Tennessee's Report on Healthcare-Associated Infections:

January 1, 2010 — December 31, 2012

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EXECUTIVE SUMMARY

Healthcare-Associated Infections Reporting in Tennessee, 2008-present

Healthcare facilities collect and report healthcare-associated infection (HAI) data to the Tennessee Department of Health (TDH) via the National Healthcare Safety Network (NHSN), a secure internet-based surveillance system maintained by the Centers for Disease Control and Prevention (CDC).

Since January 2008, hospitals in Tennessee have been required to report central line-associated bloodstream infection (CLABSI) data from adult and pediatric intensive care units (ICUs, also called "critical care units") to TDH. Hospitals with an average daily census (ADC) less than 25 were exempt from this requirement until January 2012. Neonatal ICUs in Tennessee have been reporting CLABSI data since July 2008. Burn and trauma ICUs, specialty care areas (SCAs), and long-term acute care (LTAC) facilities began reporting CLABSI data in July 2010.

Surgical site infections (SSI) following coronary artery bypass graft (CBGB/C) procedures have been reportable by Tennessee hospitals since January 2008. SSIs following colon (COLO) procedures and those following abdominal hysterectomy (HYST) procedures have been reported since January 2012.

Methicillin-Resistant *Staphylococcus aureus* (MRSA) Laboratory-Identified (LabID) Events and *Clostridium difficile* Infection (CDI) LabID Events have been reportable to TDH since July 2010 from acute care hospitals (facility-wide inpatient locations and emergency departments) and long-term acute care facilities. Hospitals with an ADC less than 25 were exempt from this requirement until July 2012.

Tennessee hospitals have been required to report catheter-associated urinary tract infection (CAUTI) data in adult and pediatric ICUs to TDH since January 2012. (Figure 1)

Standardized Infection Ratio (SIR)

The Centers for Disease Control and Prevention reports the Standardized Infection Ratio (SIR) for healthcare associated infections. This report uses the SIR as its primary metric where available.

The SIR is an indirect standardization method for summarizing the HAI experience across stratified groups of data. The SIR is calculated by dividing the number of observed infections by the number of statistically predicted infections based on the NHSN standard population and appropriate patient and facility-level risk adjustment:

$$\text{SIR} = \frac{\text{Observed HAIs}}{\text{Predicted HAIs}}$$

- A SIR of 1.0 means the observed number of infections is equal to the number of predicted infections
- A SIR greater than 1.0 means there were more infections than predicted. For example, if a facility has a CLABSI SIR=1.5, they experienced 50% more CLABSIs than predicted.
- A SIR less than 1.0 means there were fewer infections than predicted. For example, if a facility has a CLABSI SIR=0.8, they experienced 20% fewer CLABSIs than predicted.

Central Line-Associated Bloodstream Infections (CLABSIs) in Adult and Pediatric ICUs, January–December 2012:

Tennessee's overall standardized infection ratio (SIR) for central line-associated bloodstream infections (CLABSI) CLABSI in adult and pediatric ICUs in 2012 was 44% lower than the national 2006-08 SIR of 1 (SIR=0.56; 95% CI: 0.50, 0.63). The median (50^{th} percentile) facility-specific SIR was 0.45, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had a SIR at or below 0.45. No facility had a 2012 SIR significantly greater than 1. (Table 1)

Central Line-Associated Bloodstream Infections (CLABSIs) in Neonatal ICUs, January–December 2012:

The overall 2012 CLABSI SIR for neonatal ICUs was 46% lower than the national baseline (SIR=0.54; 95% CI: 0.41, 0.70). The median (50th percentile) facility-specific SIR was 0.46, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had a SIR at or below 0.46. No facility had a 2012 SIR significantly greater than 1. (Table 1)

In 2012, the Tennessee CLABSI SIR in level III NICUs was significantly lower than 2006-8 national SIR of 1 (SIR=0.45; 95% CI: 0.30, 0.64). The Tennessee CLABSI SIR in level II/III NICUs was not significantly different from 1 (SIR=0.70; 95% CI: 0.46, 1.02). (Table 11)

Central Line-Associated Bloodstream Infections (CLABSIs) in Long-Term Acute Care (LTAC) Facilities, January–December 2012:

The overall 2012 SIR for CLABSIs in long-term acute care hospitals was 39% lower than the national baseline (SIR=0.61; 95% CI: 0.47, 0.77). The median (50th percentile) facility-specific SIR was 0.57, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had a SIR at or below 0.57. No facility had a 2012 SIR significantly greater than 1. (Table 1)

Catheter-Associated Urinary Tract Infections (CAUTIs) in Adult and Pediatric ICUs, January–December 2012:

The overall SIR for catheter-associated urinary tract infections (CAUTI) in Tennessee adult and pediatric ICUs in 2012 was 45% higher than the national 2009 SIR of 1 (SIR=1.45; 95% CI: 1.36, 1.54). The median (50th percentile) facility-specific SIR was 1.16, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had a SIR at or below 1.16. 15 facilities (19%) had a 2012 SIR significantly greater than 1. (Table 1)

Surgical Site Infections (SSIs) Related to Coronary Artery Bypass Graft (CGBB/C) Procedures, Abdominal Hysterectomy (HYST) Procedures, and Colon (COLO) Procedures, January–December 2012:

For surgical site infections (SSI), the complex admission/readmission (complex A/R) SIR for infections following coronary artery bypass graft (CABG) procedures was 24% lower than the national 2006-08 SIR of 1 (SIR=0.76; 95% CI: 0.58, 0.97). The median (50th percentile) facility-specific SIR was 0.71, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had a SIR at or below 0.71. One facility (5%) had a 2012 CABG SIR significantly greater than 1. SSIs related to CBGB/B procedures were most often superficial primary (34%) and least often deep incisional secondary (4%).

For SSIs following colon (COLO) procedures, the complex A/R SIR was less than, but not statistically significantly different from, the baseline SIR of 1 (SIR=0.94; 95% CI: 0.81, 1.08). The median (50th percentile) facility-specific SIR was 0.64. Three facilities (6%) had a 2012 COLO SIR significantly greater than 1. SSIs related to COLO procedures were most often superficial primary (42%) and least often deep primary infections (23%).

The complex A/R SIR for SSIs following abdominal hysterectomy (HYST) procedures was also less than, but not statistically significantly different from, the baseline SIR of 1 (SIR=0.88; 95% CI: 0.67, 1.13). The median (50th percentile) facility-specific SIR was 0.95. No facility had a 2012 HYST SIR significantly greater than 1. SSIs related to HYST procedures were most often superficial primary (40%) and least often deep primary infections (22%). (Table 1)

Methicillin-Resistant *Staphylococcus aureus (MRSA)* Laboratory-Identified (LabID) Events in Acute Care Hospitals and Long-Term Acute Care Hospitals, January-December 2012

The 2012 overall Tennessee SIR for Methicillin-Resistant *Staphylococcus aureus (MRSA)* laboratory-identified (LabID) events in acute care hospitals was 45% higher than the 2010-2011 national baseline SIR of 1 (SIR=1.45; 95% CI: 1.32, 1.60). The median (50th percentile) facility-specific SIR was 1.44, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had a SIR at or below 1.44. 8 facilities (15%) had a 2012 SIR significantly greater than 1. (Table 1)

In long-term acute care hospitals, the MRSA healthcare-facility onset incidence rate for July-December 2012 was 3.2 infections per 10,000 patient days. The standardized infection ratio is not yet available for LabID events in long-term acute care hospitals. (Table 33)

***Clostridium difficile* Infection (CDI) Laboratory-Identified (LabID) Events in Acute Care Hospitals and Long-Term Acute Care Hospitals, January-December 2012**

The SIR for *Clostridium difficile* Infection (CDI) LabID events was 25% lower than the national baseline (SIR=0.75; 95% CI: 0.72, 0.78). The median (50^{th} percentile) facility-specific SIR was 0.66, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had a SIR at or below 0.66. 4 facilities (4%) had a 2012 SIR significantly greater than 1, while 26 facilities (27%) had a SIR significantly less than 1. (Table 1)

In long-term acute care hospitals, the CDI healthcare-facility onset incidence rate for July-December 2012 was 14.5 infections per 10,000 patient days. The standardized infection ratio is not yet available for LabID events in long-term acute care hospitals. (Table 34)

Table 1: Tennessee Standardized Infection Ratios (SIRs) and Distribution of Facility-specific SIRs for Central Line-Associated Bloodstream Infection (CLABSI), Catheter-Associated Urinary Tract Infection (CAUTI), Surgical Site Infection (SSI) and Laboratory-Identified (LabID) Methicillin-Resistant *Staphylococcus aureus (MRSA)* and *C. difficile* Infection (CDI) Events, 01/01/2012 - 12/31/2012

									Distribution of Facility-specific SIRs									
				No. of Infections		Standardized Infection Ratio (SIR) and 95% CI				No. of Facs with SIR Sig. <1.0		No. of Facs with SIR Sig. >1.0		Key Percentiles				
HAI	Unit/Type	No. of Facilities	Device Days/ Procedures Performed	Obs.	Pred.	SIR	Lower	Upper	No. of Facs with ≥1 Pred. Infection	N	%	N	%	10%	25%	50%	75%	90%
CLABSI	Adult/Pediatric ICUs	93	245,063	279	497.32	0.56	0.50	0.63	51	10	20%	0	0%	0.00	0.18	0.45	0.84	1.39
	Neonatal ICUs	24	47,936	58	107.72	0.54	0.41	0.70	13	4	31%	0	0%	0.00	0.15	0.46	0.70	0.94
	Long-term Acute Care	9	64,435	68	111.26	0.61	0.47	0.77	9	2	22%	0	0%	0.17	0.50	0.57	0.81	1.11
CAUTI	Adult/Pediatric ICUs	93	332,567	1,004	694.62	1.45	1.36	1.54	67	4	6%	13	19%	0.00	0.39	1.16	1.82	2.44
SSI	Coronary Artery Bypass Graft	26	6,995	63	83.17	0.76	0.58	0.97	22	1	5%	1	5%	0.00	0.00	0.71	1.19	1.74
	Colon surgery	87	6,722	193	206.34	0.94	0.81	1.08	51	4	8%	3	6%	0.00	0.00	0.64	1.34	1.71
	Abdominal Hysterectomy	84	8,844	59	67.25	0.88	0.67	1.13	19	0	0%	0	0%	0.00	0.32	0.95	1.45	1.65
MRSA	Acute Care Hospitals	109	.	418	287.70	1.45	1.32	1.60	53	0	0%	8	15%	0.32	0.66	1.44	1.77	2.42
CDI	Acute Care Hospitals	109	.	1,931	2,572.02	0.75	0.72	0.79	95	26	27%	4	4%	0.00	0.38	0.66	0.92	1.29

Data reported as of September 27, 2013
Adult/Pediatric ICUs include burn and trauma units
Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)
NA = Not available
Green highlighting indicates a SIR significantly LOWER than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009; MRSA, CDI - 2010-2011)
Red highlighting indicates a SIR significantly HIGHER than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009; MRSA, CDI - 2010-2011)

BACKGROUND

Healthcare-associated infections (HAIs) are a major public health problem. According to the Centers for Disease Control and Prevention (CDC), there were an estimated 1.7 million HAIs and 99,000 HAI-related deaths in the United States in 2002, making HAIs one of the top ten leading causes of death (Klevens et al, 2007, Public Health Reports). A 2009 CDC report estimated that the annual medical costs (adjusted to 2007 dollars) of HAIs to U.S. hospitals to be between $35.7 billion and $45 billion (Scott, 2009, available at: http://www.cdc.gov/HAI/pdfs/hai/Scott_CostPaper.pdf), though these monetary costs do not measure the effects of HAIs on patients or their family members, friends, and colleagues. The emotional, physical, and personal costs associated with HAIs are not quantifiable.

In December 2006, the Tennessee Legislature passed Senate Bill 2978 and the Governor signed the Public Acts, Public Chapter 904 (PC904) requiring hospitals to report selected HAIs to the Tennessee Department of Health (TDH). The legislation required use of CDC's National Healthcare Safety Network (NHSN) for reporting, making Tennessee the fifth state to use this system. Currently, 31 states and the District of Columbia require HAI reporting via NHSN, which has become the standard system for HAI reporting. Additionally, the Centers for Medicare and Medicaid Services (CMS) have required hospitals in the Hospital Inpatient Quality Reporting (IQR) Program to report CLABSIs in adult, pediatric, and neonatal intensive care units (ICUs) to NHSN since January 2011, and beginning in January 2012, CAUTIs in ICUs and surgical site infections (SSIs) related to inpatient colon surgery (COLO) and inpatient abdominal hysterectomy (HYST) procedures.

The following report summarizes the TDH Healthcare-Associated Infection reporting activities from January 2010 through December 2012. This report provides CLABSI and CAUTI standardized infection ratios (SIRs) and rates by individual acute care hospital, ICU type, and at a state aggregate level. The 2012 facility-specific CLABSI SIRs are compared to Tennessee data from 2012 and to national NHSN baseline data from 2006-2008. The 2012 CAUTI SIRs are compared to Tennessee data from 2012 and to national NHSN baseline data from 2009. For SSIs related to COLO and HYST procedures, data are provided by individual acute care hospital and at the state aggregate level; data are provided at the state aggregate level only for SSIs related to CBGB/C procedures. The 2012 SSI SIRs are compared to national NHSN baseline data from 2006-2008. LabID data are provided at the state aggregate level and SIRs are compared to national NHSN baseline data from 2010-2011 (note that LabID SIRs were not available prior to 2012).

DEFINITIONS

Unless a reader works in the healthcare field or understands statistics, he/she may not be familiar with some of the words or labels mentioned in the Tennessee HAI Report. On this page, we attempt to explain what some of these terms mean. A reader does not need to know all of the terms in order to understand the reports.

Abdominal hysterectomy (HYST): Hysterectomy performed through the abdomen; includes laparoscopic procedures.

All Surgical Site Infection Standardized Infection Ratio (All SSI SIR): (See Standardized Infection Ratio.) A standardized infection ratio calculated by NHSN for surgical site infections, which includes all inpatient and outpatient procedures and all primary SSIs identified during admission, readmission, or post-discharge surveillance, as defined in the NHSN Patient Safety Component Manual.

ASA Score: Assessment by the anesthesiologist of the patient's preoperative physical condition using the American Society of Anesthesiologists' (ASA) Classification of Physical Status. Patient is assigned one of the following which is used as one element of the SSI Basic Risk index:
1 -- Normally healthy patient
2 -- Patient with mild systemic disease
3 -- Patient with severe systemic disease that is not incapacitating
4 -- Patient with an incapacitating systemic disease that is a constant threat to life
5 -- Moribund patient who is not expected to survive for 24 hours with or without the operation

Catheter-associated urinary tract infection (CAUTI): When a patient develops a urinary tract infection while having a urinary catheter in place or within 48 hours of urinary catheter removal, the infection is considered a CAUTI.

CAUTI infection rate: The total number of catheter-associated urinary tract infections divided by the number of urinary catheter-days, multiplied by 1,000.

Central line: A flexible tube that is inserted in a patient's blood vessel and terminates at or close to the heart or in one of the large vessels near the heart. A central line (or an umbilical line for newborns) can be used to give fluids, antibiotics, medical treatments such as chemotherapy, and/or liquid food. If a central line is inserted incorrectly or not cared for properly, it can lead to dangerous bloodstream infections (see Patient Guide to CLABSI [PDF]). Central lines are also sometimes called central venous lines or central venous catheters.

Central line-associated bloodstream infection (CLABSI): When a patient develops a bloodstream infection while having a central line in place or within 48 hours of central line removal, the infection is considered a CLABSI.

Central line-days: The total number of days a central line is in place for patients in a particular unit. The count is performed at the same time each day. Each patient with one or more central lines at the time the count is performed is counted as one central line day. In specialty care areas, central line-days are collected separately for permanent and temporary central lines (see "Central line" definition). If a patient has both a permanent and a temporary central line, the day is recorded as a temporary central line-day.

Example: 5 patients on the first day of the month had one or more central lines in place. Similarly, 5 patients on day two, 2 patients on day three, 5 patients on day four, 3 patients on day five, 4 patients on day six, and 4 patients on day seven had central lines in place. Adding the number of patients with central lines on days one through seven, we would have 5 + 5 + 2 + 5 + 3 + 4 + 4 = 28 central line-days for the first week. The number of central line-days for the month is the sum of the daily counts.

Central line-associated bloodstream infection (CLABSI) rate: This rate is the total number of central line-associated bloodstream infections divided by the number of central line-days, multiplied by 1,000.

Central line utilization ratio: See Device Utilization Ratio

***Clostridium difficile*:** A bacterium that naturally resides in the bowels of some people without symptoms of infection.

Clostridium difficile (*C. difficile*) is responsible for a spectrum of *C. difficile* infections (CDI), including gastrointestinal illness which can lead to severe complications including sepsis and death. CDI can occur when *C. difficile* spores are transferred to patients via the hands of healthcare personnel or other contaminated surfaces or items.

Colon surgery (COLO): Procedure performed on the large intestine; does not include rectal operations.

Community-onset (CO): LabID event specimen collected as an outpatient or an inpatient ≤3 days after admission to the facility (i.e., days 1, 2, or 3 of admission).

Community-onset healthcare facility-associated (CO-HFA): Community-onset (CO) LabID event specimen collected from a patient who was discharged from the facility ≤4 weeks prior to the current date of stool specimen collection (*Clostridium difficile* infection LabID events only).

Complex Admission/Readmission Standardized Infection Ratio (Complex A/R SIR): (See Standardized Infection Ratio) A standardized infection ratio calculated by NHSN for surgical site infections, which only includes inpatient procedures and deep incisional primary and organ/space SSIs identified during admission or readmission to the reporting facility, as defined in the NHSN Patient Safety Component Manual.

Confidence intervals: Confidence intervals describe the reliability of a point estimate, such as a standardized infection ratio or infection rate. If TDH mentions a confidence interval of 95%, it means that the TDH is 95% confident that the hospital's precise infection rate (the point estimate) falls within the range given. In this report, the confidence interval is based on the number of infections observed and the number of central line-days accumulated during the specified time period.

If two hospitals have different infection rates, but the confidence intervals for the two rates overlap, then it is reasonably possible that the true rates are the same (see Discussion of Confidence Intervals [PDF]).

Coronary Artery Bypass Graft (CBGB/C): *Coronary artery bypass graft with both chest and donor site incisions (CBGB):* Chest procedure to perform direct revascularization of the heart; includes obtaining suitable vein from donor site for grafting.

Coronary artery bypasses graft with chest incision only (CBGC): Chest procedure to perform direct vascularization of the heart using, for example, the internal mammary (thoracic) artery.

Deep incisional SSI: A surgical site infection that involves the deep soft tissues (e.g., fascial and muscle layers) of the incision and meets the NHSN criteria for a deep incisional SSI as described in the NHSN Patient Safety Manual. A deep incisional SSI can be either 1) *primary* – identified in the primary incision in a patient that had an operation with one or more incisions (e.g., chest incision in a CBGB) or 2) *secondary* – identified in the secondary incision in a patient that had an operation with more than one incision (e.g., donor site (leg) incision in a CBGB).

Device Utilization (DU) Ratio: This ratio is the number of device (central line or urinary catheter) days divided by the number of patient-days (see also: central line utilization ratio and urinary catheter utilization ratio).

Healthcare-associated infection (HAI): For an infection to be considered healthcare-associated, there must be no evidence that the infection was present or incubating at the time of hospital admission. A HAI may be confined to one area of the body (localized) or be spread throughout (systemic). It is the body's adverse reaction to the presence of an infectious agent(s) or its toxin(s).

Healthcare facility-onset (HO): LabID event specimen collected >3 days after admission to the facility (i.e., on or after day 4).

Hip prosthesis (HPRO): In HPRO surgery (also called a "hip arthroplasty"), all or part of a diseased hip joint is removed and replaced with an artificial joint.

Infection control/prevention processes: These are routine measures that can be used in all healthcare settings to prevent infections. These steps or principles can be expanded to meet the needs of specialized types of hospitals. Examples include:

- Diligent hand cleaning
- Use of personal protective equipment such as gloves, gowns, and/or masks when caring for patients in select situations to prevent the spread of infections
- Use of an infection prevention checklist when inserting central lines. The list reminds healthcare workers to clean their hands thoroughly; clean the patient's skin with the appropriate type of disinfectant before insertion; wear the recommended sterile gown, gloves and mask; and place sterile barriers around the insertion site.
- Monitoring staff to ensure that they are following proper infection prevention procedures

Infection preventionists (IPs): Health professionals with special training in infection prevention and monitoring.

Intensive care unit (ICU) (also called a "critical care unit"): ICUs are hospital units that provide intensive observation and treatment for patients either dealing with, or at risk of developing, life-threatening problems. Smaller hospitals typically care for both medical and surgical patients in a combined medical-surgical ICU. Larger hospitals often have separate ICUs for medical patients and surgical patients.

Inpatient: As defined by NHSN, a patient whose date of admission to the healthcare facility and the date of discharge are different calendar days

Laboratory-identified (LabID) event: A monitoring method for multidrug-resistant organisms which relies almost exclusively on data obtained from the laboratory. Surveillance is performed using the NHSN MDRO/CDI Module Protocol.

Long-Term Acute Care (LTAC) Facility: LTACs provide evaluation, treatment, and management of patients suffering medically complex conditions, or who have suffered recent catastrophic illness or injury, and require and extended stay in an acute care environment.

Methicillin-Resistant *Staphylococcus aureus*: Methicillin-Resistant *Staphylococcus aureus* (MRSA) is a type of *Staphylococcus* bacteria that is resistant to certain antibiotics including methicillin. MRSA can be spread via contaminated surfaces or equipment and on the hands of healthcare personnel. MRSA infections can be severe and life threatening and treatment options are often limited and expensive.

National Healthcare Safety Network (NHSN): This is the online system that Tennessee hospitals must use to report HAI data to the Tennessee Department of Health. NHSN is a secure, internet-based surveillance (monitoring and reporting) system. Among other features, the network offers integrated patient and healthcare worker safety surveillance systems. NHSN is managed by CDC's Division of Healthcare Quality Promotion. In NHSN, hospitals submit information that is needed to calculate HAI rates and standardized infection ratios (SIRs). Hospitals must confer rights to TDH in order for TDH to collect data from NHSN and report the information to the public.

NHSN Patient Safety Component Manual: This manual contains standardized surveillance definitions and data collection methods that are essential for fair reporting of HAIs. Surveillance definitions are updated annually; 2013 protocols are available online.

NHSN operative procedure: A procedure that:

1) Is performed on a patient who is an NHSN inpatient or an NHSN outpatient
2) Takes place during an operation where a surgeon makes at least one incision through the skin or mucous membrane, including laparoscopic approach, and closes the incision before the patient leaves the operating room, and
3) That is included in Table 1, Chapter 9 of the NHSN Patient Safety Manual

Operation: A single trip to the operating room (OR) where a surgeon makes at least one incision through the skin or mucous membrane, including laparoscopic approach, and closes the incision before the patient leaves the OR.

Organ/space SSI: A surgical site infection that involves any part of the body, excluding the skin incision, fascia, or muscle layers, that is opened or manipulated during the operative procedure (e.g., osteomyelitis).

Outpatient: As defined by NHSN, a patient whose date of admission to the healthcare facility and the date of discharge are the same calendar day.

Standardized infection ratio (SIR): The SIR is a summary measure used to compare infection data from one population to data from a "standard" population. For HAI reports, the standard population comes from data reported from U.S. hospitals that report to NHSN. The SIR is calculated by dividing the observed number of infections by the predicted (or statistically expected) number of infections, which is calculated using data from the standard population. See Methods section for more information.

Superficial incisional SSI: A surgical site infection that involves only skin and soft tissue layers of the incision and meets the NHSN criteria for a superficial incisional SSI as described in the NHSN Patient Safety Manual. A incisional SSI can be either 1) *primary* – identified in the primary incision in a patient that had an operation with one or more incisions (e.g., chest incision in a CBGB) or 2) *secondary* – identified in the secondary incision in a patient that had an operation with more than one incision (e.g., donor site (leg) incision in a CBGB).

Surgical Site Infection (SSI): An infection found after an operation in the part of the body where the surgery was performed.

Surveillance: The process of finding and documenting infections.

- Active surveillance: This includes, but is not limited to, active, patient-based, prospective surveillance by a trained infection preventionist (IP). The IP seeks out infections during a patient's stay by screening a variety of data sources. The sources may include patient charts and laboratory, pharmacy, radiology/imaging, admission/discharge/transfer, and pathology databases. The complete definition of surveillance, including how to capture denominator data to calculate infection rates, is found in each module of the NHSN Patient Safety Component Manual (see above).
- Post-discharge surveillance: This is the process IPs use to seek out infections after patients have been discharged from the hospital. Post-discharge surveillance includes screening data sources such as re-admission and emergency department visit records.

Urinary catheter: A drainage tube that is inserted into the urinary bladder through the urethra, left in place, and connected to a closed collection system.

Urinary catheter days: The total number of days a urinary catheter is in place for patients in a particular unit. The count is performed at the same time each day. Each patient with urinary catheter in place at the time the count is performed is counted as one urinary catheter day.

Example: 5 patients on the first day of the month had a urinary catheter in place. Similarly, 5 patients on day two, 2 patients on day three, 5 patients on day four, 3 patients on day five, 4 patients on day six, and 4 patients on day seven had urinary catheters in place. Adding the number of patients with urinary catheters on days one through seven, we would have 5 + 5 + 2 + 5 + 3 + 4 + 4 = 28 urinary catheter-days for the first week. The number of urinary catheter days for the month is the sum of the daily counts.

Urinary catheter utilization ratio: See Device Utilization Ratio

Validation: Validation is the process of making sure that HAI data reported to NHSN are complete and accurate to:

- Assess the accuracy and quality of data submitted to NHSN
- Provide hospitals with information to help them correctly use the NHSN application
- Provide education to IPs and other hospital staff to improve data accuracy and quality, if necessary
- Teach IPs how to confirm the accuracy of written or electronic data they receive from hospital departments
- Look for unreported HAIs
- Assess selected infection control processes
- Make recommendations for improvements if data accuracy and/or quality issues are discovered

Key Abbreviations Found in the HAI Public Report

A/R – admission/readmission
ASA – American Society of Anesthesiologists
CAUTI – catheter-associated urinary tract infection
CBGB – coronary artery bypass graft surgery: both chest and donor site incisions
CBGC – coronary artery bypass graft surgery: chest incision only
CCU – critical care unit (used interchangeably with intensive care unit (ICU))
CDC – Centers for Disease Control and Prevention
CDI – *C. difficile* infection
CI – confidence interval
CL days- central line-days
CLABSI – central line-associated bloodstream infection
CMS – Centers for Medicare and Medicaid Services
COLO – colon surgery
DD – device days
DIP – deep incisional primary SSI
DIS – deep incisional secondary SSI
DU ratio – device utilization ratio
HAI – healthcare-associated infection
HYST – abdominal hysterectomy
IP – infection preventionist
ICU – intensive care unit (use interchangeably with critical care unit (CCU))
LTAC – long-term acute care
MRSA – methicillin-resistant *Staphylococcus aureus*
NHSN – National Healthcare Safety Network
NICU – neonatal intensive care unit
No. – number
OR – operating room
PROC – surgical procedures
SIP – superficial incisional primary SSI
SIR – standardized infection ratio
SIS – superficial incisional secondary SSI
SSI – surgical site infection
TDH – Tennessee Department of Health
TN – Tennessee
UC– Urinary catheter days
VRE – vancomycin-resistant *Enterococcus*

METHODS

Healthcare-Associated Infections Reporting Requirements in Tennessee

Since January 2008, hospitals in Tennessee have been required to report central line-associated bloodstream infection (CLABSI) data from adult and pediatric intensive care units (ICUs, also called "critical care units") to TDH. Hospitals with an average daily census (ADC) less than 25 were exempt from this requirement until January 2012. Neonatal ICUs in Tennessee have been reporting CLABSI data since July 2008. Burn and trauma ICUs, specialty care areas (SCAs), and long-term acute care (LTAC) facilities began reporting CLABSI data in July 2010.

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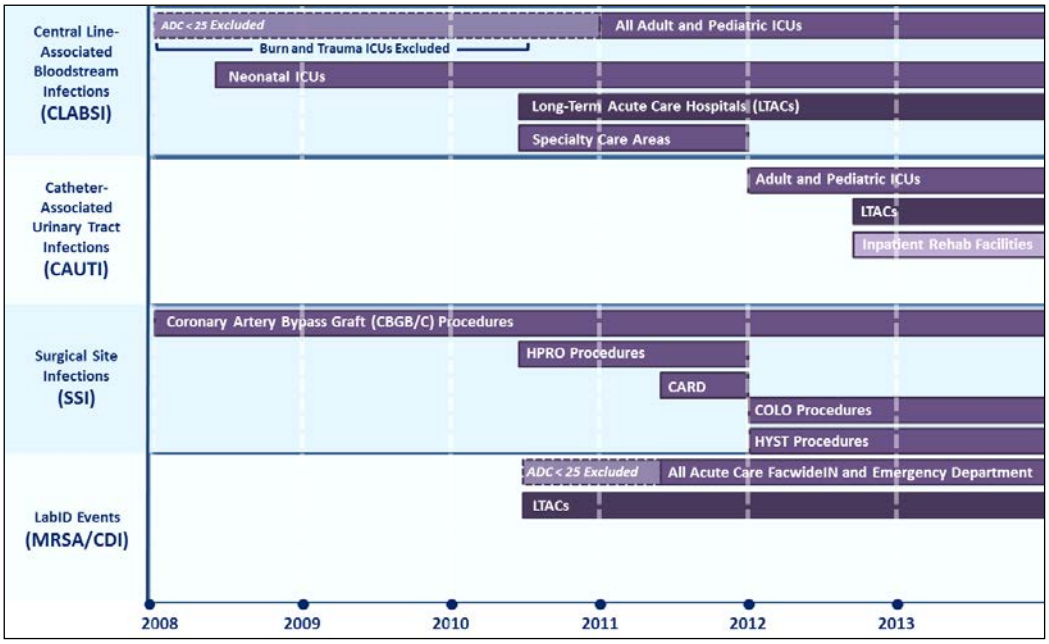
Tennessee hospitals have been required to report catheter-associated urinary tract infection (CAUTI) data in adult and pediatric ICUs to TDH since January 2012.

Figure 1: Tennessee Healthcare-associated Infections Reporting Requirements*, 2008-2013



*Note: Only includes HAIs which are publicly reported at this time

Tennessee Reporting Facilities

Characteristics of acute care hospitals reporting HAI data to TDH in 2012 are displayed below. Facilities are stratified by medical school affiliation (as defined by NHSN) and bed size, and data were gathered from the 2012 NHSN Annual Facility Survey.

Table 2. Characteristics of Tennessee Acute Care Hospitals, January-December 2012

	Number of facilities	Percent
Medical School Affiliation		
Major teaching	15	14.7%
Graduate teaching	13	12.8%
Undergraduate teaching	8	7.8%
None	66	64.7%
Number of Beds		
<50 beds	15	14.7%
50-99 beds	27	26.5%
100-399 beds	48	47.1%
≥400 beds	12	11.8%

Timeliness, Completeness and Accuracy of Reporting

TDH staff monitored the timeliness, completeness, and accuracy of hospital reports. In each Tennessee state HAI report, facilities with missing data during the reporting period are displayed in Table 3. No facilities were missing data during the current reporting period.

Table 3: Facilities Incompliant with Central Line-Associated Bloodstream Infection (CLABSI), Catheter-Associated Urinary Tract Infection (CAUTI), or Surgical Site Infection (SSI) Data Requirements for the Reporting Period January–December 2012

	Missing Data		
Facility	From	To	Reason for Missing Data
None	N/A	N/A	N/A

Data Validation

Data reported to NHSN are validated using several methods:

Point-of-entry checks: NHSN is a web-based data reporting and submission program that includes validation routines for many data elements, thus reducing common data entry errors. Hospitals can view, edit, and analyze their data at any time.

Monthly checks for internal consistency: Each month, TDH staff download CLABSI, CAUTI and LabID (MRSA/CDI) data from NHSN and verify completeness with a computerized data validation program. Data that are missing, unusual, inconsistent, or duplicative are identified and investigated through email or telephone communication with hospital staff. Hospitals are given the opportunity to verify and/or correct the data. This process has not yet been implemented for SSI data.

On-site CLABSI audits: Audits of a sample of medical records were conducted by TDH to assess compliance with reporting requirements. Onsite visits were conducted by HAI program staff in 14 reporting hospitals in 2009 and in 30 hospitals in 2010-11. These visits consist of reviewing medical charts from adult, pediatric, and neonatal ICUs. The purposes of the audits were to:

- Enhance reliability and consistency in applying NHSN surveillance definitions
- Evaluate the adequacy of surveillance methods to detect infections
- Evaluate intervention strategies designed to reduce or eliminate specific infections
- Discuss identified inconsistencies and allow hospitals to modify records as needed

Ongoing monitoring, education, and trainings are provided to ensure integrity of the data. Some facilities also conduct their own validation studies.

Thresholds for Reporting Facility-Specific Infection Rates and Standardized Infection Ratios (SIRs)

For CLABSI and CAUTI reporting, denominator data is collected in the form of device days. Device days are the total number of days that central lines (CLABSI) or urinary catheters (CAUTI) are used for patients in an ICU over a given period of time. For SSI reporting, the denominator is the number of procedures of a particular type that the facility performed over a given period of time. Even a few infections will yield a numerically high infection rate when the denominator of device days or surgical procedures is small. To ensure a fair and representative set of data, TDH adopted the NHSN minimum thresholds for reporting. The minimum thresholds are:

- For CLABSI/CAUTI rates, there must be a minimum of 50 device days during the reporting period.
- For the calculation of a facility-wide CLABSI/CAUTI SIR, there must be a minimum of 50 device days in all ICUs combined during the reporting period.
- For facility-level CLABSI, CAUTI and SSI SIR calculations, if the statistically predicted number of infections is <1.0, the SIR is not calculated.
- SIR key percentiles are not reported for locations with fewer than five facilities reporting

Risk Adjustment

Risk adjustment is a statistical technique that allows hospitals to be compared fairly by accounting for differences in patient populations in terms of severity of illness and other factors that may affect the risk of developing a HAI. A hospital that performs a large number of complex procedures on very sick patients would be expected to have a higher infection rate than a hospital that performs more routine procedures on healthier patients. Therefore, before comparing the infection rates of hospitals, it is important to adjust for the number and proportion of high- and low-risk patients by calculating a statistically 'expected' or predicted number of infections. Different risk adjustment methods are used for different types of HAIs.

For adult and pediatric ICU and LTAC patients with central lines, risk adjustment is limited to the type of hospital location; hospital type and unit bed size are used to categorize ICUs in some instances. Additional information is used for risk adjustment in other locations, including birth weight category (≤750 g, 751-1000 g, 1001-1500 g, 1501-2500 g, >2500 g) in NICUs.

For adult and pediatric ICU patients with urinary catheters, risk adjustment is limited to the type of hospital location; hospital type and unit bed size are used to categorize ICUs in some instances.

For individuals undergoing surgical procedures, risk adjustment is calculated through logistic regression models which use NHSN baseline data to represent a standard population[1]. With this method, risk factors are procedure-specific and each risk factor's contribution varies according to its association with risk of SSI.

For coronary artery bypass graft (CBGB/C) procedures, significant risk factors include:

- Age
- American Society of Anesthesiologists' physical status score (ASA score)
- Procedure duration
- Gender
- Age-gender interaction

Additionally, risk adjustment for the All SSI SIR (explained in more detail below under "Tennessee State and National Comparisons – SSI") includes hospital bed size, and the Complex A/R SIR includes medical school affiliation.

[1] Yi M, Edwards JR, et al. Improving risk-adjusted measures of surgical site information for the National Healthcare Safety Network. Infect Control Hosp Epidemiol 2011; 32(10):970-986.

For colon surgery (COLO) procedures, significant risk factors include:

- Age
- ASA score
- Procedure duration
- Endoscope
- Medical school affiliation
- Hospital bed size
- Wound class

Additionally, risk adjustment for the All SSI SIR includes anesthesia.

For abdominal hysterectomy (HYST) procedures, significant risk factors include:

- Age
- ASA score
- Procedure duration
- Hospital bed size

Additionally, risk adjustment for the All SSI SIR includes anesthesia and endoscope.

Risk adjustment for healthcare facility-onset Methicillin-Resistant *Staphylococcus aureus* (MRSA) and *C. difficile* infection (CDI) laboratory-identified (LabID) event reporting is calculated using negative binomial regression and is specific to type of LabID event[2].

Risk adjustment for MRSA LabID events include:

- MRSA community-onset prevalence rate
- Facility bed size
- Medical school affiliation

Risk adjustment for CDI LabID events include:

- CDI test type
- CDI community-onset prevalence rate
- Facility bed size
- Medical school affiliation

Standardized Infection Ratio - Overview

The SIR is identical in concept to a standardized mortality ratio and is an indirect standardization method for summarizing the HAI experience across any number of stratified groups of data. The SIR is calculated by dividing the number of observed infections by the number of statistically predicted infections based on the NHSN standard population and appropriate patient and facility-level risk adjustment:

$$\text{SIR} = \frac{\text{Observed HAIs}}{\text{Predicted HAIs}}$$

- A SIR of 1.0 means the observed number of infections is equal to the number of predicted infections
- A SIR greater than 1.0 means there were more infections than predicted. For example, if a facility has a CLABSI SIR=1.5, they experienced 50% more CLABSIs than predicted.
- A SIR less than 1.0 means there were fewer infections than predicted. For example, if a facility has a CLABSI SIR=0.8, they experienced 20% fewer CLABSIs than predicted.

[2] Dudeck MA, Weiner LM, Malpiedi PJ, et al. Risk Adjustment for Healthcare Facility-Onset C. difficile and MRSA Bacteremia Laboratory-identified Event Reporting in NHSN. Published March 12, 2013. Available at: http://www.cdc.gov/nhsn/pdfs/mrsa-cdi/RiskAdjustment-MRSA-CDI.pdf

Tennessee State and National Comparisons - CLABSI and CAUTI

This report displays Tennessee CLABSI data for 2010-12. For comparison, baseline national data were obtained from the National Healthcare Safety Network (NHSN) report that covered the period of 2006–2008 (available at http://www.cdc.gov/nhsn/PDFs/dataStat/2009NHSNReport.pdf). Because CDC discontinued the use of clinical sepsis (CSEP) CLABSI criteria for NICUs in January 2010, national baseline NICU data for this report were adjusted by subtracting any CLABSIs meeting the CSEP criteria (see Tables 17-18 of the NHSN report referenced above). In January 2011, the NHSN CLABSI definition was changed to no longer include antibiotic resistance profiles to determine whether two common commensal isolates are considered the same organism. Further, in October 2011, CDC clarified that because fever is a non-specific sign and may be due to more than one infection occurring at the same time, fever must be attributed to multiple causes at once (if applicable) in order to prevent selective attribution. Hospitals were asked to review cases dating back to January 2011 to ensure consistency with this clarified definition.

This report also displays Tennessee CAUTI data for 2012. For comparison, baseline national data were obtained from the NHSN report that covered 2009 (available at http://www.cdc.gov/nhsn/PDFs/NHSNReport_DataSummaryfor2009.pdf).

Tennessee CLABSI rates were compared to national rates using the same statistical methods implemented in NHSN for comparing hospital rates to national rates within risk categories. We used the SIR as a summary measure to compare CLABSI data in adult, pediatric, and neonatal ICUs in Tennessee to published national (NHSN) data for 2006-8 for each location type. We compared CAUTI data in adult and pediatric ICUs to NHSN data for 2009 for each location type. The CLABSI SIR is calculated by dividing the total number of observed CLABSI events by the predicted* number of CLABSIs, using the CLABSI rates from the standard population (in this case, national NHSN 2006-8 data). This predicted number, which can also be understood as a projection, is calculated by multiplying the national CLABSI rate from the standard population by the observed number of central line-days (CLD) for each stratum.

The following table illustrates the method of calculating a SIR across two risk strata (two ICU types: medical cardiac and medical-surgical) for which national data exist from NHSN. If the observed data represented a follow-up period such as January–December 2012, one would state that a SIR of 0.77 implies that there were 23% fewer CLABSIs than predicted for the nation, region, or facility during that time period.

Risk Group Stratifier	Observed CLABSI Rates			NHSN CLABSI Rates for 2006-2007 (Standard Population)		
Location Type	#CLABSI	#Central line-days	CLABSI rate*	#CLABSI	#Central line-days	CLABSI rate*
Medical cardiac ICU	170	100,000	1.7	1260	600,000	2.1
Med-Surg ICU	58	58,000	1.0	600	400,000	1.5

$$\text{SIR} = \frac{\text{observed}}{\text{expected}} = \frac{170+58}{100{,}000\times\left(\frac{2.1}{1{,}000}\right)+58{,}000\times\left(\frac{1.5}{1{,}000}\right)} = \frac{228}{210+87} = \frac{228}{297} = 0.77$$

* "Predicted" is used throughout the report as a synonym for the standard statistical term "expected".

In summary, to calculate the CLABSI Standardized Infection Ratio (SIR) for a facility:

1. For each reporting unit, multiply the number of central line-days (CLD) by the published national infection rate for that unit type to estimate the number of infections predicted (expected) for that unit if it were to produce CLABSIs at the same frequency as the national rate (CLD x national rate / 1000).

2. Within each hospital, calculate the sum of predicted (expected) infections and the sum of reported infections across all reporting units.

3. Calculate the SIR by dividing the total reported infections by the total predicted (expected) infections.

Tennessee State and National Comparisons - SSI

This report displays CBGB/C, COLO, and HYST SSI data in aggregate for Tennessee for 2010–2012 and facility-specific COLO and HYST data for 2012. For comparison, baseline national data were obtained from the National Healthcare Safety Network (NHSN) report that covered the period of 2006 through 2008 (available at http://www.cdc.gov/nhsn/PDFs/dataStat/2009NHSNReport.pdf). For SSI data, both crude (unadjusted) rates and SIRs are presented.

Crude (unadjusted) SSI rates are calculated as follows:

$$\text{SSI Rate} = \frac{\text{Number of SSI reported}}{\text{Number of procedures reported}} \times 100$$

SIRs for surgical site infections are calculated by dividing the number of observed infections by the number of predicted infections. For SSIs, the risk adjustment method used to determine the predicted number of infections is derived from a logistic regression model using the baseline national data (see above section on risk adjustment).

Below is a general logistic regression model. For each operative procedure, parameter estimates (represented by β in the model) have been calculated by CDC and represent each risk factor's contribution to a patient's overall risk. In this model, $\hat{p}$ represents a patient's probability of SSI, and X=1 if a given risk factor is present or X=0 if the risk factor is absent.

$$\text{logit}(\hat{p}) = \alpha + \beta_1 X_1 + \beta_2 X_2 + \beta_3 X_3 + \beta_4 X_4$$

For a given NHSN operative procedure, the table below illustrates the parameter estimates for the significant risk factors associated with that procedure. Note that this table is for teaching purposes only and should not be considered an actual model for predicting a patient's risk of SSI[3].

Factor	Parameter Estimate	OR	p-value
Intercept	-5.448	-	-
Age (≤44 vs >44)	0.520	1.659	<0.0001
ASA (3/4/5 vs 1/2)	0.425	1.529	0.0415
Duration (>100 vs ≤100)	0.501	1.650	0.0019
Medical School affiliation (Y vs N)	1.069	2.912	<0.0001

Applying the parameter estimates to the above model gives the following formula:
logit($\hat{p}$) = -5.448 + 0.520 (Age ≤ 44) + 0.425 (ASA 3/4/5) + 0.501 (Duration >100) + 1.069 (Med school affiliation)

[3] Example extracted from "NHSN e-News: SIRs Special Edition," Division of Healthcare Quality Promotion, Centers for Disease Control and Prevention, 10 December 2010 (http://www.cdc.gov/nhsn/PDFs/Newsletters/NHSN_NL_OCT_2010SE_final.pdf)

The probability of SSI for a given patient can be calculated using this formula. For example:

Patient	Age	ASA	Duration	Med School Affiliation
A	35	3	105	Y

logit($\hat{p}$) = -5.448 + 0.520(1) + 0.425(1) + 0.501(1) + 1.069(1) = -2.934
Solving for $\hat{p}$ gives a probability of SSI for Patient A of 0.05, or 5%.

To calculate the predicted number of infections for a population, each patient's risk of SSI is generated using the appropriate logistic regression model, and summed[4].

For this report, SSI SIRs are generated by NHSN, and come in two forms: All SSI and Complex Admission/Readmission (Complex A/R) SIRs. The All SSI SIR includes all procedures and superficial incisional primary, deep incisional primary, and organ/space SSIs identified during admission, readmission, or post-discharge surveillance; secondary SSIs are not included. Complex A/R SIRs include only inpatient procedures and deep incisional primary and organ/space SSIs which were identified during admission or readmission to the reporting facility, as defined in the NHSN manual.

Tennessee State and National Comparisons – LabID Events

This report displays Methicillin-Resistant *Staphylococcus aureus* (MRSA) and *C. difficile* infection (CDI) LabID event data in aggregate for Tennessee from July 2010-December 2012. For comparison, baseline national data were collected in the National Healthcare Safety Network (NHSN) during the period of 2010 through 2011.

This report displays crude (unadjusted) rates of healthcare facility-onset (HO) incidence and community-onset (CO) admission prevalence of MRSA bacteremia and CDI LabID events; community-onset healthcare facility-associated prevalence rates are also shown for CDI LabID events. Standardized infection ratios (SIRs) are displayed for LabID events in acute care hospitals beginning January 2012.

Crude (unadjusted) healthcare facility-onset (HO) incidence rates are calculated as follows:

$$\text{HO Incidence Rate} = \frac{\text{Number of HO events}}{\text{Number of patient days}} \times 10{,}000$$

Community-onset (CO) prevalence rates are calculated as follows:

$$\text{CO Incidence Rate} = \frac{\text{Number of CO events}}{\text{Number of patient admissions}} \times 1{,}000$$

Community-onset healthcare facility-associated prevalence rates for CDI LabID events are calculated like the CO prevalence rate shown above.

SIRs for LabID events are calculated by dividing the number of observed infections by the number of predicted infections. For LabID events, the risk adjustment method used to determine the predicted number of infections is derived from a negative binomial regression model using the baseline national data (see above section on risk adjustment).

Below is a general negative binomial regression model. For each LabID event type, parameter estimates (represented by β in the model) have been calculated by CDC and represent each risk factor's contribution to the overall expected number of LabID events in a facility in a given period of time. In this model, x=1 if a given risk factor is present or x=0 if the risk factor is absent.

$$\text{Number of predicted LabID events} = e^{(\beta+\beta_1 X_1+\beta_2 X_2+\ldots)} \times \text{patient days}$$

[4] Yi M, Edwards JR, et al. Improving risk-adjusted measures of surgical site information for the National Healthcare Safety Network. Infect Control Hosp Epidemiol 2011; 32(10):970-986.

The table below illustrates the parameter estimates for the significant risk factors associated with the number of CDI LabID events[5].

Effect	Parameter Estimate	p-value
Intercept	-7.8983	<0.0001
CDI Test Type		
NAAT vs. non-NAAT/EIA others	0.3850	<0.0001
EIA vs. non-NAAT/EIA others	0.1606	0.0013
CO Admission prevalence rate (continuous)*	0.3338	<0.0001
Facility Bed Size		
>245 vs. ≤100	0.2164	<0.0001
101-245 vs. ≤100	0.0935	0.0022
Medical School Affiliation		
Major teaching vs. Undergraduate/Non-Teaching	0.1870	<0.0001
Graduate vs. Undergraduate/Non-Teaching	0.0918	0.0038

* $\frac{\text{Number of CO CDI LabID events}}{\text{Number of admissions to the facility}} \times 100$

The risk model for CDI is as follows (in this model, x=1 if a given risk factor is present or x=0 if the risk factor is absent):

Number of predicted (expected) HO CDI LabID events =

exp [- 7.8983
+ 0.3850(CDI test type = NAAT)
+ 0.1606(CDI test type = EIA)
+ 0.3338(CO CDI prevalence rate)
+ 0.2164(bed size > 245)
+ 0.0935(bed size = 101-245 beds)
+ 0.1870(medical school affiliation = major)
+ 0.0918(medical school affiliation = graduate)] x CDI patient days

Suppose a facility has 90 beds and is considered to have an undergraduate (limited) medical school affiliation. The facility has a community-onset CDI prevalence rate of 0.19, had 6,500 CDI patient days for 2012 and uses NAAT to detect CDI infection. This facility observed 3 healthcare-onset CDI LabID events in 2012.

Number of predicted (expected) HO CDI LabID events =

exp [- 7.8983
+ 0.3850(1)
+ 0.1606(0)
+ 0.3338(0.19)
+ 0.2164(0)
+ 0.0935(0)
+ 0.1870(0)
+ 0.0918(0)] x 6,500 = 3.78 expected HO CDI LabID events

To calculate the CDI LabID SIR, divide the number of observed HO CDI LabID events by the number expected (from above). For example, 3 observed HO CDI LabID events / 3.78 expected HO CDI LabID events = 0.79.

[5] Example extracted from "Risk Adjustment for Healthcare Facility-Onset C. difficile and MRSA Bacteremia Laboratory-identified Event Reporting in NHSN" Dudeck MA, Weiner LM, Malpiedi PJ, et al. Published March 12, 2013. Available at: http://www.cdc.gov/nhsn/pdfs/mrsa-cdi/RiskAdjustment-MRSA-CDI.pdf

Calculation of Exact Confidence Interval of the SIR[6]:

Confidence intervals are frequently required in epidemiology, including in relation to standardized infection ratios (SIRs). The SIR compares the observed number of infections with the predicted number from the standard population. Several approximation methods are available when the number of observed infections is large. For 5 or less infections, these methods will be inadequate, and exact confidence limits are desirable.

In this report, 95% confidence intervals are reported. If confidence intervals are constructed for many separate analyses of repeated experiments, the proportion of intervals that contain the true value of the SIR will match the confidence level, in this case 95%.

Exact confidence limits for a SIR can be derived by setting limits for the numerator and assuming the expected number in the denominator to be a constant. The limits for '*a*' with 100(1-α) percent confidence are the iterative solutions $\underline{a}$ and $\overline{a}$. Computations for the iterative solutions $\underline{a}$ and $\overline{a}$ are below.

Fisher's Exact Test

Lower bound:

$$\sum_{k=0}^{a} \frac{e^{-\underline{a}}\underline{a}^{k}}{k!} = 1-\alpha/2$$

Upper bound:

$$\sum_{k=0}^{a} \frac{e^{-\overline{a}}\overline{a}^{k}}{k!} = 1-\alpha/2$$

Therefore, the exact lower and upper limits for SIR equal to "a/λ" would be $\frac{\underline{a}}{\lambda}$ and $\frac{\overline{a}}{\lambda}$, respectively.

a = the observed number of infections
λ = the expected number of infections

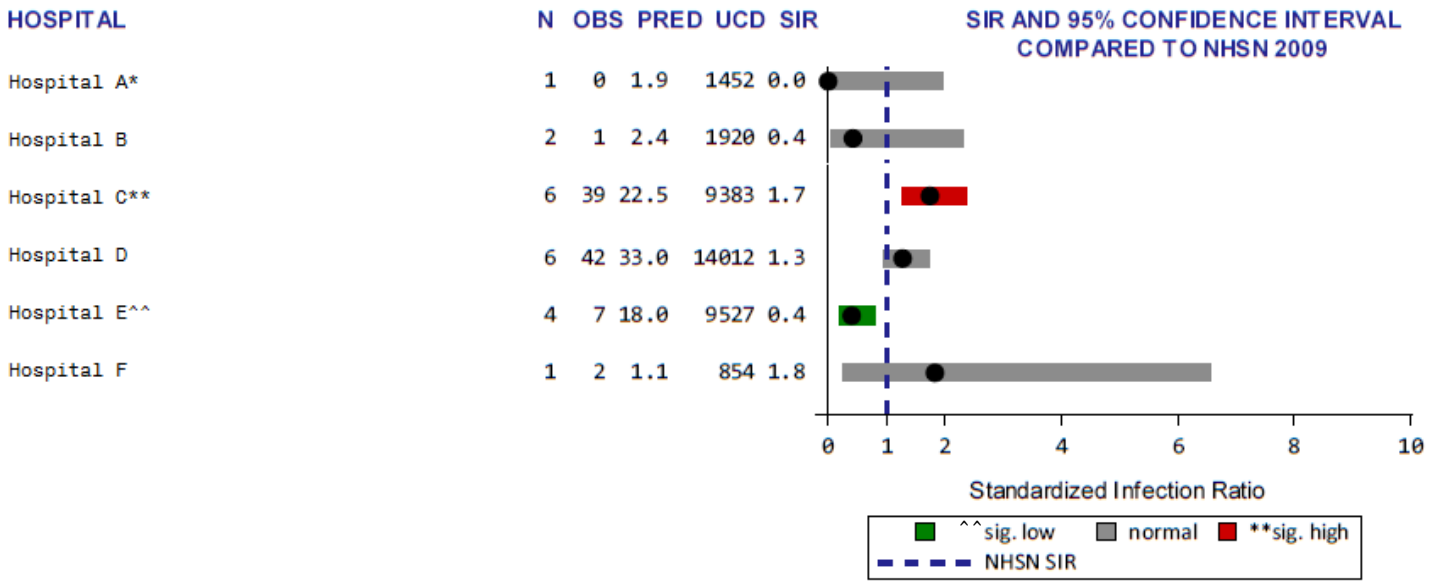
In this report, statistical analyses were performed using SAS version 9.3. Tables and figures were created using SAS version 9.3 and/or Microsoft Excel.

[6] Rothman KJ, Boice JD Jr: Epidemiologic analysis with a programmable calculator. NIH Pub No. 79-1649. Bethesda, MD: National Institutes of Health, 1979;31-32.

Facility-Specific Standardized Infection Ratios

Figure 2 demonstrates how to read hospital-specific standardized infection ratio figures.

Figure 2: How to Read Hospital-Specific Standardized Infection Ratio Figures



- Hospital A reported CAUTIs from one ICU type (N=1). The facility had zero CLABSIs during 2012 (OBS). Statistically, 1.9 CAUTIs were predicted (PRED) during that time, based on the number of urinary catheter-days (UCD) in Hospital A's ICU and the national NHSN rate for that type of ICU. The standardized infection ratio (SIR) is 0.0. This result was not significantly different from the NHSN baseline SIR, as the gray bar (95% confidence interval) crosses the dotted line. Although this hospital's SIR was not significantly lower than the national baseline, the asterisk (*) next to the hospital name indicates that this hospital had zero CAUTIs during the reporting period.

- Hospital B reported CAUTIs from two ICUs. This facility had one CAUTI during 2012, statistically, 2.4 CAUTIs were predicted during that time period. The SIR is 0.4 and is not significantly different from the NHSN baseline SIR because the gray bar (95% confidence interval) crosses the line indicating the NHSN SIR of 1.

- Hospital C reported CAUTIs from six ICUs and had 39 CAUTIs in 2012. Only 22.5 CAUTIs were predicted because on the number of urinary catheter-days and ICU types. Hospital C has a SIR of 1.7, the red bar representing the 95% confidence interval does not cross the NHSN baseline SIR of 1, indicating the SIR is significantly higher than the baseline SIR.

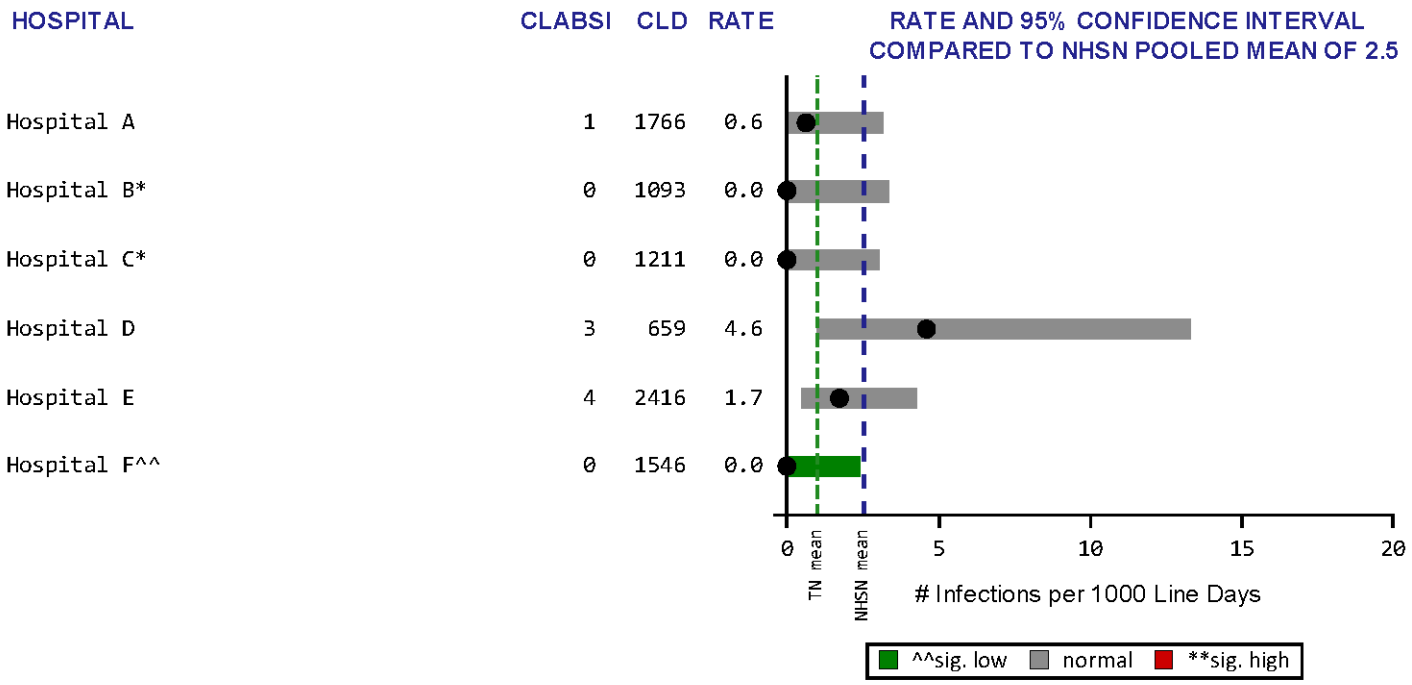
- Hospital D reported CAUTIs from six ICUs. This facility had 42 CAUTIs during 2012, statistically, 33 CAUTIs were predicted during that time period. The SIR is 1.3 and is not significantly different from the NHSN baseline SIR because the gray bar crosses the line indicating the NHSN SIR of 1.

- Hospital E reported CAUTIs from four ICUs. This facility reported seven CAUTIs during 2012, compared to the 18 infections that were predicted based on NHSN baseline data. The SIR is 0.4, meaning that the facility had 60% fewer CAUTIs than predicted. The bar representing the 95% confidence interval is green, indicating that the facility's SIR is significantly lower than the NHSN baseline SIR.

- Hospital F reported CAUTIs from one ICU. This facility had two CAUTIs during 2012, statistically, 1.1 CAUTIs were predicted during that time period. The SIR is 1.8 and is not significantly different from the NHSN baseline SIR because the gray bar (95% confidence interval) crosses the line indicating the NHSN SIR of 1.

Figure 3 demonstrates how the figures pertaining to facility-specific infection rates should be interpreted in this report.

Figure 3: How to Read Hospital-Specific Infection Rate Figures



Data Reported as of August 15, 2013
CLD = central line days
*** Significantly higher than NHSN pooled mean*
^^ Significantly lower than NHSN pooled mean
** Zero infections, but not statistically significant*
NA = rates are not shown for units with <50 central line days
NHSN pooled mean (2006-2008)=2.5; TN pooled mean (01/01/2012 - 12/31/2012)=1.0

- Hospital A had a CLABSI rate of 0.6 per 1,000 central line-days. This infection rate is not significantly different from the national NHSN pooled mean rate of 2.5 CLABSIs per 1,000 central line-days, signified by the gray bar (95% confidence interval) crossing the blue dotted line.

- Hospital B had zero CLABSIs during the reporting period, but the rate is not significantly lower than the national NHSN pooled mean rate. The hospital had 1,093 central line-days, and we cannot be certain the hospital would have experienced zero infections if they had more central line-days. The asterisk (*) next to the hospital name indicates that this hospital's ICU had zero infections during the reporting period.

- Hospital C had zero CLABSIs, but the rate is not significantly lower than the national rate. The asterisk (*) next to the hospital name indicates that this hospital's ICU had zero infections during the reporting period.

- Hospital D had a CLABSI rate of 4.6 per 1,000 central line-days, but the rate was not significantly different from the national NHSN pooled mean rate. The 95% confidence interval is very wide because there were relatively few central line-days during the reporting period.

- Hospital E had a CLABSI rate of 1.7 per 1,000 central line-days, but the rate was not significantly different from the national NHSN pooled mean because the gray bar crosses the blue dotted line.

- Hospital F had zero CLABSIs, and the rate was significantly lower than the national NHSN pooled mean rate, signified by a green bar (95% confidence interval) that is completely to the left of the blue dotted line.

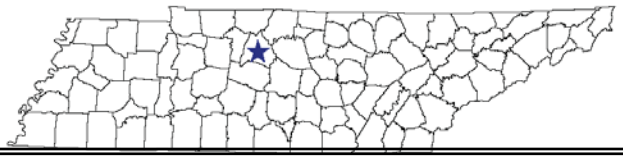
How to Read Facility-Specific Summary Pages

Figure 4: Example Facility-Specific Summary Page

Hospital X, City, County

Medical School Affiliation: Graduate teaching

Bed Size Category: 100-399 beds



Section 1: Facility information from the NHSN 2012 Annual Survey

Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	14	46.0	20,961	0.30	(0.17, 0.51)	0.53
	Neonatal ICU	0	0.7	397	N/A	N/A	0.54
CAUTI	Adult/Pediatric ICU	87	60.0	31,284	1.45	(1.16, 1.79)	1.45
SSI	Colon surgery	6	5.0	117	1.20	(0.44, 2.61)	0.94
	Abdominal hysterectomy	0	0.0	0	N/A	N/A	0.88

Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

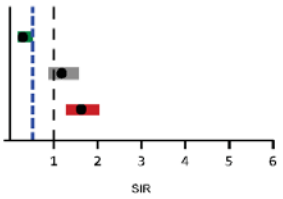
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Section 2: Facility-Specific 2012 Standardized Infection Ratios (SIRs) by HAI

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	3	14	46	20961	0.3
2011	2	51	43	20316	1.2
2010	3	78	48	21564	1.6



CLABSI - Neonatal ICU

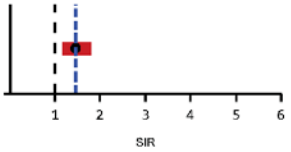
YR	N	OBS	PRED	DD	SIR
2012	1	0	0.7	397	N/A**
2011	1	0	0.9	523	N/A**
2010	1	0	0.9	415	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

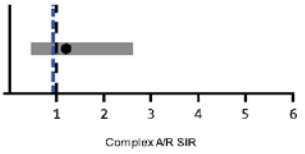
YR	N	OBS	PRED	DD	SIR
2012	3	87	60	31284	1.5



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	6	5	117	1.2



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0	0	N/A**

**Number of predicted infections <1; no SIR calculated

Data reported as of September 27, 2013

YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)

PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1

Not significantly different from NHSN SIR of 1

Significantly higher than NHSN SIR of 1

2012 TN SIR

NHSN SIR=1

Section 3: Facility-Specific Standardized Infection Ratio (SIR) Figures by HAI

Figure 4 is an example of a facility-specific summary page. Section 1 includes general information about the facility from the NHSN 2012 Annual Hospital Survey. Section 2 is a summary table which shows facility-specific standardized infection ratios (SIRs) for each type of infection the facility reported on during 2012. Section 3 consists of SIR plots for each type of infection the facility reported on during 2012; CLABSI figures include 2010 and 2011 data if the facility had eligible ICUs reporting during that period. If a facility does not have any ICUs eligible for CLABSI or CAUTI reporting requirements, this is noted at the beginning of section 3.

Figure 5: How to Read Facility-Specific SIR Summary Tables

Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	14	46.0	20,961	0.30	(0.17, 0.51)	0.53
	Neonatal ICU	0	0.7	397	N/A	N/A	0.54
CAUTI	Adult/Pediatric ICU	87	60.0	31,284	1.45	(1.16, 1.79)	1.45
SSI	Colon surgery	6	5.0	117	1.20	(0.44, 2.61)	0.94
	Abdominal hysterectomy	0	0.0	0	N/A	N/A	0.88

Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Figure 5 is an example of Section 2 from a facility-specific summary page, with the following interpretation:

This hospital had 14 CLABSIs in its adult and pediatric ICUs in 2012. Statistically, 46 CLABSIs were predicted based on the number of device days and the national NHSN rates for the types of ICUs. The SIR is 0.30, thus the number of infections observed was 70% fewer than predicted. The green highlighting of the SIR and 95% CI indicate that the facility's SIR is significantly lower than the NHSN baseline SIR. This hopsital had zero CLABSIs in its Neonatal ICUs in 2012 and there were 0.7 infections predicted based on the number of device days and the national NHSN rate for the type of ICU. The SIR is not calculated because the number of predicted infections is less than 1.

This hospital reported 114 CAUTIs in its adult and pediatric ICUs in 2012 and 106 infections were predicted. The SIR is 1.45, meaning the facility observed 45% more CAUTIs than predicted. The SIR and 95% CI are highlighted in red to indicate that this facility's SIR is significantly higher than the NHSN national baseline SIR.

Although this hospital did monitor SSIs following abdominal hysterectomies, the facility did not perform any abdominal hysterectomy procedures in 2012. The number of observed infections, predicted infections and procedures performed are all zero, and no SIR is shown because there were no predicted infections.

Figure 6: How to Read Facility-Specific SIR Figures

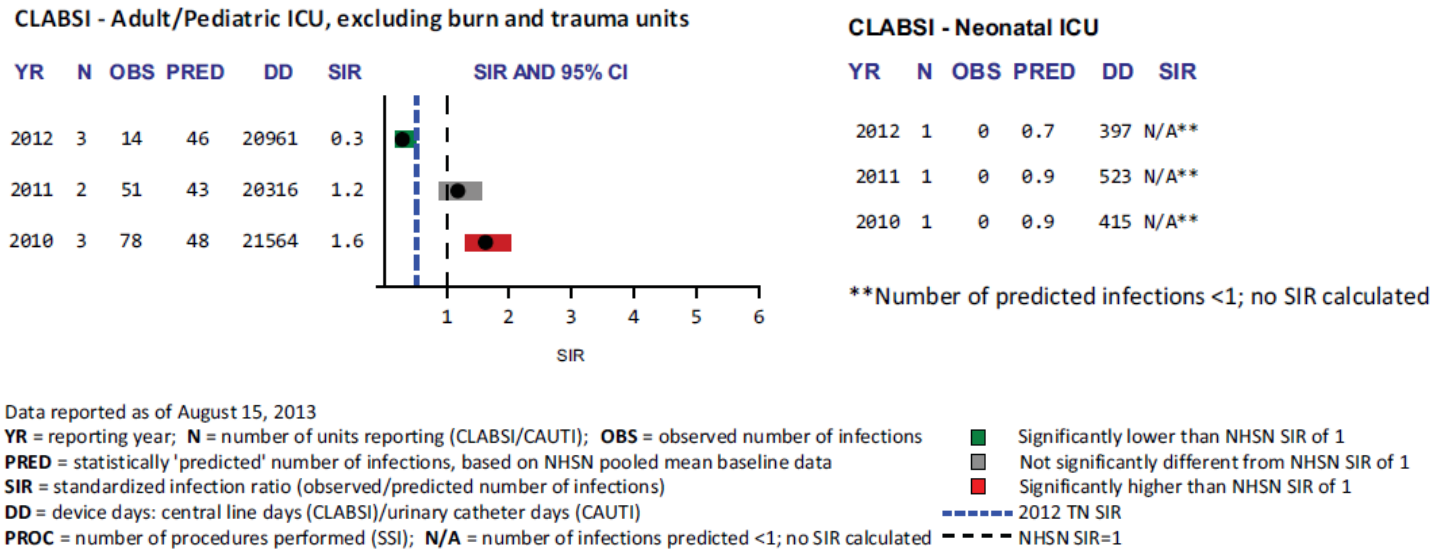


Figure 6 shows facility-specific SIR figures for CLABSI in adult and pediatric ICUs (excluding burn and trauma units) and Neonatal ICUs. In 2012, this facility observed 14 CLABSIs in its adult and pediatric ICUs with 46 infections predicted and a SIR of 0.3. This facility reported CLABSIs from 3 different ICUs, represented by "N" in the figure and reported a total of 20,961 device days (central line days) in 2012. The 2012 SIR is significantly lower than the NHSN baseline SIR of 1, so the bar representing the SIR 95% confidence interval is green.

The figure on the right shows CLABSI in neonatal ICUs, this facility did not observe any CLABSIs in its neonatal ICU in 2012 and had 0.7 predicted infections, because the number of predicted infections is less than one, the SIR is not calculated or plotted in the figure. This is noted below the figure. SIR figures for CAUTI and SSI can be interpreted in the same manner. Note that the number of procedures performed (PROC) is shown for SSIs, in place of device days and the number of units reporting, shown for CLABSI and CAUTI.

RESULTS

CLABSIs in Adult/Pediatric ICUs:

Total number of hospitals reporting in 2012: 93

SIRs by Quarter (Figure 7)

- From January–March 2010 to October–December 2012, the overall CLABSI SIR in Tennessee decreased from 0.91 to 0.54, with most of the reduction in the SIR occurring after the third quarter of 2009. The U.S. Department of Health and Human Services' *National Action Plan to Prevent Healthcare-Associated Infections* gives a five-year (2013) prevention target of SIR = 0.5.

Key Percentiles for Tennessee SIRs (Figure 8, Tables 4-6)

- Excluding burn and trauma ICUs, the overall SIR across all reporting adult and pediatric ICUs in Tennessee in 2012 was statistically significantly lower than the national SIR of 1 (SIR=0.53; 95% CI: 0.47, 0.61). This SIR indicates that the number of CLABSIs in ICUs was 47% lower than expected, compared to national NHSN 2006-8 data. The overall Tennessee SIR for 2012 was lower than the overall SIRs for 2010–2011.
- Including burn and trauma ICUs, the overall SIR across all reporting adult and pediatric ICUs in Tennessee in 2012 was statistically significantly lower than the national SIR of 1 (SIR=0.56; 95% CI: 0.50, 0.63). This SIR indicates that the number of CLABSIs in ICUs was 44% lower than expected, compared to national NHSN 2006-8 data. The overall Tennessee SIR for 2012 was lower than the overall SIRs for 2010–2011.
- In 2012, the median (50^{th} percentile) facility-specific SIR was 0.45, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had a SIR at or below 0.45.
- In 2012, Tennessee CLABSI SIRs were significantly lower than the 2006-8 baseline SIR in medical cardiac ICUs (SIR=0.41, 95% CI: 0.20, 0.73), medical ICUs in major teaching hospitals (SIR=0.42, 95% CI: 0.24, 0.68), medical-surgical ICUs in major teaching hospitals (SIR=0.56, 95% CI: 0.34, 0.85), medical-surgical ICUs in non-major teaching hospitals with >15 beds (SIR=0.72, 95% CI: 0.55, 0.93), medical-surgical ICUs in non-major teaching hospitals with ≤15 beds (SIR=0.54, 95% CI: 0.29, 0.90), neurosurgical ICUs (SIR=0.39, 95% CI: 0.20, 0.68), pediatric medical-surgical ICUs (SIR=0.17, 95% CI: 0.05, 0.39), pediatric surgical cardiothoracic ICUs (SIR=0.14, 95% CI: 0.02, 0.50), surgical cardiothoracic ICUs (SIR=0.62, 95% CI: 0.42, 0.88), surgical ICUs (SIR=0.33, 95% CI: 0.19, 0.53), and trauma ICUs (SIR=0.60, 95% CI: 0.41, 0.85). The CLABSI SIR was not significantly higher than the 2006-8 baseline SIR in any ICU type in Tennessee in 2012.

Rates by Unit Type (Figure 9, Table 7)

- CLABSI rates were highest in burn ICUs (7.0 infections per 1,000 central line days) and lowest among pediatric medical-surgical and pediatric surgical cardiothoracic ICUs (0.5 infections per 1,000 central line days).

- From 2011 to 2012, infection rates per 1,000 central line-days decreased among medical cardiac ICUs (1.7 to 0.8), surgical cardiothoracic ICUs (1.1 to 0.9), pediatric surgical cardiothoracic ICUs (7.8 to 0.5), major teaching medical-surgical ICUs (1.4 to 1.2), non-major teaching medical-surgical ICUs with ≤15 beds (1.3 to 0.8), non-major teaching medical-surgical ICUs with >15 beds (1.3 to 1.1), pediatric medical-surgical ICUs (1.4 to 0.5), pediatric medical ICUs (3.1 to 2.6), surgical ICUs (1.3 to 0.8) and trauma ICUs (2.7 to 2.2).

Device Utilization by Unit Type (Figure 10)

- DU ratios in Tennessee in 2012 were higher than national 2006-8 ratios among burn ICUs, medical cardiac ICUs, pediatric surgical cardiothoracic ICUs, non-major teaching medical-surgical ICUs with >15 beds, pediatric medical ICUs, and neurological ICUs.
- In both 2011 and 2012, DU ratios in Tennessee were highest among pediatric surgical cardiothoracic ICUs and pediatric medical ICUs.

Microorganisms Associated with CLABSIs in Adult and Pediatric ICUs (Figure 11, Table 8)

- The four most common pathogens among total positive isolates were coagulase-negative *Staphylococcus* species (25.2%), *Candida* species and other yeasts (17.3%), *Enterococcus* species (14.7%), and *Staphylococcus aureus* (9.0%). Methicillin-Resistant *S. aureus* (MRSA) accounted for 6.7% and vancomycin-resistant *Enterococcus* (VRE) for 5.3% of total positive isolates.

Facility-Specific CLABSI SIRs (Figure 12)

- One CLABSI SIR that accounts for all reporting adult/pediatric ICUs in each facility is displayed in Figure 12 for facilities with at least 1 predicted infection. The bar representing the confidence interval is green if the CLABSI SIR was significantly lower than the national SIR of 1 for 2006-8, and red if the CLABSI SIR was significantly higher than 1. Some hospitals reported zero CLABSIs (indicated with an asterisk), although the facility's SIR may not be statistically significant due to a relatively small number of central line-days.

Facility-Specific CLABSI Rates in Adult and Pediatric ICUs (Figures 13-25)

- Facility-specific CLABSI rates are displayed by type of ICU. The bar representing the confidence interval is green if the CLABSI rate was significantly lower than the national NHSN pooled mean rate for 2006-8 and red if the CLABSI rate was significantly higher than the national pooled mean rate. Some hospitals reported zero CLABSIs in specific ICUs, although the rate may not be statistically significant due to small numbers of central line-days. The following numbers and percentages of ICUs reported zero infections in 2012 (facilities with <50 line-days excluded):
    - 1 of 8 medical cardiac ICUs – 13%
    - 2 of 5 major teaching medical ICUs – 40%
    - 11 of 22 non-major teaching medical ICUs – 50%
    - 0 of 6 major teaching medical-surgical ICUs – 0%
    - 26 of 37 non-major teaching medical-surgical ICUs with ≤15 beds – 70%
    - 5 of 19 non-major teaching medical-surgical ICUs with >15 beds – 26%
    - 0 of 1 neurological ICUs – 0%
    - 5 of 9 neurosurgical ICUs – 56%
    - 0 of 1 pediatric medical ICUs – 0%
    - 2 of 6 pediatric medical-surgical ICUs – 33%
    - 0 of 2 pediatric surgical cardiothoracic ICUs – 0%
    - 5 of 15 surgical cardiothoracic ICUs – 33%
    - 3 of 11 surgical ICUs – 27%

CLABSIs in Neonatal ICUs:

Total number of neonatal ICUs (NICUs) reporting in 2012: 24

CLABSI SIRs by Quarter (Figure 26)

- From January-March 2010 to October–December 2012, the overall CLABSI SIR in Tennessee NICUs fluctuated between a high of 0.96 and a low of 0.45. For the first three quarters of 2012, Tennessee NICUs reached the U.S. Department of Health and Human Services' *National Action Plan to Prevent Healthcare-Associated Infections* five-year (2013) prevention target of SIR = 0.5.

Key Percentiles for Tennessee SIRs (Tables 9–10)

- The overall SIR across all reporting NICUs in Tennessee in 2012 was statistically significantly lower than the national SIR of 1 (SIR=0.54; 95% CI: 0.41, 0.70). The overall Tennessee SIR for 2012 was lower than the overall SIRs for 2010–2011.
- In 2012, the median (50th percentile) facility-specific SIR was 0.46, indicating that half of all reporting Tennessee

hospitals with at least1 predicted infection had a SIR at or below 0.46.
- In 2012, the Tennessee CLABSI SIR in level III NICUs was significantly lower than 2006-8 national SIR of 1 (SIR=0.45; 95% CI: 0.30, 0.64). The Tennessee CLABSI SIR in level II/III NICUs was not significantly different from 1 (SIR=0.70; 95% CI: 0.46, 1.02).

CLABSI Rates and SIRs by Unit Type and Birth Weight Category (Figures 27-28, Table 11)

- CLABSI rates per 1,000 line-days were highest among babies with birth weight ≤750 g in level II/III NICUs (3.8). Rates were lowest among babies with birth weight >2500 g in level II/III NICUs (0.0).
- CLABSI rates per 1,000 line-days in 2012 were statistically significantly lower than national 2006–2008 rates among babies with birth weight ≤750 g in level III NICUs (SIR=0.41; 95% CI: 0.19, 0.78), birth weight 751-1000 g in level III NICUs (SIR=0.26; 95% CI: 0.07, 0.67), 1501-2500 g in level III NICUs (SIR=0.35; 95% CI: 0.10, 0.90) and >2500 g in level II/III NICUs (SIR=0.00; 95% CI: 0.00, 0.93).
- CLABSI rates increased from 2011 to 2012 among babies with birth weight 1001-1500 g, 1501-2500 g and >2500 g in level III NICUs and among babies with birth weight <750 g, 751-1000 g, and 1501-2500 g in level II/III NICUs.

Device Utilization by Unit Type and Birth Weight Category (Figures 29-30)

- In level III NICUs in Tennessee, 2012 device utilization (DU) ratios for central lines were higher than national 2006-8 ratios in all birth weight categories. DU ratios were slightly higher than or very similar to Tennessee 2011 ratios.
- In level II/III NICUs in Tennessee, 2012 DU ratios for central lines were higher than national 2006-8 ratios in all birth weight categories except >2500 g. DU ratios were slightly lower than or very similar to Tennessee 2011 ratios.

