



Overview of NHSN Analysis

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Purpose

- Understand the scope and structure of National Healthcare Safety Network (NHSN) data entry and analysis functions
- Become proficient in conducting basic analyses in the application
- Gain knowledge on how to customize analyses output available in NHSN

Learning Objectives

- Discuss basic steps for analyzing Healthcare-Associated Infection (HAI) data in NHSN
- Review techniques on how to customize your output options
- Discuss methods to check accuracy of data

Resources

NHSN Analysis Resources (e.g., reference guides, trainings, etc.) are available at:
<http://www.cdc.gov/nhsn/PS-Analysis-resources/index.html>

The screenshot shows the NHSN website interface. At the top, there is a dark green header with the text "National Healthcare Safety Network (NHSN)". Below this is a navigation menu on the left side with items: "NHSN", "NHSN Login", "About NHSN +", "Enroll Here +", "Materials for Enrolled Facilities +", "Group Users +", "Analysis Resources -" (highlighted with a red border), "Analysis Quick Reference Guides", "Annual Reports", "CMS Requirements +", "National Quality Forum (NQF)", and "Newsletters". To the right of the menu, there is a breadcrumb trail "CDC > NHSN" and a section titled "Patient Safety Analysis Resources" with social media icons for Facebook, Twitter, and a plus sign. Below this is a paragraph: "The NHSN application provides various options that allow NHSN users to analyze you use the analysis tool, and interpret data analyzed from the Patient Safety Con". Underneath is a section titled "Analysis Resources" with a list of expandable items: "Guides and Training", "NHSN Codes and Variables", "Statistical Tools", "NHSN Data", and "Demo Application".

Quick Reference Guides

NHSN Login	
About NHSN	+
Enroll Here	+
Materials for Enrolled Facilities	+
Group Users	+
<u>Analysis Resources</u>	-
Analysis Quick Reference Guides	
Annual Reports	
CMS Requirements	+
National Quality Forum (NQF)	
Newsletters	
E-mail Updates	
Data Validation Guidance	
HIPAA Privacy Rule	+

Patient Safety Analysis Quick Reference Guides



These quick reference guides were created to help you understand, modify, and interpret y (report) options for the NHSN Patient Safety Component. These guides serve as companio

Analysis Quick Reference Guides

- > **General Tips**
- > **Troubleshooting Guides**
- > **Frequently Requested Output/Reports**
- > **Targeted Assessment Prevention (TAP) Strategy Reports**
- > **Antimicrobial Use Option Output Types**
- > **Output/Report Option Types**
- > **Tips for Customizing Your Output/Reports**
- > **Detailed Guides for Specific Analysis Options**

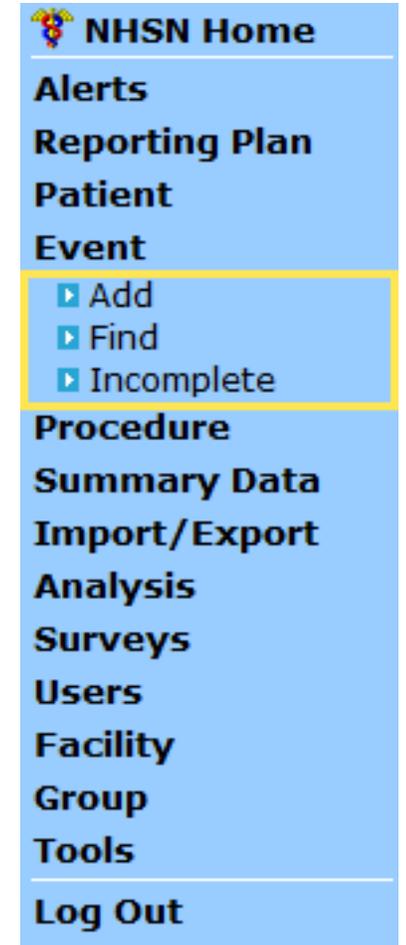
Analyzing Your Data is Important!

- Analysis tools within NHSN help facilitate internal validation activities and help ensure accuracy
- Data entered into NHSN may be used by: the Centers for Disease Control and Prevention (CDC), the Centers for Medicare & Medicaid Services (CMS), your state health department*, your corporation*, special study groups*, etc.
- Reports generated from NHSN can help inform prioritization and success of prevention activities

Intro to Analysis

Data Entry

- Three 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



Monthly Reporting Plan

- Identifies what is being monitored according to NHSN definitions
- Invokes business rules to ensure data is accurate
- One must be completed for each month of the year

*Only in-plan data is shared with CMS

**Department of Health and Human Services
Centers for Disease Control and Prevention**

NHSN - National Healthcare Safety Network

Logged into DHQP Memorial Hospital (ID 10000) as PRACHI.
Facility DHQP Memorial Hospital (ID 10000) is following the PS component.

