

Affix patient label within this box

Antibiotic-Resistant Organism (ARO) Adult Admission and Preadmission Screening

Calgary Zone
Acute Care/Acute Rehabilitation

Patient care staff admitting patient to complete at time of Admission or Preadmission.

Do Not Swab Every Patient. See back of form for specimen collection method.

At least one of the boxes **MUST** be checked off:

START HERE

Is patient known to have an ARO (e.g., MRSA, VRE, CPO)?

CPO=Carbapenamase Producing Organism
MRSA=Methicillin Resistant Staphylococcus aureus
VRE=Vancomycin Resistant Enterococci

Yes →

1. Patient must be **isolated** – Contact Precautions.
2. **Urban** Sites – Enter Isolation order in SCM
3. **Rural** Sites- Notify (leave a voicemail after hours) Infection Prevention and Control with Patient name and PHN

No ↓

In the past 6 months, **OUTSIDE** of Canada, has the patient received hemodialysis **OR** stayed more than 24 hrs in a healthcare facility?

Yes →

1. Contact Precautions in a single room for direct transfers **and/or** patients presenting with clinical risk factors: uncontained secretions (draining wounds/diarrhea/cough), invasive devices, cognitive impairment.
2. Obtain screening swabs for MRSA (nasal **and** rectal/stool).
3. Notify (leave a voicemail after hours) Infection Prevention and Control (IPC) with Patient Name, PHN **and**:
3a. Date of hospitalization _____
3b. Country of hospitalization _____

No ↓

In the past 6 months, has the patient received hemodialysis **OR** stayed more than 24 hrs in a healthcare facility anywhere **IN** Canada?

Yes →

1. Obtain screening swabs for MRSA (nasal **and** rectal/stool)
2. Follow Routine Infection Control Practices[±].
3. Location of most recent admission: _____

No ↓

In the past 6 months, has the patient been an inmate at a correctional facility?

Yes →

1. Obtain screening swabs for MRSA (nasal **and** rectal/stool)
2. Follow Routine Infection Control Practices[±].

No ↓

Is Patient being admitted to ICU (all sites), Renal Transplant (U37 FMC), Vascular Surgery (U58/59 PLC) or Hematology/Oncology (U57 FMC)?

Yes →

1. Obtain screening swabs for MRSA (nasal **and** rectal/stool) and swab for VRE (rectal/stool).
2. Follow Routine Infection Control Practices[±].

No to All →

1. No screening needed
2. Follow Routine Infection Control Practices[±].

Ask all questions

Date of Admission (yyyy-Mon-dd)	Screening Swabs Sent <input type="checkbox"/> MRSA <input type="checkbox"/> VRE <input type="checkbox"/> None	±Routine Practices include, but are not limited to ■ Hand Hygiene ■ PPE - as per Point of Care Risk Assessment ■ Cleaning of shared equipment between patients
Name of Staff Member Admitting Patient		

ARO Specimen Collection

Location of Swab	Instructions	Test For
Nose	Use sterile clear transport media swab (1 swab for both nares). Insert swab into each nostril no further than the length of the cotton bud and rotate gently around inner surface of nostril	MRSA
Draining wound <i>(If present: Swab one open draining wound. If more than one wound, swab wound with most drainage.)</i>	Use sterile clear transport media swab. Rotate swab while moving side to side, wound edge to wound edge across the wound beginning at one end of wound and ending at the other end	MRSA
Rectal Swab/Stoma swab	Use sterile clear transport media swab. Gently insert swab (pre-moistened with clear transport media gel if desired) approximately 1 cm per rectum /stoma and rotate. Feces must be visible on swab.	MRSA, or MRSA and VRE
Stool Culture	Collect the stool sample in any clean, dry disposable container or onto plastic wrap placed under the toilet seat, or waxed cardboard container. Can also collect from a diaper. Use a disposable spoon to transfer stool from collection container to an orange sterile specimen container labelled with patient name, PHN, sample type, and date and time of collection.	MRSA, or MRSA and VRE