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CENTERS FOR DISEASE CONTROL AND PREVENTION  
**NHSN E-Newsletter**



# Patient Safety Component

## New CMS Required Reporting: AUR Module Submission Required for the CMS Promoting Interoperability Program

In the fall of 2022, CMS published a final rule that moved the AUR Module reporting to a required measure under the Public Health and Clinical Data Exchange objective for calendar year 2024. Facilities participating in the CMS Promoting Interoperability Program must attest to being in active engagement with NHSN to submit AUR data or claim a valid exclusion.

Facilities can be in active engagement in two ways:

### **Option 1 – Pre-production and Validation**

Facilities first have to register intent to submit AUR data within NHSN. Per the CMS measure specifications, the registration should be completed within 60 days after the start of the EHR reporting period. **Facilities can complete the registration of intent within NHSN when your AUR software is set up to produce test and/or production AU and AR files.** The registered facility will then receive an automated email from NHSN inviting the facility to begin the Testing and Validation step. Following the instructions in the email, facilities must submit 1 test file for each file type (AU summary, AR event, and AR summary) for validation by the NHSN AUR Team. Per the CMS measure specifications, facilities should respond to the request for test files within 30 days following the request for test files. **Failure to respond twice within an EHR reporting period would result in that eligible facility not meeting the measure.**

Note: Beginning in CY 2024, facilities can only spend one calendar year in Option 1 – Pre-production and Validation.

### **Option 2 – Validated Data Production**

CMS defines production data as data generated through clinical processes involving patient care, and it is used to distinguish between data and “test data” which is submitted for the purpose of testing and validation. **For CY 2024, facilities must submit 180 continuous days of AUR data.** Keep in mind that you must report the same 180 days of AU and AR data as they are considered a single measure for the CMS PI Program. Additionally, those 180 days are supposed to be the same for all CMS PI Program measures for your facility.

Note: Facilities wishing to receive bonus points for the **CY 2023** CMS PI Program under the Public Health Registry measure within the Public Health and Clinical Data Exchange Objective must submit 90 continuous days of AUR data. Both AU and AR data must be submitted for the same 90 days as all CMS PI Program measures for your facility. We have an [instructional document](#) containing the steps for registering intent to submit AUR Module data and generating ad hoc status reports.

Be on the lookout for additional materials being posted on the NHSN website in the coming months.

## The 2022 NHSN Rebaseline: Charting the Course

The NHSN Team is preparing to update the national baseline data used to calculate all healthcare-associated infection (HAI) standardized infection ratios (SIRs) and standardized utilization ratios (SURs) in the Patient Safety Component. This process of updating the national baseline is referred to as the “Rebaseline.”

Currently, the number of predicted HAIs or device days (the denominators of the SIR and SUR) are calculated using 2015 baseline data and associated risk models. The Rebaseline process will begin this summer, with the NHSN Statistics and Analytics Teams analyzing national data from **2022** to create over 250 updated risk models; these updated risk models will then be used for new calculations of the SIR and SUR denominators.

New SIR and SUR reports, based on the 2022 national baseline and risk models, will be created in the NHSN application in a phased approach. Our goal is to complete the implementation of the 2022 national baseline and risk models for all HAIs, devices, and facility types [acute care hospitals, critical access hospitals, inpatient rehabilitation facilities (IRFs), and long-term acute care hospitals (LTACHs)] by the end of 2024.

Multiple opportunities for education and communication around the 2022 Rebaseline and its implications will be available to the NHSN community later this year. You can find additional information regarding the 2022 Rebaseline on our website <https://www.cdc.gov/nhsn/2022rebaseline/index.html> including a list of FAQs <https://www.cdc.gov/nhsn/pdfs/rebaseline/22-Rebaseline-FAQs-Final-Version.pdf>.

Questions can be submitted to [NHSN@cdc.gov](mailto:NHSN@cdc.gov), with subject line 2022 HAI Rebaseline.

Note: All current SIRs and SURs available in NHSN, under the existing 2015 national baseline, will remain available in NHSN for use.