View Monthly Reporting Plan

Mandatory fields marked with *

Facility ID*: DHQP Memorial Hospital (10000)
Month*: January
Year*: 2016

Device-Associated Module [HELP](#)

Locations	CLABSI	VAE	CAUTI	CLIP	PedVAP (<18 years)
3 CENTRAL - 3 CENTRAL	X	X	X	X	
5 WEST - 5 WEST	X	X	X		
NICU 3 - LEVEL 3 NICU	X			X	
CTICU - CARDIOTHORACIC CC	X		X		

Procedure-Associated Module [HELP](#)

Procedures	IN	OUT	SSI
BILI - Bile duct, liver or pancreatic surgery	IN:X	OUT:X	
THOR - Thoracic surgery	IN:X	OUT:X	
KPRO - Knee prosthesis	IN:X	OUT:X	
HPRO - Hip prosthesis	IN:X	OUT:X	
HER - Herniorrhaphy	IN:X	OUT:X	

Antimicrobial Use and Resistance Module [HELP](#)

Locations Antimicrobial Use Antimicrobial Resistance

Multi-Drug Resistant Organism Module [HELP](#)

Data Entry-Alerts

- Alerts are automatic checks in NHSN that remind you of incomplete or missing data
- Based on monthly reporting plan and summary data forms
- 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

Action items

You must complete these items.

- Confer rights [not accepted](#)

Alerts

- You have [85](#) incomplete events
- You have [218](#) missing events
- You have [57](#) incomplete summary items
- You have [217](#) missing summary items
- You have [28](#) incomplete procedures
- You have [69](#) missing procedures
- You have [9](#) missing Procedure-associated events

Data Entry-Alerts

- Most common source for alerts-Monthly Reporting Plan
- Missing summary data forms and procedures are determined based on the locations and procedure types listed in your reporting plan
- Alerts are based off what is being monitored in the Monthly Reporting Plan

Generating Data Sets

- Generating datasets is the first step in performing analysis in NHSN
 - Copies and freezes data
 - Organizes data into defined sets for analysis
 - Allows for quicker generation of reports
 - When analyzing data in NHSN, you are using a copy of your data, not the live database
- Each user has his/her own analysis datasets
 - Based on a user's rights

Generating Data Sets

- Reporting Plan
- Patient
- Event
- Procedure
- Summary Data
- Import/Export
- Analysis
 - Generate Data Sets
 - Output Options
 - Statistics Calculator
- Surveys
- Users
- Facility
- Group
- Log Out

Generate Data Sets



Generate Patient Safety Analysis Data Sets

Datasets generated will include data for the 3 most recent full calendar years up until today's date for the Patient Safety Component. To include all years check the box below.

For all other components, datasets generated will include all years. Note that any analysis options you run will be limited to the time period shown on the date range bar.

Include all data reported to NHSN for this component.



Generate New

Last Generated: May 24 2016 11:10AM

Analysis Output Options

- Data reports are referred to as “Output Options”
- Organized according to module type

The screenshot displays the 'Patient Safety Component' interface. On the left is a vertical navigation menu with the following items: Reporting Plan, Patient (highlighted in dark blue), Event, Procedure, Summary Data, Import/Export, Analysis, Generate Data Sets, Output Options (highlighted with a red box), Statistics Calculator, Surveys, Users, Facility, Group, and Log Out. To the right of the menu are two buttons: 'Expand All' and 'Collapse All'. Below these buttons is a list of modules, each with a folder icon: Device-Associated (DA) Module, Procedure-Associated (PA) Module, HAI Antimicrobial Resistance (DA+PA Modules), MDRO/CDI Module - Infection Surveillance, MDRO/CDI Module - LABID Event Reporting, MDRO/CDI Module - Process Measures, MDRO/CDI Module - Outcome Measures, Antimicrobial Use and Resistance Module, CMS Reports, TAP Reports, Advanced, My Custom Output, and Published Output.

Patient Safety Component
Analysis Output Options
[HELP](#)

Types of Output Options

- Line Lists
- Frequency Tables
- Bar/Pie Charts
- Rate Tables
- Standardized Infection Ratio (SIR) Tables

Reference Guides for Output Options

Analysis Quick Reference Guides

> **General Tips**

> **Troubleshooting Guides**

> **Frequently Requested Output/Reports**

> **Targeted Assessment Prevention (TAP) Strategy Reports**

> **Antimicrobial Use Option Output Types**

∨ **Output/Report Option Types**

Each of these guides will describe and provide an example of how to create, modify, and interpret the data displayed in the output/report.

- [Line List](#)  [PDF - 196 KB]
- [Line List - Custom Field Variable Names](#)  [PDF - 193 KB]
- [Frequency Table](#)  [PDF - 338 KB]
- [Bar Chart](#)  [PDF - 163 KB]
- [Pie Chart](#)  [PDF - 165 KB]
- [Rate Table](#)  [PDF - 307 KB]
- [Run Chart](#)  [PDF - 187 KB]
- [SIR Table: Device-associated](#)  [PDF - 188 KB]
- [SIR Table: Surgical Site Infections](#)  [PDF - 174 KB]
- [SIR Table: MRSA/CDI LabID Events](#)  [PDF - 215 KB]

