Using NHSN for Multidrug Resistant Organism and *Clostridium difficile* Infection (MDRO/CDI) Laboratory-Identified (LabID) Event Reporting
Objectives

- Review the structure of the Multidrug-Resistant Organism & Clostridium difficile Infection (MDRO/CDI) Module within the Patient Safety Component of NHSN
- Describe the rationale for monitoring MDROs and CDI
- Review requirements for MRSA Bacteremia and CDI LabID Event reporting to CMS through NHSN
- Describe the methodology, protocols, and definitions used in data collection and reporting under the MDRO/CDI LabID Event Reporting in NHSN
- Review the correct method for entering MRSA Bacteremia and CDI LabID Events into NHSN
- Apply knowledge through case studies
Patient Safety Component
5 Modules

- Device-associated Module
- Procedure-associated Module
- Antimicrobial Use and Resistance (AUR) Module
- MDRO & CDI Module
- Vaccination Module
Multidrug-Resistant Organism & *Clostridium difficile* Infection Module (MDRO/CDI)

**Infection Surveillance**
- MDRO
- CDI

**Laboratory-Identified (LabID) Event**
- MDRO
- CDI

**Prevention Process Measures**
- Hand Hygiene
- Gowns/Gloves
- Adherence to Active Surveillance Testing (AST)
  - MRSA & VRE only

**Outcome Measures**
- AST Prevalence/Incidence
- Only in locations where AST adherence done
Background
Goal of the MDRO and CDI Module

- Monitoring of MDROs and *C. difficile* infection (CDI) helps to evaluate local trends and changes in the occurrence of these pathogens and related infections.

- This module provides a mechanism for facilities to report and analyze MDRO and CDI data, in order to inform infection control staff of the impact of targeted prevention efforts.
Why C. *difficile*?

- Unlike many causes of healthcare associated infections (HAIs), *C. difficile* diarrheal infections have increased, and are now at historic highs.
- *C. difficile* infections are linked to about 14,000 deaths each year, with approximately 90% being among the elderly.
- Antibiotic use and healthcare exposure are two of the greatest risk factors.
- Careful attention to surface cleaning, and wearing gowns and gloves when treating those known to be infected, can reduce spread by 20%.

**Renewed interest:**
- Reporting to CMS via NHSN

People getting medical care can catch serious infections called *health care-associated (HAIs)*. While most types of HAIs are done – caused by the germ *C. difficile* – at historically high levels, *C. difficile* causes diarrhea linked to 14,000 American deaths a year. Those most at risk are people, especially older adults, who take antibiotics and are in medical care. When a person takes an antibiotic, good germs that protect against infection are destroyed for several months. During that time, patients can get sick from *C. difficile* picked up from contaminated surfaces or spread from health care provider’s hands. About 25% *C. difficile* infections first show symptoms in hospital patients; 75% first show in nursing home patients or in people recently coming to doctors’ offices and clinics. *C. difficile* infection can cost at least $1 billion in extra health care annually.

"*Clostridium difficile* (klah-STRID ee-um Diff i-see)"
SHEA/HICPAC Position Paper (October 2008): Recommendations for MDRO Metrics in Healthcare Settings

- Define reasonable and practical metrics to best measure impact of prevention

- Authors from APIC, CDC, SHEA, HICPAC

- Five Categories of MDRO Outcome Measures
  1. Tracking Patients
  2. Monitoring Susceptibility Patterns
  3. Estimating Infection Burden
  4. Estimating Exposure Burden
  5. Quantifying Healthcare Acquisition (which includes Transmission)
Recommended metrics from the SHEA/HICPAC Position Paper were the basis for the new MDRO and CDI Module.
Organisms

1) Methicillin-Resistant *Staphylococcus aureus* (MRSA) [option w/ Methicillin-Sensitive *S. aureus* (MSSA)]

2) Vancomycin-Resistant *Enterococcus* spp. (VRE)

3) Cephalosporin-Resistant (CephR) *Klebsiella* spp.

