Healthcare-Associated Infections in Pennsylvania

2012 Report

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1. Executive Summary

Overview The 2012 report on the occurrence and patterns of healthcare-associated infections (HAIs) is the fifth to be released by the Pennsylvania Department of Health (PADOH). The incidence of HAIs in Pennsylvania has declined substantially since the passage of Act 52 in 2007; however, the dramatic improvements observed in the first few years of the report have slowed and in some cases regressed slightly from 2011 to 2012. Nonetheless, Pennsylvania remains a leader in the prevention of HAIs. Three categories of HAIs are used for benchmarking. These are: catheter-associated urinary tract infections (CAUTIs), central line-associated bloodstream infections (CLABSIs) and selected surgical site infections (SSIs). The Pennsylvania CAUTI and CLABSI rates remain well below the national average, and the Pennsylvania SSI rate has decreased on par with improvements seen across the country. This success is likely the result of ongoing efforts undertaken by infection preventionists, healthcare providers and systems, professional societies, and governmental agencies to control and prevent HAIs. The impact of these efforts should improve the health status and outcomes of patients cared for in Pennsylvania hospitals — the primary motivation for HAI prevention and control, along with reduced healthcare expenditures.

Background All hospitals in Pennsylvania are required to report any HAI that occurs in an inpatient location. These infections are reported by the hospitals to the Centers for Disease Control and Prevention's (CDC's) National Healthcare Safety Network (NHSN), which is now the primary data collection tool used for HAI reporting by more than 5,000 hospitals across the country. The information submitted to NHSN from Pennsylvania hospitals is provided to PADOH in order to be compiled, analyzed and published on an annual basis.

As in previous reports, the 2012 report contains a summary of the overall and hospital-specific number and type of HAIs. This is followed by separate sections on each of the three HAI categories that PADOH uses for benchmarking hospital performance. Hospital comparisons in these sections are done using the same risk-adjusted standardized infection ratio (SIR) approach used in previous Pennsylvania reports. The SIR is a value based on the ratio of infections **reported** by each hospital to NHSN (referred to as observed infections) to the number of infections **predicted** to occur at that hospital (referred to as predicted infections). The number of predicted infections is a calculated value that PADOH assigns to the hospital based on the overall statewide rate for each type of infection.

Universal influenza vaccination is the single most important measure to prevent transmission of influenza, and it is an important indicator of a hospital's commitment to patient safety. Healthcare provider (HCP) influenza vaccination of 90 percent or better is a Healthy People 2020 goal. The 2011 report was the first report in which PADOH reported statewide healthcare provider (HCP) influenza vaccination rates. This 2012 report includes hospital-specific HCP influenza vaccination rates during the 2012–2013 influenza season and recognizes those facilities that have already achieved the Healthy People 2020 goal.

All Healthcare-Associated Infections (HAIs) In 2012, there were 249 hospitals in Pennsylvania that submitted data to NHSN and were in continuous operation over the 12-month time period. Cumulatively, these hospitals reported a total of 22,654 HAIs occurring over 10,033,090 patient days of hospital care. Patient-days are the number of hospitalizations multiplied by the length of stay of each hospitalization (i.e., one patient hospitalized for five days equals five patient days). This results in an overall statewide rate of 2.26 HAIs per 1,000 patient days. This is a 1.5 percent increase from the overall HAI rate in 2011 and a 9.4 percent decrease from 2009, which is considered the baseline year of measurement for Act 52. This represents 7,100 fewer HAIs than would have occurred if the 2009 HAI rate had persisted into 2012. In this report (as in 2011), the most commonly reported categories of HAIs are surgical site infections (27.87 percent of all HAIs), followed by urinary tract infections (22.9 percent) and gastrointestinal infections (17.02 percent).

Catheter-Associated Urinary Tract Infections (CAUTIs) Among the 249 hospitals, there were 230 (92.4 percent) that reported using urinary catheters and 185 (80.4 percent of those using urinary catheters) that reported at least one CAUTI. There were a total of 2,870 CAUTIs reported in 2012 over more than 1.68 million days of urinary catheter use, for a rate of 1.71 CAUTIs per 1,000 urinary catheter days. Compared to 2011, this represents an increase in the CAUTI rate of 10.22 percent, and a 13.49 percent decline when compared to the baseline year of 2009. This translates to 1,712 fewer CAUTIs in Pennsylvania since 2009. Among the 230 hospitals reporting use

of urinary catheters in 2012, there were 32 (13.9 percent) that reported significantly fewer CAUTIs than PADOH predicted would occur and 29 (12.6 percent) that reported significantly more CAUTIs than predicted by PADOH.

Central Line-Associated Bloodstream Infections (CLABSIs) Among the 249 hospitals, there were 218 (87.6 percent) that used central lines (catheters inserted into the large arteries near the heart) and 159 (72.9 percent of those using central lines) that reported at least one CLABSI. There were a total of 1,474 CLABSIs reported in 2012 in more than 1.6 million days of central line use, giving an overall rate of 0.89 CLABSIs per 1,000 central line days. Compared to 2011, this represents a 0.4 percent decline in CLABSIs and a 28.1 percent decline compared to the baseline year of 2009. This translates to 1,699 fewer CLABSIs in Pennsylvania since 2009. CLABSIs are subdivided by hospital location type. In neonatal intensive care units (NICUs), the CLABSI rate in 2012 was 1.33 per 1,000 central line days; in specialty care areas, the CLABSI rate in 2012 was 1.35 per 1,000 central line days; in long term acute care units, the CLABSI rate in 2012 was 1.11 per 1,000 central line days.

Surgical Site Infections (SSIs) Among the six benchmark surgical procedures (cardiac surgery, cardiac bypass grafts [with a single and with dual incision sites], hip prostheses, knee prostheses and abdominal hysterectomy) tracked for SSIs, all but one can involve implantable devices. NHSN definitions for implant-associated surgical procedures currently require a 12-month follow-up period to detect an SSI. Therefore, the information in this report for the SSI benchmark lags the other conditions by a year. In 2011, at least one of these six procedures was performed in 170 Pennsylvania hospitals. For all six procedures combined, a total of 94,634 operations took place, with knee prostheses forming the largest number (41.6 percent). For all six procedures combined, a total of 1,186 SSIs were identified. This produces an overall rate of 1.25 SSIs per 100 procedures, representing a decline of 6.99 percent compared to the 2009 baseline rate. This translates to 164 fewer SSIs in Pennsylvania since 2009. The rate per procedure ranged from a high of 2.10 SSIs per 100 procedures for dual-incision cardiac bypass grafts to 0.83 SSIs per 100 procedures for knee arthroplasties.

2. Introduction

Healthcare-associated infection (HAI) is the term used for an infection that occurs in a patient as a direct consequence of the healthcare interventions being delivered to them. HAIs are one of the major types of adverse events that can occur in the healthcare environment and are a considerable patient safety concern. HAIs represent a diverse group of complications, ranging from infections that occur in a surgical wound to pneumonias among patients on ventilators. They vary based on the reason that the patient is receiving care, the type of interventions being administered, the portion of the healthcare system being used by the patient, and the patient's underlying health status and circumstances. HAIs also vary substantially in terms of their impact on the patient, the outcome and their cost. They can be relatively minor and easily treatable (such as a minor skin infection in an outpatient) or they can result in significant patient deterioration, longer hospital stays and even death. Taken as a group, HAIs are considered among the leading causes of death in the United States and have been estimated to cost the healthcare system tens of billions of dollars annually.

These factors have resulted in a growing awareness of the importance of HAIs and have helped to establish patient safety as a core pillar of the healthcare system. Although HAIs are an important factor throughout the healthcare continuum, nowhere are they more impactful than in the hospital setting, where the sickest patients are treated.

As recently as the 1990s, HAIs were considered an inevitable consequence of healthcare delivery. But this view has shifted dramatically as HAIs are recognized to be preventable. This had led to a paradigm shift throughout the healthcare system that the elimination of HAIs as a public health and patient safety concern is a possibility and the ultimate goal. In a 2010 article co-authored by the Centers for Disease Control and Prevention (CDC) and a consortium of patient safety organizations, four major pillars crucial to meeting the goal of elimination of HAIs were identified (Cardo **et al.**, 2010). They are:

1. Comprehensive, systematic and continuous adherence to evidence-based prevention practices;

2. Alignment of incentives to promote the adoption of prevention practices;

3. Conducting research to identify strategies to reduce HAIs where knowledge gaps remain; and

4. Collecting, analyzing and disseminating data for action.

Pennsylvania is considered a national leader in all of these areas. Researchers in the commonwealth have conducted some of the seminal studies used to develop the knowledge base for HAI prevention. Practitioners have demonstrated the impact of systematic implementation of HAI prevention strategies. Pennsylvania was one of the first states to require that all hospitals publicly disclose their HAI data.

The current report focuses on the fourth pillar of the HAI elimination blueprint published in 2010. Legislation known as Act 52 was passed and enacted in 2007 that contains the most comprehensive reporting requirements of any state. The act requires PADOH to collect information on all inpatient HAIs, summarize the findings and publicly report the results.

Since Act 52 requirements took effect in February 2008, PADOH has published a comprehensive report on the patterns of HAIs in Pennsylvania. The current report is the fifth in this series. It includes data on the overall patterns of HAIs in Pennsylvania acute care inpatient institutions and focuses on the three types of HAIs that are used to measure the progress in HAI reductions. These HAI types are known as benchmark HAIs. They were selected by PADOH in collaboration with a statewide HAI Advisory Committee established by Act 52 based on the volume of infections and their human and economic toll and preventability. They are catheter-associated urinary tract infections (CAUTIs), central line-associated bloodstream infections (CLABSIs) and six different types of surgical site infections (SSIs). These HAI types were also selected to allow some type of measure to be established across the range of inpatient facilities present in a large, diverse state like Pennsylvania. Even the smallest hospitals are likely to use urinary catheters and to perform at least one of the six surgical procedures.

With the growing focus on patient safety, the demand for measures of progress in reducing HAIs and in demonstrating a culture of patient safety is also growing. In addition to measuring actual trends in HAIs, there is growing interest

in assessing process measures of patient safety. Therefore, PADOH started publishing influenza vaccination rates for healthcare workers in the 2011 report. This section examines vaccination coverage of the healthcare workforce against influenza. Influenza is recognized as a major cause of illness and death, can be transmitted in healthcare settings, and is preventable through vaccination. Major healthcare organizations, societies, and federal and state governments have all promoted influenza vaccination of healthcare workers to control influenza and to keep the workforce healthy. The U.S. Department of Health and Human Services has established a Healthy People 2020 goal of 90 percent of healthcare workers to be vaccinated against influenza annually.

This is the second PADOH HAI annual report to contain healthcare worker influenza vaccination data. Submission of data on healthcare worker vaccination is not a mandated requirement of Act 52. For last year's report PADOH, in collaboration with the Pennsylvania Healthcare Quality Alliance (PHCQA), conducted a voluntary survey of hospital healthcare worker influenza vaccination rates during the 2012–2013 influenza season. PADOH and other partners also conducted trainings for hospitals in anticipation of pay-for-reporting requirements implemented by the federal Centers for Medicare and Medicaid Services (CMS). These requirements went into effect in January 2013. For full hospitals to receive full reimbursement from CMS within the inpatient prospective payment system (IPPS), hospitals are required to submit data to NHSN system that is currently used by Pennsylvania to report HAIs. Last year, PADOH published aggregated healthcare worker vaccination rates and recognized the accomplishments of those facilities that achieved employee vaccination rates of 90 percent or better, but PADOH did not publish facility-specific rates. This year, hospitals entered vaccination data directly into NHSN, and PADOH is publishing facility-specific healthcare worker vaccination rates for the first time.

Like last year's report, the 2012 report includes hospital-specific trends in the occurrence of HAIs. This will enable any user of the data to see whether the overall rates of HAIs, and the rates of CAUTIs and CLABSIs, are increasing, decreasing or remaining stable on a hospital-by-hospital basis.

As in previous reports, the information in 2012 is divided into several sections. First, composite information is provided for the entire state. This is followed by hospital-specific data on the overall numbers of HAIs in each reporting category in NHSN. Separate sections then focus on CAUTIs, CLABSIs and SSIs, followed by the section on healthcare worker flu vaccination. The hospital-specific trends over time are included in each section as appropriate and as an appendix to the report.

It is important to note that PADOH works collaboratively with a variety of stakeholder organizations to promote healthcare quality and reduce the incidence of healthcare-associated infections. In addition, two governmental partners, the Pennsylvania Patient Safety Authority (PSA) and the Pennsylvania Health Care Cost Containment Council (PHC4), have specific roles under Act 52 and work closely with PADOH on HAI prevention and control. Readers of the annual report are encouraged to examine companion reports published by PSA and PHC4. The PSA annual report for 2012 describes PSA HAI- related activities and can be found at `http://patientsafetyauthority.org`. The PHC4 report entitled The Impact of Healthcare-Associated Infections in Pennsylvania, 2012, examines costs, mortality, readmissions and underlying health conditions associated with HAIs. It can be found at `http://www.phc4.org`.

3. Data and Methods

The data, analytic approaches and methods used in this report are similar to those used in previous reports. They are described in much greater detail in the 2009 report, which is available on the Pennsylvania Department of Health website at the following address: `http://www.portal.health.state.pa.us/portal/server.pt/community/healthcare_associated_infections/14234`.

All hospitals are required to report all HAIs associated with any inpatient location using the Patient Safety Module of CDCs National Healthcare Safety Network. These infection types are:

- Bone and joint infections (BJ);
- Blood stream infections (BSI) with or without a central line (BSI associated with a central line are known as central line associated bloodstream infections [CLABSI]);
- Central nervous system infections (CNS);
- Cardiovascular system infections (CVS);
- Eye, Ear, Nose and Throat infections (EENT);
- Gastrointestinal infections (GI);
- Lower respiratory tract infections (LRI);
- Pneumonia (PNEU) whether ventilator or non-ventilator associated;
- Reproductive tract infections (REPR);
- Skin and soft tissue infections (SST);
- Surgical site infections (SSI);
- Systemic infections (SYS); and
- Urinary tract infections (UTI) with or without a catheter (UTI associated with a urinary catheter are known as catheter-associated urinary tract infections [CAUTI]).

NHSN uses standardized definitions for each of these infection types, including methods for their detection, how they are to be identified, and the time frames for the infection to occur upon and after hospitalization. The NHSN definitions can be found in the NHSN Patient Safety Manual at `http://www.cdc.gov/nhsn`. Infection preventionists and data reporters under Act 52 are required to use the standardized NHSN criteria and methods to determine whether an identified infection should be reported as an HAI.

Hospitals also collect certain denominator information to enable the calculation of HAI rates. This information includes:

- Patient days: the total number of patients in the hospital per day over the entire calendar year (total hospitalizations multiplied by the duration of each hospitalization);
- Urinary catheter days: the total number of hospitalized patients with a urinary catheter in place per day over the entire calendar year (total number of patients with a urinary catheter in place multiplied by the number of days a catheter was used for each patient); and
- Central line days: the total number of hospitalized patients with a central line in place per day over the entire calendar year (total number of patients with at least one central line in place multiplied by the number of days

a central line was in place for each patient).

For the six benchmarked surgical procedures, hospitals collect and submit certain standardized information on all patients who had the procedure performed during the period of interest, not just those in whom an HAI subsequently developed. This includes risk index information for all patients undergoing one of the benchmarked procedures, allowing risk index-specific HAI rates for each procedure category.

The overall rate of HAIs by hospital (Table 4.2.4) is calculated as infections per 1,000 patient days. This is a standard method of reporting HAIs. For CAUTIs and CLABSIs, the identified rates are per 1,000 device days (either catheter days or central line days), since these are the more appropriate denominators. For benchmarked SSIs, the rates are reported as infections per 100 procedures. All of the reported rates are unadjusted for factors that might be related to differences in HAIs between or within a hospital, such as the type and intensity of care, size of the facility or differences in patient populations.

Hospitals also complete accessory reports that indicate the ward types present in their facility, the number of infection preventionists and hospital characteristics (including number of beds). This information is summarized in Table 4.1.1.

NHSN contains certain basic error checks that help to ensure that the information reported into the system is valid. PADOH also reviews the information submitted by each Pennsylvania hospital on a quarterly basis to spot unusual patterns or information that might suggest reporting errors or incomplete reporting. Each hospital receives a data integrity verification (DIV) report every 90 days that includes a list of any questionable reports submitted in the preceding quarter. The hospital is then given 30 days to review and correct the information before the data are considered locked down for analytical purposes. In 2011, PADOH also initiated on-site auditing procedures for selected hospitals to further determine the accuracy of the information reported in NHSN. The auditing process focused on the benchmarking categories of CAUTIs, CLABSIs and SSIs, in order to identify inaccurately reported infections and unreported infections.

Act 52 requires PADOH to: (1) assess overall trends in HAIs in Pennsylvania, (2) compare the rates of HAIs in Pennsylvania to the rates elsewhere in the country, and (3) compare the occurrence of HAIs between hospitals and over time in each hospital. To assess overall HAI trends in Pennsylvania, PADOH produces summary statistics on the patterns of HAIs by category, the overall rates of HAIs and the rates by category. Information is also provided on the pathogens causing HAIs, with an emphasis on infections caused by methicillin-resistant Staphylococcus aureus (MRSA), which was a special focus of Act 52. To compare Pennsylvanias rates and patterns of HAIs to the rest of the country, this report uses information contained in the NHSN summary report. NHSN now collects data from more than 5,000 hospitals across the United States and produces the definitive dataset on HAIs.

To compare differences between hospitals, the recommended approach is the use of a standardized infection ratio, or SIR. The SIR is a comparison between the reported occurrence (the **observed** number of infections) of a specific HAI (e.g., CAUTI or CLABSI) in a hospital to the number that would be predicted to occur in that hospital if the hospitals rate was identical to the statewide HAI rate for that infection type. If a hospital reported 10 CAUTIs during 2010 and, based on the overall statewide rate of CAUTIs per 1,000 catheter days, we would have predicted only five CAUTIs should occur in that hospital, the SIR would be 10/5 or 2.00. If another hospital reported five CAUTIs and, based on statewide rates, we would have predicted the hospital would have 10 CAUTIs, the SIR would be 5/10 or 0.50. An SIR of 1.00 means the hospital reported exactly the same number of infections as predicted based on statewide rates (i.e., the hospitals rate was exactly the same as the statewide rate). A SIR >1.00 means the hospital reported more infections than predicted, and an SIR <1.00 means the hospital reported fewer infections than predicted.

Differences between hospitals (such as intensity of care or patient populations) may explain why they have differences in their HAI rates. Some hospitals care for sicker patients, and these patients are at higher risk for an HAI with all other factors being equal. To account for such differences, an adjustment is made to the predicted number of infections (the predicted number is adjusted upward for hospitals that provide more complex care and downward for hospitals that provide less complex care). It is difficult to precisely measure complexity of care. Factors that were examined for this purpose for CAUTIs and CLABSIs include device utilization ratio (how often a catheter or central line is used in each hospital, calculated as the number of catheter or central line days divided by the number of patient days), the bed size of the hospital, the geographic location of the hospital (urban or rural), and whether

the hospital is affiliated with a medical school. These factors have been shown in medical literature to influence the likelihood of an HAI as a surrogate for patient population differences or intensity of care. The final risk adjustment model for CAUTIs and CLABSIs incorporates the device utilization ratio (DUR) and medical school affiliation, similar to previous reports. For SSIs, such adjustments are not needed, as information is collected on all patients who underwent a procedure, whether or not an infection subsequently occurred. Adjustment factors for predicting the number of infections used for SSIs include the American Society of Anesthesiology (ASA) score (the patients level of health), duration of the surgical procedure, and whether the operation site was clean or contaminated. Together, these comprise the risk index.

After the SIR is calculated, a determination is made regarding whether any differences seen between hospitals are statistically meaningful. For a small hospital that performs few operative procedures or uses very few catheters or central lines, the level of confidence in the reliability of the calculated rates is lower than for a larger hospital. This is reflected in a calculation known as the confidence interval or CI, for which a lower limit and an upper limit are calculated and displayed. The true SIR for the hospital is found somewhere in between the lower value and the upper value of the confidence interval. In general, the smaller the facility, the wider the confidence interval, meaning our confidence in the calculated rate is low. Larger facilities tend to have narrower confidence intervals, meaning there was more information available to calculate the rates. If the two values in the confidence interval are both <1.00, it means the observed number of infections in that hospital is significantly lower than predicted. If both values in the confidence interval are >1.00, it means there are significantly more infections than predicted. If the confidence interval includes the value of 1.00, it means the observed number of infections is not statistically different than predicted based on statewide rates. Hospitals with a significantly lower number of observed infections are depicted in green in the graphs included in the report; hospitals with a significantly higher number of observed infections are depicted in red in the graphs. Hospitals that are no different than predicted are depicted in yellow in the graphs.

For the section on healthcare worker influenza vaccination, hospitals were asked to voluntarily submit information on the number of healthcare workers in their facility and the number of these workers that were documented to have received influenza vaccine (whether or not the vaccine was administered at the hospital) for the 2011–2012 flu season. The methods for counting vaccination are based on those developed by the National Quality Forum (NQF), which uses three separate categories (hospital employees, licensed independent practioners, and adult volunteers or students) and counts only those present in the hospital for at least 30 days during the flu season. For this report, hospitals submitted healthcare worker vaccination data directly to NHSN. That is the source of vaccination data in this report for the 2012–2013 influenza season.

Manuscript preparation and all analyses were performed using R (version 3.0.2; R Core Team, 2013) and RStudio (version 0.98.600; RStudio Team, 2012).

4. Results

4.1. Hospital Characteristics

In 2012, a total of 249 hospitals reported data on the occurence of healthcare-associated infections to the National Healthcare Safety Network (NHSN) for the entire calendar year. The characteristics of these hospitals are found in Table 4.1.1.

Table 4.1.1: Characteristics of hospitals reporting healthcare-associated infections—Pennsylvania, 2012

		N	%
Facility type	Acute care hospital	160	64.26
	Critical care hospital	13	5.22
	Children's hospital	6	2.41
	Long term acute care	26	10.44
	Psychiatric hospital	25	10.04
	Rehab hospital	19	7.63
Medical school affiliation	Affiliation	77	30.92
	No affiliation	172	69.08
Number of infection preventionists	0	1	0.40
	< 1	7	2.81
	1 to 2	164	65.86
	2 to 3	40	16.06
	3 to 4	13	5.22
	≥ 4	24	9.64
Hospital bed size	≤200	168	67.47
	201-500	65	26.10
	>500	16	6.43

4.2. Overall Patterns of Healthcare-Associated Infections (HAIs)

Among the 249 reporting hospitals, there were a total of 22,654 healthcare-associated infections reported (Table 4.2.1). These HAIs occured over a total of 10,033,090 patient days of care in Pennsylvania hospitals. The number of reported HAIs in 2012 is 0.26 percent lower than in 2011, and the number of patient days in 2012 is 1.75 percent lower than in 2011. The overall rate of HAIs in 2012 is 2.26 HAIs per 1,000 patient days, which is 1.52 percent higher than the rate of 2.22 per 1,000 patient days in 2011; however, the rate of HAIs reported in 2012 is 9.36 percent lower than the rate of 2.5 HAIs per 1,000 patient days since 2009 (the baseline year for Pennsylvania data). These declines translate to **7,100 fewer** healthcare-associated infections having occured in Pennsylvania since 2009.

Table 4.2.1: Healthcare-Associated Infections — Pennsylvania, 2009–2012

Year	Number of HAIs	Number of Patient Days	Rate per 1,000 Patient Days	Percent Decline (prior year)	Percent Decline (since 2009)
2009	25,914	10,402,161	2.49	.	.
2010	23,601	10,289,079	2.29	– 7.92	– 7.92
2011	22,713	10,212,208	2.22	– 3.04	– 10.72
2012	22,654	10,033,090	2.26	1.52	– 9.36

[a] In previous reports, manual changes were made to 2009 patient days based on communication with facility ICPs. In this report, we have chosen to report values in NHSN as entered by the facility. Therefore, 2009 patient day data and any subsequent re-analysis of 2009 data may yield different results.

Among, the 22,654 HAIs that occured in 2012, the most common types are found in Table 4.2.2. Surgical site infections (SSIs) continue to be the most commonly identified category of HAIs, comprising 27.9 percent of all HAIs, followed by urinary tract infections (UTIs) at 22.9 percent and gastrointestingal infections (GI) at 17 percent. Overall, the proportion of each type of HAI relative to the total number of HAIs reported in a given year has remained similar since 2009; however, the proportion of HAIs due to SSIs continues to increase from 24.2 percent in 2009 to 27.9 percent in 2012, while the percentage of reported bloodstream, gastrointestinal and pneumonia infections all dropped by 1 or more percentage points.

Table 4.2.2: Healthcare-Associated Infections—Pennsylvania, 2009–2012

	2009		2010		2011		2012	
Infection Type	n	%	n	%	n	%	n	%
Bone and joint (BJ)	18	0.07	22	0.09	27	0.12	20	0.09
Blood stream infection (BSI)	3,271	12.62	2,611	11.06	2,479	10.91	2,402	10.60
Central nervous system (CNS)	77	0.30	82	0.35	73	0.32	88	0.39
Cardiovascular system (CVS)	96	0.37	104	0.44	103	0.45	106	0.47
Ear, eye, nose and throat (EENT)	603	2.33	647	2.74	741	3.26	724	3.20
Gastrointestinal (GI)	4,848	18.71	4,113	17.43	3,951	17.40	3,856	17.02
Lower respiratory tract (LRI)	869	3.35	806	3.42	865	3.81	880	3.88
Pneumonia (PNEU)	2,888	11.14	2,584	10.95	2,420	10.65	2,182	9.63
Reproductive (REPR)	105	0.41	99	0.42	77	0.34	80	0.35
Surgical site infection (SSI)	6,277	24.22	6,192	26.24	6,113	26.91	6,313	27.87
Skin and soft tissue (SST)	712	2.75	825	3.50	799	3.52	812	3.58
Systemic (SYS)	5	0.02	7	0.03	2	0.01	3	0.01
Urinary tract infection (UTI)	6,145	23.71	5,509	23.34	5,063	22.29	5,188	22.90
All	25,914	100.00	23,601	100.00	22,713	100.00	22,654	100.00

4.2.1. Methicillin-Resistant *Staphylococcus aureus* (MRSA)

Methicillin-resistant *Staphylococcus aureus* (MRSA) continues to be a serious concern in the healthcare setting. Act 52 instituted specific requirements related to MRSA, including screening of high-risk patients on admission. The Department's annual HAI reports have included information on the incidence of MRSA and progress in reducing the burden of this infection in Pennsylvania. Table 4.2.3 shows the total number of HAIs due to MRSA for each type of HAI in 2009 through 2012. There has been little change in the proportion of HAIs due to MRSA by overall proportion or individual category; however, the absolute number of reported HAIs caused by MRSA has steadily declined 9.55 percent, from 2,117 infections in 2009 to 1,675 infections in 2012. This is consistent with the decline in all HAI types reported in Table 4.2.1.

Table 4.2.3: Methicillin resistant *Staphlococcus aureus* Healthcare-Associated Infections — Pennsylvania, 2009–2012

	2009		2010		2011		2012	
Infection Type	MRSA	%	MRSA	%	MRSA	%	MRSA	%
Bone and joint (BJ)	6	33.33	2	9.09	5	18.52	7	35.00
Blood stream infection (BSI)	368	11.25	264	10.11	268	10.81	280	11.66
Central nervous system (CNS)	1	1.30	2	2.44	5	6.85	2	2.27
Cardiovascular system (CVS)	17	17.71	21	20.19	15	14.56	12	11.32
Ear, eye, nose and throat (EENT)	16	2.65	34	5.26	26	3.51	20	2.76
Gastrointestinal (GI)	16	0.33	12	0.29	18	0.46	9	0.23
Lower respiratory tract (LRI)	127	14.61	127	15.76	120	13.87	125	14.20
Pneumonia (PNEU)	343	11.88	288	11.15	278	11.49	192	8.80
Reproductive (REPR)	0	0.00	2	2.02	1	1.30	0	0.00
Surgical site infection (SSI)	943	15.02	880	14.21	857	14.02	805	12.75
Skin and soft tissue (SST)	154	21.63	165	20.00	177	22.15	159	19.58
Systemic (SYS)	1	20.00	0	0.00	0	0.00	0	0.00
Urinary tract infection (UTI)	125	2.03	72	1.31	70	1.38	64	1.23
All	2,117	8.17	1,869	7.92	1,840	8.10	1,675	7.39

4.2.2. HAIs and Unadjusted (Crude) Infection Rates by Facility

Table 4.2.4 presents the overall patterns of HAIs by hospital. Included is the organizational identifying number used by the hospital in the National Healthcare Safety Network (NHSN) system. Of note, some hospitals with separate campuses report HAI data to NHSN separately for each campus and use different NHSN numbers. Other hospitals report such data in merged fashion and use only a single, unified NHSN number.

The hospital name, the number of patient days the hospital reported, the total number of HAIs, the number of HAIs by category and the number of ICP per patient days are also listed in 4.2.4. This information is followed by the crude rate of HAIs per 1,000 patient days. It is important to note that the crude rates are **not** risk-adjusted and therefore should not be used for hospital-to-hospital comparisons. However, unless there is a change in a hospital's status (such as a merger, closure of hospital units or expansion), the crude rate can be used to illustrate trends over time (changes in annual rates). Therefore, such hospital-by-hospital information is included in Appendix A of this report and should allow users of this report to evaluate hospital performance over time.

Table 4.2.4: Hospital-Specific Healthcare-Associated Infections by Year and Type and Hospital-Wide Unadjusted (crude) Infection Rate per 1,000 Patient Days — Pennsylvania, 2010–2012

	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Total	Patient Days	Crude Infection Rate per 1000 Patient Days (95% CI)
ABINGTON MEMORIAL HOSPITAL (11838)													
2012	56	3	46	12	27	1	104	10	137	4	400	141,039	2.84 (2.56– 3.13)
2011	59	1	40	4	51	0	100	5	119	2	381	151,539	2.51 (2.27– 2.78)
2010	65	1	59	3	82	8	113	8	123	8	470	162,085	2.90 (2.64– 3.17)
ADVANCED SURGICAL HOSPITAL (16317)													
2012	0	0	0	0	0	0	2	0	0	0	2	1,263	1.58 (0.19– 5.72)
2011	0	0	0	0	0	0	1	0	0	0	1	1,116	0.90 (0.02– 4.99)
2010	.	.	.	.	.	.	.	.	.	.	.	.	.
ALBERT EINSTEIN MEDICAL CENTER (10585)													
2012	30	6	46	5	8	0	74	19	34	4	226	104,188	2.17 (1.90– 2.47)
2011	73	8	44	4	20	1	94	6	53	5	308	111,995	2.75 (2.45– 3.08)
2010	73	9	66	4	11	0	95	10	53	12	333	120,974	2.75 (2.46– 3.06)
ALBERT EINSTEIN MEDICAL CENTER AT ELKINS PARK (12500)													
2012	4	0	5	0	1	0	14	0	7	0	31	10,144	3.06 (2.08– 4.34)
2011	9	0	6	0	1	0	8	1	5	1	31	10,601	2.92 (1.99– 4.15)
2010	4	1	3	0	1	0	5	0	0	0	14	12,656	1.11 (0.60– 1.86)
ALBERT EINSTEIN MEDICAL CENTER MOSS REHABILITATION (12508)													
2012	1	0	13	0	2	0	0	2	34	0	52	43,005	1.21 (0.90– 1.59)
2011	2	0	7	0	1	0	0	2	30	0	42	40,945	1.03 (0.74– 1.39)
2010	3	0	17	0	0	0	0	2	30	0	52	41,823	1.24 (0.93– 1.63)
ALLEGHENY GENERAL HOSPITAL (10648)													
2012	140	1	181	71	47	0	115	10	51	7	623	131,537	4.74 (4.37– 5.12)
2011	174	2	158	81	36	0	149	12	65	11	688	133,596	5.15 (4.77– 5.55)
2010	153	8	200	62	63	0	179	7	38	7	717	135,673	5.28 (4.90– 5.69)
ALLEGHENY VALLEY HOSPITAL (11842)													
2012	6	6	15	0	2	0	18	3	6	0	56	42,082	1.33 (1.01– 1.73)
2011	6	6	19	0	4	0	25	3	9	1	73	46,228	1.58 (1.24– 1.99)
2010	2	1	28	0	3	0	25	3	13	0	75	50,338	1.49 (1.17– 1.87)
ALLIED SERVICES INSTITUTE OF REHABILITATION (12591)													
2012	1	0	0	0	1	0	0	0	23	0	25	22,151	1.13 (0.73– 1.67)
2011	2	0	1	0	0	0	0	0	16	0	19	20,817	0.91 (0.55– 1.43)
2010	1	0	1	0	0	0	0	0	9	0	11	21,464	0.51 (0.26– 0.92)
ALTOONA REGIONAL HEALTH SYSTEM (10178)													
2012	4	0	3	0	8	0	61	2	13	0	91	82,234	1.11 (0.89– 1.36)
2011	7	0	4	0	12	0	70	3	6	0	102	89,191	1.14 (0.93– 1.39)
2010	7	2	7	0	5	1	66	10	8	0	106	89,928	1.18 (0.97– 1.43)
ARIA HEALTH (11388)													
2012	25	2	30	2	21	0	41	16	61	3	201	108,401	1.85 (1.61– 2.13)
2011	28	4	39	14	37	0	42	7	78	3	252	115,743	2.18 (1.92– 2.46)
2010	31	2	40	15	45	1	43	7	92	2	278	131,905	2.11 (1.87– 2.37)
ARMSTRONG COUNTY MEMORIAL HOSPITAL (12057)													
2012	2	0	4	0	3	0	6	0	6	0	21	32,277	0.65 (0.40– 0.99)
2011	3	0	10	0	3	1	12	0	6	0	35	34,165	1.02 (0.71– 1.42)
2010	4	0	6	0	2	1	4	1	4	0	22	33,954	0.65 (0.41– 0.98)
BARIX CLINICS OF PENNSYLVANIA (12037)													
2012	0	0	0	0	0	0	0	0	0	0	0	539	0.00 (0.00– 6.84)
2011	0	0	0	0	0	0	1	0	0	0	1	661	1.51 (0.04– 8.43)
2010	0	0	0	0	1	0	2	0	0	0	3	882	3.40 (0.70– 9.94)
BARNES-KASSON COUNTY HOSPITAL (12404)													
2012	0	0	0	0	0	0	0	0	0	0	0	4,386	0.00 (0.00– 0.84)
2011	0	0	0	0	0	0	0	0	0	0	0	4,251	0.00 (0.00– 0.87)
2010	0	0	0	0	0	0	0	0	0	0	0	4,933	0.00 (0.00– 0.75)

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Table 4.2.4 – Continued from previous page

	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Total	Patient Days	Crude Infection Rate per 1,000 Patient Days (95% CI)
BELMONT CENTER FOR COMPREHENSIVE TREATMENT (12505)													
2012	0	2	0	0	0	0	0	0	1	0	3	48,168	0.06 (0.01– 0.18)
2011	0	9	0	0	0	0	0	1	0	0	10	47,456	0.21 (0.10– 0.39)
2010	0	3	1	0	0	0	0	2	1	0	7	49,557	0.14 (0.06– 0.29)
BERWICK HOSPITAL CENTER (11442)													
2012	0	0	1	0	1	0	3	0	1	1	7	12,578	0.56 (0.22– 1.15)
2011	2	0	0	1	2	0	1	0	2	0	8	14,647	0.55 (0.24– 1.08)
2010	0	0	0	1	0	0	4	0	2	0	7	15,376	0.46 (0.18– 0.94)
BRADFORD REGIONAL MEDICAL CENTER (12361)													
2012	0	0	4	0	5	0	1	4	0	0	14	12,697	1.10 (0.60– 1.85)
2011	0	0	3	0	2	0	3	3	1	0	12	11,423	1.05 (0.54– 1.84)
2010	1	0	4	0	6	0	1	0	5	0	17	11,429	1.49 (0.87– 2.38)
BRANDYWINE HOSPITAL (11979)													
2012	3	0	4	0	14	0	19	0	19	0	59	37,089	1.59 (1.21– 2.05)
2011	4	0	6	0	12	0	19	0	11	0	52	37,170	1.40 (1.04– 1.83)
2010	4	0	9	0	10	0	19	0	12	0	54	25,194	2.14 (1.61– 2.80)
BROOKE GLEN BEHAVIORAL HOSPITAL (12623)													
2012	0	1	0	0	0	0	0	0	0	0	1	34,344	0.03 (0.00– 0.16)
2011	0	0	0	0	0	0	0	0	0	0	0	31,602	0.00 (0.00– 0.12)
2010	0	1	10	0	0	0	0	0	0	0	11	45,655	0.24 (0.12– 0.43)
BROOKVILLE HOSPITAL (12418)													
2012	0	0	1	0	1	0	2	1	3	0	8	6,036	1.33 (0.57– 2.61)
2011	0	0	0	0	0	1	2	0	3	0	6	6,425	0.93 (0.34– 2.03)
2010	1	0	0	0	0	1	0	0	1	0	3	6,307	0.48 (0.10– 1.39)
BUCKS COUNTY SPECIALTY HOSPITAL (15202)													
2012	0	0	0	0	0	0	7	0	0	0	7	985	7.11 (2.86–14.64)
2011	0	0	0	0	0	0	0	0	0	0	0	739	0.00 (0.00– 4.99)
2010	0	0	0	0	0	0	0	0	0	0	0	380	0.00 (0.00– 9.71)
BUCKTAIL MEDICAL CENTER (12461)													
2012	0	0	2	0	0	0	0	1	0	0	3	1,260	2.38 (0.49– 6.96)
2011	0	0	1	0	0	0	0	0	0	0	1	1,078	0.93 (0.02– 5.17)
2010	0	0	0	0	0	0	0	0	0	0	0	1,264	0.00 (0.00– 2.92)
BUTLER MEMORIAL HOSPITAL (11736)													
2012	10	0	17	2	16	0	75	3	40	1	164	65,912	2.49 (2.12– 2.90)
2011	8	0	11	4	10	1	57	5	20	0	116	67,225	1.73 (1.43– 2.07)
2010	7	2	12	3	22	0	74	4	34	0	158	63,971	2.47 (2.10– 2.89)
CANONSBURG GENERAL HOSPITAL (11586)													
2012	1	0	2	0	0	0	16	1	9	0	29	17,168	1.69 (1.13– 2.43)
2011	1	0	5	0	1	0	6	1	6	1	21	17,798	1.18 (0.73– 1.80)
2010	2	0	8	0	0	0	10	0	1	2	23	18,963	1.21 (0.77– 1.82)
CARLISLE REGIONAL MEDICAL CENTER (11997)													
2012	0	0	0	0	1	0	10	0	1	0	12	20,990	0.57 (0.30– 1.00)
2011	1	0	1	0	0	0	21	0	2	0	25	26,235	0.95 (0.62– 1.41)
2010	1	0	1	0	5	0	33	0	39	0	79	28,397	2.78 (2.20– 3.47)
CHAMBERSBURG HOSPITAL (11913)													
2012	11	0	27	0	16	0	44	5	30	2	135	54,266	2.49 (2.09– 2.94)
2011	6	0	22	0	12	0	62	1	21	0	124	56,846	2.18 (1.81– 2.60)
2010	3	0	3	1	9	0	60	0	33	1	110	52,912	2.08 (1.71– 2.51)
CHARLES COLE MEMORIAL HOSPITAL (11956)													
2012	1	0	0	0	3	0	6	0	7	0	17	10,297	1.65 (0.96– 2.64)
2011	1	0	0	0	1	0	4	0	4	0	10	9,233	1.08 (0.52– 1.99)
2010	1	0	1	0	10	0	4	0	1	0	17	9,535	1.78 (1.04– 2.85)
CHESTER COUNTY HOSPITAL (12016)													
2012	16	2	32	3	9	5	42	2	38	0	149	58,920	2.53 (2.14– 2.97)
2011	10	4	33	6	14	2	30	10	46	1	156	59,845	2.61 (2.21– 3.05)
2010	8	4	20	9	17	4	20	7	41	3	133	58,559	2.27 (1.90– 2.69)

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	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Total	Patient Days	Crude Infection Rate per 1,000 Patient Days (95% CI)
CHESTNUT HILL HOSPITAL (12304)													
2012	5	0	1	0	1	0	7	0	1	0	15	26,818	0.56 (0.31– 0.92)
2011	1	0	6	0	0	0	13	3	4	0	27	27,803	0.97 (0.64– 1.41)
2010	3	0	1	0	3	0	10	0	7	0	24	27,053	0.89 (0.57– 1.32)
CHILDRENS HOME OF PITTSBURGH, THE (12336)													
2012	3	3	0	0	0	0	0	0	2	0	8	5,923	1.35 (0.58– 2.66)
2011	5	3	0	0	0	0	0	3	0	0	11	4,665	2.36 (1.18– 4.22)
2010	2	0	2	0	0	0	0	0	1	0	5	4,581	1.09 (0.35– 2.55)
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)													
2012	103	78	77	71	20	1	73	32	70	10	535	154,870	3.45 (3.17– 3.76)
2011	97	78	73	50	24	1	68	43	45	17	496	150,455	3.30 (3.01– 3.60)
2010	98	24	22	9	19	1	75	22	61	9	340	137,053	2.48 (2.22– 2.76)
CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)													
2012	53	7	34	7	3	0	54	6	11	6	181	84,386	2.14 (1.84– 2.48)
2011	62	7	26	26	11	0	40	8	11	5	196	84,133	2.33 (2.01– 2.68)
2010	75	6	9	14	7	0	16	11	20	8	166	79,661	2.08 (1.78– 2.43)
CHILDRENS INSTITUTE OF PITTSBURGH (12266)													
2012	2	0	0	0	0	0	0	1	0	0	3	11,368	0.26 (0.05– 0.77)
2011	1	0	0	0	0	0	0	4	0	0	5	7,631	0.66 (0.21– 1.53)
2010	6	0	0	0	1	0	0	0	0	0	7	9,990	0.70 (0.28– 1.44)
CLARION HOSPITAL (11654)													
2012	1	1	5	0	6	0	7	1	5	1	27	10,706	2.52 (1.66– 3.67)
2011	0	0	4	0	6	0	11	2	12	0	35	10,903	3.21 (2.24– 4.46)
2010	1	0	4	0	3	0	9	2	10	1	30	11,420	2.63 (1.77– 3.75)
CLARION PSYCHIATRIC CENTER (12454)													
2012	0	19	0	0	0	1	0	11	3	0	34	21,709	1.57 (1.08– 2.19)
2011	0	25	0	0	1	2	0	1	0	0	29	21,714	1.34 (0.89– 1.92)
2010	0	10	0	3	0	0	0	0	0	0	13	18,856	0.69 (0.37– 1.18)
CLARKS SUMMIT STATE HOSPITAL (12051)													
2012	0	13	0	1	0	0	0	2	6	0	22	78,564	0.28 (0.18– 0.42)
2011	0	12	0	0	0	0	0	1	17	0	30	67,128	0.45 (0.30– 0.64)
2010	1	7	0	0	0	0	0	0	25	1	34	76,460	0.44 (0.31– 0.62)
CLEARFIELD HOSPITAL (11843)													
2012	3	0	0	0	0	0	4	0	1	1	9	15,717	0.57 (0.26– 1.09)
2011	0	0	0	0	0	0	5	0	2	0	7	16,613	0.42 (0.17– 0.87)
2010	1	0	1	0	1	0	9	0	6	0	18	19,573	0.92 (0.55– 1.45)
CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)													
2012	59	3	70	20	2	0	63	2	40	1	260	120,230	2.16 (1.91– 2.44)
2011	73	2	62	52	5	0	69	2	62	3	330	121,737	2.71 (2.43– 3.02)
2010	69	3	64	45	7	0	55	0	70	1	314	133,148	2.36 (2.10– 2.63)
COORDINATED HEALTH ORTHOPEDIC HOSPITAL, LLC (11872)													
2012	0	0	0	0	1	0	2	0	4	0	7	3,085	2.27 (0.91– 4.68)
2011	0	0	0	0	1	0	9	0	0	0	10	3,107	3.22 (1.54– 5.92)
2010	0	0	0	0	0	0	7	0	2	0	9	2,994	3.01 (1.37– 5.71)
CORRY MEMORIAL HOSPITAL (12283)													
2012	0	0	1	0	1	0	1	0	0	0	3	3,598	0.83 (0.17– 2.44)
2011	0	0	0	0	0	0	1	0	2	0	3	5,107	0.59 (0.12– 1.72)
2010	0	0	1	0	1	0	1	1	3	0	7	5,177	1.35 (0.54– 2.79)
CRICHTON REHABILITATION CENTER (12273)													
2012	0	0	3	0	0	0	0	0	11	0	14	9,732	1.44 (0.79– 2.41)
2011	1	0	2	0	0	0	0	0	7	0	10	9,740	1.03 (0.49– 1.89)
2010	2	0	4	0	0	0	0	0	9	1	16	9,026	1.77 (1.01– 2.88)
CROZER CHESTER MEDICAL CENTER (11839)													
2012	12	0	31	2	10	1	31	4	23	2	116	74,144	1.56 (1.29– 1.88)
2011	17	2	39	2	20	0	36	1	26	0	143	88,176	1.62 (1.37– 1.91)
2010	31	1	16	1	20	0	30	6	23	1	129	99,590	1.30 (1.08– 1.54)

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Table 4.2.4 – Continued from previous page

	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Total	Patient Days	Crude Infection Rate per 1,000 Patient Days (95% CI)
CROZER CHESTER MEDICAL CENTER SPRINGFIELD (11851)													
2012	0	0	1	0	0	0	2	0	0	0	3	4,316	0.70 (0.14– 2.03)
2011	0	0	2	0	0	0	0	0	1	0	3	5,467	0.55 (0.11– 1.60)
2010	1	0	1	0	0	0	1	0	1	0	4	6,843	0.58 (0.16– 1.50)
CROZER CHESTER MEDICAL CENTER TAYLOR (11932)													
2012	5	0	18	0	2	0	8	3	13	0	49	28,514	1.72 (1.27– 2.27)
2011	9	0	36	0	2	0	15	2	11	0	75	35,178	2.13 (1.68– 2.67)
2010	9	0	16	0	0	0	9	3	6	0	43	38,591	1.11 (0.81– 1.50)
DANVILLE STATE HOSPITAL (11848)													
2012	0	8	3	0	0	0	0	15	10	0	36	58,459	0.62 (0.43– 0.85)
2011	0	11	2	0	1	0	0	15	8	0	37	60,873	0.61 (0.43– 0.84)
2010	0	8	2	0	1	0	0	8	7	1	27	62,294	0.43 (0.29– 0.63)
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)													
2012	6	0	0	0	1	0	23	2	5	0	37	41,967	0.88 (0.62– 1.22)
2011	7	0	14	0	4	0	16	2	13	0	56	48,197	1.16 (0.88– 1.51)
2010	5	0	21	0	7	0	11	1	16	0	61	51,226	1.19 (0.91– 1.53)
DEVEREUX CHILDRENS BEHAVIORAL HEALTH INSTITUTE (12738)													
2012	0	3	0	0	0	0	0	1	3	0	7	8,883	0.79 (0.32– 1.62)
2011	0	12	0	0	0	0	0	0	0	0	12	9,054	1.33 (0.68– 2.32)
2010	0	4	0	0	0	0	0	0	0	0	4	8,705	0.46 (0.13– 1.18)
DIVINE PROVIDENCE HOSPITAL (11743)													
2012	0	0	0	0	0	1	0	0	1	0	2	6,986	0.29 (0.03– 1.03)
2011	0	1	0	0	0	0	0	1	1	0	3	6,529	0.46 (0.09– 1.34)
2010	0	0	0	0	1	0	0	0	1	0	2	5,569	0.36 (0.04– 1.30)
DOYLESTOWN HOSPITAL (10190)													
2012	4	0	32	0	15	1	24	1	29	0	106	50,723	2.09 (1.71– 2.53)
2011	0	3	31	0	15	0	27	0	24	0	100	53,945	1.85 (1.51– 2.25)
2010	4	3	25	2	18	0	31	3	48	0	134	51,572	2.60 (2.18– 3.08)
DUBOIS REGIONAL MEDICAL CENTER (11606)													
2012	1	5	5	2	6	1	19	1	7	0	47	40,601	1.16 (0.85– 1.54)
2011	6	4	16	2	8	2	26	3	10	0	77	41,223	1.87 (1.47– 2.33)
2010	4	5	27	2	8	1	19	1	4	1	72	43,098	1.67 (1.31– 2.10)
EAGLEVILLE HOSPITAL (12965)													
2012	0	3	2	0	0	0	0	1	0	0	6	17,781	0.34 (0.12– 0.73)
2011	0	0	0	0	0	0	0	0	0	0	0	6,561	0.00 (0.00– 0.56)
2010	0	0	0	0	0	0	0	0	0	0	0	3,797	0.00 (0.00– 0.97)
EASTERN REGIONAL MEDICAL CENTER (12348)													
2012	45	0	13	1	28	0	34	4	19	0	144	16,417	8.77 (7.40–10.33)
2011	21	1	26	5	21	0	12	1	16	0	103	13,007	7.92 (6.46– 9.60)
2010	18	1	11	1	19	0	11	6	11	1	79	11,255	7.02 (5.56– 8.75)
EASTON HOSPITAL (11929)													
2012	6	3	16	8	15	1	35	5	29	3	121	45,205	2.68 (2.22– 3.20)
2011	4	3	23	7	19	0	48	7	34	4	149	48,864	3.05 (2.58– 3.58)
2010	28	4	11	7	22	0	50	9	34	7	172	50,269	3.42 (2.93– 3.97)
EDGEWOOD SURGICAL HOSPITAL (12552)													
2012	0	0	0	0	0	0	0	0	0	0	0	367	0.00 (0.00–10.05)
2011	0	0	0	0	0	0	0	0	0	0	0	373	0.00 (0.00– 9.89)
2010	0	0	0	0	0	0	0	0	0	0	0	376	0.00 (0.00– 9.81)
ELK REGIONAL HEALTH CENTER (11859)													
2012	0	0	10	0	3	0	9	2	3	0	27	14,143	1.91 (1.26– 2.78)
2011	0	6	6	0	0	0	6	7	1	1	27	14,320	1.89 (1.24– 2.74)
2010	0	1	14	0	7	0	7	8	3	0	40	15,030	2.66 (1.90– 3.62)
ELLWOOD CITY HOSPITAL (11779)													
2012	0	1	2	0	7	0	4	1	2	0	17	9,518	1.79 (1.04– 2.86)
2011	0	0	1	0	5	0	1	0	7	0	14	11,686	1.20 (0.65– 2.01)
2010	0	0	1	0	9	0	0	2	11	0	23	11,683	1.97 (1.25– 2.95)

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Table 4.2.4 – Continued from previous page

	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Total	Patient Days	Crude Infection Rate per 1,000 Patient Days (95% CI)
ENDLESS MOUNTAINS HEALTH SYSTEMS (11817)													
2012	0	0	0	0	0	0	0	0	0	0	0	3,440	0.00 (0.00– 1.07)
2011	0	0	0	0	0	0	1	0	0	0	1	3,542	0.28 (0.01– 1.57)
2010	0	0	0	0	0	0	2	0	0	0	2	3,421	0.58 (0.07– 2.11)
EPHRATA COMMUNITY HOSPITAL (11764)													
2012	2	0	12	0	6	0	21	0	8	0	49	25,852	1.90 (1.40– 2.51)
2011	1	1	3	0	8	1	15	1	6	0	36	28,104	1.28 (0.90– 1.77)
2010	3	0	10	0	5	1	20	2	11	0	52	29,198	1.78 (1.33– 2.34)
EVANGELICAL COMMUNITY HOSPITAL (11701)													
2012	2	2	2	0	3	0	43	4	11	0	67	21,725	3.08 (2.39– 3.92)
2011	0	1	2	3	7	0	35	0	10	0	58	21,474	2.70 (2.05– 3.49)
2010	1	0	10	0	3	0	34	1	4	0	53	19,122	2.77 (2.08– 3.63)
EXCELA HEALTH FRICK HOSPITAL (11639)													
2012	2	0	5	0	1	0	3	1	4	0	16	12,696	1.26 (0.72– 2.05)
2011	2	0	8	0	4	0	3	1	6	0	24	14,998	1.60 (1.03– 2.38)
2010	0	1	11	0	0	0	2	1	2	0	17	15,584	1.09 (0.64– 1.75)
EXCELA HEALTH LATROBE HOSPITAL (11651)													
2012	4	0	8	1	6	0	18	1	16	0	54	24,746	2.18 (1.64– 2.85)
2011	10	1	8	1	7	0	23	1	13	0	64	28,678	2.23 (1.72– 2.85)
2010	6	0	10	0	2	0	28	3	6	0	55	30,030	1.83 (1.38– 2.38)
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)													
2012	16	0	15	0	13	0	39	5	30	1	119	87,500	1.36 (1.13– 1.63)
2011	11	3	22	1	10	0	33	0	27	0	107	94,631	1.13 (0.93– 1.37)
2010	8	1	20	2	16	0	40	11	37	3	138	95,320	1.45 (1.22– 1.71)
FAIRMOUNT BEHAVIORAL HEALTH SYSTEM (12565)													
2012	0	3	0	0	0	0	0	2	1	0	6	78,553	0.08 (0.03– 0.17)
2011	0	31	0	0	0	4	0	3	0	0	38	41,349	0.92 (0.65– 1.26)
2010	0	104	0	0	0	12	0	7	0	0	123	48,188	2.55 (2.12– 3.05)
FIRST HOSPITAL OF WYOMING VALLEY (12050)													
2012	0	0	0	0	0	0	0	0	0	0	0	33,278	0.00 (0.00– 0.11)
2011	0	0	0	0	0	0	0	0	0	0	0	33,733	0.00 (0.00– 0.11)
2010	0	0	0	0	0	0	0	0	0	0	0	32,369	0.00 (0.00– 0.11)
FORBES REGIONAL HOSPITAL (11265)													
2012	17	1	60	3	12	1	46	3	38	1	182	84,685	2.15 (1.85– 2.49)
2011	16	0	68	1	13	0	41	1	24	1	165	85,996	1.92 (1.64– 2.23)
2010	13	0	49	4	23	0	44	8	23	5	169	79,998	2.11 (1.81– 2.46)
FOUNDATIONS BEHAVIORAL HEALTH (12832)													
2012	0	24	2	0	0	0	0	2	0	0	28	16,352	1.71 (1.14– 2.47)
2011	0	13	0	0	0	1	0	2	3	0	19	15,372	1.24 (0.74– 1.93)
2010	0	1	0	0	0	0	0	0	1	0	2	13,331	0.15 (0.02– 0.54)
FRIENDS HOSPITAL (12488)													
2012	0	26	0	2	1	0	0	3	1	0	33	58,046	0.57 (0.39– 0.80)
2011	0	36	0	0	0	0	0	6	3	0	45	52,675	0.85 (0.62– 1.14)
2010	0	0	0	0	0	0	0	0	0	0	0	51,693	0.00 (0.00– 0.07)
FULTON COUNTY MEDICAL CENTER (11939)													
2012	0	0	2	0	1	0	0	2	1	0	6	4,625	1.30 (0.48– 2.82)
2011	0	0	0	0	3	0	0	0	3	0	6	4,065	1.48 (0.54– 3.21)
2010	0	0	0	0	0	0	0	0	0	0	0	4,574	0.00 (0.00– 0.81)
GEISINGER HEALTHSOUTH REHABILITATION HOSPITAL (11993)													
2012	0	0	4	0	0	0	0	0	8	0	12	11,741	1.02 (0.53– 1.79)
2011	0	0	5	0	0	0	0	0	3	0	8	10,978	0.73 (0.31– 1.44)
2010	0	0	3	0	1	0	0	0	2	0	6	10,867	0.55 (0.20– 1.20)
GEISINGER MEDICAL CENTER (11775)													
2012	59	4	59	13	22	0	204	19	114	4	498	142,149	3.50 (3.20– 3.83)
2011	82	3	76	19	34	0	213	19	112	1	559	136,175	4.11 (3.77– 4.46)
2010	56	2	66	6	15	0	176	6	91	2	420	129,984	3.23 (2.93– 3.56)

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Table 4.2.4 – Continued from previous page

	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Total	Patient Days	Crude Infection Rate per 1,000 Patient Days (95% CI)
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)													
2012	15	6	48	10	19	1	120	9	60	3	291	67,922	4.28 (3.81– 4.81)
2011	14	0	40	14	32	0	111	5	67	2	285	64,749	4.40 (3.91– 4.94)
2010	12	0	40	6	29	0	134	8	40	1	270	58,226	4.64 (4.10– 5.22)
GEISINGER-BLOOMSBURG HOSPITAL (12008)													
2012	3	0	0	0	2	0	6	0	0	1	12	12,590	0.95 (0.49– 1.66)
2011	2	0	0	0	2	0	3	0	0	0	7	13,619	0.51 (0.21– 1.06)
2010	0	0	0	0	0	0	9	0	1	1	11	14,502	0.76 (0.38– 1.36)
GEISINGER-COMMUNITY MEDICAL CENTER (11914)													
2012	1	0	2	0	9	0	26	0	6	0	44	54,768	0.80 (0.58– 1.08)
2011	1	0	1	0	14	0	36	0	6	0	58	52,727	1.10 (0.84– 1.42)
2010	4	0	1	0	11	0	37	0	12	0	65	51,767	1.26 (0.97– 1.60)
GETTYSBURG HOSPITAL (11531)													
2012	2	0	5	0	6	0	16	0	2	0	31	18,278	1.70 (1.15– 2.41)
2011	0	0	10	0	2	2	19	0	2	0	35	18,089	1.93 (1.35– 2.69)
2010	0	0	13	0	4	0	8	0	4	0	29	17,456	1.66 (1.11– 2.39)
GNADEN HUETTEN MEMORIAL HOSPITAL (12241)													
2012	3	8	9	0	4	2	10	1	22	0	59	18,176	3.25 (2.47– 4.19)
2011	1	4	3	0	3	0	6	2	13	0	32	16,886	1.90 (1.30– 2.68)
2010	1	5	2	0	1	0	9	1	7	1	27	16,243	1.66 (1.10– 2.42)
GOOD SHEPHERD PENN PARTNERS (13929)													
2012	22	0	16	22	7	0	0	1	26	0	94	9,813	9.58 (7.74–11.72)
2011	22	0	11	15	1	0	0	2	4	0	55	8,537	6.44 (4.85– 8.39)
2010	9	0	47	15	1	0	0	6	18	2	98	8,874	11.04 (8.97–13.46)
GOOD SHEPHERD SPECIALTY HOSPITAL (11887)													
2012	8	1	9	13	9	0	0	4	36	0	80	9,982	8.01 (6.35– 9.97)
2011	9	0	6	0	0	0	0	3	12	0	30	10,551	2.84 (1.92– 4.06)
2010	15	1	4	1	0	0	0	1	17	2	41	10,503	3.90 (2.80– 5.30)
GRAND VIEW HOSPITAL (11847)													
2012	7	0	5	0	8	0	14	0	26	0	60	40,826	1.47 (1.12– 1.89)
2011	7	2	21	0	46	0	21	2	35	0	134	42,899	3.12 (2.62– 3.70)
2010	7	2	18	0	28	0	20	1	22	0	98	41,631	2.35 (1.91– 2.87)
GROVE CITY MEDICAL CENTER (11722)													
2012	0	0	4	0	0	0	6	0	1	0	11	8,181	1.34 (0.67– 2.41)
2011	0	0	5	0	1	0	5	0	0	0	11	7,906	1.39 (0.69– 2.49)
2010	1	0	8	0	2	0	4	1	3	0	19	7,396	2.57 (1.55– 4.01)
HAHNEMANN UNIVERSITY HOSPITAL (11437)													
2012	24	14	76	5	23	1	89	15	30	0	277	115,028	2.41 (2.13– 2.71)
2011	46	6	75	7	16	0	54	10	44	4	262	127,259	2.06 (1.82– 2.32)
2010	49	0	39	2	5	1	60	11	33	3	203	123,052	1.65 (1.43– 1.89)
HANOVER HOSPITAL (11899)													
2012	6	0	10	0	9	0	26	0	22	3	76	24,815	3.06 (2.41– 3.83)
2011	0	0	23	1	8	0	20	3	27	0	82	25,152	3.26 (2.59– 4.05)
2010	6	0	17	0	6	0	26	1	20	1	77	26,527	2.90 (2.29– 3.63)
HAVEN BEHAVIORAL HOSPITAL OF EASTERN PENNSYLVANIA (14471)													
2012	0	0	0	0	0	0	0	0	1	0	1	13,574	0.07 (0.00– 0.41)
2011	0	0	0	0	0	0	0	0	0	0	0	7,714	0.00 (0.00– 0.48)
2010	0	0	0	0	0	0	0	0	0	0	0	7,997	0.00 (0.00– 0.46)
HAZLETON GENERAL HOSPITAL (11878)													
2012	6	0	46	1	8	0	22	0	3	0	86	32,401	2.65 (2.12– 3.28)
2011	5	0	10	0	6	0	10	2	8	0	41	33,295	1.23 (0.88– 1.67)
2010	5	0	23	0	5	0	12	3	42	0	90	34,045	2.64 (2.13– 3.25)
HEALTHSOUTH HARMARVILLE REHABILITATION HOSPITAL (11727)													
2012	1	0	1	0	0	0	0	0	12	0	14	34,709	0.40 (0.22– 0.68)
2011	2	1	5	0	0	0	0	0	29	0	37	31,608	1.17 (0.82– 1.61)
2010	1	0	9	0	3	0	0	0	25	0	38	30,991	1.23 (0.87– 1.68)

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Table 4.2.4 – Continued from previous page

	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Total	Patient Days	Crude Infection Rate per 1,000 Patient Days (95% CI)
HEALTHSOUTH NITTANY VALLEY REHABILITATION HOSPITAL (11667)													
2012	3	0	4	0	0	0	0	3	15	0	25	13,305	1.88 (1.22– 2.77)
2011	1	0	7	0	0	0	0	2	11	0	21	11,594	1.81 (1.12– 2.77)
2010	1	0	4	0	1	0	0	2	6	0	14	12,452	1.12 (0.61– 1.89)
HEALTHSOUTH READING REHABILITATION HOSPITAL (12139)													
2012	0	1	3	1	0	0	0	0	7	0	12	15,333	0.78 (0.40– 1.37)
2011	1	0	2	0	0	0	0	0	17	0	20	15,204	1.32 (0.80– 2.03)
2010	0	0	3	0	0	0	0	0	12	0	15	14,813	1.01 (0.57– 1.67)
HEALTHSOUTH REHABILITATION HOSPITAL OF ALTOONA (11903)													
2012	2	0	4	0	2	0	0	6	26	0	40	25,280	1.58 (1.13– 2.15)
2011	1	0	4	0	2	0	0	4	22	0	33	23,971	1.38 (0.95– 1.93)
2010	0	2	7	0	2	0	0	5	26	0	42	22,173	1.89 (1.37– 2.56)
HEALTHSOUTH REHABILITATION HOSPITAL OF ERIE (11810)													
2012	1	0	8	0	0	0	0	0	2	0	11	22,729	0.48 (0.24– 0.87)
2011	1	0	1	0	4	0	0	0	3	0	9	25,219	0.36 (0.16– 0.68)
2010	3	0	13	0	2	0	0	3	4	0	25	26,319	0.95 (0.61– 1.40)
HEALTHSOUTH REHABILITATION HOSPITAL OF MECHANICSBURG (12402)													
2012	2	0	2	0	0	0	0	0	5	0	9	18,430	0.49 (0.22– 0.93)
2011	0	0	2	0	0	0	0	0	9	0	11	16,976	0.65 (0.32– 1.16)
2010	1	0	4	0	3	0	0	0	15	0	23	17,596	1.31 (0.83– 1.96)
HEALTHSOUTH REHABILITATION HOSPITAL OF SEWICKLEY (12066)													
2012	0	0	0	0	0	0	0	0	14	0	14	12,014	1.17 (0.64– 1.96)
2011	0	0	0	0	2	0	0	0	14	0	16	11,046	1.45 (0.83– 2.35)
2010	1	0	4	0	0	0	0	1	12	0	18	9,586	1.88 (1.11– 2.97)
HEALTHSOUTH REHABILITATION HOSPITAL OF YORK (12058)													
2012	1	5	6	1	9	0	0	5	19	0	46	19,635	2.34 (1.72– 3.12)
2011	1	8	20	1	5	0	0	1	34	0	70	20,041	3.49 (2.72– 4.41)
2010	0	1	2	1	1	0	0	3	20	0	28	19,468	1.44 (0.96– 2.08)
HEART OF LANCASTER REGIONAL MEDICAL CENTER (12571)													
2012	1	0	0	0	1	1	21	6	7	0	37	11,050	3.35 (2.36– 4.62)
2011	2	0	0	0	5	6	14	3	10	0	40	10,692	3.74 (2.67– 5.09)
2010	0	0	2	0	2	3	16	1	2	0	26	10,276	2.53 (1.65– 3.71)
HERITAGE VALLEY BEAVER (11831)													
2012	15	0	44	2	22	0	47	7	79	0	216	79,459	2.72 (2.37– 3.11)
2011	24	0	46	1	20	2	37	11	64	2	207	83,343	2.48 (2.16– 2.85)
2010	18	2	43	2	17	1	71	12	45	0	211	86,652	2.44 (2.12– 2.79)
HERITAGE VALLEY SEWICKLEY (10375)													
2012	4	0	20	0	11	0	35	3	31	0	104	44,927	2.31 (1.89– 2.80)
2011	8	0	28	3	8	0	29	1	17	0	94	46,555	2.02 (1.63– 2.47)
2010	3	0	10	0	2	0	39	0	11	0	65	45,426	1.43 (1.10– 1.82)
HIGHLANDS HOSPITAL (11902)													
2012	2	0	4	0	0	0	5	0	0	0	11	11,661	0.94 (0.47– 1.69)
2011	1	1	0	0	0	0	6	0	1	0	9	12,457	0.72 (0.33– 1.37)
2010	0	0	1	0	2	0	2	1	1	0	7	12,273	0.57 (0.23– 1.18)
HOLY REDEEMER HOSPITAL AND MEDICAL CENTER (11973)													
2012	7	0	23	0	10	0	28	5	12	0	85	60,087	1.41 (1.13– 1.75)
2011	3	0	75	0	6	1	19	5	10	0	119	64,189	1.85 (1.54– 2.22)
2010	7	0	31	2	13	2	34	6	16	1	112	64,672	1.73 (1.43– 2.08)
HOLY SPIRIT HOSPITAL (12387)													
2012	9	1	24	3	11	0	36	1	29	1	115	72,802	1.58 (1.30– 1.90)
2011	12	2	32	4	8	0	36	6	38	1	139	73,682	1.89 (1.59– 2.23)
2010	17	4	34	5	29	1	39	5	43	2	179	71,373	2.51 (2.15– 2.90)
HORSHAM CLINIC (12543)													
2012	0	21	0	0	0	1	0	0	19	0	41	63,800	0.64 (0.46– 0.87)
2011	0	21	0	0	0	0	0	0	15	0	36	50,200	0.72 (0.50– 0.99)
2010	0	44	0	4	0	0	0	15	2	0	65	50,538	1.29 (0.99– 1.64)

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Table 4.2.4 – Continued from previous page

	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Total	Patient Days	Crude Infection Rate per 1,000 Patient Days (95% CI)
HOSPITAL OF FOX CHASE CANCER CENTER (12134)													
2012	18	0	16	1	9	0	43	0	33	0	120	22,764	5.27 (4.37– 6.30)
2011	11	0	8	0	6	0	37	0	24	0	86	22,367	3.84 (3.08– 4.75)
2010	5	0	18	0	5	0	38	0	19	0	85	22,646	3.75 (3.00– 4.64)
HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)													
2012	79	34	316	118	146	3	260	61	325	15	1,357	254,736	5.33 (5.05– 5.62)
2011	39	52	232	103	71	2	264	60	235	11	1,069	249,501	4.28 (4.03– 4.55)
2010	41	38	285	103	38	2	230	83	348	13	1,181	251,135	4.70 (4.44– 4.98)
INDIANA REGIONAL MEDICAL CENTER (11759)													
2012	3	0	10	0	7	0	18	1	17	0	56	38,299	1.46 (1.10– 1.90)
2011	3	0	23	0	14	0	12	1	15	0	68	40,201	1.69 (1.31– 2.14)
2010	3	1	16	0	13	0	16	3	12	0	64	39,751	1.61 (1.24– 2.06)
J C BLAIR MEMORIAL HOSP (11724)													
2012	1	2	4	0	9	1	12	3	6	0	38	8,363	4.54 (3.22– 6.24)
2011	1	2	4	0	9	1	15	3	8	0	43	9,767	4.40 (3.19– 5.93)
2010	1	4	3	0	9	0	20	0	20	0	57	10,598	5.38 (4.07– 6.97)
JAMESON MEMORIAL HOSPITAL (11954)													
2012	2	0	21	0	11	0	13	0	4	1	52	39,038	1.33 (0.99– 1.75)
2011	7	0	15	0	6	0	8	0	3	1	40	38,782	1.03 (0.74– 1.40)
2010	6	0	17	0	6	0	13	1	4	2	49	44,114	1.11 (0.82– 1.47)
JEANES HOSPITAL (11459)													
2012	3	0	8	0	0	0	6	0	16	1	34	38,533	0.88 (0.61– 1.23)
2011	3	0	4	1	5	0	12	1	8	0	34	41,037	0.83 (0.57– 1.16)
2010	8	0	11	0	4	0	11	1	15	0	50	42,199	1.18 (0.88– 1.56)
JEFFERSON REGIONAL MEDICAL CENTER (10237)													
2012	13	2	49	3	39	0	75	0	28	4	213	75,632	2.82 (2.45– 3.22)
2011	21	1	33	3	40	0	74	5	30	2	209	83,272	2.51 (2.18– 2.87)
2010	17	6	27	4	42	1	89	8	37	5	236	86,374	2.73 (2.39– 3.10)
JENNERSVILLE REGIONAL HOSPITAL (12337)													
2012	1	0	2	0	3	0	7	0	2	0	15	12,583	1.19 (0.67– 1.97)
2011	1	0	5	0	3	0	3	0	2	0	14	13,563	1.03 (0.56– 1.73)
2010	7	0	3	0	14	1	6	1	11	0	43	13,221	3.25 (2.35– 4.38)
JERSEY SHORE HOSPITAL (11689)													
2012	0	0	0	0	0	0	4	0	0	0	4	4,497	0.89 (0.24– 2.28)
2011	0	0	0	0	1	0	0	0	1	0	2	5,197	0.38 (0.05– 1.39)
2010	0	0	0	0	0	0	2	0	2	0	4	4,527	0.88 (0.24– 2.26)
JOHN HEINZ INSTITUTE OF REHABILITATION (11861)													
2012	3	6	4	3	3	0	0	1	40	0	60	20,244	2.96 (2.26– 3.82)
2011	0	1	9	0	2	0	0	1	24	0	37	21,076	1.76 (1.24– 2.42)
2010	0	0	4	0	9	0	0	0	35	0	48	20,170	2.38 (1.75– 3.16)
KANE COMMUNITY HOSPITAL (12111)													
2012	2	0	6	0	0	0	0	0	1	0	9	4,769	1.89 (0.86– 3.58)
2011	0	0	2	0	3	0	0	0	1	0	6	5,398	1.11 (0.41– 2.42)
2010	0	0	0	0	0	0	0	0	2	0	2	4,608	0.43 (0.05– 1.57)
KENSINGTON HOSPITAL (12609)													
2012	0	0	0	0	0	0	0	1	1	0	2	2,885	0.69 (0.08– 2.50)
2011	1	0	0	0	0	0	0	0	1	0	2	2,751	0.73 (0.09– 2.63)
2010	1	0	0	0	0	0	0	0	0	0	1	2,732	0.37 (0.01– 2.04)
KIDSPEACE ORCHARD HILLS CAMPUS (12430)													
2012	0	8	0	0	0	0	0	1	0	0	9	26,389	0.34 (0.16– 0.65)
2011	0	0	0	0	0	0	0	0	0	0	0	25,124	0.00 (0.00– 0.15)
2010	0	2	0	0	0	1	0	0	0	0	3	21,724	0.14 (0.03– 0.40)
KINDRED HOSPITAL — PHILADELPHIA (11832)													
2012	25	0	8	1	1	0	0	2	35	1	73	11,725	6.23 (4.88– 7.83)
2011	24	0	19	6	3	0	0	2	57	0	111	13,457	8.25 (6.79– 9.93)
2010	37	1	8	11	3	0	0	2	56	0	118	14,138	8.35 (6.91–10.00)

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Table 4.2.4 – Continued from previous page

	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Total	Patient Days	Crude Infection Rate per 1,000 Patient Days (95% CI)
KINDRED HOSPITAL — PITTSBURGH (12358)													
2012	10	1	11	16	2	0	0	5	22	1	68	10,309	6.60 (5.12– 8.36)
2011	12	0	4	15	1	0	0	4	11	0	47	10,214	4.60 (3.38– 6.12)
2010	4	0	7	9	1	0	0	3	10	1	35	12,513	2.80 (1.95– 3.89)
KINDRED HOSPITAL — WYOMING VALLEY (12485)													
2012	16	0	2	2	3	0	0	0	16	0	39	8,444	4.62 (3.28– 6.31)
2011	7	0	8	4	14	0	0	6	27	0	66	8,404	7.85 (6.07– 9.99)
2010	7	0	11	0	7	0	0	10	22	0	57	8,431	6.76 (5.12– 8.76)
KINDRED HOSPITAL AT HERITAGE VALLEY (12268)													
2012	4	0	19	2	0	0	0	0	5	0	30	8,898	3.37 (2.27– 4.81)
2011	6	0	8	10	0	0	0	2	15	0	41	8,765	4.68 (3.36– 6.35)
2010	6	0	14	14	0	0	0	1	8	0	43	8,815	4.88 (3.53– 6.57)
KINDRED HOSPITAL EASTON (12007)													
2012	7	0	8	4	0	0	0	1	15	0	35	7,352	4.76 (3.32– 6.62)
2011	8	0	12	3	1	0	0	1	9	0	34	6,982	4.87 (3.37– 6.80)
2010	22	0	9	4	1	0	0	2	11	1	50	7,147	7.00 (5.19– 9.22)
KINDRED HOSPITAL PHILADELPHIA — HAVERTOWN (12908)													
2012	10	0	13	1	2	0	0	2	19	1	48	15,040	3.19 (2.35– 4.23)
2011	11	0	7	0	0	0	0	5	13	0	36	12,225	2.94 (2.06– 4.08)
2010	18	0	0	0	2	0	0	2	14	0	36	12,095	2.98 (2.08– 4.12)
KINDRED HOSPITAL PITTSBURGH — NORTH SHORE (12296)													
2012	4	0	3	15	1	0	0	0	4	0	27	6,882	3.92 (2.59– 5.71)
2011	3	0	0	3	1	0	0	0	2	0	9	8,578	1.05 (0.48– 1.99)
2010	3	0	0	0	0	0	0	0	1	0	4	8,602	0.47 (0.13– 1.19)
KINDRED HOSPITAL SOUTH PHILADELPHIA (11940)													
2012	8	0	2	5	15	0	0	0	8	0	38	9,100	4.18 (2.96– 5.73)
2011	20	2	11	9	21	0	0	2	10	0	75	6,625	11.32 (8.90–14.19)
2010	22	0	2	0	11	0	0	3	20	2	60	7,458	8.05 (6.14–10.36)
KIRKBRIDE CENTER (12624)													
2012	0	2	0	0	0	0	0	4	4	0	10	5,369	1.86 (0.89– 3.43)
2011	0	4	0	0	0	0	0	0	0	0	4	3,593	1.11 (0.30– 2.85)
2010	0	0	0	0	0	0	0	0	0	0	0	7,803	0.00 (0.00– 0.47)
LANCASTER GENERAL HOSPITAL (10183)													
2012	33	0	18	25	32	3	142	20	43	5	321	153,050	2.10 (1.87– 2.34)
2011	39	1	17	12	46	3	157	13	74	14	376	161,796	2.32 (2.09– 2.57)
2010	41	3	15	17	51	4	156	17	64	2	370	153,609	2.41 (2.17– 2.67)
LANCASTER REGIONAL MEDICAL CENTER (12335)													
2012	3	0	0	0	9	0	26	3	25	0	66	28,382	2.33 (1.80– 2.96)
2011	10	0	5	0	10	0	25	2	26	1	79	28,792	2.74 (2.17– 3.42)
2010	5	0	8	0	3	0	15	7	6	1	45	28,064	1.60 (1.17– 2.15)
LANCASTER REHABILITATION HOSPITAL (12628)													
2012	0	0	8	0	0	0	0	0	8	0	16	18,153	0.88 (0.50– 1.43)
2011	0	0	4	0	0	0	0	0	14	0	18	17,607	1.02 (0.61– 1.62)
2010	0	0	1	0	0	0	0	0	20	0	21	17,398	1.21 (0.75– 1.85)
LANSDALE HOSPITAL (12032)													
2012	2	0	0	0	3	0	7	0	2	0	14	20,308	0.69 (0.38– 1.16)
2011	7	0	5	0	3	0	5	0	4	0	24	21,292	1.13 (0.72– 1.68)
2010	2	0	10	0	3	0	4	0	8	0	27	21,572	1.25 (0.82– 1.82)
LEHIGH VALLEY HOSPITAL — MUHLENBERG (11898)													
2012	21	0	25	0	4	0	22	2	21	0	95	49,028	1.94 (1.57– 2.37)
2011	9	0	21	0	2	0	30	0	20	2	84	50,937	1.65 (1.32– 2.04)
2010	31	0	31	0	3	0	26	3	25	1	120	50,646	2.37 (1.96– 2.83)
LEHIGH VALLEY HOSPITAL (11884)													
2012	120	0	119	3	35	1	167	7	145	9	606	222,590	2.72 (2.51– 2.95)
2011	105	0	84	5	47	2	124	2	104	9	482	221,791	2.17 (1.98– 2.38)
2010	86	1	102	0	45	1	120	4	124	13	496	214,368	2.31 (2.11– 2.53)

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Table 4.2.4 – Continued from previous page

	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Total	Patient Days	Crude Infection Rate per 1,000 Patient Days (95% CI)
LEWISTOWN HOSPITAL (11825)													
2012	2	0	7	1	13	1	15	3	4	0	46	25,305	1.82 (1.33– 2.42)
2011	1	0	7	0	4	2	18	0	8	0	40	24,902	1.61 (1.15– 2.19)
2010	1	0	3	0	9	0	19	0	13	0	45	23,437	1.92 (1.40– 2.57)
LIFECARE HOSPITALS OF CHESTER COUNTY (12005)													
2012	6	0	4	0	2	0	0	1	8	0	21	7,658	2.74 (1.70– 4.19)
2011	12	0	12	0	1	0	0	0	7	0	32	8,890	3.60 (2.46– 5.08)
2010	5	0	8	0	2	0	0	0	8	0	23	8,384	2.74 (1.74– 4.12)
LIFECARE HOSPITALS OF MECHANICSBURG (12388)													
2012	5	0	6	0	3	0	0	0	9	0	23	9,277	2.48 (1.57– 3.72)
2011	5	0	2	0	1	0	0	0	12	0	20	11,607	1.72 (1.05– 2.66)
2010	9	0	4	0	3	0	0	1	22	0	39	14,747	2.64 (1.88– 3.62)
LIFECARE HOSPITALS OF PITTSBURGH — ALLE-KISKI CAMPUS (18955)													
2012	1	0	0	0	0	0	0	0	1	0	2	6,811	0.29 (0.04– 1.06)
2011	1	0	3	0	1	0	0	0	10	0	15	7,254	2.07 (1.16– 3.41)
2010	.	.	.	.	.	.	.	.	.	.	.	.	.
LIFECARE HOSPITALS OF PITTSBURGH — MONROEVILLE (12254)													
2012	6	0	6	2	2	0	0	0	13	0	29	12,994	2.23 (1.49– 3.21)
2011	10	0	17	4	0	0	0	0	19	0	50	14,075	3.55 (2.64– 4.68)
2010	10	0	17	8	3	0	0	0	19	0	57	15,345	3.71 (2.81– 4.81)
LIFECARE HOSPITALS OF PITTSBURGH — SUBURBAN CAMPUS (12385)													
2012	7	0	3	0	0	0	0	0	0	0	10	8,068	1.24 (0.59– 2.28)
2011	9	0	9	0	0	0	0	0	2	0	20	7,155	2.80 (1.71– 4.32)
2010	4	0	12	0	0	0	0	0	6	0	22	6,461	3.41 (2.13– 5.16)
LIFECARE HOSPITALS OF PITTSBURGH (11945)													
2012	8	0	8	0	3	0	0	0	6	0	25	25,487	0.98 (0.63– 1.45)
2011	19	0	19	0	6	0	0	1	5	0	50	27,933	1.79 (1.33– 2.36)
2010	21	1	28	6	13	0	0	1	15	0	85	33,719	2.52 (2.01– 3.12)
LOCK HAVEN HOSPITAL (12097)													
2012	1	0	0	0	0	0	1	0	1	0	3	4,456	0.67 (0.14– 1.97)
2011	0	0	0	0	2	0	2	0	1	0	5	4,158	1.20 (0.39– 2.81)
2010	0	0	1	0	8	0	5	1	3	2	20	4,819	4.15 (2.54– 6.41)
LOWER BUCKS HOSPITAL (12390)													
2012	4	0	0	0	1	1	0	0	6	0	12	30,332	0.40 (0.20– 0.69)
2011	1	0	0	5	2	0	13	0	5	0	26	31,448	0.83 (0.54– 1.21)
2010	5	0	0	0	6	0	10	0	11	0	32	35,488	0.90 (0.62– 1.27)
MAGEE REHAB HOSPITAL (12146)													
2012	1	0	10	0	0	0	0	0	21	0	32	26,781	1.19 (0.82– 1.69)
2011	2	0	10	0	1	0	0	0	60	0	73	28,612	2.55 (2.00– 3.21)
2010	0	0	0	0	0	0	0	0	98	0	98	28,308	3.46 (2.81– 4.22)
MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)													
2012	22	6	30	2	12	1	154	15	21	0	263	85,243	3.09 (2.72– 3.48)
2011	18	7	4	5	17	1	95	7	15	0	169	77,844	2.17 (1.86– 2.52)
2010	22	5	10	14	20	2	91	5	17	2	188	78,301	2.40 (2.07– 2.77)
MAIN LINE HOSPITAL — PAOLI (11750)													
2012	11	1	21	3	19	5	25	1	15	1	102	56,763	1.80 (1.47– 2.18)
2011	6	1	15	3	14	0	33	2	20	2	96	59,968	1.60 (1.30– 1.95)
2010	6	1	13	0	20	0	35	2	25	1	103	57,279	1.80 (1.47– 2.18)
MAIN LINE HOSPITAL BRYN MAWR (11753)													
2012	11	0	36	3	17	0	27	1	24	1	120	71,732	1.67 (1.39– 2.00)
2011	19	0	25	1	29	0	30	3	26	1	134	94,116	1.42 (1.19– 1.69)
2010	23	0	29	3	32	0	36	2	26	2	153	95,295	1.61 (1.36– 1.88)
MAIN LINE HOSPITAL BRYN MAWR REHABILITATION (11417)													
2012	0	0	16	0	5	0	0	0	27	0	48	38,707	1.24 (0.91– 1.64)
2011	1	0	9	2	3	0	0	4	63	0	82	41,448	1.98 (1.57– 2.46)
2010	0	0	17	0	1	0	0	2	35	0	55	43,374	1.27 (0.96– 1.65)

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Table 4.2.4 – Continued from previous page

	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Total	Patient Days	Crude Infection Rate per 1,000 Patient Days (95% CI)
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)													
2012	7	1	27	24	21	1	57	7	39	0	184	76,127	2.42 (2.08– 2.79)
2011	18	10	20	14	25	0	60	1	34	0	182	85,861	2.12 (1.82– 2.45)
2010	22	11	18	19	27	0	57	10	48	1	213	90,598	2.35 (2.05– 2.69)
MEADVILLE MEDICAL CENTER (11583)													
2012	4	6	18	0	6	2	22	5	8	0	71	35,113	2.02 (1.58– 2.55)
2011	2	1	16	1	10	0	19	1	10	0	60	36,634	1.64 (1.25– 2.11)
2010	2	7	12	0	6	1	28	0	21	0	77	36,711	2.10 (1.66– 2.62)
MEMORIAL HOSPITAL (11633)													
2012	2	0	9	1	11	0	41	3	24	2	93	22,194	4.19 (3.38– 5.13)
2011	3	1	9	0	6	1	28	5	23	0	76	23,341	3.26 (2.57– 4.08)
2010	4	0	3	0	11	0	19	1	17	0	55	22,073	2.49 (1.88– 3.24)
MEMORIAL HOSPITAL, INC. TOWANDA (12549)													
2012	0	0	0	0	2	0	4	0	1	0	7	6,544	1.07 (0.43– 2.20)
2011	0	0	0	0	0	0	0	1	0	0	1	4,432	0.23 (0.01– 1.26)
2010	0	0	0	0	1	0	4	0	0	0	5	4,659	1.07 (0.35– 2.50)
MERCY FITZGERALD HOSPITAL (11683)													
2012	11	0	20	5	7	0	32	5	13	0	93	45,719	2.03 (1.64– 2.49)
2011	19	0	14	1	9	0	19	1	20	1	84	47,715	1.76 (1.40– 2.18)
2010	29	0	28	7	12	0	29	0	23	1	129	50,205	2.57 (2.15– 3.05)
MERCY PHILADELPHIA HOSPITAL (11946)													
2012	4	0	8	0	1	0	11	0	2	1	27	40,012	0.67 (0.44– 0.98)
2011	1	0	5	1	0	0	9	1	0	0	17	43,434	0.39 (0.23– 0.63)
2010	3	0	19	3	0	0	5	0	1	1	32	47,304	0.68 (0.46– 0.95)
MERCY SUBURBAN HOSPITAL NORRISTOWN (11952)													
2012	4	0	7	1	7	0	9	3	9	3	43	26,003	1.65 (1.20– 2.23)
2011	6	0	7	0	4	0	21	4	9	3	54	28,748	1.88 (1.41– 2.45)
2010	6	2	5	1	13	0	27	3	10	0	67	30,578	2.19 (1.70– 2.78)
MEYERSDALE COMMUNITY HOSPITAL (11968)													
2012	0	0	0	0	0	0	0	0	2	0	2	1,877	1.07 (0.13– 3.85)
2011	0	0	0	0	0	0	0	0	1	0	1	1,727	0.58 (0.01– 3.23)
2010	0	0	0	0	1	0	0	0	1	0	2	1,735	1.15 (0.14– 4.16)
MID-VALLEY HOSPITAL (11557)													
2012	0	0	0	0	0	0	0	0	0	0	0	4,018	0.00 (0.00– 0.92)
2011	0	0	0	0	0	0	0	0	2	0	2	4,247	0.47 (0.06– 1.70)
2010	0	0	0	0	0	0	1	0	1	0	2	4,584	0.44 (0.05– 1.58)
MILLCREEK COMMUNITY HOSPITAL (12253)													
2012	2	0	0	1	0	0	2	1	14	0	20	22,098	0.91 (0.55– 1.40)
2011	2	0	0	6	0	0	2	2	14	1	27	20,062	1.35 (0.89– 1.96)
2010	0	0	1	1	0	0	1	0	16	0	19	21,824	0.87 (0.52– 1.36)
MILTON S HERSHEY MEDICAL CENTER (11747)													
2012	96	12	114	34	27	0	150	17	156	28	634	143,148	4.43 (4.09– 4.79)
2011	76	22	88	44	31	0	146	11	119	15	552	144,466	3.82 (3.51– 4.15)
2010	77	22	80	17	92	2	143	19	132	15	599	144,877	4.13 (3.81– 4.48)
MINERS MEDICAL CENTER (12295)													
2012	1	0	0	0	0	0	1	0	3	0	5	3,839	1.30 (0.42– 3.04)
2011	0	0	1	0	1	0	1	0	0	1	4	4,420	0.90 (0.25– 2.32)
2010	0	0	0	1	2	0	1	0	3	0	7	4,521	1.55 (0.62– 3.19)
MONONGAHELA VALLEY HOSPITAL (11069)													
2012	10	0	19	0	34	0	34	0	8	0	105	48,871	2.15 (1.76– 2.60)
2011	7	2	14	0	26	0	21	2	18	0	90	51,094	1.76 (1.42– 2.17)
2010	7	1	6	0	29	0	24	0	14	0	81	53,137	1.52 (1.21– 1.89)
MONTGOMERY COUNTY MH/MR EMERGENCY SERVICES, INC. (12287)													
2012	0	0	0	0	0	0	0	0	0	0	0	21,121	0.00 (0.00– 0.17)
2011	0	0	0	0	0	0	0	0	0	0	0	21,680	0.00 (0.00– 0.17)
2010	0	0	0	0	0	0	0	0	0	0	0	21,472	0.00 (0.00– 0.17)

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Table 4.2.4 – Continued from previous page

	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Total	Patient Days	Crude Infection Rate per 1,000 Patient Days (95% CI)
MOSES TAYLOR HOSPITAL (11528)													
2012	6	4	6	1	15	0	22	1	8	0	63	54,019	1.17 (0.90– 1.49)
2011	8	4	5	0	10	2	30	4	11	0	74	57,390	1.29 (1.01– 1.62)
2010	11	11	13	1	24	1	25	3	14	0	103	56,820	1.81 (1.48– 2.20)
MOUNT NITTANY MEDICAL CENTER (11797)													
2012	3	1	22	0	9	0	62	1	38	0	136	50,164	2.71 (2.27– 3.21)
2011	5	1	18	0	9	1	58	0	31	1	124	51,928	2.39 (1.99– 2.85)
2010	6	1	29	0	13	2	53	0	38	0	142	51,043	2.78 (2.34– 3.28)
MUNCY VALLEY HOSPITAL (11748)													
2012	2	0	0	0	0	0	0	0	3	0	5	4,703	1.06 (0.35– 2.48)
2011	1	0	2	0	2	0	2	1	7	0	15	4,785	3.13 (1.75– 5.17)
2010	0	0	2	0	1	0	2	3	5	0	13	4,632	2.81 (1.49– 4.80)
NASON HOSPITAL (11907)													
2012	0	0	0	0	0	0	1	0	3	0	4	8,346	0.48 (0.13– 1.23)
2011	0	0	1	0	1	0	9	0	2	0	13	8,468	1.54 (0.82– 2.63)
2010	0	0	1	0	0	0	5	0	2	0	8	8,793	0.91 (0.39– 1.79)
NAZARETH HOSPITAL (11919)													
2012	16	0	17	2	7	0	21	3	28	2	96	45,817	2.10 (1.70– 2.56)
2011	22	4	20	0	8	0	12	2	28	0	96	46,634	2.06 (1.67– 2.51)
2010	20	2	35	1	11	0	27	6	36	1	139	48,223	2.88 (2.42– 3.40)
NORRISTOWN STATE HOSPITAL (12047)													
2012	0	71	10	1	0	2	0	30	0	0	114	112,213	1.02 (0.84– 1.22)
2011	0	66	1	1	1	6	0	49	5	0	129	125,390	1.03 (0.86– 1.22)
2010	0	48	0	0	0	1	0	42	16	0	107	128,196	0.83 (0.68– 1.01)
OHIO VALLEY GENERAL HOSPITAL (12298)													
2012	1	0	1	0	0	0	3	0	0	0	5	23,943	0.21 (0.07– 0.49)
2011	6	0	9	0	0	0	1	0	5	0	21	21,440	0.98 (0.61– 1.50)
2010	2	0	3	0	1	0	17	6	1	0	30	19,315	1.55 (1.05– 2.22)
OSS ORTHOPAEDIC HOSPITAL (18467)													
2012	0	0	2	0	2	0	29	0	1	0	34	3,888	8.74 (6.06–12.22)
2011	0	0	0	0	0	0	17	0	3	0	20	3,302	6.06 (3.70– 9.35)
2010	.	.	.	.	.	.	.	.	.	.	.	.	.
PALMERTON HOSPITAL (12396)													
2012	0	0	1	0	2	0	3	0	2	0	8	11,321	0.71 (0.31– 1.39)
2011	0	0	1	0	5	0	0	1	0	0	7	11,229	0.62 (0.25– 1.28)
2010	0	0	1	0	1	0	4	0	0	0	6	11,028	0.54 (0.20– 1.18)
PENN PRESBYTERIAN MEDICAL CENTER (11814)													
2012	27	0	13	21	12	0	66	5	40	0	184	62,055	2.97 (2.55– 3.43)
2011	33	1	20	20	10	0	59	4	33	0	180	65,272	2.76 (2.37– 3.19)
2010	20	0	14	10	7	0	44	1	41	0	137	64,014	2.14 (1.80– 2.53)
PENN STATE HERSHEY REHABILITATION LLC (11915)													
2012	1	1	5	1	0	0	0	2	38	0	48	15,851	3.03 (2.23– 4.01)
2011	2	0	5	0	0	0	0	1	26	0	34	14,130	2.41 (1.67– 3.36)
2010	0	0	4	0	0	0	0	0	8	0	12	9,804	1.22 (0.63– 2.14)
PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS (11448)													
2012	47	16	54	9	26	13	149	12	60	1	387	104,403	3.71 (3.35– 4.10)
2011	42	12	73	14	20	9	161	21	59	2	413	129,191	3.20 (2.90– 3.52)
2010	62	22	50	19	34	11	180	8	53	1	440	112,059	3.93 (3.57– 4.31)
PENNSYLVANIA PSYCHIATRIC INSTITUTE (14190)													
2012	0	4	0	0	0	0	0	2	0	0	6	19,892	0.30 (0.11– 0.66)
2011	0	1	0	0	1	0	0	0	1	0	3	20,269	0.15 (0.03– 0.43)
2010	0	0	0	0	1	0	0	0	1	0	2	19,437	0.10 (0.01– 0.37)
PHILHAVEN HOSPITAL (11740)													
2012	0	7	0	0	0	0	0	1	4	0	12	31,017	0.39 (0.20– 0.68)
2011	0	0	0	0	0	0	0	0	0	0	0	28,128	0.00 (0.00– 0.13)
2010	0	0	0	0	0	0	0	0	0	0	0	26,943	0.00 (0.00– 0.14)

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Table 4.2.4 – Continued from previous page

	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Total	Patient Days	Crude Infection Rate per 1,000 Patient Days (95% CI)
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)													
2012	3	0	5	1	9	0	26	0	8	0	52	33,584	1.55 (1.16– 2.03)
2011	3	0	11	0	12	0	24	2	11	1	64	34,445	1.86 (1.43– 2.37)
2010	3	2	6	0	28	1	27	0	10	1	78	34,362	2.27 (1.79– 2.83)
PHYSICIANS CARE SURGICAL HOSPITAL (19630)													
2012	0	0	0	0	0	0	0	0	0	0	0	381	0.00 (0.00– 9.68)
2011	0	0	0	0	0	0	0	0	0	0	0	215	0.00 (0.00–17.16)
2010	.	.	.	.	.	.	.	.	.	.	.	.	.
PINNACLE HEALTH HOSPITALS (10122)													
2012	24	9	78	1	20	0	154	7	73	11	377	156,563	2.41 (2.17– 2.66)
2011	25	5	54	0	22	1	173	18	93	10	401	149,719	2.68 (2.42– 2.95)
2010	17	5	54	0	16	0	189	7	95	11	394	144,537	2.73 (2.46– 3.01)
POCONO MEDICAL CENTER (11772)													
2012	8	0	7	0	8	0	14	3	14	0	54	55,157	0.98 (0.74– 1.28)
2011	8	0	10	0	9	0	43	4	7	0	81	56,600	1.43 (1.14– 1.78)
2010	3	0	8	0	18	0	41	4	13	0	87	51,833	1.68 (1.34– 2.07)
POTTSTOWN MEMORIAL MEDICAL CENTER (11983)													
2012	8	0	3	0	19	0	18	2	13	1	64	42,914	1.49 (1.15– 1.90)
2011	2	0	5	0	4	0	11	1	10	0	33	43,413	0.76 (0.52– 1.07)
2010	1	0	9	0	18	1	20	0	17	0	66	43,283	1.52 (1.18– 1.94)
PUNXSUTAWNEY AREA HOSPITAL (11830)													
2012	1	0	4	0	2	0	6	0	0	0	13	7,111	1.83 (0.97– 3.13)
2011	0	0	5	0	1	0	13	1	3	1	24	7,380	3.25 (2.08– 4.84)
2010	0	0	4	0	1	1	8	0	2	0	16	7,440	2.15 (1.23– 3.49)
READING HOSPITAL AND MEDICAL CENTER (12375)													
2012	47	1	48	12	12	2	136	24	69	13	364	165,967	2.19 (1.97– 2.43)
2011	36	2	63	10	21	2	110	24	85	3	356	158,238	2.25 (2.02– 2.50)
2010	41	9	44	3	14	0	84	21	58	4	278	149,322	1.86 (1.65– 2.09)
REGIONAL HOSPITAL OF SCRANTON (12533)													
2012	2	0	2	0	5	0	12	0	6	0	27	49,636	0.54 (0.36– 0.79)
2011	10	0	8	0	6	0	13	0	8	0	45	43,923	1.02 (0.75– 1.37)
2010	7	0	5	0	8	0	14	3	10	0	47	44,463	1.06 (0.78– 1.41)
RIDDLE MEMORIAL HOSPITAL (11731)													
2012	6	0	6	0	5	0	19	0	16	0	52	47,311	1.10 (0.82– 1.44)
2011	4	3	0	0	5	0	15	0	12	0	39	49,126	0.79 (0.56– 1.09)
2010	7	0	5	0	6	0	29	1	15	1	64	49,708	1.29 (0.99– 1.64)
ROBERT PACKER HOSPITAL (12422)													
2012	31	0	3	9	37	0	37	5	37	1	160	67,861	2.36 (2.01– 2.75)
2011	31	0	0	6	21	0	32	3	20	0	113	63,820	1.77 (1.46– 2.13)
2010	21	0	16	3	7	0	16	3	11	1	78	61,472	1.27 (1.00– 1.58)
ROXBOROUGH MEMORIAL HOSPITAL (11978)													
2012	0	0	1	1	0	0	1	0	0	0	3	25,179	0.12 (0.02– 0.35)
2011	13	0	5	0	3	0	3	1	11	0	36	29,113	1.24 (0.87– 1.71)
2010	12	0	11	1	11	0	5	3	15	0	58	30,472	1.90 (1.45– 2.46)
ROXBURY TREATMENT CENTER (12723)													
2012	0	11	0	0	0	1	0	2	1	0	15	14,253	1.05 (0.59– 1.74)
2011	0	21	0	0	0	1	0	2	0	0	24	33,540	0.72 (0.46– 1.06)
2010	0	10	0	1	0	2	0	5	2	0	20	30,173	0.66 (0.40– 1.02)
SACRED HEART HOSPITAL (11684)													
2012	2	0	8	1	6	0	18	0	8	1	44	32,025	1.37 (1.00– 1.84)
2011	4	1	8	0	1	0	25	2	10	0	51	33,338	1.53 (1.14– 2.01)
2010	5	0	4	0	1	0	24	0	17	0	51	30,395	1.68 (1.25– 2.21)
SCHUYLKILL MEDICAL CENTER — EAST NORWEGIAN STREET (11922)													
2012	5	2	5	0	4	0	17	0	10	0	43	26,766	1.61 (1.16– 2.16)
2011	4	0	8	1	4	0	9	0	5	0	31	30,491	1.02 (0.69– 1.44)
2010	9	0	13	0	4	0	7	2	21	0	56	32,932	1.70 (1.28– 2.21)

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Table 4.2.4 – Continued from previous page

	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Total	Patient Days	Crude Infection Rate per 1,000 Patient Days (95% CI)
SCHUYLKILL MEDICAL CENTER — SOUTH JACKSON STREET (12087)													
2012	5	1	8	0	8	0	25	0	7	1	55	34,712	1.58 (1.19– 2.06)
2011	3	0	1	0	7	0	15	3	4	0	33	37,078	0.89 (0.61– 1.25)
2010	4	1	8	0	2	0	19	0	11	0	45	38,688	1.16 (0.85– 1.56)
SELECT SPECIALITY HOSPITAL — CENTRAL PENNSYLVANIA (YORK) (12334)													
2012	4	0	9	0	1	0	0	1	10	0	25	5,709	4.38 (2.83– 6.46)
2011	1	0	9	0	0	0	0	0	11	0	21	5,387	3.90 (2.41– 5.96)
2010	9	0	4	0	0	0	0	0	12	0	25	5,309	4.71 (3.05– 6.95)
SELECT SPECIALITY HOSPITAL — ERIE (11880)													
2012	4	1	8	2	4	0	0	1	29	0	49	9,699	5.05 (3.74– 6.68)
2011	5	4	16	5	12	0	0	3	42	1	88	10,883	8.09 (6.49– 9.96)
2010	6	0	15	3	6	0	0	2	50	1	83	10,950	7.58 (6.04– 9.40)
SELECT SPECIALITY HOSPITAL — JOHNSTOWN (12299)													
2012	5	0	3	0	2	0	0	1	8	0	19	11,242	1.69 (1.02– 2.64)
2011	6	0	0	0	2	0	0	2	9	0	19	10,110	1.88 (1.13– 2.93)
2010	5	0	14	0	4	0	0	0	5	0	28	10,513	2.66 (1.77– 3.85)
SELECT SPECIALTY HOSPITAL — CENTRAL PA (13921)													
2012	4	0	21	0	1	0	0	2	13	0	41	9,672	4.24 (3.04– 5.75)
2011	6	0	14	0	0	0	0	1	8	0	29	9,728	2.98 (2.00– 4.28)
2010	5	0	22	0	0	0	0	0	4	0	31	7,323	4.23 (2.88– 6.01)
SELECT SPECIALTY HOSPITAL — CENTRAL PENNSYLVANIA (CAMP HILL) (12147)													
2012	7	0	8	1	0	0	0	2	28	0	46	9,567	4.81 (3.52– 6.41)
2011	5	0	9	0	0	0	0	0	13	0	27	8,609	3.14 (2.07– 4.56)
2010	2	0	11	0	0	0	0	0	9	0	22	7,225	3.04 (1.91– 4.61)
SELECT SPECIALTY HOSPITAL — DANVILLE (12123)													
2012	1	0	3	0	0	0	0	0	9	0	13	4,886	2.66 (1.42– 4.55)
2011	4	0	11	0	2	0	0	0	4	0	21	5,168	4.06 (2.52– 6.21)
2010	2	0	9	0	2	0	0	0	4	0	17	5,097	3.34 (1.94– 5.34)
SELECT SPECIALTY HOSPITAL — MCKEESPORT, INC. (12271)													
2012	6	0	10	0	1	0	0	1	4	0	22	7,993	2.75 (1.72– 4.17)
2011	3	0	1	1	0	0	0	1	1	0	7	7,857	0.89 (0.36– 1.84)
2010	10	0	0	0	1	0	0	0	2	0	13	7,001	1.86 (0.99– 3.18)
SELECT SPECIALTY HOSPITAL — PITTSBURGH/UPMC (12009)													
2012	6	0	7	0	4	0	0	1	8	0	26	8,770	2.96 (1.94– 4.34)
2011	12	0	17	1	5	0	0	2	6	0	43	8,138	5.28 (3.82– 7.12)
2010	10	0	17	1	4	0	0	0	9	0	41	7,656	5.36 (3.84– 7.27)
SELECT SPECIALTY HOSPITAL LAUREL HIGHLANDS, INC. (12108)													
2012	7	0	8	1	0	0	0	0	6	0	22	7,337	3.00 (1.88– 4.54)
2011	2	0	6	0	0	0	0	1	3	0	12	7,750	1.55 (0.80– 2.70)
2010	4	0	12	3	0	0	0	0	1	0	20	9,020	2.22 (1.35– 3.42)
SHARON REGIONAL HEALTH SYSTEM (12250)													
2012	2	0	4	0	3	0	9	1	3	0	22	33,922	0.65 (0.41– 0.98)
2011	2	0	30	1	3	0	12	0	6	0	54	37,998	1.42 (1.07– 1.85)
2010	6	1	9	2	6	0	8	5	11	0	48	35,112	1.37 (1.01– 1.81)
SHRINERS HOSPITAL FOR CHILDREN — PHILADELPHIA (12244)													
2012	1	0	3	0	0	0	3	0	5	0	12	4,835	2.48 (1.28– 4.34)
2011	0	0	0	0	0	0	6	0	4	0	10	4,514	2.22 (1.06– 4.07)
2010	0	0	1	1	0	0	2	0	2	0	6	4,863	1.23 (0.45– 2.69)
SOLDIERS & SAILORS MEM HOSPITAL (11688)													
2012	3	0	0	0	2	1	11	1	4	0	22	11,622	1.89 (1.19– 2.87)
2011	1	0	3	0	7	0	10	0	3	1	25	11,733	2.13 (1.38– 3.15)
2010	0	0	6	0	2	1	5	1	2	0	17	12,009	1.42 (0.82– 2.27)
SOMERSET HOSPITAL (12282)													
2012	0	1	3	0	3	0	4	3	5	0	19	17,538	1.08 (0.65– 1.69)
2011	2	0	1	0	1	0	3	0	1	0	8	19,366	0.41 (0.18– 0.81)
2010	0	0	1	0	2	0	3	0	0	0	6	19,768	0.30 (0.11– 0.66)

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Table 4.2.4 – Continued from previous page

	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Total	Patient Days	Crude Infection Rate per 1,000 Patient Days (95% CI)
SOUTHWEST REGIONAL MEDICAL CENTER (11942)													
2012	0	0	0	0	0	0	0	0	3	0	3	14,297	0.21 (0.04– 0.61)
2011	1	0	0	0	0	0	4	0	0	0	5	16,853	0.30 (0.10– 0.69)
2010	1	0	0	0	0	0	2	0	2	0	5	17,904	0.28 (0.09– 0.65)
SOUTHWOOD PSYCHIATRIC HOSPITAL (12453)													
2012	0	20	0	0	0	1	0	3	1	0	25	13,263	1.88 (1.22– 2.78)
2011	0	20	0	1	0	0	0	8	1	0	30	11,388	2.63 (1.78– 3.76)
2010	0	6	0	0	0	0	0	7	0	0	13	9,686	1.34 (0.71– 2.30)
SPECIAL CARE HOSPITAL (12604)													
2012	6	0	5	3	3	0	0	2	19	0	38	13,572	2.80 (1.98– 3.84)
2011	1	0	11	14	1	0	0	0	30	0	57	14,958	3.81 (2.89– 4.94)
2010	3	0	8	36	1	0	0	0	28	0	76	16,248	4.68 (3.69– 5.85)
ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)													
2012	21	20	8	17	3	0	15	6	8	3	101	47,658	2.12 (1.73– 2.58)
2011	27	17	7	15	3	0	16	8	12	2	107	46,423	2.30 (1.89– 2.79)
2010	21	12	7	12	1	0	19	6	11	1	90	41,556	2.17 (1.74– 2.66)
ST. CLAIR MEMORIAL HOSPITAL (10561)													
2012	4	0	77	1	5	1	74	3	20	0	185	83,473	2.22 (1.91– 2.56)
2011	2	1	81	1	15	0	66	4	8	2	180	85,606	2.10 (1.81– 2.43)
2010	5	3	65	2	10	1	77	3	17	0	183	86,799	2.11 (1.81– 2.44)
ST. JOHN VIANNEY HOSPITAL (12548)													
2012	0	1	0	0	0	0	0	2	0	0	3	11,673	0.26 (0.05– 0.75)
2011	0	0	4	0	0	0	0	4	0	0	8	14,231	0.56 (0.24– 1.11)
2010	0	0	0	0	0	0	0	1	0	0	1	12,687	0.08 (0.00– 0.44)
ST. JOSEPH MEDICAL CENTER (11961)													
2012	11	0	10	1	7	0	24	3	14	0	70	37,252	1.88 (1.46– 2.37)
2011	10	0	2	1	4	0	28	0	16	0	61	37,733	1.62 (1.24– 2.08)
2010	7	0	2	0	2	0	19	1	14	0	45	38,065	1.18 (0.86– 1.58)
ST. JOSEPHS HOSPITAL (12438)													
2012	6	0	4	1	6	0	0	0	11	0	28	31,637	0.89 (0.59– 1.28)
2011	20	0	3	0	7	0	1	1	25	0	57	23,411	2.43 (1.84– 3.15)
2010	27	0	8	0	5	0	2	0	22	0	64	22,626	2.83 (2.18– 3.61)
ST. LUKES HOSPITAL ANDERSON CAMPUS (21487)													
2012	6	0	9	1	2	0	4	4	8	0	34	16,294	2.09 (1.45– 2.92)
2011	.	.	.	.	.	.	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.	.	.	.	.	.	.
ST. LUKES HOSPITAL BETHLEHEM (11718)													
2012	39	21	11	49	26	0	81	14	66	7	314	134,196	2.34 (2.09– 2.61)
2011	38	10	75	41	36	1	105	9	104	6	425	142,433	2.98 (2.71– 3.28)
2010	54	9	56	59	49	3	91	18	89	4	432	146,029	2.96 (2.69– 3.25)
ST. LUKES MINERS MEMORIAL HOSPITAL (11784)													
2012	1	0	1	0	1	0	5	2	1	0	11	7,014	1.57 (0.78– 2.81)
2011	0	0	0	0	0	0	2	0	3	0	5	6,390	0.78 (0.25– 1.83)
2010	0	1	4	0	0	0	2	0	2	0	9	6,549	1.37 (0.63– 2.61)
ST. LUKES QUAKERTOWN HOSPITAL (11711)													
2012	2	1	1	0	3	0	5	0	4	0	16	14,938	1.07 (0.61– 1.74)
2011	0	0	4	0	2	0	7	1	3	0	17	15,057	1.13 (0.66– 1.81)
2010	0	0	5	0	2	0	9	2	5	0	23	14,903	1.54 (0.98– 2.32)
ST. MARY MEDICAL CENTER (11885)													
2012	15	1	37	1	19	0	43	5	69	1	191	94,985	2.01 (1.74– 2.32)
2011	15	0	27	1	19	0	30	7	64	2	165	99,643	1.66 (1.41– 1.93)
2010	15	1	43	2	30	0	35	1	76	0	203	99,895	2.03 (1.76– 2.33)
ST. MARY MEDICAL CENTER REHAB (12483)													
2012	1	0	3	0	0	0	0	1	13	0	18	9,315	1.93 (1.15– 3.05)
2011	0	0	2	0	0	0	0	0	15	0	17	8,745	1.94 (1.13– 3.11)
2010	0	0	2	0	0	0	0	0	8	0	10	6,712	1.49 (0.71– 2.74)

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Table 4.2.4 – Continued from previous page

	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Total	Patient Days	Crude Infection Rate per 1,000 Patient Days (95% CI)
ST. VINCENT HEALTH CENTER (11699)													
2012	21	2	51	8	28	0	95	9	56	1	271	76,297	3.55 (3.14– 4.00)
2011	11	3	48	7	30	0	93	7	63	3	265	83,108	3.19 (2.82– 3.60)
2010	21	4	45	11	45	0	79	5	86	1	297	90,106	3.30 (2.93– 3.69)
SUNBURY COMMUNITY HOSPITAL (12105)													
2012	1	1	0	0	1	0	4	0	0	0	7	6,518	1.07 (0.43– 2.21)
2011	0	3	1	0	6	0	2	0	0	0	12	7,897	1.52 (0.79– 2.65)
2010	0	4	0	0	1	0	4	1	0	0	10	7,978	1.25 (0.60– 2.31)
SURGICAL INSTITUTE OF READING (12535)													
2012	0	0	0	0	0	0	4	0	5	0	9	2,585	3.48 (1.59– 6.61)
2011	0	0	0	0	0	0	3	0	1	0	4	2,646	1.51 (0.41– 3.87)
2010	0	0	0	0	0	0	6	0	1	0	7	2,962	2.36 (0.95– 4.87)
SURGICAL SPECIALTY CENTER AT COORDINATED HEALTH, THE (15259)													
2012	0	0	0	0	0	0	5	0	0	0	5	2,052	2.44 (0.79– 5.69)
2011	0	0	0	0	0	0	2	0	1	0	3	1,913	1.57 (0.32– 4.58)
2010	0	0	0	0	0	0	6	0	0	0	6	1,611	3.72 (1.37– 8.11)
TEMPLE UNIVERSITY HOSPITAL (12382)													
2012	27	2	21	18	50	0	62	10	67	2	259	152,814	1.69 (1.49– 1.91)
2011	62	3	46	16	65	0	60	9	69	0	330	145,364	2.27 (2.03– 2.53)
2010	108	2	72	36	64	1	78	8	65	4	438	141,832	3.09 (2.81– 3.39)
THE GOOD SAMARITAN HOSPITAL (11712)													
2012	7	0	11	0	4	0	14	1	26	0	63	39,790	1.58 (1.22– 2.03)
2011	4	1	16	2	9	0	14	5	25	1	77	42,849	1.80 (1.42– 2.25)
2010	11	1	22	3	13	0	20	8	26	4	108	41,180	2.62 (2.15– 3.17)
THE GOOD SHEPHERD REHABILITATION HOSPITAL (11896)													
2012	4	7	10	7	8	0	0	7	44	0	87	28,461	3.06 (2.45– 3.77)
2011	4	1	3	0	1	0	0	4	24	0	37	29,920	1.24 (0.87– 1.70)
2010	4	1	9	0	0	0	0	4	19	0	37	24,553	1.51 (1.06– 2.08)
THE MEADOWS PSYCHIATRIC CENTER (12156)													
2012	0	0	0	0	0	0	0	0	0	0	0	32,072	0.00 (0.00– 0.12)
2011	0	21	0	3	1	0	0	2	5	0	32	34,542	0.93 (0.63– 1.31)
2010	0	33	1	2	1	3	0	19	25	1	85	34,542	2.46 (1.97– 3.04)
THE WASHINGTON HOSPITAL (11460)													
2012	4	1	23	0	8	0	36	1	16	0	89	54,486	1.63 (1.31– 2.01)
2011	3	0	22	1	21	0	31	0	28	0	106	62,228	1.70 (1.39– 2.06)
2010	0	0	27	0	23	0	37	1	24	0	112	65,063	1.72 (1.42– 2.07)
THE WESTERN PENNSYLVANIA HOSPITAL (11864)													
2012	31	4	32	10	14	0	31	2	19	0	143	53,366	2.68 (2.26– 3.16)
2011	32	1	24	11	1	0	17	1	10	0	97	41,736	2.32 (1.88– 2.84)
2010	65	9	65	20	26	0	57	2	33	1	278	88,109	3.16 (2.80– 3.55)
THOMAS JEFFERSON UNIV HOSP - METHODIST (12017)													
2012	12	2	45	7	42	0	20	8	41	1	178	48,112	3.70 (3.18– 4.28)
2011	28	1	29	2	55	0	17	7	42	0	181	46,785	3.87 (3.33– 4.48)
2010	13	0	9	2	38	0	21	5	48	0	136	48,856	2.78 (2.34– 3.29)
THOMAS JEFFERSON UNIV HOSPITAL (11506)													
2012	106	10	145	17	72	7	306	19	177	10	869	199,428	4.36 (4.07– 4.66)
2011	56	1	130	0	64	0	253	6	203	2	715	192,353	3.72 (3.45– 4.00)
2010	33	0	155	0	88	0	272	0	219	0	767	176,486	4.35 (4.04– 4.66)
TITUSVILLE AREA HOSPITAL (11738)													
2012	0	1	0	0	0	0	7	0	4	0	12	7,565	1.59 (0.82– 2.77)
2011	0	0	0	0	0	0	5	2	0	0	7	7,822	0.89 (0.36– 1.84)
2010	0	0	0	0	2	0	2	0	0	0	4	8,438	0.47 (0.13– 1.21)
TORRANCE STATE HOSPITAL (12091)													
2012	1	11	0	0	3	0	0	18	12	0	45	113,753	0.40 (0.29– 0.53)
2011	0	7	1	0	1	1	0	20	12	1	43	109,720	0.39 (0.28– 0.53)
2010	0	8	0	2	1	1	0	12	13	0	37	103,015	0.36 (0.25– 0.50)

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Table 4.2.4 – Continued from previous page

	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Total	Patient Days	Crude Infection Rate per 1,000 Patient Days (95% CI)
TROY COMMUNITY HOSPITAL (12018)													
2012	2	0	0	1	6	0	0	2	8	0	19	7,782	2.44 (1.47– 3.81)
2011	1	0	1	2	1	0	1	2	4	0	12	7,358	1.63 (0.84– 2.85)
2010	0	0	5	1	0	0	0	0	2	0	8	7,457	1.07 (0.46– 2.11)
TYLER MEMORIAL HOSPITAL (11829)													
2012	0	0	1	0	0	0	0	0	4	0	5	5,258	0.95 (0.31– 2.22)
2011	0	0	0	1	3	0	4	2	8	0	18	6,054	2.97 (1.76– 4.70)
2010	0	0	0	0	2	0	4	0	4	0	10	6,047	1.65 (0.79– 3.04)
TYRONE HOSPITAL (12717)													
2012	0	0	1	0	0	0	5	0	1	0	7	2,809	2.49 (1.00– 5.13)
2011	0	0	0	0	0	0	4	1	0	0	5	2,672	1.87 (0.61– 4.37)
2010	0	0	0	0	0	0	3	0	1	0	4	2,567	1.56 (0.42– 3.99)
UNIONTOWN HOSPITAL (10441)													
2012	4	0	24	0	12	2	30	0	13	0	85	39,143	2.17 (1.73– 2.69)
2011	3	0	32	1	10	0	29	1	11	0	87	42,132	2.06 (1.65– 2.55)
2010	2	0	37	0	12	0	34	3	24	1	113	46,143	2.45 (2.02– 2.94)
UPMC BEDFORD (11680)													
2012	1	0	2	0	2	0	6	0	2	0	13	6,670	1.95 (1.04– 3.33)
2011	0	0	0	0	0	0	6	0	3	0	9	6,685	1.35 (0.62– 2.56)
2010	0	0	1	0	2	0	6	0	1	0	10	6,977	1.43 (0.69– 2.64)
UPMC HAMOT (11725)													
2012	16	1	40	2	49	0	108	10	63	0	289	87,032	3.32 (2.95– 3.73)
2011	13	4	33	2	38	0	105	5	43	1	244	87,580	2.79 (2.45– 3.16)
2010	13	1	59	3	45	0	84	16	92	2	315	81,512	3.86 (3.45– 4.32)
UPMC HORIZON (11675)													
2012	1	0	9	0	28	0	25	0	11	0	74	34,860	2.12 (1.67– 2.66)
2011	2	0	2	0	30	0	24	4	6	0	68	34,976	1.94 (1.51– 2.46)
2010	3	0	8	0	22	0	32	2	7	0	74	40,285	1.84 (1.44– 2.31)
UPMC MCKEESPORT (11707)													
2012	10	0	10	1	17	0	13	6	30	0	87	56,499	1.54 (1.23– 1.90)
2011	6	0	24	0	30	1	26	6	36	0	129	64,473	2.00 (1.67– 2.38)
2010	9	4	42	1	23	0	29	10	40	0	158	62,590	2.52 (2.15– 2.95)
UPMC MERCY (10384)													
2012	33	3	50	2	39	0	131	7	116	4	385	147,425	2.61 (2.36– 2.89)
2011	12	1	28	7	57	0	93	4	93	4	299	144,046	2.08 (1.85– 2.32)
2010	24	1	54	25	80	1	123	10	111	2	431	145,652	2.96 (2.69– 3.25)
UPMC NORTHWEST (11837)													
2012	2	0	10	0	3	0	14	1	18	0	48	34,147	1.41 (1.04– 1.86)
2011	2	0	7	0	4	0	13	0	21	0	47	35,676	1.32 (0.97– 1.75)
2010	1	0	4	0	1	0	12	1	13	0	32	37,231	0.86 (0.59– 1.21)
UPMC PASSAVANT (11242)													
2012	23	1	48	16	24	2	130	10	67	1	322	102,897	3.13 (2.80– 3.49)
2011	15	0	67	8	48	0	138	5	74	0	355	105,433	3.37 (3.03– 3.74)
2010	33	2	67	9	44	0	107	3	93	0	358	96,673	3.70 (3.33– 4.11)
UPMC PRESBYTERIAN SHADYSIDE — PRESBYTERIAN (10348)													
2012	111	8	116	21	148	0	264	14	308	15	1,005	227,985	4.41 (4.14– 4.69)
2011	95	13	150	27	198	0	315	17	193	13	1,021	224,769	4.54 (4.27– 4.83)
2010	96	10	184	24	161	0	283	17	202	8	985	222,461	4.43 (4.16– 4.71)
UPMC PRESBYTERIAN SHADYSIDE — SHADYSIDE (10118)													
2012	36	12	123	8	119	0	216	17	89	1	621	157,128	3.95 (3.65– 4.28)
2011	38	15	189	6	114	0	183	15	99	8	667	170,109	3.92 (3.63– 4.23)
2010	29	16	174	2	79	0	150	22	77	2	551	164,107	3.36 (3.08– 3.65)
UPMC PRESBYTERIAN SHADYSIDE — WPIC (13702)													
2012	2	23	2	0	1	0	0	3	10	0	41	104,169	0.39 (0.28– 0.53)
2011	3	14	3	0	3	0	0	5	20	0	48	102,650	0.47 (0.34– 0.62)
2010	1	1	2	0	2	0	0	2	17	0	25	102,693	0.24 (0.16– 0.36)

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Table 4.2.4 – Continued from previous page

	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Total	Patient Days	Crude Infection Rate per 1,000 Patient Days (95% CI)
UPMC ST MARGARET (11561)													
2012	10	2	32	0	13	0	46	2	43	0	148	75,976	1.95 (1.65– 2.29)
2011	12	1	19	1	23	0	59	3	25	0	143	79,022	1.81 (1.53– 2.13)
2010	10	1	24	0	26	0	51	2	35	1	150	76,041	1.97 (1.67– 2.31)
VALLEY FORGE MEDICAL CENTER AND HOSPITAL (12029)													
2012	0	0	0	0	0	0	0	0	0	0	0	16,874	0.00 (0.00– 0.22)
2011	0	0	0	0	0	0	0	0	0	0	0	17,024	0.00 (0.00– 0.22)
2010	0	0	0	0	0	0	0	0	0	0	0	16,659	0.00 (0.00– 0.22)
WARREN GENERAL HOSPITAL (12216)													
2012	2	0	3	0	0	1	11	1	2	2	22	13,257	1.66 (1.04– 2.51)
2011	2	0	8	0	4	0	8	0	2	0	24	13,033	1.84 (1.18– 2.74)
2010	0	0	2	0	2	0	7	1	7	0	19	11,870	1.60 (0.96– 2.50)
WARREN STATE HOSPITAL (12081)													
2012	0	0	0	0	0	0	0	0	0	0	0	42,705	0.00 (0.00– 0.09)
2011	0	0	0	0	0	0	0	0	0	0	0	5,042	0.00 (0.00– 0.73)
2010	0	0	0	0	0	0	0	0	0	0	0	65,960	0.00 (0.00– 0.06)
WAYNE MEMORIAL HOSPITAL (12004)													
2012	4	2	6	0	9	1	19	1	11	0	53	18,519	2.86 (2.14– 3.74)
2011	1	1	3	0	11	0	13	0	5	0	34	15,942	2.13 (1.48– 2.98)
2010	0	0	3	0	6	1	6	1	8	0	25	18,141	1.38 (0.89– 2.03)
WAYNESBORO HOSPITAL (11642)													
2012	0	0	0	0	14	0	6	0	2	0	22	9,841	2.24 (1.40– 3.38)
2011	0	0	0	0	2	0	1	0	1	0	4	9,729	0.41 (0.11– 1.05)
2010	0	0	3	0	7	1	5	0	4	0	20	9,970	2.01 (1.23– 3.10)
WERNERSVILLE STATE HOSPITAL (12368)													
2012	0	15	1	0	0	0	0	25	8	0	49	97,099	0.50 (0.37– 0.67)
2011	0	12	1	0	0	0	0	15	8	0	36	97,823	0.37 (0.26– 0.51)
2010	0	10	0	0	0	0	0	13	14	0	37	89,641	0.41 (0.29– 0.57)
WESTFIELD HOSPITAL (12487)													
2012	0	0	0	0	0	0	2	0	0	0	2	1,361	1.47 (0.18– 5.31)
2011	0	0	0	0	0	0	2	0	0	0	2	2,004	1.00 (0.12– 3.61)
2010	0	0	0	0	0	0	1	0	1	0	2	1,823	1.10 (0.13– 3.96)
WILKES-BARRE GENERAL HOSPITAL (11916)													
2012	16	4	40	7	24	1	79	3	64	0	238	88,283	2.70 (2.36– 3.06)
2011	32	3	25	5	37	2	56	5	67	3	235	84,294	2.79 (2.44– 3.17)
2010	29	3	21	5	46	0	80	4	81	3	272	82,205	3.31 (2.93– 3.73)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)													
2012	5	39	20	2	9	3	42	5	45	0	170	53,152	3.20 (2.74– 3.72)
2011	7	10	21	4	15	1	47	9	48	2	164	54,085	3.03 (2.59– 3.53)
2010	9	0	18	6	6	4	43	9	29	0	124	49,673	2.50 (2.08– 2.98)
WINDBER HOSPITAL (12031)													
2012	0	0	0	0	1	0	9	0	6	0	16	7,704	2.08 (1.19– 3.37)
2011	0	0	0	0	1	0	6	0	2	0	9	7,878	1.14 (0.52– 2.17)
2010	1	0	0	0	1	0	8	0	2	0	12	8,114	1.48 (0.76– 2.58)
YORK HOSPITAL (10108)													
2012	23	11	78	55	61	3	128	13	101	4	477	162,496	2.94 (2.68– 3.21)
2011	17	7	89	30	85	8	147	19	112	5	519	175,653	2.95 (2.71– 3.22)
2010	26	5	94	18	87	7	145	8	102	1	493	167,442	2.94 (2.69– 3.22)

4.3. Catheter-Associated Urinary Tract Infections (CAUTIs)

4.3.1. CAUTIs — Statewide Summary

In 2012, urinary tract infections constituted the second most commonly reported category of HAIs in Pennsylvania, with 5,188 (22.90 percent; see Table 4.2.2) occurences. More than half (2,870 or 55.32 percent) of the UTIs were associated with the use of urinary catheters, which are one of the more commonly used medical devices in hospital settings. In 2012, a total of 1,682,014 urinary catheter days (Table 4.3.1) were reported by 230 Pennsylvania hospitals (urinary catheter days ranged from a low of one for the year to a high of 71,097 among the 230 hospitals). The number of hospitals that reported using urinary catheters in 2012 represents 92.37 percent of the 249 hospitals that reported data through NHSN. The 19 with no reported use of urinary catheters are mostly psychiatric or drug and alcohol rehabilitation facilities and can be found in Table 4.3.6.

Table 4.3.1: Summary of Catheter-Associated Urinary Tract Infections — Pennsylvania, 2009–2012

	Number of CAUTI	Urinary Catheter Days	Rate per 1,000 Catheter Days (95%CI)	Percent Change in Rate Prior Year (Since 2009)	Patient Days	Device Utilization Ratio (DUR)	Percent Change in DUR Prior Year (Since 2009)
2009	3,935	1,995,114	1.97 (1.91–2.03)	.	10,402,161	0.19	.
2010	3,245	1,894,709	1.71 (1.65–1.77)	−13.16 (−13.16)	10,289,079	0.18	−3.99 (−3.99)
2011	2,819	1,820,899	1.55 (1.49–1.61)	−9.61 (−21.51)	10,212,208	0.18	−3.17 (−7.03)
2012	2,870	1,682,014	1.71 (1.64–1.77)	10.22 (−13.49)	10,033,090	0.17	−5.98 (−12.59)

The number of urinary catheter days (1,682,014), divided by the total number of patient days (10,033,090) reported in 2012 produces a device utilization ratio (DUR) of 0.17, meaning that a urinary catheter was used 16.76 percent of the time in Pennsylvania's hospitalized patients (Table 4.3.1). As expected, urinary catheter use is highest in critical care units where the sickest patients are receiving care. Catheter use was highest in trauma critical care units (73.22 percent of the time), in surgical intensive care units (72.02 percent of the time) and in cardiothoracic critical care units (66.64 percent of the time).

Among the 230 hospitals that reported any use of urinary catheters, 185 (80.4 percent) of them reported at least one CAUTI while the other 45 (19.6 percent) reported no identified CAUTIs. Pennsylvania's CAUTI rate for 2012 was 1.71 CAUTIs per 1,000 urinary catheter days (Table 4.3.1). This is an increase of 10.22 percent compared to last year's rate of 1.55 CAUTIs per 1,000 urinary catheter days; however, it still represents a 13.49 percent decrease from the baseline rate of 1.97 CAUTIs per 1,000 catheter days reported in 2009. Overall, the rate reductions since 2009 translate to **1,712 fewer** CAUTIs than would have otherwise occurred if the 2009 rate persisted into 2012. This likely under estimates the true impact of prevention efforts because urinary catheter use (DUR) has also decreased a total of 12.59 percent since 2009 (Table 4.3.1).

4.3.2. CAUTIs — By Unit Type

The risk of a CAUTI varies substantially in the different areas of the hospital (Table 4.3.2). Consistent with last year, CAUTI rates for patients in surgical intensive (ICU) or critical care (cc) units (cc:Surgery rate = 2.77 per 1,000 catheter days) and rehabilitation units (w:Rehab rate = 2.60 per 1,000 catheter days) were among the three highest rates reported by facilities in 2012; however, unlike last year, the highest CAUTI rate reported in 2012 was reported from intensive care units caring for burn patients where the infection rate was 3.65. Among locations with at least 1,000 urinary catheter days, labor/delivery post-partum (w:LD_pp), pediatric medical-surgical wards (w:Ped_ms) and adult medical-surgical wards (w:MS) reported the lowest CAUTI rates per 1,000 urinary catheter days (Table 4.3.2).

Table 4.3.2: Catheter-Associated Urinary Tract Infections (CAUTI), Infection Rates per 1,000 Patient Days and Device Utilization Rates (DUR) by Location within Facility—Pennsylvania, 2009–2012

	Number of CAUTI	Urinary Catheter Days	Rate per 1,000 Catheter Days	Patient Days	Device Utilization Ratio — DUR (Cath. Days / Pt. Days)
NICU					
2012	0	.	.	270,917	.
2011	3	.	.	271,973	.
2010	4	.	.	269,940	.
2009	2	.	.	269,141	.
SCA					
2012	58	25,180	2.30	214,677	0.12
2011	68	26,848	2.53	213,907	0.13
2010	52	28,651	1.81	211,508	0.14
2009	72	30,258	2.38	193,468	0.16
Step					
2012	192	120,565	1.59	568,933	0.21
2011	208	132,154	1.57	598,034	0.22
2010	245	141,233	1.73	634,482	0.22
2009	254	136,803	1.86	616,096	0.22
LTAC					
2012	233	107,120	2.18	256,287	0.42
2011	285	121,637	2.34	271,324	0.45
2010	315	132,646	2.37	291,486	0.46
2009	327	139,236	2.35	299,105	0.47
cc:Burn					
2012	15	4,115	3.65	12,251	0.34
2011	6	4,465	1.34	11,135	0.40
2010	8	4,828	1.66	12,225	0.39
2009	11	5,698	1.93	12,389	0.46
cc:CT					
2012	76	58,742	1.29	88,143	0.67
2011	95	66,597	1.43	97,189	0.69
2010	112	68,294	1.64	100,018	0.68
2009	114	69,772	1.63	102,092	0.68
cc:MS					
2012	434	278,507	1.56	444,683	0.63
2011	410	289,168	1.42	447,121	0.65
2010	403	287,004	1.40	439,955	0.65
2009	452	287,116	1.57	435,264	0.66
cc:Med					
2012	148	80,301	1.84	127,491	0.63
2011	100	88,633	1.13	144,364	0.61
2010	136	85,991	1.58	140,201	0.61
2009	161	89,833	1.79	143,532	0.63
cc:Peds					
2012	21	11,447	1.83	58,071	0.20
2011	23	10,992	2.09	57,395	0.19
2010	32	11,788	2.71	55,559	0.21
2009	20	13,549	1.48	55,775	0.24
cc:SpecMed					
2012	96	41,254	2.33	101,137	0.41
2011	73	43,044	1.70	106,767	0.40
2010	114	58,292	1.96	126,836	0.46
2009	162	63,960	2.53	134,101	0.48

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Table 4.3.2 – Continued from previous page

	Number of CAUTI	Urinary Catheter Days	Rate per 1,000 Catheter Days	Patient Days	Device Utilization Ratio (Cath. Days / Pt. Days)
cc:Surgery					
2012	237	85,574	2.77	118,824	0.72
2011	214	89,318	2.40	123,348	0.72
2010	208	85,408	2.44	113,392	0.75
2009	324	90,406	3.58	114,173	0.79
cc:Trauma					
2012	94	38,971	2.41	53,226	0.73
2011	68	41,299	1.65	54,962	0.75
2010	61	42,997	1.42	54,220	0.79
2009	124	42,128	2.94	51,572	0.82
w:Behavior					
2012	8	5,742	1.39	1,735,712	0.00
2011	8	3,940	2.03	1,614,797	0.00
2010	10	5,237	1.91	1,678,564	0.00
2009	7	4,343	1.61	1,579,712	0.00
w:LD_pp					
2012	29	44,400	0.65	372,423	0.12
2011	22	47,479	0.46	382,131	0.12
2010	33	53,289	0.62	382,546	0.14
2009	39	54,282	0.72	399,601	0.14
w:MS					
2012	523	410,465	1.27	2,587,551	0.16
2011	535	457,361	1.17	2,711,996	0.17
2010	726	465,857	1.56	2,753,456	0.17
2009	846	509,454	1.66	2,867,926	0.18
w:Med					
2012	284	159,132	1.78	1,175,387	0.14
2011	260	175,254	1.48	1,210,801	0.14
2010	311	183,034	1.70	1,166,026	0.16
2009	416	195,492	2.13	1,188,519	0.16
w:Newborn					
2012	0	10	0.00	154,922	0.00
2011	0	124	0.00	170,453	0.00
2010	0	233	0.00	168,353	0.00
2009	0	12	0.00	181,102	0.00
w:Ped_ms					
2012	7	5,819	1.20	232,760	0.03
2011	8	7,586	1.05	235,930	0.03
2010	10	8,422	1.19	219,810	0.04
2009	14	9,123	1.53	235,280	0.04
w:Rehab					
2012	125	48,116	2.60	674,745	0.07
2011	165	50,646	3.26	663,495	0.08
2010	168	50,857	3.30	646,213	0.08
2009	208	55,468	3.75	648,117	0.09
w:Surgery					
2012	290	153,012	1.90	784,950	0.19
2011	268	164,354	1.63	825,086	0.20
2010	297	180,648	1.64	824,289	0.22
2009	381	198,181	1.92	875,196	0.23

4.3.3. CAUTIs — By Pathogen

In 2012, hospitals reported a total of 3,225 organisms (or isolates) from 2,870 CAUTIs (some patients had an infection with more than one organism). Consistent with previous years, three pathogens (i.e., *Escherichia coli, Pseudomonas*

aeruginosa, Klebsiella pneumoniae) accounted for the majority (53.55 percent) of isolates cultured from patients with a CAUTI (Table 4.3.3). The 16 organisms listed in Table 4.3.3 account for 92.53 percent of isolates cultured from CAUTIs. The remaining isolates (7.47 percent) cultured from CAUTIs in 2012 are from 55 other pathogens, each indivdiually accounting for less than 1 percent of the total results.

Table 4.3.3: Pathogens Isolated in Catheter-Associated Urinary Tract Infections — Pennsylvania, 2011–2012

	2011		2012	
Pathogen	Count	%	Count	%
Escherichia coli	944	29.77	964	29.89
Pseudomonas aeruginosa	375	11.83	428	13.27
Klebsiella pneumoniae	338	10.66	335	10.39
Enterococcus faecalis	241	7.60	192	5.95
Candida albicans	137	4.32	185	5.74
Proteus mirabilis	189	5.96	179	5.55
Enterococcus spp.	154	4.86	166	5.15
Yeast NOS	92	2.90	128	3.97
Enterobacter cloacae	84	2.65	81	2.51
Staphylococcus aureus	71	2.24	59	1.83
Enterococcus faecium	103	3.25	57	1.77
Klebsiella oxytoca	43	1.36	50	1.55
Enterobacter aerogenes	44	1.39	44	1.36
Candida glabrata	21	0.66	41	1.27
Staphylococcus coagulase negative	35	1.10	40	1.24
Serratia marcescens	21	0.66	35	1.09
Other	279	8.80	241	7.47
All	3,171	100.00	3,225	100.00

4.3.4. CAUTIs — National Comparison

Act 52 requires comparisons between Pennsylvania data and national data (Dudeck **et al.**, 2013). Among data reported from critical care units in Pennsylvania, the pooled rate of reported CAUTIs in surgical ICUs, trauma ICUs, medical ICUs and cardiothoracic ICUs was stastically significantly lower than the corresponding national average (Figure 4.3.1). Among data reported from non-critical care units in Pennsylvania, the pooled CAUTI rate reported from surgical wards and medical wards was statistically significantly increased from the corresponding national average (Figure 4.3.2). The pooled CAUTI rates from other location types did not differ significantly from national rates.

The device utilization ratios reported from all hospital wards as well as burn ICUs, trauma ICUs, medical specialty ICUs, medical ICUs, pediatric ICUs and step-down units in Pennsylvania were all statistically significantly lower than reported nationally; however among data reported from critical care units in Pennsylvania, the pooled device utilzi-ation ratios reported from surgical ICUs, combined medical/surgical ICUs and cardiothoracic ICUs were stastically significantly greater than the corresponding national average (Figures 4.3.1 and 4.3.2).

Figure 4.3.1: Catheter-Associated Urinary Tract Infection Rates and Device Utilization Ratios in Critical Care Units — Pennsylvania and NHSN, 2012

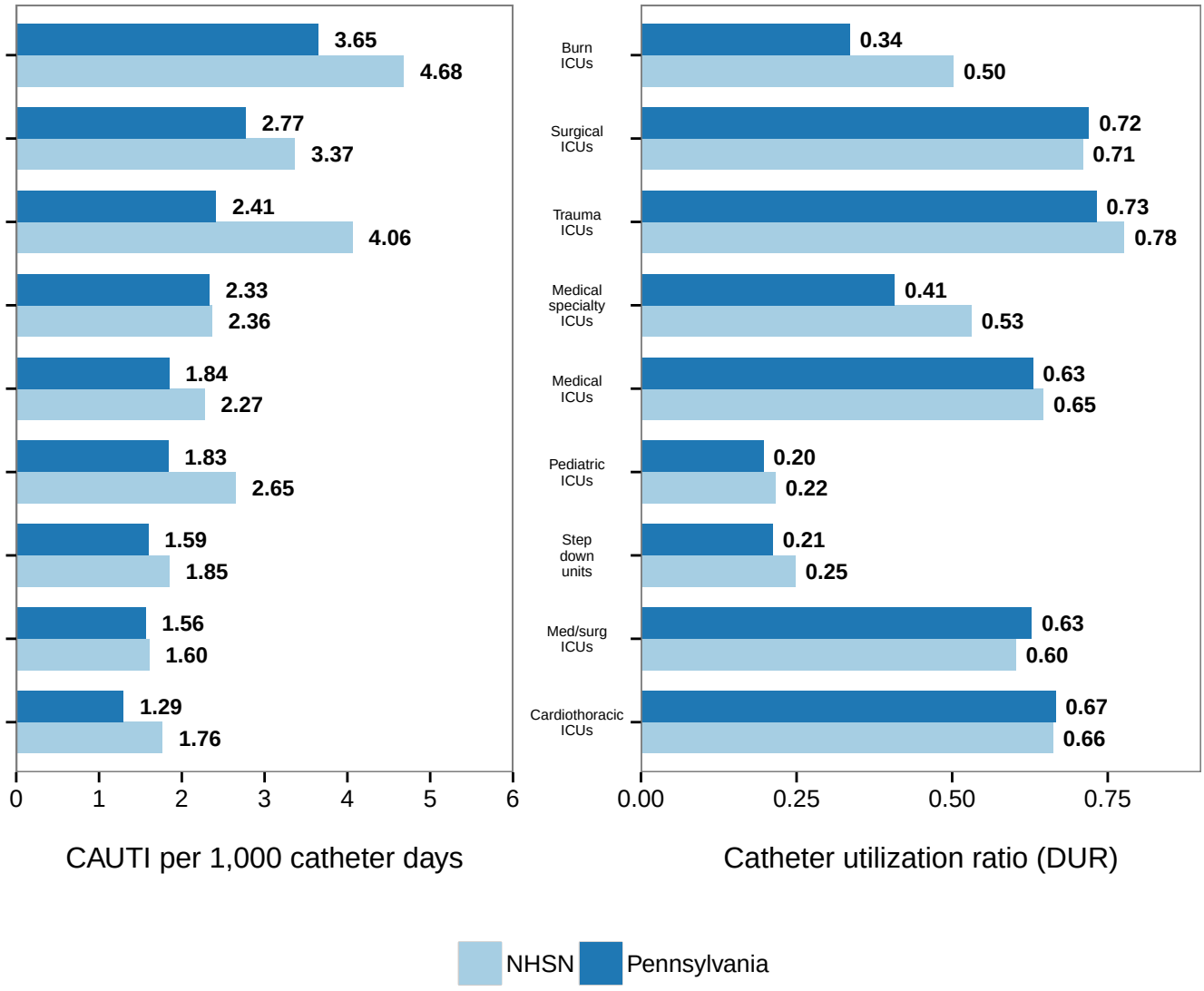
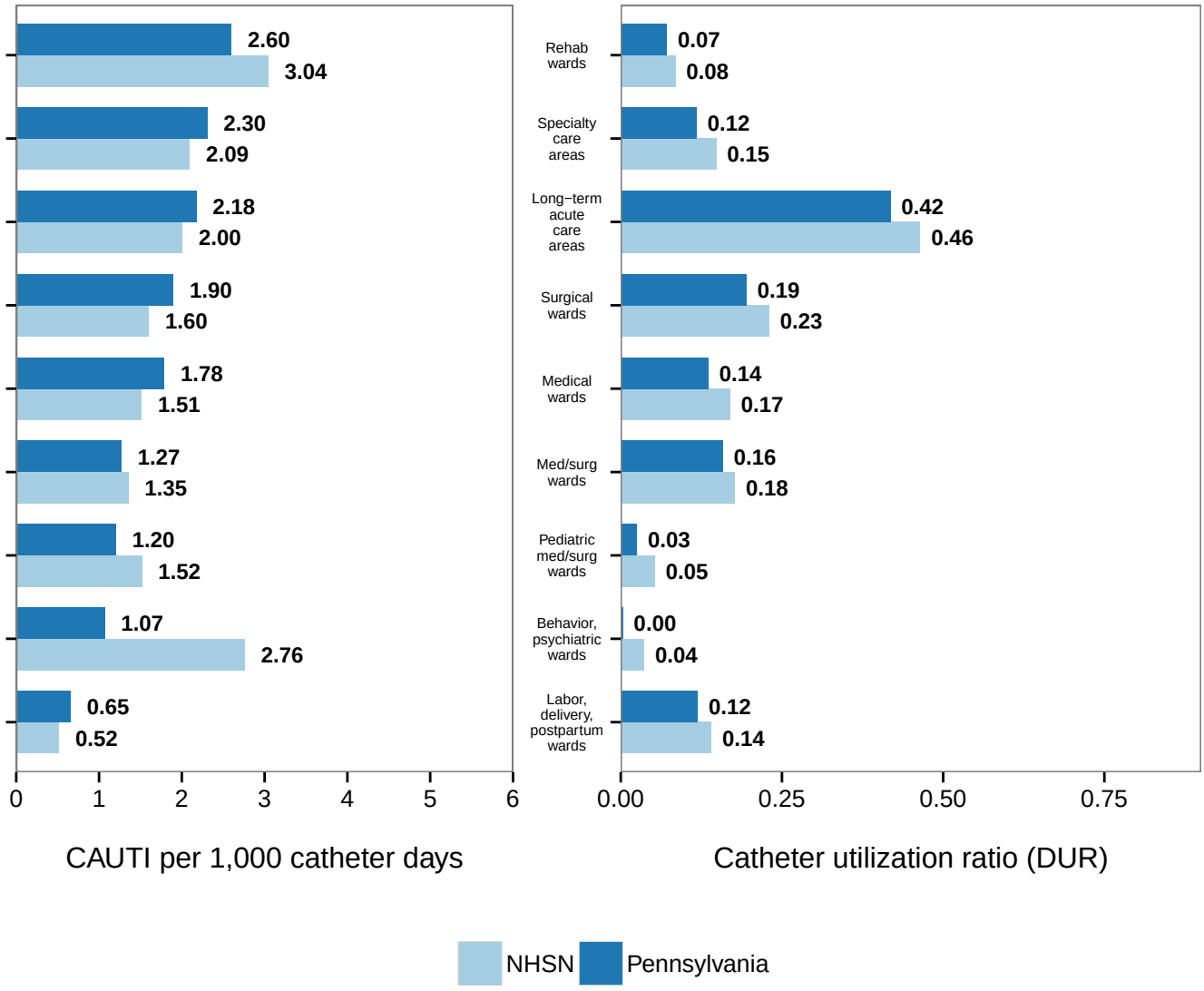


Figure 4.3.2: Catheter-Associated Urinary Tract Infection Rates and Device Utilization Ratios in Non-Critical Care Units — Pennsylvania and NHSN, 2012



4.3.5. CAUTIs — By Facility

Table 4.3.7 lists alphabetically the 230 hospitals that reported using urinary catheters in 2012. Among these facilities, a total of 144 (62.6 percent) had a standardized infection ratio (SIR) that was < 1.00, meaning they reported fewer CAUTIs than predicted by PADOH based on the statewide rate of CAUTIs and adjusting for characteristics of each facility. For 45 (19.6 percent) of these hospitals, the SIR was 0.00, as they reported no CAUTIs in 2012. There were 86 (37.4 percent) that had an SIR that was > 1.00, meaning that they reported a greater number of CAUTIs than predicted by PADOH based on the statewide CAUTI rate.

To compare a facility's adjusted CAUTI rate (SIR), find the facility in Table 4.3.7 listed in alphabetical order and its corresponding number of predicted infections; the SIR Figures (Figures 4.3.3–4.3.8) divide the list of hospitals into tiers based on their number of predicted infections. This is because hospitals with similar numbers of predicted infections are generally similar in size and other attributes. The categories used in the 2012 report are consistent with previous reports. Within each tier, hospitals are listed in order from best to worst SIR.

For many of the hospitals, the difference between the number of CAUTIs reported in NHSN and the number predicted by PADOH is not statistically meaningful. This occurs in situations in which the hospital's use of urinary catheters is low or when the difference between the observed number and predicted number is relatively small. As an example, 38 (16.5 percent) of facilities that reported using urinary catheters are predicted to have fewer than one CAUTI based on the characteristics of the facility and the number of urinary catheters used. Data from such hospitals is considered statistically unreliable and the level of confidence in the reported results is low. In Figures 4.3.3–4.3.8, this statistical imprecision is visualized by large confidence interval bars around the estimated SIR (black point). A confidence interval bar that is shaded grey indicates that the facility's SIR is not statistically different from the statewide rate.

However, there were 32 (13.9 percent) facilities in which the reported number of CAUTIs was statistically better than predicted by PADOH. These hospitals are listed in Table 4.3.4 in alphabetical order, and their confidence interval bars are shaded green in Figures 4.3.3 – 4.3.8. There were also 29 (12.6 percent) facilities in which the reported number of CAUTIs was signficantly worse than predicted by PADOH. These hospitals are listed in Table 4.3.5 in alphabetical order and their confidence interval bars are shaded red in Figures 4.3.3 – 4.3.8.

Please note that unlike SIRs calculated by CDC, the SIRs in this report and previous PADOH reports are indexed relative to the performance of facilities with similar attributes for the **same** year. Therefore, a facility's crude CAUTI rate (number of infections per 1,000 catheter days) may improve from year-to-year, but the improvement might not be reflected in the facility's SIR if the facility's improvement is consistent with improvements made statewide over the same period. SIRs should only be used to compare facility performance to other facilities in the state during the same reporting period. Furthermore, SIRs calculated by PADOH should not be compared to national SIRs or ratios reported from other states. For these reasons, crude rates should be used for trend analyses as reported in Tables 4.2.4, 4.3.7 and in facility-specific reports in Appendix A.

