

Tennessee's Report on Healthcare-Associated Infections:

January 1, 2010 — June 30, 2013

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EXECUTIVE SUMMARY

Healthcare-Associated Infections Reporting in Tennessee, 2008-present

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

Since January 2008, hospitals in Tennessee have been required to report central line-associated bloodstream infection (CLABSI) data from adult and pediatric intensive care units (ICUs, also called "critical care units") to TDH. Hospitals with an average daily census (ADC) less than 25 were exempt from this requirement until January 2012. Neonatal ICUs in Tennessee have been reporting CLABSI data since July 2008. Burn and trauma ICUs, and long-term acute care (LTAC) facilities began reporting CLABSI data in July 2010. Specialty care areas (SCAs) reported CLABSI data from July 2010 through December 2011.

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

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

Tennessee acute care hospitals have been required to report catheter-associated urinary tract infection (CAUTI) data in adult and pediatric ICUs to TDH since January 2012. Long-term acute care (LTAC) facilities and inpatient rehabilitation facilities (IRF) began reporting CAUTI data in October 2012. (Figure 1)

Standardized Infection Ratio (SIR)

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

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

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

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

Central Line-Associated Bloodstream Infections (CLABSIs) in Adult and Pediatric ICUs, January–June 2013:

Tennessee's overall standardized infection ratio (SIR) for central line-associated bloodstream infections (CLABSI) in adult and pediatric ICUs in January through June 2013 was 51% lower than the national 2006-08 SIR of 1 (SIR=0.49; 95% CI: 0.41, 0.59). The median (50th percentile) facility-specific SIR was 0.49, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had a SIR at or below 0.49. No facility had a 2013 SIR significantly greater than 1. (Table 1)

Central Line-Associated Bloodstream Infections (CLABSIs) in Neonatal ICUs, January–June 2013:

The overall CLABSI SIR for neonatal ICUs in January through June 2013 was 34% lower than the national baseline (SIR=0.66; 95% CI: 0.45, 0.92). The median (50th percentile) facility-specific SIR was 0.44, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had a SIR at or below 0.44. No facility had a 2013 SIR significantly greater than 1. (Table 1)

In January through June 2013 the Tennessee CLABSI SIR in level III NICUs was significantly lower than 2006-8 national SIR of 1 (SIR=0.57; 95% CI: 0.34, 0.90). The Tennessee CLABSI SIR in level II/III NICUs was not significantly different from 1 (SIR=0.75; 95% CI: 0.45, 1.29). (Table 7)

<u>Central Line-Associated Bloodstream Infections (CLABSIs) in Long-Term Acute Care (LTAC) Facilities,</u> January–June 2013:

The overall January through June 2013 SIR for CLABSIs in long-term acute care hospitals was 22% lower than the national baseline (SIR=0.78; 95% CI: 0.57, 1.03). The median (50th percentile) facility-specific SIR was 0.61, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had a SIR at or below 0.61. No facility had a SIR significantly greater than 1. (Table 1)

Catheter-Associated Urinary Tract Infections (CAUTIs) in Adult and Pediatric ICUs, January–June 2013:

The overall SIR for catheter-associated urinary tract infections (CAUTI) in Tennessee adult and pediatric ICUs in January through June 2013 was 40% higher than the national 2009 SIR of 1 (SIR=1.40; 95% CI: 1.28, 1.53). The median (50th percentile) facility-specific SIR was 1.06, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had a SIR at or below 1.06. Ten facilities (19%) had a 2013 SIR significantly greater than 1. (Table 1)

<u>Catheter-Associated Urinary Tract Infections (CAUTIs) in Long-Term Acute Care (LTAC) Facilities, January–June 2013:</u>

The standardized infection ratio is not yet available for CAUTIs in long-term acute care hospitals. The crude (unadjusted) pooled mean CAUTI rate for April through June 2013 was 3.11 CAUTIs per 1,000 urinary catheter days. The previous quarter reported 45 CAUTIs among 13,990 catheter days resulting in a rate of 3.22 per 1,000 catheter days. (Table 10)

<u>Catheter-Associated Urinary Tract Infections (CAUTIs) in Inpatient Rehabilitation Facilities (IRF), January–June</u> 2013:

The standardized infection ratio is not yet available for CAUTIs events in inpatient rehabilitation facilities. From April – June 2013, the crude CAUTI rate for IRFs was 1.57 per 1,000 catheter days (6/3830). The previous quarter reported 14 CAUTIs among 3,750 catheter days resulting in 3.73 per 1,000 catheter days. (<u>Table 10</u>)

<u>Surgical Site Infections (SSIs) Related to Coronary Artery Bypass Graft (CGBB/C) Procedures, Abdominal Hysterectomy (HYST) Procedures, and Colon (COLO) Procedures, January–June 2013:</u>

For surgical site infections (SSI), the complex admission/readmission (complex A/R) SIR for infections following coronary artery bypass graft (CABG) procedures was 50% lower than the national 2006-08 SIR of 1 (SIR=0.50; 95% CI: 0.31, 0.76). The median (50th percentile) facility-specific SIR was 0.43, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had a SIR at or below 0.43. One facility (6%) had a 2013 CABG SIR

significantly less than 1.

For SSIs following colon (COLO) procedures, the complex A/R SIR was greater than, but not statistically significantly different from, the baseline SIR of 1 (SIR=0.1.06; 95% CI: 0.88 1.27). The median (50th percentile) facility-specific SIR was 0.78. Two facilities (6%) had a 2013 COLO SIR significantly greater than 1.

The complex A/R SIR for SSIs following abdominal hysterectomy (HYST) procedures was less than, but not statistically significantly different from, the baseline SIR of 1 (SIR=0.92; 95% CI: 0.62, 1.33). The median (50th percentile) facility-specific SIR was 0.83. No facility had a 2013 HYST SIR significantly greater than 1. (<u>Table 1</u>)

<u>Methicillin-Resistant Staphylococcus aureus (MRSA)</u> Laboratory-Identified (LabID) Events in Acute Care Hospitals and Long-Term Acute Care (LTAC) Facilities, January–June 2013

The January through June 2013 overall Tennessee SIR for healthcare-onset Methicillin-Resistant *Staphylococcus aureus* (*MRSA*) laboratory-identified (LabID) events in acute care hospitals was 12% higher than the 2010-2011 national baseline SIR of 1 (SIR=1.12; 95% CI: 0.96, 1.33). The median (50^{th} percentile) facility-specific SIR was 1.07, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had a SIR at or below 1.07. Two facilities (6%) had a 2013 SIR significantly greater than 1. (<u>Table 1</u>)

In long-term acute care hospitals, the MRSA healthcare-facility onset incidence rate for January through June 2013 was 3.2 infections per 10,000 patient days. The standardized infection ratio is not yet available for LabID events in long-term acute care hospitals. (Table 22)

<u>Clostridium difficile Infection (CDI) Laboratory-Identified (LabID) Events in Acute Care Hospitals and Long-Term Acute Care Hospitals, January–June 2013</u>

The SIR for healthcare-onset *Clostridium difficile* Infection (CDI) LabID events was 23% lower than the national baseline (SIR=0.77; 95% CI: 0.73, 0.82). The median (50th percentile) facility-specific SIR was 0.64, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had a SIR at or below 0.64. Two facilities (2%) had a 2013 SIR significantly greater than 1, while 19 facilities (20%) had a SIR significantly less than 1. (Table 1)

In long-term acute care hospitals, the CDI healthcare-facility onset incidence rate for January through June 2013 was 8.2 infections per 10,000 patient days. The standardized infection ratio is not yet available for LabID events in long-term acute care hospitals. (Table 23)

Table 1: Tennessee Standardized Infection Ratios (SIRs) and Distribution of Facility-specific SIRs for Central Line-Associated Bloodstream Infection (CLABSI), Catheter-Associated Urinary Tract Infection (CAUTI), Surgical Site Infection (SSI) and Laboratory-Identified (LabID) Methicillin-Resistant *Staphylococcus aureus (MRSA)* and *C. difficile* Infection (CDI) Events, 01/01/2013 - 06/30/2013

									Distribution of Facility-specific SIRs									
				No. of In	fections		ardized Ir SIR) and			No. of with SI <1	R Sig.	No. of with SI >1	R Sig.	Key Percentiles				
HAI	Unit/Type	No. of Facilities	Device Days/ Procedures Performed/ Patient Days	Obs.	Pred.	SIR	Lower	Upper	No. of Facs with ≥1 Pred. Infection	N	%	N	%	10%	25%	50%	75%	90%
CLABSI	Adult/Pediatric ICUs	92	122,519	122	249	0.49	0.41	0.59	44	6	14%	0	0%	0.00	0.00	0.49	0.81	1.15
	Neonatal ICUs	24	22,170	34	52	0.66	0.45	0.92	13	1	8%	0	0%	0.00	0.00	0.44	0.76	1.44
	Long-term Acute Care	9	34,337	46	59	0.78	0.57	1.03	9	2	22%	0	0%	0.22	0.48	0.61	1.18	1.43
CAUTI	Adult/Pediatric ICUs	92	166,920	488	349	1.40	1.28	1.53	51	1	2%	10	20%	0.00	0.41	1.06	1.71	2.33
SSI	Coronary Artery Bypass Graft	27	3,469	21	42	0.50	0.31	0.76	18	1	6%	0	0%	0.00	0.00	0.43	0.90	1.81
	Colon surgery	96	3,611	121	114	1.06	0.88	1.27	31	0	0%	2	6%	0.00	0.25	0.78	1.52	2.12
	Abdominal Hysterectomy	96	4,089	29	31	0.92	0.62	1.33	10	0	0%	0	0%	0.00	0.30	0.83	1.68	2.17
MRSA	Acute Care Hospitals	112	2,017,875	170	152	1.12	0.96	1.30	33	0	0%	2	6%	0.38	0.64	1.07	1.91	2.56
CDI	Acute Care Hospitals	112	1,872,413	1,066	1,379	0.77	0.73	0.82	97	19	20%	2	2%	0.00	0.34	0.64	0.92	1.41

Data reported as of March 4, 2014

Adult/Pediatric ICUs include burn and trauma units

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

NA = *Not available*

Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009; MRSA, CDI - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI, SSI - 2006-2008; CAUTI - 2009; MRSA, CDI - 2010-2011)

BACKGROUND

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

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

The following report summarizes the TDH Healthcare-Associated Infection reporting activities from January 2011 through June 2013. This report provides CLABSI and CAUTI standardized infection ratios (SIRs) for acute care hospitals by individual facility and at a state aggregate level. The 2013 facility-specific CLABSI SIRs are compared to Tennessee data from 2013 and to national NHSN baseline data from 2006-2008. The 2013 facility-specific CAUTI SIRs are compared to Tennessee data from 2013 and to national NHSN baseline data from 2009. This report also provides CLABSI SIRs for long-term acute (LTAC) facilities at a state aggregate level. Rates for CAUTIs in LTAC facilities and inpatient rehabilitation facilities (IRF) are provided at a state aggregate level. For SSIs related to COLO and HYST procedures, data are provided by individual acute care hospital and at the state aggregate level; data are provided at the state aggregate level only for SSIs related to CBGB/C procedures. The 2013 SSI SIRs are compared to national NHSN baseline data from 2006-2008. LabID SIRs for acute care hospitals are provided by individual facility beginning in 2013 and at the state aggregate level beginning in 2012. LabID SIRs are compared to national NHSN baseline data from 2010-2011 (note that LabID SIRs were not available prior to 2012). LabID rates are also provided at the state aggregate level for acute care hospitals and LTAC facilities.

DEFINITIONS

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

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

ASA Score: Assessment by the anesthesiologist of the patient's preoperative physical condition using the American Society of Anesthesiologists' (ASA) Classification of Physical Status. Patient is assigned one of the following which is used as one element of the SSI Basic Risk index:

- 1 -- Normally healthy patient
- 2 -- Patient with mild systemic disease
- 3 -- Patient with severe systemic disease that is not incapacitating
- 4 -- Patient with an incapacitating systemic disease that is a constant threat to life
- 5 -- Moribund patient who is not expected to survive for 24 hours with or without the operation

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

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

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

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

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

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

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

Central line utilization ratio: See Device Utilization Ratio

Clostridium difficile: A bacterium that naturally resides in the bowels of some people without symptoms of infection. *Clostridium difficile* (*C. difficile*) is responsible for a spectrum of *C. difficile* infections (CDI), including gastrointestinal illness which can lead to severe complications including sepsis and death. CDI can occur when *C. difficile* spores are transferred to patients via the hands of healthcare personnel or other contaminated surfaces or items.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

NHSN operative procedure: A procedure that:

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

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

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

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

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

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

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

Surveillance: The process of finding and documenting infections.

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

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

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

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

Urinary catheter utilization ratio: See Device Utilization Ratio

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

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

Key Abbreviations Found in the HAI Public Report

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

METHODS

Healthcare-Associated Infections Reporting Requirements in Tennessee

Since January 2008, hospitals in Tennessee have been required to report central line-associated bloodstream infection (CLABSI) data from adult and pediatric intensive care units (ICUs, also called "critical care units") to TDH. Hospitals with an average daily census (ADC) less than 25 were exempt from this requirement until January 2012. Neonatal ICUs in Tennessee have been reporting CLABSI data since July 2008. Burn and trauma ICUs, and long-term acute care (LTAC) facilities began reporting CLABSI data in July 2010. Specialty care areas (SCAs) reported CLABSI data from July 2010 through December 2011.

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

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

Tennessee acute care hospitals have been required to report catheter-associated urinary tract infection (CAUTI) data in adult and pediatric ICUs to TDH since January 2012. Long-term acute care (LTAC) facilities and inpatient rehabilitation facilities (IRF) began reporting CAUTI data in October 2012.

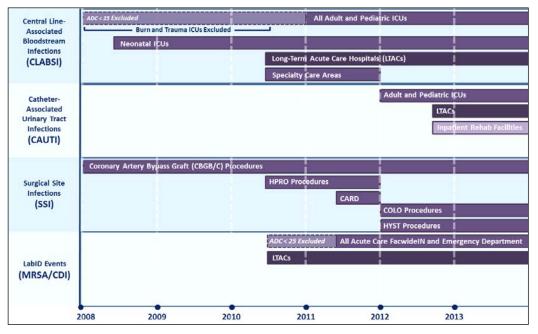


Figure 1: Tennessee Healthcare-associated Infections Reporting Requirements*, 2008-2013

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

Tennessee Reporting Facilities

Characteristics of acute care hospitals reporting HAI data to TDH from January-June 2013 are displayed below. Facilities are stratified by medical school affiliation (as defined by NHSN) and bed size, and data were gathered from the 2012 NHSN Annual Facility Survey.

Table 2. Characteristics of Tennessee Acute Care Hospitals, January-June 2013

	Number of facilities	Percent
Medical School Affiliation		
Major teaching	17	15.0%
Graduate teaching	11	9.7%
Undergraduate teaching	9	8.0%
None	76	67.3%
Number of Beds		
<50 beds	23	20.4%
50-99 beds	29	25.7%
100-399 beds	49	43.4%
≥400 beds	12	10.6%

Timeliness, Completeness and Accuracy of Reporting

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

Table 3: Facilities Noncompliant with Central Line-Associated Bloodstream Infection (CLABSI), Catheter-Associated Urinary Tract Infection (CAUTI), Surgical Site Infection (SSI), or Laboratory-Identified (LabID) Events Data Requirements for the Reporting Period January–June 2013

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

NHSN Surveillance Definitions

All facilities reporting to NHSN are required to apply NHSN surveillance definitions and protocols as written in the NHSN Patient Safety Component Manual. This manual contains standardized surveillance definitions and data collection methods that are essential for fair and accurate reporting of HAIs. It is important to note the distinction between surveillance definitions used for HAI reporting in NHSN, and clinical diagnosis. Surveillance definitions are designed to study and identify trends in a population. The application of their standardized criteria in a consistent manner allows confidence in aggregation and analysis of data. Alternatively, clinical diagnoses are patient specific, include all available diagnostic data, and are used to guide clinical treatment decisions. Failure to meet a surveillance definition does not impede or override clinical judgment during diagnosis, management or treatment of patients.

Surveillance definitions within the NHSN Patient Safety Component Manual are updated annually; current protocols are available online. Relevant changes to the surveillance definitions of the infections covered in this report are summarized below:

General HAI definition: In October 2011, CDC clarified that because fever is a non-specific sign and may be due to more than one infection occurring at the same time, fever must be attributed to multiple causes at once (if applicable) in order to prevent selective attribution. TDH asked hospitals to review cases dating back to January 2011 to ensure consistency with this clarified definition. Further, in January 2013, NHSN revised the definition of a healthcare-associated infection (HAI) to: "An infection is considered an HAI if all elements of a CDC/NHSN site-specific infection criterion were first present together on or after the 3rd hospital day (day of admission is day 1)." Also in January 2013, the date of event was revised to be the date the last element used to meet the infection criterion occurred (previously the date of the first element).

CLABSI: Because CDC discontinued the use of clinical sepsis (CSEP) CLABSI criteria for NICUs in January 2010, national baseline NICU data for this report were adjusted by subtracting any CLABSIs meeting the CSEP criteria (see Tables 17-18 of the NHSN report available here: <u>http://www.cdc.gov/nhsn/PDFs/dataStat/2009NHSNReport.pdf</u>). In

January 2011, the NHSN CLABSI definition was changed to no longer include antibiotic resistance profiles to determine whether two common commensal isolates are considered the same organism. In January 2013, 3 new CLABSI criteria were added, which pertain to patients who are post-allogeneic hematopoietic stem cell transplant or severely neutropenic. Additionally in January 2013, a new rule was added, indicating that a central line (CL) must be both in place for > 2 days before all elements of the CLABSI criterion were first present together, and the CL must be in place the day of the event or the day before in order to meet the definition of a CLABSI.

CAUTI: In January 2013, NHSN added a new rule that an indwelling urinary catheter must be both in place for > 2 days before all elements of the UTI criterion were first present together, and the urinary catheter must be in place the day of the event or the day before in order to meet the definition of a CAUTI. Criterion elements must occur within a timeframe that does not exceed a gap of 1 calendar day.

SSI: In January 2013, NHSN revised the definition of primary closure for NHSN operative procedures to include procedures where devices remain extruding through the incision at the end of surgery.

Data Validation

Data reported to NHSN are validated using several methods:

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

Monthly checks for internal consistency: Each month, TDH staff download CLABSI, CAUTI, SSI, and LabID (MRSA/CDI) data from NHSN and verify completeness with a computerized data validation program. Data that are missing, unusual, inconsistent, or duplicative are identified and investigated through email or telephone communication with hospital staff. Hospitals are given the opportunity to verify and/or correct the data.

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

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

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

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

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

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

Risk Adjustment

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

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

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

For individuals undergoing surgical procedures, risk adjustment is calculated through logistic regression models which use NHSN baseline data to represent a standard population¹. With this method, risk factors are procedure-specific and each risk factor's contribution varies according to its association with risk of SSI.

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

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

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

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

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

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

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

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

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

¹ Yi M, Edwards JR, et al. Improving risk-adjusted measures of surgical site information for the National Healthcare Safety Network. Infect Control Hosp Epidemiol 2011; 32(10):970-986. Risk adjustment for healthcare facility-onset Methicillin-Resistant *Staphylococcus aureus* (MRSA) and *C. difficile* infection (CDI) laboratory-identified (LabID) event reporting is calculated using negative binomial regression and is specific to type of LabID event².

Risk adjustment for MRSA LabID events include:

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

Risk adjustment for CDI LabID events include:

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

Standardized Infection Ratio - Overview

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

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

Predicted HAIs

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

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

Tennessee State and National Comparisons - CLABSI and CAUTI

This report displays Tennessee CLABSI data for January 2010- June 2013. For comparison, baseline national data were obtained from the National Healthcare Safety Network (NHSN) report that covered the period of 2006–2008 (available at http://www.cdc.gov/nhsn/PDFs/dataStat/2009NHSNReport.pdf).

This report also displays Tennessee CAUTI data for January 2012 – June 2013. For comparison, baseline national data were obtained from the NHSN report that covered 2009 (available at http://www.cdc.gov/nhsn/PDFs/NHSNReport_DataSummaryfor2009.pdf).

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

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

Risk Group Stratifier	Observed CI	LABSI Rates		NHSN CLABSI Rates for 2006-2007 (Standard Population)					
Location Type	#CLABSI	#Central line-days	CLABSI rate [*]	#CLABSI	#Central line-days	CLABSI rate [*]			
Medical cardiac ICU	170	100,000	1.7	1260	600,000	2.1			
Med-Surg ICU	58	8 58,000		600	400,000	1.5			
$SIR = \frac{observed}{expected} = \frac{170 + 58}{100,000 \times \left(\frac{2.1}{1,000}\right) + 58,000 \times \left(\frac{1.5}{1,000}\right)} = \frac{228}{210 + 87} = \frac{228}{297} = 0.77$									

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

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

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

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

^{* &}quot;Predicted" is used throughout the report as a synonym for the standard statistical term "expected".

Tennessee State and National Comparisons - SSI

This report displays CBGB/C, COLO, and HYST SSI data in aggregate for Tennessee for January 2010– June 2013 and facility-specific COLO and HYST data for January 2012 – June 2013. For comparison, baseline national data were obtained from the National Healthcare Safety Network (NHSN) report that covered the period of 2006 through 2008 (available at http://www.cdc.gov/nhsn/PDFs/dataStat/2009NHSNReport.pdf). For SSI data, both crude (unadjusted) rates and SIRs are presented.

Crude (unadjusted) SSI rates are calculated as follows:

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

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

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

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

For a given NHSN operative procedure, the table below illustrates the parameter estimates for the significant risk factors associated with that procedure. Note that this table is for teaching purposes only and should not be considered an actual model for predicting a patient's risk of SSI³.

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

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

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

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

logit(\hat{p}) = -5.448 + 0.520(1) + 0.425(1) + 0.501(1) + 1.069(1) = -2.934

Solving for \hat{p} gives a probability of SSI for Patient A of 0.05, or 5%.

To calculate the predicted number of infections for a population, each patient's risk of SSI is generated using the appropriate logistic regression model, and summed⁴.

 ³ Example extracted from "NHSN e-News: SIRs Special Edition," Division of Healthcare Quality Promotion, Centers for Disease Control and Prevention, 10 December 2010 (<u>http://www.cdc.gov/nhsn/PDFs/Newsletters/NHSN_NL_OCT_2010SE_final.pdf</u>)
 ⁴ Yi M, Edwards JR, et al. Improving risk-adjusted measures of surgical site information for the National Healthcare Safety Network. Infect Control Hosp Epidemiol 2011; 32(10):970-986.

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

Tennessee State and National Comparisons – LabID Events

This report displays Methicillin-Resistant *Staphylococcus aureus* (MRSA) and *C. difficile* infection (CDI) LabID event data in aggregate for Tennessee from July 2010- June 2013. For comparison, baseline national data were collected in the National Healthcare Safety Network (NHSN) during the period of 2010 through 2011.

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

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

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

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

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

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

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

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

Number of predicted LabID events = $e^{(\beta+\beta_1X_1+\beta_2X_2+...)}$ × patient days

The table below illustrates the parameter estimates for the significant risk factors associated with the number of CDI LabID events⁵

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

Number of CO CDI LabID events Number of admissions to the facility ×100 Number of admissions to the facility ×100

Number of admissions to the facility

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

Number of predicted (expected) HO CDI LabID events =

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

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

Number of predicted (expected) HO CDI LabID events =

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

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

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

Calculation of Exact Confidence Interval of the SIR⁶:

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

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

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

Fisher's Exact Test

Lower bound:

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

Upper bound:

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

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

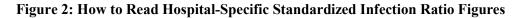
a = the observed number of infections λ = the expected number of infections

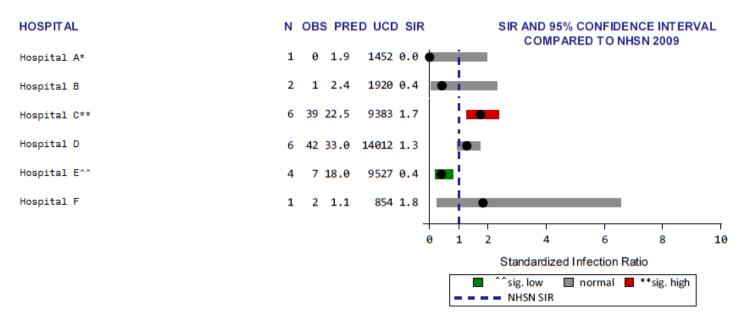
In this report, statistical analyses were performed using SAS version 9.3. Tables and figures were created using SAS version 9.3 and/or Microsoft Excel.

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

Facility-Specific Standardized Infection Ratios

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





- Hospital A reported CAUTIs from one ICU type (N=1). The facility had zero CLABSIs during 2012 (OBS). Statistically, 1.9 CAUTIs were predicted (PRED) during that time, based on the number of urinary catheter-days (UCD) in Hospital A's ICU and the national NHSN rate for that type of ICU. The standardized infection ratio (SIR) is 0.0. This result was not significantly different from the NHSN baseline SIR, as the gray bar (95% confidence interval) crosses the dotted line. Although this hospital's SIR was not significantly lower than the national baseline, the asterisk (*) next to the hospital name indicates that this hospital had zero CAUTIs during the reporting period.
- Hospital B reported CAUTIs from two ICUs. This facility had one CAUTI during 2012, statistically, 2.4 CAUTIs were predicted during that time period. The SIR is 0.4 and is not significantly different from the NHSN baseline SIR because the gray bar (95% confidence interval) crosses the line indicating the NHSN SIR of 1.
- Hospital C reported CAUTIs from six ICUs and had 39 CAUTIs in 2012. Only 22.5 CAUTIs were predicted because on the number of urinary catheter-days and ICU types. Hospital C has a SIR of 1.7, the red bar representing the 95% confidence interval does not cross the NHSN baseline SIR of 1, indicating the SIR is significantly higher than the baseline SIR.
- Hospital D reported CAUTIs from six ICUs. This facility had 42 CAUTIs during 2012, statistically, 33 CAUTIs were predicted during that time period. The SIR is 1.3 and is not significantly different from the NHSN baseline SIR because the gray bar crosses the line indicating the NHSN SIR of 1.
- Hospital E reported CAUTIs from four ICUs. This facility reported seven CAUTIs during 2012, compared to the 18 infections that were predicted based on NHSN baseline data. The SIR is 0.4, meaning that the facility had 60% fewer CAUTIs than predicted. The bar representing the 95% confidence interval is green, indicating that the facility's SIR is significantly lower than the NHSN baseline SIR.
- Hospital F reported CAUTIs from one ICU. This facility had two CAUTIs during 2012, statistically, 1.1 CAUTIs were predicted during that time period. The SIR is 1.8 and is not significantly different from the NHSN baseline SIR because the gray bar (95% confidence interval) crosses the line indicating the NHSN SIR of 1.

Figure 3: Example Facility-Specific Summary Pages

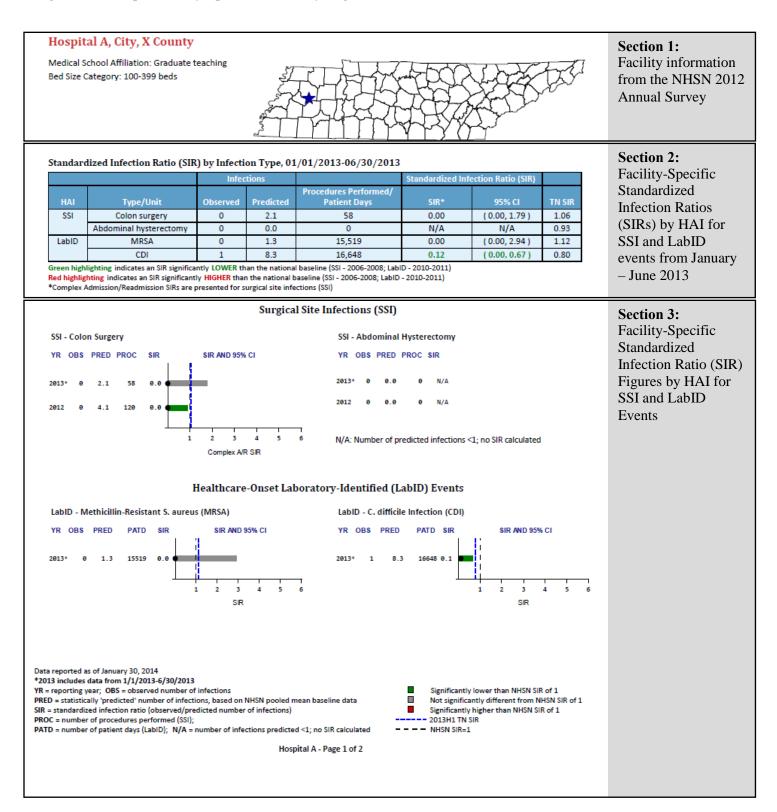
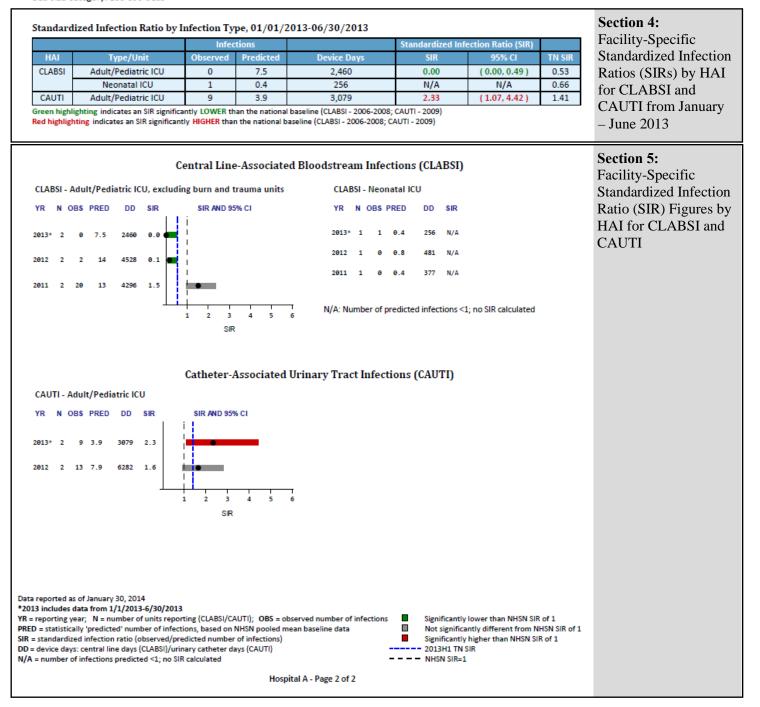


Figure 4: Example Facility-Specific Summary Pages

Hospital A, City, X County

Medical School Affiliation: Graduate teaching Bed Size Category: 100-399 beds



Figures <u>3</u> and <u>4</u> are examples of a facility-specific summary page. Section 1 includes general information about the facility from the NHSN 2012 Annual Hospital Survey. Section 2 is a summary table which shows facility-specific standardized infection ratios (SIRs) for SSI and LabID events if the facility was eligible to report on them from January-June 2013. Section 3 consists of SIR plots for SSI and LabID events; SSI figures include the facility's SIR from calendar year 2012 in addition to January-June 2013. If a facility was not subject to SSI reporting requirements in 2012 or 2013 because they did not perform enough eligible procedures, this is noted at the beginning of section 3.

Facilities with intensive care units (ICUs) subject to CLABSI and CAUTI reporting requirements from 2011-2013 will have a second facility specific summary page. Section 4 is a summary table which shows facility-specific standardized infection ratios (SIRs) for CLABSI and CAUTI from January-June 2013; CLABSI figures include 2011, and 2012, and 2013 (Jan – June) data and CAUTI figures include 2012 and 2013 (Jan – June) data if the facility had eligible ICUs reporting during that period. If a facility does not have any ICUs eligible for CLABSI or CAUTI reporting requirements, this is noted at the bottom of section 3 on the first page.

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

	Infection		tions	ions		Standardized Infection Ratio (SIR)			
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR		
SSI	Colon surgery	0	2.1	58	0.00	(0.00, 1.79)	1.06		
	Abdominal hysterectomy	0	0.0	0	N/A	N/A	0.93		
LabID	MRSA	0	1.3	15,519	0.00	(0.00, 2.94)	1.12		
	CDI	1	8.3	16,648	0.12	(0.00, 0.67)	0.80		

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011)

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

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

This hospital performed 58 colon procedures and 2.1 complex admissions/readmission surgical site infections (SSIs) were predicted based on the number of procedures performed and the risk associated with each procedure. The facility had zero SSIs following colon procedures, so their SIR is 0.0. Although this hospital did monitor SSIs following abdominal hysterectomies, the facility did not perform any abdominal hysterectomy procedures in the first half of 2013. The number of observed infections, predicted infections and procedures performed are all zero, and no SIR is shown because there were no predicted infections.

This facility did not have any healthcare-onset MRSA bacteremia events during the reporting period. There were 1.3 events predicted based on the number of patient days and other facility characteristics, the facility's SIR is 0.0. This hospital had 1 healthcare-onset *C. difficile* infection (CDI) event during the reporting period. There were 8.3 CDI events predicted based on the number of patient days and other facility characteristics. The facility's SIR is 0.12 and the green highlighting of the SIR and 95% CI indicate that the facility's SIR is significantly lower than the NHSN baseline SIR.

Figure 6: How to Read Facility-Specific SIR Summary Tables

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infe		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	7.5	2,460	0.00	(0.00, 0.49)	0.53
	Neonatal ICU	1	0.4	256	N/A	N/A	0.66
CAUTI	Adult/Pediatric ICU	9	3.9	3,079	2.33	(1.07, 4.42)	1.41

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

Figure 6 is an example of Section 4 from a facility-specific summary page, with the following interpretation:

This hospital had zero CLABSIs in its adult and pediatric ICUs during the reporting period. Statistically, 7.5 CLABSIs were predicted based on the number of device days and the national NHSN rates for the types of ICUs. The SIR is 0.0 and the green highlighting of the SIR and 95% CI indicate that the facility's SIR is significantly lower than the NHSN baseline SIR. This hospital had 1 CLABSI in its Neonatal ICUs during the reporting period and there were 0.4 infections predicted based on the number of device days and the national NHSN rate for the type of ICU. The SIR is not calculated because the number of predicted infections is less than 1.

This hospital reported 9 CAUTIs in its adult and pediatric ICUs during the reporting period and 3.9 infections were predicted. The SIR is 2.33, meaning the facility observed 133% more CAUTIs than predicted. The SIR and 95% CI are highlighted in red to indicate that this facility's SIR is significantly higher than the NHSN national baseline SIR.

Figure 7: How to Read Facility-Specific SIR Figures

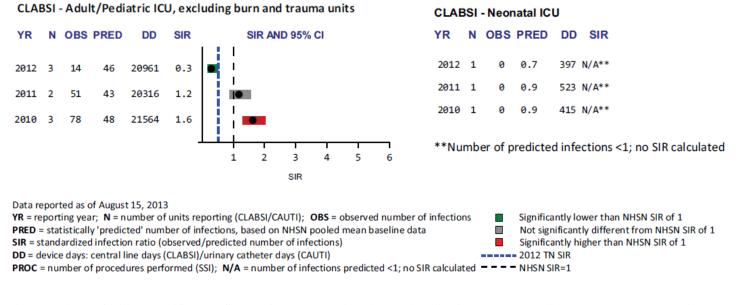


Figure 7 shows facility-specific SIR figures for CLABSI in adult and pediatric ICUs (excluding burn and trauma units) and Neonatal ICUs. In 2012, this facility observed 14 CLABSIs in its adult and pediatric ICUs with 46 infections predicted and a SIR of 0.3. This facility reported CLABSIs from 3 different ICUs, represented by "N" in the figure and reported a total of 20,961 device days (central line days) in 2012. The 2012 SIR is significantly lower than the NHSN baseline SIR of 1, so the bar representing the SIR 95% confidence interval is green.

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

RESULTS

CLABSIs in Adult/Pediatric ICUs:

Total number of hospitals reporting from January-June 2013: 92

SIRs by Quarter (Figure 8)

• From January–March 2010 to April–June 2013, the overall CLABSI SIR in Tennessee decreased from 0.91 to 0.43, with most of the reduction in the SIR occurring after the third quarter of 2009. The U.S. Department of Health and Human Services' *National Action Plan to Prevent Healthcare-Associated Infections* gives a five-year (2013) prevention target of SIR = 0.5.

Key Percentiles for Tennessee SIRs (Tables <u>4-5</u>)

- Excluding burn and trauma ICUs, the overall SIR across all reporting adult and pediatric ICUs in Tennessee from January-June 2013 was statistically significantly lower than the national SIR of 1 (SIR=0.47; 95% CI: 0.38, 0.57). This SIR indicates that the number of CLABSIs in ICUs was 53% lower than expected, compared to national NHSN 2006-8 data. The overall Tennessee SIR for 2013 was lower than the overall SIRs for 2010–2012.
- Including burn and trauma ICUs, the overall SIR across all reporting adult and pediatric ICUs in Tennessee from January-June 2013 was statistically significantly lower than the national SIR of 1 (SIR=0.49; 95% CI: 0.41, 0.59). This SIR indicates that the number of CLABSIs in ICUs was 51% lower than expected, compared to national NHSN 2006-8 data. The overall Tennessee SIR for 2013 was lower than the overall SIRs for 2010–2012.
- In 2013, the median (50th percentile) facility-specific SIR was 0.49, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had a SIR at or below 0.49.

Facility-Specific CLABSI SIRs (Figure 9)

• One CLABSI SIR that accounts for all reporting adult/pediatric ICUs in each facility is displayed in <u>Figure 9</u> for facilities with at least 1 predicted infection. The bar representing the confidence interval is green if the CLABSI SIR was significantly lower than the national SIR of 1 for 2006-8, and red if the CLABSI SIR was significantly higher than 1. Some hospitals reported zero CLABSIs (indicated with an asterisk), although the facility's SIR may not be statistically significant due to a relatively small number of central line-days.

CLABSIs in Neonatal ICUs:

Total number of neonatal ICUs (NICUs) reporting from January-June 2013: 24

CLABSI SIRs by Quarter (Figure 10)

• From January-March 2010 to April–June 2013, the overall CLABSI SIR in Tennessee NICUs fluctuated between a high of 0.96 and a low of 0.45. For the first three quarters of 2012, Tennessee NICUs reached the U.S. Department of Health and Human Services' *National Action Plan to Prevent Healthcare-Associated Infections* five-year (2013) prevention target of SIR = 0.5. For the first quarter of 2013, the overall CLABSI SIR in Tennessee NICUs was 0.76 decreasing to 0.55 for the second quarter of 2013; both SIRs were over the U.S. Department of Health and Human Services' *National Action Plan to Prevent Healthcare-Associated Infections* five-year (2013) prevention target of SIR = 0.5.

Key Percentiles for Tennessee SIRs (Tables <u>6-7</u>)

- The overall SIR across all reporting NICUs in Tennessee from January-June 2013 was statistically significantly lower than the national SIR of 1 (SIR=0.66; 95% CI: 0.45, 0.92). The overall Tennessee SIR from January-June 2013 was higher than the overall SIRs for 2011–2012.
- From January-June 2013, the median (50th percentile) facility-specific SIR was 0.44, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had a SIR at or below 0.44.
- From January-June 2013, the Tennessee CLABSI SIR in level III NICUs was significantly lower than 2006-8

national SIR of 1 (SIR=0.57; 95% CI: 0.34, 0.90). The Tennessee CLABSI SIR in level II/III NICUs was not significantly different from 1 (SIR=0.79; 95% CI: 0.45, 1.29).

Facility-Specific SIRs (Figure 11)

• One NICU CLABSI SIR per facility is displayed in Figure 11 for facilities with at least 1 predicted NICU CLABSI from January-June 2013. The bar representing the confidence interval is green if the CLABSI SIR was significantly lower than the national 2006-8 SIR of 1, and red if the SIR was significantly higher than 1. Some NICUs reported zero CLABSIs (indicated with an asterisk), although the SIR may not be statistically significant due to a relatively small number of central line-days.

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

Total number of facilities reporting from January-June 2013: 9

SIRs by Quarter (Figure 12)

• From July–September 2010 to April–June 2013, the overall CLABSI SIR for Tennessee LTACs fluctuated from a high of 1.11 and a low of 0.49. In the last three quarters of 2012, the overall CLABSI SIR was at or below the U.S. Department of Health and Human Services' five-year (2013) prevention target of SIR = 0.5, but rose above this target in the first 2 quarters of 2013.

Key Percentiles for Tennessee SIRs (Table 8)

- The overall CLABSI SIR across all reporting LTACs in Tennessee from January-June 2013 was no different than the national SIR of 1 (SIR=0.78; 95% CI: 0.57, 1.03). The overall CLABSI SIR across all reporting LTACs in Tennessee SIR from January-June 2013 was higher than the overall SIR for 2012, but lower than the 2011 and 2010 SIR.
- From January-June 2013, the median facility-specific SIR was 0.61, indicating that half of all reporting Tennessee LTACs with at least 1 predicted infection had a SIR at or below 0.61.

CAUTIs in Adult/Pediatric ICUs:

Total number of hospitals reporting from January-June 2013: 93

SIRs by Quarter (Figure 13)

• From January-March 2012 to April–June 2013, the overall CAUTI SIR in Tennessee adult and pediatric ICUs stayed relatively steady between 1.37 and 1.55. The CAUTI SIR increased from the first to second quarter of 2013 and both were significantly higher than the national SIR of 1.

Key Percentiles for Tennessee SIRs (Table 9)

- The overall CAUTI SIR across all reporting adult and pediatric ICUs in Tennessee from January-June 2013 was statistically significantly higher than the national SIR of 1 (SIR=1.40; 95% CI: 1.28, 1.53). This SIR indicates that the number of CLABSIs in ICUs was 40% higher than expected, compared to national NHSN 2009 data.
- From January-June 2013, the median (50th percentile) facility-specific SIR was 1.06, indicating that half of all reporting Tennessee hospitals with at least 1 predicted infection had a SIR at or below 1.06.

Facility-Specific SIRs (Figure 14)

• One CAUTI SIR that accounts for all reporting adult/pediatric ICUs in each facility is displayed in Figure 14 for facilities with at least 1 predicted infection. The bar representing the confidence interval is green if the CLABSI

SIR was significantly lower than the national SIR of 1 for 2009 and red if the CAUTI SIR was significantly higher than 1. Some hospitals reported zero CAUTIs (indicated with an asterisk), although the facility's SIR may not be statistically significant due to a relatively small number of urinary catheter-days.

CAUTIs in Long-Term Care Facilities:

Total number of facilities reporting from January-June 2013: 9

Rates (Figure 15, Table 10)

• During the first quarter of 2013, 43 CAUTIs were reported among 13,830 urinary catheter days, for a crude rate of 3.11 per 1,000 catheter days. The crude CAUTI rate has steadily decreased each quarter, with reporting beginning in October 2012-December 2012.

CAUTIs in Inpatient Rehabilitation Facilities:

Total number of facilities reporting from January-June 2013: 26

Rates (Figure 16, Table 11)

• From April – June 2013, the crude CAUTI rate for IRFs was 1.57 per 1,000 catheter days (6/3830). The previous quarter reported 14 CAUTIs among 3,750 days resulting in 3.73 per 1,000 catheter days.

SSIs Related to CBGB and CBGC Procedures:

Total number of facilities reporting from January-June 2013: 27

SIRs by Quarter (Figure 17)

• From January-March 2010 to April-June 2013, there was no major overall change in the combined All SSI SIR related to CBGB/C procedures in Tennessee. The Complex A/R SIR for SSIs experienced a fluctuation between the second quarter of 2012 through the first quarter of 2013.

Key Percentiles for Tennessee SIRs (Table 12)

- The All SSI SIR for SSIs related to CBGB/C procedures in Tennessee from January-June 2013 was statistically significantly lower than the national SIR of 1 (SIR=0.71; 95% CI: 0.53, 0.92). The All SSI SIR for CBGB/C from January-June 2013 was lower than the SIR for 2012 and 2011.
- From January-June 2013, the median All SSI SIR for CBGB/C procedures was 0.53, indicating that half of reporting facilities with at least 1 predicted infection had an All SSI SIR at or below 0.53.
- The Complex A/R SIR for SSIs related to CBGB/C procedures in Tennessee from January-June 2013 was significantly lower than the national SIR of 1 (SIR=0.50; 95% CI: 0.31, 0.76). The Complex A/R SIR for CBGB/C from January-June 2013 was lower than the SIR for 2012 (SIR=0.75; 95% CI: 0.58, 0.96).
- From January-June 2013, the median Complex A/R SIR for CBGB/C procedures was 0.43, indicating that half of reporting facilities with at least 1 predicted infection had an All SSI SIR at or below 0.43.

SSIs Related to COLO procedures:

Total number of facilities reporting from January-June 2013: 96

SIRs by Quarter (Figure 18)

• From January-March 2012 to April-June 2013, there was no major overall change in the combined All SSI SIR or the Complex A/R SIR for SSIs related to COLO procedures in Tennessee.

Key percentiles for Tennessee SIRs (Table 14)

- The All SSI SIR for SSIs related to COLO procedures in Tennessee from January-June 2013 was not statistically significantly different compared to the national SIR of 1 (SIR=0.91; 95% CI: 0.79, 1.05). The All SSI SIR for SSIs related to COLO procedures was higher compared to the SIR from 2012.
- From January-June 2013, the median All SSI SIR for COLO procedures was 0.73, indicating that half of reporting facilities with at least 1 predicted infection had an All SSI SIR at or below 0.73.
- The Complex A/R SIR for SSIs related to COLO procedures in Tennessee from January-June 2013 was not significantly different from the 2006-8 national SIR of 1 (SIR=1.06; 95% CI: 0.88, 1.27).
- From January-June 2013, the median Complex A/R SIR for COLO procedures was 0.78, indicating that half of reporting facilities with at least 1 predicted infection had a Complex A/R SIR at or below 0.78.

Facility-Specific SIRs (Figure 19)

• The Complex A/R SIR for SSIs related to COLO procedures that accounts for all qualifying colon procedures performed at a given facility is displayed in Figure 19 for facilities with at least 1 predicted infection from January-June 2013. The bar representing the confidence interval is green if the Complex A/R SIR for SSIs related to COLO procedures was significantly lower than the national SIR of 1 for 2009 and red if the SIR was significantly higher than 1. Some hospitals reported zero SSIs (indicated with an asterisk), although the facility's SIR may not be statistically significant due to a relatively small number of procedures performed.

SSIs Related to HYST procedures:

Total number of facilities reporting from January-June 2013: 96

SIRs by Quarter (Figure 20)

• From January-March 2012 to January-March 2013, there was a decrease in the combined All SSI SIR (0.91 to 0.55) followed by an increase during April-June 2013 related to HYST procedures in Tennessee. The Complex A/R SIR decreased during January-March 2012 to October 2012-December 2012 (1.22 to 0.64) but has increased during the first 2 quarters of 2013 (0.89, 0.96 respectively).

Key percentiles for Tennessee SIRs (Table 16)

- The All SSI SIR for SSIs related to HYST procedures in Tennessee from January-June 2013 was statistically significantly lower than the national SIR of 1 (SIR=0.61; 95% CI: 0.46, 0.80).
- From January-June 2013, the median All SSI SIR for HYST procedures was 0.56, indicating that half of reporting facilities with at least 1 predicted infection had an All SSI SIR at or below 0.56.
- The Complex A/R SIR for SSIs related to HYST procedures in Tennessee from January-June 2013 was not significantly different from the 2006-8 national SIR of 1 (SIR=0.93; 95% CI: 0.43, 1.02).
- From January-June 2013, the median Complex A/R SIR for HYST procedures was 0.83, indicating that half of reporting facilities with at least 1 predicted infection had a Complex A/R SIR at or below 0.83.

Facility-Specific SIRs (Figure 21)

• The Complex A/R SIR for SSIs related to HYST procedures that accounts for all qualifying abdominal hysterectomies performed at a given facility is displayed in <u>Figure 21</u> for facilities with at least 1 predicted infection in 2013. The bar representing the confidence interval is green if the Complex A/R SIR for SSIs related to HYST procedures was significantly lower than the national SIR of 1 for 2009 and red if the SIR was significantly higher than 1. Some hospitals reported zero SSIs (indicated with an asterisk), although the facility's SIR may not be statistically significant due to a relatively small number of procedures performed.

