

Toolkit for Educating Patients about MRSA



Brought to you by:
Department of Veterans Affairs
Edward Hines Jr. Veterans Affairs Hospital
Spinal Cord Injury Quality Enhancement Research Initiative



Spinal Cord Injury (SCI) QUERI MRSA Education Toolkit Description

PRELIMINARY WORK

Methods and evidence supporting toolkit development

- Identified gaps in existing MRSA educational materials
- Conducted focus groups with patients/providers to identify needs
- Developed SCI MRSA educational materials
- Assessed impact of SCI MRSA educational materials on patient knowledge and behavior
- Developed Toolkit

TOOLKIT COMPONENTS

- Description of MRSA Education Toolkit
- Instructions for Using the MRSA Toolkit
- Background on Development of MRSA Toolkit
- Guidelines for Implementation of MRSA Prevention Initiative in the Spinal Cord Injury Centers (SCIC)
- FAQ: Guidelines for Implementation of MRSA Initiative in Spinal Cord Injury Centers (SCIC)
- MRSA Matters Flip Chart
- MRSA Matters Brochure
- Patient Aptitude Test
- Hand Hygiene Checklist

DEVELOPMENT OF EDUCATIONAL MATERIALS FOR THE INTERVENTION

Our data indicated that Veterans with SCI/D and their caregivers needed to know about the following topics areas related to MRSA:

- What is MRSA?
- Why does it matter? (Risk factors for SCI Patients)
- How is VA working to protect you? (Information about nasal swabbing/MRSA testing)
- What can you do? (4 things patients can do to help prevent the spread of MRSA)
- Practice Good Hand Hygiene (A step-by-step pictorial of proper hand hygiene)
- Special Information for Caring for Wounds (For Veterans and caregivers caring for pressure ulcers or sores)

The focus groups also suggested that educational materials should be:

- Colorful
- Contain meaningful pictures
- Interactive (to ensure that patients understood the information well enough to make informed decisions)

To support meaningful communication between the educator and the patient, a **flip chart** was developed to facilitate a discussion between the patient and the educator about MRSA. The **flip chart** includes the same information as the **brochure**, but presents it in a way that encourages the educator to sit down with the patient and go through the information while allowing the patient to ask questions along the way.

To further support the return demonstration of skill educational strategy, the **Patient Aptitude Test** and the **Hand Hygiene Checklist** were developed to measure patient retention of the knowledge.

Spinal Cord Injury (SCI) QUERI Background Information on Development of Toolkit

PRELIMINARY WORK

IDENTIFYING EXISTING LEVELS OF KNOWLEDGE RELATED TO MRSA AND MRSA PREVENTION

Data gathered in focus groups of 33 providers and 8 patients found that general knowledge about MRSA and MRSA prevention is low for Veterans with Spinal Cord Injury and Disorders (SCI/D). Data also showed that MRSA educational materials that covered specific risk factors for Veterans with SCI/D were needed. In order to develop these materials, it was important to identify the information that Veterans with SCI/D needed to know about MRSA. It was also important to include information for caregivers related to MRSA prevention.

PROVIDER AND PATIENT FOCUS GROUPS

Providers

Focus groups with 33 providers were conducted from mid to late Summer of 2009 at two VA SCI centers to learn about what providers know about MRSA and MRSA prevention and to learn about barriers and facilitators to proper MRSA prevention as well as the barriers and facilitators to patient education on MRSA.

Focus groups involved a range of providers including physicians, nurses (inpatient, outpatient, and home health,) and therapists. Specific information covered in the provider focus groups included:

- What do you know about MRSA?
- How serious do you think MRSA is?
- What do you do to prevent the spread of MRSA?
- What MRSA-precaution guidelines does your unit follow?
- Are there techniques you use to educate patients about MRSA?
- What do you think patients know or should know about MRSA?
- How do you explain to the patient the concept of isolation or cohorting?
- How do you talk to caregivers about MRSA?
- What do you think caregivers understand or should know about MRSA?

