

Tennessee's Report on Healthcare-Associated Infections for Healthcare Consumers

January 1, 2014 – December 31, 2014

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Cover image: Methicillin-resistant *Staphylococcus aureus* (MRSA) bacteria, U.S. Centers for Disease Control and Prevention - Medical Illustrator, James Archer 2013

Executive Summary

Healthcare-associated infections (HAIs) are a major public health problem. According to the Centers for Disease Control and Prevention (CDC), there were an estimated **722,000 HAIs** and **75,000 HAI-related deaths** in the United States in 2011¹, making HAIs one of the top ten leading causes of death². This report summarizes the performance of Tennessee's acute care hospitals on five different types of HAIs in 2014 and healthcare worker flu vaccination for the 2014/2015 flu season.

Key Findings

In 2014, Tennessee hospitals reported:

- **Fewer** central line-associated bloodstream infections (CLABSI) in adult and pediatric intensive care units (ICUs) and neonatal ICUs than predicted based on the national experience from 2006-2008.
- **More** catheter-associated urinary tract infections (CAUTI) in adult and pediatric ICUs than predicted based on the national experience from 2009.
- **About the same** number of surgical site infections (SSI) following colon procedures and abdominal hysterectomies as predicted based on the national experience from 2006-2008.
- **About the same** number of positive lab results with methicillin-resistant Staphylococcus aureus (MRSA) bacteria found in the bloodstream as predicted based on the national experience from 2010-2011.
- **Fewer** positive lab results with *Clostridium difficile* found in stool (feces) than predicted based on the national experience from 2010-2011.
- On average, 82.8% of the healthcare workers in Tennessee hospitals had documented vaccination for seasonal influenza for the 2014/2015 flu season (October 2014-March 2015).

¹ Magill SS, Edwards JR, Bamberg W, et al. Multistate Point-Prevalence Survey of Health Care–Associated Infections. New England Journal of Medicine 2014;370:1198-208.

² Klevens RM, Edwards JR, Richards CL, Jr., et al. Estimating health care-associated infections and deaths in U.S. hospitals, 2002. Public health reports 2007;122:160-6.

Introduction

What is the purpose of this report?

This report is meant to help patients who need inpatient medical treatment decide whether they should be concerned about healthcare-associated infections (HAIs) at the hospital they may choose. HAIs are infections patients can get while receiving medical treatment in a healthcare facility. Patients should know that these infections are unintended. Ideally, HAIs should never happen, but sometimes they do.

Hospitals track and report HAIs for many reasons. In some cases they are required to do so—either by state public health authorities or by federal health agencies. In most cases, hospitals report numbers (data) about certain HAIs because they want to know how well they are doing in preventing them, and how they compare with other hospitals of similar size and with similar kinds of patients.

It is important for the patients and their family members or advocates to use this information to ask healthcare providers questions before seeking and while receiving medical treatment. Asking the right questions can help patients and family members learn what they can do to prevent infections.

This report looks at five HAIs:

- Central line-associated bloodstream infections (CLABSI) in adult and pediatric intensive care units (ICUs) and neonatal ICUs
- 2. Catheter-associated urinary tract infections (CAUTIs) in adult and pediatric intensive care units (ICUs)
- Surgical site infections (SSI) following colon surgeries and abdominal hysterectomy procedures
- 4. Positive laboratory results with methicillin-resistant Staphylococcus aureus (MRSA) bacteria found in the bloodstream
- 5. Positive laboratory results with *Clostridium difficile* (*C. difficile*) bacteria found in stool (feces)

For more
information
about central
lines, urinary
catheters, and the
HAIs discussed in
this report, see
"Fast Facts"

This report also shares information on healthcare worker vaccination for seasonal influenza (or the "flu"). The Centers for Disease Control and Prevention (CDC) and the Tennessee Department of Health recommend that all personnel who work in a healthcare setting receive the flu vaccine each year to help prevent the spread of flu. See the "Guide to Understanding Healthcare Worker Influenza Vaccination" for more information.

In addition to the five HAIs and healthcare worker vaccination data shown in this report, hospitals are required by law to report additional HAIs to the Tennessee Department of Health. Information about all HAIs hospitals report to the Tennessee Department of Health and HAI data from other types of healthcare facilities can be found in the technical version of this report. More information about Tennessee's mandatory reporting requirements and the technical version of the State HAI Report can be found here: http://tn.gov/health/topic/hai.

These measures do not represent all possible infections, but were selected because they give a good overview of how a hospital is doing in preventing healthcare-associated infections. These infections are largely preventable when healthcare providers use infection prevention steps recommended by the CDC. The information in this report can help you to think about whether a particular hospital is the best place for you to receive care. However, there are other things to

consider when making a decision about where to get your care. You should use this information as a starting point to ask your healthcare provider questions, and use the answers in your decision making. For more things to consider when it comes to choosing a hospital, see "Things to Think About When Choosing a Healthcare Facility".

For more information about what patients can do to prevent HAIs, see "What Patients can do to Prevent Infections"

Methods

How should I read this report?

This report looks at how hospitals in this state performed in terms of infection prevention by displaying how many HAIs they reported during January-December 2014. It shows whether a hospital had more HAIs, fewer HAIs, or about the same number of HAIs compared to the national baseline (national experience) based on previous years of reported data. This comparison takes into account differences between hospitals such as types of patients and procedures, as well as other factors such as the hospital's size and whether it is affiliated with a medical school. See "Reading Guide to the HAI Data Tables" for a guide to understanding the data tables presented in this report.

This report also looks at the percentage of all healthcare workers in each hospital who received the flu vaccine. Higher percentages are better, because this indicates that a greater number of healthcare workers are protected against the flu and less likely to spread it to patients. The report shows whether a hospital had a higher percentage, lower percentage, or similar percentage of vaccinated healthcare workers compared to the Department of Health and Human Services (HHS) Healthy People 2020 goal (90%). See "Reading Guide to the Healthcare Worker Influenza Vaccination Data Tables" for a guide to understanding the healthcare worker flu vaccination data table presented in this report.

What do the Numbers Mean?

It's important to understand that numbers alone won't show how well a hospital is doing in preventing HAIs. This report shows how hospitals performed during a single year (2014), and compares each hospital's performance to the national baseline.

Larger hospitals that see more patients or do more surgeries may have more infections compared to smaller hospitals. Therefore, it is important not only to consider the "interpretation" for each hospital, but to also look at the total number of procedures performed and the total number of infections observed (or identified) in that time period.

If a Hospital Has Zero (0) Infections, What Does That Mean?

The total number of infections listed in the data tables represents a count of the number of infections reported by this hospital. If the number of infections is zero (0), this means that the hospital saw no infections of this type during 2014. It does NOT mean that the hospital failed to

report all of their infections. If a hospital reported zero infections, it may be important to consider the size of the hospital and to look at the total number of procedures performed and the total number of infections that were predicted (also shown in the data tables).

For more information about how the numbers in this report are calculated, see the Methods section of the <u>technical report</u>.

Where do the numbers come from?

Hospitals self-report their HAI data to the CDC and the Tennessee Department of Health using a free, web-based software system called the National Healthcare Safety Network (NHSN). CDC and the Tennessee Department of Health HAI program provide training to hospital staff on the appropriate use of this system and provide guidance on how to track infections in a standard way.

More information about NHSN can be found here: http://www.cdc.gov/nhsn/

Things to consider when looking at the report

A complete list of considerations and limitations of these data can be found in the technical report, available here: http://tn.gov/health/topic/hai

This report covers data from January-December 2014, and the data were downloaded from the National Healthcare Safety Network (NHSN) on September 9th, 2015; any changes made to the data after this date are not reflected in this report. Before reviewing this report, a few clarifications about the data need to be made:

1. The data within this report are preliminary. The Tennessee Department of Health HAI Program has reviewed the quality of the data to identify any potential errors or data entry mistakes, but these data have not been thoroughly reviewed through external validation. Although efforts were made by hospitals and the Tennessee Department of Health HAI Program to ensure that the data were accurate and complete, the data are self-reported and have not been formally "double-checked," or validated.

- 2. **There may be differences in reporting practices among hospitals.** Hospitals with more infection control personnel and resources may be able to identify and report more infections compared to a hospital with fewer infection control resources.
- 3. There may be differences between results published by the Tennessee Department of Health and results published elsewhere (e.g., CMS Centers for Medicare and Medicaid Services Hospital Compare website). Results may differ due to using data from different time periods, different facility types, different patient populations, and/or different methods of analysis.
- 4. **The Tennessee Department of Health chose not to present some rates** for individual hospital units, procedures or hospitals that did not meet a threshold (minimum value) for the reporting period. The minimum threshold numbers are based on CDC recommendations for reporting healthcare-associated infection data.
- 5. The Tennessee Department of Health does not calculate an SIR when the number of predicted infections is less than 1. In these situations, the "How Does This Facility Compare to the National Experience" text says "No conclusion." This does not mean that the hospital failed to report data, or that the hospital did not report all necessary data; it only means that the number of patients, devices (central lines or urinary catheters), and/or procedures that were seen at this hospital during this time period did not meet the established threshold (minimum value) for calculating an SIR. This minimum threshold is based on CDC recommendations. In other words, there is not enough information to make a reliable conclusion about this hospital's performance on this measure.
- 6. Laboratory-Identified Events (LabID Events): Clostridium difficile infections (CDI) and methicillin-resistant Staphylococcus aureus (MRSA) bacteremia (blood infection) LabID events rely on laboratory data. Patients did not have to be ill to have a positive result, and a positive result can be determined without requiring clinical information about the patient. This allows for a much less labor-intensive means to track CDI and MRSA infections. Only those LabID events that occurred more than 3 calendar days after hospital admission are displayed in this report.

Results

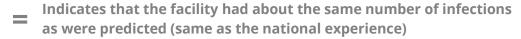
Reading Guide to the HAI Data Tables: An Explanation of Each Variable

Below is a list of all variables shown in the HAI data tables:

- **Title**: The title of the table gives you information about the infection type, time period, geographic location, and facility type included in the table.
- Facility Name: This is the name of the facility. Facilities with multiple campuses will have each campus identified separately.
- **Procedure Type:** This is the specific type of surgery for which the surgical site infection (SSI) data are presented (such as abdominal hysterectomy or colon surgery). If acronyms are used, you can find the full name of the surgery in the legend or in the table's title.
- **Number of Procedures:** This is the total number of surgeries performed by a facility during 2014.
- Observed Infections (or Observed Events): This is the number of infections (or events, for LabID measures) that was reported by the facility.
- Predicted Infections (or Predicted Events): This is a calculated value that reflects the number of infections (or events, for LabID measures) that we have "predicted" to occur in this facility, based on the national experience.
- "How Does This Facility Compare to the National Experience?" Colors and symbols are used to help you quickly understand and interpret the facility's data. This is the "take-home message" about healthcare-associated infections in this facility.



Indicates that the facility had fewer infections than were predicted (better than the national experience)



X Indicates that the facility had more infections than were predicted (worse than the national experience)

No Conclusion: Indicates that this facility reported data, but there was not enough information to make a reliable comparison to the national experience (number of predicted infections was less than 1).

Central Line-Associated Bloodstream Infections (CLABSI)

A *central line* is a tube placed in a large vein to allow access to the bloodstream and provide the patient with important medicine. A *central line-associated bloodstream infection (CLABSI)* can occur when bacteria or other germs travel along a central line and enter the blood. When not put in correctly or kept clean, central lines can become a pathway for germs to enter the body and cause serious infections in the blood.

CLABSI data are presented separately for adult and pediatric intensive care units (ICU) and neonatal ICUs (NICU). Burn and trauma ICUs are excluded from the tables below. Only hospitals with eligible intensive care units during 2014 are included in the following tables. In the following tables, hospitals are compared to the national experience from 2006-2008, national data used by CDC for comparison.

Table 1: Central Line-Associated Bloodstream Infections (CLABSI) in Adult and Pediatric ICUs and Neonatal ICUs in Tennessee Hospitals Overall, 01/01/2014 – 12/31/2014

Location Type	Observed Infections	Predicted Infections	How do Tennessee Hospitals Compare to the National Experience?
Adult/Pediatric ICUs	206	449	★ Better
Neonatal ICUs	32	94	★ Better

Comparison to the National	Number of Hospitals				
Experience	Adult/Pediatric ICUs	Neonatal ICUs			
★ Better	17	5			
= Same	32	8			
× Worse	2	0			
No Conclusion	40	11			

	Legend								
*	Fewer infections (better) than predicted based on the national experience.*	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.			
	*National experience contains data from 2006-2008 for CLABSI.								

Table 2: Central Line-Associated Bloodstream Infection (CLABSI) in Adult and Pediatric Intensive Care Units (ICU) in Tennessee Acute Care Hospitals, 01/01/2014 - 12/31/2014

Facility Name	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Baptist Memorial Hospital - Collierville	0	Less than 1.0	No Conclusion
Baptist Memorial Hospital - Huntingdon	0	Less than 1.0	No Conclusion
Baptist Memorial Hospital - Memphis	36	24.2	× Worse
Baptist Memorial Hospital - Union City	0	Less than 1.0	No Conclusion
Baptist Memorial Hospital - Tipton	0	Less than 1.0	No Conclusion
Baptist Memorial Hospital for Women	0	Less than 1.0	No Conclusion
Blount Memorial Hospital	1	4.0	= Same
Bristol Regional Medical Center	11	8.3	= Same
Centennial Medical Center	9	17.4	★ Better
Claiborne Medical Center	1	Less than 1.0	No Conclusion
Cookeville Regional Medical Center	6	6.2	= Same
Cumberland Medical Center	6	1.9	× Worse
DeKalb Community Hospital	0	Less than 1.0	No Conclusion
Delta Medical Center	0	Less than 1.0	No Conclusion
Dyersburg Regional Medical Center	0	Less than 1.0	No Conclusion
East Tennessee Children's Hospital	1	3.4	= Same
Erlanger Medical Center	6	23.1	★ Better
Fort Loudoun Medical Center	0	Less than 1.0	No Conclusion
Fort Sanders Regional Medical Center	4	8.0	= Same
Franklin Woods Community Hospital	0	Less than 1.0	No Conclusion
Gateway Medical Center	2	2.6	= Same

	Legend							
*	Fewer infections (better) than predicted based on the national experience.*	About the same number of infections as predicted based on the national experience.*	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.			
	*National experience contains data from 2006-2008 for CLABSI.							

