



Laboratory-identified Event (LabID) Module for Long-term Care Facilities (LTCFs)

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Learning Objectives

- ❖ Demonstrate an understanding of Laboratory-identified (LabID) Event surveillance and reporting for NHSN.
- ❖ Explain *Clostridioides difficile* infection (CDI) and multi-drug resistant organism (MDRO) LabID Event definitions and protocols.
- ❖ Describe how to enter LabID event data into the NHSN application.
- ❖ Define required monthly summary data for CDI and MDRO LabID Event reporting.
- ❖ Explain importance of and steps for resolving data quality alerts.

Standardized Surveillance Criteria and Analysis for the Following Reporting Modules



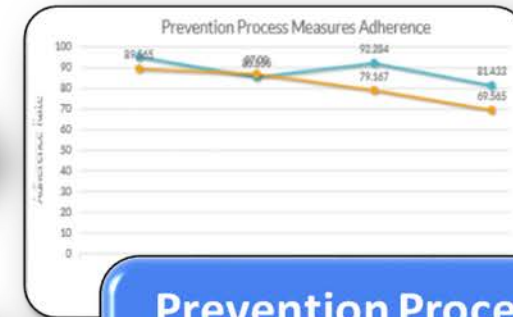
Healthcare-associated Infections (HAI)

- Urinary tract infections (UTI)
- Catheter and non-catheter associated
- **Planned**
- Respiratory Tract infection
- Skin and Soft Tissue Infection



Laboratory-identified (LabID) Event

- *C. difficile* Infection (CDI)
- Multi-drug Resistant Organisms (MDRO)



Prevention Process Measures

- Adherence to Gown and Glove Use
- Adherence to Hand Hygiene

Which LTCFs are Eligible to Report UTI Event Data to NHSN?



Certified skilled nursing facilities (SNF) and nursing homes (NH)



Intermediate/chronic care facilities for the developmentally disabled



Assisted living facilities & residential care facilities

Note: limited to Prevention Process Measures Module

What is Laboratory-identified (LabID) Event Reporting?

The use of standardized case definitions that incorporate laboratory based metrics and limited admission data as a proxy for surveillance of infection events.

Benefits of Using Positive Lab Tests to Track Infection Events

- ❖ Clinical evaluation of resident is not required, and therefore this surveillance option is often less labor intensive
- ❖ Minimal chart review
- ❖ Objective laboratory-based metrics that allow facilities to
 - ❑ Estimate infection burden in the facility
 - ❑ Estimate exposure burden in the facility
 - ❑ Assess the need for and effectiveness of interventions
 - ❑ Increased comparability between clinical settings

Surveillance and Reporting Rules for LabID Event Module

- ❖ Surveillance must occur for **all** resident care locations in the facility—referred to as facility-wide inpatient or **FacWideIN**.
- ❖ Must report positive non-duplicate test results for specimens collected from a resident in your facility at the time of specimen collection.

AND

- ❖ Specimens collected during a brief outpatient (OP) visit to an emergency department (ED) or clinic/physician's office **if**:
 - ❖ The resident returns back to your facility on same calendar day of the OP visit or the next calendar day

Note: *There should be **no** change in **current** admission date*

Surveillance and Reporting Rules for LabID Event Module

- ❖ Do **NOT** report a LabID event for positive test results that were collected while the resident was receiving **inpatient** care in another healthcare facility at the time of specimen collection.
- ❖ Do **NOT** report a LabID event for a specimen collected prior to the resident's admission to your facility.

Monthly Participation Requirements

- ❖ A **NHSN Monthly Reporting Plan** must be completed for each calendar month in which a facility plans to enter data into the NHSN.
 - ❖ LabID event surveillance must occur for the entire calendar month for the selected events/organisms
- ❖ **Submit** all non-duplicate positive specimens to NHSN (numerator data)
- ❖ **Summary Data** For each participating month, the facility must report the required denominator data
- ❖ **Resolve** “Alerts”, if applicable

Reporting Options Available in LabID Event Module

I. *Clostridioides difficile* infection (CDI; *C. difficile*)

II. Multi-drug Resistant Organism (MDRO)

- ❖ A facility can choose to monitor one or more of the following organisms:
 - ❑ *Staphylococcus aureus*, methicillin-resistant (MRSA)
 - ❑ *Staphylococcus aureus*, methicillin-susceptible (MSSA) with MRSA surveillance
 - ❑ Vancomycin-Resistant *Enterococcus* spp. (VRE)
 - ❑ Cephalosporin-Resistant *Klebsiella* spp.(CephR-*Klebsiella*)
 - ❑ Carbapenem-Resistant *Enterobacteriaceae* (CRE)
 - ✓ *Klebsiella* spp. (CRE-*Klebsiella*)
 - ✓ *E coli*. (CRE-*E coli*)
 - ✓ *Enterobacter* (CRE-*Enterobacter*)
 - ❑ Multidrug-Resistant *Acinetobacter* spp. (MDR-*Acinetobacter*)



Understanding *C. difficile* in Your Facility: Questions to Ponder...

- ❖ How do we define CDI?
- ❖ How do we track/measure CDI?
- ❖ Are my facility's CDI rates high?
- ❖ If my facility's rates are high, why?
- ❖ Are CDI rates in my community high?
- ❖ Which residents are most affected by CDI in my facility?
- ❖ Skilled care vs. long-stay?
- ❖ Recently hospitalized?
- ❖ Recent antibiotic use?
- ❖ Are most cases of CDI new, or relapsing cases?

Knowledge Check 1:

Describe how *C. difficile* LabID event surveillance for performed in a participating NHSN long-term care facility.

- A. The facility uses the CDC's National Healthcare Safety Network (NHSN) **laboratory-identified event (LabID Event) metrics** to identify and report residents with *C. difficile* in **all resident care locations** in the facility.
- B. The facility uses the CDC's National Healthcare Safety Network (NHSN) **healthcare associated infection (HAI) methods** to identify and report residents with *C. difficile* in **all resident care locations** in the facility.
- C. The facility uses the CDC's National Healthcare Safety Network (NHSN) **laboratory-identified event (LabID Event) metrics** to identify and report residents with *C. difficile* in the **skilled nursing locations** in the facility.

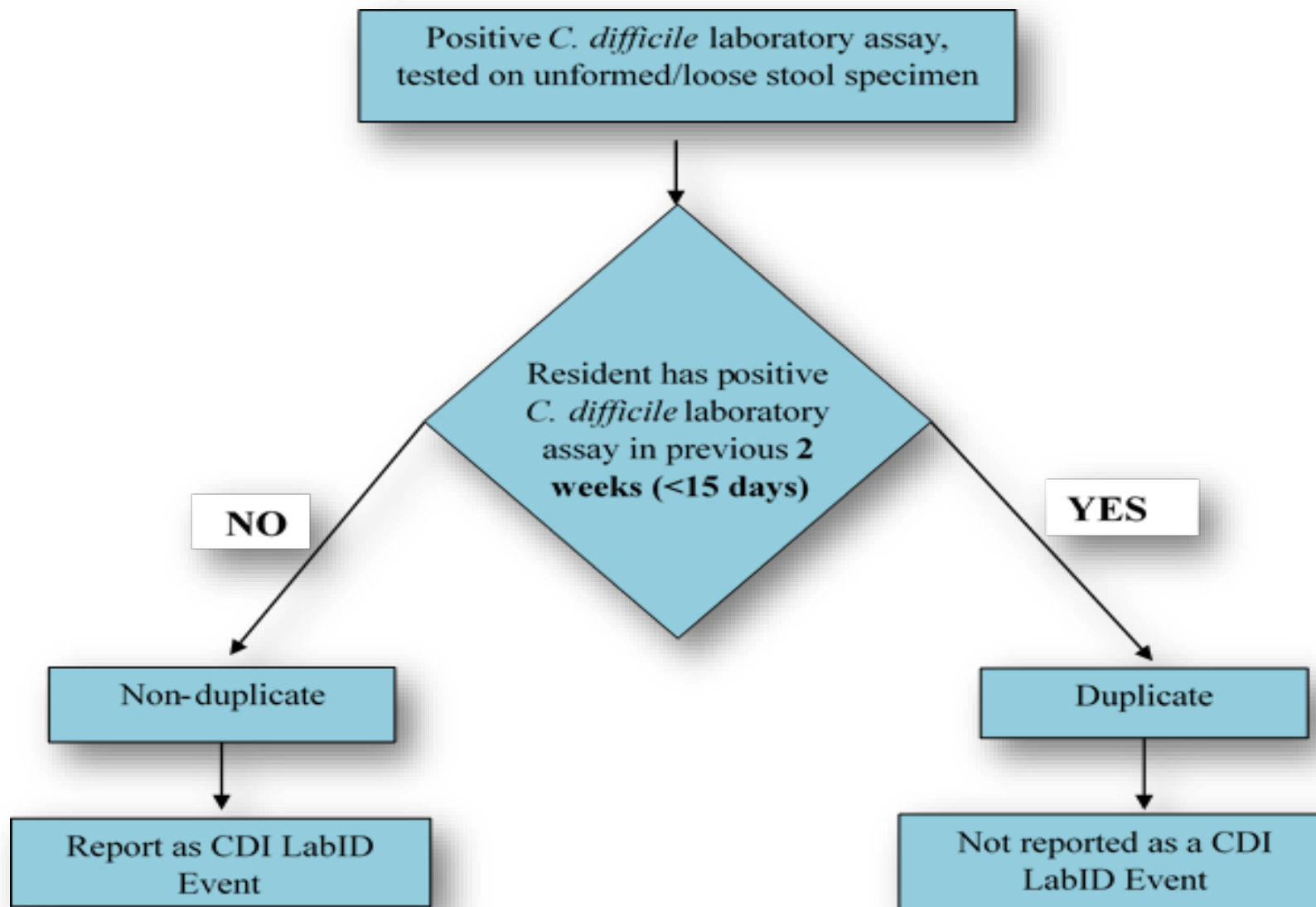
Keep in mind the following.....

- ❖ Facility wide surveillance is required, which means surveillance must occur in all resident care locations.
- ❖ Testing performed on unformed/loose stool specimens (*conforms to the shape of the container*).
- ❖ Positive tests collected before a resident's admission to the LTCF or during an admission in another facility are excluded.
- ❖ Non-duplicate laboratory results collected from an ED or other OP setting must be included if:
 - ✓ The resident returns to the LTCF on the calendar day of transfer to the OP setting or the following calendar day (specifically, there is no change in current admission date for LTCF)

Common Terms and Definitions used in LabID Event Module

- ❖ ***C. difficile* positive laboratory assay:** Unformed/loose stool that tests positive for *C. difficile* toxin A and/or B, (includes molecular assays [PCR] and/or toxin assays) OR A toxin-producing *C. difficile* organism detected by culture or other laboratory means.
- ❖ **Duplicate *C. difficile* positive laboratory assay:** Any *C. difficile* toxin positive lab result collected from the same resident, while being cared for in your facility, following a previous *C. difficile* positive laboratory assay **within the past 14 days.**
- ❖ **CDI LabID Event:** A non-duplicate *C. difficile* positive laboratory assay.

Figure 1 - *C. difficile* Test Result Algorithm for Laboratory-identified (LabID) Events



Knowledge Check 2:

Mr. Bill was transferred to your facility from the local hospital on May 1. According to his admission record, he completed treatment for CDI prior to transfer. Two days after being transferred to your facility, the new internist ordered a C. diff test “*just to be on the safe side*”. On May 4, the stool specimen was positive for toxin A.

Does this test result qualify as a CDI LabID Event that must be reported to NHSN?

- A. YES. Because the specimen was collected while resident was receiving care in your facility.
- B. NO. Because he had a documented history of CDI while in another facility.
- C. NO. because the test was collected over the weekend.

What if the Resident Has a Known History of *C. difficile*?

- ❖ A **non-duplicate**, positive *C. difficile* lab assay collected from a resident in your facility must be reported **even if**:
 - ❑ The resident has a known history of CDI
 - *For example, the resident had a positive specimen collected during an admission in another healthcare facility and then again after re-admission to your facility—report the specimen collected in your facility*
 - ❑ The positive specimen was collected in the first three days of the resident's admission or re-admission to your facility

Knowledge Check 3:

Mr. Lloyd, a resident in your LTCF, was re-admitted to your facility after a brief inpatient stay at the local acute care hospital. You read in his chart that during his admission in the acute care facility, he tested positive for *C. difficile*.

Should you report a CDI LabID event for the positive *C. difficile* test result that was collected during his admission in the acute care facility?

- A. YES
- B. NO

What Specimens Should NOT be Submitted to NHSN as a CDI LabID Event?

- ❖ Negative *C. difficile* laboratory assay lab results
- ❖ Specimens collected during an admission in another healthcare facility
- ❖ Duplicate positive results, defined as the same resident having a positive *C. difficile* lab result in the previous 14 days, when that specimen was collected in your facility or OP setting (ED or clinic)


Knowledge Check 4 (Mr. Lloyd cont.):

What if Mr. Lloyd had another positive *C. difficile* test result two days after returning to your facility?

Should you report this specimen as a CDI LabID event?

A. YES

B. NO



Specimen collected while receiving care in the LTCF

Knowledge Check 5:

Ms. Taylor, a resident in your LTCF, was transferred to the emergency department (ED) on June 1 for complaints of ongoing diarrhea and fever. A stool specimen collected in the ED tested positive for *C. difficile*. After receiving IV fluids, Ms. Taylor was transferred back to your facility on June 2 and was placed in contact isolation.

