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A conceptual framework for nomenclatural stability and validity of medically important fungi: a proposed global consensus guideline for fungal name changes supported by ABP, ASM, CLSI, ECMM, ESCMID-EFISG, EUCAST-AFST, FDLC, IDSA, ISHAM, MMSA, and MSGERC

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ABSTRACT The rapid pace of name changes of medically important fungi is creating challenges for clinical laboratories and clinicians involved in patient care. We describe two sources of name change which have different drivers, at the species versus the genus level. Some suggestions are made here to reduce the number of name changes. We urge taxonomists to provide diagnostic markers of taxonomic novelties. Given the instability of phylogenetic trees due to variable taxon sampling, we advocate to maintain genera at the largest possible size. Reporting of identified species in complexes or series should where possible comprise both the name of the overarching species and that of the molecular sibling, often cryptic species. Because the use of different names for the same species will be unavoidable for many years to come, an open access online database of the names of all medically important fungi, with proper nomenclatural designation and synonymy, is essential. We further recommend that while taxonomic discovery continues, the adaptation of new name changes by clinical laboratories and clinicians be reviewed routinely by a standing committee for validation and stability over time, with reference to an open access database, wherein reasons for changes are listed in a transparent way.

KEYWORDS nomenclature, taxonomy, fungi

Development of the modern naming system in medical mycology

A dvanced and novel diagnostic and research methods, particularly nucleic-acids sequencing, have revolutionized microbial taxonomy. Since rearrangements in the Tree of Life are closely linked to the names of the newly recognized entities, name

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Copyright © 2023 de Hoog et al. This is an open-access article distributed under the terms of the Creative Commons Attribution 4.0 International license. changes are inevitable. This happens everywhere in microbial taxonomy and is the result of scientific progress. In the kingdom Fungi, taxa that were previously delineated by morphological features or physiological profiles are being recharacterized by sequence data underlying their phylogenetic positions. However, unlike most prokaryotic microbes, fungi exhibit a wealth of distinguishing phenotypic characteristics which have served as the basis for accruing clinical data over the centuries. Many fungi have a complicated life cycle, with one or more asexual and sexual forms of sporulation that have very different appearances and are produced under different growth conditions. In the past, it was often not known that these different forms, or morphs, belonged to the same species. This problem was mitigated by the development of a naming system with two separate categories: one name for the sexual morph (teleomorph), and one (or more) for each asexual morph (anamorph). As sexuality is mostly expressed in the environment, and asexual morphs are often preponderant in vitro and in the animal host, the connection between the two or more life forms remained problematic despite increasing availability of DNA data, awaiting experimental establishment. Taxonomic categories above the species level were based on the sexual morph and prioritized, while the separate system for asexual ones was generally acknowledged to be artificial although some authors also published names of families and even higher ranks based only on asexual morphs. Although imperfect, abandoning the knowledge that has been accrued during 270 years of mycological research under this "old" nomenclature system is more painful than in other areas of research, particularly as the old nomenclature is critically linked to patient management.

Challenges and limitations of molecular taxonomy for medically important fungi

With DNA sequencing and other non-microscopic methods, able to firmly establish species, the system with dual names became increasingly obsolete. After some 20 years of debate, and strongly divided opinions voiced by a Special Committee on alternate names (1), followed by a symposium "One Fungus One Name" held in Amsterdam, in 2011, many of the mycological community came to a consensus to abandon the classical separate naming of different morphs of the same species with the "Amsterdam Declaration" (2). Subsequently, this new direction was formally proposed on the debate "floor" by Redhead (3), disputed, and, finally, adopted by the international community at the International Botanical Congress held in Melbourne in 2011. The change was effective from 2011 and was retro-active (4). This enabled a closer representation of the natural system than phenotypic characterization. However, since many names used in medical and veterinary mycology were in the asexual-based artificial system, the need arose for a fundamentally different approach in systematization. Formal procedures were introduced to keep the number of changes within limits through protected lists of names developed by working groups operating under the auspices of the International Commission on the Taxonomy of Fungi. The ensuing name changes of the combined transition toward molecular phylogeny and priority of the oldest name irrespective of sexual states are dramatic, leaving few names unaffected among the medical fungi. Comparing the second and fourth editions of the Atlas of Clinical Fungi, of the names accepted in 2020 (5), only 30% were still used in the same sense as in 2000. This demonstrates an overwhelming impact of molecular taxonomy on medical mycology, larger than any other discipline within clinical microbiology practice.

Numerous authors have expressed their concerns about the pace of name change in mycology and provided lists of recommended names primarily focused on the species level (6–10), while others recommended to accept and adopt generic name changes (11–13). The present paper aims to mitigate some of these problematic shifts with proposals, which we think are practicable and minimally disruptive for the advancement of science. Certainly, naming of medically important fungi needs a thorough renovation. In many historical handbooks and guidelines, grand subdivisions are based on obsolete morphological criteria, such as "Dematiaceae," a family designation for fungi with often

large conidia and conidiophores carrying melanin in the cell wall, or "*Coelomycetes*," a class rank name for those forming asexual cup- or flask-like spore-bearing structures anywhere in their asexual life cycle.

Molecular phylogeny has enabled major advances in providing logical coherence between taxonomic entities (14) and has led to better understanding of the origin, relationships, and properties of fungi—including whether they are likely to be pathogens of concern or mycotoxin producers. Phylogeny sheds light upon such potentially shared ecological strategies between species. Whenever obvious benefits of the new naming system exist, name changes are easily accepted by stakeholders in the medical community. An example of one such easy adoption is the change of the intracellular pathogen *Talaromyces marneffei* separated from the strictly saprobic *Penicillium* species (15). The natural classification of dermatophytes (16) also met limited resistance. Another example is the segregation of morphologically similar, but phylogenetically extremely remotely related (i.e., ascomycetous versus basidiomycetous) fungi, now placed in separate genera [*Geotrichum/Trichosporon* (17); *Sporothrix/Quambalaria* (18)]. A more recent example can be found in the replacement of the genus name *Phialemoniopsis/Phialemonium* by *Thyridium* which turned out to be the name given earlier to the sexual morph (19).

However, reestablishing the correct systematic position of tens of thousands fungal names cannot be done by a simple declaration, and in some groups of fungi, molecular data is not easy to obtain. The above-mentioned, well-accepted examples share their application of a holistic, biological approach to taxonomy, demonstrating that the newly separated groups are fundamentally different in life cycle, habitat choice and clinically relevant parameters, with molecular phylogeny as a supporting feature facilitating definite identifications. This demonstrates an optimal approach to reach meaningful taxonomic name changes in mycology. In contrast, resistance against change invariably entails cases where the change involves a relatively homogeneous group without clear character difference, which is divided exclusively based on phylogeny. An example is the rearrangement of the ecologically similar (20) genera Curvularia and Bipolaris where the multi-character phenotypic separation did not match with molecular barcoding (21). Conversely, species of Chaetomium were assigned to several novel genera (22). The latter study made these rearrangements with a data set containing strains from indoor habitats alone, implying that criteria other than phylogeny were insignificant; such cases should be reconsidered using a wider range of named species and ecologies.