Microorganisms Associated with CLABSIs in Neonatal ICUs (Figure 31, Table 12)

- The most common microorganisms identified in NICU-related CLABSIs were coagulase-negative *Staphylococcus* (25.8%), *Staphylococcus aureus* (16.7%), and *Enterococcus* species (15.2%). Methicillin-Resistant *S. aureus* (MRSA) accounted for 9.1% of organisms identified. No vancomycin-resistant *Enterococcus* (VRE) microorganisms were identified in NICU-related CLABSIs.

Facility-Specific SIRs (Figure 32)

- One NICU CLABSI SIR per facility is displayed in Figure 32 for facilities with at least 1 predicted NICU CLABSI in 2012. The bar representing the confidence interval is green if the CLABSI SIR was significantly lower than the national 2006-8 SIR of 1, and red if the SIR was significantly higher than 1. Some NICUs reported zero CLABSIs (indicated with an asterisk), although the SIR may not be statistically significant due to a relatively small number of central line-days.

CLABSIs in Long-Term Acute Care (LTAC) Facilities:

Total number of LTACs participating in this reporting period: 9

SIRs by Quarter (Figure 33)

- From July–September 2010 to October–December 2012, the overall CLABSI SIR for Tennessee LTACs decreased from 1.02 to 0.49, with most of the reduction occurring after the second quarter of 2011. In the last three quarters of 2012, the overall CLABSI SIR was at or below the U.S. Department of Health and Human Services' five-year (2013) prevention target of SIR = 0.5.

Key Percentiles for Tennessee SIRs (Table 13)

- The overall CLABSI SIR across all reporting LTACs in Tennessee in 2012 was significantly lower than the national SIR of 1 (SIR=0.61; 95% CI: 0.47, 0.77). The overall CLABSI SIR across all reporting LTACs in Tennessee SIR for 2012 was lower than the overall SIR for 2011.
- In 2012, the median facility-specific SIR was 0.57, indicating that half of all reporting Tennessee LTACs with at least 1 predicted infection had a SIR at or below 0.57.
- Only one type of LTAC location (LTAC ward) was present in Tennessee during the reporting period, so the unit-specific SIR and key percentiles are the same as the aggregate Tennessee values.

Rates by Unit Type (Table 14)

- One type of LTAC location (LTAC ward) was present in Tennessee during the reporting period. The pooled mean CLABSI rate in Tennessee LTAC wards in 2012 was significantly lower than the NHSN 2006-8 pooled mean rate (1.1 vs. 1.7 CLABSIs per 1,000 line-days).

Microorganisms Associated with CLABSIs in LTACs (Figure 34, Table 15)

- The most common pathogens among total positive isolates were coagulase-negative *Staphylococcus* species (25.4%), *Enterococcus* species (23.9%), *Staphylococcus aureus* (14.1%), and *Candida* species and other yeasts (11.3%). Vancomycin-resistant *Enterococcus* (VRE) accounted for 11.3% of total positive isolates, and Methicillin-Resistant *S. aureus* (MRSA) accounted for 12.7%.

CAUTIs in Adult/Pediatric ICUs:

Total number of hospitals reporting in 2012: 93

SIRs by Quarter (Figure 35)

- From January-March 2012 to October–December 2012, the overall CAUTI SIR in Tennessee adult and pediatric ICUs stayed relatively steady between 1.37 and 1.55. Throughout 2012, the overall CAUTI SIR was significantly higher than the national SIR of 1.

Key Percentiles for Tennessee SIRs (Figure 36, Tables 16-17)

- The overall CAUTI SIR across all reporting adult and pediatric ICUs in Tennessee in 2012 was statistically significantly higher than the national SIR of 1 (SIR=1.45; 95% CI: 1.36, 1.54). This SIR indicates that the number of CLABSIs in ICUs was 45% higher than expected, compared to national NHSN 2009 data.
- In 2012, the median (50th percentile) facility-specific SIR was 1.16, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had a SIR at or below 1.16.
- In 2012, Tennessee CAUTI SIRs were significantly higher than the 2009 baseline SIR in burn ICUs (SIR=2.15, 95% CI: 1.43, 3.11), medical cardiac ICUs (SIR=1.69, 95% CI: 1.29, 2.18), major teaching medical ICUs (SIR=1.35, 95% CI: 1.03, 1.73), non-major teaching medical-surgical ICUs with >15 beds (SIR=1.76, 95% CI: 1.50, 2.05), neurosurgical ICUs (SIR=1.33, 95% CI: 1.11, 1.59), surgical ICUs (SIR=1.28, 95% CI: 1.04, 1.57), and trauma ICUs (SIR=2.46, 95% CI: 2.12, 2.84). The CAUTI SIR was not significantly lower than the 2009 baseline SIR in any ICU type in Tennessee in 2012.

Rates by Unit Type (Table 18, Figure 37)

- CAUTI rates were the higher among burn and trauma ICUs (9.8 infections per 1,000 catheter days) and the lowest among surgical cardiothoracic ICUs (1.5 infections per 1,000 catheter days) and non-major teaching medical-surgical ICUs with ≤15 beds (1.3 infections per 1,000 catheter days).

Device Utilization by Unit Type (Figure 38)

- DU ratios in Tennessee in 2012 were higher than national 2009 ratios among burn ICUs, medical cardiac ICUs, non-major teaching medical-surgical ICUs with >15 beds, and pediatric medical ICUs.
- In 2012, DU ratios in Tennessee were highest among burn and trauma ICUs.

Microorganisms Associated with CAUTIs in Adult and Pediatric ICUs (Figure 39, Table 19)

- The most common pathogens among total positive isolates were *Candida* species and other yeasts (27.3%), *Escherichia* species (22.9%), and *Enterococcus* species (13.4%). Vancomycin-resistant *Enterococcus* (VRE) accounted for 1.5% of total positive isolates, and Methicillin-Resistant *S. aureus* (MRSA) accounted for 0.6%.

Facility-Specific SIRs (Figure 40)

- One CAUTI SIR that accounts for all reporting adult/pediatric ICUs in each facility is displayed in Figure 40 for facilities with at least 1 predicted infection. The bar representing the confidence interval is green if the CLABSI SIR was significantly lower than the national SIR of 1 for 2009 and red if the CAUTI SIR was significantly higher than 1. Some hospitals reported zero CAUTIs (indicated with an asterisk), although the facility's SIR may not be statistically significant due to a relatively small number of urinary catheter-days.

Facility-Specific CAUTI Rates in Adult and Pediatric ICUs (Figures 41-55)

- Facility-specific CAUTI rates are displayed by type of ICU. The bar representing the confidence interval is green if the CAUTI rate was significantly lower than the national NHSN pooled mean rate for 2009 and red if the CAUTI rate was significantly higher than the national pooled mean rate. Some hospitals reported zero CAUTIs in specific ICUs, although the rate may not be statistically significant due to small numbers of urinary catheter-days. The following numbers and percentages of ICUs reported zero infections in 2012 (facilities with <50 urinary catheter-days excluded):
    - 0 of 2 burn ICUs – 0%
    - 0 of 8 medical cardiac ICUs – 0%
    - 2 of 6 major teaching medical ICUs – 33%
    - 11 of 22 non-major teaching medical ICUs – 50%
    - 0 of 6 major teaching medical-surgical ICUs – 0%
    - 13 of 39 non-major teaching medical-surgical ICUs with ≤15 beds – 33%
    - 2 of 19 non-major teaching medical-surgical ICUs with >15 beds – 11%
    - 0 of 1 neurological ICUs – 0%
    - 0 of 9 neurosurgical ICUs – 0%
    - 0 of 1 pediatric medical ICUs – 0%
    - 1 of 6 pediatric medical-surgical ICUs – 17%
    - 0 of 2 pediatric surgical cardiothoracic ICUs – 0%
    - 3 of 15 surgical cardiothoracic ICUs – 20%
    - 0 of 11 surgical ICUs – 0%
    - 0 of 6 trauma ICUs – 0%

SSIs Related to CBGB and CBGC Procedures:

Total number of facilities reporting in this period: 26

SIRs by Quarter (Figure 56)

- From January-March 2010 to October-December 2012, there was no major overall change in the combined All SSI SIR or the Complex A/R SIR for SSIs related to CBGB/C procedures in Tennessee.

Key Percentiles for Tennessee SIRs (Table 20)

- The All SSI SIR for SSIs related to CBGB/C procedures in Tennessee in 2012 was statistically significantly lower than the national SIR of 1 (SIR=0.78; 95% CI: 0.65, 0.94). The All SSI SIR for CBGB/C in 2012 was higher than the SIR for 2011.
- In 2012, the median All SSI SIR for CBGB/C procedures was 0.66, indicating that half of reporting facilities with at least 1 predicted infection had an All SSI SIR at or below 0.66.
- The Complex A/R SIR for SSIs related to CBGB/C procedures in Tennessee in 2012 was significantly lower than the national SIR of 1 (SIR=0.76; 95% CI: 0.58, 0.97). The Complex A/R SIR for CBGB/C in 2012 was lower than the SIR for 2011 (SIR=0.91; 95% CI: 0.72, 1.13).
- In 2012, the median Complex A/R SIR for CBGB/C procedures was 0.71, indicating that half of reporting facilities with at least 1 predicted infection had an All SSI SIR at or below 0.71.

Rates, Infection Sites, and Detection (Figure 57-58, Table 21)

- In 2012, 142 SSIs were reported among 6,999 CBGB/C procedures in Tennessee, for a crude rate of 2.03 infections per 100 operations.
- Overall, SSIs related to CBGB/B procedures were most often superficial primary (34%), deep primary (32%) and organ space (18%). SSIs related to CBGB/B procedures were least often deep secondary infections (4%).
- SSIs related to CBGB/C procedures were most often identified upon readmission (72%).

Microorganisms associated with SSIs following CBGB/C Procedures (Figure 59, Table 22)

- The most common pathogens among 167 total positive isolates for SSIs related to CBGB/C procedures were *Staphylococcus aureus* (35.9%) and coagulase-negative *Staphylococcus* species (13.2%). Methicillin-Resistant *S. aureus* (MRSA) accounted for 23.4% and vancomycin-resistant *Enterococcus* (VRE) for 1.8% of total positive isolates.

SSIs Related to COLO procedures:

Total number of facilities reporting in this period: 87

SIRs by Quarter (Figure 60)

- From January-March 2012 to October-December 2012, there was no major overall change in the combined All SSI SIR or the Complex A/R SIR for SSIs related to COLO procedures in Tennessee.

Key percentiles for Tennessee SIRs (Table 23)

- The All SSI SIR for SSIs related to COLO procedures in Tennessee from July-December 2012 was statistically significantly lower than the national SIR of 1 (SIR=0.78; 95% CI: 0.67, 0.91), the All SSI SIR for SSIs related to COLO procedures was higher from January-June 2012, but not significantly different from the 2006-8 SIR of 1 (SIR=0.91; 95% CI: 0.79, 1.05).
- From July-December 2012, the median All SSI SIR for COLO procedures was 0.65, indicating that half of reporting facilities with at least 1 predicted infection had an All SSI SIR at or below 0.65.
- The Complex A/R SIR for SSIs related to COLO procedures in Tennessee from July-December 2012 was not significantly different from the 2006-8 national SIR of 1 (SIR=0.84; 95% CI: 0.67, 1.04).
- From July-December 2012, the median Complex A/R SIR for COLO procedures was 0.63, indicating that half of reporting facilities with at least 1 predicted infection had a Complex A/R SIR at or below 0.63.

Rates, Infection Sites, and Detection (Figures 61-62, Table 24)

- From July-December 2012, 161 SSIs were reported among 3,223 COLO procedures in Tennessee, for a crude rate of 5.00 infections per 100 operations.

- Overall, SSIs related to COLO procedures were superficial primary (42%), organ space (35%) and deep primary infections (23%).
- SSIs related to CBGB/C procedures were most often identified during admission (46%).

Microorganisms associated with SSIs following COLO Procedures (Figure 63, Table 25)

- The most common pathogens among 410 total positive isolates for SSIs related to COLO procedures were *Escherichia* species (22.0%), *Enterococcus* species (18.3%), and *Staphylococcus aureus* (9.8%). Methicillin-Resistant *S. aureus* (MRSA) accounted for 6.8% and vancomycin-resistant *Enterococcus* (VRE) for 4.4% of total positive isolates.

Facility-Specific SIRs (Figure 64)

- The Complex A/R SIR for SSIs related to COLO procedures that accounts for all qualifying colon procedures performed at a given facility is displayed in Figure 64 for facilities with at least 1 predicted infection in 2012. The bar representing the confidence interval is green if the Complex A/R SIR for SSIs related to COLO procedures was significantly lower than the national SIR of 1 for 2009 and red if the SIR was significantly higher than 1. Some hospitals reported zero SSIs (indicated with an asterisk), although the facility's SIR may not be statistically significant due to a relatively small number of procedures performed.

SSIs Related to HYST procedures:

Total number of facilities reporting in this period: 84

SIRs by Quarter (Figure 65)

- From January-March 2012 to October-December 2012, there was a decrease in both the combined All SSI SIR (0.91 to 0.58) and the Complex A/R SIR (1.19 to 0.65) for SSIs related to HYST procedures in Tennessee.

Key percentiles for Tennessee SIRs (Table 26)

- The All SSI SIR for SSIs related to HYST procedures in Tennessee from July-December 2012 was statistically significantly lower than the national SIR of 1 (SIR=0.57; 95% CI: 0.43, 0.74).
- From July-December 2012, the median All SSI SIR for HYST procedures was 0.46, indicating that half of reporting facilities with at least 1 predicted infection had an All SSI SIR at or below 0.46.
- The Complex A/R SIR for SSIs related to HYST procedures in Tennessee from July-December 2012 was not significantly different from the 2006-8 national SIR of 1 (SIR=0.68; 95% CI: 0.43, 1.02).
- From July-December 2012, the median Complex A/R SIR for HYST procedures was 0.77, indicating that half of reporting facilities with at least 1 predicted infection had a Complex A/R SIR at or below 0.63.

Rates, Infection Sites, and Detection (Figures 66-67, Table 27)

- From July-December 2012, 55 SSIs were reported among 4,442 HYST procedures in Tennessee, for a crude rate of 1.24infections per 100 operations.
- Overall, SSIs related to HYST procedures were superficial primary (40%), organ space (38%) and deep primary infections (22%).
- SSIs related to CBGB/C procedures were most often identified upon readmission (65%).

Microorganisms associated with SSIs following HYST Procedures (Figure 68, Table 28)

- The most common pathogens among 130 total positive isolates for SSIs related to HYST procedures were *Staphylococcus aureus* (15.4%), and *Escherichia* species (14.6%). Methicillin-Resistant *S. aureus* (MRSA) accounted for 7.7% of total positive isolates.

Facility-Specific SIRs (Figure 69)

- The Complex A/R SIR for SSIs related to HYST procedures that accounts for all qualifying abdominal hysterectomies performed at a given facility is displayed in Figure 69 for facilities with at least 1 predicted infection in 2012. The bar representing the confidence interval is green if the Complex A/R SIR for SSIs related to HYST procedures was significantly lower than the national SIR of 1 for 2009 and red if the SIR was significantly higher than 1. Some hospitals reported zero SSIs (indicated with an asterisk), although the facility's SIR may not be statistically significant due to a relatively small number of procedures performed.

MRSA LabID Events in Acute Care Hospitals:

Total number of facilities reporting in this period: 109*

*Acute care hospitals with an average daily census less than 25 began reporting LabID events in July 2012

SIRs by Quarter (Figure 70)

- From January-March 2012 to October-December 2012, the overall MRSA LabID SIR in acute care hospitals in Tennessee was between 1.31 and 1.60, significantly higher than the national baseline, and higher than the U.S. Department of Health and Human Services' prevention target of SIR = 0.75.

Key percentiles for Tennessee SIRs (Table 29)

- The overall MRSA LabID SIR for acute care hospitals in Tennessee from July-December 2012 was statistically significantly higher than the national SIR of 1 (SIR=1.46; 95% CI: 1.27, 1.67).
- From July-December 2012, the median MRSA LabID SIR for acute care hospitals was 1.38, indicating that half of reporting facilities with at least 1 predicted infection had a MRSA LabID SIR at or below 1.38.

Healthcare Facility-Onset and Community-Onset MRSA LabID Rates (Figure 71, Table 30)

- From July-September 2010 to October-December 2012 the incidence of healthcare facility-onset MRSA LabID events has fluctuated between 0.88 and 1.38 events per 10,000 patient-days, with a slight downward trend since January-March 2011. The prevalence of community-onset MRSA LabID events was between 1.42 and 1.84 events per 1,000 admissions from July-September 2010 to October-December 2012.

MRSA LabID Events in Long Term Acute Care (LTAC) Facilities:

Total number of facilities reporting in this period: 9

Healthcare Facility-Onset and Community-Onset MRSA LabID Rates (Table 31, Figure 72)

- From July-September 2010 to October-December 2012 the incidence of healthcare facility-onset MRSA LabID events in LTAC facilities has increased from 1.23 to 4.50 events per 10,000 patient-days, with a particularly sharp increase between July-September 2011 and October-December 2011. The prevalence of community-onset MRSA LabID events in LTAC facilities was between 0 and 1.22 events per 1,000 admissions from July-September 2010 to October-December 2012.

CDI LabID Events in Acute Care Hospitals:

Total number of facilities reporting in this period: 109*

*Acute care hospitals with an average daily census less than 25 began reporting LabID events in July 2012

SIRs by Quarter (Figure 73)

- From January-March 2012 to October-December 2012, the overall CDI LabID SIR in acute care hospitals in Tennessee was between 0.72 and 0.82, slightly above the U.S. Department of Health and Human Services' prevention target of SIR = 0.70.

Key percentiles for Tennessee SIRs (Table 32)

- The overall CDI LabID SIR for acute care hospitals in Tennessee from July-December 2012 was statistically significantly lower than the national SIR of 1 (SIR=0.78; 95% CI: 0.73, 0.82).
- From July-December 2012, the median CDI LabID SIR for acute care hospitals was 0.63, indicating that half of reporting facilities with at least 1 predicted infection had a CDI LabID SIR at or below 0.63.

Healthcare Facility-Onset and Community-Onset CDI LabID Rates (Figure 74, Table 33)

- From July-September 2010 to October-December 2012 the incidence of healthcare facility-onset CDI LabID events has increased from 4.5 to 5.2 events per 10,000 patient-days, with a peak of 5.8 events per 10,000 patient-days in July-September 2012. The prevalence of community-onset CDI LabID events increased from 1.9 to 2.7 events per 1,000 admissions from July-September 2010 to October-December 2012. There was no significant change in the prevalence of community-onset healthcare facility-associated CDI LabID events from July-September 2010 to October-December 2012.

CDI LabID Events in Long Term Acute Care (LTAC) Facilities:

Total number of facilities reporting in this period: 9

Healthcare Facility-Onset and Community-Onset CDI LabID Rates (Table 34, Figure 75)

- From July-December 2010 to July-December 2012 the incidence of healthcare facility-onset CDI LabID events has increased from 8.4 to 14.5 events per 10,000 patients. The prevalence of community-onset CDI LabID events was between 2.0 and 4.2 events per 1,000 admissions from July-December 2010 to July-December 2012. There was no significant change in the prevalence of community-onset healthcare facility-associated CDI LabID events in LTAC facilities from July-December 2010 to July-December 2012.

CLABSI FIGURES AND TABLES

Adult and Pediatric Critical Care Units

Figure 7: Standardized Infection Ratios (SIR) for Central Line-Associated Bloodstream Infections (CLABSIs) for Adult and Pediatric Intensive Care Units (ICUs) by Quarter, Excluding Burn and Trauma ICUs, Tennessee, 01/01/2008–12/31/2012 [Reference standard: National Healthcare Safety Network (NHSN), 2006-8]

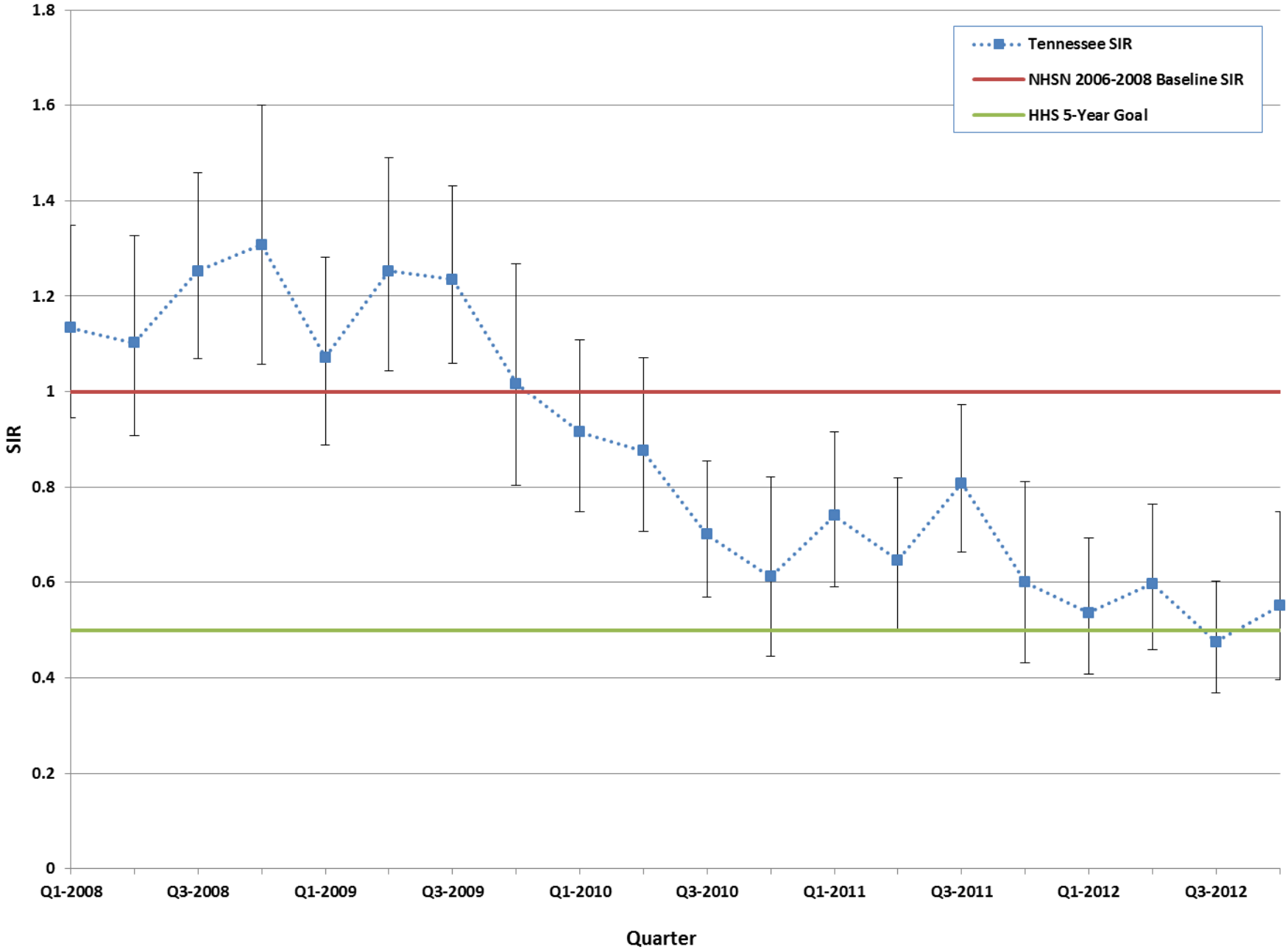


Table 4: Key Percentiles for Facility-Specific Central Line-Associated Bloodstream Infection (CLABSI) Standardized Infection Ratios (SIRs) in Adult and Pediatric Intensive Care Units (ICUs) by Reporting Year, Excluding Burn and Trauma ICUs, Tennessee, 01/01/2010 - 12/31/2012

			SIR, 95% CONFIDENCE INTERVAL, AND KEY PERCENTILES							
STATE	YEAR	No.	SIR	LOWER LIMIT	UPPER LIMIT	10%	25%	50%	75%	90%
Tennessee	2012	93	0.53	0.47	0.61	0.00	0.18	0.45	0.82	1.39
	2011	93	0.72	0.64	0.80	0.00	0.35	0.63	1.08	1.84
	2010	83	0.79	0.70	0.87	0.27	0.42	0.60	1.02	1.99

Data reported as of September 27, 2013
No. = number of facilities; SIR = standardized infection ratio (observed/predicted number of CLABSI)
Key percentiles include facilities with at least one predicted infection
Red highlighting indicates SIR for reporting period is significantly higher than national 2006-2008 SIR of 1.0
Green highlighting indicates SIR for reporting period is significantly lower than national 2006-2008 SIR of 1.0

Table 5: Key Percentiles for Facility-Specific Central Line-Associated Bloodstream Infection (CLABSI) Standardized Infection Ratios (SIRs) in Adult and Pediatric Intensive Care Units (ICUs) by Reporting Year, Including Burn and Trauma Units, Tennessee, 01/01/2010 - 12/31/2012

			SIR, 95% CONFIDENCE INTERVAL, AND KEY PERCENTILES							
STATE	YEAR	No.	SIR	LOWER LIMIT	UPPER LIMIT	10%	25%	50%	75%	90%
Tennessee	2012	93	0.56	0.50	0.63	0.00	0.18	0.45	0.84	1.39
	2011	93	0.73	0.66	0.81	0.00	0.36	0.63	1.08	1.77
	2010	83	0.82	0.74	0.91	0.27	0.41	0.66	1.02	1.83

Data reported as of September 27, 2013
Includes burn and trauma ICU data since July 2010
No. = number of facilities; SIR = standardized infection ratio (observed/predicted number of CLABSI)
Key percentiles include facilities with at least one predicted infection
Red highlighting indicates SIR for reporting period is significantly higher than national 2006-2008 SIR of 1.0
Green highlighting indicates SIR for reporting period is significantly lower than national 2006-2008 SIR of 1.0

Figure 8: Standardized Infection Ratios (SIRs) for Central Line-Associated Bloodstream Infections (CLABSIs) by Intensive Care Unit (ICU) Type, Including Burn and Trauma ICUs, Tennessee, 2011 and 2012 [Reference standard: National Healthcare Safety Network (NHSN), 2006-8]

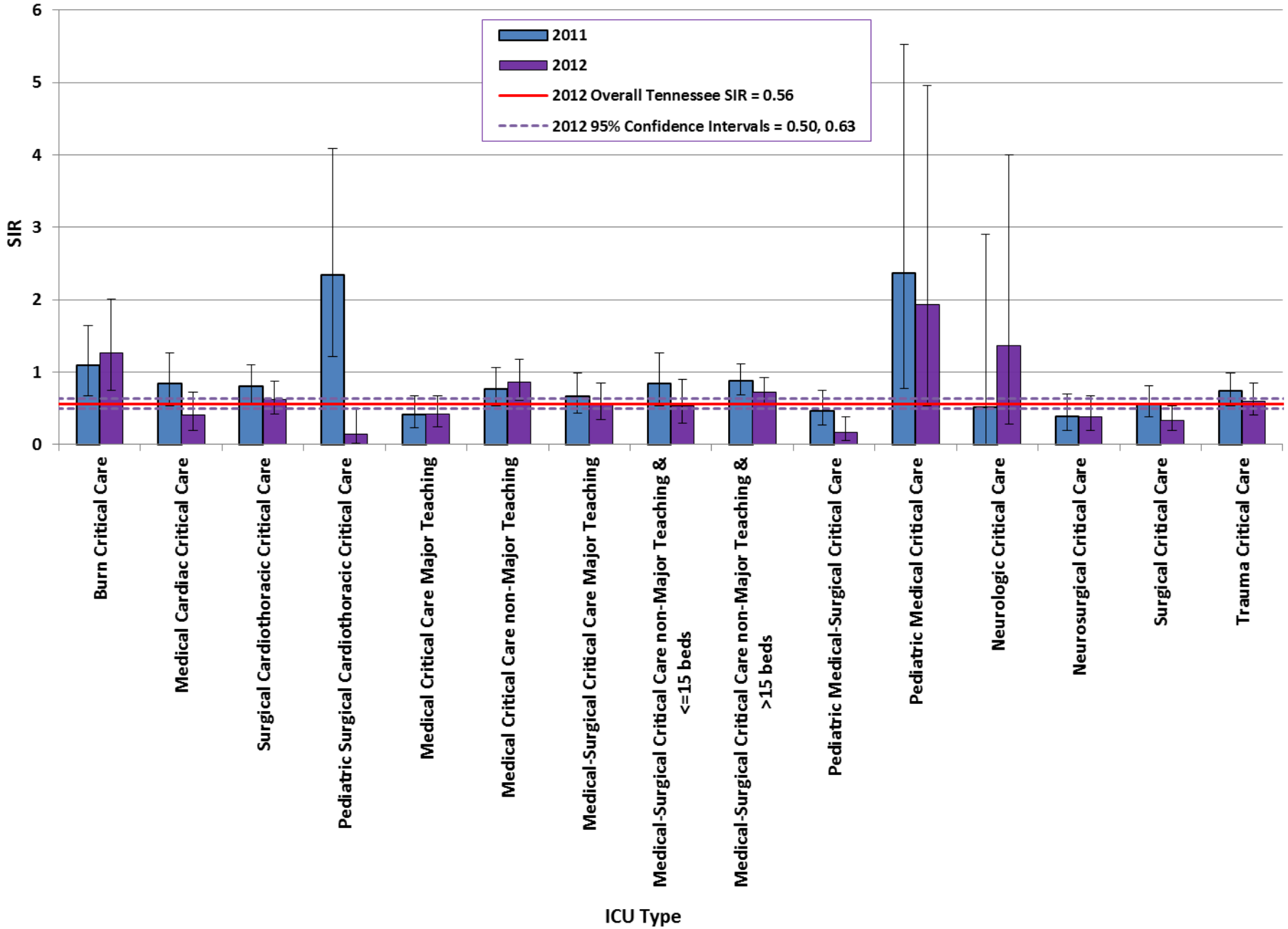


Table 6: Key Percentiles for Unit-Specific Central Line-Associated Bloodstream Infection (CLABSI) Standardized Infection Ratios (SIRs) by Type of Intensive Care Unit (ICU) and Reporting Year, Tennessee, 01/01/2010 - 12/31/2012

			SIR, 95% CONFIDENCE INTERVAL, AND KEY PERCENTILES							
ICU TYPE	YEAR	No.	SIR	LOWER LIMIT	UPPER LIMIT	10%	25%	50%	75%	90%
Burn Critical Care	2012	2	1.27	0.75	2.01	NA	NA	NA	NA	NA
	2011	2	1.09	0.68	1.65	NA	NA	NA	NA	NA
	2010	2	1.91	1.17	2.96	NA	NA	NA	NA	NA
Medical Cardiac Critical Care	2012	8	0.41	0.20	0.73	0	0.31	0.39	0.6	1.54
	2011	8	0.85	0.54	1.27	0	0.3	0.73	1.14	1.71
	2010	8	0.65	0.38	1.02	0	0	0.36	1.06	2.3
Medical Critical Care Major Teaching	2012	6	0.42	0.24	0.68	0	0	0.21	0.63	1.01
	2011	4	0.41	0.23	0.68	NA	NA	NA	NA	NA
	2010	4	1.20	0.83	1.66	NA	NA	NA	NA	NA
Medical Critical Care Non-Major Teaching	2012	22	0.86	0.61	1.18	0	0.26	0.57	1.11	1.38
	2011	22	0.77	0.54	1.07	0	0.33	0.53	1.52	1.71
	2010	20	0.71	0.49	0.99	0.27	0.35	0.63	1.16	1.59
Medical-Surgical Critical Care Major Teaching	2012	6	0.56	0.34	0.85	0.25	0.26	0.53	0.77	1.53
	2011	6	0.67	0.44	0.99	0	0.29	0.51	0.82	1.84
	2010	8	1.25	0.95	1.62	0.27	0.47	1.03	1.49	2.76
Medical-Surgical Critical Care Non-Major Teaching & >15 beds	2012	19	0.72	0.55	0.93	0	0	0.51	1.07	1.87
	2011	18	0.88	0.69	1.11	0	0.51	0.87	1.23	1.84
	2010	18	0.73	0.55	0.96	0	0.41	0.59	0.88	1.76
Medical-Surgical Critical Care Non-Major Teaching & ≤15 beds	2012	40	0.54	0.29	0.90	0	0.18	0.45	0.73	3.09
	2011	40	0.84	0.54	1.26	0	0	0.86	2.56	2.77
	2010	37	0.99	0.67	1.41	0	0	0.97	2.84	3.3
Neurologic Critical Care	2012	1	1.37	0.28	4.00	NA	NA	NA	NA	NA
	2011	1	0.52	0.01	2.91	NA	NA	NA	NA	NA

			SIR, 95% CONFIDENCE INTERVAL, AND KEY PERCENTILES							
ICU TYPE	YEAR	No.	SIR	LOWER LIMIT	UPPER LIMIT	10%	25%	50%	75%	90%
Neurosurgical Critical Care	2012	9	0.39	0.20	0.68	0	0	0.5	1.2	1.44
	2011	7	0.39	0.20	0.70	0	0	0.23	0.67	1.85
	2010	7	0.63	0.38	0.99	0	0.24	0.42	1.09	1.11
Pediatric Medical Critical Care	2012	2	1.94	0.53	4.96	NA	NA	NA	NA	NA
	2011	2	2.37	0.77	5.53	NA	NA	NA	NA	NA
	2010	1	1.69	0.35	4.94	NA	NA	NA	NA	NA
Pediatric Medical-Surgical Critical Care	2012	8	0.17	0.05	0.39	0	0.11	0.16	0.25	0.4
	2011	7	0.46	0.27	0.75	0	0.21	0.84	0.99	0.99
	2010	7	0.50	0.30	0.79	0	0.4	0.48	0.55	0.56
Pediatric Surgical Cardiothoracic Critical Care	2012	2	0.14	0.02	0.50	NA	NA	NA	NA	NA
	2011	1	2.34	1.21	4.09	NA	NA	NA	NA	NA
	2010	2	0.98	0.47	1.81	NA	NA	NA	NA	NA
Surgical Cardiothoracic Critical Care	2012	15	0.62	0.42	0.88	0	0	0.51	0.84	0.91
	2011	15	0.80	0.56	1.10	0	0.49	0.77	1.17	1.45
	2010	15	0.76	0.52	1.06	0	0	0.55	1.1	1.33
Surgical Critical Care	2012	11	0.33	0.19	0.53	0	0	0.36	0.5	0.85
	2011	11	0.57	0.39	0.81	0.23	0.3	0.36	0.92	1.44
	2010	11	0.49	0.32	0.72	0	0	0.31	0.59	0.84
Trauma Critical Care	2012	6	0.60	0.41	0.85	0	0.18	0.49	0.75	0.95
	2011	6	0.74	0.53	0.99	0.22	0.43	0.47	0.72	1.31
	2010	6	0.99	0.67	1.40	0	0.47	0.94	1.12	1.47

Data reported as of September 27, 2013
Burn and trauma ICU data available since July 2010
No. = number of facilities; SIR = standardized infection ratio (observed/predicted number of CLABSI)
NA = not reported if the number of facilities is <5
Key percentiles include units with at least one predicted infection
Red highlighting indicates SIR for reporting period is significantly higher than national 2006-2008 SIR of 1.0
Green highlighting indicates SIR for reporting period is significantly lower than national 2006-2008 SIR of 1.0

Figure 9: Central Line-Associated Bloodstream Infection (CLABSI) Pooled Mean Rates per 1,000 Central Line Days by Intensive Care Unit (ICU) Type, Tennessee, 2011 and 2012, vs. National Healthcare Safety Network (NHSN), 2006-8

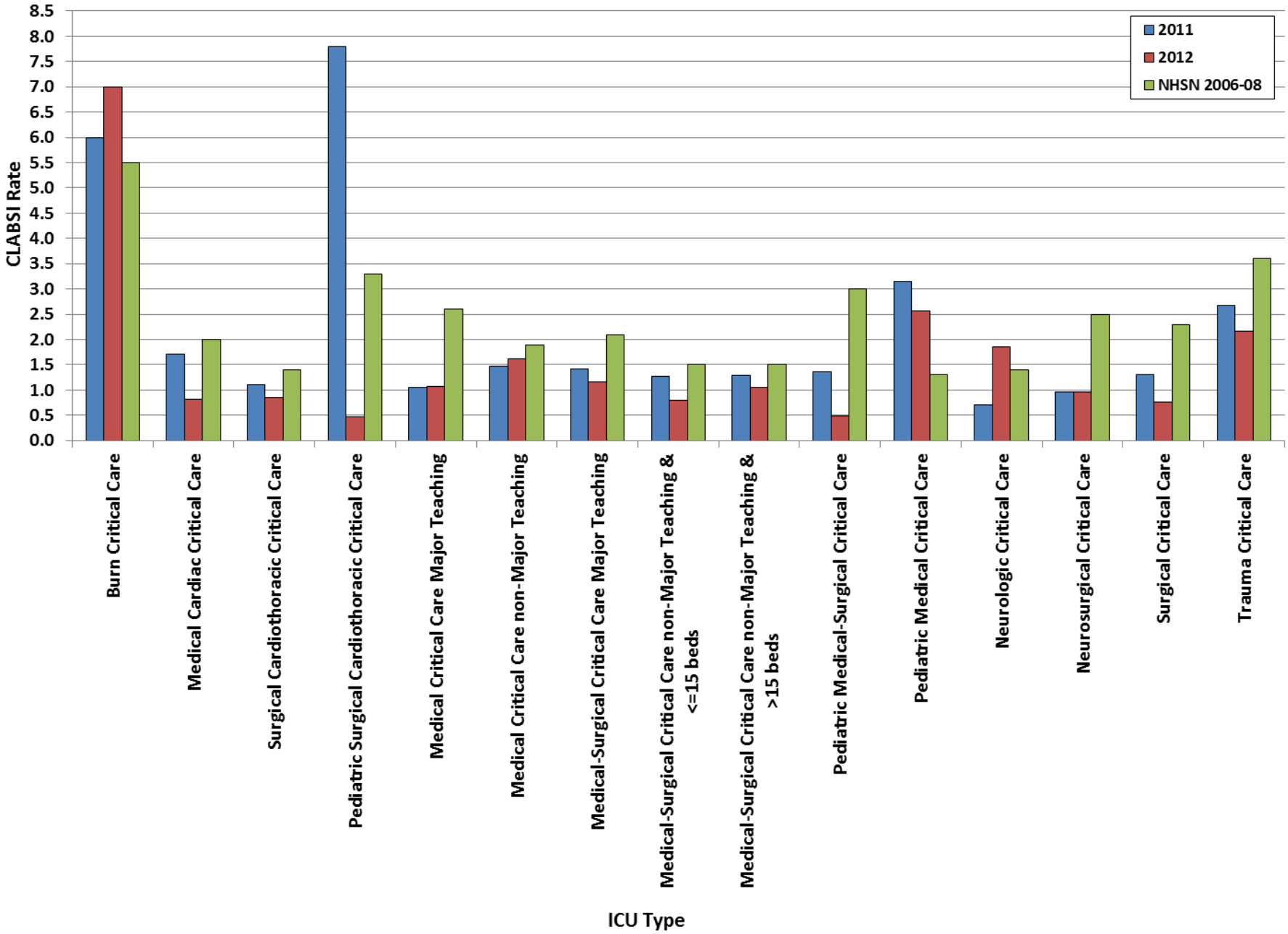
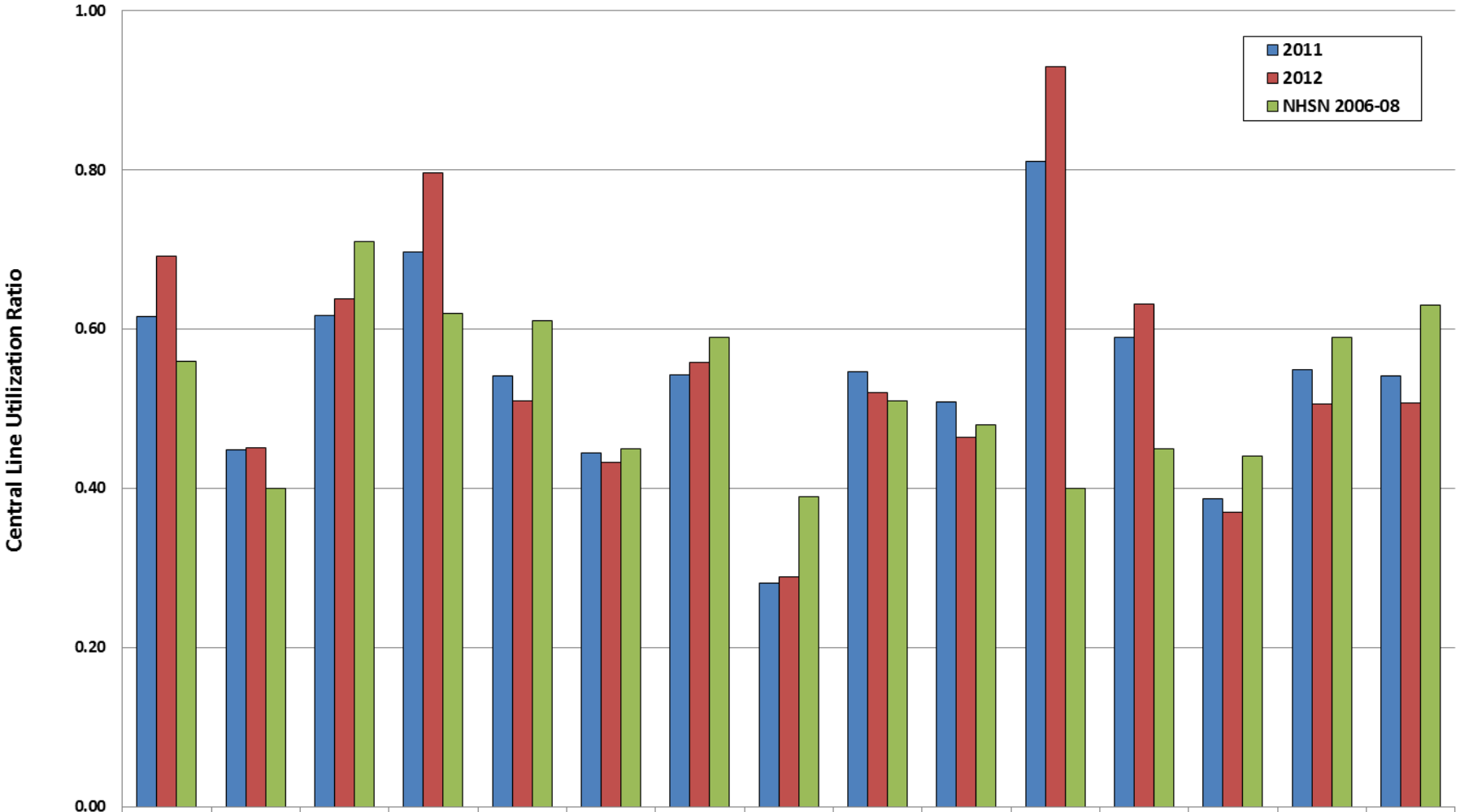


Table 7: Comparison of Tennessee and National Healthcare Safety Network (NHSN) Central Line-Associated Bloodstream Infection (CLABSI) Rates and Standardized Infection Ratios (SIRs) by Type of Intensive Care Unit (ICU), 01/01/2012 - 12/31/2012

	TENNESSEE 01/01/2012 - 12/31/2012					NHSN 2006-2008				SIR AND 95% CONFIDENCE INTERVAL		
ICU TYPE	No.	CLABSI	CL DAYS	POOLED MEAN*	MEDIAN RATE*	CLABSI	CL DAYS	POOLED MEAN*	MEDIAN RATE*	SIR	LOWER LIMIT	UPPER LIMIT
Burn Critical Care	2	18	2574	7.0	8.1	390	70932	5.5	3.1	1.27	0.75	2.01
Medical Cardiac Critical Care	8	11	13510	0.8	0.8	876	436409	2.0	1.3	0.41	0.20	0.73
Medical Critical Care Major Teaching	6	16	14891	1.1	0.5	1410	549088	2.6	2.3	0.42	0.24	0.68
Medical Critical Care Non-Major Teaching	22	38	23367	1.6	0.6	687	362388	1.9	1.0	0.86	0.61	1.18
Medical-Surgical Critical Care Major Teaching	6	21	17949	1.2	1.1	1474	699300	2.1	1.7	0.56	0.34	0.85
Medical-Surgical Critical Care Non-Major Teaching & >15 beds	19	57	53859	1.1	0.7	1449	986982	1.5	1.1	0.72	0.55	0.93
Medical-Surgical Critical Care Non-Major Teaching & ≤15 beds	40	14	17479	0.8	0.0	1130	755437	1.5	0.0	0.54	0.29	0.90
Neurologic Critical Care	1	3	1623	1.8	.	61	45153	1.4	1.0	1.37	0.28	4.00
Neurosurgical Critical Care	9	12	12494	1.0	0.0	396	160879	2.5	1.9	0.39	0.20	0.68
Pediatric Medical Critical Care	2	4	1556	2.6	1.3	23	17321	1.3	.	1.94	0.53	4.96
Pediatric Medical-Surgical Critical Care	8	5	10114	0.5	0.3	923	314306	3.0	2.5	0.17	0.05	0.39
Pediatric Surgical Cardiothoracic Critical Care	2	2	4311	0.5	0.5	195	58626	3.3	.	0.14	0.02	0.50
Surgical Cardiothoracic Critical Care	15	30	34844	0.9	0.7	879	632769	1.4	0.8	0.62	0.42	0.88
Surgical Critical Care	11	17	22136	0.8	0.8	1683	729989	2.3	1.7	0.33	0.19	0.53
Trauma Critical Care	6	31	14356	2.2	1.8	814	224864	3.6	3.0	0.60	0.41	0.85
TOTAL										0.56	0.50	0.63

Data reported as of September 27, 2013
No. = number of facilities
CLDays = Central Line Days
SIR = standardized infection ratio (observed/predicted number of CLABSI)
NA = not available
****per 1000 central line days***
Red highlighting indicates SIR for reporting period is significantly higher than national 2006-2008 SIR of 1.0
Green highlighting indicates SIR for reporting period is significantly lower than national 2006-2008 SIR of 1.0

Figure 10: Central Line Utilization Ratio by Intensive Care Unit (ICU) Type, Tennessee, 2011 and 2012, vs. National Healthcare Safety Network (NHSN), 2006-8



	Burn Critical Care	Medical Cardiac Critical Care	Surgical Cardiothoracic Critical Care	Pediatric Surgical Cardiothoracic Critical Care	Medical Critical Care Major Teaching	Medical Critical Care non-Major Teaching	Medical-Surgical Critical Care Major Teaching	Medical-Surgical Critical Care non-Major Teaching & <=15 beds	Medical-Surgical Critical Care non-Major Teaching & >15 beds	Pediatric Medical-Surgical Critical Care	Pediatric Medical Critical Care	Neurologic Critical Care	Neurosurgical Critical Care	Surgical Critical Care	Trauma Critical Care
2011	0.62	0.45	0.62	0.70	0.54	0.44	0.54	0.28	0.55	0.51	0.81	0.59	0.39	0.55	0.54
2012	0.69	0.45	0.64	0.80	0.51	0.43	0.56	0.29	0.52	0.46	0.93	0.63	0.37	0.51	0.51
NHSN 2006-08	0.56	0.40	0.71	0.62	0.61	0.45	0.59	0.39	0.51	0.48	0.40	0.45	0.44	0.59	0.63

ICU Type

Figure 11: Organisms Isolated from Central Line-Associated Bloodstream Infections (CLABSIs) in Adult and Pediatric Intensive Care Units, Tennessee, 01/01/2012–12/31/2012

Number of isolates = 301; Number of events = 279

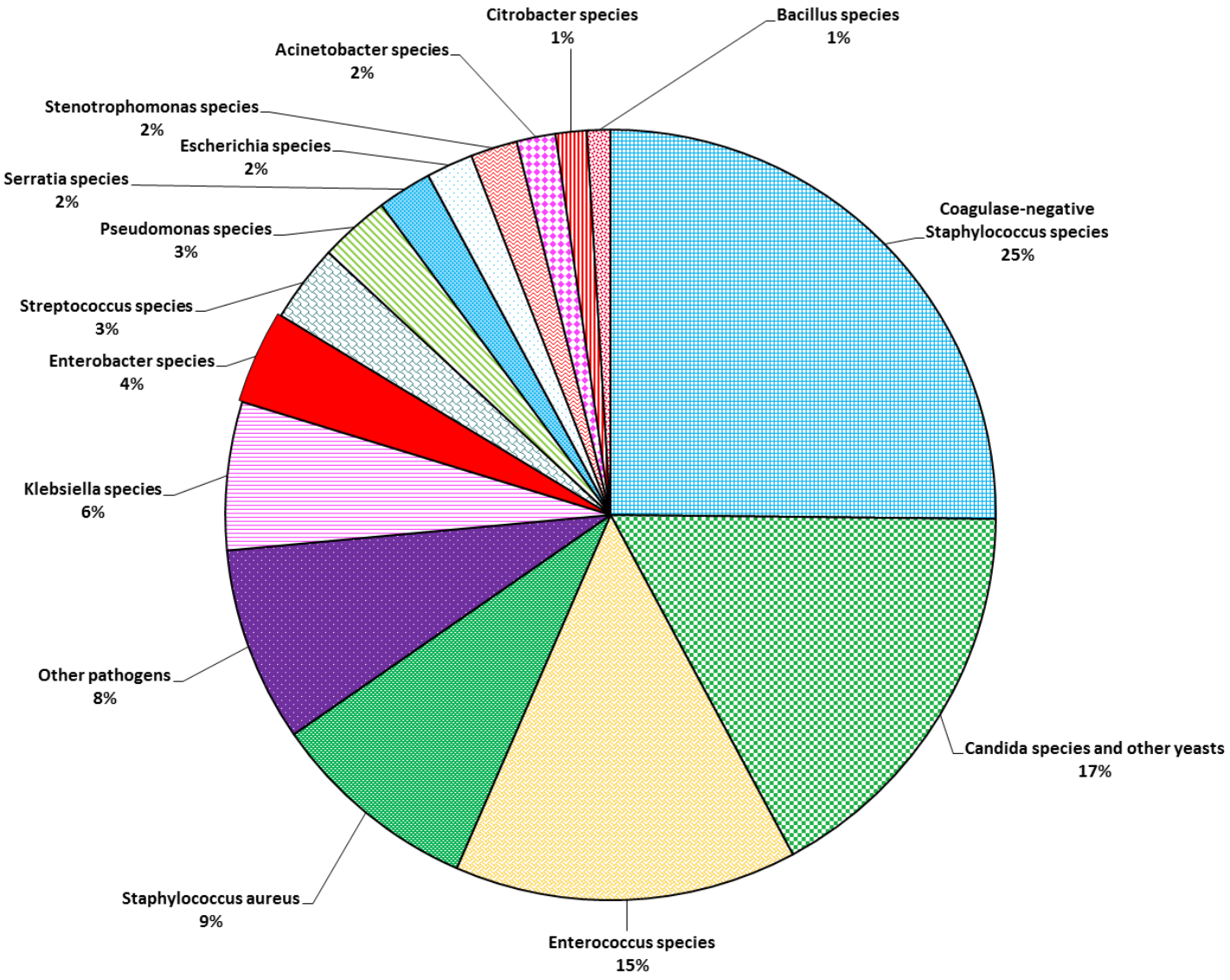


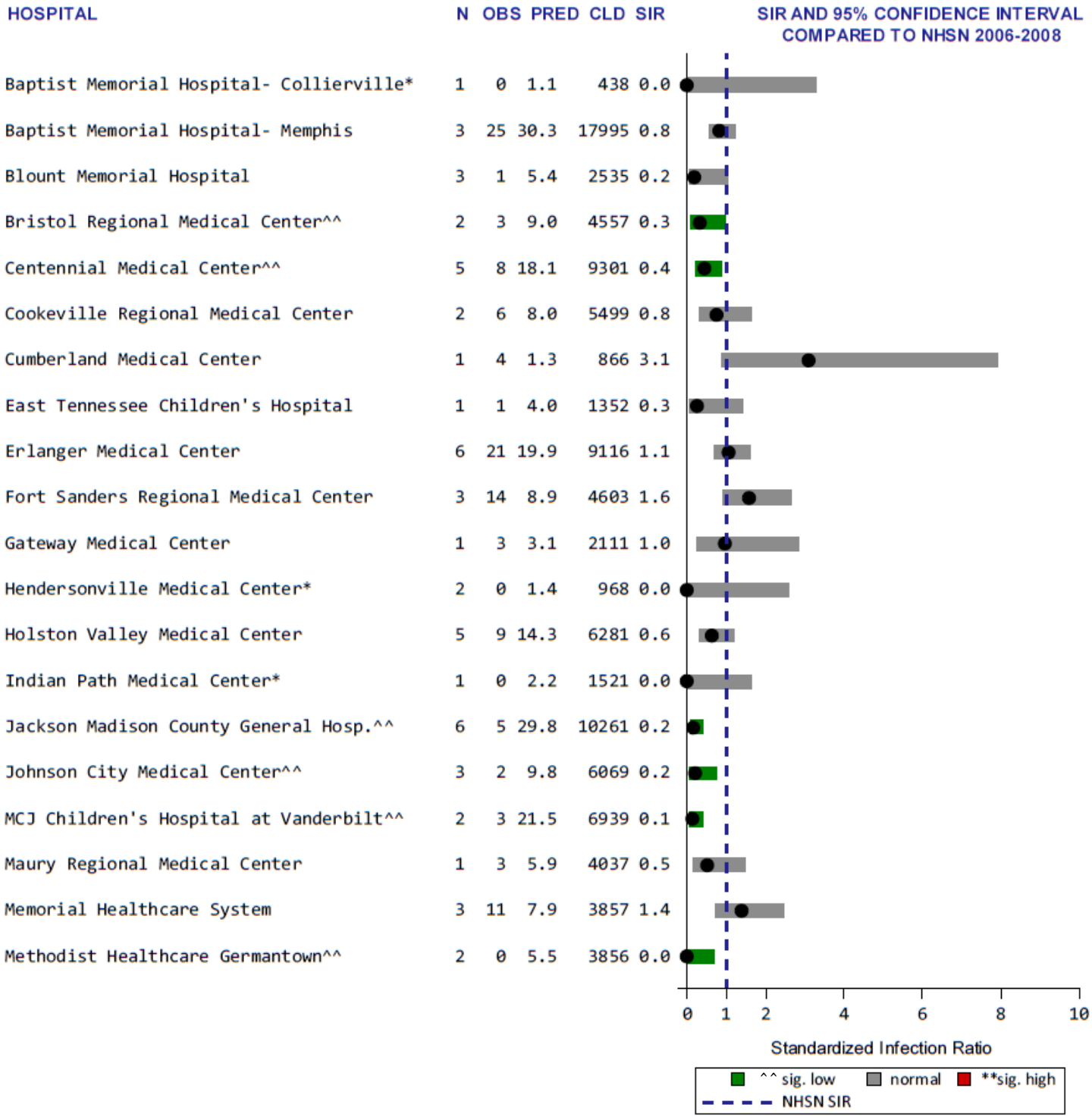
Table 8: Microorganisms Identified in Central Line-Associated Bloodstream Infections (CLABSIs) in Adult and Pediatric Intensive Care Units, Tennessee, 01/01/2012–12/31/2012

Number of isolates = 301; Number of events = 279

Microorganism	Number of Isolates	Percent
Coagulase-negative *Staphylococcus* species	76	25.2
Candida species and other yeasts	52	17.3
Enterococcus species	44	14.6
Vancomycin-resistant *Enterococcus* (VRE) (% of total positive isolates)	16	(5.3)
Staphylococcus aureus	27	9.0
Methicillin-resistant *S. aureus* (MRSA) (% of total positive isolates)	20	(6.6)
Klebsiella species	19	6.3
Enterobacter species	12	4.0
Streptococcus species	10	3.3
Pseudomonas species	9	3.0
Serratia species	7	2.3
Escherichia species	6	2.0
Stenotrophomonas species	6	2.0
Acinetobacter species	5	1.7
Citrobacter species	4	1.3
Bacillus species	3	1.0
Other pathogens and common commensals	21	7.0

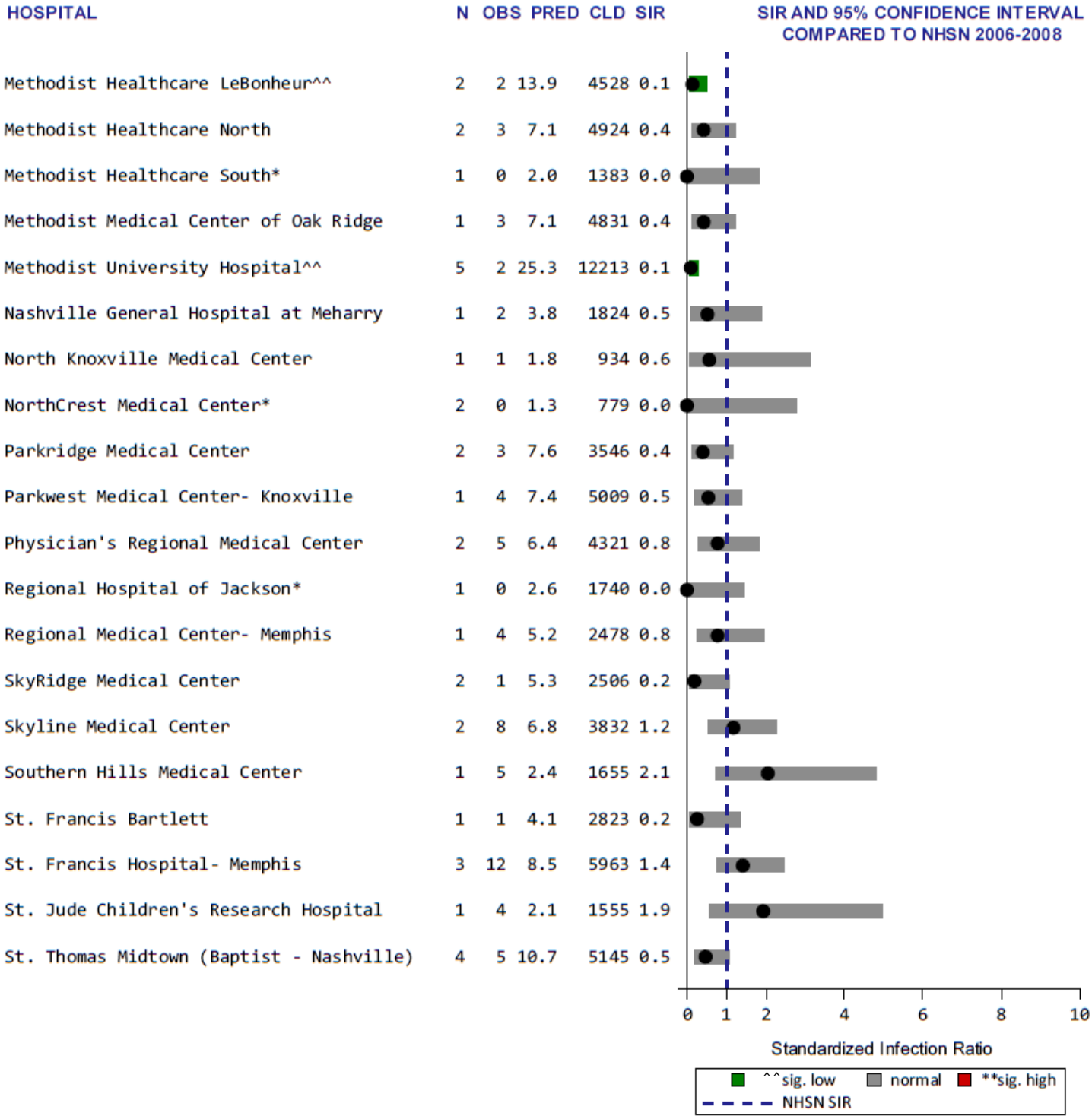
Data reported as of September 27, 2013
Other common commensals = Aerococcus viridans
Other pathogens = Achromobacter spp., Actinomyces spp., Bacteroides spp., Clostridium spp., Coagulase-positive Staphylococcus spp., Fungus spp. not otherwise specified, Fusarium spp., Fusobacterium spp., Geotrichum spp., Lactobacillus spp., Moraxella spp., Neisseria spp., Peptostreptococcus micros, Prevotella spp., Proteus mirabilis, Providencia spp.

Figure 12: CLABSI Standardized Infection Ratio (SIR) for Adult and Pediatric Intensive Care Units in Facilities with ≥1 Predicted CLABSI, Tennessee, 01/01/2012 – 12/31/2012



Data Reported from adult/pediatric ICUs as of September 27, 2013.
N = number of types of intensive care units reporting
OBS = observed number of CLABSI
PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data
SIR = standardized infection ratio (observed/predicted number of CLABSI)
CLD = number of central line days
NA = data not shown for hospitals with <50 central line days
***** Significantly higher than national baseline***
^^ Significantly lower than national baseline
*** Zero infections, but not statistically significant***

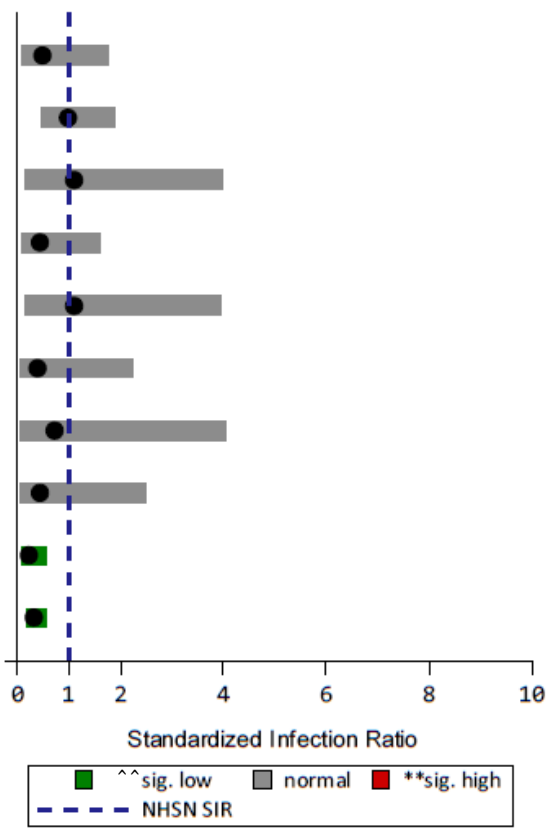
Figure 12 (cont'd)



Data Reported from adult/pediatric ICUs as of September 27, 2013.
N = number of types of intensive care units reporting
OBS = observed number of CLABSI
PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data
SIR = standardized infection ratio (observed/predicted number of CLABSI)
CLD = number of central line days
NA = data not shown for hospitals with <50 central line days
****** Significantly higher than national baseline***
^^ Significantly lower than national baseline
**** Zero infections, but not statistically significant***

Figure 12 (cont'd)

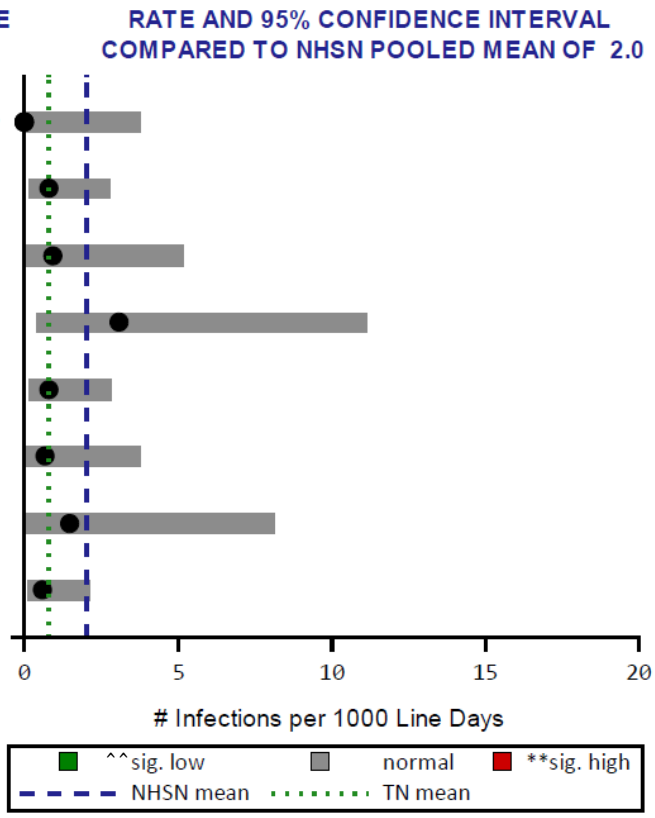
HOSPITAL	N	OBS	PRED	CLD	SIR
St. Thomas Rutherford (Mid. TN Med. Ctr)	1	2	4.1	2771	0.5
St. Thomas West Hospital	1	9	9.1	6194	1.0
StoneCrest Medical Center	1	2	1.8	952	1.1
Summit Medical Center	2	2	4.5	2143	0.4
Sumner Regional Medical Center	1	2	1.8	1245	1.1
TC Thompson Children's Hosp(Erlanger)	1	1	2.5	847	0.4
Turkey Creek Medical Center	1	1	1.4	921	0.7
University Medical Center- Lebanon	1	1	2.2	1493	0.4
University of Tennessee Medical Ctr^^	4	4	18.0	7782	0.2
Vanderbilt Medical Center^^	4	12	37.7	17855	0.3



Data Reported from adult/pediatric ICUs as of September 27, 2013.
N = number of types of intensive care units reporting
OBS = observed number of CLABSI
PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data
SIR = standardized infection ratio (observed/predicted number of CLABSI)
CLD = number of central line days
NA = data not shown for hospitals with <50 central line days
***** Significantly higher than national baseline***
^^ Significantly lower than national baseline
****Zero infections, but not statistically significant***

Figure 13: Central Line-Associated Blood Stream Infection (CLABSI) Rates per 1,000 Central Line Days in Tennessee, 01/01/2012 - 12/31/2012, Medical Cardiac Critical Care

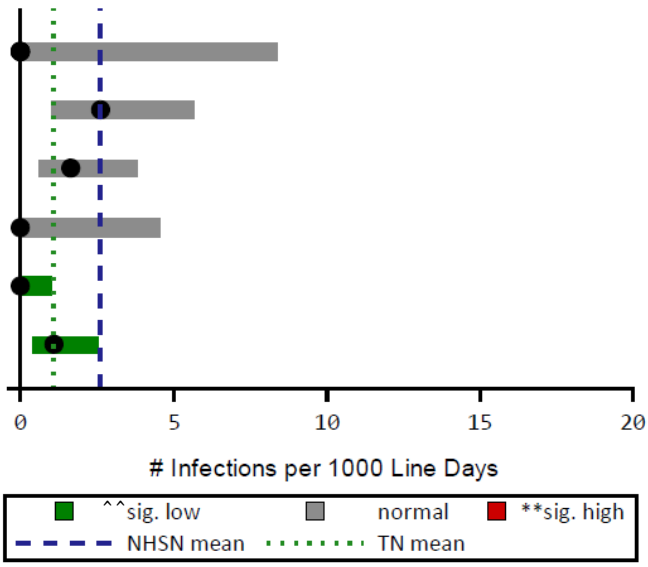
HOSPITAL	CLABSI	CLD	RATE
Blount Memorial Hospital*	0	987	0.0
Centennial Medical Center	2	2595	0.8
Erlanger Medical Center	1	1076	0.9
Holston Valley Medical Center	2	648	3.1
Jackson Madison County General Hosp.	2	2578	0.8
Memorial Healthcare System	1	1495	0.7
St. Thomas Midtown (Baptist - Nashville)	1	683	1.5
University of Tennessee Medical Ctr	2	3448	0.6



Data Reported as of September 27, 2013.
CLD = central line days
***** Significantly higher than NHSN pooled mean***
^^ Significantly lower than NHSN pooled mean
**** Zero infections, but not statistically significant***
NA = rates are not shown for units with <50 central line days
NHSN pooled mean (2006-2008)= 2.0; TN pooled mean (01/01/2012 - 12/31/2012)= 0.8

Figure 14: Central Line-Associated Blood Stream Infection (CLABSI) Rates per 1,000 Central Line Days in Tennessee, 01/01/2012 - 12/31/2012, Medical Critical Care Units in Major Teaching Hospitals

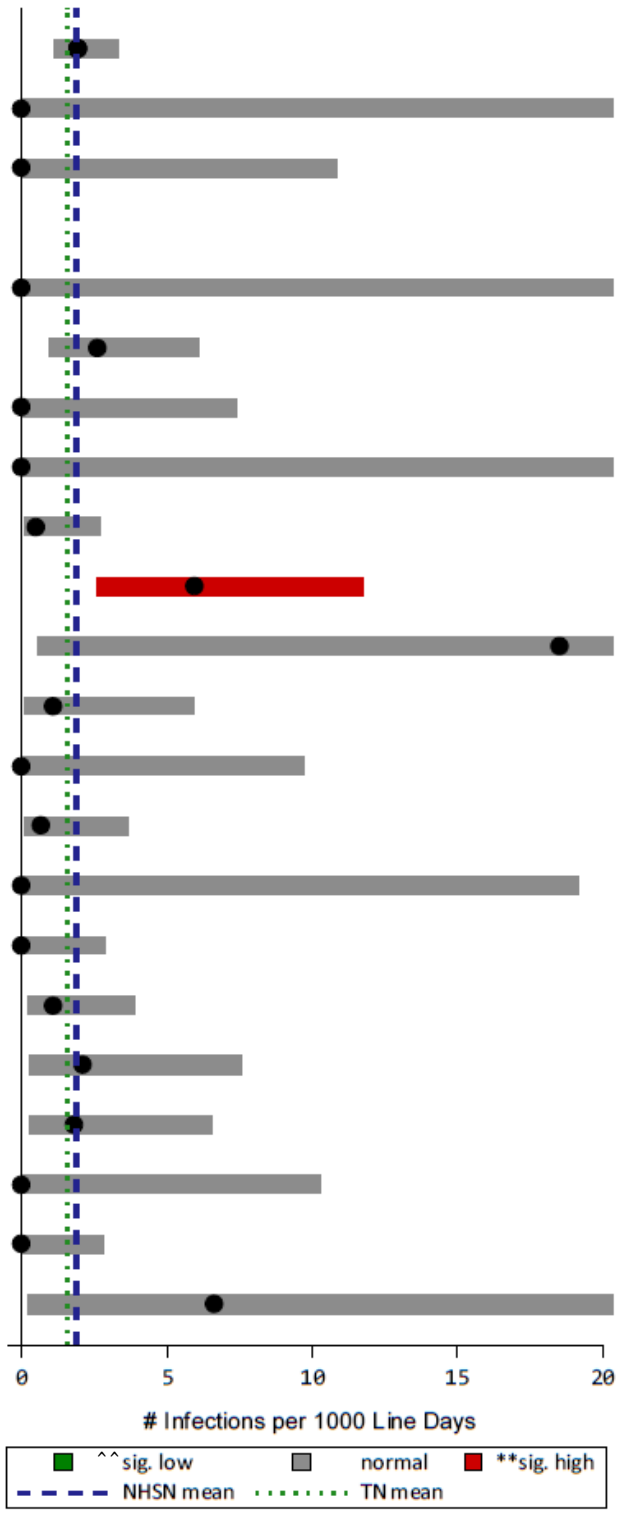
HOSPITAL	CLABSI	CLD	RATE
Baptist Memorial Hospital- Collierville*	0	438	0.0
Erlanger Medical Center	6	2306	2.6
Holston Valley Medical Center	5	3070	1.6
Methodist University Hospital*	0	809	0.0
University of Tennessee Medical Ctr^^	0	3648	0.0
Vanderbilt Medical Center^^	5	4620	1.1



Data Reported as of September 27, 2013.
CLD = central line days
****** *Significantly higher than NHSN pooled mean***
^^ Significantly lower than NHSN pooled mean
**** Zero infections, but not statistically significant***
NA = rates are not shown for units with <50 central line days
NHSN pooled mean (2006-2008)= 2.6; TN pooled mean (01/01/2012 - 12/31/2012)= 1.1

Figure 15: Central Line-Associated Blood Stream Infection (CLABSI) Rates per 1,000 Central Line Days in Tennessee, 01/01/2012 - 12/31/2012, Medical Critical Care Units in Non-Major Teaching Hospitals

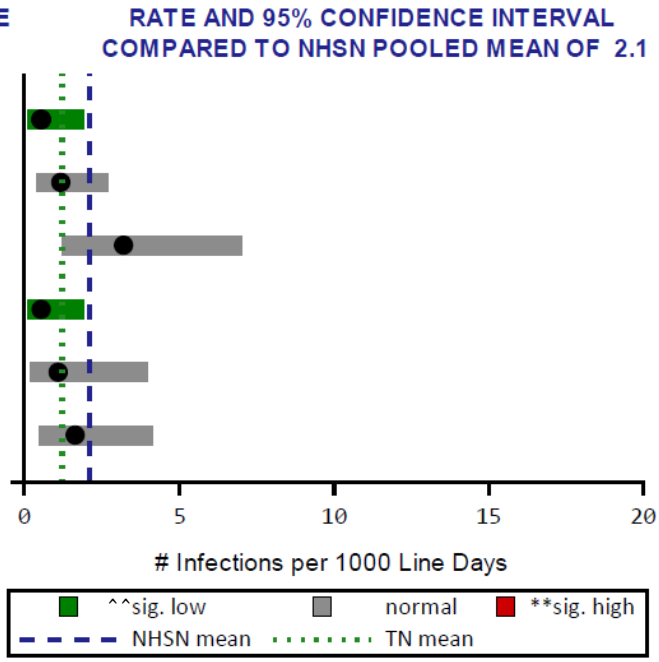
HOSPITAL	CLABSI	CLD	RATE
Baptist Memorial Hospital- Memphis	13	6712	1.9
Baptist Memorial Hospital-Tipton*	0	53	0.0
Blount Memorial Hospital*	0	340	0.0
DeKalb Community Hospital	NA	NA	NA
Fort Loudoun Medical Center*	0	162	0.0
Fort Sanders Regional Medical Center	5	1912	2.6
Franklin Woods Community Hospital*	0	498	0.0
Hillside Hospital*	0	175	0.0
Jackson Madison County General Hosp.	1	2047	0.5
Memorial Healthcare System**	8	1344	6.0
Newport Medical Center	1	54	18.5
North Knoxville Medical Center	1	934	1.1
NorthCrest Medical Center*	0	379	0.0
Parkridge Medical Center	1	1519	0.7
River Park Hospital*	0	192	0.0
SkyRidge Medical Center*	0	1273	0.0
St. Thomas Midtown (Baptist - Nashville)	2	1855	1.1
StoneCrest Medical Center	2	952	2.1
Summit Medical Center	2	1105	1.8
Sweetwater Hospital Association*	0	358	0.0
Williamson Medical Center*	0	1312	0.0
Woods Memorial Hospital	1	151	6.6



Data Reported as of September 27, 2013.
CLD = central line days
***** Significantly higher than NHSN pooled mean***
^^ Significantly lower than NHSN pooled mean
**** Zero infections, but not statistically significant***
NA = rates are not shown for units with <50 central line days
NHSN pooled mean (2006-2008)= 1.9; TN pooled mean (01/01/2012 - 12/31/2012)= 1.6

Figure 16: Central Line-Associated Blood Stream Infection (CLABSI) Rates per 1,000 Central Line Days in Tennessee, 01/01/2012 - 12/31/2012, Medical-Surgical Critical Care Units in Major Teaching Hospitals

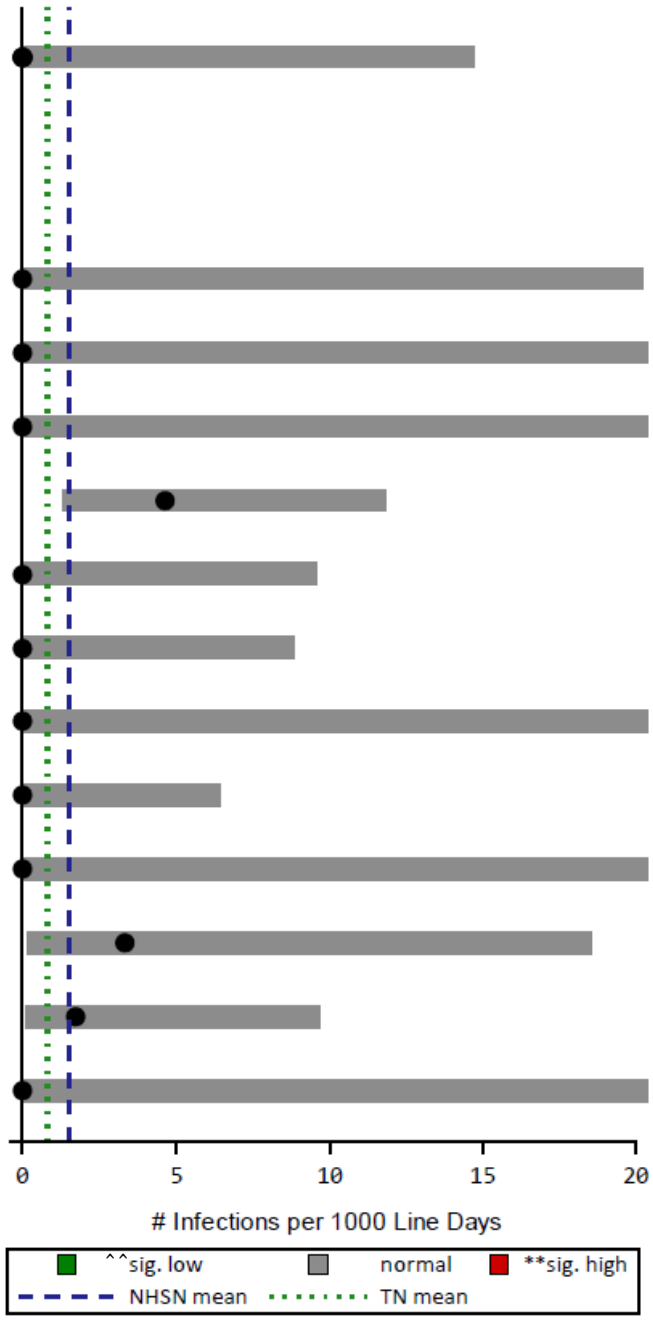
HOSPITAL	CLABSI	CLD	RATE
Bristol Regional Medical Center^^	2	3711	0.5
Centennial Medical Center	5	4323	1.2
Erlanger Medical Center	6	1864	3.2
Methodist University Hospital^^	2	3749	0.5
Nashville General Hospital at Meharry	2	1824	1.1
Regional Medical Center- Memphis	4	2478	1.6



Data Reported as of September 27, 2013.
CLD = central line days
***** Significantly higher than NHSN pooled mean***
^^ Significantly lower than NHSN pooled mean
****Zero infections, but not statistically significant***
NA = rates are not shown for units with <50 central line days
NHSN pooled mean (2006-2008)= 2.1; TN pooled mean (01/01/2012 - 12/31/2012)= 1.2