4) Carbapenem-Resistant (CRE) *Klebsiella* spp.

5) Carbapenem-Resistant (CRE) *E. coli* spp.

6) Multidrug-Resistant (MDR) *Acinetobacter* spp.

7) *Clostridium difficile*
Definitions

- **MRSA**: *S. aureus* testing oxacillin, cefoxitin, or methicillin resistant; or positive from molecular testing for mecA and PBP2a

- **MSSA**: *S. aureus* testing oxacillin, cefoxitin, or methicillin intermediate or susceptible; or negative from molecular testing for mecA and PBP2a

- **VRE**: Any Enterococcus spp. testing resistant to vancomycin

- **CepR-Klebsiella**: *Klebsiella* spp. testing intermediate or resistant to ceftazidime, ceftriaxone, cefotaxime, or cefepime

- **CRE-Klebsiella**: *Klebsiella* spp. testing intermediate or resistant to imipenem, meropenem, or doripenem

- **CRE-E. coli**: *E. Coli* spp. testing intermediate or resistant to imipenem, meropenem, or doripenem
MDR-*Acinetobacter*: *Acinetobacter* spp. testing intermediate or resistant to at least one drug within at least 3 antimicrobial classes of 6, including:
- β-lactam/β-lactamase inhibitor combo (PIP, PIPTAZ)
- cephalosporins (CEFEP, CEFTAZ)
- carbapenems (IMI, MERO, DORI)
- aminoglycosides (AMK, GENT, TOBRA)
- fluoroquinolones (CIPRO, LEVO)
- sulbactam (AMPSUL)

*C. difficile*: *C. difficile* is identified as the associated pathogen for Lab ID Event or HAI reporting [Gastrointestinal System Infection (GI) -Gastroenteritis (GE) or Gastrointestinal Tract (GIT)]
Active participants must choose main reporting method

Infection Surveillance  LabID Event Reporting

Additional options then become available

Prevention Process Measures:
• Adherence to Hand Hygiene
• Adherence to Gown and Glove Use
• Adherence to Active Surveillance Testing (for MRSA/VRE Only)

Outcome Measures:
• AST Prevalence / Incidence (for MRSA/VRE Only)
CMS Reporting Requirements
LabID Event for FacWideIN
# Healthcare Facility HAI Reporting to CMS via NHSN – Current and Proposed Requirements

*Draft (11/23/2011)*

<table>
<thead>
<tr>
<th>HAI Event</th>
<th>Facility Type</th>
<th>Reporting Start Date</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CLABSI</strong></td>
<td>Acute Care Hospitals</td>
<td>January 2011</td>
</tr>
<tr>
<td></td>
<td>Adult, Pediatric, and Neonatal ICUs</td>
<td></td>
</tr>
<tr>
<td><strong>CAUTI</strong></td>
<td>Acute Care Hospitals</td>
<td>January 2012</td>
</tr>
<tr>
<td></td>
<td>Adult and Pediatric ICUs</td>
<td></td>
</tr>
<tr>
<td><strong>SSI</strong></td>
<td>Acute Care Hospitals</td>
<td>January 2012</td>
</tr>
<tr>
<td></td>
<td>Colon and abdominal hysterectomy</td>
<td></td>
</tr>
<tr>
<td>I.V. antimicrobial start</td>
<td>Dialysis Facilities</td>
<td>January 2012</td>
</tr>
<tr>
<td>Positive blood culture</td>
<td>Dialysis Facilities</td>
<td>January 2012</td>
</tr>
<tr>
<td>Signs of vascular access infection</td>
<td>Dialysis Facilities</td>
<td>January 2012</td>
</tr>
<tr>
<td><strong>CLABSI</strong></td>
<td>Long Term Care Hospitals *</td>
<td>October 2012</td>
</tr>
<tr>
<td><strong>CAUTI</strong></td>
<td>Long Term Care Hospitals *</td>
<td>October 2012</td>
</tr>
<tr>
<td><strong>CAUTI</strong></td>
<td>Inpatient Rehabilitation Facilities</td>
<td>October 2012</td>
</tr>
<tr>
<td><strong>MRSA Bacteremia LabID Event</strong></td>
<td>Acute Care Hospitals</td>
<td>January 2013</td>
</tr>
<tr>
<td><strong>C. difficile LabID Event</strong></td>
<td>Acute Care Hospitals</td>
<td>January 2013</td>
</tr>
<tr>
<td><strong>HCW Influenza Vaccination</strong></td>
<td>Acute Care Hospitals</td>
<td>January 2013</td>
</tr>
<tr>
<td><strong>HCW Influenza Vaccination</strong></td>
<td>Outpatient Surgery/ASCs</td>
<td>October 2014</td>
</tr>
<tr>
<td><strong>SSI (future proposal)</strong></td>
<td>Outpatient Surgery/ASCs</td>
<td>TBD</td>
</tr>
</tbody>
</table>