## External Research Study for Acute Care Hospitals - Prevention of Infections Through Appropriate Staffing (PITAS)

**The below announcement is from researchers who are affiliated with the Thomas Jefferson and Rutgers Universities and are not directly associated with NHSN. If your facility is interested in participating, please contact the study team directly at [PITAS-Study@Jefferson.edu](mailto:PITAS-Study@Jefferson.edu).**

Dear NHSN Members:

In July, acute care hospitals will receive an electronic invitation to participate in an important, national survey entitled, **“Prevention of Infections Through Appropriate Staffing (PITAS).”** This timely study is funded by the Agency for Healthcare Research and Quality to improve patient safety in acute care hospitals.

Infection Prevention and Control (IPC) departments play a critical role in reducing HAI and this survey aims to understand how IPC staffing and IPC processes were impacted by the COVID-19 pandemic. Another important aim of this study is to update recommendations for infection prevention staffing and resources in acute care hospitals.

To do this, we need help from acute care hospitals! We hope that you will take the time to participate in the study and help shape the future of IPC across the United States.

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If you would like more information about the PITAS Study or have any questions, please contact our study team at [PITAS-Study@Jefferson.edu](mailto:PITAS-Study@Jefferson.edu).

Thank you in advance for your time,

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## Patient Safety Protocol Updates

### 2023 NHSN Organism List (All Organisms, Common Commensals, MBI Organisms, and UTI Bacteria)

The 2023 NHSN Organism List is now available! It is an important resource for NHSN reporting. Please utilize the new 2023 NHSN Organism List (All Organisms, Common Commensals, MBI Organisms, and UTI Bacteria) for all organisms identified January 1, 2023, through December 31, 2023. This list has undergone approximately 140 changes compared to the previous year's version.

The 2023 NHSN Organism List still includes the "**Combined**" tab with the helpful column labeled "*NHSN Organism Category*". The "*NHSN Organism Category*" column denotes how the organism is categorized for NHSN reporting. The legend for this column is listed below.

- **ALL** - Full list of organisms available within the NHSN application
- **CC** - Organisms categorized as Common Commensals
- **MBI** - Organisms categorized for Mucosal Barrier Injury
- **UTI** - Organisms categorized for Urinary Tract Infection

To ensure you have the latest version, please bookmark the [direct link](#) to the NHSN Organism List instead of downloading a copy.

Corrected 2023 ICD-10-PCS Procedure Code Mapping Document

Users have reported discrepancies in 2023 ICD-10-PCS Procedure Code Mapping Document. These discrepancies have been corrected and an updated document has been posted: <https://www.cdc.gov/nhsn/xls/icd10-pcs-pcm-nhsn-opc.xlsx>.

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## What's in a Name: A Closer Look at the Central Line Definition

Recently, NHSN has received several inquiries related to the central line definition, and the designation of a specific line type (specifically, midlines) as a central line.

- NHSN has not removed any devices from the list of “Devices **Not** Considered Central Lines for NHSN Reporting Purposes” (see BSI Protocol page 4-6).
- Additionally, it is important to remember neither the **type of device nor the insertion site** is used to determine if a device is considered a central line for NHSN reporting purposes.

NHSN uses the **termination location of the catheter tip and the use of the catheter** to determine if the central line definition is met. For NHSN reporting if,

- 1) a catheter terminates at the heart, close to the heart OR in one of the great vessels

**AND**

- 2) is used for infusion, blood withdrawal or hemodynamic monitoring, it meets the requirements as a central line.

Keep in mind **both** elements of NHSN's central line definition are required. If both requirements are not met, the device is not a central line.

## Presentations at APIC's 2023 Annual Conference

There will be several NHSN as well as other CDC presentations at the Association for Professionals in Infection Control and Epidemiology (APIC) 2023 Annual Conference & Exposition.

The conference is June 26-28 in Orlando, FL. Be sure to catch one or more of the presentations!

