

Enrolling in the XDRO Registry and it's Benefits to Long Term Care

July 17, 2018

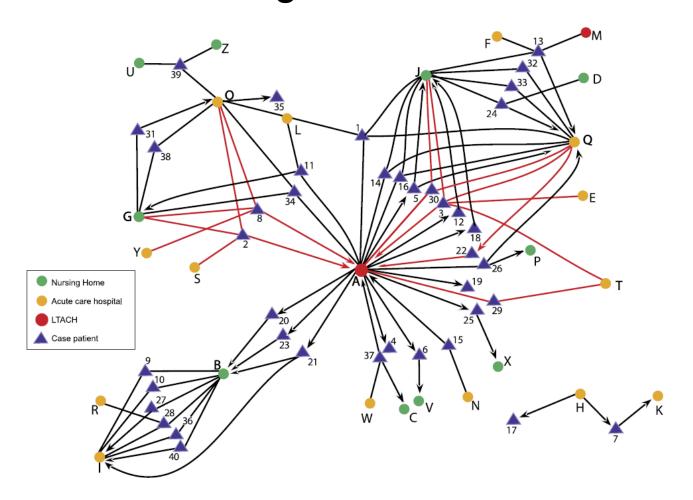
Mary Alice Lavin, RN, MJ, CIC, FAPIC APIC Consulting Services, LLC

No disclosures.

Objectives

- Discuss the steps required for registering for and accessing the Illinois Extensively Drug Resistant Organism (XDRO) Registry.
- Describe how use of the XDRO Registry can be integrated into the admission process.
- State the value the XDRO Registry adds to control of extensively drug resistant organisms.

Emergence and Rapid Regional Spread of KPC Chicago Area, 2008



Won SY et al. CID 2011: 53:532

Original Investigation

New Delhi Metallo-β-Lactamase-Producing Carbapenem-Resistant *Escherichia coli* Associated With Exposure to Duodenoscopes

Lauren Epstein, MD, MSc; Jennifer C. Hunter, DrPH; M. Allison Arwady, MD; Victoria Tsai, MPH; Linda Stein, MPH; Marguerite Gribogiannis, MPA; Mabel Frias, MPH; Alice Y. Guh, MD; Alison S. Laufer, PhD; Stephanie Black, MD; Massimo Pacilli, MS; Heather Moulton-Meissner, PhD; J. Kamile Rasheed, PhD; Johannetsy J. Avillan, BS; Brandon Kitchel, MS; Brandi M. Limbago, PhD; Duncan MacCannell, PhD; David Lonsway, PhD; Judith Noble-Wang, PhD; Judith Conway, RN; Craig Conover, MD; Michael Vernon, DrPH; Alexander J. Kallen, MD

IMPORTANCE Carbapenem-resistant Enterobacteriaceae (CRE) producing the New Delhi metallo- β -lactamase (NDM) are rare in the United States, but have the potential to add to the increasing CRE burden. Previous NDM-producing CRE clusters have been attributed to person-to-person transmission in health care facilities.

OBJECTIVE To identify a source for, and interrupt transmission of, NDM-producing CRE in a northeastern Illinois hospital.

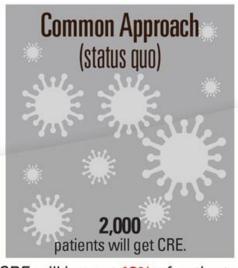
DESIGN, SETTING, AND PARTICIPANTS Outbreak investigation among 39 case patients at a tertiary care hospital in northeastern Illinois, including a case-control study, infection control assessment, and collection of environmental and device cultures; patient and environmental isolate relatedness was evaluated with pulsed-field gel electrophoresis (PFGE). Following identification of a likely source, targeted patient notification and CRE screening cultures were performed.

MAIN OUTCOMES AND MEASURES Association between exposure and acquisition of NDM-producing CRE; results of environmental cultures and organism typing.

A Coordinated Approach to Control

More patients get infections when facilities do not work together.

(Example: 5 years after CRE enters 10 facilities in an area sharing patients)



CRE will impact 12% of patients.

1,500
patients will get CRE.

CRE will impact 8% of patients.

Coordinated Approach



CRE will impact 2% of patients.

SOURCE: CDC Vital Signs, August 2015.

Facilities work together to protect patients.

Common Approach (Not enough)

 Patients can be transferred back and forth from facilities for treatment without all the communication and necessary infection control actions in place.

Independent Efforts (Still not enough)

- Some facilities work independently to enhance infection control but are not often alerted to antibiotic-resistant or C. difficile germs coming from other facilities or outbreaks in the area.
- Lack of shared information from other facilities means that necessary infection control actions are not always taken and germs are spread to other patients.

Coordinated Approach (Needed)

- Public health departments track and alert health care facilities to antibioticresistant or C. difficile germs coming from other facilities and outbreaks in the area.
- Facilities and public health authorities share information and implement shared infection control actions to stop spread of germs from facility to facility.



https://www.cdc.gov/vitalsigns/stop-spread/index.html

Pat Quinn, Governor LaMar Hasbrouck, MD, MPH, Director

122 S. Michigan Ave., Suite 700 . Chicago, IL 60603-6119 . www.idph.state.il.us

MEMORANDUM

To: Hospital Chief Executive Officer, Long Term Acute Care Hospital Executive Officer, Long Term Care Facility Executive Officer, Long Term Care Director of Nursing or Designate, Hospital-affiliated Clinical Laboratory Director, Independent or Free-standing Laboratory Director

CC: Facility Medical Director, Facility Infection Preventionist, Facility Laboratory Director, Facility Microbiologist, Facility Quality Director, Medical Director of the Illinois Department of Public Health (IDPH), Regional Offices of IDPH, IDPH Office of Health Care Regulation, Local Health Departments, Telligen, Illinois Hospital Association, Illinois Critical Access Hospital Network, Metropolitan Chicago Healthcare Council, Illinois APIC chapters, Life Services Network, Illinois Council on Long Term Care, Illinois Health Care Association.

From: Mary Driscoll, RN, MPH

Chief, Division of Patient Safety and Quality

Erica Abu-Ghallous, MSN, MPH, RN

HAI Prevention Coordinator, Division of Patient Safety and Quality

Date: September 4, 2013

Subject: XDRO registry

Carbapenem-resistant Enterobacteriaceae (CRE) are considered extensively drug resistant organisms (XDROs) that have few antibiotic treatment options and high mortality rates. CRE are increasingly detected among patients in Illinois, including acute and long term care healthcare facilities.

