



STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH SERVICES
BUREAU OF INFECTIOUS DISEASE CONTROL

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Dear Health Care Provider:

October 9, 2017

We received a report that a patient you cared for had an infection with a bacterium identified as a strain of Carbapenem Resistant Enterobacteriaceae (CRE). While there are other multi-drug resistant organisms of concern, CRE is unique because it can develop antibiotic resistance in a variety of ways. Of particular interest are highly mobile antibiotic resistant genes against Carbapenems, which can be transferred from one bacterium to another. Such bacteria are called Carbapenemase Producing CRE (CP-CRE). Nationally, over 300 cases have already been reported to the Centers for Disease Control and Prevention (CDC). Individuals who have had a long course or prior exposure to antibiotics, invasive devices (e.g., urinary catheters), are immunocompromised, and/or have received medical attention in a skilled nursing or intensive care setting are more at risk of being infected or transmitting CRE to others. CP-CRE is rare in New Hampshire and more aggressive measures are needed to prevent further spread of this type of bacteria. The New Hampshire Division of Public Health Services (NH DPHS) would like to engage clinicians as key stakeholders in our prevention and response efforts. Below are actions you should take once a patient is identified with CRE or CP-CRE infection or has had such an infection in the past.

- Report CRE to NH DPHS as required under He-P 301. Phone: 603-271-4496. Fax: 603-271-0545.
- Add CRE/CP-CRE to the patient's problem list and flag the patient in the Electronic Medical Record (EMR) as CRE positive.
- Implement contact precautions for each visit. Contact the NH DPHS if unsure what precautions should be used and visit the CDC CRE toolkit: <https://www.cdc.gov/hai/organisms/cre/cre-toolkit/index.html>.
- Discuss with the patient what steps are being taken by your facility to prevent the further spread of CRE/CP-CRE and what he/she can do.
- Identify a date 6 months in the future to discuss colonization testing and the cessation of contact precautions.
- Utilize best practice and be guided by your institution's or the state antibiogram regarding use of empiric antibiotics.

Antibiotic stewardship should be integrated into day-to-day activities for all patients. If you would like information regarding antibiotic stewardship practices or have any questions, please call the New Hampshire Division of Public Health Services at (603) 271-4496. Additionally, more information regarding the nature and transmission of CRE is available on the CDC website: <https://www.cdc.gov/hai/organisms/cre/cre-clinicians.html>. We are continuing our surveillance of this reportable condition and appreciate your assistance in preventing and responding to CP-CRE in New Hampshire.

Sincerely,

Katrina Hansen, MPH
Chief, Infectious Disease Surveillance Section