Introduction to NHSN Analysis

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NCEZID, Division of Healthcare Quality Promotion
Centers for Disease Control and Prevention

2022 NHSN Annual Training

Tuesday March 22, 2022
Learning Objectives

- Understand the scope and structure of NHSN data entry and analysis functions
- Understand how to modify NHSN reports in the application
- Gain exposure to more customized analyses available in NHSN
- Describe and show how to use NHSN analysis to conduct data quality checks
- Identify specific analysis reports found in the NHSN Reports Advanced Folder
- Understand the different NHSN Data Quality Activities in place
A Message About the Data

- All data in this presentation has been created in a testing environment and is for training purposes only. Information seen on images during this presentation do not represent any actual data submitted to NHSN by participating facilities.
Data Analysis Preparation
Data Entry Sources

- **Event**
  - All infection events: CLABSI, CAUTI, SSI, LABID, etc.

- **Procedure**
  - Place to add all procedures, with covariates. Used for Procedure records

- **Summary Data**
  - Summary data forms for Device-Associated and MDRO/CDI surveillance

- **Surveys**
  - Facility level data collected once a year for previous calendar year
Accessing Data Entry Screens

3 Options: Add, Find, Incomplete
- Click ‘Add’ to enter data
- ‘Find’ is used to look for previously entered data forms.
- ‘Incomplete’ lists the forms that have been started, but all the required fields have not been completed.

The ‘Find’ and ‘Incomplete’ options are very useful for investigating data quality issues.
Annual Surveys and Data Analysis

- Every year a new survey is entered into NHSN to reflect data from the prior calendar year.
- SIRS will use the most recent annual survey on file for the current SIRs:
  - Right now, majority should have completed a 2021 annual survey
  - Those values will be used to calculate 2021 and 2022 SIRs
- Under the new baseline, SIRS will be risk adjusted using the corresponding annual survey from that year.
- If the annual survey from that year hasn’t been completed, SIRs will be risk adjusted using the most recent available survey.
NHSN User Data Entry

NHSN Analysis Functionality

Desired Reports – Rate, SIR, CMS, Custom, etc.
Monthly Reporting Plans (MRPs)

- Used by all NHSN facilities to inform CDC which patient safety modules will be used in a given month
- Participating facilities must select the modules used, if any, the events, procedures, and/or locations that will be monitored in-plan
- MRP is the first in indicating what data will be submitted from NHSN to CMS as part of the Quality Reporting Program
- Only in-plan data are submitted to CMS in accordance with CMS’s Quality Reporting Program
Accessing Monthly Reporting Plan

You can Add/Find a Monthly Reporting Plan using the left side menu bar. The ‘Find’ option is useful when investigating data quality issue.
Knowledge Check

True or False

You can add Inactive Locations to monthly reporting plans
Alerts

- Alerts are automatic checks in NHSN that remind you of incomplete or missing in-plan data.

- Before using the analysis function, make sure to clear all (relevant) alerts.
- Found on the Home Page, or by clicking on the ‘Alerts’ tab on the sidebar.
Alerts

- When an alert category is selected all incidents will be listed on a separate page for selection.
- Each incident will need to be resolved in order for the alert category to clear.
Resolving Alerts

- Incomplete Summary Data Form
  - For DA and MDRO/CDI Events
- If there are no events for a given month, check the Report No Events box
- If not, alerts will appear if you have completed a summary form for a unit listed in your reporting plan but have not entered events.
Final step: Generating Datasets

- After data entry is complete, the data must be first compiled into your user specific NHSN dataset.
- After anything is changed in NHSN, generate datasets so that the change will be reflected in Analysis reports.
- This is often the first thing we recommend when troubleshooting Analysis problems.
  