MRSA LabID Events in Acute Care Hospitals:

Total number of facilities reporting from January-June 2013: 112

SIRs by Quarter (Figure 22)

• From January-March 2012 to April-June 2013, the overall HO MRSA LabID SIR in acute care hospitals in Tennessee was between 1.12 and 1.58, significantly higher than the national baseline, and higher than the U.S. Department of Health and Human Services' prevention target of SIR = 0.75.

Key percentiles for Tennessee SIRs (Table 18)

- The overall HO MRSA LabID SIR for acute care hospitals in Tennessee from January-June 2013 was no different than the national SIR of 1 (SIR=1.12; 95% CI: 0.96, 1.30).
- From January-June 2013, the median HO MRSA LabID SIR for acute care hospitals was 1.07, indicating that half of reporting facilities with at least 1 predicted infection had a HO MRSA LabID SIR at or below 1.07.

Healthcare Facility-Onset and Community-Onset MRSA LabID Rates (Figure 23, Table 19)

• From July-September 2010 to April-June 2013 the incidence of healthcare facility-onset MRSA LabID events has fluctuated between 0.88 and 1.38 events per 10,000 patient-days, with a slight downward trend since January-March 2011. The prevalence of community-onset MRSA LabID events for 2013 was 1.61 per 1,000 admissions and previous years were 1.65 and 1.66 per 1,000 admissions (2012, 2011 respectively).

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

Total number of facilities reporting in this period: 9

Healthcare Facility-Onset and Community-Onset MRSA LabID Rates (Table 20, Figure 25)

• From July-September 2010 to April-June 2013 the incidence of healthcare facility-onset MRSA LabID events in LTAC facilities has increased from 1.23 to 4.50 events per 10,000 patient-days, with a particularly sharp increase between July-September 2011 and October-December 2011. The prevalence of community-onset MRSA LabID events in LTAC facilities was between 0 and 2.26 events per 1,000 admissions from July-September 2010 to April-June 2013.

CDI LabID Events in Acute Care Hospitals:

Total number of facilities reporting from January-June 2013: 112

SIRs by Quarter (Figure 26)

• From January-March 2012 to April-June 2013, the overall HO CDI LabID SIR in acute care hospitals in Tennessee was between 0.71 and 0.80, slightly above the U.S. Department of Health and Human Services' prevention target of SIR = 0.70.

Key percentiles for Tennessee SIRs (Table 21)

- The overall HO CDI LabID SIR for acute care hospitals in Tennessee from January-June 2013 was statistically significantly lower than the national SIR of 1 (SIR=0.77; 95% CI: 0.73, 0.82).
- From January June 2013, the median HO CDI LabID SIR for acute care hospitals was 0.64, indicating that half of reporting facilities with at least 1 predicted infection had a HO CDI LabID SIR at or below 0.64.

Healthcare Facility-Onset and Community-Onset CDI LabID Rates (Figure 27, Table 22)

• From July-September 2010 to April-June 2013 the incidence of healthcare facility-onset CDI LabID events has increased from 4.5 to 5.8 events per 10,000 patient-days, with a peak of 5.8 events per 10,000 patient-days in July-September 2012. The prevalence of community-onset CDI LabID events increased from 1.9 to 3.3 events per 1,000 admissions from July-September 2010 to April-June 2013. There was no significant change in the prevalence of community-onset healthcare facility-associated CDI LabID events from July-September 2010 to April-June 2013.

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

Total number of facilities reporting from January-June 2013: 9

Healthcare Facility-Onset and Community-Onset CDI LabID Rates (Table 23, Figure 29)

• From July-December 2010 to April-June 2013 the incidence of healthcare facility-onset CDI LabID events has fluctuated between 8.3 and 17.2 events per 10,000 patients. The prevalence of community-onset CDI LabID events was between 0 and 6.1 events per 1,000 admissions from July-December 2010 to April-June 2013. There was no significant change in the prevalence of community-onset healthcare facility-associated CDI LabID events in LTAC facilities from July-December 2010 to April-June 2013.

CLABSI FIGURES AND TABLES

Adult and Pediatric Critical Care Units

Figure 8: Standardized Infection Ratios (SIR) for Central Line-Associated Bloodstream Infections (CLABSIs) for Adult and Pediatric Intensive Care Units (ICUs) by Quarter, Excluding Burn and Trauma ICUs, Tennessee, 01/01/2008–06/30/2013 [Reference standard: National Healthcare Safety Network (NHSN), 2006-8]

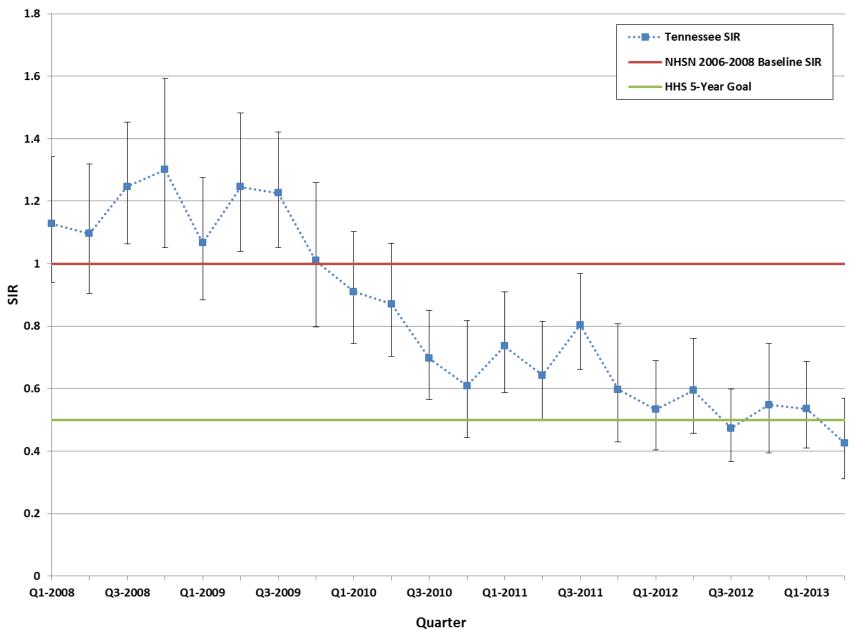


Table 4: Key Percentiles for Facility-Specific Central Line-Associated Bloodstream Infection (CLABSI) Standardized Infection Ratios (SIRs) in Adult and Pediatric Intensive Care Units (ICUs) by Reporting Year, Excluding Burn and Trauma ICUs, Tennessee, 01/01/2010 - 06/30/2013

							SIR AND 9 CONFIDEN INTERVA	ICE	DISTRIBUTION O	F FACI	LITY-S	PECIFI	C SIRs	
STATE	YEAR	No.	CL DAYS	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	No. of FACS WITH ≥1 PRED INFECTION	10%	25%	50%	75%	90%
	2013^	92	115,198	106	225.73	0.47	0.38	0.57	44	0.00	0.00	0.54	0.81	1.26
Tannaaaaa	2012	93	228,133	230	433.49	0.53	0.46	0.60	51	0.00	0.18	0.45	0.82	1.39
Tennessee	2011	93	227,518	306	429.88	0.71	0.63	0.80	53	0.00	0.35	0.63	1.08	1.84
	2010	83	227,201	339	433.70	0.78	0.70	0.87	51	0.27	0.42	0.60	1.02	1.99

Data reported as of March 4, 2014

^Only includes 2013 data from 01/01/2013-06/30/2013

No. = number of facilities; CL Days = central line days; OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI; SIR = standardized infection ratio (observed/predicted number of CLABSI)

Key percentiles include facilities with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than national 2006-2008 SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than national 2006-2008 SIR of 1.0

Table 5: Key Percentiles for Facility-Specific Central Line-Associated Bloodstream Infection (CLABSI) Standardized Infection Ratios (SIRs) in Adult and Pediatric Intensive Care Units (ICUs) by Reporting Year, Including Burn and Trauma Units, Tennessee, 01/01/2010 - 06/30/2013

							SIR AND 9 CONFIDEN INTERVA	ICE	DISTRIBUTION O	F FACI	LITY-S	PECIFI	C SIRs	
STATE	YEAR	No.	CL DAYS	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	No. of FACS WITH ≥1 PRED INFECTION	10%	25%	50%	75%	90%
	2013^	92	122,519	122	249.00	0.49	0.41	0.59	44	0.00	0.00	0.49	0.81	1.15
Tanaaaaa	2012	93	245,063	278	499.61	0.56	0.49	0.63	51	0.00	0.17	0.45	0.84	1.39
Tennessee	2011	93	247,284	371	508.33	0.73	0.66	0.81	53	0.00	0.36	0.63	1.08	1.77
	2010	83	237,781	390	475.57	0.82	0.74	0.91	51	0.27	0.41	0.66	1.02	1.83

Data reported as of March 4, 2014

^Only includes 2013 data from 01/01/2013-06/30/2013

Includes burn and trauma ICU data since July 2010

No. = number of facilities; CL Days = central line days; OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI; SIR = standardized infection ratio (observed/predicted number of CLABSI)

Key percentiles include facilities with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than national 2006-2008 SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than national 2006-2008 SIR of 1.0

Figure 9: CLABSI Standardized Infection Ratio (SIR) for Adult and Pediatric Intensive Care Units in Facilities with ≥1 Predicted CLABSI, Tennessee, 01/01/2013 – 06/30/2013

HOSPITAL	N	OB	S PRED	CLD	SIR	SIR AND 95% CONFIDENCE INTERVAL COMPARED TO NHSN 2006-2008
Baptist Memorial Hospital- Memphis	3	9	14.2	8371	0.6	
Blount Memorial Hospital*	2	0	2.1	1399	0.0	
Bristol Regional Medical Center	2	1	4.4	2288	0.2	•
Centennial Medical Center	5	4	9.5	4895	0.4	•
Cookeville Regional Medical Center	2	5	4.0	2748	1.3	•
East Tennessee Children's Hospital*	1	0	1.7	562	0.0	
Erlanger Medical Center	6	7	9.9	4528	0.7	
Fort Sanders Regional Medical Center	3	3	4.2	2195	0.7	•
Gateway Medical Center	1	1	1.6	1064	0.6	•
Hendersonville Medical Center	1	2	1.0	691	2.0	•
Holston Valley Medical Center	5	5	6.1	2688	0.8	
Jackson Madison County General Hosp.^^	6	0	17.9	5885	0.0	
Johnson City Medical Center	3	3	5.7	2839	0.5	•
MCJ Children's Hospital at Vanderbilt^^	2	2	12.5	3927	0.2	
Maury Regional Medical Center	1	1	2.8	1922	0.4	•
Memorial Healthcare System	4	3	4.4	2193	0.7	•
Methodist Healthcare Germantown*	2	0	3.1	2093	0.0	
Methodist Healthcare LeBonheur^^	2	0	7.5	2460	0.0	
					(
						Standardized Infection Ratio
Data Reported from adult/pediatric ICUs as of March 4, 2	014					^^sig. low ■ normal ■ **sig. high NHSN SIR

Data Reported from adult/pediatric ICUs as of March 4, 2014. N = number of types of intensive care units reporting OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

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

CLD = number of central line days

NA = data not shown for hospitals with <50 central line days

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

Figure 9 (cont'd)

HOSPITAL	N	OBS	PRED	CLD SIR	2	SIR AND 95% CONFIDENCE INT COMPARED TO NHSN 2006	
Methodist Healthcare North	4	1	4.4	2580 0.3	2	-	
Methodist Healthcare South*	1	0	1.1	732 0.0	0		
Methodist Medical Center of Oak Ridge	1	3	3.1	2091 1.0	0	•	
Methodist University Hospital^^	5	3	14.0	6262 0.3	2		
Nashville General Hospital at Meharry	1	3	1.4	666 2.3	1	•	
North Knoxville Medical Center	1	1	1.0	530 1.0	0	 	
Parkridge Medical Center	2	4	3.5	1657 1.3	1	•	
Parkwest Medical Center- Knoxville	1	3	3.9	2654 0.8	8	•	
Physician's Regional Medical Center	2	2	3.0	2022 0.3	7	•	
Regional Hospital of Jackson*	1	0	1.2	799 0.0	0		
Regional One Health (Reg. Med.Ctr Memphi	1	5	3.3	1562 1.	5	•	
SkyRidge Medical Center	2	2	3.5	1682 0.0	6	-	
Skyline Medical Center	2	2	3.5	1977 0.0	6	-	
Southern Hills Medical Center	1	3	1.2	823 2.	5	•	
St. Francis Bartlett*	1	0	1.7	1142 0.0	0		
St. Francis Hospital- Memphis	3	4	4.0	2815 1.0	0	•	
St. Thomas Midtown (Baptist - Nashville)	4	4	5.5	2788 0.3	7	•	
					0		8
					-	Standardized Infection Ratio	-
					Г	^^sig. low	, high

Data Reported from adult/pediatric ICUs as of March 4, 2014. N = number of types of intensive care units reporting

OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

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

CLD = number of central line days

NA = data not shown for hospitals with <50 central line days

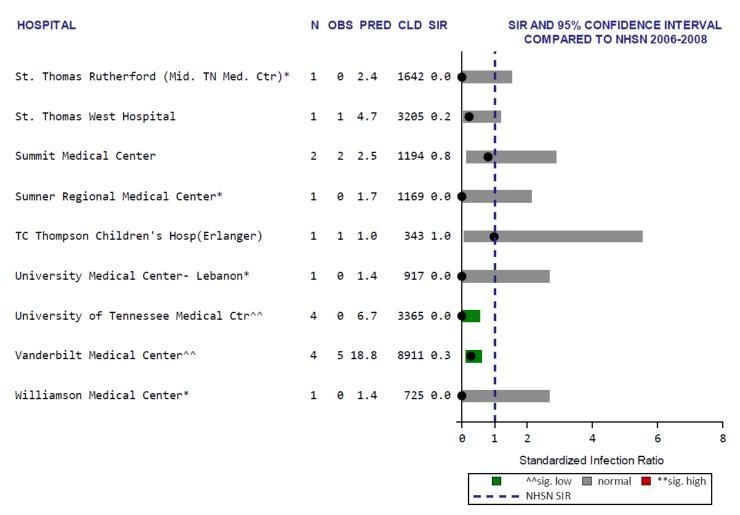
** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

- - - NHSN SIR

Figure 9 (cont'd)



Data Reported from adult/pediatric ICUs as of March 4, 2014.

N = number of types of intensive care units reporting

OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI, based on NHSN baseline data

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

CLD = number of central line days

NA = data not shown for hospitals with <50 central line days

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

CLABSI FIGURES AND TABLES

Neonatal Critical Care Units

Figure 10: Central Line-Associated Bloodstream Infection (CLABSI) Standardized Infection Ratios (SIRs) for Neonatal Intensive Care Units (NICUs) by Quarter, Tennessee, 07/01/2008–06/30/2013 [Reference standard: National Healthcare Safety Network (NHSN), 2006-8]

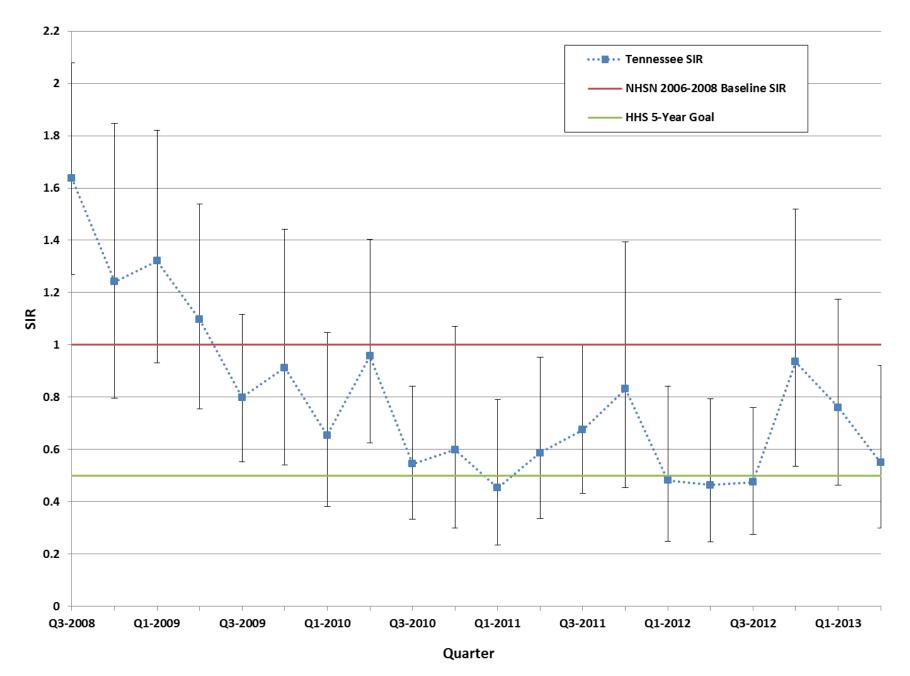


Table 6: Key Percentiles for Facility-Specific Central Line-Associated Bloodstream Infection (CLABSI) Standardized Infection Ratios (SIRs) in Neonatal Intensive Care Units (NICUs) by Reporting Year, Tennessee, 01/01/2010 - 06/30/2013

							SIR AND 9 CONFIDEN INTERVA	ICE	DISTRIBUTION O	F FACI	LITY-S	PECIFI	C SIRs	
STATE	YEAR	No.	CL DAYS	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	No. of FACS WITH ≥1 PRED INFECTION	10%	25%	50%	75%	90%
	2013^	24	22,170	34	51.77	0.66	0.45	0.92	13	0.00	0.00	0.44	0.76	1.44
T	2012	24	46,555	58	105.89	0.55	0.42	0.71	13	0.00	0.19	0.46	0.70	0.94
Tennessee 	2011	24	45,962	66	106.15	0.62	0.48	0.79	14	0.18	0.33	0.66	0.88	1.47
	2010	24	47,484	74	108.19	0.68	0.54	0.86	13	0.35	0.45	0.57	1.08	1.24

Data reported as of March 4, 2014

^Only includes 2013 data from 01/01/2013-06/30/2013

No. = number of facilities; CL DAYS = central line days; OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI; SIR = standardized infection ratio (observed/predicted number of CLABSI)

Key percentiles include facilities with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than national 2006-2008 SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than national 2006-2008 SIR of 1.0

Table 7: Key Percentiles for Unit-Specific Central Line-Associated Bloodstream Infection (CLABSI) Standardized Infection Ratios (SIRs) by NICU Type and Reporting Year, Tennessee, 01/01/2010 - 06/30/2013

				No. of INF	ECTIONS		BIR AND 9 ONFIDEN INTERVA	ICE	DISTRIBUTION O	F FACI	LITY-S	PECIFI	C SIRs	
ICU TYPE	YEAR	No.	CL DAYS	OBS			LOWER LIMIT	UPPER LIMIT	No. of FACS WITH ≥1 PRED INFECTION	10%	25%	50%	75%	90%
	2013^	18	8,634	16	20.15	0.79	0.45	1.29	7	0.00	0.00	0.28	1.13	1.74
	2012	18	16,457	27	36.83	0.73	0.48	1.07	7	0.00	0.00	0.55	0.94	1.60
leonatal ICU Level II/III	2011	17	14,800	20	30.63	0.65	0.40	1.01	7	0.14	0.37	0.59	0.88	1.63
	2010	17	15,193	26	32.72	0.79	0.52	1.16	6	0.00	0.44	0.70	0.96	1.08
	2013^	6	13,536	18	31.61	0.57	0.34	0.90	6	0.00	0.31	0.51	0.62	1.44
	2012	7	30,098	31	69.06	0.45	0.30	0.64	6	0.00	0.19	0.43	0.66	0.70
Neonatal ICU Level III	2011	7	31,162	46	75.52	0.61	0.45	0.81	7	0.18	0.24	0.73	0.94	1.47
	2010	7	32,291	48	75.47	0.64	0.47	0.84	7	0.35	0.45	0.57	1.24	1.26

Data reported as of March 4, 2014

^Only includes 2013 data from 01/01/2013-06/30/2013

No. = number of facilities; CL DAYS = central line days; OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI; SIR = standardized infection ratio (observed/predicted number of CLABSI)

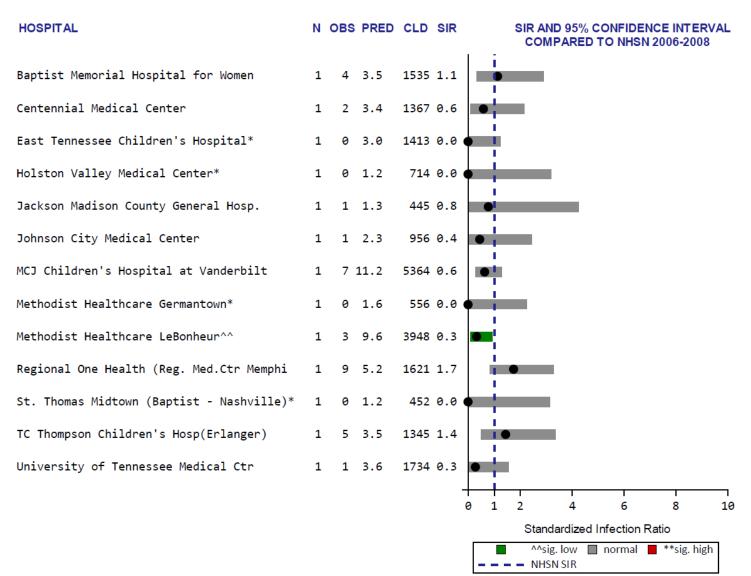
NA = not reported if the number of facilities is <5

Key percentiles include units with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than national 2006-2008 SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than national 2006-2008 SIR of 1.0

Figure 11: CLABSI Standardized Infection Ratio (SIR) for Neonatal Intensive Care Units in Facilities with ≥1 Predicted CLABSI, Tennessee, 01/01/2013 – 06/30/2013



Data Reported from adult/pediatric ICUs as of March 4, 2014.

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

CLABSI FIGURES AND TABLES

Long-term Acute Care Facilities

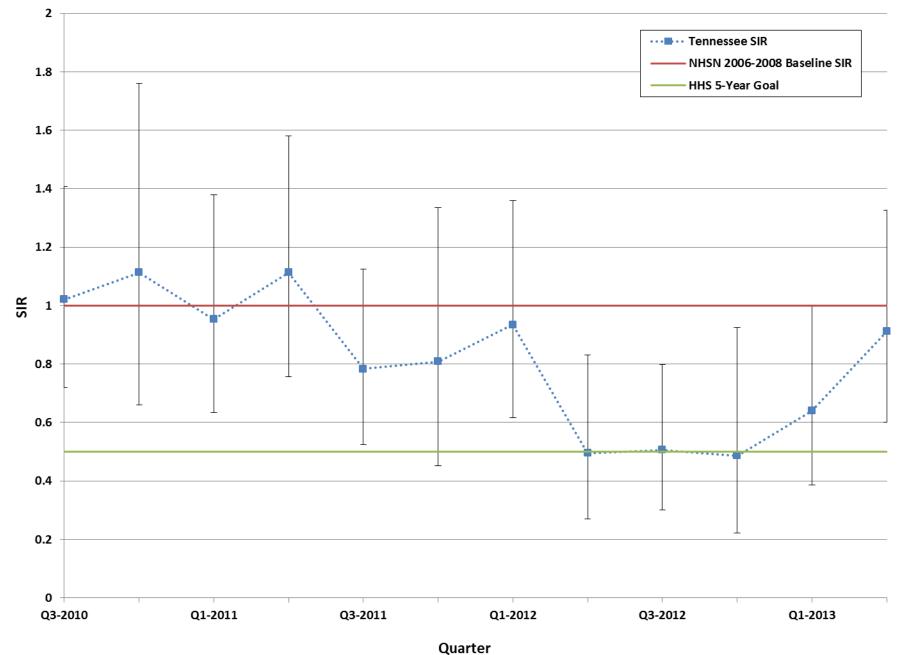


Figure 12: Standardized Infection Ratio (SIR) for Central Line-Associated Bloodstream Infections (CLABSIs) for Long-term Acute Care (LTAC) Facilities by Quarter, Tennessee, 07/01/2010–06/30/2013 [Reference standard: National Healthcare Safety Network (NHSN), 2006-8]



Table 8: Key Percentiles for Facility-Specific Central Line-Associated Bloodstream Infection (CLABSI) Standardized Infection Ratios (SIRs) in Long-term Acute Care (LTAC) Facilities by Reporting Year, Tennessee, 07/01/2010 - 06/30/2013

							SIR AND 9 CONFIDEN INTERVA	ICE	DISTRIBUTION O	F FACI	LITY-S	PECIFI	C SIRs	
STATE	YEAR	No.	CL DAYS	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	No. of FACS WITH ≥1 PRED INFECTION	10%	25%	50%	75%	90%
	2013^	9	34,337	46	59.29	0.78	0.57	1.03	9	0.22	0.48	0.61	1.18	1.43
T	2012	9	64,435	68	111.26	0.61	0.47	0.77	9	0.17	0.50	0.57	0.81	1.11
Tennessee	2011	9	65,311	103	112.78	0.91	0.75	1.11	9	0.07	0.48	1.00	1.45	1.50
	2010	9	30,342	55	52.39	1.05	0.79	1.37	9	0.00	0.45	1.26	1.42	2.66

Data reported as of March 4, 2014

^Only includes 2013 data from 01/01/2013-06/30/2013

No. = number of facilities; CL DAYS = central line days; OBS = observed number of CLABSI

PRED = statistically 'predicted' number of CLABSI; SIR = standardized infection ratio (observed/predicted number of CLABSI)

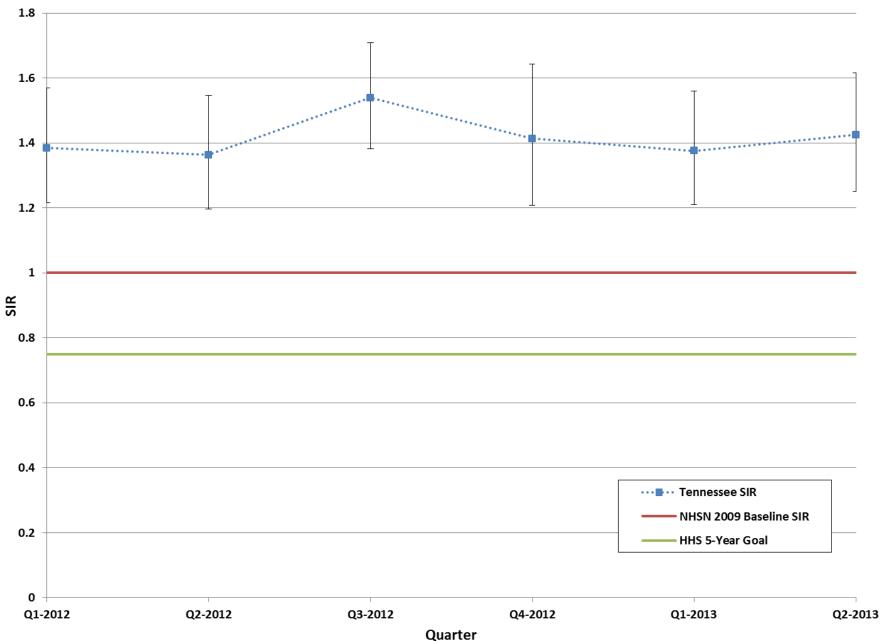
Key percentiles include facilities with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than national 2006-2008 SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than national 2006-2008 SIR of 1.0

CAUTI FIGURES AND TABLES

Adult and Pediatric Critical Care Units



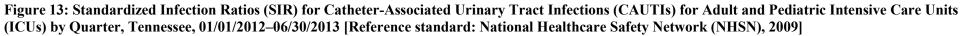


Table 9: Key Percentiles for Facility-Specific Catheter-Associated Urinary Tract Infection (CAUTI) Standardized Infection Ratios (SIRs) in Adult and Pediatric Intensive Care Units (ICUs) by Reporting Year, Tennessee, 01/01/2012 - 06/30/2013

				No. of INF	ECTIONS		SIR AND 9 CONFIDEN INTERVA	ICE	DISTRIBUTION O	F FACI	LITY-S	PECIFI	C SIRs	
STATE	YEAR	No.	UC DAYS	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	No. of FACS WITH ≥1 PRED INFECTION	10%	25%	50%	75%	90%
Талиала	2013^	92	166,920	488	348.65	1.40	1.28	1.53	51	0.00	0.41	1.06	1.71	2.33
Tennessee	2012	93	332,741	1004	699.85	1.43	1.35	1.53	67	0.00	0.39	1.16	1.82	2.44

Data reported as of March 4, 2014

^Only includes 2013 data from 01/01/2013-06/30/2013

No. = number of facilities; UC DAYS = urinary catheter days; OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI; SIR = standardized infection ratio (observed/predicted number of CAUTI)

Key percentiles include facilities with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than national 2009 SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than national 2009 SIR of 1.0

Figure 14: CAUTI Standardized Infection Ratio (SIR) for Adult and Pediatric Intensive Care Units in Facilities with ≥1 Predicted CAUTI, Tennessee, 01/01/2013 – 06/30/2013

HOSPITAL	N	ов	S PF	RED	UCD	SIR	SIR AND 95% CONFIDENCE INTERVAL COMPARED TO NHSN 2009
Baptist Memorial Hospital- Collierville	1	1	1.	1	496	0.9	
Baptist Memorial Hospital- Memphis	3	26	19.	3	8993	1.3	
Blount Memorial Hospital	2	2	2.0	6	2016	0.8	
Bristol Regional Medical Center	2	4	7.8	8	3636	0.5	
Centennial Medical Center	5	10	14.3	1	6056	0.7	
Cookeville Regional Medical Center	2	3	5.4	4	3998	0.6	
Cumberland Medical Center	1	1	1.	5	1127	0.7	•
Dyersburg Regional Medical Center*	1	0	1.3	1	554	0.0	
Erlanger Medical Center**	7	50	20.3	1	7475	2.5	
Fort Sanders Regional Medical Center**	3	24	8.3	2	2969	2.9	
Gateway Medical Center	1	2	1.8	8	1443	1.1	
Holston Valley Medical Center**	6	20	9.3	3	3890	2.2	
Indian Path Medical Center*	1	0	1.3	3	1007	0.0	
Jackson Madison County General Hosp.	6	27	18.3	1	7676	1.5	
Johnson City Medical Center	4	11	10.4	4	4221	1.1	
LeConte Medical Center*	1	0	1.3	2	940	0.0	
MCJ Children's Hospital at Vanderbilt	2	1	2.	5	910	0.4	
						-	
							Standardized Infection Ratio
							^^sig. low 🔲 normal 📕 **sig. high
							— — — — NHSN SIR

Data Reported from adult/pediatric ICUs as of March 4, 2014. N = number of types of intensive care units reporting OBS = observed number of CAUTI PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data SIR = standardized infection ratio (observed/predicted number of CAUTI)

UCD = number of urinary catheter days

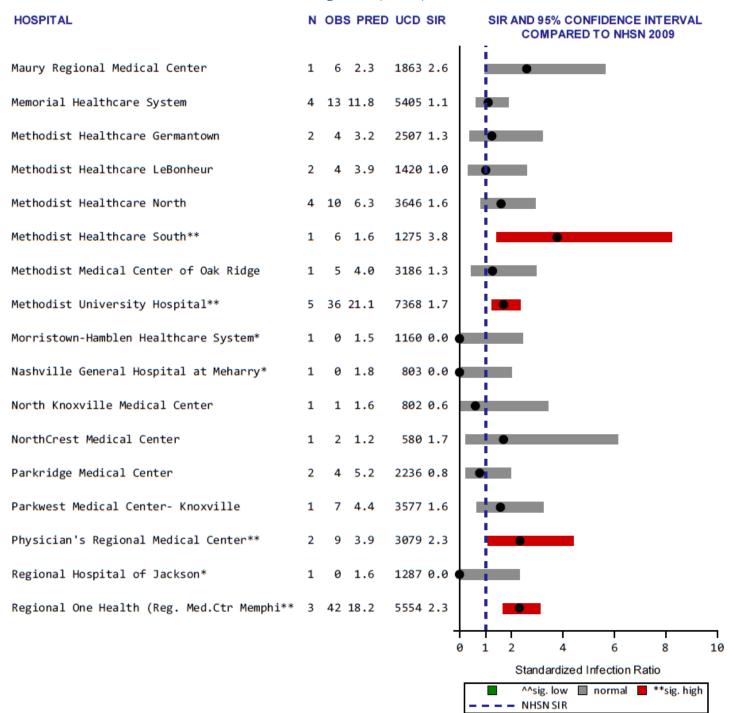
NA = data not shown for hospitals with <50 urinary catheter days

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

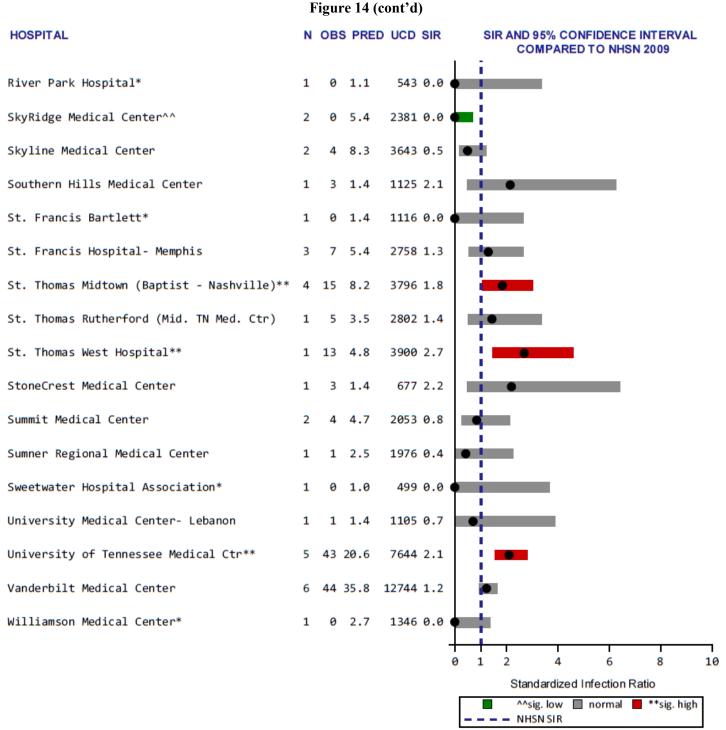
Figure 14 (cont'd)



Data Reported from adult/pediatric ICUs as of March 4, 2014.

N = number of types of intensive care units reporting

- OBS = observed number of CAUTI
- PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data
- SIR = standardized infection ratio (observed/predicted number of CAUTI)
- UCD = number of urinary catheter days
- NA = data not shown for hospitals with <50 urinary catheter days
- ** Significantly higher than national baseline
- ^^ Significantly lower than national baseline
- * Zero infections, but not statistically significant



Data Reported from adult/pediatric ICUs as of March 4, 2014.

N = number of types of intensive care units reporting

OBS = observed number of CAUTI

PRED = statistically 'predicted' number of CAUTI, based on NHSN baseline data

SIR = standardized infection ratio (observed/predicted number of CAUTI) UCD = number of urinary catheter days

NA = data not shown for hospitals with <50 urinary catheter days

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

CAUTI FIGURES AND TABLES

Long-term Acute Care Facilities

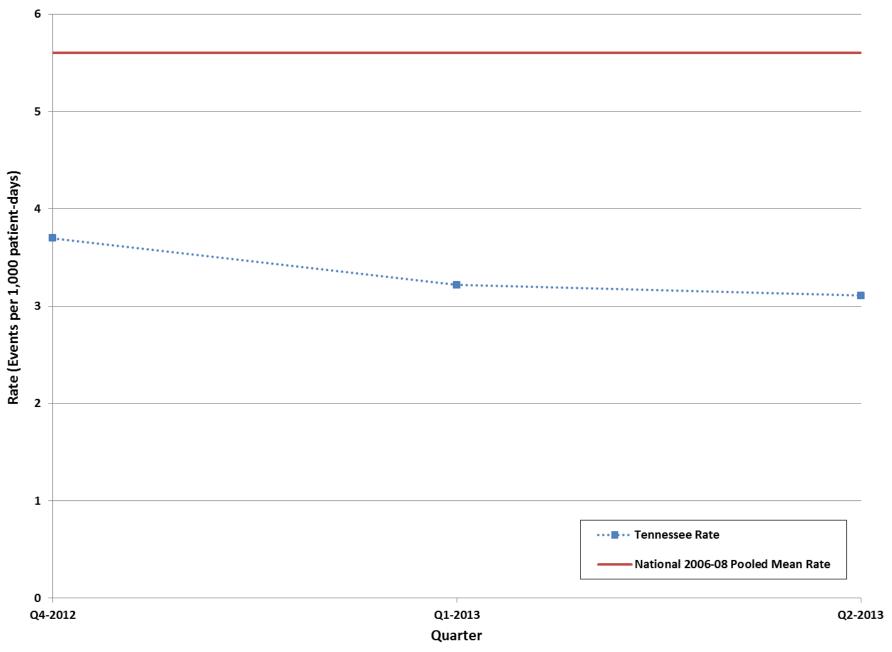


Figure 15: Crude (Unadjusted) Rate of Catheter-Associated Urinary Tract Infections (CAUTI) and Catheter Utilization Rates for Long-Term Acute Care Facilities (LTACs) by Quarter, Tennessee, 10/01/2012 - 06/30/2013 [Reference standard: National Healthcare Safety Network (NHSN), 2006-08]

Table 10: Crude (Unadjusted) Rate of Catheter-Associated Urinary Tract Infections (CAUTI) and Catheter Utilization Rates for Long-Term Acute Care Facilities (LTACs) by Quarter, Tennessee, 10/01/2012 - 06/30/2013

STATE	YEAR	QUARTER	No. of facilities	CAUTI	UC DAYS	CAUTI RATE*	PATIENT DAYS	DU RATE
Tennessee	2013	2	9	43	13,830	3.11	26,022	0.53
	2013	1	9	45	13,990	3.22	26,337	0.53
	2012	4	9	50	13,528	3.70	25,024	0.54

Data reported as of March 4, 2014

CAUTI = observed number of CAUTI; UC DAYS = urinary catheter days DU RATE = device utilization rate *Per 1000 catheter days

CAUTI FIGURES AND TABLES

Inpatient Rehabilitation Facilities

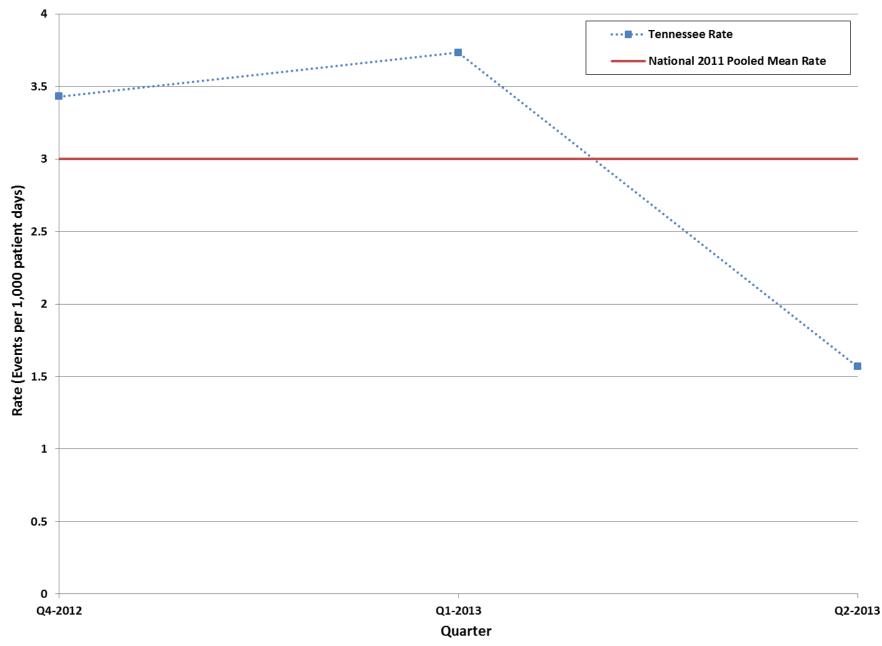


Figure 16: Crude (Unadjusted) Rate of Catheter-Associated Urinary Tract Infections (CAUTI) and Catheter Utilization Rates for Inpatient Rehab Facilities (IRFs) by Quarter, Tennessee, 10/01/2012 - 06/30/2013 [Reference standard: National Healthcare Safety Network (NHSN), 2011]

 Table 11: Crude (Unadjusted) Rate of Catheter-Associated Urinary Tract Infections (CAUTI) and Catheter Utilization Rates for Inpatient Rehab

 Facilities (IRFs) by Quarter, Tennessee, 10/01/2012 - 06/30/2013

STATE	YEAR	QUARTER	No. of facilities	CAUTI	UC DAYS	CAUTI RATE*	PATIENT DAYS	DU RATE
Tennessee	2013	2	26	6	3830	1.57	46,974	0.08
	2013	1	26	14	3750	3.73	47,081	0.08
	2012	4	25	11	3207	3.43	45,893	0.07

Data reported as of March 4, 2014

CAUTI = observed number of CAUTI; UC DAYS = urinary catheter days DU RATE = device utilization rate *Per 1000 catheter days

SSI FIGURES AND TABLES

CBGB/CBGC Procedures

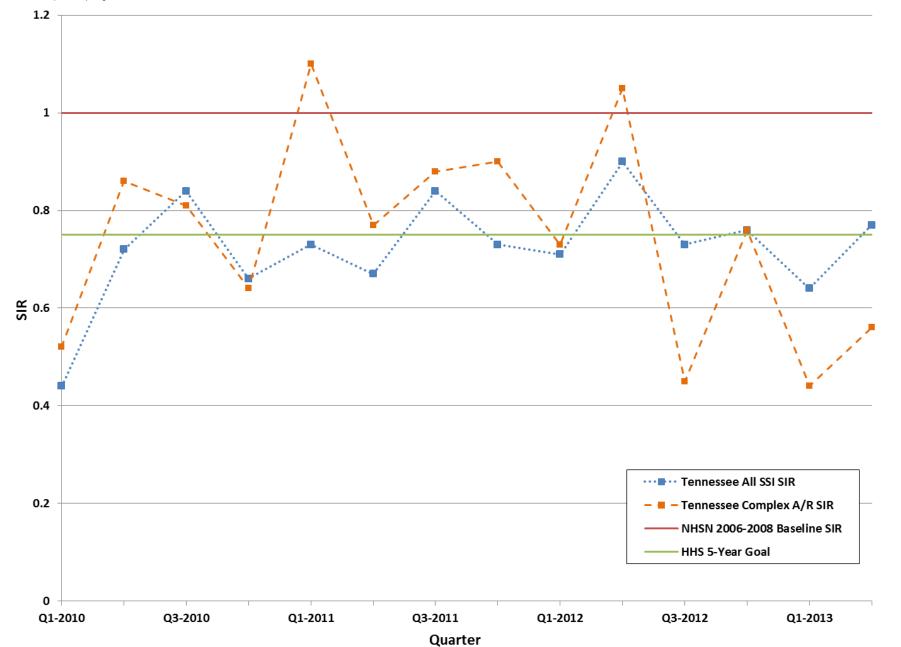


Figure 17: Coronary Artery Bypass Graft (CBGB/C) All and Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) by Quarter, Tennessee, 01/01/2010–06/30/2013

 Table 12: Coronary Artery Bypass Graft (CBGB/C) All and Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) by Year, Tennessee, 01/01/2010 - 06/30/2013

					No. of INF	ECTIONS		95% CONI INTERVAL		DISTRIB		F FACIL	ITY-SPE	CIFIC SIF	ls
STATE	SIR TYPE	YEAR	No.	PROCS	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	No. of FACS WITH ≥1 PRED INFECTION	10%	25%	50%	75%	90%
		2013^	27	3,469	54	76.61	0.71	0.53	0.92	21	0.00	0.18	0.53	1.40	1.87
		2012	26	7,062	120	155.06	0.77	0.64	0.93	26	0.15	0.44	0.64	1.15	1.99
	All Procedures	2011	27	7,450	122	164.31	0.74	0.62	0.89	25	0.00	0.29	0.71	1.03	1.58
T		2010	26	8,180	118	178.04	0.66	0.55	0.79	25	0.11	0.32	0.65	1.05	1.64
Tennessee		2013^	27	3,469	21	42.09	0.50	0.31	0.76	18	0.00	0.00	0.43	0.90	1.81
		2012	26	7,062	63	84.06	0.75	0.58	0.96	22	0.00	0.00	0.71	1.10	1.56
	Complex A/R	2011	27	7,450	81	88.80	0.91	0.72	1.13	23	0.00	0.00	0.70	1.36	1.80
		2010	26	8,180	68	95.91	0.71	0.55	0.90	23	0.00	0.18	0.68	1.04	1.83

Data reported as of March 4, 2014

^Only includes 2013 data from 01/01/2013-06/30/2013

No. = number of facilities mandated to report; PROCS = number of procedures; OBS = observed number of SSI

PRED = statistically 'predicted' number of SSI; SIR = Standardized Infection Ratio (observed/predicted number of SSI)

Key percentiles include facilities with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than national 2006-2008 SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than national 2006-2008 SIR of 1.0

 Table 13: Crude (Unadjusted) Rate of Coronary Artery Bypass Graft (CBGB/C) Surgical Site Infection (SSI) by Year, Tennessee, 01/01/2010 - 06/30/2013

STATE	YEAR	No. of facilities	No. of procedures	No. of SSI	TN Rate*	
	2013^	27	3,469	67	1.93	
Tennessee	2012	26	7,064	142	2.01	
	2011	27	7,457	144	1.93	
	2010	26	8,187	166	2.03	

Data reported as of March 4, 2014

^Only includes 2013 data from 01/01/2013-06/30/2013

No. of facilities which performed at least one procedure during the reporting period

*Per 100 operations

SSI FIGURES AND TABLES

•

COLO Procedures

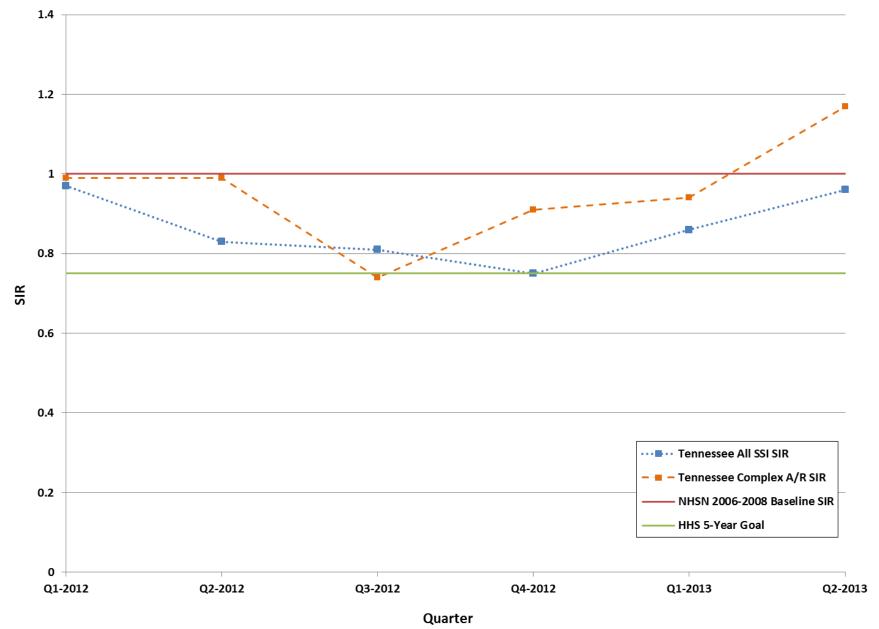


Figure 18: Colon Surgery (COLO) All and Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) by Quarter, Tennessee, 01/01/2012–06/30/2013

Table 14: Colon Surgery (COLO) All and Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) by Six-Month Period, Tennessee, 01/01/2012 - 06/30/2013

					No. of INFECTIONS		SIR AND 95% CONFIDENCE INTERVAL			DISTRIBUTION OF FACILITY-SPECIFIC SIRS					
STATE	SIR TYPE	YEAR	No.	PROCS	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	No. of FACS WITH ≥1 PRED INFECTION	10%	25%	50%	75%	90%
All Procedures Tennessee Complex A/R	2013^	96	3,643	211	230.92	0.91	0.79	1.05	54	0.00	0.28	0.73	1.25	1.57	
	2012	96	6,935	363	432.92	0.84	0.75	0.93	65	0.00	0.00	0.57	0.99	1.52	
		2013^	96	3,611	121	114.13	1.06	0.88	1.27	31	0.00	0.25	0.78	1.52	2.12
	2012	96	6,859	193	212.09	0.91	0.79	1.05	51	0.00	0.00	0.64	1.25	1.71	

