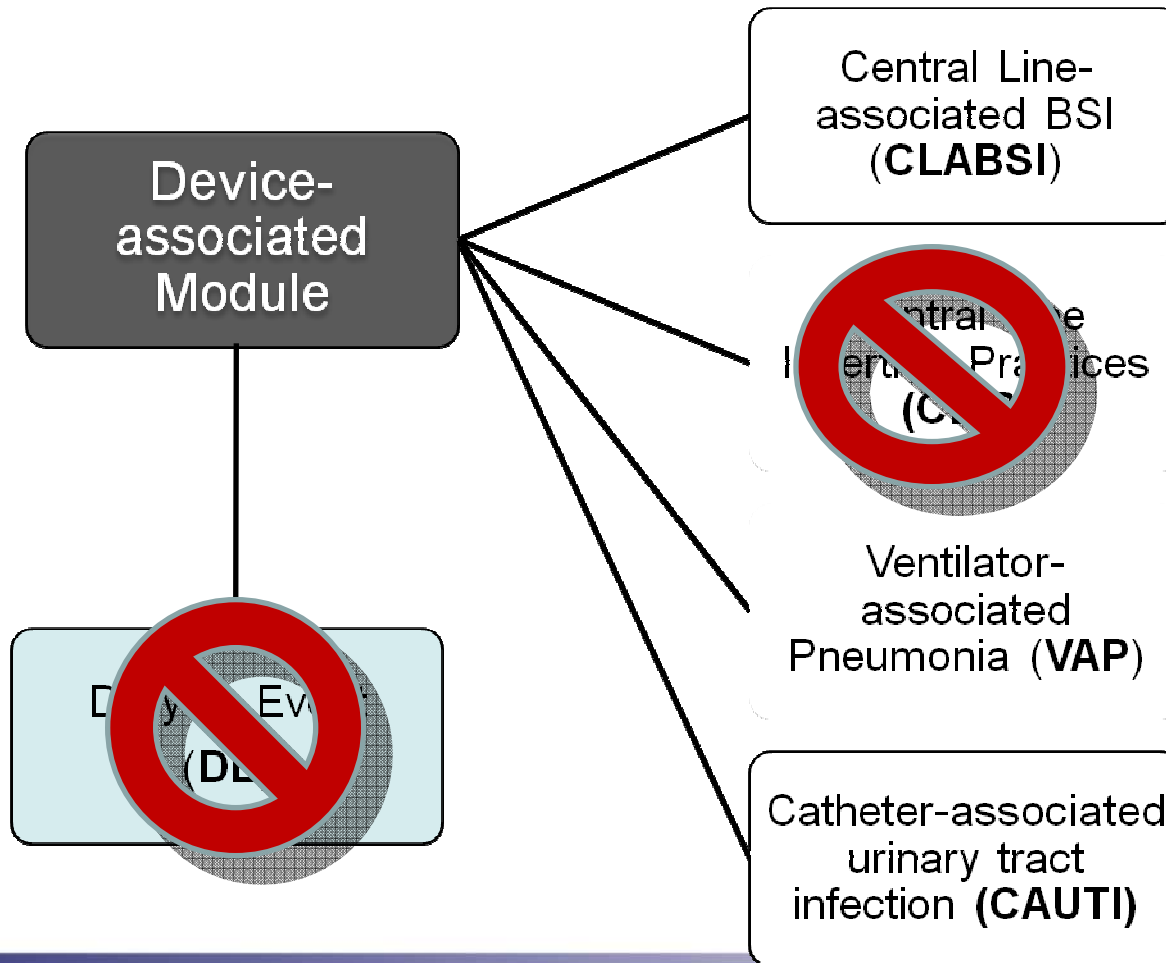


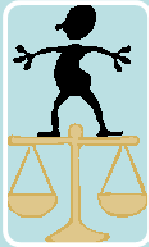
Collecting and Using Denominator Data for Device-associated Infections

MARY ANDRUS, BA, RN, CIC
Infection Preventionist- Consultant
APIC CONSULTING SERVICES, INC.

Device-associated Module



Metrics for Describing Device-associated Events



Risk-adjusted

- Rates are controlled for variations in the distribution of major risk factors
- Allows for comparison of rates



Expressed as Incidence Rates

- *New* events in a population during a specific time period



Standardized Infection Ratio (SIR)

- A summary measure used to track HAIs at a national, state, or local level over time
- Adjusts for patients of varying risk within each facility

Device-associated Rates/Ratios

$$\text{Device-associated HAI rate}^* = \frac{\text{\# Device-associated infections}^*}{\text{\# Device days}^*} \times 1000$$

*stratified by device/infection type

$$\text{Device Utilization Ratio}^* = \frac{\text{\# Device days}^*}{\text{\# Patient days}^*}$$

*stratified by device type

Denominators (Summary Data) in NHSN

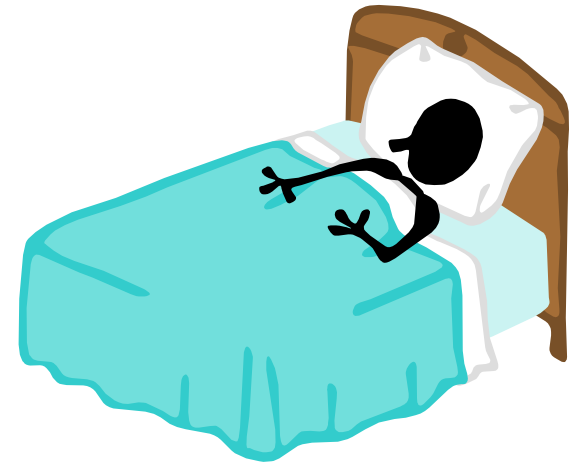


- NHSN Home
- Reporting Plan
- Patient
- Event
- Procedure
- Summary Data**
- Import/Export
- Analysis
- Surveys
- Users
- Facility
- Group
- Log Out

- Device days and patient days are used for denominators
- Device day denominator data that are collected differ according to the location of the patients being monitored

Locations – where DA events can be monitored

- Intensive Care Unit (ICU)
- Neonatal Intensive Care Unit (NICU)
- Specialty Care Areas (SCA)
 - Hematology/Oncology
 - Bone Marrow Transplant
 - Solid Organ Transplant
 - Inpatient/Acute Dialysis
 - Long-term Acute Care
- Other inpatient locations where patients are housed overnight and where denominator data are collected



