

 Lakeridge Health	Specimen Collection for Antibiotic Resistant Organisms (AROs) – Medical Directive	
	Manual: Medical Directives & Delegated Controlled Acts	Original Date: 23OCT2018
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	Approved by: Committee of Infection, Prevention and Control, Interprofessional Collaboration Committee, Nursing Professional Practices Sub-Committee, Operations Committee, Medical Advisory Committee	
	Cross Reference to: Consent to Treatment – Policy and Procedures; ARO Swab Instruction Sheet	
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Authorizing Prescribers

All Lakeridge Health (LH) Most Responsible Practitioners (MRP) for the following Sections:

- Healthy Aging
- Medicine
- Surgery
- Critical Care
- Emergency Departments
- Women's and Children
- Hemodialysis or Peritoneal Dialysis
- Oncology
- Mental Health
- Transitional Units

Authorized to Whom

Infection Prevention and Control (IPAC) Professionals/Associates, Lakeridge Health nurses with the knowledge, skill and judgement to implement this medical directive.

Co-implementers: Nurse and Medical Lab Technologists

Patient Description/Population

Any Lakeridge Health patient/client/resident who meets criteria listed in the indications section of this medical directive.

Order and/or Procedure

One or combinations of the order/procedures below may be performed. The Antibiotic Resistant Organism (ARO) swab result must be reviewed by the MRP and treatment identified if required.

The IPAC Professional/Associate or nurse will identify patients who meet the inclusion criteria to order the ARO swab using the [Order Table Form](#) and complete the specimen collection following the procedure below. See *ARO Swab Instructions Sheet* on OASIS for a step-by-step guide for ARO sample collection.

- Select the appropriate specimen order using the [Order Table Form](#).
- Ensure there are no contraindication to a nasal and rectal swab testing (see Contraindications). Defer testing if contraindications exist.
- The nurse will obtain the nasal and/or rectal swabs as per the *ARO Swab Instruction Sheet* where indicated in the [Orders Table Form](#). The patient is not permitted to collect their own swabs.
- The lab will process the specimen.
- Results will be communicated to patient by the MRP.

Indications to the Implementation of the Directive

Any patient with procedure specific indication as listed in the [Order Table Form](#).

Contraindications to the Implementation of the Directive

The medical directive must not be implemented in the following circumstances:

- Patient or substitute decision maker (SDM) refuses to consent
- Procedure specific contraindication as listed in the [Order Table](#)

Consent

- Prior to specimen collection the nurse must obtain consent as per the *Consent to Treatment – Policy and Procedures* from the patient or SDM to collect ARO specimen(s). This will include providing the patient and/or SDM with information regarding indications for testing and ensuring the procedure, risks, benefits, side effects and precautions are understood
- In any situation where the patient is not capable of providing consent, consent to be obtained from SDM.
- For patients or SDMs who do not consent to collection of ARO specimen(s), document the consent refusal in the electronic health record (EHR) and consult with the IPAC Professional/Associate.

Documentation Requirements

The Infection Control Professional/Associate or nurse implementing this directive must ensure the following is documented in the specific order within the patient's EHR:

- The order will be signed using the order mode of "per medical directive"
- The name of the Infection Control Professional/Associate or Lakeridge health nurse as the Ordering Provider
- The name of the MRP will be the Authorizing Provider

- The full name of the medical directive will be outlined in the comments section (i.e. Specimen Collection for Antibiotic Resistant Organisms (AROs) – Medical Directive).

Review/Evaluation Process

This directive will be reviewed by Infection Prevention and Control (IPAC) every 2 years.

References

Provincial Infection Diseases Advisory Committee. (2012). Routine Practices and Additional Precautions in All Health Care Settings, 3rd edition. Public Health Ontario. https://www.publichealthontario.ca/-/media/Documents/B/2012/bp-rpap-healthcare-settings.pdf?rev=97a9a0d61f7848e3bc721a119a0f8f63&sc_lang=en&hash=4787BA86E5938928772DB8A8D3E0D2E7

Provincial Infection Diseases Advisory Committee. (2013). Annex A: Screening, Testing and Surveillance for Antibiotic-Resistant Organisms (AROs) in All Health Care Settings. Public Health Ontario. <https://www.publichealthontario.ca/-/media/documents/A/2013/aros-screening-testing-surveillance.pdf?la=en>

This table must **not** be used independently apart from the Medical Directive

Order Table Form

Order	Indication	Contraindication	Notes (Optional)
<p>Swabs for Antibiotic Resistant Organisms (ARO):</p> <ol style="list-style-type: none"> 1. Nasal swab x 1 (both nares with same swab) for MRSA 2. MRSA/VRE Rectal swab x1 	<p>Patients</p> <ul style="list-style-type: none"> • Admitted or transferred to Critical Care, Medicine, Neonatal Intensive Care, and Healthy Aging (including internal transfers to these units and transfers from the Emergency and Surgery Departments to these units) • diagnosed with Methicillin-resistant Staphylococcus aureus (MRSA), Vancomycin Resistant Enterococci (VRE) • with contact with someone confirmed or possible exposure to MRSA, VRE • With previous exposure to health care unit / facility with ARO related outbreak • With a clinical specimen identifying an ARO. • identified as part of a point prevalence testing 	<p>For Nasal swabs: Recent facial/nasal surgery or trauma, anatomical abnormalities, nasal packing or acute epistaxis, preventing safe specimen collection.</p> <p>For Rectal swabs: Any history of rectal surgery or active rectal bleeding (e.g. from bleeding hemorrhoids).</p>	<p>Document patients who do not give consent and consult IPAC Professional/Associate</p> <p>For ileostomy or colostomy, swab the ostomy site and for rectal tube placement, swab contents from rectal tube to ensure fecal matter on the swab</p> <p>Provide the patient and/or substitute decision maker (SDM) with information regarding indications for testing, ensure the procedure, risks, benefits, side effect and precautions are understood</p>

Order	Indication	Contraindication	Notes (Optional)
<p>Swabs for Antibiotic Resistant Organisms (ARO):</p> <ol style="list-style-type: none"> 1. Nasal swab x 1 (both nares with same swab) for MRSA 2. MRSA/VRE/CPO Rectal swab x1 	<p>Patients:</p> <ul style="list-style-type: none"> • Transferred directly from another health care facility intensive care unit into Critical care or Neonatal intensive care unit • have been diagnosed with Carbapenamase-producing organism (CPO) • contact with someone confirmed or possible exposure to CPO • patient is from a high-risk population: admission to ICU, travel to high-risk areas or resides in an area with high rates of community transmission as identified by Infection Prevention and Control • indicates “Yes” or “Unknown” on IPAC Screening who were: <ul style="list-style-type: none"> ○ admitted to a hospital or long term care facility in the last 12 months. ○ with a healthcare system outside of Canada in the last 12 months (e.g. Dialysis, cumulative 12+ hours of any kind of care) ○ that they have MRSA, VRE or CPO or have been in contact with someone confirmed MRSA, VRE or CPO 		

Order	Indication	Contraindication	Notes (Optional)
<p>Swabs for Antibiotic Resistant Organisms (ARO):</p> <ol style="list-style-type: none"> 1. MRSA swabs x 2 from each wound 2. MRSA/CPO from Central line insertion: 1 x swab from each indwelling device (if present) 	<p>Patients</p> <ul style="list-style-type: none"> • identified as having MRSA or CPO who have wounds, lesions, incisions, or ulcer • identified as having MRSA or CPO who have an indwelling device, e.g. central line, dialysis line etc. 		<p>Document patients who do not give consent and consult IPAC Professional/Associate</p>