National Center for Emerging and Zoonotic Infectious Diseases



Algorithm to identify *Candida auris* based on phenotypic laboratory method and initial species identification

PURPOSE

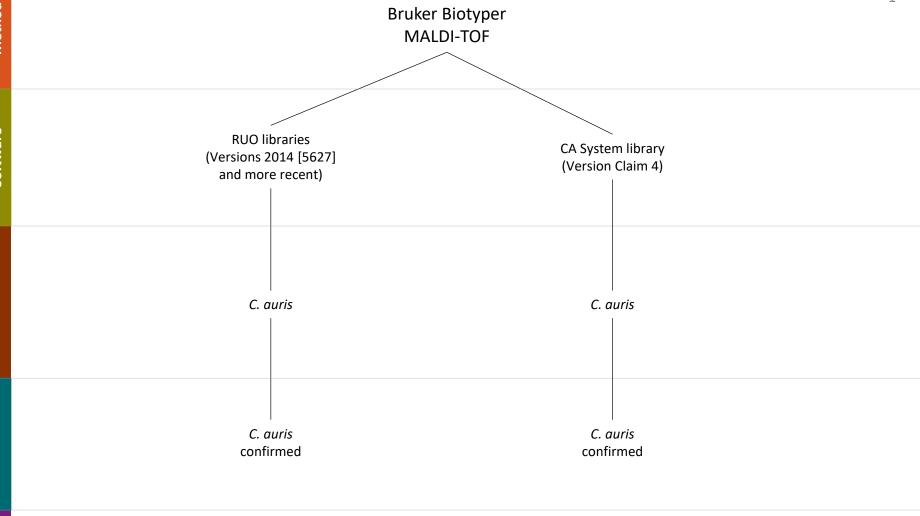
Candida auris is a multidrug-resistant yeast that has been found in multiple countries, including the United States. *C. auris* can cause invasive infections, be passed from person to person, and persist in the environment. Its severity, communicability, and drug resistance makes correctly identifying *C. auris* crucial to treating patients and preventing infections. However, this is challenging because traditional phenotypic methods frequently misidentify *C. auris*. This algorithm details the steps needed to determine the correct *Candida* spp. based on the tests and equipment available in your lab.

TABLE OF CONTENTS - ALGORITHMS BY METHOD

- 1. Bruker Biotyper MALDI-TOF
- 2. bioMérieux VITEK MS MALDI-TOF
- 3. VITEK 2 YST
- 4. API 20C
- 5. API ID 32C
- 6. BD Phoenix
- 7. MicroScan
- 8. RapID Yeast Plus
- 9. GenMark ePlex Blood Culture Identification Fungal Pathogen (BCID-FP) Panel
- 10. Summary of this algorithm in table form

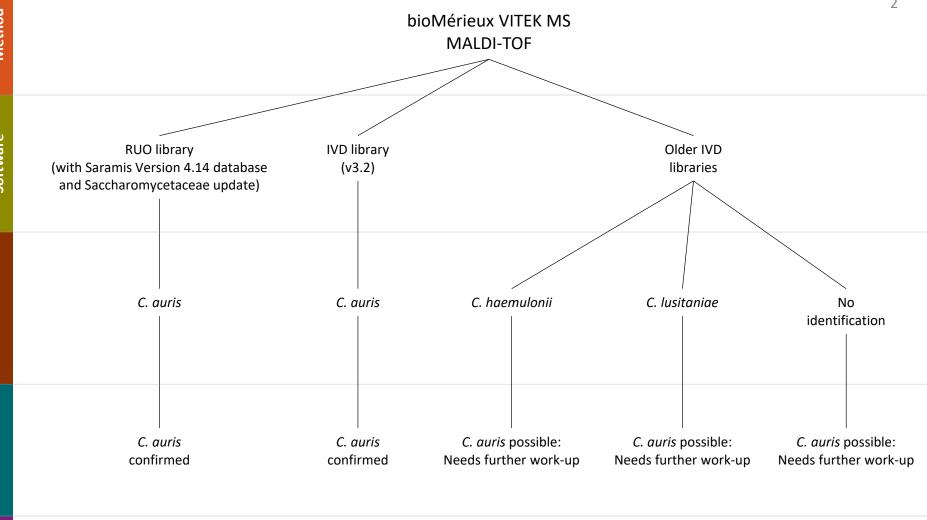
Please note that these algorithms are based on our current knowledge about misidentification of C. auris and may change as we learn new information.