Should you report the positive *C. difficile* test result from the ED as a CDI LabID Event for your facility?

A. YES

YES. The specimen was collected while she was receiving outpatient care and she returned to your facility the next calendar day.

B. NO

Categorization of CDI LabID Events

- ❖ NHSN will analyze data that have been entered into the application.
- ❖ This includes categorizing all CDI LabID events to determine if the event is
 - ❑ Community onset (CO)
 - ❑ Long term care facility onset (LO)
 - ❑ Acute care transfer long term care facility onset (ACT-LO)

AND

- ❑ If the event is incident or recurrent

NHSN will Categorize CDI LabID Events Based on:

1. **Reported date of current admission to facility,**
 2. **Reported specimen collection date (also referred to as date of event),**
 3. **Reported date of last transfer from acute care to your facility.**
- ❖ Community-onset (CO): Date specimen collected 3 calendar days or less after current admission to the facility (i.e., days 1, 2, or 3 of admission)
 - ❖ Long-term Care Facility-onset (LO): Date specimen collected more than 3 calendar days after current admission to the facility (i.e., on or after day 4)
 - ❑ LO Events are further sub-classified :
 - ❑ **Acute Care Transfer-Long-term Care Facility-onset (ACT-LO):** LO LabID events with a specimen collection date **4 weeks or more** following date of last transfer from an acute care facility

Categorization of CDI LabID Events is Dependent on Accurate Event Information

Resident type *: LS - Long Stay ▾

Date of First Admission to Facility *: 12/28/2016 15

Date of Current Admission to Facility *: 03/01/2018

Event Information

Event Type *: LABID - Laboratory-identified MDRO or CDI Event ▾

Specific Organism Type *: CDIF - C. difficile ▾

Specimen Body Site/System *: DIGEST - Digestive System ▾

Specimen Source *: STOOL - Stool specimen ▾

Resident Care Location *: 4 GEN - GENERAL UNIT ▾

Primary Resident Service Type *: GENNUR - Long-term general nursing ▾

Has resident been transferred from an acute care facility in the past 4 weeks *? Y - Yes ▾

If Yes, *date of last transfer* from acute care to your facility *: 03/01/2018 15

EXAMPLE: NHSN Classification of LabID Events as Community-onset (CO) or LTCF-onset (LO)

LTCF Current Admission Date: March 1				
March 1 st	March 2 nd	March 3 rd	March 4 th	March 5 th
Day 1	Day 2	Day 3	Day 4	Day 5
Community-Onset (CO)			Long-term Care Facility Onset (LO)	



**Both Community-Onset
and LTCF-Onset LabID
Events Must be
Submitted to the NHSN**

NHSN will Further Categorize CDI LabID Events Based on: date specimen collected and specimen collection date of the most recent CDI LabID Event entered into NHSN

- ❖ Incident CDI LabID Event: The first CDI LabID Event ever submitted for the resident in your facility or a CDI LabID Event from a specimen collected **more than 8 weeks** after the most recent CDI LabID Event entered into the NHSN application
- ❖ Recurrent CDI LabID Event: Any CDI LabID Event entered **8 weeks or less** after the most recent CDI LabID Event entered into the NHSN for a resident in in your facility.

National Healthcare Safety Network
Line Listing - All CDI LabID Events for APIC 2017 (Jan-Apr, 2017)
As of: April 20, 2017 at 10:35 AM
Date Range: LTCLABID_EVENTS eventDateYM 2017M01 to 2017M04

Facility Org ID	Resident ID	Date of Current Admission	Event ID	Event Date	Specific Organism	Location	Transferred from Acute Care Facility in Past 4 Weeks?	Date of Last Transfer from Acute Care Facility	Antibiotic Therapy at Time of Transfer?	CDI Assay	Onset
39455	123456	01/05/2017	8218	01/10/2017	CDIF	4 GEN	Y	01/05/2017	Y	Incident	ACT-LO
39455	123456	01/05/2017	8944	01/24/2017	CDIF	4 GEN	Y	01/05/2017	Y	Recurrent	ACT-LO
39455	1234	02/02/2017	9255	02/08/2017	CDIF	4 GEN	Y	02/02/2017	N	Incident	ACT-LO
39455	8989	02/01/2017	10383	02/14/2017	CDIF	3 REHAB	Y	02/01/2017	N	Incident	ACT-LO
39455	4444	02/14/2017	10382	02/28/2017	CDIF	3 REHAB	Y	02/14/2017	N	Incident	ACT-LO
39455	111111	12/15/2014	10380	03/01/2017	CDIF	1 SOUTH	N	.	.	Incident	LO
39455	8989	02/01/2017	10397	03/04/2017	CDIF	3 REHAB	N	.	.	Recurrent	LO
39455	2468	02/28/2017	10381	03/20/2017	CDIF	1 SOUTH	Y	02/28/2017	N	Incident	ACT-
39455	9696	02/04/2014	10670	04/07/2017	CDIF	4 GEN	N
39455	7373	04/10/2017	10671	04/12/2017	CDIF	3	Y

Let's Review!

Resident ID	Current Admission Date	Specimen Collection Date	Previous positive C. diff result date	Submit as CDI LabID Event
10	2/1/19	2/2/19	none	YES
11	2/15/19	2/25/19	none	YES
12	2/1/19	2/1/19	none	YES
10	2/1/19	2/10/19	2/2/19	NO, duplicate
13	2/20/19	2/17/19	none	NO, collected prior to admission to facility
11	3/1/19	3/7/19	2/25/19	NO, duplicate
10	2/1/19	2/18/19	2/10/19	NO, duplicate from last specimen collection

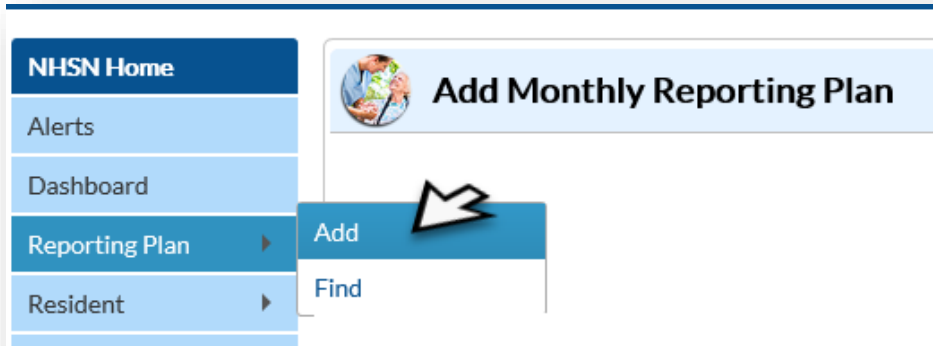


Submit Reporting Plan for Every Month of Participation

Monthly Reporting Plan

- ❖ Informs CDC-NHSN which module(s) and events a facility is following during a given month
- ❖ A facility must enter a Plan for every month in which surveillance and data submissions will occur
 - ❑ A Plan must be in place before events can be entered into NHSN
- ❖ Plans may be entered for up to one year in advance

Add Monthly Reporting Plan for CDI LabID Event Module Participation



- Facility-wide Inpatient (FACWIDEIN) is default location
- Select **CDIF-C. difficile** as the *Specific Organism Type*
- LabID Event All Specimens is default

A screenshot of the 'Add Monthly Reporting Plan' form. The form includes the following fields and options:

- Mandatory fields marked with ***
- Facility ID *: Angela LTCF Test Facility (ID 39455) ▼
- Month *: April ▼
- Year *: 2019 ▼
- No Long Term Care Facility Component Modules Followed this Month

LabID Event Module

Locations	Specific Organism Type	Lab ID Event All Specimens
Facility-wide Inpatient (FacWIDEIn) ▼	CDIF - C. difficile ▼	<input checked="" type="checkbox"/>

Buttons: Add Row, Clear All Rows, Copy from Previous Month

Buttons: Save, Back

Knowledge Check 6:

Based on this reporting plan, what modules and events will this facility report for June, 2018?

Facility ID *: Angela LTCF Test Facility (39455)

Month *: June

Year *: 2018

No Long Term Care Facility Component Modules Followed this Month

HAI Module

	Locations	UTI
	Facility-wide Inpatient (FacWIDEIn)	<input type="checkbox"/>

LabID Event Module

	Locations	Specific Organism Type	Lab ID Event All Specimens
	Facility-wide Inpatient (FacWIDEIn)	CDIF - C. difficile	<input checked="" type="checkbox"/>

Add Row Clear All Rows Copy from Previous Month

Prevention Process Measure Module

	Locations	Hand Hygiene	Gown and Gloves Use
	Facility-wide Inpatient (FacWIDEIn)	<input type="checkbox"/>	<input type="checkbox"/>

- A. UTI only
- B. All LabID events
- C. CDI LabID event only



SUBMIT YOUR EVENTS

Non-duplicate CDI LabID Events

Reporting CDI LabID Event

Customizable NHSN LabID Event form available for data collection

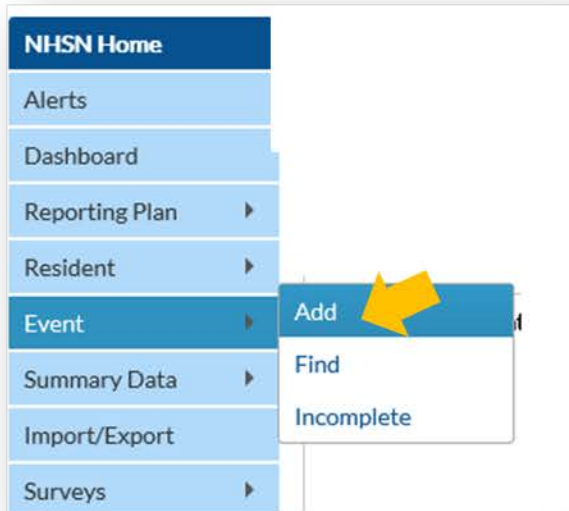
- Optional form
- Allows users to collect required information prior to submitting NHSN event
- Use one form for each LabID event
- Form may be customized for each facility
- Use accompanying *Table of Instructions* for helpful guidance

The image shows a screenshot of the NHSN Laboratory-identified MDRO or CDI Event for LTCF form. The form is titled "Laboratory-identified MDRO or CDI Event for LTCF" and includes the NHSN logo and approval information (OMB No. 0920-0666, Exp. Date: 11/30/2019, www.cdc.gov/nhsn). The form is labeled "Page 1 of 1" and contains several sections for data entry:

- Required for saving:** Facility ID, Event #, Resident ID, Social Security #.
- Medicare number (or comparable railroad insurance number):** Resident Name, Last, First, Middle.
- Demographics:** Gender (M, F, Other), Date of Birth, Ethnicity, Race.
- Resident type:** Short-stay, Long-stay.
- Admission dates:** Date of First Admission to Facility, Date of Current Admission to Facility.
- Event Details:** Event Type: LabID, Date Specimen Collected.
- Specific Organism Type:** Checkboxes for MRSA, MSSA, VRE, C. difficile, CephR-Klebsiella, CRE-E. coli, CRE-Enterobacter, CRE-Klebsiella, MDR-Acinetobacter.
- Specimen information:** Specimen Body Site/System, Specimen Source.
- Resident Care Location:** Resident Care Location.
- Primary Resident Service Type:** Checkboxes for Long-term general nursing, Long-term dementia, Long-term psychiatric, Skilled nursing/Short-term rehab (subacute), Ventilator, Bariatric, Hospice/Palliative.

Laboratory-identified MDRO or CDI Event for LTCF Form (CDC 56.138)

Submitting a CDI LabID Event to NHSN



Red asterisk =
required to save page

NHSN - National Healthcare Safety Network

Add Event

Mandatory fields marked with *

Fields required for record completion marked with **

Resident Information

Facility ID *: Angela LTCF Test Facility (ID 39455) ▼

Resident ID *: 12345 Find Find Events for Resident

Social Security #: 545-48-9637

Medicare number (or comparable railroad insurance number):

First Name: Mary

Last Name: Sue

Middle Name:

Gender *: F - Female ▼

Date of Birth *: 01/25/1940 29

Ethnicity: ▼

Race: American Indian/Alaska Native Asian
 Black or African American Native Hawaiian/Other Pacific Islander
 White

Resident type *: ▼

Date of First Admission to Facility *: 03/01/2018 29

Date of Current Admission to Facility *: 29

Event Information

Event Type *: ▼

Date of Event *: 29

Comments

Save Back

Submitting a CDI LabID Event to NHSN

Resident Type

The screenshot shows the NHSN Long Term Care Facility Component Home page. The left sidebar contains a navigation menu with the following items: NHSN Home, Alerts, Reporting Plan, Resident, Event, Summary Data, Surveys, Analysis, Users, Facility, Group, and Logout. The main content area is titled "NHSN Long Term Care Facility Component Home" and features a "Resident type *" dropdown menu. The dropdown menu is open, showing two options: "SS - Short-stay" and "LS - Long Stay".

SS-Short-stay: On the date of specimen collection (event date), the resident has been in facility for 100 days or less from date of first admission.

LS-Long-stay: On the date of specimen collection (event date), the resident has been in facility for more than 100 days from date of first admission.

Submitting a CDI LabID Event to NHSN

Date of First and Current Admission to Facility

NHSN - National Healthcare Safety Network

AANTILA
Angela LTCF Test Facility

NHSN Home

Alerts

Reporting Plan

Resident

Event

Summary Data

Surveys

Analysis

NHSN Long Term Care Facility Component Home Page

Date of First Admission to Facility *: 03/01/2018

Date of Current Admission to Facility *: 04/03/2019

Date resident first entered the facility. This date remains the same even if the resident leaves the facility (transfers to another facility) for short periods of time (<30 consecutive days).

