

## Back to the Basics: OPC SSI and SDOM 101

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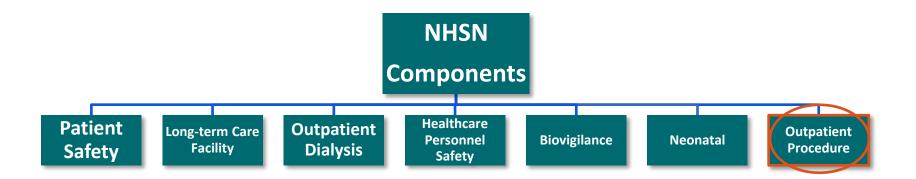
# **Objectives**

By the end of this presentation, you will be able to:

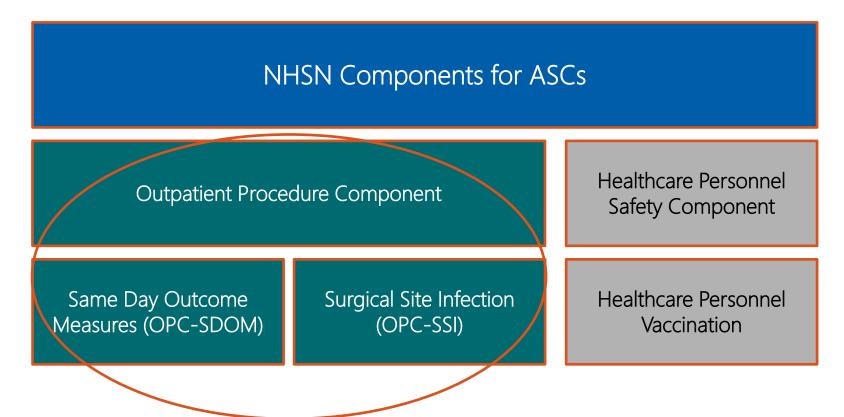
- Navigate the NHSN application to enter SSI and SDOM events
- Locate tools and resources on the NHSN Outpatient Procedure Component (OPC) webpage to assist with SSI and SDOM surveillance
- Understand how the Outpatient Procedure Component (OPC) can be used in your Ambulatory Surgery Center to improve patient safety and patient outcomes by monitoring for adverse outcomes
- Learn what's coming soon to the OPC

# Introduction

# **NHSN Family of Components**



# **Components available for ASCs**



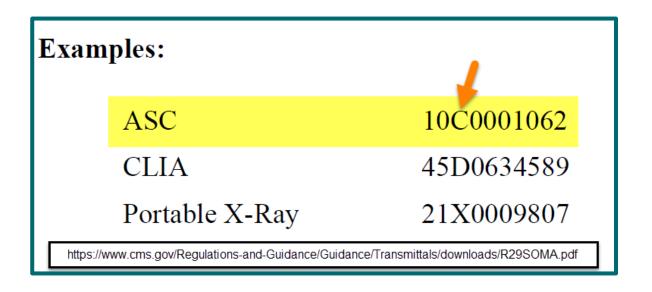
# Important enrollment criteria

To enroll in NHSN OPC as an Ambulatory Surgery Center (ASC) the 3<sup>rd</sup> digit of the CMS Certification Number (CCN) should be "C". This identifies the facility as an ASC.

The CCN is an alphanumeric 10-digit number; the first two digits represent the state identification number. The third digit is an alpha character that identifies the type of facility. The remaining 7-digits are the unique facility identifier.

If the CCN is not known, the facility may use the National Provider Identifier (NPI) Number "Lookup Tool" found at <a href="https://www.qualityreportingcenter.com/asc/data/ccn/">https://www.qualityreportingcenter.com/asc/data/ccn/</a> to cross-reference their CCN.

# **CCN** example



If the CCN is not known, the facility may use the National Provider Identifier (NPI) Number "Lookup Tool" found at https://www.qualityreportingcenter.com/asc/data/ccn/ to cross-reference their CCN.

