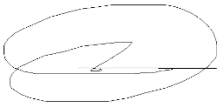
12/16/22

Good afternoon,

I want to make you aware that Parsons Hill Rehabilitation & Health Care Center, a facility in Worcester located 1350 Main St, Worcester, MA 01603 has a patient with a case of Candida auris, an emerging fungal pathogen that is often resistant to typical antifungal agents. If you respond to this location, I recommend that you consider all patients, regardless of their clinical presentation to be on **Contact-Plus precautions**. Each agency must decide what its infection control processes should be but one example of Contact-Plus Precautions is provided below. Also included is information about this pathogen as disseminated by the CDC.

Thanks for your attention to this and for your commitment to keeping our community safe.

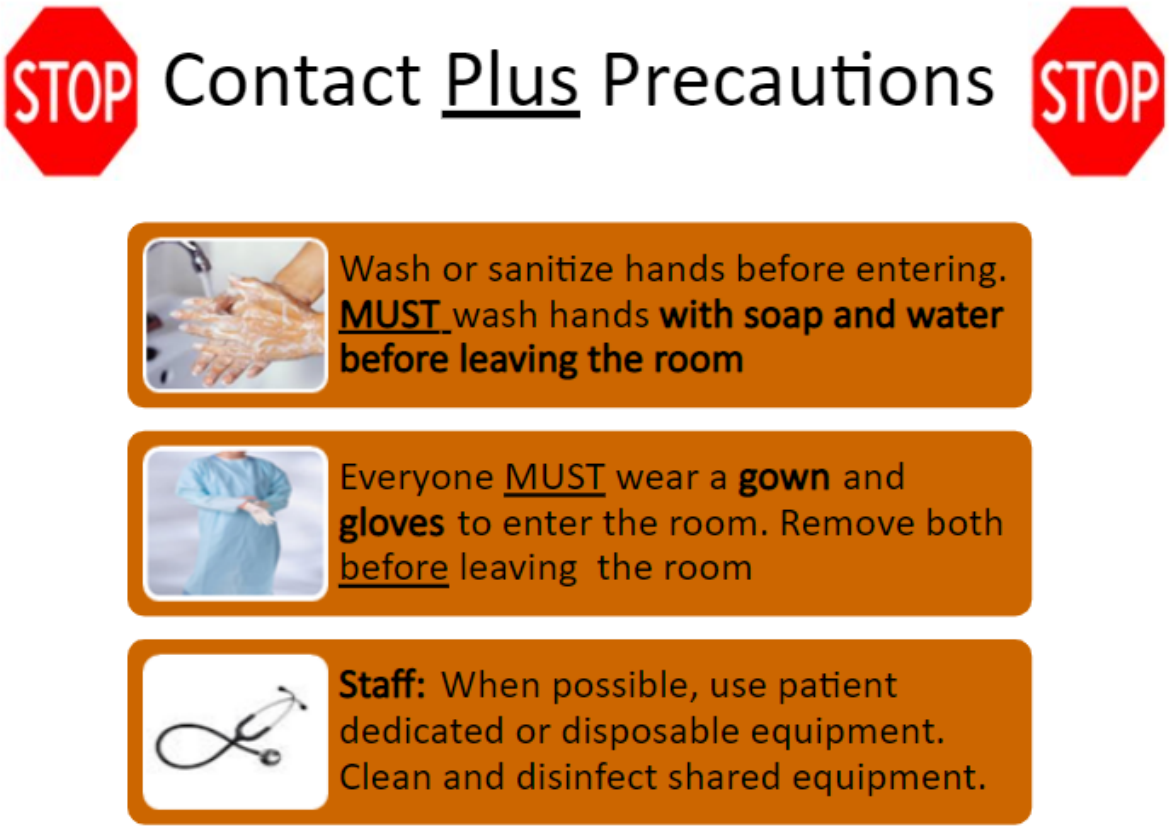
Take care,



John

John Broach, MD, MPH, MBA, FACEP

Region II EMS Medical Director



Below are details from the CDC/FDA about environmental decontamination.