  **NOTE:** Unresolved alerts will prevent data from showing up in Rate and SIR reports, even if new datasets are generated.
Navigating Data Analysis Reports
NHSN Analysis Reports

- Click on ‘Reports’ under the Analysis tab to see all available reports in NHSN
- The highlighted reports on the right are the most commonly used and basic report types
NHSN Analysis Reports: Collapsed Folder

- Standard list of all report types.
  - Line List
  - Frequency Table
  - Bar/Pie Chart
  - Rate Table/Run Chart
  - SIR Report

- Clicking ‘Run’ will run a stock report using all CLABSI data for 2015 and forward

- Click Modify to create more specific reports
NHSN Analysis Reports: HAI Module Reports

Folders to provide specific analysis options for reportable HAIs
NHSN Analysis Reports: Collapsed LabID Folder

Collapsed folder for LabID reporting

- MDRO/CDI Module - LABID Event Reporting
  - All LabID Events
  - All MRSA LabID Events
  - All MSSA LabID Events
  - All C. difficile LabID Events
  - All VRE LabID Events
  - All CephR-Klebsiella LabID Events
  - All CRE LabID Events
  - All CRE-Klebsiella LabID Events
  - All CRE-Ecoli LabID Events
  - All CRE-Enterobacter LabID Events
  - All Acinetobacter LabID Events
NHSN Analysis Reports: CMS Reports

CMS Reports folder provide default reports that mirror CMS reporting requirements.
Baseline Set 1 Reports

- Contains archived reports with the Baseline Set 1 data
- Can only be run for 2016 data and before
- Data after 2016 must be run using 2015 Rebaseline Analysis Reports
NHSN Analysis Reports: Advanced Folder

Advanced Folder include several reports that can be modified more to analyze specific data for your facility.
NHSN Analysis Reports: Run a Report

“Run Report” will provide output for all available data for this HAI with default variables displayed.
NHSN Analysis Reports: Modify Report

“Modify Report” will allow you to set specific time frame, select variables, and sort data you’re interested in looking at.
“Export Data Set” allows you to transfer your data to several different file types (.xls, .txt, .sas7bdat, etc.)
Modifying Analysis Reports : CLABSI SIR Report

- Show Descriptive Variable Names
- Analysis Data Set Source
- Type of Report
- When Data Set was Generated
Modifying Analysis Reports : Change Title

<table>
<thead>
<tr>
<th>Title/Format</th>
<th>Time Period</th>
<th>Filters</th>
<th>Display Options</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Title:</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SIR for DHQP Memorial Hospital for 2021</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

If you want to save a customized report, consider re-naming the title.
Modifying Analysis Reports: Select Format

- Title/Format
  - You may choose the format in which the report is displayed, such as HTML, Excel, or PDF.
  - Default is HTML
Modifying Analysis Reports: Time Period

- Allows for selection of a specific time period for your report
- Select a date variable from the “Date Variable” drop down menu and specify the beginning and ending date for the desired time period
- If the “Ending” date is left blank, the results will include all data from the beginning time period and forward
Modifying Analysis Reports: Time Period

For this example, we are looking only at 2021 data at the annual level.
Modifying Analysis Reports: Filters

- Each addition of “group” and “rule” will allow you to specify values. After selecting a variable to filter, click in the empty box with the drop-down arrow to select the operator (e.g., “equal”) then specify desired values of that variable that should be included in the report.
Modifying Analysis Reports: Filters

- Add Group vs. Add Rule
  - Group = Will generate a table with a select number of rules (conditions) set.
  - Rules = Conditions that will restrict what type of data is populated within a group (table)

- Our SIR table will be populated with data only from locations that have the variable `locationType` equal to “CC”.
  - `locationType` equal to “CC” includes only all active critical care locations mapped to your facility during 2021 (1 Group, 1 Rule).
“Display Options” tab allows you to view your report organized by a specific criteria

- Allows for the option to calculate and display results by time period – e.g., by month, year, quarter, or half year
  - Group By applicable to rates, SIRs, and SAARs
Modifying Analysis Reports: Run Report

To generate the report you modified, select “Run”
Modifying Analysis Report: Interpreting Output

- Modified report by our set conditions:
  - Time Period = summaryYR 2021
  - Display Options = locationType="CC"

The fields highlighted in the table indicate that NHSN completed the calculation.
Modifying Analysis Report: Interpreting Output

This is what your report looks like when you show descriptive variable names.
Modifying Analysis Report: Interpreting Output

- **SIR** is the number of observed CLABSIs(Events) divided by the number of predicted CLABSIs
  - (3 events/1.814 Number predicted = SIR of 1.653)
- **SIR ≥ 1** signifies more CLABSI events observed than predicted
- **SIR** will only be calculated if the number of predicted infections is ≥ 1
Interpreting your SIR Report: SIR p-value

- SIR p-value is a statistical measure that tells you if the observed number of infections is significantly different from what was predicted.

