STAPHYLOCOCCUS AUREUS (MRSA, TSS, VISA, VRSA)

NOTIFICATION VARIES EPIDEMIOLOGY PROGRAM

Event Name:	SAUR
Event Time Period:	60 Days

MRSA (Methicillin/Oxacillin-resistant Staphylococcus aureus): NON-IMMEDIATE NOTIFICATION

Effective 3/22/2016, ISIS no longer needs to enter paper labs into MAVEN regardless of source for MRSA events. Please Shred!

Clinical Description:	N/A	
CDC Event Classification:	N/A	
Massachusetts Event Classification:	Confirmed	Positive laboratory confirmation (culture) from a normally sterile site

Staphylococcal Toxic Shock Syndrome: NON-IMMEDIATE NOTIFICATION

aphylococcai Toxic	SHOCK SYNCTOME. NON-IMMEDIATE NOTIFICATION			
Clinical	An illness with the following clinical manifestations:			
Description	• Fever: temperature greater than or equal to 102.0°F (greater than or equal to 38.9°C)			
(CDC 2007):	Rash: diffuse macular erythroderma			
	• Desquamation: 1-2 weeks after onset of illness, particularly on the palms and soles			
	• Hypotension: systolic blood pressure less than or equal to 90 mm Hg for adults or less than fifth			
	percentile by age for children aged less than 16 years; orthostatic drop in diastolic blood pressure			
	greater than or equal to 15 mm Hg from lying to sitting, orthostatic syncope, or orthostatic dizziness			
	• Multisystem involvement (three or more of the following):			
	o Gastrointestinal: vomiting or diarrhea at onset of illness			
	o Muscular: severe myalgia or creatine phosphokinase level at least twice the upper limit of			
	normal			
	o Mucous membrane: vaginal, oropharyngeal, or conjunctival hyperemia			
	o Renal: blood urea nitrogen or creatinine at least twice the upper limit of normal for laboratory			
	or urinary sediment with pyuria (greater than or equal to 5 leukocytes per high-power field) in			
	the absence of urinary tract infection			
	o Hepatic: total bilirubin, alanine aminotransferase enzyme, or asparate aminotransferase			
	enzyme levels at least twice the upper limit of normal for laboratory			
	o <i>Hematologic</i> : platelets less than 100,000/mm ³			
	o Central nervous system: disorientation or alterations in consciousness without focal neurologic			
	signs when fever and hypotension are absent			

Staphylococcus aureus (continued)

Staphylococcal Toxic Shock Syndrome: NON-IMMEDIATE NOTIFICATION (continued)

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CDC Event	Confirmed	A case in which all five of the clinical findings described above are present, including desquamation, unless the			
Classification		patient dies before desquamation occurs AND			
(2007):		Negative results on the following tests, if obtained:			
		Blood, throat, or cerebrospinal fluid cultures (blood culture may be positive for <i>Staphylococcus aureus</i>)			
		Rise in titer to Rocky Mountain spotted fever, leptospirosis, or measles			
	Probable A case in which four of the five clinical findings described above are present AND				
		Negative results on the following tests, if obtained:			
		• Blood, throat, or cerebrospinal fluid cultures (blood culture may be positive for <i>Staphylococcus aureus</i>)			
		Rise in titer to Rocky Mountain spotted fever, leptospirosis, or measles			
Massachusetts	Follows CD	C event classification			
Event					
Classification					
(2016)					

Vancomycin-intermediate Staphylococcus aureus(VISA): IMMEDIATE NOTIFICATION

Clinical Description	Staphylococcus aureus can produce a variety of syndromes with clinical manifestations including skin and soft tissue lesions,			
(2007):	empyema, pyarthrosis, bloodstream infection, pneumonia, osteomyelitis, septic arthritis, endocarditis, sepsis, and meningitis.			
CDC Event	A clinically compatible case of vancomycin-intermediate <i>Staphylococcus aureus</i> that is laboratory-confirmed MIC: 4-8 µg/ml			
Classification (2007):				
Massachusetts Event	Confirmed	A clinically compatible case of vancomycin-intermediate <i>Staphylococcus aureus</i> that is CDC laboratory-		
Classification:		confirmed MIC: 4-8 µg/ml		
	Suspect	A clinically compatible case of vancomycin-intermediate <i>Staphylococcus aureus</i> that is laboratory-confirmed		
		MIC: 4-8 μg/ml, but not confirmed by the CDC		

Vancomycin-resistant Staphylococcus aureus (VRSA): IMMEDIATE NOTIFICATION

Clinical Description (CDC	Staphylococcus aureus can produce a variety of syndromes with clinical manifestations including skin and soft tissue			
2007):	lesions, empyema, pyarthrosis, bloodstream infection, pneumonia, osteomyelitis, septic arthritis, endocarditis, sepsis, and			
	meningitis.			
CDC Event Classification	A clinically compatible case of vancomycin-intermediate <i>Staphylococcus aureus</i> that is laboratory-confirmed MIC: ≥ 16			
(2007):	μ g/ml			
Massachusetts Event	Confirmed	A clinically compatible case of vancomycin-resistant Staphylococcus aureus that has been confirmed by		
Classification:		CDC laboratories as having MIC: ≥ 16 µg/ml		
	Suspect	A clinically compatible case of vancomycin- resistant <i>S. aureus</i> that is laboratory-confirmed MIC: ≥ 16		
		μg/ml, but was not confirmed by the CDC		

Staphylococcus aureus (continued)

Report Type	Test Type	Source	Result	New event or beyond report period?	Data Entry
Laboratory report OR Boston Reporting Card	Culture and appropriate	Clinical specimen	Vancomycin intermediate or resistant	Yes	New event SUSPECT
	sensitivity testing			No	Same event
Select:	Microorganism: PrId: Pt: xxx: Nom: Culture				
Laboratory report OR Boston Reporting Card	Culture and appropriate	Sterile site	Methicillin/Oxacillin - resistant Staphylococcus aureus	Yes	New event CONFIRMED
	sensitivity testing			No	Same event
Select:	Microorganism: PrId: Pt: xxx: Nom: Culture				
Laboratory report OR Boston Reporting Card	PCR	Sterile site	Methicillin/Oxacillin - resistant Staphylococcus aureus	Yes	New event CONFIRMED
				No	Same event
Select:	: MRSA DNA XXX QI PCR				

NOTE: ISIS will accept ALL sources with VISA or VRSA results.