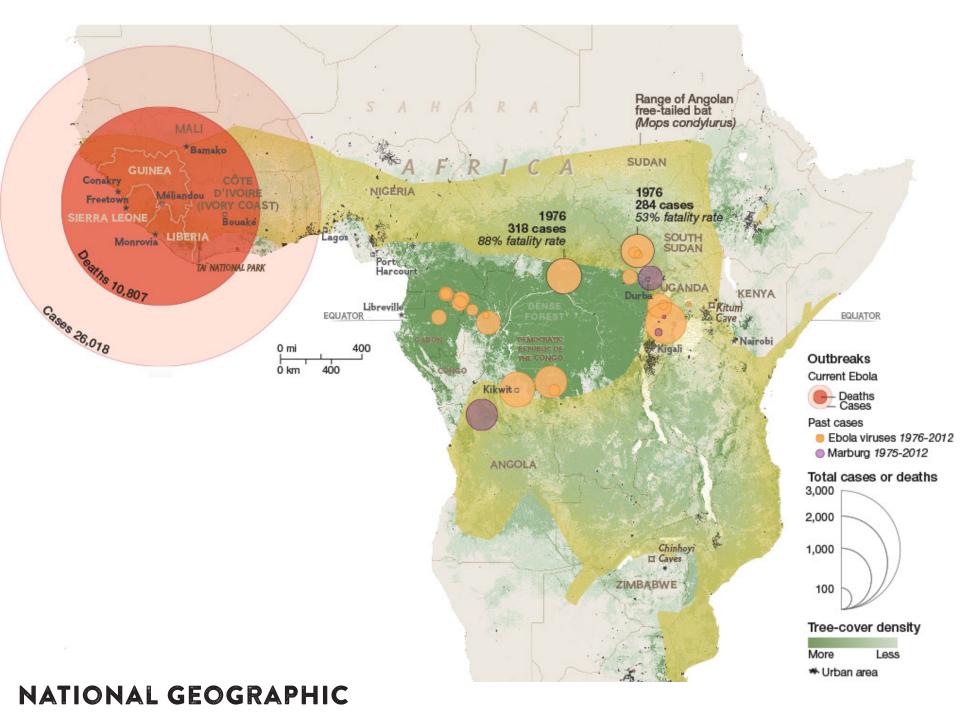




MIT TECHNOLOGY REV.



HSC CLINICAL CASE CPO-KLEBSIELLA

	Card:	AST-N208	Lot Number: 578315520	L A LILL CIE	Λug 4, 2015 12:00 GMT-06:00
Susceptibility Information	Completed: Jun 22, 2014 01:20 GMT-06:00		Status: Final	Analysis 9.00 hours	
Antimicrobial	MIC	nterpretation	Antimicrobial	MIC	Interpretation
Ampicillin	>= 32	R	Ertapenem	>= 8	R
Amoxicillin/Clavulanic Acid	>= 32	R	Meropenem	>= 16	R
Piperacillin/Tazobactam	>= 128	R	Amikacin	>= 64	R
Cefalotin	>= 64	R	Gentamicin	>= 16	R
Cefazolin	>= 64	R	Tobramycin	>= 16	R
Cefoxitin	>= 64	R	Ciprofloxacin	>= 4	R
Cefixime	>= 4	R	Tetracycline	>= 16	R
Ceftazidime	>= 64	R	Nitrofurantoin	>= 512	R
Ceftriaxone	>= 64	R	Trimethoprim/Sulfamethoxazole	>= 320	R
	A				

