## Candida auris Point-Prevalence Survey Guidance:

## **Specimen Collection and Shipping Procedures**

## PURPOSE

This guideline will aid in collecting and shipping specimens collected for *Candida auris* colonization screening. To ensure we are obtaining accurate results, proper sampling and handling is critical. Please follow the processes provided below to ensure accuracy.

# LOGISTICS

The Utah Department of Health coordinates facility point-prevalence screenings **prior** to specimen collection. For any additional questions or concerns, please contact your local health department designee.

## **SPECIMEN COLLECTION**

## EQUIPMENT AND MATERIALS NEEDED FOR COLLECTION:

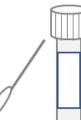
1. Appropriate personal protective equipment (PPE) as indicated by the patient's clinical care team (*e.g.,* gloves, gowns, masks).







2. Specimen collection and transport system (*e.g.*, rayon tip or nylon-flocked eswab collection device and individual biohazard bag, parafilm, etc).















### PROCEDURE

- 1. The individual/proxy MUST provide informed consent and understand the collection procedure of a *Candida auris* skin (axilla/ groin) swab.
- 2. Before beginning, perform hand hygiene and wear appropriate PPE, as indicated by the patient's clinical care team (*e.g.,* gloves, gowns, masks).
- 3. For labeling, carefully remove the tube from the plastic packaging and label the tube (see LABELING INSTRUCTIONS section).
- 4. For the swab, open the outer plastic packaging on the end that says "PEEL HERE," **OPPOSITE END** from the soft tip.
- 5. Pull the swab from the plastic packaging, being careful not to touch the soft tip with your hands or on any other surfaces.
- 6. Firmly rub both sides of the soft end of the swab in a back and forth motion across the left axilla skin surface 3 to 5 times. Then using the same swab proceed to the right axilla (Note: target the crease in the skin where the arm meets the body).
- 7. Using the same swab and motion used on the axilla, rub both sides of the swab across the left groin skin surface 3 to 5 times. Then using the same swab, proceed to the right groin skin surface (Note: target the inguinal crease in the skin where the leg meets the pelvic region [hip crease]). Please note: a small amount of the liquid transport medium in the tube can be used to moisten the swab prior to collection)



- 8. Remove the cap from the collection tube and place the soft end of the swab into the tube. Be careful to keep the cap from touching any materials that may contaminate your sample.
- 9. Snap off the end of the swab at the marked line by bending the plastic handle against the edge of the collection tube. See **Appendix A.** for further details). Close the screw top lid tightly and seal specimen cap with parafilm.



10. Ensure specimen tube is labeled correctly (see **LABELING INSTRUCTIONS** section) and place the tube in its individual biohazard bag with absorbent pad.





## **LABELING INSTRUCTIONS:**

Specimen tube **MUST** be clearly labeled with:

- Patient's full name
- Date of birth
- Date of specimen collection (MM/DD/ YYYY)

### SHIPPING LOGISTICS: SPREADSHEET REQUISITION FORM/INDIVIDUAL REQUISTION FORMS

When all of the specimens are collected, please follow the packaging and shipping guidance and instructions for shipping and packaging and generating the FedEx label.

The Utah Department of Health has provided two options:

#### **OPTION 1 INDIVIDUAL REQUISITION FORMS**

STEP 1. Single requisition forms can be downloaded from the Utah AR Lab website by following the link: <u>https://uphl.utah.gov/</u>wp-content/uploads/ARLN\_Test\_Request\_Form\_Updated.pdf

STEP 2. Fill out all of the demographic data elements requested on the form and check the option : "*Candida auris* Colonization Screening"

STEP 3. Place each individually parafilmed sample into a separate specimen bag in the main compartment with absorbent pad and seal and place the corresponding completed requisition form in the separate document pouch.









## **OPTION 2 SPREADSHEET/ELECTRONIC BATCH UPLOAD**

STEP 1. The Utah Department of Health emailed you a spreadsheet that can be used as a line list and requisition form for the point prevalence survey or you can use an electronic upload through the ETOR portal.

STEP 2. Open the Microsoft Excel spreadsheet and complete the requested facility information and ALL of the data elements requested for each of the collected specimens. **USE A SEPARATE LINE FOR EACH SPECIMEN TYPE COLLECTED**. If there are multiple specimen types for the same patient, please use separate lines for skin (e.g., axillary/groin), sputum and wound collection sites.

STEP 3. Place each parafilmed sample into a SEPARATE compartment of a multiple shuttle vial sleeve (see below). Fold the vial sleeve at the arrow and seal the corners so that each specimen is sealed in its own individual compartment.