ICU/Other Locations Denominator Form

- Used for critical care locations
- Used for step down units
- Used for other patient care wards
 - Examples:
 - Medical-surgical
 - Orthopedic
 - OB/GYN
- Is not used for NICU or SCA locations

OHQ No. 0920-0008
Exp. Date: 02-29-2009

NHSN Safety Network **Denominators for Intensive Care Unit (ICU)/ Other locations (not NICU or SCA)** * required for saving

Facility ID: _____ *Location Code: _____ *Month: _____ *Year: _____

Date	*Number of patients	**Number of patients with 1 or more central lines	**Number of patients with a urinary catheter	**Number of patients on a ventilator
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26				
27				
28				
29				
30				
31				
*Totals				

Label _____

Data _____

Assurance of Confidentiality: The information obtained in the surveillance system that would permit identification of any individual or institution is collected with a guarantee that it will be held in strict confidence, will be used only for the purposes stated, and will not otherwise be disclosed or released without the consent of the individual, or the institution in accordance with Sections 204, 205 and 205(c) of the Public Health Service Act (42 USC 242b, 242c, and 242(c)). Public reporting burden of this collection of information is estimated to average 2 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden to CDC, Reports Clearance Officer, 1600 Clifton Rd., MS D-14, Atlanta, GA 30333, ATTN: PRA (0920-0008), CDC #7750, effective date 11/01/2009.

http://www.cdc.gov/nceid/ohq/nhsn_PSforms.html



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SCA Locations Denominator form

- Used to collect denominator data in SCA locations
 - Bone marrow/stem cell transplant
 - Solid organ transplant
 - Inpatient dialysis
 - Hematology/oncology
 - Long Term Acute Care
- For CLABSI, temporary and permanent central lines are collected separately

NHSN Denominators for Specialty Care Area (SCA) ONS No. 0220-0858
Rev. Date: 02-29-2023

* required for saving

Facility ID: _____ *Location Code: _____ *Month: _____ *Year: _____

Date	*Number of patients	**Number of patients with 1 or more central lines (if patient has both, count as Temporary)		**Number of patients with a urinary catheter	**Number of patients on a ventilator
		Temporary	Permanent		
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
29					
30					
31					
*Totals					
	_____	_____	_____	_____	_____

Patient-days Temporary CL-days Permanent CL-days Urinary catheter-days Ventilator-days

** Conditionally required according to the events indicated in Plan.

Label: _____

Date: _____

Assurance of Confidentiality: The information obtained in the surveillance system that would permit identification of any individual or institution is collected with a guarantee that it will be held in strict confidence, will be used only for the purposes stated, and will not otherwise be disclosed or released without the consent of the individual, or the institution in accordance with Sections 20A, 20B and 20B(d) of the Public Health Service Act (42 USC 242a, 242b, and 242f(c)).
Public reporting burden of this collection of information is estimated to average 8 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC, Records Clearance Office, 1600 Clifton Rd., NE, Atlanta, GA 30333, ATTN: 904-955-9000.
2023-07-14 09:11:00 AM

NICU Locations Denominator Form

- Used to collect patient days and device days for Level III and combination II/III nurseries
- Umbilical line days and non-umbilical central days are collected separately
- All data are collected by five birthweight categories

CDC No. 1020-0858
Exp. Date: 10-29-2008

NHSN Safety Network **Denominators for Neonatal Intensive Care Unit (NICU)**

Facility ID: _____ *Location Code: _____ *Month: _____ *Year: _____ *required for saving

Date	Birth Weight Categories																			
	<750 gm				751-1000 gm				1001-1500 gm				1501-2500 gm				>2500 gm			
	*Psg	**UIC	**CL	**VNT	*Psg	**UIC	**CL	**VNT	*Psg	**UIC	**CL	**VNT	*Psg	**UIC	**CL	**VNT	*Psg	**UIC	**CL	**VNT
1																				
2																				
3																				
4																				
5																				
6																				
7																				
8																				
9																				
10																				
11																				
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24																				
25																				
26																				
27																				
28																				
29																				
30																				
31																				
*Total																				

Psg=number of infants UIC=number of infants with umbilical catheter CL=number of infants with 1 or more central lines VNT=number of infants on a ventilator *if infant has both a UIC and CL, count as UIC infant, only for the day

** Conditionally required according to the events indicated in Plan.

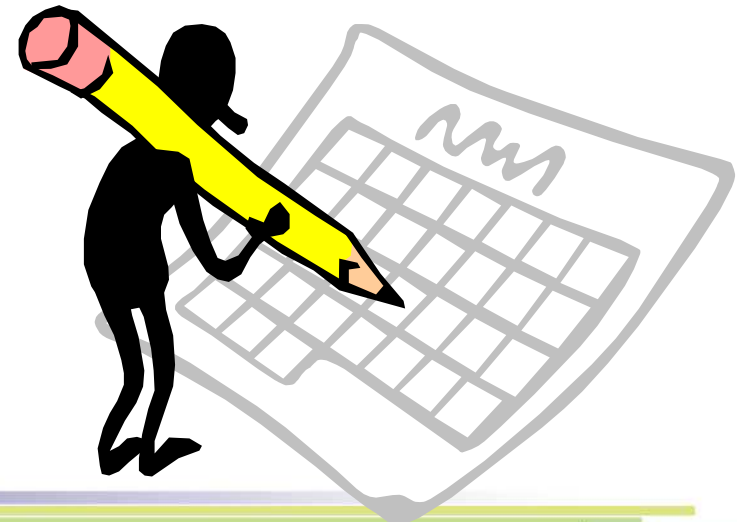
Label _____

Date _____

Assurance of Confidentiality: The information obtained in the surveillance system that would permit identification of any individual or institution is collected with a guarantee that it will be held in strict confidence, will be used only for the purposes stated, and will not otherwise be disclosed or released without the consent of the individual, or the institution in accordance with Sections 204, 206 and 207(e) of the Public Health Service Act (42 USC 242c, 242e, and 242o(c)). Public reporting burden of this collection of information is estimated to average 4 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor an information collection and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of the collection of information, including suggestions for reducing the burden to CDC, Report Clearance Office, 1600 Clifton Rd., MS-D14, Atlanta, GA 30333, ATTN: PRA (202)-205-2088. CDC #1732 Effective date 11/01/2008

