

## NHSN v13.3.0 Release Notes

### September 27, 2025

Changes to Dialysis Component (DIAL)	
<b>Event</b>	<b>CLIP Measure Retirement:</b> For the Dialysis component, the CLIP Measure has been retired as of 9/27/2025. Users will no longer be able to add or edit CLIP events via the UI or submit CLIP events via CDA. Users will be able to view previous CLIP events in the NHSN application.
<b>CDA Implementation</b>	<b>CDA R3-D3 Update: Remove Dialyzer Reused Question:</b> The question, “Number of patients for whom dialyzers are reused”, has been removed as a field option for the Dialysis Denominator CDA file. Files imported with summary dates for 1/1/2024 and later with the presence of this field will be rejected and will result in a validation error.

Changes to Healthcare Personnel Safety Component (HPS)	
<b>Vaccination Summary</b>	<b>Annual Vaccination Flu Summary:</b> Prior to this release, dialysis and SNF facilities were able to upload annual flu data by a group via CSV file. The CSV upload has been modified to allow groups for all facility types to group upload IRF, IPF, and HOSP annual flu data all on a single CSV file.

Changes to Long Term Care Component (LTC)	
<b>Analysis and Reporting</b>	<p>The option for Race, MENA – Middle Eastern or North African, has been added to the following reports:</p> <ul style="list-style-type: none"> <li>• Line Listing – All LabID Events</li> <li>• Line Listing – All MRSA LabID Events</li> <li>• Line Listing – All MSSA LabID Events</li> <li>• Line Listing – All CDI LabID Events</li> <li>• Line Listing – All VRE LabID Events</li> <li>• Line Listing – All CEPHRKLEB LabID Events</li> <li>• Line Listing – All CREKLEB LabID Events</li> <li>• Line Listing – All CREECOLI LabID Events</li> <li>• Line Listing – All CREENTERO LabID Events</li> <li>• Line Listing – All ACINE LabID Events</li> <li>• Line Listing – All UTI Events</li> <li>• Line Listing – All UTI Events with Catheter</li> <li>• Line Listing – All UTI Events without Catheter</li> <li>• Line Listing for All CRE LabID Events</li> <li>• Line Listing for All Residents</li> <li>• Line Listing for All Staff</li> <li>• Line Listing for All Events</li> </ul>

## Changes to Long Term Care Component (LTC)

<b>Facility Information</b>	When no facility user has logged into the application for 12 months, a generated email will be sent to the facility administrator and those with admin rights indicating that no user has logged into NHSN in the past 12 months. The generated email will specify that the facility will be set to WP (Withdraw Pending) at 18 months of inactivity.
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## Changes to Medication Safety Component (MS)

<b>Analysis and Reporting</b>	<p>There is a new report located under the <b>Advanced -&gt; Facility-level Data</b> folder with the title, <b>Line Listing – Medication Safety Survey (2024 and forward)</b>. The Selected Variable list has been updated with new variables for the 2024 MS Survey.</p> <p>The following reports have been added to the <b>Digital Measure Reports -&gt; Glycemic Control Module -&gt; Hypoglycemia</b> subfolder:</p> <ul style="list-style-type: none"> <li>Line Listing - All Inpatient Encounters with at least one Hypoglycemic Medication (with Medication Request)</li> <li>Line Listing - Severe Hypoglycemia Encounters, Adult (with Medication Request)</li> <li>Rate Table - Severe Hypoglycemia Encounters, Adult (with Medication Request)</li> <li>Line Listing - All Inpatient Encounters with at least one Hypoglycemic Medication (with Medication Administration)</li> <li>Line Listing - Severe Hypoglycemia Encounters, Adult (with Medication Administration)</li> <li>Rate Table - Severe Hypoglycemia Encounters, Adult (with Medication Administration)</li> </ul>
<b>Survey</b>	<p>There are seven questions on both the Medication Safety and Patient Safety Annual surveys that are the same. Going forward, the common questions on the MS survey will be auto populated with the data from the Patient Safety Annual survey. This is to prevent data entry in the MS component, since the facility is enrolled in both components. The common questions are as follows:</p> <ul style="list-style-type: none"> <li>Number of patient days</li> <li>Number of admission</li> <li>Number ICU beds</li> <li>Number of beds in all other inpatient locations</li> <li>Facility owner</li> <li>Medical school affiliated</li> <li>Medical school type</li> </ul> <p>If a MS facility is not enrolled in the Patient Safety component, then the user will be able to enter data in the MS Annual Survey for the common questions.</p>

