

Infection Prevention and Control Clinical Risk Assessment (CRA): Multi-Drug Resistant Organism (MDRO) Admission Screening

Hospital + Ward/Dept: _____
 Admission date: _____ Time: _____

Patient Name: _____
 (or place patient sticker here)

CPE Clinical Risk Assessment

(must always be completed at admission even if assessed at pre-assessment)

Date of Screen: _____ Time: _____ Signature: _____

1. Patient has history of CPE colonisation or infection at any time in the past (confirm by checking systems for flags/results and ask patient if no record on system)

Y/N

If **YES**, patient should be managed as a CPE positive case + **must** be placed in a single room, and the case **discussed with IPCT**

2. In the past 12 months (this will most often require asking the patient):

Y/N

If **YES** to any, patient is at increased risk of CPE colonisation, + **must** be placed in a single room and the case **discussed with IPCT**

- Patient has been an inpatient outside Scotland
- Patient has received holiday dialysis outside Scotland
- Patient has been close contact of someone with CPE

Y/N

Y/N

Discussed with patient/carer & information sheet provided

1. PATIENT PLACEMENT

Single room **AND** Y/N
 Contact precautions in place Y/N

If single room placement not possible, **discuss with IPCT** and document reasons below:

AND

2. SPECIMENS FOR TESTING

Rectal swab (or stool sample) Y/N

 AND
 Wound swab, if present Y/N

 AND
 Invasive device site swab, if present (exc urinary catheter site) Y/N

 AND
 CSU if catheterised Y/N

MRSA Clinical Risk Assessment: At pre-assessment On admission

Date of Screen: _____ Time: _____ Signature: _____

1. Patient has history of MRSA colonisation or infection at any time in the past (confirm by checking systems for flags/results and ask patient if no record on system)

Y/N

If **YES** to any, patient is at increased risk of MRSA colonisation

2. Patient admitted from somewhere other than home e.g. another hospital, care home (confirm by checking admission documentation/systems)

Y/N

If **NO** to all **AND** patient is in high impact specialty*

3. Patient has wound/ulcer or invasive device present before admission (may require physical inspection)

Y/N

Discussed with patient/carer & information sheet provided

1. PATIENT PLACEMENT (Single room/cohort/separated- refer to protocol)

Single Y/N
 Cohort[‡] Y/N
 Separated[‡] Y/N
 Contact precautions in place Y/N

If placement not possible as per protocol, undertake risk assessment and document reasons below:

2. SPECIMENS FOR TESTING

Nasal + perineal swabs (or nasal + throat swabs[#]) Y/N

 AND
 Wound/skin break swab, if present Y/N

 AND
 Invasive device site swab, if present (exc urinary catheter site) Y/N

 AND
 CSU if catheterised Y/N

* High impact specialties refers to: Intensive Care, Orthopaedics, Renal Medicine, Vascular Surgery and Cardiothoracic Surgery

[‡] MRSA patients nursed together, with dedicated nursing

[#] MRSA patients physically separated, no dedicated nursing

[#] Only to be used when nasal/perineal swabs are not possible