

BAC[teria] to Basics: NHSN MRSA Bacteremia & CDI LabID Event Reporting

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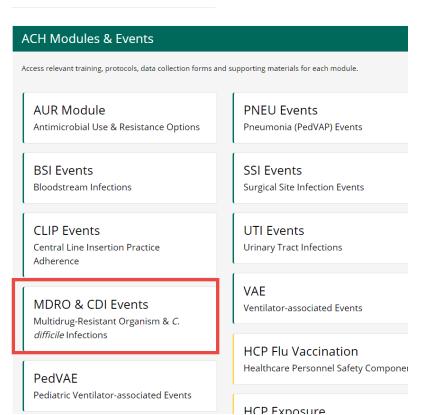
NHSN Annual Training 2022

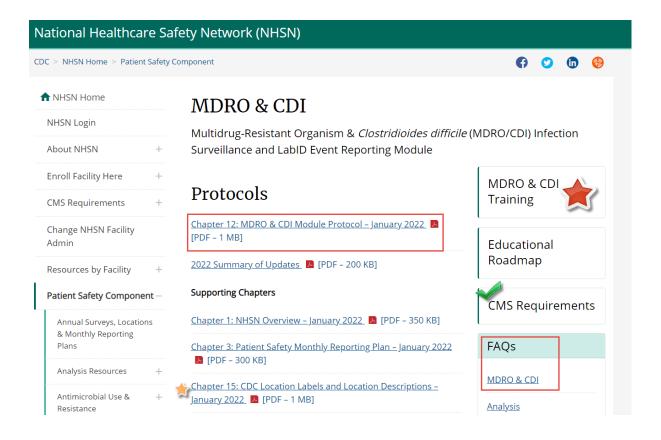
OBJECTIVES

- Understand and apply LabID event reporting concepts as outlined in the NHSN PSC MDRO Chapter 12
- Recognize MRSA bacteremia and C. difficile events using NHSN definitions to provide events for reporting
- Correctly Report LabID Events and FacWideIN summary denominator data

https://www.cdc.gov/nhsn/acute-care-hospital/index.html







Key Concepts to LabID Event Reporting:

FacWideIN LabID event reporting is based on patient and location. All inpatient units and ED/24-hour observation locations are included. The first positive specimen for the location meeting definition is submitted as a LabID event.

NHSN does NOT use patient 'status' for reporting. An 'inpatient' is a patient housed on an inpatient location. An 'outpatient' is a patient housed on an outpatient unit such as the ED or a dedicated 24-hour observation unit. Facility specific status designations such as 'observation', 'inpatient', 'outpatient', 'swing bed patient' or 'short stay patient' are not used for in NHSN reporting.

For NHSN reporting purposes, the 'date admitted to facility' is the calendar day the patient locates to an inpatient location. Time spent in the ED or on a dedicated 24-hour observation unit is outpatient hours.



LabID event reporting includes a '14-day' rule which prohibits a 'new' LabID event to be submitted for the patient in the SAME location until 15 days has passed between positive specimens. This rule is <u>location</u> specific and resets each time the patient moves to a 'new' location.

LabID Event reporting is based strictly on laboratory testing data without clinical evaluation of the patient, allowing for a much less labor intensive method to track *C. difficile* and MDROs, such as MRSA. Symptoms are <u>NOT</u> used in LabID event reporting. No clinical determination is included in LabID event reporting.

 These provide proxy infection measures of healthcare acquisition, exposure burden, and infection burden are based primarily on laboratory and limited admission data.

