Nevada State Candida Auris Toolkit

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 here to see the latest national information from the Centers for Disease Control and Prevention (CDC). Proactively healthcare facilities should implement early identification, communication, and implementation of infection control measures to maintain their staff and patients' safety.

People can be C. auris carrier and may not have any symptoms, they might be admitted to a healthcare facility with another medical condition and often have risk factors such as mechanical ventilation, tracheostomy, invasive medical devices. 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 eliminate transmission and exposure risk. Some disinfectants commonly used in healthcare settings are not effective against C. auris. Click here to see the EPA's registered antimicrobial products effective against C. auris. Click here 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 outbreak@health.nv.gov. 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

Identification of Candida auris

Procedure for collection of patient swabs for Candida auris

Candida auris - Information for Laboratory Staff

Safety Considerations When Working with Known or Suspected Isolates of Candida auris
Centers for Disease Control (CDC) Resources

What is *Candida auris*?

*Candida auris* Colonization Explained

*Candida auris* Testing Explained (Patient Perspective)

*Candida auris - CDC Infection Prevention and Control Recommendations*

*Candida auris - Information for Infection Preventionists*

Interim Guidance for a Public Health Response to Contain Novel or Targeted Multidrug-resistant Organisms (MDROs)

Enhanced Barrier FAQs

Hand Hygiene FAQ

CDC Information for Laboratorians and Health Professionals: [https://www.cdc.gov/fungal/candida-auris/health-professionals.html](https://www.cdc.gov/fungal/candida-auris/health-professionals.html)

CDC Information for Patients and Family Members: [https://www.cdc.gov/fungal/candida-auris/patients-qa.html](https://www.cdc.gov/fungal/candida-auris/patients-qa.html)

Additional Resources

Environmental Protection Agency (EPA) Environmental Cleaning List P

Association for Professionals in Infection Control and Epidemiology (APIC)

Break the Chain of Infection

Infection Prevention and You - Long-Term Care

Infection Prevention and You - Keep the Patient’s Room Clean
# General Infection Control Strategies

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<th>Laboratory Identification</th>
<th>HEALTHCARE PROVIDERS</th>
<th>PUBLIC HEALTH PARTNERS</th>
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<tr>
<td>• Know the yeast identification method used by your laboratory and its limitations for <em>C. auris</em> identification. <a href="https://www.cdc.gov/fungal/candida-auris/recommendations">Candida auris: A drug-resistant fungus that spreads in healthcare facilities - A CDC message to laboratory staff</a></td>
<td></td>
<td>• For further assistance contact <a href="mailto:outbreak@health.nv.gov">outbreak@health.nv.gov</a></td>
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<th>Surveillance</th>
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| • Begin surveillance. Establish a protocol with your laboratory so that your department is promptly informed when *C. auris* is suspected.  
  o If your laboratory is not equipped to identify *C. auris*, begin surveillance for the organisms that commonly represent a *C. auris* misidentification.  
  See [https://www.cdc.gov/fungal/candida-auris/recommendations](https://www.cdc.gov/fungal/candida-auris/recommendations) for common misidentifications by different yeast identification methods.  
  [https://www.cdc.gov/fungal/candida-auris/c-auris-screening.html](https://www.cdc.gov/fungal/candida-auris/c-auris-screening.html) | | • Know the local epidemiology and prevalence in your region.  
• Understand patient risk factors and high-risk settings, such as indwelling medical devices in patients residing in high acuity long-term care facilities |

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<tr>
<th>Screening for Candida auris Colonization</th>
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| Consider screening patients who are at high risk for *C. auris*,  
• Close healthcare contacts of patients with newly identified *C. auris* infection or colonization.  
• Patients who have had an overnight stay in a healthcare facility outside the United States in the previous one year, especially if in a country with documented *C. auris* cases. Strongly consider screening when patients have had such inpatient healthcare exposures outside the United States and have infection or colonization with carbapenemase-producing Gram-negative bacteria. *C. auris* co-colonization with these organisms has been observed regularly.  
For further information: [Screening for Candida auris Colonization](https://www.cdc.gov/fungal/candida-auris/c-auris-screening.html) | | • For further assistance contact outbreak@health.nv.gov |