In response to the CRE public health threat, the Illinois Department of Public Health (IDPH) has amended the Control of Communicable Diseases Code (77 Ill. Adm. Code 690) Rules (see addendum) to require reporting of CREs to IDPH.

All hospitals hospital-affiliated clinical laboratories independent or free-standing laboratories



Extensively Drug Resistant Organism Registry

Reporting Rule

Starting November 1, 2013, the **first CRE-positive culture per patient stay** must be reported to the XDRO registry.

CRE definition

Enterobacteriaceae (e.g., E. coli, Klebsiella species, Enterobacter species, Proteus species, Citrobacter species, Serratia species, Morganella species, or Providentia species) with one of the following laboratory test results:

- Molecular test (e.g., polymerase chain reaction [PCR]) specific for carbapenemase;
- Phenotypic test (e.g., Modified Hodge) specific for carbapenemase production;
- 3. For **E. coli and Klebsiella** species only: non-susceptible (intermediate or resistant) to ONE of the following carbapenems (doripenem, meropenem, or imipenem) AND resistant to ALL of the following third generation cephalosporins tested (ceftriaxone, cefotaxime, and ceftazidime). *Note:* ignore ertapenem for this definition.

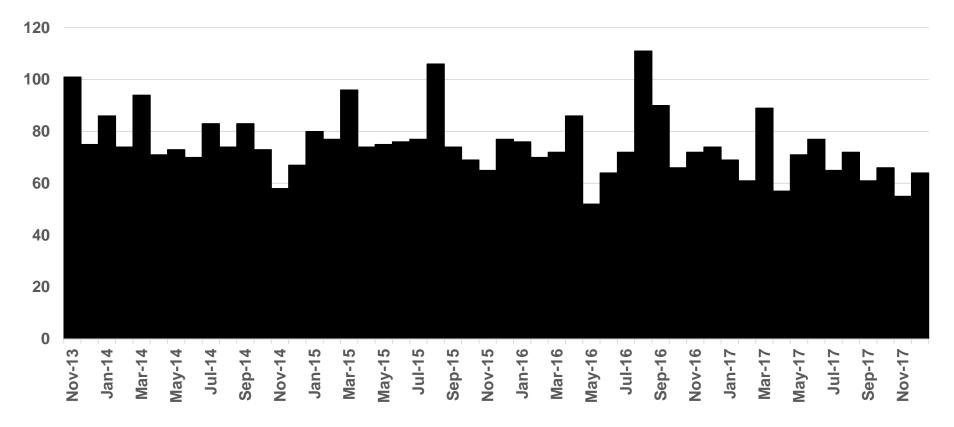
Consult with your microbiology laboratory regarding which CRE tests are available. For some laboratories, only #3 will be available.

https://www.xdro.org/reporting-rule.html

Purpose of the XDRO Registry

- Improve CRE surveillance
- Improve inter-facility communication

Unique CRE cases reported to XDRO registry by month of first clinical culture, 11/1/13 - 12/31/17 (N=3740)





Slide courtesy of Angela Tang.

Registry Expanded to Include Pseudomonas Aeruginosa



Registry Expanded to Include Candida auris



525-535 West Jefferson Street · Springfield, Illinois 62761-0001 · www.dph.illinois.go

MEMORANDUM

TO: Local Health Departments, Infectious Disease Physicians, Hospital Emergency

Departments, Infection Control Preventionists, Health Care Providers, Long Term Care

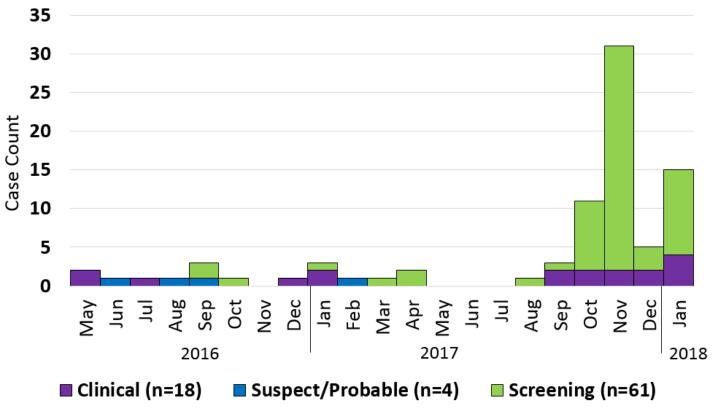
Facilities, and Laboratories

FROM: Division of Patient Safety and Quality and Communicable Disease Control Section

DATE: January 24, 2018

SUBJECT: Increase in the number of *Candida auris* cases in the Chicago-metropolitan region

C. auris Cases (n = 83) — Illinois, May 2016–January 25, 2018

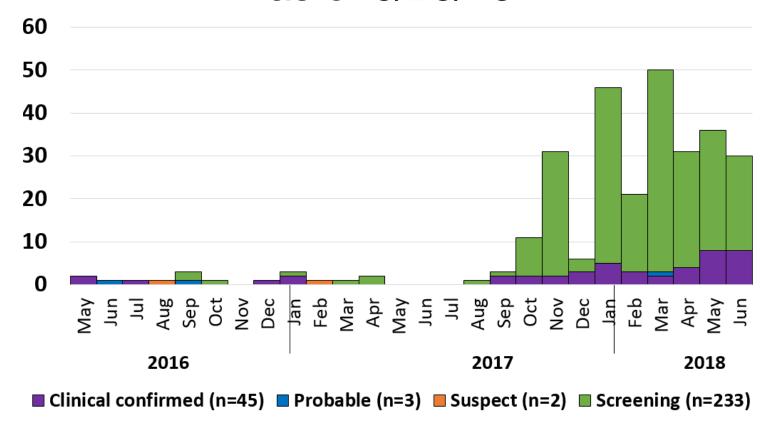


- •Confirmed: Laboratory evidence of *C. auris* from clinical culture.
- •Probable: Laboratory evidence of *C. haemulonii* from clinical culture & epidemiologic linkage to confirmed case.
- •Suspect: Laboratory evidence of *C. haemulonii* from clinical culture & no epi link.
- •Screening: Laboratory evidence of *C. auris* from screening or surveillance culture.



Slide courtesy of Angela Tang.