Output Options

- Click [Run] to obtain your output
- Click [Modify] to customize your output

Expand All Collapse All

- Device-Associated (DA) Module
 - Central Line-Associated BSI
 - CDC Defined Output
 - Line Listing - All CLAB Events
 - Frequency Table - All CLAB Events
 - Bar Chart - All CLAB Events
 - Pie Chart - All CLAB Events
 - Rate Table - CLAB Data for ICU-Other
 - Run Chart - CLAB Data for ICU-Other
 - Rate Table - CLAB Data for NICU
 - Run Chart - CLAB Data for NICU
 - Rate Table - CLAB Data for SCA/ONC
 - Run Chart - CLAB Data for SCA/ONC
 - Rate Table - CLAB Data for LTAC
 - Run Chart - CLAB Data for LTAC
 - Rate Table - CLAB Data for IRF
 - Run Chart - CLAB Data for IRF
 - SIR - In-Plan CLAB Data
 - SIR - All CLAB Data
 - SIR - CLAB Data for Long Term Acute Care

CMS Reports

CMS Reports are available for each reporting program and are intended to mirror the summary-level data submitted to CMS on your behalf, for each quarter

Expand All Collapse All

- Device-Associated (DA) Module
- Procedure-Associated (PA) Module
- HAI Antimicrobial Resistance (DA+PA Modules)
- MDRO/CDI Module - Infection Surveillance
- MDRO/CDI Module - LABID Event Reporting
- MDRO/CDI Module - Process Measures
- MDRO/CDI Module - Outcome Measures
- Antimicrobial Use and Resistance Module
- CMS Reports**
 - Acute Care Hospitals (Hospital IQR)
 - CDC Defined Output
 - SIR - CLAB Data for CMS IPPS
 - SIR - CAU Data for CMS IPPS
 - SIR - Complex 30-Day SSI Data for CMS IPPS
 - SIR - CDI FacwideIN LabID Data for CMS IPPS
 - SIR - MRSA Blood FacwideIN LabID Data for CMS IPPS
 - Inpatient Rehabilitation Facilities (IRFQR)
 - Long Term Acute Care Hospitals (LTCHQR)
 - PPS-Exempt Cancer Hospitals (PCHQR)
- TAP Reports
- Advanced
- My Custom Output
- Published Output

General Tips for Analyzing Data

- Develop a timeline to regularly enter and analyze your hospital's data
 - Consider a timeline that would allow for timely feedback and interventions, if necessary
 - Example: Monthly review of rates and event-level details
- Generate datasets regularly
- Read the footnotes on your reports!
- Review data for accuracy and completeness

Modification and Customization of Data Output

Modify Output

- All the output options can be modified to meet your specific needs
- Custom Output Options
 - Saved modified output tables
 - Highly recommended
- Ways to modify your output
 - Changing the format
 - Changing the title
 - Filtering the data by various criteria

Modify Output

Three sections

- Top Section
- Middle Section
- Bottom Section

Analysis SIR

[HELP](#)

Analysis Data Set: CLAB_Rates_CMS [Export Analysis Data Set](#)

Modify Attributes of the Output:

Last Modified On: 05/24/2016

Output Type: SIR

Output Name:

Output Title:

Select output format:

Output Format:

Use Variable Labels

Select a time period or Leave Blank for Cumulative Time Period: [HELP](#)

Date Variable: Beginning: Ending: [Clear Time Period](#)

Enter Date variable/Time period at the time you click the Run button

Specify Other Selection Criteria: [HELP](#)

[Show Criteria](#) [Column +](#) [Row +](#) [Clear Criteria](#)

<input type="text" value="bsiPlan"/>	<input type="text" value="locationType"/>	<input type="text" value="locCDC"/>	<input type="text"/>	<input type="text"/>
= Y	IN (CC, CC_N)			
= Y		IN (IN:ACUTE:WARD:M, IN:ACUTE:WARD:MS, IN:ACUTE:WARD:S, IN:ACUTE:WARD:M_PED, IN:ACUTE:WARD:MS_PED, IN:ACUTE:WARD:S_PED)		

Other Options: [HELP](#)

[Print Variable Reference List](#)

Group by:

[Run](#) [Save As](#) [Reset](#) [Back](#) [Export Output Data Set](#)

Top Section

- Place to modify the name, title, and output format of the data table
- NOTE: If you wish to save modifications as a template for future reports, you need to change the output name

Analysis Data Set: **CLAB_Rates_CMS**

Modify Attributes of the Output:

Last Modified On: **05/24/2016**

Output Type: **SIR**

Output Name:

Output Title:

Select output format:

Output Format:

Use Variable Labels

Middle Section

- Filter output by time period or other criteria (e.g. location type)
- This CMS report is limited to bsiPlan, Critical Care location type, and CDC Location

Select a time period or Leave Blank for Cumulative Time Period: [HELP](#)

Date Variable	Beginning	Ending	
summaryYr ▼	2011		Clear Time Period

Enter Date variable/Time period at the time you click the Run button

Specify Other Selection Criteria: [HELP](#)

[Show Criteria](#) [Column +](#) [Row +](#) [Clear Criteria](#)

bsiPlan ▼	locationType ▼	locCDC ▼	▼	▼
= Y	IN (CC, CC_N)			
= Y		IN (IN:ACUTE:WARD:M, IN:ACUTE:WARD:MS, IN:ACUTE:WARD:S, IN:ACUTE:WARD:M_PED, IN:ACUTE:WARD:MS_PED, IN:ACUTE:WARD:S_PED)		

