When to label organisms as MDRO, perform additional testing and notification of Infection Prevention and providers

Proteus spp, Morganella spp. and Providencia spp

Enterobacterales and Pseudomonas aeruginosa

MRSA/VRE/ESBL

Resistant Imipenem, Piperacillin/Tazobactam, Ceftriaxone and Ceftazidime?

C**onfirm** resistance before reporting results and test for Meropenem on XN08 card.

Label as MDRO and notify provider

Resistant Ertapenem, Imipenem, or Meropenem? **Confirm** with alternate method before reporting results.

C**onfirmed** resistance to any carbapenem? If yes:

\*Label as **MDRO**.

\*Report MIC result as tested.

\*Notify provider.

\*Send isolate to MDH.

\*Add MDHADD comment.

When non-susceptible to Imipenem and one other carbapenem.

\*Label as **MDRO**

\*Report MIC result as tested.

\*Notify provider.

\*Send isolate to MDH.

\*Add MDHADD comment.

Freeze all isolates except MRSA

Result MDH results as NCPO or with appropriate CP code.

Notify Infection Prevention with positive mCIM result.

*Enterobacterales and Pseudomonas aeruginosa* scenario:

Enterobacterales/ PSAR Resistant to ERTA, IMP or MERO (confirmed by KB or previous history) ONLY

\*Report as PSAR-MDRO-MDHADD on same line (do not final until report from MDH comes back)

\*Notify Provider (put called to info in report)

\*Freeze isolate

\*Send to MDH for CRPA study (include susceptibility results report when sending isolate)

\*If results are negative for CPO: remove MDHADD and add **NCPO** to PSAR, add SCAND comment and final report.

\*If results are positive for CPO: Call provider and IP with verbal preliminary result, document call info in workup, do not report preliminary results until hard copy from MDH is faxed.

\*Add KPC, NDM, VIM, etc. code in report

\*Add DRO and CAL at end of report

\*Add SCAND comment at end of report

\*Final report

\*Further POS with same org can be PRAC, no need to notify IP