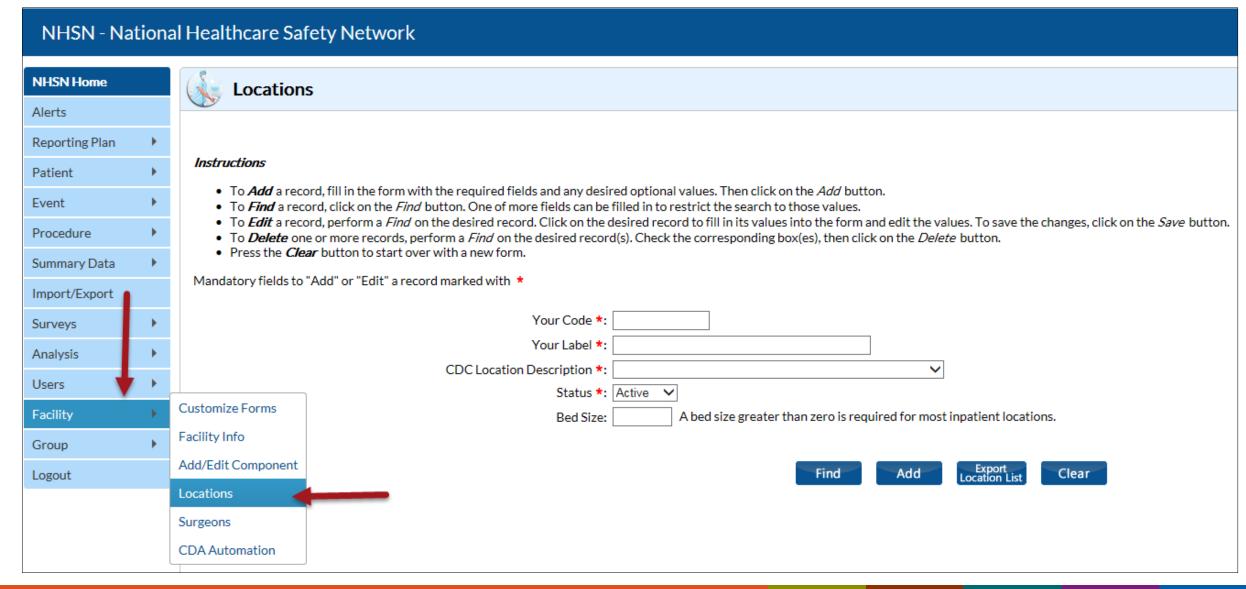


- LabID Event reporting is by single facility; prior positives identified at a different facility will not influence reporting at your facility and are not considered in event categorization.
- ***the 'Transfer Rule' does NOT apply to LabID event reporting
- LabID Events are attributable to the location where the positive specimen is collected. There is no time requirement for 'how long' the patient must be housed on the unit to be eligible for reporting.

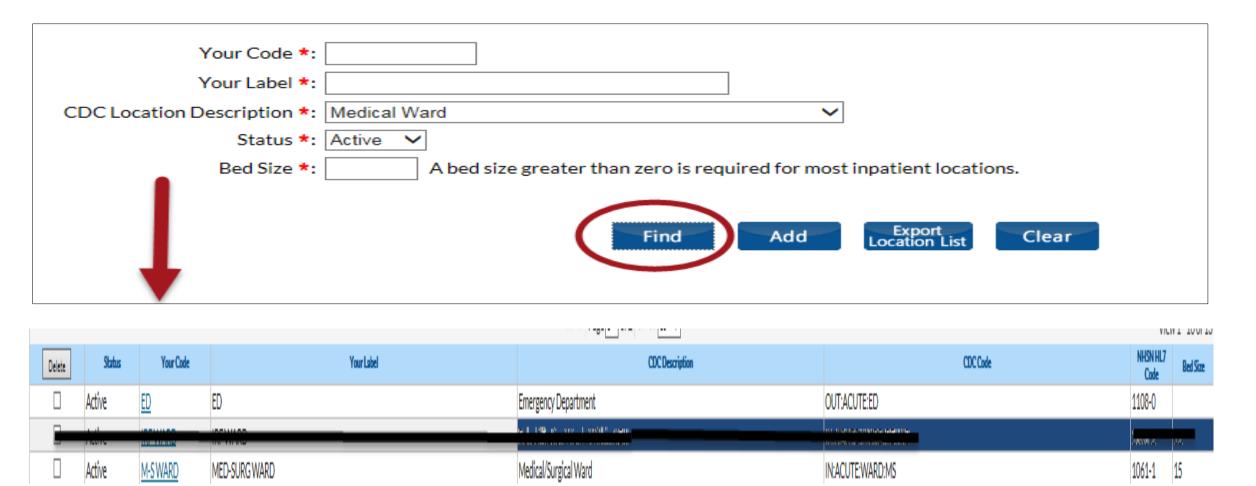
CHECKLIST: Facility-wide {FacWideIN} LabID Event Reporting

- Review location options and map locations in NHSN as necessary.
- Review Monthly Reporting Plan(s) and update as necessary.
- Identify and enter all LabID events into NHSN by location.
- Enter denominator data for each month under surveillance.
- Resolve "Alerts", if applicable.

FacWideIN requires mapping of bedded inpatient locations for the facility, all EDs and dedicated 24-hour Observation units



Find Locations:



https://www.cdc.gov/nhsn/pdfs/pscmanual/15locationsdescriptions current.pdf

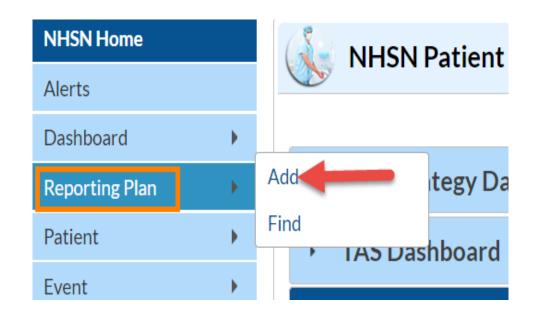
CHECKLIST: FacWideIN LabID Event Reporting

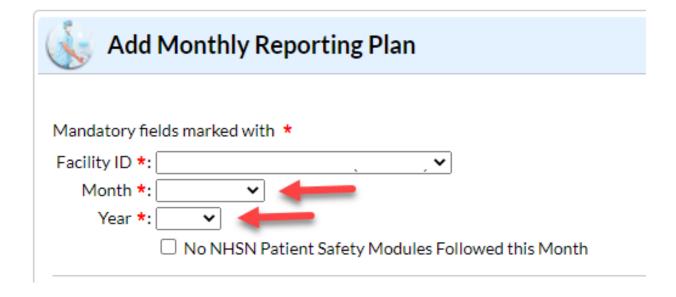
- Review location options and map locations in NHSN as necessary.
- Review Monthly Reporting Plan(s) and update as necessary.
- Identify and enter all C. difficile LabID events into NHSN by location.
- Enter denominator data for each month under surveillance.
- Resolve "Alerts", if applicable.