Table 2 (cont'd)

Facility Name	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Harton Regional Medical Center	0	1.2	= Same
Hendersonville Medical Center	1	2.4	= Same
Henry County Medical Center	0	Less than 1.0	No Conclusion
Heritage Medical Center	2	Less than 1.0	No Conclusion
Highlands Medical Center	0	Less than 1.0	No Conclusion
Hillside Hospital	0	Less than 1.0	No Conclusion
Holston Valley Medical Center	0	12.7	★ Better
Horizon Medical Center	1	Less than 1.0	No Conclusion
Indian Path Medical Center	0	2.2	= Same
Jackson Madison County General Hospital	19	23.6	= Same
Jefferson Memorial Hospital	0	Less than 1.0	No Conclusion
Jellico Community Hospital	1	Less than 1.0	No Conclusion
Johnson City Medical Center	7	17.0	★ Better
Lafollette Medical Center	1	Less than 1.0	No Conclusion
Lakeway Regional Hospital	0	Less than 1.0	No Conclusion
Laughlin Memorial Hospital	0	Less than 1.0	No Conclusion
LeConte Medical Center	0	1.1	= Same
Lincoln Medical Center	0	Less than 1.0	No Conclusion
Livingston Regional Hospital	0	Less than 1.0	No Conclusion
MCJ Children's Hospital at Vanderbilt	9	24.9	★ Better
Maury Regional Medical Center	1	4.8	= Same

	Legend						
*	Fewer infections (better) than predicted based on the national experience.*	=	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.
	*National experience contains data from 2006-2008 for CLABSI.						

Table 2 (cont'd)

Facility Name	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Memorial Healthcare System	6	9.4	= Same
Memorial Hixson Hospital	0	Less than 1.0	No Conclusion
Methodist Healthcare Germantown	0	8.1	★ Better
Methodist Healthcare LeBonheur	3	12.7	★ Better
Methodist Healthcare North	0	12.6	★ Better
Methodist Healthcare South	0	3.2	★ Better
Methodist Medical Center of Oak Ridge	1	6.0	★ Better
Methodist University Hospital	0	27.3	★ Better
Milan General Hospital	0	Less than 1.0	No Conclusion
Morristown-Hamblen Healthcare System	0	1.1	= Same
Nashville General Hospital at Meharry	5	2.5	= Same
Newport Medical Center	0	Less than 1.0	No Conclusion
North Knoxville Medical Center	2	2.3	= Same
NorthCrest Medical Center	0	Less than 1.0	No Conclusion
Parkridge East Hospital	1	Less than 1.0	No Conclusion
Parkridge Medical Center	6	7.1	= Same
Parkridge West Hospital	0	Less than 1.0	No Conclusion
Parkwest Medical Center- Knoxville	6	8.0	= Same
Physician's Regional Medical Center	3	6.3	= Same
Regional Hospital of Jackson	2	2.5	= Same
Regional One Health	3	6.9	= Same

	Legend						
*	Fewer infections (better) than predicted based on the national experience.*	=	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.
	*National experience contains data from 2006-2008 for CLABSI.						

Table 2 (cont'd)

Facility Name	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
River Park Hospital	0	Less than 1.0	No Conclusion
Roane Medical Center	0	Less than 1.0	No Conclusion
SkyRidge Medical Center	0	6.1	★ Better
Skyline Medical Center	3	6.8	= Same
Southern Hills Medical Center	0	2.9	= Same
Southern TN Reg Health Sys- Lawrenceburg	0	Less than 1.0	No Conclusion
Southern TN Reg Health Sys-Winchester	0	Less than 1.0	No Conclusion
St. Francis Bartlett	0	4.3	★ Better
St. Francis Hospital - Memphis	6	7.1	= Same
St. Thomas Midtown Hospital	1	10.9	★ Better
St. Thomas Rutherford Hospital	3	4.2	= Same
St. Thomas West Hospital	5	10.7	= Same
Starr Regional Medical Center - Athens	1	Less than 1.0	No Conclusion
Starr Regional Medical Center - Etowah	0	Less than 1.0	No Conclusion
StoneCrest Medical Center	1	1.6	= Same
Summit Medical Center	2	5.9	= Same
Sumner Regional Medical Center	0	4.0	★ Better
Sweetwater Hospital Association	0	Less than 1.0	No Conclusion
Sycamore Shoals Hospital	0	Less than 1.0	No Conclusion
TC Thompson Children's Hosp. (Erlanger)	1	2.7	= Same
Takoma Regional Hospital	0	Less than 1.0	No Conclusion

	Legend						
*	Fewer infections (better) than predicted based on the national experience.*	About the same number of infections as predicted based on the national experience.*	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.		
	*National experience contains data from 2006-2008 for CLABSI.						

Table 2 (cont'd)

Facility Name	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Turkey Creek Medical Center	1	1.7	= Same
Unicoi County Memorial Hospital	0	Less than 1.0	No Conclusion
University Medical Center- Lebanon	2	2.2	= Same
University of Tennessee Medical Ctr	0	16.4	★ Better
Vanderbilt Medical Center	17	38.4	★ Better
Volunteer Community Hospital	0	Less than 1.0	No Conclusion
Williamson Medical Center	0	2.2	= Same

Lege	Legend						
*	Fewer infections (better) than predicted based on the national experience.*	=	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.
*National experience contains data from 2006-2008 for CLABSI.							

Table 3: Central Line-Associated Bloodstream Infection (CLABSI) in Neonatal Intensive Care Units (NICU) in Tennessee Acute Care Hospitals, 01/01/2014 - 12/31/2014

Facility Name	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Baptist Memorial Hospital for Women	7	5.5	= Same
Centennial Medical Center	1	10.3	★ Better
East Tennessee Children's Hospital	3	5.8	= Same
Gateway Medical Center	0	Less than 1.0	No Conclusion
Holston Valley Medical Center	0	1.9	= Same
Jackson Madison County General Hospital	1	1.8	= Same
Johnson City Medical Center	3	4.6	= Same
MCJ Children's Hospital at Vanderbilt	4	19.0	★ Better
Maury Regional Medical Center	0	Less than 1.0	No Conclusion
Methodist Healthcare Germantown	0	3.1	★ Better
Methodist Healthcare LeBonheur	2	15.6	★ Better
Methodist Healthcare South	0	Less than 1.0	No Conclusion
Nashville General Hospital at Meharry	0	Less than 1.0	No Conclusion
Parkridge East Hospital	0	Less than 1.0	No Conclusion
Physician's Regional Medical Center	0	Less than 1.0	No Conclusion
Regional One Health	6	7.4	= Same
St. Francis Bartlett	0	Less than 1.0	No Conclusion
St. Francis Hospital - Memphis	0	Less than 1.0	No Conclusion
St. Thomas Midtown Hospital	1	2.3	= Same
St. Thomas Rutherford Hospital	0	Less than 1.0	No Conclusion
Summit Medical Center	0	Less than 1.0	No Conclusion

	Legend						
*	Fewer infections (better) than predicted based on the national experience.*	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.	
	*National experience contains data from 2006-2008 for CLABSI.						

Table 3 (cont'd)

Facility Name	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
TC Thompson Children's Hosp. (Erlanger)	4	7.9	= Same
University of Tennessee Medical Ctr	0	6.3	★ Better
Williamson Medical Center	0	Less than 1.0	No Conclusion

	Legend					
*	Fewer infections (better) than predicted based on the national experience.*	About the same number of infections as predicted based on the national experience.*	More infections (worse) than redicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.	
	*National experience contains data from 2006-2008 for CLABSI.					

Catheter-Associated Urinary Tract Infections (CAUTI)

A *urinary catheter* is a tube placed in the bladder to drain urine. A *catheter-associated urinary tract infection (CAUTI)* can occur when bacteria or other germs travel along a urinary catheter, resulting in an infection in the bladder or the kidney.

Only hospitals with eligible intensive care units during 2014 are included in the following tables. In the following tables, hospitals are compared to the national experience from 2009, national data used by CDC for comparison.

Table 4: Catheter-Associated Urinary Tract Infections (CAUTI) in Adult and Pediatric ICUs in Tennessee Hospitals Overall, 01/01/2014 – 12/31/2014

Location Type	Observed Infections	Predicted Infections	How do Tennessee Hospitals Compare to the National Experience?
Adult/Pediatric ICUs	803	658	× Worse

Comparison to the National Experience	Number of Hospitals
★ Better	2
= Same	60
× Worse	9
No Conclusion	20

	Legend							
*	Fewer infections (better) than predicted based on the national experience.*	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.		
	*National experience contains data from 2009 for CAUTI							

Table 5: Catheter-Associated Urinary Tract Infections (CAUTI) in Adult and Pediatric Intensive Care Units (ICU) Tennessee Acute Care Hospitals, 01/01/2014 - 12/31/2014

Facility Name	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Baptist Memorial Hospital - Collierville	0	1.6	= Same
Baptist Memorial Hospital - Huntingdon	0	Less than 1.0	No Conclusion
Baptist Memorial Hospital - Memphis	47	28.5	× Worse
Baptist Memorial Hospital - Union City	0	Less than 1.0	No Conclusion
Baptist Memorial Hospital - Tipton	0	Less than 1.0	No Conclusion
Baptist Memorial Hospital for Women	0	Less than 1.0	No Conclusion
Blount Memorial Hospital	8	5.3	= Same
Bristol Regional Medical Center	15	15.5	= Same
Centennial Medical Center	16	22.9	= Same
Claiborne Medical Center	1	Less than 1.0	No Conclusion
Cookeville Regional Medical Center	10	9.5	= Same
Cumberland Medical Center	4	3.2	= Same
DeKalb Community Hospital	0	Less than 1.0	No Conclusion
Delta Medical Center	0	Less than 1.0	No Conclusion
Dyersburg Regional Medical Center	0	2.3	= Same
East Tennessee Children's Hospital	4	1.5	= Same
Erlanger Medical Center	80	42.9	× Worse
Fort Loudoun Medical Center	0	1.1	= Same
Fort Sanders Regional Medical Center	21	16.3	= Same
Franklin Woods Community Hospital	0	1.6	= Same
Gateway Medical Center	10	3.2	× Worse

	Legend					
*	Fewer infections (better) than predicted based on the national experience.*	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.
	*National experience contains data from 2009 for CAUTI.					

Table 5 (cont'd)

Facility Name	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Harton Regional Medical Center	0	1.6	= Same
Hendersonville Medical Center	3	2.9	= Same
Henry County Medical Center	0	1.0	= Same
Heritage Medical Center	0	1.6	= Same
Highlands Medical Center	1	Less than 1.0	No Conclusion
Hillside Hospital	0	Less than 1.0	No Conclusion
Holston Valley Medical Center	35	21.8	× Worse
Horizon Medical Center	1	1.5	= Same
Indian Path Medical Center	0	2.6	= Same
Jackson Madison County General Hospital	28	32.9	= Same
Jefferson Memorial Hospital	0	Less than 1.0	No Conclusion
Jellico Community Hospital	0	Less than 1.0	No Conclusion
Johnson City Medical Center	20	20.1	= Same
Lafollette Medical Center	0	1.4	= Same
Lakeway Regional Hospital	1	1.3	= Same
Laughlin Memorial Hospital	1	1.8	= Same
LeConte Medical Center	1	2.2	= Same
Lincoln Medical Center	0	Less than 1.0	No Conclusion
Livingston Regional Hospital	0	Less than 1.0	No Conclusion
MCJ Children's Hospital at Vanderbilt	4	4.6	= Same
Maury Regional Medical Center	4	5.5	= Same

	Legend								
*	Fewer infections (better) than predicted based on the national experience.*	About the same number of infections as predicted based on the national experience.*	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.				
	*National experience contains data from 2009 for CAUTI.								

Table 5 (cont'd)

Facility Name	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Memorial Healthcare System	30	16.9	× Worse
Memorial Hixson Hospital	3	1.1	= Same
Methodist Healthcare Germantown	9	8.8	= Same
Methodist Healthcare LeBonheur	6	5.9	= Same
Methodist Healthcare North	10	8.7	= Same
Methodist Healthcare South	3	3.6	= Same
Methodist Medical Center of Oak Ridge	2	7.6	★ Better
Methodist University Hospital	34	30.7	= Same
Milan General Hospital	0	Less than 1.0	No Conclusion
Morristown-Hamblen Healthcare System	2	3.4	= Same
Nashville General Hospital at Meharry	10	4.9	× Worse
Newport Medical Center	0	1.2	= Same
North Knoxville Medical Center	7	3.5	= Same
NorthCrest Medical Center	0	2.5	= Same
Parkridge East Hospital	1	1.8	= Same
Parkridge Medical Center	9	11.6	= Same
Parkridge West Hospital	0	Less than 1.0	No Conclusion
Parkwest Medical Center- Knoxville	14	9.9	= Same
Physician's Regional Medical Center	19	7.3	× Worse
Regional Hospital of Jackson	1	3.3	= Same
Regional One Health	135	38.5	× Worse

	Legend								
*	Fewer infections (better) than predicted based on the national experience.*	About the same number of infections as predicted based on the national experience.*	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.				
	*National experience contains data from 2009 for CAUTI.								

