Recent data suggest that MRSA in the community is increasing. CDC encourages you to consider MRSA in the differential diagnosis for patients presenting with signs and symptoms of skin infections (red, swollen, painful, may be referred to as a spider bite by patient) especially those that are purulent (fluctuant or palpable fluid-filled cavity, yellow or white center, central point or “head,” draining pus, or possible to aspirate pus with needle or syringe).

Incision and drainage constitutes the primary therapy for purulent skin infections, including those caused by MRSA. Based on clinical assessment, empiric antimicrobial coverage for MRSA may be warranted in addition to incision and drainage. Obtaining specimens for culture and susceptibility testing are useful to guide therapy, particularly for those who fail to respond adequately to initial management.

MRSA skin infections can develop into more serious infections. It is important to discuss a follow-up plan with your patients in case they develop systemic symptoms or worsening local symptoms, or if symptoms do not improve within 48 hours.

For more information, please call 1-800-CDC-INFO or visit www.cdc.gov/MRSA.