Module 1
Section A: Factors Influencing Likelihood of Disease Presence

Term
Immunocompromised person

Module 1
Section A: Factors Influencing Likelihood of Disease Presence

Term
Opportunistic organisms

Module 1
Section A: Factors Influencing Likelihood of Disease Presence

Term
True pathogens

Module 1
Section B: Local and Global Health Factors

Term
Public health

Module 1
Section C: Detecting, Identifying, and Responding to Disease

Term
Aerobic bacteria

Module 1
Section C: Detecting, Identifying, and Responding to Disease

Term
Bacteria

Module 1
Section C: Detecting, Identifying, and Responding to Disease

Term
Biofilms

Module 1
Section C: Detecting, Identifying, and Responding to Disease

Term
Capsule

Organisms that tend to become pathogenic only when an individual has some level of immunosuppression.

A person who has one or more defects in the body's normal defense mechanisms that predispose him or her to infections, often life-threatening, that would otherwise not occur.

The science and art of preventing disease, prolonging life, and promoting health through the organized efforts and informed choices of society, organizations, public and private communities, and individuals. (CMS)

Pathogens able to cause infection and disease.

Free-living, single-celled organisms that multiply through chromosomal replication and cellular division.

Bacteria that have an absolute requirement for oxygen; without it, they do not grow.

An organized glycocalyx that is firmly attached to the cell wall.

Attached, architecturally defined, three-dimensional environments that may contain either single or multiple species of microorganisms.

Module 1
Section C: Detecting, Identifying, and Responding to Disease

Term
Endospores

Module 1
Section C: Detecting, Identifying, and Responding to Disease

Term
Endotoxins

Module 1
Section C: Detecting, Identifying, and Responding to Disease

Term
Enteric bacteria

Module 1
Section C: Detecting, Identifying, and Responding to Disease

Term
Exotoxins

Module 1
Section C: Detecting, Identifying, and Responding to Disease

Term
Facultative anaerobes

Module 1
Section C: Detecting, Identifying, and Responding to Disease

Term
Fungus

Module 1
Section C: Detecting, Identifying, and Responding to Disease

Term
Glycocalyx

Module 1
Section C: Detecting, Identifying, and Responding to Disease

Term
Gram-negative bacteria

Surface components (complexes of bacterial proteins, lipids, and polysaccharides remaining firmly in the bacteria) of Gram-negative bacteria.

Cell structures composed of nuclear material and protein that enable bacteria to survive extreme conditions.

Toxins that are secreted by bacteria, mainly those that are Gram-positive.

Bacteria that typically are found in the gastrointestinal tract.

A term that refers generically to all members of the kingdom fungi.

Bacteria that can use oxygen if it is present but can grow without it.

Bacteria in which the cell walls contain only one (or very few) layers of peptidoglycan.

Chemical substances that surround cells.

Module 1
Section C: Detecting, Identifying, and Responding to Disease

Term
Gram-positive bacteria

Module 1
Section C: Detecting, Identifying, and Responding to Disease

Term
Microaerophilic bacteria

Module 1
Section C: Detecting, Identifying, and Responding to Disease

Term
Molds

Module 1
Section C: Detecting, Identifying, and Responding to Disease

Term
Mycosis

Module 1
Section C: Detecting, Identifying, and Responding to Disease

Term
Non-enteric bacteria

Module 1
Section C: Detecting, Identifying, and Responding to Disease

Term
Obligate anaerobes

Module 1
Section C: Detecting, Identifying, and Responding to Disease

Term
Parasite

Module 1
Section C: Detecting, Identifying, and Responding to Disease

Term
Prions

Bacteria that require 2 to 10% of the normal atmospheric concentration (21%); may also require increased carbon dioxide concentrations.

Bacteria in which the cell wall consists of many layers of peptidoglycan, forming a thick rigid structure.

Infections or diseases caused by fungi.