Most recent date resident entered the facility. If the resident enters the facility for the first time and has not left for more than 2 calendar days, then the date of current admission will be the same as the date of first admission. If the resident leaves the facility for more than 2 calendar days (the day the resident left the facility = day 1) and returns, the date of current admission should be updated to the date of return to the facility.

Submitting a CDI LabID Event to NHSN

Event Type and Date Specimen Collected

The screenshot shows a form with several fields. A yellow box highlights the 'Event Information' section. Within this section, the 'Event Type *' dropdown menu is open, showing two options: 'LABID - Laboratory-identified MDRO or CDI Event' (which is selected and highlighted in blue) and 'UTI - Urinary Tract Infection'. A red arrow points from the yellow box to this dropdown. To the right, the 'Date of Current Admission to Facility *' field contains the date '03/07/2018'. Below it, the 'Date Specimen Collected *' field is empty. A yellow box highlights this field, with a blue callout pointing to it. A large yellow box with black text is positioned over the top part of the form, containing the instruction: 'Date Specimen Collected cannot occur before Date of Current Admission to Facility'. Two yellow arrows point from this box to the 'Date of Current Admission to Facility *' and 'Date Specimen Collected *' fields.

Date Specimen Collected cannot occur before Date of Current Admission to Facility

Event Information

Event Type *: LABID - Laboratory-identified MDRO or CDI Event
UTI - Urinary Tract Infection

Date of Current Admission to Facility *: 03/07/2018

Date Specimen Collected *:

Also referred to as *Date of Event*

Submitting a CDI LabID Event to NHSN

Specific Organism Type

Event Information

Event Type *: LABID - Laboratory-identified MDRO or CDI Event ▼

Specific Organism Type *:

- ACINE - MDR-Acinetobacter
- CDIF - C. difficile
- CEPHRKLEB - CephR-Klebsiella
- CREECOLI - CRE-Ecoli
- CREENTERO - CRE-Enterobacter
- CREKLEB - CRE-Klebsiella
- MRSA - MRSA
- MSSA - MSSA
- VRE - VRE

Submitting a CDI LabID Event to NHSN

Specific Organism Type: CDIF- C. difficile

Event Information

Event Type *: LABID - Laboratory-identified MDRO or CDI Event ▼

Specific Organism Type *: CDIF - C. difficile ▼

Select CDIF-C. difficile to auto-populate specimen body site and specimen

Specific Organism Type *: CDIF - C. difficile ▼

Specimen Body Site/System *: DIGEST - Digestive System ▼

Specimen Source *: STOOL - Stool specimen ▼

Submitting a CDI LabID Event to NHSN

Resident Care Location

Event Information

Event Type *: LABI

Specific Organism Type *: 100 EAST - DEMENTIA UNIT

Specimen Body Site/System *: 2 PSY - PSYCHIATRIC

Specimen Source *: 3 REHAB - SHORT TERM REHAB

Resident Care Location *: 4 GEN - GENERAL UNIT

: 5 HOS - HOSPICE UNIT

: DEMENTIA - LOCKED UNIT

Event v

v

v

Select location of resident at time of specimen collection. Note: Resident care locations are set-up by the facility after facility enrollment

Submitting a CDI LabID Event to NHSN

Primary Service Type

Event Information

Event Type *: LABID - Laboratory-identified MDRO or CDI Event ▼

Specific Organism Type *: CDIF - C. difficile ▼

Specimen Body Site/System *: DIGEST - Digestive System

Specimen Source *: BARIA - Bariatric

Resident Care Location *: HOSP - Hospice/Palliative

DEMENT - Long-term dementia

Primary Resident Service Type *: GENNUR - Long-term general nursing

PSYCH - Long-term psychiatric

SKNUR - Skilled nursing/short term rehab

VENT - Ventilator

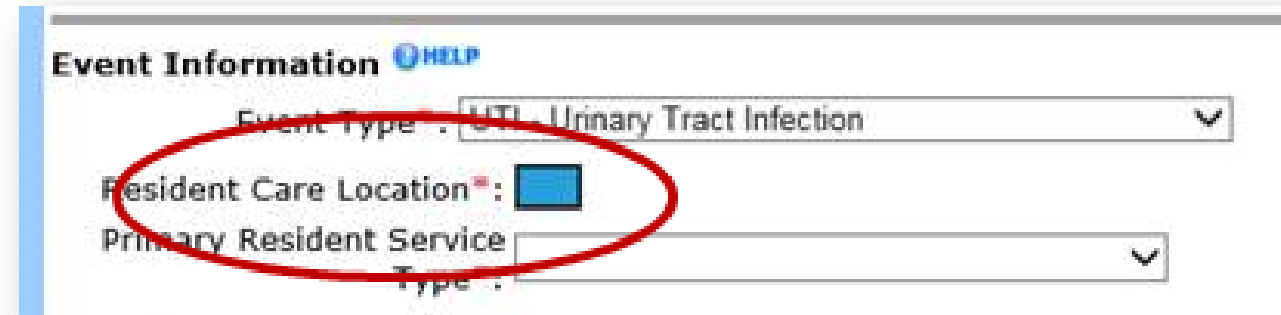
Select the NHSN Primary Resident Service Type at time of specimen collection

Knowledge Check 7:

I'm entering a CDI LabID Event for a resident in my facility, but when I try to select her resident care location, the drop-down box is blank.

What is wrong?

- A. The resident doesn't really have CDI.
- B. The resident is not really a resident in your facility.
- C. The resident care locations have not been set-up (mapped) for your facility and you must do this before submitting events to NHSN.



The screenshot shows a web form titled "Event Information" with a "HELP" link. The form contains three fields: "Event Type" with a dropdown menu showing "UTI - Urinary Tract Infection", "Resident Care Location" with a red asterisk and a blank blue dropdown box, and "Primary Resident Service" with a dropdown menu. A red circle highlights the "Resident Care Location" field.

**Resident care locations must be set-up
(mapped) in the NHSN application before
reporting events since the event location
will be selected during event reporting**



Submitting a CDI LabID Event to NHSN

Transfer from Acute Care Facility

Event Information

Spec
Specimen

Resid

Primary Resident Service

GENERAL - Long-term general nursing

Has resident been transferred from an acute care facility in the past 4 weeks *?

Y - Yes

Was the resident directly admitted to your facility from an acute care facility in past 4 weeks? If 'YES' is selected, additional data must be entered

Submitting a CDI LabID Event to NHSN

Transfer from Acute Care Facility, continued

Event Information

Event Type *: LABID - Laboratory-identified MD

Specific Organism Type *: CDIF - C. difficile

Specimen Body Site/System *: DIGEST - Digestive System

Specimen Source *: STOOL - Stool specimen

Resident Care Location *: 4 GEN - GENERAL UNIT

Primary Resident Service Type *: GENNUR - Long-term general nursing

This answer to this question will be used by NHSN to determine if the LabID event is associated with an acute care transfer

Has resident been transferred from an acute care facility in the past 4 weeks *?

If Yes, *date of last transfer* from acute care to your facility *:




Submitting a CDI LabID Event to NHSN

Transfer from Acute Care Facility, continued

Event Information

Event Type *: LABID - Laboratory-identified MDRO or CDI Event ▾

Date Specimen Collected *: 04/04/2019 

Specific Organism Type *: CDIF - C. difficile ▾


Specimen Body Site/System *: DIGEST - Digestive System ▾

Specimen Source: *: STOOL - Stool specimen ▾

Resident Care Location *: 4 GEN - GENERAL UNIT ▾

Primary Resident Service Type *: GENNUR - Long-term general nursing ▾

Has resident been transferred from an acute care facility in the past 4 weeks *? Y - Yes ▾

If Yes, date of last transfer from acute care to your facility *: 04/02/2019 

If Yes, was the resident on antibiotic therapy for this specific organism type at the time of transfer to your facility *? ▾

Informs burden of CDI coming into facility

If YES to this question, this resident should also be included in the monthly summary count for. *Number of Admissions on C. diff Treatment*

Common Medications Used to Treat *C. difficile*

If Yes, was the resident on antibiotic therapy for this specific organism type at the time of transfer to your facility *?

Y - Yes ▼

If resident is admitted on treatment for CDI, you may see one of the below medications in the admission records:

- Metronidazole (Flagyl)
- Oral vancomycin (Vancocin HCL)
- Fidaxomicin (Dificid, Dificlir, OPT-80, PAR-101)

Submitting a CDI LabID Event to NHSN

Documented Evidence Previous.....

Event Information

Event Type *: LABID - Laboratory-identified MDRO or CDI Event

Date Specimen Collected *: 04/04/2019

Specific Organism Type *: CDIF - C. difficile

Specimen Body Site/System *: DIGEST - Digestive System

Specimen Source *: STOOL - Stool specimen

Resident Care Location *: 4 GEN - GENERAL UNIT

Primary Resident Service Type *: GENNUR - Long-term general nursing

Has resident been transferred from an acute care facility in the past 4 weeks *: Y - Yes

If Yes, date of last transfer from acute care to your facility *: 04/02/2019

If Yes, was the resident on antibiotic therapy for this specific organism type at the time of transfer to your facility *: Y - Yes

Documented evidence of previous infection or colonization with this specific organism type from a previously reported LabID Event in any prior month? Y - Yes

Auto-populated by the NHSN.
Non-editable by users

Submitting a CDI LabID Event to NHSN

Optional: *Custom Fields and Comments*

Custom Fields [Help](#)

PRIOR HX: FLUOROQUINOLONE:
CEPHALOSPORINS: CLINDAMYCIN:

Comments

TRANSFER FROM GENERAL MEMORIAL. RECENT TREATMENT FOR CHRONIC UTI. |

Optional Custom fields provide facilities option to document additional variables of interest. Must be set-up before reporting event

Comments are free text

- Alerts
- Dashboard
- Reporting Plan ▶
- Resident ▶
- Event ▶
- Summary Data ▶
- Import/Export
- Surveys ▶
- Analysis ▶
- Users ▶
- Facility ▶
- Group ▶
- Logout

Mandatory fields marked with *
Fields required for record completion marked with **

Resident Information

Facility ID *: Angela LTCF Test Facility (ID 39455) ▼

Resident ID *: 12345

Last Name: Sue

Middle Name:

Gender *: F - Female ▼

Ethnicity: ▼

- Race:
- American Indian/Alaska Native
 - Asian
 - Black or African American
 - Native Hawaiian/Other Pacific Islander
 - White

Resident type *: LS - Long Stay ▼

Date of First Admission to Facility *: 03/01/2018

Social Security #: 545-48-9637

Medicare number (or comparable railroad insurance number):

First Name: Mary

Date of Birth *: 01/25/1940

Date of Current Admission to Facility *: 04/02/2019

Event Information

Event Type *: LABID - Laboratory-identified MDRO or CDI Event ▼

Specific Organism Type *: CDIF - C. difficile ▼

Specimen Body Site/System *: DIGEST - Digestive System ▼

Specimen Source *: STOOL - Stool specimen ▼

Resident Care Location *: 4 GEN - GENERAL UNIT ▼

Primary Resident Service Type *: GENNUR - Long-term general nursing ▼

Date Specimen Collected *: 04/04/2019

Has resident been transferred from an acute care facility in the past 4 weeks *: Y - Yes ▼

If Yes, date of last transfer from acute care to your facility *: 04/02/2019

If Yes, was the resident on antibiotic therapy for this specific organism type at the time of transfer to your facility *: Y - Yes ▼

Documented evidence of previous infection or colonization with this specific organism type from a previously reported LabID Event in any prior month? Y - Yes

Custom Fields [Help](#)

PRIOR HX: YES FLUOROQUINOLONE: YES
 CEPHALOSPORINS: CLINDAMYCIN:

Comments

TRANSFER FROM GENERAL MEMORIAL. RECENT TREATMENT FOR CHRONIC UTI. |



Event 30288 created successfully.



Collect and Submit CDI Monthly Summary Data

Monthly Summary Reporting for CDI (Denominator)

- Optional NHSN worksheet may be used to document daily counts for selected columns
- Only the **monthly totals** should be entered into the NHSN application

Denominators for LTCF

Page 1 of 1 **required for saving *conditionally required based on monitoring selection in Monthly Reporting Plan

Facility ID:		**Location Code:			**Month:	**Year:	
Date	**Number of residents	*Number of residents with a urinary catheter	*New antibiotic starts for UTI indication	*Number of urine cultures ordered	*Number of admissions	*Number of admissions on C. diff treatment	*Number of C. diff treatment starts
1							
2							
3							
4							
...							
27							
28							
29							
30							
31							
*Total							
	Resident-days	Urinary-catheter days	Total antibiotic starts for UTI indication	Total urine cultures ordered	Resident-admissions	Resident-admissions on C. diff treatment	*Number of C. diff treatment starts

Document daily Counts

Enter Monthly Totals in NHSN

Monthly Summary Requirements for CDI LabID Event Participation

Each Month of Participation, Facility Must Report the Following:

- Resident Admissions
- Resident Days
- Number of Admissions on C. diff Treatment
- Number of Residents Started on antibiotic Treatment for *C. difficile*
- Report No Events, if applicable

MDRO & CDI LabID Event Reporting			Specific Organism Type							
Location Code			MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C. difficile	MDR-Acinetobacter
	Resident Admissions: <input type="text"/> *									
	Resident Days: <input type="text"/> *									
Facility-wide Inpatient (FacWIDEIn)	Number of Admissions on C. diff Treatment: <input type="text"/> *	LabID Event (All specimens)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Number of residents started on antibiotic treatment for C.diff: <input type="text"/> *	Report No Events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
									<input type="checkbox"/> **	
										Custom Fields

Submitting Monthly Summary Data in NHSN for CDI LabID Event Reporting

Resident Admissions:

The total number of residents admitted to the LTCF during the selected calendar month. Includes new admissions and re-admissions.

