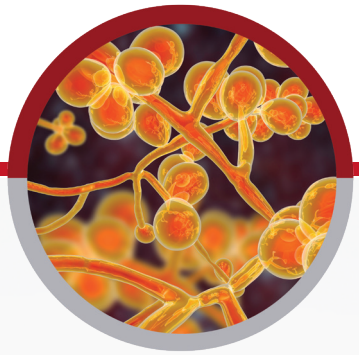

EMERGING PATHOGEN ALERT

Candida auris

Pathogen Profile[1,2]

- *Candida auris* is an emerging fungus that presents a serious global health threat.
- Many *C. auris* infections are multi-drug resistant; meaning resistant to multiple antifungal drugs used to treat Candida infections making it more difficult to treat.
- *C. auris* is difficult to identify with standard laboratory methods leading to misidentification and improper management.
- *C. auris* has caused outbreaks in healthcare settings; quick identification is important to implement special precautions to stop its transmission.
- *C. auris* can cause bloodstream and other types of invasive infections, particularly in patients in hospitals and residents in nursing homes who have multiple medical problems. More than 1 in 3 patients die within a month of *C. auris* infection.

Routes of Transmission[1,2]

- *C. auris* can spread from one person to another through contact transmission in hospitals and nursing homes.
- People can carry *C. auris* somewhere on their body, even if it is not making them sick.
- Persons colonized with *C. auris* may contaminate other people, objects, or surfaces allowing the fungus to spread through contact transmission.
- Studies have shown that *C. auris* can persist on surfaces in the healthcare environment for at least 14 days (Piedrahita et al., 2017; Welsh et al., 2017); *C. auris* has been cultured from contaminated bedding for up to 7 days (Biswal et al., 2017).

Precautions and Infection Control[3]

Prepare for *C. auris* in healthcare:

- Ensure the laboratory can identify *C. auris*; if not, send suspected isolates to the state or local public health for further identification.
- Establish a surveillance protocol with laboratory for prompt notification when *C. auris* is suspected.
- Identify persons at higher risk for *C. auris*. These include:
  - People who have received healthcare in post-acute care facilities (e.g., nursing homes), especially those with ventilator units.
  - People with a recent history of receiving healthcare outside the United States in a country with known *C. auris* transmission.
- Educate on recommendations for infection prevention and control of *C. auris* with healthcare staff, including environmental services.

***C. auris* during COVID-19:**

- *C. auris* outbreaks have been reported in COVID-19 units in acute care facilities. Outbreaks may be related to altered infection control practices during the pandemic, and limited availability of PPE, reuse of PPE, and changes in cleaning/disinfection practices.
- New *C. auris* cases not linked to known cases or healthcare exposure abroad have been identified in multiple states indicating an increase in undetected transmission.
- *C. auris* colonization screening (and containment efforts) has been more limited as resources have been diverted to pandemic response.

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What to do when *C. auris* is in your facility:

- Check the CDC website for the most up-to-date guidance on identifying and managing *C. auris*.
- Report possible or confirmed *C. auris* immediately to your public health department.
- Ensure adherence to CDC recommendations for infection control, including:
  - Place patients infected or colonized with *C. auris* in a single room on contact precautions.
  - Assess and ensure gown and glove use.
  - Reinforce hand hygiene protocols.
  - Coordinate with environmental services to ensure the environment is cleaned with a disinfectant that is effective against *C. auris* (i.e., products with *C. auris claims*) by searching EPA at: https://www.epa.gov/pesticide-registration/selected-epa-registered-disinfectants#candida-auris or on EPA List K, products that are effective against *C. difficile*.
  - *C. auris* has been cultured in both the immediate patient environment and general environmental surfaces farther away within patient room; *C. auris* has been identified on shared mobile equipment.
  - Thorough daily and terminal cleaning/disinfection of patient/resident rooms and areas where care is received should be performed using an appropriate disinfectant.
- Screen contacts of case individuals to identify others that may be colonized.
- Clearly communicate the person's *C. auris* status to receiving healthcare providers upon discharge/transfer.

SUGGESTED PDI PRODUCTS

Sani-Cloth® Bleach Sani-HyPerCide™ Sani-Prime®

	REORDER NO.	WIPE SIZE	CASE PACK	CASE WGT	CASE CUBE	PALLET TI/HI
Sani-Cloth® Bleach Germicidal Disposable Wipe						
Clinical Size Wipes Canister	P84172	6" X 5"	12/160's	27.20 lbs	1.49 ft	10/3
Large Canister	P54072	6" X 10.5"	12/75's	22.65 lbs	1.54 ft	10/3
Extra Large Canister	P25784	7.5" X 15"	6/65's	20.50 lbs	1.01 ft	10/4
Sani-HyPerCide™ Germicidal Disposable Wipe & Germicidal Spray						
Spray Bottle	X13109	N/A	9/32 oz per bottle	22.30 lbs	1.05 ft	13/3
Large Canister	P27372	6" X 6.75"	12/160's	23.60 lbs	1.36 ft	10/3
Extra Large Canister	P26584	7.5" X 15"	6/65's	12.5 lbs	0.86 ft	10/4
Sani-Cloth® Prime Germicidal Disposable Wipe & Sani-Prime® Germicidal Spray						
Spray Bottle	X12309	N/A	9/32 oz per bottle	19.24 lbs	0.83 ft	12/4
Large Canister	P25372	6" X 6.75"	12/160's	16.00 lbs	1.41 ft	10/3
Extra Large Canister	P24284	7.5" X 15"	6/70's	27.84 lbs	1.01 ft	10/4

References:
[1]https://www.cdc.gov/fungal/candida-auris/index.html
[2]https://www.cdc.gov/fungal/diseases/candidiasis/pdf/Candida_auris_508.pdf
[3]https://www.cdc.gov/fungal/candida-auris/tracking-c-auris.html

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