Host

CHARACTERISTICS

- Svnonvm or Candidiasis, thrush, Candida claussenii, Candida **Cross Reference** langeronii
- Disease Opportunistic pathogen in humans, as it can cause disease in immunodeficient and immunocompetent indivduals that can be life threatening. The most frequent clinical form is thrush/oral candidiasis. Women can be infected with vaginal candidiasis.
- Morphology It is an encapsulated and diploid polymorphic fungus belonging to the family Candidaceae.
- 700nosis None

RISK GROUP & CONTAINMENT REQUIREMENTS

- ABSL-2 For all procedures utilizing infected animals. BSL-2/BSL-2+ For all procedures involving suspected or known infectious specimen or cultures, work in a BSC unless otherwise approved and stated in labspecific manual. Risk Group 2 Agents that are associated with human disease
- which is rarely serious and for which preventive or therapeutic interventions are often available.

LABORATORY HAZARDS

Primary Hazards Accidental parenteral inoculation, direct exposure of the skin to the pathogen. Samples described in IBC protocol. Epithelial Sources scrapings or exudates from lesions; sputum; bronchoalveolar lavage; blood Lab Acquired Low risk of infection to laboratory worker Infections (LAIs)

PERSONAL PROTECTIVE EQUIPMENT

| Additional Precautions | Additional PPE may be required depending on lab-specific SOPs and IBC Protocol. |
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| Minimum PPE Requirements | Lab coat, disposable gloves, safety glasses, closed toed shoes, long pants. |

SPILL PROCEDURES

- Large Immediately notify all lab personnel and clear the area. Remove any contaminated PPE/clothing before exiting the lab. Lock all entry doors, post warning signage, and deny entry. Call DPS (213-740-4321) and ask to notify EH&S. Inform the PI and/or Lab Manager/Supervisor as soon as possible.
- Small Notify all lab personnel lab. Remove contaminated PPE and don new PPE. Cover spill area with absorbent material and add fresh 1:10 bleach:water. Allow 20 minutes (or as directed) contact time. After 20 minutes, clean up and dispose of materials.

VIABILITY

Use 10 % dilution of household bleach (minimum Disinfection 0.3% sodium hypochlorite) for 20 to 30 minutes, or an acceptable time approved by IBC and EH&S.

VIABILITY

Survival Outside Can survive on inanimate surfaces for 24 hours to 120 days, on palms for about 45 minutes, and distilled water at room temperature. C. albicans was isolated from bed-sheets, cots, and washbasins of nurseries. Can survive on drying in darkness for 5 hours, and 1 hour if also exposed to light.

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| HEALTH HAZARDS | | |
| Host Range | Humans | |
| Incubation Period | Unknown | |
| Infectious Dose | Unknown | |
| Modes of Transmission | Patient's own flora. Rare nosocomial transmission has also been reported to occur from inanimate surface, from hands of health care workers, or between patients. | |
| Signs and Symptoms | Thrush/oral candidiasi is charachterized by single or multiple, ragged white patches; vaginal candidiasis is characterized by thick, curd like discharge (leucorrhea), eruption and itching of vulva. | |
| EXPOSURE PROCEDURES | | |
| Medical Follow- up | Visit USC's designated healthcare provider. Bring a copy of this PSDS. | |
| Mucous Membrane | Flush eyes for 5-10 minutes at eyewash station. | |
| Other Exposures | Immediately wash affected area with soap and water for 15 minutes. | |
| Reporting | Immediately report incident to supervisor, notify EH&S, and complete Manager's Report. | |
| MEDICAL PRECAUTIONS/TREATMENT | | |
| Prophylaxis | Fluconazole used for infections in HIV-infected patients. Note: Prolonged exposure is associated with emergence of fluconazole-resistant strains. | |
| Surveillance | Monitor for symptoms of infection. | |
| Treatment | Administer proper drug therapy. Eliminating predisposing factors such as administration of antibiotics, steroids, and immunosuppressants; humidity, local maceration, vaginal pH, removal of infected catheter can help in resolving infections. | |
| USC Requirements | Immediately report any exposures to Environmental Health & Safety. | |
| Vaccines | None available | |

REFERENCES

| BMBL | Canadian PSDS |
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| http://tiny.cc/cdc-bmbl | http://tiny.cc/canada-aspergls-psds |
| CDC | NIH Guidelines |
| https://www.cdc.gov/ | <u>http://tiny.cc/nih-bio-secure</u> |
| Virginia Tech | Montana State University |
| <u>http://tiny.cc/vt-psds</u> | <u>http://tiny.cc/msu-psds</u> |