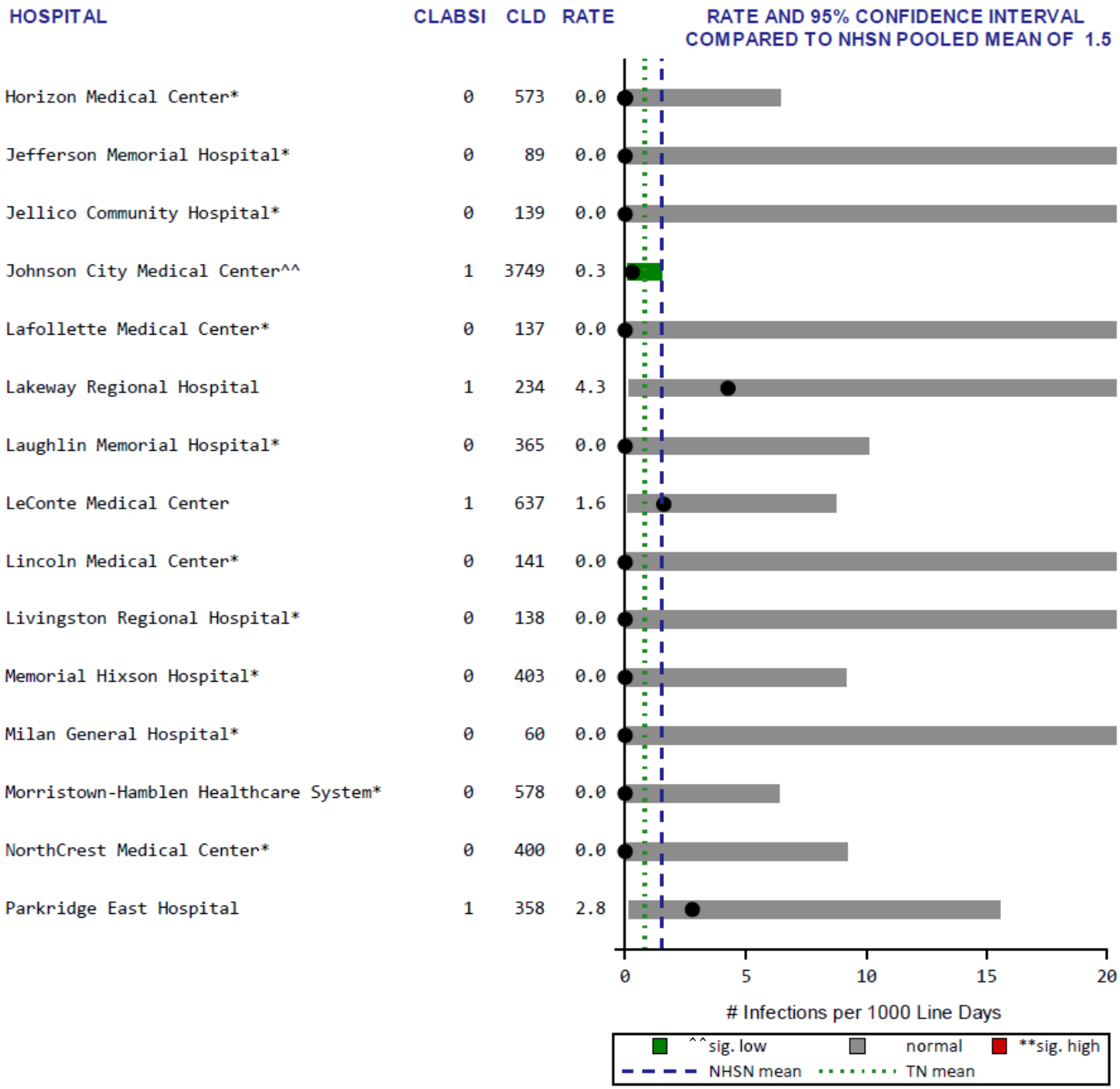
Figure 17: Central Line-Associated Blood Stream Infection (CLABSI) Rates per 1,000 Central Line Days in Tennessee, 01/01/2012 - 12/31/2012, Medical-Surgical Critical Care Units with ≤15 Beds in Non-Major Teaching Hospitals

HOSPITAL	CLABSI	CLD	RATE
Athens Regional Medical Center*	0	251	0.0
Baptist Memorial Hospital for Women	NA	NA	NA
Baptist Memorial Hospital- Huntingdon	NA	NA	NA
Baptist Memorial Hospital- Union City*	0	182	0.0
Claiborne County Hospital*	0	164	0.0
Crockett Hospital*	0	160	0.0
Cumberland Medical Center	4	866	4.6
Delta Medical Center*	0	385	0.0
Dyersburg Regional Medical Center*	0	418	0.0
Grandview Medical Center*	0	153	0.0
Harton Regional Medical Center*	0	574	0.0
Hendersonville Medical Center*	0	137	0.0
Henry County Medical Center	1	300	3.3
Heritage Medical Center	1	576	1.7
Highlands Medical Center*	0	76	0.0



Data Reported as of September 27, 2013.
CLD = central line days
***** Significantly higher than NHSN pooled mean***
^^ Significantly lower than NHSN pooled mean
****Zero infections, but not statistically significant***
NA = rates are not shown for units with <50 central line days
NHSN pooled mean (2006-2008)= 1.5; TN pooled mean (01/01/2012 - 12/31/2012)= 0.8

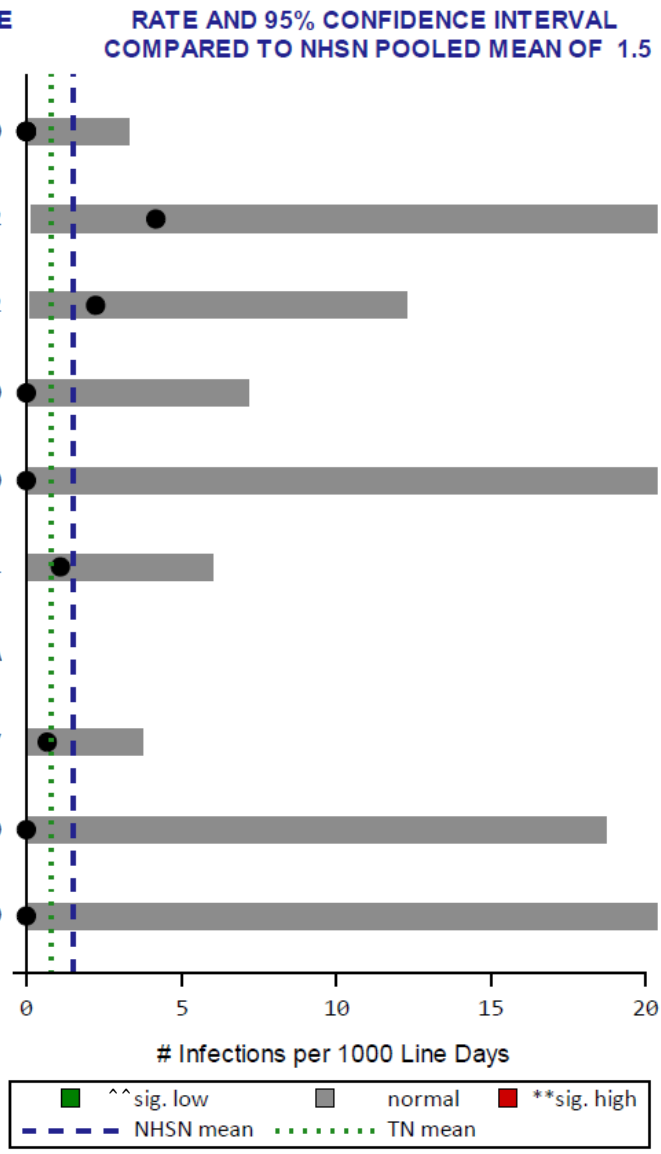
Figure 17 (cont'd)



Data Reported as of September 27, 2013.
CLD = central line days
***** Significantly higher than NHSN pooled mean***
^^ Significantly lower than NHSN pooled mean
*** Zero infections, but not statistically significant***
NA = rates are not shown for units with <50 central line days
NHSN pooled mean (2006-2008)= 1.5; TN pooled mean (01/01/2012 - 12/31/2012)= 0.8

Figure 17 (cont'd)

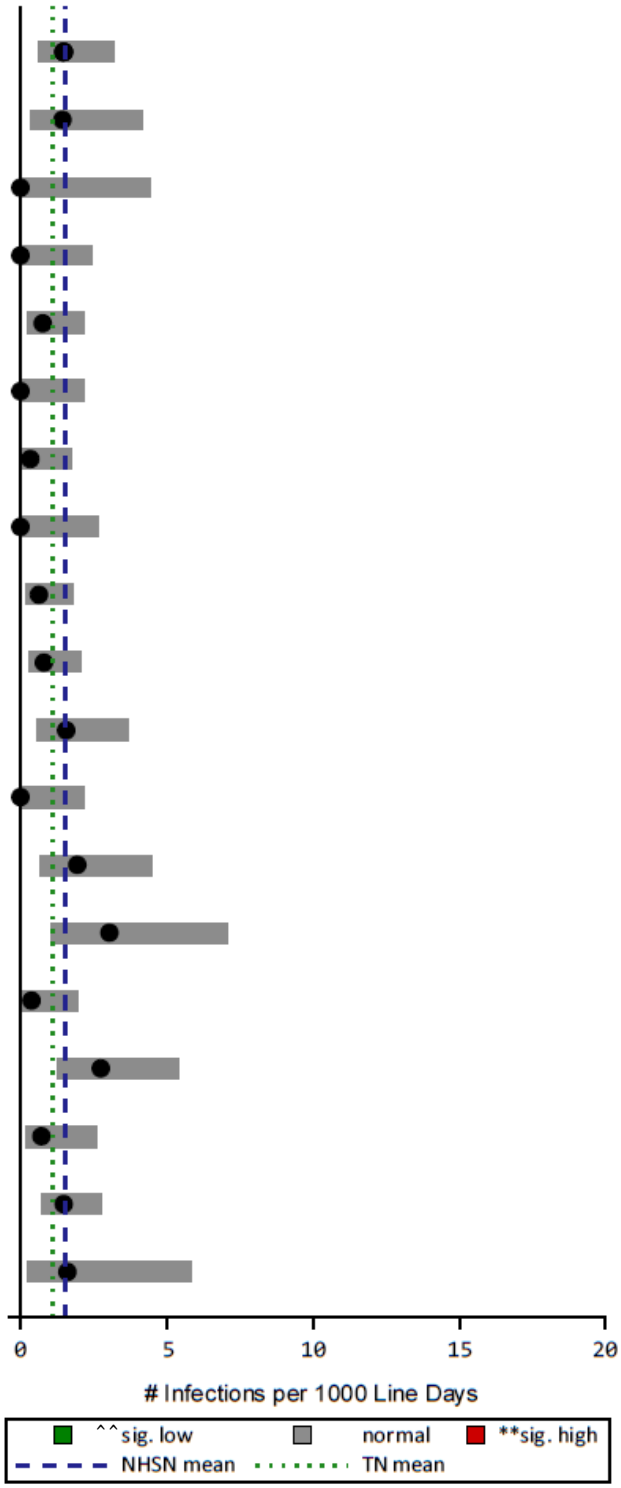
HOSPITAL	CLABSI	CLD	RATE
Physician's Regional Medical Center*	0	1129	0.0
Roane Medical Center	1	240	4.2
Southern Tennessee Medical Center	1	453	2.2
Sycamore Shoals Hospital*	0	515	0.0
Takoma Regional Hospital*	0	155	0.0
Turkey Creek Medical Center	1	921	1.1
Unicoi County Memorial Hospital	NA	NA	NA
University Medical Center- Lebanon	1	1493	0.7
Volunteer Community Hospital*	0	197	0.0
Wellmont Hawkins County Hospital*	0	89	0.0



Data Reported as of September 27, 2013.
CLD = central line days
***** Significantly higher than NHSN pooled mean***
^^ Significantly lower than NHSN pooled mean
**** Zero infections, but not statistically significant***
NA = rates are not shown for units with <50 central line days
NHSN pooled mean (2006-2008)= 1.5; TN pooled mean (01/01/2012 - 12/31/2012)= 0.8

Figure 18: Central Line-Associated Blood Stream Infection (CLABSI) Rates per 1,000 Central Line Days in Tennessee, 01/01/2012 - 12/31/2012, Medical-Surgical Critical Care Units with >15 Beds in Non-Major Teaching Hospitals

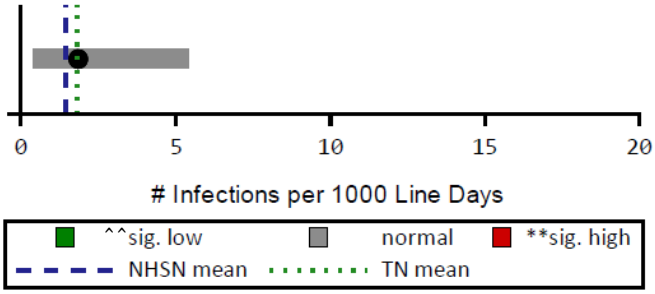
HOSPITAL	CLABSI	CLD	RATE
Cookeville Regional Medical Center	6	4089	1.5
Gateway Medical Center	3	2111	1.4
Hendersonville Medical Center*	0	831	0.0
Indian Path Medical Center*	0	1521	0.0
Maury Regional Medical Center	3	4037	0.7
Methodist Healthcare Germantown*	0	1694	0.0
Methodist Healthcare North	1	3219	0.3
Methodist Healthcare South*	0	1383	0.0
Methodist Medical Center of Oak Ridge	3	4831	0.6
Parkwest Medical Center- Knoxville	4	5009	0.8
Physician's Regional Medical Center	5	3192	1.6
Regional Hospital of Jackson*	0	1740	0.0
Skyline Medical Center	5	2604	1.9
Southern Hills Medical Center	5	1655	3.0
St. Francis Bartlett	1	2823	0.4
St. Francis Hospital- Memphis	8	2910	2.7
St. Thomas Rutherford (Mid. TN Med. Ctr)	2	2771	0.7
St. Thomas West Hospital	9	6194	1.5
Sumner Regional Medical Center	2	1245	1.6



Data Reported as of September 27, 2013.
CLD = central line days
*** Significantly higher than NHSN pooled mean*
^^ Significantly lower than NHSN pooled mean
** Zero infections, but not statistically significant*
NA = rates are not shown for units with <50 central line days
NHSN pooled mean (2006-2008)= 1.5; TN pooled mean (01/01/2012 - 12/31/2012)= 1.1

Figure 19: Central Line-Associated Blood Stream Infection (CLABSI) Rates per 1,000 Central Line Days in Tennessee, 01/01/2012 - 12/31/2012, Neurological Critical Care Units

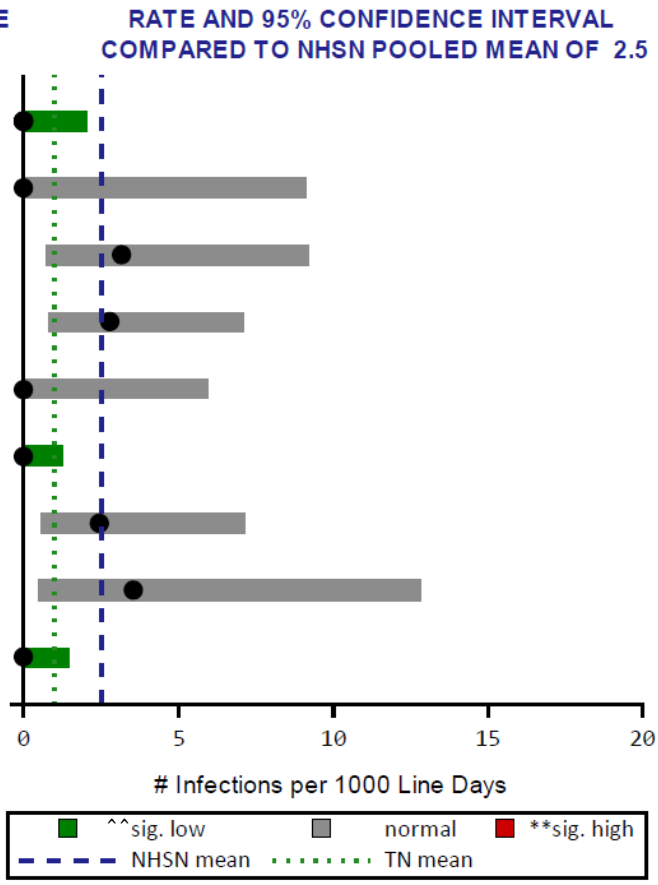
HOSPITAL	CLABSI	CLD	RATE	RATE AND 95% CONFIDENCE INTERVAL COMPARED TO NHSN POOLED MEAN OF 1.4
St. Francis Hospital- Memphis	3	1623	1.8	



Data Reported as of September 27, 2013.
CLD = central line days
***** Significantly higher than NHSN pooled mean***
^^ Significantly lower than NHSN pooled mean
**** Zero infections, but not statistically significant***
NA = rates are not shown for units with <50 central line days
NHSN pooled mean (2006-2008)= 1.4; TN pooled mean (01/01/2012 - 12/31/2012)= 1.8

Figure 20: Central Line-Associated Blood Stream Infection (CLABSI) Rates per 1,000 Central Line Days in Tennessee, 01/01/2012 - 12/31/2012, Neurosurgical Critical Care Units

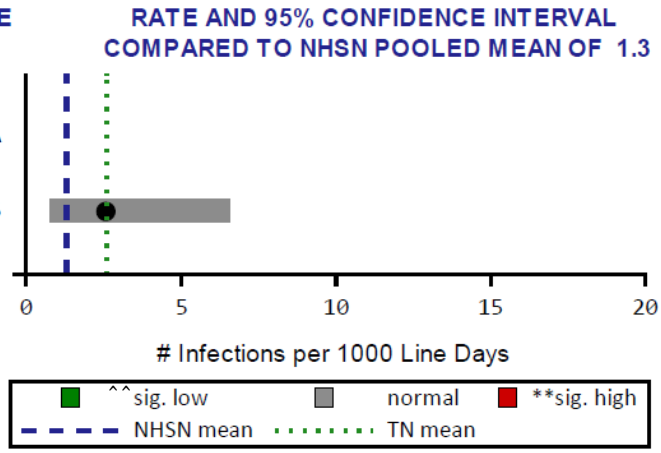
HOSPITAL	CLABSI	CLD	RATE
Baptist Memorial Hospital- Memphis^^	0	1799	0.0
Centennial Medical Center*	0	404	0.0
Erlanger Medical Center	3	953	3.1
Fort Sanders Regional Medical Center	4	1442	2.8
Jackson Madison County General Hosp.*	0	619	0.0
Methodist University Hospital^^	0	2942	0.0
Skyline Medical Center	3	1228	2.4
University of Tennessee Medical Ctr	2	563	3.6
Vanderbilt Medical Center^^	0	2544	0.0



Data Reported as of September 27, 2013.
CLD = central line days
***** Significantly higher than NHSN pooled mean***
^^ Significantly lower than NHSN pooled mean
**** Zero infections, but not statistically significant***
NA = rates are not shown for units with <50 central line days
NHSN pooled mean (2006-2008)= 2.5; TN pooled mean (01/01/2012 - 12/31/2012)= 1.0

Figure 21: Central Line-Associated Blood Stream Infection (CLABSI) Rates per 1,000 Central Line Days in Tennessee, 01/01/2012 - 12/31/2012, Pediatric Medical Critical Care Units

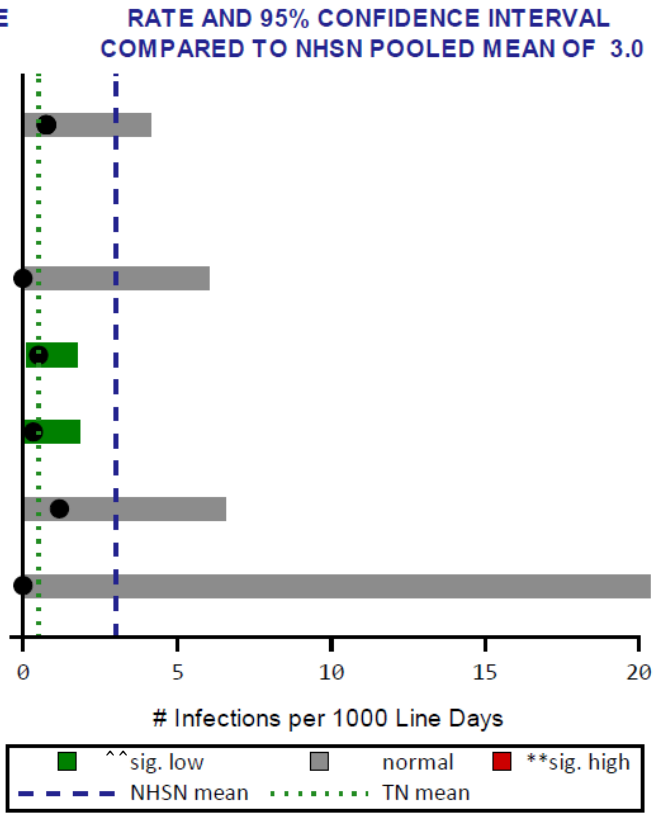
HOSPITAL	CLABSI	CLD	RATE
Holston Valley Medical Center	NA	NA	NA
St. Jude Children's Research Hospital	4	1555	2.6



Data Reported as of September 27, 2013.
CLD = central line days
***** Significantly higher than NHSN pooled mean***
^^ Significantly lower than NHSN pooled mean
**** Zero infections, but not statistically significant***
NA = rates are not shown for units with <50 central line days
NHSN pooled mean (2006-2008)= 1.3; TN pooled mean (01/01/2012 - 12/31/2012)= 2.6

Figure 22: Central Line-Associated Blood Stream Infection (CLABSI) Rates per 1,000 Central Line Days in Tennessee, 01/01/2012 - 12/31/2012, Pediatric Medical-Surgical Critical Care Units

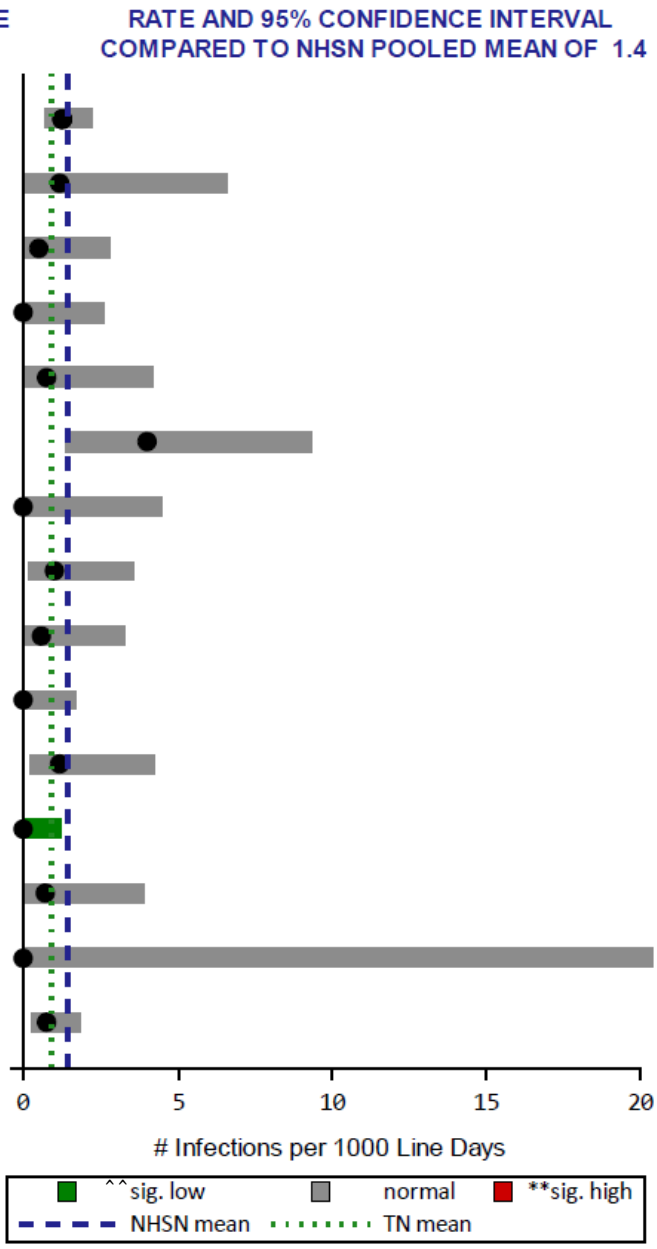
HOSPITAL	CLABSI	CLD	RATE
East Tennessee Children's Hospital	1	1352	0.7
Jackson Madison County General Hosp.	NA	NA	NA
Johnson City Medical Center*	0	613	0.0
MCJ Children's Hospital at Vanderbilt^^	2	4128	0.5
Methodist Healthcare LeBonheur^^	1	3028	0.3
TC Thompson Children's Hosp(Erlanger)	1	847	1.2
University of Tennessee Medical Ctr*	0	123	0.0



Data Reported as of September 27, 2013.
CLD = central line days
***** Significantly higher than NHSN pooled mean***
^^ Significantly lower than NHSN pooled mean
**** Zero infections, but not statistically significant***
NA = rates are not shown for units with <50 central line days
NHSN pooled mean (2006-2008)= 3.0; TN pooled mean (01/01/2012 - 12/31/2012)= 0.5

Figure 23: Central Line-Associated Blood Stream Infection (CLABSI) Rates per 1,000 Central Line Days in Tennessee, 01/01/2012 - 12/31/2012, Surgical Cardiothoracic Critical Care Units

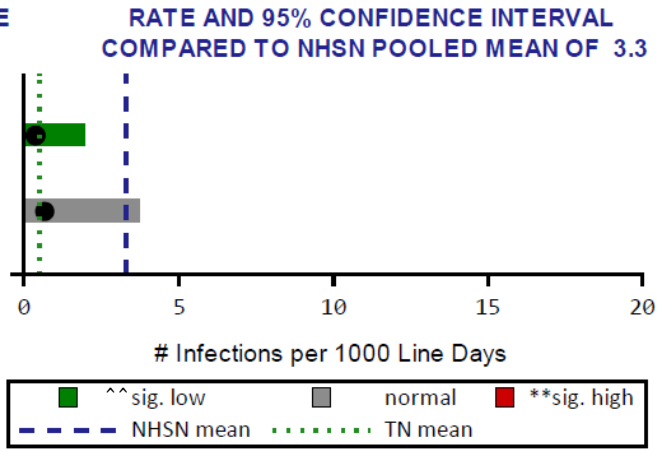
HOSPITAL	CLABSI	CLD	RATE
Baptist Memorial Hospital- Memphis	12	9484	1.3
Bristol Regional Medical Center	1	846	1.2
Centennial Medical Center	1	1979	0.5
Cookeville Regional Medical Center*	0	1410	0.0
Erlanger Medical Center	1	1316	0.8
Fort Sanders Regional Medical Center	5	1249	4.0
Holston Valley Medical Center*	0	824	0.0
Jackson Madison County General Hosp.	2	2025	1.0
Johnson City Medical Center	1	1707	0.6
Methodist Healthcare Germantown*	0	2162	0.0
Methodist Healthcare North	2	1705	1.2
Methodist University Hospital^^	0	3044	0.0
St. Francis Hospital- Memphis	1	1430	0.7
St. Thomas Midtown (Baptist - Nashville)*	0	169	0.0
Vanderbilt Medical Center	4	5494	0.7



Data Reported as of September 27, 2013.
CLD = central line days
***** Significantly higher than NHSN pooled mean***
^^ Significantly lower than NHSN pooled mean
**** Zero infections, but not statistically significant***
NA = rates are not shown for units with <50 central line days
NHSN pooled mean (2006-2008)= 1.4; TN pooled mean (01/01/2012 - 12/31/2012)= 0.9

Figure 24: Central Line-Associated Blood Stream Infection (CLABSI) Rates per 1,000 Central Line Days in Tennessee, 01/01/2012 - 12/31/2012, Pediatric Surgical Cardiothoracic Critical Care Units

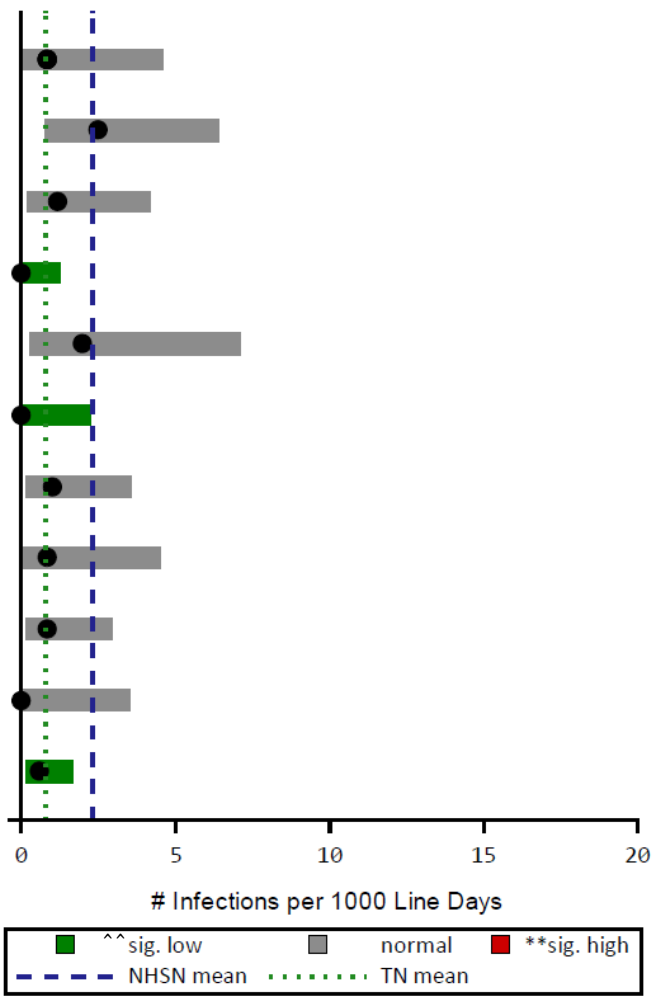
HOSPITAL	CLABSI	CLD	RATE
MCJ Children's Hospital at Vanderbilt^^	1	2811	0.4
Methodist Healthcare LeBonheur	1	1500	0.7



Data Reported as of September 27, 2013.
CLD = central line days
***** Significantly higher than NHSN pooled mean***
^^ Significantly lower than NHSN pooled mean
**** Zero infections, but not statistically significant***
NA = rates are not shown for units with <50 central line days
NHSN pooled mean (2006-2008)= 3.3; TN pooled mean (01/01/2012 - 12/31/2012)= 0.9

Figure 25: Central Line-Associated Blood Stream Infection (CLABSI) Rates per 1,000 Central Line Days in Tennessee, 01/01/2012 - 12/31/2012, Surgical Critical Care Units

HOSPITAL	CLABSI	CLD	RATE
Blount Memorial Hospital	1	1208	0.8
Erlanger Medical Center	4	1601	2.5
Holston Valley Medical Center	2	1738	1.2
Jackson Madison County General Hosp.^^	0	2969	0.0
Memorial Healthcare System	2	1018	2.0
Methodist University Hospital^^	0	1669	0.0
Parkridge Medical Center	2	2027	1.0
SkyRidge Medical Center	1	1233	0.8
St. Thomas Midtown (Baptist - Nashville)	2	2438	0.8
Summit Medical Center*	0	1038	0.0
Vanderbilt Medical Center^^	3	5197	0.6



Data Reported as of September 27, 2013.
CLD = central line days
***** Significantly higher than NHSN pooled mean***
^^ Significantly lower than NHSN pooled mean
**** Zero infections, but not statistically significant***
NA = rates are not shown for units with <50 central line days
NHSN pooled mean (2006-2008)= 2.3; TN pooled mean (01/01/2012 - 12/31/2012)= 0.9

CLABSI FIGURES AND TABLES

Neonatal Critical Care Units

Figure 26: Central Line-Associated Bloodstream Infection (CLABSI) Standardized Infection Ratios (SIRs) for Neonatal Intensive Care Units (NICUs) by Quarter, Tennessee, 01/01/2010–12/31/2012 [Reference standard: National Healthcare Safety Network (NHSN), 2006-8

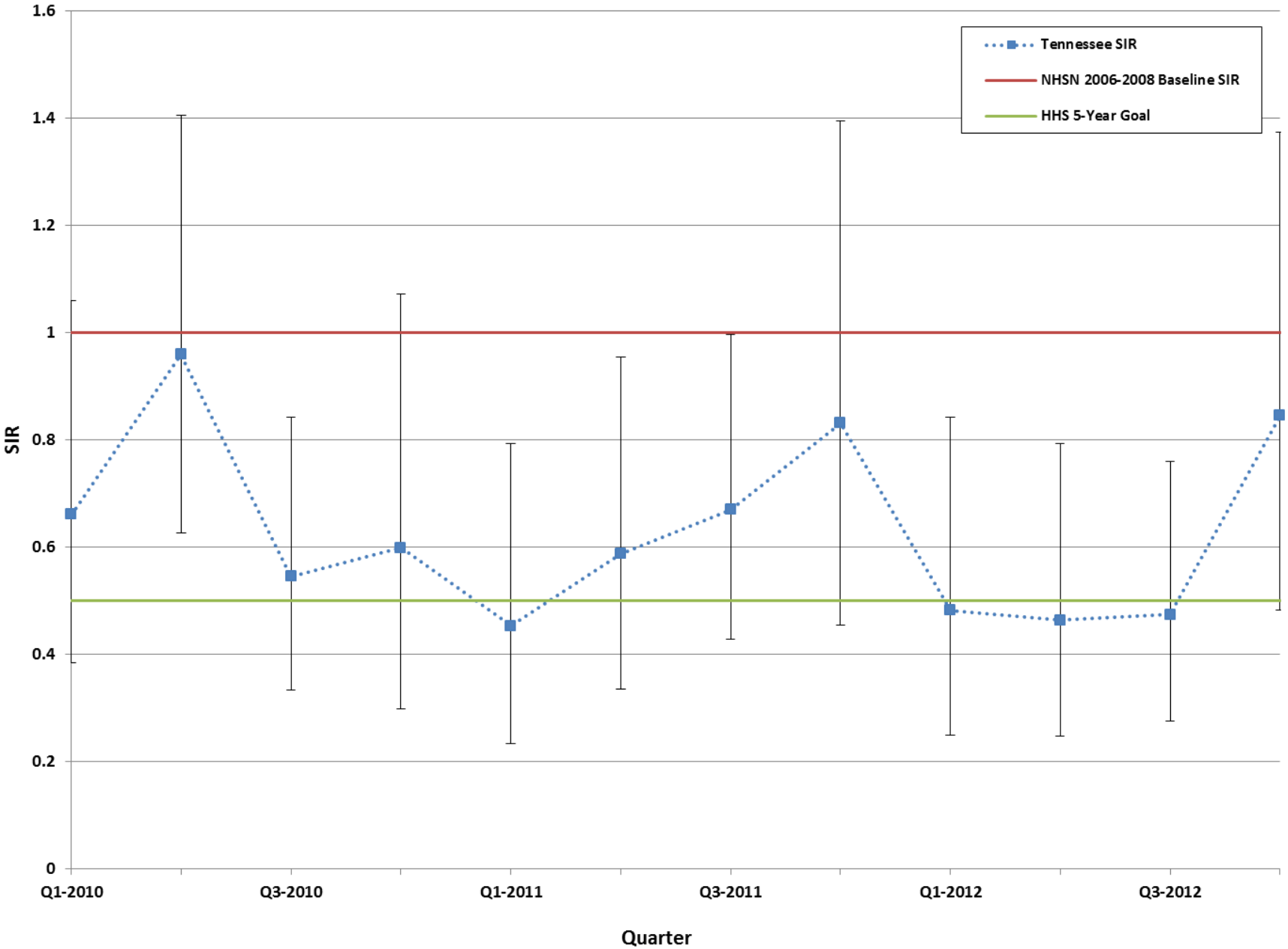


Table 9: Key Percentiles for Facility-Specific Central Line-Associated Bloodstream Infection (CLABSI) Standardized Infection Ratios (SIRs) in Neonatal Intensive Care Units (NICUs) by Reporting Year, Tennessee, 01/01/2010 - 12/31/2012

			SIR, 95% CONFIDENCE INTERVAL, AND KEY PERCENTILES							
STATE	YEAR	No.	SIR	LOWER LIMIT	UPPER LIMIT	10%	25%	50%	75%	90%
Tennessee	2012	24	0.54	0.41	0.70	0.00	0.15	0.46	0.70	0.94
	2011	24	0.62	0.48	0.79	0.18	0.33	0.66	0.88	1.47
	2010	24	0.69	0.54	0.86	0.35	0.45	0.60	1.08	1.24

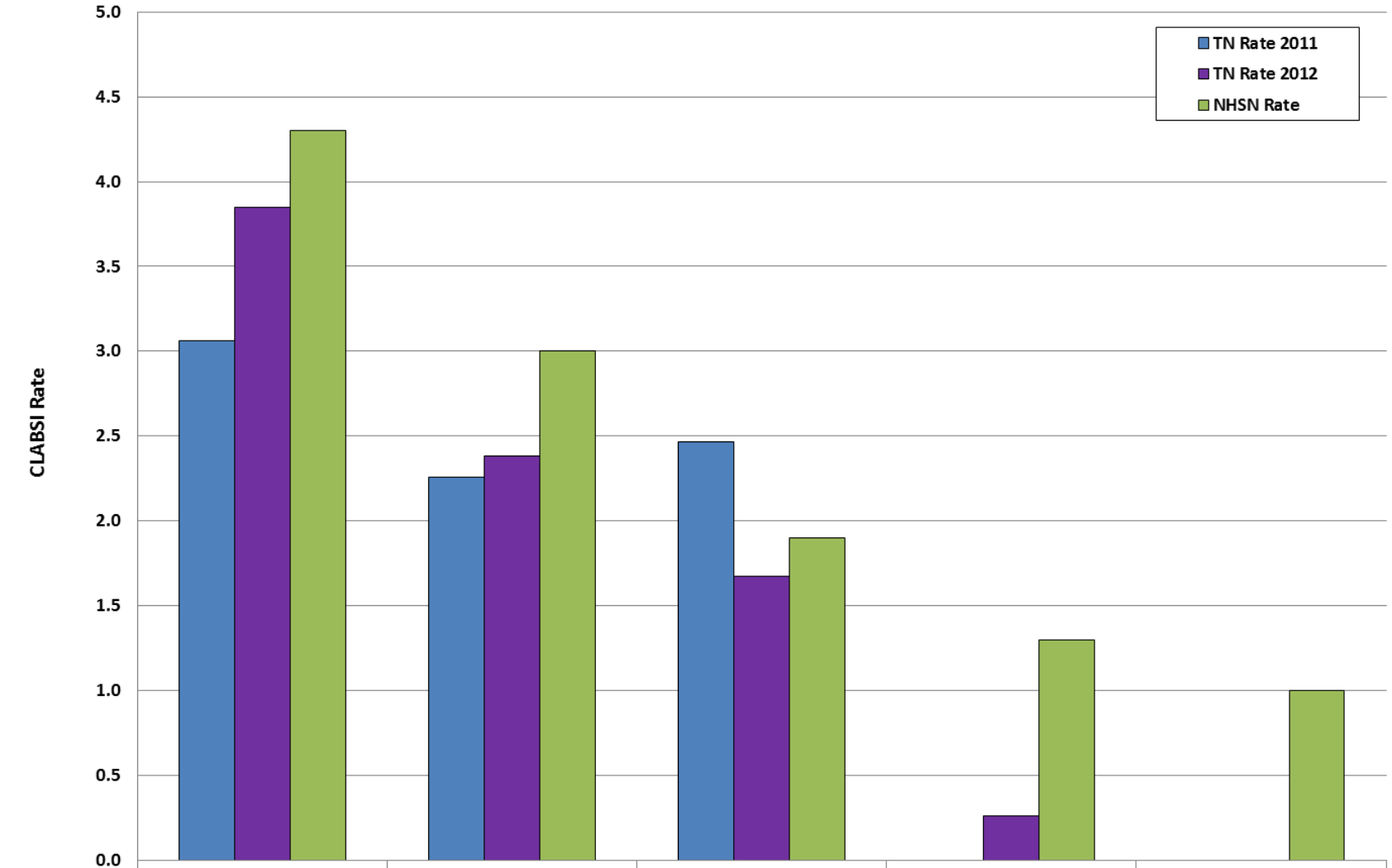
Data reported as of September 27, 2013
No. = number of facilities; SIR = standardized infection ratio (observed/predicted number of CLABSI)
Key percentiles include facilities with at least one predicted infection
Red highlighting indicates SIR for reporting period is significantly higher than national 2006-2008 SIR of 1.0
Green highlighting indicates SIR for reporting period is significantly lower than national 2006-2008 SIR of 1.0

Table 10: Key Percentiles for Unit-Specific Central Line-Associated Bloodstream Infection (CLABSI) Standardized Infection Ratios (SIRs) by NICU Type and Reporting Year, Tennessee, 01/01/2010 - 12/31/2012

			SIR, 95% CONFIDENCE INTERVAL, AND KEY PERCENTILES							
ICU TYPE	YEAR	No.	SIR	LOWER LIMIT	UPPER LIMIT	10%	25%	50%	75%	90%
Neonatal ICU Level II/III	2012	18	0.70	0.46	1.02	0.00	0.00	0.55	0.94	1.60
	2011	17	0.65	0.40	1.00	0.13	0.37	0.59	0.88	1.63
	2010	17	0.80	0.52	1.18	0.00	0.44	0.75	0.96	1.08
Neonatal ICU Level III	2012	7	0.45	0.30	0.64	0.00	0.19	0.43	0.66	0.70
	2011	7	0.61	0.45	0.81	0.18	0.24	0.73	0.94	1.47
	2010	7	0.64	0.47	0.84	0.35	0.45	0.57	1.24	1.26

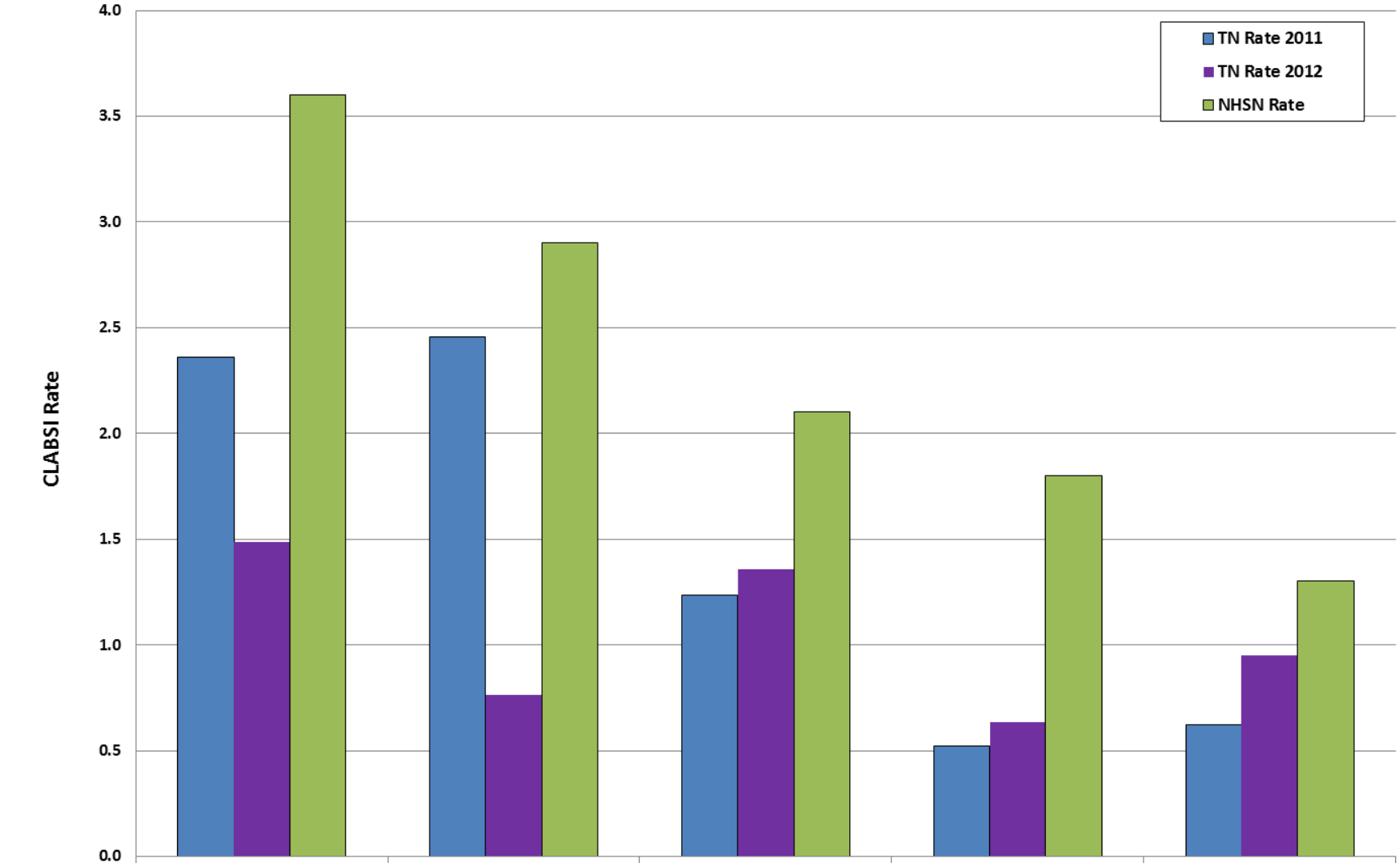
Data reported as of September 27, 2013
No. = number of facilities; SIR = standardized infection ratio (observed/predicted number of CLABSI)
Key percentiles include units with at least one predicted infection
Red highlighting indicates SIR for reporting period is significantly higher than national 2006-2008 SIR of 1.0
Green highlighting indicates SIR for reporting period is significantly lower than national 2006-2008 SIR of 1.0

Figure 27: Central Line-Associated Bloodstream Infection (CLABSI) Pooled Mean Rates per 1,000 Central Line Days in Level II/III Neonatal Intensive Care Units by Birth Weight Category, Tennessee, 2011 and 2012, vs. National Healthcare Safety Network (NHSN), 2006-8



	<750 g	751-1000 g	1001-1500 g	1501-2500 g	>2500 g
TN Rate 2011	3.1	2.3	2.5	0.0	0.0
TN Rate 2012	3.8	2.4	1.7	0.3	0.0
NHSN Rate	4.3	3	1.9	1.3	1

Figure 28: Central Line-Associated Bloodstream Infection (CLABSI) Pooled Mean Rates per 1,000 Central Line Days in Level III Neonatal Intensive Care Units by Birth Weight Category, Tennessee, 2011 and 2012, vs. National Healthcare Safety Network (NHSN), 2006-8



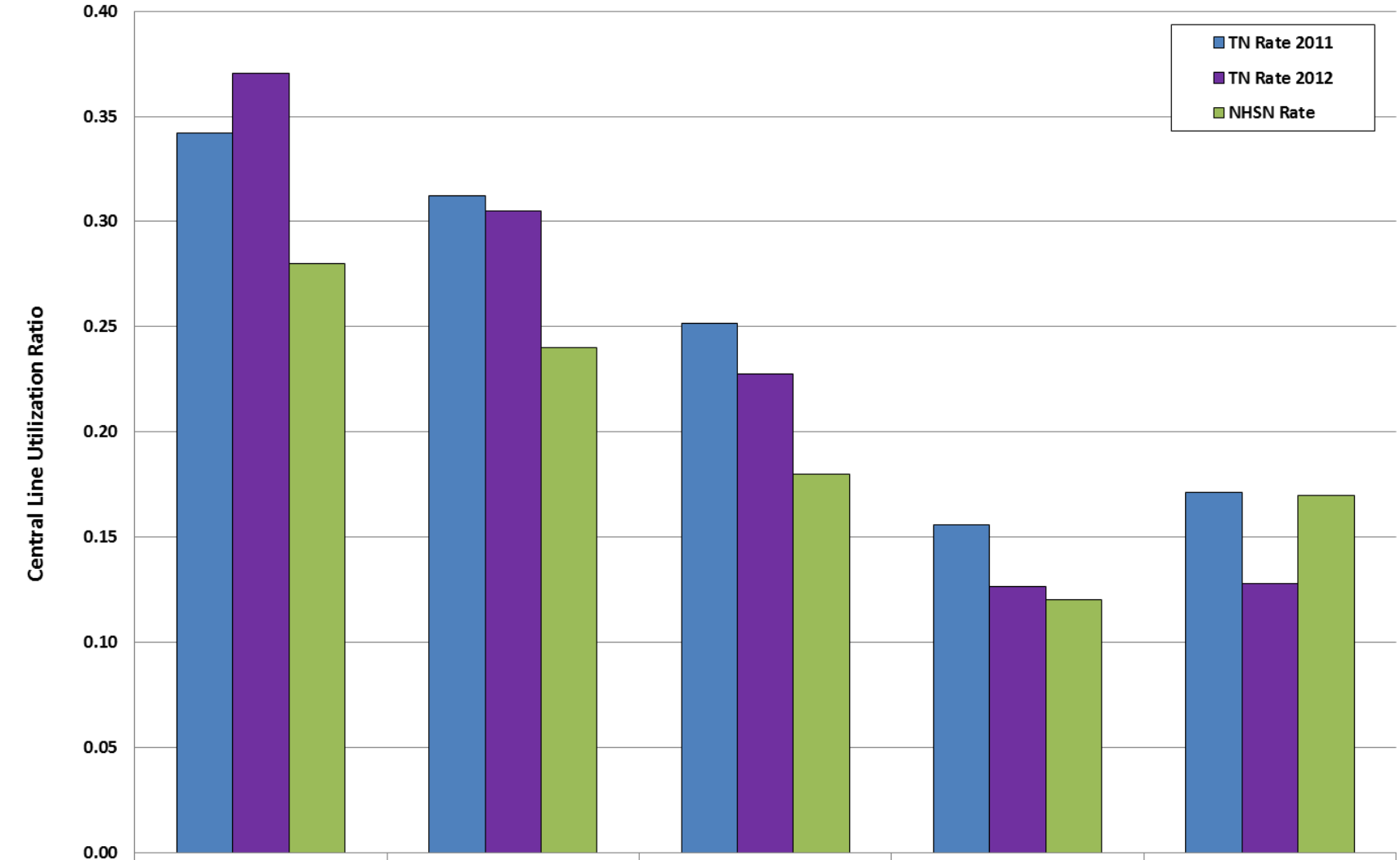
	<750 g	751-1000 g	1001-1500 g	1501-2500 g	>2500 g
TN Rate 2011	2.4	2.5	1.2	0.5	0.6
TN Rate 2012	1.5	0.8	1.4	0.6	1.0
NHSN Rate	3.6	2.9	2.1	1.8	1.3

Table 11: Comparison of Tennessee and National Healthcare Safety Network (NHSN) Central Line-Associated Bloodstream Infection (CLABSI) Rates and Standardized Infection Ratios (SIRs) by Type of Neonatal Intensive Care Unit (NICU), Tennessee, 01/01/2012 - 12/31/2012

		TENNESSEE 01/01/2012 - 12/31/2012					NHSN 2006-2008			SIR AND 95% CONFIDENCE INTERVAL		
ICU TYPE	Birth Weight Category	No.	CLABSI	CL DAYS	POOLED MEAN*	MEDIAN RATE*	CLABSI	CL DAYS	POOLED MEAN*	SIR	LOWER LIMIT	UPPER LIMIT
Neonatal ICU Level II/III	≤750 grams	18	13	3377	3.8	1.5	329	77283	4.3	0.90	0.48	1.55
	751-1000 grams	18	6	2520	2.4	0.0	199	65801	3.0	0.79	0.29	1.71
	1001-1500 grams	18	7	4181	1.7	0.0	145	78352	1.9	0.90	0.36	1.86
	1501-2500 grams	18	1	3765	0.3	0.0	82	62268	1.3	0.20	0.01	1.12
	>2500 grams	18	0	3995	0.0	0.0	65	65559	1.0	0.00	0.00	0.93
	TOTAL									0.70	0.46	1.02
Neonatal ICU Level III	≤750 grams	7	9	6061	1.5	0.6	559	155220	3.6	0.41	0.19	0.78
	751-1000 grams	7	4	5235	0.8	0.0	413	140785	2.9	0.26	0.07	0.67
	1001-1500 grams	7	7	5153	1.4	0.0	306	147305	2.1	0.65	0.26	1.35
	1501-2500 grams	7	4	6302	0.6	0.0	223	122883	1.8	0.35	0.10	0.90
	>2500 grams	7	7	7347	1.0	0.0	170	128245	1.3	0.72	0.29	1.48
	TOTAL									0.45	0.30	0.64
TOTAL										0.54	0.41	0.70

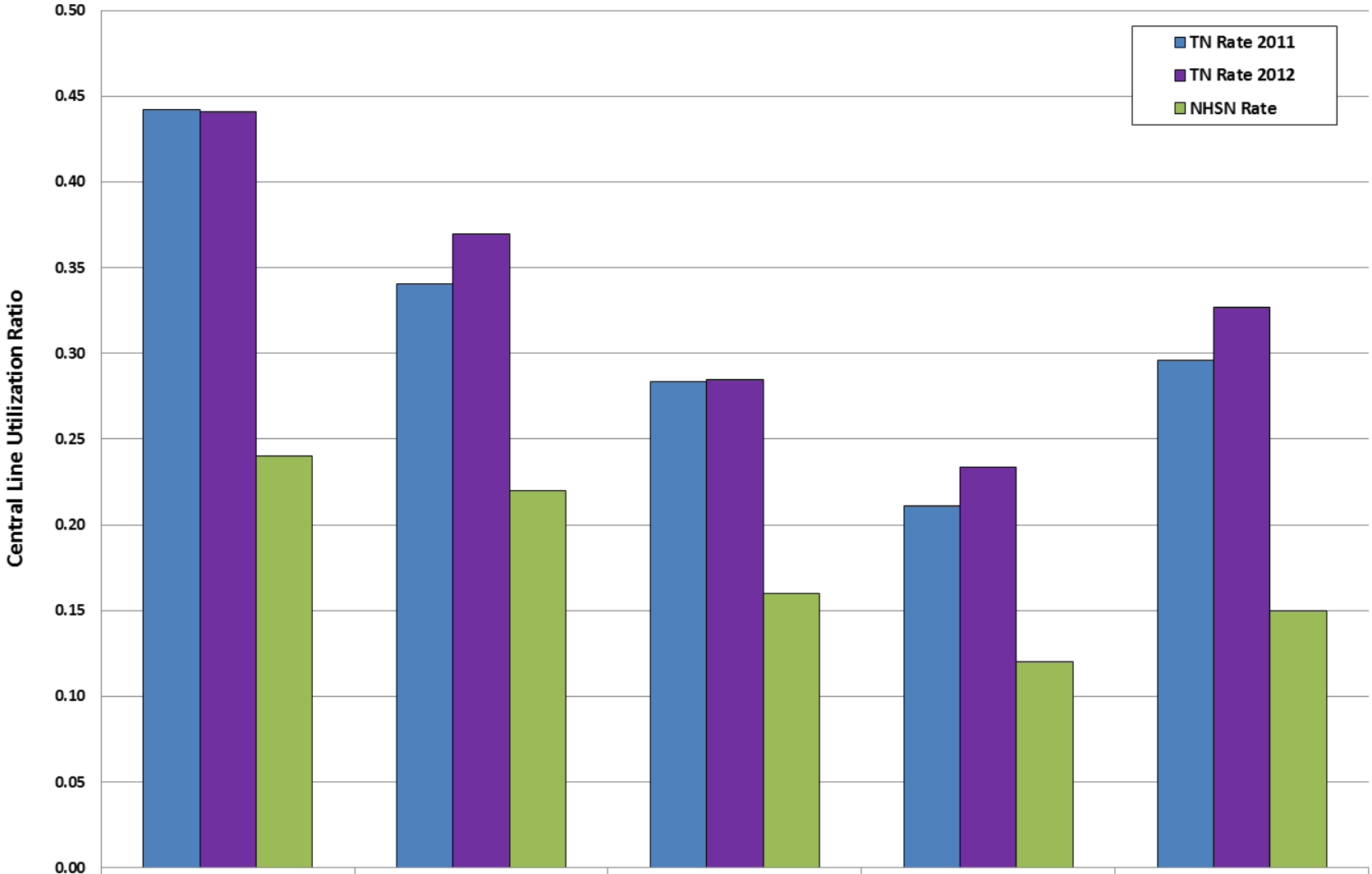
Data reported as of September 27, 2013
No. = number of facilities
CLDays = Central Line Days
SIR = standardized infection ratio (observed/predicted number of CLABSI)
NA = not available
****per 1000 central line days***
Red highlighting indicates SIR for reporting period is significantly higher than national 2006-2008 SIR of 1.0
Green highlighting indicates SIR for reporting period is significantly lower than national 2006-2008 SIR of 1.0

Figure 29: Central Line Utilization Ratios in Level II/III Neonatal Intensive Care Units (NICUs), Tennessee, 2011 and 2012, *vs.* National Healthcare Safety Network (NHSN), 2006-8



	<750 g	751-1000 g	1001-1500 g	1501-2500 g	>2500 g
TN Rate 2011	0.34	0.31	0.25	0.16	0.17
TN Rate 2012	0.37	0.30	0.23	0.13	0.13
NHSN Rate	0.28	0.24	0.18	0.12	0.17

Figure 30: Central Line Utilization Ratios in Level III Neonatal Intensive Care Units (NICUs), Tennessee, 2011 and 2012, vs. National Healthcare Safety Network (NHSN), 2006-8



	<750 g	751-1000 g	1001-1500 g	1501-2500 g	>2500 g
TN Rate 2011	0.44	0.34	0.28	0.21	0.30
TN Rate 2012	0.44	0.37	0.28	0.23	0.33
NHSN Rate	0.24	0.22	0.16	0.12	0.15

Figure 31: Organisms Isolated from Central Line-Associated Bloodstream Infections (CLABSIs) in Neonatal Intensive Care Units, Tennessee, 01/01/2012–12/31/2012

Number of isolates = 66; Number of events = 60

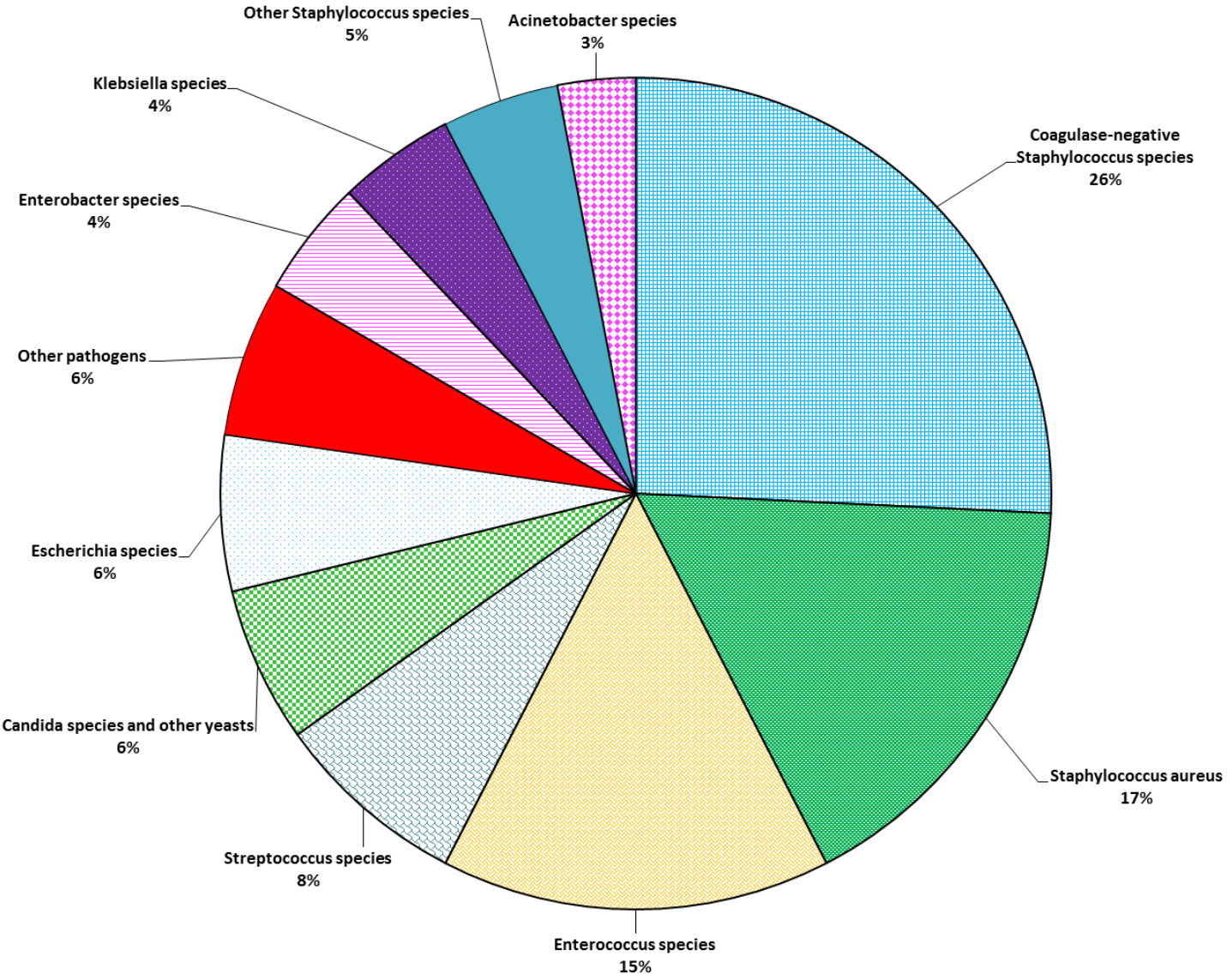


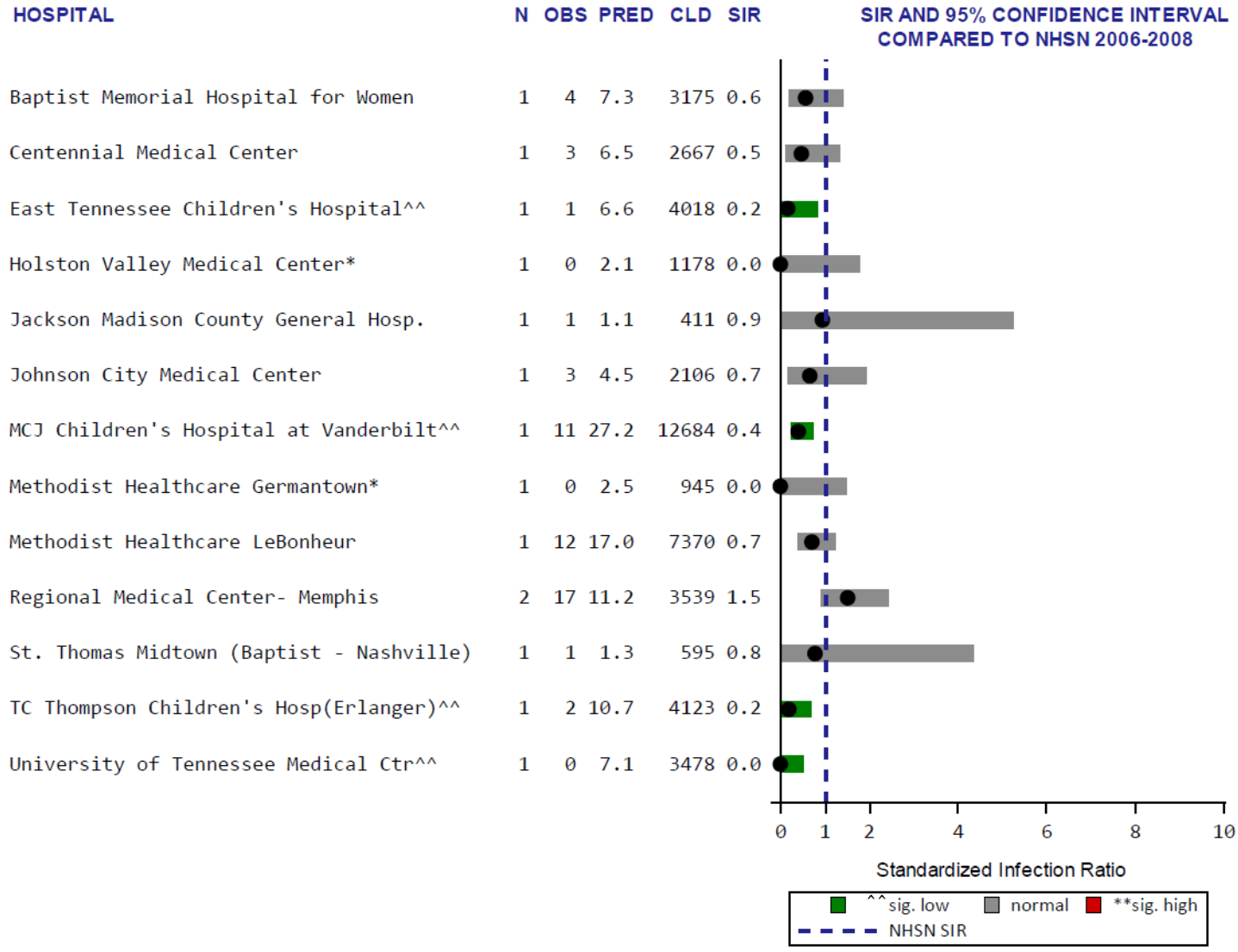
Table 12: Microorganisms Identified in Central Line -Associated Bloodstream Infections (CLABSIs), Neonatal Intensive Care Units, Tennessee, 01/01/2012–12/31/2012

Number of isolates = 66; Number of events = 60

Microorganism	Number of Isolates	Percent
Coagulase-negative *Staphylococcus* species	17	25.8
Staphylococcus aureus	11	16.7
Methicillin-resistant *S. aureus* (MRSA) (% of total positive isolates)	6	(9.1)
Enterococcus species	10	15.2
Streptococcus species	5	7.6
Candida species and other yeasts	4	6.1
Escherichia species	4	6.1
Enterobacter species	3	4.5
Klebsiella species	3	4.5
Other *Staphylococcus* species	3	4.5
Acinetobacter species	2	3.0
Other pathogens	4	6.1

Data reported as of September 27, 2013
Other pathogens = Acanthamoeba spp., Delftia acidovorans, Gram-negative bacillus, Sphingomonas paucimobilis

Figure 32: CLABSI Standardized Infection Ratio (SIR) for Neonatal Intensive Care Units in Facilities with ≥1 Predicted CLABSI, Tennessee, 01/01/2012 – 12/31/2012



Data Reported from neonatal ICUs as of September 27, 2013.
N = number of types of intensive care units reporting
OBS = observed number of CLABSI
PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data
SIR = standardized infection ratio (observed/predicted number of CLABSI)
CLD = number of central line days
NA = data not shown for hospitals with <50 central line days
****** Significantly higher than national baseline***
^^ Significantly lower than national baseline
*** Zero infections, but not statistically significant***

CLABSI FIGURES AND TABLES

Long-term Acute Care Facilities

Figure 33: Standardized Infection Ratio (SIR) for Central Line-Associated Bloodstream Infections (CLABSIs) for Long-term Acute Care (LTAC) Facilities by Quarter, Tennessee, 07/01/2010–12/31/2012 [Reference standard: National Healthcare Safety Network (NHSN), 2006-8]

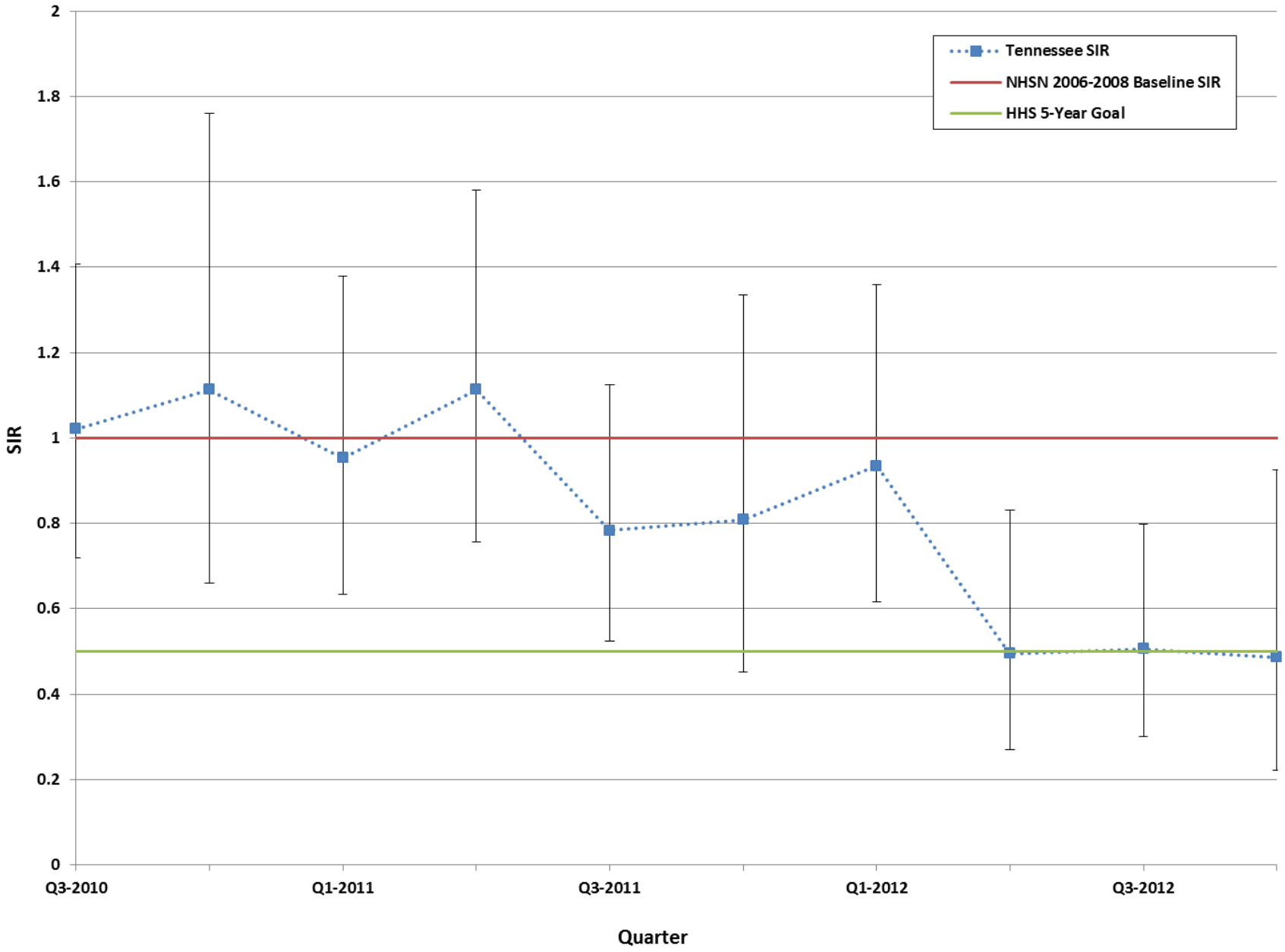


Table 13: Key Percentiles for Facility-Specific Central Line-Associated Bloodstream Infection (CLABSI) Standardized Infection Ratios (SIRs) in Long-term Acute Care (LTAC) Facilities by Reporting Year, Tennessee, 07/01/2010 - 12/31/2012

			SIR, 95% CONFIDENCE INTERVAL, AND KEY PERCENTILES							
STATE	YEAR	No.	SIR	LOWER LIMIT	UPPER LIMIT	10%	25%	50%	75%	90%
Tennessee	2012	9	0.61	0.47	0.77	0.17	0.50	0.57	0.81	1.11
	2011	9	0.91	0.75	1.11	0.07	0.48	1.00	1.45	1.50
	2010	9	1.05	0.79	1.37	0.00	0.45	1.26	1.42	2.66

Data reported as of September 27, 2013
No. = number of facilities; SIR = standardized infection ratio (observed/predicted number of CLABSI)
Key percentiles include facilities with at least one predicted infection
Red highlighting indicates SIR for reporting period is significantly higher than national 2006-2008 SIR of 1.0
Green highlighting indicates SIR for reporting period is significantly lower than national 2006-2008 SIR of 1.0

Table 14: Comparison of Tennessee and National Healthcare Safety Network (NHSN) Central Line-Associated Bloodstream Infection (CLABSI) Rates and Standardized Infection Ratios (SIRs) by Long-term Acute Care (LTAC) Location, 01/01/2012 - 12/31/2012

	TENNESSEE 01/01/2012 - 12/31/2012					NHSN 2006-2008				SIR AND 95% CONFIDENCE INTERVAL		
LOCATION TYPE	No.	CLABSI	CL DAYS	POOLED MEAN*	MEDIAN RATE*	CLABSI	CL DAYS	POOLED MEAN*	MEDIAN RATE*	SIR	LOWER LIMIT	UPPER LIMIT
LTAC Ward	9	68	64435	1.1	1.0	298	172576	1.7	NA	0.61	0.47	0.77

Data reported as of September 27, 2013
No. = number of facilities
CLDays = Central Line Days
SIR = standardized infection ratio (observed/predicted number of CLABSI)
NA = NHSN 2006-2008 baseline data not available
**per 1000 central line days*
Red highlighting indicates SIR for reporting period is significantly higher than national 2006-2008 SIR of 1.0
Green highlighting indicates SIR for reporting period is significantly lower than national 2006-2008 SIR of 1.0

Figure 34: Organisms Isolated from Central Line-Associated Bloodstream Infections (CLABSIs) in Long-term Acute Care Facilities, Tennessee, 01/01/2012–12/31/2012

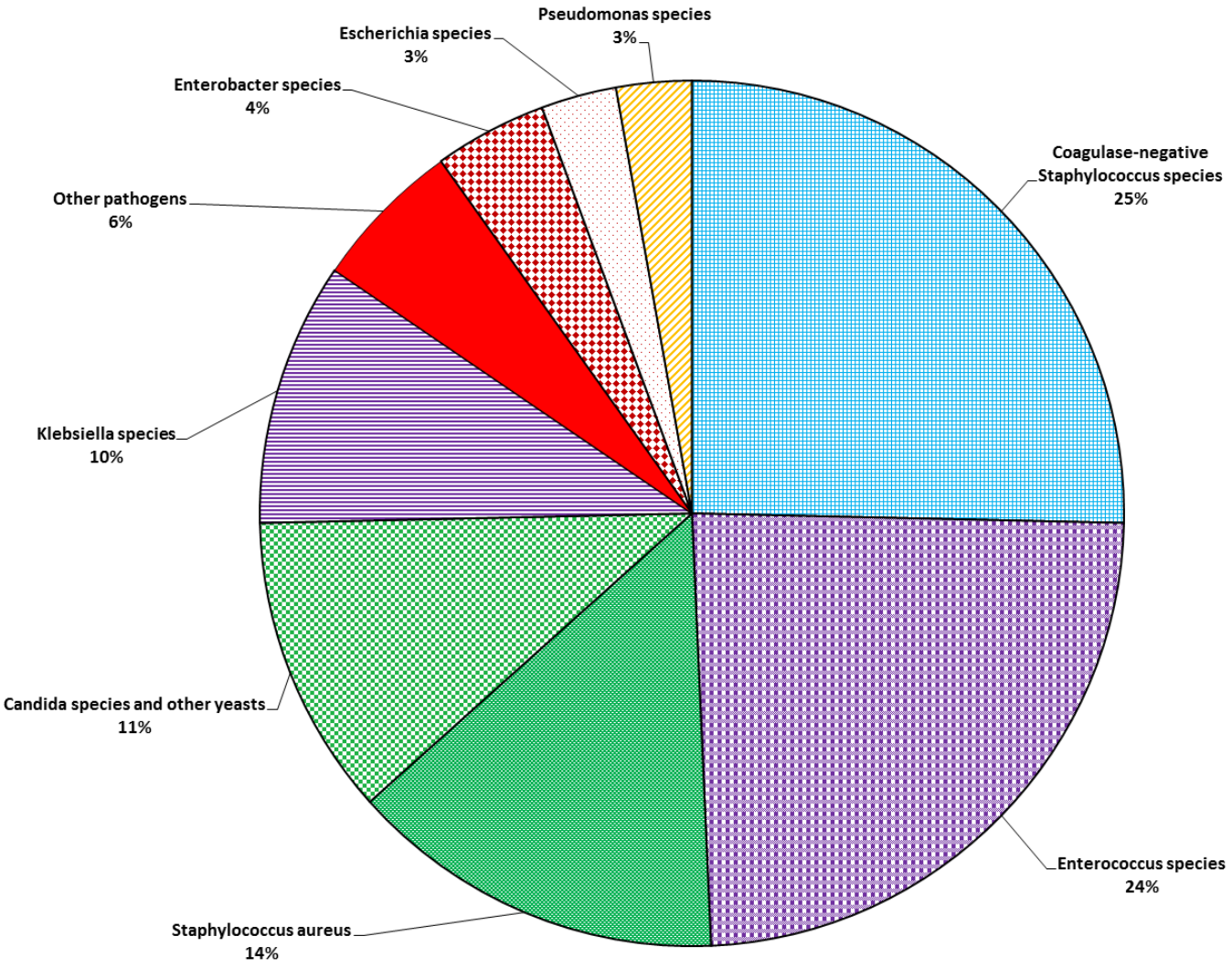


Table 15: Microorganisms Identified in Central Line-Associated Bloodstream Infections (CLABSIs) in Long-term Acute Care Facilities, Tennessee, 01/01/2012 - 12/31/2012

Number of isolates = 71; Number of events = 68

Microorganism	Number of Isolates	Percent
Coagulase-negative *Staphylococcus* species	18	25.4
Enterococcus species	17	23.9
Vancomycin-resistant *Enterococcus* (VRE) (% of total positive isolates)	8	(11.3)
Staphylococcus aureus	10	14.1
Methicillin-resistant *S. aureus* (MRSA) (% of total positive isolates)	9	(12.7)
Candida species and other yeasts	8	11.3
Klebsiella species	7	9.9
Enterobacter species	3	4.2
Escherichia species	2	2.8
Pseudomonas species	2	2.8
Other pathogens	4	5.6

Data reported as of September 27, 2013
Other pathogens = Acinetobacter spp., Citrobacter spp., Proteus spp., Stenotrophomonas spp.