Data reported as of March 4, 2014

^Only includes 2013 data from 01/01/2013-06/30/2013

No. = number of facilities mandated to report; PROCS = number of procedures; OBS = observed number of SSI

PRED = statistically 'predicted' number of SSI; SIR = Standardized Infection Ratio (observed/predicted number of SSI)

Key percentiles include facilities with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than national 2006-2008 SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than national 2006-2008 SIR of 1.0

Table 15: Crude (Unadjusted) Rate of Colon Surgery (COLO) Surgical Site Infection (SSI) by Six-Month Period, Tennessee, 01/01/2012 - 06/30/2013

STATE	YEAR	No. of facilities	No. of procedures	No. of SSI	TN Rate*	
T	2013^	88	3,654	213	5.83	
Tennessee	2012	88	6,950	363	5.22	

Data reported as of March 4, 2014

^Only includes 2013 data from 01/01/2013-06/30/2013

No. of facilities which performed at least one procedure during the reporting period **Per 100 operations* Figure 19: Colon Surgery (COLO) All and Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) in Facilities with ≥1 Predicted SSI, Tennessee, 01/01/2013 – 06/30/2013

HOSPITAL	OBS	PRED	PROC	SIR	SIR AND 95% CONFIDENCE INTERVAL COMPARED TO NHSN 2006-2008
Baptist Memorial Hospital- Memphis	5	6.8	175	0.7	
Blount Memorial Hospital*	0	2.1	58	0.0	
Bristol Regional Medical Center*	0	2.1	74	0.0	
Centennial Medical Center	6	3.6	128	1.7	•
Cookeville Regional Medical Center*	0	2.1	79	0.0	
Erlanger Medical Center	1	2.7	88	0.4	
Fort Sanders Regional Medical Center	5	3.9	113	1.3	
Gateway Medical Center*	0	1.2	40	0.0	
Holston Valley Medical Center	1	2.0	67	0.5	•
Jackson Madison County General Hosp.**	13	5.7	166	2.3	
Johnson City Medical Center*	0	1.3	40	0.0	
Maury Regional Medical Center	2	2.2	68	0.9	-
Memorial Healthcare System	11	6.2	190	1.8	•
Methodist Healthcare Germantown	1	3.0	117	0.3	
Methodist Medical Center of Oak Ridge	1	2.0	55	0.5	•
Methodist University Hospital	4	2.8	86	1.4	
				-	0 1 2 4 6 8 10
					Standardized Infection Ratio
					^^sig. low 🔲 normal 📕 **sig. high
					NHSN SIR

Data Reported as of March 4, 2014

OBS = observed number of SSI

PRED = statistically 'predicted' number of SSI, based on NHSN baseline data SIR = standardized infection ratio (observed/predicted number of SSI)

PROC = number of procedures performed ** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant



Parkridge Medical Center 2 1.4 40 1.4 Parkwest Medical Center- Knoxville 2 3.8 109 0.5 Physician's Regional Medical Center* 0 1.6 50 0.0 Regional One Health (Reg. Med.Ctr Memphi 2 1.3 38 1.5 Skyline Medical Center 2 1.8 60 1.1 Southern Hills Medical Center 0.8 1 1.3 40 St. Francis Hospital- Memphis 2 1.7 64 1.2 St. Thomas Midtown (Baptist - Nashville) 1 4.0 137 0.2 St. Thomas Rutherford (Mid. TN Med. Ctr) 1 1.8 63 0.6 St. Thomas West Hospital 8 3.8 111 2.1 Summit Medical Center 5 2.2 77 2.3 Turkey Creek Medical Center 4 2.4 62 1.7 University of Tennessee Medical Ctr** 19 5.8 161 3.3 Vanderbilt Medical Center 11 9.0 243 1.2 Williamson Medical Center* 0 1.0 38 0.0

Data Reported as of March 4, 2014

OBS = observed number of SSI

HOSPITAL

PRED = statistically 'predicted' number of SSI, based on NHSN baseline data

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

PROC = number of procedures performed

** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

0 1 2

= = = NHSN SIR

4

Standardized Infection Ratio

6

^^sig. low 🔲 normal 📕 **sig. high

8

10

SSI FIGURES AND TABLES

HYST Procedures

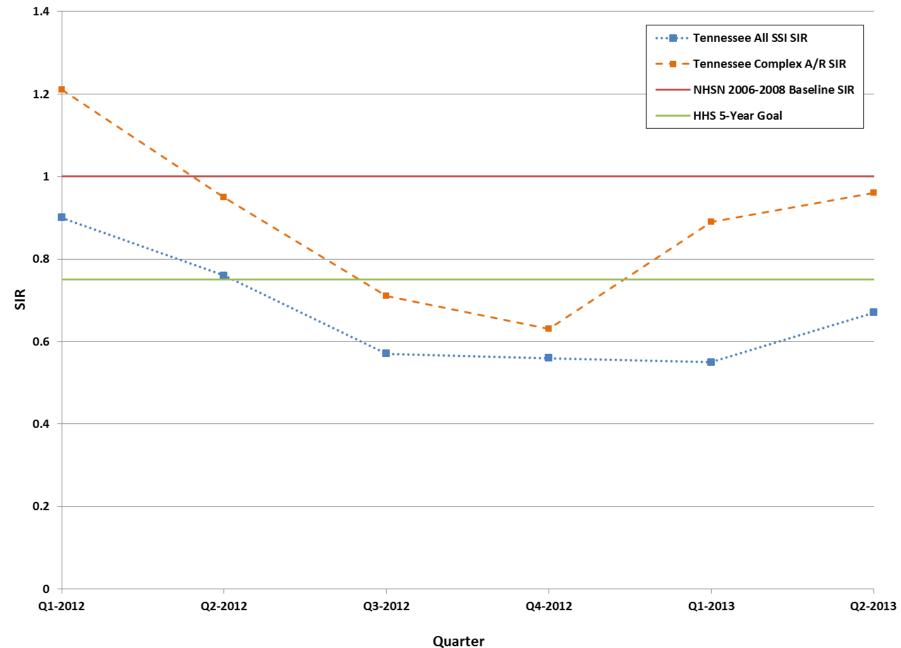


Figure 20: Abdominal Hysterectomy (HYST) All and Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) by Quarter, Tennessee, 01/01/2012–06/30/2013

 Table 16: Abdominal Hysterectomy (HYST) All and Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) by Six-Month Period, Tennessee, 01/01/2012 - 06/30/2013

					No. of INF	ECTIONS	SIR AND 95% CONFIDENCE INTERVAL			DISTRIBUTION OF FACILITY-SPECIFIC SIRs						
STATE	SIR TYPE	YEAR	No.	PROCS	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	No. of FACS WITH ≥1 PRED INFECTION	10%	25%	50%	75%	90%	
		2013^	96	4,814	54	87.88	0.61	0.46	0.80	25	0.00	0.13	0.56	0.68	0.93	
T	All Procedures	2012	96	10,676	136	196.25	0.69	0.58	0.82	45	0.00	0.00	0.70	1.05	1.61	
rennessee	Tennessee	2013^	96	4,089	29	31.39	0.92	0.62	1.33	10	0.00	0.30	0.83	1.68	2.17	
	Complex A/R	2012	97	9,056	60	68.87	0.87	0.66	1.12	19	0.00	0.32	0.89	1.45	1.65	

Data reported as of March 4, 2014

^Only includes 2013 data from 01/01/2013-06/30/2013

No. = number of facilities mandated to report; PROCS = number of procedures; OBS = observed number of SSI

PRED = statistically 'predicted' number of SSI; SIR = Standardized Infection Ratio (observed/predicted number of SSI)

Key percentiles include facilities with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than national 2006-2008 SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than national 2006-2008 SIR of 1.0

 Table 17: Crude (Unadjusted) Rate of Abdominal Hysterectomy (HYST) Surgical Site Infection (SSI) by Six-Month Period, Tennessee, 01/01/2012 - 06/30/2013

STATE	YEAR	No. of facilities	No. of procedures	No. of SSI	TN Rate*
T	2013^	84	4,827	54	1.12
Tennessee	2012	88	10,698	137	1.28

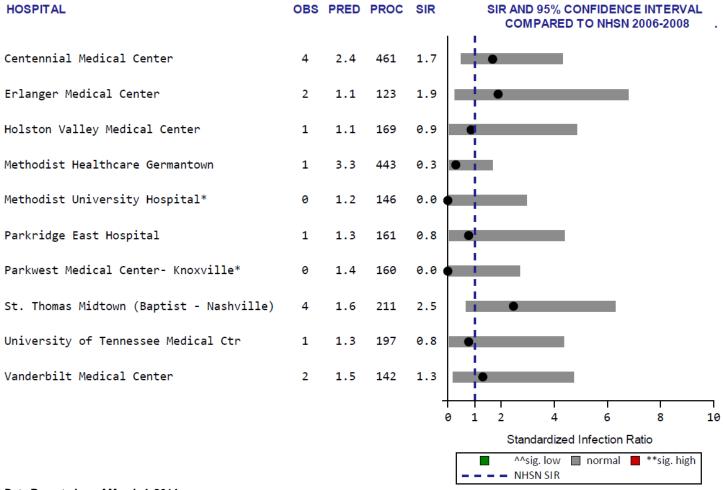
Data reported as of March 4, 2014

^Only includes 2013 data from 01/01/2013-06/30/2013

No. of facilities which performed at least one procedure during the reporting period

*Per 100 operations

Figure 21: Abdominal Hysterectomy (HYST) All and Complex Admission/Readmission Surgical Site Infection (SSI) Standardized Infection Ratios (SIRs) in Facilities with ≥1 Predicted SSI, Tennessee, 01/01/2013 – 06/30/2013



Data Reported as of March 4, 2014

OBS = observed number of SSI

PRED = statistically 'predicted' number of SSI, based on NHSN baseline data

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

PROC = number of procedures performed

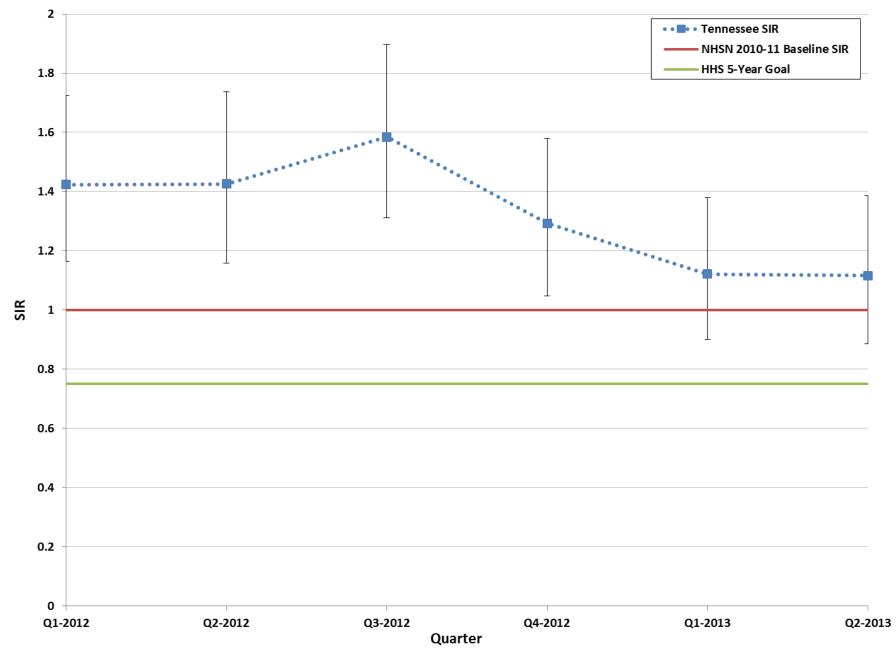
** Significantly higher than national baseline

^^ Significantly lower than national baseline

LABORATORY-IDENTIFIED (LABID) EVENTS

MRSA LabID Events

Acute Care Hospitals



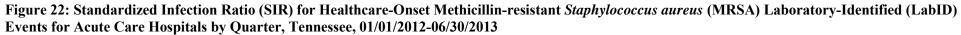


 Table 18: Healthcare-Onset Methicillin-resistant Staphylococcus aureus (MRSA) Laboratory-Identified (LabID) Events Standardized Infection Ratio (SIR) in Acute Care Hospitals by Year, Tennessee, 01/01/2012 - 06/30/2013

				No. of INFECTIONS		INTE	95% CONFIDENCE ERVAL, AND KEY PERCENTILES		DISTRIBUTION OF FACILITY-SPECIFIC SIRS					
STATE	YEAR	No.	PAT DAYS	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	No. of FACS WITH ≥1 PRED INFECTION	10%	25%	50%	75%	90%
-	2013^	112	2,017,875	170	151.95	1.12	0.96	1.30	33	0.38	0.64	1.07	1.91	2.56
Tennessee	2012	109	3,907,227	418	291.87	1.43	1.30	1.58	53	0.32	0.66	1.44	1.77	2.42

Data reported as of March 4, 2014

^Only includes 2013 data from 01/01/2013-06/30/2013

No. = number of facilities reporting; PAT DAYS = number of patient days; OBS = observed number of events

PRED = statistically 'predicted' number of events; SIR = standardized infection ratio (observed/predicted number of events)

Key percentiles include facilities with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than national 2010-2011 SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than national 2010-2011 SIR of 1.0

Table 19: Methicillin-resistant *Staphylococcus aureus* (MRSA) Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Acute Care Hospitals by Year, Tennessee, 07/01/2010 - 06/30/2013

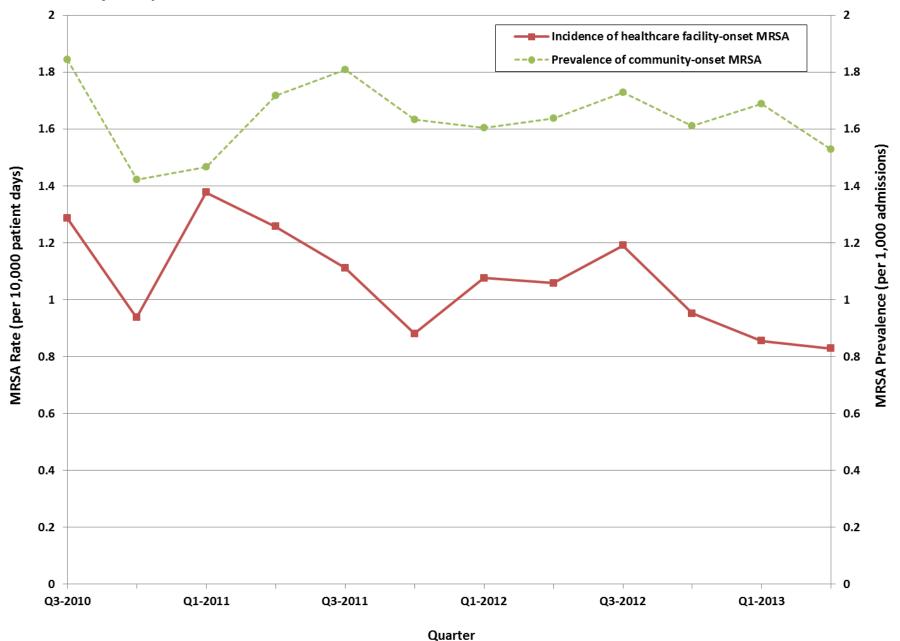
			Healthcare Facility-Onset Incidence ¹	Community-Onset Prevalence ²
STATE	YEAR	No.	POOLED MEAN	POOLED MEAN
	2013^	112	0.84	1.61
Tananaa	2012	109	1.07	1.65
Tennessee	2011	79	1.16	1.66
	2010	77	1.11	1.63

Data reported as of March 4, 2014 ^Only includes 2013 data from 01/01/2013-06/30/2013

No. = number of facilities reporting

¹Events per 10,000 patient days

²Events per 1,000 admissions



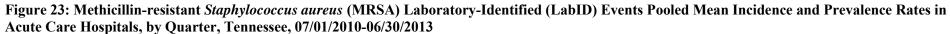


Figure 24: Healthcare-Onset Methicillin-resistant *Staphylococcus aureus* (MRSA) Laboratory-Identified (LabID) Event Standardized Infection Ratios (SIRs) in Facilities with ≥1 Predicted Event, Tennessee, 01/01/2013 -06/30/2013

HOSPITAL	OBS	PRED	PATD	SIR	SIR AND 95% CONFIDENCE INTERVAL COMPARED TO NHSN 2010-2011
Baptist Memorial Hospital- Memphis**	13	6.1	81460	2.1	
Blount Memorial Hospital	1	1.1	28011	0.9	•
Bristol Regional Medical Center	2	1.3	23358	1.5	•
Centennial Medical Center	13	9.3	84212	1.4	•
Cookeville Regional Medical Center	4	1.5	29473	2.7	•
East Tennessee Children's Hospital*	0	1.4	38544	0.0	
Erlanger Medical Center	8	7.0	64191	1.1	
Fort Sanders Regional Medical Center	4	3.7	48628	1.1	
Gateway Medical Center	2	1.2	21454	1.7	
Holston Valley Medical Center	2	3.1	45543	0.6	
Jackson Madison County General Hosp.	3	7.9	82566	0.4	•
Johnson City Medical Center	5	5.4	65629	0.9	
Maury Regional Medical Center	4	1.3	24479	3.1	•
Memorial Healthcare System	3	3.5	47200	0.9	
Methodist Healthcare Germantown	3	2.0	41774	1.5	•
Methodist Healthcare LeBonheur	1	2.4	35643	0.4	
Methodist Healthcare North	4	2.1	31995	1.9	
				(ð 1 2 4 6 8 10



Data Reported as of March 4, 2014 OBS = observed number of MRSA LabID events PRED = statistically 'predicted' number of events, based on NHSN baseline data SIR = standardized infection ratio (observed/predicted number of events) PATD = number of patient days ** Significantly higher than national baseline ^^ Significantly lower than national baseline

HOSPITAL	OBS	PRED	PATD	SIR	SIR AND 95% CONFIDENCE INTERVAL COMPARED TO NHSN 2010-2011
Methodist Medical Center of Oak Ridge	1	1.8	26365	0.6	•
Methodist University Hospital	8	9.6	57885	0.8	•
Morristown-Hamblen Healthcare System*	0	1.3	15519	0.0	
Parkridge Medical Center	2	2.6	20739	0.8	•
Parkwest Medical Center- Knoxville	2	2.4	42806	0.8	-
Physician's Regional Medical Center	8	4.2	44003	1.9	•
Regional One Health (Reg. Med.Ctr Memphi**	13	2.5	45863	5.2	
Skyline Medical Center	3	1.4	27884	2.2	•
St. Francis Hospital- Memphis	6	2.3	47302	2.6	
St. Thomas Midtown (Baptist - Nashville)	2	3.6	60048	0.6	•
St. Thomas Rutherford (Mid. TN Med. Ctr)	3	1.6	34460	1.9	•
St. Thomas West Hospital	7	3.5	46283	2.0	
Summit Medical Center	1	1.2	27469	0.8	
Sumner Regional Medical Center*	0	1.3	16487	0.0	
University of Tennessee Medical Ctr	8	13.0	71722	0.6	
Vanderbilt Medical Center	21	14.1	156655	1.5	•
				-	

Standardized Infection Ratio ^^sig. low normal **sig. high = = = = NHSN SIR

Data Reported as of March 4, 2014

OBS = observed number of MRSA LabID events

PRED = statistically 'predicted' number of events, based on NHSN baseline data SIR = standardized infection ratio (observed/predicted number of events)

PATD = number of patient days

** Significantly higher than national baseline

^^ Significantly lower than national baseline

LABORATORY-IDENTIFIED (LABID) EVENTS

MRSA LabID Events

Long-term Acute Care (LTAC) Facilities

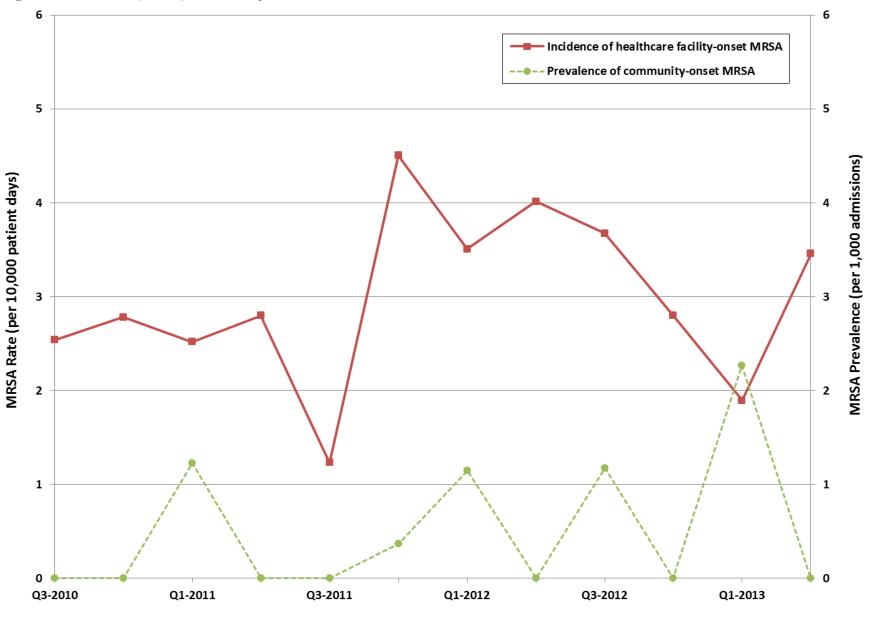


Figure 25: Methicillin-resistant *Staphylococcus aureus* (MRSA) Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Long-term Acute Care (LTAC) Facilities by Quarter, Tennessee, 07/01/2010-06/30/2013

Quarter

Table 20: Methicillin-resistant *Staphylococcus aureus* (MRSA) Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Long-term Acute Care (LTAC) Facilities by Year, Tennessee, 07/01/2010 – 06/30/2013

			Healthcare Facility-Onset Incidence ¹	Community-Onset Prevalence ²
STATE	YEAR	No.	POOLED MEAN	POOLED MEAN
	2013^	9	2.67	1.12
Tonnoono	2012	9	3.50	0.58
Tennessee	2011	9	2.77	0.38
	2010	9	2.66	0.00

Data reported as of March 4, 2014

^Only includes 2013 data from 01/01/2013-06/30/2013

No. = number of facilities reporting

¹Events per 10,000 patient days

²Events per 1,000 admissions

LABORATORY-IDENTIFIED (LABID) EVENTS

C. difficile Infection LabID Events

Acute Care Hospitals

Figure 26: Standardized Infection Ratio (SIR) for Healthcare-Onset *C. difficile* Infection (CDI) Laboratory-Identified (LabID) Events for Acute Care Hospitals by Quarter, Tennessee, 01/01/2012-06/30/2013

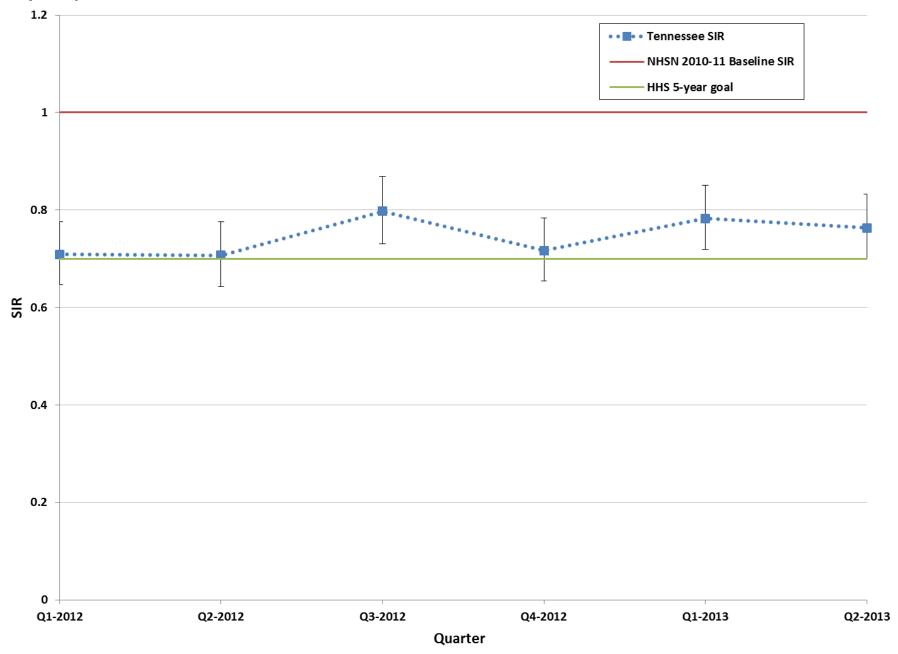


Table 21: Healthcare-Onset *C. difficile* Infection (CDI) Laboratory-Identified (LabID) Events Standardized Infection Ratio (SIR) in Acute Care Hospitals by Year, Tennessee, 01/01/2012 - 06/30/2013

				No. of INFECTIONS		INTERVAL AN		D 95% CONFIDENCE ERVAL AND KEY PERCENTILES		DISTRIBUTION OF FACILITY-SPECIFIC SIRS					
STATE	YEAR	No.	PAT DAYS	OBS	PRED	SIR	LOWER LIMIT	UPPER LIMIT	No. of FACS WITH ≥1 PRED INFECTION	10%	25%	50%	75%	90%	
T	2013^	112	1,872,413	1066	1378.68	0.77	0.73	0.82	97	0.00	0.34	0.64	0.92	1.41	
Tennessee	2012	109	3,594,692	1931	2635.20	0.73	0.70	0.77	96	0.00	0.37	0.66	0.90	1.31	

Data reported as of March 4, 2014

^Only includes 2013 data from 01/01/2013-06/30/2013

No. = number of facilities reporting; PAT DAYS = number of patient days; OBS = observed number of events

PRED = statistically 'predicted' number of events; SIR = standardized infection ratio (observed/predicted number of events)

Key percentiles include facilities with at least one predicted infection

Red highlighting indicates SIR for reporting period is significantly higher than national 2010-2011 SIR of 1.0

Green highlighting indicates SIR for reporting period is significantly lower than national 2010-2011 SIR of 1.0

Table 22: C. difficile Infection (CDI) Laboratory-Identified (LabID) Events Incidence and Prevalence Rates in Acute Care Hospitals by Year, Tennessee, 07/01/2010 - 06/30/2013

			Healthcare Facility-Onset Incidence Rate ¹	Community-Onset Prevalence Rate ²				
STATE	YEAR	No.	POOLED MEAN	CO POOLED MEAN	CO-HFA POOLED MEAN			
	2013^	112	5.69	3.23	1.29			
T	2012	109	5.37	2.79	1.16			
Tennessee	2011	79	5.18	2.35	1.17			
	2010	77	4.65	1.95	1.02			

Data reported as of March 4, 2014

^Only includes 2013 data from 01/01/2013-06/30/2013

No. = number of facilities reporting; CO = community-onset; CO-HFA = community-onset healthcare facility-associated

¹Events per 10,000 patient days

²Events per 1,000 admissions

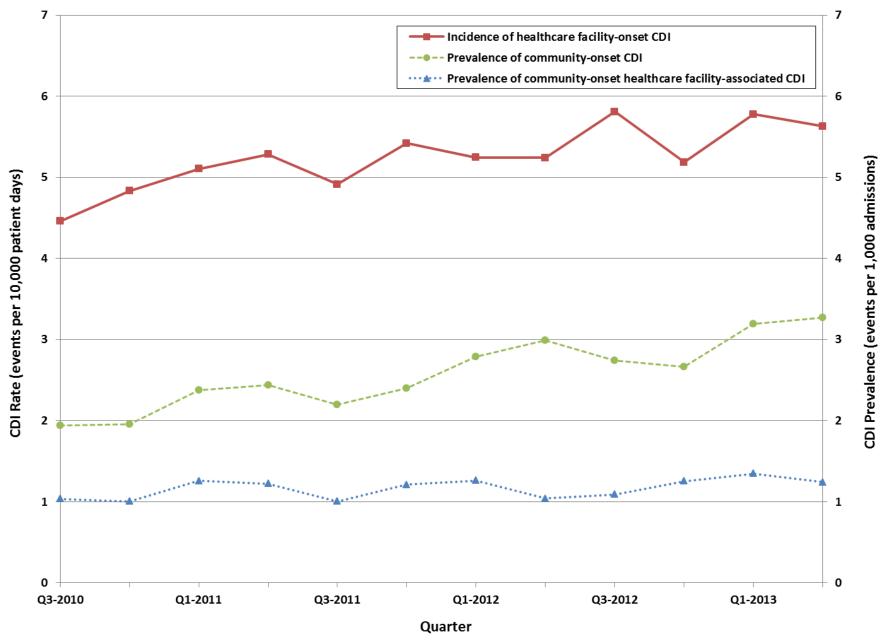


Figure 27: *C. difficile* Infection (CDI) Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Acute Care Hospitals by Quarter, Tennessee, 07/01/2010-06/30/2013

Figure 28: Healthcare-Onset C. difficile Infection (CDI) Laboratory-Identified (LabID) Event Standardized Infection Ratios (SIRs) in Facilities with ≥1 Predicted Event, Tennessee, 01/01/2013 - 06/30/2013

HOSPITAL	OBS	PRED	PATD	SIR	SIR AND 95% CONFIDENCE INTERVAL COMPARED TO NHSN 2010-2011
Baptist Memorial Hospital for Women^^	0	4.4	6635	0.0	-
Baptist Memorial Hospital- Collierville	1	3.8	5528	0.3	•
Baptist Memorial Hospital- Huntingdon*	0	1.0	1915	0.0	
Baptist Memorial Hospital- Memphis	55	58.6	81460	0.9	
Baptist Memorial Hospital- Union City*	0	3.5	6178	0.0	-
Baptist Memorial Hospital-Tipton*	0	1.3	1877	0.0	
Blount Memorial Hospital	20	16.0	28011	1.2	•
Bristol Regional Medical Center	11	15.3	21728	0.7	•
Centennial Medical Center^^	53	71.9	79215	0.7	•
Claiborne County Hospital	1	1.3	2596	0.8	•
Cookeville Regional Medical Center	29	20.6	28257	1.4	
Crockett Hospital	1	2.1	3868	0.5	•
Cumberland Medical Center^^	2	7.5	11798	0.3	-
Delta Medical Center	4	8.3	16736	0.5	•
Dyersburg Regional Medical Center	1	3.1	5670	0.3	•
East Tennessee Children's Hospital^^	9	19.1	29087	0.5	
Erlanger East*	0	2.0	3001	0.0	
Erlanger Medical Center	45	51.5	56691	0.9	
Erlanger North*	0	1.2	1844	0.0	
Fort Loudoun Medical Center	5	1.7	3294	2.9	•
				+ 0	1 2 4 6 8
					Standardized Infection Ratio
Data Reported as of March 4, 2014 OBS = observed number of CDI LabID events					 ^^sig. low normal **sig. high NHSN SIR

OBS = observed number of CDI LabID events

PRED = statistically 'predicted' number of events, based on NHSN baseline data

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

PATD = number of patient days

** Significantly higher than national baseline

^^ Significantly lower than national baseline

HOSPITAL	OBS	PRED	PATD	SIR	SIR AND 95% CONFIDENCE INTERVAL COMPARED TO NHSN 2010-2011
Fort Sanders Regional Medical Center	33	34.6	45995	1.0	•
Franklin Woods Community Hospital	2	5.1	7826	0.4	
Gateway Medical Center^^	4	11.7	19027	0.3	
Grandview Medical Center	1	1.2	2742	0.8	•
Hardin Medical Center*	0	1.6	2849	0.0	
Harton Regional Medical Center	9	7.6	10124	1.2	
Hendersonville Medical Center	6	6.5	10582	0.9	
Henry County Medical Center	3	4.6	7225	0.6	•
Heritage Medical Center	1	1.6	3158	0.6	•
Highlands Medical Center	1	1.5	3459	0.7	•
Hillside Hospital	1	1.7	2201	0.6	
Holston Valley Medical Center^^	14	29.7	43849	0.5	-
Horizon Medical Center	10	6.9	9579	1.4	••••
Indian Path Medical Center	9	11.1	14461	0.8	
Jackson Madison County General Hosp.	50	59.7	76595	0.8	•
Jamestown Regional Medical Center*	0	2.3	4266	0.0	
Jefferson Memorial Hospital*	0	2.3	4267	0.0	
Jellico Community Hospital	1	1.7	2818	0.6	•
Johnson City Medical Center	53	57.5	63490	0.9	
Lafollette Medical Center	3	4.1	6945	0.7	
				-	
					Standardized Infection Ratio

Standardized Infection Ratio ^^sig. low normal **sig. high = = = = NHSN SIR

Data Reported as of March 4, 2014

PRED = statistically 'predicted' number of events, based on NHSN baseline data

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

PATD = number of patient days ** Significantly higher than national baseline

^^ Significantly lower than national baseline

OBS = observed number of CDI LabID events

HOSPITAL	OBS	PRED	PATD	SIR	SIR AND 95% CONFIDENCE INTERVAL COMPARED TO NHSN 2010-2011
Lakeway Regional Hospital*	0	2.9	5052	0.0	⊨ ∔
Laughlin Memorial Hospital^^	0	4.2	8633	0.0	
LeConte Medical Center	1	4.1	7274	0.2	•
Lincoln Medical Center	1	1.8	3602	0.5	•
Livingston Regional Hospital	7	5.9	8179	1.2	
Maury Regional Medical Center	21	23.2	22455	0.9	•
McNairy Regional Hospital	1	1.2	2192	0.8	•
Memorial Healthcare System	39	41.2	47200	0.9	•
Memorial Hixson Hospital	4	5.8	8509	0.7	•
Methodist Healthcare Germantown	26	27.4	32930	0.9	•
Methodist Healthcare LeBonheur^^	9	21.8	27687	0.4	
Methodist Healthcare North	25	22.4	31995	1.1	
Methodist Healthcare South	5	10.9	14143	0.5	-
Methodist Medical Center of Oak Ridge	27	20.7	25739	1.3	
Methodist University Hospital	51	53.2	57885	1.0	
Morristown-Hamblen Healthcare System	5	7.3	14558	0.7	
Nashville General Hospital at Meharry	1	5.1	8531	0.2	•
Newport Medical Center	1	2.2	3730	0.5	•
North Knoxville Medical Center	3	5.6	8674	0.5	
NorthCrest Medical Center	3	3.5	6528	0.9	
				-	0 1 2 4 6 8
					Standardized Infection Ratio

^^sig. low **sig. high = = = = NHSN SIR

normal

Data Reported as of March 4, 2014

- OBS = observed number of CDI LabID events
- PRED = statistically 'predicted' number of events, based on NHSN baseline data

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

PATD = number of patient days ** Significantly higher than national baseline

^^ Significantly lower than national baseline

HOSPITAL	OBS	PRED	PATD	SIR	SIR AND 95% CONFIDENCE INTERVAL COMPARED TO NHSN 2010-2011
Parkridge East Hospital	1	5.1	8508	0.2	
Parkridge Medical Center^^	6	14.5	20739	0.4	
Parkwest Medical Center- Knoxville^^	15	30.7	41213	0.5	-
Perry Community Hospital	1	1.2	2715	0.8	
Physician's Regional Medical Center^^	17	29.6	41929	0.6	
Regional Hospital of Jackson	5	8.2	12939	0.6	
Regional One Health (Reg. Med.Ctr Memphis)	20	29.4	35078	0.7	•
River Park Hospital	5	3.2	6106	1.6	
Roane Medical Center	5	2.9	4376	1.7	•
SkyRidge Medical Center	6	9.8	18851	0.6	•
Skyline Medical Center**	27	14.6	27884	1.9	
Southern Hills Medical Center	8	8.1	11724	1.0	
Southern Tennessee Medical Center^^	1	5.7	11129	0.2	
St. Francis Bartlett^^	3	8.8	17627	0.3	-
St. Francis Hospital- Memphis^^	14	28.0	46074	0.5	
St. Jude Children's Research Hospital**	15	6.0	7867	2.5	
St. Thomas Midtown (Baptist - Nashville)^^	15	38.1	48566	0.4	
St. Thomas Rutherford (Mid. TN Med. Ctr)	30	27.2	31561	1.1	•
St. Thomas West Hospital	47	37.3	46283	1.3	•
					0 1 2 4 6 8
					Standardized Infection Ratio

Data Reported as of March 4, 2014

- OBS = observed number of CDI LabID events
- PRED = statistically 'predicted' number of events, based on NHSN baseline data

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

PATD = number of patient days ** Significantly higher than national baseline

^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

^^sig. low

📕 **sig. high 😐 🗕 🗕 NHSN SIR

normal

HOSPITAL	OBS	PRED	PATD	SIR	SIR AND 95% CONFIDENCE INTERVAL COMPARED TO NHSN 2010-2011
Starr Reg Med Ctr-Athens (Athens Reg Med Ctr)	1	2.5	5343	0.4	•
Starr Reg Med Ctr-Etowah (Woods Mem Hosp)	5	1.6	3244	3.0	•
StoneCrest Medical Center	5	6.7	8481	0.8	•
Stones River Hospital	1	1.1	2087	0.9	
Summit Medical Center	13	17.9	25290	0.7	•
Sumner Regional Medical Center^^	2	8.7	15885	0.2	•••
Sweetwater Hospital Association*	0	3.0	5218	0.0	••••
Sycamore Shoals Hospital	4	5.5	7512	0.7	•
Takoma Regional Hospital*	0	3.1	5578	0.0	.
TrustPoint Hospital*	0	1.3	3260	0.0	
Turkey Creek Medical Center	3	6.1	9872	0.5	•
Unicoi County Memorial Hospital*	0	1.5	2158	0.0	
United Regional Medical Center	2	1.1	1764	1.8	•
University Medical Center- Lebanon^^	1	8.3	16648	0.1	
University of Tennessee Medical Ctr^^	17	42.9	61412	0.4	•
Vanderbilt Medical Center^^	80	121.4	140755	0.7	•
Volunteer Community Hospital	4	1.6	2903	2.4	• • • • • • • • • • • • • • • • • • •
Williamson Medical Center	7	10.3	15496	0.7	•
					Standardized Infection Ratio
					^sig. low normal

Data Reported as of March 4, 2014 OBS = observed number of CDI LabID events PRED = statistically 'predicted' number of events, based on NHSN baseline data SIR = standardized infection ratio (observed/predicted number of events) PATD = number of patient days ** Significantly higher than national baseline ^^ Significantly lower than national baseline

* Zero infections, but not statistically significant

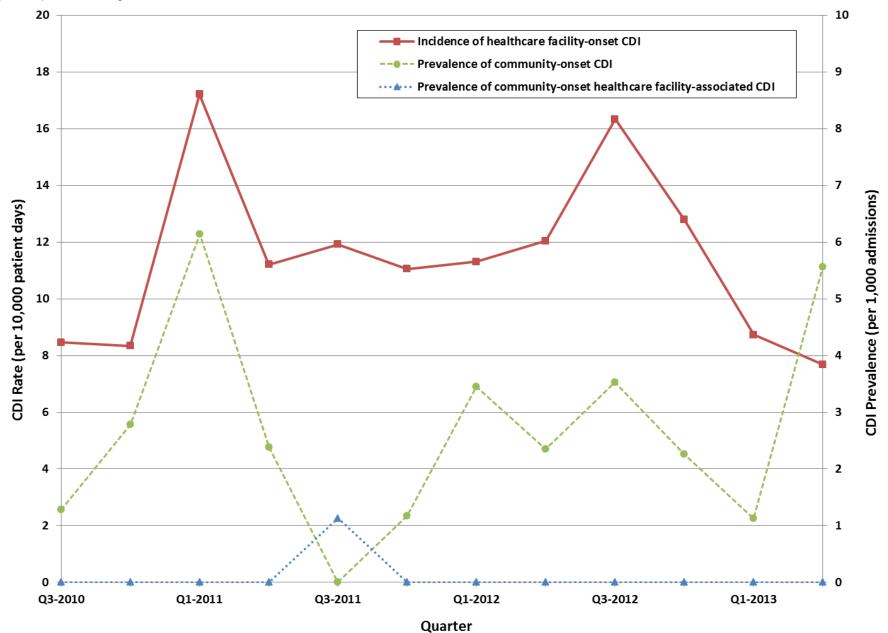
**s ig. high

= = = = NHSN SIR

LABORATORY-IDENTIFIED (LABID) EVENTS

C. difficile Infection LabID Events

Long-term Acute Care (LTAC) Facilities



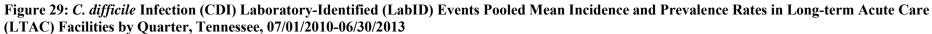


Table 23: *C. difficile* Infection (CDI) Laboratory-Identified (LabID) Events Pooled Mean Incidence and Prevalence Rates in Long-term Acute Care (LTAC) Facilities by Year, Tennessee, 07/01/2010 - 06/30/2013

			Healthcare Facility-Onset Incidence Rate ¹	Community-Onset Prevalence Rate ²		
STATE	YEAR	No.	POOLED MEAN	CO POOLED MEAN	CO-HFA POOLED MEAN	
	2013^	9	8.21	3.37	0.00	
T	2012	9	13.1	2.89	0.00	
Tennessee	2011	9	12.8	2.36	0.29	
	2010	9	8.41	2.00	0.00	

Data reported as of March 4, 2014

^Only includes 2013 data from 01/01/2013-06/30/2013

No. = number of facilities reporting; CO = community-onset; CO-HFA = community-onset healthcare facility-associated

¹Events per 10,000 patient days

²Events per 1,000 admissions

FACILITY SPECIFIC SUMMARY PAGES

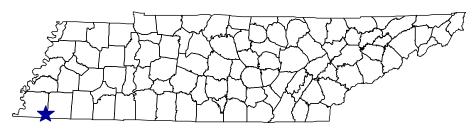
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Baptist Memorial Hospital- Collierville, Collierville, Shelby County

Medical School Affiliation: Major teaching Bed Size Category: 50-99 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.1	5	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	0	N/A	N/A	0.92
LabID	MRSA	0	0.6	5,528	N/A	N/A	1.12
	CDI	1	3.8	5,528	0.26	(0.01, 1.46)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.1 5 N/A 0 0.0 0 N/A 2012 0 0.4 20 N/A 2012 0 0.0 0 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

– – – – NHSN mean

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) YR OBS PRED YR OBS PRED PATD SIR SIR AND 95% CI PATD SIR 2013* 0 0.6 5528 N/A 2013* 1 3.8 5528 0.3 N/A: Number of predicted infections <1; no SIR calculated 2 3 4 5 6 SIR Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 **YR** = reporting year; **OBS** = observed number of infections Significantly lower than NHSN pooled mean Not significantly different from NHSN pooled mean PRED = statistically 'predicted' number of infections, based on **SIR** = standardized infection ratio (observed/predicted numbe Significantly higher than NHSN pooled mean ---- 2012 TN mean

PROC = number of procedures performed (SSI);

PATD = number of patient days (LabID); N/A = number of infe

Baptist Memorial Hospital- Collierville, Collierville, Shelby County

Medical School Affiliation: Major teaching Bed Size Category: 50-99 beds

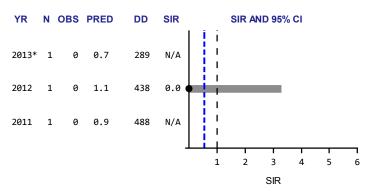
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infe	ection Ratio (SIR)	
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.7	289	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	1	1.1	496	0.88	(0.02, 4.88)	1.40

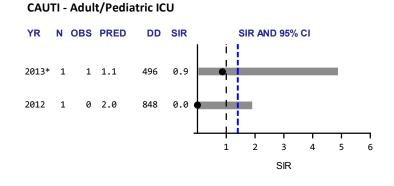
Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009) Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009)

Central Line-Associated Bloodstream Infections (CLABSI)

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



Catheter-Associated Urinary Tract Infections (CAUTI)

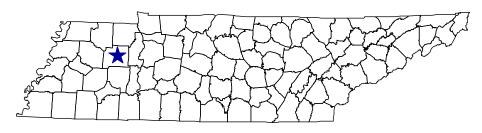


Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c

DD = device days: central line days (CLABSI)/urinary catheter c **N/A** = number of infections predicted <1; no SIR calculated

Baptist Memorial Hospital- Huntingdon, Huntingdon, Carroll County

Medical School Affiliation: None Bed Size Category: 50-99 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
LabID	MRSA	0	0.1	1,915	N/A	N/A	1.12
	CDI	0	1.0	1,915	0.00	(0.00, 3.54)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

This facility did not perform enough eligible procedures to be subject to Tennessee SSI reporting requirements in 2012-2013

Healthcare-Onset Laboratory-Identified (LabID) Events



Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe

Baptist Memorial Hospital- Huntingdon, Huntingdon, Carroll County

Medical School Affiliation: None Bed Size Category: 50-99 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infe	ection Ratio (SIR)	
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.0	1	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	0.1	47	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

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

YR	N	OBS	PRED	DD	SIR	
2013*	1	0	0.0	1	N/A	
2012	1	0	0.0	25	N/A	

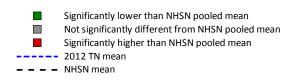
N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAU	TI -	Adul	t/Pedia	atric IC	U	
YR	N	OBS	PRED	DD	SIR	
2013*	1	0	0.1	47	N/A	
2012	1	0	0.2	126	N/A	

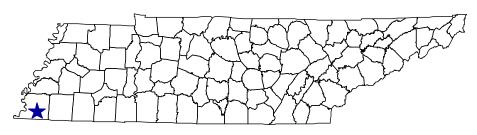
N/A: Number of predicted infections <1; no SIR calculated

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Baptist Memorial Hospital- Memphis, Memphis, Shelby County

Medical School Affiliation: None Bed Size Category: 400+ beds



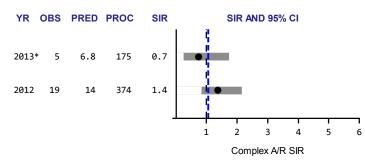
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infe	ection Ratio (SIR)	
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	5	6.8	175	0.74	(0.24, 1.73)	1.06
	Abdominal hysterectomy	1	0.6	68	N/A	N/A	0.92
LabID	MRSA	13	6.1	81,460	2.12	(1.13, 3.62)	1.12
	CDI	55	58.6	81,460	0.94	(0.71, 1.22)	0.77

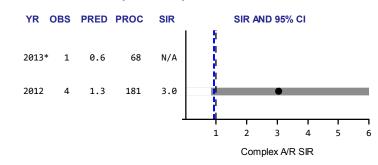
Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery



SSI - Abdominal Hysterectomy



Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) OBS PRED PATD SIR SIR AND 95% CI OBS PRED PATD SIR SIR AND 95% CI YR YR 2013* 13 6.1 81460 2.1 2013* 55 58.6 81460 0.9 2 2 3 5 1 3 4 5 6 1 4 6 SIR SIR Data reported as of March 4, 2014

*2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI);

PATD = number of patient days (LabID); N/A = number of infe

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Baptist Memorial Hospital- Memphis, Memphis, Shelby County

Medical School Affiliation: None Bed Size Category: 400+ beds

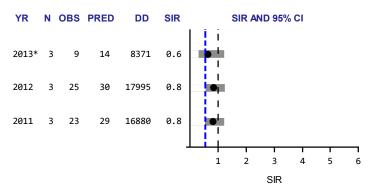
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	9	14.2	8,371	0.64	(0.29, 1.21)	0.47
CAUTI	Adult/Pediatric ICU	26	19.3	8,993	1.34	(0.88, 1.97)	1.40

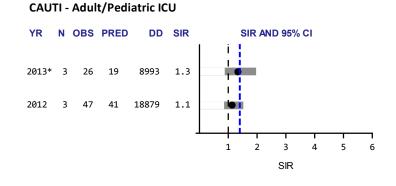
Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009) Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009)

Central Line-Associated Bloodstream Infections (CLABSI)

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



Catheter-Associated Urinary Tract Infections (CAUTI)



Data reported as of March 4, 2014 ***2013 includes data from 1/1/2013-6/30/2013 YR** = reporting year; **N** = number of units reporting (CLABSI/C **PRED** = statistically 'predicted' number of infections, based on **SIR** = standardized infection ratio (observed/orgdicted number)

SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated

Baptist Memorial Hospital-Tipton, Covington, Tipton County

Medical School Affiliation: None Bed Size Category: 50-99 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.0	0	N/A	N/A	1.06
	Abdominal hysterectomy	1	0.1	14	N/A	N/A	0.92
LabID	MRSA	0	0.1	2,078	N/A	N/A	1.12
	CDI	0	1.3	1,877	0.00	(0.00, 2.94)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.0 0 N/A 1 0.1 14 N/A 2012 0 0.0 1 N/A 2012 0 0.1 16 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) YR OBS PRED PATD SIR OBS PRED PATD SIR SIR AND 95% CI YR 2013* 0 0.1 2078 N/A 2013* 0 1.3 1877 0.0 N/A: Number of predicted infections <1; no SIR calculated 2 1 3 4 5 6 SIR

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe

Baptist Memorial Hospital-Tipton, Covington, Tipton County

Medical School Affiliation: None Bed Size Category: 50-99 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.0	25	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	0.3	154	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

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

YR	Ν	OBS	PRED	DD	SIR	
2013*	1	0	0.0	25	N/A	
2012	1	0	0.1	53	N/A	

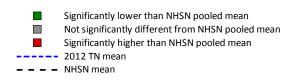
N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU								
YR	N	OBS	PRED	DD	SIR			
2013*	1	0	0.3	154	N/A			
2012	1	0	0.6	293	N/A			

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



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

Medical School Affiliation: None Bed Size Category: 50-99 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.2	7	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.2	25	N/A	N/A	0.92
LabID	MRSA	0	0.4	6,361	N/A	N/A	1.12
	CDI	0	3.5	6,178	0.00	(0.00, 1.04)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.2 7 N/A 0 0.2 25 N/A 2012 0 0.4 11 N/A 2012 0 0.3 36 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

– – – – NHSN mean

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) YR OBS PRED OBS PRED PATD SIR SIR AND 95% CI PATD SIR YR 2013* 0 0.4 6361 N/A 2013* 0 3.5 6178 0.0 N/A: Number of predicted infections <1; no SIR calculated 2 3 4 5 6 SIR Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 **YR** = reporting year; **OBS** = observed number of infections Significantly lower than NHSN pooled mean Not significantly different from NHSN pooled mean PRED = statistically 'predicted' number of infections, based on **SIR** = standardized infection ratio (observed/predicted numbe Significantly higher than NHSN pooled mean **PROC** = number of procedures performed (SSI); ---- 2012 TN mean

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PATD = number of patient days (LabID); N/A = number of infe

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

Medical School Affiliation: None Bed Size Category: 50-99 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	66	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	0.3	218	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

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

YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.1	66	N/A
2012	1	0	0.3	182	N/A
2011	1	0	0.4	238	N/A

N/A: Number of predicted infections <1; no SIR calculated

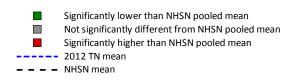
Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.3	218	N/A
2012	1	0	0.6	503	N/A

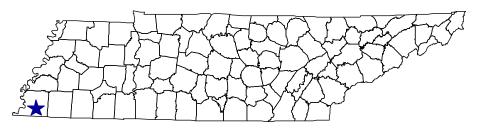
N/A: Number of predicted infections <1; no SIR calculated

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Baptist Memorial Hospital for Women, Memphis, Shelby County

Medical School Affiliation: Graduate teaching Bed Size Category: 100-399 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

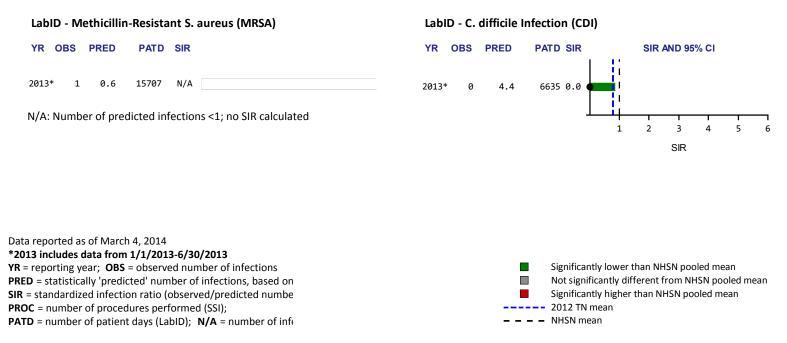
		Infec	tions		Standardized Infe		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.0	0	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.9	133	N/A	N/A	0.92
LabID	MRSA	1	0.6	15,707	N/A	N/A	1.12
	CDI	0	4.4	6,635	0.00	(0.00, 0.85)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)



Healthcare-Onset Laboratory-Identified (LabID) Events



Baptist Memorial Hospital for Women, Memphis, Shelby County

Medical School Affiliation: Graduate teaching Bed Size Category: 100-399 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.0	1	N/A	N/A	0.47
	Neonatal ICU	4	3.5	1,535	1.13	(0.31, 2.90)	0.66
CAUTI	Adult/Pediatric ICU	0	0.0	17	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units **CLABSI - Neonatal ICU** N OBS PRED N OBS PRED SIR DD SIR DD SIR AND 95% CI YR YR 2013* 1 0.0 N/A 0 1 2013* 1 4 3.5 1535 1.1 2012 1 0 0.0 7 N/A 2012 1 4 7.3 3175 0.6 2011 1 0 0.0 12 N/A 2011 2941 1 10 6.1 1.6 N/A: Number of predicted infections <1; no SIR calculated 2 3 4 1 5 6 SIR

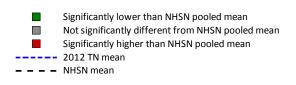
Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.0	17	N/A
2012	1	0	0.1	44	N/A

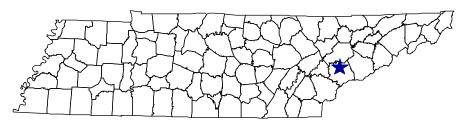
N/A: Number of predicted infections <1; no SIR calculated

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Blount Memorial Hospital, Maryville, Blount County

Medical School Affiliation: Undergraduate teaching Bed Size Category: 100-399 beds



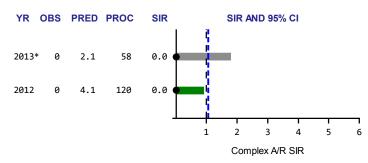
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR* 95% CI		TN SIR
SSI	Colon surgery	0	2.1	58	0.00	(0.00, 1.79)	1.06
	Abdominal hysterectomy	0	0.2	23	N/A	N/A	0.92
LabID	MRSA	1	1.1	28,011	0.93	(0.02, 5.19)	1.12
	CDI	20	16.0	28,011	1.25	(0.76, 1.93)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery



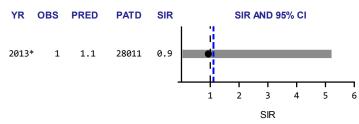
SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	0	0.2	23	N/A	
2012	0	0.6	71	N/A	

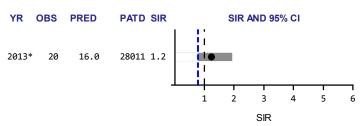
N/A: Number of predicted infections <1; no SIR calculated

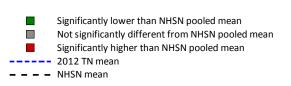
Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA)



LabID - C. difficile Infection (CDI)





Blount Memorial Hospital, Maryville, Blount County

Medical School Affiliation: Undergraduate teaching Bed Size Category: 100-399 beds

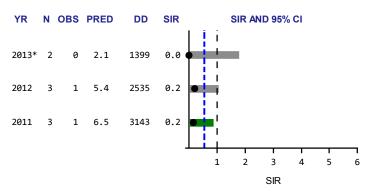
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	2.1	1,399	0.00	(0.00, 1.76)	0.47
CAUTI	Adult/Pediatric ICU	2	2.6	2,016	0.77	(0.09, 2.77)	1.40

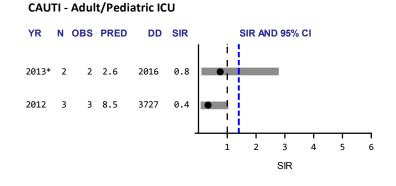
Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009) Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009)

Central Line-Associated Bloodstream Infections (CLABSI)

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

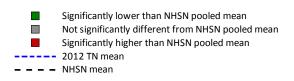


Catheter-Associated Urinary Tract Infections (CAUTI)



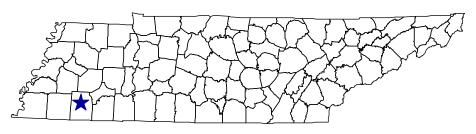
Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe

DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Bolivar General Hospital, Bolivar, Hardeman County

Medical School Affiliation: None Bed Size Category: <50 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
LabID	MRSA	0	0.0	307	N/A	N/A	1.12
	CDI	0	0.2	307	N/A	N/A	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

This facility did not perform enough eligible procedures to be subject to Tennessee SSI reporting requirements in 2012-2013

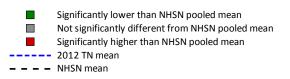
Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA)	LabID - C. difficile Infection (CDI)			
YR OBS PRED PATD SIR	YR OBS PRED PATD SIR			
2013* 0 0.0 307 N/A	2013* 0 0.2 307 N/A			
N/A. Number of mudicted infections (1, no CID coloulated	N/A. Number of predicted infections (1, pp CID calculated			

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

No units in this facility were subject to Tennessee CLABSI/CAUTI reporting requirements in 2012-2013



Bristol Regional Medical Center, Bristol, Sullivan County

Medical School Affiliation: Major teaching Bed Size Category: 100-399 beds



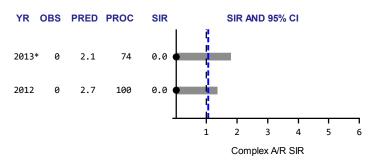
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	2.1	74	0.00	(0.00, 1.78)	1.06
	Abdominal hysterectomy	0	0.5	61	N/A	N/A	0.92
LabID	MRSA	2	1.3	23,358	1.49	(0.18, 5.38)	1.12
	CDI	11	15.3	21,728	0.72	(0.36, 1.29)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery



SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	0	0.5	61	N/A	
2012	0	1.0	112	N/A	

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) OBS PRED PATD SIR SIR AND 95% CI OBS PRED PATD SIR SIR AND 95% CI YR YR 2013* 2013* 2 1.3 23358 1.5 11 15.3 21728 0.7 2 2 3 5 1 3 4 5 6 4 6 SIR SIR

Data reported as of March 4, 2014

*2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI);

PATD = number of patient days (LabID); **N/A** = number of infe

Significantly lower than NHSN pooled mean Not significantly different from NHSN pooled mean Significantly higher than NHSN pooled mean 2012 TN mean

– – – – NHSN mean

E

Bristol Regional Medical Center, Bristol, Sullivan County

Medical School Affiliation: Major teaching Bed Size Category: 100-399 beds

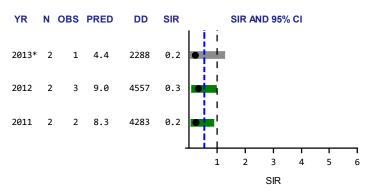
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	4.4	2,288	0.23	(0.01, 1.26)	0.47
CAUTI	Adult/Pediatric ICU	ICU 4		3,636	0.51	(0.14, 1.31)	1.40

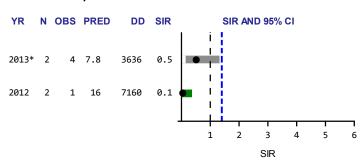
Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009) Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009)

Central Line-Associated Bloodstream Infections (CLABSI)

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

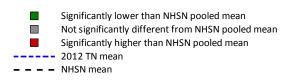


Catheter-Associated Urinary Tract Infections (CAUTI)



Data reported as of March 4, 2014 ***2013 includes data from 1/1/2013-6/30/2013 YR** = reporting year; **N** = number of units reporting (CLABSI/C **PRED** = statistically 'predicted' number of infections, based on **SIR** = standardized infection ratio (observed/predicted number)

DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



CAUTI - Adult/Pediatric ICU

E

Centennial Medical Center, Nashville, Davidson County

Medical School Affiliation: Major teaching Bed Size Category: 400+ beds



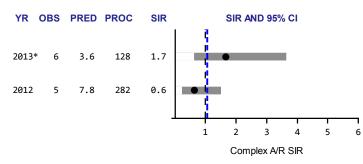
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	6	3.6	128	1.67	(0.61, 3.63)	1.06
	Abdominal hysterectomy	4	2.4	461	1.68	(0.46, 4.31)	0.92
LabID	MRSA	13	9.3	84,212	1.40	(0.74, 2.39)	1.12
	CDI	53	71.9	79,215	0.74	(0.55, 0.96)	0.77

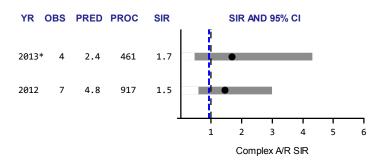
Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery



SSI - Abdominal Hysterectomy



Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) OBS PRED PATD SIR SIR AND 95% CI OBS PRED PATD SIR SIR AND 95% CI YR YR 2013* 13 9.3 84212 1.4 2013* 53 71.9 79215 0.7 2 2 3 5 1 3 4 5 6 1 4 6 SIR SIR Data reported as of March 4, 2014

Centennial Medical Center, Nashville, Davidson County

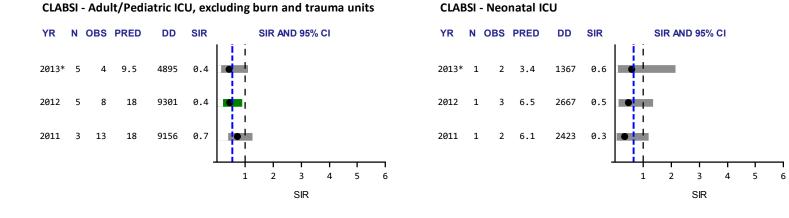
Medical School Affiliation: Major teaching Bed Size Category: 400+ beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

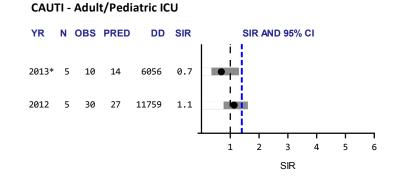
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	4	9.5	4,895	0.42	(0.11, 1.08)	0.47
	Neonatal ICU	2	3.4	1,367	0.59	(0.07,2.14)	0.66
CAUTI	Adult/Pediatric ICU	10	14.1	6,056	0.71	(0.34, 1.30)	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)



Catheter-Associated Urinary Tract Infections (CAUTI)



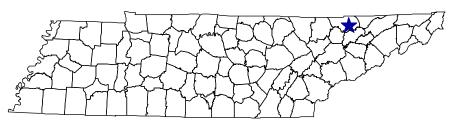
Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe

DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN pooled mean Not significantly different from NHSN pooled mean Significantly higher than NHSN pooled mean 2012 TN mean NHSN mean

Claiborne County Hospital, Tazewell, Claiborne County

Medical School Affiliation: Undergraduate teaching Bed Size Category: <50 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.3	13	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	2	N/A	N/A	0.92
LabID	MRSA	0	0.3	2,596	N/A	N/A	1.12
	CDI	1	1.3	2,596	0.79	(0.02, 4.43)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.3 13 N/A 0 0.0 2 N/A 2012 0 0.4 22 N/A 2012 0 0.1 13 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) YR OBS PRED PATD SIR YR OBS PRED PATD SIR SIR AND 95% CI 2013* 0 0.3 2596 N/A 2013* 1 1.3 2596 0.8 N/A: Number of predicted infections <1; no SIR calculated 2 3 1 4 5 6 SIR

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe

Significantly lower than NHSN pooled mean
 Not significantly different from NHSN pooled mean
 Significantly higher than NHSN pooled mean
 2012 TN mean
 NHSN mean

Claiborne County Hospital, Tazewell, Claiborne County

Medical School Affiliation: Undergraduate teaching Bed Size Category: <50 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	50	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	1	0.4	279	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

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

YR	Ν	OBS	PRED	DD	SIR	
2013*	1	0	0.1	50	N/A	
2012	1	0	0.2	164	N/A	

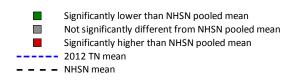
N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU									
YR	N	OBS	PRED	DD	SIR				
2013*	1	1	0.4	279	N/A				
2012	1	1	0.7	565	N/A				

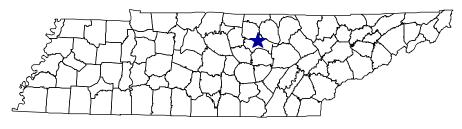
N/A: Number of predicted infections <1; no SIR calculated

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Cookeville Regional Medical Center, Cookeville, Putnam County

Medical School Affiliation: Undergraduate teaching Bed Size Category: 100-399 beds



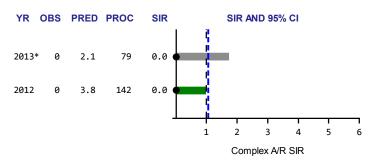
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	2.1	79	0.00	(0.00, 1.73)	1.06
	Abdominal hysterectomy	0	0.3	28	N/A	N/A	0.92
LabID	MRSA	4	1.5	29,473	2.71	(0.74, 6.94)	1.12
	CDI	29	20.6	28,257	1.41	(0.94, 2.02)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery



SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	0	0.3	28	N/A	
2012	0	0.4	45	N/A	

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) PRED PATD SIR SIR AND 95% CI OBS PRED PATD SIR SIR AND 95% CI YR OBS YR 2013* Δ 1.5 29473 2.7 2013* 29 20.6 28257 1.4 2 2 5 1 3 4 5 6 1 3 4 SIR SIR

120 of 302

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI);

PATD = number of patient days (LabID); N/A = number of infe

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Cookeville Regional Medical Center, Cookeville, Putnam County

Medical School Affiliation: Undergraduate teaching Bed Size Category: 100-399 beds

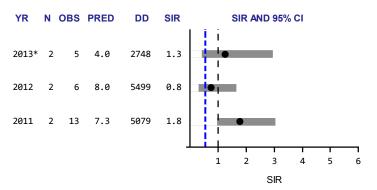
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	5	4.0	2,748	1.26	(0.41, 2.93)	0.47
CAUTI	Adult/Pediatric ICU	3	5.4	3,998	0.56	(0.12, 1.63)	1.40

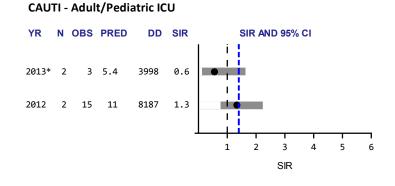
Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009) Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009)

Central Line-Associated Bloodstream Infections (CLABSI)

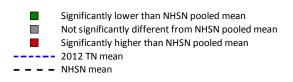
CLABSI - Adult/Pediatric ICU, excluding burn and trauma units



Catheter-Associated Urinary Tract Infections (CAUTI)



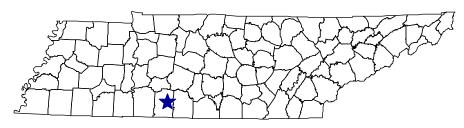
Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Со

Crockett Hospital, Lawrenceburg, Lawrence County

Medical School Affiliation: None Bed Size Category: 50-99 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.0	0	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.1	7	N/A	N/A	0.92
LabID	MRSA	0	0.1	4,168	N/A	N/A	1.12
	CDI	1	2.1	3,868	0.49	(0.01, 2.71)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.0 0 N/A 0 0.1 7 N/A 2012 0 0.1 2 N/A 2012 0 0.1 8 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) YR OBS PRED PATD SIR YR OBS PRED PATD SIR SIR AND 95% CI 2013* 0 0.1 4168 N/A 2013* 1 2.1 3868 0.5 N/A: Number of predicted infections <1; no SIR calculated 2 3 4 5 6 SIR Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 **YR** = reporting year; **OBS** = observed number of infections Significantly lower than NHSN pooled mean

PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe Not significantly different from NHSN pooled mean

Crockett Hospital, Lawrenceburg, Lawrence County

Medical School Affiliation: None Bed Size Category: 50-99 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	71	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	0.4	322	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

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

YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.1	71	N/A
2012	1	0	0.2	160	N/A
2011	1	0	0.4	274	N/A

N/A: Number of predicted infections <1; no SIR calculated

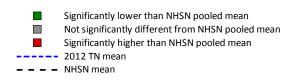
Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	Ν	OBS	PRED	DD	SIR
2013*	1	0	0.4	322	N/A
2012	1	0	0.8	612	N/A

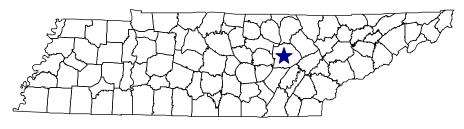
N/A: Number of predicted infections <1; no SIR calculated

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Cumberland Medical Center, Crossville, Cumberland County

Medical School Affiliation: Undergraduate teaching Bed Size Category: 100-399 beds



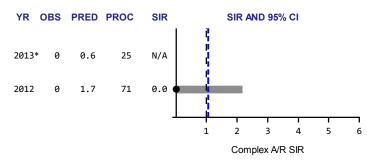
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.6	25	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	3	N/A	N/A	0.92
LabID	MRSA	0	0.8	12,335	N/A	N/A	1.12
	CDI	2	7.5	11,798	0.27	(0.03, 0.96)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery

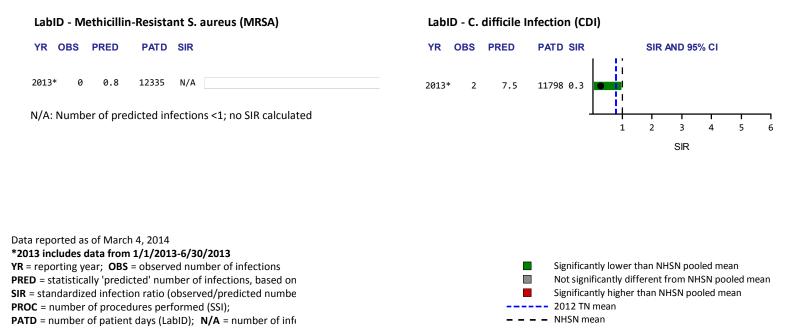


SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	0	0.0	3	N/A	
2012	0	0.1	13	N/A	

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events



Cumberland Medical Center, Crossville, Cumberland County

Medical School Affiliation: Undergraduate teaching Bed Size Category: 100-399 beds

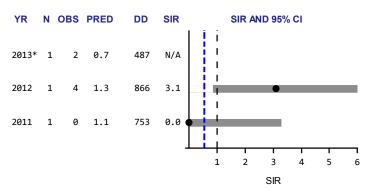
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	2	0.7	487	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	1	1.5	1,127	0.69	(0.02, 3.84)	1.40

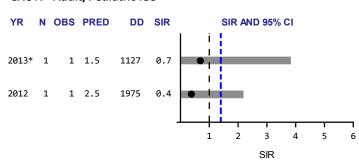
Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009) Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009)

Central Line-Associated Bloodstream Infections (CLABSI)

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

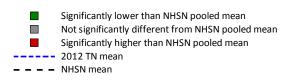


Catheter-Associated Urinary Tract Infections (CAUTI)



Data reported as of March 4, 2014 ***2013 includes data from 1/1/2013-6/30/2013** YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on CLD = statistically 'predicted' number of infections, based on

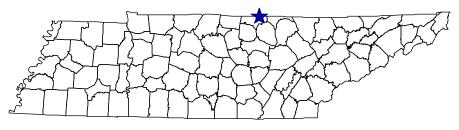
SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



CAUTI - Adult/Pediatric ICU

Cumberland River Hospital, Celina, Clay County

Medical School Affiliation: Undergraduate teaching Bed Size Category: <50 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
LabID	MRSA	0	0.1	2,405	N/A	N/A	1.12
	CDI	0	0.9	2,405	N/A	N/A	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

This facility did not perform enough eligible procedures to be subject to Tennessee SSI reporting requirements in 2012-2013

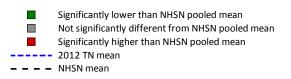
Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA)	LabID - C. difficile Infection (CDI)			
YR OBS PRED PATD SIR	YR OBS PRED PATD SIR			
2013* 0 0.1 2405 N/A	2013* 0 0.9 2405 N/A			

N/A: Number of predicted infections <1; no SIR calculated

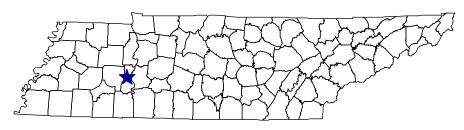
N/A: Number of predicted infections <1; no SIR calculated

No units in this facility were subject to Tennessee CLABSI/CAUTI reporting requirements in 2012-2013



Decatur County General Hospital, Parsons, Decatur County

Medical School Affiliation: None Bed Size Category: <50 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
LabID	MRSA	0	0.1	1,403	N/A	N/A	1.12
	CDI	3	0.9	1,403	N/A	N/A	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

This facility did not perform enough eligible procedures to be subject to Tennessee SSI reporting requirements in 2012-2013

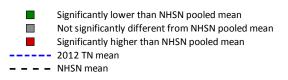
Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA)	LabID - C. difficile Infection (CDI)			
YR OBS PRED PATD SIR	YR OBS PRED PATD SIR			
2013* 0 0.1 1403 N/A	2013* 3 0.9 1403 N/A			
N/A. Number of modiated infections, d. no CID coloulated	N/A. Number of musclisted infections (1, no CID selected			

N/A: Number of predicted infections <1; no SIR calculated

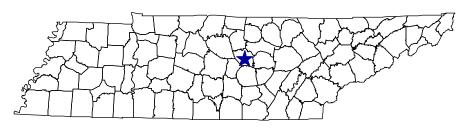
N/A: Number of predicted infections <1; no SIR calculated

No units in this facility were subject to Tennessee CLABSI/CAUTI reporting requirements in 2012-2013



DeKalb Community Hospital, Smithville, DeKalb County

Medical School Affiliation: None Bed Size Category: 50-99 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.0	0	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	1	N/A	N/A	0.92
LabID	MRSA	0	0.1	1,899	N/A	N/A	1.12
	CDI	0	0.8	1,899	N/A	N/A	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

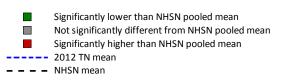
SSI - Colon Surgery	SSI - Abdominal Hysterectomy
YR OBS PRED PROC SIR	YR OBS PRED PROC SIR
2013* 0 0.0 0 N/A	2013* 0 0.0 1 N/A
2012 0 0.0 0 N/A	2012 0 0.1 5 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA)	LabID - C. difficile Infection (CDI)			
YR OBS PRED PATD SIR	YR OBS PRED PATD SIR			
2013* 0 0.1 1899 N/A	2013* 0 0.8 1899 N/A			
N/A: Number of predicted infections <1; no SIR calculated	N/A: Number of predicted infections <1; no SIR calculated			



DeKalb Community Hospital, Smithville, DeKalb County

Medical School Affiliation: None Bed Size Category: 50-99 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.0	24	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	0.2	114	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

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

YR	Ν	OBS	PRED	DD	SIR	
2013*	1	0	0.0	24	N/A	
2012	1	1	0.1	40	N/A	

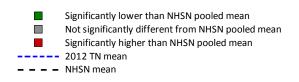
N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU										
YR	N	OBS	PRED	DD	SIR					
2013*	1	0	0.2	114	N/A					
2012	1	0	0.4	196	N/A					

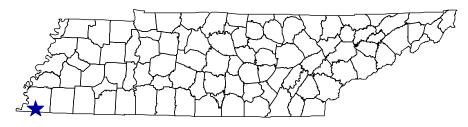
N/A: Number of predicted infections <1; no SIR calculated

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Delta Medical Center, Memphis, Shelby County

Medical School Affiliation: None Bed Size Category: 100-399 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

	Infec		tions		Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.0	1	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	2	N/A	N/A	0.92
LabID	MRSA	0	0.7	16,736	N/A	N/A	1.12
	CDI	4	8.3	16,736	0.48	(0.13, 1.24)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.0 1 N/A 0 0.0 2 N/A 2012 0 0.2 7 N/A 2012 0 0.2 21 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

---- 2012 TN mean

– – – – NHSN mean

Not significantly different from NHSN pooled mean

Significantly higher than NHSN pooled mean

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) YR OBS PRED PATD SIR YR OBS PRED PATD SIR SIR AND 95% CI 2013* 0 0.7 16736 N/A 16736 0.5 2013* 4 8.3 N/A: Number of predicted infections <1; no SIR calculated 2 3 4 5 6 SIR Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 **YR** = reporting year; **OBS** = observed number of infections Significantly lower than NHSN pooled mean

PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI);

PATD = number of patient days (LabID); **N/A** = number of infe

Delta Medical Center, Memphis, Shelby County

Medical School Affiliation: None Bed Size Category: 100-399 beds

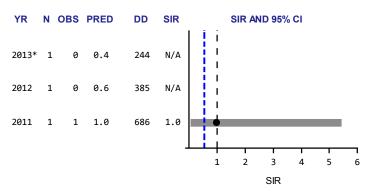
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.4	244	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	0.4	285	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

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

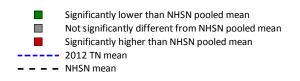


Catheter-Associated Urinary Tract Infections (CAUTI)

CAU	CAUTI - Adult/Pediatric ICU										
YR	Ν	OBS	PRED	DD	SIR						
2013*	1	0	0.4	285	N/A						
2012	1	1	0.7	515	N/A						

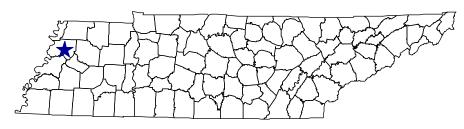
N/A: Number of predicted infections <1; no SIR calculated

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Dyersburg Regional Medical Center, Dyersburg, Dyer County

Medical School Affiliation: None Bed Size Category: 100-399 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

			tions		Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.4	13	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	4	N/A	N/A	0.92
LabID	MRSA	1	0.3	5,883	N/A	N/A	1.12
	CDI	1	3.1	5,670	0.33	(0.01, 1.82)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.4 13 N/A 0 0.0 4 N/A 2012 0 0.9 34 N/A 2012 0 0.1 10 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) YR OBS PRED PATD SIR YR OBS PRED PATD SIR SIR AND 95% CI 2013* 0.3 5883 N/A 1 2013* 1 3.1 5670 0.3 N/A: Number of predicted infections <1; no SIR calculated 2 3 4 5 6 SIR Data reported as of March 4, 2014

*2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe

Significantly lower than NHSN pooled mean
 Not significantly different from NHSN pooled mean
 Significantly higher than NHSN pooled mean
 2012 TN mean
 NHSN mean

Dyersburg Regional Medical Center, Dyersburg, Dyer County

Medical School Affiliation: None Bed Size Category: 100-399 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	0.4	221	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	1.1	554	0.00	(0.00, 3.30)	1.40

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

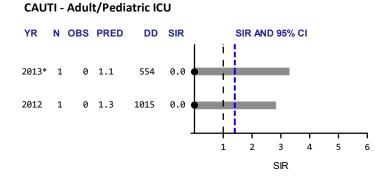
Central Line-Associated Bloodstream Infections (CLABSI)

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

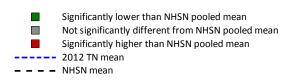
YR	N	OBS	PRED	DD	SIR
2013*	1	1	0.4	221	N/A
2012	1	0	0.6	418	N/A
2011	1	0	0.9	632	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

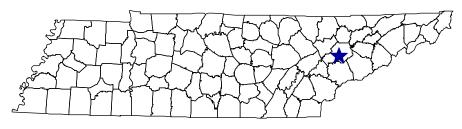


Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



East Tennessee Children's Hospital, Knoxville, Knox County

Medical School Affiliation: Graduate teaching Bed Size Category: 100-399 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.3	11	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	0	N/A	N/A	0.92
LabID	MRSA	0	1.4	38,544	0.00	(0.00, 2.67)	1.12
	CDI	9	19.1	29,087	0.47	(0.22, 0.89)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.3 11 N/A 0 0.0 0 N/A 2012 0 0.9 26 N/A 2012 0 0.0 0 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

– – – – NHSN mean

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) PRED PATD SIR SIR AND 95% CI YR OBS PRED PATD SIR SIR AND 95% CI YR OBS 2013* 0 1.4 38544 0.0 2013* 9 19.1 29087 0.5 2 2 1 3 4 5 6 3 4 5 6 SIR SIR Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 **YR** = reporting year; **OBS** = observed number of infections Significantly lower than NHSN pooled mean Not significantly different from NHSN pooled mean PRED = statistically 'predicted' number of infections, based on **SIR** = standardized infection ratio (observed/predicted numbe Significantly higher than NHSN pooled mean **PROC** = number of procedures performed (SSI); ---- 2012 TN mean

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PATD = number of patient days (LabID); N/A = number of infe

East Tennessee Children's Hospital, Knoxville, Knox County

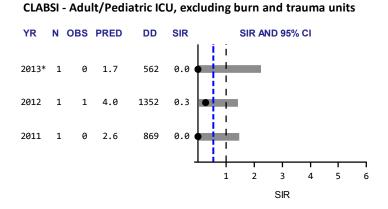
Medical School Affiliation: Graduate teaching Bed Size Category: 100-399 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

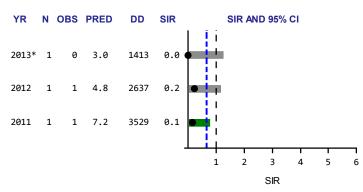
		Infections			Standardized Infe		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	1.7	562	0.00	(0.00, 2.24)	0.47
	Neonatal ICU	0	3.0	1,413	0.00	(0.00, 1.24)	0.66
CAUTI	Adult/Pediatric ICU	0	0.6	229	N/A	N/A	1.40

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

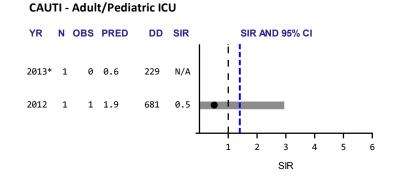
Central Line-Associated Bloodstream Infections (CLABSI)



CLABSI - Neonatal ICU

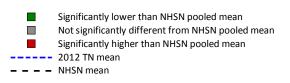


Catheter-Associated Urinary Tract Infections (CAUTI)



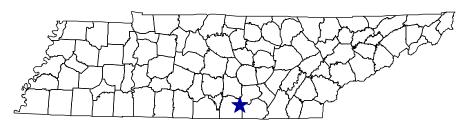
Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = douise days control line days (CLABSI)/winage optications

DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Emerald-Hodgson Hospital, Sewanee, Franklin County

Medical School Affiliation: None Bed Size Category: <50 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
LabID	MRSA	0	0.0	1,099	N/A	N/A	1.12
	CDI	0	0.5	1,099	N/A	N/A	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

This facility did not perform enough eligible procedures to be subject to Tennessee SSI reporting requirements in 2012-2013

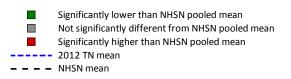
Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA)	LabID - C. difficile Infection (CDI)			
YR OBS PRED PATD SIR	YR OBS PRED PATD SIR			
2013* 0 0.0 1099 N/A	2013* 0 0.5 1099 N/A			
N/A. Novelage of an elisted infections of the CID scientists of	N/A. Number of multiched infections (1, no CID colordated			

N/A: Number of predicted infections <1; no SIR calculated

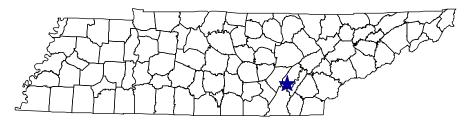
N/A: Number of predicted infections <1; no SIR calculated

No units in this facility were subject to Tennessee CLABSI/CAUTI reporting requirements in 2012-2013



Erlanger East, Chattanooga, Hamilton County

Medical School Affiliation: Major teaching Bed Size Category: <50 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

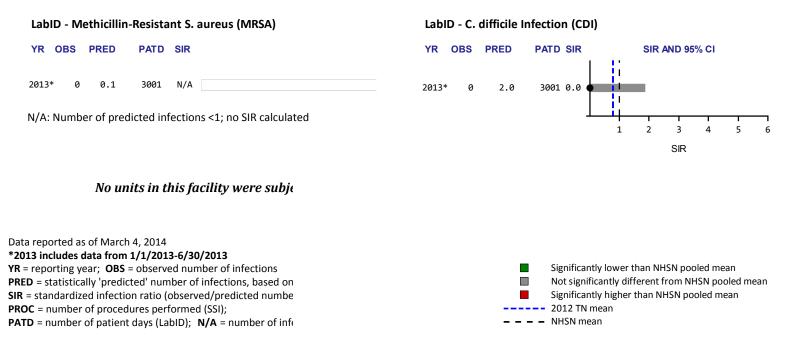
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.0	0	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.7	89	N/A	N/A	0.92
LabID	MRSA	0	0.1	3,001	N/A	N/A	1.12
	CDI	0	2.0	3,001	0.00	(0.00, 1.87)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)



Healthcare-Onset Laboratory-Identified (LabID) Events



Erlanger Medical Center, Chattanooga, Hamilton County

Medical School Affiliation: Major teaching Bed Size Category: 400+ beds



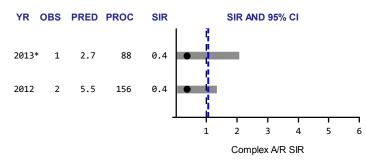
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	1	2.7	88	0.37	(0.01, 2.07)	1.06
	Abdominal hysterectomy	2	1.1	123	1.88	(0.23, 6.79)	0.92
LabID	MRSA	8	7.0	64,191	1.14	(0.49, 2.24)	1.12
	CDI	45	51.5	56,691	0.87	(0.64, 1.17)	0.77

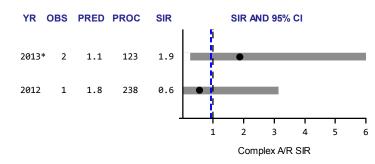
Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery

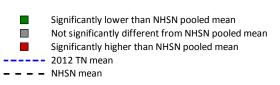


SSI - Abdominal Hysterectomy



Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) OBS PRED PATD SIR SIR AND 95% CI OBS PRED PATD SIR SIR AND 95% CI YR YR 2013* 8 7.0 64191 1.1 2013* 45 51.5 56691 0.9 2 2 3 5 1 3 4 5 6 1 4 6 SIR SIR Data reported as of March 4, 2014



Erlanger Medical Center, Chattanooga, Hamilton County

Medical School Affiliation: Major teaching Bed Size Category: 400+ beds

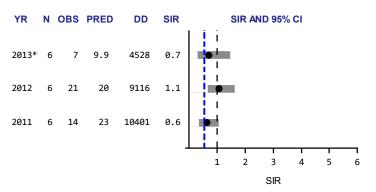
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	7	9.9	4,528	0.71	(0.28, 1.46)	0.47
CAUTI	Adult/Pediatric ICU	50	20.1	7,475	2.48	(1.84, 3.27)	1.40

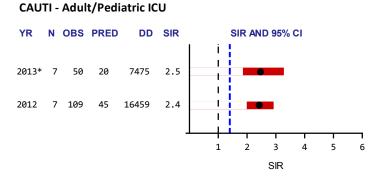
Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009) Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009)

Central Line-Associated Bloodstream Infections (CLABSI)

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

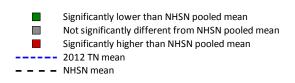


Catheter-Associated Urinary Tract Infections (CAUTI)



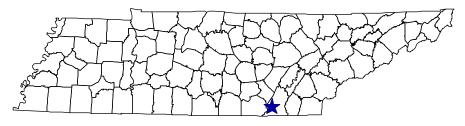
Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013

YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Erlanger North, Chattanooga, Hamilton County

Medical School Affiliation: Major teaching Bed Size Category: <50 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.0	0	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	0	N/A	N/A	0.92
LabID	MRSA	0	0.1	1,844	N/A	N/A	1.12
	CDI	0	1.2	1,844	0.00	(0.00, 3.04)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

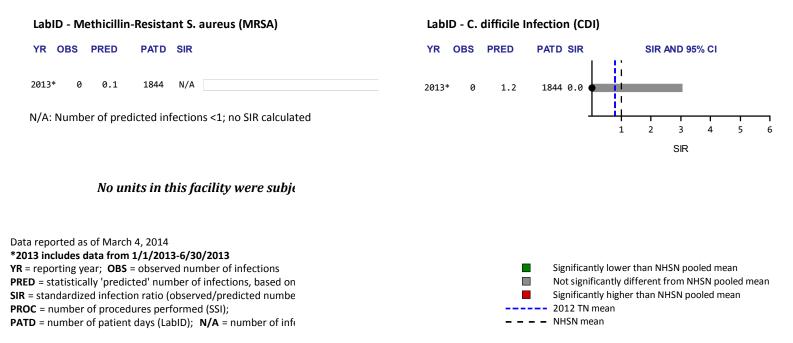
Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.0 0 N/A 0 0.0 0 N/A 2012 0 0.0 0 N/A 2012 0 0.0 0 N/A

N/A: Number of predicted infections <1; no SIR calculated

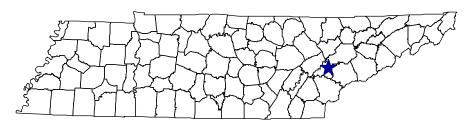
N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events



Fort Loudoun Medical Center, Lenoir City, Loudon County

Medical School Affiliation: None Bed Size Category: 50-99 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.5	20	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	0	N/A	N/A	0.92
LabID	MRSA	0	0.2	3,294	N/A	N/A	1.12
	CDI	5	1.7	3,294	2.90	(0.94,6.76)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.5 20 N/A 0 0.0 0 N/A 2012 0 0.7 26 N/A 2012 0 0.0 1 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) YR OBS PRED PATD SIR YR OBS PRED PATD SIR SIR AND 95% CI 2013* 0 0.2 3294 N/A 2013* 5 1.7 3294 2.9 N/A: Number of predicted infections <1; no SIR calculated 2 1 3 4 5 6 SIR

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe

Significantly lower than NHSN pooled mean
 Not significantly different from NHSN pooled mean
 Significantly higher than NHSN pooled mean
 2012 TN mean
 NHSN mean

Fort Loudoun Medical Center, Lenoir City, Loudon County

Medical School Affiliation: None Bed Size Category: 50-99 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.2	90	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	0.5	249	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

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

YR	N	OBS	PRED	DD	SIR	
2013*	1	0	0.2	90	N/A	
2012	1	0	0.3	162	N/A	

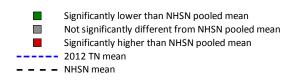
N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU										
YR	N	OBS	PRED	DD	SIR					
2013*	1	0	0.5	249	N/A					
2012	1	0	0.8	404	N/A					

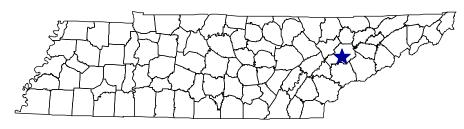
N/A: Number of predicted infections <1; no SIR calculated

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Fort Sanders Regional Medical Center, Knoxville, Knox County

Medical School Affiliation: None Bed Size Category: 400+ beds



SSI - Abdominal Hysterectomy

2012 TN mean

– – – – NHSN mean

Significantly higher than NHSN pooled mean

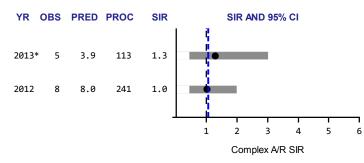
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	5	3.9	113	1.29	(0.42, 3.01)	1.06
	Abdominal hysterectomy	0	0.7	98	N/A	N/A	0.92
LabID	MRSA	4	3.7	48,628	1.07	(0.29, 2.74)	1.12
	CDI	33	34.6	45,995	0.95	(0.66, 1.34)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery



OBS PRED PROC SIR SIR AND 95% CI YR 2013* 0 0.7 98 N/A 2012 2 1.9 297 1.1 2 3 4 5 1 6 Complex A/R SIR

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) OBS PRED PATD SIR SIR AND 95% CI OBS PRED PATD SIR SIR AND 95% CI YR YR 2013* Δ 3.7 48628 1.1 2013* 33 34.6 45995 1.0 2 2 3 5 1 3 4 5 6 1 4 6 SIR SIR Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 **YR** = reporting year; **OBS** = observed number of infections Significantly lower than NHSN pooled mean Not significantly different from NHSN pooled mean

PRED = statistically 'predicted' number of infections, based on **SIR** = standardized infection ratio (observed/predicted numbe **PROC** = number of procedures performed (SSI);

PATD = number of patient days (LabID); N/A = number of infe

Fort

Fort Sanders Regional Medical Center, Knoxville, Knox County

Medical School Affiliation: None Bed Size Category: 400+ beds

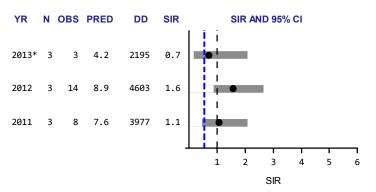
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	3	4.2	2,195	0.71	(0.15, 2.07)	0.47
CAUTI	Adult/Pediatric ICU	24	8.2	2,969	2.93	(1.88, 4.36)	1.40

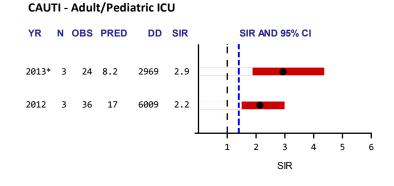
Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009) Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009)

Central Line-Associated Bloodstream Infections (CLABSI)

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

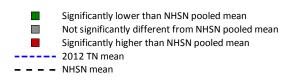


Catheter-Associated Urinary Tract Infections (CAUTI)



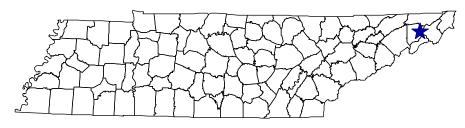
Data reported as of March 4, 2014 ***2013 includes data from 1/1/2013-6/30/2013** YR = reporting year; N = number of units reporting (CLABSI/C

PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Franklin Woods Community Hospital, Johnson City, Washington County

Medical School Affiliation: None Bed Size Category: 50-99 beds



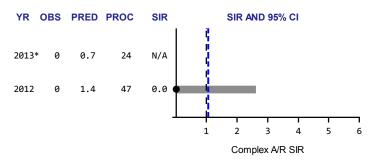
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infe	ection Ratio (SIR)	
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.7	24	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.1	8	N/A	N/A	0.92
LabID	MRSA	0	0.3	9,070	N/A	N/A	1.12
	CDI	2	5.1	7,826	0.39	(0.05, 1.41)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery



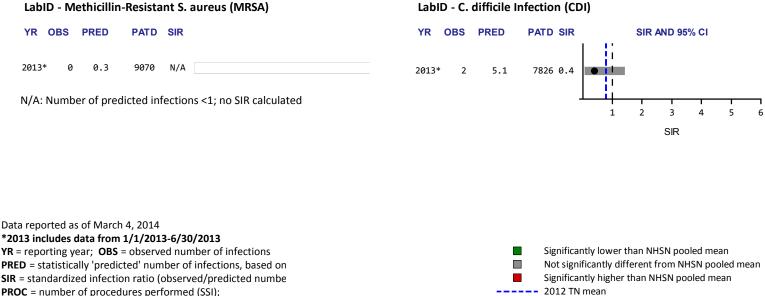
SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	0	0.1	8	N/A	
2012	0	0.1	9	N/A	

N/A: Number of predicted infections <1; no SIR calculated

– – – – NHSN mean

Healthcare-Onset Laboratory-Identified (LabID) Events



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PROC = number of procedures performed (SSI);

PATD = number of patient days (LabID); N/A = number of infe

Franklin Woods Community Hospital, Johnson City, Washington County

Medical School Affiliation: None Bed Size Category: 50-99 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infe	ection Ratio (SIR)	
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.4	227	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	1	0.7	350	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

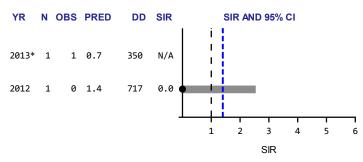
CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.4	227	N/A
2012	1	0	0.9	498	N/A
2011	1	1	0.8	415	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

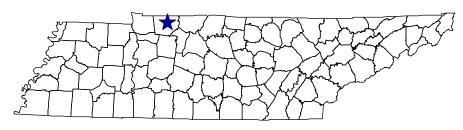


Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN pooled mean
 Not significantly different from NHSN pooled mean
 Significantly higher than NHSN pooled mean
 2012 TN mean
 NHSN mean