We also discussed the available materials for educating patients about MRSA and identified some areas where information specifically for Veterans with SCI/D might be helpful, as well as strategies for educating patients about MRSA.

Patients

A focus group with eight patients was conducted in late Summer of 2009 at one VA SCI center to learn about existing levels of knowledge about MRSA and MRSA prevention in Veterans with SCI/D.

The specific information covered in the focus group included:

- What do you know about MRSA?
- How serious do you think MRSA is?
- What do you do to prevent the spread of MRSA and does having a spinal cord injury make any of these prevention activities more difficult (such as washing your hands)?

- What have your providers told you about MRSA and have they addressed the questions you have?
- Do your providers regularly wash their hands and have you ever asked your providers to wash their hands?
- What questions do you have about MRSA?

We also provided the patients with the existing materials available to them about MRSA. We had the patients identify some areas where additional information might be needed, especially for Veterans with SCI/D (such as the specific risk factors for their group).

DEVELOPMENT OF EDUCATIONAL MATERIALS FOR THE INTERVENTION

The focus groups also suggested that educational materials should be colorful and contain meaningful pictures, which is why the team chose to include an image from the New England Journal of Medicine (courtesy of Dr. Curtis Donskey) demonstrating the importance of hand hygiene.

To support meaningful communication between the educator and the patient, a **flip chart** was developed to facilitate a discussion between the patient and the educator about MRSA. The **flip chart** includes the same information as the **brochure**, but presents it in a way that encourages the educator to sit down with the patient and go through the information while allowing the patient to ask questions along the way.

To further support the return demonstration of skill educational strategy, the **Patient Aptitude Test** and the **Hand Hygiene Checklist** were developed to measure patient retention of the knowledge covered in the **flip chart**.

The evidence-based tools developed from the first part of the study were vetted with an **expert panel** to ensure all topics were covered; the materials were presented in the appropriate manner for reading level, and were consistent with other MRSA educational materials available from the CDC and other organizations. The team relied on the expert panel to **confirm the SCI specific information in the educational materials was appropriate**, as this information does not appear to be available in any existing educational materials accessible for patients.

INTERVENTION (TESTING THE EDUCATIONAL STRATEGY AND MATERIALS)

To test the educational materials developed from the focus groups and expert panel, the team conducted a randomized control trial (RCT) of the educational strategy and materials. The RCT included the same two VA SCI centers that were included in the focus group portion of the study.

Veterans who were randomized to the control group received the standard education and the existing brochure utilized for that facility for MRSA.

Veterans randomized to the intervention group received the educational materials and strategies developed for the study. The process included:

1. One-on-one session with a nurse with the **Flip Chart**
2. Follow-up discussion and testing using the **Patient Aptitude Test and the Hand Hygiene Checklist**
3. A brochure that provides specific information on MRSA for Veterans with SCI/D

Caregivers

We also spoke with eight caregivers about the brochure we developed and they indicated that the topics were relevant to them and provided them with enough basic information to know what MRSA is and how to prevent it. It is recommended to provide the **brochure** to caregivers of Veterans with SCI/D, and when appropriate or possible, include the caregiver in the education provided to the Veteran they are caring for.

Instructions for Using the MRSA Toolkit

Flip Chart – Instructions on How to Assemble

The flip chart included in the MRSA Education toolkit is intended to provide the educator with a method to talk to patients about MRSA.

The information covered in the flip chart mirrors the same information found in the brochure; however, the flip chart serves as a way for the educator to present the information to the patient and while allowing the patient to ask questions.

Assembly:

To put together the flip chart you will need a binder (for the study we used “flip chart binders” or “display binders” if you use the search terms you should be able to find a similar item). Some of these binders come with clear sheets and some do not so you may have to buy clear sheets to go in the binders.