We advocate that name changes of medically important fungi should be meaningful and carefully applied to reduce the potential for confusion by those responsible for patient care. Name changes are effective and will reach wide application only when based on fundamental differences that have shaped evolution and have clinical relevance. Two levels of diversity, i.e., that of the species and of the genus, have entirely different drivers (7, 8) which are discussed separately, i.e., the subdivision of a species, and the rearrangement and splitting of genera.

Species diversity: The fragmenting epithet

The borderline between species is not clear-cut, and there are over 30 different species concepts used across biology (23). The classical biological concept is not directly applicable to microbes. Genetic composition and viability of progeny may vary anywhere between 0% and 100% due to all sorts of constraints. Sexually hyperactive strains are able to mate beyond established species borders (24, 25), and this is recognized as hybridization in some plant pathogenic fungi where hybrid nomenclature has been introduced. Conversely, progeny may lack genetic recombination (26–28) or may produce sterile hybrids unable to mate (29, 30). Crosses appearing to be sexual may be uniparental, underlining that fungi are able to propagate asexually over extended periods. Many fungi have alternative sexual strategies, which do not require an opposite mating partner (31). Ideally, a species is genetically focused by genetic interaction, but

most fungi multiply parts of their life cycle clonally to increase successful genotypes. Asexual reproduction may be dominant, and sexuality often remains cryptic.

The near-absence of sexuality leads to fragmentation of the species into numerous molecular siblings. In taxonomic practice in fungi, the siblings are recognized by mutations in sections of barcoding loci, such as the rDNA ITS regions, CAM, rPB1, rPB2, TEF1, or TUB2 (BenA) (32). Genealogical concordance enables in silico detection of sexual recombination, providing an operational criterion to verify the species borderline. In taxonomic practice of large data sets, however, most authors use concatenated barcoding sequences to provide molecular distances that are judged sufficient for novel species description. For example, depending on the genes studied, numerous siblings were observed within the genera Cladosporium (33) distinguishing 54 siblings in the C. cladosporioides complex and Fusarium (34) distinguishing 74 siblings in the F. fujikuroi complex. In plant pathogens, clonal expansion may occur after horizontal gene transfer of pathogenicity islands (35) leading to lineages, which are sometimes known as special forms. These emerging genotypes may be sampled more frequently as a result and have a higher chance of being detected, giving the false impression of obligate host adaptation. However, the responsible horizontally transferred accessory chromosomes can be dispensable (36), and the species can infect another susceptible host, as in the case of the banana-fruit infecting pathogen Fusarium musae that has been encountered in human infection and suggested as a possible health concern (37–39).

Decreased sexuality leads to higher clonal diversity (40, 41). An example from clinical fungi is given by dermatophytes, which lose sexuality upon adaptation to the human host, and whose mating types evolve differentially (42, 43). Conversely, numerous genotypes without ecological or clinical differentiation may emerge within a single species (44). Thus, phylogenetic distance in a particular gene region alone is not always a sufficient criterion for novel species description. Distinction of clones based only on molecular difference answers epidemiological questions and is essential to reveal sources of contamination and routes of infection. Speciation, however, is a slower process, with slight differences in ecological preferences of drivers of future separation that ultimately leads to loss of recombination ability. Many barcoding markers are not transcribed and do not result in different evolutionarily relevant properties; they just are a proxy of relevant differences elsewhere in the genome. Addition of more genes should increase the stability of the tree (45).

Species are an amalgamation of genetically deviating lineages, bordered by increasing inability to recombine and produce viable progeny. In contrast to the phenotypic approach, molecular data enable recognition of each lineage. Rather than species, the concept of "species complex" has become a trend. A complex combines molecular siblings without known gene flow under a single umbrella. In most fungal groups, the potential ability of hybridization and recombination between siblings has not been tested. Multi-locus analysis of non-transcribed markers provides potential diversity which is close to infinite (46). Novel names for the individual lineages may conceal the close affinity to the classical species of the aggregate.

Suggestions for the stability of species names in medical mycology

Given the above-described fragmentation of species into named molecular siblings and to promote stability of species names, taxonomy should be separated from epidemiology. Taxonomy and epidemiology both involve microbial diversity and overlap because species are distinguished from intraspecific lineages genetic separation which is difficult to establish. Rules of botanical nomenclature such as on typification need to be evaluated retrospectively and numerous debatable cases will appear (47). In addition, medical mycology covers only a very small fragment of global biodiversity studies, and endeavoring to impose rules from a medical perspective to the much larger study areas in agriculture, ecology, and industry and involving the entire fungal kingdom is unproductive. Rather, we would suggest adoption of the following recommendations:

- For closely related entities, official nomenclatural categories such as subspecies, variety, and form are available. Individual clones and genotypes below the concordant species level are preferably numbered rather than named (48) as long as they do not fulfill a number of criteria that are in use to define species (outlined above). This enhances the link to the overarching species name and facilitates the connection with existing literature.
- For the description of closely related species, data besides phylogenetic distance, such as the absence of recombination by genealogical concordance, and presence of phenotypic, ecological, clinical, or evolutionarily relevant parameters should be included.
- The species complex, also known as a species aggregate or series, is a practical recommendation rather than a solid scientific conclusion and, thus, may be subject to improved circumscription, covering more siblings defined with the ex-type strain as reference.
- To establish the classical species as the portal toward all existing literature, it is recommended that the overarching species complex name is always mentioned, followed by the sibling's or cryptic species name.
- As species names are linked to (epi)type material as the ultimate reference, this should be accessible to investigation, and hence, deposition of a living culture in a reference collection should become mandatory in mycology for those fungi that can be cultured; if the type is a drawing or in inaccessible fungarium or deteriorated herbarium material and, therefore, unrecognizable molecularly, epi-typification or deposition of a reference culture is strongly encouraged.
- Mycologists introducing changes near the species level should be required to
 provide criteria with which the species at hand can be recognized, i.e., a diagnosis,
 as is already recommended in the Code.
- Name changes generally acquire wide recognition only after the underlying taxonomy has been confirmed in peer-reviewed papers by separate groups of researchers using trees with different taxon sampling. Name stability and validation should be held to the highest possible standard for medically important fungi where clinical decisions based upon that information directly influence patient management.
- As taxonomic science progresses, a committee composed of clinical microbiologists, physicians, medical mycologists, and taxonomists would review proposed name changes for medical relevance, validity, and stability for adoption in clinical laboratories and patient care.