* Long Term Care Hospitals are called **Long Term Acute Care Hospitals** in NHSN
CMS 2013
MRSA Bacteremia LabID Event

Organism: Methicillin-Resistant \textit{Staphylococcus aureus}(MRSA)

Data Collection: CDC NHSN - MDRO/CDI Module

Required Locations:
All inpatient locations (=FacWideIN) for LabID Events

Required Data:
\textbf{Community-Onset (CO) and Healthcare-Onset (HO) Event}
MRSA blood specimens at the facility-wide inpatient level
CMS 2013

**C. difficile** Lab ID Event

- **Organism:** Clostridium difficile (C. diff)

- **Data Collection:** CDC NHSN - MDRO/CDI Module (Lab ID Event)

- **Required Locations:** All inpatient locations at Facility-wide Inpatient level (FacWideIN) minus NICU, SCN, or other Well Baby locations (e.g. Nurseries, babies in LDRP)

- **Required Data:**
  - Community-Onset (CO) and Healthcare-Onset (HO) Events
  - All *C. difficile* Lab ID Events on unformed stool specimens at the facility-wide Inpatient level
Facility-wide Inpatient FacWideIN

Includes all inpatient locations, including observation patients housed in an inpatient location
CMS 2013
What Data Will NHSN Report to CMS?

MRSA Blood and C. difficile Healthcare Facility-Onset (HO) LabID Events

CDI: All non-duplicate, non-recurrent LabID Event specimens collected > 3 days after admission to the facility

MRSA Blood: All non-duplicate, LabID Event specimens collected >3 days after admission to the facility
Getting Ready for Reporting
Creating a Monthly Reporting Plan

Plan saved successfully.

Mandatory fields marked with *

- Facility ID*: DHQP Memorial Hospital (10000)
- Month*: July
- Year*: 2012
Monthly Reporting Plan

C. diff and MRSA LabID (*blood specimens only*) Events must be included in Monthly Reporting Plan each month for data to be reported on behalf of the facility to CMS.

All specimens are not required for CMS, but if state mandates, require facility to report all specimens, then it is okay and only bloods will be counted for CMS reporting.
Location Reporting Options

**Facility-Wide Inpatient or Facility-Wide Outpatient:**
- Options currently available only for LabID Event reporting
- Report from throughout all of a facility’s inpatient or outpatient locations
  - Numerator (MDRO/CDI Events) - report separately for each location in facility
  - Single denominators for entire facility:
    - FacWideIN – patient days and admissions
      - Separate counts for MDRO and CDI
      - Minus baby locations for CDI
    - FacWideOUT – encounters

**Location Specific:**
- Select only a few locations or every location for full facility coverage
- Report separately from each selected location in the facility
- Separate denominators for each location:
  - Patient days and admissions for inpatient locations
  - Encounters for outpatient locations

CMS Requirement
Location Reporting Options

Location Specific

- **Selected Locations**
  - Report LabID Events separately from all specific locations being monitored

- **All Locations**
  - Separate numerator and denominator from each chosen location

Overall Facility-wide Inpatient (FacWideIN) and/or Outpatient (FacWideOUT)

- **Report LabID Events from all inpatient and/or all outpatient locations**
- **Report LabID Events from each patient location separately (numerator)**
  - Inpatient: one denominator for entire facility (*patient days and admissions*)
  - Outpatient: one denominator for all outpatient locations (*patient encounters*)
Adding Locations
Why do I Need to Add Locations?

