



E-News

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NHSN Sessions at the SHEA Conference

There will be several sessions about NHSN at the SHEA Conference being held in San Diego, CA, on March 19-22. Listed below are descriptions of those sessions.

Patient Safety Component Users Workshop

This workshop is intended for users of the NHSN Patient Safety Component and assumes knowledge of its surveillance and analytic methods. Because it can be difficult to accurately identify HAI in clinically-complicated patients, participants will work through challenging case studies to develop proficiency in correctly detecting and categorizing HAI. Once HAI are identified, the need for interventions can be determined through routine analysis of the data. Understanding HAI rate trends requires further analysis that can indicate whether interventions have been successful. Participants will learn how to use longitudinal analysis features of NHSN and other tools to evaluate trends in their surveillance data. Participants wishing to explore the potential to collaborate with other NHSN facilities in infection control research projects will learn about necessary steps towards that end, and limitations to such collaborations. Registration is at:

http://www.shea-online.org/about/annual_meeting_overview.cfm

Date: Thursday March 19, 2009

Time: 12:00 p.m. - 4:00 p.m.

Location: Spinnaker Room

NHSN Members Meeting

Topics to be discussed are:

- State of NHSN: Where are we and what's new or coming soon
- New NHSN website
- NHSN data: Reports and presentations; what analysis options are being used
- Results of CABG risk factor survey
- Research policy
- Update on PNICE Study
- eSurveillance

Date: Friday March 20

Time: 12:45 p.m. - 1:55 p.m.

Location: Harbor Island IV

MDRO/CDAD: Meet the Consultants

Be sure to register in advance to meet with NHSN subject matter and system experts who will discuss the new MDRO & CDAD Module. Get answers to your most pressing questions and learn from the creators.

Date: Saturday March 21, 2009

Time: 7:00 a.m.-8:20 a.m.

Location: Spinnaker Room

Updated Operative Procedure Codes

It has come to our attention that ICD-9-CM procedure code 84.52 (*Insertion of recombinant bone morphogenetic protein*), which has been included in the NHSN operative procedure category FUSN, is actually not unique to FUSN (e.g., can be inserted during FX operations as well) and is only ever coded as a secondary procedure. Therefore, effective with the next NHSN Reporting release, 84.52 will be removed from the FUSN list and reclassified as an "other" (OTH) procedure in NHSN. The code change is shown below:

Table 10. NHSN Operative Procedure Categories

Code	Operative Procedure	Description	ICD-9-CM Codes
COLO	Colon surgery	Incision, resection, or anastomosis of the large intestine; includes large-to-small and small-to-large bowel anastomosis; does not include rectal operations	17.31-17.36, 17.39, 45.03, 45.26, 45.41, 45.49, 45.52, 45.71-45.76, 45.79, 45.81-45.83, 45.92-45.95, 46.03-46.04, 46.10-46.11, 46.13-46.14, 46.43, 46.52, 46.75-46.76, 46.94
CRAN	Craniotomy	Incision through the skull to excise, repair, or explore the brain; does not include taps or punctures	01.12, 01.14, 01.21-01.25, 01.28, 01.31-01.32, 01.39, 01.41-01.42, 01.51-01.53, 01.59, 02.11-02.14, 02.91-02.93, 07.51-07.54, 07.59, 07.61-07.65, 07.68-07.69, 07.71-07.72, 07.79, 38.01, 38.11, 38.31, 38.41, 38.51, 38.61, 38.81, 39.28
CSEC	Cesarean section	Obstetrical delivery by Cesarean section	74.0, 74.1, 74.2, 74.4, 74.91, 74.99
FUSN	Spinal fusion	Immobilization of spinal column	81.00-81.08, 81.62-81.64, 84.51-84.52
FX	Open reduction of fracture	Open reduction of fracture or dislocation of long bones that requires internal or external fixation; does not include placement of joint prosthesis	79.21-79.22, 79.25-79.26, 79.31-79.32, 79.35-79.36, 79.51-79.52, 79.55-79.56
GAST	Gastric surgery	Incision or excision of stomach; includes subtotal or total gastrectomy; does not include	43.0, 43.42, 43.49-43.5, 43.6, 43.7, 43.81, 43.89, 43.91, 43.99, 44.15, 44.21, 44.29, 44.31, 44.38-44.42, 44.49, 44.51, 44.61-

NHSN Helpdesk Tips

Due to the growing number of facilities and individual users in NHSN, we kindly ask that you follow these guidelines so that we may provide quality support services in a timely manner.