- In addition to the products listed in the table, **bleach wipes** should be sufficient to kill C. Auris.
- Make sure to follow manufacturer guidelines related to drying time for any product used.
- Please make sure to thoroughly decontaminate all surfaces in transport vehicles as well as all equipment after completing transport with known or suspected C. Auris.

Environmental disinfection

C. auris can persist on surfaces in healthcare environments. *C. auris* has been cultured from multiple locations in patient rooms, including both high-touch surfaces, such as bedside tables and bedrails, and surfaces farther away from the patient, such as windowsills. *C. auris* has also been identified on mobile or reusable equipment that is shared between patients, such as glucometers, temperature probes, blood pressure cuffs, ultrasound machines, nursing carts, and crash carts.

Perform **thorough routine (at least daily) and terminal cleaning and disinfection** of patients' rooms and other areas where patients receive care (e.g., radiology, physical therapy) using an appropriate disinfectant. Clean and disinfect shared or reusable equipment (e.g., ventilators, physical therapy equipment) after each use. Label cleaned and disinfected equipment as such and store it away from dirty equipment.

All healthcare personnel providing patient care should be trained on which **mobile and reusable equipment** they are responsible for cleaning and how to clean the equipment properly. Numerous CDC and health department investigations have found that healthcare personnel are often unclear on who is responsible for cleaning mobile or reusable equipment and how it should be cleaned. Because equipment moves from room to room, often several times per day in the case of vital signs monitors and glucometers, mobile or reusable equipment is likely an important source of *C. auris* spread.

Follow all manufacturer's directions for use of surface disinfectants, and apply the product for the **correct contact time**. Some products with *C. albicans* or fungicidal claims may not be effective against *C. auris,* and accumulating data indicate that products solely dependent on quaternary ammonia compounds (QACs) are **NOT** effective [1, 2].

Products with EPA-registered claims for *C. auris* (List P)

CDC recommends using an Environmental Protection Agency (EPA)–registered hospital-grade disinfectant effective against *C. auris*. See EPA's List P for a current list of EPA-approved products for *C. auris*. If the products on List P are not accessible or otherwise suitable, facilities may use an EPA-registered hospital-

grade disinfectant effective against *C. difficile* spores (List K) for the disinfection of *C. auris*. Regardless of the product selected, it is important to follow all manufacturer's directions for use, including applying the product for the correct contact time.

Products on List P

The following products are registered for use with *Candida auris (C. auris)*. EPA has reviewed laboratory testing data demonstrating that these products kill *C. auris*.

C. auris is a fungus that can cause severe infections and spreads easily between patients. *C. auris* infections tend to occur in health care settings and can be resistant to antifungal drugs.

Prior to these products being registered, there were no antimicrobial pesticides registered specifically for use against *C. auris*.

How to Use List P Products Effectively

A product's effectiveness can change depending on how you use it. Disinfectants may have different directions for different pathogens. Follow the label directions for *C. auris*, including the contact time.

How to Check if a Product is on List P

Disinfectant products may be marketed and sold under different brand and product names. To determine whether EPA expects a given product to kill *C. auris*, determine whether its primary registration number is on this list:

If the first two parts of this registration number (ex. 1234-12) are on List P, the product is qualified for use against *C. auris*. (The first two parts of this registration number reflect the primary registration, while the third identifies the distributor's EPA company number.)

- First, find the EPA registration number on the product label. Look for "EPA Reg. No." followed by two or three sets of numbers.
- If your product's registration number has **two** parts (ex. 1234-12), it has a **primary registration number**. If this number is on List P, the product is qualified for use against *C. Auris.*
- If your product's registration number has **three parts** (ex. 1234-12-123), you have a **supplemental distributor product**. These products have the same chemical composition and efficacy as primary products, but often have different brand or product names.

