



Tennessee Healthcare-Associated Infections (HAI) Reporting Requirements for Dialysis Events

In 2008, more than 350,000 patients were treated with chronic hemodialysis in the United States, and infections were the second leading cause of death among these patients. In the state of Tennessee, outpatient dialysis facilities have been required to report dialysis events to NHSN since 2012. For details on reporting requirements, please see the information provided below.

Who needs to report?	As of July 2012: <ul style="list-style-type: none"> All outpatient hemodialysis facilities (includes those attached to hospitals and freestanding centers)
What is reported?	<p><i>Numerator Data</i></p> <ul style="list-style-type: none"> IV antimicrobial start Positive blood culture Signs of vascular access infection (i.e., pus, redness, or increased swelling at the vascular access site) <p><i>Denominator Data</i></p> <ul style="list-style-type: none"> Number of dialysis outpatients on the first two working days of the month Stratified by five vascular access types
When is data collected?	<ul style="list-style-type: none"> Dialysis event numerator and denominator data must be collected and reported on a monthly basis
How is it reported?	Using the National Healthcare Safety Network (NHSN) web application

For more information:

Contact the Tennessee Department of Health, Communicable and Environmental Disease and Emergency Preparedness Division, Healthcare-Associated Infections program at (615) 741-7247.

NHSN Surveillance Reporting	http://www.cdc.gov/nhsn/settings.html
DE NHSN Protocol	http://www.cdc.gov/nhsn/PDFs/pscManual/8pscDialysisEventcurrent.pdf
DE NHSN Protocol Training	http://www.cdc.gov/nhsn/dialysis/training/part-1-Understanding-Surveillance-Requirements-V6-4.pdf http://www.cdc.gov/nhsn/dialysis/training/part2-Enrollment-SetUp-Data-Entry-6-4-june-2011.pdf
DE Forms – Numerator	Form: http://www.cdc.gov/nhsn/forms/57.109_DIA_BLANK.pdf Form Instructions: http://www.cdc.gov/nhsn/forms/instr/57_109.pdf
DE Forms - Denominator	http://www.cdc.gov/nhsn/forms/57.119_DenomOutpatDialysis_BLANK.pdf Form Instructions: http://www.cdc.gov/nhsn/forms/instr/57_119.pdf