Filtering the Middle Section

Specify Other Selection Criteria: [?HELP](#)

[Show Criteria](#) [Column +](#) [Row +](#) [Clear Criteria](#)

bsiPlan	locationType	locCDC	
= Y	IN (CC, CC_N)		
		IN (IN:ACUTE:WARD:M, IN:ACUTE:WARD:MS, IN:ACUTE:WARD:S, IN:ACUTE:WARD:M_PED, IN:ACUTE:WARD:MS_PED, IN:ACUTE:WARD:S_PED)	
= Y			

Other Options: [?HELP](#)

[Print Variable Reference List](#)

Group by:

Adding Other Criteria

Specify Other Selection Criteria: [HELP](#)

[Show Criteria](#) [Column +](#) [Row +](#) [Clear Criteria](#)

	locationType	locCDC
birthWtCode		
birthWtCodeDesc	IN (CC, CC_N)	
bsiPlan		IN (IN:ACUTE:WARD:M, IN:ACUTE:WARD:MS, IN:ACUTE:WARD:S, IN:ACUTE:WARD:M_PED, IN:ACUTE:WARD:MS_PED, IN:ACUTE:WARD:S_PED)
CCN		
CLABCount		
CLABRate		
LineDU		
location		
locationType		
locCDC		
locLabel		
medtype		
numcldays		
numpatdays		
numSampCLDays		
numSampPatDays		
OID		
orgID		
sampMethCLDays		
summaryYH		
summaryYM		
summaryYQ		
summaryYr		

[Print Variable Reference List](#)

Run Save As Reset B

locCDC	
IN (IN:ACUTE:WARD:M, IN:ACUTE:WARD:MS, IN:ACUTE:WARD:S, IN:ACUTE:WARD:M_PED, IN:ACUTE:WARD:MS_PED, IN:ACUTE:WARD:S_PED)	

Specify an operator and value(s) for selection criteria:

[Add Column+/-](#)

Variable	Operator	Value(s)
locCDC	=	Medical Ward
	>	Medical/Surgical Ward
	>=	Surgical Ward
	<	Pediatric Medical Ward
	<=	Pediatric Medical/Surgical Ward
	~#	Pediatric Surgical Ward
	in	
	~in	
Between		

Various operators can be selected to modify the output.

Operator	Meaning
=	Equal to
>	Greater than
>=	Greater than or equal to
<	Less than
<=	Less than or equal to
~=	Not equal to
In	In a set of defined values
~In	Not in a set of defined values
Between	Within a range of defined values

Filtering the Middle Section

The operator is used to modify the values of the variables

Adding Other Criteria

locationType

This variable will limit the output according to the location type

Specify an operator and value(s) for selection criteria:

[Add Column+/-](#)

<u>Variable</u>	<u>Operator</u>	<u>Value(s)</u>
locationType	in	<ul style="list-style-type: none">CC - CCCC_N - CC_NCC - CCCC_N - CC_NCLINIC - CLINICNONPTC - NONPTCOR - OROTHER - OTHERSCA - SCASTEP - STEPWARD - WARDCC_LTAC - CC_LTACWARD_LTAC - WARD_LTACIRF - IRFCC_ONC - CC_ONCWARD_ONC - WARD_ONCSTEP_ONC - STEP_ONC

Adding Other Criteria

locCDC

This variable will limit your output by CDC location mapping

Specify an operator and value(s) for selection criteria:

<u>Variable</u>	<u>Operator</u>	
locCDC	in	<div><p>Add Column +/-</p><ul style="list-style-type: none">Burn Critical CareMedical Cardiac Critical CareMedical Critical CareMedical/Surgical Critical CareNeurologic Critical CareNeurosurgical Critical CarePrenatal Critical CareRespiratory Critical CareSurgical Cardiothoracic Critical CareSurgical Critical CareTrauma Critical CareWell Baby Nursery (Level I)Neonatal Critical Care (Level II/III)Neonatal Critical Care (Level III)Step down Neonatal Nursery (Level II)Pediatric Burn Critical CarePediatric Cardiothoracic Critical CarePediatric Medical Critical CarePediatric Medical/Surgical Critical CarePediatric Neurosurgical Critical CarePediatric Respiratory Critical CarePediatric Surgical Critical CarePediatric Trauma Critical CareONC Hematopoietic Stem Cell Transplant WardONC General Hematology/Oncology WardDialysis SCALong-Term Acute Care (LTAC)ONC Pediatric Hematopoietic Stem Cell Transplant WardPediatric Dialysis SCA</div>

Adding Other Criteria

location

This variable will limit your output according to your labeled locations

Specify an operator and value(s) for selection criteria:

Variable	Operator	
location	=	<div style="border: 1px solid gray; padding: 5px;"><ul style="list-style-type: none">FACWIDEIN - Facility-wide Inpatient (FacWIDEIn)FACWIDEOUT - Facility-wide Outpatient (FacWIDEOut)[INACTIVE] 00001 - LAB20909 - 09090910 - ADULT REHAB11 - BH[INACTIVE] 12 - MY PLACE12 WEST - W[INACTIVE] 1234 - INPATIENT BEDS[INACTIVE] 12345 - ON_MC[INACTIVE] 1236 - AMBULATORY SURGERY[INACTIVE] 1237 - COLLECTION17N - MY WARD[INACTIVE] 2 - 2[INACTIVE] 2 - EAST - HEM/ONC[INACTIVE] 2 EAST2 - NICU2 WEST - 24 HOUR OBS20000 - THIS LABEL2101 - 210122 - 22[INACTIVE] 24OBS - OBSERVATION UNIT[INACTIVE] 2SOUTH - PEDIATRICS3 CENTRAL - 3 CENTRAL[INACTIVE] 3 MS - MEDSURG ICU301 - OR[INACTIVE] 3100 - 31003333 - E3WE456 - LAB 14567 - BIOVIGILANCE</div>

Bottom Section

- The [Group by] option found at the bottom of the page allows you to view SIRs by month, quarter, half-year, or year
- Leave the option blank to see a cumulative SIR for the time period you have specified above
- In this example, this report will produce SIRs for each calendar quarter (i.e., 3-month time period) by selecting the [Group By] variable “summaryYQ”

Other Options: [HELP](#)

[Print Variable Reference List](#)

Group by: ▼



Data Accuracy Checks

What changes can potentially impact my rates of the SIRs?

- Entry 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 bed size)
- Resolution of “Report No Events” alerts

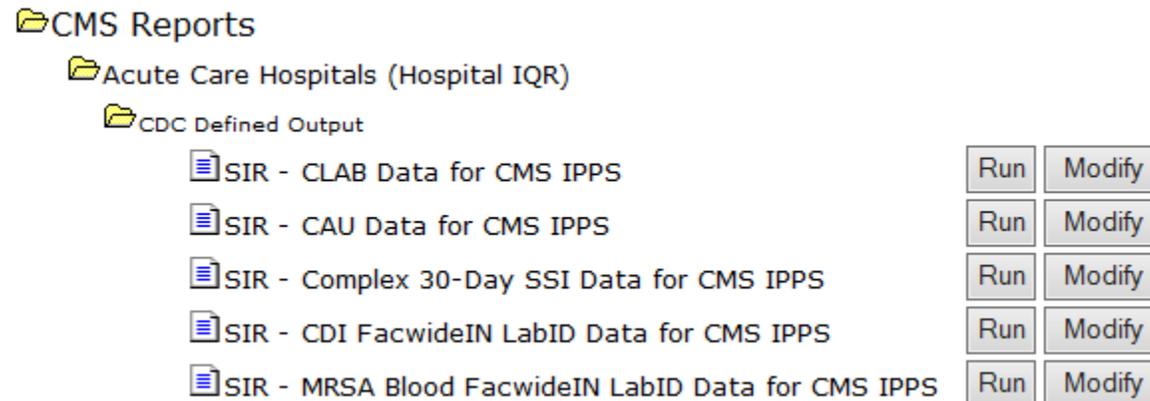
Places to look for data quality issues

- Monthly reporting plans
 - “Are all my “Active” locations applicable to my NHSN surveillance listed?”
 - “Have I selected all my appropriate procedures?”
 - “Have I selected the appropriate lab specimens to collect for LABID data?”
- Annual Survey
 - “Did I update the number of beds from the previous survey year?”
 - “Has our hospitals medical school affiliation changed?”
- Using NHSN Analysis
 - “Did I generate new datasets?”
 - “Did I enter new events after I ran my analysis?”

*Check the NHSN protocol for definitions and instructions

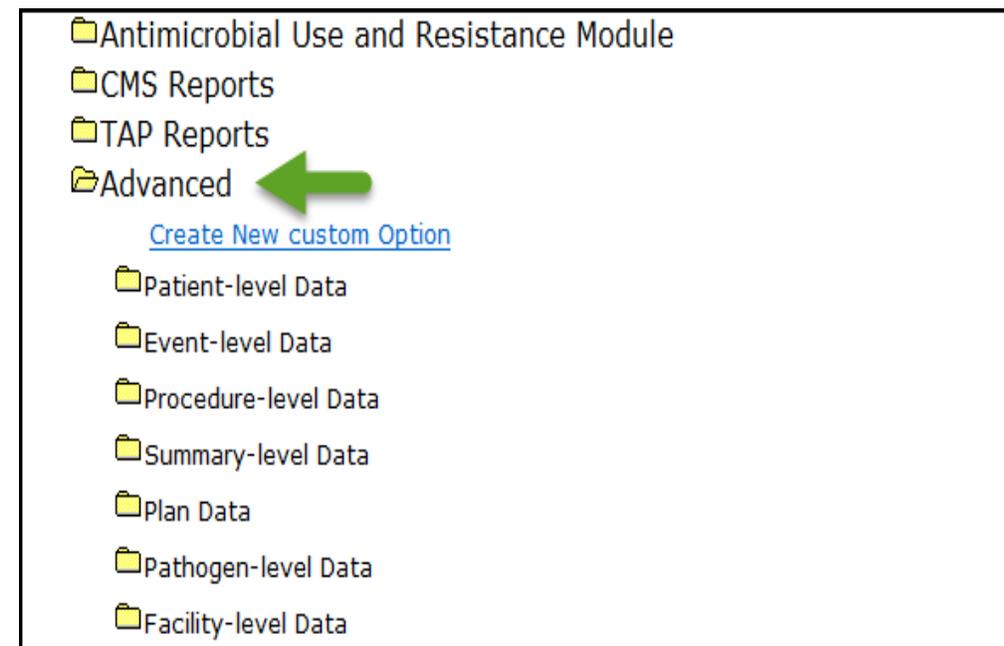
CMS Reports

- ALWAYS run your CMS reports as close as possible to the reporting deadline
- Save and print a copy of the reports for your files
- Ensure that CCN is correct