### **Intent of OPC**

- Designed to address the unique needs of the outpatient for ASC
- Help facilities fulfill reporting requirement related to infection prevention

# **Are ASCs Required to Report?**

NHSN does not mandate reporting.

 NHSN is a mechanism for collecting and analyzing surveillance data, based on what a facility choses to enter.

- The decision to use NHSN OPC depends on:
  - Your facility internal risk assessment
  - Required reporting by your state or other organizations

# **Monthly Reporting Plan**

# Monthly Reporting Plan (MRP)

## "In-plan" & "Off-plan"

- MRP informs NHSN which OPC modules will be used during a given month.
- If a module is included in the MRP, this is an agreement to follow the details of the module in its entirety.

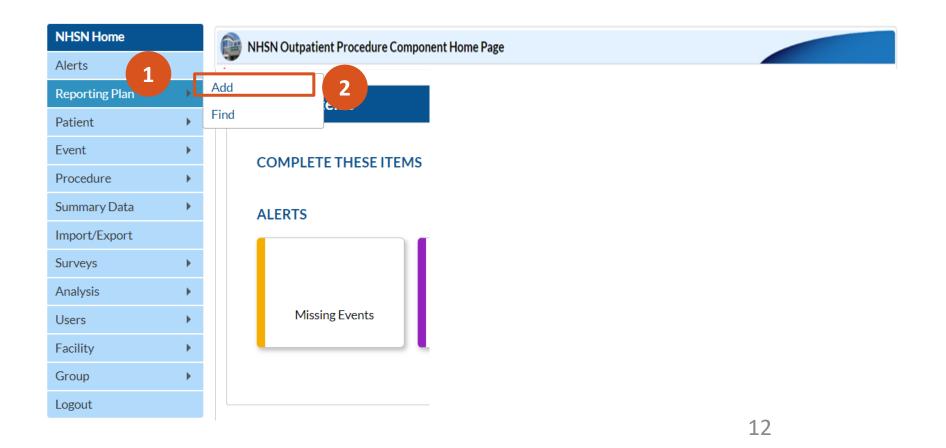
#### In-plan

- ✓ Module included in the MPR.
- ✓ NHSN surveillance protocol(s) will be used, in its entirety.
- Data included in NHSN annual reports or other NHSN publications.

#### Off-plan

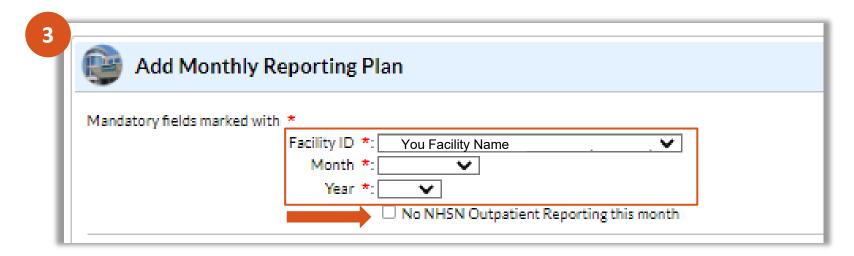
- ✓ Module **NOT** included in the MPR.
- ✓ NHSN surveillance protocol(s) is **NOT** required to be used, in its entirety.
- ✓ Data <u>NOT</u> included in NHSN annual reports or other NHSN publications.

# **Adding a Monthly Reporting Plan**



# Adding a Monthly Reporting Plan

Enter all mandatory fields marked with a red asterisk.



# **Adding a Monthly Reporting Plan**

Complete the Same Day Quality Measures and Surgical Site Infection (SSI) Surveillance Sections.



Adding a Same Day Outcome Measure (SDOM)

# What is a Same Day Outcome Measure

#### **Reminder:**

### All patient encounters are included in surveillance

#### Surveillance for SDOM

Monitor <u>all patient</u> encounters for the following events:

- Burn prior to discharge from the ASC
- Fall within the ASC
- Wrong site, side, patient, procedure or implant while admitted to the ASC (Wrong)
- Transfer or admission to a hospital upon discharge from the ASC

Encounter	Any patient visit to an ASC where the patient completes the registration		
	process upon entry into the facility. Some ASCs may refer to this as an		
	admission into the facility.		

