

Healthcare-Associated Infections

Healthcare-associated infections affect about 1 in 25 hospital patients, resulting in roughly 75,000 deaths each year. Whereas improvements have been made in reducing many infections, most notably surgical-site and central line-associated bloodstream infections; catheter-associated urinary tract infections (CAUTIs) have reached historically high rates, signaling a need for more aggressive and focused CAUTI prevention measures.

Trends in Healthcare-Associated Infections

Key Indicator	Baseline 2008*	Status 2012	Progress
Central line-associated blood stream infection (CLABSI), standardized infection ratio (SIR) ¹	1.00	0.56	●
Catheter-associated urinary tract infections (CAUTI), SIR	1.00 (2009)	1.03	■
Hospital admission and readmission due to surgical-site infections (SSI), SIR	1.00	0.8	●
Hospital onset of <i>Clostridium difficile</i> (<i>C. difficile</i>), SIR	1.00 (2011)	0.98	N/A
Incidence of healthcare-associated invasive Methicillin-resistant <i>Staphylococcus aureus</i> (MRSA) infections (rate per 100,000 persons)	27.08	18.74	●



Trend in wrong direction



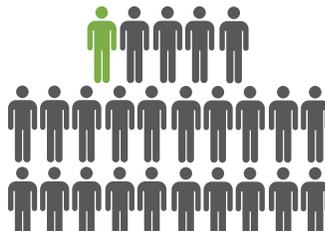
Insufficient Progress



Progress

* Unless otherwise noted.

¹ The Standardized Infection Ratio (SIR) is calculated by dividing the actual (observed) infections by the expected infections using data gathered through the CDC National Healthcare Safety Network (NHSN).

1 in 25

 hospital patients develop
 healthcare-associated
 infections



 **\$28-33**
BILLION
 estimated annual cost
 of preventable health
 care expenditures from
 healthcare-associated
 infections