Denominators (Summary Data)

- Train someone on the floor to collect summary data
- At the same time each day, count:
 - the number of patients on the unit
 - the number of patients with one or more of the devices you're collecting



Counting Patient Days




Counting Patient Days

- **At the same time each day**, count the number of patients on the unit. Use denominator forms
- Do not count patients who have not yet been admitted
- Do not count patients who have been discharged
- Do count patients who may be off the floor for tests (e.g., radiology, surgery, etc.) at the time the count is done
- The total is recorded in NHSN at the end of the month

Counting Patient Days - Example

- A surgical ICU (SICU) has 16 beds. Today, when patient days are counted (4 pm), there are 8 medical patients and 7 surgical patients
- For this unit today, 15 patients are recorded on the *Denominator for ICU/Other Locations* form
- Totals recorded in NHSN at the end of the month

 **Denominators for Intensive Care Unit (ICU)/
Other locations (not NICU or SCA)**

Facility ID: 13000		*Location Code: SICU	*Month: Oct	*
Date	*Number of patients	**Number of patients with 1 or more central lines	**Number of patients with a urinary catheter	*
1	15			
2				
3				
4				

Counting Patient Days - Example

- Patient days on this MICU are counted at noon
- At 7 am today, there are 12 patients in the MICU
- Mr. Smith was admitted from the ED at 11 am today
- Mr. Jones was discharged to a nursing home at 11:30 am today
- Miss Brown is in Radiology for a follow-up chest xray at noon today.

How many patient days should be counted and recorded today? 12

Recording Patient Days – ICU or Ward



Denominators for Intensive Care Unit (ICU)/ Other locations (not NICU or SCA)

OMB No. 0920-0666
Exp. Date: 09-30-2012

* required for saving

Facility ID: 40000		*Location Code: MICU		*Month: August		*Year: 2010	
Date	*Number of patients	**Number of patients with 1 or more central lines	**Number of patients with a urinary catheter			**Number of patients on a ventilator	
1	12						
2	10						
3	13						
4	13						
5	14						
6	10						
7	11						
8	11						
9	10						
10	14						
11	14						
12	12						
13	11						

Recording Patient Days – Specialty Care Areas (SCA)



Denominators for Specialty Care Area (SCA)

OMB No. 0920-0666
Exp. Date: 09-30-2012

* required for saving

Facility ID: 40000		*Location Code: BMT		*Month: August	*Year: 2010
Date	*Number of patients	**Number of patients with 1 or more central lines (if patient has both, count as Temporary)		**Number of patients with a urinary catheter	**Number of patients on a ventilator
		Temporary	Permanent		
1	7				
2	4				
3	4				
4	5				
5	6				
6	7				
7	7				
8	8				
9	9				
10					

Recording Patient Days - NICU



Denominators for Neonatal Intensive Care Unit (NICU)

OMB No. 0920-066
Exp. Date: 09-30-201

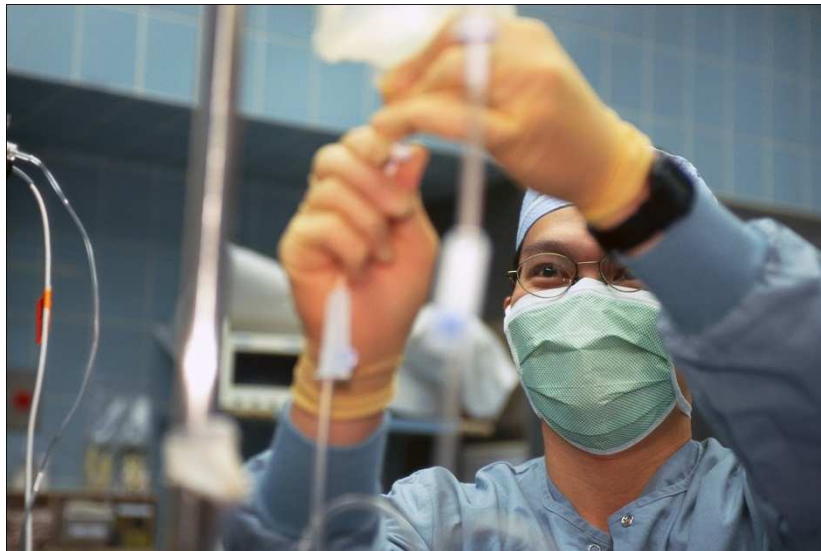
* required for saving

Facility ID: 40000 *Location Code: NICU *Month: August *Year: 2010

Birth Weight Categories

Date	<750 gm				751-1000 gm				1001-1500 gm				1501-2500 gm				>2500 gm			
	*Pts	**U/C	**CL	**VNT	*Pts	**U/C	**CL	**VNT	*Pts	**U/C	**CL	**VNT	*Pts	**U/C	**CL	**VNT	*Pts	**U/C	**CL	**VNT
1	3				2				0				6				1			
2	3				2				0				6				1			
3	4				0				3				6				2			
4	4				0				3				7				1			
5	5				0				3				6				3			
6	4				1				3				5				4			
7	4				2				4				5				4			
8	3				2				4				5				3			
9	3				2				5				5				3			
10	2				2				4				4				2			
11	3				1				5				4				1			
12	3				1				5				5				0			
13	3				1				5				5				0			
14	3				2				3				6				0			

Counting Device Days



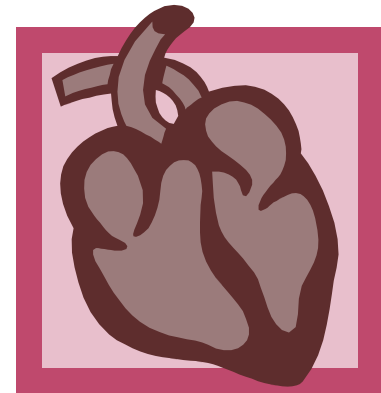
Central Lines



Definition: Central Line

A vascular infusion device that terminates at or close to the heart or in one of the great vessels.

The following are considered great vessels for the purpose of reporting central line infections and counting central line days



- Aorta
- Pulmonary artery
- Superior vena cava
- Inferior vena cava
- Brachiocephalic veins
- Internal jugular veins
- Subclavian veins
- External iliac veins
- Common femoral veins

Counting Central Line Days (CLABSI) ICU or Ward

- At the same time each day, count the number of patients with one or more central lines of any type
- Enter the total of all days in NHSN at the end of the month



Counting Central Line Days -(ICU)

Examples

James is admitted today at 5 am and a subclavian central line is inserted. At noon today, one central line day is counted.