Gateway Medical Center, Clarksville, Montgomery County

Medical School Affiliation: None Bed Size Category: 100-399 beds



SSI - Abdominal Hysterectomy

Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infe	ection Ratio (SIR)	
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	1.2	40	0.00	(0.00, 3.01)	1.06
	Abdominal hysterectomy	1	0.5	70	N/A	N/A	0.92
LabID	MRSA	2	1.2	21,454	1.72	(0.21, 6.20)	1.12
	CDI	4	11.7	19,027	0.34	(0.09, 0.88)	0.77

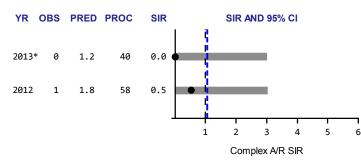
Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery

PROC = number of procedures performed (SSI);

PATD = number of patient days (LabID); N/A = number of infe

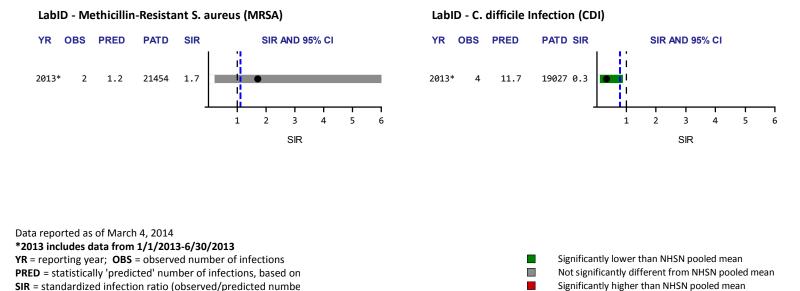


OBS PRED PROC SIR SIR AND 95% CI YR 2013* 1 0.5 70 N/A 2012 1 1.0 157 1.0 2 3 1 4 5 6 Complex A/R SIR

2012 TN mean

– – – – NHSN mean

Healthcare-Onset Laboratory-Identified (LabID) Events



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Gateway Medical Center, Clarksville, Montgomery County

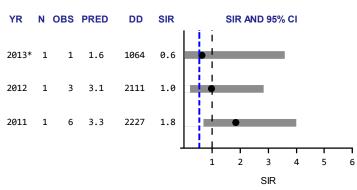
Medical School Affiliation: None Bed Size Category: 100-399 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infe	ection Ratio (SIR)	
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	1.6	1,064	0.64	(0.02, 3.57)	0.47
	Neonatal ICU	0	0.0	15	N/A	N/A	0.66
CAUTI	Adult/Pediatric ICU	2	1.8	1,443	1.12	(0.14, 4.03)	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)



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

CLABSI - Neonatal ICU

YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.0	15	N/A
2012	1	0	0.1	52	N/A
2011	1	0	0.0	19	N/A

N/A: Number of predicted infections <1; no SIR calculated

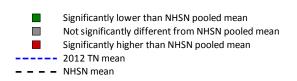
Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU



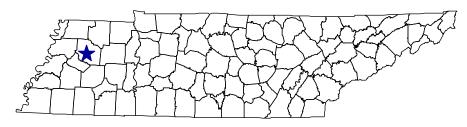
Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c

N/A = number of infections predicted <1; no SIR calculated



Gibson General Hospital, Trenton, Gibson County

Medical School Affiliation: None Bed Size Category: 50-99 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infe	ection Ratio (SIR)	
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
LabID	MRSA	0	0.0	286	N/A	N/A	1.12
	CDI	0	0.1	286	N/A	N/A	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

This facility did not perform enough eligible procedures to be subject to Tennessee SSI reporting requirements in 2012-2013

Healthcare-Onset Laboratory-Identified (LabID) Events

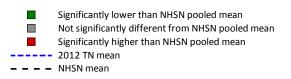
LabID - Methicillin-Resistant S. aureus (MRSA)	LabID - C. difficile Infection (CDI)
YR OBS PRED PATD SIR	YR OBS PRED PATD SIR
2013* 0 0.0 286 N/A	2013* 0 0.1 286 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

No units in this facility were subject to Tennessee CLABSI/CAUTI reporting requirements in 2012-2013

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe



Grandview Medical Center, Jasper, Marion County

Medical School Affiliation: None Bed Size Category: 50-99 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

			tions		Standardized Infe	ection Ratio (SIR)	
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.3	8	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	0	N/A	N/A	0.92
LabID	MRSA	0	0.1	2,742	N/A	N/A	1.12
	CDI	1	1.2	2,742	0.81	(0.02, 4.52)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.3 8 N/A 0 0.0 0 N/A 2012 0 0.5 13 N/A 2012 0 0.0 1 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) YR OBS PRED PATD SIR YR OBS PRED PATD SIR SIR AND 95% CI 2013* 0 0.1 2742 N/A 2013* 1 1.2 2742 0.8 N/A: Number of predicted infections <1; no SIR calculated 2 3 1 4 5 6 SIR

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe

Significantly lower than NHSN pooled mean
 Not significantly different from NHSN pooled mean
 Significantly higher than NHSN pooled mean
 2012 TN mean
 NHSN mean

Grandview Medical Center, Jasper, Marion County

Medical School Affiliation: None Bed Size Category: 50-99 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infe	ection Ratio (SIR)	
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	69	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	0.2	147	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

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

YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.1	69	N/A
2012	1	0	0.2	153	N/A
2011	1	1	0.2	136	N/A

N/A: Number of predicted infections <1; no SIR calculated

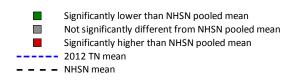
Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.2	147	N/A
2012	1	1	0.4	319	N/A

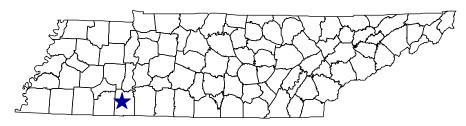
N/A: Number of predicted infections <1; no SIR calculated

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Hardin Medical Center, Savannah, Hardin County

Medical School Affiliation: None Bed Size Category: 50-99 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections Standardized Infection Ratio (SI		Infections		Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR	
SSI	Colon surgery	0	0.1	3	N/A	N/A	1.06	
	Abdominal hysterectomy	0	0.1	9	N/A	N/A	0.92	
LabID	MRSA	0	0.2	2,849	N/A	N/A	1.12	
	CDI	0	1.6	2,849	0.00	(0.00, 2.30)	0.77	

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

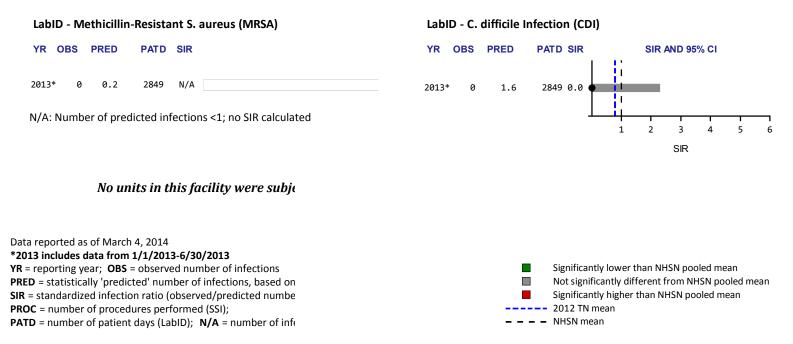
Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.1 3 N/A 0 0.1 9 N/A 2012 0 0.1 6 N/A 2012 0 0.1 21 N/A

N/A: Number of predicted infections <1; no SIR calculated

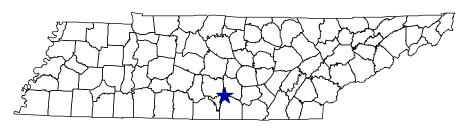
N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events



Harton Regional Medical Center, Tullahoma, Coffee County

Medical School Affiliation: None Bed Size Category: 100-399 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infe	ection Ratio (SIR)	
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.4	17	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.3	32	N/A	N/A	0.92
LabID	MRSA	0	0.8	10,124	N/A	N/A	1.12
	CDI	9	7.6	10,124	1.19	(0.54, 2.26)	0.77

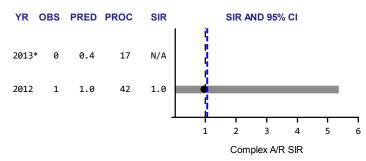
Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery

PROC = number of procedures performed (SSI);

PATD = number of patient days (LabID); N/A = number of infe



SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	0	0.3	32	N/A	
2012	0	0.6	64	N/A	

N/A: Number of predicted infections <1; no SIR calculated

--- 2012 TN mean

– – – – NHSN mean

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) YR OBS PRED PATD SIR OBS PRED PATD SIR SIR AND 95% CI YR 2013* 0 0.8 10124 N/A 2013* 9 7.6 10124 1.2 N/A: Number of predicted infections <1; no SIR calculated 2 1 3 4 5 6 SIR Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 **YR** = reporting year; **OBS** = observed number of infections Significantly lower than NHSN pooled mean Not significantly different from NHSN pooled mean **PRED** = statistically 'predicted' number of infections, based on **SIR** = standardized infection ratio (observed/predicted numbe Significantly higher than NHSN pooled mean

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Harton Regional Medical Center, Tullahoma, Coffee County

Medical School Affiliation: None Bed Size Category: 100-399 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infe	ection Ratio (SIR)	
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.6	410	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	0.9	676	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

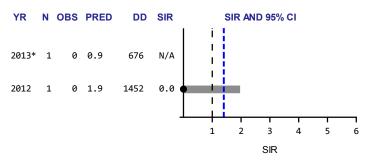
CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.6	410	N/A
2012	1	0	0.9	574	N/A
2011	1	0	0.8	553	N/A

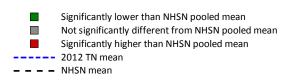
N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU



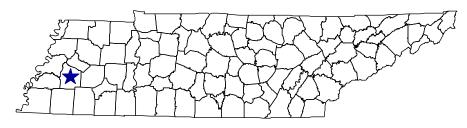
Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



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Haywood Park Community Hospital, Brownsville, Haywood County

Medical School Affiliation: None Bed Size Category: <50 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
LabID	MRSA	0	0.0	601	N/A	N/A	1.12
	CDI	0	0.3	601	N/A	N/A	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

This facility did not perform enough eligible procedures to be subject to Tennessee SSI reporting requirements in 2012-2013

Healthcare-Onset Laboratory-Identified (LabID) Events

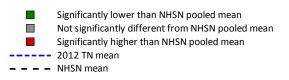
LabID - Methicillin-Resistant S. aureus (MRSA)	LabID - C. difficile Infection (CDI)
YR OBS PRED PATD SIR	YR OBS PRED PATD SIR
2013* 0 0.0 601 N/A	2013* 0 0.3 601 N/A
N /A. Number of an district information of the CID sciencies of	N/A. Number of modiated infections, dues CID selected

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

No units in this facility were subject to Tennessee CLABSI/CAUTI reporting requirements in 2012-2013

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe



Henderson County Community Hospital, Lexington, Henderson County

Medical School Affiliation: None Bed Size Category: <50 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infe	ection Ratio (SIR)	
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.0	1	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	1	N/A	N/A	0.92
LabID	MRSA	0	0.1	995	N/A	N/A	1.12
	CDI	3	0.5	995	N/A	N/A	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.0 1 N/A 0 0.0 1 N/A 2012 0 0.1 3 N/A 2012 0 0.0 2 N/A

N/A: Number of predicted infections <1; no SIR calculated

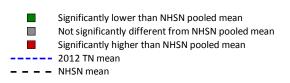
N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA)	LabID - C. difficile Infection (CDI)
YR OBS PRED PATD SIR	YR OBS PRED PATD SIR
2013* 0 0.1 995 N/A	2013* 3 0.5 995 N/A
N/A: Number of predicted infections <1; no SIR calculated	N/A: Number of predicted infections <1; no SIR calculated

No units in this facility were subje

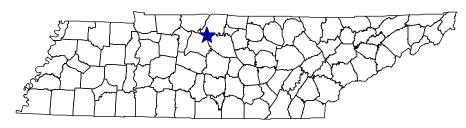
Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe



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Hendersonville Medical Center, Hendersonville, Sumner County

Medical School Affiliation: None Bed Size Category: 50-99 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infe	ection Ratio (SIR)	
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	1	0.9	35	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.2	20	N/A	N/A	0.92
LabID	MRSA	0	0.5	10,582	N/A	N/A	1.12
	CDI	6	6.5	10,582	0.93	(0.34, 2.01)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 1 0.9 35 N/A 0 0.2 20 N/A 2012 0 0.9 37 N/A 2012 0 0.3 44 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) YR OBS PRED PATD SIR YR OBS PRED PATD SIR SIR AND 95% CI 2013* 0 0.5 10582 N/A 2013* 6 6.5 10582 0.9 N/A: Number of predicted infections <1; no SIR calculated 2 3 4 5 6 SIR

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe

Significantly lower than NHSN pooled mean
 Not significantly different from NHSN pooled mean
 Significantly higher than NHSN pooled mean
 2012 TN mean
 NHSN mean

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Hendersonville Medical Center, Hendersonville, Sumner County

Medical School Affiliation: None Bed Size Category: 50-99 beds

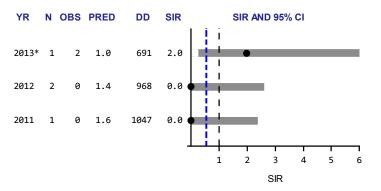
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infe	ection Ratio (SIR)	
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	2	1.0	691	1.97	(0.24, 7.12)	0.47
CAUTI	Adult/Pediatric ICU	2	0.9	698	N/A	N/A	1.40

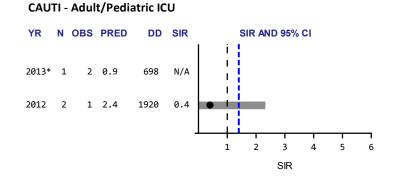
Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009) Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009)

Central Line-Associated Bloodstream Infections (CLABSI)

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

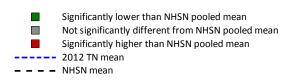


Catheter-Associated Urinary Tract Infections (CAUTI)



Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013

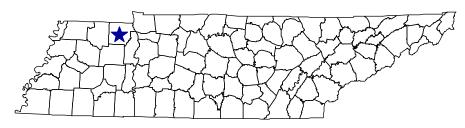
YR = reporting year; N = number of units reporting (CLABSI/C
 PRED = statistically 'predicted' number of infections, based on
 SIR = standardized infection ratio (observed/predicted numbe
 DD = device days: central line days (CLABSI)/urinary catheter c
 N/A = number of infections predicted <1; no SIR calculated



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Henry County Medical Center, Paris, Henry County

Medical School Affiliation: None Bed Size Category: 100-399 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.3	11	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.1	14	N/A	N/A	0.92
LabID	MRSA	0	0.4	7,613	N/A	N/A	1.12
	CDI	3	4.6	7,225	0.65	(0.13, 1.89)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.3 11 N/A 0 0.1 14 N/A 2012 0 0.7 29 N/A 2012 0 0.3 39 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) YR OBS PRED PATD SIR YR OBS PRED PATD SIR SIR AND 95% CI 2013* 0 0.4 7613 N/A 7225 0.6 2013* 3 4.6 N/A: Number of predicted infections <1; no SIR calculated 2 3 4 5 6 SIR Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 **YR** = reporting year; **OBS** = observed number of infections

PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe

Henry County Medical Center, Paris, Henry County

Medical School Affiliation: None Bed Size Category: 100-399 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	0.2	116	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	0.6	445	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

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

YR	N	OBS	PRED	DD	SIR
2013*	1	1	0.2	116	N/A
2012	1	1	0.4	300	N/A
2011	1	0	0.3	183	N/A

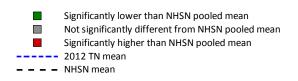
N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU N OBS PRED DD SIR SIR AND 95% CI YR i I 2013* 1 0 0.6 445 N/A Т L 988 2012 1 3 1.3 2.4 L 1 2 4 5 3 6 SIR

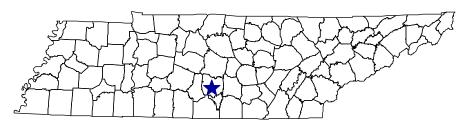
Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013

YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Heritage Medical Center, Shelbyville, Bedford County

Medical School Affiliation: None Bed Size Category: 50-99 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.0	0	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	2	N/A	N/A	0.92
LabID	MRSA	3	0.4	3,158	N/A	N/A	1.12
	CDI	1	1.6	3,158	0.64	(0.02, 3.57)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.0 0 N/A 0 0.0 2 N/A 2012 0 0.3 10 N/A 2012 0 0.1 11 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) YR OBS PRED PATD SIR YR OBS PRED PATD SIR SIR AND 95% CI 2013* 3 0.4 3158 N/A 2013* 1 1.6 3158 0.6 N/A: Number of predicted infections <1; no SIR calculated 2 3 4 5 6 SIR

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe

Significantly lower than NHSN pooled mean
 Not significantly different from NHSN pooled mean
 Significantly higher than NHSN pooled mean
 2012 TN mean
 NHSN mean

Heritage Medical Center, Shelbyville, Bedford County

Medical School Affiliation: None Bed Size Category: 50-99 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.5	331	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	0.8	617	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

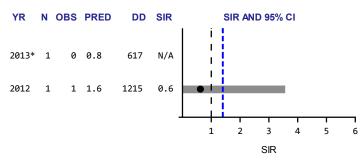
CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.5	331	N/A
2012	1	1	0.9	576	N/A
2011	1	0	0.8	548	N/A

N/A: Number of predicted infections <1; no SIR calculated

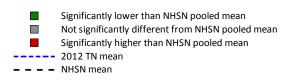
Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU



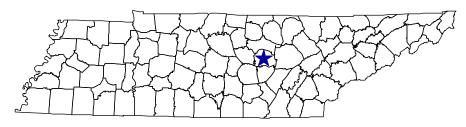
Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c

N/A = number of infections predicted <1; no SIR calculated



Highlands Medical Center, Sparta, White County

Medical School Affiliation: None Bed Size Category: <50 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.2	6	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.3	35	N/A	N/A	0.92
LabID	MRSA	0	0.1	3,459	N/A	N/A	1.12
	CDI	1	1.5	3,459	0.66	(0.02, 3.69)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.2 6 N/A 0 0.3 35 N/A 2012 0 0.3 12 N/A 2012 2 0.6 77 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) YR OBS PRED PATD SIR YR OBS PRED PATD SIR SIR AND 95% CI 2013* 0 0.1 3459 N/A 3459 0.7 2013* 1 1.5 N/A: Number of predicted infections <1; no SIR calculated 2 3 4 5 6 SIR

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe

Highlands Medical Center, Sparta, White County

Medical School Affiliation: None Bed Size Category: <50 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	65	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	1	0.2	165	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

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

YR	N	OBS	PRED	DD	SIR	
2013*	1	0	0.1	65	N/A	
2012	1	0	0.1	76	N/A	

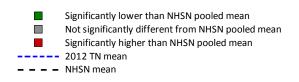
N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU											
YR	N	OBS	PRED	DD	SIR						
2013*	1	1	0.2	165	N/A						
2012	1	0	0.4	303	N/A						

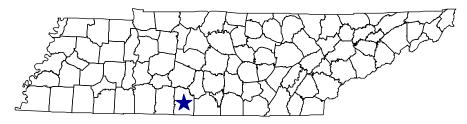
N/A: Number of predicted infections <1; no SIR calculated

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Hillside Hospital, Pulaski, Giles County

Medical School Affiliation: None Bed Size Category: 50-99 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
LabID	MRSA	0	0.1	2,328	N/A	N/A	1.12
	CDI	1	1.7	2,201	0.60	(0.02, 3.33)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

This facility did not perform enough eligible procedures to be subject to Tennessee SSI reporting requirements in 2012-2013

Healthcare-Onset Laboratory-Identified (LabID) Events



Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe

Significantly lower than NHSN pooled mean
 Not significantly different from NHSN pooled mean
 Significantly higher than NHSN pooled mean
 2012 TN mean
 NHSN mean

Hillside Hospital, Pulaski, Giles County

Medical School Affiliation: None Bed Size Category: 50-99 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	74	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	0.4	199	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

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

YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.1	74	N/A
2012	1	0	0.3	175	N/A
2011	1	0	0.3	168	N/A

N/A: Number of predicted infections <1; no SIR calculated

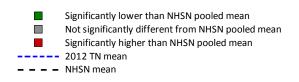
Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.4	199	N/A
2012	1	0	0.8	398	N/A

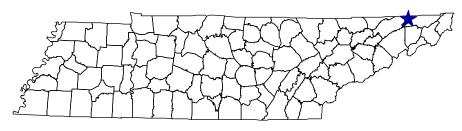
N/A: Number of predicted infections <1; no SIR calculated

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Holston Valley Medical Center, Kingsport, Sullivan County

Medical School Affiliation: Major teaching Bed Size Category: 100-399 beds



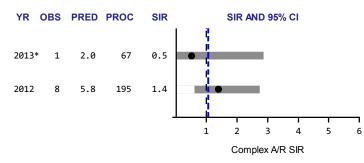
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	1	2.0	67	0.51	(0.01, 2.85)	1.06
	Abdominal hysterectomy	1	1.1	169	0.87	(0.02, 4.85)	0.92
LabID	MRSA	2	3.1	45,543	0.64	(0.08, 2.32)	1.12
	CDI	14	29.7	43,849	0.47	(0.26, 0.79)	0.77

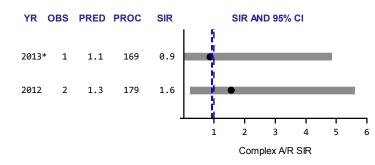
Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery



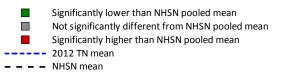
SSI - Abdominal Hysterectomy



Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) OBS PRED PATD SIR SIR AND 95% CI OBS PRED PATD SIR SIR AND 95% CI YR YR 2013* 2 3.1 45543 0.6 2013* 14 29.7 43849 0.5 2 5 2 3 5 1 3 4 6 1 4 6 SIR SIR

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe



Holston Valley Medical Center, Kingsport, Sullivan County

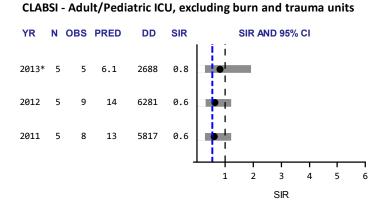
Medical School Affiliation: Major teaching Bed Size Category: 100-399 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

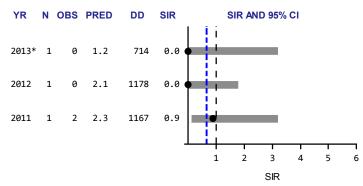
		Infections			Standardized Infe		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	5	6.1	2,688	0.82	(0.27, 1.91)	0.47
	Neonatal ICU	0	1.2	714	0.00	(0.00, 3.20)	0.66
CAUTI	Adult/Pediatric ICU	20	9.3	3,890	2.16	(1.32, 3.33)	1.40

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

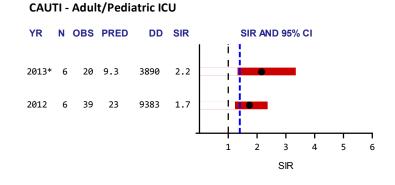
Central Line-Associated Bloodstream Infections (CLABSI)



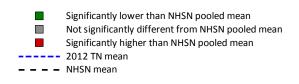
CLABSI - Neonatal ICU



Catheter-Associated Urinary Tract Infections (CAUTI)

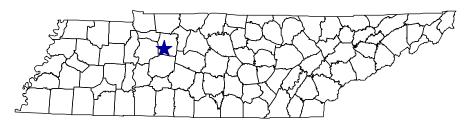


Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 **YR** = reporting year; **N** = number of units reporting (CLABSI/C **PRED** = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Horizon Medical Center, Dickson, Dickson County

Medical School Affiliation: None Bed Size Category: 100-399 beds



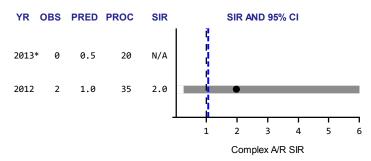
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.5	20	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	3	N/A	N/A	0.92
LabID	MRSA	0	0.9	9,952	N/A	N/A	1.12
	CDI	10	6.9	9,579	1.45	(0.69, 2.66)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery



SSI - Abdominal Hysterectomy

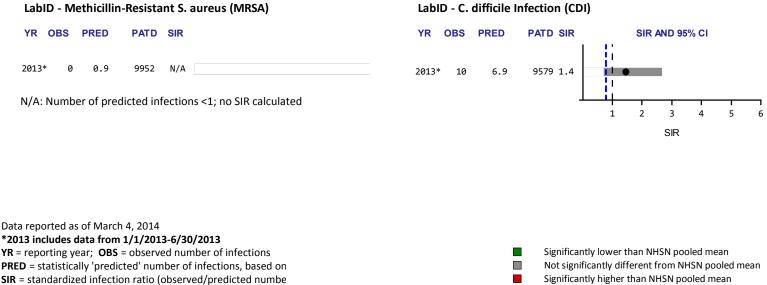
YR O	BS	PRED	PROC	SIR	
2013*	0	0.0	3	N/A	
2012	0	0.0	5	N/A	

N/A: Number of predicted infections <1; no SIR calculated

--- 2012 TN mean

– – – – NHSN mean

Healthcare-Onset Laboratory-Identified (LabID) Events



PROC = number of procedures performed (SSI);

PATD = number of patient days (LabID); N/A = number of infe

Horizon Medical Center, Dickson, Dickson County

Medical School Affiliation: None Bed Size Category: 100-399 beds

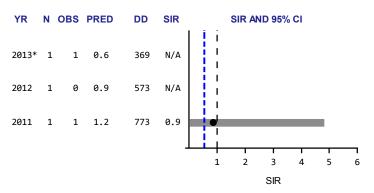
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	0.6	369	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	0.8	610	N/A	N/A	1.40

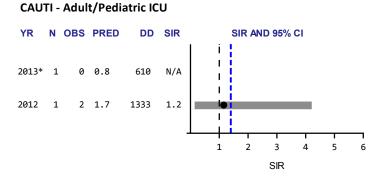
Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009) Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009)

Central Line-Associated Bloodstream Infections (CLABSI)

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

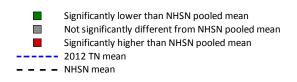


Catheter-Associated Urinary Tract Infections (CAUTI)



Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013

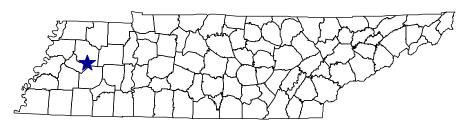
YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



.

Humboldt General Hospital, Humboldt, Gibson County

Medical School Affiliation: None Bed Size Category: <50 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
LabID	MRSA	0	0.0	533	N/A	N/A	1.12
	CDI	0	0.2	533	N/A	N/A	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

This facility did not perform enough eligible procedures to be subject to Tennessee SSI reporting requirements in 2012-2013

Healthcare-Onset Laboratory-Identified (LabID) Events

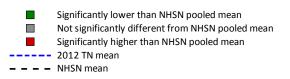
LabID - Methicillin-Resistant S. aureus (MRSA)	LabID - C. difficile Infection (CDI)			
YR OBS PRED PATD SIR	YR OBS PRED PATD SIR			
2013* 0 0.0 533 N/A	2013* 0 0.2 533 N/A			
	N/A. Norshan of such that to fact the set of the CID set of the d			

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

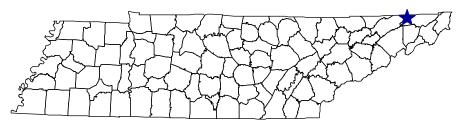
No units in this facility were subject to Tennessee CLABSI/CAUTI reporting requirements in 2012-2013

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe



Indian Path Medical Center, Kingsport, Sullivan County

Medical School Affiliation: Graduate teaching Bed Size Category: 100-399 beds



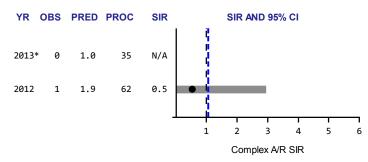
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	1.0	35	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.1	18	N/A	N/A	0.92
LabID	MRSA	1	0.6	15,160	N/A	N/A	1.12
	CDI	9	11.1	14,461	0.81	(0.37, 1.54)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery

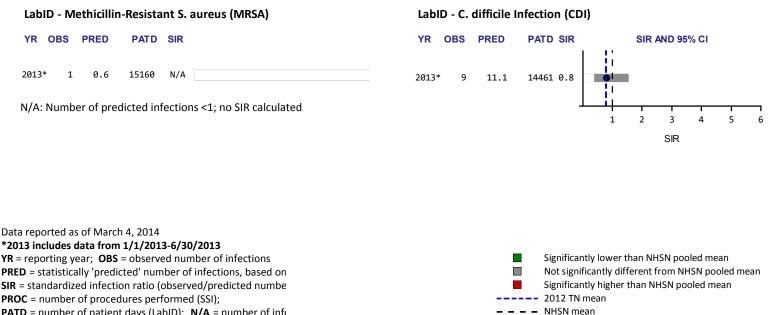


SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	0	0.1	18	N/A	
2012	0	0.8	102	N/A	

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events



PATD = number of patient days (LabID); N/A = number of infe

Indian Path Medical Center, Kingsport, Sullivan County

Medical School Affiliation: Graduate teaching Bed Size Category: 100-399 beds

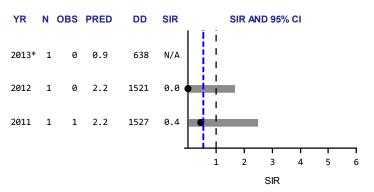
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.9	638	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	1.3	1,007	0.00	(0.00, 2.95)	1.40

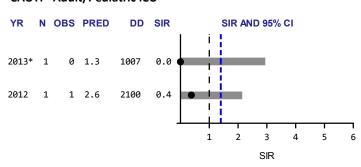
Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009) Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009)

Central Line-Associated Bloodstream Infections (CLABSI)

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

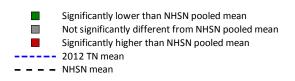


Catheter-Associated Urinary Tract Infections (CAUTI)



Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 **YR** = reporting year; **N** = number of units reporting (CLABSI/C **PRED** = statistically 'predicted' number of infections, based on

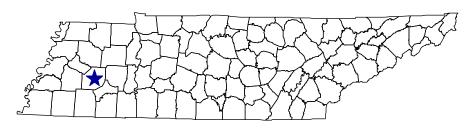
SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



CAUTI - Adult/Pediatric ICU

Jackson Madison County General Hosp., Jackson, Madison County

Medical School Affiliation: None Bed Size Category: 400+ beds



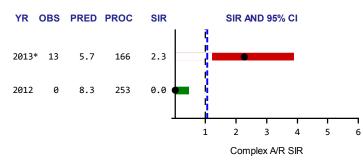
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infe	zed Infection Ratio (SIR)	
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	13	5.7	166	2.27	(1.21, 3.89)	1.06
	Abdominal hysterectomy	2	1.0	151	N/A	N/A	0.92
LabID	MRSA	3	7.9	82,566	0.38	(0.08, 1.11)	1.12
	CDI	50	59.7	76,595	0.84	(0.62, 1.10)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery

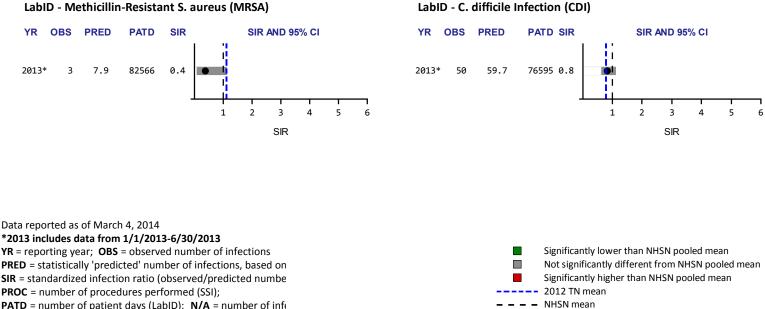


OBS PRED PROC SIR SIR AND 95% CI YR 2013* 2 1.0 151 N/A 2012 4 2.7 434 1.5 2 3 5 1 4 6

SSI - Abdominal Hysterectomy

Complex A/R SIR

Healthcare-Onset Laboratory-Identified (LabID) Events



PATD = number of patient days (LabID); N/A = number of infe

Jack

Jackson Madison County General Hosp., Jackson, Madison County

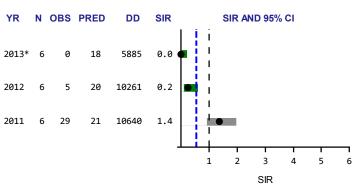
Medical School Affiliation: None Bed Size Category: 400+ beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

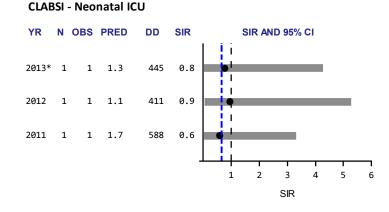
		Infec	tions		Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	17.9	5,885	0.00	(0.00, 0.21)	0.47
	Neonatal ICU	1	1.3	445	0.76	(0.02, 4.26)	0.66
CAUTI	Adult/Pediatric ICU	27	18.1	7,676	1.49	(0.98, 2.17)	1.40

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

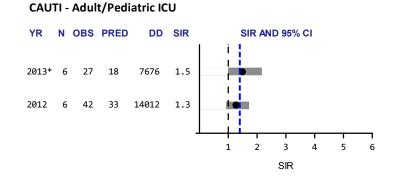
Central Line-Associated Bloodstream Infections (CLABSI)



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

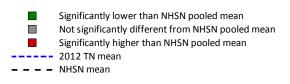


Catheter-Associated Urinary Tract Infections (CAUTI)



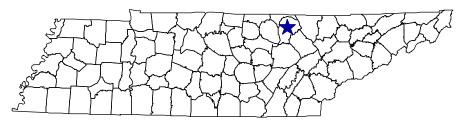
Data reported as of March 4, 2014

*2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Jamestown Regional Medical Center, Jamestown, Fentress County

Medical School Affiliation: Undergraduate teaching Bed Size Category: 50-99 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.0	0	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	0	N/A	N/A	0.92
LabID	MRSA	0	0.3	4,266	N/A	N/A	1.12
	CDI	0	2.3	4,266	0.00	(0.00, 1.62)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

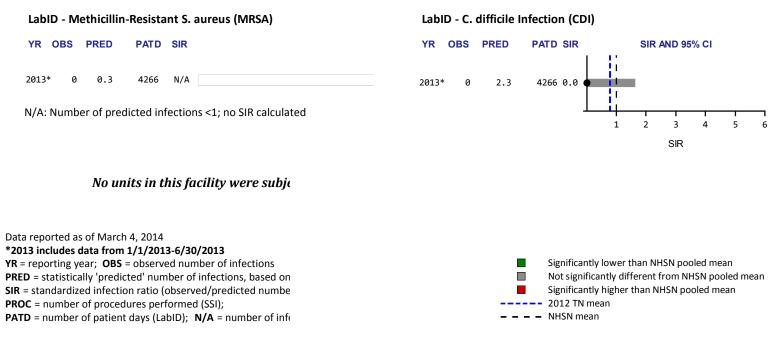
Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.0 0 N/A 0 0.0 0 N/A 2012 0 0.0 0 N/A 2012 0 0.1 4 N/A

N/A: Number of predicted infections <1; no SIR calculated

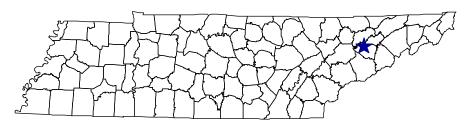
N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events



Jefferson Memorial Hospital, Jefferson City, Jefferson County

Medical School Affiliation: None Bed Size Category: 50-99 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

			tions		Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.3	10	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.1	19	N/A	N/A	0.92
LabID	MRSA	0	0.3	4,267	N/A	N/A	1.12
	CDI	0	2.3	4,267	0.00	(0.00, 1.58)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.3 10 N/A 0 0.1 19 N/A 2012 2 0.6 24 N/A 2012 0 0.0 1 N/A

N/A: Number of predicted infections <1; no SIR calculated

PATD = number of patient days (LabID); N/A = number of infe

N/A: Number of predicted infections <1; no SIR calculated

– – – – NHSN mean

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) YR OBS PRED PATD SIR YR OBS PRED PATD SIR SIR AND 95% CI 2013* 0 0.3 4267 N/A 2013* 0 2.3 4267 0.0 N/A: Number of predicted infections <1; no SIR calculated 2 3 4 5 6 SIR Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 **YR** = reporting year; **OBS** = observed number of infections Significantly lower than NHSN pooled mean Not significantly different from NHSN pooled mean **PRED** = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe Significantly higher than NHSN pooled mean **PROC** = number of procedures performed (SSI); ---- 2012 TN mean

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Jefferson Memorial Hospital, Jefferson City, Jefferson County

Medical School Affiliation: None Bed Size Category: 50-99 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.0	8	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	0.4	347	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

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

YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.0	8	N/A
2012	1	0	0.1	89	N/A
2011	1	0	0.2	126	N/A

N/A: Number of predicted infections <1; no SIR calculated

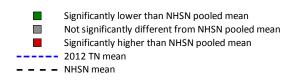
Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.4	347	N/A
2012	1	1	1.0	743	N/A

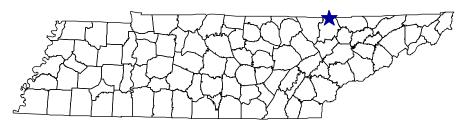
N/A: Number of predicted infections <1; no SIR calculated

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Jellico Community Hospital, Jellico, Campbell County

Medical School Affiliation: None Bed Size Category: <50 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.1	5	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.1	5	N/A	N/A	0.92
LabID	MRSA	0	0.1	3,042	N/A	N/A	1.12
	CDI	1	1.7	2,818	0.59	(0.01, 3.29)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.1 5 N/A 0 0.1 5 N/A 2012 1 0.3 11 N/A 2012 0 0.1 6 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) YR OBS PRED PATD SIR YR OBS PRED PATD SIR SIR AND 95% CI 2013* 0 0.1 3042 N/A 2013* 1 1.7 2818 0.6 N/A: Number of predicted infections <1; no SIR calculated 2 3 4 5 6 SIR

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe

Jellico Community Hospital, Jellico, Campbell County

Medical School Affiliation: None Bed Size Category: <50 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	74	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	1	0.4	273	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

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

YR	N	OBS	PRED	DD	SIR	
2013*	1	0	0.1	74	N/A	
2012	1	0	0.2	139	N/A	

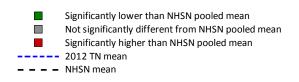
N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU								
YR	N	OBS	PRED	DD	SIR			
2013*	1	1	0.4	273	N/A			
2012	1	1	0.6	496	N/A			

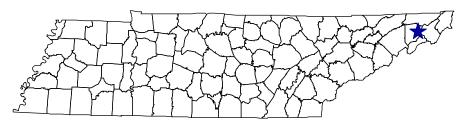
N/A: Number of predicted infections <1; no SIR calculated

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Johnson City Medical Center, Johnson City, Washington County

Medical School Affiliation: Major teaching Bed Size Category: 400+ beds



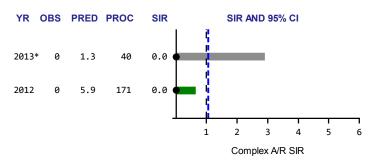
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	1.3	40	0.00	(0.00, 2.90)	1.06
	Abdominal hysterectomy	0	0.1	15	N/A	N/A	0.92
LabID	MRSA	5	5.4	65,629	0.92	(0.30, 2.14)	1.12
	CDI	53	57.5	63,490	0.92	(0.69, 1.21)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery



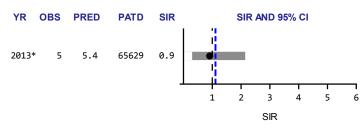
SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	0	0.1	15	N/A	
2012	0	0.7	75	N/A	

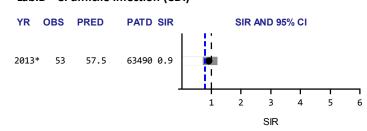
N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA)



LabID - C. difficile Infection (CDI)



2012 TN mean

– – – – NHSN mean

Significantly lower than NHSN pooled mean

Significantly higher than NHSN pooled mean

Not significantly different from NHSN pooled mean

Data reported as of March 4, 2014 ***2013 includes data from 1/1/2013-6/30/2013** YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); DATD = number of national data (LabID). N(A = number of infe

PATD = number of patient days (LabID); **N/A** = number of infe

Johnson City Medical Center, Johnson City, Washington County

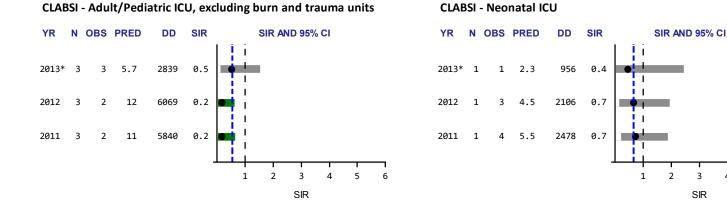
Medical School Affiliation: Major teaching Bed Size Category: 400+ beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

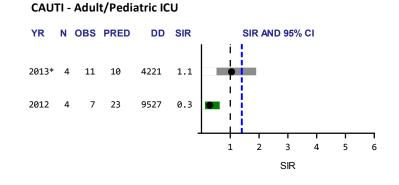
		Infections			Standardized Infe		
HAI	Type/Unit	Observed Predicted		Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	3	5.7	2,839	0.52	(0.11, 1.53)	0.47
	Neonatal ICU	1	2.3	956	0.44	(0.01, 2.44)	0.66
CAUTI	Adult/Pediatric ICU	11	10.4	4,221	1.06	(0.53, 1.89)	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

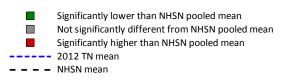


Catheter-Associated Urinary Tract Infections (CAUTI)



Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 **YR** = reporting year; **N** = number of units reporting (CLABSI/C **PRED** = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe

DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



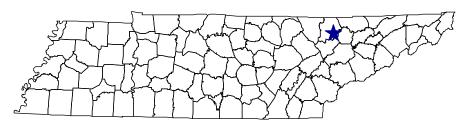
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Lafollette Medical Center, Lafollette, Campbell County

Medical School Affiliation: None Bed Size Category: <50 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.0	1	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	0	N/A	N/A	0.92
LabID	MRSA	1	0.4	6,945	N/A	N/A	1.12
	CDI	3	4.1	6,945	0.73	(0.15, 2.14)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.0 1 N/A 0 0.0 0 N/A 2012 0 0.0 0 N/A 2012 0 0.0 1 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) YR OBS PRED PATD SIR YR OBS PRED PATD SIR SIR AND 95% CI 2013* 0.4 6945 N/A 1 2013* 3 4.1 6945 0.7 N/A: Number of predicted infections <1; no SIR calculated 2 1 3 4 5 6 SIR Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 **YR** = reporting year; **OBS** = observed number of infections Significantly lower than NHSN pooled mean

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PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI);

PATD = number of patient days (LabID); **N/A** = number of infe

---- 2012 TN mean

Not significantly different from NHSN pooled mean

Significantly higher than NHSN pooled mean

Lafollette Medical Center, Lafollette, Campbell County

Medical School Affiliation: None Bed Size Category: <50 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	/Unit Observed Predicted Device Days		Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	91	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	1	0.6	494	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

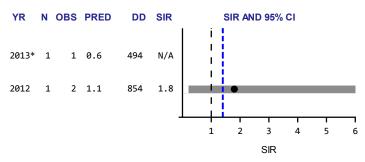
CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.1	91	N/A
2012	1	0	0.2	137	N/A
2011	1	0	0.1	83	N/A

N/A: Number of predicted infections <1; no SIR calculated

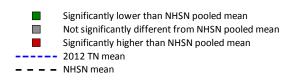
Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU



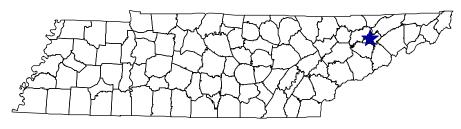
Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013

YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Lakeway Regional Hospital, Morristown, Hamblen County

Medical School Affiliation: Graduate teaching Bed Size Category: 100-399 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.2	8	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.1	9	N/A	N/A	0.92
LabID	MRSA	0	0.3	5,347	N/A	N/A	1.12
	CDI	0	2.9	5,052	0.00	(0.00, 1.27)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.2 8 N/A 0 0.1 9 N/A 2012 0 0.5 18 N/A 2012 0 0.1 10 N/A

N/A: Number of predicted infections <1; no SIR calculated

PROC = number of procedures performed (SSI);

PATD = number of patient days (LabID); N/A = number of infe

N/A: Number of predicted infections <1; no SIR calculated

---- 2012 TN mean

– – – – NHSN mean

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) YR OBS PRED PATD SIR YR OBS PRED PATD SIR SIR AND 95% CI 2013* 0 0.3 5347 N/A 5052 0.0 2013* 0 2.9 N/A: Number of predicted infections <1; no SIR calculated 2 3 4 5 6 SIR Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 **YR** = reporting year; **OBS** = observed number of infections Significantly lower than NHSN pooled mean Not significantly different from NHSN pooled mean **PRED** = statistically 'predicted' number of infections, based on **SIR** = standardized infection ratio (observed/predicted numbe Significantly higher than NHSN pooled mean

Lakeway Regional Hospital, Morristown, Hamblen County

Medical School Affiliation: Graduate teaching Bed Size Category: 100-399 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	nit Observed Predicted Device Days		SIR	95% CI	TN SIR	
CLABSI	Adult/Pediatric ICU	1	0.1	95	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0 0.6		456	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

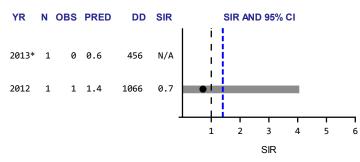
CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2013*	1	1	0.1	95	N/A
2012	1	1	0.4	234	N/A
2011	1	2	0.2	166	N/A

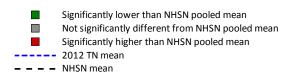
N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

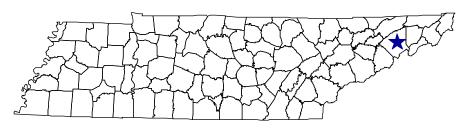


Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Laughlin Memorial Hospital, Greeneville, Greene County

Medical School Affiliation: None Bed Size Category: 100-399 beds



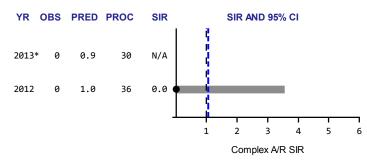
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.9	30	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	0	N/A	N/A	0.92
LabID	MRSA	0	0.4	8,850	N/A	N/A	1.12
	CDI	0	4.2	8,633	0.00	(0.00, 0.87)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery

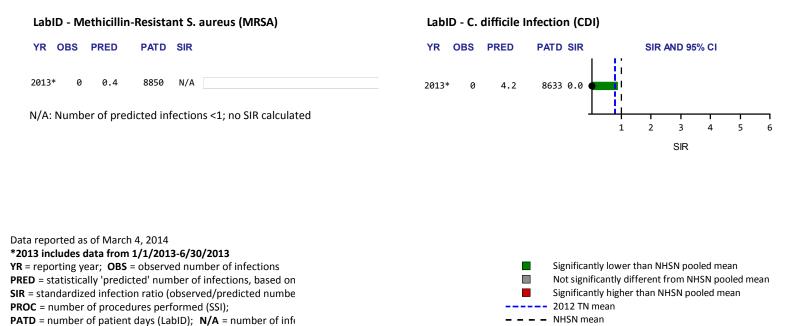


SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	0	0.0	0	N/A	
2012	0	0.1	8	N/A	

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events



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Laughlin Memorial Hospital, Greeneville, Greene County

Medical School Affiliation: None Bed Size Category: 100-399 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.2	103	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	0.6	491	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

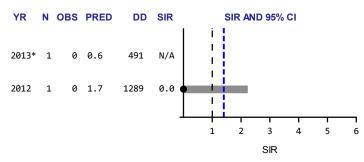
CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.2	103	N/A
2012	1	0	0.5	365	N/A
2011	1	0	0.4	266	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