Illinois *C. auris* cases (n=283) by culture date, as of 6/28/18

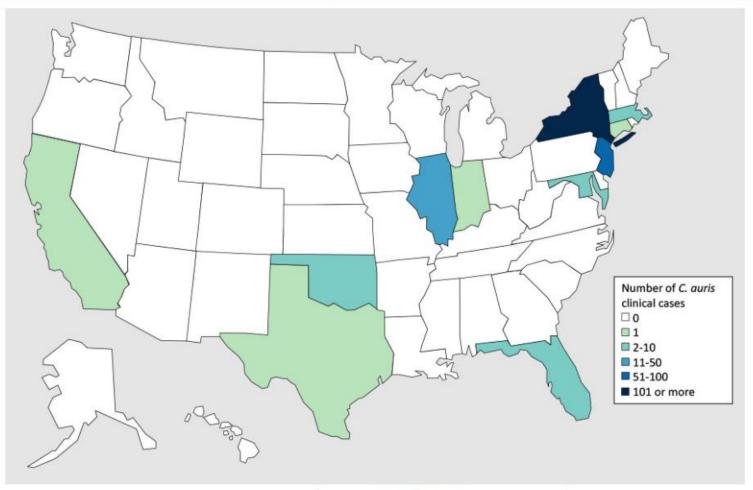


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- •Screening: Laboratory evidence of *C. auris* from screening or surveillance culture.



Slide courtesy of Angela Tang.

U.S. Map: Clinical cases of Candida auris reported by state, United States, as of May 31, 2018



Cases are categorized by the state where the specimen was collected. Most <u>probable cases</u> were identified when laboratories with current cases of *C. auris* reviewed past microbiology records for *C. auris*. Isolates were not available for confirmation. Early detection of *C. auris* is essential for containing its spread in healthcare facilities.

https://www.cdc.gov/fungal/candida-auris/tracking-c-auris.html

State Health Department Response

- Weekly State of the State calls
 - Participation from involved jurisdictions
 - Case count update
 - Point prevalence survey results
 - APIC Consulting update
 - Facility engagement/interaction
 - Infection Control Assessment and Response Status
 - Lab capacity and inventory update
 - Point prevalence surveys
 - Environmental cultures
 - Action items for the week

Chicago PROTECT

(Providing Regional Organizations with TEchniques to ConTrol MDROs)

- An Intervention Bundle
 - Uses data to predict high risk facilities
 - Alerting system
 - Targeted interventions
 - Point prevalence screening
 - Contact Precautions and cohorting
 - Chlorhexidine bathing
 - Healthcare worker education
- Measure control efforts over time



https://www.cdc.gov/hai/research/cdc-mdro-project.html

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- Describe how use of the XDRO Registry can be integrated into the admission process.
- State the value the XDRO Registry adds to control of extensively drug resistant organisms.

Facilities work together to protect patients. Common Approach (Not enough) ACUTE CARE HOSPITAL Patients can be transferred back and 1 forth from facilities for treatment without NURSING all the communication and necessary HOME infection control actions in place. Independent Efforts (Still not enough) LONG-TERM **ACUTE CARE** · Some facilities work independently to enhance infection control but are not **FACILITY** ALERT often alerted to antibiotic-resistant or C. difficile germs coming from other facilities or outbreaks in the area. Lack of shared information from other facilities means that necessary infection control actions are not always taken PUBLIC HEALTH and germs are spread to other patients. DEPARTMENT **Coordinated Approach** (Needed) **ACUTE CARE** HOSPITAL · Public health departments track and NURSING alert health care facilities to antibioticresistant or C. difficile germs coming HOME from other facilities and outbreaks in the area. · Facilities and public health authorities share information and implement shared infection control actions to stop

https://www.cdc.gov/vitalsigns/stop-spread/index.html

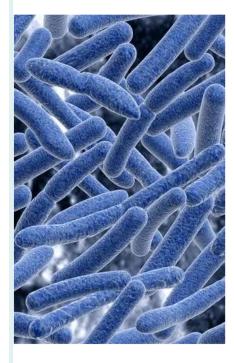
spread of germs from facility to facility.

Extensively drug resistant organism registry

Citations

Help

Login



The XDRO registry is a product of collaboration between IDPH, Medical Research Analytics and Informatics Alliance (MRAIA), and the Chicago CDC Prevention Epicenter.

To report CRE, please log-in through IDPH portal and access the XDRO registry under 'product application'

New users (who do not have access to the IDPH web portal): You must register for access to the IDPH web portal. Fill out the form to create a new username, and select the box to access the application "INEDSS (Disease Surveillance) System/XDRO registry (extensively drug resistant organism)." This may take several weeks to process.

Users who have access to the IDPH web portal, but not the INEDSS/XDRO application: If you already have a username and access to the IDPH web portal, do not fill out a new registration form. Please have your facility Portal Registration Authority (PRA)* send an email to DPH.Security@illinois.gov requesting for you to have access to the additional application "INEDSS (Disease Surveillance) System/XDRO registry (extensively drug resistant organism)." Make sure your PRA includes your full name and User ID.

Existing INEDSS users: Your existing IDPH log-in will automatically give you access to the XDRO registry. For log-in issues, please call the Central Management Services customer service center at 217-524-3648 or 312-814-3648.

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https://www.xdro.org/login.html

^{*} If you do not know the PRA for your facility, please Click here to find your PRA. If you still cannot find your PRA after scrolling through the list, please email DPH.Security@illinois.gov to find out who your PRA is



Illinois Department of Public Health Health Alert Network (HAN) User Registration

Web Portal User Agreement

USER MUST READ THIS WEB PORTAL USER AGREEMENT BEFORE APPLYING FOR, ACCEPTING, OR USING A USER ACCOUNT TO ACCESS THE ILLINOIS DEPARTMENT OF PUBLIC HEALTH (IDPH) WEB PORTAL. IF THE USER DOES NOT AGREE TO THE TERMS AND CONDITIONS OF THIS WEB PORTAL USER AGREEMENT, AN ACCOUNT WILL NOT BE ISSUED IN HIS/HER NAME

This Agreement will become effective on the date the facility employee (User) submits the user registration application form to the designated Portal Registration Authority (PRA) at his/her Facility. By submitting the registration application form, the User is expressing his/her agreement to the terms of the Web Portal User Agreement (Agreement)

he Web Portal User agrees to:

