AR Solutions *In Action*

CDC's Investments to Combat Antibiotic Resistance Threats Nationwide

FISCAL YEAR 2017

COLORADO

$4,272,480

Funding for AR Activities
Fiscal Year 2017

One of 10 sites for the Emerging Infections Program

HIGHLIGHTS

FUNDING TO STATE HEALTH DEPARTMENTS

$660,783

RAPID DETECTION & RESPONSE to emerging drug-resistant germs is critical to contain the spread of these infections.
With 2016 funding, Colorado increased capacity to respond to emerging threats, including resistant germs, by enhancing lab capacity, coordinating data systems and streamlining outbreak response. When the public health lab detects CRE, the HAI/AR Program provides recommendations to the healthcare facility for preventing transmission.

$600,001

HAI/AR PREVENTION works best when public health and healthcare facilities partner together to implement targeted, coordinated strategies to stop infections and improve antibiotic use.
With 2016 funding, Colorado engaged local public health agencies, enhanced partnerships and expanded its work with healthcare facilities. The HAI/AR program conducted one-on-one assessments to assist 28 healthcare facilities with infection prevention and/or improving antibiotic use.

$454,595

FOOD SAFETY projects protect communities by rapidly identifying drug-resistant foodborne bacteria to stop and solve outbreaks and improve prevention.
Colorado implemented whole genome sequencing of *Listeria*, *Salmonella*, *Campylobacter* and *E. coli* isolates submitted to its lab and began uploading sequence data into PulseNet for nationwide monitoring of outbreaks and trends. In Fiscal Year 2018, Colorado will begin simultaneously monitoring these isolates for resistance genes. When outbreaks are detected, local CDC-supported epidemiologists investigate the cases to stop spread.

$1,131,432

GONORRHEA RAPID DETECTION & RESPONSE works with state and local epidemiology and laboratory partners to test for and quickly respond to resistant gonorrhea to stop its spread in high risk communities. Only one treatment option remains for gonorrhea and resistance continues to grow.
With 2016 funding, Colorado increased their local response capacity and initiating rapid antibiotic susceptibility testing—which determines how well a gonorrhea strain will respond to specific antibiotics. Colorado conducted rapid antibiotic susceptibility testing on 77 gonorrhea specimens in May. Test results are used to inform local outbreak response action, national treatment guidelines and antibiotic resistance trends.

$1,095,669

EMERGING INFECTIONS PROGRAM (EIP) sites improve public health by translating population-based surveillance and research activities into informed policy and public health practice.
CDC's EIP network is a national resource for surveillance, prevention and control of emerging infectious diseases—like antibiotic-resistant bacteria and fungi. Learn more: www.cdc.gov/ncezid/dpei/eip.

 This data represents CDC's largest fundng categories for AR. It shows domestic, extramural funding that supports AR activities from multiple funding lines. **AR:** antibiotic resistance **HAI:** healthcare-associated infection

CDC provides critical support to every state to protect Americans from antibiotic resistance.

www.cdc.gov/ARinvestments

U.S. Department of Heath and Human Services
Centers for Disease Control and Prevention

FUNDING TO UNIVERSITIES & HEALTHCARE PARTNERS

$330,000

ASSOCIATION OF OPERATING ROOM NURSES: Discovering & Implementing What Works
Even when cleaned, medical devices can carry germs, including those that are resistant to antibiotics. Investigators will analyze and assess the feasibility of CDC's National Healthcare Safety Network (NHSN) serving as a national registry for medical devices in order to identify those that may cause infections.