Genus diversity: the phylogenetic framework

At the genus level, the problems are entirely different. While species are subdivided because diverse entities are distinguishable by modern methodology, at the genus level, the central question is the position in the phylogenetic Tree of Life. To this aim, markers with a lower mutation rate are used, particularly those of the ribosomal repeat. Numerous methods have been developed to optimally reflect the course of evolution (49). Different gene trees are expected to be concordant albeit with different resolution. Reclassification of a fungus leads to a new combination of a genus name where the original species epithet is maintained. Consequently, generic rearrangements have become a major source of naming instability.

In contrast to the species, there are no operational molecular criteria to define and circumscribe a genus. All taxonomic entities above the species level can be introduced at will. Indeed, different traditions in the respective research areas have led to genera enormously deviating in size and level of intrageneric diversity. Construction of phylogenetic trees has become the nearly exclusive approach in establishing the position and size of genera. However, as phylogenetic trees are fundamentally relative, being based on mutual comparison of its members, generally using limited numbers of barcoding gene regions which are for diagnostics rather than for taxonomy, they suffer from inherent instability during the early years of molecular exploration. Although methods of tree reconstruction are highly sophisticated, the underlying taxon sampling effect causes variation with every selection of objects in the tree. Sampling may be relatively complete in well-known groups with a long history of research, but a balanced overview of extant diversity concerns selected groups with practical significance rather than complete genera.

In common taxonomic practice, the main generic parameter is phylogenetic distance. In this approach, genera are statistically supported aggregates of similar species as recognizable clades by conserved, single or concatenated markers. Without analysis of concordance of genes, molecular phylogeny alone is one-dimensional, similar to the obsolete approach of using only microscopic morphology. Different levels of diversity have largely been determined by the taxonomic history of the genus at hand. Many newly created genera are clades that contain just a few species. Rearrangement of such clades requires creation of other genera; small genera comprising just a few species, thus, have a large risk of further fragmentation. As an example, Scopulariopsis and *Microascus* were previously distinguished as being asexual or sexual, respectively; presently, the names are used for two groups that are molecularly distinct, with a small genus Pithoascus between the clades that contain the type species of the two genera (50). Phenotypic descriptions of Scopulariopsis and Microascus in the new concepts are nearly identical. In such a case, synonymy of Pithoascus with the oldest generic name, Microascus, would have required just a few name changes of rare fungi and may be a more pragmatic approach. Another example is the afore-mentioned separation of Curvularia and Bipolaris, where phylogeny did not match with classical phenotypes. Prioritizing phylogeny, Manamgoda et al. (21) reshuffled species of both genera, but a more parsimonious solution would have been the recognition that the bipartition apparently does not exist, giving priority to the single genus name Curvularia.

In contrast, the large genus *Aspergillus* with its characteristic conidiophores was recognized as a group since its establishment in 1809 and now comprises numerous smaller clades. The genus is monophyletic (51), but distances between ultimate members of the genus clade are much larger than usual. In addition, fungi without the characteristic aspergillus-like conidiophores may appear to contain similar genotypes, leading to merging of such genera (e.g., *Phialosimplex, Polypaecilum*) with *Aspergillus* (52). Broader generic circumscriptions cover smaller ones; genera then do not fall apart but tend to become larger. In general, it may be nomenclaturally advantageous to maintain broad generic concepts for taxa like *Aspergillus, Chaetomium*, and *Fusarium* in their classical sense, as long as they are monophyletic. Smaller genera will appear synonymous, but this usually involves a lower number of name changes.

In the yeasts, classical genera are mostly not monophyletic. The clinically relevant genera that have been classified in *Candida* on the basis of physiological criteria, phylogenetically were found to belong to eight families (5), and therefore, the genus in the traditional sense is untenable. Some genera could coincide with the current level of family ranks, e.g., *Debaryomycetaceae* containing the single genus *Candida* which might keep future instability within limits.

Genera will be meaningfully distinguished when the clades are consistently supported by high bootstrap values. This was successful with the dermatophytes mentioned above (16), but statistical support of the backbone of trees is often lacking or minimal. For example, the family *Herpotrichiellaceae* (black yeasts and allies) in *Chaeto-thyriales* has been analyzed repeatedly using different genes and data sets but achieving poor statistical support below the family level (53). The authors decided to leave the genera defined by morphology despite the known disagreement with phylogeny. This provides temporary nomenclatural stability, but such genera remain highly polyphyletic, and treating unrelated species under the same generic name, as done, e.g., by Thitla et al. (38) for *Exophiala*, cannot be recommended in the long run.

There may be an optimal size of genera. Extensive divisions resulting in unique genera for many medically important species risks loss of phylogenetic coherence and

ease of recognition. On the other hand, it is difficult to develop diagnostic criteria for genera that are too broad.

Suggestions for stability of the genus concept in medical mycology

- Genera are preferably based on phenotypic characteristics supplemental to molecular distance, reflecting main ecological and medical significance, or evolutionary or other behavioral trends, such that their separation is likely to be widely understood and accepted.
- Names of large-sized genera such as Aspergillus tend to be more stable than small genera containing just a few species, based upon phylogenetic distance alone; provided that the genus is monophyletic, it is recommended to maintain the size of genera if there is no compelling reason to break them up.
- Small and phenotypically similar genera in the same clade can be combined if this reduces the number of necessary name changes.
- Authors introducing name changes at the generic level are requested to provide or select criteria with which the genus at hand can be recognized.
- Name changes are preferably adopted in routine practice only after the underlying taxonomy has been confirmed in several papers by independent authors; an evaluating Committee under the auspices of ISHAM is preferable.
- Remember that there are procedures under the *Code* to avoid the necessity to replace a well-known genus name by a less known one, using a conservation process, while also a change of the original type species is possible.

DISCUSSION

Taxonomy is not a galactic spaceship operating in a scientific vacuum. On the contrary: thousands of diagnostic laboratories worldwide in all areas of microbiology apply the outcome of this research on a daily basis for patient care. There are few areas of fundamental science with comparable practical implications. Nomenclatural changes should, therefore, be scientifically sound and based on convincing evidence (54, 55), taking into account phenotypic, biological, and ecological features as well as clinically relevant characteristics of pathogenicity and specifically antifungal resistance patterns. In the absence of established scientific criteria for delimiting genera, the default should be that proposed reclassification should benefit the clinical user. An ongoing discussion relevant to medical mycology concerns the bipartition of Fusarium in Fusarium s.str. and Neocosmospora. The latter is an interesting showcase of the consequences of generic fragmentation. Although the phylogenetic distance between Neocosmospora and Fusarium may justify their separation, it necessitates the maintenance of 21 additional fusarium-like genera, which are phylogenetically more distant from Fusarium s. str. than Neocosmospora. The separation of Neocosmospora is not necessary for the medical community to be adopted immediately; this can wait until taxonomists stabilize the classification over years of investigation and consensus. A similar appeal was made by Redhead (56), who in proposing a reclassification of coprinus-like species, stated that we do not need to adopt these names immediately; instead, we may be conservative initially. Following molecular testing by different laboratories, the pathogens named from asexual cultures, Hormographiella aspergillata and H. verticillata, were subsequently synonymized with the mushroom species Coprinopsis cinereus and Coprinellus domesticus, respectively.