Table 4.3.4: Facilities with a Significantly Fewer Catheter-Associated Urinary Tract Infections than Predicted (Better SIR) — Pennsylvania, 2012

Facility Name and NHSN ID
ALBERT EINSTEIN MEDICAL CENTER (10585)
ALLEGHENY GENERAL HOSPITAL (10648)
ALLEGHENY VALLEY HOSPITAL (11842)
ALTOONA REGIONAL HEALTH SYSTEM (10178)
ARMSTRONG COUNTY MEMORIAL HOSPITAL (12057)
CARLISLE REGIONAL MEDICAL CENTER (11997)
CHESTNUT HILL HOSPITAL (12304)
CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)
ELK REGIONAL HEALTH CENTER (11859)
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)
GEISINGER-COMMUNITY MEDICAL CENTER (11914)
HAHNEMANN UNIVERSITY HOSPITAL (11437)
HAZLETON GENERAL HOSPITAL (11878)
HOLY REDEEMER HOSPITAL AND MEDICAL CENTER (11973)
JAMESON MEMORIAL HOSPITAL (11954)
LANCASTER GENERAL HOSPITAL (10183)
LIFECARE HOSPITALS OF PITTSBURGH — ALLE-KISKI CAMPUS (18955)
LIFECARE HOSPITALS OF PITTSBURGH — SUBURBAN CAMPUS (12385)
MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)
MERCY PHILADELPHIA HOSPITAL (11946)
MOSES TAYLOR HOSPITAL (11528)
OHIO VALLEY GENERAL HOSPITAL (12298)
PINNACLE HEALTH HOSPITALS (10122)
READING HOSPITAL AND MEDICAL CENTER (12375)
REGIONAL HOSPITAL OF SCRANTON (12533)
RIDDLE MEMORIAL HOSPITAL (11731)
ROXBOROUGH MEMORIAL HOSPITAL (11978)
SHARON REGIONAL HEALTH SYSTEM (12250)
UNIONTOWN HOSPITAL (10441)
UPMC MERCY (10384)
UPMC PRESBYTERIAN SHADYSIDE — SHADYSIDE (10118)

Table 4.3.5: Facilities with a Significantly More Catheter-Associated Urinary Tract Infections than Predicted (Worse SIR) — Pennsylvania, 2012

Facility Name and NHSN ID
ABINGTON MEMORIAL HOSPITAL (11838)
ALBERT EINSTEIN MEDICAL CENTER MOSS REHABILITATION (12508)
BRANDYWINE HOSPITAL (11979)
CHESTER COUNTY HOSPITAL (12016)
EASTERN REGIONAL MEDICAL CENTER (12348)
GEISINGER MEDICAL CENTER (11775)
GOOD SHEPHERD PENN PARTNERS (13929)
GOOD SHEPHERD SPECIALTY HOSPITAL (11887)
HERITAGE VALLEY BEAVER (11831)
HOSPITAL OF FOX CHASE CANCER CENTER (12134)
HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)
KINDRED HOSPITAL — PHILADELPHIA (11832)
KINDRED HOSPITAL — PITTSBURGH (12358)
KINDRED HOSPITAL — WYOMING VALLEY (12485)
KINDRED HOSPITAL EASTON (12007)
KINDRED HOSPITAL PHILADELPHIA — HAVERTOWN (12908)
LEHIGH VALLEY HOSPITAL (11884)

MAGEE REHAB HOSPITAL (12146)
MEMORIAL HOSPITAL (11633)
MILTON S HERSHEY MEDICAL CENTER (11747)
SELECT SPECIALTY HOSPITAL — CENTRAL PENNSYLVANIA (CAMP HILL) (12147)
SPECIAL CARE HOSPITAL (12604)
ST. MARY MEDICAL CENTER (11885)
SURGICAL INSTITUTE OF READING (12535)
THE GOOD SHEPHERD REHABILITATION HOSPITAL (11896)
THOMAS JEFFERSON UNIV HOSP - METHODIST (12017)
THOMAS JEFFERSON UNIV HOSPITAL (11506)
UPMC PRESBYTERIAN SHADYSIDE — PRESBYTERIAN (10348)
YORK HOSPITAL (10108)

Table 4.3.6: Facilities Omitted from CAUTI SIR Analysis Due to No Reported Urinary Catheter Use — Pennsylvania, 2012

Facility Name and NHSN ID
BELMONT CENTER FOR COMPREHENSIVE TREATMENT (12505)
BROOKE GLEN BEHAVIORAL HOSPITAL (12623)
CLARION PSYCHIATRIC CENTER (12454)
DEVEREUX CHILDRENS BEHAVIORAL HEALTH INSTITUTE (12738)
FAIRMOUNT BEHAVIORAL HEALTH SYSTEM (12565)
FOUNDATIONS BEHAVIORAL HEALTH (12832)
HAVEN BEHAVIORAL HOSPITAL OF EASTERN PENNSYLVANIA (14471)
HORSHAM CLINIC (12543)
KIDSPEACE ORCHARD HILLS CAMPUS (12430)
KIRKBRIDE CENTER (12624)
MONTGOMERY COUNTY MH/MR EMERGENCY SERVICES, INC. (12287)
NORRISTOWN STATE HOSPITAL (12047)
PHILHAVEN HOSPITAL (11740)
ROXBURY TREATMENT CENTER (12723)
SOUTHWOOD PSYCHIATRIC HOSPITAL (12453)
ST. JOHN VIANNEY HOSPITAL (12548)
THE MEADOWS PSYCHIATRIC CENTER (12156)
VALLEY FORGE MEDICAL CENTER AND HOSPITAL (12029)
WARREN STATE HOSPITAL (12081)

Table 4.3.7: Catheter-Associated Urinary Tract Infections, Catheter Utilization Rates and Standardized Infection Ratios by Facility — Pennsylvania, 2010–2012

	Catheter Days	Patient Days	Catheter Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
ABINGTON MEMORIAL HOSPITAL (11838)							
2012	24,244	141,039	0.17	76	44.94	1.69	(1.33 – 2.12)
2011	28,778	151,539	0.19	70	46.47	1.51	(1.17 – 1.90)
2010	30,092	162,085	0.19	72	53.23	1.35	(1.06 – 1.70)
ADVANCED SURGICAL HOSPITAL (16317)							
2012	310	1,263	0.25	0	0.43	0.00	(0.00 – 8.44)
2011	249	1,116	0.22	0	0.34	0.00	(0.00 – 10.78)
2010	.	.	.	.	.	.	.
ALBERT EINSTEIN MEDICAL CENTER (10585)							
2012	20,702	104,188	0.20	23	38.64	0.60	(0.38 – 0.89)
2011	22,187	111,995	0.20	33	36.03	0.92	(0.63 – 1.29)
2010	23,953	120,974	0.20	26	42.28	0.62	(0.40 – 0.90)
ALBERT EINSTEIN MEDICAL CENTER AT ELKINS PARK (12500)							
2012	2,772	10,144	0.27	6	5.25	1.14	(0.42 – 2.49)
2011	2,716	10,601	0.26	4	4.57	0.88	(0.24 – 2.24)
2010	2,994	12,656	0.24	0	5.25	0.00	(0.00 – 0.70)
ALBERT EINSTEIN MEDICAL CENTER MOSS REHABILITATION (12508)							
2012	3,384	43,005	0.08	11	4.50	2.45	(1.22 – 4.38)
2011	3,934	40,945	0.10	10	4.80	2.08	(1.00 – 3.83)
2010	3,907	41,823	0.09	3	7.08	0.42	(0.09 – 1.24)
ALLEGHENY GENERAL HOSPITAL (10648)							
2012	46,046	131,537	0.35	35	88.28	0.40	(0.28 – 0.55)
2011	44,505	133,596	0.33	41	77.51	0.53	(0.38 – 0.72)
2010	44,019	135,673	0.32	19	76.36	0.25	(0.15 – 0.39)
ALLEGHENY VALLEY HOSPITAL (11842)							
2012	6,974	42,082	0.17	3	9.60	0.31	(0.06 – 0.91)
2011	7,874	46,228	0.17	5	10.38	0.48	(0.16 – 1.12)
2010	7,651	50,338	0.15	7	12.65	0.55	(0.22 – 1.14)
ALLIED SERVICES INSTITUTE OF REHABILITATION (12591)							
2012	1,504	22,151	0.07	2	1.98	1.01	(0.11 – 3.64)
2011	1,347	20,817	0.06	2	1.56	1.28	(0.14 – 4.63)
2010	1,335	21,464	0.06	1	2.28	0.44	(0.01 – 2.44)
ALTOONA REGIONAL HEALTH SYSTEM (10178)							
2012	18,116	82,234	0.22	7	25.28	0.28	(0.11 – 0.57)
2011	22,047	89,191	0.25	6	30.55	0.20	(0.07 – 0.43)
2010	21,583	89,928	0.24	7	35.11	0.20	(0.08 – 0.41)
ARIA HEALTH (11388)							
2012	24,806	108,401	0.23	44	46.61	0.94	(0.69 – 1.27)
2011	26,332	115,743	0.23	60	43.56	1.38	(1.05 – 1.77)
2010	31,999	131,905	0.24	69	56.07	1.23	(0.96 – 1.56)
ARMSTRONG COUNTY MEMORIAL HOSPITAL (12057)							
2012	4,901	32,277	0.15	1	6.72	0.15	(0.00 – 0.83)
2011	5,287	34,165	0.15	5	6.88	0.73	(0.23 – 1.70)
2010	5,027	33,954	0.15	1	8.32	0.12	(0.00 – 0.67)

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Table 4.3.7 – Continued from previous page

	Catheter Days	Patient Days	Catheter Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
BARIX CLINICS OF PENNSYLVANIA (12037)							
2012	259	539	0.48	0	0.37	0.00	(0.00 – 9.78)
2011	576	661	0.87	0	0.95	0.00	(0.00 – 3.88)
2010	416	882	0.47	0	0.66	0.00	(0.00 – 5.55)
BARNES-KASSON COUNTY HOSPITAL (12404)							
2012	668	4,386	0.15	0	0.92	0.00	(0.00 – 4.01)
2011	671	4,251	0.16	0	0.88	0.00	(0.00 – 4.19)
2010	758	4,933	0.15	0	1.25	0.00	(0.00 – 2.93)
BERWICK HOSPITAL CENTER (11442)							
2012	2,164	12,578	0.17	0	2.98	0.00	(0.00 – 1.23)
2011	2,640	14,647	0.18	2	3.51	0.57	(0.06 – 2.06)
2010	2,720	15,376	0.18	1	4.47	0.22	(0.00 – 1.24)
BRADFORD REGIONAL MEDICAL CENTER (12361)							
2012	1,998	12,697	0.16	0	2.74	0.00	(0.00 – 1.34)
2011	2,338	11,423	0.20	0	3.16	0.00	(0.00 – 1.16)
2010	2,857	11,429	0.25	5	4.64	1.08	(0.35 – 2.51)
BRANDYWINE HOSPITAL (11979)							
2012	4,376	37,089	0.12	16	5.93	2.70	(1.54 – 4.38)
2011	5,246	37,170	0.14	10	6.74	1.48	(0.71 – 2.73)
2010	5,544	25,194	0.22	12	9.05	1.33	(0.68 – 2.32)
BROOKVILLE HOSPITAL (12418)							
2012	1,214	6,036	0.20	1	1.69	0.59	(0.01 – 3.30)
2011	722	6,425	0.11	1	0.90	1.11	(0.01 – 6.18)
2010	855	6,307	0.14	1	1.42	0.70	(0.01 – 3.92)
BUCKS COUNTY SPECIALTY HOSPITAL (15202)							
2012	159	985	0.16	0	0.22	0.00	(0.00 – 16.78)
2011	191	739	0.26	0	0.27	0.00	(0.00 – 13.78)
2010	204	380	0.54	0	0.32	0.00	(0.00 – 11.37)
BUCKTAIL MEDICAL CENTER (12461)							
2012	111	1,260	0.09	0	0.15	0.00	(0.00 – 24.74)
2011	98	1,078	0.09	0	0.12	0.00	(0.00 – 30.91)
2010	211	1,264	0.17	0	0.35	0.00	(0.00 – 10.55)
BUTLER MEMORIAL HOSPITAL (11736)							
2012	11,753	65,912	0.18	22	16.23	1.36	(0.85 – 2.05)
2011	12,534	67,225	0.19	12	16.72	0.72	(0.37 – 1.25)
2010	12,388	63,971	0.19	11	20.30	0.54	(0.27 – 0.97)
CANONSBURG GENERAL HOSPITAL (11586)							
2012	3,299	17,168	0.19	4	4.57	0.87	(0.24 – 2.24)
2011	3,329	17,798	0.19	2	4.44	0.45	(0.05 – 1.63)
2010	3,374	18,963	0.18	0	5.55	0.00	(0.00 – 0.66)
CARLISLE REGIONAL MEDICAL CENTER (11997)							
2012	4,909	20,990	0.23	1	6.87	0.15	(0.00 – 0.81)
2011	7,230	26,235	0.28	0	10.17	0.00	(0.00 – 0.36)
2010	7,058	28,397	0.25	15	11.47	1.31	(0.73 – 2.16)
CHAMBERSBURG HOSPITAL (11913)							
2012	9,207	54,266	0.17	19	12.69	1.50	(0.90 – 2.34)
2011	9,954	56,846	0.18	8	13.17	0.61	(0.26 – 1.20)
2010	10,045	52,912	0.19	14	16.47	0.85	(0.46 – 1.43)
CHARLES COLE MEMORIAL HOSPITAL (11956)							
2012	1,233	10,297	0.12	5	1.67	2.99	(0.96 – 6.98)
2011	1,448	9,233	0.16	2	1.89	1.06	(0.12 – 3.83)
2010	1,644	9,535	0.17	0	2.71	0.00	(0.00 – 1.36)
CHESTER COUNTY HOSPITAL (12016)							
2012	7,700	58,920	0.13	21	10.48	2.00	(1.24 – 3.06)
2011	8,779	59,845	0.15	26	13.69	1.90	(1.24 – 2.78)
2010	9,737	58,559	0.17	22	17.29	1.27	(0.80 – 1.93)

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Table 4.3.7 – Continued from previous page

	Catheter Days	Patient Days	Catheter Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
CHESTNUT HILL HOSPITAL (12304)							
2012	6,035	26,818	0.23	1	8.43	0.12	(0.00 – 0.66)
2011	6,698	27,803	0.24	4	9.25	0.43	(0.12 – 1.11)
2010	6,693	27,053	0.25	7	11.72	0.60	(0.24 – 1.23)
CHILDRENS HOME OF PITTSBURGH, THE (12336)							
2012	88	5,923	0.01	0	0.11	0.00	(0.00 – 33.96)
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)							
2012	5,464	154,870	0.04	11	9.39	1.17	(0.58 – 2.10)
2011	4,108	150,455	0.03	10	5.11	1.96	(0.94 – 3.60)
2010	3,638	137,053	0.03	18	6.89	2.61	(1.55 – 4.13)
CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)							
2012	7,570	84,386	0.09	8	13.60	0.59	(0.25 – 1.16)
2011	7,579	84,133	0.09	6	11.07	0.54	(0.20 – 1.18)
2010	8,226	79,661	0.10	13	14.85	0.88	(0.47 – 1.50)
CHILDRENS INSTITUTE OF PITTSBURGH (12266)							
2012	138	11,368	0.01	0	0.17	0.00	(0.00 – 21.86)
2011	18	7,631	0.00	0	0.01	0.00	(0.00 – 275.22)
2010	153	9,990	0.02	0	0.27	0.00	(0.00 – 13.38)
CLARION HOSPITAL (11654)							
2012	1,696	10,706	0.16	3	3.13	0.96	(0.19 – 2.80)
2011	2,541	10,903	0.23	5	4.22	1.19	(0.38 – 2.77)
2010	2,539	11,420	0.22	2	4.46	0.45	(0.05 – 1.62)
CLARKS SUMMIT STATE HOSPITAL (12051)							
2012	1,375	78,564	0.02	0	1.70	0.00	(0.00 – 2.16)
2011	290	67,128	0.00	1	0.23	4.29	(0.06 – 23.88)
2010	874	76,460	0.01	4	1.58	2.53	(0.68 – 6.47)
CLEARFIELD HOSPITAL (11843)							
2012	3,259	15,717	0.21	1	4.53	0.22	(0.00 – 1.23)
2011	3,318	16,613	0.20	2	4.47	0.45	(0.05 – 1.62)
2010	4,331	19,573	0.22	5	7.06	0.71	(0.23 – 1.65)
CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)							
2012	28,621	120,230	0.24	30	53.88	0.56	(0.38 – 0.79)
2011	30,984	121,737	0.25	42	52.04	0.81	(0.58 – 1.09)
2010	32,055	133,148	0.24	50	56.19	0.89	(0.66 – 1.17)
COORDINATED HEALTH ORTHOPEDIC HOSPITAL, LLC (11872)							
2012	1,353	3,085	0.44	4	1.95	2.05	(0.55 – 5.25)
2011	1,431	3,107	0.46	0	2.16	0.00	(0.00 – 1.70)
2010	1,077	2,994	0.36	2	1.73	1.16	(0.13 – 4.18)
CORRY MEMORIAL HOSPITAL (12283)							
2012	440	3,598	0.12	0	0.60	0.00	(0.00 – 6.14)
2011	639	5,107	0.13	0	0.81	0.00	(0.00 – 4.54)
2010	559	5,177	0.11	0	0.94	0.00	(0.00 – 3.92)
CRICHTON REHABILITATION CENTER (12273)							
2012	811	9,732	0.08	2	1.08	1.85	(0.21 – 6.68)
2011	845	9,740	0.09	3	1.02	2.95	(0.59 – 8.62)
2010	728	9,026	0.08	1	1.33	0.75	(0.01 – 4.20)
CROZER CHESTER MEDICAL CENTER (11839)							
2012	14,662	74,144	0.20	18	27.36	0.66	(0.39 – 1.04)
2011	18,174	88,176	0.21	18	29.67	0.61	(0.36 – 0.96)
2010	21,911	99,590	0.22	14	38.53	0.36	(0.20 – 0.61)
CROZER CHESTER MEDICAL CENTER SPRINGFIELD (11851)							
2012	1,104	4,316	0.26	0	2.09	0.00	(0.00 – 1.76)
2011	1,200	5,467	0.22	1	1.98	0.51	(0.01 – 2.82)
2010	1,314	6,843	0.19	1	2.32	0.43	(0.01 – 2.40)

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	Catheter Days	Patient Days	Catheter Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
CROZER CHESTER MEDICAL CENTER TAYLOR (11932)							
2012	5,414	28,514	0.19	9	10.08	0.89	(0.41 – 1.69)
2011	7,564	35,178	0.22	5	12.42	0.40	(0.13 – 0.94)
2010	8,258	38,591	0.21	5	14.54	0.34	(0.11 – 0.80)
DANVILLE STATE HOSPITAL (11848)							
2012	610	58,459	0.01	1	0.74	1.36	(0.02 – 7.56)
2011	365	60,873	0.01	0	0.31	0.00	(0.00 – 11.97)
2010	668	62,294	0.01	0	1.21	0.00	(0.00 – 3.03)
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)							
2012	9,339	41,967	0.22	2	17.52	0.11	(0.01 – 0.41)
2011	10,673	48,197	0.22	11	17.59	0.63	(0.31 – 1.12)
2010	11,193	51,226	0.22	12	19.69	0.61	(0.31 – 1.06)
DIVINE PROVIDENCE HOSPITAL (11743)							
2012	22	6,986	0.00	0	0.03	0.00	(0.00 – 146.22)
2011	29	6,529	0.00	0	0.02	0.00	(0.00 – 156.86)
2010	11	5,569	0.00	0	0.02	0.00	(0.00 – 173.21)
DOYLESTOWN HOSPITAL (10190)							
2012	8,374	50,723	0.17	14	11.52	1.21	(0.66 – 2.04)
2011	8,450	53,945	0.16	15	11.01	1.36	(0.76 – 2.25)
2010	8,279	51,572	0.16	25	13.66	1.83	(1.18 – 2.70)
DUBOIS REGIONAL MEDICAL CENTER (11606)							
2012	4,632	40,601	0.11	2	6.26	0.32	(0.04 – 1.15)
2011	5,201	41,223	0.13	3	6.58	0.46	(0.09 – 1.33)
2010	4,964	43,098	0.12	3	8.29	0.36	(0.07 – 1.06)
EAGLEVILLE HOSPITAL (12965)							
2012	36	17,781	0.00	0	0.04	0.00	(0.00 – 91.25)
2011	24	6,561	0.00	0	0.02	0.00	(0.00 – 194.57)
2010	.	.	.	.	.	.	.
EASTERN REGIONAL MEDICAL CENTER (12348)							
2012	2,443	16,417	0.15	8	3.35	2.39	(1.03 – 4.71)
2011	2,055	13,007	0.16	5	2.68	1.86	(0.60 – 4.35)
2010	1,846	11,255	0.16	5	3.04	1.64	(0.53 – 3.83)
EASTON HOSPITAL (11929)							
2012	9,266	45,205	0.20	19	17.32	1.10	(0.66 – 1.71)
2011	10,583	48,864	0.22	27	17.39	1.55	(1.02 – 2.26)
2010	10,898	50,269	0.22	21	19.17	1.10	(0.68 – 1.67)
EDGEWOOD SURGICAL HOSPITAL (12552)							
2012	39	367	0.11	0	0.05	0.00	(0.00 – 69.79)
2011	32	373	0.09	0	0.04	0.00	(0.00 – 95.40)
2010	48	376	0.13	0	0.08	0.00	(0.00 – 45.95)
ELK REGIONAL HEALTH CENTER (11859)							
2012	2,653	14,143	0.19	0	3.67	0.00	(0.00 – 1.00)
2011	2,588	14,320	0.18	0	3.44	0.00	(0.00 – 1.07)
2010	3,094	15,030	0.21	0	5.06	0.00	(0.00 – 0.72)
ELLWOOD CITY HOSPITAL (11779)							
2012	1,419	9,518	0.15	1	1.94	0.51	(0.01 – 2.86)
2011	1,407	11,686	0.12	2	1.77	1.13	(0.13 – 4.08)
2010	1,364	11,683	0.12	6	2.28	2.64	(0.96 – 5.74)
ENDLESS MOUNTAINS HEALTH SYSTEMS (11817)							
2012	650	3,440	0.19	0	0.90	0.00	(0.00 – 4.07)
2011	666	3,542	0.19	0	0.89	0.00	(0.00 – 4.12)
2010	624	3,421	0.18	0	1.02	0.00	(0.00 – 3.58)
EPHRATA COMMUNITY HOSPITAL (11764)							
2012	6,904	25,852	0.27	7	9.72	0.72	(0.29 – 1.48)
2011	5,308	28,104	0.19	2	7.09	0.28	(0.03 – 1.02)
2010	4,235	29,198	0.15	7	7.01	1.00	(0.40 – 2.06)

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Table 4.3.7 – Continued from previous page

	Catheter Days	Patient Days	Catheter Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
EVANGELICAL COMMUNITY HOSPITAL (11701)							
2012	4,047	21,725	0.19	4	7.53	0.53	(0.14 – 1.36)
2011	4,804	21,474	0.22	5	7.93	0.63	(0.20 – 1.47)
2010	4,812	19,122	0.25	0	7.81	0.00	(0.00 – 0.47)
EXCELA HEALTH FRICK HOSPITAL (11639)							
2012	2,517	12,696	0.20	3	3.49	0.86	(0.17 – 2.51)
2011	3,524	14,998	0.23	2	4.85	0.41	(0.05 – 1.49)
2010	3,290	15,584	0.21	0	5.38	0.00	(0.00 – 0.68)
EXCELA HEALTH LATROBE HOSPITAL (11651)							
2012	7,777	24,746	0.31	9	14.83	0.61	(0.28 – 1.15)
2011	10,735	28,678	0.37	8	18.99	0.42	(0.18 – 0.83)
2010	10,552	30,030	0.35	2	18.25	0.11	(0.01 – 0.40)
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)							
2012	17,795	87,500	0.20	20	33.25	0.60	(0.37 – 0.93)
2011	20,996	94,631	0.22	17	34.62	0.49	(0.29 – 0.79)
2010	21,388	95,320	0.22	15	37.58	0.40	(0.22 – 0.66)
FIRST HOSPITAL OF WYOMING VALLEY (12050)							
2012	9	33,278	0.00	0	0.01	0.00	(0.00 – 401.64)
2011	.	.	.	.	.	.	.
2010	12	32,369	0.00	0	0.02	0.00	(0.00 – 149.71)
FORBES REGIONAL HOSPITAL (11265)							
2012	12,531	84,685	0.15	23	23.06	1.00	(0.63 – 1.50)
2011	12,707	85,996	0.15	18	19.83	0.91	(0.54 – 1.43)
2010	13,209	79,998	0.17	12	23.46	0.51	(0.26 – 0.89)
FRIENDS HOSPITAL (12488)							
2012	7	58,046	0.00	0	0.01	0.00	(0.00 – 399.17)
2011	10	52,675	0.00	0	0.01	0.00	(0.00 – 576.19)
2010	.	.	.	.	.	.	.
FULTON COUNTY MEDICAL CENTER (11939)							
2012	433	4,625	0.09	1	0.58	1.72	(0.02 – 9.59)
2011	500	4,065	0.12	1	0.63	1.59	(0.02 – 8.82)
2010	279	4,574	0.06	0	0.48	0.00	(0.00 – 7.70)
GEISINGER HEALTHSOUTH REHABILITATION HOSPITAL (11993)							
2012	504	11,741	0.04	0	0.65	0.00	(0.00 – 5.64)
2011	321	10,978	0.03	0	0.33	0.00	(0.00 – 10.99)
2010	200	10,867	0.02	2	0.36	5.62	(0.63 – 20.28)
GEISINGER MEDICAL CENTER (11775)							
2012	23,257	142,149	0.16	60	43.01	1.40	(1.06 – 1.80)
2011	25,082	136,175	0.18	63	40.33	1.56	(1.20 – 2.00)
2010	22,910	129,984	0.18	61	40.60	1.50	(1.15 – 1.93)
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)							
2012	15,183	67,922	0.22	38	28.50	1.33	(0.94 – 1.83)
2011	15,876	64,749	0.25	47	26.53	1.77	(1.30 – 2.36)
2010	14,638	58,226	0.25	30	25.62	1.17	(0.79 – 1.67)
GEISINGER-BLOOMSBURG HOSPITAL (12008)							
2012	1,590	12,590	0.13	0	2.16	0.00	(0.00 – 1.70)
2011	2,192	13,619	0.16	0	2.87	0.00	(0.00 – 1.28)
2010	2,589	14,502	0.18	1	4.26	0.24	(0.00 – 1.31)
GEISINGER-COMMUNITY MEDICAL CENTER (11914)							
2012	13,661	54,768	0.25	5	25.77	0.19	(0.06 – 0.45)
2011	12,141	52,727	0.23	4	20.12	0.20	(0.05 – 0.51)
2010	10,814	51,767	0.21	8	19.05	0.42	(0.18 – 0.83)
GETTYSBURG HOSPITAL (11531)							
2012	2,588	18,278	0.14	2	3.54	0.57	(0.06 – 2.04)
2011	2,590	18,089	0.14	1	3.33	0.30	(0.00 – 1.67)
2010	2,772	17,456	0.16	3	4.57	0.66	(0.13 – 1.92)

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Table 4.3.7 – Continued from previous page

	Catheter Days	Patient Days	Catheter Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
GNADEN HUETTEN MEMORIAL HOSPITAL (12241)							
2012	2,155	18,176	0.12	6	2.92	2.06	(0.75 – 4.47)
2011	2,393	16,886	0.14	5	3.08	1.63	(0.52 – 3.79)
2010	2,400	16,243	0.15	1	3.97	0.25	(0.00 – 1.40)
GOOD SHEPHERD PENN PARTNERS (13929)							
2012	2,322	9,813	0.24	11	3.25	3.38	(1.69 – 6.06)
2011	1,514	8,537	0.18	2	2.01	1.00	(0.11 – 3.60)
2010	1,075	8,874	0.12	6	1.79	3.35	(1.22 – 7.29)
GOOD SHEPHERD SPECIALTY HOSPITAL (11887)							
2012	4,007	9,982	0.40	22	5.75	3.82	(2.40 – 5.79)
2011	3,816	10,551	0.36	9	5.57	1.62	(0.74 – 3.07)
2010	3,844	10,503	0.37	15	6.16	2.43	(1.36 – 4.02)
GRAND VIEW HOSPITAL (11847)							
2012	9,450	40,826	0.23	11	13.22	0.83	(0.41 – 1.49)
2011	10,175	42,899	0.24	17	14.02	1.21	(0.71 – 1.94)
2010	9,484	41,631	0.23	10	15.45	0.65	(0.31 – 1.19)
GROVE CITY MEDICAL CENTER (11722)							
2012	1,258	8,181	0.15	1	1.73	0.58	(0.01 – 3.22)
2011	1,318	7,906	0.17	0	1.73	0.00	(0.00 – 2.12)
2010	1,319	7,396	0.18	2	2.17	0.92	(0.10 – 3.33)
HAHNEMANN UNIVERSITY HOSPITAL (11437)							
2012	15,090	115,028	0.13	11	27.61	0.40	(0.20 – 0.71)
2011	17,887	127,259	0.14	23	27.73	0.83	(0.53 – 1.24)
2010	18,367	123,052	0.15	15	32.74	0.46	(0.26 – 0.76)
HANOVER HOSPITAL (11899)							
2012	4,493	24,815	0.18	10	6.21	1.61	(0.77 – 2.96)
2011	5,509	25,152	0.22	11	7.51	1.46	(0.73 – 2.62)
2010	8,738	26,527	0.33	10	14.06	0.71	(0.34 – 1.31)
HAZLETON GENERAL HOSPITAL (11878)							
2012	7,573	32,401	0.23	0	10.60	0.00	(0.00 – 0.35)
2011	8,233	33,295	0.25	2	11.41	0.18	(0.02 – 0.63)
2010	9,025	34,045	0.27	31	14.63	2.12	(1.44 – 3.01)
HEALTHSOUTH HARMARVILLE REHABILITATION HOSPITAL (11727)							
2012	3,421	34,709	0.10	6	4.59	1.31	(0.48 – 2.84)
2011	3,767	31,608	0.12	3	4.73	0.63	(0.13 – 1.85)
2010	3,579	30,991	0.12	10	5.97	1.67	(0.80 – 3.08)
HEALTHSOUTH NITTANY VALLEY REHABILITATION HOSPITAL (11667)							
2012	654	13,305	0.05	3	0.85	3.53	(0.71 – 10.32)
2011	472	11,594	0.04	0	0.51	0.00	(0.00 – 7.15)
2010	681	12,452	0.05	0	1.17	0.00	(0.00 – 3.14)
HEALTHSOUTH READING REHABILITATION HOSPITAL (12139)							
2012	558	15,333	0.04	0	0.71	0.00	(0.00 – 5.13)
2011	742	15,204	0.05	1	0.83	1.21	(0.02 – 6.73)
2010	534	14,813	0.04	0	0.93	0.00	(0.00 – 3.95)
HEALTHSOUTH REHABILITATION HOSPITAL OF ALTOONA (11903)							
2012	1,421	25,280	0.06	3	1.86	1.61	(0.32 – 4.72)
2011	1,382	23,971	0.06	1	1.57	0.64	(0.01 – 3.53)
2010	1,517	22,173	0.07	5	2.58	1.94	(0.62 – 4.52)
HEALTHSOUTH REHABILITATION HOSPITAL OF ERIE (11810)							
2012	766	22,729	0.03	1	0.98	1.02	(0.01 – 5.69)
2011	1,131	25,219	0.04	0	1.25	0.00	(0.00 – 2.95)
2010	1,203	26,319	0.05	0	2.07	0.00	(0.00 – 1.77)
HEALTHSOUTH REHABILITATION HOSPITAL OF MECHANICSBURG (12402)							
2012	1,831	18,430	0.10	1	2.46	0.41	(0.01 – 2.26)
2011	1,866	16,976	0.11	1	2.32	0.43	(0.01 – 2.40)
2010	1,877	17,596	0.11	7	3.14	2.23	(0.89 – 4.59)

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Table 4.3.7 – Continued from previous page

	Catheter Days	Patient Days	Catheter Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
HEALTHSOUTH REHABILITATION HOSPITAL OF SEWICKLEY (12066)							
2012	892	12,014	0.07	0	1.18	0.00	(0.00 – 3.10)
2011	662	11,046	0.06	1	0.76	1.32	(0.02 – 7.34)
2010	589	9,586	0.06	2	1.01	1.99	(0.22 – 7.18)
HEALTHSOUTH REHABILITATION HOSPITAL OF YORK (12058)							
2012	1,191	19,635	0.06	4	1.56	2.56	(0.69 – 6.55)
2011	1,467	20,041	0.07	11	1.73	6.38	(3.18 – 11.41)
2010	1,936	19,468	0.10	6	3.25	1.85	(0.67 – 4.02)
HEART OF LANCASTER REGIONAL MEDICAL CENTER (12571)							
2012	1,810	11,050	0.16	5	3.35	1.49	(0.48 – 3.49)
2011	2,303	10,692	0.22	5	3.78	1.32	(0.43 – 3.09)
2010	2,076	10,276	0.20	1	3.66	0.27	(0.00 – 1.52)
HERITAGE VALLEY BEAVER (11831)							
2012	18,302	79,459	0.23	57	34.40	1.66	(1.25 – 2.15)
2011	19,749	83,343	0.24	46	32.85	1.40	(1.03 – 1.87)
2010	19,447	86,652	0.22	30	34.17	0.88	(0.59 – 1.25)
HERITAGE VALLEY SEWICKLEY (10375)							
2012	12,154	44,927	0.27	19	17.12	1.11	(0.67 – 1.73)
2011	12,669	46,555	0.27	11	17.78	0.62	(0.31 – 1.11)
2010	12,829	45,426	0.28	8	20.75	0.39	(0.17 – 0.76)
HIGHLANDS HOSPITAL (11902)							
2012	939	11,661	0.08	0	1.25	0.00	(0.00 – 2.94)
2011	995	12,457	0.08	1	1.18	0.84	(0.01 – 4.70)
2010	716	12,273	0.06	1	1.22	0.82	(0.01 – 4.55)
HOLY REDEEMER HOSPITAL AND MEDICAL CENTER (11973)							
2012	8,736	60,087	0.15	4	11.95	0.33	(0.09 – 0.86)
2011	10,123	64,189	0.16	2	13.20	0.15	(0.02 – 0.55)
2010	11,424	64,672	0.18	11	18.78	0.59	(0.29 – 1.05)
HOLY SPIRIT HOSPITAL (12387)							
2012	14,663	72,802	0.20	23	20.37	1.13	(0.72 – 1.69)
2011	16,655	73,682	0.23	24	22.80	1.05	(0.67 – 1.57)
2010	16,594	71,373	0.23	31	27.02	1.15	(0.78 – 1.63)
HOSPITAL OF FOX CHASE CANCER CENTER (12134)							
2012	6,542	22,764	0.29	23	12.43	1.85	(1.17 – 2.78)
2011	6,370	22,367	0.28	21	10.86	1.93	(1.20 – 2.96)
2010	7,220	22,646	0.32	13	12.53	1.04	(0.55 – 1.77)
HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)							
2012	43,895	254,736	0.17	194	81.37	2.38	(2.06 – 2.74)
2011	43,758	249,501	0.18	114	69.90	1.63	(1.35 – 1.96)
2010	45,452	251,135	0.18	227	80.47	2.82	(2.47 – 3.21)
INDIANA REGIONAL MEDICAL CENTER (11759)							
2012	2,814	38,299	0.07	7	3.73	1.88	(0.75 – 3.87)
2011	3,564	40,201	0.09	4	4.30	0.93	(0.25 – 2.38)
2010	3,705	39,751	0.09	4	6.23	0.64	(0.17 – 1.64)
J C BLAIR MEMORIAL HOSP (11724)							
2012	1,510	8,363	0.18	3	2.09	1.44	(0.29 – 4.20)
2011	1,686	9,767	0.17	3	2.23	1.35	(0.27 – 3.94)
2010	1,945	10,598	0.18	16	3.19	5.01	(2.86 – 8.14)
JAMESON MEMORIAL HOSPITAL (11954)							
2012	6,919	39,038	0.18	1	9.55	0.10	(0.00 – 0.58)
2011	7,033	38,782	0.18	1	9.35	0.11	(0.00 – 0.60)
2010	7,621	44,114	0.17	2	12.54	0.16	(0.02 – 0.58)
JEANES HOSPITAL (11459)							
2012	8,155	38,533	0.21	8	11.36	0.70	(0.30 – 1.39)
2011	8,336	41,037	0.20	5	13.58	0.37	(0.12 – 0.86)
2010	9,917	42,199	0.24	12	17.40	0.69	(0.36 – 1.20)

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Table 4.3.7 – Continued from previous page

	Catheter Days	Patient Days	Catheter Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
JEFFERSON REGIONAL MEDICAL CENTER (10237)							
2012	13,920	75,632	0.18	15	19.26	0.78	(0.44 – 1.28)
2011	15,779	83,272	0.19	14	21.10	0.66	(0.36 – 1.11)
2010	17,518	86,374	0.20	23	28.66	0.80	(0.51 – 1.20)
JENNERSVILLE REGIONAL HOSPITAL (12337)							
2012	2,634	12,583	0.21	2	3.67	0.55	(0.06 – 1.97)
2011	3,010	13,563	0.22	1	4.11	0.24	(0.00 – 1.35)
2010	3,603	13,221	0.27	9	5.83	1.54	(0.70 – 2.93)
JERSEY SHORE HOSPITAL (11689)							
2012	639	4,497	0.14	0	0.87	0.00	(0.00 – 4.20)
2011	774	5,197	0.15	0	1.00	0.00	(0.00 – 3.66)
2010	629	4,527	0.14	2	1.04	1.92	(0.22 – 6.92)
JOHN HEINZ INSTITUTE OF REHABILITATION (11861)							
2012	935	20,244	0.05	3	1.21	2.48	(0.50 – 7.24)
2011	1,254	21,076	0.06	4	1.43	2.79	(0.75 – 7.14)
2010	1,052	20,170	0.05	5	1.81	2.77	(0.89 – 6.46)
KANE COMMUNITY HOSPITAL (12111)							
2012	462	4,769	0.10	0	0.62	0.00	(0.00 – 5.92)
2011	595	5,398	0.11	1	0.74	1.35	(0.02 – 7.52)
2010	412	4,608	0.09	2	0.69	2.88	(0.32 – 10.41)
KENSINGTON HOSPITAL (12609)							
2012	22	2,885	0.01	0	0.03	0.00	(0.00 – 140.21)
2011	164	2,751	0.06	0	0.19	0.00	(0.00 – 19.55)
2010	256	2,732	0.09	0	0.43	0.00	(0.00 – 8.52)
KINDRED HOSPITAL — PHILADELPHIA (11832)							
2012	5,380	11,725	0.46	31	7.77	3.99	(2.71 – 5.66)
2011	7,996	13,457	0.59	53	12.47	4.25	(3.18 – 5.56)
2010	10,458	14,138	0.74	54	16.35	3.30	(2.48 – 4.31)
KINDRED HOSPITAL — PITTSBURGH (12358)							
2012	4,376	10,309	0.42	15	6.30	2.38	(1.33 – 3.93)
2011	5,736	10,214	0.56	9	8.88	1.01	(0.46 – 1.92)
2010	7,144	12,513	0.57	9	11.27	0.80	(0.36 – 1.52)
KINDRED HOSPITAL — WYOMING VALLEY (12485)							
2012	4,877	8,444	0.58	16	7.12	2.25	(1.28 – 3.65)
2011	3,956	8,404	0.47	24	5.98	4.01	(2.57 – 5.97)
2010	4,773	8,431	0.57	21	7.53	2.79	(1.72 – 4.26)
KINDRED HOSPITAL AT HERITAGE VALLEY (12268)							
2012	6,324	8,898	0.71	5	9.33	0.54	(0.17 – 1.25)
2011	6,067	8,765	0.69	14	9.66	1.45	(0.79 – 2.43)
2010	6,403	8,815	0.73	7	10.02	0.70	(0.28 – 1.44)
KINDRED HOSPITAL EASTON (12007)							
2012	2,771	7,352	0.38	11	3.97	2.77	(1.38 – 4.96)
2011	3,329	6,982	0.48	5	5.04	0.99	(0.32 – 2.32)
2010	3,678	7,147	0.51	9	5.82	1.55	(0.71 – 2.93)
KINDRED HOSPITAL PHILADELPHIA — HAVERTOWN (12908)							
2012	5,393	15,040	0.36	16	7.70	2.08	(1.19 – 3.37)
2011	5,350	12,225	0.44	10	8.01	1.25	(0.60 – 2.30)
2010	7,456	12,095	0.62	13	11.73	1.11	(0.59 – 1.89)
KINDRED HOSPITAL PITTSBURGH — NORTH SHORE (12296)							
2012	4,308	6,882	0.63	3	6.32	0.47	(0.10 – 1.39)
2011	5,330	8,578	0.62	2	8.36	0.24	(0.03 – 0.86)
2010	5,467	8,602	0.64	1	8.59	0.12	(0.00 – 0.65)
KINDRED HOSPITAL SOUTH PHILADELPHIA (11940)							
2012	3,206	9,100	0.35	5	4.57	1.09	(0.35 – 2.55)
2011	2,544	6,625	0.38	9	3.74	2.41	(1.10 – 4.57)
2010	3,827	7,458	0.51	19	6.06	3.13	(1.89 – 4.90)

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	Catheter Days	Patient Days	Catheter Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
LANCASTER GENERAL HOSPITAL (10183)							
2012	25,382	153,050	0.17	18	34.94	0.52	(0.31 – 0.81)
2011	30,406	161,796	0.19	33	40.61	0.81	(0.56 – 1.14)
2010	28,830	153,609	0.19	25	47.30	0.53	(0.34 – 0.78)
LANCASTER REGIONAL MEDICAL CENTER (12335)							
2012	4,674	28,382	0.16	7	6.43	1.09	(0.44 – 2.24)
2011	4,262	28,792	0.15	13	5.51	2.36	(1.25 – 4.03)
2010	3,743	28,064	0.13	2	6.22	0.32	(0.04 – 1.16)
LANCASTER REHABILITATION HOSPITAL (12628)							
2012	453	18,153	0.02	1	0.57	1.75	(0.02 – 9.76)
2011	455	17,607	0.03	1	0.47	2.15	(0.03 – 11.96)
2010	662	17,398	0.04	2	1.15	1.74	(0.20 – 6.29)
LANSDALE HOSPITAL (12032)							
2012	4,085	20,308	0.20	2	5.67	0.35	(0.04 – 1.27)
2011	4,337	21,292	0.20	3	5.86	0.51	(0.10 – 1.50)
2010	4,287	21,572	0.20	5	7.02	0.71	(0.23 – 1.66)
LEHIGH VALLEY HOSPITAL — MUHLENBERG (11898)							
2012	10,203	49,028	0.21	14	19.08	0.73	(0.40 – 1.23)
2011	11,258	50,937	0.22	16	18.55	0.86	(0.49 – 1.40)
2010	11,940	50,646	0.24	16	20.94	0.76	(0.44 – 1.24)
LEHIGH VALLEY HOSPITAL (11884)							
2012	40,139	222,590	0.18	111	74.57	1.49	(1.22 – 1.79)
2011	41,803	221,791	0.19	73	67.43	1.08	(0.85 – 1.36)
2010	41,047	214,368	0.19	93	72.53	1.28	(1.03 – 1.57)
LEWISTOWN HOSPITAL (11825)							
2012	3,715	25,305	0.15	1	5.08	0.20	(0.00 – 1.09)
2011	3,526	24,902	0.14	3	4.53	0.66	(0.13 – 1.93)
2010	3,916	23,437	0.17	10	6.45	1.55	(0.74 – 2.85)
LIFECARE HOSPITALS OF CHESTER COUNTY (12005)							
2012	3,787	7,658	0.49	8	5.49	1.46	(0.63 – 2.87)
2011	5,371	8,890	0.60	7	8.40	0.83	(0.33 – 1.72)
2010	5,668	8,384	0.68	8	8.89	0.90	(0.39 – 1.77)
LIFECARE HOSPITALS OF MECHANICSBURG (12388)							
2012	4,451	9,277	0.48	4	6.44	0.62	(0.17 – 1.59)
2011	5,200	11,607	0.45	8	7.81	1.02	(0.44 – 2.02)
2010	7,137	14,747	0.48	12	11.33	1.06	(0.55 – 1.85)
LIFECARE HOSPITALS OF PITTSBURGH — ALLE-KISKI CAMPUS (18955)							
2012	4,245	6,811	0.62	1	6.22	0.16	(0.00 – 0.89)
2011	4,852	7,254	0.67	10	7.69	1.30	(0.62 – 2.39)
2010	.	.	.	.	.	.	.
LIFECARE HOSPITALS OF PITTSBURGH — MONROEVILLE (12254)							
2012	6,252	12,994	0.48	12	9.05	1.33	(0.68 – 2.32)
2011	8,339	14,075	0.59	16	13.00	1.23	(0.70 – 2.00)
2010	9,538	15,345	0.62	14	15.00	0.93	(0.51 – 1.57)
LIFECARE HOSPITALS OF PITTSBURGH — SUBURBAN CAMPUS (12385)							
2012	3,727	8,068	0.46	0	5.39	0.00	(0.00 – 0.68)
2011	4,146	7,155	0.58	2	6.44	0.31	(0.03 – 1.12)
2010	2,920	6,461	0.45	6	4.65	1.29	(0.47 – 2.81)
LIFECARE HOSPITALS OF PITTSBURGH (11945)							
2012	5,285	25,487	0.21	6	7.35	0.82	(0.30 – 1.78)
2011	6,451	27,933	0.23	5	8.86	0.56	(0.18 – 1.32)
2010	10,587	33,719	0.31	14	17.06	0.82	(0.45 – 1.38)

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Table 4.3.7 – Continued from previous page

	Catheter Days	Patient Days	Catheter Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
LOCK HAVEN HOSPITAL (12097)							
2012	547	4,456	0.12	1	0.74	1.35	(0.02 – 7.50)
2011	832	4,158	0.20	0	1.12	0.00	(0.00 – 3.27)
2010	697	4,819	0.14	1	1.15	0.87	(0.01 – 4.82)
LOWER BUCKS HOSPITAL (12390)							
2012	2,844	30,332	0.09	6	3.81	1.57	(0.58 – 3.43)
2011	3,687	31,448	0.12	5	4.62	1.08	(0.35 – 2.53)
2010	4,614	35,488	0.13	11	7.67	1.43	(0.72 – 2.57)
MAGEE REHAB HOSPITAL (12146)							
2012	8,324	26,781	0.31	20	11.81	1.69	(1.03 – 2.62)
2011	8,623	28,612	0.30	60	12.27	4.89	(3.73 – 6.29)
2010	9,125	28,308	0.32	63	15.83	3.98	(3.06 – 5.09)
MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)							
2012	12,334	85,243	0.14	10	22.68	0.44	(0.21 – 0.81)
2011	6,719	77,844	0.09	2	9.76	0.21	(0.02 – 0.74)
2010	17,908	78,301	0.23	7	31.45	0.22	(0.09 – 0.46)
MAIN LINE HOSPITAL — PAOLI (11750)							
2012	12,096	56,763	0.21	10	16.85	0.59	(0.28 – 1.09)
2011	9,458	59,968	0.16	16	12.34	1.30	(0.74 – 2.11)
2010	8,777	57,279	0.15	23	14.50	1.59	(1.00 – 2.38)
MAIN LINE HOSPITAL BRYN MAWR (11753)							
2012	12,617	71,732	0.18	17	23.41	0.73	(0.42 – 1.16)
2011	10,352	94,116	0.11	13	15.53	0.84	(0.45 – 1.43)
2010	10,872	95,295	0.11	24	19.56	1.23	(0.79 – 1.83)
MAIN LINE HOSPITAL BRYN MAWR REHABILITATION (11417)							
2012	2,030	38,707	0.05	2	2.65	0.76	(0.08 – 2.73)
2011	2,267	41,448	0.05	5	2.56	1.95	(0.63 – 4.55)
2010	2,584	43,374	0.06	2	4.41	0.45	(0.05 – 1.64)
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)							
2012	17,383	76,127	0.23	32	32.66	0.98	(0.67 – 1.38)
2011	15,890	85,861	0.19	23	25.57	0.90	(0.57 – 1.35)
2010	16,369	90,598	0.18	29	28.98	1.00	(0.67 – 1.44)
MEADVILLE MEDICAL CENTER (11583)							
2012	5,391	35,113	0.15	6	9.94	0.60	(0.22 – 1.31)
2011	6,276	36,634	0.17	6	9.99	0.60	(0.22 – 1.31)
2010	5,475	36,711	0.15	9	9.76	0.92	(0.42 – 1.75)
MEMORIAL HOSPITAL (11633)							
2012	5,260	22,194	0.24	22	9.90	2.22	(1.39 – 3.36)
2011	5,986	23,341	0.26	17	10.06	1.69	(0.98 – 2.70)
2010	5,968	22,073	0.27	16	10.42	1.54	(0.88 – 2.49)
MEMORIAL HOSPITAL, INC. TOWANDA (12549)							
2012	1,546	6,544	0.24	1	2.16	0.46	(0.01 – 2.57)
2011	1,399	4,432	0.32	0	2.00	0.00	(0.00 – 1.83)
2010	1,519	4,659	0.33	0	2.44	0.00	(0.00 – 1.50)
MERCY FITZGERALD HOSPITAL (11683)							
2012	5,801	45,719	0.13	8	10.60	0.75	(0.33 – 1.49)
2011	8,307	47,715	0.17	10	13.26	0.75	(0.36 – 1.39)
2010	9,510	50,205	0.19	17	16.81	1.01	(0.59 – 1.62)
MERCY PHILADELPHIA HOSPITAL (11946)							
2012	5,405	40,012	0.14	2	9.90	0.20	(0.02 – 0.73)
2011	7,119	43,434	0.16	0	11.27	0.00	(0.00 – 0.33)
2010	7,664	47,304	0.16	1	13.62	0.07	(0.00 – 0.41)
MERCY SUBURBAN HOSPITAL NORRISTOWN (11952)							
2012	5,920	26,003	0.23	6	11.12	0.54	(0.20 – 1.17)
2011	7,552	28,748	0.26	7	12.74	0.55	(0.22 – 1.13)
2010	7,919	30,578	0.26	5	13.85	0.36	(0.12 – 0.84)

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	Catheter Days	Patient Days	Catheter Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
MEYERSDALE COMMUNITY HOSPITAL (11968)							
2012	208	1,877	0.11	1	0.28	3.56	(0.05 – 19.81)
2011	126	1,727	0.07	0	0.15	0.00	(0.00 – 24.76)
2010	188	1,735	0.11	1	0.31	3.18	(0.04 – 17.69)
MID-VALLEY HOSPITAL (11557)							
2012	846	4,018	0.21	0	1.18	0.00	(0.00 – 3.11)
2011	952	4,247	0.22	2	1.30	1.54	(0.17 – 5.55)
2010	964	4,584	0.21	0	1.58	0.00	(0.00 – 2.33)
MILLCREEK COMMUNITY HOSPITAL (12253)							
2012	1,906	22,098	0.09	3	3.42	0.88	(0.18 – 2.56)
2011	1,861	20,062	0.09	2	2.73	0.73	(0.08 – 2.65)
2010	1,860	21,824	0.09	2	3.38	0.59	(0.07 – 2.14)
MILTON S HERSHEY MEDICAL CENTER (11747)							
2012	29,492	143,148	0.21	104	55.14	1.89	(1.54 – 2.29)
2011	32,053	144,466	0.22	96	52.85	1.82	(1.47 – 2.22)
2010	32,819	144,877	0.23	93	57.65	1.61	(1.30 – 1.98)
MINERS MEDICAL CENTER (12295)							
2012	642	3,839	0.17	1	0.88	1.13	(0.01 – 6.29)
2011	854	4,420	0.19	0	1.14	0.00	(0.00 – 3.20)
2010	845	4,521	0.19	1	1.39	0.72	(0.01 – 4.01)
MONONGAHELA VALLEY HOSPITAL (11069)							
2012	4,814	48,871	0.10	6	6.46	0.93	(0.34 – 2.02)
2011	5,503	51,094	0.11	11	6.82	1.61	(0.80 – 2.89)
2010	6,161	53,137	0.12	13	10.28	1.26	(0.67 – 2.16)
MOSES TAYLOR HOSPITAL (11528)							
2012	6,101	54,019	0.11	2	11.09	0.18	(0.02 – 0.65)
2011	7,298	57,390	0.13	6	11.16	0.54	(0.20 – 1.17)
2010	7,899	56,820	0.14	13	14.12	0.92	(0.49 – 1.57)
MOUNT NITTANY MEDICAL CENTER (11797)							
2012	12,982	50,164	0.26	26	24.53	1.06	(0.69 – 1.55)
2011	12,773	51,928	0.25	21	21.35	0.98	(0.61 – 1.50)
2010	13,071	51,043	0.26	19	22.86	0.83	(0.50 – 1.30)
MUNCY VALLEY HOSPITAL (11748)							
2012	389	4,703	0.08	0	0.52	0.00	(0.00 – 7.08)
2011	523	4,785	0.11	3	0.65	4.62	(0.93 – 13.50)
2010	303	4,632	0.07	2	0.52	3.88	(0.44 – 14.00)
NASON HOSPITAL (11907)							
2012	1,910	8,346	0.23	2	2.67	0.75	(0.08 – 2.70)
2011	1,745	8,468	0.21	2	2.36	0.85	(0.10 – 3.06)
2010	1,738	8,793	0.20	2	2.85	0.70	(0.08 – 2.54)
NAZARETH HOSPITAL (11919)							
2012	9,279	45,817	0.20	7	12.89	0.54	(0.22 – 1.12)
2011	10,822	46,634	0.23	18	14.87	1.21	(0.72 – 1.91)
2010	12,157	48,223	0.25	22	19.74	1.11	(0.70 – 1.69)
OHIO VALLEY GENERAL HOSPITAL (12298)							
2012	2,896	23,943	0.12	0	3.93	0.00	(0.00 – 0.93)
2011	3,649	21,440	0.17	3	4.81	0.62	(0.13 – 1.82)
2010	3,583	19,315	0.19	1	5.88	0.17	(0.00 – 0.95)
OSS ORTHOPAEDIC HOSPITAL (18467)							
2012	458	3,888	0.12	0	0.62	0.00	(0.00 – 5.91)
2011	387	3,302	0.12	3	0.48	6.19	(1.24 – 18.07)
2010	.	.	.	.	.	.	.
PALMERTON HOSPITAL (12396)							
2012	972	11,321	0.09	1	1.30	0.77	(0.01 – 4.29)
2011	1,177	11,229	0.10	0	1.45	0.00	(0.00 – 2.52)
2010	1,172	11,028	0.11	0	1.96	0.00	(0.00 – 1.87)

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	Catheter Days	Patient Days	Catheter Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
PENN PRESBYTERIAN MEDICAL CENTER (11814)							
2012	11,001	62,055	0.18	18	20.42	0.88	(0.52 – 1.39)
2011	11,430	65,272	0.18	13	18.25	0.71	(0.38 – 1.22)
2010	11,769	64,014	0.18	19	20.83	0.91	(0.55 – 1.42)
PENN STATE HERSHEY REHABILITATION LLC (11915)							
2012	1,016	15,851	0.06	3	1.34	2.24	(0.45 – 6.56)
2011	813	14,130	0.06	3	0.93	3.24	(0.65 – 9.47)
2010	457	9,804	0.05	2	0.85	2.36	(0.26 – 8.51)
PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS (11448)							
2012	15,632	104,403	0.15	39	28.79	1.35	(0.96 – 1.85)
2011	19,306	129,191	0.15	30	30.18	0.99	(0.67 – 1.42)
2010	20,956	112,059	0.19	36	37.06	0.97	(0.68 – 1.34)
PENNSYLVANIA PSYCHIATRIC INSTITUTE (14190)							
2012	1	19,892	0.00	0	0.00	0.00	(0.00 –3,915.50)
2011	18	20,269	0.00	0	0.01	0.00	(0.00 – 313.93)
2010	.	.	.	.	.	.	.
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)							
2012	5,586	33,584	0.17	7	7.69	0.91	(0.36 – 1.88)
2011	5,834	34,445	0.17	9	7.68	1.17	(0.53 – 2.22)
2010	6,757	34,362	0.20	7	11.07	0.63	(0.25 – 1.30)
PHYSICIANS CARE SURGICAL HOSPITAL (19630)							
2012	105	381	0.28	0	0.15	0.00	(0.00 – 24.77)
2011	53	215	0.25	0	0.07	0.00	(0.00 – 49.96)
2010	.	.	.	.	.	.	.
PINNACLE HEALTH HOSPITALS (10122)							
2012	36,426	156,563	0.23	30	68.49	0.44	(0.30 – 0.63)
2011	40,783	149,719	0.27	50	69.13	0.72	(0.54 – 0.95)
2010	41,366	144,537	0.29	60	72.07	0.83	(0.64 – 1.07)
POCONO MEDICAL CENTER (11772)							
2012	6,747	55,157	0.12	12	12.31	0.98	(0.50 – 1.70)
2011	8,673	56,600	0.15	7	13.60	0.51	(0.21 – 1.06)
2010	8,386	51,833	0.16	11	14.91	0.74	(0.37 – 1.32)
POTTSTOWN MEMORIAL MEDICAL CENTER (11983)							
2012	7,150	42,914	0.17	12	9.84	1.22	(0.63 – 2.13)
2011	9,319	43,413	0.21	9	12.67	0.71	(0.32 – 1.35)
2010	9,220	43,283	0.21	16	15.06	1.06	(0.61 – 1.73)
PUNXSUTAWNEY AREA HOSPITAL (11830)							
2012	1,623	7,111	0.23	0	2.27	0.00	(0.00 – 1.62)
2011	1,505	7,380	0.20	2	2.03	0.98	(0.11 – 3.55)
2010	1,569	7,440	0.21	2	2.56	0.78	(0.09 – 2.82)
READING HOSPITAL AND MEDICAL CENTER (12375)							
2012	22,821	165,967	0.14	27	41.85	0.65	(0.43 – 0.94)
2011	23,594	158,238	0.15	32	36.87	0.87	(0.59 – 1.23)
2010	22,843	149,322	0.15	24	40.68	0.59	(0.38 – 0.88)
REGIONAL HOSPITAL OF SCRANTON (12533)							
2012	13,864	49,636	0.28	6	26.30	0.23	(0.08 – 0.50)
2011	12,236	43,923	0.28	6	20.80	0.29	(0.11 – 0.63)
2010	11,489	44,463	0.26	7	20.09	0.35	(0.14 – 0.72)
RIDDLE MEMORIAL HOSPITAL (11731)							
2012	15,682	47,311	0.33	12	22.31	0.54	(0.28 – 0.94)
2011	17,293	49,126	0.35	8	25.13	0.32	(0.14 – 0.63)
2010	17,378	49,708	0.35	9	27.90	0.32	(0.15 – 0.61)
ROBERT PACKER HOSPITAL (12422)							
2012	12,963	67,861	0.19	19	24.15	0.79	(0.47 – 1.23)
2011	12,399	63,820	0.19	6	20.08	0.30	(0.11 – 0.65)
2010	12,109	61,472	0.20	9	21.38	0.42	(0.19 – 0.80)

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Table 4.3.7 – Continued from previous page

	Catheter Days	Patient Days	Catheter Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
ROXBOROUGH MEMORIAL HOSPITAL (11978)							
2012	3,955	25,179	0.16	0	7.30	0.00	(0.00 – 0.50)
2011	5,580	29,113	0.19	9	9.02	1.00	(0.46 – 1.89)
2010	6,047	30,472	0.20	7	10.67	0.66	(0.26 – 1.35)
SACRED HEART HOSPITAL (11684)							
2012	2,746	32,025	0.09	3	4.92	0.61	(0.12 – 1.78)
2011	3,228	33,338	0.10	8	3.94	2.03	(0.87 – 4.00)
2010	3,274	30,395	0.11	10	5.48	1.83	(0.87 – 3.36)
SCHUYLKILL MEDICAL CENTER — EAST NORWEGIAN STREET (11922)							
2012	3,459	26,766	0.13	2	4.71	0.43	(0.05 – 1.53)
2011	4,153	30,491	0.14	3	5.31	0.56	(0.11 – 1.65)
2010	5,246	32,932	0.16	14	8.66	1.62	(0.88 – 2.71)
SCHUYLKILL MEDICAL CENTER — SOUTH JACKSON STREET (12087)							
2012	4,114	34,712	0.12	5	5.57	0.90	(0.29 – 2.09)
2011	4,268	37,078	0.12	3	5.34	0.56	(0.11 – 1.64)
2010	4,956	38,688	0.13	5	8.24	0.61	(0.20 – 1.42)
SELECT SPECIALITY HOSPITAL — CENTRAL PENNSYLVANIA (YORK) (12334)							
2012	3,182	5,709	0.56	6	4.64	1.29	(0.47 – 2.81)
2011	3,106	5,387	0.58	10	4.82	2.07	(0.99 – 3.81)
2010	2,627	5,309	0.49	10	4.17	2.40	(1.15 – 4.41)
SELECT SPECIALITY HOSPITAL — ERIE (11880)							
2012	1,446	9,699	0.15	5	1.98	2.52	(0.81 – 5.89)
2011	2,346	10,883	0.22	11	3.19	3.45	(1.72 – 6.17)
2010	2,321	10,950	0.21	21	3.79	5.54	(3.43 – 8.47)
SELECT SPECIALITY HOSPITAL — JOHNSTOWN (12299)							
2012	7,072	11,242	0.63	7	10.37	0.67	(0.27 – 1.39)
2011	6,716	10,110	0.66	9	10.63	0.85	(0.39 – 1.61)
2010	6,699	10,513	0.64	3	10.53	0.28	(0.06 – 0.83)
SELECT SPECIALTY HOSPITAL — CENTRAL PA (13921)							
2012	2,921	9,672	0.30	8	4.14	1.93	(0.83 – 3.81)
2011	3,426	9,728	0.35	8	4.98	1.61	(0.69 – 3.17)
2010	3,258	7,323	0.44	4	5.19	0.77	(0.21 – 1.97)
SELECT SPECIALTY HOSPITAL — CENTRAL PENNSYLVANIA (CAMP HILL) (12147)							
2012	3,458	9,567	0.36	14	4.94	2.83	(1.55 – 4.76)
2011	3,997	8,609	0.46	12	6.03	1.99	(1.03 – 3.48)
2010	3,753	7,225	0.52	9	5.94	1.51	(0.69 – 2.88)
SELECT SPECIALTY HOSPITAL — DANVILLE (12123)							
2012	750	4,886	0.15	2	1.03	1.94	(0.22 – 7.02)
2011	699	5,168	0.14	2	0.89	2.24	(0.25 – 8.09)
2010	1,086	5,097	0.21	1	1.77	0.56	(0.01 – 3.14)
SELECT SPECIALTY HOSPITAL — MCKEESPORT, INC. (12271)							
2012	3,226	7,993	0.40	1	4.63	0.22	(0.00 – 1.20)
2011	2,504	7,857	0.32	1	3.59	0.28	(0.00 – 1.55)
2010	3,376	7,001	0.48	2	5.36	0.37	(0.04 – 1.35)
SELECT SPECIALTY HOSPITAL — PITTSBURGH/UPMC (12009)							
2012	5,036	8,770	0.57	4	7.35	0.54	(0.15 – 1.39)
2011	5,222	8,138	0.64	5	8.23	0.61	(0.20 – 1.42)
2010	5,086	7,656	0.66	9	7.98	1.13	(0.51 – 2.14)
SELECT SPECIALTY HOSPITAL LAUREL HIGHLANDS, INC. (12108)							
2012	4,174	7,337	0.57	5	6.09	0.82	(0.26 – 1.92)
2011	4,970	7,750	0.64	2	7.83	0.26	(0.03 – 0.92)
2010	5,263	9,020	0.58	1	8.30	0.12	(0.00 – 0.67)
SHARON REGIONAL HEALTH SYSTEM (12250)							
2012	5,685	33,922	0.17	0	7.83	0.00	(0.00 – 0.47)
2011	5,733	37,998	0.15	1	7.43	0.13	(0.00 – 0.75)
2010	5,671	35,112	0.16	3	9.35	0.32	(0.06 – 0.94)

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	Catheter Days	Patient Days	Catheter Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
SHRINERS HOSPITAL FOR CHILDREN — PHILADELPHIA (12244)							
2012	1,506	4,835	0.31	2	2.14	0.94	(0.11 – 3.38)
2011	1,305	4,514	0.29	1	1.85	0.54	(0.01 – 3.01)
2010	842	4,863	0.17	1	1.39	0.72	(0.01 – 4.02)
SOLDIERS & SAILORS MEM HOSPITAL (11688)							
2012	1,708	11,622	0.15	2	3.14	0.64	(0.07 – 2.30)
2011	1,744	11,733	0.15	2	2.26	0.89	(0.10 – 3.20)
2010	1,682	12,009	0.14	2	2.79	0.72	(0.08 – 2.59)
SOMERSET HOSPITAL (12282)							
2012	3,839	17,538	0.22	3	5.35	0.56	(0.11 – 1.64)
2011	4,185	19,366	0.22	0	5.70	0.00	(0.00 – 0.64)
2010	3,810	19,768	0.19	0	6.25	0.00	(0.00 – 0.59)
SOUTHWEST REGIONAL MEDICAL CENTER (11942)							
2012	1,772	14,297	0.12	0	2.41	0.00	(0.00 – 1.52)
2011	1,936	16,853	0.11	0	2.42	0.00	(0.00 – 1.52)
2010	2,168	17,904	0.12	2	3.61	0.55	(0.06 – 2.00)
SPECIAL CARE HOSPITAL (12604)							
2012	5,144	13,572	0.38	15	7.36	2.04	(1.14 – 3.36)
2011	5,277	14,958	0.35	24	7.67	3.13	(2.00 – 4.66)
2010	4,864	16,248	0.30	26	7.85	3.31	(2.16 – 4.85)
ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)							
2012	1,033	47,658	0.02	4	1.74	2.31	(0.62 – 5.90)
2011	1,149	46,423	0.02	7	1.41	4.97	(1.99 – 10.23)
2010	1,048	41,556	0.03	3	1.99	1.51	(0.30 – 4.41)
ST. CLAIR MEMORIAL HOSPITAL (10561)							
2012	9,905	83,473	0.12	14	18.04	0.78	(0.42 – 1.30)
2011	10,378	85,606	0.12	2	15.77	0.13	(0.01 – 0.46)
2010	9,987	86,799	0.12	12	17.97	0.67	(0.34 – 1.17)
ST. JOSEPH MEDICAL CENTER (11961)							
2012	6,083	37,252	0.16	9	11.25	0.80	(0.37 – 1.52)
2011	6,250	37,733	0.17	6	9.91	0.61	(0.22 – 1.32)
2010	6,322	38,065	0.17	9	11.23	0.80	(0.37 – 1.52)
ST. JOSEPHS HOSPITAL (12438)							
2012	4,050	31,637	0.13	7	7.40	0.95	(0.38 – 1.95)
2011	4,019	23,411	0.17	13	6.40	2.03	(1.08 – 3.47)
2010	6,180	22,626	0.27	21	10.78	1.95	(1.20 – 2.98)
ST. LUKES HOSPITAL ANDERSON CAMPUS (21487)							
2012	2,145	16,294	0.13	4	3.93	1.02	(0.27 – 2.61)
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
ST. LUKES HOSPITAL BETHLEHEM (11718)							
2012	22,652	134,196	0.17	42	41.95	1.00	(0.72 – 1.35)
2011	29,714	142,433	0.21	62	48.59	1.28	(0.98 – 1.64)
2010	34,009	146,029	0.23	56	59.68	0.94	(0.71 – 1.22)
ST. LUKES MINERS MEMORIAL HOSPITAL (11784)							
2012	1,592	7,014	0.23	1	2.22	0.45	(0.01 – 2.50)
2011	1,714	6,390	0.27	3	2.40	1.25	(0.25 – 3.65)
2010	1,991	6,549	0.30	1	3.21	0.31	(0.00 – 1.73)
ST. LUKES QUAKERTOWN HOSPITAL (11711)							
2012	1,163	14,938	0.08	1	1.54	0.65	(0.01 – 3.60)
2011	1,478	15,057	0.10	3	1.81	1.66	(0.33 – 4.85)
2010	1,592	14,903	0.11	2	2.66	0.75	(0.08 – 2.71)
ST. MARY MEDICAL CENTER (11885)							
2012	12,939	94,985	0.14	38	17.64	2.15	(1.52 – 2.96)
2011	14,511	99,643	0.15	31	18.72	1.66	(1.12 – 2.35)
2010	13,987	99,895	0.14	50	23.19	2.16	(1.60 – 2.84)

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Table 4.3.7 – Continued from previous page

	Catheter Days	Patient Days	Catheter Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
ST. MARY MEDICAL CENTER REHAB (12483)							
2012	445	9,315	0.05	2	0.58	3.46	(0.39 – 12.51)
2011	405	8,745	0.05	2	0.45	4.47	(0.50 – 16.12)
2010	387	6,712	0.06	1	0.66	1.51	(0.02 – 8.41)
ST. VINCENT HEALTH CENTER (11699)							
2012	17,723	76,297	0.23	30	33.32	0.90	(0.61 – 1.29)
2011	19,818	83,108	0.24	32	32.99	0.97	(0.66 – 1.37)
2010	20,569	90,106	0.23	44	36.12	1.22	(0.88 – 1.64)
SUNBURY COMMUNITY HOSPITAL (12105)							
2012	1,028	6,518	0.16	0	1.41	0.00	(0.00 – 2.60)
2011	1,262	7,897	0.16	0	1.65	0.00	(0.00 – 2.22)
2010	1,397	7,978	0.18	0	2.30	0.00	(0.00 – 1.60)
SURGICAL INSTITUTE OF READING (12535)							
2012	605	2,585	0.23	4	0.85	4.73	(1.27 – 12.10)
2011	574	2,646	0.22	1	0.78	1.28	(0.02 – 7.12)
2010	657	2,962	0.22	1	1.07	0.93	(0.01 – 5.19)
SURGICAL SPECIALTY CENTER AT COORDINATED HEALTH, THE (15259)							
2012	871	2,052	0.42	0	1.25	0.00	(0.00 – 2.93)
2011	787	1,913	0.41	0	1.17	0.00	(0.00 – 3.14)
2010	643	1,611	0.40	0	1.03	0.00	(0.00 – 3.57)
TEMPLE UNIVERSITY HOSPITAL (12382)							
2012	31,094	152,814	0.20	45	58.10	0.77	(0.56 – 1.04)
2011	32,226	145,364	0.22	48	53.13	0.90	(0.67 – 1.20)
2010	33,608	141,832	0.24	50	58.94	0.85	(0.63 – 1.12)
THE GOOD SAMARITAN HOSPITAL (11712)							
2012	10,182	39,790	0.26	15	14.31	1.05	(0.59 – 1.73)
2011	13,414	42,849	0.31	8	19.19	0.42	(0.18 – 0.82)
2010	12,837	41,180	0.31	12	20.69	0.58	(0.30 – 1.01)
THE GOOD SHEPHERD REHABILITATION HOSPITAL (11896)							
2012	2,052	28,461	0.07	8	2.71	2.95	(1.27 – 5.81)
2011	2,351	29,920	0.08	4	2.79	1.43	(0.39 – 3.67)
2010	2,403	24,553	0.10	4	4.03	0.99	(0.27 – 2.54)
THE WASHINGTON HOSPITAL (11460)							
2012	8,575	54,486	0.16	9	11.77	0.76	(0.35 – 1.45)
2011	9,417	62,228	0.15	12	12.21	0.98	(0.51 – 1.72)
2010	9,718	65,063	0.15	9	16.07	0.56	(0.26 – 1.06)
THE WESTERN PENNSYLVANIA HOSPITAL (11864)							
2012	5,002	53,366	0.09	8	9.01	0.89	(0.38 – 1.75)
2011	5,243	41,736	0.13	1	8.01	0.12	(0.00 – 0.69)
2010	19,759	88,109	0.22	23	34.72	0.66	(0.42 – 0.99)
THOMAS JEFFERSON UNIV HOSP - METHODIST (12017)							
2012	8,430	48,112	0.18	25	15.64	1.60	(1.03 – 2.36)
2011	10,144	46,785	0.22	30	16.67	1.80	(1.21 – 2.57)
2010	10,107	48,856	0.21	34	17.81	1.91	(1.32 – 2.67)
THOMAS JEFFERSON UNIV HOSPITAL (11506)							
2012	56,327	199,428	0.28	131	106.90	1.23	(1.02 – 1.45)
2011	60,543	192,353	0.31	151	104.64	1.44	(1.22 – 1.69)
2010	59,793	176,486	0.34	123	103.56	1.19	(0.99 – 1.42)
TITUSVILLE AREA HOSPITAL (11738)							
2012	884	7,565	0.12	4	1.20	3.34	(0.90 – 8.56)
2011	1,084	7,822	0.14	0	1.39	0.00	(0.00 – 2.64)
2010	1,224	8,438	0.15	0	2.03	0.00	(0.00 – 1.81)

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Table 4.3.7 – Continued from previous page

	Catheter Days	Patient Days	Catheter Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
TORRANCE STATE HOSPITAL (12091)							
2012	98	113,753	0.00	0	0.11	0.00	(0.00 – 34.91)
2011	145	109,720	0.00	0	0.10	0.00	(0.00 – 36.94)
2010	5	103,015	0.00	0	0.01	0.00	(0.00 – 334.56)
TROY COMMUNITY HOSPITAL (12018)							
2012	1,658	7,782	0.21	6	2.31	2.60	(0.95 – 5.65)
2011	1,675	7,358	0.23	2	2.30	0.87	(0.10 – 3.15)
2010	1,894	7,457	0.25	1	3.07	0.33	(0.00 – 1.81)
TYLER MEMORIAL HOSPITAL (11829)							
2012	870	5,258	0.17	2	1.20	1.67	(0.19 – 6.03)
2011	1,127	6,054	0.19	5	1.50	3.33	(1.07 – 7.76)
2010	1,408	6,047	0.23	3	2.29	1.31	(0.26 – 3.82)
TYRONE HOSPITAL (12717)							
2012	401	2,809	0.14	1	0.55	1.82	(0.02 – 10.15)
2011	416	2,672	0.16	0	0.54	0.00	(0.00 – 6.77)
2010	565	2,567	0.22	1	0.92	1.08	(0.01 – 6.04)
UNIONTOWN HOSPITAL (10441)							
2012	11,776	39,143	0.30	3	22.42	0.13	(0.03 – 0.39)
2011	9,919	42,132	0.24	1	16.49	0.06	(0.00 – 0.34)
2010	8,643	46,143	0.19	20	15.28	1.31	(0.80 – 2.02)
UPMC BEDFORD (11680)							
2012	1,425	6,670	0.21	2	1.99	1.01	(0.11 – 3.64)
2011	1,194	6,685	0.18	3	1.58	1.89	(0.38 – 5.53)
2010	1,379	6,977	0.20	1	2.26	0.44	(0.01 – 2.46)
UPMC HAMOT (11725)							
2012	20,964	87,032	0.24	41	39.49	1.04	(0.75 – 1.41)
2011	21,533	87,580	0.25	30	36.00	0.83	(0.56 – 1.19)
2010	20,719	81,512	0.25	57	36.25	1.57	(1.19 – 2.04)
UPMC HORIZON (11675)							
2012	6,871	34,860	0.20	6	12.82	0.47	(0.17 – 1.02)
2011	6,845	34,976	0.20	4	9.19	0.44	(0.12 – 1.11)
2010	6,795	40,285	0.17	2	11.19	0.18	(0.02 – 0.65)
UPMC MCKEESPORT (11707)							
2012	6,040	56,499	0.11	6	10.95	0.55	(0.20 – 1.19)
2011	6,572	64,473	0.10	11	9.76	1.13	(0.56 – 2.02)
2010	7,049	62,590	0.11	13	12.69	1.02	(0.54 – 1.75)
UPMC MERCY (10384)							
2012	28,056	147,425	0.19	29	52.25	0.55	(0.37 – 0.80)
2011	24,575	144,046	0.17	33	39.11	0.84	(0.58 – 1.19)
2010	26,695	145,652	0.18	42	47.24	0.89	(0.64 – 1.20)
UPMC NORTHWEST (11837)							
2012	5,669	34,147	0.17	9	7.80	1.15	(0.53 – 2.19)
2011	5,062	35,676	0.14	7	6.51	1.08	(0.43 – 2.22)
2010	5,452	37,231	0.15	6	9.02	0.66	(0.24 – 1.45)
UPMC PASSAVANT (11242)							
2012	27,546	102,897	0.27	33	38.79	0.85	(0.59 – 1.19)
2011	30,982	105,433	0.29	30	43.94	0.68	(0.46 – 0.97)
2010	25,381	96,673	0.26	65	41.15	1.58	(1.22 – 2.01)
UPMC PRESBYTERIAN SHADYSIDE — PRESBYTERIAN (10348)							
2012	71,097	227,985	0.31	215	135.56	1.59	(1.38 – 1.81)
2011	80,086	224,769	0.36	124	140.75	0.88	(0.73 – 1.05)
2010	86,902	222,461	0.39	138	149.76	0.92	(0.77 – 1.09)
UPMC PRESBYTERIAN SHADYSIDE — SHADYSIDE (10118)							
2012	40,073	157,128	0.26	55	75.68	0.73	(0.55 – 0.95)
2011	45,039	170,109	0.26	49	76.05	0.64	(0.48 – 0.85)
2010	34,858	164,107	0.21	42	61.37	0.68	(0.49 – 0.93)

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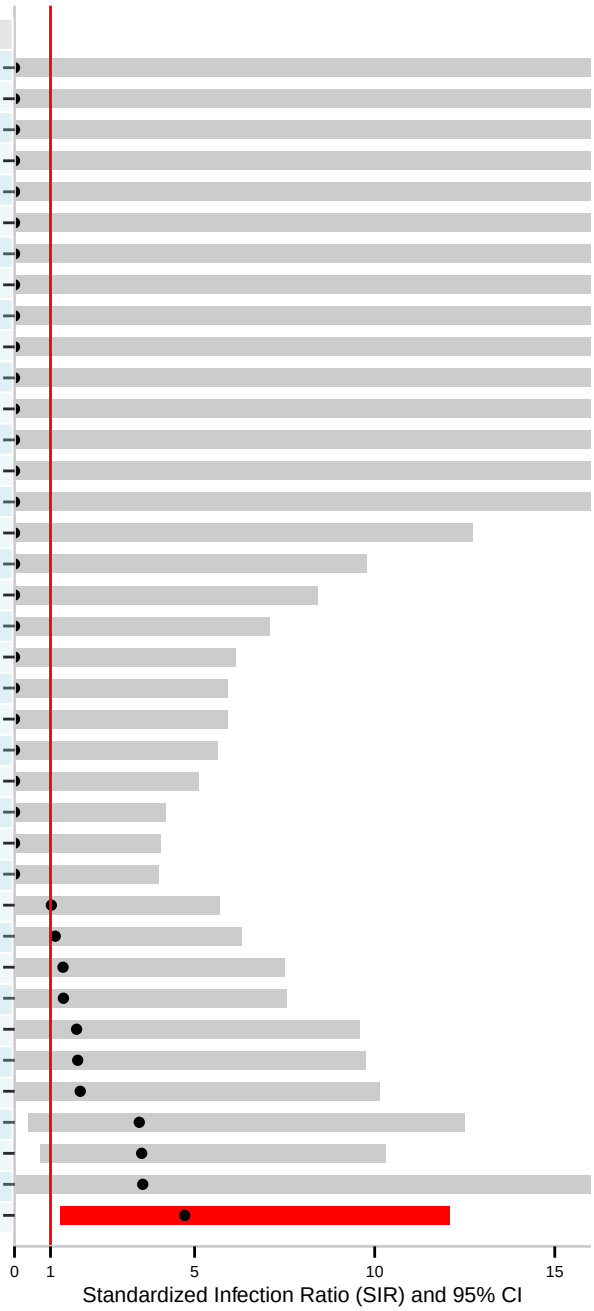
Table 4.3.7 – Continued from previous page

	Catheter Days	Patient Days	Catheter Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
UPMC PRESBYTERIAN SHADYSIDE — WPIC (13702)							
2012	193	104,169	0.00	0	0.29	0.00	(0.00 – 12.72)
2011	314	102,650	0.00	2	0.29	6.88	(0.77 – 24.84)
2010	378	102,693	0.00	1	0.77	1.30	(0.02 – 7.25)
UPMC ST MARGARET (11561)							
2012	18,429	75,976	0.24	24	34.72	0.69	(0.44 – 1.03)
2011	18,141	79,022	0.23	15	30.05	0.50	(0.28 – 0.82)
2010	18,982	76,041	0.25	30	33.23	0.90	(0.61 – 1.29)
WARREN GENERAL HOSPITAL (12216)							
2012	1,609	13,257	0.12	1	2.18	0.46	(0.01 – 2.55)
2011	1,965	13,033	0.15	2	2.55	0.79	(0.09 – 2.83)
2010	2,357	11,870	0.20	4	3.86	1.04	(0.28 – 2.65)
WAYNE MEMORIAL HOSPITAL (12004)							
2012	2,594	18,519	0.14	2	3.54	0.56	(0.06 – 2.04)
2011	2,734	15,942	0.17	5	3.61	1.39	(0.45 – 3.24)
2010	2,637	18,141	0.15	2	4.37	0.46	(0.05 – 1.65)
WAYNESBORO HOSPITAL (11642)							
2012	1,595	9,841	0.16	2	2.19	0.91	(0.10 – 3.29)
2011	1,727	9,729	0.18	1	2.29	0.44	(0.01 – 2.43)
2010	1,820	9,970	0.18	2	2.99	0.67	(0.08 – 2.42)
WERNERSVILLE STATE HOSPITAL (12368)							
2012	120	97,099	0.00	0	0.13	0.00	(0.00 – 28.03)
2011	166	97,823	0.00	0	0.12	0.00	(0.00 – 31.20)
2010	275	89,641	0.00	0	0.52	0.00	(0.00 – 7.04)
WESTFIELD HOSPITAL (12487)							
2012	141	1,361	0.10	0	0.19	0.00	(0.00 – 19.33)
2011	172	2,004	0.09	0	0.21	0.00	(0.00 – 17.75)
2010	133	1,823	0.07	0	0.23	0.00	(0.00 – 16.26)
WILKES-BARRE GENERAL HOSPITAL (11916)							
2012	22,525	88,283	0.26	45	42.54	1.06	(0.77 – 1.42)
2011	21,908	84,294	0.26	52	36.90	1.41	(1.05 – 1.85)
2010	22,606	82,205	0.27	51	36.60	1.39	(1.04 – 1.83)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)							
2012	7,834	53,152	0.15	7	14.41	0.49	(0.19 – 1.00)
2011	9,413	54,085	0.17	20	15.02	1.33	(0.81 – 2.06)
2010	9,345	49,673	0.19	12	16.52	0.73	(0.37 – 1.27)
WINDBER HOSPITAL (12031)							
2012	1,261	7,704	0.16	4	1.73	2.31	(0.62 – 5.90)
2011	1,191	7,878	0.15	2	1.54	1.29	(0.15 – 4.67)
2010	1,309	8,114	0.16	1	2.16	0.46	(0.01 – 2.58)
YORK HOSPITAL (10108)							
2012	27,895	162,496	0.17	67	51.70	1.30	(1.00 – 1.65)
2011	28,191	175,653	0.16	74	44.50	1.66	(1.31 – 2.09)
2010	31,671	167,442	0.19	72	55.99	1.29	(1.01 – 1.62)

Figure 4.3.3: Number of Observed (Obs.) Catheter-Associated Urinary Tract Infections (CAUTI) and Relative Ranking of Facilities by Standardized Infection Ratio (SIR) — Pennsylvania, 2012

Grouped by Number of Predicted (Pred.) Infections: <1

Obs.	Pred.	SIR	Facility and NHSN ID
0	0.00	0.0	PENNSYLVANIA PSYCHIATRIC INSTITUTE (14190)
0	0.01	0.0	FIRST HOSPITAL OF WYOMING VALLEY (12050)
0	0.01	0.0	FRIENDS HOSPITAL (12488)
0	0.03	0.0	DIVINE PROVIDENCE HOSPITAL (11743)
0	0.03	0.0	KENSINGTON HOSPITAL (12609)
0	0.04	0.0	EAGLEVILLE HOSPITAL (12965)
0	0.05	0.0	EDGEWOOD SURGICAL HOSPITAL (12552)
0	0.11	0.0	TORRANCE STATE HOSPITAL (12091)
0	0.11	0.0	CHILDRENS HOME OF PITTSBURGH, THE (12336)
0	0.13	0.0	WERNERSVILLE STATE HOSPITAL (12368)
0	0.15	0.0	PHYSICIANS CARE SURGICAL HOSPITAL (19630)
0	0.15	0.0	BUCKTAIL MEDICAL CENTER (12461)
0	0.17	0.0	CHILDRENS INSTITUTE OF PITTSBURGH (12266)
0	0.19	0.0	WESTFIELD HOSPITAL (12487)
0	0.22	0.0	BUCKS COUNTY SPECIALTY HOSPITAL (15202)
0	0.29	0.0	UPMC PRESBYTERIAN SHADYSIDE −−− WPIC (13702)
0	0.37	0.0	BARIX CLINICS OF PENNSYLVANIA (12037)
0	0.43	0.0	ADVANCED SURGICAL HOSPITAL (16317)
0	0.52	0.0	MUNCY VALLEY HOSPITAL (11748)
0	0.60	0.0	CORRY MEMORIAL HOSPITAL (12283)
0	0.62	0.0	KANE COMMUNITY HOSPITAL (12111)
0	0.62	0.0	OSS ORTHOPAEDIC HOSPITAL (18467)
0	0.65	0.0	GEISINGER HEALTHSOUTH REHABILITATION HOSPITAL (11993)
0	0.71	0.0	HEALTHSOUTH READING REHABILITATION HOSPITAL (12139)
0	0.87	0.0	JERSEY SHORE HOSPITAL (11689)
0	0.90	0.0	ENDLESS MOUNTAINS HEALTH SYSTEMS (11817)
0	0.92	0.0	BARNES−KASSON COUNTY HOSPITAL (12404)
1	0.98	1.0	HEALTHSOUTH REHABILITATION HOSPITAL OF ERIE (11810)
1	0.88	1.1	MINERS MEDICAL CENTER (12295)
1	0.74	1.3	LOCK HAVEN HOSPITAL (12097)
1	0.74	1.4	DANVILLE STATE HOSPITAL (11848)
1	0.58	1.7	FULTON COUNTY MEDICAL CENTER (11939)
1	0.57	1.8	LANCASTER REHABILITATION HOSPITAL (12628)
1	0.55	1.8	TYRONE HOSPITAL (12717)
2	0.58	3.5	ST. MARY MEDICAL CENTER REHAB (12483)
3	0.85	3.5	HEALTHSOUTH NITTANY VALLEY REHABILITATION HOSPITAL (11667)
1	0.28	3.6	MEYERSDALE COMMUNITY HOSPITAL (11968)
4	0.85	4.7	SURGICAL INSTITUTE OF READING (12535)

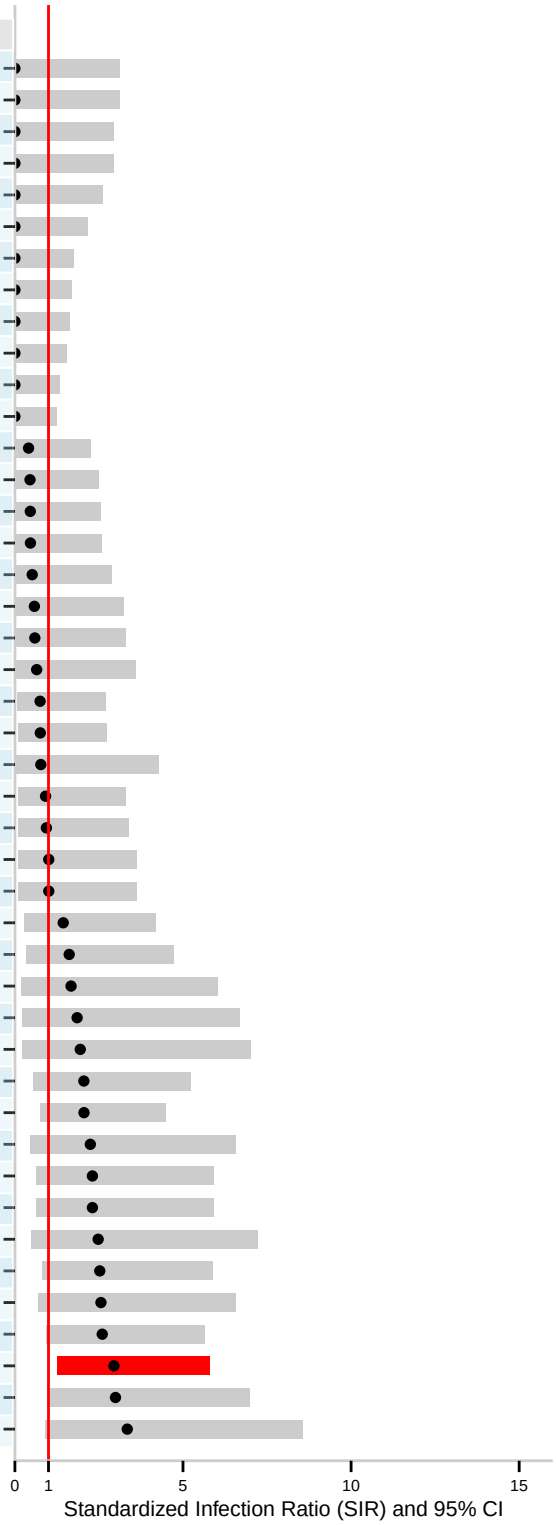


Better than predicted | Not different than predicted | Worse than predicted

Figure 4.3.4: Number of Observed (Obs.) Catheter-Associated Urinary Tract Infections (CAUTI) and Relative Ranking of Facilities by Standardized Infection Ratio (SIR) — Pennsylvania, 2012

Grouped by Number of Predicted (Pred.) Infections: 1–2.99

Obs.	Pred.	SIR	Facility and NHSN ID
0	1.18	0.0	MID−VALLEY HOSPITAL (11557)
0	1.18	0.0	HEALTHSOUTH REHABILITATION HOSPITAL OF SEWICKLEY (12066)
0	1.25	0.0	HIGHLANDS HOSPITAL (11902)
0	1.25	0.0	SURGICAL SPECIALTY CENTER AT COORDINATED HEALTH, THE (15259)
0	1.41	0.0	SUNBURY COMMUNITY HOSPITAL (12105)
0	1.70	0.0	CLARKS SUMMIT STATE HOSPITAL (12051)
0	2.09	0.0	CROZER CHESTER MEDICAL CENTER SPRINGFIELD (11851)
0	2.16	0.0	GEISINGER−BLOOMSBURG HOSPITAL (12008)
0	2.27	0.0	PUNXSUTAWNEY AREA HOSPITAL (11830)
0	2.41	0.0	SOUTHWEST REGIONAL MEDICAL CENTER (11942)
0	2.74	0.0	BRADFORD REGIONAL MEDICAL CENTER (12361)
0	2.98	0.0	BERWICK HOSPITAL CENTER (11442)
1	2.46	0.4	HEALTHSOUTH REHABILITATION HOSPITAL OF MECHANICSBURG (12402)
1	2.22	0.4	ST. LUKES MINERS MEMORIAL HOSPITAL (11784)
1	2.18	0.5	WARREN GENERAL HOSPITAL (12216)
1	2.16	0.5	MEMORIAL HOSPITAL, INC. TOWANDA (12549)
1	1.94	0.5	ELLWOOD CITY HOSPITAL (11779)
1	1.73	0.6	GROVE CITY MEDICAL CENTER (11722)
1	1.69	0.6	BROOKVILLE HOSPITAL (12418)
1	1.54	0.6	ST. LUKES QUAKERTOWN HOSPITAL (11711)
2	2.67	0.7	NASON HOSPITAL (11907)
2	2.65	0.8	MAIN LINE HOSPITAL BRYN MAWR REHABILITATION (11417)
1	1.30	0.8	PALMERTON HOSPITAL (12396)
2	2.19	0.9	WAYNESBORO HOSPITAL (11642)
2	2.14	0.9	SHRINERS HOSPITAL FOR CHILDREN −−− PHILADELPHIA (12244)
2	1.99	1.0	UPMC BEDFORD (11680)
2	1.98	1.0	ALLIED SERVICES INSTITUTE OF REHABILITATION (12591)
3	2.09	1.4	J C BLAIR MEMORIAL HOSP (11724)
3	1.86	1.6	HEALTHSOUTH REHABILITATION HOSPITAL OF ALTOONA (11903)
2	1.20	1.7	TYLER MEMORIAL HOSPITAL (11829)
2	1.08	1.9	CRICHTON REHABILITATION CENTER (12273)
2	1.03	1.9	SELECT SPECIALTY HOSPITAL −−− DANVILLE (12123)
4	1.95	2.1	COORDINATED HEALTH ORTHOPEDIC HOSPITAL, LLC (11872)
6	2.92	2.1	GNADEN HUETTEN MEMORIAL HOSPITAL (12241)
3	1.34	2.2	PENN STATE HERSHEY REHABILITATION LLC (11915)
4	1.74	2.3	ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)
4	1.73	2.3	WINDBER HOSPITAL (12031)
3	1.21	2.5	JOHN HEINZ INSTITUTE OF REHABILITATION (11861)
5	1.98	2.5	SELECT SPECIALITY HOSPITAL −−− ERIE (11880)
4	1.56	2.6	HEALTHSOUTH REHABILITATION HOSPITAL OF YORK (12058)
6	2.31	2.6	TROY COMMUNITY HOSPITAL (12018)
8	2.71	2.9	THE GOOD SHEPHERD REHABILITATION HOSPITAL (11896)
5	1.67	3.0	CHARLES COLE MEMORIAL HOSPITAL (11956)
4	1.20	3.3	TITUSVILLE AREA HOSPITAL (11738)

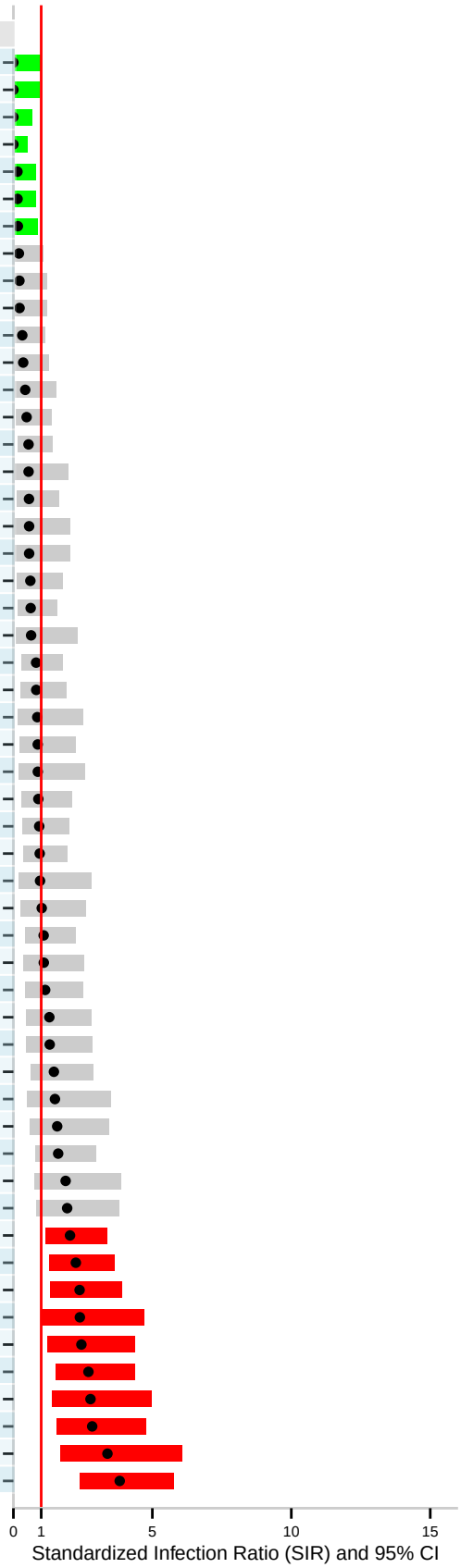


Better than predicted | Not different than predicted | Worse than predicted

Figure 4.3.5: Number of Observed (Obs.) Catheter-Associated Urinary Tract Infections (CAUTI) and Relative Ranking of Facilities by Standardized Infection Ratio (SIR) — Pennsylvania, 2012

Grouped by Number of Predicted (Pred.) Infections: 3–7.49

Obs.	Pred.	SIR	Facility and NHSN ID
0	3.67	0.0	ELK REGIONAL HEALTH CENTER (11859)
0	3.93	0.0	OHIO VALLEY GENERAL HOSPITAL (12298)
0	5.39	0.0	LIFECARE HOSPITALS OF PITTSBURGH −−− SUBURBAN CAMPUS (12385)
0	7.30	0.0	ROXBOROUGH MEMORIAL HOSPITAL (11978)
1	6.87	0.1	CARLISLE REGIONAL MEDICAL CENTER (11997)
1	6.72	0.1	ARMSTRONG COUNTY MEMORIAL HOSPITAL (12057)
1	6.22	0.2	LIFECARE HOSPITALS OF PITTSBURGH −−− ALLE−KISKI CAMPUS (18955)
1	5.08	0.2	LEWISTOWN HOSPITAL (11825)
1	4.63	0.2	SELECT SPECIALTY HOSPITAL −−− MCKEESPORT, INC. (12271)
1	4.53	0.2	CLEARFIELD HOSPITAL (11843)
2	6.26	0.3	DUBOIS REGIONAL MEDICAL CENTER (11606)
2	5.67	0.4	LANSDALE HOSPITAL (12032)
2	4.71	0.4	SCHUYLKILL MEDICAL CENTER −−− EAST NORWEGIAN STREET (11922)
3	6.32	0.5	KINDRED HOSPITAL PITTSBURGH −−− NORTH SHORE (12296)
4	7.35	0.5	SELECT SPECIALTY HOSPITAL −−− PITTSBURGH/UPMC (12009)
2	3.67	0.5	JENNERSVILLE REGIONAL HOSPITAL (12337)
3	5.35	0.6	SOMERSET HOSPITAL (12282)
2	3.54	0.6	WAYNE MEMORIAL HOSPITAL (12004)
2	3.54	0.6	GETTYSBURG HOSPITAL (11531)
3	4.92	0.6	SACRED HEART HOSPITAL (11684)
4	6.44	0.6	LIFECARE HOSPITALS OF MECHANICSBURG (12388)
2	3.14	0.6	SOLDIERS & SAILORS MEM HOSPITAL (11688)
6	7.35	0.8	LIFECARE HOSPITALS OF PITTSBURGH (11945)
5	6.09	0.8	SELECT SPECIALTY HOSPITAL LAUREL HIGHLANDS, INC. (12108)
3	3.49	0.9	EXCELA HEALTH FRICK HOSPITAL (11639)
4	4.57	0.9	CANONSBURG GENERAL HOSPITAL (11586)
3	3.42	0.9	MILLCREEK COMMUNITY HOSPITAL (12253)
5	5.57	0.9	SCHUYLKILL MEDICAL CENTER −−− SOUTH JACKSON STREET (12087)
6	6.46	0.9	MONONGAHELA VALLEY HOSPITAL (11069)
7	7.40	0.9	ST. JOSEPHS HOSPITAL (12438)
3	3.13	1.0	CLARION HOSPITAL (11654)
4	3.93	1.0	ST. LUKES HOSPITAL ANDERSON CAMPUS (21487)
7	6.43	1.1	LANCASTER REGIONAL MEDICAL CENTER (12335)
5	4.57	1.1	KINDRED HOSPITAL SOUTH PHILADELPHIA (11940)
6	5.25	1.1	ALBERT EINSTEIN MEDICAL CENTER AT ELKINS PARK (12500)
6	4.64	1.3	SELECT SPECIALITY HOSPITAL −−− CENTRAL PENNSYLVANIA (YORK) (12334)
6	4.59	1.3	HEALTHSOUTH HARMARVILLE REHABILITATION HOSPITAL (11727)
8	5.49	1.5	LIFECARE HOSPITALS OF CHESTER COUNTY (12005)
5	3.35	1.5	HEART OF LANCASTER REGIONAL MEDICAL CENTER (12571)
6	3.81	1.6	LOWER BUCKS HOSPITAL (12390)
10	6.21	1.6	HANOVER HOSPITAL (11899)
7	3.73	1.9	INDIANA REGIONAL MEDICAL CENTER (11759)
8	4.14	1.9	SELECT SPECIALTY HOSPITAL −−− CENTRAL PA (13921)
15	7.36	2.0	SPECIAL CARE HOSPITAL (12604)
16	7.12	2.2	KINDRED HOSPITAL −−− WYOMING VALLEY (12485)
15	6.30	2.4	KINDRED HOSPITAL −−− PITTSBURGH (12358)
8	3.35	2.4	EASTERN REGIONAL MEDICAL CENTER (12348)
11	4.50	2.4	ALBERT EINSTEIN MEDICAL CENTER MOSS REHABILITATION (12508)
16	5.93	2.7	BRANDYWINE HOSPITAL (11979)
11	3.97	2.8	KINDRED HOSPITAL EASTON (12007)
14	4.94	2.8	SELECT SPECIALTY HOSPITAL −−− CENTRAL PENNSYLVANIA (CAMP HILL) (12147)
11	3.25	3.4	GOOD SHEPHERD PENN PARTNERS (13929)
22	5.75	3.8	GOOD SHEPHERD SPECIALTY HOSPITAL (11887)

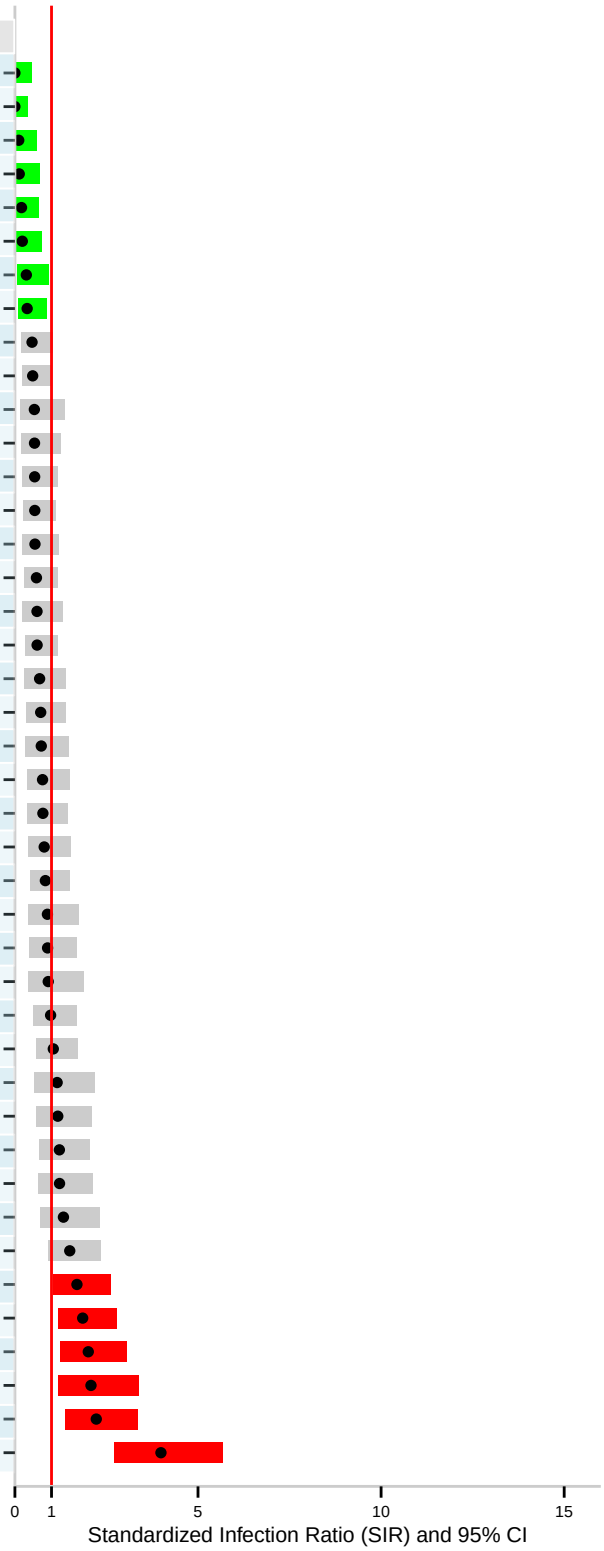


Better than predicted | Not different than predicted | Worse than predicted

Figure 4.3.6: Number of Observed (Obs.) Catheter-Associated Urinary Tract Infections (CAUTI) and Relative Ranking of Facilities by Standardized Infection Ratio (SIR) — Pennsylvania, 2012

Grouped by Number of Predicted (Pred.) Infections: 7.5–14.99

Obs.	Pred.	SIR	Facility and NHSN ID
0	7.83	0.0	SHARON REGIONAL HEALTH SYSTEM (12250)
0	10.60	0.0	HAZLETON GENERAL HOSPITAL (11878)
1	9.55	0.1	JAMESON MEMORIAL HOSPITAL (11954)
1	8.43	0.1	CHESTNUT HILL HOSPITAL (12304)
2	11.09	0.2	MOSES TAYLOR HOSPITAL (11528)
2	9.90	0.2	MERCY PHILADELPHIA HOSPITAL (11946)
3	9.60	0.3	ALLEGHENY VALLEY HOSPITAL (11842)
4	11.95	0.3	HOLY REDEEMER HOSPITAL AND MEDICAL CENTER (11973)
6	12.82	0.5	UPMC HORIZON (11675)
7	14.41	0.5	WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)
4	7.53	0.5	EVANGELICAL COMMUNITY HOSPITAL (11701)
5	9.33	0.5	KINDRED HOSPITAL AT HERITAGE VALLEY (12268)
6	11.12	0.5	MERCY SUBURBAN HOSPITAL NORRISTOWN (11952)
7	12.89	0.5	NAZARETH HOSPITAL (11919)
6	10.95	0.5	UPMC MCKEESPORT (11707)
8	13.60	0.6	CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)
6	9.94	0.6	MEADVILLE MEDICAL CENTER (11583)
9	14.83	0.6	EXCELA HEALTH LATROBE HOSPITAL (11651)
7	10.37	0.7	SELECT SPECIALITY HOSPITAL −−− JOHNSTOWN (12299)
8	11.36	0.7	JEANES HOSPITAL (11459)
7	9.72	0.7	EPHRATA COMMUNITY HOSPITAL (11764)
8	10.60	0.8	MERCY FITZGERALD HOSPITAL (11683)
9	11.77	0.8	THE WASHINGTON HOSPITAL (11460)
9	11.25	0.8	ST. JOSEPH MEDICAL CENTER (11961)
11	13.22	0.8	GRAND VIEW HOSPITAL (11847)
8	9.01	0.9	THE WESTERN PENNSYLVANIA HOSPITAL (11864)
9	10.08	0.9	CROZER CHESTER MEDICAL CENTER TAYLOR (11932)
7	7.69	0.9	PHOENIXVILLE HOSPITAL COMPANY LLC (11836)
12	12.31	1.0	POCONO MEDICAL CENTER (11772)
15	14.31	1.0	THE GOOD SAMARITAN HOSPITAL (11712)
9	7.80	1.2	UPMC NORTHWEST (11837)
11	9.39	1.2	CHILDRENS HOSPITAL OF PHILADELPHIA (10306)
14	11.52	1.2	DOYLESTOWN HOSPITAL (10190)
12	9.84	1.2	POTTSTOWN MEMORIAL MEDICAL CENTER (11983)
12	9.05	1.3	LIFECARE HOSPITALS OF PITTSBURGH −−− MONROEVILLE (12254)
19	12.69	1.5	CHAMBERSBURG HOSPITAL (11913)
20	11.81	1.7	MAGEE REHAB HOSPITAL (12146)
23	12.43	1.9	HOSPITAL OF FOX CHASE CANCER CENTER (12134)
21	10.48	2.0	CHESTER COUNTY HOSPITAL (12016)
16	7.70	2.1	KINDRED HOSPITAL PHILADELPHIA −−− HAVERTOWN (12908)
22	9.90	2.2	MEMORIAL HOSPITAL (11633)
31	7.77	4.0	KINDRED HOSPITAL −−− PHILADELPHIA (11832)



Better than predicted | Not different than predicted | Worse than predicted

Figure 4.3.7: Number of Observed (Obs.) Catheter-Associated Urinary Tract Infections (CAUTI) and Relative Ranking of Facilities by Standardized Infection Ratio (SIR) — Pennsylvania, 2012

Grouped by Number of Predicted (Pred.) Infections: 15–29.99

Obs.	Pred.	SIR	Facility and NHSN ID
2	17.52	0.1	DELAWARE COUNTY MEMORIAL HOSPITAL (11972)
3	22.42	0.1	UNIONTOWN HOSPITAL (10441)
5	25.77	0.2	GEISINGER−COMMUNITY MEDICAL CENTER (11914)
6	26.30	0.2	REGIONAL HOSPITAL OF SCRANTON (12533)
7	25.28	0.3	ALTOONA REGIONAL HEALTH SYSTEM (10178)
11	27.61	0.4	HAHNEMANN UNIVERSITY HOSPITAL (11437)
10	22.68	0.4	MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)
12	22.31	0.5	RIDDLE MEMORIAL HOSPITAL (11731)
10	16.85	0.6	MAIN LINE HOSPITAL −−− PAOLI (11750)
18	27.36	0.7	CROZER CHESTER MEDICAL CENTER (11839)
17	23.41	0.7	MAIN LINE HOSPITAL BRYN MAWR (11753)
14	19.08	0.7	LEHIGH VALLEY HOSPITAL −−− MUHLENBERG (11898)
14	18.04	0.8	ST. CLAIR MEMORIAL HOSPITAL (10561)
15	19.26	0.8	JEFFERSON REGIONAL MEDICAL CENTER (10237)
19	24.15	0.8	ROBERT PACKER HOSPITAL (12422)
18	20.42	0.9	PENN PRESBYTERIAN MEDICAL CENTER (11814)
23	23.06	1.0	FORBES REGIONAL HOSPITAL (11265)
26	24.53	1.1	MOUNT NITTANY MEDICAL CENTER (11797)
19	17.32	1.1	EASTON HOSPITAL (11929)
19	17.12	1.1	HERITAGE VALLEY SEWICKLEY (10375)
23	20.37	1.1	HOLY SPIRIT HOSPITAL (12387)
38	28.50	1.3	GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)
39	28.79	1.4	PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS (11448)
22	16.23	1.4	BUTLER MEMORIAL HOSPITAL (11736)
25	15.64	1.6	THOMAS JEFFERSON UNIV HOSP − METHODIST (12017)
38	17.64	2.2	ST. MARY MEDICAL CENTER (11885)

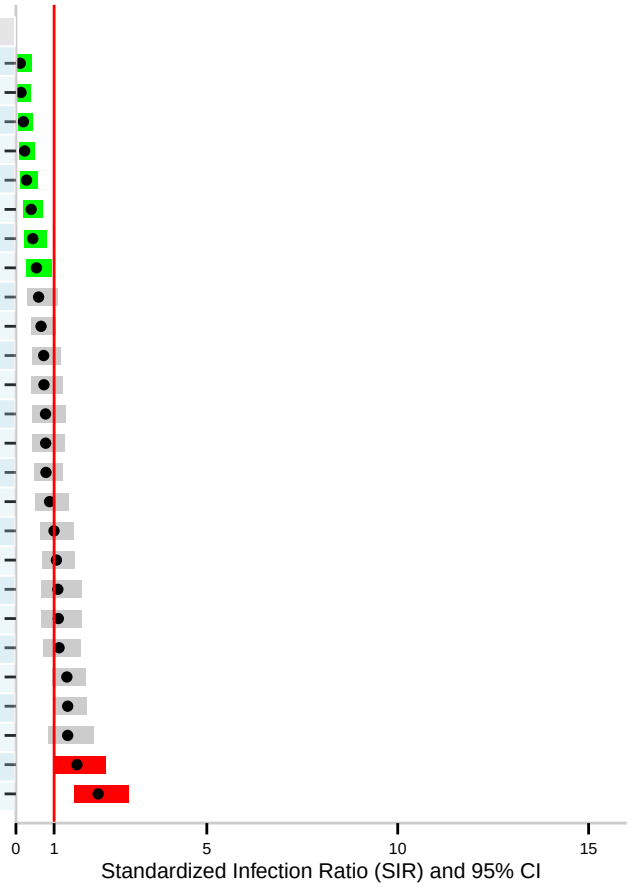
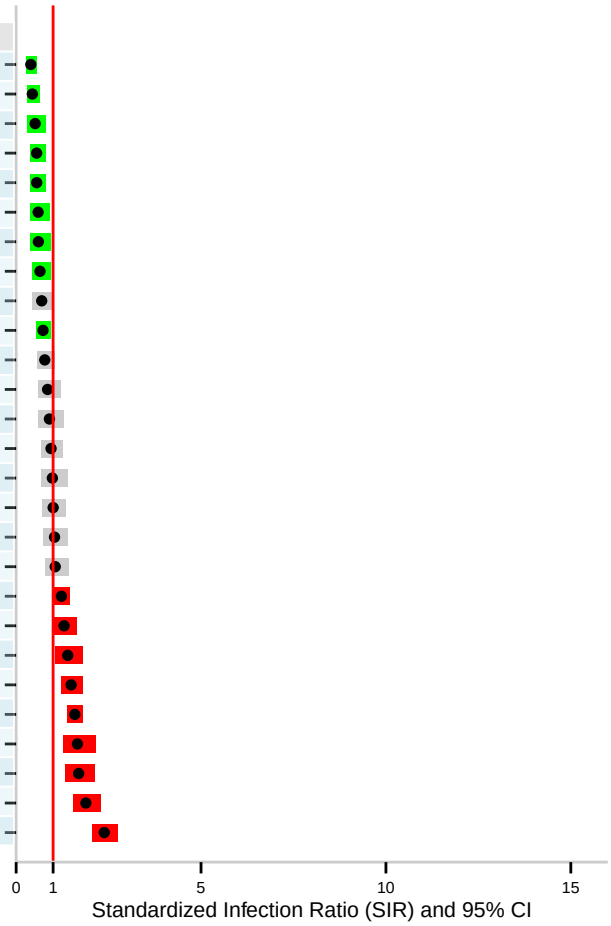


Figure 4.3.8: Number of Observed (Obs.) Catheter-Associated Urinary Tract Infections (CAUTI) and Relative Ranking of Facilities by Standardized Infection Ratio (SIR) — Pennsylvania, 2012

Grouped by Number of Predicted (Pred.) Infections: > 30

Obs.	Pred.	SIR	Facility and NHSN ID
35	88.28	0.4	ALLEGHENY GENERAL HOSPITAL (10648)
30	68.49	0.4	PINNACLE HEALTH HOSPITALS (10122)
18	34.94	0.5	LANCASTER GENERAL HOSPITAL (10183)
29	52.25	0.6	UPMC MERCY (10384)
30	53.88	0.6	CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)
23	38.64	0.6	ALBERT EINSTEIN MEDICAL CENTER (10585)
20	33.25	0.6	EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)
27	41.85	0.6	READING HOSPITAL AND MEDICAL CENTER (12375)
24	34.72	0.7	UPMC ST MARGARET (11561)
55	75.68	0.7	UPMC PRESBYTERIAN SHADYSIDE −−− SHADYSIDE (10118)
45	58.10	0.8	TEMPLE UNIVERSITY HOSPITAL (12382)
33	38.79	0.9	UPMC PASSAVANT (11242)
30	33.32	0.9	ST. VINCENT HEALTH CENTER (11699)
44	46.61	0.9	ARIA HEALTH (11388)
32	32.66	1.0	MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)
42	41.95	1.0	ST. LUKES HOSPITAL BETHLEHEM (11718)
41	39.49	1.0	UPMC HAMOT (11725)
45	42.54	1.1	WILKES−BARRE GENERAL HOSPITAL (11916)
131	106.90	1.2	THOMAS JEFFERSON UNIV HOSPITAL (11506)
67	51.70	1.3	YORK HOSPITAL (10108)
60	43.01	1.4	GEISINGER MEDICAL CENTER (11775)
111	74.57	1.5	LEHIGH VALLEY HOSPITAL (11884)
215	135.56	1.6	UPMC PRESBYTERIAN SHADYSIDE −−− PRESBYTERIAN (10348)
57	34.40	1.7	HERITAGE VALLEY BEAVER (11831)
76	44.94	1.7	ABINGTON MEMORIAL HOSPITAL (11838)
104	55.14	1.9	MILTON S HERSHEY MEDICAL CENTER (11747)
194	81.37	2.4	HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)



4.4. Central Line-Associated Bloodstream Infections (CLABSIs)

4.4.1. CLABSIs — Statewide Summary

Central lines (also known as central venous catheters) are those catheters that are inserted into the large blood vessels of the body and usually end in proximity to the heart. They are generally used for the purposes of administering intravenous medications or to more closely monitor a patient's cardiac function and stability. If microorganisms are inadvertently introduced through the central line or the line becomes infected through improper care, a bloodstream infection is the usual result. Such infections, known as central line-associated bloodstream infections, are particularly severe because the infecting pathogen travels throughout the body and causes sepsis and because patients with central lines usually have significant underlying health problems that place them at increased risk for poor outcomes from complications. CLABSIs are associated with prolonged hospital stays, high additional healthcare costs and high mortality. Therefore CLABSIs are often the focus for infection prevention and control measures, and they are the single category of HAIs most often monitored by hospitals and health departments.

In the present report, as in previous ones, the facility-specific CLABSI tables are separated into several different locations in the hospital, including neonatal intensive care units (NICUs) and specialty care areas (SCAs), following CDC convention. All other critical care and ward locations are combined into a category known as ICU/other — a category that includes the bulk of central line days and data. CLABSI data are also reported separately for long-term acute care facilities (LTACs), since studies have shown CLABSI rates can be different in LTAC settings.

Since 2009, the incidence of CLABSIs in Pennsylvania has declined 28.08 percent (Table 4.4.2, Figure 4.4.1). While the findings in 2012 show continued declines in the incidence of CLABSIs, the pace of decline has leveled off. Most of the reduction in CLABSI rates occurred before 2012.

In 2012, a total of 218 (87.55 percent) of the 249 Pennsylvania hospitals reported use of central lines in any of their hospital locations. The 31 hospitals not reporting any use of central lines are mostly psychiatric, drug and alcohol rehabilitation centers or specialty hospitals. These facilities are listed in Table 4.4.7. Among the hospitals using central lines, 139 used them in the ICU and/or other ward locations, 26 institutions were long-term care facilities, and one hospital used central lines only in specialty care areas. The remaining facilities reported central line days from multiple ward types as shown in Table 4.4.1.

Table 4.4.1: Number of Facilities Reporting Central Line Days by Reporting Location — Pennsylvania, 2012

	Number of Facilities
ICUs and other wards	139
ICUs, other wards, and specialty care areas	9
ICUs, other wards, specialty care areas and NICUs	12
ICUs, other wards and NICUs	31
Specialty care areas	1
Long-term acute care facilities	26
All	218

Among the 218 hospitals that used central lines in 2012, a total of 159 (72.9 percent) reported at least one CLABSI. During 2012, there were a total of 1,474 CLABSIs reported (Table 4.4.2). Among the 1,474 CLABSIs, 77 (5.2 percent) occurred in the NICU, 170 (11.5 percent) occurred in SCAs, 160 (10.9 percent) occurred in LTACs, 509 (34.5 percent) occurred in ward locations, and 558 (37.9 percent) occurred in critical care units (other than the NICU; Figure 4.4.1).

Figure 4.4.1: Central Line-Associated Bloodstream Infections (CLABSI) by Unit Type — Pennsylvania, 2012

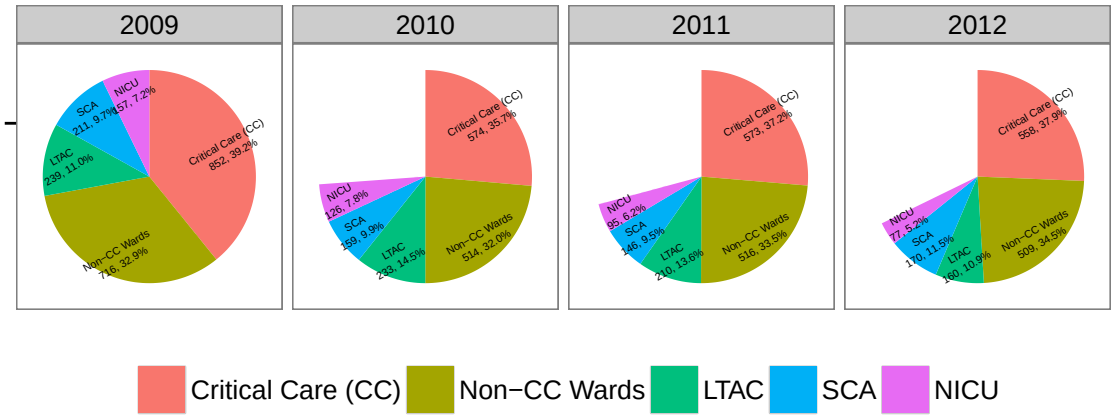


Table 4.4.2: Summary of Central Line-Associated Bloodstream Infections (CLABSI) — Pennsylvania, 2009–2012

	Number of CLABSI	Central Line Days	Rate per 1,000 Central Line Days (95%CI)	Percent Change in Rate Prior Year (Since 2009)	Patient Days	Device Utilization Ratio (DUR)	Percent Change in DUR Prior Year (Since 2009)
2009	2,175	1,763,902	1.23 (1.18–1.29)	.	10,402,161	0.17	.
2010	1,606	1,732,994	0.93 (0.88–0.97)	−24.84 (−24.84)	10,289,079	0.17	−0.67 (−0.67)
2011	1,540	1,729,770	0.89 (0.85–0.94)	−3.93 (−27.80)	10,212,208	0.17	0.57 (−0.11)
2012	1,474	1,662,062	0.89 (0.84–0.93)	−0.39 (−28.08)	10,033,090	0.17	−2.20 (−2.31)

These CLABSIs occured over a total of 1,662,062 central line days. The range of central line days reported by hospitals in 2012 ranged from 6 central line days to a high of 106,039 central line days.

The absolute number of CLABSIs reported in 2012 was 4.29 percent lower than in 2011, and the number of central line days reported in 2012 was 2.20 percent lower than in 2011. The CLABSI rate for 2012 was 0.89 CLABSIs per 1,000 central line days, which is approximately the same as the rate in 2011 (Table 4.4.2). The rate was 28.08 percent lower than the rate seen in the baseline year of 2009. This translates to 1,699 fewer CLABSIs in Pennsylvania than would have occured if the 2009 CLABSI rate had persisted into 2012.

4.4.2. CLABSIs — By Unit Type

Table 4.4.3: Central Line-Associated Bloodstream Infections (CLABSI), Infection Rates per 1,000 Patient Days and Device Utilization Rates (DUR) by Location within Facility—Pennsylvania, 2009–2012

	Number of CLABSI	Central Line Days	Rate per 1,000 Central Line Days	Patient Days	Device Utilization Ratio — DUR (Line Days / Pt. Days)
NICU					
2012	77	57,800	1.33	270,917	0.21
2011	95	62,271	1.53	271,973	0.23
2010	126	61,923	2.03	269,940	0.23
2009	157	63,465	2.47	269,141	0.24
SCA					
2012	170	125,977	1.35	214,677	0.59
2011	146	121,378	1.20	213,907	0.57
2010	159	120,488	1.32	211,508	0.57
2009	211	109,429	1.93	193,468	0.57
Step					
2012	52	87,412	0.59	568,933	0.15
2011	90	95,516	0.94	598,034	0.16
2010	80	101,460	0.79	634,482	0.16
2009	116	91,932	1.26	616,096	0.15
LTAC					
2012	160	143,525	1.11	256,287	0.56
2011	210	158,640	1.32	271,324	0.58
2010	233	165,095	1.41	291,486	0.57
2009	239	169,404	1.41	299,105	0.57
cc:Burn					
2012	11	4,788	2.30	12,251	0.39
2011	12	4,651	2.58	11,135	0.42
2010	10	5,029	1.99	12,225	0.41
2009	22	5,872	3.75	12,389	0.47
cc:CT					
2012	47	61,811	0.76	88,143	0.70
2011	41	68,598	0.60	97,189	0.71
2010	54	70,542	0.77	100,018	0.71
2009	59	70,493	0.84	102,092	0.69
cc:MS					
2012	214	201,280	1.06	444,683	0.45
2011	203	207,709	0.98	447,121	0.46
2010	184	202,790	0.91	439,955	0.46
2009	295	199,959	1.48	435,264	0.46
cc:Med					
2012	61	71,161	0.86	127,491	0.56
2011	60	77,049	0.78	144,364	0.53
2010	78	74,232	1.05	140,201	0.53
2009	101	77,760	1.30	143,532	0.54
cc:Peds					
2012	42	30,869	1.36	58,071	0.53
2011	43	28,318	1.52	57,395	0.49
2010	54	29,342	1.84	55,559	0.53
2009	72	30,325	2.37	55,775	0.54
cc:SpecMed					
2012	44	36,532	1.20	101,137	0.36
2011	26	36,536	0.71	106,767	0.34
2010	28	47,105	0.59	126,836	0.37
2009	59	50,182	1.18	134,101	0.37

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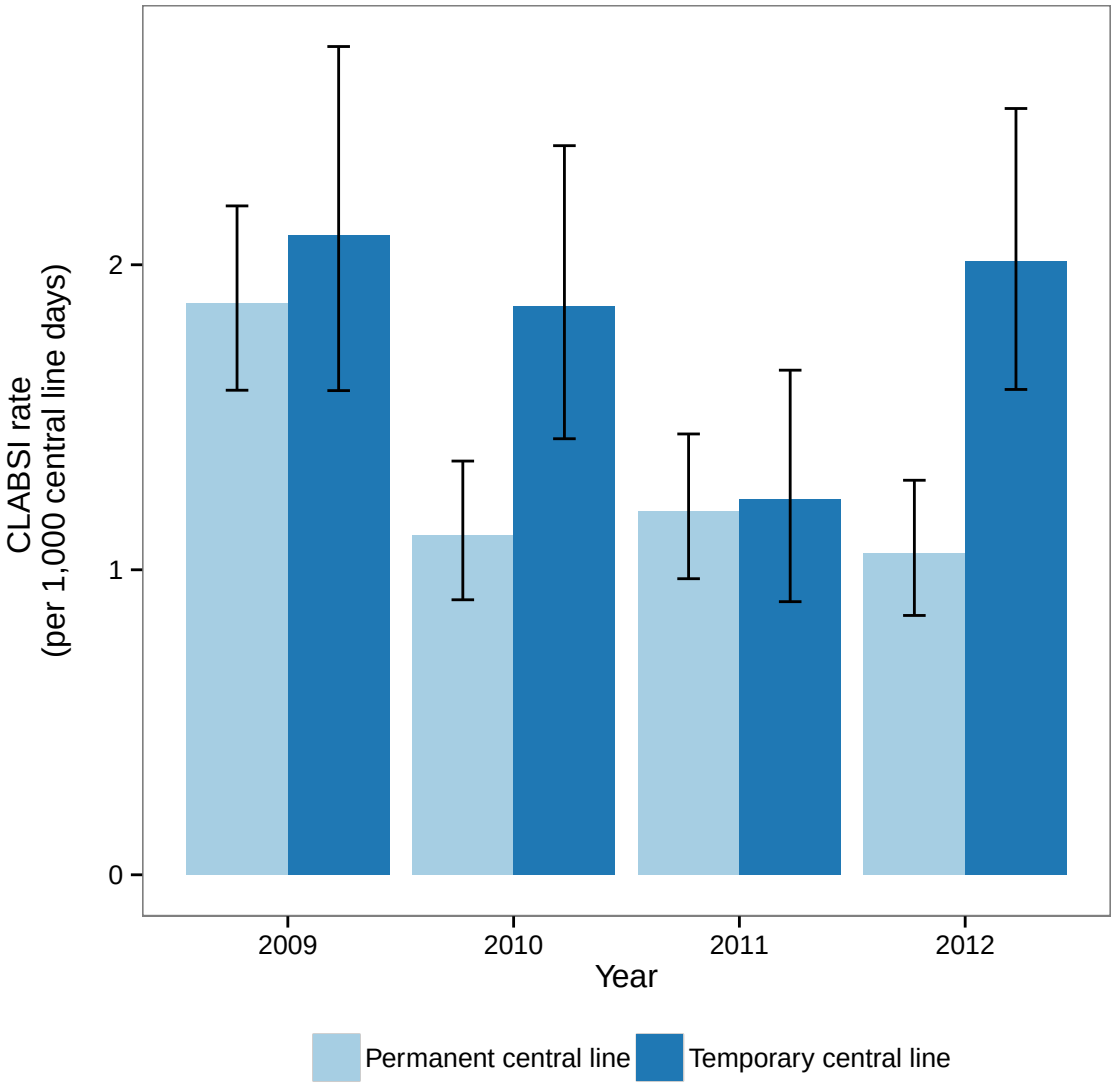
Table 4.4.3 – Continued from previous page

	Number of CLABSI	Central Line Days	Rate per 1,000 Central Line Days	Patient Days	Device Utilization Ratio (Line Days / Pt. Days)
cc:Surgery					
2012	69	63,870	1.08	118,824	0.54
2011	61	67,819	0.90	123,348	0.55
2010	41	66,635	0.62	113,392	0.59
2009	78	69,728	1.12	114,173	0.61
cc:Trauma					
2012	18	31,937	0.56	53,226	0.60
2011	37	34,070	1.09	54,962	0.62
2010	45	35,379	1.27	54,220	0.65
2009	50	35,675	1.40	51,572	0.69
w:Behavior					
2012	4	2,214	1.81	1,735,712	0.00
2011	6	3,626	1.65	1,614,797	0.00
2010	4	2,911	1.37	1,678,564	0.00
2009	0	2,314	0.00	1,579,712	0.00
w:LD_pp					
2012	0	1,100	0.00	372,423	0.00
2011	0	630	0.00	382,131	0.00
2010	0	884	0.00	382,546	0.00
2009	0	1,300	0.00	399,601	0.00
w:MS					
2012	224	351,145	0.64	2,587,551	0.14
2011	260	363,669	0.71	2,711,996	0.13
2010	242	358,963	0.67	2,753,456	0.13
2009	350	369,713	0.95	2,867,926	0.13
w:Med					
2012	147	203,620	0.72	1,175,387	0.17
2011	120	207,931	0.58	1,210,801	0.17
2010	130	202,382	0.64	1,166,026	0.17
2009	181	213,384	0.85	1,188,519	0.18
w:Newborn					
2012	3	317	9.46	154,922	0.00
2011	0	275	0.00	170,453	0.00
2010	0	224	0.00	168,353	0.00
2009	0	154	0.00	181,102	0.00
w:Ped_ms					
2012	41	31,905	1.29	232,760	0.14
2011	44	33,124	1.33	235,930	0.14
2010	45	30,948	1.45	219,810	0.14
2009	67	36,436	1.84	235,280	0.15
w:Rehab					
2012	31	45,787	0.68	674,745	0.07
2011	22	45,373	0.48	663,495	0.07
2010	18	43,171	0.42	646,213	0.07
2009	29	44,286	0.65	648,117	0.07
w:Surgery					
2012	59	109,012	0.54	784,950	0.14
2011	64	112,587	0.57	825,086	0.14
2010	75	113,491	0.66	824,289	0.14
2009	89	122,091	0.73	875,196	0.14

Several different types of central lines are used in medical care. These include central lines that are temporarily inserted, those that are permanently inserted and central lines that are inserted through the umbilicus for use in infants. Before 2011, these line types were reported separately. However, changes were made to NHSN in 2011, and now the line type is only reported in specialty care areas. While the rate of CLABSIs in specialty care areas has decreased significantly since 2009 among patients with permanent central lines, the rate of CLABSIs among patients with temporary central lines dipped in 2011 but rebounded in 2012 (2.01 per 1,000 temporary central line days; Figure 4.4.2).

Figure 4.4.2: Central Line-Associated Bloodstream Infections (CLABSI) Reported by Specialty Care Areas (SCA) Among Patients with Permanent and Temporary Central Lines — Pennsylvania, 2009–2012



4.4.3. CLABSIs — By Pathogen

In 2012, hospitals reported a total of 1,697 isolates from 1,474 CLABSIs (some patients had an infection with more than one organism). Consistent with previous years, three pathogens (i.e., *Staphylococcus aureus, Enterococcus faecalis, Klebsiella pneumoniae*) accounted for the majority (34.30 percent) of isolates cultured from patients with a CLABSI (Table 4.4.4). The 17 organisms listed in Table 4.4.4 account for 82.85 percent of isolates cultured from CLABSIs. The remaining isolates (17.15 percent) cultured from CLABSIs in 2012 are from 99 other pathogens, each individually accounting for less than 1 percent of the total results. The patterns seen in 2012 are not substantially different than those in 2011

Table 4.4.4: Pathogens Isolated in Central Line-Associated Infections — Pennsylvania, 2011–2012

	2011		2012	
Pathogen	Count	%	Count	%
Staphylococcus aureus	312	17.96	321	18.92
Enterococcus faecalis	157	9.04	135	7.96
Klebsiella pneumoniae	142	8.18	126	7.42
Candida albicans	105	6.04	106	6.25
Staphylococcus epidermidis	91	5.24	102	6.01
Staphylococcus coagulase negative	141	8.12	96	5.66
Escherichia coli	65	3.74	73	4.30
Pseudomonas aeruginosa	92	5.30	72	4.24
Enterococcus faecium	95	5.47	69	4.07
Enterobacter cloacae	55	3.17	53	3.12
Enterococcus spp.	35	2.01	53	3.12
Candida glabrata	44	2.53	50	2.95
Serratia marcescens	42	2.42	48	2.83
Candida parapsilosis	43	2.48	31	1.83
Acinetobacter baumannii	32	1.84	27	1.59
Klebsiella oxytoca	20	1.15	26	1.53
Enterobacter aerogenes	12	0.69	18	1.06
Other	254	14.62	291	17.15
All	1,737	100.00	1,697	100.00

4.4.4. CLABSIs — National Comparison

Act 52 requires comparisons between Pennsylvania data and national data (Dudeck **et al.**, 2013). These comparisons are shown below and generally demonstrate that the rates of CLABSIs and device utilization ratios for central lines in Pennsylvania are generally comparable to or better than national rates. However, these findings must be cautiously interpreted, since the comparisons are based on crude rates and not standardized infection ratios. Furthermore, the national rates are inclusive of Pennsylvania data.

Figure 4.4.3: Central Line-Associated Bloodstream Infection Rates and Device Utilization Ratios in Critical Care Units — Pennsylvania and NHSN, 2012

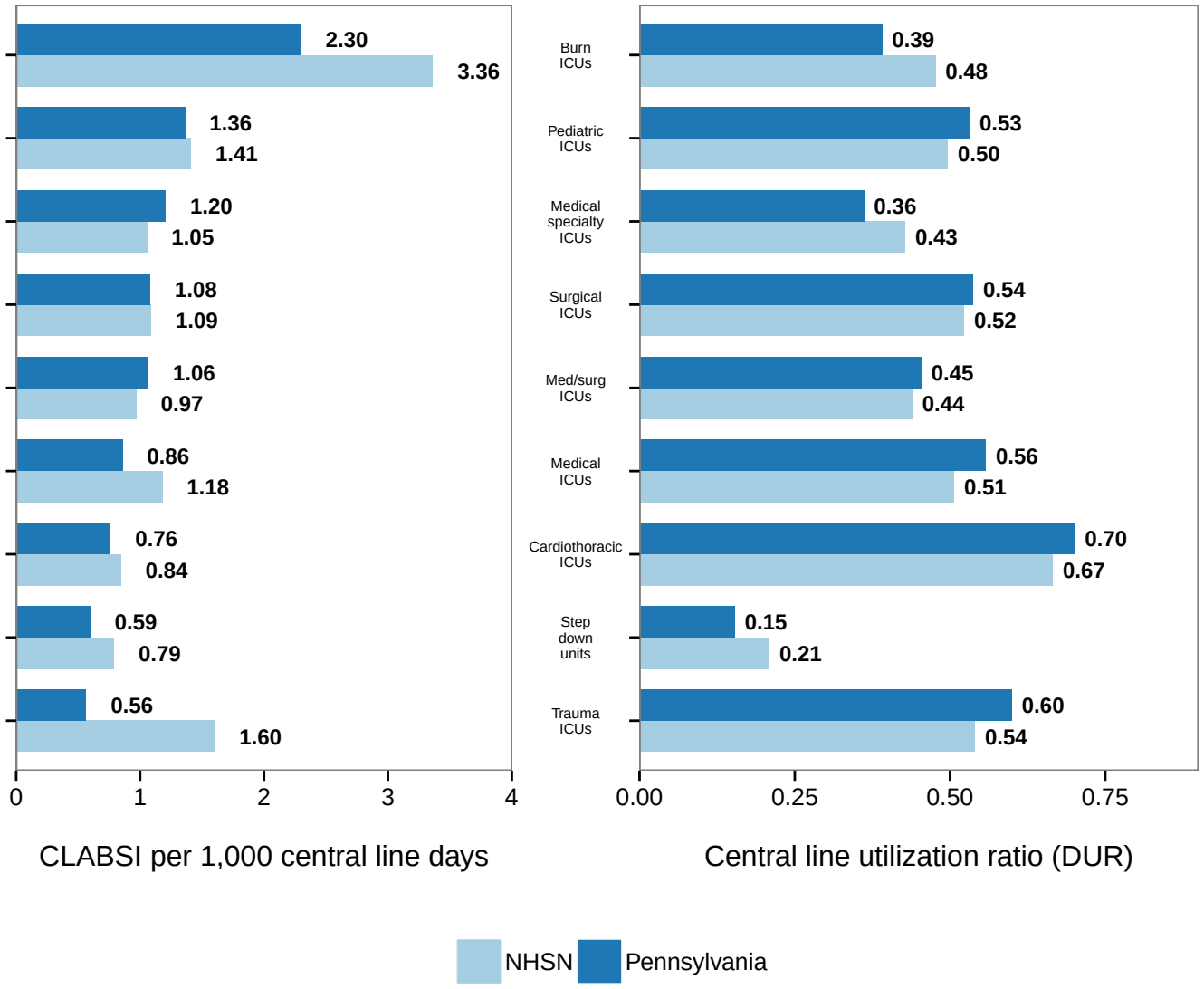


Figure 4.4.4: Central Line-Associated Bloodstream Infection Rates and Device Utilization Ratios in Ward Locations — Pennsylvania and NHSN, 2012

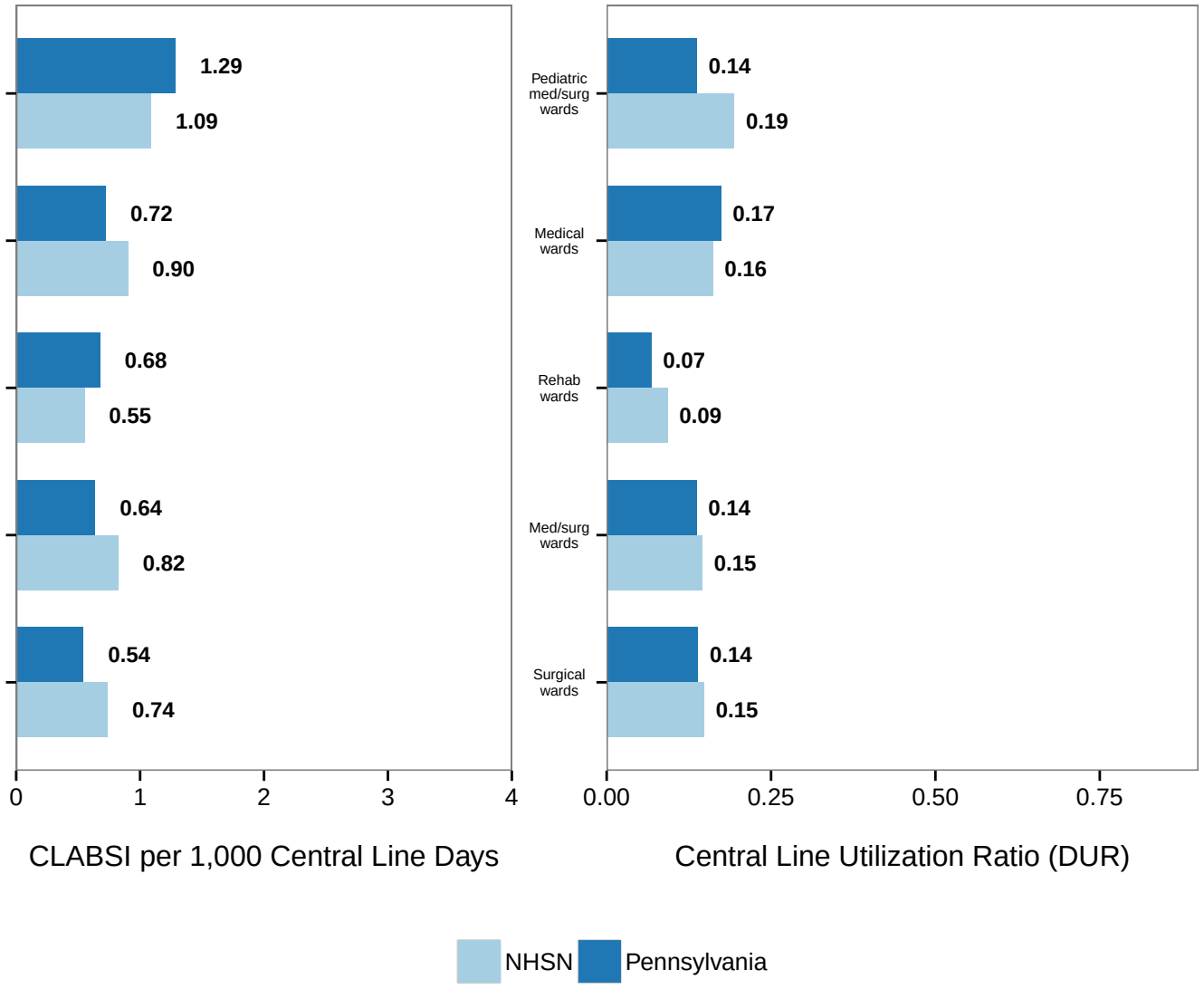
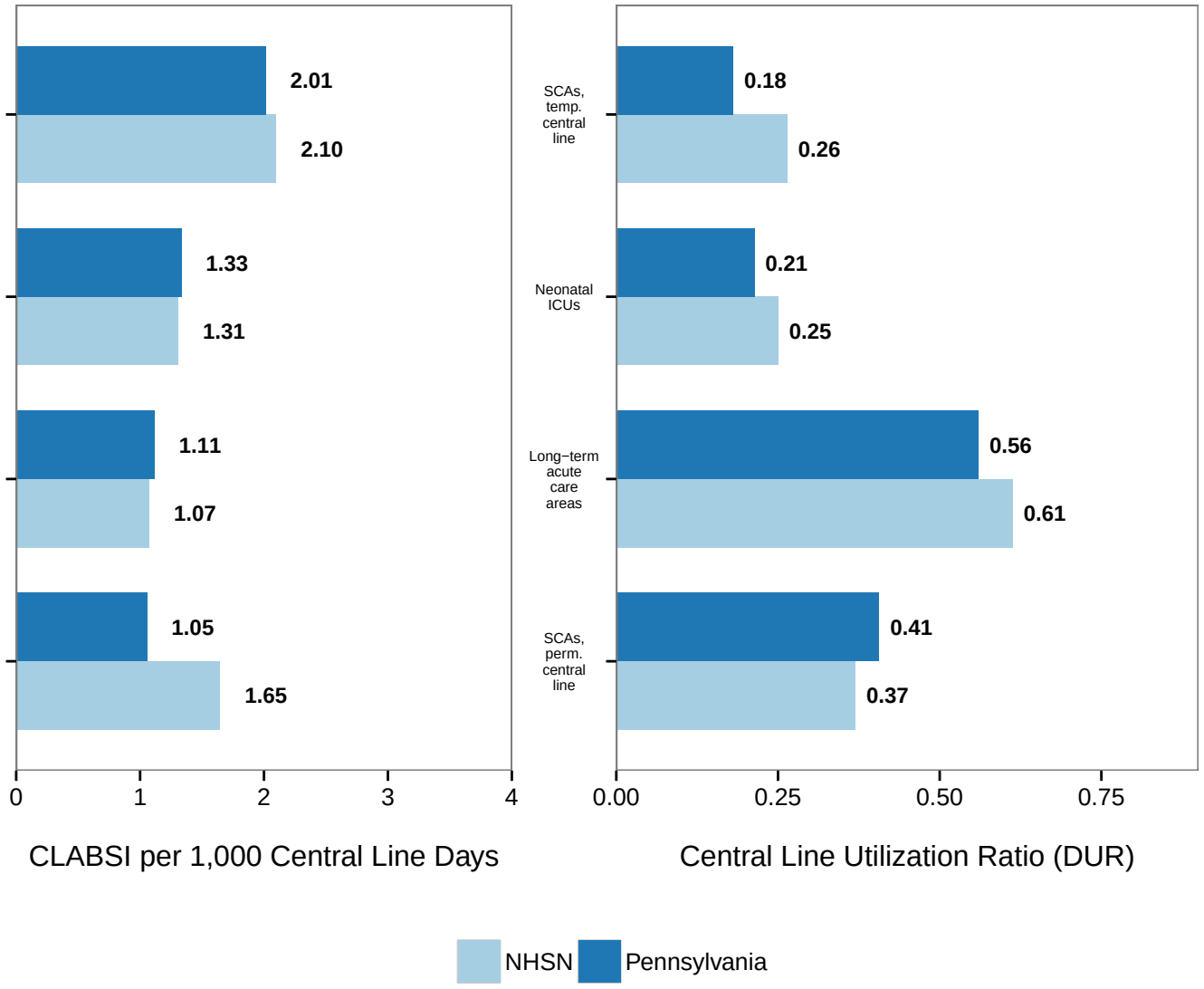


Figure 4.4.5: Central Line-Associated Bloodstream Infection Rates and Device Utilization Ratios in Non-General Care Locations (NICU, LTAC, SCA) — Pennsylvania and NHSN, 2012



4.4.5. CLABSIs — By Facility

Among the 191 hospitals that used central lines in intensive care or general ward units (the ICU-Other category), 120 (62.8 percent) had a standardized infection ratio (SIR) less than 1.00, meaning the hospital reported **fewer** CLABSIs than predicted based on statewide rates; 71 hospitals (37.2 percent) had a SIR greater than 1.00, meaning the hospital reported **more** CLABSIs than predicted; and one hospital had a SIR of 1.00, meaning the hospital reported the same number as expected.

For many of the hospitals, the difference between the observed number (number reported by the hospital) of infections and predicted number of infections was not statistically meaningful. This occurs either when the hospital has a small number of patients with central lines in place or when the difference between the observed and predicted number is small. In such circumstances, the reliability (as demonstrated by the wide confidence intervals in the tables and figures) is lower, and the "true" SIR may be either less than 1.00 or greater than 1.00. As one example of this problem, a total of 72 (37.7 percent) of the hospitals had a predicted number of CLABSIs in their ICUs and wards that was less than one. Rates from these hospitals often appear to change quite a bit from year to year because of the statistical imprecision inherent in calculating a rate with so few predicted infections. Findings for hospitals with such a low number of predicted infections are considered to be statistically unreliable, and the findings should be very cautiously interpreted and used.

Among the 191 hospitals in the ICU-other category, seven hospitals (3.7 percent) had a reported number of CLABSIs that was significantly better than predicted. These hospitals are listed below in Table 4.4.5 in alphabetical order and are designated in green in Figures 4.4.6 – 4.4.10. In contrast, 14 hospitals (7.3 percent) had a reported number of CLABSIs that was significantly worse than predicted. These hospitals are listed below in Table 4.4.6 in alphabetical order and are designated in red in Figures 4.4.6 – 4.4.10. All other hospitals are considered to have an incidence of CLABSIs in their critical care units and ward locations that are within (or no different from) the number of predicted based on statewide rates of CLABSIs.

Among the other CLABSI-related locations (NICU, SCA and LTAC), one (2.3 percent) of the 43 NICUs had an observed number of infections that was significantly worse than predicted; the remainder were no different than predicted. Among 22 specialty care areas, the observed number of infections was significantly better than predicted in three hospitals (13.6 percent) and significantly worse than predicted in two hospitals (9.1 percent). Among 26 long term-acute care hospitals, there was one (3.8 percent) facility that had an observed number of infections that was significantly better than predicted and two (7.7 percent) that were significantly worse than predicted.

Tables 4.4.8–4.4.11 list CLABSI rates and the predicted number of infections for ICUs and other wards, NICUs, SCAs and LTACs in alphabetical order by facility. In order to categorize and compare hospitals that are similar, Figures 4.4.6–4.4.15 divide the hospitals based on the reporting location (e.g., ICUs and other wards) and the number of predicted infections. Within each tier, hospitals are listed in order by SIR from best to worst.

Table 4.4.5: Hospitals with Significantly Fewer Central Line-Associated Bloodstream Infections (CLABSIs) than Predicted (Better = Smaller SIR) — Pennsylvania, 2012

	Hospital Name (NHSN ID)
ICUs and other wards	
	ALTOONA REGIONAL HEALTH SYSTEM (10178)
	HERITAGE VALLEY BEAVER (11831)
	HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)
	MOUNT NITTANY MEDICAL CENTER (11797)
	PINNACLE HEALTH HOSPITALS (10122)
	UPMC PRESBYTERIAN SHADYSIDE — SHADYSIDE (10118)
	UPMC ST MARGARET (11561)
Specialty care areas	
	HAHNEMANN UNIVERSITY HOSPITAL (11437)
	TEMPLE UNIVERSITY HOSPITAL (12382)
	UPMC PRESBYTERIAN SHADYSIDE — SHADYSIDE (10118)
Long-term acute care wards	
	KINDRED HOSPITAL AT HERITAGE VALLEY (12268)
Neonatal intensive care units	
	NONE

Table 4.4.6: Hospitals with Significantly More Central Line-Associated Bloodstream Infections (CLABSIs) than Predicted (Worse = Larger SIR) — Pennsylvania, 2012

	Hospital Name (NHSN ID)
ICUs and other wards	
	ALBERT EINSTEIN MEDICAL CENTER AT ELKINS PARK (12500)
	CHILDRENS HOSPITAL OF PHILADELPHIA (10306)
	CHILDRENS INSTITUTE OF PITTSBURGH (12266)
	EASTERN REGIONAL MEDICAL CENTER (12348)
	GEISINGER MEDICAL CENTER (11775)
	HAZLETON GENERAL HOSPITAL (11878)
	KANE COMMUNITY HOSPITAL (12111)
	LEHIGH VALLEY HOSPITAL (11884)
	MAIN LINE HOSPITAL — PAOLI (11750)
	MILTON S HERSHEY MEDICAL CENTER (11747)
	NAZARETH HOSPITAL (11919)
	ST. VINCENT HEALTH CENTER (11699)
	THOMAS JEFFERSON UNIV HOSPITAL (11506)
	WAYNE MEMORIAL HOSPITAL (12004)
Specialty care areas	
	CHILDRENS HOSPITAL OF PHILADELPHIA (10306)
	ROBERT PACKER HOSPITAL (12422)
Long-term acute care wards	
	GOOD SHEPHERD PENN PARTNERS (13929)
	KINDRED HOSPITAL — WYOMING VALLEY (12485)
Neonatal intensive care units	
	PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS (11448)

Table 4.4.7: Hospitals Omitted from CLABSI SIR Analysis Due to No Reported Central-Line Use — Pennsylvania, 2012

Facility Name and NHSN ID
PHILHAVEN HOSPITAL (11740)
DIVINE PROVIDENCE HOSPITAL (11743)
DANVILLE STATE HOSPITAL (11848)
BARIX CLINICS OF PENNSYLVANIA (12037)
NORRISTOWN STATE HOSPITAL (12047)
FIRST HOSPITAL OF WYOMING VALLEY (12050)
CLARKS SUMMIT STATE HOSPITAL (12051)
WARREN STATE HOSPITAL (12081)
TORRANCE STATE HOSPITAL (12091)
THE MEADOWS PSYCHIATRIC CENTER (12156)
MONTGOMERY COUNTY MH/MR EMERGENCY SERVICES, INC. (12287)
WERNERSVILLE STATE HOSPITAL (12368)
KIDSPEACE ORCHARD HILLS CAMPUS (12430)
SOUTHWOOD PSYCHIATRIC HOSPITAL (12453)
CLARION PSYCHIATRIC CENTER (12454)
FRIENDS HOSPITAL (12488)
BELMONT CENTER FOR COMPREHENSIVE TREATMENT (12505)
SURGICAL INSTITUTE OF READING (12535)
HORSHAM CLINIC (12543)
ST. JOHN VIANNEY HOSPITAL (12548)
EDGEWOOD SURGICAL HOSPITAL (12552)
FAIRMOUNT BEHAVIORAL HEALTH SYSTEM (12565)
BROOKE GLEN BEHAVIORAL HOSPITAL (12623)
KIRKBRIDE CENTER (12624)
ROXBURY TREATMENT CENTER (12723)
DEVEREUX CHILDRENS BEHAVIORAL HEALTH INSTITUTE (12738)
FOUNDATIONS BEHAVIORAL HEALTH (12832)
HAVEN BEHAVIORAL HOSPITAL OF EASTERN PENNSYLVANIA (14471)
BUCKS COUNTY SPECIALTY HOSPITAL (15202)
ADVANCED SURGICAL HOSPITAL (16317)
PHYSICIANS CARE SURGICAL HOSPITAL (19630)

Table 4.4.8: **Critical Care Units and Wards**: Central Line-Associated Bloodstream Infections, Central Line Utilization Rates and Standardized Infection Ratios by Facility in Alphabetical Order — Pennsylvania, 2010–2012

	Central Line Days	Patient Days	Central Line Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
ABINGTON MEMORIAL HOSPITAL (11838)							
2012	18,042	122,831	0.15	9	14.07	0.64	(0.29 – 1.21)
2011	19,824	133,171	0.15	16	17.85	0.90	(0.51 – 1.46)
2010	18,113	144,232	0.13	18	15.69	1.15	(0.68 – 1.81)
ALBERT EINSTEIN MEDICAL CENTER (10585)							
2012	16,578	97,332	0.17	13	13.23	0.98	(0.52 – 1.68)
2011	18,881	104,715	0.18	34	16.42	2.07	(1.43 – 2.89)
2010	18,854	113,743	0.17	34	15.75	2.16	(1.49 – 3.02)
ALBERT EINSTEIN MEDICAL CENTER AT ELKINS PARK (12500)							
2012	1,132	10,144	0.11	4	0.85	4.73	(1.27 – 12.11)
2011	1,364	10,601	0.13	7	1.26	5.55	(2.22 – 11.43)
2010	1,209	12,656	0.10	1	1.09	0.92	(0.01 – 5.12)
ALBERT EINSTEIN MEDICAL CENTER MOSS REHABILITATION (12508)							
2012	2,360	43,005	0.05	1	1.45	0.69	(0.01 – 3.84)
2011	2,675	40,945	0.07	0	1.75	0.00	(0.00 – 2.10)
2010	2,575	41,823	0.06	2	2.45	0.82	(0.09 – 2.95)
ALLEGHENY GENERAL HOSPITAL (10648)							
2012	45,148	131,537	0.34	50	40.18	1.24	(0.92 – 1.64)
2011	44,828	133,596	0.34	36	34.78	1.03	(0.72 – 1.43)
2010	46,038	135,613	0.34	27	34.98	0.77	(0.51 – 1.12)
ALLEGHENY VALLEY HOSPITAL (11842)							
2012	4,729	42,082	0.11	6	3.25	1.85	(0.68 – 4.02)
2011	4,872	46,228	0.11	5	2.91	1.72	(0.55 – 4.00)
2010	.	.	.	.	.	.	.
ALLIED SERVICES INSTITUTE OF REHABILITATION (12591)							
2012	368	22,151	0.02	0	0.19	0.00	(0.00 – 19.57)
2011	364	20,817	0.02	0	0.30	0.00	(0.00 – 12.12)
2010	460	21,464	0.02	0	0.41	0.00	(0.00 – 8.99)
ALTOONA REGIONAL HEALTH SYSTEM (10178)							
2012	10,388	82,234	0.13	2	7.26	0.28	(0.03 – 0.99)
2011	12,277	89,191	0.14	1	6.99	0.14	(0.00 – 0.80)
2010	11,115	89,928	0.12	6	7.82	0.77	(0.28 – 1.67)
ARIA HEALTH (11388)							
2012	15,370	108,401	0.14	13	11.92	1.09	(0.58 – 1.87)
2011	17,459	115,743	0.15	22	15.69	1.40	(0.88 – 2.12)
2010	20,404	131,905	0.15	25	17.20	1.45	(0.94 – 2.15)
ARMSTRONG COUNTY MEMORIAL HOSPITAL (12057)							
2012	5,612	32,277	0.17	2	4.12	0.49	(0.05 – 1.75)
2011	5,159	34,165	0.15	2	2.89	0.69	(0.08 – 2.50)
2010	4,937	33,954	0.15	2	3.40	0.59	(0.07 – 2.12)

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Table 4.4.8 – Critical Care Unit and Ward CLABSIs by Facility – Continued from previous page

	Central Line Days	Patient Days	Central Line Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
BARNES-KASSON COUNTY HOSPITAL (12404)							
2012	52	4,386	0.01	0	0.03	0.00	(0.00 – 145.98)
2011	46	4,251	0.01	0	0.04	0.00	(0.00 – 87.83)
2010	.	.	.	.	.	.	.
BERWICK HOSPITAL CENTER (11442)							
2012	465	12,578	0.04	0	0.27	0.00	(0.00 – 13.67)
2011	530	14,647	0.04	1	0.39	2.59	(0.03 – 14.43)
2010	616	15,376	0.04	0	0.50	0.00	(0.00 – 7.30)
BRADFORD REGIONAL MEDICAL CENTER (12361)							
2012	416	12,697	0.03	0	0.24	0.00	(0.00 – 15.57)
2011	632	11,423	0.06	0	0.43	0.00	(0.00 – 8.62)
2010	812	11,429	0.07	1	0.61	1.63	(0.02 – 9.05)
BRANDYWINE HOSPITAL (11979)							
2012	3,631	37,089	0.10	1	2.44	0.41	(0.01 – 2.28)
2011	3,768	37,170	0.10	4	2.27	1.76	(0.47 – 4.51)
2010	3,359	25,194	0.13	3	2.34	1.28	(0.26 – 3.75)
BROOKVILLE HOSPITAL (12418)							
2012	482	6,036	0.08	0	0.31	0.00	(0.00 – 11.70)
2011	75	6,425	0.01	0	0.07	0.00	(0.00 – 54.63)
2010	77	6,307	0.01	0	0.07	0.00	(0.00 – 49.88)
BUCKTAIL MEDICAL CENTER (12461)							
2012	91	1,260	0.07	0	0.06	0.00	(0.00 – 62.93)
2011	80	1,078	0.07	0	0.05	0.00	(0.00 – 71.89)
2010	.	.	.	.	.	.	.
BUTLER MEMORIAL HOSPITAL (11736)							
2012	8,550	65,912	0.13	7	6.00	1.17	(0.47 – 2.40)
2011	8,223	67,225	0.12	5	4.79	1.04	(0.34 – 2.44)
2010	8,153	63,971	0.13	4	5.71	0.70	(0.19 – 1.79)
CANONSBURG GENERAL HOSPITAL (11586)							
2012	1,875	17,168	0.11	0	1.28	0.00	(0.00 – 2.86)
2011	1,887	17,798	0.11	0	1.13	0.00	(0.00 – 3.25)
2010	2,141	18,963	0.11	2	1.52	1.31	(0.15 – 4.74)
CARLISLE REGIONAL MEDICAL CENTER (11997)							
2012	1,998	20,990	0.10	0	1.34	0.00	(0.00 – 2.75)
2011	985	26,235	0.04	1	0.71	1.40	(0.02 – 7.82)
2010	3,834	28,397	0.14	0	2.67	0.00	(0.00 – 1.38)
CHAMBERSBURG HOSPITAL (11913)							
2012	6,519	54,266	0.12	4	4.52	0.88	(0.24 – 2.27)
2011	7,045	56,846	0.12	5	4.09	1.22	(0.39 – 2.85)
2010	6,539	52,912	0.12	2	4.60	0.43	(0.05 – 1.57)
CHARLES COLE MEMORIAL HOSPITAL (11956)							
2012	583	10,297	0.06	0	0.36	0.00	(0.00 – 10.20)
2011	592	9,233	0.06	1	0.39	2.58	(0.03 – 14.35)
2010	605	9,535	0.06	1	0.46	2.15	(0.03 – 11.97)
CHESTER COUNTY HOSPITAL (12016)							
2012	9,944	55,568	0.18	9	7.34	1.23	(0.56 – 2.33)
2011	10,105	57,018	0.18	6	8.81	0.68	(0.25 – 1.48)
2010	9,490	54,838	0.17	3	7.88	0.38	(0.08 – 1.11)
CHESTNUT HILL HOSPITAL (12304)							
2012	3,844	26,818	0.14	3	2.74	1.09	(0.22 – 3.20)
2011	3,947	27,803	0.14	1	2.24	0.45	(0.01 – 2.49)
2010	3,835	27,053	0.14	1	3.27	0.31	(0.00 – 1.70)

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Table 4.4.8 – Critical Care Unit and Ward CLABSIs by Facility – Continued from previous page

	Central Line Days	Patient Days	Central Line Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
CHILDRENS HOME OF PITTSBURGH, THE (12336)							
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	244	1,172	0.21	2	0.16	12.49	(1.40 – 45.08)
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)							
2012	24,577	111,334	0.22	35	20.42	1.71	(1.19 – 2.38)
2011	21,675	110,317	0.20	31	18.55	1.67	(1.14 – 2.37)
2010	20,376	99,632	0.20	48	16.55	2.90	(2.14 – 3.84)
CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)							
2012	21,255	61,717	0.34	26	18.93	1.37	(0.90 – 2.01)
2011	22,774	61,579	0.37	35	17.36	2.02	(1.40 – 2.80)
2010	22,313	57,325	0.39	33	16.65	1.98	(1.36 – 2.78)
CHILDRENS INSTITUTE OF PITTSBURGH (12266)							
2012	296	11,368	0.03	2	0.16	12.37	(1.39 – 44.66)
2011	954	7,631	0.13	1	0.55	1.81	(0.02 – 10.06)
2010	1,177	9,990	0.12	6	0.83	7.20	(2.63 – 15.68)
CLARION HOSPITAL (11654)							
2012	1,157	10,706	0.11	1	0.86	1.16	(0.02 – 6.47)
2011	1,792	10,903	0.16	0	1.58	0.00	(0.00 – 2.31)
2010	1,255	11,420	0.11	0	1.11	0.00	(0.00 – 3.31)
CLEARFIELD HOSPITAL (11843)							
2012	648	15,717	0.04	2	0.38	5.26	(0.59 – 18.99)
2011	611	16,613	0.04	0	0.44	0.00	(0.00 – 8.28)
2010	1,029	19,573	0.05	0	0.81	0.00	(0.00 – 4.53)
CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)							
2012	15,230	116,423	0.13	12	11.66	1.03	(0.53 – 1.80)
2011	17,082	118,549	0.14	18	15.48	1.16	(0.69 – 1.84)
2010	19,275	129,768	0.15	16	16.33	0.98	(0.56 – 1.59)
COORDINATED HEALTH ORTHOPEDIC HOSPITAL, LLC (11872)							
2012	66	3,085	0.02	0	0.03	0.00	(0.00 – 104.90)
2011	131	3,107	0.04	0	0.09	0.00	(0.00 – 39.58)
2010	157	2,994	0.05	0	0.12	0.00	(0.00 – 29.66)
CORRY MEMORIAL HOSPITAL (12283)							
2012	39	3,598	0.01	0	0.02	0.00	(0.00 – 197.38)
2011	9	5,107	0.00	0	0.01	0.00	(0.00 – 321.85)
2010	8	5,177	0.00	0	0.01	0.00	(0.00 – 365.33)
CRICHTON REHABILITATION CENTER (12273)							
2012	412	9,732	0.04	0	0.24	0.00	(0.00 – 15.11)
2011	310	9,740	0.03	0	0.23	0.00	(0.00 – 15.88)
2010	237	9,026	0.03	0	0.25	0.00	(0.00 – 14.53)
CROZER CHESTER MEDICAL CENTER (11839)							
2012	12,274	70,823	0.17	8	9.82	0.81	(0.35 – 1.61)
2011	15,204	84,400	0.18	12	13.22	0.91	(0.47 – 1.59)
2010	19,017	96,057	0.20	26	15.51	1.68	(1.09 – 2.46)
CROZER CHESTER MEDICAL CENTER SPRINGFIELD (11851)							
2012	379	4,316	0.09	0	0.27	0.00	(0.00 – 13.45)
2011	416	5,467	0.08	0	0.42	0.00	(0.00 – 8.66)
2010	659	6,843	0.10	1	0.59	1.69	(0.02 – 9.41)
CROZER CHESTER MEDICAL CENTER TAYLOR (11932)							
2012	3,660	28,514	0.13	3	2.79	1.07	(0.22 – 3.14)
2011	5,898	35,178	0.17	7	5.20	1.35	(0.54 – 2.78)
2010	5,895	38,591	0.15	6	4.98	1.21	(0.44 – 2.62)
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)							
2012	7,091	38,333	0.18	2	5.73	0.35	(0.04 – 1.26)
2011	6,932	41,568	0.17	4	6.11	0.65	(0.18 – 1.67)
2010	7,922	43,695	0.18	0	6.54	0.00	(0.00 – 0.56)

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Table 4.4.8 – Critical Care Unit and Ward CLABSIs by Facility – Continued from previous page

	Central Line Days	Patient Days	Central Line Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
DOYLESTOWN HOSPITAL (10190)							
2012	8,056	50,723	0.16	3	5.84	0.51	(0.10 – 1.50)
2011	7,903	53,945	0.15	0	4.45	0.00	(0.00 – 0.82)
2010	8,004	51,572	0.16	3	5.46	0.55	(0.11 – 1.60)
DUBOIS REGIONAL MEDICAL CENTER (11606)							
2012	3,724	37,070	0.10	0	2.51	0.00	(0.00 – 1.46)
2011	3,953	37,573	0.11	0	2.37	0.00	(0.00 – 1.55)
2010	4,276	39,464	0.11	3	3.06	0.98	(0.20 – 2.86)
EAGLEVILLE HOSPITAL (12965)							
2012	61	17,781	0.00	0	0.02	0.00	(0.00 – 151.00)
2011	18	6,561	0.00	0	0.02	0.00	(0.00 – 174.53)
2010	.	.	.	.	.	.	.
EASTERN REGIONAL MEDICAL CENTER (12348)							
2012	1,636	1,809	0.90	12	1.55	7.72	(3.98 – 13.49)
2011	268	278	0.96	2	0.11	18.72	(2.10 – 67.60)
2010	.	.	.	.	.	.	.
EASTON HOSPITAL (11929)							
2012	6,489	38,904	0.17	2	5.16	0.39	(0.04 – 1.40)
2011	6,840	42,429	0.16	2	6.07	0.33	(0.04 – 1.19)
2010	7,008	43,230	0.16	4	5.87	0.68	(0.18 – 1.74)
ELK REGIONAL HEALTH CENTER (11859)							
2012	345	14,143	0.02	0	0.19	0.00	(0.00 – 19.66)
2011	664	14,320	0.05	0	0.46	0.00	(0.00 – 7.95)
2010	832	15,030	0.06	0	0.65	0.00	(0.00 – 5.64)
ELLWOOD CITY HOSPITAL (11779)							
2012	583	9,518	0.06	0	0.36	0.00	(0.00 – 10.08)
2011	828	11,686	0.07	0	0.53	0.00	(0.00 – 6.89)
2010	605	11,683	0.05	0	0.48	0.00	(0.00 – 7.68)
ENDLESS MOUNTAINS HEALTH SYSTEMS (11817)							
2012	122	3,440	0.04	0	0.07	0.00	(0.00 – 52.45)
2011	150	3,542	0.04	0	0.11	0.00	(0.00 – 34.59)
2010	.	.	.	.	.	.	.
EPHRATA COMMUNITY HOSPITAL (11764)							
2012	2,549	24,878	0.10	0	1.72	0.00	(0.00 – 2.13)
2011	2,217	27,091	0.08	0	1.39	0.00	(0.00 – 2.64)
2010	2,283	28,180	0.08	2	1.70	1.18	(0.13 – 4.25)
EVANGELICAL COMMUNITY HOSPITAL (11701)							
2012	1,144	21,725	0.05	1	0.76	1.32	(0.02 – 7.32)
2011	1,659	21,474	0.08	0	1.69	0.00	(0.00 – 2.18)
2010	1,829	19,122	0.10	1	1.33	0.75	(0.01 – 4.18)
EXCELA HEALTH FRICK HOSPITAL (11639)							
2012	1,718	12,696	0.14	1	1.21	0.82	(0.01 – 4.58)
2011	2,578	14,998	0.17	0	1.41	0.00	(0.00 – 2.60)
2010	2,658	15,584	0.17	0	1.79	0.00	(0.00 – 2.05)
EXCELA HEALTH LATROBE HOSPITAL (11651)							
2012	2,590	22,438	0.12	2	1.94	1.03	(0.12 – 3.71)
2011	4,138	26,600	0.16	6	3.70	1.62	(0.59 – 3.53)
2010	4,129	27,716	0.15	5	3.50	1.43	(0.46 – 3.34)
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)							
2012	16,142	87,500	0.18	12	13.04	0.92	(0.47 – 1.61)
2011	18,328	94,631	0.19	5	15.73	0.32	(0.10 – 0.74)
2010	19,290	95,320	0.20	6	15.69	0.38	(0.14 – 0.83)

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Table 4.4.8 – Critical Care Unit and Ward CLABSIs by Facility – Continued from previous page

	Central Line Days	Patient Days	Central Line Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
FORBES REGIONAL HOSPITAL (11265)							
2012	7,616	76,774	0.10	5	5.58	0.90	(0.29 – 2.09)
2011	9,251	77,423	0.12	8	8.67	0.92	(0.40 – 1.82)
2010	.	.	.	.	.	.	.
FULTON COUNTY MEDICAL CENTER (11939)							
2012	99	4,625	0.02	0	0.05	0.00	(0.00 – 69.93)
2011	208	4,065	0.05	0	0.14	0.00	(0.00 – 25.83)
2010	81	4,574	0.02	0	0.07	0.00	(0.00 – 49.80)
GEISINGER HEALTHSOUTH REHABILITATION HOSPITAL (11993)							
2012	200	11,741	0.02	0	0.10	0.00	(0.00 – 35.87)
2011	544	10,978	0.05	0	0.37	0.00	(0.00 – 9.82)
2010	268	10,867	0.02	0	0.23	0.00	(0.00 – 15.73)
GEISINGER MEDICAL CENTER (11775)							
2012	24,018	131,472	0.18	41	19.37	2.12	(1.52 – 2.87)
2011	24,941	126,241	0.20	58	21.33	2.72	(2.07 – 3.52)
2010	22,309	118,395	0.19	25	18.32	1.36	(0.88 – 2.01)
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)							
2012	10,919	66,248	0.16	5	8.67	0.58	(0.19 – 1.35)
2011	9,874	64,510	0.15	6	8.85	0.68	(0.25 – 1.48)
2010	8,409	58,226	0.14	9	7.15	1.26	(0.57 – 2.39)
GEISINGER-BLOOMSBURG HOSPITAL (12008)							
2012	652	12,590	0.05	0	0.40	0.00	(0.00 – 9.25)
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
GEISINGER-COMMUNITY MEDICAL CENTER (11914)							
2012	5,674	54,768	0.10	1	4.19	0.24	(0.00 – 1.33)
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
GETTYSBURG HOSPITAL (11531)							
2012	1,551	18,278	0.08	2	1.02	1.96	(0.22 – 7.09)
2011	1,576	18,089	0.09	0	0.98	0.00	(0.00 – 3.76)
2010	1,629	17,456	0.09	0	1.19	0.00	(0.00 – 3.08)
GNADEN HUETTEN MEMORIAL HOSPITAL (12241)							
2012	835	18,176	0.05	2	0.50	4.01	(0.45 – 14.49)
2011	1,044	16,886	0.06	0	0.69	0.00	(0.00 – 5.33)
2010	1,167	16,243	0.07	1	0.88	1.13	(0.01 – 6.31)
GRAND VIEW HOSPITAL (11847)							
2012	7,517	40,826	0.18	4	5.57	0.72	(0.19 – 1.84)
2011	8,690	42,899	0.20	2	4.61	0.43	(0.05 – 1.57)
2010	7,968	41,631	0.19	2	5.29	0.38	(0.04 – 1.37)
GROVE CITY MEDICAL CENTER (11722)							
2012	437	8,181	0.05	0	0.27	0.00	(0.00 – 13.74)
2011	513	7,906	0.06	0	0.34	0.00	(0.00 – 10.94)
2010	531	7,396	0.07	1	0.40	2.49	(0.03 – 13.87)
HAHNEMANN UNIVERSITY HOSPITAL (11437)							
2012	18,334	95,805	0.19	9	14.90	0.60	(0.28 – 1.15)
2011	19,702	106,200	0.19	20	17.04	1.17	(0.72 – 1.81)
2010	20,674	104,749	0.20	25	16.87	1.48	(0.96 – 2.19)
HANOVER HOSPITAL (11899)							
2012	2,669	24,815	0.11	3	1.82	1.65	(0.33 – 4.82)
2011	3,182	25,152	0.13	0	1.84	0.00	(0.00 – 1.99)
2010	3,646	26,527	0.14	4	2.53	1.58	(0.43 – 4.05)
HAZLETON GENERAL HOSPITAL (11878)							
2012	2,988	32,401	0.09	6	1.99	3.02	(1.10 – 6.57)
2011	2,575	33,295	0.08	3	1.63	1.84	(0.37 – 5.38)
2010	2,443	34,045	0.07	4	1.85	2.17	(0.58 – 5.55)

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Table 4.4.8 – Critical Care Unit and Ward CLABSIs by Facility – Continued from previous page

	Central Line Days	Patient Days	Central Line Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
HEALTHSOUTH HARMARVILLE REHABILITATION HOSPITAL (11727)							
2012	2,777	34,709	0.08	1	1.81	0.55	(0.01 – 3.08)
2011	2,630	31,608	0.08	0	1.64	0.00	(0.00 – 2.23)
2010	2,227	30,991	0.07	0	1.68	0.00	(0.00 – 2.18)
HEALTHSOUTH NITTANY VALLEY REHABILITATION HOSPITAL (11667)							
2012	633	13,305	0.05	0	0.38	0.00	(0.00 – 9.66)
2011	458	11,594	0.04	0	0.33	0.00	(0.00 – 11.19)
2010	451	12,452	0.04	0	0.37	0.00	(0.00 – 9.83)
HEALTHSOUTH READING REHABILITATION HOSPITAL (12139)							
2012	1,104	15,333	0.07	0	0.71	0.00	(0.00 – 5.19)
2011	1,138	15,204	0.07	1	0.72	1.38	(0.02 – 7.68)
2010	1,205	14,813	0.08	0	0.90	0.00	(0.00 – 4.10)
HEALTHSOUTH REHABILITATION HOSPITAL OF ALTOONA (11903)							
2012	1,334	25,280	0.05	0	0.81	0.00	(0.00 – 4.51)
2011	1,141	23,971	0.05	0	0.79	0.00	(0.00 – 4.65)
2010	855	22,173	0.04	0	0.70	0.00	(0.00 – 5.23)
HEALTHSOUTH REHABILITATION HOSPITAL OF ERIE (11810)							
2012	1,350	22,729	0.06	1	0.84	1.19	(0.02 – 6.63)
2011	1,598	25,219	0.06	1	1.05	0.95	(0.01 – 5.30)
2010	1,375	26,319	0.05	1	1.08	0.92	(0.01 – 5.13)
HEALTHSOUTH REHABILITATION HOSPITAL OF MECHANICSBURG (12402)							
2012	1,984	18,430	0.11	1	1.35	0.74	(0.01 – 4.11)
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
HEALTHSOUTH REHABILITATION HOSPITAL OF SEWICKLEY (12066)							
2012	868	12,014	0.07	0	0.56	0.00	(0.00 – 6.60)
2011	841	11,046	0.08	0	0.53	0.00	(0.00 – 6.87)
2010	526	9,586	0.05	0	0.41	0.00	(0.00 – 8.91)
HEALTHSOUTH REHABILITATION HOSPITAL OF YORK (12058)							
2012	1,077	19,635	0.05	1	0.66	1.51	(0.02 – 8.42)
2011	749	20,041	0.04	0	0.54	0.00	(0.00 – 6.77)
2010	699	19,468	0.04	0	0.58	0.00	(0.00 – 6.34)
HEART OF LANCASTER REGIONAL MEDICAL CENTER (12571)							
2012	730	10,008	0.07	0	0.51	0.00	(0.00 – 7.19)
2011	627	10,363	0.06	0	0.67	0.00	(0.00 – 5.51)
2010	849	9,744	0.09	0	0.77	0.00	(0.00 – 4.75)
HERITAGE VALLEY BEAVER (11831)							
2012	8,539	79,459	0.11	1	6.34	0.16	(0.00 – 0.88)
2011	9,171	83,343	0.11	11	8.73	1.26	(0.63 – 2.25)
2010	9,449	86,652	0.11	4	8.34	0.48	(0.13 – 1.23)
HERITAGE VALLEY SEWICKLEY (10375)							
2012	5,053	44,927	0.11	3	3.47	0.87	(0.17 – 2.53)
2011	5,287	46,555	0.11	5	3.12	1.60	(0.52 – 3.74)
2010	5,522	45,426	0.12	2	3.89	0.51	(0.06 – 1.86)
HIGHLANDS HOSPITAL (11902)							
2012	648	11,661	0.06	2	0.40	5.02	(0.56 – 18.12)
2011	712	12,457	0.06	1	0.48	2.10	(0.03 – 11.68)
2010	345	12,273	0.03	0	0.30	0.00	(0.00 – 12.43)
HOLY REDEEMER HOSPITAL AND MEDICAL CENTER (11973)							
2012	6,307	54,883	0.11	1	4.34	0.23	(0.00 – 1.28)
2011	6,542	59,463	0.11	2	3.88	0.52	(0.06 – 1.86)
2010	6,255	59,749	0.10	4	4.50	0.89	(0.24 – 2.28)
HOLY SPIRIT HOSPITAL (12387)							
2012	9,404	71,379	0.13	5	6.62	0.76	(0.24 – 1.76)
2011	11,885	72,290	0.16	10	6.55	1.53	(0.73 – 2.81)
2010	12,154	70,133	0.17	9	8.18	1.10	(0.50 – 2.09)

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Table 4.4.8 – Critical Care Unit and Ward CLABSIs by Facility – Continued from previous page

	Central Line Days	Patient Days	Central Line Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
HOSPITAL OF FOX CHASE CANCER CENTER (12134)							
2012	70	145	0.48	0	0.07	0.00	(0.00 – 55.83)
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)							
2012	78,462	242,590	0.32	50	69.18	0.72	(0.54 – 0.95)
2011	78,698	237,350	0.33	18	61.20	0.29	(0.17 – 0.46)
2010	78,216	239,077	0.33	25	59.71	0.42	(0.27 – 0.62)
INDIANA REGIONAL MEDICAL CENTER (11759)							
2012	1,702	38,299	0.04	3	1.01	2.97	(0.60 – 8.67)
2011	2,429	40,201	0.06	1	1.61	0.62	(0.01 – 3.46)
2010	2,605	39,751	0.07	1	1.99	0.50	(0.01 – 2.79)
J C BLAIR MEMORIAL HOSP (11724)							
2012	576	8,363	0.07	1	0.37	2.73	(0.04 – 15.19)
2011	620	9,767	0.06	0	0.41	0.00	(0.00 – 9.01)
2010	959	10,598	0.09	0	0.70	0.00	(0.00 – 5.22)
JAMESON MEMORIAL HOSPITAL (11954)							
2012	3,944	39,038	0.10	0	2.66	0.00	(0.00 – 1.38)
2011	3,647	38,782	0.09	6	2.23	2.69	(0.98 – 5.86)
2010	4,030	44,114	0.09	4	2.95	1.36	(0.36 – 3.47)
JEANES HOSPITAL (11459)							
2012	6,160	38,533	0.16	1	4.47	0.22	(0.00 – 1.25)
2011	6,732	41,037	0.16	0	5.96	0.00	(0.00 – 0.62)
2010	7,326	42,199	0.17	3	6.08	0.49	(0.10 – 1.44)
JEFFERSON REGIONAL MEDICAL CENTER (10237)							
2012	9,426	69,479	0.14	3	6.66	0.45	(0.09 – 1.32)
2011	10,399	75,268	0.14	8	5.92	1.35	(0.58 – 2.66)
2010	11,656	78,981	0.15	9	8.01	1.12	(0.51 – 2.13)
JENNERSVILLE REGIONAL HOSPITAL (12337)							
2012	1,127	12,583	0.09	1	0.75	1.34	(0.02 – 7.45)
2011	1,144	13,563	0.08	1	0.71	1.40	(0.02 – 7.81)
2010	1,002	13,221	0.08	6	0.75	7.98	(2.91 – 17.37)
JERSEY SHORE HOSPITAL (11689)							
2012	263	4,497	0.06	0	0.16	0.00	(0.00 – 22.50)
2011	443	5,197	0.09	0	0.28	0.00	(0.00 – 13.32)
2010	188	4,527	0.04	0	0.15	0.00	(0.00 – 24.02)
JOHN HEINZ INSTITUTE OF REHABILITATION (11861)							
2012	471	20,244	0.02	0	0.25	0.00	(0.00 – 14.51)
2011	399	21,076	0.02	0	0.33	0.00	(0.00 – 11.22)
2010	451	20,170	0.02	0	0.40	0.00	(0.00 – 9.22)
KANE COMMUNITY HOSPITAL (12111)							
2012	311	4,769	0.07	2	0.20	10.20	(1.15 – 36.83)
2011	298	5,398	0.06	0	0.20	0.00	(0.00 – 18.28)
2010	158	4,608	0.03	0	0.13	0.00	(0.00 – 27.86)
KENSINGTON HOSPITAL (12609)							
2012	2,042	2,885	0.71	0	1.87	0.00	(0.00 – 1.96)
2011	1,478	2,751	0.54	1	0.66	1.52	(0.02 – 8.48)
2010	1,667	2,732	0.61	1	0.95	1.05	(0.01 – 5.86)
LANCASTER GENERAL HOSPITAL (10183)							
2012	18,634	146,705	0.13	8	13.03	0.61	(0.26 – 1.21)
2011	22,739	154,617	0.15	8	12.79	0.63	(0.27 – 1.23)
2010	21,983	145,807	0.15	5	15.06	0.33	(0.11 – 0.77)
LANCASTER REGIONAL MEDICAL CENTER (12335)							
2012	3,048	28,382	0.11	2	2.08	0.96	(0.11 – 3.48)
2011	3,247	28,792	0.11	8	1.92	4.17	(1.80 – 8.22)
2010	2,890	28,064	0.10	3	2.08	1.44	(0.29 – 4.21)

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Table 4.4.8 – Critical Care Unit and Ward CLABSIs by Facility – Continued from previous page

	Central Line Days	Patient Days	Central Line Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
LANCASTER REHABILITATION HOSPITAL (12628)							
2012	788	18,153	0.04	0	0.47	0.00	(0.00 – 7.87)
2011	554	17,607	0.03	0	0.41	0.00	(0.00 – 8.87)
2010	834	17,398	0.05	0	0.66	0.00	(0.00 – 5.52)
LANSDALE HOSPITAL (12032)							
2012	2,261	20,308	0.11	1	1.55	0.65	(0.01 – 3.59)
2011	2,360	21,292	0.11	3	1.40	2.15	(0.43 – 6.27)
2010	2,525	21,572	0.12	2	1.79	1.12	(0.13 – 4.04)
LEHIGH VALLEY HOSPITAL — MUHLENBERG (11898)							
2012	9,080	49,028	0.19	8	7.34	1.09	(0.47 – 2.15)
2011	10,597	50,937	0.21	0	8.98	0.00	(0.00 – 0.41)
2010	10,665	50,646	0.21	3	8.63	0.35	(0.07 – 1.02)
LEHIGH VALLEY HOSPITAL (11884)							
2012	44,689	212,056	0.21	77	36.86	2.09	(1.65 – 2.61)
2011	44,050	212,148	0.21	37	37.32	0.99	(0.70 – 1.37)
2010	42,972	202,185	0.21	18	34.73	0.52	(0.31 – 0.82)
LEWISTOWN HOSPITAL (11825)							
2012	2,108	25,305	0.08	0	1.38	0.00	(0.00 – 2.66)
2011	1,637	24,902	0.07	0	1.07	0.00	(0.00 – 3.44)
2010	1,681	23,437	0.07	0	1.27	0.00	(0.00 – 2.89)
LOCK HAVEN HOSPITAL (12097)							
2012	189	4,456	0.04	1	0.11	8.98	(0.12 – 49.94)
2011	182	4,158	0.04	0	0.13	0.00	(0.00 – 28.68)
2010	198	4,819	0.04	0	0.16	0.00	(0.00 – 22.77)
LOWER BUCKS HOSPITAL (12390)							
2012	2,012	29,147	0.07	4	1.28	3.13	(0.84 – 8.00)
2011	2,115	30,245	0.07	1	1.36	0.73	(0.01 – 4.08)
2010	2,541	34,713	0.07	3	1.92	1.57	(0.31 – 4.58)
MAGEE REHAB HOSPITAL (12146)							
2012	1,759	26,781	0.07	1	1.11	0.90	(0.01 – 5.01)
2011	2,591	28,612	0.09	0	1.59	0.00	(0.00 – 2.30)
2010	2,047	28,308	0.07	0	1.91	0.00	(0.00 – 1.92)
MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)							
2012	8,135	60,856	0.13	9	6.25	1.44	(0.66 – 2.73)
2011	7,759	56,186	0.14	5	7.08	0.71	(0.23 – 1.65)
2010	7,081	57,225	0.12	8	6.15	1.30	(0.56 – 2.56)
MAIN LINE HOSPITAL — PAOLI (11750)							
2012	6,323	55,386	0.11	10	4.35	2.30	(1.10 – 4.23)
2011	6,328	58,816	0.11	3	3.77	0.80	(0.16 – 2.32)
2010	6,565	55,763	0.12	6	4.65	1.29	(0.47 – 2.81)
MAIN LINE HOSPITAL BRYN MAWR (11753)							
2012	11,111	69,069	0.16	8	8.79	0.91	(0.39 – 1.79)
2011	9,673	76,281	0.13	11	8.97	1.23	(0.61 – 2.19)
2010	10,146	77,800	0.13	12	8.75	1.37	(0.71 – 2.40)
MAIN LINE HOSPITAL BRYN MAWR REHABILITATION (11417)							
2012	1,915	38,707	0.05	0	1.16	0.00	(0.00 – 3.17)
2011	1,913	41,448	0.05	1	1.33	0.75	(0.01 – 4.18)
2010	2,229	43,374	0.05	0	1.76	0.00	(0.00 – 2.08)
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)							
2012	13,853	70,862	0.20	5	11.29	0.44	(0.14 – 1.03)
2011	13,737	79,864	0.17	14	12.05	1.16	(0.63 – 1.95)
2010	.	.	.	.	.	.	.
MEADVILLE MEDICAL CENTER (11583)							
2012	2,577	35,113	0.07	1	1.80	0.55	(0.01 – 3.09)
2011	3,250	36,634	0.09	1	3.22	0.31	(0.00 – 1.73)
2010	3,389	36,711	0.09	0	3.06	0.00	(0.00 – 1.20)

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Table 4.4.8 – Critical Care Unit and Ward CLABSIs by Facility – Continued from previous page

	Central Line Days	Patient Days	Central Line Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
MEMORIAL HOSPITAL (11633)							
2012	2,474	22,194	0.11	2	1.85	1.08	(0.12 – 3.91)
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
MEMORIAL HOSPITAL, INC. TOWANDA (12549)							
2012	314	6,544	0.05	0	0.19	0.00	(0.00 – 19.44)
2011	140	4,432	0.03	0	0.10	0.00	(0.00 – 35.12)
2010	285	4,659	0.06	0	0.22	0.00	(0.00 – 16.67)
MERCY FITZGERALD HOSPITAL (11683)							
2012	5,396	45,719	0.12	5	4.07	1.23	(0.40 – 2.87)
2011	7,094	47,715	0.15	13	6.39	2.03	(1.08 – 3.48)
2010	8,001	50,205	0.16	16	6.72	2.38	(1.36 – 3.87)
MERCY PHILADELPHIA HOSPITAL (11946)							
2012	4,578	40,012	0.11	4	3.43	1.17	(0.31 – 2.98)
2011	5,664	43,434	0.13	1	5.23	0.19	(0.00 – 1.06)
2010	6,314	47,304	0.13	2	5.43	0.37	(0.04 – 1.33)
MERCY SUBURBAN HOSPITAL NORRISTOWN (11952)							
2012	3,631	26,003	0.14	1	2.81	0.36	(0.00 – 1.98)
2011	4,866	28,748	0.17	6	4.28	1.40	(0.51 – 3.05)
2010	5,299	30,578	0.17	5	4.40	1.14	(0.37 – 2.65)
MEYERSDALE COMMUNITY HOSPITAL (11968)							
2012	13	1,877	0.01	0	0.01	0.00	(0.00 – 635.01)
2011	.	.	.	.	.	.	.
2010	24	1,735	0.01	0	0.02	0.00	(0.00 – 162.69)
MID-VALLEY HOSPITAL (11557)							
2012	154	4,018	0.04	0	0.09	0.00	(0.00 – 41.05)
2011	426	4,247	0.10	0	0.26	0.00	(0.00 – 14.27)
2010	167	4,584	0.04	0	0.14	0.00	(0.00 – 26.57)
MILLCREEK COMMUNITY HOSPITAL (12253)							
2012	525	22,098	0.02	1	0.31	3.25	(0.04 – 18.06)
2011	631	20,062	0.03	1	0.76	1.32	(0.02 – 7.36)
2010	652	21,824	0.03	0	0.68	0.00	(0.00 – 5.37)
MILTON S HERSHEY MEDICAL CENTER (11747)							
2012	37,147	115,419	0.32	53	32.73	1.62	(1.21 – 2.12)
2011	35,221	117,366	0.30	47	27.89	1.68	(1.24 – 2.24)
2010	34,326	116,280	0.30	26	26.56	0.98	(0.64 – 1.43)
MINERS MEDICAL CENTER (12295)							
2012	102	3,839	0.03	0	0.06	0.00	(0.00 – 65.62)
2011	81	4,420	0.02	0	0.07	0.00	(0.00 – 54.94)
2010	172	4,521	0.04	0	0.14	0.00	(0.00 – 25.95)
MONONGAHELA VALLEY HOSPITAL (11069)							
2012	4,544	48,871	0.09	5	3.03	1.65	(0.53 – 3.85)
2011	5,412	51,094	0.11	4	3.23	1.24	(0.33 – 3.17)
2010	5,566	53,137	0.10	7	4.00	1.75	(0.70 – 3.60)
MOSES TAYLOR HOSPITAL (11528)							
2012	3,500	50,069	0.07	2	2.43	0.82	(0.09 – 2.97)
2011	4,284	53,845	0.08	4	4.33	0.92	(0.25 – 2.37)
2010	4,280	52,333	0.08	3	3.92	0.76	(0.15 – 2.23)
MOUNT NITTANY MEDICAL CENTER (11797)							
2012	6,455	50,164	0.13	0	4.93	0.00	(0.00 – 0.74)
2011	6,936	51,928	0.13	0	6.37	0.00	(0.00 – 0.58)
2010	7,568	51,043	0.15	4	6.41	0.62	(0.17 – 1.60)

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Table 4.4.8 – Critical Care Unit and Ward CLABSIs by Facility – Continued from previous page

	Central Line Days	Patient Days	Central Line Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
MUNCY VALLEY HOSPITAL (11748)							
2012	485	4,703	0.10	1	0.33	3.04	(0.04 – 16.94)
2011	669	4,785	0.14	0	0.38	0.00	(0.00 – 9.65)
2010	426	4,632	0.09	0	0.31	0.00	(0.00 – 11.77)
NASON HOSPITAL (11907)							
2012	189	8,346	0.02	0	0.10	0.00	(0.00 – 36.31)
2011	198	8,468	0.02	0	0.16	0.00	(0.00 – 23.50)
2010	227	8,793	0.03	0	0.20	0.00	(0.00 – 18.68)
NAZARETH HOSPITAL (11919)							
2012	6,494	45,817	0.14	11	4.62	2.38	(1.19 – 4.26)
2011	6,681	46,634	0.14	16	3.78	4.24	(2.42 – 6.88)
2010	5,990	48,223	0.12	15	4.21	3.56	(1.99 – 5.88)
OHIO VALLEY GENERAL HOSPITAL (12298)							
2012	2,626	23,943	0.11	1	1.80	0.56	(0.01 – 3.10)
2011	3,301	21,440	0.15	5	1.84	2.71	(0.87 – 6.34)
2010	2,618	19,315	0.14	2	1.82	1.10	(0.12 – 3.97)
OSS ORTHOPAEDIC HOSPITAL (18467)							
2012	6	3,888	0.00	0	0.00	0.00	(0.00 –1,738.94)
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
PALMERTON HOSPITAL (12396)							
2012	329	11,321	0.03	0	0.18	0.00	(0.00 – 20.06)
2011	532	11,229	0.05	0	0.37	0.00	(0.00 – 9.96)
2010	751	11,028	0.07	0	0.57	0.00	(0.00 – 6.42)
PENN PRESBYTERIAN MEDICAL CENTER (11814)							
2012	11,502	62,055	0.19	11	9.30	1.18	(0.59 – 2.12)
2011	11,605	65,272	0.18	12	10.12	1.19	(0.61 – 2.07)
2010	12,702	64,014	0.20	10	10.36	0.97	(0.46 – 1.78)
PENN STATE HERSHEY REHABILITATION LLC (11915)							
2012	1,696	15,851	0.11	1	1.16	0.87	(0.01 – 4.82)
2011	1,397	14,130	0.10	1	0.85	1.18	(0.02 – 6.58)
2010	800	9,804	0.08	0	0.73	0.00	(0.00 – 5.00)
PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS (11448)							
2012	13,443	92,287	0.15	15	10.47	1.43	(0.80 – 2.36)
2011	13,008	116,528	0.11	14	12.35	1.13	(0.62 – 1.90)
2010	14,244	100,297	0.14	19	12.14	1.56	(0.94 – 2.44)
PENNSYLVANIA PSYCHIATRIC INSTITUTE (14190)							
2012	8	19,892	0.00	0	0.00	0.00	(0.00 –1,608.59)
2011	2	20,269	0.00	0	0.00	0.00	(0.00 – 853.76)
2010	37	19,437	0.00	0	0.05	0.00	(0.00 – 81.20)
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)							
2012	5,425	33,584	0.16	2	3.94	0.51	(0.06 – 1.83)
2011	5,118	34,445	0.15	1	2.87	0.35	(0.00 – 1.94)
2010	4,971	34,362	0.14	3	3.42	0.88	(0.18 – 2.56)
PINNACLE HEALTH HOSPITALS (10122)							
2012	31,330	147,433	0.21	9	25.87	0.35	(0.16 – 0.66)
2011	32,813	141,274	0.23	13	27.24	0.48	(0.25 – 0.82)
2010	32,451	134,965	0.24	11	25.80	0.43	(0.21 – 0.76)
POCONO MEDICAL CENTER (11772)							
2012	6,282	53,715	0.12	5	4.73	1.06	(0.34 – 2.47)
2011	5,205	55,415	0.09	6	5.10	1.18	(0.43 – 2.56)
2010	4,646	51,368	0.09	3	4.20	0.71	(0.14 – 2.09)
POTTSTOWN MEMORIAL MEDICAL CENTER (11983)							
2012	4,752	42,914	0.11	3	3.25	0.92	(0.19 – 2.69)
2011	5,890	43,413	0.14	2	3.36	0.59	(0.07 – 2.15)
2010	5,683	43,283	0.13	1	3.97	0.25	(0.00 – 1.40)

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Table 4.4.8 – Critical Care Unit and Ward CLABSIs by Facility – Continued from previous page