- P-value ≤ 0.05 indicates that the number of observed CLABSIs is [statistically] significantly different (higher or lower) from the number predicted.

- In this example, the p-value for the 2021 SIR is ≥ 0.05 and thus there is no significant difference between the number of infections observed and the number of infections predicted.
Interpreting your SIR Report: SIR Confidence Interval

- The 95% Confidence interval is a range of values in which the true SIR is thought to lie.
- If the confidence interval includes the value of 1 (as in this example), then the SIR is not significant (the number of observed infections is not significantly different from the number predicted, using the same convenient cut point).
- If the confidence interval includes the value of 1, then the SIR is not significant – i.e., if the lower bound is \( \leq 1 \) and the upper bound is \( \geq 1 \), then the SIR is not significant.

### National Healthcare Safety Network
**SIR for DHQP Memorial Hospital for 2021 - By OrgID**

As of: January 13, 2022 at 1:18 PM
Date Range: BS2_CLAB_RATE SALL summaryYr 2021 to 2021
If (LocationType = "CC")

Facility Org ID=10000 Type of Affiliation=M

<table>
<thead>
<tr>
<th>Facility Org ID</th>
<th>CMS Certification Number</th>
<th>Events</th>
<th>Number Predicted</th>
<th>Central Line Days</th>
<th>SIR</th>
<th>SIR p-value</th>
<th>95% Confidence Interval</th>
<th>SIR Percentile</th>
</tr>
</thead>
<tbody>
<tr>
<td>10000</td>
<td>51C0001043</td>
<td>3</td>
<td>1.814</td>
<td>1606</td>
<td>1.653</td>
<td>0.3843</td>
<td>[0.421, 4.500]</td>
<td>93</td>
</tr>
</tbody>
</table>
Interpreting your SIR Report: SIR Percentile

- A percentile distribution is a score/value that allows to identify what percentage of other facilities have similar/lower SIR value compared to our facility.
- SIR percentile of 93 as in this case means that 93% of facilities in the nation (with at least 1 predicted infection) have an SIR equal to or lower than 1.653.
Knowledge Check

What interval of time is NOT available for the Date Variable selection when you modify a CMS report?

A. Summary Year
B. Summary Week
C. Summary Month
D. Summary Half Year
Modifying Analysis Report: Saving Your Report

To save a modified report, select “Save”
Modifying Analysis Report: Saving Your Report

Specify a name for your Analysis Report:

Analysis Report Name: Jaina - SIR - ICU 2021 DHQP Memorial Hospital

- [ ] Overwrite existing Custom Analysis Report (Save)
- [x] Create a new Custom Analysis Report based on this one (Save as)

[Save] [Cancel]

Enter a name that best describes the report for you and/or staff
Modifying Analysis Report: Saving Your Report

Custom report will be saved at the bottom of the folder in which you found the initial report.
Modifying Analysis Report: Exporting Your Report

To export a modified report to a .xls, .sas, .CSV and many more file types, select “Export”
Modifying Analysis Report: Exporting Datasets

- Export Analysis Data Set
  - Appears when you select your report type
  - Exports the entire dataset from which the resulting report is generated

- Export Output Data Set
  - Appears at the bottom of the Modify Screen
  - Two options:
    - Exports only data used in generating the report, for the specified time period and including selection criteria
    - Exports Analysis Data Set
Modifying Analysis Report: Exporting Datasets

Example of exporting to an excel .Xls file
NHSN Analysis for Data Quality
Data Quality – What can impact my SIRs/SURs and Rates?