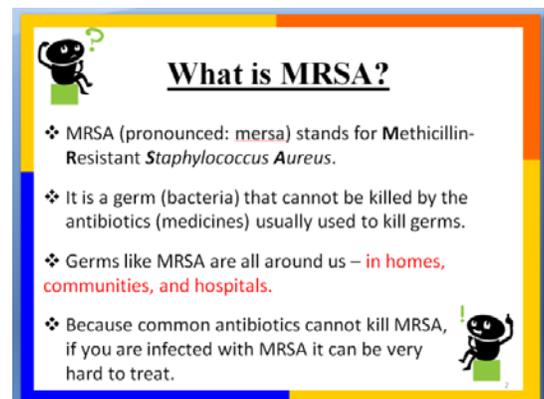
**** Note - You have to print the flip chart on single-sided sheets of paper.** Set the flip chart up so one side is facing you. Bring the clear sheets of the binder to the side in front of you. Insert the first slide, title slide, facing away from you so when you flip it over it will be the first slide the patient will see.



Slide 1 (patient-facing)

2. Do the same thing with slide 2 and then flip to the next clear sheet.

Slide 2 (patient-facing)



What is MRSA?

- ❖ MRSA (pronounced: mersa) stands for Methicillin-Resistant *Staphylococcus Aureus*.
- ❖ It is a germ (bacteria) that cannot be killed by the antibiotics (medicines) usually used to kill germs.
- ❖ Germs like MRSA are all around us – in homes, communities, and hospitals.
- ❖ Because common antibiotics cannot kill MRSA, if you are infected with MRSA it can be very hard to treat.

3. Take slides 3 and 4 and place them back to back. Insert so slide 3 is facing you. You will notice that slide 3 is the “nurse” side to slide 2, and provides some instruction on how to speak to the patient about the slide they are viewing.

What is MRSA? (Nurse)

- ❖ Be sure to show the patient how MRSA is written, and pronounce it for them several times.
- ❖ The most important thing to note here is that MRSA is a germ that cannot be killed by common antibiotics.
- ❖ Make sure the patient understands that MRSA is everywhere, not just in the hospital.
- ❖ Make sure the patient understands that MRSA carriers are not treated, and that MRSA infections are. Infections can be difficult to treat because common antibiotics do not kill MRSA.

Slide 3 (nurse-facing)



Why it matters ...

As a Veteran with a spinal cord injury, you may be at higher risk of having or getting MRSA due to:

- having wounds or pressure ulcers
- frequent use of antibiotics
- use of catheter devices such as a urinary catheter
- spending more time in the hospital
- frequent contact with other people who might carry MRSA



Slide 4 (patient-facing)

4. Continue pairing the next two slides together (5&6, 6&7, etc) you should notice that when you flip to the next page that the slide that the patient is viewing matches the slide that you are viewing.

Why it matters (Nurses)

Explain to the patient that, as a person with spinal cord injury, they may be at higher risk for having or getting MRSA.

The reasons for this include:

- having wounds or pressure ulcers
- frequent use of antibiotics
- use of catheter devices such as a urinary catheter
- spending more time in the hospital
- frequent contact with other people who might carry MRSA

Allow the patient to ask questions.

Slide 5 (nurse-facing)

If you test positive for MRSA you ...

- have a greater chance of getting sick (infected) from MRSA.
- may pass MRSA on to other patients or your provider.
- may pass MRSA on to your family, friends, or loved ones.



Picture of MRSA Infections on the skin.

Slide 6 (patient-facing)

If you test positive for MRSA you... (Nurse)

Explain to the patient that just because they are MRSA positive does not mean they will get sick or get an infection. Being a MRSA carrier does not mean you will receive treatment for MRSA, but it does mean that you:

- have a greater chance of getting sick with MRSA.
- may pass MRSA on to other patients or your provider.
- may pass MRSA on to your family, friends, or loved ones.

7

Slide 7 (nurse-facing)



What can you do?

1. Know your MRSA status! (Ask your provider for the results **every time** you are tested.)
2. Always clean all of your personal equipment.
3. Always clean your hands, if you can't clean them on your own, ask for help!
4. Ask your provider, family, and other visitors to clean their hands too!

When do you wash your hands?



