NHSN Monthly Checklist for Reporting to CMS IPPS Programs

Updated December 2025

OrgID: _____   CCN: _____   Month/Year: _____ /_____

STEP 1: Create Monthly Reporting Plans

CAUTI	CLABSI	MRSA bacteremia and CDI LabID[¶]	SSI
☐ ICUs* ☐ Wards[†] ☐ Oncology Locations[§]	☐ ICUs* ☐ NICUs ☐ Wards[†] ☐ Oncology Locations[§]	☐ FacWideIN-MRSA (blood specimens only) ☐ FacWideIN-CDI (all specimens) ☐ ED/24-hr Obs Locations (*will be added to plan automatically if FacWideIN is selected and ED/Obs locations(s) are mapped in NHSN*)	☐ COLO inpatient procedures ☐ HYST inpatient procedures

The following tables refer to Influenza Vaccination quality reporting. For a checklist for *HCP Reporting to CMS Hospital, IRF and LTCH Quality Reporting Programs* please click the following link; [NHSN Checklist for HCP Reporting](#).

Influenza Vaccination (Healthcare Personnel Safety Component)
☐ Quarter 4 (October – December) through Quarter 1 (January – March)

STEP 2: Enter Events/Procedures

CAUTI	CLABSI	MRSA bacteremia and CDI LabID[¶]	SSI
☐ ICUs* ☐ Wards[†] ☐ Oncology Locations[§]	☐ ICUs* ☐ NICUs ☐ Wards[†] ☐ Oncology Locations[§]	☐ FacWideIN-MRSA (blood specimens only) ☐ FacWideIN-CDI (all specimens) ☐ ED/24-hr Obs Locations (*will be added to plan automatically if FacWideIN is selected and ED/Obs locations(s) are mapped in NHSN*)	☐ COLO inpatient procedures ☐ HYST inpatient procedures

STEP 3: Enter Summary (Denominator) Data

Where applicable based on mapped locations, complete the following forms for Device Associated Module, one for each inpatient location:

- Device Associated – Intensive Care Unit/ Other Locations (non-ICU)
- Device Associated – Neonatal Intensive Care Unit
- Device Associated – SCA/ONC

☐ Summary record per month for each mapped inpatient location:

☐ Total Patient Days
☐ Central Line Days**
☐ Urinary Catheter Days

☐ Select "Report No Events", for each event and device type, only if no events were identified that met the NHSN surveillance definition

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* For 2011 and forward, includes those locations defined/mapped as adult and pediatric ICUs
[†] For January 2015 and forward, includes those locations defined/mapped as adult/pediatric medical, surgical, and medical/surgical wards.
[§] For January 2026 and forward, includes those locations defined/mapped as adult/pediatric oncology locations, including ICUs, wards, mixed acuity, and step down.
[¶] All healthcare-onset, community-onset, incident, and recurrent events that meet NHSN definitions should be reported.
** For SCA/ONC locations, central line days are reported by temporary and permanent central lines.

Complete "MDRO and CDI Monthly Denominator – all locations" form:

☐ One summary record per month for FacWideIN: ☐ Summary record per month for each ED/24hr Obs location:

☐ Line 1: Total Facility Patient Days & Admissions ☐ Total Encounters
☐ Indicate CDI test type (3rd month of each quarter, March, June, September, December) ☐ Select "Report No Events" for each organism only if no events were identified that met the NHSN surveillance definition
☐ Select "Report No Events" for each organism only if no events were identified that met the NHSN surveillance definition

STEP 4: Resolve Alerts
☐ Incomplete Events
☐ Missing Events *(select "Report No Events" box, if applicable)*
☐ Incomplete Summary Data
☐ Incomplete Procedures

☐ Missing Procedures *(select "No Procedures Performed" box, if applicable)*
☐ Missing Procedure-associated Events *(select "Report No Events", if applicable)*
☐ Unusual Susceptibility Profile
☐ Confirm CDI Test Type

STEP 5: Generate Datasets
☐ Generate new data sets **before** verifying data in CMS reports in **STEP 6**.

