



# Laboratory-identified Events (LabID) Module for Long-term Care Facilities (LTCFs)

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# Learning Objectives

- ❖ Describe the rationale for monitoring *Clostridium difficile* infections (CDI) and multi-drug resistant organisms (MDROs).
- ❖ Describe the setting, requirements, definitions, and protocol for CDI and MDRO Laboratory-identified (LabID) Event reporting.
- ❖ Review the correct method for entering CDI and MDRO LabID Events into NHSN.
- ❖ Apply knowledge through case studies.

# Tracking *C. difficile* and Multi-drug Resistant Organisms (MDROs) using Positive Lab Tests

## Laboratory-Identified (LabID) Events

- ❖ Laboratory cultures used as a proxy for surveillance.
- ❖ Definitions similar to LabID event criteria being applied across healthcare settings.
- ❖ Allow estimate of healthcare acquisition and exposure and infection burden.

## Method is based on laboratory data and limited resident admissions/transfer data

- ❖ Clinical evaluation of resident is not required, and therefore this surveillance option is less labor intensive.
- ❖ Includes results of testing performed on residents while in care of the LTCF (with emergency department/outpatient visit exceptions).

# Metrics in LabID Event Module align with recommendations from published literature

INFECTION CONTROL AND HOSPITAL EPIDEMIOLOGY OCTOBER 2008, VOL. 29, NO. 10

SHEA/HICPAC POSITION PAPER

## Recommendations for Metrics for Multidrug-Resistant Organisms in Healthcare Settings: SHEA/HICPAC Position Paper

Adam L. Cohen, MD, MPH; David Calfee, MD, MS; Scott K. Fridkin, MD; Susan S. Huang, MD, MPH; John A. Jernigan, MD; Ebbing Lautenbach, MD, MPH, MSCE; Shannon Oriola, RN, CIC, COHN; Keith M. Ramsey, MD; Cassandra D. Salgado, MD, MS; Robert A. Weinstein, MD; for the Society for Healthcare Epidemiology of America and the Healthcare Infection Control Practices Advisory Committee

### EXECUTIVE SUMMARY

Monitoring multidrug-resistant organisms (MDROs) and the infections they cause in a healthcare setting is important to detect newly emerging antimicrobial resistance profiles, to identify vulnerable patient populations, and to assess the need for and effectiveness of interventions; however, it is unclear which metrics are the best, because most of the metrics are

quantitative  
healthcare  
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S. aureus  
the

INFECTION CONTROL AND HOSPITAL EPIDEMIOLOGY MAY 2010, VOL. 31, NO. 5

SHEA-IDS A GUIDELINE

## Clinical Practice Guidelines for *Clostridium difficile* Infection in Adults: 2010 Update by the Society for Healthcare Epidemiology of America (SHEA) and the Infectious Diseases Society of America (IDSA)

Stuart H. Cohen, MD; Dale N. Gerding, MD; Stuart Johnson, MD; Ciaran P. Kelly, MD; Vivian G. Loo, MD; L. Clifford McDonald, MD; Jacques Pepin, MD; Mark H. Wilcox, MD

INFECTION CONTROL AND HOSPITAL EPIDEMIOLOGY FEBRUARY 2007, VOL. 28, NO. 2

ORIGINAL ARTICLE

## Recommendations for Surveillance of *Clostridium difficile*-Associated Disease

L. Clifford McDonald, MD; Bruno Coignard, MD, MSc; Erik Dubberke, MD; Xiaoyan Song, MD, MS; Teresa Horan, MPH; Preeti K. Kuttu, MD, MPH; the Ad Hoc *Clostridium difficile* Surveillance Working Group

**BACKGROUND.** The epidemiology of *Clostridium difficile*-associated disease (CDAD) is changing, with evidence of increased incidence and severity. However, the understanding of the magnitude of and reasons for this change is currently hampered by the lack of standardized surveillance methods.

**OBJECTIVE AND METHODS.** An ad hoc *C. difficile* surveillance working group was formed to develop interim surveillance definitions and recommendations based on existing literature and expert opinion that can help to improve CDAD surveillance and prevention efforts.

**DEFINITIONS AND RECOMMENDATIONS.** A CDAD case patient was defined as a patient with symptoms of diarrhea or toxic megacolon combined with a positive result of a laboratory assay and/or endoscopic or histopathologic evidence of pseudomembranous colitis. Recurrent CDAD was defined as repeated episodes within 8 weeks of each other. Severe CDAD was defined by CDAD-associated admission to an intensive care unit, colectomy, or death within 30 days after onset. Case patients were categorized by the setting in which *C. difficile* was likely acquired, to account for recent evidence that suggests that healthcare facility-associated CDAD may have its onset in the community up to 4 weeks after discharge. Tracking of healthcare facility-onset, healthcare facility-associated CDAD is the minimum surveillance required for healthcare settings; tracking of community-onset, healthcare facility-associated CDAD should be performed only in conjunction with tracking of healthcare facility-onset, healthcare facility-associated CDAD. Community-associated CDAD was defined by symptom onset more than 12 weeks after the last discharge from a healthcare facility. Rates of both healthcare facility-onset, healthcare facility-associated CDAD and community-onset, healthcare facility-associated CDAD should be expressed as case patients per 10,000 patient-days; rates of community-associated CDAD should be expressed as case patients per 100,000 person-years.

*Infect Control Hosp Epidemiol* 2007; 28:140-145

Position paper on *Clostridium difficile* infection in 1995, significant  
on. *C. difficile* remains the most important cause of healthcare-  
infection. A more virulent strain of *C. difficile* has been identified and  
causing the decreased effectiveness of metronidazole in the treatment  
if available, areas of controversy still exist. This guideline updates  
infection control and environmental management.

*Infect Control Hosp Epidemiol* 2010; 31(5):431-455

# Reporting Options Available in LabID Event Module

I. *C. difficile* (CDI)

II. Multi-drug Resistant Organisms (MDROs)

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

# Settings

- ❖ **Certified skilled nursing facilities/nursing homes (LTC:SKILLNURS) and intermediate/chronic care facilities for the developmentally disabled (LTC:DEVDIS)**

## Settings, *continued*

- ❖ Surveillance must occur for all resident locations in the LTCF, referred to as facility-wide inpatient (FacWideIN)
- ❖ Laboratory results obtained before a resident's admission to the LTCF or during an admission in another facility are excluded from FacWideIN
- ❖ Laboratory results collected from an emergency department (ED) or outpatient (OP) setting, such as a physician's office or clinic may be included if:
  - ❖ The resident returns to the LTCF on the calendar day of transfer to the OP setting or the following calendar day (i.e., no change in current admission date for LTCF)

## Settings: Example




**EXAMPLE:** Mr. T is a resident in your LTCF. He does not have a history of *C. difficile*. On March 1, he was transferred to the local emergency department for evaluation of diarrhea and fever. While in the emergency department, a loose stool specimen tested positive for *C. difficile*. He received IV fluids and was transferred back to the LTCF on March 2. Since the specimen was collected in an ED and during Mr. T's current admission in the LTCF, the *C. difficile* specimen was entered into NHSN as a CDI LabID Event for the LTCF.

# LTCF Surveillance for *C. difficile*, MRSA, and other Drug-resistant Infections

<https://www.cdc.gov/nhsn/ltc/cdiff-mrsa/index.html>

- Access to event modules
  - Training
  - Protocols
  - Forms and instructions
  - Supporting materials (e.g., locations, key terms, etc.)
  - Analysis resources

The screenshot shows the NHSN website interface. At the top is a dark green header with the text 'National Healthcare Safety Network (NHSN)'. Below this is a breadcrumb trail: 'CDC > NHSN > Materials for Enrolled Facilities > Long-term Care Facilities'. The main heading is 'Surveillance for C. difficile, MRSA, and other Drug-resistant Infections'. There are social media icons for Facebook, Twitter, and a plus sign. Below that is the text 'Resources for NHSN Users Already Enrolled'. A list of menu items is shown with expandable arrows: Training, Protocol, Data Collection Forms, Supporting Material, and FAQs. On the left side, there is a vertical navigation menu with items: NHSN, NHSN Login, About NHSN (+), Enroll Here (+), Materials for Enrolled Facilities (-), Ambulatory Surgery Centers (+), Acute Care Hospitals/Facilities (+), Long-term Acute Care Hospitals/Facilities (+), and Long-term Care Facilities (-). The 'Surveillance for C. difficile and MRSA Infections' link is highlighted with a blue box.

National Healthcare Safety Network (NHSN)	
NHSN	<a href="#">CDC</a> > <a href="#">NHSN</a> > <a href="#">Materials for Enrolled Facilities</a> > <a href="#">Long-term Care Facilities</a>
NHSN Login	Surveillance for C. difficile, MRSA, and other Drug-resistant Infections
About NHSN +	  
Enroll Here +	Resources for NHSN Users Already Enrolled
Materials for Enrolled Facilities -	> Training
Ambulatory Surgery Centers +	> Protocol
Acute Care Hospitals/Facilities +	> Data Collection Forms
Long-term Acute Care Hospitals/Facilities +	> Supporting Material
Long-term Care Facilities -	> FAQs
<b>Surveillance for C. difficile and MRSA Infections</b>	

# LABID EVENT MODULE

*Clostridium difficile* Infection (CDI)

# *Clostridium difficile* Infections

- ❑ Anaerobic bacterium
- ❑ Not normal intestinal bacterium
- ❑ Fecal-oral spread
- ❑ Forms spores that persist
- ❑ Toxins produce colitis
  - Diarrhea
  - More severe disease, death
- ❑ **2-steps to infection**
  - Antibiotics result in vulnerability
  - New acquisition via transmission
- ❑ **Recurrence in 20-30% of successfully treated patients**

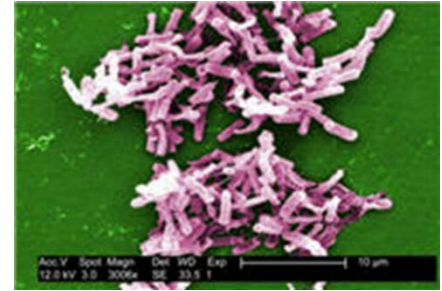


Figure courtesy of D. Gerding and S. Johnson

# Why is *C. difficile* Surveillance Important?

- ❖ *C. difficile* is the leading cause of acute diarrhea in nursing home residents.
- ❖ *C. difficile* infections contribute to approximately 14,000 deaths/year
  - ❖ ≈ 90% elderly
- ❖ The prevention activities, like antimicrobial stewardship programs and hand hygiene are shown to prevent the spread of *C. difficile* and other infections.

## Vital Signs: Preventing *Clostridium difficile* Infections

### Abstract

**Background:** *Clostridium difficile* infection (CDI) is a common and sometimes fatal health-care-associated infection; the incidence, deaths, and excess health-care costs resulting from CDIs in hospitalized patients are all at historic highs. Meanwhile, the contribution of nonhospital health-care exposures to the overall burden of CDI, and the ability of programs to prevent CDIs by implementing CDC recommendations across a range of hospitals, have not been demonstrated previously.

**Methods:** Population-based data from the Emerging Infections Program were analyzed by location and antecedent health-care exposures. Present-on-admission and hospital-onset, laboratory-identified CDIs reported to the National Healthcare Safety Network (NHSN) were analyzed. Rates of hospital-onset CDIs were compared between two 8-month periods near the beginning and end of three CDI prevention programs that focused primarily on measures to prevent intrahospital transmission of *C. difficile* in three states (Illinois, Massachusetts, and New York).