CAUTI FIGURES AND TABLES

Adult and Pediatric Critical Care Units

Figure 35: Standardized Infection Ratios (SIR) for Catheter-Associated Urinary Tract Infections (CAUTIs) for Adult and Pediatric Intensive Care Units (ICUs) by Quarter, Tennessee, 01/01/2012–12/31/2012 [Reference standard: National Healthcare Safety Network (NHSN), 2009]

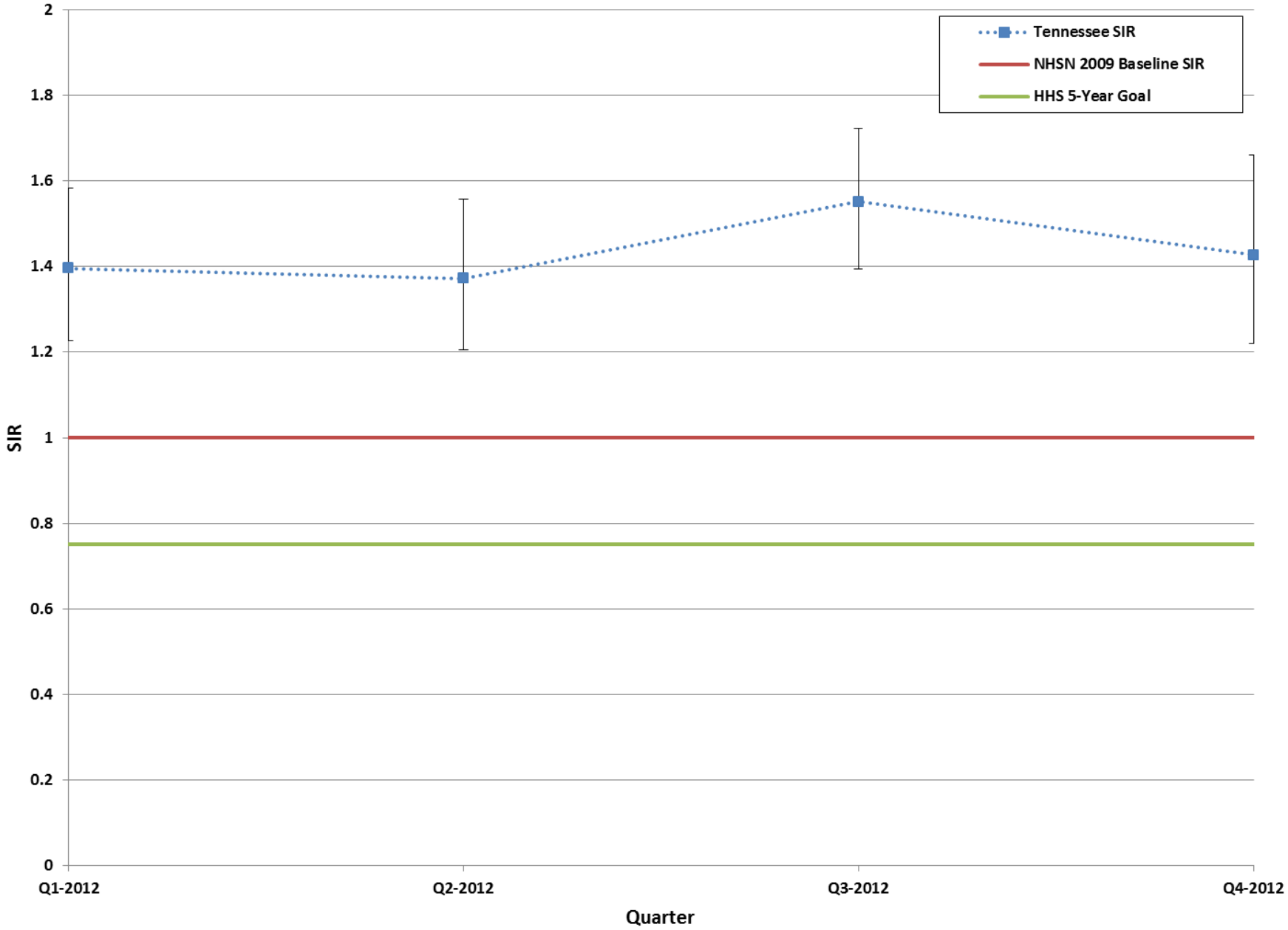


Table 16: Key Percentiles for Facility-Specific Catheter-Associated Urinary Tract Infection (CAUTI) Standardized Infection Ratios (SIRs) in Adult and Pediatric Intensive Care Units (ICUs) by Reporting Year, Tennessee, 01/01/2012 - 12/31/2012

			SIR, 95% CONFIDENCE INTERVAL, AND KEY PERCENTILES							
STATE	YEAR	No.	SIR	LOWER LIMIT	UPPER LIMIT	10%	25%	50%	75%	90%
Tennessee	2012	93	1.45	1.36	1.54	0.00	0.39	1.16	1.82	2.44

Data reported as of September 27, 2013
No. = number of facilities; SIR = standardized infection ratio (observed/predicted number of CAUTI)
Key percentiles include facilities with at least one predicted infection
Red highlighting indicates SIR for reporting period is significantly higher than national 2009 SIR of 1.0
Green highlighting indicates SIR for reporting period is significantly lower than national 2009 SIR of 1.0

Figure 36: Standardized Infection Ratios (SIRs) for Catheter-Associated Urinary Tract Infections (CAUTIs) by Intensive Care Unit (ICU) Type, Tennessee, 2012 [Reference standard: National Healthcare Safety Network (NHSN), 2009]

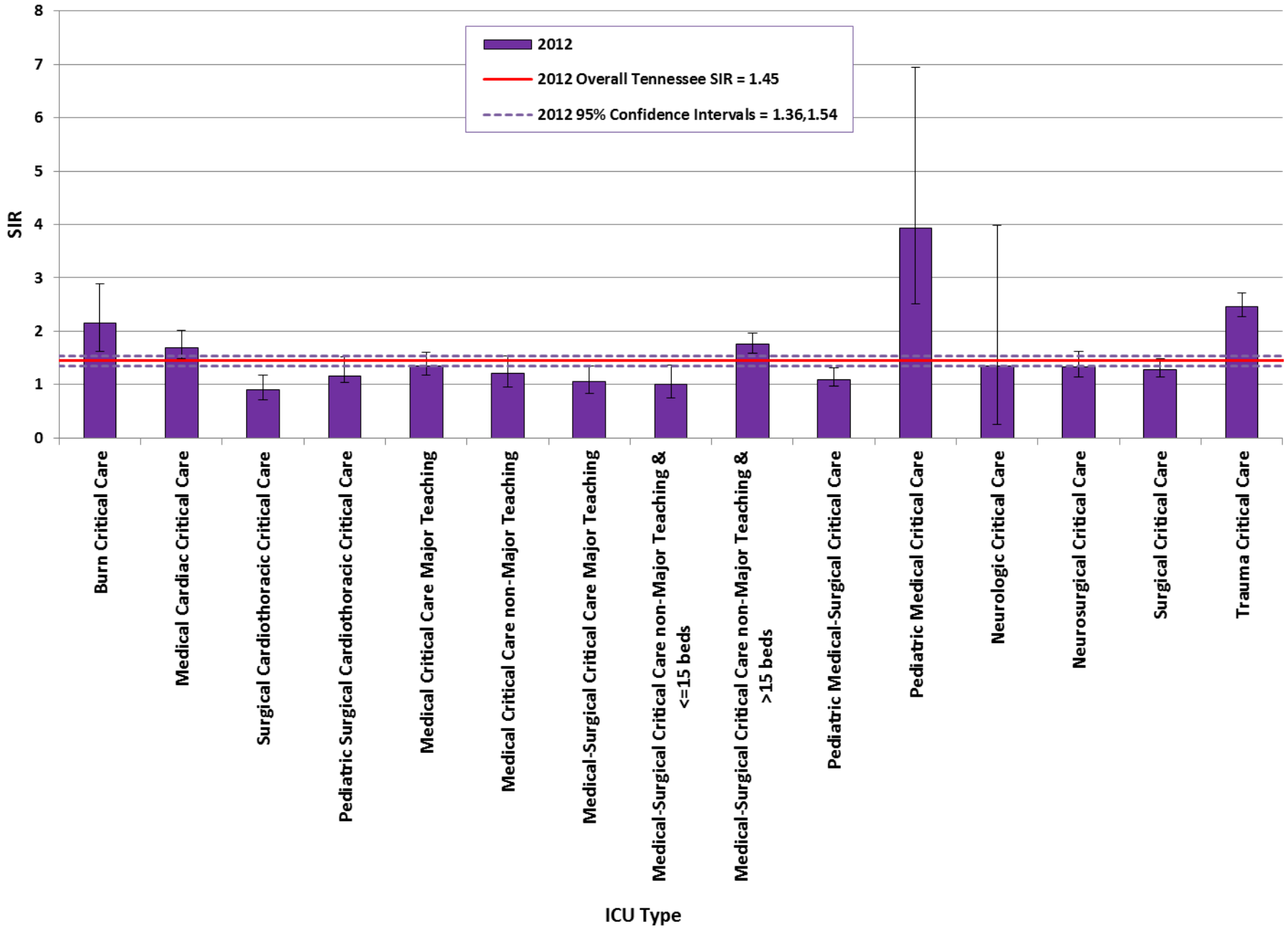


Table 17: Key Percentiles for Unit-Specific Catheter-Associated Urinary Tract Infection (CAUTI) Standardized Infection Ratios (SIRs) by Type of Intensive Care Unit (ICU) and Reporting Year, Tennessee, 01/01/2012 - 12/31/2012

			SIR, 95% CONFIDENCE INTERVAL, AND KEY PERCENTILES							
ICU TYPE	YEAR	No.	SIR	LOWER LIMIT	UPPER LIMIT	10%	25%	50%	75%	90%
Burn Critical Care	2012	2	2.15	1.43	3.11	NA	NA	NA	NA	NA
Medical Cardiac Critical Care	2012	8	1.69	1.29	2.18	0.75	1.5	1.76	2.22	3.08
Medical Critical Care Major Teaching	2012	6	1.35	1.03	1.73	0	0	1.19	1.65	2.48
Medical Critical Care Non-Major Teaching	2012	22	1.21	0.97	1.50	0	0	0.53	1.59	2.38
Medical-Surgical Critical Care Major Teaching	2012	6	1.06	0.80	1.38	0.07	0.43	0.88	1.83	3.37
Medical-Surgical Critical Care Non-Major Teaching & >15 beds	2012	19	1.76	1.50	2.05	0	0.86	1.6	2.34	3.08
Medical-Surgical Critical Care Non-Major Teaching & ≤15 beds	2012	40	1.00	0.74	1.31	0	0.35	1.19	1.83	2.56
Neurologic Critical Care	2012	1	1.35	0.62	2.56	NA	NA	NA	NA	NA
Neurosurgical Critical Care	2012	9	1.33	1.11	1.59	0.5	0.8	1.28	1.77	2.76
Pediatric Medical Critical Care	2012	2	3.93	0.81	11.5	NA	NA	NA	NA	NA
Pediatric Medical-Surgical Critical Care	2012	8	1.09	0.60	1.83	NA	NA	NA	NA	NA
Pediatric Surgical Cardiothoracic Critical Care	2012	2	1.16	0.32	2.98	NA	NA	NA	NA	NA
Surgical Cardiothoracic Critical Care	2012	15	0.91	0.69	1.18	0	0.48	0.86	1.56	1.85
Surgical Critical Care	2012	11	1.28	1.04	1.57	0.21	0.74	1.43	1.71	1.93
Trauma Critical Care	2012	6	2.46	2.12	2.84	0.68	0.95	2.59	2.7	3.34

Data reported as of September 27, 2013
No. = number of facilities; SIR = standardized infection ratio (observed/predicted number of CAUTI)
NA = not reported if the number of facilities is <5
Key percentiles include units with at least one predicted infection
Red highlighting indicates SIR for reporting period is significantly higher than national 2009 SIR of 1.0
Green highlighting indicates SIR for reporting period is significantly lower than national 2009 SIR of 1.0

Figure 37: Catheter-Associated Urinary Tract Infection (CAUTI) Pooled Mean Rates per 1,000 Catheter Days by Intensive Care Unit (ICU) Type, Tennessee, 2012, vs. National Healthcare Safety Network (NHSN), 2009

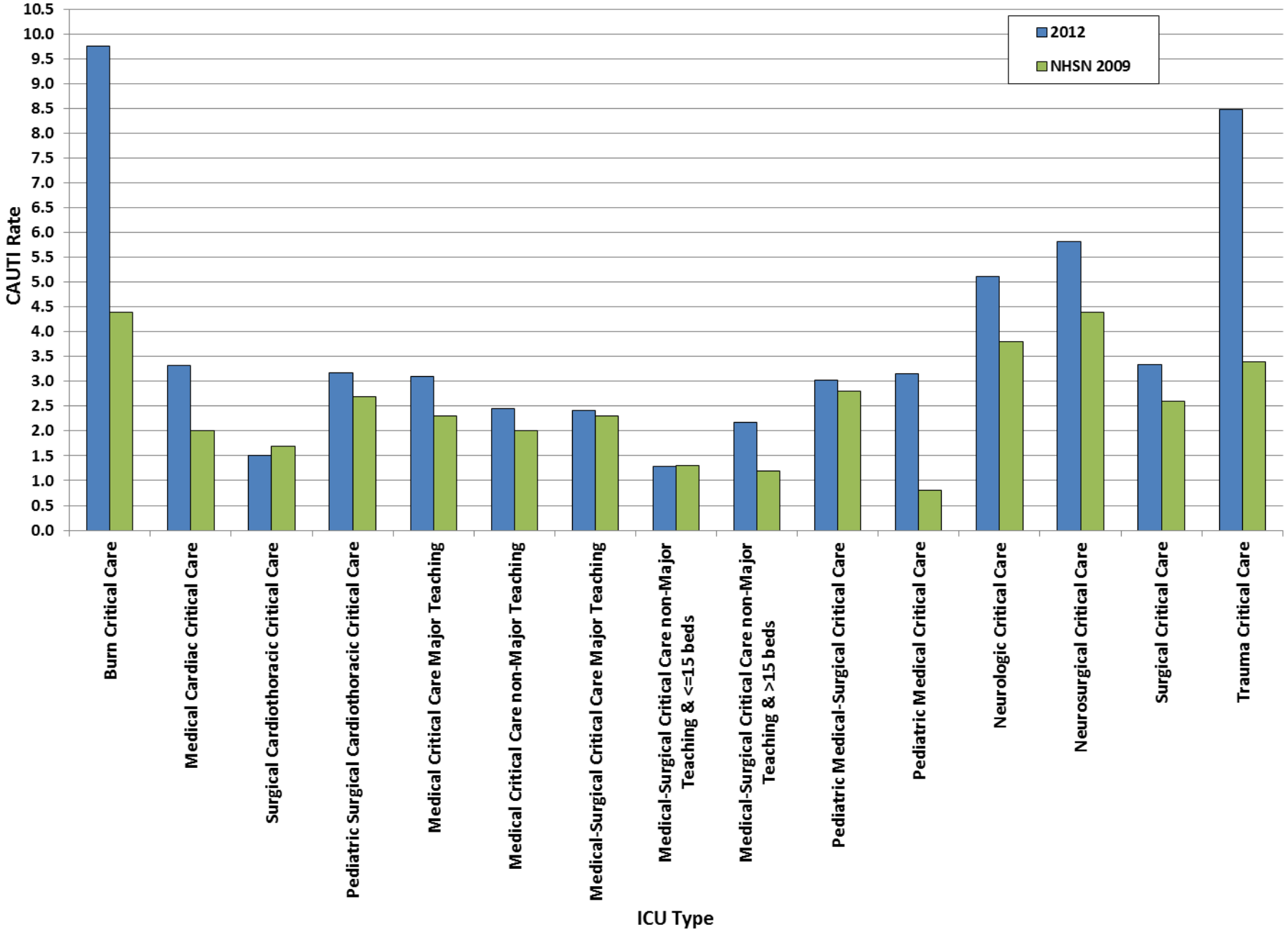
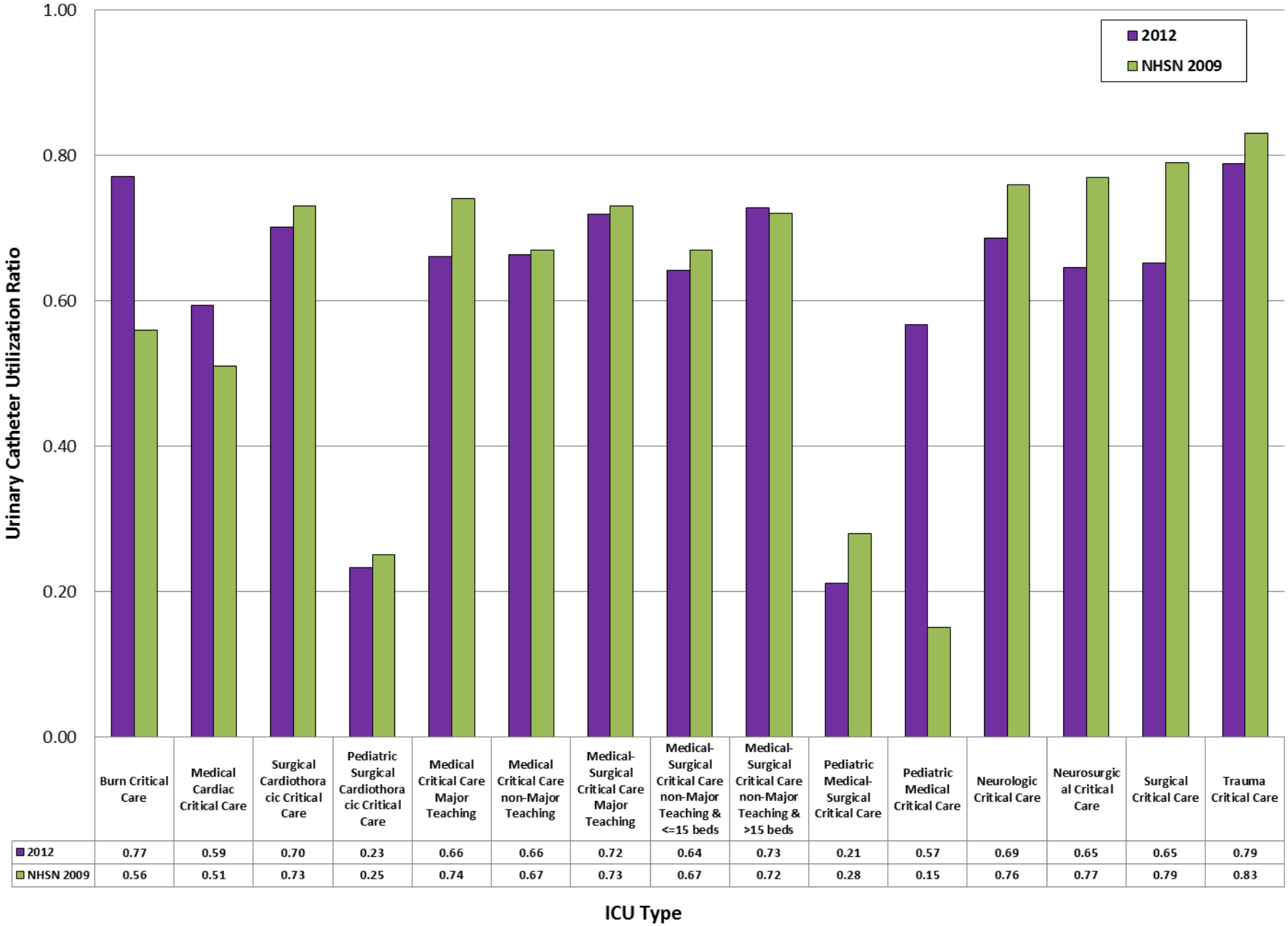


Table 18: Comparison of Tennessee and National Healthcare Safety Network (NHSN) Catheter-Associated Urinary Tract Infection (CAUTI) Rates and Standardized Infection Ratios (SIRs) by Type of Intensive Care Unit (ICU), 01/01/2012 - 12/31/2012

	TENNESSEE 01/01/2012 - 12/31/2012					NHSN 2009				SIR AND 95% CONFIDENCE INTERVAL		
ICU TYPE	No.	CAUTI	UC DAYS	POOLED MEAN*	MEDIAN RATE*	CAUTI	UC DAYS	POOLED MEAN*	MEDIAN RATE*	SIR	LOWER LIMIT	UPPER LIMIT
Burn Critical Care	2	28	2868	9.8	9.8	92	20291	4.4	NA	2.15	1.43	3.11
Medical Cardiac Critical Care	8	59	17815	3.3	3.4	348	177455	2.0	1.6	1.69	1.29	2.18
Medical Critical Care Major Teaching	6	60	19337	3.1	2.7	342	148501	2.3	1.7	1.35	1.03	1.73
Medical Critical Care Non-Major Teaching	22	88	35850	2.5	0.2	351	173724	2.0	1.4	1.21	0.97	1.50
Medical-Surgical Critical Care Major Teaching	6	56	23156	2.4	2.0	593	260079	2.3	1.9	1.06	0.80	1.38
Medical-Surgical Critical Care Non-Major Teaching & >15 beds	19	164	75182	2.2	2.0	510	410556	1.2	1.1	1.76	1.50	2.05
Medical-Surgical Critical Care Non-Major Teaching & ≤15 beds	40	50	38910	1.3	1.4	449	348334	1.3	0.0	1.00	0.74	1.31
Neurologic Critical Care	1	9	1763	5.1	NA	124	32777	3.8	NA	1.35	0.62	2.56
Neurosurgical Critical Care	9	127	21810	5.8	5.6	357	81783	4.4	3.6	1.33	1.11	1.59
Pediatric Medical Critical Care	2	3	950	3.2	1.6	1	1244	0.8	NA	3.93	0.81	11.5
Pediatric Medical-Surgical Critical Care	8	14	4620	3.0	1.5	139	49935	2.8	1.4	1.09	0.60	1.83
Pediatric Surgical Cardiothoracic Critical Care	2	4	1262	3.2	3.3	25	9187	2.7	NA	1.16	0.32	2.98
Surgical Cardiothoracic Critical Care	15	58	38272	1.5	1.3	307	184567	1.7	1.2	0.91	0.69	1.18
Surgical Critical Care	11	95	28469	3.3	3.7	611	235104	2.6	2.0	1.28	1.04	1.57
Trauma Critical Care	6	189	22303	8.5	8.9	437	126916	3.4	2.8	2.46	2.12	2.84
TOTAL										1.45	1.36	1.54

Data reported as of September 27, 2013
No. = number of facilities
UC Days = Urinary Catheter Days
SIR = standardized infection ratio (observed/predicted number of CAUTI)
NA = not available
****per 1000 urinary catheter days***
Red highlighting indicates SIR for reporting period is significantly higher than national 2009 SIR of 1.0
Green highlighting indicates SIR for reporting period is significantly lower than national 2009 SIR of 1.0

Figure 38: Catheter Utilization Ratio by Intensive Care Unit (ICU) Type, Tennessee, 2012, vs. National Healthcare Safety Network (NHSN), 2009



	Burn Critical Care	Medical Cardiac Critical Care	Surgical Cardiothoracic Critical Care	Pediatric Surgical Cardiothoracic Critical Care	Medical Critical Care Major Teaching	Medical Critical Care non-Major Teaching	Medical-Surgical Critical Care Major Teaching	Medical-Surgical Critical Care non-Major Teaching & <=15 beds	Medical-Surgical Critical Care non-Major Teaching & >15 beds	Pediatric Medical-Surgical Critical Care	Pediatric Medical Critical Care	Neurologic Critical Care	Neurosurgical Critical Care	Surgical Critical Care	Trauma Critical Care
2012	0.77	0.59	0.70	0.23	0.66	0.66	0.72	0.64	0.73	0.21	0.57	0.69	0.65	0.65	0.79
NHSN 2009	0.56	0.51	0.73	0.25	0.74	0.67	0.73	0.67	0.72	0.28	0.15	0.76	0.77	0.79	0.83

Figure 39: Organisms Isolated from Catheter-Associated Urinary Tract Infections (CAUTIs) in Adult and Pediatric Intensive Care Units, Tennessee, 01/01/2012–12/31/2012

Number of isolates = 1101; Number of events = 1004

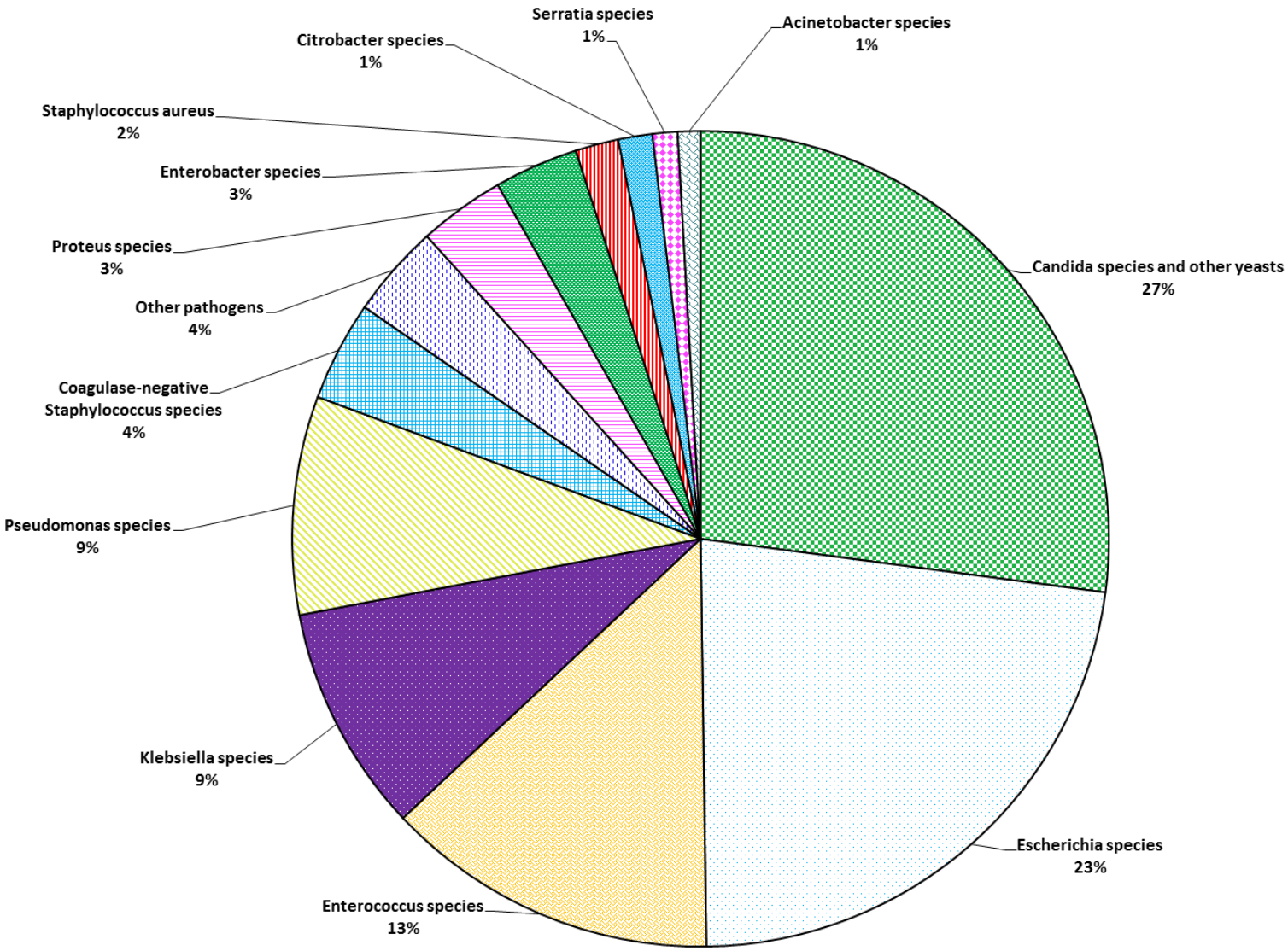


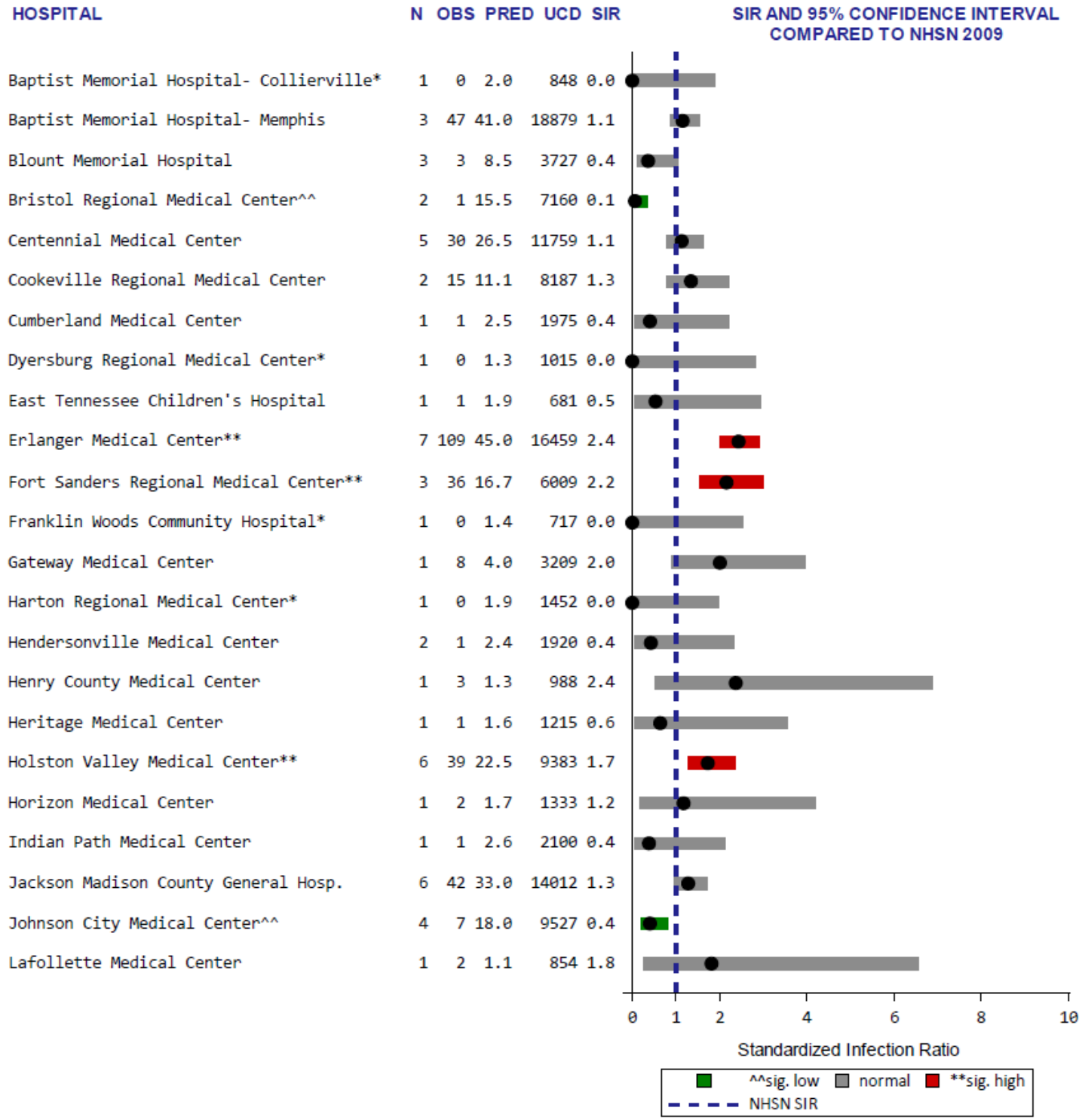
Table 19: Microorganisms Identified in Catheter-Associated Urinary Tract Infections (CAUTIs) in Adult and Pediatric Intensive Care Units, Tennessee, 01/01/2012 - 12/31/2012

Number of isolates = 1101; Number of events = 1004

Microorganism	Number of Isolates	Percent
Candida species and other yeasts	301	27.3
Escherichia species	252	22.9
Enterococcus species	147	13.4
Vancomycin-resistant *Enterococcus* (VRE) (% of total positive isolates)	16	(1.5)
Klebsiella species	100	9.1
Pseudomonas species	96	8.7
Coagulase-negative *Staphylococcus* species	44	4.0
Proteus species	38	3.5
Enterobacter species	37	3.4
Staphylococcus aureus	19	1.7
Methicillin-resistant *S. aureus* (MRSA) (% of total positive isolates)	7	(0.6)
Citrobacter species	15	1.4
Serratia species	11	1.0
Other pathogens	41	3.7

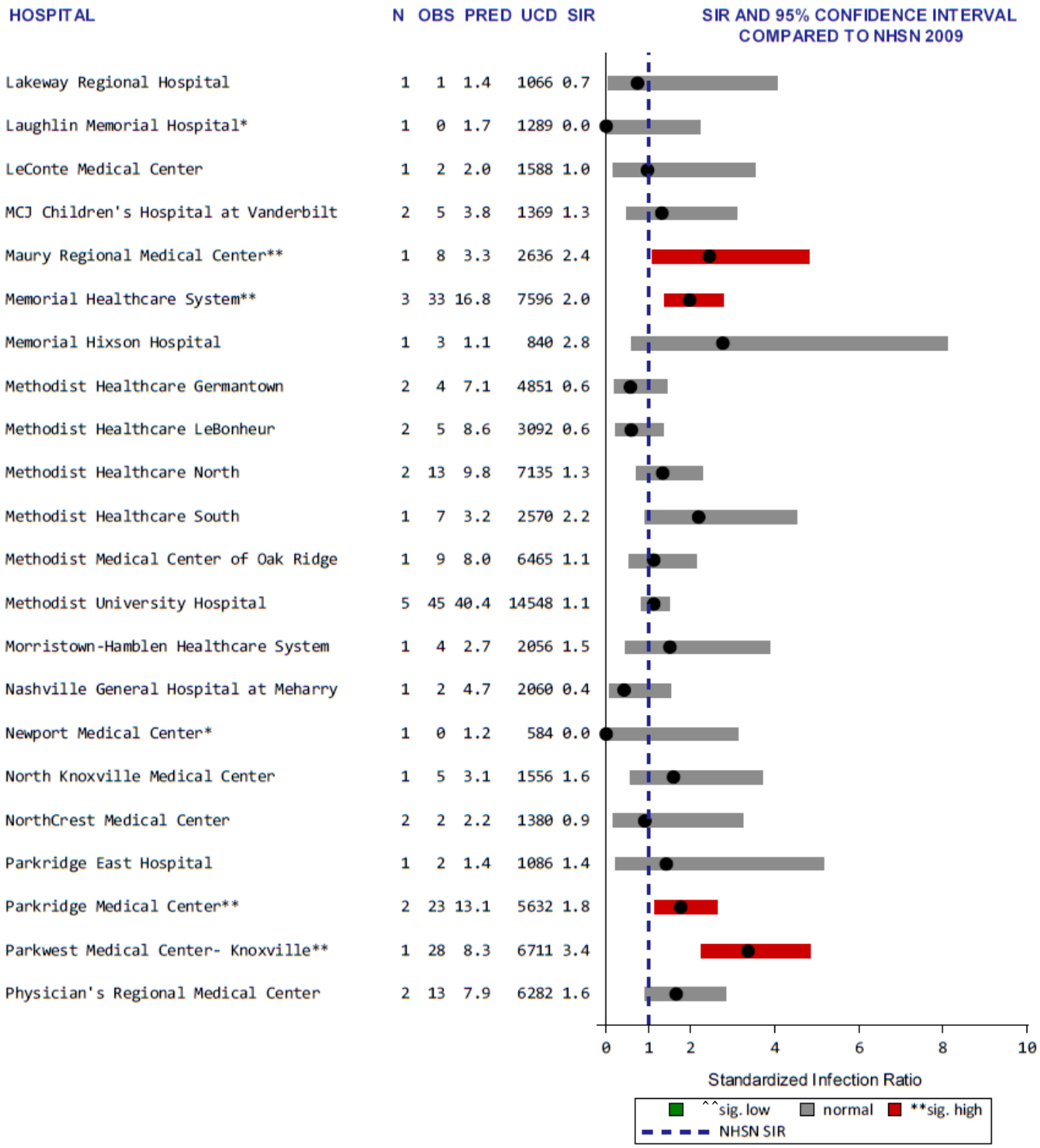
Data reported as of September 27, 2013
Other pathogens = Acinetobacter spp., Aerococcus spp., Diptheroids spp., Hafnia spp., Morganella spp., Providencia spp., Ralstonia spp., Stenotrophomonas spp., Streptococcus spp., Other Staphylococcus spp.

Figure 40: CAUTI Standardized Infection Ratio (SIR) for Adult and Pediatric Intensive Care Units in Facilities with ≥1 Predicted CAUTI, Tennessee, 01/01/2012 – 12/31/2012



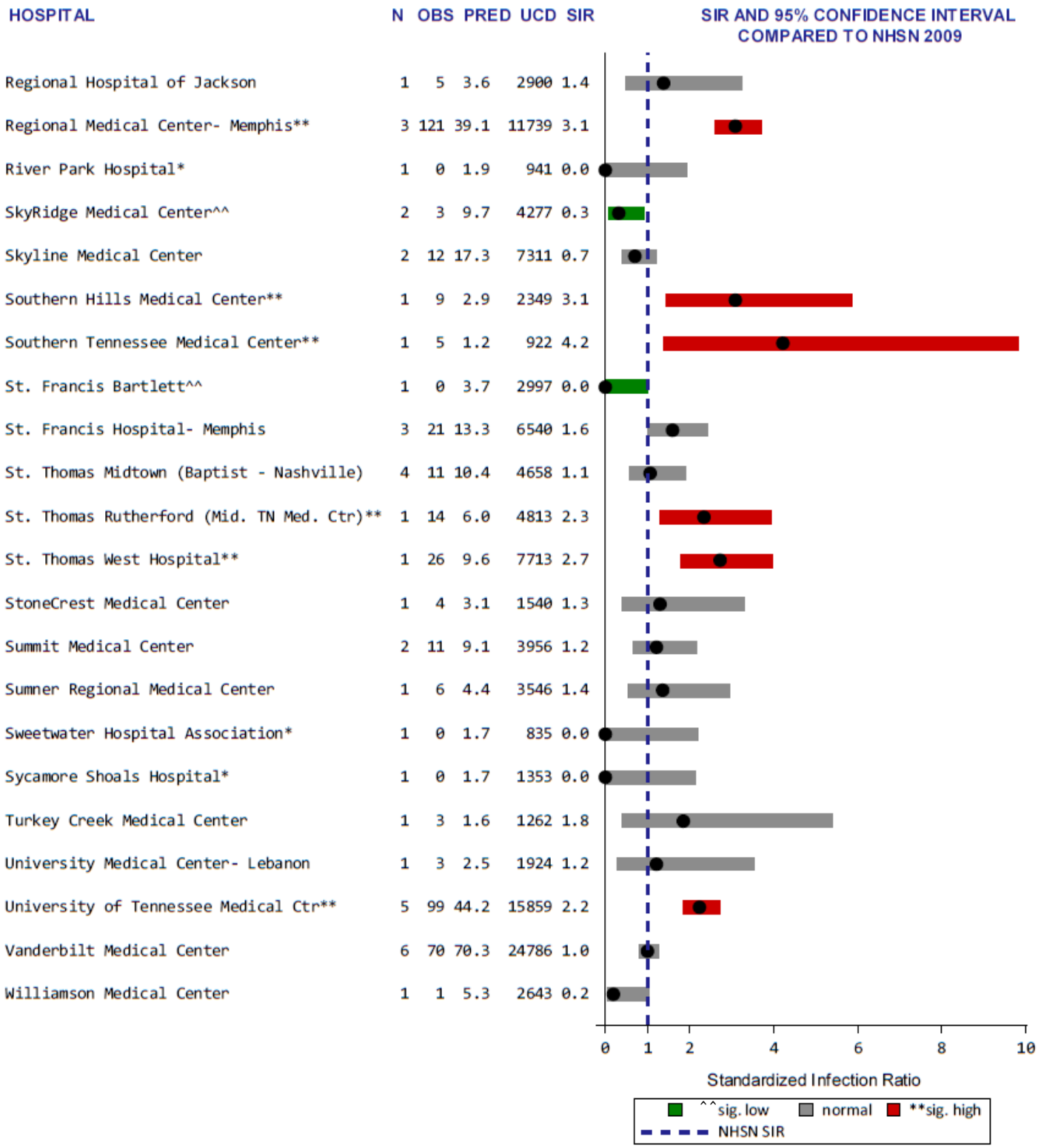
Data Reported from adult/pediatric ICUs as of September 27, 2013.
N = number of types of intensive care units reporting
OBS = observed number of CAUTI
PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data
SIR = standardized infection ratio (observed/predicted number of CAUTI)
UCD = number of urinary catheter days
NA = data not shown for hospitals with <50 urinary catheter days
***** Significantly higher than national baseline***
^^ Significantly lower than national baseline
**** Zero infections, but not statistically significant***

Figure 40 (cont'd)



Data Reported from adult/pediatric ICUs as of September 27, 2013.
N = number of types of intensive care units reporting
OBS = observed number of CAUTI
PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data
SIR = standardized infection ratio (observed/predicted number of CAUTI)
UCD = number of urinary catheter days
NA = data not shown for hospitals with <50 urinary catheter days
***** Significantly higher than national baseline***
^^ Significantly lower than national baseline
**** Zero infections, but not statistically significant***

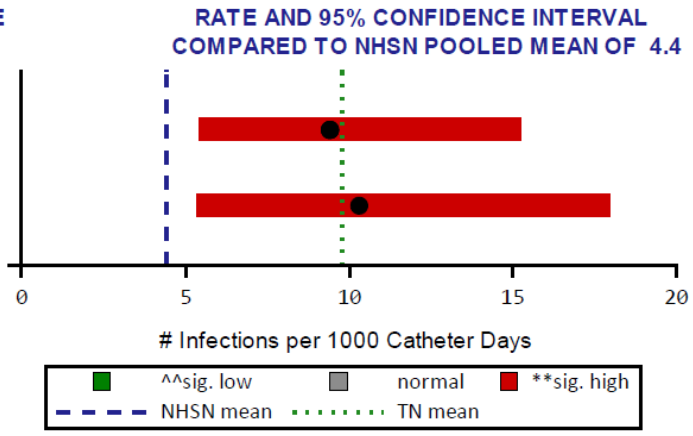
Figure 40 (cont'd)



Data Reported from adult/pediatric ICUs as of September 27, 2013.
N = number of types of intensive care units reporting
OBS = observed number of CAUTI
PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data
SIR = standardized infection ratio (observed/predicted number of CAUTI)
UCD = number of urinary catheter days
NA = data not shown for hospitals with <50 urinary catheter days
***** Significantly higher than national baseline***
^^ Significantly lower than national baseline
**** Zero infections, but not statistically significant***

Figure 41: Catheter-Associated Urinary Tract Infection (CAUTI) Rates per 1,000 Urinary Catheter Days in Tennessee, 01/01/2012 - 12/31/2012, Burn Critical Care

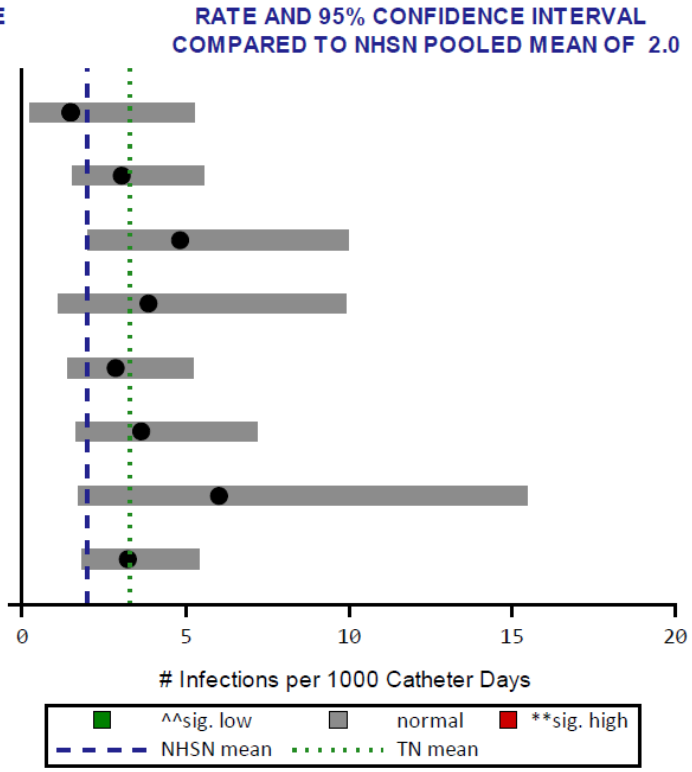
HOSPITAL	CAUTI	UCD	RATE
Regional Medical Center- Memphis**	16	1702	9.4
Vanderbilt Medical Center**	12	1166	10.3



Data Reported as of September 27, 2013.
UCD = urinary catheter days
***** Significantly higher than NHSN pooled mean***
^^ Significantly lower than NHSN pooled mean
****Zero infections, but not statistically significant***
NA = rates are not shown for units with <50 urinary catheter days
NHSN pooled mean (2009)= 4.4; TN pooled mean (01/01/2012 - 12/31/2012)= 9.8

Figure 42: Catheter-Associated Urinary Tract Infection (CAUTI) Rates per 1,000 Urinary Catheter Days in Tennessee, 01/01/2012 - 12/31/2012, Medical Cardiac Critical Care

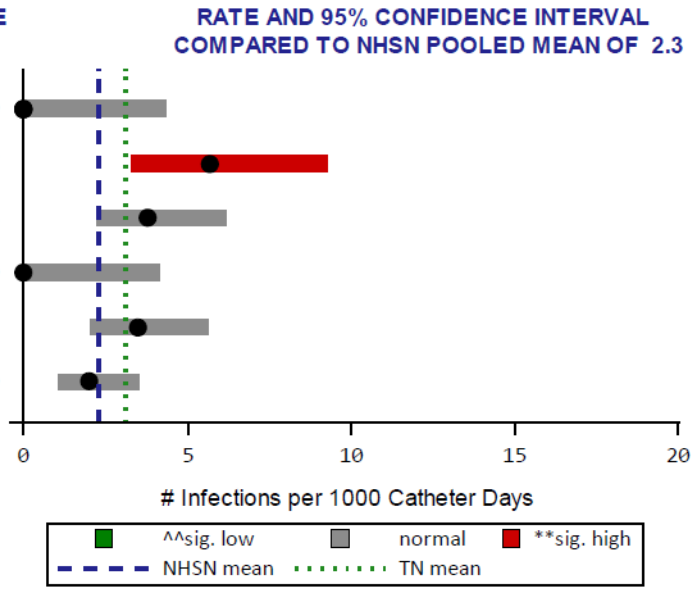
HOSPITAL	CAUTI	UCD	RATE
Blount Memorial Hospital	2	1368	1.5
Centennial Medical Center	10	3292	3.0
Erlanger Medical Center	7	1446	4.8
Holston Valley Medical Center	4	1033	3.9
Jackson Madison County General Hosp.	10	3499	2.9
Memorial Healthcare System	8	2194	3.6
St. Thomas Midtown (Baptist - Nashville)	4	663	6.0
University of Tennessee Medical Ctr	14	4320	3.2



Data Reported as of September 27, 2013.
UCD = urinary catheter days
***** Significantly higher than NHSN pooled mean***
^^ Significantly lower than NHSN pooled mean
**** Zero infections, but not statistically significant***
NA = rates are not shown for units with <50 urinary catheter days
NHSN pooled mean (2009)= 2.0; TN pooled mean (01/01/2012 - 12/31/2012)= 3.3

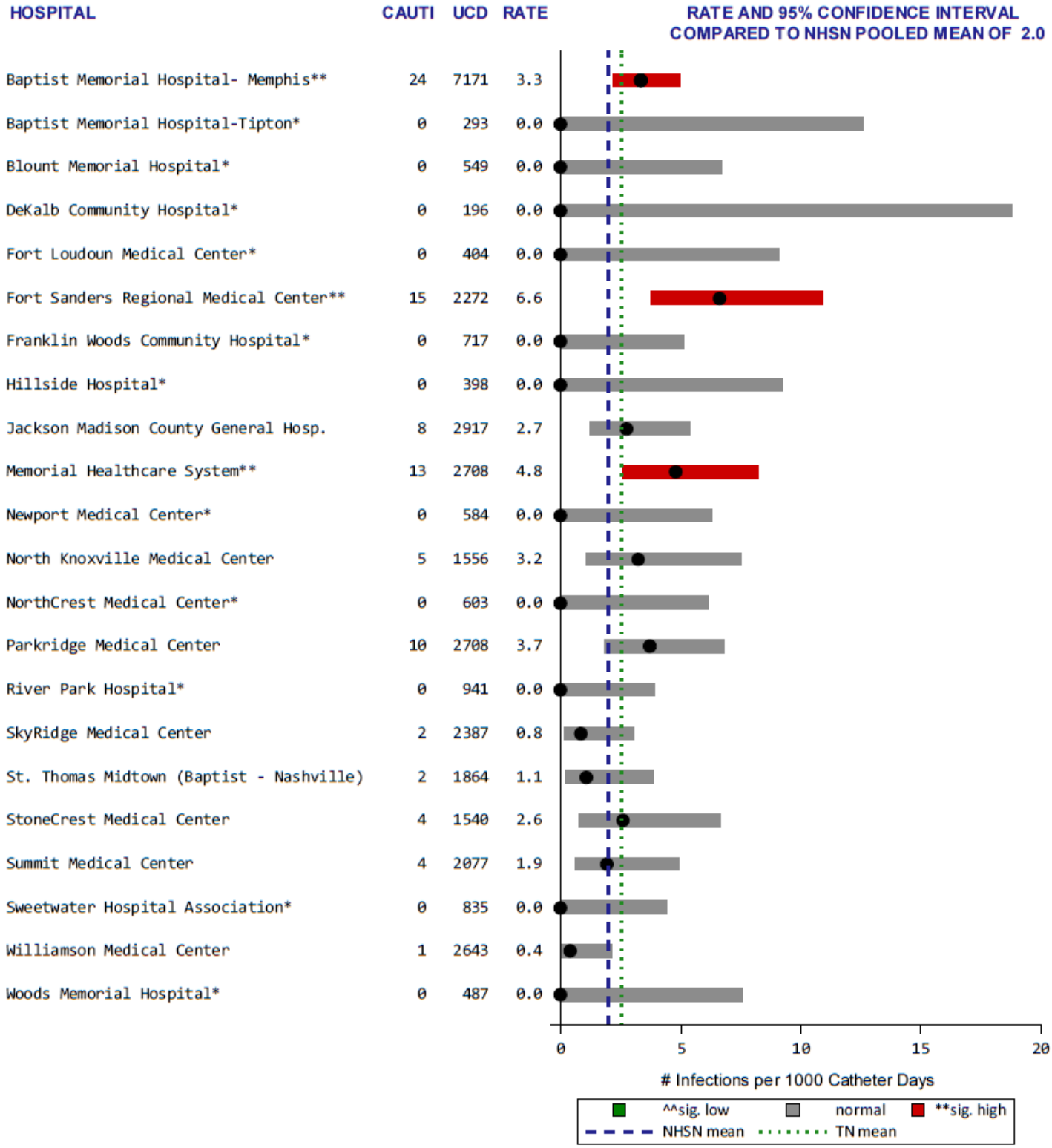
Figure 43: Catheter-Associated Urinary Tract Infection (CAUTI) Rates per 1,000 Urinary Catheter Days in Tennessee, 01/01/2012 - 12/31/2012, Medical Critical Care Units in Major Teaching Hospitals

HOSPITAL	CAUTI	UCD	RATE
Baptist Memorial Hospital- Collierville*	0	848	0.0
Erlanger Medical Center**	16	2807	5.7
Holston Valley Medical Center	16	4223	3.8
Methodist University Hospital*	0	888	0.0
University of Tennessee Medical Ctr	16	4595	3.5
Vanderbilt Medical Center	12	5976	2.0



Data Reported as of September 27, 2013.
UCD = urinary catheter days
***** Significantly higher than NHSN pooled mean***
^^ Significantly lower than NHSN pooled mean
**** Zero infections, but not statistically significant***
NA = rates are not shown for units with <50 urinary catheter days
NHSN pooled mean (2009)= 2.3; TN pooled mean (01/01/2012 - 12/31/2012)= 3.2

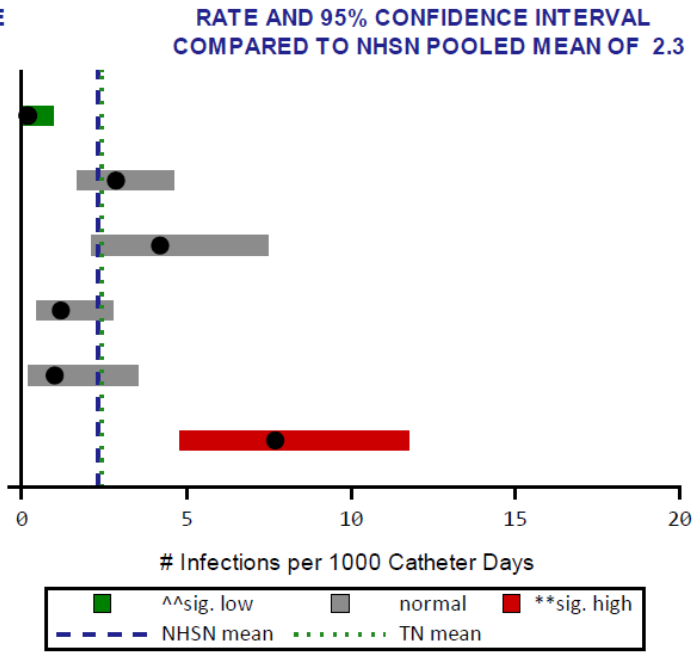
Figure 44: Catheter-Associated Urinary Tract Infection (CAUTI) Rates per 1,000 Urinary Catheter Days in Tennessee, 01/01/2012 - 12/31/2012, Medical Critical Care Units in Non-Major Teaching Hospitals



Data Reported as of September 27, 2013.
UCD = urinary catheter days
****** *Significantly higher than NHSN pooled mean***
^^ Significantly lower than NHSN pooled mean
**** Zero infections, but not statistically significant***
NA = rates are not shown for units with <50 urinary catheter days
NHSN pooled mean (2009)= 2.0; TN pooled mean (01/01/2012 - 12/31/2012)= 2.4

Figure 45: Catheter-Associated Urinary Tract Infection (CAUTI) Rates per 1,000 Urinary Catheter Days in Tennessee, 01/01/2012 - 12/31/2012, Medical-Surgical Critical Care Units in Major Teaching Hospitals

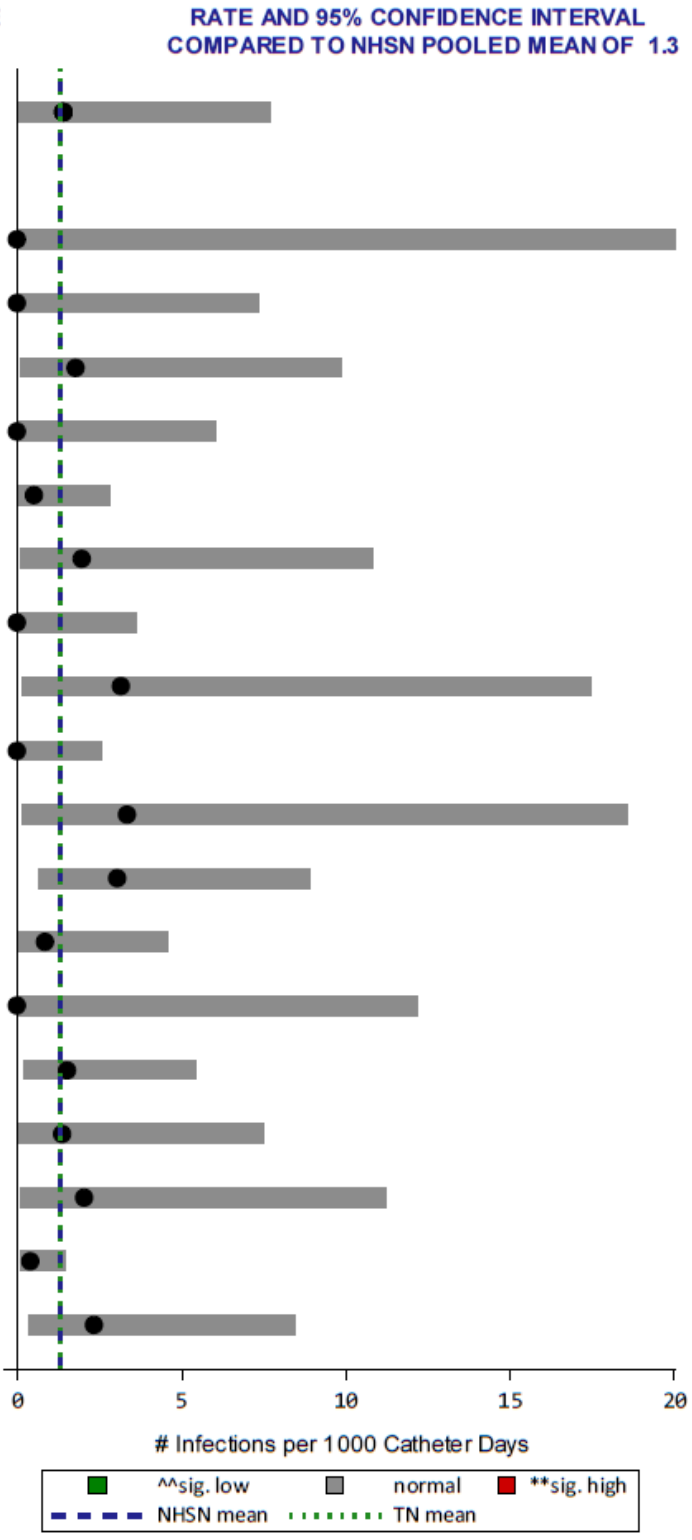
HOSPITAL	CAUTI	UCD	RATE
Bristol Regional Medical Center^^	1	5895	0.2
Centennial Medical Center	16	5639	2.8
Erlanger Medical Center	11	2634	4.2
Methodist University Hospital	5	4197	1.2
Nashville General Hospital at Meharry	2	2060	1.0
Regional Medical Center- Memphis**	21	2731	7.7



Data Reported as of September 27, 2013.
UCD = urinary catheter days
***** Significantly higher than NHSN pooled mean***
^^ Significantly lower than NHSN pooled mean
**** Zero infections, but not statistically significant***
NA = rates are not shown for units with <50 urinary catheter days
NHSN pooled mean (2009)= 2.3; TN pooled mean (01/01/2012 - 12/31/2012)= 2.4

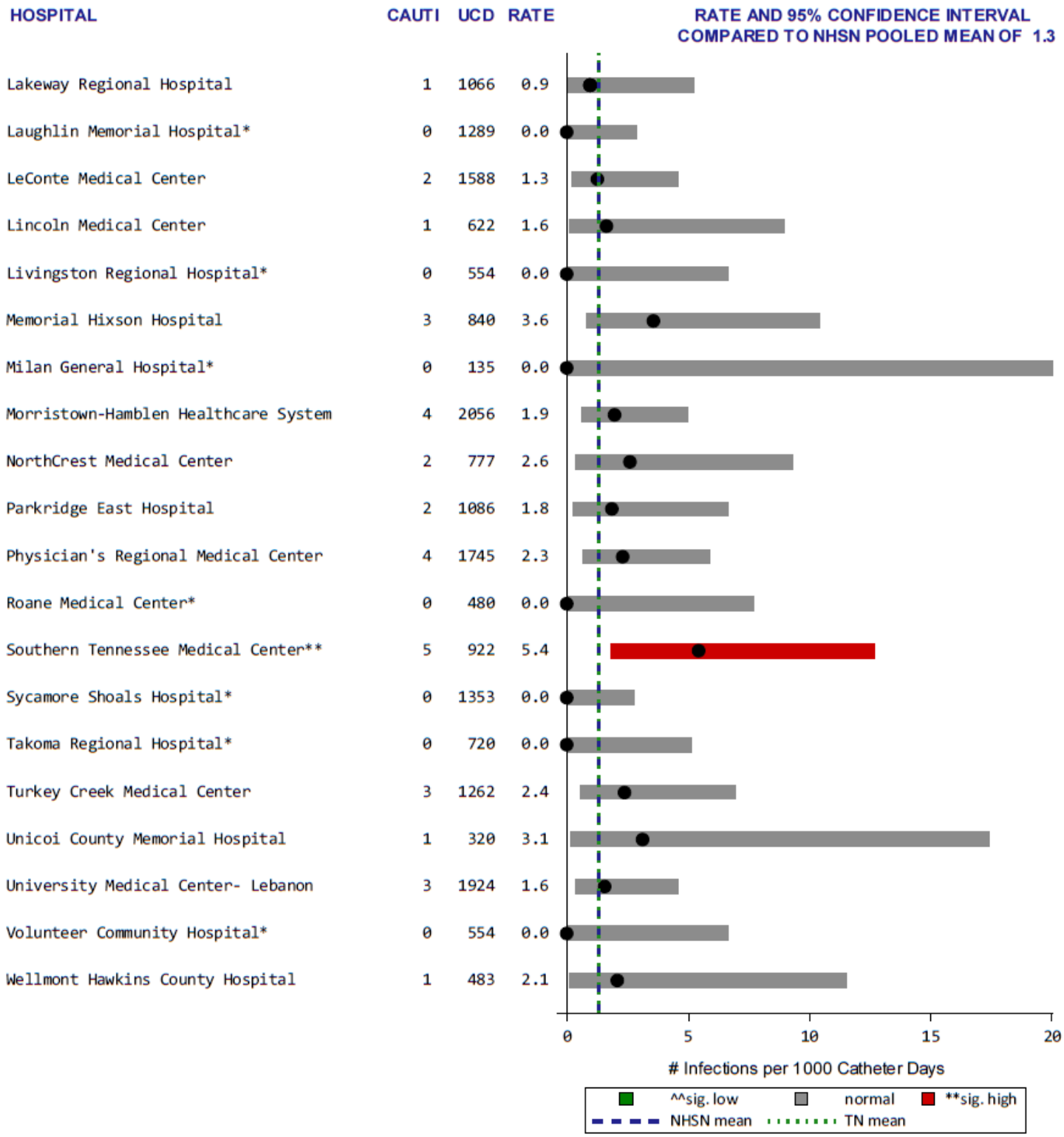
Figure 46: Catheter-Associated Urinary Tract Infection (CAUTI) Rates per 1,000 Urinary Catheter Days in Tennessee, 01/01/2012 - 12/31/2012, Medical-Surgical Critical Care Units with ≤15 Beds in Non-Major Teaching Hospitals

HOSPITAL	CAUTI	UCD	RATE
Athens Regional Medical Center	1	722	1.4
Baptist Memorial Hospital for Women	NA	NA	NA
Baptist Memorial Hospital- Huntingdon*	0	126	0.0
Baptist Memorial Hospital- Union City*	0	503	0.0
Claiborne County Hospital	1	565	1.8
Crockett Hospital*	0	612	0.0
Cumberland Medical Center	1	1975	0.5
Delta Medical Center	1	515	1.9
Dyersburg Regional Medical Center*	0	1015	0.0
Grandview Medical Center	1	319	3.1
Harton Regional Medical Center*	0	1452	0.0
Hendersonville Medical Center	1	300	3.3
Henry County Medical Center	3	988	3.0
Heritage Medical Center	1	1215	0.8
Highlands Medical Center*	0	303	0.0
Horizon Medical Center	2	1333	1.5
Jefferson Memorial Hospital	1	743	1.3
Jellico Community Hospital	1	496	2.0
Johnson City Medical Center	2	5054	0.4
Lafollette Medical Center	2	854	2.3



Data Reported as of September 27, 2013.
UCD = urinary catheter days
***** Significantly higher than NHSN pooled mean***
^^ Significantly lower than NHSN pooled mean
**** Zero infections, but not statistically significant***
NA = rates are not shown for units with <50 urinary catheter days
NHSN pooled mean (2009)= 1.3; TN pooled mean (01/01/2012 - 12/31/2012)= 1.3

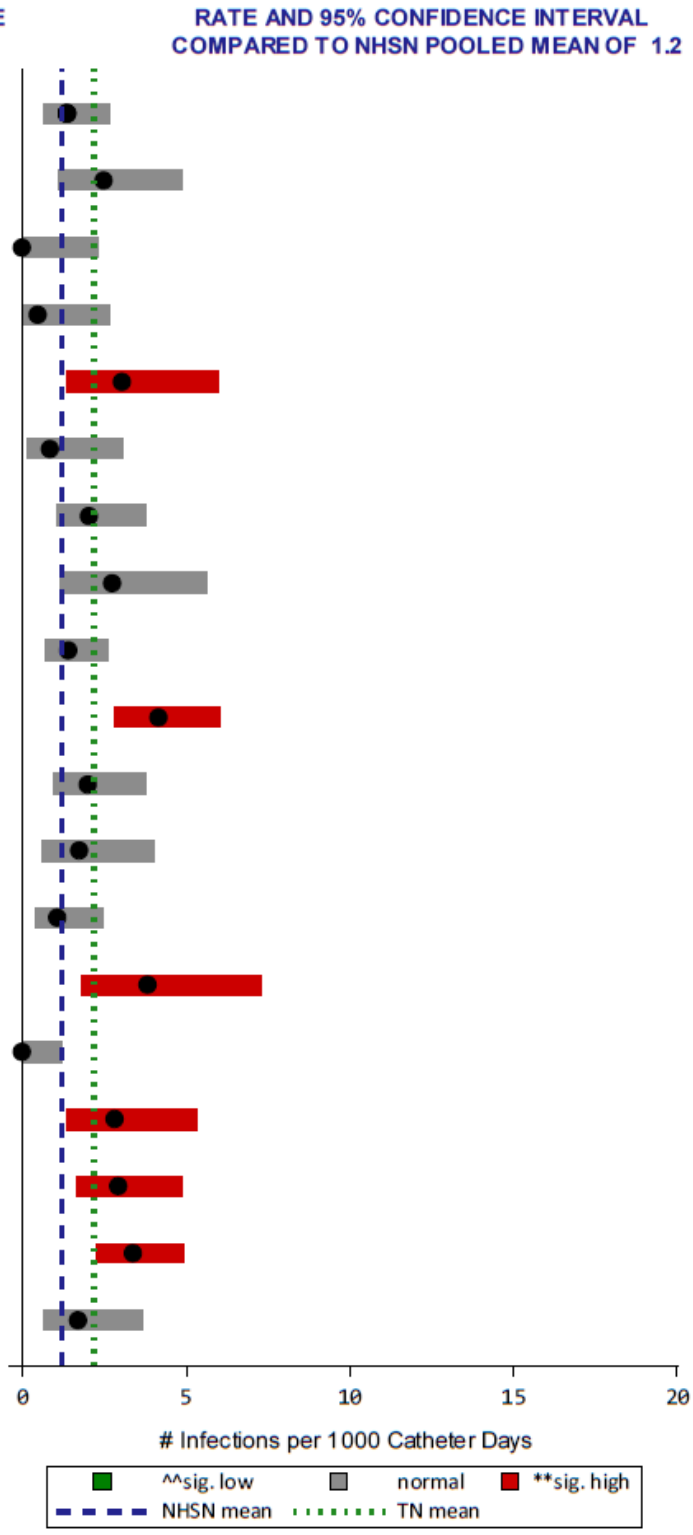
Figure 46 (cont'd)



Data Reported as of September 27, 2013.
UCD = urinary catheter days
****** *Significantly higher than NHSN pooled mean***
^^ Significantly lower than NHSN pooled mean
**** Zero infections, but not statistically significant***
NA = rates are not shown for units with <50 urinary catheter days
NHSN pooled mean (2009)= 1.3; TN pooled mean (01/01/2012 - 12/31/2012)= 1.3

Figure 47: Catheter-Associated Urinary Tract Infection (CAUTI) Rates per 1,000 Urinary Catheter Days in Tennessee, 01/01/2012 - 12/31/2012, Medical-Surgical Critical Care Units with >15 Beds in Non-Major Teaching Hospitals

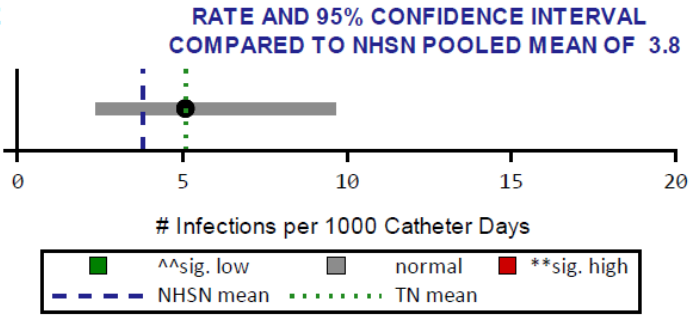
HOSPITAL	CAUTI	UCD	RATE
Cookeville Regional Medical Center	8	5917	1.4
Gateway Medical Center	8	3209	2.5
Hendersonville Medical Center*	0	1620	0.0
Indian Path Medical Center	1	2100	0.5
Maury Regional Medical Center**	8	2636	3.0
Methodist Healthcare Germantown	2	2340	0.9
Methodist Healthcare North	10	4899	2.0
Methodist Healthcare South	7	2570	2.7
Methodist Medical Center of Oak Ridge	9	6465	1.4
Parkwest Medical Center- Knoxville**	28	6711	4.2
Physician's Regional Medical Center	9	4537	2.0
Regional Hospital of Jackson	5	2900	1.7
Skyline Medical Center	5	4676	1.1
Southern Hills Medical Center**	9	2349	3.8
St. Francis Bartlett*	0	2997	0.0
St. Francis Hospital- Memphis**	9	3184	2.8
St. Thomas Rutherford (Mid. TN Med. Ctr)**	14	4813	2.9
St. Thomas West Hospital**	26	7713	3.4
Sumner Regional Medical Center	6	3546	1.7



Data Reported as of September 27, 2013.
UCD = urinary catheter days
***** Significantly higher than NHSN pooled mean***
^^ Significantly lower than NHSN pooled mean
*** Zero infections, but not statistically significant***
NA = rates are not shown for units with <50 urinary catheter days
NHSN pooled mean (2009)= 1.2; TN pooled mean (01/01/2012 - 12/31/2012)= 2.2

Figure 48: Catheter-Associated Urinary Tract Infection (CAUTI) Rates per 1,000 Urinary Catheter Days in Tennessee, 01/01/2012 - 12/31/2012, Neurological Critical Care Units

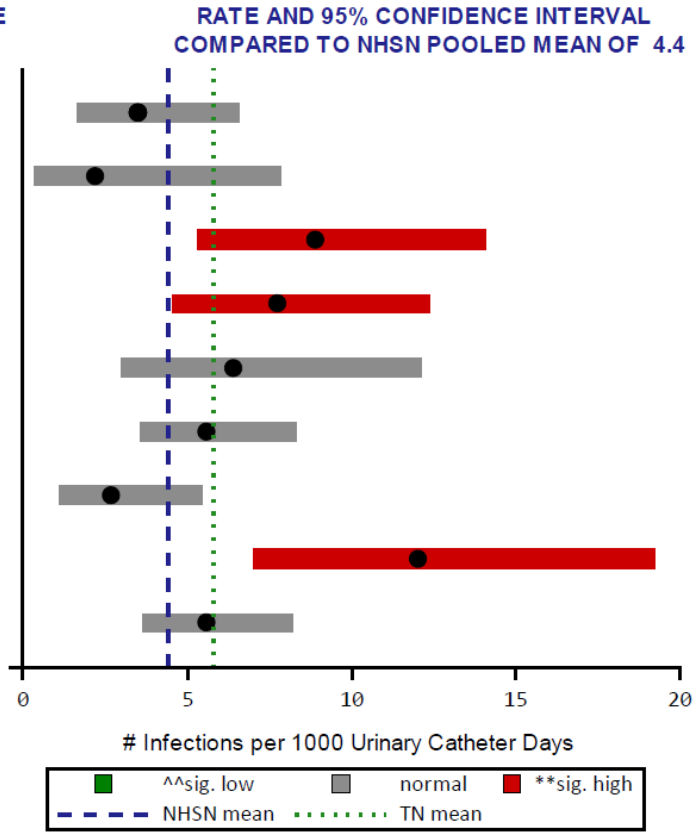
HOSPITAL	CAUTI	UCD	RATE
St. Francis Hospital- Memphis	9	1763	5.1



Data Reported as of September 27, 2013.
UCD = urinary catheter days
***** Significantly higher than NHSN pooled mean***
^^ Significantly lower than NHSN pooled mean
**** Zero infections, but not statistically significant***
NA = rates are not shown for units with <50 urinary catheter days
NHSN pooled mean (2009)= 3.8; TN pooled mean (01/01/2012 - 12/31/2012)= 5.1

Figure 49: Catheter-Associated Urinary Tract Infection (CAUTI) Rates per 1,000 Urinary Catheter Days in Tennessee, 01/01/2012 - 12/31/2012, Neurosurgical Critical Care Units

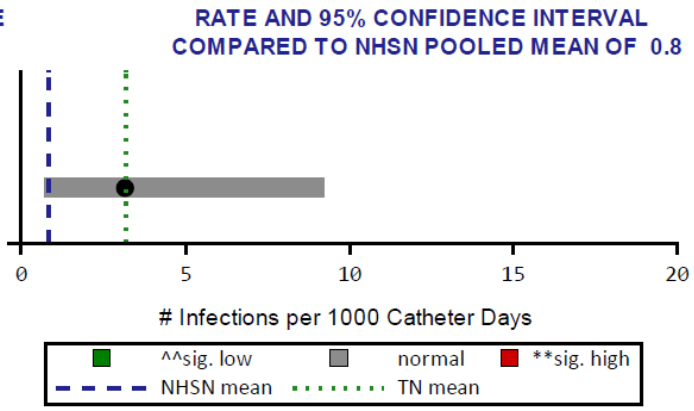
HOSPITAL	CAUTI	UCD	RATE
Baptist Memorial Hospital- Memphis	9	2589	3.5
Centennial Medical Center	2	921	2.2
Erlanger Medical Center**	18	2024	8.9
Fort Sanders Regional Medical Center**	17	2197	7.7
Jackson Madison County General Hosp.	9	1410	6.4
Methodist University Hospital	23	4136	5.6
Skyline Medical Center	7	2635	2.7
University of Tennessee Medical Ctr**	17	1413	12.0
Vanderbilt Medical Center	25	4485	5.6



Data Reported as of September 27, 2013.
UCD = urinary catheter days
***** Significantly higher than NHSN pooled mean***
^^ Significantly lower than NHSN pooled mean
**** Zero infections, but not statistically significant***
NA = rates are not shown for units with <50 urinary catheter days
NHSN pooled mean (2009)= 4.4; TN pooled mean (01/01/2012 - 12/31/2012)= 5.8

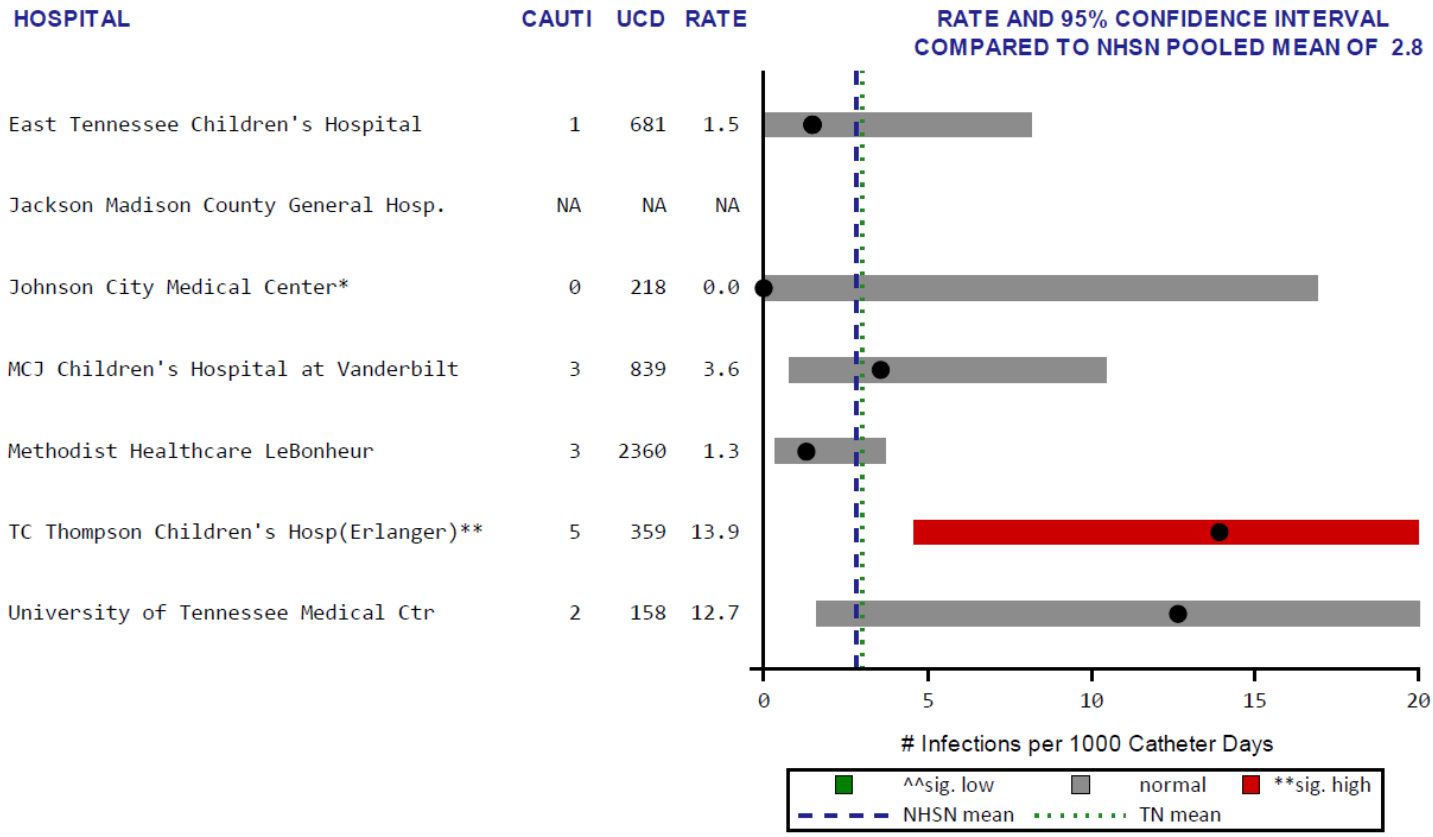
Figure 50: Catheter-Associated Urinary Tract Infection (CAUTI) Rates per 1,000 Urinary Catheter Days in Tennessee, 01/01/2012 - 12/31/2012, Pediatric Medical Critical Care Units

HOSPITAL	CAUTI	UCD	RATE
Holston Valley Medical Center	NA	NA	NA
St. Jude Children's Research Hospital	3	949	3.2



Data Reported as of September 27, 2013.
UCD = urinary catheter days
***** Significantly higher than NHSN pooled mean***
^^ Significantly lower than NHSN pooled mean
****Zero infections, but not statistically significant***
NA = rates are not shown for units with <50 urinary catheter days
NHSN pooled mean (2009)= 0.8; TN pooled mean (01/01/2012 - 12/31/2012)= 3.2

