Laboratory Criteria for Diagnosis

• SUSPECTED CRE

A suspected case of CRE is a patient whose clinical specimen culture yields a bacterium of the *Enterobacteriaceae* family (see **Table 1a**) that:

A) tests **nonsusceptible** (intermediate or resistant) to **any carbapenem** including doripenem, ertapenem, imipenem*, or meropenem by any set of breakpoints

AND/OR

B) tests **positive** for a carbapenemase by a **nucleic acid amplification** test

AND/OR

C) tests **positive** for carbapenemase production by a **phenotypic test** (i.e. Carba NP, Modified Hodge Test**)

CONFIRMED CRE

A confirmed case of CRE is a patient whose clinical specimen culture yields a bacterium of the *Enterobacteriaceae* family (see table 1) that:

A) tests **resistant to any carbapenem** including doripenem, ertapenem, imipenem, or meropenem

AND/OR

B) tests **positive** for a carbapenemase by a **nucleic acid amplification** test; (i.e., PCR-positive for KPC, NDM, IMP, VIM, or OXA-48)

AND/OR

C) tests **positive** for carbapenemase production by a **phenotypic test** (i.e. Carba NP, Modified Hodge Test**)

*Note: Carbapenem-resistant *Proteus* spp., *Providencia* spp. and *Morganella* spp. that are non-susceptible ONLY to imipenem but susceptible to other carbapenems may be attributed to "intrinsic" resistance. These isolates do not need to be reported.

** *Note*: MHT should not be used for Enterobacter species or other Enterobacteriaceae with a chromosomal AmpC.

Table 1a.

Averyella	Hafnia	Pragia	Yersinia
Budvicia	Klebsiella	Proteus*	Yokenella
Buttiauxella	Kluyvera	Providencia*	Enteric Group 58
Cedecea	Leclercia	Rahnella	Enteric Group 59
Citrobacter	Leminorella	Salmonella	Enteric Group 60
Cronobacter	Moellerella	Serratia	Enteric Group 63
Edwardsiella	Morganella*	Shigella	Enteric Group 64
Enterobacter	Pantoea	Tatumella	Enteric Group 68
Escherichia	Photorhabdus	Trabulsiella	Enteric Group 69
Ewingella	Plesiomonas	Xenorhabdus	Enteric Group 137

^{*} Elevated MICs to imipenem in *Morganella* spp., *Proteus* spp., and *Providencia* spp. are frequently due to mechanisms other than carbapenemases. Please do NOT send isolates of these genera to OSPHL unless there is also resistance to other carbapenems.