⁺⁼ Deduced drug *= AES modified **= User modified





ZIKA STRATEGIC RESPONSE FRAMEWORK & JOINT OPERATIONS PLAN

JANUARY-JUNE 2016



1.
SURVEILLANCE
2.
RESPONSE
3.

RESEARCH



SPREADOOOO

ZIKA STRATEGIC RESPONSE FRAMEWORK & JOINT OPERATIONS PLAN JANUARY-JUNE 2016

FEB 2016

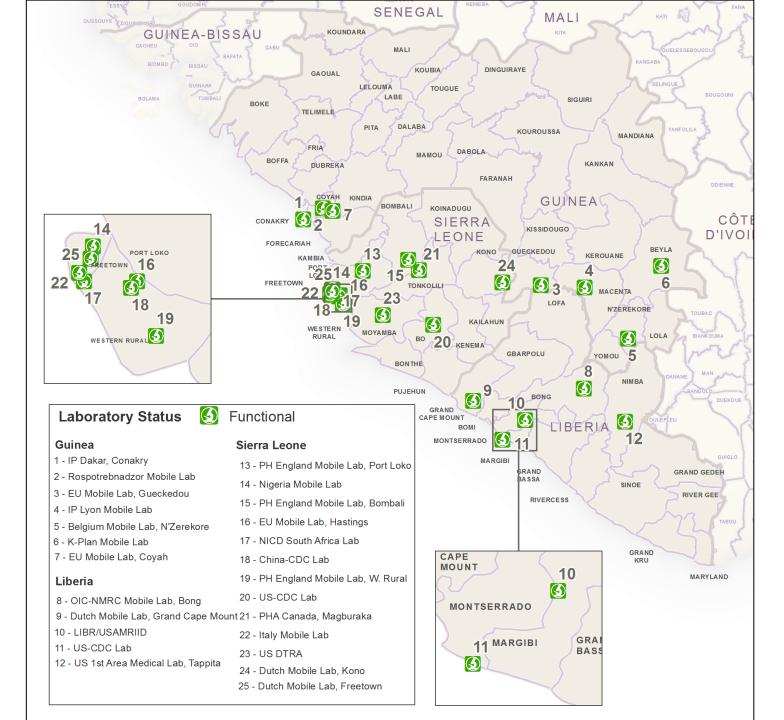


1. SURVEILLANCE 2. RESPONSE 3.

RESEARCH





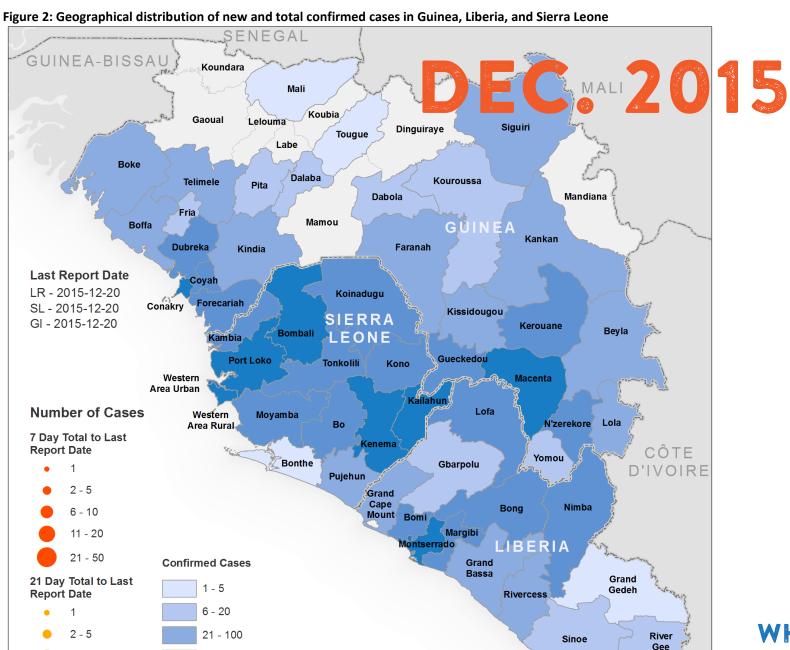




GUINEA-BISSAU KOUNDARA MALI BIOM BO BISSAU DINGUIRAYE KOUBIA/~ GAOUAL LELOUMA TOUGUE LABE BOLAMA SIGUIRI BOKE TELIMELE DALABA DABOLA KOUROUSSA MANDIANA FRIA BOFFA MAMOU KANKAN DUBREKA FARANAH **Confirmed Cases** ODIENN KINDIA 1 - 5 KOINADUGU CÔ 6 - 20CONAKRY D'IVO KISSIDOUGO FORECARIAI 21 - 100 BEYLA KONO KEROUANE KAMBIA 101 - 500 PORT 501 - 4000 FREETOWN SIERRA No. of Cases, Past 7 Days LEONE N'ZEREKORE 1 - 3 MOYAMBA WESTERN LOLA BIANKOUMA RURAL GBARPOLU BONTHE YOMOU 8 - 22 PUJEHUN NIMBA 23 - 50 LIBERIA GRAND No. of Cases, Past 21 Days CAPE MOUNT BOMI 1 - 3 MONTSERRADO GRAND MARGIBI RIVERCESS 8 - 22 GRAND GEDEH MARCH 2 23 - 50 RIVER GEE Data as of: No cases reported LR - 2015-03-01 MARYLAND

