

## NHSN v8.4 (July 2015) Release Notes

<b>Changes to the Patient Safety Component:</b>	
<b>Event Entry</b>	When entering healthcare-associated infections, the fields <i>Secondary Bloodstream Infection</i> and <i>Pathogen Identified</i> , will autofill with “No” unless one of the following is selected: 1) positive culture, 2) positive blood culture, or 3) other positive lab.
<b>LabID Onset Variable Issue</b>	Some users experienced an unexpected error when the LabID event was modified and the onset variable was not properly accounting for this change. This issue has been corrected.
<b>New AUR Module Alerts</b>	Facilities will see alerts on their NHSN alert screen for missing ‘AU Summary,’ ‘AR Summary,’ and ‘AR Events’ if the Antimicrobial Use (AU) and/or Antimicrobial Resistance (AR) Option(s) have been selected in the facility’s monthly reporting plan but data have not yet been entered.
<b>New option in the NHSN Statistics Calculator</b>	A new comparison option is available in the Statistics Calculator which allows for a comparison and statistical calculations around a single proportion. This option can be used to calculate a 95% confidence interval around a single proportion (e.g., healthcare worker influenza vaccination percentage, device-utilization ratio, etc.) and can also be used to compare a proportion to a chosen benchmark.
<b>Patient Safety Analysis Updates</b>	
<b>Update to TAP Reports</b>	<p>The following updates have been made to the TAP Reports in NHSN:</p> <ol style="list-style-type: none"> <li>1. The modification screen for the TAP Report output options has been updated to remove the “Group By” option, which was not applicable to these reports.</li> <li>2. Users have the ability to select a Target SIR for the calculation of the cumulative attributable difference (CAD). In the “Other Options” section of the TAP Report modification screen, users can select from the following multipliers: <ul style="list-style-type: none"> <li>• HHS Goal</li> <li>• National SIR, as published in the current “HAI Progress Report” (available from: <a href="http://www.cdc.gov/hai/progress-report/index.html">http://www.cdc.gov/hai/progress-report/index.html</a>)</li> <li>• Custom SIR Goal (must be less than or equal to 1)</li> </ul> </li> <li>3. The test for significance will compare the facility or location SIR to that of the SIR Goal (i.e., CAD multiplier)</li> <li>4. Group Users will now see one cumulative row that is inclusive of all facilities in the group. For example, a Group will now be able to obtain the total “Cumulative Attributable Difference” for all facilities represented in the selected TAP Report.</li> </ol>
<b>Update to Participation Alerts Output Option</b>	The “Line Listing - Participation Alerts” output option has been updated to align with the alerts that are listed on a facility’s “NHSN Alerts” screen. The alerts are organized into separate tables by Alert Type (e.g., Missing Summary Data).

<b>CDI Infection Surveillance Rate Tables Issue</b>	Some users experienced an unexpected error while attempting to run unit specific CDI Rate tables for Infection Surveillance (2014 data). This issue has been corrected.
<b>New Rate Tables for AU Option</b>	The new rate tables allow facilities to generate an antimicrobial usage rate per individual drug or a selection of multiple drugs using the data they've uploaded into the NHSN AU Option.
<b>Changes to Dialysis Component reporting:</b>	
<b>Analysis: Updated QIP Line Listing</b>	<p>The "Line Listing – CMS ESRD QIP" report has been modified to display one row for each month of the year for active locations, regardless of whether any data have been submitted.</p> <p>Previously, many users overlooked missed months of dialysis event reporting because rows for missed months were omitted from the CMS ESRD QIP report. Now, group and facility users will see one row for each month of the year (up to the current month), per active location. As the QIP requires 12 months of reporting per year, these new rows will indicate that minimum reporting requirements have not been met, prompting follow up.</p>
<b>Analysis: Addition of the OID Variable to all Dialysis Reports ("Output Options")</b>	<p>The Object Identifier (OID) is a unique identifier for facilities that electronically submit data using Clinical Document Architecture (CDA). It has been added to the "Available Variables" list in all Analysis reports.</p> <p>Users preparing to participate in CDA enter the OID on the Facility Information screen of NHSN. After entering the OID in NHSN, users should generate new datasets before the "OID of Facility" column will populate.</p> <p>To add this variable to a report, in Analysis Output Options, select "Modify" next to the desired report. Scroll to the bottom of the Modify screen and select "Modify Variables To Display By Clicking: Modify List." Select the "OID" variable from the "Available Variables" column and move it to the "Selected Variables" column and "Run" the report.</p>
<b>Analysis: Addition of a New Prevent Process Measures (PPM) Line Listing</b>	The new "Line Listing – All Prevention Process Measures" is available to both facility and group users. This report is located under Analysis >> Output Options >> Prevention Process Measures. Each row in the table displays a month of Prevention Process Measures data, including the successful observations and total observations for each of the six measures.