- Always use nhsn@cdc.gov
As a reminder, last spring we eliminated the NHSN helpdesk toll free phone number in order to serve you better. Please send your questions to NHSN at nhsn@cdc.gov rather than to an individual's email address. The NHSN mailbox is monitored by several members of the NHSN team every business day and they can either respond immediately or triage your question to the most appropriate person for response. Using this central mailbox also helps us to keep track of the volume and nature of our email inquiries, providing data to support requests for additional staffing as demands increase.
- Tell us who you are
Please include your NHSN-assigned 5-digit Facility ID and your phone number in email communications with NHSN.
- Don't use password-protected mailbox features
NHSN has recently been receiving emails from some users that require us to register at their facility's mailbox and set up a password in order to open the email. With over 2100 facilities enrolled in NHSN and the high volume of inquiries and questions we receive, we are unable to accept messages that require this. To ensure a prompt reply to your email please do not submit your questions to NHSN in this format.
- Give us the details
If you receive an error message while trying to access or use NHSN, or if you encounter something unexpected, please provide as many details as possible, and/or a "screen shot", so we can best address the issue.

How to take a "screen shot":

1. *When you want to take a "screen shot" of your screen, hit the print screen key*



on your keyboard.

2. *Open Microsoft Word and paste the image into a new document.*
3. *Attach the document to your email and send it to nhsn@cdc.gov.*

- Please be patient
Even if you use the nhsn@cdc.gov mailbox, some of your more complicated questions or problems might take some time to respond to if we have to do some testing in the NHSN application or some research to provide an accurate response.

Digital Certificate Renewal Reminder

Your access to NHSN will be interrupted between the time you apply to renew your digital

certificate and the time you install it. The time between application and installation can vary from 3-7 days depending on your facility's IT support. You can minimize the impact of this on your work by planning ahead for the interruption, and by having your new digital certificate installed as soon as you receive it.

Inactive Users

Attention Facility and Group Administrators: If you have users in your facility or group who are no longer using the system, please set their status to "inactive" via the user screen. Instructions are included in the NHSN Online Manual ("Help"). Related to this, please note if you have not logged in to NHSN in the past 3 months, you will be automatically removed from the NHSN blast email list.

Changing your Email Address

If, for any reason, your email address is changed, it is essential that you record the new email address in both the Secure Data Network (SDN), to update your digital certificate, and in NHSN Reporting **prior to applying for a new digital certificate**. Do not send an email notifying CDC of the change – you must make the changes yourself. Please follow these steps in order:

1. First, make the email address change in NHSN Reporting. From upper right corner in NHSN, click "My Info". At the bottom of the screen, select Edit. Make the change to your email address and click on Save. If you are unable to access your user information, please ask your Facility Administrator to make the email change for you.
2. Next, make the change in the SDN. Log on to the SDN in the usual manner using your challenge phrase (<https://sdn.cdc.gov>). From the menu bar at the top right of the screen, select My Preferences. Select My Personal Information. A screen with your demographics will appear. Make the change to your email address and click on Update at the bottom of the screen.

Alternatively, your Facility Administrator can also revise your NHSN email address, but only you can change it in the SDN following step 2 above.

Note: It is critical that your email address be correct in NHSN and in the SDN. When email addresses are out of sync, your digital certificate cannot be authenticated by the SDN and you will not be able to access NHSN Reporting. In addition, you may stop receiving email correspondence from CDC including blast emails with important system news.

Annual Facility Surveys

It's that time of year again! If you haven't yet done so, please complete an annual survey with facility information for 2008. Remember, if not much information has changed from the previous year, there is a button next to the "Survey Year" dropdown that will allow you to copy the information from your previous year's survey. The survey can then be edited with any changes, including the number of patient days and the number of admissions. It is

important to complete annual surveys in a timely manner since it is a requirement of participation and these data help us understand the characteristics and capabilities of our member facilities, which in turn may help us better analyze the aggregate data.