STEP 4. Prior to shipping, please return the completed spreadsheet by email to **arinutah@utah.gov Place a copy of the completed spreadsheet in the box** along with the collected samples. If using electronic portal, upload spreadsheet into ETOR portal using batch upload.



Individual eswabs sealed in separate compartments of vial sleeve





## PREPARING SHIPPING LABEL THROUGH FEDEX ACCOUNT

Specimens are shipped using the following information:

STEP 1. Go to: www.fedex.com and choose the United States Location.

STEP 2. Click on "SHIP" in the middle of the screen or the "Create Shipment" under the "Shipping" tab in the top ribbon of the webpage.



STEP 3. Login using the following user ID and password.

| I I a an ID. ADI Italia a banatana     |  |  |
|--|--|--|
| User ID: ARUtahLaboratory              | Registered fe  | edex.com Users   |
| *Password will be sent by secure email | IMPORTANT For best results, please disable your pop-up blocker. Enter your user ID and password to login     * User ID ARUtahLaboratory     * Password |  |
|  | * Login to   | <ul> <li>FedEx Ship Manager™ Lite ? NEW</li> <li>FedEx Ship Manager™ at fedex.com ?</li> <li>Remember my user ID on this computer.</li> <li>orgot/Reset your password or user ID?</li> </ul> |

\*\*Note this login information is NOT to be distributed or shared, unless given permission from Utah Department of Health HAI (Health Care-Associated Infections) Program. If there is unauthorized use of the account, the username and password will be changed and will no longer be distributed to your facility.

#### STEP 4. Click on "Edit" button in box "1. From"

| My Shipment Profiles                            |        | ⊘ <u>Help</u> ⊡ <u>Hide</u> |
|---|--------|-----------------------------|
| My shipment<br>profiles (formerly<br>Fast Ship) | Select | <b></b>                     |
|   |        | Ship                        |
| 1. From   |        | ⊘ <u>Help</u> ⊞ <u>Edit</u> |
|   |        |                             |





Login

#### **STEP 5.** Type in the following information:

- Company Name (Your Facility)
- Contact Name (Your Facility Contact Person)
- Company Street Address (Your Facility Address)
- Zip code (Your Facility Zip Code)
- City \*\*Note: This box should auto-populate)
- State \*\*Note: This box should auto-populate)
- Phone Number (The best number to call if there are shipment issues)

| 1. From             | ⊘ <u>Help</u> ⊟ <u>Hide</u>       |
|---------------------|-----------------------------------|
| Saved senders       | Select T                          |
| * Country/Territory | United States                     |
| Company             | Select or enter                   |
| * Contact name      | Select or enter                   |
| * Address 1         |                                   |
| Address 2           |                                   |
| * ZIP               | Please enter the ZIP/Postal code. |
| * City              |                                   |
| * State             | Florida                           |
| * Phone no.         | ext.                              |
|                     | Save as my default address        |
|                     | Save new sender in address book   |

**STEP 6.** Click on the "Company" drop down arrow in box "2. To". Box 2 and select Utah Public Health Lab. It will auto-populate the appropriate shipping recipient information. Confirm your shipping recipient information is the same as "2" below

| 2. To               | ② <u>Help</u> ⊟ <u>Hide</u>          |   | 2. To                          |                        | ⊘ <u>Help</u> ⊡ <u>Hid</u> |
|---------------------|--------------------------------------|---|--------------------------------|------------------------|----------------------------|
| * Country/Territory | United States                        |   | * Country/Territory            | United States          | ۲                          |
| Company             | Select or enter                      |   | Company                        | Utah Public Health Lab | ······                     |
| * Contact name      |                                      |   | * Contact name                 | Utah Public Health Lab | ~                          |
|                     | Select or enter                      |   | * Address 1                    | 4431 South 2700 West   |                            |
| * Address 1         |                                      |   | Address 2                      |                        |                            |
| Address 2           |                                      |   | * ZIP                          | 84129                  |                            |
| * ZIP               |                                      |   | * City                         | TAYLORSVILLE           | ~                          |
| * City              | Select or enter                      |   | * State                        | Utah                   | ¥                          |
| * State             | Select V                             |   | * Phone no.                    | 8019652400 ex          |                            |
| * Phone no.         | ext.                                 |   | Perform detailed address check |                        |                            |
| Perform detailed ad | ddress check                         |   |                                | This is a residential  | address ②                  |
|                     | This is a residential address ②      |   |                                | Save new recipient     | in address book            |
|                     | □ Save new recipient in address book | R |                                | Save changes in ad     | ldress book                |

