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CENTERS FOR DISEASE CONTROL AND PREVENTION  
**NHSN E-Newsletter**



# Patient Safety Component

## AUR Module Submission Required for the CMS Promoting Interoperability Program

In the fall of 2022, CMS published a final rule that moved the AUR Module reporting to a required measure under the Public Health and Clinical Data Exchange objective for calendar year 2024. Facilities participating in the CMS Promoting Interoperability Program must attest to being in the pre-production and validation stage, submitting production AU Option and AR Option data for 180 continuous days, or claim a valid exclusion.

We have an [instructional document](#) containing the steps for registering intent to submit AUR Module data and generating ad hoc status reports.

The AUR Team will include a session about this topic during the 2023 Annual NHSN Virtual Training on Thursday, March 23. See below for the link to register for the Annual Training. This session will also be recorded and posted to our website at a later date.

Be on the lookout for additional materials being posted on the NHSN website in the coming months.

## 2023 NHSN Virtual Annual Training Updates

### NHSN Training Updates: Registration is Now Open!

The Centers for Disease Control and Prevention's National Healthcare Safety Network (NHSN) will hold our **Virtual 2023 Annual NHSN Training: Patient Safety, Outpatient Procedure, and Neonatal Component Healthcare Surveillance and Analytics** on **March 21 – 23, 2023**.

This training is intended for users of the Patient Safety Component, Outpatient Procedure Component, and Neonatal Component in NHSN. The virtual training event will feature live presentations, pre-recorded training videos for self-paced viewing, and opportunities for Q&A.

Click the link to register for the Annual Training event: <https://2023nhsntraining.vfairs.com/>

We look forward to seeing you virtually at the 2023 NHSN Training!

The NHSN Team

## AUR Module Updates

### Please upload January 2023 AU Data

NHSN has resolved the issue affecting the upload of January 2023 AU Option data. You can now proceed with uploading your January 2023 AU Option data. Please let us know if you have any questions or run into any issues. As a reminder, all 2023 AU files must contain all 95 drugs, or they will fail to upload. You will find the [list of all 95 drugs](#) on the NHSN AUR page webpage in the Supporting Materials section.

### Protocol updates

The 2023 AUR Module protocol is now posted! Please see the [2023 Patient Safety Component Manual Summary of Updates](#) for a high-level list of changes.

Please bookmark the direct link to the [AUR Module Protocol](#) instead of downloading a copy so you're always viewing the most recent version.

### AUR Module Submission Required for the CMS Promoting Interoperability Program

See the article listed above [AUR Module Submission Required for the CMS Promoting Interoperability Program](#)

### 2022 NHSN Annual Hospital Survey Responses and Potential SAAR Value Changes

The 2022 NHSN Annual Hospital Survey is now available for NHSN facilities to complete. NHSN uses Annual Hospital Survey data for facility-level risk adjustment in SAAR models. Prior to the completion of the 2022 survey, your 2022 and 2023 SAARs were risk-adjusted based on your 2021 survey responses. Once your facility completes the 2022 survey and you generate new data sets within NHSN, those survey responses will be used to risk adjust your 2022 and 2023 SAARs instead. It is possible your 2022 survey responses may move your facility to a different risk adjustment category for one or more SAARs. If this happens, you will notice a change in your 2022 and 2023 SAAR values from what they were before your facility completed the 2022 Annual Hospital Survey. Refer to page 22 of the [SAAR Guide](#) for more information.

### Resolution for Issues with the NHSN AU Option SAAR Reports

Since the December NHSN release, you may have noticed a few issues with the NHSN AU Option SAAR reports. Two issues should be resolved as of February 4, 2023. Fixes for the remaining SAAR report issues will be included in an upcoming release.

- **Issue:** There were several instances where NHSN was incorrectly suppressing the predicted and All Antibacterial SAAR, including when the total antimicrobial days was less than days present. This occurred for both facility users and group users. In addition, users were unable to run the All Adult and Ped SAARs reports when “cumulative” was selected as the groupBy option on the Display Options tab of the Modification screen.
- **Resolution:** A fix for these issues was included in the NHSN release 11.2.0 that occurred on Saturday, February 4, 2023.
- **Action:** Users should generate new data sets and re-run the “SAAR Report – All Adult and Ped SAARs (2017 Baseline)” and “SAAR Report – All Adult and Ped SAARs by Location (2017 Baseline)” to view the SAAR data for certain months that were previously suppressed and/or run the report at the “cumulative” groupBy level.

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## AU Option Data Quality Outreach

Thank you to all of the facilities that responded to the AU Option data quality outreach related to potentially incompatible routes of administration. As a reminder, facilities should report data to the AU Option according to the route of administration, not the formulation used to prepare the dose (for example, injectable tobramycin administered to a patient via the inhaled route should be reported as a respiratory administration). The AU Option only accepts four routes of administration: intravenous (IV), intramuscular (IM), digestive, and respiratory. Facilities should not include administrations via any other route of administration (for example, topical, antibiotic locks, intracavity, intrapleural, intraperitoneal, intraventricular, ophthalmic, otic, or irrigation) in AU Option reporting. If your facility previously reported data via any of these ineligible routes but you are unable to correct the data retrospectively, please work with your vendor to ensure that administrations via ineligible routes are excluded from your data moving forward.