# Same Day Outcome Measure

SDOM can be reported for any procedure, including non-NHSN procedures.



### **SDOM-PATIENT BURN**

Burn	Unintended tissue injury caused by any of the six recognized mechanisms:
	scalds, contact, fire, chemical, electrical or radiation, (for example, warming
	devices, prep solutions, electrosurgical unit or laser).

#### Let's look at an example:

Mr. Kline is admitted to Eyecare ASC and has a cataract procedure performed. During the procedure, the phaco needle became clogged causing thermal damage (burn) to the cornea. The surgery was still able to be completed and a suture was placed on the burn wound.

### **SDOM-PATIENT FALL**

	Fall	A sudden, uncontrolled, unintentional, downward displacement of the		
1		body to the ground or other object, excluding falls resulting from violent		
		blows or other purposeful actions. (National Center for Patient Safety).		

#### Let's look at an example:

Ms. Sinclair is admitted to Metro ASC and has a KPRO performed. After the procedure, she was being transferred to a wheelchair and became lightheaded and dizzy. She fell to the floor. She did not lose consciousness and no injuries were identified. Later that day, Ms. Sinclair was discharged home.

### **SDOM- "WRONG" EVENT**

Wrong	Procedure is performed in a way that is not consistent with what is documented in the informed consent for a patient - not in accordance with	
	intended site, side, patient, procedure or implant	

#### Example:

Mr. Levine was admitted to Downtown ASC for a right knee prosthesis (KPRO) due to severe osteoarthritis-the patient signed informed consent for the right knee prosthesis. Upon wakening from anesthesia, the patient notes severe left knee pain and discovered the KPRO was performed to the left knee.

# SDOM-ALL CAUSE HOSPITAL TRANSFER/ADMISSION

Hospital transfer/admission

Any transfer/admission from an ASC directly to an acute care hospital including hospital emergency room.

#### Example:

Mrs. Waldon was admitted to Smalltown ASC for right foot amputation (AMP). The procedure was performed without incident. Approximately, 8 hours after the procedure, she began having severe left sided chest pain that radiated down the left arm, nausea and shortness of breath. The patient was transferred by ambulance to Smalltown Hospital ED to determine if she was having a myocardial infarction.

# **SDOM Reporting Instructions**

For each patient that experiences a SDOM event during an ASC encounter, complete an *Outpatient Procedure Component Same Day Outcome Measures Event* form (CDC 57.402) and select the appropriate event by checking the corresponding box.

- a. If the same patient experiences <u>more than one event</u> of a **different measure** during the same encounter all events should be recorded on the same event form. Example: a patient experiences a fall and a burn during the same encounter.
- b. If a patient experiences <u>more than one event</u> of the **same measure** during the same encounter record only one event of that measure type for the encounter. Example: a patient has multiple wrong site procedures or multiple falls.
- c. If no events occur during an encounter no Outpatient Procedure Component Same Day Outcome Measures Event form (CDC 57.402) should be completed

### **Concurrent Surveillance**

- Initiated while the patient is still under the care of the organization
- Surveillance ends at discharge

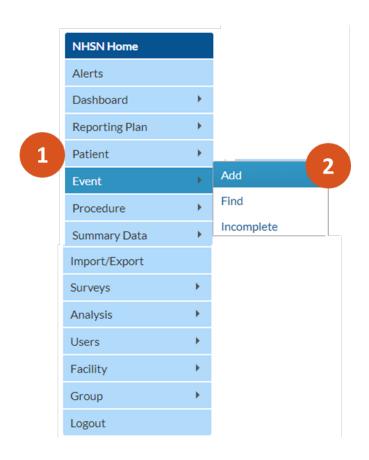
Events can be entered into NHSN as they occur, or after the end of the month

## **Adding a SDOM Event**



### In NHSN left menu

- 1. Click Event
- 2. Select Add



### Adding a SDOM Event

Enter all mandatory fields marked with a red asterisk.



