



Click to learn about Multi-site Gram-negative Surveillance Initiative

Organism

CRE CRAB

Topic

Case Rates
Death Rates

Year

All

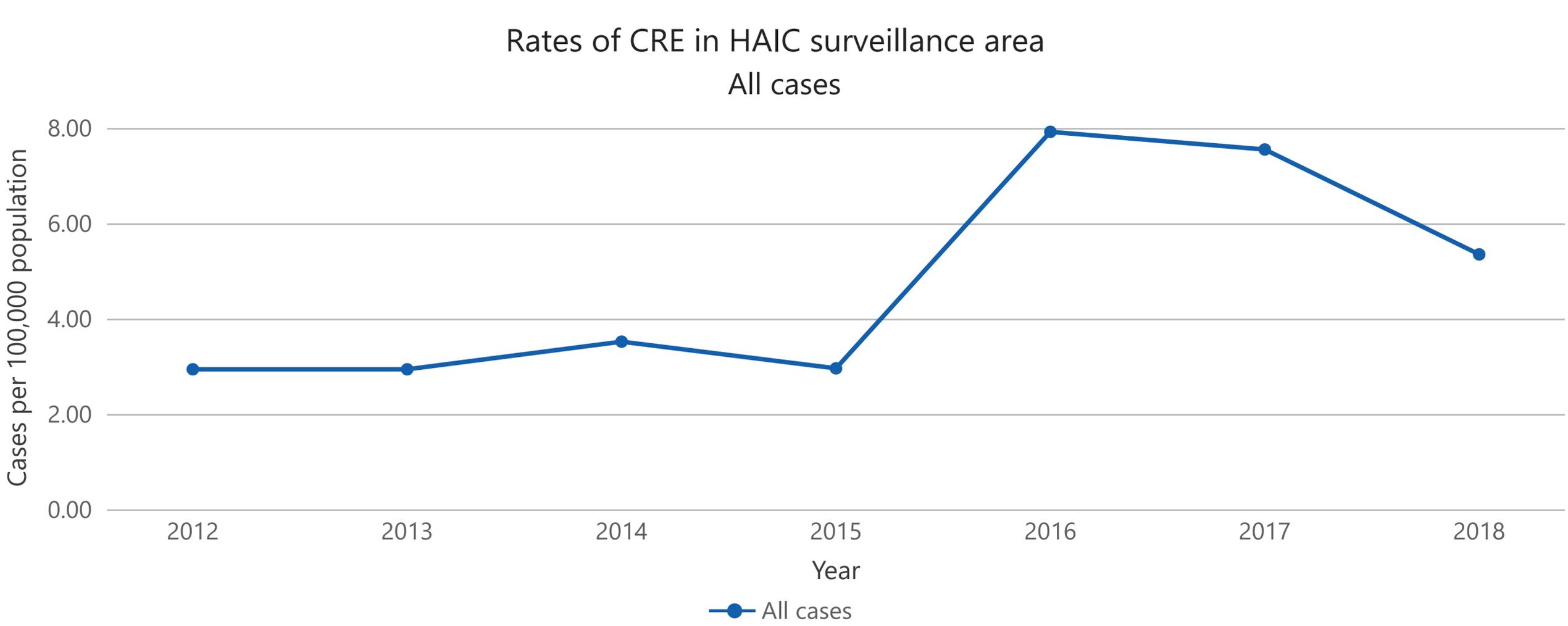
View By

All cases

Select all
 All cases

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Candida bloodstream infections (Candidemia) *Clostridioides difficile* infections Invasive *Staphylococcus aureus* infections Multi-site Gram-negative Surveillance Initiative HAIC Viz 



Note: From 2012–2015, the phenotypic surveillance definition for Carbapenem-resistant Enterobacterales (CRE) was: an intermediate or resistant antimicrobial susceptibility test result for ≥ 1 carbapenem (doripenem, imipenem, or meropenem) and a resistant antimicrobial susceptibility test result for all third generation cephalosporins (ceftazidime, ceftriaxone, and cefotaxime) tested. Since 2016, the phenotypic surveillance definition is: a resistant antimicrobial susceptibility test result for ≥ 1 carbapenem (doripenem, ertapenem, imipenem, or meropenem). The minimum inhibitory concentrations or zone diameters reported by the local clinical laboratories were used to classify isolates.

