

Candida auris

Practical Information Resources for Clinical Laboratorians

The intent of this checklist is to provide practical information and key resources available to confront *C. auris* in a clinical laboratory. It is not comprehensive and each facility must determine the extent to which the information might be used to implement or modify processes for *C. auris* in their laboratory. Communication with local, regional and/or state health departments is also highly recommended.

Table 1. *C. auris* checklist– practical information resources available

√	Practical Information	Resource
	Gram stain and culture characteristics CDC website and 2 case studies	https://www.cdc.gov/fungal/candida-auris/identification.html https://jcdc.org/index.php/journal/article/view/25881537/1294 https://www.icdr.net/articles/PDF/12487/39654_CE[Ra1]_F(SL)_PF1(AGAK)_PFA(AK)_PB(AG_SH_U)_PN(SL).pdf
	Limitations of phenotypic methods for isolate identification	https://www.cdc.gov/fungal/candida-auris/identification.html
	Reliable methods for isolate identification	https://www.cdc.gov/fungal/candida-auris/identification.html
	Isolates available for verification of identification methods	https://www.cdc.gov/ARIsolateBank/Panel/AllIsolate (<i>Candida auris</i> panel)
	Antifungal susceptibility testing of <i>C. auris</i> Note: there are no FDA cleared commercial methods for <i>C. auris</i>	https://www.cdc.gov/fungal/candida-auris/c-auris-antifungal.html
	Passive surveillance for <i>C. auris</i> in routine diagnostic specimens	See Table 2 below
	Procedure for collection of swabs for colonization screening	https://www.cdc.gov/fungal/candida-auris/c-auris-patient-swab.html
	Procedure for testing swabs for colonization screening	https://www.cdc.gov/fungal/candida-auris/c-auris-guidance.html
	Identification of high-risk patients that may warrant <i>C. auris</i> colonization screening	https://www.cdc.gov/fungal/candida-auris/c-auris-screening.html Note: State or local health departments can provide additional guidance
	SAFETY - Lab Safety when working with known or suspected <i>C. auris</i> isolates Disinfectants EPA approved for <i>C. auris</i> ; Note: quaternary ammonia only products are NOT effective	https://www.cdc.gov/fungal/candida-auris/c-auris-infection-control.html#disinfection https://www.cdc.gov/fungal/candida-auris/c-auris-lab-safety.html https://www.epa.gov/pesticide-registration/list-p-antimicrobial-products-registered-epa-claims-against-candida-auris
	<i>C. auris</i> resources available through the Antibiotic Resistance Laboratory Network (AR Lab Network)	https://www.cdc.gov/drugresistance/laboratories/ar-lab-network-testing-details.html

		https://www.cdc.gov/drugresistance/laboratories.html (check your local or regional AR Lab Network laboratory) and See Table 3 below
	Requirements for public health department reporting of <i>C. auris</i>	<i>C. auris</i> is a Nationally Notifiable disease; contact your local public health laboratory as specific requirements often differ from state to state, region to region. For case definitions: https://ndc.services.cdc.gov/conditions/candida-auris/
	<i>C. auris</i> cases in the USA	https://www.cdc.gov/fungal/candida-auris/tracking-c-auris.html
	CDC <i>C. auris</i> support contact information	candidaauris@cdc.gov

✓ Check when information is obtained

Table 2. Passive surveillance for *C. auris*

Laboratorians and infection preventionists should work together to devise a streamlined approach for detection and reporting of patients colonized or infected with *C. auris*. This may involve revising laboratory protocols and/or methods to detect *C. auris* in routine diagnostic specimens as part of “passive surveillance”, including specimens that may not typically undergo species identification with current protocols. Local epidemiology and resources available will generally guide protocols adopted.

Species identification of yeast from non-sterile sources – examples of criteria used to choose isolates for species-level identification. This includes ‘rule out *C. auris*’ as part of passive surveillance.

Criteria	Example		
	1	2	3
Which patients?	All Inpatient	High-risk* inpatients	All inpatient
Which specimen type?	Urine	Urine	All
Which yeast isolates?	Any unless specimen considered contaminated	Any unless specimen considered contaminated	Any previously reported as “yeast”

*as determined with input from infection preventionists

Table 3. Ways in which CLIA-certified AR Lab Network laboratories can assist clinical laboratories with *C. auris*.