<p><b>Analysis: Addition of New Survey Line Listings</b></p>	<p>Three new survey line listings have been added to Analysis Output Options to separate Outpatient Dialysis Center Practices Survey data by year. This will help prevent errors by keeping distinct survey versions from being analyzed together. The new reports include:</p> <ol style="list-style-type: none"> <li>1. Line Listing - Dialysis Practices Survey v. 8.3 (for 2015)</li> <li>2. Line Listing - Dialysis Practices Survey v. 8.1 (for 2014)</li> <li>3. Line Listing - Dialysis Practices Survey v. 7.1 (for 2013)</li> </ol> <p>These line listings are located under Analysis &gt;&gt; Output Options &gt;&gt; Advanced &gt;&gt; Facility-level Data &gt;&gt; CDC Defined Output. In most cases, survey version and survey year will correspond as shown, but in cases where the survey was started prematurely, it will be included in the line listing according to the appropriate survey version.</p>
<p><b>Custom Reporting: Addition of a New Custom Event Form</b></p>	<p>Facilities looking to expand their surveillance beyond the NHSN Protocols can use custom reporting options to maintain those data securely in NHSN. Users now have two custom event forms: the preexisting “CUSDIAL” form has been updated to include some new fields to further improve its utility. In addition, a new Custom Dialysis Event form, “CUSDE,” has been added. This new custom form is very similar to the Dialysis Event form and is designed to allow users to track all dialysis events, including those that occur in excess of the 21 day rule, without over-reporting in the Dialysis Event Surveillance module.</p> <p>Facilities interested in using this custom option must set it up in advance. To create a new custom form, users should select Facility &gt;&gt; Customize Forms on the NHSN navigation menu. When the “Custom Options” screen appears, the user should select “Custom – DE – Event” from the “Form Type” dropdown menu and fill out the remaining fields (e.g., Form, Description, and Status) by following the instructions on the screen. Once this set-up step is complete, custom data can be added via the “Add Event” screen, by selecting the new custom event from the “Event Type” drop down menu.</p> <p><b>**NOTE:</b> The title of the new custom form will appear in the “Event Type” dropdown menu with the “Form” and “– Description” assigned by the user during set-up.</p> <p>Custom data are for the facility’s internal surveillance purposes and are not shared with CMS.</p>