Date	Time	Presentation Title*
6/26/2023	1:30 - 2:30 PM	Top Outbreaks of 2021-2022: CDC HAI Outbreak Responses
6/26/2023	4:30 - 5:30 PM	Keeping Healthcare Linens Clean
6/26/2023	4:30 - 5:30 PM	Enhanced Barrier Precautions
<b>6/26/2023</b>	<b>1:30 - 2:30 PM</b>	<b>Sometimes 2nd Place Is Best: Determining Secondary Bloodstream Infection Attribution</b>
<b>6/26/2023</b>	<b>1:30 - 2:30 PM</b>	<b>An Exploration of HAI Incidence</b>
6/27/2023	10:15 - 11:15 AM	What You Need to Know About Hemodialysis Water
6/27/2023	10:15 - 11:15 AM	CDC's Vessel Sanitation Program: Navigating Public Health Aboard Cruise Ships
<b>6/27/2023</b>	<b>10:15 - 11:15 AM</b>	<b>Improving the Reporting of Vaccination Coverage</b>
<b>6/27/2023</b>	<b>2:30 - 3:30 PM</b>	<b>What's in Your Soup?" The ABCs of Device-associated and BSI Surveillance</b>
<b>6/27/2023</b>	<b>4:00 - 6:00 PM</b>	<b>To Be or Not to Be an SSI, That Is the Question</b>
6/28/2023	2:15 - 3:15 PM	Success Stories of MDRO/ <i>C. auris</i> Containment and Prevention
6/28/2023	3:30 - 4:30 PM	Practical Experience Implementing HAI Surveillance Systems in Low- and Middle-Income Countries - India
6/28/2023	3:30 - 4:30 PM	Core Components of Cleaning and Disinfection in Hospitals
<b>6/28/2023</b>	<b>1:00 - 2:00 PM</b>	<b>The Future Is Here! NHSN on FHIR: Modernizing HAI Surveillance</b>
<b>6/28/2023</b>	<b>2:15 - 3:15 PM</b>	<b>What's on the Horizon for NHSN?</b>
<b>6/28/2023</b>	<b>2:15 - 3:15 PM</b>	<b>The National Healthcare Safety Network (NHSN) for Respiratory Tract Infections (RTI) in Nursing Homes</b>

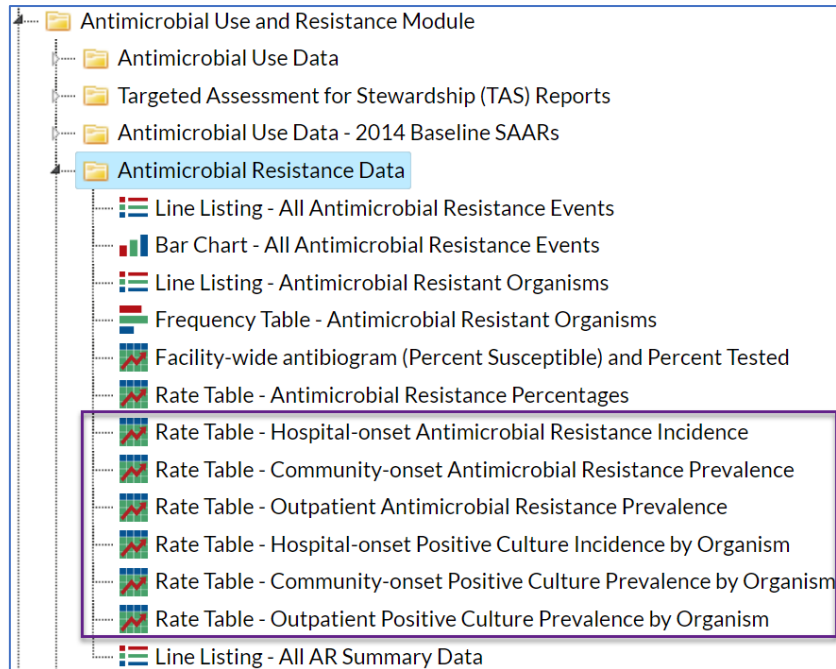
\*NHSN presentations in **bold**.