Monthly Reporting Plan

- The Monthly Reporting Plan informs CDC which modules a facility is participating in during a given month.
 - Referred to as "In-Plan" data
- A facility must enter a Plan for every month of the year.
- Add facility-wide inpatient reporting for MRSA Bacteremia and C. difficile LabID events to your monthly reporting plan (MRP) using the "FACWIDEIN" location.
- Emergency departments and 24-hour observation locations are included in FacWidelN reporting. NOTE** These locations will 'automatically' be added to your monthly reporting plan when you select 'FacWidelN' as long as you do NOT use the 'copy from previous month' option when selecting the monthly reporting plan.

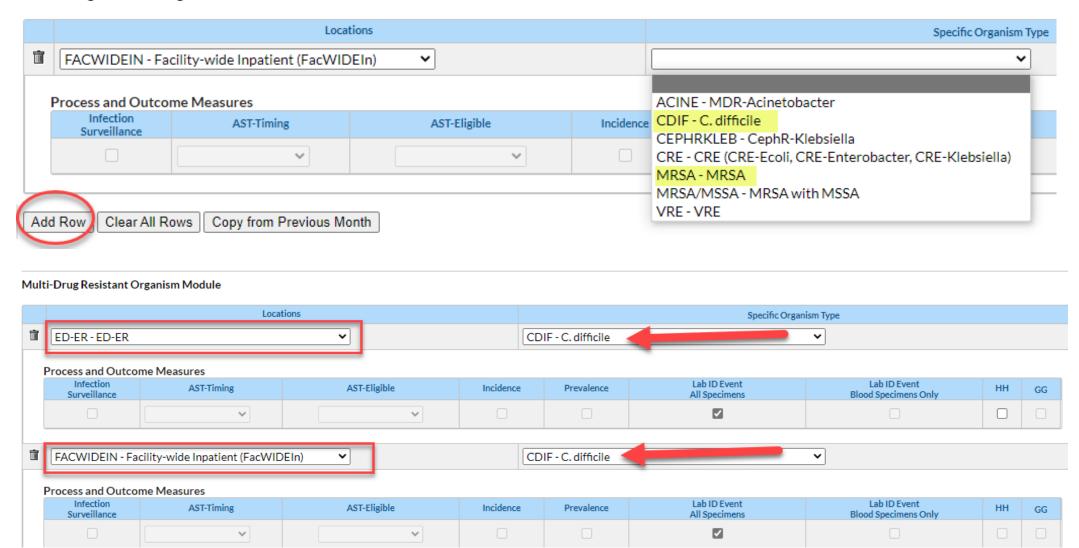
Creating a Monthly Reporting Plan





Creating a Monthly Reporting Plan

Multi-Drug Resistant Organism Module



CHECKLIST: FacWideIN LabID Event Reporting

- Review location options and map locations in NHSN as necessary.
- Review Monthly Reporting Plan(s) and update as necessary.
- Identify and enter all LabID events into NHSN by location.
- Enter denominator data for each month under surveillance.
- Resolve "Alerts", if applicable.

Protocol Standard Guidance

- Events are reported by patient AND location. Each location change for the patient resets reporting.
- The first lab positive finding for the patient in a location qualifies as a LabID event. Following this submission, no additional LabID events are submitted into NHSN for the location until there is a > 14-day gap in positive findings.
- LabID Events are attributable to the location where the positive specimen is collected.

Definition: C. difficile LabID Event

 C. Difficile-positive laboratory assay**excludes locations known to predominately house babies (NICU, Nursery, etc.)

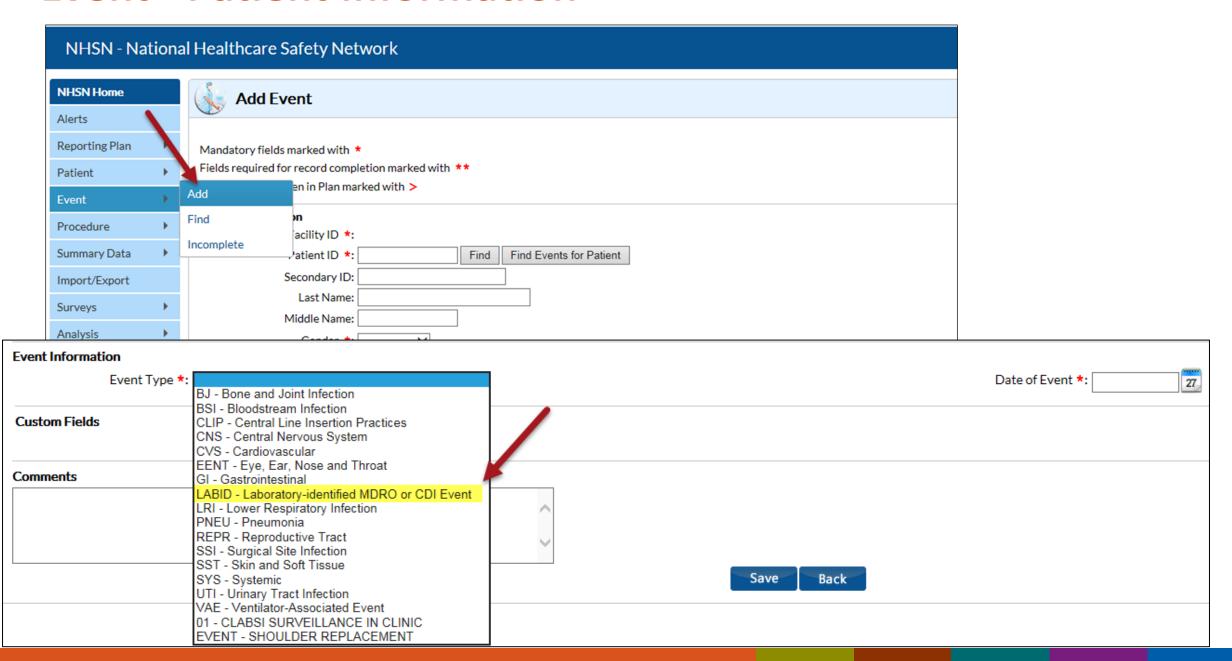
A positive laboratory test result for *C. difficile* toxin A and/or B, (includes molecular assays [PCR] and/or toxin assays) tested on an unformed stool specimen (must conform to the container).