Table 5 (cont'd)

Facility Name	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
River Park Hospital	0	1.8	= Same
Roane Medical Center	0	1.0	= Same
SkyRidge Medical Center	4	11.0	★ Better
Skyline Medical Center	11	17.8	= Same
Southern Hills Medical Center	2	4.0	= Same
Southern TN Reg Health Sys- Lawrenceburg	0	Less than 1.0	No Conclusion
Southern TN Reg Health Sys-Winchester	2	1.0	= Same
St. Francis Bartlett	5	4.2	= Same
St. Francis Hospital - Memphis	7	10.7	= Same
St. Thomas Midtown Hospital	9	16.1	= Same
St. Thomas Rutherford Hospital	5	5.1	= Same
St. Thomas West Hospital	21	10.9	× Worse
Starr Regional Medical Center - Athens	1	Less than 1.0	No Conclusion
Starr Regional Medical Center - Etowah	0	Less than 1.0	No Conclusion
StoneCrest Medical Center	1	2.5	= Same
Summit Medical Center	7	10.4	= Same
Sumner Regional Medical Center	4	4.5	= Same
Sweetwater Hospital Association	1	1.6	= Same
Sycamore Shoals Hospital	0	1.7	= Same
TC Thompson Children's Hosp. (Erlanger)	0	1.2	= Same
Takoma Regional Hospital	0	1.3	= Same

	Legend								
*	Fewer infections (better) than predicted based on the national experience.*	About the same number of infections as predicted based on the national experience.*	Y predicted based on	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.				
*National experience contains data from 2009 for CAUTI.									

Table 5 (cont'd)

Facility Name	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Turkey Creek Medical Center	5	1.9	= Same
Unicoi County Memorial Hospital	1	Less than 1.0	No Conclusion
University Medical Center- Lebanon	0	2.4	= Same
University of Tennessee Medical Ctr	30	38.7	= Same
Vanderbilt Medical Center	76	64.2	= Same
Volunteer Community Hospital	0	Less than 1.0	No Conclusion
Williamson Medical Center	1	4.6	= Same

				Lege	end			
*	Fewer infections (better) than predicted based on the national experience.*	=	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.	
	*National experience contains data from 2009 for CAUTI.							

Surgical Site Infections (SSI)

A *surgical site infection (SSI)* occurs after surgery in the part of the body where the surgery took place. These infections may involve only the skin or may be more serious and involve tissue under the skin or organs. SSIs sometimes take days or months after surgery to develop. Symptoms may include fever, redness or pain around the surgical site, or drainage of fluid from the wound.

Surgical site infections following colon surgeries and abdominal hysterectomy procedures are included in this report for hospitals that performed at least 20 eligible procedures in 2014. In the following tables, hospitals are compared to the national experience from 2006-2008, national data used by CDC for comparison.

Table 6: Surgical Site Infections (SSI) Following Colon Surgeries and Abdominal Hysterectomy Procedures in Tennessee Hospitals Overall, 01/01/2014 – 12/31/2014

Procedure Type	Number of Procedures		Predicted Infections	How do Tennessee Hospitals Compare to the National Experience?
Colon Surgery	7,491	211	232	= Same
Abdominal Hysterectomy	9,005	52	67	= Same

Comparison to the National	Number of Hospitals				
Experience	Colon Surgery	Abdominal Hysterectomy			
★ Better	6	2			
= Same	43	14			
× Worse	2	1			
No Conclusion	13	34			

			L	egend					
*	Fewer infections (better) than predicted based on the national experience.*	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.			
	*National experience contains data from 2006-2008 for SSI								

Table 7: Surgical Site Infections (SSI) Following Colon Surgeries in Tennessee Hospitals, 01/01/2014 - 12/31/2014

Facility Name	Number of Procedures	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Baptist Memorial Hospital - Memphis	332	12	10.5	= Same
Blount Memorial Hospital	108	0	3.1	★ Better
Bristol Regional Medical Center	168	0	4.7	★ Better
Centennial Medical Center	271	10	7.4	= Same
Cookeville Regional Medical Center	118	0	3.1	★ Better
Cumberland Medical Center	33	0	Less than 1.0	No Conclusion
Dyersburg Regional Medical Center	30	1	Less than 1.0	No Conclusion
East Tennessee Children's Hospital	29	1	Less than 1.0	No Conclusion
Erlanger Medical Center	272	3	9.5	★ Better
Fort Loudoun Medical Center	34	0	Less than 1.0	No Conclusion
Fort Sanders Regional Medical Center	259	7	9.0	= Same
Franklin Woods Community Hospital	86	2	2.4	= Same
Gateway Medical Center	64	0	2.0	= Same
Harton Regional Medical Center	31	0	1.0	= Same
Hendersonville Medical Center	41	1	Less than 1.0	No Conclusion
Henry County Medical Center	27	0	Less than 1.0	No Conclusion
Holston Valley Medical Center	158	6	4.8	= Same
Horizon Medical Center	36	2	1.1	= Same
Indian Path Medical Center	79	0	2.3	= Same
Jackson Madison County General Hospital	327	18	11.0	= Same
Johnson City Medical Center	171	1	5.5	★ Better

					Lege	end		
-	*	Fewer infections (better) than predicted based on the national experience.*	=	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.
	*National experience contains data from 2006-2008 for SSI.							

Table 7 (cont'd)

Facility Name	Number of Procedures	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Laughlin Memorial Hospital	45	2	1.2	= Same
LeConte Medical Center	34	0	Less than 1.0	No Conclusion
Maury Regional Medical Center	157	3	5.1	= Same
Memorial Healthcare System	311	15	10.0	= Same
Memorial Hixson Hospital	47	1	1.2	= Same
Methodist Healthcare Germantown	317	3	9.1	★ Better
Methodist Healthcare LeBonheur	38	0	1.1	= Same
Methodist Healthcare North	62	1	1.7	= Same
Methodist Healthcare South	74	0	1.5	= Same
Methodist Medical Center of Oak Ridge	119	1	4.0	= Same
Methodist University Hospital	224	11	7.9	= Same
Milan General Hospital	36	0	Less than 1.0	No Conclusion
Morristown-Hamblen Healthcare System	44	0	1.1	= Same
Nashville General Hospital at Meharry	72	5	2.1	= Same
North Knoxville Medical Center	86	4	2.1	= Same
NorthCrest Medical Center	37	0	1.1	= Same
Parkridge Medical Center	64	1	2.0	= Same
Parkwest Medical Center- Knoxville	198	7	7.0	= Same
Physician's Regional Medical Center	104	4	3.4	= Same
Regional Hospital of Jackson	51	1	1.5	= Same
Regional One Health	61	1	2.1	= Same

	Legend						
*	Fewer infections (better) than predicted based on the national experience.*	About the same number of infections as predicted based on the national experience.*	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.		
	*National experience contains data from 2006-2008 for SSI.						

Table 7 (cont'd)

Facility Name	Number of Procedures	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Roane Medical Center	47	0	1.4	= Same
SkyRidge Medical Center	58	1	1.8	= Same
Skyline Medical Center	91	5	2.6	= Same
Southern Hills Medical Center	56	4	1.7	= Same
Southern TN Reg Health Sys-Winchester	55	0	2.1	= Same
St. Francis Bartlett	43	0	1.1	= Same
St. Francis Hospital - Memphis	151	5	4.4	= Same
St. Thomas Midtown Hospital	273	6	8.0	= Same
St. Thomas Rutherford Hospital	136	1	4.1	= Same
St. Thomas West Hospital	224	9	7.8	= Same
Starr Regional Medical Center - Athens	30	0	Less than 1.0	No Conclusion
StoneCrest Medical Center	39	2	1.4	= Same
Summit Medical Center	120	2	3.2	= Same
Sumner Regional Medical Center	44	0	1.2	= Same
Sweetwater Hospital Association	21	0	Less than 1.0	No Conclusion
Sycamore Shoals Hospital	24	0	Less than 1.0	No Conclusion
Takoma Regional Hospital	45	1	Less than 1.0	No Conclusion
Turkey Creek Medical Center	148	10	5.0	× Worse
University Medical Center- Lebanon	29	0	Less than 1.0	No Conclusion
University of Tennessee Medical Ctr	312	8	10.7	= Same
Vanderbilt Medical Center	464	28	16.3	× Worse
Williamson Medical Center	52	1	1.4	= Same

	Legend						
*	Fewer infections (better) than predicted based on the national experience.*	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.	
	*National experience contains data from 2006-2008 for SSI.						

Table 8: Surgical Site Infections (SSI) Following Abdominal Hysterectomies in Tennessee Hospitals, 01/01/2014 - 12/31/2014

Facility Name	Number of Procedures	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Baptist Memorial Hospital - Memphis	106	1	Less than 1.0	No Conclusion
Baptist Memorial Hospital - Union City	46	0	Less than 1.0	No Conclusion
Baptist Memorial Hospital - Tipton	21	0	Less than 1.0	No Conclusion
Baptist Memorial Hospital for Women	421	0	3.2	★ Better
Blount Memorial Hospital	57	0	Less than 1.0	No Conclusion
Bristol Regional Medical Center	87	0	Less than 1.0	No Conclusion
Centennial Medical Center	1290	8	6.0	= Same
Erlanger East	175	0	1.3	= Same
Erlanger Medical Center	215	1	2.0	= Same
Fort Sanders Regional Medical Center	125	0	Less than 1.0	No Conclusion
Franklin Woods Community Hospital	198	0	1.4	= Same
Gateway Medical Center	130	2	Less than 1.0	No Conclusion
Harton Regional Medical Center	45	0	Less than 1.0	No Conclusion
Hendersonville Medical Center	52	0	Less than 1.0	No Conclusion
Henry County Medical Center	26	1	Less than 1.0	No Conclusion
Heritage Medical Center	25	0	Less than 1.0	No Conclusion
Highlands Medical Center	43	0	Less than 1.0	No Conclusion
Holston Valley Medical Center	329	2	2.5	= Same
Indian Path Medical Center	47	0	Less than 1.0	No Conclusion
Jackson Madison County General Hospital	330	2	2.1	= Same
Jefferson Memorial Hospital	32	0	Less than 1.0	No Conclusion

	Legend						
*	Fewer infections (better) than predicted based on the national experience.*	= {	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.
*National experience contains data from 2006-2008 for SSI.							

Table 8 (cont'd)

Facility Name	Number of Procedures	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Johnson City Medical Center	80	1	Less than 1.0	No Conclusion
LeConte Medical Center	52	0	Less than 1.0	No Conclusion
Maury Regional Medical Center	112	0	Less than 1.0	No Conclusion
McKenzie Regional Hospital	21	0	Less than 1.0	No Conclusion
Memorial Healthcare System	113	0	1.3	= Same
Methodist Healthcare Germantown	957	2	7.1	★ Better
Methodist Healthcare South	69	0	Less than 1.0	No Conclusion
Methodist Medical Center of Oak Ridge	63	0	Less than 1.0	No Conclusion
Methodist University Hospital	303	2	2.4	= Same
Morristown-Hamblen Healthcare System	69	0	Less than 1.0	No Conclusion
Nashville General Hospital at Meharry	36	1	Less than 1.0	No Conclusion
NorthCrest Medical Center	21	0	Less than 1.0	No Conclusion
Parkridge East Hospital	347	3	2.6	= Same
Parkwest Medical Center- Knoxville	422	1	3.4	= Same
Physician's Regional Medical Center	30	1	Less than 1.0	No Conclusion
Regional One Health	55	0	Less than 1.0	No Conclusion
St. Francis Bartlett	41	0	Less than 1.0	No Conclusion
St. Francis Hospital - Memphis	83	0	Less than 1.0	No Conclusion
St. Thomas Midtown Hospital	482	1	3.6	= Same
St. Thomas Rutherford Hospital	212	5	1.5	× Worse
St. Thomas West Hospital	150	0	1.1	= Same

				Lege	end		
*	Fewer infections (better) than predicted based on the national experience.*	=	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.
*National experience contains data from 2006-2008 for SSI.							

Table 8 (cont'd)

Facility Name	Number of Procedures		Predicted Infections	How Does This Facility Compare to the National Experience?
Starr Regional Medical Center - Athens	32	0	Less than 1.0	No Conclusion
StoneCrest Medical Center	100	1	Less than 1.0	No Conclusion
Summit Medical Center	68	0	Less than 1.0	No Conclusion
Sumner Regional Medical Center	52	0	Less than 1.0	No Conclusion
Turkey Creek Medical Center	72	0	Less than 1.0	No Conclusion
University Medical Center- Lebanon	93	0	Less than 1.0	No Conclusion
University of Tennessee Medical Ctr	404	5	2.6	= Same
Vanderbilt Medical Center	353	5	3.2	= Same
Williamson Medical Center	23	0	Less than 1.0	No Conclusion

			Legend				
,	Fewer infections (better) than predicted based on the national experience.*	About the same number of infections as predicted based on the national experience.*	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.		
	*National experience contains data from 2006-2008 for SSI.						

Methicillin-resistant Staphylococcus aureus (MRSA) Bacteremia Laboratory-Identified (LabID) Events

Methicillin-resistant Staphylococcus aureus (MRSA) infections are caused by bacteria that are resistant to certain types of drugs. MRSA can cause skin or wound infections. Sometimes, MRSA can infect the blood and cause serious illness and even death.

Only bloodstream infections are shown in this report. In the following tables, hospitals are compared to the national experience from 2010-2011, national data used by CDC for comparison.

