

Hemovigilance Clinical Documentation Architecture (CDA) Frequently Asked Questions

What is CDA?

Clinical Documentation Architecture (CDA) is a Health Level 7 International standard (HL7) that provides a framework for encoding, formatting and semantics of electronic documents. In the case of NHSN's Hemovigilance Module, CDA can be used as a conduit to pull information directly from a facility's existing information system into the NHSN Hemovigilance application, bypassing the need for manual data entry and reducing data entry time from 70 minutes to approximately 2 minutes.

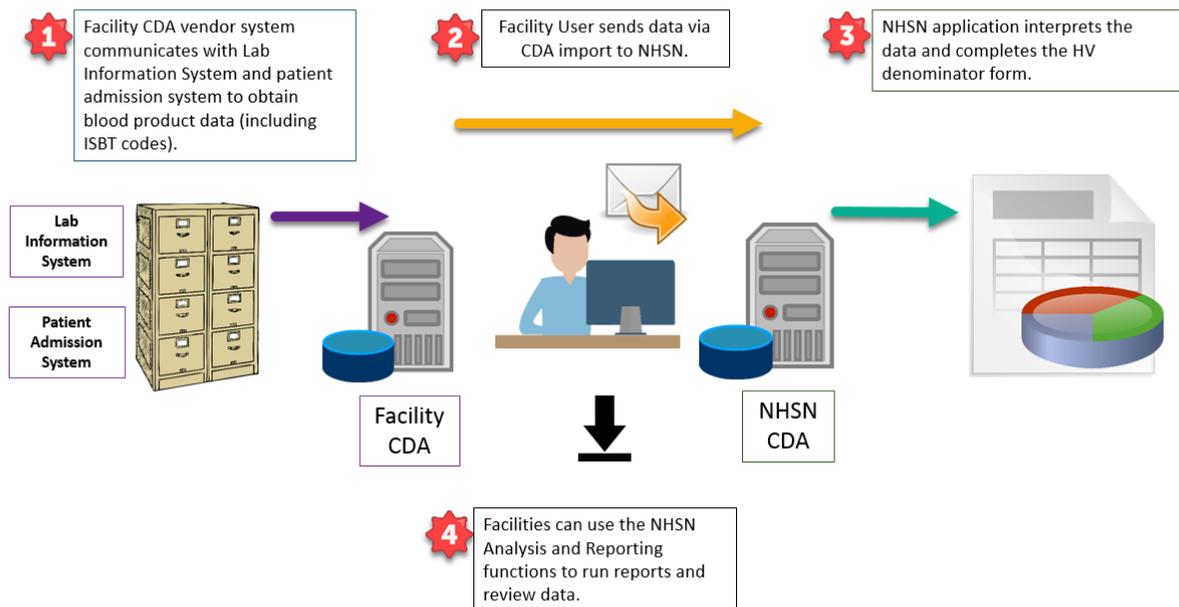
How does it work?

Step 1: A facility's in-house or commercial vendor CDA system electronically communicates with their Laboratory Information System (LIS) and patient admission/discharge/transfer system to obtain the blood product data to complete the NHSN Hemovigilance Denominator form. This includes ISBT 128 product descriptor codes.

Step 2: The data is formatted in a specific CDA format and zipped. The user imports the CDA into the NHSN application.

Step 3: The NHSN CDA software interprets the Blood product and ISBT 128 product codes and imports the data into the appropriate fields on the NHSN Hemovigilance form.

Step 4: Facilities are able to use the Analysis and Reporting functions to run reports and review submitted data.



What are the benefits of using CDA?

CDA allows for automated data entry into the NHSN Hemovigilance Module, which lowers reporting burden by up to 97%, from 70 minutes reporting time to about 2 minutes, and increases data accuracy. Additionally, CDA increases the granularity of reported data by using ISBT codes, which can break down blood components by modification as well as by component type.

Is CDA currently being used in NHSN reporting?

Yes, CDA is currently available to facilities enrolled in NHSN to upload data related to device-associated infections, surgical site infections, central line insertion practices adherence monitoring, antimicrobial use and resistance, and dialysis-related adverse events.

CDA is now available for the Monthly Denominator Form in the Hemovigilance module; this form carries the highest reporting burden, and therefore was of highest priority for CDA development. Electronic data reporting will be available for other Hemovigilance forms in the future.

How can my facility create and fund CDA-compatible software development?

Participating facilities can work with their internal information technology office or contract with an external CDA vendor to create software compatible with NHSN.

Where can I go if I would like additional information on CDA within NHSN?

To learn more about CDA implementation within NHSN please visit the [NHSN CDA Submission Support Portal \(CSSP\)](#).

Whom may I contact with additional questions?

Please contact nhsn@cdc.gov with “Hemovigilance” in the subject line with any other questions.