Gretchen was admitted 2 weeks ago. Today she has both a PICC line and a femoral central line. At noon today, one central line day is counted

Counting Central Lines (Ward)

Example

- **Example: There are 6 patients on Medical Ward. 3 of the patients have a PICC line and one additional patient has both a PICC line and a femoral central line.**
- **The number of Central Line days for the Medical Ward is 4**

Example of Central Line Days (ICU or Ward)



Denominators for Intensive Care Unit (ICU)/ Other locations (not NICU or SCA)

OMB No. 0920-0666
Exp. Date: 09-30-2012

* required for saving

Facility ID: 40000		*Location Code: SICU		*Month: July	*Year: 2010
Date	*Number of patients	**Number of patients with 1 or more central lines	**Number of patients with a urinary catheter	**Number of patients on a ventilator	
1	7	7			
2	6	6			
3	4	4			
4	9	7			
5	9	7			
6	8	8			
7	9	9			
8	10	9			
9	10	8			
10	10	8			
11	8	7			
12	8	7			
13	7	4			

Note: the total number of central line days cannot be greater than the total number of patients for an individual day

Counting Central Line Days – SCA Location

- Permanent (tunneled) central lines are commonly used in patients admitted to these locations
- Permanent central lines may have lower rates of associated infection than patients with temporary central lines

The number of patients with central lines is separated into patients with temporary central lines and those with permanent central lines

If a patient has **both** a temporary and a permanent central line, count the day only as a temporary line day

Counting Permanent Central Lines (in any location type)

- **Permanent Central Line includes:**
 - Tunneled
 - Implanted ports
- **Temporary Central Line**
 - Non-tunneled

If a patient has only a permanent central line which is not accessed, it is not counted as a central line day

If this line is accessed, it is counted on that day and every day thereafter

Example of Central Line Days - SCA



Denominators for Specialty Care Area (SCA)

OMB No. 0920-0666
Exp. Date: 09-30-2012

* required for saving

Facility ID: 40000		*Location Code: BMT		*Month: August	*Year: 2010
Date	*Number of patients	**Number of patients with 1 or more central lines (if patient has both, count as Temporary)		**Number of patients with a urinary catheter	**Number of patients on a ventilator
		Temporary	Permanent		
1	7	4	2		
2	4	4	0		
3	4	2	1		
4	5	2	2		
5	6	3	2		
6	7	4	3		
7	7	4	3		
8	8	5	3		
9	9	7	1		
10					

Note: the total number of central line days cannot be greater than the total number of patients for an individual day

Counting Central Line Days in the NICU



- Device days are also counted by birthweight
- Central line -- When monitoring CLABSIs, umbilical central lines are counted separately from non-umbilical central lines.
- If a patient has both an umbilical line and a non-umbilical central line (e.g., PICC), then count only the umbilical line

Example of Summary Data -- NICU



Denominators for Neonatal Intensive Care Unit (NICU)

OMB No. 0920-0666
Exp. Date: 02-29-2008

** required for saving

Birth Weight Categories																				
Date	<750 gm				751-1000 gm				1001-1500 gm				1501-2500 gm				>2500 gm			
	*Pts	**U/c	**CL	**VNT	*Pts	**U/c	**CL	**VNT	*Pts	**U/c	**CL	**VNT	*Pts	**U/c	**CL	**VNT	*Pts	**U/c	**CL	**VNT
1	3	0	3	3	4	1	3	3	1	1	0	0	2	1	1	1	0	0	0	0
2	3	1	2	2	5	2	3	3	0	0	0	0	3	2	1	1	2	2	0	1
3	2	1	3	2	3	2	1	2	0	0	0	0	1	0	1	1	2	2	0	1
4																				
5																				
6																				
7																				

Separated by
Birthweight category

Umbilical and non-umbilical
central lines are collected
separately

CLABSI Rate

$$\text{CLABSI Rate}^* = \frac{\text{\# CLABSI's}^*}{\text{\# central line days}^*} \times 1000$$

- * Stratify by:
- ✓ Type of ICU or other location
 - ✓ Specialty Care Area (SCA)
 - Temporary line
 - Permanent line
 - ✓ NICU
 - Birthweight category
 - Line type (non-umbilical vs. umbilical)



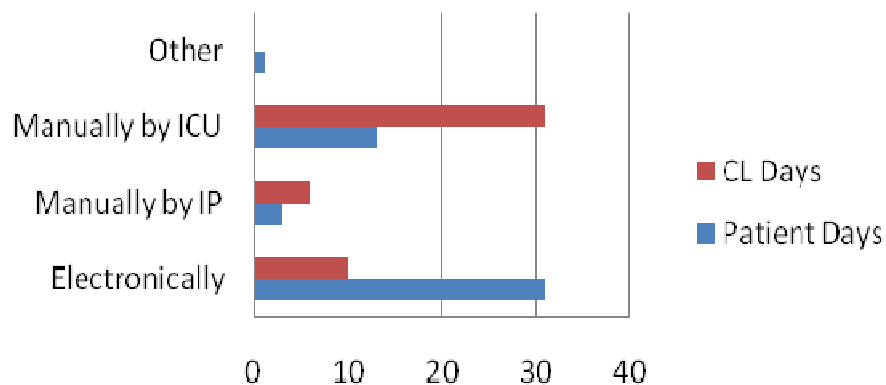
Why is accuracy so important?

- Surveillance is only as good as the quality of the data collected
- IPs are positioned uniquely among hospital employees to determine whether a patient has an HAI
- Standard definitions of HAIs must be used so that consistency in data collection is maintained
- If you can't measure it, you can't manage it!

