

1/31/2024

**NOTICE: This health alert provides written guidance for health care professionals and others who may need to take action to prevent or control a notifiable condition. It is not intended to provide guidance for the general public.*

Communicable Disease Update: *Candida auris* Reported in Two Washington Counties

Actions Requested

- **Be aware that several locally acquired cases of *Candida auris* (*auris*) have been recently identified in two Washington counties.**
 - A King County long-term acute care hospital has identified an outbreak involving 3 patients colonized with *auris*.
 - A Snohomish County skilled nursing facility has identified a single patient colonized with *auris*.
 - No *auris* infections or deaths have been reported.
 - The Washington State Department of Health (DOH) and the two local health jurisdictions (LHJ) are working with the impacted facilities to ensure that appropriate infection control precautions are in place and to screen additional patients.
 - See [PHSKC health advisories](#) and [Public Health Insider](#) for details about this situation provided by Public Health – Seattle King County.
- **Public Health recommends that facilities screen for *auris* patients who are currently admitted and had a prior admission at Kindred Hospital Seattle – First Hill since October 1, 2023.**
 - Out of an abundance of caution, healthcare facilities can consider screening more broadly as resources allow to include patients with a stay at Kindred since June 1, 2023.
 - Public Health will notify LHJs of any patients discharged from Kindred and transferred directly to another healthcare facility in their jurisdiction.
- **Be aware that DOH provides free *auris* screening for certain patients.**
 - Facilities should contact Thurston County Public Health and Social Services at 360-867-2610 to receive further guidance.
- **DOH recommends that ventilator capable skilled nursing facilities in Washington screen their current patients for *auris* using DOH-provided free testing.**
- **Other healthcare facilities should identify high-risk exposures in newly admitted patients and consider *auris* screening for those who have had:**
 - Close contact in a healthcare setting to someone diagnosed with *auris* or a carbapenemase-producing organism (CPO) infection or colonization. Close contact may include:
 - Sharing a room, bathroom, or patient care equipment
 - Being cared for by the same healthcare staff
 - Staying in a room near a person with *auris* or CPO
 - Direct admission from a ventilator-capable skilled nursing facility or a long-term acute care hospital
 - Colonization or infection with a CPO

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- An overnight stay in the prior year in a healthcare facility:
 - Outside the U.S., or
 - In a region of the U.S. with a high burden of *auris* cases
- **Be aware that *auris* can be misidentified through commercial laboratory testing and [specific technology is needed](#) for correct identification.**
- **Report to Thurston County Public Health and Social Services within 24 hours any suspected or confirmed *Candida auris* cases or outbreaks.** If you need technical assistance, call the Thurston County Public Health and Social Services Communicable Disease Team at 360-867-2610

Background:

On 1/22/2024, an outbreak involving 3 patients colonized with *C. auris* was reported in a long-term acute care hospital in King County. On 1/26/2024, an additional patient colonized with *C. auris* was reported in a skilled nursing facility in Snohomish County. One other locally acquired *C. auris* colonized patient was reported in July 2023. In addition to these patients, Public Health is aware of 5 other patients who acquired their *C. auris* colonization outside of Washington and have since received healthcare in Washington.

C. auris is an emerging fungus that was first reported in 2009 in Japan and has spread globally. It is a life-threatening, highly transmissible, often multidrug resistant yeast that can cause difficult to control healthcare outbreaks among vulnerable patients. Based on information from a limited number of patients, more than 1 in 3 people with *C. auris* infections have died. Patients needing long term acute care and indwelling medical devices are at the highest risk for acquisition, and once colonized, for infection.

Since 2022, DOH has provided free screening to certain patients who are at higher risk for *C. auris* and other highly antibiotic resistant organisms through the [Partners for Patient Safety Program](#). The locally acquired *C. auris* cases in Washington have been identified through this program. DOH released a prior [health advisory in July 2023](#) with *C. auris* infection prevention guidance.

Resources

- [Candida auris resources](#), WA Department of Health
- [Candida auris testing information](#), WA Department of Health
- [Candida auris Guideline](#), WA Department of Health
- [Antimicrobial Products Registered with EPA for Claims Against Candida auris](#), Environmental Protection Agency
- [Candida auris- Information for Laboratorians and Health Professionals](#), CDC
- [General Information about Candida auris](#), CDC
- [Seattle King County Release](#), Public Health Seattle King County

COMMUNICABLE DISEASE UPDATE

COMMUNICABLE DISEASE CONTROL AND PREVENTION SECTION
THURSTON COUNTY PUBLIC HEALTH AND SOCIAL SERVICES DEPARTMENT
412 LILLY RD NE
OLYMPIA, WA, 98506-5132
DISEASE REPORTING: (360)786-5470
WWW.THURSTONCOUNTYWA.GOV/PHSS



THANK YOU FOR REPORTING

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TO REPORT A NOTIFIABLE CONDITION IN THURSTON COUNTY	
Voice mail for reporting non-immediately reportable conditions (24 hours a day): Reporting a Notifiable Condition (thurstoncountywa.gov)	Phone: 360-786-5470 Fax: 360-867-2601
Day time immediately reportable conditions - Calls are answered during business hours Monday -Friday 8am -5pm (excluding holidays) and routed to the appropriate communicable disease team member.	Phone: 360-867-2610 Secure eFax: 1-833-418-1916
After hours immediately and 24-hour reportable conditions or a public health emergency	Call 1-800-986-9050
No one is available with Thurston County Public Health and condition is immediately notifiable	1-877-539-4344