- 1. Make true representation regarding information to be used in his/her profile for identification and authentication purposes;
- Upon issuance of a Web Portal User account, the applicant as the user will review the associated profile to ensure that all user information included is accurate:
- Make use of the portal resources solely for legal and authorized State and Public Health business, consistent with applicable local, state and federal laws, mandates and regulations;
- Take reasonable precautions to prevent any compromise, modification, loss, disclosure, or unauthorized use of his/her user account and associated privileges;
 Protect his/her associated user password by following the required guidelines for password definition and maintenance;
- Immediately inform the Portal Registration Authority or the IDPH Security Administrator (5A) of a suspected compromise of the user account; Review and follow changes and updates to policies for using the Web Portal posted on this web site.

he Web Portal User agrees to adhere to the Password Guidelines as follows:

- 1. Not easily guessed and no common words or names. 2. A combination of letters and numbers
- 3. A minimum of eight characters
- 4. Changed at least every 90 days and whenever it is suspected someone knows the current password
- Unique within a 12 month period passwords not reused or repeated.

he Web Portal User agrees to adhere to Confidentiality Requirements as follows:

- 1. The User shall secure his/her password to the Web Portal.
- 2. The User shall not use, divulge, or otherwise compromise the integrity of his/her user account and password
- 3. To access the Web Portal only in the course of his/her official duties as an employee of the Facility
- 4. To maintain confidentiality of all data, documents, memoranda and any other materials accessed from the Web Portal
- 5. In the event User needs to share materials obtained from the Web Portal with other individuals, the User will only provide such materials to authorized employees at the Facility, and the User will ensure those authorized employees agree to adhere to the requirements contained in this agreement
- 6. That the information and materials the User may access at the Web Portal contains confidential and proprietary information of the Illinois Department of Public Health To not disclose orally, nor prepare any writings, reports, publications, etc., or disseminate in any other manner materials contained in or obtained from the Web Portal for release to third parties, except as specifically required by or with the written permission of the Illinois Department of Public Health
- 8. If the User receives a request for information from the Web Portal link, the User will notify the Department of Public Health immediately. A request for information includes a subpoena, court order, Freedom of Information Act request or a request from a researcher. Any issue whether information is to be released shall be resolved by the Department
- In the event the User fails to adhere to the provisions contained within the agreement, the User shall be subject to any or all of the following: termination from access to the Web Portal, discipline, and termination from employment 10. All other information required to be kept confidential in accordance with Confidentiality/Privacy Policies enforced by IDPH.

he User agrees to Termination as follows:

- 1. Violation of this agreement or of the trust relationship with IDPH may result in IDPH terminating the User agreement and revoking User priviledges.
- The User acknowledges that a violation of this agreement will result in irreparable harm, and hereby accepts responsibility for his/her actions.
- Misuse of information technology resources may also subject the User to penalties under state and federal law not limited to the Computer Crime Prevention Law (720 ILCS 5/16D)

Disclaimer of Liability

Neither the Illinois Department of Public Health nor any of its employees shall the IDPH web site, web portal, or its employees shall be held liable for any improper or incorrect use of the information described and/or contained in the Web Portal and assumes no responsibility for anyone's use of the information. In no event shall the IDPH web site, web portal, or its employees shall be held liable for any improper or incorrect use of the information described and/or contained in the Web Portal and assumes no responsibility for anyone's use of the information. In no event shall the IDPH web site, web portal, or its employees shall be held liable for any improper or incorrect use of the information described and/or contained in the IDPH web site with the IDPH web site, web portal, or its employees shall be held liable for any improper or incorrect use of the information described and/or contained in the IDPH web site with the IDPH web site, web portal, or its employees shall be held liable for any improper or incorrect use of the information described and/or contained in the IDPH web site with the IDPH web site, web portal, or its employees shall be held liable for any improper or incorrect use of the information described and its expension of the IDPH web site with th exemplary, or consequential damages (including, but not limited to, procurement or substitute goods or services; loss of use, data, or profits; or business interruption) however caused and on any theory of liability, whether in contract, strict liability, or tort (including negligence or otherwise) arising in any way out of the use of this system, even if advised of the possibility of such damage. This disclaimer of liability applies to any damages or injury, including but not limited to those caused by any failure of performance, error, omission, interruption, deletion, defect, delay in operation or transmission, computer virus, communication line failure, theft or destruction or unauthorized access to, alteration of, or use of record, whether for breach of contract, tortion behavior, negligence or under any other cause of action

I Do Not Agree

IDPH Web Portal



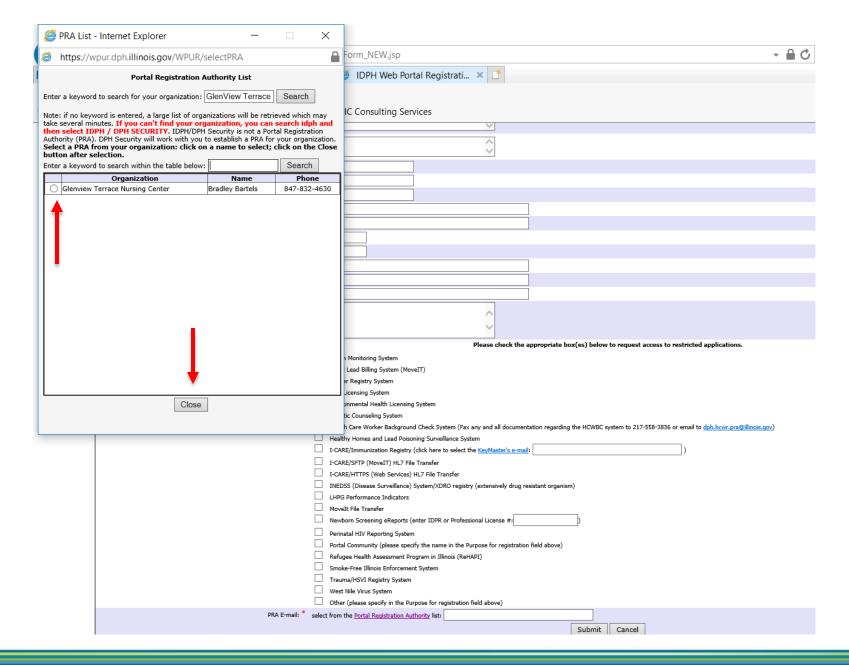


Illinois Department of Public Health Health Alert Network (HAN) User Registration

This form should be used only to register to create a new username for the IDPH Web Portal. If you already have a username, please exit and have your facility PRA send an email to DPH Security requesting the additional application access needed. Please enter the following information. * denotes a required field.