You must follow the rules



Figure 4. Mechanism Used to Collect CL and Patient Days

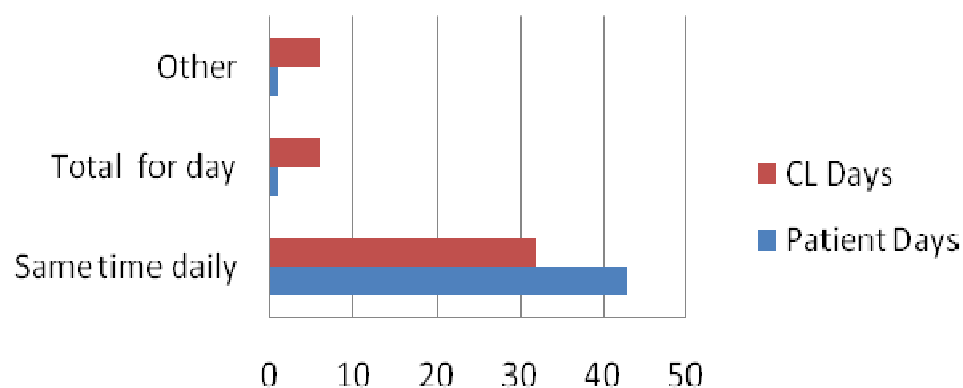


“Electronically” usually means that each staff nurse records details about the patient central line during the course of his/her shift. Nursing staff collecting data commonly did not collect data at a specific time; data collected electronically typically includes all central lines identified during the day.

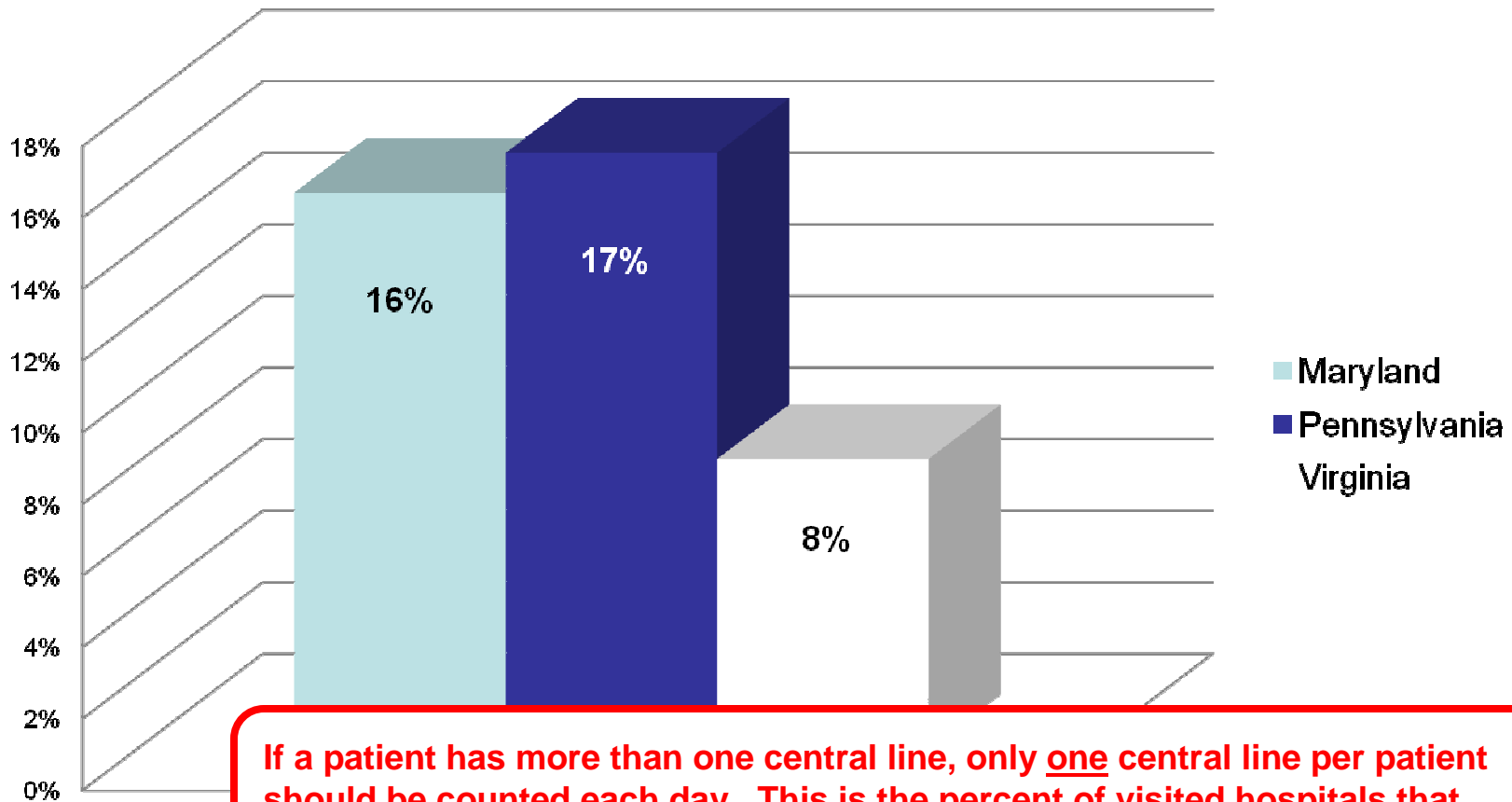
10 of the 45 facilities report that the time of day collection takes place is not static. This is not the correct method for collecting central line days.

With permission from the Maryland Health Care Commission

Figure 5. Methodology Used for Counting CL and Patient Days



If a patient had 2 separate central lines, how many central line days are counted?



If a patient has more than one central line, only one central line per patient should be counted each day. This is the percent of visited hospitals that reported that they would count two lines, or that they were not sure

COLLECTION OF CLABSI DENOMINATORS

	# devices	#patients w/ line (same time)	#patients w/ line (any time)	EMR
1	6	5	5	
2	8	5	6	
3	8	6	6	
4	9	6	9	
5	10	7	9	

Different data collection methods will produce significantly different rates!