## AUR Module Updates

### Updates to the NHSN Application

#### New! AR Option Incidence and Prevalence Reports

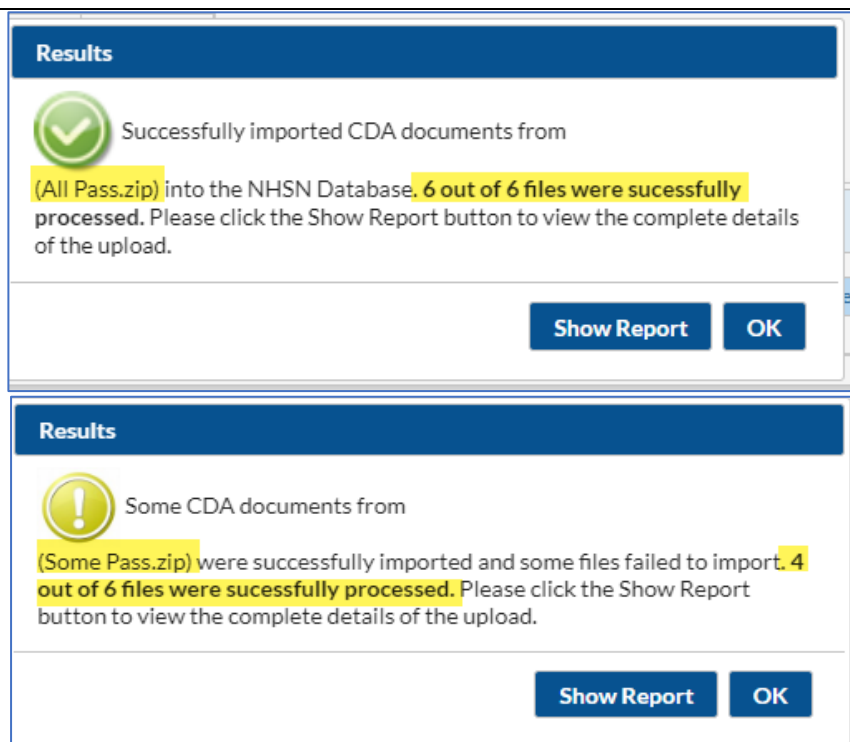
The NHSN AUR Team recently rolled out six new rate table reports, the AR Option Incidence and Prevalence Reports. These reports are available for facilities submitting AR event and AR summary data into NHSN. After generating new data sets within NHSN, you can find the new reports by navigating to Analysis then clicking Reports. On the Analysis Reports page, click on the Antimicrobial Use and Resistance Module folder, then the Antimicrobial Resistance Data sub-folder to see the six new reports.



Quick Reference Guides (QRGs) for each of the six AR Option Incidence and Prevalence Reports are available for users on the [NHSN website](#). Please review these QRGs for instructions on how to modify, run, and interpret the new reports.

#### Updated message during CDA import

The AUR team has updated the pop up for CDA upload to make the upload results more clear, prompting users to click the “Show Report” button and ultimately help users have a better understanding of the CDA data upload process. When all files are uploaded successfully, a green check mark will appear and display the number of files that passed (e.g., 6 out of 6 files were successfully processed). When some of the files are uploaded successfully a yellow exclamation point will appear and display the number of files that passed out of total submitted (e.g., 4 out of 6 files were successfully processed.)



### Resolution for Remaining Issues with the NHSN AU Option SAAR Reports

As mentioned in a previous newsletter, two issues with the NHSN AU Option SAAR reports were resolved as of February 4, 2023, but additional issues still remained. The remaining SAAR report issues have now all been resolved.

**Issue:** NHSN was incorrectly suppressing the predicted and the adult and pediatric All Antibacterial SAARs when the total antimicrobial days was greater than days present but none of the antimicrobial days for the contributing SAAR types was greater than days present. For the neonatal SAAR reports, NHSN was not suppressing the predicted and SAAR when antimicrobial days was greater than days present. In addition, for the neonatal SAAR reports, if antimicrobial days = 0, days present > antimicrobial days, and the predicted < 1 then NHSN was incorrectly displaying the predicted as 0.000 or null. These issues occurred for both facility and group users.