## Changes to Outpatient Procedure Component (OP)

<b>Analysis and Reporting</b>	The <b>“By Procedure” SIR Report</b> now contains the following fields when exported: orgID, CCN, procCode, summaryYH (this variable can change depending on the time grouping chosen by user), procCount, infCountAdultAll, numPredAdultAll, SIRAll, SIRAll_pval, SIRAll95CI.
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## Changes to Outpatient Procedure Component (OP)

The **"By Surgeon" SIR Report** now contains the following fields when exported: orgid, CCN, surgeoncode, summaryYH (this variable can change depending on the time grouping chosen by user) procCount, infCountAdultAll, numPredAdultAll, SIRAll, SIRAll\_pval, SIRAll95CI.

## Changes to Patient Safety Component (PS)

### Analysis and Reporting

**2022 HAI Rebaseline:** The following reports are now available with the 2022 risk adjustment models:

- Rate Table (Ventilator Days) - VAE Data for ICU-Other/SCA/ONC
- Run Chart (Ventilator Days) - VAE Data for ICU-Other/SCA/ONC
- SIR - ACH VAE Data (2022 Baseline)
- SIR - CAH VAE Data (2022 Baseline)
- SIR - LTAC VAE Data (2022 Baseline)
- Line Listing - All SSI Events
- SIR - All SSI Data (2022 Baseline)
- SIR - Adult All SSI Data by Surgeon (2022 Baseline)
- SIR - Adult Complex AR SSI Data (2022 Baseline)
- SIR - Adult Complex AR SSI Data by Surgeon (2022 Baseline)
- SIR - ACH PedVAE Data (2022 Baseline)
- Rate Table (Ventilator Days) - PedVAE Data for ICU-Other/SCA/ONC
- Run Chart (Ventilator Days) - PedVAE Data for ICU-Other/SCA/ONC
- Rate Table (Ventilator Days) - PedVAE Data for NICU
- Run Chart (Ventilator Days) - PedVAE Data for NICU

The following display variables are now available for the report, **Line Listing - Procedures Excluded from SSI SIR (2022 Baseline)**:

- **bs3\_modelRiskAdultAll** and **bs3\_modelRiskAdultCmpx** in **Available Variables** list
- **bs3\_allAdultExcl** and **bs3\_cmpxAdultExcl** in **Selected Variables** list

#### Antimicrobial Use and Resistance Reporting:

- Five new phenotypes have been added to the AR Option to match those used in the SRIR models and reports:
  - Extended-spectrum cephalosporin-resistant Enterobacterales
  - Fluoroquinolone-resistant Enterobacterales
  - Vancomycin-resistant Enterococcus
  - Fluoroquinolone-resistant Pseudomonas aeruginosa
  - Fluoroquinolone-resistant Enterobacterales\_2025
- The five new phenotypes have been added to the following reports:
  - Line Listing - Antimicrobial Resistant Organisms
  - Frequency Table - Antimicrobial Resistant Organisms
  - Rate Table - Antimicrobial Resistance Percentages
  - Rate Table - Community-onset Antimicrobial Resistance Prevalence
  - Rate Table - Hospital-onset Antimicrobial Resistance Incidence
  - Rate Table - Outpatient Antimicrobial Resistance Prevalence
- Three phenotypes have been updated as follows:
  - There was a definition change only for Carbapenem-resistant Enterobacterales.
  - There was a name and definition change for Extended-spectrum cephalosporin-resistant Klebsiella pneumoniae/oxytoca.
  - There was a name and definition change to Fluconazole-resistant Candida albicans/auris/glabrata/parapsilosis/tropicalis.