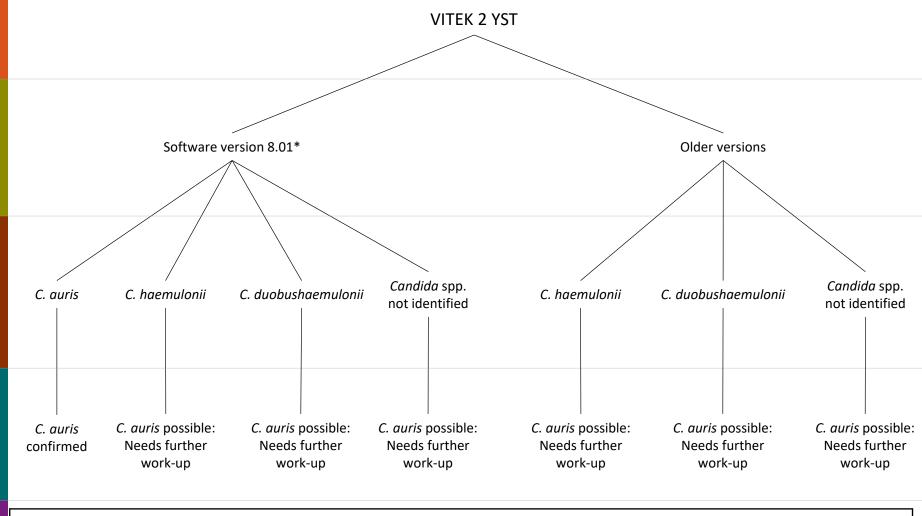


Place patient in transmission-based precautions, report to CDC (candidaauris@cdc.gov), and notify state and local health departments.





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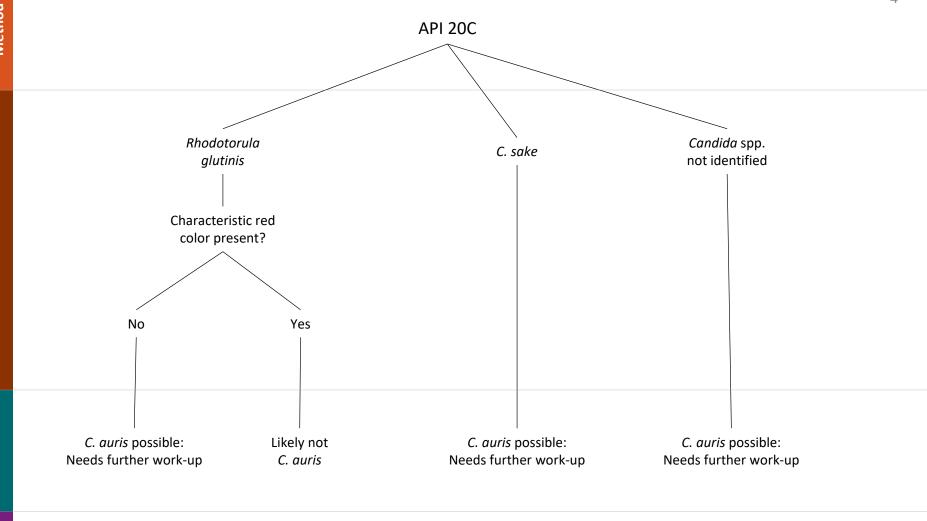


Place patient in transmission-based precautions, report to CDC (candidaauris@cdc.gov), and notify state and local health departments.

