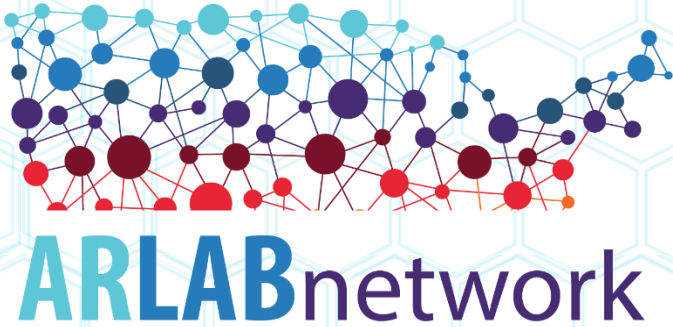


Identification and Testing of *Candida auris*

Identifying Persons with *C. auris* is a Key Step in Containing the Spread of *C. auris*.



C. auris is an emerging multidrug-resistant fungal pathogen that can cause invasive infections with high mortality and has been transmitted in healthcare settings. Identifying persons with *C. auris* is a key step in containing the spread of *C. auris*.

On admission, facilities should screen:



Patients with a history of an overnight stay in a healthcare facility **outside of the United States** in the previous 12 months

Patients should be placed on **Contact Precautions** while awaiting testing results.

Facilities should also consider screening:

Patients, who had had a skilled nursing facility stay in the last 12 months in:



New York,
New Jersey,
Chicago,
or other areas where *C. auris* is more common



Sample Collection Procedure

The skin (specifically axilla and groin) appears to be the highest yield sites to swab to identify patients colonized with *C. auris*. *C. auris* has also been isolated from swabs taken from the nares, oropharynx, external ear canal, vagina, and rectum. These sites can also be considered for sampling.

- Before initiating collection, perform hand hygiene and wear appropriate personal protective equipment (PPE) as indicated by the patient's clinical care team (e.g., gloves, gown, mask).
- Open the ESwab package by grasping the plastic at the opposite end from the soft tip.
- Carefully remove the tube from its package, leaving the swab tip enclosed in the package to prevent contamination.
- Pull the swab from the package, being careful not to touch the soft tip. Firmly rub the soft end of the collection swab cross the indicated site at least 3-5 times.
 - Rub both sides of the swab tip over the left axilla skin surface and then the right, targeting the crease in the skin where the arm meets the body (i.e., swab both armpits, swiping back and forth ~5 times per armpit).
 - With the same swab used on the axilla, rub both sides of the swab tip over the left groin skin surface, targeting the inguinal crease in the skin where the leg meets the pelvic region and repeat with the right side (i.e., swab the skin of both hip creases swiping back and forth ~5 times per hip crease).
- Remove the cap from the swab collection tube, then place the soft end of the collection swab into the tube. Be careful to keep the cap from touching any materials that may contaminate your sample. ****DO NOT DUMP THE LIQUID IN THE TUBE**
 - If an ESwab is accidentally spilled, please recollect the sample with a new ESwab.
 - Do not add liquid into the ESwab collection tube or attempt to retrieve spilled liquid.
- Snap off the end of the swab at the marked line by bending the plastic handle against the edge of the transport media container.
- Screw on the tube cap and seal with parafilm (included in supplies). You may need to adjust it until the snapped end of the swab slides into place in the center of the cap.
- Write specimen information on the tube label or apply patient identification label.
- Ship immediately to MDH PHL, Central Region AR Lab Network laboratory.

***If a delay in shipment cannot be prevented, store the swabs at 4° C or on ice until shipment.**

For More Information

For questions on collection and submission of a screening isolate contact the NDDoH Division of Microbiology at 701.328.6272 or email MDH PHL at Health.ARLNMN@state.mn.us