

Affix patient label within this box

**Antibiotic-Resistant Organism (ARO)
Pediatric Admission and Preadmission Screening**

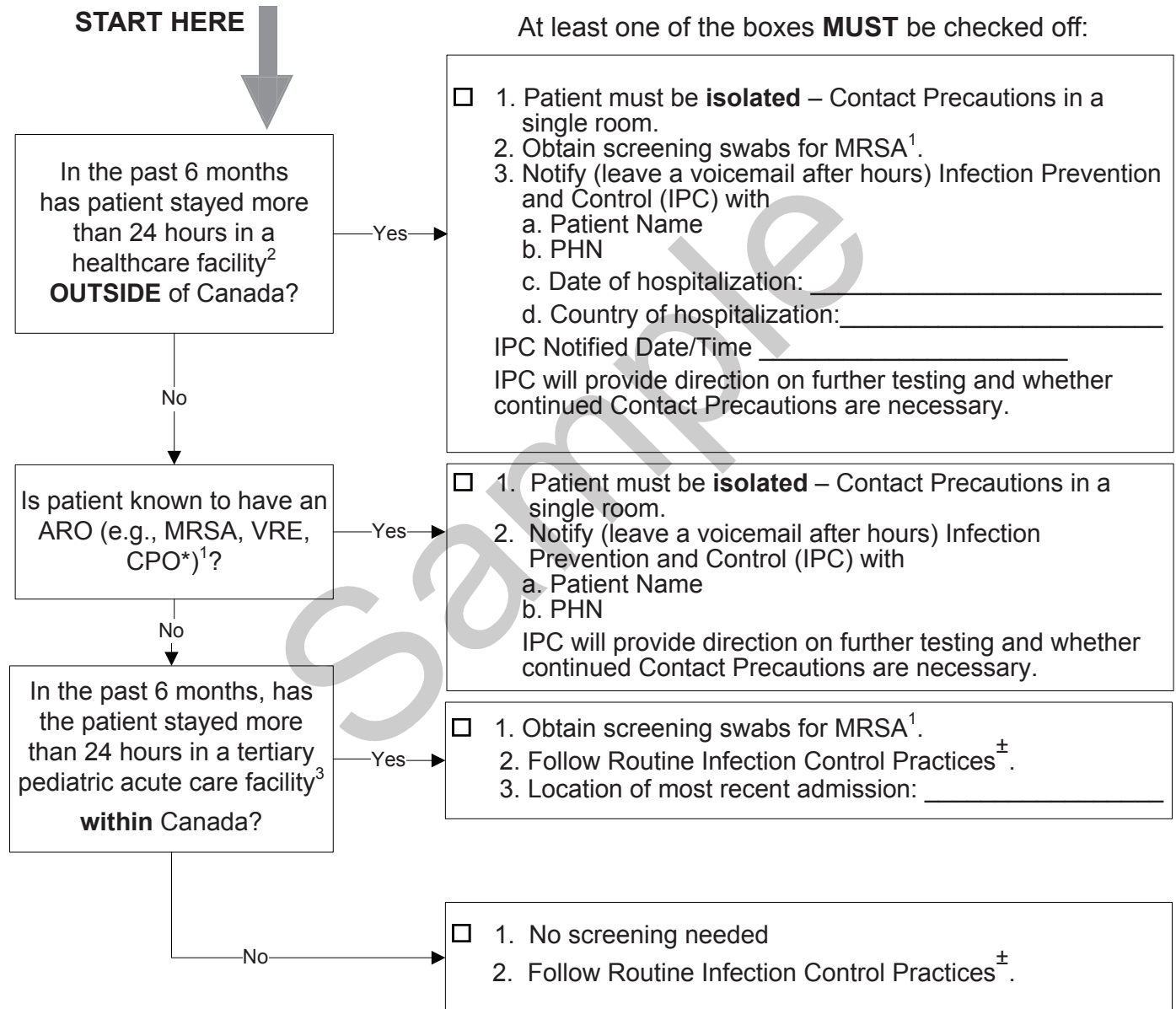
Edmonton/North/Central/South Zones

Infection Prevention and Control - Acute Care/Acute Rehabilitation (Excludes Mental Health Admissions)

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

Do Not Swab Every Patient. See back of form for method for obtaining specimens and detail for noted items

START HERE



±Routine Practices include, but are not limited to
 ■ PPE - as per Point of Care Risk Assessment
 ■ Hand Hygiene
 ■ Cleaning of shared equipment between patients

Date of Admission (yyyy-Mon-dd)	Screening Swabs Sent
Signature of Staff Member Admitting Patient	<input type="checkbox"/> MRSA <input type="checkbox"/> VRE <input type="checkbox"/> None

Recommendations for Obtaining Screening Specimens

Microbiology Requisition	MRSA	VRE or CPO*
Does each specimen require a separate requisition?	No <ul style="list-style-type: none"> • same requisition can be used for nose and groin swabs • a separate requisition for every other specimen is required (e.g. wounds – one requisition each) 	Yes
Indicate “Admission Screening” on requisition	Yes	Yes
Specimen(s) must be collected at time of admission or preadmission using the following method	MRSA	VRE or CPO*
Perform hand hygiene before and after specimen collection		
Nose	Use 1 sterile clear transport media 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	No
Groin	Use 1 sterile clear media collection swab for both groins. Rotate swab while moving side to side in each groin	No
Draining wounds (maximum 2 wounds)	Use sterile clear transport media swab (1 swab per wound). Rotate swab while moving side to side, wound edge to wound edge across the wound.	No
Stool/Feces	No	Stool specimen is preferred over rectal swab. Use sterile screw cap container (no media). If patient has an ostomy, obtain stool from ostomy.
Rectal Swab / Stoma swab (alternate to stool specimen)	No	Collect swab if unable to collect stool within 24 hours. 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.

1. MRSA – Methicillin Resistant *Staphylococcus aureus*; VRE – Vancomycin Resistant Enterococcus; CPO – Carbapenemase Producing Organisms; CRO – Carbapenem Resistant Organisms; CRE – Carbapenem Resistant Enterobacteriaceae.

*CPO – also called CRO / CRE.

2. Admission to any healthcare facility, where a patient/client receives healthcare provided by physicians, nurses and other licensed health care professionals. Include any patient/client receiving treatment requiring a stay ≥ 24 hours including emergency room inpatients and emergency patients.
3. Examples of tertiary acute care pediatric facilities include (but are not limited to): Stollery Children's Hospital, Royal Alexandra Hospital Neonatal Intensive Care Unit (NICU), and Alberta Children's Hospital.