# Nevada State Candida auris Toolkit v2

### What is Candida auris and why is it important?

The emerging fungus *Candida auris* (C. auris) presents a serious global health threat. *C. auris* is a public health concern due to its potential for multi-drug resistance and ability to spread in healthcare settings. Hospitalized patients with *C. auris* infections were associated with 30-60% mortality rates. Click <u>here</u> to see the latest national information from the Centers for Disease Control and Prevention (CDC). Healthcare facilities should implement early identification, communication, and implementation of infection control measures to maintain their patients' safety.

People can be colonized with *C. auris* and may not have any symptoms. People infected or colonized with *C. auris* often have risk factors such as mechanical ventilation, tracheostomy, or invasive medical devices. While most *C. auris* cases in the United States have been identified in adult populations, *C. auris* may be found in pediatric populations as well, especially in facilities that also care for adults with *C. auris* infection or colonization. *C. auris* outbreaks have been documented in healthcare facilities and can spread through contact with infected patients and contaminated surfaces or equipment. Source: CDC

#### Candida auris identification and Infection Control Recommendations

The effective method to prevent the spread of *C. auris* in healthcare setting is strict adherence to infection control activities. Appropriate environmental cleaning and disinfection is important to minimize transmission and exposure risk. Some disinfectants commonly used in healthcare settings are not effective against *C. auris*. Click <u>here</u> to see the EPA's registered antimicrobial products effective against *C. auris* (List P). Click <u>here</u> for CDC guidance on infection control activities for *C. auris*.

#### Reporting

**Report** cases of *C. auris* infection and colonization to the HAI Program by sending a secure email to <u>outbreak@health.nv.gov</u>. If secure email is not available, please fax 702-486-0490. HAI Program staff can assist with screening supplies and an onsite assessment to help identify new cases of *C. auris* and identify gaps in infection prevention and control practices.

### **Laboratory Detection and Procedure for collection**

<u>Identification of Candida auris</u>

Procedure for collection of patient swabs for Candida auris

Candida auris - Information for Laboratory Staff

<u>Safety Considerations When Working with Known or Suspected Isolates of Candida auris</u>

Nevada State Public Health Lab Supply Order Form

# Centers for Disease Control and Prevention (CDC) Resources

What is Candida auris?

Candida auris Colonization; Information for Patients

Candida auris - CDC Infection Prevention and Control Recommendations

**CDC Information for Health Professionals** 

CDC Information for Patients and Family Members

General Infection Control Recommendations			
Laboratory Identification	<ul> <li>Know the <u>yeast identification method</u> used by your laboratory and its limitations for <i>C. auris</i> identification.         <u>Information for Laboratory Staff   Fact Sheets   Candida auris   Fungal Diseases   CDC</u> </li> <li>Begin surveillance. Establish a protocol with your laboratory so that your department is promptly informed when <i>C. auris</i> is suspected.</li> <li>Know the <u>local epidemiology and prevalence</u> in your region.</li> <li>Understand patient risk factors and high-risk settings, such as indwelling medical devices in patients residing in high acuity long-term care facilities.</li> </ul>	<ul> <li>For further assistance contact outbreak@health.nv.gov</li> </ul>	
Screening for Candida auris Colonization	Screening for <i>C. auris</i> is most useful when it's done in a timely manner and when informed by local epidemiology. some key considerations for screening include patients who are at high risk for <i>C. auris</i> , such as:  • Close healthcare contacts of patients with newly identified <i>C. auris</i> infection or colonization. This includes anyone on the same room, ward or unit with shared healthcare staff or equipment.  • Patients with risk factors such as chronic indwelling medical devices (e.g., mechanical ventilation, tracheostomies, catheters, central lines, feeding tubes) and patients with stays at long-term acute hospitals or ventilator-capable skilled nursing facilities.  • Patients who have had an overnight stay in a healthcare facility outside the United States or in an area of the United States with high <i>C. auris</i> burden For further information:  Screening for Candida auris Colonization   Candida auris   Fungal Diseases   CDC	For further assistance contact outbreak@health.nv.gov	
Infection Control Measures	<ul> <li>Healthcare providers should use <u>Contact Precautions</u> to manage patients with <i>C. auris</i> in acute care hospitals and long-term acute care hospitals. Manage residents with <i>C. auris</i> in nursing homes, including skilled nursing facilities, using either <u>Contact Precautions</u> or <u>Enhanced Barrier Precautions</u>, depending on the situation and local or state jurisdiction recommendations. Refer to the <u>CDC Guidance on Enhanced Barrier Precautions</u> for more details about when Contact Precautions versus Enhanced Barrier Precautions would apply.</li> <li>Whenever possible, place patients or residents on contact precautions in a single room. If a single room is not available, please follow CDC recommendations in the following link for patient/resident placement.</li></ul>	<ul> <li>Conduct a site visit when necessary and assess implementation of infection control strategies.</li> <li>For further assistance contact outbreak@health.nv.gov</li> </ul>	