Reassignment of Facility Administrator

Each NHSN facility must have designated one person to serve as the NHSN facility administrator. The role of the facility administrator is to be the primary point of contact between CDC and his/her facility's access to NHSN. In this capacity, the facility administrator can perform multiple NHSN functions:

- Only person to enroll a facility in NHSN
- Primary person to nominate/join/confer rights/leave a group
- Primary person to manage users by adding/inactivating access to NHSN at their facility, as needed
- Primary person to reassign a new facility administrator

In addition, when we add new NHSN Components, the facility administrator role will take on even more importance. Therefore, it is essential that this role always be filled. If the role needs to be reassigned to another user, there are two ways it can be done.

1. The first and preferred method is completed online in NHSN Reporting by the current facility administrator.
2. The second method is a formalized process in writing to CDC, which is necessary if the current facility administrator has left the facility, no longer has access to NHSN Reporting, or has an expired digital certificate. This method ensures that no unauthorized person can assume this important role.

Instructions for the online reassignment were outlined in the NHSN Newsletter, Winter 2008, volume 3, number 4, available at <http://www.cdc.gov/ncidod/dhqp/pdf/nhsn/newsletters/Winter2008.pdf>. Additionally, online reassignment is available in NHSN Reporting using the help button and searching the topic "reassign facility administrator." The benefit of this method is that the reassignment is conveniently done within NHSN Reporting and takes only a few minutes.

If the current facility administrator cannot make the reassignment using Method 1, then it must be done in writing to CDC and will not be effective until CDC receives the required correspondence. A letter should be written on facility letterhead and signed by a "c" level facility executive (CEO, COO, President, Chairman, etc.) containing pertinent information, including the NHSN facility ID, name of the former facility administrator with his/her email address, plus the name of the new facility administrator, title, email address, and effective date. Please send this letter to:

CDC NHSN Administrator
Centers for Disease Control and Prevention
1600 Clifton Road NE, Mailstop A-24
Atlanta, GA 30333

A CDC staff member will manually make the facility administrator reassignment only after

receipt of this original signed letter. The letter becomes part of CDC's permanent records. Because this process usually takes 7-10 business days, we earnestly recommend that facility administrators be reassigned online to avoid NHSN access delays.



Collaborative Research Studies

One of the purposes of NHSN is to conduct collaborative research studies with NHSN member facilities. As NHSN has grown and the numbers of dedicated and motivated infection preventionists have increased, our partners in HAI prevention, including state health departments, other federal agencies, professional societies, and academic researchers, have approached CDC to explore how the NHSN Community could collaborate to evaluate the many issues related to improved methods of HAI prevention. Examples of such issues include assessing the impact of mandated reporting, uptake of HICPAC guidelines on specific infection incidence, and evaluating novel HAI case-definitions and case-finding methods. Interest in HAIs is currently high due to mandatory reporting requirements and reduced Medicare funding for such complications, so the need for and potential to fund research is great (see editorial of Weinstein and Henderson in the January 2009 issue of *Infection Control and Healthcare Epidemiology* at <http://www.journals.uchicago.edu/doi/full/10.1086/596559>). We are committed to informing you of opportunities to participate in research activities, and are developing a process for our prevention partners to tap into the NHSN community. Stay tuned in the coming months to hear more about this process and the potential for your facility to participate in such collaborative work.



New Staff at NHSN

We are very excited to announce three new members of our NHSN team at CDC.

- Yvonne Smith is our new primary User Support/NHSN Helpdesk Specialist. Please join us in welcoming Yvonne to the NHSN team. She can be reached by emailing the NHSN Helpdesk at nhsn@cdc.gov.
- To fill the shoes of Mary Andrus, who left us at the end of 2008, we have hired two Infection Preventionists. Katherine Allen Bridson began working with us on October 20. Kathy is an IP with over 10 years of infection control experience. She comes to us from the Michigan Department of Community Health where she was most recently the Border Health Program Coordinator. Gloria Morrell started with us on February 3. Gloria is an IP with 20 years of infection control experience, most recently at Northside Hospital in Atlanta, and has a strong interest in education and training. Kathy and Gloria may also be contacted by sending email to nhsn@cdc.gov.