Report Carbapenem-Resistant Enterobacteriaceae (CRE) isolates to the XDRO registry

Do NOT report to registry: ESBL, VRE, MRSA, other non-CRE isolates

(1) Is isolate in the Enterobacteriaceae family? (e.g., Klebsiella, Escherichia coli, Enterobacter, Serratia, Proteus, others)

- NO: Do NOT Report: Pseudomonas, Acinetobacter, other non-Enterobacteriaceae

- YES

(2) Is isolate non-susceptible (INTERMEDIATE or RESISTANT) to imipenem, meropenem, and/or doripenem?

- NO: Do NOT Report: Isolates that are non-susceptible ONLY to ertapenem

- YES

(3) Is isolate RESISTANT to all tested third-generation cephalosporins? (e.g., ceftriaxone, cefotaxime, ceftazidime, others)

- NO: Do NOT Report: Isolates that are sensitive or intermediate to any third-generation cephalosporin

- YES

(4) Is isolate E. coli or Klebsiella spp.?

- YES

(5) Report to XDRO registry, even if no further laboratory testing done. Reporting further laboratory results is encouraged.

- YES

(6) Report CRE laboratory results suggesting carbapenemase production (e.g., likely KPC, NDM, VIM, IMP, OXA)

- (a) Positive genotypic (PCR) results AND/OR

- (b) Positive phenotypic (e.g., Modified Hodge with MBL Etest) results

- NO: Do NOT Report: Isolates other than E. coli or Klebsiella spp., unless further laboratory testing is positive

PDH

XDRO registry website: www.xdro.org ● XDRO registry e-mail: DPH.XDROregistry@illinois.gov
The Extensively Drug Resistant Organism (XDRO) Registry

The Illinois Department of Public Health (IDPH) has guided development of an infection control tool called the XDRO registry. The purpose of the XDRO registry is two-fold:

1. **Improve inter-facility communication**: The registry provides efficient information exchange across the spectrum of healthcare about patients who have tested positive for carbapenem-resistant Enterobacteriaceae (CRE).

2. **Improve CRE surveillance**: The registry stores CRE surveillance data and has features that can help facilities track their CRE submission history.

**Reporting Requirements**

- IDPH amended the Control of Communicable Diseases Code (77 Ill. Adm. Code 690) to require reporting of CRE to IDPH.
- As of November 1, 2013, the **first CRE-positive culture per patient stay** must be reported to the XDRO registry **within 7 calendar days** after the test result is finalized.
- All hospitals, hospital-affiliated clinical laboratories, independent or free-standing laboratories, longer-term care facilities, and long-term acute care hospitals in Illinois are required to report CRE isolates that meet surveillance criteria.

**CRE surveillance criteria**

Enterobacteriaceae (e.g., *E. coli*, *Klebsiella* spp, *Enterobacter* spp, *Proteus* spp, *Citrobacter* spp, *Serratia* spp, *Morganella* spp, or *Providentia* spp) with one of the following laboratory test results:

1. Molecular test (e.g., polymerase chain reaction [PCR]) specific for carbapenemase;
2. Phenotypic test (e.g., Modified Hodge) specific for carbapenemase production;
3. Susceptibility test (**for *E. coli* and *Klebsiella* spp only**): non-susceptible (intermediate or resistant) to ONE of the following carbapenems (doripenem, meropenem, or imipenem) AND resistant to ALL of the following third generation cephalosporins tested (ceftriaxone, cefotaxime, and ceftazidime). **Note: ignore ertapenem for this definition.**

**Highlighted Features**

- The XDRO Dashboard (shown at right) graphically shows data from a user’s facility and the state aggregate.
- The Search Registry function allows facilities to check whether a patient has been previously reported as CRE-positive.

For more information about and access to the XDRO registry, visit: [www.xdro.org](http://www.xdro.org)

For XDRO registry questions, contact: [DPH.XDROregistry@illinois.gov](mailto:DPH.XDROregistry@illinois.gov)

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