

Healthcare – Associated Infection (HAI) Module

Laboratory-identified Event (LabID) Module for Long-Term

Care Facilities (LTCFs): Clostridioides difficile Infection (CDI)

Overview

Contractor for the Division of Healthcare Quality Promotion, Centers for Disease Control and Prevention, Surveillance Branch

June 2025

Learning Objectives

- Demonstrate an understanding of Laboratory-identified (LabID) Event surveillance and reporting requirements for NHSN.
- Explain *Clostridioides difficile* infection (CDI) definitions and protocols.
- Define required monthly summary data for CDI reporting.
- Describe how to manually enter CDI LabID event data and monthly summary data into the NHSN application.

Surveillance and Reporting Rules for LabID Event Module

- Surveillance must occur for **all** resident care locations in the facility—referred to as facility-wide inpatient or **FacWideIN**.
- Must Submit ALL MDRO LabID events for **all Specimen sources**.

AND

- Specimens collected during a brief outpatient (OP) visit to an emergency department (ED) or clinic/physician's office **if**:
 - The resident returns to your facility on same calendar day of the OP visit or the following calendar day.
 - **Note:** There should be **no** change in **current** admission date.

Surveillance and Reporting Rules for LabID Event Module

- When submitting a LabID event for a specimen collected in an OP setting, the *Resident Care Location* and *Primary Resident Service Type* should reflect the resident's primary LTCF location and service type on the day of the outpatient visit.
- Do **NOT** report a LabID event for a specimen collected prior to the resident's admission to your facility.
- Results from positive isolates collected as part of active surveillance are **excluded**.
- There is not an option to perform surveillance on select or individual units/pods within the facility.

Monthly Participation Requirements

- A **NHSN Monthly Reporting Plan** must be completed for each calendar month in which a facility plans to enter data into the NHSN user interface.
 - For MDRO surveillance, one or more MDROs must be selected from the Specific Organism Type drop-down menu.
 - LabID event surveillance must occur for the entire calendar month for the selected events/organisms.
- **Submit ALL MDRO LabID events for all specimen sources to NHSN (numerator data).**
- **Summary Data** – For each participating month, the facility must report the required denominator data.
- **Resolve “Alerts,”** if applicable.

Reporting Options Available in LabID Event Module

I. *Clostridioides difficile* infection (CDI; *C. difficile*)

II. Multi-drug Resistant Organism (MDRO)

- A facility can choose to monitor one or more of the following organisms:
 - *Staphylococcus aureus*, methicillin-resistant (MRSA)
 - *Staphylococcus aureus*, methicillin-susceptible (MSSA) **with** MRSA surveillance
 - Vancomycin-Resistant *Enterococcus* spp. (VRE)
 - Cephalosporin-Resistant *Klebsiella* spp. (CephR-*Klebsiella*)
 - Carbapenem-Resistant *Enterobacteriaceae* (CRE)
 - *Klebsiella* spp. (CRE-*Klebsiella*)
 - *E coli*. (CRE-*E coli*)
 - *Enterobacter* (CRE-*Enterobacter*)
 - Multidrug-Resistant *Acinetobacter* spp. (MDR-*Acinetobacter*)

Clostridioides difficile infection (CDI) Key Terms and Definitions

Common Terms and Definitions used in LabID Event Module

- ***C. difficile* positive laboratory assay:** (1) An unformed/loose stool that tests positive for *C. difficile* toxin A and/or B, (includes molecular assays [PCR] and/or toxin assays); OR (2) A toxin-producing *C. difficile* organism detected in an unformed/loose stool by culture or other laboratory means.
- **CDI Laboratory-identified (LabID) Event:** *C. difficile* positive laboratory assay collected while resident is under the care of the reporting LTCF. Includes residents physically housed and cared for in the reporting LTCF and residents being cared for during a brief outpatient visit in which the resident returns to the reporting LTCF on the day of the OP visit or the following calendar day.
- **Facility-wide Inpatient (FacWideIN):** All resident care locations in the facility.
- **LabID Event Date:** Specimen collection date.

What specimens should NOT be submitted to NHSN as a CDI LabID Event?

- Negative *C. difficile* laboratory assay lab results.
- Specimens collected during an admission in another healthcare facility.

Categorization of CDI LabID Events

- NHSN will analyze data that have been entered into the application.
- Categorization applied by NHSN to CDI LabID events are based on the specimen collection date of the most recent CDI LabID event:
 - Duplicate CDI LabID event
 - Incident CDI LabID event
 - Recurrent CDI LabID event

Incident and Recurrent CDI LabID Events are further categorized based on:

- 1. Reported date of current admission to facility,**
- 2. Reported specimen collection date (also referred to as date of event),**
- 3. Reported date of last transfer from acute care to the reporting LTCF.**

- Community-onset (CO) LabID events: Date specimen collected 3 calendar days or less after current admission to the facility (i.e., days 1, 2, or 3 of admission).
- Long-term Care Facility-onset (LO) LabID event: Date specimen collected greater than 3 calendar days after current admission date (i.e., on or after day 4).
- LO Events are further sub-classified:
 - **Acute Care Transfer-Long-term Care Facility-onset (ACT-LO):** LTCF-onset (LO) LabID event with a specimen collection date of **4 weeks or less** following date of last transfer from an acute care facility to the LTCF.