### **Adding a SDOM Event**

Complete Event Information, all mandatory fields marked with a red asterisk.

4			
Event Information			
Event Type *: OPSDOM - Same Day Ou	toome Measures 🗸		Date of Event *: 28
Same Day Outcome Measures			
Specify Event * (check all that apply)			
☐ Patient burn	☐ Patient fall	☐ Hospital transfer/admission	
Wrong Event: (check any that apply)	П.W	Π	
<ul><li>□ Wrong side</li><li>□ Wrong site</li></ul>	<ul><li>□ Wrong patient</li><li>□ Wrong implant</li></ul>	☐ Wrong procedure	
- Wrong site	○ Wrong mplant		
Comments			
		Save Back	

Adding a Surgical Site Infection (SSI)

### Reminder: What is an SSI?

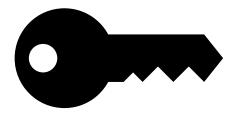
An infection (superficial, deep or organ/space) that develops in the surveillance period following an NHSN operative procedure.



# Key Term: NHSN Operative Procedure

Defined as an operative procedure that

- is included in the NHSN Current Procedural Terminology (CPT) code mapping and
- has at least one incision (including laparoscopic approach)
   and
- takes place in an operating room (OR) or room meeting OR standards.



# Surgical Site Infection Reporting: Specifications

- OPC-SSI criteria is similar to the NHSN Patient Safety Component (PSC) surveillance protocol
- Variables are similar fewer reporting fields in OPC-SSI
- Enables SSI reporting for all types of SSIs included in state reporting mandates

### **Differences between PSC and OPC**

Reporting Detail	Patient Safety	Outpatient Procedure
ASA Score	✓	<b>√</b> *
Height	✓	✓
Weight	✓	✓
Diabetes	✓	✓
Wound Class	✓	✓
Trauma	✓	
Emergency	✓	
General Anesthesia	✓	✓

<sup>\*</sup>Only report procedures with ASA scores.

### **Differences between PSC and OPC**

Reporting Detail	Patient Safety	Outpatient Procedure
Duration	✓	✓
Closure Technique	✓	
FUSN Spinal Level & Approach	✓	
HPRO & KPRO procedure details (Primary vs Revision and Total vs Partial)	✓	
Chapter 17 Site-specific reporting	✓	
"Present at the time of surgery" (PATOS)	✓	
Number of Procedure Categories	39	30
Procedure code field is required	<del></del>	✓

# NHSN Operative Procedure Categories that are NOT Available Using OPC

- abdominal aortic aneurysm repair (AAA)
- cardiac surgery (CARD)
- coronary artery bypass grafts (CBGB)
- chest and donor site and (CBGC chest only)
- craniotomy (CRAN)
- cesarean section (CSEC)
- heart transplant (HTP)
- kidney transplant (KTP)
- liver transplant (LTP)

### **General SSI Criteria**

#### Surgical Site Infection (SSI) Criteria

#### Table 4A: General OPC-SSI Criteria

APPLY TO ALL OPERATIVE PROCEDURE CATEGORIES EXCEPT BREAST SURGERY (BRST). USE BREAST SURGERY (BRST) - SURGICAL SITE INFECTION CRITERIA FOR SSIS ATTRIBUTABLE TO BRST.

#### **OPC General - Superficial Incisional SSI**

Must meet the following criteria:

Date of event for infection occurs within 30 days after any NHSN operative procedure (where day 1 = the procedure date)

#### AND

involves only skin and subcutaneous tissue of the incision

#### AND

patient has at least <u>one</u> of the following:

- a. purulent drainage from the superficial incision.
- organisms identified from an aseptically-obtained specimen from the superficial incision or subcutaneous tissue by a culture or non-culture based microbiologic testing method which is performed for purposes of clinical diagnosis or treatment (for example, not Active Surveillance Culture/Testing [ASC/AST]).
- superficial incision that is deliberately opened by a surgeon, physician or physician designee and culture or non-culture based testing of the superficial incision or subcutaneous tissue is not performed.