A toxin-producing *C. difficile* organism detected by culture or other laboratory means performed on an unformed stool sample (must conform to the container).

• NOTE** When using a multi-step testing algorithm for CDI on the same unformed stool specimen, the finding of the last test performed on the specimen that is documented in the patient medical record will determine if the CDI positive laboratory assay definition is met.

C. difficile testing only on unformed stool samples!!
Stool should conform to shape of container.

Event - Patient Information



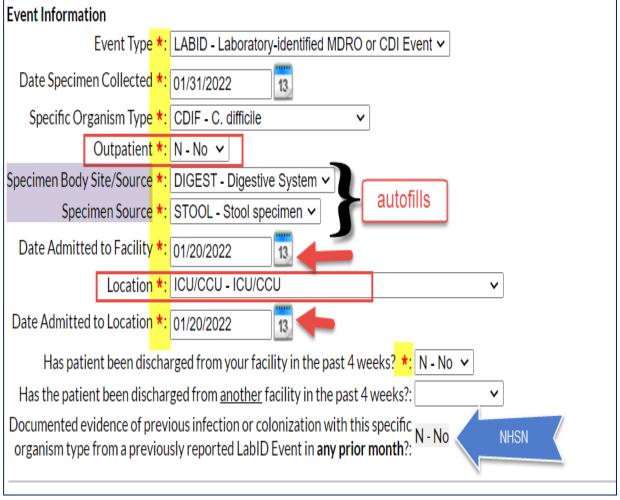
Event Information- Specimens Collected from:

Outpatient Location

Event Information Event Information Event Type *: LABID - Laboratory-identified MDRO or CDI Event LABID must be 1 Date Specimen Collected *: 01/31/2022 Specific Organism Type *: CDIF - C. difficile Specific Organism Type *: CDIF - C. difficile Outpatient *: Y - Yes > Outpatient *: N - No V autofills Specimen Body Site/Source *: DIGEST - Digestive System > Specimen Source *: STOOL - Stool specimen > Specimen Source *: STOOL - Stool specimen > Location *: EDEPT - EMERGENCY Date Admitted to Facility *: 01/20/2022 Last physical overnight location of patient immediately prior to arriving into facility (applies to specimen(s) collected in outpatient Location *: ICU/CCU - ICU/CCU

Date Specimen Collected *: 02/01/2022 Specimen Body Site/Source *: DIGEST - Digestive System > setting or <4 days after inpatient admission): Has patient been discharged from your facility in the past 4 weeks? *: N - No V bracket Has the patient been discharged from $rac{a}{1}$ another facility in the past 4 howeeks?: Documented evidence of previous infection or colonization with this NHSN organism type from a previously reported LabID Event in any prior month?:

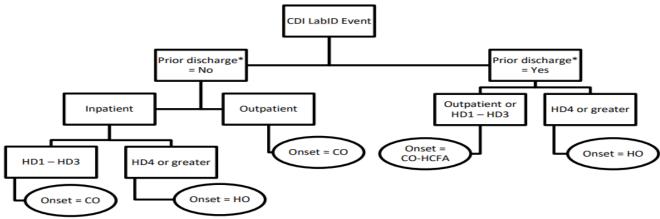
Inpatient Location



NHSN will Categorize *C. difficile* LabID Events Based on Location & Specimen Collection Date:

- Community-Onset (CO): LabID Event meeting one of the following criteria:
- A) collected in an outpatient location in which the patient was not previously discharged from an inpatient location within the same facility less than or equal to 28 days prior to current date of specimen collection B) collected in an inpatient location on HD 1 [day of admission], HD 2 or HD 3.
- Community-Onset Healthcare Facility-Associated (CO-HCFA): CO LabID Event collected from an inpatient or an outpatient location from a patient who was discharged from the facility less than or equal to 28 days prior to current date of stool specimen collection. The previous discharge must have been from an inpatient location within the same facility (in other words, an outpatient visit does not qualify as "admitted", and therefore is not used to set the timeline for CO-HCFA).

• Healthcare Facility-Onset (HO): LabID Event collected from an inpatient location on or after HD 4 where HD 1 is day of admission.