**STEP 7.** Type in approximate weight of box in box "3. Package & Shipping Details" and ensure "FedEx Standard Rate" pricing and "Priority Overnight" service type is selected

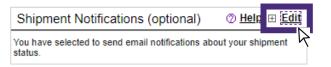
| 3. Package & Sł      | nipment Details                    | ⊘ <u>Help</u> ⊡ <u>Hide</u> |
|----------------------|------------------------------------|-----------------------------|
| * Ship date          | 12/06/2019                         |                             |
| * Number of packages | 1 •                                |                             |
| * Pricing option ②   | FedEx Standard Rate FedEx One Rate |                             |
| * Weight ②           | lbs                                |                             |
| Declared Value ②     | U.S. Dollars                       |                             |
| Service type         | Priority Overnight                 | <b>.</b>                    |
| * Package type       | Your Packaging                     | •                           |
| Dimensions           | Select                             | •                           |
|                      | Saturday delivery                  |                             |
|                      | Include a return label ②           |                             |
|                      |                                    |                             |





STEP 8. Confirm that box "4. Billing Details" has \*Bill transportation to CDC\_OID\_NCEZID\_ARLN-890 automatically selected.

| 4. Billing Details                 | @ <u>Help</u>                  | ⊡ <u>Hide</u> |
|------------------------------------|--------------------------------|---------------|
| * Bill transportation to           | CDC_OID_NCEZID_ARLN-890        | T             |
| () Alert: Please real information. | member to enter your reference |               |
| Your reference                     | Point Prevalence Survey        |               |
| More reference field               | ds                             |               |
| P.O. no.                           |                                |               |
| Invoice no.                        |                                |               |
| Department no.                     |                                |               |
|                                    |                                |               |



STEP 10. Under "Notify Sender via:" complete the following:

- Select Email (HTML)
- Select Ship, Estimated Delivery and Delivery under "Notification Type"
- Type ARLNUtah@utah.gov under "Sender Email"

| Shipment Notifications (d | optional)          |
|---------------------------|--------------------|
| Notify Sender via:        | Notification type  |
| Email (HTML)              | Ship               |
| Email (Plain Text)        | Tendered           |
|                           | Exception          |
|                           | Estimated Delivery |
|                           | Delivery           |
| Sender Email              |                    |
| ARLNUtah@utah.gov         |                    |
| English 🔻                 |                    |

STEP 11. Go down to box "5. Complete Your Shipment" and click "Ship"

**STEP 12.** The next screen will display a review of the shipment information. Review and click "Print". The screen will display a shipping label for you to print . Instructions for after printing the shipping label are enhanced upon in the "PACKAGING AND SHIPPING" section on page 4.





## PACKAGING AND SHIPPING

Using the box(es) provided, follow the steps provided below to ensure accuracy.

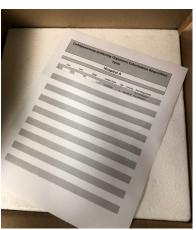
**STEP 1.** Place a small ice pack at the bottom of the Styrofoam box, but ensure there is an adequate amount of paper towels placed on top of the ice pack. The ice pack is serving as an "air conditioner" to ensure specimens remain cool and do not exceed "room temperature".

**STEP 2.** Place all biohazard bags with each individual specimen tube (and absorbent pad) into the box. Ensure all specimen tubes are properly labeled as covered in the "LABELING INSTRUCTIONS" section on page 2.

**STEP 3.** Close the cooler by placing lid on top and for the spreadsheet requisition option, tape the printed copy of the spreadsheet / requisition list on top of the cooler lid (if using spreadsheet/electronic requisition). Place list in a sealed specimen bag to ensure it remains dry.







**STEP 4.** Close the outer box and secure with clear packing tape.

**STEP 5.** Place the shipping label printed from FedEx on top of the box and secure with clear packing tape. To ensure integrity of the label in inclement weather conditions, cover the entire surface area with clear packing tape.







**STEP 6.** These specimens are classified as a "Biological Substance, Category B," therefore, this step **MUST** be adhered to. Place a UN 3373 "Biological Substance, Category B" label on one side of the box .