## AR Option Synthetic Data Set (SDS) Validation

The AR SDS validation process is well underway with [vendors already successfully validating](#) their software. As a reminder, your vendor (or the software system that creates the AR Event and AR Summary files for you) must complete the AR SDS validation process prior to you being able to upload AR Option data for May 2023. Specifically, AR Event and AR Summary files for May 1, 2023 and forward that do not contain credentials for a validated vendor software solution will fail to upload into NHSN. If your vendor is not on the list of vendors that have passed AR SDS, we encourage you to reach out to them to determine their timeline.

## DIALYSIS COMPONENT

### Mark Your Calendars – Q4 2022 QIP Deadline

The 2022 Quarter 4 deadline (payment year 2024) for the Centers for Medicare and Medicaid (CMS) End Stage Renal Disease (ESRD) Quality Incentive Program (QIP) is right around the corner! The deadline for reporting is Friday, March 31, 2022 at **11:59 PM PT**. Facilities reporting to NHSN should report all three months (October, November, December 2022) of data no later than March 31, 2023, in order to receive full credit for Q4 2022 reporting and meet requirements for the CMS ESRD QIP.

## GENERAL NHSN INFORMATION

### NHSN Data Quality Corner

The presentation slides from the January 2023 webinar titled **NHSN Data Quality: A Focus on Patient Safety Annual Facility Surveys, Alerts, and AUR Data Quality Processes** are now available on the Data Quality Webpage: <https://www.cdc.gov/nhsn/ps-analysis-resources/data-quality/index.html>. The recording will be uploaded at a later date and NHSN users will be notified when its available.

Please reach out to [NHSN@cdc.gov](mailto:NHSN@cdc.gov) with any questions related to the Data Quality Webinar, or with suggestions for future webinar topics, with **subject line: DQ Webinar**.

### Notes on the NHSN Release Schedule

- Release 11.2.1.1 was deployed on February 18, 2023.
- Release 11.3.0 is scheduled to be deployed in mid-April 2023.
- The NPPT site is currently on v11.2.1.1. It's scheduled to be updated to v11.3.0 in mid-April.
  - Please send any issues found to [NHSNCDA@cdc.gov](mailto:NHSNCDA@cdc.gov).

### Release 11.2 – CDA Impact

The list below includes CRs and Defects with impact to vendors that were included for 11.2.0 that was released February 2023.

#### *Patient Safety and Dialysis Components*

- The CDA process was updated to prevent patient demographic information from being removed from the application if not present in a subsequent CDA file.
- Resolved issues with Direct Enrollment causing duplicate entries, inability to remove existing enrollments and new enrollments remaining in Pending status.

### Release 11.3 – CDA Impact

The list below includes CRs with impact to vendors currently slated for 11.3 which is planned for April 2023. The 11.3 IDM will be posted here: [Implementation Toolkits & Resources | NHSN | CDC](#).

#### *Patient Safety Component*

- Vendor credentials will be required to submit AR Event files with specimens collected on May 1, 2023, and after and AR Summary files for May 2023 and after. Please see the AR SDS information on the [AUR Synthetic Data Set Validation webpage](#) and the article below.
- Update the pop-up message displayed after manually uploading CDA files to provide a better indication when there were files that failed to import into NHSN.
- Within the AR Option, update display name for code IMIPWC (LOINC code: 18932-4) from “Imipenem with Cilastatin” to “Imipenem”. This is a human-readable change only. No changes are required to the CDA submissions.

#### *Hemovigilance (Biovigilance) Component*

- Add reporting for ‘Pathogen Reduced Cryoprecipitated Fibrinogen Complex’ to Monthly Reporting Denominators.

### Antimicrobial Resistance Synthetic Data Set (AR SDS)

AR SDS version 1.4 is [posted](#) and available for use. As a reminder, vendors must complete validation prior to being able to submit data for May 2023. Specifically, all production AR Event and AR Summary CDA files must contain the SDS

Validation ID (provided by the NHSN Team after confirmation of successful validation) and a Vendor (application) OID. AR CDA files that do not contain this information will be rejected.

If you have any questions about the AR SDS or would like to set up a call to discuss the details, please email [NHSNCDA@cdc.gov](mailto:NHSNCDA@cdc.gov).

## Support Requests for the NHSN CDA Team

We encourage facilities and vendors to reach out to the NHSN CDA Team with questions, comments, and concerns via [NHSNCDA@cdc.gov](mailto:NHSNCDA@cdc.gov). We aim to reply to your email within 5 business days, but that timeline may vary depending on the complexity of the issue and the amount of investigation needed. If you don't hear from us within 5 business days, please send another email.

If your email involves messages sent via Direct CDA Automation not receiving a response, please first ensure it's been more than 24 hours since the messages were originally sent to NHSN via Direct. During specific times of the month, NHSN experiences a high volume of Direct submissions, and it can take a while for the NHSN servers to clear the queue. If it has been more than 24 hours since you sent the message via Direct, please help us in our investigation by providing the following details for your submissions (see example information below). We aim to reply to emails regarding missing Direct message responses within 1 business day but failure to provide information below will extend the turnaround time.