At the species level, we are able to show massive amounts of difference below the level of genetic exchange, which remains the ultimate criterion for conspecificity (organisms belonging to the same species). Although this borderline is vague, subject to many exceptions, and often difficult to establish in research areas outside microbiology, it is uncommon to attribute species status to interbreeding entities. In several groups, more entities can be distinguished than is taxonomically meaningful. In dermatophytes, Tang et al. (48) made a recommendation to formally name only those siblings that are relevant to clinical practice. For example, Bian et al. (57) synonymized several of the described entities in the *Aspergillus niger* clade and Sklenář et al. (58) in the *A. versicolores* clade. The requirement to distinguish large numbers of molecular siblings without clinical relevance would have a negative impact on clinical practice and patient care when the siblings are only recognizable by experimental, non-microscopic methods such as multi-locus sequencing and have no broader significance.

How should a species name be reported? For routine clinical practice, it has been claimed that identification at species complex level is usually sufficient (6, 9) although this may depend on the fungal group at hand or the clinical guestions (59). Sequencing or MALDI-ToF MS (Matrix Assisted Laser Desorption/Ionization coupled to time-offlight mass spectrometry) may directly identify the sibling name, without being aware that this is a member of a particular species complex. As MALDI-ToF MS results may be dependent on the spectral database used for comparison, it is recommended to mention this database with version number along with the identification in the lab report for retrospective analysis. Since nearly all major pathogenic species comprise subspecific entities, both the species complex and the sibling should be identified in clinical laboratory reports, with the siblings reported either by name or lineage number as applicable. Reporting would, therefore, appear as follows: Trichophyton interdigitale (member of T. mentagrophytes species complex), or, in case of an unnamed lineage: Trichophyton mentagrophytes species complex (molecular sibling ITS XIV). For the numerous species that are not part of a complex, the single recommended name is sufficient. Given the fact that the size of a genus lacks clear parameters, in practice for some fungi, several names may remain in use concomitantly until phylogenetic disputes can be resolved, as highlighted by the example of Fusarium/Neocosmospora (60-63).

At times, this situation may become very confusing. For example, Mucor elegans is synonymous with Actinomucor elegans and Rhizopus elegans, but Apophysomyces elegans is a completely different species. One solution to reduce naming confusion is to provide an easily usable and complete tool where current and prior names can be found and mapped to which species complex they belong. A list of currently recommended names for medical fungi is available open access at www.atlasclinicalfungi.org/, subheader nomenclature, also providing synonyms and affiliation to species complexes. The database has a comfortable search function as well as a printable version of the list recommended names. Use of the database prevents the necessity to mention old and new names in clinical reports. A committee of clinical microbiologists, physicians, and medical mycologists has been formed under the auspices of the International Society for Human and Animal Mycology (ISHAM), Working Groups on Nomenclature and Fungal Diagnostics, where names will be discussed, reviewed, and adjudicated for medical relevance, validity, and stability, consulting specialists on the topic. Recommendations will be publicized for transparency. We strongly recommend deposition of representative strains in the established fungal culture collections for future investigation.

The stability of names remains a much-debated issue, and there is no simple solution. Names will inevitably change. However, the changes should have some benefit. There are ways to mitigate some of the detrimental effects, but recommendations tend to have only temporary effect. As a recommendation to taxonomists, we suggest that rules in the *Code* (64, 65) could be used more than they are now to promote stability. For example, changing types of genera is possible, and names can be protected so that they cannot be replaced by older but later discovered synonyms. Careful consideration and restraint are required at the taxonomic research side, but the clinical user also has to accept the reality that frequently more than one name may persist in the literature for the same fungus for quite some time to come. As long as there is no consensus, some laboratories mention old and new names in their reports. Kidd et al. (12) suggested a 5-y transition period.

Nomenclatural databases, i.e., *Index Fungorum* (www.indexfungorum.org) and *MycoBank* (www.mycobank.org) apply latest names of new fungi and adjustments but refrain from providing recommendations of the usefulness of the changes. Therefore, a list of recommended names (Table 1; www.atlasclinicalfungi.org/nomenclature) has been proposed with the following considerations: (i) the table covers a list of medically

 TABLE 1
 Common and medically important fungia

Classical name most commonly	Alternative name appeared in literature (anamorph,	Recommended name to be reported for clinical use
used in clinical laboratories ^b	teleomorph, synonym, synanamorph, or obsolete name)	
Acremonium egyptiacum	Acremonium sclerotigenum	Acremonium egyptiacum
Acremonium kiliense	Cephalosporium kiliense, Sarocladium kiliense	Sarocladium kiliense
Acremonium recifei	Xenoacremonium recifei	Acremonium recifei
Acremonium strictum	Cephalosporium acremonium, Sarocladium strictum	Sarocladium strictum
Acrophialophora fusispora	Paecilomyces fusisporus	Acrophialophora fusispora
Acrophialophora levis		Acrophialophora levis
Actinomucor elegans	Mucor elegans, Rhizopus elegans	Actinomucor elegans
Alternaria alternata		Alternaria alternata
Alternaria infectoria		Alternaria infectoria
Alternaria tenuissima	Helminthosporium tenuissimum	Alternaria tenuissima
Aphanoascus keratinophilus	Chrysosporium keratinophilum	Aphanoascus keratinophilus
Apophysomyces elegans		Apophysomyces elegans
Apophysomyces trapeziformis		Apophysomyces trapeziformis
Apophysomyces variabilis		Apophysomyces variabilis
Arthrinium arundinis	Apiospora arundinis	Arthrinium arundinis
Arthrographis kalrae	Oididendron kalrae	Arthrographis kalrae
Aspergillus calidoustus		Aspergillus calidoustus
Aspergillus flavus	Aspergillus oryzae	Aspergillus flavus
Aspergillus fischeri	Aspergillus fischerianus, Neosartorya fischeri	Aspergillus fischeri [member of A. fumigatus series
		(species complex)]
Aspergillus fumigatus		Aspergillus fumigatus
Aspergillus glaucus	Eurotium herbariorum	Aspergillus glaucus
Aspergillus lentulus		Aspergillus lentulus
Aspergillus nidulans	Emericella nidulans	Aspergillus nidulans
Aspergillus niger		Aspergillus niger
Aspergillus sclerotiorum		Aspergillus sclerotiorum
Aspergillus sydowii		Aspergillus sydowii
Aspergillus terreus		Aspergillus terreus
Aspergillus thermomutatus	Aspergillus fischeri var. thermomutatus, Neosartorya	Aspergillus thermomutatus
ispeliginus thermoniatatus	pseudofischeri	
Aspergillus tubingensis		Aspergillus tubingensis [member of A. niger series
		(species complex)]
Aspergillus udagawae	Neosartorya udagawae	Aspergillus udagawae
Aspergillus unguis	Emericella unguis	Aspergillus unguis
Aspergillus ustus		Aspergillus ustus
Aspergillus versicolor		Aspergillus versicolor
Aureobasidium melanogenum	Aureobasidium pullulans var. melanogenum	Aureobasidium melanogenum
Aureobasidium pullulans		Aureobasidium pullulans
, Basidiobolus ranarum		Basidiobolus ranarum
Beauveria bassiana		Beauveria bassiana
Bipolaris australiensis	Curvularia australiensis	Bipolaris australiensis
Bipolaris hawaiiensis	Cochliobolus hawaiiensis, Curvularia hawaiiensis	Bipolaris hawaiiensis
Bipolaris spicifera	Drechslera spicifera, Cochliobolus spicifer, Curvularia spicifera	Bipolaris spicifera
Blastomyces dermatitidis	Ajellomyces dermatitidis	Blastomyces dermatitidis
Blastomyces qilchristii	, , 	Blastomyces gilchristii (member of B. dermatitidis
		complex)
Candida albicans		Candida albicans
Candida auris		Candida auris
Candida bracarensis	Nakaseomyces bracarensis	Candida bracarensis or Nakaseomyces bracarensis
canalaa oracarciisis	nanasconyees oracarensis	(member of <i>C. glabrata</i> complex) ^d
		Candida dubliniensis

