

## 2022 CDI LABID Event Medical Record Abstraction Tool Instructions

For validation of CDI positive specimen (only) LabID Event reporting in acute care hospitals, long-term acute care hospitals, and inpatient rehabilitation facilities conducting LabID Event surveillance. Based on CDC sampling guidance, this tool will be used in two ways: [Sample A] to validate reportability of the FIRST inpatient CDI positive specimen tested on unformed stool for a patient and location; and [Sample B] to validate reportability of a subsequent SELECTED (non-first) CDI positive specimen tested on unformed stool for a patient and location. Sample A evaluates the facility's ability to link early inpatient CDI-positive laboratory assays to recent episodes of care. Sample B evaluates the facility's ability to correctly identify duplicate vs. reportable events. See NHSN Patient Safety (PS) Manual Chapter 12 for further details. *(Note: When using a multi-testing methodology for CDI identification, the final result of the last test finding which is placed onto the patient medical record will determine if the CDI positive laboratory assay definition is met.)*

1. Patient and Medical Record Identifiers: Complete patient identifiers and demographics. Identify the method of sample validation, whether it is a "first" inpatient CDI positive specimen [Sample A] **OR** a SELECTED (non-first) inpatient CDI positive specimen [Sample B].

Table 1. Patient care locations and transfer dates: If validating for Sample B, enter dates and locations from ADT data up to the date of SELECTED specimen. (Note: SKIP Table 1. for Sample A validation.)

Table 2. CDI positive specimen:

For Sample A: Begin with the "first" inpatient CDI positive specimen. (\*If the specimen was collected in an affiliated outpatient location on the calendar day of facility admission, reporters are allowed to assign the event to the admitting inpatient location to establish community-association.) Next, identify whether a prior CDI positive specimen was collected from this patient in ED or 24-hour observation location linked to the NHSN inpatient admission. If such a specimen is identified, enter it in **Table 2, row C1**. Then enter the "first" inpatient specimen in row **Table 2, row C2**. If no ED or 24-hour observation location positive specimen is identified, enter the "first" inpatient CDI positive culture in **Table 2, row C1**. Through additional investigation, determine if this patient had a prior inpatient stay within the 14 days prior to specimen collection, and whether any CDI positive culture specimens were reported or collected within that timeframe for the patient and same location. Working across the row, determine if the chosen ("first") inpatient CDI positive specimen on the laboratory line list was reportable\* to NHSN.

For Sample B: Begin with the SELECTED (non-first) inpatient CDI positive specimen. Using the Sample B sorted list, identify the most recent specimen collected from the same patient in the same location prior to the SELECTED specimen. If prior specimens from the same patient were found, enter these specimens starting in **Table 2, row C1**. If no prior specimen was collected from the same location, enter the SELECTED (non-first) inpatient CDI specimen in **Table 2, row C1**. Working across the row, determine if the SELECTED (non-first) inpatient CDI positive specimen on the laboratory line list was reportable\* to NHSN.

\*Reportable to NHSN if No prior positive CDI specimen from the patient in the same location –OR– More than 14 days since last CDI positive specimen from the patient in the same location.

**2. Outcome determination:** For each CDI positive specimen, determine if the outcome is reported correctly, over-reported or underreported using the following: Correctly reported=A; Over-reported=B; Underreported=C. Select reasons for misreporting using the "Reasons for incorrect reporting."