Facility Name	NHSN Facility ID#	Submitted Date/Time	Zip file Name	Message ID
Best Hospital Ever	12345	11/27/2018 13:15	AU123_NOV_2018	<a href="mailto:1230589110.20827.1543342802378.JavaMail.tomcat@vendor-hisp02">1230589110.20827.1543342802378.JavaMail.tomcat@vendor-hisp02</a>

## CDA Direct Automation

At this time, over 9,500 facilities have signed up for DIRECT CDA Automation. If your facility is sending data via CDA and you are interested in learning more about DIRECT CDA Automation, ask your CDA vendor or check out the information on the [NHSN CSSP Importing Data webpage](#).

## Guide to CDA Versions

- The Guide to CDA versions on the NHSN CDA Submission Support Portal is always available to verify valid CDA imports based on the correct Implementation Guide.
- In addition, implementers can use the GitHub site to get all the latest xml (Schema, Schematron, and sample) files.
  - XML and Related files (Schematron, sample, html, stylesheet) are housed on the HL7 GitHub site: <https://github.com/HL7/cda-hai>
  - The latest CDA Schema is located on the HL7 GitHub site: <https://github.com/HL7/cda-core-2.0/tree/master/schema/extensions>
- The updated version of the Release 11.1 IDM for vendors is available on the CDA Portal Implementation Toolkits & Resources Website: <https://www.cdc.gov/nhsn/cdaportal/toolkits.html>

## Guide to CDA Versions

[Print](#)

For creating CDA files, please see the specific Implementation Guide (IG) and its associated reference materials.

The table below describes the specific Implementation Guide (IG) to be used for each component based on the event/insertion/procedure/specimen collection dates (as applicable) for each year.

Download the corresponding CDA Toolkits for the corresponding year.

Events or Denominators	2023	2022	2021	2020
<b>CDA Toolkit Release</b>	<b>11.1</b>	<b>10.1</b>	<b>9.5 &amp; 10.0</b>	<b>9.4</b>
<b>DIALYSIS</b>				
Dialysis Event	R3-D4	R3-D4	R3-D4	R3-D1.1
Dialysis Denominator	R3-D3	R3-D3	R3-D3	R3-D3
<b>EVENTS</b>				
Primary Bloodstream Infection (BSI)	R4-D1	R4-D1	R3-D3	R3-D3
Central Line Insertion Practices Adherence (CLIP) Monitoring	R2-D2.1	R2-D2.1	R2-D2.1	R2-D2.1
Urinary Tract Infection	R4-D1	R4-D1	R2-D1.1	R2-D1.1
Laboratory-identified (LabID) MDRO or CDI Event	R2-D2.1	R2-D2.1	R2-D2.1	R2-D2.1
Ventilator-associated Event (VAE)	R4-D1	R4-D1	R3-D2	R3-D2

## As an Important Reminder...

Not all NHSN changes are documented in the IDM, be sure to reference the updated protocols. Other helpful links are the following:

- Archived Newsletters: <https://www.cdc.gov/nhsn/newsletters/index.html>
- Archived NHSN email communication: <https://www.cdc.gov/nhsn/commup/index.html>
  - Includes release notes and summary of updates for specific components
- Vendor webinars & training videos: <https://www.cdc.gov/nhsn/cdaportal/webinars.html>

## NHSN Help Desk Activity Update

### Quarter 1, 2023

(Averages)

- 202 new facilities enrolled in NHSN this quarter
- 93 - Ambulatory Surgery Centers (ASCs) enrolled this quarter
  - 18,827 – iSupport Tickets this quarter
    - 233 – iSupport Tickets per day
    - 1,371 – iSupport Tickets per week

## NHSN Enrollment Update

### NHSN Enrollment Update (as of March 06, 2023):

8,298 Hospitals (this includes 626 Long-term Acute Care Hospitals and 521 Free-standing Inpatient Rehabilitation Facilities)

8,643 Outpatient Hemodialysis Facilities

6,630 Ambulatory Surgery Centers (ASCs)

18,650 Long-term Care Facilities

**42,221 Total Healthcare Facilities Enrolled**

The National Healthcare Safety Network (NHSN) is a voluntary, secure, Internet-based surveillance system that integrates patient and healthcare personnel safety surveillance systems managed by the Division of Healthcare Quality Promotion (DHQP) at CDC.

During 2008, enrollment in NHSN was opened to all types of healthcare facilities in the United States, including acute care hospitals, long-term acute care hospitals, psychiatric hospitals, rehabilitation hospitals, outpatient dialysis centers, ambulatory surgery centers, and long-term care facilities.



The Centers for Disease Control and Prevention (CDC)  
MS-A24, 1600 Clifton Road, Atlanta, GA 30333  
E-mail: [NHSN@cdc.gov](mailto:NHSN@cdc.gov); CDC's NHSN Website: [www.cdc.gov/nhsn](http://www.cdc.gov/nhsn)