(Continued on next page)

Classical name most commonly	Alternative name appeared in literature (anamorph,	Recommended name to be reported for clinical use
used in clinical laboratories ^b	teleomorph, synonym, synanamorph, or obsolete name)	
Candida duobushaemulonis	Candida duobushaemuloni, Candida duobushaemuli	Candida duobushaemuli (member of C. haemuli
		complex)
Candida fabianii	Hansenula fabianii, Pichia fabianii, Lindnera fabianii,	Candida fabianii or Cyberlindnera fabianii ^d
	Cyberlindnera fabianii	
Candida famata	Debaryomyces hansenii	Candida famata or Debaryomyces hansenii ^d
Candida fermentati	Torula fermentati, Pichia caribbica, Meyerozyma caribbica	<i>Candida fermentati</i> (member of <i>C. guilliermondii</i> complex)
Candida glabrata	Torulopsis glabrata, Nakaseomyces glabratus	Candida glabrata or Nakaseomyces glabratus ^d
Candida guilliermondii	Pichia guilliermondii, Meyerozyma guilliermondii	Candida guilliermondii or Meyerozyma guilliermondii ^d
Candida guilliermondii var. membranifaciens	Pichia ohmeri, Yamadazyma ohmeri, Kodamaea ohmeri	Kodamaea ohmeri ^d
Candida haemulonis	Torulopsis haemulonis, Candida haemuloni, Candida haemuli	Candida haemuli (member of C. haemuli complex)
Candida inconspicua	Torulopsis inconspicua, Pichia cactophila	Candida inconspicua
Candida kefyr	Candida pseudotropicalis, Kluyveromyces marxianus	Candida kefyr or Kluyveromyces marxianus ^d
Candida krusei	Issatchenkia orientalis, Pichia kudriavzevii	Candida krusei or Pichia kudriavzevii ^d
Candida lambica	Pichia fermentans	Candida lambica or Pichia fermentans ^d
Candida lipolytica	Yarrowia lipolytica	Candida lipolytica or Yarrowia lipolytica ^d
Candida lusitaniae	Clavispora lusitaniae	Candida lusitaniae or Clavispora lusitaniae ^d
Candida metapsilosis		Candida metapsilosis (member of C. parapsilosis complex)
Candida nivariensis	Nakaseomyces nivariensis	Candida nivariensis or Nakaseomyces nivariensis (member of C. glabrata complex) ^d
Candida norvegensis	Pichia norvegensis	Candida norvegensis or Pichia norvegensis ^d
Candida orthopsilosis	-	Candida orthopsilosis (member of C. parapsilosis complex)
Candida parapsilosis		Candida parapsilosis
Candida pelliculosa	Hansenula anomala, Pichia anomala, Wickerhamomyces anomalus	Candida pelliculosa or Hansenula anomala ^d
Candida rugosa	Diutina rugosa	Candida rugosa or Diutina rugosa ^d
Candida tropicalis	-	Candida tropicalis
Candida utilis	Torulopsis utilis, Pichia jadinii, Lindnera jadinii, Cyberlindnera jadinii	Candida utilis or Cyberlindnera jadinii ^d
Chaetomium atrobrunneum	Amesia atrobrunnea	Chaetomium atrobrunneum
Chaetomium brasiliense	Ovatospora brasiliensis	Chaetomium brasiliense
Chaetomium globosum		Chaetomium globosum
Chaetomium perlucidum	Parachaetomium perlucidum	Chaetomium perlucidum
Chaetomium strumarium	Achaetomium strumarium	Chaetomium strumarium
Chrysonilia sitophila	Monila sitophila, Neurospora sitophila	Neurospora sitophila
Chrysosporium queenslandicum	Uncinocarpus queenslandicus, Brunneospora queenslandica	Brunneospora queenslandica
Chrysosporium zonatum	Uncinocarpus orissae	Chrysosporium zonatum
Cladophialophora bantiana	Xylohypha bantiana, Cladosporium bantianum, Cladosporium trichoides	Cladophialophora bantiana
Cladophialophora boppi	Taeniolella boppii	Cladophialophora boppii
Cladophialophora carrionii	Cladosporium carrionii	Cladophialophora carrionii
Cladosporium cladosporioides		Cladosporium cladosporioides
Cladosporium herbarum		Cladosporium herbarum
Cladosporium sphaerospermum		Cladosporium sphaerospermum
Coccidioides immitis		Coccidioides immitis
Coccidioides posadasii		Coccidioides posadasii
Cokeromyces recurvatus		Cokeromyces recurvatus
Collectotrichum coccodes		Collectotrichum coccodes

(Continued on next page)