C. auris possible:

Further work-up needed to determine if actually *C. auris*. Send isolates to a reference lab, a state public health lab, a regional lab, or CDC for further identification. Place patient in transmission-based precautions and notify state and local health departments and CDC (candidaauris@cdc.gov).

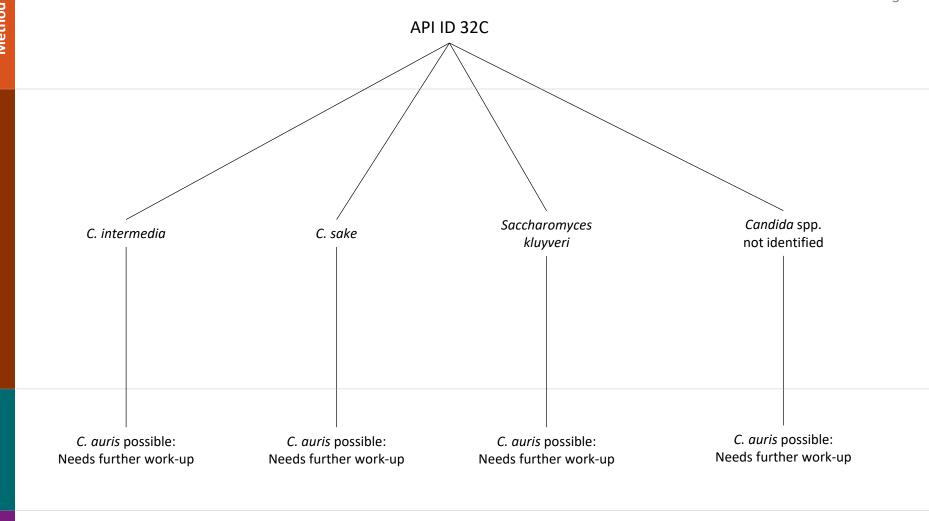
* There have been reports of *C. auris* being misidentified as *C. lusitaniae* and *C. famata*. A confirmatory test such as cornmeal agar may be warranted for these species.



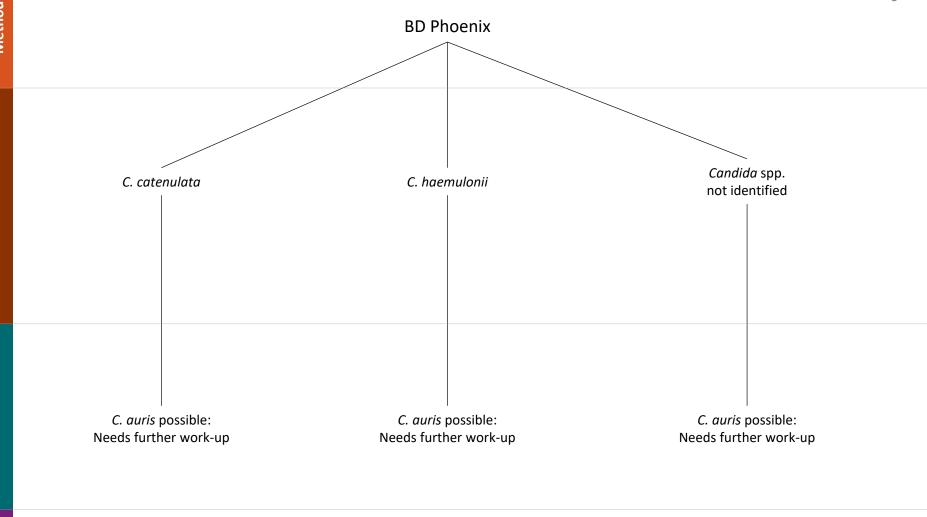
Place patient in transmission-based precautions and notify state and local health departments and CDC (candidaauris@cdc.gov). Send any isolates suspected to be *C. auris* to a reference lab, a state public health lab, a regional lab, or CDC for further identification.