**Resolution:** Fixes for these issues were included in the NHSN release 11.4.0 that occurred on Saturday, June 10, 2023.

**Action:** Users should generate new data sets and re-run the “SAAR Report – All Adult and Ped SAARs (2017 Baseline)” and “SAAR Report – All Adult and Ped SAARs by Location (2017 Baseline)” to view the SAAR data for certain months that were previously suppressed and/or run the “SAAR Report – All Neonatal SAARs (2018 Baseline)” and “SAAR Report – All Neonatal SAARs by Location (2018 Baseline)” to view the corrected data.

### AU data quality line list updated with two new tables

During the latest NHSN release, the AUR Team updated the [Line Listing – Antimicrobial Use Data to Review](#) report to allow users to review two additional potential data quality concerns. The analysis report now provides facilities the opportunity to review AU data containing six potential data quality issues:

- Zero or missing antimicrobial days
- Antimicrobial days reported with zero days present
- Antimicrobial days greater than or equal to days present
- Sum of routes of administration less than total antimicrobial days
- **NEW! Antimicrobial day counts for facility-wide inpatient (FacWideIN) greater than the sum of antimicrobial days for all inpatient locations**
- **NEW! Days present counts for FacWideIN greater than the sum of days present for all inpatient locations**



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## Updates to User Documentation

### Keys to Success with TAS

The AUR Team posted a new resource for users: [Keys to Success with Targeted Assessment for Stewardship \(TAS\)](#). Similar to the [Keys to Success with the SAAR](#), Keys to Success with TAS is a short guide for users looking for help setting up, analyzing, and troubleshooting their TAS reports and dashboards. Choosing how to view your TAS data with so many options may seem overwhelming, so the Keys to Success with TAS also includes a flow chart and questions to help you choose which report/dashboard is right for your needs. For more in depth information on TAS, users can read the [TAS Guide](#).

### Updated SAAR Guide

The [SAAR Guide](#) was updated with the following items:

- General updates for 2023
- Information on the Targeted Assessment for Antimicrobial Stewardship (TAS) Reports and Dashboards
- 2018 baseline Neonatal SAAR model details

## Upcoming AUR Data Quality Outreach

### AR Outreach

The AUR Team reviewed all AR Option data submitted for 2022 and 2023 and identified some discrepancies that require facility outreach and investigation. If your facility reported AR Option data fitting any of the criteria below, we plan to reach out to you to validate the AR data you submitted:

- Zero patient days
- Numerator data but no denominator data (AR event data but no AR summary data)
- Denominator data but no numerator data (AR summary data but no AR event data)
- Admissions greater than patient days
- Patient days greater than: (number of beds X 31) + admissions

Please be on the lookout for AR DQ emails in the next few weeks.

### AU Outreach

The AUR Team will be performing data quality outreach in preparation for the 2022 Antimicrobial Use (AU) Option Data Report ([Antimicrobial Use and Resistance \(AUR\) Module Reports | NHSN | CDC](#)) in June and July. We aim to include AU Option data from as many facilities as possible in the summary measures for the report, but sometimes potential data quality issues cause facilities to be excluded from the report. Addressing issues and/or confirming data in a timely manner allows your facility to be included in the 2022 AU Data Report. Please be on the lookout for AU DQ emails in the next few months.

## AUR Related Sessions at the 2023 Council of State and Territorial Epidemiologists (CSTE) Annual Conference

The NHSN AUR Team will be presenting at this year's CSTE Annual Conference held in Salt Lake City, Utah from June 25-29. We hope to see you there! The following three AUR abstracts have been accepted:

- Identifying intervention opportunities using the National Healthcare Safety Network Targeted Assessment for Antimicrobial Stewardship Group Function (Roundtable Session: Wednesday, June 28, 7:30 – 8:15 AM)
- Use of antivirals for COVID-19 in acute care hospitals reporting to the National Healthcare Safety Network Antimicrobial Use Option
- Selective and Cascade Reporting of Antimicrobial Susceptibility Results - a Survey Among Facilities Submitting Data to the National Healthcare Safety Network Antimicrobial Resistance Option



