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To: Wisconsin Infection Preventionists

From: Wisconsin Healthcare-Associated Infection Prevention Program (WHAIPP)

**Admission Screening Recommendations to Detect Carbapenemase-Producing
Carbapenem-Resistant *Enterobacteriaceae* (CP-CRE) and *Candida auris***

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Summary

The Wisconsin Healthcare-Associated Infections Prevention Program (WHAIPP) strongly recommends that Wisconsin acute care and critical access hospitals conduct inpatient admission screening for carbapenemase-producing carbapenem-resistant *Enterobacteriaceae* (CP-CRE) and *Candida auris* on patients with a history of an overnight stay in a healthcare facility outside the United States in the previous 12 months. Patients should be placed on contact precautions while awaiting test results.

Background

CP-CRE are bacteria that are highly resistant to antibiotics and the resulting infections can be difficult or impossible to treat with antibiotics. Resistance in these organisms is increased because of the presence of a carbapenemase, an enzyme that breaks down carbapenems and other antibiotics. The genes that produce carbapenemases are often found on plasmids, which are mobile gene elements that can be transmitted between bacteria, further contributing to the spread of antibiotic resistance.

Candida auris is a species of fungus that is often multidrug-resistant and can cause serious invasive infections. *C. auris* has not been identified in a Wisconsin resident, but there have been hundreds of cases identified in the United States, including a significant number in neighboring Illinois. Outbreaks of *Candida auris* have proven difficult to contain even with enhanced infection control efforts because of the ability of the fungus to survive in the environment.

Both CP-CRE and *Candida auris* can colonize patients asymptotically, which can lead to transmission within healthcare facilities. In order to prevent patient-to-patient transmission of these organisms, facilities need to ensure prompt implementation of contact precautions and other infection control measures. The links below detail the full CDC recommendations:

CP-CRE screening (p. 15): <https://www.cdc.gov/hai/pdfs/cre/CRE-guidance-508.pdf>

Candida auris screening: <https://www.cdc.gov/fungal/candida-auris/c-auris-screening.html>

Specimen Collection and Laboratory Testing

The Wisconsin State Laboratory of Hygiene (WSLH), as part of CDC's Antibiotic Resistance Laboratory Network, has the capability to detect and respond to emerging antimicrobial resistant threats, including CP-CRE and *C. auris*. Screening for CP-CRE is conducted using a rectal swab tested for the five most common carbapenemases. *C. auris* screening uses skin swabs from the bilateral axilla and groin, which are tested using both PCR and culture methods. Facilities interested in admission screening to detect these organisms should contact WHAIPP at 608-267-7711 or by email at dhswhaipreventionprogram@wi.gov to coordinate testing. Colonization testing for patients with risk factors is performed free of charge.

Contacts

- WHAIPP: 608-267-7711 or dhswhaipreventionprogram@wi.gov
- Megan Lasure, Antibiotic Resistance Epidemiologist: 608-266-0915 or megan.lasure@wi.gov

Admission Screening Recommendations to Detect Carbapenemase-Producing Carbapenem-Resistant *Enterobacteriaceae* (CP-CRE) and *Candida auris* References

- [Wisconsin *C. auris* webpage](#)
- [Wisconsin *C. auris* fact sheet](#)
- [WSLH AR Lab Network webpage](#)
- [CDC *Candida auris*](#)
- [CDC *C. auris* FAQ for Healthcare Professionals](#)
- [CDC *C. auris* Information for Infection Preventionists](#)
- [CDC *C. auris* Infection Prevention and Control](#)