

Appendix F: Notification of Ongoing CPO or C. auris Transmission¹

<p>Please complete this form for notification of ongoing CPO transmission / C. auris case investigation in your facility or health authority and email to picnet@phsa.ca</p>
<p>A. Notification Information</p> <p>Health Authority: _____ Facility Name: _____ Unit: _____</p> <p>Contact Person: _____ Title: _____</p> <p>Contact Phone: _____ Email: _____</p> <p>Facility type: <input type="checkbox"/> Acute Care Hospital <input type="checkbox"/> Long-term Care Facility <input type="checkbox"/> Other _____</p> <p>Is this report: <input type="checkbox"/> Notification of CPO or C. auris transmission investigation (complete section B)</p> <p style="padding-left: 40px;"><input type="checkbox"/> Notification of CPO or C. auris transmission investigation resolved (complete section C)</p>
<p>B. Investigation Notification</p> <p>Organism: <input type="checkbox"/> CPO <input type="checkbox"/> C. auris</p> <p>Date the index case* was identified (dd/mmm/yyyy): ___ / ___ / ____</p> <p>Date investigation initiated (dd/mmm/yyyy): ___ / ___ / ____</p> <p>If CPO, please specify:</p> <p style="padding-left: 40px;">Organism (Genus species): _____</p> <p style="padding-left: 40px;">CPO gene identified (e.g. NDM, KPC): _____</p> <p>*The first case in the transmission. This date is based on collection date.</p>
<p>C. Transmission Investigation Resolved²</p> <p>Date investigation closed (dd/mmm/yyyy): _____</p>

Reported by: _____ Date: ___ / ___ / ____

¹ Once completed, please send to PICNet at picnet@phsa.ca. ² A CPO investigation will be declared over if no further health care-associated CPO cases with the same resistance gene are identified within six weeks of the last detected case in the unit (see following sections). A C. auris investigation will be declared over if no C. auris positive isolates are identified within six weeks of the last detected case in the unit.