Categorization of CDI LabID Events is Dependent on Accurate Event Information

Resident type *: LS - Long Stay

Date of First Admission to Facility *: 01/28/2024  10

Date of Current Admission to Facility *: 01/08/2025  10

Event Information

Event Type *: LABID - Laboratory-identified MDRO or CDI Event 

Specific Organism Type *: CDIF - C. difficile 

Specimen Body Site/System *: DIGEST - Digestive System 

Specimen Source *: STOOL - Stool specimen 

Resident Care Location *: DEMENTIA - LOCKED UNIT 

Primary Resident Service Type *: GENNUR - Long-term general nursing 

Has resident been transferred from an acute care facility in the past 4 weeks *? Y - Yes 

If Yes, date of last transfer from acute care to your facility *: 01/08/2025  10

NHSN will Further Categorize CDI LabID Events Based on: date specimen collected and specimen collection date of the most recent CDI LabID Event entered into NHSN

- Duplicate CDI LabID event: Any CDI LabID event submitted for the same resident following a previous CDI LabID event within the past **2 weeks**.
- Incident CDI LabID Event: Either the first CDI LabID event ever submitted for an individual resident in the facility, or a subsequent CDI LabID event submitted **more than 56 days (8 weeks)** after the most recent CDI LabID event reported for the individual resident.
- Recurrent CDI LabID Event: Any CDI LabID Event entered more than 14 days (2 weeks) and less than 57 days (**8 weeks**) after the most recent CDI LabID event submitted to NHSN for an individual resident.

National Healthcare Safety Network
Line Listing - All CDI LabID Events
As of: January 25, 2021 at 9:34 AM
Date Range: All LTCLABID_EVENTS

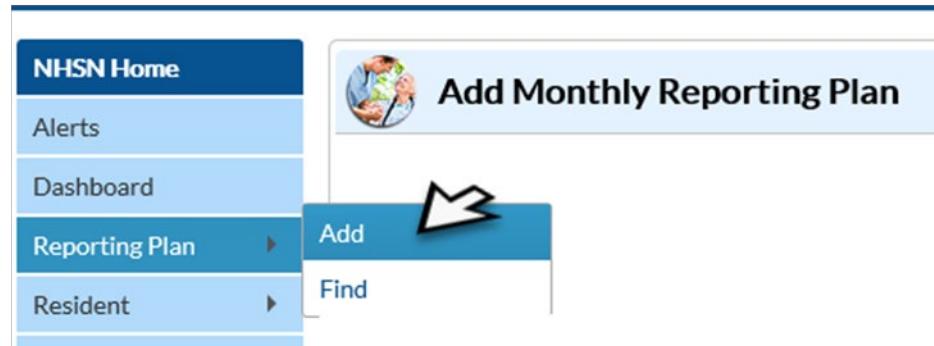
Facility Org ID	Resident ID	Date of Current Admission	Event ID	Event Date	Specific Organism	Specimen Source	Location	Transferred from Acute Care Facility in Past 4 Weeks?	CDI Assay	Onset	Onset Description	Days: Admit to Event	LabID Duplicate?
11106	RP34567	06/01/2019	2240	11/04/2019	CDIF	STOOL	DEM	N	DUPPLICATE	LO	LO - Long-term Care Facility-Onset	157	Y
11106	2222	01/02/2019	2301	11/05/2019	CDIF	STOOL	GEN	N	DUPPLICATE	LO	LO - Long-term Care Facility-Onset	308	Y
11106	007894	09/03/2019	2288	11/05/2019	CDIF	STOOL	SKN	N	DUPPLICATE	LO	LO - Long-term Care Facility-Onset	64	Y
11106	007894	09/03/2019	2255	11/06/2019	CDIF	STOOL	100 EAST	Y	DUPPLICATE	LO	LO - Long-term Care Facility-Onset	65	Y
11106	007894	09/03/2019	2289	11/12/2019	CDIF	STOOL	SKN	N	DUPPLICATE	LO	LO - Long-term Care Facility-Onset	71	Y
11106	TST1	12/02/2019	2429	12/10/2019	CDIF	STOOL	BAR	N	INCIDENT	LO	LO - Long-term Care Facility-Onset	9	Y
11106	TST1	12/02/2019	2430	12/10/2019	CDIF	STOOL	BAR	N	DUPPLICATE	LO	LO - Long-term Care Facility-Onset	9	
11106	TST1	12/01/2019	2431	12/10/2019	CDIF	STOOL	BAR	N	DUPPLICATE	LO	LO - Long-term Care Facility-Onset	10	
11106	TEST3	12/02/2019	2427	12/12/2019	CDIF	STOOL	BAR	N	INCIDENT	LO	LO - Long-term Care Facility-Onset	11	
11106	TEST3	12/02/2019	2428	12/12/2019	CDIF	STOOL	BAR	N	DUPPLICATE	LO	LO - Long-term Care Facility-Onset	11	
11106	TEST2	12/02/2019	2425	12/25/2019	CDIF	STOOL	BAR	N	INCIDENT	LO	LO - Long-term Care Facility-Onset	24	
11106	TEST2	12/02/2019	2426	12/30/2019	CDIF	STOOL	BAR	N	DUPPLICATE	LO	LO - Long-term Care Facility-Onset	29	
11106	101005	01/20/2020	2485	01/21/2020	CDIF	STOOL	GEN	Y	INCIDENT	CO	CO - Community-Onset	2	
11106	NT123123	02/19/2020	2540	02/20/2020	CDIF	STOOL	HOSP	N	INCIDENT	CO	CO - Community-Onset	2	
11106	123456	03/07/2018	2656	08/12/2020	CDIF	STOOL	GEN	N	INCIDENT	LO	LO - Long-term Care Facility-Onset	890	

Let's Review!