- Each LabID Event (numerator) is reported according to the patient’s location when the specimen is collected.
- This means that any inpatient unit could potentially house a patient who has a MRSA blood specimen or C. difficile stool specimen LabID Event.
- To ensure that a location is available for reporting when a LabID Event is identified:
  - Add all inpatient locations before reporting begins in 2013.
NHSN Patient Safety Component Home Page

Use the Navigation bar on the left to access the features of the application.

Assurance of Confidentiality: The information obtained in this surveillance system that would permit identification of any individual or institution is collected with a guarantee that it will be held in strict confidence, will be used only for the purposes stated, and will not otherwise be disclosed or released without the consent of the individual, or the institution in accordance with Sections 304, 306 and 308(d) of the Public Health Service Act (42 USC 242b, 242k, and 242m(d)).

NHSN maintenance may occur nightly between 12am and 6am Eastern time.
Locations Page: Specify Location Info

Logged into Pleasant Valley Hospital (ID 10312) as DSIEVERT.
Facility Pleasant Valley Hospital (ID 10312) is following the PS component.

Locations

HELP Instructions

- To Add a record, fill in the form with the required fields and any desired optional values. Then click on the Add button.
- To Find a record, click on the Find button. One of more fields can be filled in to restrict the search to those values.
- To Edit a record, perform a Find on the desired record. Click on the desired record to fill in its values into the form and edit the values. To save the changes, click on the Save button.
- To Delete one or more records, perform a Find on the desired record(s). Check the corresponding box(es), then click on the Delete button.
- Press the Clear button to start over with a new form.

Mandatory fields to "Add" or "Edit" a record marked with *

Your Code*: 5W
Your Label*: MED WARD
CDC Location Description*: Inpatient Medical Ward
Status*: Active
Bed Size*: 22

A bed size greater than zero is required for most inpatient locations.
Find Locations: All or Specific Search

Instructions:
- To Add a record, fill in the form with the required fields and any desired optional values. Then click on the Add button.
- To Find a record, click on the Find button. One or more fields can be filled in to restrict the search to those values.
- To Edit a record, perform a Find on the desired record. Click on the desired record to fill in its values into the form and edit the values. To save the changes, click on the Save button.
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- Press the Clear button to start over with a new form.

Mandatory fields to "Add" or "Edit" a record marked with *

CDC Location Description*: Inpatient Medical Ward

Location Table

<table>
<thead>
<tr>
<th>Status</th>
<th>Your Code</th>
<th>Your Label</th>
<th>CDC Description</th>
<th>CDC Code</th>
<th>Bed Size</th>
</tr>
</thead>
<tbody>
<tr>
<td>Active</td>
<td>5W</td>
<td>MED WARD</td>
<td>Inpatient Medical Ward</td>
<td>IN:ACUTE:WARD:M 22</td>
<td></td>
</tr>
<tr>
<td>Active</td>
<td>INMEDWARD</td>
<td></td>
<td>Inpatient Medical Ward</td>
<td>IN:ACUTE:WARD:M 42</td>
<td></td>
</tr>
</tbody>
</table>
LabID Event Reporting

Introduction

Reporting of *proxy* infection measures of MDRO and *C. difficile* healthcare acquisition, *exposure burden*, and *infection burden* by using primarily laboratory data. Laboratory testing results can be used without clinical evaluation of the patient, allowing for a much less labor-intensive means to track MDROs and CDI.
Overview

MRSA Bacteremia Lab ID Event Reporting in NHSN
Definition

MRSA Positive Blood Isolate

Any blood specimen obtained for clinical decision making for MRSA

Excludes tests related to active surveillance testing
MRSA positive blood specimen for a patient in a location with no prior MRSA positive blood specimen result collected within 14 days for the patient and location

Also referred to as all non-duplicate LabID Events
Definition
Duplicate MRSA Bacteremia LabID Event

Any MRSA blood isolate from the same patient and same location, following a previous positive MRSA blood laboratory result within the past 14 days.
Summary: MRSA Bacteremia

Purpose: To calculate proxy measures of MRSA bloodstream infections, exposures burdens, and healthcare acquisitions through monitoring and reporting data from positive clinical cultures.