Likely not C. auris:

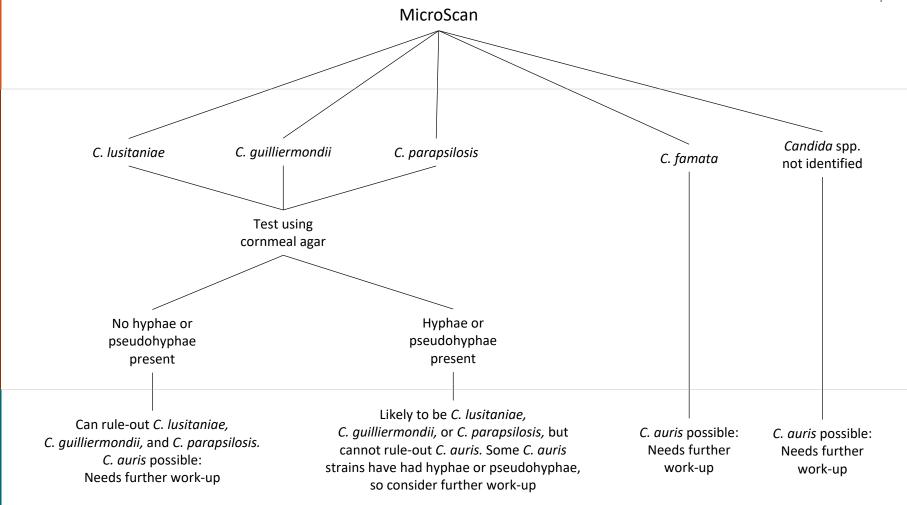
No further *C. auris*-related action required.



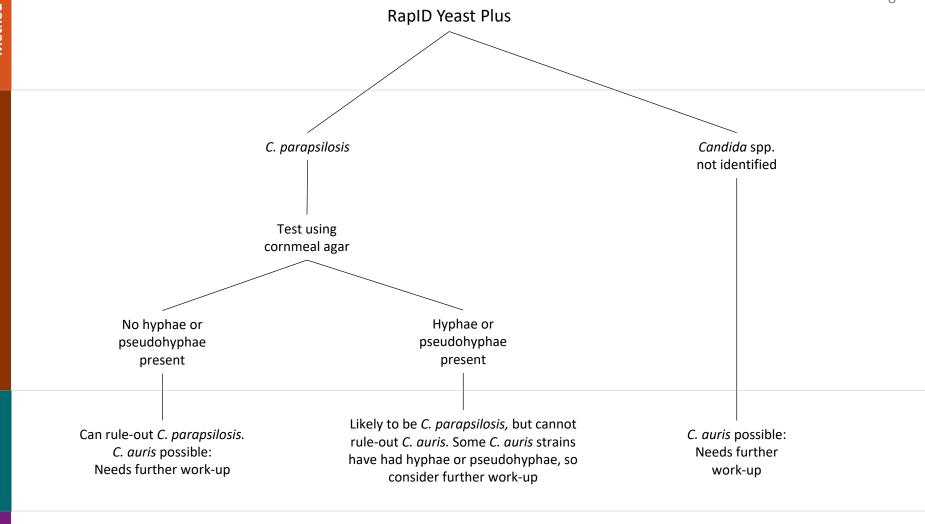
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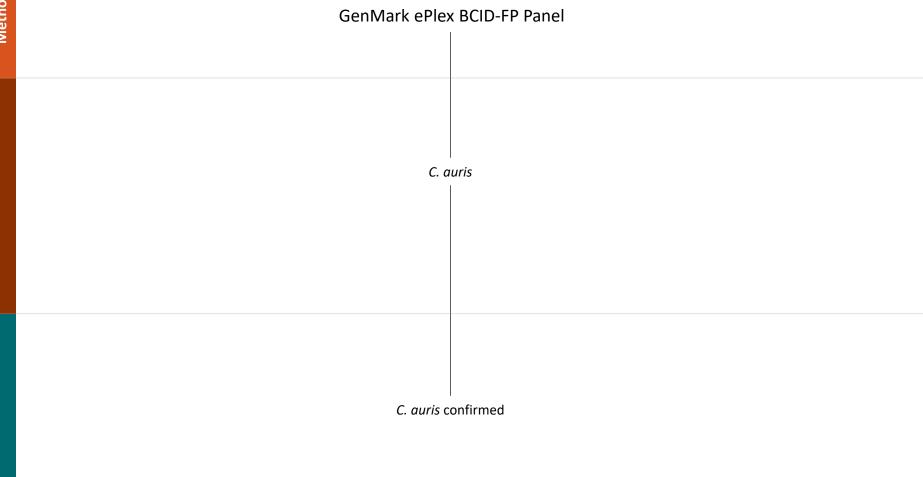
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 $Place\ patient\ in\ transmission-based\ precautions,\ report\ to\ CDC\ (candidaauris@cdc.gov),\ and\ notify\ state\ and\ local\ health\ departments.$

