

# Proposed PY 2018 Clinical Measure

## Infection Monitoring: NHSN Bloodstream Infection in Hemodialysis Patients

### NHSN Bloodstream Infection in Hemodialysis Outpatients Lower Adjusted Ranking Metric (ARM) value desired

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| <b>Measure Description</b>    | Adjusted Ranking Metric (ARM) of Bloodstream Infection will be calculated among patients receiving hemodialysis at outpatient hemodialysis centers. Based on NQF #1460   |
| <b>Numerator</b>              | The observed number of new positive blood culture events based on blood cultures drawn as an outpatient or within 1 calendar day after a hospital admission and adjusted for vascular access type, unmeasured variation and patient exposure volume reported by a given facility to NHSN for the entire year.  |
| <b>Denominator</b>            | <p>The number of positive blood culture events predicted to have occurred in a given facility for the entire year. Calculation for this denominator incorporates the number of in-center hemodialysis patients treated in the outpatient hemodialysis facility for the year stratified by vascular access type.</p> <p>Exclusions:</p> <ol style="list-style-type: none"> <li>1. Facilities that do not offer in-center hemodialysis</li> <li>2. Facilities with a CCN open date after January 1, 2016</li> </ol>  |
| <b>Data Source(s)</b>         | <ol style="list-style-type: none"> <li>1. NHSN</li> <li>2. REMIS, CROWNWeb, and other CMS ESRD administrative data (form 2744 to obtain facility type and certification date)</li> </ol>   |
| <b>Additional Information</b> | <ol style="list-style-type: none"> <li>1. Facilities are required to meet enrollment and training requirements, as specified at <a href="http://www.cdc.gov/nhsn/dialysis/enroll.html">http://www.cdc.gov/nhsn/dialysis/enroll.html</a> and <a href="http://www.cdc.gov/nhsn/Training/dialysis/index.html">http://www.cdc.gov/nhsn/Training/dialysis/index.html</a>.</li> <li>2. Data are collected as specified by the NHSN Dialysis Event Surveillance Protocol: <a href="http://www.cdc.gov/nhsn/PDFs/pscManual/8pscDialysisEventcurrent.pdf">http://www.cdc.gov/nhsn/PDFs/pscManual/8pscDialysisEventcurrent.pdf</a>.</li> <li>3. A positive blood culture is considered a new event and counted only if it occurred 21 days or more after a previous positive blood culture in the same patient.</li> <li>4. Patients receiving inpatient hemodialysis or peritoneal dialysis are excluded from the measure.</li> <li>5. Patients receiving home hemodialysis are excluded from the measure.</li> <li>6. Facilities who do not submit 12 months of accurately reported data receive zero points for the measure.</li> <li>7. For more information about the methodology used to calculate the Adjusted Ranking Metric (ARM), please see <a href="http://www.cdc.gov/nhsn/dialysis/">http://www.cdc.gov/nhsn/dialysis/</a> and <a href="http://www.cdc.gov/nhsn/PDFs/dialysis/NHSN-ARM.pdf">http://www.cdc.gov/nhsn/PDFs/dialysis/NHSN-ARM.pdf</a>.</li> </ol> |