LabID Event: A laboratory-identified event. MRSA positive blood specimen for a patient in a location with no prior MRSA positive blood specimen reported within 14 days for the patient and location. It must be a specimen that is collected for diagnosis/treatment (NO surveillance cultures). A patient in a location in a month can then have additional MRSA blood specimens reported as LabID Events after a full 14-day interval with no positive MRSA blood specimen for the same patient and same location identified by the lab.

- LabID Events (numerators) are reported by specific location where the specimen was collected.
- Monthly Monitoring Summary Data (denominators) for Total Patient Days and Total Admissions are reported for the overall inpatient facility (FacWideIN).
Add Event - Patient Information

Patient Information

- Facility ID: Pleasant Valley Hospital (ID 10312)
- Patient ID: DS3636
- Gender: F - Female
- Date of Birth: 05/16/1943
Event Information

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

Date Specimen Collected*: 01/14/2013

Specific Organism Type*: MRSA - MRSA

Outpatient*: N - No

Specimen Body: CARD - Cardiovascular/Circulatory/Lymphatics

Site/Source*: BLDSPC - Blood specimen

Specimen Source*: BLDSPC - Blood specimen

Date Admitted to Facility*: 01/09/2013

Location*: INMSWARD - IN:ACUTE:WARD:MS

Date Admitted to Location*: 01/09/2013

Documented prior evidence of previous infection or colonization with this specific organism type from a previously reported LabID Event?: N - No

Has patient been discharged from your facility in the past 3 months?: N - No

Auto-filled

Patient Location when Specimen Collected

Entries for Blood LabID Events
NHSN will Categorize your MRSA Blood Specimen LabID Events as CO or HO

NHSN Application Categorizes* LabID Events As:

- **Community-Onset (CO):** LabID Event specimen collected as an inpatient ≤ 3 days after admission to the facility (i.e., days 1 (admission), 2, or 3)

- **Healthcare Facility-Onset (HO):** LabID Event specimen collected > 3 days after admission to the facility (i.e., on or after day 4)

*Based on Inpatient Admission & Specimen Collection Dates
Overview
CDI LabID Event Reporting in NHSN
Definition
CDI Positive Laboratory Assay

- A positive laboratory test result for *C. difficile* toxin A and/or B **

**OR**

- A toxin-producing *C. difficile* organism detected by culture or other laboratory means performed on a stool sample

Remember..
*C. difficile* testing only on unformed stool samples (should conform to shape of container)

**Positive PCR result for toxin producing gene is equal to a positive *C. diff* test result**
Definition
CDI Lab ID Event

A toxin-positive C. difficile stool specimen for a patient in a location with no prior C. difficile specimen result reported within 14 days for the patient and location.

Also referred to as all non-duplicate Lab ID Events.
Definition
Duplicate C. *difficile* Positive Test

Any *C. difficile* toxin-positive laboratory result from the same patient and same location, following a previous *C. difficile* toxin-positive laboratory result within the past 14 days
Identifying a *C. difficile* LabID Event

Figure 2: *C. difficile* test Results Algorithm for Laboratory-Identified (LabID) Events

(+)*C. difficile* toxin test result

Prior (+) in ≤ 2 weeks per patient and location

No

LabID Event

Yes

Duplicate *C. difficile*

Not a LabID Event
Facility-wide Inpatient (FacWideIN) Reporting for CDI
Summary: C. difficile