Identification Method	Database/Software, if applicable	C. auris is confirmed if	C. auris is possible if the following initial identifications
		initial identification is	are given. Further work-up is needed to determine if
		C. auris.	the isolate is <i>C. auris</i> .
Bruker Biotyper MALDI-TOF	RUO libraries (Versions 2014 [5627] and more recent)	C. auris	n/a
	CA System library (Version Claim 4)	C. auris	n/a
bioMérieux VITEK MS MALDI- TOF	RUO library (with Saramis Version 4.14 database and		
	Saccharomycetaceae update)	C. auris	n/a
	IVD library (v3.2)	C. auris	n/a
			C. haemulonii
			C. lusitaniae
	Older IVD libraries	n/a	No identification
VITEK 2 YST			C. haemulonii
			C. duobushaemulonii
	Software version 8.01*	C. auris	Candida spp. not identified
			C. haemulonii
			C. duobushaemulonii
	Older versions	n/a	Candida spp. not identified
API 20C			Rhodotorula glutinis (without characteristic red color)
			C. sake
		n/a	Candida spp. not identified
API ID 32C		, -	C. intermedia
			C. sake
		n/a	Saccharomyces kluyveri
BD Phoenix		, =	C. catenulata
			C. haemulonii
		n/a	Candida spp. not identified
		.,, -	C. lusitaniae**
MicroScan			C. guilliermondii**
			C. parapsilosis**
			C. famata
		n/a	Candida spp. not identified
RapID Yeast Plus		πγα	C. parapsilosis**
		n/a	Candida spp. not identified
GenMark ePlex BCID-FP Panel		C. auris	n/a
	ris being misidentified as C. Jusitaniae and C. famata an VITEV 3		,
* There have been reports of <i>C. auris</i> being misidentified as <i>C. lusitaniae</i> and <i>C. famata</i> on VITEK 2. A confirmatory test such as cornmeal agar may be warranted for these species. ** <i>C. quilliermondii, C. lusitaniae,</i> and <i>C. parapsilosis</i> generally make hyphae or pseudohyphae on cornmeal agar. If hyphae or pseudohyphae are not present on cornmeal agar, the isolate			
C. gainiermonai, C. iustraniae, and C. parapsinosis generally make hypriae or pseudohypriae or pseudohypriae or pseudohypriae or pseudohypriae or pseudohypriae are not present on confined agai, the isolate			

should raise suspicions of being *C. auris* as *C. auris* typically does not make hyphae or pseudohyphae. However, some *C. auris* isolates have formed hyphae or pseudohyphae. Therefore, it would be prudent to consider any *C. guilliermondii*, *C. lusitaniae*, and *C. parapsilosis* isolates identified on MicroScan and any *C. parapsilosis* isolates identified on RapID Yeast Plus as possible

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If C. auris is confirmed: Place patient in transmission-based precautions, report to CDC (candidaauris@cdc.gov), and notify state and local health departments.

identification. Place patient in transmission-based precautions and notify state and local health departments and CDC (candidaauris@cdc.gov).

If C. auris is possible: Further work-up is needed to determine if actually C. auris. Send isolates to a reference lab, a state public health lab, a regional lab, or CDC for further

C. auris isolates and further work-up should be considered.