How to Report Zero CLABSI or CAUTI Events for a Month

(Updated August 2018)

In order to fully comply with NHSN and CMS reporting requirements, facilities that include Device-Associated Module surveillance (CLABSI & CAUTI) in their monthly reporting plan must indicate when they have zero infection events to report for each NHSN location and event in the plan for a given month. Doing this provides a "true zero" for your facility. If you do not indicate that your facility identified no CLABSI or CAUTI events in a month, your data will not show up in NHSN's analysis tool, and it will it not be included in data sent to CMS.

The following instructions demonstrate how to indicate that your facility identified no device-associated infections for locations in your monthly reporting plan.

Step 1: Complete monthly reporting for CLABSI and/or CAUTI surveillance

- At the beginning of the month, add the locations and event types (i.e., CLABSI and CAUTI) you plan to follow for that specific month in your monthly reporting plan
- Throughout the month, monitor your patients for infection and report any infection events that take place within locations specified in your monthly reporting plan

Step 2: Enter summary data

- At the end of the month, enter a summary data record for each location specified in your monthly reporting plan
 - Click on 'Summary Data' on the left-hand navigation bar
 - Click on 'Add' from the drop down menu under 'Summary Data'
 - Select the correct summary data type for the locations (i.e., ICU/Other, SCA/ONC, or NICU) you're entering denominator/summary data for and then click the 'Continue' button
 - NOTE: Select ICU/Other to enter data for non-ONC ward locations
- From this screen, select the location for which you're entering the denominator/summary data using the drop down menu next to 'Location Code'
 - Make sure to enter the correct month and year using the drop down menus next to those fields
- After selecting the location code, month, and year, certain fields will become required if you've added specific surveillance types to your monthly reporting plan for that location
 - e.g., if you chose to report CAUTIs in your medical ward on your monthly reporting plan, total patient days and urinary catheter days would be required fields when entering your summary data
 - Enter your data in the required fields
 - **NOTE:** All required fields will be marked with a red asterisk
- If you've identified <u>and</u> reported events for all of the locations and event types specified in your monthly reporting plan, you're finished with your reporting for the month
 - If you <u>did not</u> have any events to report for one or more locations, continue to step 3: reporting no events

Step 3a: Reporting no events in ICU or ward locations

• If, at the end of the month, you have 0 events to report, you need to indicate that on the summary data record to be in full compliance with reporting requirements



- For each location with 0 events for the month, check the 'Report No Events' box next to the event type you're reporting
- If you have 0 device days to report for a month, enter "0" into the box for that device. The "Report No Events" box will be checked automatically.

NHSN Home		Denom	ninators for Ir	ntensive Care Unit (ICU)/Other locations (not NICU o	r SCA)					
Alerts		S Denon									
Dashboard											
Reporting Plan	•	Mandatory fields marked with * Facility ID *: DHQP MEMORIAL HOSPITAL (ID 10018)									
Patient	•		Location Code *: 3E - SSI								
Event	•		Month *: July Year *: 2018								
Procedure	•										
Summary Data	•	Add			Sample Val	lues For Estimating Denom	ninator Data				
Import/Export		Find		Report No Events		Check Box(es) if Sampling Used					
Surveys	•	Incomplete	Days *: 500		Sample Patient Days:						
Surveys	-	Delete AUR Data	Days *: 150	CLABSI:	Sample Central Line Days:						
Analysis	•	Ormary Camete	Days *: 233	CAUTI: 🗹	Sample Urinary Catheter Days:						
Users	•	Ventilato	r Days *: 67								
		AP	RV Days: 0	VAE: 🗹							
Facility	•		isodes of	PedVAP: 🗹							
Group	•	Mechanical Ventilation:									

• Upon saving, you'll see that the check boxes are replaced with an 'X' to indicate that no events of that event type have occurred in that location

Mandatory fields marked with *
Facility ID *: DHQP MEMORIAL HOSPITAL (ID 10018)
Location Code *: 3E - SSI
Month *: July
Year *: 2018

	Report No Events
Total Patient Days *: 500	
Central Line Days *: 150	CLABSI:
Urinary Catheter Days *: 233	CAUTI: 🗹
Ventilator Days *: 67	
APRV Days: 0	VAE: 🗹
Episodes of Mechanical Ventilation:	PedVAP: 🗹



• If there have been events already reported for the specific location, the 'Report No Events' box will be disabled, preventing it from being checked

Senominators for Inter	nsive Care Unit	(ICU)/Other locations (not NICU or SCA)
Mandatory fields marked with * Facility ID *: DHQP MEMORIAL I Location Code *: ICU - ICU Month *: July Year *: 2018	HOSPITAL (ID 10018)	✓ ✓
		Sample Values For Estimating Denominator Data
F	Report No Events	Check Box(es) if Sampling Used
Total Patient Days *: 218		Sample Patient Days:
Central Line Days *: 60	CLABSI: 🗹	Sample Central Line Days:
Urinary Catheter Days *: 111	CAUTI: 🗆	Sample Urinary Catheter Days:
Ventilator Days *: 0	1 1	
APRV Days:	VAE: 🗹	
Episodes of	PedVAP: 🗹	
Custom Fields 📀 Help		
LOLA:		
		Save Back

Step 3b: Reporting no events in NICU locations

- Similar to reporting no events in ICU/ward locations, reporting no events in the NICU is done on the summary data screen
- However, because CLABSIs are reported by birthweight for neonatal critical care locations, the facility must report no events by birthweight as well
- For each NICU location, check the 'Report No Events' box for each birthweight in which no events occurred within the given month

If there have been events already reported for the specific birthweight, the 'Report No Events' box will be disabled, preventing it from being checked

• Upon saving, you'll see that the check boxes are replaced with an 'X' to indicate that no events have occurred of that event type in that location

			are Unit			
Mandatory fie	lds marked v	vith *				
Facility	ID *: DHQF	P MEMORIA	AL HOSPITAL	(ID 10018) 🗸		
Location Co	ode *: NICU	- LEVEL 3	NICU 🗸			
Mo	nth *: July	\sim				
Y	ear *: 2018	\sim				
Birth Wt.	Patient Days *	CL Days	No CLABSI	Vent Days No PedVAP	UrC Days	
. 750	36	28				
<=750						
<=750 751-1000	40	24				
	40	24 32	 ✓ 			
751-1000						



Neo	natal Inte	ensive C	are Unit						
Succ	essfully add	ded PSSur	mmaryNICU	l record					
Location Co Moi		MEMORI	AL HOSPITAL NICU	(ID 1001	.8)				
Birth Wt.	Patient Days *	CL Days * No CLABSI		Vent Days No PedVAP		UrC Days			
<=750	36	28							
751-1000	40	24	\checkmark						
1001-1500	50	32	\checkmark						
1501-2500	20	0	\checkmark						
>2500	0	0	\checkmark	0	\checkmark	0			
Custom Fields	s								
CATH DAY A:			CATHE						
CATH DAY C: CATH DAY E:			CATH D	AY D:					
							Edit	Delete	Back

***Please note:** If you identify and enter a CLABSI or CAUTI event for a location after you've already checked the 'Report No Events' box, the 'Report No Events' check will automatically be removed in the NHSN database

Additional Resources:

CMS Reporting Requirements: <u>http://www.cdc.gov/nhsn/cms/index.html</u>