**Purpose:**
To calculate proxy measures of *C. difficile* infections, exposures burdens, and healthcare acquisitions through monitoring and reporting data from positive clinical cultures (unformed stool only)

**LabID Event:**
A laboratory-identified event. A toxin-positive / toxin-producing *C. difficile* stool specimen for a patient in a location with no prior *C. difficile* specimen reported within 14 days for the patient and location, and having a full 14-day interval with no toxin-positive *C. difficile* stool specimen identified by the lab since the prior reported *C. difficile* LabID Event. Also referred to as non-duplicate *C. difficile* toxin-positive laboratory result

- LabID Events (numerators) are reported by specific location where the specimen was collected

- Monthly Monitoring Summary Data (denominators) for Patient Days and Admissions (*minus all NICU, SCN, and Well Baby locations, including LDRP baby counts*) are reported for the overall inpatient facility (FacWideIN)
LabID Event Report Form

Laboratory-identified MDRO or CDI Event

*required for saving

Facility ID: __________________________ Event #: __________________________

*Patient ID: __________________________ Social Security #: __________________________

Secondary ID: __________________________

Patient Name, Last: __________________________ First: __________________________ Middle: __________________________

*Gender: M F

*Date of Birth: __________________________

Ethnicity (Specify): __________________________ Race (Specify): __________________________

Event Details

*Event Type: LabID

*Specific Organism Type: (Check one)
- MRSA
- MSSA
- VRE
- C. difficile
- CephR-Klebsiella
- CRE-Ecoli
- CRE-Klebsiella
- MDR-Acinetobacter

*Outpatient: Yes No

*Date Specimen Collected: __________________________

*Date Admitted to Facility: __________________________

*Specimen Body Site/System: __________________________

*Location: __________________________

*Specimen Source: __________________________

*Has patient been discharged from your facility in the past 3 months? Yes No

If Yes, date of last discharge from your facility: __________________________

Custom Fields

Label __________________________ Label __________________________

/ / / __________________________ / / / __________________________
Add Patient Information

- The top section of data collection form is used to collect patient demographics. Required fields have an asterisk (*).
- There are 4 required fields:
  - Facility ID
  - Patient ID
  - Gender
  - Date of Birth
Add Event Information

Event Information

- **Event Type**: LABID - Laboratory-identified MDRO or CDI Event
- **Date Specimen Collected**: 01/13/2013
- **Specific Organism Type**: CDIF - C. difficile
- **Outpatient**: N - No
- **Specimen Body**: DIGEST - Digestive System
- **Site/Source**: STOOL - Stool specimen
- **Date Admitted to Facility**: 01/11/2013
- **Location**: INGI(WARD) - IN:ACUTE:WARD(GI)
- **Date Admitted to Location**: 01/11/2013
- **Documented prior evidence of previous infection or colonization with this specific organism type from a previously reported LabID Event?**: N - No
- **Has patient been discharged from your facility in the past 3 months?**: Y - Yes
- **Date of last discharge from your facility**: 12/19/2012

Auto-filled when LabID and CDIF selected

Patient Location when Specimen Collected

Auto-filled
NHSN will Categorize CDI LabID Events Based on Inpatient Admission & Specimen Collection Dates

- **Healthcare Facility-Onset (HO):** LabID Event specimen collected > 3 days after admission to the facility (i.e., on or after day 4).

- **Community-Onset (CO):** LabID Event specimen collected as an inpatient ≤ 3 days after admission to the facility (i.e., days 1 (admission), 2, or 3).

- **Community-Onset Healthcare Facility-Associated (CO-HCFA):** CO LabID Event collected from a patient who was discharged from the facility ≤ 4 weeks prior to the date current stool specimen was collected.
NHSN will Further Categorize CDI LabID Events based on Specimen Collection Date & Prior Specimen Collection Date of a Previous CDI LabID Event (that was entered into NHSN)

- **Incident CDI Assay:** Any CDI LabID Event from a specimen obtained > 8 weeks after the most recent CDI LabID Event (or with no previous CDI LabID Event documented) for that patient.