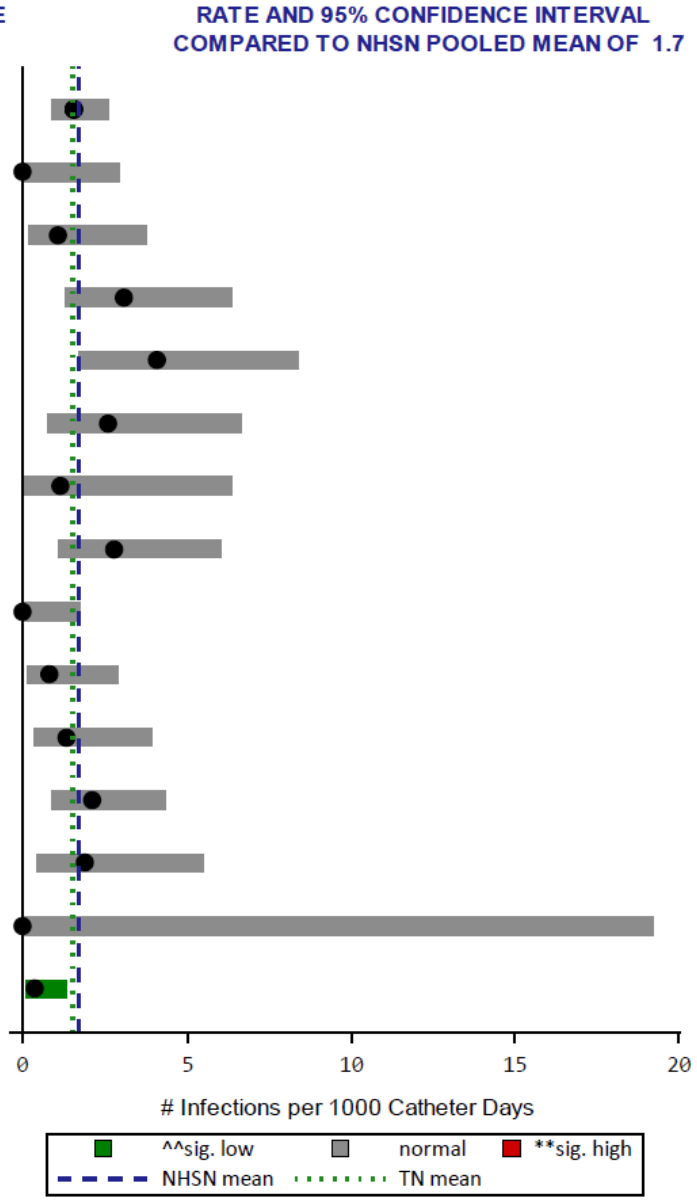
Figure 51: Catheter-Associated Urinary Tract Infection (CAUTI) Rates per 1,000 Urinary Catheter Days in Tennessee, 01/01/2012 - 12/31/2012, Pediatric Medical-Surgical Critical Care Units



Data Reported as of September 27, 2013.
UCD = urinary catheter days
****** *Significantly higher than NHSN pooled mean***
^^ Significantly lower than NHSN pooled mean
*** Zero infections, but not statistically significant***
NA = rates are not shown for units with <50 urinary catheter days
NHSN pooled mean (2009)= 2.8; TN pooled mean (01/01/2012 - 12/31/2012)= 3.0

Figure 52: Catheter-Associated Urinary Tract Infection (CAUTI) Rates per 1,000 Urinary Catheter Days in Tennessee, 01/01/2012 - 12/31/2012, Surgical Cardiothoracic Critical Care Units

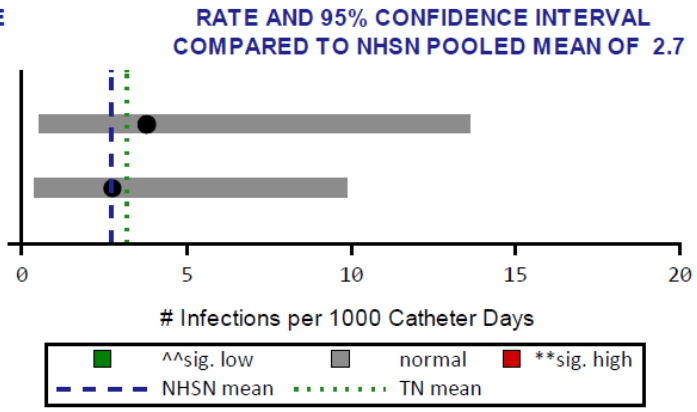
HOSPITAL	CAUTI	UCD	RATE
Baptist Memorial Hospital- Memphis	14	9119	1.5
Bristol Regional Medical Center*	0	1265	0.0
Centennial Medical Center	2	1907	1.0
Cookeville Regional Medical Center	7	2270	3.1
Erlanger Medical Center	7	1714	4.1
Fort Sanders Regional Medical Center	4	1540	2.6
Holston Valley Medical Center	1	878	1.1
Jackson Madison County General Hosp.	6	2165	2.8
Johnson City Medical Center*	0	2132	0.0
Methodist Healthcare Germantown	2	2511	0.8
Methodist Healthcare North	3	2236	1.3
Methodist University Hospital	7	3332	2.1
St. Francis Hospital- Memphis	3	1593	1.9
St. Thomas Midtown (Baptist - Nashville)*	0	192	0.0
Vanderbilt Medical Center^^	2	5418	0.4



Data Reported as of September 27, 2013.
UCD = urinary catheter days
***** Significantly higher than NHSN pooled mean***
^^ Significantly lower than NHSN pooled mean
**** Zero infections, but not statistically significant***
NA = rates are not shown for units with <50 urinary catheter days
NHSN pooled mean (2009)= 1.7; TN pooled mean (01/01/2012 - 12/31/2012)= 1.5

Figure 53: Catheter-Associated Urinary Tract Infection (CAUTI) Rates per 1,000 Urinary Catheter Days in Tennessee, 01/01/2012 - 12/31/2012, Pediatric Surgical Cardiothoracic Critical Care Units

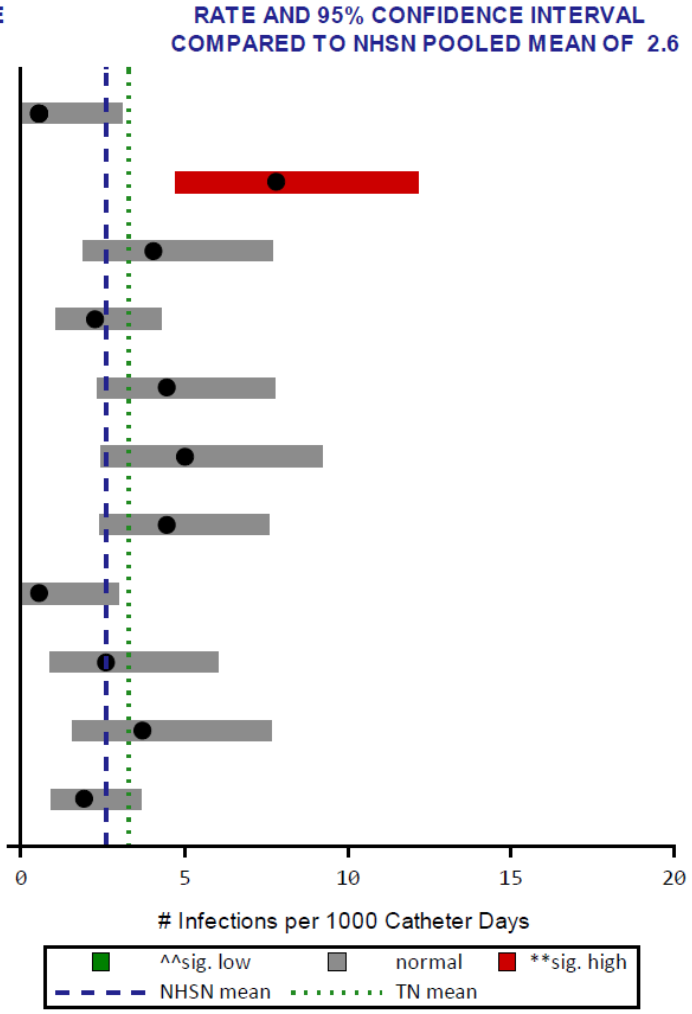
HOSPITAL	CAUTI	UCD	RATE
MCJ Children's Hospital at Vanderbilt	2	530	3.8
Methodist Healthcare LeBonheur	2	732	2.7



Data Reported as of September 27, 2013.
UCD = urinary catheter days
***** Significantly higher than NHSN pooled mean***
^^ Significantly lower than NHSN pooled mean
**** Zero infections, but not statistically significant***
NA = rates are not shown for units with <50 urinary catheter days
NHSN pooled mean (2009)= 2.7; TN pooled mean (01/01/2012 - 12/31/2012)= 3.2

Figure 54: Catheter-Associated Urinary Tract Infection (CAUTI) Rates per 1,000 Urinary Catheter Days in Tennessee, 01/01/2012 - 12/31/2012, Surgical Critical Care Units

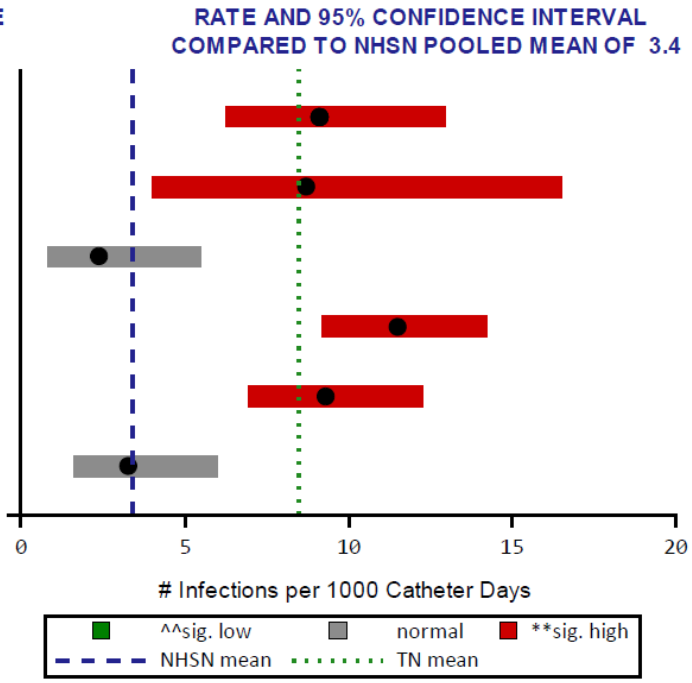
HOSPITAL	CAUTI	UCD	RATE
Blount Memorial Hospital	1	1810	0.6
Erlanger Medical Center**	19	2436	7.8
Holston Valley Medical Center	9	2215	4.1
Jackson Madison County General Hosp.	9	4016	2.2
Memorial Healthcare System	12	2694	4.5
Methodist University Hospital	10	1995	5.0
Parkridge Medical Center	13	2924	4.4
SkyRidge Medical Center	1	1890	0.5
St. Thomas Midtown (Baptist - Nashville)	5	1939	2.6
Summit Medical Center	7	1879	3.7
Vanderbilt Medical Center	9	4671	1.9



Data Reported as of September 27, 2013.
UCD = urinary catheter days
***** Significantly higher than NHSN pooled mean***
^^ Significantly lower than NHSN pooled mean
**** Zero infections, but not statistically significant***
NA = rates are not shown for units with <50 urinary catheter days
NHSN pooled mean (2009)= 2.6; TN pooled mean (01/01/2012 - 12/31/2012)= 3.3

Figure 55: Catheter-Associated Urinary Tract Infection (CAUTI) Rates per 1,000 Urinary Catheter Days in Tennessee, 01/01/2012 - 12/31/2012, Trauma Critical Care Units

HOSPITAL	CAUTI	UCD	RATE
Erlanger Medical Center**	31	3398	9.1
Holston Valley Medical Center**	9	1033	8.7
Johnson City Medical Center	5	2123	2.4
Regional Medical Center- Memphis**	84	7306	11.5
University of Tennessee Medical Ctr**	50	5373	9.3
Vanderbilt Medical Center	10	3070	3.3



Data Reported as of September 27, 2013.
UCD = urinary catheter days
***** Significantly higher than NHSN pooled mean***
^^ Significantly lower than NHSN pooled mean
****Zero infections, but not statistically significant***
NA = rates are not shown for units with <50 urinary catheter days
NHSN pooled mean (2009)= 3.4; TN pooled mean (01/01/2012 - 12/31/2012)= 8.5

SSI FIGURES AND TABLES

CBGB/CBGC Procedures

January 1, 2010 – December 31, 2012

Figure 56: Coronary Artery Bypass Graft (CBGB/C) All and Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) by Quarter, Tennessee, 01/01/2010–12/31/2012

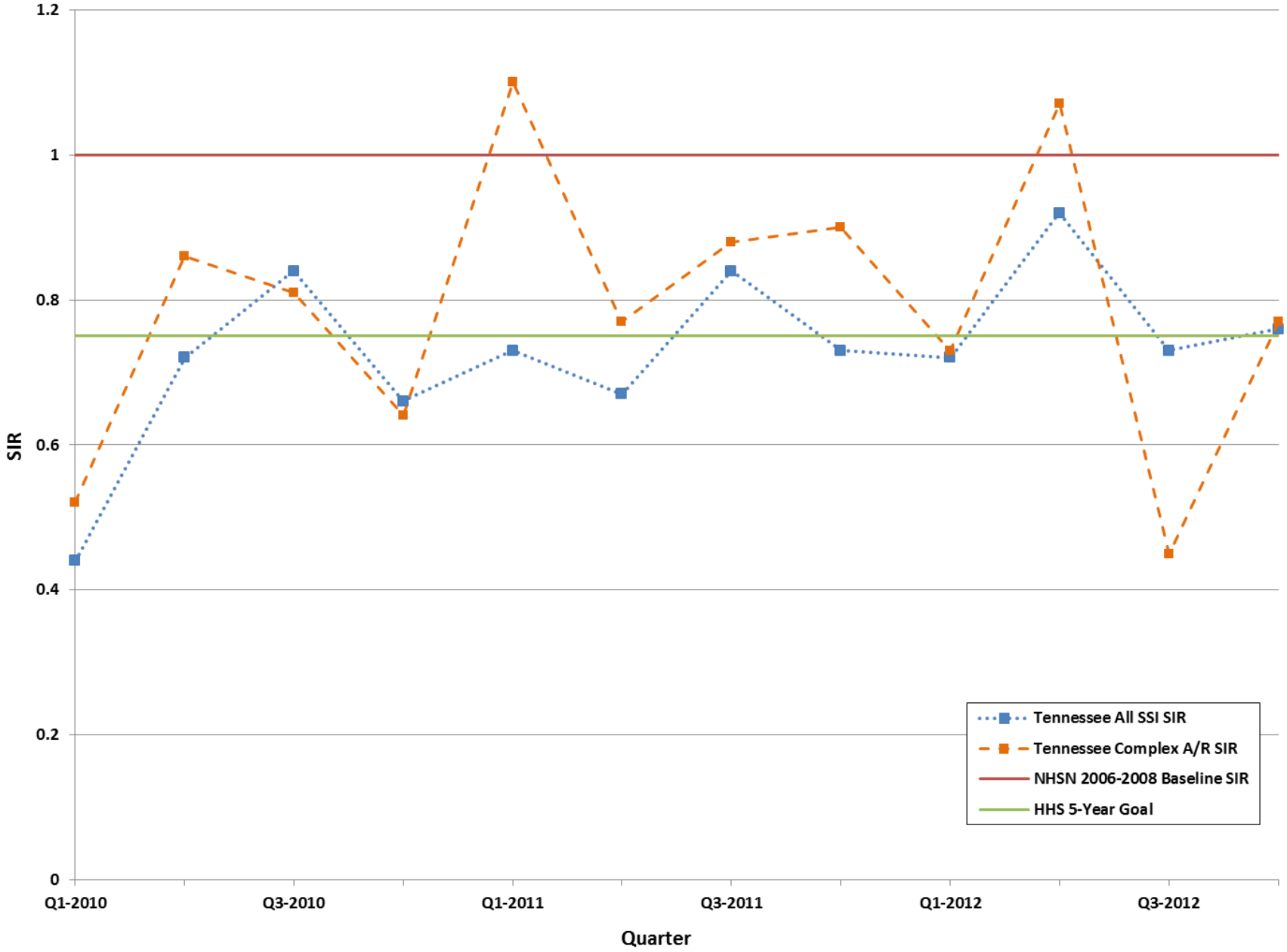


Table 20: Coronary Artery Bypass Graft (CBGB/C) All and Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) by Year, Tennessee, 01/01/2010 - 12/31/2012

				SIR, 95% CONFIDENCE INTERVAL, AND KEY PERCENTILES							
STATE	SIR TYPE	YEAR	No.	SIR	LOWER LIMIT	UPPER LIMIT	10%	25%	50%	75%	90%
Tennessee	All Procedures	2012	26	0.78	0.65	0.94	0.15	0.44	0.66	1.15	1.99
		2011	27	0.74	0.62	0.89	0.00	0.29	0.71	1.03	1.58
		2010	26	0.66	0.55	0.79	0.11	0.32	0.65	1.05	1.64
	Complex A/R	2012	26	0.76	0.58	0.97	0.00	0.00	0.71	1.19	1.74
		2011	27	0.91	0.72	1.13	0.00	0.00	0.70	1.36	1.80
		2010	26	0.71	0.55	0.90	0.00	0.18	0.68	1.04	1.83

Data reported as of September 27, 2013
No. = number of facilities with reporting units; SIR = Standardized Infection Ratio (observed/predicted number of SSI)
Key percentiles include facilities with at least one predicted infection
Red highlighting indicates SIR for reporting period is significantly higher than national 2006-2008 SIR of 1.0
Green highlighting indicates SIR for reporting period is significantly lower than national 2006-2008 SIR of 1.0

Table 21: Crude (Unadjusted) Rate of Coronary Artery Bypass Graft (CBGB/C) Surgical Site Infection (SSI) by Year, Tennessee, 01/01/2010 - 12/31/2012

STATE	YEAR	No. of hospitals	No. of procedures	No. of SSI	TN Rate*
Tennessee	2012	26	6999	142	**2.03**
	2011	27	7455	144	**1.93**
	2010	26	8187	166	**2.03**

Data reported as of September 27, 2013
****Per 100 operations***

Figure 57: Coronary Artery Bypass Graft (CBGB/C) Surgical Site Infections by Site, Tennessee, 01/01/2012-12/31/2012

Number of Events = 142

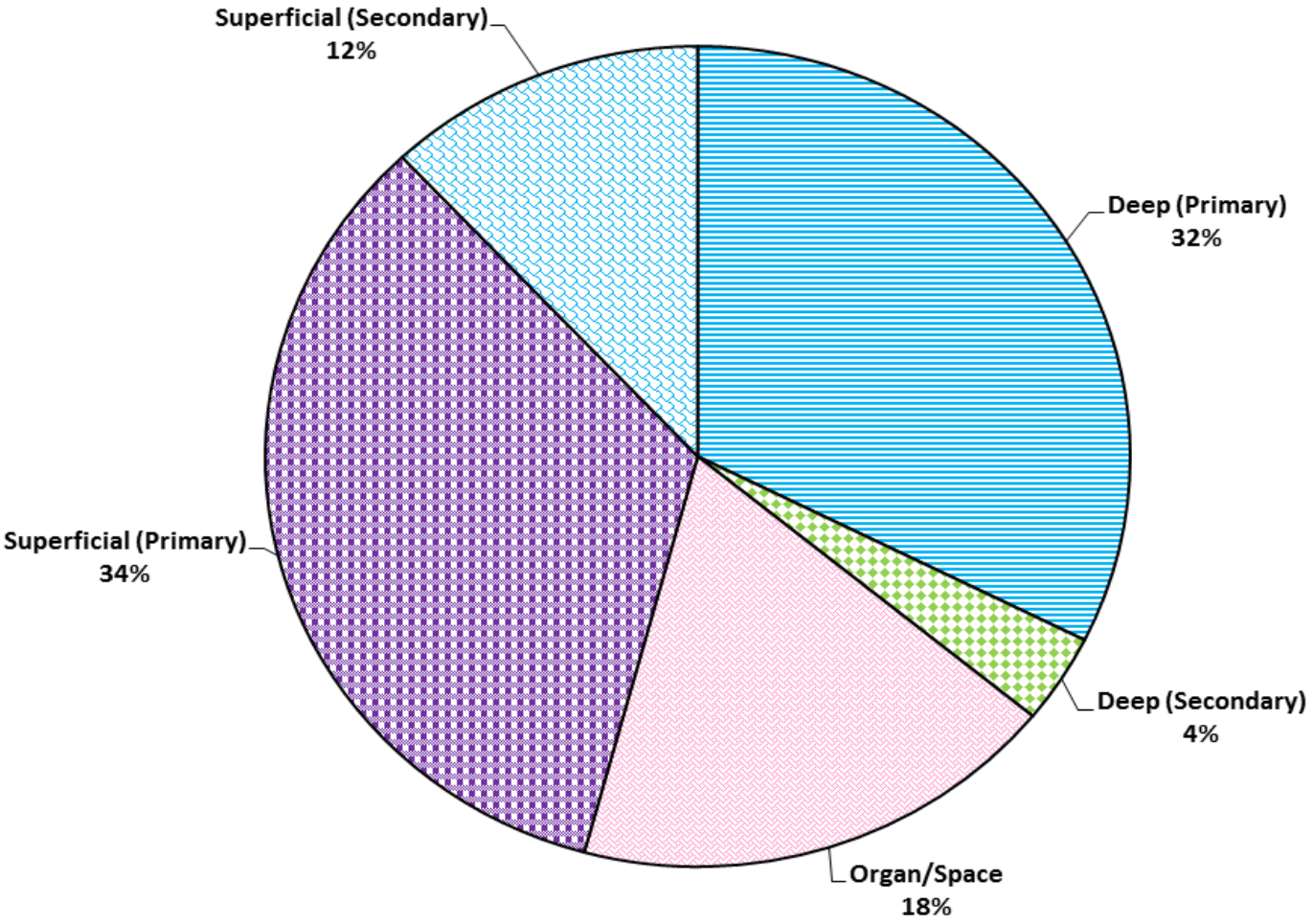


Figure 58: Coronary Artery Bypass Graft (CBGB/C) Surgical Site Infection Detection, Tennessee, 01/01/2012-12/31/2012

Number of Events = 142

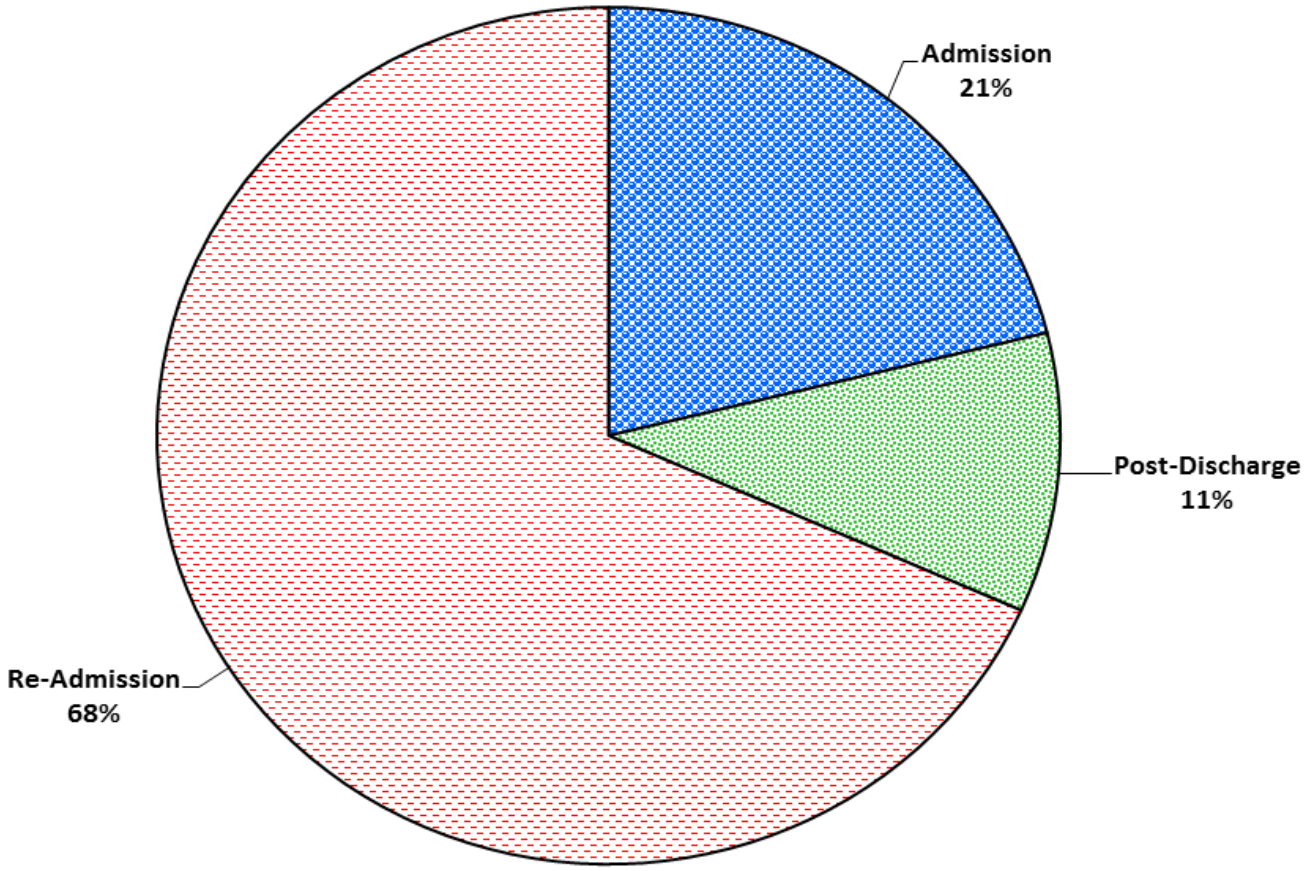


Figure 59: Organisms Isolated from Coronary Artery Bypass Graft (CBGB/C) Surgical Site Infections (SSIs), Tennessee, 01/01/2012–12/31/2012

Total number of isolates = 167; Total number of SSI events = 127;

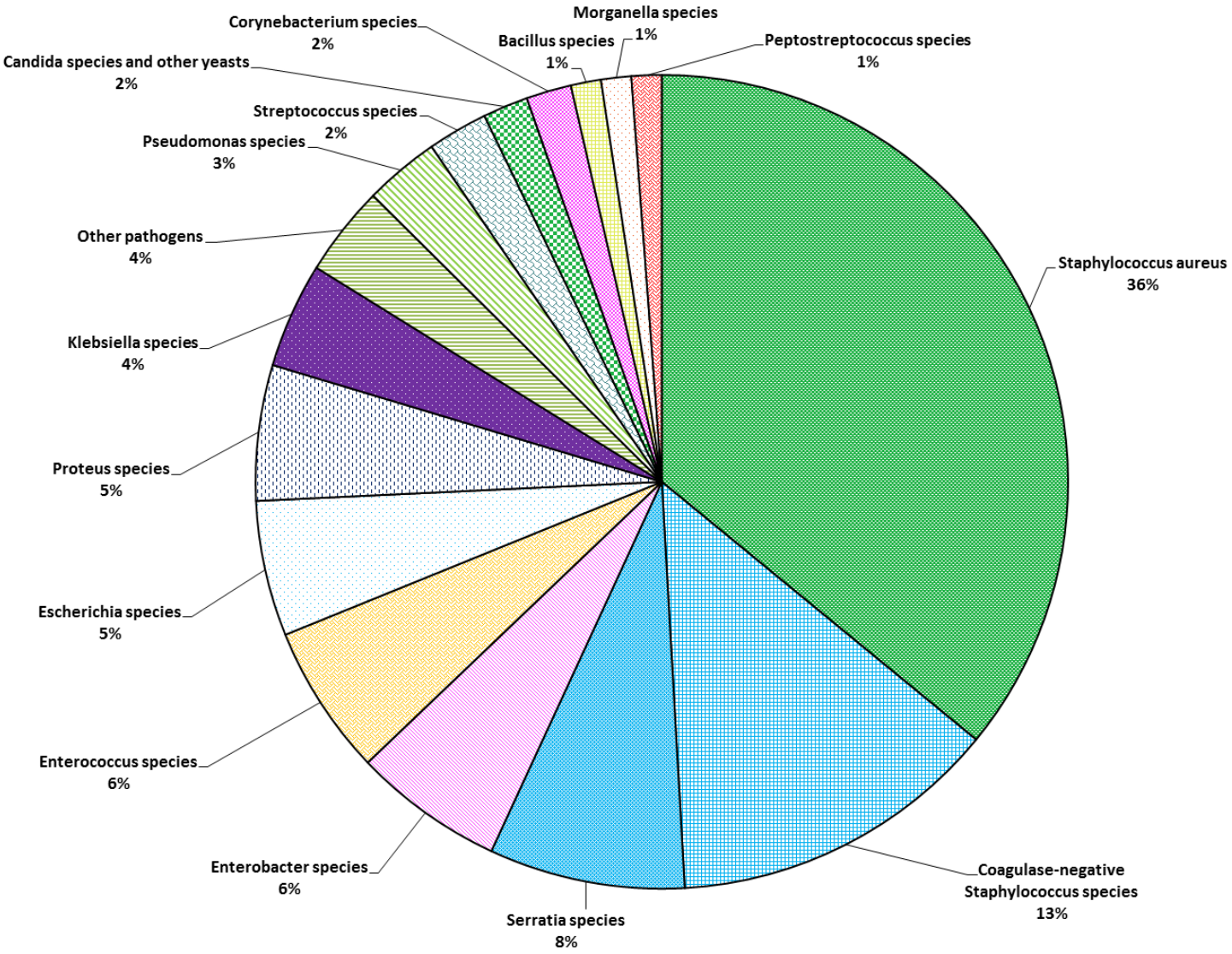


Table 22: Microorganisms Identified in Surgical Site Infections (SSIs) following Coronary Artery Bypass Graft (CBGB/C) Procedures, Tennessee, 01/01/2012–12/31/2012

Total number of isolates = 167; Total number of SSI events = 127;

Microorganism	Number of Isolates	Percent
Staphylococcus aureus	60	35.9
Methicillin-resistant *S. aureus* (MRSA) (% of total positive isolates)	39	(23.4)
Coagulase-negative *Staphylococcus* species	22	13.2
Serratia species	13	7.8
Enterobacter species	10	6.0
Enterococcus species	10	6.0
Vancomycin-resistant *Enterococcus* (VRE) (% of total positive isolates)	3	(1.8)
Escherichia species	9	5.4
Proteus species	9	5.4
Klebsiella species	7	4.2
Pseudomonas species	5	3.0
Streptococcus species	4	2.4
Candida species and other yeasts	3	1.8
Candida albicans (% of total positive isolates)	1	(0.6)
Corynebacterium species	3	1.8
Bacillus species	2	1.2
Morganella species	2	1.2
Peptostreptococcus species	2	1.2
Other pathogens	6	3.6

Data reported as of September 27, 2013
Other pathogens = Bacteriodes spp., Citrobacter spp., Moraxella spp., Other Staphylococcus spp., Pasturella spp., Prevotella spp.

SSI FIGURES AND TABLES

COLO Procedures

January 1, 2012 – December 31, 2012

Figure 60: Colon Surgery (COLO) All and Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) by Quarter, Tennessee, 01/01/2012–12/31/2012

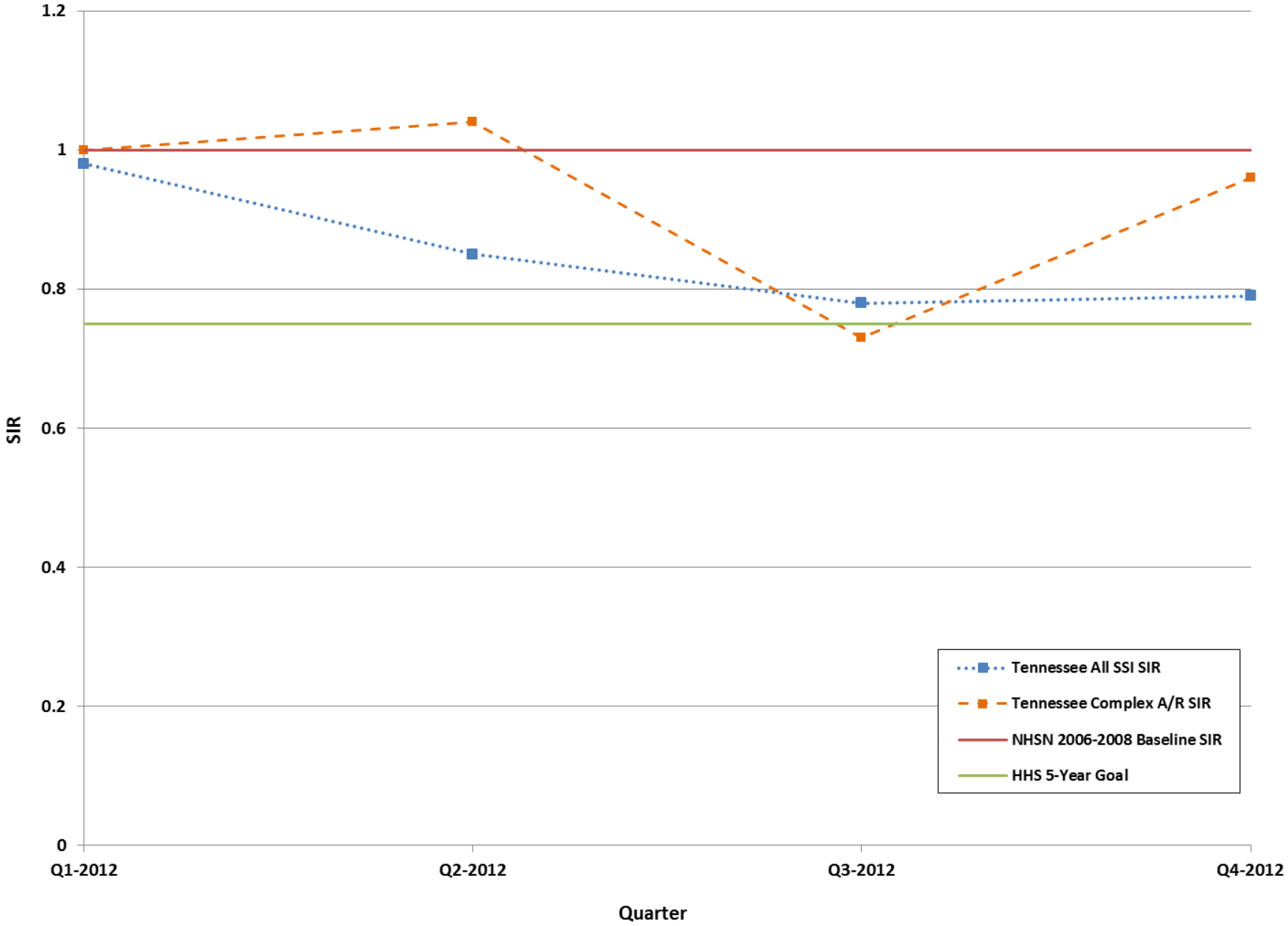


Table 23: Colon Surgery (COLO) All and Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) by Six-Month Period, Tennessee, 01/01/2012 - 12/31/2012

					SIR, 95% CONFIDENCE INTERVAL, AND KEY PERCENTILES							
STATE	SIR TYPE	YEAR	HALF	No.	SIR	LOWER LIMIT	UPPER LIMIT	10%	25%	50%	75%	90%
Tennessee	All Procedures	2012	2	97	0.78	0.67	0.91	0.00	0.33	0.65	1.04	1.69
			1	99	0.91	0.79	1.05	0.00	0.00	0.70	1.08	1.80
	Complex A/R	2012	2	97	0.84	0.67	1.04	0.00	0.00	0.63	1.63	2.08
			1	99	1.02	0.84	1.23	0.00	0.33	0.89	1.42	2.21

Data reported as of September 27, 2013
No. = number of facilities with reporting units; SIR = Standardized Infection Ratio (observed/predicted number of SSI)
Key percentiles include facilities with at least one predicted infection
Red highlighting indicates SIR for reporting period is significantly higher than national 2006-2008 SIR of 1.0
Green highlighting indicates SIR for reporting period is significantly lower than national 2006-2008 SIR of 1.0

Table 24: Crude (Unadjusted) Rate of Colon Surgery (COLO) Surgical Site Infection (SSI) by Six-Month Period, Tennessee, 01/01/2012 - 12/31/2012

STATE	YEAR	HALF	No. of hospitals	No. of procedures	No. of SSI	TN Rate*
Tennessee	2012	2	85	3223	161	**5.00**
		1	87	3512	199	**5.67**

Data reported as of September 27, 2013
****Per 100 operations***

Figure 61: Colon Surgery (COLO) Surgical Site Infections by Site, Tennessee, 01/01/2012-12/31/2012

Number of SSI Events = 360;

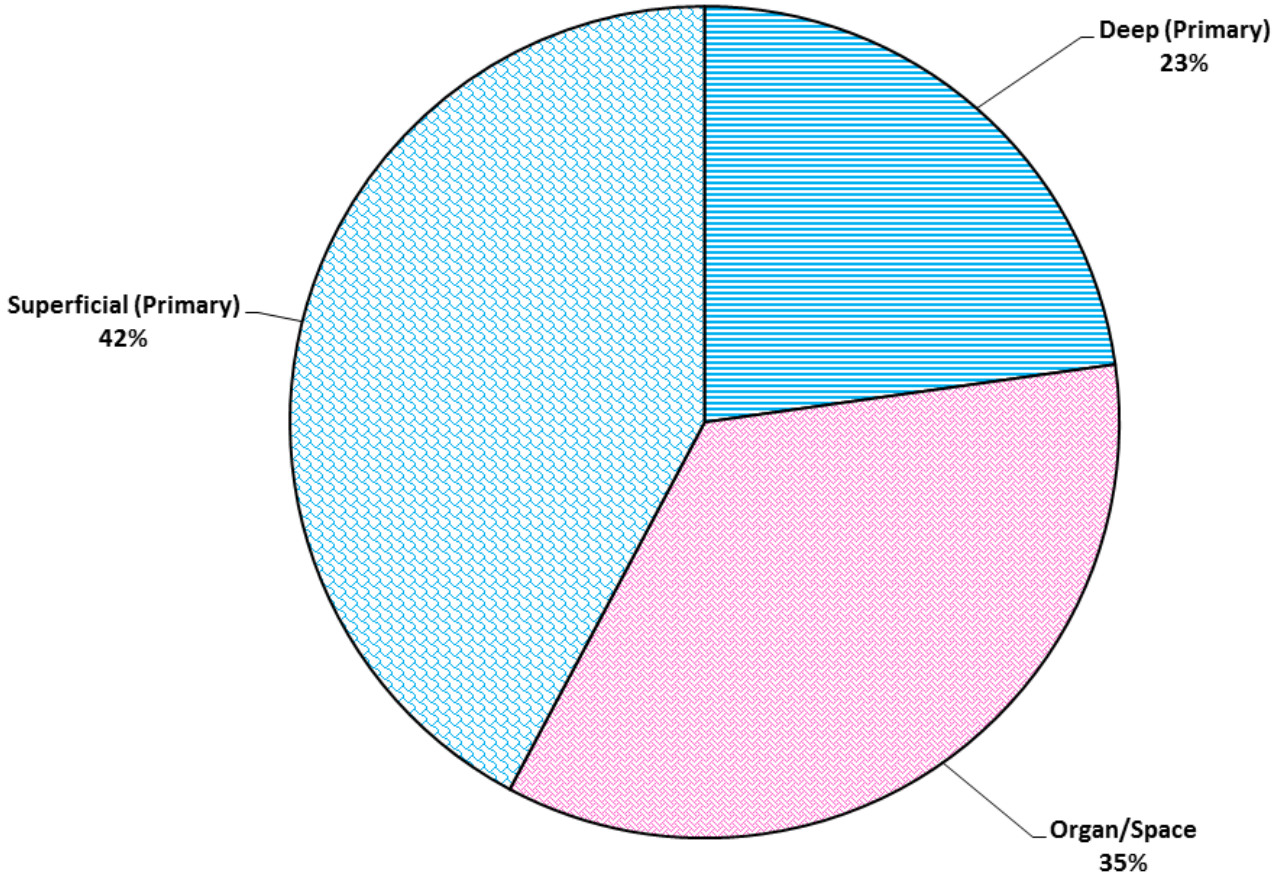


Figure 62: Colon Surgery (COLO) Surgical Site Infection Detection, Tennessee, 01/01/2012-12/31/2012

Number of SSI Events = 360;

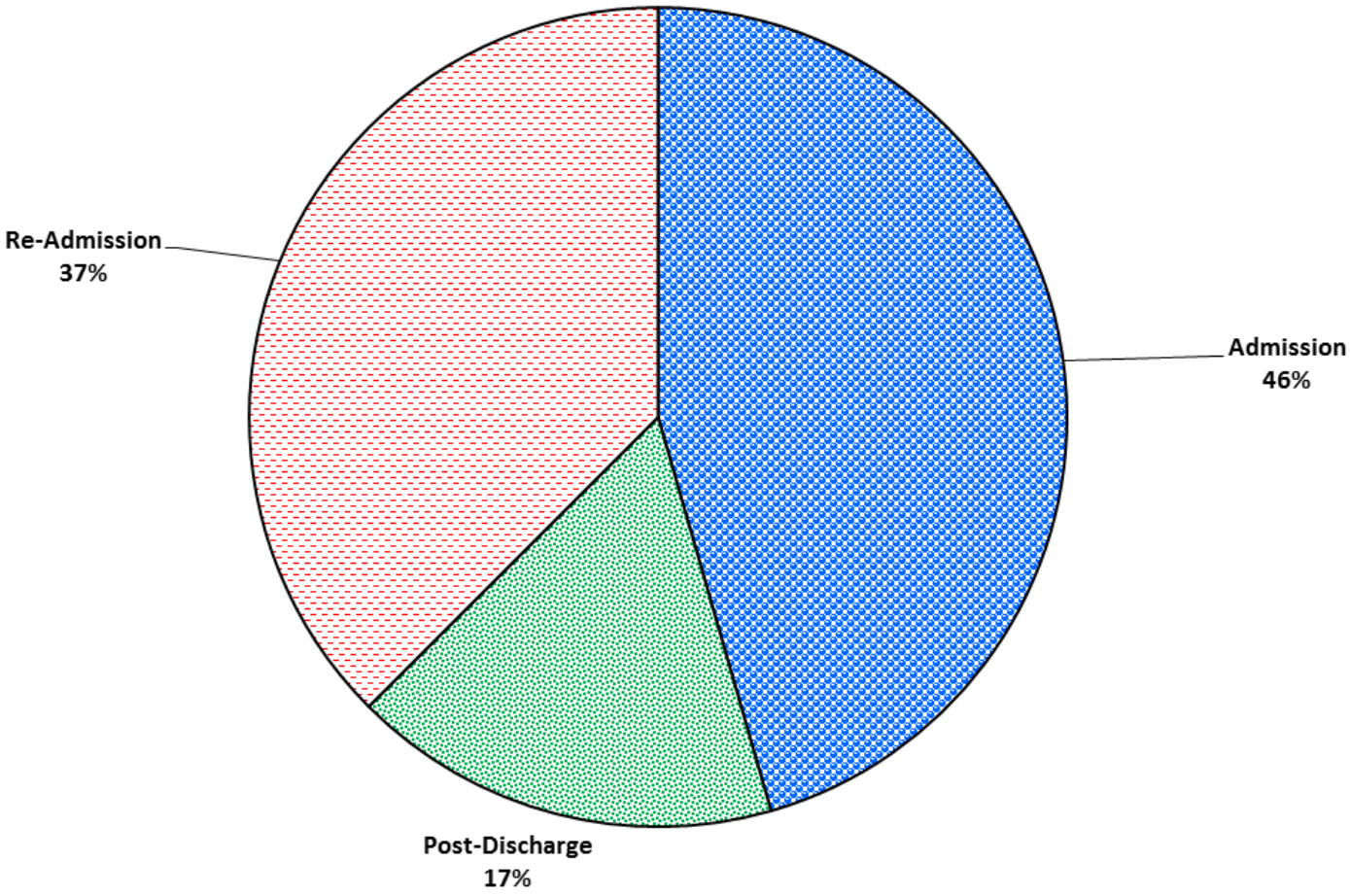


Figure 63: Organisms Isolated from Colon Surgery (COLO) Surgical Site Infections (SSIs), Tennessee, 01/01/2012–12/31/2012

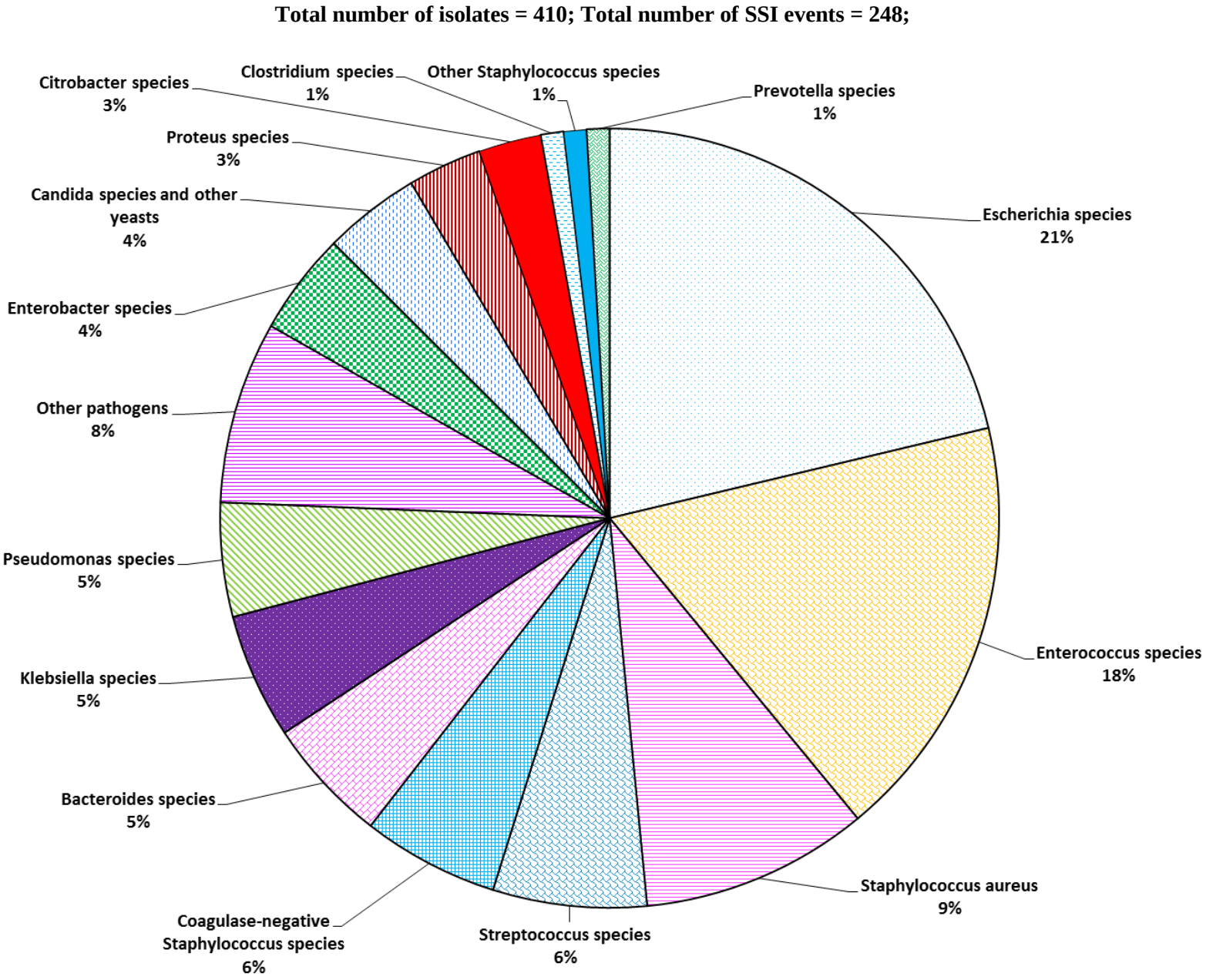


Table 25: Microorganisms Identified in Surgical Site Infections (SSIs) Following Colon (COLO) Procedures, Tennessee, 01/01/2012–12/31/2012

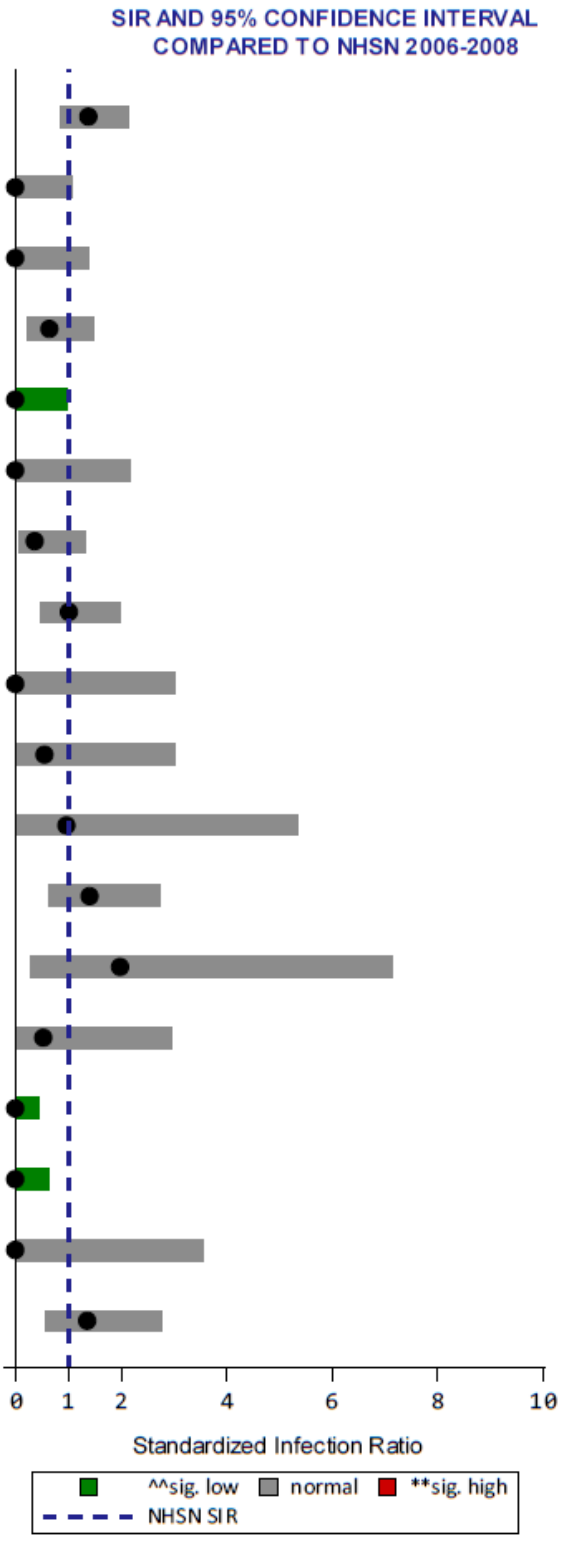
Total number of isolates = 410; Total number of SSI events = 248;

Microorganism	Number of Isolates	Percent
Escherichia species	90	22.0
Enterococcus species	75	18.3
Vancomycin-resistant *Enterococcus* (VRE) (% of total positive isolates)	18	(4.4)
Staphylococcus aureus	40	9.8
Methicillin-resistant *S. aureus* (MRSA) (% of total positive isolates)	28	(6.8)
Streptococcus species	27	6.6
Coagulase-negative *Staphylococcus* species	24	5.9
Bacteroides species	22	5.4
Klebsiella species	22	5.4
Pseudomonas species	20	4.9
Enterobacter species	18	4.4
Candida species and other yeasts	17	4.1
Candida albicans (% of total positive isolates)	9	(2.2)
Proteus species	13	3.2
Citrobacter species	11	2.7
Clostridium species	4	1.0
Other *Staphylococcus* species	4	1.0
Prevotella species	4	1.0
Other pathogens	19	4.6

Data reported as of September 27, 2013
Other pathogens = Acinetobacter spp., Actinomyces spp., Anaerobic spp., Corynebacterium spp., Eggerthella spp., Fusobacterium spp., Gram-positive Bacillus, Lactobacillus spp., Loboa spp., Morganella spp., Pantoea spp., Serratia spp., Trichophyton spp.

Figure 64: Colon Surgery (COLO) All and Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) in Facilities with ≥1 Predicted SSI, Tennessee, 01/01/2012 – 12/31/2012

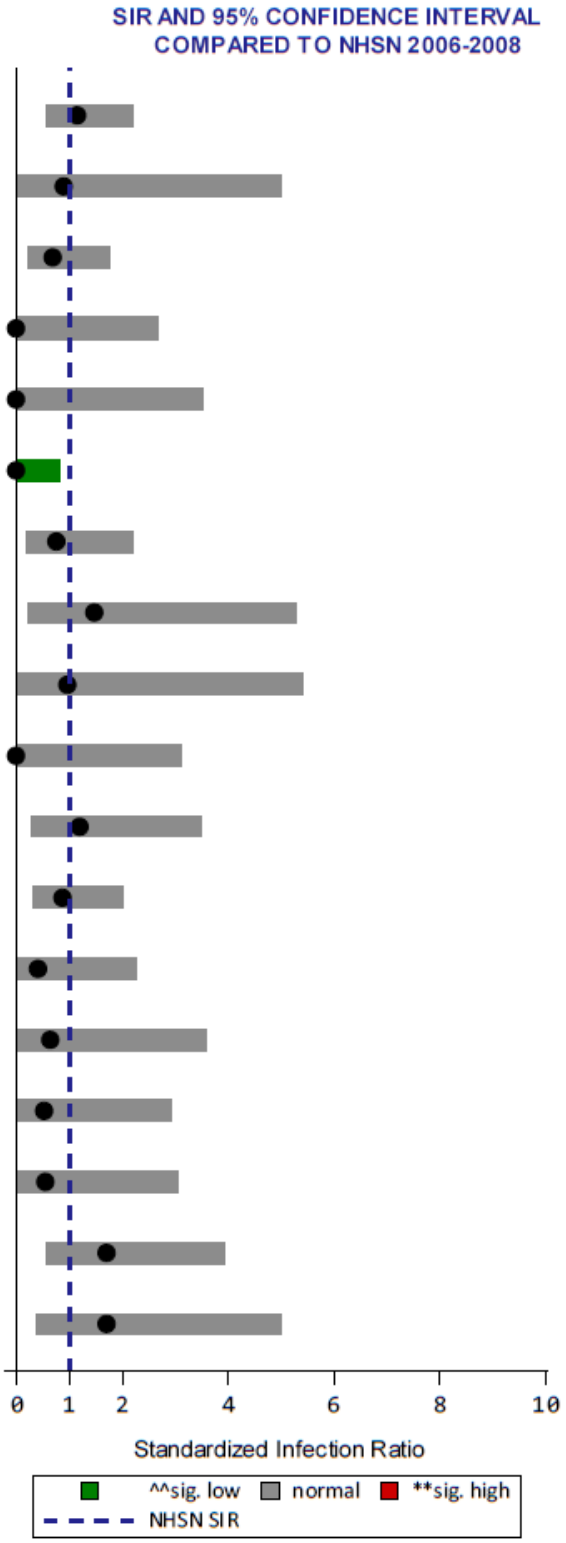
HOSPITAL	OBS	PRED	PROC	SIR
Baptist Memorial Hospital- Memphis	19	13.9	374	1.4
Blount Memorial Hospital*	0	3.5	120	0.0
Bristol Regional Medical Center*	0	2.7	99	0.0
Centennial Medical Center	5	7.8	282	0.6
Cookeville Regional Medical Center^^	0	3.8	142	0.0
Cumberland Medical Center*	0	1.7	71	0.0
Erlanger Medical Center	2	5.5	156	0.4
Fort Sanders Regional Medical Center	8	7.9	240	1.0
Franklin Woods Community Hospital*	0	1.2	47	0.0
Gateway Medical Center	1	1.8	58	0.5
Harton Regional Medical Center	1	1.0	42	1.0
Holston Valley Medical Center	8	5.8	195	1.4
Horizon Medical Center	2	1.0	35	2.0
Indian Path Medical Center	1	1.9	62	0.5
Jackson Madison County General Hosp.^^	0	8.3	253	0.0
Johnson City Medical Center^^	0	6.0	173	0.0
Laughlin Memorial Hospital*	0	1.0	36	0.0
Maury Regional Medical Center	7	5.2	163	1.3



Data Reported as of September 27, 2013
OBS = observed number of SSI
PRED = statistically 'predicted' number of SSI, based on NHSN baseline data
SIR = standardized infection ratio (observed/predicted number of SSI)
PROC = number of procedures performed
*** Significantly higher than national baseline*
^^ Significantly lower than national baseline
** Zero infections, but not statistically significant*

Figure 64 (cont'd)

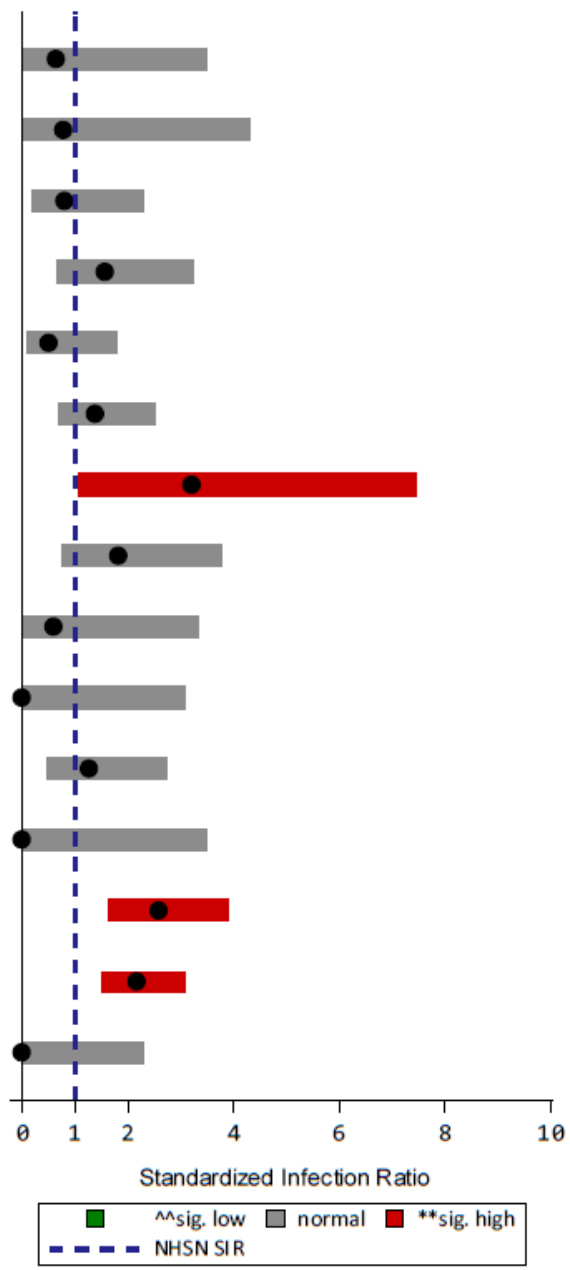
HOSPITAL	OBS	PRED	PROC	SIR
Memorial Healthcare System	9	7.9	261	1.1
Memorial Hixson Hospital	1	1.1	42	0.9
Methodist Healthcare Germantown	4	5.9	218	0.7
Methodist Healthcare North*	0	1.4	51	0.0
Methodist Healthcare South*	0	1.0	52	0.0
Methodist Medical Center of Oak Ridge^^	0	4.4	133	0.0
Methodist University Hospital	3	4.0	130	0.8
Morristown-Hamblen Healthcare System	2	1.4	58	1.5
Nashville General Hospital at Meharry	1	1.0	37	1.0
NorthCrest Medical Center*	0	1.2	37	0.0
Parkridge Medical Center	3	2.5	68	1.2
Parkwest Medical Center- Knoxville	5	5.8	170	0.9
Physician's Regional Medical Center	1	2.4	75	0.4
Regional Hospital of Jackson	1	1.6	56	0.6
Regional Medical Center- Memphis	1	1.9	54	0.5
SkyRidge Medical Center	1	1.8	56	0.5
Skyline Medical Center	5	3.0	122	1.7
Southern Hills Medical Center	3	1.8	54	1.7



Data Reported as of September 27, 2013
OBS = observed number of SSI
PRED = statistically 'predicted' number of SSI, based on NHSN baseline data
SIR = standardized infection ratio (observed/predicted number of SSI)
PROC = number of procedures performed
****** Significantly higher than national baseline***
^^ Significantly lower than national baseline
*** Zero infections, but not statistically significant***

Figure 64 (cont'd)

HOSPITAL	OBS	PRED	PROC	SIR
Southern Tennessee Medical Center	1	1.6	42	0.6
St. Francis Bartlett	1	1.3	48	0.8
St. Francis Hospital- Memphis	3	3.8	134	0.8
St. Thomas Midtown (Baptist - Nashville)	7	4.4	140	1.6
St. Thomas Rutherford (Mid. TN Med. Ctr)	2	4.0	138	0.5
St. Thomas West Hospital	10	7.3	218	1.4
StoneCrest Medical Center**	5	1.6	49	3.2
Summit Medical Center	7	3.8	126	1.8
Sumner Regional Medical Center	1	1.7	62	0.6
Sycamore Shoals Hospital*	0	1.2	42	0.0
Turkey Creek Medical Center	6	4.8	146	1.3
University Medical Center- Lebanon*	0	1.1	37	0.0
University of Tennessee Medical Ctr**	22	8.6	269	2.6
Vanderbilt Medical Center**	30	13.9	394	2.2
Williamson Medical Center*	0	1.6	62	0.0



Data Reported as of September 27, 2013
OBS = observed number of SSI
PRED = statistically 'predicted' number of SSI, based on NHSN baseline data
SIR = standardized infection ratio (observed/predicted number of SSI)
PROC = number of procedures performed
****** *Significantly higher than national baseline***
^^ *Significantly lower than national baseline*
* *Zero infections, but not statistically significant*

SSI FIGURES AND TABLES

HYST Procedures

January 1, 2012 – December 31, 2012

Figure 65: Abdominal Hysterectomy (HYST) All and Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) by Quarter, Tennessee, 01/01/2012–12/31/2012

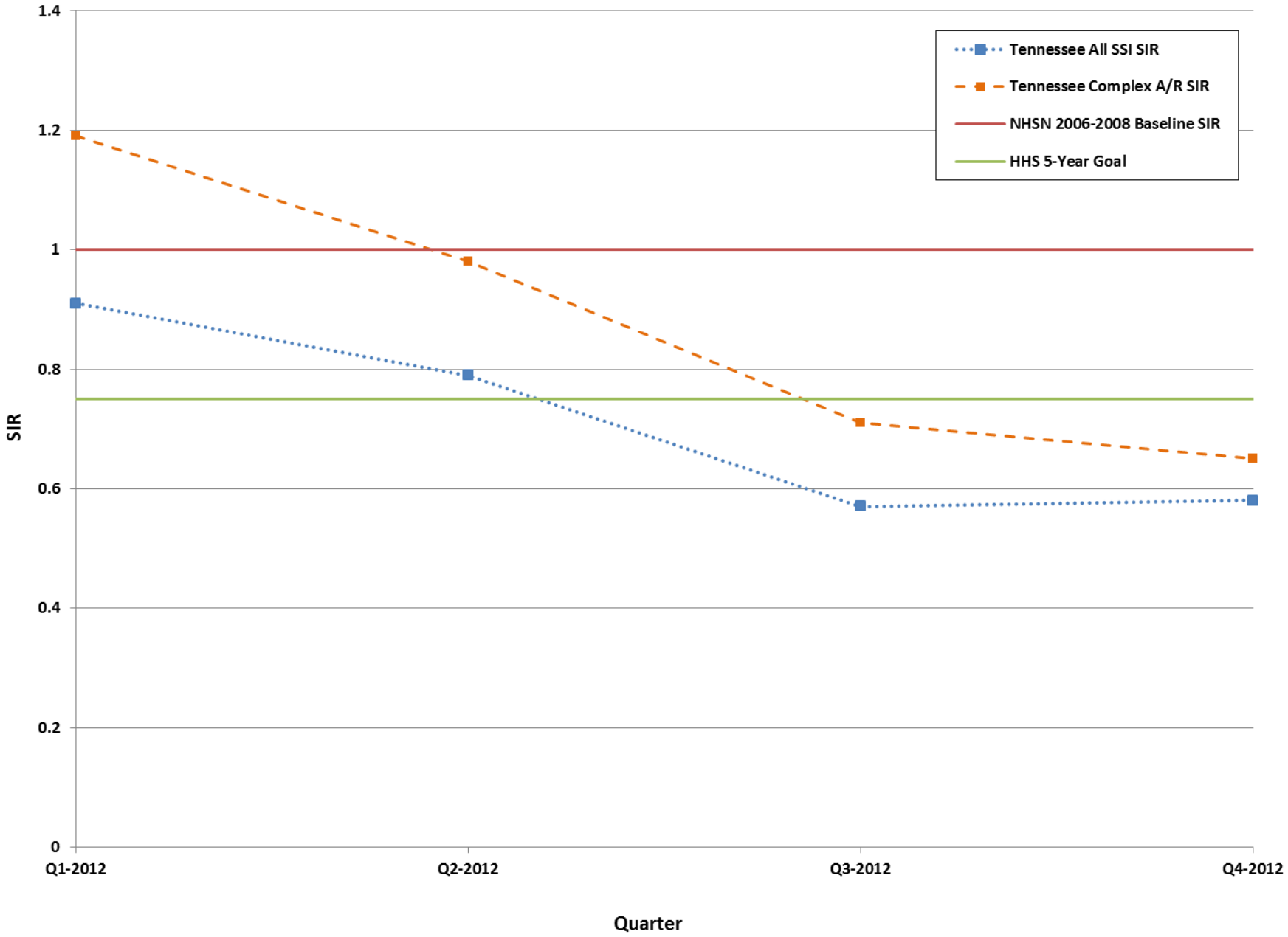


Table 26: Abdominal Hysterectomy (HYST) All and Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) by Six-Month Period, Tennessee, 01/01/2012 - 12/31/2012

					SIR, 95% CONFIDENCE INTERVAL, AND KEY PERCENTILES							
STATE	SIR TYPE	YEAR	HALF	No.	SIR	LOWER LIMIT	UPPER LIMIT	10%	25%	50%	75%	90%
Tennessee	All Procedures	2012	2	93	0.57	0.43	0.74	0.00	0.00	0.44	0.77	1.38
			1	96	0.85	0.67	1.05	0.00	0.00	0.48	1.00	1.95
	Complex A/R	2012	2	93	0.68	0.43	1.02	0.00	0.00	0.77	1.14	1.33
			1	94	1.08	0.76	1.50	0.00	0.00	0.72	1.82	2.17

Data reported as of September 27, 2013
No. = number of facilities with reporting units; SIR = Standardized Infection Ratio (observed/predicted number of SSI)
Key percentiles include facilities with at least one predicted infection
Red highlighting indicates SIR for reporting period is significantly higher than national 2006-2008 SIR of 1.0
Green highlighting indicates SIR for reporting period is significantly lower than national 2006-2008 SIR of 1.0

Table 27: Crude (Unadjusted) Rate of Abdominal Hysterectomy (HYST) Surgical Site Infection (SSI) by Six-Month Period, Tennessee, 01/01/2012 - 12/31/2012

STATE	YEAR	HALF	No. of hospitals	No. of procedures	No. of SSI	TN Rate*
Tennessee	2012	2	83	4442	55	**1.24**
		1	84	4431	70	**1.58**

Data reported as of September 27, 2013
****Per 100 operations***

Figure 66: Abdominal Hysterectomy (HYST) Surgical Site Infections by Site, Tennessee, 01/01/2012-12/31/2012

Number of Events = 125;

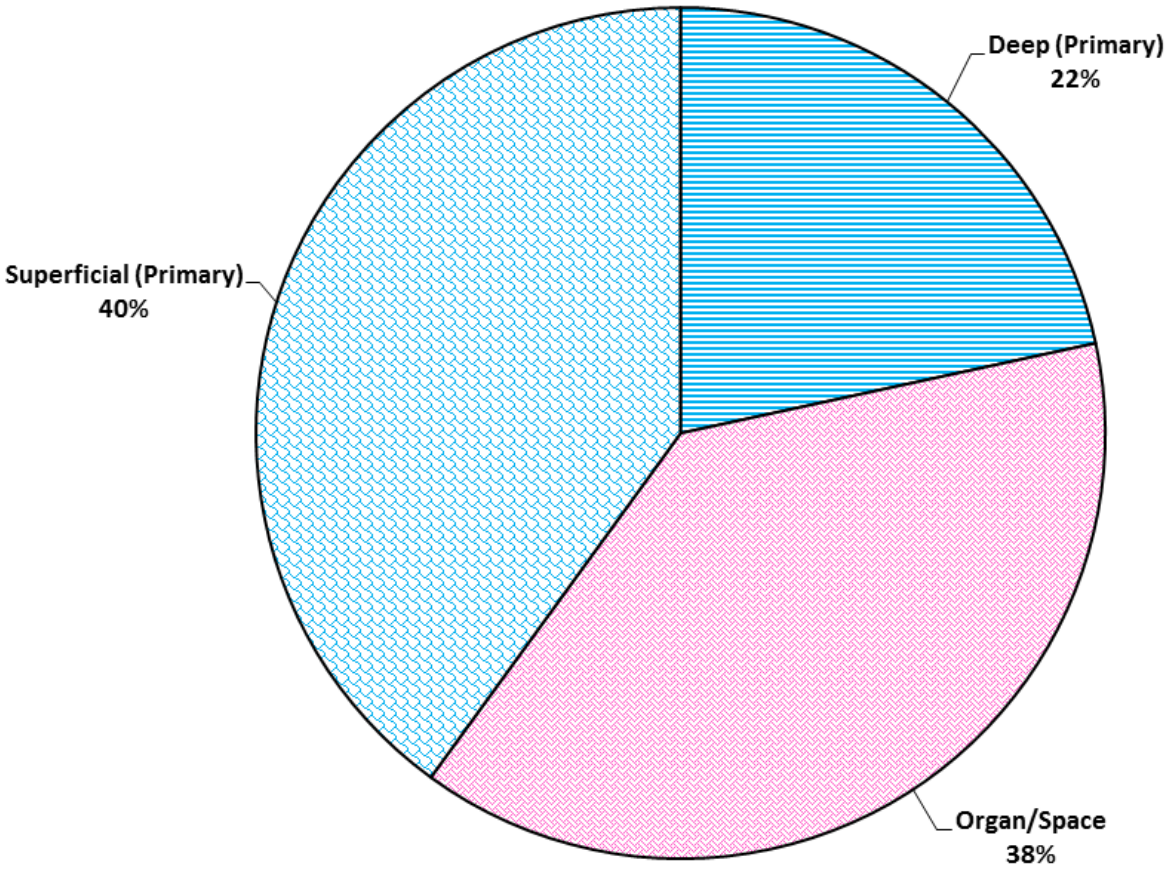


Figure 67: Abdominal Hysterectomy (HYST) Surgical Site Infection Detection, Tennessee, 01/01/2012-12/31/2012

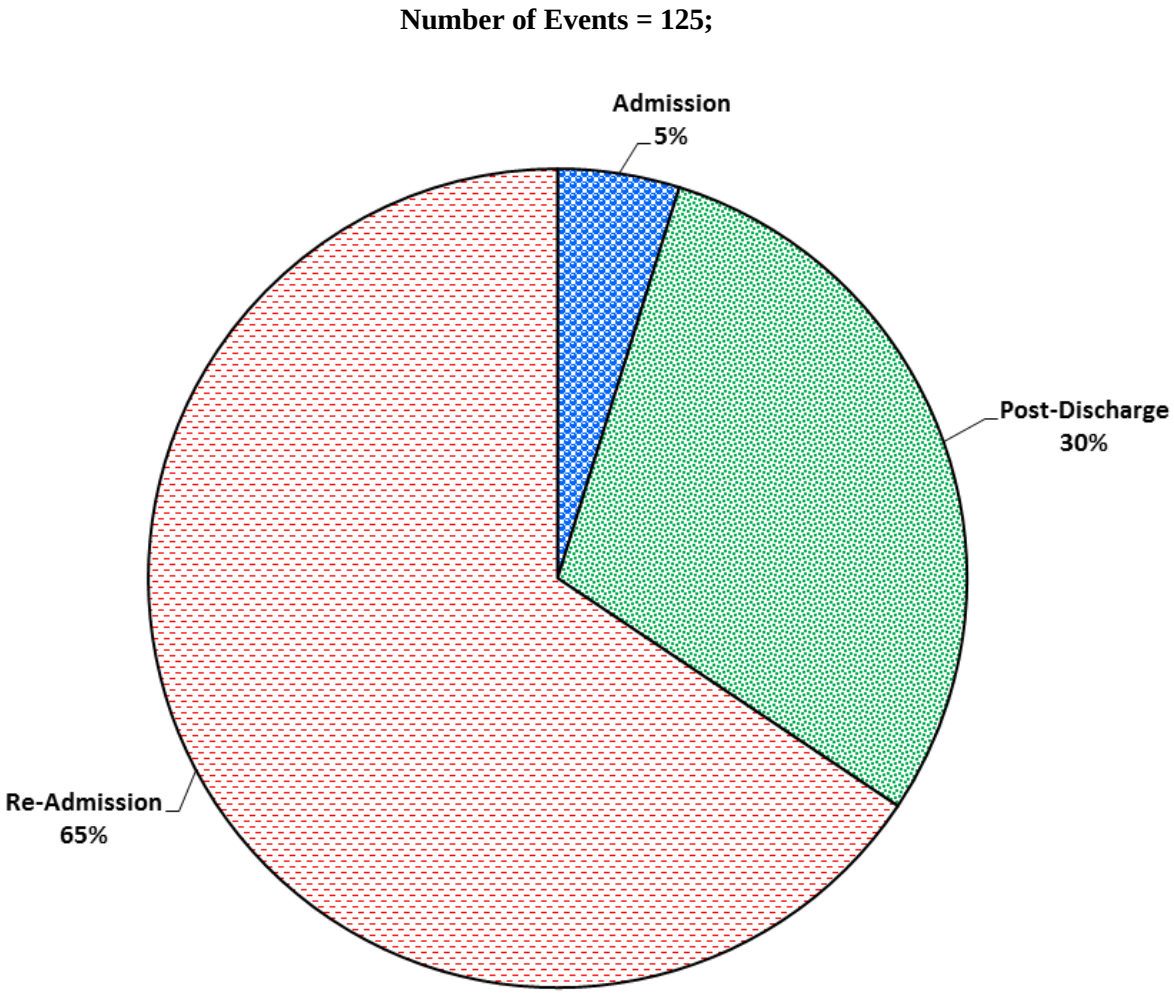


Figure 68: Organisms Isolated from Abdominal Hysterectomy (HYST) Surgical Site Infections (SSIs), Tennessee, 01/01/2012–12/31/2012

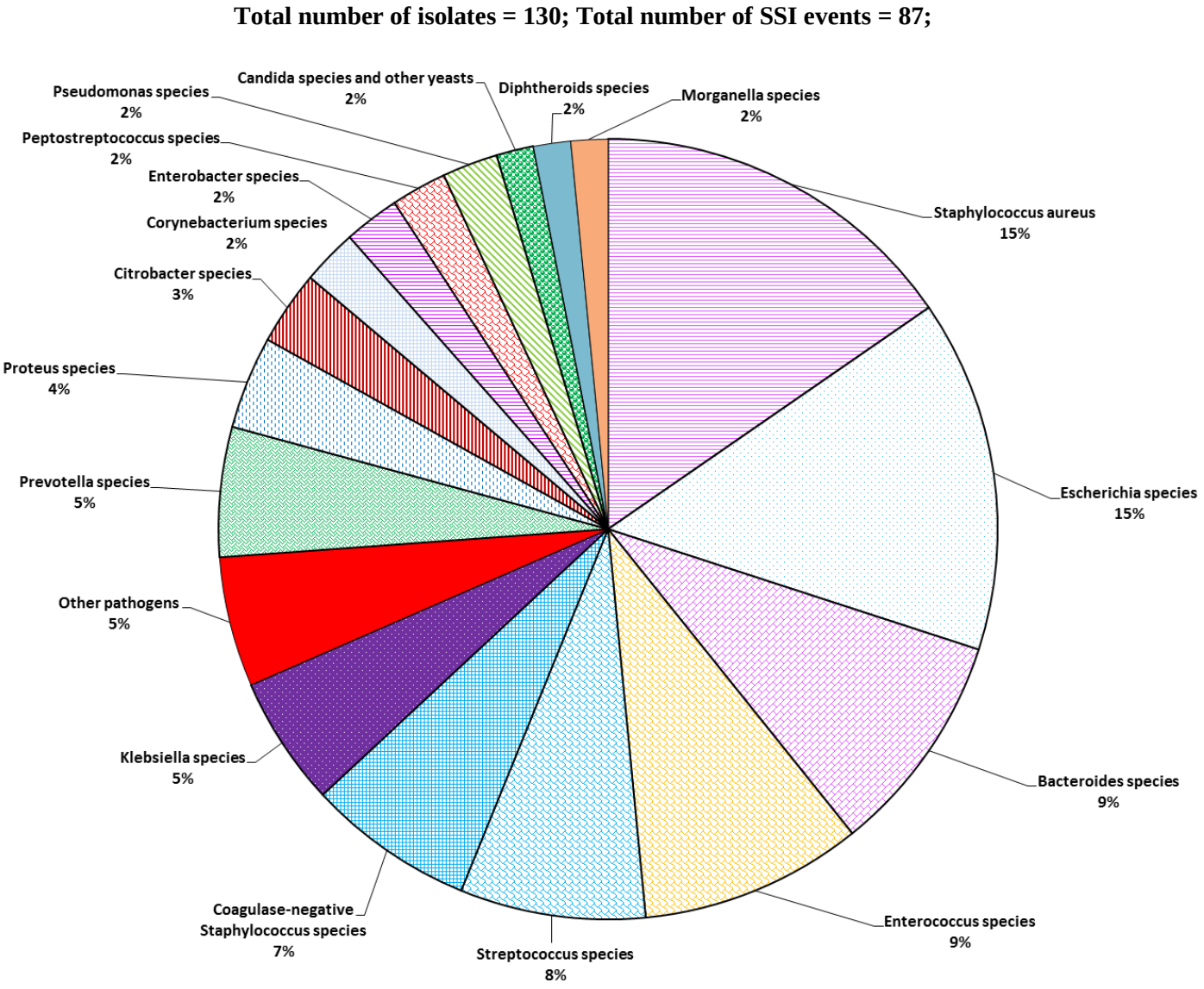


Table 28: Microorganisms Identified in Surgical Site Infections (SSIs) Following Abdominal Hysterectomy (HYST) Procedures, Tennessee, 01/01/2012–12/31/2012

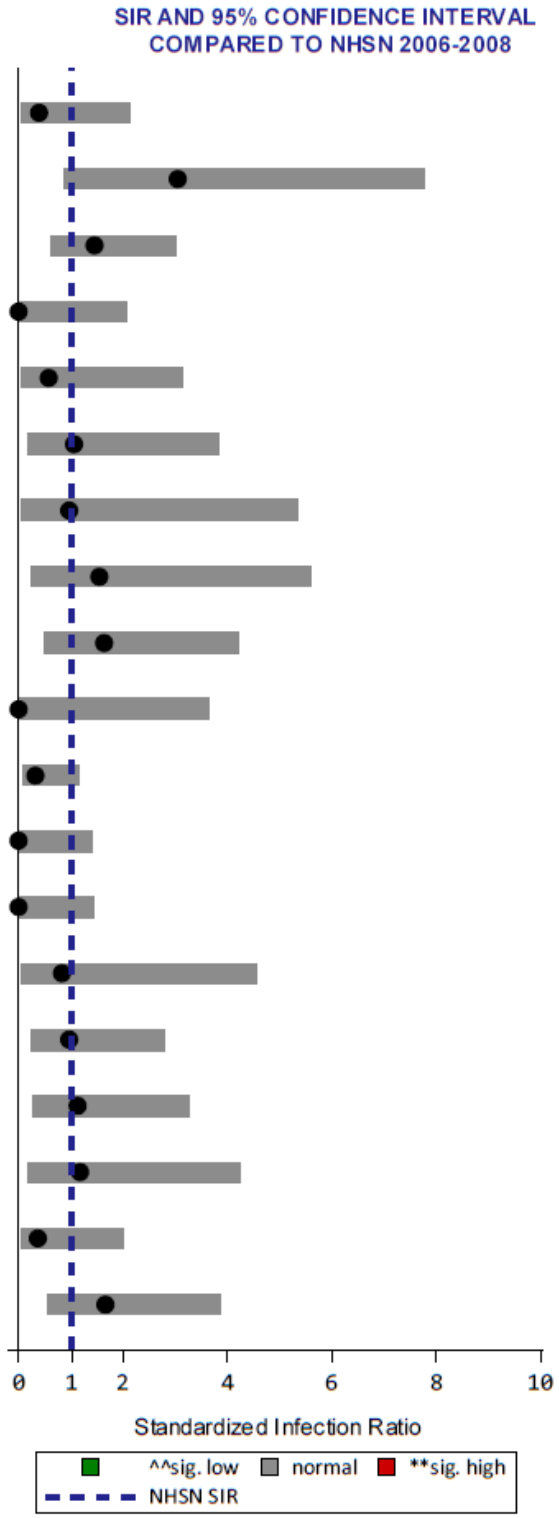
Total number of isolates = 130; Total number of SSI events = 87;

Microorganism	Number of Isolates	Percent
Staphylococcus aureus	20	15.4
Methicillin-resistant *S. aureus* (MRSA) (% of total positive isolates)	10	(7.7)
Escherichia species	19	14.6
Bacteroides species	12	9.2
Enterococcus species	12	9.2
Streptococcus species	10	7.7
Coagulase-negative *Staphylococcus* species	9	6.9
Klebsiella species	7	5.4
Prevotella species	7	5.4
Proteus species	5	3.8
Citrobacter species	4	3.1
Corynebacterium species	3	2.3
Enterobacter species	3	2.3
Peptostreptococcus species	3	2.3
Pseudomonas species	3	2.3
Candida species and other yeasts	2	1.5
Candida albicans (% of total positive isolates)	2	(1.5)
Diphtheroids species	2	1.5
Morganella species	2	1.5
Other pathogens	7	5.4

Data reported as of September 27, 2013
Other pathogens = Acinetobacter spp., Bacillus spp., Eggerthella spp., Gardnerella spp., Gram-positive Bacillus spp., Gram-positive spp., Haemophilus spp.