	A username will be created automatically upon submission of your registration request and a copy of the request will be sent to you via email.				
First name:					
Last name:					
	Password must be a mix of letters and numbers, with a minimum of one capital letter and eight characters in length.				
Password: *					
Confirm password:					
Title:					
Organization: *					
-					
Department: *	^				
Work address: *					
City: *					
State:					
ZIP code: * E-mail: *					
Confirm E-mail: *					
Work phone #:					
Cell phone #:					
Pager #:					
FAX #:					
Supervisor's name:					
Purpose for registration:					
	^				
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	Please check the appropriate box(es) below to request access to restricted applications.				
	Beach Monitoring System				
	Blood Lead Billing System (MoveIT)				
	Cancer Registry System				
	EMS Licensing System				
	Environmental Health Licensing System				
	Genetic Counseling System				
	Health Care Worker Background Check System (Fax any and all documentation regarding the HCWBC system to 217-558-3836 or email to dph.hcwr.pra@illnois.gov) Healthy Homes and Lead Poisnning Surveillance System				
Healthy Homes and Lead Poisoning Surveillance System I-CARE/Immunization Registry (click here to select the KeyMaster's e-mail:)					
I-CARE/SFTP (MoveIT) HL7 File Transfer					
I-CARE/HTTPS (Web Services) H.I./ File Transfer					
INEDSS (Disease Surveillance) System/XDRO registry (extensively drug resistant organism)					
	☐ LHPG Performance Indicators				
	Movelt File Transfer				
	Newborn Screening eReports (enter IDPR or Professional License #:				
	Perinatal HTV Reporting System				
	Portal Community (please specify the name in the Purpose for registration field above) Refugee Health Assessment Program in Illinois (ReHAPI)				
	□ Refugee Health Assessment Program in Illinois (ReHAPI) □ Smoke-Free Illinois Enforcement System				
	□ Smoke-Hee Julnois Enforcement System □ Trauma/HSVI Registry System				
	West Nile Vinci System				
	Other (please specify in the Purpose for registration field above)				
	select from the <u>Portal Registration Authority</u> list:				
	Submit Cancel				

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	PRA E-mail: ** select from	n the <u>Portal Registration Authority</u> list: Submit Cancel



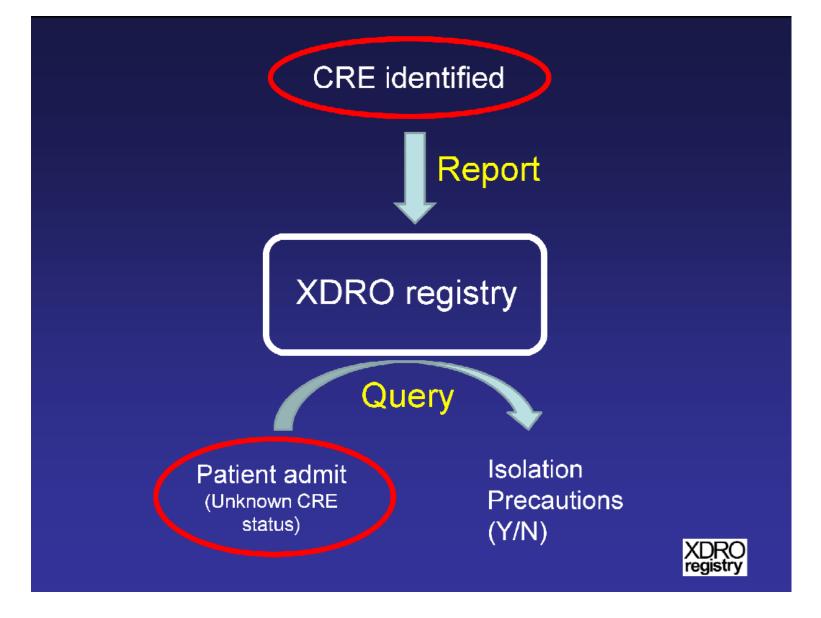
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	Please check the appropriate box(es) below to request access to restricted applications.				
	Beach Monitoring System				
	Blood Lead Billing System (MoveIT) Cancer Registry System				
	Cancer Registry System EMS Licensing System				
	Environmental Health Licensing System				
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	Other (please specify in the Purpose for registration field above)				
PRA E-mail: *	select from the Portal Registration Authority list: bbartels@glenviewterrace.com				
	Submit Cancel				

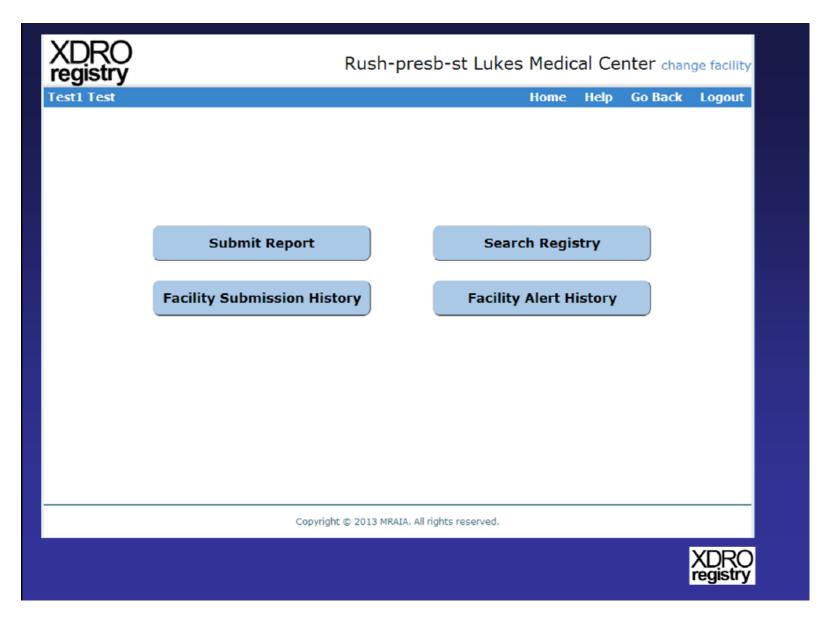
User Sign-In

Security (s	how explanation)
	This is a public or shared computer This is a private computer
	I want to change my password after logging on
system you disclosed fo prosecution	**Warning! Unauthorized access is prohibited** tess is limited to authorized users only. By accessing or using this test are consenting to monitoring and recording, which may be are administrative, disciplinary, civil, or criminal actions, penalties, or the users should have no expectation of privacy when accessing or system or any of its components.
system you disclosed fo prosecution	tess is limited to authorized users only. By accessing or using this are consenting to monitoring and recording, which may be or administrative, disciplinary, civil, or criminal actions, penalties, or business should have no expectation of privacy when accessing or
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XDRO registry