^{*} Patient discharged from inpatient location within the same facility less than or equal to 28 days prior current event

NHSN will Categorize *C. difficile* LabID Events Based on Location & Specimen Collection Date:

CDI LabID Events are further categorized by NHSN as **Incident** or **Recurrent**. Refer to the 'cdiAssay' variable in the NHSN Line List.

- Incident CDI LabID Event: Any CDI LabID Event from a specimen obtained more than 56 days after the most recent CDI LabID Event (or with no previous CDI LabID Event documented) for that patient. Note: the date of first specimen collection is considered day 1.
- Recurrent CDI LabID Event: Any CDI LabID Event from a specimen obtained more than 14 days and less than or equal to 56 days after the most recent CDI LabID Event for that patient. Note: the date of first specimen collection is considered day 1.
- CdiAssay will be unassigned, or "blank", for any CDI LabID event collected less than or equal to 14 days after the most recent CDI LabID event for that patient.

Let's Review C. difficile LabID Event Reporting

- For FacWideIN, C. difficile toxin-positive specimens MUST be monitored for all inpatient locations within a facility (includes ED and 24-hour OBS locations) but not for predominately baby locations {Nursery, NICU, etal}.
- All LabID Event(s) MUST be entered without regard to date of occurrence.
 Community-Onset (CO) or Healthcare facility-onset (HO).
- Only unformed stools should be tested for C. difficile. Internal 'rejection' policies should be used to ensure appropriate testing.
- A positive CD finding from unformed stool specimen qualifies as a LabID Event if there has not been a previous positive laboratory result for the patient in the location within the previous 14 days.

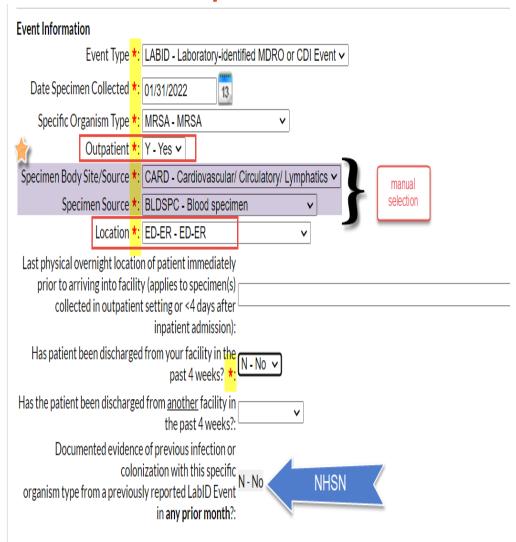
Definition: MRSA bacteremia LabID Event

MRSA identified from blood culture:

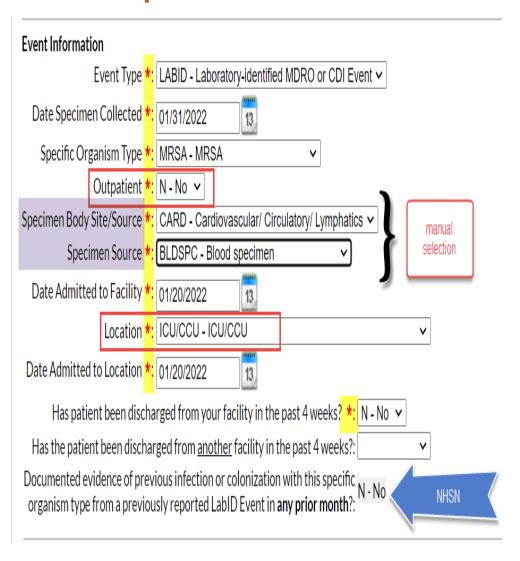
- Includes S. aureus cultured from a blood culture specimen that tests oxacillinresistant, cefoxitin resistant, or methicillin-resistant by standard susceptibility testing methods, <u>OR</u>
- Any lab finding where MRSA is specifically identified (includes but not limited to PCR or other molecular based detection methods).
- NOTE** Applies to ALL inpatient locations [including locations known to predominately house babies] and Emergency Departments and 24-hour Observation locations.

Event Information- Specimens Collected from:

Outpatient Location

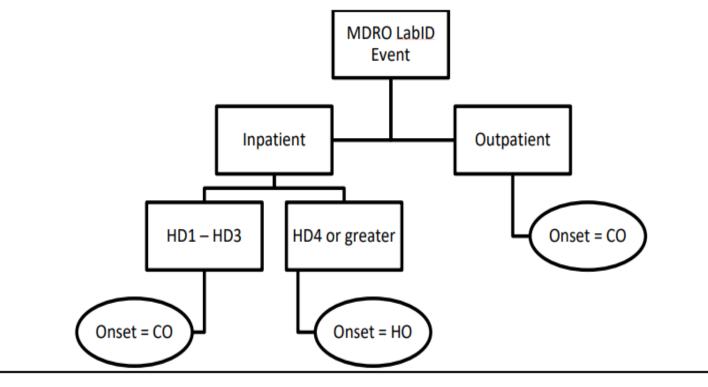


Inpatient Location



NHSN will Categorize MRSA bacteremia LabID Events Based on Location & Specimen Collection Dates

- <u>Community-Onset (CO)</u>: LabID Event specimen collected in an outpatient location or an inpatient location on Hospital Day 1 [day of admission], HD 2 or HD 3.
- Healthcare Facility-Onset (HO): LabID Event specimen collected on or after Hospital Day 4 where
 HD 1 is day of admission. Thus, all HO LabID Events will have occurred more than 3 calendar days after admission.