MDRO & CDI LabID Event Reporting		Specific Organism Type									
Location Code		MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C. difficile	MDR-Acinetobacter	Custom Fields	
<input type="checkbox"/> Facility-wide Inpatient (FacWIDEIn)	Resident Admissions: <input type="text"/> *										
	Resident Days: <input type="text"/> *										
	Number of Admissions on C. diff Treatment: <input type="text"/> *	<input type="checkbox"/> LabID Event (All specimens)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	
	Number of residents started on antibiotic treatment for C.diff: <input type="text"/> *	<input type="checkbox"/> Report No Events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> **	<input type="checkbox"/>	<input type="text"/>	

Submitting Monthly Summary Data in NHSN for CDI LabID Event Reporting

Resident Days: To calculate resident days, for each day of the month, record the total number of residents in the facility. At the end of the month, add the daily counts and enter the total as Resident Days.

- ❖ Data may come from electronic medical record, if available
- ❖ Users may also calculate based on facility occupancy.
 - ❑ 100 bed facility at 100% occupancy for June: 100 residents x 30 days = 3,000 total resident days
 - ❑ 100 bed facility at 90% occupancy for June: 90 residents x 30 days = 2,700 total resident days

MDRO & CDI LabID Event Reporting		Specific Organism Type								Custom Fields
Location Code		MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C. difficile	MDR-Acinetobacter	
	Resident Admissions: <input type="text"/> *									
	Resident Days: <input type="text"/> *									
Facility-wide Inpatient (FacWIDEIn)	Number of Admissions on C. diff Treatment: <input type="text"/> *	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
	Number of residents started on antibiotic treatment for C.diff: <input type="text"/> *	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> **	<input type="checkbox"/>	
		LabID Event (All specimens) Report No Events								

Submitting Monthly Summary Data in NHSN for CDI LabID Event Reporting

Number of Admissions on C. diff Treatment:

- ❖ Informs burden of CDI coming into the facility (CDI treatment prevalence)
- ❖ Total number of residents who were receiving antibiotic treatment for CDI at the time of admission to the LTCF
 - ❖ includes new and readmissions
- ❖ This count is independent of CDI LabID Event reporting
 - ❑ A resident may be included in this count, but not have a CDI LabID Event reported by the LTCF

MDRO & CDI LabID Event Reporting

Location Code

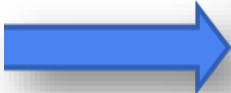
Resident Admissions: *

Resident Days: *

Facility-wide Inpatient (FacWIDEIn) *

Number of Admissions on C. diff Treatment: *

Number of residents started on antibiotic treatment for C.diff: *



**National Healthcare Safety Network
Rate Tables for CDI LabID Event Data
CDI Treatment Prevalence on Admission**

As of: April 11, 2017 at 1:31 PM
Date Range: LTCLABID_RATESCDIF summaryYM 2017M01 to 2017M04

orgID=39455

summaryYM	location	numResAdmCdifRx	numResAdm	cdiTreatPrev
2017M01	FACWIDEIN	1	12	8.333
2017M02	FACWIDEIN	3	17	17.647
2017M03	FACWIDEIN	3	17	17.647

Submitting Monthly Summary Data in NHSN for CDI LabID Event Reporting

Number of Residents Started on Antibiotic Treatment for C. diff:

- ❖ Informs understanding of CDI management practices (CDI treatment ratio)
- ❖ Can inform burden of CDI in the facility
- ❖ Captures number of residents started on treatment for CDI that month based on clinical decisions; specifically residents without a positive *C. difficile* test.
- ❖ This count is independent of testing
 - ❑ Includes ALL residents with order for treatment, including those not tested and those who were tested, but had negative results. Also includes orders for empiric treatment.

MDRO & CDI LabID Event Reporting

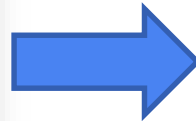
Location Code

Resident Admissions: *

Resident Days: *

Facility-wide Inpatient (FacWIDEIn) Number of Admissions on C. diff Treatment: *

Number of residents started on antibiotic treatment for C.diff: *



National Healthcare Safety Network Rate Tables for CDI LabID Event Data CDI Treatment Ratio

As of: May 28, 2019 at 5:29 PM
Date Range: All LTCLABID_RATESCDIF

Facility Org ID=56866

Summary Year/Month	Location	Number of residents started on antibiotic treatment for C.diff	Total CDI Count	CDI Treatment Ratio
2019M01	FACWIDEIN	1	1	1
2019M02	FACWIDEIN	0	2	.
2019M03	FACWIDEIN	1	3	0.33
2019M04	FACWIDEIN	0	1	.

Submitting Monthly Summary Data in NHSN for CDI LabID Event Reporting

LabID Events (All specimens):

A grayed out check-mark will appear for each organism under surveillance for the month (based on your selections in the Monthly Reporting Plan)

	Specific Organism Type							
	MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C. difficile	MDR-Acinetobacter
LabID Event (All specimens)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Report No Events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> **	<input type="checkbox"/>

Submitting Monthly Summary Data in NHSN for CDI LabID Event Reporting

- ❖ **Report No Events:** A red asterisk will appear next to boxes that require attention.
- ❖ User must put a check-mark in the box to validate that no LabID events were identified for the specified organism for the calendar month.
- ❖ The box will be grayed out and without red asterisks if at least one event was submitted for that organism during the calendar month.
- ❖ If a LabID event is entered for the organism after summary data submitted, the application will auto-update.

	Specific Organism Type							
	MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C. difficile	MDR-Acinetobacter
LabID Event (All specimens)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Report No Events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> **	<input type="checkbox"/>

Complete Monthly Summary for CDI

Facility ID * : Angela LTCF Test Facility (39455)

Month * : April

Year * : 2019

Denominators for Long Term Care Locations

- No long term care locations selected on monthly reporting plan

MDRO & CDI LabID Event Reporting

Location Code			Specific Organism Type								
			MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella		C. difficile	MDR-Acinetobacter
Facility-wide Inpatient (FacWIDEIn)	Resident Admissions: 25 *										
	Resident Days: 3211 *										
	Number of Admissions on C. diff Treatment: 1 *	LabID Event (All specimens)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Custom Fields
Number of residents started on antibiotic treatment for C.diff: 2 *	Report No Events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> **	<input type="checkbox"/>		

Prevention Process Measures

- No long term care locations selected on monthly reporting plan



Save

Back



Summary data created successfully.



Understanding MDROs in Your facility:

Questions to Ponder...

- ❖ Do we know what MDROs we have in our facility? MRSA? VRE?
- ❖ How do we track/measure the most common MDROs in our facility?
- ❖ Are the MDRO rates high in my facility?
- ❖ If my facility's rates are high, why?
- ❖ What are the most common MDROs in my community?
- ❖ Which residents are most affected by MDROs in my facility?
 - ❑ Skilled care vs. long-stay
 - ❑ Recently hospitalized?
 - ❑ Device-associated (indwelling urinary devices)
 - ❑ Wounds

Multi-drug Resistant Organisms (MDROs) Options

A facility can choose to monitor one or more of the following organisms:

- ❖ *Staphylococcus aureus*, methicillin-resistant (**MRSA**)
- ❖ *Staphylococcus aureus*, methicillin-susceptible (**MSSA**) plus **MRSA**
- ❖ Vancomycin-Resistant *Enterococcus* spp. (**VRE**)
- ❖ Cephalosporin-Resistant *Klebsiella* spp. (**CephR-Klebsiella**)
- ❖ Carbapenem-Resistant *Enterobacteriaceae* (**CRE**)
 - ❑ *Klebsiella* spp. (**CRE-Klebsiella**)
 - ❑ *E. coli*. (**CRE-E. coli**)
 - ❑ *Enterobacter* (**CRE-Enterobacter**)
 - ❖ Multidrug-Resistant *Acinetobacter* spp. (**MDR-Acinetobacter**)

Knowledge Check 8:

Describe how MDRO LabID event surveillance is performed in a participating NHSN long-term care facility.

- A.** The facility uses the CDC's NHSN **laboratory-identified event (LabID Event) metrics** to identify and report residents with selected MDRO in **all resident care locations** in the facility.
- B.** The facility uses the CDC's NHSN **healthcare associated infection (HAI) methods** to identify and report residents with selected MDRO in **all resident care locations** in the facility.
- C.** The facility uses the CDC's NHSN **laboratory-identified event (LabID Event) metrics** to identify and report residents with selected MDRO in the **skilled nursing locations** in the facility.



**FACEWIDEIN
surveillance and
reporting is required for
LabID event participation**

Definitions: Gram-stain Positive Organisms

- ❖ **MRSA:** *S. aureus* testing **resistant** to oxacillin, methicillin, or ceftazidime, by standard susceptibility testing methods or by a positive result from an FDA-approved test for direct MRSA detection from that specimen source.
- ❖ **MSSA:** *S. aureus* testing **intermediate or susceptible** to oxacillin, methicillin, and ceftazidime by standard susceptibility testing methods; a positive result from an FDA approved test for direct MSSA detection from that specimen source; or a negative result from an FDA-approved test for direct MRSA detection from a specimen source.
 - ❖ **Note:** MSSA is only an option when surveillance includes MRSA
- ❖ **VRE:** Any *Enterococcus species* that is **resistant** to vancomycin, by standard susceptibility testing methods or by a positive result from an FDA-approved test for VRE detection from that specimen source.

Definitions: Gram-stain Negative Organisms

- ❖ **CephR-Klebsiella:** *Klebsiella* species testing **resistant** or **intermediate** to cephalosporin antibiotics like ceftazidime, cefotaxime, ceftriaxone, or cefepime.
- ❖ **CRE:** *Escherichia coli (E. coli)*, *Klebsiella* species, or *Enterobacter* species testing **resistant** to imipenem, meropenem, doripenem, or ertapenem by standard susceptibility testing methods OR by production of a carbapenemase demonstrated using a recognized test (e.g., polymerase chain reaction, metallo- β -lactamase test, modified-Hodge test, Carba-NP).
 - ❑ **Note:** CRE surveillance requires facilities to monitor for all three organisms (CRE-*E. coli*, CRE-*Klebsiella* spp., and CRE-*Enterobacter* spp.).

Definitions: Gram-stain Negative Organisms, *continued*

- ❖ **MDR-Acinetobacter:** Any *Acinetobacter* species testing **resistant** or **intermediate** to at least one agent in at least 3 antimicrobial classes of the following 6 antimicrobial classes:

Antimicrobial Class	Antimicrobial Agents
β -lactams and β -lactam/ β -lactamase inhibitor combinations	Piperacillin, Piperacillin/tazobactam
Sulbactam	Ampicillin/sulbactam
Cephalosporins	Cefepime, Ceftazidime
Carbapenems	Imipenem, Meropenem, Doripenem, Ertapenem
Aminoglycosides	Amikacin, Gentamicin, Tobramycin
Fluoroquinolones	Ciprofloxacin, Levofloxacin



Surveillance must occur for all
specimen sources for the
selected MDRO(s)

Common Terms and Definitions used in LabID Event Module

Applies to specimens collected in the LTCF or during brief
OP visit to ED or clinic

- ❖ **MDRO Positive Isolate:** Any specimen, obtained for clinical decision making, testing that is positive for a MDRO. **Note:** Excludes tests related to active surveillance testing



- ❖ **MDRO LabID Event:** A MDRO positive isolate, tested on any laboratory specimen source and the resident has no prior positive for the same organism from any specimen source collected in the same calendar month, except when a unique blood source is identified.

Common Terms and Definitions used in LabID Event Module

- ❖ **Unique Blood Source LabID Event:** A MDRO isolate identified in a resident with no prior positive blood culture for the same MDRO in the past 2 weeks (<15 days), even across calendar months and admissions
 - **Note:** A unique blood source isolate must be reported even if the resident had this same MDRO previously isolated in a non-blood specimen earlier during the same calendar month.

Submit a MDRO LabID Event When..

- ✓ The specimen was collected while resident was receiving care in your facility or during a brief OP visit and returns to the LTCF on same calendar day or the next.

AND...

- ✓ It's the first positive MDRO collected from any specimen source from the resident in a calendar month.