Example: NHSN Classification of CDI Lab ID Events as Incident or Recurrent			
Resident ID	Current Admit Date	CDI Event Date (specimen collection date)	NHSN Categorization
1111	09/01/2024	09/02/2024	Incident
1111	09/01/2024	09/10/2024	Duplicate -no further categorization
1111	09/01/2024	09/25/2024	Recurrent
1111	09/01/2024	11/28/2024	Incident

**Submit CDI Monthly Reporting Plan (MRP) for
Every Month of Participation to NHSN**

Add Monthly Reporting Plan for CDI LabID Event Module Participation

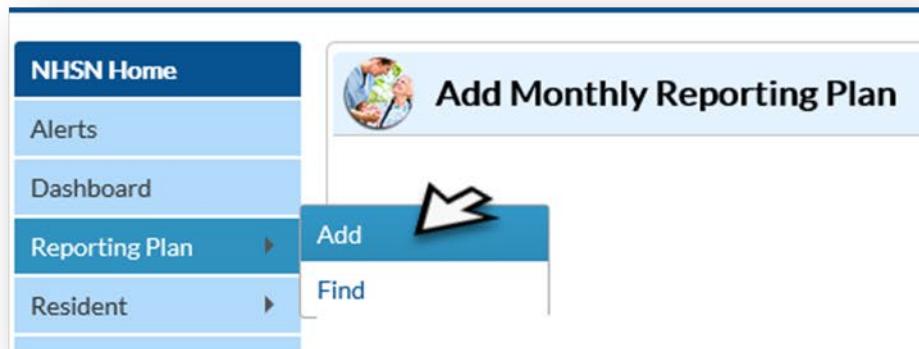


- Informs CDC-NHSN which module(s) and events a facility is following during a given month.
- A facility must enter a plan for every month in which surveillance and data submissions will occur.
- Plans may be entered for up to one year in advance.

- Facility-wide Inpatient (FACWIDEIN) is default location
- Select CDIF - C. difficile as the - Specific Organism Type
- LabID Event All Specimens is default

A screenshot of the LabID Event Module interface. At the top is a purple header bar with the text 'LabID Event Module'. Below it is a table with three rows. The first row has a yellow background and contains 'Facility-wide Inpatient (FacWIDEIn)' in a dropdown menu, 'CDIF - C. difficile' in a dropdown menu, and a checked checkbox for 'Lab ID Event All Specimens'. The second row has a white background and contains 'Facility-wide Inpatient (FacWIDEIn)' in a dropdown menu, 'MRSA - MRSA' in a dropdown menu, and a checked checkbox for 'Lab ID Event All Specimens'. At the bottom of the table are three buttons: 'Add Row', 'Clear All Rows', and 'Copy from Previous Month'. A large, semi-transparent purple callout bubble with a white border and white text is positioned at the bottom right of the table. The text inside the bubble reads 'Click to add additional organisms'.

Add Monthly Reporting Plan for CDI LabID Event Module Participation



Add Monthly Reporting Plan

Mandatory fields marked with *

Facility ID *: Test TM3033 (ID 71093) ▾

Month *: ▾

Year *: ▾

No Long Term Care Facility Component Modules Followed this Month

- Red asterisk = required to save page
- Click **Add Row** to add additional event options for the LabID Event Module.
- Click **Save**.

HAI Module

LabID Event Module

	Locations	Specific Organism Type	Lab ID Event All Specimens
<input type="button" value="Delete"/>	Facility-wide Inpatient (FacWIDEIn)	CDIF - C. difficile	<input checked="" type="checkbox"/>

Submit CDI Events to NHSN

Reporting CDI LabID Event:

Customizable NHSN LabID Event form available for data collection

- Optional form
- Allows users to collect required information prior to submitting NHSN event
- Use one form for each LabID event
- Form may be customized for each facility
- Use accompanying *Table of Instructions* for helpful guidance



