



## Instructions for the Completion of the Dialysis Monthly Reporting Plan Form (CDC 57.501)

Data Field	Instructions for Form Completion
Facility ID #	The NHSN-assigned facility ID will auto-populate in this field.
Month/Year	<b>Required.</b> Enter the month and year for the surveillance plan being recorded.
Not Participating in NHSN this Month	Optional. Check the “Not Participating in NHSN this Month ” box if your facility is not conducting any surveillance in the Dialysis Component for the month, due to one or more of the following circumstances: <ol style="list-style-type: none"> <li>1. The facility is closed or non-operational for the month</li> <li>2. The individual in charge of Dialysis Component surveillance is out of the office for the month and no surveillance can be conducted</li> <li>3. The facility will not be adhering to any of the NHSN Dialysis Component Protocols for the month</li> </ol>
Events	
Dialysis Event (DE)	Optional. Check this box if you plan to collect dialysis event (DE) data and corresponding summary (denominator) data for the outpatient dialysis location specified, as described by the <a href="#">Dialysis Event Protocol</a> .  Select your outpatient hemodialysis clinic reporting location from the location drop-down menu and the DE box will check automatically to indicate that you plan to collect DE data and corresponding summary (denominator) data for the outpatient dialysis location specified.  To follow the same data collection plan from the previous month for DE <u>and</u> CLIP, select "Copy from Previous Month" to automatically populate the section with last month’s selections.  To clear <u>all</u> selections in this section, select “Clear All Rows.”
Central Line Insertion Practice (CLIP)	Optional. Check this box if you plan to collect Central Line Insertion Practice (CLIP) data for the location specified, as described by the <a href="#">CLIP Protocol</a> .  To follow the same data collection plan from the previous month for DE <u>and</u> CLIP, select "Copy from Previous Month" to automatically populate the section with last month’s selections.  To clear <u>all</u> selections in this section, select “Clear All Rows.”
Prevention Process Measures	
Location	Select your outpatient hemodialysis clinic reporting location from the drop-down menu to indicate that you plan to collect Prevention Process Measures (PPM) data for outpatient dialysis location specified.
Hand Hygiene (HH)	Optional. Check this box if you plan to collect Hand Hygiene (HH) observation data for the location specified, as described by the <a href="#">Prevention Process Measures Protocol</a> .



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	<p>To follow the same data collection plan from the previous month for <u>all</u> Prevention Process Measures, select "Copy from Previous Month" to automatically populate the section with last month's selections.</p> <p>To clear <u>all</u> selections in this section, select "Clear All Rows."</p>
Hemodialysis Catheter Connection/Disconnection (CATHCON)	<p>Optional. Check this box if you plan to collect Hemodialysis Catheter Connection/Disconnection (CATHCON) observation data for the location specified, as described by the <a href="#">Prevention Process Measures Protocol</a>.</p> <p>To follow the same data collection plan from the previous month for <u>all</u> Prevention Process Measures, select "Copy from Previous Month" to automatically populate the section with last month's selections.</p> <p>To clear <u>all</u> selections in this section, select "Clear All Rows."</p>
Hemodialysis Catheter Exit Site Care (CATHCARE)	<p>Optional. Check this box if you plan to collect Hemodialysis Catheter Exit Site Care (CATHCARE) observation data for the location specified, as described by the <a href="#">Prevention Process Measures Protocol</a>.</p> <p>To follow the same data collection plan from the previous month for <u>all</u> Prevention Process Measures, select "Copy from Previous Month" to automatically populate the section with last month's selections.</p> <p>To clear <u>all</u> selections in this section, select "Clear All Rows."</p>
Arteriovenous Fistula and Graft Cannulation/Decannulation (FGCANN)	<p>Optional. Check this box if you plan to collect Arteriovenous Fistula and Graft Cannulation/Decannulation (FGCANN) observation data for the location specified, as described by the <a href="#">Prevention Process Measures Protocol</a>.</p> <p>To follow the same data collection plan from the previous month for <u>all</u> Prevention Process Measures, select "Copy from Previous Month" to automatically populate the section with last month's selections.</p> <p>To clear <u>all</u> selections in this section, select "Clear All Rows."</p>
Dialysis Station Routine Disinfection (DISINFECT)	<p>Optional. Check this box if you plan to collect Dialysis Station Routine Disinfection (DISINFECT) observation data for the location specified, as described by the <a href="#">Prevention Process Measures Protocol</a>.</p> <p>To follow the same data collection plan from the previous month for <u>all</u> Prevention Process Measures, select "Copy from Previous Month" to automatically populate the section with last month's selections.</p> <p>To clear <u>all</u> selections in this section, select "Clear All Rows."</p>
Injection Safety (INJSAFE)	<p>Optional. Check this box if you plan to collect Injection Safety (INJSAFE) observation data, which includes both Injectable Medication Preparation and Injectable Medication Administration observations, for the location specified, as described by the <a href="#">Prevention Process Measures Protocol</a>.</p>



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	<p>To follow the same data collection plan from the previous month for <u>all</u> Prevention Process Measures, select "Copy from Previous Month" to automatically populate the section with last month's selections.</p> <p>To clear <u>all</u> selections in this section, select "Clear All Rows."</p>
Patient Vaccination	
FLUVAXDP – Influenza Vaccination Dialysis Patient	<p>Optional. Check this box if you plan to collect Influenza Vaccination of Dialysis Patients (FLUVAXDP) data, as described by the <a href="#">Influenza Vaccination of Dialysis Patient Protocol</a>.</p> <p>If you wish to follow the data collection plan from the previous month, select "Copy from Previous Month." The FLUVAXDP monitoring plan selected in the previous month will automatically populate the field.</p>

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