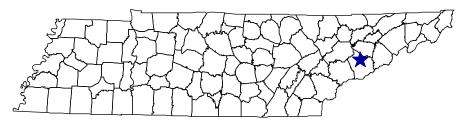
CAUTI - Adult/Pediatric ICU



Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated

LeConte Medical Center, Sevierville, Sevier County

Medical School Affiliation: Undergraduate teaching Bed Size Category: 50-99 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	1	0.5	17	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.3	35	N/A	N/A	0.92
LabID	MRSA	0	0.4	8,073	N/A	N/A	1.12
	CDI	1	4.1	7,274	0.24	(0.01, 1.36)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 1 0.5 17 N/A 0 0.3 35 N/A 2012 0 1.0 38 N/A 2012 1 0.6 60 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) YR OBS PRED PATD SIR YR OBS PRED PATD SIR SIR AND 95% CI 7274 0.2 2013* 0 0.4 8073 N/A 2013* 1 4.1 N/A: Number of predicted infections <1; no SIR calculated 2 3 4 5 6 SIR Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 **YR** = reporting year; **OBS** = observed number of infections Significantly lower than NHSN pooled mean **PRED** = statistically 'predicted' number of infections, based on

PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe

SIR = standardized infection ratio (observed/predicted numbe

LeConte Medical Center, Sevierville, Sevier County

Medical School Affiliation: Undergraduate teaching Bed Size Category: 50-99 beds

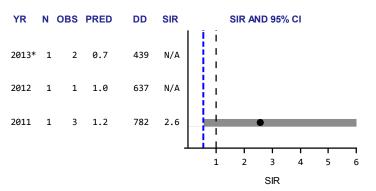
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	2	0.7	439	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	1.2	940	0.00	(0.00, 3.04)	1.40

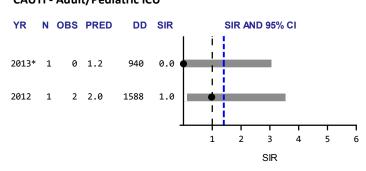
Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009) Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009)

Central Line-Associated Bloodstream Infections (CLABSI)

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

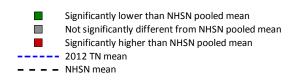


Catheter-Associated Urinary Tract Infections (CAUTI)



Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013

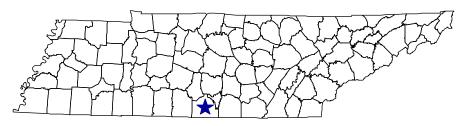
YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



CAUTI - Adult/Pediatric ICU

Lincoln Medical Center, Fayetteville, Lincoln County

Medical School Affiliation: None Bed Size Category: <50 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.1	6	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	3	N/A	N/A	0.92
LabID	MRSA	0	0.2	3,602	N/A	N/A	1.12
	CDI	1	1.8	3,602	0.55	(0.01, 3.04)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.1 6 N/A 0 0.0 3 N/A 2012 0 0.3 10 N/A 2012 1 0.0 8 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) YR OBS PRED PATD SIR YR OBS PRED PATD SIR SIR AND 95% CI 2013* 0 0.2 3602 N/A 2013* 1 1.8 3602 0.5 N/A: Number of predicted infections <1; no SIR calculated 2 3 4 5 6 SIR

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe

Lincoln Medical Center, Fayetteville, Lincoln County

Medical School Affiliation: None Bed Size Category: <50 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	72	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	0.3	258	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

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

YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.1	72	N/A
2012	1	0	0.2	141	N/A
2011	1	0	0.1	47	N/A

N/A: Number of predicted infections <1; no SIR calculated

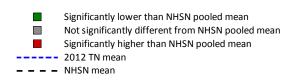
Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	Ν	OBS	PRED	DD	SIR
2013*	1	0	0.3	258	N/A
2012	1	1	0.8	622	N/A

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Livingston Regional Hospital, Livingston, Overton County

Medical School Affiliation: None Bed Size Category: 100-399 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.1	1	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.1	5	N/A	N/A	0.92
LabID	MRSA	0	0.4	8,249	N/A	N/A	1.12
	CDI	7	5.9	8,179	1.19	(0.48, 2.46)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.1 1 N/A 0 0.1 5 N/A 2012 0 0.1 3 N/A 2012 0 0.0 6 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) YR OBS PRED PATD SIR YR OBS PRED PATD SIR SIR AND 95% CI 2013* 0 0.4 8249 N/A 2013* 7 5.9 8179 1.2 N/A: Number of predicted infections <1; no SIR calculated 2 3 4 5 6 SIR Data reported as of March 4, 2014

*2013 includes data from 1/1/2013-6/30/2013
 YR = reporting year; OBS = observed number of infections
 PRED = statistically 'predicted' number of infections, based on
 SIR = standardized infection ratio (observed/predicted numbe
 PROC = number of procedures performed (SSI);
 PATD = number of patient days (LabID); N/A = number of infection

Significantly lower than NHSN pooled mean
 Not significantly different from NHSN pooled mean
 Significantly higher than NHSN pooled mean
 2012 TN mean
 NHSN mean

Livingston Regional Hospital, Livingston, Overton County

Medical School Affiliation: None Bed Size Category: 100-399 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	87	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	0.3	239	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

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

YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.1	87	N/A
2012	1	0	0.2	138	N/A
2011	1	0	0.2	120	N/A

N/A: Number of predicted infections <1; no SIR calculated

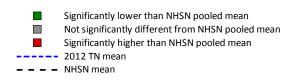
Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.3	239	N/A
2012	1	0	0.7	554	N/A

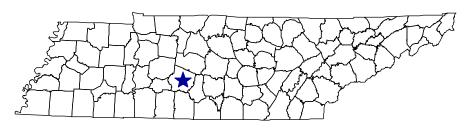
N/A: Number of predicted infections <1; no SIR calculated

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Maury Regional Medical Center, Columbia, Maury County

Medical School Affiliation: None Bed Size Category: 100-399 beds



SSI - Abdominal Hysterectomy

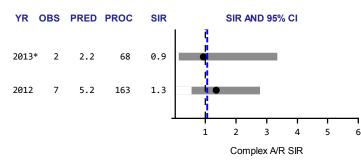
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infe		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	2	2.2	68	0.93	(0.11, 3.35)	1.06
	Abdominal hysterectomy	0	0.3	38	N/A	N/A	0.92
LabID	MRSA	4	1.3	24,479	3.08	(0.84, 7.88)	1.12
	CDI	21	23.2	22,455	0.90	(0.56, 1.38)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

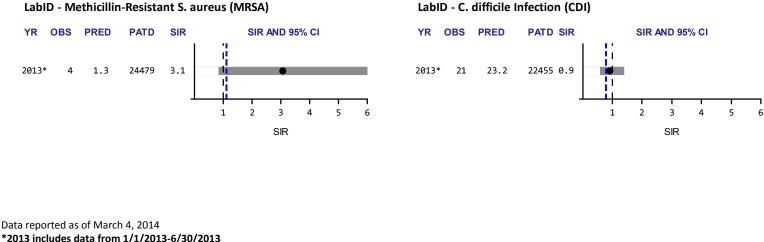
Surgical Site Infections (SSI)

SSI - Colon Surgery



OBS PRED PROC SIR SIR AND 95% CI YR 2013* 0 0.3 38 N/A 2012 0 1.0 130 0.0 2 3 5 1 4 6 Complex A/R SIR

Healthcare-Onset Laboratory-Identified (LabID) Events



*2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI);

PATD = number of patient days (LabID); N/A = number of infe



N

Significantly higher than NHSN pooled mean 2012 TN mean NHSN mean

Significantly lower than NHSN pooled mean

Not significantly different from NHSN pooled mean

Maury Regional Medical Center, Columbia, Maury County

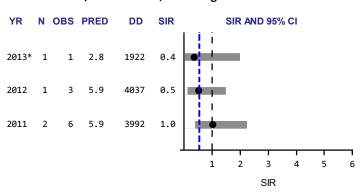
Medical School Affiliation: None Bed Size Category: 100-399 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	2.8	1,922	0.35	(0.01, 1.97)	0.47
	Neonatal ICU	0	0.0	35	N/A	N/A	0.66
CAUTI	Adult/Pediatric ICU	6	2.3	1,863	2.59	(0.95 <i>,</i> 5.64)	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)



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

YR	N OBS PRED	DD

CLABSI - Neonatal ICU

2013*	1	0	0.0	35	N/A
2012	1	0	0.1	82	N/A
2011	1	0	0.1	51	N/A

N/A: Number of predicted infections <1; no SIR calculated

SIR

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU N OBS PRED DD SIR SIR AND 95% CI YR 6 2.3 1863 2.6 2013* 1 2012 1 8 3.3 2636 2.4 2 1 3 4 5 6 SIR

Data reported as of March 4, 2014 ***2013 includes data from 1/1/2013-6/30/2013 YR** = reporting year; **N** = number of units reporting (CLABSI/C **PRED** = statistically 'predicted' number of infections, based on **SUP** = standardized infection ratio (observed/orgelicted number)

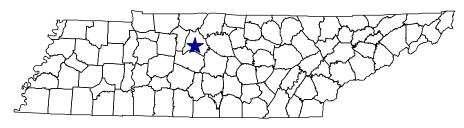
SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN pooled mean Not significantly different from NHSN pooled mean Significantly higher than NHSN pooled mean 2012 TN mean NHSN mean

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MCJ Children's Hospital at Vanderbilt, Nashville, Davidson County

Medical School Affiliation: Major teaching Bed Size Category: 100-399 beds

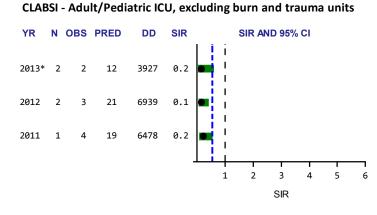


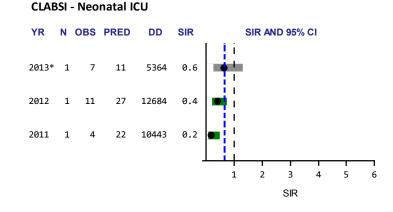
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	2	12.5	3,927	0.16	(0.02, 0.58)	0.47
	Neonatal ICU	7	11.2	5,364	0.62	(0.25, 1.29)	0.66
CAUTI	Adult/Pediatric ICU	1	2.5	910	0.40	(0.01, 2.23)	1.40

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

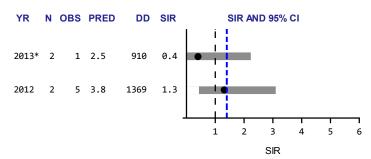
Central Line-Associated Bloodstream Infections (CLABSI)





Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU



NOTE: Surgical site infection (SSI) and Laboratory-Iden

Data reported as of March 4, 2014

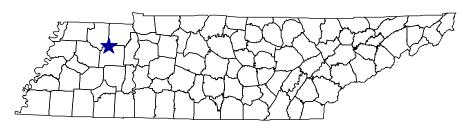
*2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN pooled mean
 Not significantly different from NHSN pooled mean
 Significantly higher than NHSN pooled mean
 2012 TN mean
 NHSN mean



McKenzie Regional Hospital, McKenzie, Carroll County

Medical School Affiliation: None Bed Size Category: <50 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.1	3	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.1	7	N/A	N/A	0.92
LabID	MRSA	0	0.1	1,880	N/A	N/A	1.12
	CDI	5	0.9	1,880	N/A	N/A	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery	SSI - Abdominal Hysterectomy
YR OBS PRED PROC SIR	YR OBS PRED PROC SIR
2013* 0 0.1 3 N/A	2013* 0 0.1 7 N/A
2012 0 0.2 5 N/A	2012 0 0.2 21 N/A

N/A: Number of predicted infections <1; no SIR calculated

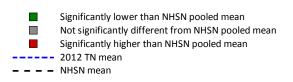
N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA)	LabID - C. difficile Infection (CDI)				
YR OBS PRED PATD SIR	YR OBS PRED PATD SIR				
2013* 0 0.1 1880 N/A	2013* 5 0.9 1880 N/A				
N/A: Number of predicted infections <1; no SIR calculated	N/A: Number of predicted infections <1; no SIR calculated				

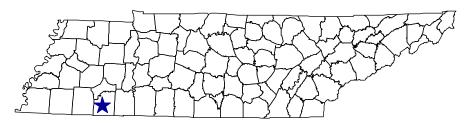
No units in this facility were subje

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe



McNairy Regional Hospital, Selmer, McNairy County

Medical School Affiliation: None Bed Size Category: <50 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.0	2	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.1	3	N/A	N/A	0.92
LabID	MRSA	1	0.1	2,379	N/A	N/A	1.12
	CDI	1	1.2	2,192	0.82	(0.02, 4.54)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

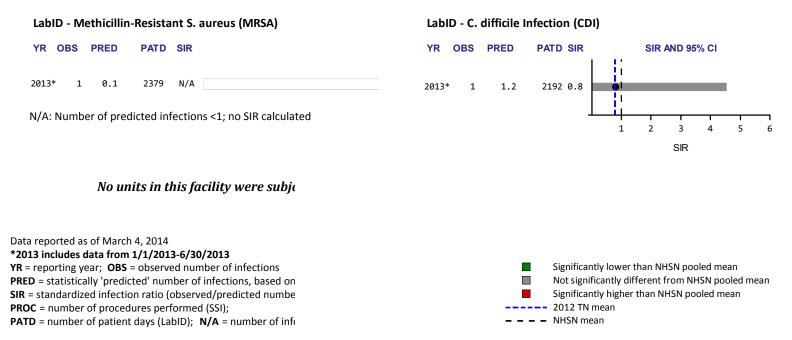
Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.0 2 N/A 0 0.1 3 N/A 2012 0 0.1 2 N/A 2012 1 0.1 23 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events



Memorial Healthcare System, Chattanooga, Hamilton County

Medical School Affiliation: None Bed Size Category: 100-399 beds



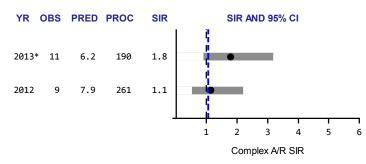
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	11	6.2	190	1.78	(0.89, 3.18)	1.06
	Abdominal hysterectomy	1	0.6	53	N/A	N/A	0.92
LabID	MRSA	3	3.5	47,200	0.86	(0.18, 2.51)	1.12
	CDI	39	41.2	47,200	0.95	(0.67, 1.30)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery



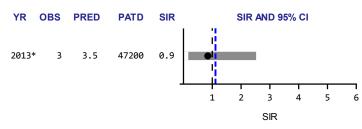
SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	1	0.6	53	N/A	
2012	2	0.8	89	N/A	

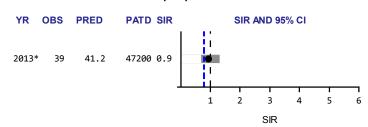
N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA)



LabID - C. difficile Infection (CDI)



2012 TN mean

– – – – NHSN mean

Significantly lower than NHSN pooled mean

Significantly higher than NHSN pooled mean

Not significantly different from NHSN pooled mean

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI);

PATD = number of patient days (LabID); **N/A** = number of infe

Memorial Healthcare System, Chattanooga, Hamilton County

Medical School Affiliation: None Bed Size Category: 100-399 beds

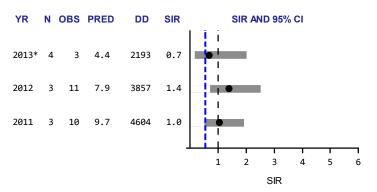
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infe	ection Ratio (SIR)	
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	3	4.4	2,193	0.68	(0.14, 1.99)	0.47
CAUTI	Adult/Pediatric ICU	13	11.8	5,405	1.10	(0.58, 1.88)	1.40

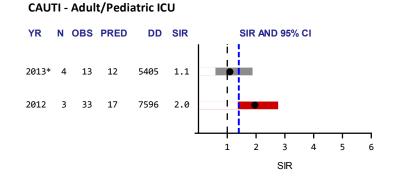
Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009) Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009)

Central Line-Associated Bloodstream Infections (CLABSI)

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

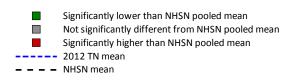


Catheter-Associated Urinary Tract Infections (CAUTI)



Data reported as of March 4, 2014

*2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Memorial Hixson Hospital, Chattanooga, Hamilton County

Medical School Affiliation: None Bed Size Category: 50-99 beds



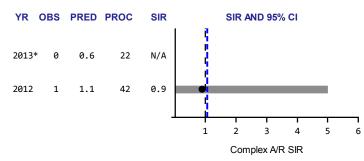
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.6	22	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	2	N/A	N/A	0.92
LabID	MRSA	0	0.6	8,509	N/A	N/A	1.12
	CDI	4	5.8	8,509	0.69	(0.19, 1.76)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery

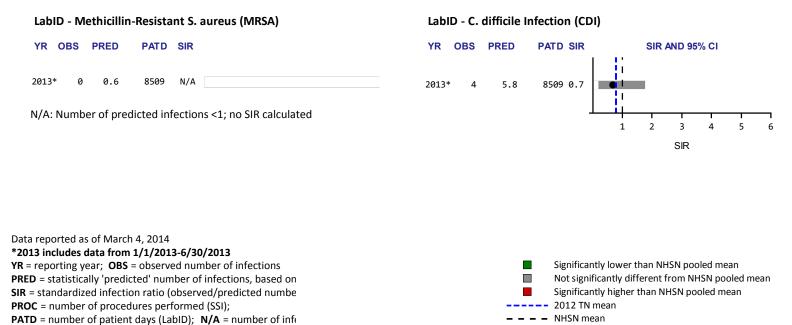


SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	0	0.0	2	N/A	
2012	0	0.1	13	N/A	

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events



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Memorial Hixson Hospital, Chattanooga, Hamilton County

Medical School Affiliation: None Bed Size Category: 50-99 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	90	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	0.2	172	N/A	N/A	1.40

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

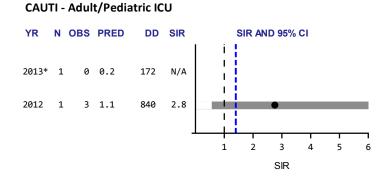
Central Line-Associated Bloodstream Infections (CLABSI)

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

YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.1	90	N/A
2012	1	0	0.6	403	N/A
2011	1	0	0.4	281	N/A

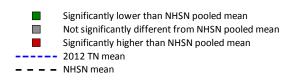
N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)



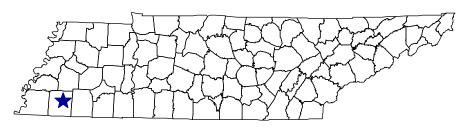
Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013

YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Methodist Healthcare Fayette, Somerville, Fayette County

Medical School Affiliation: None Bed Size Category: <50 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
LabID	MRSA	0	0.0	279	N/A	N/A	1.12
	CDI	0	0.1	144	N/A	N/A	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

This facility did not perform enough eligible procedures to be subject to Tennessee SSI reporting requirements in 2012-2013

Healthcare-Onset Laboratory-Identified (LabID) Events

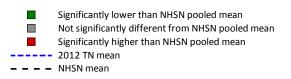
LabID - Methicillin-Resistant S. aureus (MRSA)	LabID - C. difficile Infection (CDI)			
YR OBS PRED PATD SIR	YR OBS PRED PATD SIR			
2013* 0 0.0 279 N/A	2013* 0 0.1 144 N/A			

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

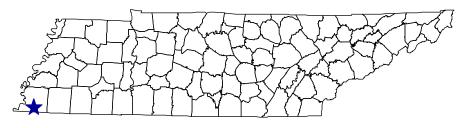
No units in this facility were subject to Tennessee CLABSI/CAUTI reporting requirements in 2012-2013

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe



Methodist Healthcare Germantown, Memphis, Shelby County

Medical School Affiliation: Graduate teaching Bed Size Category: 100-399 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	1	3.0	117	0.33	(0.01, 1.84)	1.06
	Abdominal hysterectomy	1	3.3	443	0.30	(0.01, 1.67)	0.92
LabID	MRSA	3	2.0	41,774	1.53	(0.32, 4.48)	1.12
	CDI	26	27.4	32,930	0.95	(0.62, 1.39)	0.77

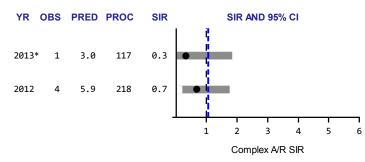
Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

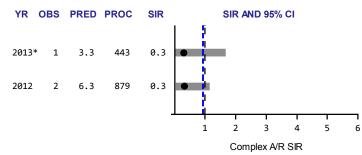
SSI - Colon Surgery

PROC = number of procedures performed (SSI);

PATD = number of patient days (LabID); N/A = number of infe



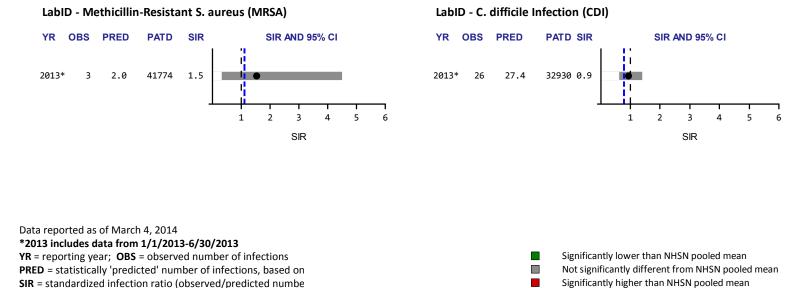
SSI - Abdominal Hysterectomy



2012 TN mean

– – – – NHSN mean

Healthcare-Onset Laboratory-Identified (LabID) Events



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Methodist Healthcare Germantown, Memphis, Shelby County

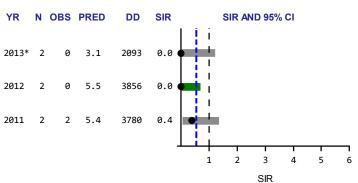
Medical School Affiliation: Graduate teaching Bed Size Category: 100-399 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

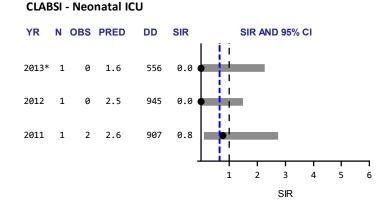
		Infections			Standardized Infe		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	3.1	2,093	0.00	(0.00, 1.21)	0.47
	Neonatal ICU	0	1.6	556	0.00	(0.00, 2.26)	0.66
CAUTI	Adult/Pediatric ICU	4	3.2	2,507	1.25	(0.34, 3.20)	1.40

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

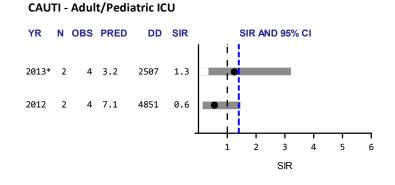
Central Line-Associated Bloodstream Infections (CLABSI)



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

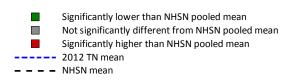


Catheter-Associated Urinary Tract Infections (CAUTI)



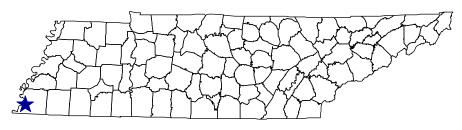
Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013

YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Methodist Healthcare LeBonheur, Memphis, Shelby County

Medical School Affiliation: Major teaching Bed Size Category: 100-399 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

			tions		Standardized Infe		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.5	14	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	0	N/A	N/A	0.92
LabID	MRSA	1	2.4	35,643	0.42	(0.01, 2.35)	1.12
	CDI	9	21.8	27,687	0.41	(0.19, 0.79)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.5 14 N/A 0 0.0 0 N/A 2012 0 0.9 29 N/A 2012 0 0.0 0 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

---- 2012 TN mean

– – – – NHSN mean

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) PRED PATD SIR SIR AND 95% CI YR OBS PRED PATD SIR SIR AND 95% CI YR OBS 2013* 1 2.4 35643 0.4 2013* 9 21.8 27687 0.4 2 2 1 3 4 5 6 3 4 5 6 SIR SIR Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 **YR** = reporting year; **OBS** = observed number of infections Significantly lower than NHSN pooled mean Not significantly different from NHSN pooled mean PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe Significantly higher than NHSN pooled mean

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PROC = number of procedures performed (SSI);

PATD = number of patient days (LabID); N/A = number of infe

Methodist Healthcare LeBonheur, Memphis, Shelby County

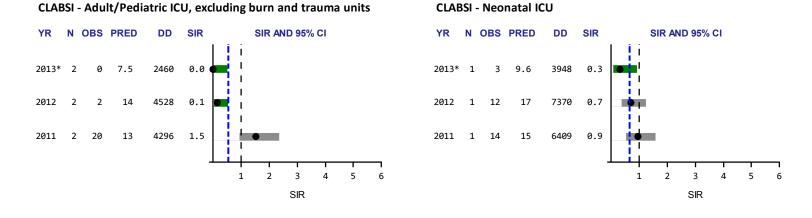
Medical School Affiliation: Major teaching Bed Size Category: 100-399 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

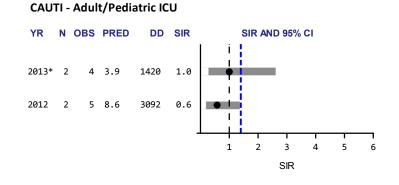
		Infections			Standardized Infe		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	7.5	2,460	0.00	(0.00, 0.49)	0.47
	Neonatal ICU	3	9.6	3,948	0.31	(0.06, 0.91)	0.66
CAUTI	Adult/Pediatric ICU	4	3.9	1,420	1.02	(0.28, 2.61)	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

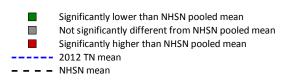


Catheter-Associated Urinary Tract Infections (CAUTI)



Data reported as of March 4, 2014 ***2013 includes data from 1/1/2013-6/30/2013** YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on CLD = statistically 'predicted' number of infections, based on

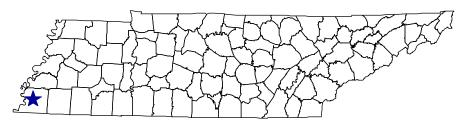
SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



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Methodist Healthcare North, Memphis, Shelby County

Medical School Affiliation: Undergraduate teaching Bed Size Category: 100-399 beds



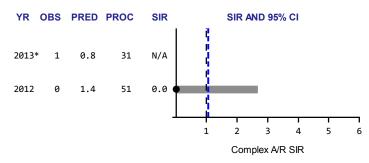
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	1	0.8	31	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	1	N/A	N/A	0.92
LabID	MRSA	4	2.1	31,995	1.95	(0.53, 4.99)	1.12
	CDI	25	22.4	31,995	1.11	(0.72, 1.64)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery



SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	0	0.0	1	N/A	
2012	0	0.0	0	N/A	

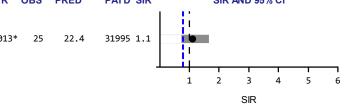
N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) PRED PATD SIR SIR AND 95% CI OBS PRED PATD SIR SIR AND 95% CI YR OBS YR 2013* Δ 2.1 31995 1.9 2013* 25 22.4 31995 1.1 2 2 1 3 4 5 6 1 SIR

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 **YR** = reporting year; **OBS** = observed number of infections **PRED** = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe **PROC** = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe

LabID - C. difficile Infection (CDI)



Significantly lower than NHSN pooled mean Not significantly different from NHSN pooled mean Significantly higher than NHSN pooled mean 2012 TN mean – – – – NHSN mean

Methodist Healthcare North, Memphis, Shelby County

Medical School Affiliation: Undergraduate teaching Bed Size Category: 100-399 beds

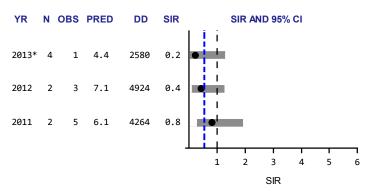
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	4.4	2,580	0.23	(0.01, 1.26)	0.47
CAUTI	Adult/Pediatric ICU	10	6.3	3,646	1.60	(0.77, 2.94)	1.40

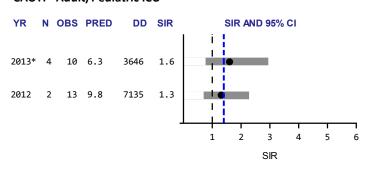
Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009) Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009)

Central Line-Associated Bloodstream Infections (CLABSI)

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

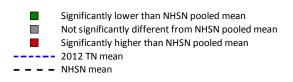


Catheter-Associated Urinary Tract Infections (CAUTI)



Data reported as of March 4, 2014

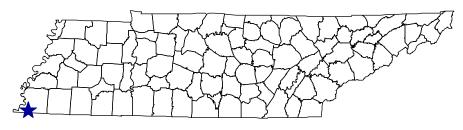
*2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



CAUTI - Adult/Pediatric ICU

Methodist Healthcare South, Memphis, Shelby County

Medical School Affiliation: Graduate teaching Bed Size Category: 100-399 beds



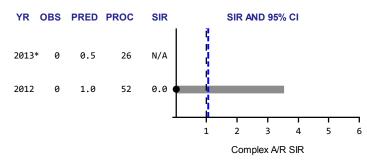
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.5	26	N/A	N/A	1.06
	Abdominal hysterectomy	1	0.4	47	N/A	N/A	0.92
LabID	MRSA	0	0.6	15,462	N/A	N/A	1.12
	CDI	5	10.9	14,143	0.46	(0.15, 1.07)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery

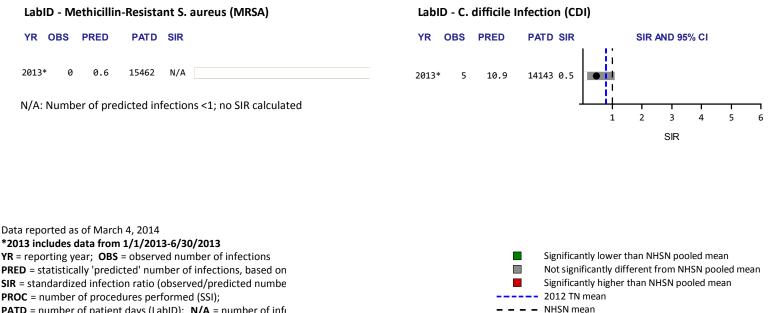


SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	1	0.4	47	N/A	
2012	0	0.7	95	N/A	

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events



PATD = number of patient days (LabID); N/A = number of infe

Methodist Healthcare South, Memphis, Shelby County

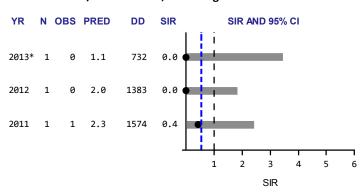
Medical School Affiliation: Graduate teaching Bed Size Category: 100-399 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	1.1	732	0.00	(0.00, 3.43)	0.47
	Neonatal ICU	0	0.0	4	N/A	N/A	0.66
CAUTI	Adult/Pediatric ICU	6	1.6	1,275	3.79	(1.39, 8.25)	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)



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

CLABSI	-	Neor	natai	ICU	

.

YR	Ν	OBS	PRED	DD	SIR
2013*	1	0	0.0	4	N/A
2012	1	0	0.0	4	N/A
2011	1	0	0.0	22	N/A

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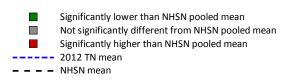
N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU N OBS PRED DD SIR SIR AND 95% CI YR İ T 6 1.6 1275 3.8 2013* 1 ÷ Т 2.2 2012 1 7 3.2 2570 ŧ١. L 1 2 3 4 5 6 SIR

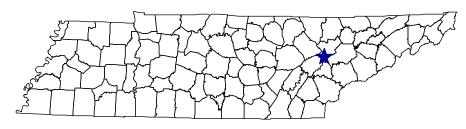
Data reported as of March 4, 2014

*2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Methodist Medical Center of Oak Ridge, Oak Ridge, Anderson County

Medical School Affiliation: None Bed Size Category: 100-399 beds



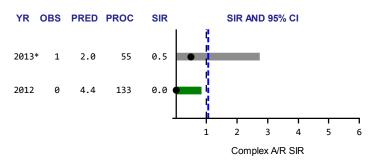
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	1	2.0	55	0.49	(0.01, 2.74)	1.06
	Abdominal hysterectomy	1	0.3	38	N/A	N/A	0.92
LabID	MRSA	1	1.8	26,365	0.56	(0.01, 3.09)	1.12
	CDI	27	20.7	25,739	1.30	(0.86, 1.90)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery



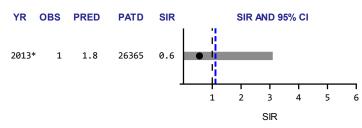
SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	1	0.3	38	N/A	
2012	0	0.8	86	N/A	

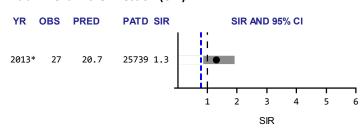
N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA)



LabID - C. difficile Infection (CDI)



Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI);

PATD = number of patient days (LabID); N/A = number of infe

Significantly lower than NHSN pooled mean
 Not significantly different from NHSN pooled mean
 Significantly higher than NHSN pooled mean
 2012 TN mean
 NHSN mean

Methodist Medical Center of Oak Ridge, Oak Ridge, Anderson County

Medical School Affiliation: None Bed Size Category: 100-399 beds

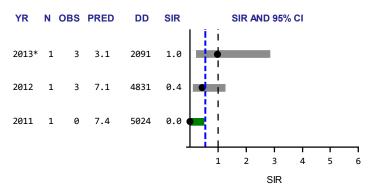
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	3	3.1	2,091	0.98	(0.20, 2.86)	0.47
CAUTI	Adult/Pediatric ICU	5	4.0	3,186	1.26	(0.41, 2.95)	1.40

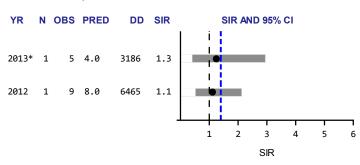
Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009) Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009)

Central Line-Associated Bloodstream Infections (CLABSI)

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

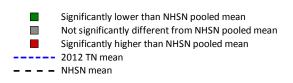


Catheter-Associated Urinary Tract Infections (CAUTI)



Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013

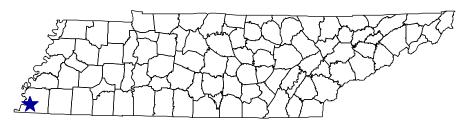
YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



CAUTI - Adult/Pediatric ICU

Methodist University Hospital, Memphis, Shelby County

Medical School Affiliation: Major teaching Bed Size Category: 400+ beds



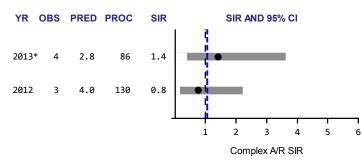
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	4	2.8	86	1.42	(0.39, 3.62)	1.06
	Abdominal hysterectomy	0	1.2	146	0.00	(0.00, 2.98)	0.92
LabID	MRSA	8	9.6	57,885	0.83	(0.36, 1.64)	1.12
	CDI	51	53.2	57,885	0.96	(0.71, 1.26)	0.77

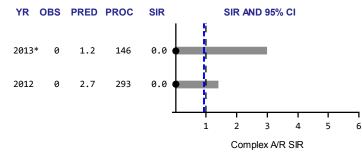
Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery



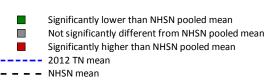
SSI - Abdominal Hysterectomy



Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) OBS PRED PATD SIR SIR AND 95% CI OBS PRED PATD SIR SIR AND 95% CI YR YR 2013* 8 9.6 57885 0.8 2013* 51 53.2 57885 1.0 2 5 2 3 5 1 3 4 6 1 4 6 SIR SIR Data reported as of March 4, 2014

*2013 includes data from 1/1/2013-6/30/2013
 YR = reporting year; OBS = observed number of infections
 PRED = statistically 'predicted' number of infections, based on
 SIR = standardized infection ratio (observed/predicted numbe
 PROC = number of procedures performed (SSI);
 PATD = number of patient days (LabID); N/A = number of infection



Methodist University Hospital, Memphis, Shelby County

Medical School Affiliation: Major teaching Bed Size Category: 400+ beds

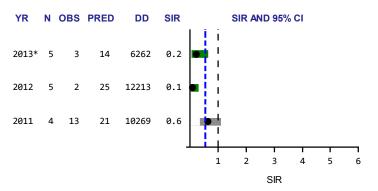
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections		Standardized Infection Ratio (SIR)			
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	3	14.0	6,262	0.21	(0.04, 0.63)	0.47
CAUTI	Adult/Pediatric ICU	36	21.1	7,368	1.71	(1.20, 2.36)	1.40

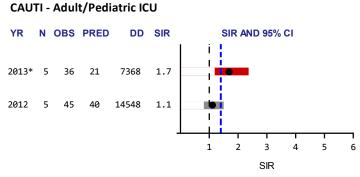
Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009) Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009)

Central Line-Associated Bloodstream Infections (CLABSI)

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

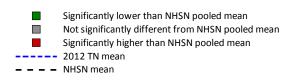


Catheter-Associated Urinary Tract Infections (CAUTI)



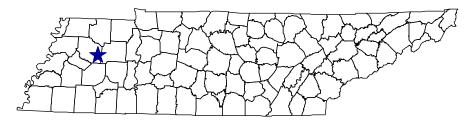
Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013

YR = reporting year; **N** = number of units reporting (CLABSI/C **PRED** = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Milan General Hospital, Milan, Gibson County

Medical School Affiliation: None Bed Size Category: 50-99 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR* 95% CI		TN SIR
SSI	Colon surgery	0	0.2	7	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	1	N/A	N/A	0.92
LabID	MRSA	0	0.0	735	N/A	N/A	1.12
	CDI	0	0.4	735	N/A	N/A	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery	SSI - Abdominal Hysterectomy
YR OBS PRED PROC SIR	YR OBS PRED PROC SIR
2013* 0 0.2 7 N/A	2013* 0 0.0 1 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA)	LabID - C. difficile Infection (CDI)
YR OBS PRED PATD SIR	YR OBS PRED PATD SIR
2013* 0 0.0 735 N/A	2013* 0 0.4 735 N/A
N/A: Number of predicted infections <1; no SIR calculated	N/A: Number of predicted infections <1; no SIR calculated

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe

Significantly lower than NHSN pooled mean
 Not significantly different from NHSN pooled mean
 Significantly higher than NHSN pooled mean
 2012 TN mean
 NHSN mean

Milan General Hospital, Milan, Gibson County

Medical School Affiliation: None Bed Size Category: 50-99 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.0	12	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	0.1	56	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

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

YR	Ν	OBS	PRED	DD	SIR	
2013*	1	0	0.0	12	N/A	
2012	1	0	0.1	60	N/A	

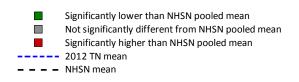
N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAU	TI -	Adul	t/Pedi	atric IC	U
YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.1	56	N/A
2012	1	0	0.2	135	N/A

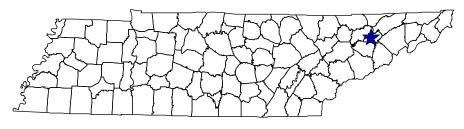
N/A: Number of predicted infections <1; no SIR calculated

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Morristown-Hamblen Healthcare System, Morristown, Hamblen County

Medical School Affiliation: Undergraduate teaching Bed Size Category: 100-399 beds



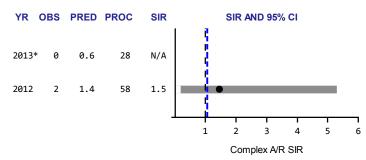
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR* 95% CI		TN SIR
SSI	Colon surgery	0	0.6	28	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.3	39	N/A	N/A	0.92
LabID	MRSA	0	1.3	15,519	0.00	(0.00, 2.94)	1.12
	CDI	5	7.3	14,558	0.69	(0.22, 1.60)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery



SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	0	0.3	39	N/A	
2012	0	0.9	121	N/A	

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) PRED PATD SIR SIR AND 95% CI OBS PRED PATD SIR SIR AND 95% CI YR OBS YR 2013* 0 1.3 15519 0.0 2013* 5 7.3 14558 0.7 2 2 1 3 4 5 6 1 SIR SIR

Data reported as of March 4, 2014

*2013 includes data from 1/1/2013-6/30/2013 **YR** = reporting year; **OBS** = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe **PROC** = number of procedures performed (SSI);

PATD = number of patient days (LabID); N/A = number of infe

Significantly lower than NHSN pooled mean Not significantly different from NHSN pooled mean Significantly higher than NHSN pooled mean 2012 TN mean – – – – NHSN mean

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Morri

Morristown-Hamblen Healthcare System, Morristown, Hamblen County

Medical School Affiliation: Undergraduate teaching Bed Size Category: 100-399 beds

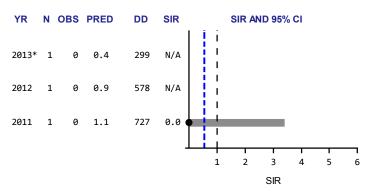
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infe	Standardized Infection Ratio (SIR)	
HAI	Type/Unit	Observed Predicted		Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.4	299	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	1.5	1,160	0.00	(0.00, 2.47)	1.40

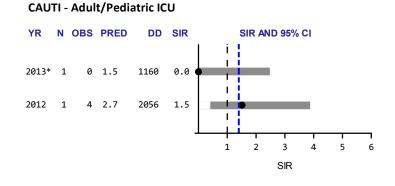
Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009) Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009)

Central Line-Associated Bloodstream Infections (CLABSI)

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

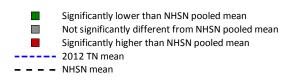


Catheter-Associated Urinary Tract Infections (CAUTI)



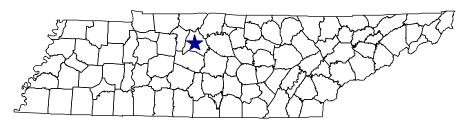
Data reported as of March 4, 2014 ***2013 includes data from 1/1/2013-6/30/2013 YR** = reporting year; **N** = number of units reporting (CLABSI/C **PRED** = statistically 'predicted' number of infections based on

PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Nashville General Hospital at Meharry, Nashville, Davidson County

Medical School Affiliation: Major teaching Bed Size Category: 100-399 beds



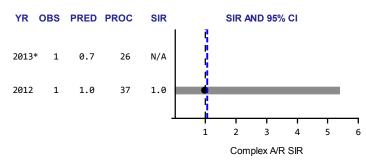
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR* 95% CI		TN SIR
SSI	Colon surgery	1	0.7	26	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.3	25	N/A	N/A	0.92
LabID	MRSA	0	0.8	9,225	N/A	N/A	1.12
	CDI	1	5.1	8,531	0.20	(0.00, 1.09)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery

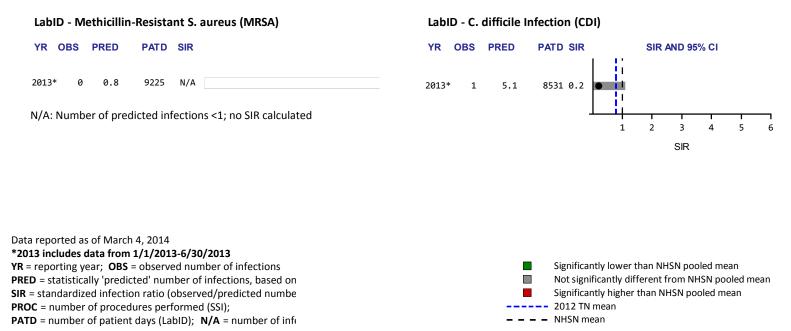


SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	0	0.3	25	N/A	
2012	4	0.6	50	N/A	

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events



Nasl

Nashville General Hospital at Meharry, Nashville, Davidson County

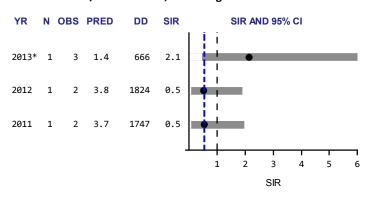
Medical School Affiliation: Major teaching Bed Size Category: 100-399 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	3	1.4	666	2.14	(0.44, 6.25)	0.47
	Neonatal ICU	0	0.0	5	N/A	N/A	0.66
CAUTI	Adult/Pediatric ICU	0	1.8	803	0.00	(0.00, 2.01)	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)



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

CLA	BSI	- Neonatal IC	U
YR	N	OBS PRED	DD

2013*	1	0	0.0	5	N/A
2012	1	0	0.1	88	N/A
2011	1	0	0.1	54	N/A

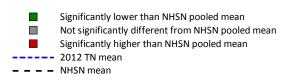
N/A: Number of predicted infections <1; no SIR calculated

SIR

Catheter-Associated Urinary Tract Infections (CAUTI)

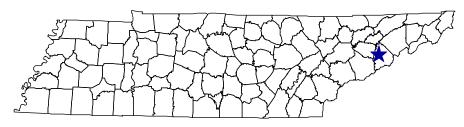
CAUTI - Adult/Pediatric ICU N OBS PRED DD SIR SIR AND 95% CI YR 0 1.8 803 0.0 2013* 1 2012 1 2 4.7 2060 0.4 I 2 1 3 4 5 6 SIR

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Newport Medical Center, Newport, Cocke County

Medical School Affiliation: None Bed Size Category: <50 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

	Infections Standardized Infection Ratio (SIR)		ection Ratio (SIR)				
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.0	1	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	0	N/A	N/A	0.92
LabID	MRSA	0	0.3	3,927	N/A	N/A	1.12
	CDI	1	2.2	3,730	0.46	(0.01, 2.57)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.0 1 N/A 0 0.0 0 N/A 2012 0 0.1 7 N/A 2012 0 0.0 0 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) YR OBS PRED PATD SIR YR OBS PRED PATD SIR SIR AND 95% CI 2013* 0 0.3 3927 N/A 2013* 1 2.2 3730 0.5 N/A: Number of predicted infections <1; no SIR calculated 2 3 4 5 6 SIR Data reported as of March 4, 2014

*2013 includes data from 1/1/2013-6/30/2013
 YR = reporting year; OBS = observed number of infections
 PRED = statistically 'predicted' number of infections, based on
 SIR = standardized infection ratio (observed/predicted numbe
 PROC = number of procedures performed (SSI);
 PATD = number of patient days (LabID); N/A = number of infection

Significantly lower than NHSN pooled mean
 Not significantly different from NHSN pooled mean
 Significantly higher than NHSN pooled mean
 2012 TN mean
 NHSN mean

Newport Medical Center, Newport, Cocke County

Medical School Affiliation: None Bed Size Category: <50 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	39	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	0.8	419	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

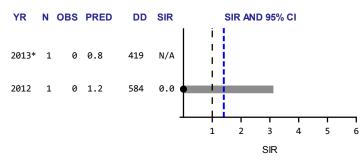
CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR	
2013*	1	0	0.1	39	N/A	
2012	1	1	0.1	54	N/A	

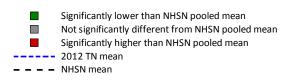
N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU



Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



North Knoxville Medical Center, Knoxville, Knox County

Medical School Affiliation: None Bed Size Category: 50-99 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	1	0.7	27	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	2	N/A	N/A	0.92
LabID	MRSA	1	0.4	8,674	N/A	N/A	1.12
	CDI	3	5.6	8,674	0.54	(0.11, 1.57)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 1 0.7 27 N/A 0 0.0 2 N/A 2012 0 0.8 32 N/A 2012 0 0.1 13 N/A

N/A: Number of predicted infections <1; no SIR calculated

SIR = standardized infection ratio (observed/predicted numbe

PROC = number of procedures performed (SSI);

N/A: Number of predicted infections <1; no SIR calculated

Significantly higher than NHSN pooled mean

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) YR OBS PRED PATD SIR YR OBS PRED PATD SIR SIR AND 95% CI 2013* 0.4 8674 N/A 1 8674 0.5 2013* 3 5.6 N/A: Number of predicted infections <1; no SIR calculated 2 3 4 5 6 SIR Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 **YR** = reporting year; **OBS** = observed number of infections Significantly lower than NHSN pooled mean Not significantly different from NHSN pooled mean PRED = statistically 'predicted' number of infections, based on

PATD = number of patient days (LabID); N/A = number of infe

---- 2012 TN mean

– – – – NHSN mean

North Knoxville Medical Center, Knoxville, Knox County

Medical School Affiliation: None Bed Size Category: 50-99 beds

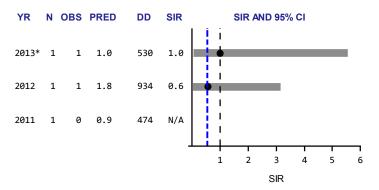
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	1.0	530	1.00	(0.03, 5.55)	0.47
CAUTI	Adult/Pediatric ICU	1	1.6	802	0.62	(0.02, 3.44)	1.40