NHSN Advanced Folder Output

- A tool to assist users with data quality efforts
- One of the Output Options found in the Analysis tab on NHSN
- Allows users to create custom reports at various levels to check their data
 - Monthly Reporting Plans
 - Summary (denominator) Level Data
 - Event Data
 - Procedure Data



Monthly Reporting Plan

- Used for verifying your monthly reporting plan

Dear NHSN,

My Rehab unit closed in July, but I've received an alert that I am missing CAUTI and LabID data from that unit from August onward. What's happening?

National Healthcare Safety Network Line Listing - Plan

As of: January 13, 2016 at 12:26 PM

Date Range: PLAN planYM 2015M01 to 2015M12

Look at the
"modifyDate" and
"modifyUserID"

location	locCDC	bsiPlan	utiPlan	ssiPlan	mrna_labID	cdif_labID	modifyDate	modifyUserID	createDate
REHAB	IN:ACUTE:WARD:REHAB	N	Y			Y	26AUG15:09:36	124115	14NOV14:16:57

- Create a report to identify what was included on your monthly reporting plan for that unit
- The reporting plan could have been modified after July to include those measures!

Monthly Reporting Plan

Advanced

[Create New custom Option](#)

- Patient-level Data
- Event-level Data
- Procedure-level Data
- Summary-level Data
- Plan Data
 - CDC Defined Output

Line Listing - Patient Safety Plans

Run

Modify

Select output format:

Output Format:

Use Variable Labels

Select a time period or Leave Blank for Cumulative Time Period: [HELP](#)

Date Variable Beginning Ending

Enter Date variable/Time period at the time you click the Run button

Specify Other Selection Criteria: [HELP](#)

[Show Criteria](#) [Column +](#) [Row +](#) [Clear Criteria](#)

locCDC		
= IN:ACUTE:WARD:REHAB		

Other Options: [HELP](#)

[Print Variable Reference List](#)

Modify Variables To Display By Clicking: [Modify List](#)

Specify Sort Variables By Clicking: [Modify List](#)

Select Variables to include in Line Listing:

Available Variables		Selected Variables
acine_gg	<input type="button" value=">>"/> <input type="button" value="All >>"/> <input type="button" value="<<"/> <input type="button" value="All <<"/>	location
acine_hh		locCDC
acine_infSurv		bsiPlan
acine_labID		utiPlan
acine_labIDBlD		ssiPlan
CCN		mrsa_labID
cdif_gg		cdif_labID
cdif_hh		modifyDate
cdif_infSurv		modifyUserID
cephRKleb_gg		createDate
cephRKleb_hh		
cephRKleb_infSurv		
cephRKleb_labID		
cephRKleb_labIDBlD		
clipPlan		
createUserID		
creEcoli_gg		
creEcoli_hh		
creEcoli_infSurv		
creEcoli_labID		
creEcoli_labIDBlD		
creKleb_gg		
creKleb_hh		
creKleb_infSurv		
creKleb_labID		

Event Level Data

- Provides detailed information regarding all events

Dear NHSN,

I was wondering, how do I identify MBI-LCBI cases for my facility?

- Use advanced report to identify CLABSI MBI-LCBI events

National Healthcare Safety Network Line Listing for All Events

As of: June 3, 2016 at 8:59 AM

Date Range: EVENTS evntDateYr 2016 to 2016

orgID	patID	dob	gender	admitDate	eventID	eventDate	eventType	location	mbi_lcbi
10000	123	07/07/1986	F	01/10/2016	21094696	01/13/2016	BSI	5 WEST	N
10000	123	07/07/1986	F	01/01/2016	21094672	01/03/2016	BSI	5 WEST	N
10000	12345	09/21/1947	F	01/03/2016	21320957	01/05/2016	BSI	3 CENTRAL	N
10000	KB4638	08/02/1946	M	03/15/2016	22394616	03/25/2016	BSI	3 CENTRAL	Y
10000	KB4782	09/30/1952	F	03/02/2016	22394615	03/29/2016	BSI	3 CENTRAL	Y

Procedure Level Data

- Used for the Procedure-Associated Module

Dear NHSN,

I am missing one of my COLO procedures from my SIR report in quarter 2 of 2015. Why isn't it included?