  If the first two parts of this registration number (ex. 1234-12) are on List P, the product is qualified for use against *C. auris*. (The **first two parts** of

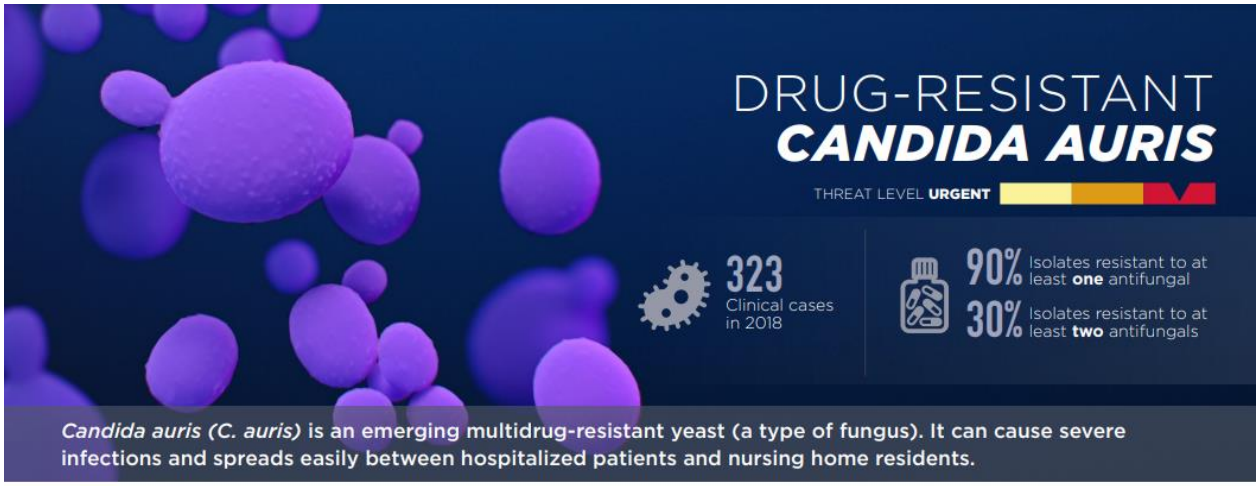
this registration number reflect the primary registration, while the third identifies the distributor’s EPA company number.)

- Regardless of whether you are using a primary registration product or a supplemental distributor product, always check that the product's label includes directions for use for against *C. auris*.

Information about listed products is current as of the date on this list. Inclusion on this list does not constitute an endorsement by EPA.

Registration	Active Ingredient	Contact Time (minutes)	Surface Types
10324-214	Hydrogen Peroxide and Paracetic Acid	2	Hard Nonporous Surfaces
1677-226	Hydrogen Peroxide, Paracetic Acid and Octoanoic Acid	4	Hard Nonporous Surfaces
1677-237	Hydrogen Peroxide and Paracetic Acid	3	Hard Nonporous Surfaces
1677-262	Dodecylbenzenesulfonic acid	1	Hard Nonporous Surfaces
1677-263	Dodecylbenzenesulfonic acid	1.25 (75 seconds)	Hard Nonporous Surfaces
37549-1	Sodium Hypochlorite	2	Hard Nonporous Surfaces
46781-12	Isopropyl Alcohol and Quaternary Ammonium Compound	1	Hard Nonporous Surfaces
46781-13	Isopropyl Alcohol and Quaternary Ammonium Compound	1	Hard Nonporous Surfaces
46781-14	Sodium Hypochlorite	3	Hard Nonporous Surfaces
46781-15	Sodium Hypochlorite	3	Hard Nonporous Surfaces

https://www.epa.gov/pesticide-registration/list-p-antimicrobial-products-registered-epa-claims-against-candida-auris



DRUG-RESISTANT *CANDIDA AURIS*

THREAT LEVEL **URGENT**

323 Clinical cases in 2018

90% Isolates resistant to at least **one** antifungal

30% Isolates resistant to at least **two** antifungals

Candida auris (C. auris) **is an emerging multidrug-resistant yeast (a type of fungus). It can cause severe infections and spreads easily between hospitalized patients and nursing home residents.**