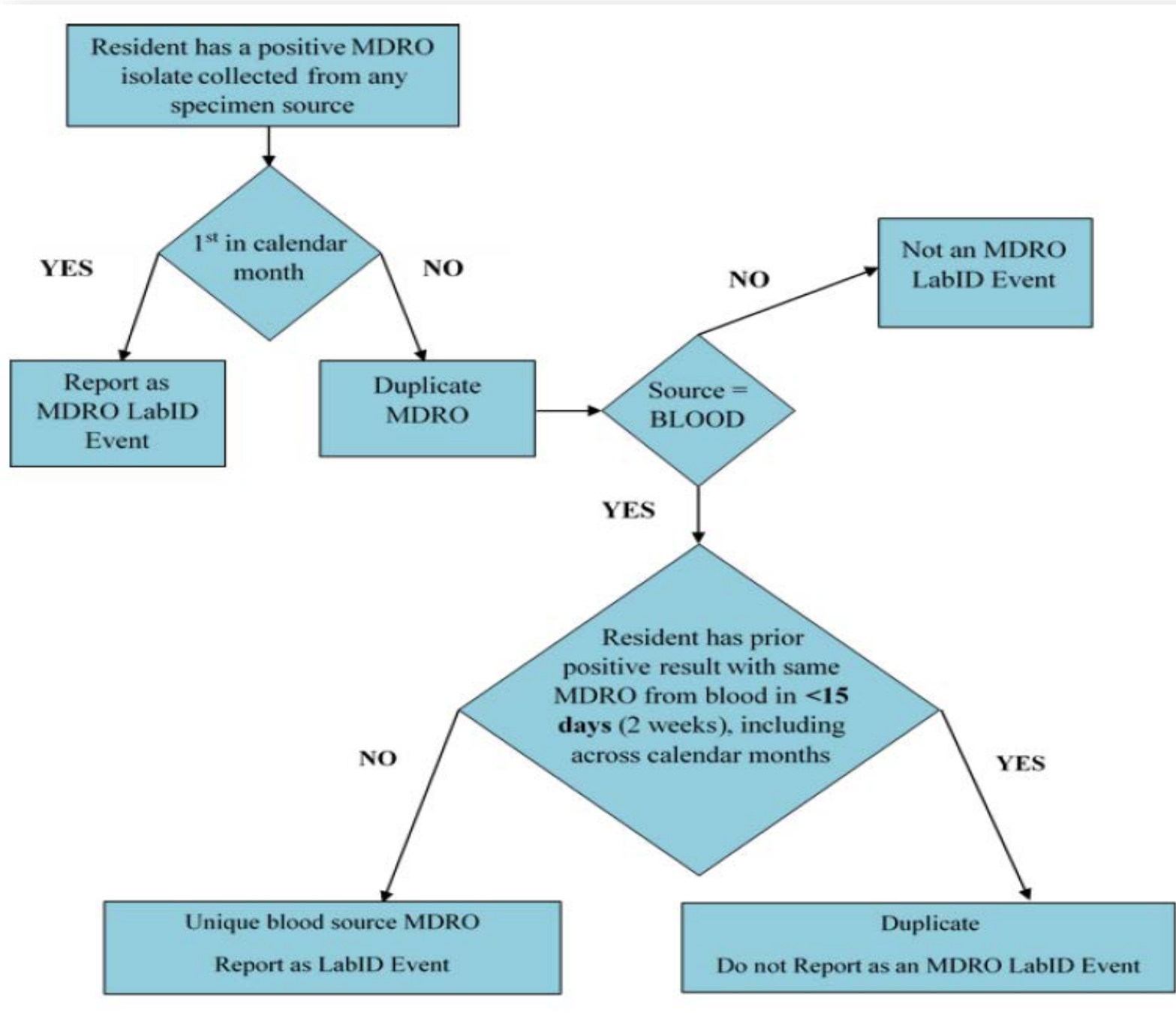
OR...

- ✓ It's a positive MDRO collected from a **blood culture** and:
 - ❑ It's the **first positive** MDRO from any specimen source for the resident during the calendar month, even if the resident had a prior blood reported within two weeks in the previous month

OR...

- ❑ If it is not the first positive for the calendar month, the resident has not had a prior positive blood culture with the same MDRO in previous 14 days

FIGURE 2



Which MDRO Specimens Should NOT be Reported to NHSN as a LabID Event?

- ❖ Negative MDRO lab results
- ❖ Specimens collected as part of active surveillance testing
- ❖ Specimens collected during an inpatient admission in another healthcare facility
- ❖ Duplicate positive results, defined as:
 - ❑ MDRO collected from non-blood source after the same MDRO has already been reported for the resident during the same calendar month
 - ❑ Resident has MDRO collected from a blood source and it's not the first positive MDRO for the resident in the calendar month and another positive result with the same MDRO from blood has been reported in previous 14 days



If a blood specimen is entered as the first specimen of the month, then no non-blood specimens can be entered for the remainder of that calendar month for that resident.

However, another blood specimen may be entered if it represents a unique blood isolate (*>2 weeks since previous same MDRO blood isolate*).

EXAMPLE

On March 27, Mr. C had a positive VRE blood culture that was entered into the NHSN as a VRE LabID Event. On April 2, he had another positive VRE blood culture that was entered into the NHSN because it was the first positive VRE isolate for the new calendar month. He had a wound that also tested positive for VRE on April 20. This specimen was not entered into the NHSN since it represented a duplicate MDRO laboratory isolate for April.

Again, on April 27, Mr. C had another positive VRE blood culture. Since the isolate represented a unique blood source (>14 days since the last positive VRE blood specimen), the VRE blood specimen was submitted to the NHSN as a VRE LabID Event.

Let's Review: Meet Mr. Jones

Assume this is the line list for Mr. Jones and all specimens collected are shown

	Current Admit Date	Specimen Collection Date	Specimen Source	Lab Result	Report as a LabID Event?	Explanation
1	2/1/18	2/2/18	Urine	MRSA	yes	1st MRSA from any specimen in calendar month
2	2/1/18	2/17/18	Wound	MRSA	no	Non-blood source, prior positive MRSA isolate this calendar month
3	2/1/18	2/21/18	Blood	MRSA	yes	Unique blood source and no prior MRSA blood in <15 days
4	2/1/18	2/26/18	Blood	MRSA	no	<15 days from previous MRSA+ blood specimen
5	2/1/18	2/28/18	Nasal	MRSA	no	Screening test results are excluded from LabID events
6	2/1/18	3/1/18	Blood	MRSA	yes	1 st MRSA positive collected in new calendar month
7	2/1/18	3/11/18	Urine	MRSA	no	Non-blood source, prior positive MRSA isolate this calendar month
8	2/1/18	3/14/18	Urine	VRE	yes	1st VRE from any specimen in calendar month

NHSN will Categorize MDRO LabID Events for Analysis

Categorizations are determined by:

- 1. Reported date of current admission to facility,
- 2. Reported date specimen collected, and
- 3. Reported date of last transfer from acute care to your facility

The screenshot shows a data entry form for NHSN. Several fields are highlighted with blue boxes to indicate their importance for categorization:

- Date of First Admission to Facility ***: 03/01/2018
- Date of Current Admission to Facility ***: 03/01/2018
- Date Specimen Collected ***: 03/04/2018
- Event Information**
 - Event Type ***: LABID - Laboratory-identified MDRO or CDI Event
 - Specific Organism Type ***: MRSA - MRSA
 - Specimen Body Site/System ***: GU - GenitoUrinary System
 - Specimen Source ***: URINARSPC - Urinary specimen
 - Resident Care Location ***: 3 REHAB - SHORT TERM REHAB
 - Primary Resident Service Type ***: SKNUR - Skilled nursing/short term rehab
- Has resident been transferred from an acute care facility in the past 4 weeks *?**: Y - Yes
- If Yes, date of last transfer from acute care to your facility ***: 03/01/2018

NHSN will Categorize MDRO LabID Events for Analysis

- ❖ Community-onset (CO): Date specimen collected 3 calendar days or less after current admission to the facility (i.e., days 1, 2, or 3 of admission)
- ❖ Long-term Care Facility-onset (LO): Date specimen collected more than 3 calendar days after current admission to the facility (i.e., on or after day 4)
 - ❑ LO Events are further sub-classified :
 - ❑ **Acute Care Transfer-Long-term Care Facility-onset (ACT-LO):** LO LabID events with a specimen collection date **4 weeks or more** following date of last transfer from an acute care facility

EXAMPLE: NHSN Classification of LabID Events as Community-onset (CO) or LTCF-onset (LO)

LTCF Current Admission Date				
March 1 st	March 2 nd	March 3 rd	March 4 th	March 5 th
Day 1	Day 2	Day 3	Day 4	Day 5
Community-Onset (CO)			Long-term Care Facility Onset (LO)	



Submit Reporting Plan for Every Month of Participation

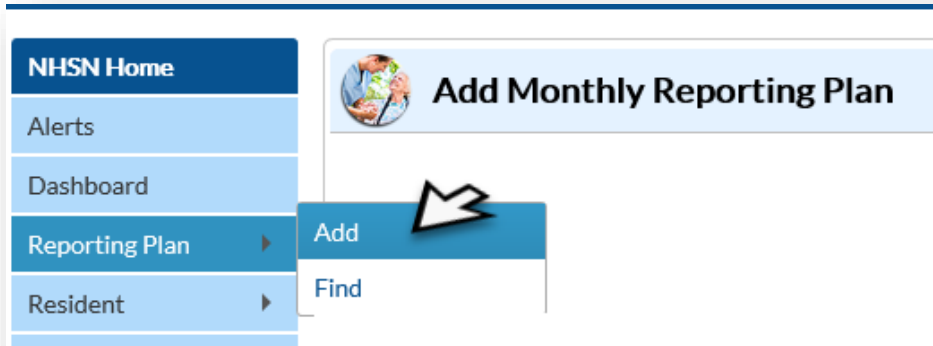
Monthly Reporting Plan



Add Monthly Reporting Plan

- ❖ Informs CDC-NHSN which module(s) and events a facility is following during a given month
- ❖ A facility must enter a Plan for every month in which surveillance and data submissions will occur
 - ❑ A Plan must be in place before events can be entered into NHSN
- ❖ A plan may be entered for up to one year in advance

Add Monthly Reporting Plan for MDRO LabID Event Module Participation



- **Red** asterisk = required to save page
- Click **ADD ROW** to add additional event options for the LabID Event Module
- **SAVE**

A screenshot of the 'Add Monthly Reporting Plan' form. The form includes the following fields and options:

- Facility ID ***: Angela LTCF Test Facility (ID 39455) (dropdown)
- Month ***: March (dropdown)
- Year ***: 2019 (dropdown)
- No Long Term Care Facility Component Modules Followed this Month

LabID Event Module

	Locations	Specific Organism Type	Lab ID Event All Specimens
	Facility-wide Inpatient (FacWIDEIn)	MRSA - MRSA	<input checked="" type="checkbox"/>
	Facility-wide Inpatient (FacWIDEIn)	VRE - VRE	<input checked="" type="checkbox"/>

Buttons: Add Row, Clear All Rows, Copy from Previous Month

Buttons: Save, Back



SUBMIT YOUR EVENTS

**Non-duplicate MDRO LabID
Events**

Reporting CDI or MDRO LabID Event

Customizable NHSN LabID Event form available for data collection

- Optional form
- Allows users to collect required information prior to submitting NHSN event
- Use one form for each LabID event
- Form may be customized for each facility
- Use accompanying Table of Instructions for helpful guidance

The image shows a screenshot of the NHSN Laboratory-identified MDRO or CDI Event for LTCF form. The form is titled "Laboratory-identified MDRO or CDI Event for LTCF" and is approved by OMB No. 0920-0666, with an expiration date of 11/30/2019. The form is labeled "Page 1 of 1" and includes the following fields:

- *required for saving
- Facility ID: / Event #:
- *Resident ID: / *Social Security #:
- Medicare number (or comparable railroad insurance number):
- Resident Name, Last: / First: / Middle:
- *Gender: M F Other / *Date of Birth: __/__/__
- Ethnicity (specify): / Race (specify):
- *Resident type: Short-stay Long-stay
- *Date of First Admission to Facility: __/__/__ / *Date of Current Admission to Facility: __/__/__
- Event Details**
- *Event Type: LabID / *Date Specimen Collected: __/__/__
- *Specific Organism Type: (check one)
 - MRSA MSSA VRE C. difficile CephR-Klebsiella
 - CRE-E. coli CRE-Enterobacter CRE-Klebsiella MDR-Acinetobacter
- *Specimen Body Site/System: / *Specimen Source:
- *Resident Care Location:
- *Primary Resident Service Type: (check one)
 - Long-term general nursing Long-term dementia Long-term psychiatric
 - Skilled nursing/Short-term rehab (subacute) Ventilator Bariatric Hospice/Palliative

Laboratory-identified MDRO or CDI Event for LTCF Form (CDC 56.138)

Submitting a MDRO LabID Event to NHSN

- NHSN Home
- Alerts
- Dashboard
- Reporting Plan
- Resident
- Event
- Summary Data
- Import/Export
- Surveys

Add Event

- Add
- Find
- Incomplete

NHSN - National Healthcare Safety Network

AANTILA
Angela LTCF Test Facility

Add Event

Mandatory fields marked with *
Fields required for record completion marked with **

Resident Information

Facility ID *: Angela LTCF Test Facility (ID 39455) ▼

Resident ID *: 12345 Find Find Events for Resident

Social Security #: 545-48-9637

Medicare number (or comparable railroad insurance number):

First Name: Mary

Last Name: Sue

Middle Name:

Gender *: F - Female ▼

Date of Birth *: 01/25/1940

Ethnicity: ▼

- Race:
- American Indian/Alaska Native
 - Asian
 - Black or African American
 - Native Hawaiian/Other Pacific Islander
 - White

Resident type *: ▼

Date of First Admission to Facility *: 03/01/2018

Date of Current Admission to Facility *:

Event Information

Event Type *: ▼

Date of Event *:

Comments

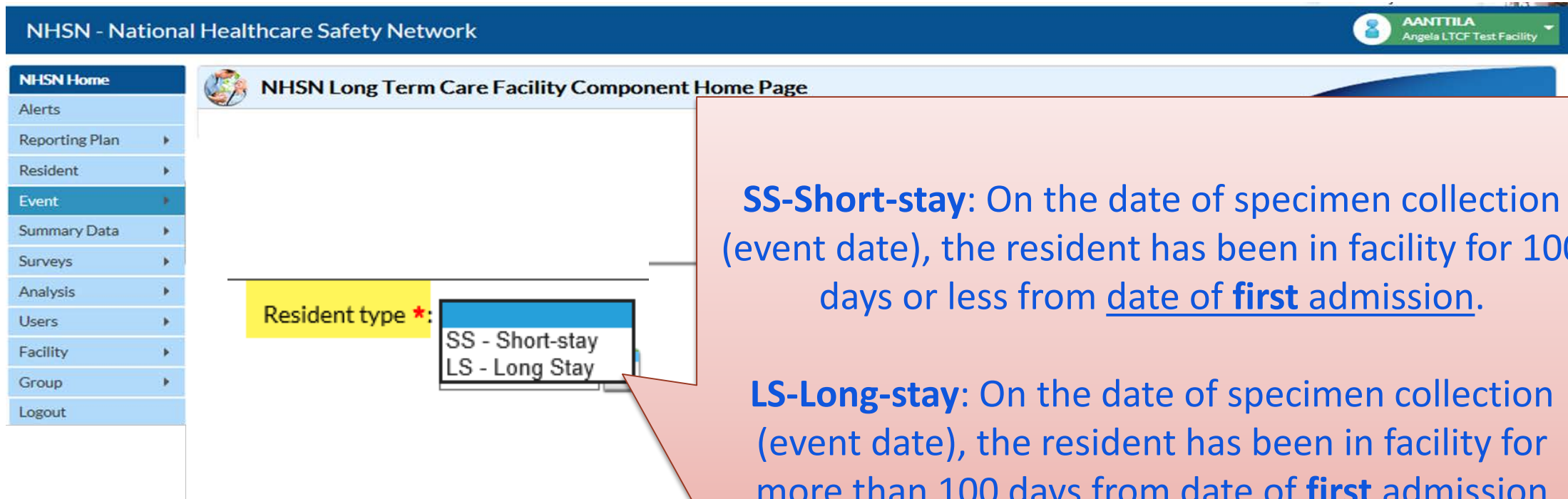
Text area for comments.

Save Back

Red asterisk = required to save event page

Submitting a MDRO LabID Event to NHSN

Resident Type



The screenshot shows the NHSN Long Term Care Facility Component Home Page. The top navigation bar includes 'NHSN - National Healthcare Safety Network' and a user profile for 'AANTILA Angela LTCF Test Facility'. The left sidebar contains a menu with 'Event' highlighted. The main content area shows a form field for 'Resident type *' with a dropdown menu open, displaying two options: 'SS - Short-stay' and 'LS - Long Stay'. A callout box on the right explains the definitions for these two resident types.

SS-Short-stay: On the date of specimen collection (event date), the resident has been in facility for 100 days or less from date of first admission.

LS-Long-stay: On the date of specimen collection (event date), the resident has been in facility for more than 100 days from date of first admission

Submitting a MDRO LabID Event to NHSN

Date of First and Current Admission to Facility

NHSN - National Healthcare Safety Network

AANTILA
Angela LTCF Test Facility

NHSN Home

Alerts

Reporting Plan

Resident

Event

Summary Data

Surveys

Analysis

NHSN Long Term Care Facility Component Home Page

Date of First Admission to Facility *: 03/01/2018

Date of Current Admission to Facility *: 04/03/2019

Date resident first entered the facility. This date remains the same even if the resident leaves the facility (transfers to another facility) for short periods of time (<30 consecutive days).

Most recent date resident entered the facility. If the resident enters the facility for the first time and has not left for more than 2 calendar days, then the date of current admission will be the same as the date of first admission. If the resident leaves the facility for more than 2 calendar days (the day the resident left the facility = day 1) and returns, the date of current admission should be updated to the date of return to the facility.

Submitting a MDRO LabID Event to NHSN

Event Type and Date Specimen Collected

The screenshot shows a form section titled "Event Information". A dropdown menu for "Event Type" is open, showing two options: "LABID - Laboratory-identified MDRO or CDI Event" (highlighted in blue) and "UTI - Urinary Tract Infection". A yellow callout box with the text "Date Specimen Collected cannot occur before Date of Current Admission to Facility" has two yellow arrows pointing to the "Date of Current Admission to Facility" field (containing "03/07/2018") and the "Date Specimen Collected" field (which is empty). A red arrow points from the yellow callout box to the "LABID" option in the dropdown menu. A blue callout box with the text "Also referred to as Date of Event" points to the "Date Specimen Collected" field.

Event Information

Event Type *: LABID - Laboratory-identified MDRO or CDI Event
UTI - Urinary Tract Infection

Date of Current Admission to Facility *: 03/07/2018

Date Specimen Collected *:

Date Specimen Collected cannot occur before Date of Current Admission to Facility

Also referred to as Date of Event

Submitting a MDRO LabID Event to NHSN

Specific Organism Type

Event Information

Event Type *: LABID - Laboratory-identified MDRO or CDI Event ▼

Specific Organism Type *:

ACINE - MDR-Acinetobacter
CDIF - C. difficile
CEPHRKLEB - CephR-Klebsiella
CREECOLI - CRE-Ecoli
CREENTERO - CRE-Enterobacter
CREKLEB - CRE-Klebsiella
MRSA - MRSA
MSSA - MSSA
VRE - VRE

Submitting a MRSA LabID Event to NHSN

Specimen Body Site/System

Event Information

Event Type *: LABID - Laboratory-identified MDRO or CDI Event ▼

Specific Organism Type *: MRSA - MRSA ▼

Specimen Body Site/System *:

- CARD - Cardiovascular/ Circulatory/ Lymphatics
- CNS - Central Nervous System
- DIGEST - Digestive System
- EENT - Ear, Eye, Nose, and Throat
- ENDCRN - Endocrine System
- GU - GenitoUrinary System
- MSC - Musculoskeletal System
- REPRF - Reproductive Female
- REPRM - Reproductive Male
- RESP - Respiratory System
- SST - Skin / Soft tissue
- UNSPECIFD - Unspecified Body Site Specimen

Submitting a MRSA LabID Event to NHSN

Specimen Source

Event Information

Event Type *: LABID - Laboratory-identified MDRO or CDI Event ▼

Specific Organism Type *: MRSA - MRSA ▼

Specimen Body Site/System *: GU - GenitoUrinary System ▼

Specimen Source: *

GENITAL - Genital swab
KIDNEY - Specimen from kidney
NOSGU - Genitourinary sample (NOS)
PERINEAL - Perineal swab
RENPELVIS - Renal pelvis fluid sample
SUPRAPUBC - Suprapubic aspirate sample
URETER - Specimen from ureter obtained by brush biopsy
URETHSWB - Urethral swab
URINARCYT - Urinary tract cytologic material
URINARSPC - Urinary specimen

Submitting a MDRO LabID Event to NHSN

Resident Care Location

Event Information

Event Type *	LABI	1 D - DEMENTIA UNIT	Event
Specific Organism Type *		1 SOUTH - GENERAL	
Specimen Body Site/System *		100 EAST - DEMENTIA UNIT	
Specimen Source *		1B - BARIATRIC UNIT	
Resident Care Location *		2 PSY - PSYCHIATRIC	
		2W - 2 WEST DEMENTIA	
		3 REHAB - SHORT TERM REHAB	
		4 GEN - GENERAL UNIT	
		5 HOS - HOSPICE UNIT	
		DEMENTIA - LOCKED UNIT	

Select location of resident at time of specimen collection. Note: Resident care locations are set-up by the facility after facility enrollment

Submitting a MDRO LabID Event to NHSN

Primary Service Type

Event Information

Event Type *: LABID - Laboratory-identified MDRO or CDI Event ▼

Specific Organism Type *: [blurred]

Specimen Body Site/System *: DIGEST - Digestive System

Specimen Source *: BARIA - Bariatric

Resident Care Location *: HOSP - Hospice/Palliative

DEMENT - Long-term dementia

Primary Resident Service Type *: GENNUR - Long-term general nursing

PSYCH - Long-term psychiatric

SKNUR - Skilled nursing/short term rehab

VENT - Ventilator

Select the NHSN Primary Resident Service Type at time of specimen collection

Submitting a MDRO LabID Event to NHSN

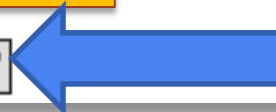
Transfer from Acute Care Facility

Event Information

Event Type * : LABID - Laboratory identified MDRO or CDI Event

Was the resident directly admitted to your facility from an acute care facility in past 4 weeks? If 'YES' is selected, additional data must be entered

Has resident been transferred from an acute care facility in the past 4 weeks *? Y - Yes



Submitting a MDRO LabID Event to NHSN

Transfer from Acute Care Facility, continued

Event Information

Event Type *: LABID - Laboratory-identified MDRO o

Specific Organism Type *: MRSA - MRSA

Specimen Body Site/System *: GU - GenitoUrinary System

Specimen Source *: URINARSPC - Urinary specimen

Resident Care Location *: 1 SOUTH - GENERAL

Primary Resident Service Type *: GENNUR - Long-term general nursing

Has resident been transferred from an acute care facility in the past 4 weeks *: Y - Yes

This answer to this question will be used by NHSN to determine if the LabID event is associated with an acute care transfer.

If Yes, *date of last transfer* from acute care to your facility *:



Submitting a MDRO LabID Event to NHSN

Transfer from Acute Care Facility, continued

Event Information

Event Type *: LABID - Laboratory-identified MDRO or CDI Event

Specific Organism Type *: MRSA - MRSA

Specimen Body Site/System *: GU - GenitoUrinary System

Specimen Source *: URINARSPC - Urinary specimen

Resident Care Location *: 1 SOUTH - GENERAL

Primary Resident Service Type *: GENNUR - Long-term general nursing

Has resident been transferred from an acute care facility in the past 4 weeks *? Y - Yes

This answer to this question will be used by NHSN to determine if the LabID event is associated with an acute care transfer.

If Yes, date of last transfer from acute care to your facility *: 29

If Yes, was the resident on antibiotic therapy for this specific organism type at the time of transfer to your facility *?

Informs burden of MDRO coming into facility

Submitting a MDRO LabID Event to NHSN

Documented Evidence Previous.....

Event Information

Event Type *: LABID - Laboratory-identified MDRO or CDI Event ▼

Specific Organism Type *: MRSA - MRSA ▼

Specimen Body Site/System *: GU - GenitoUrinary System ▼

Specimen Source *: URINARSPC - Urinary specimen ▼

Resident Care Location *: 1 SOUTH - GENERAL ▼

Primary Resident Service Type *: GENNUR - Long-term general nursing ▼

Has resident been transferred from an acute care facility in the past 4 weeks *? Y - Yes ▼

If Yes, *date of last transfer* from acute care to your facility *: 30

If Yes, was the resident on antibiotic therapy for this specific organism type at the time of transfer to your facility *? ▼

Documented evidence of previous infection or colonization with this specific organism type from a previously reported LabID Event in any prior month? Y - Yes

Auto-populated by the NHSN.
Non-editable by users

Entering MDRO-MRSA LabID Event:

Optional: *Custom Fields and Comments*

Custom Fields [Help](#)

PRIOR HX:	<input type="text"/>	FLUOROQUINOLONE:	<input type="text"/>
CEPHALOSPORINS:	<input type="text"/>	CLINDAMYCIN:	<input type="text"/>

Comments

POST-LEFT HIP REPLACEMENT

Optional, but must be set-up before reporting event

Free text. Not able to analyze free text

Add Event

Mandatory fields marked with *

Fields required for record completion marked with **

Resident Information

Facility ID *: Angela LTCF Test Facility (ID 39455) ▼
Resident ID *: 123456 Find Find Events for Resident
Last Name: Boat
Middle Name:
Gender *: F - Female ▼
Ethnicity: ▼
Race:
 American Indian/Alaska Native Asian
 Black or African American Native Hawaiian/Other Pacific Islander
 White

Social Security #: 999-99-9999
Medicare number (or comparable railroad insurance number):
First Name: MissThe
Date of Birth *: 09/29/1935 30

Resident type *: LS - Long Stay ▼
Date of First Admission to Facility *: 02/01/2015 30

Date of Current Admission to Facility *: 04/03/2019 30

Event Information

Event Type *: LABID - Laboratory-identified MDRO or CDI Event ▼
Specific Organism Type *: MRSA - MRSA ▼
Specimen Body Site/System *: GU - GenitoUrinary System ▼
Specimen Source *: URINARSPC - Urinary specimen ▼
Resident Care Location *: 1 SOUTH - GENERAL ▼
Primary Resident Service Type *: GENNUR - Long-term general nursing ▼

Date Specimen Collected *: 04/03/2019 30

Has resident been transferred from an acute care facility in the past 4 weeks *: Y - Yes ▼

If Yes, date of last transfer from acute care to your facility *: 04/03/2019 30

If Yes, was the resident on antibiotic therapy for this specific organism type at the time of transfer to your facility *: Y - Yes ▼

Documented evidence of previous infection or colonization with this specific organism type from a previously reported LabID Event in any prior month? Y - Yes

Custom Fields [Help](#)

PRIOR HX: YES x FLUOROQUINOLONE:
CEPHALOSPORINS: CLINDAMYCIN:

Comments

POST - LEFT HIP REPLACEMENT



Event 30310 created successfully.