[Surveillance areas](#) have changed over time. The number of EIP sites participating in surveillance is as follows: 2012 – 3 sites; 2013 – 7 sites; 2014–2016 – 8 sites; 2017 – 9 sites; 2018 to present – 10 sites.

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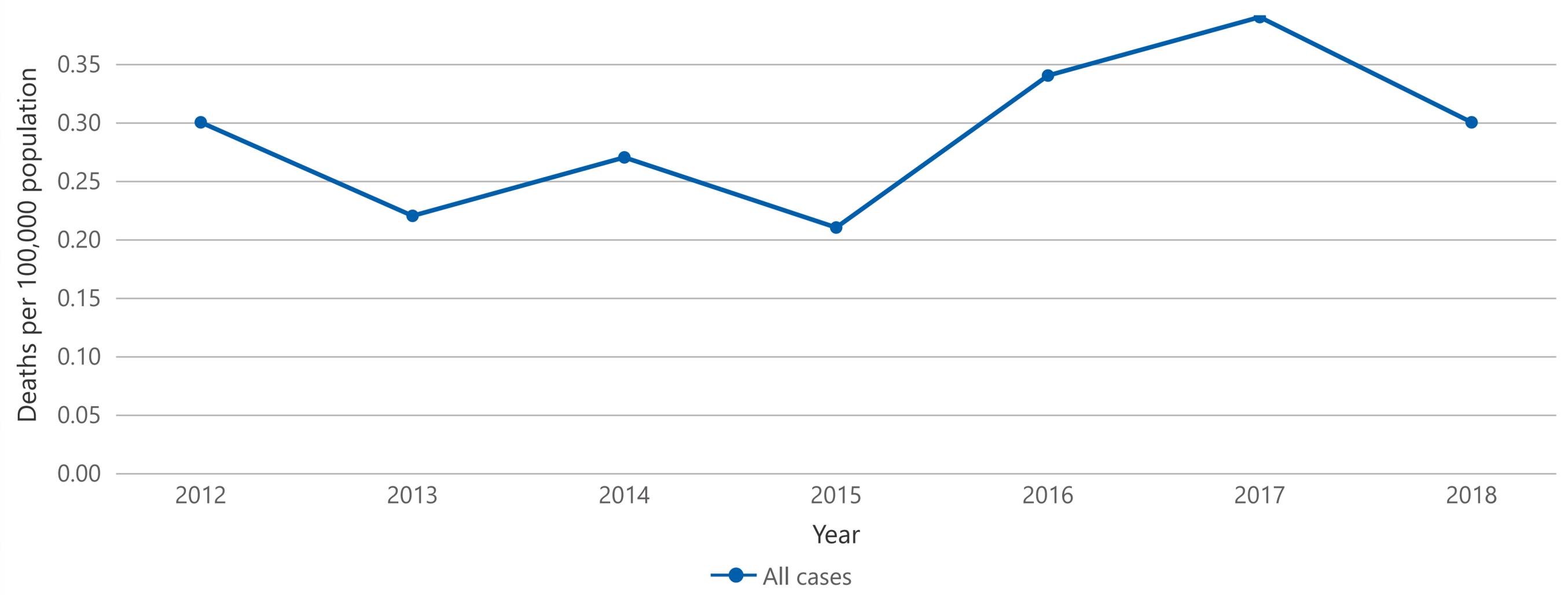
All cases 

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- All cases



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Rates of death among cases with CRE in HAIC surveillance area



Note: From 2012–2015, carbapenem-resistant Enterobacteriales (CRE) were defined by the following antimicrobial susceptibility test (AST) results: intermediate (I) or resistant (R) to ≥ 1 carbapenem (excluding ertapenem) and R to all 3rd generation cephalosporins tested. Since 2016, CRE are defined as R to ≥ 1 carbapenem (including ertapenem). AST results from clinical laboratories are used to classify isolates. Assessment of vital status in patients admitted to a hospital occurs at the time of discharge. For patients in a long-term care facility, long-term acute care facility, or in an outpatient dialysis center, vital status is assessed 30 days after culture collection. For all other patients, vital status is assessed using medical records from the healthcare facility encounter associated with the culture.