#### and

patient has at least one of the following signs or symptoms: localized pain or tenderness; localized swelling; erythema; or heat.

d. diagnosis of a superficial incisional SSI by a physician or physician designee.

Commitate: The two services types of surer isial incisional SS's are

# **SSI Criteria for Breast Surgery (BRST)**

#### Table 4B: Breast Surgery (BRST) Surgical Site Infection Criteria

The Breast Surgery (BRST) Surgical Site Infection instructions apply to surgical site infections (SSIs) during the 30-day (superficial SSI) and 90-day (deep and organ/space SSI) postoperative periods following BRST-Breast Surgery performed in Ambulatory Surgery Centers. *Use General OPC-SSI criteria for all operative procedures except breast surgery (BRST)*.

#### **OPC BRST - Superficial incisional SSI**

Must meet the following criteria:

Date of event for infection occurs within 30 days after a BRST; where day 1 = the procedure date

#### AND

involves either the skin, subcutaneous tissue (for example, fatty tissue) or breast parenchyma (for example, milk ducts and glands that produce milk) at the incision

#### AND

patient has at least one of the following:

- a. purulent drainage from the superficial incision.
- organisms identified from an aseptically-obtained specimen from the superficial incision or subcutaneous tissue by a culture or non-culture based microbiologic testing method which is performed for purposes of clinical diagnosis or treatment (for example, not Active Surveillance Culture/Testing [ASC/AST]).
- superficial incision that is deliberately opened by a surgeon, physician or physician designee and culture or non-culture based testing of the superficial incision or subcutaneous tissue is not performed.

#### an

patient has at least **one** of the following signs or symptoms: localized pain or tenderness; localized swelling; redness (erythema); or heat. A culture or nonculture based test that has a negative finding does not meet this criterion.

d. diagnosis of a superficial incisional SSI by a physician or physician designee.

# Why is there a separate SSI criteria for Breast Surgery (BRST)?

- Breast procedures identified as highest volume and highest
   SSI risk among ASCs reporting into NHSN
- Measure specifications developed by CDC/NHSN & ASC QC
- Measure field tested by Colorado Department of Public Health and Environment (CDPHE)





#### **NHSN Operative Procedure Categories**

- 30 procedure categories
- 30-day and 90-day surveillance periods



Table 3. Surveillance Periods for SSIs Following Selected NHSN Operative Procedure Categories. Day 1 = the date of the procedure.

Categories. Day 1 = the date of the procedure.			
30-day Surveillance			
Code	Operative Procedure	Code	Operative Procedure
AMP	Limb amputation	NECK	Neck surgery
APPY	Appendix surgery	NEPH	Kidney surgery
AVSD	Shunt for dialysis	OVRY	Ovarian surgery
BILI	Bile duct, liver or pancreatic surgery	PRST	Prostate surgery
CEA	Carotid endarterectomy	REC	Rectal surgery
CHOL	Gallbladder surgery	SB	Small bowel surgery
COLO	Colon surgery	SPLE	Spleen surgery
GAST	Gastric surgery	THOR	Thoracic surgery
HYST	Abdominal hysterectomy	THYR	Thyroid and/or parathyroid
			surgery
LAM	Laminectomy	VHYS	Vaginal hysterectomy
		XLAP	Exploratory Laparotomy
90-day Surveillance			
Code	Operative Procedure		
BRST	Breast surgery		
FUSN	Spinal fusion		
FX	Open reduction of fracture		
HER	Herniorrhaphy		
HPRO	Hip prosthesis		
KPRO	Knee prosthesis		
PACE	Pacemaker surgery		
PVBY	Peripheral vascular bypass surgery		
VSHN	Ventricular shunt		

## **OPC Surgical Site Infection Module**

- Any of the <u>30 NHSN operative procedure category(s)</u> can be monitored.
- All procedures within the selected operative procedure category must be monitored.