- **Recurrent CDI Assay:** Any CDI LabID Event from a specimen obtained > 2 weeks and ≤ 8 weeks after the most recent CDI LabID Event for that patient.
Provision to LabID Event Reporting for CDI and MRSA Bacteremia

A LabID Event for an inpatient location can include specimens collected during an emergency department or other outpatient clinic visit, if collected same calendar day as patient admission.

**Location will be assigned to the admitting inpatient location (for FacWideIN).**

***If participating in both inpatient and outpatient LabID reporting, report the LabID Event in both locations as two separate Events, ED and admitting location.
Rules for Entering MRSA Blood and C. diff LabID Events FacWideIN

- C. diff toxin-positive and MRSA blood specimens **MUST** be monitored throughout all inpatient locations within a facility
  - *Exception for C. diff*: NICUs, SCN, Well Baby Nurseries, and babies in LDRP units excluded
- LabID Event(s) **MUST** be entered whether community-onset (CO) or healthcare facility-onset (HO)
- A specimen (C. diff stool and/or MRSA blood) qualifies as a LabID Event if there has not been a previous positive laboratory result for the patient and location within the previous 14 days
- LabID Events never include results from Active Surveillance Testing
Entry of Monthly Denominator Data for FacWideIN LabID Event Reporting
Summary Data – FacWideIN Location

- Each monthly Summary Data (denominator) is reported at the inpatient facility-wide level = “FacWideIN”
- FacWideIN is a ‘virtual’ location within NHSN, which means the user does not define it like other specific units/locations
MDRO/CDI Summary Form (Denominators)

MDRO and CDI Prevention Process and Outcome Measures Monthly Monitoring

<table>
<thead>
<tr>
<th>Facility ID #:</th>
<th>Month:</th>
<th>Year:</th>
<th>Location Code:</th>
</tr>
</thead>
</table>

Setting: Inpatient **Total Patient Days: | **Total Admissions: | **Total Encounters: |
Setting: Outpatient (or Emergency Room) **Total Encounters: |

If monitoring C. difficile in a FACWIDE location, then subtract NICU & Well Baby counts from Totals: **5 Patient Days: | **5 Admissions: | **5 Encounters: |

MDRO & CDI Infection Surveillance or LabID Event Reporting

<table>
<thead>
<tr>
<th>Specific Organism Type</th>
<th>MRSA</th>
<th>VRE</th>
<th>Cephr-Klebsiella</th>
<th>CRE-Ecoli</th>
<th>CRE-Klebsiella</th>
<th>MDR-Acinetobacter</th>
<th>C. difficile</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infection Surveillance</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>LabID Event (All specimens)</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>LabID Event (Blood specimens only)</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

Process Measures (Optional)

Hand Hygiene
**Performed: | **Indicated: |

Gown and Gloves
**Used: | **Indicated: |

Active Surveillance Testing (AST)
**Active Surveillance Testing per unit: | |

[Image of the form with some sections highlighted]
Choose Summary Data and Add
Select Summary Data Type > Continue
Enter Location Code = FacWideIN plus Month and Year

MDRO and CDI Prevention Process and Outcome Measures Monthly Monitoring

✓ Save of Summary Data successful.

Facility ID*: 10312 (Pleasant Valley Hospital)
Location Code*: FACWIDEIN - FacWideIN
Month*: January
Year*: 2013
Enter All Required Facility-Wide Inpatient Counts

MDRO and CDI Prevention Process and Outcome Measures Monthly Monitoring

☑ Save of Summary Data successful.