	Central Line Days	Patient Days	Central Line Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
PUNXSUTAWNEY AREA HOSPITAL (11830)							
2012	439	7,111	0.06	1	0.27	3.64	(0.05 – 20.28)
2011	495	7,380	0.07	0	0.32	0.00	(0.00 – 11.40)
2010	445	7,440	0.06	0	0.34	0.00	(0.00 – 10.65)
READING HOSPITAL AND MEDICAL CENTER (12375)							
2012	25,448	152,935	0.17	13	20.23	0.64	(0.34 – 1.10)
2011	25,747	145,790	0.18	15	22.47	0.67	(0.37 – 1.10)
2010	24,408	137,380	0.18	22	20.20	1.09	(0.68 – 1.65)
REGIONAL HOSPITAL OF SCRANTON (12533)							
2012	5,598	49,636	0.11	2	4.19	0.48	(0.05 – 1.72)
2011	5,770	43,923	0.13	6	5.32	1.13	(0.41 – 2.46)
2010	.	.	.	.	.	.	.
RIDDLE MEMORIAL HOSPITAL (11731)							
2012	7,505	47,311	0.16	6	5.44	1.10	(0.40 – 2.40)
2011	8,274	49,126	0.17	4	4.54	0.88	(0.24 – 2.26)
2010	8,478	49,708	0.17	5	5.71	0.87	(0.28 – 2.04)
ROBERT PACKER HOSPITAL (12422)							
2012	9,832	60,870	0.16	10	7.78	1.29	(0.62 – 2.36)
2011	9,346	56,802	0.16	13	8.26	1.57	(0.84 – 2.69)
2010	7,662	54,475	0.14	5	6.54	0.76	(0.25 – 1.78)
ROXBOROUGH MEMORIAL HOSPITAL (11978)							
2012	1,934	25,179	0.08	0	1.36	0.00	(0.00 – 2.69)
2011	2,477	29,113	0.09	10	2.47	4.05	(1.94 – 7.44)
2010	3,050	30,472	0.10	8	2.72	2.94	(1.26 – 5.79)
SACRED HEART HOSPITAL (11684)							
2012	2,253	31,930	0.07	1	1.57	0.64	(0.01 – 3.55)
2011	2,286	33,195	0.07	3	1.48	2.03	(0.41 – 5.93)
2010	2,377	30,323	0.08	4	1.78	2.25	(0.61 – 5.77)
SCHUYLKILL MEDICAL CENTER — EAST NORWEGIAN STREET (11922)							
2012	2,579	26,766	0.10	2	1.73	1.16	(0.13 – 4.18)
2011	2,612	30,491	0.09	3	1.62	1.85	(0.37 – 5.40)
2010	2,677	32,932	0.08	5	1.99	2.51	(0.81 – 5.86)
SCHUYLKILL MEDICAL CENTER — SOUTH JACKSON STREET (12087)							
2012	2,363	34,712	0.07	2	1.50	1.33	(0.15 – 4.81)
2011	1,447	37,078	0.04	3	1.04	2.89	(0.58 – 8.44)
2010	2,042	38,688	0.05	3	1.61	1.87	(0.38 – 5.45)
SHARON REGIONAL HEALTH SYSTEM (12250)							
2012	3,296	33,922	0.10	2	2.21	0.90	(0.10 – 3.27)
2011	3,281	37,998	0.09	0	2.04	0.00	(0.00 – 1.80)
2010	3,578	35,112	0.10	5	2.58	1.94	(0.62 – 4.52)
SHRINERS HOSPITAL FOR CHILDREN — PHILADELPHIA (12244)							
2012	707	4,835	0.15	1	0.51	1.98	(0.03 – 11.01)
2011	832	4,514	0.18	0	0.45	0.00	(0.00 – 8.17)
2010	662	4,863	0.14	0	0.46	0.00	(0.00 – 7.98)
SOLDIERS & SAILORS MEM HOSPITAL (11688)							
2012	488	11,622	0.04	0	0.31	0.00	(0.00 – 11.72)
2011	647	11,733	0.06	1	0.44	2.29	(0.03 – 12.77)
2010	.	.	.	.	.	.	.
SOMERSET HOSPITAL (12282)							
2012	2,454	17,538	0.14	0	1.74	0.00	(0.00 – 2.10)
2011	2,322	19,366	0.12	2	1.36	1.47	(0.17 – 5.32)
2010	2,276	19,768	0.12	0	1.62	0.00	(0.00 – 2.27)
SOUTHWEST REGIONAL MEDICAL CENTER (11942)							
2012	825	14,297	0.06	0	0.51	0.00	(0.00 – 7.19)
2011	1,077	16,853	0.06	1	0.71	1.42	(0.02 – 7.88)
2010	1,289	17,904	0.07	1	0.97	1.03	(0.01 – 5.71)

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Table 4.4.8 – Critical Care Unit and Ward CLABSIs by Facility – Continued from previous page

	Central Line Days	Patient Days	Central Line Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)							
2012	5,353	34,050	0.16	1	4.22	0.24	(0.00 – 1.32)
2011	4,701	32,754	0.14	7	4.26	1.64	(0.66 – 3.38)
2010	4,895	29,714	0.16	1	4.09	0.24	(0.00 – 1.36)
ST. CLAIR MEMORIAL HOSPITAL (10561)							
2012	8,379	83,473	0.10	3	6.16	0.49	(0.10 – 1.42)
2011	9,873	85,606	0.12	1	9.32	0.11	(0.00 – 0.60)
2010	9,756	86,799	0.11	5	8.58	0.58	(0.19 – 1.36)
ST. JOSEPH MEDICAL CENTER (11961)							
2012	8,696	36,148	0.24	7	7.32	0.96	(0.38 – 1.97)
2011	9,493	36,742	0.26	9	7.73	1.16	(0.53 – 2.21)
2010	9,420	36,866	0.26	6	7.43	0.81	(0.29 – 1.76)
ST. JOSEPHS HOSPITAL (12438)							
2012	4,483	31,637	0.14	6	3.48	1.73	(0.63 – 3.76)
2011	6,080	23,411	0.26	16	4.94	3.24	(1.85 – 5.26)
2010	5,337	22,626	0.24	26	4.25	6.11	(3.99 – 8.95)
ST. LUKES HOSPITAL ANDERSON CAMPUS (21487)							
2012	1,528	16,294	0.09	2	1.11	1.80	(0.20 – 6.50)
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
ST. LUKES HOSPITAL BETHLEHEM (11718)							
2012	21,292	127,448	0.17	16	16.94	0.94	(0.54 – 1.53)
2011	30,097	139,179	0.22	20	25.31	0.79	(0.48 – 1.22)
2010	32,060	145,123	0.22	24	25.78	0.93	(0.60 – 1.39)
ST. LUKES MINERS MEMORIAL HOSPITAL (11784)							
2012	291	7,014	0.04	0	0.17	0.00	(0.00 – 21.46)
2011	251	6,390	0.04	0	0.18	0.00	(0.00 – 20.39)
2010	175	6,549	0.03	0	0.15	0.00	(0.00 – 24.34)
ST. LUKES QUAKERTOWN HOSPITAL (11711)							
2012	767	14,938	0.05	2	0.47	4.29	(0.48 – 15.50)
2011	999	15,057	0.07	0	0.65	0.00	(0.00 – 5.64)
2010	1,090	14,903	0.07	0	0.82	0.00	(0.00 – 4.46)
ST. MARY MEDICAL CENTER (11885)							
2012	13,391	93,836	0.14	13	9.54	1.36	(0.72 – 2.33)
2011	14,395	98,307	0.15	12	8.11	1.48	(0.76 – 2.59)
2010	14,442	98,676	0.15	14	9.93	1.41	(0.77 – 2.36)
ST. MARY MEDICAL CENTER REHAB (12483)							
2012	612	9,315	0.07	1	0.39	2.59	(0.03 – 14.40)
2011	405	8,745	0.05	0	0.28	0.00	(0.00 – 13.02)
2010	.	.	.	.	.	.	.
ST. VINCENT HEALTH CENTER (11699)							
2012	8,595	73,132	0.12	14	6.47	2.16	(1.18 – 3.63)
2011	11,064	78,775	0.14	8	10.07	0.79	(0.34 – 1.57)
2010	13,171	83,867	0.16	10	11.08	0.90	(0.43 – 1.66)
SUNBURY COMMUNITY HOSPITAL (12105)							
2012	175	6,518	0.03	1	0.10	10.41	(0.14 – 57.92)
2011	180	7,897	0.02	0	0.14	0.00	(0.00 – 25.73)
2010	313	7,978	0.04	0	0.26	0.00	(0.00 – 14.32)
SURGICAL SPECIALTY CENTER AT COORDINATED HEALTH, THE (15259)							
2012	14	2,052	0.01	0	0.01	0.00	(0.00 – 591.03)
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
TEMPLE UNIVERSITY HOSPITAL (12382)							
2012	25,575	145,021	0.18	18	20.51	0.88	(0.52 – 1.39)
2011	25,987	137,371	0.19	45	22.40	2.01	(1.47 – 2.69)
2010	26,846	133,595	0.20	79	21.86	3.61	(2.86 – 4.50)

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Table 4.4.8 – Critical Care Unit and Ward CLABSIs by Facility – Continued from previous page

	Central Line Days	Patient Days	Central Line Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
THE GOOD SAMARITAN HOSPITAL (11712)							
2012	4,409	39,790	0.11	3	3.02	0.99	(0.20 – 2.90)
2011	5,370	42,849	0.13	4	3.11	1.29	(0.35 – 3.29)
2010	4,965	41,180	0.12	11	3.50	3.14	(1.57 – 5.62)
THE GOOD SHEPHERD REHABILITATION HOSPITAL (11896)							
2012	1,305	28,461	0.05	3	0.78	3.85	(0.77 – 11.26)
2011	1,659	29,920	0.06	4	1.12	3.58	(0.96 – 9.17)
2010	1,643	24,553	0.07	1	1.25	0.80	(0.01 – 4.44)
THE WASHINGTON HOSPITAL (11460)							
2012	7,491	54,486	0.14	4	5.31	0.75	(0.20 – 1.93)
2011	9,056	62,228	0.15	3	5.11	0.59	(0.12 – 1.72)
2010	10,137	65,063	0.16	0	6.91	0.00	(0.00 – 0.53)
THE WESTERN PENNSYLVANIA HOSPITAL (11864)							
2012	5,474	37,516	0.15	6	4.26	1.41	(0.51 – 3.06)
2011	3,377	26,062	0.13	1	3.12	0.32	(0.00 – 1.78)
2010	13,122	70,747	0.19	6	10.80	0.56	(0.20 – 1.21)
THOMAS JEFFERSON UNIV HOSP - METHODIST (12017)							
2012	7,606	48,112	0.16	6	6.00	1.00	(0.37 – 2.18)
2011	8,858	46,785	0.19	16	7.63	2.10	(1.20 – 3.40)
2010	8,042	48,856	0.16	9	6.72	1.34	(0.61 – 2.54)
THOMAS JEFFERSON UNIV HOSPITAL (11506)							
2012	45,594	173,621	0.26	55	38.92	1.41	(1.06 – 1.84)
2011	45,577	168,751	0.27	35	36.80	0.95	(0.66 – 1.32)
2010	41,188	151,739	0.27	8	32.23	0.25	(0.11 – 0.49)
TITUSVILLE AREA HOSPITAL (11738)							
2012	243	7,565	0.03	0	0.14	0.00	(0.00 – 26.74)
2011	264	7,822	0.03	0	0.19	0.00	(0.00 – 18.85)
2010	191	8,438	0.02	0	0.17	0.00	(0.00 – 21.82)
TROY COMMUNITY HOSPITAL (12018)							
2012	1,658	7,782	0.21	2	1.26	1.59	(0.18 – 5.74)
2011	2,289	7,358	0.31	1	1.12	0.89	(0.01 – 4.96)
2010	1,818	7,457	0.24	0	1.17	0.00	(0.00 – 3.14)
TYLER MEMORIAL HOSPITAL (11829)							
2012	226	5,258	0.04	0	0.13	0.00	(0.00 – 27.48)
2011	40	6,054	0.01	0	0.04	0.00	(0.00 – 92.27)
2010	.	.	.	.	.	.	.
TYRONE HOSPITAL (12717)							
2012	55	2,809	0.02	0	0.03	0.00	(0.00 – 127.63)
2011	123	2,672	0.05	0	0.09	0.00	(0.00 – 42.84)
2010	125	2,567	0.05	0	0.10	0.00	(0.00 – 36.89)
UNIONTOWN HOSPITAL (10441)							
2012	4,199	39,143	0.11	2	3.12	0.64	(0.07 – 2.32)
2011	4,408	42,132	0.10	3	4.24	0.71	(0.14 – 2.07)
2010	4,172	46,143	0.09	0	3.78	0.00	(0.00 – 0.97)
UPMC BEDFORD (11680)							
2012	287	6,670	0.04	0	0.17	0.00	(0.00 – 21.63)
2011	214	6,685	0.03	0	0.16	0.00	(0.00 – 23.03)
2010	356	6,977	0.05	0	0.28	0.00	(0.00 – 13.03)
UPMC HAMOT (11725)							
2012	24,608	83,500	0.29	13	21.39	0.61	(0.32 – 1.04)
2011	26,692	83,515	0.32	7	20.90	0.33	(0.13 – 0.69)
2010	23,342	79,770	0.29	7	18.09	0.39	(0.16 – 0.80)
UPMC HORIZON (11675)							
2012	3,971	34,860	0.11	0	2.98	0.00	(0.00 – 1.23)
2011	4,325	34,976	0.12	2	2.51	0.80	(0.09 – 2.87)
2010	4,518	40,285	0.11	2	3.22	0.62	(0.07 – 2.24)

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Table 4.4.8 – Critical Care Unit and Ward CLABSIs by Facility – Continued from previous page

	Central Line Days	Patient Days	Central Line Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
UPMC MCKEESPORT (11707)							
2012	7,103	56,499	0.13	6	5.40	1.11	(0.41 – 2.42)
2011	7,184	64,473	0.11	4	6.82	0.59	(0.16 – 1.50)
2010	6,687	62,590	0.11	2	5.92	0.34	(0.04 – 1.22)
UPMC MERCY (10384)							
2012	28,868	145,278	0.20	26	23.59	1.10	(0.72 – 1.61)
2011	22,470	141,723	0.16	6	20.00	0.30	(0.11 – 0.65)
2010	23,469	143,866	0.16	15	19.64	0.76	(0.43 – 1.26)
UPMC NORTHWEST (11837)							
2012	3,537	28,315	0.12	1	2.47	0.41	(0.01 – 2.25)
2011	3,232	29,476	0.11	1	1.92	0.52	(0.01 – 2.90)
2010	3,175	30,786	0.10	0	2.29	0.00	(0.00 – 1.60)
UPMC PASSAVANT (11242)							
2012	21,420	102,897	0.21	13	16.18	0.80	(0.43 – 1.37)
2011	21,204	105,433	0.20	7	11.27	0.62	(0.25 – 1.28)
2010	20,910	96,673	0.22	25	13.66	1.83	(1.18 – 2.70)
UPMC PRESBYTERIAN SHADYSIDE — PRESBYTERIAN (10348)							
2012	106,039	227,985	0.47	84	98.95	0.85	(0.68 – 1.05)
2011	103,214	224,769	0.46	79	75.61	1.04	(0.83 – 1.30)
2010	100,818	222,461	0.45	76	73.72	1.03	(0.81 – 1.29)
UPMC PRESBYTERIAN SHADYSIDE — SHADYSIDE (10118)							
2012	43,185	131,289	0.33	17	38.18	0.45	(0.26 – 0.71)
2011	42,730	142,753	0.30	21	33.86	0.62	(0.38 – 0.95)
2010	34,543	138,159	0.25	12	27.33	0.44	(0.23 – 0.77)
UPMC PRESBYTERIAN SHADYSIDE — WPIC (13702)							
2012	475	104,169	0.00	1	0.22	4.64	(0.06 – 25.83)
2011	1,299	102,650	0.01	3	1.84	1.63	(0.33 – 4.77)
2010	528	102,693	0.01	1	0.70	1.43	(0.02 – 7.97)
UPMC ST MARGARET (11561)							
2012	13,240	75,976	0.17	3	10.60	0.28	(0.06 – 0.83)
2011	12,071	79,022	0.15	4	10.82	0.37	(0.10 – 0.95)
2010	11,165	76,041	0.15	8	9.48	0.84	(0.36 – 1.66)
VALLEY FORGE MEDICAL CENTER AND HOSPITAL (12029)							
2012	158	16,874	0.01	0	0.07	0.00	(0.00 – 49.85)
2011	341	17,024	0.02	0	0.28	0.00	(0.00 – 13.26)
2010	479	16,659	0.03	0	0.41	0.00	(0.00 – 8.98)
WARREN GENERAL HOSPITAL (12216)							
2012	740	13,257	0.06	1	0.46	2.20	(0.03 – 12.22)
2011	500	13,033	0.04	2	0.36	5.56	(0.62 – 20.06)
2010	199	11,870	0.02	0	0.18	0.00	(0.00 – 20.13)
WAYNE MEMORIAL HOSPITAL (12004)							
2012	1,253	18,519	0.07	4	0.79	5.03	(1.35 – 12.89)
2011	1,488	15,942	0.09	1	0.91	1.10	(0.01 – 6.11)
2010	1,476	18,141	0.08	0	1.10	0.00	(0.00 – 3.34)
WAYNESBORO HOSPITAL (11642)							
2012	1,057	9,841	0.11	0	0.72	0.00	(0.00 – 5.09)
2011	939	9,729	0.10	0	0.57	0.00	(0.00 – 6.43)
2010	1,122	9,970	0.11	0	0.80	0.00	(0.00 – 4.59)
WESTFIELD HOSPITAL (12487)							
2012	85	1,361	0.06	0	0.05	0.00	(0.00 – 68.92)
2011	123	2,004	0.06	0	0.08	0.00	(0.00 – 45.16)
2010	76	1,823	0.04	0	0.06	0.00	(0.00 – 59.44)
WILKES-BARRE GENERAL HOSPITAL (11916)							
2012	8,946	77,351	0.12	9	6.72	1.34	(0.61 – 2.54)
2011	8,136	73,951	0.11	10	7.75	1.29	(0.62 – 2.37)
2010	8,124	72,108	0.11	10	5.78	1.73	(0.83 – 3.18)

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Table 4.4.8 – Critical Care Unit and Ward CLABSIs by Facility – Continued from previous page

	Central Line Days	Patient Days	Central Line Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)							
2012	6,560	53,152	0.12	5	4.98	1.00	(0.32 – 2.34)
2011	7,409	54,085	0.14	3	6.78	0.44	(0.09 – 1.29)
2010	6,580	49,673	0.13	4	5.66	0.71	(0.19 – 1.81)
WINDBER HOSPITAL (12031)							
2012	76	7,704	0.01	0	0.04	0.00	(0.00 – 102.79)
2011	125	7,878	0.02	0	0.11	0.00	(0.00 – 34.67)
2010	97	8,114	0.01	0	0.09	0.00	(0.00 – 39.48)
YORK HOSPITAL (10108)							
2012	17,847	153,749	0.12	9	13.41	0.67	(0.31 – 1.27)
2011	17,565	167,565	0.10	10	16.87	0.59	(0.28 – 1.09)
2010	18,559	159,288	0.12	16	16.24	0.99	(0.56 – 1.60)

Table 4.4.9: **Neonatal Intensive Care Units (NICUs)**: Central Line-Associated Bloodstream Infections, Central Line Utilization Rates and Standardized Infection Ratios by Facility in Alphabetical Order — Pennsylvania, 2010–2012

	Central Line Days	Patient Days	Central Line Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
ABINGTON MEMORIAL HOSPITAL (11838)							
2012	786	10,779	0.07	1	1.67	0.60	(0.01 – 3.33)
2011	1,135	10,505	0.11	3	1.85	1.62	(0.33 – 4.74)
2010	1,138	9,542	0.12	1	2.92	0.34	(0.00 – 1.91)
ALBERT EINSTEIN MEDICAL CENTER (10585)							
2012	1,932	6,856	0.28	1	2.38	0.42	(0.01 – 2.34)
2011	2,184	7,280	0.30	2	3.30	0.61	(0.07 – 2.19)
2010	1,910	7,231	0.26	3	3.96	0.76	(0.15 – 2.22)
CHESTER COUNTY HOSPITAL (12016)							
2012	331	3,352	0.10	0	0.70	0.00	(0.00 – 5.26)
2011	374	2,827	0.13	0	0.60	0.00	(0.00 – 6.11)
2010	586	3,721	0.16	3	1.40	2.15	(0.43 – 6.28)
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)							
2012	9,840	28,251	0.35	15	11.14	1.35	(0.75 – 2.22)
2011	11,574	26,684	0.43	29	16.99	1.71	(1.14 – 2.45)
2010	8,597	24,218	0.35	19	16.45	1.16	(0.70 – 1.80)
CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)							
2012	4,562	10,309	0.44	3	4.69	0.64	(0.13 – 1.87)
2011	6,159	10,172	0.61	3	8.82	0.34	(0.07 – 0.99)
2010	6,264	10,248	0.61	7	10.35	0.68	(0.27 – 1.39)
CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)							
2012	501	3,807	0.13	1	0.84	1.19	(0.02 – 6.63)
2011	567	3,188	0.18	0	0.89	0.00	(0.00 – 4.12)
2010	294	3,380	0.09	4	0.82	4.87	(1.31 – 12.47)
CROZER CHESTER MEDICAL CENTER (11839)							
2012	575	3,321	0.17	1	0.86	1.16	(0.02 – 6.45)
2011	767	3,776	0.20	1	1.19	0.84	(0.01 – 4.67)
2010	618	3,533	0.17	4	1.43	2.80	(0.75 – 7.16)
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)							
2012	93	1,468	0.06	0	0.21	0.00	(0.00 – 17.54)
2011	80	1,472	0.05	0	0.14	0.00	(0.00 – 26.73)
2010	126	1,417	0.09	0	0.35	0.00	(0.00 – 10.48)
DUBOIS REGIONAL MEDICAL CENTER (11606)							
2012	119	3,531	0.03	0	0.39	0.00	(0.00 – 9.49)
2011	103	3,650	0.03	0	0.22	0.00	(0.00 – 16.67)
2010	247	3,634	0.07	0	0.41	0.00	(0.00 – 8.98)
EASTON HOSPITAL (11929)							
2012	1	481	0.00	0	0.01	0.00	(0.00 – 412.26)
2011	10	358	0.03	0	0.02	0.00	(0.00 – 203.46)
2010	10	774	0.01	0	0.05	0.00	(0.00 – 78.60)
EPHRATA COMMUNITY HOSPITAL (11764)							
2012	41	974	0.04	0	0.12	0.00	(0.00 – 30.11)
2011	177	1,013	0.17	0	0.33	0.00	(0.00 – 11.12)
2010	205	1,018	0.20	0	0.25	0.00	(0.00 – 14.50)
GEISINGER MEDICAL CENTER (11775)							
2012	1,758	10,677	0.16	4	2.69	1.49	(0.40 – 3.81)
2011	2,565	9,934	0.26	3	3.92	0.77	(0.15 – 2.24)
2010	2,954	11,589	0.25	11	6.18	1.78	(0.89 – 3.19)

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Table 4.4.9 – NICU CLABSIs by Facility – Continued from previous page

	Central Line Days	Patient Days	Central Line Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)							
2012	65	1,674	0.04	0	0.18	0.00	(0.00 – 20.61)
2011	29	239	0.12	0	0.05	0.00	(0.00 – 78.31)
2010	.	.	.	.	.	.	.
HAHNEMANN UNIVERSITY HOSPITAL (11437)							
2012	1,350	4,776	0.28	2	1.66	1.20	(0.14 – 4.34)
2011	1,070	5,455	0.20	2	1.67	1.20	(0.13 – 4.33)
2010	663	4,415	0.15	1	1.60	0.63	(0.01 – 3.48)
HEART OF LANCASTER REGIONAL MEDICAL CENTER (12571)							
2012	97	1,042	0.09	0	0.19	0.00	(0.00 – 19.63)
2011	150	329	0.46	1	0.22	4.56	(0.06 – 25.36)
2010	63	532	0.12	0	0.16	0.00	(0.00 – 22.65)
HOLY REDEEMER HOSPITAL AND MEDICAL CENTER (11973)							
2012	354	5,204	0.07	2	0.87	2.31	(0.26 – 8.33)
2011	467	4,726	0.10	1	0.91	1.10	(0.01 – 6.13)
2010	447	4,923	0.09	1	0.68	1.46	(0.02 – 8.14)
HOLY SPIRIT HOSPITAL (12387)							
2012	88	1,423	0.06	0	0.22	0.00	(0.00 – 16.38)
2011	158	1,392	0.11	0	0.30	0.00	(0.00 – 12.06)
2010	20	1,240	0.02	0	0.05	0.00	(0.00 – 75.32)
HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)							
2012	2,299	12,146	0.19	1	3.33	0.30	(0.00 – 1.67)
2011	2,264	12,151	0.19	6	3.54	1.69	(0.62 – 3.69)
2010	2,516	12,058	0.21	4	5.55	0.72	(0.19 – 1.84)
LANCASTER GENERAL HOSPITAL (10183)							
2012	749	6,345	0.12	2	1.47	1.36	(0.15 – 4.91)
2011	518	7,179	0.07	2	1.03	1.94	(0.22 – 7.00)
2010	904	7,802	0.12	2	1.29	1.54	(0.17 – 5.58)
LEHIGH VALLEY HOSPITAL (11884)							
2012	2,082	10,534	0.20	4	2.96	1.35	(0.36 – 3.46)
2011	1,556	9,643	0.16	0	2.46	0.00	(0.00 – 1.49)
2010	1,898	12,183	0.16	4	4.53	0.88	(0.24 – 2.26)
LOWER BUCKS HOSPITAL (12390)							
2012	1	1,185	0.00	0	0.01	0.00	(0.00 – 255.89)
2011	25	1,203	0.02	0	0.05	0.00	(0.00 – 67.14)
2010	56	775	0.07	0	0.09	0.00	(0.00 – 40.28)
MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)							
2012	3,779	24,387	0.15	6	5.93	1.01	(0.37 – 2.20)
2011	3,228	21,658	0.15	4	5.13	0.78	(0.21 – 1.99)
2010	4,026	21,076	0.19	2	9.10	0.22	(0.02 – 0.79)
MAIN LINE HOSPITAL — PAOLI (11750)							
2012	45	1,377	0.03	0	0.15	0.00	(0.00 – 24.78)
2011	54	1,152	0.05	0	0.11	0.00	(0.00 – 33.03)
2010	84	1,516	0.06	0	0.15	0.00	(0.00 – 25.00)
MAIN LINE HOSPITAL BRYN MAWR (11753)							
2012	506	2,663	0.19	1	0.73	1.37	(0.02 – 7.61)
2011	618	17,835	0.03	0	1.10	0.00	(0.00 – 3.35)
2010	440	17,495	0.03	1	1.72	0.58	(0.01 – 3.24)
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)							
2012	656	5,265	0.12	0	1.12	0.00	(0.00 – 3.26)
2011	819	5,997	0.14	0	1.31	0.00	(0.00 – 2.80)
2010	.	.	.	.	.	.	.
MILTON S HERSHEY MEDICAL CENTER (11747)							
2012	3,897	10,604	0.37	6	4.32	1.39	(0.51 – 3.02)
2011	3,864	10,320	0.37	5	5.74	0.87	(0.28 – 2.03)
2010	3,436	10,410	0.33	8	6.70	1.19	(0.51 – 2.35)

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Table 4.4.9 – NICU CLABSIs by Facility – Continued from previous page

	Central Line Days	Patient Days	Central Line Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
MOSES TAYLOR HOSPITAL (11528)							
2012	300	3,950	0.08	0	0.63	0.00	(0.00 – 5.85)
2011	225	3,545	0.06	0	0.38	0.00	(0.00 – 9.62)
2010	472	4,487	0.11	0	1.25	0.00	(0.00 – 2.93)
PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS (11448)							
2012	1,943	12,116	0.16	8	3.01	2.66	(1.15 – 5.24)
2011	1,842	12,663	0.15	6	2.94	2.04	(0.75 – 4.45)
2010	2,264	11,762	0.19	9	5.11	1.76	(0.80 – 3.35)
PINNACLE HEALTH HOSPITALS (10122)							
2012	2,259	9,130	0.25	2	2.94	0.68	(0.08 – 2.46)
2011	2,319	8,445	0.27	2	3.52	0.57	(0.06 – 2.05)
2010	2,424	9,572	0.25	1	5.08	0.20	(0.00 – 1.10)
POCONO MEDICAL CENTER (11772)							
2012	70	1,442	0.05	0	0.18	0.00	(0.00 – 20.93)
2011	83	1,185	0.07	0	0.14	0.00	(0.00 – 26.26)
2010	67	465	0.14	0	0.16	0.00	(0.00 – 22.45)
READING HOSPITAL AND MEDICAL CENTER (12375)							
2012	1,078	6,669	0.16	3	1.66	1.80	(0.36 – 5.27)
2011	1,050	5,770	0.18	1	1.65	0.61	(0.01 – 3.38)
2010	1,348	5,507	0.24	1	2.85	0.35	(0.00 – 1.95)
SACRED HEART HOSPITAL (11684)							
2012	5	95	0.05	0	0.01	0.00	(0.00 – 302.78)
2011	1	143	0.01	0	0.00	0.00	(0.00 –1,547.11)
2010	3	72	0.04	0	0.01	0.00	(0.00 – 648.32)
ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)							
2012	5,811	11,781	0.49	4	5.72	0.70	(0.19 – 1.79)
2011	5,630	11,676	0.48	3	8.20	0.37	(0.07 – 1.07)
2010	5,077	9,702	0.52	2	8.75	0.23	(0.03 – 0.83)
ST. JOSEPH MEDICAL CENTER (11961)							
2012	66	1,104	0.06	0	0.15	0.00	(0.00 – 24.15)
2011	67	991	0.07	0	0.11	0.00	(0.00 – 32.44)
2010	96	1,199	0.08	0	0.27	0.00	(0.00 – 13.38)
ST. LUKES HOSPITAL BETHLEHEM (11718)							
2012	739	6,748	0.11	2	1.33	1.50	(0.17 – 5.42)
2011	764	3,254	0.23	0	1.17	0.00	(0.00 – 3.12)
2010	792	906	0.87	2	1.19	1.68	(0.19 – 6.07)
ST. MARY MEDICAL CENTER (11885)							
2012	15	1,149	0.01	0	0.07	0.00	(0.00 – 51.38)
2011	17	1,336	0.01	0	0.04	0.00	(0.00 – 95.18)
2010	32	1,219	0.03	0	0.07	0.00	(0.00 – 53.67)
ST. VINCENT HEALTH CENTER (11699)							
2012	657	3,165	0.21	2	0.92	2.18	(0.25 – 7.88)
2011	926	4,333	0.21	2	1.43	1.40	(0.16 – 5.04)
2010	1,393	6,239	0.22	3	3.02	0.99	(0.20 – 2.90)
TEMPLE UNIVERSITY HOSPITAL (12382)							
2012	1,072	4,477	0.24	0	1.41	0.00	(0.00 – 2.60)
2011	1,339	4,293	0.31	4	2.02	1.98	(0.53 – 5.08)
2010	1,233	4,392	0.28	7	2.51	2.79	(1.12 – 5.74)
THE WESTERN PENNSYLVANIA HOSPITAL (11864)							
2012	3,073	10,428	0.29	3	3.72	0.81	(0.16 – 2.36)
2011	3,044	9,794	0.31	4	4.58	0.87	(0.23 – 2.23)
2010	3,278	10,972	0.30	3	6.57	0.46	(0.09 – 1.33)
THOMAS JEFFERSON UNIV HOSPITAL (11506)							
2012	2,358	11,806	0.20	1	3.34	0.30	(0.00 – 1.67)
2011	2,581	9,931	0.26	7	3.94	1.78	(0.71 – 3.66)
2010	3,146	10,871	0.29	20	6.36	3.15	(1.92 – 4.86)

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Table 4.4.9 – NICU CLABSIs by Facility – Continued from previous page

	Central Line Days	Patient Days	Central Line Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
UPMC HAMOT (11725)							
2012	597	3,532	0.17	0	0.90	0.00	(0.00 – 4.06)
2011	667	4,065	0.16	2	1.05	1.90	(0.21 – 6.86)
2010	356	1,742	0.20	0	0.79	0.00	(0.00 – 4.64)
UPMC MERCY (10384)							
2012	76	2,147	0.04	1	0.22	4.63	(0.06 – 25.76)
2011	92	2,323	0.04	1	0.16	6.19	(0.08 – 34.43)
2010	190	1,786	0.11	0	0.50	0.00	(0.00 – 7.30)
YORK HOSPITAL (10108)							
2012	1,174	8,747	0.13	1	1.95	0.51	(0.01 – 2.85)
2011	1,109	8,088	0.14	1	1.77	0.56	(0.01 – 3.13)
2010	1,277	8,154	0.16	3	3.04	0.99	(0.20 – 2.88)

Table 4.4.10: **Specialty Care Areas (SCAs)**: Central Line-Associated Bloodstream Infections, Central Line Utilization Rates and Standardized Infection Ratios by Facility in Alphabetical Order — Pennsylvania, 2010–2012

	Central Line Days	Patient Days	Central Line Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
ABINGTON MEMORIAL HOSPITAL (11838)							
2012	3,936	7,429	0.53	5	4.39	1.14	(0.37 – 2.66)
2011	4,480	7,863	0.57	6	5.13	1.17	(0.43 – 2.54)
2010	4,885	8,311	0.59	9	5.72	1.57	(0.72 – 2.99)
CHILDRENS HOME OF PITTSBURGH, THE (12336)							
2012	991	5,923	0.17	3	1.51	1.98	(0.40 – 5.80)
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)							
2012	12,551	15,285	0.82	35	16.39	2.14	(1.49 – 2.97)
2011	11,993	13,454	0.89	20	14.05	1.42	(0.87 – 2.20)
2010	10,188	13,203	0.77	22	14.32	1.54	(0.96 – 2.33)
CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)							
2012	10,612	12,360	0.86	17	14.08	1.21	(0.70 – 1.93)
2011	10,967	12,382	0.89	22	12.84	1.71	(1.07 – 2.59)
2010	11,312	12,088	0.94	29	18.11	1.60	(1.07 – 2.30)
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)							
2012	814	2,166	0.38	1	0.80	1.25	(0.02 – 6.93)
2011	2,201	5,157	0.43	3	2.49	1.21	(0.24 – 3.52)
2010	2,686	6,114	0.44	5	2.59	1.93	(0.62 – 4.51)
EASTERN REGIONAL MEDICAL CENTER (12348)							
2012	11,079	14,608	0.76	28	29.08	0.96	(0.64 – 1.39)
2011	9,149	12,729	0.72	18	15.79	1.14	(0.68 – 1.80)
2010	8,420	11,255	0.75	18	18.56	0.97	(0.57 – 1.53)
EASTON HOSPITAL (11929)							
2012	2,284	5,820	0.39	1	2.29	0.44	(0.01 – 2.43)
2011	2,095	6,077	0.34	1	2.34	0.43	(0.01 – 2.37)
2010	2,549	6,265	0.41	3	2.33	1.29	(0.26 – 3.76)
EXCELA HEALTH LATROBE HOSPITAL (11651)							
2012	662	2,308	0.29	0	0.59	0.00	(0.00 – 6.19)
2011	634	2,078	0.31	1	0.71	1.42	(0.02 – 7.89)
2010	639	2,314	0.28	1	0.45	2.22	(0.03 – 12.36)
FORBES REGIONAL HOSPITAL (11265)							
2012	1,278	7,911	0.16	1	0.93	1.07	(0.01 – 5.98)
2011	1,724	8,573	0.20	3	1.88	1.60	(0.32 – 4.67)
2010	.	.	.	.	.	.	.
HAHNEMANN UNIVERSITY HOSPITAL (11437)							
2012	6,580	14,447	0.46	1	6.95	0.14	(0.00 – 0.80)
2011	7,076	15,604	0.45	8	8.02	1.00	(0.43 – 1.97)
2010	6,794	13,888	0.49	11	7.03	1.56	(0.78 – 2.80)
HOSPITAL OF FOX CHASE CANCER CENTER (12134)							
2012	11,826	22,619	0.52	14	13.13	1.07	(0.58 – 1.79)
2011	10,983	22,367	0.49	9	12.50	0.72	(0.33 – 1.37)
2010	11,073	22,646	0.49	5	11.46	0.44	(0.14 – 1.02)
JEFFERSON REGIONAL MEDICAL CENTER (10237)							
2012	482	6,153	0.08	1	0.56	1.79	(0.02 – 9.93)
2011	787	8,004	0.10	0	1.23	0.00	(0.00 – 2.97)
2010	1,032	7,393	0.14	2	0.74	2.72	(0.31 – 9.82)
MILTON S HERSHEY MEDICAL CENTER (11747)							
2012	14,164	17,125	0.83	25	18.54	1.35	(0.87 – 1.99)
2011	12,152	16,780	0.72	18	14.09	1.28	(0.76 – 2.02)
2010	13,694	18,187	0.75	31	18.94	1.64	(1.11 – 2.32)

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Table 4.4.10 – SCA CLABSIs by Facility – Continued from previous page

	Central Line Days	Patient Days	Central Line Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
READING HOSPITAL AND MEDICAL CENTER (12375)							
2012	2,537	6,363	0.40	1	2.56	0.39	(0.01 – 2.18)
2011	2,689	6,678	0.40	0	3.03	0.00	(0.00 – 1.21)
2010	2,477	6,435	0.38	0	2.18	0.00	(0.00 – 1.68)
ROBERT PACKER HOSPITAL (12422)							
2012	2,682	6,991	0.38	8	2.66	3.00	(1.29 – 5.92)
2011	2,627	7,018	0.37	6	2.95	2.03	(0.74 – 4.43)
2010	2,352	6,997	0.34	3	1.89	1.59	(0.32 – 4.63)
ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)							
2012	1,625	1,827	0.89	1	2.18	0.46	(0.01 – 2.55)
2011	1,755	1,993	0.88	0	2.05	0.00	(0.00 – 1.79)
2010	2,019	2,140	0.94	2	3.25	0.62	(0.07 – 2.22)
TEMPLE UNIVERSITY HOSPITAL (12382)							
2012	3,267	3,316	0.99	0	4.55	0.00	(0.00 – 0.81)
2011	3,451	3,700	0.93	3	4.05	0.74	(0.15 – 2.16)
2010	3,486	3,845	0.91	1	5.46	0.18	(0.00 – 1.02)
THE WESTERN PENNSYLVANIA HOSPITAL (11864)							
2012	4,789	5,422	0.88	3	6.42	0.47	(0.09 – 1.37)
2011	4,927	5,880	0.84	4	5.75	0.70	(0.19 – 1.78)
2010	5,709	6,390	0.89	0	8.86	0.00	(0.00 – 0.41)
THOMAS JEFFERSON UNIV HOSPITAL (11506)							
2012	10,241	14,001	0.73	11	12.83	0.86	(0.43 – 1.53)
2011	10,068	13,671	0.74	4	11.68	0.34	(0.09 – 0.88)
2010	10,052	13,876	0.72	5	13.55	0.37	(0.12 – 0.86)
UPMC NORTHWEST (11837)							
2012	1,146	5,832	0.20	1	1.85	0.54	(0.01 – 3.00)
2011	1,221	6,200	0.20	1	1.98	0.51	(0.01 – 2.81)
2010	1,142	6,445	0.18	0	0.96	0.00	(0.00 – 3.84)
UPMC PRESBYTERIAN SHADYSIDE — SHADYSIDE (10118)							
2012	20,250	25,839	0.78	12	26.00	0.46	(0.24 – 0.81)
2011	18,405	27,356	0.67	12	21.26	0.56	(0.29 – 0.99)
2010	16,158	25,948	0.62	9	19.67	0.46	(0.21 – 0.87)
WILKES-BARRE GENERAL HOSPITAL (11916)							
2012	2,181	10,932	0.20	1	1.71	0.58	(0.01 – 3.25)
2011	1,994	10,343	0.19	7	2.17	3.23	(1.29 – 6.65)
2010	1,966	10,097	0.19	2	1.75	1.14	(0.13 – 4.12)

Table 4.4.11: **Long Term Acute Care (LTACs)**: Central Line-Associated Bloodstream Infections, Central Line Utilization Rates and Standardized Infection Ratios by Facility in Alphabetical Order — Pennsylvania, 2010–2012

	Central Line Days	Patient Days	Central Line Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
CHILDRENS HOME OF PITTSBURGH, THE (12336)							
2012	.	.	.	.	.	.	.
2011	1,236	4,665	0.26	5	3.21	1.56	(0.50 – 3.64)
2010	823	3,409	0.24	0	1.80	0.00	(0.00 – 2.04)
GOOD SHEPHERD PENN PARTNERS (13929)							
2012	4,218	9,813	0.43	19	5.34	3.56	(2.14 – 5.56)
2011	3,193	8,537	0.37	14	6.20	2.26	(1.23 – 3.79)
2010	3,459	8,874	0.39	7	6.02	1.16	(0.47 – 2.40)
GOOD SHEPHERD SPECIALTY HOSPITAL (11887)							
2012	7,337	9,982	0.74	8	7.40	1.08	(0.47 – 2.13)
2011	7,975	10,551	0.76	9	8.58	1.05	(0.48 – 1.99)
2010	8,998	10,503	0.86	15	10.72	1.40	(0.78 – 2.31)
KINDRED HOSPITAL — PHILADELPHIA (11832)							
2012	4,884	11,725	0.42	10	6.26	1.60	(0.76 – 2.94)
2011	7,034	13,457	0.52	21	10.31	2.04	(1.26 – 3.11)
2010	8,836	14,138	0.62	34	12.25	2.78	(1.92 – 3.88)
KINDRED HOSPITAL — PITTSBURGH (12358)							
2012	7,237	10,309	0.70	10	7.44	1.34	(0.64 – 2.47)
2011	8,010	10,214	0.78	10	8.35	1.20	(0.57 – 2.20)
2010	9,820	12,513	0.78	2	12.21	0.16	(0.02 – 0.59)
KINDRED HOSPITAL — WYOMING VALLEY (12485)							
2012	6,582	8,444	0.78	16	6.47	2.47	(1.41 – 4.01)
2011	5,967	8,404	0.71	7	6.76	1.03	(0.41 – 2.13)
2010	5,608	8,431	0.67	7	7.55	0.93	(0.37 – 1.91)
KINDRED HOSPITAL AT HERITAGE VALLEY (12268)							
2012	5,970	8,898	0.67	1	6.26	0.16	(0.00 – 0.89)
2011	7,547	8,765	0.86	5	7.28	0.69	(0.22 – 1.60)
2010	8,076	8,815	0.92	6	9.32	0.64	(0.24 – 1.40)
KINDRED HOSPITAL EASTON (12007)							
2012	5,698	7,352	0.78	6	5.62	1.07	(0.39 – 2.33)
2011	5,542	6,982	0.79	3	5.72	0.52	(0.11 – 1.53)
2010	.	.	.	.	.	.	.
KINDRED HOSPITAL PHILADELPHIA — HAVERTOWN (12908)							
2012	5,334	15,040	0.35	5	7.32	0.68	(0.22 – 1.59)
2011	5,694	12,225	0.47	7	9.20	0.76	(0.30 – 1.57)
2010	7,386	12,095	0.61	18	10.36	1.74	(1.03 – 2.75)
KINDRED HOSPITAL PITTSBURGH — NORTH SHORE (12296)							
2012	4,732	6,882	0.69	2	4.91	0.41	(0.05 – 1.47)
2011	5,603	8,578	0.65	2	6.81	0.29	(0.03 – 1.06)
2010	6,935	8,602	0.81	3	8.51	0.35	(0.07 – 1.03)
KINDRED HOSPITAL SOUTH PHILADELPHIA (11940)							
2012	3,492	9,100	0.38	8	4.64	1.73	(0.74 – 3.40)
2011	3,043	6,625	0.46	19	4.97	3.82	(2.30 – 5.97)
2010	.	.	.	.	.	.	.
LIFECARE HOSPITALS OF CHESTER COUNTY (12005)							
2012	5,898	7,658	0.77	5	5.83	0.86	(0.28 – 2.00)
2011	7,121	8,890	0.80	12	7.29	1.64	(0.85 – 2.87)
2010	6,683	8,384	0.80	5	8.24	0.61	(0.20 – 1.42)

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Table 4.4.11 – LTAC CLABSIs by Facility – Continued from previous page

	Central Line Days	Patient Days	Central Line Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
LIFECARE HOSPITALS OF MECHANICSBURG (12388)							
2012	7,262	9,277	0.78	4	7.13	0.56	(0.15 – 1.44)
2011	8,246	11,607	0.71	5	9.34	0.54	(0.17 – 1.25)
2010	.	.	.	.	.	.	.
LIFECARE HOSPITALS OF PITTSBURGH — ALLE-KISKI CAMPUS (18955)							
2012	4,802	6,811	0.71	1	4.93	0.20	(0.00 – 1.13)
2011	5,179	7,254	0.71	1	5.84	0.17	(0.00 – 0.95)
2010	.	.	.	.	.	.	.
LIFECARE HOSPITALS OF PITTSBURGH — MONROEVILLE (12254)							
2012	6,776	12,994	0.52	6	7.90	0.76	(0.28 – 1.65)
2011	8,014	14,075	0.57	10	10.94	0.91	(0.44 – 1.68)
2010	.	.	.	.	.	.	.
LIFECARE HOSPITALS OF PITTSBURGH — SUBURBAN CAMPUS (12385)							
2012	5,113	8,068	0.63	7	5.49	1.28	(0.51 – 2.63)
2011	5,202	7,155	0.73	8	5.78	1.38	(0.60 – 2.73)
2010	4,003	6,461	0.62	4	5.57	0.72	(0.19 – 1.84)
LIFECARE HOSPITALS OF PITTSBURGH (11945)							
2012	6,214	25,487	0.24	6	10.00	0.60	(0.22 – 1.31)
2011	8,672	27,933	0.31	18	19.69	0.91	(0.54 – 1.44)
2010	12,646	33,719	0.38	21	22.41	0.94	(0.58 – 1.43)
SELECT SPECIALITY HOSPITAL — CENTRAL PENNSYLVANIA (YORK) (12334)							
2012	4,500	5,709	0.79	4	4.40	0.91	(0.24 – 2.33)
2011	4,050	5,387	0.75	0	4.38	0.00	(0.00 – 0.84)
2010	3,395	5,309	0.64	9	4.66	1.93	(0.88 – 3.67)
SELECT SPECIALITY HOSPITAL — ERIE (11880)							
2012	3,779	9,699	0.39	4	4.98	0.80	(0.22 – 2.05)
2011	4,618	10,883	0.42	5	8.07	0.62	(0.20 – 1.45)
2010	4,985	10,950	0.46	6	8.05	0.75	(0.27 – 1.62)
SELECT SPECIALITY HOSPITAL — JOHNSTOWN (12299)							
2012	5,540	11,242	0.49	4	6.62	0.60	(0.16 – 1.55)
2011	5,274	10,110	0.52	5	7.75	0.65	(0.21 – 1.51)
2010	5,207	10,513	0.50	4	8.07	0.50	(0.13 – 1.27)
SELECT SPECIALTY HOSPITAL — CENTRAL PA (13921)							
2012	7,230	9,672	0.75	4	7.24	0.55	(0.15 – 1.42)
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
SELECT SPECIALTY HOSPITAL — CENTRAL PENNSYLVANIA (CAMP HILL) (12147)							
2012	6,424	9,567	0.67	7	6.73	1.04	(0.42 – 2.14)
2011	6,295	8,609	0.73	5	6.96	0.72	(0.23 – 1.68)
2010	6,208	7,225	0.86	2	7.39	0.27	(0.03 – 0.98)
SELECT SPECIALTY HOSPITAL — DANVILLE (12123)							
2012	1,738	4,886	0.36	1	2.38	0.42	(0.01 – 2.34)
2011	2,494	5,168	0.48	4	3.91	1.02	(0.28 – 2.62)
2010	2,760	5,097	0.54	2	4.10	0.49	(0.05 – 1.76)
SELECT SPECIALTY HOSPITAL — MCKEESPORT, INC. (12271)							
2012	5,041	7,993	0.63	4	5.42	0.74	(0.20 – 1.89)
2011	4,228	7,857	0.54	3	6.05	0.50	(0.10 – 1.45)
2010	4,398	7,001	0.63	10	6.08	1.64	(0.79 – 3.02)
SELECT SPECIALTY HOSPITAL — PITTSBURGH/UPMC (12009)							
2012	6,687	8,770	0.76	6	6.64	0.90	(0.33 – 1.97)
2011	6,552	8,138	0.81	12	6.68	1.80	(0.93 – 3.14)
2010	6,006	7,656	0.78	9	7.47	1.21	(0.55 – 2.29)
SELECT SPECIALTY HOSPITAL LAUREL HIGHLANDS, INC. (12108)							
2012	5,427	7,337	0.74	7	5.46	1.28	(0.51 – 2.64)
2011	5,725	7,750	0.74	2	6.28	0.32	(0.04 – 1.15)
2010	6,149	9,020	0.68	3	8.18	0.37	(0.07 – 1.07)

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Table 4.4.11 – LTAC CLABSIs by Facility – Continued from previous page

	Central Line Days	Patient Days	Central Line Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
SPECIAL CARE HOSPITAL (12604)							
2012	5,610	13,572	0.41	5	7.22	0.69	(0.22 – 1.62)
2011	3,832	14,958	0.26	1	10.23	0.10	(0.00 – 0.54)
2010	.	.	.	.	.	.	.

Figure 4.4.6: **Critical Care Units and Wards**: Number of Observed (Obs.) Central Line-Associated Bloodstream Infections (CLABSI) and Relative Ranking of Facilities by Standardized Infection Ratio (SIR) — Pennsylvania, 2012

Grouped by Number of Predicted (Pred.) Infections: 0–0.29

Obs.	Pred.	SIR	Facility and NHSN ID
0	0.00	0.0	OSS ORTHOPAEDIC HOSPITAL (18467)
0	0.00	0.0	PENNSYLVANIA PSYCHIATRIC INSTITUTE (14190)
0	0.01	0.0	MEYERSDALE COMMUNITY HOSPITAL (11968)
0	0.01	0.0	SURGICAL SPECIALTY CENTER AT COORDINATED HEALTH, THE (15259)
0	0.02	0.0	CORRY MEMORIAL HOSPITAL (12283)
0	0.02	0.0	EAGLEVILLE HOSPITAL (12965)
0	0.03	0.0	BARNES−KASSON COUNTY HOSPITAL (12404)
0	0.03	0.0	TYRONE HOSPITAL (12717)
0	0.03	0.0	COORDINATED HEALTH ORTHOPEDIC HOSPITAL, LLC (11872)
0	0.04	0.0	WINDBER HOSPITAL (12031)
0	0.05	0.0	FULTON COUNTY MEDICAL CENTER (11939)
0	0.05	0.0	WESTFIELD HOSPITAL (12487)
0	0.06	0.0	MINERS MEDICAL CENTER (12295)
0	0.06	0.0	BUCKTAIL MEDICAL CENTER (12461)
0	0.07	0.0	HOSPITAL OF FOX CHASE CANCER CENTER (12134)
0	0.07	0.0	ENDLESS MOUNTAINS HEALTH SYSTEMS (11817)
0	0.07	0.0	VALLEY FORGE MEDICAL CENTER AND HOSPITAL (12029)
0	0.09	0.0	MID−VALLEY HOSPITAL (11557)
0	0.10	0.0	NASON HOSPITAL (11907)
0	0.10	0.0	GEISINGER HEALTHSOUTH REHABILITATION HOSPITAL (11993)
0	0.13	0.0	TYLER MEMORIAL HOSPITAL (11829)
0	0.14	0.0	TITUSVILLE AREA HOSPITAL (11738)
0	0.16	0.0	JERSEY SHORE HOSPITAL (11689)
0	0.17	0.0	UPMC BEDFORD (11680)
0	0.17	0.0	ST. LUKES MINERS MEMORIAL HOSPITAL (11784)
0	0.18	0.0	PALMERTON HOSPITAL (12396)
0	0.19	0.0	ELK REGIONAL HEALTH CENTER (11859)
0	0.19	0.0	ALLIED SERVICES INSTITUTE OF REHABILITATION (12591)
0	0.19	0.0	MEMORIAL HOSPITAL, INC. TOWANDA (12549)
0	0.24	0.0	BRADFORD REGIONAL MEDICAL CENTER (12361)
0	0.24	0.0	CRICHTON REHABILITATION CENTER (12273)
0	0.25	0.0	JOHN HEINZ INSTITUTE OF REHABILITATION (11861)
0	0.27	0.0	GROVE CITY MEDICAL CENTER (11722)
0	0.27	0.0	BERWICK HOSPITAL CENTER (11442)
0	0.27	0.0	CROZER CHESTER MEDICAL CENTER SPRINGFIELD (11851)
1	0.27	3.6	PUNXSUTAWNEY AREA HOSPITAL (11830)
1	0.22	4.6	UPMC PRESBYTERIAN SHADYSIDE −−− WPIC (13702)
1	0.11	9.0	LOCK HAVEN HOSPITAL (12097)
2	0.20	10.2	KANE COMMUNITY HOSPITAL (12111)
1	0.10	10.4	SUNBURY COMMUNITY HOSPITAL (12105)
2	0.16	12.4	CHILDRENS INSTITUTE OF PITTSBURGH (12266)

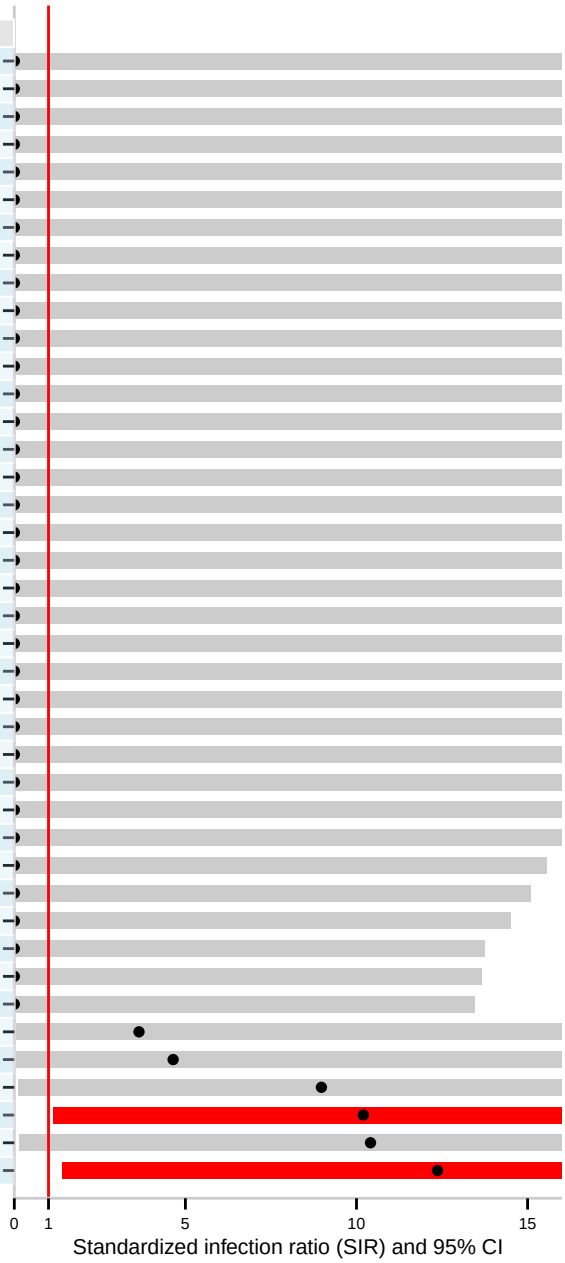
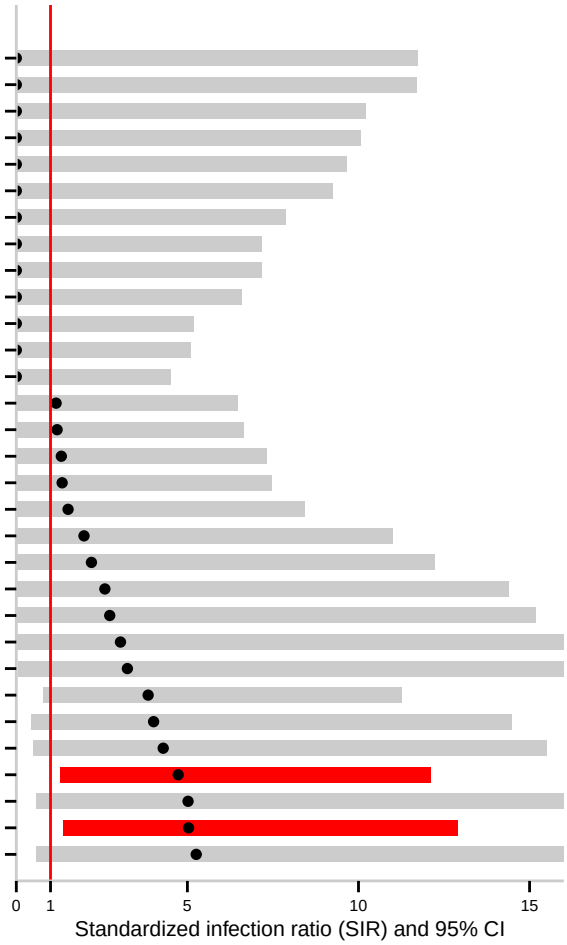


Figure 4.4.7: **Critical Care Units and Wards**: Number of Observed (Obs.) Central Line-Associated Bloodstream Infections (CLABSI) and Relative Ranking of Facilities by Standardized Infection Ratio (SIR) — Pennsylvania, 2012

Grouped by Number of Predicted (Pred.) Infections: 0.5–0.99

Obs.	Pred.	SIR	Facility and NHSN ID
0	0.31	0.0	SOLDIERS & SAILORS MEM HOSPITAL (11688)
0	0.31	0.0	BROOKVILLE HOSPITAL (12418)
0	0.36	0.0	CHARLES COLE MEMORIAL HOSPITAL (11956)
0	0.36	0.0	ELLWOOD CITY HOSPITAL (11779)
0	0.38	0.0	HEALTHSOUTH NITTANY VALLEY REHABILITATION HOSPITAL (11667)
0	0.40	0.0	GEISINGER−BLOOMSBURG HOSPITAL (12008)
0	0.47	0.0	LANCASTER REHABILITATION HOSPITAL (12628)
0	0.51	0.0	HEART OF LANCASTER REGIONAL MEDICAL CENTER (12571)
0	0.51	0.0	SOUTHWEST REGIONAL MEDICAL CENTER (11942)
0	0.56	0.0	HEALTHSOUTH REHABILITATION HOSPITAL OF SEWICKLEY (12066)
0	0.71	0.0	HEALTHSOUTH READING REHABILITATION HOSPITAL (12139)
0	0.72	0.0	WAYNESBORO HOSPITAL (11642)
0	0.81	0.0	HEALTHSOUTH REHABILITATION HOSPITAL OF ALTOONA (11903)
1	0.86	1.2	CLARION HOSPITAL (11654)
1	0.84	1.2	HEALTHSOUTH REHABILITATION HOSPITAL OF ERIE (11810)
1	0.76	1.3	EVANGELICAL COMMUNITY HOSPITAL (11701)
1	0.75	1.3	JENNERSVILLE REGIONAL HOSPITAL (12337)
1	0.66	1.5	HEALTHSOUTH REHABILITATION HOSPITAL OF YORK (12058)
1	0.51	2.0	SHRINERS HOSPITAL FOR CHILDREN −−− PHILADELPHIA (12244)
1	0.46	2.2	WARREN GENERAL HOSPITAL (12216)
1	0.39	2.6	ST. MARY MEDICAL CENTER REHAB (12483)
1	0.37	2.7	J C BLAIR MEMORIAL HOSP (11724)
1	0.33	3.0	MUNCY VALLEY HOSPITAL (11748)
1	0.31	3.2	MILLCREEK COMMUNITY HOSPITAL (12253)
3	0.78	3.9	THE GOOD SHEPHERD REHABILITATION HOSPITAL (11896)
2	0.50	4.0	GNADEN HUETTEN MEMORIAL HOSPITAL (12241)
2	0.47	4.3	ST. LUKES QUAKERTOWN HOSPITAL (11711)
4	0.85	4.7	ALBERT EINSTEIN MEDICAL CENTER AT ELKINS PARK (12500)
2	0.40	5.0	HIGHLANDS HOSPITAL (11902)
4	0.79	5.0	WAYNE MEMORIAL HOSPITAL (12004)
2	0.38	5.3	CLEARFIELD HOSPITAL (11843)

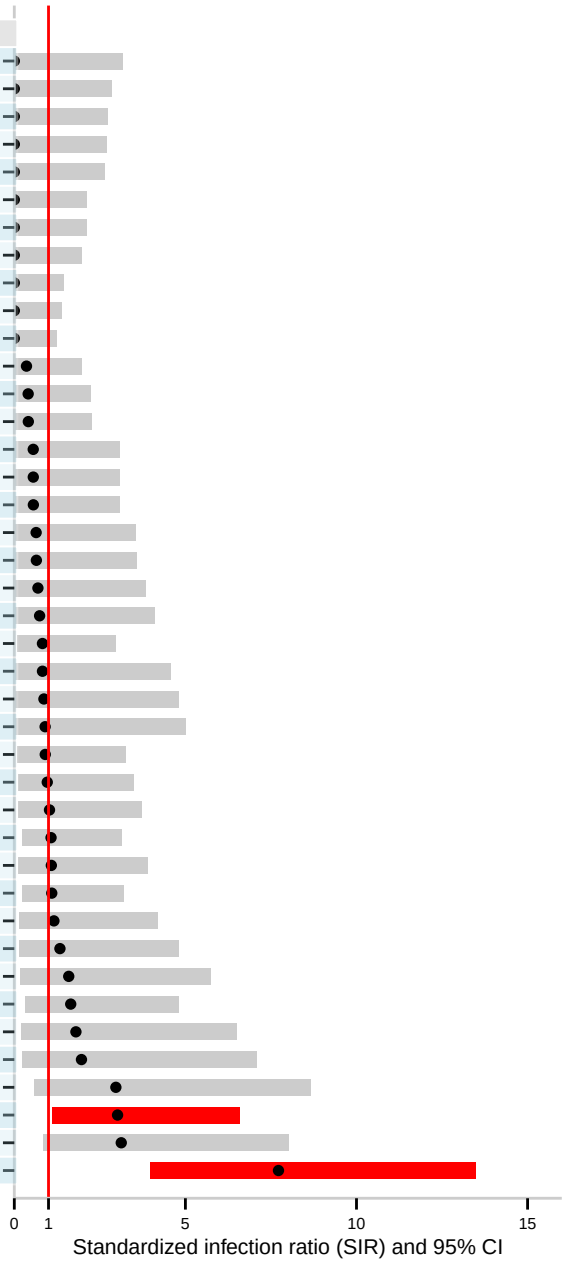


Better than predicted | Not different than predicted | Worse than predicted

Figure 4.4.8: **Critical Care Units and Wards**: Number of Observed (Obs.) Central Line-Associated Bloodstream Infections (CLABSI) and Relative Ranking of Facilities by Standardized Infection Ratio (SIR) — Pennsylvania, 2012

Grouped by Number of Predicted (Pred.) Infections: 1–2.99

Obs.	Pred.	SIR	Facility and NHSN ID
0	1.16	0.0	MAIN LINE HOSPITAL BRYN MAWR REHABILITATION (11417)
0	1.28	0.0	CANONSBURG GENERAL HOSPITAL (11586)
0	1.34	0.0	CARLISLE REGIONAL MEDICAL CENTER (11997)
0	1.36	0.0	ROXBOROUGH MEMORIAL HOSPITAL (11978)
0	1.38	0.0	LEWISTOWN HOSPITAL (11825)
0	1.72	0.0	EPHRATA COMMUNITY HOSPITAL (11764)
0	1.74	0.0	SOMERSET HOSPITAL (12282)
0	1.87	0.0	KENSINGTON HOSPITAL (12609)
0	2.51	0.0	DUBOIS REGIONAL MEDICAL CENTER (11606)
0	2.66	0.0	JAMESON MEMORIAL HOSPITAL (11954)
0	2.98	0.0	UPMC HORIZON (11675)
1	2.81	0.4	MERCY SUBURBAN HOSPITAL NORRISTOWN (11952)
1	2.47	0.4	UPMC NORTHWEST (11837)
1	2.44	0.4	BRANDYWINE HOSPITAL (11979)
1	1.81	0.6	HEALTHSOUTH HARMARVILLE REHABILITATION HOSPITAL (11727)
1	1.80	0.6	MEADVILLE MEDICAL CENTER (11583)
1	1.80	0.6	OHIO VALLEY GENERAL HOSPITAL (12298)
1	1.57	0.6	SACRED HEART HOSPITAL (11684)
1	1.55	0.6	LANSDALE HOSPITAL (12032)
1	1.45	0.7	ALBERT EINSTEIN MEDICAL CENTER MOSS REHABILITATION (12508)
1	1.35	0.7	HEALTHSOUTH REHABILITATION HOSPITAL OF MECHANICSBURG (12402)
2	2.43	0.8	MOSES TAYLOR HOSPITAL (11528)
1	1.21	0.8	EXCELA HEALTH FRICK HOSPITAL (11639)
1	1.16	0.9	PENN STATE HERSHEY REHABILITATION LLC (11915)
1	1.11	0.9	MAGEE REHAB HOSPITAL (12146)
2	2.21	0.9	SHARON REGIONAL HEALTH SYSTEM (12250)
2	2.08	1.0	LANCASTER REGIONAL MEDICAL CENTER (12335)
2	1.94	1.0	EXCELA HEALTH LATROBE HOSPITAL (11651)
3	2.79	1.1	CROZER CHESTER MEDICAL CENTER TAYLOR (11932)
2	1.85	1.1	MEMORIAL HOSPITAL (11633)
3	2.74	1.1	CHESTNUT HILL HOSPITAL (12304)
2	1.73	1.2	SCHUYLKILL MEDICAL CENTER --- EAST NORWEGIAN STREET (11922)
2	1.50	1.3	SCHUYLKILL MEDICAL CENTER --- SOUTH JACKSON STREET (12087)
2	1.26	1.6	TROY COMMUNITY HOSPITAL (12018)
3	1.82	1.6	HANOVER HOSPITAL (11899)
2	1.11	1.8	ST. LUKES HOSPITAL ANDERSON CAMPUS (21487)
2	1.02	2.0	GETTYSBURG HOSPITAL (11531)
3	1.01	3.0	INDIANA REGIONAL MEDICAL CENTER (11759)
6	1.99	3.0	HAZLETON GENERAL HOSPITAL (11878)
4	1.28	3.1	LOWER BUCKS HOSPITAL (12390)
12	1.55	7.7	EASTERN REGIONAL MEDICAL CENTER (12348)



Better than predicted | Not different than predicted | Worse than predicted

Figure 4.4.9: **Critical Care Units and Wards**: Number of Observed (Obs.) Central Line-Associated Bloodstream Infections (CLABSI) and Relative Ranking of Facilities by Standardized Infection Ratio (SIR) — Pennsylvania, 2012

Grouped by Number of Predicted (Pred.) Infections: 3–7.49

Obs.	Pred.	SIR	Facility and NHSN ID
0	4.93	0.0	MOUNT NITTANY MEDICAL CENTER (11797)
1	6.34	0.2	HERITAGE VALLEY BEAVER (11831)
1	4.47	0.2	JEANES HOSPITAL (11459)
1	4.34	0.2	HOLY REDEEMER HOSPITAL AND MEDICAL CENTER (11973)
1	4.22	0.2	ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)
1	4.19	0.2	GEISINGER−COMMUNITY MEDICAL CENTER (11914)
2	7.26	0.3	ALTOONA REGIONAL HEALTH SYSTEM (10178)
2	5.73	0.3	DELAWARE COUNTY MEMORIAL HOSPITAL (11972)
2	5.16	0.4	EASTON HOSPITAL (11929)
3	6.66	0.5	JEFFERSON REGIONAL MEDICAL CENTER (10237)
2	4.19	0.5	REGIONAL HOSPITAL OF SCRANTON (12533)
2	4.12	0.5	ARMSTRONG COUNTY MEMORIAL HOSPITAL (12057)
3	6.16	0.5	ST. CLAIR MEMORIAL HOSPITAL (10561)
2	3.94	0.5	PHOENIXVILLE HOSPITAL COMPANY LLC (11836)
3	5.84	0.5	DOYLESTOWN HOSPITAL (10190)
2	3.12	0.6	UNIONTOWN HOSPITAL (10441)
4	5.57	0.7	GRAND VIEW HOSPITAL (11847)
4	5.31	0.8	THE WASHINGTON HOSPITAL (11460)
5	6.62	0.8	HOLY SPIRIT HOSPITAL (12387)
3	3.47	0.9	HERITAGE VALLEY SEWICKLEY (10375)
4	4.52	0.9	CHAMBERSBURG HOSPITAL (11913)
5	5.58	0.9	FORBES REGIONAL HOSPITAL (11265)
3	3.25	0.9	POTTSTOWN MEMORIAL MEDICAL CENTER (11983)
7	7.32	1.0	ST. JOSEPH MEDICAL CENTER (11961)
3	3.02	1.0	THE GOOD SAMARITAN HOSPITAL (11712)
6	6.00	1.0	THOMAS JEFFERSON UNIV HOSP − METHODIST (12017)
5	4.98	1.0	WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)
5	4.73	1.1	POCONO MEDICAL CENTER (11772)
8	7.34	1.1	LEHIGH VALLEY HOSPITAL −−− MUHLENBERG (11898)
6	5.44	1.1	RIDDLE MEMORIAL HOSPITAL (11731)
6	5.40	1.1	UPMC MCKEESPORT (11707)
4	3.43	1.2	MERCY PHILADELPHIA HOSPITAL (11946)
7	6.00	1.2	BUTLER MEMORIAL HOSPITAL (11736)
9	7.34	1.2	CHESTER COUNTY HOSPITAL (12016)
5	4.07	1.2	MERCY FITZGERALD HOSPITAL (11683)
9	6.72	1.3	WILKES−BARRE GENERAL HOSPITAL (11916)
6	4.26	1.4	THE WESTERN PENNSYLVANIA HOSPITAL (11864)
9	6.25	1.4	MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)
5	3.03	1.7	MONONGAHELA VALLEY HOSPITAL (11069)
6	3.48	1.7	ST. JOSEPHS HOSPITAL (12438)
6	3.25	1.8	ALLEGHENY VALLEY HOSPITAL (11842)
14	6.47	2.2	ST. VINCENT HEALTH CENTER (11699)
10	4.35	2.3	MAIN LINE HOSPITAL −−− PAOLI (11750)
11	4.62	2.4	NAZARETH HOSPITAL (11919)

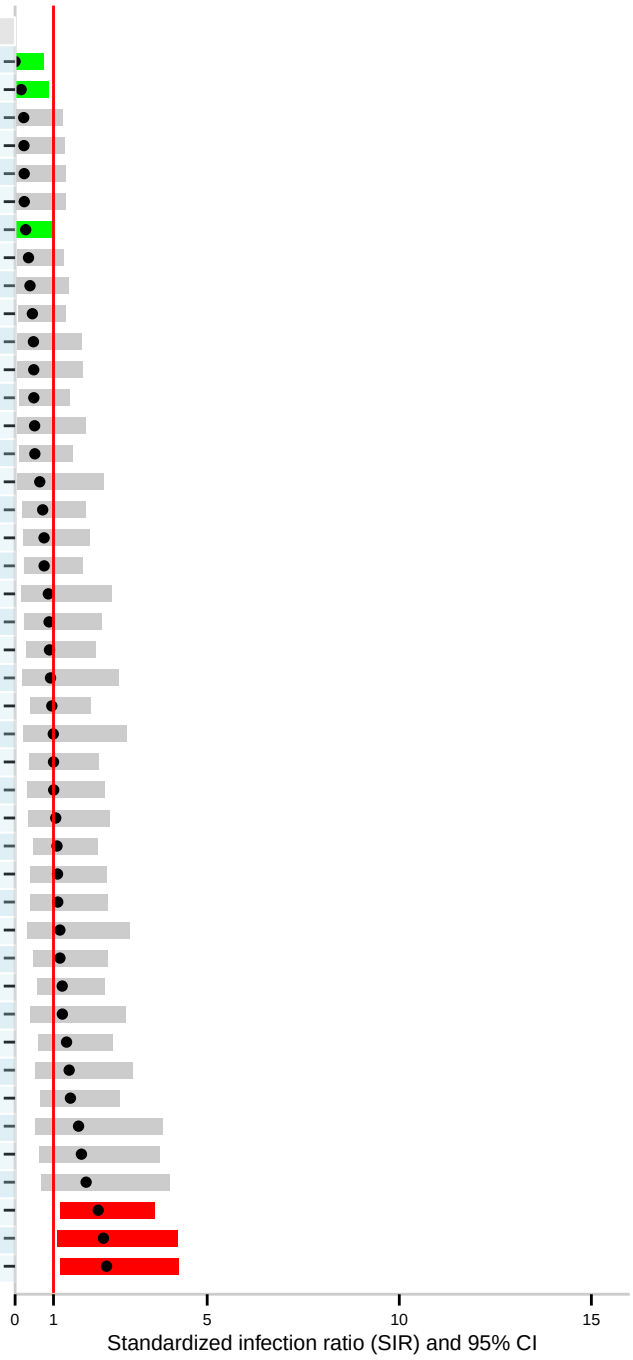


Figure 4.4.10: **Critical Care Units and Wards**: Number of Observed (Obs.) Central Line-Associated Bloodstream Infections (CLABSI) and Relative Ranking of Facilities by Standardized Infection Ratio (SIR) — Pennsylvania, 2012

Grouped by Number of Predicted (Pred.) Infections: >= 7.5

Obs.	Pred.	SIR	Facility and NHSN ID
3	10.60	0.3	UPMC ST MARGARET (11561)
9	25.87	0.3	PINNACLE HEALTH HOSPITALS (10122)
5	11.29	0.4	MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)
17	38.18	0.4	UPMC PRESBYTERIAN SHADYSIDE --- SHADYSIDE (10118)
5	8.67	0.6	GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)
9	14.90	0.6	HAHNEMANN UNIVERSITY HOSPITAL (11437)
13	21.39	0.6	UPMC HAMOT (11725)
8	13.03	0.6	LANCASTER GENERAL HOSPITAL (10183)
9	14.07	0.6	ABINGTON MEMORIAL HOSPITAL (11838)
13	20.23	0.6	READING HOSPITAL AND MEDICAL CENTER (12375)
9	13.41	0.7	YORK HOSPITAL (10108)
50	69.18	0.7	HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)
13	16.18	0.8	UPMC PASSAVANT (11242)
8	9.82	0.8	CROZER CHESTER MEDICAL CENTER (11839)
84	98.95	0.8	UPMC PRESBYTERIAN SHADYSIDE --- PRESBYTERIAN (10348)
18	20.51	0.9	TEMPLE UNIVERSITY HOSPITAL (12382)
8	8.79	0.9	MAIN LINE HOSPITAL BRYN MAWR (11753)
12	13.04	0.9	EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)
16	16.94	0.9	ST. LUKES HOSPITAL BETHLEHEM (11718)
13	13.23	1.0	ALBERT EINSTEIN MEDICAL CENTER (10585)
12	11.66	1.0	CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)
13	11.92	1.1	ARIA HEALTH (11388)
26	23.59	1.1	UPMC MERCY (10384)
11	9.30	1.2	PENN PRESBYTERIAN MEDICAL CENTER (11814)
50	40.18	1.2	ALLEGHENY GENERAL HOSPITAL (10648)
10	7.78	1.3	ROBERT PACKER HOSPITAL (12422)
13	9.54	1.4	ST. MARY MEDICAL CENTER (11885)
26	18.93	1.4	CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)
55	38.92	1.4	THOMAS JEFFERSON UNIV HOSPITAL (11506)
15	10.47	1.4	PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS (11448)
53	32.73	1.6	MILTON S HERSHEY MEDICAL CENTER (11747)
35	20.42	1.7	CHILDRENS HOSPITAL OF PHILADELPHIA (10306)
77	36.86	2.1	LEHIGH VALLEY HOSPITAL (11884)
41	19.37	2.1	GEISINGER MEDICAL CENTER (11775)

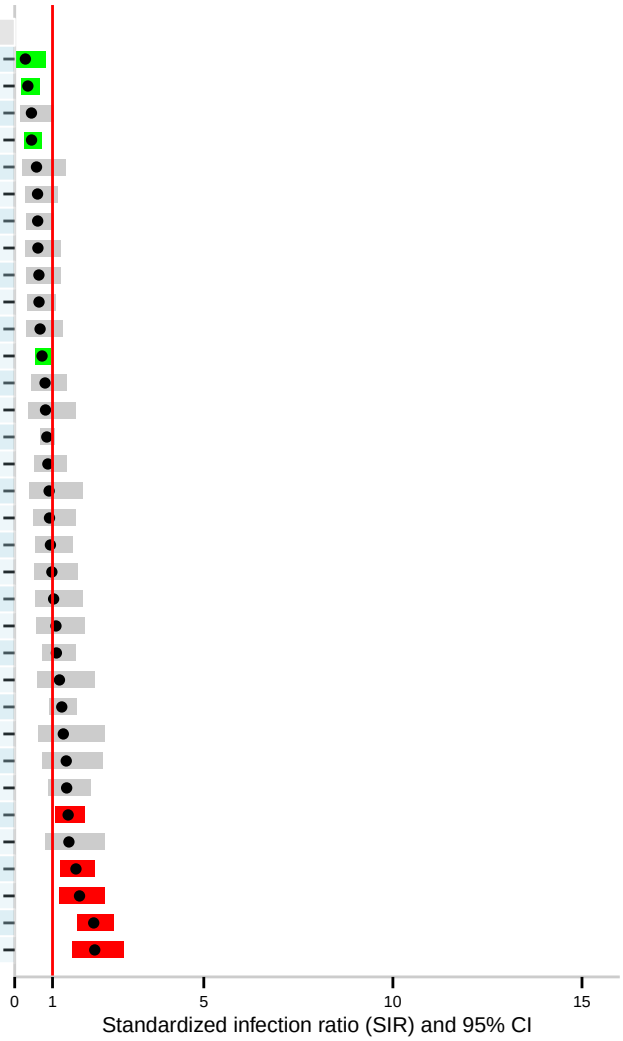
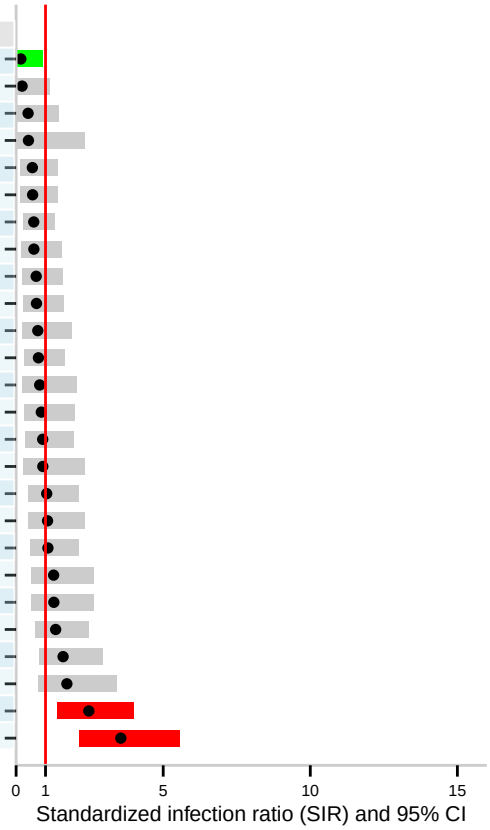


Figure 4.4.11: **Long Term Acute Care Hospitals**: Number of Observed (Obs.) Central Line-Associated Bloodstream Infections (CLABSI) and Relative Ranking of Facilities by Standardized Infection Ratio (SIR) — Pennsylvania, 2012

Obs.	Pred.	SIR	Facility and NHSN ID
1	6.26	0.2	KINDRED HOSPITAL AT HERITAGE VALLEY (12268)
1	4.93	0.2	LIFECARE HOSPITALS OF PITTSBURGH −−− ALLE−KISKI CAMPUS (18955)
2	4.91	0.4	KINDRED HOSPITAL PITTSBURGH −−− NORTH SHORE (12296)
1	2.38	0.4	SELECT SPECIALTY HOSPITAL −−− DANVILLE (12123)
4	7.24	0.6	SELECT SPECIALTY HOSPITAL −−− CENTRAL PA (13921)
4	7.13	0.6	LIFECARE HOSPITALS OF MECHANICSBURG (12388)
6	10.00	0.6	LIFECARE HOSPITALS OF PITTSBURGH (11945)
4	6.62	0.6	SELECT SPECIALITY HOSPITAL −−− JOHNSTOWN (12299)
5	7.32	0.7	KINDRED HOSPITAL PHILADELPHIA −−− HAVERTOWN (12908)
5	7.22	0.7	SPECIAL CARE HOSPITAL (12604)
4	5.42	0.7	SELECT SPECIALTY HOSPITAL −−− MCKEESPORT, INC. (12271)
6	7.90	0.8	LIFECARE HOSPITALS OF PITTSBURGH −−− MONROEVILLE (12254)
4	4.98	0.8	SELECT SPECIALITY HOSPITAL −−− ERIE (11880)
5	5.83	0.9	LIFECARE HOSPITALS OF CHESTER COUNTY (12005)
6	6.64	0.9	SELECT SPECIALTY HOSPITAL −−− PITTSBURGH/UPMC (12009)
4	4.40	0.9	SELECT SPECIALITY HOSPITAL −−− CENTRAL PENNSYLVANIA (YORK) (12334)
7	6.73	1.0	SELECT SPECIALTY HOSPITAL −−− CENTRAL PENNSYLVANIA (CAMP HILL) (12147)
6	5.62	1.1	KINDRED HOSPITAL EASTON (12007)
8	7.40	1.1	GOOD SHEPHERD SPECIALTY HOSPITAL (11887)
7	5.49	1.3	LIFECARE HOSPITALS OF PITTSBURGH −−− SUBURBAN CAMPUS (12385)
7	5.46	1.3	SELECT SPECIALTY HOSPITAL LAUREL HIGHLANDS, INC. (12108)
10	7.44	1.3	KINDRED HOSPITAL −−− PITTSBURGH (12358)
10	6.26	1.6	KINDRED HOSPITAL −−− PHILADELPHIA (11832)
8	4.64	1.7	KINDRED HOSPITAL SOUTH PHILADELPHIA (11940)
16	6.47	2.5	KINDRED HOSPITAL −−− WYOMING VALLEY (12485)
19	5.34	3.6	GOOD SHEPHERD PENN PARTNERS (13929)

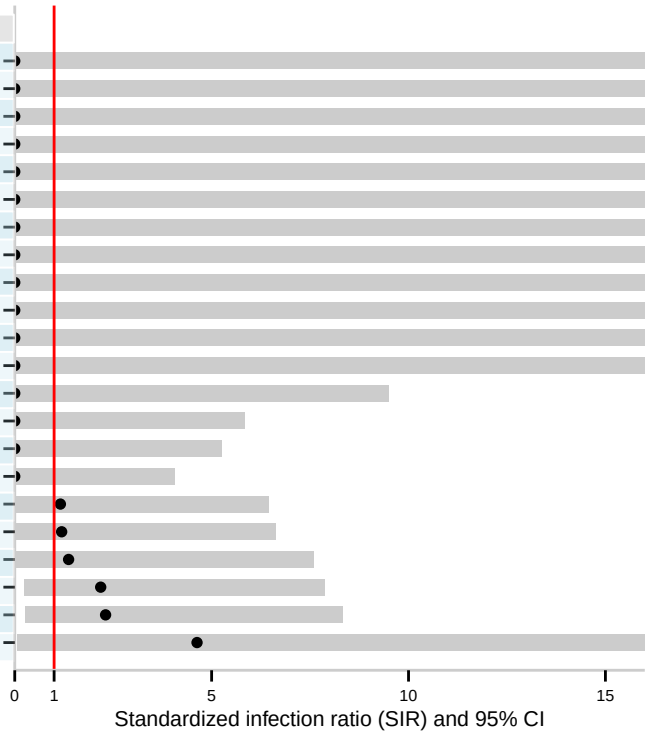


Better than predicted | Not different than predicted | Worse than predicted

Figure 4.4.12: **Neonatal Intensive Care Units**: Number of Observed (Obs.) Central Line-Associated Bloodstream Infections (CLABSI) and Relative Ranking of Facilities by Standardized Infection Ratio (SIR) — Pennsylvania, 2012

Grouped by Number of Predicted (Pred.) Infections: < 1

Obs.	Pred.	SIR	Facility and NHSN ID
0	0.01	0.0	EASTON HOSPITAL (11929)
0	0.01	0.0	SACRED HEART HOSPITAL (11684)
0	0.01	0.0	LOWER BUCKS HOSPITAL (12390)
0	0.07	0.0	ST. MARY MEDICAL CENTER (11885)
0	0.12	0.0	EPHRATA COMMUNITY HOSPITAL (11764)
0	0.15	0.0	MAIN LINE HOSPITAL −−− PAOLI (11750)
0	0.15	0.0	ST. JOSEPH MEDICAL CENTER (11961)
0	0.18	0.0	POCONO MEDICAL CENTER (11772)
0	0.18	0.0	GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)
0	0.19	0.0	HEART OF LANCASTER REGIONAL MEDICAL CENTER (12571)
0	0.21	0.0	DELAWARE COUNTY MEMORIAL HOSPITAL (11972)
0	0.22	0.0	HOLY SPIRIT HOSPITAL (12387)
0	0.39	0.0	DUBOIS REGIONAL MEDICAL CENTER (11606)
0	0.63	0.0	MOSES TAYLOR HOSPITAL (11528)
0	0.70	0.0	CHESTER COUNTY HOSPITAL (12016)
0	0.90	0.0	UPMC HAMOT (11725)
1	0.86	1.2	CROZER CHESTER MEDICAL CENTER (11839)
1	0.84	1.2	CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)
1	0.73	1.4	MAIN LINE HOSPITAL BRYN MAWR (11753)
2	0.92	2.2	ST. VINCENT HEALTH CENTER (11699)
2	0.87	2.3	HOLY REDEEMER HOSPITAL AND MEDICAL CENTER (11973)
1	0.22	4.6	UPMC MERCY (10384)

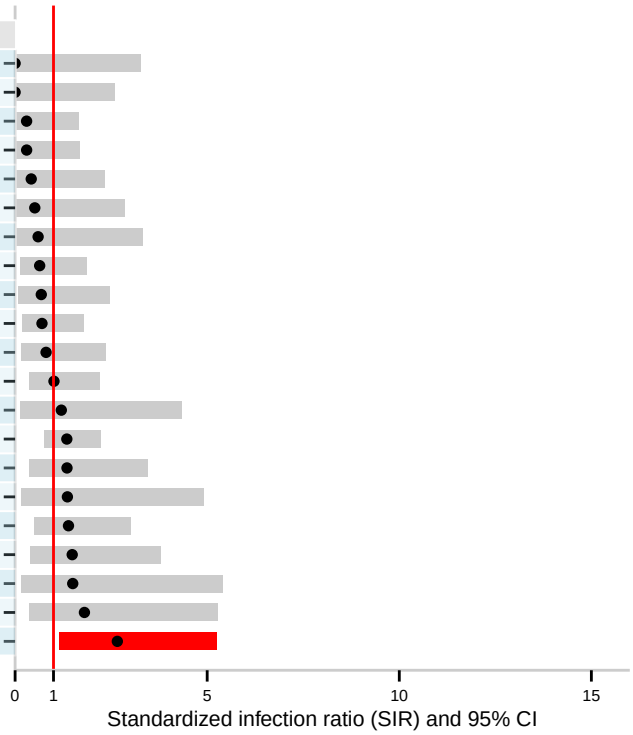


Better than predicted | Not different than predicted | Worse than predicted

Figure 4.4.13: **Neonatal Intensive Care Units**: Number of Observed (Obs.) Central Line-Associated Bloodstream Infections (CLABSI) and Relative Ranking of Facilities by Standardized Infection Ratio (SIR) — Pennsylvania, 2012

Grouped by Number of Predicted (Pred.) Infections: >= 1

Obs.	Pred.	SIR	Facility and NHSN ID
0	1.12	0.0	MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)
0	1.41	0.0	TEMPLE UNIVERSITY HOSPITAL (12382)
1	3.34	0.3	THOMAS JEFFERSON UNIV HOSPITAL (11506)
1	3.33	0.3	HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)
1	2.38	0.4	ALBERT EINSTEIN MEDICAL CENTER (10585)
1	1.95	0.5	YORK HOSPITAL (10108)
1	1.67	0.6	ABINGTON MEMORIAL HOSPITAL (11838)
3	4.69	0.6	CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)
2	2.94	0.7	PINNACLE HEALTH HOSPITALS (10122)
4	5.72	0.7	ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)
3	3.72	0.8	THE WESTERN PENNSYLVANIA HOSPITAL (11864)
6	5.93	1.0	MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)
2	1.66	1.2	HAHNEMANN UNIVERSITY HOSPITAL (11437)
15	11.14	1.3	CHILDRENS HOSPITAL OF PHILADELPHIA (10306)
4	2.96	1.4	LEHIGH VALLEY HOSPITAL (11884)
2	1.47	1.4	LANCASTER GENERAL HOSPITAL (10183)
6	4.32	1.4	MILTON S HERSHEY MEDICAL CENTER (11747)
4	2.69	1.5	GEISINGER MEDICAL CENTER (11775)
2	1.33	1.5	ST. LUKES HOSPITAL BETHLEHEM (11718)
3	1.66	1.8	READING HOSPITAL AND MEDICAL CENTER (12375)
8	3.01	2.7	PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS (11448)

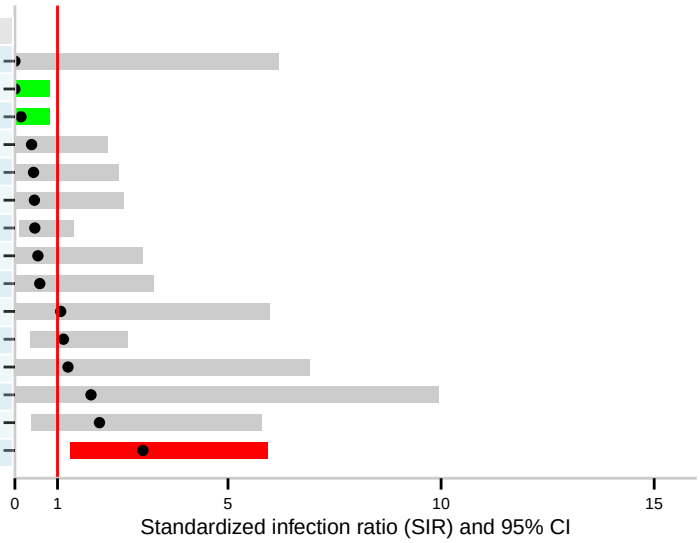


Better than predicted | Not different than predicted | Worse than predicted

Figure 4.4.14: **Specialty Care Areas**: Number of Observed (Obs.) Central Line-Associated Bloodstream Infections (CLABSI) and Relative Ranking of Facilities by Standardized Infection Ratio (SIR) — Pennsylvania, 2012

Grouped by Number of Predicted (Pred.) Infections: < 7.5

Obs.	Pred.	SIR	Facility and NHSN ID
0	0.59	0.0	EXCELA HEALTH LATROBE HOSPITAL (11651)
0	4.55	0.0	TEMPLE UNIVERSITY HOSPITAL (12382)
1	6.95	0.1	HAHNEMANN UNIVERSITY HOSPITAL (11437)
1	2.56	0.4	READING HOSPITAL AND MEDICAL CENTER (12375)
1	2.29	0.4	EASTON HOSPITAL (11929)
1	2.18	0.5	ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)
3	6.42	0.5	THE WESTERN PENNSYLVANIA HOSPITAL (11864)
1	1.85	0.5	UPMC NORTHWEST (11837)
1	1.71	0.6	WILKES−BARRE GENERAL HOSPITAL (11916)
1	0.93	1.1	FORBES REGIONAL HOSPITAL (11265)
5	4.39	1.1	ABINGTON MEMORIAL HOSPITAL (11838)
1	0.80	1.2	DELAWARE COUNTY MEMORIAL HOSPITAL (11972)
1	0.56	1.8	JEFFERSON REGIONAL MEDICAL CENTER (10237)
3	1.51	2.0	CHILDRENS HOME OF PITTSBURGH, THE (12336)
8	2.66	3.0	ROBERT PACKER HOSPITAL (12422)

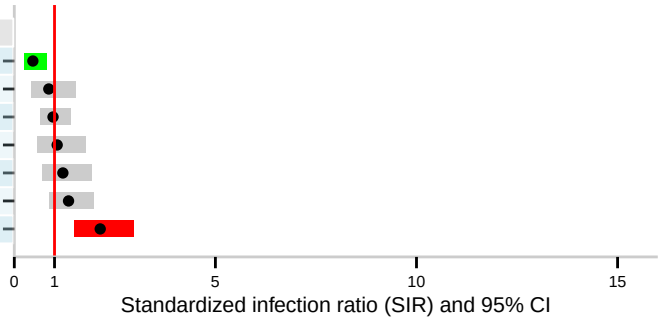


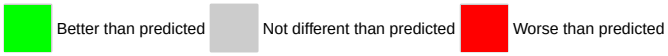
Better than predicted | Not different than predicted | Worse than predicted

Figure 4.4.15: **Specialty Care Areas**: Number of Observed (Obs.) Central Line-Associated Bloodstream Infections (CLABSI) and Relative Ranking of Facilities by Standardized Infection Ratio (SIR) — Pennsylvania, 2012

Grouped by Number of Predicted (Pred.) Infections: >= 7.5

Obs.	Pred.	SIR	Facility and NHSN ID
12	26.00	0.5	UPMC PRESBYTERIAN SHADYSIDE --- SHADYSIDE (10118)
11	12.83	0.9	THOMAS JEFFERSON UNIV HOSPITAL (11506)
28	29.08	1.0	EASTERN REGIONAL MEDICAL CENTER (12348)
14	13.13	1.1	HOSPITAL OF FOX CHASE CANCER CENTER (12134)
17	14.08	1.2	CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)
25	18.54	1.3	MILTON S HERSHEY MEDICAL CENTER (11747)
35	16.39	2.1	CHILDRENS HOSPITAL OF PHILADELPHIA (10306)





4.5. Surgical site infections (SSIs)

Surgical site infections (SSIs) are those HAIs that occur in association with an inpatient operation that involves at least one skin incision and complete closure of the incision site before the patient leaves the operating theater. Pennsylvania data show that SSIs are the single most common category of HAIs, and as other categories have declined in incidence, the proportion of HAIs in the SSI category has grown. SSIs are a substantial problem in the hospital, as they are very costly, are linked to excess deaths, increase the length of hospitalization, lead to hospital readmissions and produce long-term consequences. There is a growing body of evidence that SSIs can be prevented through the use of science-based measures. These include the use of peri-operative prophylactic antibiotics, preparation of the surgical site (especially hair removal techniques and pre-operative skin disinfection) and post-operative wound care. A number of factors have been associated with the likelihood an SSI will develop. These include the type of surgical procedure, the underlying health status of the patient, whether the procedure is done emergently or electively, the condition and circumstances of the operative site (e.g., the cleanliness of the wound), duration of the surgical procedure, and the surgeon who performs the procedure.

This report focuses on those surgical procedures that have been selected in Pennsylvania for the purpose of benchmarking: cardiac surgery (procedures on the valves or septum of the heart CARD), coronary artery bypass graft (with two incision sites – the chest and donor site – CBGB, and with one incision site – the chest – CBGC), knee arthroplasty (prosthesis – KPRO), hip arthroplasty (prosthesis – HPRO), and abdominal hysterectomy (removal of the uterus through the abdomen – HYST). All but the last procedure can involve the use of implants (tissue implants or a mechanical device). Implant-associated infections have distinct features from other types of SSIs — they are often indolent and difficult to recognize. Therefore, the NHSN protocol requires a follow-up period of 12 months to identify an SSI for a patient undergoing an implant-associated procedure. For patients undergoing procedures in December 2011, this period ended in December 2012. This report therefore covers surgeries performed in 2011, a year earlier than all other data presented in the current report.

Beginning in 2012, the federal Centers for Medicare and Medicaid Services (CMS) required hospitals participating in the Inpatient Prospective Payment System (IPPS) to submit information on SSIs associated with abdominal hysterectomies and colon surgeries. Examination of Pennsylvania data shows that colon surgery is the procedure type most frequently reported with an SSI. In order to better categorize the performance of Pennsylvania hospitals with respect to SSIs and to align reporting requirements with those of CMS, in the fall of 2011, PADOH announced that colon surgery would be added as a seventh SSI for benchmarking purposes beginning in 2012. Given the full year follow-up period, colon surgery-related SSI data will be reported for the first time in the 2013 annual report.

4.5.1. SSIs — Statewide Summary

During 2011, a total of 94,634 benchmark procedure inpatient operations were performed by 170 different Pennsylvania hospitals. This represents a 0.4 percent decrease in the overall number of these six types of surgical procedures from the overall number in the previous year (95,034). Among the 170 hospitals performing at least one of these procedures, there were 53 (31.18) that performed all six benchmarked procedures and 74 (43.5 percent) that performed three (usually hip and knee replacements and abdominal hysterectomies) of the six benchmarked procedures (Figure 4.5.1). This is consistent with previous years. For each procedure type, the total number of hospitals performing that procedure is shown in Table 4.5.1.

From the 94,634 benchmark procedures performed in 2011, by the end of 2012, a total of 1,186 SSIs were identified and reported (Table 4.5.1). This represents a 1.24 percent decline from the previous report and results in an overall SSI rate for the six procedures of 1.25 infections per 100 procedures (a pooled infection rate of 1.25 percent) [Table 4.5.1]. This rate translates to an overall decline of 6.99 percent in the rate of SSIs compared to baseline data from 2009. The decline means there were 164 fewer SSIs in Pennsylvania than would have been the case if the 2009 baseline rate had persisted into 2011.

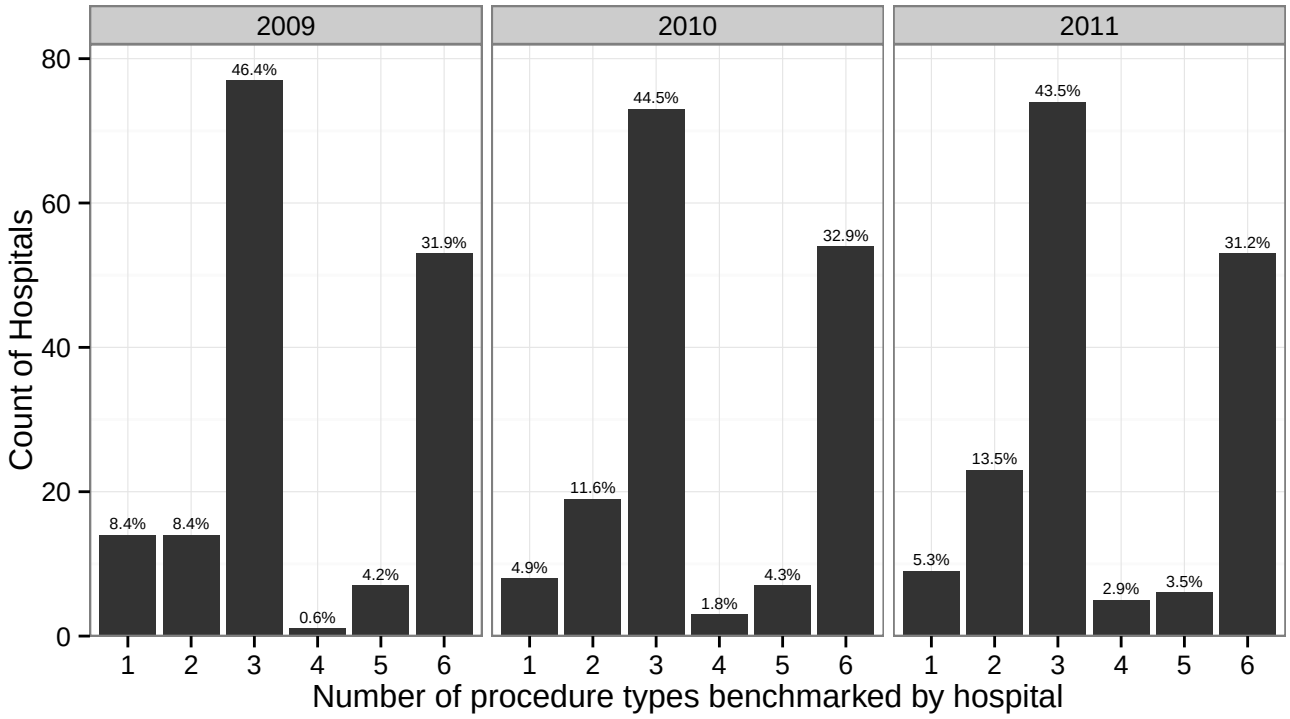
Table 4.5.1 shows the SSI rate for each of the six procedure types performed in 2011, rates for previous years and the percent change. The rates of infection for procedures performed in 2011 ranged from a low of 0.83 SSIs per 100 knee arthroplasties to a high of 2.10 SSIs per 100 dual-incision cardiac bypass graft (CBGB) surgeries. Both the minimum and maximum procedure specific rates are lower than in 2009.

Table 4.5.1: Summary of Reporting Hospitals and Surgical Site Infections (SSIs) by Benchmarked Procedure and Year — Pennsylvania, 2009–2011

	Number of Reporting Hospitals	Number of SSIs	Number of Procedures	Unadjusted (Crude) Rate per 100 Procedures	Change in Rate Since Prior Year	Change in Rate Since 2009
Cardiac (CARD)						
2011	67	88	7,807	1.13	– 4.31	– 4.31
2010	66	83	7,446	1.11	– 5.37	– 5.37
2009	64	83	7,046	1.18	.	.
Cardiac Bypass Graft Surgery with One Incision (CBGC)						
2011	53	14	1,272	1.10	– 17.80	– 15.90
2010	57	19	1,419	1.34	2.31	2.31
2009	57	27	2,063	1.31	.	.
Cardiac Bypass Graft Surgery with Two Incisions (CBGB)						
2011	60	196	9,314	2.10	4.31	– 15.15
2010	62	208	10,310	2.02	– 18.65	– 18.65
2009	61	276	11,129	2.48	.	.
Knee Prosthesis (KPRO)						
2011	160	328	39,333	0.83	– 5.26	– 10.72
2010	153	350	39,762	0.88	– 5.76	– 5.76
2009	151	355	38,006	0.93	.	.
Hip Prosthesis (HPRO)						
2011	159	346	23,400	1.48	– 0.01	6.38
2010	155	333	22,519	1.48	6.39	6.39
2009	152	304	21,871	1.39	.	.
Abdominal Hysterectomy (HYST)						
2011	146	214	13,508	1.58	0.99	– 0.53
2010	143	213	13,578	1.57	– 1.51	– 1.51
2009	145	224	14,064	1.59	.	.
Annual Total (All Procedures)						
2011	170	1,186	94,634	1.25	– 1.24	– 6.99
2010	164	1,206	95,034	1.27	– 5.82	– 5.82
2009	166	1,269	94,179	1.35	.	.

Figure 4.5.1: **Surgical Site Infections**: Distribution of Facilities by Number of Benchmarked Procedures — Pennsylvania, 2009–2011

Stratified by Procedure Year



4.5.2. SSIs — By Pathogen

Table 4.5.2 shows the pathogen data for surgical site infections resulting from procedures performed in 2009 through 2011. Pathogens isolated in 1 percent or more of all SSIs are listed individually. Pathogens isolated in less than 1 percent of SSIs have been included in the table as "Other." The number of pathogens is not broken down by procedure type, as the number of SSIs is small for individual procedure categories; however, *S. aureus* was the most commonly reported pathogen in each procedure category. The total number of isolated pathogens is greater than the number of SSIs, as NHSN allows for reporting of more than one pathogen per infection.

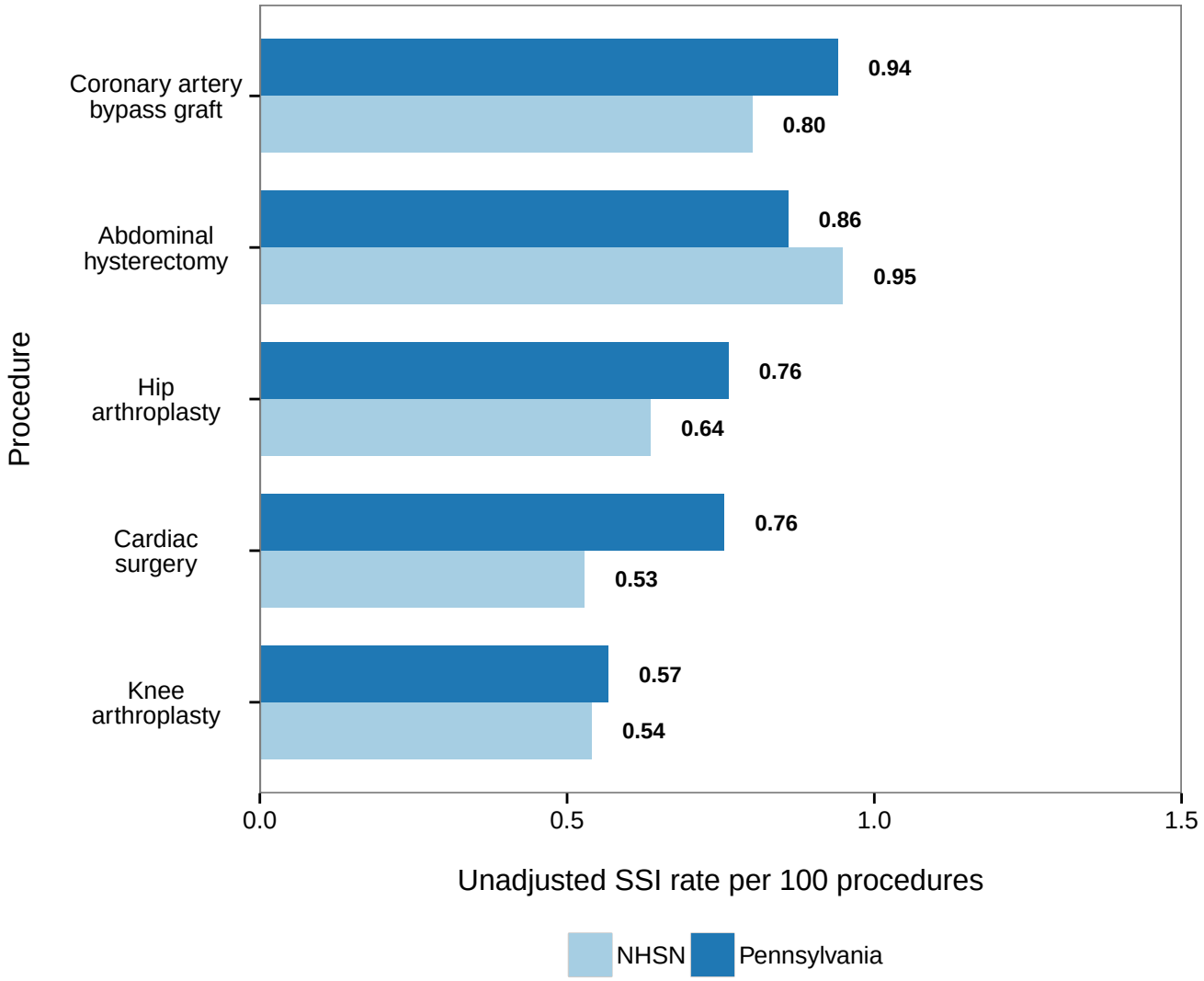
Table 4.5.2: Pathogens Isolated from Surgical Site Infections — Pennsylvania, 2009–2011

	2009		2010		2011	
Pathogen	Count	%	Count	%	Count	%
Staphylococcus aureus	515	36.81	495	37.50	481	35.24
Staphylococcus coagulase negative	137	9.79	99	7.50	94	6.89
Pseudomonas aeruginosa	79	5.65	72	5.45	82	6.01
Escherichia coli	90	6.43	72	5.45	80	5.86
Enterococcus faecalis	66	4.72	57	4.32	65	4.76
Enterobacter cloacae	29	2.07	40	3.03	55	4.03
Proteus mirabilis	58	4.15	56	4.24	52	3.81
Staphylococcus epidermidis	48	3.43	42	3.18	52	3.81
Klebsiella pneumoniae	33	2.36	41	3.11	44	3.22
Enterococcus spp.	50	3.57	41	3.11	36	2.64
Streptococcus group B	33	2.36	29	2.20	36	2.64
Serratia marcescens	18	1.29	32	2.42	24	1.76
Morganella morganii	13	0.93	14	1.06	19	1.39
Other	230	16.44	230	17.42	245	17.95
All	1,399	100.00	1,320	100.00	1,365	100.00

4.5.3. SSIs — National Comparison

Act 52 requires comparisons between Pennsylvania data and national data. In order to compare Pennsylvania's identified procedure-specific SSI rates to national rates, information was obtained from the CDC's National Healthcare Safety Network for 2011 (Malpiedi **et al.**, 2013). Note that CDC does not separate CBGB and CBGC but instead reports a single category for cardiac bypass grafts. In addition, the rates published by CDC only include surgical site infections classified as deep primary incisional infections, organ infections, or infections of the joint space detected while the patient was admitted or upon readmission to the same facility where the initial surgical procedure was performed. Figure 4.5.2 compares surgical site infection rates by procedure from Pennsylvania and the nation using CDC's inclusion criteria. The crude, adjusted infection rates in Pennsylvania are statistically no different than the national rates. This is in contrast to comparisons in previous reports that demonstrated that the Pennsylvania rates were approximately twice the corresponding national rates. Previous year reports did not account for the difference in inclusion criteria described above.

Figure 4.5.2: Surgical Site Infection Rates by Procedure — Pennsylvania and NHSN, 2011



4.5.4. SSIs — Risk-Adjusted Rates

Since information is collected on all patients undergoing the benchmark operative procedures, it is possible to calculate SSI rates for patient characteristics that are used for SSI risk adjustment purposes. For this report, rates are adjusted by the risk index. The risk index is comprised of:

- American Society of Anesthesiology (ASA) score (a measure of the overall health of the patient);
- Wound classification (clean vs. unclean); and
- Operative duration (below or above the median).

Each patient is assigned a risk index (RI) score of 0 to 3, with a possible single point given for each of the three criteria. For instance, a patient with a low ASA score (meaning they are a low-risk patient for surgical complications — i.e., they are in good health), a clean wound and a short operative duration would have a risk index of 0. A patient with a high ASA score (a person at high risk of surgical complications due to poor health), a contaminated operative site and long procedure duration would have a risk index score of 3. Patients can therefore have an assigned risk index of 0, 1, 2, or 3 based on whether or not a point is assigned for each factor that comprises the risk index.

Table 4.5.3 demonstrates the SSI rate for each benchmark procedure by risk index category for 2011. Studies have shown that, in general, the SSI rate increases in concert with an increasing risk index. In general, this is true for the six benchmark procedures in Pennsylvania. However, as shown in Table 4.5.3, this is not always the case. This usually results because the number of procedures and/or SSIs in some of the risk index strata is small. For instance, in 2011, only 51 cardiac bypass (two incisions) procedures were done on patients with a risk index of 0, and a similar small number (14 procedures) were done on patients with a risk index of 3.

To determine the risk-adjusted standardized infection ratio (SIR) for each hospital, the hospital's SSI rate for each risk index category (e.g., for their patients with a risk index of 0, 1, 2, and 3) is compared to the overall statewide rate for each risk index stratum. The number of predicted SSIs for each hospital is calculated based on the number of procedures they reported performing within each risk index category and the statewide rate for that stratum. The predicted number is then compared to the observed number. This is done for each risk index category to produce an overall predicted SSI number, and this is compared to the overall observed number to produce the risk adjusted SIR for each procedure. As with CAUTIs and CLABSIs, the confidence interval (CI) is then calculated to determine if the number of SSIs reported by the hospital is significantly better or worse than predicted, in comparison to the statewide rate. Hospitals with significantly better or worse than predicted SIRs are found in Tables 4.5.6–4.5.7.

Table 4.5.3: Surgical Site Infections and Crude Infection Rate by Benchmarked Procedure and Risk Index — Pennsylvania, 2011

	Risk Index	Number of SSIs	Number of Procedures	Crude Rate per 100 Procedures
Cardiac (CARD)	0	0	106	0.00
	1	67	5,765	1.16
	2	21	1,886	1.11
	3	0	50	0.00
	All	88	7,807	1.13
Cardiac bypass graft surgery with one incision (CBGC)	0	0	13	0.00
	1	13	980	1.33
	2	1	279	0.36
	3	0	0	.
	All	14	1,272	1.10
Cardiac bypass graft surgery with two incisions (CBGB)	0	1	51	1.96
	1	138	7,273	1.90
	2	57	1,976	2.88
	3	0	14	0.00
	All	196	9,314	2.10
Knee prosthesis (KPRO)	0	69	16,115	0.43
	1	167	19,377	0.86
	2	90	3,783	2.38
	3	2	58	3.45
	All	328	39,333	0.83
Hip prosthesis (HPRO)	0	56	8,314	0.67
	1	199	12,427	1.60
	2	91	2,602	3.50
	3	0	57	0.00
	All	346	23,400	1.48
Abdominal hysterectomy (HYST)	0	74	6,518	1.14
	1	98	5,352	1.83
	2	41	1,610	2.55
	3	1	28	3.57
	All	214	13,508	1.58

4.5.5. SSIs — By Procedure Type and Facility

The SIRs for each of the benchmarked procedures by hospital are presented in Tables 4.5.8–4.5.13. In these tables, the hospitals are listed sequentially from smallest SIR to largest SIR. Table 4.5.14 presents the same information in alphabetical order by hospital. This enables the reader to review and compare a specific hospital's SIRs for each procedure.

Overall, the number of hospitals reporting zero surgical site infections for cardiac bypass (CBGC and CBGB), knee arthroplasty and abdominal hysterectomy procedures has increased every year since 2009 (Table 4.5.4).

Cardiac surgical procedures As shown in Table 4.5.4, among the 67 hospitals that performed cardiac surgery in 2011, the median number of reported SSIs was 0. In that year, 36 (53.7 percent) of these hospitals reported no

cardiac surgery-related SSIs, and 39 (58.2 percent) had a predicted number of infections that was <1.00. Information regarding hospitals with <1 predicted cardiac surgical site infection is considered statistically unreliable (as evidenced by the extremely wide confidence intervals in the tables for these facilities). During 2011, 49 (73.1 percent) of the hospitals performing cardiac surgery had an adjusted SIR that was <1.00 (meaning the number of reported cardiac surgery-related SSIs was lower than predicted), while the remaining 18 (26.9 percent) had an SIR ≥ 1.00 (the number reported was higher than predicted). None of the hospitals had significantly fewer cardiac surgery-related SSIs than predicted, and only two hospitals (3.0 percent) had significantly more than predicted. These hospitals are listed in Table 4.5.7.

Cardiac bypass graft — two incision procedures (CBGB) As shown in Table 4.5.4, among the 60 hospitals that performed two-incision (chest and donor site) cardiac bypass grafts in 2011, the median number of SSIs was two (down from 4 in 2009), and eight hospitals (13.3 percent) reported no CBGB-related SSIs. Among these hospitals, only four (6.7 percent) had <1 predicted infection. In 2011, there were 35 (58.3 percent) hospitals performing CBGBs that had a lower number of SSIs than predicted (their adjusted SIR was <1.00), while 25 (41.7 percent) had a greater or equal to number of SSIs than predicted (SIR ≥ 1.00). Among the 60 hospitals, one (1.7 percent) reported significantly fewer infections than predicted (listed in Table 4.5.6), while four hospitals (6.7 percent) reported significantly more infections than predicted; these hospitals are listed in Table 4.5.7.

Cardiac bypass graft — single incision procedures (CBGC) As shown in Table 4.5.4, among the 53 hospitals that reported performing single (chest) incision cardiac bypass grafts (CBGC) in 2011, the median number of post-surgical SSIs was 0, and only 10 (18.9 percent) of the hospitals reported any CBGC-related SSIs. The remaining 43 (81.1 percent) reported none. In addition, 44 (83.0 percent) of the hospitals had <1 predicted infection in the CBGC category; for these hospitals, the findings are considered to be statistically unreliable. Among all hospitals performing CBGCs in 2011, 44 (83.0 percent) of the hospitals performing CBGCs had a reported number of SSIs that was less than predicted (an SIR <1.00), and only nine (17.0 percent) reported more SSIs (an SIR >1.00) than predicted; none had significantly better SIRs than predicted, while one (1.9 percent) had a significantly worse SIR than predicted. This hospital is listed in Table 4.5.7.

Hip prostheses (HPRO) As shown in Table 4.5.4, among the 159 hospitals performing hip arthroplasties (prostheses) in 2011, the median number of SSIs was 1; a total of 59 (37.1 percent) reported no SSIs in this procedure category, and 69 (43.4 percent) had a predicted number of infections that was <1 (meaning the findings for these hospitals are statistically unreliable). Among hospitals performing hip arthroplasties in 2011, there were 99 (62.3 percent) that had a fewer number (SIR <1.00) of SSIs reported than predicted; among these hospitals, two (1.3 percent) had a significantly lower number of infections reported than predicted. The remaining 60 (37.7 percent) had a greater or equal number (SIR ≥ 1.00) of SSIs reported than predicted; among these hospitals, five had a significantly higher (or worse) number of hip prosthesis-related SSIs than predicted. The hospitals with a significantly better or worse number of infections than predicted can be found in Tables 4.5.6 and 4.5.7.

Knee prostheses (KPRO) As shown in Table 4.5.4, among the 160 hospitals performing knee arthroplasties (prostheses) in 2011, the median number of SSIs was 1; a total of 63 (39.4 percent) reported no SSIs in this procedure category. Among the 160 hospitals, 73 (45.6 percent) had a predicted number of infections that was <1; for these hospitals, the findings are considered statistically unreliable. Among hospitals performing knee arthroplasties in 2011, there were 102 (63.7 percent) that had a fewer number (SIR <1.00) of knee prosthesis-related SSIs reported than predicted; one hospital (0.6 percent) had a significantly lower SIR (better) than predicted. The remaining 58 (36.2 percent) had a greater or equal number (SIR ≥ 1.00) of SSIs reported than predicted; six (3.8 percent) hospitals had a significantly higher number of SSIs reported than were predicted in that year. The hospitals with a significantly lower than, and higher than, predicted number of knee procedure-related surgical site infections can be found in Tables 4.5.6 and 4.5.7.

Abdominal hysterectomies (HYST) As shown in Table 4.5.4, among the 146 hospitals performing abdominal hysterectomies in 2011, the median number of SSIs was 0 (down from a median of 1 in 2009 and 2010), and there were

79 (54.1 percent) that reported no SSIs associated with this procedure and 91 (62.3 percent) with a predicted number of SSIs that was <1 (the findings for hospitals with <1 predicted infection are considered statistically unreliable). Among hospitals who perfomed abdominal hysterectomies in 2011, a total of 96 (65.8 percent) hospitals reported fewer SSIs than predicted (SIR <1.00), while the other 50 (34.2 percent) reported more or equal SSIs than predicted (SIR ≥ 1.00). However, only two hospitals (1.4 percent) had a significantly lower number of SSIs than predicted, and three (2.1 percent) hospitals had a significantly higher number of SSIs than predicted. These hospitals can be found in Tables 4.5.6 and 4.5.7.

Table 4.5.4: Summary of Surgical Site Infections (SSIs) and Hospital Performance by Benchmarked Procedure and Year — Pennsylvania, 2009–2011

		Hospitals with 0 SSIs		Hospitals with <1 Predicted SSIs		Hospitals with Adjusted SIR < 1		Hospitals with Adjusted SIR ≥ 1		Hospitals With Adjusted SIR Significantly Better Than Predicted		Hospitals With Adjusted SIR Significantly Worse Than Predicted	
	Median SSIs per Hospital	n	%	n	%	n	%	n	%	n	%	n	%
Cardiac (CARD)													
2011	0	36	53.7	39	58.2	49	73.1	18	26.9	0	0.0	2	3.0
2010	0	34	51.5	38	57.6	44	66.7	22	33.3	0	0.0	2	3.0
2009	0	35	54.7	36	56.2	46	71.9	18	28.1	0	0.0	3	4.7
Cardiac bypass graft surgery with one incision (CBGC)													
2011	0	43	81.1	50	94.3	44	83.0	9	17.0	0	0.0	1	1.9
2010	0	42	73.7	53	93.0	45	78.9	12	21.1	0	0.0	1	1.8
2009	0	40	70.2	49	86.0	43	75.4	14	24.6	0	0.0	3	5.3
Cardiac bypass graft surgery with two incisions (CBGB)													
2011	2	8	13.3	4	6.7	35	58.3	25	41.7	1	1.7	4	6.7
2010	3	8	12.9	4	6.5	35	56.5	27	43.5	0	0.0	3	4.8
2009	4	7	11.5	1	1.6	29	47.5	32	52.5	5	8.2	5	8.2
Knee prosthesis (KPRO)													
2011	1	63	39.4	73	45.6	102	63.7	58	36.2	1	0.6	6	3.8
2010	1	58	37.9	65	42.5	97	63.4	56	36.6	1	0.7	6	3.9
2009	1	55	36.4	58	38.4	93	61.6	58	38.4	2	1.3	7	4.6
Hip prosthesis (HPRO)													
2011	1	59	37.1	69	43.4	99	62.3	60	37.7	2	1.3	5	3.1
2010	1	60	38.7	68	43.9	93	60.0	62	40.0	1	0.6	8	5.2
2009	1	61	40.1	67	44.1	99	65.1	53	34.9	1	0.7	4	2.6
Abdominal hysterectomy (HYST)													
2011	0	79	54.1	91	62.3	96	65.8	50	34.2	2	1.4	3	2.1
2010	1	66	46.2	78	54.5	94	65.7	49	34.3	1	0.7	5	3.5
2009	1	64	44.1	79	54.5	96	66.2	49	33.8	1	0.7	7	4.8

Table 4.5.5: Hospitals Omitted from SSI SIR Analysis Due to No Reported Procedures — Pennsylvania, 2011

Facility Name and NHSN ID
MAIN LINE HOSPITAL BRYN MAWR REHABILITATION (11417)
HEALTHSOUTH NITTANY VALLEY REHABILITATION HOSPITAL (11667)
HEALTHSOUTH HARMARVILLE REHABILITATION HOSPITAL (11727)
PHILHAVEN HOSPITAL (11740)
DIVINE PROVIDENCE HOSPITAL (11743)
MUNCY VALLEY HOSPITAL (11748)
HEALTHSOUTH REHABILITATION HOSPITAL OF ERIE (11810)
KINDRED HOSPITAL — PHILADELPHIA (11832)
DANVILLE STATE HOSPITAL (11848)
JOHN HEINZ INSTITUTE OF REHABILITATION (11861)
SELECT SPECIALITY HOSPITAL — ERIE (11880)
GOOD SHEPHERD SPECIALTY HOSPITAL (11887)
THE GOOD SHEPHERD REHABILITATION HOSPITAL (11896)
HEALTHSOUTH REHABILITATION HOSPITAL OF ALTOONA (11903)
PENN STATE HERSHEY REHABILITATION LLC (11915)
FULTON COUNTY MEDICAL CENTER (11939)
KINDRED HOSPITAL SOUTH PHILADELPHIA (11940)
LIFECARE HOSPITALS OF PITTSBURGH (11945)
MEYERSDALE COMMUNITY HOSPITAL (11968)
GEISINGER HEALTHSOUTH REHABILITATION HOSPITAL (11993)
LIFECARE HOSPITALS OF CHESTER COUNTY (12005)
KINDRED HOSPITAL EASTON (12007)
SELECT SPECIALTY HOSPITAL — PITTSBURGH/UPMC (12009)
VALLEY FORGE MEDICAL CENTER AND HOSPITAL (12029)
BARIX CLINICS OF PENNSYLVANIA (12037)
NORRISTOWN STATE HOSPITAL (12047)
FIRST HOSPITAL OF WYOMING VALLEY (12050)
CLARKS SUMMIT STATE HOSPITAL (12051)
HEALTHSOUTH REHABILITATION HOSPITAL OF YORK (12058)
HEALTHSOUTH REHABILITATION HOSPITAL OF SEWICKLEY (12066)
WARREN STATE HOSPITAL (12081)
TORRANCE STATE HOSPITAL (12091)
SELECT SPECIALTY HOSPITAL LAUREL HIGHLANDS, INC. (12108)
SELECT SPECIALTY HOSPITAL — DANVILLE (12123)
HEALTHSOUTH READING REHABILITATION HOSPITAL (12139)
MAGEE REHAB HOSPITAL (12146)
SELECT SPECIALTY HOSPITAL — CENTRAL PENNSYLVANIA (CAMP HILL) (12147)
THE MEADOWS PSYCHIATRIC CENTER (12156)
LIFECARE HOSPITALS OF PITTSBURGH — MONROEVILLE (12254)
CHILDRENS INSTITUTE OF PITTSBURGH (12266)
KINDRED HOSPITAL AT HERITAGE VALLEY (12268)
SELECT SPECIALTY HOSPITAL — MCKEESPORT, INC. (12271)
CRICHTON REHABILITATION CENTER (12273)
MONTGOMERY COUNTY MH/MR EMERGENCY SERVICES, INC. (12287)
KINDRED HOSPITAL PITTSBURGH — NORTH SHORE (12296)
SELECT SPECIALITY HOSPITAL — JOHNSTOWN (12299)
SELECT SPECIALITY HOSPITAL — CENTRAL PENNSYLVANIA (YORK) (12334)
CHILDRENS HOME OF PITTSBURGH, THE (12336)
KINDRED HOSPITAL — PITTSBURGH (12358)
WERNERSVILLE STATE HOSPITAL (12368)
LIFECARE HOSPITALS OF PITTSBURGH — SUBURBAN CAMPUS (12385)
LIFECARE HOSPITALS OF MECHANICSBURG (12388)
HEALTHSOUTH REHABILITATION HOSPITAL OF MECHANICSBURG (12402)
KIDSPEACE ORCHARD HILLS CAMPUS (12430)
SOUTHWOOD PSYCHIATRIC HOSPITAL (12453)
CLARION PSYCHIATRIC CENTER (12454)
BUCKTAIL MEDICAL CENTER (12461)
ST. MARY MEDICAL CENTER REHAB (12483)

KINDRED HOSPITAL — WYOMING VALLEY (12485)
FRIENDS HOSPITAL (12488)
BELMONT CENTER FOR COMPREHENSIVE TREATMENT (12505)
ALBERT EINSTEIN MEDICAL CENTER MOSS REHABILITATION (12508)
HORSHAM CLINIC (12543)
ST. JOHN VIANNEY HOSPITAL (12548)
FAIRMOUNT BEHAVIORAL HEALTH SYSTEM (12565)
ALLIED SERVICES INSTITUTE OF REHABILITATION (12591)
SPECIAL CARE HOSPITAL (12604)
KENSINGTON HOSPITAL (12609)
BROOKE GLEN BEHAVIORAL HOSPITAL (12623)
KIRKBRIDE CENTER (12624)
LANCASTER REHABILITATION HOSPITAL (12628)
ROXBURY TREATMENT CENTER (12723)
DEVEREUX CHILDRENS BEHAVIORAL HEALTH INSTITUTE (12738)
FOUNDATIONS BEHAVIORAL HEALTH (12832)
KINDRED HOSPITAL PHILADELPHIA — HAVERTOWN (12908)
EAGLEVILLE HOSPITAL (12965)
UPMC PRESBYTERIAN SHADYSIDE — WPIC (13702)
SELECT SPECIALTY HOSPITAL — CENTRAL PA (13921)
GOOD SHEPHERD PENN PARTNERS (13929)
PENNSYLVANIA PSYCHIATRIC INSTITUTE (14190)
HAVEN BEHAVIORAL HOSPITAL OF EASTERN PENNSYLVANIA (14471)
LIFECARE HOSPITALS OF PITTSBURGH — ALLE-KISKI CAMPUS (18955)
ST. LUKES HOSPITAL ANDERSON CAMPUS (21487)

Table 4.5.6: Hospitals with Significantly Fewer Surgical Site Infections (SSIs) than Predicted (Better = Smaller SIR) — Pennsylvania, 2011

	Hospital Name (NHSN ID)
Cardiac (CARD)	NONE
Cardiac bypass graft surgery with one incision (CBGC)	NONE
Cardiac bypass graft surgery with two incisions (CBGB)	LEHIGH VALLEY HOSPITAL (11884)
Knee arthroplasty (KPRO)	GEISINGER-COMMUNITY MEDICAL CENTER (11914)
Hip arthroplasty (HPRO)	LANCASTER GENERAL HOSPITAL (10183) ROBERT PACKER HOSPITAL (12422)
Abdominal hysterectomy (HYST)	HOSPITAL OF FOX CHASE CANCER CENTER (12134) LEHIGH VALLEY HOSPITAL (11884)

Table 4.5.7: Hospitals with Significantly More Surgical Site Infections (SSIs) than Predicted (Worse = Larger SIR) — Pennsylvania, 2011

	Hospital Name (NHSN ID)
Cardiac (CARD)	
	CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)
	ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)
Cardiac bypass graft surgery with one incision (CBGC)	
	LANCASTER GENERAL HOSPITAL (10183)
Cardiac bypass graft surgery with two incisions (CBGB)	
	ALBERT EINSTEIN MEDICAL CENTER (10585)
	ALLEGHENY GENERAL HOSPITAL (10648)
	BRANDYWINE HOSPITAL (11979)
	LANCASTER REGIONAL MEDICAL CENTER (12335)
Knee arthroplasty (KPRO)	
	EPHRATA COMMUNITY HOSPITAL (11764)
	MAIN LINE HOSPITAL — PAOLI (11750)
	MILTON S HERSHEY MEDICAL CENTER (11747)
	PENN PRESBYTERIAN MEDICAL CENTER (11814)
	THOMAS JEFFERSON UNIV HOSPITAL (11506)
	UPMC HAMOT (11725)
Hip arthroplasty (HPRO)	
	CHESTNUT HILL HOSPITAL (12304)
	GEISINGER MEDICAL CENTER (11775)
	UNIONTOWN HOSPITAL (10441)
	UPMC HAMOT (11725)
	WINDBER HOSPITAL (12031)
Abdominal hysterectomy (HYST)	
	J C BLAIR MEMORIAL HOSP (11724)
	LOWER BUCKS HOSPITAL (12390)
	TYRONE HOSPITAL (12717)

Table 4.5.8: Rate (SIR) of Surgical Site Infections (SSIs) Associated with Cardiac Procedures by Hospital (Ordered by SIR) — Pennsylvania, 2009–2011

	Number of SSIs (CARD)	Predicted Number of SSIs (CARD)	SIR (95% CI)
THE WESTERN PENNSYLVANIA HOSPITAL (11864)			
2011	.	.	.
2010	2	0.88	2.28 (0.26–8.23)
2009	0	1.59	0.00 (0.00–2.31)
OHIO VALLEY GENERAL HOSPITAL (12298)			
2011	.	.	.
2010	0	0.01	0.00 (0.00–349.76)
2009	.	.	.
ALTOONA REGIONAL HEALTH SYSTEM (10178)			
2011	0	1.25	0.00 (0.00–2.92)
2010	0	1.16	0.00 (0.00–3.17)
2009	1	1.21	0.83 (0.01–4.60)
CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)			
2011	0	1.23	0.00 (0.00–2.98)
2010	0	1.10	0.00 (0.00–3.34)
2009	0	1.87	0.00 (0.00–1.96)
HERITAGE VALLEY SEWICKLEY (10375)			
2011	0	0.01	0.00 (0.00–315.62)
2010	0	0.04	0.00 (0.00–87.44)
2009	.	.	.
UPMC MERCY (10384)			
2011	0	1.43	0.00 (0.00–2.57)
2010	1	1.12	0.89 (0.01–4.97)
2009	0	0.61	0.00 (0.00–6.04)
ALBERT EINSTEIN MEDICAL CENTER (10585)			
2011	0	0.32	0.00 (0.00–11.41)
2010	0	0.54	0.00 (0.00–6.76)
2009	0	0.43	0.00 (0.00–8.49)
ALLEGHENY GENERAL HOSPITAL (10648)			
2011	0	2.77	0.00 (0.00–1.32)
2010	0	2.37	0.00 (0.00–1.55)
2009	1	2.46	0.41 (0.01–2.26)
FORBES REGIONAL HOSPITAL (11265)			
2011	0	0.54	0.00 (0.00–6.76)
2010	0	0.49	0.00 (0.00–7.56)
2009	0	0.57	0.00 (0.00–6.46)
ARIA HEALTH (11388)			
2011	0	0.68	0.00 (0.00–5.39)
2010	0	0.56	0.00 (0.00–6.61)
2009	1	0.78	1.28 (0.02–7.09)
HAHNEMANN UNIVERSITY HOSPITAL (11437)			
2011	0	0.66	0.00 (0.00–5.55)
2010	0	0.65	0.00 (0.00–5.62)
2009	0	0.50	0.00 (0.00–7.38)
PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS (11448)			
2011	0	0.39	0.00 (0.00–9.42)
2010	0	0.51	0.00 (0.00–7.14)
2009	0	0.69	0.00 (0.00–5.35)
JEANES HOSPITAL (11459)			
2011	0	0.12	0.00 (0.00–31.69)
2010	0	0.35	0.00 (0.00–10.56)
2009	0	0.35	0.00 (0.00–10.34)

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Table 4.5.8 – Rate of SSIs (SIR) — Cardiac Procedures – Continued from previous page

	Number of SSIs (CARD)	Predicted Number of SSIs (CARD)	SIR (95% CI)
THE WASHINGTON HOSPITAL (11460)			
2011	0	0.75	0.00 (0.00–4.89)
2010	1	0.75	1.33 (0.02–7.38)
2009	0	0.62	0.00 (0.00–5.94)
UPMC ST MARGARET (11561)			
2011	0	0.00	0.00 (0.00–3,668.10)
2010	.	.	.
2009	.	.	.
DUBOIS REGIONAL MEDICAL CENTER (11606)			
2011	0	0.36	0.00 (0.00–10.29)
2010	0	0.52	0.00 (0.00–7.05)
2009	0	0.35	0.00 (0.00–10.46)
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)			
2011	0	0.68	0.00 (0.00–5.38)
2010	0	1.16	0.00 (0.00–3.17)
2009	0	1.13	0.00 (0.00–3.23)
UPMC HORIZON (11675)			
2011	0	0.05	0.00 (0.00–78.91)
2010	.	.	.
2009	.	.	.
MERCY FITZGERALD HOSPITAL (11683)			
2011	0	0.31	0.00 (0.00–11.95)
2010	0	0.27	0.00 (0.00–13.67)
2009	0	0.19	0.00 (0.00–19.63)
UPMC MCKEESPORT (11707)			
2011	0	0.01	0.00 (0.00–315.62)
2010	.	.	.
2009	.	.	.
THE GOOD SAMARITAN HOSPITAL (11712)			
2011	0	0.01	0.00 (0.00–315.62)
2010	0	0.02	0.00 (0.00–156.54)
2009	0	0.40	0.00 (0.00–9.14)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)			
2011	0	0.32	0.00 (0.00–11.48)
2010	0	0.41	0.00 (0.00–9.05)
2009	0	0.50	0.00 (0.00–7.28)
BUTLER MEMORIAL HOSPITAL (11736)			
2011	0	0.74	0.00 (0.00–4.96)
2010	1	0.56	1.80 (0.02–10.00)
2009	0	0.63	0.00 (0.00–5.80)
MAIN LINE HOSPITAL — PAOLI (11750)			
2011	0	0.36	0.00 (0.00–10.29)
2010	2	0.31	6.36 (0.71–22.95)
2009	0	0.26	0.00 (0.00–14.15)
HERITAGE VALLEY BEAVER (11831)			
2011	0	0.83	0.00 (0.00–4.44)
2010	3	1.11	2.71 (0.55–7.93)
2009	1	1.18	0.85 (0.01–4.72)
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)			
2011	0	0.14	0.00 (0.00–26.67)
2010	0	0.27	0.00 (0.00–13.49)
2009	0	0.40	0.00 (0.00–9.25)
ABINGTON MEMORIAL HOSPITAL (11838)			
2011	0	1.44	0.00 (0.00–2.55)
2010	0	1.19	0.00 (0.00–3.08)
2009	2	1.16	1.72 (0.19–6.22)

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Table 4.5.8 – Rate of SSIs (SIR) — Cardiac Procedures – Continued from previous page

	Number of SSIs (CARD)	Predicted Number of SSIs (CARD)	SIR (95% CI)
CROZER CHESTER MEDICAL CENTER (11839)			
2011	0	0.63	0.00 (0.00–5.81)
2010	0	0.54	0.00 (0.00–6.85)
2009	0	0.33	0.00 (0.00–11.12)
ST. MARY MEDICAL CENTER (11885)			
2011	0	0.75	0.00 (0.00–4.87)
2010	2	0.65	3.08 (0.35–11.13)
2009	1	0.35	2.84 (0.04–15.81)
LEHIGH VALLEY HOSPITAL — MUHLENBERG (11898)			
2011	0	0.59	0.00 (0.00–6.18)
2010	0	0.75	0.00 (0.00–4.88)
2009	1	0.74	1.36 (0.02–7.55)
GEISINGER-COMMUNITY MEDICAL CENTER (11914)			
2011	0	0.34	0.00 (0.00–10.93)
2010	0	0.23	0.00 (0.00–15.73)
2009	0	0.82	0.00 (0.00–4.50)
WILKES-BARRE GENERAL HOSPITAL (11916)			
2011	0	0.72	0.00 (0.00–5.10)
2010	1	0.53	1.88 (0.02–10.46)
2009	0	0.81	0.00 (0.00–4.55)
BRANDYWINE HOSPITAL (11979)			
2011	0	0.21	0.00 (0.00–17.62)
2010	0	0.15	0.00 (0.00–23.70)
2009	0	0.12	0.00 (0.00–29.39)
SHARON REGIONAL HEALTH SYSTEM (12250)			
2011	0	0.23	0.00 (0.00–15.98)
2010	0	0.25	0.00 (0.00–14.61)
2009	0	0.13	0.00 (0.00–27.86)
LANCASTER REGIONAL MEDICAL CENTER (12335)			
2011	0	0.37	0.00 (0.00–9.94)
2010	1	0.29	3.40 (0.04–18.92)
2009	0	0.07	0.00 (0.00–52.03)
TEMPLE UNIVERSITY HOSPITAL (12382)			
2011	0	0.56	0.00 (0.00–6.52)
2010	0	0.98	0.00 (0.00–3.73)
2009	2	0.90	2.23 (0.25–8.04)
HOLY SPIRIT HOSPITAL (12387)			
2011	0	0.78	0.00 (0.00–4.69)
2010	0	0.96	0.00 (0.00–3.83)
2009	0	0.69	0.00 (0.00–5.31)
REGIONAL HOSPITAL OF SCRANTON (12533)			
2011	0	1.11	0.00 (0.00–3.30)
2010	4	1.64	2.44 (0.66–6.26)
2009	0	1.89	0.00 (0.00–1.94)
LEHIGH VALLEY HOSPITAL (11884)			
2011	1	3.79	0.26 (0.00–1.47)
2010	2	2.87	0.70 (0.08–2.51)
2009	0	2.96	0.00 (0.00–1.24)
PINNACLE HEALTH HOSPITALS (10122)			
2011	1	2.67	0.37 (0.00–2.09)
2010	2	1.39	1.44 (0.16–5.21)
2009	2	1.15	1.74 (0.20–6.30)
UPMC PASSAVANT (11242)			
2011	1	1.54	0.65 (0.01–3.60)
2010	2	2.30	0.87 (0.10–3.14)
2009	0	2.11	0.00 (0.00–1.74)

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Table 4.5.8 – Rate of SSIs (SIR) — Cardiac Procedures – Continued from previous page

	Number of SSIs (CARD)	Predicted Number of SSIs (CARD)	SIR (95% CI)
UPMC PRESBYTERIAN SHADYSIDE — SHADYSIDE (10118)			
2011	3	4.45	0.67 (0.14–1.97)
2010	0	3.01	0.00 (0.00–1.22)
2009	11	3.42	3.22 (1.61–5.76)
ST. VINCENT HEALTH CENTER (11699)			
2011	1	1.46	0.69 (0.01–3.82)
2010	0	1.72	0.00 (0.00–2.13)
2009	1	1.63	0.61 (0.01–3.41)
JEFFERSON REGIONAL MEDICAL CENTER (10237)			
2011	1	1.40	0.72 (0.01–3.98)
2010	1	1.64	0.61 (0.01–3.39)
2009	1	1.92	0.52 (0.01–2.90)
HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)			
2011	8	10.68	0.75 (0.32–1.48)
2010	5	10.26	0.49 (0.16–1.14)
2009	8	9.13	0.88 (0.38–1.73)
MILTON S HERSHEY MEDICAL CENTER (11747)			
2011	3	3.97	0.76 (0.15–2.21)
2010	6	3.83	1.57 (0.57–3.41)
2009	3	3.89	0.77 (0.15–2.25)
LANCASTER GENERAL HOSPITAL (10183)			
2011	1	1.30	0.77 (0.01–4.27)
2010	3	1.37	2.19 (0.44–6.41)
2009	0	1.57	0.00 (0.00–2.34)
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)			
2011	2	2.51	0.80 (0.09–2.88)
2010	5	2.34	2.13 (0.69–4.98)
2009	3	2.81	1.07 (0.21–3.12)
ST. LUKES HOSPITAL BETHLEHEM (11718)			
2011	1	1.15	0.87 (0.01–4.83)
2010	0	1.37	0.00 (0.00–2.69)
2009	0	1.22	0.00 (0.00–3.02)
DOYLESTOWN HOSPITAL (10190)			
2011	1	1.06	0.94 (0.01–5.24)
2010	0	1.20	0.00 (0.00–3.07)
2009	1	1.66	0.60 (0.01–3.36)
PENN PRESBYTERIAN MEDICAL CENTER (11814)			
2011	4	4.01	1.00 (0.27–2.56)
2010	2	3.59	0.56 (0.06–2.01)
2009	1	4.19	0.24 (0.00–1.33)
CHESTER COUNTY HOSPITAL (12016)			
2011	1	0.83	1.20 (0.02–6.67)
2010	0	0.60	0.00 (0.00–6.11)
2009	0	0.57	0.00 (0.00–6.44)
UPMC PRESBYTERIAN SHADYSIDE — PRESBYTERIAN (10348)			
2011	5	3.88	1.29 (0.42–3.01)
2010	8	2.46	3.25 (1.40–6.40)
2009	4	2.62	1.52 (0.41–3.90)
UPMC HAMOT (11725)			
2011	2	1.37	1.46 (0.16–5.27)
2010	1	0.89	1.13 (0.01–6.28)
2009	2	0.90	2.22 (0.25–8.01)
YORK HOSPITAL (10108)			
2011	3	1.87	1.61 (0.32–4.69)
2010	0	1.34	0.00 (0.00–2.74)
2009	3	1.60	1.87 (0.38–5.48)

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Table 4.5.8 – Rate of SSIs (SIR) — Cardiac Procedures – Continued from previous page

	Number of SSIs (CARD)	Predicted Number of SSIs (CARD)	SIR (95% CI)
GEISINGER MEDICAL CENTER (11775)			
2011	5	3.10	1.61 (0.52–3.76)
2010	1	2.99	0.33 (0.00–1.86)
2009	5	2.07	2.41 (0.78–5.63)
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)			
2011	10	5.56	1.80 (0.86–3.31)
2010	17	5.16	3.29 (1.92–5.27)
2009	17	2.11	8.07 (4.70–12.92)
EASTON HOSPITAL (11929)			
2011	1	0.51	1.96 (0.03–10.92)
2010	1	0.49	2.05 (0.03–11.39)
2009	3	0.50	6.02 (1.21–17.58)
ST. JOSEPH MEDICAL CENTER (11961)			
2011	1	0.41	2.43 (0.03–13.52)
2010	1	0.36	2.81 (0.04–15.61)
2009	0	0.47	0.00 (0.00–7.79)
MAIN LINE HOSPITAL BRYN MAWR (11753)			
2011	1	0.39	2.53 (0.03–14.10)
2010	1	0.49	2.03 (0.03–11.30)
2009	0	0.46	0.00 (0.00–7.90)
ROBERT PACKER HOSPITAL (12422)			
2011	3	1.12	2.68 (0.54–7.82)
2010	1	1.32	0.75 (0.01–4.20)
2009	0	1.45	0.00 (0.00–2.54)
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)			
2011	3	1.11	2.69 (0.54–7.86)
2010	2	0.88	2.28 (0.26–8.24)
2009	0	0.44	0.00 (0.00–8.27)
ST. CLAIR MEMORIAL HOSPITAL (10561)			
2011	2	0.66	3.02 (0.34–10.92)
2010	0	0.74	0.00 (0.00–4.95)
2009	1	0.94	1.06 (0.01–5.91)
THOMAS JEFFERSON UNIV HOSPITAL (11506)			
2011	5	1.63	3.07 (0.99–7.17)
2010	1	1.41	0.71 (0.01–3.94)
2009	1	1.92	0.52 (0.01–2.90)
READING HOSPITAL AND MEDICAL CENTER (12375)			
2011	3	0.83	3.62 (0.73–10.59)
2010	0	0.87	0.00 (0.00–4.20)
2009	2	0.78	2.57 (0.29–9.26)
CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)			
2011	9	2.13	4.22 (1.92–8.01)
2010	1	1.86	0.54 (0.01–2.98)
2009	1	2.75	0.36 (0.00–2.02)
POCONO MEDICAL CENTER (11772)			
2011	1	0.18	5.42 (0.07–30.16)
2010	1	0.14	7.33 (0.10–40.81)
2009	1	0.36	2.75 (0.04–15.31)
ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)			
2011	4	0.67	5.97 (1.61–15.29)
2010	1	0.72	1.39 (0.02–7.71)
2009	2	0.55	3.61 (0.41–13.05)
LOWER BUCKS HOSPITAL (12390)			
2011	1	0.06	17.81 (0.23–99.07)
2010	0	0.06	0.00 (0.00–58.91)
2009	0	0.14	0.00 (0.00–26.55)

Table 4.5.9: Rate (SIR) of Surgical Site Infections (SSIs) Associated with Coronary Bypass Surgery With Two Incisions (CBGB) by Hospital — Pennsylvania, 2009–2011

	Number of SSIs (CBGB)	Predicted Number of SSIs (CBGB)	SIR (95% CI)
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)			
2011	.	.	.
2010	0	0.02	0.00 (0.00–209.85)
2009	.	.	.
THE WESTERN PENNSYLVANIA HOSPITAL (11864)			
2011	.	.	.
2010	3	2.36	1.27 (0.26–3.72)
2009	6	4.44	1.35 (0.49–2.94)
ST. CLAIR MEMORIAL HOSPITAL (10561)			
2011	0	2.30	0.00 (0.00–1.60)
2010	1	2.88	0.35 (0.00–1.93)
2009	5	4.00	1.25 (0.40–2.92)
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)			
2011	0	3.39	0.00 (0.00–1.08)
2010	10	5.06	1.98 (0.95–3.64)
2009	5	6.84	0.73 (0.24–1.71)
MAIN LINE HOSPITAL BRYN MAWR (11753)			
2011	0	1.17	0.00 (0.00–3.14)
2010	0	1.25	0.00 (0.00–2.93)
2009	0	1.51	0.00 (0.00–2.43)
LEHIGH VALLEY HOSPITAL (11884)			
2011	0	8.61	0.00 (0.00–0.43)
2010	5	8.54	0.59 (0.19–1.37)
2009	6	10.80	0.56 (0.20–1.21)
LEHIGH VALLEY HOSPITAL — MUHLENBERG (11898)			
2011	0	1.95	0.00 (0.00–1.88)
2010	2	2.53	0.79 (0.09–2.86)
2009	1	3.12	0.32 (0.00–1.78)
GEISINGER-COMMUNITY MEDICAL CENTER (11914)			
2011	0	0.19	0.00 (0.00–19.33)
2010	2	1.15	1.74 (0.20–6.29)
2009	0	6.12	0.00 (0.00–0.60)
LOWER BUCKS HOSPITAL (12390)			
2011	0	0.51	0.00 (0.00–7.20)
2010	1	0.97	1.03 (0.01–5.74)
2009	0	1.04	0.00 (0.00–3.53)
REGIONAL HOSPITAL OF SCRANTON (12533)			
2011	0	2.65	0.00 (0.00–1.39)
2010	3	3.67	0.82 (0.16–2.39)
2009	3	4.51	0.66 (0.13–1.94)
PINNACLE HEALTH HOSPITALS (10122)			
2011	2	6.99	0.29 (0.03–1.03)
2010	9	8.00	1.12 (0.51–2.14)
2009	11	10.23	1.08 (0.54–1.92)
JEFFERSON REGIONAL MEDICAL CENTER (10237)			
2011	2	5.45	0.37 (0.04–1.33)
2010	2	6.48	0.31 (0.03–1.11)
2009	5	8.20	0.61 (0.20–1.42)
THE GOOD SAMARITAN HOSPITAL (11712)			
2011	1	2.49	0.40 (0.01–2.23)
2010	0	2.57	0.00 (0.00–1.43)
2009	4	4.02	1.00 (0.27–2.55)

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Table 4.5.9 – Rate of SSIs (SIR) — CBGB Procedures – Continued from previous page

	Number of SSIs (CBGB)	Predicted Number of SSIs (CBGB)	SIR (95% CI)
ST. LUKES HOSPITAL BETHLEHEM (11718)			
2011	1	2.22	0.45 (0.01–2.51)
2010	2	2.77	0.72 (0.08–2.61)
2009	0	3.40	0.00 (0.00–1.08)
WILKES-BARRE GENERAL HOSPITAL (11916)			
2011	2	4.33	0.46 (0.05–1.67)
2010	1	4.21	0.24 (0.00–1.32)
2009	1	5.80	0.17 (0.00–0.96)
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)			
2011	1	1.92	0.52 (0.01–2.90)
2010	5	2.05	2.44 (0.78–5.68)
2009	3	2.36	1.27 (0.26–3.72)
READING HOSPITAL AND MEDICAL CENTER (12375)			
2011	2	3.57	0.56 (0.06–2.02)
2010	1	3.95	0.25 (0.00–1.41)
2009	3	5.76	0.52 (0.10–1.52)
POCONO MEDICAL CENTER (11772)			
2011	2	3.26	0.61 (0.07–2.22)
2010	3	2.97	1.01 (0.20–2.95)
2009	1	3.39	0.30 (0.00–1.64)
CROZER CHESTER MEDICAL CENTER (11839)			
2011	1	1.56	0.64 (0.01–3.56)
2010	1	1.80	0.56 (0.01–3.10)
2009	2	2.11	0.95 (0.11–3.42)
ALTOONA REGIONAL HEALTH SYSTEM (10178)			
2011	2	3.07	0.65 (0.07–2.35)
2010	7	3.20	2.18 (0.88–4.50)
2009	8	4.57	1.75 (0.75–3.45)
FORBES REGIONAL HOSPITAL (11265)			
2011	2	3.04	0.66 (0.07–2.38)
2010	2	2.64	0.76 (0.08–2.73)
2009	1	2.68	0.37 (0.00–2.07)
MILTON S HERSHEY MEDICAL CENTER (11747)			
2011	3	4.28	0.70 (0.14–2.05)
2010	5	4.12	1.21 (0.39–2.83)
2009	3	5.10	0.59 (0.12–1.72)
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)			
2011	1	1.40	0.72 (0.01–3.98)
2010	1	1.49	0.67 (0.01–3.74)
2009	6	2.01	2.98 (1.09–6.49)
UPMC PRESBYTERIAN SHADYSIDE — SHADYSIDE (10118)			
2011	7	9.03	0.77 (0.31–1.60)
2010	7	8.84	0.79 (0.32–1.63)
2009	15	9.26	1.62 (0.91–2.67)
THE WASHINGTON HOSPITAL (11460)			
2011	2	2.52	0.79 (0.09–2.87)
2010	2	2.39	0.84 (0.09–3.02)
2009	1	3.51	0.29 (0.00–1.59)
BUTLER MEMORIAL HOSPITAL (11736)			
2011	4	5.00	0.80 (0.22–2.05)
2010	6	5.93	1.01 (0.37–2.20)
2009	6	5.72	1.05 (0.38–2.28)
ABINGTON MEMORIAL HOSPITAL (11838)			
2011	3	3.72	0.81 (0.16–2.36)
2010	3	2.83	1.06 (0.21–3.10)
2009	3	2.78	1.08 (0.22–3.16)

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Table 4.5.9 – Rate of SSIs (SIR) — CBGB Procedures – Continued from previous page

	Number of SSIs (CBGB)	Predicted Number of SSIs (CBGB)	SIR (95% CI)
ARIA HEALTH (11388)			
2011	2	2.44	0.82 (0.09–2.96)
2010	1	3.15	0.32 (0.00–1.77)
2009	7	3.82	1.83 (0.73–3.77)
ST. MARY MEDICAL CENTER (11885)			
2011	2	2.44	0.82 (0.09–2.96)
2010	4	3.00	1.33 (0.36–3.42)
2009	7	4.74	1.48 (0.59–3.04)
JEANES HOSPITAL (11459)			
2011	1	1.21	0.83 (0.01–4.60)
2010	0	1.41	0.00 (0.00–2.61)
2009	0	2.05	0.00 (0.00–1.79)
DOYLESTOWN HOSPITAL (10190)			
2011	2	2.33	0.86 (0.10–3.10)
2010	3	2.44	1.23 (0.25–3.59)
2009	3	3.27	0.92 (0.18–2.68)
UPMC PRESBYTERIAN SHADYSIDE — PRESBYTERIAN (10348)			
2011	5	5.76	0.87 (0.28–2.03)
2010	8	5.98	1.34 (0.58–2.64)
2009	10	8.74	1.14 (0.55–2.10)
MAIN LINE HOSPITAL — PAOLI (11750)			
2011	1	1.11	0.90 (0.01–5.00)
2010	1	1.39	0.72 (0.01–4.01)
2009	0	1.62	0.00 (0.00–2.27)
ST. VINCENT HEALTH CENTER (11699)			
2011	6	6.62	0.91 (0.33–1.97)
2010	7	7.45	0.94 (0.38–1.94)
2009	2	9.71	0.21 (0.02–0.74)
LANCASTER GENERAL HOSPITAL (10183)			
2011	7	7.52	0.93 (0.37–1.92)
2010	7	7.52	0.93 (0.37–1.92)
2009	10	11.67	0.86 (0.41–1.58)
HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)			
2011	8	8.49	0.94 (0.41–1.86)
2010	5	6.59	0.76 (0.24–1.77)
2009	8	7.75	1.03 (0.44–2.04)
HOLY SPIRIT HOSPITAL (12387)			
2011	4	4.13	0.97 (0.26–2.48)
2010	3	4.60	0.65 (0.13–1.91)
2009	11	6.49	1.70 (0.85–3.04)
PENN PRESBYTERIAN MEDICAL CENTER (11814)			
2011	5	4.79	1.04 (0.34–2.44)
2010	2	4.71	0.42 (0.05–1.53)
2009	15	7.21	2.08 (1.16–3.43)
CHESTER COUNTY HOSPITAL (12016)			
2011	2	1.84	1.09 (0.12–3.93)
2010	1	1.27	0.78 (0.01–4.36)
2009	2	1.65	1.21 (0.14–4.37)
CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)			
2011	3	2.75	1.09 (0.22–3.18)
2010	2	3.09	0.65 (0.07–2.34)
2009	0	4.00	0.00 (0.00–0.92)
EASTON HOSPITAL (11929)			
2011	3	2.68	1.12 (0.22–3.27)
2010	4	3.78	1.06 (0.28–2.71)
2009	7	4.04	1.73 (0.69–3.57)

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Table 4.5.9 – Rate of SSIs (SIR) — CBGB Procedures – Continued from previous page

	Number of SSIs (CBGB)	Predicted Number of SSIs (CBGB)	SIR (95% CI)
THOMAS JEFFERSON UNIV HOSPITAL (11506)			
2011	4	3.42	1.17 (0.31–2.99)
2010	6	2.50	2.40 (0.88–5.23)
2009	5	3.93	1.27 (0.41–2.97)
UPMC PASSAVANT (11242)			
2011	5	4.25	1.18 (0.38–2.75)
2010	3	5.24	0.57 (0.12–1.67)
2009	2	6.34	0.32 (0.04–1.14)
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)			
2011	6	5.05	1.19 (0.43–2.59)
2010	5	4.49	1.11 (0.36–2.60)
2009	2	5.37	0.37 (0.04–1.35)
HAHNEMANN UNIVERSITY HOSPITAL (11437)			
2011	2	1.66	1.20 (0.14–4.35)
2010	0	1.75	0.00 (0.00–2.09)
2009	1	3.09	0.32 (0.00–1.80)
YORK HOSPITAL (10108)			
2011	7	5.44	1.29 (0.52–2.65)
2010	4	4.53	0.88 (0.24–2.26)
2009	7	6.00	1.17 (0.47–2.41)
UPMC MERCY (10384)			
2011	5	3.54	1.41 (0.45–3.29)
2010	4	3.48	1.15 (0.31–2.94)
2009	7	5.15	1.36 (0.54–2.80)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)			
2011	2	1.40	1.42 (0.16–5.14)
2010	1	1.29	0.78 (0.01–4.32)
2009	9	2.26	3.99 (1.82–7.57)
SHARON REGIONAL HEALTH SYSTEM (12250)			
2011	2	1.31	1.53 (0.17–5.53)
2010	0	1.23	0.00 (0.00–2.98)
2009	4	1.61	2.48 (0.67–6.35)
UPMC HAMOT (11725)			
2011	7	4.51	1.55 (0.62–3.20)
2010	6	4.73	1.27 (0.46–2.76)
2009	10	4.11	2.43 (1.16–4.47)
HERITAGE VALLEY BEAVER (11831)			
2011	4	2.46	1.63 (0.44–4.17)
2010	12	2.79	4.31 (2.22–7.52)
2009	4	3.26	1.23 (0.33–3.14)
DUBOIS REGIONAL MEDICAL CENTER (11606)			
2011	4	2.45	1.63 (0.44–4.18)
2010	4	2.55	1.57 (0.42–4.01)
2009	8	3.28	2.44 (1.05–4.81)
MERCY FITZGERALD HOSPITAL (11683)			
2011	1	0.61	1.64 (0.02–9.12)
2010	0	0.83	0.00 (0.00–4.42)
2009	2	2.30	0.87 (0.10–3.14)
ROBERT PACKER HOSPITAL (12422)			
2011	4	2.22	1.80 (0.48–4.61)
2010	0	2.26	0.00 (0.00–1.62)
2009	1	2.87	0.35 (0.00–1.94)
TEMPLE UNIVERSITY HOSPITAL (12382)			
2011	3	1.62	1.85 (0.37–5.41)
2010	4	2.97	1.35 (0.36–3.45)
2009	5	2.69	1.86 (0.60–4.34)

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Table 4.5.9 – Rate of SSIs (SIR) — CBGB Procedures – Continued from previous page

	Number of SSIs (CBGB)	Predicted Number of SSIs (CBGB)	SIR (95% CI)
GEISINGER MEDICAL CENTER (11775)			
2011	9	4.38	2.05 (0.94–3.90)
2010	7	4.68	1.50 (0.60–3.08)
2009	7	4.09	1.71 (0.69–3.52)
ALLEGHENY GENERAL HOSPITAL (10648)			
2011	13	5.81	2.24 (1.19–3.83)
2010	2	4.24	0.47 (0.05–1.70)
2009	3	9.43	0.32 (0.06–0.93)
PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS (11448)			
2011	4	1.61	2.49 (0.67–6.36)
2010	8	2.65	3.02 (1.30–5.94)
2009	6	3.47	1.73 (0.63–3.77)
ST. JOSEPH MEDICAL CENTER (11961)			
2011	5	1.80	2.78 (0.89–6.48)
2010	3	1.65	1.82 (0.37–5.32)
2009	3	2.86	1.05 (0.21–3.06)
LANCASTER REGIONAL MEDICAL CENTER (12335)			
2011	5	1.20	4.16 (1.34–9.71)
2010	1	1.00	1.00 (0.01–5.54)
2009	1	0.73	1.38 (0.02–7.66)
ALBERT EINSTEIN MEDICAL CENTER (10585)			
2011	8	1.59	5.02 (2.16–9.89)
2010	5	1.28	3.90 (1.26–9.09)
2009	5	2.09	2.39 (0.77–5.57)
BRANDYWINE HOSPITAL (11979)			
2011	7	0.95	7.36 (2.95–15.16)
2010	1	0.81	1.23 (0.02–6.84)
2009	3	1.06	2.83 (0.57–8.27)

Table 4.5.10: Rate (SIR) of Surgical Site Infections (SSIs) Associated with Coronary Bypass Surgery With One Incision (CBGC) by Hospital — Pennsylvania, 2009–2011

	Number of SSIs (CBGC)	Predicted Number of SSIs (CBGC)	SIR (95% CI)
YORK HOSPITAL (10108)			
2011	.	.	.
2010	.	.	.
2009	0	0.61	0.00 (0.00–6.00)
ALTOONA REGIONAL HEALTH SYSTEM (10178)			
2011	.	.	.
2010	0	0.01	0.00 (0.00–266.30)
2009	.	.	.
HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)			
2011	.	.	.
2010	2	0.19	10.72 (1.20–38.69)
2009	2	0.07	30.73 (3.45–110.96)
THE GOOD SAMARITAN HOSPITAL (11712)			
2011	.	.	.
2010	0	0.01	0.00 (0.00–287.95)
2009	0	0.06	0.00 (0.00–59.26)
THE WESTERN PENNSYLVANIA HOSPITAL (11864)			
2011	.	.	.
2010	0	0.10	0.00 (0.00–38.46)
2009	0	0.13	0.00 (0.00–28.89)
TEMPLE UNIVERSITY HOSPITAL (12382)			
2011	.	.	.
2010	0	0.12	0.00 (0.00–29.59)
2009	1	0.04	24.42 (0.32–135.85)
LOWER BUCKS HOSPITAL (12390)			
2011	.	.	.
2010	0	0.08	0.00 (0.00–47.99)
2009	0	0.41	0.00 (0.00–8.86)
UPMC PRESBYTERIAN SHADYSIDE — SHADYSIDE (10118)			
2011	0	0.55	0.00 (0.00–6.69)
2010	1	0.62	1.62 (0.02–9.01)
2009	1	0.59	1.71 (0.02–9.50)
PINNACLE HEALTH HOSPITALS (10122)			
2011	0	0.76	0.00 (0.00–4.84)
2010	0	0.85	0.00 (0.00–4.32)
2009	6	1.97	3.04 (1.11–6.62)
DOYLESTOWN HOSPITAL (10190)			
2011	0	0.10	0.00 (0.00–38.03)
2010	1	0.07	14.52 (0.19–80.79)
2009	0	0.05	0.00 (0.00–67.17)
JEFFERSON REGIONAL MEDICAL CENTER (10237)			
2011	0	0.01	0.00 (0.00–276.52)
2010	0	0.11	0.00 (0.00–33.93)
2009	0	0.14	0.00 (0.00–26.87)
CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)			
2011	0	0.20	0.00 (0.00–18.11)
2010	0	0.17	0.00 (0.00–22.19)
2009	0	0.27	0.00 (0.00–13.75)
UPMC MERCY (10384)			
2011	0	0.23	0.00 (0.00–15.69)
2010	1	1.07	0.94 (0.01–5.22)
2009	1	0.60	1.67 (0.02–9.27)

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Table 4.5.10 – Rate of SSIs (SIR) — CBGC Procedures – Continued from previous page

	Number of SSIs (CBGC)	Predicted Number of SSIs (CBGC)	SIR (95% CI)
ST. CLAIR MEMORIAL HOSPITAL (10561)			
2011	0	0.05	0.00 (0.00–69.13)
2010	0	0.06	0.00 (0.00–66.58)
2009	0	0.01	0.00 (0.00–268.69)
UPMC PASSAVANT (11242)			
2011	0	0.27	0.00 (0.00–13.46)
2010	0	0.54	0.00 (0.00–6.76)
2009	0	0.76	0.00 (0.00–4.84)
FORBES REGIONAL HOSPITAL (11265)			
2011	0	0.13	0.00 (0.00–28.98)
2010	0	0.12	0.00 (0.00–29.84)
2009	0	0.10	0.00 (0.00–38.38)
ARIA HEALTH (11388)			
2011	0	0.37	0.00 (0.00–9.94)
2010	0	0.66	0.00 (0.00–5.59)
2009	1	0.78	1.28 (0.02–7.11)
HAHNEMANN UNIVERSITY HOSPITAL (11437)			
2011	0	0.09	0.00 (0.00–40.60)
2010	0	0.21	0.00 (0.00–17.46)
2009	0	0.20	0.00 (0.00–18.61)
PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS (11448)			
2011	0	0.05	0.00 (0.00–69.13)
2010	0	0.07	0.00 (0.00–54.07)
2009	1	0.01	73.25 (0.96–407.55)
JEANES HOSPITAL (11459)			
2011	0	0.03	0.00 (0.00–138.26)
2010	.	.	.
2009	0	0.05	0.00 (0.00–67.17)
THE WASHINGTON HOSPITAL (11460)			
2011	0	0.17	0.00 (0.00–21.27)
2010	0	0.22	0.00 (0.00–16.80)
2009	0	0.30	0.00 (0.00–12.18)
THOMAS JEFFERSON UNIV HOSPITAL (11506)			
2011	0	0.07	0.00 (0.00–54.42)
2010	0	0.17	0.00 (0.00–20.97)
2009	0	1.72	0.00 (0.00–2.13)
DUBOIS REGIONAL MEDICAL CENTER (11606)			
2011	0	0.10	0.00 (0.00–38.03)
2010	1	0.11	9.07 (0.12–50.49)
2009	0	0.05	0.00 (0.00–67.17)
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)			
2011	0	0.08	0.00 (0.00–46.09)
2010	1	0.23	4.33 (0.06–24.08)
2009	2	0.18	10.82 (1.22–39.08)
MERCY FITZGERALD HOSPITAL (11683)			
2011	0	0.16	0.00 (0.00–22.39)
2010	0	0.18	0.00 (0.00–20.72)
2009	0	0.12	0.00 (0.00–29.85)
ST. VINCENT HEALTH CENTER (11699)			
2011	0	0.10	0.00 (0.00–35.04)
2010	1	0.12	8.20 (0.11–45.64)
2009	0	0.16	0.00 (0.00–22.70)
ST. LUKES HOSPITAL BETHLEHEM (11718)			
2011	0	0.19	0.00 (0.00–19.38)
2010	0	0.10	0.00 (0.00–38.04)
2009	0	0.10	0.00 (0.00–38.38)

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Table 4.5.10 – Rate of SSIs (SIR) — CBGC Procedures – Continued from previous page

	Number of SSIs (CBGC)	Predicted Number of SSIs (CBGC)	SIR (95% CI)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)			
2011	0	0.03	0.00 (0.00–108.85)
2010	0	0.04	0.00 (0.00–91.05)
2009	0	0.06	0.00 (0.00–59.26)
BUTLER MEMORIAL HOSPITAL (11736)			
2011	0	0.21	0.00 (0.00–17.49)
2010	0	0.15	0.00 (0.00–24.54)
2009	1	0.21	4.79 (0.06–26.64)
MILTON S HERSHEY MEDICAL CENTER (11747)			
2011	0	0.25	0.00 (0.00–14.43)
2010	0	0.13	0.00 (0.00–27.24)
2009	1	1.85	0.54 (0.01–3.01)
MAIN LINE HOSPITAL — PAOLI (11750)			
2011	0	0.00	0.00 (0.00–1,023.40)
2010	0	0.08	0.00 (0.00–44.38)
2009	0	0.08	0.00 (0.00–48.55)
MAIN LINE HOSPITAL BRYN MAWR (11753)			
2011	0	0.03	0.00 (0.00–121.80)
2010	0	0.10	0.00 (0.00–38.04)
2009	0	0.11	0.00 (0.00–34.59)
GEISINGER MEDICAL CENTER (11775)			
2011	0	0.24	0.00 (0.00–15.00)
2010	1	0.32	3.11 (0.04–17.32)
2009	0	0.24	0.00 (0.00–15.47)
PENN PRESBYTERIAN MEDICAL CENTER (11814)			
2011	0	0.20	0.00 (0.00–18.67)
2010	2	0.46	4.37 (0.49–15.77)
2009	0	0.16	0.00 (0.00–23.30)
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)			
2011	0	0.07	0.00 (0.00–55.30)
2010	0	0.18	0.00 (0.00–20.48)
2009	0	0.32	0.00 (0.00–11.42)
ABINGTON MEMORIAL HOSPITAL (11838)			
2011	0	0.04	0.00 (0.00–92.17)
2010	0	0.23	0.00 (0.00–15.80)
2009	1	0.24	4.18 (0.05–23.24)
CROZER CHESTER MEDICAL CENTER (11839)			
2011	0	0.45	0.00 (0.00–8.08)
2010	0	0.68	0.00 (0.00–5.37)
2009	1	0.69	1.45 (0.02–8.08)
LEHIGH VALLEY HOSPITAL (11884)			
2011	0	0.57	0.00 (0.00–6.46)
2010	0	0.64	0.00 (0.00–5.76)
2009	2	0.29	6.80 (0.76–24.56)
ST. MARY MEDICAL CENTER (11885)			
2011	0	0.16	0.00 (0.00–23.04)
2010	1	0.16	6.09 (0.08–33.87)
2009	0	0.19	0.00 (0.00–19.52)
LEHIGH VALLEY HOSPITAL — MUHLENBERG (11898)			
2011	0	0.07	0.00 (0.00–52.47)
2010	0	0.05	0.00 (0.00–67.85)
2009	0	0.05	0.00 (0.00–67.17)
GEISINGER-COMMUNITY MEDICAL CENTER (11914)			
2011	0	1.70	0.00 (0.00–2.16)
2010	1	1.94	0.52 (0.01–2.87)
2009	3	2.01	1.49 (0.30–4.36)

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Table 4.5.10 – Rate of SSIs (SIR) — CBGC Procedures – Continued from previous page

	Number of SSIs (CBGC)	Predicted Number of SSIs (CBGC)	SIR (95% CI)
WILKES-BARRE GENERAL HOSPITAL (11916)			
2011	0	0.08	0.00 (0.00–46.09)
2010	0	0.11	0.00 (0.00–33.29)
2009	0	0.07	0.00 (0.00–53.74)
EASTON HOSPITAL (11929)			
2011	0	0.03	0.00 (0.00–138.26)
2010	.	.	.
2009	.	.	.
ST. JOSEPH MEDICAL CENTER (11961)			
2011	0	0.03	0.00 (0.00–108.85)
2010	0	0.01	0.00 (0.00–266.30)
2009	.	.	.
BRANDYWINE HOSPITAL (11979)			
2011	0	0.03	0.00 (0.00–138.26)
2010	0	0.12	0.00 (0.00–29.59)
2009	0	0.04	0.00 (0.00–89.56)
SHARON REGIONAL HEALTH SYSTEM (12250)			
2011	0	0.07	0.00 (0.00–52.47)
2010	0	0.01	0.00 (0.00–266.30)
2009	0	0.03	0.00 (0.00–134.34)
LANCASTER REGIONAL MEDICAL CENTER (12335)			
2011	0	0.00	0.00 (0.00–1,023.40)
2010	0	0.23	0.00 (0.00–15.78)
2009	0	0.17	0.00 (0.00–22.02)
READING HOSPITAL AND MEDICAL CENTER (12375)			
2011	0	0.04	0.00 (0.00–82.52)
2010	0	0.21	0.00 (0.00–17.13)
2009	0	0.09	0.00 (0.00–42.64)
ROBERT PACKER HOSPITAL (12422)			
2011	0	0.12	0.00 (0.00–29.83)
2010	0	0.10	0.00 (0.00–38.04)
2009	1	1.79	0.56 (0.01–3.12)
REGIONAL HOSPITAL OF SCRANTON (12533)			
2011	0	0.12	0.00 (0.00–29.83)
2010	0	0.41	0.00 (0.00–9.04)
2009	0	0.32	0.00 (0.00–11.61)
HOLY SPIRIT HOSPITAL (12387)			
2011	1	1.09	0.92 (0.01–5.12)
2010	0	0.45	0.00 (0.00–8.08)
2009	0	0.16	0.00 (0.00–22.26)
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)			
2011	1	0.81	1.24 (0.02–6.88)
2010	1	1.37	0.73 (0.01–4.07)
2009	0	1.58	0.00 (0.00–2.32)
UPMC HAMOT (11725)			
2011	3	2.02	1.48 (0.30–4.33)
2010	3	1.99	1.51 (0.30–4.41)
2009	1	2.56	0.39 (0.01–2.17)
ALLEGHENY GENERAL HOSPITAL (10648)			
2011	1	0.46	2.16 (0.03–11.99)
2010	0	0.49	0.00 (0.00–7.51)
2009	0	0.36	0.00 (0.00–10.11)
HERITAGE VALLEY BEAVER (11831)			
2011	1	0.33	3.07 (0.04–17.05)
2010	0	0.67	0.00 (0.00–5.48)
2009	0	2.42	0.00 (0.00–1.51)

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Table 4.5.10 – Rate of SSIs (SIR) — CBGC Procedures – Continued from previous page

	Number of SSIs (CBGC)	Predicted Number of SSIs (CBGC)	SIR (95% CI)
UPMC PRESBYTERIAN SHADYSIDE — PRESBYTERIAN (10348)			
2011	1	0.31	3.19 (0.04–17.76)
2010	0	0.35	0.00 (0.00–10.42)
2009	0	0.54	0.00 (0.00–6.76)
CHESTER COUNTY HOSPITAL (12016)			
2011	1	0.17	5.85 (0.08–32.54)
2010	1	0.41	2.42 (0.03–13.45)
2009	1	0.42	2.40 (0.03–13.33)
LANCASTER GENERAL HOSPITAL (10183)			
2011	3	0.42	7.11 (1.43–20.77)
2010	1	0.41	2.45 (0.03–13.64)
2009	0	0.31	0.00 (0.00–11.92)
ALBERT EINSTEIN MEDICAL CENTER (10585)			
2011	1	0.07	14.30 (0.19–79.59)
2010	0	0.16	0.00 (0.00–22.33)
2009	0	0.10	0.00 (0.00–36.80)
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)			
2011	1	0.04	23.05 (0.30–128.26)
2010	0	0.15	0.00 (0.00–24.89)
2009	0	0.07	0.00 (0.00–53.74)

Table 4.5.11: Rate (SIR) of Surgical Site Infections (SSIs) Associated with Knee Arthroplasty (KPRO) by Hospital — Pennsylvania, 2009–2011

	Number of SSIs (KPRO)	Predicted Number of SSIs (KPRO)	SIR (95% CI)
UNIONTOWN HOSPITAL (10441)			
2011	0	1.95	0.00 (0.00–1.88)
2010	7	2.37	2.96 (1.18–6.09)
2009	0	2.63	0.00 (0.00–1.39)
BERWICK HOSPITAL CENTER (11442)			
2011	0	1.20	0.00 (0.00–3.06)
2010	0	0.57	0.00 (0.00–6.42)
2009	1	0.66	1.52 (0.02–8.47)
JEANES HOSPITAL (11459)			
2011	0	1.39	0.00 (0.00–2.63)
2010	0	1.43	0.00 (0.00–2.57)
2009	0	1.23	0.00 (0.00–2.98)
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)			
2011	0	2.83	0.00 (0.00–1.30)
2010	0	2.92	0.00 (0.00–1.26)
2009	1	3.05	0.33 (0.00–1.82)
WAYNESBORO HOSPITAL (11642)			
2011	0	0.30	0.00 (0.00–12.41)
2010	0	0.46	0.00 (0.00–8.04)
2009	0	0.43	0.00 (0.00–8.46)
MERCY FITZGERALD HOSPITAL (11683)			
2011	0	0.41	0.00 (0.00–8.94)
2010	2	0.41	4.91 (0.55–17.74)
2009	0	0.42	0.00 (0.00–8.84)
SACRED HEART HOSPITAL (11684)			
2011	0	0.77	0.00 (0.00–4.77)
2010	4	1.08	3.71 (1.00–9.51)
2009	1	1.99	0.50 (0.01–2.80)
JERSEY SHORE HOSPITAL (11689)			
2011	0	0.19	0.00 (0.00–18.92)
2010	0	0.15	0.00 (0.00–24.21)
2009	0	0.15	0.00 (0.00–24.98)
UPMC MCKEESPORT (11707)			
2011	0	0.56	0.00 (0.00–6.50)
2010	1	0.44	2.25 (0.03–12.51)
2009	0	0.62	0.00 (0.00–5.95)
ST. LUKES QUAKERTOWN HOSPITAL (11711)			
2011	0	0.26	0.00 (0.00–14.30)
2010	1	0.32	3.10 (0.04–17.25)
2009	0	0.28	0.00 (0.00–13.03)
THE GOOD SAMARITAN HOSPITAL (11712)			
2011	0	2.13	0.00 (0.00–1.72)
2010	0	2.35	0.00 (0.00–1.56)
2009	0	2.68	0.00 (0.00–1.37)
GROVE CITY MEDICAL CENTER (11722)			
2011	0	0.28	0.00 (0.00–13.01)
2010	0	0.35	0.00 (0.00–10.35)
2009	0	0.68	0.00 (0.00–5.42)
J C BLAIR MEMORIAL HOSP (11724)			
2011	0	0.22	0.00 (0.00–16.39)
2010	.	.	.
2009	.	.	.

