Contact the state and county health department if *Candida auris* infection or colonization is suspected. This is a nationally notifiable disease of public health concern. State points of contact:
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This is an update to Florida Department of Health (Florida Health) prior detection and reporting guidance for multidrug-resistant *Candida auris* (*C. auris*). We are identifying cases in Miami-Dade and Broward counties at this time. This important emerging fungal pathogen causes invasive infections, can be misidentified using standard laboratory methods, and is transmitted in health care settings. The spread of *C. auris* may be particularly high in nursing homes and other long-term care facilities which provide ventilator care. Per the Centers for Disease Control and Prevention (CDC), about 54% of *C. auris* has been identified in blood, while the remaining 46% of cases were identified from other body sites. *C. auris* bloodstream infections have a 30-day mortality rate of 39% and the 90-day rate of 58%.1 Globally, 93% of isolates show resistance to fluconazole and 41% have resistance to at least two antifungal drug classes. As of January 2019, the CDC reported 520 confirmed cases of *C. auris* infection in 12 states. Since 2017, Florida Health has confirmed eight clinical cases of *C. auris* and one colonization in Florida with one of the clinical cases occurring in December and an additional three cases identified in January. Other states experienced rapid increases statewide if containment strategies were not instituted at the stage Florida is currently faced with.

**Recommendations:**

1. **Test and identify all *Candida* isolates obtained from the bloodstream and other normally sterile invasive body sites (e.g., cerebrospinal fluid).**
   - *C. auris* is commonly misidentified as *Candida haemulonii* and other *Candida* species, as conventional biochemical identification is not reliable for speciation. More information can be found at CDC: [www.cdc.gov/fungal/candida-auris/recommendations.html](http://www.cdc.gov/fungal/candida-auris/recommendations.html)

2. **Test *Candida* isolates from non-sterile, non-invasive sites to determine species when:**
   - Clinically indicated in the care of a patient.
   - A case of *C. auris* infection or colonization has been detected in your facility or unit.
   - An increase in unidentified *Candida* species infections in a patient care unit is identified.
   - The patient has inpatient health care at a facility outside the United States in the previous one year, especially if in a [country with documented *C. auris* transmission](https://wwwnc.cdc.gov/eid/article/24/10/18-0649_article).
   Note: Colonization for longer than a year has been identified among some *C. auris* patients; consider determining the *Candida* species isolated from patients with remote exposure to health care abroad.

3. **Screen patients who are at high risk of *C. auris*, including:**
   - Close health care contacts of patients with newly identified *C. auris* infection or colonization.
   - Patients who have had inpatient health care exposures outside the United States.
   - Patients who have infection or colonization with carbapenemase-producing gram-negative bacteria. *C. auris* co-colonization with these organisms has been observed regularly.

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1. [https://wwwnc.cdc.gov/eid/article/24/10/18-0649_article](https://wwwnc.cdc.gov/eid/article/24/10/18-0649_article)
Please contact Florida Health for assistance. Screening is available at no cost.

Infection Prevention Measures:
- Place patients with \textit{C. auris} infection or colonization in a single patient room on contact precautions.
- Practice good hand hygiene.
- Clean and disinfect rooms of patients with \textit{C. auris} infection or colonization (daily and terminal) using an Environmental Protection Agency-registered hospital-grade disinfectant effective against \textit{Clostridium difficile} spores (i.e., List K agents).
- Communicate the patient’s \textit{C. auris} status when transferring them to other facilities.

Reporting:
Immediately notify the state and county health department if \textit{C. auris} is suspected or identified to arrange confirmatory testing and conduct surveillance screening.