Hospital Day (HD)

Let's Review MRSA bacteremia LabID Event Reporting

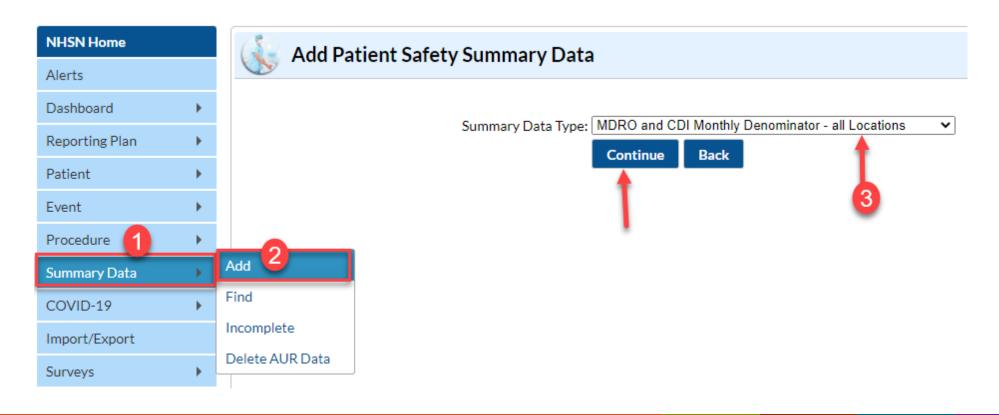
- For FacWideIN, MRSA + blood cultures are monitored for all inpatient locations within a facility, including ED and 24-hour OBS locations as well as predominately baby locations {Nursery, NICU, etal.}.
- All LabID Event(s) MUST be entered without regard to date of occurrence.
 Community-Onset (CO) or Healthcare facility-onset (HO).
- The first MRSA+ BC for the patient and the location qualifies as a LabID event. No additional MRSA LabID events are submitted for the patient in the location until there has been > 14 days from prior MRSA+ BC. This is a 'rolling' 14-day timeframe not specifically based on a previously submitted MRSA LabID event(s).
- Each location change resets reporting.

CHECKLIST:FacWidelN LabID Event Reporting

- Review location options and map locations within NHSN as necessary.
- Review Monthly Reporting Plan(s) and update as necessary.
- ✓ Identify and enter all LabID events into NHSN by location.
- Enter denominator data for each month under surveillance.
- Resolve "Alerts", if applicable.

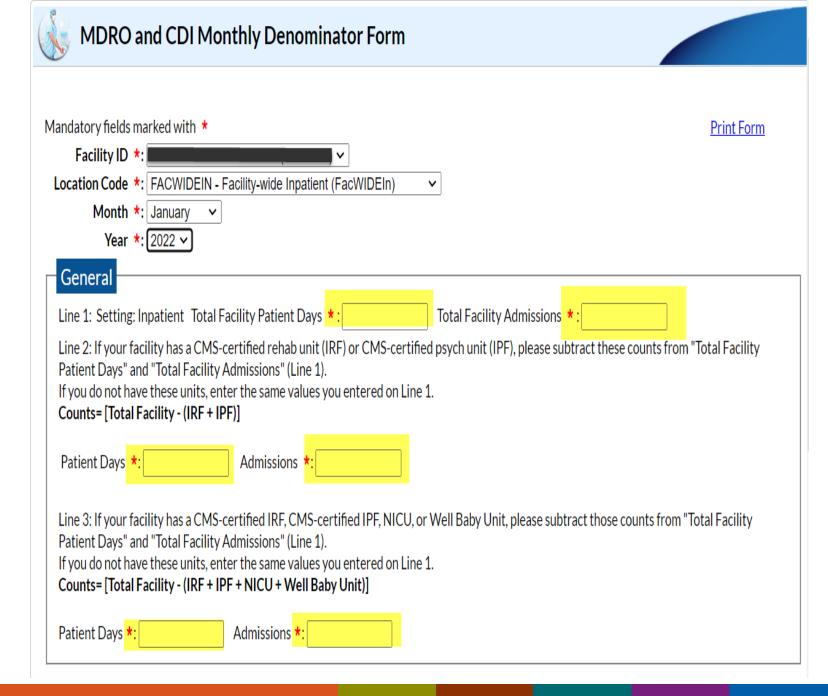
Entering Denominator Data in NHSN Application

- Click on 'Summary Data' and then 'Add' on the left-hand navigation bar.
- Select 'MDRO and CDI Monthly Denominator –All Locations' from the Summary Data Type dropdown menu (see screenshot). This is a different form than the one you use to report summary data for CLABSI and CAUTI.



Denominator Data: FacWidelN

• On the summary data entry screen, select FACWIDEIN as the location for which you are entering the summary data. After selecting the FACWIDEIN location, month, and year, six summary data fields will become required.



