

NHSN v9.3 (April 27, 2019) Release Notes

Changes to All Components

Enrollment and Facility Information	Facilities now have the functionality to self-identify as “Indian Health Services” (IHS).
Annual Surveys	The <i>.pdf</i> version of updated Annual Surveys is available in the application. For NHSN release 9.2 (December 2018), the final versions were not ready for publication in the application. This update provides synchronicity between the paper form and the application.

Changes to Patient Safety Component

SSI Event	There is a new business rule (BS) that displays a validation error message if a user tries to submit more than 1 SSI event linked to a single procedure. The only exception to this BS is if the procedure category has both primary and secondary incision sites available for SSI attribution (ex, CBGB). For procedure categories with both primary and secondary incision sites, one, (1), secondary incision site SSI (SIS or DIS) event and one, (1), primary incision site SSI event can be linked to the same procedure.
Antimicrobial Use and Resistance	The error messages for duplicate AR Option Events were updated and clarified.
Device Associated Monthly Denominator (summary)	<p>Added Soft Alerts to Device-Associated Denominators (summaries) – The data quality analysts have indicated that many facilities are reporting the same number of “patient days” as “device days”; we have added a soft alert to the denominator summary forms that prompts the user to review the entries and revise as necessary.</p> <ol style="list-style-type: none"> 1. For SCA/ONC and ICU/Other denominator forms, the soft alert will be displayed if the same number is reported for “<i>Patient Days</i>” as “<i>Device Days</i>” 2. For the NICU denominator form, the soft alert will be displayed if any of the “<i>Central Line Days</i>”, “<i>Urinary Catheter Days</i>”, or “<i>Ventilator Days</i>” reported number is the same as “<i>Total Patient Days</i>” reported number

Analysis & Reporting Changes to Patient Safety Component

Rate Tables	<p>CMS MRSA and CDI LabID PCHQR Rate Table Report in the Analysis and Reporting module supports CR 1525 from NHSN release 9.2 (December 2018); because there were some new requirements, the modifications to the report could not be implemented until CMS released the final rules.</p> <p>Created a new prevalence rate in the <i>C.difficile</i> and MRSA Rate Tables for acute care and critical access hospitals. This is a combined and de-duplicated rate including data from all ED and 24 hour observation locations. These new prevalence rates (MRSA_EDOBSprevRate and CDIF_EDOBSprevRate) are available beginning with 2015 data and going forward. In addition, new indicator variables are available on the MRSA and CDI Line Lists to indicate which LabID events are counted in the</p>
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	numerator of these prevalence rates (MRSA_EDOBSprevCount, CDIF_EDOBSprevCount).
SSI SIR Reports	Created a new CMS Complex 30-Day SSI PCHQR SIR report that contains information beginning with 2018 data and going forward.
Quality Reports	<p>Added Ending Date to BS2 VAE and MRSA LTCHQR Reports. CMS finalized the rules for these programs; as of 2018 Q3 these specific HAIs will not be reported to CMS. Long Term Care Hospitals (i.e., LTACHs) will no longer be required to report VAE and MRSA Blood LabID data as part of the LTCHQR Program, beginning with data submissions for the FY2020 Program Year Ending dates have been added to the following reports; and we also add a footnote to these reports that indicates the time period limitation:</p> <ul style="list-style-type: none"> ○ SIR – MRSA Blood FacwideIN LabID Data for LTCHQR ○ SIR – VAE Data for LTCHQR <p>Added Ending Date to BS2 MRSA IRFQR Reports. As above Inpatient Rehab Facilities (IRFs) will no longer be required to report MRSA Blood LabID data as part of the IRFQR Program, beginning with data submissions for the FY2020 Program Year. The affected reports are as follows; and we also added a footnote to the report that indicates the time period limitation:</p> <ul style="list-style-type: none"> ○ SIR – MRSA Blood FacwideIN LabID Data for IRFQR
Participation Alerts (Group Users only)	Various improvements have been made to the process that generates the analysis dataset used to produce the “Line Listing – Participation Alerts” report. The analysis dataset and the report have been re-enabled in this release.

Changes to Biovigilance Component

Adverse Reaction Event	<p>For the Medical History section of the Adverse Event, the most frequently used ICD-10 codes will now display first. This change affects fields for Admitting Diagnosis, Indication for a Transfusion, & Comorbid Conditions.</p> <p>For Adverse Reaction = “TA-GVHD - Transfusion associated graft vs. host disease” event we disabled but are continuing to display the “symptomatic treatment only”, a “check box”, under the Severity sub-section.</p>
Analysis and Reporting	<p>For NHSN Release 9.2 (December 2018) there were some updates to the Adverse Event that were not reflected in A&R. This CR provides synchronicity between the NHSN application intake screens and the associated output for Analysis and Reporting.</p> <ul style="list-style-type: none"> • Associated 9.2 Artifact - Updated the Adverse Reaction Event business rules for INF Case Definition and updated the following sections. The updates are applicable to Adverse Reactions with an event date of 1/1/2019 and going forward. <ol style="list-style-type: none"> 1. Patient Information 2. Patient Treatment 3. Results <p>Note: the supporting Analysis and Reporting report(s) were not updated in time for the 9.2 release.</p>



Changes to Healthcare Personnel Safety Component

Analysis and Reporting specific to Inpatient Psychiatric Facilities (IPF)	Suspension of the Healthcare Personnel Influenza Vaccination Measure for Inpatient Psychiatric Facilities – the CMS Line Listing for IPFs report continues to be available; the footnotes have been updated to indicate that CMS no longer requires that the data be reported beginning with the 2018/2019 flu season.
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Changes to LTCF Component

Import/Export Functionality	LTCs will now be able to import resident demographic data using a comma separated file. In addition, facilities who are planning to withdraw from NHSN will be able to export facility data to a comma separated file or to other NHSN approved formats.
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Changes to Dialysis Component

CDA – Dialysis Monthly Summary	We updated the CDA for version R3D3 of the Dialysis Monthly Summary to allow “Report No Events”. The functionality is available for both manual CDA import and Direct CDA submissions.
Analysis and Reporting	<ol style="list-style-type: none"> 1. We updated dialysis aggregate data from 2016 to 2017 data for dialysis rate tables and run charts. 2. We created a new TAP report type and changed report icon for Excess Infections. A new Excess Infections report type allows for modifications to the TAP report without disturbing functionality used by other NHSN components. 3. In 2018, the Dialysis Component began collecting data using an Acute Kidney Injury (AKI) location. Now that some data have been collected, we are including data reported to that AKI location in dialysis rate tables and run charts so facilities and groups can review AKI-specific rates for the various dialysis event measures.

Changes to Outpatient Procedure Component

Analysis and Reporting	Originally scheduled for release 9.0, the following reports are now available: <ol style="list-style-type: none"> 1. SIR – Adult All Outpatient SSI Data by Procedure 2. SIR – Adult All Outpatient SSI Data by Surgeon
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Changes to Clinical Document Architecture (CDA)

Antimicrobial Use and Resistance	For events that fail the import process, the changes now show a more appropriate error message during the validation checks so that users (vendors) will see a more clear error message.
CDA - Dialysis Monthly Summary	We updated the CDA for version R3D3 of the Dialysis Monthly Summary to allow "Report No Events". The functionality is available for both manual CDA import and Direct CDA submissions.