



Click to learn about Multi-site Gram-negative Surveillance Initiative

Organism

CRE CRAB

Topic

Case Rates

Death Rates

Year

All

View By

All cases

Select all

All cases

Candida bloodstream infections (Candidemia)

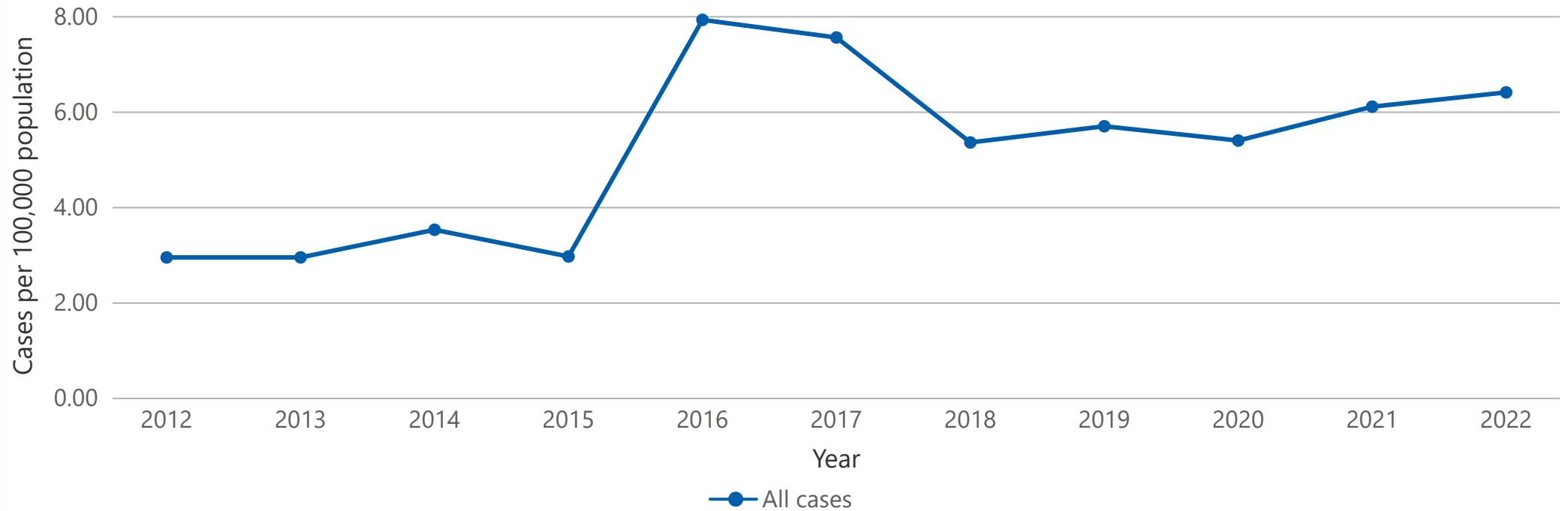
Clostridioides difficile infections

Invasive *Staphylococcus aureus* infections

Multi-site Gram-negative Surveillance Initiative

HAIC Viz

Rates of CRE in HAIC surveillance area
All cases



Note:

From 2012–2015, the phenotypic surveillance definition for Carbapenem-resistant Enterobacterales (CRE) was: an intermediate or resistant antimicrobial susceptibility test result for ≥ 1 carbapenem (doripenem, imipenem, or meropenem) and a resistant antimicrobial susceptibility test result for all third generation cephalosporins (ceftazidime, ceftriaxone, and cefotaxime) tested. Since 2016, the phenotypic surveillance definition is: a resistant antimicrobial susceptibility test result for ≥ 1 carbapenem (doripenem, ertapenem, imipenem, or meropenem). The minimum inhibitory concentrations or zone diameters reported by the local clinical laboratories were used to classify isolates.

Surveillance areas have changed over time. The number of EIP sites participating in surveillance is as follows: 2012 – 3 sites; 2013 – 7 sites; 2014–2016 – 8 sites; 2017 – 9 sites; 2018 to present – 10 sites.