## Changes to Patient Safety Component (PS)

	<ul style="list-style-type: none"> <li>The following phenotypes were removed: <ul style="list-style-type: none"> <li>Carbapenem-resistant Enterobacter spp. and Klebsiella aerogenes</li> <li>Carbapenem-resistant Klebsiella pneumoniae/oxytoca</li> </ul> </li> <li>Two new columns have been added for the new category: skin, soft tissue, wound and musculoskeletal for the count and rate to the following reports: <ul style="list-style-type: none"> <li>Rate Table – Hospital-onset Antimicrobial Resistance Incidence</li> <li>Rate Table – Community-onset Antimicrobial Resistance Prevalence</li> <li>Rate Table – Outpatient Antimicrobial Resistance Prevalence</li> <li>Rate Table – Hospital-onset Positive Culture Incidence by Organism</li> <li>Rate Table – Community-onset Positive Culture Incidence by Organism</li> <li>Rate Table – Outpatient Positive Culture Prevalence by Organism</li> </ul> </li> <li>The percentiles displayed in the adult, pediatric, and neonatal SAAR reports have been updated to use data from the 2023 AU Option Data Report. This affects two A&amp;R reports: <ul style="list-style-type: none"> <li>SAAR Report - All Adult and Ped SAARs by Location (2017 baseline)</li> <li>SAAR Report - All Neonatal SAARs by Location (2018 baseline)</li> </ul> </li> </ul> <p>The Sepsis variables in the report, <b>Line Listing – Hospital Sepsis Program Core Elements</b>, have been updated to remove “CE” from their titles. The survey derived variables and Sepsis derived variables have been added to the analysis data set.</p>
<b>Bed Capacity</b>	<b>Upload API:</b> Users will now receive a message when submitting a bed capacity file via the upload API with validation issues. There will now be validation checks on the file type and file structure. If the file fails the validation check, the user will receive an error message of the failure.
<b>CSV Import</b>	Pilot facilities will now be able to submit claims data via the CSV Import feature. If the CSV file violates any of the business rules, then the user will receive an email notification for an unprocessed file. Otherwise, the user will receive a successful email response.
<b>Dashboard</b>	<b>ARM Dashboard:</b> The name of the existing dashboard is now ARM & HAI Composite Measure Dashboard. There is a new ARM Rankings tab that displays hero boxes and bar charts. A new bar has been added to the Reliability-adjusted Ranking chart to display the HAI composite ranking. The About these data section has been updated with text to reflect the new changes.
<b>Event</b>	<b>CLIP Measure Retirement:</b> For the Patient Safety component, the CLIP Measure has been retired as of 9/27/2025. Users will no longer be able to add or edit CLIP events via the UI or submit CLIP events via CDA. Users will be able to view previous CLIP events in the NHSN application.
<b>Hospital Respiratory Data</b>	<b>Daily and Weekly Reporting:</b> The logic was updated to ensure that facility level data submitted as complete in the daily calendar view also shows as complete data submitted in the weekly calendar view.
<b>Survey</b>	<p>There are seven questions on both the Medication Safety and Patient Safety Annual surveys that are the same. Going forward, the common questions on the Medication Annual Survey will be auto populated with the data from the PS Annual survey. This is to prevent data entry in the Medication Safety component, since the facility is enrolled in both components. The common questions are as follows:</p> <ul style="list-style-type: none"> <li>Number of patient days</li> <li>Number of admission</li> <li>Number ICU beds</li> <li>Number of beds in all other inpatient locations</li> <li>Facility owner</li> </ul>

## Changes to Patient Safety Component (PS)

- Medical school affiliated
- Medical school type

If a Medication Safety facility is enrolled in the PS component, then data entry will be allowed in the PS annual survey and will be displayed in the Medication Safety Annual Survey.