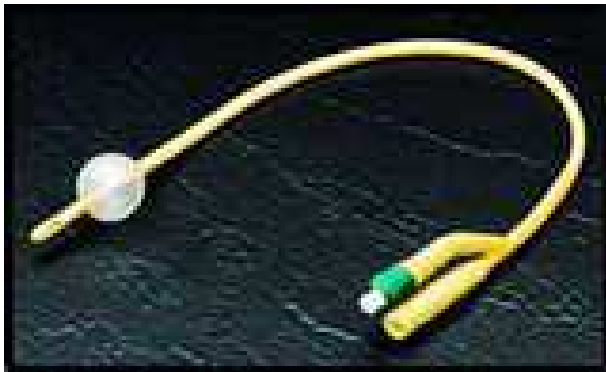
$$\text{CLABSI Rate} = \frac{2}{253} \times 1000$$

$$\text{te} = \frac{2}{217} \times 1000$$

9				
10				10
11	7			7
	30	10	9	10
	249	179	217	253
Rate	8.0	11.2	9.2	7.9

SETTING YOUR BOTTOM LINE

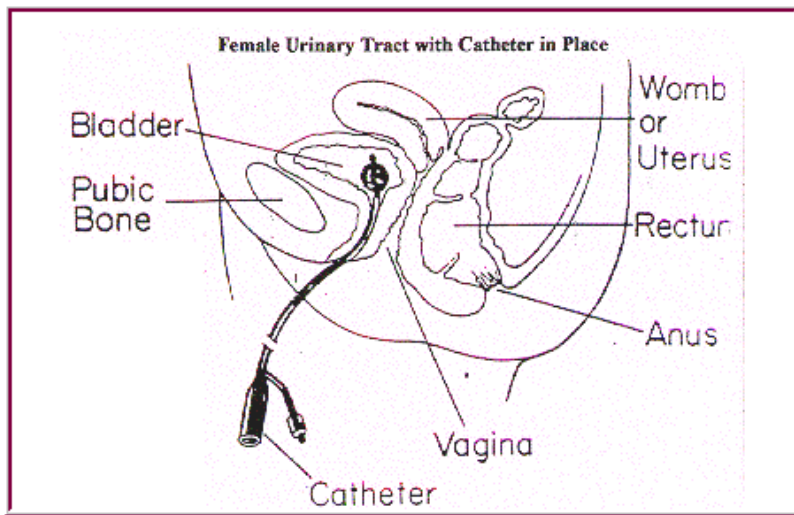
Counting Device Days



**Indwelling
Catheter
Days**



Definition: Indwelling Catheter



- A drainage tube that is inserted into the urinary bladder through the urethra, is left in place, and is connected to a closed collection system.
 - Also called a Foley catheter
 - Does not include straight in and out catheters
 - Does not include suprapubic or nephrostomy catheters

Counting Catheter Days (ICU, Ward, and SCA)

- At the same time every day, count the number of patients who have an indwelling catheter
- These daily counts are summed and only the total for the month is entered into NHSN



Note: CAUTI is not collected in NICU locations

Example – Counting Catheter Days (ICU, Ward)



Denominators for Intensive Care Unit (ICU)/ Other locations (not NICU or SCA)

OMB No. 0920-0666
Exp. Date: 09-30-2012

* required for saving

Facility ID: 40000		*Location Code: SICU		*Month: July		*Year: 2010	
Date	*Number of patients	**Number of patients with 1 or more central lines	**Number of patients with a urinary catheter	**Number of patients on a ventilator			
1	7	7	4	2			
2	6	6	4	1			
3	4	4	4	1			
4	9	7	6	0			
5	9	7	5	2			
6	8	8	4	2			
7	9	9	3	2			
8	10	9	4	2			
9	10	8	4	3			
10	10	8	5	3			
11	8	7	4	1			
12	8	7	3	0			
13	7	4	5	0			



Denominators for Specialty Care Area (SCA)

OMB No. 0920-0666
Exp. Date: 09-30-2012

* required for saving

Facility ID: 40000		*Location Code: BMT		*Month: August	*Year: 2010
Date	*Number of patients	**Number of patients with 1 or more central lines (if patient has both, count as Temporary)		**Number of patients with a urinary catheter	**Number of patients on a ventilator
		Temporary	Permanent		
1	7	4	2	3	
2	4	4	0	3	
3	4	2	1	3	
4	5	2	2	4	
5	6	3	2	3	
6	7	4	3	3	
7	7	4	3	3	
8	8	5	3	4	
9	9	7	1	4	

MSICU - Wednesday, November 28, 2007 10:00 am

Room #	Name	Urinary catheter	IV line	Ventilator
201	Mrs. Jones		CVC – Jugular	IPPB q 6 hr
202	Miss Scarlett		CVC – Femoral	
203	Mr. Green	Suprapubic to dd	Swan ganz PICC	Tracheostomy ventilator
204	Mrs. White	Foley to dd	PIV X 2	
205	Col. Mustard	Foley out 8:00 am	PIV right antecub CVC Jugular	
206	Mrs. Doubtfire			Weaning (off vent)
207	Mr. Jackson	Cath for spec.	PIV right antecub	IPPB q 6 hr
208	Mr. Blue	Foley to dd	CVC – Subclavian	Vent cont.
209	Mrs. Smith – transferred to MS Ward at 11 am	Straight cath prn	PICC	Vent . Extubated at 10:30 am – on room air
210	Miss Brown – transferred from CVICU @ 9 am	Foley to dd	PICC	

Patient days _____

Central line days _____

Indwelling catheter days _____

Ventilator days _____



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MSICU - Wednesday, November 28, 2007 10:00 am

Room #	Name	Urinary catheter	IV line	Ventilator
201	Mrs. Jones		CVC – Jugular	IPPB q 6 hr
202	Miss Scarlett		CVC – Femoral	
203	Mr. Green	Suprapubic to dd	Swan ganz PICC	Tracheostomy ventilator
204	Mrs. White	Foley to dd	PIV X 2	
205	Col. Mustard	Foley out 8:00 am	PIV right antecub CVC Jugular	
206	Mrs. Doubtfire			Weaning (off vent)
207	Mr. Jackson	Cath for spec.	PIV right antecub	IPPB q 6 hr
208	Mr. Blue	Foley to dd	CVC – Subclavian	Vent cont.
209	Mrs. Smith – transferred to MS Ward at 11 am	Straight cath prn	PICC	Vent . Extubated at 10:30 am – on room air
210	Miss Brown – transferred from CVICU @ 9 am	Foley to dd	PICC	

Patient days 10

Central line days _____

Indwelling catheter days _____

Ventilator days _____



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MSICU - Wednesday, November 28, 2007 10:00 am