Communicable Disease Updates are posted online at: [Communicable Disease Updates \(thurstoncountywa.gov\)](http://thurstoncountywa.gov)

HAN Alert – *Candida auris* reported in Washington - Local Transmission Suspected – 07/18/2023

Action Requested:

- Be aware that *Candida auris* (*C. auris*) has been identified in a patient in Washington.
- Be aware that *C. auris*, an emerging often multidrug-resistant fungal pathogen, has caused outbreaks that are difficult to control in healthcare facilities outside of Washington.
- Be aware that strict adherence to routine healthcare infection prevention activities is effective in preventing spread of *C. auris* in healthcare facilities.
- Ensure your healthcare facility optimizes infection prevention practices that are proven to prevent transmission of *C. auris*, including hand hygiene, transmission-based precautions, environmental cleaning, and cleaning and disinfection of reusable medical equipment.
 - Patients with suspected or confirmed *C. auris* in healthcare facilities should be managed using contact precautions and placed in a single room whenever possible.
 - Reinforce and audit core [infection prevention practices](#) in healthcare facilities.
 - When *C. auris* is suspected, use healthcare [disinfectants that are effective against C. auris](#) and follow disinfectant instructions for use including proper precleaning, dilution, and wet time.
 - Remain vigilant for any increase in *Candida* results in a patient care unit, including from non-sterile sites, and consider *C. auris*. Review *Candida* speciation options with your lab. *Candida* isolates requiring speciation can be sent to the [Washington Antibiotic Resistance Laboratory](#).
 - [Communicate information](#) about colonization or infection with *C. auris* during care transitions within and transfers between healthcare settings. Consider using the CDC [Interfacility transfer form](#).
 - For laboratories working with suspect or confirmed *C. auris*, be aware of [safety considerations](#) including recommended PPE, disinfection, and disposal.
- **Inquire about high-risk exposures in newly admitted patients and consider *C. auris* screening in patients at high-risk for *C. auris***, including those who have had:
 - Close contact in a healthcare setting to another patient with *C. auris*; or
 - An overnight stay in a healthcare facility outside the U.S. or in a region within the [U.S. with documented C. auris cases](#) in the previous year.
- When risk factors for *C. auris* are identified, **coordinate any *C. auris* screening and testing with Public Health**. Testing at the public health lab requires preapproval from your [local health jurisdiction](#) (LHJ).
- Be aware that Public Health offers proactive *C. auris* screening to residents at long-term ventilator capable healthcare facilities and long-term acute care hospitals.
- Be aware that *C. auris* can be misidentified through commercial laboratory testing and [specific technology is needed](#) for correct identification.
- Consider an infectious disease consultation for [treatment options](#) for patients with invasive *C. auris* infections. Even after treatment, patients generally remain colonized with *C. auris* for long periods, and perhaps indefinitely.
- **Immediately report any suspected or confirmed *C. auris* cases or outbreaks to Public Health.**
 - *C. auris* is a [notifiable condition](#) in WA as of January 1, 2023.

Background

A patient in a Washington healthcare facility was recently reported to have *C. auris*. Based on known details, we believe that this case of *C. auris* was acquired in Washington. Information may change as the investigation proceeds. Washington State Department of Health (WA DOH) is also aware of one other unrelated state resident who tested positive for *C. auris* during a hospitalization in another state. WA DOH and partner local health jurisdictions are working with involved facilities to assess and optimize infection prevention practices and to perform screening of other patients to identify if transmission has occurred. Public Health is making this announcement to strongly encourage all healthcare facilities to optimize infection prevention practices and to prepare for safely admitting and caring for patients who are infected or colonized with *C. auris*.

C. auris was first reported in 2009 outside of the U.S. and has since emerged globally as a life-threatening, highly transmissible, often multidrug resistant yeast that has caused difficult to control healthcare outbreaks. Invasive infections with any *Candida* species can be fatal. Based on information from a limited number of patients, more than 1 in 3 people with *C. auris* infections have died. Patients needing long term acute care and indwelling devices are at the highest risk for acquisition. International healthcare is often the initial source of introduction of *C. auris* to a region and subsequent healthcare transmission may occur due to lapses in infection control practices.

C. auris can be misidentified as a number of different organisms when using traditional phenotypic methods for yeast identification such as VITEK 2 YST, API 20C, BD Phoenix yeast, and Microscan. An increase in infections due to unidentified *Candida* species in a patient care unit, including increases in isolation of *Candida* from urine specimens, should also prompt suspicion for *C. auris*.

DOH performs special surveillance for *C. auris* by screening isolates submitted from high-risk patients, proactive screening of patients in high acuity long term care facilities, and sentinel lab submissions of non-albicans *Candida* species to the WA Public Health Laboratory for species identification. There are currently no FDA-approved tests for colonization swabs. Laboratories with capability to characterize isolates further when *C. auris* is suspected are encouraged to do so. Public Health closely tracks all known *C. auris* cases and notifies healthcare facilities if a newly admitted patient should be screened.

Resources

- [Candida auris resources](#), WA Department of Health
- [Candida auris testing information](#), WA Department of Health
- [Antimicrobial Products Registered with EPA for Claims Against Candida auris](#), Environmental Protection Agency
- [Candida auris- Information for Laboratorians and Health Professionals](#), CDC
- [General Information about Candida auris](#), CDC