

*Surveillance:  
Reporting Your Data  
Part III*

*January 20, 2012*

# *Data Collection Forms*

## *Where to find Dialysis Event forms*

- [http://www.cdc.gov/nhsn/forms/57.109\\_DIA\\_BLANK.pdf](http://www.cdc.gov/nhsn/forms/57.109_DIA_BLANK.pdf)
- *Print from NHSN*

## *Forms Instructions:*

- *Patient Safety Component Manual – Chapter 14:  
Tables of Instructions*

[http://www.cdc.gov/nhsn/PDFs/pscManual/14\\_Tables\\_of\\_Instructions.pdf](http://www.cdc.gov/nhsn/PDFs/pscManual/14_Tables_of_Instructions.pdf)

# *Add a Monthly Reporting Plan*

## *General Data*

NHSN Navigation Bar: select Reporting Plan, then Add

- Select Month & Year of surveillance
- Option to choose “No NHSN Patient Safety Modules Followed this Month”
  - Must follow a module  $\geq 6$  months/year to remain active
  - Collaborative members report every month
- Choose your surveillance location from drop-down menu
- Select DE optional
- Leave other modules blank
- Click Save

# Add a Monthly Reporting Plan General Data



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

NHSN - National Healthcare Safety Network (apt-v-nhsn-test)

NHSN Home

**Reporting Plan**

Add

Find

**Patient**

**Event**

**Procedure**

**Summary Data**

**Import/Export**

**Analysis**

**Surveys**

**Users**

**Facility**

**Group**

**Log Out**

## Add Monthly Reporting Plan

No data found for November, 2010

Mandatory fields marked with \*

Facility ID\*: Mount Sinai Medical Center (ID 10127)

Month\*: November

Year\*: 2010

No NHSN Patient Safety Modules Followed this Month

### Device-Associated Module [HELP](#)

Locations

DWEST - DIALYSIS WEST

CLA BSI DE VAP CAUTI CLIP

Add Row

Clear All Rows

Copy from Previous Month

### Procedure-Associated Module [HELP](#)

Procedures

SSI

Post-procedure  
PNEU

Add Row

Clear All Rows

Copy from Previous Month

# Patient Census Denominator Data

<b>Population</b>	<i>Chronic hemodialysis outpatients</i>
<b>Denominator</b>	<ul style="list-style-type: none"><li>■ <i>Number of dialysis outpatients on the first 2 working days of the month</i></li><li>■ <i>Stratified by 5 vascular access types</i></li></ul>

- *Complete Patient Census once per month*

- *Count each patient once*

- *if they have > 1 access, record the highest risk access only:*

*Fistula < Graft < Tunneled Central Line < Nontunneled Central Line*


# Add Monthly Patient Census Denominator Data

NHSN 6.4.0.5 Add Patient Safety Summary Data - Windows Internet Explorer provided by ITS0

http://apt-v-nhsn-test:7001/nhsn64/addsummarydata.do?method=showpage&navReset=true&currentmenu=menu\_ps\_summ\_add&NHSNSessionID=3757

File Edit View Favorites Tools Help

NHSN 6.4.0.5 Add Patient Safety Summary Data

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NHSN - National Healthcare Safety Network (apt-v-nhsn-test)

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  - Find
  - Incomplete
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## 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 CDI Prevention Process and Outcome Measures Monthly Monitoring
- Vaccination Monthly Summary Method
- Denominators for Patient-Level Vaccination Method



# Add Monthly Patient Census Denominator Data



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NHSN Home

NHSN Home

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## Denominators for Outpatient Dialysis - Census Form

[?HELP](#)

[Print PDF Form](#)

Mandatory fields marked with \*

Facility ID\*: 10127 (Mount Sinai Medical Center)

Location Code\*: DWEST - DIALYSIS WEST

Month\*: December

Year\*: 2010

Vascular Access Type	Number of Chronic Hemodialysis Patients
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Graft\*:

Fistula\*:

Temporary Central Line\*:

Permanent Central Line\*:

Port Access Device (e.g. Lifesite)\*:

Total Patients\*:

# *Dialysis Event Numerator Data*

<b>Population</b>	<i>Chronic hemodialysis outpatients</i>
<b>Numerator</b>	<i>Complete form for each dialysis event</i> <ul style="list-style-type: none"><li>• <i>Hospitalization</i></li><li>• <i>IV antimicrobial start</i></li><li>• <i>Positive blood culture</i></li></ul>

*Collect Dialysis Event information as events occur.*

Optional – use Dialysis Event Log Form & complete DE Forms later

# *Add a Dialysis Event Numerator Data*

- *NHSN navigation bar: select Event, then Add*
- *Add patient*
  - *Using Patient ID #*
  - *Add patient directly now*
  - *Leave Patient ID # blank & click Find to search by name*
- *Event Type: DE – Dialysis Event*
- *Choose Event Type(s) & indicate Problem(s)*
- *Click Save*

# Add a Dialysis Event



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## Add Event

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Reporting Plan

Patient

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Mandatory fields marked with \*

Fields required for record completion marked with \*\*

Fields required when in Plan marked with >

### Patient Information [HELP](#)

Facility ID\*: Mount Sinai Medical Center (ID 10127)

Event #:

Patient ID\*:

Social Security #:

Secondary ID:

Last Name:

First Name:

Middle Name:

Gender\*:

Date of Birth\*:

Ethnicity:

Race:  American Indian/Alaska Native

Asian

Black or African American

Native Hawaiian/Other Pacific Islander

White

# Add a Dialysis Event

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## Add Event

Mandatory fields marked with \*

Fields required for record completion marked with \*\*

Fields required when in Plan marked with >

### Patient Information [?HELP](#)

Facility ID\*: Mount Sinai Medical Center (127)

Event #:

Patient ID\*: 55555

Social Security #:

Secondary ID:

Last Name: Smith

First Name: Jane

Middle Name:

Gender\*: F - Female

Date of Birth\*: 09/08/1964

Ethnicity:

Race:  American Indian/Alaska Native

Asian

Black or African American

Native Hawaiian/Other Pacific Islander

White

### Event Information [?HELP](#)

Event Type\*:

Date of Event\*:

Post-procedure:

Location\*:

Date Admitted to Facility>:

# Add a Dialysis Event

## Event Information [?HELP](#)

Event Type\*: DE - Dialysis Event

Date of Event\*: 12/22/2010

Location\*: DWEST - DIALYSIS WEST

## Risk Factors [?HELP](#)

Vascular Accesses (check all that apply)\*:

Graft

Fistula

Temporary Central Line

Permanent Central Line

Port Access Device

Date of Access



11/09/2010



Date Unknown

## Event Details [?HELP](#)

Specify Event (check one or more)\*:

Hospitalization

In-unit IV antimicrobial start. Was IV vancomycin started?: Y - Yes

Patient with a positive blood culture

Suspected source of positive blood culture: Vascular access

Problem(s) (select one or more)\*:

**Event Type:**  
*Always choose DE, even if other options seem applicable (e.g. BSI)*

# Add a Dialysis Event

- ❑ All 3 DE types require problem(s) specified
- ❑ Positive blood culture requires problems & pathogen(s) specified

## Event Details

\*Specify Event: (check one or more)

IV antimicrobial start. Was IV vancomycin started?  Yes  No

Patient with a positive blood culture:

\* Suspected source of positive blood culture (check one):

Vascular access  A source other than the vascular access  Contamination  Uncertain

If positive blood culture, specify pathogen on pages 2-3.

