**In the top left section, a graphic focusing on decolonizing patients, one of the four key strategies to take aim and target MRSA.

Decolonization reduces the risk of methicillin-resistant Staphylococcus aureus (MRSA) transmission to other patients through environmental reservoirs or via healthcare personnel or medical devices. 

Decolonization methods include daily chlorhexidine gluconate (CHG) skin antisepsis and intranasal decolonization with mupirocin or iodine-based products.

Pay extra attention to key areas, including the areas around devices, wounds, and dressings.

Educate patients and families. Make sure they know the benefits of decolonization as a treatment to prevent infections.

In the top right section, a graphic focusing on decontaminating the healthcare environment, one of the four key strategies to take aim and target MRSA.

Daily room cleaning and disinfection is important to prevent MRSA transmission.

Frequent cleaning and disinfection of high-touch surfaces is also critical.

Set up methods to monitor, measure, and give feedback on cleaning and disinfection.

Environmental services and cleaning personnel must be engaged and included in the Comprehensive Unit-based Safety Program (CUSP) team and the implementation of interventions.

In the middle left section, a graphic focusing on preventing person-based transmission, one of the four key strategies to take aim and target MRSA.

Key practices include (but aren’t limited to) hand hygiene and proper use of personal protective equipment (PPE).

Be vigilant and meticulous regarding hand hygiene and PPE adherence. 

Possible barriers to adherence include the following: location of sinks or handwashing facilities, task overburden or staffing shortages, skin irritation and discomfort, and lack of role models or accountability.

In the middle right section, a graphic focusing on preventing device and procedure infections, one of the four key strategies to take aim and target MRSA.

Medical devices and procedures are common portals of entry for invasive MRSA infection.

This can lead to central line-associated bloodstream infections (CLABSI), ventilator-associated pneumonia (VAP), and surgical site infections (SSI).

There are well-tested, evidence-based intervention bundles to prevent CLABSI, VAP, SSI, and other healthcare-associated infections.

In the bottom left section, a graphic focusing on fundamental best practices to take aim and target MRSA.

For antibiotic stewardship, it is important to reduce unnecessary antibiotic use and combating the emergence of antibiotic-resistant pathogens.

For blood culture stewardship, it is important to optimize use of blood culture testing and improve blood culture collection practices to minimize contamination.

These practices promote diagnostic accuracy and preserve the effectiveness of antibiotic treatments. They are crucial for MRSA prevention.

In the bottom right section, a graphic focusing on the key strategies to target MRSA infection which include the following: decolonize patients, decontaminate the environment, prevent person-based transmission, and prevent device and procedure-associated infections.**