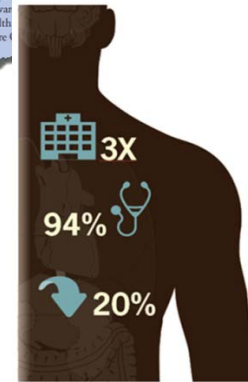
**Results:** Among CDIs identified in Emerging Infections Program data in 2010, 94% were associated with receiving health care of these, 75% had onset among persons not currently hospitalized, including recently discharged patients, outpatients,

## Making Health Care Safer

Stopping *C. difficile* Infections

## Vital signs™

March 2012



### On this Page

- Introduction
- Problem
- Who's at Risk?
- What Can Be Done
- Science Behind this Issue
- Related Links
- Social Media
- Read Associated MMWR

People getting medical care can catch serious infections called [health care-associated infections \(HAIs\)](#). While most types of HAIs are declining, one – caused by the germ *C. difficile* – remains at historically high levels. *C. difficile* causes diarrhea linked to 14,000 American deaths each year. Those most at risk are people, especially older adults, who take antibiotics and also get medical care. When a person takes antibiotics, good germs that protect against infection are destroyed for several months. During this time, patients can get sick from *C. difficile* picked up from contaminated surfaces or spread from a health care provider's hands. About 25% of *C. difficile* infections first show symptoms in hospital patients; 75% first show in nursing home patients or in people recently cared for in doctors' offices and clinics. *C. difficile* infections cost at least \$1 billion in extra health care costs annually.

\**Clostridium difficile* (kloh-STRID-ee-um DIFF-i-seel)

# Risk Factors: Key Prevention Targets

- Antimicrobial exposure
- Acquisition of *C. difficile*
- Advanced age
- Underlying illness
- Immunosuppression
- Tube feeds
- Gastric acid suppression

# Understanding *C. difficile* in your facility:

## Questions to Ponder...

- ❑ How do we define CDI?
- ❑ How do we track/measure CDI?
- ❑ Are my facility's CDI rates high?
- ❑ If my facility's rates are high, why?
- ❑ Are CDI rates in my community high?
- ❑ Which residents are most affected by CDI in my facility?
- ❑ Skilled care vs. long-stay
- ❑ Recently hospitalized?
- ❑ Recent antibiotic use?
- ❑ Are most cases of CDI new, or relapsing cases?

# Requirements

- ❖ A NHSN Monthly Reporting Plan for the LTCF (CDC 57.141) must be completed for each calendar month in which a facility plans to enter data into the NHSN.
- ❖ For each participating month, the facility must report numerators (CDI LabID Events) and denominators (*number of resident admissions, number of resident-days, and number of admissions on C. difficile treatment*) for the entire facility (FacWideIN).
- ❖ Testing performed on unformed/loose stool specimens (conforms to the shape of the container).

# Monthly Reporting Plan for LTCF

- Facility-wide Inpatient (FACWIDEIN) is default location
- Select CDIF- C. difficile as specific organism type
- LabID Event *All Specimens* is default

NHSN - National Healthcare Safety Network

AAANTILA  
Angela LTCF Test Faci

NHSN Home

**Add Monthly Reporting Plan**

Mandatory fields marked with \*

Facility ID \*: Angela LTCF Test Facility (ID 39455) ▾

Month \*: ▾

Year \*: ▾

No Long Term Care Facility Component Modules Followed this Month

[Print Form](#)

**HAI Module**

Locations	UTI
Facility-wide Inpatient (FacWIDEIn) ▾	<input type="checkbox"/>

**LabID Event Module**

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

**Prevention Process Measure Module**

Locations	Hand Hygiene	Gown and Gloves Use
Facility-wide Inpatient (FacWIDEIn) ▾	<input type="checkbox"/>	<input type="checkbox"/>


Copy from Previous Month

Save Back

# Use Customizable NHSN LabID Event form to collect data

- **Numerator data** (one form for each event being recorded)
  - Laboratory-identified MDRO or CDI Event for LTCF Form (CDC 56.138)
  - Collect and report each CDI event that meets the LabID Event definition. This form is also used for MDRO events, if reporting
  - Blank form: [https://www.cdc.gov/nhsn/forms/57.138\\_labidevent\\_ltcf\\_blank.pdf](https://www.cdc.gov/nhsn/forms/57.138_labidevent_ltcf_blank.pdf)
  - Form instructions: <https://www.cdc.gov/nhsn/forms/instr/57.138-toi-for-lab-id-event.pdf>

Form Approved  
OMB No. 0920-0666  
Exp. Date: 11/30/2019  
www.cdc.gov/nhsn

 **Laboratory-identified MDRO or CDI Event for LTCF**

Page 1 of 1

*required for saving	
Facility ID:	Event #:
*Resident ID:	*Social Security #:
Medicare number (or comparable railroad insurance number):	
Resident Name, Last:	First: Middle:
*Gender: M F Other	*Date of Birth: ___/___/___
Ethnicity (specify):	Race (specify):
*Resident type: <input type="checkbox"/> Short-stay <input type="checkbox"/> Long-stay	
*Date of First Admission to Facility: ___/___/___	*Date of Current Admission to Facility: ___/___/___
<b>Event Details</b>	
*Event Type: LabID	*Date Specimen Collected: ___/___/___
*Specific Organism Type: (check one)	
<input type="checkbox"/> MRSA <input type="checkbox"/> MSSA <input type="checkbox"/> VRE <input type="checkbox"/> <i>C. difficile</i> <input type="checkbox"/> CephR-Klebsiella	
<input type="checkbox"/> CRE- <i>E. coli</i> <input type="checkbox"/> CRE- <i>Enterobacter</i> <input type="checkbox"/> CRE- <i>Klebsiella</i> <input type="checkbox"/> MDR- <i>Acinetobacter</i>	
*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 dem...	
<input type="checkbox"/> Short-term rehab (sub-...	

# DEFINITION

## *C. difficile* positive laboratory assay

- An **unformed/loose stool** that tests positive for *C. difficile* toxin A and/or B, (includes molecular assays [PCR] and/or toxin assays)

**OR**

- A toxin-producing *C. difficile* organism detected in an **unformed/loose stool** sample by culture or other laboratory means

*C. difficile* testing only on loose-unformed stool samples!!

Stool should conform to shape of container

# DEFINITION

## CDI LabID Event

*C. difficile* positive laboratory assay, tested on a loose-unformed stool specimen, and collected while a resident is receiving care from the LTCF\*, and the resident has no prior *C. difficile* positive laboratory assay collected in the previous two weeks (<15 days) while receiving care from the LTCF.

\*See Settings for ER/OP visit exception

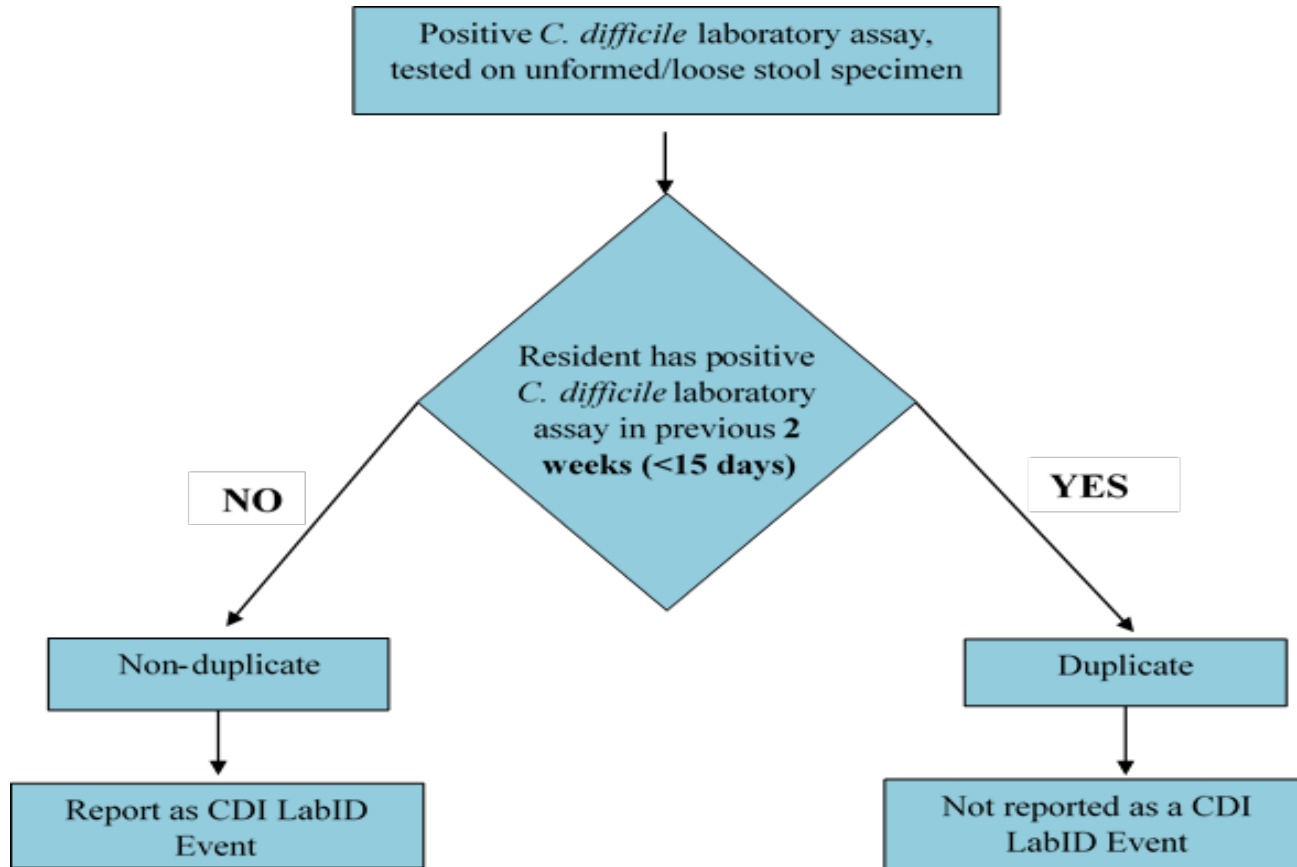
## DEFINITION

### Duplicate *C. difficile* positive laboratory assay

Any *C. difficile* positive laboratory assay from the same resident following a previous *C. difficile* positive laboratory assay within the past two weeks (<15 days).

**Note:** Duplicate assays should not be reported to NHSN

Figure 1 - *C. difficile* Test Result Algorithm for Laboratory-identified (LabID) Events



- It may be helpful to keep a log of positive *C. difficile* laboratory results from residents to keep track of duplicate test results

# Knowledge Check

Assume these are all of the *C. difficile* test results for a resident in the LTCF

Specimen collection date	Duplicate?	Submit to NHSN as a CDI LabID Event?
2/3/2017	No	YES
2/11/2017	Yes	No (within 2 weeks of positive test 2/3/2017)
2/19/2017	Yes	No (within 2 weeks of <u>positive test</u> 2/11/2017)
2/29/2017	Yes	No (within 2 weeks of <u>positive test</u> 2/19/2017)
3/19/2017	No	YES (>2 weeks since previous positive test 2/29/17)

# Submitting a CDI LabID Event in the NHSN

# Entering CDI LabID Event

The screenshot displays the NHSN - National Healthcare Safety Network interface. At the top, a dark blue header contains the text "NHSN - National Healthcare Safety Network" on the left and a user profile for "AANTILA Angela LTCF Test Facility" on the right. Below the header, the main content area is titled "NHSN Long Term Care Facility Component Home Page". A sidebar on the left lists navigation options: NHSN Home, Alerts, Reporting Plan, Resident, Event, Summary Data, Surveys, Analysis, Users, Facility, Group, and Logout. The "Event" option is highlighted in a darker blue. A dropdown menu is open for "Event", showing three options: "Add", "Find", and "Incomplete". A yellow arrow points from the "Event" menu item to the "Add" option in the dropdown. The main content area below the header contains the text "COMPLETE THESE ITEMS".