Classical name most commonly	•• • • • •	Recommended name to be reported for clinical use
used in clinical laboratories ^b	teleomorph, synonym, synanamorph, or obsolete name)	
Colletotrichum gloeosporioides		Colletotrichum gloeosporioides
Conidiobolus coronatus		Conidiobolus coronatus
Cryptococcus adeliensis	Naganishia adeliensis	Naganishia adeliensis
Cryptococcus albidus	Cryptococcus albidus var. albidus, C. albidus var. diffluens,	Naganishia albida
	Cryptococcus diffluens, Cryptococcus genitalis, Naganishia albida	
Cryptococcus gattii	aibida	Cryptococcus gattii
Cryptococcus laurentii	Torula laurentii, Papiliotrema laurentii	Papiliotrema laurentii
Cryptococcus liquefaciens	Torulopsis liquefaciens, Naganishia liquefaciens	Naganishia liquefaciens
Cryptococcus neoformans		Cryptococcus neoformans
Cryptococcus uniguttulatus	Filobasidium uniguttulatum	Filobasidium uniguttulatum
Cunninghamella bertholletiae		Cunninghamella bertholletiae
Curvularia geniculata	Cochliobolus geniculatus	Curvularia geniculata
Curvularia lunata	Cochliobolus lunatus	Curvularia lunata
Curvularia pallescens	Cochliobolus pallescens	Curvularia pallescens
Cylindrocarpon cyanescens	Fusarium cyanescens, Neocosmospora cyanescens	Cylindrocarpon cyanescens
Cylindrocarpon destructans	Ilyonectria destructans	Cylindrocarpon destructans
Drechslera biseptata	Pyrenophora biseptata	Drechslera biseptata
Emmonsia crescens	Emmonsia parva var. crescens, Ajellomyces crescens,	Emmonsia crescens
	Emergomyces crescens	
Emmonsia parva	Chrysosporium parvum, Blastomyces parvus	Blastomyces parvus
Emmonsia pasteuriana	Emergomyces pasteurianus	Emergomyces pasteurianus
Engyodontium album	Tritirachium album, Beauveria alba, Parengyodontium album	Parengyodontium album
Epicoccum nigrum	Epicoccum purpurascens, Phoma epicoccina	Epicoccum nigrum
Epidermophyton floccosum	Acrothecium floccosum, Trichothecium floccosum	Epidermophyton floccosum
Exophiala dermatitidis	Wangiella dermatitidis	Exophiala dermatitidis
Exophiala jeanselmei		Exophiala jeanselmei
Exophiala lecanii-corni	Exophiala jeanselmei var. lecanii-corni	Exophiala lecanii-corni
Exophiala oligosperma		Exophiala oligosperma
Exophiala spinifera	Phialophora spinifera, Rhinocladiella spinifera	Exophiala spinifera
Exserohilum rostratum	Helminthosporium rostratum, Exserohilum longirostratum, Exserohilum macginnisii	Exserohilum rostratum
Fonsecaea monophora		Fonsecaea monophora
Fonsecaea pedrosoi	Fonsecaea compacta	Fonsecaea pedrosoi
Fusarium chlamydosporum		Fusarium chlamydosporum
Fusarium dimerum	Bisifusarium dimerum	Fusarium dimerum
Fusarium falciforme	Acremonium falciforme, Neocosmospora falciforme	Fusarium falciforme (member of F. solani complex)
Fusarium incarnatum	Fusarium semitectum	Fusarium incarnatum (member of F. incarnatum-equi- seti complex)
Fusarium keratoplasticum	Neocosmospora keratoplastica	Fusarium keratoplasticum (member of F. solani complex)
Fusarium lichenicola	Cylindrocarpon lichenicola, Neocosmospora lichenicola	<i>Fusarium lichenicola</i> (member of <i>F. solani</i> complex)
Fusarium neocosmosporiellum	Neocosmospora vasinfecta	Fusarium neocomosporiellum (member of F. solani complex)
Fusarium oxysporum		Fusarium oxysporum
Fusarium petroliphilum	Neocosmospora petroliphila	Fusarium petroliphilum (member of F. solani complex)
Fusarium proliferatum		<i>Fusarium proliferatum</i> (member of <i>F. fujikuroi</i> complex)
Fusarium solani	Neocosmospora solani	Fusarium solani
Fusarium verticillioides	Fusarium moniliforme, Gibberella moniliformis	Fusarium verticillioides (member of F. fujikuroi
		complex)

	Alternative name appeared in literature (anamorph,	Recommended name to be reported for clinical us
used in clinical laboratories ^b	teleomorph, synonym, synanamorph, or obsolete name)	
Geomyces destructans	Pseudogymnoascus destructans	Pseudogymnoascus destructans
Geomyces pannorum	Chrysosporium pannorum, Pseudogymnoascus pannorum	Geomyces pannorum
Geotrichum candidum	Galactomyces candidus, Dipodascus geotrichum	Geotrichum candidum
Geotrichum capitatum	Dipodascus capitatus, Blastoschizomyces capitatus, Saprochae-	Magnusiomyces capitatus
	tea capitata, Magnusiomyces capitatus	
Geotrichum clavatum	Saprochaete clavate, Magnusiomyces clavatus	Magnusiomyces clavatus
Gymnascella hyalinospora	Narasimhella hyalinospora, Gymnoascus hyalinosporus	Gymnascella hyalinospora
listoplasma capsulatum	Ajellomyces capsulatus	Histoplasma capsulatum
lormographiella aspergillata	Coprinus cinereus, Coprinopsis cinerea	Coprinopsis cinerea
lormographiella verticillata	Coprinus domesticus, Coprinellus domesticus	Coprinellus domesticus
lortaea werneckii	Exophiala werneckii, Phaeoannellomyces werneckii	Hortaea werneckii
asiodiplodia theobromae	Botryosphaeria rhodina	Lasiodiplodia theobromae
ecythophora hoffmannii	Coniochaeta hoffmannii	Lecythophora hoffmannii
ecythophora mutabilis	Coniochaeta mutabilis	Lecythophora mutabilis
ichtheimia corymbifera	Absidia corymbifera	Lichtheimia corymbifera
odderomyces elongisporus	Saccharomyces elongisporus	Lodderomyces elongisporus ^d
omentospora prolificans	Scedosporium prolificans, Scedosporium inflatum	Lomentospora prolificans
Nadurella grisea	Trematosphaeria grisea	Trematosphaeria grisea
-		
Aadurella mycetomatis	Madurella mycetomi	Madurella mycetomatis
1alassezia furfur		Malassezia furfur
lalassezia globosa		Malassezia globosa
lalassezia pachydermatis		Malassezia pachydermatis
lalassezia restricta		Malassezia restricta
1alassezia slooffiae		Malassezia slooffiae
Ialassezia sympodialis		Malassezia sympodialis
1albranchea pulchella		Malbranchea pulchella
Aicroascus cinereus	Scopulariopsis cinereus	Microascus cinereus
<i>Aicroascus cirrosus</i>		Microascus cirrosus
1icrosporum audouinii		Microsporum audouinii
Aicrosporum canis	Microsporum canis var. distortum, Arthroderma otae, Microsporum equinum	Microsporum canis
Microsporum cookei	Paraphyton cookei	Paraphyton cookei
Aicrosporum ferrugineum		Microsporum ferrugineum
Aicrosporum gallinae	Lophophyton gallinae	Lophophyton gallinae
1icrosporum gypseum	Nannizzia gypsea	Nannizzia gypsea
licrosporum nanum	Arthroderma obtusum, Nannizzia nana	Nannizzia nana
licrosporum persicolor	Arthroderma persicolor, Nannizzia persicolor	Nannizzia persicolor
lortierella wolfii	Actinomortierella wolfii	, Mortierella wolfii
Aucor circinelloides		Mucor circinelloides
Aucor indicus		Mucor indicus
Aucor irregularis	<i>Rhizomucor variabilis</i>	Mucor irregularis
Aucor ramosissimus		Mucor ramosissimus (member of M. circinelloides
Nucor velutinosus		complex) Mucor velutinosus (member of M. circinelloides complex)
Ayceliophthora thermophila	Chrysosporium thermophilum, Thermothelomyces thermophila	Myceliophthora thermophila
ligrospora sphaerica		Nigrospora sphaerica
Nodulisporium griseobrunneum Ochroconis gallopava	Hypoxylon griseobrunneum Dactylaria gallopava, Dactylaria constricta var. gallopava,	Hypoxylon griseobrunneum Verruconis gallopava