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## Antimicrobial Resistance Synthetic Data Set (AR SDS)

The AR SDS validation process is well underway with [vendors already successfully validating](#) their software. As a reminder, your vendor (or the software system that creates the AR Event and AR Summary files for you) must complete the AR SDS validation process prior to you being able to upload AR Option data for May 2023. Specifically, AR Event and AR Summary files for May 1, 2023, and forward that do not contain credentials for a validated vendor software solution will fail to upload into NHSN. If your vendor is not on the list of vendors that have passed AR SDS, we encourage you to reach out to them to determine their timeline.

# NHSN Education and Training

## NHSN Education Resource Highlight: NHSN Educational Roadmaps

Looking for the best way to learn component protocols?

Stuck on what to document to read or video to watch first?

Well, the Health Education team and NHSN Subject Matter Experts have removed all the education roadblocks with the NHSN Education Roadmaps.

The CDC's NHSN offers a training resource, the NHSN Educational Roadmap for users of all levels of learning.

The NHSN Education Roadmap is a guided tour of NHSN training materials needed to provide a solid foundation, that includes applying NHSN protocols, and data reporting/entry for each individual component. The roadmap starts with education resources for basic learners and progresses to materials with more advanced learning.

This is perfect for new Infection Preventionists (IPs) or for those that want a refresher!

You are two-clicks away from your NHSN education journey!

Check out the NHSN Education Roadmap components. To begin your learning experience, click the link and select the component of your interest. <https://www.cdc.gov/nhsn/training/roadmap/index.html>

Any training questions or concerns? Email us at [NHSNTrain@cdc.gov](mailto:NHSNTrain@cdc.gov)

## Announcing a New Protocol and Training Team (PaTT) User Training Event- Save the Dates

**Title:** NHSN Protocol and Training Ask the Experts Education Series

**Description:** The NHSN Protocol and Training Team (PaTT) will be facilitating a new 60-minute, monthly education webinar series, "Ask the Expert". After a brief overview of the main topic, users will have the opportunity to ask questions to subject matter experts to obtain clarity on NHSN Patient Safety Component (PSC) protocols and resources.

**Audience:** All PSC Users are invited; however, the conversation will be geared to newer NHSN users, 3 years or less.

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**Dates:** These training events will be conducted on the 2<sup>nd</sup> or 3<sup>rd</sup> Wednesday of the month at 2:00 pm eastern standard time and will address a different topic each month. The registration information will be emailed prior to each session. Mark your calendars, the “Ask the Expert” dates and topics are:

July 19<sup>th</sup> – **How to Use the NHSN Organism Lists**

August 16<sup>th</sup> - BSI

September 20<sup>th</sup> - Secondary BSI

October 25<sup>th</sup> - SSI

November 15<sup>th</sup> - Chapter 17

December 13<sup>th</sup> – UTI/PNEU

We look forward to speaking with you soon!

NHSN PaTT and Health Education Teams

## DIALYSIS COMPONENT

### Mark Your Calendars – Q1 2023 QIP Deadline

The 2023 Quarter 1 deadline (payment year 2025) for the Centers for Medicare and Medicaid End Stage Renal Disease Quality Incentive Program is right around the corner! The deadline for reporting is Friday, June 30, 2023 at 11:59 PM PT. Facilities reporting to NHSN should report all three months (January, February, March 2023) of data no later than June 30, 2023, in order to receive full credit for Q1 2023 reporting and meet requirements for the CMS ESRD QIP.