Figure 4: Geographical distribution of new and total confirmed cases





6 - 10

101 - 500



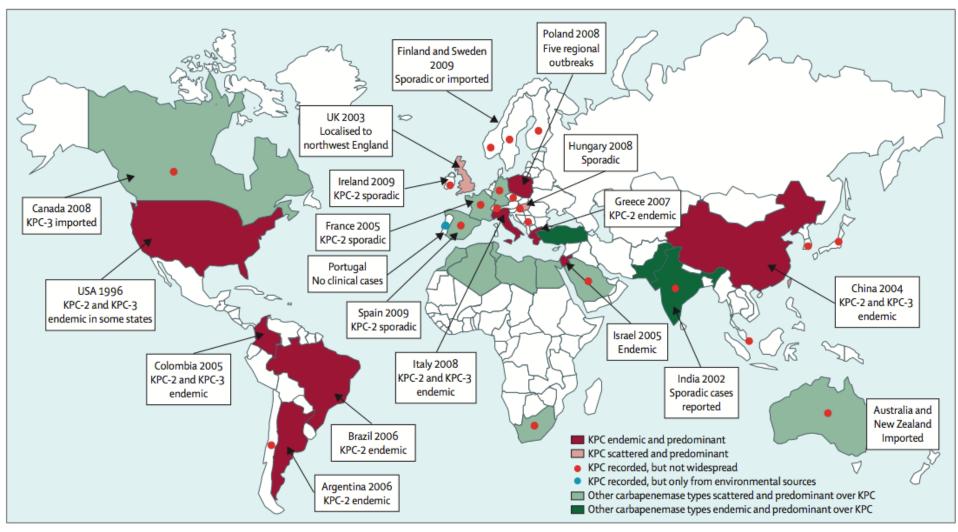


Figure: Epidemiological features of producers of Klebsiella pneumoniae carbapenemases by country of origin Other carbapenemase types include VIM, OXA-48, or NDM. KPC=Klebsiella pneumoniae carbapenemase.

KLEBSIELLA KPC

BRILLIANCE CRE

CHROMID CARBA







BRILLIANCE ESBL

+ERT



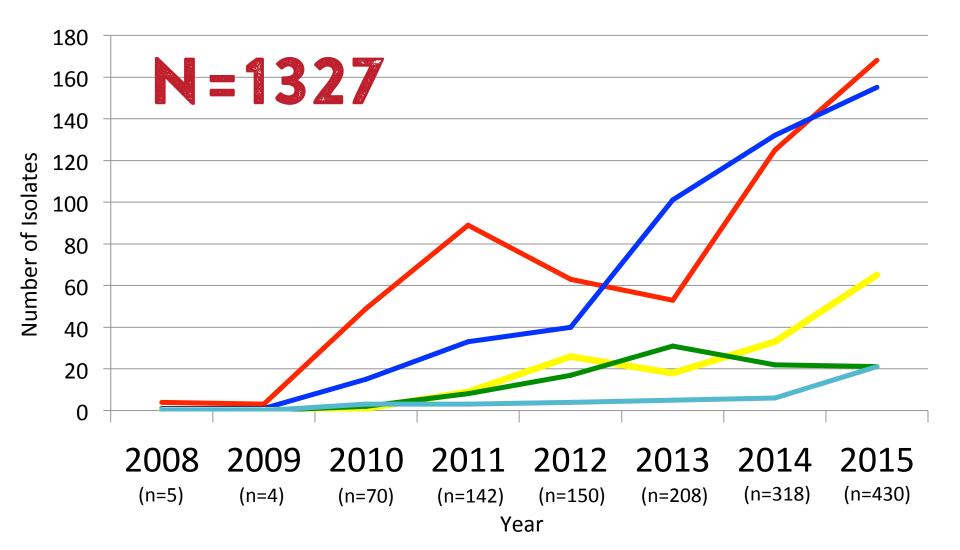
C3GR +ERT



COLOREX KPC

CPE IN CANADA: CPHLN DATA

-KPC -NDM -OXA-48-like -SME -Other



CANADIAN ANTIMICROBIAL RESISTANCE SURVEILLANCE SYSTEM—REPORT 2015



ZIKA STRATEGIC RESPONSE FRAMEWORK & JOINT OPERATIONS PLAN JANUARY-JUNE 2016

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1. SURVEILLANCE 2. RESPONSE 3.