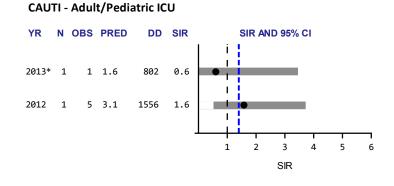
Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009) Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009)

Central Line-Associated Bloodstream Infections (CLABSI)

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

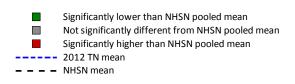


Catheter-Associated Urinary Tract Infections (CAUTI)



Data reported as of March 4, 2014

PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c



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NorthCrest Medical Center, Springfield, Robertson County

Medical School Affiliation: None Bed Size Category: 100-399 beds



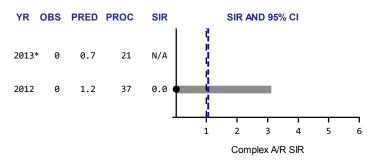
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.7	21	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	1	N/A	N/A	0.92
LabID	MRSA	0	0.8	6,765	N/A	N/A	1.12
	CDI	3	3.5	6,528	0.86	(0.18, 2.51)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery



PATD = number of patient days (LabID); N/A = number of infe

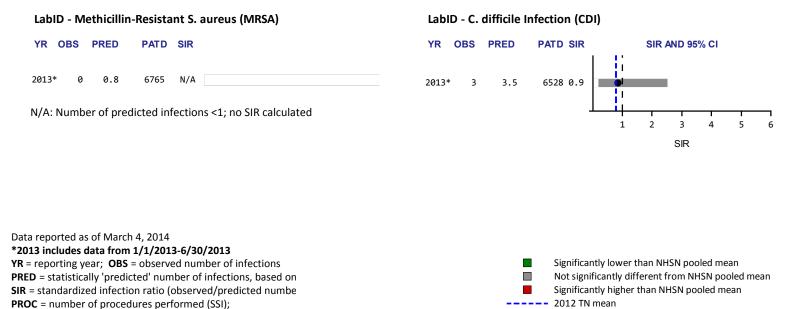
SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	0	0.0	1	N/A	
2012	0	0.1	5	N/A	

N/A: Number of predicted infections <1; no SIR calculated

– – – – NHSN mean

Healthcare-Onset Laboratory-Identified (LabID) Events



227 of 302

NorthCrest Medical Center, Springfield, Robertson County

Medical School Affiliation: None

Bed Size Category: 100-399 beds

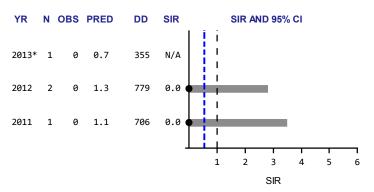
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.7	355	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	2	1.2	580	1.71	(0.21,6.17)	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

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

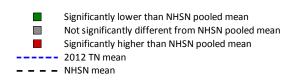


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU N OBS PRED DD SIR SIR AND 95% CI YR 2013* 2 1.2 580 1 1.7 н 2 1380 0.9 2012 2 2.2 I 2 1 3 4 5 6 SIR

Data reported as of March 4, 2014

*2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Parkridge East Hospital, Chattanooga, Hamilton County

Medical School Affiliation: None Bed Size Category: 100-399 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

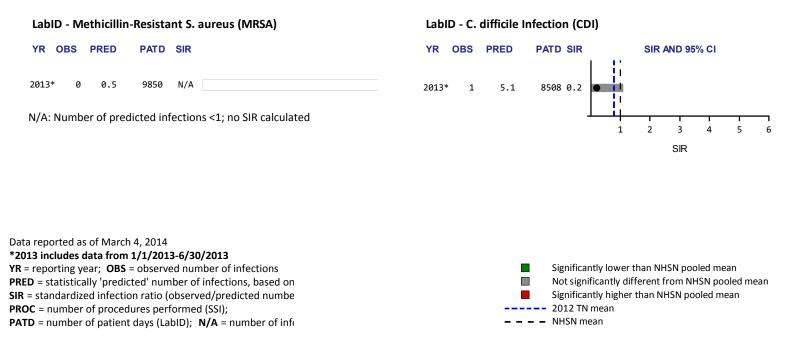
		Infec	tions		Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.0	2	N/A	N/A	1.06
	Abdominal hysterectomy	1	1.3	161	0.79	(0.02, 4.39)	0.92
LabID	MRSA	0	0.5	9,850	N/A	N/A	1.12
	CDI	1	5.1	8,508	0.20	(0.00, 1.09)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)



Healthcare-Onset Laboratory-Identified (LabID) Events



Parkridge East Hospital, Chattanooga, Hamilton County

Medical School Affiliation: None Bed Size Category: 100-399 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infe		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.4	236	N/A	N/A	0.47
	Neonatal ICU	0	0.3	127	N/A	N/A	0.66
CAUTI	Adult/Pediatric ICU	2	0.7	577	N/A	N/A	1.40

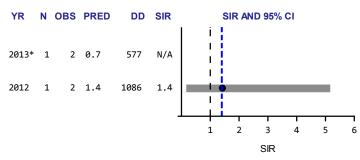
Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009) Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009)

Central Line-Associated Bloodstream Infections (CLABSI)

CLABSI - Adult/Pediatric ICU, excluding burn and trauma units **CLABSI - Neonatal ICU** N OBS PRED N OBS PRED SIR SIR AND 95% CI DD SIR DD YR YR 0.4 2013* 1 236 N/A 0 2013* 1 0 0.3 127 N/A 2012 1 0.5 358 N/A 1 2012 1 2 0.5 194 N/A 2011 1 0 0.5 312 N/A 2011 1 1 1.3 422 0.8 N/A: Number of predicted infections <1; no SIR calculated 2 3 4 5 1 6 SIR

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU



Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c

N/A = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN pooled mean Not significantly different from NHSN pooled mean Significantly higher than NHSN pooled mean 2012 TN mean NHSN mean

Parkridge Medical Center, Chattanooga, Hamilton County

Medical School Affiliation: None Bed Size Category: 100-399 beds



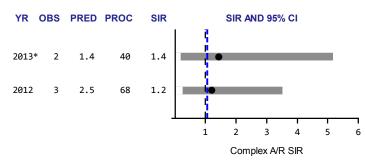
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR* 95% CI		TN SIR
SSI	Colon surgery	2	1.4	40	1.43	(0.17, 5.16)	1.06
	Abdominal hysterectomy	0	0.1	11	N/A	N/A	0.92
LabID	MRSA	2	2.6	20,739	0.76	(0.09, 2.76)	1.12
	CDI	6	14.5	20,739	0.41	(0.15, 0.90)	0.77

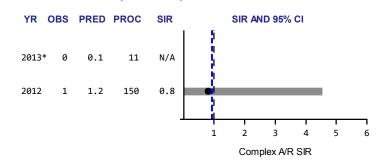
Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery



SSI - Abdominal Hysterectomy



Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) OBS PRED PATD SIR SIR AND 95% CI OBS PRED PATD SIR SIR AND 95% CI YR YR 2013* 2 2.6 20739 0.8 2013* 6 14.5 20739 0.4 2 2 5 1 3 4 5 6 1 3 4 6 SIR SIR Data reported as of March 4, 2014

*2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI);

PATD = number of patient days (LabID); N/A = number of infe

Not significantly different from NHSN pooled mean Significantly higher than NHSN pooled mean 2012 TN mean NHSN mean

Significantly lower than NHSN pooled mean

Parkridge Medical Center, Chattanooga, Hamilton County

Medical School Affiliation: None Bed Size Category: 100-399 beds

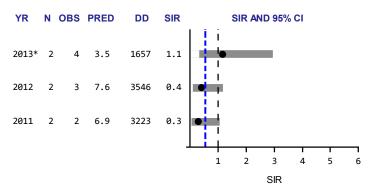
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	4	3.5	1,657	1.15	(0.31, 2.93)	0.47
CAUTI	Adult/Pediatric ICU	4	5.2	2,236	0.77	(0.21, 1.98)	1.40

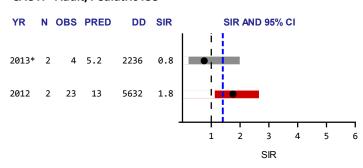
Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009) Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009)

Central Line-Associated Bloodstream Infections (CLABSI)

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

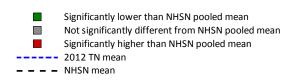


Catheter-Associated Urinary Tract Infections (CAUTI)



Data reported as of March 4, 2014

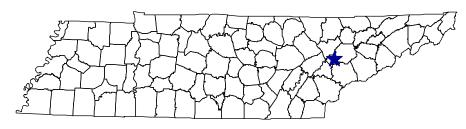
*2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



CAUTI - Adult/Pediatric ICU

Parkwest Medical Center- Knoxville, Knoxville, Knox County

Medical School Affiliation: None Bed Size Category: 100-399 beds



SSI - Abdominal Hysterectomy

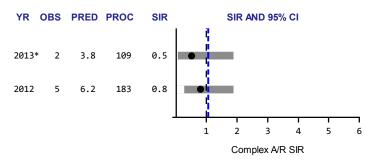
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	2	3.8	109	0.52	(0.06, 1.88)	1.06
	Abdominal hysterectomy	0	1.4	160	0.00	(0.00, 2.69)	0.92
LabID	MRSA	2	2.4	42,806	0.82	(0.10, 2.95)	1.12
	CDI	15	30.7	41,213	0.49	(0.27, 0.81)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery



OBS PRED PROC SIR SIR AND 95% CI YR 2013* 0 1.4 160 0.0 2012 3 3.4 399 0.9 2 3 4 5 1 6 Complex A/R SIR

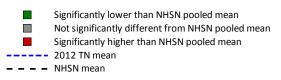
Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) OBS PRED PATD SIR SIR AND 95% CI OBS PRED PATD SIR SIR AND 95% CI YR YR 2013* 2 2.4 42806 0.8 2013* 15 30.7 41213 0.5 2 2 3 5 1 3 4 5 6 1 4 6 SIR SIR

Data reported as of March 4, 2014

*2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI);

PATD = number of patient days (LabID); N/A = number of infe







Parkwest Medical Center- Knoxville, Knoxville, Knox County

Medical School Affiliation: None Bed Size Category: 100-399 beds

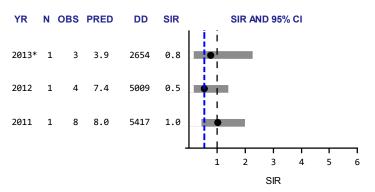
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	3	3.9	2,654	0.77	(0.16, 2.25)	0.47
CAUTI	Adult/Pediatric ICU	7	4.4	3,577	1.58	(0.63, 3.25)	1.40

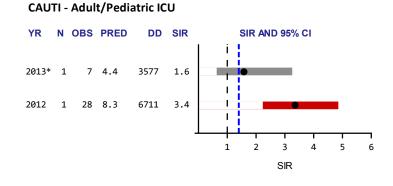
Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009) Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009)

Central Line-Associated Bloodstream Infections (CLABSI)

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

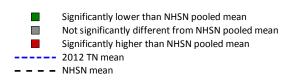


Catheter-Associated Urinary Tract Infections (CAUTI)



Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013

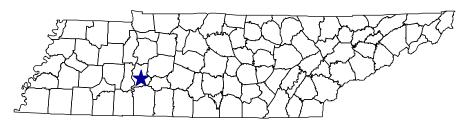
YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Pai

Perry Community Hospital, Linden, Perry County

Medical School Affiliation: None Bed Size Category: <50 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
LabID	MRSA	0	0.1	2,715	N/A	N/A	1.12
	CDI	1	1.2	2,715	0.84	(0.02, 4.71)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

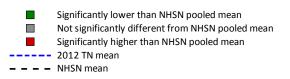
This facility did not perform enough eligible procedures to be subject to Tennessee SSI reporting requirements in 2012-2013

Healthcare-Onset Laboratory-Identified (LabID) Events



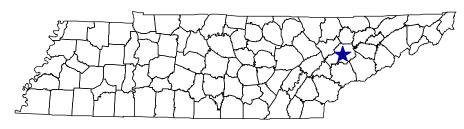
No units in this facility were subject to Tennessee CLABSI/CAUTI reporting requirements in 2012-2013

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe



Physician's Regional Medical Center, Knoxville, Knox County

Medical School Affiliation: None Bed Size Category: 400+ beds



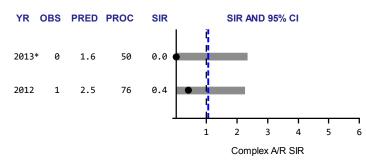
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR* 95% CI		TN SIR
SSI	Colon surgery	0	1.6	50	0.00	(0.00, 2.33)	1.06
	Abdominal hysterectomy	0	0.1	17	N/A	N/A	0.92
LabID	MRSA	8	4.2	44,003	1.91	(0.83, 3.77)	1.12
	CDI	17	29.6	41,929	0.58	(0.33, 0.92)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery



SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	0	0.1	17	N/A	
2012	0	0.6	57	N/A	

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) PRED PATD SIR SIR AND 95% CI OBS PRED PATD SIR SIR AND 95% CI YR OBS YR 2013* 8 4.2 44003 1.9 2013* 17 29.6 41929 0.6 2 2 3 5 1 3 4 5 6 1 4 SIR SIR

Data reported as of March 4, 2014

*2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe

PROC = number of procedures performed (SSI);

PATD = number of patient days (LabID); **N/A** = number of infe

Significantly lower than NHSN pooled mean
 Not significantly different from NHSN pooled mean
 Significantly higher than NHSN pooled mean
 2012 TN mean
 NHSN mean

6

Physician's Regional Medical Center, Knoxville, Knox County

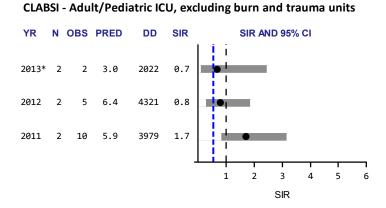
Medical School Affiliation: None Bed Size Category: 400+ beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infe		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	2	3.0	2,022	0.67	(0.08, 2.42)	0.47
	Neonatal ICU	0	0.0	17	N/A	N/A	0.66
CAUTI	Adult/Pediatric ICU	9	3.9	3,079	2.33	(1.07, 4.42)	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)



CLABSI - Neonatal ICU

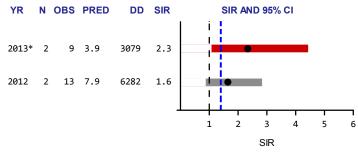
YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.0	17	N/A
2012	1	0	0.1	91	N/A
2011	1	0	0.2	117	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

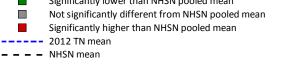
237 of 302

CAUTI - Adult/Pediatric ICU



Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 **YR** = reporting year; **N** = number of units reporting (CLABSI/C **PRED** = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN pooled mean Significantly higher than NHSN pooled mean ---- 2012 TN mean



Regional Hospital of Jackson, Jackson, Madison County

Medical School Affiliation: None Bed Size Category: 100-399 beds



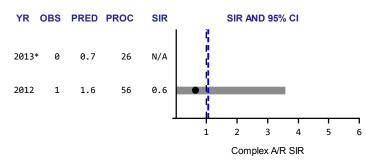
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR* 95% CI		TN SIR
SSI	Colon surgery	0	0.7	26	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.1	6	N/A	N/A	0.92
LabID	MRSA	1	0.5	13,272	N/A	N/A	1.12
	CDI	5	8.2	12,939	0.61	(0.20, 1.42)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery

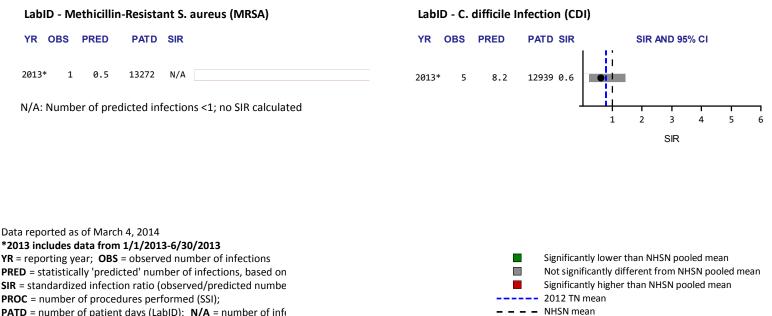


SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	0	0.1	6	N/A	
2012	1	0.2	18	N/A	

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events



PATD = number of patient days (LabID); N/A = number of infe

Regional Hospital of Jackson, Jackson, Madison County

Medical School Affiliation: None Bed Size Category: 100-399 beds

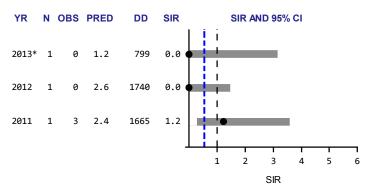
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	1.2	799	0.00	(0.00, 3.14)	0.47
CAUTI	Adult/Pediatric ICU	0	1.6	1,287	0.00	(0.00, 2.31)	1.40

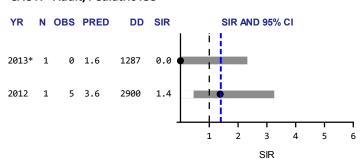
Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009) Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009)

Central Line-Associated Bloodstream Infections (CLABSI)

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

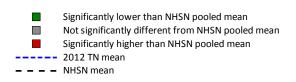


Catheter-Associated Urinary Tract Infections (CAUTI)



Data reported as of March 4, 2014 ***2013 includes data from 1/1/2013-6/30/2013 YR** = reporting year; **N** = number of units reporting (CLABSI/C

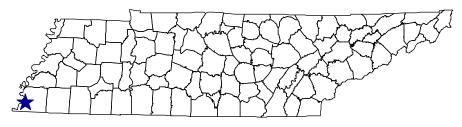
PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



CAUTI - Adult/Pediatric ICU

Regional One Health (Reg. Med.Ctr Memphis), Memphis, Shelby County

Medical School Affiliation: Major teaching Bed Size Category: 100-399 beds



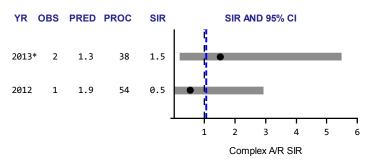
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infe		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	2	1.3	38	1.52	(0.18, 5.48)	1.06
	Abdominal hysterectomy	1	0.5	35	N/A	N/A	0.92
LabID	MRSA	13	2.5	45,863	5.20	(2.77, 8.90)	1.12
	CDI	20	29.4	35,078	0.68	(0.42, 1.05)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery



SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	1	0.5	35	N/A	
2012	0	1.0	59	N/A	

N/A: Number of predicted infections <1; no SIR calculated

– – – – NHSN mean

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) PRED PATD SIR SIR AND 95% CI OBS PRED PATD SIR SIR AND 95% CI YR OBS YR 1¹ 1 2013* 13 2.5 45863 5.2 2013* 20 29.4 35078 0.7 I. 1 2 2 3 5 3 4 5 6 1 4 6 SIR SIR Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 **YR** = reporting year; **OBS** = observed number of infections Significantly lower than NHSN pooled mean Not significantly different from NHSN pooled mean PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe Significantly higher than NHSN pooled mean **PROC** = number of procedures performed (SSI); 2012 TN mean

Regiona

PATD = number of patient days (LabID); N/A = number of infe

Regional One Health (Reg. Med.Ctr Memphis), Memphis, Shelby County

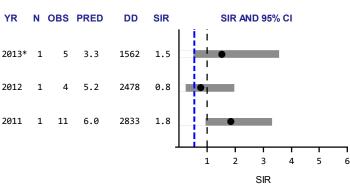
Medical School Affiliation: Major teaching Bed Size Category: 100-399 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

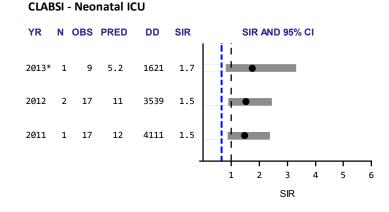
		Infections			Standardized Infe		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	5	3.3	1,562	1.52	(0.49, 3.54)	0.47
	Neonatal ICU	9	5.2	1,621	1.74	(0.79, 3.30)	0.66
CAUTI	Adult/Pediatric ICU	42	18.2	5,554	2.31	(1.66, 3.12)	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)



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



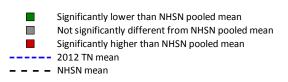
Catheter-Associated Urinary Tract Infections (CAUTI)

N OBS PRED DD SIR SIR AND 95% CI YR i I 3 42 18 5554 2.3 2013* 1 I 11739 t 2012 3 121 39 3.1 I 1 2 5 3 4 6 SIR

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on

CAUTI - Adult/Pediatric ICU

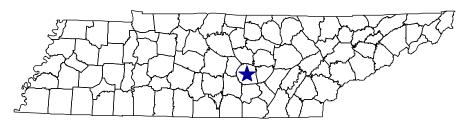
SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Regiona

River Park Hospital, Mc Minnville, Warren County

Medical School Affiliation: None Bed Size Category: 50-99 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.2	6	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	1	N/A	N/A	0.92
LabID	MRSA	0	0.5	6,106	N/A	N/A	1.12
	CDI	5	3.2	6,106	1.59	(0.51, 3.70)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0.2 0 6 N/A 0 0.0 1 N/A 2012 1 0.4 12 N/A 2012 1 0.0 5 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) YR OBS PRED PATD SIR YR OBS PRED PATD SIR SIR AND 95% CI 2013* 0 0.5 6106 N/A 2013* 5 3.2 6106 1.6 N/A: Number of predicted infections <1; no SIR calculated 2 1 3 4 5 6 SIR

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe

River Park Hospital, Mc Minnville, Warren County

Medical School Affiliation: None Bed Size Category: 50-99 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.2	114	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	1.1	543	0.00	(0.00, 3.36)	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

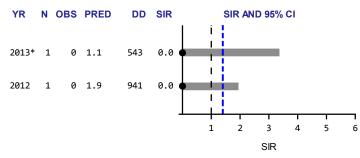
CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.2	114	N/A
2012	1	0	0.4	192	N/A
2011	1	0	0.4	232	N/A

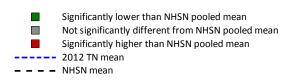
N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

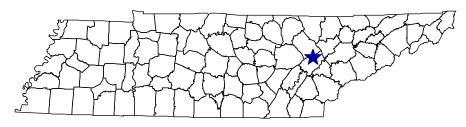


Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Roane Medical Center, Harriman, Roane County

Medical School Affiliation: None Bed Size Category: 50-99 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

Infections		tions		Standardized Infection Ratio (SIR)			
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.5	16	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	2	N/A	N/A	0.92
LabID	MRSA	0	0.5	4,376	N/A	N/A	1.12
	CDI	5	2.9	4,376	1.74	(0.56,4.05)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.5 16 N/A 0 0.0 2 N/A 2012 0 0.9 23 N/A 2012 0 0.0 1 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) YR OBS PRED PATD SIR YR OBS PRED PATD SIR SIR AND 95% CI 2013* 0 0.5 4376 N/A 2013* 5 2.9 4376 1.7 N/A: Number of predicted infections <1; no SIR calculated 2 3 1 4 5 6 SIR

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe

Significantly lower than NHSN pooled mean
 Not significantly different from NHSN pooled mean
 Significantly higher than NHSN pooled mean
 2012 TN mean
 NHSN mean

Roane Medical Center, Harriman, Roane County

Medical School Affiliation: None Bed Size Category: 50-99 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.3	205	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	1	0.4	338	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

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

YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.3	205	N/A
2012	1	1	0.4	240	N/A
2011	1	0	0.4	285	N/A

N/A: Number of predicted infections <1; no SIR calculated

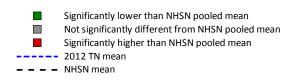
Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2013*	1	1	0.4	338	N/A
2012	1	0	0.6	480	N/A

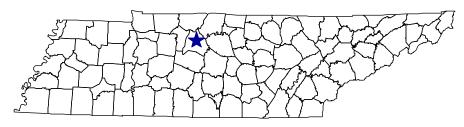
N/A: Number of predicted infections <1; no SIR calculated

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Skyline Medical Center, Nashville, Davidson County

Medical School Affiliation: None Bed Size Category: 100-399 beds



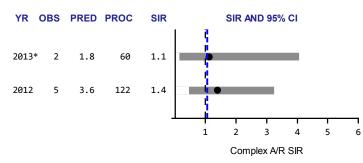
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infe		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	2	1.8	60	1.12	(0.14, 4.05)	1.06
	Abdominal hysterectomy	0	0.0	1	N/A	N/A	0.92
LabID	MRSA	3	1.4	27,884	2.19	(0.45, 6.39)	1.12
	CDI	27	14.6	27,884	1.86	(1.22, 2.70)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery



SSI - Abdominal Hysterectomy

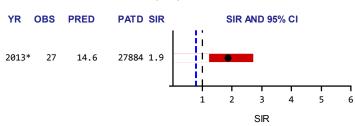
YR O	BS	PRED I	PROC	SIR	
2013*	0	0.0	1	N/A	
2012	0	0.0	5	N/A	

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) OBS PRED PATD SIR SIR AND 95% CI YR YR 2013* 2013* 3 1.4 27884 2.2 1 2 3 4 5 6 SIR

LabID - C. difficile Infection (CDI)



Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe

Significantly lower than NHSN pooled mean
 Not significantly different from NHSN pooled mean
 Significantly higher than NHSN pooled mean
 2012 TN mean
 NHSN mean

Skyline Medical Center, Nashville, Davidson County

Medical School Affiliation: None Bed Size Category: 100-399 beds

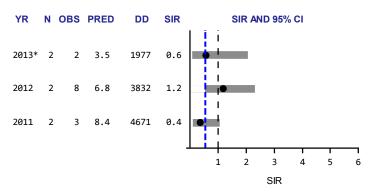
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	2	3.5	1,977	0.57	(0.07, 2.05)	0.47
CAUTI	Adult/Pediatric ICU	4	8.3	3,643	0.48	(0.13, 1.23)	1.40

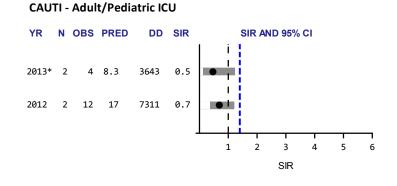
Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009) Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009)

Central Line-Associated Bloodstream Infections (CLABSI)

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

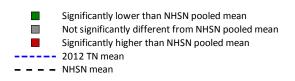


Catheter-Associated Urinary Tract Infections (CAUTI)



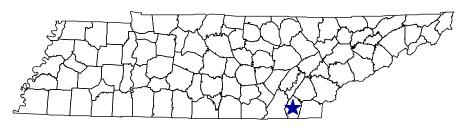
Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe

DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



SkyRidge Medical Center, Cleveland, Bradley County

Medical School Affiliation: None Bed Size Category: 100-399 beds



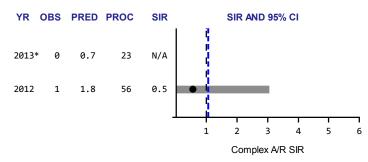
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.7	23	N/A N/A		1.06
	Abdominal hysterectomy	0	0.2	16	N/A	N/A	0.92
LabID	MRSA	1	1.0	19,818	N/A	N/A	1.12
	CDI	6	9.8	18,851	0.61	(0.22, 1.33)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery

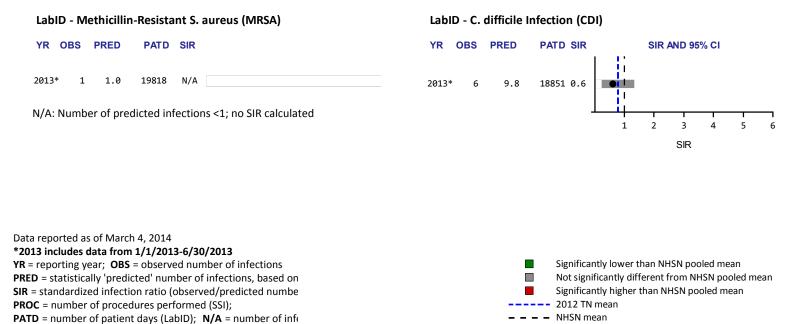


SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	0	0.2	16	N/A	
2012	0	0.2	17	N/A	

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events



SkyRidge Medical Center, Cleveland, Bradley County

Medical School Affiliation: None Bed Size Category: 100-399 beds

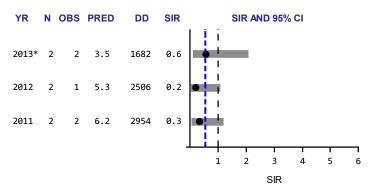
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	2	3.5	1,682	0.57	(0.07, 2.06)	0.47
CAUTI	Adult/Pediatric ICU	0	5.4	2,381	0.00	(0.00, 0.68)	1.40

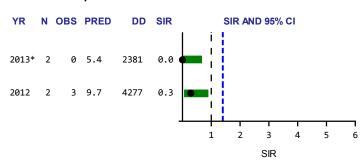
Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009) Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009)

Central Line-Associated Bloodstream Infections (CLABSI)

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

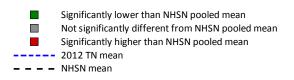


Catheter-Associated Urinary Tract Infections (CAUTI)



Data reported as of March 4, 2014 ***2013 includes data from 1/1/2013-6/30/2013** YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe

DD = device days: central line days (CLABSI)/urinary catheter c **N/A** = number of infections predicted <1; no SIR calculated



CAUTI - Adult/Pediatric ICU

Southern Hills Medical Center, Nashville, Davidson County

Medical School Affiliation: None Bed Size Category: 100-399 beds



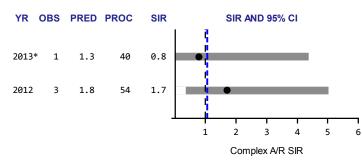
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

Infections			Standardized Infection Ratio (SIR)				
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	1	1.3	40	0.78	(0.02, 4.36)	1.06
	Abdominal hysterectomy	0	0.0	1	N/A	N/A	0.92
LabID	MRSA	1	0.5	11,724	N/A	N/A	1.12
	CDI	8	8.1	11,724	0.98	(0.42, 1.94)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery



PATD = number of patient days (LabID); N/A = number of infe

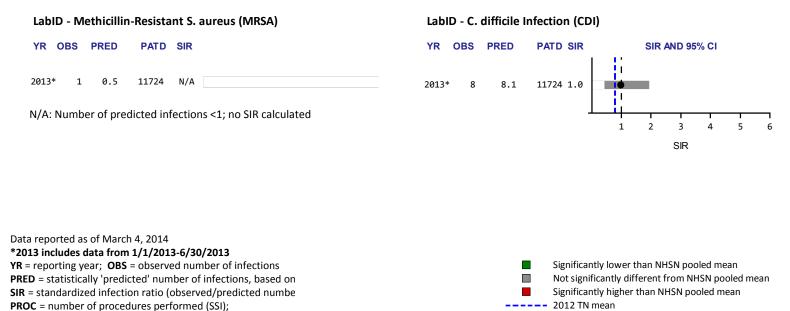
SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	0	0.0	1	N/A	
2012	0	0.0	4	N/A	

N/A: Number of predicted infections <1; no SIR calculated

– – – – NHSN mean

Healthcare-Onset Laboratory-Identified (LabID) Events



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Southern Hills Medical Center, Nashville, Davidson County

Medical School Affiliation: None Bed Size Category: 100-399 beds

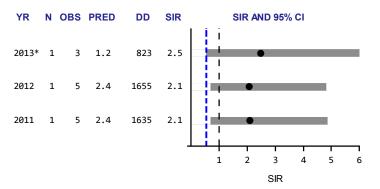
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

Infections			Standardized Infection Ratio (SIR)				
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	3	1.2	823	2.48	(0.51, 7.26)	0.47
CAUTI	Adult/Pediatric ICU	3	1.4	1,125	2.15	(0.44, 6.27)	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

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

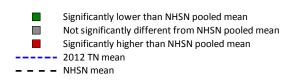


Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU N OBS PRED DD SIR SIR AND 95% CI YR 2013* 3 1.4 1125 2.1 1 T 2.9 2349 t 2012 1 9 3.1 I 2 1 3 4 5 6 SIR

Data reported as of March 4, 2014

*2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Southern Tennessee Medical Center, Winchester, Franklin County

Medical School Affiliation: None Bed Size Category: 100-399 beds



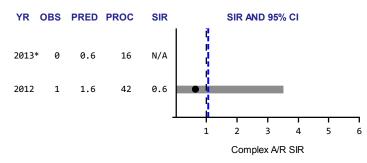
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days			TN SIR
SSI	Colon surgery	0	0.6	16	N/A N/A		1.06
	Abdominal hysterectomy	0	0.1	4	N/A	N/A	0.92
LabID	MRSA	0	0.5	11,474	N/A	N/A	1.12
	CDI	1	5.7	11,129	0.17	(0.00, 0.97)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery



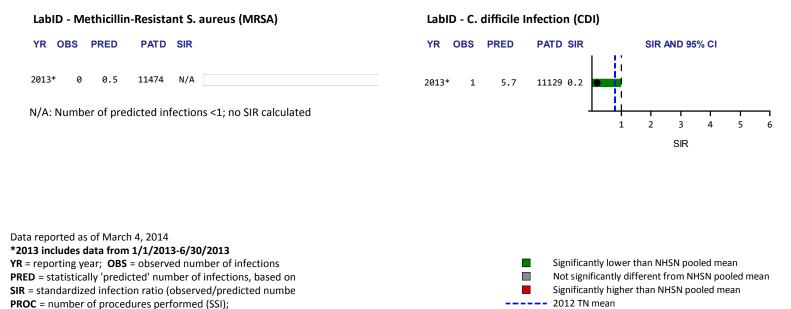
SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	0	0.1	4	N/A	
2012	1	0.2	14	N/A	

N/A: Number of predicted infections <1; no SIR calculated

– – – – NHSN mean

Healthcare-Onset Laboratory-Identified (LabID) Events



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PATD = number of patient days (LabID); N/A = number of infe

Southern Tennessee Medical Center, Winchester, Franklin County

Medical School Affiliation: None Bed Size Category: 100-399 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	0.2	145	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	1	0.5	423	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

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

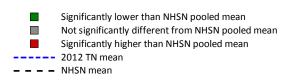
YR	N	OBS	PRED	DD	SIR
2013*	1	1	0.2	145	N/A
2012	1	1	0.7	453	N/A
2011	1	0	0.8	527	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

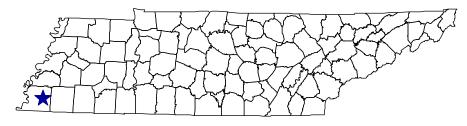
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CAUTI - Adult/Pediatric ICU N OBS PRED DD SIR SIR AND 95% CI YR i I 2013* 1 1 0.5 423 N/A н н t 2012 1 5 1.2 922 4.2 I 2 Δ 1 3 5 SIR



St. Francis Bartlett, Bartlett, Shelby County

Medical School Affiliation: None Bed Size Category: 100-399 beds



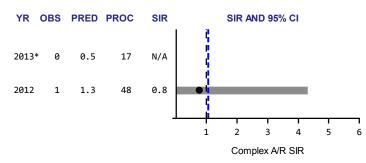
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infe	tandardized Infection Ratio (SIR)	
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.5	17	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.1	18	N/A	N/A	0.92
LabID	MRSA	0	0.7	17,892	N/A	N/A	1.12
	CDI	3	8.8	17,627	0.34	(0.07, 0.99)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery

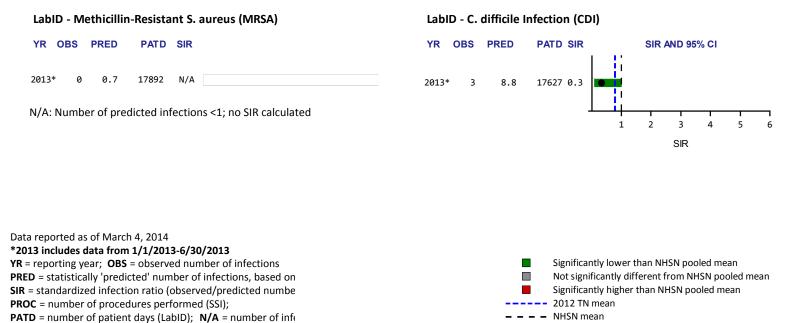


SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	0	0.1	18	N/A	
2012	0	0.5	69	N/A	

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events



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St. Francis Bartlett, Bartlett, Shelby County

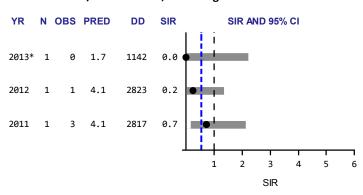
Medical School Affiliation: None Bed Size Category: 100-399 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infe		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	1.7	1,142	0.00	(0.00, 2.20)	0.47
	Neonatal ICU	0	0.0	14	N/A	N/A	0.66
CAUTI	Adult/Pediatric ICU	0	1.4	1,116	0.00	(0.00, 2.66)	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)



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

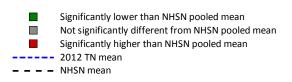
YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.0	14	N/A
2012	1	0	0.1	80	N/A
2011	1	0	0.2	144	N/A

CLABSI - Neonatal ICU

N/A: Number of predicted infections <1; no SIR calculated

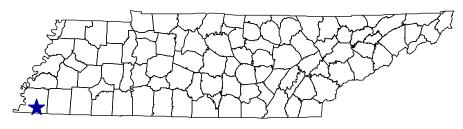
Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU N OBS PRED DD SIR SIR AND 95% CI YR 1.4 1116 0.0 2013* 1 0 I 2012 1 0 3.7 2997 0.0 2 З 4 1 5 6 SIR



St. Francis Hospital- Memphis, Memphis, Shelby County

Medical School Affiliation: Graduate teaching Bed Size Category: 100-399 beds



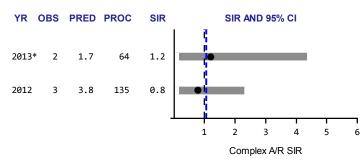
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infe	ndardized Infection Ratio (SIR)	
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	2	1.7	64	1.20	(0.15, 4.34)	1.06
	Abdominal hysterectomy	0	0.3	34	N/A	N/A	0.92
LabID	MRSA	6	2.3	47,302	2.56	(0.94, 5.57)	1.12
	CDI	14	28.0	46,074	0.50	(0.27, 0.84)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery



SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	0	0.3	34	N/A	
2012	0	0.6	70	N/A	

Not significantly different from NHSN pooled mean

Significantly higher than NHSN pooled mean

N/A: Number of predicted infections <1; no SIR calculated

2012 TN mean

– – – – NHSN mean

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) OBS PRED PATD SIR SIR AND 95% CI OBS PRED PATD SIR SIR AND 95% CI YR YR 2013* 2013* 6 2.3 47302 2.6 14 28.0 46074 0.5 1 2 2 3 5 3 4 5 6 1 4 6 SIR SIR Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 Significantly lower than NHSN pooled mean

*2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI);

PATD = number of patient days (LabID); N/A = number of infe

St. Francis Hospital- Memphis, Memphis, Shelby County

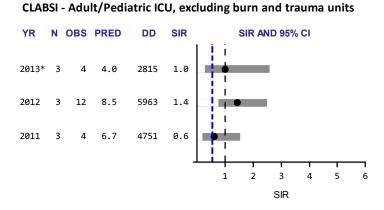
Medical School Affiliation: Graduate teaching Bed Size Category: 100-399 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infe		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	4	4.0	2,815	1.00	(0.27, 2.56)	0.47
	Neonatal ICU	0	0.2	89	N/A	N/A	0.66
CAUTI	Adult/Pediatric ICU	7	5.4	2,758	1.29	(0.52, 2.66)	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)



CLABSI - Neonatal ICU

YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.2	89	N/A
2012	1	0	0.4	272	N/A
2011	1	0	0.3	221	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU N OBS PRED DD SIR SIR AND 95% CI YR 5.4 2758 2013* 3 7 1.3 Т 2012 3 21 13 6540 1.6 I 2 5 1 3 4 6 SIR

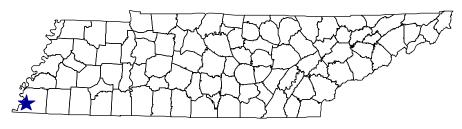
Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c

N/A = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN pooled mean Not significantly different from NHSN pooled mean Significantly higher than NHSN pooled mean 2012 TN mean NHSN mean

St. Jude Children's Research Hospital, Memphis, Shelby County

Medical School Affiliation: Major teaching Bed Size Category: 50-99 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infe		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.0	1	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	0	N/A	N/A	0.92
LabID	MRSA	0	0.5	7,867	N/A	N/A	1.12
	CDI	15	6.0	7,867	2.48	(1.39, 4.10)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.0 1 N/A 0 0.0 0 N/A 2012 0 0.0 0 N/A 2012 0 0.0 0 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) YR OBS PRED PATD SIR OBS PRED PATD SIR SIR AND 95% CI YR 2013* 0 0.5 7867 N/A 2013* 15 6.0 7867 2.5 N/A: Number of predicted infections <1; no SIR calculated 2 1 3 4 5 6 SIR

258 of 302

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe

Significantly lower than NHSN pooled mean
 Not significantly different from NHSN pooled mean
 Significantly higher than NHSN pooled mean
 2012 TN mean
 NHSN mean

St. Jude Children's Research Hospital, Memphis, Shelby County

Medical School Affiliation: Major teaching Bed Size Category: 50-99 beds

No units in this facility were subject to Tennessee CLABSI/CAUTI reporting requirements in 2013

Central Line-Associated Bloodstream Infections (CLABSI)



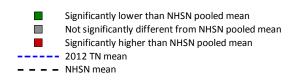
CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

Catheter-Associated Urinary Tract Infections (CAUTI)

YR	N O	BS	PRED	DD	SIR	
2012	1	3	0.8	949	N/A	

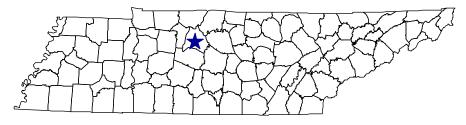
CAUTI - Adult/Pediatric ICU

N/A: Number of predicted infections <1; no SIR calculated



St. Thomas Midtown (Baptist Hospital- Nashville), Nashville, Davidson County

Medical School Affiliation: Graduate teaching Bed Size Category: 400+ beds



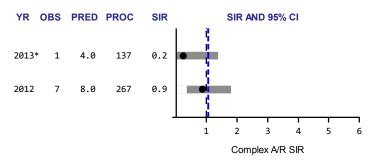
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	1	4.0	137	0.25	(0.01, 1.38)	1.06
	Abdominal hysterectomy	4	1.6	211	2.47	(0.67,6.31)	0.92
LabID	MRSA	2	3.6	60,048	0.56	(0.07, 2.01)	1.12
	CDI	15	38.1	48,566	0.39	(0.22, 0.65)	0.77

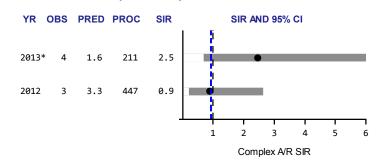
Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery



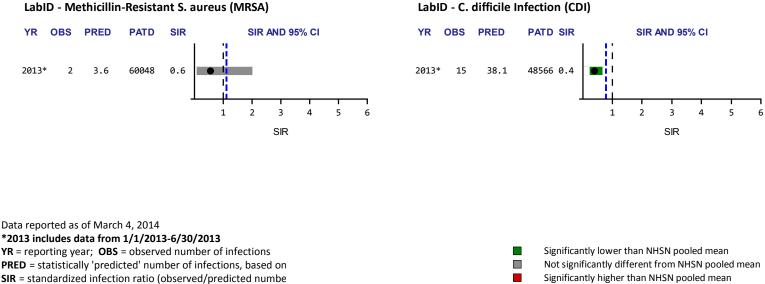
SSI - Abdominal Hysterectomy



2012 TN mean

– – – – NHSN mean

Healthcare-Onset Laboratory-Identified (LabID) Events



PROC = number of procedures performed (SSI);

PATD = number of patient days (LabID); N/A = number of infe

St. Thoma

St. Thomas Midtown (Baptist Hospital- Nashville), Nashville, Davidson County

Medical School Affiliation: Graduate teaching Bed Size Category: 400+ beds

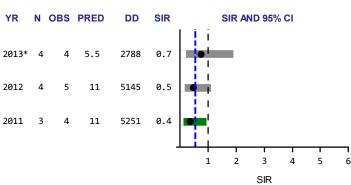
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infe		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	4	5.5	2,788	0.73	(0.20, 1.87)	0.47
	Neonatal ICU	0	1.2	452	0.00	(0.00, 3.14)	0.66
CAUTI	Adult/Pediatric ICU	15	8.2	3,796	1.83	(1.03, 3.02)	1.40

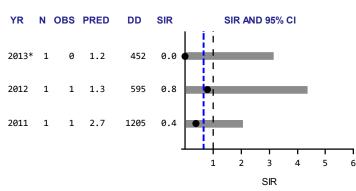
Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009) Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009)

Central Line-Associated Bloodstream Infections (CLABSI)

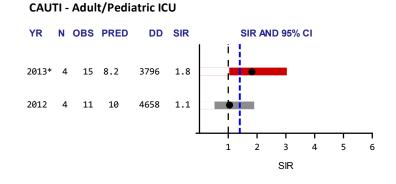
CLABSI - Neonatal ICU



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



Catheter-Associated Urinary Tract Infections (CAUTI)



Data reported as of March 4, 2014 ***2013 includes data from 1/1/2013-6/30/2013 YR** = reporting year; **N** = number of units reporting (CLABSI/C

PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated Significantly lower than NHSN pooled mean
 Not significantly different from NHSN pooled mean
 Significantly higher than NHSN pooled mean
 2012 TN mean
 NHSN mean

St. Thomas Rutherford Hospital (Middle TN Med. Ctr), Murfreesboro, Rutherford County

Medical School Affiliation: None Bed Size Category: 100-399 beds



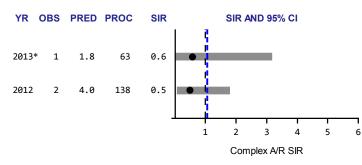
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	1	1.8	63	0.57	(0.01, 3.18)	1.06
	Abdominal hysterectomy	1	0.9	127	N/A	N/A	0.92
LabID	MRSA	3	1.6	34,460	1.89	(0.39, 5.53)	1.12
	CDI	30	27.2	31,561	1.10	(0.74, 1.57)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

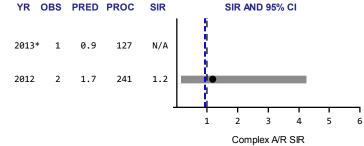
Surgical Site Infections (SSI)

SSI - Colon Surgery

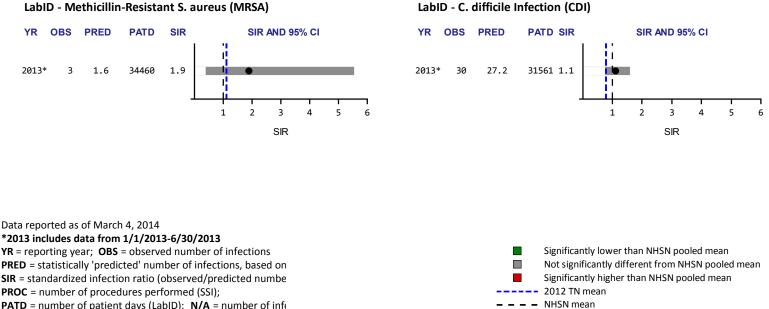


OBS PRED PROC SIR

SSI - Abdominal Hysterectomy



Healthcare-Onset Laboratory-Identified (LabID) Events



PATD = number of patient days (LabID); N/A = number of infe

St. Thomas

St. Thomas Rutherford Hospital (Middle TN Med. Ctr), Murfreesboro, Rutherford County