Figure 69: Abdominal Hysterectomy (HYST) All and Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) in Facilities with ≥1 Predicted SSI, Tennessee, 01/01/2012 – 12/31/2012

HOSPITAL	OBS	PRED	PROC	SIR
Baptist Memorial Hospital for Women	1	2.6	360	0.4
Baptist Memorial Hospital- Memphis	4	1.3	181	3.0
Centennial Medical Center	7	4.8	917	1.5
Erlanger East*	0	1.8	229	0.0
Erlanger Medical Center	1	1.8	238	0.6
Fort Sanders Regional Medical Center	2	1.9	296	1.1
Gateway Medical Center	1	1.0	157	1.0
Holston Valley Medical Center	2	1.3	179	1.6
Jackson Madison County General Hosp.	4	2.4	396	1.6
Maury Regional Medical Center*	0	1.0	129	0.0
Methodist Healthcare Germantown	2	6.3	879	0.3
Methodist University Hospital*	0	2.7	293	0.0
Parkridge East Hospital*	0	2.5	338	0.0
Parkridge Medical Center	1	1.2	149	0.8
Parkwest Medical Center- Knoxville	3	3.2	374	1.0
St. Thomas Midtown (Baptist - Nashville)	3	2.7	359	1.1
St. Thomas Rutherford (Mid. TN Med. Ctr)	2	1.7	241	1.2
University of Tennessee Medical Ctr	1	2.8	398	0.4
Vanderbilt Medical Center	5	3.0	308	1.6



Data Reported as of September 27, 2013
OBS = observed number of SSI
PRED = statistically 'predicted' number of SSI, based on NHSN baseline data
SIR = standardized infection ratio (observed/predicted number of SSI)
PROC = number of procedures performed
****** *Significantly higher than national baseline***
^^ *Significantly lower than national baseline*
* *Zero infections, but not statistically significant*

LABORATORY-IDENTIFIED (LABID) EVENTS

MRSA LabID Events

Acute Care Hospitals

Figure 70: Standardized Infection Ratio (SIR) for Methicillin-resistant *Staphylococcus aureus* (MRSA) Laboratory-Identified (LabID) Events for Acute Care Hospitals, by Quarter, Tennessee, 01/01/2012-12/31/2012

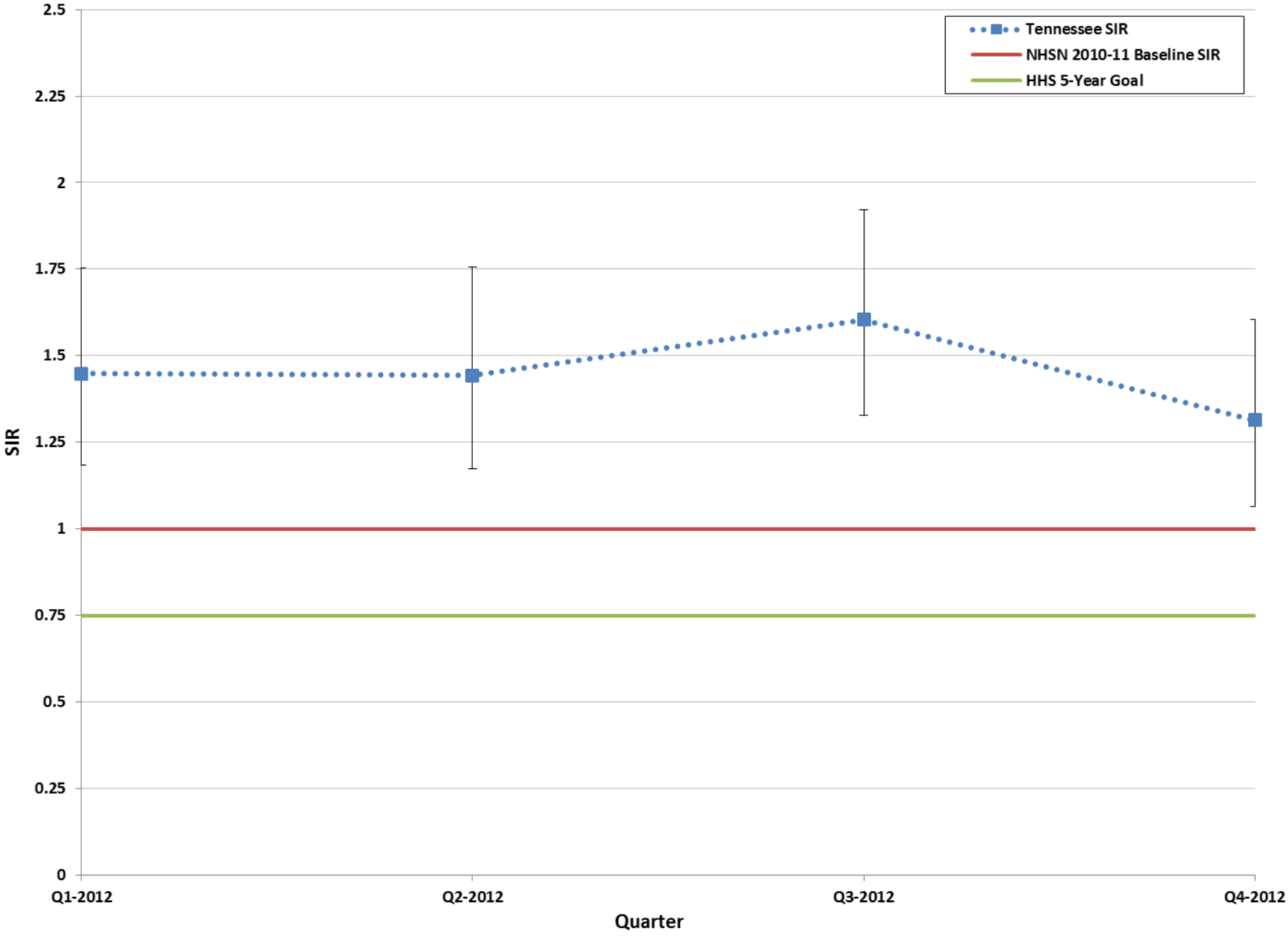


Table 29: Methicillin-resistant *Staphylococcus aureus* (MRSA) Laboratory-Identified (LabID) Events Standardized Infection Ratio (SIR) in Acute Care Hospitals by Six-Month Period, Tennessee, 01/01/2012 - 12/31/2012

				SIR, 95% CONFIDENCE INTERVAL, AND KEY PERCENTILES							
STATE	YEAR	HALF	No.	SIR	LOWER LIMIT	UPPER LIMIT	10%	25%	50%	75%	90%
Tennessee	2012	2	109	1.46	1.27	1.67	0.00	0.76	1.38	2.05	2.61
		1	79	1.45	1.25	1.66	0.37	0.59	1.35	2.02	2.93

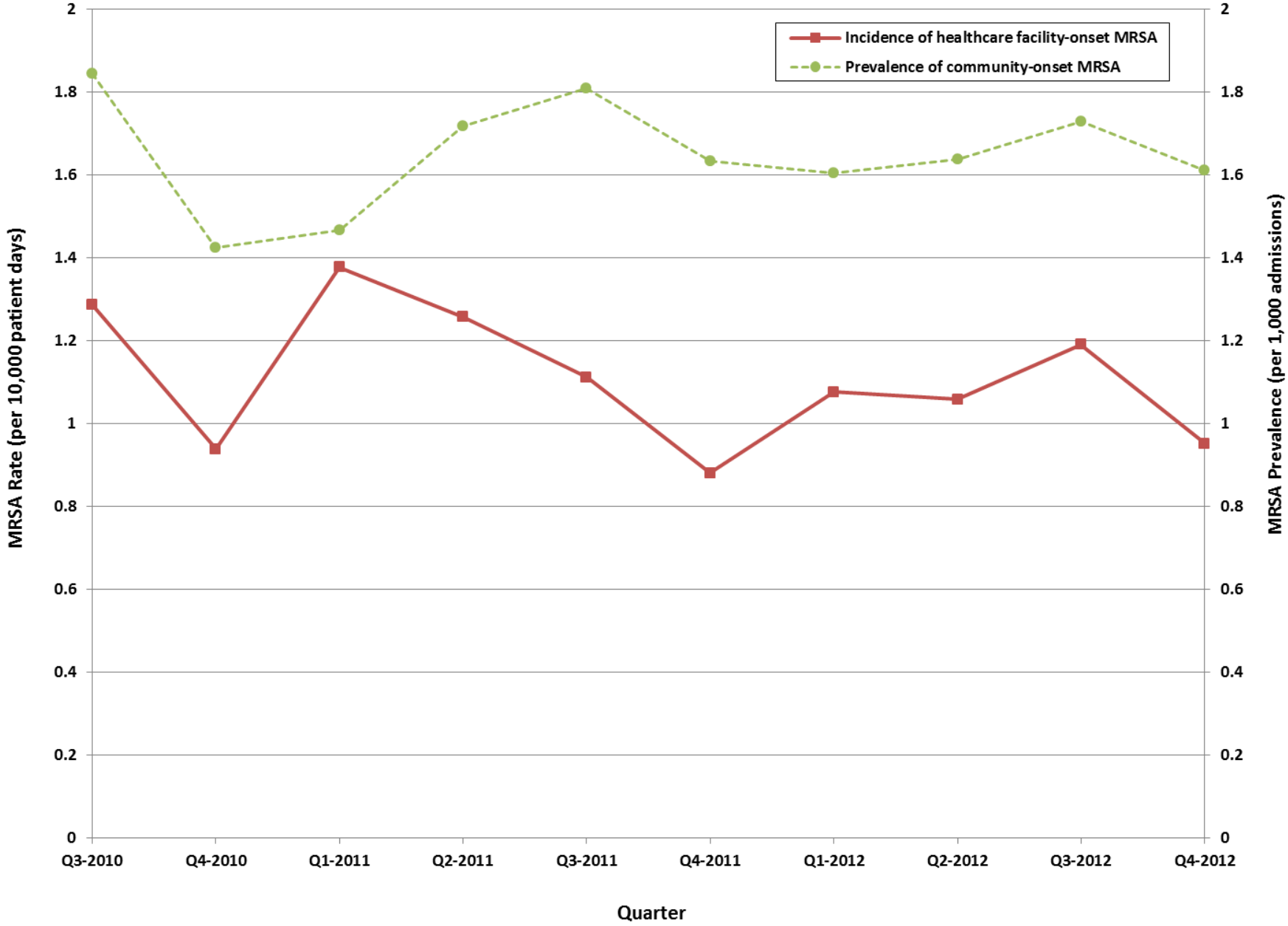
Data reported as of September 27, 2013
No. = number of facilities reporting; SIR = standardized infection ratio (observed/predicted number of events)
SIRs are only available from January 2012
Includes facilities with an average daily census <25 from July 2012
Key percentiles include facilities with at least one predicted infection
Red highlighting indicates SIR for reporting period is significantly higher than national 2010-2011 SIR of 1.0
Green highlighting indicates SIR for reporting period is significantly lower than national 2010-2011 SIR of 1.0

Table 30: Methicillin-resistant *Staphylococcus aureus* (MRSA) Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Acute Care Hospitals by Six-Month Period, Tennessee, 07/01/2010 - 12/31/2012

				Healthcare Facility-Onset Incidence[1]	Community-Onset Prevalence[2]
STATE	YEAR	HALF	No.	POOLED MEAN	POOLED MEAN
Tennessee	2012	2	109	1.07	1.67
		1	79	1.07	1.62
	2011	2	79	1.00	1.72
		1	78	1.32	1.59
	2010	2	77	1.11	1.63

Data reported as of September 27, 2013
No. = number of facilities reporting
[1]Events per 10,000 patient days
[2]Events per 1,000 admissions
Includes facilities with an average daily census <25 from July 2012

Figure 71: Methicillin-resistant *Staphylococcus aureus* (MRSA) Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Acute Care Hospitals, by Quarter, Tennessee, 07/01/2010-12/31/2012



LABORATORY-IDENTIFIED (LABID) EVENTS

MRSA LabID Events

Long-term Acute Care (LTAC) Facilities

Figure 72: Methicillin-resistant *Staphylococcus aureus* (MRSA) Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Long-term Acute Care (LTAC) Facilities by Quarter, Tennessee, 07/01/2010-12/31/2012

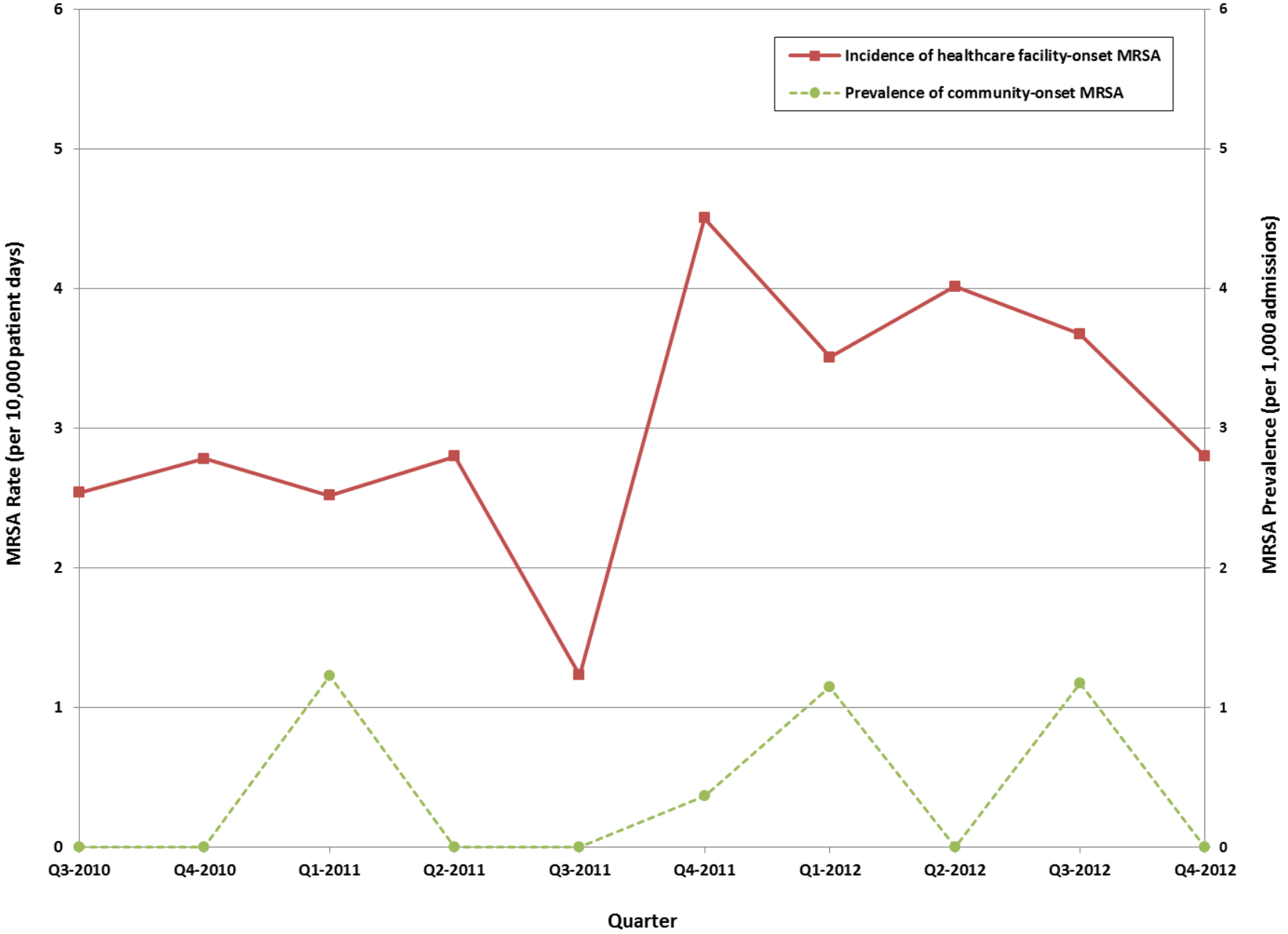


Table 31: Methicillin-resistant Staphylococcus aureus (MRSA) Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Long-term Acute Care (LTAC) by Six-Month Period, Tennessee, 07/01/2010 - 12/31/2012

				Healthcare Facility-Onset Incidence[1]	Community-Onset Prevalence[2]
STATE	YEAR	HALF	No.	POOLED MEAN	POOLED MEAN
Tennessee	2012	2	9	3.23	0.58
		1	9	3.76	0.58
	2011	2	9	2.87	0.28
		1	9	2.66	0.60
	2010	2	9	2.66	0.00

Data reported as of September 27, 2013
No. = number of facilities reporting
[1]Events per 10,000 patient days
[2]Events per 1,000 admissions

LABORATORY-IDENTIFIED (LABID) EVENTS

C. difficile Infection LabID Events

Acute Care Hospitals

Figure 73: Standardized Infection Ratio (SIR) for *C. difficile* Infection (CDI) Laboratory-Identified (LabID) Events for Acute Care Hospitals by Quarter, Tennessee, 01/01/2012-12/31/2012

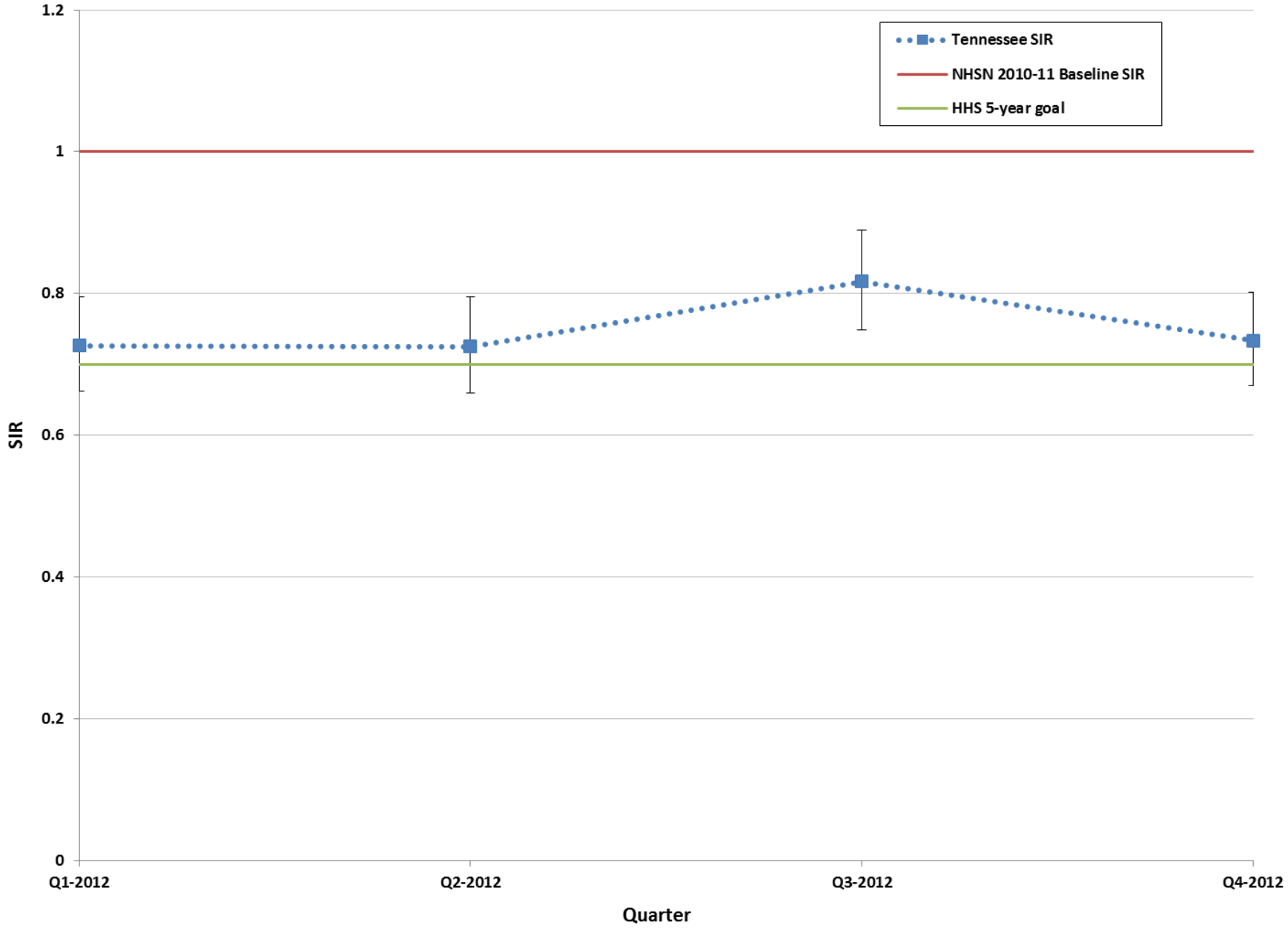


Table 32: *C. difficile* Infection (CDI) Laboratory-Identified (LabID) Events Standardized Infection Ratio (SIR) in Acute Care Hospitals by Six-Month Period, Tennessee, 01/01/2012 - 12/31/2012

				SIR, 95% CONFIDENCE INTERVAL, AND KEY PERCENTILES							
STATE	YEAR	HALF	No.	SIR	LOWER LIMIT	UPPER LIMIT	10%	25%	50%	75%	90%
Tennessee	2012	2	109	0.78	0.73	0.82	0.00	0.35	0.63	1.00	1.51
		1	78	0.73	0.68	0.77	0.12	0.48	0.65	0.89	1.26

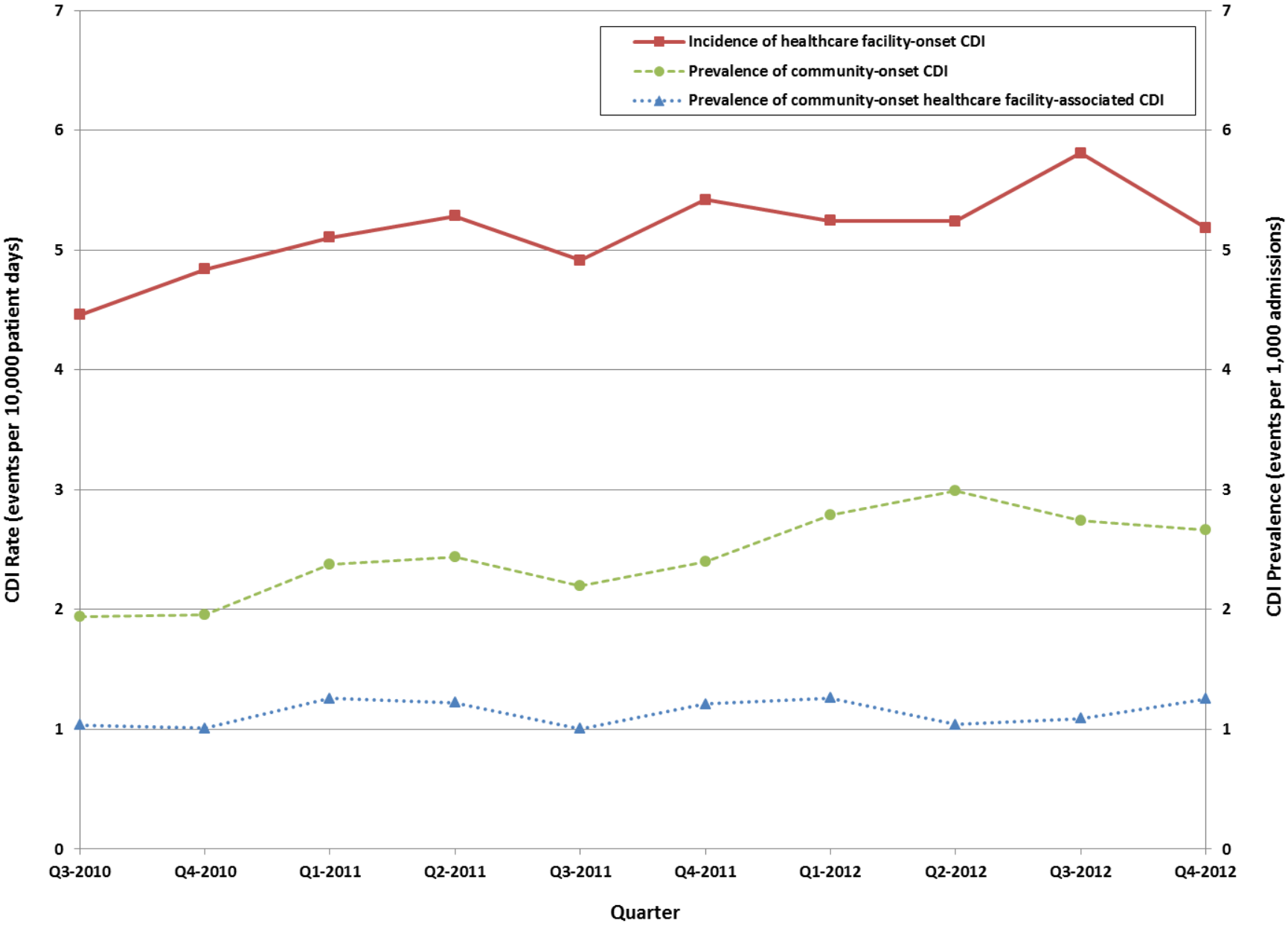
Data reported as of September 27, 2013
No. = number of facilities reporting; SIR = standardized infection ratio (observed/predicted number of events)
SIRs are only available from January 2012
Includes facilities with an average daily census <25 from July 2012
Key percentiles include facilities with at least one predicted infection
Red highlighting indicates SIR for reporting period is significantly higher than national 2010-2011 SIR of 1.0
Green highlighting indicates SIR for reporting period is significantly lower than national 2010-2011 SIR of 1.0

Table 33: *C. difficile* Infection (CDI) Laboratory-Identified (LabID) Events Incidence and Prevalence Rates in Acute Care Hospitals by Six-Month Period, Tennessee, 07/01/2010 - 12/31/2012

				Healthcare Facility-Onset Incidence Rate[1]	Community-Onset Prevalence Rate[2]	
STATE	YEAR	HALF	No.	POOLED MEAN	CO POOLED MEAN	CO-HFA POOLED MEAN
Tennessee	2012	2	109	5.50	2.71	1.17
		1	78	5.24	2.89	1.15
	2011	2	79	5.17	2.30	1.11
		1	78	5.19	2.41	1.24
	2010	2	77	4.65	1.94	1.02

Data reported as of September 27, 2013
No. = number of facilities reporting; CO = community-onset; CO-HFA = community-onset healthcare facility-associated
[1]Events per 10,000 patient days
[2]Events per 1,000 admissions
Includes facilities with an average daily census <25 from July 2012

Figure 74: *C. difficile* Infection (CDI) Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Acute Care Hospitals by Quarter, Tennessee, 07/01/2010-12/31/2012



LABORATORY-IDENTIFIED (LABID) EVENTS

C. difficile Infection LabID Events

Long-term Acute Care (LTAC) Facilities

Figure 75: *C. difficile* Infection (CDI) Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Long-term Acute Care (LTAC) Facilities by Six-Month Period, Tennessee, 07/01/2010-12/31/2012

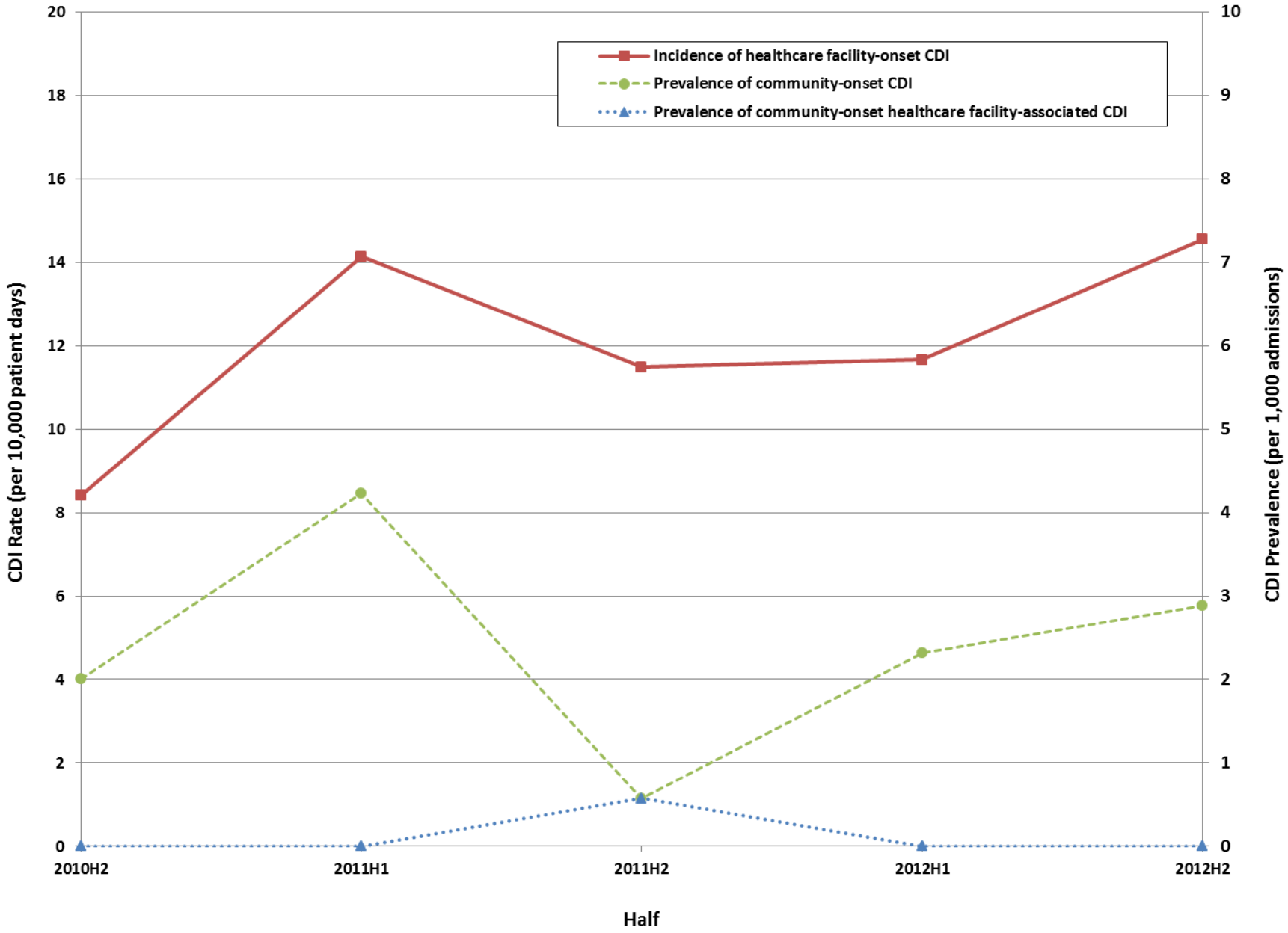


Table 34: *C. difficile* Infection (CDI) Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Long-term Acute Care (LTAC) Facilities by Six-Month Period, Tennessee, 07/01/2010 - 12/31/2012

				Healthcare Facility-Onset Incidence Rate[1]	Community-Onset Prevalence Rate[2]	
STATE	YEAR	HALF	No.	POOLED MEAN	CO POOLED MEAN	CO-HFA POOLED MEAN
Tennessee	2012	2	9	14.5	2.88	0.00
		1	9	11.7	2.32	0.00
	2011	2	9	11.5	0.58	0.58
		1	9	14.1	4.23	0.00
	2010	2	9	8.41	2.00	0.00

Data reported as of September 27, 2013
No. = number of facilities reporting; CO = community-onset; CO-HFA = community-onset healthcare facility-associated
[1]Events per 10,000 patient days
[2]Events per 1,000 admissions

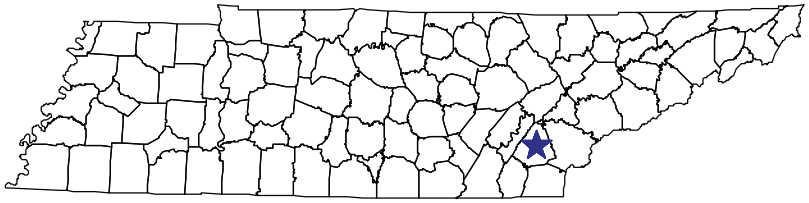
FACILITY SPECIFIC SUMMARY PAGES

TABLE OF CONTENTS – FACILITY SPECIFIC SUMMARY PAGES

Athens Regional Medical Center, Athens, McMinn County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.4	251	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	1	0.9	722	**N/A**	**N/A**	1.45
SSI	Colon surgery	0	0.9	37	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.1	7	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.4	251	N/A**
2011	1	0	0.5	367	N/A**
2010	1	0	0.2	166	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	1	1	0.9	722	N/A**

**Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.9	37	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.1	7	N/A**

**Number of predicted infections <1; no SIR calculated

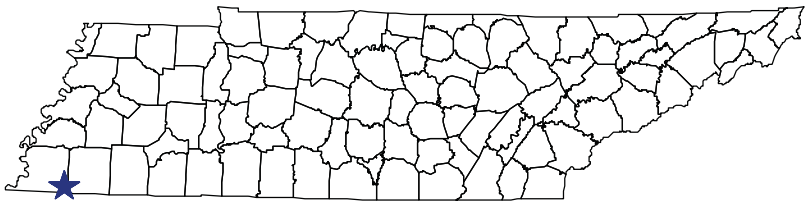
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Baptist Memorial Hospital- Collierville, Collierville, Shelby County

Medical School Affiliation: Major teaching

Bed Size Category: 50-99 beds



Standardized Infection Ratio by Infection Type, 2012

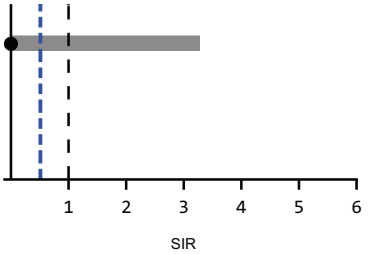
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	1.1	438	0.00	(0.00, 3.28)	0.53
CAUTI	Adult/Pediatric ICU	0	2.0	848	0.00	(0.00, 1.89)	1.45
SSI	Colon surgery	0	0.4	20	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.0	0	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

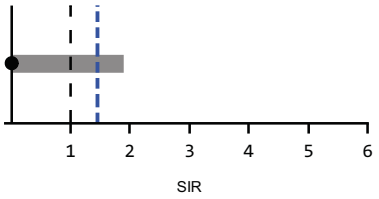
YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	1	0	1.1	438	0.0	
2011	1	0	0.9	488	N/A**	
2010	1	1	0.8	428	N/A**	



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	1	0	2.0	848	0.0	



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.4	20	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.0	0	N/A**

**Number of predicted infections <1; no SIR calculated

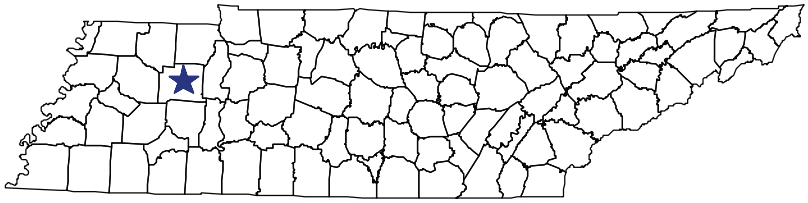
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Baptist Memorial Hospital- Huntingdon, Huntingdon, Carroll County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.0	25	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	0	0.2	126	**N/A**	**N/A**	1.45
SSI	Colon surgery	0	0.0	0	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.0	0	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.0	25	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.2	126	N/A**

**Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.0	0	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.0	0	N/A**

**Number of predicted infections <1; no SIR calculated

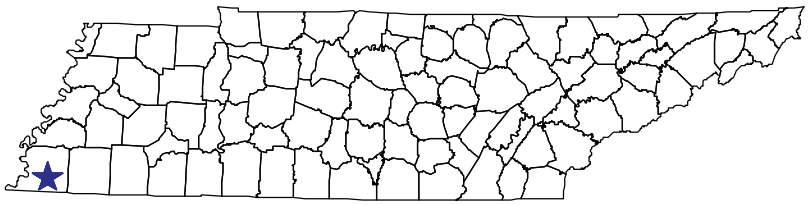
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Baptist Memorial Hospital- Memphis, Memphis, Shelby County

Medical School Affiliation: None

Bed Size Category: 400+ beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	25	30.3	17,995	0.82	(0.53, 1.22)	0.53
CAUTI	Adult/Pediatric ICU	47	41.0	18,879	1.15	(0.84, 1.53)	1.45
SSI	Colon surgery	19	13.9	374	1.37	(0.82, 2.14)	0.94
	Abdominal hysterectomy	4	1.3	181	3.04	(0.83, 7.79)	0.88

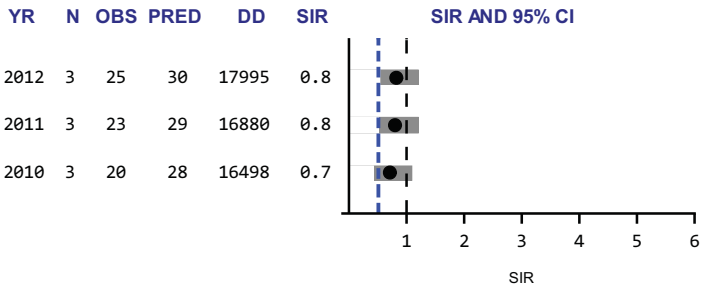
Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

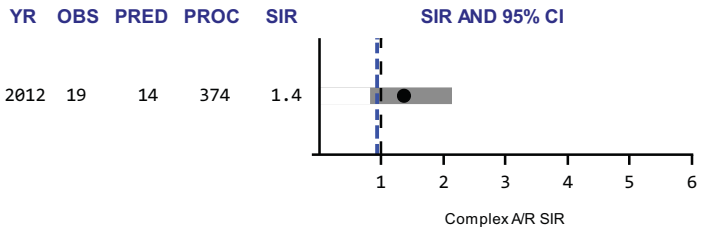


Catheter-Associated Urinary Tract Infections (CAUTI)

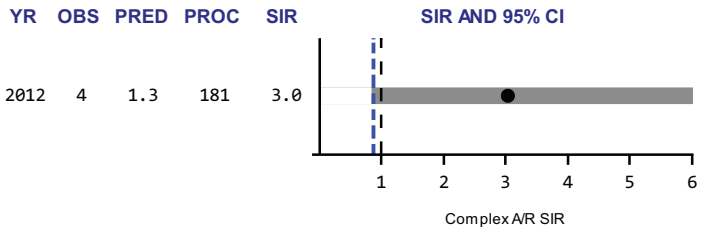
CAUTI - Adult/Pediatric ICU

Surgical Site Infections (SSI)

SSI - Colon Surgery



SSI - Abdominal Hysterectomy



Data reported as of September 27, 2013

YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)

PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1

Not significantly different from NHSN SIR of 1

Significantly higher than NHSN SIR of 1

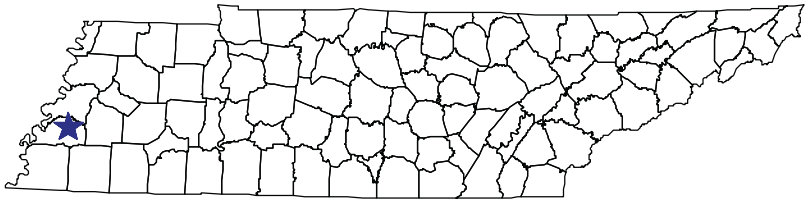
2012 TN SIR

NHSN SIR=1

Baptist Memorial Hospital-Tipton, Covington, Tipton County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	53	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	0	0.6	293	**N/A**	**N/A**	1.45
SSI	Colon surgery	0	0.0	1	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.1	16	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.1	53	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.6	293	N/A**

**Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.0	1	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.1	16	N/A**

**Number of predicted infections <1; no SIR calculated

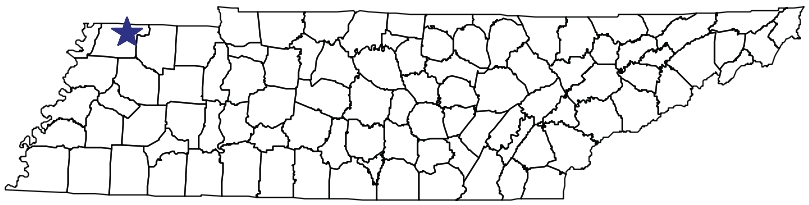
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Baptist Memorial Hospital- Union City, Union City, Obion County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.3	182	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	0	0.6	503	**N/A**	**N/A**	1.45
SSI	Colon surgery	0	0.4	11	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.3	35	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.3	182	N/A**
2011	1	0	0.4	238	N/A**
2010	1	0	0.3	211	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.6	503	N/A**

**Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.4	11	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.3	35	N/A**

**Number of predicted infections <1; no SIR calculated

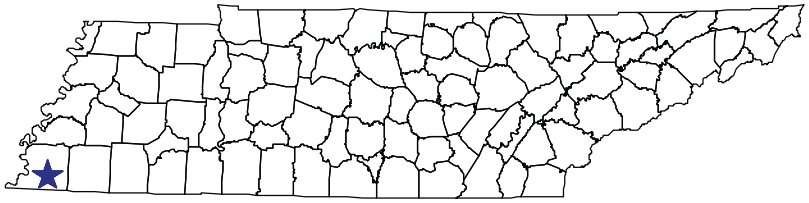
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Baptist Memorial Hospital for Women, Memphis, Shelby County

Medical School Affiliation: Graduate teaching

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.0	7	**N/A**	**N/A**	0.53
	Neonatal ICU	4	7.3	3,175	0.55	(0.15, 1.41)	0.54
CAUTI	Adult/Pediatric ICU	0	0.1	44	**N/A**	**N/A**	1.45
SSI	Colon surgery	0	0.0	0	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	1	2.6	360	0.39	(0.01, 2.15)	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
***Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

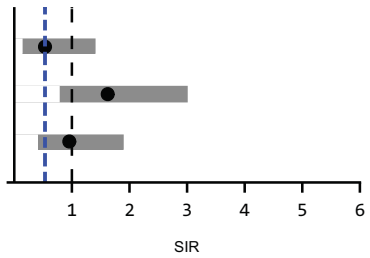
CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.0	7	N/A**
2011	1	0	0.0	12	N/A**
2010	1	0	0.0	11	N/A**

**Number of predicted infections <1; no SIR calculated

CLABSI - Neonatal ICU

YR	N	OBS	PRED	DD	SIR
2012	1	4	7.3	3175	0.6
2011	1	10	6.1	2941	1.6
2010	1	8	8.3	3502	1.0



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.1	44	N/A**

**Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

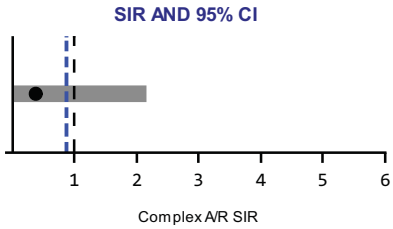
SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.0	0	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	1	2.6	360	0.4



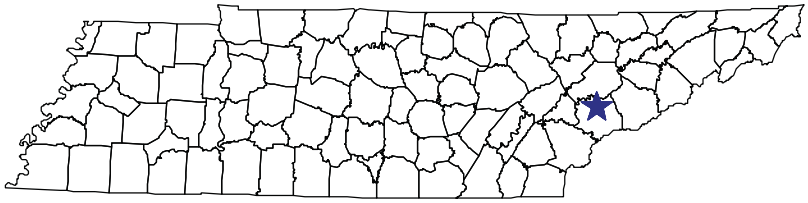
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Blount Memorial Hospital, Maryville, Blount County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	5.4	2,535	0.18	(0.00, 1.03)	0.53
CAUTI	Adult/Pediatric ICU	3	8.5	3,727	0.35	(0.07, 1.03)	1.45
SSI	Colon surgery	0	3.5	120	0.00	(0.00, 1.06)	0.94
	Abdominal hysterectomy	0	0.6	71	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

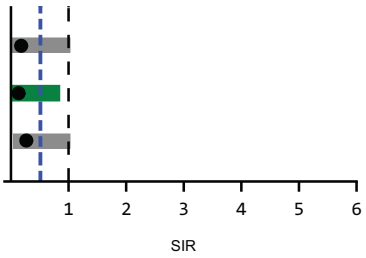
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

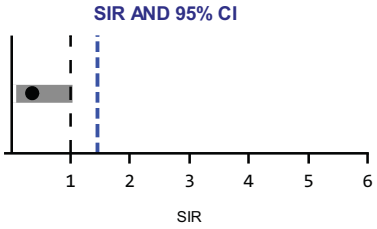
YR	N	OBS	PRED	DD	SIR
2012	3	1	5.4	2535	0.2
2011	3	1	6.5	3143	0.2
2010	4	2	7.1	3379	0.3



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

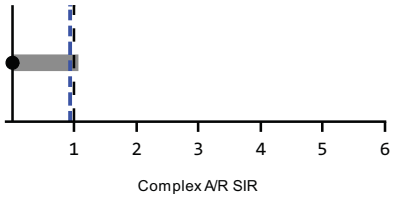
YR	N	OBS	PRED	DD	SIR
2012	3	3	8.5	3727	0.4



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	3.5	120	0.0



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.6	71	N/A**

**Number of predicted infections <1; no SIR calculated

Data reported as of September 27, 2013

YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)

PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1

Not significantly different from NHSN SIR of 1

Significantly higher than NHSN SIR of 1

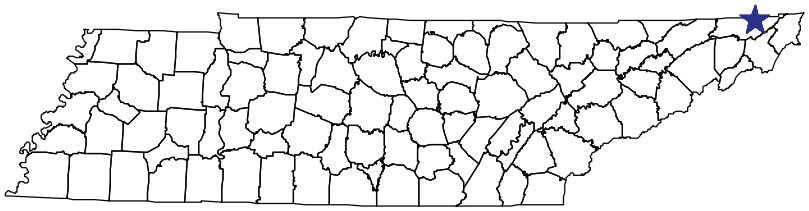
2012 TN SIR

NHSN SIR=1

Bristol Regional Medical Center, Bristol, Sullivan County

Medical School Affiliation: Major teaching

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	3	9.0	4,557	**0.33**	**(0.07, 0.97)**	0.53
CAUTI	Adult/Pediatric ICU	1	15.5	7,160	**0.06**	**(0.00, 0.36)**	1.45
SSI	Colon surgery	0	2.7	99	0.00	(0.00, 1.37)	0.94
	Abdominal hysterectomy	0	1.0	113	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

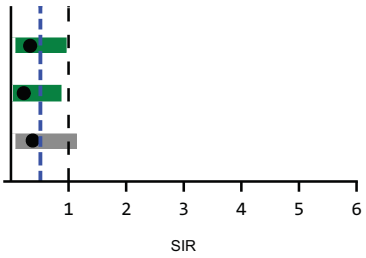
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

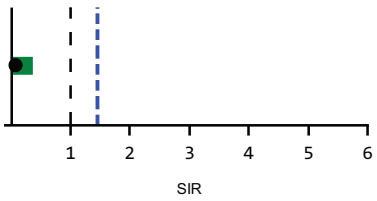
YR	N	OBS	PRED	DD	SIR
2012	2	3	9.0	4557	0.3
2011	2	2	8.3	4283	0.2
2010	2	3	7.6	3883	0.4



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

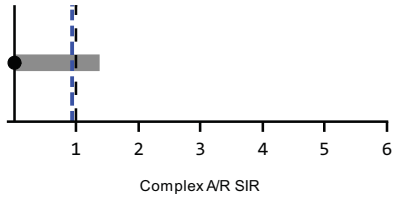
YR	N	OBS	PRED	DD	SIR
2012	2	1	16	7160	0.1



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	2.7	99	0.0



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	1.0	113	N/A**

**Number of predicted infections <1; no SIR calculated

Data reported as of September 27, 2013

YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)

PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1

Not significantly different from NHSN SIR of 1

Significantly higher than NHSN SIR of 1

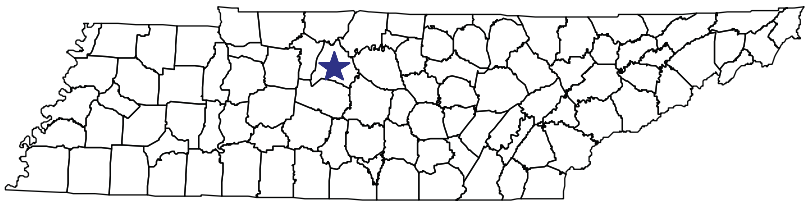
2012 TN SIR

NHSN SIR=1

Centennial Medical Center, Nashville, Davidson County

Medical School Affiliation: Major teaching

Bed Size Category: 400+ beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	8	18.1	9,301	**0.44**	**(0.19, 0.87)**	0.53
	Neonatal ICU	3	6.5	2,667	0.46	(0.10, 1.35)	0.54
CAUTI	Adult/Pediatric ICU	30	26.5	11,759	1.13	(0.76, 1.62)	1.45
SSI	Colon surgery	5	7.8	282	0.64	(0.21, 1.49)	0.94
	Abdominal hysterectomy	7	4.8	917	1.45	(0.58, 2.99)	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

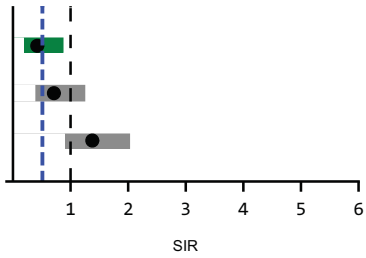
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

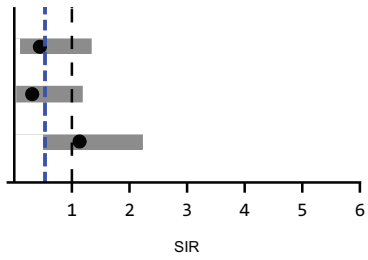
CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	5	8	18	9301	0.4
2011	3	13	18	9156	0.7
2010	3	26	19	9677	1.4



CLABSI - Neonatal ICU

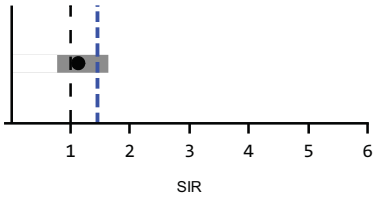
YR	N	OBS	PRED	DD	SIR
2012	1	3	6.5	2667	0.5
2011	1	2	6.1	2423	0.3
2010	1	8	7.1	2937	1.1



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

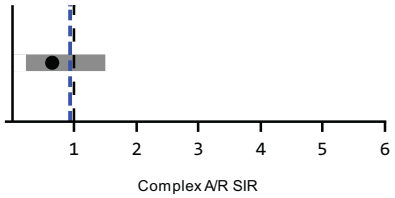
YR	N	OBS	PRED	DD	SIR
2012	5	30	27	11759	1.1



Surgical Site Infections (SSI)

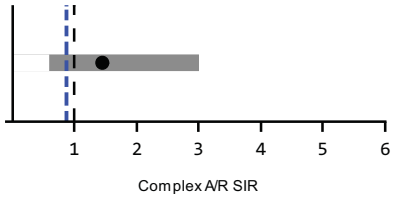
SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	5	7.8	282	0.6



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	7	4.8	917	1.5



Data reported as of September 27, 2013

YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)

PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1

Not significantly different from NHSN SIR of 1

Significantly higher than NHSN SIR of 1

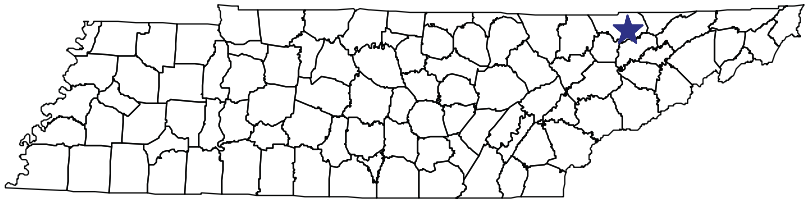
2012 TN SIR

NHSN SIR=1

Claiborne County Hospital, Tazewell, Claiborne County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: <50 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.2	164	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	1	0.7	565	**N/A**	**N/A**	1.45
SSI	Colon surgery	0	0.4	22	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.1	12	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.2	164	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	1	1	0.7	565	N/A**

**Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.4	22	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.1	12	N/A**

**Number of predicted infections <1; no SIR calculated

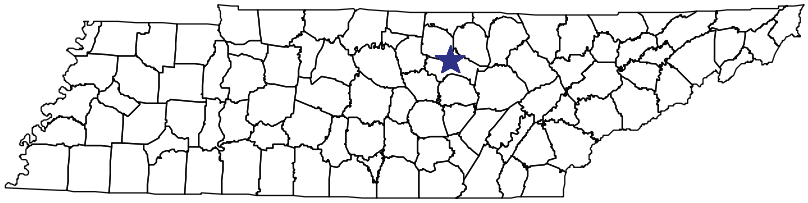
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Cookeville Regional Medical Center, Cookeville, Putnam County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	6	8.0	5,499	0.75	(0.28, 1.64)	0.53
CAUTI	Adult/Pediatric ICU	15	11.1	8,187	1.35	(0.75, 2.22)	1.45
SSI	Colon surgery	0	3.8	142	**0.00**	**(0.00, 0.97)**	0.94
	Abdominal hysterectomy	0	0.4	45	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

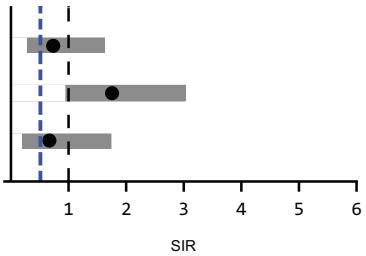
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

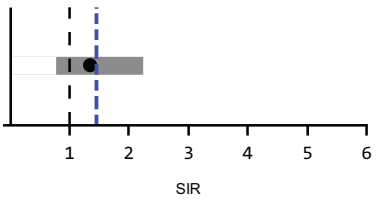
YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	2	6	8.0	5499	0.8	
2011	2	13	7.3	5079	1.8	
2010	2	4	5.9	4065	0.7	



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

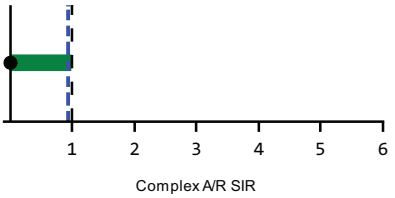
YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	2	15	11	8187	1.3	



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR	SIR AND 95% CI
2012	0	3.8	142	0.0	



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.4	45	N/A**

**Number of predicted infections <1; no SIR calculated

Data reported as of September 27, 2013

YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)

PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1

Not significantly different from NHSN SIR of 1

Significantly higher than NHSN SIR of 1

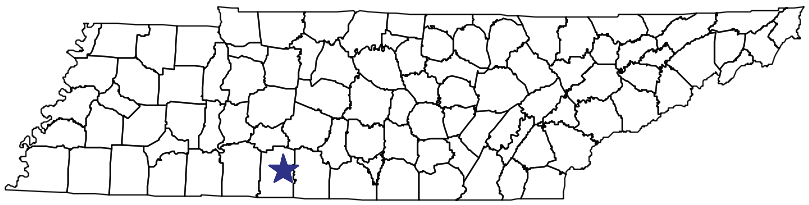
2012 TN SIR

NHSN SIR=1

Crockett Hospital, Lawrenceburg, Lawrence County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.2	160	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	0	0.8	612	**N/A**	**N/A**	1.45
SSI	Colon surgery	0	0.1	2	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.1	8	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.2	160	N/A**
2011	1	0	0.4	274	N/A**
2010	1	0	0.3	184	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.8	612	N/A**

**Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.1	2	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.1	8	N/A**

**Number of predicted infections <1; no SIR calculated

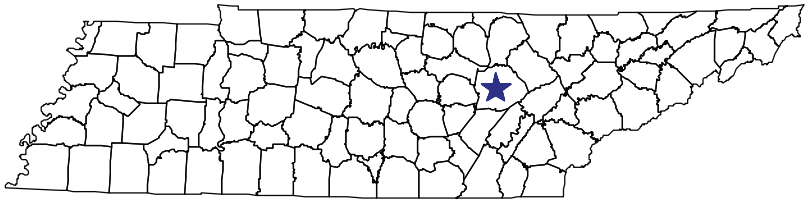
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Cumberland Medical Center, Crossville, Cumberland County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	4	1.3	866	3.09	(0.84, 7.91)	0.53
CAUTI	Adult/Pediatric ICU	1	2.5	1,975	0.39	(0.01, 2.19)	1.45
SSI	Colon surgery	0	1.7	71	0.00	(0.00, 2.16)	0.94
	Abdominal hysterectomy	0	0.1	13	**N/A**	**N/A**	0.88

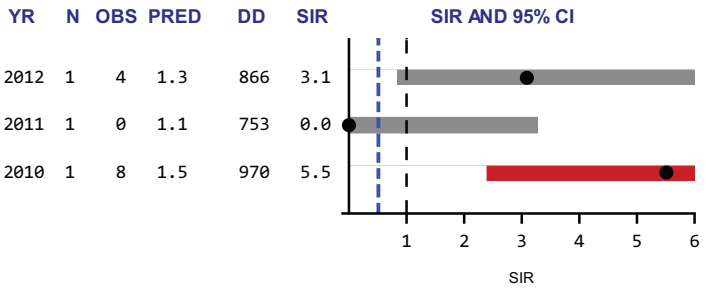
Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

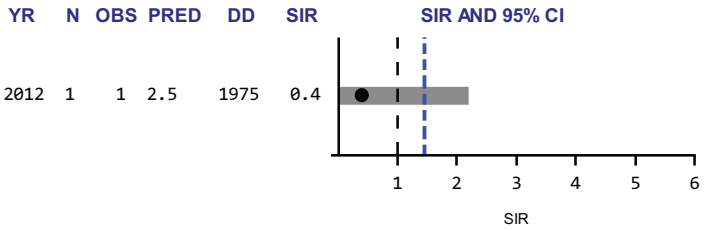
Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units



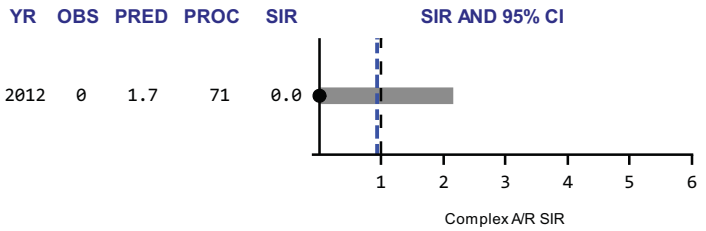
Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU



Surgical Site Infections (SSI)

SSI - Colon Surgery



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.1	13	N/A**

**Number of predicted infections <1; no SIR calculated

Data reported as of September 27, 2013

YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)

PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1

Not significantly different from NHSN SIR of 1

Significantly higher than NHSN SIR of 1

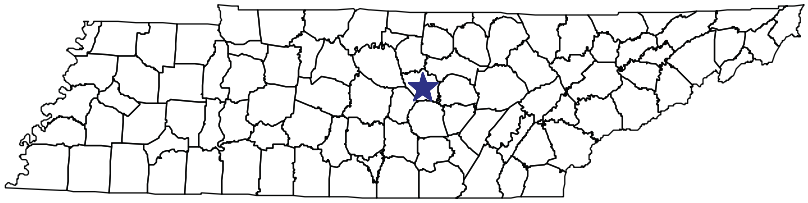
2012 TN SIR

NHSN SIR=1

DeKalb Community Hospital, Smithville, DeKalb County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	0.1	40	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	0	0.4	196	**N/A**	**N/A**	1.45
SSI	Colon surgery	0	0.0	0	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.1	5	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	1	0.1	40	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.4	196	N/A**

**Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.0	0	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.1	5	N/A**

**Number of predicted infections <1; no SIR calculated

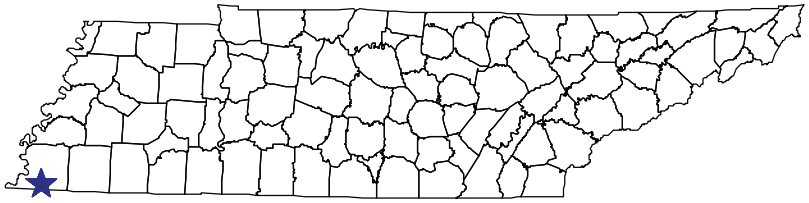
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Delta Medical Center, Memphis, Shelby County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

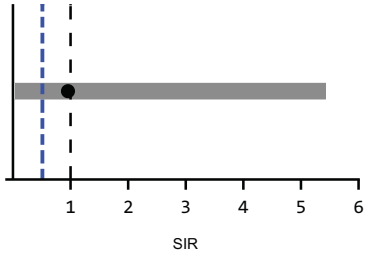
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.6	385	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	1	0.7	515	**N/A**	**N/A**	1.45
SSI	Colon surgery	0	0.2	7	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.2	21	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	1	0	0.6	385	N/A**	
2011	1	1	1.0	686	1.0	
2010	1	1	0.8	563	N/A**	



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	1	1	0.7	515	N/A**

**Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.2	7	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.2	21	N/A**

**Number of predicted infections <1; no SIR calculated

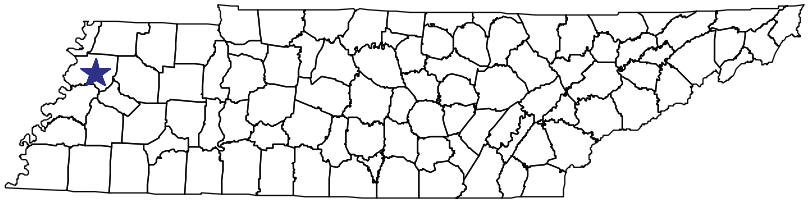
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Dyersburg Regional Medical Center, Dyersburg, Dyer County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.6	418	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	0	1.3	1,015	0.00	(0.00, 2.82)	1.45
SSI	Colon surgery	0	0.9	34	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.1	10	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

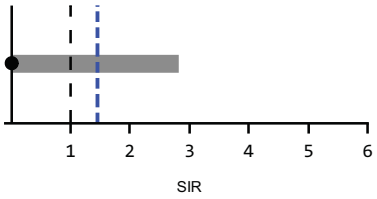
YR	N	OBS	PRED	DD	SIR
2012	1	0	0.6	418	N/A**
2011	1	0	0.9	632	N/A**
2010	1	0	0.9	583	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	1	0	1.3	1015	0.0	



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.9	34	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.1	10	N/A**

**Number of predicted infections <1; no SIR calculated

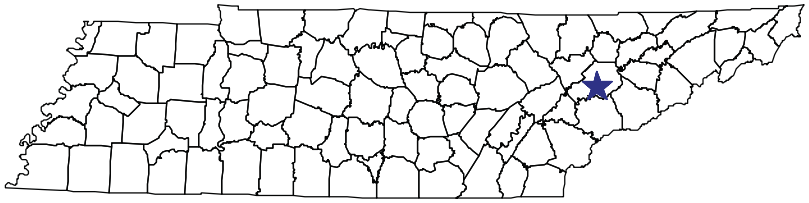
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

East Tennessee Children's Hospital, Knoxville, Knox County

Medical School Affiliation: Graduate teaching

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

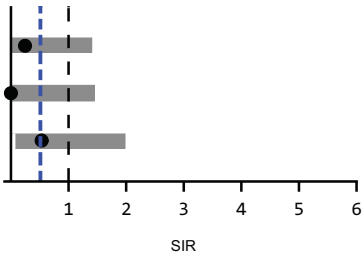
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	4.0	1,352	0.25	(0.01, 1.40)	0.53
	Neonatal ICU	1	6.6	4,018	**0.15**	**(0.00, 0.84)**	0.54
CAUTI	Adult/Pediatric ICU	1	1.9	681	0.53	(0.01, 2.94)	1.45
SSI	Colon surgery	0	0.9	25	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.0	0	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

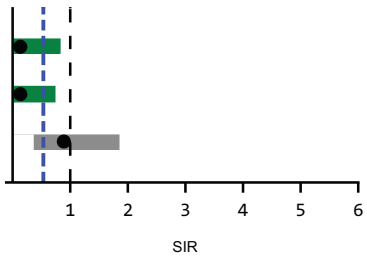
CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	1	4.0	1352	0.3
2011	1	0	2.6	869	0.0
2010	1	2	3.6	1239	0.5



CLABSI - Neonatal ICU

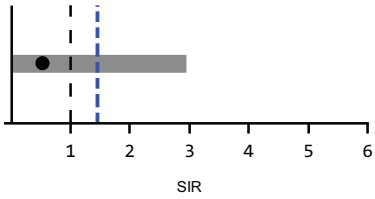
YR	N	OBS	PRED	DD	SIR
2012	1	1	6.6	4018	0.2
2011	1	1	7.5	3793	0.1
2010	1	7	7.8	3698	0.9



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	1	1	1.9	681	0.5



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.9	25	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.0	0	N/A**

**Number of predicted infections <1; no SIR calculated

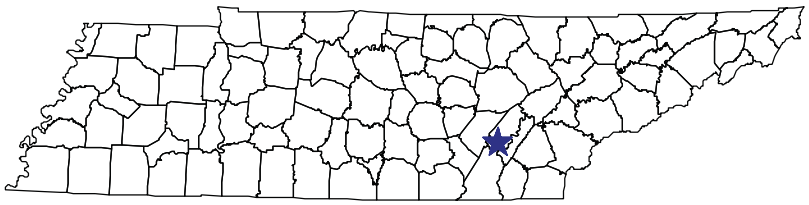
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Erlanger East, Chattanooga, Hamilton County

Medical School Affiliation: Major teaching

Bed Size Category: <50 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.0	0	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	1.8	229	0.00	(0.00, 2.07)	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

No units in this facility were subject to CLABSI/CAUTI Tennessee reporting requirements in 2012

Surgical Site Infections (SSI)

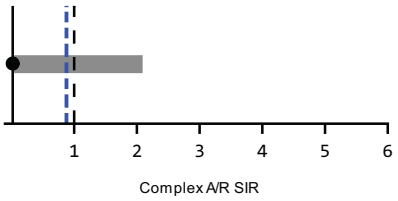
SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.0	0	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR	SIR AND 95% CI
2012	0	1.8	229	0.0	



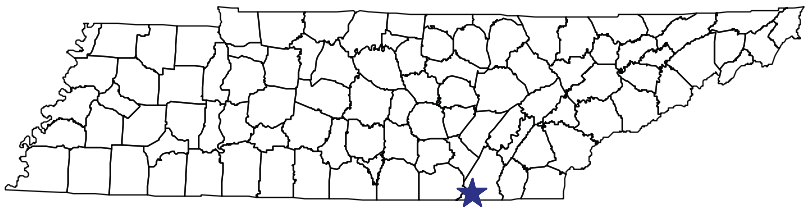
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Erlanger Medical Center, Chattanooga, Hamilton County

Medical School Affiliation: Major teaching

Bed Size Category: 400+ beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	21	19.9	9,116	1.06	(0.65, 1.62)	0.53
CAUTI	Adult/Pediatric ICU	109	45.0	16,459	**2.42**	**(1.99, 2.92)**	1.45
SSI	Colon surgery	2	5.5	156	0.37	(0.04, 1.32)	0.94
	Abdominal hysterectomy	1	1.8	238	0.56	(0.01, 3.14)	0.88

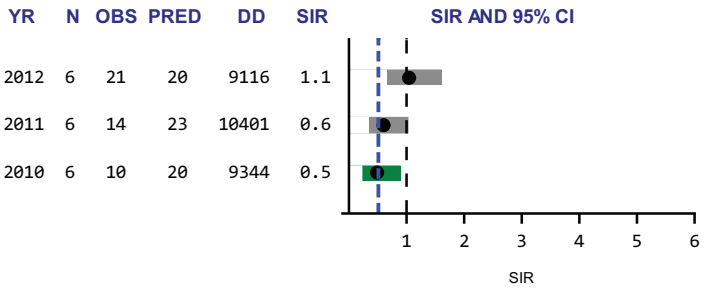
Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

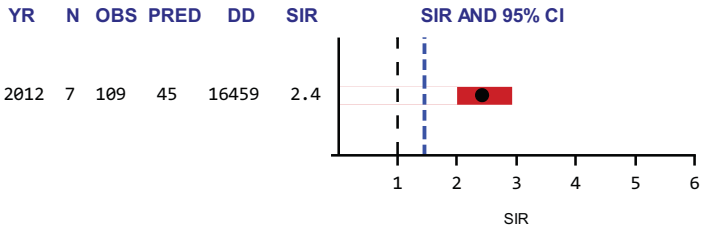
Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units



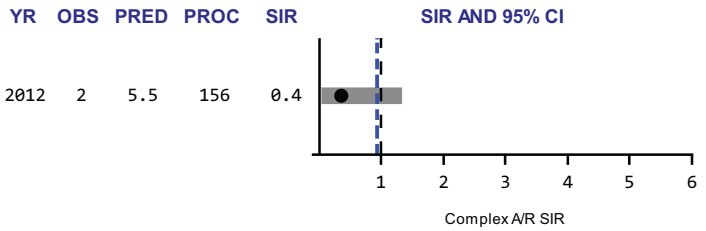
Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

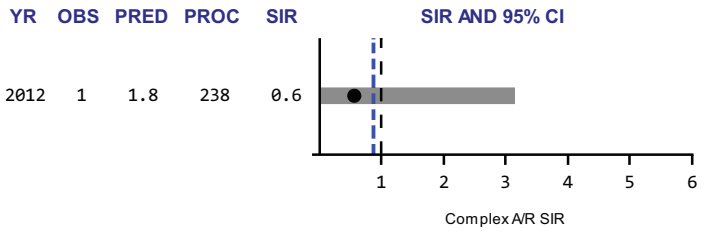


Surgical Site Infections (SSI)

SSI - Colon Surgery



SSI - Abdominal Hysterectomy



Data reported as of September 27, 2013

YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)

PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1

Not significantly different from NHSN SIR of 1

Significantly higher than NHSN SIR of 1

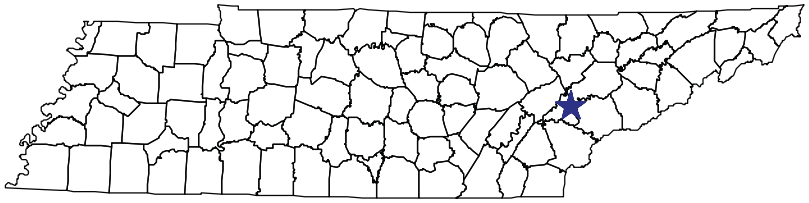
2012 TN SIR

NHSN SIR=1

Fort Loudoun Medical Center, Lenoir City, Loudon County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.3	162	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	0	0.8	404	**N/A**	**N/A**	1.45
SSI	Colon surgery	0	0.7	25	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.0	0	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.3	162	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.8	404	N/A**

**Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.7	25	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.0	0	N/A**

**Number of predicted infections <1; no SIR calculated

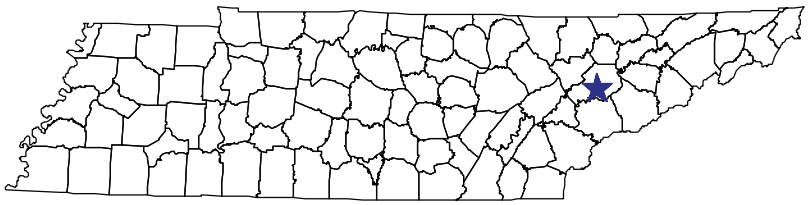
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Fort Sanders Regional Medical Center, Knoxville, Knox County

Medical School Affiliation: None

Bed Size Category: 400+ beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	14	8.9	4,603	1.57	(0.86, 2.64)	0.53
CAUTI	Adult/Pediatric ICU	36	16.7	6,009	**2.15**	**(1.51, 2.98)**	1.45
SSI	Colon surgery	8	7.9	240	1.01	(0.44, 1.99)	0.94
	Abdominal hysterectomy	2	1.9	296	1.06	(0.13, 3.82)	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

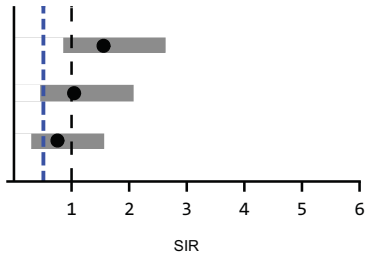
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

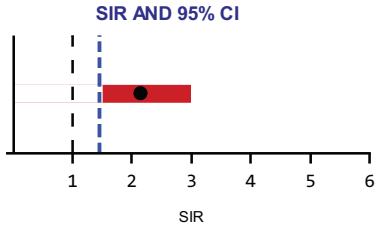
YR	N	OBS	PRED	DD	SIR
2012	3	14	8.9	4603	1.6
2011	3	8	7.6	3977	1.1
2010	3	7	9.2	4682	0.8



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

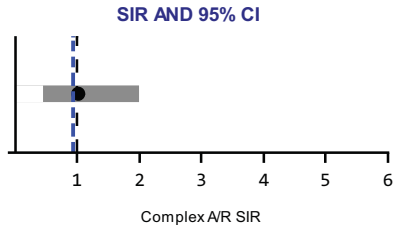
YR	N	OBS	PRED	DD	SIR
2012	3	36	17	6009	2.2



Surgical Site Infections (SSI)

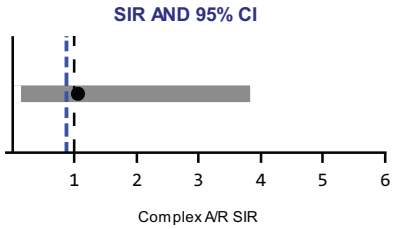
SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	8	7.9	240	1.0



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	2	1.9	296	1.1



Data reported as of September 27, 2013

YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)

PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1

Not significantly different from NHSN SIR of 1

Significantly higher than NHSN SIR of 1

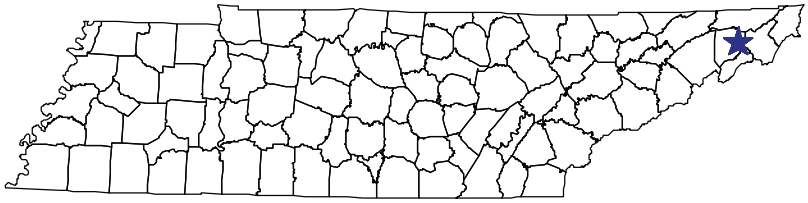
2012 TN SIR

NHSN SIR=1

Franklin Woods Community Hospital, Johnson City, Washington County

Medical School Affiliation: Graduate teaching

Bed Size Category: 50-99 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.9	498	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	0	1.4	717	0.00	(0.00, 2.55)	1.45
SSI	Colon surgery	0	1.2	47	0.00	(0.00, 3.03)	0.94
	Abdominal hysterectomy	0	0.1	9	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

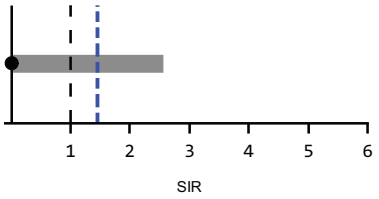
YR	N	OBS	PRED	DD	SIR
2012	1	0	0.9	498	N/A**
2011	1	1	0.8	415	N/A**
2010	1	0	0.7	378	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

