

Universal decolonization with hypochlorous solution in a burn intensive care unit in a tertiary care community hospital.

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Abstract

Infections are the leading cause of morbidity and mortality in burn patients. Patients colonized with methicillin-resistant *Staphylococcus aureus* (MRSA) are at higher risk of developing an invasive infection, and MRSA is endemic in many burn units. The typical decolonization regimen of mupirocin and chlorhexidine bathing is not optimal in burn patients because of chlorhexidine limitations on nonintact skin. We studied the impact of universal decolonization using mupirocin and hypochlorous acid bathing on health care-associated MRSA infections in a burn intensive care unit. We show a significant decrease in total MRSA infections.

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Universal decolonization; hypochlorous acid; methicillin-resistant *S aureus* decolonization; methicillin-resistant *Staphylococcus aureus* infection

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