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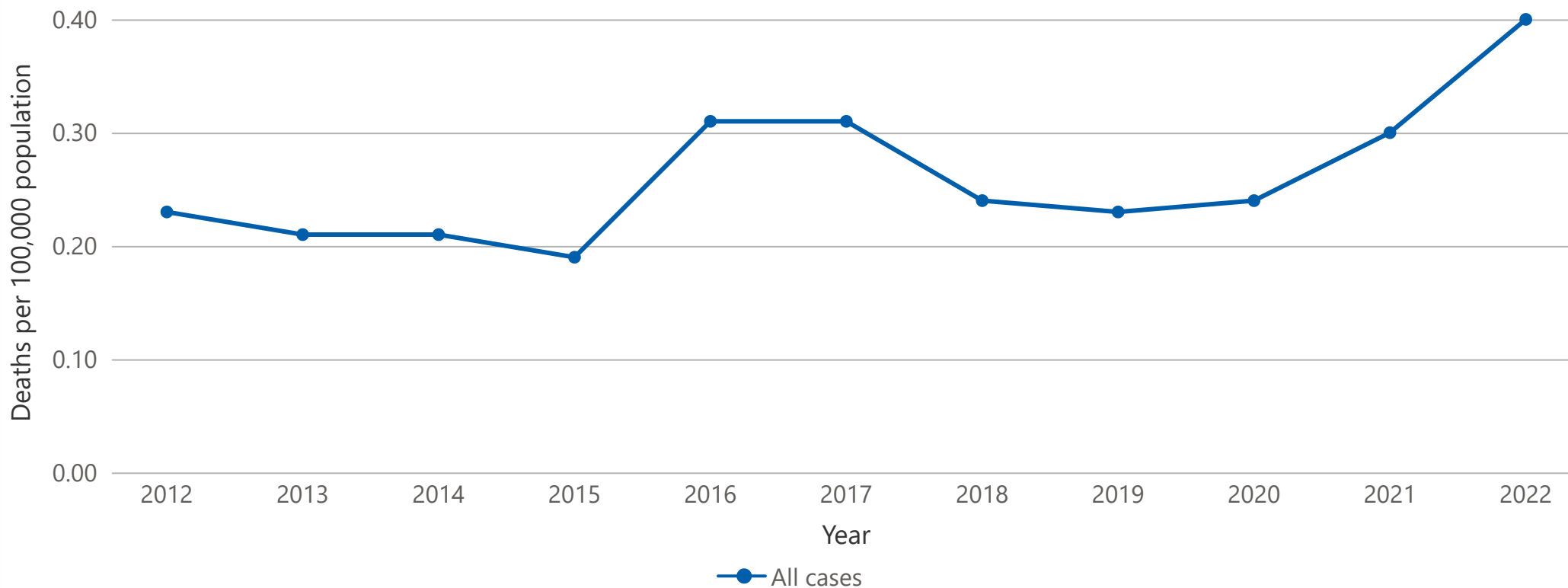
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HAIC Viz



Rates of death among cases with CRE in HAIC surveillance area



Note:

From 2012 through 2015, carbapenem-resistant Enterobacteriales (CRE) were defined by the following antimicrobial susceptibility test (AST) results: intermediate (I) or resistant (R) to ≥ 1 carbapenem (excluding ertapenem) and R to all 3rd generation cephalosporins tested. Since 2016, CRE are defined as R to ≥ 1 carbapenem (including ertapenem). AST results from clinical laboratories are used to classify isolates. Vital status was assessed in the following way for patients in the following healthcare facilities: for patients admitted to a hospital, vital status was assessed at the time of discharge; for patients that were in a long-term care facility, long-term acute care facility, or seen at an outpatient dialysis center, vital status was assessed 30 days after incident culture collection; for all other patients, vital status was ascertained using medical records from the healthcare facility encounter (e.g., outpatient medical record) associated with the incident culture.

[Methods](#) have changed over time. [Surveillance areas](#) have changed over time. The number of EIP sites participating in surveillance is as follows:



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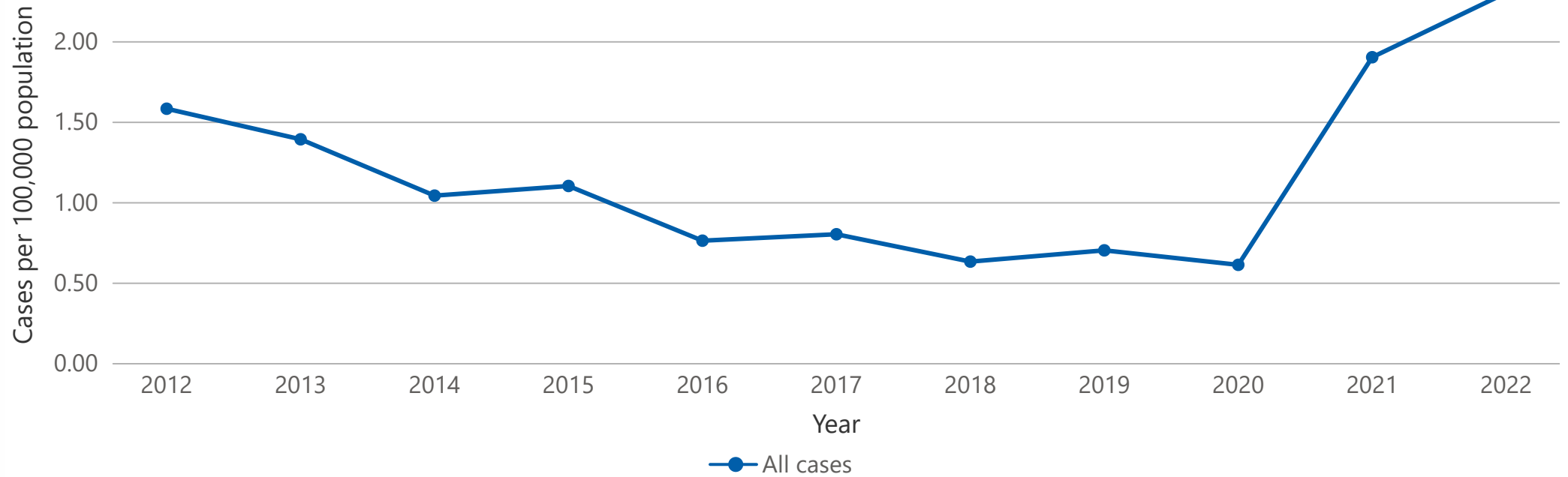
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HAIC Viz