- Create a report to include exclusion criteria for SSI in SIR reports:

The screenshot displays a software interface with a tree view on the left and a list of reports on the right. The tree view shows 'Procedure-level Data' and 'CDC Defined Output'. The list of reports includes:

Report Name	Run	Modify
Line Listing - All Procedures	Run	Modify
Frequency Table - All Procedures	Run	Modify
Bar Chart - All Procedures	Run	Modify
Pie Chart - All Procedures	Run	Modify
SIR - Complex 30-Day SSI Data by Surgeon	Run	Modify
Rate Table - SSI Data by Procedure and Risk Index	Run	Modify
Run Chart - SSI Data by Procedure and Risk Index	Run	Modify
Rate Table - Specific Event SSI Rates by Procedure	Run	Modify
Run Chart - Specific Event SSI Data by Procedure	Run	Modify
Rate Table - SSI Data by Surgeon, Procedure, and...more	Run	Modify
Run Chart - SSI Data by Surgeon, Procedure, and ...more	Run	Modify

Summary Level Data

- Used for producing a line list for all summary data of a certain type

Dear NHSN,

I ran a report for 2015 quarter 4 to calculate my CAUTI for Medical Wards and it's different from what I remembered. I haven't made any changes since, why is this number different?

- Compare the “createDate” and “modifyDate” to see if there is a discrepancy. The data may have been changed.

National Healthcare Safety Network

Line Listing for All Summary Data

As of: June 3, 2016 at 10:09 AM

Date Range: PSSUMMARY summaryYM 2015M10 to 2015M12

orgid	summaryYM	location	loccdc	noEvents	numpatdays	numddays	createDate	modifyDate	modifyUserID
10000	2015M10	4F	IN:ACUTE:WARD:M	Y	11	11	05NOV15:13:58	05NOV15:13:58	21614
10000	2015M10	3 CENTRAL	IN:ACUTE:WARD:M	N	11	11	05NOV15:14:15	14APR16:11:01	93841

Summary Level Data

Summary-level Data

CDC Defined Output

-  Line Listing - All Summary Data
-  User-Defined Rate Table - ICU-Other
-  User-Defined Rate Table - NICU
-  User-Defined Rate Table - SCA
-  Line Listing - CLAB Rates for NICU

Run	Modify

Select a time period or Leave Blank for Cumulative Time Period: [HELP](#)

Date Variable	Beginning	Ending	
summaryYM	10/2015	12/2015	Clear Time Period

Enter Date variable/Time period at the time you click the Run button

Specify Other Selection Criteria: [HELP](#)

[Show Criteria](#) [Column +](#) [Row +](#) [Clear Criteria](#)

eventType	locCDC	
= CAU	= IN:ACUTE:WARD:M	

Other Options: [HELP](#)

[Print Variable Refer](#)

Modify Variables To Display By Clicking: [Modify List](#)

Specify Sort Variables By Clicking: [Modify List](#)

Select Page by variable:

Select Variables to include in Line Listing:

Available Variables

- admASTEeligible
- admASTPerformed
- birthWtCode
- CCN
- cdiTestMeth
- cdiTestMethOth
- createUserID
- custom1
- custom10
- custom11
- custom12
- custom13
- custom14
- custom15
- custom16
- custom17
- custom18
- custom19
- custom2
- custom20
- custom21
- custom22
- custom23
- custom24
- custom25

Selected Variables

- orgID
- summaryYM
- location
- locCDC
- noEvents
- numpatdays
- numddays
- createDate
- modifyDate
- modifyUserID

>>

All >>

<<

All <<

Up

Down

Save

Reset

Close

NHSN Website: CMS Reporting Resources

Operational Guidelines

<http://www.cdc.gov/nhsn/cms/index.html>

CMS Requirements



CMS Resources for NHSN Users

- > [Operational Guidance for Acute Care Hospitals](#)
- > [Operational Guidance for Ambulatory Surgery Centers](#)
- > [Operational Guidance for PPS-Exempt Cancer Hospitals](#)
- > [Operational Guidance for Long-term Acute Care Facilities](#)
- > [Operational Guidance for Inpatient Psychiatric Facilities](#)
- > [Operational Guidance for Inpatient Rehabilitation Facilities](#)
- > [Outpatient Dialysis Facilities](#)

Resources

- [Healthcare Facility HAI Reporting Requirements to CMS via NHSN Current and Proposed Requirements September 2015](#)
 [PDF - 105 KB]
- [Reporting Requirements and Deadlines in NHSN per CMS Current Rules September 2015](#)  [PDF - 161 KB]
- [Hospital Inpatient Quality Reporting Program.](#) [↗](#)
- [CMS' Hospital Compare tool](#) [↗](#)
- [CMS Inpatient Prospective Payment System \(IPPS\) Rule](#) [↗](#)
- [Changing a CCN within NHSN \(updated July 2015\)](#)
 [PDF - 297 KB]