WHAT YOU NEED TO KNOW

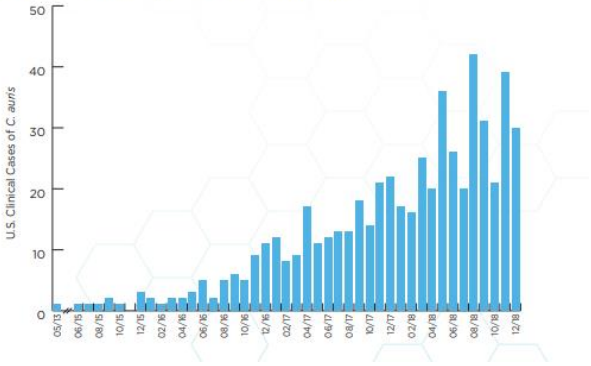
- *C. auris,* first identified in 2009 in Asia, has quickly become a cause of severe infections around the world.
- *C. auris* is a concerning drug-resistant fungus:
  - Often multidrug-resistant, with some strains (types) resistant to all three available classes of antifungals
  - Can cause outbreaks in healthcare facilities
  - Some common healthcare disinfectants are less effective at eliminating it
  - Can be carried on patients' skin without causing infection, allowing spread to others

Data represents U.S. cases only. Isolates are pure samples of a germ.

U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

CASES OVER TIME

C. auris began spreading in the United States in 2015. Reported cases increased 318% in 2018 when compared to the average number of cases reported in 2015 to 2017.



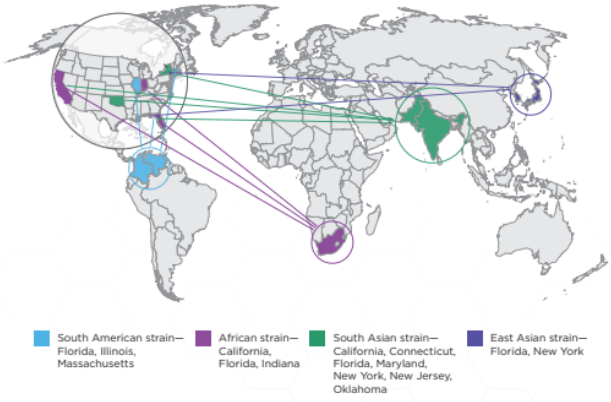
CONTAINING *C. AURIS*

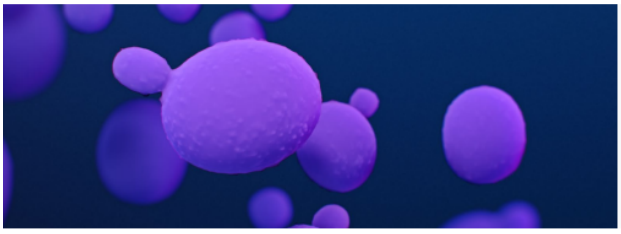
It seemed hard to believe. CDC fungal experts had never received a report describing a *Candida* infection resistant to all antifungal medications, let alone *Candida* that spreads easily between patients. After hearing the news that infections like this were identified by international colleagues in 2016, CDC sounded the alarm in the United States about *C. auris,* a life-threatening *Candida* species.

Disease detectives from CDC and state and local health departments soon investigated some of the first U.S. *C. auris* infections. They learned more about how the fungus spreads, and how CDC, health departments, and healthcare facilities can contain it. A key finding was that *C. auris* spreads mostly in long-term healthcare facilities among patients with severe medical problems. CDC and partners developed new tests to rapidly identify it, and continue to work with healthcare facilities to control spread.

A GLOBAL THREAT

Investigators still do not know why four different strains of *C. auris* emerged around the same time across the globe. All four strains have been found in the United States, likely introduced through international travel and subsequent spread in U.S. healthcare facilities.





ONLINE RESOURCES

About *C. auris*
www.cdc.gov/fungal/Candida-auris/index.html

Information for Laboratorians and Healthcare Professionals
www.cdc.gov/fungal/candida-auris/health-professionals.html

This fact sheet is part of CDC's 2019 Antibiotic Resistance Threats Report.
The full report, including data sources, is available at www.cdc.gov/DrugResistance/Biggest-Threats.html.

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