Form Approved
OMB No. 0920-0666
Exp. Date: 12/31/2027
www.cdc.gov/nhsn

Laboratory-identified MDRO or CDI Event for LTCF

*Required for saving		Event #:
*Facility ID:		
*Resident ID:		
Medicare number (or comparable railroad insurance number):		
Resident Name, Last:	First:	Middle:
*Sex: <input type="checkbox"/> F <input type="checkbox"/> M	*Date of Birth: <input type="text"/> / <input type="text"/> / <input type="text"/>	
*Ethnicity (specify): <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino <input type="checkbox"/> Declined to respond <input type="checkbox"/> Unknown	*Race (specify): <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Middle Eastern or North African <input type="checkbox"/> Native Hawaiian/Other Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Declined to respond <input type="checkbox"/> Unknown	
*Date of First Admission to Facility: <input type="text"/> / <input type="text"/> / <input type="text"/>		*Date of Current Admission to Facility: <input type="text"/> / <input type="text"/> / <input type="text"/>
Event Details		
*Event Type: LabID	*Date Specimen Collected: <input type="text"/> / <input type="text"/> / <input type="text"/>	
*Specific Organism Type: (check one)		
<input type="checkbox"/> MRSA <input type="checkbox"/> MSSA <input type="checkbox"/> VRE <input type="checkbox"/> C. difficile <input type="checkbox"/> CephR-Klebsiella		
<input type="checkbox"/> CRE-E. coli <input type="checkbox"/> CRE-Enterobacter <input type="checkbox"/> CRE-Klebsiella <input type="checkbox"/> MDR-Acinetobacter		
*Specimen Body Site/System:		*Specimen Source:
*Resident Care Location:		
*Primary Resident Service Type: (check one)		
<input type="checkbox"/> Long-term general nursing <input type="checkbox"/> Long-term dementia <input type="checkbox"/> Long-term psychiatric		
<input type="checkbox"/> Skilled nursing/Short-term rehab (subacute) <input type="checkbox"/> Ventilator <input type="checkbox"/> Bariatric <input type="checkbox"/> Hospice/Palliative		
*Has resident been transferred from an acute care facility in the past 4 weeks?		Yes <input type="checkbox"/> No <input type="checkbox"/>
If Yes, date of last transfer from acute care to your facility: <input type="text"/> / <input type="text"/> / <input type="text"/>		
If Yes, was the resident on antibiotic therapy for this specific organism type at the time of transfer to your facility? Yes <input type="checkbox"/> No <input type="checkbox"/>		

**Laboratory-identified MDRO or CDI Event for
LTCF Form 57.138 (cdc.gov)**

Submitting a CDI LabID Event to NHSN

NHSN - National Healthcare Safety Network

NHSN Home

Alerts

Dashboard

Reporting Plan

Resident

Staff

Event

Summary Data

Respiratory Pathogens and Vaccination

RPV Summary

Import/Export

Surveys

Analysis

Users

Facility

Groups

Add Event

Mandatory fields marked with *****
Fields required for record completion marked with ******

Resident Information

Add  **Find** **Incomplete**

Facility ID *****:

Resident ID *****:

Last Name:

Middle Name:

Sex *****:

Ethnicity *****:

Race *****: American Indian/Alaska Native Asian
 Black or African American Native Hawaiian/Other Pacific Islander
 White Middle Eastern or North African
 Declined to respond Unknown

Medicare number (or comparable railroad insurance number):

First Name:

Date of Birth *****:  20

Resident type *****:

Date of First Admission to Facility *****:  20

Date of Current Admission to Facility *****:  20

A red arrow points from the 'Add' button on the left to the 'Resident ID *' field on the right.

Submitting a CDI LabID Event to NHSN: *Resident Type*

- Auto-populated by NHSN as short stay or long-stay after user enters the Date of First Admission to the Facility and the Date Specimen Collected (specifically for LabID events).

NHSN - National Healthcare Safety Network

NHSN Home

- Alerts
- Dashboard
- Reporting Plan
- Resident
- Staff
- Event
- Summary Data
- Respiratory Pathogens and Vaccination
- RPV Summary
- Import/Export
- Surveys
- Analysis
- Cheat Sheets
- Logout

Add Event

Mandatory fields marked with *

Fields required for record completion marked with **

Resident type *:

Date of First Admission to Facility *:

