

CNISP Laboratory Surveillance 2018

Surveillance Period – January 1 to December 31, 2018

CNISP Project	MRSA/MSSA (CORE Surveillance)		VRE (CORE Surveillance)		CDI (CORE Surveillance)		CPO
Surveillance Information	See 2018 Surveillance Protocol for Methicillin-Resistant and Methicillin-Susceptible <i>Staphylococcus aureus</i> Bloodstream Infections in CNISP Hospitals		See 2018 Surveillance of Vancomycin Resistant Enterococci Bloodstream Infections in CNISP Hospitals		See 2018 Surveillance for <i>Clostridium difficile</i> infection (CDI)		See 2018 Surveillance Protocol for Carbapenemase-Producing Organisms (CPO) in CNISP Healthcare Facilities
Data and Isolate/Specimen Submission Dates	Surveillance Period	Data/Lab Submission Deadline	Surveillance Period	Data/Lab Submission Deadline	Surveillance Period	Data Submission Deadline	<p>Send eligible isolates to the NML as soon as possible. Send shipment at least once every three months.</p> <p>Patient specimens with eligible Enterobacteriaceae and/or <i>Acinetobacter</i> spp. (as per Appendix A) will be identified by the hospital microbiology laboratory and sent to the NML with a minimum data set (Appendix B).</p> <p>Each time an eligible Enterobacteriaceae or <i>Acinetobacter</i> spp. is identified by the NML as harbouring a carbapenemase (i.e. a CPO), the NML will send the results via email to the site and the site will complete a Patient Questionnaire (Appendix C) for this specimen.</p> <p>All Patient Questionnaires should be submitted on a quarterly basis by email to the CNISP Surveillance Officer at cnisp-pcsin@phac-aspc.gc.ca.</p>
	Jan. 01 – Mar. 31, 2018	NOT LATER THAN June 30, 2018	Jan. 01 – Mar. 31, 2018	NOT LATER THAN June 30, 2018	Jan. 01 – Mar. 31, 2018	NOT LATER THAN June 30, 2018	
	Apr. 01 – June 30, 2018	NOT LATER THAN Sept. 30, 2018	Apr. 01 – June 30, 2018	NOT LATER THAN Sept. 30, 2018	Apr. 01 – June 30, 2018	NOT LATER THAN Sept. 30, 2018	
	July 01 – Sep. 30, 2018	NOT LATER THAN Dec. 31, 2018	July 01 – Sep. 30, 2018	NOT LATER THAN Dec. 31, 2018	July 01 – Sep. 30, 2018	NOT LATER THAN Dec. 31, 2018	
	Oct. 01 – Dec. 31, 2018	NOT LATER THAN Mar. 31, 2019	Oct. 01 – Dec. 31, 2018	NOT LATER THAN Mar. 31, 2019	Oct. 01 – Dec. 31, 2018	NOT LATER THAN Mar. 31, 2019	
					<p>Adult CDI stools to be submitted to NML by July 31 of each year.</p> <p>Pediatric CDI stools to be submitted to NML by the data submission deadlines above and NO LATER THAN March 31 the following year.</p>		
Laboratory Surveillance	<p>One blood isolate is required for every eligible MSSA or MRSA BSI case.</p> <p>In the case of a new infection in the same patient in the same calendar year, please indicate the patient's previous unique ID on the shipping form (Appendix 3).</p>		<p>One blood isolate is required for every eligible VRE BSI case.</p> <p>In the case of a new infection in the same patient in the same calendar year, please indicate the patient's previous unique ID on the shipping form (Appendix 4).</p>		<p>Adult – Targeted: (≥ 18 years): will run from <u>Mar 01 to Apr 30</u> of each year.</p> <p>Pediatric – Targeted: (≥12 months and <18 years): will run from <u>Jan 01 to Dec 31</u> of each year.</p>		<p>Patients admitted to participating CNISP hospitals or a CNISP hospital emergency department or a CNISP hospital-based outpatient clinic that meet the following criteria:</p> <p>(i) Laboratory confirmation of carbapenem resistance (see Appendix A for laboratory criteria) Enterobacteriaceae and/or <i>Acinetobacter</i> spp.</p> <p>(ii) Collection of all positive specimens (including screening isolates) between January 01, 2018 and December 31, 2018.</p>
CHEC ID or Unique Patient Identifier (UPI) Format	$\frac{\text{18}}{\text{(CHEC site \#) (year) (case \#)}} \\ \text{e.g. 01C-18-001}$		$\frac{\text{18}}{\text{(CHEC site \#) (year) (case \#)}} \\ \text{e.g. 01C-18-001}$		$\frac{\text{18CPO}}{\text{(CHEC site \#) (yearCPO) (case \#)}} \\ \text{e.g. 01C-18CPO-001}$		<p>If more than one eligible Enterobacteriaceae or <i>Acinetobacter</i> spp. is identified during the same admission, please indicate by adding suffix A or B (etc.) to the case number (eg.01C-18CPO-001A and 01C-18CPO-001B).</p> <p>For every new admission please assign a NEW unique patient identifier. Also, as above, if more than one eligible Enterobacteriaceae or <i>Acinetobacter</i> spp. is identified please indicate by adding a suffix A or B (etc.).</p> <p>For patients with more than one CPE or CPA infection or colonization in the same calendar year, if possible please indicate the unique patient identifier for the previous admission. This allows CNISP to link patient data and accurately calculate rates.</p>
Shipping Requirements	<p>Eligible MRSA and MSSA isolates are to be properly labelled (<i>in indelible ink/marker</i>) with the assigned CHEC ID and as MRSA or MSSA.</p> <p>Ensure that the assigned CHEC ID corresponds with the UPI on the patient questionnaire (See protocol - Appendix 4).</p> <p>Isolates can be collected for bulk shipment to the NML at the end of each next quarter.</p> <p>The standardized shipping form (See protocol - Appendix 3) must be included in the parcel.</p>		<p>Eligible VRE isolates are to be properly labelled (<i>in indelible ink/marker</i>) with the assigned CHEC ID and as VRE.</p> <p>Ensure that the assigned CHEC ID corresponds with the UPI on the patient questionnaire (See protocol - Appendix 2).</p> <p>Isolates can be collected for bulk shipment to the NML at the end of each next quarter.</p> <p>The standardized shipping form (See protocol - Appendix 4) must be included in the parcel.</p>		<p>Ensure that the assigned CHEC ID on the specimen vial corresponds with the UPI on the patient questionnaire.</p> <p>The standardized shipping form must be included in the parcel with the stool specimen at the time of shipment (See protocol - Appendix 7).</p>		<p>Eligible CRGN isolates are to be properly labelled (<i>in indelible ink/marker</i>) with the assigned UPI.</p> <p>Send isolates to the NML and include the data collection sheet (See protocol - Appendix B or C) in the parcel.</p> <p>Please email David Boyd (david.boyd@canada.ca) the day of shipping to allow tracking of shipment.</p> <p>To avoid receiving duplicate isolates at the NML, please alert the NML if the shipped isolate(s) were sent to your provincial laboratory as they may have also sent these isolates to the NML for testing.</p>

(Updated February 2018)