

**New Hampshire Department of Health and Human Services
Division of Public Health Services
Healthcare-Associated Infections Hospital Reporting Requirements 2021**

Who is required to report:

Any hospital licensed pursuant to RSA 151:33 (this includes acute care, critical access, psychiatric, and rehabilitation hospitals).

What must be reported:

Central Line-associated Blood Stream Infections (CLABSI)

1. Monitor CLABSI all 12 calendar months using NHSN protocols and definitions and report in NHSN
2. Monitor CLABSI in all adult, pediatric, and neonatal intensive care units

Catheter-Associated Urinary Tract Infections (CAUTI)

1. Monitor CAUTI all 12 calendar months using NHSN protocols and definitions and report in NHSN
2. Monitor CAUTI in all adult and pediatric intensive care units (excludes neonatal intensive care units)

Surgical Site Infections (SSI)

1. Monitor surgical patients in any inpatient/outpatient setting where the selected NHSN Operative Procedure(s) are performed using NHSN protocols and definitions
2. The NHSN Operative Procedures that must be monitored are:
 - a. Abdominal hysterectomy (abdominal approach with uterine removal)
 - b. Coronary Artery Bypass Graft (chest incision and donor site)
 - c. Colon Surgery (incision, resection, or anastomosis of the large intestine)
 - d. Knee Arthroplasty
3. ICD-10 and CPT code mapping is available under *operative procedure code documents* on NHSN website located here: <http://www.cdc.gov/nhsn/acute-care-hospital/ssi/index.html>.
4. Monitor for SSI all 12 calendar months and report in NHSN

Influenza Vaccination Rates

1. Data for vaccine administered during the previous influenza season must be reported by April 30th.
2. Data will be collected through NHSN and online survey. Website and instructions will be provided each year prior to the survey deadline.
3. Submission of this data will meet the requirements of both the HAI law (RSA 151:32-35) and the healthcare immunization law (RSA 151:9-b)

Clostridioides difficile

1. All hospitals shall provide to the department *Clostridioides difficile* infection (CDI) LabID event data, if available.

Antibiotic Usage Data

1. Antimicrobial use data, if available.
2. This data shall include the AUR module in NHSN data for the previous 12 months.
3. Data will be collected through NHSN AUR module to perform benchmarking, to help reduce antimicrobial resistant infections through antimicrobial stewardship.

NHSN definitions and protocols are available at:

https://www.cdc.gov/nhsn/pdfs/pscmanual/pcsmanual_current.pdf

CMS definitions and protocols are available at:

<http://qualitynet.org/dcs/ContentServer?cid=1141662756099&pagename=QnetPublic%2FPage%2FQnetTier2&c=Page>