[Methods](#) have changed over time. [Surveillance areas](#) have changed over time. The number of EIP sites participating in surveillance is as follows: 2012 – 3 sites; 2013 – 7 sites; 2014-2016 – 8 sites; 2017 – 9 sites; 2018 to present – 10 sites.

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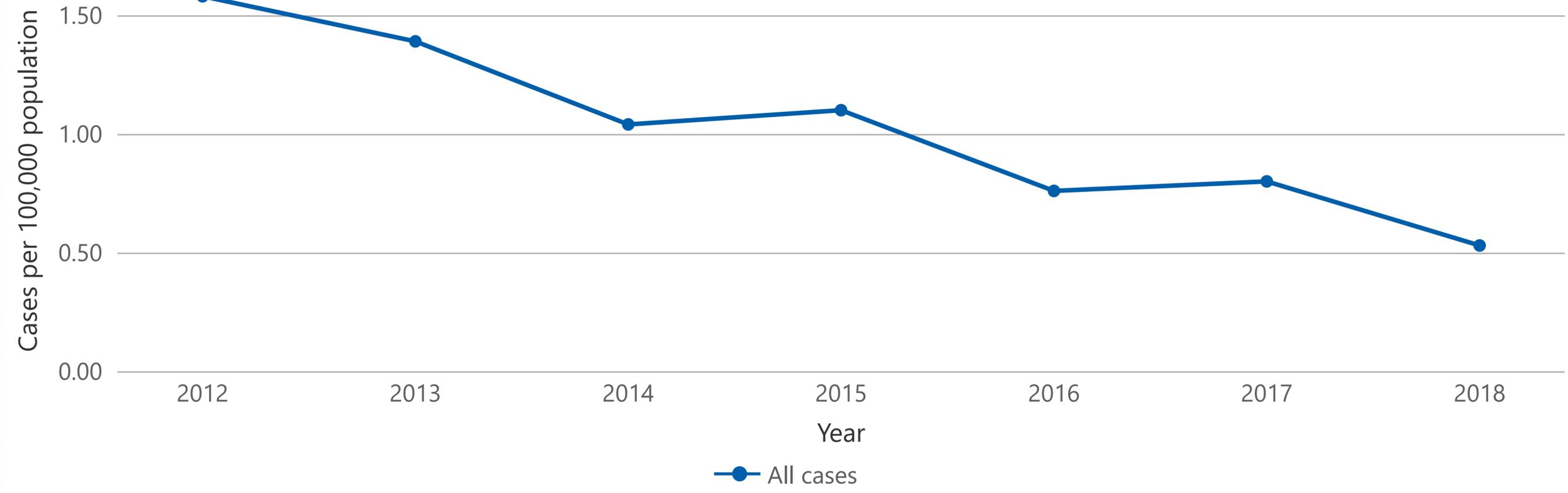
All

View By

All cases

- Select all
- All cases

Rates of CRAB in HAIC surveillance area
All cases



Note: Carbapenem-Resistant *Acinetobacter baumannii* (CRAB) [Surveillance areas](#) have changed over time. The number of EIP sites participating in surveillance is as follows: 2012- 3 sites; 2013- 7 sites; 2014-2017-8 sites; 2018 to present- 9 sites.