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'SOCIAL MOBILISATION'





Canadian Critical Care Society

Canadian Association of Emergency Physicians

Association of Medical Microbiology & Infectious Diseases Canada



Ebola Clinical Care Guidelines



A guide for clinicians in Canada



Report #2 – Updated: October 28, 2014



Organized by the Public Health Agency of Canada

EBOLA VIRUS DISEASE (EBOLA) HOW TO USE YOUR THERMOMETER

Take your temperature 2x/DAY.













Turn the thermometer on.

Hold the tip under your tongue for up to **60 seconds** until it beeps.

Read the temperature.









Write your temperature on the form you got at the airport.

You can clean your thermometer with soap and water.



If your temperature is <u>100.4°F/38°C</u> or higher or you are feeling sick, contact your local public health authority immediately for further instructions.

1402A



3 in the table below to monitor for fever, along with any medications you take that may

F	Evening Medications taken today Other Ebola symptoms*?			
ne M)	Temperature Reading	(list)	Other Ebola symptoms*? Please describe.	

le pain and weakness, feeling generally unwell, sore throat, diarrhea, vomiting, stomach pain, unusual/new rash, unusual

PROCURE FOCOS DO MOSQUITO AEDES AEGYPTI SEMANALMENTE.

▼ FAÇA O CHECKLIST









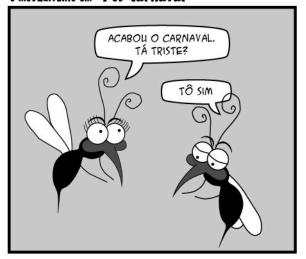


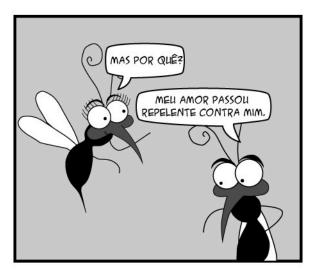






o mosquiteiro em "Pós-carnaval"







www.riocontradengue.rj.gov.br







Public Health PH... @PHAC_GC



TWEETS 2,345 FOLLOWING 175

FOLLOWERS 53.5K

LIKES

LISTS 2



Public Health PHAC @PHAC_GC · Jan 15

Updated Public Health Notice on Zika virus - Risk to Canadians remains low ow.ly/X8rfa









Public Health PHAC @PHAC_GC · Jan 15

Travel Health Notice Update: Zika virus – new guidance for women who are and trying to become pregnant ow.ly/X8rnc







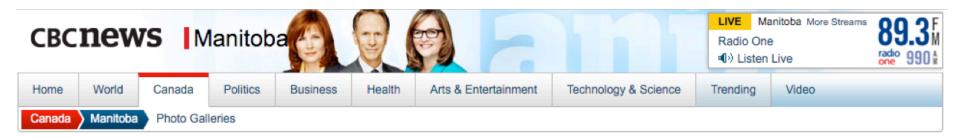
PREGNANT and living in an area with Zika?

What we know about Zika

- Zika can be spread from a mother to her fetus during pregnancy.
- Infection with Zika during pregnancy may be linked to birth defects in babies.
- Zika is spread mostly by the bite of an infected Aedes species mosquito.
 - » These mosquitoes are aggressive daytime biters. They also bite at night.
- There is no vaccine to prevent or medicine to treat Zika.

What we don't know about Zika

- When during pregnancy Z might cause harm to the fe
- How likely it is that Zika infection will affect your pregnancy.
- If your baby will develop be defects from the infection



Zika virus concerns prompt Canadian airlines to let travellers cancel or change flights

Air Canada says female customers will need to provide note from health-care professional

CBC News Posted: Jan 28, 2016 3:02 PM CT | Last Updated: Jan 28, 2016 8:07 PM CT



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Today

A mix of sun and clouds Fri
A few flurries

Sat Mainly sunny





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Pregnant Canadian woman, who was refused Zika test after Brazil trip, may choose abortion