### Changes to the Healthcare Personnel Safety Component:

<p><b>Healthcare Personnel Influenza Vaccination Summary Reporting for Inpatient Psychiatric Facilities</b></p>	<p>Free-standing inpatient psychiatric facilities and inpatient psychiatric units within an acute care hospital will now be able to enter their healthcare personnel influenza vaccination summary data for the 2015-2016 influenza season when those data are complete at the conclusion of the 2015-2016 influenza season. These facilities and units can also view their healthcare personnel influenza vaccination summary data reports that will be sent to CMS by using the analysis and reporting function in NHSN.</p> <p>Training materials on reporting healthcare personnel influenza vaccination summary for inpatient psychiatric facilities can be accessed here: <a href="http://www.cdc.gov/nhsn/ipfs/vaccination/index.html">http://www.cdc.gov/nhsn/ipfs/vaccination/index.html</a>.</p>
<p><b>Healthcare Personnel Influenza Vaccination Summary Reporting for Outpatient Dialysis Facilities</b></p>	<p>Outpatient dialysis facilities will now be able to enter their healthcare personnel influenza vaccination summary data for the 2015-2016 influenza season when those data are complete at the conclusion of the 2015-2016 influenza season. These facilities can also view their healthcare personnel influenza vaccination summary data reports that will be sent to CMS by using the analysis and reporting function in NHSN.</p> <p>Training materials on reporting healthcare personnel influenza vaccination summary for outpatient dialysis facilities can be accessed here: <a href="http://www.cdc.gov/nhsn/dialysis/hcp-vaccination/index.html">http://www.cdc.gov/nhsn/dialysis/hcp-vaccination/index.html</a>.</p>

### Changes to the Biovigilance Component:

<p><b>Hemovigilance Module Incident Form - Question removed</b></p>	<p>The conditional question regarding root cause analysis results on the Incident form has been removed. The required question regarding root cause analysis will remain.</p>
<p><b>ISBT Blood Product Codes - Updated list</b></p>	<p>ISBT blood product codes have been updated in NHSN.</p>

### Changes impacting facilities reporting via Clinical Document Architecture (CDA):

<p><b>New Drugs Added to AU Option</b></p>	<p>NHSN will now accept data for three newly FDA-approved antimicrobials: Ceftazidime/Avibactam, Isavuconazonium and Peramivir. The AU Option CDA will still be based on the R6 Implementation Guide.</p>
<p><b>ICU/Other, SCA, NICU &amp; LabID Denominators transitioning to a</b></p>	<p>The following CDA versions are transitioning to be based on the R2_D2.1 Implementation Guide. The new CDA versions will contain the new fields that have been added to the User Interface for the denominator records.</p>

**newer version of the  
Implementation Guide**

- Denominators for Intensive Care Units (ICU)/Other Locations (not NICU nor SCA)
  - Summaries for **dates =< 2014** MUST use the **R5** version of the IG
  - Summaries for **dates = 2015** MAY use the **R5 or R2-D2.1** version of the IG
  - (coming in 2016) Summaries for **dates => 2016** MUST use the **R2-D2.1** version of the IG
  
- Denominators for Neonatal Intensive Care Units (NICU)
  - Summaries for **dates =< 2014** MUST use the **R5** version of the IG
  - Summaries for **dates = 2015** MAY use the **R5 or R2-D2.1** version of the IG
  - (coming in 2016) Summaries for **dates => 2016** MUST use the **R2-D2.1** version of the IG
  
- Denominators for Specialty Care Areas (SCA)
  - Summaries for **dates =< 2014** MUST use the **R5** version of the IG
  - Summaries for **dates = 2015** MAY use the **R5 or R2-D2.1** version of the IG
  - (coming in 2016) Summaries for **dates => 2016** MUST use the **R2-D2.1** version of the IG
  
- Denominators for LabID 'MDRO and CDI Prevention Process and Outcome Measures Monthly Monitoring' (aka: LabID Denominator or POM)
  - Summaries for **dates =< 2014** MUST use the **R7** version of the IG
  - Summaries for **dates = 2015** MAY use the **R7 or R2-D2.1** version of the IG
  - (coming in 2016) Summaries for **dates => 2016** MUST use the **R2-D2.1** version of the IG
  - **NOTE:** The R2\_D2.1 update will include the fields for the MDRO Patient Days, MDRO Admission, and MDRO Encounters that were added to the user interface in NHSN Release 8.3. When the R2\_D2.1 version of the MDRO POM is implemented by vendors, these records will no longer be sent to the incomplete list due to missing required data elements.