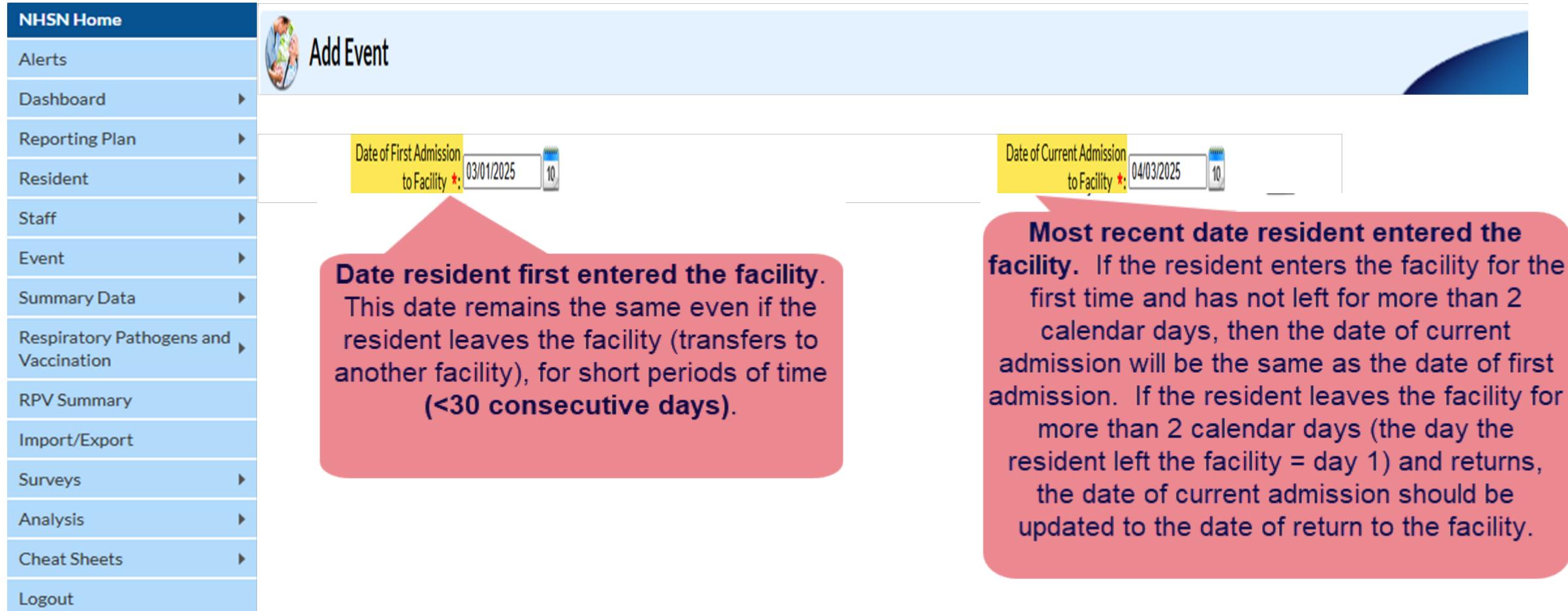
Event Information

SS-Short-stay: On the date of specimen collection (event date), the resident has been in facility for 100 days or less from the date of first admission

LS-Long stay: On the date of specimen collection (event date), the resident has been in facility for more than 100 days from the date of first admission

Submitting a CDI LabID Event to NHSN:

Date of First and Current Admission to Facility



The image shows a screenshot of the NHSN (National Healthcare Safety Network) Add Event page. On the left is a vertical navigation menu with links like NHSN Home, Alerts, Dashboard, Reporting Plan, Resident, Staff, Event, Summary Data, Respiratory Pathogens and Vaccination, RPV Summary, Import/Export, Surveys, Analysis, Cheat Sheets, and Logout. The main page title is "Add Event". Two date fields are highlighted with yellow boxes: "Date of First Admission to Facility" (03/01/2025) and "Date of Current Admission to Facility" (04/03/2025). A large red callout box points to the "Date of First Admission" field, explaining that it is the date the resident first entered the facility, even if they leave and return. Another red callout box points to the "Date of Current Admission" field, explaining that it is the most recent date the resident entered the facility, even if they leave for more than 2 calendar days and return.

Date of First Admission to Facility *: 03/01/2025

Date of Current Admission to Facility *: 04/03/2025

Date resident first entered the facility.
This date remains the same even if the resident leaves the facility (transfers to another facility), for short periods of time (<30 consecutive days).

Most recent date resident entered the facility. If the resident enters the facility for the first time and has not left for more than 2 calendar days, then the date of current admission will be the same as the date of first admission. If the resident leaves the facility for more than 2 calendar days (the day the resident left the facility = day 1) and returns, the date of current admission should be updated to the date of return to the facility.

Submitting a CDI LabID Event to NHSN:

Event Type and Date Specimen Collected

Resident type *:

Date of First Admission to Facility *: 05/28/2025

Event Information

Event Type *: LABID - Laboratory-identified MDRO or CDI Event

Date Specimen Collected cannot occur before Date of Current Admission to Facility

Date of Current Admission to Facility *: 05/28/2025

Date Specimen Collected *:

Also referred to as *Date of Event*

Submitting a CDI LabID Event to NHSN: *Specific Organism Type*

Event Information

Event Type *: LABID - Laboratory-identified MDRO or CDI Event ▾

Specific Organism Type *:

- ACINE - MDR-Acinetobacter
- CDIF - C. difficile
- CEPHRKLEB - CephR-Klebsiella
- CREECOLI - CRE-Ecoli
- CREENTERO - CRE-Enterobacter
- CREKLEB - CRE-Klebsiella
- MRSA - MRSA
- MSSA - MSSA
- VRE - VRE

Submitting a CDI LabID Event to NHSN: *Specific Organism Type: CDIF-C. difficile*

Event Information

Event Type *: LABID - Laboratory-identified MDRO or CDI Event

Specific Organism Type *: CDIF - C. difficile

Select CDIF-C. difficile to auto-populate specimen body site and specimen

Specific Organism Type *: CDIF - C. difficile

Specimen Body Site/System *: DIGEST - Digestive System

Specimen Source: *: STOOL - Stool specimen

Submitting a CDI LabID Event to NHSN: *Resident Care Location*

Event Information

Event Type *:	LABI	Event
Specific Organism Type *:	1 D - DEMENTIA UNIT 1 SOUTH - GENERAL 100 EAST - DEMENTIA UNIT 1B - BARIATRIC UNIT	
Specimen Body Site/System *:	2 PSY - PSYCHIATRIC 2W - 2 WEST DEMENTIA	
Specimen Source *:	3 REHAB - SHORT TERM REHAB	
Resident Care Location *:	4 GEN - GENERAL UNIT 5 HOS - HOSPICE UNIT DEMENTIA - LOCKED UNIT	

Select location of resident at time of specimen collection. Note: Resident care locations are set-up by the facility after facility enrollment

Resident care locations must be set up (mapped) in the NHSN application before reporting events since the event location will be selected during event reporting.