Interfacility	should follow standard hand hygiene practices. Alcohol-based hand sanitizer (ABHS) is the preferred hand hygiene method for <i>C. auris</i> when hands are not visibly soiled. If hands are visibly soiled, wash with soap and water.  • Cleaning and disinfecting the patient care environment (daily and terminal cleaning) and reusable equipment with recommended products, including focus on shared mobile equipment (e.g., glucometers, blood pressure cuffs).  • Use an Environmental Protection Agency (EPA) registered hospital-grade disinfectant effective against <i>C. auris</i> (Preferable to use EPA's List P or if nt available EPA's List K). Regardless of the product selected, it is important to follow all manufacturer's directions for use, including applying the product for the correct contact time.  • Ensure and audit thorough daily and terminal environment cleaning of patient care environment and reusable equipment  • Educate all healthcare personnel, including healthcare personnel who work with environmental cleaning services, about <i>C. auris</i> and the need for appropriate precautions. Follow-up education may be needed to reinforce concepts and to account for healthcare personnel turnover and guidance updates.  • Ensure adequate supplies are available to implement infection control measures.	
Interfacility Communication	<ul> <li>When transferring a patient or resident with <i>C. auris</i> colonization or infection to another facility, make sure to notify the receiving facility of patient's <i>C. auris</i> infection or colonization status, including recommended infection control precautions.</li> <li>Use the HAI Program facility transfer form during all patient or resident transfers which is available via Nevada state link. Nevada State Inter-facility Transfer Form</li> </ul>	
Transport of Patient with suspected or confirmed <i>C. auris</i>	<ul> <li>Facilities should follow Standard and <u>Transmission-Based Precautions</u> for the transport of patient/Resident with suspected or confirmed <i>C. auris</i>.</li> <li>Personal Protective Equipment (PPE):         <ul> <li>Contact Precautions:</li> </ul> </li> <li>A gown and gloves should be worn during all interactions involving contact with the patient or the patient's environment. Perform hand hygiene and Don PPE upon entry to the patient's room.</li> <li>Remove and dispose of contaminated PPE and perform hand hygiene prior to transporting patients on Contact Precautions.</li> <li>During transport, perform hand hygiene Don PPE when performing patient care procedures; or when handling or touching contaminated items or surfaces.</li> <li>Don PPE to handle the patient at the transport destination.</li> <li>Perform hand hygiene before donning and after doffing PPE.</li> </ul>	

<ul> <li>Other Infection Control measures during Patient Transport:         When transport or movement of patient is necessary, ensure that infected or colonized areas of the patient's body are contained and covered.</li> <li>Environmental Measures: Ensure that cleaning and disinfection procedures are utilized after each Patient/Residents transport for the vehicle. Use an Environmental Protection Agency (EPA)—registered hospital-grade disinfectant effective against <i>C. auris</i> (EPA's <u>List</u> P or EPA's <u>List</u> K).</li> </ul>	
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# **Education and Training:**

• CDC/Nevada C. auris Webinar: <u>C. Auris Training - CDC</u> (recording)

## **Additional Resources:**

- <u>Interim Guidance for a Public Health Response to Contain Novel or Targeted Multidrug-resistant Organisms (MDROs)</u>
- 2007 Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings
- APIC Guide Infection Prevention EMS.pdf
- Infection Prevention and Control for Candida auris | Candida auris | Fungal Diseases | CDC
- Implementation of Personal Protective Equipment (PPE) Use in Nursing Homes to Prevent Spread of Multidrug-resistant Organisms (MDROs)