Table 9: Methicillin-resistant *Staphylococcus aureus* (MRSA) Bacteremia Laboratory-Identified (LabID) Events in Tennessee Hospitals Overall, 01/01/2014 – 12/31/2014

Observed Events	Predicted Events	How do Tennessee Hospitals Compare to the National Experience?
313	308	= Same

Comparison to the National Experience	Number of Hospitals
★ Better	1
= Same	50
× Worse	4
No Conclusion	56

			L	egend					
*	Fewer events (better) than predicted based on the national experience.*	About the same number of events as predicted based on the national experience.*	×	More events (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted events is less than 1, no conclusion can be made.			
	*National experience contains data from 2010-2011 for MRSA Laboratory-Identified Events								

Table 10: Hospital-Onset Methicillin-resistant *Staphylococcus aureus* (MRSA) Bacteremia Laboratory-Identified (LabID) Events in Tennessee Hospital Report, 01/01/2014 - 12/31/2014

Facility Name	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Baptist Memorial Hospital - Collierville	1	Less than 1.0	No Conclusion
Baptist Memorial Hospital - Huntingdon	0	Less than 1.0	No Conclusion
Baptist Memorial Hospital - Memphis	25	19.3	= Same
Baptist Memorial Hospital - Union City	0	Less than 1.0	No Conclusion
Baptist Memorial Hospital - Tipton	0	Less than 1.0	No Conclusion
Baptist Memorial Hospital for Women	1	1.7	= Same
Blount Memorial Hospital	5	2.3	= Same
Bolivar General Hospital	0	Less than 1.0	No Conclusion
Bristol Regional Medical Center	9	3.3	× Worse
Centennial Medical Center	11	18.6	= Same
Claiborne Medical Center	0	Less than 1.0	No Conclusion
Cookeville Regional Medical Center	3	3.1	= Same
Cumberland Medical Center	3	2.0	= Same
Cumberland River Hospital	1	Less than 1.0	No Conclusion
DeKalb Community Hospital	0	Less than 1.0	No Conclusion
Decatur County General Hospital	0	Less than 1.0	No Conclusion
Delta Medical Center	0	1.6	= Same
Dyersburg Regional Medical Center	1	Less than 1.0	No Conclusion
East Tennessee Children's Hospital	1	1.6	= Same
Erlanger East	0	Less than 1.0	No Conclusion
Erlanger Medical Center	18	15.7	= Same

	Legend								
*	Fewer infections (better) than predicted based on the national experience.*	=	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.		
	*National experience contains data from 2010-2011 for MRSA Laboratory-Identified Events.								

Table 10 (cont'd)

Facility Name	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Erlanger North	0	Less than 1.0	No Conclusion
Fort Loudoun Medical Center	1	Less than 1.0	No Conclusion
Fort Sanders Regional Medical Center	8	7.5	= Same
Franklin Woods Community Hospital	1	Less than 1.0	No Conclusion
Gateway Medical Center	4	2.3	= Same
Hardin Medical Center	0	Less than 1.0	No Conclusion
Harton Regional Medical Center	1	1.2	= Same
Haywood Park Community Hospital	0	Less than 1.0	No Conclusion
Henderson County Community Hospital	0	Less than 1.0	No Conclusion
Hendersonville Medical Center	0	Less than 1.0	No Conclusion
Henry County Medical Center	0	Less than 1.0	No Conclusion
Heritage Medical Center	0	Less than 1.0	No Conclusion
Highlands Medical Center	0	Less than 1.0	No Conclusion
Hillside Hospital	0	Less than 1.0	No Conclusion
Holston Valley Medical Center	4	6.5	= Same
Horizon Medical Center	1	1.2	= Same
Houston County Community Hospital	0	Less than 1.0	No Conclusion
Indian Path Medical Center	2	1.1	= Same
Jackson Madison County General Hospital	9	14.6	= Same
Jamestown Regional Medical Center	1	Less than 1.0	No Conclusion
Jefferson Memorial Hospital	0	Less than 1.0	No Conclusion

Legend								
Fewer infections (better) than predicted based on the national experience.* About the same number of infection as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.				

Table 10 (cont'd)

Facility Name	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Jellico Community Hospital	1	Less than 1.0	No Conclusion
Johnson City Medical Center	8	11.0	= Same
Lafollette Medical Center	0	Less than 1.0	No Conclusion
Lakeway Regional Hospital	2	Less than 1.0	No Conclusion
Laughlin Memorial Hospital	1	Less than 1.0	No Conclusion
LeConte Medical Center	0	Less than 1.0	No Conclusion
Lincoln Medical Center	0	Less than 1.0	No Conclusion
Livingston Regional Hospital	0	Less than 1.0	No Conclusion
Maury Regional Medical Center	0	2.6	= Same
McKenzie Regional Hospital	0	Less than 1.0	No Conclusion
McNairy Regional Hospital	0	Less than 1.0	No Conclusion
Memorial Healthcare System	9	8.7	= Same
Memorial Hixson Hospital	1	Less than 1.0	No Conclusion
Methodist Healthcare Fayette	0	Less than 1.0	No Conclusion
Methodist Healthcare Germantown	1	4.6	= Same
Methodist Healthcare LeBonheur	1	3.5	= Same
Methodist Healthcare North	2	5.3	= Same
Methodist Healthcare South	0	1.8	= Same
Methodist Medical Center of Oak Ridge	6	3.3	= Same
Methodist University Hospital	14	23.4	★ Better
Milan General Hospital	0	Less than 1.0	No Conclusion

	Legend								
*	Fewer infections (better) than predicted based on the national experience.*	=	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.		

Table 10 (cont'd)

Facility Name	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Morristown-Hamblen Healthcare System	1	2.7	= Same
Nashville General Hospital at Meharry	1	2.0	= Same
Newport Medical Center	1	Less than 1.0	No Conclusion
North Knoxville Medical Center	5	1.1	× Worse
NorthCrest Medical Center	1	2.0	= Same
Parkridge East Hospital	0	1.1	= Same
Parkridge Medical Center	3	2.2	= Same
Parkridge West Hospital	0	Less than 1.0	No Conclusion
Parkwest Medical Center- Knoxville	4	4.8	= Same
Perry Community Hospital	0	Less than 1.0	No Conclusion
Physician's Regional Medical Center	17	4.8	× Worse
Regional Hospital of Jackson	1	1.1	= Same
Regional One Health	21	5.8	× Worse
River Park Hospital	0	Less than 1.0	No Conclusion
Roane Medical Center	0	Less than 1.0	No Conclusion
SkyRidge Medical Center	2	2.2	= Same
Skyline Medical Center	2	3.7	= Same
Southern Hills Medical Center	2	1.4	= Same
Southern TN Reg Health Sys- Lawrenceburg	0	Less than 1.0	No Conclusion
Southern TN Reg Health Sys-Sewanee	0	Less than 1.0	No Conclusion
Southern TN Reg Health Sys-Winchester	0	1.8	= Same

Fewer infections (better) than predicted based on the national experience.* About the same number of infections on the national experience.* More infections (worse) than predicted based on the national experience.* More infections (worse) than predicted based on the national experience.* More infections (worse) than predicted based on the national experience.* When the number of conclusion is less than 1, no conclusion can be made.		Legend								
	*	(better) than predicted based on the national	=	number of infections as predicted based on the national	×	(worse) than predicted based on the national	_	is less than 1, no conclusion can be		

Table 10 (cont'd)

Facility Name	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
St. Francis Bartlett	0	1.2	= Same
St. Francis Hospital - Memphis	8	6.3	= Same
St. Jude Children's Research Hospital	0	1.0	= Same
St. Thomas Midtown Hospital	4	7.5	= Same
St. Thomas Rutherford Hospital	4	3.5	= Same
St. Thomas West Hospital	13	9.3	= Same
Starr Regional Medical Center - Athens	0	Less than 1.0	No Conclusion
Starr Regional Medical Center - Etowah	1	Less than 1.0	No Conclusion
StoneCrest Medical Center	0	1.3	= Same
Stones River Hospital	0	Less than 1.0	No Conclusion
Summit Medical Center	2	2.7	= Same
Sumner Regional Medical Center	1	2.0	= Same
Sweetwater Hospital Association	1	1.1	= Same
Sycamore Shoals Hospital	0	Less than 1.0	No Conclusion
Takoma Regional Hospital	1	1.1	= Same
The Hospital for Spinal Surgery	0	Less than 1.0	No Conclusion
TrustPoint Hospital	0	Less than 1.0	No Conclusion
Turkey Creek Medical Center	3	Less than 1.0	No Conclusion
Unicoi County Memorial Hospital	2	Less than 1.0	No Conclusion
United Regional Medical Center	0	Less than 1.0	No Conclusion
University Medical Center- Lebanon	2	1.5	= Same

				Lege	end				
*	Fewer infections (better) than predicted based on the national experience.*	=	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.		
	*National experience contains data from 2010-2011 for MRSA Laboratory-Identified Events.								

Table 10 (cont'd)

Facility Name	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
University of Tennessee Medical Ctr	22	16.5	= Same
Vanderbilt Medical Center	27	26.4	= Same
Volunteer Community Hospital	0	Less than 1.0	No Conclusion
Wayne Medical Center	0	Less than 1.0	No Conclusion
Wellmont Hawkins County Hospital	0	Less than 1.0	No Conclusion
Williamson Medical Center	4	1.4	= Same

				Lege	end		
*	Fewer infections (better) than predicted based on the national experience.*	=	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.
	*National experience contains data from 2010-2011 for MRSA Laboratory-Identified Events.						

Clostridium difficile Infection (CDI) Laboratory-Identified (LabID) Events

Clostridium difficile (C. difficile) is a type of bacteria that causes severe diarrhea and can be deadly. *C. difficile* infections usually occur in people who have recently taken antibiotics and have been under medical care.

In the following tables, hospitals are compared to the national experience from 2010-2011, national data used by CDC for comparison

Table 11: *Clostridium difficile* Infection (CDI) Laboratory-Identified (LabID) Events in Tennessee Hospitals Overall, 01/01/2014 – 12/31/2014

Observed Infections	Predicted Infections	How do Tennessee Hospitals Compare to the National Experience?
2,161	2,766	★ Better

Comparison to the National Experience	Number of Hospitals
★ Better	33
= Same	67
× Worse	5
No Conclusion	6

	Legend							
*	Fewer events (better) than predicted based on the national experience.*	About the same number of events as predicted based on the national experience.*	×	More events (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted events is less than 1, no conclusion can be made.		
	*National exper	ience contains data f	rom i	2010-2011 for CDI	Laboratory-Ide	entified Events		

Table 12: Hospital-Onset C. difficile Infection (CDI) Laboratory-Identified (LabID) Events in Tennessee Hospitals, 01/01/2014 - 12/31/2014

Facility Name	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Baptist Memorial Hospital - Collierville	6	8.2	= Same
Baptist Memorial Hospital - Huntingdon	1	1.9	= Same
Baptist Memorial Hospital - Memphis	118	156.9	★ Better
Baptist Memorial Hospital - Union City	2	8.5	★ Better
Baptist Memorial Hospital - Tipton	0	1.4	= Same
Baptist Memorial Hospital for Women	0	9.6	★ Better
Blount Memorial Hospital	62	44.4	× Worse
Bolivar General Hospital	0	Less than 1.0	No Conclusion
Bristol Regional Medical Center	11	38.4	★ Better
Centennial Medical Center	113	154.1	★ Better
Claiborne Medical Center	3	2.6	= Same
Cookeville Regional Medical Center	38	37.1	= Same
Cumberland Medical Center	18	18.3	= Same
Cumberland River Hospital	2	1.8	= Same
DeKalb Community Hospital	0	1.6	= Same
Decatur County General Hospital	1	1.7	= Same
Delta Medical Center	0	21.6	★ Better
Dyersburg Regional Medical Center	2	6.8	★ Better
East Tennessee Children's Hospital	3	11.8	★ Better
Erlanger East	0	3.8	★ Better
Erlanger Medical Center	100	112.6	= Same

	Legend						
*	Fewer infections (better) than predicted based on the national experience.*	About the same number of infections as predicted based on the national experience.*	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.		
	*National experience contains data from 2010-2011 for CDI Laboratory-Identified Events.						

Table 12 (cont'd)

Facility Name	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Erlanger North	0	2.2	= Same
Fort Loudoun Medical Center	2	4.8	= Same
Fort Sanders Regional Medical Center	45	73.2	★ Better
Franklin Woods Community Hospital	8	10.3	= Same
Gateway Medical Center	15	22.2	= Same
Hardin Medical Center	2	3.0	= Same
Harton Regional Medical Center	31	16.1	× Worse
Haywood Park Community Hospital	0	Less than 1.0	No Conclusion
Henderson County Community Hospital	0	Less than 1.0	No Conclusion
Hendersonville Medical Center	12	10.6	= Same
Henry County Medical Center	2	6.6	= Same
Heritage Medical Center	2	3.0	= Same
Highlands Medical Center	1	2.5	= Same
Hillside Hospital	2	2.9	= Same
Holston Valley Medical Center	23	56.9	★ Better
Horizon Medical Center	23	13.2	× Worse
Houston County Community Hospital	0	Less than 1.0	No Conclusion
Indian Path Medical Center	22	22.0	= Same
Jackson Madison County General Hospital	109	119.8	= Same
Jamestown Regional Medical Center	0	3.5	★ Better
Jefferson Memorial Hospital	0	5.3	★ Better

	Legend							
*	Fewer infections (better) than predicted based on the national experience.*	=	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*		No clusion	When the number of predicted infections is less than 1, no conclusion can be made.
	*National experience contains data from 2010-2011 for CDI Laboratory-Identified Events.							d Events.