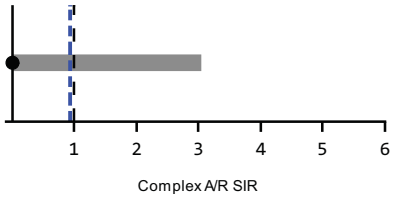
YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	1	0	1.4	717	0.0	



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR	SIR AND 95% CI
2012	0	1.2	47	0.0	



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.1	9	N/A**

**Number of predicted infections <1; no SIR calculated

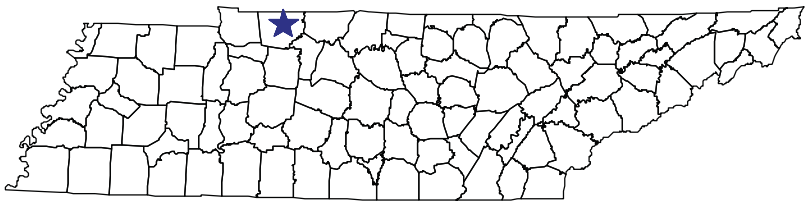
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Gateway Medical Center, Clarksville, Montgomery County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

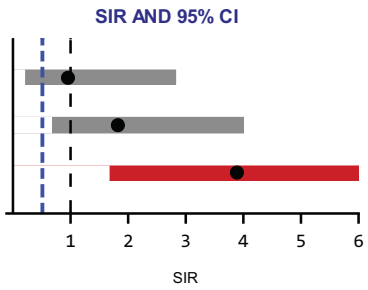
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	3	3.1	2,111	0.97	(0.20, 2.83)	0.53
	Neonatal ICU	0	0.1	52	**N/A**	**N/A**	0.54
CAUTI	Adult/Pediatric ICU	8	4.0	3,209	2.01	(0.87, 3.95)	1.45
SSI	Colon surgery	1	1.8	58	0.54	(0.01, 3.03)	0.94
	Abdominal hysterectomy	1	1.0	157	0.95	(0.02, 5.32)	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	3	3.1	2111	1.0
2011	1	6	3.3	2227	1.8
2010	1	8	2.1	1400	3.9



CLABSI - Neonatal ICU

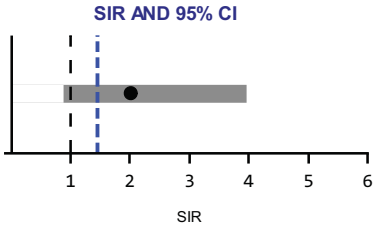
YR	N	OBS	PRED	DD	SIR
2012	1	0	0.1	52	N/A**
2011	1	0	0.0	19	N/A**
2010	1	0	0.1	86	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

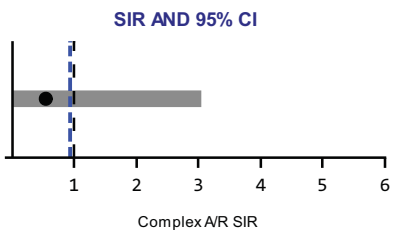
YR	N	OBS	PRED	DD	SIR
2012	1	8	4.0	3209	2.0



Surgical Site Infections (SSI)

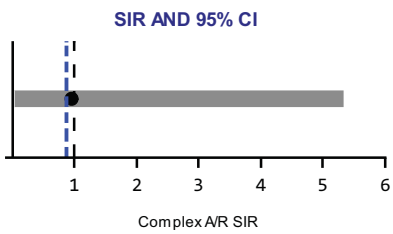
SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	1	1.8	58	0.5



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	1	1.0	157	1.0



Data reported as of September 27, 2013

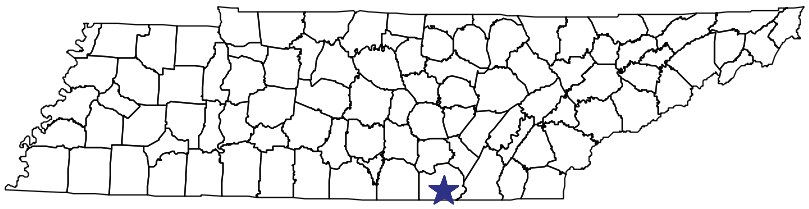
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Grandview Medical Center, Jasper, Marion County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.2	153	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	1	0.4	319	**N/A**	**N/A**	1.45
SSI	Colon surgery	0	0.5	13	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.0	1	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.2	153	N/A**
2011	1	1	0.2	136	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	1	1	0.4	319	N/A**

**Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.5	13	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.0	1	N/A**

**Number of predicted infections <1; no SIR calculated

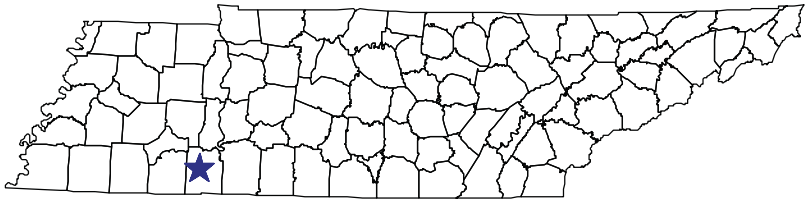
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Hardin Medical Center, Savannah, Hardin County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.1	6	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.1	21	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
***Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

No units in this facility were subject to CLABSI/CAUTI Tennessee reporting requirements in 2012

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.1	6	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.1	21	N/A**

**Number of predicted infections <1; no SIR calculated

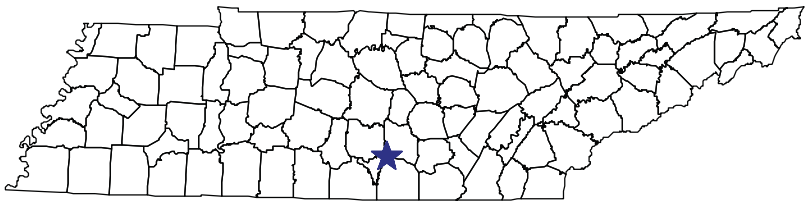
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Harton Regional Medical Center, Tullahoma, Coffee County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.9	574	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	0	1.9	1,452	0.00	(0.00, 1.97)	1.45
SSI	Colon surgery	1	1.0	42	0.96	(0.02, 5.35)	0.94
	Abdominal hysterectomy	0	0.6	64	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

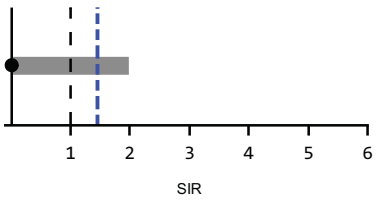
YR	N	OBS	PRED	DD	SIR
2012	1	0	0.9	574	N/A**
2011	1	0	0.8	553	N/A**
2010	1	0	0.8	566	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

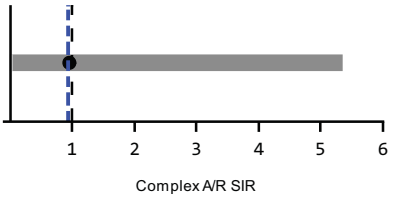
YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	1	0	1.9	1452	0.0	



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR	SIR AND 95% CI
2012	1	1.0	42	1.0	



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.6	64	N/A**

**Number of predicted infections <1; no SIR calculated

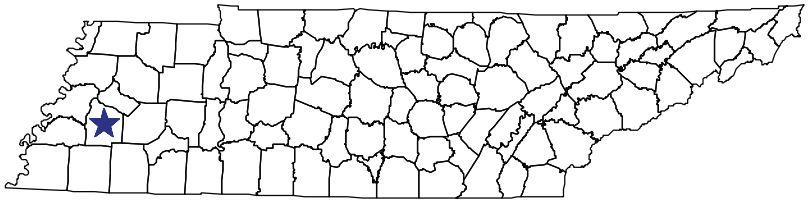
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Haywood Park Community Hospital, Brownsville, Haywood County

Medical School Affiliation: None

Bed Size Category: <50 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.0	0	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.0	0	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

No units in this facility were subject to CLABSI/CAUTI Tennessee reporting requirements in 2012

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.0	0	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.0	0	N/A**

**Number of predicted infections <1; no SIR calculated

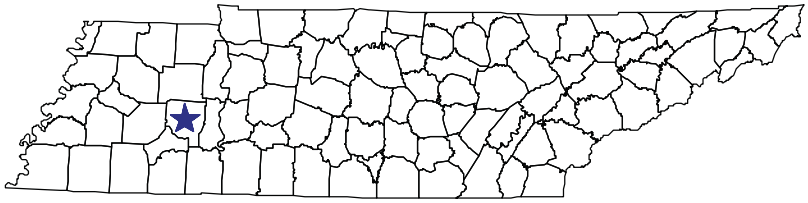
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Henderson County Community Hospital, Lexington, Henderson County

Medical School Affiliation: None

Bed Size Category: <50 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.1	3	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.0	2	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
***Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

No units in this facility were subject to CLABSI/CAUTI Tennessee reporting requirements in 2012

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.1	3	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.0	2	N/A**

**Number of predicted infections <1; no SIR calculated

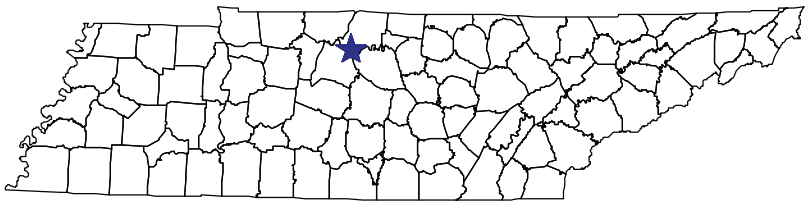
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Hendersonville Medical Center, Hendersonville, Sumner County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



Standardized Infection Ratio by Infection Type, 2012

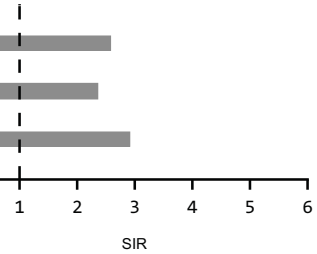
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	1.4	968	0.00	(0.00, 2.59)	0.53
CAUTI	Adult/Pediatric ICU	1	2.4	1,920	0.42	(0.01, 2.32)	1.45
SSI	Colon surgery	0	0.9	37	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.3	44	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

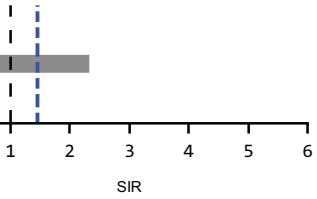
YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	2	0	1.4	968	0.0	
2011	1	0	1.6	1047	0.0	
2010	1	0	1.3	845	0.0	



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	2	1	2.4	1920	0.4	



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.9	37	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.3	44	N/A**

**Number of predicted infections <1; no SIR calculated

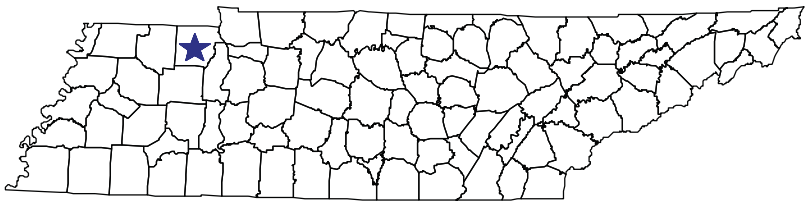
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Henry County Medical Center, Paris, Henry County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	0.4	300	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	3	1.3	988	2.36	(0.49, 6.88)	1.45
SSI	Colon surgery	0	0.7	29	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.3	39	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

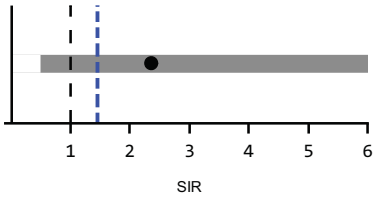
YR	N	OBS	PRED	DD	SIR
2012	1	1	0.4	300	N/A**
2011	1	0	0.3	183	N/A**
2010	1	0	0.4	254	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	1	3	1.3	988	2.4	



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.7	29	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.3	39	N/A**

**Number of predicted infections <1; no SIR calculated

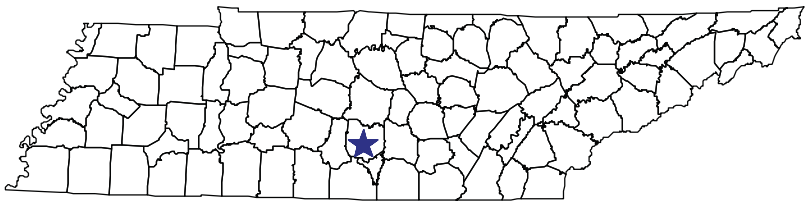
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Heritage Medical Center, Shelbyville, Bedford County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	0.9	576	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	1	1.6	1,215	0.64	(0.02, 3.56)	1.45
SSI	Colon surgery	0	0.3	10	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.1	11	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

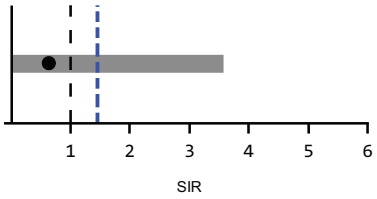
YR	N	OBS	PRED	DD	SIR
2012	1	1	0.9	576	N/A**
2011	1	0	0.8	548	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	1	1	1.6	1215	0.6	



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.3	10	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.1	11	N/A**

**Number of predicted infections <1; no SIR calculated

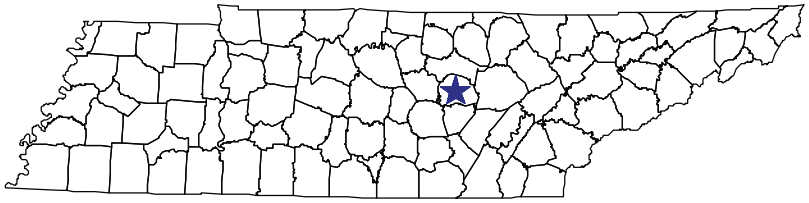
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Highlands Medical Center, Sparta, White County

Medical School Affiliation: None

Bed Size Category: <50 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	76	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	0	0.4	303	**N/A**	**N/A**	1.45
SSI	Colon surgery	0	0.3	12	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	2	0.6	77	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.1	76	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.4	303	N/A**

**Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.3	12	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	2	0.6	77	N/A**

**Number of predicted infections <1; no SIR calculated

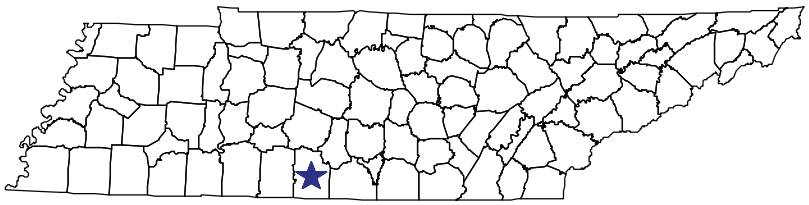
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Hillside Hospital, Pulaski, Giles County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.3	175	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	0	0.8	398	**N/A**	**N/A**	1.45
SSI	Colon surgery	0	0.2	7	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.0	0	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.3	175	N/A**
2011	1	0	0.3	168	N/A**
2010	2	0	0.3	148	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.8	398	N/A**

**Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.2	7	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.0	0	N/A**

**Number of predicted infections <1; no SIR calculated

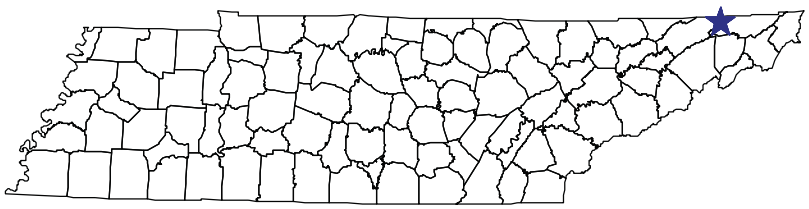
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Holston Valley Medical Center, Kingsport, Sullivan County

Medical School Affiliation: Major teaching

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

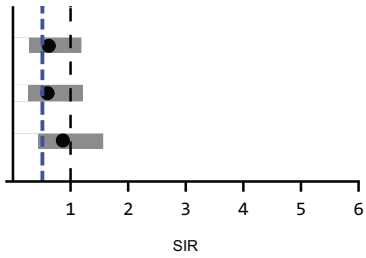
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	9	14.3	6,281	0.63	(0.29, 1.19)	0.53
	Neonatal ICU	0	2.1	1,178	0.00	(0.00, 1.77)	0.54
CAUTI	Adult/Pediatric ICU	39	22.5	9,383	**1.73**	**(1.23, 2.37)**	1.45
SSI	Colon surgery	8	5.8	195	1.39	(0.60, 2.74)	0.94
	Abdominal hysterectomy	2	1.3	179	1.55	(0.19, 5.60)	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

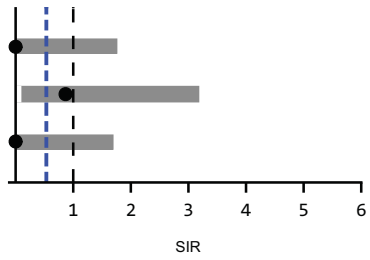
CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	5	9	14	6281	0.6
2011	5	8	13	5817	0.6
2010	5	11	13	5879	0.9



CLABSI - Neonatal ICU

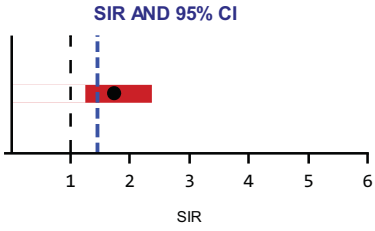
YR	N	OBS	PRED	DD	SIR
2012	1	0	2.1	1178	0.0
2011	1	2	2.3	1167	0.9
2010	1	0	2.2	1156	0.0



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

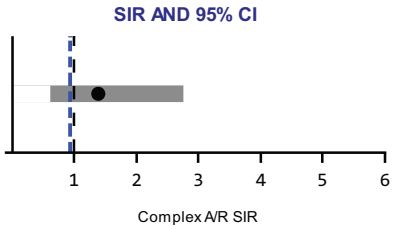
YR	N	OBS	PRED	DD	SIR
2012	6	39	23	9383	1.7



Surgical Site Infections (SSI)

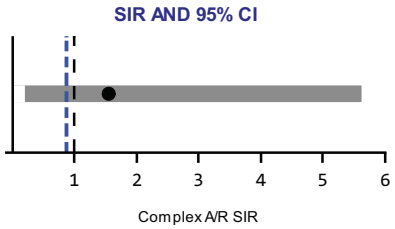
SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	8	5.8	195	1.4



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	2	1.3	179	1.6



Data reported as of September 27, 2013

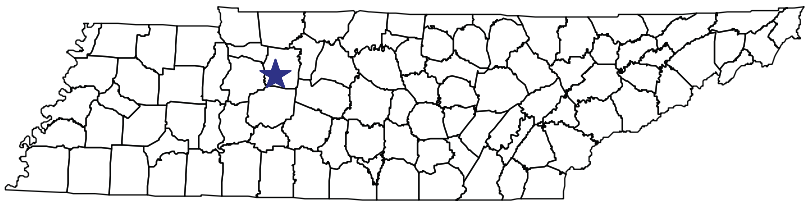
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Horizon Medical Center, Dickson, Dickson County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.9	573	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	2	1.7	1,333	1.16	(0.14, 4.20)	1.45
SSI	Colon surgery	2	1.0	35	1.97	(0.24, 7.13)	0.94
	Abdominal hysterectomy	0	0.0	5	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

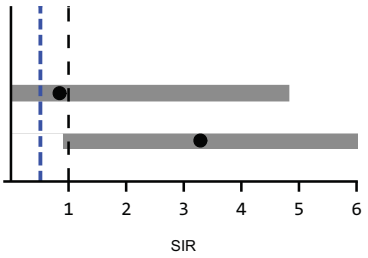
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

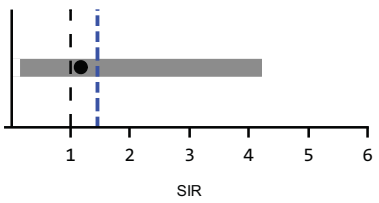
YR	N	OBS	PRED	DD	SIR
2012	1	0	0.9	573	N/A**
2011	1	1	1.2	773	0.9
2010	1	4	1.2	811	3.3



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

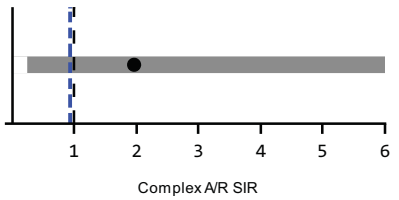
YR	N	OBS	PRED	DD	SIR
2012	1	2	1.7	1333	1.2



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	2	1.0	35	2.0



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.0	5	N/A**

**Number of predicted infections <1; no SIR calculated

Data reported as of September 27, 2013

YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)

PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1

Not significantly different from NHSN SIR of 1

Significantly higher than NHSN SIR of 1

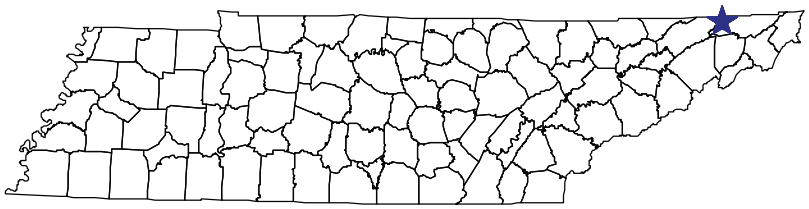
2012 TN SIR

NHSN SIR=1

Indian Path Medical Center, Kingsport, Sullivan County

Medical School Affiliation: Graduate teaching

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	2.2	1,521	0.00	(0.00, 1.65)	0.53
CAUTI	Adult/Pediatric ICU	1	2.6	2,100	0.38	(0.01, 2.14)	1.45
SSI	Colon surgery	1	1.9	62	0.53	(0.01, 2.94)	0.94
	Abdominal hysterectomy	0	0.8	102	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

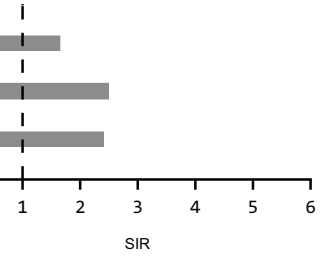
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

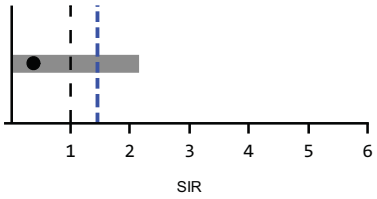
YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	1	0	2.2	1521	0.0	
2011	1	1	2.2	1527	0.4	
2010	1	0	1.5	1048	0.0	



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

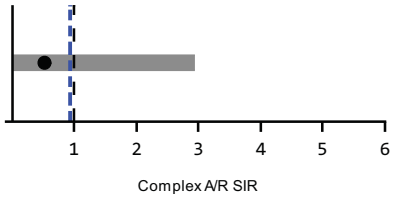
YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	1	1	2.6	2100	0.4	



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR	SIR AND 95% CI
2012	1	1.9	62	0.5	



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.8	102	N/A**

**Number of predicted infections <1; no SIR calculated

Data reported as of September 27, 2013

YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)

PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1

Not significantly different from NHSN SIR of 1

Significantly higher than NHSN SIR of 1

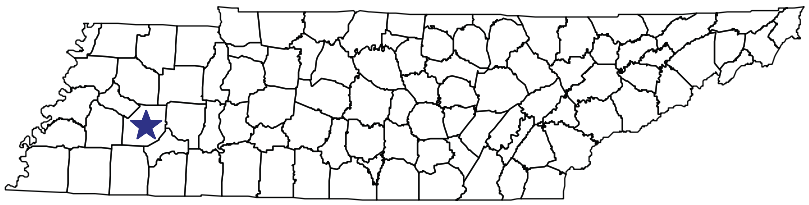
2012 TN SIR

NHSN SIR=1

Jackson Madison County General Hosp., Jackson, Madison County

Medical School Affiliation: None

Bed Size Category: 400+ beds



Standardized Infection Ratio by Infection Type, 2012

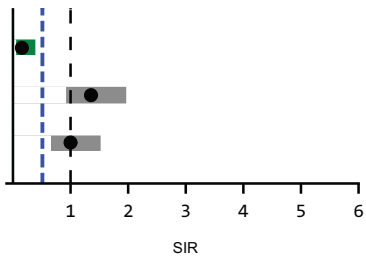
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	5	29.8	10,261	**0.17**	**(0.05, 0.39)**	0.53
	Neonatal ICU	1	1.1	411	0.94	(0.02, 5.26)	0.54
CAUTI	Adult/Pediatric ICU	42	33.0	14,012	1.27	(0.92, 1.72)	1.45
SSI	Colon surgery	0	8.3	253	**0.00**	**(0.00, 0.44)**	0.94
	Abdominal hysterectomy	4	2.4	396	1.64	(0.45, 4.19)	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

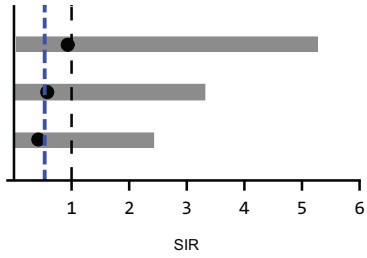
CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	6	5	30	10261	0.2
2011	6	29	21	10640	1.4
2010	6	23	23	11207	1.0



CLABSI - Neonatal ICU

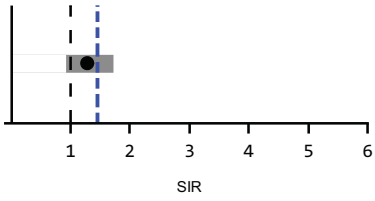
YR	N	OBS	PRED	DD	SIR
2012	1	1	1.1	411	0.9
2011	1	1	1.7	588	0.6
2010	1	1	2.3	828	0.4



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

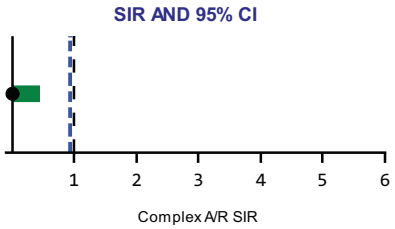
YR	N	OBS	PRED	DD	SIR
2012	6	42	33	14012	1.3



Surgical Site Infections (SSI)

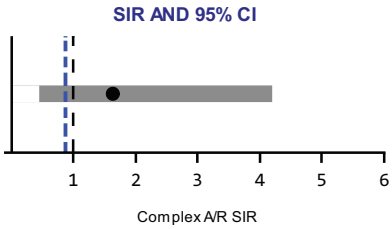
SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	8.3	253	0.0



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	4	2.4	396	1.6



Data reported as of September 27, 2013

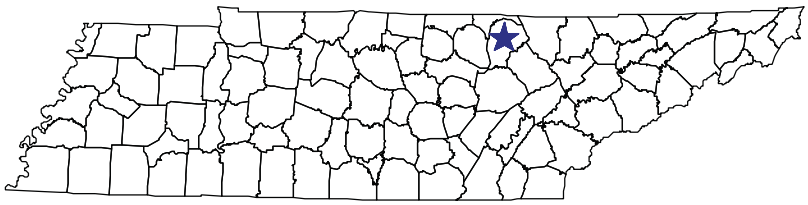
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Jamestown Regional Medical Center, Jamestown, Fentress County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 50-99 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.0	0	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.0	3	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

No units in this facility were subject to CLABSI/CAUTI Tennessee reporting requirements in 2012

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.0	0	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.0	3	N/A**

**Number of predicted infections <1; no SIR calculated

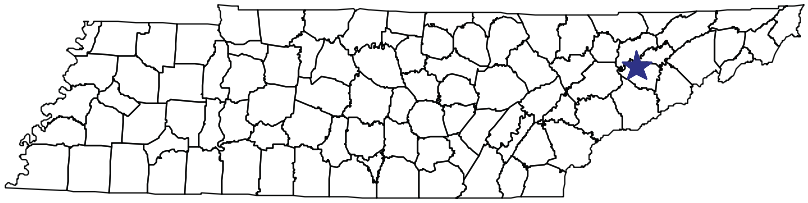
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Jefferson Memorial Hospital, Jefferson City, Jefferson County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	89	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	1	1.0	743	**N/A**	**N/A**	1.45
SSI	Colon surgery	2	0.6	24	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.0	1	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.1	89	N/A**
2011	1	0	0.2	126	N/A**
2010	1	0	0.2	104	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	1	1	1.0	743	N/A**

**Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	2	0.6	24	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.0	1	N/A**

**Number of predicted infections <1; no SIR calculated

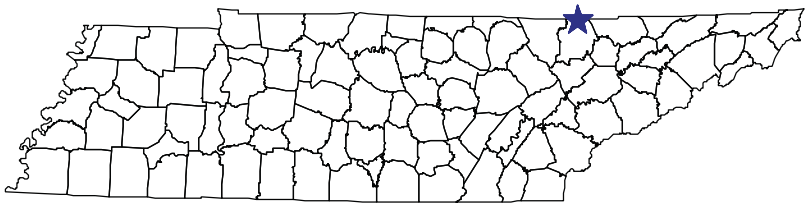
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Jellico Community Hospital, Jellico, Campbell County

Medical School Affiliation: None

Bed Size Category: <50 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.2	139	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	1	0.6	496	**N/A**	**N/A**	1.45
SSI	Colon surgery	1	0.3	11	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.1	6	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.2	139	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	1	1	0.6	496	N/A**

**Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	1	0.3	11	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.1	6	N/A**

**Number of predicted infections <1; no SIR calculated

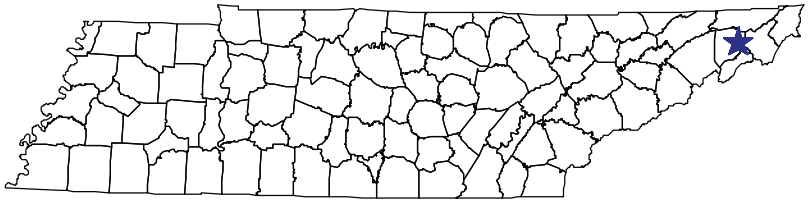
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Johnson City Medical Center, Johnson City, Washington County

Medical School Affiliation: Graduate teaching

Bed Size Category: 400+ beds



Standardized Infection Ratio by Infection Type, 2012

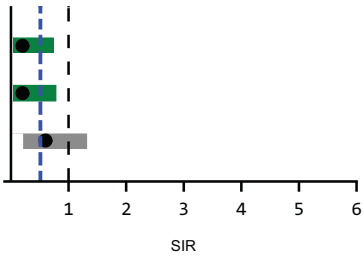
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	2	9.8	6,069	**0.20**	**(0.02, 0.74)**	0.53
	Neonatal ICU	3	4.5	2,106	0.66	(0.14, 1.94)	0.54
CAUTI	Adult/Pediatric ICU	7	18.0	9,527	**0.39**	**(0.16, 0.80)**	1.45
SSI	Colon surgery	0	6.0	173	**0.00**	**(0.00, 0.62)**	0.94
	Abdominal hysterectomy	0	0.7	76	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

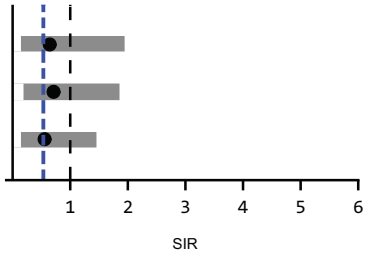
CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	3	2	9.8	6069	0.2
2011	3	2	9.1	5840	0.2
2010	3	6	9.9	6221	0.6



CLABSI - Neonatal ICU

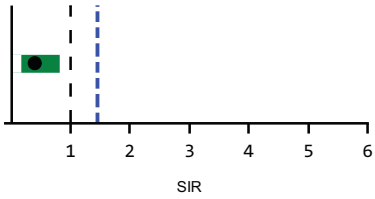
YR	N	OBS	PRED	DD	SIR
2012	1	3	4.5	2106	0.7
2011	1	4	5.5	2478	0.7
2010	1	4	7.0	3057	0.6



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

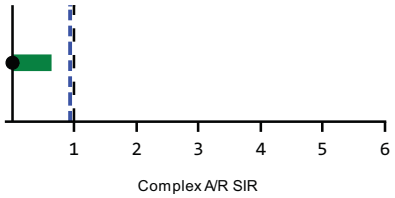
YR	N	OBS	PRED	DD	SIR
2012	4	7	18	9527	0.4



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	6.0	173	0.0



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.7	76	N/A**

**Number of predicted infections <1; no SIR calculated

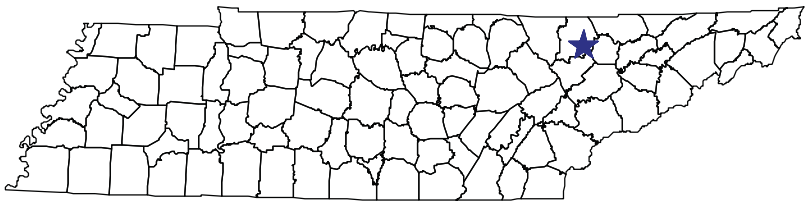
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Lafollette Medical Center, Lafollette, Campbell County

Medical School Affiliation: None

Bed Size Category: <50 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.2	137	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	2	1.1	854	1.82	(0.22, 6.56)	1.45
SSI	Colon surgery	0	0.0	0	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.0	1	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

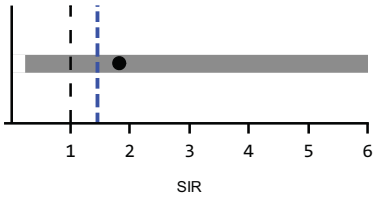
YR	N	OBS	PRED	DD	SIR
2012	1	0	0.2	137	N/A**
2011	1	0	0.1	83	N/A**
2010	1	0	0.2	140	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	1	2	1.1	854	1.8	



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.0	0	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.0	1	N/A**

**Number of predicted infections <1; no SIR calculated

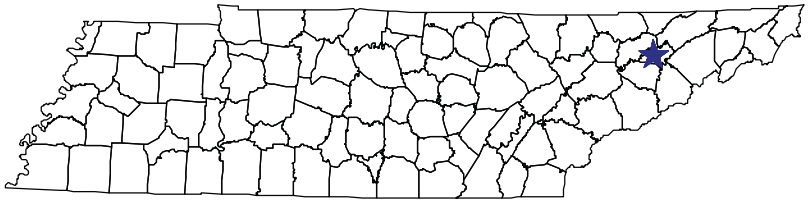
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Lakeway Regional Hospital, Morristown, Hamblen County

Medical School Affiliation: Graduate teaching

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	0.4	234	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	1	1.4	1,066	0.73	(0.02, 4.05)	1.45
SSI	Colon surgery	0	0.5	18	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.1	10	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

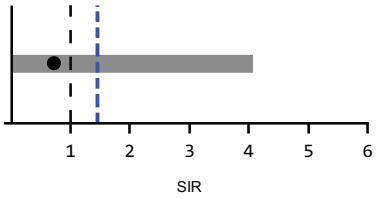
YR	N	OBS	PRED	DD	SIR
2012	1	1	0.4	234	N/A**
2011	1	2	0.2	166	N/A**
2010	1	0	0.2	166	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	1	1	1.4	1066	0.7	



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.5	18	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.1	10	N/A**

**Number of predicted infections <1; no SIR calculated

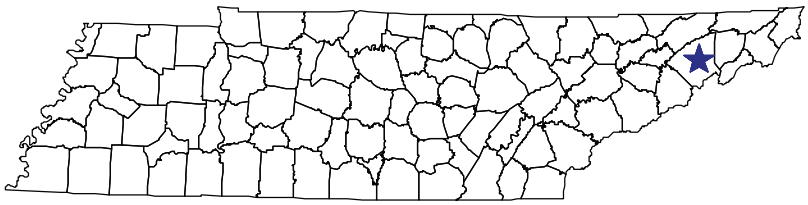
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Laughlin Memorial Hospital, Greeneville, Greene County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.5	365	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	0	1.7	1,289	0.00	(0.00, 2.22)	1.45
SSI	Colon surgery	0	1.0	36	0.00	(0.00, 3.54)	0.94
	Abdominal hysterectomy	0	0.1	8	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

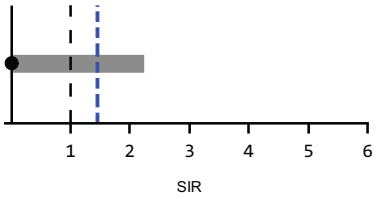
YR	N	OBS	PRED	DD	SIR
2012	1	0	0.5	365	N/A**
2011	1	0	0.4	266	N/A**
2010	1	1	0.8	529	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

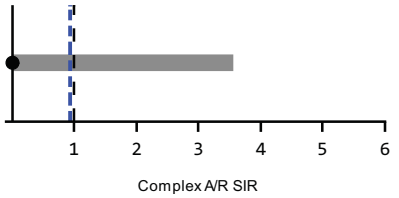
YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	1	0	1.7	1289	0.0	



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR	SIR AND 95% CI
2012	0	1.0	36	0.0	



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.1	8	N/A**

**Number of predicted infections <1; no SIR calculated

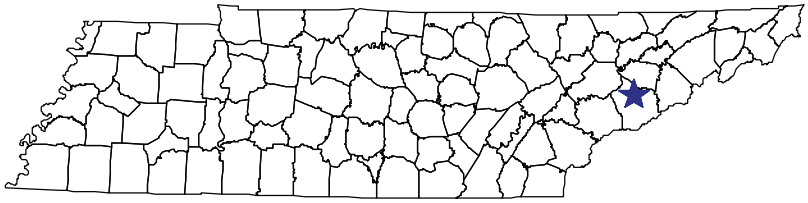
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

LeConte Medical Center, Sevierville, Sevier County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 50-99 beds



Standardized Infection Ratio by Infection Type, 2012

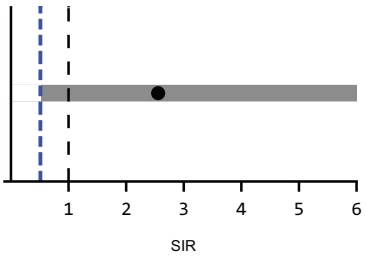
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	1.0	637	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	2	2.0	1,588	0.98	(0.12, 3.53)	1.45
SSI	Colon surgery	0	1.0	38	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	1	0.6	60	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

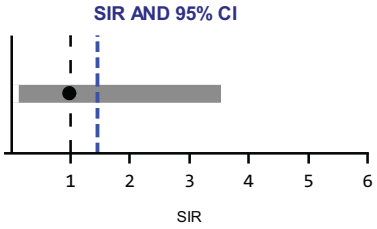
YR	N	OBS	PRED	DD	SIR
2012	1	1	1.0	637	N/A**
2011	1	3	1.2	782	2.6
2010	1	0	0.2	154	N/A**



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	1	2	2.0	1588	1.0



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	1.0	38	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	1	0.6	60	N/A**

**Number of predicted infections <1; no SIR calculated

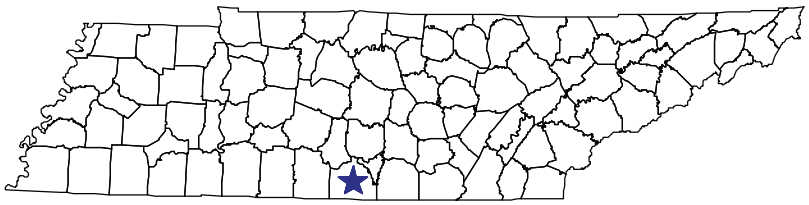
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Lincoln Medical Center, Fayetteville, Lincoln County

Medical School Affiliation: None

Bed Size Category: <50 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.2	141	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	1	0.8	622	**N/A**	**N/A**	1.45
SSI	Colon surgery	0	0.3	10	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	1	0.0	8	**N/A**	**N/A**	0.88

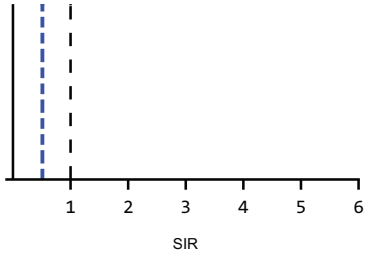
Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.2	141	N/A**
2011	1	0	0.1	47	N/A**

SIR AND 95% CI



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	1	1	0.8	622	N/A**

**Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.3	10	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	1	0.0	8	N/A**

**Number of predicted infections <1; no SIR calculated

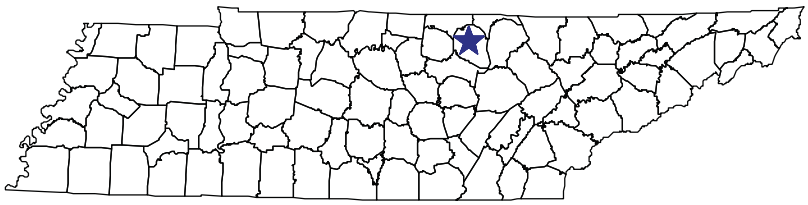
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Livingston Regional Hospital, Livingston, Overton County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.2	138	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	0	0.7	554	**N/A**	**N/A**	1.45
SSI	Colon surgery	0	0.1	3	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.0	6	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.2	138	N/A**
2011	1	0	0.2	120	N/A**
2010	1	1	0.3	185	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.7	554	N/A**

**Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.1	3	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.0	6	N/A**

**Number of predicted infections <1; no SIR calculated

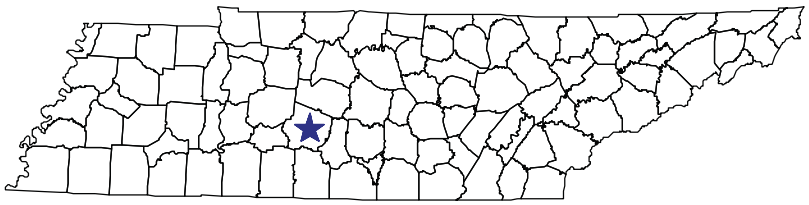
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Maury Regional Medical Center, Columbia, Maury County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

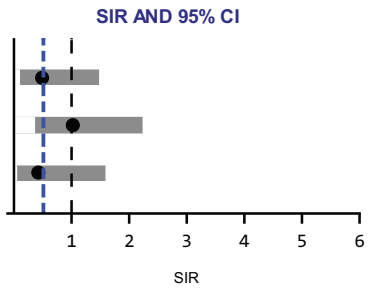
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	3	5.9	4,037	0.51	(0.10, 1.48)	0.53
	Neonatal ICU	0	0.1	82	**N/A**	**N/A**	0.54
CAUTI	Adult/Pediatric ICU	8	3.3	2,636	**2.44**	**(1.05, 4.81)**	1.45
SSI	Colon surgery	7	5.2	163	1.34	(0.54, 2.77)	0.94
	Abdominal hysterectomy	0	1.0	129	0.00	(0.00, 3.64)	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	3	5.9	4037	0.5
2011	2	6	5.9	3992	1.0
2010	3	2	4.5	3093	0.4



CLABSI - Neonatal ICU

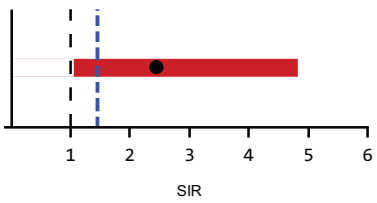
YR	N	OBS	PRED	DD	SIR
2012	1	0	0.1	82	N/A**
2011	1	0	0.1	51	N/A**
2010	1	0	0.1	78	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

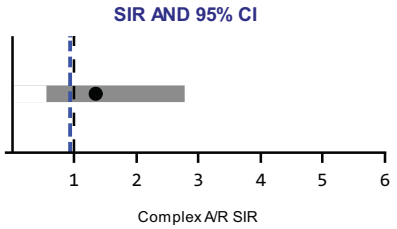
YR	N	OBS	PRED	DD	SIR
2012	1	8	3.3	2636	2.4



Surgical Site Infections (SSI)

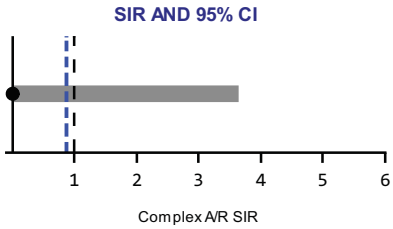
SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	7	5.2	163	1.3



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	1.0	129	0.0



Data reported as of September 27, 2013

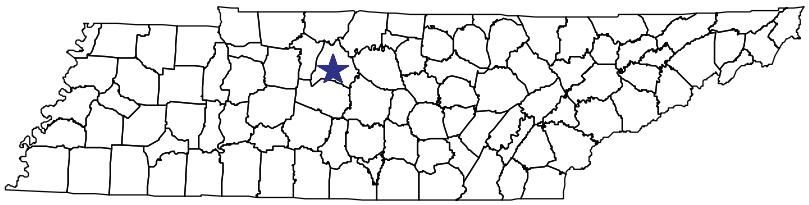
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

MCJ Children's Hospital at Vanderbilt, Nashville, Davidson County

Medical School Affiliation: Major teaching

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	3	21.5	6,939	**0.14**	**(0.03, 0.41)**	0.53
	Neonatal ICU	11	27.2	12,684	**0.40**	**(0.20, 0.72)**	0.54
CAUTI	Adult/Pediatric ICU	5	3.8	1,369	1.32	(0.43, 3.09)	1.45

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

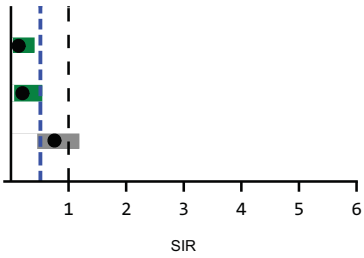
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

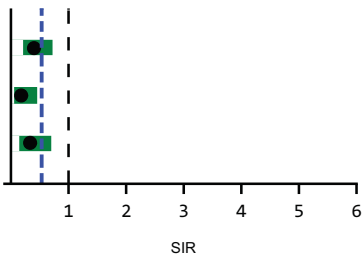
CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	2	3	21	6939	0.1
2011	1	4	19	6478	0.2
2010	2	18	24	7881	0.8



CLABSI - Neonatal ICU

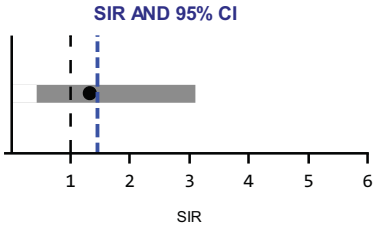
YR	N	OBS	PRED	DD	SIR
2012	1	11	27	12684	0.4
2011	1	4	22	10443	0.2
2010	1	8	23	10748	0.4



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	2	5	3.8	1369	1.3



Data reported as of September 27, 2013

YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)

PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1

Not significantly different from NHSN SIR of 1

Significantly higher than NHSN SIR of 1

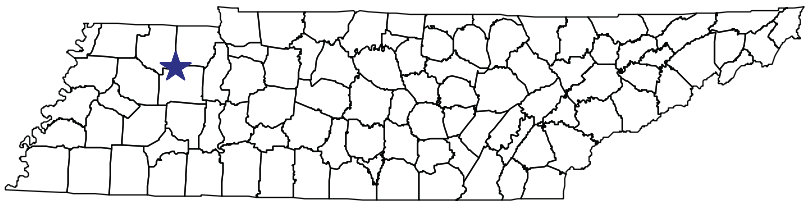
2012 TN SIR

NHSN SIR=1

McKenzie Regional Hospital, McKenzie, Carroll County

Medical School Affiliation: None

Bed Size Category: <50 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.2	5	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.2	21	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
***Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

No units in this facility were subject to CLABSI/CAUTI Tennessee reporting requirements in 2012

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.2	5	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.2	21	N/A**

**Number of predicted infections <1; no SIR calculated

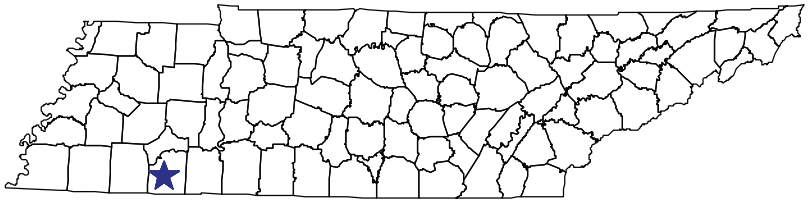
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

McNairy Regional Hospital, Selmer, McNairy County

Medical School Affiliation: None

Bed Size Category: <50 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.1	2	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	1	0.1	15	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
***Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

No units in this facility were subject to CLABSI/CAUTI Tennessee reporting requirements in 2012

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.1	2	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	1	0.1	15	N/A**

**Number of predicted infections <1; no SIR calculated

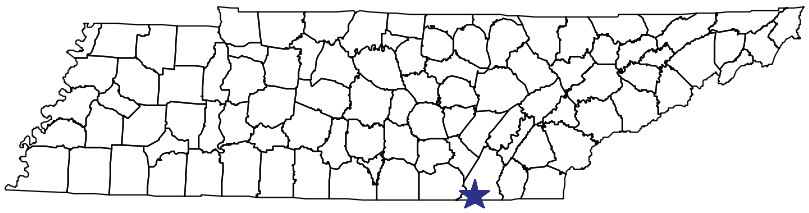
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Memorial Healthcare System, Chattanooga, Hamilton County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	11	7.9	3,857	1.39	(0.70, 2.49)	0.53
CAUTI	Adult/Pediatric ICU	33	16.8	7,596	**1.97**	**(1.35, 2.76)**	1.45
SSI	Colon surgery	9	7.9	261	1.15	(0.52, 2.18)	0.94
	Abdominal hysterectomy	2	0.8	89	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

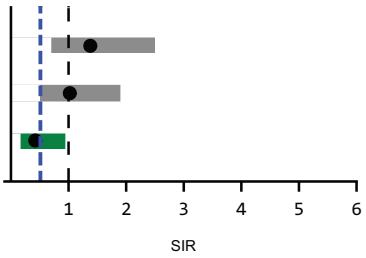
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

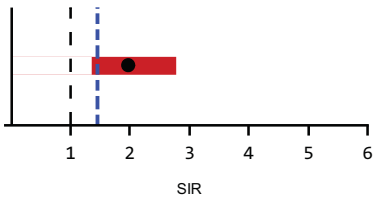
YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	3	11	7.9	3857	1.4	
2011	3	10	9.7	4604	1.0	
2010	4	6	14	7150	0.4	



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

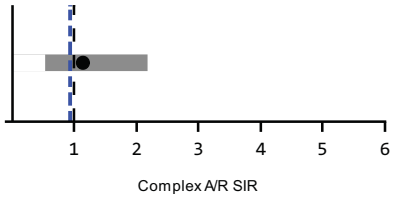
YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	3	33	17	7596	2.0	



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR	SIR AND 95% CI
2012	9	7.9	261	1.1	



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	2	0.8	89	N/A**

**Number of predicted infections <1; no SIR calculated

Data reported as of September 27, 2013

YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)

PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1

Not significantly different from NHSN SIR of 1

Significantly higher than NHSN SIR of 1

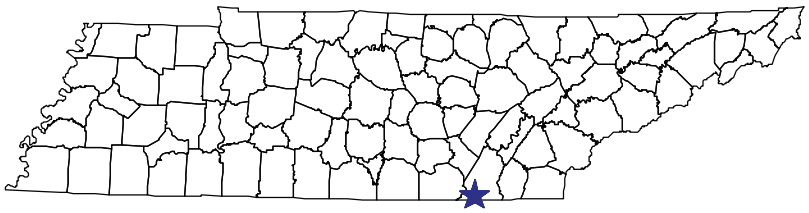
2012 TN SIR

NHSN SIR=1

Memorial Hixson Hospital, Chattanooga, Hamilton County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.6	403	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	3	1.1	840	2.77	(0.57, 8.10)	1.45
SSI	Colon surgery	1	1.1	42	0.90	(0.02, 4.99)	0.94
	Abdominal hysterectomy	0	0.1	13	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

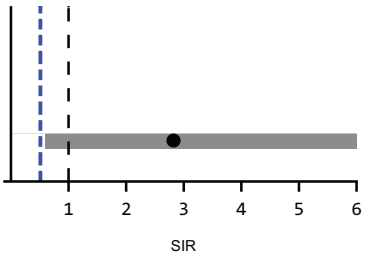
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

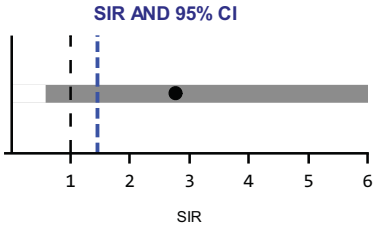
YR	N	OBS	PRED	DD	SIR
2012	1	0	0.6	403	N/A**
2011	1	0	0.4	281	N/A**
2010	1	3	1.1	707	2.8



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

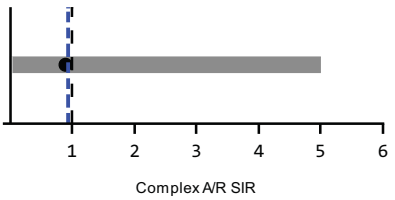
YR	N	OBS	PRED	DD	SIR
2012	1	3	1.1	840	2.8



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	1	1.1	42	0.9



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.1	13	N/A**

**Number of predicted infections <1; no SIR calculated

Data reported as of September 27, 2013

YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)

PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1

Not significantly different from NHSN SIR of 1

Significantly higher than NHSN SIR of 1

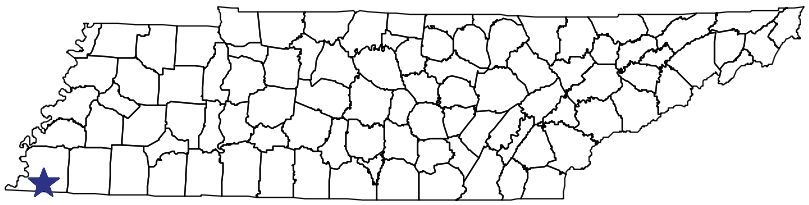
2012 TN SIR

NHSN SIR=1

Methodist Healthcare Germantown, Memphis, Shelby County

Medical School Affiliation: Graduate teaching

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

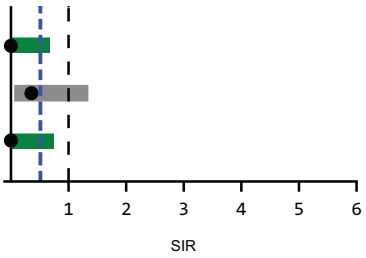
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	5.5	3,856	**0.00**	**(0.00, 0.67)**	0.53
	Neonatal ICU	0	2.5	945	0.00	(0.00, 1.48)	0.54
CAUTI	Adult/Pediatric ICU	4	7.1	4,851	0.56	(0.15, 1.45)	1.45
SSI	Colon surgery	4	5.9	218	0.68	(0.19, 1.74)	0.94
	Abdominal hysterectomy	2	6.3	879	0.32	(0.04, 1.14)	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

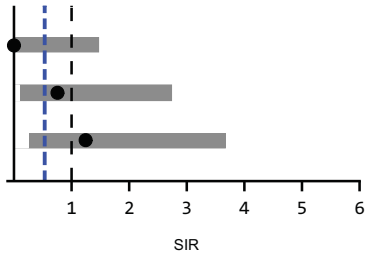
CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	2	0	5.5	3856	0.0
2011	2	2	5.4	3780	0.4
2010	3	0	5.0	3494	0.0



CLABSI - Neonatal ICU

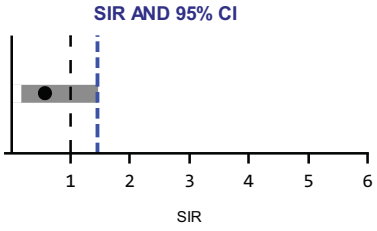
YR	N	OBS	PRED	DD	SIR
2012	1	0	2.5	945	0.0
2011	1	2	2.6	907	0.8
2010	1	3	2.4	867	1.3



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

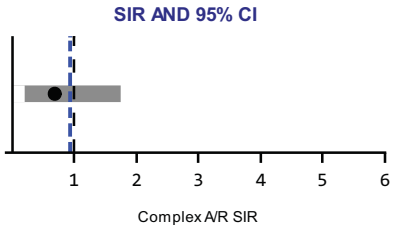
YR	N	OBS	PRED	DD	SIR
2012	2	4	7.1	4851	0.6



Surgical Site Infections (SSI)

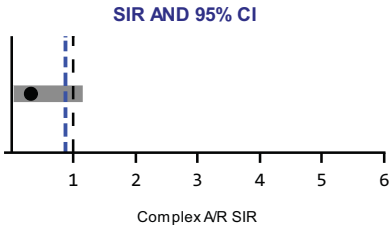
SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	4	5.9	218	0.7



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	2	6.3	879	0.3



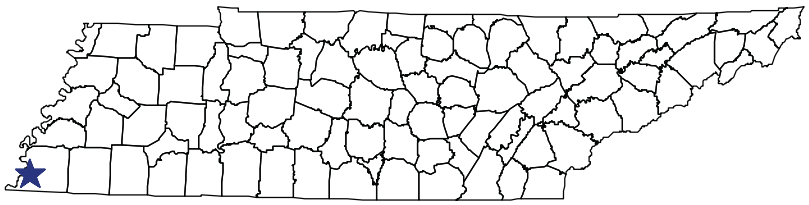
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Methodist Healthcare LeBonheur, Memphis, Shelby County

Medical School Affiliation: Major teaching

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	2	13.9	4,528	**0.14**	**(0.02, 0.52)**	0.53
	Neonatal ICU	12	17.0	7,370	0.70	(0.36, 1.23)	0.54
CAUTI	Adult/Pediatric ICU	5	8.6	3,092	0.58	(0.19, 1.36)	1.45
SSI	Colon surgery	0	0.9	29	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.0	0	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

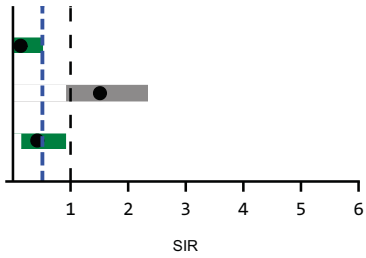
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	2	2	14	4528	0.1
2011	2	20	13	4296	1.5
2010	2	6	14	4673	0.4

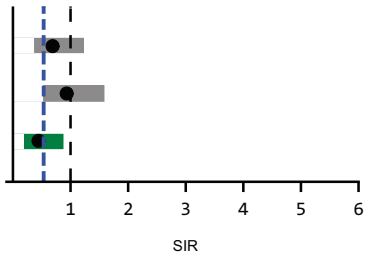
SIR AND 95% CI



CLABSI - Neonatal ICU

YR	N	OBS	PRED	DD	SIR
2012	1	12	17	7370	0.7
2011	1	14	15	6409	0.9
2010	1	8	18	7451	0.4

SIR AND 95% CI

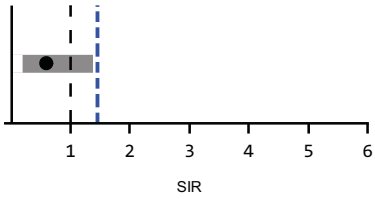


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	2	5	8.6	3092	0.6

SIR AND 95% CI



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.9	29	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.0	0	N/A**

**Number of predicted infections <1; no SIR calculated

Data reported as of September 27, 2013

YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)

PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1

Not significantly different from NHSN SIR of 1

Significantly higher than NHSN SIR of 1

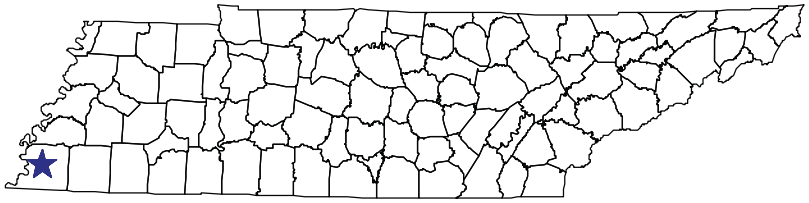
2012 TN SIR

NHSN SIR=1

Methodist Healthcare North, Memphis, Shelby County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	3	7.1	4,924	0.42	(0.09, 1.24)	0.53
CAUTI	Adult/Pediatric ICU	13	9.8	7,135	1.33	(0.71, 2.27)	1.45
SSI	Colon surgery	0	1.4	51	0.00	(0.00, 2.68)	0.94
	Abdominal hysterectomy	0	0.0	0	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

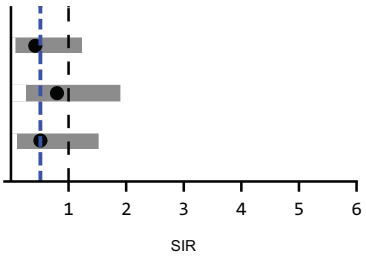
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

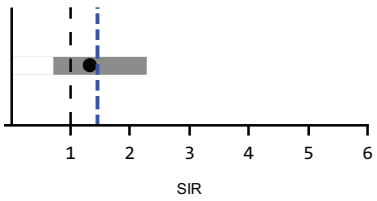
YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	2	3	7.1	4924	0.4	
2011	2	5	6.1	4264	0.8	
2010	2	3	5.8	4048	0.5	



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

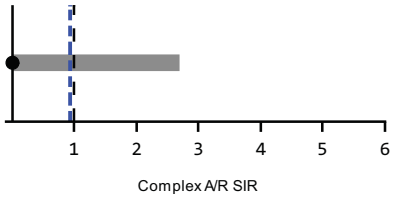
YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	2	13	9.8	7135	1.3	



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR	SIR AND 95% CI
2012	0	1.4	51	0.0	



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.0	0	N/A**

**Number of predicted infections <1; no SIR calculated

Data reported as of September 27, 2013

YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)

PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1

Not significantly different from NHSN SIR of 1

Significantly higher than NHSN SIR of 1

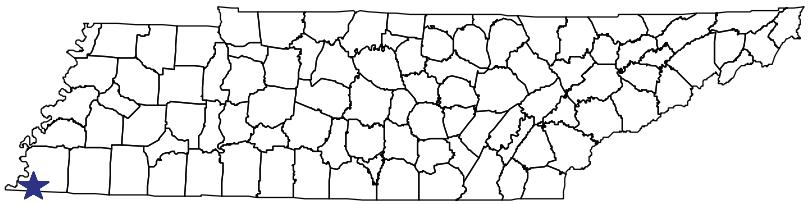
2012 TN SIR

NHSN SIR=1

Methodist Healthcare South, Memphis, Shelby County

Medical School Affiliation: Graduate teaching

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

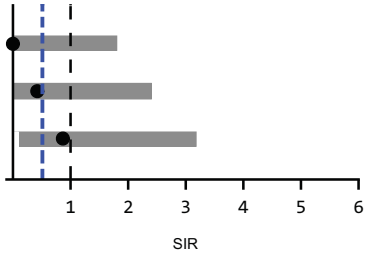
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	2.0	1,383	0.00	(0.00, 1.82)	0.53
	Neonatal ICU	0	0.0	4	**N/A**	**N/A**	0.54
CAUTI	Adult/Pediatric ICU	7	3.2	2,570	2.19	(0.88, 4.52)	1.45
SSI	Colon surgery	0	1.0	52	0.00	(0.00, 3.52)	0.94
	Abdominal hysterectomy	0	0.7	95	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	0	2.0	1383	0.0
2011	1	1	2.3	1574	0.4
2010	1	2	2.3	1543	0.9



CLABSI - Neonatal ICU

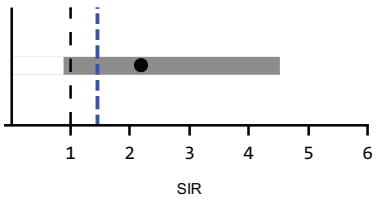
YR	N	OBS	PRED	DD	SIR
2012	1	0	0.0	4	N/A**
2011	1	0	0.0	22	N/A**
2010	1	0	0.0	19	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

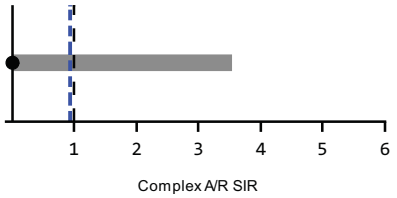
YR	N	OBS	PRED	DD	SIR
2012	1	7	3.2	2570	2.2



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	1.0	52	0.0



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.7	95	N/A**

**Number of predicted infections <1; no SIR calculated

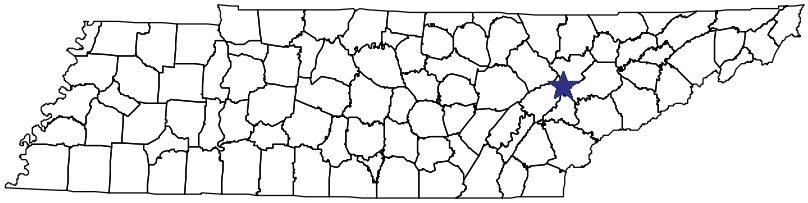
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Methodist Medical Center of Oak Ridge, Oak Ridge, Anderson County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

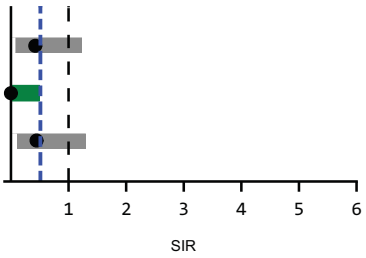
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	3	7.1	4,831	0.42	(0.09, 1.24)	0.53
CAUTI	Adult/Pediatric ICU	9	8.0	6,465	1.12	(0.51, 2.13)	1.45
SSI	Colon surgery	0	4.4	133	**0.00**	**(0.00, 0.83)**	0.94
	Abdominal hysterectomy	0	0.8	86	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

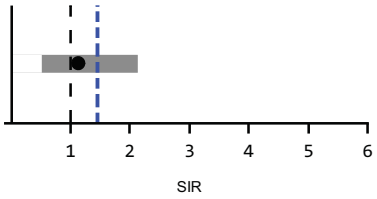
YR	N	OBS	PRED	DD	SIR
2012	1	3	7.1	4831	0.4
2011	1	0	7.4	5024	0.0
2010	1	3	6.7	4582	0.4



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

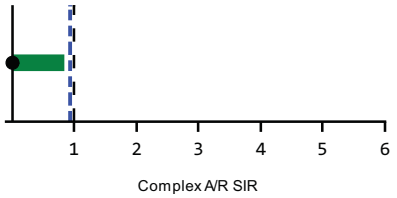
YR	N	OBS	PRED	DD	SIR
2012	1	9	8.0	6465	1.1



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	4.4	133	0.0



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.8	86	N/A**

**Number of predicted infections <1; no SIR calculated

Data reported as of September 27, 2013

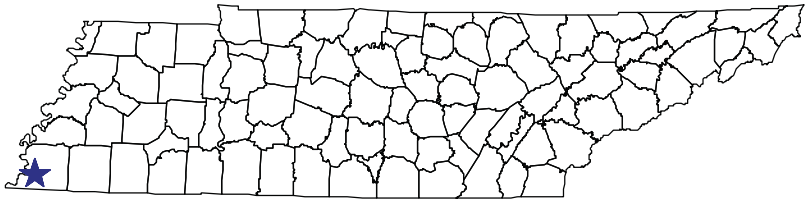
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Methodist University Hospital, Memphis, Shelby County

Medical School Affiliation: Major teaching

Bed Size Category: 400+ beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	2	25.3	12,213	**0.08**	**(0.01, 0.29)**	0.53
CAUTI	Adult/Pediatric ICU	45	40.4	14,548	1.11	(0.81, 1.49)	1.45
SSI	Colon surgery	3	4.0	130	0.75	(0.16, 2.20)	0.94
	Abdominal hysterectomy	0	2.7	293	0.00	(0.00, 1.39)	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

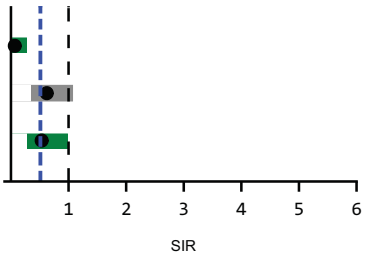
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

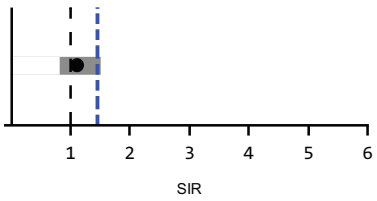
YR	N	OBS	PRED	DD	SIR
2012	5	2	25	12213	0.1
2011	4	13	21	10269	0.6
2010	4	11	20	9814	0.6



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

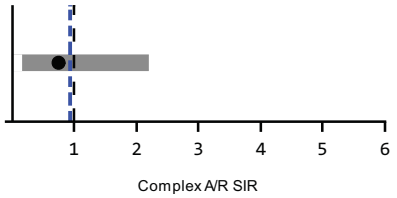
YR	N	OBS	PRED	DD	SIR
2012	5	45	40	14548	1.1



Surgical Site Infections (SSI)

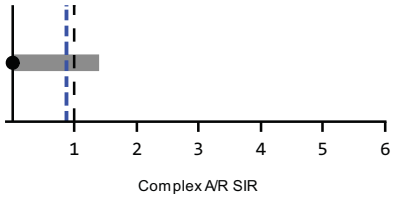
SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	3	4.0	130	0.8



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	2.7	293	0.0



Data reported as of September 27, 2013

YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)

PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1

Not significantly different from NHSN SIR of 1

Significantly higher than NHSN SIR of 1

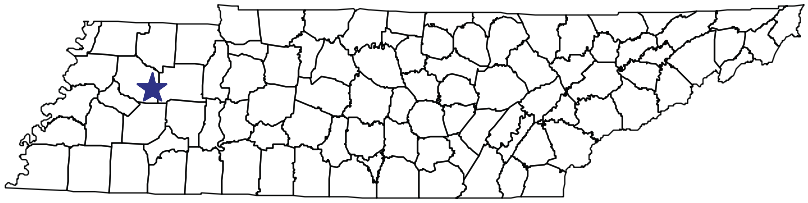
2012 TN SIR

NHSN SIR=1

Milan General Hospital, Milan, Gibson County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	60	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	0	0.2	135	**N/A**	**N/A**	1.45
SSI	Colon surgery	0	0.3	17	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.0	1	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.1	60	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.2	135	N/A**

**Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.3	17	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.0	1	N/A**

**Number of predicted infections <1; no SIR calculated

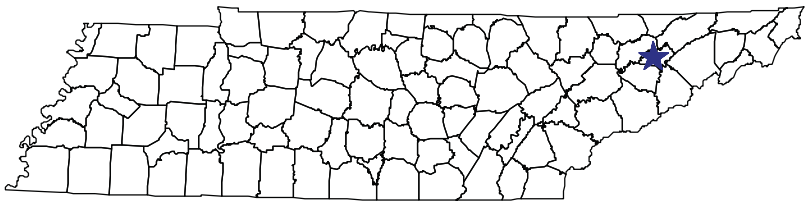
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Morristown-Hamblen Healthcare System, Morristown, Hamblen County

Medical School Affiliation: Undergraduate teaching

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.9	578	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	4	2.7	2,056	1.51	(0.41, 3.86)	1.45
SSI	Colon surgery	2	1.4	58	1.46	(0.18, 5.28)	0.94
	Abdominal hysterectomy	0	0.9	121	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

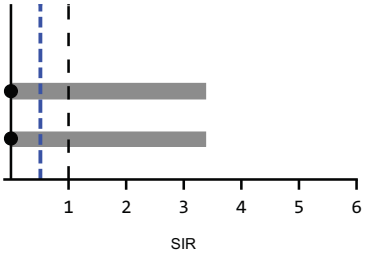
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

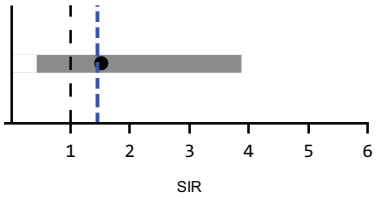
YR	N	OBS	PRED	DD	SIR
2012	1	0	0.9	578	N/A**
2011	1	0	1.1	727	0.0
2010	1	0	1.1	730	0.0



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

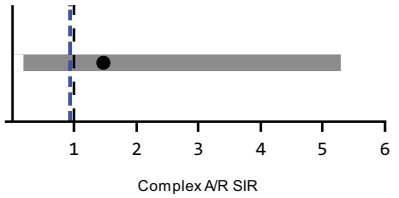
YR	N	OBS	PRED	DD	SIR
2012	1	4	2.7	2056	1.5



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	2	1.4	58	1.5



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.9	121	N/A**

**Number of predicted infections <1; no SIR calculated

Data reported as of September 27, 2013

YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)

PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1

Not significantly different from NHSN SIR of 1

Significantly higher than NHSN SIR of 1

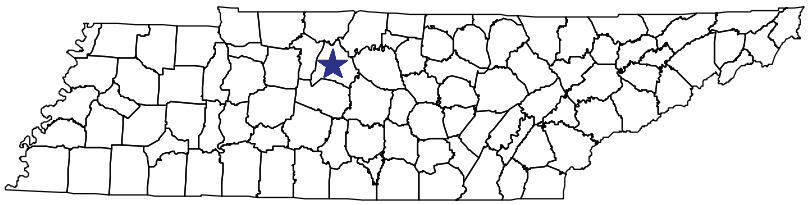
2012 TN SIR

NHSN SIR=1

Nashville General Hospital at Meharry, Nashville, Davidson County

Medical School Affiliation: Major teaching

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

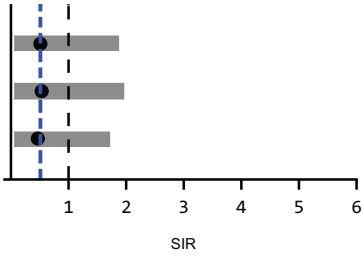
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	2	3.8	1,824	0.52	(0.06, 1.88)	0.53
	Neonatal ICU	0	0.1	88	**N/A**	**N/A**	0.54
CAUTI	Adult/Pediatric ICU	2	4.7	2,060	0.43	(0.05, 1.54)	1.45
SSI	Colon surgery	1	1.0	37	0.97	(0.02, 5.39)	0.94
	Abdominal hysterectomy	4	0.6	50	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	2	3.8	1824	0.5
2011	1	2	3.7	1747	0.5
2010	1	2	4.2	1994	0.5



CLABSI - Neonatal ICU

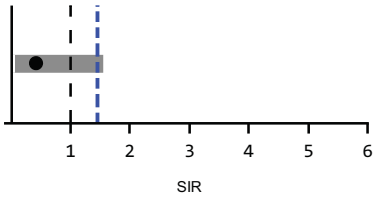
YR	N	OBS	PRED	DD	SIR
2012	1	0	0.1	88	N/A**
2011	1	0	0.1	54	N/A**
2010	1	0	0.1	85	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

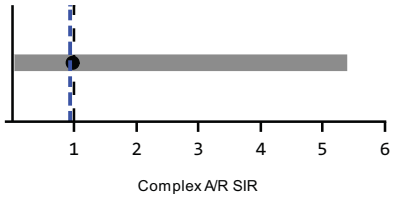
YR	N	OBS	PRED	DD	SIR
2012	1	2	4.7	2060	0.4



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	1	1.0	37	1.0



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	4	0.6	50	N/A**

**Number of predicted infections <1; no SIR calculated

Data reported as of September 27, 2013

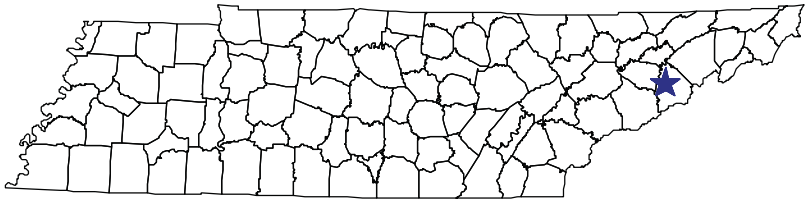
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Newport Medical Center, Newport, Cocke County

Medical School Affiliation: None

Bed Size Category: <50 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	0.1	54	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	0	1.2	584	0.00	(0.00, 3.13)	1.45
SSI	Colon surgery	0	0.1	7	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.0	0	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

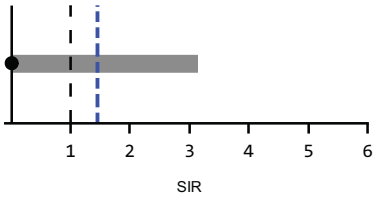
YR	N	OBS	PRED	DD	SIR
2012	1	1	0.1	54	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	1	0	1.2	584	0.0	



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.1	7	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.0	0	N/A**

**Number of predicted infections <1; no SIR calculated

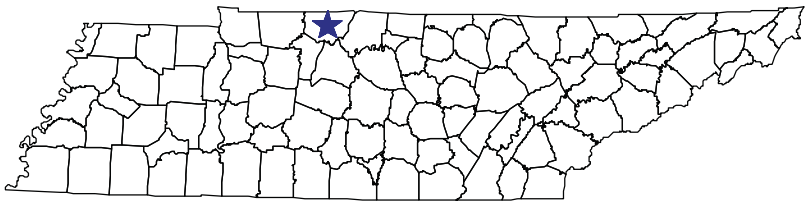
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

NorthCrest Medical Center, Springfield, Robertson County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	1.3	779	0.00	(0.00, 2.80)	0.53
CAUTI	Adult/Pediatric ICU	2	2.2	1,380	0.90	(0.11, 3.25)	1.45
SSI	Colon surgery	0	1.2	37	0.00	(0.00, 3.11)	0.94
	Abdominal hysterectomy	0	0.1	5	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

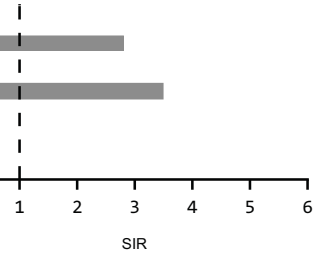
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

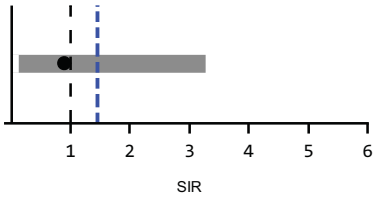
YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	2	0	1.3	779	0.0	
2011	1	0	1.1	706	0.0	
2010	1	0	0.9	612	N/A**	



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

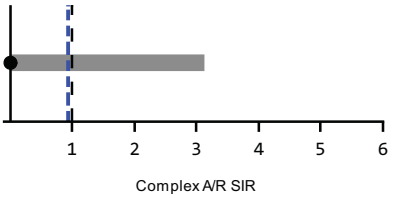
YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	2	2	2.2	1380	0.9	



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR	SIR AND 95% CI
2012	0	1.2	37	0.0	



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.1	5	N/A**

**Number of predicted infections <1; no SIR calculated

Data reported as of September 27, 2013

YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)

PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1

Not significantly different from NHSN SIR of 1

Significantly higher than NHSN SIR of 1

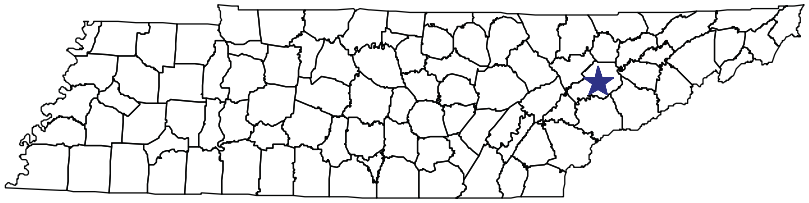
2012 TN SIR

NHSN SIR=1

North Knoxville Medical Center, Knoxville, Knox County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



Standardized Infection Ratio by Infection Type, 2012

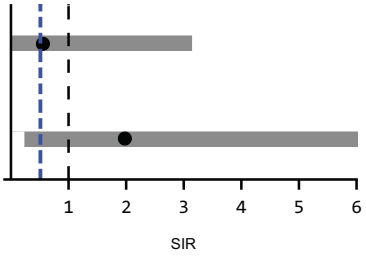
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	1.8	934	0.56	(0.01, 3.15)	0.53
CAUTI	Adult/Pediatric ICU	5	3.1	1,556	1.59	(0.52, 3.71)	1.45
SSI	Colon surgery	0	0.8	32	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.1	13	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

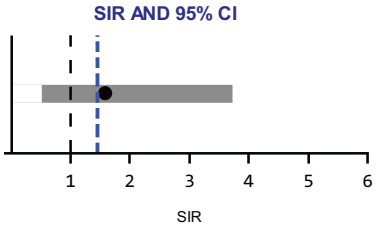
YR	N	OBS	PRED	DD	SIR
2012	1	1	1.8	934	0.6
2011	1	0	0.9	474	N/A**
2010	1	2	1.0	530	2.0



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	1	5	3.1	1556	1.6



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.8	32	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.1	13	N/A**

**Number of predicted infections <1; no SIR calculated

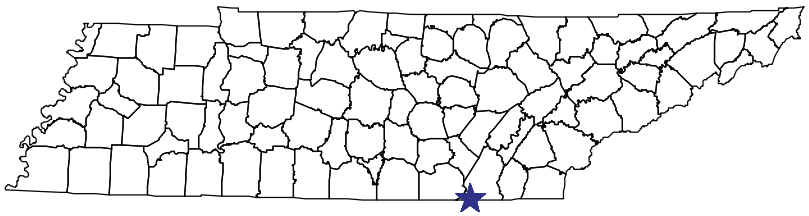
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Parkridge East Hospital, Chattanooga, Hamilton County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	0.5	358	**N/A**	**N/A**	0.53
	Neonatal ICU	2	0.5	194	**N/A**	**N/A**	0.54
CAUTI	Adult/Pediatric ICU	2	1.4	1,086	1.43	(0.17, 5.16)	1.45
SSI	Colon surgery	0	0.5	15	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	2.5	338	0.00	(0.00, 1.45)	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

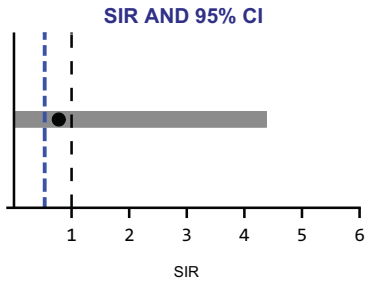
CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	1	0.5	358	N/A**
2011	1	0	0.5	312	N/A**
2010	1	1	0.6	408	N/A**

**Number of predicted infections <1; no SIR calculated

CLABSI - Neonatal ICU

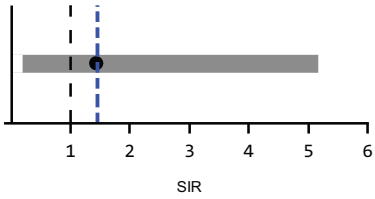
YR	N	OBS	PRED	DD	SIR
2012	1	2	0.5	194	N/A**
2011	1	1	1.3	422	0.8
2010	1	1	0.7	301	N/A**



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	1	2	1.4	1086	1.4



Surgical Site Infections (SSI)

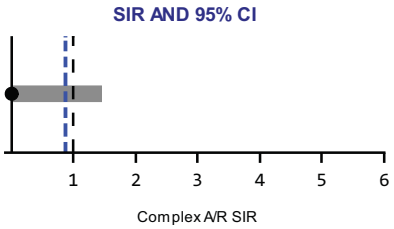
SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.5	15	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	2.5	338	0.0



Data reported as of September 27, 2013

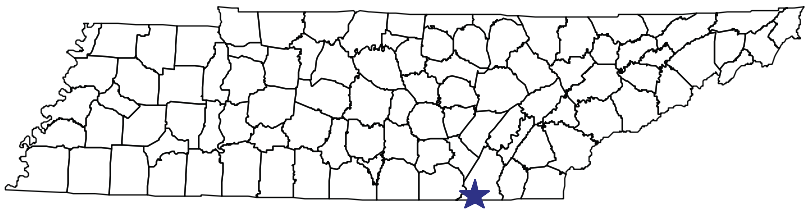
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Parkridge Medical Center, Chattanooga, Hamilton County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

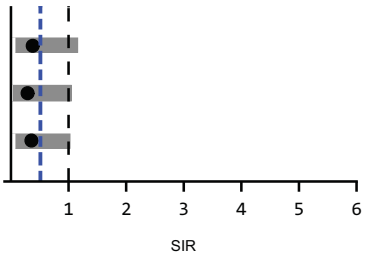
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	3	7.6	3,546	0.40	(0.08, 1.16)	0.53
CAUTI	Adult/Pediatric ICU	23	13.1	5,632	**1.76**	**(1.12, 2.64)**	1.45
SSI	Colon surgery	3	2.5	68	1.20	(0.25, 3.50)	0.94
	Abdominal hysterectomy	1	1.2	149	0.82	(0.02, 4.56)	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

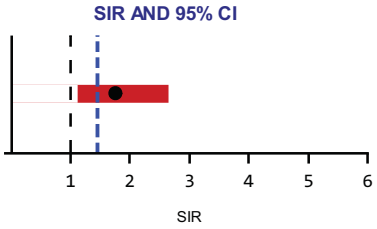
YR	N	OBS	PRED	DD	SIR
2012	2	3	7.6	3546	0.4
2011	2	2	6.9	3223	0.3
2010	2	3	8.4	3949	0.4



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

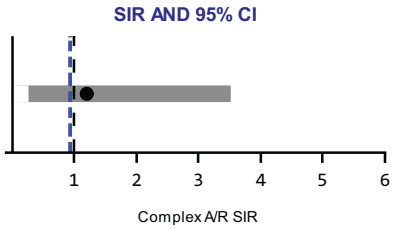
YR	N	OBS	PRED	DD	SIR
2012	2	23	13	5632	1.8



Surgical Site Infections (SSI)

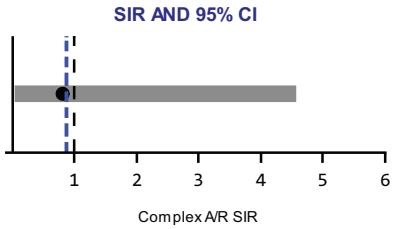
SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	3	2.5	68	1.2



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	1	1.2	149	0.8



Data reported as of September 27, 2013

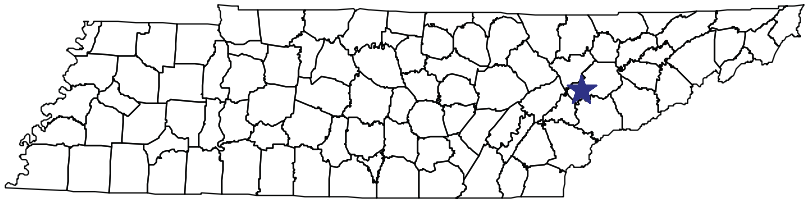
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Parkwest Medical Center- Knoxville, Knoxville, Knox County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

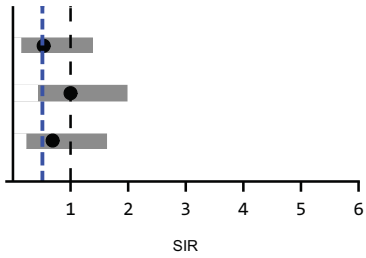
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	4	7.4	5,009	0.54	(0.15, 1.39)	0.53
CAUTI	Adult/Pediatric ICU	28	8.3	6,711	**3.36**	**(2.23, 4.85)**	1.45
SSI	Colon surgery	5	5.8	170	0.86	(0.28, 2.02)	0.94
	Abdominal hysterectomy	3	3.2	374	0.95	(0.20, 2.78)	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

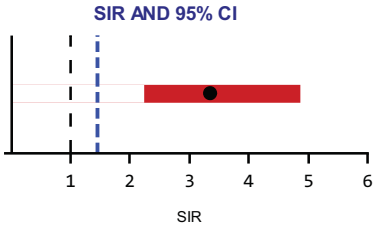
YR	N	OBS	PRED	DD	SIR
2012	1	4	7.4	5009	0.5
2011	1	8	8.0	5417	1.0
2010	1	5	7.2	4897	0.7



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

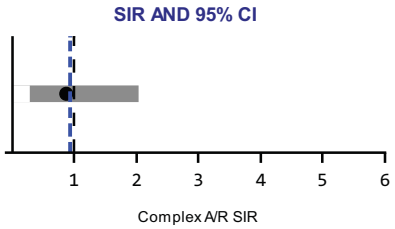
YR	N	OBS	PRED	DD	SIR
2012	1	28	8.3	6711	3.4



Surgical Site Infections (SSI)

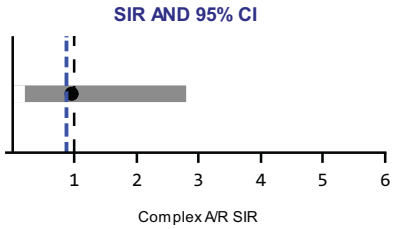
SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	5	5.8	170	0.9



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	3	3.2	374	1.0



Data reported as of September 27, 2013

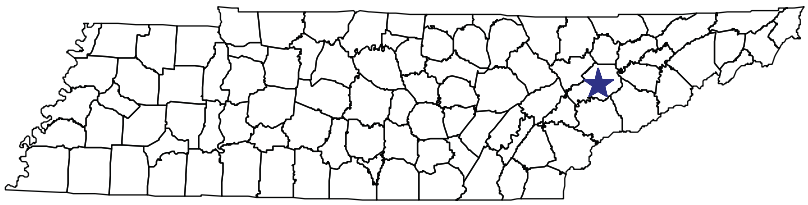
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Physician's Regional Medical Center, Knoxville, Knox County

Medical School Affiliation: None

Bed Size Category: 400+ beds



Standardized Infection Ratio by Infection Type, 2012

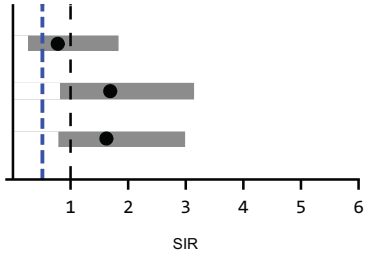
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	5	6.4	4,321	0.78	(0.25, 1.83)	0.53
	Neonatal ICU	0	0.1	91	**N/A**	**N/A**	0.54
CAUTI	Adult/Pediatric ICU	13	7.9	6,282	1.65	(0.88, 2.82)	1.45
SSI	Colon surgery	1	2.4	75	0.41	(0.01, 2.28)	0.94
	Abdominal hysterectomy	0	0.6	57	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	2	5	6.4	4321	0.8
2011	2	10	5.9	3979	1.7
2010	2	10	6.2	4178	1.6



CLABSI - Neonatal ICU

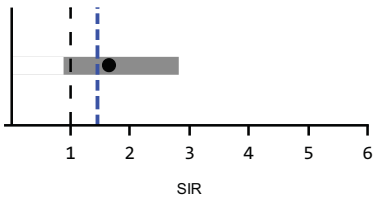
YR	N	OBS	PRED	DD	SIR
2012	1	0	0.1	91	N/A**
2011	1	0	0.2	117	N/A**
2010	1	0	0.3	218	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

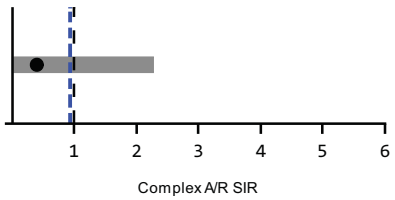
YR	N	OBS	PRED	DD	SIR
2012	2	13	7.9	6282	1.6



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	1	2.4	75	0.4



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.6	57	N/A**

**Number of predicted infections <1; no SIR calculated

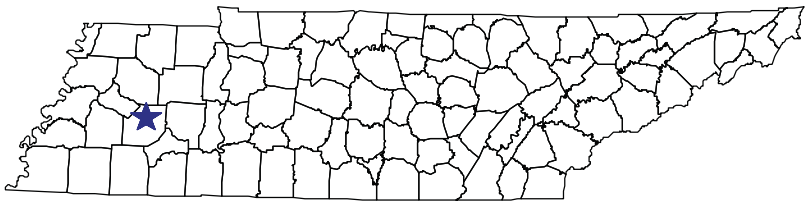
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Regional Hospital of Jackson, Jackson, Madison County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

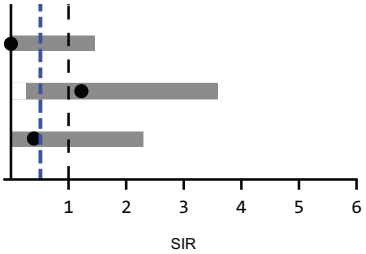
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	2.6	1,740	0.00	(0.00, 1.44)	0.53
CAUTI	Adult/Pediatric ICU	5	3.6	2,900	1.39	(0.45, 3.24)	1.45
SSI	Colon surgery	1	1.6	56	0.64	(0.02, 3.58)	0.94
	Abdominal hysterectomy	1	0.2	18	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

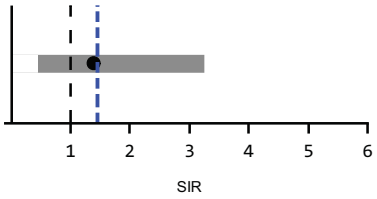
YR	N	OBS	PRED	DD	SIR
2012	1	0	2.6	1740	0.0
2011	1	3	2.4	1665	1.2
2010	1	1	2.4	1650	0.4



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

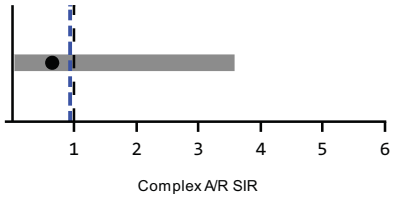
YR	N	OBS	PRED	DD	SIR
2012	1	5	3.6	2900	1.4



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	1	1.6	56	0.6



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	1	0.2	18	N/A**

**Number of predicted infections <1; no SIR calculated

Data reported as of September 27, 2013

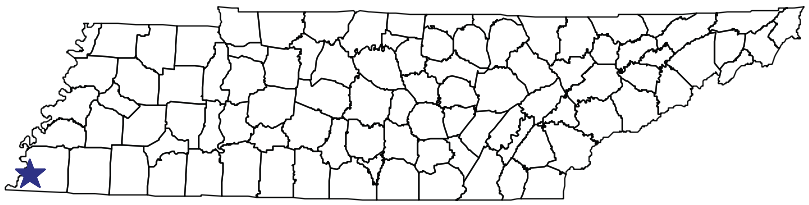
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Regional Medical Center- Memphis, Memphis, Shelby County

Medical School Affiliation: Major teaching

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

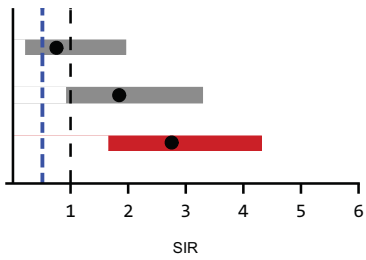
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	4	5.2	2,478	0.77	(0.21, 1.96)	0.53
	Neonatal ICU	17	11.2	3,539	1.51	(0.88, 2.43)	0.54
CAUTI	Adult/Pediatric ICU	121	39.1	11,739	**3.09**	**(2.57, 3.70)**	1.45
SSI	Colon surgery	1	1.9	54	0.53	(0.01, 2.93)	0.94
	Abdominal hysterectomy	0	1.0	59	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

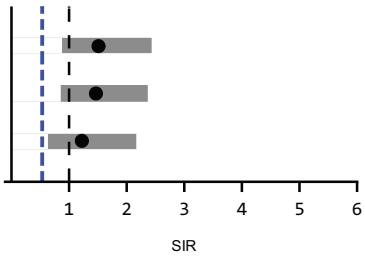
CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	4	5.2	2478	0.8
2011	1	11	6.0	2833	1.8
2010	1	19	6.9	3269	2.8



CLABSI - Neonatal ICU

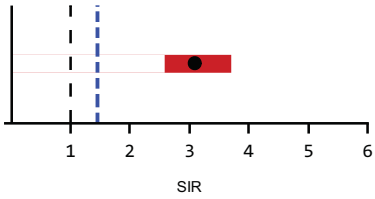
YR	N	OBS	PRED	DD	SIR
2012	2	17	11	3539	1.5
2011	1	17	12	4111	1.5
2010	1	12	9.7	3632	1.2



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

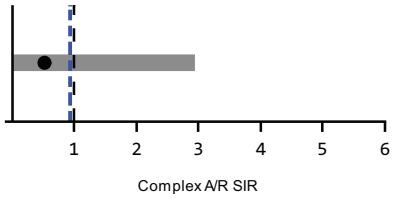
YR	N	OBS	PRED	DD	SIR
2012	3	121	39	11739	3.1



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	1	1.9	54	0.5



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	1.0	59	N/A**

**Number of predicted infections <1; no SIR calculated

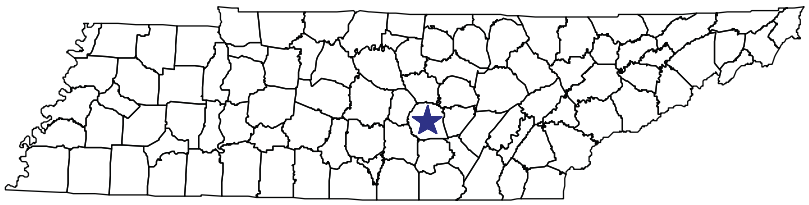
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

River Park Hospital, Mc Minnville, Warren County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.4	192	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	0	1.9	941	0.00	(0.00, 1.94)	1.45
SSI	Colon surgery	1	0.4	12	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	1	0.0	5	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

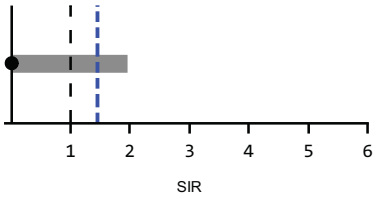
YR	N	OBS	PRED	DD	SIR
2012	1	0	0.4	192	N/A**
2011	1	0	0.4	232	N/A**
2010	1	0	0.5	278	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	1	0	1.9	941	0.0	



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	1	0.4	12	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	1	0.0	5	N/A**

**Number of predicted infections <1; no SIR calculated

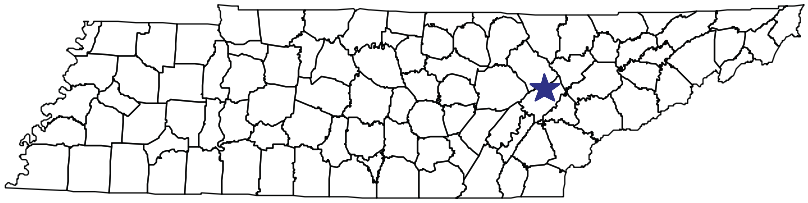
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Roane Medical Center, Harriman, Roane County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	0.4	240	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	0	0.6	480	**N/A**	**N/A**	1.45
SSI	Colon surgery	0	0.9	23	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.0	1	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	1	0.4	240	N/A**
2011	1	0	0.4	285	N/A**
2010	1	0	0.2	150	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.6	480	N/A**

**Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.9	23	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.0	1	N/A**

**Number of predicted infections <1; no SIR calculated

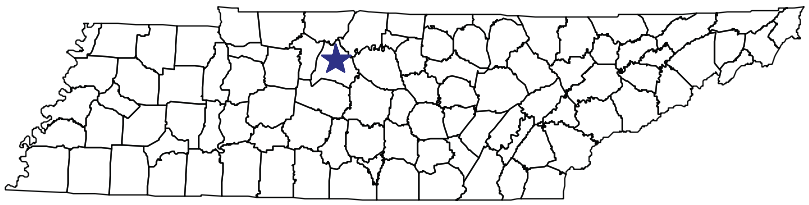
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Skyline Medical Center, Nashville, Davidson County

Medical School Affiliation: None

Bed Size Category: <50 beds



Standardized Infection Ratio by Infection Type, 2012

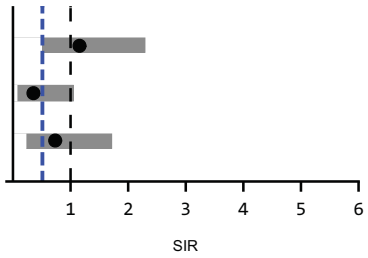
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	8	6.8	3,832	1.17	(0.50, 2.30)	0.53
CAUTI	Adult/Pediatric ICU	12	17.3	7,311	0.69	(0.36, 1.21)	1.45
SSI	Colon surgery	5	3.0	122	1.69	(0.55, 3.95)	0.94
	Abdominal hysterectomy	0	0.0	5	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

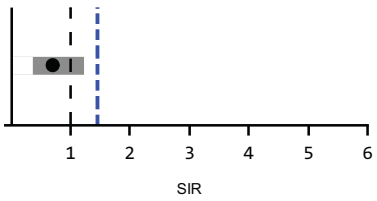
YR	N	OBS	PRED	DD	SIR
2012	2	8	6.8	3832	1.2
2011	2	3	8.4	4671	0.4
2010	2	5	6.8	3825	0.7



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

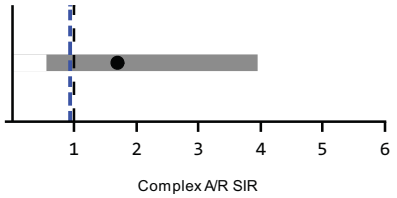
YR	N	OBS	PRED	DD	SIR
2012	2	12	17	7311	0.7



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	5	3.0	122	1.7



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.0	5	N/A**

**Number of predicted infections <1; no SIR calculated

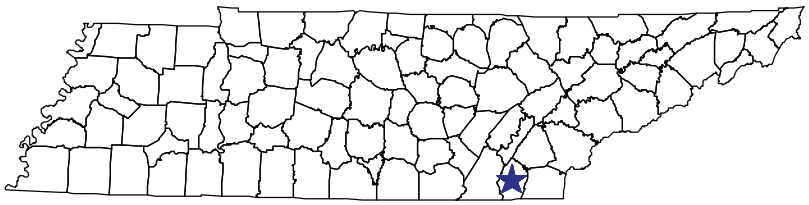
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

SkyRidge Medical Center, Cleveland, Bradley County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

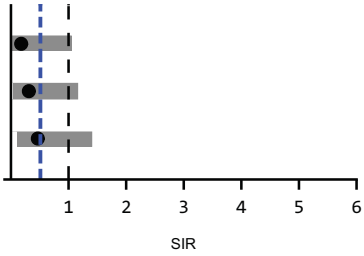
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	5.3	2,506	0.19	(0.00, 1.06)	0.53
CAUTI	Adult/Pediatric ICU	3	9.7	4,277	**0.31**	**(0.06, 0.90)**	1.45
SSI	Colon surgery	1	1.8	56	0.55	(0.01, 3.04)	0.94
	Abdominal hysterectomy	0	0.2	17	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

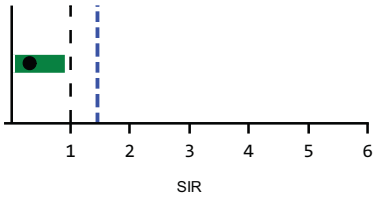
YR	N	OBS	PRED	DD	SIR
2012	2	1	5.3	2506	0.2
2011	2	2	6.2	2954	0.3
2010	2	3	6.2	2959	0.5



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

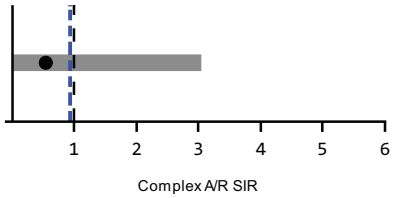
YR	N	OBS	PRED	DD	SIR
2012	2	3	9.7	4277	0.3



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	1	1.8	56	0.5



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.2	17	N/A**

**Number of predicted infections <1; no SIR calculated

Data reported as of September 27, 2013

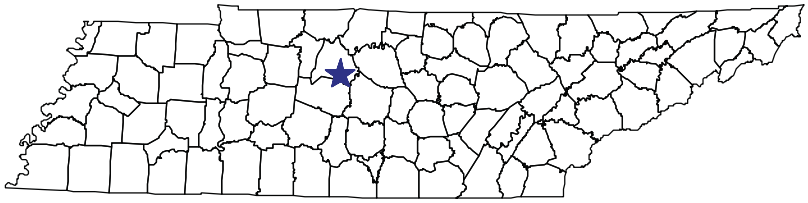
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Southern Hills Medical Center, Nashville, Davidson County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

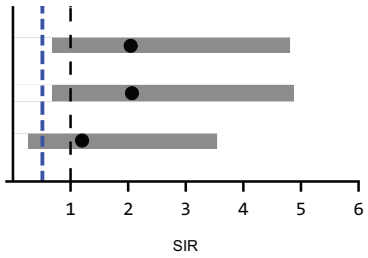
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	5	2.4	1,655	2.06	(0.67, 4.80)	0.53
CAUTI	Adult/Pediatric ICU	9	2.9	2,349	**3.08**	**(1.41, 5.86)**	1.45
SSI	Colon surgery	3	1.8	54	1.71	(0.35, 5.01)	0.94
	Abdominal hysterectomy	0	0.0	4	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

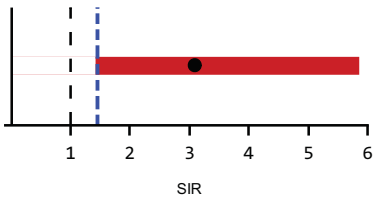
YR	N	OBS	PRED	DD	SIR
2012	1	5	2.4	1655	2.1
2011	1	5	2.4	1635	2.1
2010	1	3	2.5	1693	1.2



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

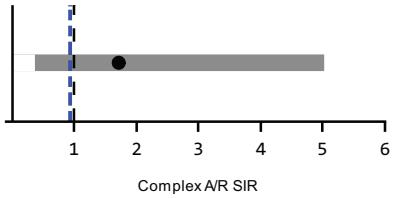
YR	N	OBS	PRED	DD	SIR
2012	1	9	2.9	2349	3.1



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	3	1.8	54	1.7



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.0	4	N/A**

**Number of predicted infections <1; no SIR calculated

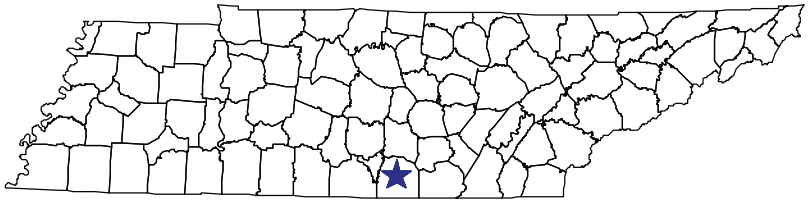
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Southern Tennessee Medical Center, Winchester, Franklin County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	0.7	453	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	5	1.2	922	**4.21**	**(1.37, 9.82)**	1.45
SSI	Colon surgery	1	1.6	42	0.63	(0.02, 3.51)	0.94
	Abdominal hysterectomy	1	0.2	14	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

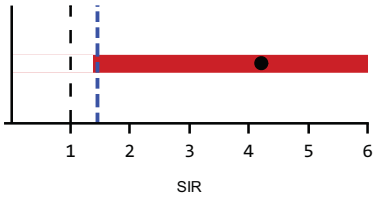
YR	N	OBS	PRED	DD	SIR
2012	1	1	0.7	453	N/A**
2011	1	0	0.8	527	N/A**
2010	1	0	0.6	403	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

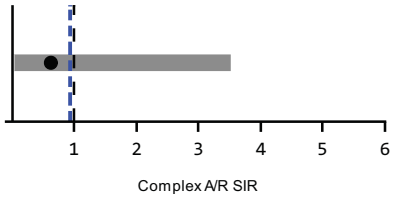
YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	1	5	1.2	922	4.2	



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR	SIR AND 95% CI
2012	1	1.6	42	0.6	



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	1	0.2	14	N/A**

**Number of predicted infections <1; no SIR calculated

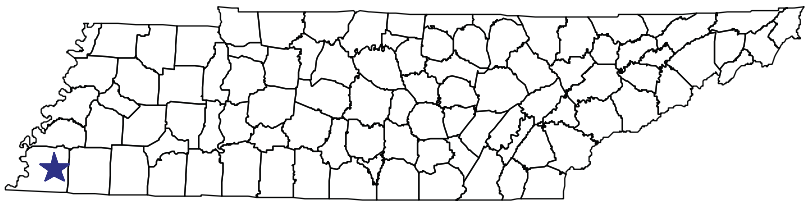
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

St. Francis Bartlett, Bartlett, Shelby County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

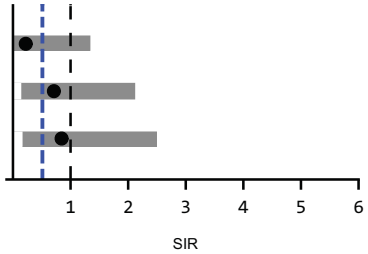
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	4.1	2,823	0.24	(0.01, 1.34)	0.53
	Neonatal ICU	0	0.1	80	**N/A**	**N/A**	0.54
CAUTI	Adult/Pediatric ICU	0	3.7	2,997	**0.00**	**(0.00, 0.99)**	1.45
SSI	Colon surgery	1	1.3	48	0.77	(0.02, 4.31)	0.94
	Abdominal hysterectomy	0	0.5	69	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	1	4.1	2823	0.2
2011	1	3	4.1	2817	0.7
2010	1	3	3.5	2398	0.9



CLABSI - Neonatal ICU

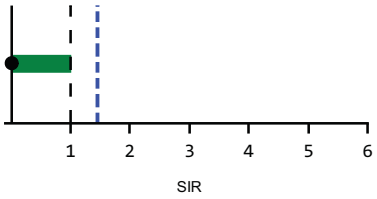
YR	N	OBS	PRED	DD	SIR
2012	1	0	0.1	80	N/A**
2011	1	0	0.2	144	N/A**
2010	1	0	0.1	46	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

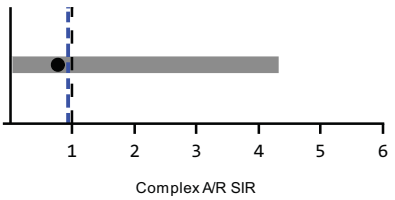
YR	N	OBS	PRED	DD	SIR
2012	1	0	3.7	2997	0.0



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	1	1.3	48	0.8



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.5	69	N/A**

**Number of predicted infections <1; no SIR calculated

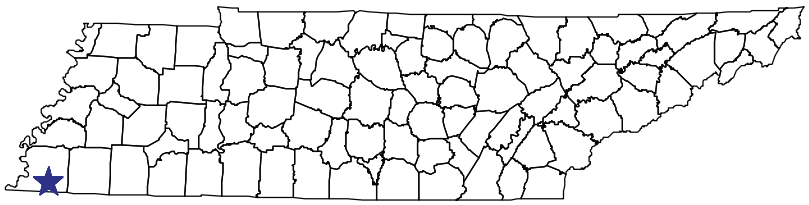
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

St. Francis Hospital- Memphis, Memphis, Shelby County

Medical School Affiliation: Graduate teaching

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

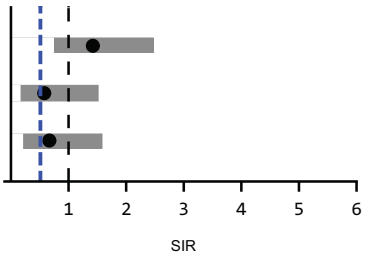
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	12	8.5	5,963	1.42	(0.73, 2.48)	0.53
	Neonatal ICU	0	0.4	272	**N/A**	**N/A**	0.54
CAUTI	Adult/Pediatric ICU	21	13.3	6,540	1.58	(0.98, 2.42)	1.45
SSI	Colon surgery	3	3.8	134	0.79	(0.16, 2.31)	0.94
	Abdominal hysterectomy	0	0.4	39	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	3	12	8.5	5963	1.4
2011	3	4	6.7	4751	0.6
2010	1	5	7.4	5029	0.7



CLABSI - Neonatal ICU

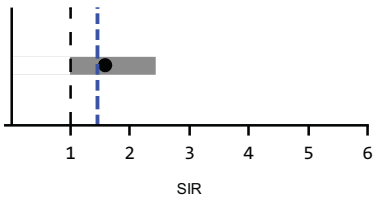
YR	N	OBS	PRED	DD	SIR
2012	1	0	0.4	272	N/A**
2011	1	0	0.3	221	N/A**
2010	1	0	0.5	309	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

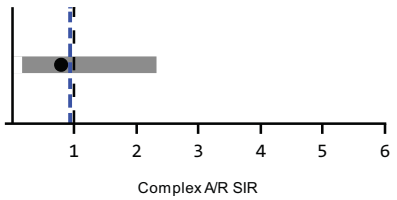
YR	N	OBS	PRED	DD	SIR
2012	3	21	13	6540	1.6



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	3	3.8	134	0.8



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.4	39	N/A**

**Number of predicted infections <1; no SIR calculated

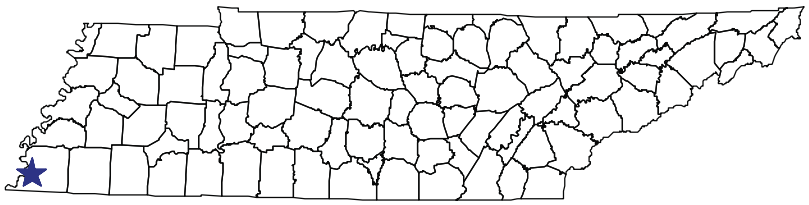
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

St. Jude Children's Research Hospital, Memphis, Shelby County

Medical School Affiliation: Major teaching

Bed Size Category: 50-99 beds



Standardized Infection Ratio by Infection Type, 2012

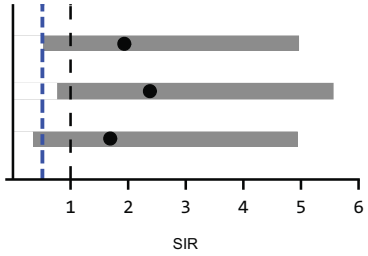
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	4	2.1	1,555	1.94	(0.53, 4.96)	0.53
CAUTI	Adult/Pediatric ICU	3	0.8	949	**N/A**	**N/A**	1.45
SSI	Colon surgery	0	0.0	0	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.0	0	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	4	2.1	1555	1.9
2011	1	5	2.1	1584	2.4
2010	1	3	1.8	1337	1.7



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	1	3	0.8	949	N/A**

**Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.0	0	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.0	0	N/A**

**Number of predicted infections <1; no SIR calculated

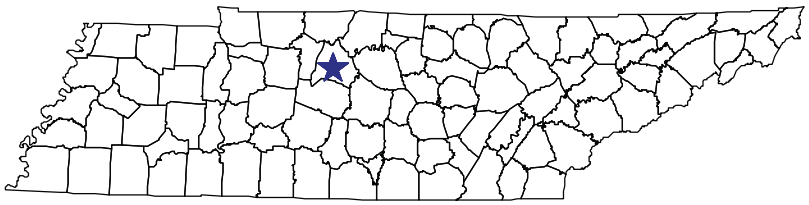
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

St. Thomas Midtown (Baptist Hospital- Nashville), Nashville, Davidson County

Medical School Affiliation: Graduate teaching

Bed Size Category: 400+ beds



Standardized Infection Ratio by Infection Type, 2012

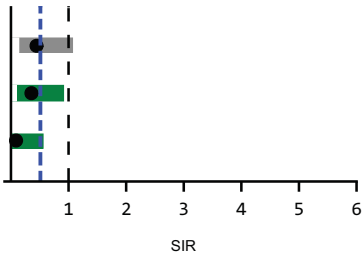
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	5	10.7	5,145	0.47	(0.15, 1.09)	0.53
	Neonatal ICU	1	1.3	595	0.78	(0.02, 4.36)	0.54
CAUTI	Adult/Pediatric ICU	11	10.4	4,658	1.06	(0.53, 1.89)	1.45
SSI	Colon surgery	7	4.4	140	1.57	(0.63, 3.24)	0.94
	Abdominal hysterectomy	3	2.7	359	1.12	(0.23, 3.26)	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

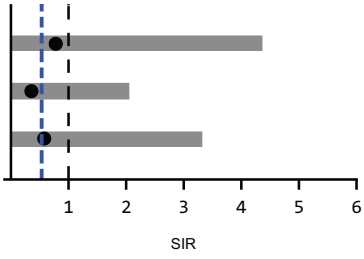
CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	4	5	11	5145	0.5
2011	3	4	11	5251	0.4
2010	3	1	9.9	4692	0.1



CLABSI - Neonatal ICU

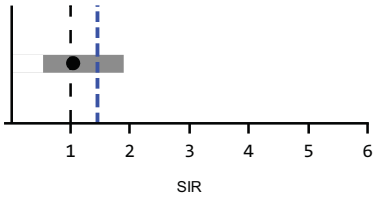
YR	N	OBS	PRED	DD	SIR
2012	1	1	1.3	595	0.8
2011	1	1	2.7	1205	0.4
2010	1	1	1.7	697	0.6



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

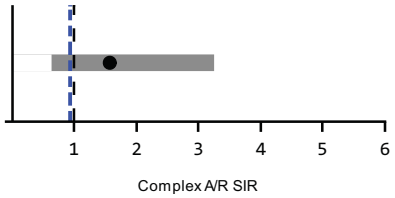
YR	N	OBS	PRED	DD	SIR
2012	4	11	10	4658	1.1



Surgical Site Infections (SSI)

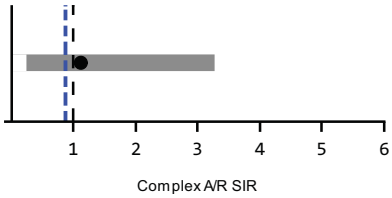
SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	7	4.4	140	1.6



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	3	2.7	359	1.1



Data reported as of September 27, 2013

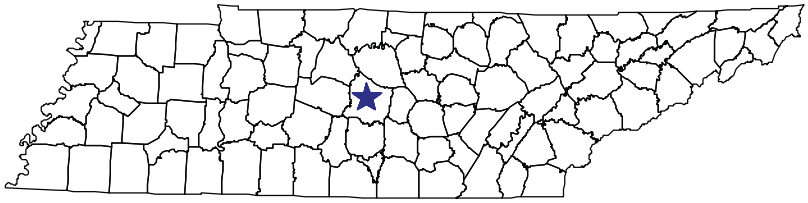
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

St. Thomas Rutherford Hospital (Middle TN Med. Ctr), Murfreesboro, Rutherford County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

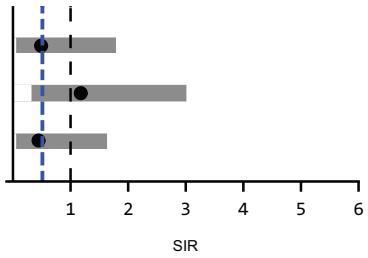
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	2	4.1	2,771	0.49	(0.06, 1.78)	0.53
	Neonatal ICU	0	0.8	481	**N/A**	**N/A**	0.54
CAUTI	Adult/Pediatric ICU	14	6.0	4,813	**2.34**	**(1.28, 3.93)**	1.45
SSI	Colon surgery	2	4.0	138	0.50	(0.06, 1.80)	0.94
	Abdominal hysterectomy	2	1.7	241	1.18	(0.14, 4.24)	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	2	4.1	2771	0.5
2011	1	4	3.4	2314	1.2
2010	1	2	4.4	3015	0.5



CLABSI - Neonatal ICU

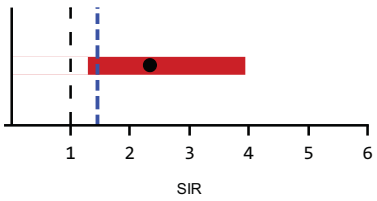
YR	N	OBS	PRED	DD	SIR
2012	1	0	0.8	481	N/A**
2011	1	0	0.4	377	N/A**
2010	1	0	0.4	384	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

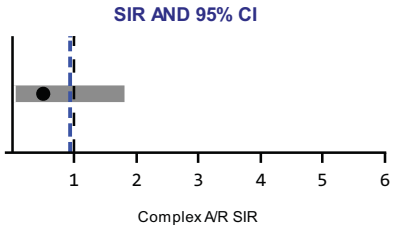
YR	N	OBS	PRED	DD	SIR
2012	1	14	6.0	4813	2.3



Surgical Site Infections (SSI)

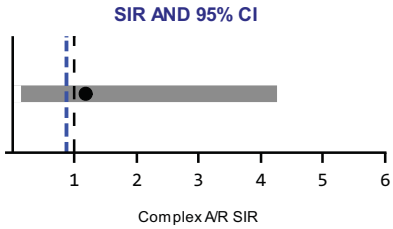
SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	2	4.0	138	0.5



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	2	1.7	241	1.2



Data reported as of September 27, 2013

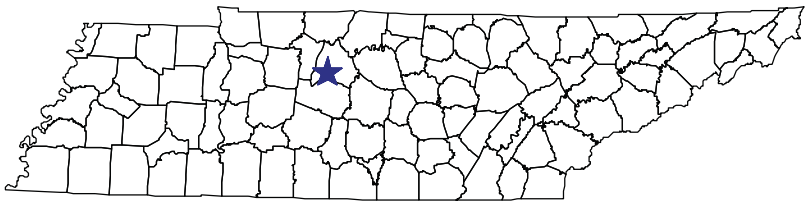
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

St. Thomas West Hospital, Nashville, Davidson County

Medical School Affiliation: None

Bed Size Category: 400+ beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	9	9.1	6,194	0.99	(0.45, 1.88)	0.53
CAUTI	Adult/Pediatric ICU	26	9.6	7,713	**2.71**	**(1.77, 3.98)**	1.45
SSI	Colon surgery	10	7.3	218	1.37	(0.66, 2.52)	0.94
	Abdominal hysterectomy	0	0.9	108	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

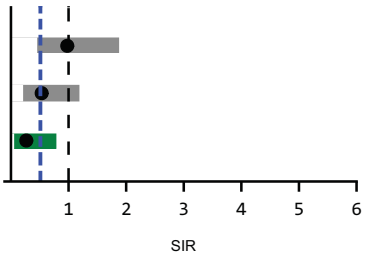
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

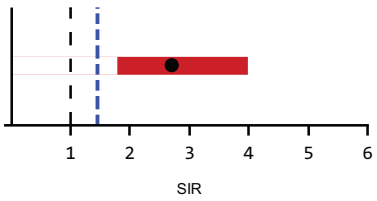
YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	1	9	9.1	6194	1.0	
2011	1	6	11	7505	0.5	
2010	1	3	11	7480	0.3	



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

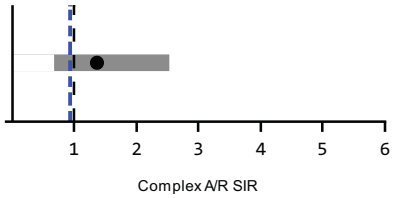
YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	1	26	9.6	7713	2.7	



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR	SIR AND 95% CI
2012	10	7.3	218	1.4	



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.9	108	N/A**

**Number of predicted infections <1; no SIR calculated

Data reported as of September 27, 2013

YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)

PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1

Not significantly different from NHSN SIR of 1

Significantly higher than NHSN SIR of 1

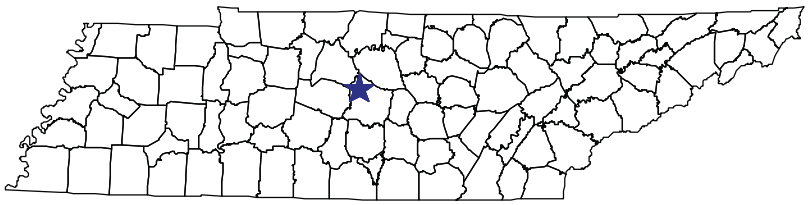
2012 TN SIR

NHSN SIR=1

StoneCrest Medical Center, Smyrna, Rutherford County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

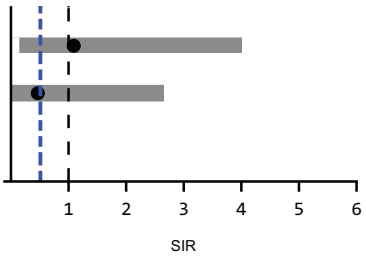
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	2	1.8	952	1.11	(0.13, 4.00)	0.53
CAUTI	Adult/Pediatric ICU	4	3.1	1,540	1.29	(0.35, 3.29)	1.45
SSI	Colon surgery	5	1.6	49	**3.20**	**(1.04, 7.46)**	0.94
	Abdominal hysterectomy	0	1.0	105	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

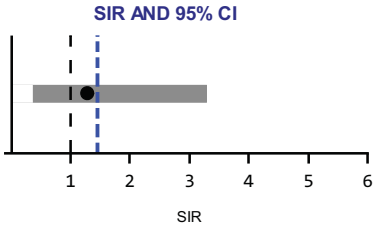
YR	N	OBS	PRED	DD	SIR
2012	1	2	1.8	952	1.1
2011	1	1	2.1	1106	0.5
2010	1	1	0.9	491	N/A**



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

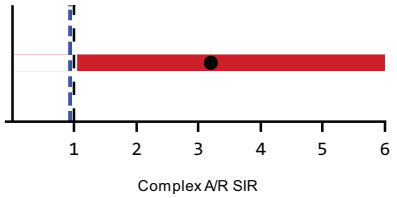
YR	N	OBS	PRED	DD	SIR
2012	1	4	3.1	1540	1.3



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	5	1.6	49	3.2



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	1.0	105	N/A**

**Number of predicted infections <1; no SIR calculated

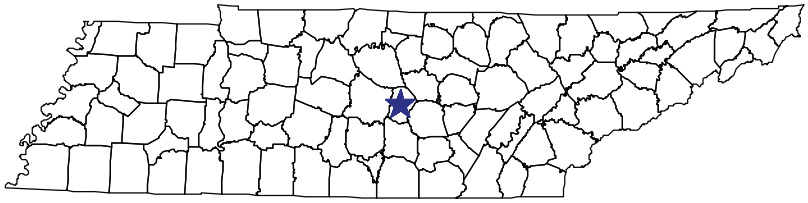
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Stones River Hospital, Woodbury, Cannon County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.0	0	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.0	0	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

No units in this facility were subject to CLABSI/CAUTI Tennessee reporting requirements in 2012

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.0	0	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.0	0	N/A**

**Number of predicted infections <1; no SIR calculated

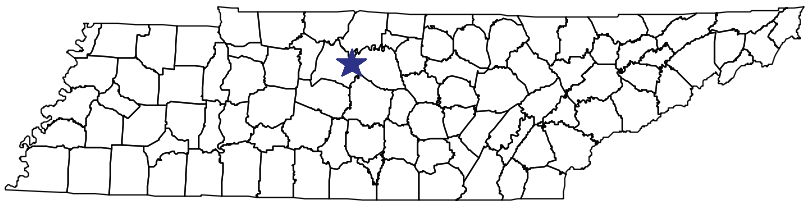
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Summit Medical Center, Hermitage, Davidson County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

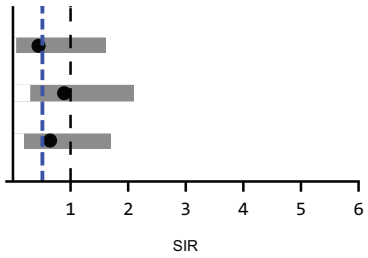
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	2	4.5	2,143	0.45	(0.05, 1.61)	0.53
	Neonatal ICU	0	0.2	155	**N/A**	**N/A**	0.54
CAUTI	Adult/Pediatric ICU	11	9.1	3,956	1.21	(0.60, 2.17)	1.45
SSI	Colon surgery	7	3.8	126	1.82	(0.73, 3.75)	0.94
	Abdominal hysterectomy	3	0.8	101	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	2	2	4.5	2143	0.4
2011	2	5	5.6	2638	0.9
2010	2	4	6.0	2851	0.7



CLABSI - Neonatal ICU

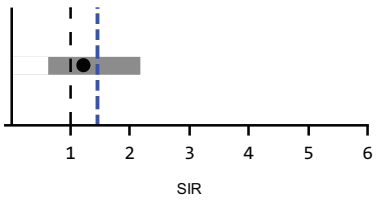
YR	N	OBS	PRED	DD	SIR
2012	1	0	0.2	155	N/A**
2011	1	0	0.4	218	N/A**
2010	1	0	0.3	224	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

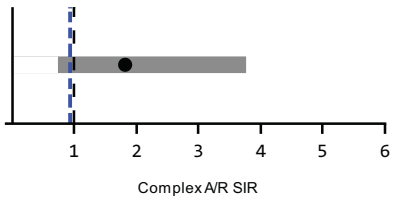
YR	N	OBS	PRED	DD	SIR
2012	2	11	9.1	3956	1.2



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	7	3.8	126	1.8



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	3	0.8	101	N/A**

**Number of predicted infections <1; no SIR calculated

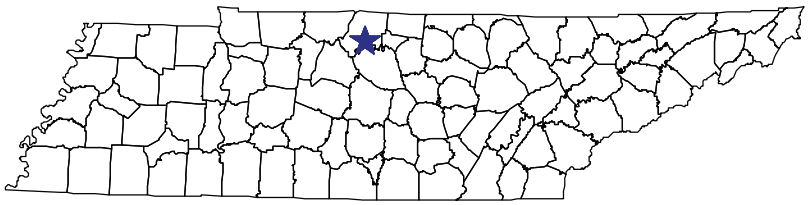
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Sumner Regional Medical Center, Gallatin, Sumner County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	2	1.8	1,245	1.09	(0.13, 3.95)	0.53
CAUTI	Adult/Pediatric ICU	6	4.4	3,546	1.36	(0.50, 2.96)	1.45
SSI	Colon surgery	1	1.7	62	0.60	(0.02, 3.32)	0.94
	Abdominal hysterectomy	2	0.4	48	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

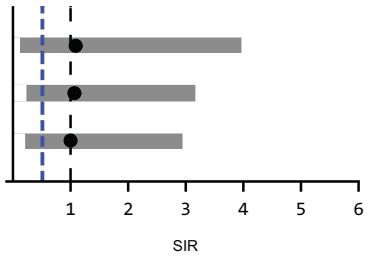
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

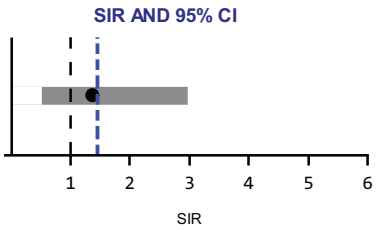
YR	N	OBS	PRED	DD	SIR
2012	1	2	1.8	1245	1.1
2011	1	3	2.8	1895	1.1
2010	1	3	3.0	2028	1.0



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

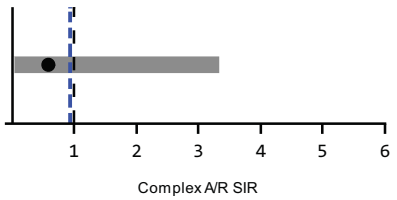
YR	N	OBS	PRED	DD	SIR
2012	1	6	4.4	3546	1.4



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	1	1.7	62	0.6



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	2	0.4	48	N/A**

**Number of predicted infections <1; no SIR calculated

Data reported as of September 27, 2013

YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)

PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1

Not significantly different from NHSN SIR of 1

Significantly higher than NHSN SIR of 1

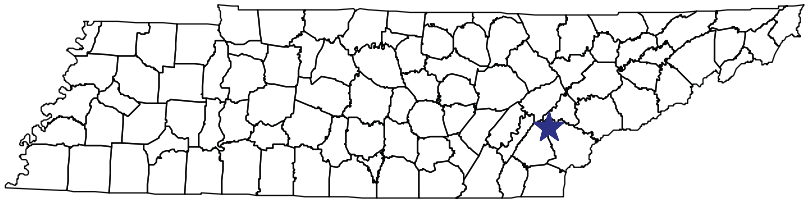
2012 TN SIR

NHSN SIR=1

Sweetwater Hospital Association, Sweetwater, Monroe County

Medical School Affiliation: Graduate teaching

Bed Size Category: 50-99 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.7	358	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	0	1.7	835	0.00	(0.00, 2.19)	1.45
SSI	Colon surgery	0	0.2	10	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.1	24	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

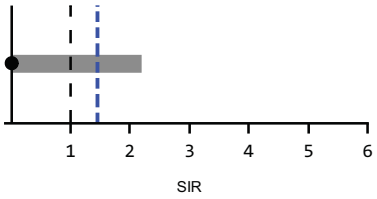
YR	N	OBS	PRED	DD	SIR
2012	1	0	0.7	358	N/A**
2011	1	0	0.9	473	N/A**
2010	1	0	0.8	412	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	1	0	1.7	835	0.0	



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.2	10	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.1	24	N/A**

**Number of predicted infections <1; no SIR calculated

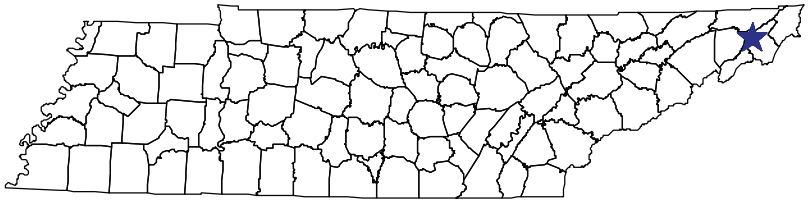
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Sycamore Shoals Hospital, Elizabethton, Carter County

Medical School Affiliation: Graduate teaching

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.8	515	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	0	1.7	1,353	0.00	(0.00, 2.12)	1.45
SSI	Colon surgery	0	1.2	42	0.00	(0.00, 3.08)	0.94
	Abdominal hysterectomy	0	0.5	56	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

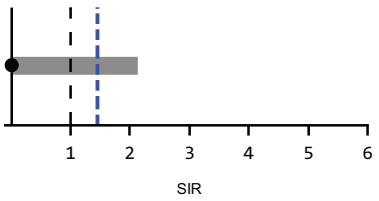
YR	N	OBS	PRED	DD	SIR
2012	1	0	0.8	515	N/A**
2011	1	0	0.5	317	N/A**
2010	1	0	0.7	436	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

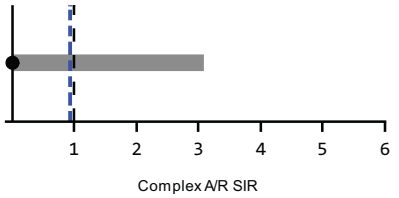
YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	1	0	1.7	1353	0.0	



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR	SIR AND 95% CI
2012	0	1.2	42	0.0	



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.5	56	N/A**

**Number of predicted infections <1; no SIR calculated

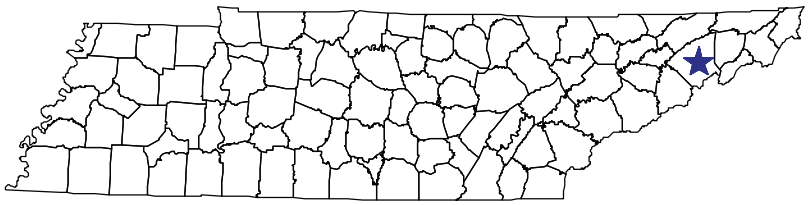
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Takoma Regional Hospital, Greeneville, Greene County

Medical School Affiliation: Graduate teaching

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.2	155	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	0	0.9	720	**N/A**	**N/A**	1.45
SSI	Colon surgery	0	0.6	26	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.2	18	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.2	155	N/A**
2011	1	0	0.3	213	N/A**
2010	1	0	0.4	283	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.9	720	N/A**

**Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.6	26	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.2	18	N/A**

**Number of predicted infections <1; no SIR calculated

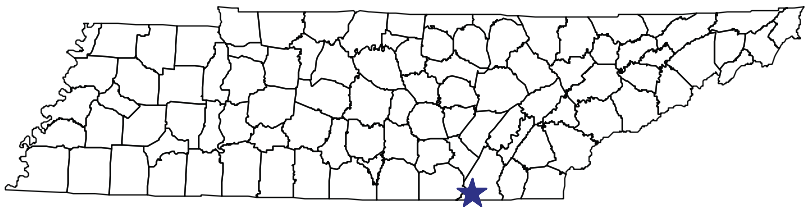
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

TC Thompson Children's Hospital (Erlanger), Chattanooga, Hamilton County

Medical School Affiliation: Major teaching

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	2.5	847	0.40	(0.01, 2.24)	0.53
	Neonatal ICU	2	10.7	4,123	**0.19**	**(0.02, 0.67)**	0.54
CAUTI	Adult/Pediatric ICU	5	1.0	359	**N/A**	**N/A**	1.45

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

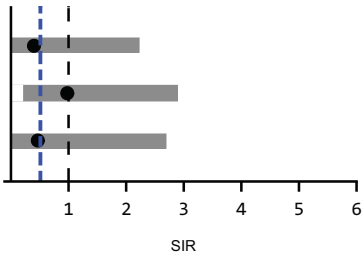
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

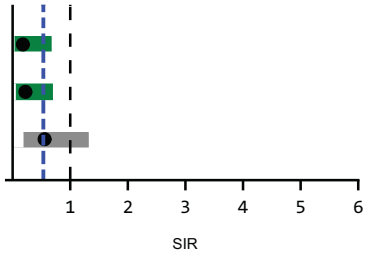
CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	1	2.5	847	0.4
2011	1	3	3.0	1034	1.0
2010	1	1	2.1	706	0.5



CLABSI - Neonatal ICU

YR	N	OBS	PRED	DD	SIR
2012	1	2	11	4123	0.2
2011	1	3	13	4391	0.2
2010	1	5	8.8	3599	0.6



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	1	5	1.0	359	N/A**

**Number of predicted infections <1; no SIR calculated

Data reported as of September 27, 2013

YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)

PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1

Not significantly different from NHSN SIR of 1

Significantly higher than NHSN SIR of 1

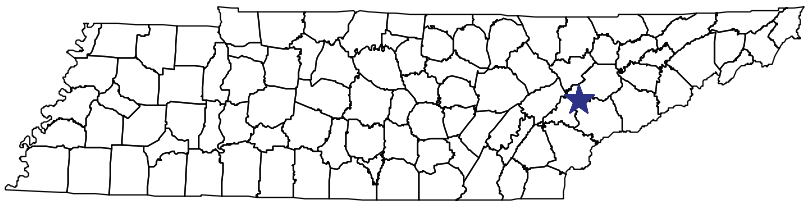
2012 TN SIR

NHSN SIR=1

Turkey Creek Medical Center, Knoxville, Knox County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	1.4	921	0.73	(0.02, 4.04)	0.53
CAUTI	Adult/Pediatric ICU	3	1.6	1,262	1.84	(0.38, 5.39)	1.45
SSI	Colon surgery	6	4.8	146	1.26	(0.46, 2.74)	0.94
	Abdominal hysterectomy	1	0.8	99	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

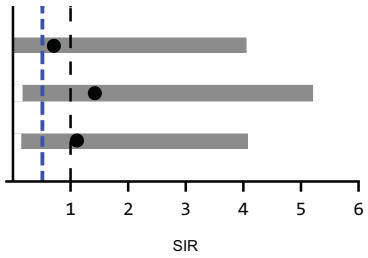
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

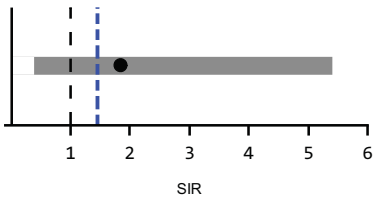
YR	N	OBS	PRED	DD	SIR
2012	1	1	1.4	921	0.7
2011	1	2	1.4	928	1.4
2010	1	2	1.8	1185	1.1



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

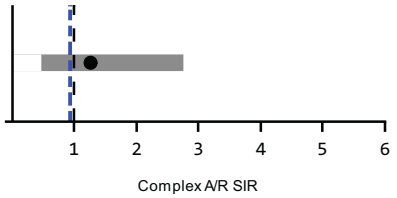
YR	N	OBS	PRED	DD	SIR
2012	1	3	1.6	1262	1.8



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	6	4.8	146	1.3



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	1	0.8	99	N/A**

**Number of predicted infections <1; no SIR calculated

Data reported as of September 27, 2013

YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)

PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1

Not significantly different from NHSN SIR of 1

Significantly higher than NHSN SIR of 1

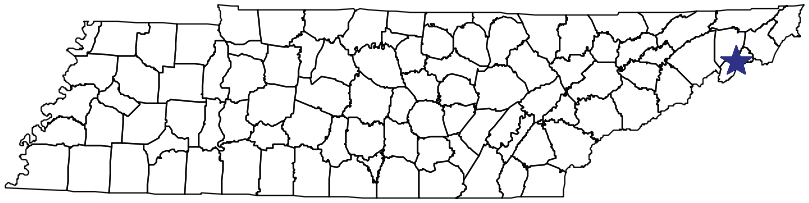
2012 TN SIR

NHSN SIR=1

Unicoi County Memorial Hospital, Erwin, Unicoi County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.0	12	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	1	0.4	320	**N/A**	**N/A**	1.45
SSI	Colon surgery	0	0.0	0	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.0	0	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.0	12	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	1	1	0.4	320	N/A**

**Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.0	0	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.0	0	N/A**

**Number of predicted infections <1; no SIR calculated

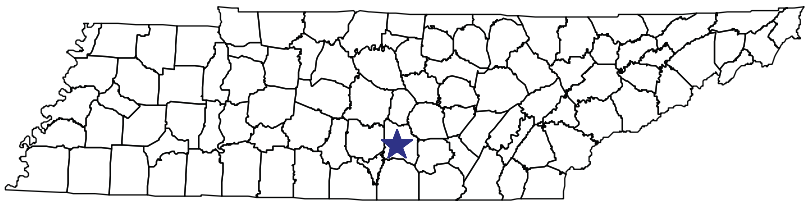
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

United Regional Medical Center, Manchester, Coffee County

Medical School Affiliation: None

Bed Size Category: <50 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.0	0	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.0	1	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

No units in this facility were subject to CLABSI/CAUTI Tennessee reporting requirements in 2012

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.0	0	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.0	1	N/A**

**Number of predicted infections <1; no SIR calculated

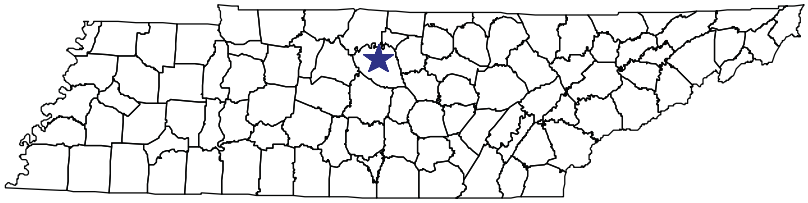
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

University Medical Center- Lebanon, Lebanon, Wilson County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	2.2	1,493	0.45	(0.01, 2.49)	0.53
CAUTI	Adult/Pediatric ICU	3	2.5	1,924	1.21	(0.25, 3.54)	1.45
SSI	Colon surgery	0	1.1	37	0.00	(0.00, 3.48)	0.94
	Abdominal hysterectomy	0	0.8	95	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

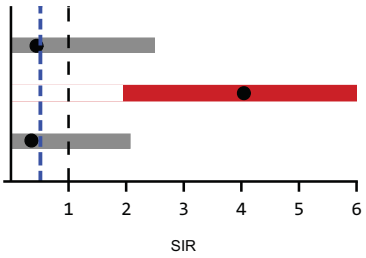
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

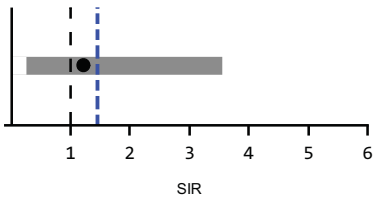
YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	1	1	2.2	1493	0.4	
2011	1	10	2.5	1653	4.0	
2010	1	1	2.7	1800	0.4	



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

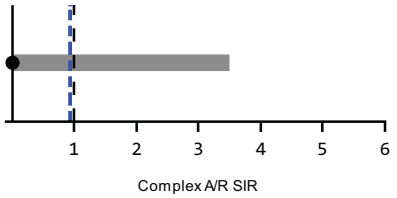
YR	N	OBS	PRED	DD	SIR	SIR AND 95% CI
2012	1	3	2.5	1924	1.2	



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR	SIR AND 95% CI
2012	0	1.1	37	0.0	



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.8	95	N/A**

**Number of predicted infections <1; no SIR calculated

Data reported as of September 27, 2013

YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)

PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1

Not significantly different from NHSN SIR of 1

Significantly higher than NHSN SIR of 1

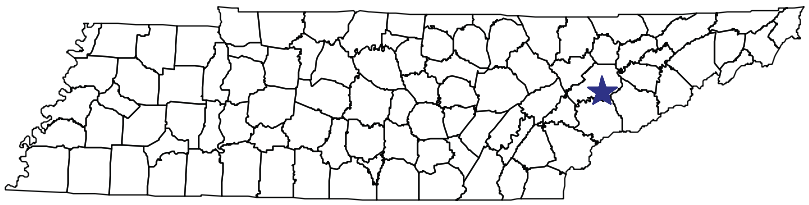
2012 TN SIR

NHSN SIR=1

University of Tennessee Medical Ctr, Knoxville, Knox County

Medical School Affiliation: Major teaching

Bed Size Category: 400+ beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	4	18.0	7,782	0.22	(0.06, 0.57)	0.53
	Neonatal ICU	0	7.1	3,478	0.00	(0.00, 0.52)	0.54
CAUTI	Adult/Pediatric ICU	99	44.2	15,859	2.24	(1.82, 2.73)	1.45
SSI	Colon surgery	22	8.6	269	2.57	(1.61, 3.89)	0.94
	Abdominal hysterectomy	1	2.8	398	0.36	(0.01, 2.00)	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

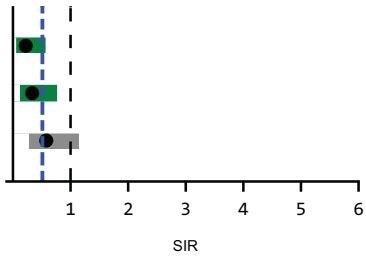
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

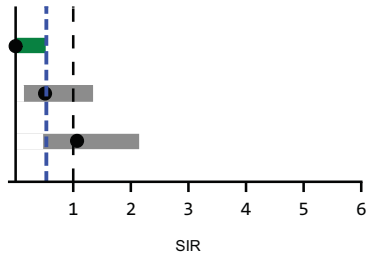
CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	4	4	18	7782	0.2
2011	3	6	17	7314	0.4
2010	4	9	15	6750	0.6



CLABSI - Neonatal ICU

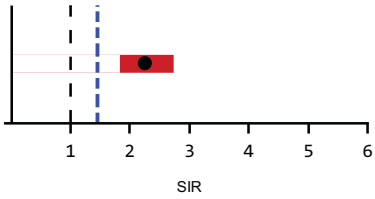
YR	N	OBS	PRED	DD	SIR
2012	1	0	7.1	3478	0.0
2011	1	4	7.6	3577	0.5
2010	1	8	7.4	3315	1.1



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

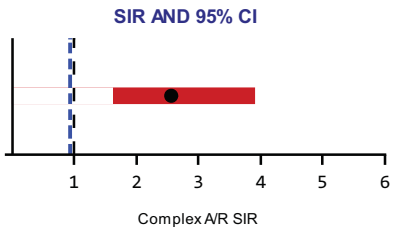
YR	N	OBS	PRED	DD	SIR
2012	5	99	44	15859	2.2



Surgical Site Infections (SSI)

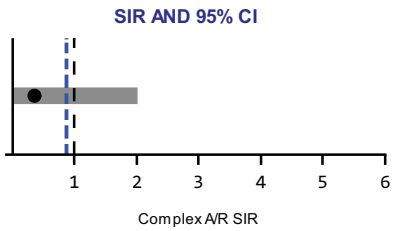
SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	22	8.6	269	2.6



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	1	2.8	398	0.4



Data reported as of September 27, 2013

YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)

PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1

Not significantly different from NHSN SIR of 1

Significantly higher than NHSN SIR of 1

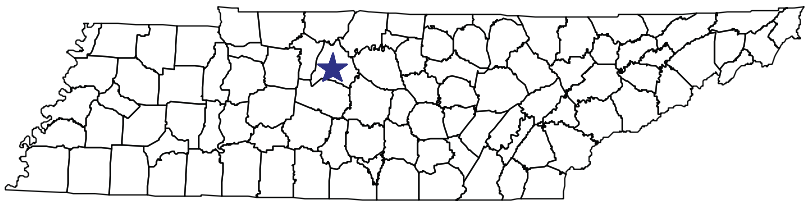
2012 TN SIR

NHSN SIR=1

Vanderbilt Medical Center, Nashville, Davidson County

Medical School Affiliation: Major teaching

Bed Size Category: 400+ beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	12	37.7	17,855	**0.32**	**(0.16, 0.56)**	0.53
CAUTI	Adult/Pediatric ICU	70	70.3	24,786	1.00	(0.78, 1.26)	1.45
SSI	Colon surgery	30	13.9	394	**2.16**	**(1.46, 3.09)**	0.94
	Abdominal hysterectomy	5	3.0	308	1.65	(0.53, 3.84)	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

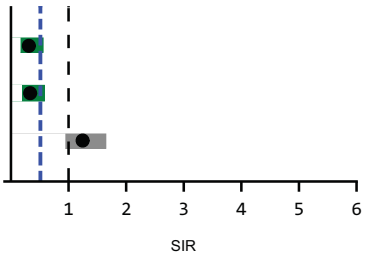
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)

*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

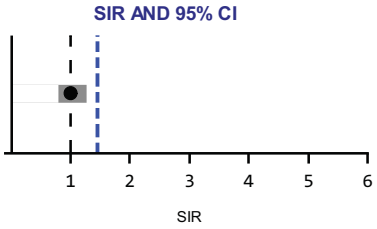
YR	N	OBS	PRED	DD	SIR
2012	4	12	38	17855	0.3
2011	4	14	39	18438	0.4
2010	4	54	43	19757	1.3



Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

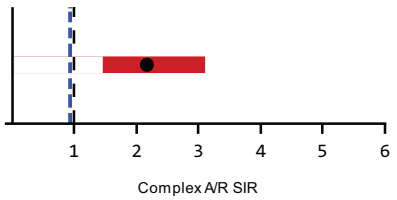
YR	N	OBS	PRED	DD	SIR
2012	6	70	70	24786	1.0



Surgical Site Infections (SSI)

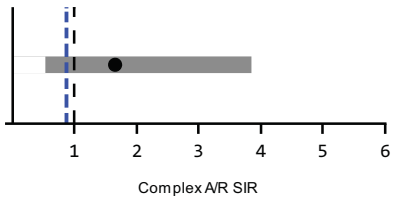
SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	30	14	394	2.2



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	5	3.0	308	1.6



Data reported as of September 27, 2013

YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections

PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data

SIR = standardized infection ratio (observed/predicted number of infections)

DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)

PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1

Not significantly different from NHSN SIR of 1

Significantly higher than NHSN SIR of 1

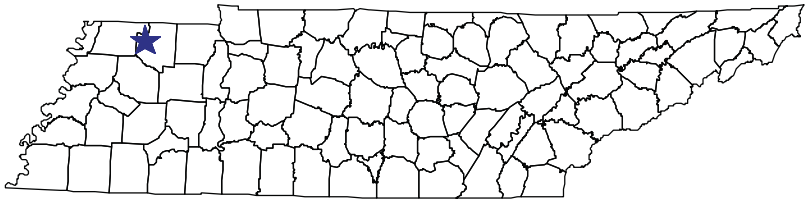
2012 TN SIR

NHSN SIR=1

Volunteer Community Hospital, Martin, Weakley County

Medical School Affiliation: None

Bed Size Category: 50-99 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.3	197	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	0	0.7	554	**N/A**	**N/A**	1.45
SSI	Colon surgery	0	0.2	7	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.1	8	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.3	197	N/A**
2011	1	0	0.3	222	N/A**
2010	1	0	0.3	202	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.7	554	N/A**

**Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.2	7	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.1	8	N/A**

**Number of predicted infections <1; no SIR calculated

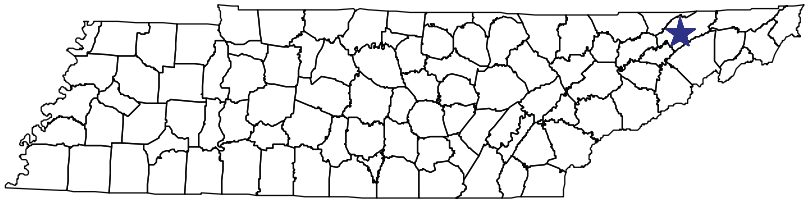
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Wellmont Hawkins County Hospital, Rogersville, Hawkins County

Medical School Affiliation: None

Bed Size Category: <50 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	89	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	1	0.6	483	**N/A**	**N/A**	1.45
SSI	Colon surgery	0	0.1	3	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.0	3	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	0	0.1	89	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	1	1	0.6	483	N/A**

**Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.1	3	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.0	3	N/A**

**Number of predicted infections <1; no SIR calculated

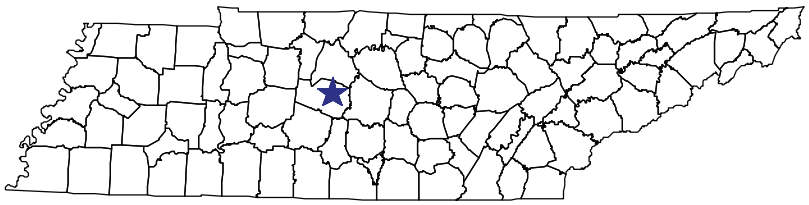
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Williamson Medical Center, Franklin, Williamson County

Medical School Affiliation: None

Bed Size Category: 100-399 beds



Standardized Infection Ratio by Infection Type, 2012

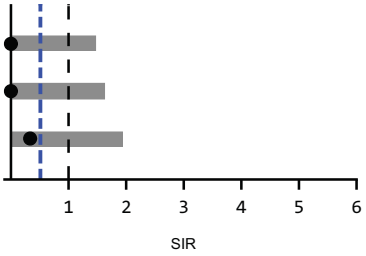
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	2.5	1,312	0.00	(0.00, 1.48)	0.53
	Neonatal ICU	1	0.2	148	**N/A**	**N/A**	0.54
CAUTI	Adult/Pediatric ICU	1	5.3	2,643	0.19	(0.00, 1.04)	1.45
SSI	Colon surgery	0	1.6	62	0.00	(0.00, 2.31)	0.94
	Abdominal hysterectomy	0	0.4	50	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	0	2.5	1312	0.0
2011	1	0	2.3	1188	0.0
2010	1	1	2.9	1511	0.3



CLABSI - Neonatal ICU

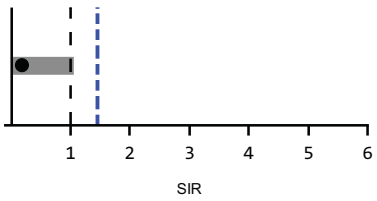
YR	N	OBS	PRED	DD	SIR
2012	1	1	0.2	148	N/A**
2011	1	0	0.2	148	N/A**
2010	1	0	0.2	131	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

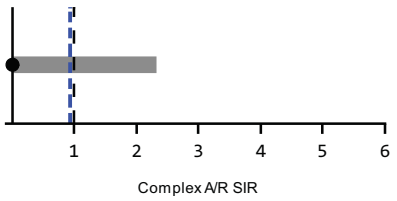
YR	N	OBS	PRED	DD	SIR
2012	1	1	5.3	2643	0.2



Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	1.6	62	0.0



SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.4	50	N/A**

**Number of predicted infections <1; no SIR calculated

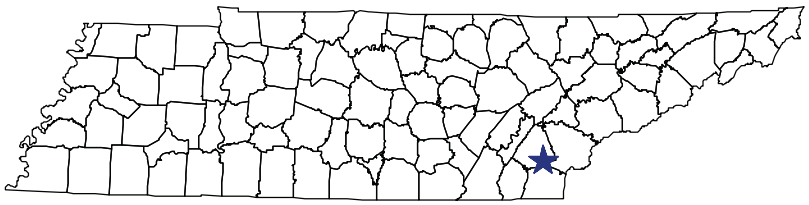
Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1

Woods Memorial Hospital, Etowah, McMinn County

Medical School Affiliation: None

Bed Size Category: <50 beds



Standardized Infection Ratio by Infection Type, 2012

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days/ Procedures Performed	SIR*	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	0.3	151	**N/A**	**N/A**	0.53
CAUTI	Adult/Pediatric ICU	0	1.0	487	**N/A**	**N/A**	1.45
SSI	Colon surgery	0	0.0	0	**N/A**	**N/A**	0.94
	Abdominal hysterectomy	0	0.0	0	**N/A**	**N/A**	0.88

Green highlighting indicates an SIR significantly **LOWER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
Red highlighting indicates an SIR significantly **HIGHER** than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009)
*Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2012	1	1	0.3	151	N/A**

**Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2012	1	0	1.0	487	N/A**

**Number of predicted infections <1; no SIR calculated

Surgical Site Infections (SSI)

SSI - Colon Surgery

YR	OBS	PRED	PROC	SIR
2012	0	0.0	0	N/A**

**Number of predicted infections <1; no SIR calculated

SSI - Abdominal Hysterectomy

YR	OBS	PRED	PROC	SIR
2012	0	0.0	0	N/A**

**Number of predicted infections <1; no SIR calculated

Data reported as of September 27, 2013
YR = reporting year; **N** = number of units reporting (CLABSI/CAUTI); **OBS** = observed number of infections
PRED = statistically 'predicted' number of infections, based on NHSN pooled mean baseline data
SIR = standardized infection ratio (observed/predicted number of infections)
DD = device days: central line days (CLABSI)/urinary catheter days (CAUTI)
PROC = number of procedures performed (SSI); **N/A** = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN SIR of 1
Not significantly different from NHSN SIR of 1
Significantly higher than NHSN SIR of 1
2012 TN SIR
NHSN SIR=1