Room #	Name	Urinary catheter	IV line	Ventilator
201	Mrs. Jones		CVC – Jugular	IPPB q 6 hr
202	Miss Scarlett		CVC – Femoral	
203	Mr. Green	Suprapubic to dd	Swan ganz PICC	Tracheostomy ventilator
204	Mrs. White	Foley to dd	PIV X 2	
205	Col. Mustard	Foley out 8:00 am	PIV right antecub CVC Jugular	
206	Mrs. Doubtfire			Weaning (off vent)
207	Mr. Jackson	Cath for spec.	PIV right antecub	IPPB q 6 hr
208	Mr. Blue	Foley to dd	CVC – Subclavian	Vent cont.
209	Mrs. Smith – transferred to MS Ward at 11 am	Straight cath prn	PICC	Vent . Extubated at 10:30 am – on room air
210	Miss Brown – transferred from CVICU @ 9 am	Foley to dd	PICC	

Patient days 10

Central line days _____

Indwelling catheter days 3

Ventilator days _____



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Patient days 10

Central line days 7

Indwelling catheter days 3

Ventilator days



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Patient days 10

Central line days 7

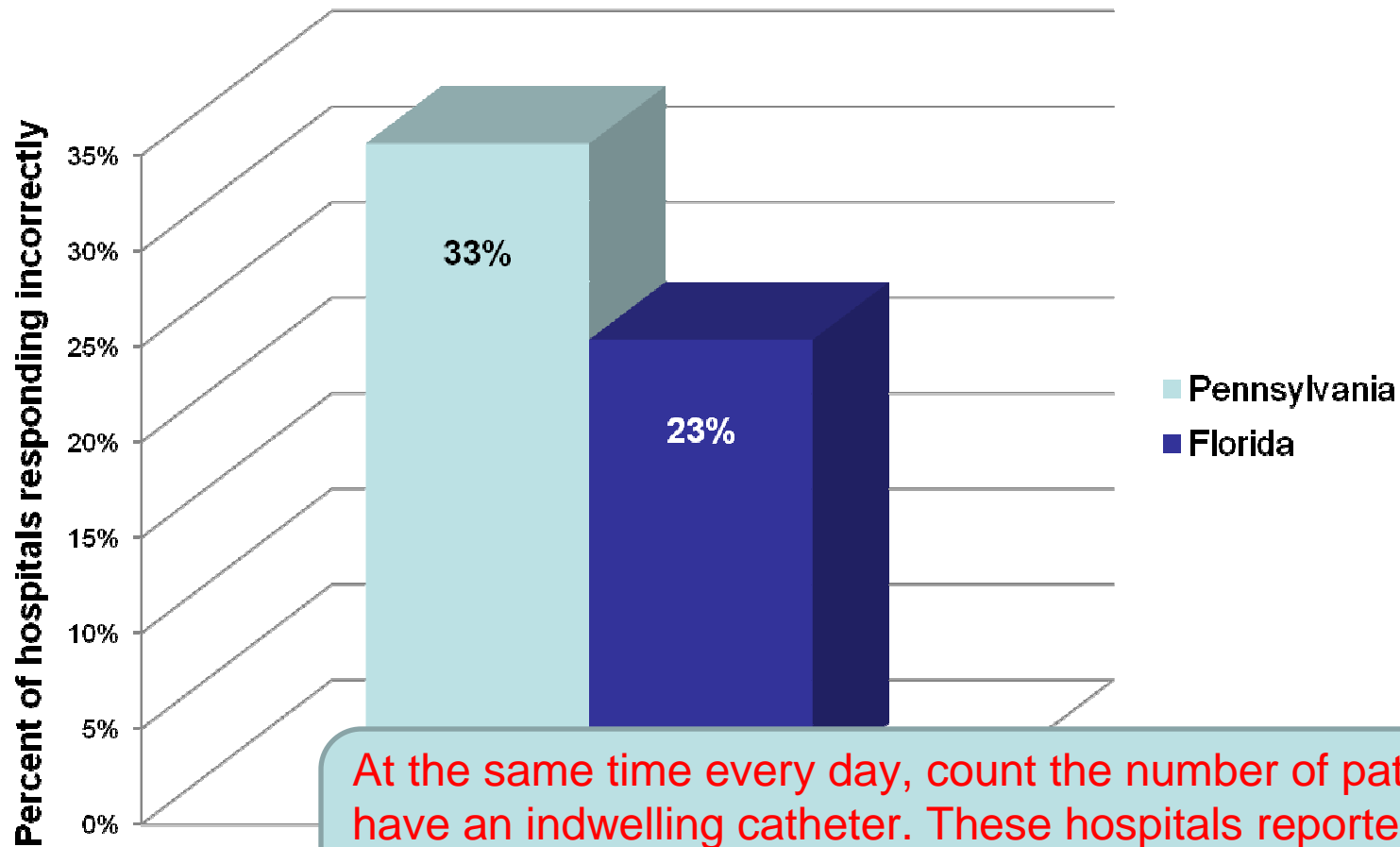
Indwelling catheter days 3

Ventilator days 4



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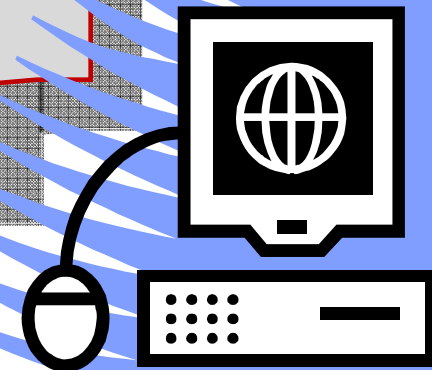
If the catheter is removed at 10A and removed at 2 P, how many CATH days are counted at 11A?




At the same time every day, count the number of patients who have an indwelling catheter. These hospitals reported that they would count one catheter, or that they were not sure how many to count.