Classical name most commonly	Alternative name appeared in literature (anamorph,	Recommended name to be reported for clinical use
used in clinical laboratories ^b	teleomorph, synonym, synanamorph, or obsolete name)	
Ochroconis mirabilis	Ochroconis musae, Scolecobasidium musae, Scolecobasidium mirabilis	Scolecobasidium mirabilis
Onychocola canadensis	Arachnomyces nodosetosus	Arachnomyces nodosetosus
Paecilomyces formosus		Paecilomyces formosus
Paecilomyces lilacinus	Purpureocillium lilacinum	Purpureocillium lilacinum
Paecilomyces variotii	Paecilomyces spectabilis, Byssochlamys spectabilis	Paecilomyces variotii
Paracoccidioides brasiliensis		Paracoccidioide brasiliensis
Paracoccidioides lutzii		Paracoccidioides lutzii (member of P. brasiliensis
		complex)
Penicillium chrysogenum		Penicillium chrysogenum
Penicillium citrinum		Penicillium citrinum
Penicillium marneffei	Talaromyces marneffei	Talaromyces marneffei
Penicillium purpureogenum	Talaromyces purpureogenus	Talaromyces purpureogenus
Phaeoacremonium parasiticum	Phialophora parasitica, Togninia parasitica	Phaeoacremonium parasiticum
Phialemonium curvatum	Phialemonium dimorphosporum, Thyridium curvatum,	Thyridium curvatum
	Phialemoniopsis curvata	nynaan calvatan
Phialemonium atrogriseum	Acremonium atrogriseum	Phialemonium atrogriseum
Phialemonium obovatum	A communication of the communi	Phialemonium obovatum
Phialophora americana	Capronia semiimmersa, Cadophora americana	Phialophora americana
Phialophora europaea	Cyphellophora europaea	Cyphellophora europaea
Phialophora richardsiae	Pleurostomophora richardsiae, Pleurostoma richardsiae	Pleurostoma richardsiae
Phialophora verrucosa	rieurostomopriora nenarasiae, rieurostoma nenarasiae	Phialophora verrucosa
Phoma cruris-hominis		Phoma cruris-hominis
Phoma herbarum	Phoma muscivora	Phoma herbarum
Piedraia hortae	Describentials and and an and an and	Piedraia hortae
Pithomyces chartarum	Pseudopithomyces chartarum	Pithomyces chartarum
Prototheca wickerhamii		Prototheca wickerhamii ^e
Pseudozyma aphidis	Moesziomyces aphidis	Moesziomyces aphidis
Pyrenochaeta romeroi	Medicopsis romeroi	Medicopsis romeroi
Pythium insidiosum		Pythium insidiosum ^e
Ramichloridium schulzeri	Myrmecridium schulzeri	Myrmecridium schulzeri
Rasamsonia aegroticola		Rasamsonia aegroticola
Rasamsonia argillacea	Penicillum argillaceum, Geosmithia argillacea	Rasamsonia argillacea (member of R. argillacea
		complex)
Rhinocladiella aquaspersa		Rhinocladiella aquaspersa
Rhinocladiella mackenziei	Ramichloridium mackenziei	Rhinocladiella mackenziei
Rhinocladiella similis		Rhinocladiella similis
Rhizomucor miehei		Rhizomucor miehei
Rhizomucor pusillus		Rhizomucor pusillus
Rhizopus arrhizus	Rhizopus oryzae	Rhizopus arrhizus
Rhizopus azygosporus		Rhizopus azygosporus
Rhizopus microsporus	Rhizopus rhizopodiformis	Rhizopus microsporus
Rhizopus schipperae		Rhizopus schipperae
Rhizopus stolonifer		Rhizopus stolonifer
Rhodotorula glutinis	Torulopsis glutinis	Rhodotorula glutinis
Rhodotorula minuta	Torula minuta, Cystobasidium minutum	Rhodotorula minuta
Rhodotorula mucilaginosa	Rhodotorula rubra, Torula mucilaginosa	Rhodotorula mucilaginosa
Saccharomyces cerevisiae	Saccharomyces boulardii	Saccharomyces cerevisiae
Saksenaea vasiformis		Saksenaea vasiformis
Scedosporium apiospermum	Pseudallescheria apiosperma	Scedosporium apiospermum (member of S.
		apiospermum complex)

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Classical name most commonly	Alternative name appeared in literature (anamorph,	Recommended name to be reported for clinical use
used in clinical laboratories ^b	teleomorph, synonym, synanamorph, or obsolete name)	
Scedosporium aurantiacum		Scedosporium aurantiacum
Scedosporium boydii	Pseudallescheria boydii	Scedosporium boydii (member of S. apiospermum
		complex)
Schizophyllum commune		Schizophyllum commune
Schizophyllum radiatum		Schizophyllum radiatum
Scopulariopsis brevicaulis	Microascus brevicaulis	Scopulariopsis brevicaulis
Scopulariopsis brumptii	Microascus paisii	Scopulariopsis brumptii
Scytalidium dimidiatum	Hendersonula toruloidea, Nattrassia mangiferae, Neoscytalidium dimidiatum	Neoscytalidium dimidiatum
Sporobolomyces salmonicolor	Sporidiobolus salmonicolor	Sporobolomyces salmonicolor
Sporothrix brasiliensis		Sporothrix brasiliensis
Sporothrix cyanescens	Fugomyces cyanescens, Cerinosterus cyanescens, Quambalaria cyanescens	Quambalaria cyanescens
Sporothrix globosa		Sporothrix globosa
Sporothrix Iuriei	Sporothrix schenckii var. luriei	Sporothrix Iuriei
Sporothrix mexicana		Sporothrix mexicana
Sporothrix schenckii		Sporothrix schenckii
Sporotrichum pruinosum	Chrysosporium pruinosum, Phanerochaete chrysosporium	Phanerochaete chrysosporium
Syncephalastrum racemosum		Syncephalastrum racemosum
Trichoderma harzianum		Trichoderma harzianum
Trichoderma longibrachiatum		Trichoderma longibrachiatum
Trichophyton benhamiae	Arthroderma benhamiae	Trichophyton benhamiae
Trichophyton concentricum		Trichophyton concentricum (member of T. benhamiae complex)
Trichophyton equinum		Trichophyton equinum (member of T. tonsurans complex)
Trichophyton indotineae	Trichophyton mentagrophytes ITS Type VIII	Trichophyton indotineae
Trichophyton interdigitale	Trichophyton krajdenii	Trichophyton interdigitale (member of T. mentagro- phytes complex)
Trichophyton mentagrophytes		Trichophyton mentagrophytes
Trichophyton rubrum		Trichophyton rubrum
Trichophyton schoenleinii		Trichophyton schoenleinii
Trichophyton soudanense		Trichophyton soudanense (member of T. rubrum complex)
Trichophyton tonsurans		Trichophyton tonsurans
Trichophyton verrucosum		Trichophyton verrucosum
Trichophyton violaceum	Trichophyton yaoundei	Trichophyton violaceum (member of T. rubrum complex)
Trichosporon asahii		Trichosporon asahii
Trichosporon dermatis	Cutaneotrichosporon dermatis	Trichosporon dermatis or Cutaneotrichosporon dermatis ^d
Trichosporon inkin		Trichosporon inkin
Trichosporon loubieri	Apiotrichum loubieri	Apiotrichum oubieri
Trichosporon mucoides	, Cutaneotrichosporon mucoides	, Trichosporon mucoides or Cutaneotrichosporon mucoides ^d
Trichosporon mycotoxinivorans	Apiotrichum mycotoxinivorans	Apiotrichum mycotoxinivorans
Tritirachium oryzae	Beauveria oryzae, Tritirachium roseum	Tritirachium oryzae
Ulocladium botrytis	Alternaria botrytis	Alternaria botrytis
Ulocladium chartarum	Alternaria chartarum	Alternaria chartarum
Veronaea botryosa		Veronaea botryosa