Operational Guidelines

CMS Resources for NHSN Users

▼ Operational Guidance for Acute Care Hospitals

- [Operational Guidance for Acute Care Hospitals to Report Central Line-Associated Bloodstream Infection \(CLABSI\) Data to CDC's NHSN for the Purpose of Fulfilling CMS's Hospital Inpatient Quality Reporting \(IQR\) Requirements November 2014](#)  [PDF - 101 KB]
- [Operational Guidance for Acute Care Hospitals to Report Catheter-Associated Urinary Tract Infection \(CAUTI\) Data to CDC's NHSN for the Purpose of Fulfilling CMS's Hospital Inpatient Quality Reporting \(IQR\) Requirements November 2014](#)  [PDF - 116 KB]
- [Operational Guidance for Reporting Surgical Site Infection Data to CDC's NHSN for the Purpose of Fulfilling CMS's Hospital Inpatient Quality Reporting \(IQR\) Program Requirements November 2014](#)  [PDF - 106 KB]
- [Operational Guidance for Acute Care Hospitals to Report Healthcare Personnel \(HCP\) Influenza Vaccination Data to CDC's National Healthcare Safety Network \(NHSN\) for the Purpose of Fulfilling CMS's Hospital Inpatient Quality Reporting \(IQR\) Program Requirements and CMS's Hospital Outpatient Quality Reporting \(OQR\) Program Requirements. September 2015](#)  [PDF - 88 KB]
- [Operational Guidance for Acute Care Hospitals to Report Facility-Wide Inpatient \(FacWideIN\) Methicillin-Resistant Staphylococcus aureus \(MRSA\) Blood Specimen \(Bacteremia\) Laboratory-Identified \(LabID\) Event Data to CDC's NHSN for the Purpose of Fulfilling CMS's Hospital Inpatient Quality Reporting \(IQR\) Requirements Nov. 2014](#)  [PDF - 364 KB]
- [Operational Guidance for Acute Care Hospitals to Report Facility-Wide Inpatient \(FacWideIN\) Clostridium difficile Infection \(CDI\) Laboratory-Identified \(LabID\) Event Data to CDC's NHSN for the Purpose of Fulfilling CMS's Hospital Inpatient Quality Reporting \(IQR\) Requirements Nov. 2014](#)  [PDF - 363 KB]

CMS Reporting Resources

Includes module specific instruction guides for all facility types

CMS Reporting

- > Importance of NHSN Reporting
- > CLABSI (Acute Care Hospitals)
- > CLABSI (PPS-Exempt Cancer Hospitals)
- > CLABSI (Long-term Acute Care Facilities)
- > CAUTI (Acute Care Hospitals)
- > CAUTI (PPS-Exempt Cancer Hospitals)
- > CAUTI (Long-term Acute Care Facilities)
- > CAUTI (Inpatient Rehabilitation Facilities)
- > VAE (Long-term Acute Care Facilities)
- > SSI (Acute Care Hospitals)
- > MRSA Bacteremia and C.difficile LabID Events (Acute Care Hospitals)
- > MRSA Bacteremia and C.difficile LabID Events (Inpatient Rehabilitation Facilities)
- > MRSA Bacteremia and C. difficile LabID Events (Long Term Acute Care Facilities)
- > Healthcare Personnel Influenza Vaccination (Acute Care Hospitals)
- > Healthcare Personnel Influenza Vaccination (Ambulatory Surgery Center)
- > Healthcare Personnel Influenza Vaccination (Outpatient Dialysis Facilities)
- > Healthcare Personnel Influenza Vaccination (Inpatient Rehabilitation Facility)
- > Healthcare Personnel Influenza Vaccination (Long Term Acute Care Hospital)

CMS Reporting

> Importance of NHSN Reporting

✓ CLABSI (Acute Care Hospitals)

- [How to Report No CLABSI Events for the CMS Inpatient Quality Reporting Program May 2015](#)
 [PDF - 639 KB]
- [NHSN Monthly Checklist for Reporting to CMS Hospital IQR for Acute Care Hospitals \(July 2015\)](#)
 [PDF - 474 KB]
- [Using the "SIR - CLABSI Data for CMS IPPS" Output Option. August 2015.](#)  [PDF - 445 KB]

CMS Reporting Resources

- **CMS current requirements posted on NHSN**
<http://www.cdc.gov/nhsn/pdfs/cms/cms-reporting-requirements.pdf>
- **Federal Register**
https://www.federalregister.gov/articles/search?conditions%5Bagency_ids%5D=45&conditions%5Bterm%5D=healthcare+associate+infections&conditions%5Btype%5D%5B%5D=PRORULE
- **Search Antimicrobial use @** <https://www.gpo.gov/fdsys/pkg/FR-2016-04-27/pdf/2016-09120.pdf>
- **Mountain Pacific Quality Health (QIN/QIO)**
<http://mpqhf.com/QIO/quality-improvement-tools-resources/healthcare-associated-infections-tools-resources/>
- **Quality Net**
<https://www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetTier2&cid=1228760487021>

Other Resources

- **How to Filter Output by Additional Criteria**
<http://www.cdc.gov/nhsn/PS-Analysis-resources/PDF/SelectionCriteria.pdf>
- **Data Entry and Analysis Training**
<http://www.cdc.gov/nhsn/training/analysis/index.html>
- **NHSN Data Dictionary (Under NHSN Codes and Variables)**
<http://www.cdc.gov/nhsn/ps-analysis-resources/index.html>
- **NHSN September 2015 Newsletter–Data Quality Corner**
<http://www.cdc.gov/nhsn/pdfs/newsletters/newsletter-sept-2015.pdf>
- **How to View Create & Modify Dates within NHSN**
<http://www.cdc.gov/nhsn/pdfs/analysis/how2view-create-modify-dates-in-nhsn.pdf>

Additional Questions?

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TTY: 1-888-232-6348 www.cdc.gov

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.