# Entering CDI LabID Event

## Resident Type

NHSN - National Healthcare Safety Network

NHSN Home

Alerts

Reporting Plan

Resident

Event

Summary Data

Surveys

Analysis

Users

Facility

Group

Logout



Add Event

Mandatory fields marked with \*

Fields required for record completion marked with \*\*

### Resident Information

Facility ID \*: Angela LTCF Test Facility (ID 39455)

Resident ID \*: 12345

Find

Find Events for Resident

Social Security # \*: 545-48-9637

Medicare number (or comparable railroad insurance number):

Last Name: Sue

First Name: Mary

Middle Name:

Gender \*: F - Female

Date of Birth \*: 01/25/1940

Ethnicity:

Race:  American Indian/Alaska Na

Black or African American

White

Resident type \*:

Date of First Admission

to Facility \*:

SS - Short-stay

LS - Long Stay

Short-stay: Resident has been in facility for  $\leq 100$  days from date of first admission.  
Long-stay: Resident has been in facility for  $> 100$  days from date of first admission

# Entering CDI LabID Event *First and Current Admission*

NHSN - National Healthcare Safety Network

NHSN Home

Alerts

Reporting Plan

Resident



Add Event

Mandatory fields marked with \*

Fields required for record completion marked with \*\*

**Date resident first entered the facility.**

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

The most recent date the resident entered the facility. If the resident enters the facility for the first time and has not left for > 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 > 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.

Logout

Alaska Native  
 Black or African American  
 White

Resident type \*: LS - Long Stay

Date of First Admission to Facility \*: 05/05/2015

Date of Current Admission to Facility \*: 12/20/2016

## Example: First and Current Admission

A resident in your facility since **February 1, 2016** is transferred from your facility to an acute care facility on **June 2, 2016** and returns on **June 10, 2016**, the *current admission* date would be **06/10/2016** since he was in away from the facility for greater than two calendar days. The date of *first admission* remains as **2/1/2016** since the resident did not leave the LTCF for greater than 30 days.

One week later, the same resident goes to the emergency department for evaluation on **June 15, 2016** and returns on **June 16, 2016**. The date of *current admission* stays as **06/10/2016** since he was not away from the LTCF for greater than two calendar days.

# Entering CDI LabID Event

## Event Type and Date of Event

**NHSN Home**

- Alerts
- Reporting Plan
- Resident
- Event
- Summary Data
- Surveys
- Analysis
- Users
- Facility
- Group
- Logout

### Add Event

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

#### Resident Information

Facility ID \*: Angela LTCF Test Facility (ID 39455) ▾  
Resident ID \*: 12345 Find Find Events for Resident Social Security # \*: 545-48-9637  
Medicare number (or comparable railroad insurance number):  
Last Name: Sue First Name: Mary  
Middle Name:  
Gender \*: F - Female ▾ Date of Birth \*: 01/25/1940 11  
Ethnicity: ▾  
Race:  American Indian/Alaska Native  Asian  
 Black or African American  Native Hawaiian/Other Pacific Islander  
 White

Resident type \*: LS - Long Stay ▾  
Date of First Admission to Facility \*: 05/05/2015 11

#### Event Information

Event Type \*: LABID - Laboratory-identified MDRO or CDI Event  
UTI - Urinary Tract Infection

Date of Event \*: 11

Comments

Data of specimen collection

# Entering CDI LabID Event

## *Specific Organism Type*

Resident type \*: LS - Long Stay

Date of First Admission to Facility \*: 05/05/2015

Date of Current Admission to Facility \*: 12/20/2016

### Event Information

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

Date Specimen Collected \*: 12/25/2016

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

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

Specific Organism Type \*: CDIF - C. difficile

Specimen Body Site/System \*: DIGEST - Digestive System

Specimen Source \*: STOOL - Stool specimen

# Entering CDI LabID Event *Resident Care Location*

**Event Information**

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

Date Specimen Collected \*: 12/25/2016 11

Specific Organism Type \*: CDIF - C. difficile ▼

Specimen Body Site/System \*: DIGEST - Digestive System

Specimen Source \*: STOOL - Stool specimen

Resident Care Location \*: 

- 1 D - DEMENTIA UNIT
- 2 PSY - PSYCHIATRIC
- 2W - 2 WEST DEMENTIA
- 3 REHAB - SHORT TERM REHAB
- 4 GEN - GENERAL UNIT
- 5 HOS - HOSPICE UNIT
- DEMENTIA - LOCKED UNIT


Select location of resident at time of specimen collection. *Note: These are locations set-up by the facility*

# Entering CDI LabID Event

## *Primary Service Type*

### Event Information

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

Date Specimen Collected \*: 12/25/2016 

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 \*:   
BARIA - Bariatric  
HOSP - Hospice/Palliative  
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

# Entering CDI LabID Event

## *Transfer from Acute Care Facility*

### 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 \*: 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  
N - No

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

If Yes, date of last transfer from acute care to your facility \*:  11

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

# Entering CDI LabID Event

## *Documented Evidence Previous.....*

### Event Information

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

Date Specimen Collected \*: 12/25/2016 11

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

If Yes, date of last transfer from acute care to your facility \*: 12/20/2016 11

If Yes, was the resident on antibiotic therapy for this specific organism type at the time of transfer to your facility \*: N - No

Documented evidence of previous infection or colonization with this specific organism type from a previously reported LabID Event in any prior month? N - No

Auto-populated by the NHSN.  
Non-editable by users

# Entering CDI LabID Event: Optional: *Custom Fields and Comments*

**Custom Fields** [Help](#)

PRIOR HX:

**Comments**

TRANSFER FROM STAYAWAY ACUTE CARE FACILITY.

The screenshot shows a web form for entering a CDI LabID Event. It features a 'Custom Fields' section with a 'PRIOR HX' field containing 'YES'. Below this is a 'Comments' section with a text area containing 'TRANSFER FROM STAYAWAY ACUTE CARE FACILITY.'. At the bottom are 'Save' and 'Back' buttons. Two callout boxes are present: one pointing to the 'PRIOR HX' field with the text 'Optional, but must be set-up before reporting event', and another pointing to the 'Comments' text area with the text 'Free text'.

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

**Resident Information**

Facility ID \*: Angela LTCF Test Facility (ID 39455) ▼  
 Resident ID \*: 12345   Social Security # \*: 545-48-9637  
 Medicare number (or comparable railroad insurance number):   
 Last Name: Sue Middle Name:  First Name: Mary  
 Gender \*: F - Female ▼ Date of Birth \*: 01/25/1940   
 Ethnicity:   
 Race:  American Indian/Alaska Native  Asian  
 Black or African American  Native Hawaiian/Other Pacific Islander  
 White

Resident type \*: LS - Long Stay ▼  
 Date of First Admission to Facility \*: 05/05/2015   
 Date of Current Admission to Facility \*: 12/20/2016

**Event Information**


Event Type \*: LABID - Laboratory-identified MDRO or CDI Event ▼ Date Specimen Collected \*: 12/25/2016   
 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 ▼  
 If Yes, date of last transfer from acute care to your facility \*: 12/20/2016   
 If Yes, was the resident on antibiotic therapy for this specific organism type at the time of transfer to your facility \*: N - No ▼  
 Documented evidence of previous infection or colonization with this specific organism type from a previously reported Lab ID Event to your facility? N - No

**Custom Fields** [Help](#)

PRIOR HX: YES

**Comments**

TRANSFER FROM STAYAWAY ACUTE CARE FACILITY.

 **Event 8243 created successfully.**

# Denominator Data

# Denominator Reporting (Monthly Summary)

## Two form options for reporting denominators for CDI

- CDC 57.139: MDRO and CDI LabID Event Reporting Monthly summary Data for LTCF**
  - Resembles Summary Data page in the NHSN application
  - Specific to LabID Event reporting
  - Total counts only
- CDC 57.142: Denominators for LTCF**
  - One form for the month to collect CDI and/or UTI denominator data
  - Daily counts that must be summed at the end of the month

Forms and Table of Instructions (TOIs) available under *Data Collection Forms* at:

<https://www.cdc.gov/nhsn/ltc/cdiff-mrsa/index.html>

### MDRO and CDI LabID Event Reporting Monthly Summary Data for LTCF

Page 1 of 1  
\*required for saving      \*\*conditionally required based upon monitoring selection in Monthly Reporting Plan

Facility ID #: \_\_\_\_\_ \*Month: \_\_\_\_\_ \*Year: \_\_\_\_\_ \*Location Code: \_\_\_\_\_

\*Resident Days: \_\_\_\_\_ \*Resident Admissions: \_\_\_\_\_ \*\*Number of Admissions on C. diff Treatment: \_\_\_\_\_

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

Custom Fields (Optional)

Label \_\_\_\_\_

Data \_\_\_\_\_



Form Approved  
OMB No. 0920-0666  
Exp. Date: 11/30/2019  
www.cdc.gov/nhsn

### Denominators for LTCF

Page 1 of 1  
\*required for saving

Facility ID: \_\_\_\_\_ \*Location Code: \_\_\_\_\_ \*Month: \_\_\_\_\_ \*Year: \_\_\_\_\_

Date	*Number of residents	*Number of residents with a urinary catheter	*New antibiotic starts for UTI indication	*Number of urine cultures ordered	*Number of admissions	Number of admissions on C. diff treatment
1						
2						
3						
4						
5						
6						

# Entering CDI Denominator Data into NHSN

- Referred to as Summary Data
- At the end of the month, submit each monthly total denominator for the month into the NHSN application
- Locate 'Summary Data' on left-hand navigation Bar, and then 'Add'

The screenshot displays the NHSN - National Healthcare Safety Network interface. At the top, a dark blue header reads "NHSN - National Healthcare Safety Network". Below it, a light blue banner identifies the page as "NHSN Long Term Care Facility Component Home Page". On the left, a vertical navigation menu lists several options: "NHSN Home", "Alerts", "Reporting Plan", "Resident", "Event", "Summary Data", "Surveys", "Analysis", "Users", "Facility", "Group", and "Logout". The "Summary Data" option is highlighted in blue. A yellow arrow points from the text "Summary Data" in the list to the "Summary Data" menu item. To the right of the menu, a white box titled "COMPLETE THESE ITEMS" contains a red bar chart with a "Survey Required" label and a large blue number "6". A yellow arrow points from the text "Add" in the prompt to the "Add" button in the dropdown menu that appears when "Summary Data" is selected. The dropdown menu also includes "Find" and "Incomplete" options.

