Form Approved

OMB Control No.: 0920-1310 Expiration date: XX/XX/XXXX

AR Lab Network Alert Form for Candida auris

Regional lab or non-regional lab
State or jurisdiction of the data submitter
If non-regional lab, was isolate forwarded to regional lab?
If isolate was forwarded to regional lab, which regional lab?
ARLN isolate ID
ARLN specimen ID
Submitter specimen ID
Alert type
If alert is for C. auris, is it for C. auris identification?
If alert is for C. auris, is it for C. auris echinocandin resistance?
Facility - name
Facility - ID
Facility - state
Specimen collection date
Specimen type
Patient ID
Patient age
Patient age unit
Clinical sample or isolate
Completion status

Public reporting burden of this collection of information is estimated to average **6** minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB Control Number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA 0920-1310