## GENERAL NHSN INFORMATION

### Feedback Needed from NHSN Users for Modernization Survey

The NHSN Modernization Project is seeking volunteers to help shape the future of the National Healthcare Safety Network by taking part in a user experience survey. This outreach initiative is essential in enabling us in improving the application’s user experience and modernizing to current technologies. Your input will help us identify your pain points, gaps, and business needs, which will enable us to design a more user-friendly experience. The success of this project heavily depends on NHSN users’ participation in this survey. Interested volunteers can email us at [nhsnbeta@cdc.gov](mailto:nhsnbeta@cdc.gov) by June 30, 2023. In the email, please share your basic information, such as your role, NHSN component, and which facility you belong to. The NHSN Modernization Project team will then contact you to inform you of the next steps. We appreciate your participation in this initiative to modernize NHSN.

## NHSN Data Quality Corner

### Webinar Coming Soon

Data quality webinar coming soon! The NHSN team will present a semi-annual webinar focused on data quality-related items and resources available for NHSN users of the Patient Safety Component. The next webinar will occur in Summer 2023. We will share more information through email soon.

### Notes on the NHSN Release Schedule

- Release 11.3.0 was deployed on April 14, 2023
- Release 11.4.0 was deployed on June 10, 2023.
- Release 11.5.0 is scheduled to be deployed on August 5, 2023.
- The NPPT site is currently on v11.3.0. It's scheduled to be updated to v11.4.0 in mid-June.
  - Please send any issues found to [NHSNCDA@cdc.gov](mailto:NHSNCDA@cdc.gov).

### Release 11.4 – CDA Impact

The list below includes CRs with impact to vendors currently included in 11.4 which was released on June 10, 2023.

#### Long Term Care Component

- NHSN is implementing the ability to accept CDAs for Denominator for LTCF LabID Reporting with support for both Manual Import and Direct Automation using R1-D1.1 IG version.
- Documentation will be posted on the Toolkits Webpage

### Release 11.5 – CDA Impact

The list below includes CRs with impact to vendors currently slated for 11.5 which is planned for August 2023.

#### Neonatal Component

- Direct Automation for Neonatal LOS/MEN Denominators and Events CDA Imports was implemented in September 2021. NHSN is now implementing support for manual import of LOS/MEN CDA files into the NHSN Application using R3-D4 IG version.

### Antimicrobial Resistance Synthetic Data Set (AR SDS)

AR SDS version 1.5 is posted and available for use. From version 1.4 to 1.5 we've made the following changes:

- Updated Fact\_CultureResult table to resolve an isolate that was tested only for ineligible antimicrobial agents.

As a reminder, vendors must complete validation prior to being able to submit data for May 2023. Specifically, all production AR Event and AR Summary CDA files must contain the SDS Validation ID (provided by the NHSN Team after confirmation of successful validation) and a Vendor (application) OID. AR CDA files that do not contain this information will be rejected.

If you have any questions about the AR SDS or would like to set up a call to discuss the details, please email [NHSNCDA@cdc.gov](mailto:NHSNCDA@cdc.gov).

### April 2023 Vendor Webinar Posted

The recording and slides for April 2023 Vendor Webinar has been posted here: [Webinars & Training Videos | NHSN | CDC](#). This webinar contained a review of changes for the NHSN releases occurring in 2023 that will impact vendors along with a preview of new measures that will be implemented in NHSN.

### Support Requests for the NHSN CDA Team

We encourage facilities and vendors to reach out to the NHSN CDA Team with questions, comments, and concerns via [NHSNCDA@cdc.gov](mailto:NHSNCDA@cdc.gov). We aim to reply to your email within 5 business days, but that timeline may vary depending on the complexity of the issue and the amount of investigation needed. If you don't hear from us within 5 business days, please send another email.

If your email involves messages sent via Direct CDA Automation not receiving a response, please first ensure it's been more than 24 hours since the messages were originally sent to NHSN via Direct. During specific times of the month, NHSN experiences a high volume of Direct submissions, and it can take a while for the NHSN servers to clear the queue. If it has been more than 24 hours since you sent the message via Direct, please help us in our investigation by providing the following details for your submissions (see example information below). We aim to reply to emails regarding missing Direct message responses within 1 business day but failure to provide information below will extend the turnaround time.