Slide 8 (patient-facing)

What can you do? (Nurse)

For this slide, it is important to emphasize the 4 main points. If the veteran also remembers some of the details, that is great!

Read details underneath each bullet.

1. Know your MRSA status! (Ask your provider for the results of your test **every time** you are tested.)
2. Always clean all of your personal equipment
 - Wheelchairs
 - Adaptive equipment
 - Gloves or Wrist guards
 - Ask for help if you cannot clean these items on your own!
3. Always clean your hands, if you can't clean them on your own, ask for help!
 - Before and after eating
 - After sneezing
 - After bowel or bladder care
 - After group activities like physical therapy and games
 - Before and after you leave any hospital room!
4. Ask your provider, family, and other visitors to clean their hands too!

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Slide 9 (nurse-facing)

Cleaning your hands makes a BIG difference!

MRSA on the hands before hand hygiene is gone after hand hygiene



Donskey, C.J and Eckstein, B.C. *The Hands Give it Away*. N Eng J Med; 360, 3: e3.

10

Slide 10 (patient-facing)

Cleaning your hands makes a BIG difference! (Nurse)

Explain to the patient that the image on the left shows MRSA on the hands of a provider.

The provider then washed their hands ...

The second image shows that after the provider washed her hands, the MRSA that was on her hands was no longer there!

11

Slide 11 (nurse-facing)

Things to Remember When Washing Hands

Alcohol hand sanitizer OR soap and water can be used to clean your hands.

- Use soap and water if your hands are visibly soiled.



When washing your hands be sure to:



- Rub hands together vigorously long enough to sing "Happy Birthday" (or about 15 seconds).



- Rinse hands and wrists.
- When drying hands, be sure to dry from fingertips down to your wrists.



- Use a paper towel to turn off the faucet and to open the door to leave the restroom.

12

Slide 12 (patient-facing)

Things to Remember When Washing Hands – (Nurse)

Alcohol hand sanitizer OR soap and water can be used to clean your hands.

- Use soap and water if your hands are visibly soiled.

When washing your hands be sure to:

- Rub hands together vigorously long enough to sing “Happy Birthday” (or about 15 seconds)
- Rinse hands and wrists.
- When drying hands, be sure to dry from fingertips down to your wrists.
- Use a paper towel to turn off the faucet and to open the door to leave the restroom.

13

Slide 13 (Final Slide – nurse -facing)

**** Note that final slide is the 13th slide and it will not have a slide to pair with it. This slide should be inserted facing you.**

When using the flip chart:

1. The slides intended for the nurse are labeled “nurse” and the others are intended for the patient.
2. The slides labeled “nurse” are intended to provide the educator with talking points for each slide they are showing the patient, and indicate points at which they should ask the patient if they have any questions.
3. **The brochure** should be given to patients after the education to take home.

Patient Aptitude Test

The patient aptitude test is used to make sure the patient leaves the educational session with the 5 most important points in the brochure.

The patient should be able to recite the main points listed for each of the 5 sections (i.e. What is MRSA? – MRSA is resistant to antibiotics or medicine & MRSA is a bug, germ, or bacteria.)

If the patient is unable to recite these points, the educator should repeat these points to the patient, and ask them to repeat them back to them.

Once the patient is able to demonstrate recall for each of the main points, the patient should receive a check in the “check if answered column”. The educator should also record the number of times they had to repeat the information, and any comments they feel are relevant about the exchange.

The aptitude test can be used as a follow-up education tool to measure patient retention of the information. Repetition of these main points may lead to better patient retention of the information.

Hand Hygiene Checklist

The hand hygiene checklist is intended to be a tool that can be used to measure everyone's knowledge about proper hand hygiene.

The hand hygiene checklist clearly lists the steps to be taken to appropriately wash your hands.

The individual (patient, caregiver, or even provider) should demonstrate to the educator the way they wash their hands.

The educator should observe the individual washing their hands and make note of any of the steps they miss.

Afterwards, the educator should talk to the individual about the steps they missed in the hand hygiene process and provide them with **a brochure** that contains information about MRSA and the steps to good hand hygiene.