STEP 6: Print/Save Copies of Quarterly CMS Reports
☐ SIR – CLABSI Data for CMS IPPS (2015/2022 Baselines)
    ☐ SIR – CLABSI-Onc Data for CMS IPPS (2022 Baseline)
☐ SIR – CAUTI Data for CMS IPPS (2015/2022 Baselines)
    ☐ SIR – CAUTI-Onc Data for CMS IPPS (2022 Baseline)
☐ SIR – Complex 30-Day SSI Data for CMS IPPS (2015/2022 Baselines)
☐ SIR – MRSA Blood FacwideIN LabID Data for CMS IPPS (2015/2022 Baselines)
☐ SIR – CDI FacwideIN LabID Data for CMS IPPS (2015/2022 Baselines)

CMS Deadlines:
▪ Quarter 1 (January – March): August 15th
▪ Quarter 2 (April – June): November 15th
▪ Quarter 3 (July – September): February 15th
▪ Quarter 4 (October – December): May 15th
▪ Quarter 4 & Quarter 1 (October 1 – March 31) Healthcare Personnel Influenza Vaccination Summary data: May 15th

Note: Generally, data must be submitted no later than 11:59 p.m. Pacific Time on the submission deadline. Deadlines that fall on a weekend or holiday are moved to the next business day.

For additional guidance on ensuring your data are accurately sent to CMS, please visit the CMS Requirements page and navigate to the appropriate section(s) for your facility type. If you have any questions, please contact the NHSN Helpdesk: NHSN@cdc.gov. The NHSN Helpdesk is staffed Monday through Friday, 7am ET – 5pm ET, excluding Federal Holidays.

Additional Resources:

Catheter-Associated Urinary Tract Infection (CAUTI)

- [Operational Guidance for Acute Care Hospitals to Report Catheter-Associated Urinary Tract Infection (CAUTI) Data to CDC's NHSN for the Purpose of Fulfilling CMS's Hospital Inpatient Quality Reporting (IQR) Requirements](#)
- [How to Set up CLABSI and CAUTI Reporting per NHSN Protocol for the CMS Inpatient Prospective Payment System](#)
- [NHSN Surveillance for Urinary Tract Infections](#)

Central Line-Associated Bloodstream Infection (CLABSI)

- [Operational Guidance for Acute Care Hospitals to Report Central Line-Associated Bloodstream Infection (CLABSI) Data to CDC's NHSN for the Purpose of Fulfilling CMS's Hospital Inpatient Quality Reporting (IQR) Requirements](#)
- [How to Set up CLABSI and CAUTI Reporting per NHSN Protocol for the CMS Inpatient Prospective Payment System](#)
- [NHSN Surveillance for Central Line-Associated Bloodstream Infections (CLABSI)](#)

***Clostridium difficile* Infection (CDI) and Methicillin-Resistant *Staphylococcus aureus* (MRSA Bacteremia) LabID**

- [CMS Operational Guidance for Acute Care Hospitals to Report FACWIDEIN CDI LabID Event Data](#)
- [CMS Operational Guidance for Acute Care Hospitals to Report FACWIDEIN MRSA LabId Event Data](#)
- [How to Set Up Facility-Wide Inpatient MRSA Bacteremia and C. difficile LabID Event Reporting per NHSN Protocol for the CMS Inpatient Quality Reporting Program](#)
- [How to Report FacWideIN Denominator data](#)
- [NHSN Surveillance for Multidrug-Resistant Organism & Clostridioides difficile (MDRO/CDI) Infection Surveillance and LabID Events](#)

Surgical Site Infection (SSI)

- [CMS Operational Guidance for Acute Care Hospitals to Report SSI Data](#)
- [NHSN Surveillance for Surgical Site Infection (SSI) Events](#)