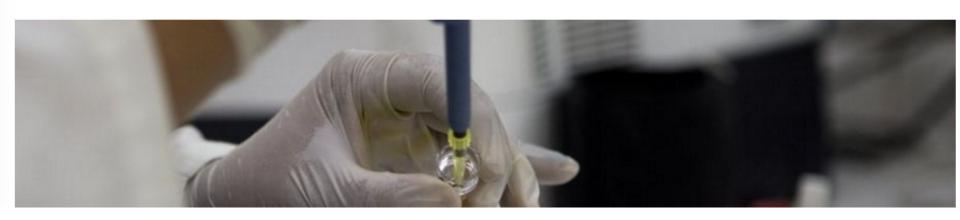






Zika virus infection 'through sex' reported in US

© 3 February 2016 US & Canada













Untreatable and hard-to-treat infections from carbapenem-resistant Enterobacteriaceae (CRE) bacteria are on the rise among patients in medical facilities. CRE have become resistant to all or nearly all the antibiotics we have today. Almost half of hospital patients who get bloodstream infections from CRE bacteria die from the infection.

- Some Enterobacteriaceae are resistant to nearly all antibiotics, including carbapenems, which are often considered the antibiotics of last resort.
- More than 9,000 healthcare-associated infections are caused by CRE each year.
- CDC laboratories have confirmed at least one type of CRE in healthcare facilities in 44 states.
- About 4% of U.S. short-stay hospitals had at least one patient with a serious CRE

PUBLIC HEALTH THREAT

An estimated 140,000 healthcare-associated Enterobacteriaceae infections occur in the United States each year; about 9,300 of these are caused by CRE. Up to half of all bloodstream infections caused by CRE result in death. Fortunately, bloodstream infections account for a minority of all healthcare-associated infections caused by Enterobacteriaceae. Each year, approximately 600 deaths result from infections caused by the two most common types of CRE, carbapenem-resistant Klebsiella spp. and carbapenem-resistant E. coli.

	Percentage of Enterobacteriaceae healthcare-associated infections resistant to carbapenems	Estimated number of infections	Estimated number of deaths attributed	
Carbapenem-Resistant Klebsiella spp.	11%	7,900	520	
Carbapenem-resistant E. coli	2%	1,400	90	

Making Health Care Safer

Stop Infections from Lethal CRE Germs Now



About 4% of US hospitals had at least one patient with a CRE (carbapenem-resistant Enterobacteriaceae) infection during the first half of 2012. About 18% of long-term acute care hospitals* had one.

42

One type of CRE infection has been reported in medical facilities in 42 states during the last 10 years.



CRE germs kill up to half of patients who get bloodstream infections from them.

Untreatable and hard-to-treat infections from CRE germs are on the rise among patients in medical facilities. CRE germs have become resistant to all or nearly all the antibiotics we have today. Types of CRE include KPC and NDM. By following CDC guidelines, we can halt CRE infections before they become widespread in hospitals and other medical facilities and potentially spread to otherwise healthy people outside of medical facilities.

Health Care Providers can

- Know if patients in your facility have CRE.
 - · Request immediate alerts when the lab identifies CRE.
 - Alert the receiving facility when a patient with CRE transfers, and find out when a patient with CRE transfers into your facility.
- Protect your patients from CRE.
 - Follow contact precautions and hand hygiene recommendations when treating patients with CRE.
 - Dedicate rooms, staff, and equipment to patients with CRE.
 - Prescribe antibiotics wisely.
 - Remove temporary medical devices such as catheters and ventilators from patients as soon as possible.

*Long-term acute care hospitals provide complex medical care, such as ventilation or wound care, for long periods of time.

HEALTH CARE PROVIDERS CAN:

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1. SURVEILLANCE 2. RESPONSE 3.

RESEARCH



FBOLA SUFFIT?

rVSV ZEBOV-GP

Titer: ≥ 1x108 pfu/

Lot No.: 003 05 13

Vial contains 1.0 ml

MFG Date: 30.05.20

Caution: New Drug

Federal Law to Inves



Six-year-old Cecilia Kamara from Robertsport, Liberia holds up a sign after receiving news about the Ebola vaccine. Photograph: Alphanso Appleton

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From Ebola to Zika, the Winnipeg virology lab solving all the world's disease problems lately