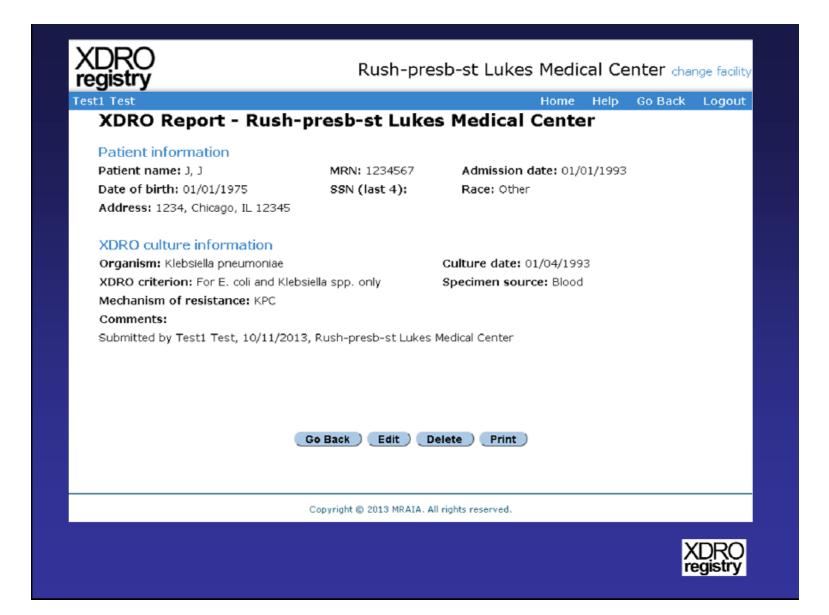


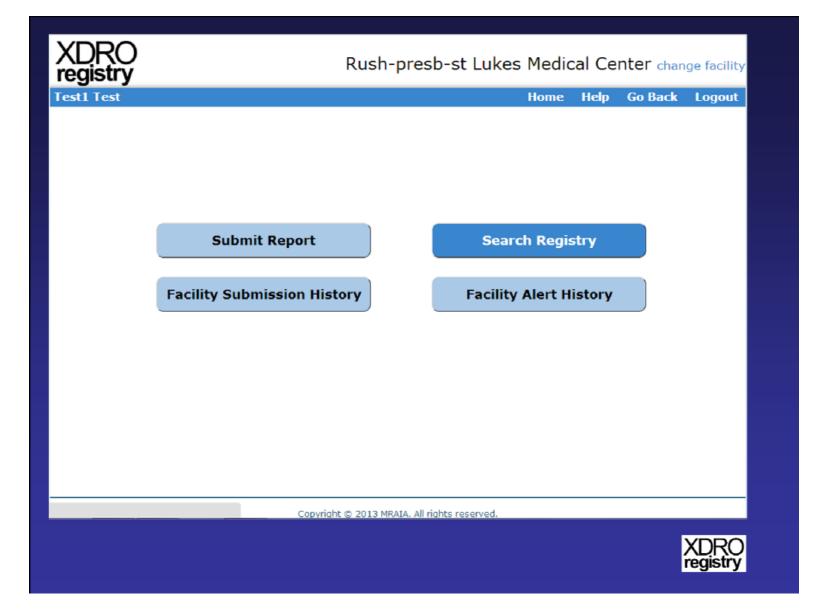


registry	Rush-presb-st Lukes	Medical Center change facility
st1 Test		Home Help Go Back Logout
	XDRO Report	
Facility information		
Facility name Rush-presb-st Lukes Medical Center	Patient MRN	* Date of admission
Patient demographics		
* First name	* Last name	Maiden name(if applicable)
* Gender Male Female	* Date of birth(mm/dd/yyyy) mm / dd / yyyy	Social Security Number(last4)
Race Please Select One:	Ethnicity Hispanic or Latino Not Hispanic or Latino	
* Street address	* City * County Chicago Cook	* State * Zip code
XDRO culture information		
Organism name(genus/species) Please Select Organism:	* Date (culture acquisition)	XDRO criteria Molecular test (e.g. PCR) specific for carbapenemase Phenotypic test (e.g. Modified
Specimen source Please Select Specimen:	Mechanism of resistance, if known Please Select Mechanism	Hodge) specific for carbapenemase production For E. coli and Klebsiella spp. only Resistant to all 3rd generation cephalosporin antibiotics tested and
Comments		resistant to a carbapenem antibiotic
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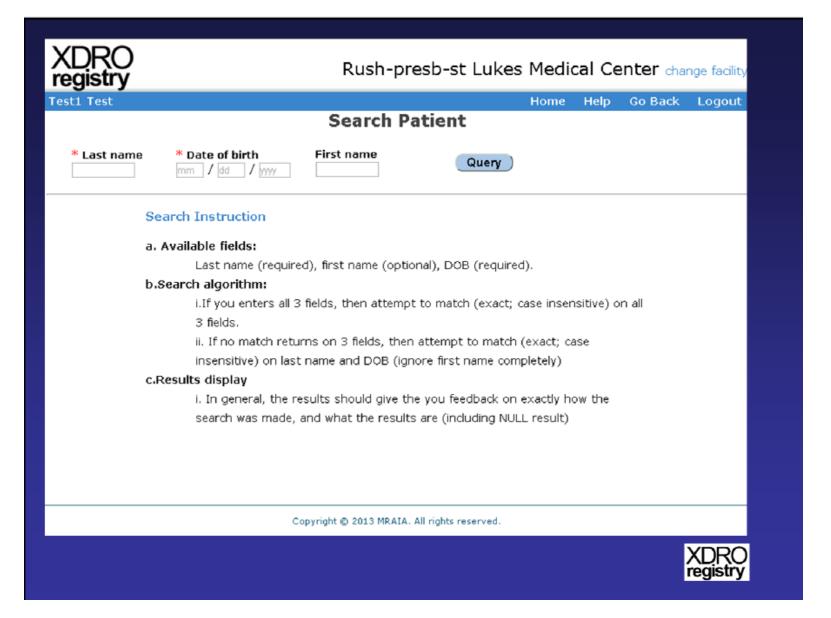
st1 Test		Home Help Go Back Logout
	XDRO Report	
acility information		
Facility name	* Patient MRN	* Date of admission
Rush-presb-st Lukes Medical Center		mm / dd / lyyyy
Patient demographics		
* First name	* Last name	Maiden name(if applicable)
* Gender Male Female	* Date of birth(mm/dd/yyyy)	Social Security Number(last4)
Race	Ethnicity	
Please Select One:	Hispanic or Latino	
* Storest address	Not Hispanic or Latino Cltv County County	* State
• Street address	Chicago Cook	* State * Zip code
Organism name(genus/species) Please Select Organism Please Select Organism Ottrobacter froundil	* Date (culture acquisition)	XDRO criteria Molecular test (e.g. PCR) specific for carbapenemase Phenotypic test (e.g. Modified Hodge
Citrobacteri koseri Citrobacter spp. Enterobacter serogenes Enterobacter cloacae Enterobacter spp. Escherichia coli Klebsiella oxfoca	Mechanism of resistance, if known Please Select Mechanism:	specific for carbapenemase production For E. coll and Klebslella spp. only: Resistant to all 3rd generation cephalosporin antibiotics tested and resistant to a carbapenem antibiotic
Con Klebsiella pneumoniae Klebsiella spp. Morganella morganii Pantoea aggiomerans Proteus mirabilis Proteus spp. Providencia stuartii Providencia spp. Salmonella spp. Serratia marcescens Serratia spp.	CANCEL) SAVE DRAFT) SUBMIT	

