2019 CDI LabID Event (FacWideIN) Validation Tool

Refer to associated 2018 MRAT instructions

1. Patient and Medical Record Identifiers			
Facility (NHSN) OrgID:	Date of Audit:		Reviewer Initials:
Review Start Time:	End Time:	Time spent reviewing this record (minutes):	

Patient ID	Patient DOB	NHSN Inpatient Admission Date (Date when placed in inpatient location):	Facility Location 1 (Specific first inpatient bedded location name; not ED):
	Gender F M		

Select one:	☐ Sample A: validating "first" inpatient CDI positive specimen	Date of "first" inpatient CDI positive specimen:
	☐ Sample B: validating SELECTED (non-first) inpatient CDI positive specimen	Date of SELECTED (non-first) inpatient CDI positive specimen:

Table 1 Patient care locations and transfer dates

Date transfer to Location 2		Facility Location 2		Date transfer to Location 5		Facility Location 5	
Date transfer to Location 3		Facility Location 3		Date transfer to Location 6		Facility Location 6	
Date transfer to Location 4		Facility Location 4		Date transfer to Location 7		Facility Location 7	

Table 2 CDI positive specimen

A	B	C	D		E			F		G	
Lab list #	Date of specimen collection	Location of specimen collection	Number of days since last CDI positive result		Was last CDI positive specimen from same NHSN location?			Was this a "duplicate specimen", i.e., ≤14 days since last positive CDI positive specimen AND patient in same location (could include a previous episode of care)		Reportable to NHSN	
C1	__/__/__		____ days	☐ no prior	☐ No	☐ Yes	☐ no prior	☐ No	☐ Yes	☐ No	☐ Yes
C2	__/__/__		____ days		☐ No	☐ Yes		☐ No	☐ Yes	☐ No	☐ Yes
C3	__/__/__		____ days		☐ No	☐ Yes		☐ No	☐ Yes	☐ No	☐ Yes
Add rows if needed											

2. Outcome Determination: (A) Correctly Reported   (B) Overreported Event   (C) Underreported Event

If LABID CDI positive specimen was reported incorrectly (over- or underreported) by facility, what was the reason?			
Lab List #	Outcome	Reason for reporting incorrectly	Reason for incorrect reporting 1. Lab ID definition misapplication 2. Duplicate reporting (≤14 days since the last CDI positive specimen in same location) 3. Missed case finding/failure to review positive culture 4. Did not review previous inpatient episode 5. Used outdated criteria 6. Other _____
C1			
C2			
C3			

Don't forget to record the abstraction end time above (Location of elements meeting criteria within Medical record _____
_____)