- Entry, edit, or deletion of events
- Changes to numbers of patient days, device days, admissions
- Removal or addition to monthly reporting plans
- Change in admission date, previous discharge date on LABID events
- Changes to relevant factors in the annual survey (e.g., medical school affiliation, facility bedsize)
- Resolution of “Report No Events” alerts
Data Quality – Places to look

- Monthly reporting plans
  - Are the monthly reporting plans complete?
  - Are “Active” locations applicable to NHSN surveillance listed?
  - Are all appropriate procedures selected?
  - Are the appropriate lab specimens selected to collect for LABID data?
- Annual Survey
  - Are the number of beds updated from the previous survey year?
  - Has the hospital’s medical school affiliation changed?
- Alerts
  - Have the alerts been resolved for the required analysis months?
- Using NHSN Analysis
  - Are new datasets generated?
  - Were new events entered after I ran my analysis?
Advanced Folder

- Many customizable options to create and save reports
- The “How to see and create Modify Dates_2020” document provides suggested variables to use
  - Can help inform if some data is a data quality issue or accurate
NHSN Advanced Folder

- A tool to assist users with data quality efforts
- Allows users to create custom reports at various levels to check their data
  - Event Data
  - Procedure Data
  - Summary Data
  - Monthly Plan Data
  - Facility Data
  - Data Quality
Analyzing the Annual Survey

- Analysis of the annual survey in NHSN datasets are a good tool for routine data quality checks
- Survey responses found on these reports can be easily compared to across multiple survey years
- The report can be accessed within NHSN Reports > Advanced Folder > Facility Level Data
Analyzing the Annual Survey (cont.)

- Select “Modify” if you’d like to edit the survey line list
- Select “Modify” to select specific survey questions/variables to be displayed
- Please view the resource guide “How to Modify a Line List” for more instruction on how to save and export your reports
Analyzing the Annual Survey (cont.)

- Output will be ordered by survey year and will include all completed surveys.
- Information found on the report can help explain potential data quality issues found in other analysis (e.g. Medical School Affiliation Change).

<table>
<thead>
<tr>
<th>orgID</th>
<th>surveyYear</th>
<th>name</th>
<th>facOwnerDesc</th>
<th>medAff</th>
<th>medTypeDesc</th>
<th>numBeds</th>
<th>numICUBeds</th>
<th>numAdmits</th>
<th>numPatDays</th>
<th>numICP</th>
<th>totHrSurv</th>
<th>totHrOth</th>
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</thead>
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<tr>
<td>10000</td>
<td>2021</td>
<td>DHQP MEMORIAL HOSPITAL</td>
<td>P - For Profit</td>
<td>Y</td>
<td>M - Major</td>
<td>300</td>
<td>50</td>
<td>2500</td>
<td>25000</td>
<td>10.00</td>
<td>20</td>
<td>20</td>
</tr>
</tbody>
</table>

- Surveys can always be edited and saved in NHSN if a correction needs to be made.
Advanced Folder – Data Quality Folder

- Line lists:
  - CDI Test Method History
  - Duplicate Procedures
  - Procedures on Patient DOB
  - Procedures with 0 Duration
  - Duplicate BSI/PNEU/UTI Events
  - Duplicate SSI Events
  - SSIs on Procedure Date
  - Extremely High Incidence of SSI
  - Events Reports with 0 Device Days
Using Advanced Folder: Scenario

- Scenario: You want to confirm that COLO and HYST Inpatient and Outpatient Procedures were selected for 2021 Q1 data on your monthly reporting plans.
Using Advanced Folder: Scenario

