

# CNISP Laboratory Surveillance 2019

Surveillance Period – January 1 to December 31

CNISP Project	MRSA/MSSA (CORE Surveillance)		VRE (CORE Surveillance)		CDI (CORE Surveillance)		CPO
<b>Surveillance Information</b>	See 2019 Surveillance Protocol for Methicillin-Resistant and Methicillin-Susceptible <i>Staphylococcus aureus</i> Bloodstream Infections in CNISP Hospitals		See Surveillance of Vancomycin Resistant Enterococci Bloodstream Infections in CNISP Hospitals		See Surveillance for <i>Clostridium difficile</i> infection (CDI)		See Surveillance Protocol for Carbapenemase-Producing Organisms (CPO) in CNISP Healthcare Facilities
<b>Data and Isolate/Specimen Submission Dates</b>	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 <i>Enterobacteriales</i> 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) for detection or confirmation of carbapenemase production.</p> <p>A patient questionnaire (Appendix C) should be completed for all carbapenemase-producing <i>Enterobacteriales</i> and/or <i>Acinetobacter</i> spp. Please ensure that data submitted on Appendix B matches data submitted on the patient questionnaire (Appendix C) (e.g. age, sex, pathogen, site of isolation, etc.).</p> <p>All patient questionnaires should be submitted on a quarterly basis by email to CNISP at <a href="mailto:phac.cnisp-pcsin.aspc@canada.ca">phac.cnisp-pcsin.aspc@canada.ca</a></p>
	Jan. 01 – Mar. 31, 2019	NOT LATER THAN June 30, 2019	Jan. 01 – Mar. 31, 2019	NOT LATER THAN June 30, 2019	Jan. 01 – Mar. 31, 2019	NOT LATER THAN June 30, 2019	
	Apr. 01 – June 30, 2019	NOT LATER THAN Sept. 30, 2019	Apr. 01 – June 30, 2019	NOT LATER THAN Sept. 30, 2019	Apr. 01 – June 30, 2019	NOT LATER THAN Sept. 30, 2019	
	July 01 – Sep. 30, 2019	NOT LATER THAN Dec. 31, 2019	July 01 – Sep. 30, 2019	NOT LATER THAN Dec. 31, 2019	July 01 – Sep. 30, 2019	NOT LATER THAN Dec. 31, 2019	
	Oct. 01 – Dec. 31, 2019	NOT LATER THAN Mar. 31, 2020	Oct. 01 – Dec. 31, 2019	NOT LATER THAN Mar. 31, 2020	Oct. 01 – Dec. 31, 2019	NOT LATER THAN Mar. 31, 2020	
					<p><b>Adult CDI stools to be submitted to NML by July 31 of each year.</b></p> <p><b>Pediatric CDI stools to be submitted to NML by the data submission deadlines above and NO LATER THAN March 31 the following year.</b></p>		
<b>Laboratory Surveillance</b>	<p>One blood isolate is required for every eligible MRSA BSI case.</p> <p><b>Please do NOT send MSSA isolates to the NML.</b></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 2).</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><b>Adult – Targeted:</b> (≥ 18 years): will run from <u>Mar 01 to Apr 30</u> of each year.</p> <p><b>Pediatric – Targeted:</b> (≥12 months and &lt;18 years): will run from <u>Jan 01 to Dec 31</u> of each year.</p> <p>One stool sample is required for every <b>lab eligible</b> CDI case.</p>		<p>All <i>Enterobacteriales</i> and <i>Acinetobacter</i> spp. that meet at least one of the three laboratory testing criteria for confirmation of carbapenem resistance or carbapenemase production (see Appendix A).</p> <p>If there are multiple isolates from one patient and laboratories are only sending one isolate, please submit the isolate from the <b>most invasive specimen</b>, otherwise please submit all isolates.</p> <p><b>Environmental Sampling:</b> If possible, consider screening drains at discharge for CPO positive patients. Swab all drains in the patient room and bathroom before a cleaning protocol is implemented. Complete and send Appendix B to the NML along with the CPO positive environmental swab(s).</p>
<b>CHEC ID or Unique Patient Identifier (UPI) Format</b>	$\frac{19}{\text{(CHEC site \#) (year) (case \#)}} \text{ e.g. 01C19001}$		$\frac{19}{\text{(CHEC site \#) (year) (case \#)}} \text{ e.g. 01C19001}$		$\frac{19}{\text{(CHEC site \#) (year) (case \#)}} \text{ e.g. 01C19001}$		$\frac{19}{\text{(CHEC site \#) (year) (case \#)}} \text{ e.g. 01C19001}$ <p>When multiple isolates are submitted for the same patient in the same surveillance year, please indicate by adding a suffix A or B etc. to the case number (e.g. 01C19001A and 01C19001B).</p> <p><b>Environmental Sampling:</b> Use the same unique PID assigned to the patient whose room was swabbed and add a suffix E1 or E2 etc. to the case number (e.g. 01C19001E1 and 01C19001E2).</p>
<b>Shipping Requirements</b>	<p>Eligible MRSA isolates are to be properly labelled (<i>in indelible ink/marker</i>) with the assigned <b>CHEC ID</b> and as <b>MRSA</b>.</p> <p>Ensure that the assigned <b>CHEC ID</b> corresponds with the <b>UPI</b> on the patient questionnaire (See protocol - Appendix 3).</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 2) <b>must</b> be included in the parcel.</p>		<p>Eligible VRE isolates are to be properly labelled (<i>in indelible ink/marker</i>) with the assigned <b>CHEC ID</b> and as <b>VRE</b>.</p> <p>Ensure that the assigned <b>CHEC ID</b> corresponds with the <b>UPI</b> 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) <b>must</b> be included in the parcel.</p>		<p>Ensure that the assigned <b>CHEC ID</b> on the specimen vial corresponds with the <b>UPI</b> on the patient questionnaire.</p> <p>The standardized shipping form (see protocol - Appendix 7) <b>must</b> be included in the parcel.</p>		<p>Eligible CRGN isolates are to be properly labelled (<i>in indelible ink/marker</i>) with the assigned <b>UPI</b>.</p> <p>Send isolates to the NML and include the data collection form (Appendix B) in the parcel.</p> <p>To avoid receiving duplicate isolates at the NML, <b>please alert the NML if the shipped isolate(s) were sent to your provincial laboratory</b> as they may have also sent these isolates to the NML for testing. These isolates would have been assigned an NML number (e.g. N19-01234). <b>If you have an NML number, please include it on Appendix B with the CNISP PID.</b></p>

Email an electronic copy of the completed standardized laboratory shipping forms to the NML at [phac.nml.ARN1-RAIN.Inm.aspc@canada.ca](mailto:phac.nml.ARN1-RAIN.Inm.aspc@canada.ca).

(Updated January 2019)