Submitting a CDI LabID Event to NHSN: Primary Service Type

Event Information

Event Type *: LABID - Laboratory-identified MDRO or CDI Event

Specific Organism Type *: CDIF - C. difficile

Specimen Body Site/System *: DIGEST - Digestive System

Specimen Source: *: BARI - Bariatric

Resident Care Location *: HOSP - Hospice/Palliative

Primary Resident Service Type *: DEMENT - Long-term dementia

GENNUR - Long-term general nursing

PSYCH - Long-term psychiatric

SKNUR - Skilled nursing/short term rehab

VENT - Ventilator

Select the NHSN Primary Resident Service Type at time of specimen collection

Submitting a CDI LabID Event to NHSN:

Transfer from Acute Care Facility

Event Information

Spec

Specimen

Resi

Primary Resident Service

Was the resident directly admitted to your facility from an acute care facility in past 4 weeks? If 'YES' is selected, additional data must be entered

ENNR - Long-term general nursing

Has resident been transferred from an acute care facility in the past 4 weeks *? Y - Yes

Submitting a CDI LabID Event to NHSN: *Transfer from Acute Care Facility, continued*

Event Information

Event Type *: LABID - Laboratory-identified MD

Specific Organism Type *: CDIF - C. difficile

Specimen Body Site/System *: DIGEST - Digestive System

Specimen Source: *: STOOL - Stool specimen

Resident Care Location *: 4 GEN - GENERAL UNIT

Primary Resident Service Type *: GENNUR - Long-term general nursing

Has resident been transferred from an acute care facility in the past 4 weeks *? Y - Yes

This answer to this question will be used by NHSN to determine if the LabID event is associated with an acute care transfer

If Yes, date of last transfer from acute care to your facility *:

 29

Submitting a CDI LabID Event to NHSN: *Transfer from Acute Care Facility, continued*

Event Information

Event Type *: LABID - Laboratory-identified MDRO or CDI Event

Date Specimen Collected *: 01/17/2025

Specific Organism Type *: CDIF - C. difficile

Specimen Body Site/System *: DIGEST - Digestive System

Specimen Source *: STOOL - Stool specimen

Resident Care Location *: DEMENTIA - LOCKED UNIT

Primary Resident Service Type *: GENNUR - Long-term general nursing

Has resident been transferred from an acute care facility in the past 4 weeks *? Y - Yes

If Yes, date of last transfer from acute care to your facility *: 01/08/2025

If Yes, was the resident on antibiotic therapy for this specific organism type at the time of transfer to your facility *?

Informs burden of CDI coming into facility

If YES to this question, this resident should also be included in the monthly summary count for. *Number of Admissions on C. diff Treatment*

Common Medications Used to Treat *C. difficile*

If Yes, was the resident on antibiotic therapy for this specific organism type at the time of transfer to your facility *? Y - Yes

If resident is admitted on treatment for CDI, you may see one of the below medications in the admission records:

- Vancomycin
- Fidaxomicin
- Metronidazole (Flagyl)

Submitting a CDI LabID Event to NHSN: *Documented Evidence of Previous infection.....*

Event Information

Event Type *: LABID - Laboratory-identified MDRO or CDI Event

Date Specimen Collected *: 05/30/2025 11

Specific Organism Type *: CDIF - C. difficile

Specimen Body Site/System *: DIGEST - Digestive System

Specimen Source *: STOOL - Stool specimen

Resident Care Location *: 100 EAST - DEMENTIA UNIT

Primary Resident Service Type *: DEMENT - Long-term dementia

Has resident been transferred from an acute care facility in the past 4 weeks *? N - No

Documented evidence of previous infection or colonization with this specific organism type from a previously reported LabID Event in any prior month? Y - Yes

Auto-populated by NHSN.
Non-editable by users

Submitting a CDI LabID Event to NHSN Optional: *Custom Fields and Comments*

Custom Fields [Help](#)

PRIOR HX: <input type="checkbox"/> YES	FLUOROQUINOLONE: <input type="checkbox"/> YES
CEPHALOSPORINS: <input type="checkbox"/>	CLINDAMYCIN: <input type="checkbox"/>

Comments

TRANSFER FROM GENERAL MEMORIAL. RECENT TREATMENT FOR CHRONIC UTI.

Optional Custom fields provide facilities option to document additional variables of interest. Must be set-up before reporting event

Comments are free text

Resident InformationFacility ID *: Resident ID *: 777777Social Security #: 888-88-8888Last Name: DOOMedicare number (or comparable railroad insurance number): Middle Name: First Name: SCOOBYSex *: M - MaleDate of Birth *: 04/23/1940Ethnicity *: UNK - UnknownRace *: American Indian/Alaska Native Asian Black or African American Native Hawaiian/Other Pacific Islander White Middle Eastern or North African Declined to respond Unknown

Resident type *: LS - Long Stay

Date of First Admission to Facility *: 01/01/2024Date of Current Admission to Facility *: 01/08/2025**Event Information**Event Type *: LABID - Laboratory-identified MDRO or CDI EventDate Specimen Collected *: 05/24/2025Specific Organism Type *: CDIF - C. difficileSpecimen Body Site/System *: DIGEST - Digestive SystemSpecimen Source *: STOOL - Stool specimenResident Care Location *: 1D - DEMENTIA UNITPrimary Resident Service Type *: DEMENT - Long-term dementiaHas resident been transferred from an acute care facility in the past 4 weeks *? N - No

Documented evidence of previous infection or colonization with this specific organism type from a previously reported LabID Event in any prior month? Y - Yes

Custom Fields [Help](#)PRIOR HX: FLUOROQUINOLONE: CEPHALOSPORINS: CLINDAMYCIN: **Comments**

Event 110369 created successfully.