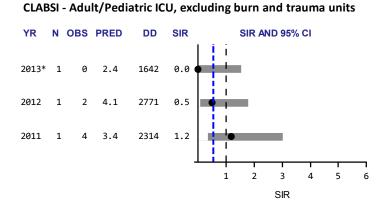
Medical School Affiliation: None Bed Size Category: 100-399 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	2.4	1,642	0.00	(0.00, 1.53)	0.47
	Neonatal ICU	1	0.4	256	N/A	N/A	0.66
CAUTI	Adult/Pediatric ICU	5	3.5	2,802	1.44	(0.47, 3.35)	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)



CLABSI - Neonatal ICU

YR	N	OBS	PRED	DD	SIR
2013*	1	1	0.4	256	N/A
2012	1	0	0.8	481	N/A
2011	1	0	0.4	377	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU N OBS PRED DD SIR SIR AND 95% CI YR 5 3.5 2802 2013* 1 1.4 I 2012 1 14 6.0 4813 2.3 1 I 2 5 1 3 4 6 SIR

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN pooled mean
 Not significantly different from NHSN pooled mean
 Significantly higher than NHSN pooled mean
 2012 TN mean
 NHSN mean

St. Thomas West Hospital, Nashville, Davidson County

Medical School Affiliation: None Bed Size Category: 400+ beds



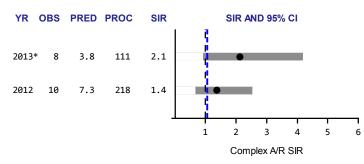
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	8	3.8	111	2.12	(0.92, 4.18)	1.06
	Abdominal hysterectomy	0	0.4	52	N/A	N/A	0.92
LabID	MRSA	7	3.5	46,283	2.01	(0.81, 4.14)	1.12
	CDI	47	37.3	46,283	1.26	(0.92, 1.67)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery



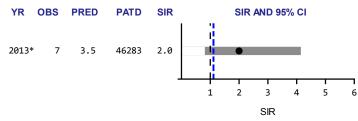
SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	0	0.4	52	N/A	
2012	0	0.9	108	N/A	

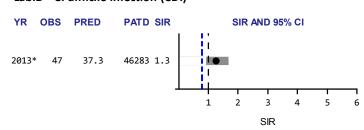
N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA)



LabID - C. difficile Infection (CDI)



2012 TN mean

– – – – NHSN mean

Significantly lower than NHSN pooled mean

Significantly higher than NHSN pooled mean

Not significantly different from NHSN pooled mean

Data reported as of March 4, 2014 ***2013 includes data from 1/1/2013-6/30/2013** YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted number PROC = number of procedures performed (SSI); DATD = number of national days (LabID). N(A = number of infe

PATD = number of patient days (LabID); **N/A** = number of infe

St. Thomas West Hospital, Nashville, Davidson County

Medical School Affiliation: None Bed Size Category: 400+ beds

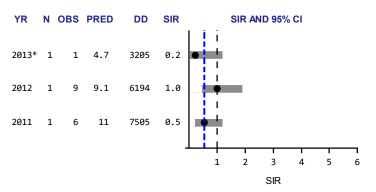
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	4.7	3,205	0.21	(0.01, 1.18)	0.47
CAUTI	Adult/Pediatric ICU	13	4.8	3,900	2.68	(1.43, 4.59)	1.40

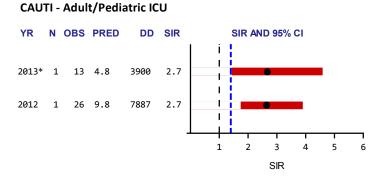
Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009) Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009)

Central Line-Associated Bloodstream Infections (CLABSI)

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

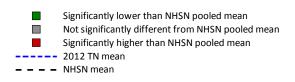


Catheter-Associated Urinary Tract Infections (CAUTI)



Data reported as of March 4, 2014

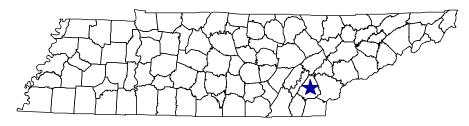
*2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



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Starr Regional Med. Center-Athens (Athens Reg. Med. Ctr.), Athens, McMinn County

Medical School Affiliation: None Bed Size Category: 50-99 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.4	14	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.1	6	N/A	N/A	0.92
LabID	MRSA	0	0.3	5,883	N/A	N/A	1.12
	CDI	1	2.5	5,343	0.41	(0.01, 2.26)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 0 0.4 14 N/A 2013* 0 0.1 6 N/A 2012 0 0.9 39 N/A 2012 0 0.2 11 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) PRED YR OBS PRED PATD SIR YR OBS PATD SIR SIR AND 95% CI 2013* 0.3 5883 N/A 0 5343 0.4 2013* 1 2.5 N/A: Number of predicted infections <1; no SIR calculated 2 3 4 5 6 SIR Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 **YR** = reporting year; **OBS** = observed number of infections Significantly lower than NHSN pooled mean PRED = statistically 'predicted' number of infections, based on

PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of info

SIR = standardized infection ratio (observed/predicted numbe

Significantly lower than NHSN pooled mean
 Not significantly different from NHSN pooled mean
 Significantly higher than NHSN pooled mean
 2012 TN mean
 NHSN mean

Starr Regional Med. Center-Athens (Athens Reg. Med. Ctr.), Athens, McMinn County

Medical School Affiliation: None Bed Size Category: 50-99 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.2	160	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	0.5	406	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

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

YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.2	160	N/A
2012	1	0	0.4	251	N/A
2011	1	0	0.5	367	N/A

N/A: Number of predicted infections <1; no SIR calculated

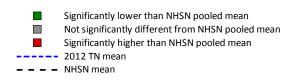
Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.5	406	N/A
2012	1	1	0.9	722	N/A

N/A: Number of predicted infections <1; no SIR calculated

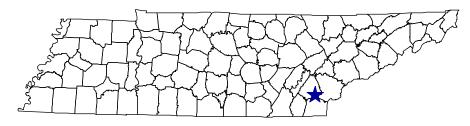
Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Starr Regional

Starr Regional Med. Center-Etowah (Woods Memorial Hosp.), Etowah, McMinn County

Medical School Affiliation: None Bed Size Category: <50 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infe		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.0	0	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	0	N/A	N/A	0.92
LabID	MRSA	0	0.1	3,244	N/A	N/A	1.12
	CDI	5	1.6	3,244	3.04	(0.99, 7.08)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 0 0.0 0 N/A 2013* 0 0.0 0 N/A 2012 0 0.0 0 N/A 2012 0 0.0 0 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) PRED YR OBS PRED PATD SIR SIR AND 95% CI YR OBS PATD SIR 2013* 0.1 3244 N/A 0 2013* 5 1.6 3244 3.0 N/A: Number of predicted infections <1; no SIR calculated 2 1 3 4 5 6 SIR

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe

Significantly lower than NHSN pooled mean
 Not significantly different from NHSN pooled mean
 Significantly higher than NHSN pooled mean
 2012 TN mean
 NHSN mean

Starr Regional N

Starr Regional Med. Center-Etowah (Woods Memorial Hosp.), Etowah, McMinn County

Medical School Affiliation: None Bed Size Category: <50 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	61	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	0.6	277	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

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

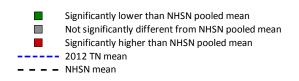
YR	Ν	OBS	PRED	DD	SIR	
2013*	1	0	0.1	61	N/A	
2012	1	1	0.3	151	N/A	

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU										
YR	N	OBS	PRED	DD	SIR					
2013*	1	0	0.6	277	N/A					
2012	1	0	1.0	487	N/A					

N/A: Number of predicted infections <1; no SIR calculated



StoneCrest Medical Center, Smyrna, Rutherford County

Medical School Affiliation: None Bed Size Category: 100-399 beds



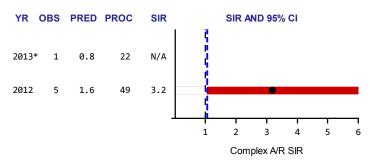
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

			tions		Standardized Infe	ection Ratio (SIR)	
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	1	0.8	22	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.6	59	N/A	N/A	0.92
LabID	MRSA	0	0.4	9,665	N/A	N/A	1.12
	CDI	5	6.7	8,481	0.75	(0.24, 1.75)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery

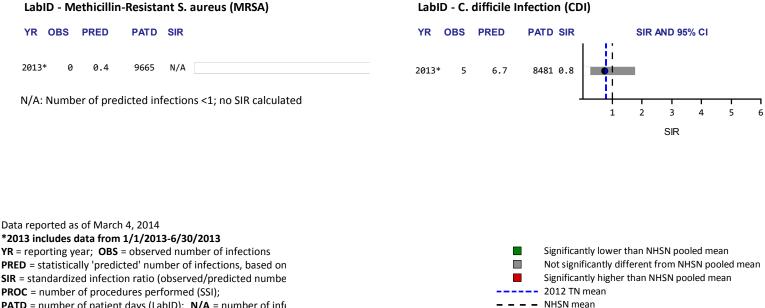


SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	0	0.6	59	N/A	
2012	0	1.0	105	N/A	

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events



PATD = number of patient days (LabID); N/A = number of infe

StoneCrest Medical Center, Smyrna, Rutherford County

Medical School Affiliation: None

Bed Size Category: 100-399 beds

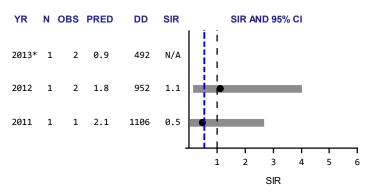
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infe		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	2	0.9	492	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	3	1.4	677	2.19	(0.45,6.41)	1.40

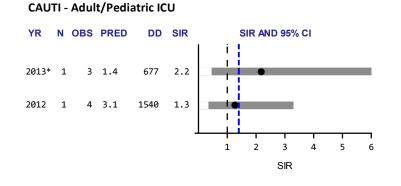
Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009) Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009)

Central Line-Associated Bloodstream Infections (CLABSI)

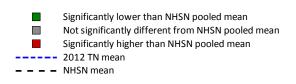
CLABSI - Adult/Pediatric ICU, excluding burn and trauma units



Catheter-Associated Urinary Tract Infections (CAUTI)

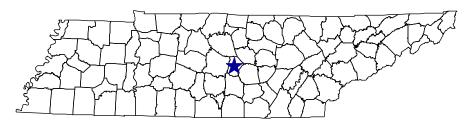


Data reported as of March 4, 2014



Stones River Hospital, Woodbury, Cannon County

Medical School Affiliation: None Bed Size Category: 50-99 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infe		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
LabID	MRSA	0	0.1	2,087	N/A	N/A	1.12
	CDI	1	1.1	2,087	0.91	(0.02, 5.05)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

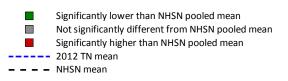
This facility did not perform enough eligible procedures to be subject to Tennessee SSI reporting requirements in 2012-2013

Healthcare-Onset Laboratory-Identified (LabID) Events



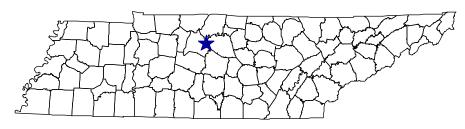
No units in this facility were subject to Tennessee CLABSI/CAUTI reporting requirements in 2012-2013

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe



Summit Medical Center, Hermitage, Davidson County

Medical School Affiliation: None Bed Size Category: 100-399 beds



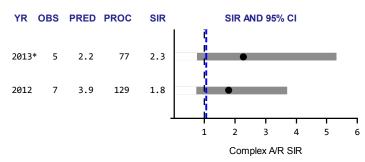
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	5	2.2	77	2.27	(0.74, 5.31)	1.06
	Abdominal hysterectomy	2	0.3	38	N/A	N/A	0.92
LabID	MRSA	1	1.2	27,469	0.85	(0.02, 4.73)	1.12
	CDI	13	17.9	25,290	0.73	(0.39, 1.24)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery



SSI - Abdominal Hysterectomy

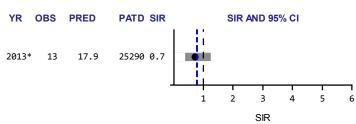
YR O	BS	PRED	PROC	SIR	
2013*	2	0.3	38	N/A	
2012	3	0.9	104	N/A	

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) OBS PRED PATD SIR SIR AND 95% CI YR YR 2013* 1 1.2 27469 0.8 2013* I. 2 1 3 4 5 6 SIR

LabID - C. difficile Infection (CDI)



Data reported as of March 4, 2014 ***2013 includes data from 1/1/2013-6/30/2013** YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); DADD = number of national data (InfeC) = 1000

PATD = number of patient days (LabID); **N/A** = number of infe

Summit Medical Center, Hermitage, Davidson County

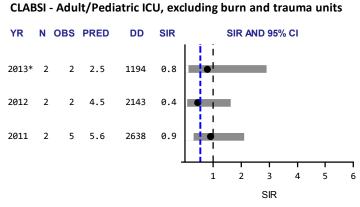
Medical School Affiliation: None Bed Size Category: 100-399 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infe		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	2	2.5	1,194	0.80	(0.10, 2.89)	0.47
	Neonatal ICU	0	0.2	136	N/A	N/A	0.66
CAUTI	Adult/Pediatric ICU	4	4.7	2,053	0.84	(0.23, 2.16)	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)



ts CLABSI - Neonatal ICU

YR	Ν	OBS	PRED	DD	SIR
2013*	1	0	0.2	136	N/A
2012	1	0	0.2	155	N/A
2011	1	0	0.4	218	N/A

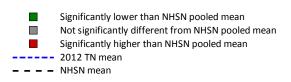
N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU N OBS PRED DD SIR SIR AND 95% CI YR 2 4 4.7 2053 0.8 2013* 11 9.1 2012 2 3956 1.2 I 2 5 1 3 4 6 SIR

Data reported as of March 4, 2014 ***2013 includes data from 1/1/2013-6/30/2013 YR** = reporting year; **N** = number of units reporting (CLABSI/C

PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Sumner Regional Medical Center, Gallatin, Sumner County

Medical School Affiliation: None Bed Size Category: 100-399 beds



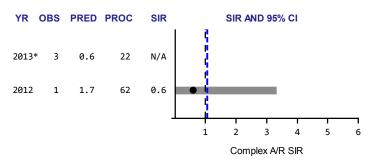
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	3	0.6	22	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.1	16	N/A	N/A	0.92
LabID	MRSA	0	1.3	16,487	0.00	(0.00, 2.77)	1.12
	CDI	2	8.7	15,885	0.23	(0.03, 0.83)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery



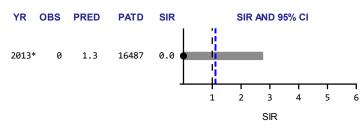
SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	0	0.1	16	N/A	
2012	2	0.4	48	N/A	

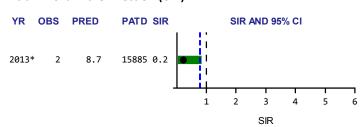
N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA)

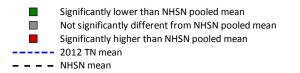


LabID - C. difficile Infection (CDI)



Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI);

PATD = number of patient days (LabID); N/A = number of infe



Sumner Regional Medical Center, Gallatin, Sumner County

Medical School Affiliation: None Bed Size Category: 100-399 beds

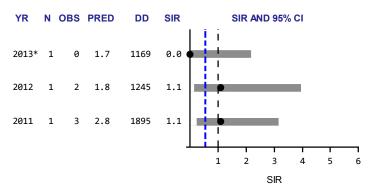
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	1.7	1,169	0.00	(0.00, 2.15)	0.47
CAUTI	Adult/Pediatric ICU	1	2.5	1,976	0.41	(0.01, 2.27)	1.40

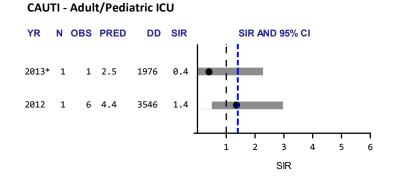
Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009) Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009)

Central Line-Associated Bloodstream Infections (CLABSI)

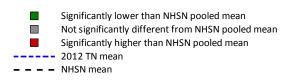
CLABSI - Adult/Pediatric ICU, excluding burn and trauma units



Catheter-Associated Urinary Tract Infections (CAUTI)



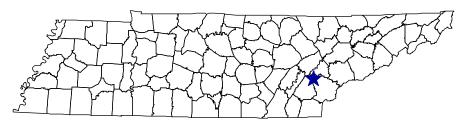
Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



S

Sweetwater Hospital Association, Sweetwater, Monroe County

Medical School Affiliation: Graduate teaching Bed Size Category: 50-99 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	1	0.4	13	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	13	N/A	N/A	0.92
LabID	MRSA	0	0.2	5,389	N/A	N/A	1.12
	CDI	0	3.0	5,218	0.00	(0.00, 1.24)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 1 0.4 13 N/A 0 0.0 13 N/A 2012 0 0.2 10 N/A 2012 0 0.1 24 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) YR OBS PRED PATD SIR YR OBS PRED PATD SIR SIR AND 95% CI 2013* 0 0.2 5389 N/A 5218 0.0 2013* 0 3.0 N/A: Number of predicted infections <1; no SIR calculated 2 3 4 5 6 SIR Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 **YR** = reporting year; **OBS** = observed number of infections Significantly lower than NHSN pooled mean **PRED** = statistically 'predicted' number of infections, based on

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SIR = standardized infection ratio (observed/predicted numbe **PROC** = number of procedures performed (SSI);

PATD = number of patient days (LabID); N/A = number of infe

Sweetwater Hospital Association, Sweetwater, Monroe County

Medical School Affiliation: Graduate teaching Bed Size Category: 50-99 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.3	175	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	1.0	499	0.00	(0.00, 3.66)	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

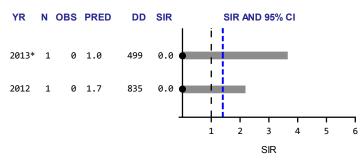
CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

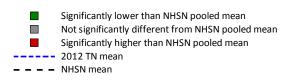
YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.3	175	N/A
2012	1	0	0.7	358	N/A
2011	1	0	0.9	473	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

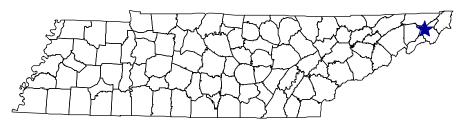
CAUTI - Adult/Pediatric ICU





Sycamore Shoals Hospital, Elizabethton, Carter County

Medical School Affiliation: Graduate teaching Bed Size Category: 100-399 beds



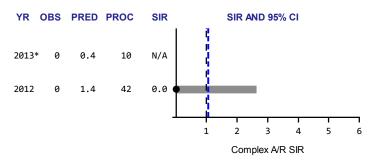
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.4	10	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.1	14	N/A	N/A	0.92
LabID	MRSA	0	0.3	7,512	N/A	N/A	1.12
	CDI	4	5.5	7,512	0.72	(0.20, 1.85)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery



PATD = number of patient days (LabID); N/A = number of infe

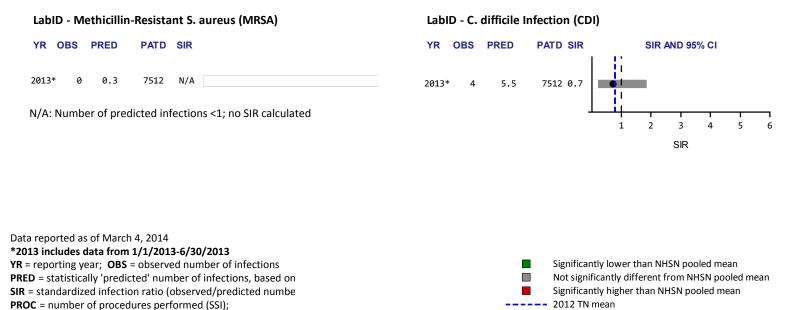
SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	0	0.1	14	N/A	
2012	0	0.5	56	N/A	

N/A: Number of predicted infections <1; no SIR calculated

– – – – NHSN mean

Healthcare-Onset Laboratory-Identified (LabID) Events



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Sycamore Shoals Hospital, Elizabethton, Carter County

Medical School Affiliation: Graduate teaching Bed Size Category: 100-399 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.4	256	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	0.9	673	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

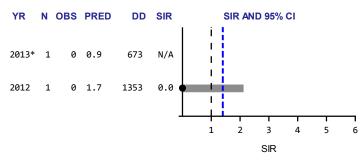
CLABSI - Adult/Pediatric ICU, excluding burn and trauma units

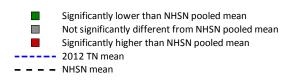
YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.4	256	N/A
2012	1	0	0.8	515	N/A
2011	1	0	0.5	317	N/A

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

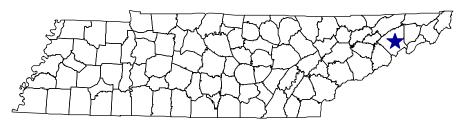
CAUTI - Adult/Pediatric ICU





Takoma Regional Hospital, Greeneville, Greene County

Medical School Affiliation: Graduate teaching Bed Size Category: 100-399 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	1	0.3	13	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	3	N/A	N/A	0.92
LabID	MRSA	0	0.3	5,935	N/A	N/A	1.12
	CDI	0	3.1	5,578	0.00	(0.00, 1.20)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 1 0.3 13 N/A 0 0.0 3 N/A 2012 0 0.6 26 N/A 2012 0 0.2 18 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

– – – – NHSN mean

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) YR OBS PRED PATD SIR YR OBS PRED PATD SIR SIR AND 95% CI 2013* 0 0.3 5935 N/A 5578 0.0 2013* 0 3.1 N/A: Number of predicted infections <1; no SIR calculated 2 3 4 5 6 SIR Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 **YR** = reporting year; **OBS** = observed number of infections Significantly lower than NHSN pooled mean Not significantly different from NHSN pooled mean **PRED** = statistically 'predicted' number of infections, based on **SIR** = standardized infection ratio (observed/predicted numbe Significantly higher than NHSN pooled mean **PROC** = number of procedures performed (SSI); ---- 2012 TN mean

PATD = number of patient days (LabID); N/A = number of infe

Takoma Regional Hospital, Greeneville, Greene County

Medical School Affiliation: Graduate teaching Bed Size Category: 100-399 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.2	130	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	0.6	433	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

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

YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.2	130	N/A
2012	1	0	0.2	155	N/A
2011	1	0	0.3	213	N/A

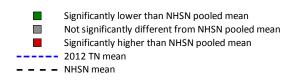
N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric IC	CU
----------------------------	----

YR	Ν	OBS	PRED	DD	SIR
2013*	1	0	0.6	433	N/A
2012	1	0	0.9	720	N/A

N/A: Number of predicted infections <1; no SIR calculated



TC Thompson Children's Hospital (Erlanger), Chattanooga, Hamilton County

Medical School Affiliation: Major teaching Bed Size Category: 100-399 beds

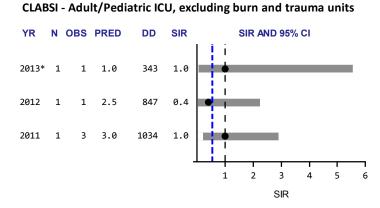


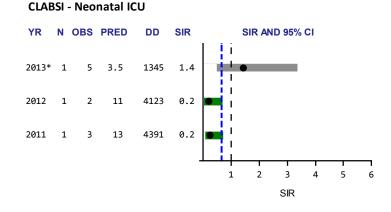
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	1	1.0	343	0.99	(0.03, 5.53)	0.47
	Neonatal ICU	5	3.5	1,345	1.44	(0.47, 3.35)	0.66
CAUTI	Adult/Pediatric ICU	1	0.8	284	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)





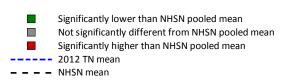
Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2013*	1	1	0.8	284	N/A
2012	1	5	1.0	359	N/A

N/A: Number of predicted infections <1; no SIR calculated

NOTE: Surgical site infection (SSI) and Laboratory-Iden



TrustPoint Hospital, Murfreesboro, Rutherford County

Medical School Affiliation: None Bed Size Category: <50 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infe	ection Ratio (SIR)	
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
LabID	MRSA	0	0.1	3,260	N/A	N/A	1.12
	CDI	0	1.3	3,260	0.00	(0.00, 2.76)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

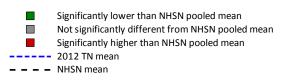
This facility did not perform enough eligible procedures to be subject to Tennessee SSI reporting requirements in 2012-2013

Healthcare-Onset Laboratory-Identified (LabID) Events



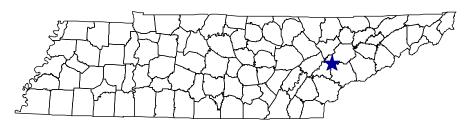
No units in this facility were subject to Tennessee CLABSI/CAUTI reporting requirements in 2012-2013

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe



Turkey Creek Medical Center, Knoxville, Knox County

Medical School Affiliation: None Bed Size Category: 100-399 beds



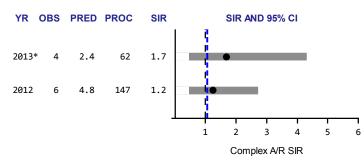
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infec	tions		Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	4	2.4	62	1.68	(0.46, 4.30)	1.06
	Abdominal hysterectomy	1	0.4	41	N/A	N/A	0.92
LabID	MRSA	0	0.4	10,417	N/A	N/A	1.12
	CDI	3	6.1	9,872	0.49	(0.10, 1.44)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery

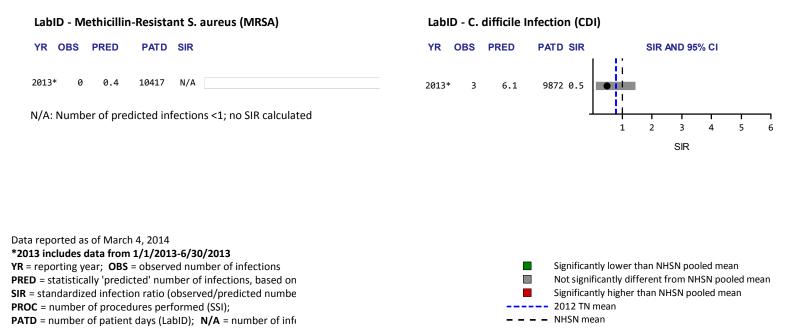


SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	1	0.4	41	N/A	
2012	1	0.8	99	N/A	

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events



Turkey Creek Medical Center, Knoxville, Knox County

Medical School Affiliation: None Bed Size Category: 100-399 beds

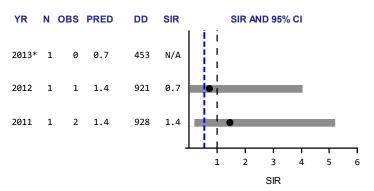
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.7	453	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	2	0.9	661	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

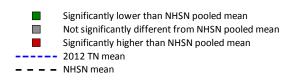
CLABSI - Adult/Pediatric ICU, excluding burn and trauma units



Catheter-Associated Urinary Tract Infections (CAUTI)

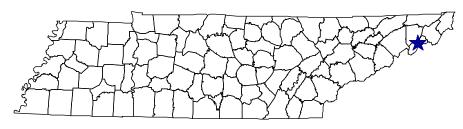
CAUTI - Adult/Pediatric ICU N OBS PRED DD SIR SIR AND 95% CI YR i I 2013* 2 0.9 661 N/A 1 T L 2012 1 3 1.6 1262 1.8 L 1 2 З 4 5 6 SIR

Data reported as of March 4, 2014



Unicoi County Memorial Hospital, Erwin, Unicoi County

Medical School Affiliation: None Bed Size Category: 50-99 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.1	5	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	1	N/A	N/A	0.92
LabID	MRSA	0	0.1	2,158	N/A	N/A	1.12
	CDI	0	1.5	2,158	0.00	(0.00, 2.54)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.1 5 N/A 0 0.0 1 N/A 2012 0 0.3 10 N/A 2012 0 0.1 6 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) YR OBS PRED PATD SIR YR OBS PRED PATD SIR SIR AND 95% CI 2013* 0 0.1 2158 N/A 2013* 0 1.5 2158 0.0 N/A: Number of predicted infections <1; no SIR calculated 2 1 3 4 5 6 SIR Data reported as of March 4, 2014

*2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe

Significantly lower than NHSN pooled mean
 Not significantly different from NHSN pooled mean
 Significantly higher than NHSN pooled mean
 2012 TN mean
 NHSN mean

Unicoi County Memorial Hospital, Erwin, Unicoi County

Medical School Affiliation: None Bed Size Category: 50-99 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.0	32	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	0.2	187	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

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

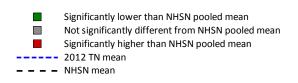
YR	N	OBS	PRED	DD	SIR	
2013*	1	0	0.0	32	N/A	
2012	1	0	0.0	12	N/A	

N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

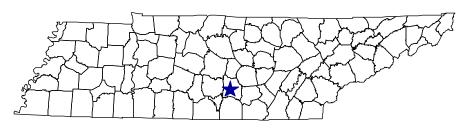
CAUTI - Adult/Pediatric ICU					
YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.2	187	N/A
2012	1	1	0.4	320	N/A

N/A: Number of predicted infections <1; no SIR calculated



United Regional Medical Center, Manchester, Coffee County

Medical School Affiliation: None Bed Size Category: <50 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
LabID	MRSA	0	0.1	1,764	N/A	N/A	1.12
	CDI	2	1.1	1,764	1.77	(0.21,6.38)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

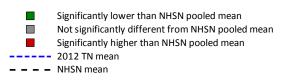
This facility did not perform enough eligible procedures to be subject to Tennessee SSI reporting requirements in 2012-2013

Healthcare-Onset Laboratory-Identified (LabID) Events



No units in this facility were subject to Tennessee CLABSI/CAUTI reporting requirements in 2012-2013

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe



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University Medical Center- Lebanon, Lebanon, Wilson County

Medical School Affiliation: None Bed Size Category: 100-399 beds



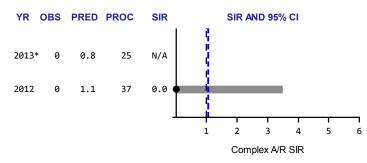
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.8	25	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.5	51	N/A	N/A	0.92
LabID	MRSA	0	0.9	17,053	N/A	N/A	1.12
	CDI	1	8.3	16,648	0.12	(0.00, 0.67)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery



SSI - Abdominal Hysterectomy

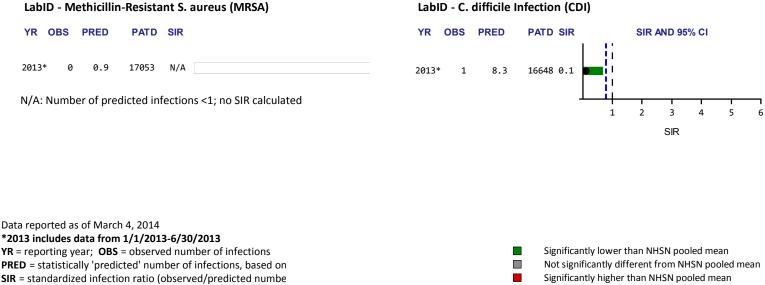
YR O	BS	PRED	PROC	SIR	
2013*	0	0.5	51	N/A	
2012	0	0.8	95	N/A	

N/A: Number of predicted infections <1; no SIR calculated

--- 2012 TN mean

– – – – NHSN mean

Healthcare-Onset Laboratory-Identified (LabID) Events



PROC = number of procedures performed (SSI);

PATD = number of patient days (LabID); N/A = number of infe

University Medical Center- Lebanon, Lebanon, Wilson County

Medical School Affiliation: None Bed Size Category: 100-399 beds

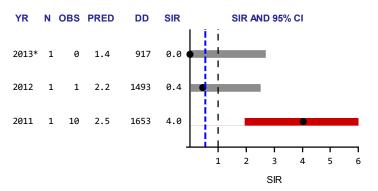
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	1.4	917	0.00	(0.00, 2.69)	0.47
CAUTI	Adult/Pediatric ICU	1	1.4	1,105	0.70	(0.02, 3.91)	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

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

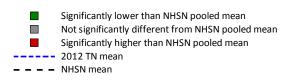


Catheter-Associated Urinary Tract Infections (CAUTI)

N OBS PRED DD SIR SIR AND 95% CI YR 2013* 1 1.4 1105 0.7 1 т 3 2.5 2012 1 1924 1.2 1e L 2 4 5 1 3 6 SIR

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated

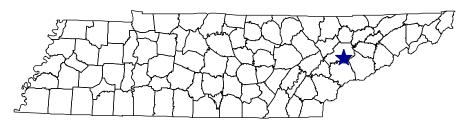
CAUTI - Adult/Pediatric ICU



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University of Tennessee Medical Ctr, Knoxville, Knox County

Medical School Affiliation: Major teaching Bed Size Category: 400+ beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	19	5.8	161	3.29	(1.98, 5.14)	1.06
	Abdominal hysterectomy	1	1.3	197	0.78	(0.02, 4.35)	0.92
LabID	MRSA	8	13.0	71,722	0.62	(0.27, 1.21)	1.12
	CDI	17	42.9	61,412	0.40	(0.23, 0.63)	0.77

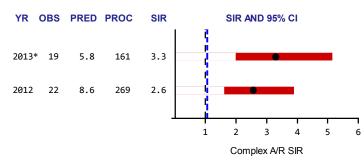
Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

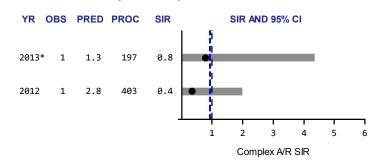
SSI - Colon Surgery

PROC = number of procedures performed (SSI);

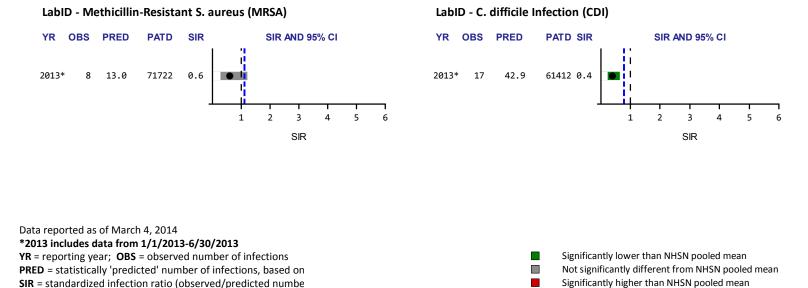
PATD = number of patient days (LabID); N/A = number of infe



SSI - Abdominal Hysterectomy



Healthcare-Onset Laboratory-Identified (LabID) Events



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2012 TN mean

University of Tennessee Medical Ctr, Knoxville, Knox County

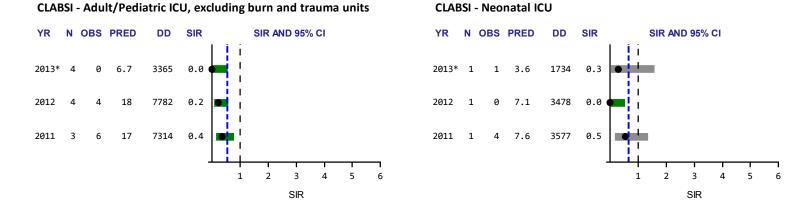
Medical School Affiliation: Major teaching Bed Size Category: 400+ beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

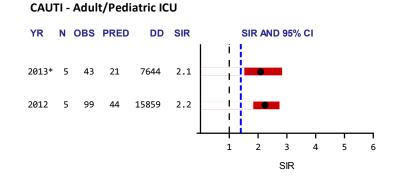
		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	6.7	3,365	0.00	(0.00, 0.55)	0.47
	Neonatal ICU	1	3.6	1,734	0.28	(0.01, 1.57)	0.66
CAUTI	Adult/Pediatric ICU	43	20.6	7,644	2.09	(1.51, 2.82)	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

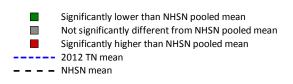


Catheter-Associated Urinary Tract Infections (CAUTI)



Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013

YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Vanderbilt Medical Center, Nashville, Davidson County

Medical School Affiliation: Major teaching Bed Size Category: 400+ beds



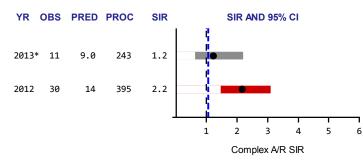
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

			tions		Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	11	9.0	243	1.22	(0.61, 2.19)	1.06
	Abdominal hysterectomy	2	1.5	142	1.31	(0.16, 4.74)	0.92
LabID	MRSA	21	14.1	156,655	1.49	(0.92, 2.27)	1.12
	CDI	80	121	140,755	0.66	(0.52, 0.82)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

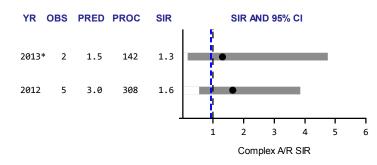
SSI - Colon Surgery



SSI - Abdominal Hysterectomy

2012 TN mean

– – – – NHSN mean

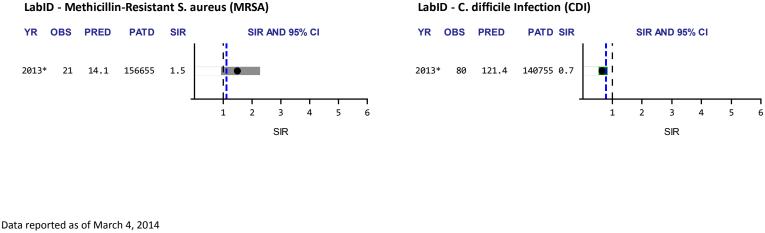


Significantly lower than NHSN pooled mean

Significantly higher than NHSN pooled mean

Not significantly different from NHSN pooled mean

Healthcare-Onset Laboratory-Identified (LabID) Events



*2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI);

PATD = number of patient days (LabID); **N/A** = number of infe

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Vanderbilt Medical Center, Nashville, Davidson County

Medical School Affiliation: Major teaching Bed Size Category: 400+ beds

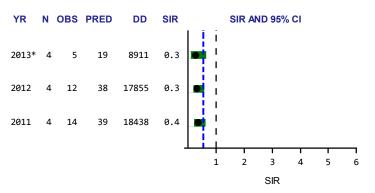
Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	5	18.8	8,911	0.27	(0.09, 0.62)	0.47
CAUTI	Adult/Pediatric ICU	44	35.8	12,744	1.23	(0.89, 1.65)	1.40

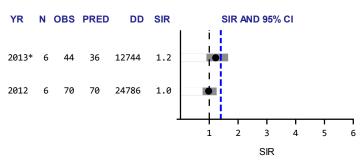
Green highlighting indicates an SIR significantly LOWER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009) Red highlighting indicates an SIR significantly HIGHER than the national baseline (CLABSI - 2006-2008; CAUTI - 2009)

Central Line-Associated Bloodstream Infections (CLABSI)

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

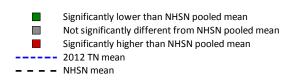


Catheter-Associated Urinary Tract Infections (CAUTI)



Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013

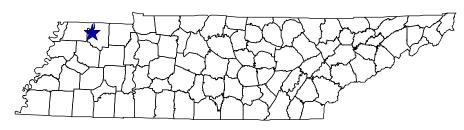
YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



CAUTI - Adult/Pediatric ICU

Volunteer Community Hospital, Martin, Weakley County

Medical School Affiliation: None Bed Size Category: 50-99 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.0	1	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.1	7	N/A	N/A	0.92
LabID	MRSA	0	0.1	2,903	N/A	N/A	1.12
	CDI	4	1.6	2,903	2.44	(0.67,6.26)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.0 1 N/A 0 0.1 7 N/A 2012 0 0.2 7 N/A 2012 0 0.1 8 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA) LabID - C. difficile Infection (CDI) YR OBS PRED PATD SIR OBS PRED PATD SIR SIR AND 95% CI YR 2013* 0 0.1 2903 N/A 2013* 4 1.6 2903 2.4 N/A: Number of predicted infections <1; no SIR calculated 2 1 3 4 5 6 SIR

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe

Significantly lower than NHSN pooled mean
 Not significantly different from NHSN pooled mean
 Significantly higher than NHSN pooled mean
 2012 TN mean
 NHSN mean

Volunteer Community Hospital, Martin, Weakley County

Medical School Affiliation: None Bed Size Category: 50-99 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	62	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	0.2	170	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

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

YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.1	62	N/A
2012	1	0	0.3	197	N/A
2011	1	0	0.3	222	N/A

N/A: Number of predicted infections <1; no SIR calculated

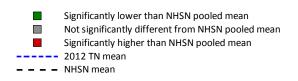
Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU

YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.2	170	N/A
2012	1	0	0.7	554	N/A

N/A: Number of predicted infections <1; no SIR calculated

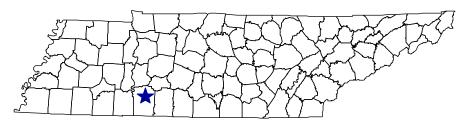
Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



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Wayne Medical Center, Waynesboro, Wayne County

Medical School Affiliation: None Bed Size Category: 50-99 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
LabID	MRSA	0	0.0	976	N/A	N/A	1.12
	CDI	0	0.6	976	N/A	N/A	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

This facility did not perform enough eligible procedures to be subject to Tennessee SSI reporting requirements in 2012-2013

Healthcare-Onset Laboratory-Identified (LabID) Events

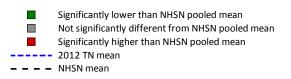
LabID - Methicillin-Resistant S. aureus (MRSA)	LabID - C. difficile Infection (CDI)				
YR OBS PRED PATD SIR	YR OBS PRED PATD SIR				
2013* 0 0.0 976 N/A	2013* 0 0.6 976 N/A				

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

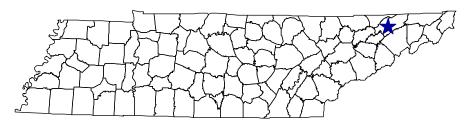
No units in this facility were subject to Tennessee CLABSI/CAUTI reporting requirements in 2012-2013

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe



Wellmont Hawkins County Hospital, Rogersville, Hawkins County

Medical School Affiliation: None Bed Size Category: <50 beds



Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	0.0	1	N/A	N/A	1.06
	Abdominal hysterectomy	0	0.0	0	N/A	N/A	0.92
LabID	MRSA	0	0.1	2,038	N/A	N/A	1.12
	CDI	1	1.0	2,038	N/A	N/A	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery SSI - Abdominal Hysterectomy YR OBS PRED PROC SIR YR OBS PRED PROC SIR 2013* 2013* 0 0.0 1 N/A 0 0.0 0 N/A 2012 0 0.1 3 N/A 2012 0 0.0 3 N/A

N/A: Number of predicted infections <1; no SIR calculated

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events

LabID - Methicillin-Resistant S. aureus (MRSA)	LabID - C. difficile Infection (CDI)			
YR OBS PRED PATD SIR	YR OBS PRED PATD SIR			
2013* 0 0.1 2038 N/A	2013* 1 1.0 2038 N/A			
N/A: Number of predicted infections <1; no SIR calculated	N/A: Number of predicted infections <1; no SIR calculated			

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Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; OBS = observed number of infections PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe PROC = number of procedures performed (SSI); PATD = number of patient days (LabID); N/A = number of infe

Significantly lower than NHSN pooled mean
 Not significantly different from NHSN pooled mean
 Significantly higher than NHSN pooled mean
 2012 TN mean
 NHSN mean

Wellmont Hawkins County Hospital, Rogersville, Hawkins County

Medical School Affiliation: None Bed Size Category: <50 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	0.1	44	N/A	N/A	0.47
CAUTI	Adult/Pediatric ICU	0	0.3	202	N/A	N/A	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)

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

YR	N	OBS	PRED	DD	SIR	
2013*	1	0	0.1	44	N/A	
2012	1	0	0.1	89	N/A	

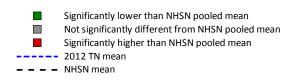
N/A: Number of predicted infections <1; no SIR calculated

Catheter-Associated Urinary Tract Infections (CAUTI)

CAUTI - Adult/Pediatric ICU									
YR	N	OBS	PRED	DD	SIR				
2013*	1	0	0.3	202	N/A				
2012	1	1	0.6	483	N/A				

N/A: Number of predicted infections <1; no SIR calculated

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated



Williamson Medical Center, Franklin, Williamson County

Medical School Affiliation: None Bed Size Category: 100-399 beds



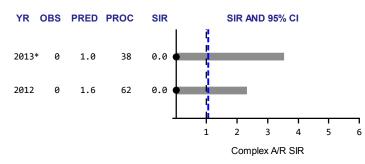
Standardized Infection Ratio (SIR) by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Procedures Performed/ Patient Days	SIR*	95% CI	TN SIR
SSI	Colon surgery	0	1.0	38	0.00	(0.00, 3.52)	1.06
	Abdominal hysterectomy	0	0.2	33	N/A	N/A	0.92
LabID	MRSA	1	0.9	17,666	N/A	N/A	1.12
	CDI	7	10.3	15,496	0.68	(0.27, 1.40)	0.77

Green highlighting indicates an SIR significantly LOWER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) Red highlighting indicates an SIR significantly HIGHER than the national baseline (SSI - 2006-2008; LabID - 2010-2011) *Complex Admission/Readmission SIRs are presented for surgical site infections (SSI)

Surgical Site Infections (SSI)

SSI - Colon Surgery

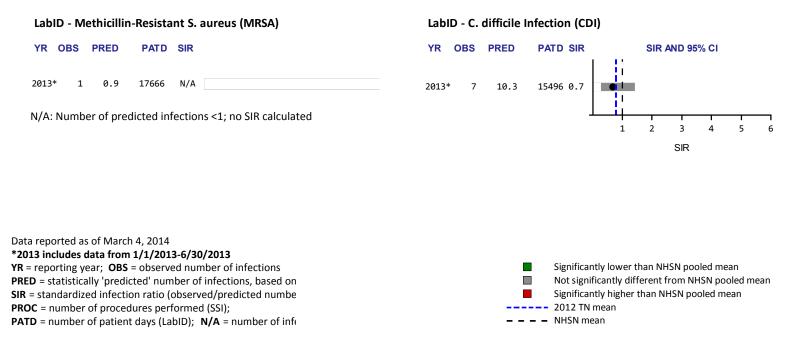


SSI - Abdominal Hysterectomy

YR O	BS	PRED	PROC	SIR	
2013*	0	0.2	33	N/A	
2012	1	0.4	51	N/A	

N/A: Number of predicted infections <1; no SIR calculated

Healthcare-Onset Laboratory-Identified (LabID) Events



Williamson Medical Center, Franklin, Williamson County

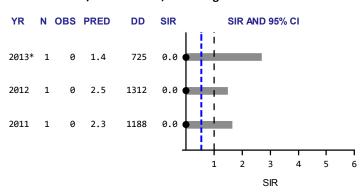
Medical School Affiliation: None Bed Size Category: 100-399 beds

Standardized Infection Ratio by Infection Type, 01/01/2013-06/30/2013

		Infections			Standardized Infection Ratio (SIR)		
HAI	Type/Unit	Observed	Predicted	Device Days	SIR	95% CI	TN SIR
CLABSI	Adult/Pediatric ICU	0	1.4	725	0.00	(0.00, 2.68)	0.47
	Neonatal ICU	0	0.0	22	N/A	N/A	0.66
CAUTI	Adult/Pediatric ICU	0	2.7	1,346	0.00	(0.00, 1.36)	1.40

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

Central Line-Associated Bloodstream Infections (CLABSI)



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

YR	N	OBS	PRED	DD	SIR
2013*	1	0	0.0	22	N/A
2012	1	1	0.2	148	N/A

0.2

0

CLABSI - Neonatal ICU

N/A: Number of predicted infections <1; no SIR calculated

148

N/A

Catheter-Associated Urinary Tract Infections (CAUTI)

2011

1

CAUTI - Adult/Pediatric ICU N OBS PRED DD SIR SIR AND 95% CI YR 2.7 1346 0.0 2013* 1 0 2012 1 1 5.3 2643 0.2 2 1 3 4 5 6 SIR

Data reported as of March 4, 2014 *2013 includes data from 1/1/2013-6/30/2013 YR = reporting year; N = number of units reporting (CLABSI/C PRED = statistically 'predicted' number of infections, based on SIR = standardized infection ratio (observed/predicted numbe DD = device days: central line days (CLABSI)/urinary catheter c N/A = number of infections predicted <1; no SIR calculated

Significantly lower than NHSN pooled mean Not significantly different from NHSN pooled mean Significantly higher than NHSN pooled mean 2012 TN mean NHSN mean