices known to be MRSA carriers by history, screening, or clinical culture, apply nasal mupirocin twice a day for 5 days.
- Remember, we are not asking you to change your testing/screening processes for MRSA. Use your hospital's current processes.
- Mupirocin requires a physician order. Contact treating physicians to place the order for qualifying patients.

How To Use Nasal Mupirocin Ointment

1. Dispense mupirocin unit dose (blueberry-sized amount) for each nostril onto two new clean swabs from multidose single patient tube **before entering** patient room
2. Do not take multidose tube into contact precaution room
3. Have patient blow their nose into a tissue to clear nostrils
4. Place patient's bed at 30 degrees, if tolerated
5. Apply unit dose into each nostril using swab applicator
6. Have the patient press his/her nostrils together and massage gently for 60 seconds
7. Do this twice a day for 5 days while in the hospital
8. Stop protocol on hospital discharge
9. If patient is readmitted and still meets inclusion criteria for the protocol, restart the protocol

Mupirocin Nasal Ointment and Nasal Devices

- **Removable nasal devices:**
 - If tolerated, briefly remove nasal prongs, etc., before applying mupirocin

- **Nasal endotracheal tube/nasogastric tubes:**
 - Apply mupirocin around tube

- **Nasal trauma:**
 - Do **NOT** use mupirocin if nostrils are packed. If one nostril is unaffected, apply to that side only.