**Collect and Submit CDI Monthly Summary Data
to NHSN**

Monthly Summary Reporting for CDI (Denominator)

- Optional NHSN worksheet may be used to document daily counts for selected columns.
- Only the **monthly totals** should be entered into the NHSN application.

Page 1 of 1		**required for saving		*conditionally required based on monitoring selection in Monthly Reporting Plan			
Facility ID:	**Location Code:	**Month:	**Year:	*Number of admissions	*Number of admissions on C. diff treatment	*Number of C. diff treatment starts	
Date	**Number of residents	*Number of residents with a urinary catheter	*New antibiotic starts for UTI indication	*Number of urine cultures ordered			
1							
2							
3							
4							
27							
28							
29							
30							
31							
*Total							
	Resident-days	Urinary-catheter days	Total antibiotic starts for UTI indication	Total urine cultures ordered	Resident-admissions	Resident-admissions on C. diff treatment	*Number of C. diff treatment starts

Document daily Counts

Enter Monthly Totals in NHSN

Monthly Summary Requirements for CDI LabID Event Participation

- For each month of participation, the facility must report the following:
 - Resident Admissions
 - Resident Days
 - Number of Admissions on *C. diff* Treatment
 - Number of Residents Started on antibiotic Treatment for *C. difficile*
 - “Report No Events,” if applicable

MDRO & CDI LabID Event Reporting										
Location Code			Specific Organism Type							
			MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C. difficile	
Facility-wide Inpatient (FacWIDEIn)										
Resident Admissions: <input type="text"/> *										
Resident Days: <input type="text"/> *										
Number of Admissions on <i>C. diff</i> Treatment: <input type="text"/> *										
Number of residents started on antibiotic treatment for <i>C. diff</i> : <input type="text"/> *										
LabID Event (All specimens)			<input type="checkbox"/>							
Report No Events			<input type="checkbox"/>							
Custom Fields										

Submitting Monthly Summary Data in NHSN for CDI LabID Event Reporting

Resident Admissions: The total number of residents admitted to the LTCF during the selected calendar month. Includes new admissions and re-admissions.

Submitting Monthly Summary Data in NHSN for CDI LabID Event Reporting

Resident Days: To calculate resident days, for each day of the month, record the total number of residents in the facility. At the end of the month, add the daily counts and enter the total as Resident Days.

- Data may come from electronic medical record, if available.
- Users may also calculate based on facility occupancy.
 - 100 bed facility at 100% occupancy for June: $100 \text{ residents} \times 30 \text{ days} = 3,000 \text{ total resident days}$
 - 100 bed facility at 90% occupancy for June: $90 \text{ residents} \times 30 \text{ days} = 2,700 \text{ total resident days}$

Submitting Monthly Summary Data in NHSN for CDI LabID Event Reporting

Number of Admissions on C. diff Treatment:

- Informs burden of CDI coming into the facility (CDI treatment prevalence).
- Total number of residents who were receiving antibiotic treatment for CDI at the time of admission to the LTCF.
 - Includes new and readmissions.
- This count is independent of CDI LabID Event reporting.
 - A resident may be included in this count but not have a CDI LabID Event reported by the LTCF.



The diagram illustrates the data flow from the MDRO & CDI LabID Event Reporting system to the National Healthcare Safety Network (NHSN) Rate Tables for CDI LabID Event Data.

MDRO & CDI LabID Event Reporting: This section shows a table with columns for Location Code, Resident Admissions, Resident Days, and Number of Admissions on C. diff Treatment. The 'Number of Admissions on C. diff Treatment' field is highlighted with a green oval.