Save

Back



Collect and Submit MDRO Monthly Summary Data

Monthly Summary Requirements for MDRO LabID Event Module Participation

Each Month of Participation, Facility Must Report the Following:

- Resident Admissions
- Resident Days
- Report No Events, if applicable

Add Monthly Summary Data

Mandatory fields marked with *

Fields required for record completion marked with **

Facility ID *: Angela LTCF Test Facility (ID 39455) ▼

Month *: March ▼

Year *: 2019 ▼

Denominators for Long Term Care Locations
- No long term care locations selected on monthly reporting plan

MDRO & CDI LabID Event Reporting

Location Code			Specific Organism Type							Custom Fields
			MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C. difficile	
Facility-wide Inpatient (FacWIDEIn)	Resident Admissions: <input style="width: 50px;" type="text"/> *	LabID Event (All specimens)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Resident Days: <input style="width: 50px;" type="text"/> *	Report No Events	<input type="checkbox"/>	<input type="checkbox"/> **	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Prevention Process Measures
- No long term care locations selected on monthly reporting plan

Save
Back

Monthly Summary for MDRO Participation (Denominator)

- Optional NHSN worksheet that may be used to document daily counts for selected columns
- Only the monthly totals are entered into the NHSN application at the end of each month

Forms and Table of Instructions (TOIs) available on LTCF home page, under Data Collection Forms:

<https://www.cdc.gov/nhsn/ltc/cdiff-mrsa/index.html>

Denominators for LTCF

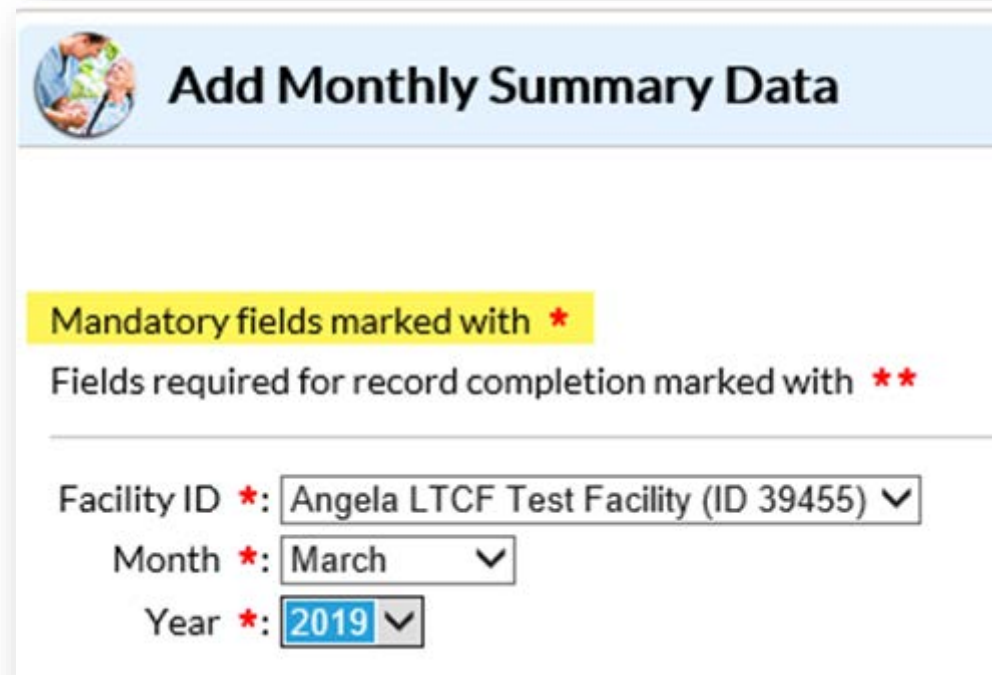
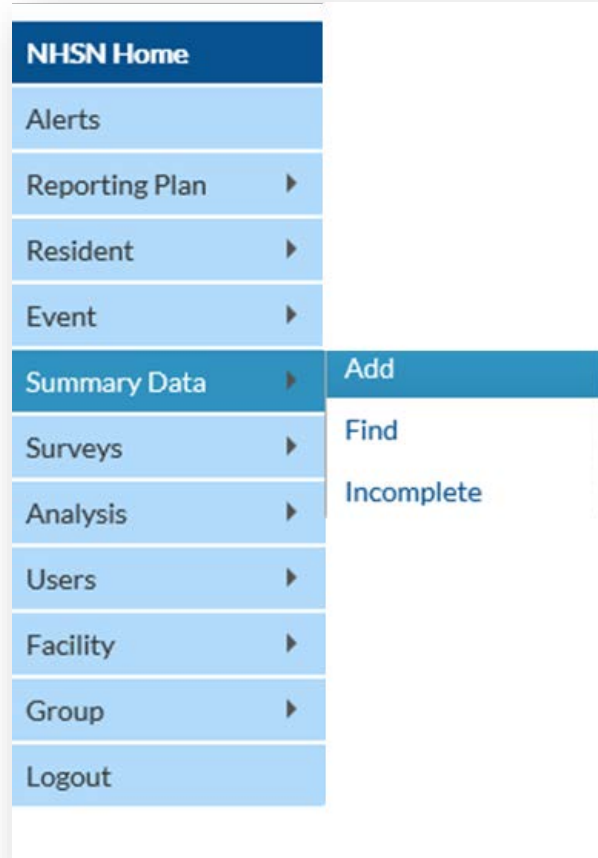
Page 1 of 1 **required for saving *conditionally required based on monitoring selection in Monthly Reporting Plan

Facility ID:	**Location Code:	**Month:	**Year:				
Date	**Number of residents	*Number of residents with a urinary catheter	*New antibiotic starts for UTI indication	*Number of urine cultures ordered	*Number of admissions	*Number of admissions on C. diff treatment	*Number of C. diff treatment starts
1							
2							
3							
4							
Document daily Counts							
27							
28							
29							
30							
31							
*Total							
	Resident-days	Urinary-catheter days	Total antibiotic starts for UTI indication	Total urine cultures ordered	Resident-admissions	Resident-admissions on C. diff treatment	*Number of C. diff treatment starts

Enter Monthly Totals in NHSN


Submitting Monthly Summary Data in NHSN

- To submit summary data:
 1. Locate 'Summary Data' on left-hand navigation bar, and then 'Add'
 2. Enter the month and year for which summary data will be reported



A screenshot of the 'Add Monthly Summary Data' form. The form has a light blue header with a globe icon and the title 'Add Monthly Summary Data'. Below the header, there is a yellow box with the text 'Mandatory fields marked with *'. Below that, there is a line of text 'Fields required for record completion marked with **'. The form contains three dropdown menus: 'Facility ID *' with the value 'Angela LTCF Test Facility (ID 39455)', 'Month *' with the value 'March', and 'Year *' with the value '2019'.

Submitting Monthly Summary Data in NHSN

 **Add Monthly Summary Data**

Mandatory fields marked with *

Fields required for record completion marked with **

Facility ID *: ▼

Month *: ▼

Year *: ▼

Denominators for Long Term Care Locations


- No long term care locations selected on monthly reporting plan

MDRO & CDI LabID Event Reporting

Location Code		Specific Organism Type								
		MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella		C. difficile	MDR-Acinetobacter
<input type="checkbox"/> Facility-wide Inpatient (FacWIDEIn)	Resident Admissions: <input type="text"/> *	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Custom Fields
	Resident Days: <input type="text"/> *	<input type="checkbox"/>	<input type="checkbox"/> **	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	LabID Event (All specimens)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
	Report No Events	<input type="checkbox"/>	<input type="checkbox"/> **	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Prevention Process Measures

- No long term care locations selected on monthly reporting plan



 This page will populate based on the module(s) and event(s) selected in your Monthly Reporting Plan for the month in which you are entering summary data

Knowledge Check 9:

Based on the Monthly Summary Data below, what modules and events did the facility select to participate for March, 2019?

Add Monthly Summary Data

Mandatory fields marked with *

Fields required for record completion marked with **

Facility ID *: Angela LTCF Test Facility (ID 39455) ▼
Month *: March ▼
Year *: 2019 ▼


Denominators for Long Term Care Locations
- No long term care locations selected on monthly reporting plan

MDRO & CDI LabID Event Reporting

Location Code	Resident Admissions: <input type="text"/> * Resident Days: <input type="text"/> *		Specific Organism Type							
			MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C. difficile	MDR-Acinetobacter
Facility-wide Inpatient (FacWIDEIn)		LabID Event (All specimens)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		Report No Events	<input type="checkbox"/>	<input type="checkbox"/> **	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Prevention Process Measures
- No long term care locations selected on monthly reporting plan

Save Back

- A. All modules, all Events
- B. MRSA LabID events only
- C. All MDRO LabID Events
-  D. MRSA and VRE LabID events only
- E. VRE LabID events only

Submitting Monthly Summary Data in NHSN for MDRO LabID Event Reporting

Resident Admissions: Only required if monthly surveillance includes LabID event surveillance

The total number of residents admitted to the LTCF during the selected calendar month. Includes new admissions and re-admissions if a resident was out of the facility for more than 2 calendar days

MDRO & CDI LabID Event Reporting

Location Code			Specific Organism Type						Custom Fields	
			MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella		C. difficile
<input type="checkbox"/> Facility-wide Inpatient (FacWIDEIn)	Resident Admissions: <input type="text"/> *	LabID Event (All specimens)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> Custom Fields
	Resident Days: <input type="text"/> *	Report No Events	<input type="checkbox"/>	<input type="checkbox"/> **	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Submitting Monthly Summary Data in NHSN for MDRO LabID Event Reporting

Resident Days:

To calculate resident days, for each day of the month, record the total number of residents in the facility. At the end of the month, add the daily counts and enter the total as Resident Days.

- ❖ Data may come from electronic medical record, if available
- ❖ Users may also calculate based on facility occupancy.
 - ❑ 100 bed facility at 100% occupancy for June: 100 residents x 30 days = 3,000 total resident days
 - ❑ 100 bed facility at 90% occupancy for June: 90 residents x 30 days = 2,700 total resident days

MDRO & CDI LabID Event Reporting		Specific Organism Type								
Location Code			MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C. difficile	MDR-Acinetobacter
<input type="checkbox"/> Facility-wide Inpatient (FacWIDEIn)	Resident Admissions:	LabID Event (All specimens)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Resident Days:	Report No Events	<input type="checkbox"/>	<input type="checkbox"/> **	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="button" value="Custom Fields"/>										

Submitting Monthly Summary Data in NHSN for MDRO LabID Event Reporting

LabID Events (All specimens)

A grayed out check-mark will appear for each organism under surveillance for the month (based on selections in the Monthly Reporting Plan)

Add Monthly Summary Data

Mandatory fields marked with *

Fields required for record completion marked with **

Facility ID *: Angela LTCF Test Facility (ID 39455) ▼

Month *: March ▼

Year *: 2019 ▼

Denominators for Long Term Care Locations
- No long term care locations selected on monthly reporting plan

MDRO & CDI LabID Event Reporting

Location Code		Specific Organism Type								Custom Fields
		MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C. difficile	MDR-Acinetobacter	
Facility-wide Inpatient (FacWIDEIn)	Resident Admissions: <input type="text"/> *	LabID Event (All specimens)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Resident Days: <input type="text"/> *	Report No Events	<input type="checkbox"/>	<input type="checkbox"/> **	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

A checked box will appear for each organism included in monthly reporting plan for the month

Submitting Monthly Summary Data in NHSN for MDRO LabID Event Reporting

Report No Events:

- ❖ A red asterisk will appear next to boxes that require attention.
- ❖ User must put a check-mark in the box to validate that no LabID events were identified for the specified organism for the calendar month.
- ❖ The box will be grayed out and without red asterisks if at least one event was submitted for that organism during the calendar month.
- ❖ If a LabID event is entered for the organism after summary data submitted, the application will auto-update.

MDRO & CDI LabID Event Reporting		Specific Organism Type									
Location Code											
		MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C. difficile	MDR-Acinetobacter		
<input type="checkbox"/> Facility-wide Inpatient (FacWIDEIn)	Resident Admissions: <input type="text"/> *	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/> Custom Fields
	Resident Days: <input type="text"/> *	LabID Event (All specimens) Report No Events	<input type="checkbox"/>	<input checked="" type="checkbox"/> **	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Complete Monthly Summary for MDRO LabID Events

NHSN - National Healthcare Safety Network AANTTILA
Angela LTCF Test Facility

Add Monthly Summary Data

Mandatory fields marked with *
Fields required for record completion marked with **

Facility ID *: Angela LTCF Test Facility (ID 39455) v
Month *: March v
Year *: 2019 v

Denominators for Long Term Care Locations
- No long term care locations selected on monthly reporting plan

MDRO & CDI LabID Event Reporting

Location Code	Resident Admissions: * Resident Days: *	LabID Event (All specimens) Report No Events	Specific Organism Type							Custom Fields	
			MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C. difficile		MDR-Acinetobacter
Facility-wide Inpatient (FacWIDEIn)	20 * 3122 *		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input checked="" type="checkbox"/> **	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Prevention Process Measures
- No long term care locations selected on monthly reporting plan

Save Back

Summary data created successfully.