Pus, redness, or increased swelling at vascular access site

\* Check the access site(s) with pus, redness, or increased swelling:

Fistula  Graft  Tunneled central line  Nontunneled central line  Other access device

\*Problem(s): (check one or more)

Fever  $\geq 37.8^{\circ}\text{C}$  ( $100^{\circ}\text{F}$ ) oral  Chills or rigors  Drop in blood pressure

Wound (NOT related to vascular access) with pus or increased redness

Cellulitis (skin redness, heat, or pain without open wound)

Pneumonia or respiratory infection

Other (specify) \_\_\_\_\_

\*Outcome: Hospitalization  Yes  No  Unknown

Death  Yes  No  Unknown

# Add a Dialysis Event

## Positive Blood Culture

Enter pathogen & indicate antimicrobial susceptibility results:

*S = Susceptible*    *R = Resistant*    *I = Intermediate*    *N = Not Tested*

Pathogens [HELP](#)

Pathogen 1:  Search 11 drugs required

* <u>AMP</u> <input type="radio"/> S <input checked="" type="radio"/> R <input type="radio"/> I <input type="radio"/> N	* <u>CIPRO</u> <input checked="" type="radio"/> S <input type="radio"/> R <input type="radio"/> I <input type="radio"/> N	<u>LEVO</u> <input checked="" type="radio"/> S <input type="radio"/> R <input type="radio"/> I <input type="radio"/> N	<u>MOXI</u> <input checked="" type="radio"/> S <input type="radio"/> R <input type="radio"/> I <input type="radio"/> N	* <u>DAPTO</u> <input checked="" type="radio"/> S <input type="radio"/> NS <input type="radio"/> N	* <u>DOXY</u> <input type="radio"/> S <input type="radio"/> R <input type="radio"/> I <input checked="" type="radio"/> N	<u>MINO</u> <input type="radio"/> S <input type="radio"/> R <input type="radio"/> I <input checked="" type="radio"/> N
* <u>GENTHL</u> <input type="radio"/> S <input type="radio"/> R <input checked="" type="radio"/> N	* <u>LNZ</u> <input type="radio"/> S <input type="radio"/> R <input type="radio"/> I <input checked="" type="radio"/> N	* <u>QUIDAL</u> <input type="radio"/> S <input type="radio"/> R <input type="radio"/> I <input checked="" type="radio"/> N	* <u>STREPHL</u> <input type="radio"/> S <input type="radio"/> R <input checked="" type="radio"/> N	* <u>TETRA</u> <input checked="" type="radio"/> S <input type="radio"/> R <input type="radio"/> I <input type="radio"/> N	* <u>TIG</u> <input checked="" type="radio"/> S <input type="radio"/> NS <input type="radio"/> N	* <u>VANC</u> <input type="radio"/> S <input checked="" type="radio"/> R <input type="radio"/> I <input type="radio"/> N

Add Drug

Pathogen 2:  Search

Pathogen 3:  Search

\* VANC  
 S  R  
 I  N

# OPTIONAL: Add Patients One at a Time



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- NHSN Home
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## Add Patient

Mandatory fields marked with \*

### Patient Information [?HELP](#)

Facility ID\*:

Patient ID\*:

Secondary ID:

Last Name:

Middle Name:

Gender\*:

Birth Weight (grams):

Ethnicity:

Race:  American Indian/Alaska Native  Asian  
 Black or African American  Native Hawaiian/Other Pacific Islander  
 White

Social Security #:

First Name:

Date of Birth\*:

# *OPTIONAL: Add Patients*

## *Import Patient Roster*

- *You can import a patient roster*
- *NHSN navigation bar: select Import/Export*
- *Must be in an ASCII comma delimited format*
  - *Download from an existing database*
- *3 required fields*
  - *Patient ID*
  - *Patient date of birth*
  - *Patient Gender*

# OPTIONAL: Add Patients

## Import Patient Roster



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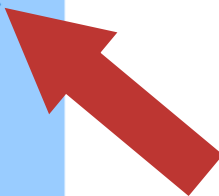
Group

Log Out

## Import/Export Data

Import/Export Type:

	▼
<b>CSV Import</b>	
Patients	
Procedures	
Surgeons	
<b>CDA Import</b>	
Events, Summary Data, Procedure Denominators	
SSI events (requires link to procedure)	
<b>Export</b>	
Export Facility Data	



*Questions?*