MRSA Brochure

The MRSA brochure is intended to be the all purpose tool to be distributed freely to Veterans with SCI/D, their caregivers, family members and visitors.

MRSA MATTERS ...

but why does it matter to you?

MRSA Education for Veterans with
Spinal Cord Injury



What is MRSA?

- ❖ MRSA (pronounced: mersa) stands for **M**ethicillin-**R**esistant *Staphylococcus Aureus*.
- ❖ It is a germ (bacteria) that cannot be killed by the antibiotics (medicines) usually used to kill germs.
- ❖ Germs like MRSA are all around us – **in homes, communities, and hospitals.**
- ❖ Because common antibiotics cannot kill MRSA, if you are infected with MRSA it can be very hard to treat.



What is MRSA? (Nurse)

- ❖ Be sure to show the patient how MRSA is written, and pronounce it for them several times.
- ❖ The most important thing to note here is that MRSA is a germ that cannot be killed by common antibiotics.
- ❖ Make sure the patient understands that MRSA is everywhere, not just in the hospital.
- ❖ Make sure the patient understands that MRSA carriers are not treated, and that MRSA infections are. Infections can be difficult to treat because common antibiotics do not kill MRSA.



Why it matters ...

As a Veteran with a spinal cord injury, you may be at higher risk of having or getting MRSA due to:

- having wounds or pressure ulcers
- frequent use of antibiotics
- use of catheter devices such as a urinary catheter
- spending more time in the hospital
- frequent contact with other people who might carry MRSA



Why it matters (Nurses)

Explain to the patient that, as a person with spinal cord injury, they may be at higher risk for having or getting MRSA.

The reasons for this include:

- having wounds or pressure ulcers
- frequent use of antibiotics
- use of catheter devices such as a urinary catheter
- spending more time in the hospital
- frequent contact with other people who might carry MRSA

Allow the patient to ask questions.

If you test positive for MRSA you ...

- have a greater chance of getting sick (infected) from MRSA.
- may pass MRSA on to other patients or your provider.
- may pass MRSA on to your family, friends, or loved ones.



Picture of
MRSA
Infections on
the skin.



If you test positive for MRSA you... (Nurse)

Explain to the patient that just because they are MRSA positive does not mean they will get sick or get an infection. Being a MRSA carrier does not mean you will receive treatment for MRSA, but it does mean that you:

- have a greater chance of getting sick with MRSA.
- may pass MRSA on to other patients or your provider.
- may pass MRSA on to your family, friends, or loved ones.



What can you do?

1. Know your MRSA status! (Ask your provider for the results every time you are tested.)
2. Always clean all of your personal equipment.
3. Always clean your hands, if you can't clean them on your own, ask for help!
4. Ask your provider, family, and other visitors to clean their hands too!

When do you wash your hands?



What can you do? (Nurse)

For this slide, it is important to emphasize the 4 main points. If the veteran also remembers some of the details, that is great!

Read details underneath each bullet.

1. Know your MRSA status! (Ask your provider for the results of your test **every time** you are tested.)

2. Always clean all of your personal equipment

-Wheelchairs

-Gloves or Wrist guards

-Adaptive equipment

- Ask for help if you cannot clean these items on your own!

3. Always clean your hands, if you can't clean them on your own, ask for help!

-Before and after eating

- After group activities like

- After sneezing

physical therapy and games

- After bowel or bladder care

- Before and after you leave any hospital room!

4. Ask your provider, family, and other visitors to clean their hands too!

Cleaning your hands makes a BIG difference!

MRSA on the hands before hand hygiene is gone after hand hygiene



Donskey, C.J and Eckstein, B.C. *The Hands Give it Away*. N Eng J Med; 360, 3: e3.

Cleaning your hands makes a BIG difference! (Nurse)

Explain to the patient that the image on the left shows MRSA on the hands of a provider.

The provider then washed their hands ...

The second image shows that after the provider washed her hands, the MRSA that was on her hands was no longer there!