# Entering CDI Denominator Data in NHSN

- NHSN Home
- Alerts
- Reporting Plan ▶
- Resident ▶
- Event ▶
- Summary Data ▶
- Surveys ▶
- Analysis ▶
- Users ▶
- Facility ▶
- Group ▶
- Logout

## Add Monthly Summary Data

Mandatory fields marked with \*

Fields required for record completion marked with \*\*

Facility ID \*: Angela LTCF Test Facility (ID 39455) ▼

Month \*: December ▼

Year \*: 2016 ▼

### Denominators for Long Term Care Locations

- No long term care locations selected on monthly reporting plan

### MDRO & CDI LabID Event Reporting

Location Code		MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C. difficile	MDR-Acinetobacter
	Resident Admissions: <input type="text"/> *								
Facility-wide Inpatient (FacWIDEIn)	Resident Days: <input type="text"/> *	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Number of Admissions on C. diff Treatment: <input type="text"/> *	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Report No Events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Prevention Process Measures

- No long term care locations selected on monthly reporting plan

Save Back

# Entering CDI Denominator Data into NHSN

- Enter month, and year for which denominator data will be reported
- Enter the total Resident Admissions, Resident Days, and Number of New Admissions on *C. difficile* Treatment

**Add Monthly Summary Data**

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

Facility ID \*: Angela LTCF Test Facility (ID 39455) ✓  
Month \*: December ✓  
Year \*: 2010 ✓

**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:	MRSA	VRE	Cephalo-Klasiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klasiella	C. difficile	MRSA-Actinobacter
Facility-wide Inpatient (FacWIDEIn)	Resident Days:							✓	
	Number of Admissions on C. diff Treatment:								

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

Add check-mark to “report no events” only if no CDI identified/submitted to NHSN during month, as indicated by red asterisk

C. difficile
✓ **

# Number of Admissions on *C. difficile* Treatment

- The monthly total number of admitted residents who were receiving antibiotic therapy for *C. difficile* infection at the time of admission. Includes new admissions and readmissions.
- Count number of admissions on *C. difficile* treatment even if the infection being treated did not meet NHSN criteria for a CDI LabID Event.

## MDRO & CDI LabID Event Reporting

Location Code			MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C. difficile	MDR-Acinetobacter
Facility-wide Inpatient (FacWIDEIn)	Resident Admissions: 12 *									
	Resident Days: 2761 *	LabID Event (All specimens)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Number of Admissions on <i>C. diff</i> Treatment: 0 *	Report No Events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> **	<input type="checkbox"/>

# Complete Monthly Summary for CDI

**NHSN Home**

- Alerts
- Reporting Plan ▶
- Resident ▶
- Event ▶
- Summary Data ▶
- Surveys ▶
- Analysis ▶
- Users ▶
- Facility ▶
- Group ▶
- Logout

## Add Monthly Summary Data

Mandatory fields marked with \*

Fields required for record completion marked with \*\*

Facility ID \*:

Month \*:

Year \*:

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

**MDRO & CDI LabID Event Reporting**

Location Code	MRSA	VRE	CaphR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C. difficile	MDR-Acinetobacter
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>Resident Admissions: <input type="text" value="26"/> *</p> <p>Resident Days: <input type="text" value="2211"/> *</p> <p>Number of Admissions on C.diff Treatment: <input type="text" value="12"/> *</p> </div> <div style="width: 45%;"> <p>LabID Event (All specimens) <input type="checkbox"/></p> <p>Report No Events <input type="checkbox"/></p> </div> </div>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="button" value="Custom Fields"/>								

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

**Add Monthly Summary Data**

Summary data created successfully.

# LabID Event Categorization for CDI

*NHSN will categorize CDI LabID Events based on **current specimen collection date and prior specimen collection date** of a previous CDI LabID Event entered into NHSN*

- **Incident CDI LabID Event**: Any CDI LabID Event from a specimen collected **>8 weeks** after the most recent CDI LabID Event submitted to the NHSN application or the first LabID Event ever submitted for the resident in your facility.
- **Recurrent CDI LabID Event**: Any LabID Event entered **> 2 weeks and ≤ 8 weeks** after the most recent LabID Event submitted to the NHSN for an individual resident in the facility.

# Let's Review



Resident with positive CDI test result

## LAB ID EVENT:

Complete form and/or submit data to NHSN application

<b>NHSN</b> National Healthcare Safety Network		<b>Laboratory-identified</b>	
Page 1 of 1		for L	
*required for saving		Event	
Facility ID:		Event ID:	
*Resident ID:		*Social Security #:	
Medicare number (or comparable railroad insurance number):			
Resident Name, Last:	First:	Middle:	
*Gender: M F Other	*Date of Birth: __/__/__		
Ethnicity (Specify):	Race (Specify):		
<b>Event Details</b>			
*Resident type: <input type="checkbox"/> Short-stay (≤90 days) <input type="checkbox"/> Long-stay (>90 days)			
*Date of First Admission to Facility: __/__/__		*Date of Current Admission to Facility: __/__/__	
*Event Type: <u>LabID</u>	*Date Specimen Collected: __/__/__		

Prior CDI positive in last 2 weeks?



NO

YES

Duplicate-Not LabID Event

Incident  
No previous positive,  
OR  
Prior positive >8 weeks

Recurrent  
Prior positive > 2 and ≤ 8 weeks

# LabID Event Categorization for CDI

*NHSN will further categorize CDI LabID Events based on **date of current admission to the facility** and **date of specimen collection***

- **Community-onset (CO) LabID Event:** Date specimen collected  $\leq 3$  **calendar days** 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  $> 3$  **calendar days** after *current* admission to the facility (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 specimen collection date  $\leq 4$  weeks following date of last transfer from an Acute Care Facility (hospital, long-term acute care hospital, or acute inpatient rehabilitation facility only)

# EXAMPLE: NHSN Classification of LabID Events as Community-onset (CO) or LTCF-onset (LO)

<b>LTCF Admission Date</b>				
March 1 <sup>st</sup>	March 2 <sup>nd</sup>	March 3 <sup>rd</sup>	March 4 <sup>th</sup>	March 5 <sup>th</sup>
Day 1	Day 2	Day 3	Day 4	Day 5
<b>Community-Onset (CO)</b>			<b>Long-term Care Facility Onset (LO)</b>	

**Both Community-Onset  
and LTCF-Onset LabID  
Events must be  
submitted to the NHSN**

# Key Points for CDI LabID Event Reporting

- ❖ Include only results from unformed/loose stool specimens in CDI LabID Event surveillance and reporting.
- ❖ When performing LabID Event reporting for CDI, the facility must identify and report from all resident care locations within the LTCF, referred to as FacWideIN.
- ❖ All non-duplicate *C. difficile* laboratory assays should be submitted to the NHSN, including the community-onset events.
- ❖ Duplicate *C. difficile* laboratory assays should not be reported to NHSN.
- ❖ When applying the LabID Event rules, the date of specimen collection is considered as Day 1 of the count.
- ❖ NHSN recommends that each facility keep an internal line listing log of all *C. difficile* positive laboratory assays as a reference in LabID event reporting to ensure the 14-day rule is applied correctly.

# Key Points for CDI LabID Event Reporting

- ❖ **Laboratory results obtained before a resident's admission to the LTCF or during an admission in another facility are excluded from LabID Event reporting.**
- ❖ **LabID Event rules apply to specimens collected while the resident is receiving care by the LTCF, including specimens collected from an emergency department (ED) or outpatient (OP) setting when the resident returns to the LTCF on the same day as transfer to the OP setting or the next calendar day (i.e., current LTCF admission).**
- ❖ **If a specimen is collected while the resident is receiving care from an ED or OP setting, the Resident Care Location and Primary Resident Service Type should indicate the resident's primary LTCF location and service type prior to the ED or OP visit.**

# NHSN Resources

## *Long-term Care Facility Component*

- ❖ NHSN LTCF website: <https://www.cdc.gov/nhsn/ltc/index.html>
- ❖ NHSN LTCF Surveillance for *C. difficile*, MRSA, and other Drug-resistant Infections website: <https://www.cdc.gov/nhsn/ltc/cdiff-mrsa/index.html>
  - ❖ Training
  - ❖ Protocols
  - ❖ Data collection forms
  - ❖ Tables of instructions for completing all forms
  - ❖ Key terms

Questions or Need Help? Contact User Support at [nhsn@cdc.gov](mailto:nhsn@cdc.gov)

## Additional Resource Available

- National Nursing Home Quality Improvement Campaign *C. difficile* infections tracking tool
  - <https://www.nhqualitycampaign.org/goalDetail.aspx?g=inf#tab2>
  - Allows nursing homes to document work, monitor outcomes and processes related to outcomes
  - This is an optional tool, it is not part of NHSN, it does **not** automatically transfer data to NHSN

# KNOWLEDGE CHECK

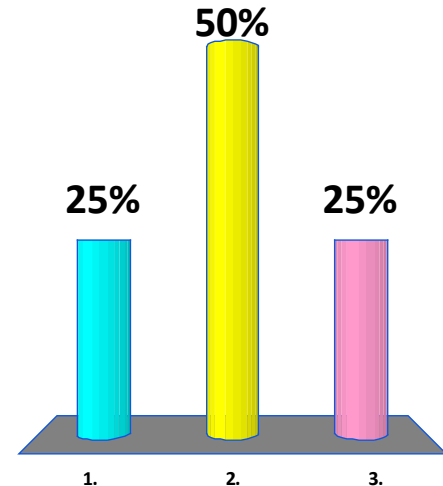
# Case Scenario 1

On April 1, Mrs. Griffin, a resident in your skilled nursing facility (SNF), had several episodes of diarrhea. The doctor was called and a stool sample was ordered for *C. difficile* testing. The resident does not have a history of *C. difficile*, and she does not have a recent history of being in another facility.

The next day, on April 2, a loose stool sample was collected and sent to the lab. The result came back positive for *C. difficile* Toxin A

Is the a CDI LabID Event?

- ✓ 1. Yes
- 2. No
- 3. I'm not sure



# Case Scenario 1, *continued*

## What is the CDI Event Date?

1. April 1 since this was the date the diarrhea started
- ✓ 2. April 2 since this was the date the specimen was collected

### Event Information [HELP](#)

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\*: 4 GEN - GENERAL UNIT

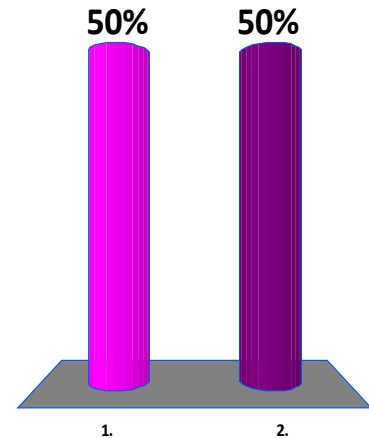
Primary Resident Service Type\*: GENNUR - Long-term general nursing

Has resident been transferred from an acute care facility in the past 3 months\*? **N - No**

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

Date Specimen Collected\*: 04/02/2015

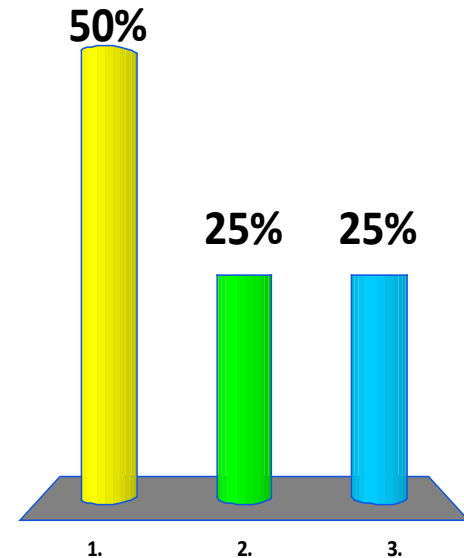
Event Date =  
Specimen  
Collection Date



## Case Scenario 1, *continued*

Since the resident has been in your facility for more than 3 calendar days and has not transferred from an acute care facility in the previous 4 weeks, how will the NHSN application categorize this CDI LabID Event?