Denominator Data

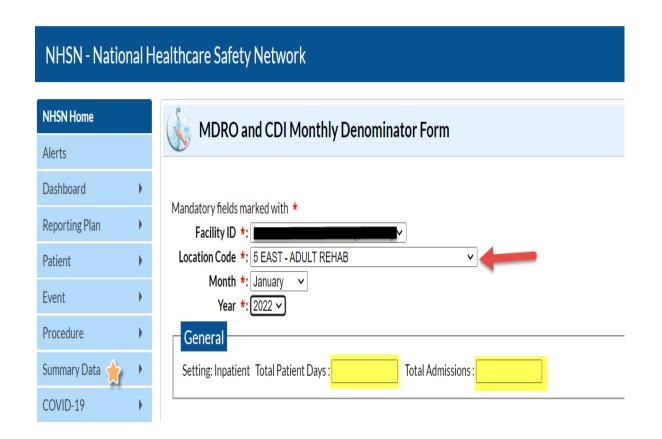
- Select CDI Test type quarterly (last month of each calendar-year quarter – March; June; September; December)
- OTHER -. 'Other' should not be used to name specific laboratories, reference laboratories, or the brand names of *C. difficile* tests; most methods can be categorized accurately by selecting from the options provided

your facility's testing is performed? Note: PCR testing should be indicated by selecting NAAT * EIA - Enzyme immunoassay (EIA) for toxin Cyto - Cell cytotoxicity neutralization assay NAAT - Nucleic acid amplification test (NAAT) NAATEIA - NAAT plus EIA, if NAAT positive (2-step algorithm) Speci GDH - Glutamate dehydrogenase (GDH) antigen plus EIA for toxin GDHNAAT - GDH plus NAAT Infer GDHEIA - GDH plus EIA for toxin, followed by NAAT for discrepant results ToxiCul - Toxigenic culture OTH - Other (specify) (All specimens) LabID Event

For this quarter, what is the primary testing method for C. difficile used most often by your facility's laboratory or the outside laboratory where

Denominator Data: Inpatient Rehab or Inpatient Psych units

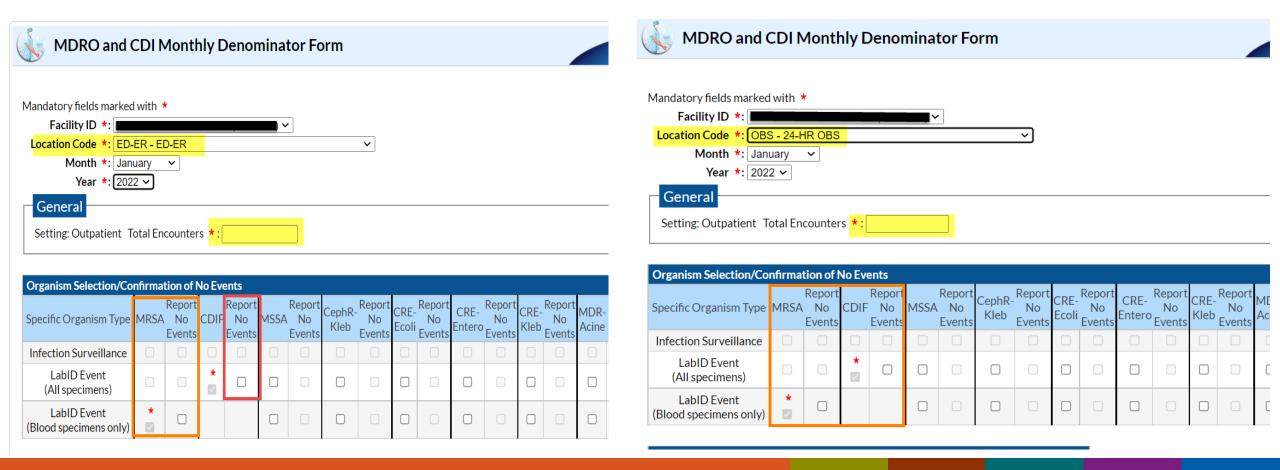
- On the summary data entry screen, use the 'Location Code" drop down menu to select the Rehab
 or Psych unit included as separate row on your monthly reporting plan {in addition to FacWideIN}.
- After selecting the appropriate unit, month, and year, complete <u>2</u> required fields





Denominator Data: Emergency Department / 24-hour observation

- On the summary data entry screen, use the 'Location Code" drop down menu to select ED or 24-hour observation as the location for which you are entering the summary data.
- After selecting the appropriate unit, month, and year, one summary data field will become required (Total Encounters). Repeat steps for 24-hour observation locations. 1 visit = 1 encounter

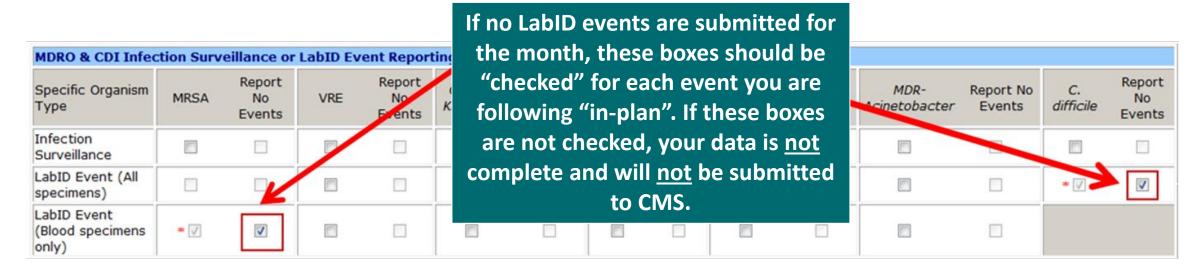


CHECKLIST: FacWidelN LabID Event Reporting

- Review location options and map locations in NHSN as necessary.
- Review Monthly Reporting Plan(s) and update as necessary.
- ✓ Identify and enter all C. difficile LabID events into NHSN by location.
- Enter denominator data for each month under surveillance.
- Resolve "Alerts", if applicable.