Rates of CRAB in HAIC surveillance area All cases



Note: [\[🔗\]](#) Carbapenem-Resistant *Acinetobacter baumannii* (CRAB)

[Surveillance areas](#) have changed over time. The number of EIP sites participating in surveillance is as follows: 2012- 3 sites; 2013- 7 sites; 2014- 2017-8 sites; 2018 to present- 9 sites. Starting in 2021, the case definition expanded to include wound and lower respiratory tract specimens, which resulted in a higher incidence rate than in previous years.

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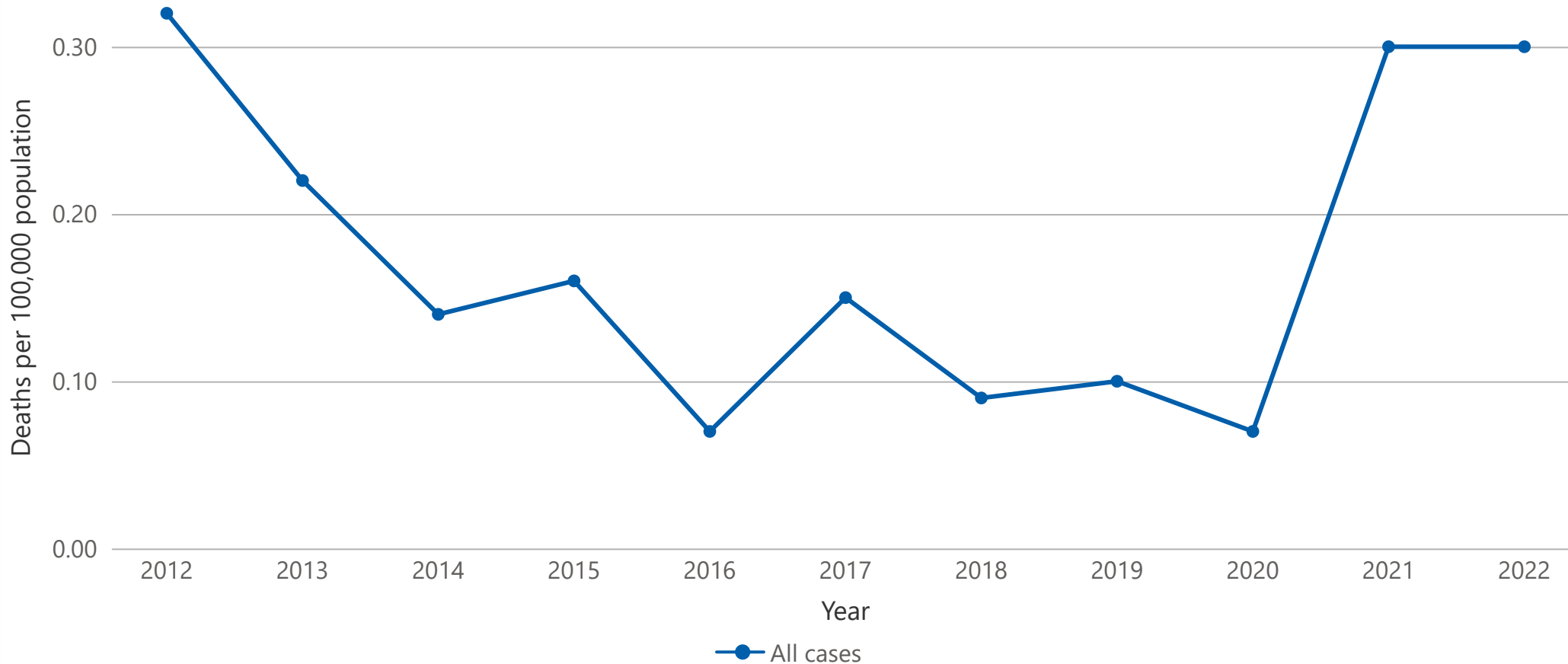
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Rates of death among cases with CRAB in HAIC surveillance area



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