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Table 4.5.11 – Rate of SSIs (SIR) — KPRO Procedures – Continued from previous page

	Number of SSIs (KPRO)	Predicted Number of SSIs (KPRO)	SIR (95% CI)
TITUSVILLE AREA HOSPITAL (11738)			
2011	0	0.35	0.00 (0.00–10.51)
2010	0	0.10	0.00 (0.00–35.07)
2009	1	0.42	2.38 (0.03–13.26)
INDIANA REGIONAL MEDICAL CENTER (11759)			
2011	0	1.67	0.00 (0.00–2.20)
2010	0	2.02	0.00 (0.00–1.81)
2009	1	2.26	0.44 (0.01–2.46)
ELLWOOD CITY HOSPITAL (11779)			
2011	0	0.14	0.00 (0.00–26.74)
2010	0	0.31	0.00 (0.00–11.98)
2009	0	0.38	0.00 (0.00–9.69)
ST. LUKES MINERS MEMORIAL HOSPITAL (11784)			
2011	0	0.66	0.00 (0.00–5.53)
2010	1	1.12	0.89 (0.01–4.95)
2009	2	1.47	1.36 (0.15–4.90)
LEWISTOWN HOSPITAL (11825)			
2011	0	0.74	0.00 (0.00–4.95)
2010	0	0.57	0.00 (0.00–6.46)
2009	0	0.58	0.00 (0.00–6.33)
TYLER MEMORIAL HOSPITAL (11829)			
2011	0	0.02	0.00 (0.00–212.80)
2010	0	0.08	0.00 (0.00–44.19)
2009	0	0.06	0.00 (0.00–62.25)
PUNXSUTAWNEY AREA HOSPITAL (11830)			
2011	0	0.19	0.00 (0.00–18.91)
2010	0	0.41	0.00 (0.00–9.05)
2009	0	0.36	0.00 (0.00–10.26)
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)			
2011	0	0.89	0.00 (0.00–4.14)
2010	1	1.23	0.81 (0.01–4.51)
2009	1	1.28	0.78 (0.01–4.35)
CROZER CHESTER MEDICAL CENTER (11839)			
2011	0	1.63	0.00 (0.00–2.25)
2010	2	1.68	1.19 (0.13–4.31)
2009	3	1.85	1.62 (0.33–4.74)
ALLEGHENY VALLEY HOSPITAL (11842)			
2011	0	1.15	0.00 (0.00–3.19)
2010	5	1.54	3.24 (1.04–7.56)
2009	3	1.54	1.95 (0.39–5.68)
CLEARFIELD HOSPITAL (11843)			
2011	0	0.61	0.00 (0.00–6.01)
2010	0	0.43	0.00 (0.00–8.49)
2009	0	0.58	0.00 (0.00–6.37)
GRAND VIEW HOSPITAL (11847)			
2011	0	1.92	0.00 (0.00–1.91)
2010	2	2.34	0.85 (0.10–3.08)
2009	2	2.33	0.86 (0.10–3.10)
CROZER CHESTER MEDICAL CENTER SPRINGFIELD (11851)			
2011	0	0.01	0.00 (0.00–425.61)
2010	0	0.04	0.00 (0.00–89.43)
2009	0	0.17	0.00 (0.00–21.79)
ELK REGIONAL HEALTH CENTER (11859)			
2011	0	0.61	0.00 (0.00–6.06)
2010	0	0.98	0.00 (0.00–3.74)
2009	0	0.76	0.00 (0.00–4.84)

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Table 4.5.11 – Rate of SSIs (SIR) — KPRO Procedures – Continued from previous page

	Number of SSIs (KPRO)	Predicted Number of SSIs (KPRO)	SIR (95% CI)
THE WESTERN PENNSYLVANIA HOSPITAL (11864)			
2011	0	0.02	0.00 (0.00–170.46)
2010	1	0.95	1.06 (0.01–5.88)
2009	1	1.81	0.55 (0.01–3.08)
HAZLETON GENERAL HOSPITAL (11878)			
2011	0	0.44	0.00 (0.00–8.24)
2010	0	0.56	0.00 (0.00–6.52)
2009	0	0.78	0.00 (0.00–4.68)
HIGHLANDS HOSPITAL (11902)			
2011	0	0.05	0.00 (0.00–77.43)
2010	0	0.14	0.00 (0.00–26.58)
2009	0	0.09	0.00 (0.00–39.04)
NASON HOSPITAL (11907)			
2011	0	0.26	0.00 (0.00–13.98)
2010	0	0.37	0.00 (0.00–9.94)
2009	0	0.36	0.00 (0.00–10.20)
GEISINGER-COMMUNITY MEDICAL CENTER (11914)			
2011	0	3.95	0.00 (0.00–0.93)
2010	5	4.48	1.11 (0.36–2.60)
2009	2	4.33	0.46 (0.05–1.67)
CROZER CHESTER MEDICAL CENTER TAYLOR (11932)			
2011	0	0.45	0.00 (0.00–8.08)
2010	0	0.73	0.00 (0.00–5.03)
2009	0	1.14	0.00 (0.00–3.23)
SOUTHWEST REGIONAL MEDICAL CENTER (11942)			
2011	0	0.21	0.00 (0.00–17.77)
2010	0	0.15	0.00 (0.00–24.21)
2009	1	0.31	3.25 (0.04–18.10)
MERCY PHILADELPHIA HOSPITAL (11946)			
2011	0	0.24	0.00 (0.00–15.49)
2010	0	0.19	0.00 (0.00–19.14)
2009	1	0.14	7.01 (0.09–39.03)
JAMESON MEMORIAL HOSPITAL (11954)			
2011	0	0.92	0.00 (0.00–3.97)
2010	1	1.79	0.56 (0.01–3.12)
2009	3	1.92	1.56 (0.31–4.56)
ST. JOSEPH MEDICAL CENTER (11961)			
2011	0	0.99	0.00 (0.00–3.72)
2010	1	1.22	0.82 (0.01–4.54)
2009	1	1.15	0.87 (0.01–4.85)
POTTSTOWN MEMORIAL MEDICAL CENTER (11983)			
2011	0	2.57	0.00 (0.00–1.43)
2010	3	2.77	1.08 (0.22–3.17)
2009	0	2.72	0.00 (0.00–1.35)
ARMSTRONG COUNTY MEMORIAL HOSPITAL (12057)			
2011	0	1.40	0.00 (0.00–2.63)
2010	0	1.79	0.00 (0.00–2.05)
2009	0	1.30	0.00 (0.00–2.82)
LOCK HAVEN HOSPITAL (12097)			
2011	0	0.14	0.00 (0.00–25.33)
2010	0	0.04	0.00 (0.00–82.98)
2009	.	.	.
SUNBURY COMMUNITY HOSPITAL (12105)			
2011	0	0.41	0.00 (0.00–8.91)
2010	2	0.25	8.06 (0.91–29.10)
2009	1	0.30	3.34 (0.04–18.58)

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Table 4.5.11 – Rate of SSIs (SIR) — KPRO Procedures – Continued from previous page

	Number of SSIs (KPRO)	Predicted Number of SSIs (KPRO)	SIR (95% CI)
KANE COMMUNITY HOSPITAL (12111)			
2011	0	0.20	0.00 (0.00–18.25)
2010	.	.	.
2009	0	0.24	0.00 (0.00–15.42)
WARREN GENERAL HOSPITAL (12216)			
2011	0	0.84	0.00 (0.00–4.35)
2010	0	0.86	0.00 (0.00–4.26)
2009	1	0.80	1.24 (0.02–6.92)
SHRINERS HOSPITAL FOR CHILDREN — PHILADELPHIA (12244)			
2011	0	0.02	0.00 (0.00–212.80)
2010	.	.	.
2009	.	.	.
MILLCREEK COMMUNITY HOSPITAL (12253)			
2011	0	0.53	0.00 (0.00–6.94)
2010	0	0.43	0.00 (0.00–8.47)
2009	0	0.33	0.00 (0.00–11.05)
SOMERSET HOSPITAL (12282)			
2011	0	0.25	0.00 (0.00–14.70)
2010	0	0.50	0.00 (0.00–7.39)
2009	1	1.10	0.91 (0.01–5.08)
MINERS MEDICAL CENTER (12295)			
2011	0	0.26	0.00 (0.00–14.14)
2010	0	0.06	0.00 (0.00–58.98)
2009	0	0.07	0.00 (0.00–50.94)
OHIO VALLEY GENERAL HOSPITAL (12298)			
2011	0	0.47	0.00 (0.00–7.73)
2010	1	0.94	1.07 (0.01–5.93)
2009	0	0.59	0.00 (0.00–6.25)
JENNERSVILLE REGIONAL HOSPITAL (12337)			
2011	0	0.09	0.00 (0.00–38.63)
2010	0	0.09	0.00 (0.00–39.32)
2009	0	0.07	0.00 (0.00–49.20)
EASTERN REGIONAL MEDICAL CENTER (12348)			
2011	0	0.01	0.00 (0.00–425.61)
2010	.	.	.
2009	.	.	.
BRADFORD REGIONAL MEDICAL CENTER (12361)			
2011	0	0.19	0.00 (0.00–19.77)
2010	0	0.10	0.00 (0.00–35.52)
2009	0	0.26	0.00 (0.00–13.98)
TEMPLE UNIVERSITY HOSPITAL (12382)			
2011	0	2.79	0.00 (0.00–1.31)
2010	2	2.93	0.68 (0.08–2.47)
2009	8	2.66	3.00 (1.29–5.92)
LOWER BUCKS HOSPITAL (12390)			
2011	0	0.42	0.00 (0.00–8.66)
2010	1	0.64	1.57 (0.02–8.74)
2009	1	0.51	1.95 (0.03–10.84)
PALMERTON HOSPITAL (12396)			
2011	0	0.44	0.00 (0.00–8.34)
2010	0	0.52	0.00 (0.00–7.02)
2009	1	0.47	2.12 (0.03–11.78)
BARNES-KASSON COUNTY HOSPITAL (12404)			
2011	0	0.06	0.00 (0.00–60.86)
2010	0	0.03	0.00 (0.00–117.96)
2009	.	.	.

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Table 4.5.11 – Rate of SSIs (SIR) — KPRO Procedures – Continued from previous page

	Number of SSIs (KPRO)	Predicted Number of SSIs (KPRO)	SIR (95% CI)
BROOKVILLE HOSPITAL (12418)			
2011	0	0.02	0.00 (0.00–213.49)
2010	0	0.14	0.00 (0.00–27.12)
2009	0	0.12	0.00 (0.00–29.91)
WESTFIELD HOSPITAL (12487)			
2011	0	0.10	0.00 (0.00–35.34)
2010	0	0.01	0.00 (0.00–254.07)
2009	0	0.01	0.00 (0.00–390.41)
EDGEWOOD SURGICAL HOSPITAL (12552)			
2011	0	0.75	0.00 (0.00–4.86)
2010	0	0.82	0.00 (0.00–4.45)
2009	0	0.77	0.00 (0.00–4.74)
HEART OF LANCASTER REGIONAL MEDICAL CENTER (12571)			
2011	0	0.13	0.00 (0.00–29.31)
2010	1	0.05	19.13 (0.25–106.45)
2009	1	0.02	45.64 (0.60–253.93)
BUCKS COUNTY SPECIALTY HOSPITAL (15202)			
2011	0	1.27	0.00 (0.00–2.88)
2010	0	0.71	0.00 (0.00–5.16)
2009	.	.	.
PHYSICIANS CARE SURGICAL HOSPITAL (19630)			
2011	0	0.35	0.00 (0.00–10.36)
2010	.	.	.
2009	.	.	.
READING HOSPITAL AND MEDICAL CENTER (12375)			
2011	1	5.22	0.19 (0.00–1.07)
2010	2	5.69	0.35 (0.04–1.27)
2009	2	6.25	0.32 (0.04–1.15)
CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)			
2011	1	4.25	0.24 (0.00–1.31)
2010	2	5.22	0.38 (0.04–1.38)
2009	6	5.24	1.15 (0.42–2.49)
UPMC ST MARGARET (11561)			
2011	2	6.21	0.32 (0.04–1.16)
2010	5	7.20	0.69 (0.22–1.62)
2009	3	7.54	0.40 (0.08–1.16)
ST. MARY MEDICAL CENTER (11885)			
2011	1	2.96	0.34 (0.00–1.88)
2010	4	3.53	1.13 (0.31–2.90)
2009	8	3.60	2.22 (0.96–4.38)
ADVANCED SURGICAL HOSPITAL (16317)			
2011	1	2.67	0.37 (0.00–2.09)
2010	.	.	.
2009	.	.	.
MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)			
2011	3	6.33	0.47 (0.10–1.38)
2010	2	5.28	0.38 (0.04–1.37)
2009	0	4.70	0.00 (0.00–0.78)
DOYLESTOWN HOSPITAL (10190)			
2011	1	2.04	0.49 (0.01–2.72)
2010	1	2.42	0.41 (0.01–2.30)
2009	0	2.16	0.00 (0.00–1.70)
UPMC PASSAVANT (11242)			
2011	2	3.93	0.51 (0.06–1.84)
2010	2	4.06	0.49 (0.06–1.78)
2009	1	3.88	0.26 (0.00–1.43)

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Table 4.5.11 – Rate of SSIs (SIR) — KPRO Procedures – Continued from previous page

	Number of SSIs (KPRO)	Predicted Number of SSIs (KPRO)	SIR (95% CI)
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)			
2011	1	1.95	0.51 (0.01–2.85)
2010	2	2.35	0.85 (0.10–3.07)
2009	6	2.72	2.21 (0.81–4.80)
SHARON REGIONAL HEALTH SYSTEM (12250)			
2011	1	1.87	0.53 (0.01–2.98)
2010	2	2.32	0.86 (0.10–3.11)
2009	1	2.81	0.36 (0.00–1.98)
LEHIGH VALLEY HOSPITAL (11884)			
2011	4	7.25	0.55 (0.15–1.41)
2010	8	8.89	0.90 (0.39–1.77)
2009	7	7.21	0.97 (0.39–2.00)
ALLEGHENY GENERAL HOSPITAL (10648)			
2011	4	7.13	0.56 (0.15–1.44)
2010	5	7.33	0.68 (0.22–1.59)
2009	3	8.54	0.35 (0.07–1.03)
MAIN LINE HOSPITAL BRYN MAWR (11753)			
2011	4	7.10	0.56 (0.15–1.44)
2010	6	6.98	0.86 (0.31–1.87)
2009	3	7.05	0.43 (0.09–1.24)
ROBERT PACKER HOSPITAL (12422)			
2011	2	3.53	0.57 (0.06–2.04)
2010	0	3.31	0.00 (0.00–1.11)
2009	0	4.68	0.00 (0.00–0.78)
ST. VINCENT HEALTH CENTER (11699)			
2011	2	3.49	0.57 (0.06–2.07)
2010	1	3.29	0.30 (0.00–1.69)
2009	0	3.00	0.00 (0.00–1.22)
GEISINGER MEDICAL CENTER (11775)			
2011	2	3.25	0.62 (0.07–2.22)
2010	15	4.24	3.54 (1.98–5.84)
2009	12	3.63	3.30 (1.70–5.77)
EASTON HOSPITAL (11929)			
2011	1	1.61	0.62 (0.01–3.47)
2010	6	1.48	4.04 (1.48–8.80)
2009	4	1.96	2.05 (0.55–5.24)
COORDINATED HEALTH ORTHOPEDIC HOSPITAL, LLC (11872)			
2011	3	4.74	0.63 (0.13–1.85)
2010	5	4.38	1.14 (0.37–2.67)
2009	7	4.35	1.61 (0.64–3.31)
PINNACLE HEALTH HOSPITALS (10122)			
2011	9	13.94	0.65 (0.29–1.23)
2010	17	14.53	1.17 (0.68–1.87)
2009	15	15.12	0.99 (0.55–1.64)
SURGICAL INSTITUTE OF READING (12535)			
2011	1	1.55	0.65 (0.01–3.60)
2010	0	2.14	0.00 (0.00–1.72)
2009	0	2.39	0.00 (0.00–1.54)
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)			
2011	3	4.31	0.70 (0.14–2.04)
2010	1	3.54	0.28 (0.00–1.57)
2009	1	2.31	0.43 (0.01–2.41)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)			
2011	4	5.73	0.70 (0.19–1.79)
2010	3	5.68	0.53 (0.11–1.54)
2009	6	4.97	1.21 (0.44–2.63)

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Table 4.5.11 – Rate of SSIs (SIR) — KPRO Procedures – Continued from previous page

	Number of SSIs (KPRO)	Predicted Number of SSIs (KPRO)	SIR (95% CI)
HANOVER HOSPITAL (11899)			
2011	1	1.42	0.70 (0.01–3.92)
2010	4	2.69	1.49 (0.40–3.80)
2009	2	3.10	0.65 (0.07–2.33)
CHAMBERSBURG HOSPITAL (11913)			
2011	3	4.25	0.71 (0.14–2.06)
2010	13	5.42	2.40 (1.27–4.10)
2009	11	4.71	2.33 (1.16–4.18)
NAZARETH HOSPITAL (11919)			
2011	1	1.41	0.71 (0.01–3.93)
2010	1	1.56	0.64 (0.01–3.56)
2009	2	2.71	0.74 (0.08–2.67)
EVANGELICAL COMMUNITY HOSPITAL (11701)			
2011	2	2.76	0.73 (0.08–2.62)
2010	6	3.09	1.94 (0.71–4.22)
2009	4	3.17	1.26 (0.34–3.23)
MEADVILLE MEDICAL CENTER (11583)			
2011	3	4.11	0.73 (0.15–2.13)
2010	6	4.75	1.26 (0.46–2.75)
2009	0	3.31	0.00 (0.00–1.11)
FORBES REGIONAL HOSPITAL (11265)			
2011	2	2.64	0.76 (0.09–2.73)
2010	2	2.64	0.76 (0.08–2.73)
2009	1	1.93	0.52 (0.01–2.89)
ALTOONA REGIONAL HEALTH SYSTEM (10178)			
2011	3	3.95	0.76 (0.15–2.22)
2010	3	4.66	0.64 (0.13–1.88)
2009	1	5.43	0.18 (0.00–1.02)
HERITAGE VALLEY SEWICKLEY (10375)			
2011	4	5.25	0.76 (0.20–1.95)
2010	1	5.76	0.17 (0.00–0.97)
2009	3	5.93	0.51 (0.10–1.48)
REGIONAL HOSPITAL OF SCRANTON (12533)			
2011	2	2.46	0.81 (0.09–2.93)
2010	3	3.26	0.92 (0.19–2.69)
2009	6	3.88	1.55 (0.56–3.37)
EXCELA HEALTH LATROBE HOSPITAL (11651)			
2011	1	1.23	0.81 (0.01–4.52)
2010	0	1.29	0.00 (0.00–2.84)
2009	1	1.37	0.73 (0.01–4.08)
SURGICAL SPECIALTY CENTER AT COORDINATED HEALTH, THE (15259)			
2011	2	2.46	0.81 (0.09–2.94)
2010	1	2.49	0.40 (0.01–2.23)
2009	.	.	.
ABINGTON MEMORIAL HOSPITAL (11838)			
2011	4	4.64	0.86 (0.23–2.21)
2010	4	5.89	0.68 (0.18–1.74)
2009	2	5.74	0.35 (0.04–1.26)
LANSDALE HOSPITAL (12032)			
2011	1	1.13	0.88 (0.01–4.91)
2010	0	0.45	0.00 (0.00–8.21)
2009	0	0.71	0.00 (0.00–5.19)
UPMC MERCY (10384)			
2011	2	2.17	0.92 (0.10–3.33)
2010	6	2.71	2.22 (0.81–4.82)
2009	1	1.77	0.56 (0.01–3.14)

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Table 4.5.11 – Rate of SSIs (SIR) — KPRO Procedures – Continued from previous page

	Number of SSIs (KPRO)	Predicted Number of SSIs (KPRO)	SIR (95% CI)
HAHNEMANN UNIVERSITY HOSPITAL (11437)			
2011	1	1.03	0.97 (0.01–5.42)
2010	0	0.99	0.00 (0.00–3.71)
2009	1	0.96	1.04 (0.01–5.77)
YORK HOSPITAL (10108)			
2011	2	2.04	0.98 (0.11–3.54)
2010	2	4.15	0.48 (0.05–1.74)
2009	3	5.10	0.59 (0.12–1.72)
SCHUYLKILL MEDICAL CENTER — EAST NORWEGIAN STREET (11922)			
2011	1	1.02	0.98 (0.01–5.48)
2010	1	0.74	1.36 (0.02–7.57)
2009	3	1.05	2.85 (0.57–8.33)
MOUNT NITTANY MEDICAL CENTER (11797)			
2011	7	6.57	1.07 (0.43–2.20)
2010	12	6.74	1.78 (0.92–3.11)
2009	10	7.01	1.43 (0.68–2.63)
HERITAGE VALLEY BEAVER (11831)			
2011	2	1.84	1.09 (0.12–3.93)
2010	4	2.02	1.98 (0.53–5.06)
2009	2	2.16	0.93 (0.10–3.35)
WILKES-BARRE GENERAL HOSPITAL (11916)			
2011	3	2.74	1.09 (0.22–3.19)
2010	1	3.34	0.30 (0.00–1.67)
2009	1	3.42	0.29 (0.00–1.63)
BUTLER MEMORIAL HOSPITAL (11736)			
2011	3	2.64	1.14 (0.23–3.32)
2010	1	2.66	0.38 (0.00–2.09)
2009	4	2.98	1.34 (0.36–3.44)
CHESTER COUNTY HOSPITAL (12016)			
2011	2	1.75	1.14 (0.13–4.13)
2010	1	2.12	0.47 (0.01–2.62)
2009	3	2.22	1.35 (0.27–3.95)
MERCY SUBURBAN HOSPITAL NORRISTOWN (11952)			
2011	1	0.85	1.18 (0.02–6.58)
2010	4	1.00	4.01 (1.08–10.27)
2009	1	1.12	0.89 (0.01–4.97)
ST. LUKES HOSPITAL BETHLEHEM (11718)			
2011	3	2.53	1.18 (0.24–3.46)
2010	4	3.36	1.19 (0.32–3.04)
2009	5	3.42	1.46 (0.47–3.41)
LANCASTER GENERAL HOSPITAL (10183)			
2011	11	8.83	1.25 (0.62–2.23)
2010	7	10.47	0.67 (0.27–1.38)
2009	9	11.12	0.81 (0.37–1.54)
HOLY SPIRIT HOSPITAL (12387)			
2011	3	2.39	1.26 (0.25–3.67)
2010	1	2.31	0.43 (0.01–2.41)
2009	5	2.64	1.89 (0.61–4.42)
UPMC PRESBYTERIAN SHADYSIDE — SHADYSIDE (10118)			
2011	14	10.96	1.28 (0.70–2.14)
2010	6	10.09	0.59 (0.22–1.29)
2009	11	10.88	1.01 (0.50–1.81)
UPMC HORIZON (11675)			
2011	4	3.10	1.29 (0.35–3.31)
2010	5	3.41	1.46 (0.47–3.42)
2009	3	2.95	1.02 (0.20–2.97)

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Table 4.5.11 – Rate of SSIs (SIR) — KPRO Procedures – Continued from previous page

	Number of SSIs (KPRO)	Predicted Number of SSIs (KPRO)	SIR (95% CI)
CANONSBURG GENERAL HOSPITAL (11586)			
2011	3	2.26	1.33 (0.27–3.88)
2010	5	2.98	1.68 (0.54–3.92)
2009	6	2.29	2.62 (0.96–5.70)
GEISINGER-BLOOMSBURG HOSPITAL (12008)			
2011	1	0.72	1.39 (0.02–7.74)
2010	0	1.20	0.00 (0.00–3.05)
2009	0	0.93	0.00 (0.00–3.96)
ENDLESS MOUNTAINS HEALTH SYSTEMS (11817)			
2011	1	0.69	1.45 (0.02–8.06)
2010	0	0.65	0.00 (0.00–5.64)
2009	1	0.56	1.78 (0.02–9.89)
JEFFERSON REGIONAL MEDICAL CENTER (10237)			
2011	9	6.08	1.48 (0.67–2.81)
2010	7	5.53	1.27 (0.51–2.61)
2009	8	4.36	1.83 (0.79–3.61)
GETTYSBURG HOSPITAL (11531)			
2011	2	1.35	1.49 (0.17–5.37)
2010	1	1.37	0.73 (0.01–4.07)
2009	0	1.42	0.00 (0.00–2.58)
MEMORIAL HOSPITAL (11633)			
2011	1	0.65	1.53 (0.02–8.52)
2010	2	1.52	1.31 (0.15–4.74)
2009	7	1.76	3.98 (1.60–8.21)
LANCASTER REGIONAL MEDICAL CENTER (12335)			
2011	4	2.54	1.57 (0.42–4.03)
2010	2	2.02	0.99 (0.11–3.57)
2009	1	1.05	0.95 (0.01–5.29)
GNADEN HUETTEN MEMORIAL HOSPITAL (12241)			
2011	1	0.63	1.58 (0.02–8.81)
2010	0	0.53	0.00 (0.00–6.88)
2009	0	0.40	0.00 (0.00–9.20)
THE WASHINGTON HOSPITAL (11460)			
2011	2	1.25	1.60 (0.18–5.78)
2010	2	2.43	0.82 (0.09–2.97)
2009	4	3.39	1.18 (0.32–3.02)
MOSES TAYLOR HOSPITAL (11528)			
2011	3	1.87	1.60 (0.32–4.68)
2010	0	2.38	0.00 (0.00–1.54)
2009	4	2.16	1.85 (0.50–4.74)
ST. CLAIR MEMORIAL HOSPITAL (10561)			
2011	9	5.59	1.61 (0.74–3.06)
2010	5	4.51	1.11 (0.36–2.59)
2009	5	4.23	1.18 (0.38–2.76)
OSS ORTHOPAEDIC HOSPITAL (18467)			
2011	7	4.19	1.67 (0.67–3.44)
2010	.	.	.
2009	.	.	.
PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS (11448)			
2011	15	8.92	1.68 (0.94–2.77)
2010	8	10.45	0.77 (0.33–1.51)
2009	19	12.44	1.53 (0.92–2.38)
SCHUYLKILL MEDICAL CENTER — SOUTH JACKSON STREET (12087)			
2011	1	0.58	1.73 (0.02–9.65)
2010	1	0.78	1.29 (0.02–7.18)
2009	0	1.02	0.00 (0.00–3.58)

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Table 4.5.11 – Rate of SSIs (SIR) — KPRO Procedures – Continued from previous page

	Number of SSIs (KPRO)	Predicted Number of SSIs (KPRO)	SIR (95% CI)
THOMAS JEFFERSON UNIV HOSPITAL (11506)			
2011	16	9.06	1.77 (1.01–2.87)
2010	15	8.98	1.67 (0.93–2.76)
2009	8	8.19	0.98 (0.42–1.92)
BRANDYWINE HOSPITAL (11979)			
2011	1	0.55	1.83 (0.02–10.17)
2010	1	0.58	1.72 (0.02–9.57)
2009	0	0.79	0.00 (0.00–4.66)
MILTON S HERSHEY MEDICAL CENTER (11747)			
2011	13	6.85	1.90 (1.01–3.24)
2010	9	6.66	1.35 (0.62–2.56)
2009	10	5.94	1.68 (0.81–3.09)
CLARION HOSPITAL (11654)			
2011	1	0.53	1.90 (0.02–10.60)
2010	0	0.71	0.00 (0.00–5.17)
2009	0	0.49	0.00 (0.00–7.52)
HOLY REDEEMER HOSPITAL AND MEDICAL CENTER (11973)			
2011	5	2.59	1.93 (0.62–4.50)
2010	1	3.15	0.32 (0.00–1.76)
2009	1	2.52	0.40 (0.01–2.21)
RIDDLE MEMORIAL HOSPITAL (11731)			
2011	8	4.12	1.94 (0.84–3.83)
2010	7	4.91	1.42 (0.57–2.93)
2009	11	4.92	2.24 (1.12–4.00)
POCONO MEDICAL CENTER (11772)			
2011	1	0.50	2.01 (0.03–11.17)
2010	0	0.54	0.00 (0.00–6.79)
2009	0	0.50	0.00 (0.00–7.32)
ALBERT EINSTEIN MEDICAL CENTER (10585)			
2011	1	0.49	2.03 (0.03–11.30)
2010	0	0.07	0.00 (0.00–54.99)
2009	0	0.16	0.00 (0.00–23.63)
MONONGAHELA VALLEY HOSPITAL (11069)			
2011	3	1.47	2.05 (0.41–5.98)
2010	3	1.53	1.96 (0.39–5.73)
2009	1	1.66	0.60 (0.01–3.35)
ARIA HEALTH (11388)			
2011	4	1.90	2.10 (0.56–5.38)
2010	4	1.42	2.82 (0.76–7.22)
2009	2	1.27	1.58 (0.18–5.69)
CHARLES COLE MEMORIAL HOSPITAL (11956)			
2011	2	0.94	2.13 (0.24–7.69)
2010	2	1.16	1.72 (0.19–6.22)
2009	1	1.15	0.87 (0.01–4.86)
PENN PRESBYTERIAN MEDICAL CENTER (11814)			
2011	13	5.95	2.18 (1.16–3.74)
2010	8	6.78	1.18 (0.51–2.33)
2009	12	7.66	1.57 (0.81–2.74)
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)			
2011	4	1.75	2.28 (0.61–5.84)
2010	4	2.23	1.80 (0.48–4.60)
2009	2	2.10	0.95 (0.11–3.43)
LEHIGH VALLEY HOSPITAL — MUHLENBERG (11898)			
2011	4	1.66	2.41 (0.65–6.18)
2010	3	1.52	1.98 (0.40–5.78)
2009	0	1.17	0.00 (0.00–3.12)

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Table 4.5.11 – Rate of SSIs (SIR) — KPRO Procedures – Continued from previous page

	Number of SSIs (KPRO)	Predicted Number of SSIs (KPRO)	SIR (95% CI)
UPMC HAMOT (11725)			
2011	9	3.66	2.46 (1.12–4.67)
2010	5	4.09	1.22 (0.39–2.86)
2009	3	3.87	0.78 (0.16–2.27)
CARLISLE REGIONAL MEDICAL CENTER (11997)			
2011	5	2.03	2.47 (0.79–5.75)
2010	3	2.36	1.27 (0.26–3.71)
2009	6	2.19	2.74 (1.00–5.96)
MAIN LINE HOSPITAL — PAOLI (11750)			
2011	8	3.20	2.50 (1.08–4.93)
2010	5	2.93	1.70 (0.55–3.98)
2009	0	3.30	0.00 (0.00–1.11)
DUBOIS REGIONAL MEDICAL CENTER (11606)			
2011	2	0.76	2.64 (0.30–9.53)
2010	1	0.57	1.76 (0.02–9.78)
2009	1	0.71	1.41 (0.02–7.85)
UPMC NORTHWEST (11837)			
2011	2	0.73	2.75 (0.31–9.92)
2010	0	0.70	0.00 (0.00–5.21)
2009	4	0.68	5.91 (1.59–15.13)
UPMC PRESBYTERIAN SHADYSIDE — PRESBYTERIAN (10348)			
2011	1	0.35	2.82 (0.04–15.70)
2010	1	0.26	3.79 (0.05–21.10)
2009	0	0.21	0.00 (0.00–17.51)
UPMC BEDFORD (11680)			
2011	1	0.33	3.07 (0.04–17.07)
2010	1	0.38	2.60 (0.03–14.47)
2009	1	0.33	3.07 (0.04–17.08)
ALBERT EINSTEIN MEDICAL CENTER AT ELKINS PARK (12500)			
2011	4	1.14	3.50 (0.94–8.96)
2010	0	1.26	0.00 (0.00–2.90)
2009	3	1.72	1.74 (0.35–5.09)
WAYNE MEMORIAL HOSPITAL (12004)			
2011	2	0.55	3.61 (0.41–13.04)
2010	2	0.56	3.58 (0.40–12.94)
2009	1	0.26	3.82 (0.05–21.25)
SOLDIERS & SAILORS MEM HOSPITAL (11688)			
2011	2	0.54	3.69 (0.41–13.34)
2010	2	0.35	5.66 (0.64–20.43)
2009	0	0.54	0.00 (0.00–6.77)
WINDBER HOSPITAL (12031)			
2011	1	0.26	3.82 (0.05–21.26)
2010	0	0.15	0.00 (0.00–23.93)
2009	2	0.58	3.42 (0.38–12.37)
EPHRATA COMMUNITY HOSPITAL (11764)			
2011	7	1.64	4.26 (1.71–8.79)
2010	5	1.89	2.65 (0.85–6.17)
2009	2	1.94	1.03 (0.12–3.72)
CHESTNUT HILL HOSPITAL (12304)			
2011	1	0.17	6.04 (0.08–33.60)
2010	0	0.25	0.00 (0.00–14.76)
2009	0	0.38	0.00 (0.00–9.71)
CORRY MEMORIAL HOSPITAL (12283)			
2011	1	0.13	7.60 (0.10–42.26)
2010	.	.	.
2009	.	.	.

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Table 4.5.11 – Rate of SSIs (SIR) — KPRO Procedures – Continued from previous page

	Number of SSIs (KPRO)	Predicted Number of SSIs (KPRO)	SIR (95% CI)
THOMAS JEFFERSON UNIV HOSP - METHODIST (12017)			
2011	2	0.25	7.99 (0.90–28.83)
2010	1	0.31	3.27 (0.04–18.21)
2009	2	0.42	4.80 (0.54–17.34)
EXCELA HEALTH FRICK HOSPITAL (11639)			
2011	1	0.12	8.62 (0.11–47.94)
2010	0	0.15	0.00 (0.00–23.71)
2009	1	0.28	3.60 (0.05–20.05)
TYRONE HOSPITAL (12717)			
2011	1	0.11	8.97 (0.12–49.90)
2010	0	0.02	0.00 (0.00–203.14)
2009	0	0.22	0.00 (0.00–16.47)
ROXBOROUGH MEMORIAL HOSPITAL (11978)			
2011	1	0.04	24.37 (0.32–135.61)
2010	0	0.26	0.00 (0.00–13.91)
2009	1	0.54	1.87 (0.02–10.39)

Table 4.5.12: Rate (SIR) of Surgical Site Infections (SSIs) Associated with Hip Arthroplasty (HPRO) by Hospital — Pennsylvania, 2009–2011

	Number of SSIs (HPRO)	Predicted Number of SSIs (HPRO)	SIR (95% CI)
ROXBOROUGH MEMORIAL HOSPITAL (11978)			
2011	.	.	.
2010	0	0.06	0.00 (0.00–58.69)
2009	1	0.24	4.13 (0.05–22.96)
HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)			
2011	0	0.39	0.00 (0.00–9.41)
2010	2	0.51	3.91 (0.44–14.12)
2009	.	.	.
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)			
2011	0	0.05	0.00 (0.00–71.94)
2010	0	0.09	0.00 (0.00–38.72)
2009	.	.	.
ARIA HEALTH (11388)			
2011	0	2.30	0.00 (0.00–1.60)
2010	0	2.02	0.00 (0.00–1.82)
2009	2	2.00	1.00 (0.11–3.61)
HAHNEMANN UNIVERSITY HOSPITAL (11437)			
2011	0	1.66	0.00 (0.00–2.21)
2010	0	1.60	0.00 (0.00–2.29)
2009	1	1.26	0.79 (0.01–4.42)
BERWICK HOSPITAL CENTER (11442)			
2011	0	0.45	0.00 (0.00–8.08)
2010	0	0.63	0.00 (0.00–5.80)
2009	0	0.57	0.00 (0.00–6.44)
JEANES HOSPITAL (11459)			
2011	0	1.23	0.00 (0.00–2.97)
2010	0	1.12	0.00 (0.00–3.29)
2009	1	1.18	0.85 (0.01–4.71)
MID-VALLEY HOSPITAL (11557)			
2011	0	0.04	0.00 (0.00–94.63)
2010	1	0.02	66.10 (0.86–367.80)
2009	0	0.04	0.00 (0.00–84.67)
CANONSBURG GENERAL HOSPITAL (11586)			
2011	0	1.45	0.00 (0.00–2.53)
2010	2	1.95	1.03 (0.12–3.70)
2009	0	1.82	0.00 (0.00–2.01)
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)			
2011	0	2.65	0.00 (0.00–1.39)
2010	1	2.92	0.34 (0.00–1.90)
2009	5	2.81	1.78 (0.57–4.15)
EXCELA HEALTH FRICK HOSPITAL (11639)			
2011	0	0.07	0.00 (0.00–51.82)
2010	1	0.09	11.13 (0.15–61.92)
2009	1	0.17	5.84 (0.08–32.49)
WAYNESBORO HOSPITAL (11642)			
2011	0	0.53	0.00 (0.00–6.91)
2010	0	0.64	0.00 (0.00–5.77)
2009	0	0.68	0.00 (0.00–5.39)
UPMC BEDFORD (11680)			
2011	0	0.30	0.00 (0.00–12.23)
2010	0	0.12	0.00 (0.00–30.71)
2009	0	0.25	0.00 (0.00–14.83)

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Table 4.5.12 – Rate of SSIs (SIR) — HPRO Procedures – Continued from previous page

	Number of SSIs (HPRO)	Predicted Number of SSIs (HPRO)	SIR (95% CI)
SOLDIERS & SAILORS MEM HOSPITAL (11688)			
2011	0	0.30	0.00 (0.00–12.23)
2010	0	0.28	0.00 (0.00–13.26)
2009	0	0.24	0.00 (0.00–15.33)
JERSEY SHORE HOSPITAL (11689)			
2011	0	0.25	0.00 (0.00–14.81)
2010	0	0.13	0.00 (0.00–27.40)
2009	0	0.13	0.00 (0.00–28.99)
UPMC MCKEESPORT (11707)			
2011	0	0.97	0.00 (0.00–3.77)
2010	1	1.04	0.96 (0.01–5.34)
2009	1	0.61	1.64 (0.02–9.15)
ST. LUKES QUAKERTOWN HOSPITAL (11711)			
2011	0	0.48	0.00 (0.00–7.69)
2010	0	0.49	0.00 (0.00–7.55)
2009	1	0.29	3.42 (0.04–19.02)
THE GOOD SAMARITAN HOSPITAL (11712)			
2011	0	1.20	0.00 (0.00–3.05)
2010	0	1.39	0.00 (0.00–2.64)
2009	2	2.17	0.92 (0.10–3.33)
TITUSVILLE AREA HOSPITAL (11738)			
2011	0	0.29	0.00 (0.00–12.62)
2010	0	0.12	0.00 (0.00–30.88)
2009	0	0.20	0.00 (0.00–18.54)
ST. LUKES MINERS MEMORIAL HOSPITAL (11784)			
2011	0	0.22	0.00 (0.00–16.30)
2010	0	0.09	0.00 (0.00–39.26)
2009	0	0.26	0.00 (0.00–13.97)
ENDLESS MOUNTAINS HEALTH SYSTEMS (11817)			
2011	0	0.24	0.00 (0.00–15.02)
2010	0	0.27	0.00 (0.00–13.68)
2009	0	0.40	0.00 (0.00–9.20)
TYLER MEMORIAL HOSPITAL (11829)			
2011	0	0.01	0.00 (0.00–544.58)
2010	0	0.05	0.00 (0.00–80.83)
2009	0	0.04	0.00 (0.00–87.75)
PUNXSUTAWNEY AREA HOSPITAL (11830)			
2011	0	0.11	0.00 (0.00–32.72)
2010	0	0.23	0.00 (0.00–15.66)
2009	0	0.10	0.00 (0.00–35.97)
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)			
2011	0	0.82	0.00 (0.00–4.47)
2010	0	1.03	0.00 (0.00–3.56)
2009	0	1.12	0.00 (0.00–3.29)
CROZER CHESTER MEDICAL CENTER SPRINGFIELD (11851)			
2011	0	0.10	0.00 (0.00–35.68)
2010	1	0.08	12.88 (0.17–71.67)
2009	0	0.18	0.00 (0.00–20.45)
ELK REGIONAL HEALTH CENTER (11859)			
2011	0	0.80	0.00 (0.00–4.57)
2010	0	0.81	0.00 (0.00–4.51)
2009	0	0.82	0.00 (0.00–4.48)
THE WESTERN PENNSYLVANIA HOSPITAL (11864)			
2011	0	0.03	0.00 (0.00–104.88)
2010	0	0.81	0.00 (0.00–4.54)
2009	1	1.30	0.77 (0.01–4.27)

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Table 4.5.12 – Rate of SSIs (SIR) — HPRO Procedures – Continued from previous page

	Number of SSIs (HPRO)	Predicted Number of SSIs (HPRO)	SIR (95% CI)
HIGHLANDS HOSPITAL (11902)			
2011	0	0.03	0.00 (0.00–114.53)
2010	0	0.18	0.00 (0.00–20.93)
2009	0	0.14	0.00 (0.00–25.79)
CROZER CHESTER MEDICAL CENTER TAYLOR (11932)			
2011	0	0.57	0.00 (0.00–6.46)
2010	0	0.96	0.00 (0.00–3.83)
2009	0	0.77	0.00 (0.00–4.79)
SOUTHWEST REGIONAL MEDICAL CENTER (11942)			
2011	0	0.16	0.00 (0.00–22.27)
2010	0	0.18	0.00 (0.00–20.80)
2009	0	0.14	0.00 (0.00–26.35)
JAMESON MEMORIAL HOSPITAL (11954)			
2011	0	1.10	0.00 (0.00–3.35)
2010	2	1.11	1.80 (0.20–6.52)
2009	1	0.83	1.21 (0.02–6.73)
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)			
2011	0	1.33	0.00 (0.00–2.75)
2010	0	1.68	0.00 (0.00–2.18)
2009	1	1.43	0.70 (0.01–3.88)
BRANDYWINE HOSPITAL (11979)			
2011	0	1.02	0.00 (0.00–3.60)
2010	3	0.91	3.29 (0.66–9.62)
2009	1	0.67	1.49 (0.02–8.27)
POTTSTOWN MEMORIAL MEDICAL CENTER (11983)			
2011	0	1.73	0.00 (0.00–2.12)
2010	1	1.71	0.58 (0.01–3.25)
2009	0	1.78	0.00 (0.00–2.06)
WAYNE MEMORIAL HOSPITAL (12004)			
2011	0	0.55	0.00 (0.00–6.64)
2010	0	0.59	0.00 (0.00–6.21)
2009	0	0.28	0.00 (0.00–13.24)
GEISINGER-BLOOMSBURG HOSPITAL (12008)			
2011	0	1.00	0.00 (0.00–3.65)
2010	1	0.90	1.12 (0.01–6.21)
2009	1	0.80	1.25 (0.02–6.93)
LOCK HAVEN HOSPITAL (12097)			
2011	0	0.04	0.00 (0.00–94.63)
2010	0	0.02	0.00 (0.00–242.48)
2009	.	.	.
SUNBURY COMMUNITY HOSPITAL (12105)			
2011	0	0.65	0.00 (0.00–5.65)
2010	1	0.79	1.27 (0.02–7.09)
2009	0	0.55	0.00 (0.00–6.66)
KANE COMMUNITY HOSPITAL (12111)			
2011	0	0.21	0.00 (0.00–17.73)
2010	.	.	.
2009	0	0.06	0.00 (0.00–62.55)
SHRINERS HOSPITAL FOR CHILDREN — PHILADELPHIA (12244)			
2011	0	0.01	0.00 (0.00–272.29)
2010	.	.	.
2009	0	0.07	0.00 (0.00–54.03)
MILLCREEK COMMUNITY HOSPITAL (12253)			
2011	0	0.45	0.00 (0.00–8.21)
2010	0	0.40	0.00 (0.00–9.23)
2009	0	0.62	0.00 (0.00–5.89)

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Table 4.5.12 – Rate of SSIs (SIR) — HPRO Procedures – Continued from previous page

	Number of SSIs (HPRO)	Predicted Number of SSIs (HPRO)	SIR (95% CI)
SOMERSET HOSPITAL (12282)			
2011	0	0.19	0.00 (0.00–19.34)
2010	0	0.43	0.00 (0.00–8.52)
2009	0	0.99	0.00 (0.00–3.69)
MINERS MEDICAL CENTER (12295)			
2011	0	0.03	0.00 (0.00–114.53)
2010	1	0.13	8.00 (0.10–44.51)
2009	0	0.03	0.00 (0.00–119.19)
OHIO VALLEY GENERAL HOSPITAL (12298)			
2011	0	0.66	0.00 (0.00–5.52)
2010	2	0.93	2.15 (0.24–7.76)
2009	2	0.86	2.32 (0.26–8.36)
EASTERN REGIONAL MEDICAL CENTER (12348)			
2011	0	0.21	0.00 (0.00–17.73)
2010	1	0.09	10.55 (0.14–58.72)
2009	.	.	.
BRADFORD REGIONAL MEDICAL CENTER (12361)			
2011	0	0.42	0.00 (0.00–8.78)
2010	0	0.31	0.00 (0.00–11.96)
2009	0	0.17	0.00 (0.00–21.18)
LOWER BUCKS HOSPITAL (12390)			
2011	0	0.53	0.00 (0.00–6.86)
2010	1	0.80	1.25 (0.02–6.95)
2009	0	1.36	0.00 (0.00–2.70)
PALMERTON HOSPITAL (12396)			
2011	0	0.39	0.00 (0.00–9.52)
2010	0	0.44	0.00 (0.00–8.31)
2009	0	0.41	0.00 (0.00–9.02)
BROOKVILLE HOSPITAL (12418)			
2011	0	0.04	0.00 (0.00–87.95)
2010	0	0.02	0.00 (0.00–206.21)
2009	0	0.06	0.00 (0.00–62.40)
ROBERT PACKER HOSPITAL (12422)			
2011	0	4.34	0.00 (0.00–0.85)
2010	1	4.73	0.21 (0.00–1.18)
2009	0	5.43	0.00 (0.00–0.68)
SURGICAL INSTITUTE OF READING (12535)			
2011	0	1.04	0.00 (0.00–3.52)
2010	0	1.18	0.00 (0.00–3.10)
2009	0	1.13	0.00 (0.00–3.25)
EDGEWOOD SURGICAL HOSPITAL (12552)			
2011	0	0.32	0.00 (0.00–11.29)
2010	0	0.27	0.00 (0.00–13.39)
2009	0	0.18	0.00 (0.00–20.61)
TYRONE HOSPITAL (12717)			
2011	0	0.12	0.00 (0.00–31.79)
2010	0	0.07	0.00 (0.00–55.72)
2009	0	0.02	0.00 (0.00–237.34)
BUCKS COUNTY SPECIALTY HOSPITAL (15202)			
2011	0	2.14	0.00 (0.00–1.71)
2010	0	1.02	0.00 (0.00–3.59)
2009	.	.	.
SURGICAL SPECIALTY CENTER AT COORDINATED HEALTH, THE (15259)			
2011	0	0.66	0.00 (0.00–5.55)
2010	0	0.83	0.00 (0.00–4.41)
2009	.	.	.

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Table 4.5.12 – Rate of SSIs (SIR) — HPRO Procedures – Continued from previous page

	Number of SSIs (HPRO)	Predicted Number of SSIs (HPRO)	SIR (95% CI)
OSS ORTHOPAEDIC HOSPITAL (18467)			
2011	0	3.20	0.00 (0.00–1.15)
2010	.	.	.
2009	.	.	.
PHYSICIANS CARE SURGICAL HOSPITAL (19630)			
2011	0	0.15	0.00 (0.00–23.85)
2010	.	.	.
2009	.	.	.
ST. LUKES HOSPITAL BETHLEHEM (11718)			
2011	1	3.24	0.31 (0.00–1.72)
2010	5	4.06	1.23 (0.40–2.87)
2009	5	3.50	1.43 (0.46–3.34)
ST. MARY MEDICAL CENTER (11885)			
2011	1	3.16	0.32 (0.00–1.76)
2010	1	3.27	0.31 (0.00–1.70)
2009	2	2.97	0.67 (0.08–2.43)
GEISINGER-COMMUNITY MEDICAL CENTER (11914)			
2011	1	3.07	0.33 (0.00–1.81)
2010	2	3.51	0.57 (0.06–2.06)
2009	6	3.56	1.69 (0.62–3.67)
LANCASTER GENERAL HOSPITAL (10183)			
2011	4	10.34	0.39 (0.10–0.99)
2010	5	8.15	0.61 (0.20–1.43)
2009	3	8.17	0.37 (0.07–1.07)
REGIONAL HOSPITAL OF SCRANTON (12533)			
2011	1	2.55	0.39 (0.01–2.18)
2010	0	2.01	0.00 (0.00–1.82)
2009	2	2.14	0.93 (0.10–3.37)
ABINGTON MEMORIAL HOSPITAL (11838)			
2011	3	7.51	0.40 (0.08–1.17)
2010	4	8.18	0.49 (0.13–1.25)
2009	4	5.59	0.72 (0.19–1.83)
HERITAGE VALLEY BEAVER (11831)			
2011	1	2.49	0.40 (0.01–2.23)
2010	4	2.75	1.45 (0.39–3.72)
2009	5	2.62	1.91 (0.62–4.46)
RIDDLE MEMORIAL HOSPITAL (11731)			
2011	2	4.55	0.44 (0.05–1.59)
2010	9	5.39	1.67 (0.76–3.17)
2009	8	4.13	1.94 (0.83–3.81)
CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)			
2011	2	3.91	0.51 (0.06–1.84)
2010	4	4.43	0.90 (0.24–2.31)
2009	5	3.79	1.32 (0.43–3.08)
LANSDALE HOSPITAL (12032)			
2011	1	1.90	0.52 (0.01–2.92)
2010	0	0.58	0.00 (0.00–6.30)
2009	0	0.60	0.00 (0.00–6.14)
READING HOSPITAL AND MEDICAL CENTER (12375)			
2011	3	5.54	0.54 (0.11–1.58)
2010	2	5.72	0.35 (0.04–1.26)
2009	4	4.96	0.81 (0.22–2.07)
ADVANCED SURGICAL HOSPITAL (16317)			
2011	1	1.68	0.59 (0.01–3.30)
2010	.	.	.
2009	.	.	.

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Table 4.5.12 – Rate of SSIs (SIR) — HPRO Procedures – Continued from previous page

	Number of SSIs (HPRO)	Predicted Number of SSIs (HPRO)	SIR (95% CI)
JEFFERSON REGIONAL MEDICAL CENTER (10237)			
2011	3	5.01	0.60 (0.12–1.75)
2010	1	3.66	0.27 (0.00–1.52)
2009	4	2.47	1.62 (0.44–4.15)
HOLY SPIRIT HOSPITAL (12387)			
2011	2	3.24	0.62 (0.07–2.23)
2010	3	2.62	1.14 (0.23–3.34)
2009	2	2.37	0.85 (0.09–3.05)
SACRED HEART HOSPITAL (11684)			
2011	1	1.57	0.64 (0.01–3.54)
2010	0	0.58	0.00 (0.00–6.31)
2009	1	0.71	1.41 (0.02–7.86)
SHARON REGIONAL HEALTH SYSTEM (12250)			
2011	2	3.10	0.65 (0.07–2.33)
2010	0	2.53	0.00 (0.00–1.45)
2009	0	2.11	0.00 (0.00–1.74)
MAIN LINE HOSPITAL — PAOLI (11750)			
2011	3	4.56	0.66 (0.13–1.92)
2010	6	3.08	1.94 (0.71–4.23)
2009	5	2.87	1.74 (0.56–4.06)
TEMPLE UNIVERSITY HOSPITAL (12382)			
2011	2	2.93	0.68 (0.08–2.47)
2010	3	2.16	1.39 (0.28–4.06)
2009	3	2.23	1.35 (0.27–3.94)
NAZARETH HOSPITAL (11919)			
2011	1	1.42	0.70 (0.01–3.92)
2010	4	1.87	2.14 (0.58–5.49)
2009	2	2.87	0.70 (0.08–2.52)
YORK HOSPITAL (10108)			
2011	3	4.20	0.71 (0.14–2.09)
2010	4	5.44	0.74 (0.20–1.88)
2009	2	5.61	0.36 (0.04–1.29)
MEADVILLE MEDICAL CENTER (11583)			
2011	2	2.62	0.76 (0.09–2.76)
2010	7	2.28	3.07 (1.23–6.32)
2009	1	1.82	0.55 (0.01–3.05)
CHESTER COUNTY HOSPITAL (12016)			
2011	2	2.55	0.79 (0.09–2.84)
2010	0	2.58	0.00 (0.00–1.42)
2009	1	2.40	0.42 (0.01–2.32)
SCHUYLKILL MEDICAL CENTER — EAST NORWEGIAN STREET (11922)			
2011	1	1.27	0.79 (0.01–4.39)
2010	0	0.93	0.00 (0.00–3.96)
2009	2	1.00	1.99 (0.22–7.19)
ST. JOSEPH MEDICAL CENTER (11961)			
2011	1	1.24	0.81 (0.01–4.50)
2010	1	1.22	0.82 (0.01–4.57)
2009	1	1.14	0.87 (0.01–4.86)
MOUNT NITTANY MEDICAL CENTER (11797)			
2011	4	4.91	0.82 (0.22–2.09)
2010	1	4.53	0.22 (0.00–1.23)
2009	6	4.34	1.38 (0.50–3.01)
UPMC PRESBYTERIAN SHADYSIDE — SHADYSIDE (10118)			
2011	13	15.66	0.83 (0.44–1.42)
2010	9	13.61	0.66 (0.30–1.26)
2009	16	13.38	1.20 (0.68–1.94)

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Table 4.5.12 – Rate of SSIs (SIR) — HPRO Procedures – Continued from previous page

	Number of SSIs (HPRO)	Predicted Number of SSIs (HPRO)	SIR (95% CI)
MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)			
2011	6	7.19	0.83 (0.30–1.82)
2010	4	5.68	0.70 (0.19–1.80)
2009	1	4.20	0.24 (0.00–1.32)
DOYLESTOWN HOSPITAL (10190)			
2011	2	2.32	0.86 (0.10–3.11)
2010	0	2.28	0.00 (0.00–1.61)
2009	2	2.16	0.92 (0.10–3.34)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)			
2011	4	4.58	0.87 (0.24–2.24)
2010	0	3.67	0.00 (0.00–1.00)
2009	2	3.61	0.55 (0.06–2.00)
GRAND VIEW HOSPITAL (11847)			
2011	2	2.21	0.90 (0.10–3.26)
2010	0	2.32	0.00 (0.00–1.58)
2009	1	1.95	0.51 (0.01–2.86)
LEHIGH VALLEY HOSPITAL (11884)			
2011	8	8.72	0.92 (0.39–1.81)
2010	9	8.96	1.00 (0.46–1.91)
2009	5	8.05	0.62 (0.20–1.45)
UPMC HORIZON (11675)			
2011	2	2.15	0.93 (0.10–3.36)
2010	3	2.01	1.50 (0.30–4.37)
2009	1	1.85	0.54 (0.01–3.00)
LEHIGH VALLEY HOSPITAL — MUHLENBERG (11898)			
2011	2	2.13	0.94 (0.11–3.40)
2010	1	1.77	0.56 (0.01–3.14)
2009	2	1.46	1.37 (0.15–4.96)
HERITAGE VALLEY SEWICKLEY (10375)			
2011	4	4.15	0.96 (0.26–2.46)
2010	2	4.07	0.49 (0.06–1.77)
2009	3	3.13	0.96 (0.19–2.80)
PENN PRESBYTERIAN MEDICAL CENTER (11814)			
2011	6	6.22	0.97 (0.35–2.10)
2010	10	7.56	1.32 (0.63–2.43)
2009	7	8.32	0.84 (0.34–1.73)
HOLY REDEEMER HOSPITAL AND MEDICAL CENTER (11973)			
2011	2	2.07	0.97 (0.11–3.49)
2010	2	1.90	1.06 (0.12–3.81)
2009	5	1.78	2.80 (0.90–6.54)
FORBES REGIONAL HOSPITAL (11265)			
2011	3	3.04	0.99 (0.20–2.88)
2010	5	3.08	1.62 (0.52–3.79)
2009	1	2.43	0.41 (0.01–2.29)
MERCY SUBURBAN HOSPITAL NORRISTOWN (11952)			
2011	1	1.00	1.00 (0.01–5.54)
2010	2	0.70	2.85 (0.32–10.30)
2009	0	0.86	0.00 (0.00–4.25)
UPMC PASSAVANT (11242)			
2011	4	4.01	1.00 (0.27–2.55)
2010	1	4.18	0.24 (0.00–1.33)
2009	1	3.61	0.28 (0.00–1.54)
BUTLER MEMORIAL HOSPITAL (11736)			
2011	2	2.00	1.00 (0.11–3.60)
2010	4	2.44	1.64 (0.44–4.19)
2009	6	1.78	3.36 (1.23–7.32)

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Table 4.5.12 – Rate of SSIs (SIR) — HPRO Procedures – Continued from previous page

	Number of SSIs (HPRO)	Predicted Number of SSIs (HPRO)	SIR (95% CI)
DUBOIS REGIONAL MEDICAL CENTER (11606)			
2011	1	0.98	1.02 (0.01–5.67)
2010	1	0.89	1.12 (0.01–6.22)
2009	0	0.96	0.00 (0.00–3.81)
INDIANA REGIONAL MEDICAL CENTER (11759)			
2011	2	1.88	1.07 (0.12–3.85)
2010	1	1.82	0.55 (0.01–3.06)
2009	0	1.76	0.00 (0.00–2.09)
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)			
2011	5	4.67	1.07 (0.35–2.50)
2010	3	2.84	1.06 (0.21–3.09)
2009	2	2.44	0.82 (0.09–2.96)
MOSES TAYLOR HOSPITAL (11528)			
2011	2	1.86	1.07 (0.12–3.87)
2010	2	1.64	1.22 (0.14–4.40)
2009	2	1.75	1.14 (0.13–4.12)
EVANGELICAL COMMUNITY HOSPITAL (11701)			
2011	3	2.76	1.09 (0.22–3.18)
2010	3	2.05	1.46 (0.29–4.27)
2009	2	2.02	0.99 (0.11–3.58)
ST. VINCENT HEALTH CENTER (11699)			
2011	4	3.63	1.10 (0.30–2.82)
2010	0	3.28	0.00 (0.00–1.12)
2009	2	2.98	0.67 (0.08–2.42)
THE WASHINGTON HOSPITAL (11460)			
2011	2	1.81	1.11 (0.12–3.99)
2010	3	2.13	1.41 (0.28–4.12)
2009	3	1.94	1.54 (0.31–4.51)
EPHRATA COMMUNITY HOSPITAL (11764)			
2011	2	1.77	1.13 (0.13–4.08)
2010	2	1.46	1.37 (0.15–4.94)
2009	1	1.24	0.81 (0.01–4.50)
CHAMBERSBURG HOSPITAL (11913)			
2011	4	3.53	1.13 (0.31–2.90)
2010	4	4.11	0.97 (0.26–2.49)
2009	5	3.47	1.44 (0.46–3.36)
ST. CLAIR MEMORIAL HOSPITAL (10561)			
2011	5	4.24	1.18 (0.38–2.75)
2010	8	3.68	2.18 (0.94–4.29)
2009	7	3.64	1.92 (0.77–3.96)
CLARION HOSPITAL (11654)			
2011	1	0.85	1.18 (0.02–6.57)
2010	1	0.70	1.44 (0.02–7.99)
2009	0	0.50	0.00 (0.00–7.37)
UPMC MERCY (10384)			
2011	4	3.26	1.23 (0.33–3.14)
2010	1	2.83	0.35 (0.00–1.97)
2009	0	2.46	0.00 (0.00–1.49)
ALLEGHENY GENERAL HOSPITAL (10648)			
2011	10	7.95	1.26 (0.60–2.31)
2010	12	7.17	1.67 (0.86–2.92)
2009	15	9.98	1.50 (0.84–2.48)
UPMC NORTHWEST (11837)			
2011	1	0.79	1.27 (0.02–7.05)
2010	1	0.69	1.46 (0.02–8.10)
2009	3	0.59	5.08 (1.02–14.84)

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Table 4.5.12 – Rate of SSIs (SIR) — HPRO Procedures – Continued from previous page

	Number of SSIs (HPRO)	Predicted Number of SSIs (HPRO)	SIR (95% CI)
CHARLES COLE MEMORIAL HOSPITAL (11956)			
2011	1	0.78	1.28 (0.02–7.13)
2010	0	0.75	0.00 (0.00–4.91)
2009	1	0.65	1.54 (0.02–8.57)
COORDINATED HEALTH ORTHOPEDIC HOSPITAL, LLC (11872)			
2011	2	1.55	1.29 (0.14–4.65)
2010	1	2.04	0.49 (0.01–2.73)
2009	0	1.28	0.00 (0.00–2.86)
UPMC ST MARGARET (11561)			
2011	8	6.18	1.30 (0.56–2.55)
2010	1	5.36	0.19 (0.00–1.04)
2009	7	5.29	1.32 (0.53–2.73)
ALLEGHENY VALLEY HOSPITAL (11842)			
2011	2	1.54	1.30 (0.15–4.70)
2010	3	1.55	1.93 (0.39–5.64)
2009	1	1.47	0.68 (0.01–3.78)
ALBERT EINSTEIN MEDICAL CENTER AT ELKINS PARK (12500)			
2011	1	0.77	1.30 (0.02–7.24)
2010	2	1.23	1.62 (0.18–5.85)
2009	2	1.05	1.91 (0.21–6.90)
MILTON S HERSHEY MEDICAL CENTER (11747)			
2011	11	8.13	1.35 (0.67–2.42)
2010	8	7.13	1.12 (0.48–2.21)
2009	6	6.02	1.00 (0.36–2.17)
EXCELA HEALTH LATROBE HOSPITAL (11651)			
2011	2	1.48	1.36 (0.15–4.89)
2010	1	1.29	0.78 (0.01–4.33)
2009	2	1.52	1.32 (0.15–4.76)
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)			
2011	4	2.92	1.37 (0.37–3.51)
2010	7	3.38	2.07 (0.83–4.26)
2009	3	2.44	1.23 (0.25–3.59)
THOMAS JEFFERSON UNIV HOSPITAL (11506)			
2011	23	16.77	1.37 (0.87–2.06)
2010	11	13.91	0.79 (0.39–1.41)
2009	8	12.21	0.66 (0.28–1.29)
GETTYSBURG HOSPITAL (11531)			
2011	1	0.73	1.37 (0.02–7.63)
2010	1	1.23	0.81 (0.01–4.52)
2009	0	0.79	0.00 (0.00–4.65)
EASTON HOSPITAL (11929)			
2011	2	1.43	1.40 (0.16–5.06)
2010	4	1.75	2.29 (0.62–5.85)
2009	0	1.83	0.00 (0.00–2.01)
PINNACLE HEALTH HOSPITALS (10122)			
2011	18	12.50	1.44 (0.85–2.28)
2010	21	12.85	1.63 (1.01–2.50)
2009	8	11.43	0.70 (0.30–1.38)
MAIN LINE HOSPITAL BRYN MAWR (11753)			
2011	9	6.20	1.45 (0.66–2.76)
2010	7	5.92	1.18 (0.47–2.44)
2009	3	4.20	0.71 (0.14–2.09)
CROZER CHESTER MEDICAL CENTER (11839)			
2011	3	1.92	1.56 (0.31–4.57)
2010	1	1.54	0.65 (0.01–3.62)
2009	0	1.59	0.00 (0.00–2.30)

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Table 4.5.12 – Rate of SSIs (SIR) — HPRO Procedures – Continued from previous page

	Number of SSIs (HPRO)	Predicted Number of SSIs (HPRO)	SIR (95% CI)
LANCASTER REGIONAL MEDICAL CENTER (12335)			
2011	3	1.91	1.57 (0.32–4.59)
2010	1	2.05	0.49 (0.01–2.71)
2009	5	1.35	3.71 (1.20–8.66)
WILKES-BARRE GENERAL HOSPITAL (11916)			
2011	4	2.54	1.58 (0.42–4.04)
2010	4	2.82	1.42 (0.38–3.63)
2009	3	3.00	1.00 (0.20–2.92)
CARLISLE REGIONAL MEDICAL CENTER (11997)			
2011	2	1.24	1.61 (0.18–5.82)
2010	2	1.99	1.01 (0.11–3.63)
2009	7	1.72	4.07 (1.63–8.39)
ALTOONA REGIONAL HEALTH SYSTEM (10178)			
2011	7	4.32	1.62 (0.65–3.34)
2010	4	4.64	0.86 (0.23–2.21)
2009	6	4.66	1.29 (0.47–2.80)
ARMSTRONG COUNTY MEMORIAL HOSPITAL (12057)			
2011	2	1.23	1.63 (0.18–5.89)
2010	1	1.46	0.68 (0.01–3.80)
2009	2	1.05	1.90 (0.21–6.86)
CLEARFIELD HOSPITAL (11843)			
2011	1	0.59	1.69 (0.02–9.39)
2010	0	0.87	0.00 (0.00–4.23)
2009	2	0.58	3.44 (0.39–12.41)
PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS (11448)			
2011	13	7.01	1.85 (0.99–3.17)
2010	12	8.43	1.42 (0.73–2.49)
2009	10	7.00	1.43 (0.68–2.63)
MONONGAHELA VALLEY HOSPITAL (11069)			
2011	4	2.09	1.92 (0.52–4.91)
2010	6	2.25	2.67 (0.97–5.80)
2009	4	1.76	2.27 (0.61–5.82)
MERCY FITZGERALD HOSPITAL (11683)			
2011	1	0.51	1.94 (0.03–10.81)
2010	0	0.69	0.00 (0.00–5.35)
2009	3	0.69	4.34 (0.87–12.69)
HEART OF LANCASTER REGIONAL MEDICAL CENTER (12571)			
2011	1	0.50	2.00 (0.03–11.11)
2010	1	0.53	1.88 (0.02–10.46)
2009	0	0.19	0.00 (0.00–19.66)
GROVE CITY MEDICAL CENTER (11722)			
2011	1	0.48	2.09 (0.03–11.62)
2010	0	0.38	0.00 (0.00–9.54)
2009	0	0.37	0.00 (0.00–9.79)
THOMAS JEFFERSON UNIV HOSP - METHODIST (12017)			
2011	1	0.47	2.12 (0.03–11.80)
2010	1	0.57	1.77 (0.02–9.83)
2009	1	0.63	1.58 (0.02–8.81)
UPMC HAMOT (11725)			
2011	11	5.08	2.16 (1.08–3.87)
2010	8	4.46	1.79 (0.77–3.53)
2009	7	4.34	1.61 (0.65–3.32)
GEISINGER MEDICAL CENTER (11775)			
2011	12	5.33	2.25 (1.16–3.93)
2010	12	5.91	2.03 (1.05–3.55)
2009	7	4.19	1.67 (0.67–3.45)

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Table 4.5.12 – Rate of SSIs (SIR) — HPRO Procedures – Continued from previous page

	Number of SSIs (HPRO)	Predicted Number of SSIs (HPRO)	SIR (95% CI)
LEWISTOWN HOSPITAL (11825)			
2011	1	0.43	2.31 (0.03–12.87)
2010	0	0.21	0.00 (0.00–17.75)
2009	0	0.25	0.00 (0.00–14.42)
JENNERSVILLE REGIONAL HOSPITAL (12337)			
2011	1	0.42	2.36 (0.03–13.13)
2010	0	0.39	0.00 (0.00–9.51)
2009	0	0.51	0.00 (0.00–7.22)
HAZLETON GENERAL HOSPITAL (11878)			
2011	1	0.42	2.39 (0.03–13.31)
2010	4	0.93	4.30 (1.16–11.01)
2009	0	0.29	0.00 (0.00–12.69)
MEMORIAL HOSPITAL (11633)			
2011	2	0.79	2.54 (0.29–9.17)
2010	0	1.18	0.00 (0.00–3.11)
2009	4	1.53	2.61 (0.70–6.69)
UPMC PRESBYTERIAN SHADYSIDE — PRESBYTERIAN (10348)			
2011	6	2.21	2.72 (0.99–5.92)
2010	4	1.82	2.19 (0.59–5.61)
2009	2	1.17	1.71 (0.19–6.18)
ALBERT EINSTEIN MEDICAL CENTER (10585)			
2011	3	1.09	2.76 (0.55–8.07)
2010	0	0.65	0.00 (0.00–5.63)
2009	0	0.40	0.00 (0.00–9.27)
WARREN GENERAL HOSPITAL (12216)			
2011	1	0.36	2.76 (0.04–15.37)
2010	0	0.88	0.00 (0.00–4.16)
2009	0	0.87	0.00 (0.00–4.21)
UNIONTOWN HOSPITAL (10441)			
2011	6	2.08	2.89 (1.05–6.29)
2010	7	2.52	2.78 (1.11–5.72)
2009	3	2.40	1.25 (0.25–3.65)
HANOVER HOSPITAL (11899)			
2011	3	0.96	3.14 (0.63–9.18)
2010	1	2.10	0.48 (0.01–2.64)
2009	1	1.79	0.56 (0.01–3.11)
SCHUYLKILL MEDICAL CENTER — SOUTH JACKSON STREET (12087)			
2011	2	0.63	3.19 (0.36–11.52)
2010	0	0.81	0.00 (0.00–4.51)
2009	0	0.72	0.00 (0.00–5.13)
GNADEN HUETTEN MEMORIAL HOSPITAL (12241)			
2011	1	0.30	3.39 (0.04–18.84)
2010	1	0.33	3.05 (0.04–16.98)
2009	0	0.29	0.00 (0.00–12.49)
POCONO MEDICAL CENTER (11772)			
2011	3	0.82	3.64 (0.73–10.62)
2010	5	0.80	6.25 (2.01–14.58)
2009	0	0.88	0.00 (0.00–4.18)
MERCY PHILADELPHIA HOSPITAL (11946)			
2011	1	0.26	3.92 (0.05–21.79)
2010	0	0.23	0.00 (0.00–15.79)
2009	1	0.23	4.26 (0.06–23.71)
NASON HOSPITAL (11907)			
2011	1	0.24	4.13 (0.05–22.97)
2010	2	0.21	9.61 (1.08–34.68)
2009	1	0.25	4.02 (0.05–22.36)

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Table 4.5.12 – Rate of SSIs (SIR) — HPRO Procedures – Continued from previous page

	Number of SSIs (HPRO)	Predicted Number of SSIs (HPRO)	SIR (95% CI)
CHESTNUT HILL HOSPITAL (12304)			
2011	3	0.54	5.61 (1.13–16.38)
2010	3	0.54	5.57 (1.12–16.28)
2009	2	0.61	3.29 (0.37–11.86)
WINDBER HOSPITAL (12031)			
2011	2	0.15	13.08 (1.47–47.21)
2010	1	0.06	16.00 (0.21–89.02)
2009	0	0.44	0.00 (0.00–8.34)
ELLWOOD CITY HOSPITAL (11779)			
2011	1	0.07	14.31 (0.19–79.60)
2010	0	0.20	0.00 (0.00–17.98)
2009	0	0.17	0.00 (0.00–21.99)

Table 4.5.13: Rate (SIR) of Surgical Site Infections (SSIs) Associated with Abdominal Hysterectomy (HYST) by Hospital — Pennsylvania, 2009–2011

	Number of SSIs (HYST)	Predicted Number of SSIs (HYST)	SIR (95% CI)
TYLER MEMORIAL HOSPITAL (11829)			
2011	.	.	.
2010	.	.	.
2009	0	0.06	0.00 (0.00–60.04)
ROXBOROUGH MEMORIAL HOSPITAL (11978)			
2011	.	.	.
2010	0	0.14	0.00 (0.00–27.07)
2009	0	0.10	0.00 (0.00–35.19)
LANSDALE HOSPITAL (12032)			
2011	.	.	.
2010	.	.	.
2009	0	0.04	0.00 (0.00–95.34)
SUNBURY COMMUNITY HOSPITAL (12105)			
2011	.	.	.
2010	.	.	.
2009	0	0.01	0.00 (0.00–462.65)
CORRY MEMORIAL HOSPITAL (12283)			
2011	.	.	.
2010	0	0.08	0.00 (0.00–45.06)
2009	0	0.13	0.00 (0.00–27.45)
ALBERT EINSTEIN MEDICAL CENTER AT ELKINS PARK (12500)			
2011	.	.	.
2010	.	.	.
2009	0	0.03	0.00 (0.00–120.09)
DOYLESTOWN HOSPITAL (10190)			
2011	0	0.85	0.00 (0.00–4.34)
2010	0	1.17	0.00 (0.00–3.13)
2009	1	1.11	0.90 (0.01–4.99)
JEFFERSON REGIONAL MEDICAL CENTER (10237)			
2011	0	0.19	0.00 (0.00–19.50)
2010	2	0.21	9.63 (1.08–34.75)
2009	0	0.13	0.00 (0.00–29.18)
CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)			
2011	0	0.60	0.00 (0.00–6.15)
2010	1	1.01	0.99 (0.01–5.49)
2009	0	0.88	0.00 (0.00–4.17)
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)			
2011	0	0.03	0.00 (0.00–144.04)
2010	0	0.01	0.00 (0.00–346.66)
2009	.	.	.
UPMC PRESBYTERIAN SHADYSIDE — PRESBYTERIAN (10348)			
2011	0	0.18	0.00 (0.00–20.13)
2010	0	0.02	0.00 (0.00–195.02)
2009	.	.	.
HERITAGE VALLEY SEWICKLEY (10375)			
2011	0	0.67	0.00 (0.00–5.44)
2010	0	1.14	0.00 (0.00–3.21)
2009	1	1.19	0.84 (0.01–4.66)
ARIA HEALTH (11388)			
2011	0	0.28	0.00 (0.00–13.12)
2010	2	0.49	4.10 (0.46–14.79)
2009	2	0.43	4.62 (0.52–16.69)

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Table 4.5.13 – Rate of SSIs (SIR) — HYST Procedures – Continued from previous page

	Number of SSIs (HYST)	Predicted Number of SSIs (HYST)	SIR (95% CI)
BERWICK HOSPITAL CENTER (11442)			
2011	0	0.51	0.00 (0.00–7.18)
2010	0	0.75	0.00 (0.00–4.90)
2009	1	0.71	1.41 (0.02–7.83)
THE WASHINGTON HOSPITAL (11460)			
2011	0	1.62	0.00 (0.00–2.26)
2010	3	1.54	1.95 (0.39–5.71)
2009	1	1.67	0.60 (0.01–3.33)
GETTYSBURG HOSPITAL (11531)			
2011	0	0.93	0.00 (0.00–3.94)
2010	0	0.73	0.00 (0.00–5.05)
2009	0	0.73	0.00 (0.00–5.03)
MEADVILLE MEDICAL CENTER (11583)			
2011	0	0.19	0.00 (0.00–18.91)
2010	0	0.20	0.00 (0.00–18.44)
2009	1	0.86	1.16 (0.02–6.45)
CANONSBURG GENERAL HOSPITAL (11586)			
2011	0	0.07	0.00 (0.00–55.17)
2010	0	0.09	0.00 (0.00–41.60)
2009	0	0.05	0.00 (0.00–81.09)
DUBOIS REGIONAL MEDICAL CENTER (11606)			
2011	0	1.27	0.00 (0.00–2.88)
2010	2	1.80	1.11 (0.12–4.01)
2009	1	0.94	1.07 (0.01–5.94)
WAYNESBORO HOSPITAL (11642)			
2011	0	0.56	0.00 (0.00–6.53)
2010	1	0.48	2.09 (0.03–11.63)
2009	0	0.59	0.00 (0.00–6.19)
EXCELA HEALTH LATROBE HOSPITAL (11651)			
2011	0	0.61	0.00 (0.00–6.01)
2010	1	1.34	0.75 (0.01–4.15)
2009	0	1.15	0.00 (0.00–3.20)
CLARION HOSPITAL (11654)			
2011	0	0.36	0.00 (0.00–10.29)
2010	2	0.77	2.61 (0.29–9.44)
2009	0	0.86	0.00 (0.00–4.24)
MERCY FITZGERALD HOSPITAL (11683)			
2011	0	0.47	0.00 (0.00–7.79)
2010	1	0.56	1.78 (0.02–9.89)
2009	2	0.84	2.37 (0.27–8.55)
JERSEY SHORE HOSPITAL (11689)			
2011	0	0.01	0.00 (0.00–323.09)
2010	.	.	.
2009	.	.	.
ST. LUKES QUAKERTOWN HOSPITAL (11711)			
2011	0	0.07	0.00 (0.00–51.90)
2010	0	0.08	0.00 (0.00–45.88)
2009	0	0.09	0.00 (0.00–40.96)
ST. LUKES HOSPITAL BETHLEHEM (11718)			
2011	0	2.08	0.00 (0.00–1.76)
2010	1	1.78	0.56 (0.01–3.12)
2009	1	3.48	0.29 (0.00–1.60)
GROVE CITY MEDICAL CENTER (11722)			
2011	0	0.34	0.00 (0.00–10.94)
2010	0	0.29	0.00 (0.00–12.68)
2009	0	0.27	0.00 (0.00–13.45)

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Table 4.5.13 – Rate of SSIs (SIR) — HYST Procedures – Continued from previous page

	Number of SSIs (HYST)	Predicted Number of SSIs (HYST)	SIR (95% CI)
RIDDLE MEMORIAL HOSPITAL (11731)			
2011	0	1.21	0.00 (0.00–3.03)
2010	1	1.31	0.76 (0.01–4.25)
2009	1	1.32	0.76 (0.01–4.22)
TITUSVILLE AREA HOSPITAL (11738)			
2011	0	0.32	0.00 (0.00–11.45)
2010	2	0.51	3.94 (0.44–14.22)
2009	0	0.35	0.00 (0.00–10.59)
MILTON S HERSHEY MEDICAL CENTER (11747)			
2011	0	0.54	0.00 (0.00–6.80)
2010	0	1.58	0.00 (0.00–2.32)
2009	3	3.44	0.87 (0.18–2.54)
MAIN LINE HOSPITAL — PAOLI (11750)			
2011	0	1.60	0.00 (0.00–2.30)
2010	1	2.15	0.47 (0.01–2.59)
2009	1	1.99	0.50 (0.01–2.80)
MAIN LINE HOSPITAL BRYN MAWR (11753)			
2011	0	0.82	0.00 (0.00–4.48)
2010	1	1.14	0.88 (0.01–4.90)
2009	0	1.00	0.00 (0.00–3.67)
INDIANA REGIONAL MEDICAL CENTER (11759)			
2011	0	0.86	0.00 (0.00–4.27)
2010	0	0.78	0.00 (0.00–4.69)
2009	0	1.10	0.00 (0.00–3.34)
EPHRATA COMMUNITY HOSPITAL (11764)			
2011	0	1.82	0.00 (0.00–2.01)
2010	0	0.71	0.00 (0.00–5.19)
2009	2	1.09	1.84 (0.21–6.63)
ELLWOOD CITY HOSPITAL (11779)			
2011	0	0.05	0.00 (0.00–80.77)
2010	1	0.15	6.59 (0.09–36.69)
2009	1	0.16	6.31 (0.08–35.09)
ST. LUKES MINERS MEMORIAL HOSPITAL (11784)			
2011	0	0.05	0.00 (0.00–70.04)
2010	0	0.18	0.00 (0.00–20.80)
2009	1	0.19	5.20 (0.07–28.92)
PENN PRESBYTERIAN MEDICAL CENTER (11814)			
2011	0	0.12	0.00 (0.00–30.21)
2010	0	0.17	0.00 (0.00–21.56)
2009	1	0.43	2.33 (0.03–12.97)
CROZER CHESTER MEDICAL CENTER SPRINGFIELD (11851)			
2011	0	0.11	0.00 (0.00–34.65)
2010	0	0.12	0.00 (0.00–31.05)
2009	1	0.08	11.91 (0.16–66.27)
ST. MARY MEDICAL CENTER (11885)			
2011	0	1.18	0.00 (0.00–3.12)
2010	1	1.38	0.73 (0.01–4.05)
2009	2	1.65	1.22 (0.14–4.39)
LEHIGH VALLEY HOSPITAL — MUHLENBERG (11898)			
2011	0	0.66	0.00 (0.00–5.57)
2010	1	0.69	1.45 (0.02–8.09)
2009	0	0.63	0.00 (0.00–5.82)
HANOVER HOSPITAL (11899)			
2011	0	0.76	0.00 (0.00–4.83)
2010	2	0.98	2.05 (0.23–7.40)
2009	0	1.02	0.00 (0.00–3.61)

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Table 4.5.13 – Rate of SSIs (SIR) — HYST Procedures – Continued from previous page

	Number of SSIs (HYST)	Predicted Number of SSIs (HYST)	SIR (95% CI)
NASON HOSPITAL (11907)			
2011	0	0.19	0.00 (0.00–18.93)
2010	0	0.15	0.00 (0.00–24.71)
2009	0	0.29	0.00 (0.00–12.76)
GEISINGER-COMMUNITY MEDICAL CENTER (11914)			
2011	0	0.04	0.00 (0.00–89.43)
2010	.	.	.
2009	.	.	.
WILKES-BARRE GENERAL HOSPITAL (11916)			
2011	0	1.35	0.00 (0.00–2.73)
2010	3	1.97	1.52 (0.31–4.45)
2009	2	2.12	0.94 (0.11–3.40)
NAZARETH HOSPITAL (11919)			
2011	0	0.30	0.00 (0.00–12.43)
2010	.	.	.
2009	.	.	.
SCHUYLKILL MEDICAL CENTER — EAST NORWEGIAN STREET (11922)			
2011	0	0.04	0.00 (0.00–99.63)
2010	0	0.03	0.00 (0.00–118.86)
2009	1	0.15	6.89 (0.09–38.36)
EASTON HOSPITAL (11929)			
2011	0	1.82	0.00 (0.00–2.01)
2010	2	1.87	1.07 (0.12–3.87)
2009	3	2.45	1.22 (0.25–3.58)
SOUTHWEST REGIONAL MEDICAL CENTER (11942)			
2011	0	0.02	0.00 (0.00–200.32)
2010	0	0.10	0.00 (0.00–35.76)
2009	.	.	.
MERCY PHILADELPHIA HOSPITAL (11946)			
2011	0	0.30	0.00 (0.00–12.35)
2010	0	0.67	0.00 (0.00–5.49)
2009	0	0.42	0.00 (0.00–8.68)
JAMESON MEMORIAL HOSPITAL (11954)			
2011	0	0.61	0.00 (0.00–6.01)
2010	0	0.67	0.00 (0.00–5.50)
2009	0	0.69	0.00 (0.00–5.31)
CHARLES COLE MEMORIAL HOSPITAL (11956)			
2011	0	0.38	0.00 (0.00–9.63)
2010	0	0.49	0.00 (0.00–7.50)
2009	0	0.25	0.00 (0.00–14.46)
ST. JOSEPH MEDICAL CENTER (11961)			
2011	0	1.04	0.00 (0.00–3.52)
2010	3	1.31	2.29 (0.46–6.68)
2009	0	0.98	0.00 (0.00–3.76)
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)			
2011	0	0.73	0.00 (0.00–5.02)
2010	0	0.89	0.00 (0.00–4.10)
2009	0	0.73	0.00 (0.00–5.05)
HOLY REDEEMER HOSPITAL AND MEDICAL CENTER (11973)			
2011	0	1.39	0.00 (0.00–2.64)
2010	0	1.26	0.00 (0.00–2.91)
2009	0	1.10	0.00 (0.00–3.32)
BRANDYWINE HOSPITAL (11979)			
2011	0	0.61	0.00 (0.00–5.98)
2010	.	.	.
2009	.	.	.

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Table 4.5.13 – Rate of SSIs (SIR) — HYST Procedures – Continued from previous page

	Number of SSIs (HYST)	Predicted Number of SSIs (HYST)	SIR (95% CI)
POTTSTOWN MEMORIAL MEDICAL CENTER (11983)			
2011	0	0.51	0.00 (0.00–7.26)
2010	0	0.54	0.00 (0.00–6.74)
2009	1	0.54	1.86 (0.02–10.37)
CARLISLE REGIONAL MEDICAL CENTER (11997)			
2011	0	0.18	0.00 (0.00–20.80)
2010	0	0.42	0.00 (0.00–8.74)
2009	3	0.51	5.89 (1.18–17.20)
GEISINGER-BLOOMSBURG HOSPITAL (12008)			
2011	0	0.16	0.00 (0.00–22.71)
2010	0	0.13	0.00 (0.00–28.63)
2009	0	0.35	0.00 (0.00–10.52)
THOMAS JEFFERSON UNIV HOSP - METHODIST (12017)			
2011	0	0.17	0.00 (0.00–21.54)
2010	0	0.17	0.00 (0.00–21.22)
2009	0	0.22	0.00 (0.00–16.88)
TROY COMMUNITY HOSPITAL (12018)			
2011	0	0.07	0.00 (0.00–52.97)
2010	0	0.04	0.00 (0.00–91.77)
2009	0	0.03	0.00 (0.00–120.09)
WINDBER HOSPITAL (12031)			
2011	0	0.20	0.00 (0.00–18.81)
2010	0	0.36	0.00 (0.00–10.13)
2009	0	0.70	0.00 (0.00–5.21)
ARMSTRONG COUNTY MEMORIAL HOSPITAL (12057)			
2011	0	0.17	0.00 (0.00–22.01)
2010	0	0.20	0.00 (0.00–18.44)
2009	0	0.46	0.00 (0.00–8.04)
LOCK HAVEN HOSPITAL (12097)			
2011	0	0.18	0.00 (0.00–20.27)
2010	1	0.18	5.42 (0.07–30.15)
2009	1	0.17	5.81 (0.08–32.33)
HOSPITAL OF FOX CHASE CANCER CENTER (12134)			
2011	0	3.71	0.00 (0.00–0.99)
2010	3	4.24	0.71 (0.14–2.07)
2009	2	4.16	0.48 (0.05–1.73)
WARREN GENERAL HOSPITAL (12216)			
2011	0	1.56	0.00 (0.00–2.36)
2010	0	1.25	0.00 (0.00–2.95)
2009	1	0.93	1.07 (0.01–5.96)
SHARON REGIONAL HEALTH SYSTEM (12250)			
2011	0	0.13	0.00 (0.00–28.21)
2010	0	0.34	0.00 (0.00–10.91)
2009	0	0.35	0.00 (0.00–10.42)
MILLCREEK COMMUNITY HOSPITAL (12253)			
2011	0	0.39	0.00 (0.00–9.40)
2010	0	0.51	0.00 (0.00–7.22)
2009	1	0.43	2.34 (0.03–13.03)
SOMERSET HOSPITAL (12282)			
2011	0	0.16	0.00 (0.00–22.61)
2010	0	0.42	0.00 (0.00–8.83)
2009	0	0.48	0.00 (0.00–7.72)
MINERS MEDICAL CENTER (12295)			
2011	0	0.02	0.00 (0.00–200.32)
2010	0	0.01	0.00 (0.00–346.66)
2009	.	.	.

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Table 4.5.13 – Rate of SSIs (SIR) — HYST Procedures – Continued from previous page

	Number of SSIs (HYST)	Predicted Number of SSIs (HYST)	SIR (95% CI)
OHIO VALLEY GENERAL HOSPITAL (12298)			
2011	0	0.11	0.00 (0.00–32.84)
2010	0	0.16	0.00 (0.00–22.61)
2009	1	0.82	1.22 (0.02–6.76)
CHESTNUT HILL HOSPITAL (12304)			
2011	0	2.34	0.00 (0.00–1.57)
2010	1	2.39	0.42 (0.01–2.33)
2009	0	1.13	0.00 (0.00–3.26)
LANCASTER REGIONAL MEDICAL CENTER (12335)			
2011	0	1.11	0.00 (0.00–3.30)
2010	2	0.38	5.21 (0.59–18.81)
2009	1	0.09	11.05 (0.14–61.50)
JENNERSVILLE REGIONAL HOSPITAL (12337)			
2011	0	0.06	0.00 (0.00–66.54)
2010	0	0.29	0.00 (0.00–12.49)
2009	0	0.29	0.00 (0.00–12.70)
EASTERN REGIONAL MEDICAL CENTER (12348)			
2011	0	0.29	0.00 (0.00–12.72)
2010	0	0.07	0.00 (0.00–53.57)
2009	0	0.19	0.00 (0.00–19.25)
HOLY SPIRIT HOSPITAL (12387)			
2011	0	0.28	0.00 (0.00–13.26)
2010	0	0.70	0.00 (0.00–5.24)
2009	3	1.03	2.90 (0.58–8.47)
BARNES-KASSON COUNTY HOSPITAL (12404)			
2011	0	0.02	0.00 (0.00–161.54)
2010	0	0.04	0.00 (0.00–86.66)
2009	0	0.02	0.00 (0.00–231.32)
BROOKVILLE HOSPITAL (12418)			
2011	0	0.08	0.00 (0.00–48.86)
2010	0	0.10	0.00 (0.00–37.14)
2009	2	0.13	14.84 (1.67–53.57)
ROBERT PACKER HOSPITAL (12422)			
2011	0	1.62	0.00 (0.00–2.27)
2010	0	1.05	0.00 (0.00–3.48)
2009	0	0.63	0.00 (0.00–5.87)
WESTFIELD HOSPITAL (12487)			
2011	0	0.20	0.00 (0.00–18.51)
2010	1	0.27	3.68 (0.05–20.49)
2009	0	0.16	0.00 (0.00–22.34)
REGIONAL HOSPITAL OF SCRANTON (12533)			
2011	0	0.06	0.00 (0.00–61.83)
2010	0	0.08	0.00 (0.00–47.28)
2009	1	0.89	1.12 (0.01–6.23)
SURGICAL INSTITUTE OF READING (12535)			
2011	0	0.07	0.00 (0.00–55.34)
2010	0	0.06	0.00 (0.00–62.40)
2009	0	0.09	0.00 (0.00–39.53)
MEMORIAL HOSPITAL, INC. TOWANDA (12549)			
2011	0	0.23	0.00 (0.00–16.19)
2010	0	0.21	0.00 (0.00–17.58)
2009	0	0.40	0.00 (0.00–9.18)
PHYSICIANS CARE SURGICAL HOSPITAL (19630)			
2011	0	0.18	0.00 (0.00–19.91)
2010	.	.	.
2009	.	.	.

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Table 4.5.13 – Rate of SSIs (SIR) — HYST Procedures – Continued from previous page

	Number of SSIs (HYST)	Predicted Number of SSIs (HYST)	SIR (95% CI)
CROZER CHESTER MEDICAL CENTER (11839)			
2011	1	3.03	0.33 (0.00–1.84)
2010	1	3.10	0.32 (0.00–1.79)
2009	3	4.43	0.68 (0.14–1.98)
GRAND VIEW HOSPITAL (11847)			
2011	1	2.61	0.38 (0.01–2.13)
2010	0	2.16	0.00 (0.00–1.69)
2009	0	1.85	0.00 (0.00–1.99)
LEHIGH VALLEY HOSPITAL (11884)			
2011	4	10.30	0.39 (0.10–0.99)
2010	1	4.58	0.22 (0.00–1.22)
2009	4	4.89	0.82 (0.22–2.10)
UPMC PRESBYTERIAN SHADYSIDE — SHADYSIDE (10118)			
2011	1	2.34	0.43 (0.01–2.38)
2010	4	1.18	3.40 (0.91–8.70)
2009	4	1.87	2.13 (0.57–5.46)
HAHNEMANN UNIVERSITY HOSPITAL (11437)			
2011	1	2.26	0.44 (0.01–2.46)
2010	0	2.47	0.00 (0.00–1.49)
2009	0	2.37	0.00 (0.00–1.55)
POCONO MEDICAL CENTER (11772)			
2011	1	2.21	0.45 (0.01–2.51)
2010	1	1.93	0.52 (0.01–2.88)
2009	0	0.88	0.00 (0.00–4.15)
TEMPLE UNIVERSITY HOSPITAL (12382)			
2011	3	6.47	0.46 (0.09–1.35)
2010	3	5.49	0.55 (0.11–1.60)
2009	5	4.56	1.10 (0.35–2.56)
HEART OF LANCASTER REGIONAL MEDICAL CENTER (12571)			
2011	1	2.03	0.49 (0.01–2.75)
2010	2	0.67	2.97 (0.33–10.73)
2009	1	0.21	4.85 (0.06–26.99)
READING HOSPITAL AND MEDICAL CENTER (12375)			
2011	3	5.90	0.51 (0.10–1.49)
2010	2	6.62	0.30 (0.03–1.09)
2009	2	7.74	0.26 (0.03–0.93)
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)			
2011	1	1.61	0.62 (0.01–3.46)
2010	0	1.14	0.00 (0.00–3.23)
2009	1	1.40	0.72 (0.01–3.99)
UPMC HAMOT (11725)			
2011	1	1.50	0.67 (0.01–3.70)
2010	0	0.75	0.00 (0.00–4.91)
2009	1	1.04	0.96 (0.01–5.35)
MOSES TAYLOR HOSPITAL (11528)			
2011	2	2.94	0.68 (0.08–2.45)
2010	2	3.52	0.57 (0.06–2.05)
2009	3	3.44	0.87 (0.18–2.55)
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)			
2011	3	4.38	0.69 (0.14–2.00)
2010	1	4.34	0.23 (0.00–1.28)
2009	3	4.62	0.65 (0.13–1.90)
ABINGTON MEMORIAL HOSPITAL (11838)			
2011	5	6.99	0.72 (0.23–1.67)
2010	6	7.63	0.79 (0.29–1.71)
2009	2	5.11	0.39 (0.04–1.41)

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Table 4.5.13 – Rate of SSIs (SIR) — HYST Procedures – Continued from previous page

	Number of SSIs (HYST)	Predicted Number of SSIs (HYST)	SIR (95% CI)
FORBES REGIONAL HOSPITAL (11265)			
2011	1	1.27	0.79 (0.01–4.38)
2010	1	0.85	1.18 (0.02–6.57)
2009	0	1.19	0.00 (0.00–3.07)
PINNACLE HEALTH HOSPITALS (10122)			
2011	9	10.26	0.88 (0.40–1.67)
2010	4	4.74	0.84 (0.23–2.16)
2009	7	6.27	1.12 (0.45–2.30)
UPMC PASSAVANT (11242)			
2011	6	6.46	0.93 (0.34–2.02)
2010	0	3.87	0.00 (0.00–0.95)
2009	1	3.02	0.33 (0.00–1.84)
SCHUYLKILL MEDICAL CENTER — SOUTH JACKSON STREET (12087)			
2011	1	0.99	1.01 (0.01–5.64)
2010	3	1.44	2.08 (0.42–6.09)
2009	1	1.59	0.63 (0.01–3.49)
UPMC HORIZON (11675)			
2011	1	0.91	1.09 (0.01–6.08)
2010	1	1.05	0.95 (0.01–5.28)
2009	1	1.72	0.58 (0.01–3.23)
UNIONTOWN HOSPITAL (10441)			
2011	3	2.74	1.09 (0.22–3.20)
2010	5	2.39	2.10 (0.68–4.89)
2009	5	2.64	1.89 (0.61–4.42)
ELK REGIONAL HEALTH CENTER (11859)			
2011	1	0.89	1.12 (0.01–6.22)
2010	1	0.79	1.27 (0.02–7.05)
2009	0	0.26	0.00 (0.00–14.21)
MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)			
2011	20	17.85	1.12 (0.68–1.73)
2010	19	18.86	1.01 (0.61–1.57)
2009	17	19.28	0.88 (0.51–1.41)
GEISINGER MEDICAL CENTER (11775)			
2011	5	4.29	1.16 (0.38–2.72)
2010	8	4.45	1.80 (0.77–3.54)
2009	7	4.53	1.54 (0.62–3.18)
CHESTER COUNTY HOSPITAL (12016)			
2011	2	1.71	1.17 (0.13–4.23)
2010	0	2.43	0.00 (0.00–1.51)
2009	1	3.12	0.32 (0.00–1.78)
CHAMBERSBURG HOSPITAL (11913)			
2011	1	0.80	1.25 (0.02–6.96)
2010	1	1.42	0.70 (0.01–3.92)
2009	0	2.09	0.00 (0.00–1.75)
LANCASTER GENERAL HOSPITAL (10183)			
2011	4	3.07	1.30 (0.35–3.33)
2010	4	3.95	1.01 (0.27–2.59)
2009	7	4.72	1.48 (0.59–3.05)
HERITAGE VALLEY BEAVER (11831)			
2011	2	1.53	1.31 (0.15–4.73)
2010	3	1.39	2.16 (0.43–6.30)
2009	3	1.02	2.95 (0.59–8.61)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)			
2011	3	2.28	1.32 (0.26–3.84)
2010	2	2.14	0.94 (0.11–3.38)
2009	2	2.16	0.93 (0.10–3.35)

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Table 4.5.13 – Rate of SSIs (SIR) — HYST Procedures – Continued from previous page

	Number of SSIs (HYST)	Predicted Number of SSIs (HYST)	SIR (95% CI)
UPMC BEDFORD (11680)			
2011	1	0.74	1.35 (0.02–7.50)
2010	1	0.98	1.02 (0.01–5.70)
2009	0	0.79	0.00 (0.00–4.66)
THE WESTERN PENNSYLVANIA HOSPITAL (11864)			
2011	6	4.43	1.36 (0.49–2.95)
2010	14	7.46	1.88 (1.02–3.15)
2009	19	9.93	1.91 (1.15–2.99)
ALLEGHENY GENERAL HOSPITAL (10648)			
2011	1	0.69	1.44 (0.02–8.02)
2010	2	1.59	1.26 (0.14–4.55)
2009	5	3.84	1.30 (0.42–3.04)
YORK HOSPITAL (10108)			
2011	13	8.76	1.48 (0.79–2.54)
2010	9	7.94	1.13 (0.52–2.15)
2009	2	7.20	0.28 (0.03–1.00)
WAYNE MEMORIAL HOSPITAL (12004)			
2011	1	0.67	1.49 (0.02–8.27)
2010	1	1.26	0.79 (0.01–4.42)
2009	2	1.08	1.86 (0.21–6.71)
ALBERT EINSTEIN MEDICAL CENTER (10585)			
2011	3	2.01	1.49 (0.30–4.37)
2010	1	2.32	0.43 (0.01–2.40)
2009	1	2.26	0.44 (0.01–2.47)
EVANGELICAL COMMUNITY HOSPITAL (11701)			
2011	1	0.66	1.52 (0.02–8.47)
2010	1	1.44	0.69 (0.01–3.86)
2009	1	1.83	0.55 (0.01–3.04)
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)			
2011	2	1.25	1.60 (0.18–5.77)
2010	4	1.14	3.51 (0.94–8.98)
2009	0	1.30	0.00 (0.00–2.83)
MERCY SUBURBAN HOSPITAL NORRISTOWN (11952)			
2011	1	0.59	1.69 (0.02–9.40)
2010	2	0.40	5.03 (0.57–18.17)
2009	0	0.66	0.00 (0.00–5.53)
THOMAS JEFFERSON UNIV HOSPITAL (11506)			
2011	7	4.06	1.73 (0.69–3.56)
2010	4	4.10	0.98 (0.26–2.50)
2009	12	5.33	2.25 (1.16–3.94)
ST. VINCENT HEALTH CENTER (11699)			
2011	3	1.69	1.77 (0.36–5.18)
2010	3	3.13	0.96 (0.19–2.80)
2009	7	1.70	4.11 (1.65–8.47)
UPMC ST MARGARET (11561)			
2011	1	0.56	1.77 (0.02–9.88)
2010	1	0.50	2.02 (0.03–11.23)
2009	1	0.51	1.96 (0.03–10.90)
HAZLETON GENERAL HOSPITAL (11878)			
2011	1	0.56	1.79 (0.02–9.95)
2010	1	0.67	1.50 (0.02–8.32)
2009	0	0.74	0.00 (0.00–4.95)
PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS (11448)			
2011	8	4.38	1.82 (0.79–3.60)
2010	7	2.55	2.74 (1.10–5.65)
2009	4	2.93	1.37 (0.37–3.50)

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Table 4.5.13 – Rate of SSIs (SIR) — HYST Procedures – Continued from previous page

	Number of SSIs (HYST)	Predicted Number of SSIs (HYST)	SIR (95% CI)
HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)			
2011	8	4.27	1.87 (0.81–3.69)
2010	7	2.40	2.92 (1.17–6.01)
2009	11	2.13	5.16 (2.57–9.24)
UPMC MERCY (10384)			
2011	8	4.25	1.88 (0.81–3.71)
2010	10	4.88	2.05 (0.98–3.77)
2009	7	4.29	1.63 (0.65–3.36)
SACRED HEART HOSPITAL (11684)			
2011	6	3.02	1.99 (0.73–4.33)
2010	3	3.38	0.89 (0.18–2.59)
2009	1	3.52	0.28 (0.00–1.58)
JEANES HOSPITAL (11459)			
2011	2	0.85	2.35 (0.26–8.47)
2010	0	1.06	0.00 (0.00–3.45)
2009	1	1.52	0.66 (0.01–3.67)
MOUNT NITTANY MEDICAL CENTER (11797)			
2011	4	1.69	2.36 (0.64–6.05)
2010	2	1.46	1.37 (0.15–4.95)
2009	4	1.34	2.98 (0.80–7.63)
ST. CLAIR MEMORIAL HOSPITAL (10561)			
2011	6	2.51	2.39 (0.87–5.20)
2010	3	2.37	1.27 (0.25–3.70)
2009	1	1.93	0.52 (0.01–2.88)
ALTOONA REGIONAL HEALTH SYSTEM (10178)			
2011	5	2.01	2.49 (0.80–5.80)
2010	3	2.56	1.17 (0.24–3.43)
2009	4	3.47	1.15 (0.31–2.96)
MEMORIAL HOSPITAL (11633)			
2011	2	0.78	2.57 (0.29–9.29)
2010	0	1.62	0.00 (0.00–2.27)
2009	1	1.31	0.76 (0.01–4.24)
UPMC MCKEESPORT (11707)			
2011	1	0.39	2.59 (0.03–14.41)
2010	3	0.49	6.16 (1.24–17.99)
2009	0	0.43	0.00 (0.00–8.53)
CLEARFIELD HOSPITAL (11843)			
2011	1	0.37	2.71 (0.04–15.10)
2010	1	0.42	2.41 (0.03–13.41)
2009	2	0.50	4.00 (0.45–14.43)
BUTLER MEMORIAL HOSPITAL (11736)			
2011	4	1.40	2.86 (0.77–7.32)
2010	3	1.55	1.94 (0.39–5.67)
2009	1	1.42	0.70 (0.01–3.92)
ALLEGHENY VALLEY HOSPITAL (11842)			
2011	1	0.35	2.88 (0.04–16.03)
2010	1	0.94	1.07 (0.01–5.93)
2009	0	1.16	0.00 (0.00–3.17)
LEWISTOWN HOSPITAL (11825)			
2011	4	1.24	3.22 (0.87–8.24)
2010	2	3.07	0.65 (0.07–2.35)
2009	1	2.15	0.46 (0.01–2.58)
UPMC NORTHWEST (11837)			
2011	3	0.80	3.73 (0.75–10.89)
2010	0	0.76	0.00 (0.00–4.85)
2009	2	0.60	3.34 (0.38–12.06)

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Table 4.5.13 – Rate of SSIs (SIR) — HYST Procedures – Continued from previous page

	Number of SSIs (HYST)	Predicted Number of SSIs (HYST)	SIR (95% CI)
THE GOOD SAMARITAN HOSPITAL (11712)			
2011	3	0.80	3.73 (0.75–10.91)
2010	0	0.95	0.00 (0.00–3.86)
2009	0	1.09	0.00 (0.00–3.37)
SOLDIERS & SAILORS MEM HOSPITAL (11688)			
2011	2	0.53	3.79 (0.43–13.67)
2010	0	0.41	0.00 (0.00–8.88)
2009	1	0.52	1.93 (0.03–10.73)
GNADEN HUETTEN MEMORIAL HOSPITAL (12241)			
2011	1	0.24	4.13 (0.05–23.00)
2010	2	0.23	8.68 (0.97–31.34)
2009	2	0.19	10.40 (1.17–37.54)
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)			
2011	3	0.71	4.25 (0.85–12.41)
2010	2	0.78	2.56 (0.29–9.26)
2009	0	0.50	0.00 (0.00–7.32)
ST. JOSEPHS HOSPITAL (12438)			
2011	1	0.20	4.95 (0.06–27.54)
2010	2	0.31	6.38 (0.72–23.03)
2009	0	0.18	0.00 (0.00–20.12)
PUNXSUTAWNEY AREA HOSPITAL (11830)			
2011	1	0.19	5.35 (0.07–29.76)
2010	0	0.17	0.00 (0.00–21.52)
2009	0	0.19	0.00 (0.00–18.84)
LOWER BUCKS HOSPITAL (12390)			
2011	3	0.50	5.99 (1.20–17.49)
2010	0	1.12	0.00 (0.00–3.26)
2009	0	1.04	0.00 (0.00–3.53)
BRADFORD REGIONAL MEDICAL CENTER (12361)			
2011	2	0.33	6.06 (0.68–21.88)
2010	0	0.36	0.00 (0.00–10.28)
2009	0	0.29	0.00 (0.00–12.55)
MONONGAHELA VALLEY HOSPITAL (11069)			
2011	2	0.32	6.28 (0.71–22.69)
2010	1	0.20	5.00 (0.07–27.84)
2009	0	0.29	0.00 (0.00–12.85)
J C BLAIR MEMORIAL HOSP (11724)			
2011	3	0.32	9.49 (1.91–27.73)
2010	.	.	.
2009	1	0.06	15.48 (0.20–86.13)
TYRONE HOSPITAL (12717)			
2011	2	0.05	44.04 (4.95–159.01)
2010	0	0.01	0.00 (0.00–346.66)
2009	0	0.05	0.00 (0.00–77.11)

Table 4.5.14: Rate (SIR) of Surgical Site Infections (SSIs) Associated with Each Benchmarked Procedure by Hospital in Alphabetical Order — Pennsylvania, 2009–2011

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
ABINGTON MEMORIAL HOSPITAL (11838)			
Cardiac (CARD)	0	1.44	0.00 (0.00–2.55)
Cardiac Bypass — Single Incision (CBGC)	0	0.04	0.00 (0.00–92.17)
Cardiac Bypass — Dual Incision (CBGB)	3	3.72	0.81 (0.16–2.36)
Knee Arthroplasty (KPRO)	4	4.64	0.86 (0.23–2.21)
Hip Arthroplasty (HPRO)	3	7.51	0.40 (0.08–1.17)
Abdominal Hysterectomy (HYST)	5	6.99	0.72 (0.23–1.67)
ADVANCED SURGICAL HOSPITAL (16317)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	2.67	0.37 (0.00–2.09)
Hip Arthroplasty (HPRO)	1	1.68	0.59 (0.01–3.30)
Abdominal Hysterectomy (HYST)	.	.	.
ALBERT EINSTEIN MEDICAL CENTER (10585)			
Cardiac (CARD)	0	0.32	0.00 (0.00–11.41)
Cardiac Bypass — Single Incision (CBGC)	1	0.07	14.30 (0.19–79.59)
Cardiac Bypass — Dual Incision (CBGB)	8	1.59	5.02 (2.16–9.89)
Knee Arthroplasty (KPRO)	1	0.49	2.03 (0.03–11.30)
Hip Arthroplasty (HPRO)	3	1.09	2.76 (0.55–8.07)
Abdominal Hysterectomy (HYST)	3	2.01	1.49 (0.30–4.37)
ALBERT EINSTEIN MEDICAL CENTER AT ELKINS PARK (12500)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	4	1.14	3.50 (0.94–8.96)
Hip Arthroplasty (HPRO)	1	0.77	1.30 (0.02–7.24)
Abdominal Hysterectomy (HYST)	.	.	.
ALLEGHENY GENERAL HOSPITAL (10648)			
Cardiac (CARD)	0	2.77	0.00 (0.00–1.32)
Cardiac Bypass — Single Incision (CBGC)	1	0.46	2.16 (0.03–11.99)
Cardiac Bypass — Dual Incision (CBGB)	13	5.81	2.24 (1.19–3.83)
Knee Arthroplasty (KPRO)	4	7.13	0.56 (0.15–1.44)
Hip Arthroplasty (HPRO)	10	7.95	1.26 (0.60–2.31)
Abdominal Hysterectomy (HYST)	1	0.69	1.44 (0.02–8.02)
ALLEGHENY VALLEY HOSPITAL (11842)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	1.15	0.00 (0.00–3.19)
Hip Arthroplasty (HPRO)	2	1.54	1.30 (0.15–4.70)
Abdominal Hysterectomy (HYST)	1	0.35	2.88 (0.04–16.03)
ALTOONA REGIONAL HEALTH SYSTEM (10178)			
Cardiac (CARD)	0	1.25	0.00 (0.00–2.92)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	2	3.07	0.65 (0.07–2.35)
Knee Arthroplasty (KPRO)	3	3.95	0.76 (0.15–2.22)
Hip Arthroplasty (HPRO)	7	4.32	1.62 (0.65–3.34)
Abdominal Hysterectomy (HYST)	5	2.01	2.49 (0.80–5.80)

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Table 4.5.14 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
ARIA HEALTH (11388)			
Cardiac (CARD)	0	0.68	0.00 (0.00–5.39)
Cardiac Bypass — Single Incision (CBGC)	0	0.37	0.00 (0.00–9.94)
Cardiac Bypass — Dual Incision (CBGB)	2	2.44	0.82 (0.09–2.96)
Knee Arthroplasty (KPRO)	4	1.90	2.10 (0.56–5.38)
Hip Arthroplasty (HPRO)	0	2.30	0.00 (0.00–1.60)
Abdominal Hysterectomy (HYST)	0	0.28	0.00 (0.00–13.12)
ARMSTRONG COUNTY MEMORIAL HOSPITAL (12057)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	1.40	0.00 (0.00–2.63)
Hip Arthroplasty (HPRO)	2	1.23	1.63 (0.18–5.89)
Abdominal Hysterectomy (HYST)	0	0.17	0.00 (0.00–22.01)
BARNES-KASSON COUNTY HOSPITAL (12404)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.06	0.00 (0.00–60.86)
Hip Arthroplasty (HPRO)	.	.	.
Abdominal Hysterectomy (HYST)	0	0.02	0.00 (0.00–161.54)
BERWICK HOSPITAL CENTER (11442)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	1.20	0.00 (0.00–3.06)
Hip Arthroplasty (HPRO)	0	0.45	0.00 (0.00–8.08)
Abdominal Hysterectomy (HYST)	0	0.51	0.00 (0.00–7.18)
BRADFORD REGIONAL MEDICAL CENTER (12361)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.19	0.00 (0.00–19.77)
Hip Arthroplasty (HPRO)	0	0.42	0.00 (0.00–8.78)
Abdominal Hysterectomy (HYST)	2	0.33	6.06 (0.68–21.88)
BRANDYWINE HOSPITAL (11979)			
Cardiac (CARD)	0	0.21	0.00 (0.00–17.62)
Cardiac Bypass — Single Incision (CBGC)	0	0.03	0.00 (0.00–138.26)
Cardiac Bypass — Dual Incision (CBGB)	7	0.95	7.36 (2.95–15.16)
Knee Arthroplasty (KPRO)	1	0.55	1.83 (0.02–10.17)
Hip Arthroplasty (HPRO)	0	1.02	0.00 (0.00–3.60)
Abdominal Hysterectomy (HYST)	0	0.61	0.00 (0.00–5.98)
BROOKVILLE HOSPITAL (12418)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.02	0.00 (0.00–213.49)
Hip Arthroplasty (HPRO)	0	0.04	0.00 (0.00–87.95)
Abdominal Hysterectomy (HYST)	0	0.08	0.00 (0.00–48.86)

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Table 4.5.14 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
BUCKS COUNTY SPECIALTY HOSPITAL (15202)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	1.27	0.00 (0.00–2.88)
Hip Arthroplasty (HPRO)	0	2.14	0.00 (0.00–1.71)
Abdominal Hysterectomy (HYST)	.	.	.
BUTLER MEMORIAL HOSPITAL (11736)			
Cardiac (CARD)	0	0.74	0.00 (0.00–4.96)
Cardiac Bypass — Single Incision (CBGC)	0	0.21	0.00 (0.00–17.49)
Cardiac Bypass — Dual Incision (CBGB)	4	5.00	0.80 (0.22–2.05)
Knee Arthroplasty (KPRO)	3	2.64	1.14 (0.23–3.32)
Hip Arthroplasty (HPRO)	2	2.00	1.00 (0.11–3.60)
Abdominal Hysterectomy (HYST)	4	1.40	2.86 (0.77–7.32)
CANONSBURG GENERAL HOSPITAL (11586)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	3	2.26	1.33 (0.27–3.88)
Hip Arthroplasty (HPRO)	0	1.45	0.00 (0.00–2.53)
Abdominal Hysterectomy (HYST)	0	0.07	0.00 (0.00–55.17)
CARLISLE REGIONAL MEDICAL CENTER (11997)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	5	2.03	2.47 (0.79–5.75)
Hip Arthroplasty (HPRO)	2	1.24	1.61 (0.18–5.82)
Abdominal Hysterectomy (HYST)	0	0.18	0.00 (0.00–20.80)
CHAMBERSBURG HOSPITAL (11913)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	3	4.25	0.71 (0.14–2.06)
Hip Arthroplasty (HPRO)	4	3.53	1.13 (0.31–2.90)
Abdominal Hysterectomy (HYST)	1	0.80	1.25 (0.02–6.96)
CHARLES COLE MEMORIAL HOSPITAL (11956)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	2	0.94	2.13 (0.24–7.69)
Hip Arthroplasty (HPRO)	1	0.78	1.28 (0.02–7.13)
Abdominal Hysterectomy (HYST)	0	0.38	0.00 (0.00–9.63)
CHESTER COUNTY HOSPITAL (12016)			
Cardiac (CARD)	1	0.83	1.20 (0.02–6.67)
Cardiac Bypass — Single Incision (CBGC)	1	0.17	5.85 (0.08–32.54)
Cardiac Bypass — Dual Incision (CBGB)	2	1.84	1.09 (0.12–3.93)
Knee Arthroplasty (KPRO)	2	1.75	1.14 (0.13–4.13)
Hip Arthroplasty (HPRO)	2	2.55	0.79 (0.09–2.84)
Abdominal Hysterectomy (HYST)	2	1.71	1.17 (0.13–4.23)
CHESTNUT HILL HOSPITAL (12304)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.17	6.04 (0.08–33.60)
Hip Arthroplasty (HPRO)	3	0.54	5.61 (1.13–16.38)
Abdominal Hysterectomy (HYST)	0	2.34	0.00 (0.00–1.57)

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Table 4.5.14 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)			
Cardiac (CARD)	10	5.56	1.80 (0.86–3.31)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	.	.	.
Hip Arthroplasty (HPRO)	0	0.05	0.00 (0.00–71.94)
Abdominal Hysterectomy (HYST)	0	0.03	0.00 (0.00–144.04)
CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)			
Cardiac (CARD)	9	2.13	4.22 (1.92–8.01)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	.	.	.
Hip Arthroplasty (HPRO)	.	.	.
Abdominal Hysterectomy (HYST)	.	.	.
CLARION HOSPITAL (11654)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.53	1.90 (0.02–10.60)
Hip Arthroplasty (HPRO)	1	0.85	1.18 (0.02–6.57)
Abdominal Hysterectomy (HYST)	0	0.36	0.00 (0.00–10.29)
CLEARFIELD HOSPITAL (11843)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.61	0.00 (0.00–6.01)
Hip Arthroplasty (HPRO)	1	0.59	1.69 (0.02–9.39)
Abdominal Hysterectomy (HYST)	1	0.37	2.71 (0.04–15.10)
CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)			
Cardiac (CARD)	0	1.23	0.00 (0.00–2.98)
Cardiac Bypass — Single Incision (CBGC)	0	0.20	0.00 (0.00–18.11)
Cardiac Bypass — Dual Incision (CBGB)	3	2.75	1.09 (0.22–3.18)
Knee Arthroplasty (KPRO)	1	4.25	0.24 (0.00–1.31)
Hip Arthroplasty (HPRO)	2	3.91	0.51 (0.06–1.84)
Abdominal Hysterectomy (HYST)	0	0.60	0.00 (0.00–6.15)
COORDINATED HEALTH ORTHOPEDIC HOSPITAL, LLC (11872)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	3	4.74	0.63 (0.13–1.85)
Hip Arthroplasty (HPRO)	2	1.55	1.29 (0.14–4.65)
Abdominal Hysterectomy (HYST)	.	.	.
CORRY MEMORIAL HOSPITAL (12283)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.13	7.60 (0.10–42.26)
Hip Arthroplasty (HPRO)	.	.	.
Abdominal Hysterectomy (HYST)	.	.	.
CROZER CHESTER MEDICAL CENTER (11839)			
Cardiac (CARD)	0	0.63	0.00 (0.00–5.81)
Cardiac Bypass — Single Incision (CBGC)	0	0.45	0.00 (0.00–8.08)
Cardiac Bypass — Dual Incision (CBGB)	1	1.56	0.64 (0.01–3.56)
Knee Arthroplasty (KPRO)	0	1.63	0.00 (0.00–2.25)
Hip Arthroplasty (HPRO)	3	1.92	1.56 (0.31–4.57)
Abdominal Hysterectomy (HYST)	1	3.03	0.33 (0.00–1.84)

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Table 4.5.14 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
CROZER CHESTER MEDICAL CENTER SPRINGFIELD (11851)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.01	0.00 (0.00–425.61)
Hip Arthroplasty (HPRO)	0	0.10	0.00 (0.00–35.68)
Abdominal Hysterectomy (HYST)	0	0.11	0.00 (0.00–34.65)
CROZER CHESTER MEDICAL CENTER TAYLOR (11932)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.45	0.00 (0.00–8.08)
Hip Arthroplasty (HPRO)	0	0.57	0.00 (0.00–6.46)
Abdominal Hysterectomy (HYST)	.	.	.
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	4	1.75	2.28 (0.61–5.84)
Hip Arthroplasty (HPRO)	0	1.33	0.00 (0.00–2.75)
Abdominal Hysterectomy (HYST)	0	0.73	0.00 (0.00–5.02)
DOYLESTOWN HOSPITAL (10190)			
Cardiac (CARD)	1	1.06	0.94 (0.01–5.24)
Cardiac Bypass — Single Incision (CBGC)	0	0.10	0.00 (0.00–38.03)
Cardiac Bypass — Dual Incision (CBGB)	2	2.33	0.86 (0.10–3.10)
Knee Arthroplasty (KPRO)	1	2.04	0.49 (0.01–2.72)
Hip Arthroplasty (HPRO)	2	2.32	0.86 (0.10–3.11)
Abdominal Hysterectomy (HYST)	0	0.85	0.00 (0.00–4.34)
DUBOIS REGIONAL MEDICAL CENTER (11606)			
Cardiac (CARD)	0	0.36	0.00 (0.00–10.29)
Cardiac Bypass — Single Incision (CBGC)	0	0.10	0.00 (0.00–38.03)
Cardiac Bypass — Dual Incision (CBGB)	4	2.45	1.63 (0.44–4.18)
Knee Arthroplasty (KPRO)	2	0.76	2.64 (0.30–9.53)
Hip Arthroplasty (HPRO)	1	0.98	1.02 (0.01–5.67)
Abdominal Hysterectomy (HYST)	0	1.27	0.00 (0.00–2.88)
EASTERN REGIONAL MEDICAL CENTER (12348)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.01	0.00 (0.00–425.61)
Hip Arthroplasty (HPRO)	0	0.21	0.00 (0.00–17.73)
Abdominal Hysterectomy (HYST)	0	0.29	0.00 (0.00–12.72)
EASTON HOSPITAL (11929)			
Cardiac (CARD)	1	0.51	1.96 (0.03–10.92)
Cardiac Bypass — Single Incision (CBGC)	0	0.03	0.00 (0.00–138.26)
Cardiac Bypass — Dual Incision (CBGB)	3	2.68	1.12 (0.22–3.27)
Knee Arthroplasty (KPRO)	1	1.61	0.62 (0.01–3.47)
Hip Arthroplasty (HPRO)	2	1.43	1.40 (0.16–5.06)
Abdominal Hysterectomy (HYST)	0	1.82	0.00 (0.00–2.01)

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Table 4.5.14 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
EDGEWOOD SURGICAL HOSPITAL (12552)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.75	0.00 (0.00–4.86)
Hip Arthroplasty (HPRO)	0	0.32	0.00 (0.00–11.29)
Abdominal Hysterectomy (HYST)	.	.	.
ELK REGIONAL HEALTH CENTER (11859)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.61	0.00 (0.00–6.06)
Hip Arthroplasty (HPRO)	0	0.80	0.00 (0.00–4.57)
Abdominal Hysterectomy (HYST)	1	0.89	1.12 (0.01–6.22)
ELLWOOD CITY HOSPITAL (11779)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.14	0.00 (0.00–26.74)
Hip Arthroplasty (HPRO)	1	0.07	14.31 (0.19–79.60)
Abdominal Hysterectomy (HYST)	0	0.05	0.00 (0.00–80.77)
ENDLESS MOUNTAINS HEALTH SYSTEMS (11817)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.69	1.45 (0.02–8.06)
Hip Arthroplasty (HPRO)	0	0.24	0.00 (0.00–15.02)
Abdominal Hysterectomy (HYST)	.	.	.
EPHRATA COMMUNITY HOSPITAL (11764)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	7	1.64	4.26 (1.71–8.79)
Hip Arthroplasty (HPRO)	2	1.77	1.13 (0.13–4.08)
Abdominal Hysterectomy (HYST)	0	1.82	0.00 (0.00–2.01)
EVANGELICAL COMMUNITY HOSPITAL (11701)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	2	2.76	0.73 (0.08–2.62)
Hip Arthroplasty (HPRO)	3	2.76	1.09 (0.22–3.18)
Abdominal Hysterectomy (HYST)	1	0.66	1.52 (0.02–8.47)
EXCELA HEALTH FRICK HOSPITAL (11639)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.12	8.62 (0.11–47.94)
Hip Arthroplasty (HPRO)	0	0.07	0.00 (0.00–51.82)
Abdominal Hysterectomy (HYST)	.	.	.
EXCELA HEALTH LATROBE HOSPITAL (11651)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	1.23	0.81 (0.01–4.52)
Hip Arthroplasty (HPRO)	2	1.48	1.36 (0.15–4.89)
Abdominal Hysterectomy (HYST)	0	0.61	0.00 (0.00–6.01)

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Table 4.5.14 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)			
Cardiac (CARD)	0	0.68	0.00 (0.00–5.38)
Cardiac Bypass — Single Incision (CBGC)	0	0.08	0.00 (0.00–46.09)
Cardiac Bypass — Dual Incision (CBGB)	0	3.39	0.00 (0.00–1.08)
Knee Arthroplasty (KPRO)	0	2.83	0.00 (0.00–1.30)
Hip Arthroplasty (HPRO)	0	2.65	0.00 (0.00–1.39)
Abdominal Hysterectomy (HYST)	1	1.61	0.62 (0.01–3.46)
FORBES REGIONAL HOSPITAL (11265)			
Cardiac (CARD)	0	0.54	0.00 (0.00–6.76)
Cardiac Bypass — Single Incision (CBGC)	0	0.13	0.00 (0.00–28.98)
Cardiac Bypass — Dual Incision (CBGB)	2	3.04	0.66 (0.07–2.38)
Knee Arthroplasty (KPRO)	2	2.64	0.76 (0.09–2.73)
Hip Arthroplasty (HPRO)	3	3.04	0.99 (0.20–2.88)
Abdominal Hysterectomy (HYST)	1	1.27	0.79 (0.01–4.38)
GEISINGER MEDICAL CENTER (11775)			
Cardiac (CARD)	5	3.10	1.61 (0.52–3.76)
Cardiac Bypass — Single Incision (CBGC)	0	0.24	0.00 (0.00–15.00)
Cardiac Bypass — Dual Incision (CBGB)	9	4.38	2.05 (0.94–3.90)
Knee Arthroplasty (KPRO)	2	3.25	0.62 (0.07–2.22)
Hip Arthroplasty (HPRO)	12	5.33	2.25 (1.16–3.93)
Abdominal Hysterectomy (HYST)	5	4.29	1.16 (0.38–2.72)
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)			
Cardiac (CARD)	3	1.11	2.69 (0.54–7.86)
Cardiac Bypass — Single Incision (CBGC)	1	0.04	23.05 (0.30–128.26)
Cardiac Bypass — Dual Incision (CBGB)	1	1.92	0.52 (0.01–2.90)
Knee Arthroplasty (KPRO)	1	1.95	0.51 (0.01–2.85)
Hip Arthroplasty (HPRO)	4	2.92	1.37 (0.37–3.51)
Abdominal Hysterectomy (HYST)	2	1.25	1.60 (0.18–5.77)
GEISINGER-BLOOMSBURG HOSPITAL (12008)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.72	1.39 (0.02–7.74)
Hip Arthroplasty (HPRO)	0	1.00	0.00 (0.00–3.65)
Abdominal Hysterectomy (HYST)	0	0.16	0.00 (0.00–22.71)
GEISINGER-COMMUNITY MEDICAL CENTER (11914)			
Cardiac (CARD)	0	0.34	0.00 (0.00–10.93)
Cardiac Bypass — Single Incision (CBGC)	0	1.70	0.00 (0.00–2.16)
Cardiac Bypass — Dual Incision (CBGB)	0	0.19	0.00 (0.00–19.33)
Knee Arthroplasty (KPRO)	0	3.95	0.00 (0.00–0.93)
Hip Arthroplasty (HPRO)	1	3.07	0.33 (0.00–1.81)
Abdominal Hysterectomy (HYST)	0	0.04	0.00 (0.00–89.43)
GETTYSBURG HOSPITAL (11531)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	2	1.35	1.49 (0.17–5.37)
Hip Arthroplasty (HPRO)	1	0.73	1.37 (0.02–7.63)
Abdominal Hysterectomy (HYST)	0	0.93	0.00 (0.00–3.94)
GNADEN HUETTEN MEMORIAL HOSPITAL (12241)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.63	1.58 (0.02–8.81)
Hip Arthroplasty (HPRO)	1	0.30	3.39 (0.04–18.84)
Abdominal Hysterectomy (HYST)	1	0.24	4.13 (0.05–23.00)

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Table 4.5.14 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
GRAND VIEW HOSPITAL (11847)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	1.92	0.00 (0.00–1.91)
Hip Arthroplasty (HPRO)	2	2.21	0.90 (0.10–3.26)
Abdominal Hysterectomy (HYST)	1	2.61	0.38 (0.01–2.13)
GROVE CITY MEDICAL CENTER (11722)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.28	0.00 (0.00–13.01)
Hip Arthroplasty (HPRO)	1	0.48	2.09 (0.03–11.62)
Abdominal Hysterectomy (HYST)	0	0.34	0.00 (0.00–10.94)
HAHNEMANN UNIVERSITY HOSPITAL (11437)			
Cardiac (CARD)	0	0.66	0.00 (0.00–5.55)
Cardiac Bypass — Single Incision (CBGC)	0	0.09	0.00 (0.00–40.60)
Cardiac Bypass — Dual Incision (CBGB)	2	1.66	1.20 (0.14–4.35)
Knee Arthroplasty (KPRO)	1	1.03	0.97 (0.01–5.42)
Hip Arthroplasty (HPRO)	0	1.66	0.00 (0.00–2.21)
Abdominal Hysterectomy (HYST)	1	2.26	0.44 (0.01–2.46)
HANOVER HOSPITAL (11899)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	1.42	0.70 (0.01–3.92)
Hip Arthroplasty (HPRO)	3	0.96	3.14 (0.63–9.18)
Abdominal Hysterectomy (HYST)	0	0.76	0.00 (0.00–4.83)
HAZLETON GENERAL HOSPITAL (11878)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.44	0.00 (0.00–8.24)
Hip Arthroplasty (HPRO)	1	0.42	2.39 (0.03–13.31)
Abdominal Hysterectomy (HYST)	1	0.56	1.79 (0.02–9.95)
HEART OF LANCASTER REGIONAL MEDICAL CENTER (12571)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.13	0.00 (0.00–29.31)
Hip Arthroplasty (HPRO)	1	0.50	2.00 (0.03–11.11)
Abdominal Hysterectomy (HYST)	1	2.03	0.49 (0.01–2.75)
HERITAGE VALLEY BEAVER (11831)			
Cardiac (CARD)	0	0.83	0.00 (0.00–4.44)
Cardiac Bypass — Single Incision (CBGC)	1	0.33	3.07 (0.04–17.05)
Cardiac Bypass — Dual Incision (CBGB)	4	2.46	1.63 (0.44–4.17)
Knee Arthroplasty (KPRO)	2	1.84	1.09 (0.12–3.93)
Hip Arthroplasty (HPRO)	1	2.49	0.40 (0.01–2.23)
Abdominal Hysterectomy (HYST)	2	1.53	1.31 (0.15–4.73)
HERITAGE VALLEY SEWICKLEY (10375)			
Cardiac (CARD)	0	0.01	0.00 (0.00–315.62)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	4	5.25	0.76 (0.20–1.95)
Hip Arthroplasty (HPRO)	4	4.15	0.96 (0.26–2.46)
Abdominal Hysterectomy (HYST)	0	0.67	0.00 (0.00–5.44)

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Table 4.5.14 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
HIGHLANDS HOSPITAL (11902)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.05	0.00 (0.00–77.43)
Hip Arthroplasty (HPRO)	0	0.03	0.00 (0.00–114.53)
Abdominal Hysterectomy (HYST)	.	.	.
HOLY REDEEMER HOSPITAL AND MEDICAL CENTER (11973)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	5	2.59	1.93 (0.62–4.50)
Hip Arthroplasty (HPRO)	2	2.07	0.97 (0.11–3.49)
Abdominal Hysterectomy (HYST)	0	1.39	0.00 (0.00–2.64)
HOLY SPIRIT HOSPITAL (12387)			
Cardiac (CARD)	0	0.78	0.00 (0.00–4.69)
Cardiac Bypass — Single Incision (CBGC)	1	1.09	0.92 (0.01–5.12)
Cardiac Bypass — Dual Incision (CBGB)	4	4.13	0.97 (0.26–2.48)
Knee Arthroplasty (KPRO)	3	2.39	1.26 (0.25–3.67)
Hip Arthroplasty (HPRO)	2	3.24	0.62 (0.07–2.23)
Abdominal Hysterectomy (HYST)	0	0.28	0.00 (0.00–13.26)
HOSPITAL OF FOX CHASE CANCER CENTER (12134)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	.	.	.
Hip Arthroplasty (HPRO)	.	.	.
Abdominal Hysterectomy (HYST)	0	3.71	0.00 (0.00–0.99)
HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)			
Cardiac (CARD)	8	10.68	0.75 (0.32–1.48)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	8	8.49	0.94 (0.41–1.86)
Knee Arthroplasty (KPRO)	.	.	.
Hip Arthroplasty (HPRO)	0	0.39	0.00 (0.00–9.41)
Abdominal Hysterectomy (HYST)	8	4.27	1.87 (0.81–3.69)
INDIANA REGIONAL MEDICAL CENTER (11759)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	1.67	0.00 (0.00–2.20)
Hip Arthroplasty (HPRO)	2	1.88	1.07 (0.12–3.85)
Abdominal Hysterectomy (HYST)	0	0.86	0.00 (0.00–4.27)
J C BLAIR MEMORIAL HOSP (11724)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.22	0.00 (0.00–16.39)
Hip Arthroplasty (HPRO)	.	.	.
Abdominal Hysterectomy (HYST)	3	0.32	9.49 (1.91–27.73)
JAMESON MEMORIAL HOSPITAL (11954)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.92	0.00 (0.00–3.97)
Hip Arthroplasty (HPRO)	0	1.10	0.00 (0.00–3.35)
Abdominal Hysterectomy (HYST)	0	0.61	0.00 (0.00–6.01)

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Table 4.5.14 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
JEANES HOSPITAL (11459)			
Cardiac (CARD)	0	0.12	0.00 (0.00–31.69)
Cardiac Bypass — Single Incision (CBGC)	0	0.03	0.00 (0.00–138.26)
Cardiac Bypass — Dual Incision (CBGB)	1	1.21	0.83 (0.01–4.60)
Knee Arthroplasty (KPRO)	0	1.39	0.00 (0.00–2.63)
Hip Arthroplasty (HPRO)	0	1.23	0.00 (0.00–2.97)
Abdominal Hysterectomy (HYST)	2	0.85	2.35 (0.26–8.47)
JEFFERSON REGIONAL MEDICAL CENTER (10237)			
Cardiac (CARD)	1	1.40	0.72 (0.01–3.98)
Cardiac Bypass — Single Incision (CBGC)	0	0.01	0.00 (0.00–276.52)
Cardiac Bypass — Dual Incision (CBGB)	2	5.45	0.37 (0.04–1.33)
Knee Arthroplasty (KPRO)	9	6.08	1.48 (0.67–2.81)
Hip Arthroplasty (HPRO)	3	5.01	0.60 (0.12–1.75)
Abdominal Hysterectomy (HYST)	0	0.19	0.00 (0.00–19.50)
JENNERSVILLE REGIONAL HOSPITAL (12337)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.09	0.00 (0.00–38.63)
Hip Arthroplasty (HPRO)	1	0.42	2.36 (0.03–13.13)
Abdominal Hysterectomy (HYST)	0	0.06	0.00 (0.00–66.54)
JERSEY SHORE HOSPITAL (11689)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.19	0.00 (0.00–18.92)
Hip Arthroplasty (HPRO)	0	0.25	0.00 (0.00–14.81)
Abdominal Hysterectomy (HYST)	0	0.01	0.00 (0.00–323.09)
KANE COMMUNITY HOSPITAL (12111)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.20	0.00 (0.00–18.25)
Hip Arthroplasty (HPRO)	0	0.21	0.00 (0.00–17.73)
Abdominal Hysterectomy (HYST)	.	.	.
LANCASTER GENERAL HOSPITAL (10183)			
Cardiac (CARD)	1	1.30	0.77 (0.01–4.27)
Cardiac Bypass — Single Incision (CBGC)	3	0.42	7.11 (1.43–20.77)
Cardiac Bypass — Dual Incision (CBGB)	7	7.52	0.93 (0.37–1.92)
Knee Arthroplasty (KPRO)	11	8.83	1.25 (0.62–2.23)
Hip Arthroplasty (HPRO)	4	10.34	0.39 (0.10–0.99)
Abdominal Hysterectomy (HYST)	4	3.07	1.30 (0.35–3.33)
LANCASTER REGIONAL MEDICAL CENTER (12335)			
Cardiac (CARD)	0	0.37	0.00 (0.00–9.94)
Cardiac Bypass — Single Incision (CBGC)	0	0.00	0.00 (0.00–1,023.40)
Cardiac Bypass — Dual Incision (CBGB)	5	1.20	4.16 (1.34–9.71)
Knee Arthroplasty (KPRO)	4	2.54	1.57 (0.42–4.03)
Hip Arthroplasty (HPRO)	3	1.91	1.57 (0.32–4.59)
Abdominal Hysterectomy (HYST)	0	1.11	0.00 (0.00–3.30)

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Table 4.5.14 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
LANSDALE HOSPITAL (12032)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	1.13	0.88 (0.01–4.91)
Hip Arthroplasty (HPRO)	1	1.90	0.52 (0.01–2.92)
Abdominal Hysterectomy (HYST)	.	.	.
LEHIGH VALLEY HOSPITAL — MUHLENBERG (11898)			
Cardiac (CARD)	0	0.59	0.00 (0.00–6.18)
Cardiac Bypass — Single Incision (CBGC)	0	0.07	0.00 (0.00–52.47)
Cardiac Bypass — Dual Incision (CBGB)	0	1.95	0.00 (0.00–1.88)
Knee Arthroplasty (KPRO)	4	1.66	2.41 (0.65–6.18)
Hip Arthroplasty (HPRO)	2	2.13	0.94 (0.11–3.40)
Abdominal Hysterectomy (HYST)	0	0.66	0.00 (0.00–5.57)
LEHIGH VALLEY HOSPITAL (11884)			
Cardiac (CARD)	1	3.79	0.26 (0.00–1.47)
Cardiac Bypass — Single Incision (CBGC)	0	0.57	0.00 (0.00–6.46)
Cardiac Bypass — Dual Incision (CBGB)	0	8.61	0.00 (0.00–0.43)
Knee Arthroplasty (KPRO)	4	7.25	0.55 (0.15–1.41)
Hip Arthroplasty (HPRO)	8	8.72	0.92 (0.39–1.81)
Abdominal Hysterectomy (HYST)	4	10.30	0.39 (0.10–0.99)
LEWISTOWN HOSPITAL (11825)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.74	0.00 (0.00–4.95)
Hip Arthroplasty (HPRO)	1	0.43	2.31 (0.03–12.87)
Abdominal Hysterectomy (HYST)	4	1.24	3.22 (0.87–8.24)
LOCK HAVEN HOSPITAL (12097)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.14	0.00 (0.00–25.33)
Hip Arthroplasty (HPRO)	0	0.04	0.00 (0.00–94.63)
Abdominal Hysterectomy (HYST)	0	0.18	0.00 (0.00–20.27)
LOWER BUCKS HOSPITAL (12390)			
Cardiac (CARD)	1	0.06	17.81 (0.23–99.07)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	0	0.51	0.00 (0.00–7.20)
Knee Arthroplasty (KPRO)	0	0.42	0.00 (0.00–8.66)
Hip Arthroplasty (HPRO)	0	0.53	0.00 (0.00–6.86)
Abdominal Hysterectomy (HYST)	3	0.50	5.99 (1.20–17.49)
MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	3	6.33	0.47 (0.10–1.38)
Hip Arthroplasty (HPRO)	6	7.19	0.83 (0.30–1.82)
Abdominal Hysterectomy (HYST)	20	17.85	1.12 (0.68–1.73)
MAIN LINE HOSPITAL — PAOLI (11750)			
Cardiac (CARD)	0	0.36	0.00 (0.00–10.29)
Cardiac Bypass — Single Incision (CBGC)	0	0.00	0.00 (0.00–1,023.40)
Cardiac Bypass — Dual Incision (CBGB)	1	1.11	0.90 (0.01–5.00)
Knee Arthroplasty (KPRO)	8	3.20	2.50 (1.08–4.93)
Hip Arthroplasty (HPRO)	3	4.56	0.66 (0.13–1.92)
Abdominal Hysterectomy (HYST)	0	1.60	0.00 (0.00–2.30)

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Table 4.5.14 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
MAIN LINE HOSPITAL BRYN MAWR (11753)			
Cardiac (CARD)	1	0.39	2.53 (0.03–14.10)
Cardiac Bypass — Single Incision (CBGC)	0	0.03	0.00 (0.00–121.80)
Cardiac Bypass — Dual Incision (CBGB)	0	1.17	0.00 (0.00–3.14)
Knee Arthroplasty (KPRO)	4	7.10	0.56 (0.15–1.44)
Hip Arthroplasty (HPRO)	9	6.20	1.45 (0.66–2.76)
Abdominal Hysterectomy (HYST)	0	0.82	0.00 (0.00–4.48)
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)			
Cardiac (CARD)	2	2.51	0.80 (0.09–2.88)
Cardiac Bypass — Single Incision (CBGC)	1	0.81	1.24 (0.02–6.88)
Cardiac Bypass — Dual Incision (CBGB)	6	5.05	1.19 (0.43–2.59)
Knee Arthroplasty (KPRO)	3	4.31	0.70 (0.14–2.04)
Hip Arthroplasty (HPRO)	5	4.67	1.07 (0.35–2.50)
Abdominal Hysterectomy (HYST)	3	4.38	0.69 (0.14–2.00)
MEADVILLE MEDICAL CENTER (11583)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	3	4.11	0.73 (0.15–2.13)
Hip Arthroplasty (HPRO)	2	2.62	0.76 (0.09–2.76)
Abdominal Hysterectomy (HYST)	0	0.19	0.00 (0.00–18.91)
MEMORIAL HOSPITAL (11633)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.65	1.53 (0.02–8.52)
Hip Arthroplasty (HPRO)	2	0.79	2.54 (0.29–9.17)
Abdominal Hysterectomy (HYST)	2	0.78	2.57 (0.29–9.29)
MEMORIAL HOSPITAL, INC. TOWANDA (12549)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	.	.	.
Hip Arthroplasty (HPRO)	.	.	.
Abdominal Hysterectomy (HYST)	0	0.23	0.00 (0.00–16.19)
MERCY FITZGERALD HOSPITAL (11683)			
Cardiac (CARD)	0	0.31	0.00 (0.00–11.95)
Cardiac Bypass — Single Incision (CBGC)	0	0.16	0.00 (0.00–22.39)
Cardiac Bypass — Dual Incision (CBGB)	1	0.61	1.64 (0.02–9.12)
Knee Arthroplasty (KPRO)	0	0.41	0.00 (0.00–8.94)
Hip Arthroplasty (HPRO)	1	0.51	1.94 (0.03–10.81)
Abdominal Hysterectomy (HYST)	0	0.47	0.00 (0.00–7.79)
MERCY PHILADELPHIA HOSPITAL (11946)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.24	0.00 (0.00–15.49)
Hip Arthroplasty (HPRO)	1	0.26	3.92 (0.05–21.79)
Abdominal Hysterectomy (HYST)	0	0.30	0.00 (0.00–12.35)
MERCY SUBURBAN HOSPITAL NORRISTOWN (11952)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.85	1.18 (0.02–6.58)
Hip Arthroplasty (HPRO)	1	1.00	1.00 (0.01–5.54)
Abdominal Hysterectomy (HYST)	1	0.59	1.69 (0.02–9.40)

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Table 4.5.14 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
MID-VALLEY HOSPITAL (11557)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	.	.	.
Hip Arthroplasty (HPRO)	0	0.04	0.00 (0.00–94.63)
Abdominal Hysterectomy (HYST)	.	.	.
MILLCREEK COMMUNITY HOSPITAL (12253)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.53	0.00 (0.00–6.94)
Hip Arthroplasty (HPRO)	0	0.45	0.00 (0.00–8.21)
Abdominal Hysterectomy (HYST)	0	0.39	0.00 (0.00–9.40)
MILTON S HERSHEY MEDICAL CENTER (11747)			
Cardiac (CARD)	3	3.97	0.76 (0.15–2.21)
Cardiac Bypass — Single Incision (CBGC)	0	0.25	0.00 (0.00–14.43)
Cardiac Bypass — Dual Incision (CBGB)	3	4.28	0.70 (0.14–2.05)
Knee Arthroplasty (KPRO)	13	6.85	1.90 (1.01–3.24)
Hip Arthroplasty (HPRO)	11	8.13	1.35 (0.67–2.42)
Abdominal Hysterectomy (HYST)	0	0.54	0.00 (0.00–6.80)
MINERS MEDICAL CENTER (12295)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.26	0.00 (0.00–14.14)
Hip Arthroplasty (HPRO)	0	0.03	0.00 (0.00–114.53)
Abdominal Hysterectomy (HYST)	0	0.02	0.00 (0.00–200.32)
MONONGAHELA VALLEY HOSPITAL (11069)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	3	1.47	2.05 (0.41–5.98)
Hip Arthroplasty (HPRO)	4	2.09	1.92 (0.52–4.91)
Abdominal Hysterectomy (HYST)	2	0.32	6.28 (0.71–22.69)
MOSES TAYLOR HOSPITAL (11528)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	3	1.87	1.60 (0.32–4.68)
Hip Arthroplasty (HPRO)	2	1.86	1.07 (0.12–3.87)
Abdominal Hysterectomy (HYST)	2	2.94	0.68 (0.08–2.45)
MOUNT NITTANY MEDICAL CENTER (11797)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	7	6.57	1.07 (0.43–2.20)
Hip Arthroplasty (HPRO)	4	4.91	0.82 (0.22–2.09)
Abdominal Hysterectomy (HYST)	4	1.69	2.36 (0.64–6.05)
NASON HOSPITAL (11907)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.26	0.00 (0.00–13.98)
Hip Arthroplasty (HPRO)	1	0.24	4.13 (0.05–22.97)
Abdominal Hysterectomy (HYST)	0	0.19	0.00 (0.00–18.93)

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Table 4.5.14 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
NAZARETH HOSPITAL (11919)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	1.41	0.71 (0.01–3.93)
Hip Arthroplasty (HPRO)	1	1.42	0.70 (0.01–3.92)
Abdominal Hysterectomy (HYST)	0	0.30	0.00 (0.00–12.43)
OHIO VALLEY GENERAL HOSPITAL (12298)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.47	0.00 (0.00–7.73)
Hip Arthroplasty (HPRO)	0	0.66	0.00 (0.00–5.52)
Abdominal Hysterectomy (HYST)	0	0.11	0.00 (0.00–32.84)
OSS ORTHOPAEDIC HOSPITAL (18467)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	7	4.19	1.67 (0.67–3.44)
Hip Arthroplasty (HPRO)	0	3.20	0.00 (0.00–1.15)
Abdominal Hysterectomy (HYST)	.	.	.
PALMERTON HOSPITAL (12396)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.44	0.00 (0.00–8.34)
Hip Arthroplasty (HPRO)	0	0.39	0.00 (0.00–9.52)
Abdominal Hysterectomy (HYST)	.	.	.
PENN PRESBYTERIAN MEDICAL CENTER (11814)			
Cardiac (CARD)	4	4.01	1.00 (0.27–2.56)
Cardiac Bypass — Single Incision (CBGC)	0	0.20	0.00 (0.00–18.67)
Cardiac Bypass — Dual Incision (CBGB)	5	4.79	1.04 (0.34–2.44)
Knee Arthroplasty (KPRO)	13	5.95	2.18 (1.16–3.74)
Hip Arthroplasty (HPRO)	6	6.22	0.97 (0.35–2.10)
Abdominal Hysterectomy (HYST)	0	0.12	0.00 (0.00–30.21)
PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS (11448)			
Cardiac (CARD)	0	0.39	0.00 (0.00–9.42)
Cardiac Bypass — Single Incision (CBGC)	0	0.05	0.00 (0.00–69.13)
Cardiac Bypass — Dual Incision (CBGB)	4	1.61	2.49 (0.67–6.36)
Knee Arthroplasty (KPRO)	15	8.92	1.68 (0.94–2.77)
Hip Arthroplasty (HPRO)	13	7.01	1.85 (0.99–3.17)
Abdominal Hysterectomy (HYST)	8	4.38	1.82 (0.79–3.60)
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)			
Cardiac (CARD)	0	0.14	0.00 (0.00–26.67)
Cardiac Bypass — Single Incision (CBGC)	0	0.07	0.00 (0.00–55.30)
Cardiac Bypass — Dual Incision (CBGB)	1	1.40	0.72 (0.01–3.98)
Knee Arthroplasty (KPRO)	0	0.89	0.00 (0.00–4.14)
Hip Arthroplasty (HPRO)	0	0.82	0.00 (0.00–4.47)
Abdominal Hysterectomy (HYST)	3	0.71	4.25 (0.85–12.41)
PHYSICIANS CARE SURGICAL HOSPITAL (19630)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.35	0.00 (0.00–10.36)
Hip Arthroplasty (HPRO)	0	0.15	0.00 (0.00–23.85)
Abdominal Hysterectomy (HYST)	0	0.18	0.00 (0.00–19.91)

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Table 4.5.14 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
PINNACLE HEALTH HOSPITALS (10122)			
Cardiac (CARD)	1	2.67	0.37 (0.00–2.09)
Cardiac Bypass — Single Incision (CBGC)	0	0.76	0.00 (0.00–4.84)
Cardiac Bypass — Dual Incision (CBGB)	2	6.99	0.29 (0.03–1.03)
Knee Arthroplasty (KPRO)	9	13.94	0.65 (0.29–1.23)
Hip Arthroplasty (HPRO)	18	12.50	1.44 (0.85–2.28)
Abdominal Hysterectomy (HYST)	9	10.26	0.88 (0.40–1.67)
POCONO MEDICAL CENTER (11772)			
Cardiac (CARD)	1	0.18	5.42 (0.07–30.16)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	2	3.26	0.61 (0.07–2.22)
Knee Arthroplasty (KPRO)	1	0.50	2.01 (0.03–11.17)
Hip Arthroplasty (HPRO)	3	0.82	3.64 (0.73–10.62)
Abdominal Hysterectomy (HYST)	1	2.21	0.45 (0.01–2.51)
POTTSTOWN MEMORIAL MEDICAL CENTER (11983)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	2.57	0.00 (0.00–1.43)
Hip Arthroplasty (HPRO)	0	1.73	0.00 (0.00–2.12)
Abdominal Hysterectomy (HYST)	0	0.51	0.00 (0.00–7.26)
PUNXSUTAWNEY AREA HOSPITAL (11830)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.19	0.00 (0.00–18.91)
Hip Arthroplasty (HPRO)	0	0.11	0.00 (0.00–32.72)
Abdominal Hysterectomy (HYST)	1	0.19	5.35 (0.07–29.76)
READING HOSPITAL AND MEDICAL CENTER (12375)			
Cardiac (CARD)	3	0.83	3.62 (0.73–10.59)
Cardiac Bypass — Single Incision (CBGC)	0	0.04	0.00 (0.00–82.52)
Cardiac Bypass — Dual Incision (CBGB)	2	3.57	0.56 (0.06–2.02)
Knee Arthroplasty (KPRO)	1	5.22	0.19 (0.00–1.07)
Hip Arthroplasty (HPRO)	3	5.54	0.54 (0.11–1.58)
Abdominal Hysterectomy (HYST)	3	5.90	0.51 (0.10–1.49)
REGIONAL HOSPITAL OF SCRANTON (12533)			
Cardiac (CARD)	0	1.11	0.00 (0.00–3.30)
Cardiac Bypass — Single Incision (CBGC)	0	0.12	0.00 (0.00–29.83)
Cardiac Bypass — Dual Incision (CBGB)	0	2.65	0.00 (0.00–1.39)
Knee Arthroplasty (KPRO)	2	2.46	0.81 (0.09–2.93)
Hip Arthroplasty (HPRO)	1	2.55	0.39 (0.01–2.18)
Abdominal Hysterectomy (HYST)	0	0.06	0.00 (0.00–61.83)
RIDDLE MEMORIAL HOSPITAL (11731)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	8	4.12	1.94 (0.84–3.83)
Hip Arthroplasty (HPRO)	2	4.55	0.44 (0.05–1.59)
Abdominal Hysterectomy (HYST)	0	1.21	0.00 (0.00–3.03)
ROBERT PACKER HOSPITAL (12422)			
Cardiac (CARD)	3	1.12	2.68 (0.54–7.82)
Cardiac Bypass — Single Incision (CBGC)	0	0.12	0.00 (0.00–29.83)
Cardiac Bypass — Dual Incision (CBGB)	4	2.22	1.80 (0.48–4.61)
Knee Arthroplasty (KPRO)	2	3.53	0.57 (0.06–2.04)
Hip Arthroplasty (HPRO)	0	4.34	0.00 (0.00–0.85)
Abdominal Hysterectomy (HYST)	0	1.62	0.00 (0.00–2.27)

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Table 4.5.14 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
ROXBOROUGH MEMORIAL HOSPITAL (11978)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.04	24.37 (0.32–135.61)
Hip Arthroplasty (HPRO)	.	.	.
Abdominal Hysterectomy (HYST)	.	.	.
SACRED HEART HOSPITAL (11684)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.77	0.00 (0.00–4.77)
Hip Arthroplasty (HPRO)	1	1.57	0.64 (0.01–3.54)
Abdominal Hysterectomy (HYST)	6	3.02	1.99 (0.73–4.33)
SCHUYLKILL MEDICAL CENTER — EAST NORWEGIAN STREET (11922)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	1.02	0.98 (0.01–5.48)
Hip Arthroplasty (HPRO)	1	1.27	0.79 (0.01–4.39)
Abdominal Hysterectomy (HYST)	0	0.04	0.00 (0.00–99.63)
SCHUYLKILL MEDICAL CENTER — SOUTH JACKSON STREET (12087)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.58	1.73 (0.02–9.65)
Hip Arthroplasty (HPRO)	2	0.63	3.19 (0.36–11.52)
Abdominal Hysterectomy (HYST)	1	0.99	1.01 (0.01–5.64)
SHARON REGIONAL HEALTH SYSTEM (12250)			
Cardiac (CARD)	0	0.23	0.00 (0.00–15.98)
Cardiac Bypass — Single Incision (CBGC)	0	0.07	0.00 (0.00–52.47)
Cardiac Bypass — Dual Incision (CBGB)	2	1.31	1.53 (0.17–5.53)
Knee Arthroplasty (KPRO)	1	1.87	0.53 (0.01–2.98)
Hip Arthroplasty (HPRO)	2	3.10	0.65 (0.07–2.33)
Abdominal Hysterectomy (HYST)	0	0.13	0.00 (0.00–28.21)
SHRINERS HOSPITAL FOR CHILDREN — PHILADELPHIA (12244)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.02	0.00 (0.00–212.80)
Hip Arthroplasty (HPRO)	0	0.01	0.00 (0.00–272.29)
Abdominal Hysterectomy (HYST)	.	.	.
SOLDIERS & SAILORS MEM HOSPITAL (11688)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	2	0.54	3.69 (0.41–13.34)
Hip Arthroplasty (HPRO)	0	0.30	0.00 (0.00–12.23)
Abdominal Hysterectomy (HYST)	2	0.53	3.79 (0.43–13.67)
SOMERSET HOSPITAL (12282)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.25	0.00 (0.00–14.70)
Hip Arthroplasty (HPRO)	0	0.19	0.00 (0.00–19.34)
Abdominal Hysterectomy (HYST)	0	0.16	0.00 (0.00–22.61)

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Table 4.5.14 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
SOUTHWEST REGIONAL MEDICAL CENTER (11942)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.21	0.00 (0.00–17.77)
Hip Arthroplasty (HPRO)	0	0.16	0.00 (0.00–22.27)
Abdominal Hysterectomy (HYST)	0	0.02	0.00 (0.00–200.32)
ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)			
Cardiac (CARD)	4	0.67	5.97 (1.61–15.29)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	.	.	.
Hip Arthroplasty (HPRO)	.	.	.
Abdominal Hysterectomy (HYST)	.	.	.
ST. CLAIR MEMORIAL HOSPITAL (10561)			
Cardiac (CARD)	2	0.66	3.02 (0.34–10.92)
Cardiac Bypass — Single Incision (CBGC)	0	0.05	0.00 (0.00–69.13)
Cardiac Bypass — Dual Incision (CBGB)	0	2.30	0.00 (0.00–1.60)
Knee Arthroplasty (KPRO)	9	5.59	1.61 (0.74–3.06)
Hip Arthroplasty (HPRO)	5	4.24	1.18 (0.38–2.75)
Abdominal Hysterectomy (HYST)	6	2.51	2.39 (0.87–5.20)
ST. JOSEPH MEDICAL CENTER (11961)			
Cardiac (CARD)	1	0.41	2.43 (0.03–13.52)
Cardiac Bypass — Single Incision (CBGC)	0	0.03	0.00 (0.00–108.85)
Cardiac Bypass — Dual Incision (CBGB)	5	1.80	2.78 (0.89–6.48)
Knee Arthroplasty (KPRO)	0	0.99	0.00 (0.00–3.72)
Hip Arthroplasty (HPRO)	1	1.24	0.81 (0.01–4.50)
Abdominal Hysterectomy (HYST)	0	1.04	0.00 (0.00–3.52)
ST. JOSEPHS HOSPITAL (12438)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	.	.	.
Hip Arthroplasty (HPRO)	.	.	.
Abdominal Hysterectomy (HYST)	1	0.20	4.95 (0.06–27.54)
ST. LUKES HOSPITAL BETHLEHEM (11718)			
Cardiac (CARD)	1	1.15	0.87 (0.01–4.83)
Cardiac Bypass — Single Incision (CBGC)	0	0.19	0.00 (0.00–19.38)
Cardiac Bypass — Dual Incision (CBGB)	1	2.22	0.45 (0.01–2.51)
Knee Arthroplasty (KPRO)	3	2.53	1.18 (0.24–3.46)
Hip Arthroplasty (HPRO)	1	3.24	0.31 (0.00–1.72)
Abdominal Hysterectomy (HYST)	0	2.08	0.00 (0.00–1.76)
ST. LUKES MINERS MEMORIAL HOSPITAL (11784)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.66	0.00 (0.00–5.53)
Hip Arthroplasty (HPRO)	0	0.22	0.00 (0.00–16.30)
Abdominal Hysterectomy (HYST)	0	0.05	0.00 (0.00–70.04)
ST. LUKES QUAKERTOWN HOSPITAL (11711)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.26	0.00 (0.00–14.30)
Hip Arthroplasty (HPRO)	0	0.48	0.00 (0.00–7.69)
Abdominal Hysterectomy (HYST)	0	0.07	0.00 (0.00–51.90)

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Table 4.5.14 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
ST. MARY MEDICAL CENTER (11885)			
Cardiac (CARD)	0	0.75	0.00 (0.00–4.87)
Cardiac Bypass — Single Incision (CBGC)	0	0.16	0.00 (0.00–23.04)
Cardiac Bypass — Dual Incision (CBGB)	2	2.44	0.82 (0.09–2.96)
Knee Arthroplasty (KPRO)	1	2.96	0.34 (0.00–1.88)
Hip Arthroplasty (HPRO)	1	3.16	0.32 (0.00–1.76)
Abdominal Hysterectomy (HYST)	0	1.18	0.00 (0.00–3.12)
ST. VINCENT HEALTH CENTER (11699)			
Cardiac (CARD)	1	1.46	0.69 (0.01–3.82)
Cardiac Bypass — Single Incision (CBGC)	0	0.10	0.00 (0.00–35.04)
Cardiac Bypass — Dual Incision (CBGB)	6	6.62	0.91 (0.33–1.97)
Knee Arthroplasty (KPRO)	2	3.49	0.57 (0.06–2.07)
Hip Arthroplasty (HPRO)	4	3.63	1.10 (0.30–2.82)
Abdominal Hysterectomy (HYST)	3	1.69	1.77 (0.36–5.18)
SUNBURY COMMUNITY HOSPITAL (12105)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.41	0.00 (0.00–8.91)
Hip Arthroplasty (HPRO)	0	0.65	0.00 (0.00–5.65)
Abdominal Hysterectomy (HYST)	.	.	.
SURGICAL INSTITUTE OF READING (12535)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	1.55	0.65 (0.01–3.60)
Hip Arthroplasty (HPRO)	0	1.04	0.00 (0.00–3.52)
Abdominal Hysterectomy (HYST)	0	0.07	0.00 (0.00–55.34)
SURGICAL SPECIALTY CENTER AT COORDINATED HEALTH, THE (15259)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	2	2.46	0.81 (0.09–2.94)
Hip Arthroplasty (HPRO)	0	0.66	0.00 (0.00–5.55)
Abdominal Hysterectomy (HYST)	.	.	.
TEMPLE UNIVERSITY HOSPITAL (12382)			
Cardiac (CARD)	0	0.56	0.00 (0.00–6.52)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	3	1.62	1.85 (0.37–5.41)
Knee Arthroplasty (KPRO)	0	2.79	0.00 (0.00–1.31)
Hip Arthroplasty (HPRO)	2	2.93	0.68 (0.08–2.47)
Abdominal Hysterectomy (HYST)	3	6.47	0.46 (0.09–1.35)
THE GOOD SAMARITAN HOSPITAL (11712)			
Cardiac (CARD)	0	0.01	0.00 (0.00–315.62)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	1	2.49	0.40 (0.01–2.23)
Knee Arthroplasty (KPRO)	0	2.13	0.00 (0.00–1.72)
Hip Arthroplasty (HPRO)	0	1.20	0.00 (0.00–3.05)
Abdominal Hysterectomy (HYST)	3	0.80	3.73 (0.75–10.91)
THE WASHINGTON HOSPITAL (11460)			
Cardiac (CARD)	0	0.75	0.00 (0.00–4.89)
Cardiac Bypass — Single Incision (CBGC)	0	0.17	0.00 (0.00–21.27)
Cardiac Bypass — Dual Incision (CBGB)	2	2.52	0.79 (0.09–2.87)
Knee Arthroplasty (KPRO)	2	1.25	1.60 (0.18–5.78)
Hip Arthroplasty (HPRO)	2	1.81	1.11 (0.12–3.99)
Abdominal Hysterectomy (HYST)	0	1.62	0.00 (0.00–2.26)

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Table 4.5.14 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
THE WESTERN PENNSYLVANIA HOSPITAL (11864)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.02	0.00 (0.00–170.46)
Hip Arthroplasty (HPRO)	0	0.03	0.00 (0.00–104.88)
Abdominal Hysterectomy (HYST)	6	4.43	1.36 (0.49–2.95)
THOMAS JEFFERSON UNIV HOSP - METHODIST (12017)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	2	0.25	7.99 (0.90–28.83)
Hip Arthroplasty (HPRO)	1	0.47	2.12 (0.03–11.80)
Abdominal Hysterectomy (HYST)	0	0.17	0.00 (0.00–21.54)
THOMAS JEFFERSON UNIV HOSPITAL (11506)			
Cardiac (CARD)	5	1.63	3.07 (0.99–7.17)
Cardiac Bypass — Single Incision (CBGC)	0	0.07	0.00 (0.00–54.42)
Cardiac Bypass — Dual Incision (CBGB)	4	3.42	1.17 (0.31–2.99)
Knee Arthroplasty (KPRO)	16	9.06	1.77 (1.01–2.87)
Hip Arthroplasty (HPRO)	23	16.77	1.37 (0.87–2.06)
Abdominal Hysterectomy (HYST)	7	4.06	1.73 (0.69–3.56)
TITUSVILLE AREA HOSPITAL (11738)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.35	0.00 (0.00–10.51)
Hip Arthroplasty (HPRO)	0	0.29	0.00 (0.00–12.62)
Abdominal Hysterectomy (HYST)	0	0.32	0.00 (0.00–11.45)
TROY COMMUNITY HOSPITAL (12018)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	.	.	.
Hip Arthroplasty (HPRO)	.	.	.
Abdominal Hysterectomy (HYST)	0	0.07	0.00 (0.00–52.97)
TYLER MEMORIAL HOSPITAL (11829)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.02	0.00 (0.00–212.80)
Hip Arthroplasty (HPRO)	0	0.01	0.00 (0.00–544.58)
Abdominal Hysterectomy (HYST)	.	.	.
TYRONE HOSPITAL (12717)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.11	8.97 (0.12–49.90)
Hip Arthroplasty (HPRO)	0	0.12	0.00 (0.00–31.79)
Abdominal Hysterectomy (HYST)	2	0.05	44.04 (4.95–159.01)
UNIONTOWN HOSPITAL (10441)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	1.95	0.00 (0.00–1.88)
Hip Arthroplasty (HPRO)	6	2.08	2.89 (1.05–6.29)
Abdominal Hysterectomy (HYST)	3	2.74	1.09 (0.22–3.20)

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Table 4.5.14 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
UPMC BEDFORD (11680)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.33	3.07 (0.04–17.07)
Hip Arthroplasty (HPRO)	0	0.30	0.00 (0.00–12.23)
Abdominal Hysterectomy (HYST)	1	0.74	1.35 (0.02–7.50)
UPMC HAMOT (11725)			
Cardiac (CARD)	2	1.37	1.46 (0.16–5.27)
Cardiac Bypass — Single Incision (CBGC)	3	2.02	1.48 (0.30–4.33)
Cardiac Bypass — Dual Incision (CBGB)	7	4.51	1.55 (0.62–3.20)
Knee Arthroplasty (KPRO)	9	3.66	2.46 (1.12–4.67)
Hip Arthroplasty (HPRO)	11	5.08	2.16 (1.08–3.87)
Abdominal Hysterectomy (HYST)	1	1.50	0.67 (0.01–3.70)
UPMC HORIZON (11675)			
Cardiac (CARD)	0	0.05	0.00 (0.00–78.91)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	4	3.10	1.29 (0.35–3.31)
Hip Arthroplasty (HPRO)	2	2.15	0.93 (0.10–3.36)
Abdominal Hysterectomy (HYST)	1	0.91	1.09 (0.01–6.08)
UPMC MCKEESPORT (11707)			
Cardiac (CARD)	0	0.01	0.00 (0.00–315.62)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.56	0.00 (0.00–6.50)
Hip Arthroplasty (HPRO)	0	0.97	0.00 (0.00–3.77)
Abdominal Hysterectomy (HYST)	1	0.39	2.59 (0.03–14.41)
UPMC MERCY (10384)			
Cardiac (CARD)	0	1.43	0.00 (0.00–2.57)
Cardiac Bypass — Single Incision (CBGC)	0	0.23	0.00 (0.00–15.69)
Cardiac Bypass — Dual Incision (CBGB)	5	3.54	1.41 (0.45–3.29)
Knee Arthroplasty (KPRO)	2	2.17	0.92 (0.10–3.33)
Hip Arthroplasty (HPRO)	4	3.26	1.23 (0.33–3.14)
Abdominal Hysterectomy (HYST)	8	4.25	1.88 (0.81–3.71)
UPMC NORTHWEST (11837)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	2	0.73	2.75 (0.31–9.92)
Hip Arthroplasty (HPRO)	1	0.79	1.27 (0.02–7.05)
Abdominal Hysterectomy (HYST)	3	0.80	3.73 (0.75–10.89)
UPMC PASSAVANT (11242)			
Cardiac (CARD)	1	1.54	0.65 (0.01–3.60)
Cardiac Bypass — Single Incision (CBGC)	0	0.27	0.00 (0.00–13.46)
Cardiac Bypass — Dual Incision (CBGB)	5	4.25	1.18 (0.38–2.75)
Knee Arthroplasty (KPRO)	2	3.93	0.51 (0.06–1.84)
Hip Arthroplasty (HPRO)	4	4.01	1.00 (0.27–2.55)
Abdominal Hysterectomy (HYST)	6	6.46	0.93 (0.34–2.02)
UPMC PRESBYTERIAN SHADYSIDE — PRESBYTERIAN (10348)			
Cardiac (CARD)	5	3.88	1.29 (0.42–3.01)
Cardiac Bypass — Single Incision (CBGC)	1	0.31	3.19 (0.04–17.76)
Cardiac Bypass — Dual Incision (CBGB)	5	5.76	0.87 (0.28–2.03)
Knee Arthroplasty (KPRO)	1	0.35	2.82 (0.04–15.70)
Hip Arthroplasty (HPRO)	6	2.21	2.72 (0.99–5.92)
Abdominal Hysterectomy (HYST)	0	0.18	0.00 (0.00–20.13)

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Table 4.5.14 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
UPMC PRESBYTERIAN SHADYSIDE — SHADYSIDE (10118)			
Cardiac (CARD)	3	4.45	0.67 (0.14–1.97)
Cardiac Bypass — Single Incision (CBGC)	0	0.55	0.00 (0.00–6.69)
Cardiac Bypass — Dual Incision (CBGB)	7	9.03	0.77 (0.31–1.60)
Knee Arthroplasty (KPRO)	14	10.96	1.28 (0.70–2.14)
Hip Arthroplasty (HPRO)	13	15.66	0.83 (0.44–1.42)
Abdominal Hysterectomy (HYST)	1	2.34	0.43 (0.01–2.38)
UPMC ST MARGARET (11561)			
Cardiac (CARD)	0	0.00	0.00 (0.00–3,668.10)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	2	6.21	0.32 (0.04–1.16)
Hip Arthroplasty (HPRO)	8	6.18	1.30 (0.56–2.55)
Abdominal Hysterectomy (HYST)	1	0.56	1.77 (0.02–9.88)
WARREN GENERAL HOSPITAL (12216)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.84	0.00 (0.00–4.35)
Hip Arthroplasty (HPRO)	1	0.36	2.76 (0.04–15.37)
Abdominal Hysterectomy (HYST)	0	1.56	0.00 (0.00–2.36)
WAYNE MEMORIAL HOSPITAL (12004)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	2	0.55	3.61 (0.41–13.04)
Hip Arthroplasty (HPRO)	0	0.55	0.00 (0.00–6.64)
Abdominal Hysterectomy (HYST)	1	0.67	1.49 (0.02–8.27)
WAYNESBORO HOSPITAL (11642)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.30	0.00 (0.00–12.41)
Hip Arthroplasty (HPRO)	0	0.53	0.00 (0.00–6.91)
Abdominal Hysterectomy (HYST)	0	0.56	0.00 (0.00–6.53)
WESTFIELD HOSPITAL (12487)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.10	0.00 (0.00–35.34)
Hip Arthroplasty (HPRO)	.	.	.
Abdominal Hysterectomy (HYST)	0	0.20	0.00 (0.00–18.51)
WILKES-BARRE GENERAL HOSPITAL (11916)			
Cardiac (CARD)	0	0.72	0.00 (0.00–5.10)
Cardiac Bypass — Single Incision (CBGC)	0	0.08	0.00 (0.00–46.09)
Cardiac Bypass — Dual Incision (CBGB)	2	4.33	0.46 (0.05–1.67)
Knee Arthroplasty (KPRO)	3	2.74	1.09 (0.22–3.19)
Hip Arthroplasty (HPRO)	4	2.54	1.58 (0.42–4.04)
Abdominal Hysterectomy (HYST)	0	1.35	0.00 (0.00–2.73)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)			
Cardiac (CARD)	0	0.32	0.00 (0.00–11.48)
Cardiac Bypass — Single Incision (CBGC)	0	0.03	0.00 (0.00–108.85)
Cardiac Bypass — Dual Incision (CBGB)	2	1.40	1.42 (0.16–5.14)
Knee Arthroplasty (KPRO)	4	5.73	0.70 (0.19–1.79)
Hip Arthroplasty (HPRO)	4	4.58	0.87 (0.24–2.24)
Abdominal Hysterectomy (HYST)	3	2.28	1.32 (0.26–3.84)

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Table 4.5.14 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
WINDBER HOSPITAL (12031)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.26	3.82 (0.05–21.26)
Hip Arthroplasty (HPRO)	2	0.15	13.08 (1.47–47.21)
Abdominal Hysterectomy (HYST)	0	0.20	0.00 (0.00–18.81)
YORK HOSPITAL (10108)			
Cardiac (CARD)	3	1.87	1.61 (0.32–4.69)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	7	5.44	1.29 (0.52–2.65)
Knee Arthroplasty (KPRO)	2	2.04	0.98 (0.11–3.54)
Hip Arthroplasty (HPRO)	3	4.20	0.71 (0.14–2.09)
Abdominal Hysterectomy (HYST)	13	8.76	1.48 (0.79–2.54)

4.6. Influenza Vaccination of Healthcare Providers (HCP)

Vaccination of HCP against influenza is an important indicator and measure of institutional commitment to patient safety. Influenza vaccination is the single most effective way of preventing influenza. Influenza vaccination keeps HCP healthy, protects their families and likely reduces the risk of transmission in healthcare settings. Vaccinating HCP against influenza protects patients by not exposing them to infected personnel, decreasing absenteeism, and promoting a healthy workforce to care for those who tend to be most at risk. Initiatives to promote universal influenza vaccination for HCP are strongly encouraged for all hospitals in Pennsylvania to achieve the Healthy People 2020 goal of at least 90 percent coverage.