Numerator

SSI for the selected procedure category

Denominator

Total number of procedures for the selected procedure category

38

## **Denominator (Procedure) Reporting**

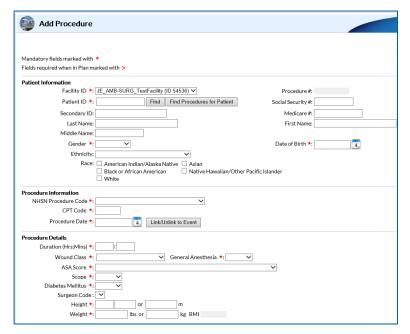
In order to add an SSI Event, you must first have entered the Operative Procedure to which the SSI is attributed/linked (Denominator)



## **Denominator (Procedure) Reporting**

#### Procedure data may be entered:

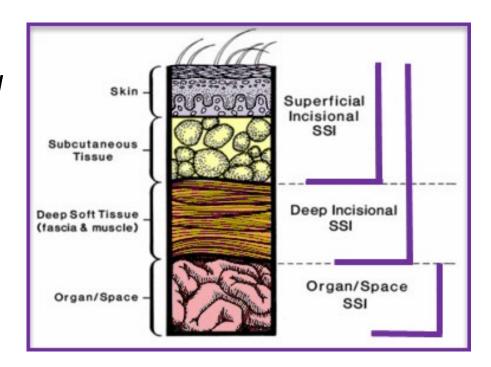
- Manually for each procedure
- Via comma-separated values (.csv) file



