



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

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To: North Carolina Infection Prevention Departments

Subject: *C. auris* Admission Screening Considerations for North Carolina Acute Care
Hospitals Regarding Patients Transferred from LTACHs and vSNFs

Date: May 6, 2026

This memo is to raise awareness of the increase in *Candida auris* cases in North Carolina in 2026 and recommend preventative actions for acute care hospitals to consider for implementation, including targeted admission screening and control measures. This guidance is intended to reduce the risk of *C. auris* transmission.

Background

C. auris can be multidrug-resistant and can cause life-threatening illness. It spreads easily in healthcare facilities and mostly affects people who are already very sick. People without risk factors generally do not become infected or colonized with *C. auris*.

C. auris has been increasing in the United States since the first case in 2016. Historically, North Carolina (NC) has had a low number of cases reported each year compared to other states in the region. Long-term acute care hospitals (LTACH) and ventilator-capable skilled nursing facilities (vSNF) are at higher risk of importation and sustained transmission because they provide care to high-acuity patients and have long average lengths of stay. In 2026, NC has seen an increase in cases of *C. auris* and outbreaks in LTACHs. NC saw 15 reported clinical and screening cases of *C. auris* in 2024 and 22 in 2025. Preliminary analysis showed 47 reported clinical and screening cases in the first three months of 2026, already far surpassing 2025 case counts.

Admission screening can identify patients who need infection prevention interventions to prevent *C. auris* spread in your hospital. Screening eligible patients for *C. auris* upon admission is one way your facility can support patient safety efforts. This action can also help us better understand how widespread this organism is in NC.

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF PUBLIC HEALTH

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Actions to Consider at your Facility

North Carolina Department of Health and Human Services Division of Public Health recommends acute care hospitals consider *C. auris* colonization admission screening of patients transferring from LTACHs or vSNFs. Admission screening involves collecting axilla/groin swabs within 24 hours of admission. If admission screening is performed, facilities should consider contact precautions for screened patients until negative results are reported. If *C. auris* colonization screening results are positive, the patient should be placed on contact precautions for the duration of their stay, and the chart should be flagged in case of readmission. Disinfectants should be EPA registered and effective against *C. auris* (EPA's List P). Disinfectants should be used per the manufacturer's instructions, including adherence to contact time. Positive *C. auris* results should be communicated to transferring facilities upon discharge.

Implementation Considerations

Should your facility implement *C. auris* admission screening of patients transferring from a LTACH or vSNF, diagnostic testing and materials are currently available through public health for free from the regional Antimicrobial Resistance Laboratory Network (ARLN) in Maryland (MD) upon request. This resource is subject to change depending on federal funding availability. To request testing assistance please email nchai@dhhs.nc.gov.

C. auris Colonization Screening via MD ARLN

- Specimen source: Composite swabs of the axilla and groin. Acceptable swabs include BD or Copan Eswabs.
- Testing method: RealTime-PCR positive specimens may be reflexed to culture for organism identification and whole genome sequencing.
- Turnaround time: 5 working days from specimen receipt.

Please contact the NC SHARPPS team by email at nchai@dhhs.nc.gov or DPH Communicable Disease Branch with questions or concerns by calling (919)733-3419.

References:

[MDRO Prevention Strategies | HAIs | CDC](#)

[Tracking *C. auris* | *Candida auris* \(*C. auris*\) | CDC](#)

[Maryland Department of Health ARLN Webpage](#)

[EPA's Registered Antimicrobial Products Effective Against *Candida auris* \[List P\] | US EPA](#)