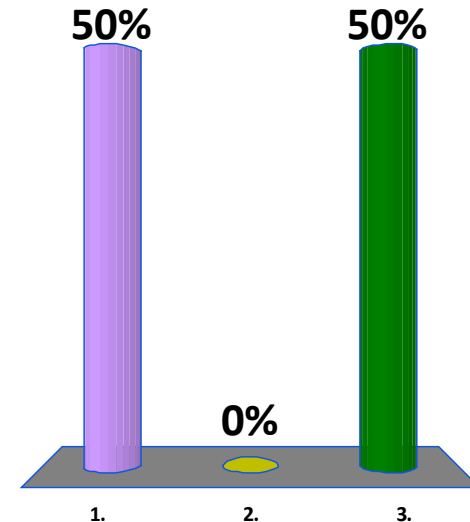
1. Community-onset (CO) LabID Event
- ✓ 2. Long-term Care Facility-onset (LO) LabID Event
3. Acute Care Transfer-Long-term Care Facility-onset (ACT-LO)



## Case Scenario 1, *continued*

What if the resident had spent time in an acute care hospital 10 days ago; how will the NHSN application categorize this CDI LabID Event?

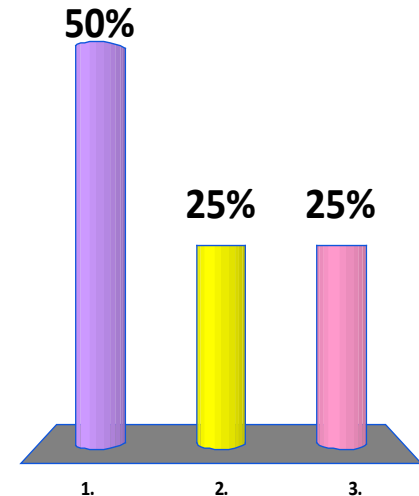
1. Community-onset (CO) LabID Event
2. Long-term Care Facility-onset (LO) LabID Event
- ✓ 3. Acute Care Transfer-Long-term Care Facility-onset (ACT-LO)



## Case Scenario 2

- Mr. Quagmire was first admitted to your nursing home on March 1. On March 2, he has several episodes of diarrhea.
- A loose stool specimen was collected and positive for *C. difficile* toxin on March 3.
- Should the *C. difficile* lab result be submitted to the NHSN application?

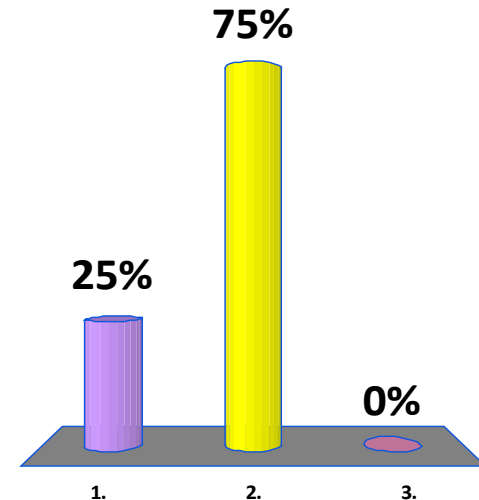
1. I don't know
- ✓ 2. Yes. All non-duplicate *C. difficile* assay test results should be reported
3. No. He was admitted to our nursing home with CDI



## Case Scenario 2, continued

### □ How will NHSN categorize the LabID Event?

- ✓ 1. Community-onset (CO) LabID Event since the specimen was collected  $\leq 3$  calendar days after current admission to the facility
- 2. Long-term Care Facility-onset (LO) LabID Event since the specimen was collected  $> 3$  calendar days after current admission
- 3. Acute Care Transfer-Long-term Care Facility-onset (ACT-LO)



# LabID Event Categorization

*NHSN will categorize CDI LabID Events based on **date of current admission to the facility** and **date of specimen collection***

- ❑ **Community-onset (CO) LabID Event:** Date specimen collected  $\leq 3$  **calendar days** 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  $> 3$  **calendar days** after *current* admission to the facility (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 specimen collection date  $\leq 4$  weeks following date of last transfer from an Acute Care Facility (hospital, long-term acute care hospital, or acute inpatient rehabilitation facility only)

# Enjoy Your Lunch!

See you at 1:00

# LABID EVENT MODULE

Multidrug Resistant Organisms (MDROs)

# Why monitor Multidrug Resistant Organisms (MDROs) long-term care facilities?

- Residents in long term care facilities are at risk of carrying or acquiring multidrug resistant organisms, such as MRSA and VRE.
- Infections from multi-drug resistant organisms can be more severe, harder to treat, and are associated with increased risk of hospitalization, debility, and death, especially in older adults.
- Focused monitoring of multi-drug resistant organisms helps to evaluate trends and changes in the occurrence of these pathogens and related infections in the facility over time.
- Tracking these events will also inform infection prevention staff of the impact of targeted prevention efforts.

## National Healthcare Safety Network (NHSN)

### NHSN

NHSN Login

About NHSN

Enroll Here

Materials for Enrolled Facilities

Ambulatory Surgery Centers

Acute Care Hospitals/Facilities

Long-term Acute Care

### Long-term Care Facilities

Surveillance for C. difficile and MRSA Infections

Surveillance for Urinary Tract Infections

Surveillance for Healthcare Personnel Exposure

Surveillance for Process Measures - Hand Hygiene, Gloves and Gown Adherence

Outpatient Dialysis Facilities

Improvement Management Facilities

Inpatient Psychiatric Facilities

MDRO & CDI LabID Event Calculator

VAE Calculator

FAQs about HCP Influenza Vaccination Summary Reporting in NHSN

Group Users

Analysis Resources

Annual Reports

CMS Requirements

National Quality Forum (NQF)

Newsletters

E-mail Updates

CDC > NHSN > Materials for Enrolled Facilities

## Tracking Infections in Long-term Care Facilities

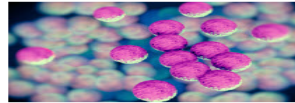


Eliminating infections, many of which are preventable, is a significant way to improve care and decrease costs. CDC's National Healthcare Safety Network provides long-term care facilities with a customized system to track infections in a streamlined and systematic way. When facilities track infections, they can identify problems and track progress toward stopping infections. On the national level, data entered into NHSN will gauge progress toward national healthcare-associated infection goals.

NHSN's long-term care component is ideal for use by: nursing homes, skilled nursing facilities, chronic care facilities, and assisted living and residential care facilities

### MDRO/C.Diff - Surveillance for C. difficile, MRSA, and other Drug-resistant Infections

- Training
- Protocols
- Forms
- Support Materials
- Analysis Resources
- FAQs



[More >](#)

### Surveillance for Healthcare Personnel Exposure

- Training
- Protocols
- Forms
- Support Materials
- Analysis Resources
- FAQs



[More >](#)

### UTI - Report Urinary Tract Infections

- Training
- Protocols
- Forms
- Support Materials
- Analysis Resources
- FAQs



[More >](#)



### Report Prevention Process Measures - Hand Hygiene, Gloves and Gown Adherence

- Training
- Protocols
- Forms
- Support Materials
- Analysis Resources
- FAQs



[More >](#)

### Surveillance for Healthcare Personnel Vaccination

- Training
- Protocols
- Forms
- Support Materials
- Analysis Resources
- FAQs



[More >](#)

# Multi-drug Resistant Organisms (MDROs) Options

- A facility can chose to monitor one or more of the following organisms:
  - *Staphylococcus aureus*, methicillin-resistant (**MRSA**)
  - *Staphylococcus aureus*, methicillin-susceptible (**MSSA**)
  - 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**)

# Requirements

- ❖ A NHSN Monthly Reporting Plan for the LTCF (CDC 57.141) must be completed for each calendar month in which a facility plans to enter data into the NHSN.
- ❖ Surveillance must occur in all resident care locations (facility-wide inpatient/FacWideIN) and for all specimen sources.
- ❖ For each participating month, the facility must report numerators (MDRO LabID Events) and denominators (*number of resident admissions and number of resident-days* for the entire facility (FacWideIN)).

# Monthly Reporting Plan for LTCF

- ❖ Facility-wide Inpatient (FACWIDEIN) is default location
- ❖ Select one or more MDROs as specific organism type
- ❖ LabID Event *All Specimens* is default



## Add Monthly Reporting Plan

Mandatory fields marked with \*

Facility ID \*:

Month \*:

Year \*:

No Long Term Care Facility Component Modules Followed this Month

### HAI Module

	Locations	UTI
	Facility-wide Inpatient (FacWIDEIn)	<input type="checkbox"/>

### LabID Event Module

	Locations	Specific Organism Type	Lab ID Event All Specimens
	Facility-wide Inpatient (FacWIDEIn)	MRSA - MRSA	<input checked="" type="checkbox"/>
	Facility-wide Inpatient (FacWIDEIn)	VRE - VRE	<input checked="" type="checkbox"/>
	Facility-wide Inpatient (FacWIDEIn)		<input type="checkbox"/>

Add Row

Clear All Rows

Copy from Previous Month




Save

Back

# Use Customizable NHSN LabID Event form to collect data

- **Numerator data** (one form for each event being recorded)
  - Laboratory-identified MDRO or CDI Event for LTCF Form (CDC 56.138)
  - Collect and report each MDRO event that meets the LabID Event definition. This form is also used for CDI events, if reporting
  - Blank form: [https://www.cdc.gov/nhsn/forms/57.138\\_labidevent\\_ltcf\\_blank.pdf](https://www.cdc.gov/nhsn/forms/57.138_labidevent_ltcf_blank.pdf)
  - Form instructions: <https://www.cdc.gov/nhsn/forms/instr/57.138-toi-for-lab-id-event.pdf>

Form Approved  
OMB No. 0920-0666  
Exp. Date: 11/30/2019  
www.cdc.gov/nhsn

 **Laboratory-identified MDRO or CDI Event for LTCF**

Page 1 of 1

*required for saving	
Facility ID:	Event #:
*Resident ID:	*Social Security #:
Medicare number (or comparable railroad insurance number):	
Resident Name, Last:	First: Middle:
*Gender: M F Other	*Date of Birth: __/__/__
Ethnicity (specify):	Race (specify):
*Resident type: <input type="checkbox"/> Short-stay <input type="checkbox"/> Long-stay	
*Date of First Admission to Facility: __/__/__	*Date of Current Admission to Facility: __/__/__
<b>Event Details</b>	
*Event Type: LabID	*Date Specimen Collected: __/__/__
*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 dem...	
<input type="checkbox"/> Short-term rehab (sub...	

# MULTIDRUG RESISTANT ORGANISM (MDRO) KEY TERMS AND DEFINITIONS

# Definitions: Gram-stain positive organisms

- **MRSA:** *S. aureus* testing resistant to oxacillin, methicillin, or ceftazidime, by standard susceptibility testing methods or by a positive result from an FDA-approved test for direct MRSA detection from that specimen source.
- **MSSA:** *S. aureus* testing intermediate or susceptible to oxacillin, methicillin, and ceftazidime by standard susceptibility testing methods; a positive result from an FDA approved test for direct MSSA detection from that specimen source; or a negative result from an FDA-approved test for direct MRSA detection from a specimen source.
- **VRE:** Any *Enterococcus species* that is resistant to vancomycin, by standard susceptibility testing methods or by a positive result from an FDA-approved test for VRE detection from that specimen source.