## **OPC Surgical Site Infection Module**

#### SSIs are identified as:

- Superficial Incisional SSI
- Deep Incisional SSI
- Organ/Space SSI

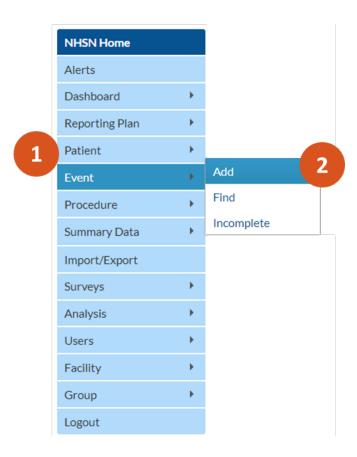


## **Adding an SSI Event**



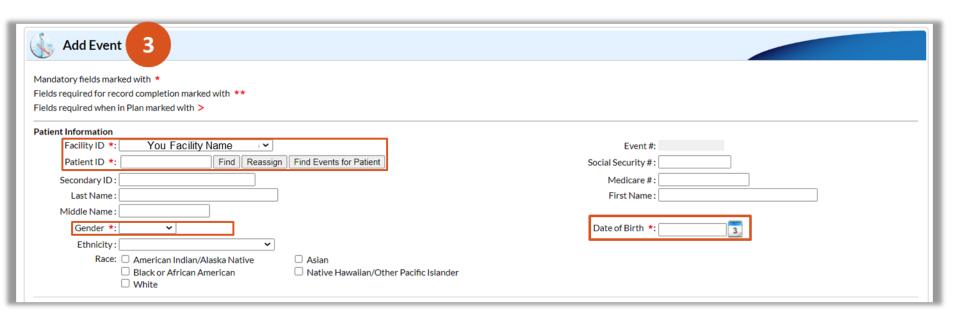
#### In NHSN left menu

- 1. Click Event
- 2. Select Add



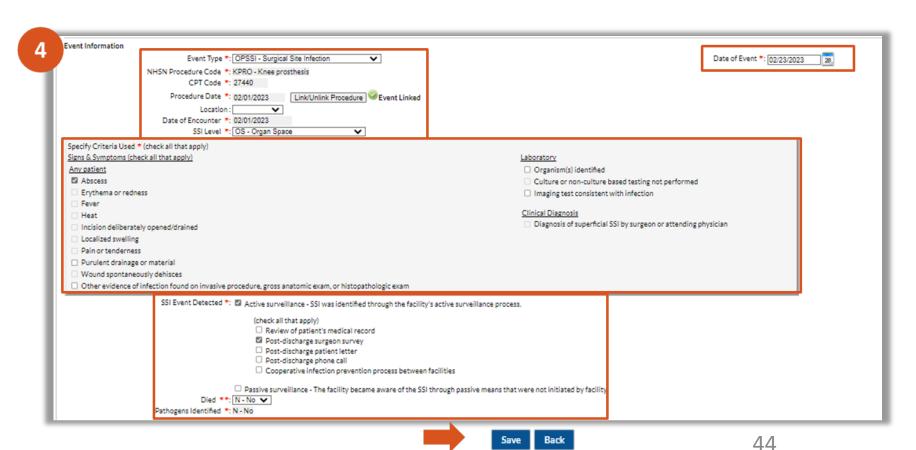
## Adding an SSI Event

Enter all mandatory fields marked with a red asterisk.



## **Completing the SSI Event Information Section**

Complete Event Information, all mandatory fields marked with a red asterisk.



# **Outpatient Procedure Component Website Navigation**

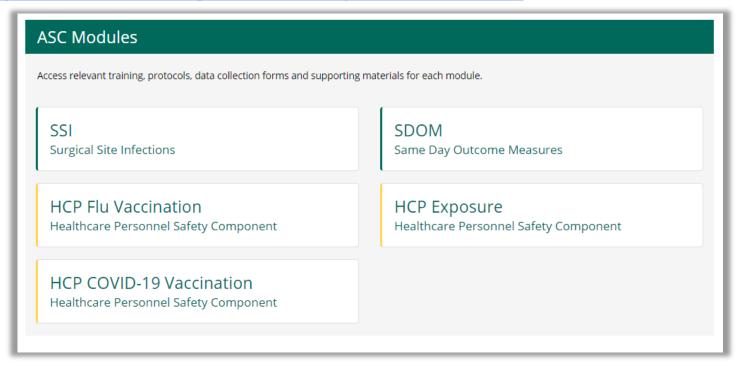
### **Landing Page for ASCs**

https://www.cdc.gov/nhsn/opc/index.html



#### **Landing Page for ASCs**

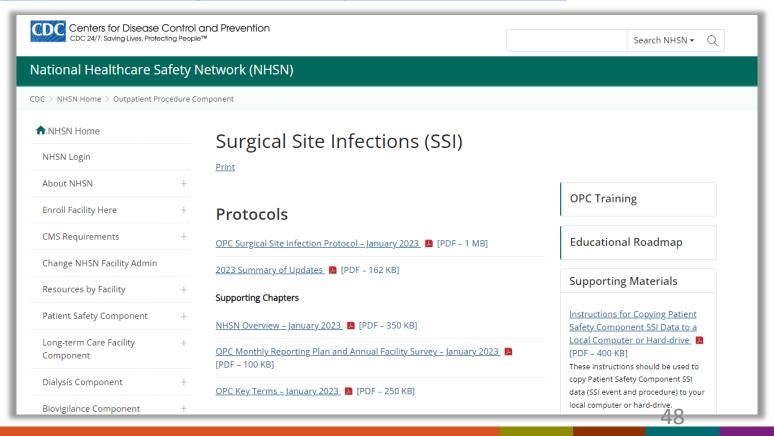
https://www.cdc.gov/nhsn/opc/index.html



Healthcare Personnel Safety Component (HPS) | NHSN | CDC https://www.cdc.gov/nhsn/hps/index.html

