Carbapenem-resistant *Enterobacterales* and *Candida auris* Public Health Surveillance Report

April-June 2023

	C	arbap	enem-resistant Enter	obacterales (C	RE): April-	–June	2023			
Carbapenemase-Producing (CP)		CRE Counts, by Genus Species and Mechanism (n=71)								
Status of Confirmed Cases			Genus Species	Total CRE n (%)	Total CP-CRE	КРС	NDM	OXA-48	IMP	VIM
CP-CRE	39 (55	5%)	Klebsiella pneumoniae	24 (34)	17	16	1	1		
Non-CP CRE	12 (17%)		Enterobacter cloacae	18 (26)	5	3	3	-		
CP Status Pending/ Not Tested	20 (28%)		Escherichia coli	14 (20)	10	4	4	3		
			Citrobacter koseri	4 (6)	3	3				
Total Confirmed	74		Enterobacter aerogenes	2 (3)						
CRE Cases	71		Klebsiella oxytoca	2 (3)	1		1			
CP testing capabilities of 15			Serratia marcescens	2 (3)						
clinical laboratories in Philadelphia		Klebsiella aerogenes	1 (1)							
Detection Method		n (%)	Other Proteus spp.	1 (1)	1		1			
Carba NP, Modified Hodge, or other phenotypic testing only		2 (13)	Providencia spp.	1 (1)	1		1			
PCR or other genotypic testing 4 (2		4 (27)	Raoutella spp.	1 (1)	1		1			
No regular CP testing		9 (60)	Raoultella ornithinolytica	1 (1)						
5 6		1 , ,	Total	71	39 ¹	26	12	4	0	0

¹not all isolates sent for mechanism testing, some isolates have more than one mechanism

CRE Cases, by Carbapenemase-Producing (CP) Status: July 2022—June 2023



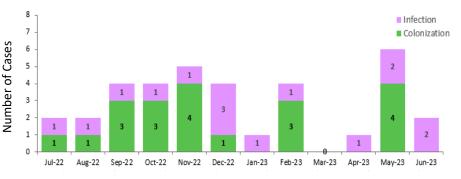
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Candida auris Cases in Philadelphia by Month/Year Colonization = 20

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Infection = 15



Candida auris continues to be an emerging threat in the southeastern PA and Philadelphia regions. The first *C. auris* case in PA was reported in March 2020 and since then, cases of both infection and colonization continue to rise. The majority of colonization cases appear in local healthcare facility clusters. For more information, see the joint <u>PDPH AND</u> <u>PADOH Health Alert</u> or the *C. auris* webpage on the PDPH Health Information Portal.

Suspected or confirmed cases of *C. auris* should be reported to PDPH by calling 215-685-6748 within 24 hours. Complete the <u>*Candida auris* Report Form</u> and fax to 215-238-6947 <u>after</u> <u>reporting the case by phone</u>.