# Definitions: Gram-stain negative organisms

- **CephR-Klebsiella:** *Klebsiella* species testing non-susceptible (i.e., resistant or intermediate) to cephalosporin antibiotics like ceftazidime, cefotaxime, ceftriaxone, or cefepime.
- **CRE:** *Escherichia coli* (*E. coli*), *Klebsiella* species, or *Enterobacter* species testing resistant to imipenem, meropenem, doripenem, or ertapenem by standard susceptibility testing methods OR by production of a carbapenemase demonstrated using a recognized test (e.g., polymerase chain reaction, metallo- $\beta$ -lactamase test, modified-Hodge test, Carba-NP).
  - **Note:** CRE surveillance requires facilities to monitor for all three organisms (CRE-*E. coli*, CRE-*Klebsiella* spp., and CRE-*Enterobacter* spp.).

# Definitions: Gram-stain negative organisms, continued

- **MDR-*Acinetobacter***: Any *Acinetobacter* species testing non-susceptible (i.e., resistant or intermediate) to at least one agent in at least 3 antimicrobial classes of the following 6 antimicrobial classes:

<b>Antimicrobial Class</b>	<b>Antimicrobial Agents</b>
<b><math>\beta</math>-lactams and <math>\beta</math>-lactam/<math>\beta</math>-lactamase inhibitor combinations</b>	Piperacillin, Piperacillin/tazobactam
<b>Sulbactam</b>	Ampicillin/sulbactam
<b>Cephalosporins</b>	Cefepime, Ceftazidime
<b>Carbapenems</b>	Imipenem, Meropenem, Doripenem
<b>Aminoglycosides</b>	Amikacin, Gentamicin, Tobramycin
<b>Fluoroquinolones</b>	Ciprofloxacin, Levofloxacin

## **Definition: MDRO positive isolate**

**Any specimen, obtained for clinical decision making, testing positive for an MDRO.**

**Note: Excludes tests related to active surveillance testing**

## Definition: MDRO LabID Event

A MDRO positive isolate, tested on any laboratory specimen source and the resident has no prior positive for the same organism from any specimen source collected in the same calendar month, except when a unique blood source is identified.

## EXAMPLE:

On January 2, Mr. Cleveland Brown had a positive MRSA urine culture. Since this was the first positive MRSA specimen collected for him during the calendar month, the specimen is considered a MDRO positive isolate and should be submitted to the NHSN as a MRSA LabID Event. The following week, he had MRSA cultured from an infected decubitus ulcer. The MRSA wound culture was considered a duplicate MDRO positive isolate, since it was the second non-blood MRSA isolate collected from Mr. Cleveland Brown during the same calendar month, and therefore not reported to the NHSN.

## Definition: Unique Blood Source (MDRO LabID Event)

A MDRO isolate identified in a resident with no prior positive blood culture for the same MDRO in the past 2 weeks (<15 days), even across calendar months and admissions

*NOTE: A unique blood source isolate must be reported even if the resident had this same MDRO previously isolated in a non-blood specimen earlier during the same calendar month.*

## For each MDRO being (*See Figure 2*)

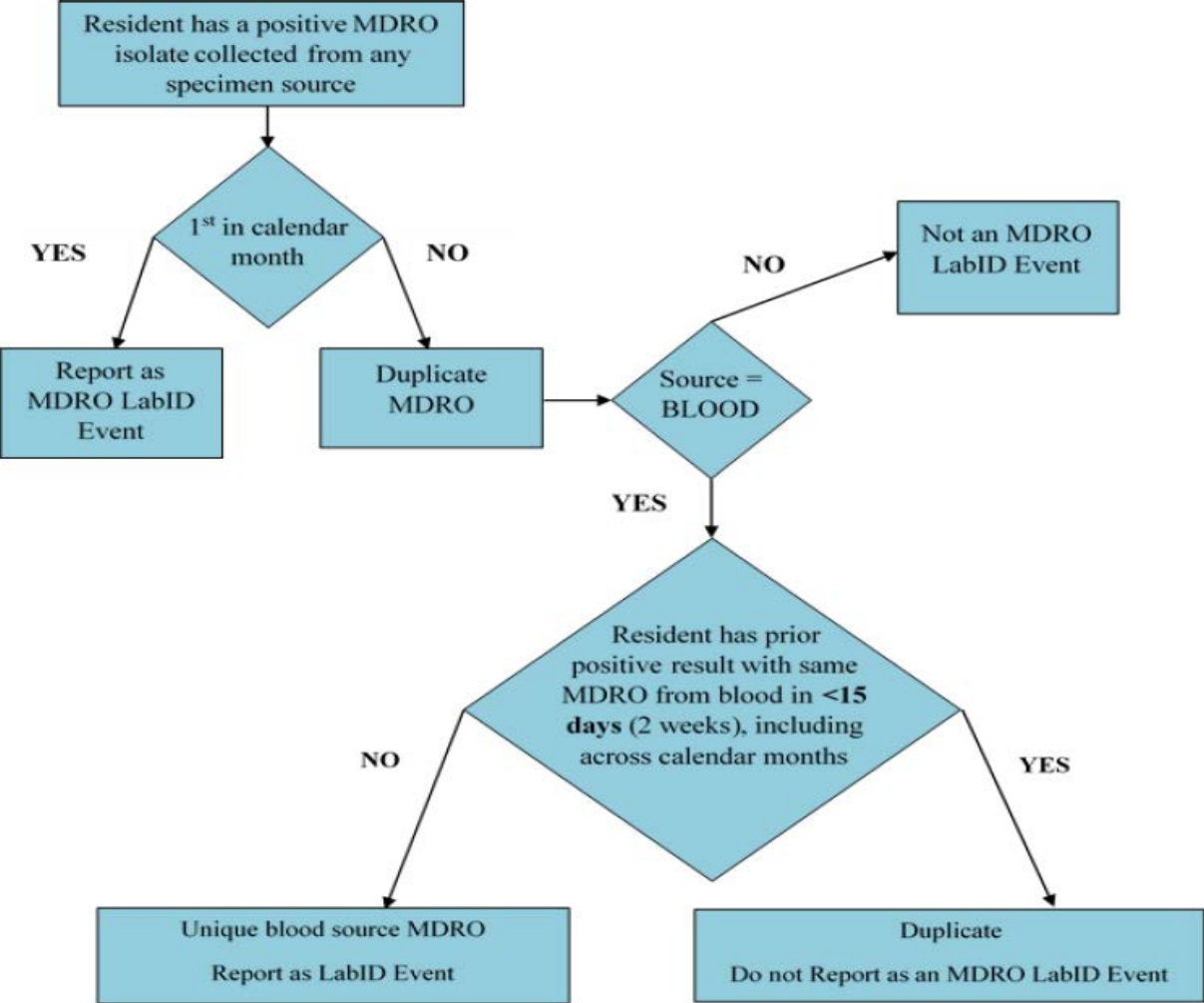
- ❖ All first MDRO isolates (chronologically) per resident, per month are reported as a LabID event regardless of the specimen source [EXCLUDES tests related to active surveillance testing];
- ❖ If a blood isolate is the first positive MDRO specimen for the month, it should be entered as a LabID Event even if the resident had a prior blood reported within two weeks in the previous month;
- ❖ If a blood specimen is entered as the first specimen of the month, then no non-blood specimens can be entered for the remainder of that calendar month for that resident. However, another blood specimen may be entered if it represents a unique blood isolate (>2 weeks since previous same MDRO blood isolate).

## EXAMPLE

On December 27, Mr. Clean had a positive MRSA blood culture that was entered into the NHSN as a MRSA LabID Event. On January 2, he had another positive MRSA blood culture that was entered into the NHSN because it was the first positive MRSA isolate for the new calendar month. He had a wound that also tested positive for MRSA on January 20. This specimen was not entered into the NHSN since it represented a duplicate MDRO laboratory isolate for January.

Again, on January 27, Mr. Clean had another positive MRSA blood culture. Since the isolate represented a unique blood source (>14 days since the last positive MRSA blood specimen), the MRSA blood specimen was submitted to the NHSN as a MRSA LabID Event.

FIGURE 2



# Let's Practice: Meet Mr. Smith

Assume this is the line list for Mr. Smith and all specimens collected are shown

	Current Admit Date/	Specimen Collection Date	Specimen Source	Lab Result	Report as a LabID Event?	Explanation
1	2/1/17	2/2/17	Urine	MRSA	<b>yes</b>	1st MRSA from any specimen in calendar month
2	2/1/17	2/17/17	Wound	MRSA	<b>No</b>	Non-blood source, prior positive MRSA isolate this calendar month
3	2/1/17	2/21/17	Blood	MRSA	<b>yes</b>	Unique blood source and no prior MRSA blood in <15 days
4	2/1/17	2/26/17	Blood	MRSA	<b>No</b>	<15 days from previous MRSA+ blood specimen
5	2/1/17	2/28/17	Nasal screen	MRSA	<b>No</b>	Screening test results are excluded from LabID events
6	2/1/17	3/1/17	Blood	MRSA	<b>yes</b>	1 <sup>st</sup> MRSA positive isolate collected in new calendar month
7	2/1/17	3/11/17	Urine	MRSA	<b>No</b>	Non-blood source, prior positive MRSA isolate this calendar month

# Submitting MDRO LabID Event in the NHSN

# Entering MDRO LabID Event

The screenshot displays the NHSN - National Healthcare Safety Network interface. At the top, a dark blue header contains the text "NHSN - National Healthcare Safety Network" on the left and a user profile for "AANTILA Angela LTCF Test Facility" on the right. Below the header, a light blue navigation bar reads "NHSN Home" and "NHSN Long Term Care Facility Component Home Page". A sidebar on the left lists various menu items: Alerts, Reporting Plan, Resident, Event, Summary Data, Surveys, Analysis, Users, Facility, Group, and Logout. The "Event" item is highlighted in a darker blue, and a dropdown menu is open, showing "Add", "Find", and "Incomplete" options. A yellow arrow points from the right towards the "Add" option in the dropdown menu. The main content area below the navigation bar features the heading "COMPLETE THESE ITEMS" and is currently empty.

# Entering MDRO LabID Event

## Resident Type

**NHSN Home**

- Alerts
- Reporting Plan ▶
- Resident ▶
- Event ▶
- Summary Data ▶
- Surveys ▶
- Analysis ▶
- Users ▶
- Facility ▶
- Group ▶
- Logout

**Add Event**

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

**Resident Information**

Facility ID \*: GVB3\_test (ID 41141) ▼  
Resident ID \*: 12345 Find Find Events for Resident Social Security # \*: 111-11-1111  
Medicare number (or comparable railroad insurance number):  
Last Name: Love First Name: Boat  
Middle Name:  
Gender \*: F - Female ▼ Date of Birth \*: 02/14/1930 10  
Ethnicity: Race:  American Indian/Alaska Native  Asian  
 Black or African American  Native  
 White

Resident type \*: **SS - Short-stay**  
LS - Long Stay

Short-stay: Resident has been in facility for ≤ 100 days from date of first admission.  
Long-stay: Resident has been in facility for > 100 days from date of first admission

# Entering MDRO LabID Event

## First and Current Admission

NHSN - National Healthcare Safety Network

NHSN Home

Alerts

Reporting Plan

Resident



Add Event

Mandatory fields marked with \*

Fields required for record completion marked with \*\*

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

The most recent date the resident entered the facility. If the resident enters the facility for the first time and has not left for > 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 > 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.

