

September 6<sup>th</sup>, 2024

24-55

**To:** IH Physicians, Nurse Practitioners, Acute Care Staff, Infection Control Preventionists and Communicable Disease Unit

**From:** Kathryn Bush Director, Infection Prevention and Control; Microbiology Working Group, Dr. Amir Hadzic, Medical Director, Infection Prevention and Control

**Re:** Expansion of ARO Admission Screening Protocol

Effective September 11<sup>th</sup>, 2024, Infection Prevention and Control (IPAC) is expanding the Antimicrobial Resistant Organisms (ARO) admission screening guidelines across Interior Health (IH) to include screening for *Candida auris*, an emerging multi-drug resistant yeast that can cause severe infections and spreads easily in healthcare settings.

In addition to screening for *C. auris*, screening criteria for Carbapenemase-producing Organisms (CPO) will also be expanded to include patients hospitalized outside of IH in the last 12 months. There will be no changes to screening criteria for Methicillin-resistant *Staphylococcus aureus* (MRSA).

Detailed information on emerging pathogens is available on the [Infection Prevention webpage](#).

IH Admission forms are being updated to align with the updated ARO admission screening form.

### Important Information for *C. auris* screening

- Screening for *C. auris* will be performed upon admission to an IH Acute Care facility for patients meeting criteria listed on ARO screening form [# 807910](#)
- For patients who meet the above criteria for *C. auris* screening, please order: **Candida auris Screen**
- Patients who meet the above criteria for *C. auris* require **Contact Plus Precautions**, and placement in a **single room is MANDATORY**.
- Screening specimens are collected using a single composite swab of the groin and axilla (left and right)
  - Use one sterile swab for both axilla (swipe back and forth in each crease 5 times per axilla) then with same swab, rub both sides of the swab over each groin targeting the inguinal crease (swipe back and forth 5 times per groin)
    - North/Central/South Okanagan areas: use Copan eSwab
    - Thompson-Cariboo and Kootenay areas: use Copan M40 gel swab

### Important Information for Carbapenemase-producing Organisms (CPO) screening

- Screening for CPO will be performed upon admission to an IH acute care facility for patients meeting criteria listed on ARO screening form [# 807910](#)

- For patients who meet criteria for CPO screening please order: “**ARO CPO Rectal/Stool**”
- Screening specimens are collected using a single rectal swab
  - Insert one sterile swab 3-4 cm into rectum and gently rotate.
    - North/Central/South Okanagan areas: use Copan eSwab
    - Thompson-Cariboo and Kootenay areas: use Copan M40 gel swab
- Patients with history of travel/medical care received outside of Canada in previous year require **Contact Plus Precautions**, and placement in a **single room is MANDATORY**.
- Patients with history of hospitalization outside of IH within the previous year (other health agencies, but not international travel) require **Contact Plus Precautions**, and placement in a **single room is PREFERRED**.

### Important Information for *S. aureus* MRSA screening

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**No changes:** Patients meeting the criteria for screening swabs for MRSA will not need to be isolated unless they have a history of a previous positive result, a draining wound and/or diarrhea.

### Action Required

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- Upon receiving admission orders, all patients to be admitted to the Emergency Department or Acute Care inpatient units must have the admission screening completed for *C. auris*, CPO and MRSA as per the procedure outlined on ARO screening form [# 807910](#)
- Forward specimens to your local IH Laboratory for testing immediately after collection.
- If you have any questions or concerns, please [contact your local Infection Preventionist](#).