Usually reproduce by elongation and fragmentation of their hyphae (or pseudohyphae), which are tube-like projections; they produce fluffy, cottony, wooly, or powdery colonies.

Bacteria that grow only in the complete or nearly complete absence of oxygen and are inhibited or killed by oxygen.

Bacteria that typically are found outside the gastrointestinal tract; are frequently opportunistic and found in the environment (e.g., soil and water).

Infectious particles of abnormally folded proteins that do not contain DNA or RNA.

An organism that lives on or within another organism and obtains an advantage at the expense of the host.

Module 1
Section C: Detecting, Identifying, and Responding to Disease

Term
Slime layer

APIC CIC Learning System © 2025

Module 1
Section C: Detecting, Identifying, and Responding to Disease

Term
Virions

APIC CIC Learning System © 2025

Module 1
Section C: Detecting, Identifying, and Responding to Disease

Term
Virulence

APIC CIC Learning System © 2025

Module 1
Section C: Detecting, Identifying, and Responding to Disease

Term
Viruses

APIC CIC Learning System © 2025

Module 1
Section C: Detecting, Identifying, and Responding to Disease

Term
Yeasts

APIC CIC Learning System © 2025

Module 1
Section D: Colonization/Infection and Immune System Responses

Term
Antigen

APIC CIC Learning System © 2025

Module 1
Section D: Colonization/Infection and Immune System Responses

Term
Colonization

APIC CIC Learning System © 2025

Module 1
Section D: Colonization/Infection and Immune System Responses

Term
Colonization pressure

APIC CIC Learning System © 2025

Intact viral particles made up of nucleic acid (either RNA or DNA), a protein coat (capsid), and possibly an envelope composed of viral proteins and host cell lipids.

An unorganized glycocalyx that is loosely attached to the cell wall.

Obligate intracellular parasites that require living host cells to grow and reproduce and are dependent on the cells' synthetic and metabolic machinery.

The measure of a microbe's ability to invade and create disease in a host, determined by characteristics that relate to the favored site of invasion, disease induction, and avoidance of host resistance.

Any substance identified by the human immune system as “other” or “foreign," usually taking the form of a molecule originating from a bacterium or other invader.

Unicellular, round to oval organisms ranging in size from 2 to 60 millimeters.

The proportion of other patients or residents colonized within a defined population or area.

The presence of microorganisms in or on a host with growth and multiplication but without causing any symptoms or disease.

Module 1
Section D: Colonization/Infection and Immune System Responses

Term
Contamination

Module 1
Section D: Colonization/Infection and Immune System Responses

Term
Extrinsic contamination

Module 1
Section D: Colonization/Infection and Immune System Responses

Term
Incubation period

Module 1
Section D: Colonization/Infection and Immune System Responses

Term
Infection

Module 1
Section D: Colonization/Infection and Immune System Responses

Term
Intrinsic contamination

Module 1
Section D: Colonization/Infection and Immune System Responses

Term
Latent period

Module 1
Section D: Colonization/Infection and Immune System Responses

Term
Normal flora

Module 1
Section D: Colonization/Infection and Immune System Responses

Term
Pseudo-outbreaks

Contamination that occurs subsequent to manufacturing, during preparation, storage, or administration within the healthcare facility.

The presence of an infectious agent on a body surface or inanimate object.

The entry into and multiplication of an infectious agent in the tissues of the host and tissue damage resulting in apparent or unapparent changes in the host.

The period of time from exposure to some infectious source to the development of signs and symptoms.

The time from exposure to the beginning of the infectious period.

Contamination that occurs during the manufacturing process or transport to the healthcare facility.

Increases in positive cultures of the same organism (clusters) that occur with no evidence of disease.

Microbes that normally live in and on the body without causing infection or disease to the host.