Table 12 (cont'd)

Facility Name	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Jellico Community Hospital	0	2.8	= Same
Johnson City Medical Center	69	105.1	★ Better
Lafollette Medical Center	1	9.3	★ Better
Lakeway Regional Hospital	10	7.7	= Same
Laughlin Memorial Hospital	0	7.7	★ Better
LeConte Medical Center	16	10.2	= Same
Lincoln Medical Center	2	3.7	= Same
Livingston Regional Hospital	3	8.3	★ Better
Maury Regional Medical Center	48	40.7	= Same
McKenzie Regional Hospital	1	2.2	= Same
McNairy Regional Hospital	1	1.2	= Same
Memorial Healthcare System	85	68.8	= Same
Memorial Hixson Hospital	3	8.5	★ Better
Methodist Healthcare Fayette	0	Less than 1.0	No Conclusion
Methodist Healthcare Germantown	67	60.3	= Same
Methodist Healthcare LeBonheur	12	48.5	★ Better
Methodist Healthcare North	48	48.3	= Same
Methodist Healthcare South	9	18.4	★ Better
Methodist Medical Center of Oak Ridge	50	39.6	= Same
Methodist University Hospital	101	101.0	= Same
Milan General Hospital	0	1.3	= Same

	Legend						
(beto	er infections ter) than licted based on national erience.*	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.	

Table 12 (cont'd)

Facility Name	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Morristown-Hamblen Healthcare System	10	14.6	= Same
Nashville General Hospital at Meharry	4	10.4	★ Better
Newport Medical Center	5	3.8	= Same
North Knoxville Medical Center	12	12.1	= Same
NorthCrest Medical Center	5	8.1	= Same
Parkridge East Hospital	3	13.3	★ Better
Parkridge Medical Center	27	28.7	= Same
Parkridge West Hospital	0	1.9	= Same
Parkwest Medical Center- Knoxville	39	65.4	★ Better
Perry Community Hospital	1	2.4	= Same
Physician's Regional Medical Center	33	57.2	★ Better
Regional Hospital of Jackson	11	12.2	= Same
Regional One Health	38	63.2	★ Better
River Park Hospital	4	6.4	= Same
Roane Medical Center	2	5.7	= Same
SkyRidge Medical Center	19	19.0	= Same
Skyline Medical Center	65	46.9	× Worse
Southern Hills Medical Center	9	16.1	= Same
Southern TN Reg Health Sys- Lawrenceburg	0	3.3	★ Better
Southern TN Reg Health Sys-Sewanee	2	1.0	= Same
Southern TN Reg Health Sys-Winchester	5	12.3	★ Better

				Lege	end			
*	Fewer infections (better) than r predicted based on the national experience.*	=	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*		No clusion	When the number of predicted infections is less than 1, no conclusion can be made.
	'	erien	experience.* ce contains data fron	n 201	'	Labore	Laboratory-l	Laboratory-Identifie

Table 12 (cont'd)

Facility Name	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
St. Francis Bartlett	7	15.5	★ Better
St. Francis Hospital - Memphis	17	56.7	★ Better
St. Jude Children's Research Hospital	30	12.1	× Worse
St. Thomas Midtown Hospital	44	54.3	= Same
St. Thomas Rutherford Hospital	41	44.7	= Same
St. Thomas West Hospital	85	69.4	= Same
Starr Regional Medical Center - Athens	3	4.7	= Same
Starr Regional Medical Center - Etowah	0	1.8	= Same
StoneCrest Medical Center	12	13.9	= Same
Stones River Hospital	0	2.1	= Same
Summit Medical Center	36	36.2	= Same
Sumner Regional Medical Center	27	27.3	= Same
Sweetwater Hospital Association	1	5.2	★ Better
Sycamore Shoals Hospital	4	7.5	= Same
Takoma Regional Hospital	4	6.1	= Same
The Hospital for Spinal Surgery	0	Less than 1.0	No Conclusion
TrustPoint Hospital	4	8.9	= Same
Turkey Creek Medical Center	6	12.4	= Same
Unicoi County Memorial Hospital	0	1.7	= Same
United Regional Medical Center	1	1.8	= Same
University Medical Center- Lebanon	9	15.7	= Same

	Legend	
Fewer infections (better) than predicted based on the national experience.* About the same number of infection as predicted based on the national experience.*	x predicted based on	No When the number of predicted infections is less than 1, no conclusion can be made.

Table 12 (cont'd)

Facility Name	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
University of Tennessee Medical Ctr	59	90.7	★ Better
Vanderbilt Medical Center	160	234.8	★ Better
Volunteer Community Hospital	2	2.2	= Same
Wayne Medical Center	2	1.2	= Same
Wellmont Hawkins County Hospital	0	1.4	= Same
Williamson Medical Center	8	16.6	★ Better

				Lege	end				
*	Fewer infections (better) than predicted based on the national experience.*	=	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.		
	*National experience contains data from 2010-2011 for CDI Laboratory-Identified Events.								



Table 13: Summary of Healthcare-Associated Infections Compared to the National Experience, Tennessee Acute Care Hospitals, 2014

Facility Name	Bloodstream Infections (CLABSI) in Adult/Pediatric ICUs	Bloodstream Infections (CLABSI) in Neonatal ICUs	Urinary Tract Infections (CAUTI) in Adult/Pediatric ICUs	Surgical Site Infections from Colon Surgeries	Surgical Site Infections from Abdominal Hysterectomies	<i>C. difficile</i> Events†	Methicillin- Resistant Staphylococcus aureus (MRSA) Events†
Baptist Memorial Hospital - Collierville	No Conclusion	N/A**	=	No Conclusion	No Conclusion	=	No Conclusion
Baptist Memorial Hospital - Huntingdon	No Conclusion	N/A**	No Conclusion	N/A**	N/A**	=	No Conclusion
Baptist Memorial Hospital - Memphis	×	N/A**	×	=	No Conclusion	*	=
Baptist Memorial Hospital - Tipton	No Conclusion	N/A**	No Conclusion	No Conclusion	No Conclusion	=	No Conclusion
Baptist Memorial Hospital - Union City	No Conclusion	N/A**	No Conclusion	No Conclusion	No Conclusion	*	No Conclusion
Baptist Memorial Hospital for Women	No Conclusion	=	No Conclusion	No Conclusion	*	*	=
Blount Memorial Hospital	=	N/A**	=	*	No Conclusion	×	=
Bolivar General Hospital	N/A**	N/A**	N/A**	N/A**	N/A**	No Conclusion	No Conclusion

^{**}N/A - Facility was not subject to this reporting requirement during 2014

[†] These refer to hospital-onset laboratory-identified events. MRSA events include only those identified in the bloodstream.

				Leg	end				
*	Fewer infections (better) than predicted based on the national experience.*	=	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.		
*	*National experience contains data from 2006 – 2008 for CLARSI and SSL 2009 for CAUTL and 2010-2011 for MRSA and C. difficile Laboratory-Identified Events.								

Facility Name	Bloodstream Infections (CLABSI) in Adult/Pediatric ICUs	Bloodstream Infections (CLABSI) in Neonatal ICUs	Urinary Tract Infections (CAUTI) in Adult/Pediatric ICUs	Surgical Site Infections from Colon Surgeries	Surgical Site Infections from Abdominal Hysterectomies	C. difficile Events†	Methicillin- Resistant Staphylococcus aureus (MRSA) Events†
Bristol Regional Medical Center	=	N/A**	=	*	No Conclusion	*	×
Centennial Medical Center	*	*	=	=	=	*	=
Claiborne Medical Center	No Conclusion	N/A**	No Conclusion	No Conclusion	No Conclusion	=	No Conclusion
Cookeville Regional Medical Center	=	N/A**	=	*	No Conclusion	=	=
Cumberland Medical Center	×	N/A**	=	No Conclusion	No Conclusion	=	=
Cumberland River Hospital	N/A**	N/A**	N/A**	N/A**	N/A**	=	No Conclusion
DeKalb Community Hospital	No Conclusion	N/A**	No Conclusion	No Conclusion	No Conclusion	=	No Conclusion
Decatur County General Hospital	N/A**	N/A**	N/A**	N/A**	N/A**	=	No Conclusion

^{**}N/A - Facility was not subject to this reporting requirement during 2014
† These refer to hospital-onset laboratory-identified events. MRSA events include only those identified in the bloodstream.

				Leg	end				
*	Fewer infections (better) than predicted based on the national experience.*	=	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.		
,	*National experience contains data from 2006 – 2008 for CLABSI and SSI, 2009 for CAUTI, and 2010-2011 for MRSA and C. difficile Laboratory-Identified Events.								

Facility Name	Bloodstream Infections (CLABSI) in Adult/Pediatric ICUs	Bloodstream Infections (CLABSI) in Neonatal ICUs	Urinary Tract Infections (CAUTI) in Adult/Pediatric ICUs	Surgical Site Infections from Colon Surgeries	Surgical Site Infections from Abdominal Hysterectomies	<i>C. difficile</i> Events†	Methicillin- Resistant Staphylococcus aureus (MRSA) Events†
Delta Medical Center	No Conclusion	N/A**	No Conclusion	No Conclusion	No Conclusion	*	=
Dyersburg Regional Medical Center	No Conclusion	N/A**	=	No Conclusion	No Conclusion	*	No Conclusion
East Tennessee Children's Hospital	=	=	=	No Conclusion	No Conclusion	*	=
Erlanger East	N/A**	N/A**	N/A**	No Conclusion	=	*	No Conclusion
Erlanger Medical Center	*	N/A**	×	*	=	=	=
Erlanger North	N/A**	N/A**	N/A**	N/A**	N/A**	=	No Conclusion
Fort Loudoun Medical Center	No Conclusion	N/A**	=	No Conclusion	No Conclusion	=	No Conclusion
Fort Sanders Regional Medical Center	=	N/A**	=	=	No Conclusion	*	=

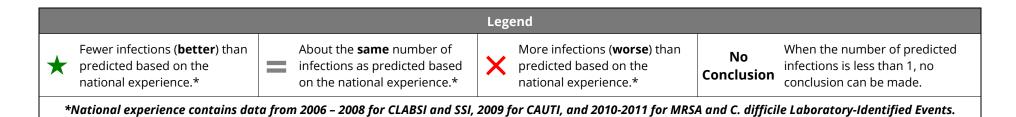
^{**}N/A - Facility was not subject to this reporting requirement during 2014
† These refer to hospital-onset laboratory-identified events. MRSA events include only those identified in the bloodstream.

				£
Fewer infections (better) than predicted based on the national experience.*	About the same number of infections as predicted based on the national experience.*	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.

Facility Name	Bloodstream Infections (CLABSI) in Adult/Pediatric ICUs	Bloodstream Infections (CLABSI) in Neonatal ICUs	Urinary Tract Infections (CAUTI) in Adult/Pediatric ICUs	Surgical Site Infections from Colon Surgeries	Surgical Site Infections from Abdominal Hysterectomies	<i>C. difficile</i> Events†	Methicillin- Resistant Staphylococcus aureus (MRSA) Events†
Franklin Woods Community Hospital	No Conclusion	N/A**	=	=	=	=	No Conclusion
Gateway Medical Center	=	No Conclusion	×	=	No Conclusion	=	=
Hardin Medical Center	N/A**	N/A**	N/A**	No Conclusion	No Conclusion	=	No Conclusion
Harton Regional Medical Center	=	N/A**	=	=	No Conclusion	×	=
Haywood Park Community Hospital	N/A**	N/A**	N/A**	N/A**	N/A**	No Conclusion	No Conclusion
Henderson County Community Hospital	N/A**	N/A**	N/A**	No Conclusion	No Conclusion	No Conclusion	No Conclusion
Hendersonville Medical Center	=	N/A**	=	No Conclusion	No Conclusion	=	No Conclusion

^{**}N/A - Facility was not subject to this reporting requirement during 2014

[†] These refer to hospital-onset laboratory-identified events. MRSA events include only those identified in the bloodstream.



Facility Name	Bloodstream Infections (CLABSI) in Adult/Pediatric ICUs	Bloodstream Infections (CLABSI) in Neonatal ICUs	Urinary Tract Infections (CAUTI) in Adult/Pediatric ICUs	Surgical Site Infections from Colon Surgeries	Surgical Site Infections from Abdominal Hysterectomies	<i>C. difficile</i> Events†	Methicillin- Resistant Staphylococcus aureus (MRSA) Events†
Henry County Medical Center	No Conclusion	N/A**	=	No Conclusion	No Conclusion	=	No Conclusion
Heritage Medical Center	No Conclusion	N/A**	=	No Conclusion	No Conclusion	=	No Conclusion
Highlands Medical Center	No Conclusion	N/A**	No Conclusion	No Conclusion	No Conclusion	=	No Conclusion
Hillside Hospital	No Conclusion	N/A**	No Conclusion	N/A**	N/A**	=	No Conclusion
Holston Valley Medical Center	*	=	×	=	=	*	=
Horizon Medical Center	No Conclusion	N/A**	=	=	No Conclusion	×	=
Houston County Community Hospital	N/A**	N/A**	N/A**	N/A**	N/A**	No Conclusion	No Conclusion
Indian Path Medical Center	=	N/A**	=	=	No Conclusion	=	=

^{**}N/A - Facility was not subject to this reporting requirement during 2014

[†] These refer to hospital-onset laboratory-identified events. MRSA events include only those identified in the bloodstream.

			Legend								
-	Fewer infections (better) than predicted based on the national experience.*	About the same number of infections as predicted based on the national experience.*	More infections (worse) than predicted based on the national experience.*	No Conclusion When the number of predicted infections is less than 1, no conclusion can be made.							
	*National experience contains data from 2006 – 2008 for CLABSI and SSI, 2009 for CAUTI, and 2010-2011 for MRSA and C. difficile Laboratory-Identified Events.										

