



CDC Clarification on Patients with Acute Kidney Injury (AKI) and Reporting Calendar Year 2017 Dialysis Event Surveillance Data to the National Healthcare Safety Network (NHSN)

The Centers for Disease Control and Prevention (CDC) is providing the following guidance to clarify how dialysis facilities that treat acute kidney injury (AKI) patients should report 2017 Dialysis Event Surveillance data to the National Healthcare Safety Network (NHSN). Adherence to this guidance will enable CDC to exclude AKI patient data from NHSN Bloodstream Infection (BSI) data shared with CMS for purposes of the ESRD QIP.

Dialysis BSI Data

BSI are reported to NHSN as positive blood culture events. Facilities should select one of the following two options for positive blood culture events that occur in AKI patients during calendar year (CY) 2017, including Quarter 1 and 2. Complying with either option will ensure AKI BSI data are not shared with CMS for the ESRD QIP:

Option 1: Exclude positive blood culture events that occurred in AKI patients from CY 2017 Dialysis Event Data reported to NHSN. Dialysis facilities selecting this option should not report positive blood cultures to NHSN that occurred in patients with AKI, and delete AKI positive blood culture event data that has been entered for Quarter 1 or 2 of CY 2017.

Option 2: Include AKI patients in CY 2017 Dialysis Event Data reported to NHSN, and clearly label these events in AKI patients, to facilitate their removal from the QIP dataset. Facilities should select this option if they prefer to retain AKI patient data in NHSN for their internal use. To facilitate this process, facilities must follow the attached guidance to indicate which positive blood culture events occurred in patients with AKI. Instructions are attached for identifying AKI patients when adding new events, and for editing events that have been previously entered for CY 2017. CDC will exclude properly labeled AKI positive blood culture events from the 2017 BSI standardized infection ratio (SIR) measure calculations, and from the dataset provided to CMS for QIP scoring.

Denominator data

Regardless of the option selected for handling positive blood cultures events among patients with AKI, when reporting CY 2017 denominator data via the Denominators for Dialysis Event Surveillance form, all facilities should exclude patients with AKI in *“the number of hemodialysis outpatients who were dialyzed in the facility on the first two working days of each month”* and all stratified patient counts reported for calendar year 2017. Instructions for removing AKI patients from CY 2017 denominator data are attached.

To allow facilities to comply with the above guidance, CMS has extended **the 2017 ESRD QIP Quarter 1 NHSN reporting deadline to July 31, 2017.**

If you have any questions regarding how to update AKI data in NHSN, please contact the NHSN helpdesk at nhsn@cdc.gov with “dialysis” in the subject line. If you have any questions or concerns regarding ESRD QIP, please contact the CMS ESRD QIP team at esrdqip@cms.hhs.gov with “AKI” in the subject line.