Module 1
Section D: Colonization/Infection and Immune System Responses

Term
Resident flora

APIC CIC Learning System © 2025

Module 1
Section D: Colonization/Infection and Immune System Responses

Term
Transient flora

APIC CIC Learning System © 2025

Module 1
Section E: Common Infections and Their Symptoms

Term
Bacteriuria

APIC CIC Learning System © 2025

Module 1
Section E: Common Infections and Their Symptoms

Term
Multiple-drug-resistant organisms (MDROs)

APIC CIC Learning System © 2025

Module 1
Section I: Clinical Testing

Term
Antibiogram

APIC CIC Learning System © 2025

Module 1
Section I: Clinical Testing

Term
Culture

APIC CIC Learning System © 2025

Module 1
Section I: Clinical Testing

Term
Susceptibility

APIC CIC Learning System © 2025

Module 1
Section J: Antimicrobial Stewardship

Term
Antibiotic

APIC CIC Learning System © 2025

Normal flora that colonize the skin and mucosa temporarily, without invading tissues.

Normal flora that are always present on the skin and throughout the body, including the body's colonizing bacteria.

Organisms that develop resistance to multiple antimicrobials, especially those that are traditionally used for treatment.

The presence of bacteria in the urine.

A laboratory technique used to grow (cultivate) bacteria and yeast.

A report that summarizes typical patterns of susceptibility to antibiotics by specific species of bacteria.

A type of antimicrobial that is synthesized by a living microorganism, usually a fungus.

Describes whether an identified organism is able to be treated successfully using a given antimicrobial.

Module 1
Section J: Antimicrobial Stewardship

Term
Antimicrobial

APIC CIC Learning System © 2025

Module 1
Section J: Antimicrobial Stewardship

Term
Antimicrobial stewardship

APIC CIC Learning System © 2025

Module 1
Section J: Antimicrobial Stewardship

Term
Antimicrobial stewardship programs (ASPs)

APIC CIC Learning System © 2025

Module 1
Section J: Antimicrobial Stewardship

Term
Empiric therapy

APIC CIC Learning System © 2025

Module 1
Section J: Antimicrobial Stewardship

Term
Half life

APIC CIC Learning System © 2025

Module 1
Section J: Antimicrobial Stewardship

Term
Intermediate-susceptible

APIC CIC Learning System © 2025

Module 1
Section J: Antimicrobial Stewardship

Term
Minimal inhibitory concentration (MIC)

APIC CIC Learning System © 2025

Module 1
Section J: Antimicrobial Stewardship

Term
Resistant

APIC CIC Learning System © 2025

Practices dedicated to improving and optimizing antimicrobial selection, dosage, and duration while minimizing resident harm.	A substance, such as an antibiotic, that kills or stops the growth of microbes, including bacteria, fungi, or viruses; grouped according to the microbes they act against (antibiotics, antifungals, and antivirals). (CDC)
Involves administering an antimicrobial to a patient before definitive information about a causative pathogen is available, typically because the results of the culture are pending.	Programs that optimize the selection, dosage, and duration of antimicrobial treatment to produce the best clinical outcome with minimal toxicity to the resident.
In antimicrobial susceptibility testing, level at which a drug is likely to be effective only at body sites where it is physiologically concentrated or at other body sites if higher-than-usual dosing regimens are used.	The time it takes for the body to metabolize half of a drug.
In antimicrobial susceptibility testing, level at which a drug is unlikely to be effective for the treatment of infection unless predictably toxic dosages are used.	The lowest concentration of a drug that can inhibit microbial growth in vitro (in the lab).

Module 1
Section J: Antimicrobial Stewardship

Term
Susceptible

Module 1
Section K: Diagnostic Stewardship and Communication

Term
Diagnostic stewardship

Coordinated guidance and interventions to improve appropriate use of microbiological diagnostics to guide therapeutic decisions; should promote appropriate, timely diagnostic testing, including specimen collection, and pathogen identification and accurate, timely reporting of results to guide patient treatment. (WHO)	In antimicrobial susceptibility testing, level at which a drug is likely to be effective for the treatment of infection using a standard dosage.