The Philadelphia Department of Public Health (PDPH) and the Centers for Disease Control and Prevention (CDC) recommend that:

This patient should immediately be placed on contact precautions

This patient has been colonized or infected with *Candida auris*. *Candida auris* is a difficult to detect yeast that can cause life-threatening infections and has caused long-lasting outbreaks in healthcare facilities (HCFs). It is easily spread, hard to remove from the environment, and often very resistant to antifungal medications. Implementation of Transmission-Based Precautions is necessary to prevent outbreaks. Contact Precautions should be implemented by all HCFs, including long-term care facilities (LTCFs), as the primary option. LTCFs may be able to utilize Enhanced Barrier Precautions* for long-term management of these patients per CDC guidance and in consultation with the PDPH.

**Contact Precautions and Recommendation Checklist:**

- This patient should be placed in a **private room**, if possible.**
- Healthcare personnel interacting with patients on Contact Precautions, or their environment, are required to wear a **gown and gloves**, donning their PPE upon room entry and properly discarding before exiting
- Healthcare personnel should conduct diligent **hand hygiene** during and after contact with a *C. auris* patient or their environment; Ensure **alcohol-based hand rub** is readily available
- **Disposable or dedicated patient-care equipment** should be used whenever possible
- All **disinfection** should be completed with an Environmental Protection Agency (EPA) registered disinfectant effective against *Candida auris* or *Clostridium difficile*. Cleaning and disinfection should be performed according to the manufacturer’s instructions for use. Examples include:
  - Shared **equipment should be thoroughly cleaned/disinfected after contact** with this patient (e.g. stethoscopes, X-ray machines, respiratory therapy equipment)
  - The **patient’s room** should be cleaned/disinfected daily and terminally upon discharge
  - **Transport vehicles/equipment** should be terminally cleaned/disinfected after use
- Ensure written and verbal **communication** of isolation status for intra and inter-facility transfers

* More information on Enhanced Barrier Precautions can be found on CDC’s website: [https://www.cdc.gov/hai/containment/PPE-Nursing-Homes.html](https://www.cdc.gov/hai/containment/PPE-Nursing-Homes.html) Enhanced barrier precautions should only be used in the place of contact precautions under consultation with PDPH.

** If a patient cannot be placed in a private room, ensure roommates are at low risk of developing *Candida* infections (e.g., no immunocompromising conditions, antifungal therapies, indwelling devices or open wounds), maintain separation of at least 3 feet, use privacy curtains to limit direct contact, clean/disinfect surfaces on a more frequent schedule, and have healthcare workers change PPE and perform hand hygiene when moving between roommates. Patients with *C. auris* who have uncontained secretions, excretions, acute diarrhea, or draining wounds should only be roomed with other *C. auris* patients.
This patient was identified to have *Candida auris*: (select one)

- □ Infection
  - □ This infection has been treated (patient is likely to be colonized and should be maintained on contact precautions)
  - □ Treatment is ongoing
- □ Colonization

This case status is: (select one)

- □ Confirmed: *Candida auris* was isolated from a body site
- □ Under investigation: Laboratory results are pending and *Candida auris* is suspected

The organism was isolated from the patient’s: (check all that apply)

- □ Skin
- □ Blood
- □ Urine
- □ Respiratory tract
- □ Wound
- □ Stool
- □ Other: ________________________________

The Isolation/Transmission-based Precaution status at time of discharge:

- □ Contact
- □ Droplet
- □ Airborne
- □ Enhanced barrier

Other organisms requiring isolation: ________________________________

Most recent topical antiseptic application (chlorhexidine gluconate [CHG]) if applicable:

- Date: _______ Body Sites: ________________________________

Additional Notes:

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

__________________________________________________________________________________

Resources


Inter-facility IC Transfer Form [https://www.cdc.gov/hai/pdfs/toolkits/Interfacility-IC-Transfer-Form-508.pdf](https://www.cdc.gov/hai/pdfs/toolkits/Interfacility-IC-Transfer-Form-508.pdf)

PPE in Nursing Homes to Prevent MDROs [https://www.cdc.gov/hai/containment/PPE-Nursing-Homes.html#1](https://www.cdc.gov/hai/containment/PPE-Nursing-Homes.html#1)