Facility Name	Bloodstream Infections (CLABSI) in Adult/Pediatric ICUs	Bloodstream Infections (CLABSI) in Neonatal ICUs	Urinary Tract Infections (CAUTI) in Adult/Pediatric ICUs	Surgical Site Infections from Colon Surgeries	Surgical Site Infections from Abdominal Hysterectomies	C. difficile Events†	Methicillin- Resistant Staphylococcus aureus (MRSA) Events†
Jackson Madison County General Hospital	=	=	=	=	=	=	=
Jamestown Regional Medical Center	N/A**	N/A**	N/A**	No Conclusion	No Conclusion	*	No Conclusion
Jefferson Memorial Hospital	No Conclusion	N/A**	No Conclusion	No Conclusion	No Conclusion	*	No Conclusion
Jellico Community Hospital	No Conclusion	N/A**	No Conclusion	No Conclusion	No Conclusion	=	No Conclusion
Johnson City Medical Center	*	=	=	*	No Conclusion	*	=
Lafollette Medical Center	No Conclusion	N/A**	=	No Conclusion	No Conclusion	*	No Conclusion
Lakeway Regional Hospital	No Conclusion	N/A**	=	No Conclusion	No Conclusion	=	No Conclusion
Laughlin Memorial Hospital	No Conclusion	N/A**	=	=	No Conclusion	*	No Conclusion

^{**}N/A - Facility was not subject to this reporting requirement during 2014

[†] These refer to hospital-onset laboratory-identified events. MRSA events include only those identified in the bloodstream.

				Leg	end		
*	Fewer infections (better) than predicted based on the national experience.*	=	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.

^{*}National experience contains data from 2006 – 2008 for CLABSI and SSI, 2009 for CAUTI, and 2010-2011 for MRSA and C. difficile Laboratory-Identified Events.

Facility Name	Bloodstream Infections (CLABSI) in Adult/Pediatric ICUs	Bloodstream Infections (CLABSI) in Neonatal ICUs	Urinary Tract Infections (CAUTI) in Adult/Pediatric ICUs	Surgical Site Infections from Colon Surgeries	Surgical Site Infections from Abdominal Hysterectomies	C. difficile Events†	Methicillin- Resistant Staphylococcus aureus (MRSA) Events†
LeConte Medical Center	=	N/A**	=	No Conclusion	No Conclusion	=	No Conclusion
Lincoln Medical Center	No Conclusion	N/A**	No Conclusion	No Conclusion	No Conclusion	=	No Conclusion
Livingston Regional Hospital	No Conclusion	N/A**	No Conclusion	No Conclusion	No Conclusion	*	No Conclusion
MCJ Children's Hospital at Vanderbilt	*	*	=	N/A**	N/A**	N/A**	N/A**
Maury Regional Medical Center	=	No Conclusion	=	=	No Conclusion	=	=
McKenzie Regional Hospital	N/A**	N/A**	N/A**	No Conclusion	No Conclusion	=	No Conclusion
McNairy Regional Hospital	N/A**	N/A**	N/A**	No Conclusion	No Conclusion	=	No Conclusion
Memorial Healthcare System	=	N/A**	×	=	=	=	=

^{**}N/A - Facility was not subject to this reporting requirement during 2014

[†] These refer to hospital-onset laboratory-identified events. MRSA events include only those identified in the bloodstream.

				Leg	end						
*	Fewer infections (better) than predicted based on the national experience.*	=	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.				
k	*National experience contains data from 2006 – 2008 for CLABSI and SSL 2009 for CAUTL and 2010-2011 for MRSA and C. difficile Laboratory-Identified Events.										

Facility Name	Bloodstream Infections (CLABSI) in Adult/Pediatric ICUs	Bloodstream Infections (CLABSI) in Neonatal ICUs	Urinary Tract Infections (CAUTI) in Adult/Pediatric ICUs	Surgical Site Infections from Colon Surgeries	Surgical Site Infections from Abdominal Hysterectomies	<i>C. difficile</i> Events†	Methicillin- Resistant Staphylococcus aureus (MRSA) Events†
Memorial Hixson Hospital	No Conclusion	N/A**	=	=	No Conclusion	*	No Conclusion
Methodist Healthcare Fayette	N/A**	N/A**	N/A**	N/A**	N/A**	No Conclusion	No Conclusion
Methodist Healthcare Germantown	*	*	=	*	*	=	=
Methodist Healthcare LeBonheur	*	*	=	=	No Conclusion	*	=
Methodist Healthcare North	*	N/A**	=	=	No Conclusion	=	=
Methodist Healthcare South	*	No Conclusion	=	=	No Conclusion	*	=
Methodist Medical Center of Oak Ridge	*	N/A**	*	=	No Conclusion	=	=
Methodist University Hospital	*	N/A**	=	=	=	=	*

^{**}N/A - Facility was not subject to this reporting requirement during 2014

[†] These refer to hospital-onset laboratory-identified events. MRSA events include only those identified in the bloodstream.

				Leg	end						
*	Fewer infections (better) than predicted based on the national experience.*	=	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.				
,	*National experience contains data from 2006 – 2008 for CLABSI and SSI. 2009 for CAUTI, and 2010-2011 for MRSA and C. difficile Laboratory-Identified Events.										

Facility Name	Bloodstream Infections (CLABSI) in Adult/Pediatric ICUs	Bloodstream Infections (CLABSI) in Neonatal ICUs	Urinary Tract Infections (CAUTI) in Adult/Pediatric ICUs	Surgical Site Infections from Colon Surgeries	Surgical Site Infections from Abdominal Hysterectomies	C. difficile Events†	Methicillin- Resistant Staphylococcus aureus (MRSA) Events†
Milan General Hospital	No Conclusion	N/A**	No Conclusion	No Conclusion	No Conclusion	=	No Conclusion
Morristown-Hamblen Healthcare System	=	N/A**	=	=	No Conclusion	=	=
Nashville General Hospital at Meharry	=	No Conclusion	×	=	No Conclusion	*	=
Newport Medical Center	No Conclusion	N/A**	=	No Conclusion	No Conclusion	=	No Conclusion
North Knoxville Medical Center	=	N/A**	=	=	No Conclusion	=	×
NorthCrest Medical Center	No Conclusion	N/A**	=	=	No Conclusion	=	=
Parkridge East Hospital	No Conclusion	No Conclusion	=	No Conclusion	=	*	=
Parkridge Medical Center	=	N/A**	=	=	No Conclusion	=	=

^{**}N/A - Facility was not subject to this reporting requirement during 2014
† These refer to hospital-onset laboratory-identified events. MRSA events include only those identified in the bloodstream.

				Leg	end						
*	Fewer infections (better) than predicted based on the national experience.*	=	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.				
,	*National experience contains data from 2006 – 2008 for CLABSI and SSL 2009 for CAUTL and 2010-2011 for MRSA and C. difficile Laboratory-Identified Events.										

Facility Name	Bloodstream Infections (CLABSI) in Adult/Pediatric ICUs	Bloodstream Infections (CLABSI) in Neonatal ICUs	Urinary Tract Infections (CAUTI) in Adult/Pediatric ICUs	Surgical Site Infections from Colon Surgeries	Surgical Site Infections from Abdominal Hysterectomies	C. difficile Events†	Methicillin- Resistant Staphylococcus aureus (MRSA) Events†
Parkridge West Hospital	No Conclusion	N/A**	No Conclusion	No Conclusion	No Conclusion	=	No Conclusion
Parkwest Medical Center- Knoxville	=	N/A**	=	=	=	*	=
Perry Community Hospital	N/A**	N/A**	N/A**	N/A**	N/A**	=	No Conclusion
Physician's Regional Medical Center	=	No Conclusion	×	=	No Conclusion	*	×
Regional Hospital of Jackson	=	N/A**	=	=	No Conclusion	=	=
Regional One Health	=	=	×	=	No Conclusion	*	×
River Park Hospital	No Conclusion	N/A**	=	No Conclusion	No Conclusion	=	No Conclusion
Roane Medical Center	No Conclusion	N/A**	=	=	No Conclusion	=	No Conclusion

^{**}N/A - Facility was not subject to this reporting requirement during 2014
† These refer to hospital-onset laboratory-identified events. MRSA events include only those identified in the bloodstream.

				Leg	end						
*	Fewer infections (better) than predicted based on the national experience.*		About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.				
*	*National experience contains data from 2006 – 2008 for CLARSI and SSL 2009 for CAUTL and 2010-2011 for MRSA and C. difficile Laboratory-Identified Events										

Facility Name	Bloodstream Infections (CLABSI) in Adult/Pediatric ICUs	Bloodstream Infections (CLABSI) in Neonatal ICUs	Urinary Tract Infections (CAUTI) in Adult/Pediatric ICUs	Surgical Site Infections from Colon Surgeries	Surgical Site Infections from Abdominal Hysterectomies	C. difficile Events†	Methicillin- Resistant Staphylococcus aureus (MRSA) Events†
SkyRidge Medical Center	*	N/A**	*	=	No Conclusion	=	=
Skyline Medical Center	=	N/A**	=	=	No Conclusion	×	=
Southern Hills Medical Center	=	N/A**	=	=	No Conclusion	=	=
Southern TN Reg Health Sys-Lawrenceburg	No Conclusion	N/A**	No Conclusion	No Conclusion	No Conclusion	*	No Conclusion
Southern TN Reg Health Sys-Sewanee	N/A**	N/A**	N/A**	N/A**	N/A**	=	No Conclusion
Southern TN Reg Health Sys-Winchester	No Conclusion	N/A**	=	=	No Conclusion	*	=
St. Francis Bartlett	*	No Conclusion	=	=	No Conclusion	*	=
St. Francis Hospital - Memphis	=	No Conclusion	=	=	No Conclusion	*	=

^{**}N/A - Facility was not subject to this reporting requirement during 2014

[†] These refer to hospital-onset laboratory-identified events. MRSA events include only those identified in the bloodstream.

				Leg	end			
*	Fewer infections (better) than predicted based on the national experience.*	=	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.	
*	*National experience contains data from 2006 – 2008 for CLABSI and SSI. 2009 for CAUTI, and 2010-2011 for MRSA and C. difficile Laboratory-Identified Events.							

Facility Name	Bloodstream Infections (CLABSI) in Adult/Pediatric ICUs	Bloodstream Infections (CLABSI) in Neonatal ICUs	Urinary Tract Infections (CAUTI) in Adult/Pediatric ICUs	Surgical Site Infections from Colon Surgeries	Surgical Site Infections from Abdominal Hysterectomies	C. difficile Events†	Methicillin- Resistant Staphylococcus aureus (MRSA) Events†
St. Jude Children's Research Hospital	No Conclusion	N/A**	No Conclusion	No Conclusion	No Conclusion	×	=
St. Thomas Midtown Hospital	*	=	=	=	=	=	=
St. Thomas Rutherford Hospital	=	No Conclusion	=	=	×	=	=
St. Thomas West Hospital	=	N/A**	×	=	=	=	=
Starr Regional Medical Center - Athens	No Conclusion	N/A**	No Conclusion	No Conclusion	No Conclusion	=	No Conclusion
Starr Regional Medical Center - Etowah	No Conclusion	N/A**	No Conclusion	No Conclusion	No Conclusion	=	No Conclusion
StoneCrest Medical Center	=	N/A**	=	=	No Conclusion	=	=
Stones River Hospital	N/A**	N/A**	N/A**	N/A**	N/A**	=	No Conclusion

^{**}N/A - Facility was not subject to this reporting requirement during 2014
† These refer to hospital-onset laboratory-identified events. MRSA events include only those identified in the bloodstream.

				Leg	end			
*	Fewer infections (better) than predicted based on the national experience.*		About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.	
*	*National experience contains data from 2006 – 2008 for CLARSL and SSL 2009 for CAUTL and 2010-2011 for MRSA and C. difficile Laboratory-Identified Events							

Facility Name	Bloodstream Infections (CLABSI) in Adult/Pediatric ICUs	Bloodstream Infections (CLABSI) in Neonatal ICUs	Urinary Tract Infections (CAUTI) in Adult/Pediatric ICUs	Surgical Site Infections from Colon Surgeries	Surgical Site Infections from Abdominal Hysterectomies	<i>C. difficile</i> Events†	Methicillin- Resistant Staphylococcus aureus (MRSA) Events†
Summit Medical Center	=	No Conclusion	=	=	No Conclusion	=	=
Sumner Regional Medical Center	*	N/A**	=	=	No Conclusion	=	=
Sweetwater Hospital Association	No Conclusion	N/A**	=	No Conclusion	No Conclusion	*	=
Sycamore Shoals Hospital	No Conclusion	N/A**	=	No Conclusion	No Conclusion	=	No Conclusion
TC Thompson Children's Hosp. (Erlanger)	=	=	=	N/A**	N/A**	N/A**	N/A**
Takoma Regional Hospital	No Conclusion	N/A**	=	No Conclusion	No Conclusion	=	=
The Hospital for Spinal Surgery	N/A**	N/A**	N/A**	N/A**	N/A**	No Conclusion	No Conclusion
TrustPoint Hospital	N/A**	N/A**	N/A**	N/A**	N/A**	=	No Conclusion

^{**}N/A - Facility was not subject to this reporting requirement during 2014

[†] These refer to hospital-onset laboratory-identified events. MRSA events include only those identified in the bloodstream.

				Leg	end			
*	Fewer infections (better) than predicted based on the national experience.*	=	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.	
k	*National experience contains data from 2006 – 2008 for CLABSI and SSI. 2009 for CAUTI, and 2010-2011 for MRSA and C. difficile Laboratory-Identified Events.							