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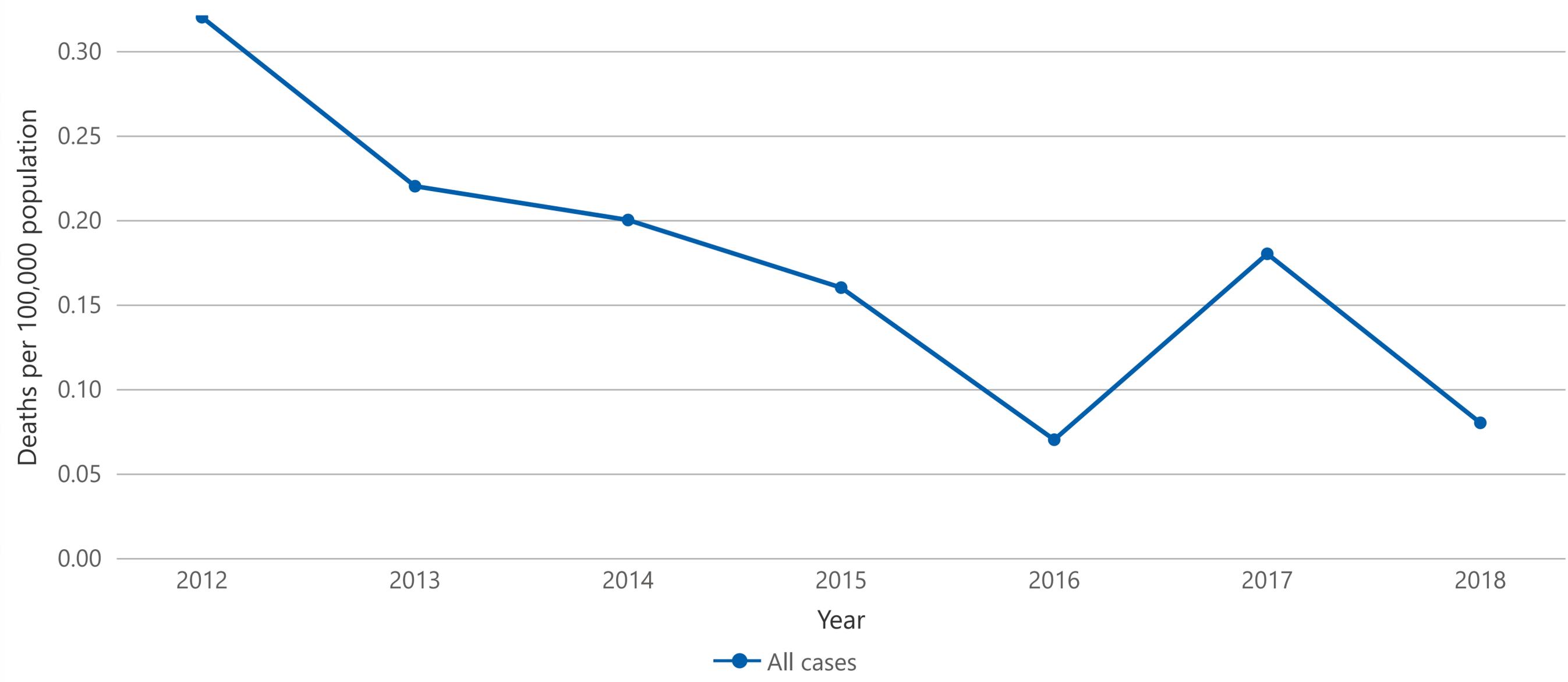
View By

All cases

Select all

All cases

Rates of death among cases with CRAB in HAIC surveillance area



Note: For patients admitted to a hospital, vital status was assessed at the time of discharge. For patients that were in a long-term care facility, long-term acute care facility, or seen at an outpatient dialysis center, vital status was assessed 30 days after the date of incident culture. For all other patients, vital status was ascertained using medical records from the healthcare facility encounter associated with the incident culture. [Methods](#) have changed over time. [Surveillance areas](#) have changed over time. The number of EIP sites participating in surveillance is as follows: 2012- 3 sites; 2013- 7 sites; 2014-2017-8 sites; 2018 to present- 9 sites.

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