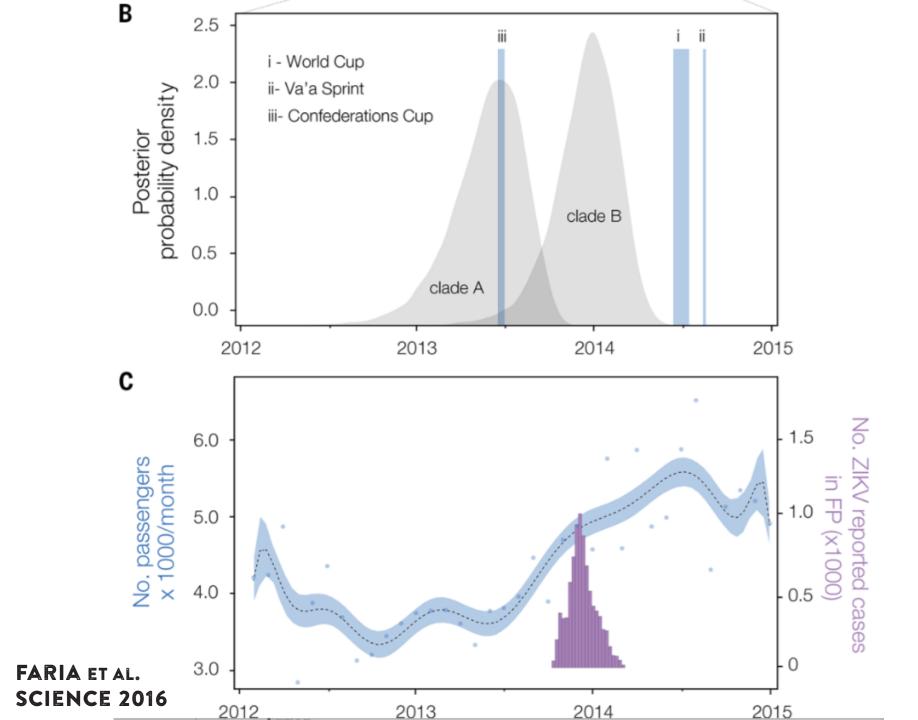


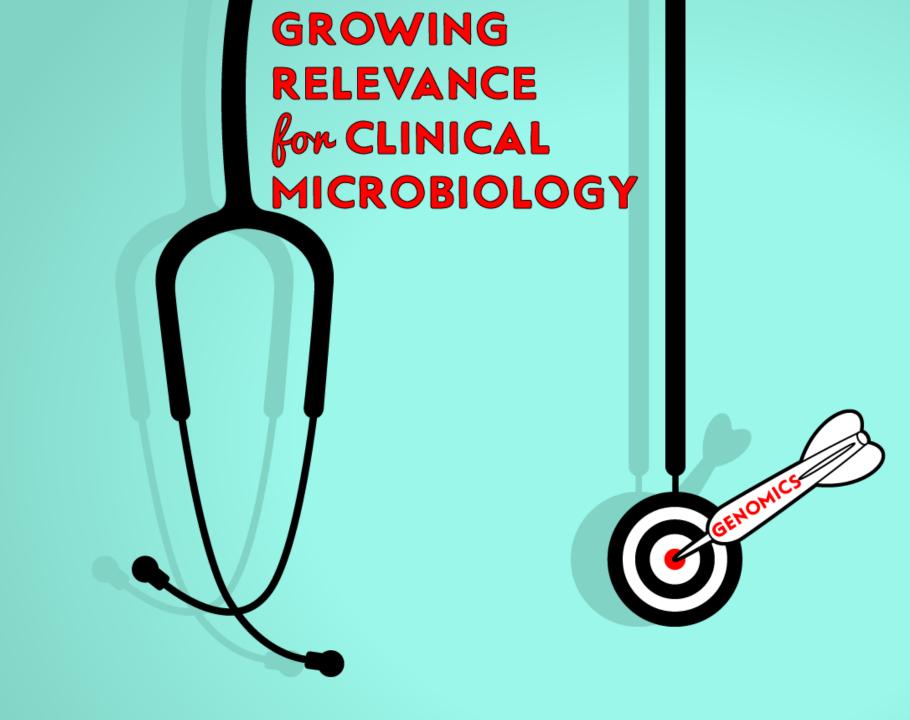
TRISTIN HOPPER | February 18, 2016 | Last Updated: Feb 19 11:49 AM ET More from Tristin Hopper | @TristinHopper

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COLISTIN (MCR-1) CMAJ RESISTANCE Medical knowledge that matters

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NEWS

Surveillance programs watching for colistin-resistant infections



The MCR-1 gene has been confirmed in Canadian patients and Ontario meat samples, says antimicrobial-resistance researcher Michael Mulvey.





International Health Regulations (20

INTERNATIONAL HEALTH

REGULATIONS (2005)

SECOND EDITION

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