Denominator Data: Report No Events

- If you have reported any LabID events during the month, you are **finished** with your reporting for the month and can skip this step.
- If you have no LabID events for the specific month of reporting, you must indicate this on the summary data record to complete your reporting efforts.
- On the MDRO and CDI Module summary data form, checkboxes for "Report No Events" are found underneath the patient day and admission count fields, as seen in the screenshot below.

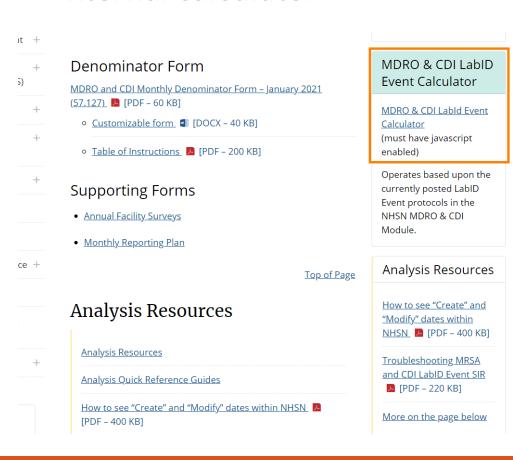


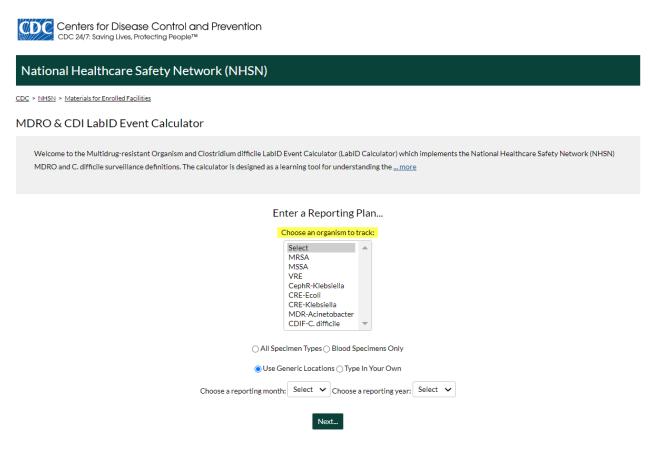
If you identify and enter LabID events for an organism after you've already checked the "Report No Events" box, the "Report No Events" check will automatically be removed in the NHSN database.

LabID Event Calculator:

https://www.cdc.gov/nhsn/labid-calculator/index.html

- Available for use with C. difficile and MRSA LabID Event reporting
- Aids in decision making around the 14-day rule
- External calculator







Links to Analysis:

- SIR Guide, to learn more about the SIR & how it's calculated [updated 2/21]: https://www.cdc.gov/nhsn/pdfs/ps-analysis-resources/nhsn-sir-guide.pdf
- Introduction to NHSN Analysis: https://www.cdc.gov/nhsn/pdfs/training/2019/intro-nhsn-analysis-508.pdf.
- Analyzing LabID Event Data in NHSN:
 https://www.cdc.gov/nhsn/pdfs/training/2020/labid-update-508.pdf

Checkpoint – learning assessment:

- 65yo patient undergoing treatment for lymphoma presents to the ED from home unresponsive with significant low BP. Fluid resuscitation initiated with blood cultures/labs collected. After stabilization, the patient is admitted to ICU on 2/1 The patient's standard chemotherapy infusion is conducted on 2/3 and TPN/lipids are started. Later this day, blood cultures are collected after temp spike. The 2/1 and 2/3 blood cultures result as MRSA+ on 2/4. Diarrhea is noted first on 2/4 continuing 2/5 and 2/6. An unformed stool specimen is collected 2/6, testing positive for *C. difficile*. The patient has a sudden cardiac arrest and expires 2/7.
- If you're monitoring FacWideIN MRSA bacteremia and C. difficile LabID events, are there events for reporting and if so, how many?

Answers to learning exercise

- LabID events:
- (1) 2/1 MRSA LabID event for ED
- (2) 2/3 MRSA LabID event for ICU
- (3) 2/6 CD LabID event for ICU

BONUS: How are these events categorized?

- 2/1 ED event is CO as it occurs in an outpatient location
- 2/3 event is CO as the event occurs on HD 3 [day of admit HD 2/1, +2/3]
- 2/6 event is HO as the event occurs on HD 6

Questions ??? contact the NHSN Helpdesk at nhsn@cdc.gov



The material provided is based on NHSN Patient Safety Component protocols and do not necessarily represent the official position of the Centers for Disease Control and Prevention