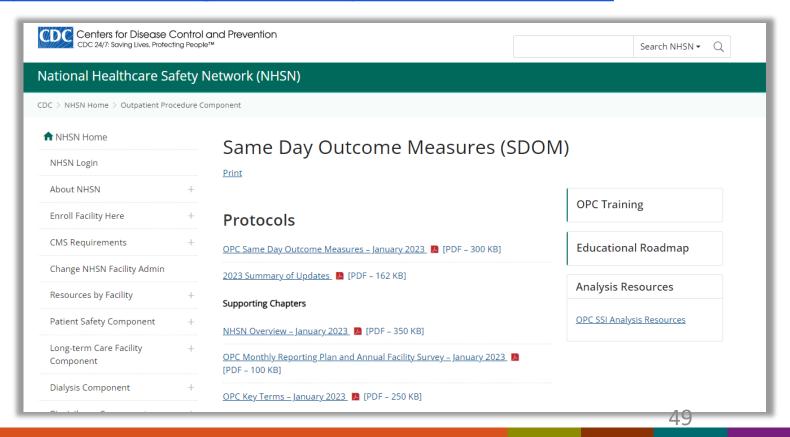
## **Landing Page for ASCs: Surgical Site Infections**

https://www.cdc.gov/nhsn/opc/ssi/index.html



#### **Landing Page for ASCs: Same Day Outcome Measures**

https://www.cdc.gov/nhsn/opc/sdom/index.html



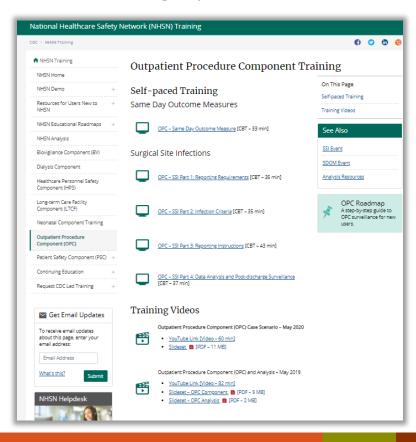
### **Landing Page for ASCs: Analysis Resources**

https://www.cdc.gov/nhsn/opc/ssi/index.html#anchor 1591824220931



## **Landing Page for ASCs: Training**

https://www.cdc.gov/nhsn/training/opc/index.html



# **Benefits of using OPC**

## Benefits to using OPC for SDOM and SSI

- The OPC-SSI protocol was created specifically for ASCs
- Centralized system for collecting and analyzing adverse event data
- Minimize reporting burden for ASCs while assuring data are validated, credible, and actionable
- Provides an opportunity to analyze multiple payer data
- Monitor outcome of adherence to infection prevention/control clinical practice guidelines and strategies

## Benefits to using OPC for SDOM and SSI

- Track incidence of surgical site infections and other adverse healthcare outcomes
- Enable use of surveillance data for:
  - Measuring clinical quality and benchmarking performance against nationally aggregated data
  - Exerting positive change(s) in patient care practices
  - Public reporting and other accountability purposes
  - Building knowledge related to infection risk in the ASC environment

# **Coming Soon to the OPC**

#### **New User Toolkit**

Full of useful guides, tips and tricks to help new OPC users complete some of the following tasks:

- Log in
- Complete Annual Survey
- Add/Edit Monthly Reporting Plans
- How to perform SSI/SDOM surveillance
- Entering SSI and SDOM events
- Entering denominator data
- How to address alerts
- Creating custom options
- Analysis of SSI and SDOM data
- ....And More!



## **KPRO** (Knee Prothesis) Measure

- This measure will specifically provide a surveillance definition following NHSN qualifying KPRO procedure
- Roll out of this measure will be 2023



# For any questions or concerns, contact the NHSN Helpdesk at <a href="mailto:nhsn@cdc.gov">nhsn@cdc.gov</a>

For more information please contact Centers for Disease Control and Prevention

1600 Clifton Road NE, Atlanta, GA 30333

Telephone, 1-800-CDC-INFO (232-4636)/TTY: 1-888-232-6348

E-mail: <a href="mailto:cdcinfo@cdc.gov">cdcinfo@cdc.gov</a> Web: <a href="mailto:www.cdc.gov">www.cdc.gov</a>

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.