Things to Remember When Washing Hands

Alcohol hand sanitizer OR soap and water can be used to clean your hands.

- Use soap and water if your hands are visibly soiled.



When washing your hands be sure to:



- Rub hands together vigorously long enough to sing “Happy Birthday” (or about 15 seconds).



- Rinse hands and wrists.
- When drying hands, be sure to dry from fingertips down to your wrists.



- Use a paper towel to turn off the faucet and to open the door to leave the restroom.

Things to Remember When Washing Hands – (Nurse)

Alcohol hand sanitizer OR soap and water can be used to clean your hands.

- Use soap and water if your hands are visibly soiled.

When washing your hands be sure to:

- Rub hands together vigorously long enough to sing “Happy Birthday” (or about 15 seconds)
- Rinse hands and wrists.
- When drying hands, be sure to dry from fingertips down to your wrists.
- Use a paper towel to turn off the faucet and to open the door to leave the restroom.

MRSA Matters: Patient Hand Hygiene Demonstration Checklist

Please check the appropriate box based on your assessment of the patient's demonstration . Feel free to make comments as well.

Behavior Performed

Alcohol Hand Sanitizer	Satisfactory	Unsatisfactory	Not Performed	
1. Rubbed hands together covering all surfaces of hands and fingers with antiseptic rub.				Comments:
2. Rubbed hands together until alcohol was completely dry.				Comments:
Handwashing Using Soap and Water	Satisfactory	Unsatisfactory	Not Performed	
1. Wet hands and wrists under running water.				Comments:
2. Applied a small amount of soap, and began lathering (covering all surfaces of hands).				Comments:
3. Performed hand hygiene for about 15 seconds using plenty of friction and lather.				Comments:
a. rubbed palms				Comments:
b. interlaced fingers				Comments:
c. rubbed back of hands				Comments:
4. Cleaned fingernails in palms with additional soap.				Comments:
5. Rinsed hands and wrists.				Comments:
6. Dried hands with a paper towel (from fingertips to wrist.)				Comments:
7. Used paper towel to shut off sink.				Comments:

Date of Education: ____ / ____ / ____

Time of Education: _____

Educator Initials: _____

Location of Education: _____

Patient Status: Inpatient Outpatient Extended Care

MRSA Matters: Patient Aptitude Test

Knowledge	Possible Answers	Check if answered	#of Repetitions	Comments
1. What is MRSA?	MRSA is resistant to antibiotics (medicines).	<input type="checkbox"/>	_____	
	MRSA is a bug/germ/bacteria.	<input type="checkbox"/>		
2. What makes someone with SCI more susceptible to getting MRSA? [Why it matters ...]	Frequent antibiotic use	<input type="checkbox"/>	_____	
	Frequent hospitalization	<input type="checkbox"/>		
	Contact with other people who might carry MRSA	<input type="checkbox"/>		
	Frequent skin issues (wounds and pressure ulcers)	<input type="checkbox"/>		
	Use of devices such as urinary catheter	<input type="checkbox"/>		
3. If you test positive for MRSA you:	May pass MRSA on to your family or friends	<input type="checkbox"/>	_____	
	May pass MRSA on to your providers or other patients	<input type="checkbox"/>		
	Have a greater chance of getting sick with MRSA	<input type="checkbox"/>		
4. What can you do (to help prevent the spread of MRSA)?	Know your current status.	<input type="checkbox"/>	_____	
	Have a greater chance of getting sick with MRSA	<input type="checkbox"/>		
	Ask your provider, family, and other visitors to clean their hands too.	<input type="checkbox"/>		
	Always clean your hands.	<input type="checkbox"/>		
5. What are some of the important things to remember when cleaning my hands?	Alcohol hand sanitizer or soap and water can be used to clean your hands.	<input type="checkbox"/>	_____	
	Rub hands together vigorously for at least 15 seconds.	<input type="checkbox"/>		
	Rinse hands and wrists and dry with a paper towel from fingertips to wrists.	<input type="checkbox"/>		
	Use a paper towel to turn off the faucet & open the door to leave the restroom.	<input type="checkbox"/>		
	If hands are visibly soiled, use soap and water.	<input type="checkbox"/>		

Date of Education: ____ / ____ / ____

Time of Education: _____

Location of Education: _____

Educator Initials: _____

Patient Status: Inpatient Outpatient Extended Care

Practice Good Hand Hygiene!