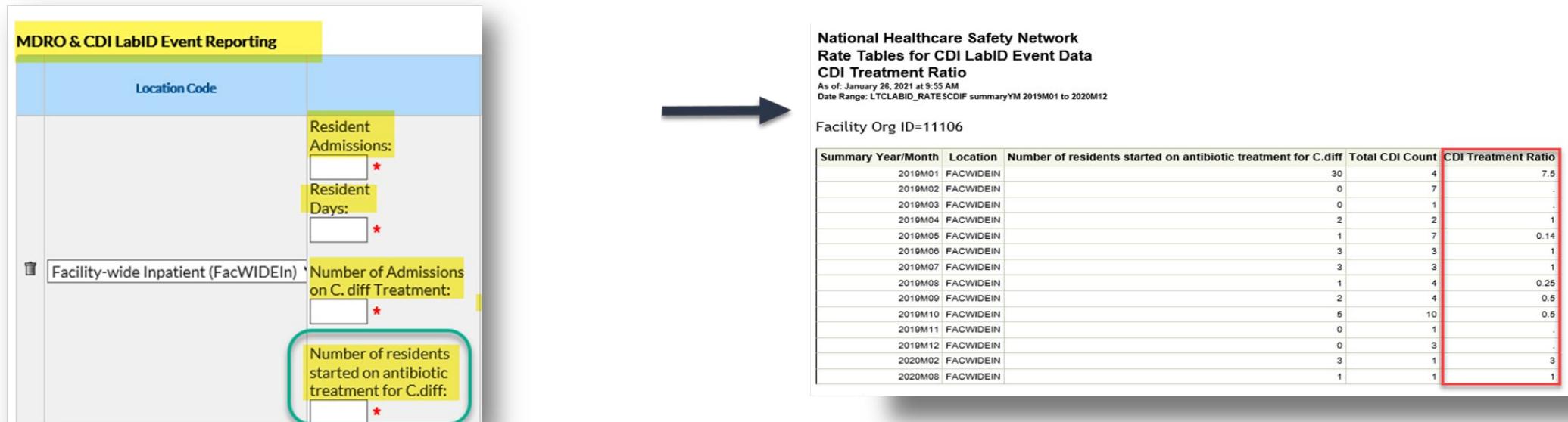
National Healthcare Safety Network Rate Tables for CDI LabID Event Data: This section shows a table with columns for Summary Year/Month, Location, Admissions on C. diff Treatment, Number of Resident Admissions, and CDI Treatment Prevalence. The 'CDI Treatment Prevalence' column is highlighted with a red border.

Summary Year/Month	Location	Admissions on C. diff Treatment	Number of Resident Admissions	CDI Treatment Prevalence
2019M01	FACWIDEIN	30	50	60
2019M02	FACWIDEIN	0	100	0
2019M03	FACWIDEIN	0	20	0
2019M04	FACWIDEIN	3	22	13.636
2019M05	FACWIDEIN	1	1	100
2019M06	FACWIDEIN	2	25	8
2019M07	FACWIDEIN	1	33	3.03
2019M08	FACWIDEIN	1	10	10
2019M09	FACWIDEIN	4	22	18.182
2019M10	FACWIDEIN	3	22	13.636
2019M11	FACWIDEIN	0	22	0
2019M12	FACWIDEIN	0	0	-
2020M02	FACWIDEIN	3	6	50
2020M08	FACWIDEIN	4	25	16

Submitting Monthly Summary Data in NHSN for CDI LabID Event Reporting

Number of Residents Started on Antibiotic Treatment for C. diff:

- Informs understanding of CDI management practices (CDI treatment ratio)
- Can inform burden of CDI in the facility
- Captures number of residents started on treatment for CDI that month based on clinical decisions; specifically, residents without a positive *C. difficile* test.
- This count is independent of testing
 - Includes **ALL** residents with an order for treatment, including those not tested and those who were tested, but had negative results. Also includes orders for empiric treatment.



Submitting Monthly Summary Data in NHSN for CDI LabID Event Reporting

LabID Events (All specimens): A grayed-out check-mark will appear for each specific organism type selected for surveillance in the facility's Monthly Reporting Plan.

	Specific Organism Type							
	MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C. difficile	MDR-Acinetobacter
LabID Event (All specimens)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>					
Report No Events	<input type="checkbox"/> **	<input type="checkbox"/>						

Submitting Monthly Summary Data in NHSN for CDI LabID Event Reporting

- **Report No Events:** A red asterisk will appear next to boxes that require a response.
- The user must put a check-mark in the box to acknowledge that no LabID events were identified for the specified organism and that surveillance was performed for the calendar month.
- The box will be grayed out and without red asterisks if at least one event was submitted for that organism during the calendar month.
- If a LabID event is entered for the organism after summary data submitted, the application will auto-update by unselecting the “Report no Events” box.

	Specific Organism Type							
	MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C. difficile	MDR-Acinetobacter
LabID Event (All specimens)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>					
Report No Events	<input type="checkbox"/> **	<input type="checkbox"/>						

Complete Monthly Summary for CDI

 Add Monthly Summary Data

Mandatory fields marked with *

Fields required for record completion marked with **

Facility ID *:	Angela LTCF Test Facility (ID 39455) ▾
Month *:	April ▾
Year *:	2025 ▾

Denominators for Long Term Care Locations
- No long term care locations selected on monthly reporting plan

MDRO & CDI LabID Event Reporting

Location Code	Resident Admissions: 25 *Resident Days: 3211 *Facility-wide Inpatient (FacWIDEIn)	LabID Event (All specimens) Number of Admissions on C. diff Treatment: 1 *Number of residents started on antibiotic treatment for C.diff: 2 *	Specific Organism Type							
			MRSA	MSSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C.difficile
			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>					
			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>					

Prevention Process Measures
- No long term care locations selected on monthly reporting plan

   Summary data created successfully.

Save Back



Important

**FACWIDE In
surveillance and reporting
is required for LabID event
participation**

For any questions or concerns, contact the NHSN Helpdesk

- [Access NHSN-ServiceNow portal](#) to submit questions to the NHSN Help Desk.
- If you do not have a SAMS login, or are unable to access ServiceNow, you can still email the NHSN Help Desk at nhsn@cdc.gov.

For more information, contact CDC

1-800-CDC-INFO (232-4636)

TTY: 1-888-232-6348 www.cdc.gov

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