Last year, PADOH published hospital HCP influenza vaccination rates in aggregate to promote awareness and provide a statewide baseline for this important measure of institutional commitment to patient safety. This year, PADOH is publishing facility-specific influenza vaccination rates. Act 52 does not require hospitals to provide this information. However, federal initiatives and changes to Joint Commission Accreditation Standards make it critical for healthcare institutions to have effective healthcare personnel influenza vaccination programs in place:

1. Healthcare personnel influenza vaccination rates will be tied to Medicare reimbursement. On Aug. 18, 2011, the Centers for Medicare and Medicaid Services (CMS) published a final rule requiring acute care hospitals to report healthcare personnel influenza vaccination rates through CDC's National Healthcare Safety Network (NHSN). Fiscal year 2015 payments under Medicare's inpatient prospective payment system (IPPS) will be reduced by 2 percent if acute care hospitals fail to report required quality measures starting in January 2013. Quality data also are made publicly available on CMS's Hospital Compare website.

2. The Joint Commission (JC) has issued accreditation standards to encourage influenza vaccination rates among healthcare personnel to achieve vaccination of healthcare personnel of 90 percent or better. In addition to hospitals (including critical access hospitals), these standards apply to ambulatory, behavioral, home care, laboratory, long-term care and office-based surgery facilities.
   `http://www.jointcommission.org/ic020401_CAH_HAP_LTC/`

In the spring of 2012, PADOH, with the assistance of the Pennsylvania Healthcare Quality Alliance (PHCQA), conducted a Web-based survey of inpatient facilities in Pennsylvania to assess the patterns and levels of influenza vaccination among the healthcare workforce in the state. PADOH also conducted a number of trainings to increase the ability of inpatient facilities to meet CMS and JC influenza vaccination reporting requirements. The survey assessed HCP influenza vaccination rates in inpatient facilities during the 2011-2012 influenza season.

For the 2012–2013 influenza season, hospitals reported vaccination data directly to NHSN; PADOH did not conduct a separate survey. The NHSN assessment of HCP vaccination rates is based on National Quality Forum (NQF) Metric 0431, the same metric used for the voluntary survey PADOH conducted with PHCQA in 2011–2012. Contractors were not included in PADOH's 2011–2012 survey; however, reporting of contractor vaccination rates to NHSN is possible but optional and not necessary to qualify for full CMS pay-for-reporting incentives. Please refer to the following resources for a detailed description of the assessments:

- 2011 PADOH HAI Annual Report
  `http://www.portal.state.pa.us/portal/server.pt?open=18&objID=1302961&mode=2`

- NHSN Documentation
  `http://www.cdc.gov/nhsn/PDFs/HPS-manual/vaccination/HPS-flu-vaccine-protocol.pdf`

- CDC FAQ for Influenza Vaccination Summary Reporting
  `http://www.cdc.gov/nhsn/faqs/FAQ-Influenza-Vaccination-Summary-Reporting.html`

4.6.1. Influenza Vaccination of HCP — Statewide Summary

All 251 hospitals open during the 2012–2013 influenza season (which includes three hospitals that opened mid-year in 2012 and excludes one facility that closed in 2013 before the end of the 2012–2013 influenza season) reported healthcare personnel influenza vaccination rates to NHSN, and 167 hospitals (67 percent) reported vaccination rates for contractors in addition to vaccination rates for employees, licensed independent practioners (LIP), and adult students, trainees and volunteers (STV). Overall, hospitals reported the vaccination status of 363,801 HCP (see Table 4.6.1; individual HCP might be represented in the numerator and denominator data reported by multiple facilities if the HCP worked in more than one NHSN facility during the influenza season). The percent of HCP with unknown vaccination status decreased 36 percent from the 2011–2012 season to the 2012–2013 influenza season. Consistent with previous data, less than 1 percent of HCP were not vaccinated because of a reported medical contraindication to influenza vaccine.

Table 4.6.1: Summary of Healthcare Personnel (HCP) Influenza Vaccination Rates During the 2012–2013 Influenza Season — Pennsylvania

	Vaccinated		Declined		Medical Contraindication		Unknown	
	n	median %	n	median %	n	median %	n	median %
Employee	250,196	75.28	28,809	12.08	3,547	1.07	25,867	2.94
LIP	36,115	60.00	1,350	0.00	285	0.00	23,523	25.74
STV	35,643	81.49	1,666	0.00	153	0.00	9,486	4.28
Contractor	5,523	78.57	479	0.00	35	0.00	1,219	0.00
All	327,477	74.56	32,304	1.42	4,020	0.00	60,095	5.50

4.6.2. Influenza Vaccination of HCP — By Facility

Hospitals reported significant improvements from last year. The median employee vaccination rate increased 16 percent (from 65 percent to 75 percent) from the 2011–2012 season to the 2012–2013 influenza season. Many facilities achieved HCP vaccination rates at or above the Healthy People 2020 goal of 90 percent, as indicated by the green bars in Figure 4.6.1. For the 2012–2013 influenza season, 70 facilities (28 percent of 251 facilities) reported employee vaccination rates above 90 percent and 28 facilities (11 percent) reported vaccination rates at goal for employees, LIPs and STVs; this is an increase of 59 percent and 367 percent respectively from the previous season. Facilities achieving employee vaccination rates above 90 percent are listed in alphabetical order in Table 4.6.2; those facilities with vaccination rates above 90 percent for employees, LIPs and STVs are noted with an asterisk.

Vaccination rates varied substantially between facilities, with facility rates clustered above goal or significantly below goal (i.e., bimodal distribution; Figure 4.6.1). Among the 70 facilities with employee vaccination rates of 90 percent or better, the median employee vaccination rate was 97 percent, whereas the median employee vaccination rate among facilities not yet at goal was 69 percent. The bimodal distribution of facilities is most evident among the 25 largest facilities in the state (tenth decile by bed size; Figure 4.6.2): 11 (44 percent) reported all-HCP vaccination rates above 90 percent; one facility reported a rate of 84 percent; and the remaining 13 facilities reported all-HCP vaccination rates between 47 and 78 percent. Figure 4.6.3 is a map of the approximate location of each hospital; the color of the mapped hospital indicates its employee vaccination rate. Table 4.6.3 lists HCP seasonal influenza vaccination rates by facility.

Figure 4.6.1: Distribution of Facility Healthcare Personnel (HCP) Seasonal Influneza Vaccination Rates by Worker Type — Pennsylvania, 2012–2013

Healthy People 2020 Goal = 90%

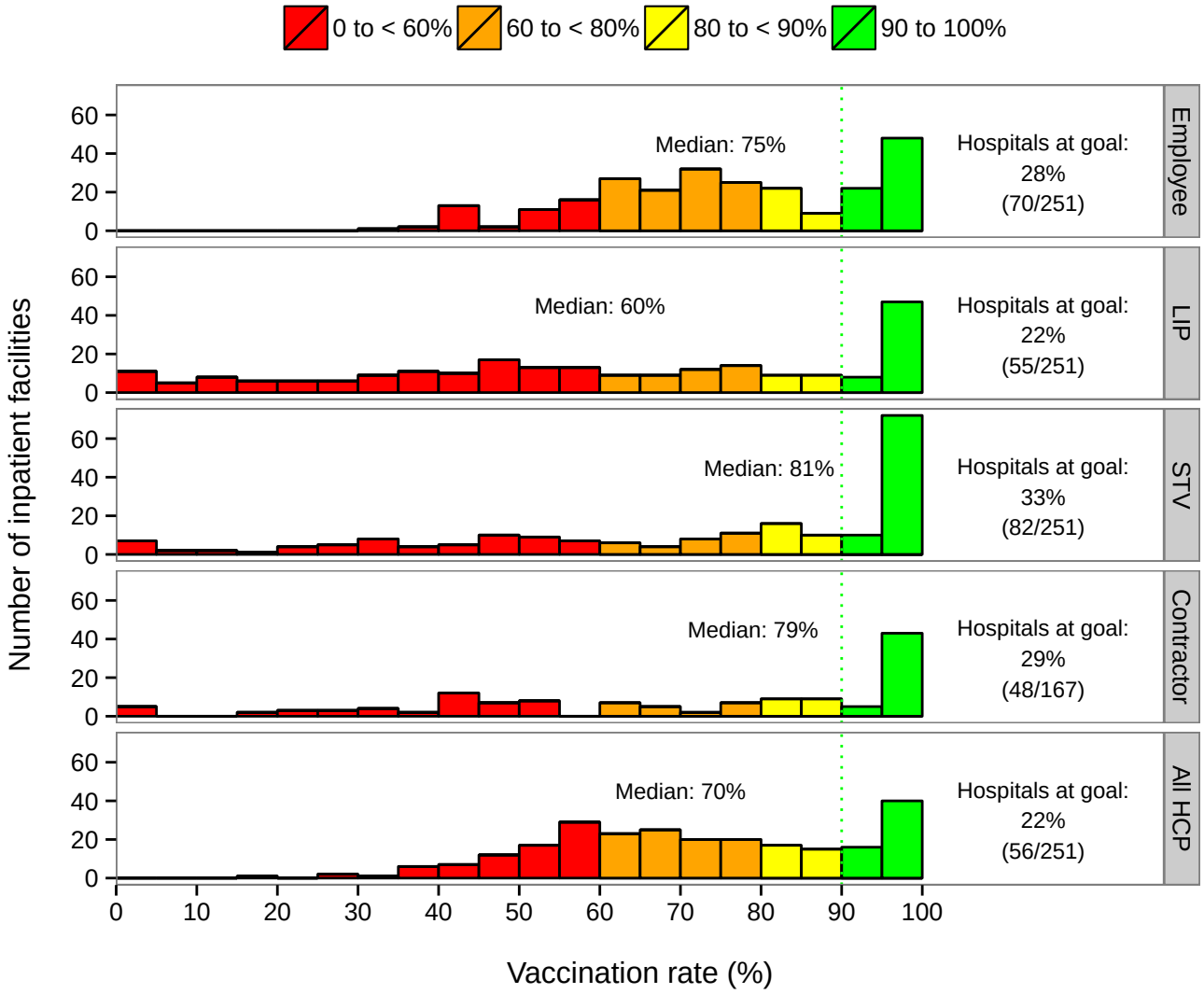

Figure 4.6.2: Distribution of Facility Healthcare Personnel (HCP) Seasonal Influneza Vaccination Rates Among 25 Largest Facilities — Pennsylvania, 2012–2013

Figure Includes All HCP Types; Healthy People 2020 Goal = 90%

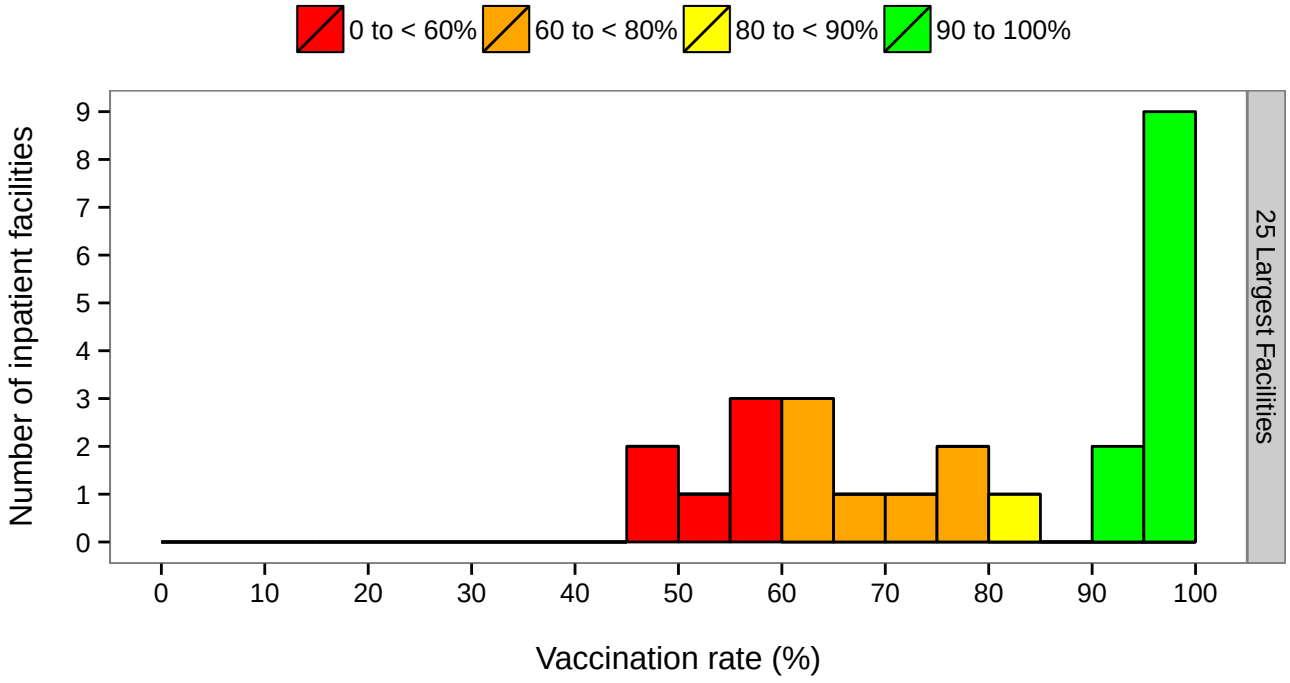

Figure 4.6.3: Map of Employee Seasonal Influneza Vaccination Rates by Facility — Pennsylvania, 2012–2013

Healthy People 2020 Goal = 90%; Approximate Location Plotted to Minimize Overlapping of Points

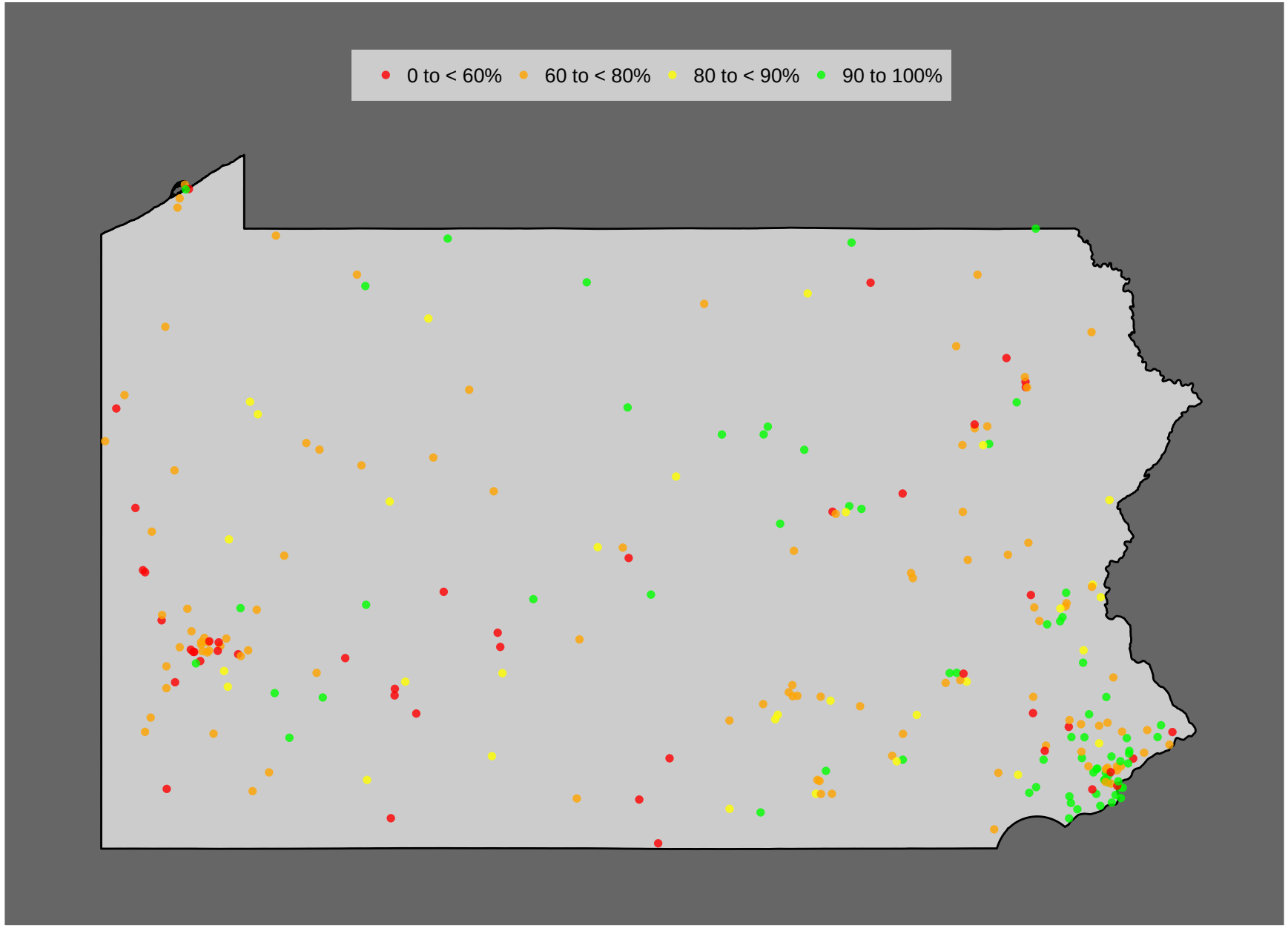

Table 4.6.2: Hospitals with Employee Seasonal Influenza Vaccination Rates of 90 Percent or Better — Pennsylvania, 2012–2013

Hospital Name (NHSN ID)
ABINGTON MEMORIAL HOSPITAL (11838)*
ALBERT EINSTEIN MEDICAL CENTER (10585)
ALBERT EINSTEIN MEDICAL CENTER AT ELKINS PARK (12500)
ALBERT EINSTEIN MEDICAL CENTER MOSS REHABILITATION (12508)
ARIA HEALTH (11388)*
BARNES-KASSON COUNTY HOSPITAL (12404)
BELMONT CENTER FOR COMPREHENSIVE TREATMENT (12505)
BRADFORD REGIONAL MEDICAL CENTER (12361)
BUCKTAIL MEDICAL CENTER (12461)
CHARLES COLE MEMORIAL HOSPITAL (11956)
CHESTER COUNTY HOSPITAL (12016)
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)
CROZER CHESTER MEDICAL CENTER (11839)*
CROZER CHESTER MEDICAL CENTER SPRINGFIELD (11851)*
CROZER CHESTER MEDICAL CENTER TAYLOR (11932)*
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)*
DIVINE PROVIDENCE HOSPITAL (11743)
DOYLESTOWN HOSPITAL (10190)*
EASTERN REGIONAL MEDICAL CENTER (12348)
EINSTEIN MEDICAL CENTER MONTGOMERY (30210)
EVANGELICAL COMMUNITY HOSPITAL (11701)*
EXCELA HEALTH FRICK HOSPITAL (11639)*
EXCELA HEALTH LATROBE HOSPITAL (11651)
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)
GEISINGER MEDICAL CENTER (11775)
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)
GEISINGER-BLOOMSBURG HOSPITAL (12008)
GEISINGER-COMMUNITY MEDICAL CENTER (11914)
GOOD SHEPHERD PENN PARTNERS (13929)*
GRAND VIEW HOSPITAL (11847)*
HAHNEMANN UNIVERSITY HOSPITAL (11437)
HANOVER HOSPITAL (11899)*
HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)*
INDIANA REGIONAL MEDICAL CENTER (11759)
JERSEY SHORE HOSPITAL (11689)
LANCASTER GENERAL HOSPITAL (10183)*
LANSDALE HOSPITAL (12032)*
LEHIGH VALLEY HOSPITAL — MUHLENBERG (11898)*
LEHIGH VALLEY HOSPITAL (11884)*
LEWISTOWN HOSPITAL (11825)
LIFECARE HOSPITALS OF CHESTER COUNTY (12005)
LIFECARE HOSPITALS OF PITTSBURGH — ALLE-KISKI CAMPUS (18955)
MAGEE REHAB HOSPITAL (12146)
MAIN LINE HOSPITAL BRYN MAWR (11753)*
MAIN LINE HOSPITAL BRYN MAWR REHABILITATION (11417)*
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)*
MEMORIAL HOSPITAL (11633)*
MERCY FITZGERALD HOSPITAL (11683)
MERCY PHILADELPHIA HOSPITAL (11946)
MERCY SUBURBAN HOSPITAL NORRISTOWN (11952)
MUNCY VALLEY HOSPITAL (11748)
PENN PRESBYTERIAN MEDICAL CENTER (11814)
PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS (11448)
RIDDLE MEMORIAL HOSPITAL (11731)*
ROBERT PACKER HOSPITAL (12422)
ROXBOROUGH MEMORIAL HOSPITAL (11978)*
SACRED HEART HOSPITAL (11684)*
SELECT SPECIALITY HOSPITAL — ERIE (11880)
SELECT SPECIALTY HOSPITAL — PITTSBURGH/UPMC (12009)
ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)
ST. JOSEPH MEDICAL CENTER (11961)
ST. MARY MEDICAL CENTER (11885)*
ST. MARY MEDICAL CENTER REHAB (12483)
SURGICAL INSTITUTE OF READING (12535)
THE GOOD SHEPHERD REHABILITATION HOSPITAL (11896)
THOMAS JEFFERSON UNIV HOSP - METHODIST (12017)*
THOMAS JEFFERSON UNIV HOSPITAL (11506)*
TYRONE HOSPITAL (12717)*
WARREN GENERAL HOSPITAL (12216)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)

* Facility reported vaccination rates of 90 percent or better among employees, LIPs and STVs.

Table 4.6.3: Seasonal Influenza Vaccination Rates Among Healthcare Personnel (HCP) by Hospital and Employee Type — Pennsylvania, 2012–2013

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
ABINGTON MEMORIAL HOSPITAL (11838)				
Employee	100	0	0	0
LIP	98	1	0	0
STV	98	0	0	2
Contractor	100	0	0	0
ADVANCED SURGICAL HOSPITAL (16317)				
Employee	63	36	1	0
LIP	24	0	0	76
STV	0	0	0	100
Contractor	0	0	0	100
ALBERT EINSTEIN MEDICAL CENTER (10585)				
Employee	99	0	1	0
LIP	38	0	0	62
STV	100	0	0	0
Contractor	.	.	.	.
ALBERT EINSTEIN MEDICAL CENTER AT ELKINS PARK (12500)				
Employee	99	0	0	0
LIP	.	.	.	.
STV	.	.	.	.
Contractor	.	.	.	.
ALBERT EINSTEIN MEDICAL CENTER MOSS REHABILITATION (12508)				
Employee	98	0	1	0
LIP	.	.	.	.
STV	100	0	0	0
Contractor	.	.	.	.
ALLEGHENY GENERAL HOSPITAL (10648)				
Employee	50	21	1	28
LIP	20	2	0	78
STV	38	2	0	61
Contractor	66	0	0	34
ALLEGHENY VALLEY HOSPITAL (11842)				
Employee	60	23	1	16
LIP	32	3	0	65
STV	57	0	0	42
Contractor	42	0	0	58
ALLIED SERVICES INSTITUTE OF REHABILITATION (12591)				
Employee	74	24	2	0
LIP	100	0	0	0
STV	100	0	0	0
Contractor	.	.	.	.
ALTOONA REGIONAL HEALTH SYSTEM (10178)				
Employee	58	16	1	26
LIP	45	1	0	54
STV	55	1	0	44
Contractor	28	31	0	42
ARIA HEALTH (11388)				
Employee	98	0	1	0
LIP	99	0	1	0
STV	99	0	0	0
Contractor	99	0	1	0

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Table 4.6.3 – Influenza Vaccination Rates Among HCP by Facility – Continued from previous page

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
ARMSTRONG COUNTY MEMORIAL HOSPITAL (12057)				
Employee	73	21	3	2
LIP	53	2	2	43
STV	93	0	0	7
Contractor	.	.	.	.
BARIX CLINICS OF PENNSYLVANIA (12037)				
Employee	42	56	0	2
LIP	11	89	0	0
STV	.	.	.	.
Contractor	.	.	.	.
BARNES-KASSON COUNTY HOSPITAL (12404)				
Employee	97	3	1	0
LIP	67	33	0	0
STV	100	0	0	0
Contractor	.	.	.	.
BELMONT CENTER FOR COMPREHENSIVE TREATMENT (12505)				
Employee	99	0	1	0
LIP	.	.	.	.
STV	.	.	.	.
Contractor	.	.	.	.
BERWICK HOSPITAL CENTER (11442)				
Employee	54	23	6	17
LIP	67	18	0	14
STV	75	25	0	0
Contractor	0	0	0	100
BRADFORD REGIONAL MEDICAL CENTER (12361)				
Employee	96	3	1	0
LIP	38	0	0	62
STV	89	0	1	10
Contractor	98	0	2	0
BRANDYWINE HOSPITAL (11979)				
Employee	78	7	6	10
LIP	39	1	2	58
STV	73	4	1	22
Contractor	92	0	8	0
BROOKE GLEN BEHAVIORAL HOSPITAL (12623)				
Employee	62	7	1	30
LIP	33	17	17	33
STV	86	14	0	0
Contractor	44	0	0	56
BROOKVILLE HOSPITAL (12418)				
Employee	61	25	0	14
LIP	.	.	.	.
STV	.	.	.	.
Contractor	.	.	.	.
BUCKS COUNTY SPECIALTY HOSPITAL (15202)				
Employee	74	23	0	4
LIP	58	0	0	42
STV	.	.	.	.
Contractor	100	0	0	0
BUCKTAIL MEDICAL CENTER (12461)				
Employee	97	0	3	0
LIP	100	0	0	0
STV	83	0	17	0
Contractor	92	0	8	0

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Table 4.6.3 – Influenza Vaccination Rates Among HCP by Facility – Continued from previous page

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
BUTLER MEMORIAL HOSPITAL (11736)				
Employee	84	16	0	1
LIP	56	38	0	6
STV	91	6	0	3
Contractor	.	.	.	.
CANONSBURG GENERAL HOSPITAL (11586)				
Employee	74	18	2	7
LIP	24	0	0	76
STV	43	0	0	57
Contractor	40	0	0	60
CARLISLE REGIONAL MEDICAL CENTER (11997)				
Employee	73	17	1	10
LIP	94	3	0	4
STV	100	0	0	0
Contractor	64	0	0	36
CHAMBERSBURG HOSPITAL (11913)				
Employee	52	8	1	39
LIP	75	16	0	9
STV	55	9	1	35
Contractor	23	0	0	77
CHARLES COLE MEMORIAL HOSPITAL (11956)				
Employee	98	1	1	0
LIP	68	21	11	0
STV	91	7	2	0
Contractor	92	8	0	0
CHESTER COUNTY HOSPITAL (12016)				
Employee	98	0	1	0
LIP	87	0	2	11
STV	99	0	1	0
Contractor	99	0	1	0
CHESTNUT HILL HOSPITAL (12304)				
Employee	85	14	1	0
LIP	42	1	0	57
STV	91	0	0	9
Contractor	80	19	0	1
CHILDRENS HOME OF PITTSBURGH, THE (12336)				
Employee	42	2	6	51
LIP	76	4	4	15
STV	.	.	.	.
Contractor	.	.	.	.
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)				
Employee	99	0	1	1
LIP	99	0	0	1
STV	49	0	0	51
Contractor	84	0	0	16
CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)				
Employee	79	6	1	14
LIP	41	0	0	59
STV	.	.	.	.
Contractor	.	.	.	.
CHILDRENS INSTITUTE OF PITTSBURGH (12266)				
Employee	58	23	0	19
LIP	77	15	0	8
STV	27	19	0	54
Contractor	39	57	0	4

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Table 4.6.3 – Influenza Vaccination Rates Among HCP by Facility – Continued from previous page

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
CLARION HOSPITAL (11654)				
Employee	76	24	0	0
LIP	81	17	2	0
STV	78	22	0	0
Contractor	100	0	0	0
CLARION PSYCHIATRIC CENTER (12454)				
Employee	76	8	3	14
LIP	60	0	20	20
STV	.	.	.	.
Contractor	50	0	25	25
CLARKS SUMMIT STATE HOSPITAL (12051)				
Employee	41	53	1	4
LIP	.	.	.	.
STV	.	.	.	.
Contractor	.	.	.	.
CLEARFIELD HOSPITAL (11843)				
Employee	65	32	1	3
LIP	54	0	0	46
STV	43	7	0	50
Contractor	47	0	0	53
CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)				
Employee	48	41	1	10
LIP	52	13	0	35
STV	53	30	2	16
Contractor	36	42	0	23
COORDINATED HEALTH ORTHOPEDIC HOSPITAL, LLC (11872)				
Employee	78	13	1	8
LIP	100	0	0	0
STV	.	.	.	.
Contractor	100	0	0	0
CORRY MEMORIAL HOSPITAL (12283)				
Employee	76	20	1	3
LIP	47	0	0	53
STV	.	.	.	.
Contractor	.	.	.	.
CRICHTON REHABILITATION CENTER (12273)				
Employee	44	47	9	0
LIP	56	11	0	33
STV	100	0	0	0
Contractor	44	11	44	0
CROZER CHESTER MEDICAL CENTER (11839)				
Employee	95	2	3	0
LIP	97	1	2	0
STV	100	0	0	0
Contractor	.	.	.	.
CROZER CHESTER MEDICAL CENTER SPRINGFIELD (11851)				
Employee	96	1	3	0
LIP	98	1	1	0
STV	91	0	9	0
Contractor	.	.	.	.
CROZER CHESTER MEDICAL CENTER TAYLOR (11932)				
Employee	96	0	3	1
LIP	96	0	3	1
STV	98	0	2	0
Contractor	.	.	.	.

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Table 4.6.3 – Influenza Vaccination Rates Among HCP by Facility – Continued from previous page

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
DANVILLE STATE HOSPITAL (11848)				
Employee	59	23	1	16
LIP	40	0	0	60
STV	67	0	0	33
Contractor	44	0	0	56
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)				
Employee	96	0	4	0
LIP	97	0	3	0
STV	100	0	0	0
Contractor	100	0	0	0
DEVEREUX CHILDRENS BEHAVIORAL HEALTH INSTITUTE (12738)				
Employee	41	29	7	23
LIP	100	0	0	0
STV	.	.	.	.
Contractor	.	.	.	.
DIVINE PROVIDENCE HOSPITAL (11743)				
Employee	95	4	1	0
LIP	57	0	0	43
STV	88	1	0	10
Contractor	.	.	.	.
DOYLESTOWN HOSPITAL (10190)				
Employee	99	0	1	0
LIP	99	0	1	0
STV	99	0	1	0
Contractor	.	.	.	.
DUBOIS REGIONAL MEDICAL CENTER (11606)				
Employee	65	9	1	25
LIP	49	4	0	47
STV	59	34	1	6
Contractor	44	15	0	41
EAGLEVILLE HOSPITAL (12965)				
Employee	72	17	3	9
LIP	100	0	0	0
STV	0	11	0	89
Contractor	33	0	0	67
EASTERN REGIONAL MEDICAL CENTER (12348)				
Employee	95	4	1	0
LIP	61	29	11	0
STV	48	37	15	0
Contractor	40	60	0	0
EASTON HOSPITAL (11929)				
Employee	85	15	0	0
LIP	31	69	0	0
STV	49	51	0	0
Contractor	.	.	.	.
EDGEWOOD SURGICAL HOSPITAL (12552)				
Employee	41	48	2	9
LIP	47	53	0	0
STV	.	.	.	.
Contractor	75	0	0	25
EINSTEIN MEDICAL CENTER MONTGOMERY (30210)				
Employee	91	8	0	1
LIP	12	0	0	88
STV	100	0	0	0
Contractor	.	.	.	.

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Table 4.6.3 – Influenza Vaccination Rates Among HCP by Facility – Continued from previous page

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
ELK REGIONAL HEALTH CENTER (11859)				
Employee	75	0	0	25
LIP	100	0	0	0
STV	75	0	0	25
Contractor	92	0	0	8
ELLWOOD CITY HOSPITAL (11779)				
Employee	68	27	5	0
LIP	39	2	0	60
STV	100	0	0	0
Contractor	67	0	0	33
ENDLESS MOUNTAINS HEALTH SYSTEMS (11817)				
Employee	71	10	1	18
LIP	15	0	0	85
STV	0	0	0	100
Contractor	0	0	0	100
EPHRATA COMMUNITY HOSPITAL (11764)				
Employee	86	12	2	1
LIP	13	0	0	87
STV	81	5	1	12
Contractor	97	3	0	0
EVANGELICAL COMMUNITY HOSPITAL (11701)				
Employee	98	2	0	0
LIP	100	0	0	0
STV	97	1	0	1
Contractor	.	.	.	.
EXCELA HEALTH FRICK HOSPITAL (11639)				
Employee	94	6	0	0
LIP	93	7	0	0
STV	97	3	0	0
Contractor	100	0	0	0
EXCELA HEALTH LATROBE HOSPITAL (11651)				
Employee	92	8	0	0
LIP	90	10	0	0
STV	92	6	0	2
Contractor	100	0	0	0
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)				
Employee	91	7	0	1
LIP	90	8	2	0
STV	88	4	0	8
Contractor	100	0	0	0
FAIRMOUNT BEHAVIORAL HEALTH SYSTEM (12565)				
Employee	62	14	1	23
LIP	.	.	.	.
STV	.	.	.	.
Contractor	.	.	.	.
FIRST HOSPITAL OF WYOMING VALLEY (12050)				
Employee	42	26	6	26
LIP	0	10	0	90
STV	.	.	.	.
Contractor	.	.	.	.
FORBES REGIONAL HOSPITAL (11265)				
Employee	43	21	1	35
LIP	25	1	0	73
STV	65	0	0	35
Contractor	.	.	.	.

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Table 4.6.3 – Influenza Vaccination Rates Among HCP by Facility – Continued from previous page

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
FOUNDATIONS BEHAVIORAL HEALTH (12832)				
Employee	66	27	3	4
LIP	100	0	0	0
STV	100	0	0	0
Contractor	.	.	.	.
FRIENDS HOSPITAL (12488)				
Employee	69	19	2	10
LIP	.	.	.	.
STV	0	0	0	100
Contractor	53	0	0	47
FULTON COUNTY MEDICAL CENTER (11939)				
Employee	73	25	2	0
LIP	77	23	0	0
STV	76	5	0	19
Contractor	.	.	.	.
GEISINGER HEALTHSOUTH REHABILITATION HOSPITAL (11993)				
Employee	80	18	1	1
LIP	83	17	0	0
STV	100	0	0	0
Contractor	.	.	.	.
GEISINGER MEDICAL CENTER (11775)				
Employee	98	2	0	0
LIP	28	0	0	72
STV	44	0	0	56
Contractor	.	.	.	.
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)				
Employee	97	2	0	0
LIP	2	0	0	98
STV	24	0	0	76
Contractor	.	.	.	.
GEISINGER-BLOOMSBURG HOSPITAL (12008)				
Employee	95	4	1	0
LIP	0	0	0	100
STV	96	4	0	0
Contractor	.	.	.	.
GEISINGER-COMMUNITY MEDICAL CENTER (11914)				
Employee	96	4	1	0
LIP	14	0	0	86
STV	35	0	0	65
Contractor	.	.	.	.
GETTYSBURG HOSPITAL (11531)				
Employee	81	16	1	1
LIP	83	14	3	0
STV	80	20	0	0
Contractor	80	20	0	0
GNADEN HUETTEN MEMORIAL HOSPITAL (12241)				
Employee	73	23	2	1
LIP	49	3	0	48
STV	17	0	0	83
Contractor	.	.	.	.
GOOD SHEPHERD PENN PARTNERS (13929)				
Employee	96	1	1	1
LIP	100	0	0	0
STV	100	0	0	0
Contractor	86	0	2	12

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Table 4.6.3 – Influenza Vaccination Rates Among HCP by Facility – Continued from previous page

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
GOOD SHEPHERD SPECIALTY HOSPITAL (11887)				
Employee	88	12	1	0
LIP	75	0	0	25
STV	.	.	.	.
Contractor	100	0	0	0
GRAND VIEW HOSPITAL (11847)				
Employee	99	1	1	0
LIP	100	0	0	0
STV	99	1	0	0
Contractor	100	0	0	0
GROVE CITY MEDICAL CENTER (11722)				
Employee	78	22	0	0
LIP	90	8	0	2
STV	81	18	1	0
Contractor	.	.	.	.
HAHNEMANN UNIVERSITY HOSPITAL (11437)				
Employee	98	0	1	1
LIP	77	0	1	22
STV	100	0	0	0
Contractor	98	0	0	2
HANOVER HOSPITAL (11899)				
Employee	99	0	1	0
LIP	98	0	2	0
STV	97	0	3	0
Contractor	100	0	0	0
HAVEN BEHAVIORAL HOSPITAL OF EASTERN PENNSYLVANIA (14471)				
Employee	57	24	0	19
LIP	.	.	.	.
STV	.	.	.	.
Contractor	.	.	.	.
HAZLETON GENERAL HOSPITAL (11878)				
Employee	75	15	11	0
LIP	21	5	0	74
STV	60	0	0	40
Contractor	100	0	0	0
HEALTHSOUTH HARMARVILLE REHABILITATION HOSPITAL (11727)				
Employee	42	57	0	0
LIP	80	19	1	0
STV	45	55	0	0
Contractor	.	.	.	.
HEALTHSOUTH NITTANY VALLEY REHABILITATION HOSPITAL (11667)				
Employee	62	8	2	28
LIP	100	0	0	0
STV	64	0	0	36
Contractor	100	0	0	0
HEALTHSOUTH READING REHABILITATION HOSPITAL (12139)				
Employee	82	7	0	11
LIP	100	0	0	0
STV	.	.	.	.
Contractor	100	0	0	0
HEALTHSOUTH REHABILITATION HOSPITAL OF ALTOONA (11903)				
Employee	39	50	0	11
LIP	48	22	4	26
STV	30	0	0	70
Contractor	.	.	.	.

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Table 4.6.3 – Influenza Vaccination Rates Among HCP by Facility – Continued from previous page

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
HEALTHSOUTH REHABILITATION HOSPITAL OF ERIE (11810)				
Employee	50	12	2	36
LIP	63	2	0	35
STV	10	22	0	68
Contractor	100	0	0	0
HEALTHSOUTH REHABILITATION HOSPITAL OF MECHANICSBURG (12402)				
Employee	62	15	2	21
LIP	88	0	6	6
STV	100	0	0	0
Contractor	.	.	.	.
HEALTHSOUTH REHABILITATION HOSPITAL OF SEWICKLEY (12066)				
Employee	62	11	0	26
LIP	16	0	3	81
STV	.	.	.	.
Contractor	.	.	.	.
HEALTHSOUTH REHABILITATION HOSPITAL OF YORK (12058)				
Employee	64	30	1	6
LIP	88	12	0	0
STV	98	2	0	0
Contractor	.	.	.	.
HEART OF LANCASTER REGIONAL MEDICAL CENTER (12571)				
Employee	75	15	0	9
LIP	74	0	0	26
STV	68	0	1	31
Contractor	88	2	0	10
HERITAGE VALLEY BEAVER (11831)				
Employee	58	3	0	39
LIP	22	0	0	78
STV	13	3	0	84
Contractor	.	.	.	.
HERITAGE VALLEY SEWICKLEY (10375)				
Employee	59	8	0	33
LIP	9	0	0	91
STV	68	7	1	25
Contractor	.	.	.	.
HIGHLANDS HOSPITAL (11902)				
Employee	64	16	0	21
LIP	12	0	0	88
STV	83	17	0	0
Contractor	100	0	0	0
HOLY REDEEMER HOSPITAL AND MEDICAL CENTER (11973)				
Employee	77	12	4	7
LIP	49	1	2	48
STV	86	0	0	14
Contractor	.	.	.	.
HOLY SPIRIT HOSPITAL (12387)				
Employee	77	1	0	21
LIP	63	9	0	28
STV	79	0	0	21
Contractor	.	.	.	.
HORSHAM CLINIC (12543)				
Employee	68	27	1	5
LIP	.	.	.	.
STV	36	9	0	55
Contractor	25	75	0	0

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Table 4.6.3 – Influenza Vaccination Rates Among HCP by Facility – Continued from previous page

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
HOSPITAL OF FOX CHASE CANCER CENTER (12134)				
Employee	69	4	0	26
LIP	40	0	0	60
STV	27	1	0	72
Contractor	.	.	.	.
HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)				
Employee	98	0	2	0
LIP	99	0	1	0
STV	100	0	0	0
Contractor	86	0	0	14
INDIANA REGIONAL MEDICAL CENTER (11759)				
Employee	90	8	0	2
LIP	50	1	0	49
STV	85	3	0	12
Contractor	85	1	0	14
J C BLAIR MEMORIAL HOSP (11724)				
Employee	79	6	0	15
LIP	82	15	0	3
STV	82	16	1	0
Contractor	.	.	.	.
JAMESON MEMORIAL HOSPITAL (11954)				
Employee	51	47	1	0
LIP	31	7	0	62
STV	70	1	0	29
Contractor	.	.	.	.
JEANES HOSPITAL (11459)				
Employee	74	14	0	12
LIP	82	0	0	18
STV	20	1	0	79
Contractor	24	0	0	76
JEFFERSON REGIONAL MEDICAL CENTER (10237)				
Employee	52	40	3	4
LIP	54	9	2	35
STV	77	17	2	3
Contractor	49	47	2	2
JENNERSVILLE REGIONAL HOSPITAL (12337)				
Employee	74	22	1	3
LIP	72	10	0	18
STV	85	15	0	0
Contractor	.	.	.	.
JERSEY SHORE HOSPITAL (11689)				
Employee	97	1	0	2
LIP	76	0	0	24
STV	100	0	0	0
Contractor	50	50	0	0
JOHN HEINZ INSTITUTE OF REHABILITATION (11861)				
Employee	83	14	2	1
LIP	90	0	0	10
STV	100	0	0	0
Contractor	86	14	0	0
KANE COMMUNITY HOSPITAL (12111)				
Employee	81	13	3	3
LIP	60	40	0	0
STV	80	20	0	0
Contractor	.	.	.	.

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Table 4.6.3 – Influenza Vaccination Rates Among HCP by Facility – Continued from previous page

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
KENSINGTON HOSPITAL (12609)				
Employee	30	46	1	23
LIP	0	0	0	100
STV	0	0	0	100
Contractor	40	0	0	60
KIDSPEACE ORCHARD HILLS CAMPUS (12430)				
Employee	59	41	0	0
LIP	57	43	0	0
STV	.	.	.	.
Contractor	.	.	.	.
KINDRED HOSPITAL — PHILADELPHIA (11832)				
Employee	54	15	1	29
LIP	57	0	4	39
STV	.	.	.	.
Contractor	53	13	0	33
KINDRED HOSPITAL — PITTSBURGH (12358)				
Employee	60	27	5	8
LIP	46	0	8	46
STV	.	.	.	.
Contractor	45	45	9	0
KINDRED HOSPITAL — WYOMING VALLEY (12485)				
Employee	72	26	2	0
LIP	8	0	0	92
STV	100	0	0	0
Contractor	68	16	0	16
KINDRED HOSPITAL AT HERITAGE VALLEY (12268)				
Employee	43	49	5	3
LIP	2	0	0	98
STV	50	0	0	50
Contractor	24	16	2	58
KINDRED HOSPITAL EASTON (12007)				
Employee	81	16	2	1
LIP	71	29	0	0
STV	.	.	.	.
Contractor	.	.	.	.
KINDRED HOSPITAL PHILADELPHIA — HAVERTOWN (12908)				
Employee	69	21	0	10
LIP	5	0	0	95
STV	.	.	.	.
Contractor	80	20	0	0
KINDRED HOSPITAL PITTSBURGH — NORTH SHORE (12296)				
Employee	57	33	1	9
LIP	30	0	0	70
STV	.	.	.	.
Contractor	83	17	0	0
KINDRED HOSPITAL SOUTH PHILADELPHIA (11940)				
Employee	72	8	0	20
LIP	45	1	0	55
STV	.	.	.	.
Contractor	62	0	0	38
KIRKBRIDE CENTER (12624)				
Employee	55	18	0	27
LIP	100	0	0	0
STV	92	8	0	0
Contractor	25	0	0	75

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Table 4.6.3 – Influenza Vaccination Rates Among HCP by Facility – Continued from previous page

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
LANCASTER GENERAL HOSPITAL (10183)				
Employee	99	0	1	0
LIP	99	0	1	0
STV	100	0	0	0
Contractor	99	1	0	0
LANCASTER REGIONAL MEDICAL CENTER (12335)				
Employee	76	6	1	16
LIP	65	0	0	35
STV	74	0	1	26
Contractor	90	1	0	10
LANCASTER REHABILITATION HOSPITAL (12628)				
Employee	88	7	4	2
LIP	100	0	0	0
STV	.	.	.	.
Contractor	100	0	0	0
LANSDALE HOSPITAL (12032)				
Employee	100	0	0	0
LIP	100	0	0	0
STV	99	0	1	0
Contractor	100	0	0	0
LEHIGH VALLEY HOSPITAL — MUHLENBERG (11898)				
Employee	99	0	0	0
LIP	99	0	1	0
STV	100	0	0	0
Contractor	.	.	.	.
LEHIGH VALLEY HOSPITAL (11884)				
Employee	98	2	0	0
LIP	99	0	1	0
STV	100	0	0	0
Contractor	.	.	.	.
LEWISTOWN HOSPITAL (11825)				
Employee	92	6	2	0
LIP	53	0	0	47
STV	78	2	0	20
Contractor	.	.	.	.
LIFECARE HOSPITALS OF CHESTER COUNTY (12005)				
Employee	93	0	2	5
LIP	56	0	0	44
STV	100	0	0	0
Contractor	100	0	0	0
LIFECARE HOSPITALS OF MECHANICSBURG (12388)				
Employee	81	7	0	11
LIP	67	33	0	0
STV	.	.	.	.
Contractor	.	.	.	.
LIFECARE HOSPITALS OF PITTSBURGH — ALLE-KISKI CAMPUS (18955)				
Employee	93	5	1	0
LIP	.	.	.	.
STV	.	.	.	.
Contractor	.	.	.	.
LIFECARE HOSPITALS OF PITTSBURGH — MONROEVILLE (12254)				
Employee	74	9	2	15
LIP	24	0	2	74
STV	100	0	0	0
Contractor	.	.	.	.

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Table 4.6.3 – Influenza Vaccination Rates Among HCP by Facility – Continued from previous page

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
LIFECARE HOSPITALS OF PITTSBURGH — SUBURBAN CAMPUS (12385)				
Employee	77	23	0	0
LIP	4	0	0	96
STV	100	0	0	0
Contractor	.	.	.	.
LIFECARE HOSPITALS OF PITTSBURGH (11945)				
Employee	67	8	0	25
LIP	49	5	2	44
STV	100	0	0	0
Contractor	100	0	0	0
LOCK HAVEN HOSPITAL (12097)				
Employee	85	3	3	9
LIP	19	1	1	79
STV	83	0	0	17
Contractor	64	5	0	32
LOWER BUCKS HOSPITAL (12390)				
Employee	64	25	2	9
LIP	2	0	0	98
STV	49	5	1	46
Contractor	62	34	1	3
MAGEE REHAB HOSPITAL (12146)				
Employee	99	0	1	0
LIP	88	0	12	0
STV	.	.	.	.
Contractor	.	.	.	.
MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)				
Employee	78	3	1	18
LIP	47	0	0	53
STV	8	0	0	92
Contractor	.	.	.	.
MAIN LINE HOSPITAL BRYN MAWR (11753)				
Employee	99	0	1	0
LIP	99	1	0	0
STV	99	1	0	0
Contractor	.	.	.	.
MAIN LINE HOSPITAL BRYN MAWR REHABILITATION (11417)				
Employee	99	0	1	0
LIP	100	0	0	0
STV	99	0	1	0
Contractor	.	.	.	.
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)				
Employee	100	0	0	0
LIP	100	0	0	0
STV	96	0	0	4
Contractor	.	.	.	.
MEADVILLE MEDICAL CENTER (11583)				
Employee	67	19	1	13
LIP	75	15	0	10
STV	22	0	0	78
Contractor	46	5	0	49
MEMORIAL HOSPITAL (11633)				
Employee	95	3	0	1
LIP	100	0	0	0
STV	100	0	0	0
Contractor	60	40	0	0

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Table 4.6.3 – Influenza Vaccination Rates Among HCP by Facility – Continued from previous page

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
MEMORIAL HOSPITAL, INC. TOWANDA (12549)				
Employee	58	19	2	22
LIP	37	16	0	47
STV	100	0	0	0
Contractor	100	0	0	0
MERCY FITZGERALD HOSPITAL (11683)				
Employee	97	1	2	0
LIP	60	0	0	40
STV	99	0	0	1
Contractor	82	0	1	18
MERCY PHILADELPHIA HOSPITAL (11946)				
Employee	93	1	1	5
LIP	72	0	1	27
STV	100	0	0	0
Contractor	0	0	0	100
MERCY SUBURBAN HOSPITAL NORRISTOWN (11952)				
Employee	95	3	1	1
LIP	67	1	1	31
STV	96	0	3	1
Contractor	100	0	0	0
MEYERSDALE COMMUNITY HOSPITAL (11968)				
Employee	54	40	4	2
LIP	91	0	0	9
STV	56	0	0	44
Contractor	100	0	0	0
MID-VALLEY HOSPITAL (11557)				
Employee	56	41	1	1
LIP	17	17	0	67
STV	0	0	0	100
Contractor	.	.	.	.
MILLCREEK COMMUNITY HOSPITAL (12253)				
Employee	61	36	0	3
LIP	56	0	0	44
STV	33	0	0	67
Contractor	.	.	.	.
MILTON S HERSHEY MEDICAL CENTER (11747)				
Employee	83	7	0	10
LIP	70	0	0	30
STV	90	0	0	10
Contractor	100	0	0	0
MINERS MEDICAL CENTER (12295)				
Employee	53	45	0	1
LIP	0	100	0	0
STV	.	.	.	.
Contractor	55	45	0	0
MONONGAHELA VALLEY HOSPITAL (11069)				
Employee	64	34	2	0
LIP	71	21	3	5
STV	95	2	1	2
Contractor	53	47	0	0
MONTGOMERY COUNTY MH/MR EMERGENCY SERVICES, INC. (12287)				
Employee	41	59	0	0
LIP	.	.	.	.
STV	.	.	.	.
Contractor	.	.	.	.

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Table 4.6.3 – Influenza Vaccination Rates Among HCP by Facility – Continued from previous page

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
MOSES TAYLOR HOSPITAL (11528)				
Employee	57	36	4	2
LIP	6	0	0	94
STV	34	0	0	66
Contractor	34	0	0	66
MOUNT NITTANY MEDICAL CENTER (11797)				
Employee	88	9	2	1
LIP	77	0	0	23
STV	96	2	0	2
Contractor	.	.	.	.
MUNCY VALLEY HOSPITAL (11748)				
Employee	93	3	1	4
LIP	51	0	0	49
STV	82	1	0	17
Contractor	100	0	0	0
NASON HOSPITAL (11907)				
Employee	80	18	1	0
LIP	77	17	1	4
STV	99	1	0	0
Contractor	96	4	0	0
NAZARETH HOSPITAL (11919)				
Employee	79	19	1	1
LIP	51	1	1	48
STV	92	3	2	3
Contractor	.	.	.	.
NORRISTOWN STATE HOSPITAL (12047)				
Employee	61	6	0	32
LIP	.	.	.	.
STV	.	.	.	.
Contractor	.	.	.	.
OHIO VALLEY GENERAL HOSPITAL (12298)				
Employee	70	13	2	16
LIP	12	0	0	88
STV	62	0	0	38
Contractor	19	10	0	71
OSS ORTHOPAEDIC HOSPITAL (18467)				
Employee	63	33	1	3
LIP	57	36	0	7
STV	50	0	0	50
Contractor	.	.	.	.
PALMERTON HOSPITAL (12396)				
Employee	75	22	1	1
LIP	49	3	0	48
STV	13	0	0	87
Contractor	.	.	.	.
PENN PRESBYTERIAN MEDICAL CENTER (11814)				
Employee	96	0	1	3
LIP	88	0	0	12
STV	73	0	0	27
Contractor	100	0	0	0
PENN STATE HERSHEY REHABILITATION LLC (11915)				
Employee	70	24	2	4
LIP	100	0	0	0
STV	100	0	0	0
Contractor	100	0	0	0

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Table 4.6.3 – Influenza Vaccination Rates Among HCP by Facility – Continued from previous page

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS (11448)				
Employee	98	1	1	0
LIP	62	0	0	38
STV	100	0	0	0
Contractor	.	.	.	.
PENNSYLVANIA PSYCHIATRIC INSTITUTE (14190)				
Employee	64	32	2	1
LIP	30	5	0	65
STV	33	0	0	67
Contractor	.	.	.	.
PHILHAVEN HOSPITAL (11740)				
Employee	60	22	2	16
LIP	75	0	0	25
STV	39	26	0	35
Contractor	33	11	0	56
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)				
Employee	68	20	2	9
LIP	69	5	2	24
STV	55	6	0	40
Contractor	50	2	0	48
PHYSICIANS CARE SURGICAL HOSPITAL (19630)				
Employee	53	15	0	32
LIP	11	0	0	89
STV	0	0	0	100
Contractor	.	.	.	.
PINNACLE HEALTH HOSPITALS (10122)				
Employee	61	12	0	26
LIP	58	4	1	37
STV	49	8	0	43
Contractor	.	.	.	.
POCONO MEDICAL CENTER (11772)				
Employee	89	4	2	6
LIP	75	0	1	24
STV	77	8	0	15
Contractor	89	3	2	7
POTTSTOWN MEMORIAL MEDICAL CENTER (11983)				
Employee	65	21	6	8
LIP	20	0	0	80
STV	45	0	0	55
Contractor	65	0	0	35
PUNXSUTAWNEY AREA HOSPITAL (11830)				
Employee	83	9	8	0
LIP	75	12	6	6
STV	64	9	27	0
Contractor	80	0	20	0
READING HOSPITAL AND MEDICAL CENTER (12375)				
Employee	69	17	1	13
LIP	72	2	0	26
STV	57	9	1	34
Contractor	.	.	.	.
REGIONAL HOSPITAL OF SCRANTON (12533)				
Employee	67	26	4	3
LIP	7	0	0	93
STV	35	0	0	65
Contractor	.	.	.	.

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Table 4.6.3 – Influenza Vaccination Rates Among HCP by Facility – Continued from previous page

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
RIDDLE MEMORIAL HOSPITAL (11731)				
Employee	100	0	0	0
LIP	100	0	0	0
STV	100	0	0	0
Contractor	.	.	.	.
ROBERT PACKER HOSPITAL (12422)				
Employee	95	2	3	1
LIP	79	7	7	7
STV	97	2	0	1
Contractor	79	5	0	17
ROXBOROUGH MEMORIAL HOSPITAL (11978)				
Employee	98	1	1	0
LIP	98	2	0	0
STV	99	0	1	1
Contractor	72	0	0	28
ROXBURY TREATMENT CENTER (12723)				
Employee	56	39	2	3
LIP	.	.	.	.
STV	.	.	.	.
Contractor	.	.	.	.
SACRED HEART HOSPITAL (11684)				
Employee	99	0	1	0
LIP	95	0	0	5
STV	100	0	0	0
Contractor	100	0	0	0
SCHUYLKILL MEDICAL CENTER — EAST NORWEGIAN STREET (11922)				
Employee	68	22	1	8
LIP	88	8	2	2
STV	99	1	0	0
Contractor	78	22	0	0
SCHUYLKILL MEDICAL CENTER — SOUTH JACKSON STREET (12087)				
Employee	72	19	1	9
LIP	79	7	2	12
STV	95	5	0	0
Contractor	85	15	0	0
SELECT SPECIALITY HOSPITAL — CENTRAL PENNSYLVANIA (YORK) (12334)				
Employee	85	9	3	3
LIP	83	0	0	17
STV	.	.	.	.
Contractor	50	50	0	0
SELECT SPECIALITY HOSPITAL — ERIE (11880)				
Employee	95	5	1	0
LIP	74	0	0	26
STV	80	0	20	0
Contractor	100	0	0	0
SELECT SPECIALITY HOSPITAL — JOHNSTOWN (12299)				
Employee	82	9	0	9
LIP	46	11	1	42
STV	100	0	0	0
Contractor	19	0	0	81
SELECT SPECIALTY HOSPITAL — CENTRAL PA (13921)				
Employee	77	11	0	12
LIP	70	7	0	23
STV	.	.	.	.
Contractor	.	.	.	.

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Table 4.6.3 – Influenza Vaccination Rates Among HCP by Facility – Continued from previous page

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
SELECT SPECIALTY HOSPITAL — CENTRAL PENNSYLVANIA (CAMP HILL) (12147)				
Employee	83	4	3	10
LIP	52	3	2	43
STV	.	.	.	.
Contractor	.	.	.	.
SELECT SPECIALTY HOSPITAL — DANVILLE (12123)				
Employee	75	3	0	23
LIP	55	2	0	44
STV	.	.	.	.
Contractor	100	0	0	0
SELECT SPECIALTY HOSPITAL — MCKEESPORT, INC. (12271)				
Employee	88	10	2	0
LIP	.	.	.	.
STV	.	.	.	.
Contractor	100	0	0	0
SELECT SPECIALTY HOSPITAL — PITTSBURGH/UPMC (12009)				
Employee	93	6	1	0
LIP	28	0	0	72
STV	100	0	0	0
Contractor	.	.	.	.
SELECT SPECIALTY HOSPITAL LAUREL HIGHLANDS, INC. (12108)				
Employee	71	20	3	6
LIP	51	0	0	49
STV	100	0	0	0
Contractor	41	45	14	0
SHARON REGIONAL HEALTH SYSTEM (12250)				
Employee	63	32	3	3
LIP	58	17	1	25
STV	71	5	1	23
Contractor	.	.	.	.
SHRINERS HOSPITAL FOR CHILDREN — PHILADELPHIA (12244)				
Employee	75	22	1	3
LIP	100	0	0	0
STV	80	20	0	0
Contractor	.	.	.	.
SOLDIERS & SAILORS MEM HOSPITAL (11688)				
Employee	73	23	1	2
LIP	45	9	36	9
STV	84	16	0	0
Contractor	73	27	0	0
SOMERSET HOSPITAL (12282)				
Employee	86	2	3	9
LIP	42	2	1	56
STV	78	0	0	22
Contractor	.	.	.	.
SOUTHWEST REGIONAL MEDICAL CENTER (11942)				
Employee	60	23	4	14
LIP	45	0	0	55
STV	100	0	0	0
Contractor	.	.	.	.
SOUTHWOOD PSYCHIATRIC HOSPITAL (12453)				
Employee	53	20	1	25
LIP	.	.	.	.
STV	.	.	.	.
Contractor	.	.	.	.

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Table 4.6.3 – Influenza Vaccination Rates Among HCP by Facility – Continued from previous page

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
SPECIAL CARE HOSPITAL (12604)				
Employee	66	25	7	2
LIP	6	0	0	94
STV	.	.	.	.
Contractor	.	.	.	.
ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)				
Employee	99	0	1	0
LIP	.	.	.	.
STV	.	.	.	.
Contractor	.	.	.	.
ST. CLAIR MEMORIAL HOSPITAL (10561)				
Employee	78	17	5	0
LIP	97	3	0	0
STV	97	0	0	3
Contractor	44	53	0	3
ST. JOHN VIANNEY HOSPITAL (12548)				
Employee	82	15	3	0
LIP	100	0	0	0
STV	100	0	0	0
Contractor	100	0	0	0
ST. JOSEPH MEDICAL CENTER (11961)				
Employee	98	0	1	1
LIP	82	8	0	10
STV	100	0	0	0
Contractor	.	.	.	.
ST. JOSEPHS HOSPITAL (12438)				
Employee	43	13	2	41
LIP	68	0	0	32
STV	100	0	0	0
Contractor	44	33	0	22
ST. LUKES HOSPITAL ANDERSON CAMPUS (21487)				
Employee	78	16	4	2
LIP	48	2	3	47
STV	27	0	0	73
Contractor	.	.	.	.
ST. LUKES HOSPITAL BETHLEHEM (11718)				
Employee	78	15	3	4
LIP	30	1	2	68
STV	84	6	0	10
Contractor	.	.	.	.
ST. LUKES MINERS MEMORIAL HOSPITAL (11784)				
Employee	74	18	4	4
LIP	37	1	2	60
STV	80	20	0	0
Contractor	86	14	0	0
ST. LUKES QUAKERTOWN HOSPITAL (11711)				
Employee	82	15	3	0
LIP	92	2	6	0
STV	56	21	0	23
Contractor	67	33	0	0
ST. MARY MEDICAL CENTER (11885)				
Employee	99	0	1	0
LIP	96	0	1	2
STV	100	0	0	0
Contractor	.	.	.	.

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Table 4.6.3 – Influenza Vaccination Rates Among HCP by Facility – Continued from previous page

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
ST. MARY MEDICAL CENTER REHAB (12483)				
Employee	100	0	0	0
LIP	.	.	.	.
STV	.	.	.	.
Contractor	.	.	.	.
ST. VINCENT HEALTH CENTER (11699)				
Employee	64	5	0	31
LIP	40	0	0	60
STV	54	0	0	46
Contractor	45	0	0	55
SUNBURY COMMUNITY HOSPITAL (12105)				
Employee	66	1	4	29
LIP	2	0	0	98
STV	53	17	0	31
Contractor	100	0	0	0
SURGICAL INSTITUTE OF READING (12535)				
Employee	93	5	2	0
LIP	60	28	0	12
STV	.	.	.	.
Contractor	89	11	0	0
SURGICAL SPECIALTY CENTER AT COORDINATED HEALTH, THE (15259)				
Employee	71	23	1	6
LIP	100	0	0	0
STV	.	.	.	.
Contractor	100	0	0	0
TEMPLE UNIVERSITY HOSPITAL (12382)				
Employee	74	22	1	3
LIP	100	0	0	0
STV	100	0	0	0
Contractor	100	0	0	0
THE GOOD SAMARITAN HOSPITAL (11712)				
Employee	78	18	2	3
LIP	34	2	0	65
STV	49	0	0	51
Contractor	44	0	0	56
THE GOOD SHEPHERD REHABILITATION HOSPITAL (11896)				
Employee	94	5	1	0
LIP	58	0	3	39
STV	66	0	1	33
Contractor	.	.	.	.
THE MEADOWS PSYCHIATRIC CENTER (12156)				
Employee	37	43	1	19
LIP	36	0	0	64
STV	.	.	.	.
Contractor	0	0	0	100
THE WASHINGTON HOSPITAL (11460)				
Employee	68	26	1	6
LIP	71	8	1	19
STV	74	15	2	9
Contractor	47	15	0	37
THE WESTERN PENNSYLVANIA HOSPITAL (11864)				
Employee	58	27	2	13
LIP	20	1	0	79
STV	43	0	1	56
Contractor	67	0	0	33

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Table 4.6.3 – Influenza Vaccination Rates Among HCP by Facility – Continued from previous page

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
THOMAS JEFFERSON UNIV HOSP - METHODIST (12017)				
Employee	99	0	1	0
LIP	97	0	2	1
STV	99	0	1	0
Contractor	100	0	0	0
THOMAS JEFFERSON UNIV HOSPITAL (11506)				
Employee	98	0	1	1
LIP	97	0	2	1
STV	95	0	0	5
Contractor	91	0	0	9
TITUSVILLE AREA HOSPITAL (11738)				
Employee	84	16	1	0
LIP	100	0	0	0
STV	94	4	1	0
Contractor	.	.	.	.
TORRANCE STATE HOSPITAL (12091)				
Employee	44	49	4	3
LIP	70	20	10	0
STV	75	25	0	0
Contractor	76	24	0	0
TROY COMMUNITY HOSPITAL (12018)				
Employee	86	11	2	1
LIP	90	0	0	10
STV	31	0	0	69
Contractor	.	.	.	.
TYLER MEMORIAL HOSPITAL (11829)				
Employee	76	23	1	0
LIP	73	8	0	19
STV	30	70	0	0
Contractor	64	36	0	0
TYRONE HOSPITAL (12717)				
Employee	94	6	0	0
LIP	95	5	0	0
STV	100	0	0	0
Contractor	75	25	0	0
UNIONTOWN HOSPITAL (10441)				
Employee	74	21	2	3
LIP	32	0	0	68
STV	89	0	1	10
Contractor	.	.	.	.
UPMC BEDFORD (11680)				
Employee	81	17	0	1
LIP	39	1	0	60
STV	64	7	0	29
Contractor	.	.	.	.
UPMC EAST (28812)				
Employee	77	0	0	22
LIP	51	0	0	48
STV	81	0	0	19
Contractor	.	.	.	.
UPMC HAMOT (11725)				
Employee	68	0	0	32
LIP	27	0	0	73
STV	30	1	2	67
Contractor	.	.	.	.

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Table 4.6.3 – Influenza Vaccination Rates Among HCP by Facility – Continued from previous page

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
UPMC HORIZON (11675)				
Employee	74	20	0	6
LIP	34	1	0	66
STV	45	0	0	55
Contractor	.	.	.	.
UPMC MCKEESPORT (11707)				
Employee	81	1	2	17
LIP	45	0	0	55
STV	70	3	0	27
Contractor	.	.	.	.
UPMC MERCY (10384)				
Employee	74	3	1	22
LIP	38	0	0	62
STV	48	0	0	52
Contractor	.	.	.	.
UPMC NORTHWEST (11837)				
Employee	81	5	2	13
LIP	47	0	0	53
STV	.	.	.	.
Contractor	.	.	.	.
UPMC PASSAVANT (11242)				
Employee	73	1	1	25
LIP	40	0	0	59
STV	72	7	1	20
Contractor	.	.	.	.
UPMC PRESBYTERIAN SHADYSIDE — PRESBYTERIAN (10348)				
Employee	66	0	0	34
LIP	48	0	0	51
STV	55	16	0	28
Contractor	.	.	.	.
UPMC PRESBYTERIAN SHADYSIDE — SHADYSIDE (10118)				
Employee	70	0	0	30
LIP	44	0	0	55
STV	24	18	1	57
Contractor	.	.	.	.
UPMC PRESBYTERIAN SHADYSIDE — WPIC (13702)				
Employee	61	0	0	39
LIP	.	.	.	.
STV	47	26	0	26
Contractor	.	.	.	.
UPMC ST MARGARET (11561)				
Employee	73	0	1	26
LIP	43	0	0	56
STV	54	12	1	33
Contractor	.	.	.	.
VALLEY FORGE MEDICAL CENTER AND HOSPITAL (12029)				
Employee	73	3	1	22
LIP	.	.	.	.
STV	.	.	.	.
Contractor	33	0	0	67
WARREN GENERAL HOSPITAL (12216)				
Employee	91	7	1	1
LIP	84	9	3	3
STV	80	0	0	20
Contractor	.	.	.	.

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Table 4.6.3 – Influenza Vaccination Rates Among HCP by Facility – Continued from previous page

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
WARREN STATE HOSPITAL (12081)				
Employee	61	32	3	4
LIP	50	0	0	50
STV	.	.	.	.
Contractor	.	.	.	.
WAYNE MEMORIAL HOSPITAL (12004)				
Employee	77	16	0	7
LIP	19	2	0	79
STV	100	0	0	0
Contractor	83	17	0	0
WAYNESBORO HOSPITAL (11642)				
Employee	57	41	2	0
LIP	74	17	0	9
STV	34	0	0	66
Contractor	.	.	.	.
WELLSPAN SURGERY AND REHABILITATION HOSPITAL (27430)				
Employee	70	26	3	2
LIP	100	0	0	0
STV	100	0	0	0
Contractor	.	.	.	.
WERNERSVILLE STATE HOSPITAL (12368)				
Employee	65	23	4	9
LIP	100	0	0	0
STV	100	0	0	0
Contractor	53	47	0	0
WESTFIELD HOSPITAL (12487)				
Employee	60	24	3	12
LIP	38	0	0	62
STV	.	.	.	.
Contractor	.	.	.	.
WILKES-BARRE GENERAL HOSPITAL (11916)				
Employee	63	26	6	4
LIP	61	20	1	18
STV	53	0	0	47
Contractor	.	.	.	.
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)				
Employee	94	1	0	5
LIP	28	0	0	72
STV	87	1	0	12
Contractor	75	25	0	0
WINDBER HOSPITAL (12031)				
Employee	60	33	1	7
LIP	4	1	0	95
STV	31	4	0	65
Contractor	.	.	.	.
YORK HOSPITAL (10108)				
Employee	76	21	2	2
LIP	90	9	1	0
STV	87	12	1	0
Contractor	78	22	0	0

5. Conclusion

The 2012 report on healthcare-associated infections (HAIs) in Pennsylvania provides evidence that hospitals have made significant and enduring progress in reducing these medical complications. Since the baseline year of 2009, the overall rate of HAIs has declined 9.4 percent, with an especially large decrease in the rate of CLABSIs (28.1 percent). Given the volume of inpatient care in a large state like Pennsylvania, these declines represent thousands of prevented HAIs. This is a significant achievement with a substantial impact on patient care. This is due to the high mortality associated with HAIs, the increased duration of hospitalization, the need for re-hospitalization, and the significant additional healthcare costs.

It has been estimated (Scott, 2009) that the average cost of any type of HAI is between $14,000 – $15,000, considering only direct medical costs. HAIs such as bloodstream infections and surgical site infections are known to be much costlier. Using conservative estimates, the reductions seen in just the past three years in Pennsylvania have saved a minimum of $108 million in direct healthcare costs that would have been associated with those HAIs.

Reductions in the benchmarking categories of CLABSIs (0.4 percent) and SSIs (1.2 percent), were also noted in the current report, as they were in previous years. However, the >20 percent declines in CLABSIs reported in both 2009 and 2010 are considerably greater than the decline seen in 2012. The reasons for this "leveling-off" in the decline are unclear. Some CLABSIs may be easier to prevent than others, as the underlying health status of the patient or the complexity of care being administered may vary. It is also possible that current prevention strategies curtail the occurrence of some CLABSIs more successfully than others, and the proportion of infections that are preventable using current interventions may be reached. The validity of this assertion and whether or not the small decline seen in 2012 is an aberration, can only be determined by analyzing additional data in the years to come.

Although the 2012 CAUTI rate was 10.22 percent higher than the 2011 rate, the CAUTI rate is still significantly better than the rate reported in 2009; modest but steady progress has been made in reducing the use of urinary catheters (DUR decreased by 12.59 percent since 2009). There has also been a smaller but steady decline in the use of central lines (DUR decreased by 2.31 percent since 2009). Reducing catheter and central line use are important prevention measures. The continued vigilance of the infection prevention community and recent work of Quality Improvement Organizations and Hospital Engagement Networks may further drive infection and utlization rates down in the future.

The reductions seen in Pennsylvania are the result of a concerted effort on the part of the infection prevention community to address the problem of HAIs. Some of the factors that have contributed to the favorable trends are the increased spotlight on HAIs by the public, public reporting of data, implementation of prevention strategies by infection preventionists, healthcare providers and healthcare systems, participation in prevention collaboratives, increased scrutiny by hospital administration and federal efforts to link incentive payments to successful control of HAIs.

As seen in Appendix A attached to this report, there is signficant variation in the rates of HAIs among the 249 hospitals in Pennsylvania. The major reason for these differences is the wide variation in the type of care being provided, the intensity of care, and the patient population being served. Larger tertiary referral centers would be expected to provide more intensive care for sicker patients who are at greater risk for developing an HAI. The analyses presented in this report recognize these differences through the use of risk adjustments methods for the CAUTI, CLABSI and SSI standardized infection ratios. However, these risk adjustment methods are imperfect and cannot fully account for all of these differences between hospitals. It is important to keep this in mind when using the information contained in this report. The HAI rate is only one factor that should be used when making decisions about where to receive healthcare; it should not necessarily be construed that hospitals with higher rates or SIRs provide "worse" care and hospitals with lower rates and SIRs provide "better" care.

The section of the 2012 report dealing with healthcare personnel influenza vaccination provides an alternative metric in measuring hospital commitment to patient safety and HAI prevention. The median HCP influenza vaccination rate was 75 percent and 70 facilities achieved the 2020 Healthy People goal of 90 percent HCP vaccination during the 2012–2013 influenza season. This is a dramatic improvement from last year when the median employee vaccination rate was 65 percent and 44 facilities had an employee vaccination rate at goal. The number of facilities at goal for employees, licensed independent practioners and students, trainees and volunteers increased from 6 to 28. This is a

367 percent improvement. There is widespread agreement in the healthcare community that healthcare workers ought to be vaccinated against influenza to protect their own health and to protect the health of their patients. Universal influenza vaccination of the healthcare workforce (generally defined as 90 percent or better vaccination coverage) is endorsed by major medical organizations and federal recommendations. These improvements are the result of collaboration between facilities and stakeholders across the state, sharing of best practices and strong leadership within facilities.

Despite these notable achievements among many facilities, HCP vaccination rates are still significantly below goal for other facilities. The hospitals with the highest vaccination coverage have done so through mandatory vaccination policies as a condition of employment. This policy is the only one that has been shown to consistently result in high levels of vaccination (often greater than 97 percent coverage; Talbot **et al.**, 2010). Other methods can also be successful, but generally require a great deal of effort to promote vaccination and encourage personnel to receive the vaccine; they have also been difficult to sustain over time. Hospitals are encouraged to consider mandatory vaccination policies in order to achieve the Healthy People 2020 goal. The Pennsylvania Department of Health will continue to be publish HCP influenza vaccination rates in this report and the Centers for Medicaid and Medicare Services will be publishing HCP influenza vaccination rates for those facilities that receive reimbursement for services through the Inpatient Prospective Payment System.

In 2013, the National Healthcare Safety Network (NHSN) implemented a series of revisions to the criteria used to determine the presence of an HAI. The changes are especially noteworthy for CLABSIs, SSIs, and a category of HAIs not currently used for benchmarking in Pennsylvania, ventilator-associated pneumonia (VAP). These changes will impact the next HAI report. Some of the changes are likely to reduce the number of counted CLABSIs and VAPs. Some SSI changes will reduce SSI counts and others will increase them. These will have to be taken into account while assessing trends over time.

The Department of Health will continue to work with its partner agencies, the Patient Safety Authority, the Pennsylvania Health Care Cost Containment Council, with outside organizations, and with the infection prevention community to collect data on the occurence of HAIs and to recommend methods to reduce their occurence. An important role is to continue to validate the accuracy of data submitted by the hospitals to assure the accuracy of the reported rates and standardized infection ratios. This will be done through continuous inspection of the submitted reports and through on-site validation as resources permit. PADOH is committed to ensuring useful and useable data on HAIs for the healthcare community and the public. The information can then be used by all stakeholders to continue to reduce the occurrence of HAIs with a goal of eventually eliminating them.

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Appendix A Facility-Specific Infection Rates Over Time

This appendix includes facility-specific infection rates since 2008 (as available).

For each facility, the report contains:

1. Number of reported healthcare-associated infections (i.e., BSI, EENT, GI, LRI, PNEU, REPR, SSI, SST, UTI and other) and an associated **crude rate**;

2. A table with containing the number of reported CAUTIs, standardized infection ratio (SIR) and an interpretation of the SIR;

3. A chart trending the number of CAUTIs per 1,000 catheter days in the facility;

4. A series of tables containing the number of reported CLABSIs, standardized infection ratio (SIR), and an interpretation of the SIR by ward type; and

5. A chart trending the number of CAUTIs per 1,000 central line days in ICU/Ward locations.

Please note that:

1. Facilities might not have reported data for all included years (e.g., recently opened or started providing new services).

2. The charts depict **crude rates** not **standardized infection ratio**.

3. Crude rates are useful for intrafacility comparisons but are not appropriate for interfacility comparisons.

4. The SIR in the Pennsylvania Department of Health Annual HAI Report is re-indexed every year based on the number of infections reported in the same year by other facilities in the state; therefore, facilities that implemented highly effective prevention programs might still have SIRs that are statistically no different from other facilities if similar reductions in HAIs were achieved statewide.

5. Rates from facilities in which the predicted number of infections is less than one are statistically imprecise. The rates are included here for reporting purposes; however, inferences drawn from inter- or intra-facility comparisons of these rates are unreliable.

ABINGTON MEMORIAL HOSPITAL

NHSN ID: 11838

Hospital type: Acute care general hospital

Number of licensed beds (2012): 671

Number of reported Healthcare-Associated Infections:

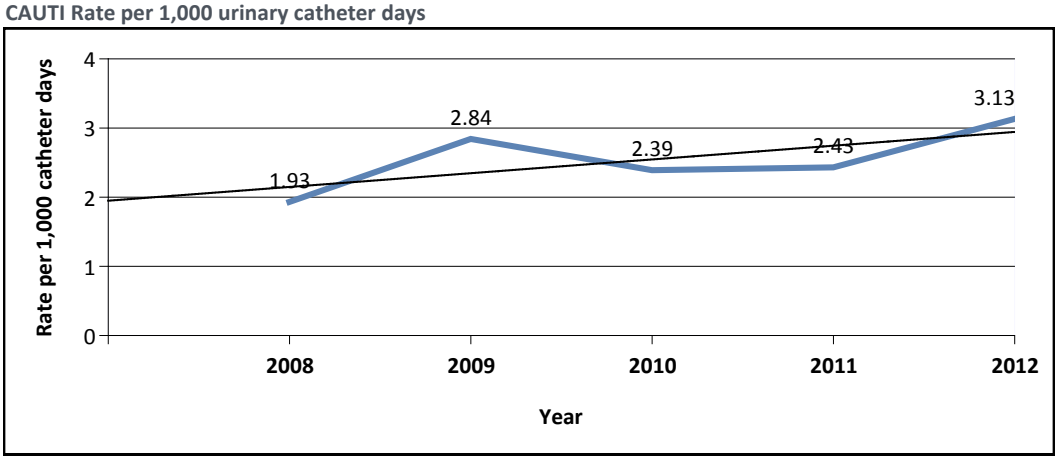
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	86,802	36	1	31	3	45	1	54	6	59	0	2.72
2009	190,508	76	1	66	6	110	7	99	4	133	4	2.66
2010	162,085	65	1	59	3	82	8	113	8	123	8	2.90
2011	151,539	59	1	40	4	51	0	100	5	119	2	2.51
2012	141,039	56	3	46	12	27	1	104	10	137	4	2.84

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	37	44.21	0.84	0.59 - 1.15	Same as
2009	97	75.55	1.28	1.04 - 1.57	Worse
2010	72	53.02	1.36	1.06 - 1.71	Worse
2011	70	47.66	1.47	1.14 - 1.86	Worse
2012	76	44.94	1.69	1.33 - 2.12	Worse

CAUTI Rate per 1,000 urinary catheter days



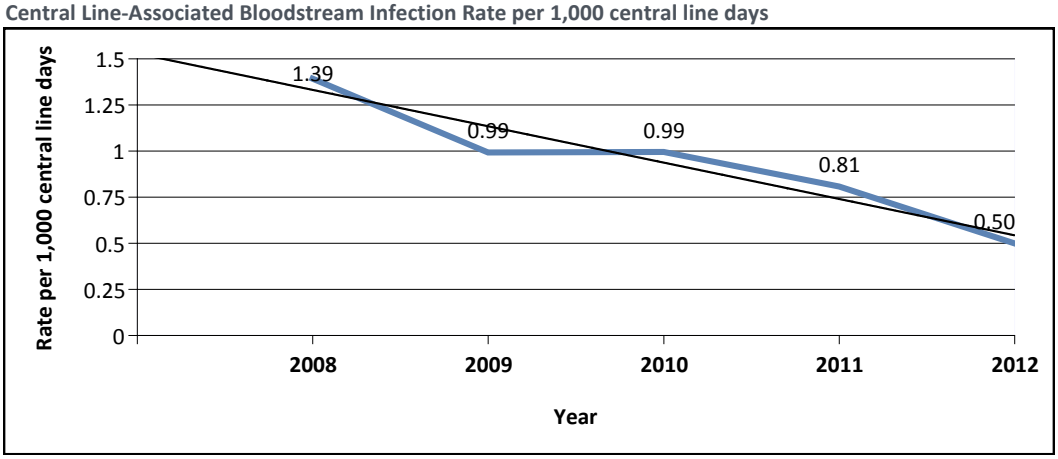
ABINGTON MEMORIAL HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	16	16.71	0.96	0.55 - 1.55	Same as
2009	20	26.37	0.76	0.46 - 1.17	Same as
2010	18	15.90	1.13	0.67 - 1.79	Same as
2011	16	17.63	0.91	0.52 - 1.47	Same as
2012	9	14.07	0.64	0.29 - 1.21	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	1.68	0.60	0.03 - 3.32	Same as
2009	2	2.70	0.74	0.08 - 2.67	Same as
2010	1	3.17	0.32	0 - 1.76	Same as
2011	3	1.90	1.58	0.32 - 4.63	Same as
2012	1	1.67	0.60	0.01 - 3.33	Same as

Standardized Infection Ratio - Specialty Care Area

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	7	5.45	1.28	0.51 - 2.64	Same as
2009	13	5.67	2.29	1.22 - 3.92	Worse
2010	9	5.72	1.57	0.72 - 2.99	Same as
2011	6	5.18	1.16	0.42 - 2.52	Same as
2012	5	4.39	1.14	0.37 - 2.66	Same as

ADVANCED SURGICAL HOSPITAL

NHSN ID: 16317

Hospital type: Acute care general hospital

Number of licensed beds (2012): 14

Number of reported Healthcare-Associated Infections:

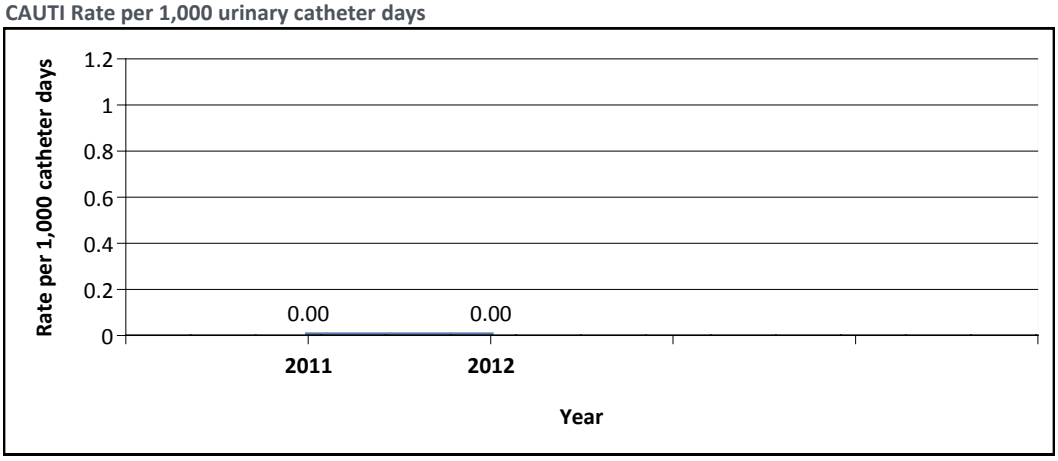
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008												
2009												
2010												
2011	1,116	0	0	0	0	0	0	1	0	0	0	0.90
2012	1,263	0	0	0	0	0	0	2	0	0	0	1.58

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008				-	
2009				-	
2010				-	
2011	0	0.32	0.00	0 - 11.53	Same as
2012	0	0.43	0.00	0 - 8.44	Same as

CAUTI Rate per 1,000 urinary catheter days



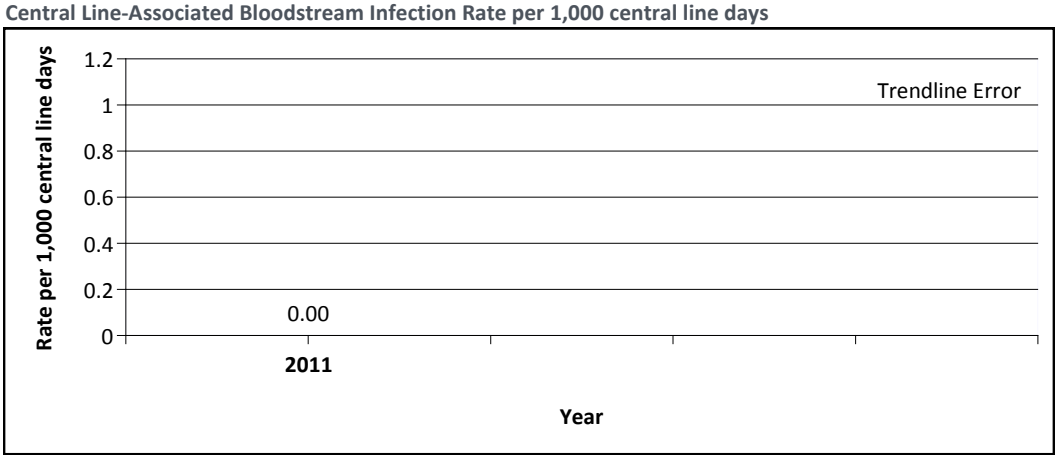
ADVANCED SURGICAL HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008				-	
2009				-	
2010				-	
2011	0	0.00	0.00	0 - 2729.14	Same as
2012				-	

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



ALBERT EINSTEIN MEDICAL CENTER

NHSN ID: 10585

Hospital type: Acute care general hospital

Number of licensed beds (2012): 538

Number of reported Healthcare-Associated Infections:

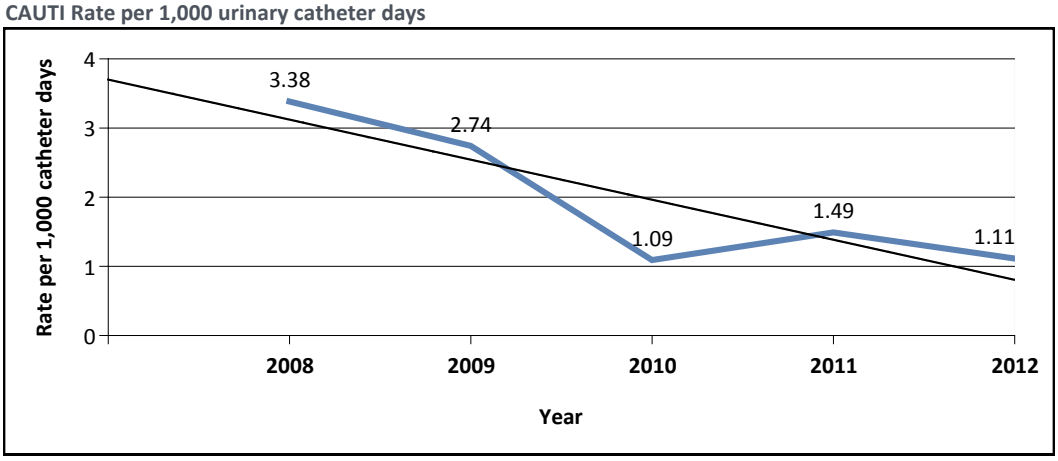
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	64,057	95	4	35	2	33	1	48	8	67	5	4.65
2009	136,211	125	7	60	5	42	0	103	13	100	10	3.41
2010	120,974	73	9	66	4	11	0	95	10	53	12	2.75
2011	111,995	73	8	44	4	20	1	94	6	53	5	2.75
2012	104,188	30	6	46	5	8	0	74	19	34	4	2.17

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	50	33.96	1.47	1.09 - 1.94	Worse
2009	76	61.31	1.24	0.98 - 1.55	Same as
2010	26	42.14	0.62	0.4 - 0.9	Better
2011	33	36.97	0.89	0.61 - 1.25	Same as
2012	23	38.64	0.60	0.38 - 0.89	Better

CAUTI Rate per 1,000 urinary catheter days



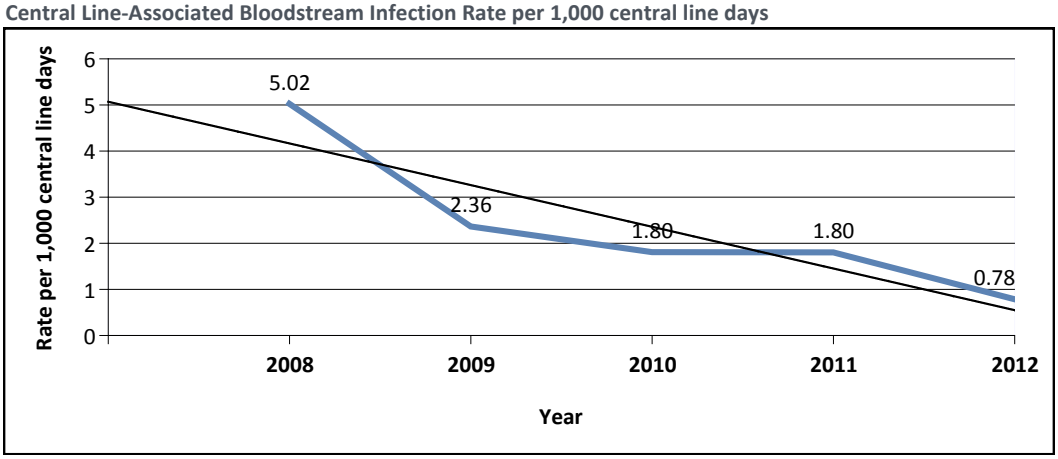
ALBERT EINSTEIN MEDICAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	48	13.94	3.44	2.54 - 4.57	Worse
2009	45	23.73	1.90	1.38 - 2.54	Worse
2010	34	15.89	2.14	1.48 - 2.99	Worse
2011	34	16.27	2.09	1.45 - 2.92	Worse
2012	13	13.23	0.98	0.52 - 1.68	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	5	1.91	2.61	0.34 - 6.1	Same as
2009	7	4.59	1.53	0.61 - 3.14	Same as
2010	3	4.06	0.74	0.15 - 2.16	Same as
2011	2	3.30	0.61	0.07 - 2.19	Same as
2012	1	2.38	0.42	0.01 - 2.34	Same as

ALBERT EINSTEIN MEDICAL CENTER AT ELKINS PARK

NHSN ID: 12500

Hospital type: Acute care general hospital

Number of licensed beds (2012): 38

Number of reported Healthcare-Associated Infections:

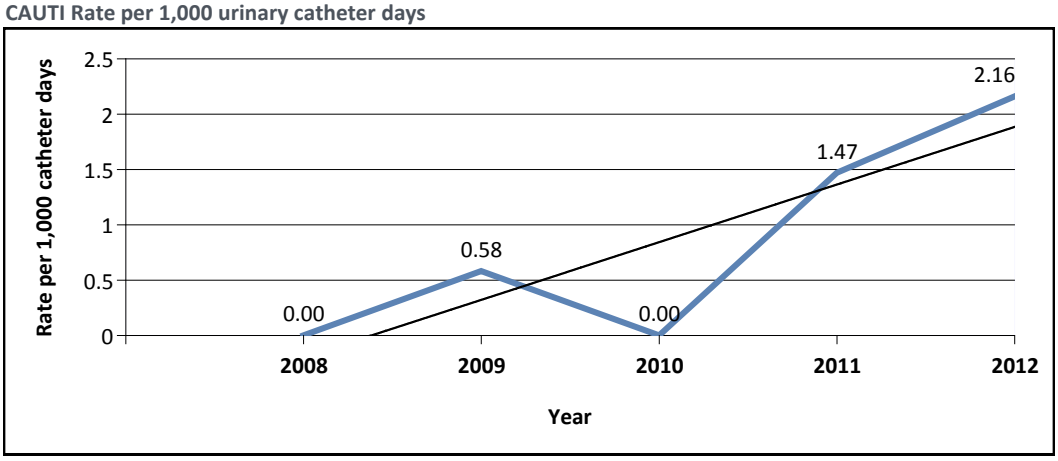
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	5,594	2	0	5	0	0	0	2	0	1	0	1.79
2009	13,264	10	0	11	0	0	0	6	0	3	0	2.26
2010	12,656	4	1	3	0	1	0	5	0	0	0	1.11
2011	10,601	9	0	6	0	1	0	8	1	5	1	2.92
2012	10,144	4	0	5	0	1	0	14	0	7	0	3.06

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	3.38	0.00	0 - 1.08	Same as
2009	2	7.54	0.27	0.03 - 0.96	Better
2010	0	5.25	0.00	0 - 0.7	Better
2011	4	4.70	0.85	0.23 - 2.18	Same as
2012	6	5.25	1.14	0.42 - 2.49	Same as

CAUTI Rate per 1,000 urinary catheter days



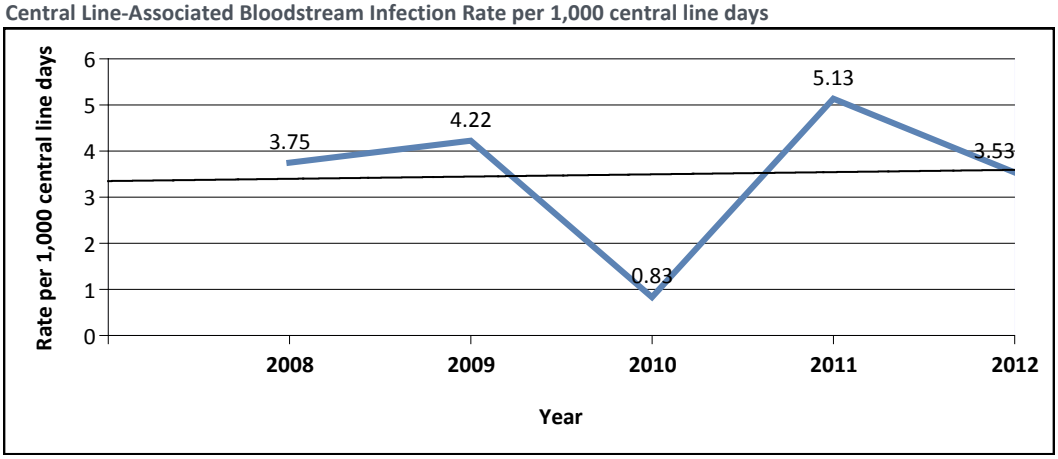
ALBERT EINSTEIN MEDICAL CENTER AT ELKINS PARK

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	0.76	2.64	0.3 - 9.53	Same as
2009	6	1.93	3.11	1.13 - 6.76	Worse
2010	1	1.11	0.90	0.01 - 5.03	Same as
2011	7	1.24	5.63	2.26 - 11.6	Worse
2012	4	0.85	4.73	1.27 - 12.11	Worse

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



ALBERT EINSTEIN MEDICAL CENTER MOSS REHABILITATION

NHSN ID: 12508

Hospital type: Acute care general hospital

Number of licensed beds (2012): 196

Number of reported Healthcare-Associated Infections:

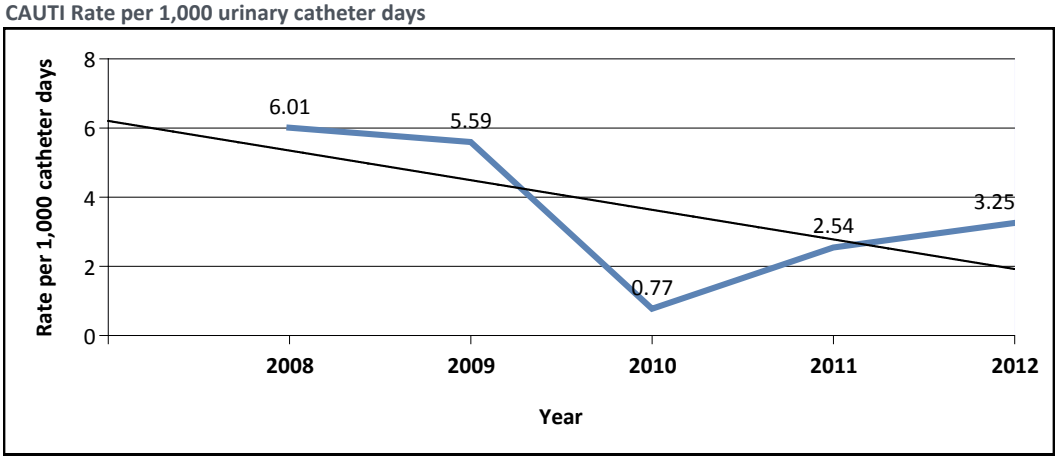
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	20,924	3	0	20	0	0	0	0	2	33	0	2.77
2009	39,604	7	1	31	0	0	0	0	2	43	0	2.12
2010	41,823	3	0	17	0	0	0	0	2	30	0	1.24
2011	40,945	2	0	7	0	1	0	0	2	30	0	1.03
2012	43,005	1	0	13	0	2	0	0	2	34	0	1.21

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	17	7.02	2.42	1.41 - 3.88	Worse
2009	25	9.97	2.51	1.62 - 3.7	Worse
2010	3	7.02	0.43	0.09 - 1.25	Same as
2011	10	5.91	1.69	0.81 - 3.11	Same as
2012	11	4.50	2.45	1.22 - 4.38	Worse

CAUTI Rate per 1,000 urinary catheter days



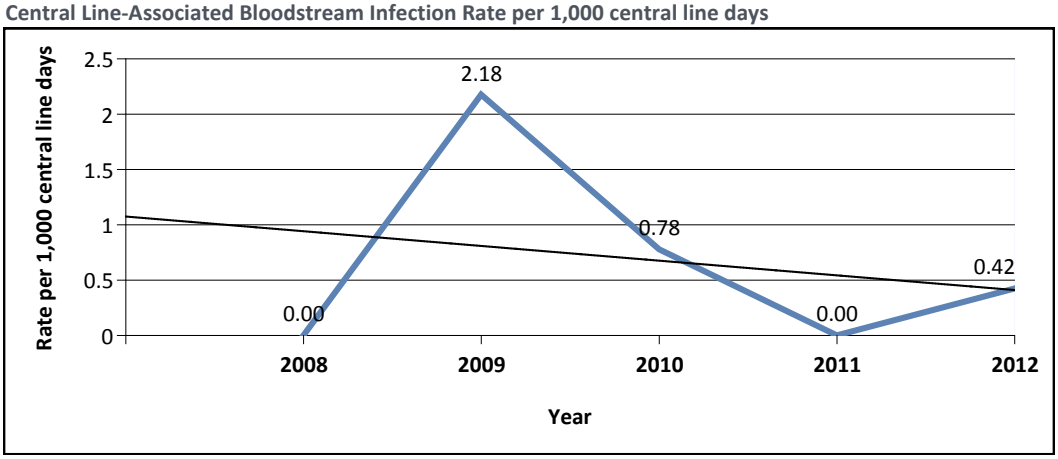
ALBERT EINSTEIN MEDICAL CENTER MOSS REHABILITATION

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	1.54	0.00	0 - 2.37	Same as
2009	5	3.56	1.40	0.45 - 3.27	Same as
2010	2	2.51	0.80	0.09 - 2.88	Same as
2011	0	2.73	0.00	0 - 1.34	Same as
2012	1	1.45	0.69	0.01 - 3.84	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



ALLEGHENY GENERAL HOSPITAL

NHSN ID: 10648

Hospital type: Acute care general hospital

Number of licensed beds (2012): 631

Number of reported Healthcare-Associated Infections:

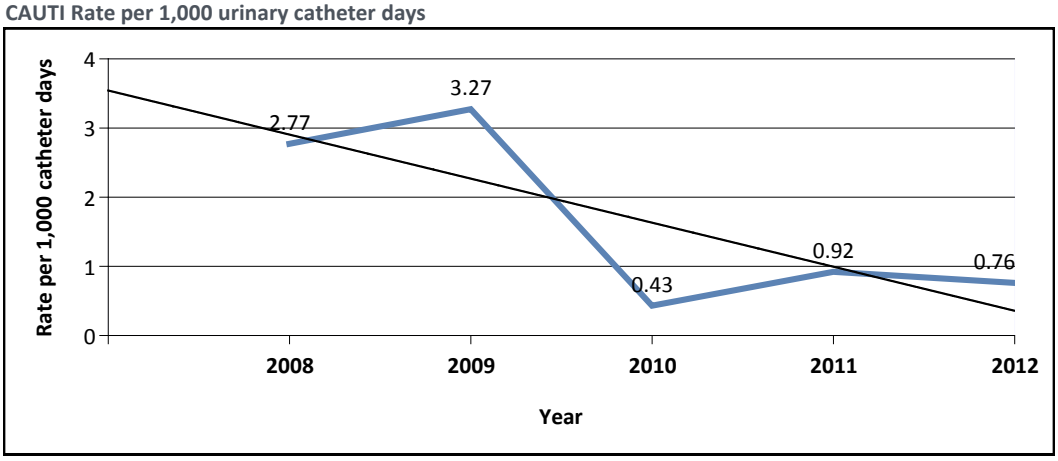
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	81,994	64	3	100	66	38	0	103	1	78	8	5.62
2009	167,653	154	4	230	108	97	0	181	13	205	12	5.99
2010	135,673	153	8	200	62	63	0	179	7	38	7	5.28
2011	133,596	174	2	158	81	36	0	149	12	65	11	5.15
2012	131,537	140	1	181	71	47	0	115	10	51	7	4.74

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	67	53.53	1.25	0.97 - 1.59	Same as
2009	161	108.09	1.49	1.27 - 1.74	Worse
2010	19	76.54	0.25	0.15 - 0.39	Better
2011	41	79.89	0.51	0.37 - 0.7	Better
2012	35	88.28	0.40	0.28 - 0.55	Better

CAUTI Rate per 1,000 urinary catheter days



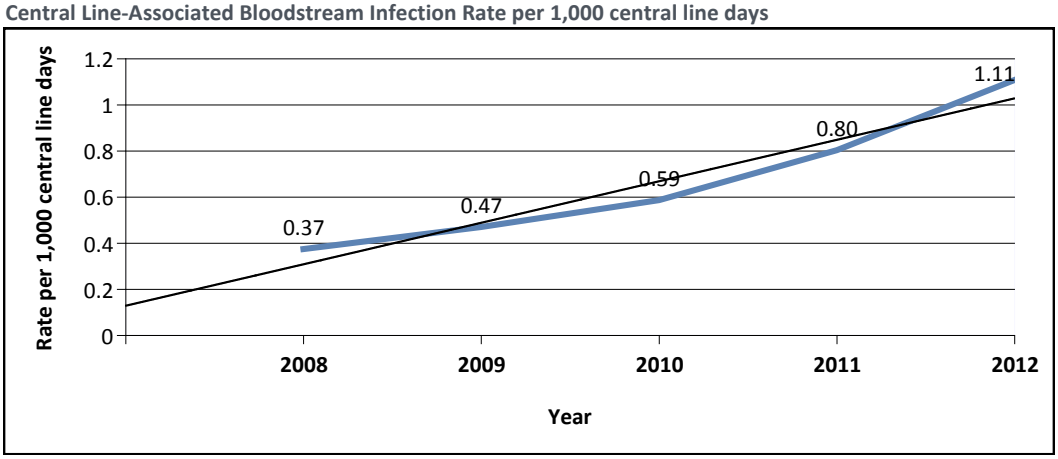
ALLEGHENY GENERAL HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	8	32.14	0.25	0.11 - 0.49	Better
2009	22	51.18	0.43	0.27 - 0.65	Better
2010	27	34.92	0.77	0.51 - 1.13	Same as
2011	36	34.84	1.03	0.72 - 1.43	Same as
2012	50	40.18	1.24	0.92 - 1.64	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	1.04	0.00	0 - 3.52	Same as
2009	1	2.29	0.44	0.01 - 2.43	Same as
2010				-	
2011				-	
2012				-	

ALLEGHENY VALLEY HOSPITAL

NHSN ID: 11842

Hospital type: Acute care general hospital

Number of licensed beds (2012): 228

Number of reported Healthcare-Associated Infections:

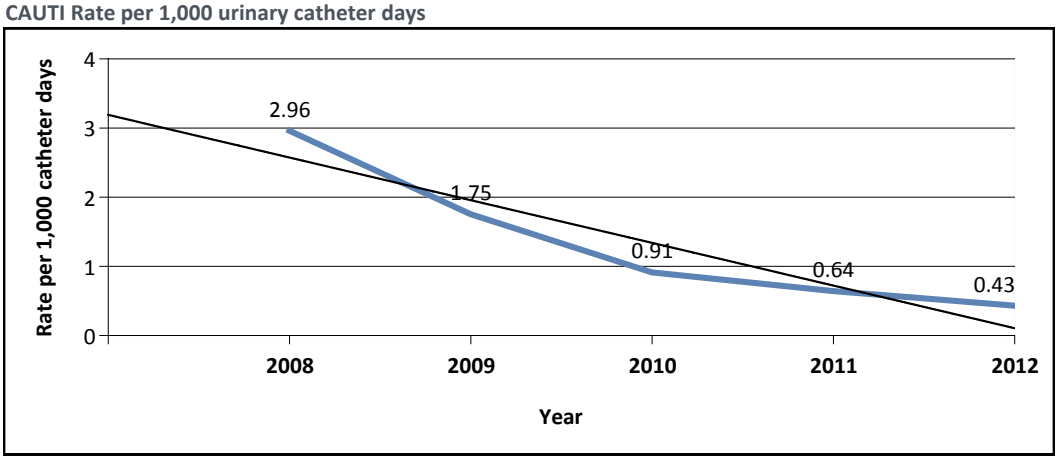
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	22,901	3	0	14	0	1	0	10	3	16	0	2.05
2009	51,349	7	0	39	0	7	0	14	2	21	0	1.75
2010	50,338	2	1	28	0	3	0	25	3	13	0	1.49
2011	46,228	6	6	19	0	4	0	25	3	9	1	1.58
2012	42,082	6	6	15	0	2	0	18	3	6	0	1.33

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	13	10.37	1.25	0.67 - 2.14	Same as
2009	13	11.97	1.09	0.58 - 1.86	Same as
2010	7	12.68	0.55	0.22 - 1.14	Same as
2011	5	9.67	0.52	0.17 - 1.21	Same as
2012	3	9.60	0.31	0.06 - 0.91	Better

CAUTI Rate per 1,000 urinary catheter days



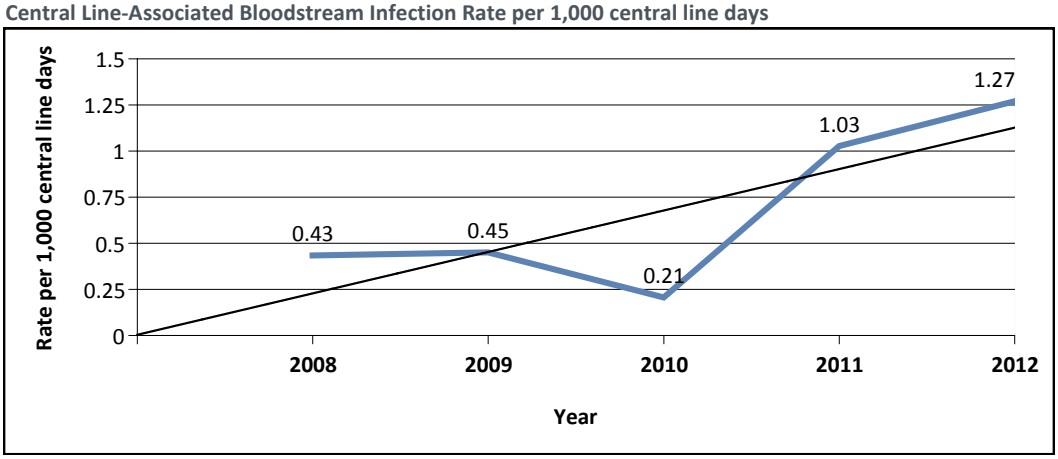
ALLEGHENY VALLEY HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	3.28	0.30	0 - 1.69	Same as
2009	2	4.39	0.46	0.05 - 1.64	Same as
2010	1	3.55	0.28	0 - 1.57	Same as
2011	5	2.97	1.68	0.54 - 3.93	Same as
2012	6	3.25	1.85	0.68 - 4.02	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



ALLIED SERVICES INSTITUTE OF REHABILITATION

NHSN ID: 12591

Hospital type: Rehabilitation hospital

Number of licensed beds (2012): 135

Number of reported Healthcare-Associated Infections:

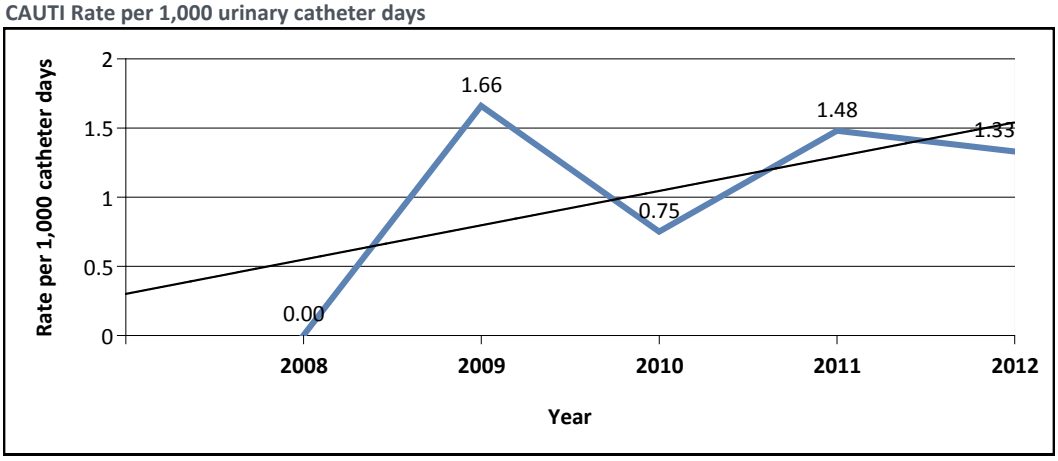
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	12,111	0	0	4	0	0	0	0	0	11	0	1.24
2009	23,441	1	0	0	0	0	0	0	0	17	0	0.77
2010	21,464	1	0	1	0	0	0	0	0	9	0	0.51
2011	20,817	2	0	1	0	0	0	0	0	16	0	0.91
2012	22,151	1	0	0	0	1	0	0	0	23	0	1.13

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	2.78	0.00	0 - 1.32	Same as
2009	3	2.94	1.02	0.2 - 2.98	Same as
2010	1	2.27	0.44	0.01 - 2.45	Same as
2011	2	1.44	1.39	0.16 - 5.01	Same as
2012	2	1.98	1.01	0.11 - 3.64	Same as

CAUTI Rate per 1,000 urinary catheter days



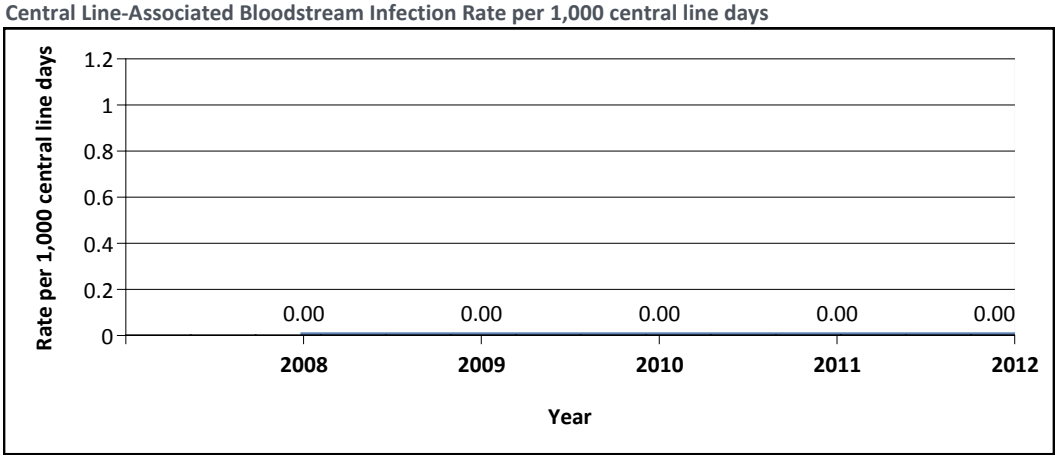
ALLIED SERVICES INSTITUTE OF REHABILITATION

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.64	0.00	0 - 5.75	Same as
2009	0	0.78	0.00	0 - 4.7	Same as
2010	0	0.42	0.00	0 - 8.77	Same as
2011	0	0.30	0.00	0 - 12.28	Same as
2012	0	0.19	0.00	0 - 19.57	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



ALTOONA REGIONAL HEALTH SYSTEM

NHSN ID: 10178

Hospital type: Acute care general hospital

Number of licensed beds (2012): 380

Number of reported Healthcare-Associated Infections:

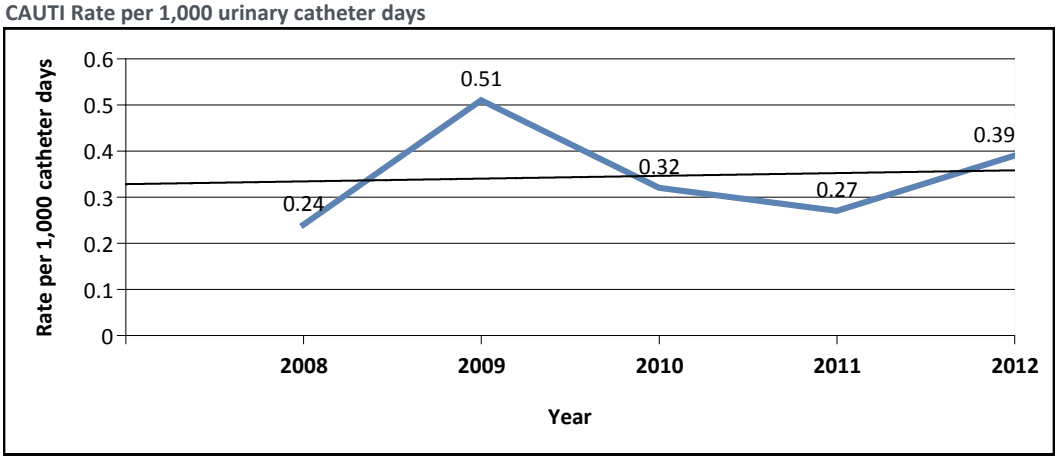
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	43,174	8	2	4	0	17	0	42	6	3	0	1.90
2009	98,004	9	1	23	0	7	1	50	1	16	0	1.10
2010	89,928	7	2	7	0	5	1	66	10	8	0	1.18
2011	89,191	7	0	4	0	12	0	70	3	6	0	1.14
2012	82,234	4	0	3	0	8	0	61	2	13	0	1.11

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	27.84	0.11	0.02 - 0.31	Better
2009	12	37.82	0.32	0.16 - 0.55	Better
2010	7	35.35	0.20	0.08 - 0.41	Better
2011	6	28.58	0.21	0.08 - 0.46	Better
2012	7	25.28	0.28	0.11 - 0.57	Better

CAUTI Rate per 1,000 urinary catheter days



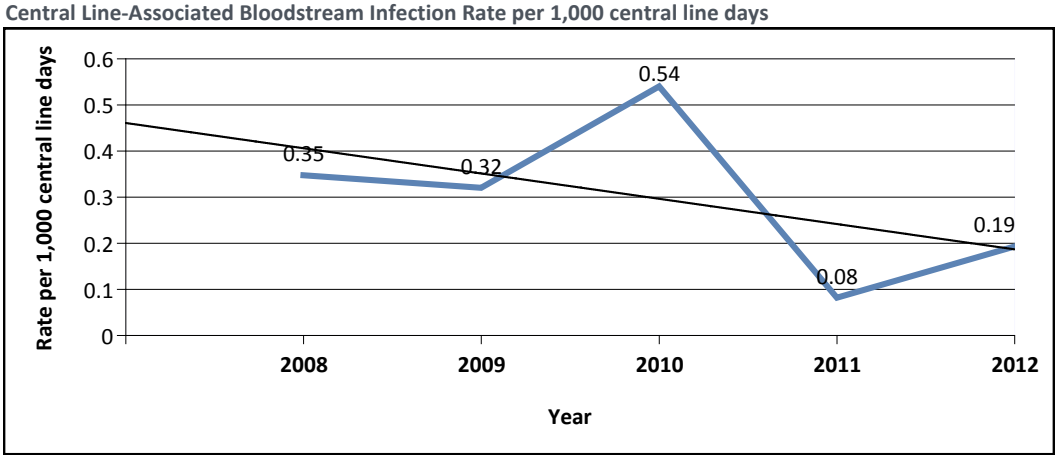
ALTOONA REGIONAL HEALTH SYSTEM

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	8.32	0.24	0.03 - 0.87	Better
2009	4	11.21	0.36	0.1 - 0.91	Better
2010	6	7.81	0.77	0.28 - 1.67	Same as
2011	1	7.16	0.14	0 - 0.78	Better
2012	2	7.26	0.28	0.03 - 0.99	Better

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



ARIA HEALTH

NHSN ID: 11388

Hospital type: Acute care general hospital

Number of licensed beds (2012): 485

Number of reported Healthcare-Associated Infections:

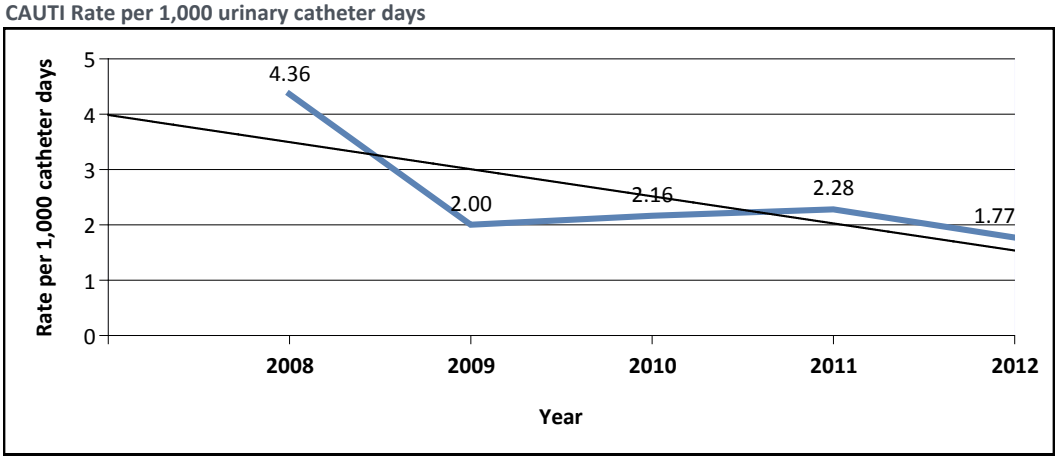
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	71,519	55	2	70	3	26	0	44	4	82	5	4.07
2009	154,215	63	3	81	12	73	3	80	20	84	1	2.72
2010	131,905	31	2	40	15	45	1	43	7	92	2	2.11
2011	115,743	28	4	39	14	37	0	42	7	78	3	2.18
2012	108,401	25	2	30	2	21	0	41	16	61	3	1.85

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	76	39.66	1.92	1.51 - 2.4	Worse
2009	71	78.27	0.91	0.71 - 1.14	Same as
2010	69	56.08	1.23	0.96 - 1.56	Same as
2011	60	44.75	1.34	1.02 - 1.73	Worse
2012	44	46.61	0.94	0.69 - 1.27	Same as

CAUTI Rate per 1,000 urinary catheter days



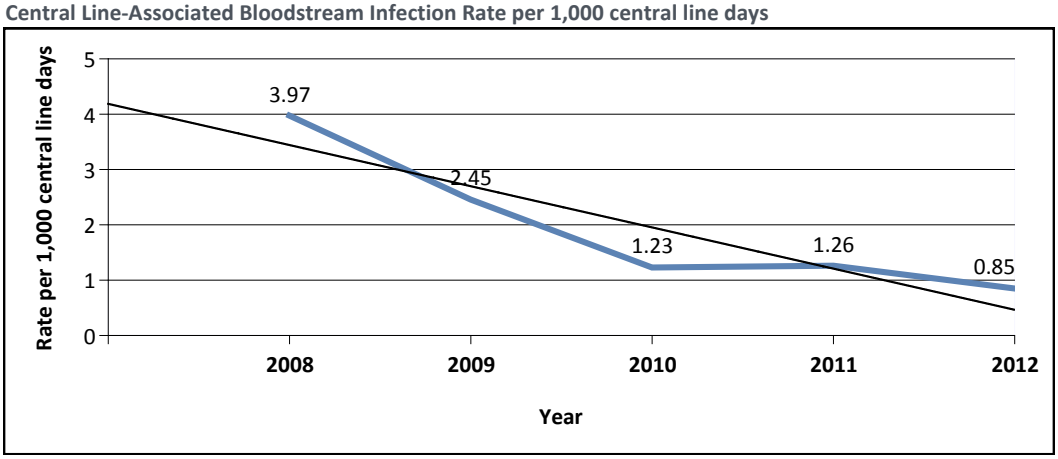
ARIA HEALTH

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	47	17.31	2.71	1.99 - 3.61	Worse
2009	58	29.29	1.98	1.5 - 2.56	Worse
2010	25	17.37	1.44	0.93 - 2.12	Same as
2011	22	15.50	1.42	0.89 - 2.15	Same as
2012	13	11.92	1.09	0.58 - 1.87	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



ARMSTRONG COUNTY MEMORIAL HOSPITAL

NHSN ID: 12057

Hospital type: Acute care general hospital

Number of licensed beds (2012): 155

Number of reported Healthcare-Associated Infections:

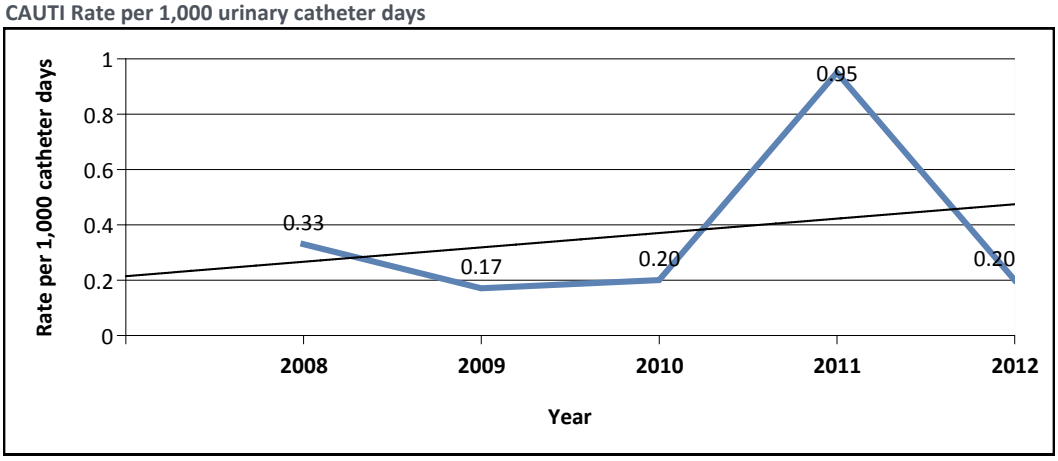
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	16,141	1	0	4	0	1	0	5	0	1	0	0.74
2009	33,060	3	0	9	0	2	0	7	0	5	0	0.79
2010	33,954	4	0	6	0	2	1	4	1	4	0	0.65
2011	34,165	3	0	10	0	3	1	12	0	6	0	1.02
2012	32,277	2	0	4	0	3	0	6	0	6	0	0.65

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	7.15	0.14	0 - 0.78	Better
2009	1	9.24	0.11	0 - 0.6	Better
2010	1	8.34	0.12	0 - 0.67	Better
2011	5	6.41	0.78	0.25 - 1.82	Same as
2012	1	6.72	0.15	0 - 0.83	Better

CAUTI Rate per 1,000 urinary catheter days



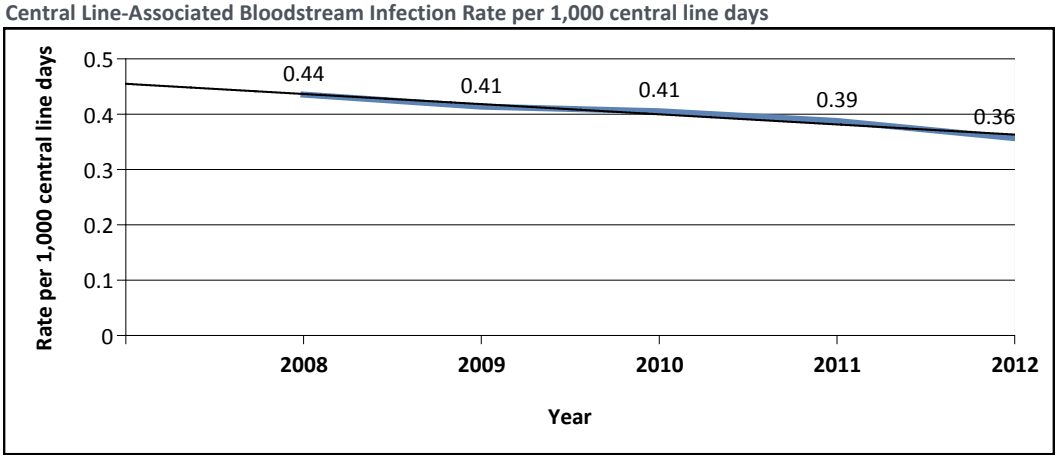
ARMSTRONG COUNTY MEMORIAL HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	3.33	0.30	0 - 1.67	Same as
2009	2	4.24	0.47	0.05 - 1.7	Same as
2010	2	3.39	0.59	0.07 - 2.13	Same as
2011	2	2.96	0.68	0.08 - 2.44	Same as
2012	2	4.12	0.49	0.05 - 1.75	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



BARIX CLINICS OF PENNSYLVANIA

NHSN ID: 12037

Hospital type: Acute care general hospital

Number of licensed beds (2012): 47

Number of reported Healthcare-Associated Infections:

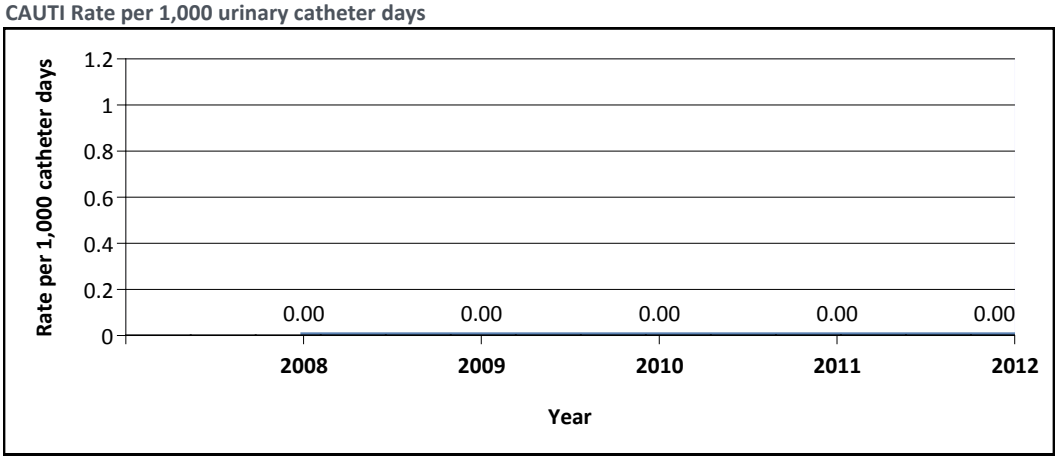
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	766	0	0	0	0	0	0	2	0	0	0	2.61
2009	1,081	0	0	0	0	0	0	1	0	0	0	0.93
2010	882	0	0	0	0	1	0	2	0	0	0	3.40
2011	661	0	0	0	0	0	0	1	0	0	0	1.51
2012	539	0	0	0	0	0	0	0	0	0	0	0.00

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.76	0.00	0 - 4.83	Same as
2009	0	0.64	0.00	0 - 5.7	Same as
2010	0	0.67	0.00	0 - 5.48	Same as
2011	0	0.89	0.00	0 - 4.1	Same as
2012	0	0.37	0.00	0 - 9.78	Same as

CAUTI Rate per 1,000 urinary catheter days



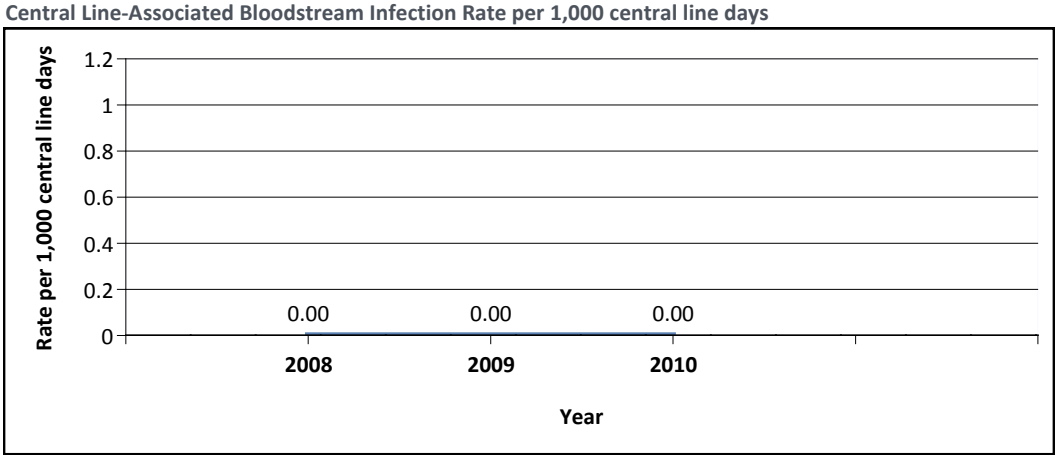
BARIX CLINICS OF PENNSYLVANIA

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.01	0.00	0 - 422.04	Same as
2009	0	0.02	0.00	0 - 166.7	Same as
2010	0	0.00	0.00	0 - 1025.79	Same as
2011				-	
2012				-	

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



BARNES-KASSON COUNTY HOSPITAL

NHSN ID: 12404

Hospital type: Critical access hospital

Number of licensed beds (2012): 25

Number of reported Healthcare-Associated Infections:

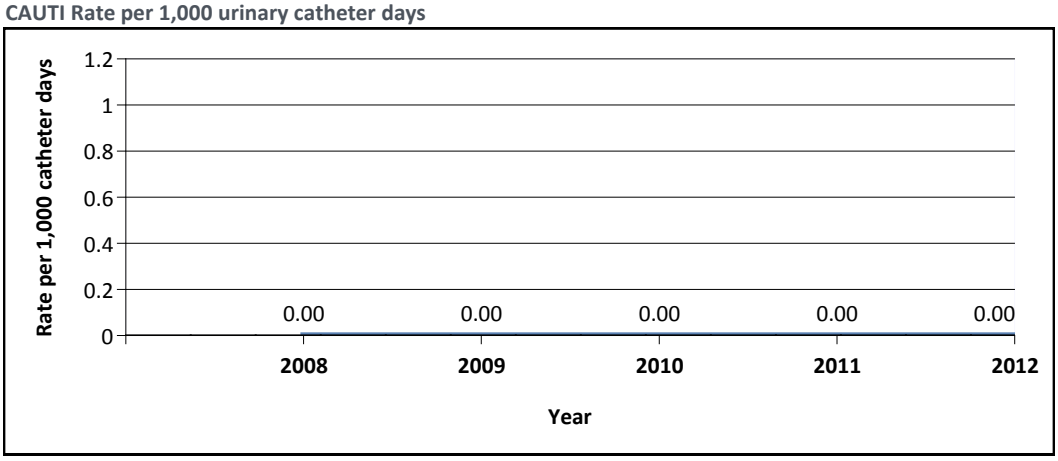
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	2,834	0	0	1	0	0	0	0	0	0	0	0.35
2009	5,884	0	0	0	0	0	0	0	0	0	0	0.00
2010	4,933	0	0	0	0	0	0	0	0	0	0	0.00
2011	4,251	0	0	0	0	0	0	0	0	0	0	0.00
2012	4,386	0	0	0	0	0	0	0	0	0	0	0.00

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.88	0.00	0 - 4.16	Same as
2009	0	1.18	0.00	0 - 3.11	Same as
2010	0	1.26	0.00	0 - 2.92	Same as
2011	0	0.82	0.00	0 - 4.5	Same as
2012	0	0.92	0.00	0 - 4.01	Same as

CAUTI Rate per 1,000 urinary catheter days



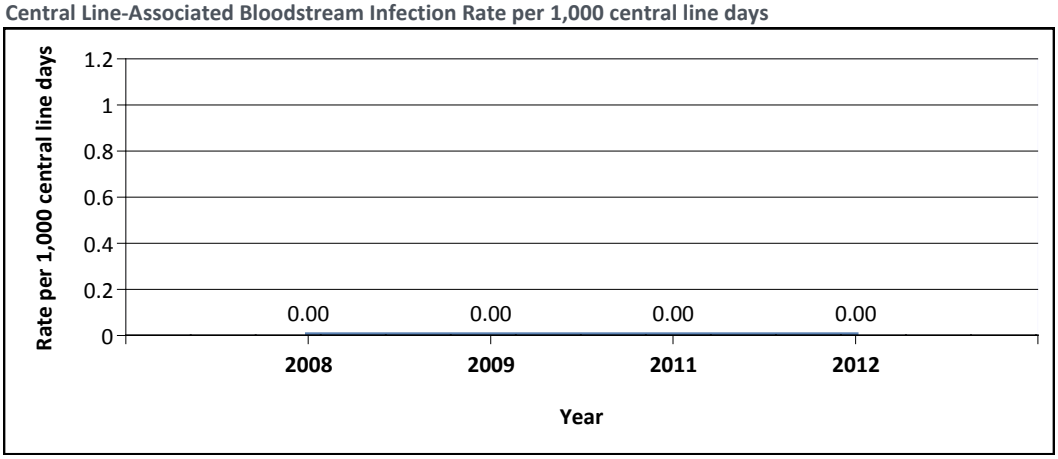
BARNES-KASSON COUNTY HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.04	0.00	0 - 101.22	Same as
2009	0	0.07	0.00	0 - 49.75	Same as
2010				-	
2011	0	0.04	0.00	0 - 89.7	Same as
2012	0	0.03	0.00	0 - 145.98	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



BELMONT CENTER FOR COMPREHENSIVE TREATMENT

NHSN ID: 12505

Hospital type: Psychiatric hospital

Number of licensed beds (2012): 147

Number of reported Healthcare-Associated Infections:

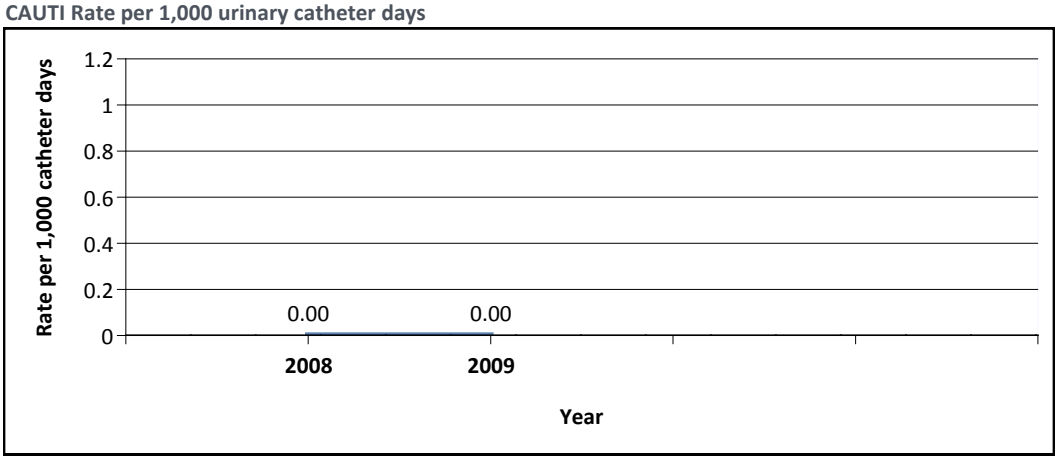
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	23,734	0	0	0	0	0	0	0	0	0	0	0.00
2009	48,910	0	22	0	0	0	0	0	4	5	0	0.63
2010	49,557	0	3	1	0	0	0	0	2	1	0	0.14
2011	47,456	0	9	0	0	0	0	0	1	0	0	0.21
2012	48,168	0	2	0	0	0	0	0	0	1	0	0.06

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.10	0.00	0 - 35.36	Same as
2009	0	0.02	0.00	0 - 166.15	Same as
2010				-	
2011				-	
2012				-	

CAUTI Rate per 1,000 urinary catheter days



BERWICK HOSPITAL CENTER

NHSN ID: 11442

Hospital type: Acute care general hospital

Number of licensed beds (2012): 101

Number of reported Healthcare-Associated Infections:

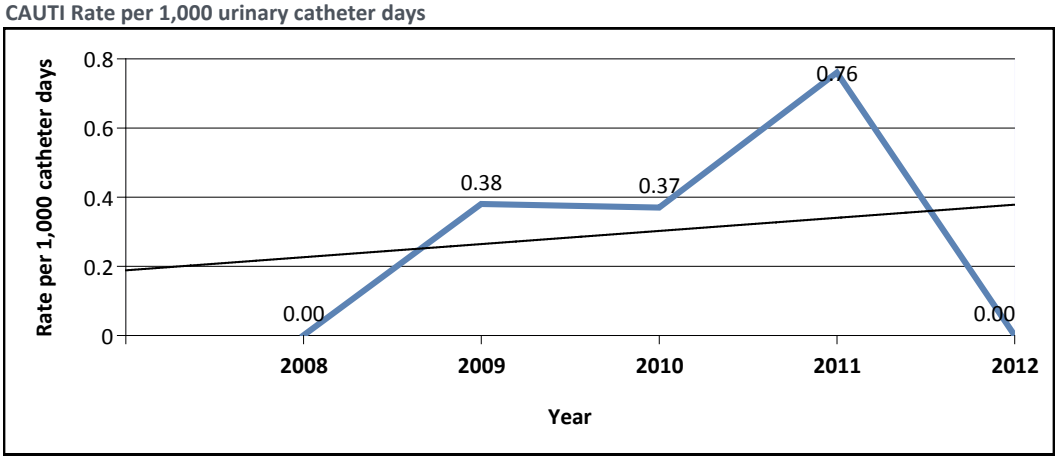
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	8,531	0	0	1	0	0	0	0	0	2	0	0.35
2009	16,750	0	0	0	1	0	0	2	1	2	0	0.36
2010	15,376	0	0	0	1	0	0	4	0	2	0	0.46
2011	14,647	2	0	0	1	2	0	1	0	2	0	0.55
2012	12,578	0	0	1	0	1	0	3	0	1	1	0.56

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	3.91	0.00	0 - 0.94	Better
2009	1	4.28	0.23	0 - 1.3	Same as
2010	1	4.49	0.22	0 - 1.24	Same as
2011	2	3.27	0.61	0.07 - 2.21	Same as
2012	0	2.98	0.00	0 - 1.23	Same as

CAUTI Rate per 1,000 urinary catheter days



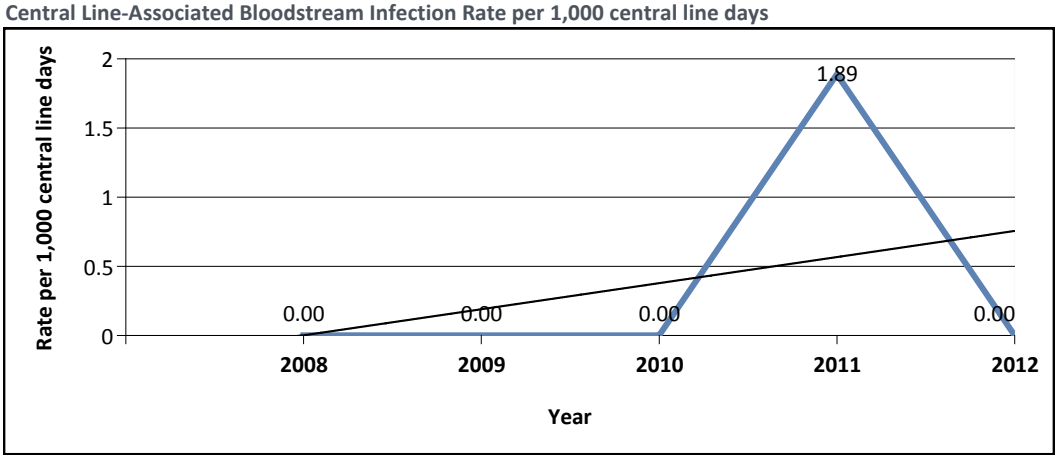
BERWICK HOSPITAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.47	0.00	0 - 7.87	Same as
2009	0	0.68	0.00	0 - 5.37	Same as
2010	0	0.51	0.00	0 - 7.18	Same as
2011	1	0.39	2.59	0.03 - 14.43	Same as
2012	0	0.27	0.00	0 - 13.67	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



BRADFORD REGIONAL MEDICAL CENTER

NHSN ID: 12361

Hospital type: Acute care general hospital

Number of licensed beds (2012): 107

Number of reported Healthcare-Associated Infections:

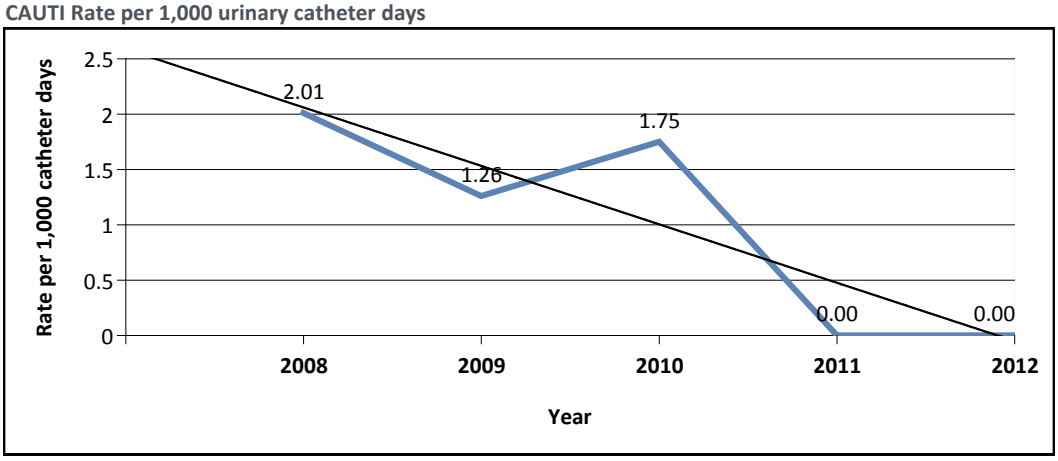
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	5,124	1	0	4	0	3	0	3	0	3	0	2.73
2009	11,333	0	0	3	0	2	0	2	1	4	1	1.15
2010	11,429	1	0	4	0	6	0	1	0	5	0	1.49
2011	11,423	0	0	3	0	2	0	3	3	1	0	1.05
2012	12,697	0	0	4	0	5	0	1	4	0	0	1.10

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	3.31	0.91	0.18 - 2.65	Same as
2009	4	5.09	0.79	0.21 - 2.01	Same as
2010	5	4.67	1.07	0.34 - 2.5	Same as
2011	0	2.95	0.00	0 - 1.24	Same as
2012	0	2.74	0.00	0 - 1.34	Same as

CAUTI Rate per 1,000 urinary catheter days



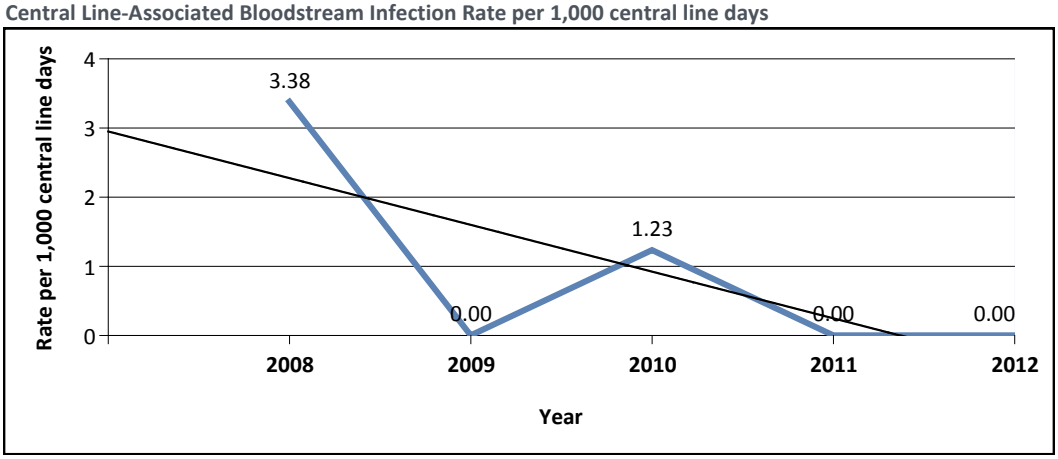
BRADFORD REGIONAL MEDICAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	0.41	2.45	0.03 - 13.64	Same as
2009	0	0.63	0.00	0 - 5.8	Same as
2010	1	0.62	1.62	0.02 - 8.99	Same as
2011	0	0.43	0.00	0 - 8.56	Same as
2012	0	0.24	0.00	0 - 15.57	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



BRANDYWINE HOSPITAL

NHSN ID: 11979

Hospital type: Acute care general hospital

Number of licensed beds (2012): 246

Number of reported Healthcare-Associated Infections:

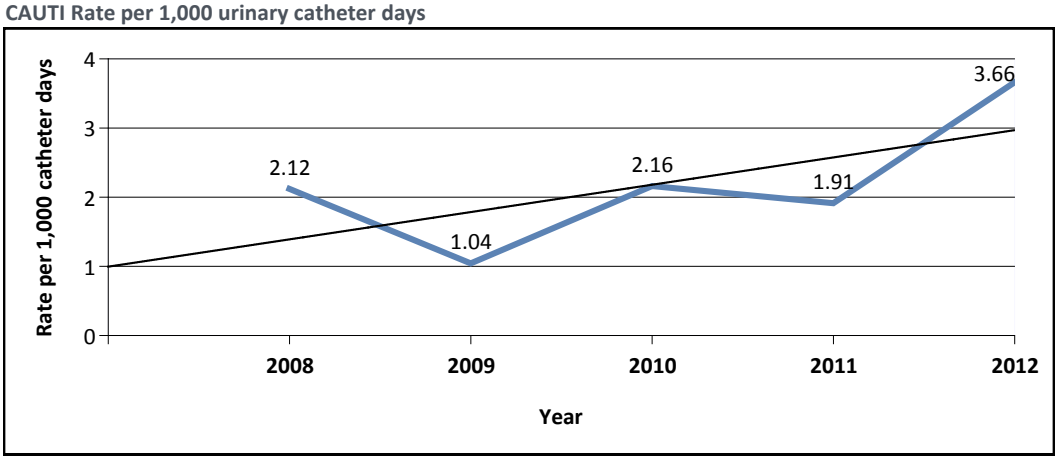
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	18,322	2	0	10	0	2	0	8	0	9	0	1.69
2009	35,033	3	0	7	1	11	0	13	1	7	0	1.23
2010	25,194	4	0	9	0	10	0	19	0	12	0	2.14
2011	37,170	4	0	6	0	12	0	19	0	11	0	1.40
2012	37,089	3	0	4	0	14	0	19	0	19	0	1.59

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	7	7.86	0.89	0.36 - 1.83	Same as
2009	6	9.31	0.64	0.24 - 1.4	Same as
2010	12	9.10	1.32	0.68 - 2.3	Same as
2011	10	6.27	1.59	0.76 - 2.93	Same as
2012	16	5.93	2.70	1.54 - 4.38	Worse

CAUTI Rate per 1,000 urinary catheter days



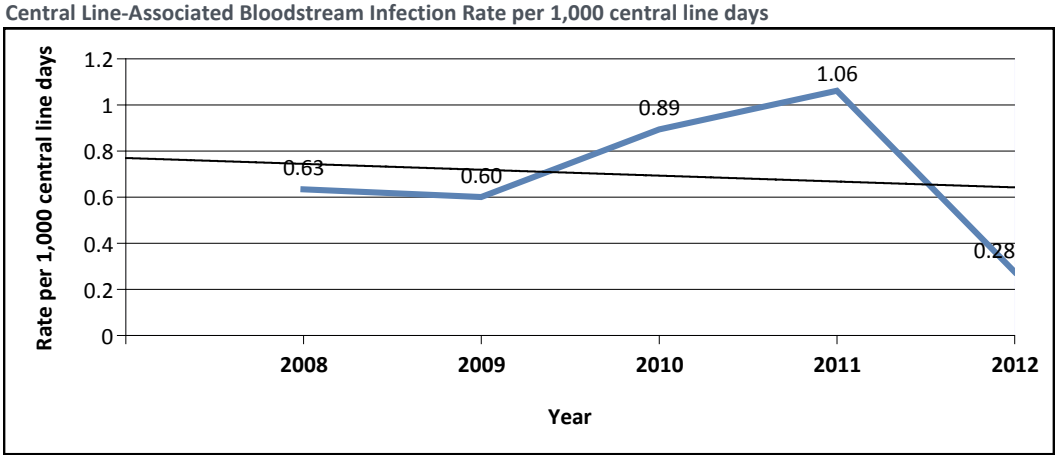
BRANDYWINE HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	2.23	0.45	0.01 - 2.5	Same as
2009	2	3.08	0.65	0.07 - 2.34	Same as
2010	3	2.33	1.29	0.26 - 3.76	Same as
2011	4	2.31	1.73	0.47 - 4.43	Same as
2012	1	2.44	0.41	0.01 - 2.28	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



BROOKE GLEN BEHAVIORAL HOSPITAL

NHSN ID: 12623

Hospital type: Psychiatric hospital

Number of licensed beds (2012): 146

Number of reported Healthcare-Associated Infections:

Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008												
2009	44,776	0	1	0	0	0	0	0	0	1	0	0.04
2010	45,655	0	1	10	0	0	0	0	0	0	0	0.24
2011	31,602	0	0	0	0	0	0	0	0	0	0	0.00
2012	34,344	0	1	0	0	0	0	0	0	0	0	0.03

BROOKVILLE HOSPITAL

NHSN ID: 12418

Hospital type: Critical access hospital

Number of licensed beds (2012): 35

Number of reported Healthcare-Associated Infections:

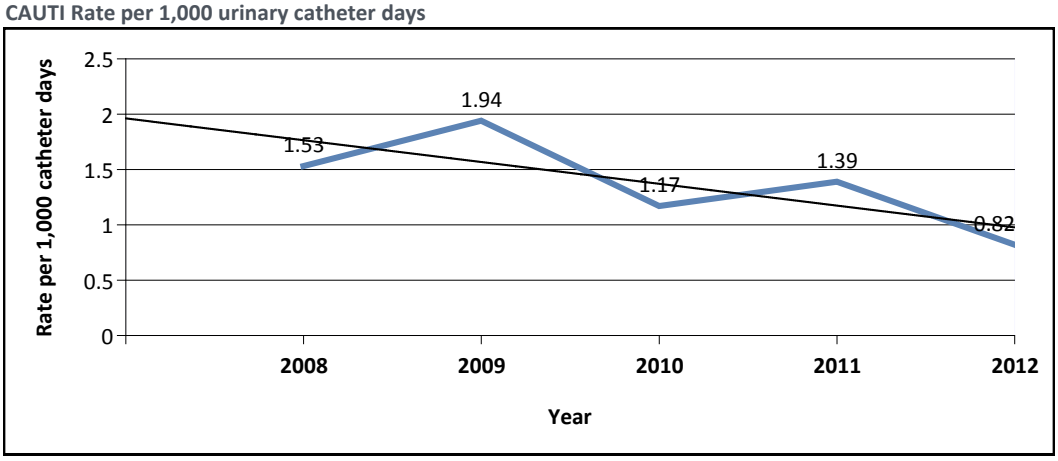
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,721	1	0	1	0	1	3	0	0	4	0	2.69
2009	6,989	1	0	0	0	1	1	3	1	3	1	1.57
2010	6,307	1	0	0	0	0	1	0	0	1	0	0.48
2011	6,425	0	0	0	0	0	1	2	0	3	0	0.93
2012	6,036	0	0	1	0	1	0	2	1	3	0	1.33

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	1.56	0.64	0.01 - 3.57	Same as
2009	2	1.67	1.20	0.13 - 4.33	Same as
2010	1	1.42	0.70	0.01 - 3.91	Same as
2011	1	0.84	1.20	0.02 - 6.66	Same as
2012	1	1.69	0.59	0.01 - 3.3	Same as

CAUTI Rate per 1,000 urinary catheter days



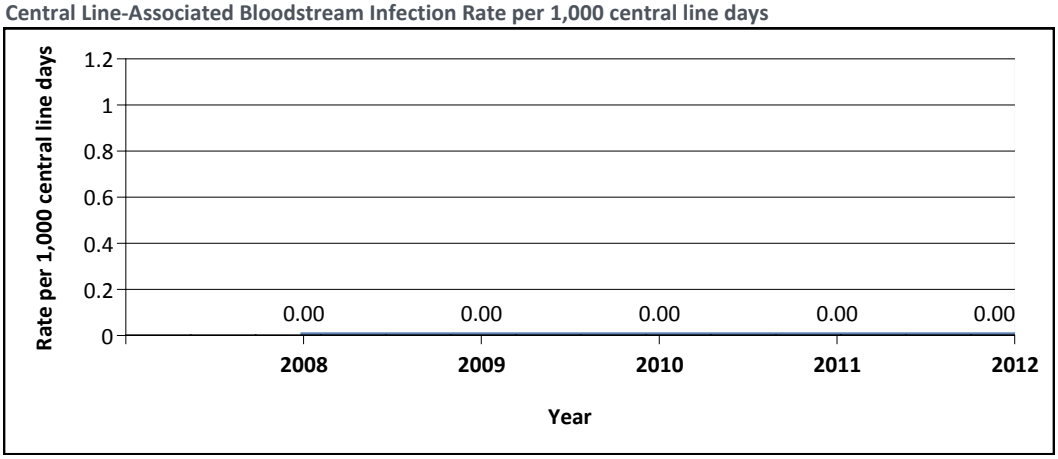
BROOKVILLE HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.06	0.00	0 - 66.17	Same as
2009	0	0.17	0.00	0 - 22.1	Same as
2010	0	0.08	0.00	0 - 48.24	Same as
2011	0	0.07	0.00	0 - 55.71	Same as
2012	0	0.31	0.00	0 - 11.7	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



BUCKS COUNTY SPECIALTY HOSPITAL

NHSN ID: 15202

Hospital type: Acute care general hospital

Number of licensed beds (2012): 24

Number of reported Healthcare-Associated Infections:

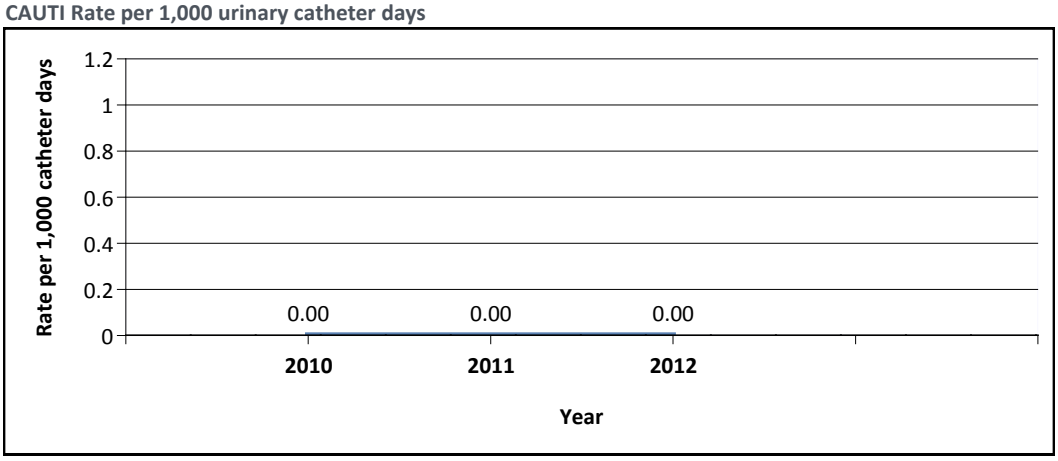
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008												
2009												
2010	380	0	0	0	0	0	0	0	0	0	0	0.00
2011	739	0	0	0	0	0	0	0	0	0	0	0.00
2012	985	0	0	0	0	0	0	7	0	0	0	7.11

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008				-	
2009				-	
2010	0	0.33	0.00	0 - 11.22	Same as
2011	0	0.25	0.00	0 - 14.72	Same as
2012	0	0.22	0.00	0 - 16.78	Same as

CAUTI Rate per 1,000 urinary catheter days



BUCKTAIL MEDICAL CENTER

NHSN ID: 12461

Hospital type: Critical access hospital

Number of licensed beds (2012): 21

Number of reported Healthcare-Associated Infections:

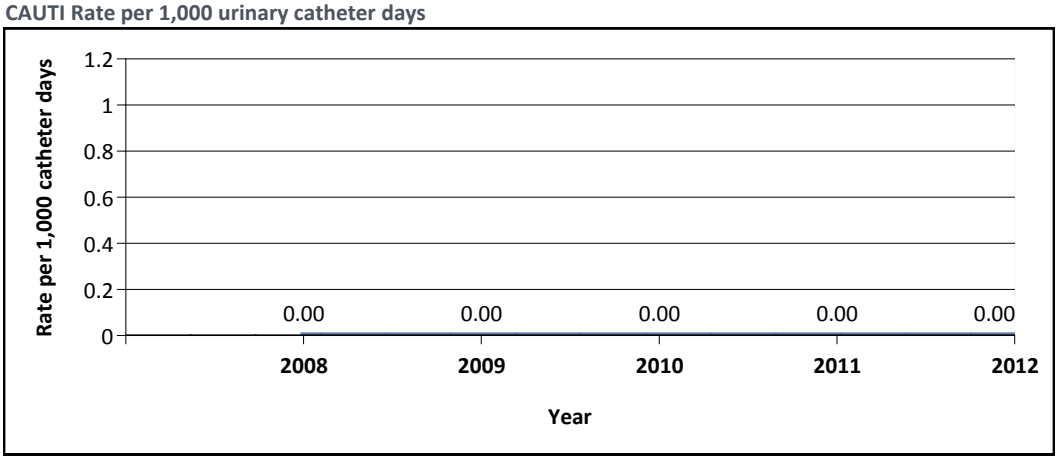
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	481	0	0	0	0	0	0	0	0	0	0	0.00
2009	1,026	0	0	0	0	0	0	0	0	0	0	0.00
2010	1,264	0	0	0	0	0	0	0	0	0	0	0.00
2011	1,078	0	0	1	0	0	0	0	0	0	0	0.93
2012	1,260	0	0	2	0	0	0	0	1	0	0	2.38

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.37	0.00	0 - 9.96	Same as
2009	0	0.39	0.00	0 - 9.37	Same as
2010	0	0.35	0.00	0 - 10.51	Same as
2011	0	0.11	0.00	0 - 33.33	Same as
2012	0	0.15	0.00	0 - 24.74	Same as

CAUTI Rate per 1,000 urinary catheter days



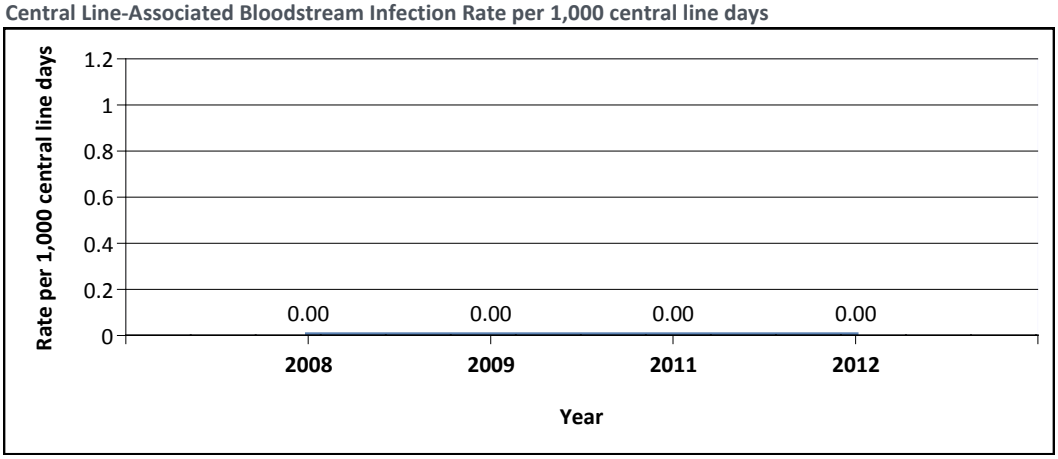
BUCKTAIL MEDICAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.28	0.00	0 - 12.99	Same as
2009	0	0.16	0.00	0 - 23.56	Same as
2010				-	
2011	0	0.05	0.00	0 - 71	Same as
2012	0	0.06	0.00	0 - 62.93	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



BUTLER MEMORIAL HOSPITAL

NHSN ID: 11736

Hospital type: Acute care general hospital

Number of licensed beds (2012): 296

Number of reported Healthcare-Associated Infections:

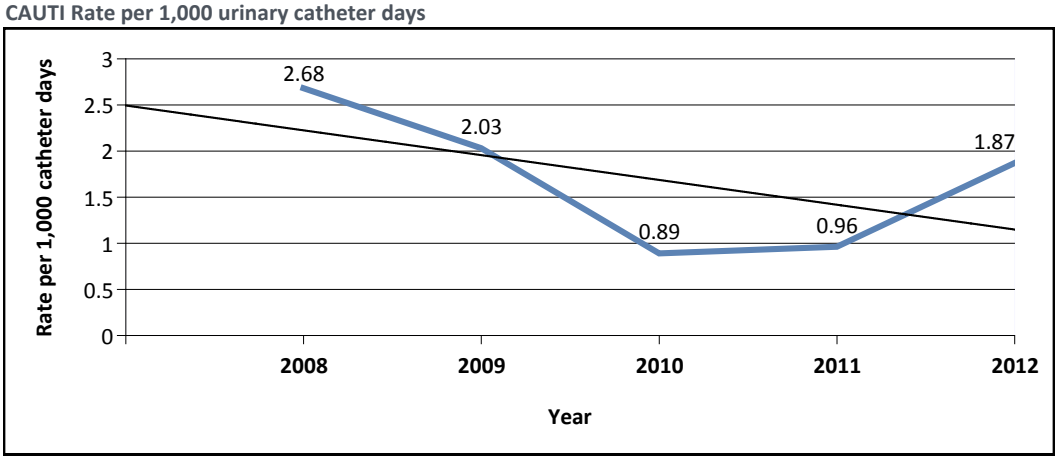
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	28,358	3	1	4	1	11	0	33	4	25	0	2.89
2009	66,212	7	2	15	10	18	0	76	5	39	0	2.60
2010	63,971	7	2	12	3	22	0	74	4	34	0	2.47
2011	67,225	8	0	11	4	10	1	57	5	20	0	1.73
2012	65,912	10	0	17	2	16	0	75	3	40	1	2.49

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	15	13.12	1.14	0.64 - 1.89	Same as
2009	27	21.35	1.26	0.83 - 1.84	Same as
2010	11	20.41	0.54	0.27 - 0.96	Better
2011	12	15.60	0.77	0.4 - 1.34	Same as
2012	22	16.23	1.36	0.85 - 2.05	Same as

CAUTI Rate per 1,000 urinary catheter days



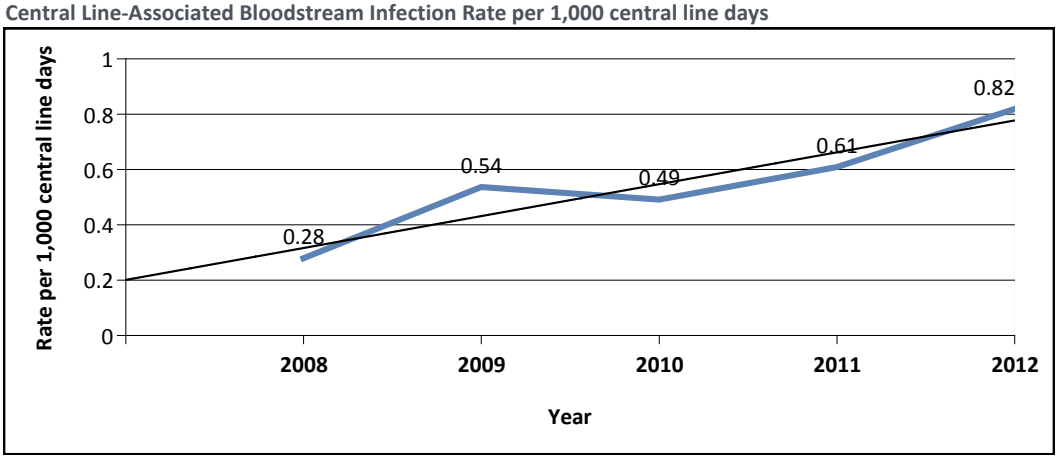
BUTLER MEMORIAL HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	5.18	0.19	0 - 1.07	Same as
2009	4	6.98	0.57	0.15 - 1.47	Same as
2010	4	5.70	0.70	0.19 - 1.8	Same as
2011	5	4.89	1.02	0.33 - 2.39	Same as
2012	7	6.00	1.17	0.47 - 2.4	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



CANONSBURG GENERAL HOSPITAL

NHSN ID: 11586

Hospital type: Acute care general hospital

Number of licensed beds (2012): 104

Number of reported Healthcare-Associated Infections:

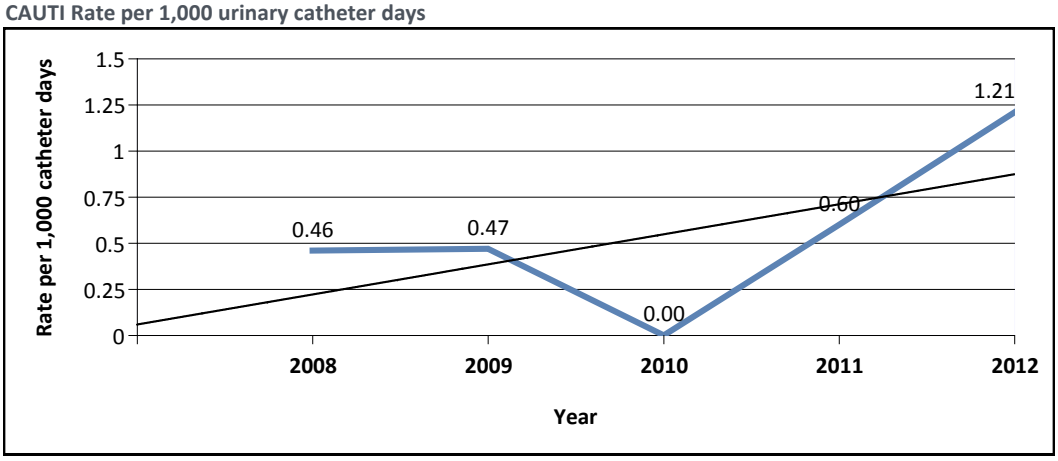
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	10,404	1	0	5	0	1	0	9	1	2	0	1.83
2009	21,655	5	0	5	0	1	0	10	1	5	1	1.29
2010	18,963	2	0	8	0	0	0	10	0	1	2	1.21
2011	17,798	1	0	5	0	1	0	6	1	6	1	1.18
2012	17,168	1	0	2	0	0	0	16	1	9	0	1.69

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	5.04	0.20	0 - 1.1	Same as
2009	2	6.81	0.29	0.03 - 1.06	Same as
2010	0	5.57	0.00	0 - 0.66	Better
2011	2	4.15	0.48	0.05 - 1.74	Same as
2012	4	4.57	0.87	0.24 - 2.24	Same as

CAUTI Rate per 1,000 urinary catheter days



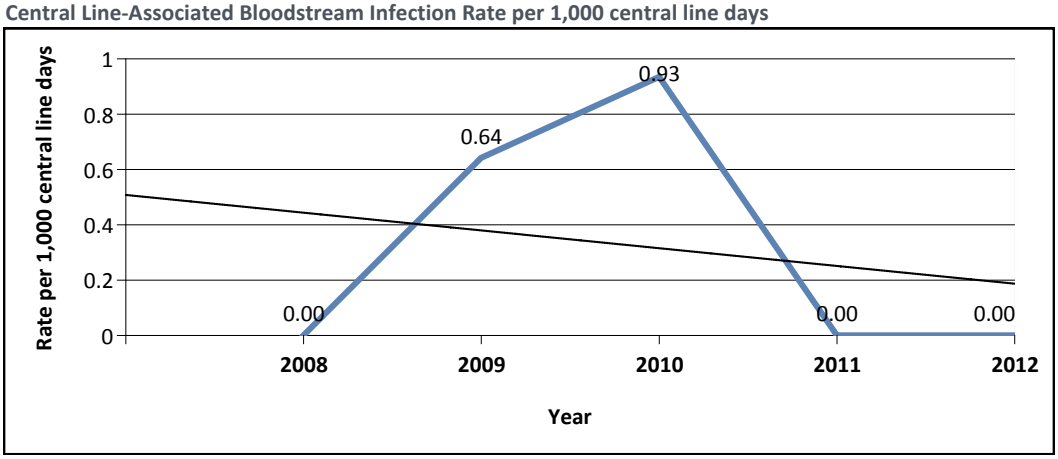
CANONSBURG GENERAL HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	1.74	0.00	0 - 2.11	Same as
2009	2	2.77	0.72	0.08 - 2.61	Same as
2010	2	1.52	1.31	0.15 - 4.74	Same as
2011	0	1.15	0.00	0 - 3.19	Same as
2012	0	1.28	0.00	0 - 2.86	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



CARLISLE REGIONAL MEDICAL CENTER

NHSN ID: 11997

Hospital type: Acute care general hospital

Number of licensed beds (2012): 165

Number of reported Healthcare-Associated Infections:

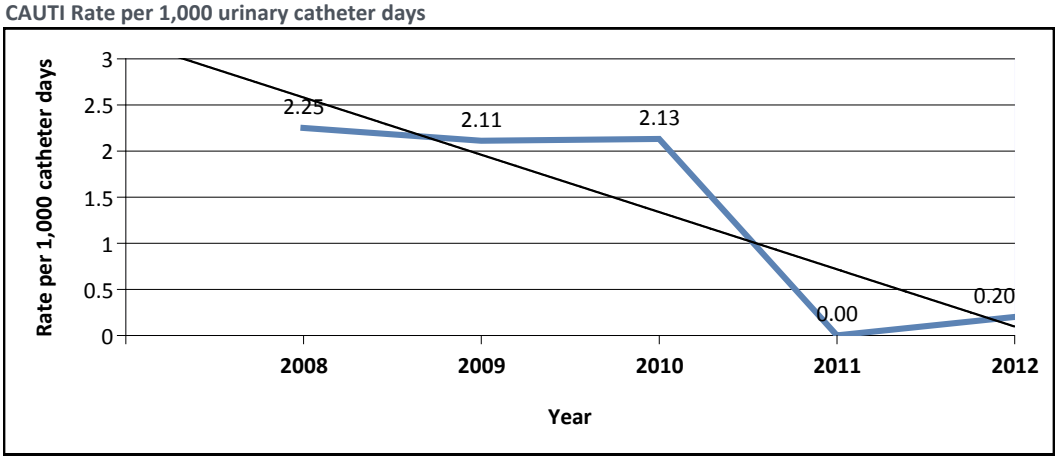
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	13,657	2	0	4	0	6	1	35	2	14	0	4.69
2009	29,884	8	1	4	1	10	0	37	4	32	0	3.25
2010	28,397	1	0	1	0	5	0	33	0	39	0	2.78
2011	26,235	1	0	1	0	0	0	21	0	2	0	0.95
2012	20,990	0	0	0	0	1	0	10	0	1	0	0.57

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	8	8.01	1.00	0.43 - 1.97	Same as
2009	17	12.91	1.32	0.77 - 2.11	Same as
2010	15	11.55	1.30	0.73 - 2.14	Same as
2011	0	9.52	0.00	0 - 0.39	Better
2012	1	6.87	0.15	0 - 0.81	Better