Facility Name	NHSN Facility ID#	Submitted Date/Time	Zip file Name	Message ID
Best Hospital Ever	12345	01/27/2023 13:15	AU23_JAN_2023	1230589110.20827.1543342802378. JavaMail.tomcat@vendor-hisp02

## CDA Direct Automation

At this time, over 9,600 facilities have signed up for DIRECT CDA Automation. If your facility is sending data via CDA and you are interested in learning more about DIRECT CDA Automation, ask your CDA vendor or check out the information on the [NHSN CSSP Importing Data webpage](#).

## Guide to CDA Versions

- The Guide to CDA versions on the NHSN CDA Submission Support Portal is always available to verify valid CDA imports based on the correct Implementation Guide.
- In addition, implementers can use the GitHub site to get all the latest xml (Schema, Schematron, and sample) files.
  - XML and Related files (Schematron, sample, html, stylesheet) are housed on the HL7 GitHub site: <https://github.com/HL7/cda-hai>
  - The latest CDA Schema is located on the HL7 GitHub site: <https://github.com/HL7/cda-core-2.0/tree/master/schema/extensions>
- The Guide to CDA Versions is available on the CDA Portal Implementation Toolkits & Resources Website: <https://www.cdc.gov/nhsn/cdaportal/toolkits/guidetocdaversions.html>

Events or Denominators	2023	2022	2021	2020
<b>CDA Toolkit Release</b>	<b>11.1</b>	<b>10.1</b>	<b>9.5 &amp; 10.0</b>	<b>9.4</b>
<b>DIALYSIS</b>				
Dialysis Event	R3-D4	R3-D4	R3-D4	R3-D1.1
Dialysis Denominator	R3-D3	R3-D3	R3-D3	R3-D3
<b>EVENTS</b>				
Primary Bloodstream Infection (BSI)	R4-D1	R4-D1	R3-D3	R3-D3
Central Line Insertion Practices Adherence (CLIP) Monitoring	R2-D2.1	R2-D2.1	R2-D2.1	R2-D2.1
Urinary Tract Infection	R4-D1	R4-D1	R2-D1.1	R2-D1.1
Laboratory-identified (LabID) MDRO or CDI Event	R2-D2.1	R2-D2.1	R2-D2.1	R2-D2.1
Ventilator-associated Event (VAE)	R4-D1	R4-D1	R3-D2	R3-D2

## As an Important Reminder...

Not all NHSN changes are documented in the IDM, be sure to reference the updated protocols. Other helpful links are the following:

- Archived Newsletters: <https://www.cdc.gov/nhsn/newsletters/index.html>
- Archived NHSN email communication: <https://www.cdc.gov/nhsn/commup/index.html>
  - Includes release notes and summary of updates for specific components
- Vendor webinars & training videos: <https://www.cdc.gov/nhsn/cdaportal/webinars.html>

## NHSN Help Desk Activity Update

### Quarter 2, 2023

(Averages)

- 172 new facilities enrolled in NHSN this quarter
- 89 - Ambulatory Surgery Centers (ASCs) enrolled this quarter
  - 29,021 – iSupport Tickets this quarter
    - 484 – iSupport Tickets per day
    - 2,418 – iSupport Tickets per week

## NHSN Enrollment Update

### NHSN Enrollment Update (as of June 09, 2023):

8,344 Hospitals (this includes 631 Long-term Acute Care Hospitals and 540 Free-standing Inpatient Rehabilitation Facilities)

8,662 Outpatient Hemodialysis Facilities

6,735 Ambulatory Surgery Centers (ASCs)

18,687 Long-term Care Facilities

**42,968 Total Healthcare Facilities Enrolled**

The National Healthcare Safety Network (NHSN) is a voluntary, secure, Internet-based surveillance system that integrates patient and healthcare personnel safety surveillance systems managed by the Division of Healthcare Quality Promotion (DHQP) at CDC. During 2008, enrollment in NHSN was opened to all types of healthcare facilities in the United States, including acute care hospitals, long-term acute care hospitals, psychiatric hospitals, rehabilitation hospitals, outpatient dialysis centers, ambulatory surgery centers, and long-term care facilities.



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