Q. What is cellulitis?
A. Cellulitis is an infection of the skin that can cause redness, pain, and swelling. It can happen when germs get into the skin. Normally, different types of germs live on your skin. Most of the time, these germs do not cause any problems. But if you get a cut or a break in the skin, the germs can get into your skin and cause an infection.

Certain conditions can increase your chance of getting cellulitis. These include:
- Having a cut (even a tiny one)
- Having another type of skin infection or a long-term skin condition (such as psoriasis)
- Having swelling of the skin or swelling in the body (especially swelling in the legs)
- Being overweight
- Diabetes, especially poorly controlled diabetes

Q. What causes cellulitis?
A. Several bacteria (germs) are known to cause skin infection but the most common are called “strep” and “staph”. In the United States, many “staph” germs are no longer killed by common antibiotics, they are said to be “resistant”. A common germ in the prison setting that has become resistant to many antibiotics is called “Methicillin-resistant staph aureus” also known as MRSA. See next page.

Q. What are the symptoms of cellulitis?
A. An area of cellulitis is usually:
- Painful
- Red
- Swollen
- Warm

Most of the time, cellulitis happens on the legs or arms. It can also be on the belly, in the mouth, on the buttocks, or around eyes or anus.

Q. Is there a test for cellulitis?
A. Most people do not need any tests. Your doctor or nurse will do an exam and look at your skin. Cellulitis is one type of skin infection, but there are others. The right treatment depends on the type of infection you have and the germs causing it. In some cases, your healthcare provider or nurse might need to do a test (culture) to figure out the exact germ which is causing your infection and find out which antibiotics can treat it. If you have cellulitis, it’s important to get treated as soon as possible, because the infection can spread to the whole body and become serious if it is not treated.

Q. How is cellulitis treated?
A. If you think you have cellulitis, contact Medical right away. Cellulitis is usually treated with antibiotic pills (which are germ-killing medicines) and/or draining any pus pockets. If your medical provider prescribes medicine for you to take, it is important to follow the directions exactly. Take all of the pills/tablets you are given, even if you feel better before you finish them. If you do not take all the pills, the infection can come back and be harder to treat. People who have severe cellulitis might be treated in the hospital with antibiotics that go into the vein (called “IV”).

Q. Can cellulitis be prevented?
A. Yes, in some cases. If you cut your skin, wash the area well with soap and water and regularly clean all skin wounds with soap and water. This can help prevent the area from getting infected. If you have a long-term skin condition, ask your medical provider or nurse what you can do to help prevent cellulitis.
Q. What is methicillin-resistant Staphylococcus aureus (MRSA)?
A. Methicillin-resistant Staphylococcus aureus is a type of germ (bacteria) that causes many types of infections including skin infections (cellulitis), joint infections, lung infections, and many more. It is sometimes called MRSA or "Mursa".
  - People normally carry all sorts of germs inside their body and on their skin. The body usually controls these germs, so they do no harm. About 1 in 3 people have a germ on their skin called “staph.” In these people, staph usually causes no problems. But if they get a cut or a scrape, the germ can cause an infection. Some of those with staph on their skin have MRSA. Most people with MRSA don’t get sick. Serious infections with staph tend to happen in older adults, and people who cannot fight infection well, such as people with diabetes or kidney trouble.
  - MRSA is a type of staph germ that has learned to outsmart the antibiotic drugs normally used to kill staph. They have become “resistant” to the antibiotic medications we usually use to treat infections. There are some antibiotics that can kill MRSA, but doctors need to use them carefully so the staph does not learn to outsmart all our antibiotics.

Q. How do you catch MRSA?
A. Many people carry MRSA on their skin without knowing it. If the germ is on your skin and you cut yourself or have another injury, you can get infected. You can become a MRSA carrier by:
  - Touching a person who has MRSA on his or her skin
  - Touching a table, handle or other surface that has the germ on it

Q. How do I know if I have a MRSA infection?
A. If you get a MRSA infection, you may have a red tender lump and it might ooze pus. You may have a group of bumps that look like pimples or insect bites. Many people think they have “spider bites” when they develop a MRSA infection. If the infection gets into the blood, it can give you a fever or make you feel tired.

Q. Can MRSA be treated?
A. Your doctor can give you antibiotics — germ-killing medicines — to treat your infection. It is very important that you follow the directions on how to take the antibiotics. Take ALL the pills you are given, even if you feel better before you finish the pills. If you do not take them all, the germ could come back even stronger and become resistant to the antibiotics we usually use to treat infections. If you are not definitely improving within 1-2 days, or if you are getting worse while taking antibiotics, you need to contact medical right away.

Q. Is there any way to prevent MRSA? —
A. Yes.
  - Regularly wash your hands with soap and water for at least 15 seconds, especially before and after using the toilet, before eating and after touching any wounds you may have.
  - Don’t scratch skin rashes
  - Shower and keep clothes clean. Use institution laundry as the water temperature is hot enough to kill MRSA. Change your clothing if they become soiled with wound drainage.
  - Change bed linens and towels regularly and whenever they become soiled with wound drainage.
  - Do not share personal items such as razors, towels, wash cloths, soap, etc. (tattoo or injection drug equipment)
  - If you have an open wound, it should be covered at all times with a bandage.
  - Never touch another person’s wound, infected skin, or dirty bandage.
  - If your bandage comes off, dispose of it in trash container as instructed by health services staff. Wash your hands. Rebandage your wound or contact medical as instructed.