CAUTI Rate per 1,000 urinary catheter days



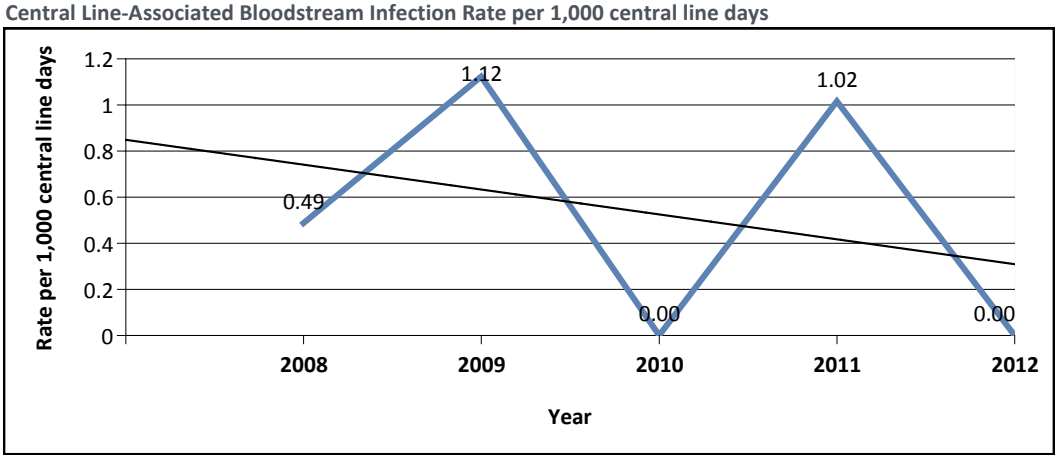
CARLISLE REGIONAL MEDICAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	2.99	0.33	0 - 1.86	Same as
2009	5	3.92	1.27	0.41 - 2.97	Same as
2010	0	2.66	0.00	0 - 1.38	Same as
2011	1	0.71	1.40	0.02 - 7.81	Same as
2012	0	1.34	0.00	0 - 2.75	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



CHAMBERSBURG HOSPITAL

NHSN ID: 11913

Hospital type: Acute care general hospital

Number of licensed beds (2012): 248

Number of reported Healthcare-Associated Infections:

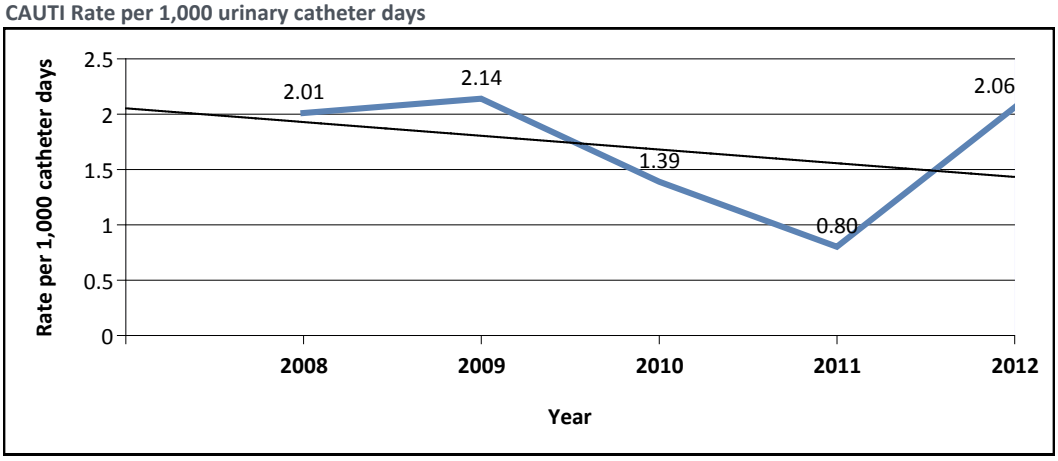
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	23,492	5	0	7	0	7	0	17	0	13	0	2.09
2009	55,289	7	1	18	0	28	0	45	5	41	1	2.64
2010	52,912	3	0	3	1	9	0	60	0	33	1	2.08
2011	56,846	6	0	22	0	12	0	62	1	21	0	2.18
2012	54,266	11	0	27	0	16	0	44	5	30	2	2.49

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	9	10.54	0.85	0.39 - 1.62	Same as
2009	22	16.54	1.33	0.83 - 2.01	Same as
2010	14	16.55	0.85	0.46 - 1.42	Same as
2011	8	12.28	0.65	0.28 - 1.28	Same as
2012	19	12.69	1.50	0.9 - 2.34	Same as

CAUTI Rate per 1,000 urinary catheter days



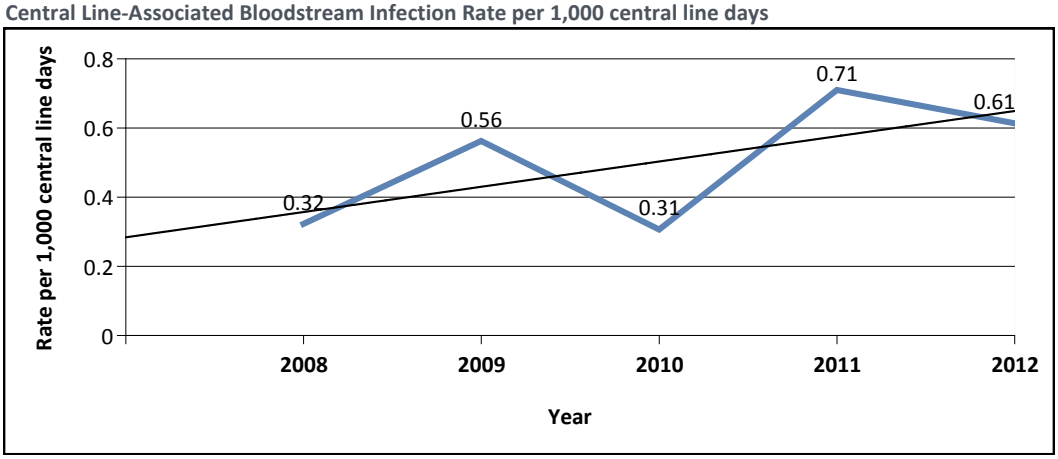
CHAMBERSBURG HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	4.49	0.22	0 - 1.24	Same as
2009	4	6.39	0.63	0.17 - 1.6	Same as
2010	2	4.59	0.44	0.05 - 1.57	Same as
2011	5	4.18	1.20	0.39 - 2.79	Same as
2012	4	4.52	0.88	0.24 - 2.27	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



CHARLES COLE MEMORIAL HOSPITAL

NHSN ID: 11956

Hospital type: Critical access hospital

Number of licensed beds (2012): 59

Number of reported Healthcare-Associated Infections:

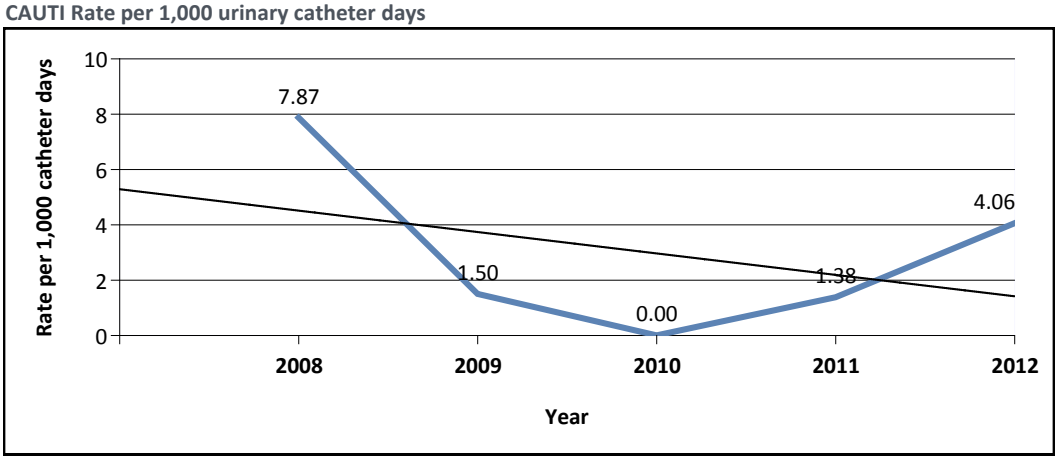
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,987	2	0	0	0	1	0	2	0	5	0	2.01
2009	10,171	1	0	1	0	2	0	3	0	4	0	1.08
2010	9,535	1	0	1	0	10	0	4	0	1	0	1.78
2011	9,233	1	0	0	0	1	0	4	0	4	0	1.08
2012	10,297	1	0	0	0	3	0	6	0	7	0	1.65

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	4	1.31	3.05	0.82 - 7.8	Same as
2009	2	2.16	0.93	0.1 - 3.34	Same as
2010	0	2.72	0.00	0 - 1.35	Same as
2011	2	1.76	1.14	0.13 - 4.11	Same as
2012	5	1.67	2.99	0.96 - 6.98	Same as

CAUTI Rate per 1,000 urinary catheter days



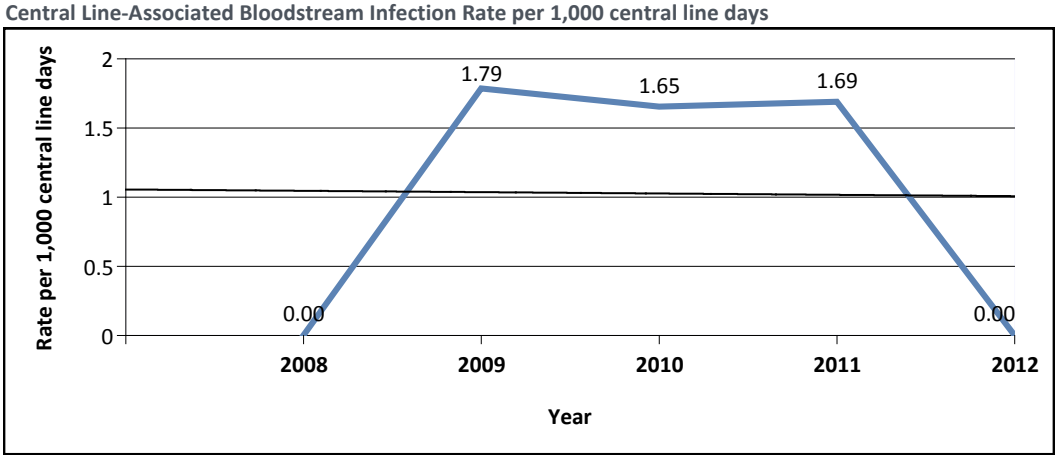
CHARLES COLE MEMORIAL HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.30	0.00	0 - 12.05	Same as
2009	1	0.61	1.64	0.02 - 9.11	Same as
2010	1	0.47	2.13	0.03 - 11.87	Same as
2011	1	0.39	2.55	0.03 - 14.2	Same as
2012	0	0.36	0.00	0 - 10.2	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



CHESTER COUNTY HOSPITAL

NHSN ID: 12016

Hospital type: Acute care general hospital

Number of licensed beds (2012): 220

Number of reported Healthcare-Associated Infections:

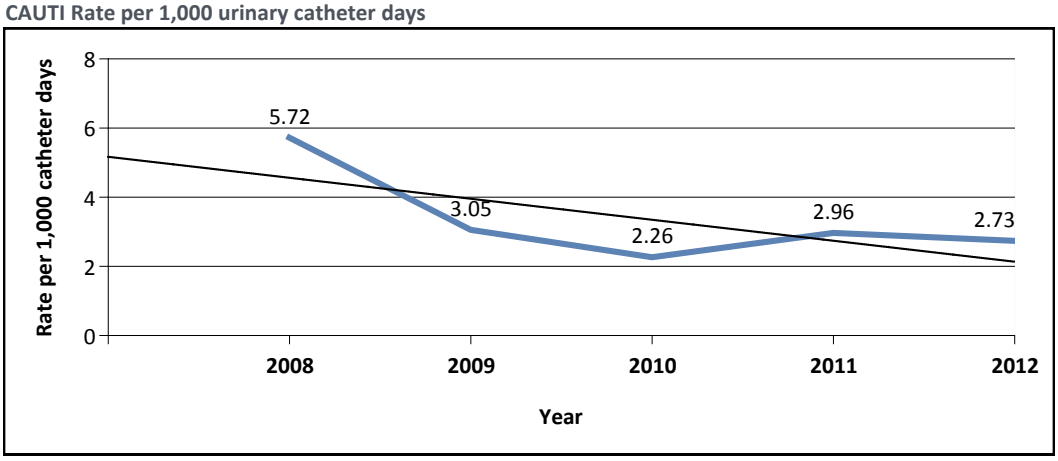
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	29,447	6	4	10	4	7	1	9	6	45	0	3.12
2009	65,525	9	4	19	6	13	7	36	14	56	1	2.52
2010	58,559	8	4	20	9	17	4	20	7	41	3	2.27
2011	59,845	10	4	33	6	14	2	30	10	46	1	2.61
2012	58,920	16	2	32	3	9	5	42	2	38	0	2.53

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	33	13.56	2.43	1.68 - 3.42	Worse
2009	34	24.70	1.38	0.95 - 1.92	Same as
2010	22	17.21	1.28	0.8 - 1.94	Same as
2011	26	14.01	1.86	1.21 - 2.72	Worse
2012	21	10.48	2.00	1.24 - 3.06	Worse

CAUTI Rate per 1,000 urinary catheter days



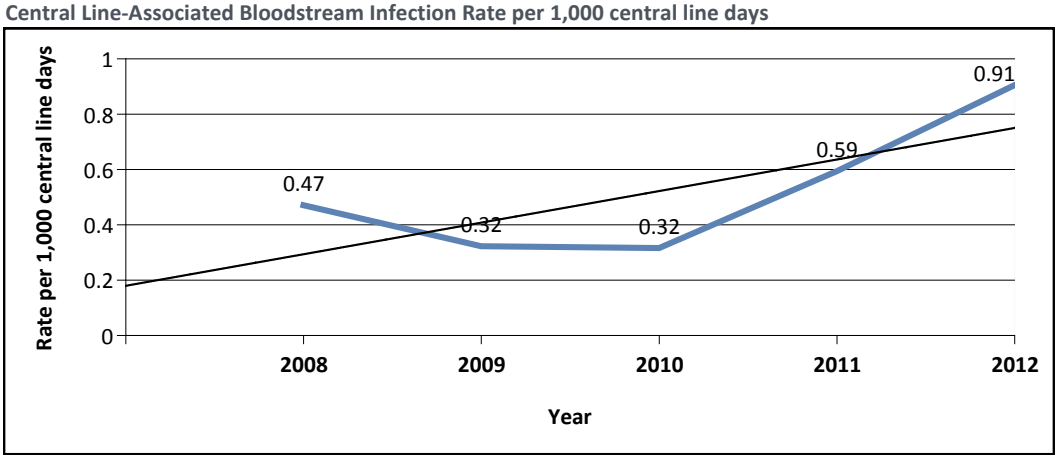
CHESTER COUNTY HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	6.19	0.32	0.04 - 1.17	Same as
2009	3	11.52	0.26	0.05 - 0.76	Better
2010	3	7.95	0.38	0.08 - 1.1	Same as
2011	6	8.73	0.69	0.25 - 1.5	Same as
2012	9	7.34	1.23	0.56 - 2.33	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.58	0.00	0 - 6.35	Same as
2009	2	1.47	1.37	0.15 - 4.93	Same as
2010	3	1.48	2.02	0.41 - 5.9	Same as
2011	0	0.61	0.00	0 - 5.99	Same as
2012	0	0.70	0.00	0 - 5.26	Same as

CHESTNUT HILL HOSPITAL

NHSN ID: 12304

Hospital type: Acute care general hospital

Number of licensed beds (2012): 130

Number of reported Healthcare-Associated Infections:

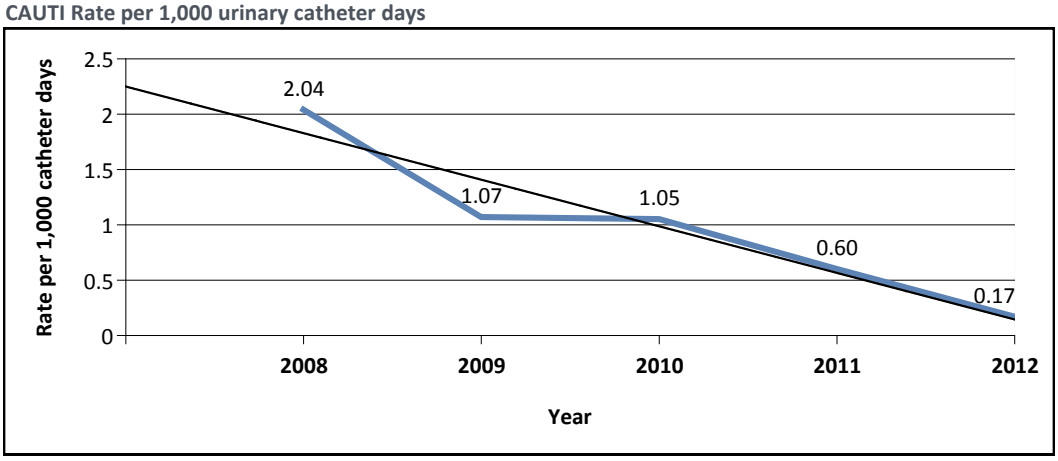
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	15,170	4	0	8	1	7	0	3	0	8	0	2.04
2009	29,924	0	0	3	0	6	0	8	0	10	0	0.90
2010	27,053	3	0	1	0	3	0	10	0	7	0	0.89
2011	27,803	1	0	6	0	0	0	13	3	4	0	0.97
2012	26,818	5	0	1	0	1	0	7	0	1	0	0.56

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	7	7.90	0.89	0.35 - 1.83	Same as
2009	8	16.51	0.48	0.21 - 0.95	Better
2010	7	11.72	0.60	0.24 - 1.23	Same as
2011	4	8.65	0.46	0.12 - 1.18	Same as
2012	1	8.43	0.12	0 - 0.66	Better

CAUTI Rate per 1,000 urinary catheter days



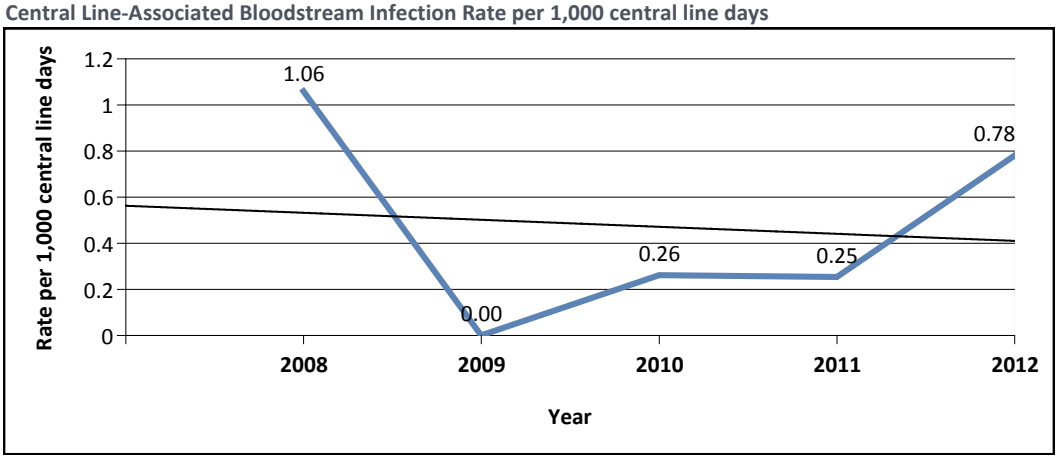
CHESTNUT HILL HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	2.72	0.74	0.08 - 2.65	Same as
2009	0	5.58	0.00	0 - 0.66	Better
2010	1	3.31	0.30	0 - 1.68	Same as
2011	1	2.29	0.44	0.01 - 2.43	Same as
2012	3	2.74	1.09	0.22 - 3.2	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.09	0.00	0 - 41.93	Same as
2009				-	
2010				-	
2011				-	
2012				-	

CHILDRENS HOME OF PITTSBURGH, THE

NHSN ID: 12336

Hospital type: Children's Hospital

Number of licensed beds (2012): 24

Number of reported Healthcare-Associated Infections:

Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	1,786	3	0	0	0	0	0	0	0	0	0	1.68
2009	4,160	0	1	2	4	0	0	0	1	1	0	2.16
2010	4,581	2	0	2	0	0	0	0	0	1	0	1.09
2011	4,665	5	3	0	0	0	0	0	3	0	0	2.36
2012	5,923	3	3	0	0	0	0	0	0	2	0	1.35

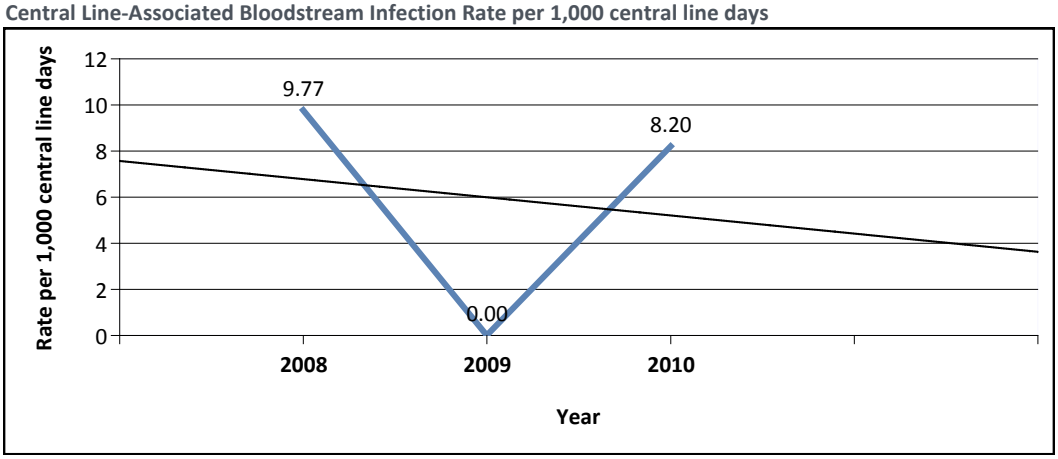
CHILDRENS HOME OF PITTSBURGH, THE

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	0.45	6.66	1.34 - 19.47	Worse
2009	0	0.76	0.00	0 - 4.83	Same as
2010	2	0.16	12.60	1.42 - 45.5	Worse
2011				-	
2012				-	

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Specialty Care Area

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008				-	
2009				-	
2010				-	
2011	5	2.44	2.05	0.66 - 4.78	Same as
2012	3	1.51	1.98	0.4 - 5.8	Same as

Standardized Infection Ratio - Long-Term Acute Care

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008				-	
2009				-	
2010	0	1.80	0.00	0 - 2.04	Same as
2011				-	
2012				-	

CHILDRENS HOSPITAL OF PHILADELPHIA

NHSN ID: 10306

Hospital type: Children's Hospital

Number of licensed beds (2012): 521

Number of reported Healthcare-Associated Infections:

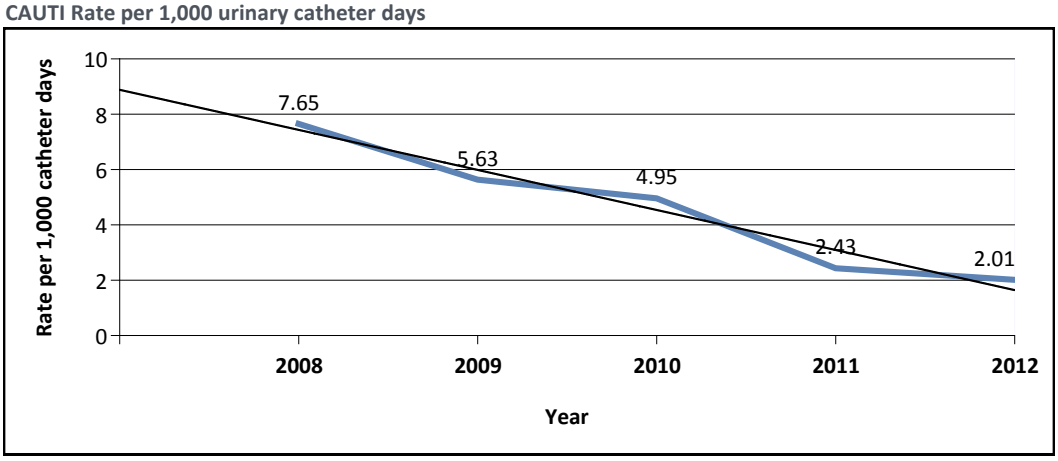
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	62,287	101	0	0	0	5	0	7	0	36	0	2.39
2009	130,369	154	0	0	0	13	0	16	0	77	0	1.99
2010	137,053	98	24	22	9	19	1	75	22	61	9	2.48
2011	150,455	97	78	73	50	24	1	68	43	45	17	3.30
2012	154,870	103	78	77	71	20	1	73	32	70	10	3.45

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	19	7.36	2.58	1.55 - 4.03	Worse
2009	25	10.09	2.48	1.6 - 3.66	Worse
2010	18	6.72	2.68	1.59 - 4.23	Worse
2011	10	5.15	1.94	0.93 - 3.57	Same as
2012	11	9.39	1.17	0.58 - 2.1	Same as

CAUTI Rate per 1,000 urinary catheter days



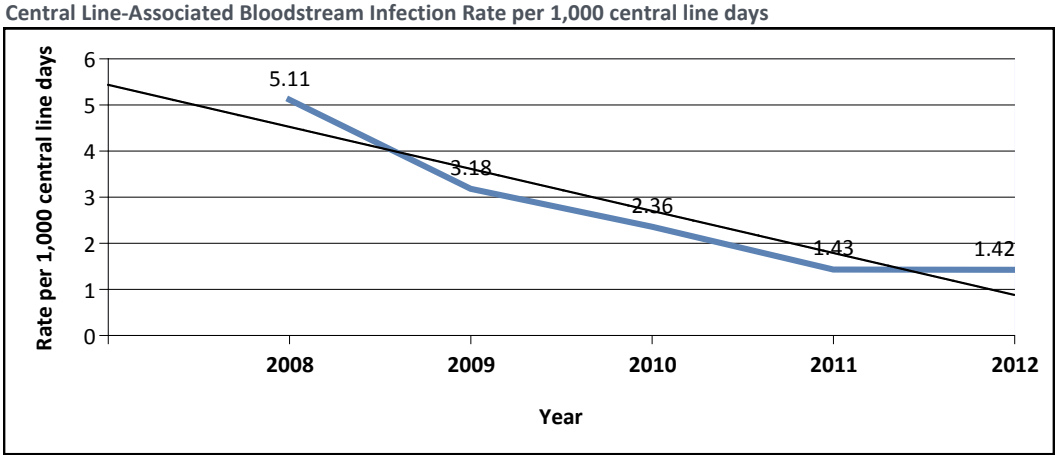
CHILDRENS HOSPITAL OF PHILADELPHIA

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	50	14.56	3.43	2.55 - 4.53	Worse
2009	66	24.16	2.73	2.11 - 3.48	Worse
2010	48	16.65	2.88	2.13 - 3.82	Worse
2011	31	18.41	1.68	1.14 - 2.39	Worse
2012	35	20.42	1.71	1.19 - 2.38	Worse

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	18	10.53	1.71	0.85 - 2.7	Same as
2009	34	28.24	1.20	0.83 - 1.68	Same as
2010	19	16.56	1.15	0.69 - 1.79	Same as
2011	29	16.90	1.72	1.15 - 2.46	Worse
2012	15	11.14	1.35	0.75 - 2.22	Same as

Standardized Infection Ratio - Specialty Care Area

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	20	11.15	1.79	1.09 - 2.77	Worse
2009	30	17.80	1.69	1.14 - 2.41	Worse
2010	22	14.32	1.54	0.96 - 2.33	Same as
2011	20	13.67	1.46	0.89 - 2.26	Same as
2012	35	16.39	2.14	1.49 - 2.97	Worse

CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC

NHSN ID: 11640

Hospital type: Children's Hospital

Number of licensed beds (2012): 296

Number of reported Healthcare-Associated Infections:

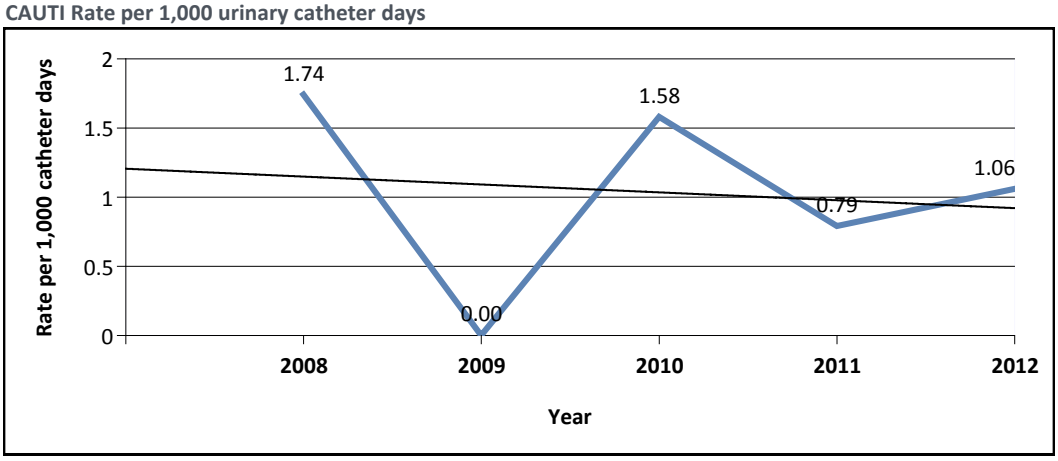
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	31,932	29	0	14	6	8	0	12	0	6	1	2.38
2009	75,521	71	5	16	6	9	0	26	3	8	11	2.05
2010	79,661	75	6	9	14	7	0	16	11	20	8	2.08
2011	84,133	62	7	26	26	11	0	40	8	11	5	2.33
2012	84,386	53	7	34	7	3	0	54	6	11	6	2.14

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	6	8.84	0.68	0.25 - 1.48	Same as
2009	0	19.89	0.00	0 - 0.18	Better
2010	13	14.67	0.89	0.47 - 1.52	Same as
2011	6	11.28	0.53	0.19 - 1.16	Same as
2012	8	13.60	0.59	0.25 - 1.16	Same as

CAUTI Rate per 1,000 urinary catheter days



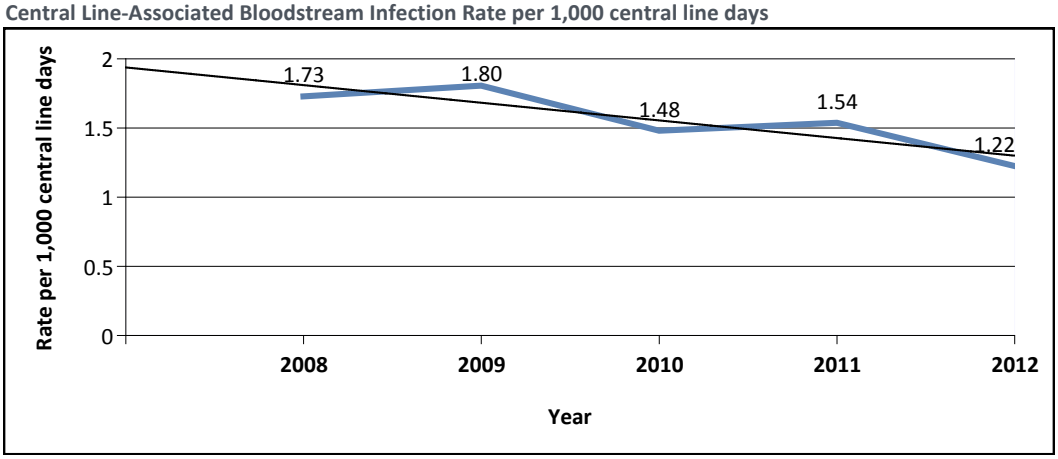
CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	16	14.23	1.12	0.64 - 1.83	Same as
2009	50	27.54	1.82	1.35 - 2.39	Worse
2010	33	16.59	1.99	1.37 - 2.79	Worse
2011	35	17.42	2.01	1.4 - 2.79	Worse
2012	26	18.93	1.37	0.9 - 2.01	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	4.94	0.20	0.04 - 1.13	Same as
2009	9	15.85	0.57	0.26 - 1.08	Same as
2010	7	10.04	0.70	0.28 - 1.44	Same as
2011	3	8.71	0.34	0.07 - 1.01	Same as
2012	3	4.69	0.64	0.13 - 1.87	Same as

Standardized Infection Ratio - Specialty Care Area

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	10	8.85	1.13	0.54 - 2.08	Same as
2009	9	8.59	1.05	0.48 - 1.99	Same as
2010	29	18.11	1.60	1.07 - 2.3	Worse
2011	22	12.51	1.76	1.1 - 2.66	Worse
2012	17	14.08	1.21	0.7 - 1.93	Same as

CHILDRENS INSTITUTE OF PITTSBURGH

NHSN ID: 12266

Hospital type: Children's Hospital

Number of licensed beds (2012): 62

Number of reported Healthcare-Associated Infections:

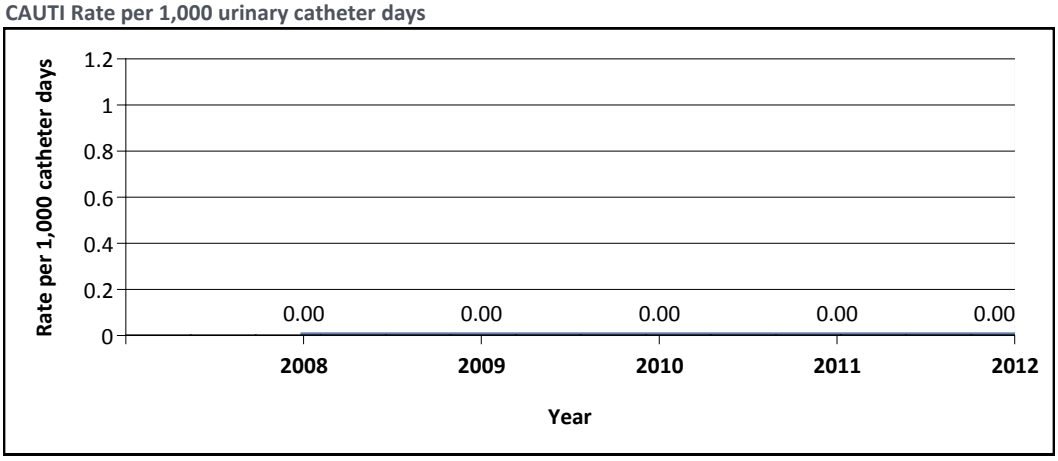
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	9,523	1	0	1	0	0	0	0	0	0	0	0.21
2009	11,882	2	0	0	0	1	0	0	0	0	1	0.34
2010	9,990	6	0	0	0	1	0	0	0	0	0	0.70
2011	7,631	1	0	0	0	0	0	0	4	0	0	0.66
2012	11,368	2	0	0	0	0	0	0	1	0	0	0.26

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	1.15	0.00	0 - 3.18	Same as
2009	0	0.20	0.00	0 - 18.48	Same as
2010	0	0.27	0.00	0 - 13.6	Same as
2011	0	0.01	0.00	0 - 306.4	Same as
2012	0	0.17	0.00	0 - 21.86	Same as

CAUTI Rate per 1,000 urinary catheter days



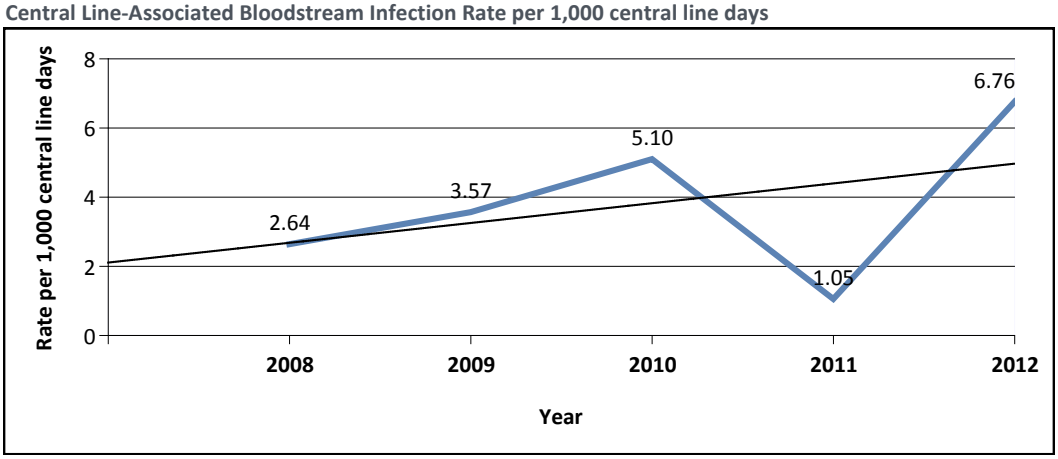
CHILDRENS INSTITUTE OF PITTSBURGH

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	0.51	1.95	0.03 - 10.88	Same as
2009	2	0.63	3.16	0.36 - 11.42	Same as
2010	6	0.83	7.21	2.63 - 15.69	Worse
2011	1	0.57	1.77	0.02 - 9.85	Same as
2012	2	0.16	12.37	1.39 - 44.66	Worse

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



CLARION HOSPITAL

NHSN ID: 11654

Hospital type: Acute care general hospital

Number of licensed beds (2012): 82

Number of reported Healthcare-Associated Infections:

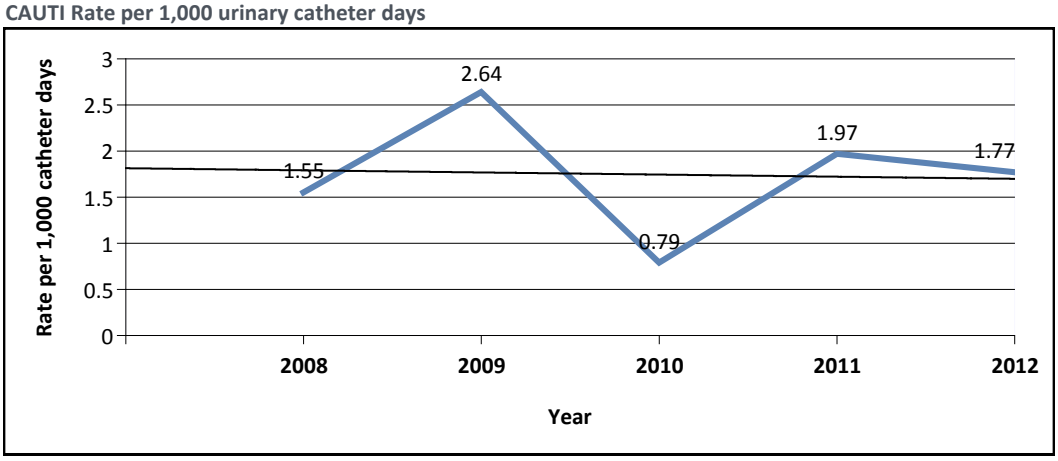
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	5,649	1	0	0	0	2	0	1	0	2	0	1.06
2009	11,584	0	0	6	0	5	2	5	2	11	0	2.68
2010	11,420	1	0	4	0	3	0	9	2	10	1	2.63
2011	10,903	0	0	4	0	6	0	11	2	12	0	3.21
2012	10,706	1	1	5	0	6	0	7	1	5	1	2.52

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	2.97	0.67	0.08 - 2.43	Same as
2009	7	5.85	1.20	0.48 - 2.47	Same as
2010	2	4.46	0.45	0.05 - 1.62	Same as
2011	5	4.33	1.15	0.37 - 2.69	Same as
2012	3	3.13	0.96	0.19 - 2.8	Same as

CAUTI Rate per 1,000 urinary catheter days



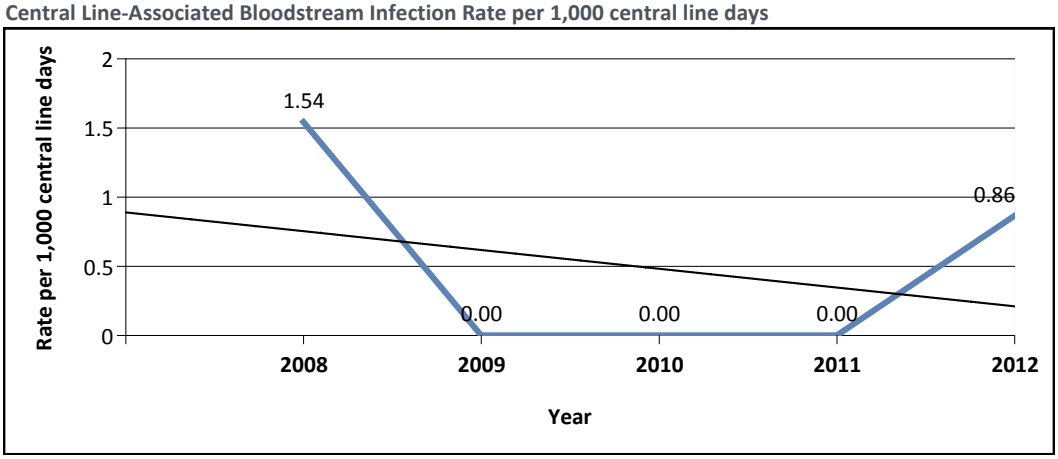
CLARION HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	0.93	1.08	0.01 - 5.99	Same as
2009	0	1.91	0.00	0 - 1.92	Same as
2010	0	1.12	0.00	0 - 3.26	Same as
2011	0	1.57	0.00	0 - 2.34	Same as
2012	1	0.86	1.16	0.02 - 6.47	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



CLARION PSYCHIATRIC CENTER

NHSN ID: 12454

Hospital type: Psychiatric hospital

Number of licensed beds (2012): 74

Number of reported Healthcare-Associated Infections:

Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008		0	3	0	0	0	0	0	0	0	0	
2009	16,861	0	1	0	0	0	0	0	0	0	0	0.06
2010	18,856	0	10	0	3	0	0	0	0	0	0	0.69
2011	21,714	0	25	0	0	1	2	0	1	0	0	1.34
2012	21,709	0	19	0	0	0	1	0	11	3	0	1.57

CLARKS SUMMIT STATE HOSPITAL

NHSN ID: 12051

Hospital type: Psychiatric hospital

Number of licensed beds (2012): 226

Number of reported Healthcare-Associated Infections:

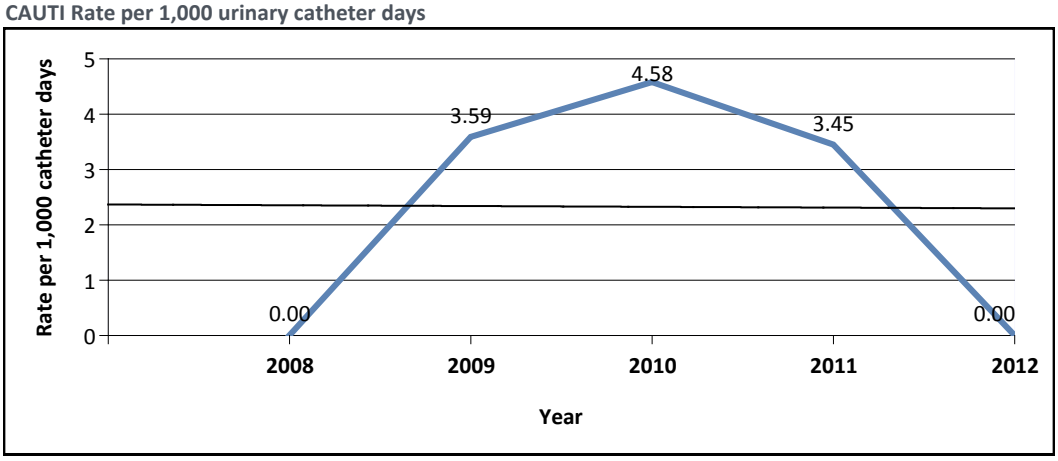
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	40,766	0	5	0	0	0	1	0	1	4	0	0.27
2009	79,660	0	21	0	0	0	0	0	2	14	0	0.46
2010	76,460	1	7	0	0	0	0	0	0	25	1	0.44
2011	67,128	0	12	0	0	0	0	0	1	17	0	0.45
2012	78,564	0	13	0	1	0	0	0	2	6	0	0.28

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.30	0.00	0 - 12.43	Same as
2009	2	0.94	2.12	0.24 - 7.67	Same as
2010	4	1.55	2.58	0.69 - 6.6	Same as
2011	1	0.21	4.75	0.06 - 26.45	Same as
2012	0	1.70	0.00	0 - 2.16	Same as

CAUTI Rate per 1,000 urinary catheter days



CLEARFIELD HOSPITAL

NHSN ID: 11843

Hospital type: Acute care general hospital

Number of licensed beds (2012): 96

Number of reported Healthcare-Associated Infections:

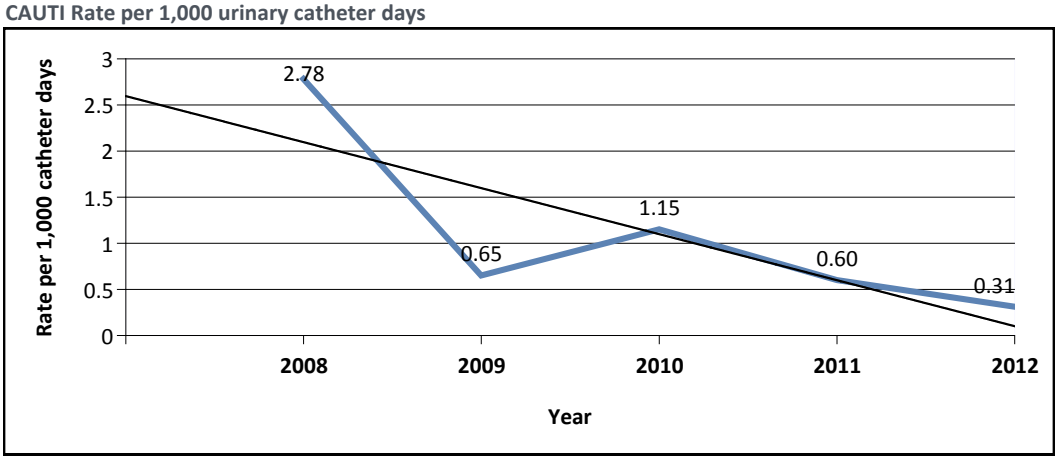
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	10,158	0	0	0	0	1	0	5	0	6	0	1.18
2009	20,585	1	0	3	0	1	0	13	0	4	0	1.07
2010	19,573	1	0	1	0	1	0	9	0	6	0	0.92
2011	16,613	0	0	0	0	0	0	5	0	2	0	0.42
2012	15,717	3	0	0	0	0	0	4	0	1	1	0.57

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	6	5.01	1.20	0.44 - 2.61	Same as
2009	3	7.44	0.40	0.08 - 1.18	Same as
2010	5	7.11	0.70	0.23 - 1.64	Same as
2011	2	4.17	0.48	0.05 - 1.73	Same as
2012	1	4.53	0.22	0 - 1.23	Same as

CAUTI Rate per 1,000 urinary catheter days



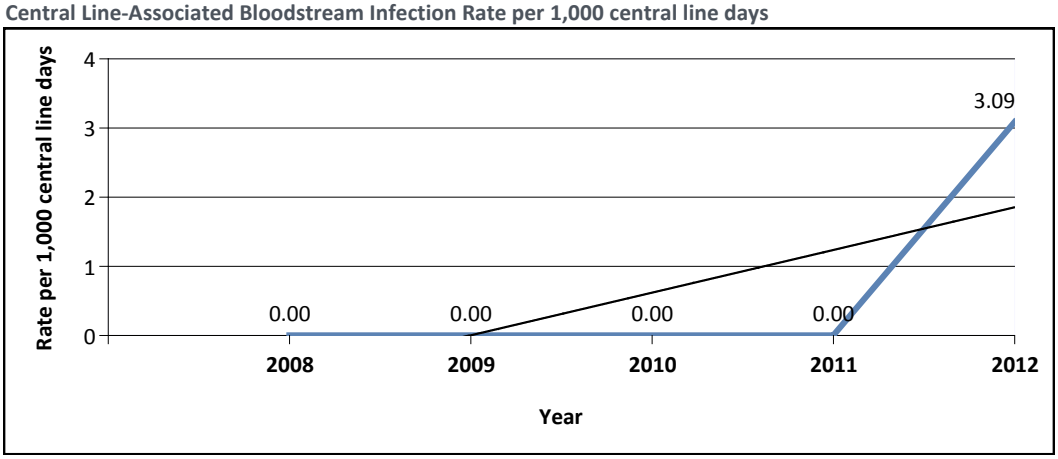
CLEARFIELD HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	1.07	0.00	0 - 3.41	Same as
2009	0	1.21	0.00	0 - 3.03	Same as
2010	0	0.82	0.00	0 - 4.48	Same as
2011	0	0.44	0.00	0 - 8.27	Same as
2012	2	0.38	5.26	0.59 - 18.99	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



CONEMAUGH VALLEY MEMORIAL HOSPITAL

NHSN ID: 10280

Hospital type: Acute care general hospital

Number of licensed beds (2012): 485

Number of reported Healthcare-Associated Infections:

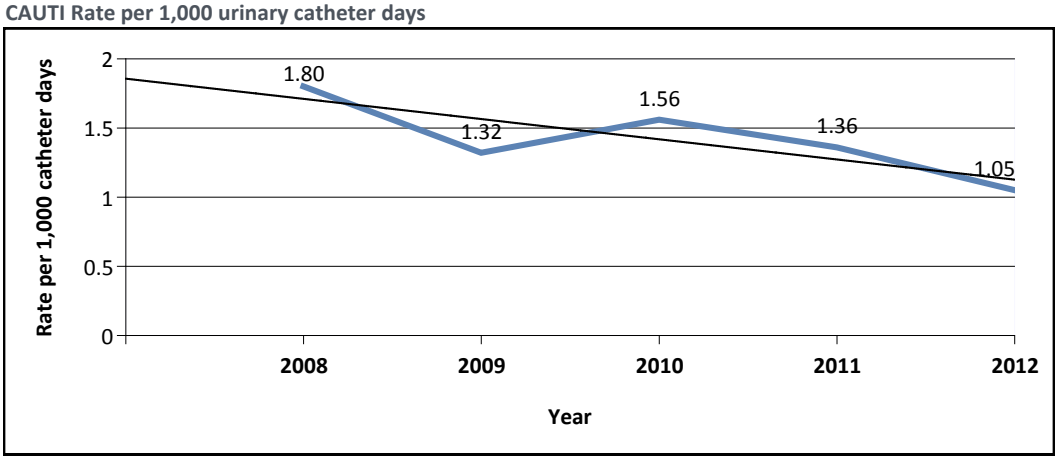
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	61,738	32	2	37	14	2	0	34	2	29	4	2.53
2009	136,354	75	1	73	40	2	0	55	2	52	3	2.22
2010	133,148	69	3	64	45	7	0	55	0	70	1	2.36
2011	121,737	73	2	62	52	5	0	69	2	62	3	2.71
2012	120,230	59	3	70	20	2	0	63	2	40	1	2.16

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	25	31.93	0.78	0.51 - 1.16	Same as
2009	39	64.95	0.60	0.43 - 0.82	Better
2010	50	56.15	0.89	0.66 - 1.17	Same as
2011	42	53.52	0.78	0.57 - 1.06	Same as
2012	30	53.88	0.56	0.38 - 0.79	Better

CAUTI Rate per 1,000 urinary catheter days



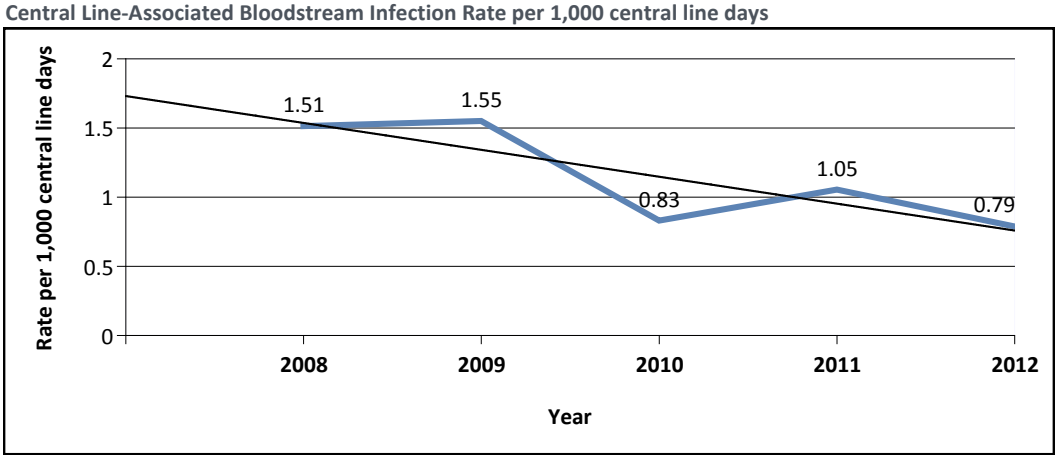
CONEMAUGH VALLEY MEMORIAL HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	11	10.45	1.05	0.52 - 1.88	Same as
2009	26	21.62	1.20	0.79 - 1.76	Same as
2010	16	16.51	0.97	0.55 - 1.57	Same as
2011	18	15.28	1.18	0.7 - 1.86	Same as
2012	12	11.66	1.03	0.53 - 1.8	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.45	0.00	0 - 8.17	Same as
2009	0	0.75	0.00	0 - 4.89	Same as
2010	4	0.91	4.40	1.18 - 11.25	Worse
2011	0	0.90	0.00	0 - 4.07	Same as
2012	1	0.84	1.19	0.02 - 6.63	Same as

COORDINATED HEALTH ORTHOPEDIC HOSPITAL, LLC

NHSN ID: 11872

Hospital type: Acute care general hospital

Number of licensed beds (2012): 20

Number of reported Healthcare-Associated Infections:

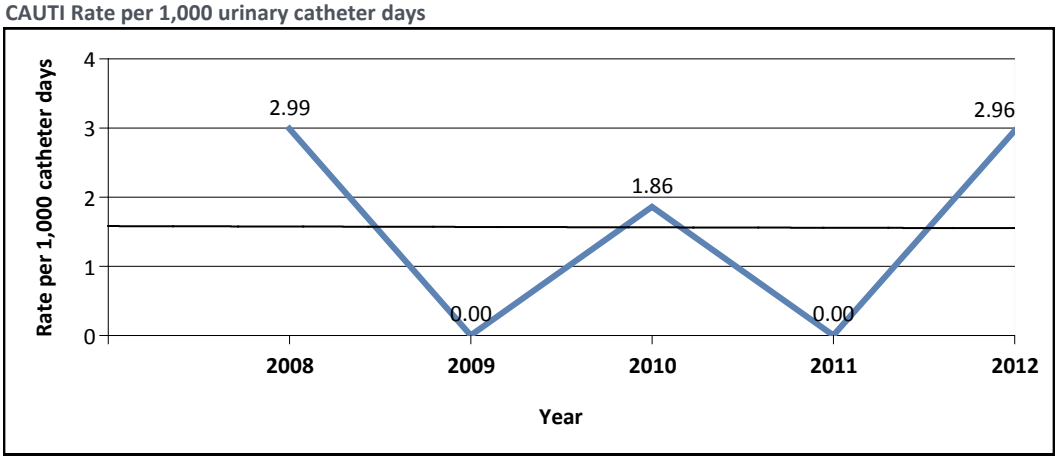
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	844	0	0	0	0	0	0	4	0	1	0	5.92
2009	4,684	0	0	0	0	0	0	7	0	0	0	1.49
2010	2,994	0	0	0	0	0	0	7	0	2	0	3.01
2011	3,107	0	0	0	0	1	0	9	0	0	0	3.22
2012	3,085	0	0	0	0	1	0	2	0	4	0	2.27

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	0.71	1.41	0.02 - 7.85	Same as
2009	0	1.53	0.00	0 - 2.39	Same as
2010	2	1.74	1.15	0.13 - 4.14	Same as
2011	0	2.03	0.00	0 - 1.81	Same as
2012	4	1.95	2.05	0.55 - 5.25	Same as

CAUTI Rate per 1,000 urinary catheter days



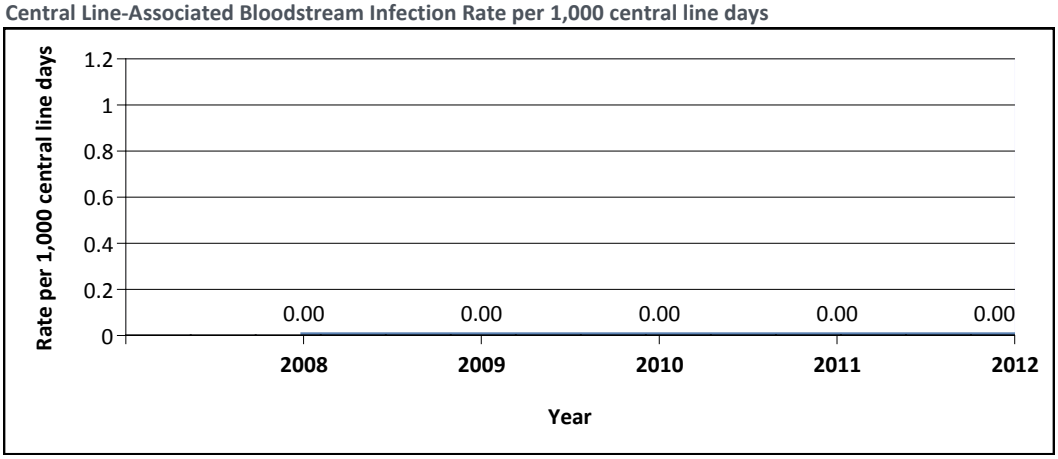
COORDINATED HEALTH ORTHOPEDIC HOSPITAL, LLC

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.04	0.00	0 - 88.07	Same as
2009	0	0.07	0.00	0 - 55.93	Same as
2010	0	0.13	0.00	0 - 29.32	Same as
2011	0	0.09	0.00	0 - 39.47	Same as
2012	0	0.03	0.00	0 - 104.9	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



CORRY MEMORIAL HOSPITAL

NHSN ID: 12283

Hospital type: Critical access hospital

Number of licensed beds (2012): 20

Number of reported Healthcare-Associated Infections:

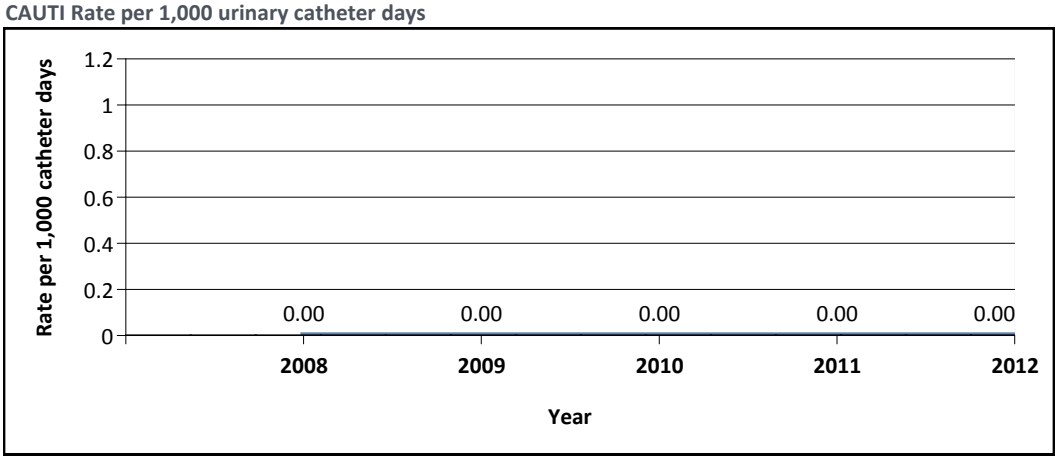
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	2,619	0	0	0	0	1	0	0	0	0	0	0.38
2009	5,769	0	0	1	0	1	0	0	0	0	0	0.35
2010	5,177	0	0	1	0	1	0	1	1	3	0	1.35
2011	5,107	0	0	0	0	0	0	1	0	2	0	0.59
2012	3,598	0	0	1	0	1	0	1	0	0	0	0.83

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.89	0.00	0 - 4.11	Same as
2009	0	0.83	0.00	0 - 4.4	Same as
2010	0	0.94	0.00	0 - 3.92	Same as
2011	0	0.75	0.00	0 - 4.88	Same as
2012	0	0.60	0.00	0 - 6.14	Same as

CAUTI Rate per 1,000 urinary catheter days



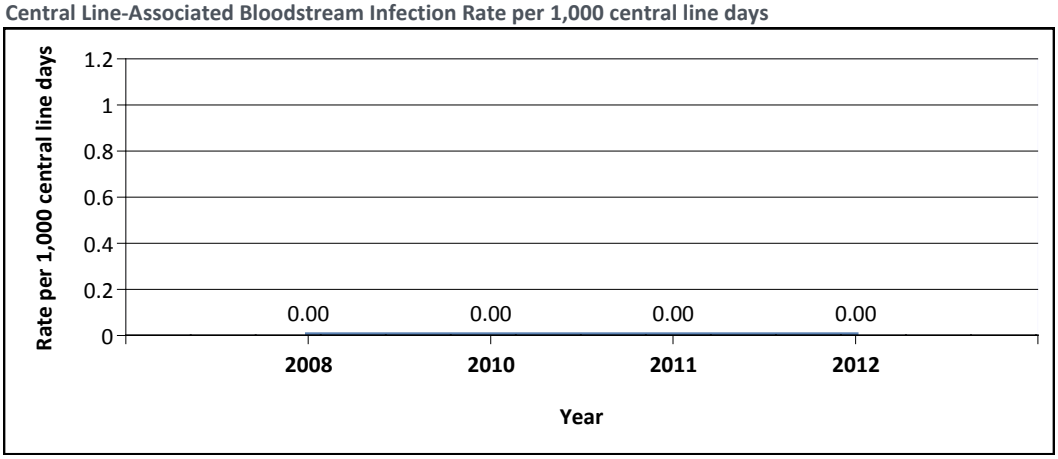
CORRY MEMORIAL HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.02	0.00	0 - 202.24	Same as
2009				-	
2010	0	0.01	0.00	0 - 342.49	Same as
2011	0	0.01	0.00	0 - 339.26	Same as
2012	0	0.02	0.00	0 - 197.38	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



CRICHTON REHABILITATION CENTER

NHSN ID: 12273

Hospital type: Rehabilitation hospital

Number of licensed beds (2012): 39

Number of reported Healthcare-Associated Infections:

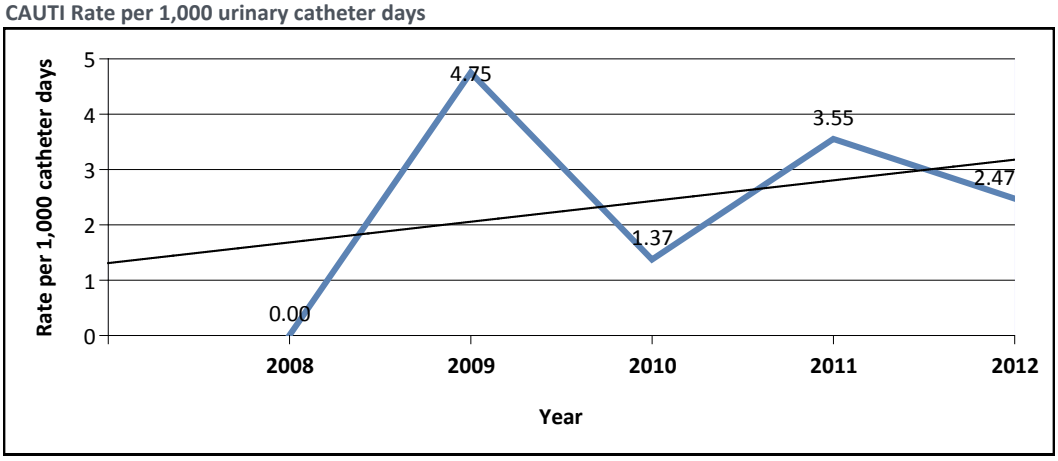
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,709	0	0	1	0	0	0	0	0	2	0	0.64
2009	9,418	0	0	3	1	0	0	0	0	10	0	1.49
2010	9,026	2	0	4	0	0	0	0	0	9	1	1.77
2011	9,740	1	0	2	0	0	0	0	0	7	0	1.03
2012	9,732	0	0	3	0	0	0	0	0	11	0	1.44

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.77	0.00	0 - 4.79	Same as
2009	3	1.42	2.11	0.42 - 6.17	Same as
2010	1	1.31	0.76	0.01 - 4.23	Same as
2011	3	1.25	2.40	0.48 - 7.01	Same as
2012	2	1.08	1.85	0.21 - 6.68	Same as

CAUTI Rate per 1,000 urinary catheter days



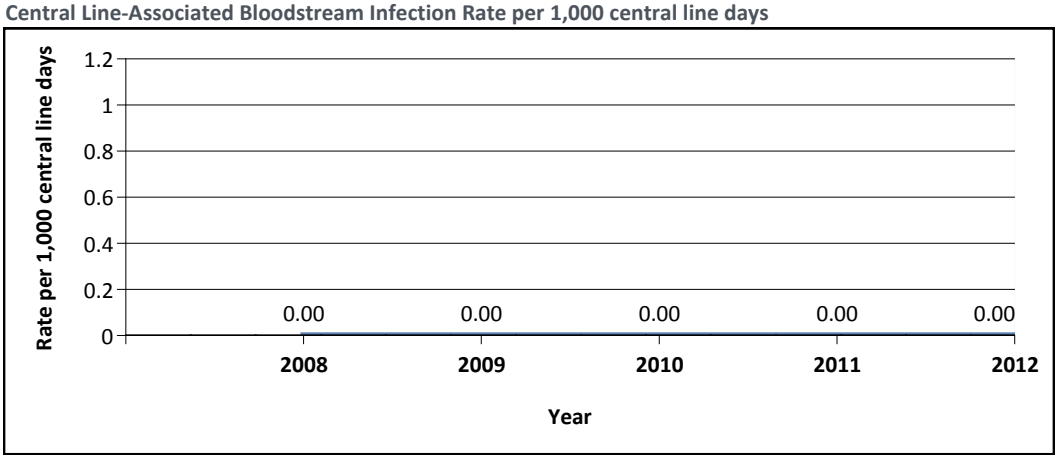
CRICHTON REHABILITATION CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.06	0.00	0 - 62.54	Same as
2009	0	0.25	0.00	0 - 14.51	Same as
2010	0	0.26	0.00	0 - 14	Same as
2011	0	0.36	0.00	0 - 10.3	Same as
2012	0	0.24	0.00	0 - 15.11	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



CROZER CHESTER MEDICAL CENTER

NHSN ID: 11839

Hospital type: Acute care general hospital

Number of licensed beds (2012): 426

Number of reported Healthcare-Associated Infections:

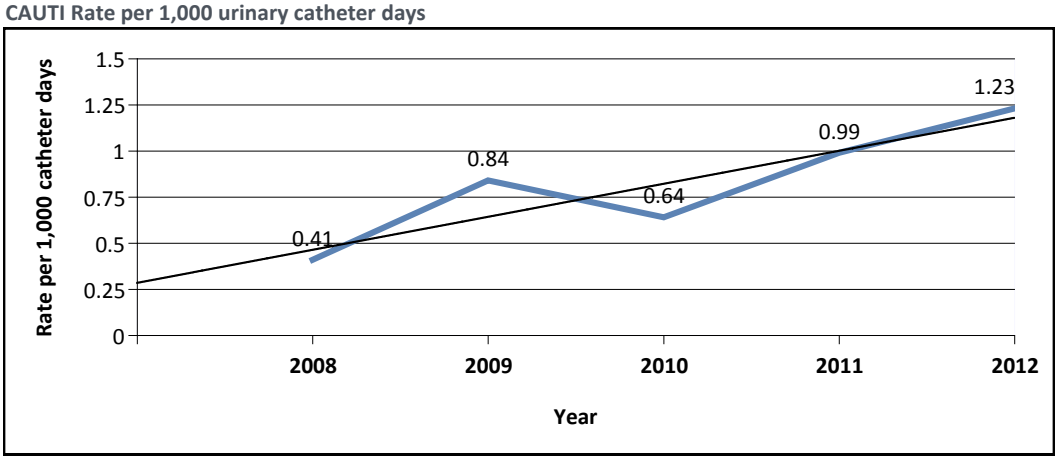
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	50,616	18	0	9	0	7	0	22	3	4	0	1.24
2009	105,374	36	3	27	0	16	0	43	5	23	0	1.45
2010	99,590	31	1	16	1	20	0	30	6	23	1	1.30
2011	88,176	17	2	39	2	20	0	36	1	26	0	1.62
2012	74,144	12	0	31	2	10	1	31	4	23	2	1.56

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	4	22.74	0.18	0.05 - 0.45	Better
2009	18	34.38	0.52	0.31 - 0.83	Better
2010	14	38.46	0.36	0.2 - 0.61	Better
2011	18	30.45	0.59	0.35 - 0.93	Better
2012	18	27.36	0.66	0.39 - 1.04	Same as

CAUTI Rate per 1,000 urinary catheter days



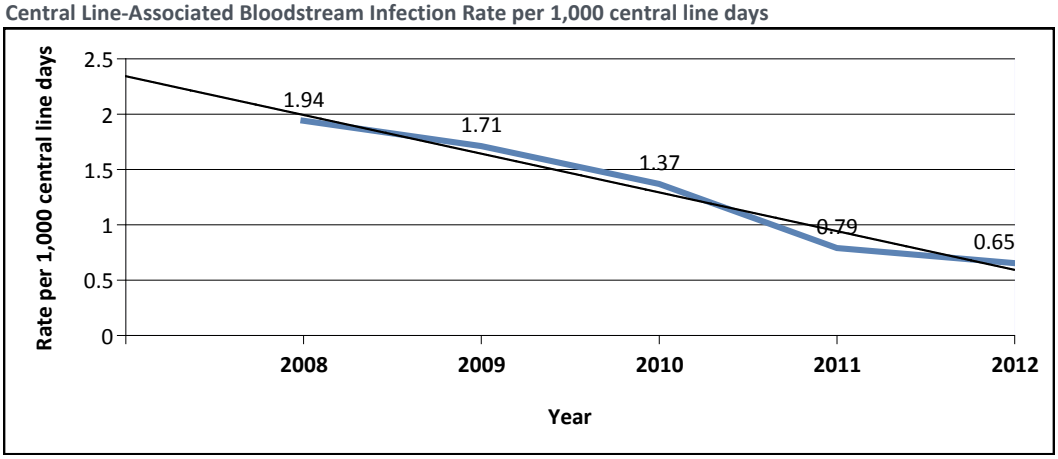
CROZER CHESTER MEDICAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	16	12.08	1.32	0.76 - 2.15	Same as
2009	31	15.28	2.03	1.38 - 2.88	Worse
2010	26	15.61	1.67	1.09 - 2.44	Worse
2011	12	13.10	0.92	0.47 - 1.6	Same as
2012	8	9.82	0.81	0.35 - 1.61	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.80	0.00	0 - 4.58	Same as
2009	2	2.57	0.78	0.09 - 2.81	Same as
2010	4	1.51	2.65	0.71 - 6.78	Same as
2011	1	1.20	0.83	0.01 - 4.62	Same as
2012	1	0.86	1.16	0.02 - 6.45	Same as

CROZER CHESTER MEDICAL CENTER SPRINGFIELD

NHSN ID: 11851

Hospital type: Acute care general hospital

Number of licensed beds (2012): 33

Number of reported Healthcare-Associated Infections:

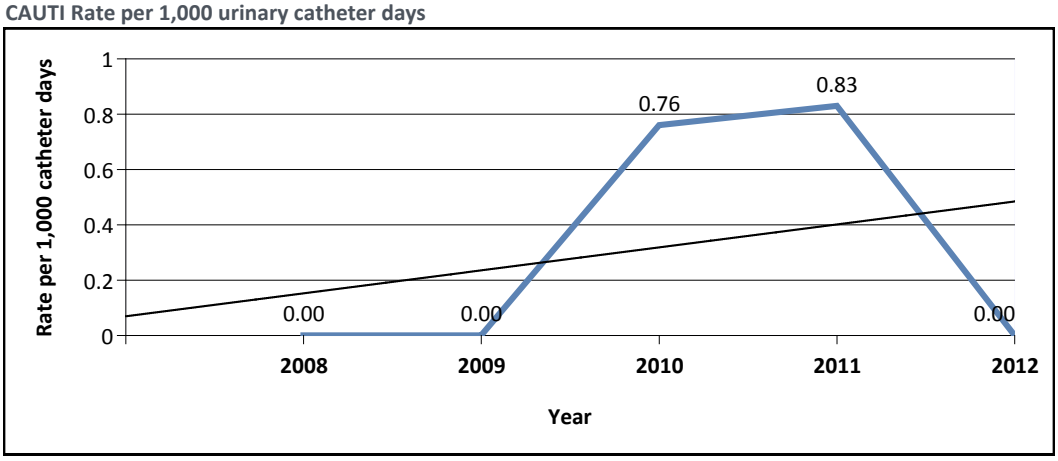
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,340	0	0	1	0	1	0	1	0	0	0	0.90
2009	7,121	1	0	4	0	0	0	1	0	0	0	0.84
2010	6,843	1	0	1	0	0	0	1	0	1	0	0.58
2011	5,467	0	0	2	0	0	0	0	0	1	0	0.55
2012	4,316	0	0	1	0	0	0	2	0	0	0	0.70

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	1.46	0.00	0 - 2.52	Same as
2009	0	2.26	0.00	0 - 1.63	Same as
2010	1	2.32	0.43	0.01 - 2.4	Same as
2011	1	2.03	0.49	0.01 - 2.74	Same as
2012	0	2.09	0.00	0 - 1.76	Same as

CAUTI Rate per 1,000 urinary catheter days



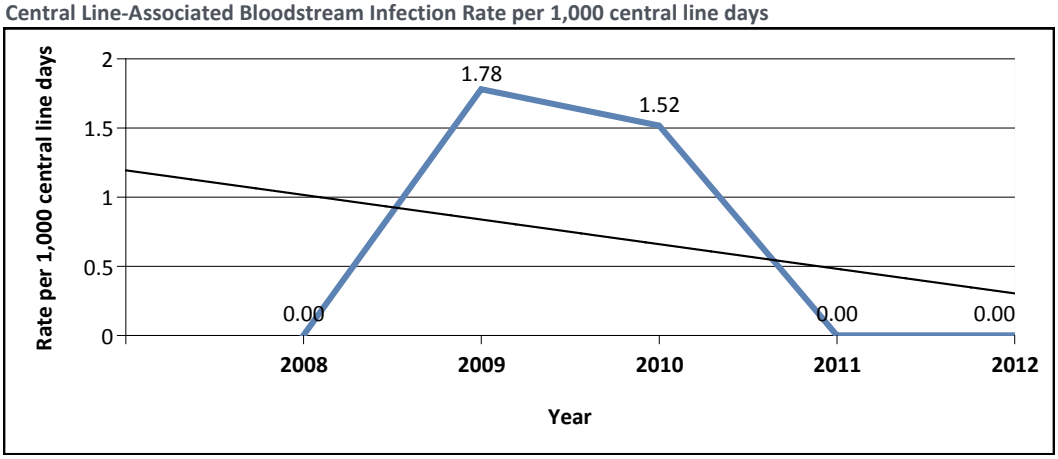
CROZER CHESTER MEDICAL CENTER SPRINGFIELD

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.50	0.00	0 - 7.4	Same as
2009	1	0.57	1.76	0.02 - 9.81	Same as
2010	1	0.60	1.66	0.02 - 9.25	Same as
2011	0	0.41	0.00	0 - 8.87	Same as
2012	0	0.27	0.00	0 - 13.45	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



CROZER CHESTER MEDICAL CENTER TAYLOR

NHSN ID: 11932

Hospital type: Acute care general hospital

Number of licensed beds (2012): 144

Number of reported Healthcare-Associated Infections:

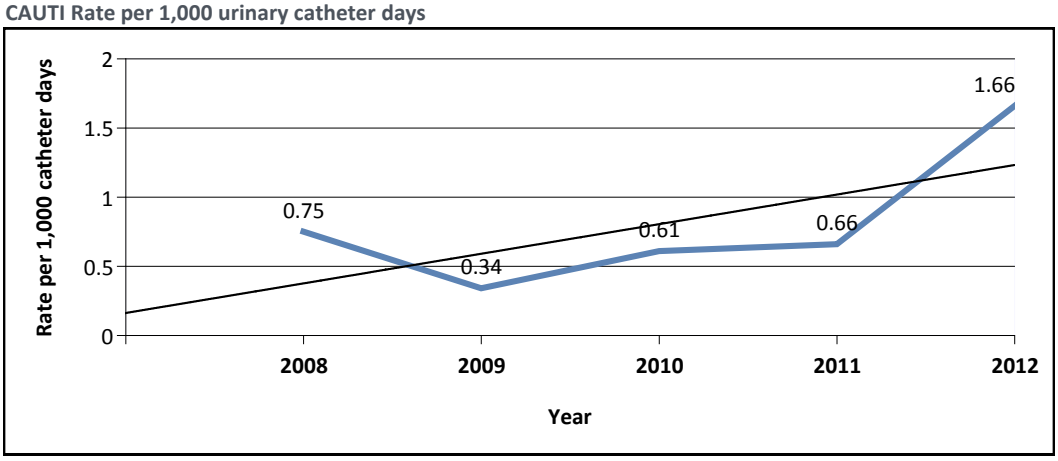
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	20,053	2	0	22	0	1	0	3	1	4	0	1.65
2009	39,941	5	0	18	0	1	0	15	3	6	0	1.20
2010	38,591	9	0	16	0	0	0	9	3	6	0	1.11
2011	35,178	9	0	36	0	2	0	15	2	11	0	2.13
2012	28,514	5	0	18	0	2	0	8	3	13	0	1.72

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	4	12.00	0.33	0.09 - 0.85	Better
2009	3	14.31	0.21	0.04 - 0.61	Better
2010	5	14.52	0.34	0.11 - 0.8	Better
2011	5	12.75	0.39	0.13 - 0.91	Better
2012	9	10.08	0.89	0.41 - 1.69	Same as

CAUTI Rate per 1,000 urinary catheter days



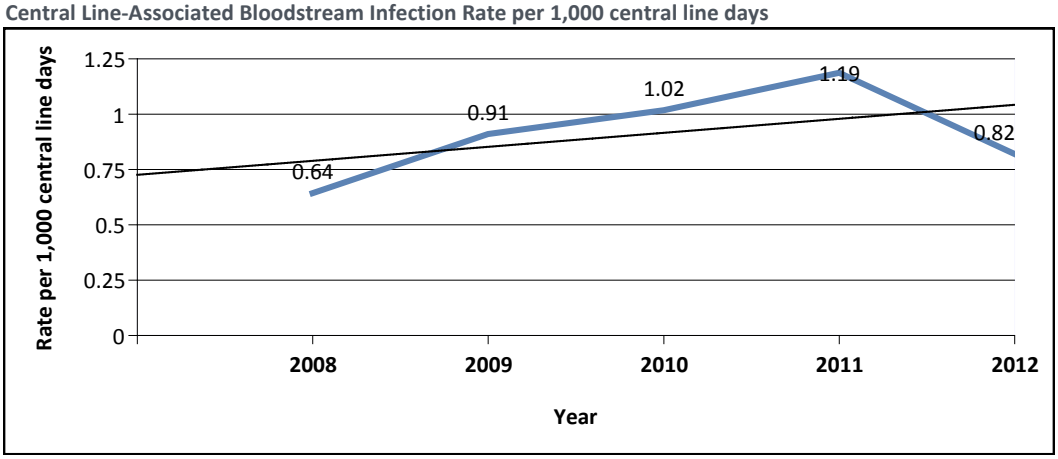
CROZER CHESTER MEDICAL CENTER TAYLOR

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	4.54	0.44	0.05 - 1.59	Same as
2009	5	4.92	1.02	0.33 - 2.37	Same as
2010	6	5.03	1.19	0.44 - 2.6	Same as
2011	7	5.14	1.36	0.55 - 2.8	Same as
2012	3	2.79	1.07	0.22 - 3.14	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



DANVILLE STATE HOSPITAL

NHSN ID: 11848

Hospital type: Psychiatric hospital

Number of licensed beds (2012): 178

Number of reported Healthcare-Associated Infections:

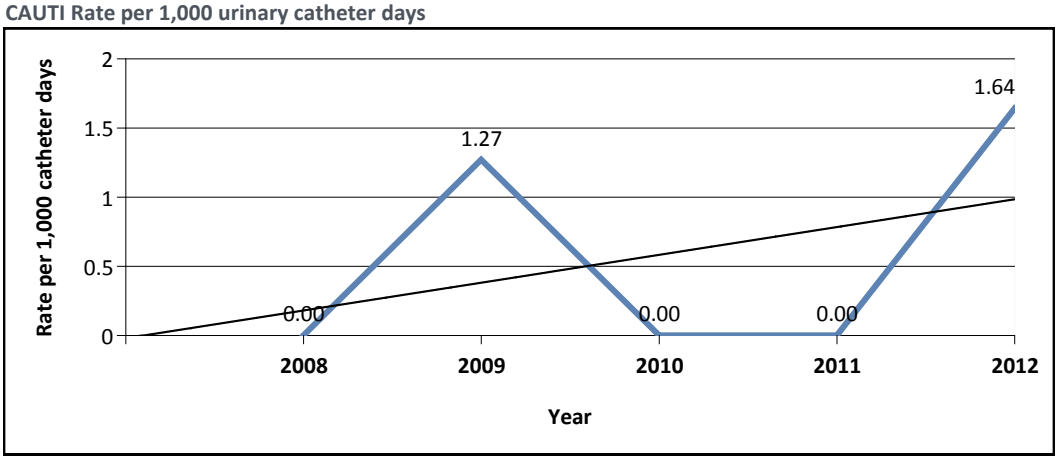
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	28,462	0	5	0	0	1	1	0	5	4	0	0.56
2009	59,652	0	7	3	0	3	0	0	7	8	0	0.47
2010	62,294	0	8	2	0	1	0	0	8	7	1	0.43
2011	60,873	0	11	2	0	1	0	0	15	8	0	0.61
2012	58,459	0	8	3	0	0	0	0	15	10	0	0.62

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	1.42	0.00	0 - 2.59	Same as
2009	1	1.32	0.76	0.01 - 4.21	Same as
2010	0	1.19	0.00	0 - 3.09	Same as
2011	0	0.28	0.00	0 - 13.22	Same as
2012	1	0.74	1.36	0.02 - 7.56	Same as

CAUTI Rate per 1,000 urinary catheter days



DELAWARE COUNTY MEMORIAL HOSPITAL

NHSN ID: 11972

Hospital type: Acute care general hospital

Number of licensed beds (2012): 225

Number of reported Healthcare-Associated Infections:

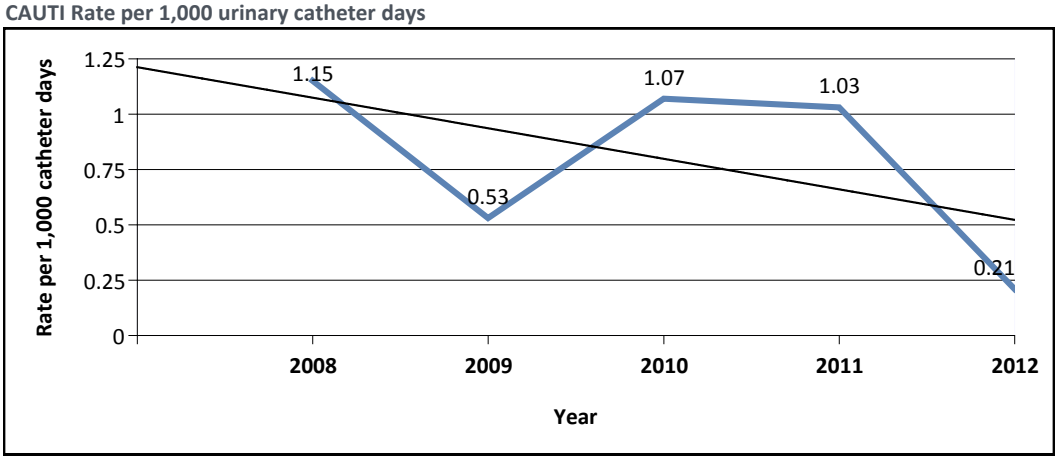
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	29,508	11	1	11	0	4	0	3	1	8	0	1.32
2009	57,618	4	0	16	0	5	0	12	0	9	0	0.80
2010	51,226	5	0	21	0	7	0	11	1	16	0	1.19
2011	48,197	7	0	14	0	4	0	16	2	13	0	1.16
2012	41,967	6	0	0	0	1	0	23	2	5	0	0.88

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	7	14.21	0.49	0.2 - 1.01	Same as
2009	6	25.10	0.24	0.09 - 0.52	Better
2010	12	19.65	0.61	0.32 - 1.07	Same as
2011	11	18.07	0.61	0.3 - 1.09	Same as
2012	2	17.52	0.11	0.01 - 0.41	Better

CAUTI Rate per 1,000 urinary catheter days



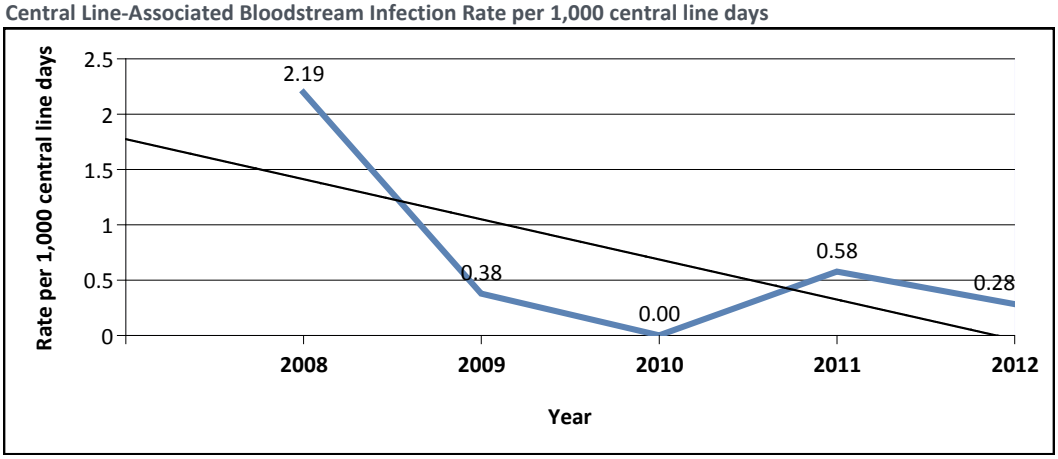
DELAWARE COUNTY MEMORIAL HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	8	5.30	1.51	0.65 - 2.98	Same as
2009	3	9.91	0.30	0.06 - 0.88	Better
2010	0	6.59	0.00	0 - 0.56	Better
2011	4	6.05	0.66	0.18 - 1.69	Same as
2012	2	5.73	0.35	0.04 - 1.26	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.37	0.00	0 - 9.91	Same as
2009	0	0.29	0.00	0 - 12.59	Same as
2010	0	0.39	0.00	0 - 9.48	Same as
2011	0	0.14	0.00	0 - 25.7	Same as
2012	0	0.21	0.00	0 - 17.54	Same as

Standardized Infection Ratio - Specialty Care Area

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	3.88	0.52	0.06 - 1.86	Same as
2009	1	3.32	0.30	0 - 1.67	Same as
2010	5	2.59	1.93	0.62 - 4.51	Same as
2011	3	2.57	1.17	0.23 - 3.41	Same as
2012	1	0.80	1.25	0.02 - 6.93	Same as

DEVEREUX CHILDRENS BEHAVIORAL HEALTH INSTITUTE

NHSN ID: 12738

Hospital type: Psychiatric hospital

Number of licensed beds (2012): 33

Number of reported Healthcare-Associated Infections:

Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008												
2009	12,045	0	0	0	0	0	0	0	0	0	0	0.00
2010	8,705	0	4	0	0	0	0	0	0	0	0	0.46
2011	9,054	0	12	0	0	0	0	0	0	0	0	1.33
2012	8,883	0	3	0	0	0	0	0	1	3	0	0.79

DIVINE PROVIDENCE HOSPITAL

NHSN ID: 11743

Hospital type: Acute care general hospital

Number of licensed beds (2012): 31

Number of reported Healthcare-Associated Infections:

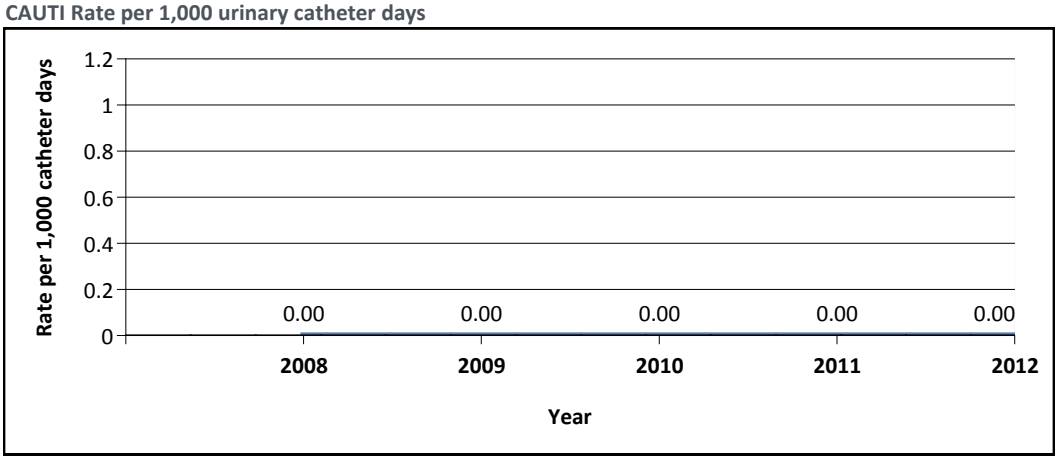
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	2,352	0	0	0	0	0	0	0	1	0	0	0.43
2009	4,431	0	0	1	0	0	0	0	0	1	0	0.45
2010	5,569	0	0	0	0	1	0	0	0	1	0	0.36
2011	6,529	0	1	0	0	0	0	0	1	1	0	0.46
2012	6,986	0	0	0	0	0	1	0	0	1	0	0.29

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.04	0.00	0 - 89.48	Same as
2009	0	0.01	0.00	0 - 422.34	Same as
2010	0	0.02	0.00	0 - 179.1	Same as
2011	0	0.02	0.00	0 - 173.68	Same as
2012	0	0.03	0.00	0 - 146.22	Same as

CAUTI Rate per 1,000 urinary catheter days



DOYLESTOWN HOSPITAL

NHSN ID: 10190

Hospital type: Acute care general hospital

Number of licensed beds (2012): 238

Number of reported Healthcare-Associated Infections:

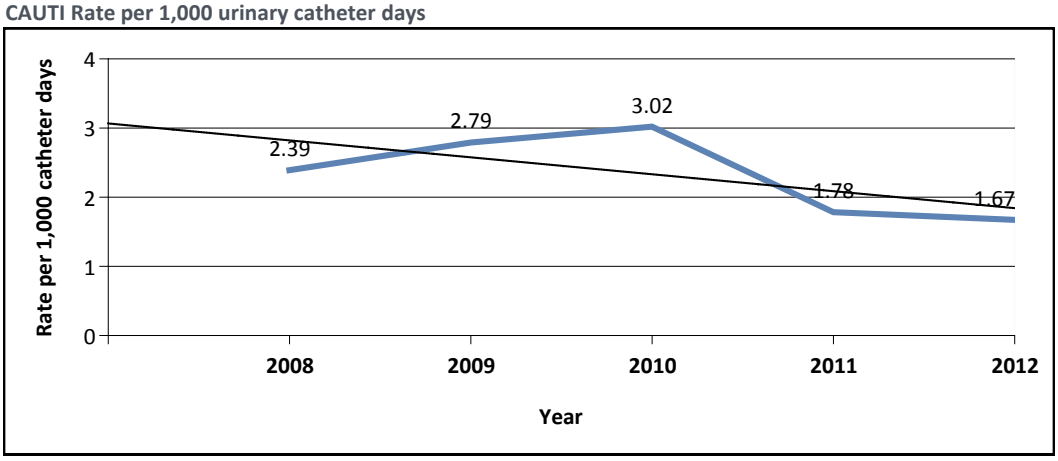
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	25,813	4	2	23	1	12	1	18	2	23	0	3.33
2009	54,593	5	3	33	0	19	0	27	5	43	1	2.49
2010	51,572	4	3	25	2	18	0	31	3	48	0	2.60
2011	53,945	0	3	31	0	15	0	27	0	24	0	1.85
2012	50,723	4	0	32	0	15	1	24	1	29	0	2.09

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	13	12.62	1.03	0.55 - 1.76	Same as
2009	20	11.59	1.73	1.05 - 2.66	Worse
2010	25	13.71	1.82	1.18 - 2.69	Worse
2011	15	10.26	1.46	0.82 - 2.41	Same as
2012	14	11.52	1.21	0.66 - 2.04	Same as

CAUTI Rate per 1,000 urinary catheter days



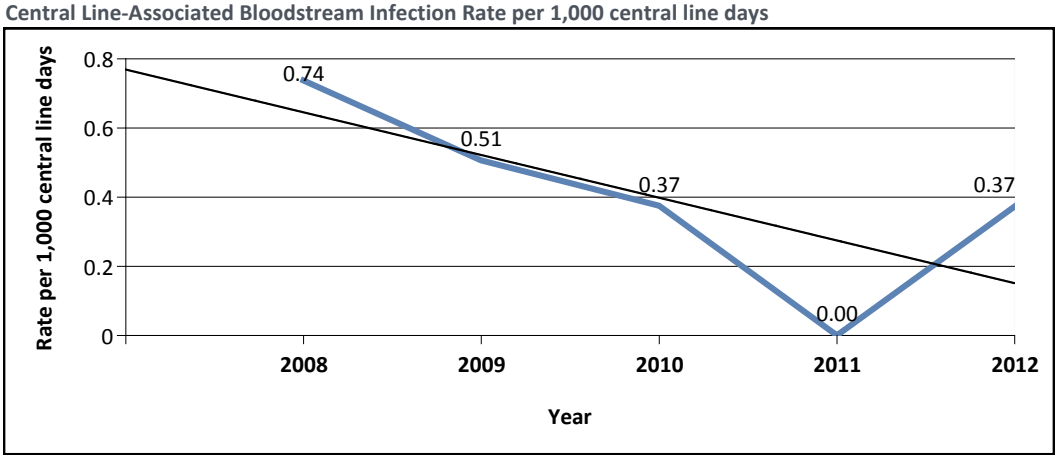
DOYLESTOWN HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	5.94	0.51	0.1 - 1.48	Same as
2009	5	8.31	0.60	0.19 - 1.4	Same as
2010	3	5.44	0.55	0.11 - 1.61	Same as
2011	0	4.56	0.00	0 - 0.8	Better
2012	3	5.84	0.51	0.1 - 1.5	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



DUBOIS REGIONAL MEDICAL CENTER

NHSN ID: 11606

Hospital type: Acute care general hospital

Number of licensed beds (2012): 214

Number of reported Healthcare-Associated Infections:

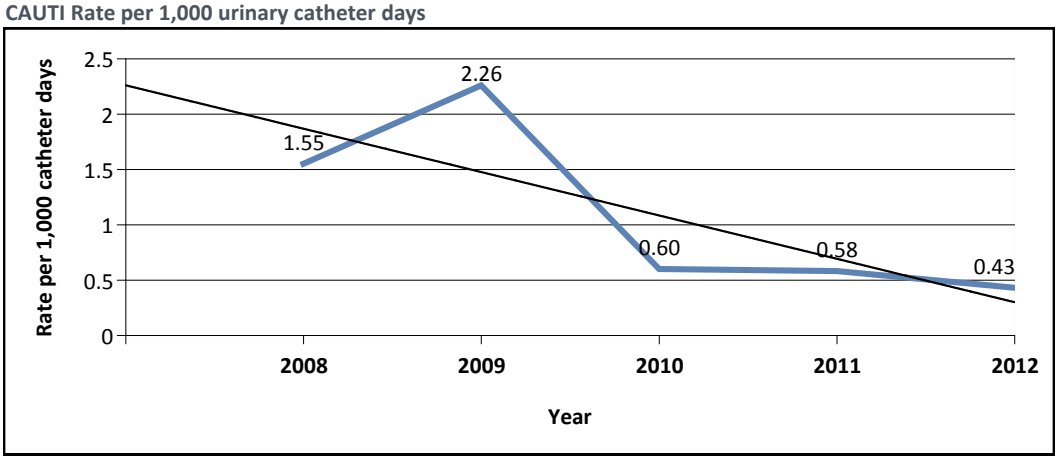
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	18,268	10	0	14	2	9	0	33	1	10	1	4.38
2009	46,698	7	11	31	8	29	0	46	5	29	3	3.62
2010	43,098	4	5	27	2	8	1	19	1	4	1	1.67
2011	41,223	6	4	16	2	8	2	26	3	10	0	1.87
2012	40,601	1	5	5	2	6	1	19	1	7	0	1.16

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	5	7.69	0.65	0.21 - 1.52	Same as
2009	15	10.74	1.40	0.78 - 2.3	Same as
2010	3	8.27	0.36	0.07 - 1.06	Same as
2011	3	6.12	0.49	0.1 - 1.43	Same as
2012	2	6.26	0.32	0.04 - 1.15	Same as

CAUTI Rate per 1,000 urinary catheter days



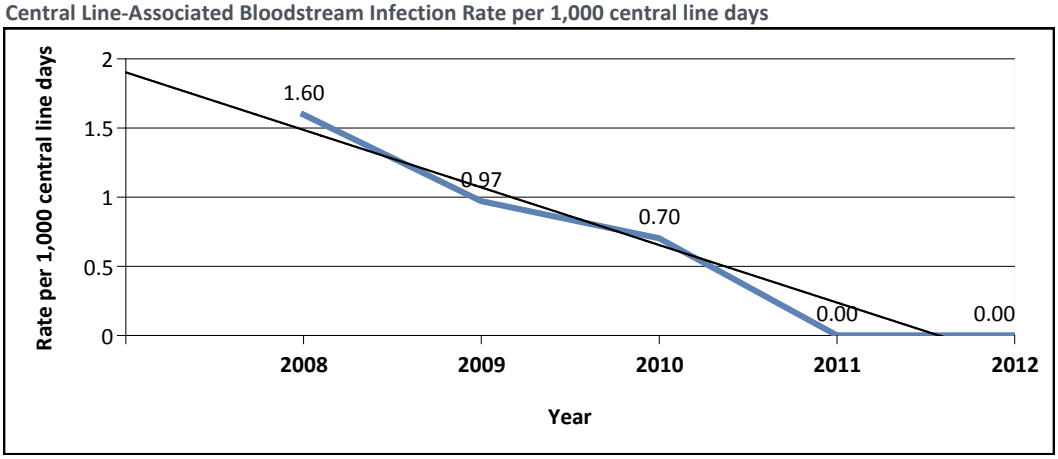
DUBOIS REGIONAL MEDICAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	4	3.65	1.10	0.29 - 2.81	Same as
2009	5	4.73	1.06	0.34 - 2.47	Same as
2010	3	3.06	0.98	0.2 - 2.86	Same as
2011	0	2.41	0.00	0 - 1.52	Same as
2012	0	2.51	0.00	0 - 1.46	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	0.56	3.57	0 - 12.9	Same as
2009	0	0.59	0.00	0 - 6.24	Same as
2010	0	0.33	0.00	0 - 11.24	Same as
2011	0	0.24	0.00	0 - 15.37	Same as
2012	0	0.39	0.00	0 - 9.49	Same as

EAGLEVILLE HOSPITAL

NHSN ID: 12965

Hospital type: Rehabilitation hospital

Number of licensed beds (2012): 83

Number of reported Healthcare-Associated Infections:

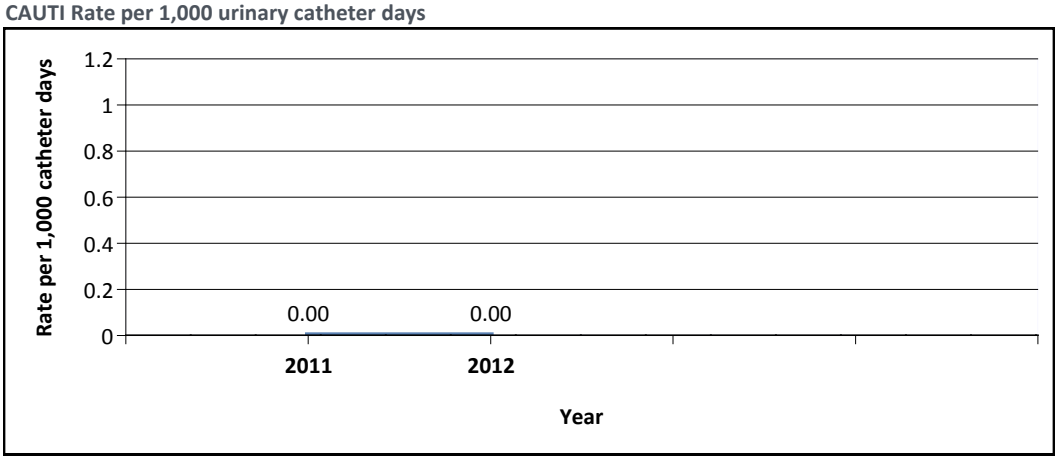
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	7,274	0	0	0	0	0	0	0	0	0	0	0.00
2009	13,134	0	0	0	0	0	0	0	0	0	0	0.00
2010	3,797	0	0	0	0	0	0	0	0	0	0	0.00
2011	6,561	0	0	0	0	0	0	0	0	0	0	0.00
2012	17,781	0	3	2	0	0	0	0	1	0	0	0.34

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008				-	
2009				-	
2010				-	
2011	0	0.02	0.00	0 - 215.79	Same as
2012	0	0.04	0.00	0 - 91.25	Same as

CAUTI Rate per 1,000 urinary catheter days



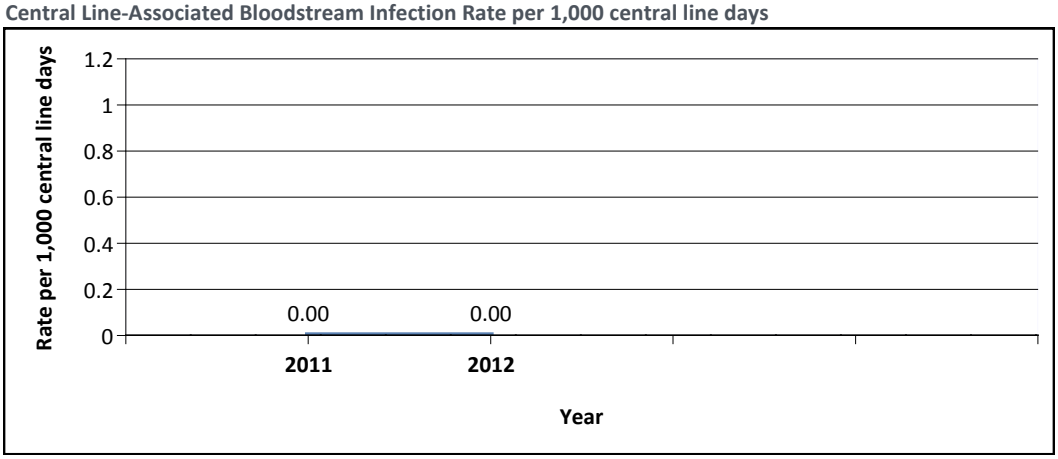
EAGLEVILLE HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008				-	
2009				-	
2010				-	
2011	0	0.02	0.00	0 - 182.56	Same as
2012	0	0.02	0.00	0 - 151	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



EASTERN REGIONAL MEDICAL CENTER

NHSN ID: 12348

Hospital type: Acute care general hospital

Number of licensed beds (2012): 66

Number of reported Healthcare-Associated Infections:

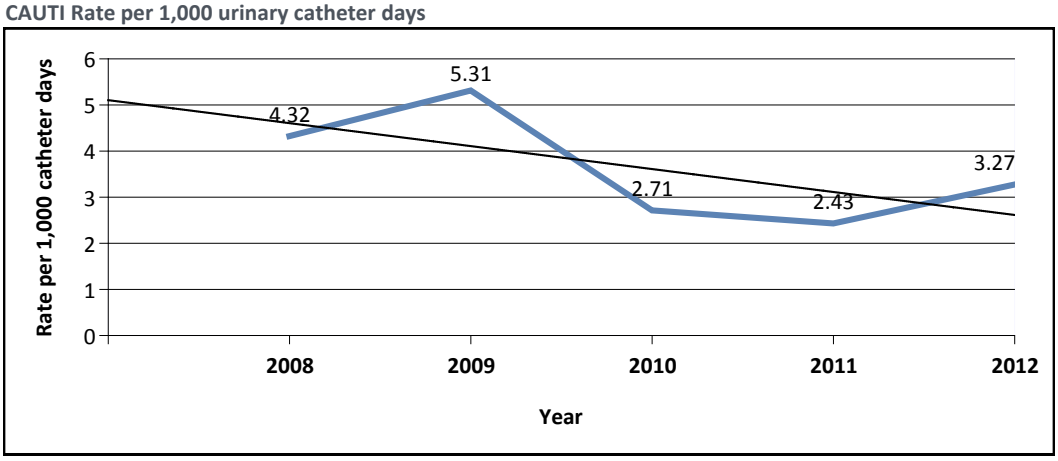
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,987	17	1	4	0	1	0	0	0	8	0	6.22
2009	10,328	51	0	3	5	6	0	5	1	12	1	8.13
2010	11,255	18	1	11	1	19	0	11	6	11	1	7.02
2011	13,007	21	1	26	5	21	0	12	1	16	0	7.92
2012	16,417	45	0	13	1	28	0	34	4	19	0	8.77

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	1.72	1.75	0.35 - 5.11	Same as
2009	9	2.74	3.29	1.5 - 6.24	Worse
2010	5	3.05	1.64	0.53 - 3.82	Same as
2011	5	2.50	2.00	0.65 - 4.67	Same as
2012	8	3.35	2.39	1.03 - 4.71	Worse

CAUTI Rate per 1,000 urinary catheter days



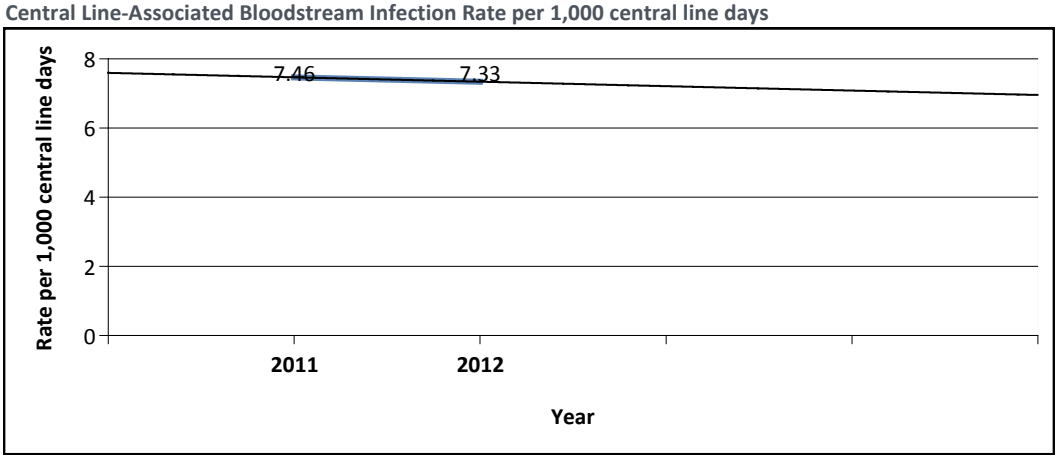
EASTERN REGIONAL MEDICAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008				-	
2009				-	
2010				-	
2011	2	0.11	17.68	1.99 - 63.85	Worse
2012	12	1.55	7.72	3.98 - 13.49	Worse

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Specialty Care Area

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	15	6.21	2.41	1.35 - 3.98	Worse
2009	50	50.42	0.99	0.74 - 1.31	Same as
2010	18	18.56	0.97	0.57 - 1.53	Same as
2011	18	17.52	1.03	0.61 - 1.62	Same as
2012	28	29.08	0.96	0.64 - 1.39	Same as

EASTON HOSPITAL

NHSN ID: 11929

Hospital type: Acute care general hospital

Number of licensed beds (2012): 254

Number of reported Healthcare-Associated Infections:

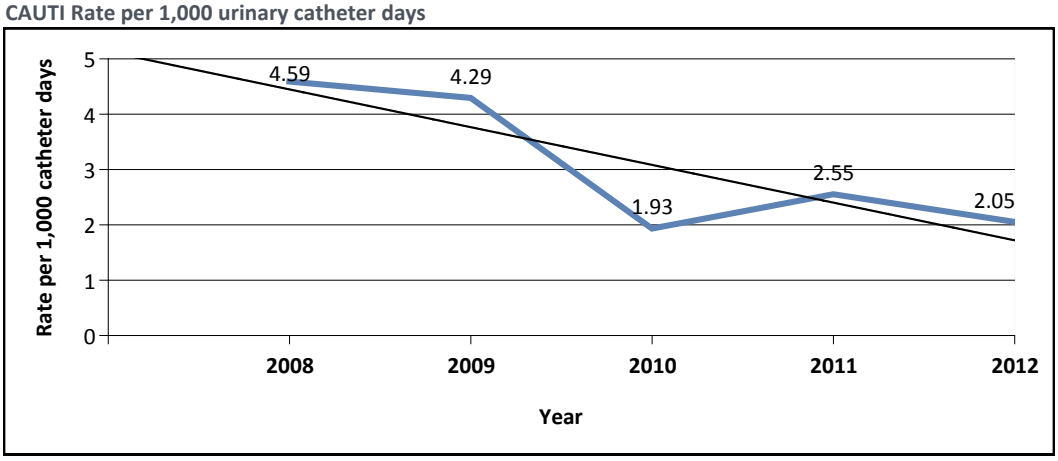
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	24,575	24	0	19	5	8	0	13	2	36	2	4.44
2009	54,492	26	8	18	6	21	2	47	9	63	6	3.78
2010	50,269	28	4	11	7	22	0	50	9	34	7	3.42
2011	48,864	4	3	23	7	19	0	48	7	34	4	3.05
2012	45,205	6	3	16	8	15	1	35	5	29	3	2.68

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	29	14.28	2.03	1.36 - 2.92	Worse
2009	54	27.73	1.95	1.46 - 2.54	Worse
2010	21	19.14	1.10	0.68 - 1.68	Same as
2011	27	17.86	1.51	1 - 2.2	Same as
2012	19	17.32	1.10	0.66 - 1.71	Same as

CAUTI Rate per 1,000 urinary catheter days



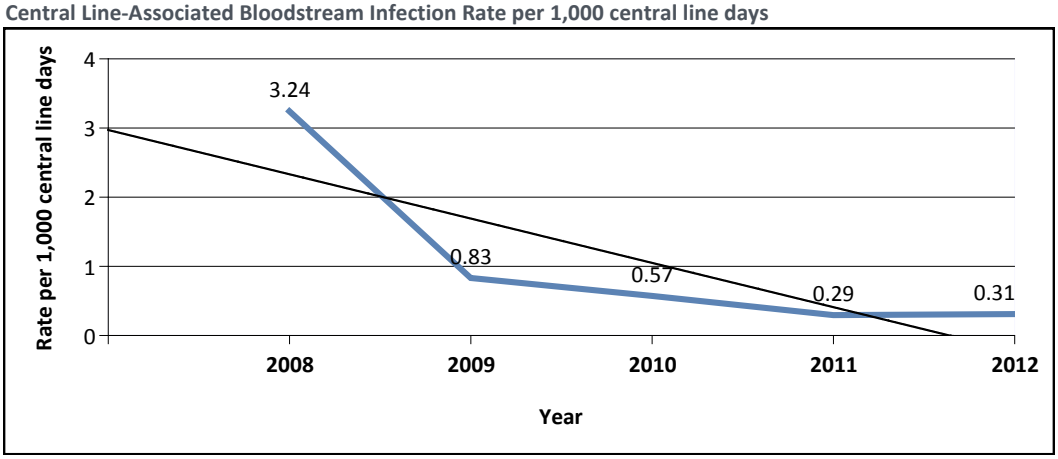
EASTON HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	10	4.48	2.23	1.07 - 4.1	Worse
2009	6	8.97	0.67	0.24 - 1.46	Same as
2010	4	5.93	0.67	0.18 - 1.73	Same as
2011	2	6.00	0.33	0.04 - 1.2	Same as
2012	2	5.16	0.39	0.04 - 1.4	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.02	0.00	0 - 180.34	Same as
2009				-	
2010	0	0.06	0.00	0 - 62.29	Same as
2011	0	0.02	0.00	0 - 192.79	Same as
2012	0	0.01	0.00	0 - 412.26	Same as

Standardized Infection Ratio - Specialty Care Area

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	2.58	1.16	0.23 - 3.4	Same as
2009	2	3.06	0.65	0.07 - 2.36	Same as
2010	3	2.33	1.29	0.26 - 3.76	Same as
2011	1	2.46	0.41	0.01 - 2.26	Same as
2012	1	2.29	0.44	0.01 - 2.43	Same as

EDGEWOOD SURGICAL HOSPITAL

NHSN ID: 12552

Hospital type: Acute care general hospital

Number of licensed beds (2012): 10

Number of reported Healthcare-Associated Infections:

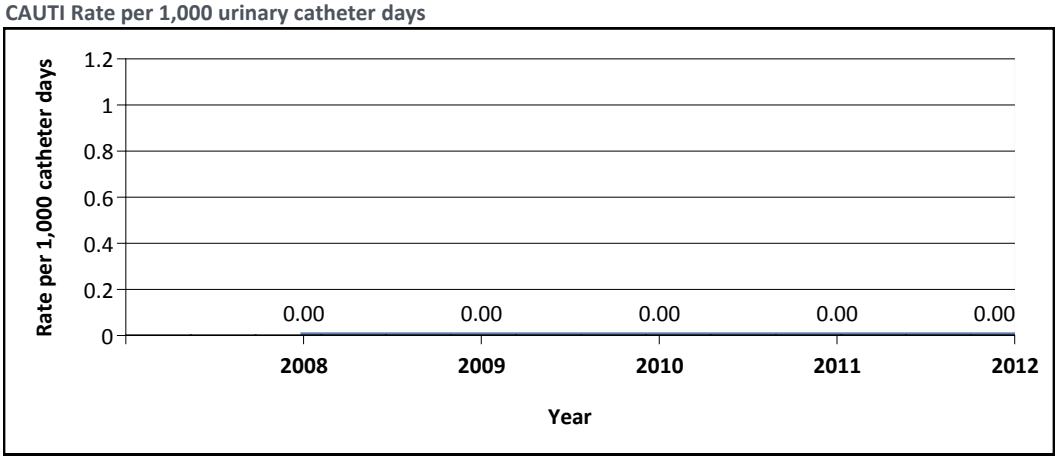
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	181	0	0	0	0	0	0	0	0	0	0	0.00
2009	386	0	0	0	0	0	0	0	0	0	0	0.00
2010	376	0	0	0	0	0	0	0	0	0	0	0.00
2011	373	0	0	0	0	0	0	0	0	0	0	0.00
2012	367	0	0	0	0	0	0	0	0	0	0	0.00

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.03	0.00	0 - 119.73	Same as
2009	0	0.10	0.00	0 - 37.87	Same as
2010	0	0.08	0.00	0 - 45.88	Same as
2011	0	0.04	0.00	0 - 102.93	Same as
2012	0	0.05	0.00	0 - 69.79	Same as

CAUTI Rate per 1,000 urinary catheter days



ELK REGIONAL HEALTH CENTER

NHSN ID: 11859

Hospital type: Acute care general hospital

Number of licensed beds (2012): 80

Number of reported Healthcare-Associated Infections:

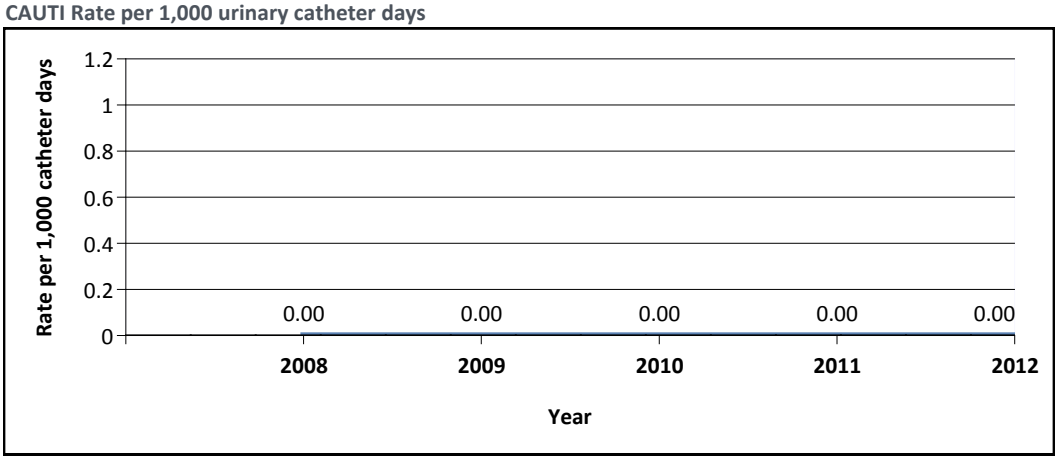
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	6,538	0	0	1	1	3	0	0	3	3	0	1.68
2009	14,263	0	4	10	0	2	1	3	0	0	0	1.40
2010	15,030	0	1	14	0	7	0	7	8	3	0	2.66
2011	14,320	0	6	6	0	0	0	6	7	1	1	1.89
2012	14,143	0	0	10	0	3	0	9	2	3	0	1.91

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	3.07	0.00	0 - 1.19	Same as
2009	0	4.77	0.00	0 - 0.77	Better
2010	0	5.09	0.00	0 - 0.72	Better
2011	0	3.21	0.00	0 - 1.14	Same as
2012	0	3.67	0.00	0 - 1	Better

CAUTI Rate per 1,000 urinary catheter days



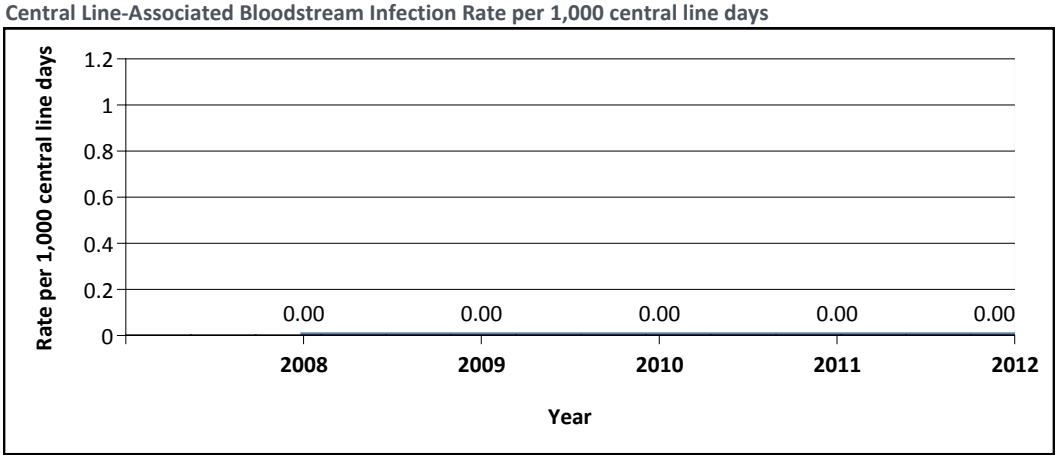
ELK REGIONAL HEALTH CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.41	0.00	0 - 9.05	Same as
2009	0	0.76	0.00	0 - 4.82	Same as
2010	0	0.66	0.00	0 - 5.58	Same as
2011	0	0.46	0.00	0 - 7.91	Same as
2012	0	0.19	0.00	0 - 19.66	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



ELLWOOD CITY HOSPITAL

NHSN ID: 11779

Hospital type: Acute care general hospital

Number of licensed beds (2012): 70

Number of reported Healthcare-Associated Infections:

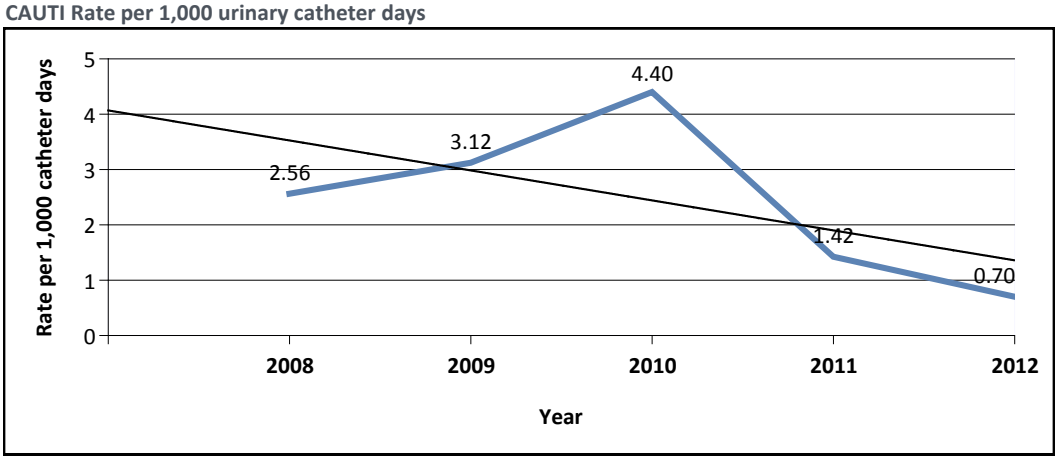
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	5,643	1	0	5	0	0	0	0	0	5	0	1.95
2009	11,930	0	0	5	0	4	0	10	2	8	0	2.43
2010	11,683	0	0	1	0	9	0	0	2	11	0	1.97
2011	11,686	0	0	1	0	5	0	1	0	7	0	1.20
2012	9,518	0	1	2	0	7	0	4	1	2	0	1.79

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	1.93	1.04	0.12 - 3.74	Same as
2009	5	2.60	1.93	0.62 - 4.5	Same as
2010	6	2.28	2.63	0.96 - 5.73	Same as
2011	2	1.64	1.22	0.14 - 4.39	Same as
2012	1	1.94	0.51	0.01 - 2.86	Same as

CAUTI Rate per 1,000 urinary catheter days



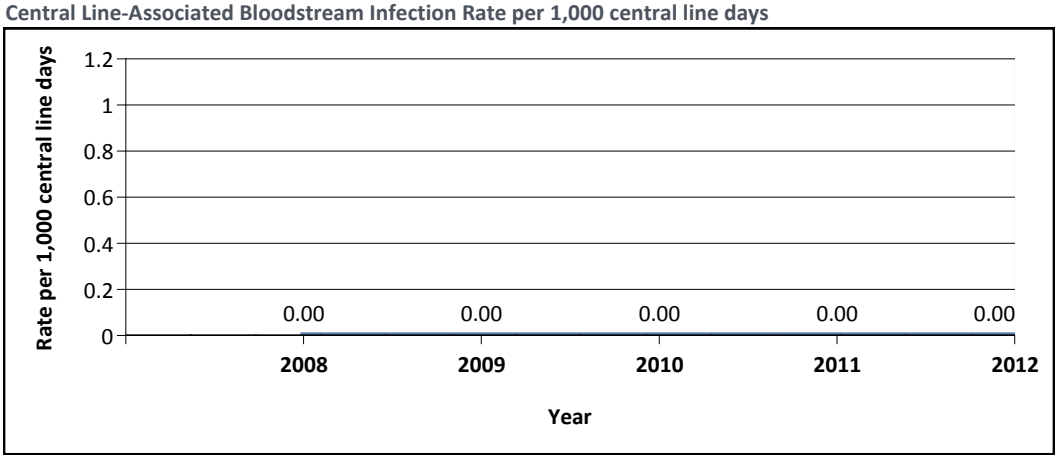
ELLWOOD CITY HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.31	0.00	0 - 11.8	Same as
2009	0	0.54	0.00	0 - 6.81	Same as
2010	0	0.48	0.00	0 - 7.59	Same as
2011	0	0.54	0.00	0 - 6.81	Same as
2012	0	0.36	0.00	0 - 10.08	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



ENDLESS MOUNTAINS HEALTH SYSTEMS

NHSN ID: 11817

Hospital type: Critical access hospital

Number of licensed beds (2012): 21

Number of reported Healthcare-Associated Infections:

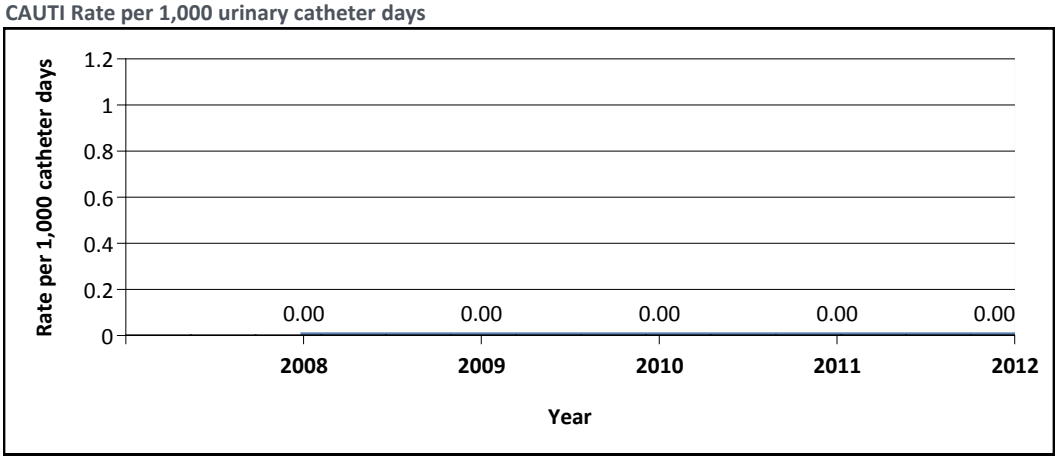
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	2,001	0	0	0	0	0	0	0	0	0	0	0.00
2009	3,918	0	0	0	0	1	0	1	1	0	0	0.77
2010	3,421	0	0	0	0	0	0	2	0	0	0	0.58
2011	3,542	0	0	0	0	0	0	1	0	0	0	0.28
2012	3,440	0	0	0	0	0	0	0	0	0	0	0.00

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.97	0.00	0 - 3.8	Same as
2009	0	1.12	0.00	0 - 3.27	Same as
2010	0	1.03	0.00	0 - 3.56	Same as
2011	0	0.83	0.00	0 - 4.42	Same as
2012	0	0.90	0.00	0 - 4.07	Same as

CAUTI Rate per 1,000 urinary catheter days



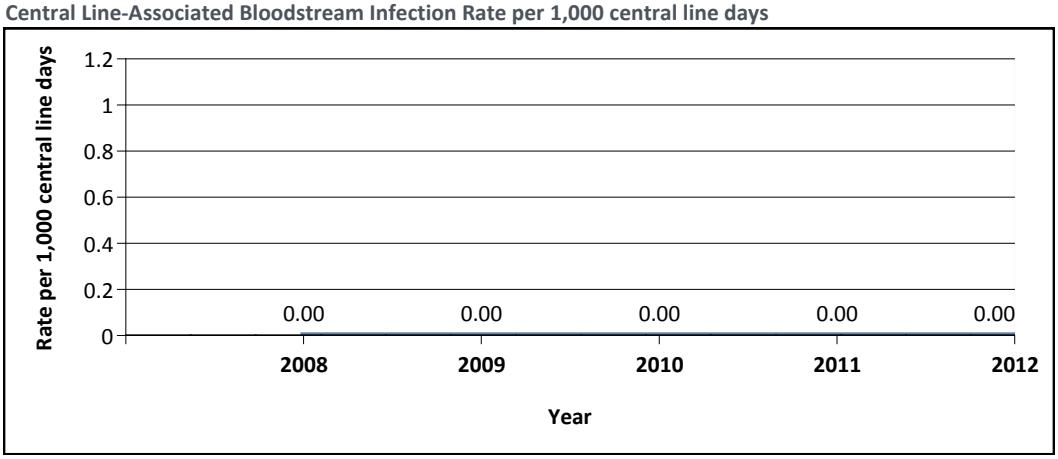
ENDLESS MOUNTAINS HEALTH SYSTEMS

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.10	0.00	0 - 35.36	Same as
2009	0	0.17	0.00	0 - 22.03	Same as
2010	0	0.07	0.00	0 - 49.01	Same as
2011	0	0.11	0.00	0 - 34.5	Same as
2012	0	0.07	0.00	0 - 52.45	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



EPHRATA COMMUNITY HOSPITAL

NHSN ID: 11764

Hospital type: Acute care general hospital

Number of licensed beds (2012): 130

Number of reported Healthcare-Associated Infections:

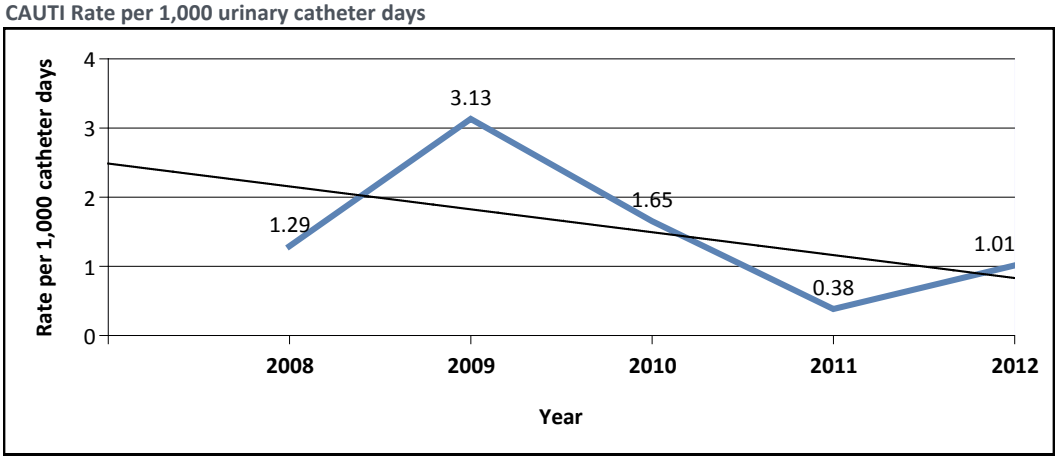
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	15,859	2	0	0	0	4	0	10	0	5	0	1.32
2009	35,026	3	0	19	0	5	0	19	0	29	0	2.14
2010	29,198	3	0	10	0	5	1	20	2	11	0	1.78
2011	28,104	1	1	3	0	8	1	15	1	6	0	1.28
2012	25,852	2	0	12	0	6	0	21	0	8	0	1.90

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	5.68	0.53	0.11 - 1.54	Same as
2009	17	8.76	1.94	1.13 - 3.11	Worse
2010	7	7.02	1.00	0.4 - 2.05	Same as
2011	2	6.62	0.30	0.03 - 1.09	Same as
2012	7	9.72	0.72	0.29 - 1.48	Same as

CAUTI Rate per 1,000 urinary catheter days



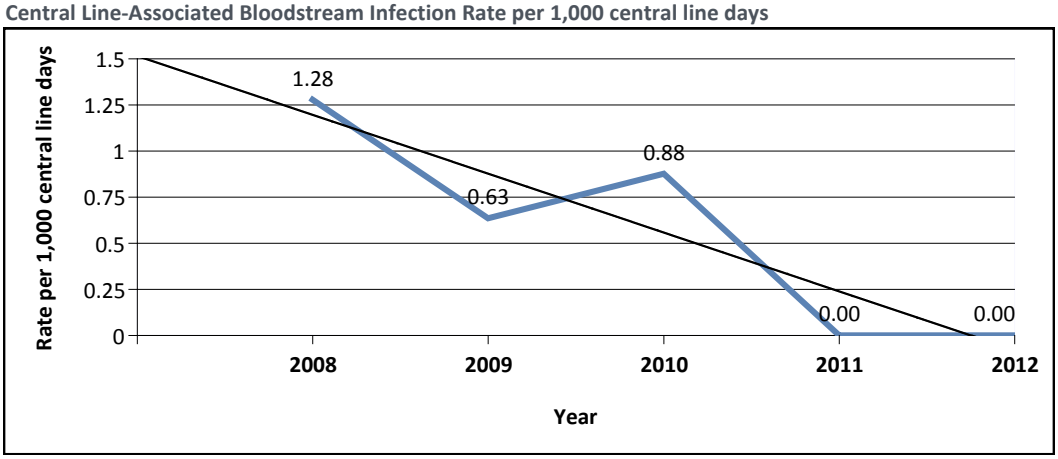
EPHRATA COMMUNITY HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	2.23	0.90	0.1 - 3.24	Same as
2009	2	3.08	0.65	0.07 - 2.35	Same as
2010	2	1.71	1.17	0.13 - 4.23	Same as
2011	0	1.41	0.00	0 - 2.6	Same as
2012	0	1.72	0.00	0 - 2.13	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.07	0.00	0 - 50.96	Same as
2009	0	0.09	0.00	0 - 39.14	Same as
2010	0	0.19	0.00	0 - 19.54	Same as
2011	0	0.34	0.00	0 - 10.67	Same as
2012	0	0.12	0.00	0 - 30.11	Same as

EVANGELICAL COMMUNITY HOSPITAL

NHSN ID: 11701

Hospital type: Acute care general hospital

Number of licensed beds (2012): 130

Number of reported Healthcare-Associated Infections:

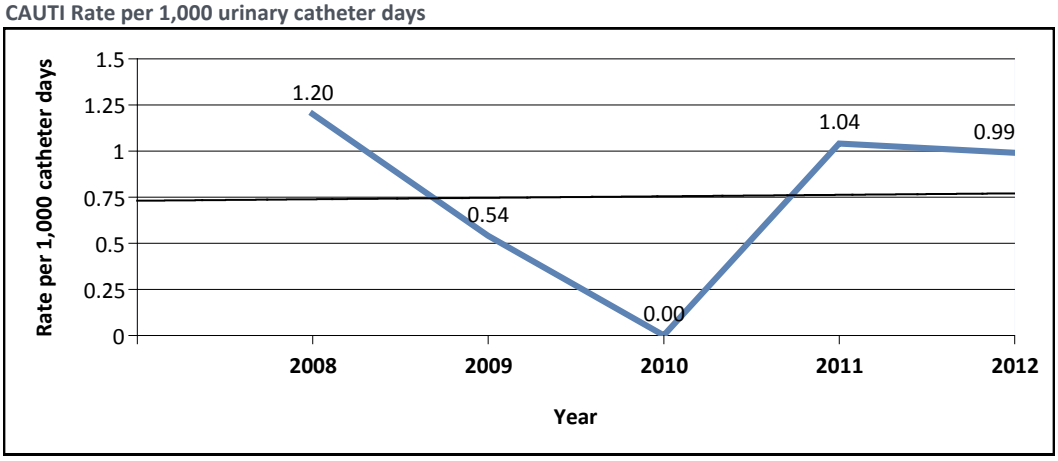
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	11,968	0	0	3	0	1	0	6	1	7	0	1.50
2009	22,351	1	0	7	0	5	0	25	0	11	0	2.19
2010	19,122	1	0	10	0	3	0	34	1	4	0	2.77
2011	21,474	0	1	2	3	7	0	35	0	10	0	2.70
2012	21,725	2	2	2	0	3	0	43	4	11	0	3.08

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	5	9.02	0.55	0.18 - 1.29	Same as
2009	4	11.82	0.34	0.09 - 0.87	Better
2010	0	7.87	0.00	0 - 0.47	Better
2011	5	8.15	0.61	0.2 - 1.43	Same as
2012	4	7.53	0.53	0.14 - 1.36	Same as

CAUTI Rate per 1,000 urinary catheter days



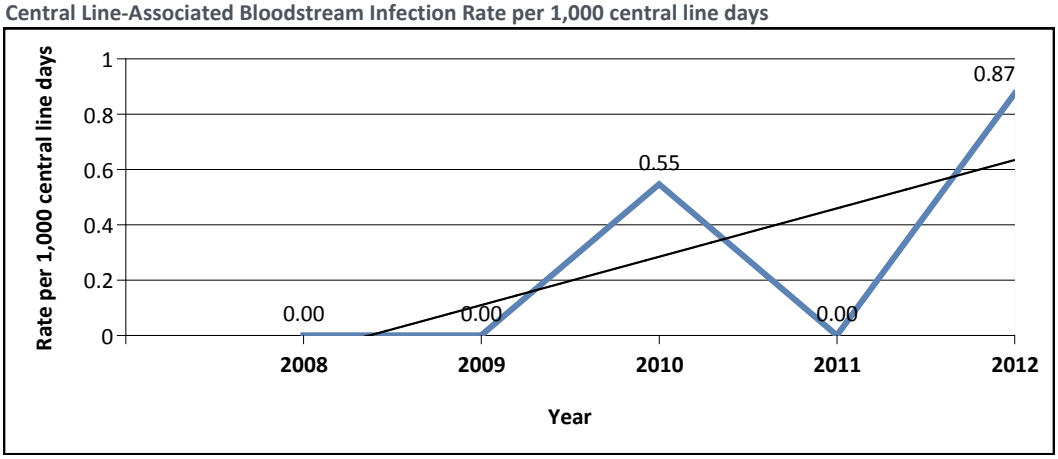
EVANGELICAL COMMUNITY HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	1.50	0.00	0 - 2.44	Same as
2009	0	1.94	0.00	0 - 1.89	Same as
2010	1	1.33	0.75	0.01 - 4.17	Same as
2011	0	1.65	0.00	0 - 2.23	Same as
2012	1	0.76	1.32	0.02 - 7.32	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



EXCELA HEALTH FRICK HOSPITAL

NHSN ID: 11639

Hospital type: Acute care general hospital

Number of licensed beds (2012): 102

Number of reported Healthcare-Associated Infections:

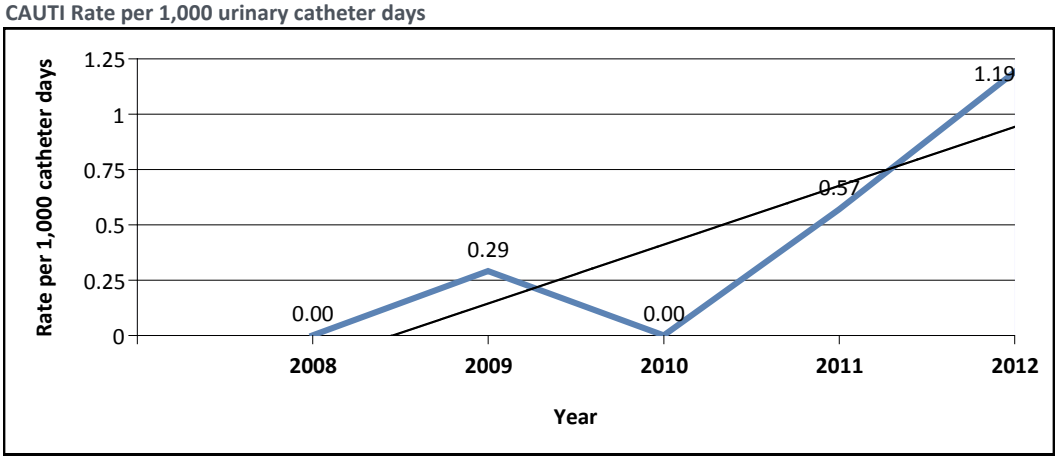
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	11,183	0	0	3	0	3	0	6	0	0	0	1.07
2009	22,069	1	0	9	0	6	0	13	3	2	0	1.54
2010	15,584	0	1	11	0	0	0	2	1	2	0	1.09
2011	14,998	2	0	8	0	4	0	3	1	6	0	1.60
2012	12,696	2	0	5	0	1	0	3	1	4	0	1.26

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	4.88	0.00	0 - 0.75	Better
2009	1	5.59	0.18	0 - 0.99	Better
2010	0	5.41	0.00	0 - 0.68	Better
2011	2	4.53	0.44	0.05 - 1.59	Same as
2012	3	3.49	0.86	0.17 - 2.51	Same as

CAUTI Rate per 1,000 urinary catheter days



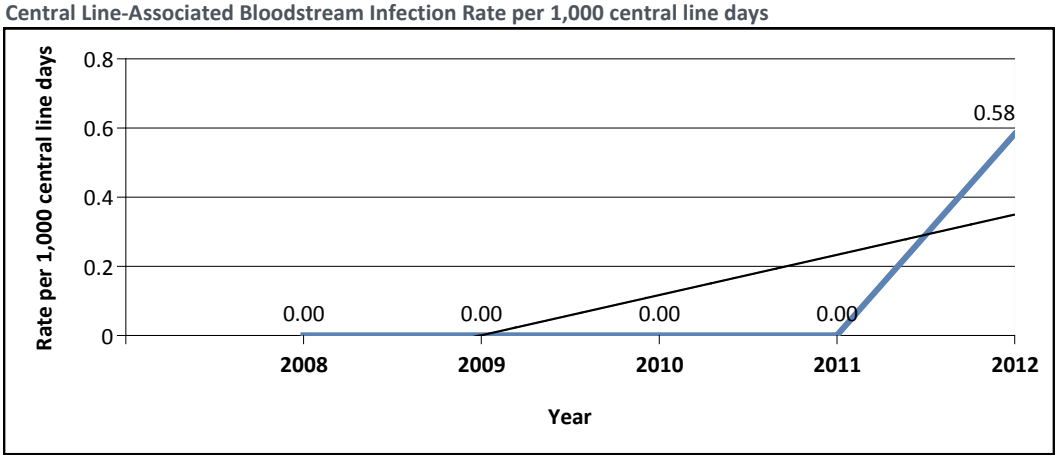
EXCELA HEALTH FRICK HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	2.09	0.00	0 - 1.75	Same as
2009	0	2.59	0.00	0 - 1.42	Same as
2010	0	1.78	0.00	0 - 2.06	Same as
2011	0	1.45	0.00	0 - 2.53	Same as
2012	1	1.21	0.82	0.01 - 4.58	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



EXCELA HEALTH LATROBE HOSPITAL

NHSN ID: 11651

Hospital type: Acute care general hospital

Number of licensed beds (2012): 188

Number of reported Healthcare-Associated Infections:

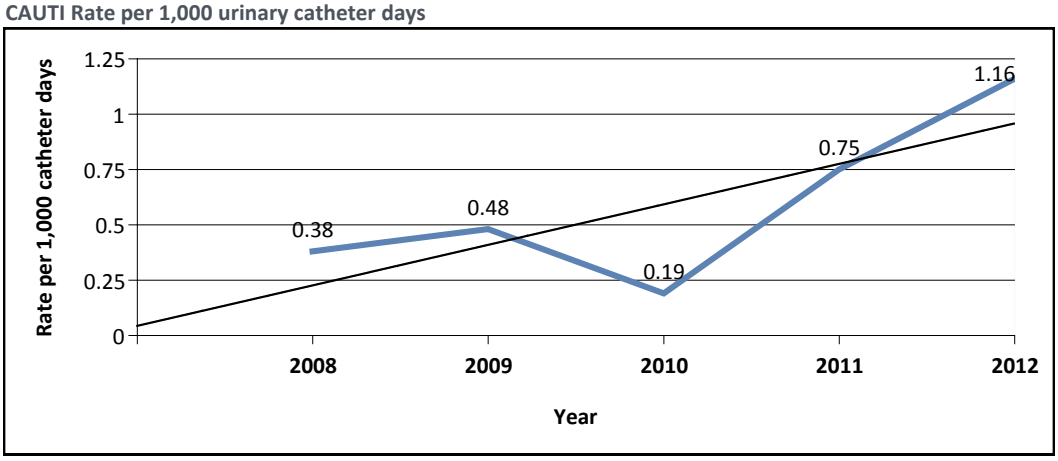
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	20,892	4	0	5	0	2	0	16	1	3	0	1.48
2009	44,015	4	0	10	0	6	0	22	3	12	0	1.30
2010	30,030	6	0	10	0	2	0	28	3	6	0	1.83
2011	28,678	10	1	8	1	7	0	23	1	13	0	2.23
2012	24,746	4	0	8	1	6	0	18	1	16	0	2.18

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	12.01	0.17	0.02 - 0.6	Better
2009	5	23.11	0.22	0.07 - 0.51	Better
2010	2	18.31	0.11	0.01 - 0.39	Better
2011	8	19.60	0.41	0.18 - 0.8	Better
2012	9	14.83	0.61	0.28 - 1.15	Same as

CAUTI Rate per 1,000 urinary catheter days



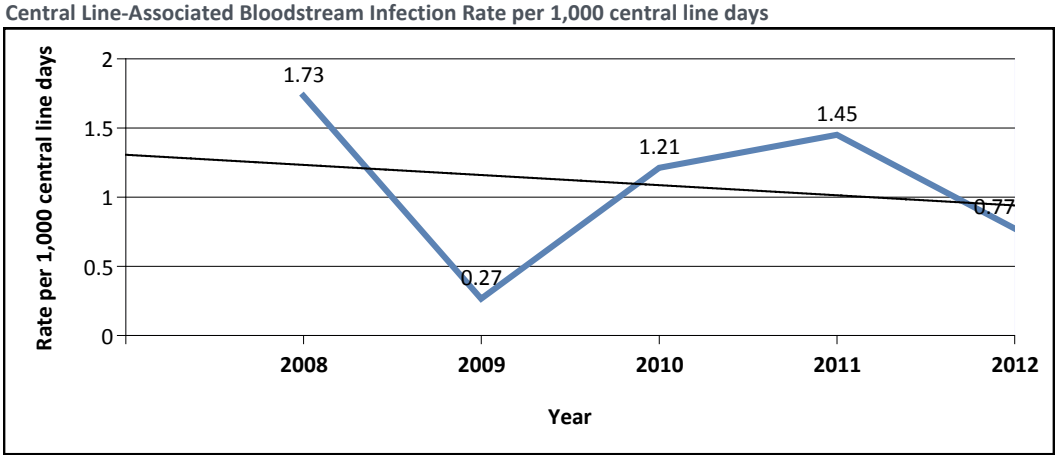
EXCELA HEALTH LATROBE HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	4	3.32	1.21	0.32 - 3.09	Same as
2009	1	5.29	0.19	0 - 1.05	Same as
2010	5	3.54	1.41	0.46 - 3.3	Same as
2011	6	3.65	1.64	0.6 - 3.57	Same as
2012	2	1.94	1.03	0.12 - 3.71	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Specialty Care Area

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.90	0.00	0 - 4.06	Same as
2009	0	1.35	0.00	0 - 2.72	Same as
2010	1	0.45	2.22	0.03 - 12.36	Same as
2011	1	0.75	1.34	0.02 - 7.45	Same as
2012	0	0.59	0.00	0 - 6.19	Same as

EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL

NHSN ID: 11637

Hospital type: Acute care general hospital

Number of licensed beds (2012): 364

Number of reported Healthcare-Associated Infections:

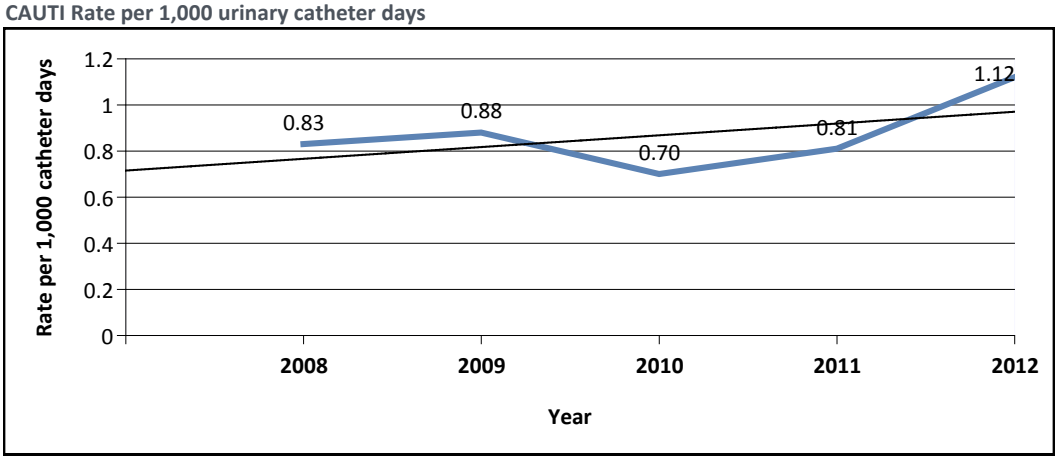
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	65,649	6	0	14	0	6	0	7	3	16	0	0.79
2009	136,642	8	1	35	4	9	0	32	9	37	0	0.99
2010	95,320	8	1	20	2	16	0	40	11	37	3	1.45
2011	94,631	11	3	22	1	10	0	33	0	27	0	1.13
2012	87,500	16	0	15	0	13	0	39	5	30	1	1.36

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	12	33.53	0.36	0.18 - 0.63	Better
2009	23	57.56	0.40	0.25 - 0.6	Better
2010	15	37.56	0.40	0.22 - 0.66	Better
2011	17	35.56	0.48	0.28 - 0.77	Better
2012	20	33.25	0.60	0.37 - 0.93	Better

CAUTI Rate per 1,000 urinary catheter days



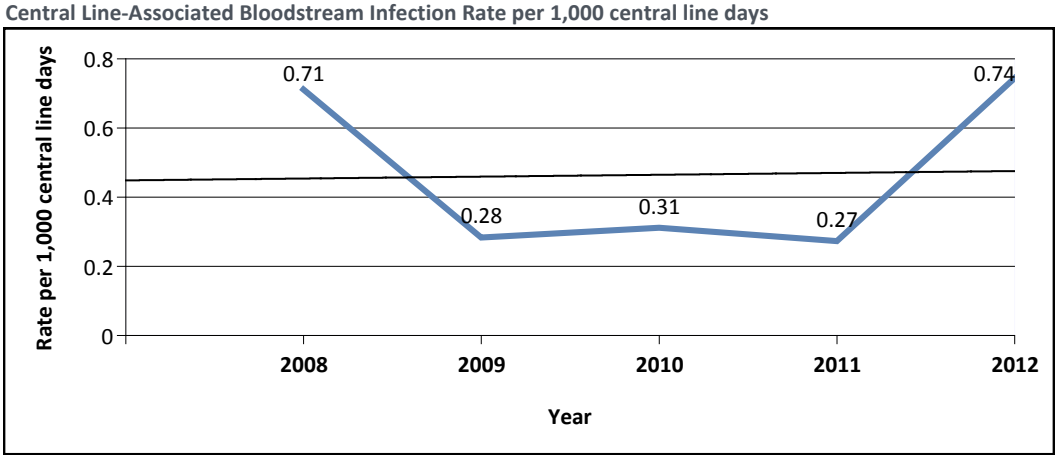
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	6	12.17	0.49	0.18 - 1.07	Same as
2009	5	23.04	0.22	0.07 - 0.51	Better
2010	6	15.79	0.38	0.14 - 0.83	Better
2011	5	15.61	0.32	0.1 - 0.75	Better
2012	12	13.04	0.92	0.47 - 1.61	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



FAIRMOUNT BEHAVIORAL HEALTH SYSTEM

NHSN ID: 12565

Hospital type: Psychiatric hospital

Number of licensed beds (2012): 172

Number of reported Healthcare-Associated Infections:

Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008		0	75	0	0	0	10	0	9	33	0	
2009	63,070	0	119	0	0	1	14	0	1	0	0	2.14
2010	48,188	0	104	0	0	0	12	0	7	0	0	2.55
2011	41,349	0	31	0	0	0	4	0	3	0	0	0.92
2012	78,553	0	3	0	0	0	0	0	2	1	0	0.08

FIRST HOSPITAL OF WYOMING VALLEY

NHSN ID: 12050

Hospital type: Psychiatric hospital

Number of licensed beds (2012): 107

Number of reported Healthcare-Associated Infections:

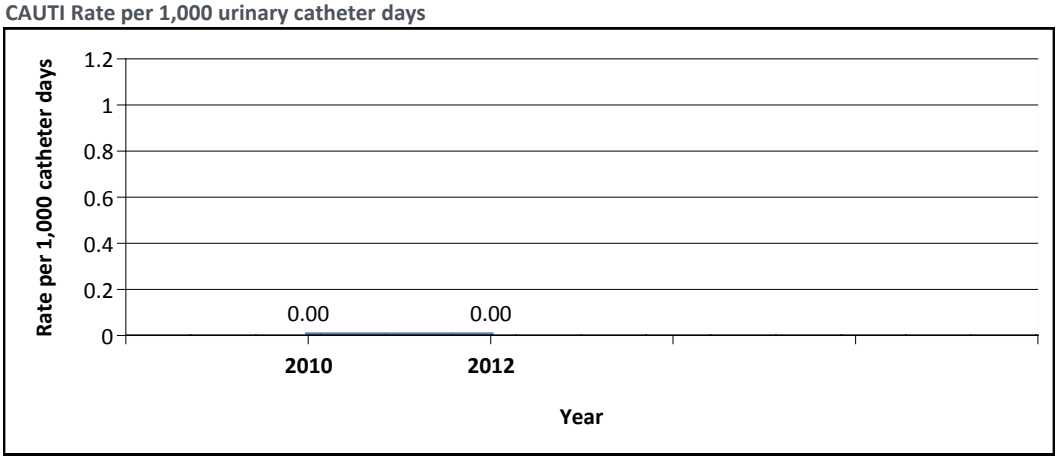
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	14,198	0	0	0	0	0	0	0	0	0	0	0.00
2009	31,062	0	0	0	0	0	0	0	0	0	0	0.00
2010	32,369	0	0	0	0	0	0	0	0	0	0	0.00
2011	33,733	0	0	0	0	0	0	0	0	0	0	0.00
2012	33,278	0	0	0	0	0	0	0	0	0	0	0.00

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008				-	
2009				-	
2010	0	0.02	0.00	0 - 156.99	Same as
2011				-	
2012	0	0.01	0.00	0 - 401.64	Same as

CAUTI Rate per 1,000 urinary catheter days



FORBES REGIONAL HOSPITAL

NHSN ID: 11265

Hospital type: Acute care general hospital

Number of licensed beds (2012): 350

Number of reported Healthcare-Associated Infections:

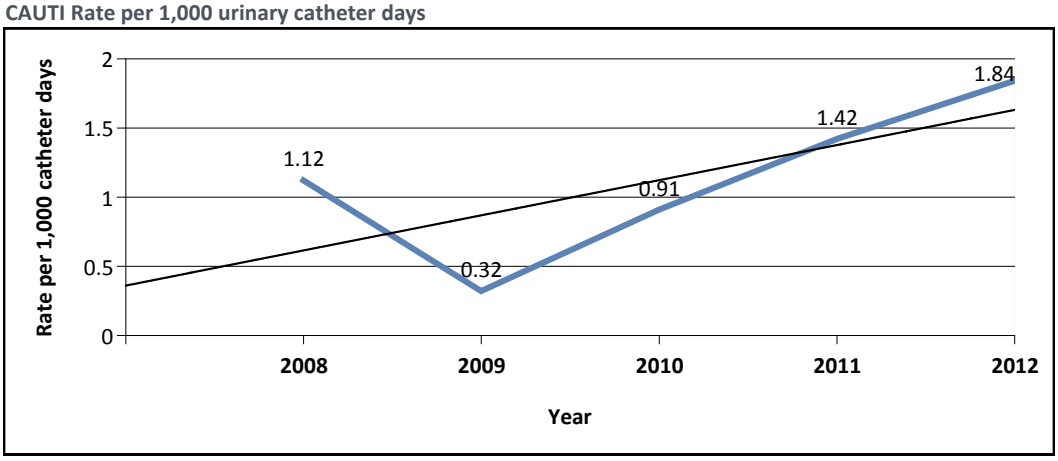
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	37,643	3	1	33	1	5	0	14	1	10	0	1.81
2009	75,134	13	0	59	0	14	1	28	8	7	2	1.76
2010	79,998	13	0	49	4	23	0	44	8	23	5	2.11
2011	85,996	16	0	68	1	13	0	41	1	24	1	1.92
2012	84,685	17	1	60	3	12	1	46	3	38	1	2.15

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	8	16.81	0.48	0.2 - 0.94	Better
2009	4	27.94	0.14	0.04 - 0.37	Better
2010	12	23.39	0.51	0.26 - 0.9	Better
2011	18	20.30	0.89	0.53 - 1.4	Same as
2012	23	23.06	1.00	0.63 - 1.5	Same as

CAUTI Rate per 1,000 urinary catheter days



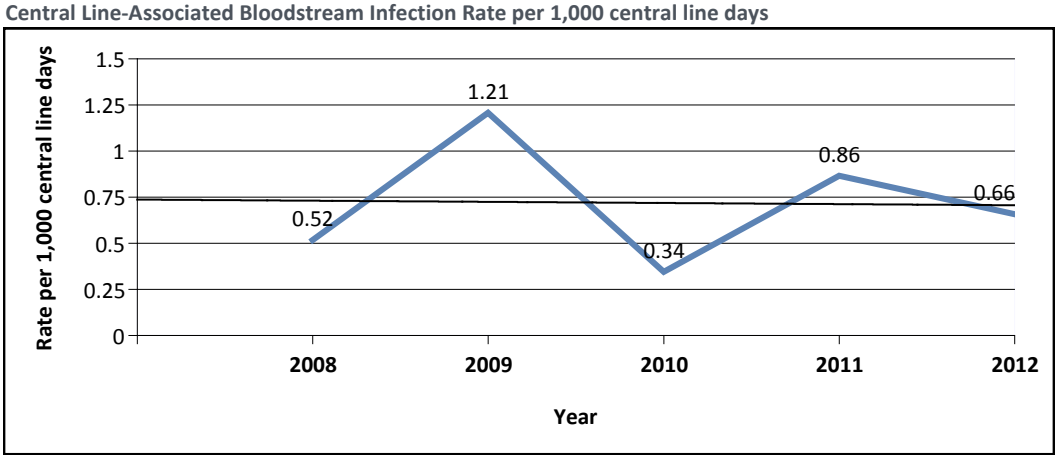
FORBES REGIONAL HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	5.55	0.36	0.04 - 1.3	Same as
2009	9	9.99	0.90	0.41 - 1.71	Same as
2010	3	7.69	0.39	0.08 - 1.14	Same as
2011	8	8.53	0.94	0.4 - 1.85	Same as
2012	5	5.58	0.90	0.29 - 2.09	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Specialty Care Area

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	2.69	0.37	0 - 2.07	Same as
2009	0	2.31	0.00	0 - 1.59	Same as
2010	1	1.20	0.84	0.01 - 4.65	Same as
2011	3	2.06	1.46	0.29 - 4.26	Same as
2012	1	0.93	1.07	0.01 - 5.98	Same as

FOUNDATIONS BEHAVIORAL HEALTH

NHSN ID: 12832

Hospital type: Psychiatric hospital

Number of licensed beds (2012): 54

Number of reported Healthcare-Associated Infections:

Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008												
2009	32,086	0	0	0	0	0	0	0	0	0	0	0.00
2010	13,331	0	1	0	0	0	0	0	0	1	0	0.15
2011	15,372	0	13	0	0	0	1	0	2	3	0	1.24
2012	16,352	0	24	2	0	0	0	0	2	0	0	1.71

FRIENDS HOSPITAL

NHSN ID: 12488

Hospital type: Psychiatric hospital

Number of licensed beds (2012): 192

Number of reported Healthcare-Associated Infections:

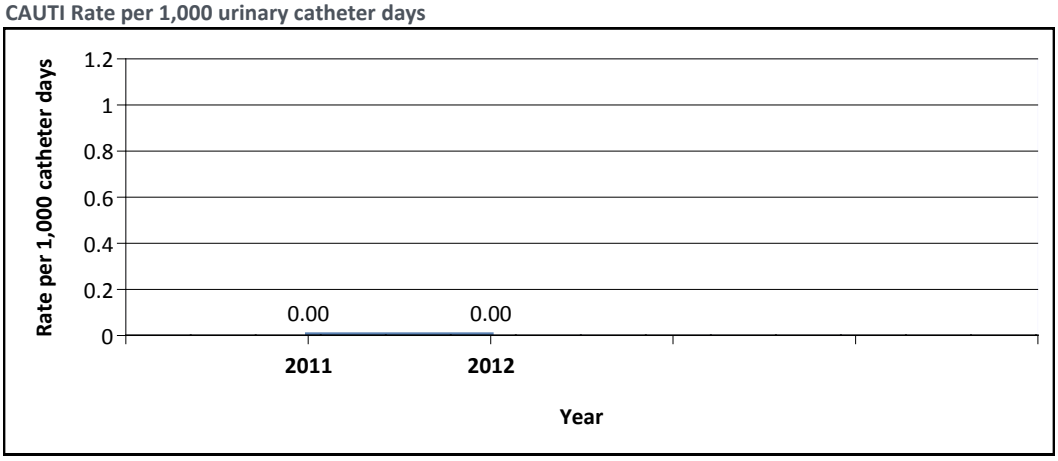
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	28,139	0	0	1	0	0	0	0	0	0	0	0.04
2009	154,000	0	0	0	0	0	0	0	0	0	0	0.00
2010	51,693	0	0	0	0	0	0	0	0	0	0	0.00
2011	52,675	0	36	0	0	0	0	0	6	3	0	0.85
2012	58,046	0	26	0	2	1	0	0	3	1	0	0.57

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008				-	
2009				-	
2010				-	
2011	0	0.01	0.00	0 - 596.54	Same as
2012	0	0.01	0.00	0 - 399.17	Same as

CAUTI Rate per 1,000 urinary catheter days



FULTON COUNTY MEDICAL CENTER

NHSN ID: 11939

Hospital type: Critical access hospital

Number of licensed beds (2012): 21

Number of reported Healthcare-Associated Infections:

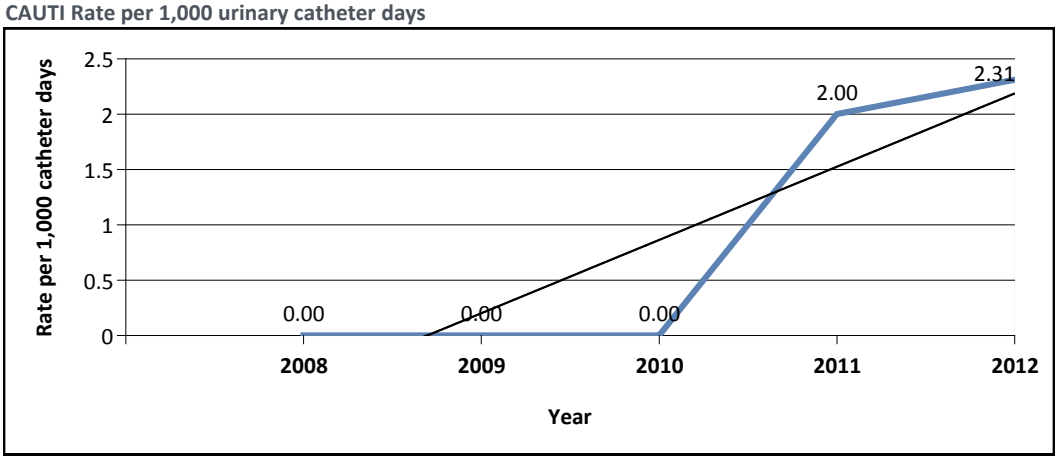
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	2,056	0	0	0	0	0	0	0	0	0	0	0.00
2009	4,515	1	0	0	0	1	0	0	0	0	0	0.44
2010	4,574	0	0	0	0	0	0	0	0	0	0	0.00
2011	4,065	0	0	0	0	3	0	0	0	3	0	1.48
2012	4,625	0	0	2	0	1	0	0	2	1	0	1.30

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.69	0.00	0 - 5.29	Same as
2009	0	0.40	0.00	0 - 9.09	Same as
2010	0	0.47	0.00	0 - 7.74	Same as
2011	1	0.59	1.71	0.02 - 9.49	Same as
2012	1	0.58	1.72	0.02 - 9.59	Same as

CAUTI Rate per 1,000 urinary catheter days



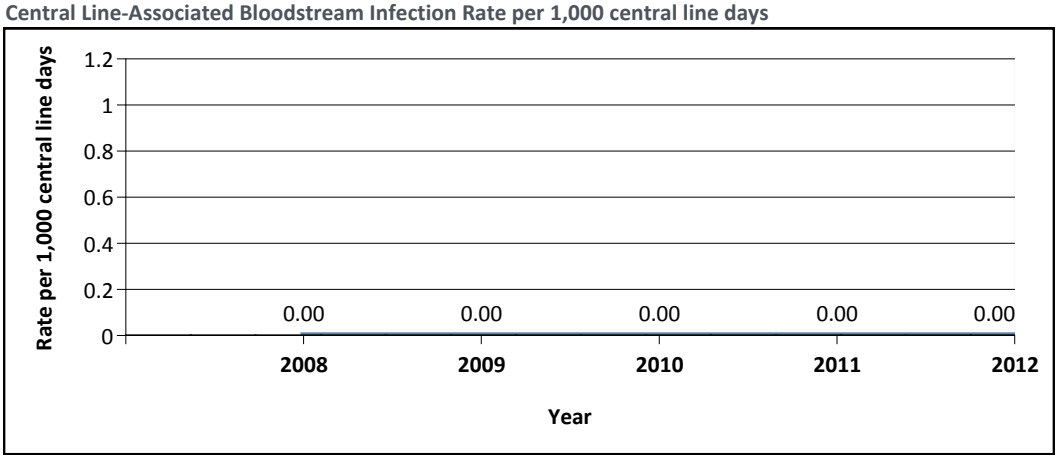
FULTON COUNTY MEDICAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.07	0.00	0 - 55.9	Same as
2009	0	0.11	0.00	0 - 33.27	Same as
2010	0	0.08	0.00	0 - 48.44	Same as
2011	0	0.14	0.00	0 - 25.67	Same as
2012	0	0.05	0.00	0 - 69.93	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



GEISINGER HEALTHSOUTH REHABILITATION HOSPITAL

NHSN ID: 11993

Hospital type: Rehabilitation hospital

Number of licensed beds (2012): 42

Number of reported Healthcare-Associated Infections:

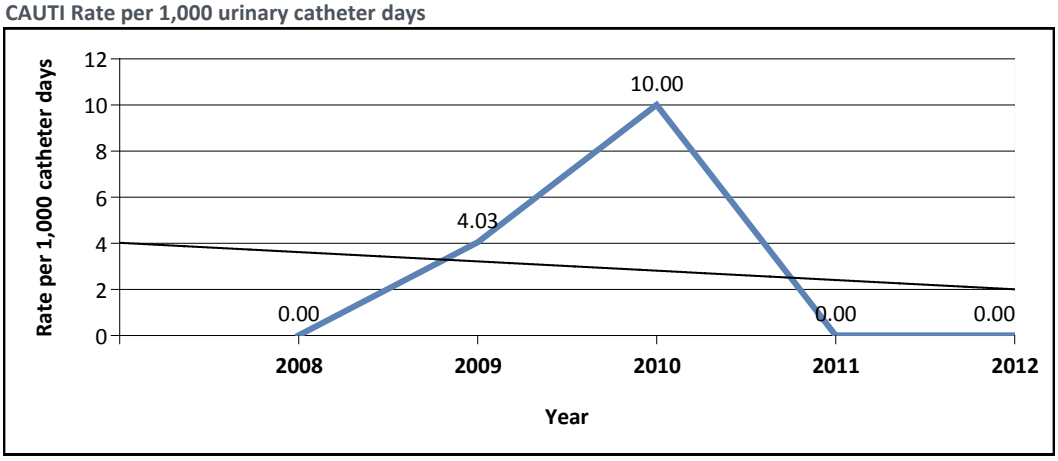
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	5,473	0	2	1	0	0	0	0	0	1	0	0.73
2009	11,203	0	0	6	0	0	0	0	0	4	0	0.89
2010	10,867	0	0	3	0	1	0	0	0	2	0	0.55
2011	10,978	0	0	5	0	0	0	0	0	3	0	0.73
2012	11,741	0	0	4	0	0	0	0	0	8	0	1.02

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.83	0.00	0 - 4.41	Same as
2009	2	0.82	2.45	0.28 - 8.85	Same as
2010	2	0.35	5.70	0.64 - 20.58	Same as
2011	0	0.31	0.00	0 - 11.97	Same as
2012	0	0.65	0.00	0 - 5.64	Same as

CAUTI Rate per 1,000 urinary catheter days



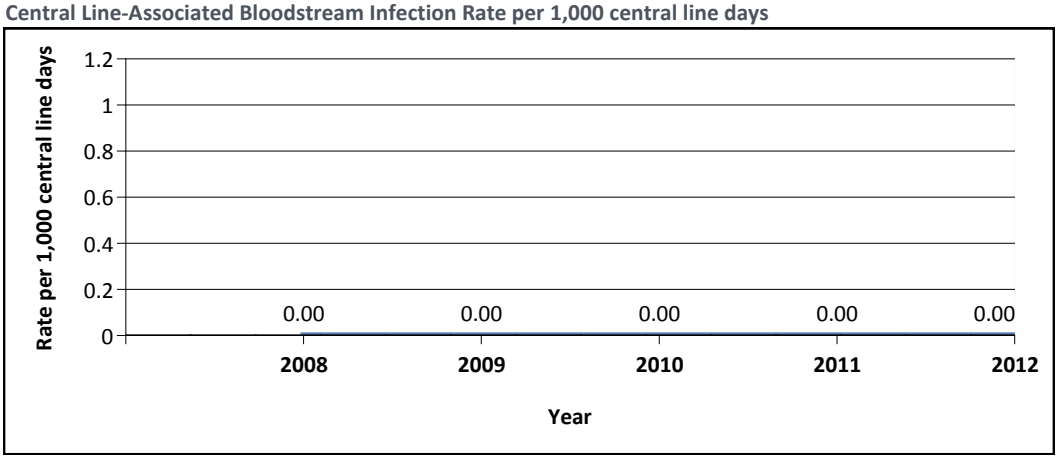
GEISINGER HEALTHSOUTH REHABILITATION HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.22	0.00	0 - 16.42	Same as
2009	0	0.38	0.00	0 - 9.75	Same as
2010	0	0.24	0.00	0 - 15.37	Same as
2011	0	0.38	0.00	0 - 9.76	Same as
2012	0	0.10	0.00	0 - 35.87	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



GEISINGER MEDICAL CENTER

NHSN ID: 11775

Hospital type: Acute care general hospital

Number of licensed beds (2012): 530

Number of reported Healthcare-Associated Infections:

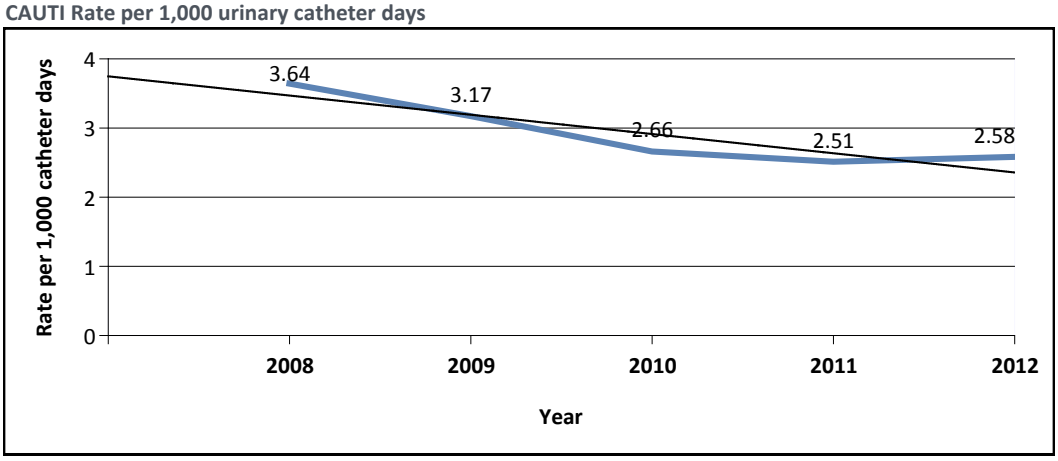
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	61,711	43	0	25	2	19	0	104	4	51	1	4.03
2009	127,978	86	1	70	7	23	0	205	6	115	4	4.04
2010	129,984	56	2	66	6	15	0	176	6	91	2	3.23
2011	136,175	82	3	76	19	34	0	213	19	112	1	4.11
2012	142,149	59	4	59	13	22	0	204	19	114	4	3.50

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	46	29.50	1.56	1.14 - 2.08	Worse
2009	71	49.62	1.43	1.12 - 1.81	Worse
2010	61	40.39	1.51	1.16 - 1.94	Worse
2011	63	41.36	1.52	1.17 - 1.95	Worse
2012	60	43.01	1.40	1.06 - 1.8	Worse

CAUTI Rate per 1,000 urinary catheter days



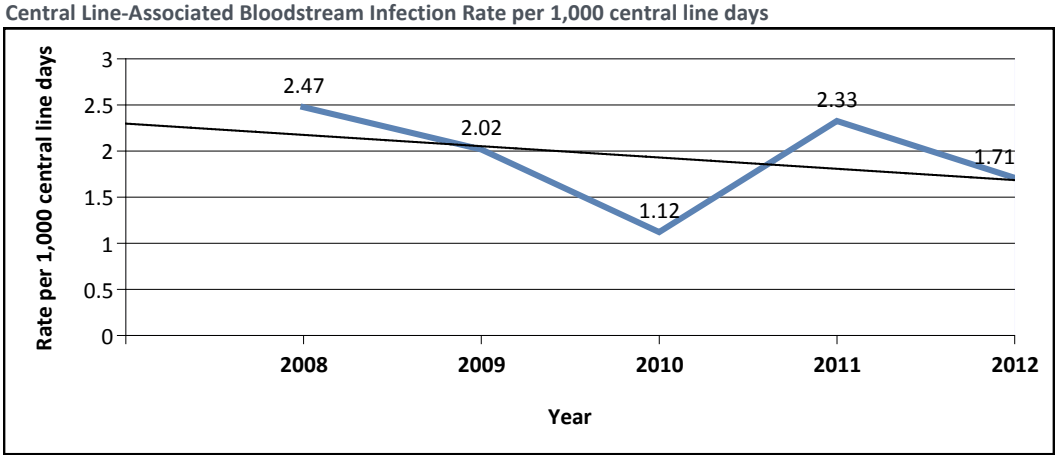
GEISINGER MEDICAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	29	17.40	1.67	1.12 - 2.39	Worse
2009	49	28.54	1.72	1.27 - 2.27	Worse
2010	25	18.45	1.35	0.88 - 2	Same as
2011	58	21.17	2.74	2.08 - 3.54	Worse
2012	41	19.37	2.12	1.52 - 2.87	Worse