Electronic Collection of Denominators

When denominator data are available from electronic databases (e.g., ventilator days from respiratory therapy), these sources may be used as long as the counts are not substantially different ($\pm 5\%$) from manually collected counts



Entering Summary Data in NHSN

 NHSN Home

Reporting Plan

Patient

Event

Procedure

Summary Data

▶ Add

▶ Find

▶ Incomplete

Import/Export

Analysis

Surveys

Users

Facility

Group

Log Out

From the Navigation Bar, select
Summary Data, then **Add**

Add Patient Safety Summary Data

Summary Data Type:

- Device Associated - Intensive Care Unit / Other Locations
- Device Associated - Neonatal Intensive Care Unit
- Device Associated - Specialty Care Area
- Device Associated - Outpatient Dialysis - Census Form
- MDRO and CDAD Prevention Process and Outcome Measures Monthly Monitoring
- High Risk Inpatient Influenza Vaccination Monthly Monitoring Form - Method A
- High Risk Inpatient Influenza Vaccination Monthly Monitoring Form - Method B

The screen will display a drop-down list of Location types. Select the type of Location type to which you will add patient days and denominator days

Denominators for Intensive Care Unit (ICU)/ Other locations (not NICU or SCA)

Mandatory fields marked with *

Facility ID*: 10000 (DHQP Memorial Hospital)

Location Code*: CTICU - CARDIOTHORACIC CC

Month*: June

Year*: 2010

Total Patient Days: 432

Central Line Days: 209

Urinary Catheter Days: 366

Ventilator Days: 211

Denominators for Specialty Care Area (SCA)

Mandatory fields marked with *

Facility ID*: 10000 (DHQP Memorial Hospital)

Location Code*: LTAC - LTAC

Month*: July

Year*: 2010

Total Patient Days: 116

Temporary Central Line Days: 31

Permanent Central Line Days: 51

Urinary Catheter Days: 100

Ventilator Days:

Neonatal Intensive Care Unit



Mandatory fields marked with *

[Print PDF Form](#)

Facility ID*: 10000 (DHQP Memorial Hospital)


Location Code*: NICU 3 - LEVEL 3 NICU ▼

Month*: June ▼

Year*: 2010 ▼

Birth Wt.	Patient Days	U/C Days	CL Days	Vent Days
<=750	140	81	25	110
751-1000	104	60	41	55
1001-1500	67	25	30	39
1501-2500	79	69	10	43
>2500	23	23	0	10

Data Quality Check

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

Patient Safety Component Analysis Output Options

Expand All

Collapse All

- ▶ Device-Associated Module
- ▶ Procedure-Associated Module
- ▶ MDRO/CDI Module - Infection Surveillance
- ▶ MDRO/CDI Module - LABID Event Reporting
- ▶ MDRO/CDI Module - Process Measures
- ▶ MDRO/CDI Module - Outcome Measures
- ▶ Vaccination Module
- ▶ **Advanced**
- ▶ My Custom Output
- ▶ Published Output

Data Quality

Expand All

Collapse All

- Device-Associated Module
- Procedure-Associated Module
- MDRO/CDI Module - Infection Surveillance
- MDRO/CDI Module - LABID Event Reporting
- MDRO/CDI Module - Process Measures
- MDRO/CDI Module - Outcome Measures
- Vaccination Module



Advanced

[Create New custom Option](#)

- Patient-level Data
- Event-level Data
- Procedure-level Data
- Summary-level Data
- Plan Data
- Pathogen-level Data
- Facility-level Data











Data Quality

- My Custom Output
- Published Output

Data Quality

Data Quality










CDC Defined Output

 Line Listing - Duplicate Procedures	<input type="button" value="Run"/>	<input type="button" value="Modify"/>
 Line Listing - Procedures on Patient DOB	<input type="button" value="Run"/>	<input type="button" value="Modify"/>
 Line Listing - Procedures with 0 Duration	<input type="button" value="Run"/>	<input type="button" value="Modify"/>
 Line Listing - Duplicate BSI/PNEU/UTI Events	<input type="button" value="Run"/>	<input type="button" value="Modify"/>
 Line Listing - Duplicate SSI Events	<input type="button" value="Run"/>	<input type="button" value="Modify"/>
 Line Listing - SSIs On Procedure Date	<input type="button" value="Run"/>	<input type="button" value="Modify"/>
 Line Listing - Extremely High Incidence of SSI	<input type="button" value="Run"/>	<input type="button" value="Modify"/>
 Line Listing - Events Reported with 0 Device Days	<input type="button" value="Run"/>	<input type="button" value="Modify"/>

Data Quality

Data Quality

CDC Defined Output

 Line Listing - Duplicate Procedures	<input type="button" value="Run"/>	<input type="button" value="Modify"/>
 Line Listing - Procedures on Patient DOB	<input type="button" value="Run"/>	<input type="button" value="Modify"/>
 Line Listing - Procedures with 0 Duration	<input type="button" value="Run"/>	<input type="button" value="Modify"/>
 Line Listing - Duplicate BSI/PNEU/UTI Events	<input type="button" value="Run"/>	<input type="button" value="Modify"/>
 Line Listing - Duplicate SSI Events	<input type="button" value="Run"/>	<input type="button" value="Modify"/>
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 Line Listing - Extremely High Incidence of SSI	<input type="button" value="Run"/>	<input type="button" value="Modify"/>
  Line Listing - Events Reported with 0 Device Days	<input type="button" value="Run"/>	<input type="button" value="Modify"/>

Events Reported with 0 Device Days

orgid	summaryYM	summarytype	location	eventType	eventCount	birthWtCode	numpatdays	numddays	plan
10000	2005M01		BURN	CLAB	1		.	.	Y
10000	2005M03		2 EAST2	CLAB	1		.	.	N
10000	2005M03		NICU 3	UCAB	1	B	.	.	Y
10000	2005M04		2 - EAST	TCLAB	1		.	.	Y
10000	2005M04		3 MS	CLAB	3		.	.	Y
10000	2005M04		PEDS ICU	CLAB	1		.	.	N
10000	2005M05		3 MS	CAU	1		.	.	N
10000	2005M05		PICU	CLAB	1		.	.	N
10000	2005M05		SICU	CLAB	1		.	.	Y
10000	2005M06		2 - EAST	CAU	1		.	.	Y
10000	2005M06		SICU	CLAB	1		.	.	Y
10000	2005M07		SICU	CLAB	1		.	.	Y
10000	2005M07		SICU	VAP	1		.	.	N
10000	2005M08		STROKE	VAP	1		.	.	Y
10000	2005M09		PEDS ICU	CLAB	1		.	.	N
10000	2005M09		SICU	CLAB	1		.	.	Y

Denominator Data -- Summary

- For device-associated infections, at the same time every day, count the number of patients with one or more of the device monitored
- The way in which the data are collected is dependent on the location where the outcome measure is monitored
- It is important to follow the data collection protocol exactly!
- If alternative data collection resources are used, find a way to validate the data
- Use Data Quality report measures

QUESTIONS?



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