

## **Emergency Management and Response Information Sharing and Analysis Center (EMR-ISAC)**

**INFOGRAM 45-08**

**November 20, 2008**

***NOTE:** This INFOGRAM will be distributed weekly to provide members of the Emergency Services Sector with information concerning the protection of their critical infrastructures. For further information, contact the Emergency Management and Response- Information Sharing and Analysis Center (EMR-ISAC) at (301) 447-1325 or by e-mail at [emr-isac@dhs.gov](mailto:emr-isac@dhs.gov).*

### **MRSA Outbreaks in Wildland Communities**

Community-Acquired Methicillin-Resistant Staphylococcus Aureus (CA-MRSA) continues to infect members of the Emergency Services Sector (ESS), including an outbreak among wildland firefighters this fall that began with a single exposure. The Emergency Management and Response—Information Sharing and Analysis Center (EMR-ISAC) learned that the wildland fire environment “provides the perfect host for a staph infection to thrive due to limited personal hygiene practices, close living conditions, weakened immune systems, and potential contaminants,” according to Wildfire Magazine.

Wildland firefighters have an increased risk of contracting staph infections that can lead to MRSA because they often have skin openings created by cuts, scrapes, insect bites, and poison oak or other lesions that allow staph bacteria to penetrate the skin. During this fall’s MRSA outbreak, crew members became infected from simply handling the equipment of the originally affected responder.

To help responders in wildland communities and other environments work proactively against this threat, the EMR-ISAC provides the following guidance abridged from Wildfire Magazine:

- Have team leaders discuss preventative measures at all safety briefings.
- Change firefighting turnouts/Personal Protective Equipment (PPE)/wildland “Nomex®” clothing as often as possible.
- Remove Nomex® shirts (at a minimum) before entering dining facilities. This is especially important for poison-oak exposure because the urushiol (oil from the plant) sticks to the material and can be easily transferred to another person's skin.
- Leave dirty Nomex® and boots outside sleeping areas to avoid transferring contaminants. Take showers when units are available.
- Acquire “Bath-In-A-Bag” (disposable bathing system) components if there is no shower unit.
- Clean hands and skin often with sanitizers or hot water and soap.

- Trade dirty Nomex® for clean Nomex® through the supply unit.
- Pack a small supply kit that has alcohol-based hand sanitizer.
- Do not touch other responders' open wounds or bandages without proper protection (latex gloves or equivalent).
- Do not share personal items such as towels, combs, and razors.
- Monitor closely any open wounds (cut, scrape, insect bites, and poison oak) and treat them as a perfect MRSA or staph bacteria entry site. If any redness, swelling, pus, or joint pain is present, seek immediate medical attention.
- Keep all open wounds clean and covered with a sterile bandage.
- Take immediate measures to ensure that all clothing, equipment, and personal items are disinfected if there is suspected or confirmed MRSA exposure.

To view and download the article, "Germ Probes," visit [http://wildfiremag.com/preplan/germ\\_probes\\_1008](http://wildfiremag.com/preplan/germ_probes_1008).