Bloodstream Infections (CLABSI) in Adult/Pediatric ICUs	Bloodstream Infections (CLABSI) in Neonatal ICUs	Urinary Tract Infections (CAUTI) in Adult/Pediatric ICUs	Surgical Site Infections from Colon Surgeries	Surgical Site Infections from Abdominal Hysterectomies	C. difficile Events†	Methicillin- Resistant Staphylococcus aureus (MRSA) Events†
=	N/A**	=	×	No Conclusion	=	No Conclusion
No Conclusion	N/A**	No Conclusion	No Conclusion	No Conclusion	=	No Conclusion
N/A**	N/A**	N/A**	No Conclusion	No Conclusion	=	No Conclusion
=	N/A**	=	No Conclusion	No Conclusion	=	=
*	*	=	=	=	*	=
*	N/A**	=	×	=	*	=
No Conclusion	N/A**	No Conclusion	No Conclusion	No Conclusion	=	No Conclusion
N/A**	N/A**	N/A**	N/A**	N/A**	=	No Conclusion
	Infections (CLABSI) in Adult/Pediatric ICUs No Conclusion N/A** No Conclusion N/A**	Infections (CLABSI) in Adult/Pediatric ICUs N/A** No Conclusion N/A** N/A** N/A** N/A** N/A** N/A** N/A** N/A**	Infections (CLABSI) in Adult/Pediatric ICUs Bloodstream Infections (CAUTI) in Adult/Pediatric ICUs ■ N/A** ■ No Conclusion N/A** No Conclusion N/A** N/A** N/A** ■ N/A** ■ N/A** ■ N/A** ■ N/A** ■ N/A** ■ N/A** No Conclusion N/A** No Conclusion	Infections (CLABSI) in Adult/Pediatric ICUs Bloodstream Infections (CAUTI) in Adult/Pediatric ICUs Surgical Site Infections (CAUTI) in Adult/Pediatric ICUs ■ N/A** ■ X No Conclusion N/A** No Conclusion No Conclusion N/A** N/A** No Conclusion ■ N/A** ■ No Conclusion ★ ★ ■ ■ N/A** N/A** No Conclusion N/A** No Conclusion No Conclusion N/A** N/A** No Conclusion N/A** N/A** N/A**	Infections (CLABSI) in Adult/Pediatric ICUs Bloodstream Infections (CAUTI) in Adult/Pediatric ICUs Surgical Site Infections From Abdominal Hysterectomies = N/A** = X No Conclusion No Conclusion No Conclusion N/A** No Conclusion No Conclusion No Conclusion N/A** N/A** No Conclusion No Conclusion N/A** = No Conclusion No Conclusion N/A** = X = N/A** No Conclusion No Conclusion No Conclusion N/A** No Conclusion No Conclusion No Conclusion N/A** No Conclusion No Conclusion No Conclusion N/A** N/A** N/A** N/A**	Infections (CLABSI) in Adult/Pediatric ICUs Bloodstream Infections (CAUTI) in Adult/Pediatric ICUs Surgical Site Infections from Colon Surgeries Surgical Site Infections from Abdominal Hysterectomies C. difficile Events¹ ■ N/A** ■ X No Conclusion No Conclusion ■ No Conclusion N/A** No Conclusion No Conclusion ■ No Conclusion ■ N/A** N/A** No Conclusion No Conclusion ■ ★ N/A** ■ No Conclusion No Conclusion ■ N/A** ■ ■ ★ No Conclusion No Conclusion No Conclusion ■ N/A** No Conclusion No Conclusion ■ N/A** No Conclusion No Conclusion ■ N/A** N/A** No Conclusion No Conclusion ■

			Leg	end		
*	Fewer infections (better) than predicted based on the national experience.*	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.

† These refer to hospital-onset laboratory-identified events. MRSA events include only those identified in the bloodstream.

Facility Name	Bloodstream Infections (CLABSI) in Adult/Pediatric ICUs	Bloodstream Infections (CLABSI) in Neonatal ICUs	Urinary Tract Infections (CAUTI) in Adult/Pediatric ICUs	Surgical Site Infections from Colon Surgeries	Surgical Site Infections from Abdominal Hysterectomies	<i>C. difficile</i> Events†	Methicillin- Resistant Staphylococcus aureus (MRSA) Events†
Wellmont Hawkins County Hospital	No Conclusion	N/A**	No Conclusion	No Conclusion	No Conclusion	=	No Conclusion
Williamson Medical Center	=	No Conclusion	=	=	No Conclusion	*	=

^{**}N/A - Facility was not subject to this reporting requirement during 2014
† These refer to hospital-onset laboratory-identified events. MRSA events include only those identified in the bloodstream.

				Leg	end			
*	Fewer infections (better) than predicted based on the national experience.*	=	About the same number of infections as predicted based on the national experience.*	×	More infections (worse) than predicted based on the national experience.*	No Conclusion	When the number of predicted infections is less than 1, no conclusion can be made.	
,	*National experience contains data from 2006 – 2008 for CLABSI and SSI. 2009 for CAUTI, and 2010-2011 for MRSA and C. difficile Laboratory-Identified Events.							

Reading Guide to the Healthcare Worker Influenza Vaccination Data Tables

- **Title**: The title of the table gives you information about the time period (flu season), geographic location, and facility type(s) included in the table.
- **Facility Name:** This is the name of the facility. Facilities with multiple campuses will have each campus identified separately.
- Percentage of Healthcare Workers Vaccinated: This is calculated as a percentage
 (how many per hundred) of all healthcare workers in the hospital who received the flu
 vaccine. This includes all facility employees, licensed independent practitioners, adult
 students, and adult volunteers regardless of full time/part time status, clinical
 responsibility or patient contact.
- "How Does This Facility Compare to the Healthy People 2020 Goal"?
 - 1. Vaccination is higher (**better**) than the Healthy People 2020 Goal: ★ **better**
 - 2. Vaccination is **similar** to the Healthy People 2020 Goal: = **same**
 - 3. Vaccination is lower (worse) than the Healthy People 2020 Goal: X worse

Healthcare Worker Influenza Vaccination

Influenza, or "the flu," is a mild to severe respiratory illness caused by the influenza virus. It is a contagious illness, meaning that it can easily spread from person to person. If healthcare workers (also known as healthcare personnel) become infected with the flu, they can spread this illness to their coworkers and patients. Some patients in a hospital are at high risk for complications from the flu, such as the elderly, very young, or those with severe chronic illnesses. Extra care should be taken to prevent the spread of the flu among healthcare workers and patients.

The best way to prevent the flu is by getting vaccinated. The Centers for Disease Control and Prevention (CDC) recommends that all healthcare personnel who work in a healthcare setting receive the flu vaccine each year to help prevent the spread of flu within the workplace. Healthcare personnel in the following tables include all facility employees, licensed independent practitioners, adult students/trainees, and volunteers regardless of full time/part time status, clinical responsibility or patient contact. Contracted personnel who don't otherwise fit into the categories described are not included in this report.

Table 14: Tennessee Hospital Healthcare Worker Influenza Vaccination Percentages, 2014/2015 Flu Season*

Percentage of Healthcare Workers	How do Tennessee Hospitals Compare to the
Vaccinated	Healthy People 2020 Goal of 90%?
82.8%	× Worse

Comparison to the Healthy People 2020 Goal of 90%	Number of Hospitals
★ Better	33
= Same	11
× Worse	66

		Legend	
*	Vaccination is higher (better) than the Healthy People 2020 Goal (90%)	Vaccination is similar to the Healthy People 2020 Goal (90%)	Vaccination is lower (worse) than the Healthy People 2020 Goal (90%)

^{*} The 2014-2015 flu season is from October 1, 2014 - March 31, 2015.

Table 15: Tennessee Hospital Healthcare Worker Influenza Vaccination Percentages, 2014/2015 Flu Season*

Facility Name	Percentage of Healthcare Workers Vaccinated	How Does This Hospital Compare to the Healthy People 2020 Goal of 90%?
Baptist Memorial Hospital - Collierville	87.2%	× Worse
Baptist Memorial Hospital - Huntingdon	94.8%	★ Better
Baptist Memorial Hospital - Memphis	88.2%	× Worse
Baptist Memorial Hospital - Tipton	92.5%	★ Better
Baptist Memorial Hospital - Union City	98.3%	★ Better
Baptist Memorial Hospital for Women	96.0%	★ Better
Blount Memorial Hospital	69.1%	× Worse
Bolivar General Hospital	85.9%	= Same
Bristol Regional Medical Center	98.6%	★ Better
Centennial Medical Center	81.3%	× Worse
Claiborne Medical Center	77.3%	× Worse
Cookeville Regional Medical Center	65.6%	× Worse
Cumberland Medical Center	70.3%	× Worse
Cumberland River Hospital	56.6%	× Worse
DeKalb Community Hospital	78.8%	× Worse
Decatur County General Hospital	88.6%	= Same
Delta Medical Center	75.4%	× Worse
Dyersburg Regional Medical Center	89.0%	= Same
East Tennessee Children's Hospital	99.2%	★ Better
Erlanger East	97.0%	★ Better
Erlanger Medical Center	88.2%	× Worse
Erlanger North	98.8%	★ Better
Fort Loudoun Medical Center	81.0%	× Worse

		Legend		
*	Vaccination is higher (better) than the Healthy People 2020 Goal (90%)	Vaccination is similar to the Healthy People 2020 Goal (90%)	×	Vaccination is lower (worse) than the Healthy People 2020 Goal (90%)

^{*} The 2014-2015 flu season is from October 1, 2014 – March 31, 2015.

^{**} P-value ≤ 0.05 is considered statistically significant.

Facility Name	Percentage of Healthcare Workers Vaccinated	How Does This Hospital Compare to the Healthy People 2020 Goal of 90%?
Fort Sanders Regional Medical Center	74.8%	× Worse
Franklin Woods Community Hospital	98.9%	★ Better
Gateway Medical Center	65.0%	× Worse
Hardin Medical Center	70.7%	× Worse
Harton Regional Medical Center	78.5%	× Worse
Henderson County Community Hospital	77.7%	× Worse
Hendersonville Medical Center	81.5%	× Worse
Henry County Medical Center	94.1%	★ Better
Heritage Medical Center	65.7%	× Worse
Highlands Medical Center	84.1%	× Worse
Hillside Hospital	91.9%	= Same
Holston Valley Medical Center	95.8%	★ Better
Horizon Medical Center	96.3%	★ Better
Houston County Community Hospital	64.6%	× Worse
Indian Path Medical Center	97.2%	★ Better
Jackson Madison County General Hospital	79.4%	× Worse
Jamestown Regional Medical Center	62.6%	× Worse
Jefferson Memorial Hospital	58.3%	× Worse
Jellico Community Hospital	94.8%	★ Better
Johnson City Medical Center	97.0%	★ Better
Lafollette Medical Center	73.4%	× Worse
Lakeway Regional Hospital	64.6%	× Worse
Laughlin Memorial Hospital	95.5%	★ Better

		Legend		
*	Vaccination is higher (better) than the Healthy People 2020 Goal (90%)	Vaccination is similar to the Healthy People 2020 Goal (90%)	×	Vaccination is lower (worse) than the Healthy People 2020 Goal (90%)

^{*} The 2014-2015 flu season is from October 1, 2014 – March 31, 2015.

^{**} P-value \leq 0.05 is considered statistically significant.

Facility Name	Percentage of Healthcare Workers Vaccinated	How Does This Hospital Compare to the Healthy People 2020 Goal of 90%?
LeConte Medical Center	69.4%	× Worse
Lincoln Medical Center	78.1%	× Worse
Livingston Regional Hospital	67.8%	× Worse
Maury Regional Medical Center	97.4%	★ Better
McKenzie Regional Hospital	69.7%	× Worse
McNairy Regional Hospital	66.7%	× Worse
Memorial Healthcare System	92.4%	★ Better
Memorial Hixson Hospital	96.2%	★ Better
Methodist Healthcare Fayette	98.5%	★ Better
Methodist Healthcare Germantown	86.9%	× Worse
Methodist Healthcare LeBonheur	90.8%	= Same
Methodist Healthcare North	93.2%	★ Better
Methodist Healthcare South	91.9%	★ Better
Methodist Medical Center of Oak Ridge	70.4%	× Worse
Methodist University Hospital	89.3%	= Same
Milan General Hospital	71.8%	× Worse
Morristown-Hamblen Healthcare System	77.1%	× Worse
Nashville General Hospital at Meharry	75.4%	× Worse
Newport Medical Center	85.2%	× Worse
North Knoxville Medical Center	88.2%	= Same
NorthCrest Medical Center	85.3%	× Worse
Parkridge East Hospital	77.9%	× Worse
Parkridge Medical Center	66.0%	× Worse

		Legend		
*	Vaccination is higher (better) than the Healthy People 2020 Goal (90%)	Vaccination is similar to the Healthy People 2020 Goal (90%)	×	Vaccination is lower (worse) than the Healthy People 2020 Goal (90%)

^{*} The 2014-2015 flu season is from October 1, 2014 – March 31, 2015.

^{**} P-value \leq 0.05 is considered statistically significant.