Local Clinical Laboratory		AR Lab Network Support
Scenario	Questions/Observations	
Wants to ensure current yeast identification methods can identify <i>C. auris</i> .	Where can I find guidance?	CDC provides guidance https://www.cdc.gov/fungal/candida-auris/identification.html

MALDI-TOF needs to be verified for identification of <i>C. auris</i> .	Where can isolates be obtained for verification?	FDA AR Isolate bank and CDC provide isolates free of charge. https://wwwn.cdc.gov/ARIsolateBank/ (<i>Candida auris</i> panel).
The lab's first <i>C. auris</i> isolate is identified.	How can I confirm identification is accurate, as a supplemental QA check?	Confirm identification of <i>C. auris</i> by MALDI-TOF. Note: AR Lab Network can accept isolates for confirmation/rule-out <i>C. auris</i>
The clinician wants antifungal susceptibility testing results on a <i>C. auris</i> isolate.	Where can antifungal susceptibility testing be performed since our laboratory cannot do this?	Performs antifungal susceptibility testing (on <i>Candida</i> spp. other than <i>C. albicans</i>). Information about antifungal testing can be found here https://www.cdc.gov/fungal/candida-auris/c-auris-antifungal.html Note: Contact your AR Lab Network laboratory to determine which labs can accept and report isolates for <i>C. auris</i> antifungal susceptibility testing.
The Infection Preventionist approaches the lab about screening a patient for <i>C. auris</i> that is being transferred from a LTCF in which several <i>C. auris</i> patients were identified.	What screening approaches are appropriate? Where can screening specimens be tested?	Performs screening of axilla/groin swabs or nares/axilla/groin to identify patients colonized with <i>C. auris</i> . (Local public health department will determine if AR Lab Network can accommodate the request based on circumstances surrounding the case).

References:

Information for Laboratorians and Health Professionals: <https://www.cdc.gov/fungal/candida-auris/health-professionals.html>

A CDC message to laboratory staff: <https://www.cdc.gov/fungal/candida-auris/fact-sheets/fact-sheet-lab-staff.html>

Arensman, K. et al. 2020. Clinical outcomes of patients treated for *Candida auris* infections in a multisite health system, Illinois, USA. *Emerg Infect Dis*. 26:876-880. <https://dx.doi.org/10.3201/eid2605.191588>.

Arora P, Singh P, Wang Y, Yadav A, Pawar K, Singh A, Padmavati G, Xu J, Chowdhary A. 2021. Environmental isolation of *Candida auris* from the coastal wetlands of Andaman Islands, India. *mBio* 12:e03181-20. <https://doi.org/10.1128/mBio.03181-20>.

de Almeida JN Jr., Francisco EC, Hagen F, Brandão IB, Pereira FM, Presta Dias PH, de Miranda Costa MM, de Souza Jordão RT, de Groot T, Colombo AL. Emergence of *Candida auris* in Brazil in a COVID-19 Intensive Care Unit. *Journal of Fungi*. 2021; 7(3):220. <https://doi.org/10.3390/jof7030220>

Du H, Bing J, Hu T, Ennis CL, Nobile CJ, et al. (2020) *Candida auris*: Epidemiology, biology, antifungal resistance, and virulence. PLOS Pathogens 16(10): e1008921. <https://doi.org/10.1371/journal.ppat.1008921>

Hata DJ, Humphries R, Lockhart SR; College of American Pathologists Microbiology Committee. *Candida auris*: An Emerging Yeast Pathogen Posing Distinct Challenges for Laboratory Diagnostics, Treatment, and Infection Prevention. Arch Pathol Lab Med. 2020 Jan;144(1):107-114. doi: 10.5858/arpa.2018-0508-RA. Epub 2019 Jun 6. PMID: 31169997.

Jeffrey-Smith, A. et al. 2018. *Candida auris*: a review of the literature. Clin Microbiol Rev. 31:e00029-17. <https://doi.org/10.1128/CMR.00029-17>.

Kordalewska M and Perlin DS (2019) Identification of Drug Resistant *Candida auris*. Front. Microbiol. 10:1918. doi: 10.3389/fmicb.2019.01918

Lockhart SR, Berkow EL, Chow N, Welsh RM. *Candida auris* for the clinical microbiology laboratory: Not your grandfather's *Candida* species. Clin Microbiol Newsl. 2017 July 1; 39(13): 99–103. doi:10.1016/j.clinmicnews.2017.06.003.

Spivak ES, Hanson KE. 2018. *Candida auris*: an emerging fungal pathogen. J Clin Microbiol 56:e01588-17. <https://doi.org/10.1128/JCM.01588-17>.

Villaneuva-Lozano H, et al. Outbreak of *Candida auris* infection in a COVID-19 hospital in Mexico. Clin Micro and Infect 2021; 27: 813-816.

Zhu Y, O'Brien B, Leach L, Clarke A, et al. Laboratory analysis of an outbreak of *Candida auris* in New York from 2016 to 2018: Impact and Lessons Learned. J Clin Microbiol. 2020; 25;58(4):e01503-19. <https://journals.asm.org/doi/10.1128/JCM.01503-19>