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TABLE 1 Common and medically important fungia (Continued)

Classical name most commonly	Alternative name appeared in literature (anamorph,	Recommended name to be reported for clinical use ^c
used in clinical laboratories ^b	teleomorph, synonym, synanamorph, or obsolete name)	
Verticillium dahliae		Verticillium dahliae
We recommend Table 1 for the following reasons: (i) the table covers a list of medically important fundi that are considered as most commonly encountered in the clinical		

"We recommend Table 1 for the following reasons: (i) the table covers a list of medically important fungi that are considered as most commonly encountered in the clinical labs and listed in seven Medical Mycology Textbooks widely used in the clinical laboratories; (ii) the current recommendation on how to report these fungi in the table is based on the rationale illustrated in the manuscript and consensus agreement among authors after an extensive review; (3) as clinical laboratories are struggling with how to report these fungi to clinicians due to nomenclature variation in the literature, the table may serve as a current reference to guide clinical laboratories on how to report these fungi; (4) the names listed in the table are not fixed names but rather representing nomenclature stability; they will be reviewed and updated periodically by an international committee representative of clinical microbiologists, physicians, medical mycologists, and taxonomists. Note: a complete overview of pathogenic and opportunistic species with descriptions and references can be found in Atlas of Clinical Fungi, 4th ed. 2020.

^bBased on a list of textbooks and reference materials used in clinical labs: (i) Larone's Medically Important fungi 6th Ed by Thomas J Walsh, Randall T. Hayden, Davise H. Larone; (ii) Manual of Clinical Microbiology 12th Ed; (iii) CAP (College of American Pathologists) Master list of Fungi; (iv) CAP Color Atlas of Mycology by Gordon L. Love, Julie A. Ribes; (v) Guide to Clinically Significant Fungi by Deanna A. Sutton, Annette W. Fothergill, Michael G. Rinaldi; (vi) Doctor Fungus online reference (https:// drfungus.org/knowledge-base-category/fungi-descriptions/); (vii) Identifying fungi: a clinical laboratory handbook 2nd Ed by Guy St-Germain, Richard Summerbell; (viii) Identification of pathogenic fungi 2nd Ed by Colin K. Campbell, Elizabeth M. Johnson, David W. Warnock; (ix) Descriptions of medical fungi 4th Ed by Sarah Kidd, Catriona Halliday, David Ellis. Furthermore, only the ones that have been reported causing human infection are included.

The recommended names to be reported for clinical use are based on current treatment guidelines and the Atlas of Clinical Fungi (https://www.clinicalfungi.org). The fungi listed in the table represent a list of the common and medically important ones from the database of the ATLAS (>6,000 clinical fungi). Species level identification on some of them may not be readily achievable based on morphological or phenotypic features and thus will have to rely on additional tools, e.g., DNA sequencing identification or MALDI-TOF MS to obtain reliable species identification.

^dThese names will be further reviewed by an international committee representative of clinical microbiologists, physicians, medical mycologists, and taxonomists. ^eNot a fungus.

important fungi that are considered most commonly encountered in clinical laboratories based on their inclusion in seven textbooks of medical mycology and two reference resources (CAP master list and Doctor Fungus online reference); (ii) the current recommendations on how to report these fungi in the table is based on the rationale illustrated in the present manuscript and consensus agreement among authors after an extensive consultation; (iii) as clinical laboratories are struggling with how to report these fungi to patient-care providers due to nomenclature variation in the literature, the table may serve as a current reference to guide clinical laboratories on how to report these fungi; (iv) the names listed in the table are not fixed names but rather represent nomenclature stability. We recommend that this list, including our author's consensus reporting recommendations, could be used to guide initial efforts by an upcoming international committee representative of clinical microbiologists, physicians, medical mycologists, and taxonomists. This committee will function as a governing body to curate future fungal name changes for clinical use. We also recommend special focus on reporting some names (e.g., some Candida species) of which the present authors were unable to reach consensus using the methods discussed in this document.

Incorporating name changes that are validated and stable is essential for clinical laboratories and patient care. Other well-established groups which review relevant scientific advances for application in clinical laboratories include the Clinical and Laboratory Standards Institute (CLSI) and the European Committee on Antimicrobial Susceptibility Testing (EUCAST). These organizations provide additional levels of standardization and validation of diagnostic changes before introduction into clinical laboratories. Clinical practice will benefit from clear guidance from the international community on the adaption to nomenclatural changes of medically important fungi. Future association with the database of SNOMED CT and LONIC codes might be considered, thereby facilitating international digital data exchange and standardization of patient reports.

We recognize it is important to disseminate nomenclature changes to clinical community timely and accurately. Education required not only for the clinician but also for the taxonomist that has an insufficient eye for the user. Published lists are an alternative but are forgotten within a few years. We, therefore, think that the most parsimonious and sustainable solution is a readily accessible database, which is easy to find and easy to handle. Only a single website should be remembered. The contents of the database will be supervised by a committee of ISHAM (International Society for Human and Animal Mycology), composed of researchers, as well as of users, and decisions are made in consultancy with taxonomic specialists. Furthermore, the

committee will partner with the societies that support this document and use their proper media channels to deliver any recommended nomenclature changes to the clinicians and clinical laboratories widely without any delay.

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