Logout

Alaska Native  
 Black or African American  
 White

Resident type \*: LS - Long Stay

Date of First Admission to Facility \*: 05/05/2015

Date of Current Admission to Facility \*: 12/20/2016

# Entering MDRO LabID Event

## Event Type and Date of Event

**NHSN Home**

- Alerts
- Reporting Plan
- Resident
- Event
- Summary Data
- Surveys
- Analysis
- Users
- Facility
- Group
- Logout

### Add Event

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

#### Resident Information

Facility ID \*: Angela LTCF Test Facility (ID 39455) ▼  
Resident ID \*: 12345 Find Find Events for Resident Social Security # \*: 545-48-9637  
Medicare number (or comparable railroad insurance number):  
Last Name: Sue Middle Name:  
Gender \*: F - Female Date of Birth \*: 01/25/1940  
Ethnicity: Race:  American Indian/Alaska Native  Asian  
 Black or African American  Native Hawaiian/Other Pacific Islander  
 White First Name: Mary  
Resident type \*: LS - Long Stay  
Date of First Admission to Facility \*: 05/05/2015  
Event Information  
Event Type \*: LABID - Laboratory-identified MDRO or CDI Event  
UTI - Urinary Tract Infection  
Comments

Data of specimen collection

# Entering MDRO-MRSA LabID Event

## *Specific Organism Type*

Resident type \*:

Date of First Admission to Facility \*:

Date of Current Admission to Facility \*:

---

**Event Information**

Event Type \*:

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

Event

Select MRSA as specific organism type

# Entering MDRO-MRSA LabID Event

## *Specimen Body Site/System*

White

Resident type \*:

Date of First Admission to Facility \*:

Date of Current Admission to Facility \*:

### Event Information

Event Type \*:

Specific Organism Type \*:

Specimen Body Site/System \*:

Specimen Source \*:

- CARD - Cardiovascular/ Circulatory/ Lymphatics
- CNS - Central Nervous System
- DIGEST - Digestive System
- EENT - Ear, Eye, Nose, and Throat
- ENDCRN - Endocrine System
- GU - GenitoUrinary System
- MSC - Musculoskeletal System
- REPRF - Reproductive Female
- RESP - Respiratory System
- SST - Skin / Soft tissue
- UNSPECIFD - Unspecified Body Site Specimen

Select specimen body site/system

# Entering MDRO-MRSA LabID Event

## *Specimen Source*

### Event Information

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

Specific Organism Type \*: MRSA - MRSA ▼

Specimen Body Site/System \*: ARTERY - Artery sample ▼

Specimen Source \*: BLDSPC - Blood specimen

- CHYLOUS - Chylous fluid sample
- HEARTSPC - Specimen from heart
- HEARTVEG - Vegetation from heart valve
- LYMPH - Lymph sample
- LYMPHNODE - Lymph node sample
- NOSCARD - Cardiovascular (NOS)
- PERICFLD - Pericardial fluid specimen
- PERICSPC - Specimen from pericardium
- SPLEEN - Specimen from spleen
- VEIN - Vein sample
- WBC - White blood cell sample

Select *specimen source*

# Entering MDRO-MRSA LabID Event

## *Resident Care Location*

Select location of resident at time of specimen collection. *Note:* These are locations set-up by the facility

### Event Information

Event Type \*: LABID - Laboratory-identified MDRO

Specific Organism Type \*: MRSA - MRSA

Specimen Body Site/System \*: CARDIOVASCULAR/ Circulatory/ Lymphatics

Specimen Source \*

Resident Care Location \*

- 1 SOUTH - 1 SOUTH BARIATRIC
- 2 EAST - 2 EAST GENERAL
- 2 NORTH - 2 NORTH PSYCHIATRIC
- 2 SOUTH - 2 SOUTH HOSPICE
- 2 WEST - 2 WEST DEMENTIA
- 3 WEST - 3 WEST SNF
- 5 EAST - 5 EAST VENT
- 5 WEST - 5 WEST SNF

# Entering MDRO-MRSA LabID Event

## *Primary Service Type*

### Event Information

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

Specific Organism Type \*: MRSA - MRSA

Specimen Body Site/System \*: CARD - Cardiovascular/Circulatory/Lymphatics

Specimen Source \*: BARIA - Bariatric

Resident Care Location \*: HOSP - Hospice/Palliative

DEMENT - Long-term dementia

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

PSYCH - Long-term psychiatric

SKNUR - Skilled nursing/short term rehab

VENT - Ventilator

IS Infection of colonization with this specific org

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

# Entering MDRO-MRSA LabID Event *Transfer from Acute Care Facility*

## Event Information

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

Specific Organism Type \*: MRSA - MRSA ▾

Specimen Body Site/System \*: CARD - Cardiovascular/ Circulatory/ Lymphatics ▾

Specimen Source \*: BLDSPC - Blood specimen ▾

Resident Care Location \*: 2 EAST - 2 EAST GENERAL ▾

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  
N - No

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



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 \*: 01/03/2017 10


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

# Entering MDRO-MRSA LabID Event

## *Documented Evidence Previous.....*

### Event Information

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

Date Specimen Collected \*: 01/12/2017 

Specific Organism Type \*: MRSA - MRSA ▼


Specimen Body Site/System \*: CARD - Cardiovascular/ Circulatory/ Lymphatics ▼

Specimen Source \*: BLDSPC - Blood specimen ▼

Resident Care Location \*: 2 EAST - 2 EAST GENERAL ▼

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 \*: 01/03/2017 

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

Documented evidence of previous infection or colonization with this specific organism type from a previously reported LabID Event in any prior month? N - No

Auto-populated by the NHSN.  
Non-editable by users

# Entering MDRO-MRSA LabID Event: Optional: *Custom Fields and Comments*

**Custom Fields** [Help](#)

PRIOR HX:

Optional, but must be set-up before reporting event

**Comments**

TRANSFER FROM STAYAWAY ACUTE CARE FACILITY.

Free text

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

**Resident Information**

Facility ID \*:    
Resident ID \*:      
Social Security #:    
Medicare number (or comparable railroad insurance number):    
First Name:    
Date of Birth \*:     
Last Name:    
Middle Name:    
Gender \*:    
Ethnicity:    
Race:  American Indian/Alaska Native  Asian   
 Black or African American  Native Hawaiian/Other Pacific Islander   
 White

Resident type \*:    
Date of First Admission to Facility \*:     
Date of Current Admission to Facility \*:

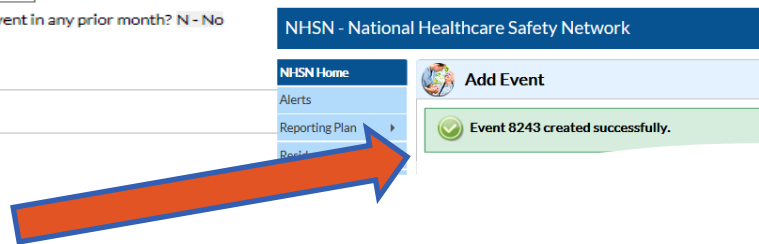
**Event Information**

Event Type \*:    
Date Specimen Collected \*:     
Specific Organism Type \*:    
Specimen Body Site/System \*:    
Specimen Source \*:    
Resident Care Location \*:    
Primary Resident Service Type \*:    
Has resident been transferred from an acute care facility in the past 4 weeks \*:    
If Yes, date of last transfer from acute care to your facility \*:     
If Yes, was the resident on antibiotic therapy for this specific organism type at the time of transfer to your facility \*:    
Documented evidence of previous infection or colonization with this specific organism type from a previously reported LabID Event in any prior month? N - No

**Custom Fields** [Help](#)

**Comments**

**Comments**



NHSN - National Healthcare Safety Network

- NHSN Home
- Alerts
- Reporting Plan
- Resident

**Add Event**

Event 8243 created successfully.

# Denominator Data

# Denominator Reporting (Monthly Summary)

## Two form options for reporting denominators for MDRO

- CDC 57.139: MDRO and CDI LabID Event Reporting Monthly summary Data for LTCF**
  - Resembles Summary Data page in the NHSN application
  - Specific to LabID Event reporting (CDI and/or MDRO)
  - Total counts only
- CDC 57.142: Denominators for LTCF**
  - One form for the month to collect MDRO, CDI, and/or UTI denominator data
  - Daily counts that must be summed at the end of the month

Forms and Table of Instructions (TOIs) available under *Data Collection Forms* at: <https://www.cdc.gov/nhsn/ltc/cdiff-mrsa/index.html>

### MDRO and CDI LabID Event Reporting Monthly Summary Data for LTCF

Page 1 of 1  
\*required for saving      \*\*conditionally required based upon monitoring selection in Monthly Reporting Plan

Facility ID #: \_\_\_\_\_ \*Month: \_\_\_\_\_ \*Year: \_\_\_\_\_ \*Location Code: \_\_\_\_\_

Resident Days: \_\_\_\_\_ \*Resident Admissions: \_\_\_\_\_ \*\*Number of Admissions on C. diff Treatment: \_\_\_\_\_

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

Custom Fields (Optional)

Label \_\_\_\_\_

Data \_\_\_\_\_



Form Approved  
OMB No. 0920-0666  
Exp. Date: 11/30/2019  
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### Denominators for LTCF

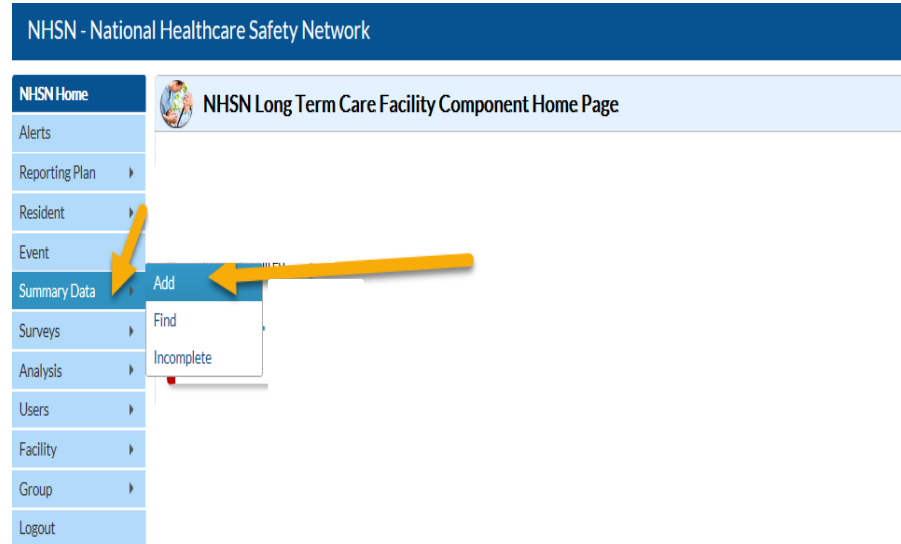
Page 1 of 1  
\*required for saving

Facility ID: \_\_\_\_\_ \*Location Code: \_\_\_\_\_ \*Month: \_\_\_\_\_ \*Year: \_\_\_\_\_

Date	*Number of residents	*Number of residents with a urinary catheter	*New antibiotic starts for UTI indication	*Number of urine cultures ordered	*Number of admissions	Number of admissions on C. diff treatment
1						
2						
3						
4						
5						
6						

# Entering MDRO Denominator Data into NHSN

- Referred to as Summary Data
- At the end of the month, enter each monthly total denominator for the month into the NHSN application
- Locate 'Summary Data' on left-hand navigation Bar, and then 'Add'



# Entering MDRO Denominator Data in NHSN

- NHSN Home
- Alerts
- Reporting Plan ▶
- Resident ▶
- Event ▶
- Summary Data ▶ **Add**
- Surveys ▶ Find
- Analysis ▶ Incomplete
- Users ▶
- Facility ▶
- Group ▶
- Logout

