

[144.585] METHICILLIN-RESISTANT STAPHYLOCOCCUS AUREUS

318.28 CONTROL PROGRAMS.

~~318.29~~ In order to improve the prevention of hospital-associated bloodstream infections due
~~318.30~~to methicillin-resistant Staphylococcus aureus ("MRSA"), every hospital shall establish
~~318.31~~an MRSA control program that meets Minnesota Department of Health MRSA
recommendations best practices

~~318.32~~standards as published January 15, 2008., ~~including considerations of:~~ In developing the
MRSA recommendations the Minnesota Department of Health shall consider the following
infection control practices:

~~318.33~~ (1) identification of ~~all~~ MRSA-colonized patients in all intensive care units, ~~and~~ or
~~318.34~~other at-risk patients identified by the hospital, ~~through active surveillance testing;~~

~~319.1~~ (2) isolation of identified MRSA-colonized or MRSA-infected patients in an
~~319.2~~appropriate manner;

~~319.3~~ (3) ~~monitoring and strict enforcement of~~ adherence to hand hygiene requirements; and

~~319.4~~ (4) ~~maintenance of records~~ monitor trends in the incidence of MRSA in the hospital over
time and modify interventions if MRSA infection rates are not decreasing.

The Minnesota Department of Health shall review the MRSA recommendations on an annual
basis and revise if necessary, in accordance with the available scientific data.