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	4	5.58	0.72	0.24 - 1.84	Same as
2009	15	7.66	1.96	1.1 - 3.23	Worse
2010	11	6.36	1.73	0.86 - 3.09	Same as
2011	3	3.94	0.76	0.15 - 2.23	Same as
2012	4	2.69	1.49	0.4 - 3.81	Same as

GEISINGER WYOMING VALLEY MEDICAL CENTER

NHSN ID: 11780

Hospital type: Acute care general hospital

Number of licensed beds (2012): 250

Number of reported Healthcare-Associated Infections:

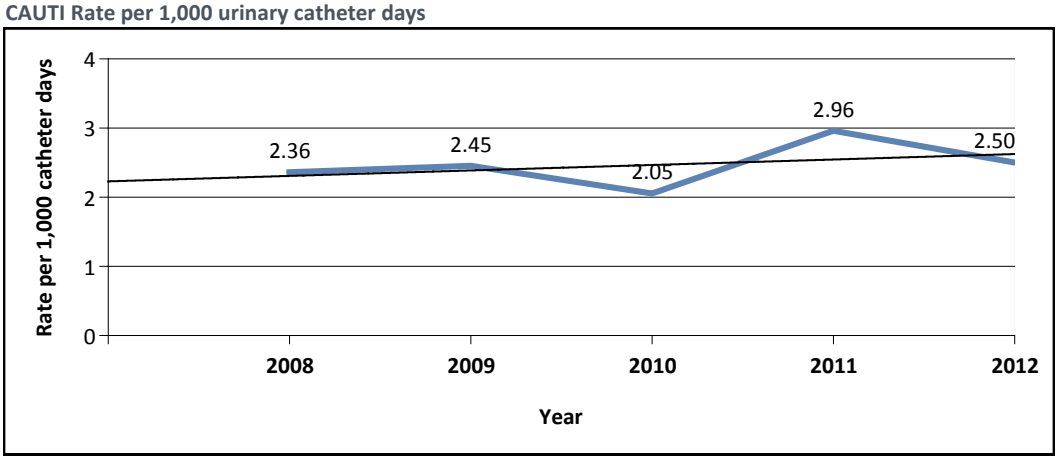
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	28,296	17	0	4	1	13	0	44	0	20	0	3.50
2009	51,912	23	0	29	7	28	0	95	1	50	0	4.49
2010	58,226	12	0	40	6	29	0	134	8	40	1	4.64
2011	64,749	14	0	40	14	32	0	111	5	67	2	4.40
2012	67,922	15	6	48	10	19	1	120	9	60	3	4.28

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	20	18.74	1.07	0.65 - 1.65	Same as
2009	36	32.31	1.11	0.78 - 1.54	Same as
2010	30	25.63	1.17	0.79 - 1.67	Same as
2011	47	27.27	1.72	1.27 - 2.29	Worse
2012	38	28.50	1.33	0.94 - 1.83	Same as

CAUTI Rate per 1,000 urinary catheter days



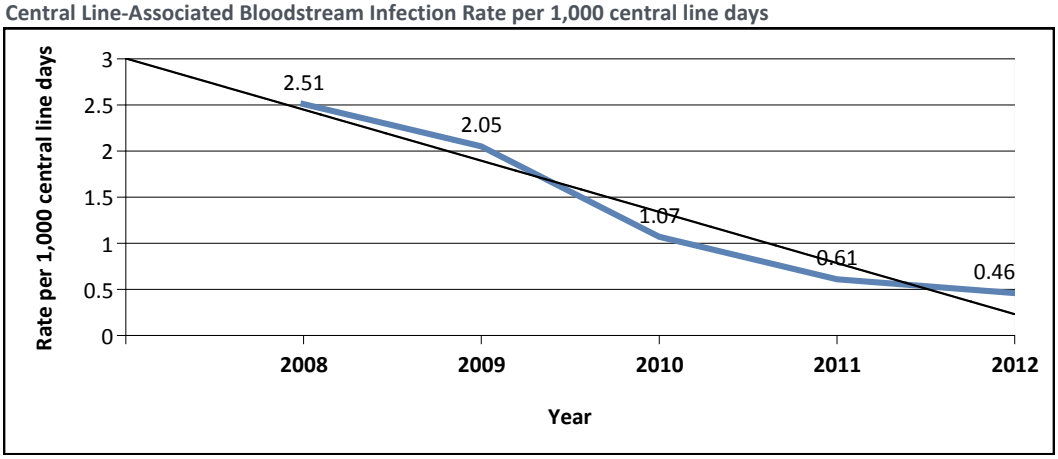
GEISINGER WYOMING VALLEY MEDICAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	11	6.39	1.72	0.86 - 3.08	Same as
2009	17	10.34	1.64	0.96 - 2.63	Same as
2010	9	7.23	1.24	0.57 - 2.36	Same as
2011	6	8.74	0.69	0.25 - 1.49	Same as
2012	5	8.67	0.58	0.19 - 1.35	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008				-	
2009				-	
2010				-	
2011	0	0.05	0.00	0 - 76.61	Same as
2012	0	0.18	0.00	0 - 20.61	Same as

GEISINGER-BLOOMSBURG HOSPITAL

NHSN ID: 12008

Hospital type: Acute care general hospital

Number of licensed beds (2012): 72

Number of reported Healthcare-Associated Infections:

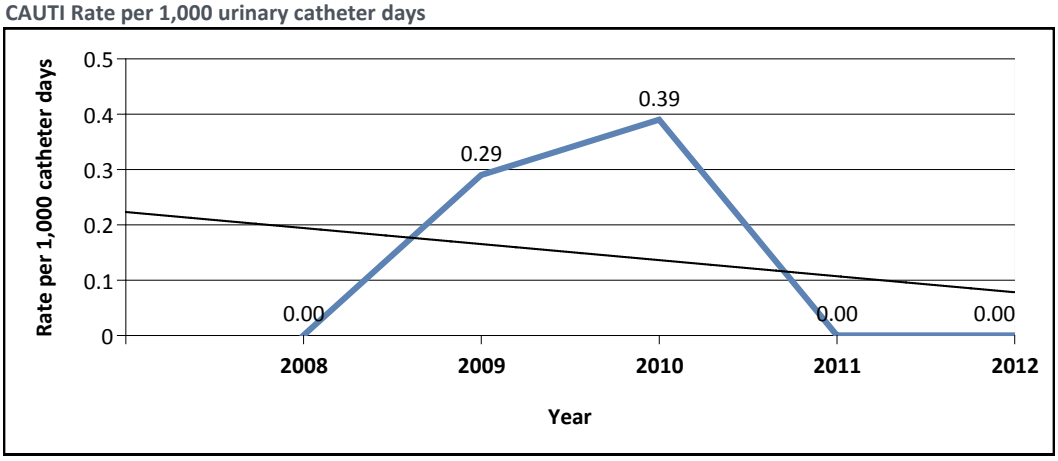
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	7,176	0	0	0	0	2	0	1	0	0	0	0.42
2009	16,990	1	0	1	0	1	1	3	0	1	1	0.53
2010	14,502	0	0	0	0	0	0	9	0	1	1	0.76
2011	13,619	2	0	0	0	2	0	3	0	0	0	0.51
2012	12,590	3	0	0	0	2	0	6	0	0	1	0.95

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	2.70	0.00	0 - 1.36	Same as
2009	1	5.55	0.18	0 - 1	Same as
2010	1	4.27	0.23	0 - 1.3	Same as
2011	0	2.67	0.00	0 - 1.37	Same as
2012	0	2.16	0.00	0 - 1.7	Same as

CAUTI Rate per 1,000 urinary catheter days



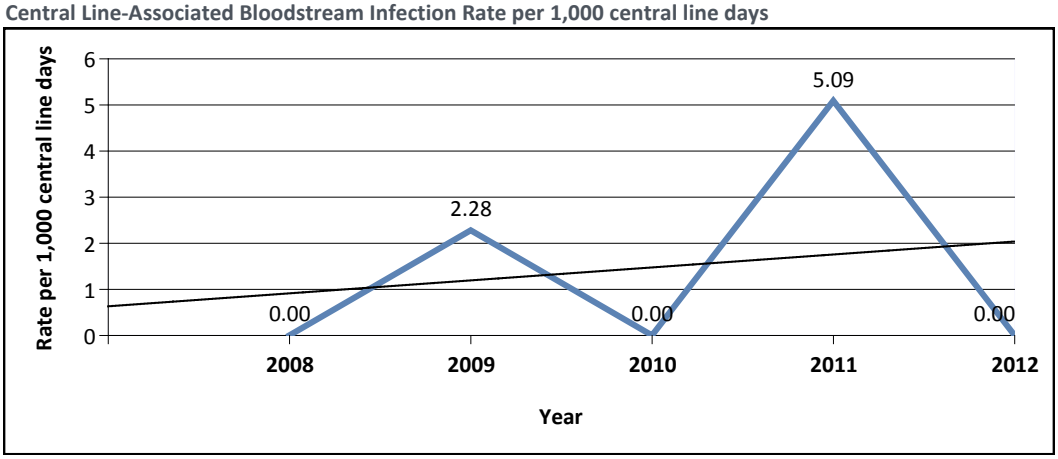
GEISINGER-BLOOMSBURG HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.20	0.00	0 - 18.79	Same as
2009	1	0.56	1.77	0.02 - 9.88	Same as
2010	0	0.36	0.00	0 - 10.06	Same as
2011	2	0.30	6.74	0.76 - 24.32	Same as
2012	0	0.40	0.00	0 - 9.25	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



GEISINGER-COMMUNITY MEDICAL CENTER

NHSN ID: 11914

Hospital type: Acute care general hospital

Number of licensed beds (2012): 297

Number of reported Healthcare-Associated Infections:

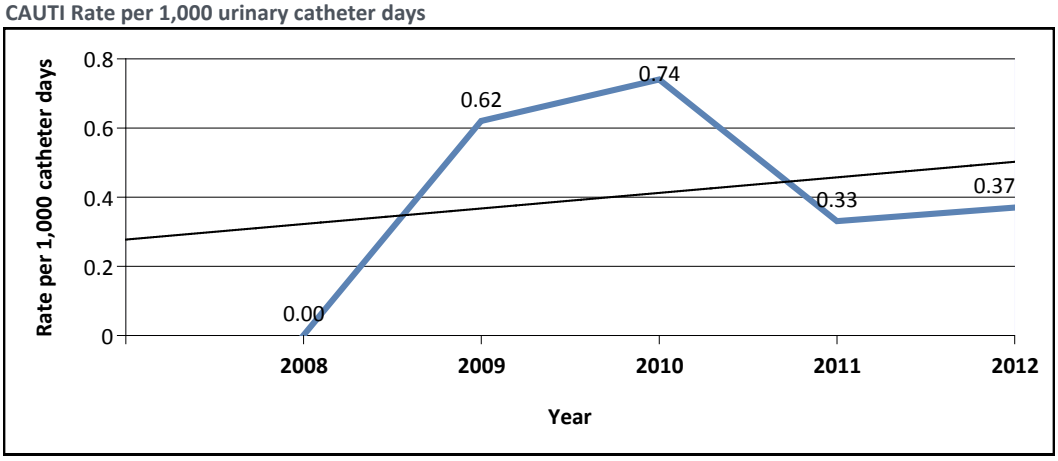
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	28,156	3	0	2	0	9	0	25	0	0	2	1.46
2009	58,896	4	0	3	0	14	0	51	0	9	0	1.38
2010	51,767	4	0	1	0	11	0	37	0	12	0	1.26
2011	52,727	1	0	1	0	14	0	36	0	6	0	1.10
2012	54,768	1	0	2	0	9	0	26	0	6	0	0.80

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	11.22	0.00	0 - 0.33	Better
2009	7	18.02	0.39	0.16 - 0.8	Better
2010	8	17.77	0.45	0.19 - 0.89	Better
2011	4	20.67	0.19	0.05 - 0.5	Better
2012	5	25.77	0.19	0.06 - 0.45	Better

CAUTI Rate per 1,000 urinary catheter days



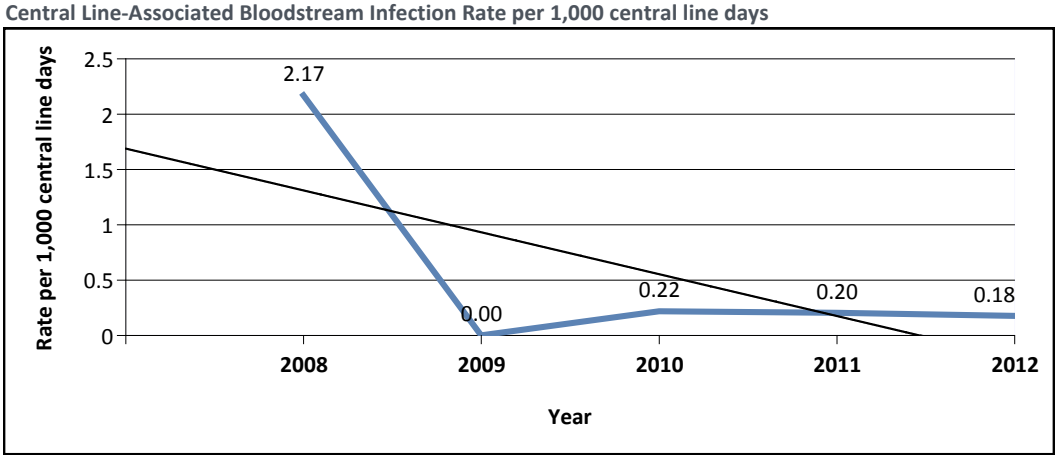
GEISINGER-COMMUNITY MEDICAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	1.89	1.59	0.32 - 4.63	Same as
2009	0	4.79	0.00	0 - 0.77	Better
2010	1	3.39	0.29	0 - 1.64	Same as
2011	1	4.73	0.21	0 - 1.18	Same as
2012	1	4.19	0.24	0 - 1.33	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.23	0.00	0 - 15.92	Same as
2009	0	0.24	0.00	0 - 15.08	Same as
2010	0	0.03	0.00	0 - 121.71	Same as
2011				-	
2012				-	

GETTYSBURG HOSPITAL

NHSN ID: 11531

Hospital type: Acute care general hospital

Number of licensed beds (2012): 76

Number of reported Healthcare-Associated Infections:

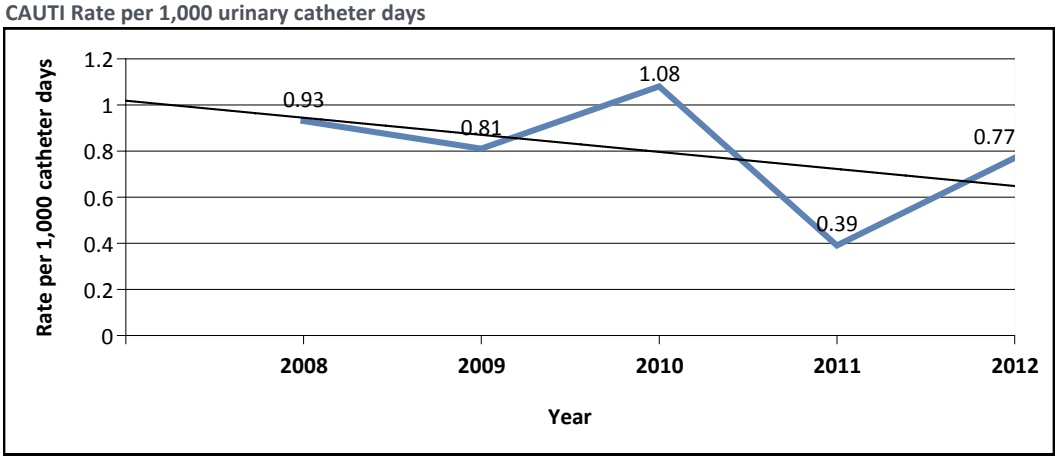
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	7,515	0	0	3	0	1	1	10	1	1	0	2.26
2009	16,461	1	0	8	0	1	0	9	0	2	0	1.28
2010	17,456	0	0	13	0	4	0	8	0	4	0	1.66
2011	18,089	0	0	10	0	2	2	19	0	2	0	1.93
2012	18,278	2	0	5	0	6	0	16	0	2	0	1.70

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	2.64	0.38	0 - 2.11	Same as
2009	2	4.01	0.50	0.06 - 1.8	Same as
2010	3	4.59	0.65	0.13 - 1.91	Same as
2011	1	3.10	0.32	0 - 1.79	Same as
2012	2	3.54	0.57	0.06 - 2.04	Same as

CAUTI Rate per 1,000 urinary catheter days



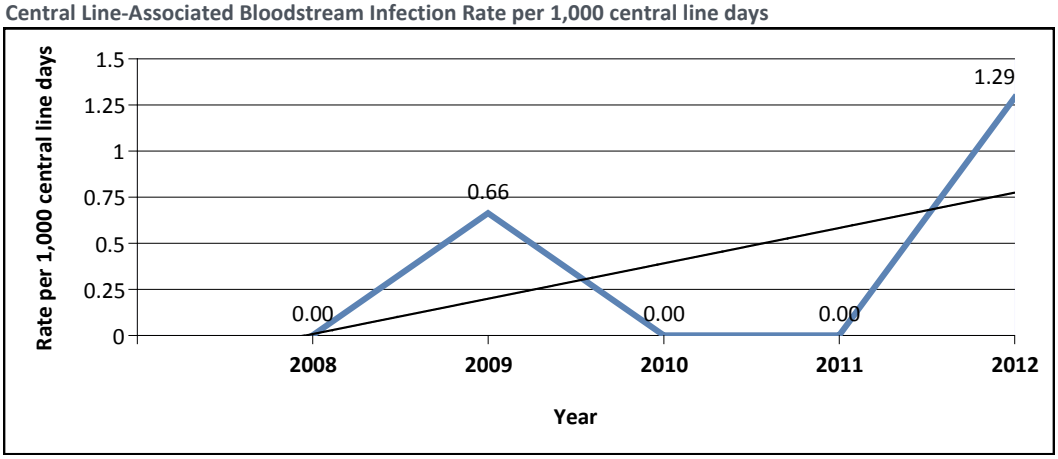
GETTYSBURG HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.69	0.00	0 - 5.3	Same as
2009	1	1.48	0.68	0.01 - 3.77	Same as
2010	0	1.19	0.00	0 - 3.08	Same as
2011	0	0.99	0.00	0 - 3.7	Same as
2012	2	1.02	1.96	0.22 - 7.09	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



GNADEN HUETTEN MEMORIAL HOSPITAL

NHSN ID: 12241

Hospital type: Acute care general hospital

Number of licensed beds (2012): 90

Number of reported Healthcare-Associated Infections:

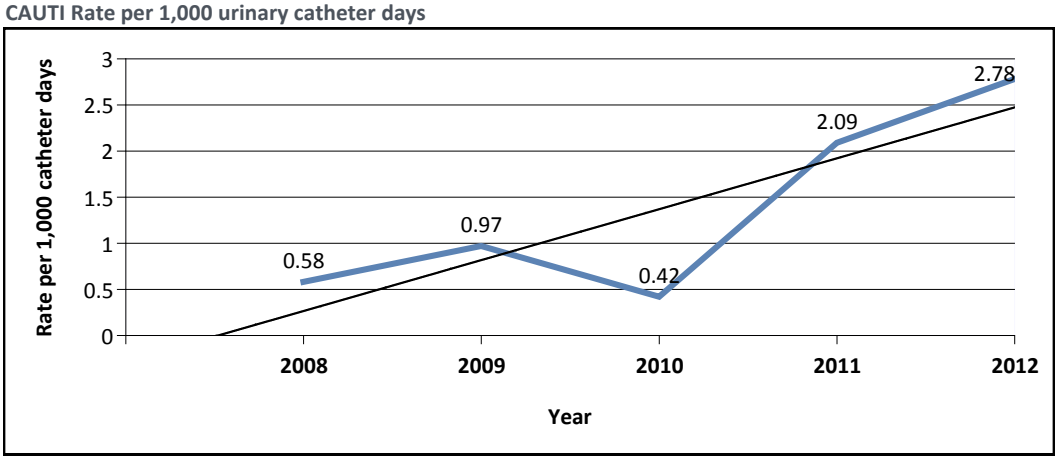
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	7,260	1	0	2	0	1	0	10	0	1	0	2.07
2009	16,768	2	3	3	0	1	0	10	0	5	0	1.43
2010	16,243	1	5	2	0	1	0	9	1	7	1	1.66
2011	16,886	1	4	3	0	3	0	6	2	13	0	1.90
2012	18,176	3	8	9	0	4	2	10	1	22	0	3.25

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	3.95	0.25	0 - 1.41	Same as
2009	3	4.96	0.60	0.12 - 1.77	Same as
2010	1	3.98	0.25	0 - 1.4	Same as
2011	5	2.86	1.75	0.56 - 4.07	Same as
2012	6	2.92	2.06	0.75 - 4.47	Same as

CAUTI Rate per 1,000 urinary catheter days



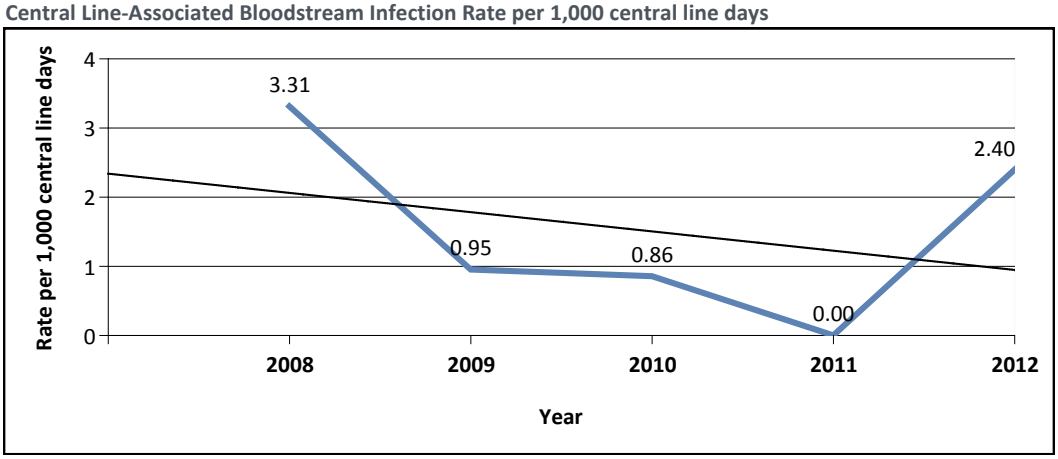
GNADEN HUETTEN MEMORIAL HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	0.41	2.45	0.03 - 13.62	Same as
2009	1	1.11	0.90	0.01 - 4.99	Same as
2010	1	0.89	1.13	0.01 - 6.27	Same as
2011	0	0.69	0.00	0 - 5.28	Same as
2012	2	0.50	4.01	0.45 - 14.49	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



GOOD SHEPHERD PENN PARTNERS

NHSN ID: 13929

Hospital type: Long-term acute care hospital

Number of licensed beds (2012): 38

Number of reported Healthcare-Associated Infections:

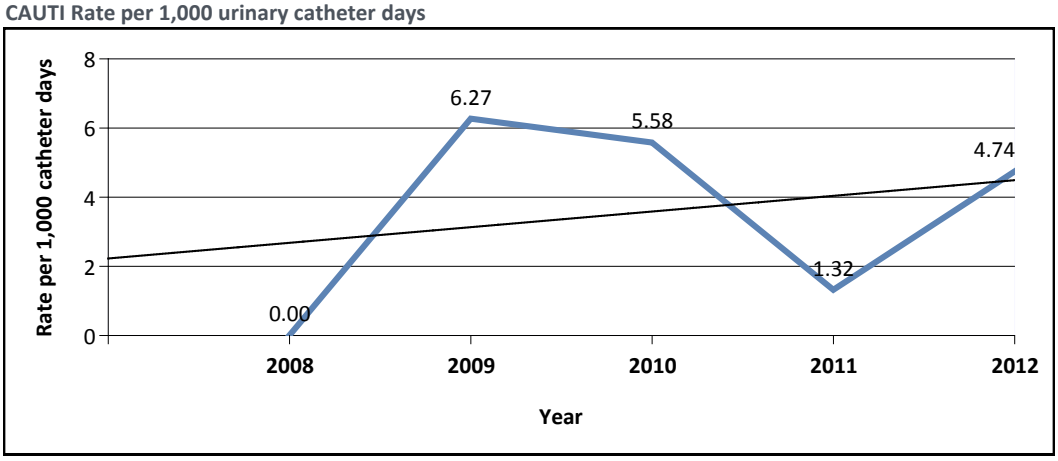
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	931	2	0	0	0	0	0	0	0	0	0	2.15
2009	5,486	13	0	25	10	1	0	0	7	6	0	11.30
2010	8,874	9	0	47	15	1	0	0	6	18	2	11.04
2011	8,537	22	0	11	15	1	0	0	2	4	0	6.44
2012	9,813	22	0	16	22	7	0	0	1	26	0	9.58

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.37	0.00	0 - 9.78	Same as
2009	2	0.52	3.83	0.43 - 13.82	Same as
2010	6	1.79	3.35	1.22 - 7.28	Worse
2011	2	1.87	1.07	0.12 - 3.86	Same as
2012	11	3.25	3.38	1.69 - 6.06	Worse

CAUTI Rate per 1,000 urinary catheter days



Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Long-Term Acute Care

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation

GOOD SHEPHERD PENN PARTNERS

2008	1	0.78	1.28	0.97 - 7.15	Same as
2009	9	4.24	2.12	0.97 - 4.03	Same as
2010	7	6.02	1.16	0.47 - 2.4	Same as
2011	14	6.01	2.33	1.27 - 3.91	Worse
2012	19	5.34	3.56	2.14 - 5.56	Worse

GOOD SHEPHERD SPECIALTY HOSPITAL

NHSN ID: 11887

Hospital type: Long-term acute care hospital

Number of licensed beds (2012): 32

Number of reported Healthcare-Associated Infections:

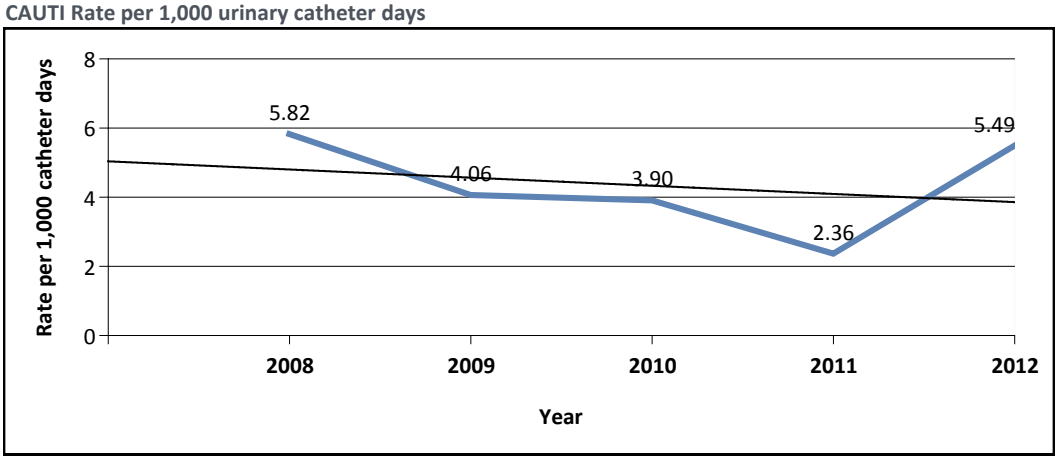
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	5,221	11	0	7	0	1	0	0	2	19	0	7.66
2009	10,497	7	0	6	2	0	0	0	5	30	0	4.76
2010	10,503	15	1	4	1	0	0	0	1	17	2	3.90
2011	10,551	9	0	6	0	0	0	0	3	12	0	2.84
2012	9,982	8	1	9	13	9	0	0	4	36	0	8.01

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	14	4.99	2.80	1.53 - 4.71	Worse
2009	24	9.36	2.56	1.64 - 3.82	Worse
2010	15	6.23	2.41	1.35 - 3.97	Worse
2011	9	5.22	1.72	0.79 - 3.27	Same as
2012	22	5.75	3.82	2.4 - 5.79	Worse

CAUTI Rate per 1,000 urinary catheter days



Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Long-Term Acute Care

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation

GOOD SHEPHERD SPECIALTY HOSPITAL

2008	11	6.18	1.78	0.28 - 3.19	Same as
2009	7	9.86	0.71	0.28 - 1.46	Same as
2010	15	10.72	1.40	0.78 - 2.31	Same as
2011	9	8.64	1.04	0.48 - 1.98	Same as
2012	8	7.40	1.08	0.47 - 2.13	Same as

GRAND VIEW HOSPITAL

NHSN ID: 11847

Hospital type: Acute care general hospital

Number of licensed beds (2012): 202

Number of reported Healthcare-Associated Infections:

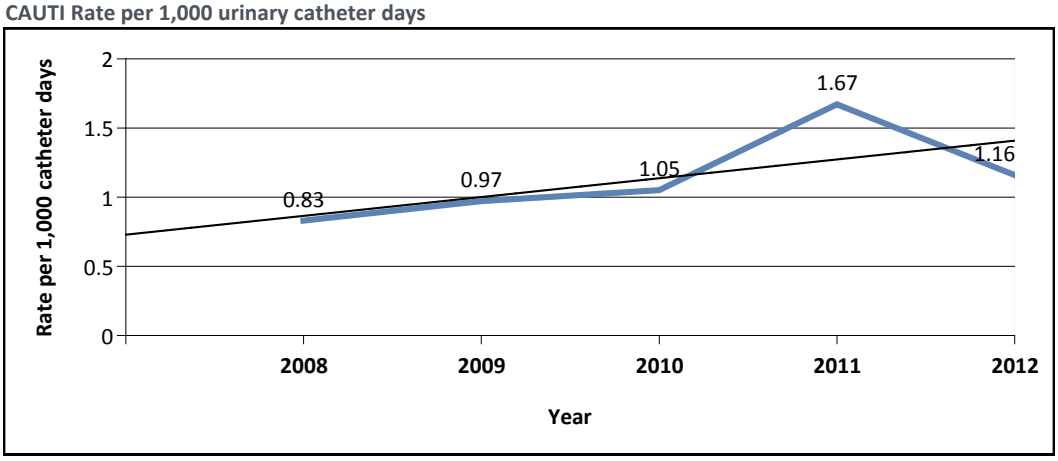
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	23,358	3	0	9	0	14	0	17	2	8	0	2.27
2009	46,252	9	0	14	0	25	0	27	0	15	0	1.95
2010	41,631	7	2	18	0	28	0	20	1	22	0	2.35
2011	42,899	7	2	21	0	46	0	21	2	35	0	3.12
2012	40,826	7	0	5	0	8	0	14	0	26	0	1.47

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	4	11.24	0.36	0.1 - 0.91	Better
2009	10	16.54	0.60	0.29 - 1.11	Same as
2010	10	15.55	0.64	0.31 - 1.18	Same as
2011	17	13.11	1.30	0.75 - 2.08	Same as
2012	11	13.22	0.83	0.41 - 1.49	Same as

CAUTI Rate per 1,000 urinary catheter days



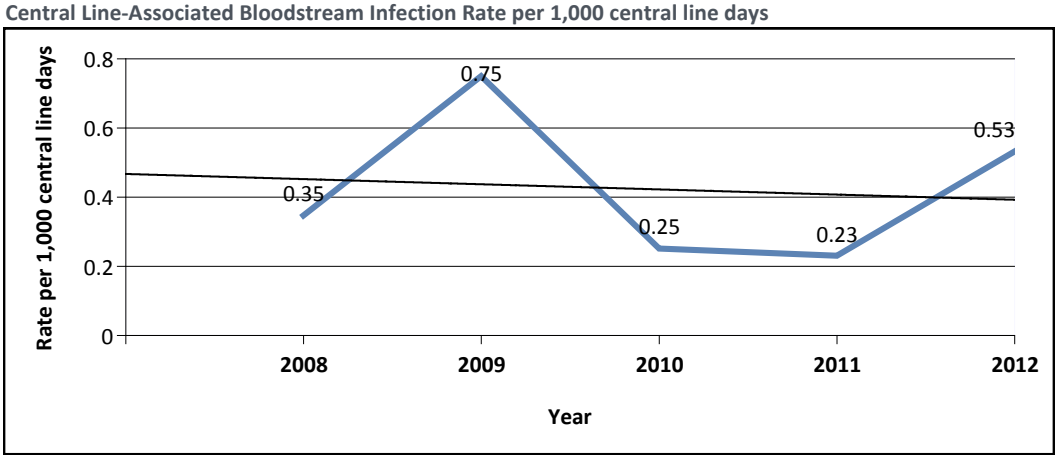
GRAND VIEW HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	4.15	0.24	0 - 1.34	Same as
2009	6	6.81	0.88	0.32 - 1.92	Same as
2010	2	5.25	0.38	0.04 - 1.38	Same as
2011	2	4.75	0.42	0.05 - 1.52	Same as
2012	4	5.57	0.72	0.19 - 1.84	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



GROVE CITY MEDICAL CENTER

NHSN ID: 11722

Hospital type: Acute care general hospital

Number of licensed beds (2012): 89

Number of reported Healthcare-Associated Infections:

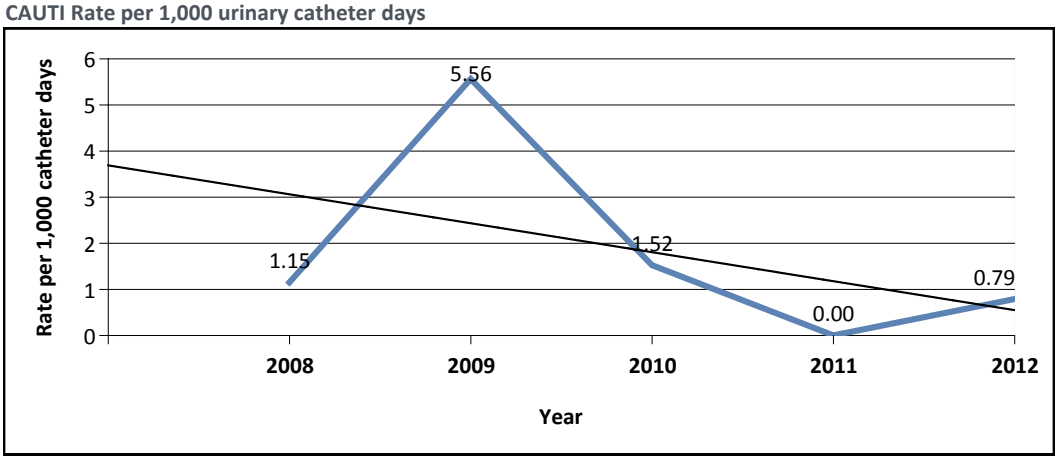
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	6,461	1	0	3	0	1	1	1	3	4	0	2.17
2009	11,653	1	0	2	0	3	0	5	2	19	0	2.75
2010	7,396	1	0	8	0	2	0	4	1	3	0	2.57
2011	7,906	0	0	5	0	1	0	5	0	0	0	1.39
2012	8,181	0	0	4	0	0	0	6	0	1	0	1.34

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	2.16	0.46	0.01 - 2.57	Same as
2009	9	2.62	3.44	1.57 - 6.53	Worse
2010	2	2.18	0.92	0.1 - 3.32	Same as
2011	0	1.61	0.00	0 - 2.27	Same as
2012	1	1.73	0.58	0.01 - 3.22	Same as

CAUTI Rate per 1,000 urinary catheter days



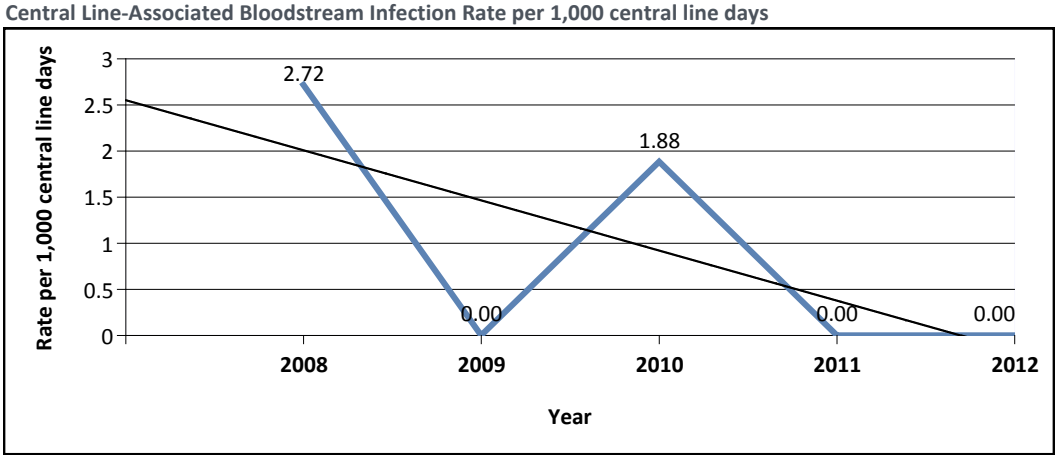
GROVE CITY MEDICAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	0.51	1.97	0.03 - 10.98	Same as
2009	0	0.68	0.00	0 - 5.42	Same as
2010	1	0.40	2.48	0.03 - 13.77	Same as
2011	0	0.34	0.00	0 - 10.83	Same as
2012	0	0.27	0.00	0 - 13.74	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



HAHNEMANN UNIVERSITY HOSPITAL

NHSN ID: 11437

Hospital type: Acute care general hospital

Number of licensed beds (2012): 496

Number of reported Healthcare-Associated Infections:

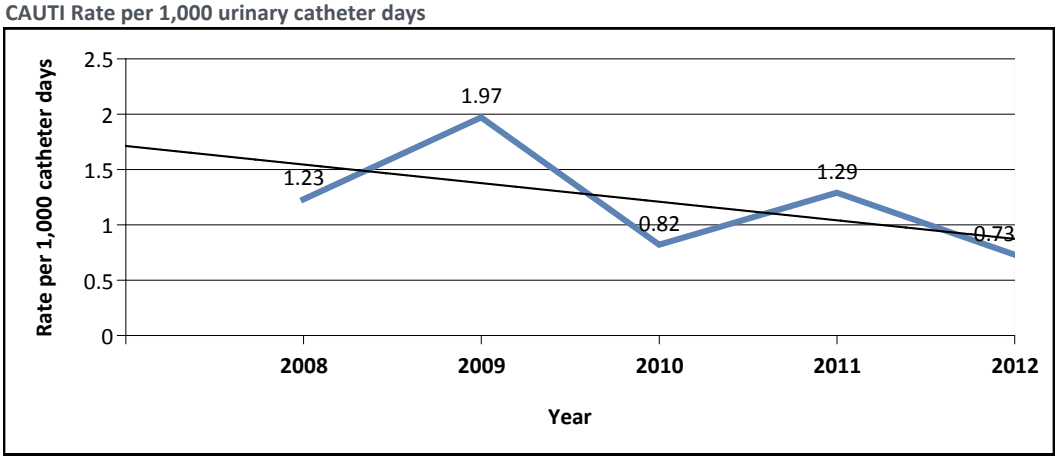
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	63,854	31	1	49	1	8	0	2	3	24	1	1.88
2009	130,864	78	3	60	4	24	0	61	4	63	0	2.27
2010	123,052	49	0	39	2	5	1	60	11	33	3	1.65
2011	127,259	46	6	75	7	16	0	54	10	44	4	2.06
2012	115,028	24	14	76	5	23	1	89	15	30	0	2.41

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	12	23.75	0.51	0.26 - 0.88	Better
2009	39	43.97	0.89	0.63 - 1.21	Same as
2010	15	32.57	0.46	0.26 - 0.76	Better
2011	23	28.37	0.81	0.51 - 1.22	Same as
2012	11	27.61	0.40	0.2 - 0.71	Better

CAUTI Rate per 1,000 urinary catheter days



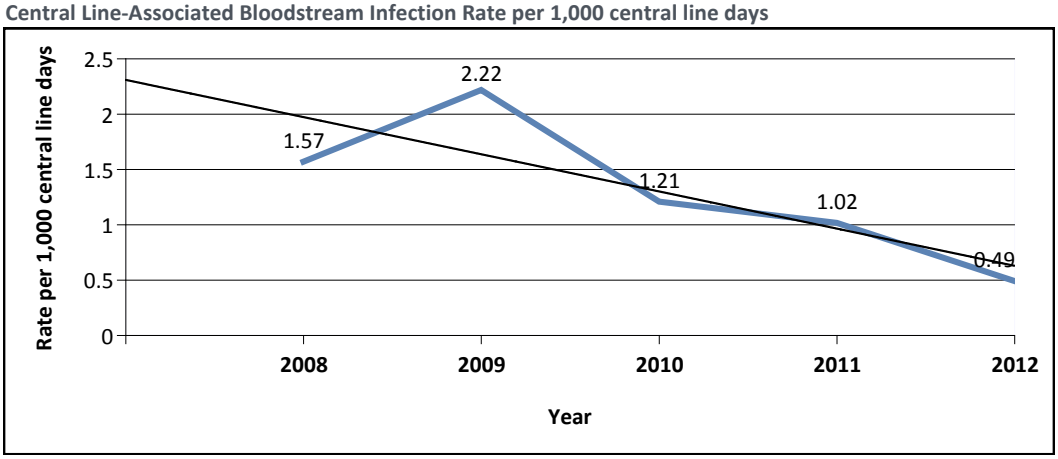
HAHNEMANN UNIVERSITY HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	19	17.96	1.06	0.64 - 1.65	Same as
2009	54	28.64	1.89	1.42 - 2.46	Worse
2010	25	16.98	1.47	0.95 - 2.17	Same as
2011	20	16.90	1.18	0.72 - 1.83	Same as
2012	9	14.90	0.60	0.28 - 1.15	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.72	0.00	0 - 5.09	Same as
2009	2	1.08	1.85	0.21 - 6.68	Same as
2010	1	1.71	0.59	0.01 - 3.26	Same as
2011	2	1.69	1.19	0.13 - 4.28	Same as
2012	2	1.66	1.20	0.14 - 4.34	Same as

Standardized Infection Ratio - Specialty Care Area

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	6.30	0.48	0.1 - 1.39	Same as
2009	6	10.17	0.59	0.22 - 1.28	Same as
2010	11	7.03	1.56	0.78 - 2.8	Same as
2011	8	8.24	0.97	0.42 - 1.91	Same as
2012	1	6.95	0.14	0 - 0.8	Better

HANOVER HOSPITAL

NHSN ID: 11899

Hospital type: Acute care general hospital

Number of licensed beds (2012): 106

Number of reported Healthcare-Associated Infections:

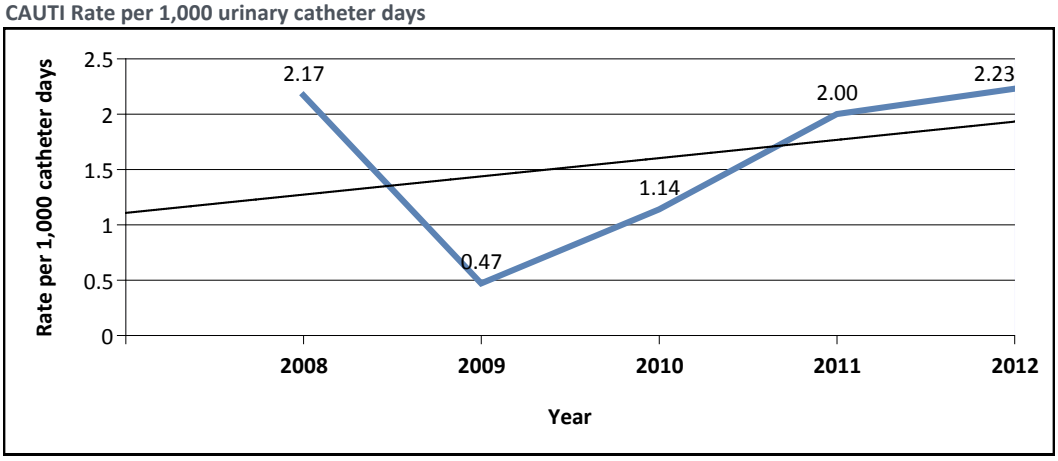
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	10,765	1	0	8	0	1	0	7	1	11	0	2.69
2009	27,442	4	1	9	0	5	0	15	2	11	0	1.71
2010	26,527	6	0	17	0	6	0	26	1	20	1	2.90
2011	25,152	0	0	23	1	8	0	20	3	27	0	3.26
2012	24,815	6	0	10	0	9	0	26	0	22	3	3.06

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	9	8.84	1.02	0.46 - 1.93	Same as
2009	4	13.51	0.30	0.08 - 0.76	Better
2010	10	14.19	0.70	0.34 - 1.3	Same as
2011	11	7.02	1.57	0.78 - 2.8	Same as
2012	10	6.21	1.61	0.77 - 2.96	Same as

CAUTI Rate per 1,000 urinary catheter days



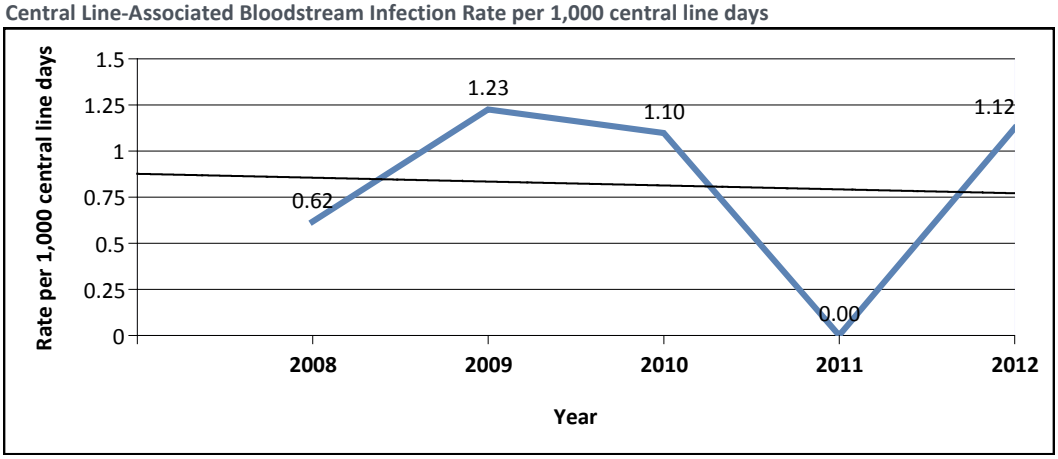
HANOVER HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	2.36	0.42	0.01 - 2.36	Same as
2009	4	2.98	1.34	0.36 - 3.44	Same as
2010	4	2.52	1.59	0.43 - 4.06	Same as
2011	0	1.88	0.00	0 - 1.95	Same as
2012	3	1.82	1.65	0.33 - 4.82	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



HAVEN BEHAVIORAL HOSPITAL OF EASTERN PENNSYLVANIA

NHSN ID: 14471

Hospital type: Psychiatric hospital

Number of licensed beds (2012): 48

Number of reported Healthcare-Associated Infections:

Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008												
2009												
2010	7,997	0	0	0	0	0	0	0	0	0	0	0.00
2011	7,714	0	0	0	0	0	0	0	0	0	0	0.00
2012	13,574	0	0	0	0	0	0	0	0	1	0	0.07

HAZLETON GENERAL HOSPITAL

NHSN ID: 11878

Hospital type: Acute care general hospital

Number of licensed beds (2012): 150

Number of reported Healthcare-Associated Infections:

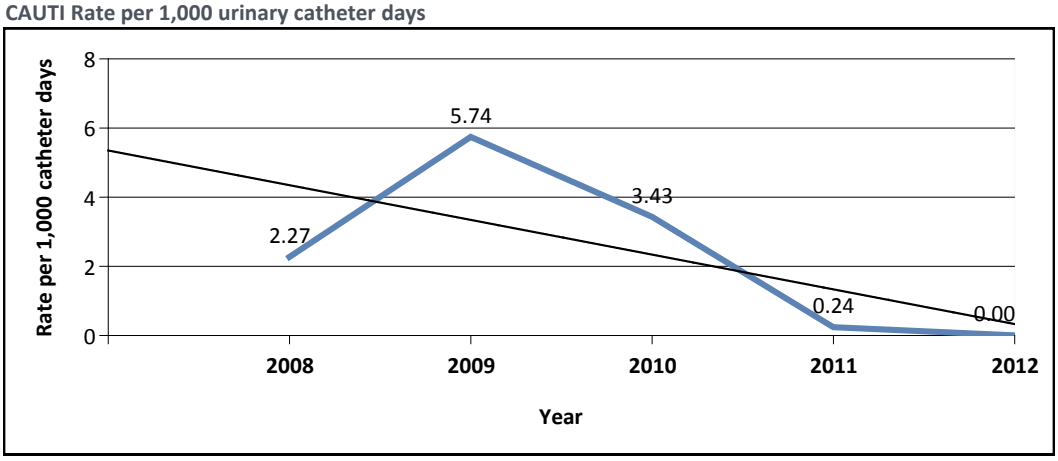
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	18,376	0	0	18	0	2	0	3	1	14	0	2.07
2009	34,673	5	0	37	0	7	0	7	2	60	0	3.40
2010	34,045	5	0	23	0	5	0	12	3	42	0	2.64
2011	33,295	5	0	10	0	6	0	10	2	8	0	1.23
2012	32,401	6	0	46	1	8	0	22	0	3	0	2.65

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	10	10.06	0.99	0.48 - 1.83	Same as
2009	50	13.97	3.58	2.66 - 4.72	Worse
2010	31	14.74	2.10	1.43 - 2.98	Worse
2011	2	10.67	0.19	0.02 - 0.68	Better
2012	0	10.60	0.00	0 - 0.35	Better

CAUTI Rate per 1,000 urinary catheter days



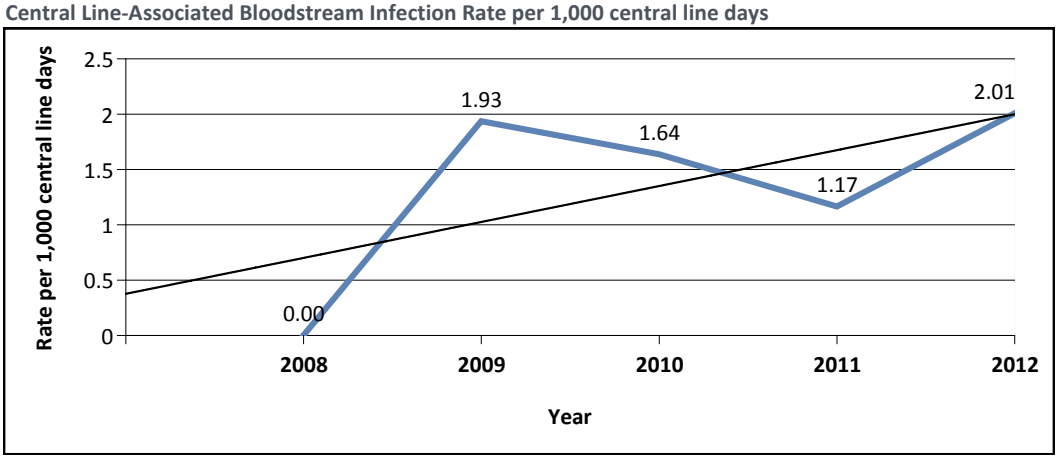
HAZLETON GENERAL HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	1.65	0.00	0 - 2.22	Same as
2009	5	2.64	1.89	0.61 - 4.42	Same as
2010	4	1.86	2.15	0.58 - 5.51	Same as
2011	3	1.65	1.82	0.37 - 5.31	Same as
2012	6	1.99	3.02	1.1 - 6.57	Worse

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



HEALTHSOUTH HARMARVILLE REHABILITATION HOSPITAL

NHSN ID: 11727

Hospital type: Rehabilitation hospital

Number of licensed beds (2012): 162

Number of reported Healthcare-Associated Infections:

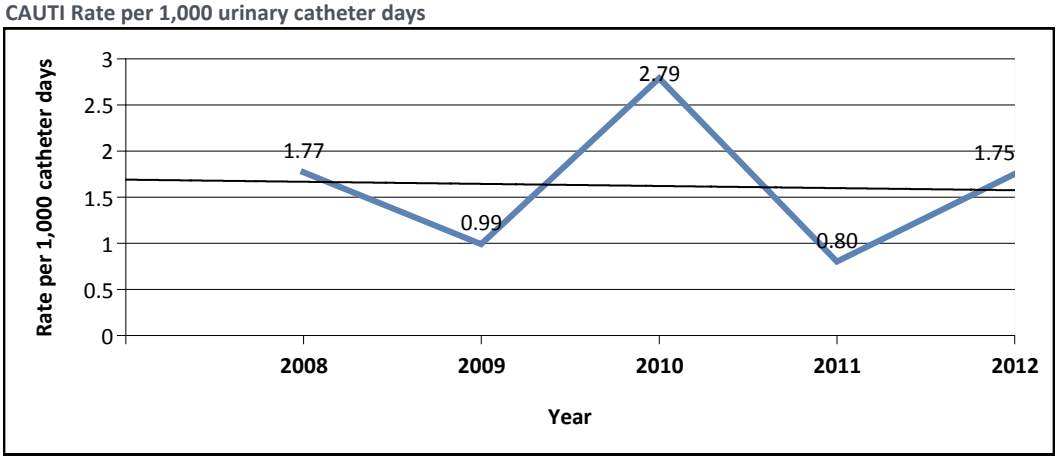
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	17,726	3	2	16	1	1	0	0	2	15	0	2.26
2009	36,648	0	0	12	0	1	0	0	1	16	0	0.82
2010	30,991	1	0	9	0	3	0	0	0	25	0	1.23
2011	31,608	2	1	5	0	0	0	0	0	29	0	1.17
2012	34,709	1	0	1	0	0	0	0	0	12	0	0.40

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	4	5.66	0.71	0.19 - 1.81	Same as
2009	4	6.58	0.61	0.16 - 1.56	Same as
2010	10	5.98	1.67	0.8 - 3.08	Same as
2011	3	4.40	0.68	0.14 - 1.99	Same as
2012	6	4.59	1.31	0.48 - 2.84	Same as

CAUTI Rate per 1,000 urinary catheter days



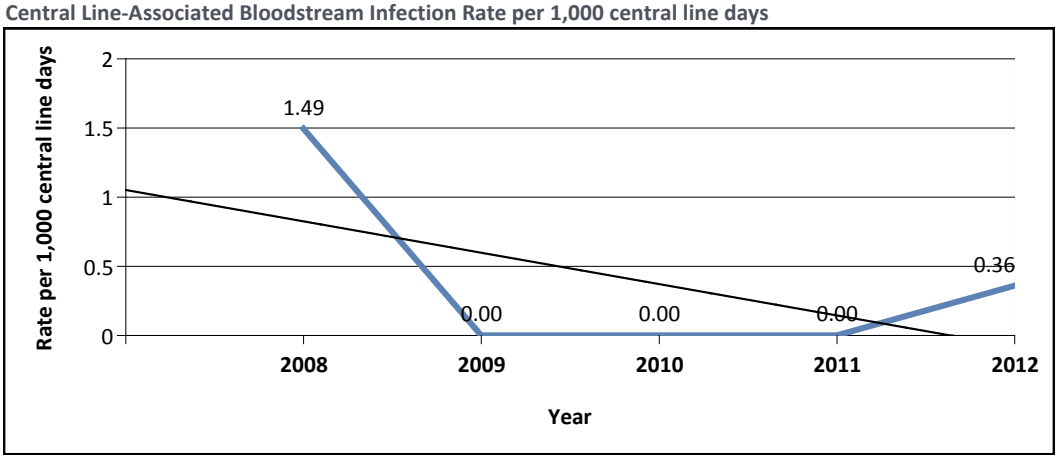
HEALTHSOUTH HARMARVILLE REHABILITATION HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	1.87	1.07	0.12 - 3.85	Same as
2009	0	2.78	0.00	0 - 1.32	Same as
2010	0	1.69	0.00	0 - 2.17	Same as
2011	0	1.67	0.00	0 - 2.2	Same as
2012	1	1.81	0.55	0.01 - 3.08	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



HEALTHSOUTH NITTANY VALLEY REHABILITATION HOSPITAL

NHSN ID: 11667

Hospital type: Rehabilitation hospital

Number of licensed beds (2012): 73

Number of reported Healthcare-Associated Infections:

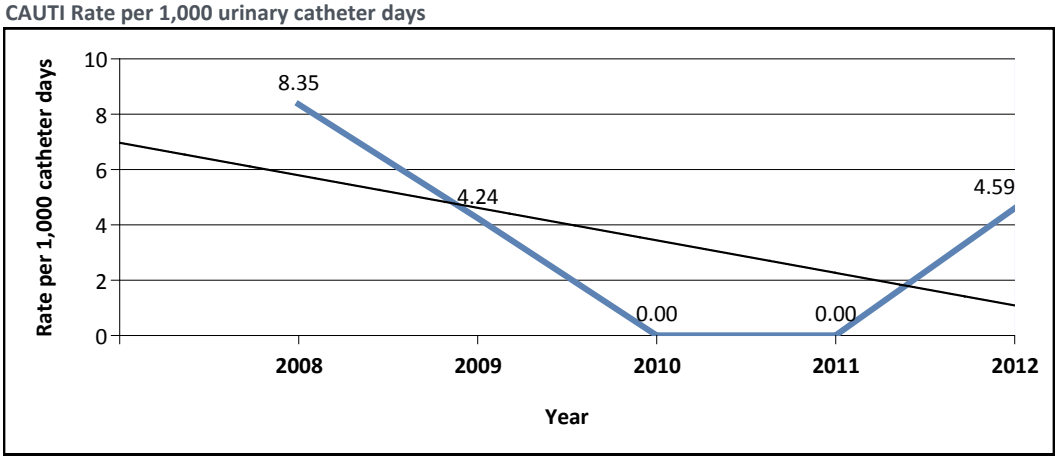
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	6,429	1	0	4	0	0	0	0	1	12	0	2.80
2009	13,464	3	0	2	0	0	0	0	0	17	0	1.63
2010	12,452	1	0	4	0	1	0	0	2	6	0	1.12
2011	11,594	1	0	7	0	0	0	0	2	11	0	1.81
2012	13,305	3	0	4	0	0	0	0	3	15	0	1.88

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	4	1.30	3.09	0.83 - 7.91	Same as
2009	4	1.54	2.60	0.7 - 6.65	Same as
2010	0	1.16	0.00	0 - 3.16	Same as
2011	0	0.47	0.00	0 - 7.77	Same as
2012	3	0.85	3.53	0.71 - 10.32	Same as

CAUTI Rate per 1,000 urinary catheter days



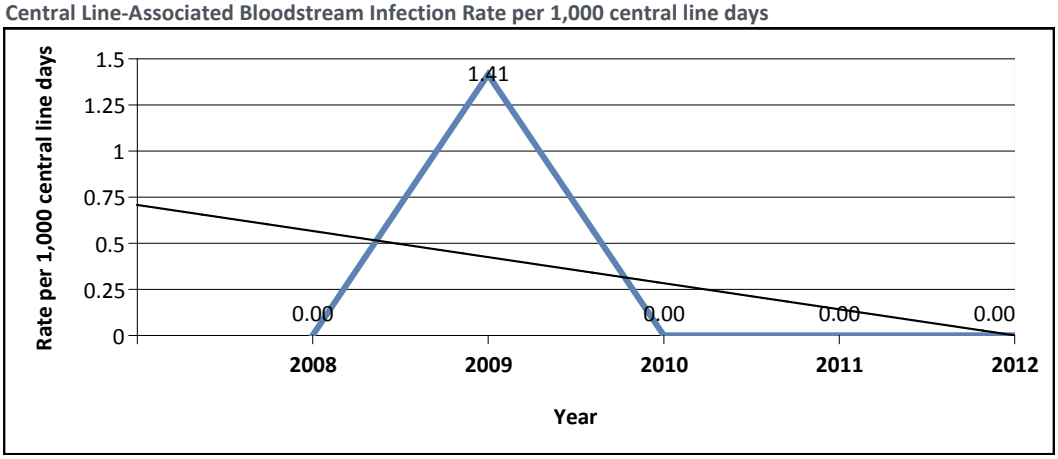
HEALTHSOUTH NITTANY VALLEY REHABILITATION HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.56	0.00	0 - 6.52	Same as
2009	1	0.78	1.28	0.02 - 7.14	Same as
2010	0	0.38	0.00	0 - 9.67	Same as
2011	0	0.33	0.00	0 - 11.17	Same as
2012	0	0.38	0.00	0 - 9.66	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



HEALTHSOUTH READING REHABILITATION HOSPITAL

NHSN ID: 12139

Hospital type: Rehabilitation hospital

Number of licensed beds (2012): 60

Number of reported Healthcare-Associated Infections:

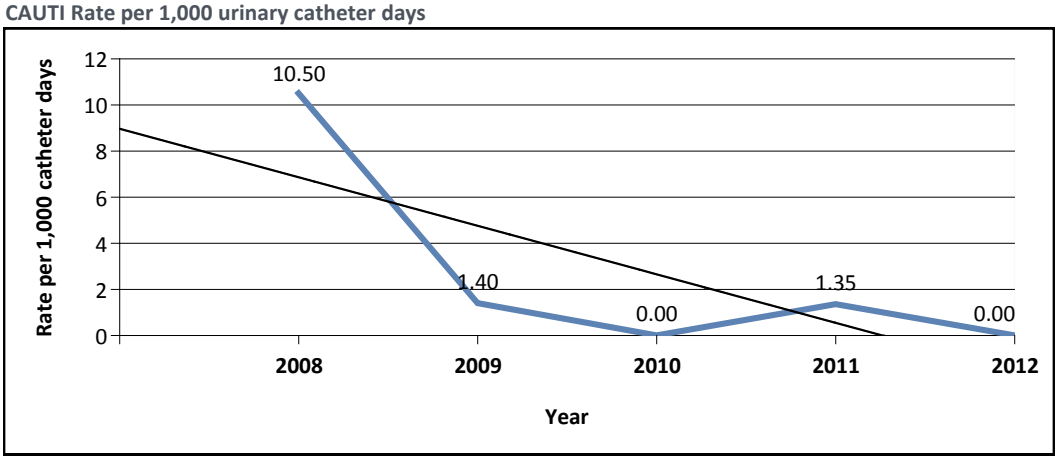
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	6,829	1	2	1	0	0	0	0	0	12	0	2.34
2009	15,227	0	1	1	0	0	0	0	0	11	0	0.85
2010	14,813	0	0	3	0	0	0	0	0	12	0	1.01
2011	15,204	1	0	2	0	0	0	0	0	17	0	1.32
2012	15,333	0	1	3	1	0	0	0	0	7	0	0.78

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	5	1.30	3.85	1.24 - 8.98	Worse
2009	1	1.18	0.85	0.01 - 4.74	Same as
2010	0	0.92	0.00	0 - 3.99	Same as
2011	1	0.76	1.31	0.02 - 7.3	Same as
2012	0	0.71	0.00	0 - 5.13	Same as

CAUTI Rate per 1,000 urinary catheter days



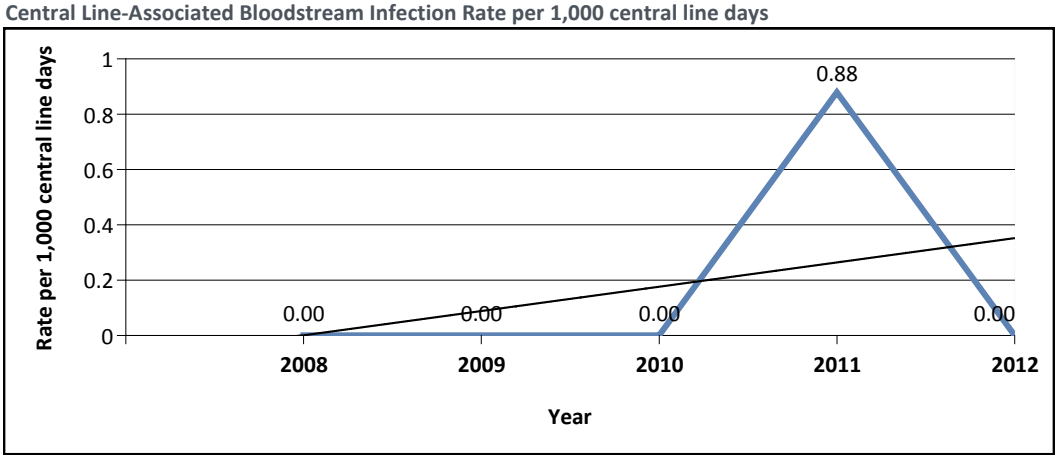
HEALTHSOUTH READING REHABILITATION HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.62	0.00	0 - 5.95	Same as
2009	0	1.22	0.00	0 - 3	Same as
2010	0	0.90	0.00	0 - 4.08	Same as
2011	1	0.73	1.36	0.02 - 7.58	Same as
2012	0	0.71	0.00	0 - 5.19	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



HEALTHSOUTH REHABILITATION HOSPITAL OF ALTOONA

NHSN ID: 11903

Hospital type: Rehabilitation hospital

Number of licensed beds (2012): 80

Number of reported Healthcare-Associated Infections:

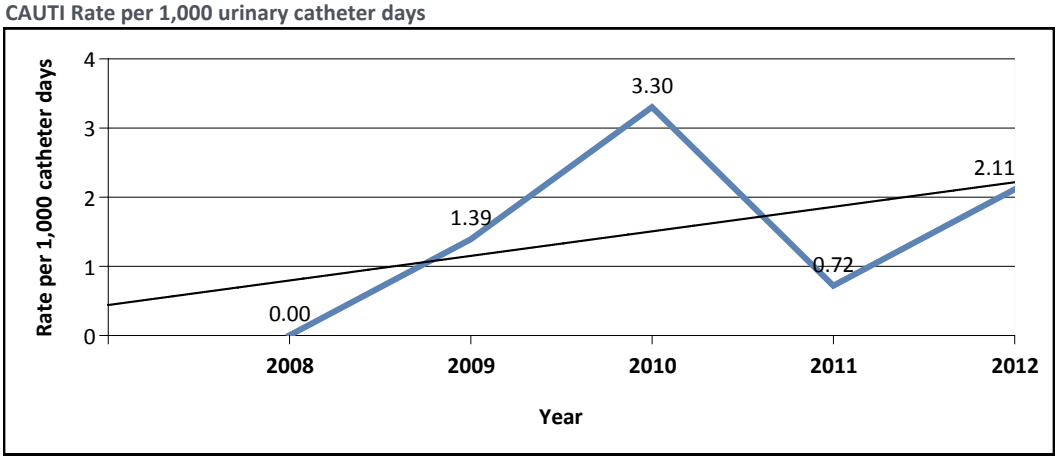
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	11,317	2	0	5	1	1	0	0	5	7	0	1.86
2009	22,000	3	0	6	1	2	0	0	0	33	0	2.05
2010	22,173	0	2	7	0	2	0	0	5	26	0	1.89
2011	23,971	1	0	4	0	2	0	0	4	22	0	1.38
2012	25,280	2	0	4	0	2	0	0	6	26	0	1.58

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	2.83	0.00	0 - 1.29	Same as
2009	2	2.35	0.85	0.1 - 3.08	Same as
2010	5	2.57	1.95	0.63 - 4.54	Same as
2011	1	1.45	0.69	0.01 - 3.83	Same as
2012	3	1.86	1.61	0.32 - 4.72	Same as

CAUTI Rate per 1,000 urinary catheter days



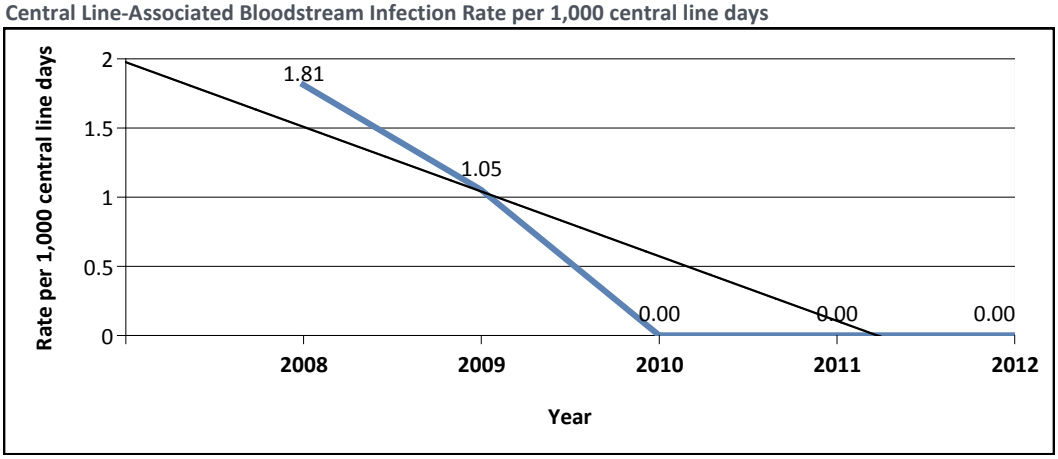
HEALTHSOUTH REHABILITATION HOSPITAL OF ALTOONA

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	0.75	1.33	0.02 - 7.38	Same as
2009	1	1.09	0.92	0.01 - 5.1	Same as
2010	0	0.71	0.00	0 - 5.15	Same as
2011	0	0.79	0.00	0 - 4.62	Same as
2012	0	0.81	0.00	0 - 4.51	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



HEALTHSOUTH REHABILITATION HOSPITAL OF ERIE

NHSN ID: 11810

Hospital type: Rehabilitation hospital

Number of licensed beds (2012): 108

Number of reported Healthcare-Associated Infections:

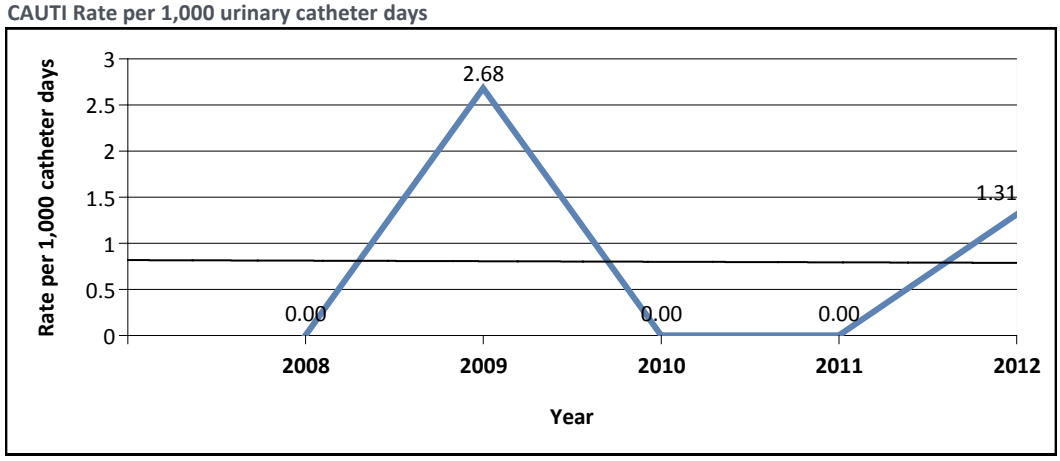
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	8,032	1	0	1	1	1	0	0	2	9	0	1.87
2009	24,254	2	0	0	0	4	0	0	4	11	0	0.87
2010	26,319	3	0	13	0	2	0	0	3	4	0	0.95
2011	25,219	1	0	1	0	4	0	0	0	3	0	0.36
2012	22,729	1	0	8	0	0	0	0	0	2	0	0.48

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.83	0.00	0 - 4.42	Same as
2009	3	1.84	1.63	0.33 - 4.76	Same as
2010	0	2.06	0.00	0 - 1.78	Same as
2011	0	1.15	0.00	0 - 3.2	Same as
2012	1	0.98	1.02	0.01 - 5.69	Same as

CAUTI Rate per 1,000 urinary catheter days



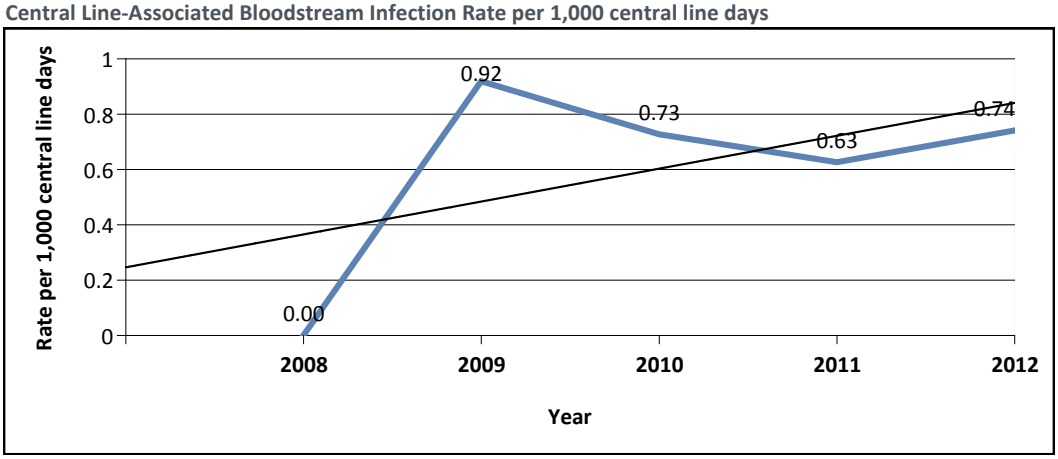
HEALTHSOUTH REHABILITATION HOSPITAL OF ERIE

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.91	0.00	0 - 4.01	Same as
2009	2	2.14	0.94	0.11 - 3.38	Same as
2010	1	1.10	0.91	0.01 - 5.08	Same as
2011	1	1.06	0.94	0.01 - 5.25	Same as
2012	1	0.84	1.19	0.02 - 6.63	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



HEALTHSOUTH REHABILITATION HOSPITAL OF MECHANICSBURG

NHSN ID: 12402

Hospital type: Rehabilitation hospital

Number of licensed beds (2012): 75

Number of reported Healthcare-Associated Infections:

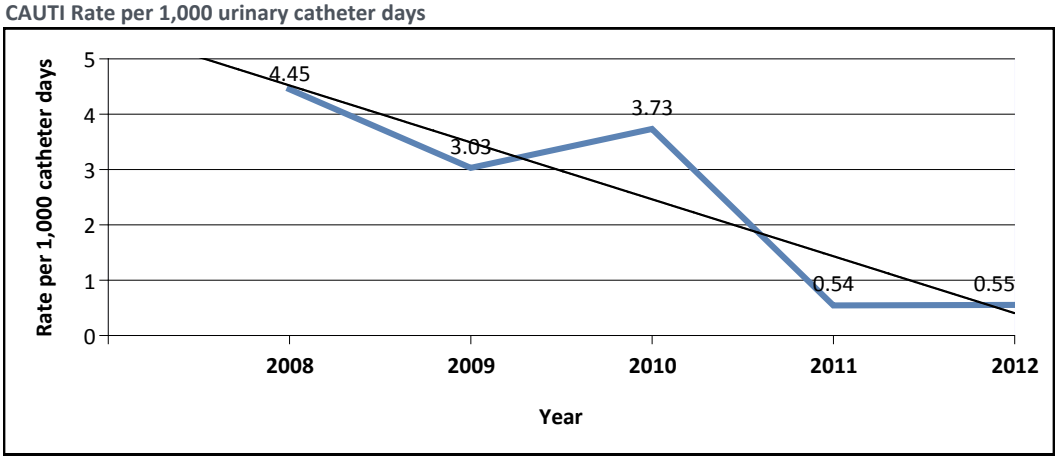
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	7,446	1	0	6	0	1	0	0	0	7	0	2.01
2009	17,563	0	0	6	0	2	0	0	0	22	0	1.71
2010	17,596	1	0	4	0	3	0	0	0	15	0	1.31
2011	16,976	0	0	2	0	0	0	0	0	9	0	0.65
2012	18,430	2	0	2	0	0	0	0	0	5	0	0.49

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	1.77	1.69	0.34 - 4.95	Same as
2009	6	3.21	1.87	0.68 - 4.06	Same as
2010	7	3.14	2.23	0.89 - 4.59	Same as
2011	1	2.15	0.46	0.01 - 2.58	Same as
2012	1	2.46	0.41	0.01 - 2.26	Same as

CAUTI Rate per 1,000 urinary catheter days



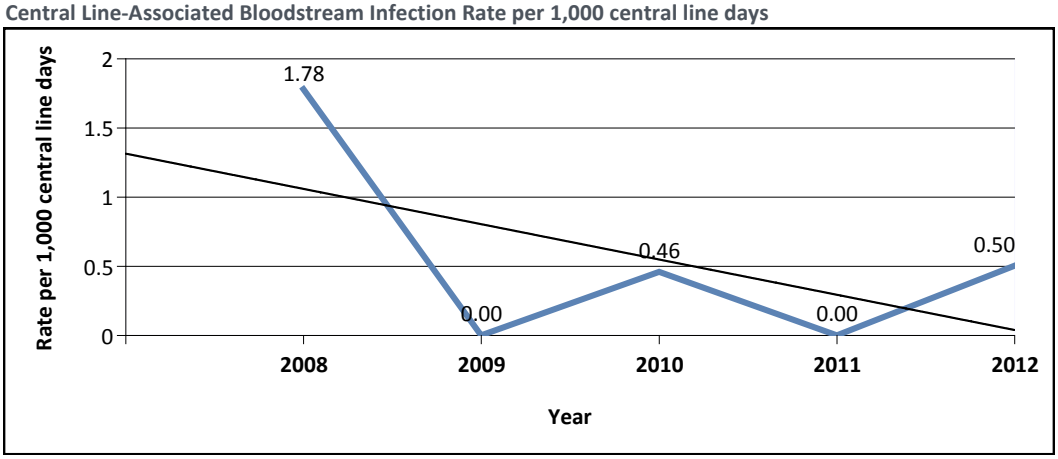
HEALTHSOUTH REHABILITATION HOSPITAL OF MECHANICSBURG

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	0.79	1.27	0.02 - 7.07	Same as
2009	0	1.87	0.00	0 - 1.96	Same as
2010	1	1.53	0.65	0.01 - 3.64	Same as
2011	0	1.28	0.00	0 - 2.86	Same as
2012	1	1.35	0.74	0.01 - 4.11	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



HEALTHSOUTH REHABILITATION HOSPITAL OF SEWICKLEY

NHSN ID: 12066

Hospital type: Rehabilitation hospital

Number of licensed beds (2012): 44

Number of reported Healthcare-Associated Infections:

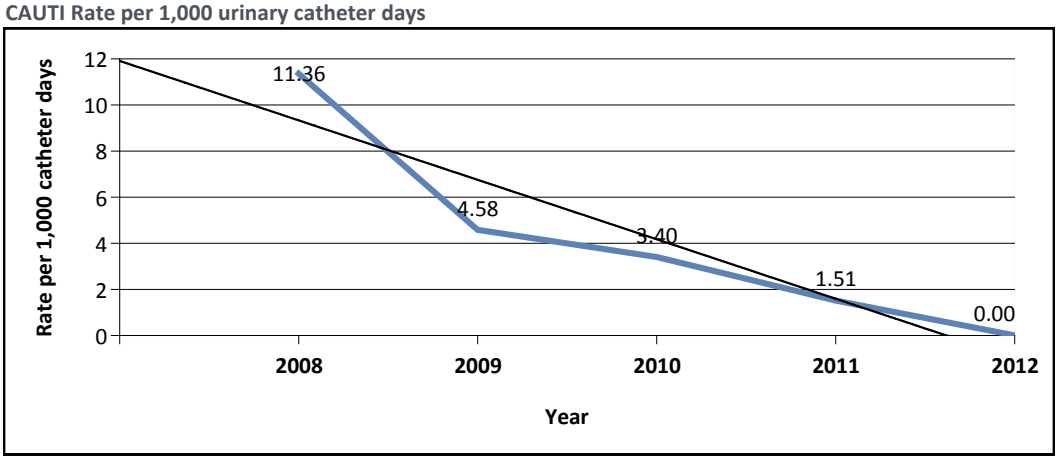
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,541	0	0	2	0	0	0	0	1	12	0	3.30
2009	10,110	1	0	2	0	0	0	0	0	18	0	2.08
2010	9,586	1	0	4	0	0	0	0	1	12	0	1.88
2011	11,046	0	0	0	0	2	0	0	0	14	0	1.45
2012	12,014	0	0	0	0	0	0	0	0	14	0	1.17

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	0.74	4.05	0.81 - 11.84	Same as
2009	4	1.42	2.81	0.76 - 7.2	Same as
2010	2	1.00	2.00	0.22 - 7.22	Same as
2011	1	0.70	1.43	0.02 - 7.95	Same as
2012	0	1.18	0.00	0 - 3.1	Same as

CAUTI Rate per 1,000 urinary catheter days



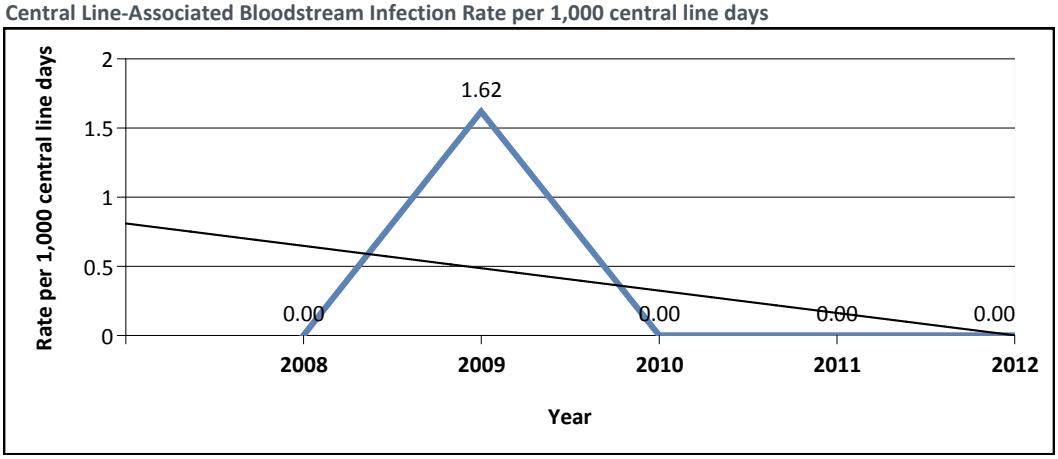
HEALTHSOUTH REHABILITATION HOSPITAL OF SEWICKLEY

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.49	0.00	0 - 7.48	Same as
2009	1	0.66	1.52	0.02 - 8.44	Same as
2010	0	0.42	0.00	0 - 8.81	Same as
2011	0	0.54	0.00	0 - 6.78	Same as
2012	0	0.56	0.00	0 - 6.6	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



HEALTHSOUTH REHABILITATION HOSPITAL OF YORK

NHSN ID: 12058

Hospital type: Rehabilitation hospital

Number of licensed beds (2012): 90

Number of reported Healthcare-Associated Infections:

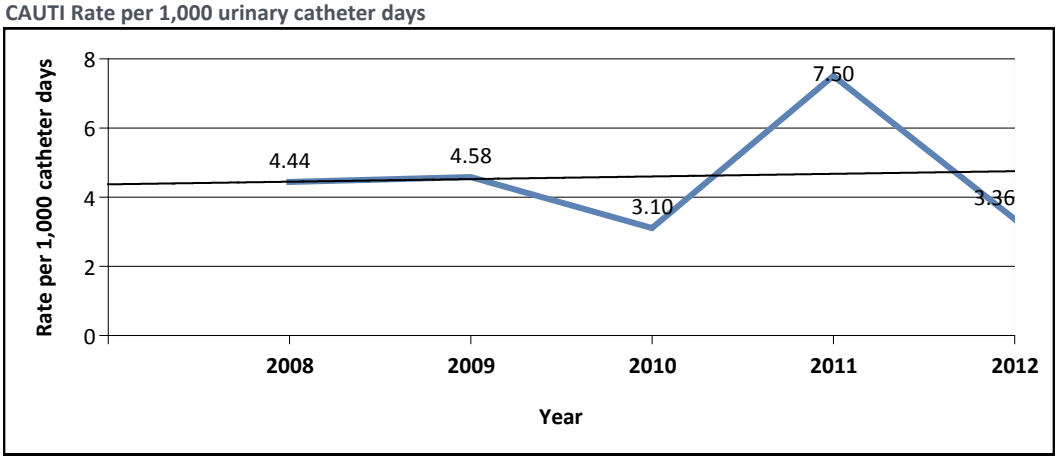
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	10,125	0	0	7	0	0	0	0	0	15	0	2.17
2009	19,198	0	0	24	0	0	0	0	1	27	0	2.71
2010	19,468	0	1	2	1	1	0	0	3	20	0	1.44
2011	20,041	1	8	20	1	5	0	0	1	34	0	3.49
2012	19,635	1	5	6	1	9	0	0	5	19	0	2.34

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	4	2.37	1.69	0.45 - 4.32	Same as
2009	7	2.49	2.81	1.12 - 5.78	Worse
2010	6	3.25	1.85	0.67 - 4.02	Same as
2011	11	1.60	6.89	3.43 - 12.33	Worse
2012	4	1.56	2.56	0.69 - 6.55	Same as

CAUTI Rate per 1,000 urinary catheter days



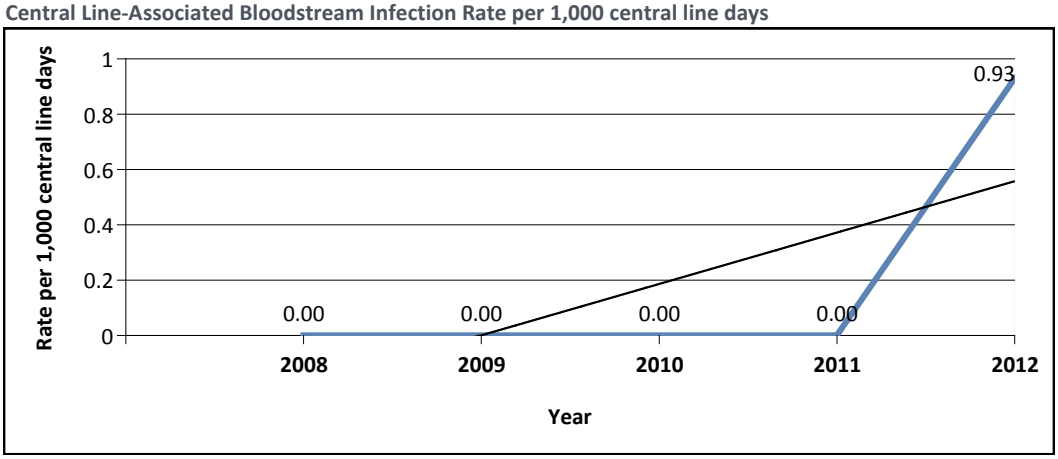
HEALTHSOUTH REHABILITATION HOSPITAL OF YORK

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.70	0.00	0 - 5.2	Same as
2009	0	1.02	0.00	0 - 3.59	Same as
2010	0	0.59	0.00	0 - 6.23	Same as
2011	0	0.54	0.00	0 - 6.77	Same as
2012	1	0.66	1.51	0.02 - 8.42	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



HEART OF LANCASTER REGIONAL MEDICAL CENTER

NHSN ID: 12571

Hospital type: Acute care general hospital

Number of licensed beds (2012): 153

Number of reported Healthcare-Associated Infections:

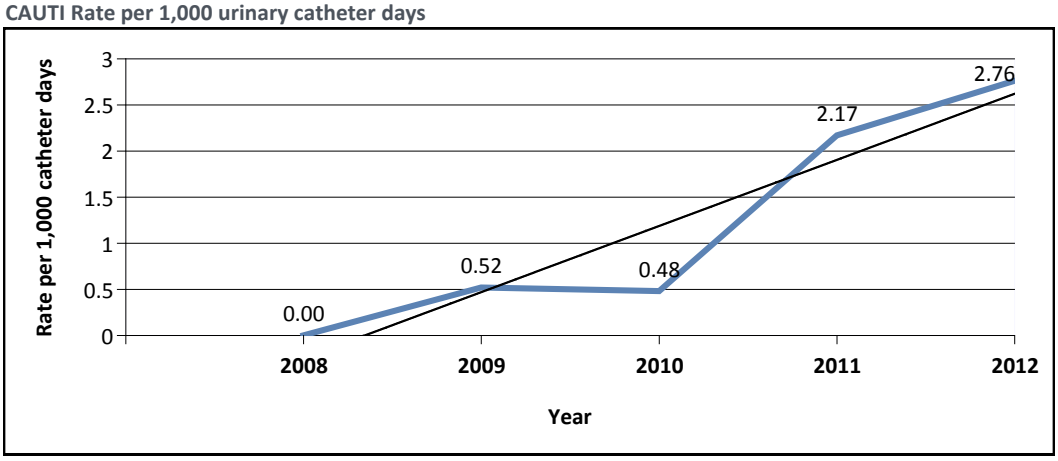
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,353	0	0	0	0	1	0	1	0	0	1	0.89
2009	9,706	1	0	2	0	4	0	6	0	1	0	1.44
2010	10,276	0	0	2	0	2	3	16	1	2	0	2.53
2011	10,692	2	0	0	0	5	6	14	3	10	0	3.74
2012	11,050	1	0	0	0	1	1	21	6	7	0	3.35

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	1.64	0.00	0 - 2.24	Same as
2009	1	4.25	0.24	0 - 1.31	Same as
2010	1	3.65	0.27	0 - 1.52	Same as
2011	5	3.88	1.29	0.41 - 3	Same as
2012	5	3.35	1.49	0.48 - 3.49	Same as

CAUTI Rate per 1,000 urinary catheter days



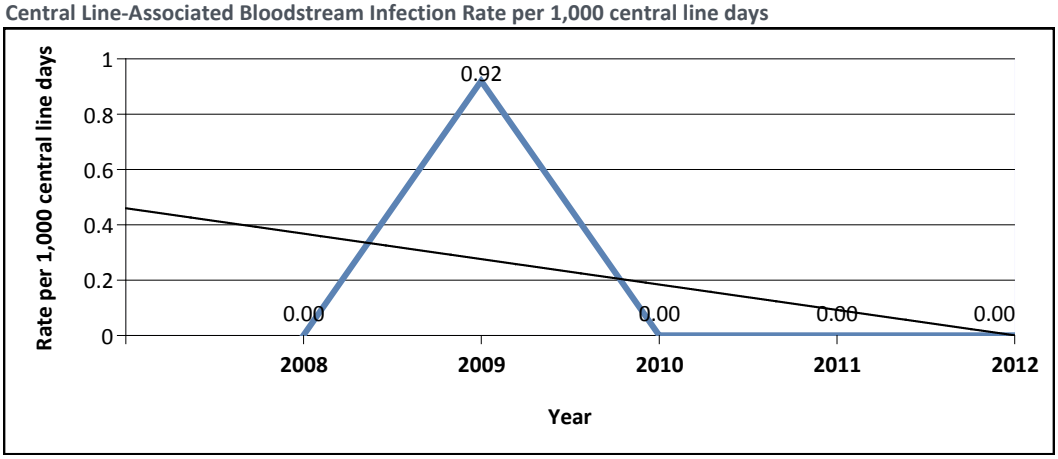
HEART OF LANCASTER REGIONAL MEDICAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.57	0.00	0 - 6.38	Same as
2009	1	1.42	0.70	0.01 - 3.91	Same as
2010	0	0.79	0.00	0 - 4.66	Same as
2011	0	0.65	0.00	0 - 5.66	Same as
2012	0	0.51	0.00	0 - 7.19	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008				-	
2009				-	
2010	0	0.18	0.00	0 - 20.88	Same as
2011	1	0.22	4.59	0.06 - 25.53	Same as
2012	0	0.19	0.00	0 - 19.63	Same as

HERITAGE VALLEY BEAVER

NHSN ID: 11831

Hospital type: Acute care general hospital

Number of licensed beds (2012): 361

Number of reported Healthcare-Associated Infections:

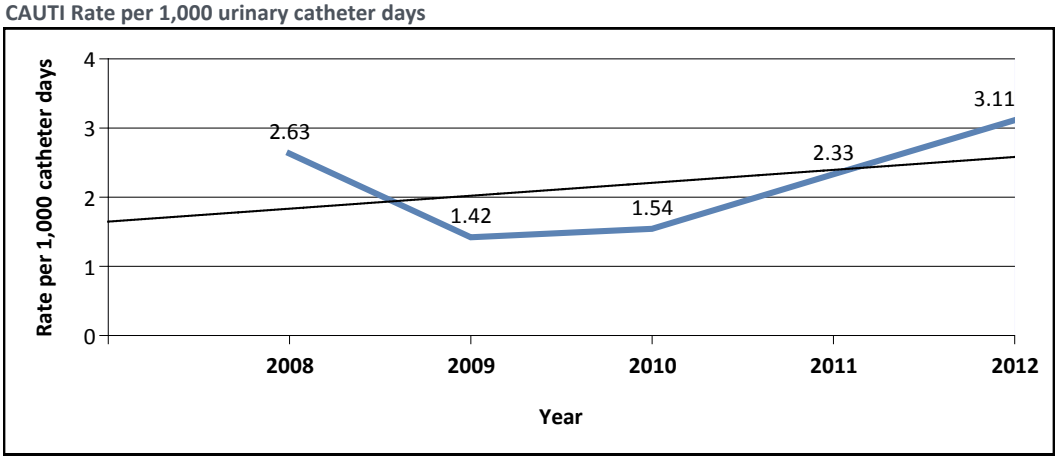
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	34,571	9	0	15	0	6	1	26	2	21	0	2.31
2009	86,120	30	0	41	0	17	0	55	6	34	0	2.12
2010	86,652	18	2	43	2	17	1	71	12	45	0	2.44
2011	83,343	24	0	46	1	20	2	37	11	64	2	2.48
2012	79,459	15	0	44	2	22	0	47	7	79	0	2.72

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	21	18.34	1.15	0.71 - 1.75	Same as
2009	24	37.31	0.64	0.41 - 0.96	Better
2010	30	34.15	0.88	0.59 - 1.25	Same as
2011	46	33.76	1.36	1 - 1.82	Same as
2012	57	34.40	1.66	1.25 - 2.15	Worse

CAUTI Rate per 1,000 urinary catheter days



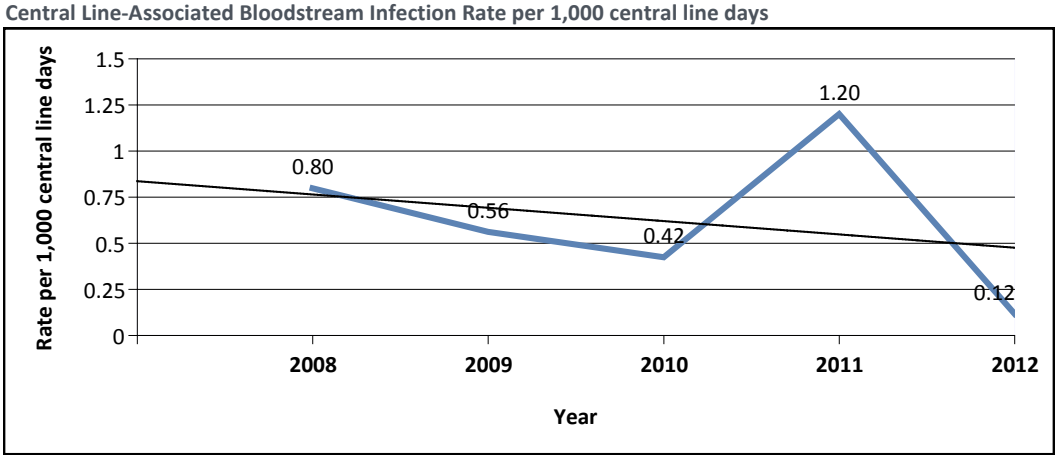
HERITAGE VALLEY BEAVER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	4	7.29	0.55	0.15 - 1.4	Same as
2009	6	14.08	0.43	0.16 - 0.93	Better
2010	4	8.47	0.47	0.13 - 1.21	Same as
2011	11	8.58	1.28	0.64 - 2.29	Same as
2012	1	6.34	0.16	0 - 0.88	Better

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



HERITAGE VALLEY SEWICKLEY

NHSN ID: 10375

Hospital type: Acute care general hospital

Number of licensed beds (2012): 186

Number of reported Healthcare-Associated Infections:

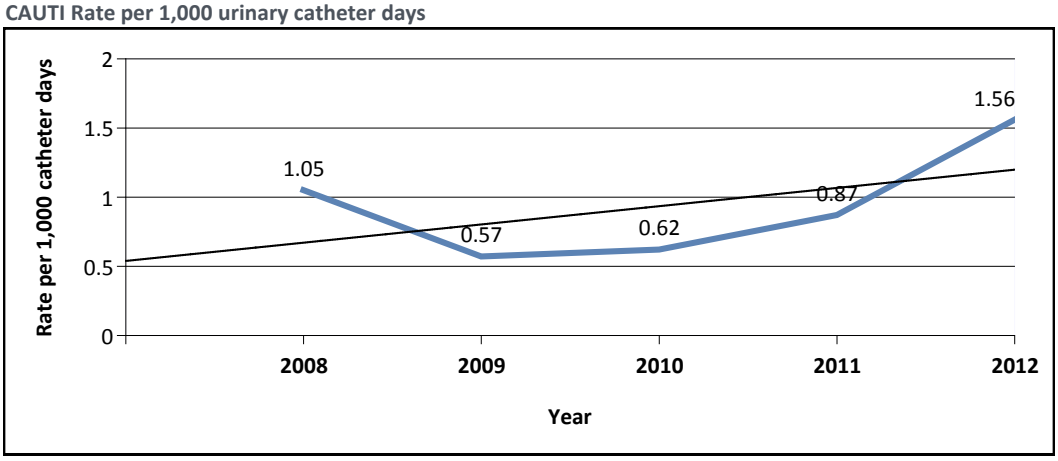
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	22,112	3	0	6	0	2	1	5	1	7	1	1.18
2009	47,101	4	1	2	0	2	0	36	2	11	0	1.23
2010	45,426	3	0	10	0	2	0	39	0	11	0	1.43
2011	46,555	8	0	28	3	8	0	29	1	17	0	2.02
2012	44,927	4	0	20	0	11	0	35	3	31	0	2.31

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	7	14.69	0.48	0.19 - 0.98	Better
2009	8	22.55	0.35	0.15 - 0.7	Better
2010	8	20.92	0.38	0.16 - 0.75	Better
2011	11	16.65	0.66	0.33 - 1.18	Same as
2012	19	17.12	1.11	0.67 - 1.73	Same as

CAUTI Rate per 1,000 urinary catheter days



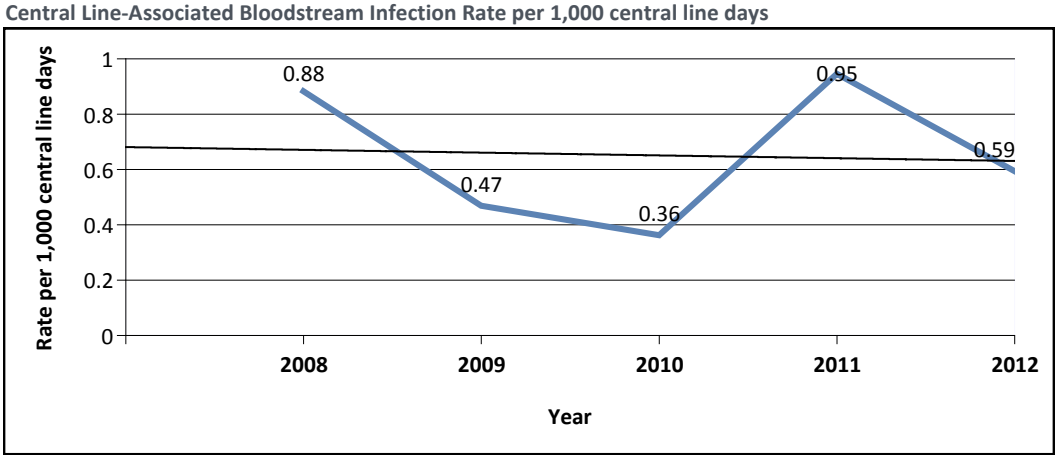
HERITAGE VALLEY SEWICKLEY

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	3.23	0.62	0.07 - 2.24	Same as
2009	3	5.75	0.52	0.1 - 1.52	Same as
2010	2	3.89	0.51	0.06 - 1.86	Same as
2011	5	3.18	1.57	0.51 - 3.67	Same as
2012	3	3.47	0.87	0.17 - 2.53	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



HIGHLANDS HOSPITAL

NHSN ID: 11902

Hospital type: Acute care general hospital

Number of licensed beds (2012): 71

Number of reported Healthcare-Associated Infections:

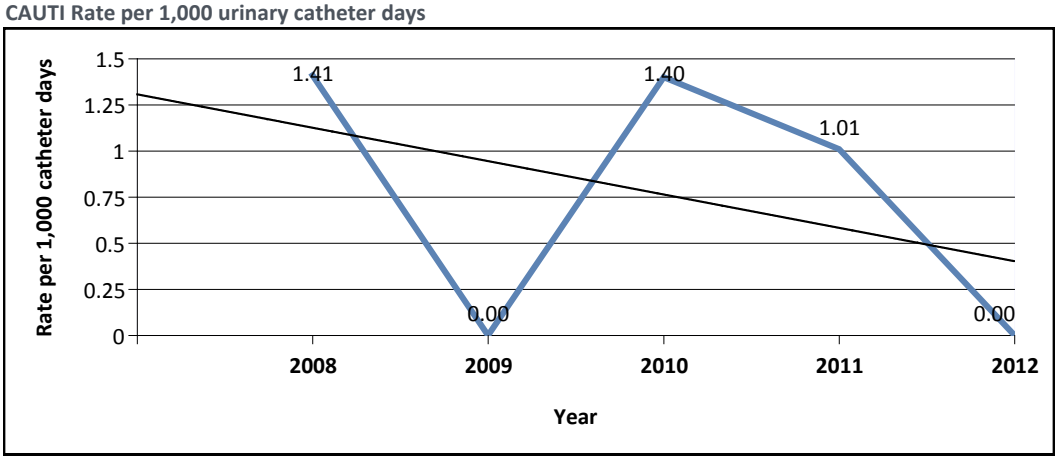
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	5,867	3	0	1	0	0	0	1	0	1	1	1.19
2009	11,495	0	0	1	0	0	0	1	0	0	0	0.17
2010	12,273	0	0	1	0	2	0	2	1	1	0	0.57
2011	12,457	1	1	0	0	0	0	6	0	1	0	0.72
2012	11,661	2	0	4	0	0	0	5	0	0	0	0.94

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	1.78	0.56	0.01 - 3.12	Same as
2009	0	2.11	0.00	0 - 1.74	Same as
2010	1	1.22	0.82	0.01 - 4.57	Same as
2011	1	1.10	0.91	0.01 - 5.07	Same as
2012	0	1.25	0.00	0 - 2.94	Same as

CAUTI Rate per 1,000 urinary catheter days



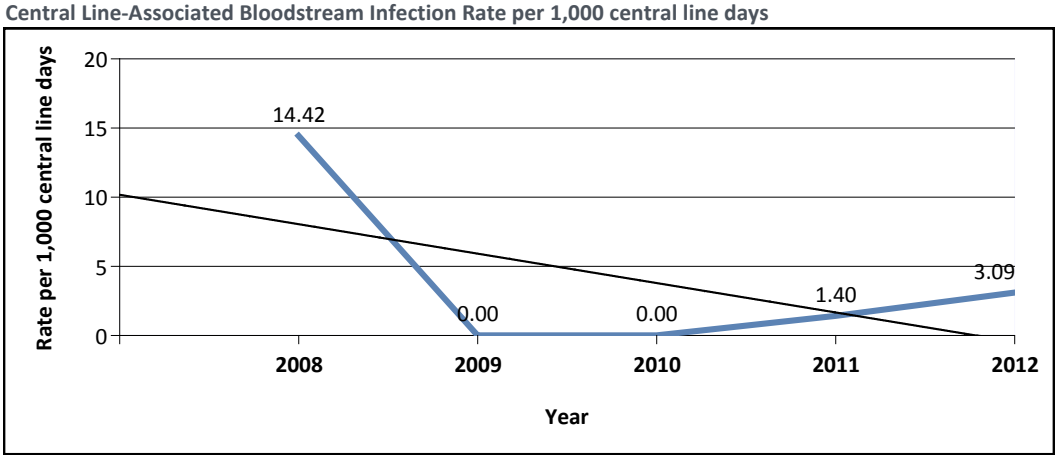
HIGHLANDS HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	0.28	10.76	2.16 - 31.43	Worse
2009	0	0.51	0.00	0 - 7.2	Same as
2010	0	0.30	0.00	0 - 12.17	Same as
2011	1	0.48	2.08	0.03 - 11.59	Same as
2012	2	0.40	5.02	0.56 - 18.12	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



HOLY REDEEMER HOSPITAL AND MEDICAL CENTER

NHSN ID: 11973

Hospital type: Acute care general hospital

Number of licensed beds (2012): 242

Number of reported Healthcare-Associated Infections:

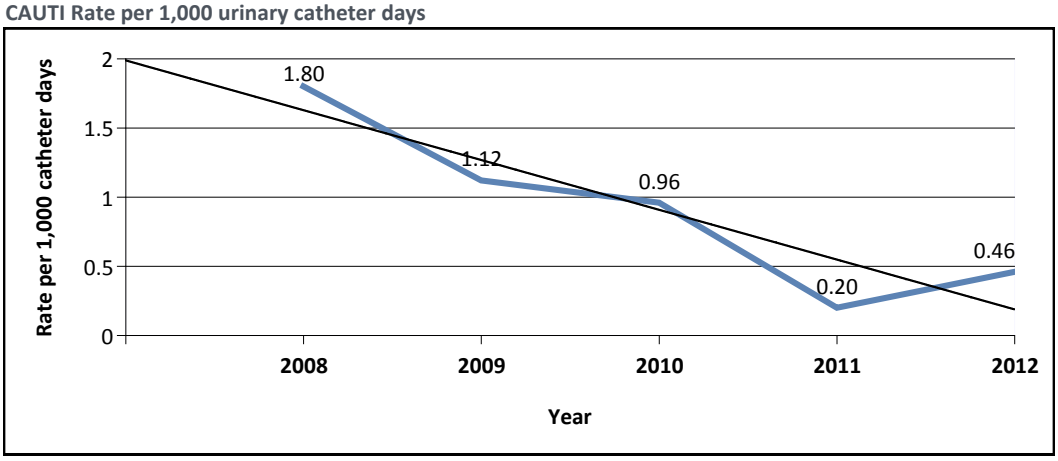
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	33,506	11	0	7	0	0	1	9	2	19	0	1.46
2009	67,803	19	3	21	8	3	1	30	2	35	2	1.83
2010	64,672	7	0	31	2	13	2	34	6	16	1	1.73
2011	64,189	3	0	75	0	6	1	19	5	10	0	1.85
2012	60,087	7	0	23	0	10	0	28	5	12	0	1.41

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	12	15.63	0.77	0.4 - 1.34	Same as
2009	14	20.07	0.70	0.38 - 1.17	Same as
2010	11	18.82	0.58	0.29 - 1.05	Same as
2011	2	12.30	0.16	0.02 - 0.59	Better
2012	4	11.95	0.33	0.09 - 0.86	Better

CAUTI Rate per 1,000 urinary catheter days



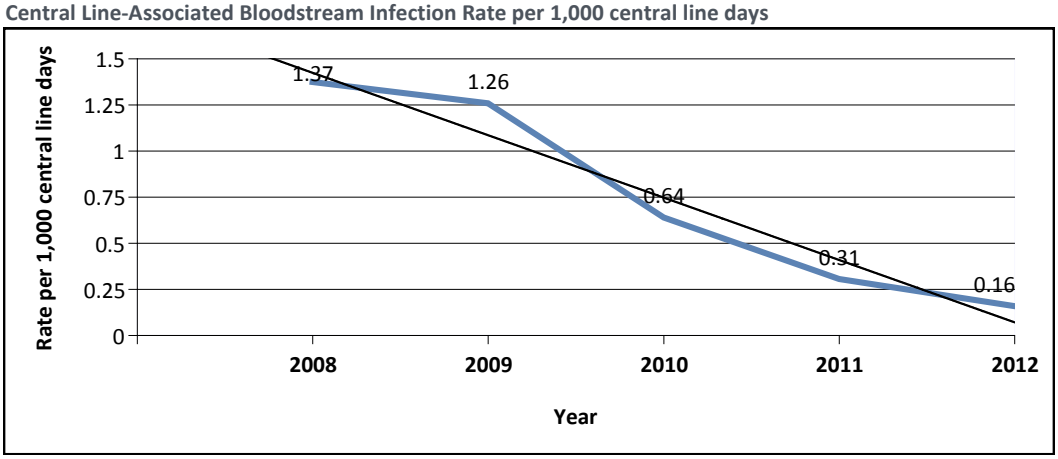
HOLY REDEEMER HOSPITAL AND MEDICAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	4	4.12	0.97	0.26 - 2.48	Same as
2009	8	6.07	1.32	0.57 - 2.6	Same as
2010	4	4.50	0.89	0.24 - 2.27	Same as
2011	2	3.96	0.51	0.06 - 1.82	Same as
2012	1	4.34	0.23	0 - 1.28	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	0.70	1.42	0 - 7.9	Same as
2009	2	0.93	2.15	0.24 - 7.76	Same as
2010	1	0.54	1.87	0.02 - 10.39	Same as
2011	1	0.96	1.04	0.01 - 5.8	Same as
2012	2	0.87	2.31	0.26 - 8.33	Same as

HOLY SPIRIT HOSPITAL

NHSN ID: 12387

Hospital type: Acute care general hospital

Number of licensed beds (2012): 315

Number of reported Healthcare-Associated Infections:

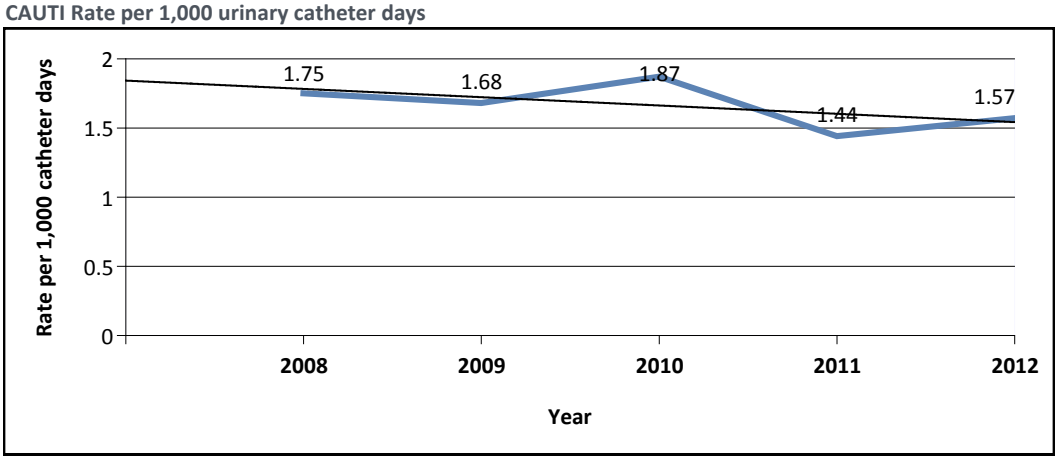
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	31,669	10	4	23	0	9	0	20	4	22	0	2.91
2009	69,804	14	3	43	7	18	0	58	7	35	0	2.65
2010	71,373	17	4	34	5	29	1	39	5	43	2	2.51
2011	73,682	12	2	32	4	8	0	36	6	38	1	1.89
2012	72,802	9	1	24	3	11	0	36	1	29	1	1.58

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	14	18.09	0.77	0.42 - 1.3	Same as
2009	29	27.64	1.05	0.7 - 1.51	Same as
2010	31	27.19	1.14	0.77 - 1.62	Same as
2011	24	21.31	1.13	0.72 - 1.68	Same as
2012	23	20.37	1.13	0.72 - 1.69	Same as

CAUTI Rate per 1,000 urinary catheter days



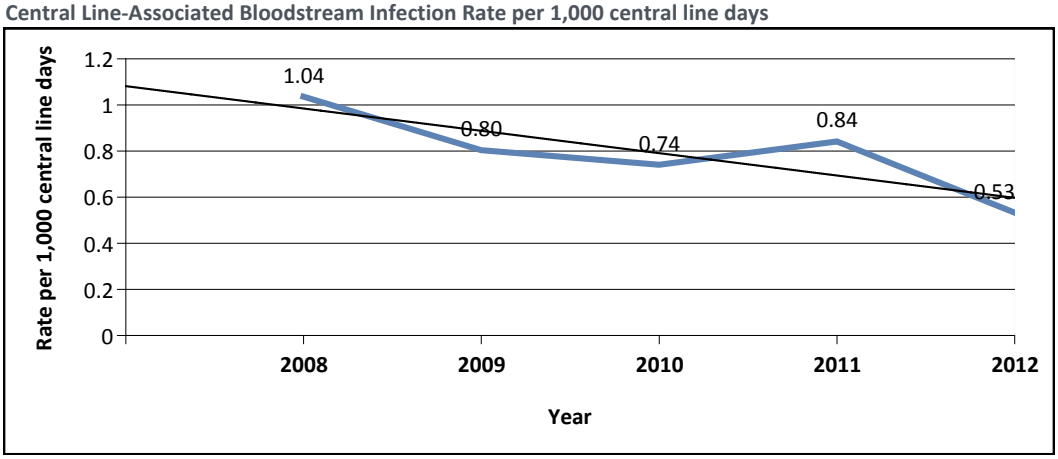
HOLY SPIRIT HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	6	8.54	0.70	0.26 - 1.53	Same as
2009	10	10.42	0.96	0.46 - 1.77	Same as
2010	9	8.12	1.11	0.51 - 2.1	Same as
2011	10	6.73	1.49	0.71 - 2.73	Same as
2012	5	6.62	0.76	0.24 - 1.76	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.06	0.00	0 - 60.62	Same as
2009	0	0.06	0.00	0 - 66	Same as
2010	0	0.04	0.00	0 - 85.45	Same as
2011	0	0.32	0.00	0 - 11.46	Same as
2012	0	0.22	0.00	0 - 16.38	Same as

HORSHAM CLINIC

NHSN ID: 12543

Hospital type: Psychiatric hospital

Number of licensed beds (2012): 146

Number of reported Healthcare-Associated Infections:

Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008		0	22	0	5	4	0	0	19	20	0	
2009	50,200	0	65	0	7	4	0	0	21	0	0	1.93
2010	50,538	0	44	0	4	0	0	0	15	2	0	1.29
2011	50,200	0	21	0	0	0	0	0	0	15	0	0.72
2012	63,800	0	21	0	0	0	1	0	0	19	0	0.64

HOSPITAL OF FOX CHASE CANCER CENTER

NHSN ID: 12134

Hospital type: Acute care general hospital

Number of licensed beds (2012): 98

Number of reported Healthcare-Associated Infections:

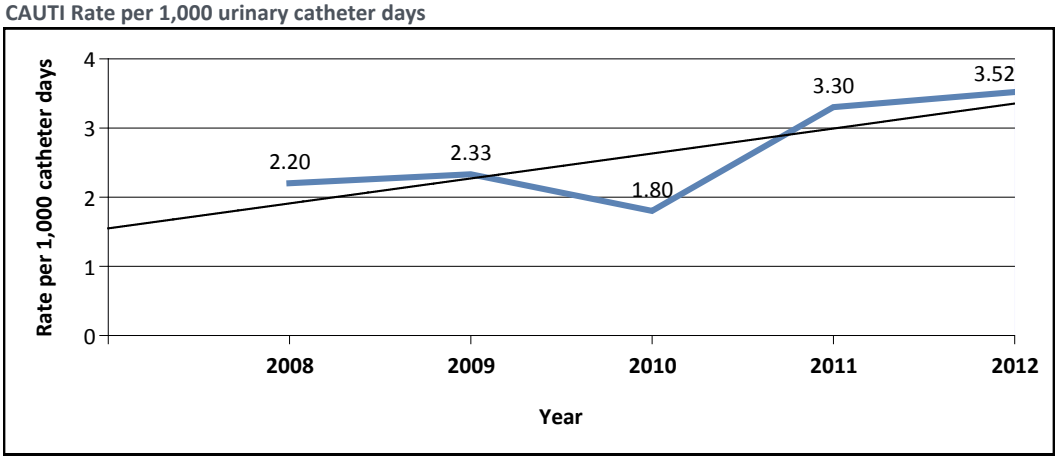
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	11,091	18	0	0	0	11	0	22	0	18	0	6.22
2009	23,117	6	0	13	0	8	0	17	0	23	0	2.90
2010	22,646	5	0	18	0	5	0	38	0	19	0	3.75
2011	22,367	11	0	8	0	6	0	37	0	24	0	3.84
2012	22,764	18	0	16	1	9	0	43	0	33	0	5.27

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	9	8.76	1.03	0.47 - 1.95	Same as
2009	18	16.98	1.06	0.63 - 1.68	Same as
2010	13	12.56	1.03	0.55 - 1.77	Same as
2011	21	11.18	1.88	1.16 - 2.87	Worse
2012	23	12.43	1.85	1.17 - 2.78	Worse

CAUTI Rate per 1,000 urinary catheter days



Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Specialty Care Area

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation

HOSPITAL OF FOX CHASE CANCER CENTER

2008	15	9.76	1.54	0.86 - 2.53	Same as
2009	6	12.61	0.48	0.17 - 1.04	Same as
2010	5	11.46	0.44	0.14 - 1.02	Same as
2011	9	12.75	0.71	0.32 - 1.34	Same as
2012	14	13.13	1.07	0.58 - 1.79	Same as

HOSPITAL OF THE UNIV OF PENNSYLVANIA

NHSN ID: 10219

Hospital type: Acute care general hospital

Number of licensed beds (2012): 784

Number of reported Healthcare-Associated Infections:

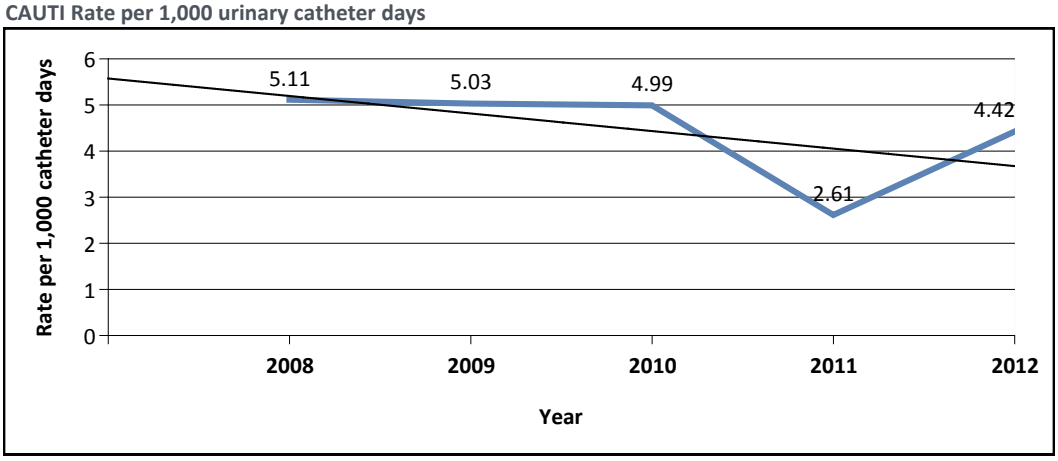
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	116,109	62	10	166	76	51	0	139	43	172	8	6.26
2009	249,449	73	50	387	151	119	5	226	82	335	18	5.80
2010	251,135	41	38	285	103	38	2	230	83	348	13	4.70
2011	249,501	39	52	232	103	71	2	264	60	235	11	4.28
2012	254,736	79	34	316	118	146	3	260	61	325	15	5.33

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	119	54.56	2.18	1.81 - 2.61	Worse
2009	230	101.23	2.27	1.99 - 2.59	Worse
2010	227	80.17	2.83	2.47 - 3.22	Worse
2011	114	71.65	1.59	1.31 - 1.91	Worse
2012	194	81.37	2.38	2.06 - 2.74	Worse

CAUTI Rate per 1,000 urinary catheter days



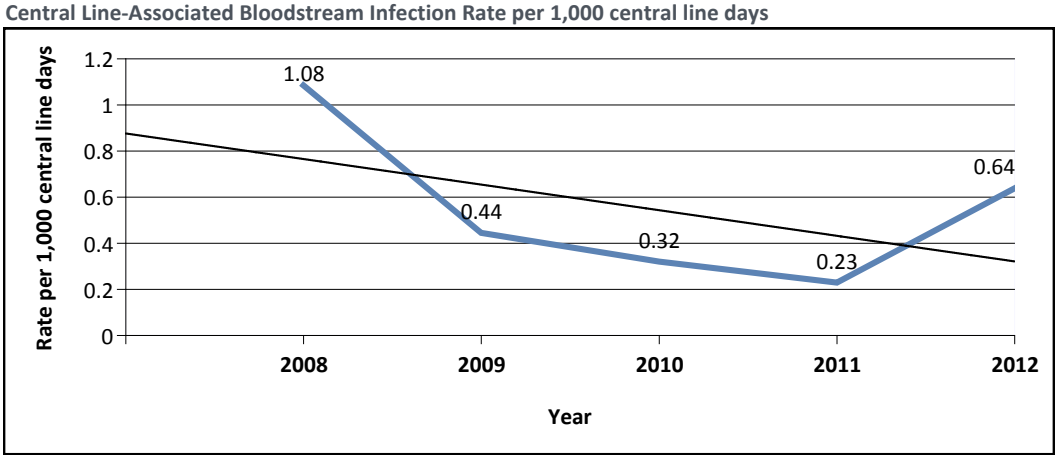
HOSPITAL OF THE UNIV OF PENNSYLVANIA

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	39	54.68	0.71	0.51 - 0.98	Better
2009	33	79.73	0.41	0.28 - 0.58	Better
2010	25	59.65	0.42	0.27 - 0.62	Better
2011	18	61.29	0.29	0.17 - 0.46	Better
2012	50	69.18	0.72	0.54 - 0.95	Better

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	7	3.48	2.01	0.51 - 4.14	Same as
2009	10	4.72	2.12	1.01 - 3.9	Worse
2010	4	5.80	0.69	0.19 - 1.77	Same as
2011	6	3.59	1.67	0.61 - 3.64	Same as
2012	1	3.33	0.30	0 - 1.67	Same as

INDIANA REGIONAL MEDICAL CENTER

NHSN ID: 11759

Hospital type: Acute care general hospital

Number of licensed beds (2012): 164

Number of reported Healthcare-Associated Infections:

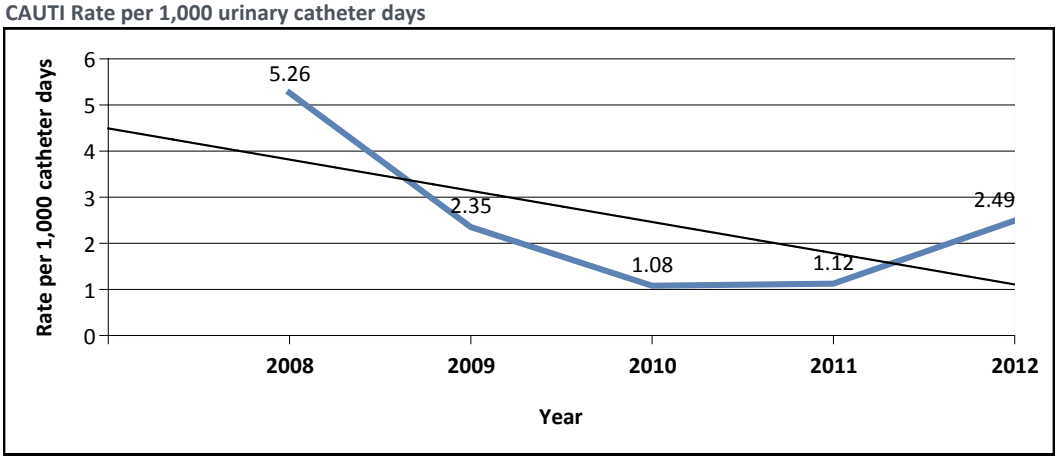
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	18,803	4	0	10	0	6	0	8	8	22	0	3.08
2009	43,329	4	0	32	0	12	1	10	8	22	0	2.05
2010	39,751	3	1	16	0	13	0	16	3	12	0	1.61
2011	40,201	3	0	23	0	14	0	12	1	15	0	1.69
2012	38,299	3	0	10	0	7	0	18	1	17	0	1.46

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	11	5.33	2.06	1.03 - 3.69	Worse
2009	10	6.93	1.44	0.69 - 2.65	Same as
2010	4	6.22	0.64	0.17 - 1.65	Same as
2011	4	3.99	1.00	0.27 - 2.57	Same as
2012	7	3.73	1.88	0.75 - 3.87	Same as

CAUTI Rate per 1,000 urinary catheter days



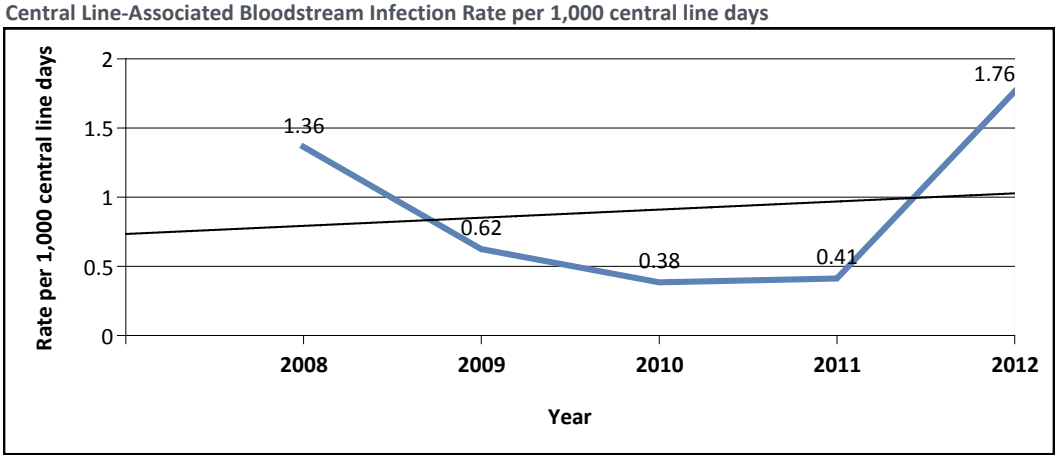
INDIANA REGIONAL MEDICAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	2.06	0.97	0.11 - 3.51	Same as
2009	2	3.28	0.61	0.07 - 2.2	Same as
2010	1	2.01	0.50	0.01 - 2.77	Same as
2011	1	1.62	0.62	0.01 - 3.43	Same as
2012	3	1.01	2.97	0.6 - 8.67	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



J C BLAIR MEMORIAL HOSP

NHSN ID: 11724

Hospital type: Acute care general hospital

Number of licensed beds (2012): 100

Number of reported Healthcare-Associated Infections:

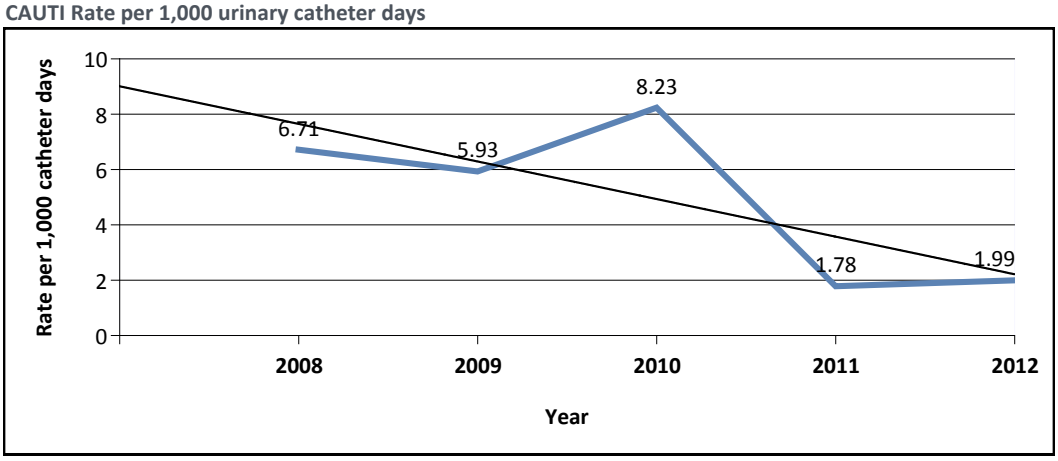
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	6,495	1	2	1	0	9	0	14	0	9	1	5.70
2009	11,852	1	1	13	1	9	0	14	0	16	0	4.64
2010	10,598	1	4	3	0	9	0	20	0	20	0	5.38
2011	9,767	1	2	4	0	9	1	15	3	8	0	4.40
2012	8,363	1	2	4	0	9	1	12	3	6	0	4.54

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	8	2.83	2.83	1.22 - 5.57	Worse
2009	14	3.79	3.69	2.02 - 6.19	Worse
2010	16	3.21	4.99	2.85 - 8.1	Worse
2011	3	2.08	1.45	0.29 - 4.22	Same as
2012	3	2.09	1.44	0.29 - 4.2	Same as

CAUTI Rate per 1,000 urinary catheter days



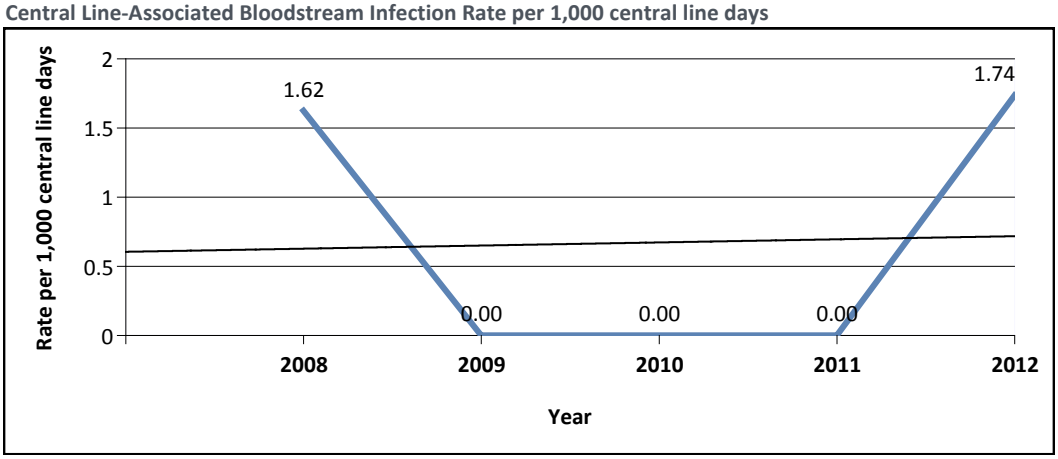
J C BLAIR MEMORIAL HOSP

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	0.87	1.15	0.01 - 6.37	Same as
2009	0	1.02	0.00	0 - 3.59	Same as
2010	0	0.71	0.00	0 - 5.2	Same as
2011	0	0.41	0.00	0 - 8.93	Same as
2012	1	0.37	2.73	0.04 - 15.19	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



JAMESON MEMORIAL HOSPITAL

NHSN ID: 11954

Hospital type: Acute care general hospital

Number of licensed beds (2012): 217

Number of reported Healthcare-Associated Infections:

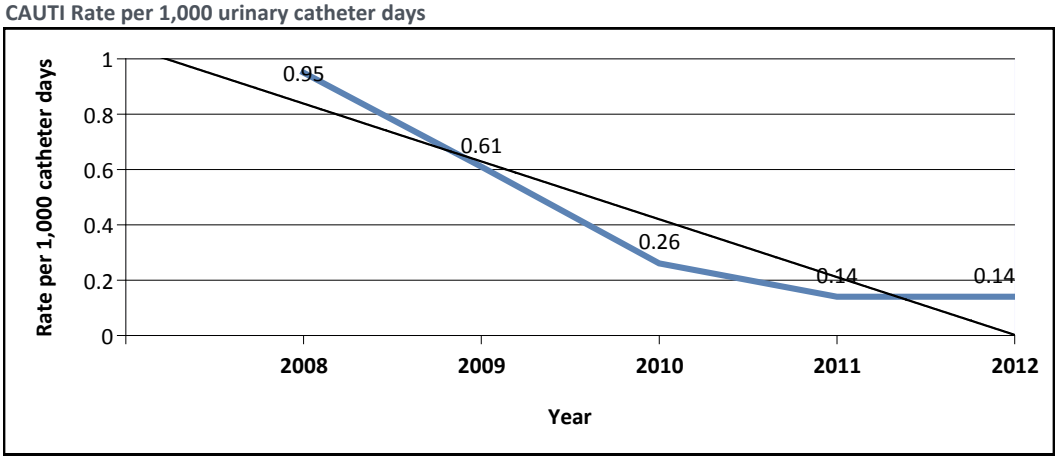
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	20,202	1	0	16	0	4	0	4	0	8	0	1.63
2009	53,157	6	0	54	0	7	0	18	0	6	1	1.73
2010	44,114	6	0	17	0	6	0	13	1	4	2	1.11
2011	38,782	7	0	15	0	6	0	8	0	3	1	1.03
2012	39,038	2	0	21	0	11	0	13	0	4	1	1.33

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	4	9.83	0.41	0.11 - 1.04	Same as
2009	5	13.19	0.38	0.12 - 0.88	Better
2010	2	12.59	0.16	0.02 - 0.57	Better
2011	1	8.72	0.11	0 - 0.64	Better
2012	1	9.55	0.10	0 - 0.58	Better

CAUTI Rate per 1,000 urinary catheter days



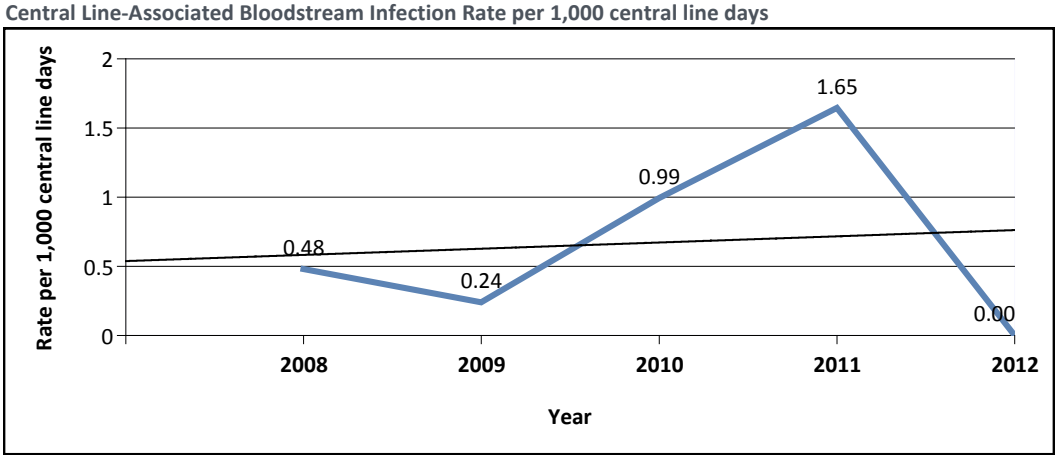
JAMESON MEMORIAL HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	2.97	0.34	0 - 1.87	Same as
2009	1	4.10	0.24	0 - 1.36	Same as
2010	4	2.96	1.35	0.36 - 3.46	Same as
2011	6	2.26	2.65	0.97 - 5.77	Same as
2012	0	2.66	0.00	0 - 1.38	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



JEANES HOSPITAL

NHSN ID: 11459

Hospital type: Acute care general hospital

Number of licensed beds (2012): 176

Number of reported Healthcare-Associated Infections:

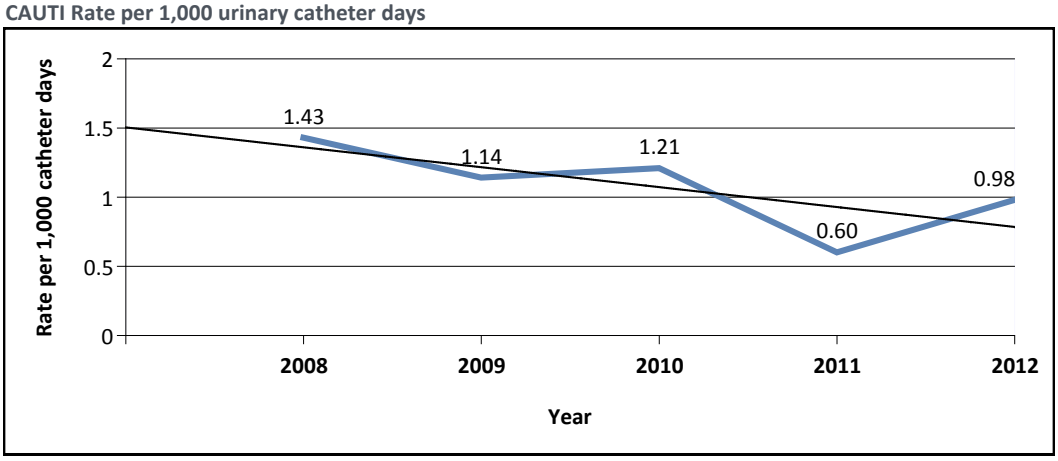
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	16,420	5	0	6	0	1	0	8	3	9	0	1.95
2009	43,447	16	0	10	0	0	0	12	3	18	1	1.38
2010	42,199	8	0	11	0	4	0	11	1	15	0	1.18
2011	41,037	3	0	4	1	5	0	12	1	8	0	0.83
2012	38,533	3	0	8	0	0	0	6	0	16	1	0.88

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	7	10.83	0.65	0.26 - 1.33	Same as
2009	11	21.27	0.52	0.26 - 0.93	Better
2010	12	17.39	0.69	0.36 - 1.21	Same as
2011	5	13.94	0.36	0.12 - 0.84	Better
2012	8	11.36	0.70	0.3 - 1.39	Same as

CAUTI Rate per 1,000 urinary catheter days



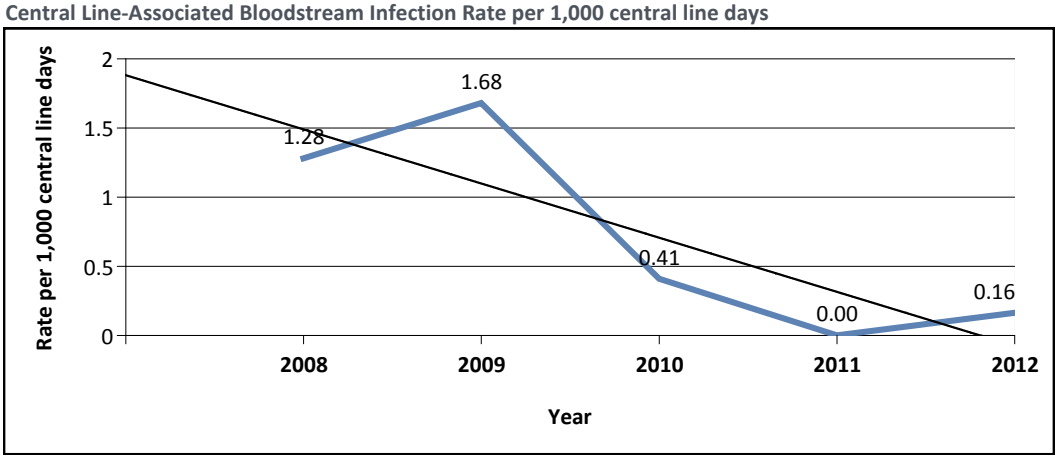
JEANES HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	4	4.61	0.87	0.23 - 2.22	Same as
2009	11	8.27	1.33	0.66 - 2.38	Same as
2010	3	6.13	0.49	0.1 - 1.43	Same as
2011	0	5.89	0.00	0 - 0.62	Better
2012	1	4.47	0.22	0 - 1.25	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



JEFFERSON REGIONAL MEDICAL CENTER

NHSN ID: 10237

Hospital type: Acute care general hospital

Number of licensed beds (2012): 369

Number of reported Healthcare-Associated Infections:

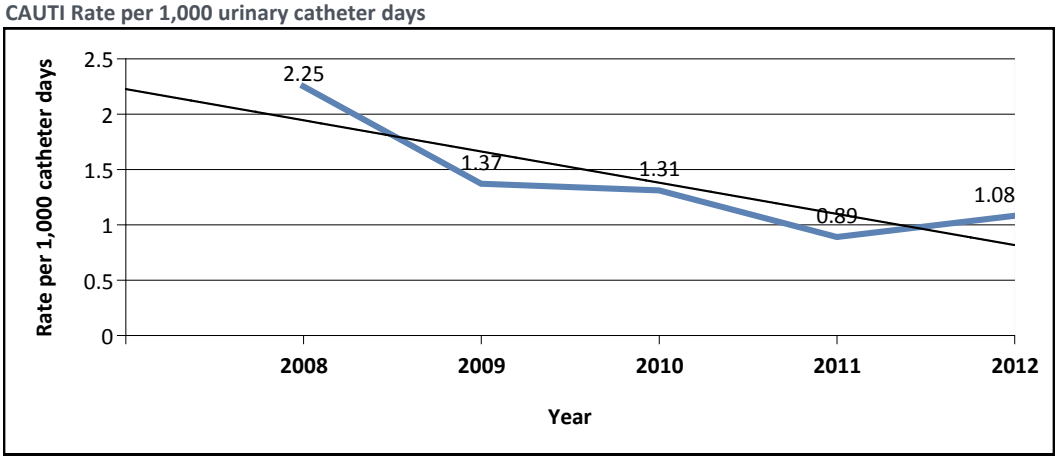
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	44,487	15	1	14	1	25	0	51	2	31	3	3.21
2009	88,644	17	4	44	3	36	0	111	7	32	0	2.87
2010	86,374	17	6	27	4	42	1	89	8	37	5	2.73
2011	83,272	21	1	33	3	40	0	74	5	30	2	2.51
2012	75,632	13	2	49	3	39	0	75	0	28	4	2.82

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	19	19.90	0.95	0.57 - 1.49	Same as
2009	23	26.99	0.85	0.54 - 1.28	Same as
2010	23	28.82	0.80	0.51 - 1.2	Same as
2011	14	19.69	0.71	0.39 - 1.19	Same as
2012	15	19.26	0.78	0.44 - 1.28	Same as

CAUTI Rate per 1,000 urinary catheter days



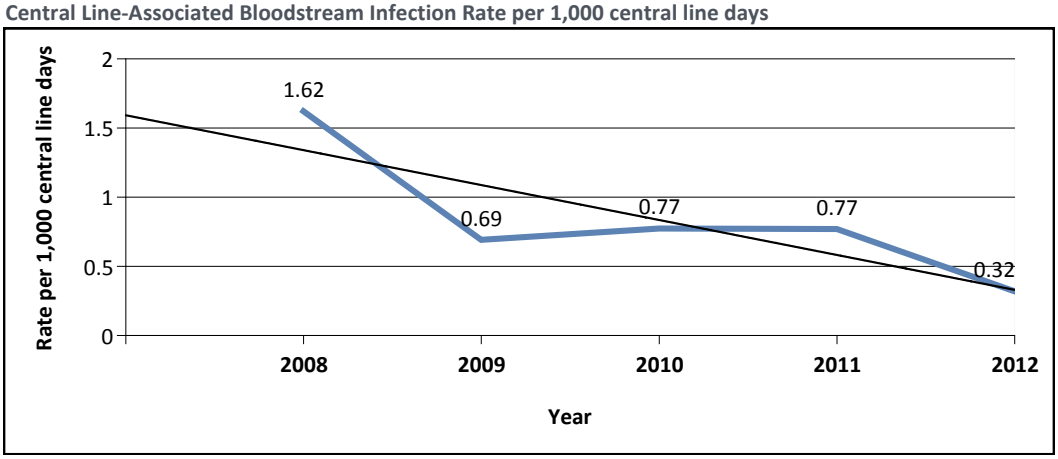
JEFFERSON REGIONAL MEDICAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	10	8.97	1.11	0.53 - 2.05	Same as
2009	8	10.28	0.78	0.34 - 1.53	Same as
2010	9	7.98	1.13	0.51 - 2.14	Same as
2011	8	6.06	1.32	0.57 - 2.6	Same as
2012	3	6.66	0.45	0.09 - 1.32	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Specialty Care Area

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	1.83	1.09	0.12 - 3.94	Same as
2009	2	1.88	1.07	0.12 - 3.85	Same as
2010	2	0.74	2.72	0.31 - 9.82	Same as
2011	0	1.60	0.00	0 - 2.29	Same as
2012	1	0.56	1.79	0.02 - 9.93	Same as

JENNERSVILLE REGIONAL HOSPITAL

NHSN ID: 12337

Hospital type: Acute care general hospital

Number of licensed beds (2012): 62

Number of reported Healthcare-Associated Infections:

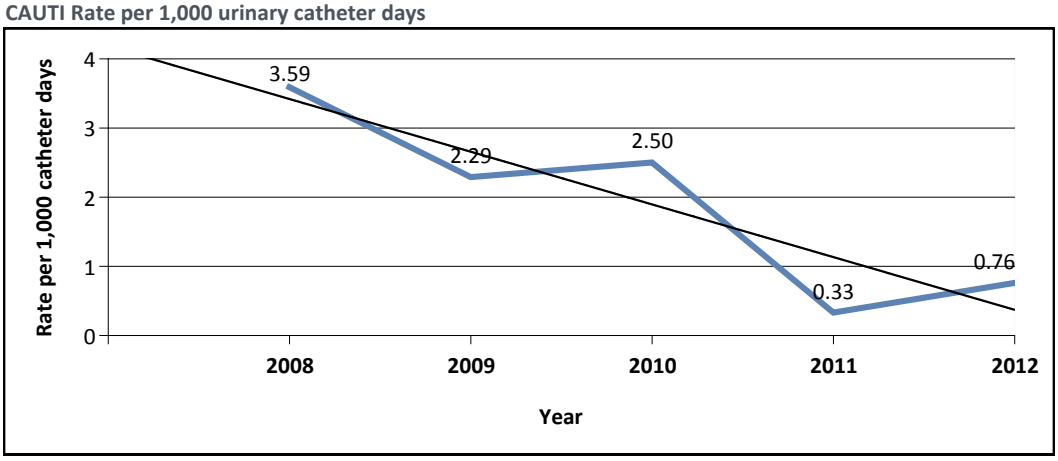
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	6,504	0	0	2	0	8	0	5	0	6	0	3.23
2009	13,531	5	0	3	0	20	2	6	0	12	1	3.62
2010	13,221	7	0	3	0	14	1	6	1	11	0	3.25
2011	13,563	1	0	5	0	3	0	3	0	2	0	1.03
2012	12,583	1	0	2	0	3	0	7	0	2	0	1.19

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	6	3.77	1.59	0.58 - 3.46	Same as
2009	8	5.60	1.43	0.62 - 2.82	Same as
2010	9	5.88	1.53	0.7 - 2.91	Same as
2011	1	3.84	0.26	0 - 1.45	Same as
2012	2	3.67	0.55	0.06 - 1.97	Same as

CAUTI Rate per 1,000 urinary catheter days



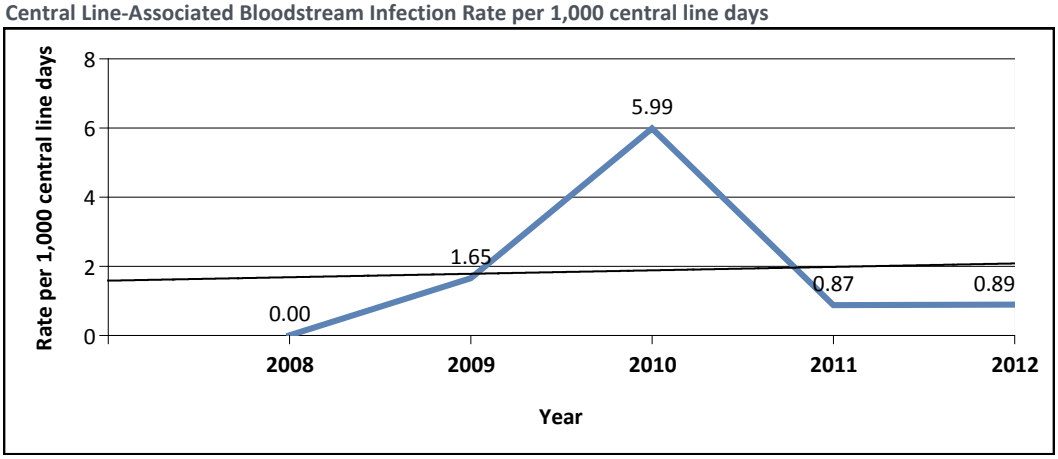
JENNERSVILLE REGIONAL HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.52	0.00	0 - 7.02	Same as
2009	2	1.19	1.68	0.19 - 6.07	Same as
2010	6	0.76	7.93	2.9 - 17.27	Worse
2011	1	0.72	1.38	0.02 - 7.69	Same as
2012	1	0.75	1.34	0.02 - 7.45	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



JERSEY SHORE HOSPITAL

NHSN ID: 11689

Hospital type: Critical access hospital

Number of licensed beds (2012): 25

Number of reported Healthcare-Associated Infections:

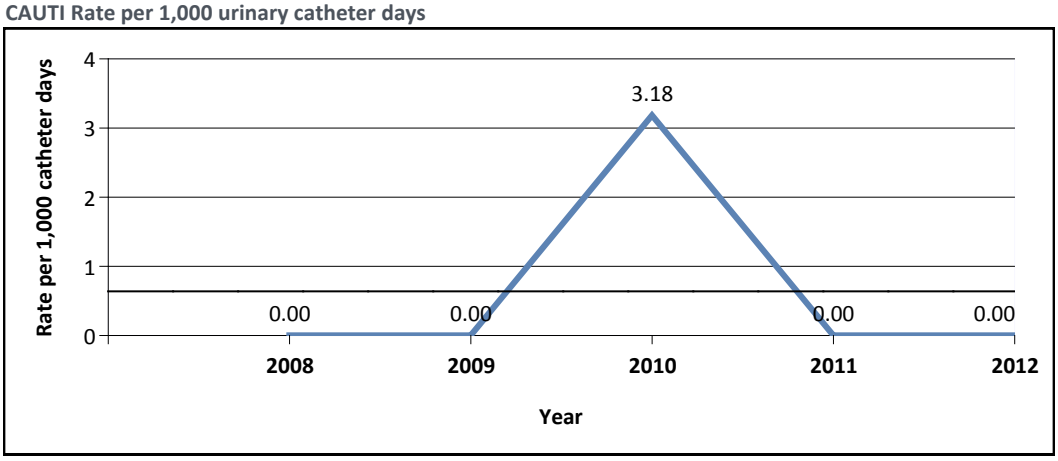
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	2,110	0	0	0	0	0	0	1	0	0	0	0.47
2009	4,947	0	0	0	0	0	0	3	0	0	0	0.61
2010	4,527	0	0	0	0	0	0	2	0	2	0	0.88
2011	5,197	0	0	0	0	1	0	0	0	1	0	0.38
2012	4,497	0	0	0	0	0	0	4	0	0	0	0.89

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.57	0.00	0 - 6.43	Same as
2009	0	1.24	0.00	0 - 2.96	Same as
2010	2	1.05	1.91	0.21 - 6.91	Same as
2011	0	0.93	0.00	0 - 3.93	Same as
2012	0	0.87	0.00	0 - 4.2	Same as

CAUTI Rate per 1,000 urinary catheter days



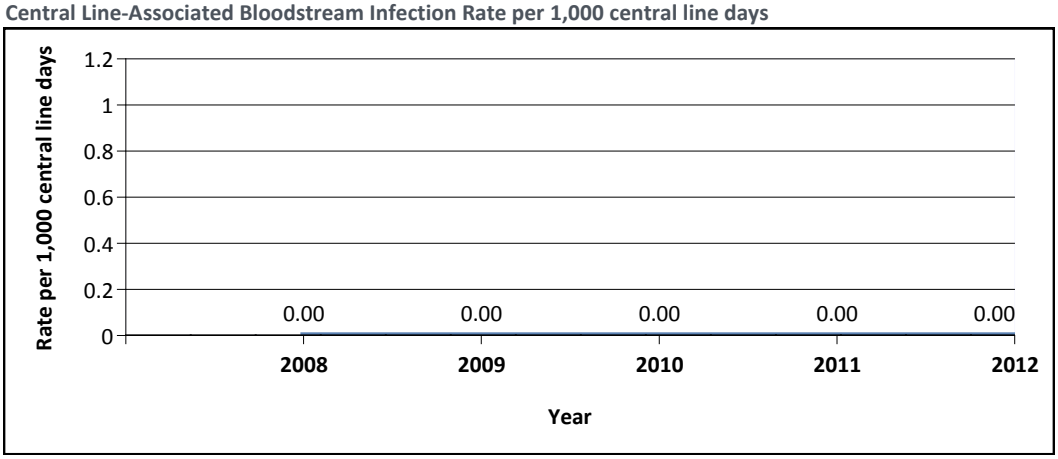
JERSEY SHORE HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.31	0.00	0 - 11.87	Same as
2009	0	0.37	0.00	0 - 10.03	Same as
2010	0	0.16	0.00	0 - 23.66	Same as
2011	0	0.28	0.00	0 - 13.12	Same as
2012	0	0.16	0.00	0 - 22.5	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



JOHN HEINZ INSTITUTE OF REHABILITATION

NHSN ID: 11861

Hospital type: Rehabilitation hospital

Number of licensed beds (2012): 71

Number of reported Healthcare-Associated Infections:

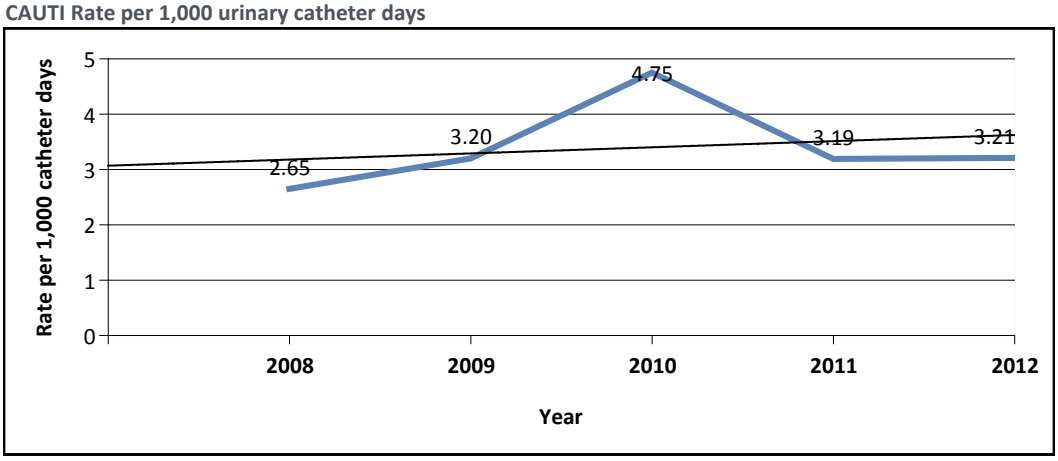
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	10,804	0	1	27	0	2	0	0	0	15	0	4.17
2009	21,704	3	0	56	0	0	0	0	3	23	0	3.92
2010	20,170	0	0	4	0	9	0	0	0	35	0	2.38
2011	21,076	0	1	9	0	2	0	0	1	24	0	1.76
2012	20,244	3	6	4	3	3	0	0	1	40	0	2.96

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	2.91	1.03	0.21 - 3.01	Same as
2009	6	3.05	1.97	0.72 - 4.28	Same as
2010	5	1.79	2.79	0.9 - 6.5	Same as
2011	4	1.33	3.02	0.81 - 7.73	Same as
2012	3	1.21	2.48	0.5 - 7.24	Same as

CAUTI Rate per 1,000 urinary catheter days



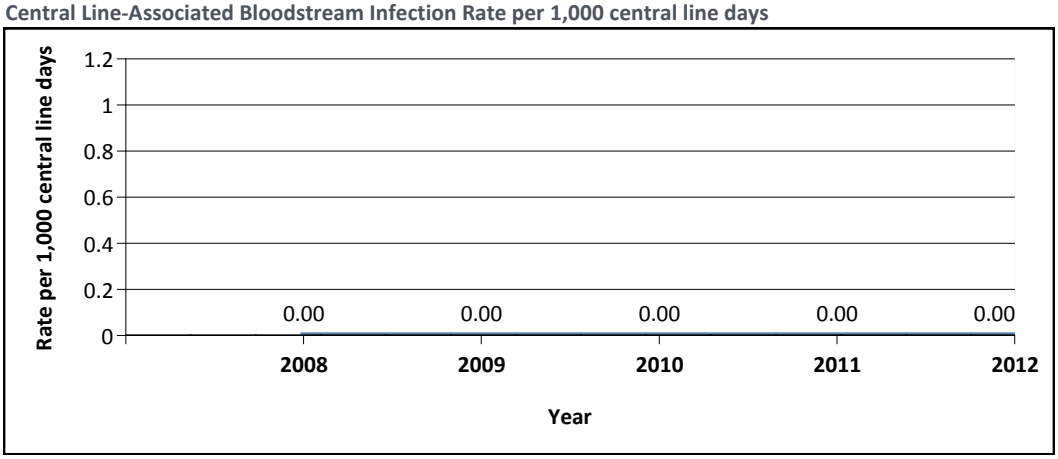
JOHN HEINZ INSTITUTE OF REHABILITATION

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.31	0.00	0 - 11.86	Same as
2009	0	0.68	0.00	0 - 5.41	Same as
2010	0	0.41	0.00	0 - 9	Same as
2011	0	0.32	0.00	0 - 11.35	Same as
2012	0	0.25	0.00	0 - 14.51	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



KANE COMMUNITY HOSPITAL

NHSN ID: 12111

Hospital type: Acute care general hospital

Number of licensed beds (2012): 31

Number of reported Healthcare-Associated Infections:

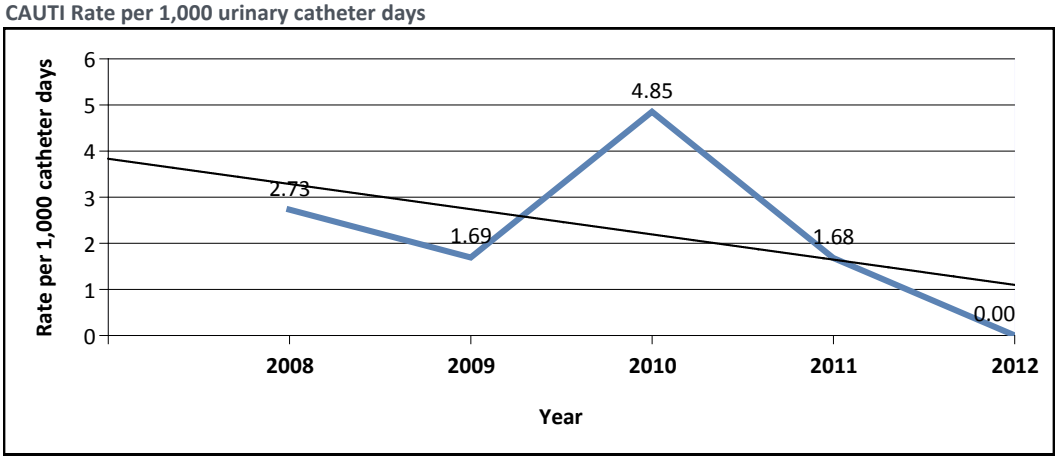
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	2,302	0	0	0	0	0	0	2	0	1	0	1.30
2009	5,247	0	0	0	0	6	0	0	0	3	0	1.72
2010	4,608	0	0	0	0	0	0	0	0	2	0	0.43
2011	5,398	0	0	2	0	3	0	0	0	1	0	1.11
2012	4,769	2	0	6	0	0	0	0	0	1	0	1.89

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	0.89	1.13	0.01 - 6.28	Same as
2009	1	0.96	1.04	0.01 - 5.8	Same as
2010	2	0.69	2.89	0.32 - 10.42	Same as
2011	1	0.69	1.46	0.02 - 8.1	Same as
2012	0	0.62	0.00	0 - 5.92	Same as

CAUTI Rate per 1,000 urinary catheter days



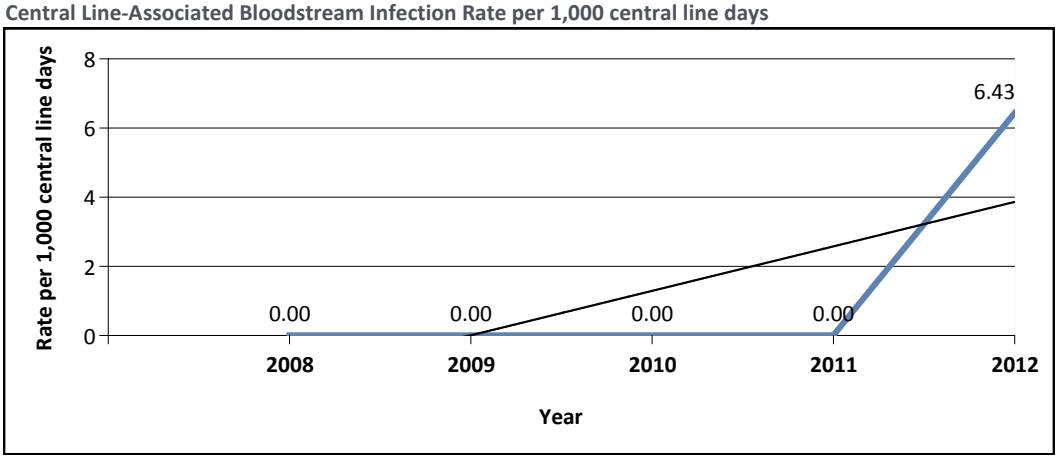
KANE COMMUNITY HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.23	0.00	0 - 16.03	Same as
2009	0	0.27	0.00	0 - 13.6	Same as
2010	0	0.13	0.00	0 - 27.37	Same as
2011	0	0.20	0.00	0 - 18.15	Same as
2012	2	0.20	10.20	1.15 - 36.83	Worse

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



KENSINGTON HOSPITAL

NHSN ID: 12609

Hospital type: Acute care general hospital

Number of licensed beds (2012): 35

Number of reported Healthcare-Associated Infections:

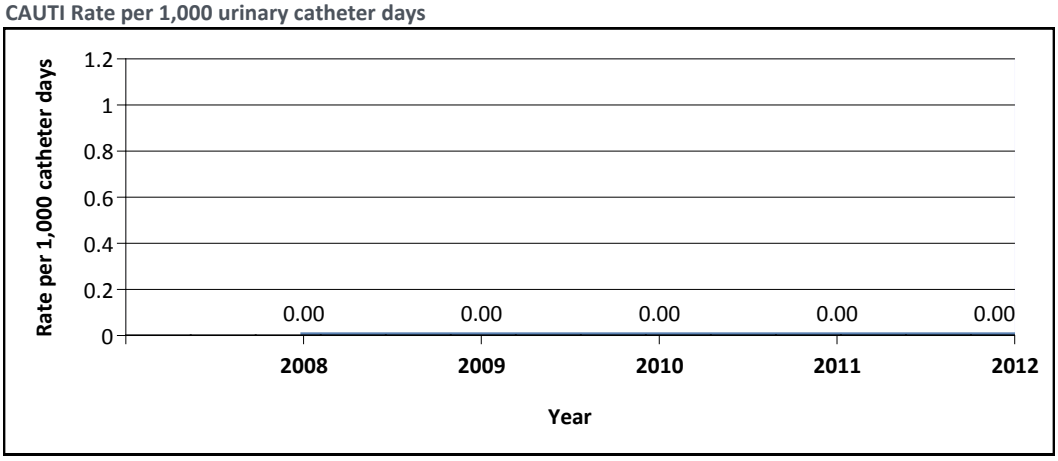
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	2,259	0	0	0	0	0	0	0	0	0	0	0.00
2009	4,084	0	0	0	0	0	0	0	0	0	0	0.00
2010	2,732	1	0	0	0	0	0	0	0	0	0	0.37
2011	2,751	1	0	0	0	0	0	0	0	1	0	0.73
2012	2,885	0	0	0	0	0	0	0	1	1	0	0.69

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.87	0.00	0 - 4.2	Same as
2009	0	0.50	0.00	0 - 7.34	Same as
2010	0	0.43	0.00	0 - 8.53	Same as
2011	0	0.17	0.00	0 - 21.16	Same as
2012	0	0.03	0.00	0 - 140.21	Same as

CAUTI Rate per 1,000 urinary catheter days



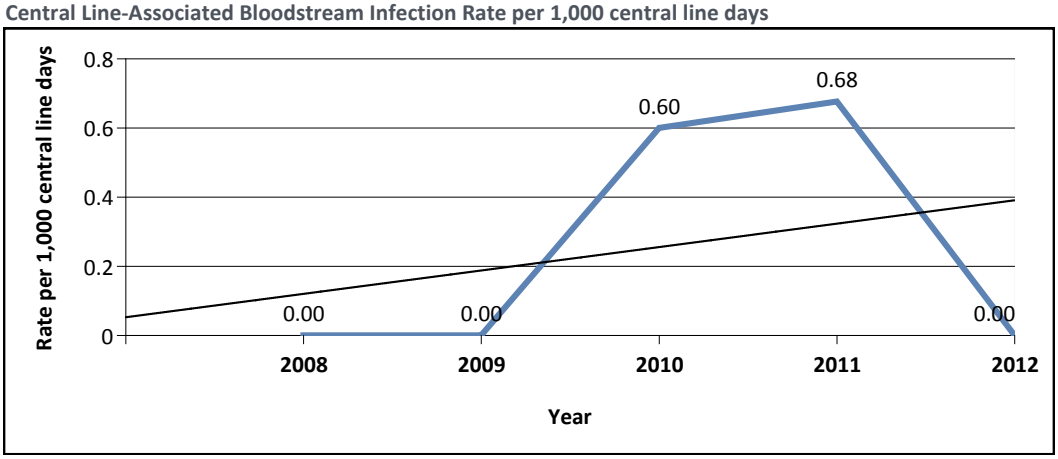
KENSINGTON HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	1.33	0.00	0 - 2.76	Same as
2009	0	1.57	0.00	0 - 2.34	Same as
2010	1	0.93	1.08	0.01 - 6.01	Same as
2011	1	0.69	1.46	0.02 - 8.1	Same as
2012	0	1.87	0.00	0 - 1.96	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



KIDSPEACE ORCHARD HILLS CAMPUS

NHSN ID: 12430

Hospital type: Psychiatric hospital

Number of licensed beds (2012): 80

Number of reported Healthcare-Associated Infections:

Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008												
2009	18,482	0	1	0	0	0	0	0	1	0	0	0.11
2010	21,724	0	2	0	0	0	1	0	0	0	0	0.14
2011	25,124	0	0	0	0	0	0	0	0	0	0	0.00
2012	26,389	0	8	0	0	0	0	0	1	0	0	0.34

KINDRED HOSPITAL --- PHILADELPHIA

NHSN ID: 11832

Hospital type: Long-term acute care hospital

Number of licensed beds (2012): 52

Number of reported Healthcare-Associated Infections:

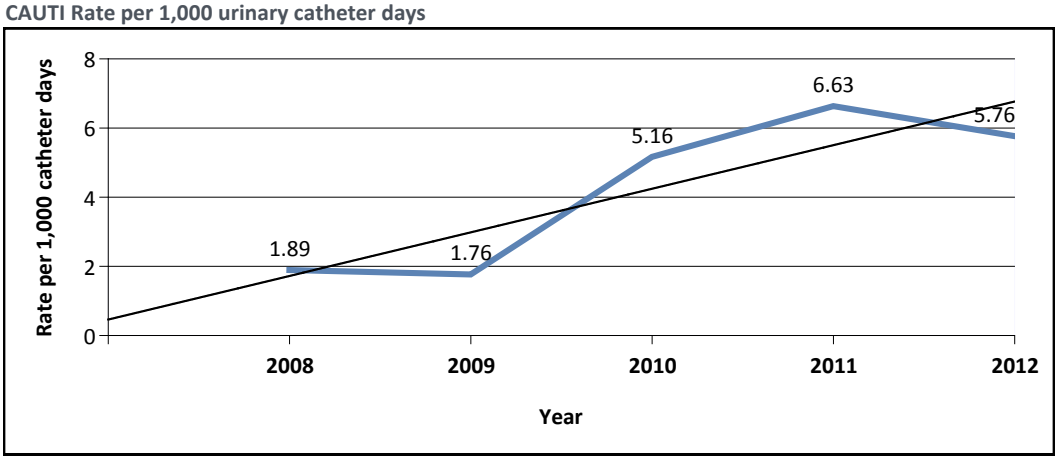
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	7,212	1	0	1	1	0	0	0	0	11	0	1.94
2009	14,710	16	0	22	0	1	0	0	0	20	0	4.01
2010	14,138	37	1	8	11	3	0	0	2	56	0	8.35
2011	13,457	24	0	19	6	3	0	0	2	57	0	8.25
2012	11,725	25	0	8	1	1	0	0	2	35	1	6.23

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	10	10.26	0.98	0.47 - 1.79	Same as
2009	19	17.01	1.12	0.67 - 1.74	Same as
2010	54	16.62	3.25	2.44 - 4.24	Worse
2011	53	11.75	4.51	3.38 - 5.9	Worse
2012	31	7.77	3.99	2.71 - 5.66	Worse

CAUTI Rate per 1,000 urinary catheter days



Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Long-Term Acute Care

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation

KINDRED HOSPITAL --- PHILADELPHIA

2008	1	8.22	0.12	0.48 - 0.68	Better
2009	12	12.91	0.93	0.48 - 1.62	Same as
2010	34	12.25	2.78	1.92 - 3.88	Worse
2011	21	10.17	2.06	1.28 - 3.16	Worse
2012	10	6.26	1.60	0.76 - 2.94	Same as

KINDRED HOSPITAL --- PITTSBURGH

NHSN ID: 12358

Hospital type: Long-term acute care hospital

Number of licensed beds (2012): 63

Number of reported Healthcare-Associated Infections:

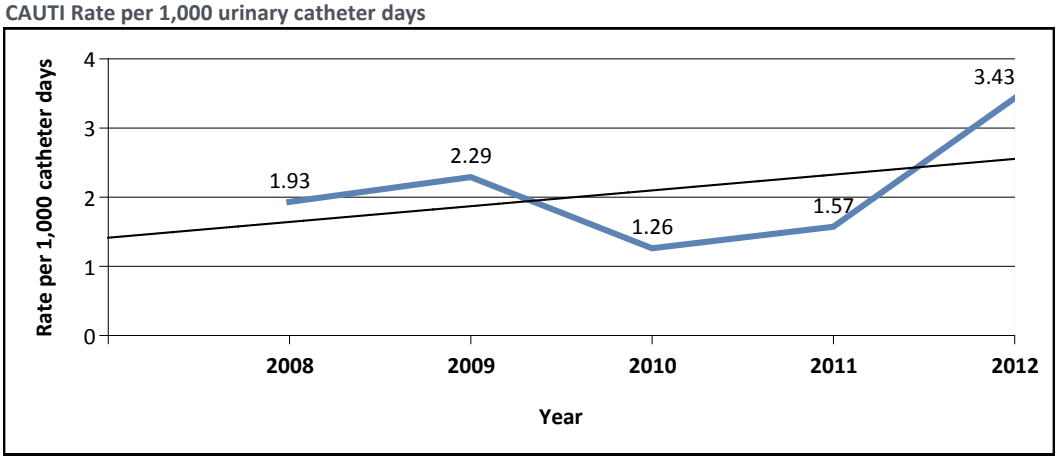
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	6,743	8	3	11	0	1	0	0	0	9	0	4.75
2009	12,835	10	1	10	9	0	0	0	2	21	0	4.13
2010	12,513	4	0	7	9	1	0	0	3	10	1	2.80
2011	10,214	12	0	4	15	1	0	0	4	11	0	4.60
2012	10,309	10	1	11	16	2	0	0	5	22	1	6.60

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	9	9.11	0.99	0.45 - 1.88	Same as
2009	19	13.12	1.45	0.87 - 2.26	Same as
2010	9	11.43	0.79	0.36 - 1.49	Same as
2011	9	8.36	1.08	0.49 - 2.04	Same as
2012	15	6.30	2.38	1.33 - 3.93	Worse