Facility Name	Percentage of Healthcare Workers Vaccinated	How Does This Hospital Compare to the Healthy People 2020 Goal of 90%?
Parkridge West Hospital	72.7%	× Worse
Parkwest Medical Center- Knoxville	73.2%	× Worse
Perry Community Hospital	98.3%	★ Better
Physician's Regional Medical Center	68.5%	× Worse
Regional Hospital of Jackson	72.1%	× Worse
Regional One Health	83.2%	× Worse
River Park Hospital	97.1%	★ Better
Roane Medical Center	69.5%	× Worse
SkyRidge Medical Center	73.8%	× Worse
Skyline Medical Center	79.6%	× Worse
Southern Hills Medical Center	76.3%	× Worse
Southern TN Reg Health Sys- Lawrenceburg	81.7%	× Worse
Southern TN Reg Health Sys-Sewanee	95.8%	★ Better
Southern TN Reg Health Sys-Winchester	92.0%	= Same
St. Francis Bartlett	98.3%	★ Better
St. Francis Hospital - Memphis	94.8%	★ Better
St. Jude Children's Research Hospital	76.6%	× Worse
St. Thomas Midtown Hospital	86.7%	× Worse
St. Thomas Rutherford Hospital	92.1%	★ Better
St. Thomas West Hospital	94.1%	★ Better
Starr Regional Medical Center - Athens	78.0%	× Worse
Starr Regional Medical Center - Etowah	71.7%	× Worse
StoneCrest Medical Center	87.0%	× Worse

Legend					
*	Vaccination is higher (better) than the Healthy People 2020 Goal (90%)	Vaccination is similar to the Healthy People 2020 Goal (90%)	×	Vaccination is lower (worse) than the Healthy People 2020 Goal (90%)	

^{*} The 2014-2015 flu season is from October 1, 2014 – March 31, 2015.

^{**} P-value ≤ 0.05 is considered statistically significant.

Table 15 (cont'd)

Facility Name	Percentage of Healthcare Workers Vaccinated	How Does This Hospital Compare to the Healthy People 2020 Goal of 90%?
Stones River Hospital	72.6%	× Worse
Summit Medical Center	89.0%	= Same
Sumner Regional Medical Center	68.9%	× Worse
Sweetwater Hospital Association	74.9%	× Worse
Sycamore Shoals Hospital	99.4%	★ Better
Takoma Regional Hospital	87.2%	× Worse
The Hospital for Spinal Surgery	88.4%	= Same
TrustPoint Hospital	85.0%	× Worse
Turkey Creek Medical Center	54.4%	× Worse
Unicoi County Memorial Hospital	88.8%	= Same
United Regional Medical Center	79.6%	× Worse
University Medical Center- Lebanon	79.8%	× Worse
University of Tennessee Medical Ctr	84.6%	× Worse
Vanderbilt Medical Center	91.3%	★ Better
Volunteer Community Hospital	74.4%	× Worse
Wayne Medical Center	94.5%	★ Better
Wellmont Hawkins County Hospital	96.0%	★ Better
Williamson Medical Center	81.8%	× Worse

Legend					
*	Vaccination is higher (better) than the Healthy People 2020 Goal (90%)	=	Vaccination is similar to the Healthy People 2020 Goal (90%)	×	Vaccination is lower (worse) than the Healthy People 2020 Goal (90%)

^{*} The 2014-2015 flu season is from October 1, 2014 – March 31, 2015.

^{**} P-value ≤ 0.05 is considered statistically significant.

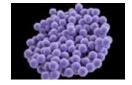
Additional Information for Healthcare Consumers

FAST FACTS:

What You Need to Know About Healthcare-Associated Infections

Fast Facts was created with the permission of the Kansas Department of Health and Environment-infographics were taken from their report. Images of MRSA and C. diff are from CDC.

- A surgical site infection (SSI) occurs after surgery in the part of the body where the surgery took place. These infections may involve only the skin or may be more serious and involve tissue under the skin or organs. SSIs sometimes take days or months after surgery to develop. Symptoms may include fever, redness or pain around the surgical site, or drainage of fluid from the wound.
- Methicillin-resistant Staphylococcus aureus (MRSA) infections are caused by bacteria that are resistant to certain types of drugs. MRSA can cause skin or wound infections. Sometimes, MRSA can infect the blood and cause serious illness and even death. Only bloodstream infections are shown in this report.

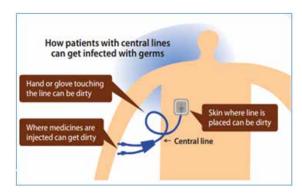


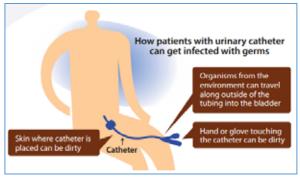
 Clostridium difficile (C. difficile) is a type of bacteria that causes severe diarrhea and can be deadly. C. difficile infections usually occur in people who have recently taken antibiotics and have been under medical care.



Sometimes, patients have medical devices inserted into their bodies to provide necessary medical care. These devices are called "invasive devices" and patients with these devices have a higher chance of getting an infection. Here is what you need to know about invasive devices and what kinds of infections they can be associated with:

- A central line is a tube placed in a large vein to allow access to the bloodstream and provide the patient with important medicine. A central line-associated bloodstream infection (CLABSI) can occur when bacteria or other germs travel along a central line and enter the blood. When not put in correctly or kept clean, central lines can become a pathway for germs to enter the body and cause serious infections in the blood.
- A urinary catheter is a tube placed in the bladder to drain urine. A catheterassociated urinary tract infection (CAUTI) can occur when bacteria or other germs travel along a urinary catheter, resulting in an infection in the bladder or the kidney.





Guide to Understanding Healthcare Worker Influenza Vaccination

Influenza, or "the flu," is a mild to severe respiratory illness caused by the influenza virus. It is a contagious illness, meaning that it can easily spread from person to person. If healthcare workers (also known as healthcare personnel) become infected with the flu, they can spread this illness to their coworkers and patients. Some patients in a hospital are at high risk for complications from the flu, such as the elderly, very young, or those with severe chronic illnesses. Extra care should be taken to prevent the spread of the flu among healthcare workers and patients.

The best way to prevent the flu is by getting vaccinated. The Centers for Disease Control and Prevention (CDC) recommends that all healthcare personnel who work in a healthcare setting receive the flu vaccine each year to help prevent the spread of flu within the workplace. Healthcare personnel include all facility employees, licensed independent practitioners, adult students/trainees, and volunteers regardless of full time/part time status, clinical responsibility or patient contact. *Studies show that patients benefit when healthcare workers get vaccinated.*

Many hospitals choose to provide the flu vaccine to their employees, and some hospitals even have policies requiring mandatory vaccination. Currently, there are no state regulations requiring vaccination in Tennessee, and healthcare workers are able to decline the flu vaccine for any reason.

This report shows the percentage of all healthcare workers in each hospital who received the flu vaccine. Higher percentages are better, because this indicates that a greater number of healthcare workers are protected against the flu. The Department of Health and Human Services (HHS) Healthy People 2020 goal for healthcare worker flu vaccination in the United States is 90%.

For more information about the CDC recommendations and the national trends of influenza vaccination coverage, see here: http://www.cdc.gov/flu/healthcareworkers.htm

Things to Think About When Choosing a Healthcare Facility

- Does your doctor recommend the facility? Why or why not?
- Does your health insurance cover treatment at this facility? If not, ask your doctor if there are benefits of out-of-network care.
- Is your hospital accredited by a nonprofit organization that seeks to improve the quality and safety of healthcare (e.g., The Joint Commission or DNV-GL)?
- Do you know your doctor's or healthcare provider's qualifications? Is he or she licensed and board-certified? Consult your state licensing board for information on licensure and disciplinary actions that may have been taken.
- What infection prevention resources are at your healthcare facility? If you have questions, find out how you can get in touch with someone in infection prevention before you visit the facility.
- Does your healthcare facility have a patient advocate? If so, s/he may be able to provide additional consultation and services before, during, and after your medical treatment.
- If you are planning to have surgery:
 - Does the facility do a lot of the procedures that you will be having? Patients who have surgery at hospitals that do more surgical procedures may have better outcomes³.
 - Does the facility have a floor or unit that only does the type of surgery you are having? For example, for hip replacement surgery, does the facility have a floor or unit that is used only for joint replacement surgeries?
 - Does the facility have one or more operating rooms that are used only for your type of surgery?
 - Does the facility follow specific guidelines so that everyone who has your type of surgery receives consistent care?
- The federal government reports other quality information about hospitals, in addition to healthcare associated-infections. Find this information online at: www.hospitalcompare.hhs.gov
- The Centers for Medicare and Medicaid Services has a comprehensive guide available to assist patients in selecting a hospital. Find this at: http://www.medicare.gov/Pubs/pdf/10181.pdf

³ Ho, V Evolution of the Volume-Outcome Relation for Hospitals Performing Coronary Angioplasty. Circulation 2000;101:1806-1811

What Patients Can do to Prevent Infections

To prevent all infections:

- If you do not see your healthcare providers clean their hands before caring for you, don't be shy about asking them to do so. This is your healthcare, and you have a right to speak up!
 - o Make sure you and your family members and friends keep their hands clean too!
- Ask your healthcare provider what specific steps s/he takes to prevent infections as well
 as what you can do to prevent infections before, during, and after your visit as it applies
 to your care.

To prevent central line-associated bloodstream infections (CLABSIs) and catheter-associated urinary tract infections (CAUTIs):

If you have a central line or urinary catheter put in place, ask your doctors and nurses to explain why you need it and how long you will have it.

- Ask your healthcare providers each day if you still need it.
- If the bandage covering your central line becomes wet or dirty, tell your nurse or doctor immediately.
- Tell your nurse or doctor if the area around your central line or catheter is sore or red, or you feel feverish.
- Follow your healthcare providers' instructions for the care of the central line or urinary catheter to keep it working as it should and keep it clean and free of germs.
- Do not let family and friends touch the central line tubing or bandage.
- See <u>FAQs about CLABSI</u> and <u>FAQs about CAUTI</u> for more information.

To prevent surgical site infections (SSIs):

Immediately after your surgery and during recovery:

- Avoid touching your incision area and follow all instructions from your doctor about how to take care of your incision.
- Before and after taking care of your incision area, wash your hands or use an alcoholbased hand sanitizer and have any family member helping with your care do the same.
- If you have any infection signs/symptoms like redness, pain, fever, or drainage, call your doctor ASAP.
- Until the incision is completely healed, always use a different washcloth for the incision area than the one used for the rest of your body.
- Keep clean sheets on your bed and make sure the clothes that come in contact with your incision are clean.
- Keep pets away from the incision until healed.

Before you leave the hospital or ambulatory surgery center:

- Make sure you understand how to take care of your wound and ask questions when you are unsure.
- Know who to contact if you have questions or problems after you get home.
- Keep all appointments scheduled at the time of discharge.

See FAQs about SSIs for more information.

To prevent Clostridium difficile infections:

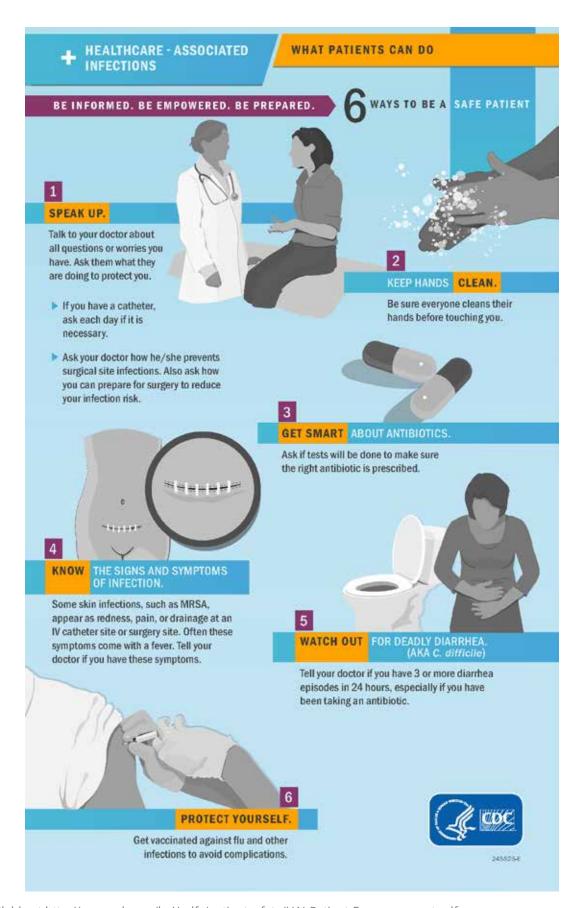
- Take antibiotics only as prescribed by your doctor and complete the course of treatment.
- Tell your doctor if you have recently been on antibiotics or if you get diarrhea within a few months of taking the antibiotics.
- Wash your hands before eating and after using the bathroom.
- See <u>FAQs about *Clostridium difficile*</u> for more information.

To prevent methicillin-resistant Staphylococcus aureus (MRSA) infections:

- Clean your hands often, especially before and after changing wound dressings or bandages.
- Keep wounds clean and change bandages as instructed until healed.
- Avoid sharing personal items such as towels or razors.
- Take antibiotics only as prescribed by your doctor and complete the course of treatment.
- See FAQs about MRSA infections for more information.

To prevent influenza or the "flu":

Get vaccinated against the flu each year, clean your hands often, and cover your cough with your sleeve.



Available at http://www.cdc.gov/hai/pdfs/patientsafety/HAI-Patient-Empowerment.pdf

Appendices

Appendix A. Acronyms

CAUTI – catheter-associated urinary tract infection

CCU – critical care unit (used interchangeably with intensive care unit (ICU))

CDC – Centers for Disease Control and Prevention

CDI – *C. difficile* infection

CLABSI – central line-associated bloodstream infection

CMS - Centers for Medicare and Medicaid Services

CO – community onset

COLO – colon surgery

HAI – healthcare-associated infection

HO - healthcare facility onset

HYST – abdominal hysterectomy

IP – infection preventionist

ICU – intensive care unit (use interchangeably with critical care unit (CCU))

MRSA – methicillin-resistant *Staphylococcus aureus*

NHSN - National Healthcare Safety Network

NICU - neonatal intensive care unit

OR - operating room

PROC – surgical procedures

SSI – surgical site infection

TDH - Tennessee Department of Health

TN - Tennessee

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