**STEP 7.** Ship out package via FedEx.

### LABORATORY NOTIFICATION AND COMMUNICATION

After the box is prepared, the next task is to notify the Mountain Region AR Lab (ARLNUtah@utah.gov) of the number of samples/ swabs

Follow the steps below:

**STEP 1.** Send an email to: arlnutah@utah.gov and mvowles@utah.gov and cc: lhsmith@utah.gov Once sent, the Mountain Region AR Lab will email final lab reports back to you after 7 days from specimen receipt.





## **SPECIAL CONSIDERATIONS PRIOR TO SHIPPING**

- Ensure employees responsible for packing and/or shipping specimens are properly trained on shipping "Biological Substance, Category B" specimens.
- Shipment of swabs collected on Monday through Friday between 8:00 a.m. to 4 p.m. should be shipped within 1-day of collection.
- Shipment of swabs collected on Friday after 2:30 p.m., Saturday through Sunday, or on a government holiday should be held for shipment until the next open business day (please see 2020 Mountain Regional ARLN Holiday Schedule to plan accordingly).
  - Swabs can be stored up to 4 days (96 hours) at room temperature. However, to ensure testing, the shipment **MUST** arrive at the ARLN Mountain Regional Lab **WITHIN** 4 days (96 hours) from the date of collection. Please keep in mind shipping during government holidays to alter your collection dates (e.g., 4-day government holidays [i.e., Thanksgiving week]), admission swabs should be collected on Saturday at 12:00 a.m. to ensure testing of the specimen.
- Packages containing biohazard Category B specimens should NEVER be dropped off at FedEx Express® Drop Box.

## **2020 AR UTAH MOUNTAIN REGIONAL LAB HOLIDAY SCHEDULE**

## HOLIDAY

## DATES OF OFFICE CLOSURE

| Christmas Day          | Wednesday, December 25, 2019 |
|------------------------|------------------------------|
| New Year's Day         | Wednesday, January 1, 2020   |
| Martin Luther King Day | Monday, January 20, 2020     |
| Washington's Birthday  | Monday, February 17, 2020    |
| Memorial Day           | Monday, May 25, 2020         |
| Independence Day       | Friday, July 3, 2020         |
| Pioneer Day            | Friday, July 24, 2020        |
| Labor Day              | Monday, September 7, 2020    |
| Columbus Day           | Monday, October 12, 2020     |
| Veterans Day           | Wednesday, November 11, 2020 |
| Thanksgiving           | Thursday, November 26, 2020  |
| Christmas Day          | Friday, December 25, 2020    |
| New Year's Day         | Friday, January 1, 2021      |





THE FOLLOWING GUIDE IS AN EXAMPLE ONLY, PLEASE CONSULT WITH YOUR ESWAB REPRESENTATIVE FOR CHANGES TO THIS GUIDE.

eSwab



ESwab is a liquid based multipurpose collection and transport system that maintains the viability of aerobic, anaerobic and fastidious bacteria for up to 48 hours. The ESwab system collects and releases more specimen, significantly improving patient test results and decreasing the need for repeat testing due to insufficient sample.

ESwab replaces multiple transport devices with just one system eliminating the need to stock multiple types of swabs.

#### ESWAB INSTRUCTIONS ESWAB IS EASY TO USE:

ESWAD IS EAST TO USE:

- Perform hand hygiene and put on gloves if necessary.
- Perform positive patient identification.
- · Open the peel pouch.
- Remove the swab.
- Collect the patient sample using the swab. Avoid touching the swab applicator below the pink molded breakpoint as this could lead to contamination and incorrect test results.
- Remove the screw cap from the tube and insert the swab all the way to the bottom of the tube.
- Holding the swab shaft close to the rim of the tube, and keeping the tube away from your face, break the applicator shaft at the pink breakpoint indication line.
- Screw the cap on tightly to prevent leakage.
- Dispose of the swab shaft in a regular trash receptacle.
- Apply patient identification label or write patient information on the tube label.
- Follow the standard operating procedures of transport and testing for your facility.
- Remove gloves if necessary and perform hand hygiene.

#### NOTE:

The ESwab Liquid Amies fluid maintains the viability of diverse bacteria. Do not send a dry ESwab as this will lead to unsatisfactory results.

If the tube spills its contents prior to inserting the swab, the liquid is non-toxic. Simply put the swab into another tube before sending it to the laboratory and discard the spilled tube.

If the tube spills after contamination, follow procedure for blood and body fluid clean up. Refer to your facility's infection control manual for further direction.

If contaminated fluid splashes onto the personnel collecting the sample, treat as a blood and body fluid exposure. Refer to your facility's infection control manual for further direction.



Products are not to scale.

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**Appendix A** 



