Wyoming Department of Health
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FAQ's Concerning MRSA and School Athletics

What is MRSA?

MRSA is a kind of *Staphylococcus aureus* ("staph") bacterium that is resistant to beta-lactam antibiotics, including methicillin, oxacillin, penicillin, and amoxicillin. It is often resistant to many other antibiotics as well.

Why is MRSA a problem for school athletics departments?

There are several reasons why school athletics professionals are concerned about MRSA.

- First, in Wyoming and elsewhere throughout the country, MRSA infections are becoming more common in community settings, including schools and among athletes.
- Second, staph (including MRSA) are spread by direct contact (see below for more on how MRSA is spread). On athletic teams, there are many opportunities for direct contact among athletes.
- Third, a MRSA outbreak can cause much anxiety for parents, athletes and staff, and MRSA infections can vary from mild to severe.
- Finally, MRSA is part of a larger problem of antibiotic resistance.

How is MRSA spread?

Staph, including MRSA, are spread by direct skin-to-skin contact, such as shaking hands, wrestling, or other direct contact with the skin of another person. Staph are also spread by contact with items that have been touched by people with staph, like towels shared after bathing and/or drying off, or shared athletic equipment in the gym or on the field.

Most people who have staph or MRSA on their skin do not have infections or illness caused by staph. These people are considered "colonized" with staph. Staph infections start when staph bacteria gets into a cut, scrape or other break in the skin. People who have skin infections should be very careful to avoid spreading their infection to others. Steps to prevent spread are listed below.

What are the symptoms of an infection caused by MRSA?

The symptoms of a MRSA infection as well as a skin infection caused by other staph bacteria are the same. Pimples, rashes, pus-filled boils, especially when warm, painful, red or swollen, can indicate a staph skin infection. Impetigo is one example of a skin infection that can be caused by staph, including MRSA.

Staph, including MRSA, can also cause more serious infection, such as severe skin infection, surgical wound infections, bloodstream infections and pneumonia.

These symptoms could include high fever, swelling, heat and pain around a wound, headache, fatigue, and others.

How are MRSA infections treated?

Most MRSA infections are treated by good wound and skin care: keeping the area clean and dry, washing hands after caring for the area, carefully disposing of any bandages, and allowing the body to heal.

Treatment of MRSA infections often require the use of antibiotics. If antibiotics are needed, it is important to complete the full course of antibiotics that are prescribed, unless a healthcare provider directs you differently. If the infection has not improved within a few days after seeing the healthcare provider, the athlete should contact the provider again.

Are my athletes at risk for MRSA infection?

Many people, including athletes, carry staph (including MRSA) in their nasal cavity or on their skin and do not know they are carrying it. They typically do not have any signs or symptoms of illness.

However, there are some conditions that can lead to MRSA/staph infections among athletes. Factors that have been associated with the spread of MRSA skin infections include close skin-to-skin contact, openings in the skin such as cuts or abrasions (as might occur with body shaving), contaminated items and surfaces, crowded living conditions, and poor hygiene. In addition, MRSA infections sometimes occur among previously healthy persons with no identifiable risk factors.

What should I do if an athlete in my school is reported to have MRSA?

Precautions:

- Treat any draining wound as a potential MRSA infection.
- Make sure the wound is fully covered at all times, especially if the athlete participates in direct contact with other athletes.
- Any athlete with a suspected Staph infection should be excluded from practice or play until the lesions are completely healed, OR unless the lesion can be completely covered by bandaging, rendering the lesion non-infectious to others, OR unless there is a clinician’s note indicating that the lesions are non-infectious to others.
- Encourage the athlete to be evaluated by a healthcare provider.
- Inform the healthcare provider of the possibility of MRSA.

Caring for MRSA at school:

- Instruct the athlete to practice frequent hand washing and to carry and use hand sanitizer when soap and water are not available.

- Do not allow an athlete with a MRSA infection to use any whirlpools or hot tubs.
- Encourage the athlete to follow good hygienic practices—washing hands, showering, and regularly laundering clothes.
- Clean sports equipment or any part of the athletic area that may come in contact with the wound with commercial disinfectant or fresh solution of diluted bleach before any other athlete comes in contact with the equipment or area.
- Use clean gloves when caring for the wound or touching any broken skin.
- Remove gloves promptly after use and discard before touching uncontaminated items and surfaces and before treating another athlete.
- Wash hands immediately after contact with the wound or broken skin even if gloves were worn.
- Wash hands between tasks and procedures on the same athlete to prevent cross-contamination of different body sites.
- Discard wound dressings after each use.
- Place disposable items that have come in contact with the infected site in a separate trash bag, and secure the bag before placing in the common garbage.
- Do not give other team members prophylactic antibiotics.

If MRSA infection has been found among my athletes, should I test and treat *all* my athletes for MRSA?

It is not recommended that all athletes get tested and treated for MRSA if one or more athletes in your school has a MRSA infection. Any athlete with a skin infection should be encouraged to see their healthcare provider. The healthcare provider will determine the best course of treatment for that individual.

Do I need to alert parents and staff if an athlete has a MRSA infection?

When MRSA occurs within the school population, consult with the school nurse, school physician or health service to determine, based on medical judgment, whether some or all parents and staff should be notified. When necessary, consult with the WDH (877-996-9000). Prior to parent notification, discuss the issue with the school administrator.

How can I prevent MRSA infection among athletes?

It is important for school athletics professionals to coordinate infection control efforts with school health professionals, residential services, and other colleagues to effectively prevent and control infections such as MRSA.

Practicing good hygiene is the best way to prevent getting and spreading MRSA infections and many other infections. Encourage athletes to:

- Keep hands clean by washing them frequently with soap and warm water or use an alcohol-based hand sanitizer gel.
- Shower with soap and water as soon as possible after direct contact sports, and use a clean, dry towel.
- Keep cuts and scrapes clean and covered with a bandage until healed.

- Avoid contact with other people’s wounds or bandages.
- Not share towels (even on the sidelines at a game), soap, razors, or other personal care items.
- Not share ointments or antibiotics.
- Wash towels, uniforms, scrimmage shirts, and any other laundry in hot water and detergent, and dry on the hottest cycle after each use. Inform parents of these precautions if laundry is sent home (laundry must be in an impervious container or plastic bag for transporting home).
- Avoid whirlpools or common hot tubs, especially when having open wounds, scrapes, or scratches.
- Inform their coach or athletic trainer if they think they have a skin infection.

In addition, develop procedures for cleaning athletic area and equipment, and educating staff and athletes about these procedures:

- Clean the athletic area and sports equipment routinely—at least weekly—using a commercial disinfectant or a fresh (mixed daily) solution of 1 part bleach to 100 parts water (1 tablespoon bleach to 1 quart of water).
- Clean mats and other high-use equipment before each practice and several times a day throughout a tournament, using a commercial disinfectant or a fresh (mixed daily) solution of 1 part bleach to 100 parts water (1 tablespoon bleach to 1 quart of water).