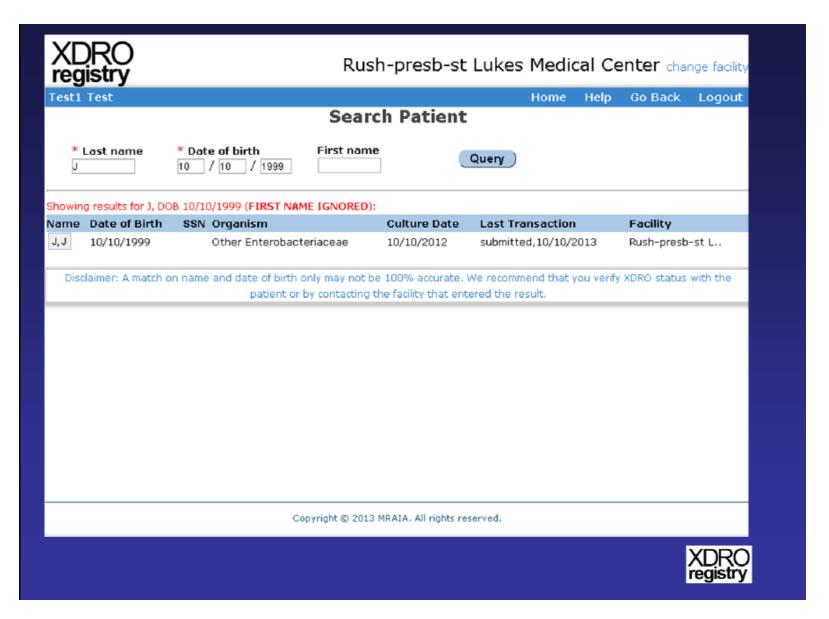
est1 Test		Home Help Go Back Logout
	XDRO Report	
Facility information		
Facility name Rush-presb-st Lukes Medical Center	* Patient MRN	* Date of admission
Patient demographics		
* First name	* Last name	Maiden name(if applicable)
Gender Male Female	* Date of birth(mm/dd/yyyy) mm / dd / yyyy	Social Security Number(last4)
Race Please Select One:	Ethnicity Hispanic or Latino Not Hispanic or Latino	
Street address	* City * County Chicago Cook	* State * Zip code
XDRO culture information		
Organism name(genus/species) Please Select Organism:	* Date (culture acquisition)	XDRO criteria Molecular test (e.g. PCR) specific for carbapenemase Phenotypic test (e.g. Modified
Specimen source Please Select Specimen:	Mechanism of resistance, if known Please Select Mechanism	Hodge) specific for carbapenemase production For E. coli and Klebsiella spp. only
	Please Select Mechanism: KPC (Klebsiella pneumoniae carbapenemase) NDM-1 (New Delhi Metallo-S-lactamase)	Resistant to all 3rd generation cephalosporin antibiotics tested and resistant to a carbapenem antibiotic
Comments	OXA Other Unknown	
	No.	



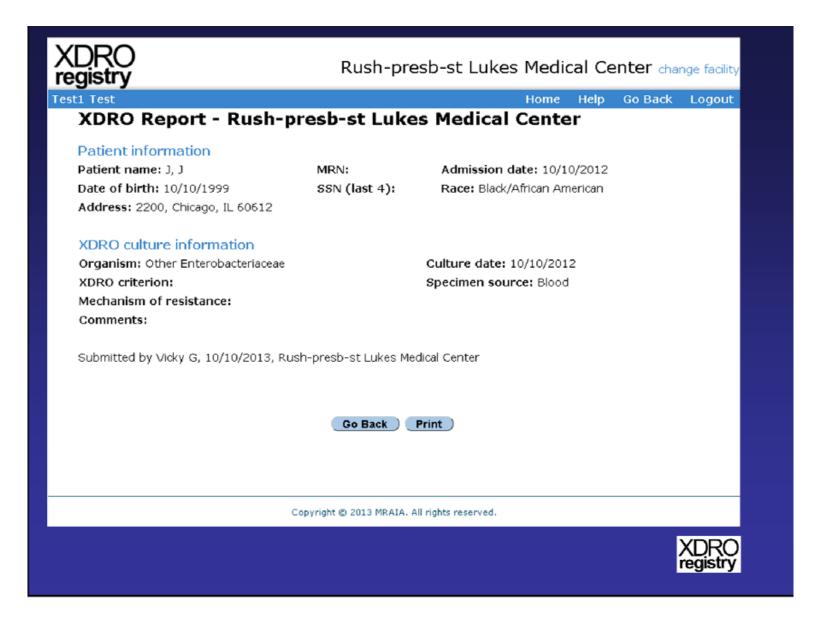


Source: https://www.xdro.org/XDRO_registry_webinar.pdf





Source: https://www.xdro.org/XDRO_registry_webinar.pdf



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So, how is all of this relevant to long term care facilities?