Cleanse hands for as long as it takes to sing “Happy Birthday” and follow the steps below for good hand hygiene!



Special Information for Caring for Wounds

Always cover wounds, pressure ulcers, or skin lesions with clean bandages. Clean hands and put on clean disposable gloves to:

- Touch or change bandages
- Touch or clean a wound

After wound or bowel/bladder care:

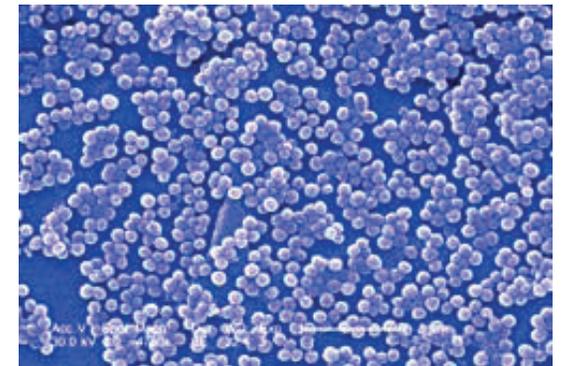
- Remove gloves so they are inside out
- Never touch the used gloves after they are off your hands
- Throw gloves away immediately.
- Do not touch the outside of the gloves
- Clean hands again

For more information, please visit the Center for Disease Control (CDC) MRSA website at:

http://www.cdc.gov/ncidod/dhqp/ar_MRSA.html

Contact your local VA for more Information!

MRSA MATTERS



Information for Veterans with Spinal Cord Injury

What is MRSA?

- MRSA (pronounced: mersa or M-R-S-A) stands for **M**ethicillin-**R**esistant *Staphylococcus Aureus*.
- It is a germ (bacterium) that cannot be killed by the antibiotics (medicines) usually used to kill germs.
- Germs like MRSA are all around us – in the environment at home, in the community and in hospitals.
- If you are infected with MRSA it can be very hard to treat, because common antibiotics cannot kill MRSA.

A spinal cord injury may put you at a higher risk for having or getting MRSA due to:

- Having wounds or pressure ulcers
- Frequent use of antibiotics
- Use of devices such as a urinary catheter
- More time spent in the hospital
- Frequent contact with other people who might carry MRSA

How VA is Working to Protect You

Because it does not always make people sick, you may carry the MRSA germ without knowing it.

VA offers to test all hospitalized patients for MRSA to see if they carry the germ. Testing includes swabbing your nose or pressure ulcer(s).

If you test positive for MRSA you:

- Have a greater chance of getting sick with MRSA
- May pass MRSA on to other patients
- May pass MRSA on to your family, friends, or loved ones

MRSA on Your Hands



BEFORE HAND HYGIENE

Published in the New England Journal of Medicine, an image shows the effect of cleaning hands in preventing the spread of MRSA.

What can you do?

- 1. Know your current status.**
 - Ask your provider for the results of your MRSA test every time you are tested.
- 2. Frequently clean all personal equipment that you use including:**
 - Areas of your wheelchair that are touched by you or your caregiver.
 - Wheelchair gloves or wrist guards every day
 - Your adaptive equipment
 - If you cannot clean these items, ask a health care provider, caregiver, or family member to help you
 - Do not share towels, washcloths, razors, clothing, or other personal items with others.
- 3. Always clean your hands:**
 - Before and after eating
 - After sneezing
 - After bowel or bladder care
 - After group activities such as physical therapy, exercise, or bingo games
 - As you enter and leave a hospital room (yours or another patient's)
 - **If you cannot clean your own hands, ask a health care provider or a family member to assist you**
- 4. Ask your provider, family, and other visitors to clean their hands too!**