



November 1, 2007

Dear Parents or Guardians:

As follow-up to the recent Keep in Touch communication from Fairfax County Public Schools (FCPS) regarding methicillin-resistant *Staphylococcus aureus* (MRSA) in our schools, this letter will address additional concerns that have come to our attention.

Staphylococcus aureus bacteria, commonly called "staph," are one of the most common causes of skin infections in the United States. Approximately 25 to 30 percent of the population carries the bacteria in their noses or on their skin. MRSA is a type of staph that is resistant to some specific antibiotics. In Virginia and elsewhere throughout the country, MRSA infections are becoming more common in community settings, including schools. The literature suggests that one percent of the population carries MRSA, so it is likely that a number of individuals in the FCPS population carry it.

Most people who carry staph or MRSA do not have infection or illness until the bacteria enter the body through a cut, a scrape, or a break in the skin. Until they acquire an infection, these carriers do not exhibit any symptoms. MRSA is typically spread by direct skin-to-skin contact or through sharing personal items (e.g., towels, razors). Individuals carrying MRSA can also infect themselves through breaks in their skin. When MRSA does cause an infection, it usually manifests as a minor skin infection such as a boil or a pimple. The majority of community-associated MRSA cases are treated with antibiotics with little disruption in daily activities. More serious infections are much less common. It is often difficult to confirm the source of exposure in community-associated MRSA because the time between exposure and the onset of infection is variable.

FCPS has had a number of parent-reported cases of MRSA in the general student population, as well as a very small number of confirmed cases in individuals on athletic teams. Typically, information about health conditions is released by a school once a diagnosis is confirmed and the Fairfax County Health Department determines that the general school population can benefit from prevention measures to limit the potential for further spread. Given the high prevalence of staph bacteria in the community and the delay associated with receiving medical confirmation of MRSA from physicians, we have adopted a strategy of prevention instead of focusing on isolated case notification. An individual identified as having a possible skin infection is immediately referred to a personal physician for appropriate care and follow-up, including guidance on when and how to safely interact with the public.

If a cluster of laboratory-confirmed, community-associated MRSA infections were to occur in the school population, the principal—in consultation with FCPS support staff members and the health department—will determine whether some or all parents and staff members should be notified. This decision will be based on medical judgment. Athletic programs have a defined process for addressing MRSA on their teams, which includes cleaning equipment surfaces, monitoring players, covering all wounds and skin lesions, and excluding identified players with MRSA infection. The following steps will be taken for the general school population:

- The school health nurse will confirm the diagnosis with the medical provider.
- Routine infection control precautions will be reviewed with the school staff to prevent the spread of bacteria like MRSA.
- Routine cleaning will continue. The schools are cleaned every day with an EPA-registered broad spectrum microorganism-killing solution that is effective against *staphylococcus aureus*, including MRSA. The protocols for the cleaning of facilities are monitored and evaluated regularly.

- In general, it is not necessary to close schools to disinfect when MRSA infections occur. Carriers of MRSA can quickly bring the bacteria back to the areas that have been thoroughly cleaned.
- Students and staff members with MRSA infections may attend school regularly as long as their wounds are covered and they are receiving proper treatment.

On October 24, 2007, Virginia enacted an emergency regulation requiring laboratories to report the most severe MRSA infections to health departments from specimens collected from normally sterile sites of the body, such as blood or joint fluid. Skin infections are not considered sterile sites and are not reportable under this regulation. At this time, the regulation does not require parents, physicians, schools, or others to report cases of MRSA. We will continue our existing practices and monitor any changes from the Virginia Department of Health in recommendations regarding MRSA.


Remember that practicing good personal hygiene—including washing hands frequently, covering open or infected skin, and avoiding the sharing of personal items—is the *primary way to protect oneself and to prevent the spread of bacteria like MRSA*. We hope you will use this heightened interest in MRSA to take this opportunity to review proper handwashing procedures with your children. For further information regarding MRSA in schools, you may visit the following web sites:

<http://www.cdc.gov/Features/MRSAinSchools/>
<http://www.fcps.edu/news/mrsa.htm>
<http://www.fairfaxcounty.gov/hd/comdis/staph.htm>

We understand the media attention about MRSA has caused much anxiety among parents, students, and staff members. We want to assure you that we constantly monitor the safety of students and the school environment. We hope you will find the information in this letter and on the web sites helpful.

Thank you for your efforts in minimizing the spread of germs by monitoring your child's hygiene and reporting any health concerns visible on your child immediately to a professional health care provider.

Sincerely,



Jack D. Dale
Superintendent of Schools



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