Knowledge is Key to Interrupting Transmission

- Routine query of the Registry for each admission
 - Can plan for resident placement ahead of time
 - Doesn't rely on communication from the transferring facility
 - Allows for timely initiation of precautions
 - May result in fewer resident room changes
- Can assist if cohorting is necessary
 - Identifies the mechanisms of resistance

Who Should Have Access?

Admissions coordinators

DON and/or ADON

Infection preventionist

Others involved in the admission process

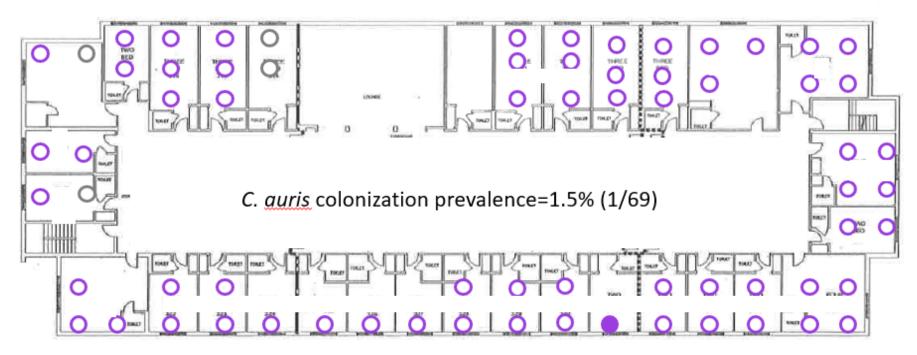
Ignorance is not bliss





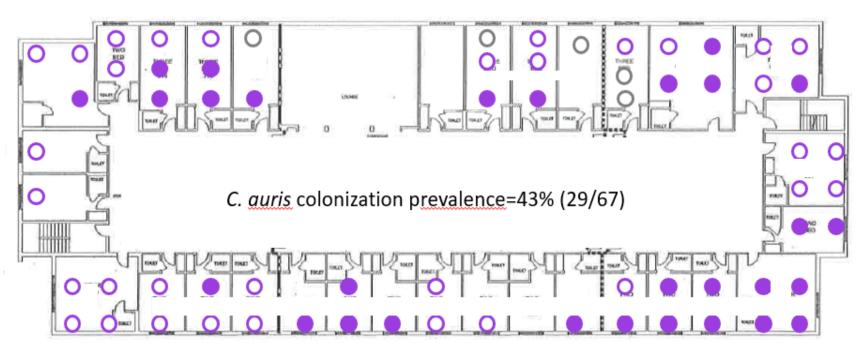


vSNF A Ventilator/Trach Floor March 2017 *C. auris* PPS Results



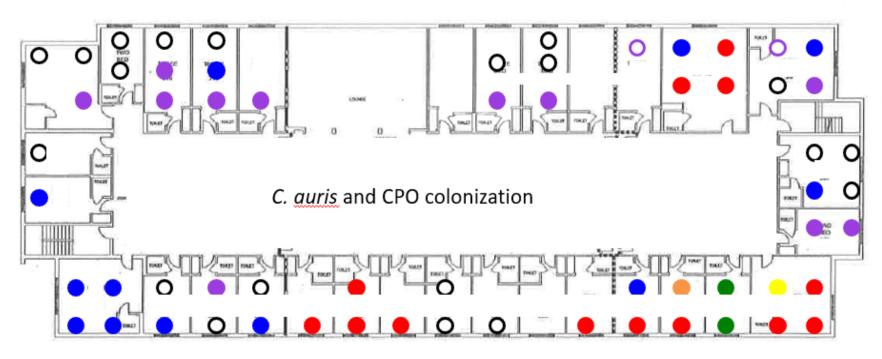
- C. auris positive
- Screened negative for C. <u>auris</u>
- Not tested for C. <u>auris</u> (refused or not in room)

vSNF A Ventilator/Trach Floor January 2018 *C. auris* PPS Results



- C. auris positive
- Screened negative for C. auris
- Not tested for C. <u>auris</u> (refused or not in room)

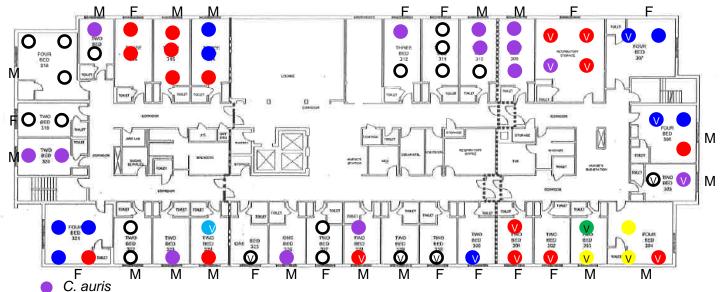
vSNF A Ventilator/Trach Floor January 2018 CPO and *C. auris* PPS Results



- C. auris
- C. auris and KPC
- KPC or CRE with unknown mechanism of resistance
- C. auris, KPC, and NDM
- C. auris, VIM-CRPA, and KPC
- C. auris and KPC-CRPA

- O Screened negative for *C. auris*, but not tested for CRE
- O Screened negative for CRE and C. auris

vSNF A Ventilator/Trach Floor March 2018 CPO and *C. auris* PPS Results



- C. auris and KPC CRE
- KPC CRE or CRE with unknown mechanism of
- resistance
- C. auris, KPC, and NDM
- C. auris, VIM-CRPA, and KPC
- C. auris and KPC-CRPA VIM-CRPA and KPC

- O No known CRE or C. auris
- Bed held for hospitalized resident?



SOURCE: AR Investment Map: www.cdc.gov/ARinvestments

Conclusions

- Confirm that identified cases are reported
- Build a bench of team players who have XDRO Registry access
- Hardwire the process of checking the XDRO Registry with each admission
- Use the XDRO Registry to help inform resident placement
- Ensure environmental cleaning/disinfection and hand hygiene basics are implemented

Discussion and Questions

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