Alerts

- ❖ Automatic checks in the NHSN that remind users of incomplete or missing data
- ❖ Incomplete monthly data will be excluded from any analysis reports until resolved
- ❖ Before using the analysis function, make sure to clear all relevant alerts
- ❖ Found on the Home Page, or by clicking on the 'Alerts' tab on the sidebar

The screenshot displays the NHSN Long Term Care Facility Component Home Page. The page features a dark blue header with the text "NHSN - National Healthcare Safety Network". Below the header is a light blue sidebar with a menu. The "Alerts" menu item is highlighted with a green circle and a mouse cursor. The main content area has a light blue header with a globe icon and the text "NHSN Long Term Care Facility Component Home Page". Below this header, there is a section titled "COMPLETE THESE ITEMS" and a sub-section titled "ALERTS". The "ALERTS" section contains four colored boxes, each with a large number and a label: a red box with the number "2" and the label "Missing Events", a yellow box with the number "4" and the label "Incomplete Events", a purple box with the number "47" and the label "Missing Summaries", and a green box with the number "4" and the label "Incomplete Summaries".

Alert Type	Count
Missing Events	2
Incomplete Events	4
Missing Summaries	47
Incomplete Summaries	4

Common Alerts for LabID Event Reporting: *Missing Events*

LabID event module selected in the Monthly Reporting Plan, but no selected MDRO or CDI events submitted for the month and the “*Report No Events*” box was not selected on the Monthly Summary page for that calendar month.

To resolve alert:

- ✓ Submit CDI and/or selected MDRO event(s) for calendar month
- ✓ If no events to report for the month, click box to indicate **Report No Events by each event type/pathogen**

Missing Events Incomplete Events Missing Summary Data Incomplete Summary Data

In-plan denominators reported for these locations with no associated events. [Print Fo](#)

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Month/Year	Alert Type	Event Type/Pathogen	Summary Data Form Type	Report No Events
05/2017	Summary but no events	UTI	LTC DENOM	<input type="checkbox"/>
05/2017	Summary but no events	LABID - MRSA	MDRO	<input checked="" type="checkbox"/>

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View 1 - 2 of

View 1 - 2 of

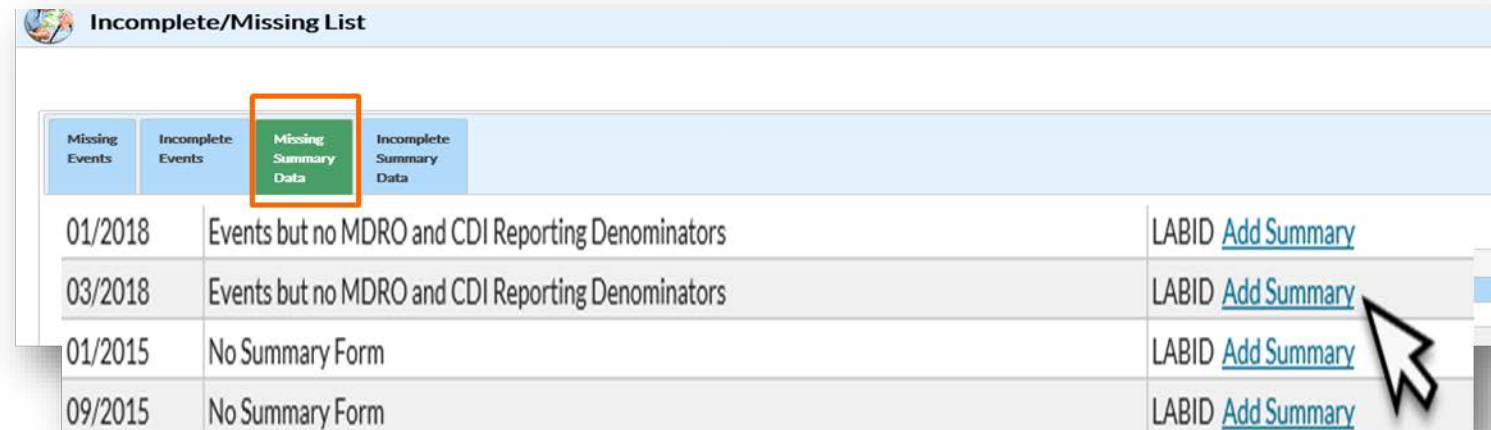
Save Reset

Common Alerts for LabID Event Reporting: *Missing Summary Data*

Summary Data has not been completed for the calendar month

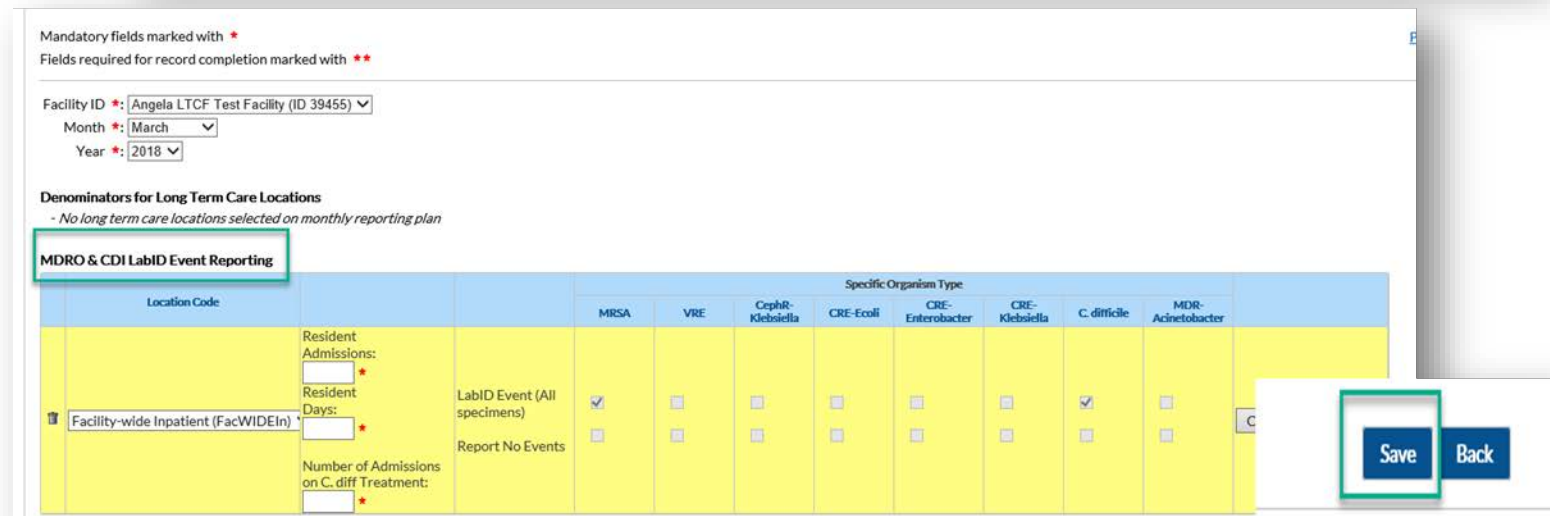
To resolve:

- Click **Add Summary** hyperlink
- Enter Summary Data under **“MDRO & CDI LabID Event Reporting”**
- Remember to **SAVE** before exiting



The screenshot shows a table titled "Incomplete/Missing List" with four tabs: "Missing Events", "Incomplete Events", "Missing Summary Data" (highlighted with a green box), and "Incomplete Summary Data". The table contains the following data:

Month	Description	Action
01/2018	Events but no MDRO and CDI Reporting Denominators	LABID Add Summary
03/2018	Events but no MDRO and CDI Reporting Denominators	LABID Add Summary
01/2015	No Summary Form	LABID Add Summary
09/2015	No Summary Form	LABID Add Summary



The screenshot shows the "MDRO & CDI LabID Event Reporting" form. At the top, it indicates mandatory fields with a red asterisk and fields required for record completion with a red double asterisk. The form includes dropdown menus for Facility ID (Angela LTCF Test Facility (ID 39455)), Month (March), and Year (2018). Below this, there is a section for "Denominators for Long Term Care Locations" with a note: "No long term care locations selected on monthly reporting plan". The main table has columns for "Location Code" and "Specific Organism Type" (MRSA, VRE, CephR-Klebsiella, CRE-Ecoli, CRE-Enterobacter, CRE-Klebsiella, C. difficile, MDR-Acinetobacter). The "Facility-wide Inpatient (FacWIDEIn)" location is selected, and the "LabID Event (All specimens)" checkbox is checked. The "Report No Events" checkbox is also present. At the bottom right, there are "Save" and "Back" buttons.

Common Alerts for LabID Event Reporting:

Incomplete Summary Data

Summary Data page is missing required data for the calendar month

To resolve alert:

- ✓ Click on **Summary ID**
- ✓ Complete missing data fields, as indicated by **red asterisk(s)**
- ✓ Remember to **SAVE** before exiting

Summary ID	Summary Data Type	Year	Month
22097	HAI	2017	May
22098	MDRO	2017	May

Location Code	Resident Admissions: 46 *	Resident Days: 2900 *	Number of Admissions on C. diff Treatment: 2 *	Specific Organism Type							Custom Fields	
				MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C. difficile		MDR-Acinetobacter
Facility-wide Inpatient (FacWIDEIn)				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



NHSN Resources

Long-term Care Facility Component

- ❖ NHSN LTCF website: <https://www.cdc.gov/nhsn/ltc/index.html>
- ❖ NHSN LTCF Surveillance for *C. difficile*, MRSA, and other Drug-resistant Infections website: <https://www.cdc.gov/nhsn/ltc/cdiff-mrsa/index.html>
 - ✓ Training
 - ✓ Protocols
 - ✓ Data collection forms
 - ✓ Tables of instructions for completing all forms
 - ✓ Key terms
 - ✓ Frequently asked questions and answers

Questions or Need Help? Contact User Support at nhsn@cdc.gov

Home-Page: LabID Event Surveillance for *C. difficile*, MRSA, and other Drug-resistant Infections

<https://www.cdc.gov/nhsn/ltc/cdiff-mrsa/index.html>

- Access to event modules
 - Training
 - Protocols
 - Forms and instructions
 - Support materials such as locations, key terms, and more
 - Analysis resources
 - Frequently Asked Questions

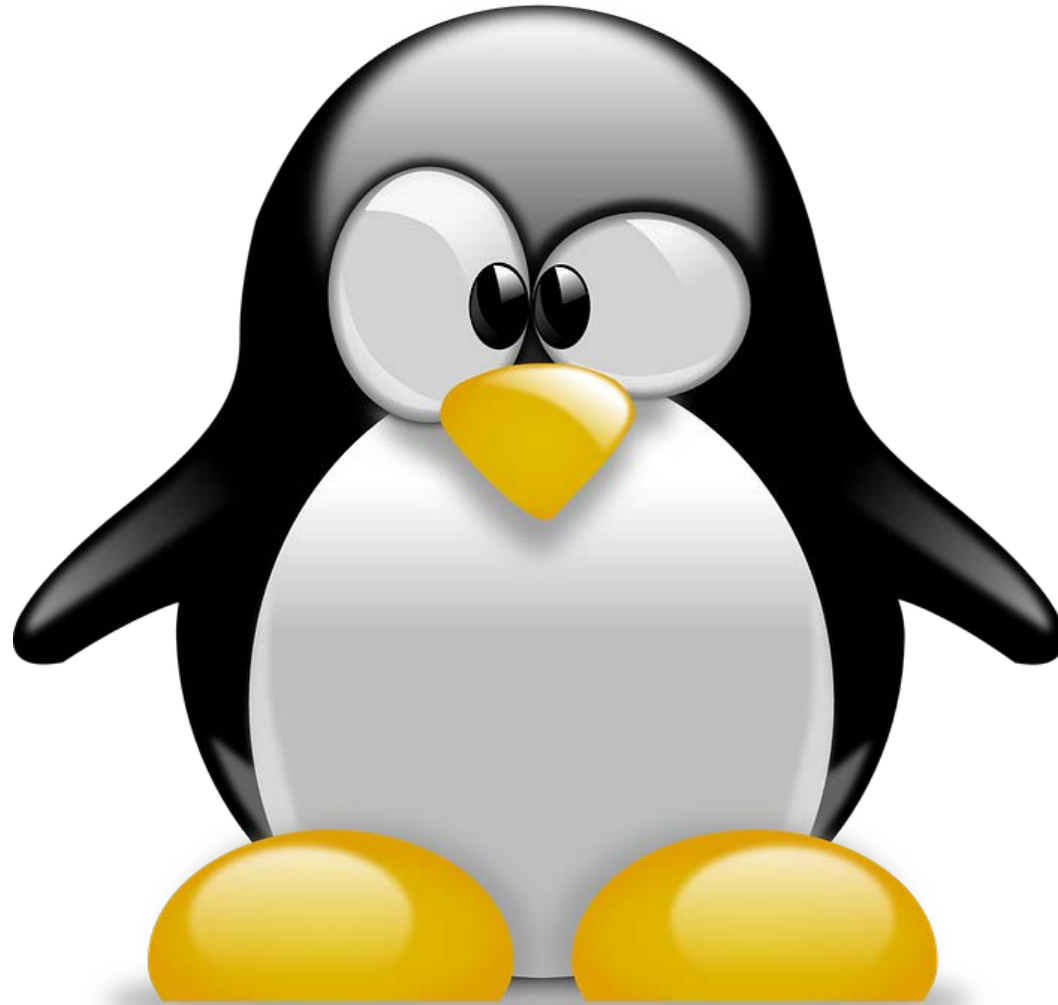
Surveillance for *C. difficile* Infection (CDI) and Multidrug Resistant Organisms (MDRO)

Resources for NHSN Users Already Enrolled

Training	+
Protocol	+
Data Collection Forms and Instructions	+
Supporting Material	+
Analysis Resources	+
FAQs	+

Questions? We'd love to hear from you! E-mail us at nhsn@cdc.gov and include "LTCF" in subject line

QUESTIONS



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