## Add Monthly Summary Data

[Print Form](#)

Fields required for record completion marked with \*\*

Facility ID \*: GVB3\_test (ID 41141) ▼  
 Month \*: January ▼  
 Year \*: 2017 ▼

### 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:	LabID Event (All specimens)	MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C. difficile	MDR-Acinetobacter
Facility-wide Inpatient (FacWIDEIn)	<input type="text"/> *	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Resident Days: <input type="text"/> *	Report No Events	<input type="checkbox"/> **	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> **	<input type="checkbox"/> **	<input type="checkbox"/> **	<input type="checkbox"/>	<input type="checkbox"/>

### Prevention Process Measures

- No long term care locations selected on monthly reporting plan

**Save** **Back**

# Entering MDRO Denominator Data into NHSN

- Enter month, and year for which denominator data will be reported
- Enter the total Resident Admissions and Resident Days

**Add Monthly Summary Data**

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

Facility ID \*: [GVB3\_test (ID 41141)]  
Month \*: [January]  
Year \*: [2017]

**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:	Resident Days:	MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C. difficile	MDR-Acinetobacter
Facility-wide Inpatient (FacWIDEIn)	[ ] *	[ ] *	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> **	<input type="checkbox"/> **	<input type="checkbox"/> **	<input type="checkbox"/>	<input type="checkbox"/>

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

**Check box will appear for each in-plan organism**

**Add check-mark to "report no events" by each in-plan MDRO in which no events identified/submitted to NHSN during month, as indicated by red asterisk**

# Complete Monthly Summary for MDRO



## Add Monthly Summary Data

Mandatory fields marked with \*

Fields required for record completion marked with \*\*

Facility ID \*: GVB3\_test (ID 41141) ▾

Month \*: January ▾

Year \*: 2017 ▾

### 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:	LabID Event (All specimens)	MRSA	VRE	CephR-Klebsiella	CRE-Ecoli	CRE-Enterobacter	CRE-Klebsiella	C. difficile	MDR-Acinetobacter
Facility-wide Inpatient (FacWIDEIn)	25 *	LabID Event (All specimens)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Resident Days: 1301 *	Report No Events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/> **	<input checked="" type="checkbox"/> **	<input checked="" type="checkbox"/> **	<input type="checkbox"/>	<input type="checkbox"/>

### Prevention Process Measures

- No long term care locations selected on monthly reporting plan



Back



## Add Monthly Summary Data



Summary data created successfully.

# LabID Event Categorization for MDRO

*NHSN will categorize MDRO LabID Events based on **date of current admission to the facility** and **date of specimen collection***

- **Community-onset (CO) LabID Event:** Date specimen collected  $\leq 3$  **calendar days** 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  $> 3$  **calendar days** after *current* admission to the facility (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 specimen collection date  $\leq 4$  **weeks** following date of last transfer from an Acute Care Facility (hospital, long-term acute care hospital, or acute inpatient rehabilitation facility only)

# EXAMPLE: NHSN Classification of LabID Events as Community-onset (CO) or LTCF-onset (LO)

<b>LTCF Admission Date</b>				
March 1 <sup>st</sup>	March 2 <sup>nd</sup>	March 3 <sup>rd</sup>	March 4 <sup>th</sup>	March 5 <sup>th</sup>
Day 1	Day 2	Day 3	Day 4	Day 5
<b>Community-Onset (CO)</b>			<b>Long-term Care Facility Onset (LO)</b>	

# Key Points for MDRO LabID Event Reporting

- ❖ MDRO LabID Event reporting is **ONLY** for collecting and tracking isolates from positive cultures that are taken for "clinical" purposes (i.e., for diagnosis and treatment), which means that Active Surveillance Culture/Testing (e.g., nasal swabs for MRSA or perirectal swabs for VRE) results are not reported as LabID Events.
- ❖ When performing LabID Event reporting for MDROs, the facility must report the selected MDRO(s) from all specimen sources, and from all locations within the long-term care facility setting, referred to as FacWideIN.
- ❖ NHSN recommends facilities keep an internal line listing log of all positive isolates for reference in LabID event reporting.

# Key Points for CDI LabID Event Reporting

- ❖ All first MDRO isolates (chronologically) per resident, per month are reported as a LabID event regardless of the specimen source.
- ❖ If the first MDRO isolate for the resident and calendar month is a blood isolate, the specimen should be reported as a LabID event, even if a previous MDRO blood isolate was reported in the previous 2 weeks across calendar months.
- ❖ If a blood specimen is entered as the first specimen of the month, then no non-blood specimens can be entered for the remainder of that calendar month for that resident. However, another blood specimen may be entered if it represents a unique blood isolate (>14 days).
- ❖ As a general rule, at a maximum, there should be no more than 2 blood isolates (which would be very rare) and 1 other specimen source isolate per MDRO type reported for the same resident during a calendar month.

# Key Points for MDRO LabID Event Reporting

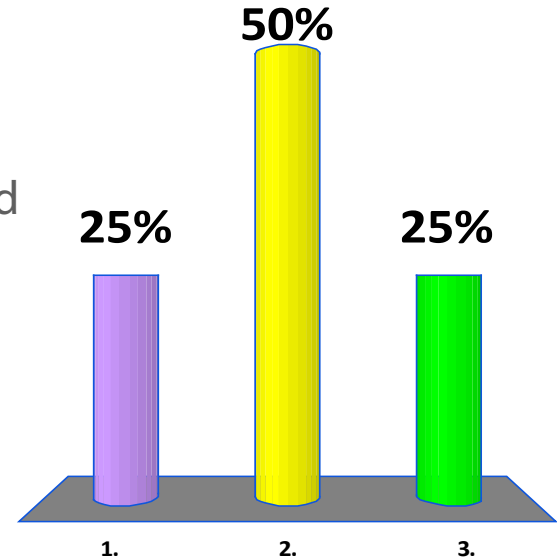
- ❖ LabID Event rules apply to specimens collected while the resident is receiving care from the LTCF, including specimens collected from an emergency department (ED) or outpatient (OP) setting during a resident's current admission. Note: Laboratory results obtained before a resident's admission to the LTCF or during an admission in another facility are excluded from LabID Event reporting.
- ❖ If a specimen is collected while the resident is receiving care from an ED or OP setting, the Resident Care Location and Primary Resident Service Type should indicate the resident's primary LTCF location and service type prior to the ED or OP visit.

# KNOWLEDGE CHECK

# Case Scenario 1

On April 1, Mr. Einstein, a resident in your nursing home, had a wound culture that tested positive for MRSA. Since this was the first MRSA specimen for Mr. Einstein for the month of April, it was submitted to NHSN as a MDRO-MRSA LabID Event. Two weeks later, in April 16, Mr. Einstein had a urine culture that tested positive for MRSA. Should this result be submitted to NHSN as a MRSA LabID Event?

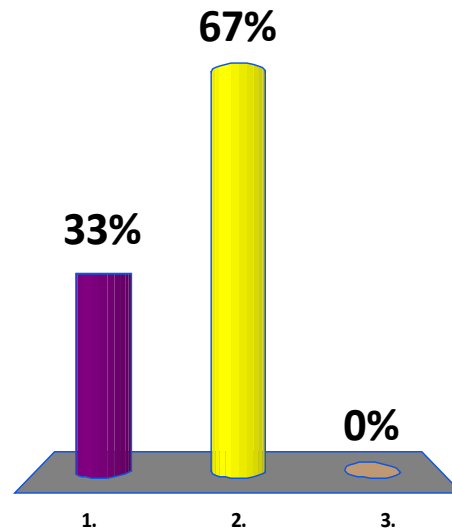
1. Yes. This is a new specimen source
- ✓ 2. No. Only the first non-blood MRSA specimen should be submitted for the calendar month.
3. I'm not sure



## Case Scenario 2

On March 5, Mr. Herbert had a positive urine culture with MRSA. Since this was the first MRSA specimen for Mr. Herbert for the month of March, it was submitted to NHSN as a MDRO-MRSA LabID Event. On March 10, he had a positive MRSA blood culture. Should this result be submitted to NHSN as a MRSA LabID Event?

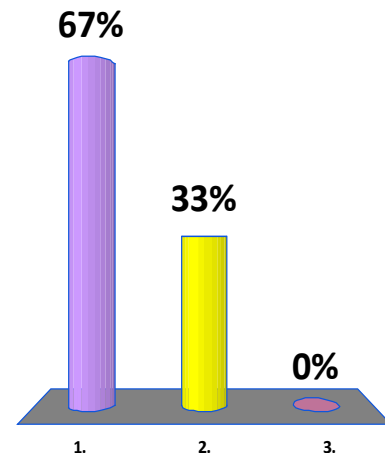
- ✓ 1. Yes. Since the specimen is a blood source
- 2. No. Only the first MRSA specimen should be submitted for the calendar month
- 3. I'm not sure



## Case Scenario 2, continued

On March 5, Mr. Herbert had a positive urine culture with MRSA. Since this was the first MRSA specimen for Mr. Herbert for the month of March, it was submitted to NHSN as a MDRO-MRSA LabID Event. On March 10, he had a positive MRSA blood culture, which was also submitted as a MDRO-MRSA LabID Event since it represented a unique blood source. Another blood culture was collected more than 2 weeks later, on March 28. Should this blood culture result be submitted to NHSN as a MRSA LabID Event?

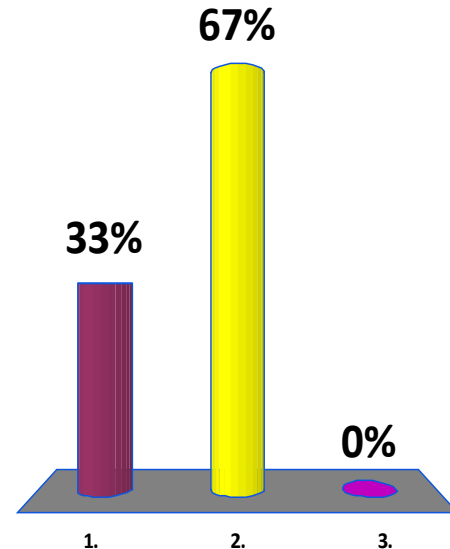
- ✓ 1. Yes. Since the previous blood specimen was collected more than 14 days ago
2. No. Only the first MRSA blood should be submitted for the calendar month.
3. I'm not sure



## Case Scenario 3

On June 30, Dr. Seuss had a positive MRSA blood culture. Less than a week later, on July 5, he had another MRSA positive blood culture. He's had no other MRSA positive cultures during the month of July. Should the blood culture collected on July 5<sup>th</sup> be submitted to NHSN as a MRSA LabID Event?

- ✓ 1. Yes. Since the blood specimen represents the first MRSA positive specimen for the new calendar month.
- 2. No. The previous MRSA positive blood test was collected less than 2 weeks ago.
- 3. I'm not sure



## Case Scenario 4

Mr. Griffin is a resident in your skilled nursing facility. On March 1, he has a fever and a red, draining decubitus ulcer. The on call physician decides to send Mr. Griffin to the local ER for evaluation. After evaluation in the ER, Mr. Griffin was admitted to the hospital where blood and wound cultures tested positive for MRSA. Since he was a resident in your skilled nursing facility, should you submit the MRSA positive blood and wound cultures to the NHSN as LabID Events?

1. Yes. The nursing home must report all positive specimens for its residents.
- ✓ 2. No. Specimens collected during an inpatient admission in another facility are not submitted as LabID events for the nursing home.
3. It depends on the date the specimens were collected.