Mandatory fields marked with ⚫

Facility ID*: 10312 (Pleasant Valley Hospital)
Location Code*: FACWIDEIN - FacWideIN
Month*: January
Year*: 2013

General
Setting: Inpatient  Total Patient Days*: 680  Total Admissions*: 135
Setting: Outpatient (or Emergency Room)  Total Encounters:

If monitoring C. difficile in a FACWIDE location, then subtract NICU and Well Baby counts from Totals:
Patient Days*: 476  Admissions*: 99

MRSA Bacteremia
C. difficile

MDRO & CDI Infection Surveillance or LabID Event Reporting

<table>
<thead>
<tr>
<th>Specific Organism Type</th>
<th>MRSA</th>
<th>VRE</th>
<th>Cephr-Klebsiella</th>
<th>CRE-EcoI</th>
<th>CRE-Klebsiella</th>
<th>MDR-Acinetobacter</th>
<th>C. difficile</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infection Surveillance</td>
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<tr>
<td>LabID Event (All specimens)</td>
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<tr>
<td>LabID Event (Blood specimens only)</td>
<td>*X</td>
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</tbody>
</table>

Auto-filled
Resources for NHSN

The National Healthcare Safety Network (NHSN) is a secure, internet-based surveillance system that integrates and expands legacy patient and healthcare personnel safety surveillance systems managed by the Division of Healthcare Quality Promotion (DHQP) at CDC. NHSN also includes a new component for hospitals to monitor adverse reactions and incidents associated with receipt of blood and blood products. Enrollment is open to all types of healthcare facilities in the United States, including acute care hospitals, long term acute care hospitals, psychiatric hospitals, rehabilitation hospitals, outpatient dialysis centers, ambulatory surgery centers, and long term care facilities. For more information, click on the topics below.

Topics

- Join NHSN
- About NHSN
- Forms
- NHSN Manuals
- Resource Library
- Enrollment Requirements
- Patient Safety Component
- Biovigilance Component
- Healthcare Personnel Safety Component

Dialysis Facilities

Enroll here to comply with CMS QIP requirement

Data & Statistics

NHSN Annual Reports
State Healthcare-associated Infections Prevention Activities and Reports
CDC’s NHSN Healthcare-associated Infections Summary Data Reports

Communication Updates

- E-mail updates
- Members meetings
- Newsletters

Contact NHSN:

- Centers for Disease Control and Prevention
- National Healthcare Safety Network
- 1600 Clifton Rd
- Atlanta, GA 30333
- 800-CDC-INF0
- TTY: (888) 232-6348
- New Hours of Operation: 8am-8pm ET/Monday-Friday
- Closed holidays

http://www.cdc.gov/nhsn/index.html
Resources for MDRO/CDI Lab ID Event Reporting

- NHSN Patient Safety Component Manual
  - Ch 12: MDRO and CDI Module (January 2012); pages 18-21
    http://www.cdc.gov/nhsn/PDFs/pscManual/12pscMDRO_CDADcurrent.pdf
  - Ch 14: Tables of Instructions, Table 19, 21
    http://www.cdc.gov/nhsn/PDFs/pscManual/14pscForm_Instructions_current.pdf

- Determining Patient Days for Summary Data Collection: Observation vs. Inpatients
  http://www.cdc.gov/nhsn/PDFs/PatientDay_SumData_Guide.pdf

http://www.cdc.gov/nhsn/TOC_PSCManual.html
Resources for MDRO/CDI Lab ID

- NHSN Forms (January 2012)
  - 57.106: Monthly Reporting Plan
  - 57.128: Lab ID MDRO or CDI Event Form (numerator)
  - 57.127: MDRO and CDI Prevention Process and Outcomes Measures Monthly Reporting (denominator)

http://www.cdc.gov/nhsn/forms/Patient-Safety-forms.html#mdro
Available Training

- **C. difficile Guidelines for Clinicians**
  - [http://www.cdc.gov/HAI/organisms/cdiff/Cdiff_clinicians.html](http://www.cdc.gov/HAI/organisms/cdiff/Cdiff_clinicians.html)

- **Training**
  - Lectoras (coming soon)

- **NHSN Training Website:** [http://www.cdc.gov/nhsn/training/](http://www.cdc.gov/nhsn/training/)
  - Currently updating site with updated LabID Event Reporting presentations
Email help desk: nhsn@cdc.gov
NHSN website: http://www.cdc.gov/nhsn/