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<th>Infection Control Measures</th>
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| • Place patients with *C. auris* in a single room and implement Standard and Contact Precautions.  
• Reinforce standard hand hygiene practices for all healthcare personnel.  
• Daily and terminal cleaning with an Environmental Protection Agency (EPA) registered hospital-grade disinfectant effective against *C. auris* (EPA’s List P or 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.  
• Educate all healthcare personnel, including healthcare personnel who work with environmental cleaning services, about *C. auris* 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. | | • Understand and recommend infection control measures for patients colonized or infected with *C. auris*, including Standard and Contact Precautions  
• Conduct a site visit when necessary and assess implementation of infection control strategies.  
• For further assistance contact outbreak@health.nv.gov |
| **Environmental Cleaning** | Ensure and audit thorough daily and terminal environment cleaning of patient care environment and reusable equipment  
- Focus on high-touch surfaces or any shared patient equipment.  
- CDC recommends use of an Environmental Protection Agency (EPA)–registered hospital-grade disinfectant effective against C. auris (EPA’s [List P](https://www.epa.gov/sites/production/files/2021-03/documents/candidaauris%20disinfectant%20list%20pdf) or EPA’s [List K](https://www.epa.gov/sites/production/files/2021-03/documents/candidaauris%20disinfectant%20list%20k%20pdf))  
- Daily and terminal cleaning of patient environment using a (EPA’s [List P](https://www.epa.gov/sites/production/files/2021-03/documents/candidaauris%20disinfectant%20list%20pdf) or EPA’s [List K](https://www.epa.gov/sites/production/files/2021-03/documents/candidaauris%20disinfectant%20list%20k%20pdf)) product. 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. | • Conduct a site visit when necessary to assess appropriateness and adequacy of environmental cleaning measures.  
• For further assistance contact [outbreak@health.nv.gov](mailto:outbreak@health.nv.gov) |
| **Adherence Monitoring** | Based on your facility policy use adherence monitoring tools to assess and track provider adherence to infection control measures. Monitoring adherence and providing feedback to staff are critical to sustained implementation of infection prevention measures. |  |
| **Interfacility Communication** | When transferring a patient or resident with C. auris colonization or infection to another facility, make sure to notify the receiving facility of patient’s C. auris infection or colonization status, including recommended infection control precautions.  
- Use the HAI Program interfacility transfer form during all patient or resident transfers available via Nevada state link. [Nevada state Inter-facility Transfer Form](https://www.epa.gov/sites/production/files/2021-03/documents/candidaauris%20disinfectant%20list%20pdf) |  |
| **Antimicrobial Stewardship** | Assess the appropriateness of antibiotics, especially antifungals, and discontinue them when not needed as this practice may help prevent C. auris colonization and infection. [Treatment and Management of Infections and Colonization | Candida auris | Fungal Diseases | CDC](https://www.epa.gov/sites/production/files/2021-03/documents/candidaauris%20disinfectant%20list%20pdf) |  |
| **Transport of Patient with suspected or confirmed C. auris** | Facilities should follow Standard and Transmission-Based Precautions for the transport of patient/Resident with suspected or confirmed C. auris  
**Personal Protective Equipment (PPE): Contact Precautions:**  
- 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.  
- Remove and dispose of contaminated PPE and perform hand hygiene prior to transporting patients on Contact Precautions. |  |
- During Transport, perform hand hygiene Don PPE when performing patient care procedures; or when handling or touching contaminated items or surfaces.
- Don PPE to handle the patient at the transport destination.
- Perform hand hygiene before donning and after doffing PPE.

• **Where respiratory vectors are considered**, follow PPE and transportation requirements in accordance with CDC recommendations on Droplet/Airborne Precautions in the following link [Transmission-Based Precautions | Basics | Infection Control | CDC](https://www.cdc.gov/infectioncontrol/pdf/guidelines/isolation-guidelines-H.pdf)

• Additionally, Follow CDC recommendations on [Source control](https://www.cdc.gov/infectioncontrol/pdf/guidelines/isolation-guidelines-H.pdf) in the following link: [Infection Control: Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) | CDC](https://www.cdc.gov/infectioncontrol/pdf/guidelines/isolation-guidelines-H.pdf)

• **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.

• **Environmental Measures:** Ensure that cleaning and disinfection procedures are utilized after each Patient/Residents transport for the vehicle. CDC recommends use of an Environmental Protection Agency (EPA)–registered hospital-grade disinfectant effective against C. auris ( EPA’s List P, or EPA’s List K).


**Education and Training:**

- Multidrug-resistant Candida auris: Update on Current U.S. Epidemiology, Clinical Profile, Management, and Control Strategies
  https://www.youtube.com/watch?v=QzY0FPvKtfc (recording)

- CDC/CDPH C. auris in Long-Term Care Facilities Webinar:
  C auris and other novel MDRO prevention in LTCFs webinar slides (slides)