There are two ways you can check this.
Using Advanced Folder: Scenario

1. Review each monthly reporting plan.

<table>
<thead>
<tr>
<th>Month</th>
<th>Year</th>
<th>Facility ID</th>
</tr>
</thead>
<tbody>
<tr>
<td>December</td>
<td>2021</td>
<td>10000</td>
</tr>
<tr>
<td>November</td>
<td>2021</td>
<td>10000</td>
</tr>
<tr>
<td>October</td>
<td>2021</td>
<td>10000</td>
</tr>
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<td>September</td>
<td>2021</td>
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<td>July</td>
<td>2021</td>
<td>10000</td>
</tr>
<tr>
<td>June</td>
<td>2021</td>
<td>10000</td>
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<tr>
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<tr>
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<tr>
<td>March</td>
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<td>10000</td>
</tr>
<tr>
<td>February</td>
<td>2021</td>
<td>10000</td>
</tr>
<tr>
<td>January</td>
<td>2021</td>
<td>10000</td>
</tr>
</tbody>
</table>
Using Advanced Folder: Scenario

2. Use the Advanced Folder to run a Patient Safety Plan line list
Using Advanced Folder: Scenario

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<th>Plan YM</th>
<th>Procedure Code</th>
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<th>Setting</th>
<th>SSI Plan?</th>
<th>Create Date</th>
<th>User ID for Data Entry</th>
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<tr>
<td>5212</td>
<td>10018</td>
<td>2021M01</td>
<td>COLO</td>
<td>COLO - Colon Surgery</td>
<td>IN</td>
<td>Y</td>
<td>26JUN20:14:04</td>
<td>1797</td>
<td>11MAR21:14:28</td>
<td>8240</td>
</tr>
<tr>
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<td>10018</td>
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<td>IN</td>
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- Missing COLO procedure for OUT in January
Using Advanced Folder: Scenario

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</table>
Using Advanced Folder: Scenario

Comparing the Create Date and Last Modified variable can help identify if the plan was changed.
Data Quality with NHSN

- Use the NHSN guide to the SIR to identify important factors in your facility’s data that can impact SIRs
- Work with staff to develop a list of routine checks that you can perform on a monthly, quarterly, and/or annual basis
- Modify and save NHSN reports to help expedite and organize your processes
Ongoing NHSN Data Quality Activities
ACAT Data Quality Checks

▪ NHSN application built with business rules in place
  – “ALERTS” tab within the application that performs data quality checks
▪ NHSN ACAT team routinely reviews data reported to NHSN for data quality errors
  – discrepancies based on the facility’s pattern of reporting
▪ Facilities contacted (Data Quality Outreach) for confirmed or suspected data quality flags
Data Quality Outreach – CLABSI example

- Data quality issue identified in CLABSI event form for Time to BSI infection (TTI) and average length of stay (LOS)
- Discussion with PATT team helped to decide the “cut-off” for the outreach
  - BSI infections – 6 months/183 days for TTI and LOS
- SMEs conducted analysis to identify facilities that exceeded the cut-off of 183 days
  - ~200 records/facilities exceeding the cut-off
Next Steps

- Facilities were contacted through emails with the following information:
  - DQ outreach email that outlines the issue
  - Instructions for fixing any data entry errors, if needed
- Replies are requested from the facilities to verify the accuracy of the data
DQ Outreach Feedback

- About 65% of the facilities responded to the outreach
- Majority of these facilities reported that the data entered was correct and that they had patients with long length of hospital stay and greater time to infection
- Some facilities reported data entry errors and corrected the forms
- Feedback from each DQ outreach is documented to capture the responses
DQ Checks and Outreach Resources

- We created a website dedicated to routine and targeted outreaches
- We created a DQ corner in the quarterly NHSN newsletter
Data Quality Resources

- DQ Resources

- DQ Corner Newsletter
  https://www.cdc.gov/nhsn/pdfs/newsletters/q4-2021-nl-508.pdf
Additional Resources

- Data Entry and Analysis Training
  [http://www.cdc.gov/nhsn/training/analysis/index.html](http://www.cdc.gov/nhsn/training/analysis/index.html)

- NHSN SIR Guide

- NHSN SUR Guide

- Analysis Quick Reference Guides

- 2015 Rebaseline Page
Additional Resources

- How to see and create Modify Dates_2020
- How to Modify a Report
- How to Run Analysis on Custom Fields
For more information, contact CDC
1-800-CDC-INFO (232-4636)

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

NHSN@cdc.gov