CAUTI Rate per 1,000 urinary catheter days



Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Long-Term Acute Care

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation

KINDRED HOSPITAL --- PITTSBURGH

2008	8	7.45	1.07	0.41 - 2.12	Same as
2009	10	11.79	0.85	0.41 - 1.56	Same as
2010	2	12.21	0.16	0.02 - 0.59	Better
2011	10	8.43	1.19	0.57 - 2.18	Same as
2012	10	7.44	1.34	0.64 - 2.47	Same as

KINDRED HOSPITAL --- WYOMING VALLEY

NHSN ID: 12485

Hospital type: Long-term acute care hospital

Number of licensed beds (2012): 36

Number of reported Healthcare-Associated Infections:

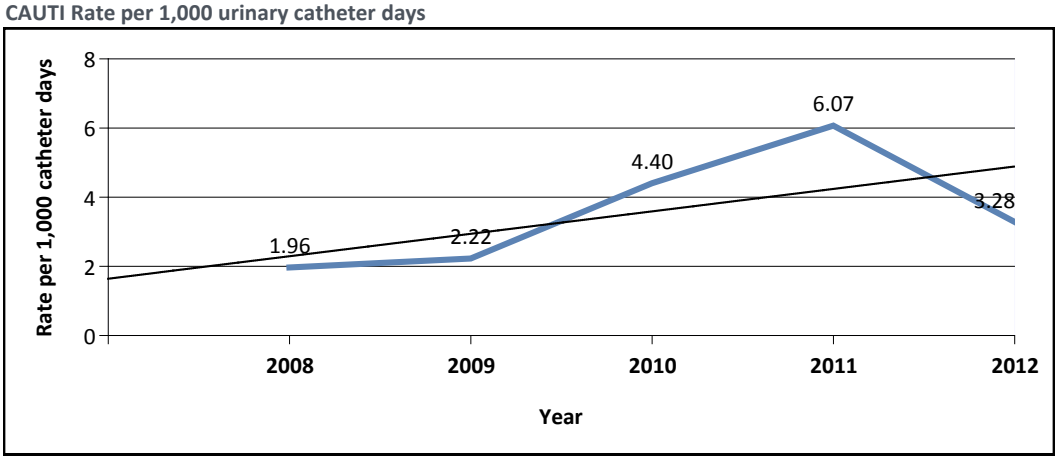
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,795	5	0	0	0	0	0	0	0	7	0	3.16
2009	15,338	4	0	0	0	0	0	0	0	18	0	1.43
2010	8,431	7	0	11	0	7	0	0	10	22	0	6.76
2011	8,404	7	0	8	4	14	0	0	6	27	0	7.85
2012	8,444	16	0	2	2	3	0	0	0	16	0	4.62

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	6	5.85	1.03	0.37 - 2.23	Same as
2009	13	9.34	1.39	0.74 - 2.38	Same as
2010	21	7.64	2.75	1.7 - 4.2	Worse
2011	24	5.62	4.27	2.73 - 6.35	Worse
2012	16	7.12	2.25	1.28 - 3.65	Worse

CAUTI Rate per 1,000 urinary catheter days



Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Long-Term Acute Care

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation

KINDRED HOSPITAL --- WYOMING VALLEY

2008	5	3.57	1.40	0.1 - 3.27	Same as
2009	4	10.94	0.37	0.1 - 0.94	Better
2010	7	7.55	0.93	0.37 - 1.91	Same as
2011	7	6.79	1.03	0.41 - 2.13	Same as
2012	16	6.47	2.47	1.41 - 4.01	Worse

KINDRED HOSPITAL AT HERITAGE VALLEY

NHSN ID: 12268

Hospital type: Long-term acute care hospital

Number of licensed beds (2012): 35

Number of reported Healthcare-Associated Infections:

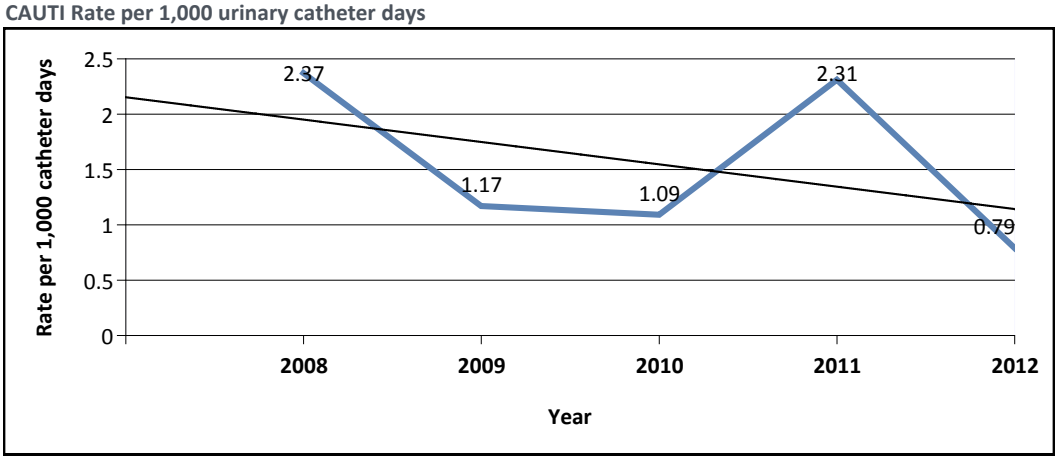
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,868	5	0	10	11	0	0	0	0	8	0	6.98
2009	9,868	11	0	26	19	0	0	0	6	9	0	7.19
2010	8,815	6	0	14	14	0	0	0	1	8	0	4.88
2011	8,765	6	0	8	10	0	0	0	2	15	0	4.68
2012	8,898	4	0	19	2	0	0	0	0	5	0	3.37

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	8	6.61	1.21	0.52 - 2.39	Same as
2009	8	10.77	0.74	0.32 - 1.46	Same as
2010	7	10.18	0.69	0.28 - 1.42	Same as
2011	14	9.12	1.54	0.84 - 2.58	Same as
2012	5	9.33	0.54	0.17 - 1.25	Same as

CAUTI Rate per 1,000 urinary catheter days



Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Long-Term Acute Care

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation

KINDRED HOSPITAL AT HERITAGE VALLEY

2008	5	5.88	0.85	0.57 - 1.99	Same as
2009	11	9.64	1.14	0.57 - 2.04	Same as
2010	6	9.32	0.64	0.24 - 1.4	Same as
2011	5	7.38	0.68	0.22 - 1.58	Same as
2012	1	6.26	0.16	0 - 0.89	Better

KINDRED HOSPITAL EASTON

NHSN ID: 12007

Hospital type: Long-term acute care hospital

Number of licensed beds (2012): 31

Number of reported Healthcare-Associated Infections:

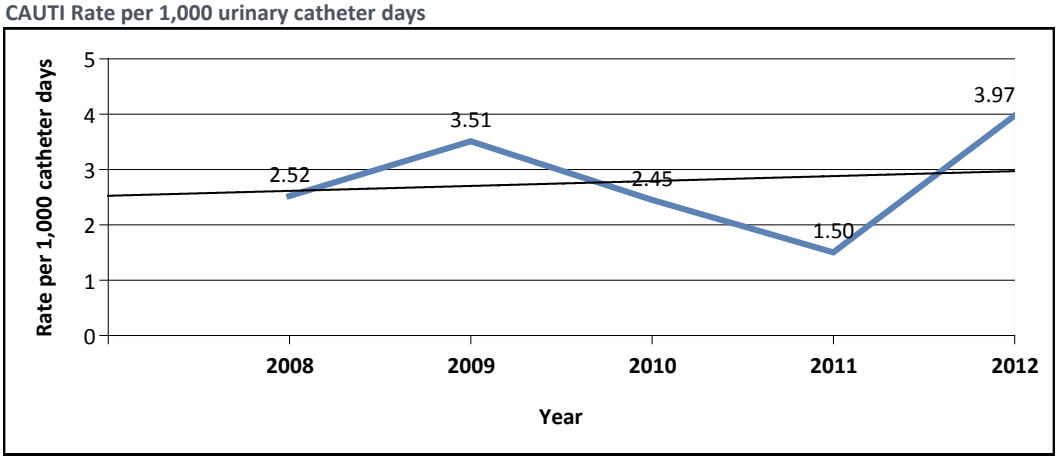
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,877	12	0	2	3	3	0	0	2	6	0	7.22
2009	7,460	17	0	14	4	4	0	0	5	15	0	7.91
2010	7,147	22	0	9	4	1	0	0	2	11	1	7.00
2011	6,982	8	0	12	3	1	0	0	1	9	0	4.87
2012	7,352	7	0	8	4	0	0	0	1	15	0	4.76

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	6	4.73	1.27	0.46 - 2.76	Same as
2009	14	6.32	2.21	1.21 - 3.71	Worse
2010	9	5.90	1.52	0.7 - 2.89	Same as
2011	5	4.74	1.05	0.34 - 2.46	Same as
2012	11	3.97	2.77	1.38 - 4.96	Worse

CAUTI Rate per 1,000 urinary catheter days



Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Long-Term Acute Care

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation

KINDRED HOSPITAL EASTON

2008	7	4.07	1.72	0.77 - 3.55	Same as
2009	11	7.11	1.55	0.77 - 2.77	Same as
2010	9	7.15	1.26	0.57 - 2.39	Same as
2011	3	5.78	0.52	0.1 - 1.52	Same as
2012	6	5.62	1.07	0.39 - 2.33	Same as

KINDRED HOSPITAL PHILADELPHIA --- HAVERTOWN

NHSN ID: 12908

Hospital type: Long-term acute care hospital

Number of licensed beds (2012): 57

Number of reported Healthcare-Associated Infections:

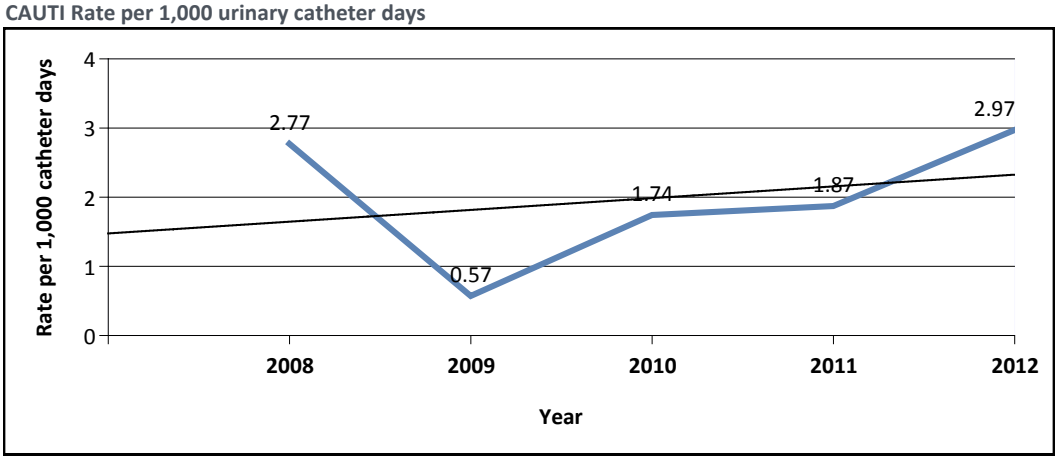
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,379	0	0	2	0	0	0	0	0	7	0	2.06
2009	9,259	4	0	2	0	0	0	0	0	3	0	0.97
2010	12,095	18	0	0	0	2	0	0	2	14	0	2.98
2011	12,225	11	0	7	0	0	0	0	5	13	0	2.94
2012	15,040	10	0	13	1	2	0	0	2	19	1	3.19

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	7	5.08	1.38	0.55 - 2.84	Same as
2009	3	8.27	0.36	0.07 - 1.06	Same as
2010	13	11.91	1.09	0.58 - 1.87	Same as
2011	10	7.53	1.33	0.64 - 2.44	Same as
2012	16	7.70	2.08	1.19 - 3.37	Worse

CAUTI Rate per 1,000 urinary catheter days



Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Long-Term Acute Care

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation

KINDRED HOSPITAL PHILADELPHIA --- HAVERTOWN

2008	0	5.80	0.00	0.14 - 0.63	Better
2009	4	7.88	0.51	0.14 - 1.3	Same as
2010	18	10.36	1.74	1.03 - 2.75	Worse
2011	7	9.02	0.78	0.31 - 1.6	Same as
2012	5	7.32	0.68	0.22 - 1.59	Same as

KINDRED HOSPITAL PITTSBURGH --- NORTH SHORE

NHSN ID: 12296

Hospital type: Long-term acute care hospital

Number of licensed beds (2012): 72

Number of reported Healthcare-Associated Infections:

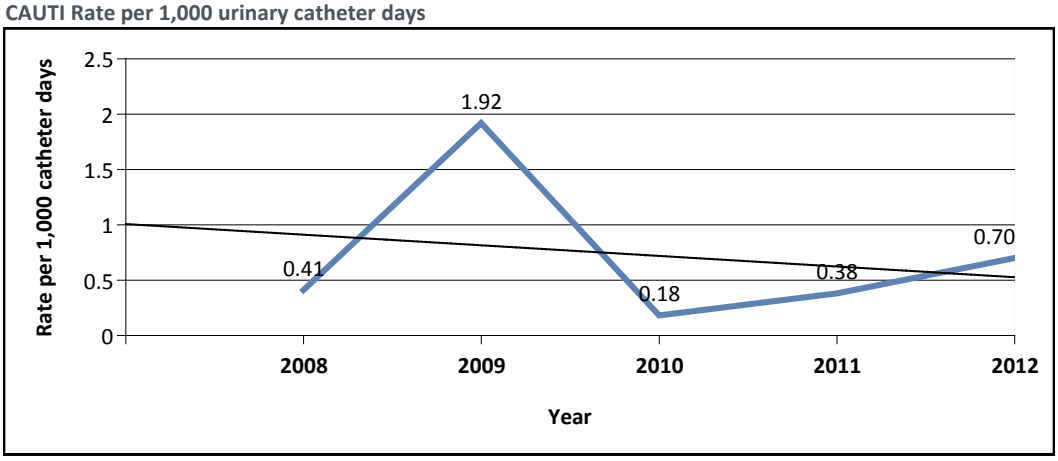
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,356	7	0	0	0	0	0	0	0	1	0	1.84
2009	9,016	5	0	0	0	0	0	0	0	14	0	2.11
2010	8,602	3	0	0	0	0	0	0	0	1	0	0.47
2011	8,578	3	0	0	3	1	0	0	0	2	0	1.05
2012	6,882	4	0	3	15	1	0	0	0	4	0	3.92

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	4.94	0.20	0 - 1.13	Same as
2009	11	9.06	1.21	0.61 - 2.17	Same as
2010	1	8.72	0.11	0 - 0.64	Better
2011	2	7.88	0.25	0.03 - 0.92	Better
2012	3	6.32	0.47	0.1 - 1.39	Same as

CAUTI Rate per 1,000 urinary catheter days



Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Long-Term Acute Care

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation

KINDRED HOSPITAL PITTSBURGH --- NORTH SHORE

2008	7	5.14	1.36	0.19 - 2.81	Same as
2009	5	8.35	0.60	0.19 - 1.4	Same as
2010	3	8.51	0.35	0.07 - 1.03	Same as
2011	2	6.80	0.29	0.03 - 1.06	Same as
2012	2	4.91	0.41	0.05 - 1.47	Same as

KINDRED HOSPITAL SOUTH PHILADELPHIA

NHSN ID: 11940

Hospital type: Long-term acute care hospital

Number of licensed beds (2012): 58

Number of reported Healthcare-Associated Infections:

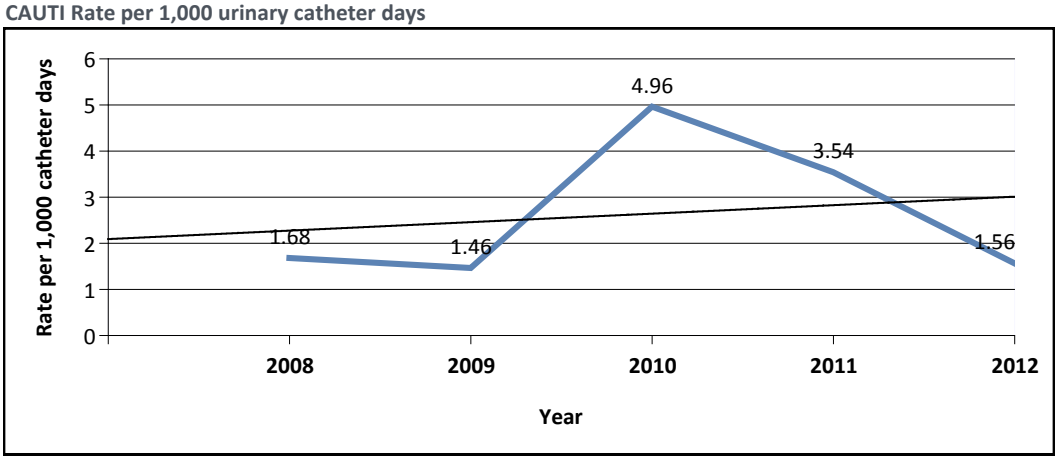
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	5,543	24	0	4	1	6	0	0	0	8	1	7.94
2009	9,716	31	0	5	0	12	0	0	2	8	1	6.07
2010	7,458	22	0	2	0	11	0	0	3	20	2	8.05
2011	6,625	20	2	11	9	21	0	0	2	10	0	11.32
2012	9,100	8	0	2	5	15	0	0	0	8	0	4.18

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	6	7.07	0.85	0.31 - 1.85	Same as
2009	7	7.60	0.92	0.37 - 1.9	Same as
2010	19	6.14	3.09	1.86 - 4.83	Worse
2011	9	3.51	2.56	1.17 - 4.86	Worse
2012	5	4.57	1.09	0.35 - 2.55	Same as

CAUTI Rate per 1,000 urinary catheter days



Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Long-Term Acute Care

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation

KINDRED HOSPITAL SOUTH PHILADELPHIA

2008	18	4.83	3.72	1.48 - 5.89	Worse
2009	18	7.19	2.50	1.48 - 3.96	Worse
2010	17	5.01	3.40	1.98 - 5.44	Worse
2011	19	4.87	3.90	2.35 - 6.09	Worse
2012	8	4.64	1.73	0.74 - 3.4	Same as

KIRKBRIDE CENTER

NHSN ID: 12624

Hospital type: Psychiatric hospital

Number of licensed beds (2012): 74

Number of reported Healthcare-Associated Infections:

Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008												
2009	8,675	0	0	0	0	0	0	0	0	0	0	0.00
2010	7,803	0	0	0	0	0	0	0	0	0	0	0.00
2011	3,593	0	4	0	0	0	0	0	0	0	0	1.11
2012	5,369	0	2	0	0	0	0	0	4	4	0	1.86

LANCASTER GENERAL HOSPITAL

NHSN ID: 10183

Hospital type: Acute care general hospital

Number of licensed beds (2012): 621

Number of reported Healthcare-Associated Infections:

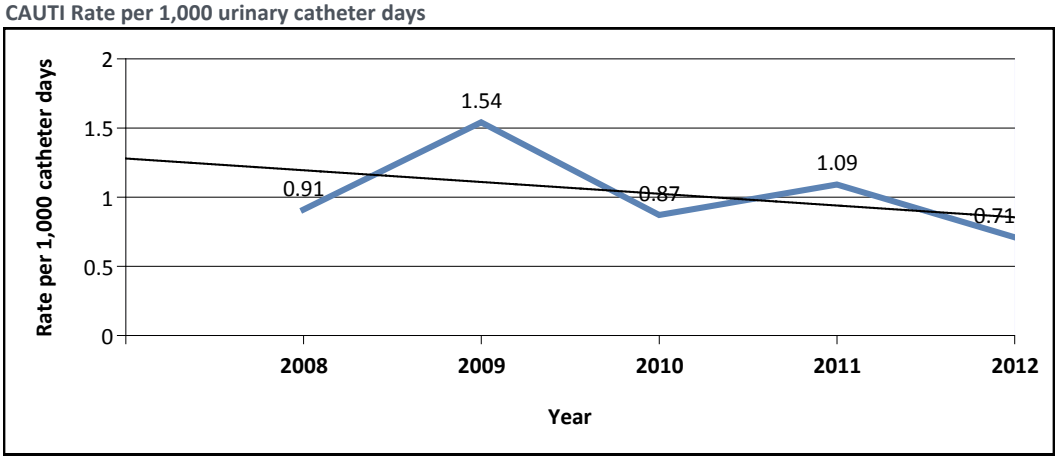
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	81,748	19	3	14	28	32	3	88	7	20	5	2.68
2009	182,464	61	4	33	47	79	4	185	14	91	10	2.89
2010	153,609	41	3	15	17	51	4	156	17	64	2	2.41
2011	161,796	39	1	17	12	46	3	157	13	74	14	2.32
2012	153,050	33	0	18	25	32	3	142	20	43	5	2.10

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	14	36.36	0.39	0.21 - 0.65	Better
2009	41	42.87	0.96	0.69 - 1.3	Same as
2010	25	47.46	0.53	0.34 - 0.78	Better
2011	33	37.89	0.87	0.6 - 1.22	Same as
2012	18	34.94	0.52	0.31 - 0.81	Better

CAUTI Rate per 1,000 urinary catheter days



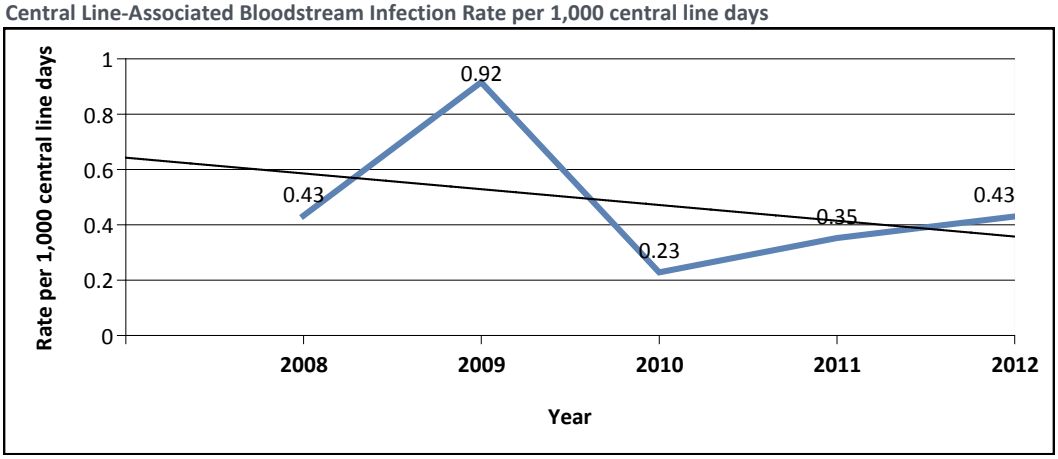
LANCASTER GENERAL HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	4	13.30	0.30	0.08 - 0.77	Better
2009	19	18.74	1.01	0.61 - 1.58	Same as
2010	5	15.00	0.33	0.11 - 0.78	Better
2011	8	13.11	0.61	0.26 - 1.2	Same as
2012	8	13.03	0.61	0.26 - 1.21	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	1.15	0.00	0 - 3.18	Same as
2009	4	1.52	2.63	0.71 - 6.72	Same as
2010	2	1.00	2.00	0.23 - 7.24	Same as
2011	2	1.10	1.82	0.2 - 6.59	Same as
2012	2	1.47	1.36	0.15 - 4.91	Same as

Standardized Infection Ratio - Specialty Care Area

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	2.79	0.72	0.08 - 2.59	Same as
2009				-	
2010				-	
2011				-	
2012				-	

LANCASTER REGIONAL MEDICAL CENTER

NHSN ID: 12335

Hospital type: Acute care general hospital

Number of licensed beds (2012): 214

Number of reported Healthcare-Associated Infections:

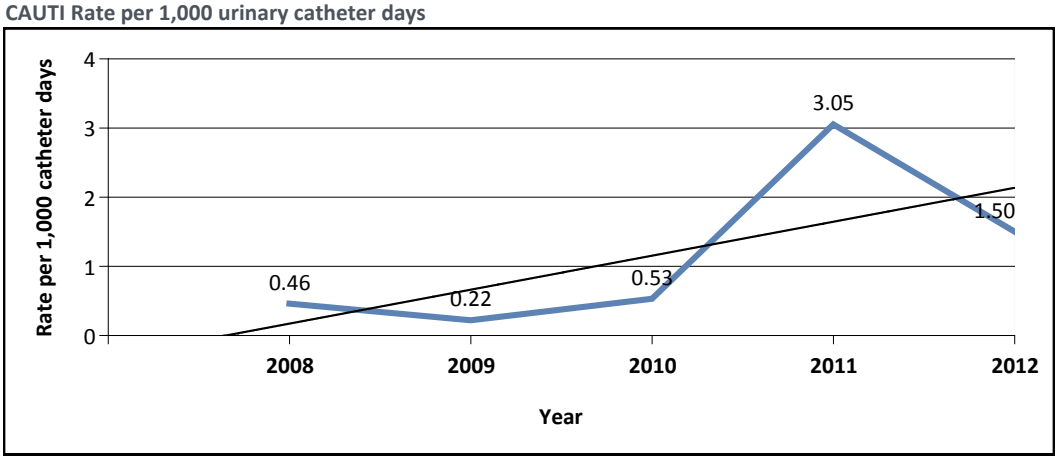
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	11,887	4	0	0	0	0	0	4	0	1	0	0.76
2009	29,172	3	0	4	0	1	0	16	1	1	0	0.89
2010	28,064	5	0	8	0	3	0	15	7	6	1	1.60
2011	28,792	10	0	5	0	10	0	25	2	26	1	2.74
2012	28,382	3	0	0	0	9	0	26	3	25	0	2.33

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	5.19	0.19	0 - 1.07	Same as
2009	1	7.39	0.14	0 - 0.75	Better
2010	2	6.23	0.32	0.04 - 1.16	Same as
2011	13	5.13	2.53	1.35 - 4.33	Worse
2012	7	6.43	1.09	0.44 - 2.24	Same as

CAUTI Rate per 1,000 urinary catheter days



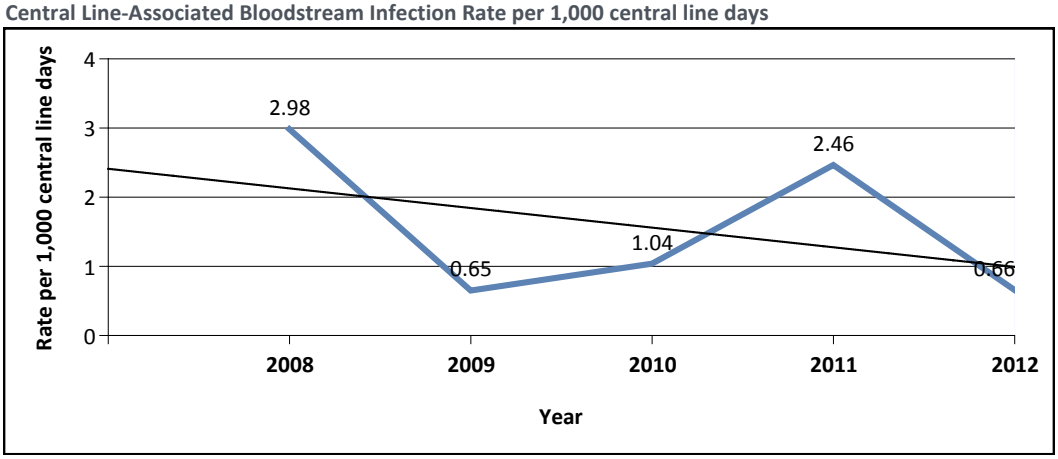
LANCASTER REGIONAL MEDICAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	4	1.92	2.08	0.56 - 5.33	Same as
2009	2	2.93	0.68	0.08 - 2.47	Same as
2010	3	2.09	1.44	0.29 - 4.2	Same as
2011	8	1.96	4.09	1.76 - 8.06	Worse
2012	2	2.08	0.96	0.11 - 3.48	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



LANCASTER REHABILITATION HOSPITAL

NHSN ID: 12628

Hospital type: Rehabilitation hospital

Number of licensed beds (2012): 59

Number of reported Healthcare-Associated Infections:

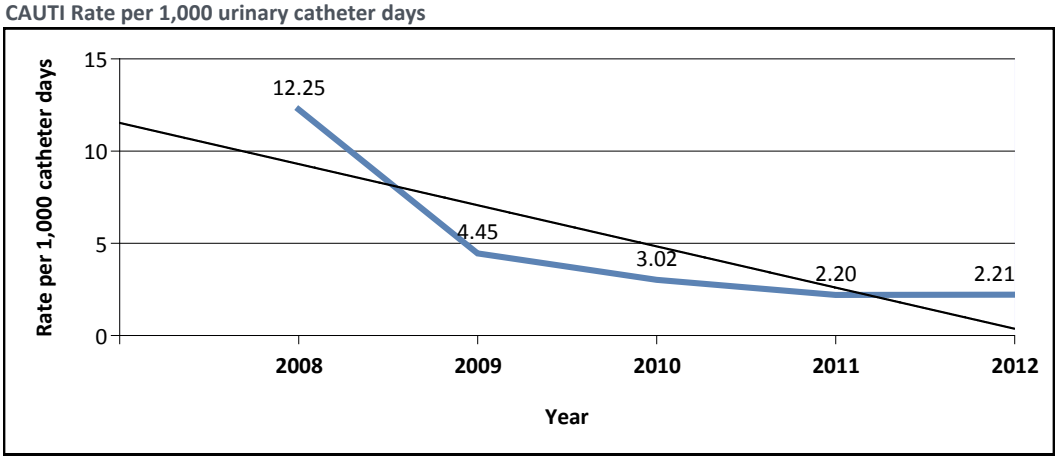
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	7,583	0	0	1	0	0	0	0	0	39	0	5.27
2009	15,958	0	0	0	0	0	0	0	0	43	0	2.69
2010	17,398	0	0	1	0	0	0	0	0	20	0	1.21
2011	17,607	0	0	4	0	0	0	0	0	14	0	1.02
2012	18,153	0	0	8	0	0	0	0	0	8	0	0.88

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	5	1.16	4.32	1.39 - 10.09	Worse
2009	2	0.74	2.69	0.3 - 9.71	Same as
2010	2	1.14	1.76	0.2 - 6.34	Same as
2011	1	0.43	2.34	0.03 - 13.04	Same as
2012	1	0.57	1.75	0.02 - 9.76	Same as

CAUTI Rate per 1,000 urinary catheter days



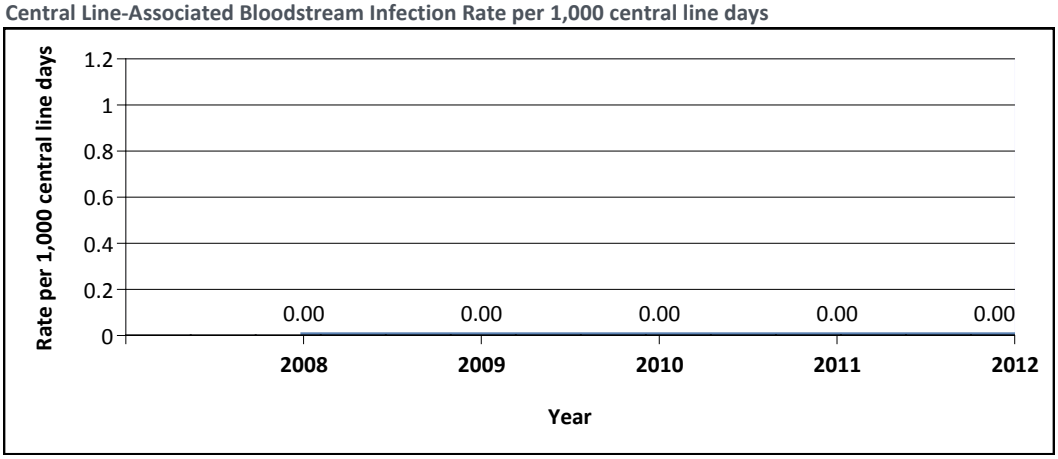
LANCASTER REHABILITATION HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.59	0.00	0 - 6.19	Same as
2009	0	0.77	0.00	0 - 4.79	Same as
2010	0	0.67	0.00	0 - 5.45	Same as
2011	0	0.41	0.00	0 - 8.89	Same as
2012	0	0.47	0.00	0 - 7.87	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



LANSDALE HOSPITAL

NHSN ID: 12032

Hospital type: Acute care general hospital

Number of licensed beds (2012): 135

Number of reported Healthcare-Associated Infections:

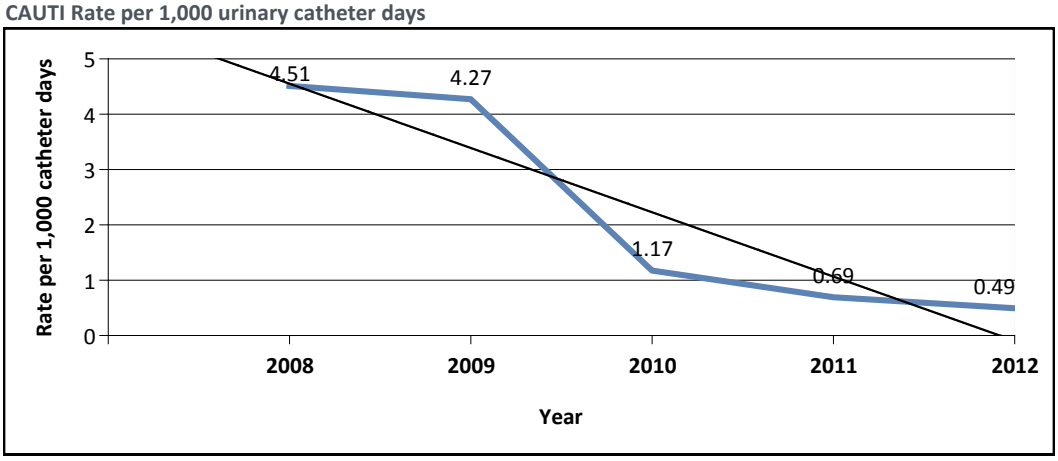
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	10,843	3	0	4	1	5	0	1	2	12	0	2.58
2009	21,363	8	0	21	0	11	0	6	0	24	0	3.28
2010	21,572	2	0	10	0	3	0	4	0	8	0	1.25
2011	21,292	7	0	5	0	3	0	5	0	4	0	1.13
2012	20,308	2	0	0	0	3	0	7	0	2	0	0.69

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	11	5.62	1.96	0.98 - 3.5	Same as
2009	18	6.78	2.66	1.57 - 4.2	Worse
2010	5	7.06	0.71	0.23 - 1.65	Same as
2011	3	5.47	0.55	0.11 - 1.6	Same as
2012	2	5.67	0.35	0.04 - 1.27	Same as

CAUTI Rate per 1,000 urinary catheter days



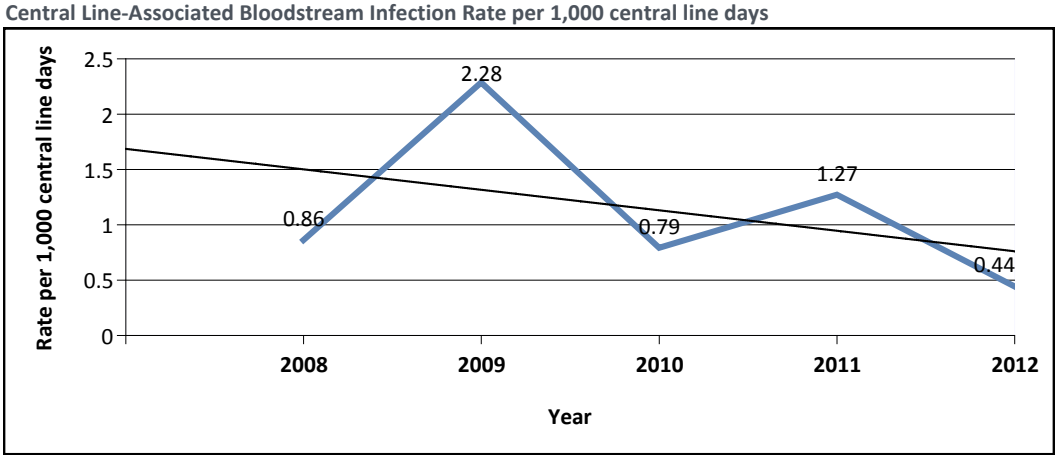
LANSDALE HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	1.66	0.60	0.01 - 3.35	Same as
2009	6	2.41	2.49	0.91 - 5.42	Same as
2010	2	1.79	1.12	0.13 - 4.04	Same as
2011	3	1.43	2.10	0.42 - 6.15	Same as
2012	1	1.55	0.65	0.01 - 3.59	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



LEHIGH VALLEY HOSPITAL

NHSN ID: 11884

Hospital type: Acute care general hospital

Number of licensed beds (2012): 786

Number of reported Healthcare-Associated Infections:

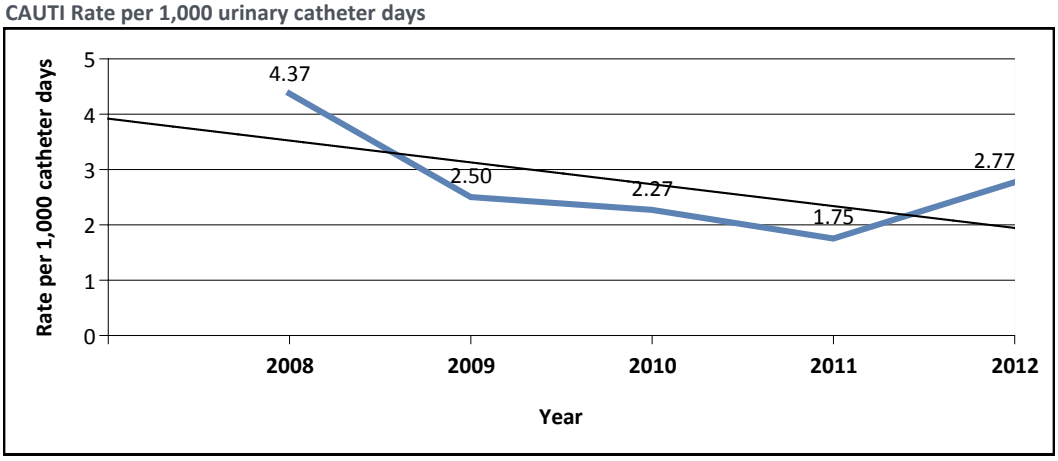
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	98,286	67	0	51	4	33	1	73	1	108	3	3.47
2009	221,287	120	1	107	1	57	1	130	3	140	14	2.59
2010	214,368	86	1	102	0	45	1	120	4	124	13	2.31
2011	221,791	105	0	84	5	47	2	124	2	104	9	2.17
2012	222,590	120	0	119	3	35	1	167	7	145	9	2.72

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	95	50.22	1.89	1.53 - 2.31	Worse
2009	112	99.08	1.13	0.93 - 1.36	Same as
2010	93	72.28	1.29	1.04 - 1.58	Worse
2011	73	69.16	1.06	0.83 - 1.33	Same as
2012	111	74.57	1.49	1.22 - 1.79	Worse

CAUTI Rate per 1,000 urinary catheter days



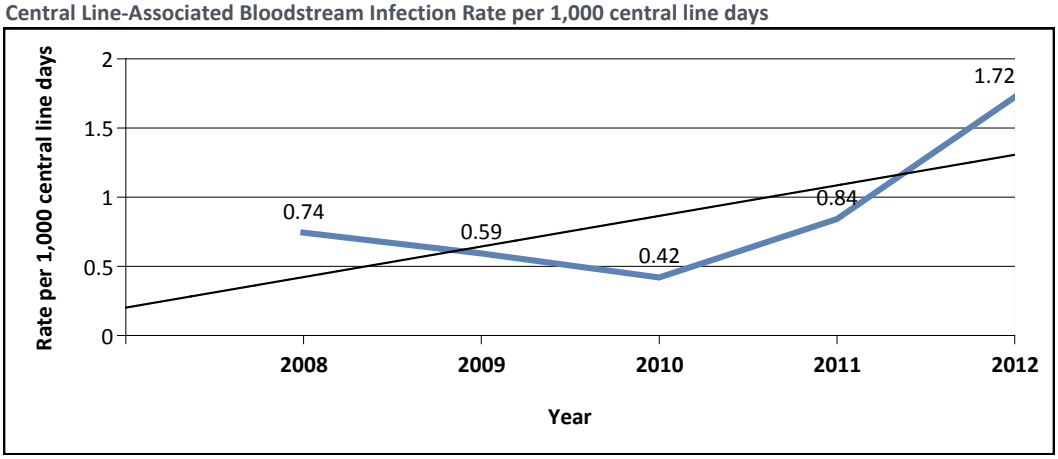
LEHIGH VALLEY HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	17	34.20	0.50	0.29 - 0.8	Better
2009	27	52.75	0.51	0.34 - 0.74	Better
2010	18	34.92	0.52	0.31 - 0.81	Better
2011	37	37.08	1.00	0.7 - 1.38	Same as
2012	77	36.86	2.09	1.65 - 2.61	Worse

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	4	1.76	2.28	0.25 - 5.83	Same as
2009	2	3.74	0.53	0.06 - 1.93	Same as
2010	4	4.83	0.83	0.22 - 2.12	Same as
2011	0	2.50	0.00	0 - 1.47	Same as
2012	4	2.96	1.35	0.36 - 3.46	Same as

LEHIGH VALLEY HOSPITAL --- MUHLENBERG

NHSN ID: 11898

Hospital type: Acute care general hospital

Number of licensed beds (2012): 176

Number of reported Healthcare-Associated Infections:

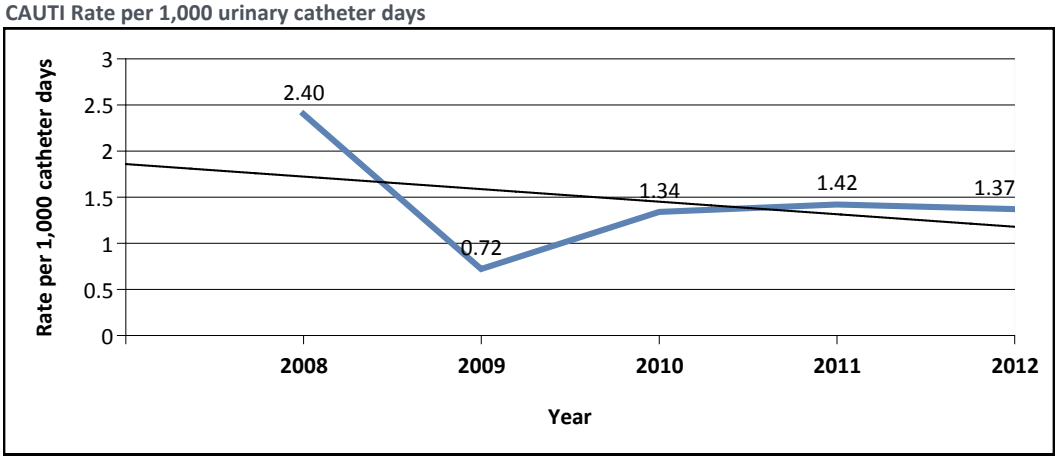
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	23,973	10	0	16	2	3	0	5	2	19	2	2.46
2009	48,399	15	0	20	0	8	0	22	2	14	0	1.67
2010	50,646	31	0	31	0	3	0	26	3	25	1	2.37
2011	50,937	9	0	21	0	2	0	30	0	20	2	1.65
2012	49,028	21	0	25	0	4	0	22	2	21	0	1.94

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	17	15.69	1.08	0.63 - 1.73	Same as
2009	10	30.57	0.33	0.16 - 0.6	Better
2010	16	20.94	0.76	0.44 - 1.24	Same as
2011	16	19.06	0.84	0.48 - 1.36	Same as
2012	14	19.08	0.73	0.4 - 1.23	Same as

CAUTI Rate per 1,000 urinary catheter days



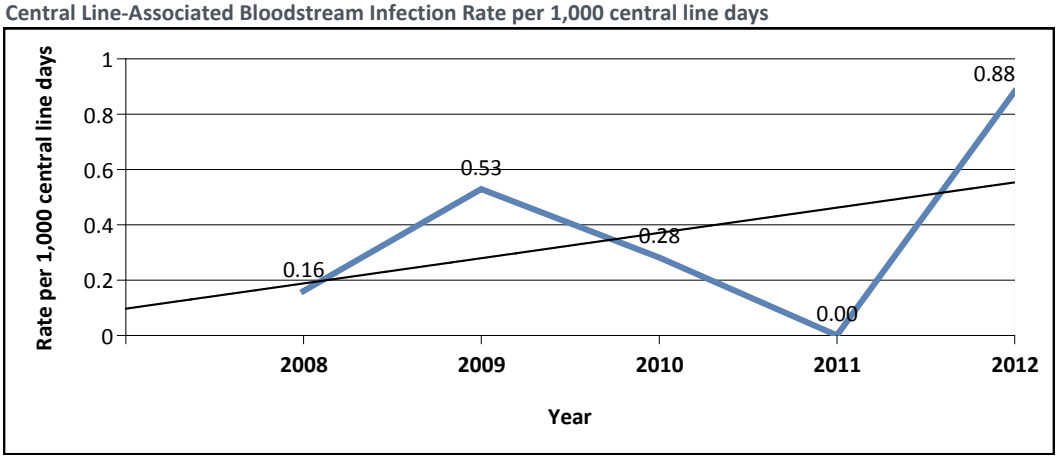
LEHIGH VALLEY HOSPITAL --- MUHLENBERG

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	9.38	0.11	0 - 0.59	Better
2009	6	12.98	0.46	0.17 - 1.01	Same as
2010	3	8.68	0.35	0.07 - 1.01	Same as
2011	0	8.92	0.00	0 - 0.41	Better
2012	8	7.34	1.09	0.47 - 2.15	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



LEWISTOWN HOSPITAL

NHSN ID: 11825

Hospital type: Acute care general hospital

Number of licensed beds (2012): 123

Number of reported Healthcare-Associated Infections:

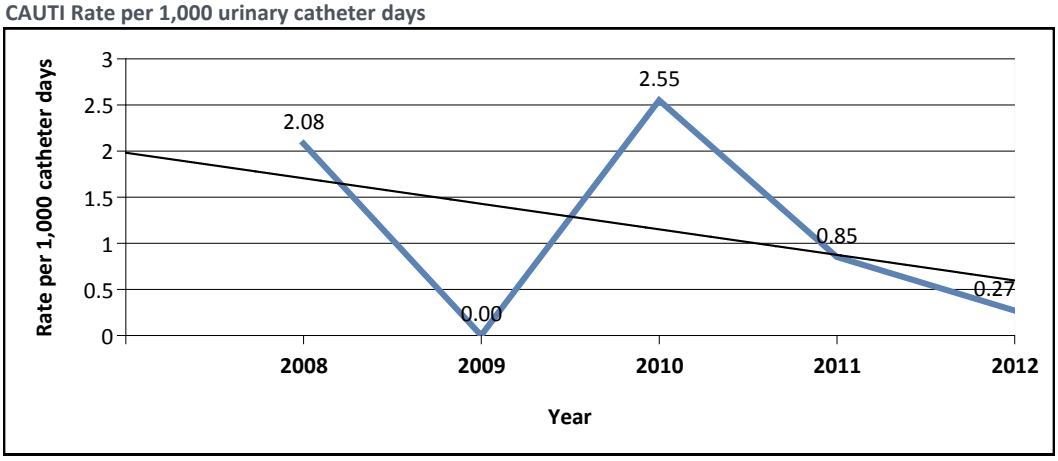
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	12,571	0	0	5	0	2	0	4	0	5	0	1.27
2009	24,272	1	0	5	0	6	0	17	0	0	1	1.24
2010	23,437	1	0	3	0	9	0	19	0	13	0	1.92
2011	24,902	1	0	7	0	4	2	18	0	8	0	1.61
2012	25,305	2	0	7	1	13	1	15	3	4	0	1.82

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	5	5.67	0.88	0.28 - 2.06	Same as
2009	0	6.25	0.00	0 - 0.59	Better
2010	10	6.48	1.54	0.74 - 2.84	Same as
2011	3	4.22	0.71	0.14 - 2.08	Same as
2012	1	5.08	0.20	0 - 1.09	Same as

CAUTI Rate per 1,000 urinary catheter days



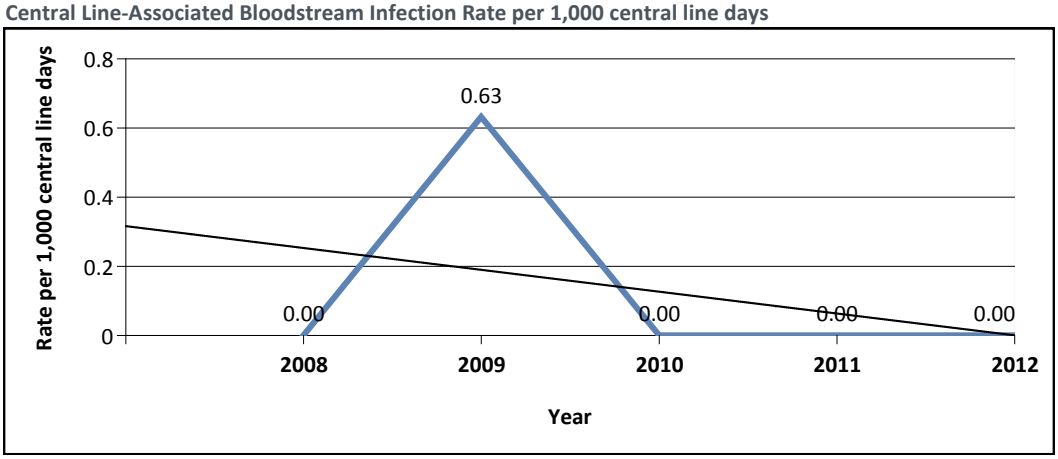
LEWISTOWN HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	1.16	0.00	0 - 3.16	Same as
2009	1	1.66	0.60	0.01 - 3.34	Same as
2010	0	1.28	0.00	0 - 2.87	Same as
2011	0	1.08	0.00	0 - 3.4	Same as
2012	0	1.38	0.00	0 - 2.66	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



LIFECARE HOSPITALS OF CHESTER COUNTY

NHSN ID: 12005

Hospital type: Long-term acute care hospital

Number of licensed beds (2012): 39

Number of reported Healthcare-Associated Infections:

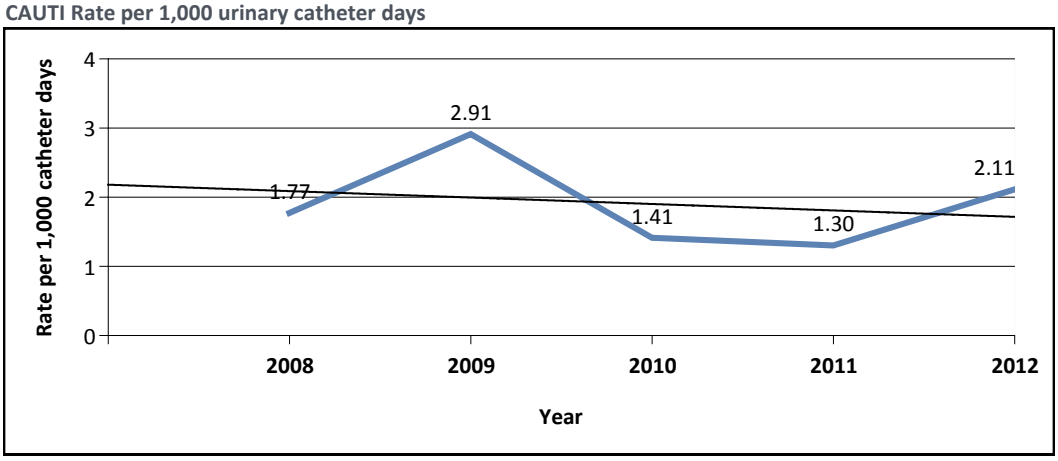
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,517	7	0	3	0	1	0	0	0	5	0	3.54
2009	8,522	12	0	3	0	10	0	0	0	17	0	4.93
2010	8,384	5	0	8	0	2	0	0	0	8	0	2.74
2011	8,890	12	0	12	0	1	0	0	0	7	0	3.60
2012	7,658	6	0	4	0	2	0	0	1	8	0	2.74

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	5	5.60	0.89	0.29 - 2.08	Same as
2009	17	9.21	1.85	1.07 - 2.95	Worse
2010	8	9.03	0.89	0.38 - 1.75	Same as
2011	7	7.91	0.88	0.35 - 1.82	Same as
2012	8	5.49	1.46	0.63 - 2.87	Same as

CAUTI Rate per 1,000 urinary catheter days



Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Long-Term Acute Care

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation

LIFECARE HOSPITALS OF CHESTER COUNTY

2008	7	4.73	1.48	0.78 - 3.05	Same as
2009	12	7.94	1.51	0.78 - 2.64	Same as
2010	5	8.24	0.61	0.2 - 1.42	Same as
2011	12	7.37	1.63	0.84 - 2.84	Same as
2012	5	5.83	0.86	0.28 - 2	Same as

LIFECARE HOSPITALS OF MECHANICSBURG

NHSN ID: 12388

Hospital type: Long-term acute care hospital

Number of licensed beds (2012): 68

Number of reported Healthcare-Associated Infections:

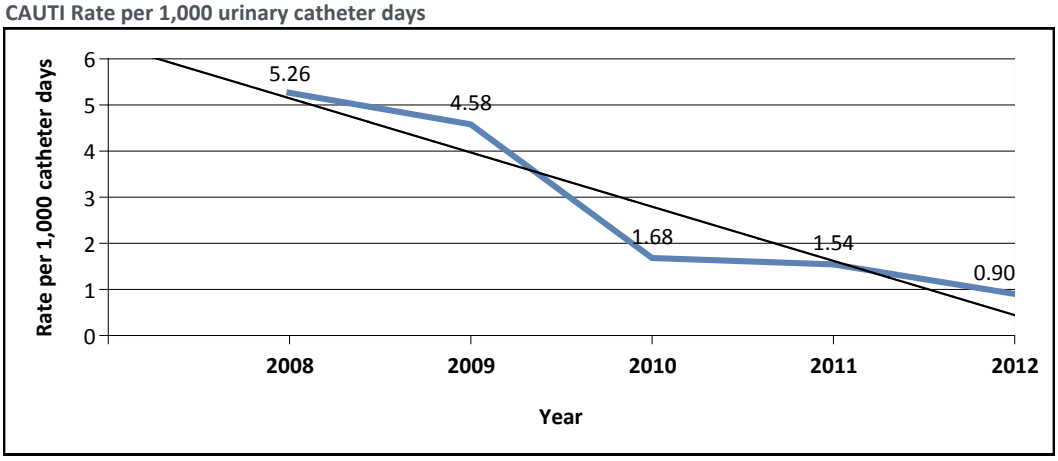
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	6,663	8	0	13	0	7	0	0	0	19	0	7.05
2009	13,713	21	2	18	0	9	0	0	0	37	0	6.34
2010	14,747	9	0	4	0	3	0	0	1	22	0	2.64
2011	11,607	5	0	2	0	1	0	0	0	12	0	1.72
2012	9,277	5	0	6	0	3	0	0	0	9	0	2.48

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	15	5.98	2.51	1.4 - 4.14	Worse
2009	32	11.09	2.88	1.97 - 4.07	Worse
2010	12	11.47	1.05	0.54 - 1.83	Same as
2011	8	7.34	1.09	0.47 - 2.15	Same as
2012	4	6.44	0.62	0.17 - 1.59	Same as

CAUTI Rate per 1,000 urinary catheter days



Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Long-Term Acute Care

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation

LIFECARE HOSPITALS OF MECHANICSBURG

2008	8	6.53	1.22	1.09 - 2.41	Same as
2009	21	11.96	1.76	1.09 - 2.68	Worse
2010	9	13.32	0.68	0.31 - 1.28	Same as
2011	5	9.38	0.53	0.17 - 1.24	Same as
2012	4	7.13	0.56	0.15 - 1.44	Same as

LIFECARE HOSPITALS OF PITTSBURGH

NHSN ID: 11945

Hospital type: Long-term acute care hospital

Number of licensed beds (2012): 129

Number of reported Healthcare-Associated Infections:

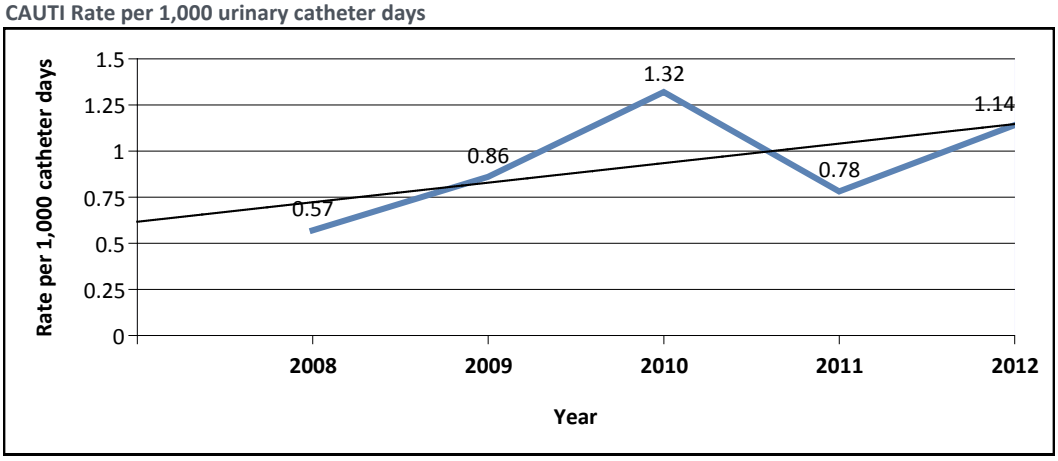
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	15,237	2	1	5	0	1	0	0	1	3	0	0.85
2009	29,647	7	1	33	1	6	0	0	2	11	0	2.06
2010	33,719	21	1	28	6	13	0	0	1	15	0	2.52
2011	27,933	19	0	19	0	6	0	0	1	5	0	1.79
2012	25,487	8	0	8	0	3	0	0	0	6	0	0.98

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	11.45	0.26	0.05 - 0.77	Better
2009	8	14.81	0.54	0.23 - 1.06	Same as
2010	14	17.22	0.81	0.44 - 1.36	Same as
2011	5	8.28	0.60	0.19 - 1.41	Same as
2012	6	7.35	0.82	0.3 - 1.78	Same as

CAUTI Rate per 1,000 urinary catheter days



Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Long-Term Acute Care

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation

LIFECARE HOSPITALS OF PITTSBURGH

2008	2	11.56	0.17	0.14 - 0.62	Better
2009	7	20.47	0.34	0.14 - 0.7	Better
2010	21	22.41	0.94	0.58 - 1.43	Same as
2011	18	18.88	0.95	0.56 - 1.51	Same as
2012	6	10.00	0.60	0.22 - 1.31	Same as

LIFECARE HOSPITALS OF PITTSBURGH --- ALLE-KISKI CAMPUS

NHSN ID: 18955

Hospital type: Long-term acute care hospital

Number of licensed beds (2012): 35

Number of reported Healthcare-Associated Infections:

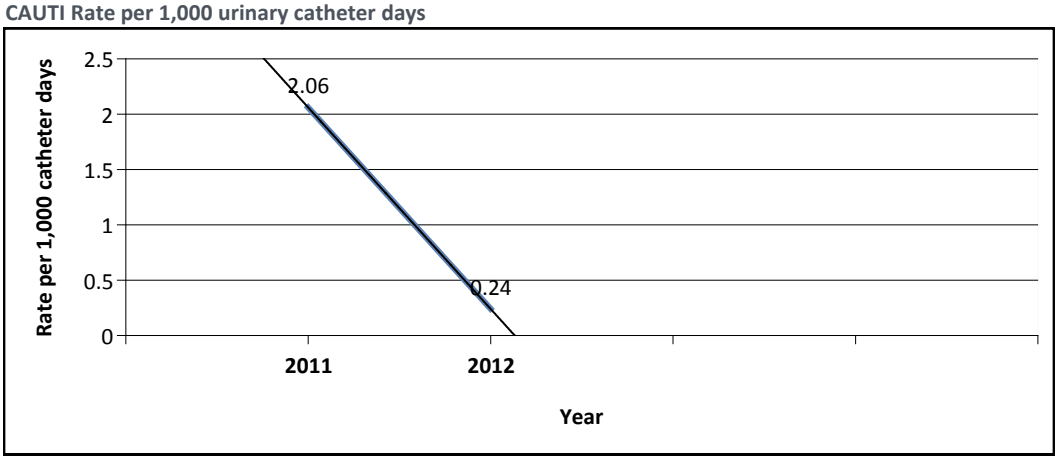
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008												
2009												
2010												
2011	7,254	1	0	3	0	1	0	0	0	10	0	2.07
2012	6,811	1	0	0	0	0	0	0	0	1	0	0.29

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008				-	
2009				-	
2010				-	
2011	10	7.25	1.38	0.66 - 2.54	Same as
2012	1	6.22	0.16	0 - 0.89	Better

CAUTI Rate per 1,000 urinary catheter days



Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Long-Term Acute Care

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation

LIFECARE HOSPITALS OF PITTSBURGH --- ALLE-KISKI CAMPUS

2008				-	
2009				-	
2010				-	
2011	1	5.87	0.17	0 - 0.95	Better
2012	1	4.93	0.20	0 - 1.13	Same as

LIFECARE HOSPITALS OF PITTSBURGH --- MONROEVILLE

NHSN ID: 12254

Hospital type: Long-term acute care hospital

Number of licensed beds (2012): 87

Number of reported Healthcare-Associated Infections:

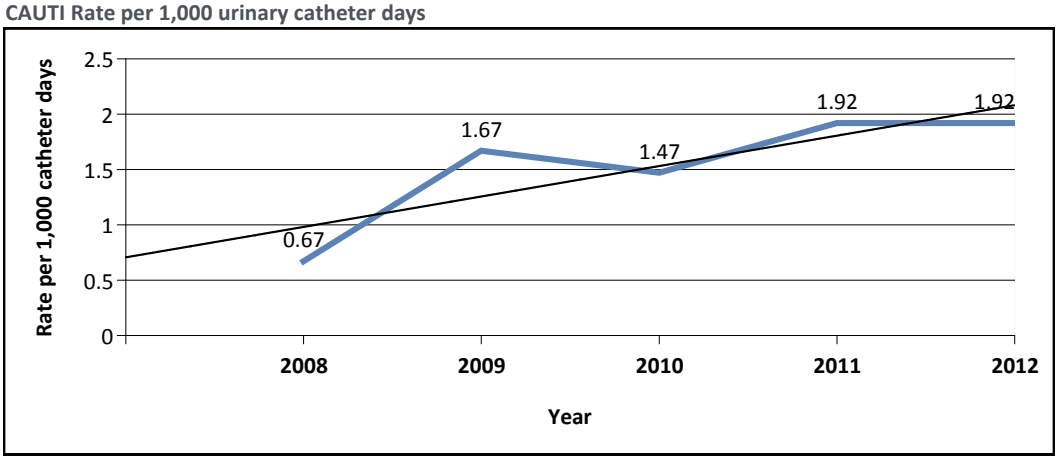
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	9,785	8	0	26	5	1	0	0	1	7	0	4.91
2009	17,502	17	0	29	9	7	0	0	1	21	0	4.80
2010	15,345	10	0	17	8	3	0	0	0	19	0	3.71
2011	14,075	10	0	17	4	0	0	0	0	19	0	3.55
2012	12,994	6	0	6	2	2	0	0	0	13	0	2.23

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	9.30	0.32	0.06 - 0.94	Better
2009	14	13.34	1.05	0.57 - 1.76	Same as
2010	14	15.23	0.92	0.5 - 1.54	Same as
2011	16	12.25	1.31	0.75 - 2.12	Same as
2012	12	9.05	1.33	0.68 - 2.32	Same as

CAUTI Rate per 1,000 urinary catheter days



Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Long-Term Acute Care

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation

LIFECARE HOSPITALS OF PITTSBURGH --- MONROEVILLE

2008	7	8.66	0.81	0.63 - 1.67	Same as
2009	16	14.60	1.10	0.63 - 1.78	Same as
2010	9	13.35	0.67	0.31 - 1.28	Same as
2011	10	10.84	0.92	0.44 - 1.7	Same as
2012	6	7.90	0.76	0.28 - 1.65	Same as

LIFECARE HOSPITALS OF PITTSBURGH --- SUBURBAN CAMPUS

NHSN ID: 12385

Hospital type: Long-term acute care hospital

Number of licensed beds (2012): 32

Number of reported Healthcare-Associated Infections:

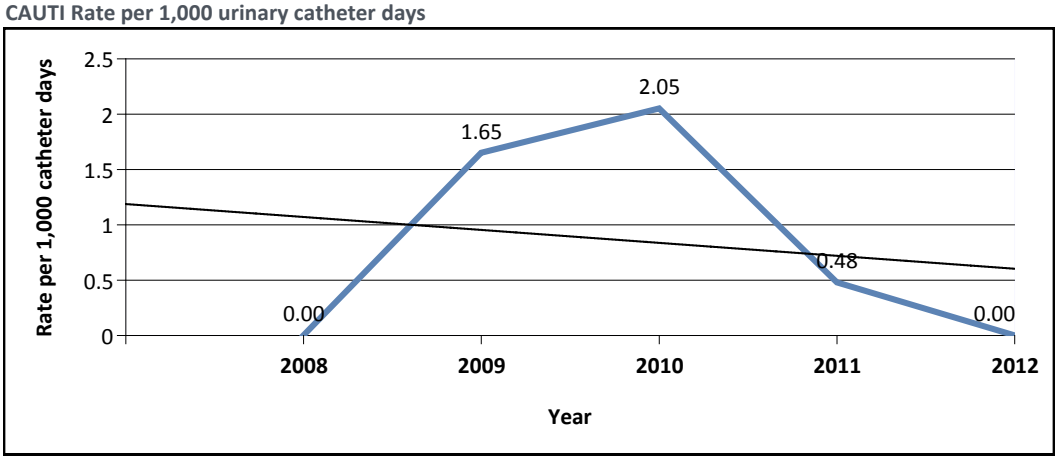
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,375	0	0	0	0	0	0	0	0	0	0	0.00
2009	8,527	8	0	10	0	0	0	0	0	8	0	3.05
2010	6,461	4	0	12	0	0	0	0	0	6	0	3.41
2011	7,155	9	0	9	0	0	0	0	0	2	0	2.80
2012	8,068	7	0	3	0	0	0	0	0	0	0	1.24

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	5.40	0.00	0 - 0.68	Better
2009	8	7.70	1.04	0.45 - 2.05	Same as
2010	6	4.70	1.28	0.47 - 2.78	Same as
2011	2	6.07	0.33	0.04 - 1.19	Same as
2012	0	5.39	0.00	0 - 0.68	Better

CAUTI Rate per 1,000 urinary catheter days



Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Long-Term Acute Care

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation

LIFECARE HOSPITALS OF PITTSBURGH --- SUBURBAN CAMPUS

2008	0	4.28	0.00	0.41 - 0.86	Better
2009	7	6.90	1.01	0.41 - 2.09	Same as
2010	4	5.57	0.72	0.19 - 1.84	Same as
2011	8	5.81	1.38	0.59 - 2.71	Same as
2012	7	5.49	1.28	0.51 - 2.63	Same as

LOCK HAVEN HOSPITAL

NHSN ID: 12097

Hospital type: Acute care general hospital

Number of licensed beds (2012): 47

Number of reported Healthcare-Associated Infections:

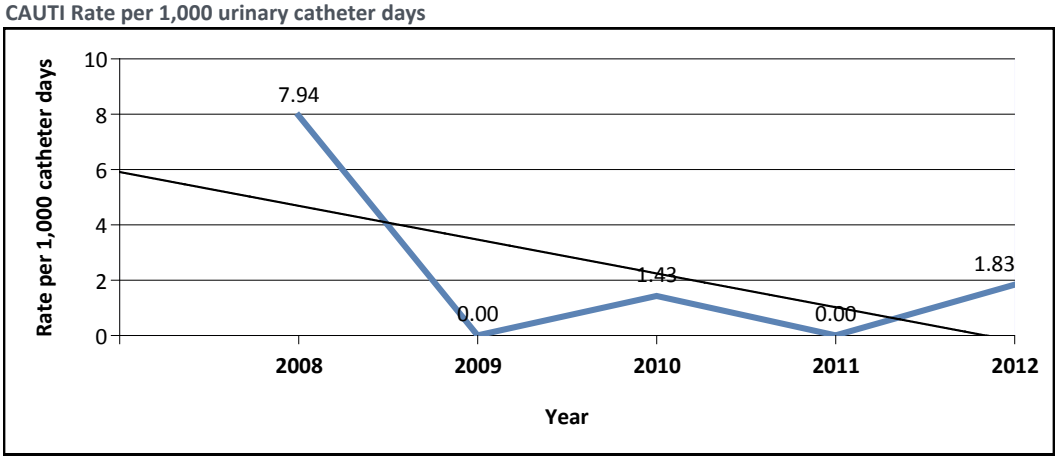
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,198	0	0	0	0	0	0	1	0	4	0	1.56
2009	5,378	0	0	0	0	1	2	6	1	2	0	2.23
2010	4,819	0	0	1	0	8	0	5	1	3	2	4.15
2011	4,158	0	0	0	0	2	0	2	0	1	0	1.20
2012	4,456	1	0	0	0	0	0	1	0	1	0	0.67

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	0.96	3.14	0.63 - 9.17	Same as
2009	0	1.04	0.00	0 - 3.52	Same as
2010	1	1.16	0.86	0.01 - 4.81	Same as
2011	0	1.05	0.00	0 - 3.51	Same as
2012	1	0.74	1.35	0.02 - 7.5	Same as

CAUTI Rate per 1,000 urinary catheter days



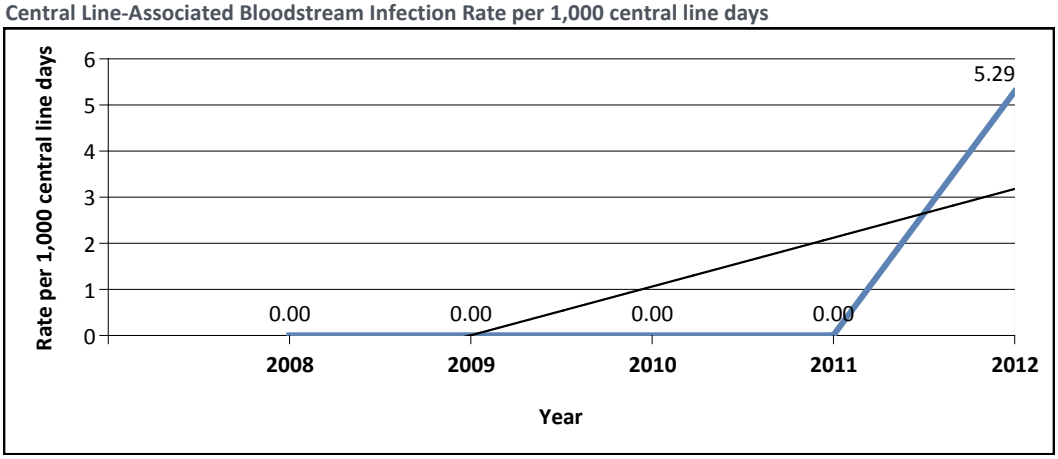
LOCK HAVEN HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.04	0.00	0 - 94.98	Same as
2009	0	0.14	0.00	0 - 26.42	Same as
2010	0	0.16	0.00	0 - 22.43	Same as
2011	0	0.13	0.00	0 - 28.59	Same as
2012	1	0.11	8.98	0.12 - 49.94	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



LOWER BUCKS HOSPITAL

NHSN ID: 12390

Hospital type: Acute care general hospital

Number of licensed beds (2012): 186

Number of reported Healthcare-Associated Infections:

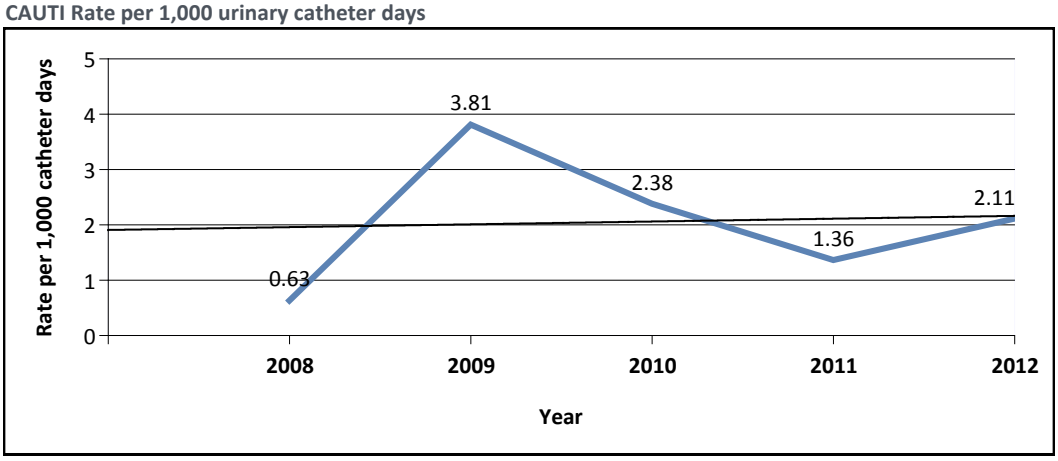
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	11,371	1	0	0	0	2	0	0	0	1	0	0.35
2009	35,300	10	0	0	0	11	0	8	0	21	0	1.42
2010	35,488	5	0	0	0	6	0	10	0	11	0	0.90
2011	31,448	1	0	0	5	2	0	13	0	5	0	0.83
2012	30,332	4	0	0	0	1	1	0	0	6	0	0.40

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	3.94	0.25	0 - 1.41	Same as
2009	21	8.89	2.36	1.46 - 3.61	Worse
2010	11	7.68	1.43	0.71 - 2.56	Same as
2011	5	4.29	1.16	0.38 - 2.72	Same as
2012	6	3.81	1.57	0.58 - 3.43	Same as

CAUTI Rate per 1,000 urinary catheter days



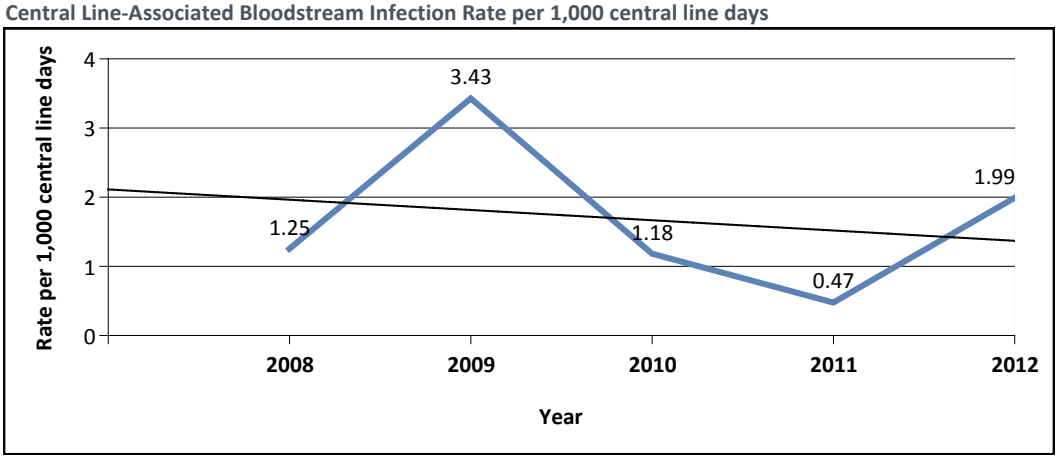
LOWER BUCKS HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	1.11	0.90	0.01 - 5	Same as
2009	9	2.67	3.37	1.54 - 6.4	Worse
2010	3	1.93	1.56	0.31 - 4.55	Same as
2011	1	1.38	0.72	0.01 - 4.03	Same as
2012	4	1.28	3.13	0.84 - 8	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008				-	
2009	0	0.14	0.00	0 - 25.67	Same as
2010	0	0.07	0.00	0 - 50.61	Same as
2011	0	0.06	0.00	0 - 61.48	Same as
2012	0	0.01	0.00	0 - 255.89	Same as

MAGEE REHAB HOSPITAL

NHSN ID: 12146

Hospital type: Rehabilitation hospital

Number of licensed beds (2012): 96

Number of reported Healthcare-Associated Infections:

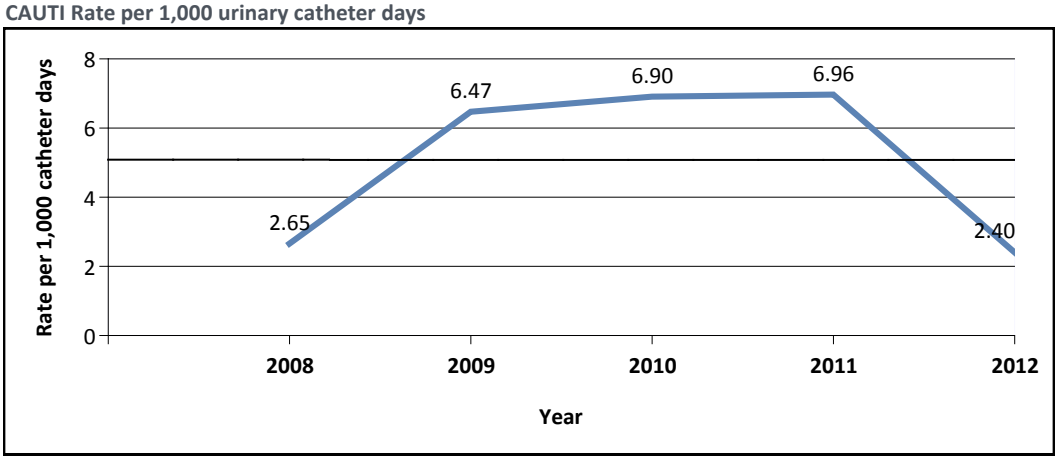
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	15,285	0	0	0	0	0	0	0	0	19	0	1.24
2009	30,485	0	0	0	0	0	0	0	0	101	0	3.31
2010	28,308	0	0	0	0	0	0	0	0	98	0	3.46
2011	28,612	2	0	10	0	1	0	0	0	60	0	2.55
2012	26,781	1	0	10	0	0	0	0	0	21	0	1.19

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	16	12.83	1.25	0.71 - 2.03	Same as
2009	55	18.68	2.94	2.22 - 3.83	Worse
2010	63	15.87	3.97	3.05 - 5.08	Worse
2011	60	15.26	3.93	3 - 5.06	Worse
2012	20	11.81	1.69	1.03 - 2.62	Worse

CAUTI Rate per 1,000 urinary catheter days



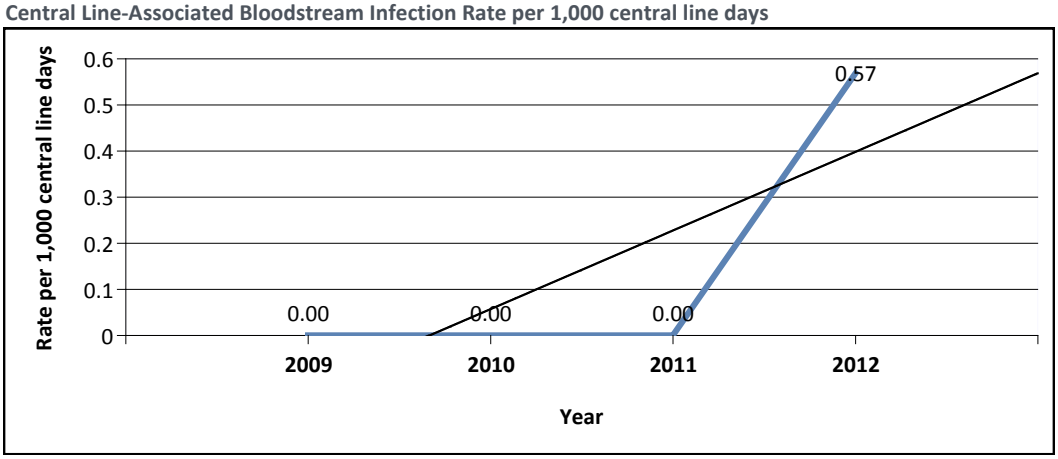
MAGEE REHAB HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008				-	
2009	0	2.60	0.00	0 - 1.41	Same as
2010	0	1.95	0.00	0 - 1.88	Same as
2011	0	2.50	0.00	0 - 1.47	Same as
2012	1	1.11	0.90	0.01 - 5.01	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM

NHSN ID: 10301

Hospital type: Acute care general hospital

Number of licensed beds (2012): 360

Number of reported Healthcare-Associated Infections:

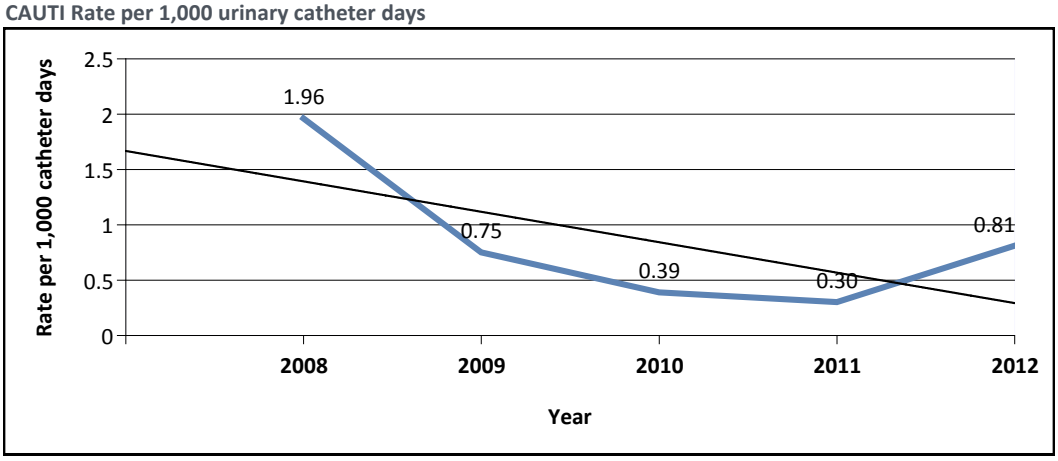
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	46,121	3	11	13	6	8	1	38	2	13	0	2.06
2009	103,134	18	1	27	11	11	3	85	6	14	0	1.71
2010	78,301	22	5	10	14	20	2	91	5	17	2	2.40
2011	77,844	18	7	4	5	17	1	95	7	15	0	2.17
2012	85,243	22	6	30	2	12	1	154	15	21	0	3.09

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	10	13.05	0.77	0.37 - 1.41	Same as
2009	8	23.92	0.33	0.14 - 0.66	Better
2010	7	31.17	0.22	0.09 - 0.46	Better
2011	2	9.94	0.20	0.02 - 0.73	Better
2012	10	22.68	0.44	0.21 - 0.81	Better

CAUTI Rate per 1,000 urinary catheter days



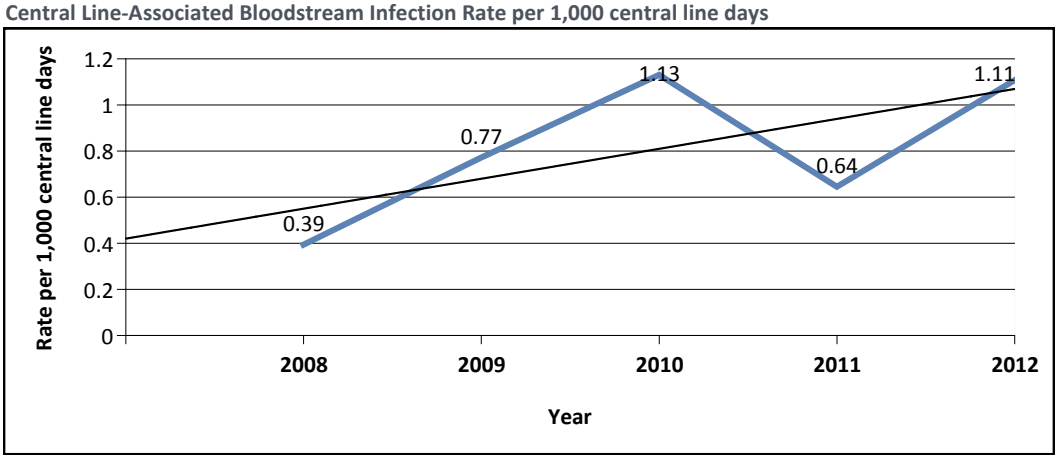
MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	3.54	0.28	0 - 1.57	Same as
2009	4	7.78	0.51	0.14 - 1.32	Same as
2010	8	6.23	1.28	0.55 - 2.53	Same as
2011	5	6.99	0.72	0.23 - 1.67	Same as
2012	9	6.25	1.44	0.66 - 2.73	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	5.61	0.36	0.11 - 1.29	Same as
2009	8	8.44	0.95	0.41 - 1.87	Same as
2010	2	9.56	0.21	0.02 - 0.76	Better
2011	4	5.22	0.77	0.21 - 1.96	Same as
2012	6	5.93	1.01	0.37 - 2.2	Same as

MAIN LINE HOSPITAL --- PAOLI

NHSN ID: 11750

Hospital type: Acute care general hospital

Number of licensed beds (2012): 222

Number of reported Healthcare-Associated Infections:

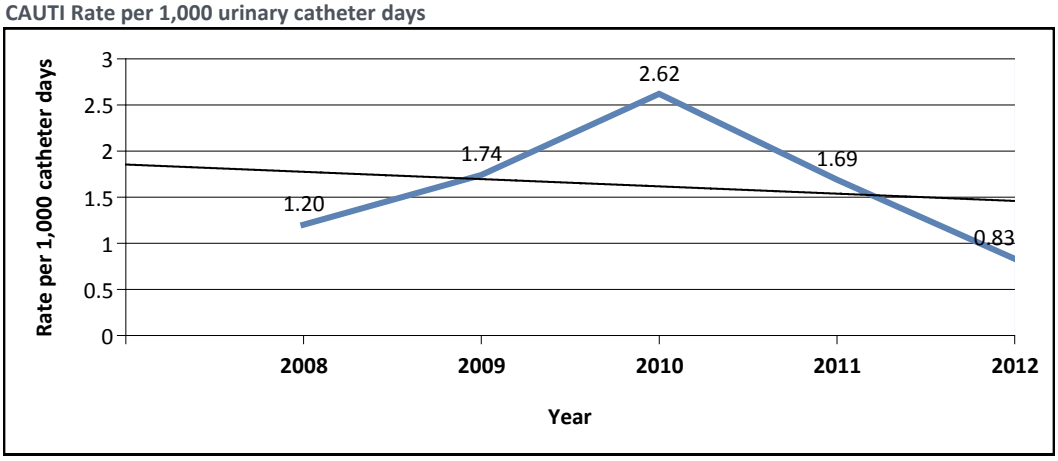
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	24,458	5	0	3	0	8	0	11	1	5	3	1.47
2009	51,576	10	3	13	0	11	0	19	5	19	0	1.55
2010	57,279	6	1	13	0	20	0	35	2	25	1	1.80
2011	59,968	6	1	15	3	14	0	33	2	20	2	1.60
2012	56,763	11	1	21	3	19	5	25	1	15	1	1.80

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	5	9.98	0.50	0.16 - 1.17	Same as
2009	13	12.09	1.08	0.57 - 1.84	Same as
2010	23	14.54	1.58	1 - 2.37	Worse
2011	16	11.49	1.39	0.8 - 2.26	Same as
2012	10	16.85	0.59	0.28 - 1.09	Same as

CAUTI Rate per 1,000 urinary catheter days



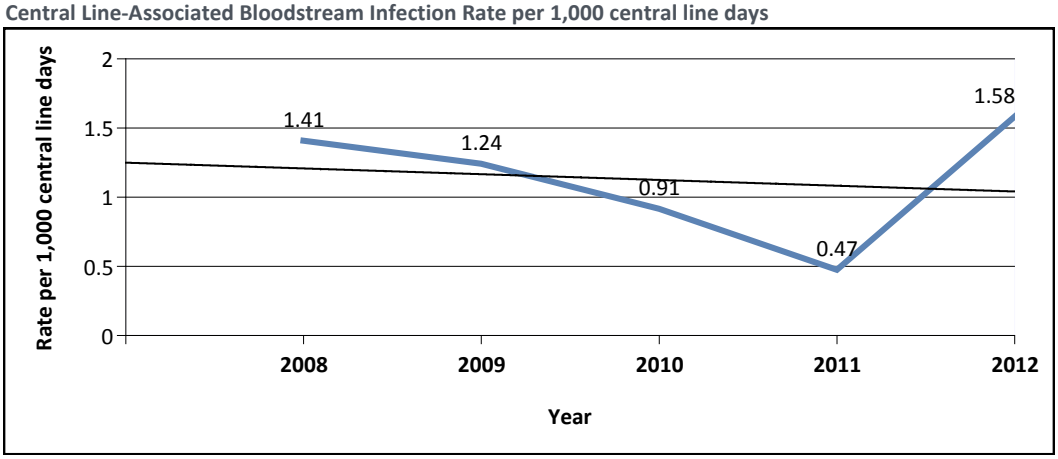
MAIN LINE HOSPITAL --- PAOLI

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	5	5.17	0.97	0.31 - 2.26	Same as
2009	8	5.86	1.36	0.59 - 2.69	Same as
2010	6	4.64	1.29	0.47 - 2.81	Same as
2011	3	3.84	0.78	0.16 - 2.28	Same as
2012	10	4.35	2.30	1.1 - 4.23	Worse

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.05	0.00	0 - 68.79	Same as
2009	0	0.10	0.00	0 - 38.32	Same as
2010	0	0.12	0.00	0 - 30.85	Same as
2011	0	0.12	0.00	0 - 30.79	Same as
2012	0	0.15	0.00	0 - 24.78	Same as

MAIN LINE HOSPITAL BRYN MAWR

NHSN ID: 11753

Hospital type: Acute care general hospital

Number of licensed beds (2012): 319

Number of reported Healthcare-Associated Infections:

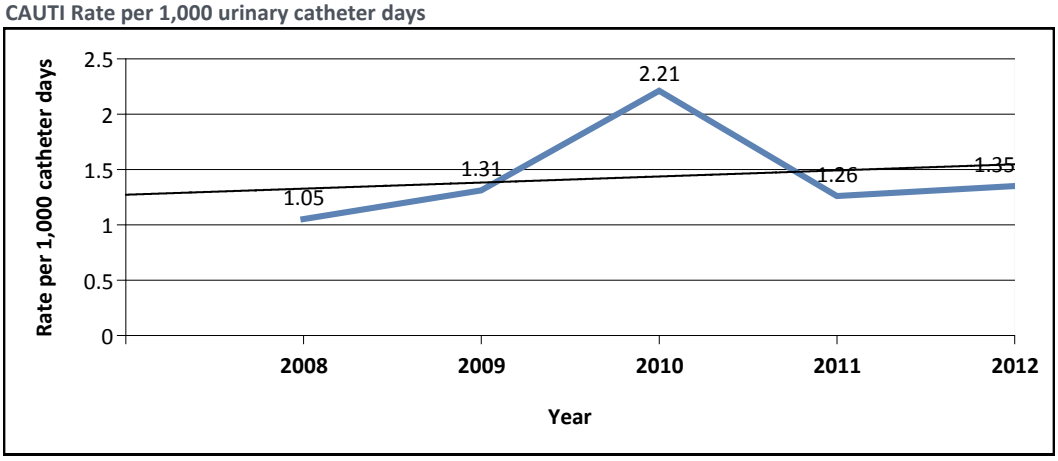
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	49,231	12	0	18	0	15	0	12	1	9	0	1.36
2009	95,265	26	1	30	0	24	0	22	2	24	2	1.38
2010	95,295	23	0	29	3	32	0	36	2	26	2	1.61
2011	94,116	19	0	25	1	29	0	30	3	26	1	1.42
2012	71,732	11	0	36	3	17	0	27	1	24	1	1.67

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	7	16.49	0.42	0.17 - 0.87	Better
2009	16	27.13	0.59	0.34 - 0.96	Better
2010	24	19.34	1.24	0.8 - 1.85	Same as
2011	13	15.85	0.82	0.44 - 1.4	Same as
2012	17	23.41	0.73	0.42 - 1.16	Same as

CAUTI Rate per 1,000 urinary catheter days



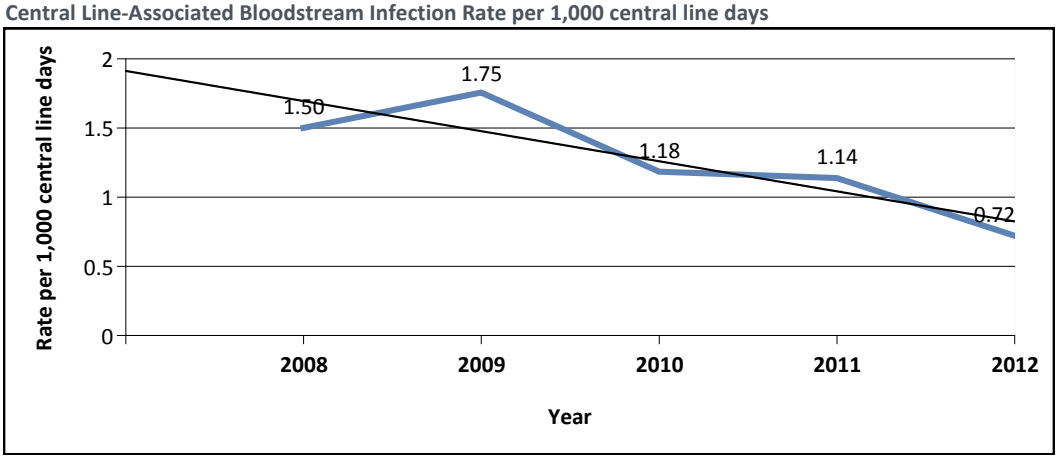
MAIN LINE HOSPITAL BRYN MAWR

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	9	8.73	1.03	0.47 - 1.96	Same as
2009	21	15.22	1.38	0.85 - 2.11	Same as
2010	12	8.86	1.35	0.7 - 2.37	Same as
2011	11	8.84	1.24	0.62 - 2.23	Same as
2012	8	8.79	0.91	0.39 - 1.79	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	1.76	0.57	0.04 - 3.16	Same as
2009	2	1.07	1.87	0.21 - 6.74	Same as
2010	1	2.07	0.48	0.01 - 2.69	Same as
2011	0	1.15	0.00	0 - 3.19	Same as
2012	1	0.73	1.37	0.02 - 7.61	Same as

MAIN LINE HOSPITAL BRYN MAWR REHABILITATION

NHSN ID: 11417

Hospital type: Rehabilitation hospital

Number of licensed beds (2012): 148

Number of reported Healthcare-Associated Infections:

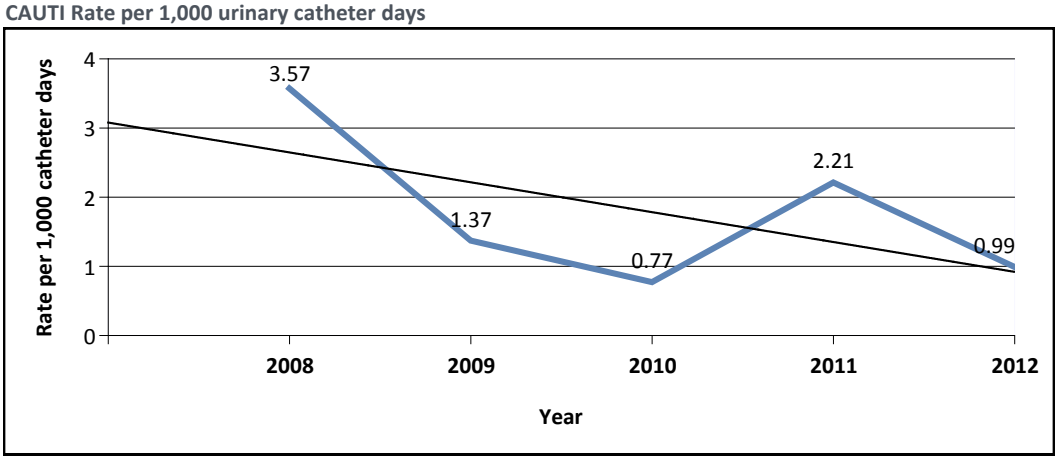
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	23,443	3	0	22	0	0	0	0	4	35	0	2.73
2009	46,834	2	0	45	0	2	0	0	3	43	0	2.03
2010	43,374	0	0	17	0	1	0	0	2	35	0	1.27
2011	41,448	1	0	9	2	3	0	0	4	63	0	1.98
2012	38,707	0	0	16	0	5	0	0	0	27	0	1.24

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	5	3.91	1.28	0.41 - 2.98	Same as
2009	4	4.79	0.83	0.22 - 2.14	Same as
2010	2	4.39	0.46	0.05 - 1.64	Same as
2011	5	2.37	2.11	0.68 - 4.93	Same as
2012	2	2.65	0.76	0.08 - 2.73	Same as

CAUTI Rate per 1,000 urinary catheter days



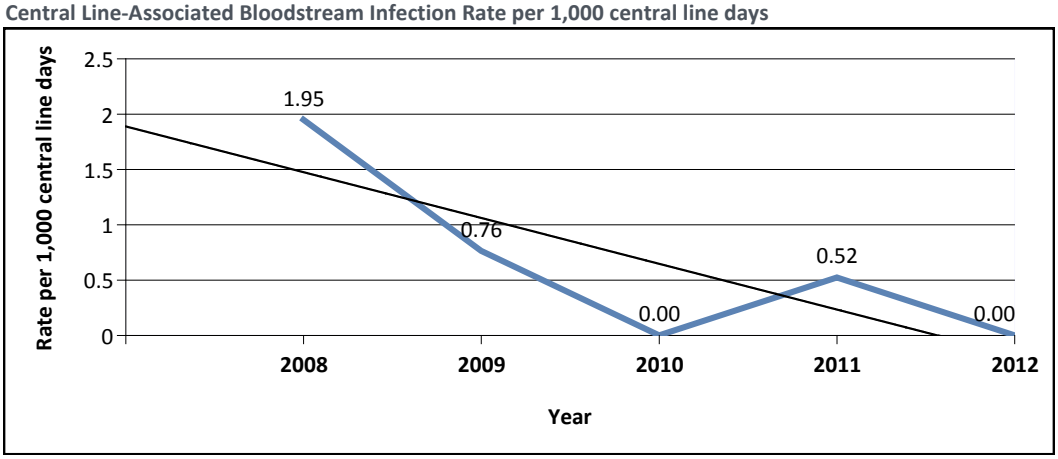
MAIN LINE HOSPITAL BRYN MAWR REHABILITATION

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	2.14	1.40	0.28 - 4.1	Same as
2009	2	2.83	0.71	0.08 - 2.55	Same as
2010	0	1.78	0.00	0 - 2.06	Same as
2011	1	1.34	0.75	0.01 - 4.16	Same as
2012	0	1.16	0.00	0 - 3.17	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER

NHSN ID: 11770

Hospital type: Acute care general hospital

Number of licensed beds (2012): 317

Number of reported Healthcare-Associated Infections:

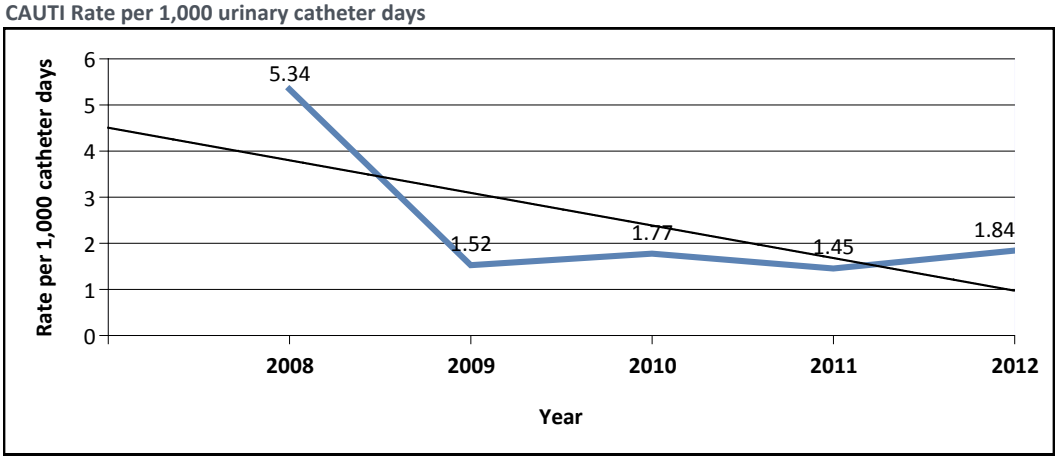
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	42,245	49	5	15	5	60	0	40	3	54	0	5.47
2009	105,206	37	9	21	26	35	1	56	11	46	2	2.32
2010	90,598	22	11	18	19	27	0	57	10	48	1	2.35
2011	85,861	18	10	20	14	25	0	60	1	34	0	2.12
2012	76,127	7	1	27	24	21	1	57	7	39	0	2.42

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	49	21.23	2.31	1.71 - 3.05	Worse
2009	27	28.58	0.94	0.62 - 1.37	Same as
2010	29	26.97	1.08	0.72 - 1.54	Same as
2011	23	26.22	0.88	0.56 - 1.32	Same as
2012	32	32.66	0.98	0.67 - 1.38	Same as

CAUTI Rate per 1,000 urinary catheter days



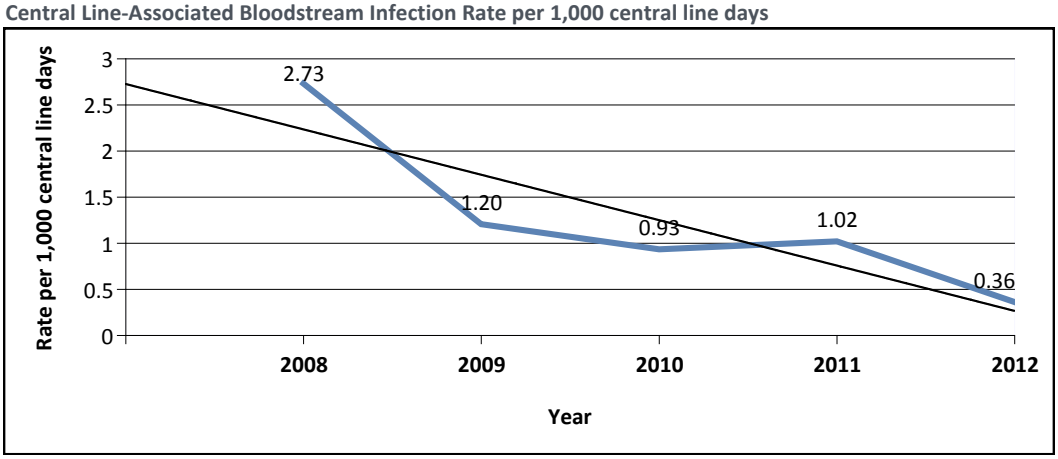
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	22	11.94	1.84	1.15 - 2.79	Worse
2009	19	13.26	1.43	0.86 - 2.24	Same as
2010	14	10.00	1.40	0.76 - 2.35	Same as
2011	14	11.93	1.17	0.64 - 1.97	Same as
2012	5	11.29	0.44	0.14 - 1.03	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	1.39	2.16	0.15 - 6.32	Same as
2009	3	3.38	0.89	0.18 - 2.59	Same as
2010	0	0.92	0.00	0 - 3.99	Same as
2011	0	1.34	0.00	0 - 2.74	Same as
2012	0	1.12	0.00	0 - 3.26	Same as

MEADVILLE MEDICAL CENTER

NHSN ID: 11583

Hospital type: Acute care general hospital

Number of licensed beds (2012): 203

Number of reported Healthcare-Associated Infections:

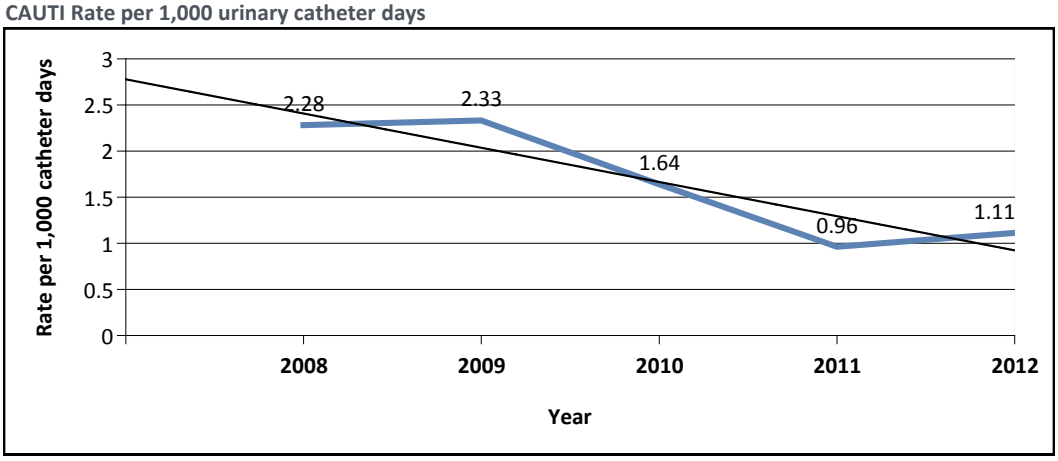
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	17,576	1	1	6	1	7	0	15	6	22	1	3.41
2009	43,184	8	2	12	3	14	1	17	1	23	0	1.88
2010	36,711	2	7	12	0	6	1	28	0	21	0	2.10
2011	36,634	2	1	16	1	10	0	19	1	10	0	1.64
2012	35,113	4	6	18	0	6	2	22	5	8	0	2.02

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	11	10.80	1.02	0.51 - 1.82	Same as
2009	17	16.12	1.05	0.61 - 1.69	Same as
2010	9	9.72	0.93	0.42 - 1.76	Same as
2011	6	10.24	0.59	0.21 - 1.28	Same as
2012	6	9.94	0.60	0.22 - 1.31	Same as

CAUTI Rate per 1,000 urinary catheter days



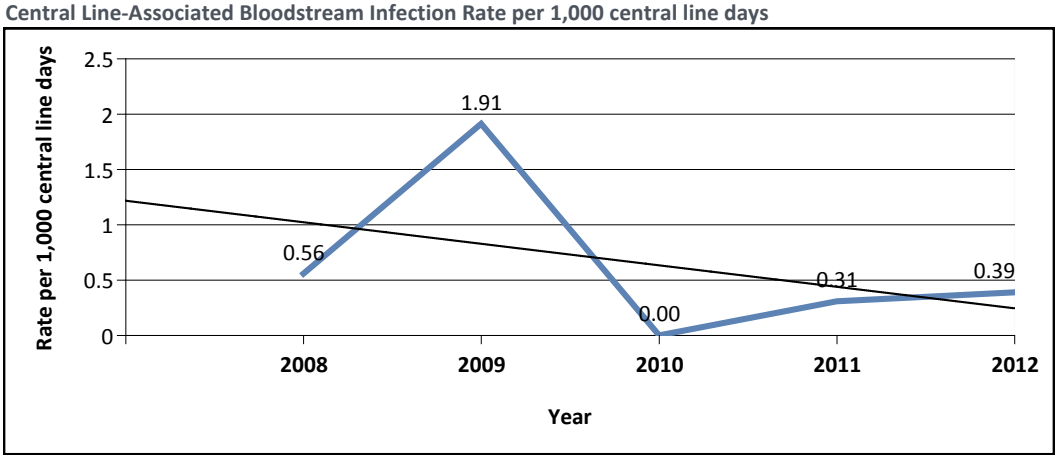
MEADVILLE MEDICAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	2.55	0.39	0.01 - 2.18	Same as
2009	7	5.04	1.39	0.56 - 2.86	Same as
2010	0	3.11	0.00	0 - 1.18	Same as
2011	1	3.15	0.32	0 - 1.77	Same as
2012	1	1.80	0.55	0.01 - 3.09	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



MEMORIAL HOSPITAL

NHSN ID: 11633

Hospital type: Acute care general hospital

Number of licensed beds (2012): 100

Number of reported Healthcare-Associated Infections:

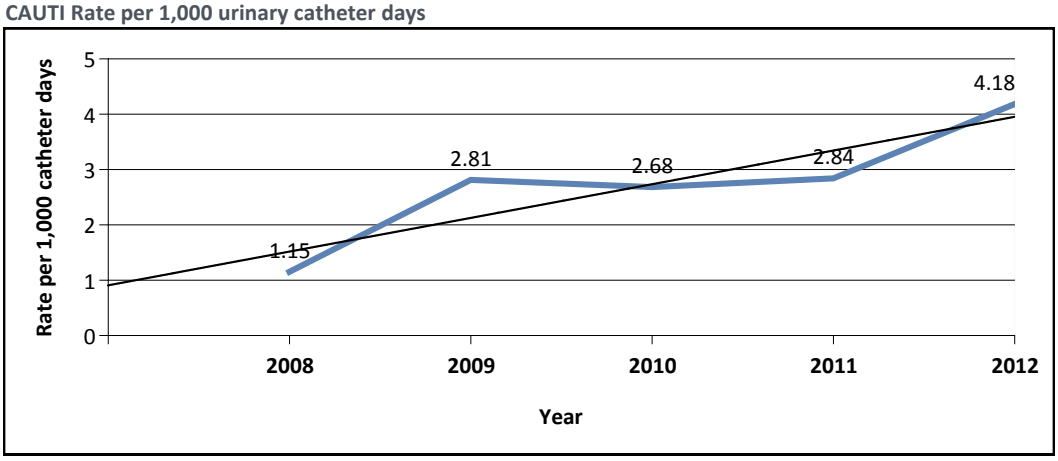
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	12,977	1	0	0	0	5	0	12	0	4	0	1.70
2009	21,940	5	0	3	0	12	0	27	0	18	0	2.96
2010	22,073	4	0	3	0	11	0	19	1	17	0	2.49
2011	23,341	3	1	9	0	6	1	28	5	23	0	3.26
2012	22,194	2	0	9	1	11	0	41	3	24	2	4.19

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	4	7.81	0.51	0.14 - 1.31	Same as
2009	18	14.07	1.28	0.76 - 2.02	Same as
2010	16	10.43	1.53	0.88 - 2.49	Same as
2011	17	10.35	1.64	0.96 - 2.63	Same as
2012	22	9.90	2.22	1.39 - 3.36	Worse

CAUTI Rate per 1,000 urinary catheter days



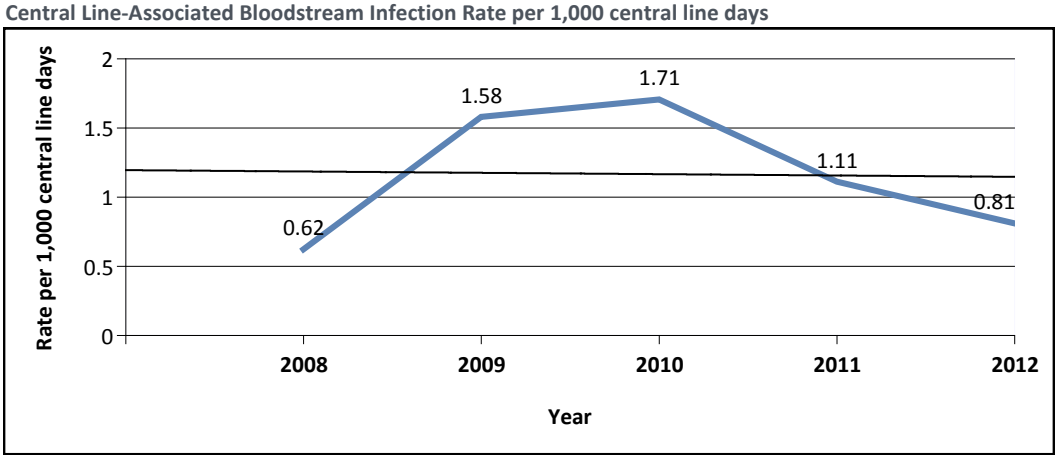
MEMORIAL HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	2.31	0.43	0.01 - 2.41	Same as
2009	5	4.03	1.24	0.4 - 2.89	Same as
2010	4	2.11	1.90	0.51 - 4.85	Same as
2011	3	2.51	1.20	0.24 - 3.5	Same as
2012	2	1.85	1.08	0.12 - 3.91	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



MEMORIAL HOSPITAL, INC. TOWANDA

NHSN ID: 12549

Hospital type: Acute care general hospital

Number of licensed beds (2012): 41

Number of reported Healthcare-Associated Infections:

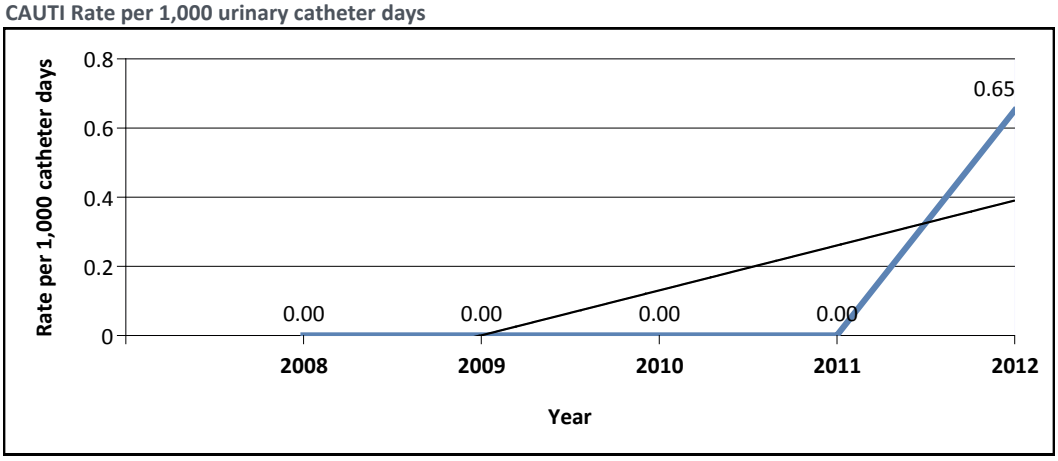
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,123	0	0	0	0	0	0	0	0	0	0	0.00
2009	6,353	0	0	0	0	0	0	0	0	0	0	0.00
2010	4,659	0	0	0	0	1	0	4	0	0	0	1.07
2011	4,432	0	0	0	0	0	0	0	1	0	0	0.23
2012	6,544	0	0	0	0	2	0	4	0	1	0	1.07

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	3.20	0.00	0 - 1.15	Same as
2009	0	2.74	0.00	0 - 1.34	Same as
2010	0	2.47	0.00	0 - 1.49	Same as
2011	0	1.88	0.00	0 - 1.95	Same as
2012	1	2.16	0.46	0.01 - 2.57	Same as

CAUTI Rate per 1,000 urinary catheter days



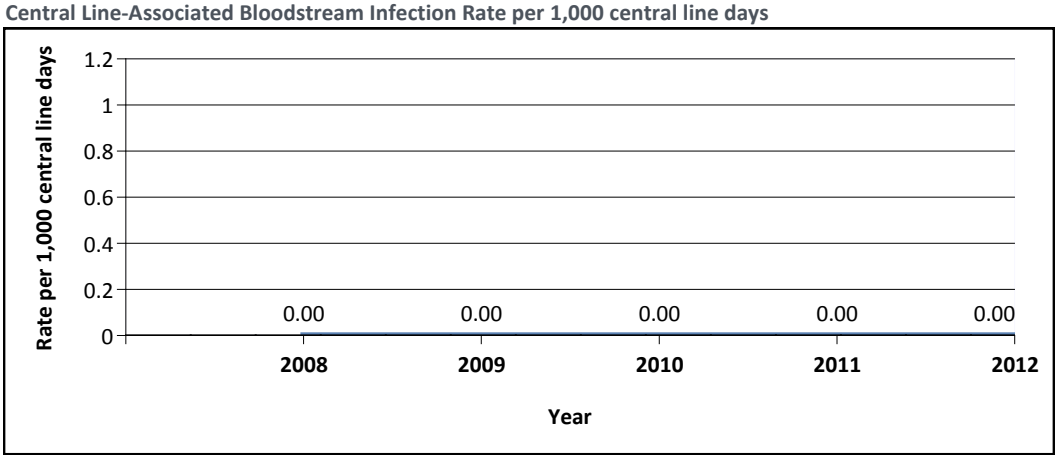
MEMORIAL HOSPITAL, INC. TOWANDA

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.23	0.00	0 - 15.8	Same as
2009	0	0.23	0.00	0 - 16.1	Same as
2010	0	0.22	0.00	0 - 16.52	Same as
2011	0	0.10	0.00	0 - 35.21	Same as
2012	0	0.19	0.00	0 - 19.44	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



MERCY FITZGERALD HOSPITAL

NHSN ID: 11683

Hospital type: Acute care general hospital

Number of licensed beds (2012): 213

Number of reported Healthcare-Associated Infections:

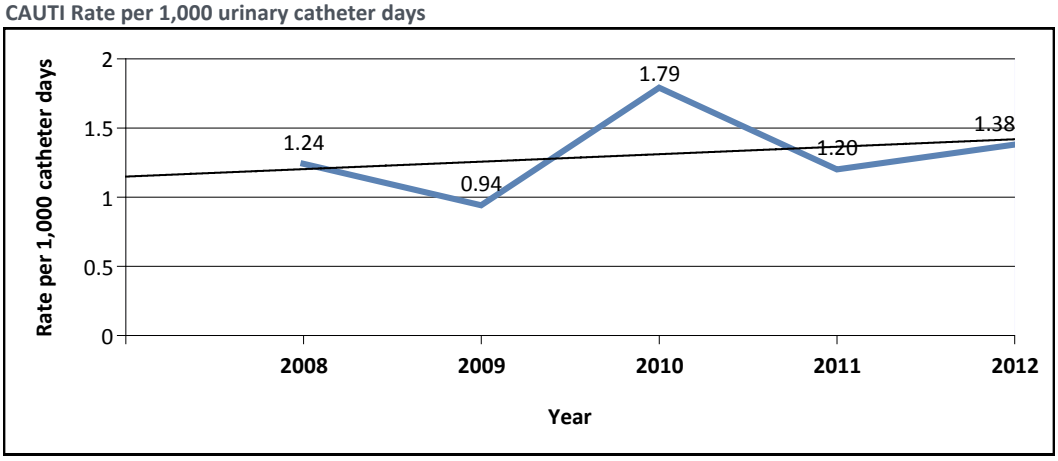
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	27,273	17	0	22	4	15	0	18	2	8	1	3.19
2009	60,404	38	0	33	10	19	0	38	1	24	2	2.73
2010	50,205	29	0	28	7	12	0	29	0	23	1	2.57
2011	47,715	19	0	14	1	9	0	19	1	20	1	1.76
2012	45,719	11	0	20	5	7	0	32	5	13	0	2.03

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	7	13.12	0.53	0.21 - 1.1	Same as
2009	11	25.90	0.42	0.21 - 0.76	Better
2010	17	16.78	1.01	0.59 - 1.62	Same as
2011	10	13.59	0.74	0.35 - 1.35	Same as
2012	8	10.60	0.75	0.33 - 1.49	Same as

CAUTI Rate per 1,000 urinary catheter days



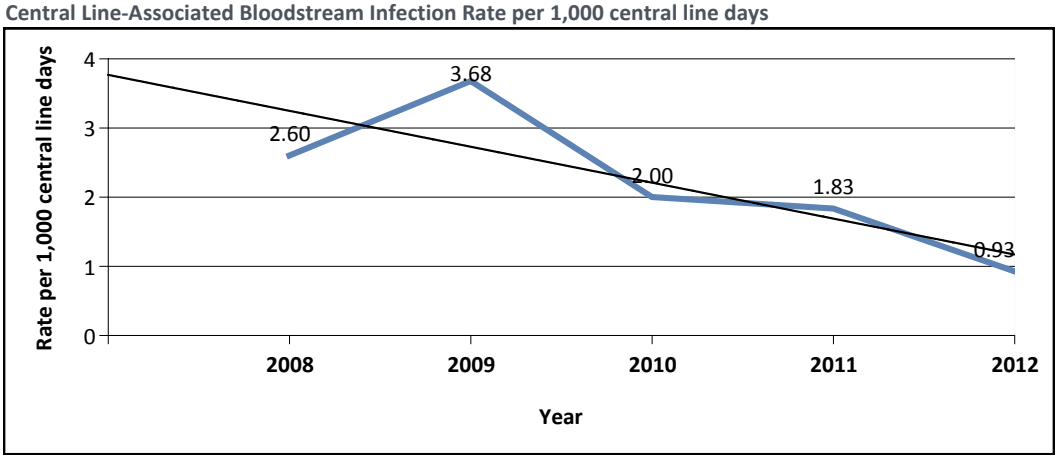
MERCY FITZGERALD HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	13	7.35	1.77	0.94 - 3.02	Same as
2009	33	11.27	2.93	2.02 - 4.11	Worse
2010	16	6.78	2.36	1.35 - 3.83	Worse
2011	13	6.31	2.06	1.1 - 3.52	Worse
2012	5	4.07	1.23	0.4 - 2.87	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



MERCY PHILADELPHIA HOSPITAL

NHSN ID: 11946

Hospital type: Acute care general hospital

Number of licensed beds (2012): 205

Number of reported Healthcare-Associated Infections:

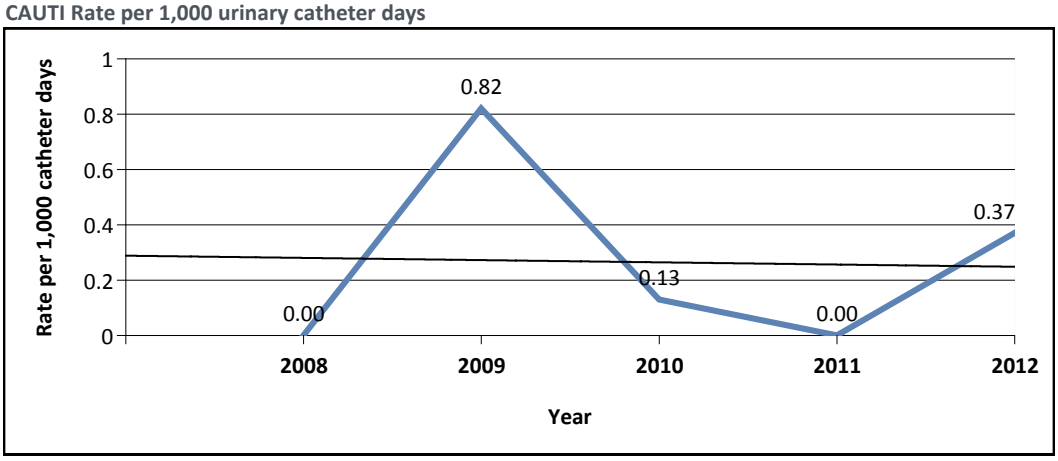
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	22,450	22	0	12	0	4	0	4	0	0	0	1.87
2009	57,803	14	0	25	2	3	0	13	1	7	0	1.12
2010	47,304	3	0	19	3	0	0	5	0	1	1	0.68
2011	43,434	1	0	5	1	0	0	9	1	0	0	0.39
2012	40,012	4	0	8	0	1	0	11	0	2	1	0.67

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	8.89	0.00	0 - 0.41	Better
2009	7	18.90	0.37	0.15 - 0.76	Better
2010	1	13.58	0.07	0 - 0.41	Better
2011	0	11.54	0.00	0 - 0.32	Better
2012	2	9.90	0.20	0.02 - 0.73	Better

CAUTI Rate per 1,000 urinary catheter days



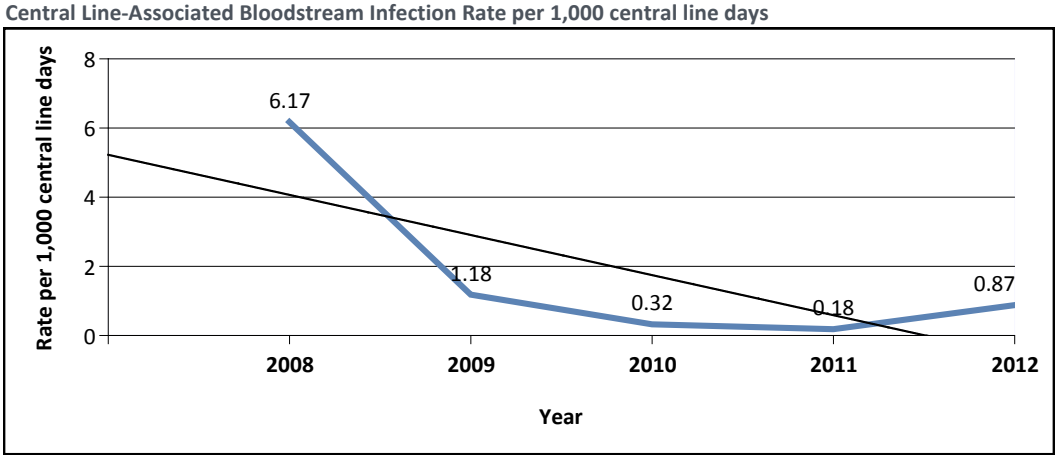
MERCY PHILADELPHIA HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	22	5.20	4.23	2.65 - 6.4	Worse
2009	9	9.69	0.93	0.42 - 1.76	Same as
2010	2	5.49	0.36	0.04 - 1.31	Same as
2011	1	5.15	0.19	0 - 1.08	Same as
2012	4	3.43	1.17	0.31 - 2.98	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



MERCY SUBURBAN HOSPITAL NORRISTOWN

NHSN ID: 11952

Hospital type: Acute care general hospital

Number of licensed beds (2012): 126

Number of reported Healthcare-Associated Infections:

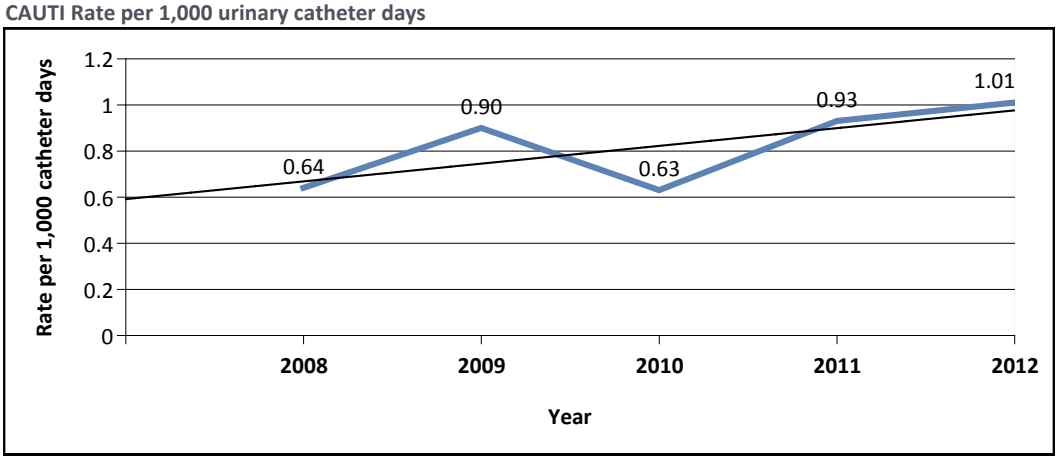
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	17,128	6	0	3	0	10	1	17	3	3	0	2.51
2009	33,366	15	0	2	1	19	3	21	9	9	0	2.37
2010	30,578	6	2	5	1	13	0	27	3	10	0	2.19
2011	28,748	6	0	7	0	4	0	21	4	9	3	1.88
2012	26,003	4	0	7	1	7	0	9	3	9	3	1.65

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	10.46	0.29	0.06 - 0.84	Better
2009	7	17.13	0.41	0.16 - 0.84	Better
2010	5	13.85	0.36	0.12 - 0.84	Better
2011	7	13.10	0.53	0.21 - 1.1	Same as
2012	6	11.12	0.54	0.2 - 1.17	Same as

CAUTI Rate per 1,000 urinary catheter days



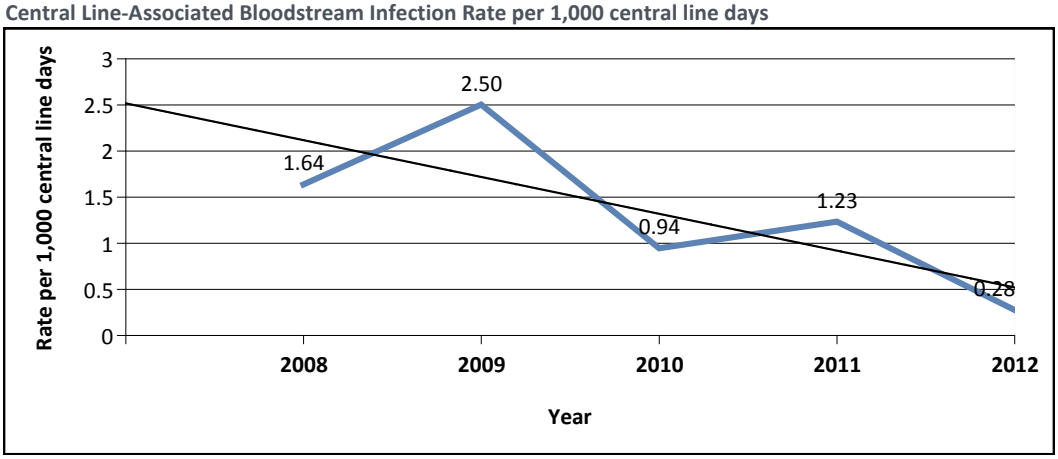
MERCY SUBURBAN HOSPITAL NORRISTOWN

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	5	4.49	1.11	0.36 - 2.6	Same as
2009	15	7.29	2.06	1.15 - 3.39	Worse
2010	5	4.44	1.13	0.36 - 2.63	Same as
2011	6	4.24	1.42	0.52 - 3.08	Same as
2012	1	2.81	0.36	0 - 1.98	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



MEYERSDALE COMMUNITY HOSPITAL

NHSN ID: 11968

Hospital type: Critical access hospital

Number of licensed beds (2012): 20

Number of reported Healthcare-Associated Infections:

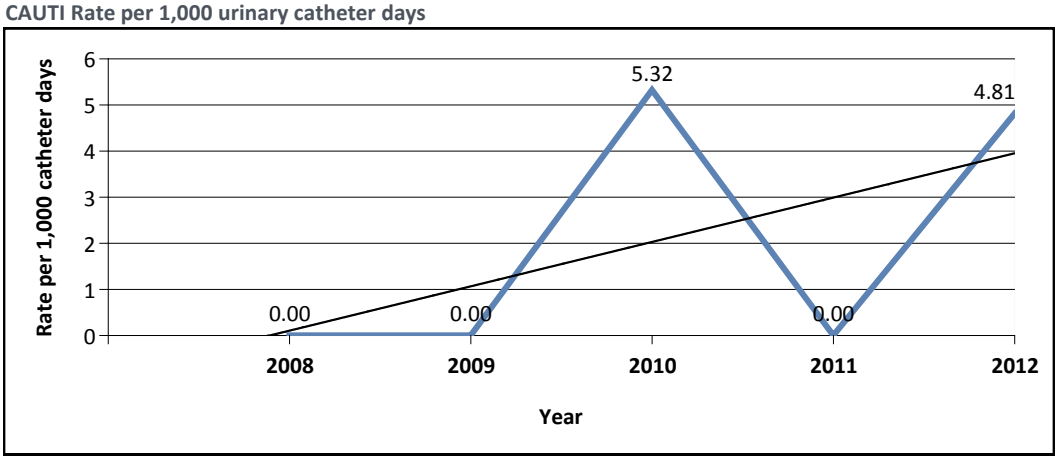
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	900	0	0	0	0	0	0	0	0	0	0	0.00
2009	2,679	0	0	0	0	0	0	0	0	1	0	0.37
2010	1,735	0	0	0	0	1	0	0	0	1	0	1.15
2011	1,727	0	0	0	0	0	0	0	0	1	0	0.58
2012	1,877	0	0	0	0	0	0	0	0	2	0	1.07

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.35	0.00	0 - 10.59	Same as
2009	0	0.39	0.00	0 - 9.49	Same as
2010	1	0.31	3.18	0.04 - 17.69	Same as
2011	0	0.14	0.00	0 - 26.76	Same as
2012	1	0.28	3.56	0.05 - 19.81	Same as

CAUTI Rate per 1,000 urinary catheter days



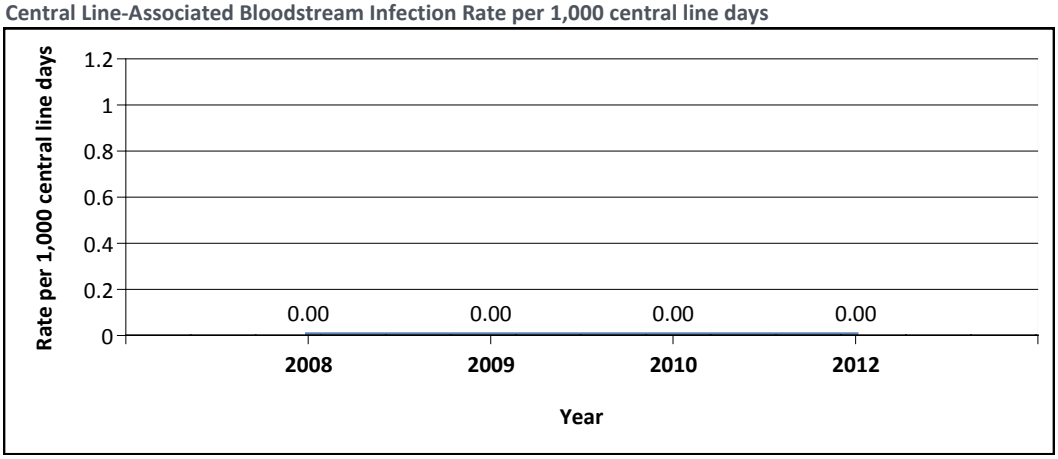
MEYERSDALE COMMUNITY HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.02	0.00	0 - 148.28	Same as
2009	0	0.07	0.00	0 - 54.8	Same as
2010	0	0.02	0.00	0 - 157.64	Same as
2011				-	
2012	0	0.01	0.00	0 - 635.01	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



MID-VALLEY HOSPITAL

NHSN ID: 11557

Hospital type: Critical access hospital

Number of licensed beds (2012): 25

Number of reported Healthcare-Associated Infections:

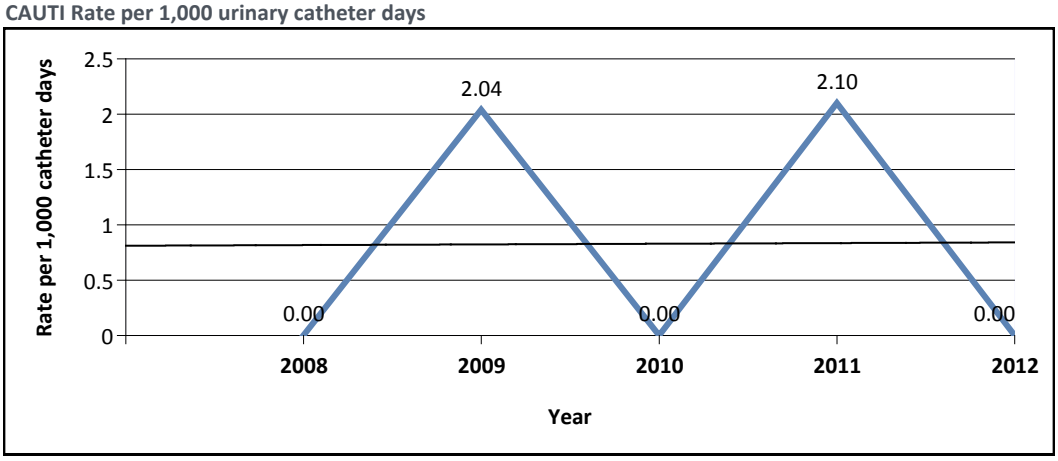
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	2,570	2	0	0	0	0	0	0	1	0	0	1.17
2009	4,401	0	0	0	0	0	0	0	1	2	0	0.68
2010	4,584	0	0	0	0	0	0	1	0	1	0	0.44
2011	4,247	0	0	0	0	0	0	0	0	2	0	0.47
2012	4,018	0	0	0	0	0	0	0	0	0	0	0.00

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	1.21	0.00	0 - 3.02	Same as
2009	2	1.57	1.27	0.14 - 4.6	Same as
2010	0	1.58	0.00	0 - 2.32	Same as
2011	2	1.22	1.64	0.18 - 5.93	Same as
2012	0	1.18	0.00	0 - 3.11	Same as

CAUTI Rate per 1,000 urinary catheter days



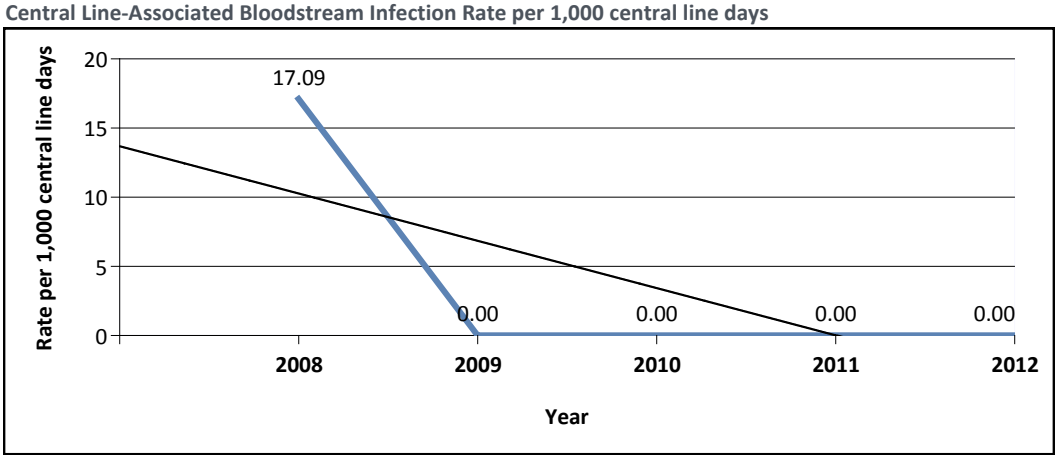
MID-VALLEY HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	0.16	12.57	1.41 - 45.38	Worse
2009	0	0.24	0.00	0 - 15.06	Same as
2010	0	0.14	0.00	0 - 26.13	Same as
2011	0	0.26	0.00	0 - 14.02	Same as
2012	0	0.09	0.00	0 - 41.05	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



MILLCREEK COMMUNITY HOSPITAL

NHSN ID: 12253

Hospital type: Acute care general hospital

Number of licensed beds (2012): 144

Number of reported Healthcare-Associated Infections:

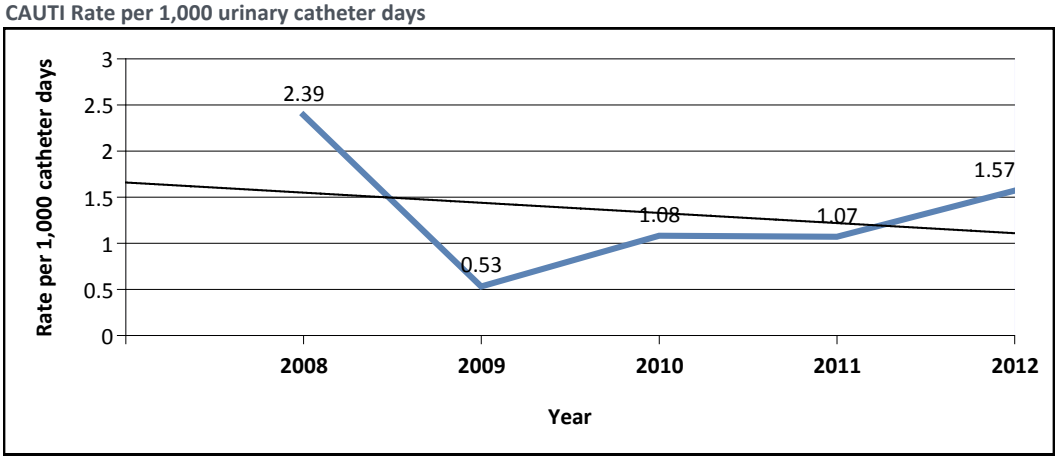
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	9,656	1	0	2	1	1	0	3	1	8	0	1.76
2009	21,516	0	0	0	0	0	0	4	0	7	0	0.51
2010	21,824	0	0	1	1	0	0	1	0	16	0	0.87
2011	20,062	2	0	0	6	0	0	2	2	14	1	1.35
2012	22,098	2	0	0	1	0	0	2	1	14	0	0.91

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	2.22	0.90	0.1 - 3.26	Same as
2009	1	4.26	0.23	0 - 1.31	Same as
2010	2	3.35	0.60	0.07 - 2.15	Same as
2011	2	2.78	0.72	0.08 - 2.6	Same as
2012	3	3.42	0.88	0.18 - 2.56	Same as

CAUTI Rate per 1,000 urinary catheter days



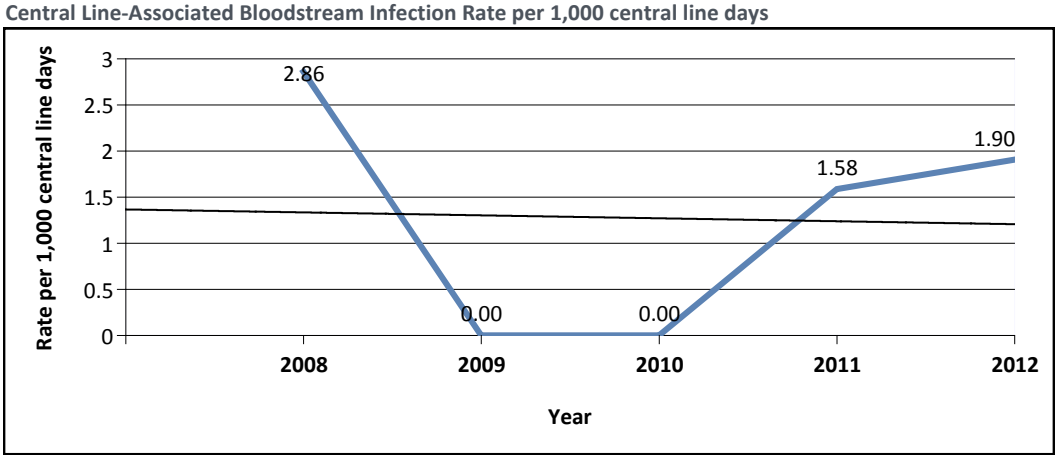
MILLCREEK COMMUNITY HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	0.47	2.13	0.03 - 11.84	Same as
2009	0	1.39	0.00	0 - 2.63	Same as
2010	0	0.71	0.00	0 - 5.19	Same as
2011	1	0.73	1.38	0.02 - 7.66	Same as
2012	1	0.31	3.25	0.04 - 18.06	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



MILTON S HERSHEY MEDICAL CENTER

NHSN ID: 11747

Hospital type: Acute care general hospital

Number of licensed beds (2012): 563

Number of reported Healthcare-Associated Infections:

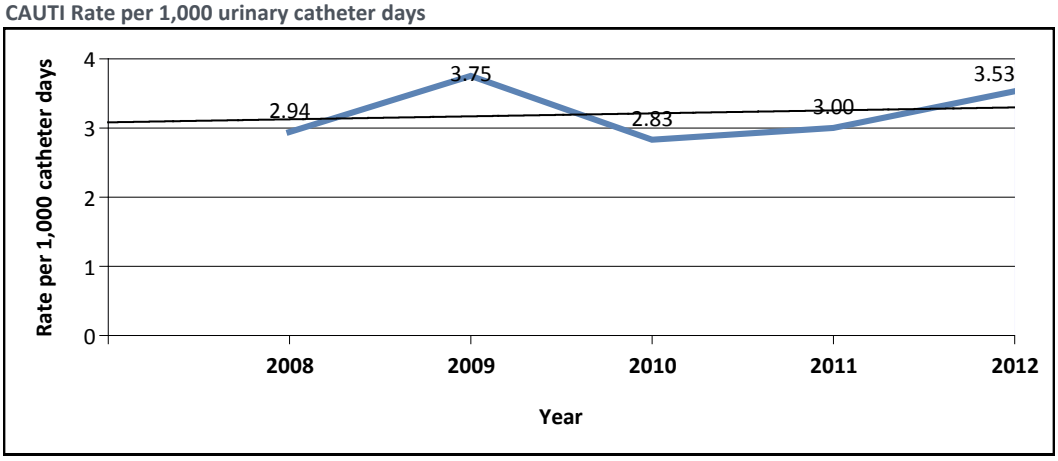
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	68,769	81	0	24	2	14	0	71	1	59	3	3.71
2009	141,376	126	5	71	6	88	0	137	15	186	9	4.55
2010	144,877	77	22	80	17	92	2	143	19	132	15	4.13
2011	144,466	76	22	88	44	31	0	146	11	119	15	3.82
2012	143,148	96	12	114	34	27	0	150	17	156	28	4.43

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	55	41.86	1.31	0.99 - 1.71	Same as
2009	132	77.63	1.70	1.42 - 2.02	Worse
2010	93	57.43	1.62	1.31 - 1.98	Worse
2011	96	54.28	1.77	1.43 - 2.16	Worse
2012	104	55.14	1.89	1.54 - 2.29	Worse

CAUTI Rate per 1,000 urinary catheter days



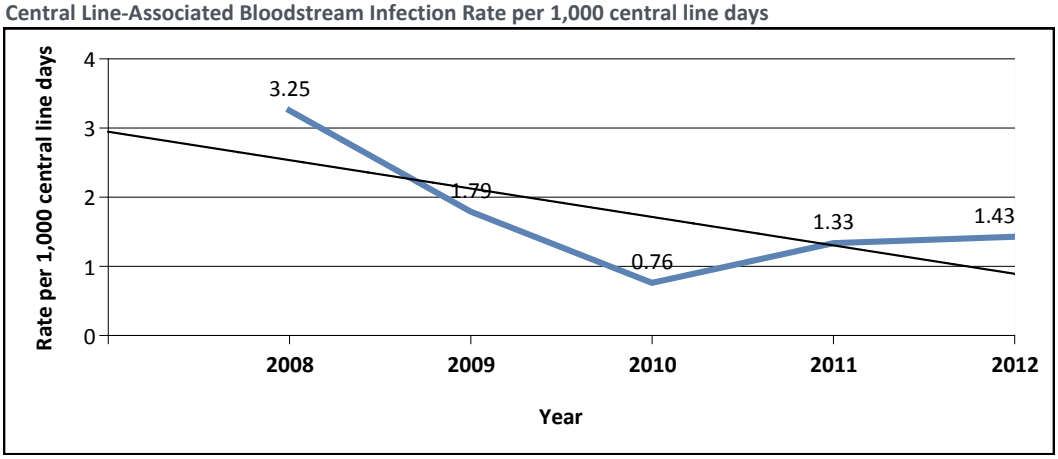
MILTON S HERSHEY MEDICAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	59	27.58	2.14	1.63 - 2.76	Worse
2009	64	38.48	1.66	1.28 - 2.12	Worse
2010	26	26.58	0.98	0.64 - 1.43	Same as
2011	47	27.89	1.69	1.24 - 2.24	Worse
2012	53	32.73	1.62	1.21 - 2.12	Worse

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	4.29	0.47	0.12 - 1.68	Same as
2009	3	7.82	0.38	0.08 - 1.12	Same as
2010	8	6.78	1.18	0.51 - 2.32	Same as
2011	5	5.72	0.87	0.28 - 2.04	Same as
2012	6	4.32	1.39	0.51 - 3.02	Same as

Standardized Infection Ratio - Specialty Care Area

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	14	12.16	1.15	0.63 - 1.93	Same as
2009	50	28.93	1.73	1.28 - 2.28	Worse
2010	31	18.94	1.64	1.11 - 2.32	Worse
2011	18	13.94	1.29	0.76 - 2.04	Same as
2012	25	18.54	1.35	0.87 - 1.99	Same as

MINERS MEDICAL CENTER

NHSN ID: 12295

Hospital type: Acute care general hospital

Number of licensed beds (2012): 30

Number of reported Healthcare-Associated Infections:

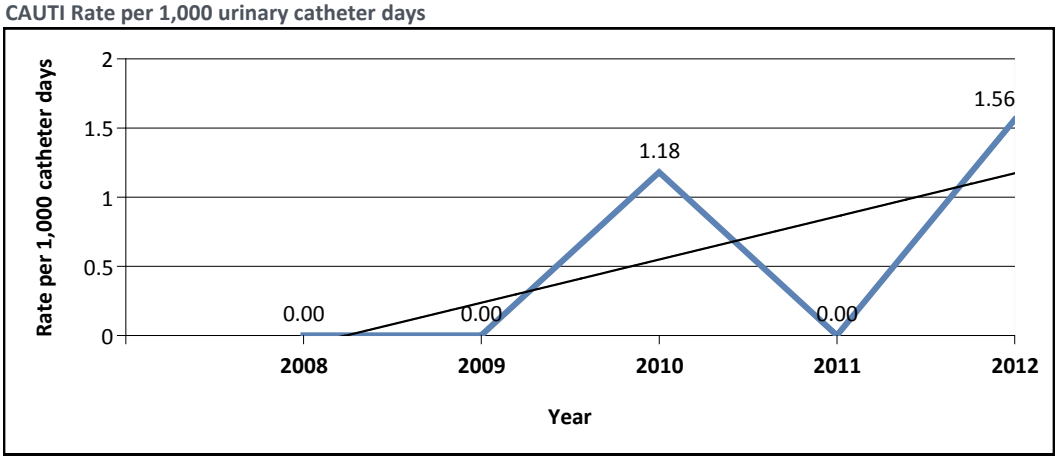
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	2,313	0	0	0	0	2	0	2	0	0	0	1.73
2009	4,660	0	0	0	0	1	0	1	1	2	0	1.07
2010	4,521	0	0	0	1	2	0	1	0	3	0	1.55
2011	4,420	0	0	1	0	1	0	1	0	0	1	0.90
2012	3,839	1	0	0	0	0	0	1	0	3	0	1.30

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	1.09	0.00	0 - 3.35	Same as
2009	0	1.39	0.00	0 - 2.64	Same as
2010	1	1.39	0.72	0.01 - 3.99	Same as
2011	0	1.07	0.00	0 - 3.43	Same as
2012	1	0.88	1.13	0.01 - 6.29	Same as

CAUTI Rate per 1,000 urinary catheter days



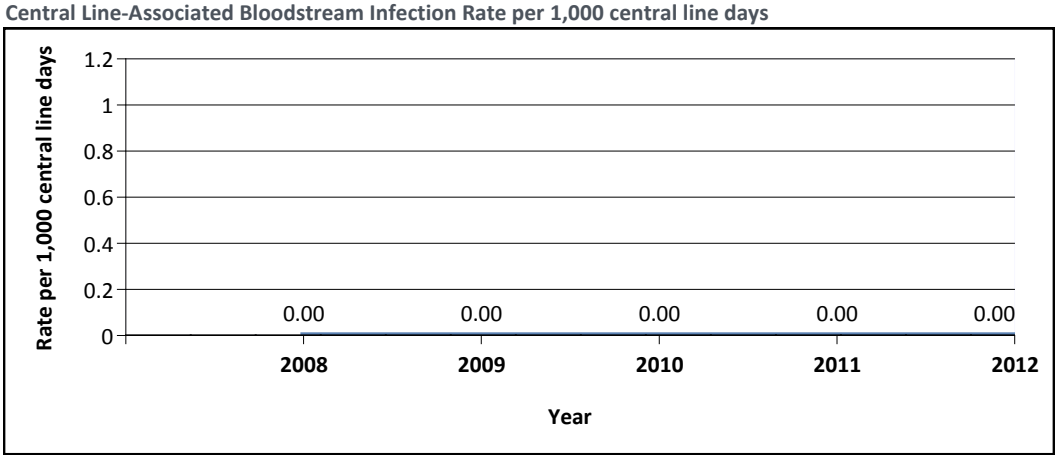
MINERS MEDICAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.07	0.00	0 - 50.88	Same as
2009	0	0.13	0.00	0 - 29.12	Same as
2010	0	0.14	0.00	0 - 25.53	Same as
2011	0	0.07	0.00	0 - 55.6	Same as
2012	0	0.06	0.00	0 - 65.62	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



MONONGAHELA VALLEY HOSPITAL

NHSN ID: 11069

Hospital type: Acute care general hospital

Number of licensed beds (2012): 210

Number of reported Healthcare-Associated Infections:

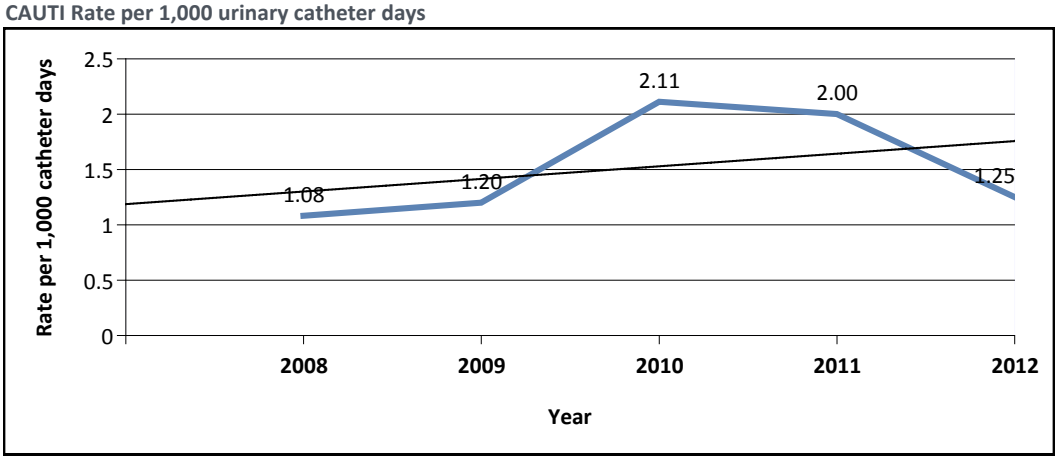
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	26,302	4	0	2	0	11	0	6	0	6	0	1.10
2009	54,262	5	0	11	0	37	0	19	0	10	0	1.51
2010	53,137	7	1	6	0	29	0	24	0	14	0	1.52
2011	51,094	7	2	14	0	26	0	21	2	18	0	1.76
2012	48,871	10	0	19	0	34	0	34	0	8	0	2.15

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	5	11.03	0.45	0.15 - 1.06	Same as
2009	9	12.13	0.74	0.34 - 1.41	Same as
2010	13	10.29	1.26	0.67 - 2.16	Same as
2011	11	6.33	1.74	0.87 - 3.11	Same as
2012	6	6.46	0.93	0.34 - 2.02	Same as

CAUTI Rate per 1,000 urinary catheter days



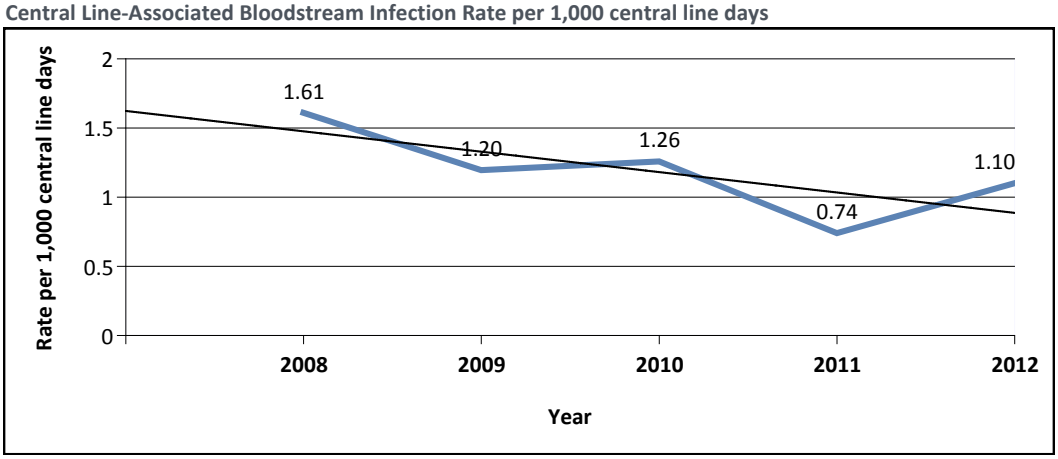
MONONGAHELA VALLEY HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	4	3.52	1.14	0.31 - 2.91	Same as
2009	5	4.24	1.18	0.38 - 2.75	Same as
2010	7	4.01	1.75	0.7 - 3.6	Same as
2011	4	3.29	1.21	0.33 - 3.11	Same as
2012	5	3.03	1.65	0.53 - 3.85	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



MONTGOMERY COUNTY MH/MR EMERGENCY SERVICES, INC.

NHSN ID: 12287

Hospital type: Psychiatric hospital

Number of licensed beds (2012): 73

Number of reported Healthcare-Associated Infections:

Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,080	0	2	0	0	0	0	0	0	0	0	0.65
2009	21,476	0	1	0	0	0	0	0	0	0	0	0.05
2010	21,472	0	0	0	0	0	0	0	0	0	0	0.00
2011	21,680	0	0	0	0	0	0	0	0	0	0	0.00
2012	21,121	0	0	0	0	0	0	0	0	0	0	0.00

MOSES TAYLOR HOSPITAL

NHSN ID: 11528

Hospital type: Acute care general hospital

Number of licensed beds (2012): 217

Number of reported Healthcare-Associated Infections:

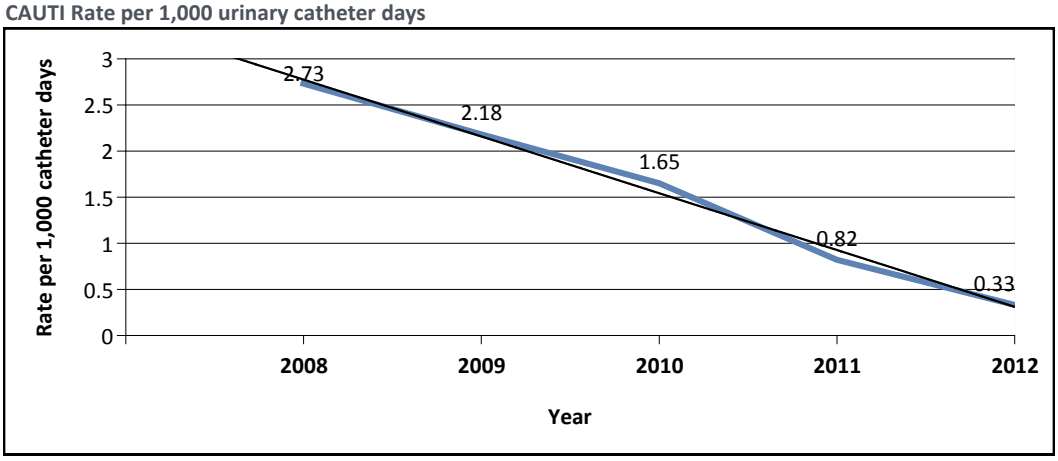
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	20,788	15	0	11	0	27	0	19	7	16	0	4.57
2009	60,499	23	3	12	0	18	2	37	2	25	0	2.02
2010	56,820	11	11	13	1	24	1	25	3	14	0	1.81
2011	57,390	8	4	5	0	10	2	30	4	11	0	1.29
2012	54,019	6	4	6	1	15	0	22	1	8	0	1.17

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	14	11.64	1.20	0.66 - 2.02	Same as
2009	22	22.35	0.98	0.62 - 1.49	Same as
2010	13	14.02	0.93	0.49 - 1.59	Same as
2011	6	11.41	0.53	0.19 - 1.14	Same as
2012	2	11.09	0.18	0.02 - 0.65	Better

CAUTI Rate per 1,000 urinary catheter days



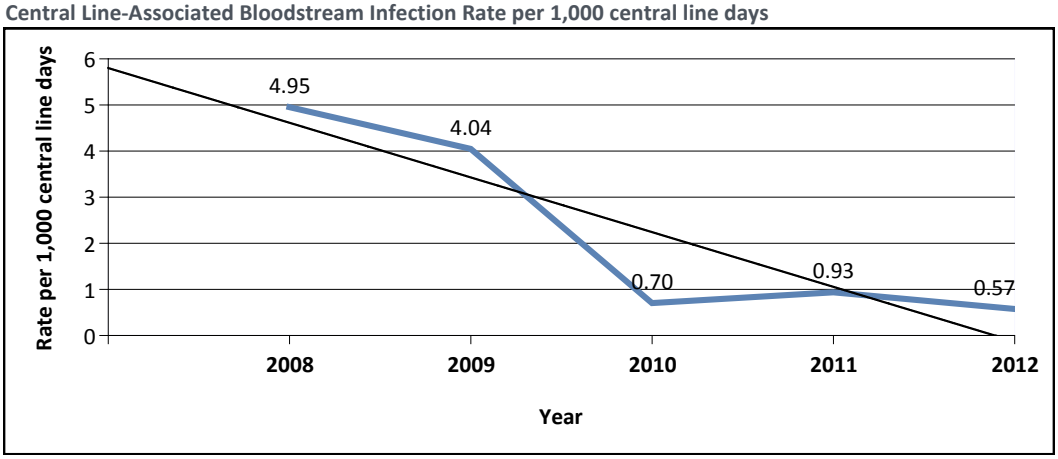
MOSES TAYLOR HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	11	3.19	3.45	1.72 - 6.17	Worse
2009	18	6.48	2.78	1.65 - 4.39	Worse
2010	3	4.00	0.75	0.15 - 2.19	Same as
2011	4	4.23	0.95	0.25 - 2.42	Same as
2012	2	2.43	0.82	0.09 - 2.97	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.55	0.00	0 - 6.63	Same as
2009	0	0.83	0.00	0 - 4.39	Same as
2010	0	1.37	0.00	0 - 2.68	Same as
2011	0	0.40	0.00	0 - 9.28	Same as
2012	0	0.63	0.00	0 - 5.85	Same as

MOUNT NITTANY MEDICAL CENTER

NHSN ID: 11797

Hospital type: Acute care general hospital

Number of licensed beds (2012): 260

Number of reported Healthcare-Associated Infections:

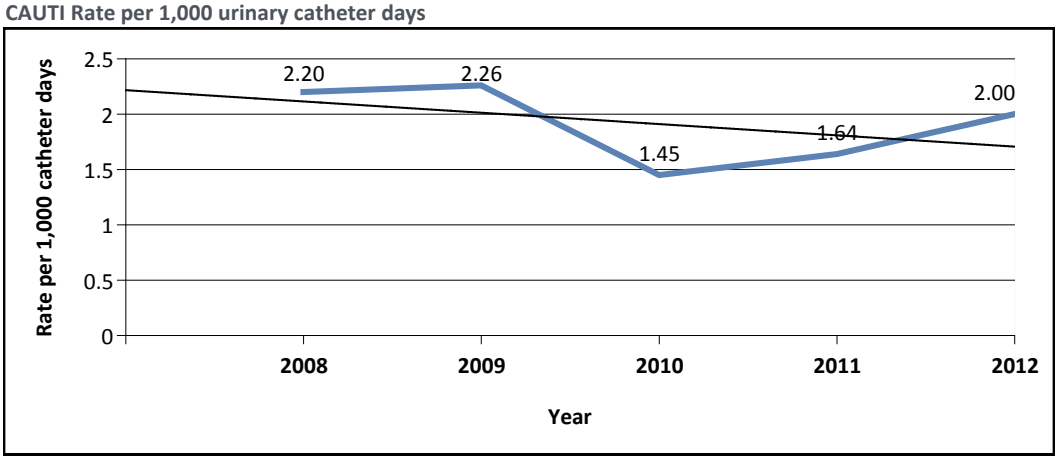
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	25,538	9	0	9	0	8	1	29	4	28	0	3.45
2009	52,307	11	1	24	0	13	1	56	2	49	0	3.00
2010	51,043	6	1	29	0	13	2	53	0	38	0	2.78
2011	51,928	5	1	18	0	9	1	58	0	31	1	2.39
2012	50,164	3	1	22	0	9	0	62	1	38	0	2.71

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	16	16.19	0.99	0.56 - 1.61	Same as
2009	30	29.22	1.03	0.69 - 1.47	Same as
2010	19	22.87	0.83	0.5 - 1.3	Same as
2011	21	21.95	0.96	0.59 - 1.46	Same as
2012	26	24.53	1.06	0.69 - 1.55	Same as

CAUTI Rate per 1,000 urinary catheter days



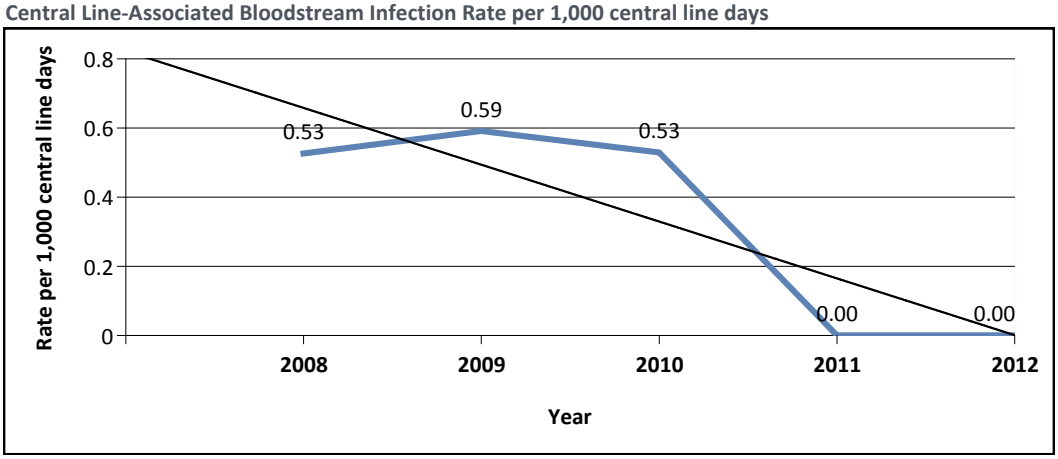
MOUNT NITTANY MEDICAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	5.53	0.36	0.04 - 1.31	Same as
2009	5	10.48	0.48	0.15 - 1.11	Same as
2010	4	6.48	0.62	0.17 - 1.58	Same as
2011	0	6.28	0.00	0 - 0.58	Better
2012	0	4.93	0.00	0 - 0.74	Better

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



MUNCY VALLEY HOSPITAL

NHSN ID: 11748

Hospital type: Critical access hospital

Number of licensed beds (2012): 20

Number of reported Healthcare-Associated Infections:

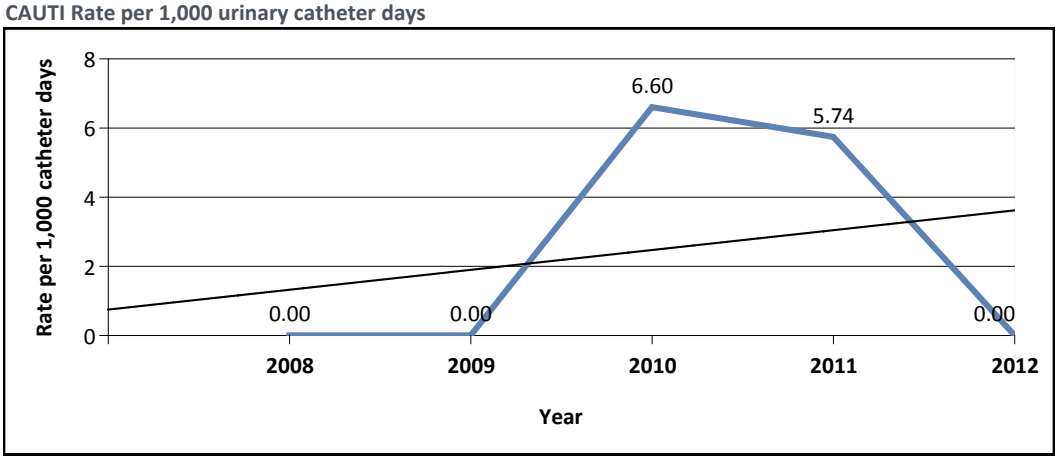
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	2,557	1	0	2	0	0	0	1	0	0	0	1.56
2009	5,236	2	0	3	0	0	0	0	0	0	0	0.95
2010	4,632	0	0	2	0	1	0	2	3	5	0	2.81
2011	4,785	1	0	2	0	2	0	2	1	7	0	3.13
2012	4,703	2	0	0	0	0	0	0	0	3	0	1.06

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.52	0.00	0 - 7.04	Same as
2009	0	0.77	0.00	0 - 4.77	Same as
2010	2	0.51	3.89	0.44 - 14.05	Same as
2011	3	0.60	4.98	1 - 14.54	Same as
2012	0	0.52	0.00	0 - 7.08	Same as

CAUTI Rate per 1,000 urinary catheter days



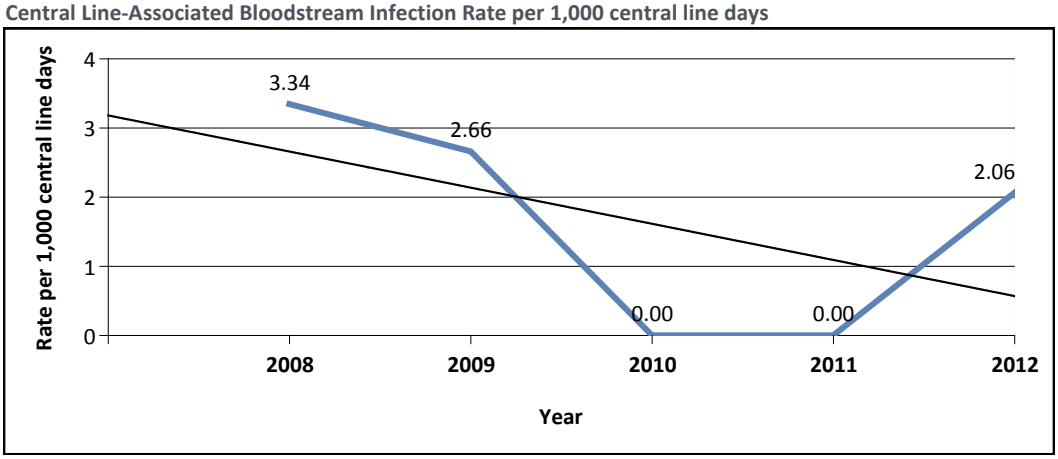
MUNCY VALLEY HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	0.43	2.33	0.03 - 12.97	Same as
2009	2	0.64	3.12	0.35 - 11.26	Same as
2010	0	0.31	0.00	0 - 11.74	Same as
2011	0	0.39	0.00	0 - 9.43	Same as
2012	1	0.33	3.04	0.04 - 16.94	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



NASON HOSPITAL

NHSN ID: 11907

Hospital type: Acute care general hospital

Number of licensed beds (2012): 45

Number of reported Healthcare-Associated Infections:

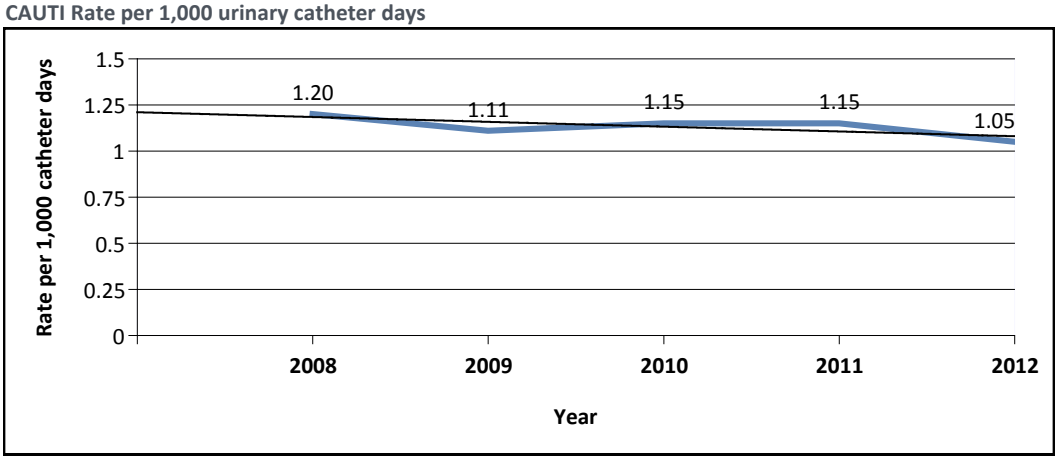
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,028	0	0	0	0	0	0	1	0	1	0	0.50
2009	8,775	0	0	0	0	1	0	4	0	2	0	0.80
2010	8,793	0	0	1	0	0	0	5	0	2	0	0.91
2011	8,468	0	0	1	0	1	0	9	0	2	0	1.54
2012	8,346	0	0	0	0	0	0	1	0	3	0	0.48

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	1.94	0.52	0.01 - 2.87	Same as
2009	2	2.91	0.69	0.08 - 2.48	Same as
2010	2	2.86	0.70	0.08 - 2.52	Same as
2011	2	2.20	0.91	0.1 - 3.28	Same as
2012	2	2.67	0.75	0.08 - 2.7	Same as

CAUTI Rate per 1,000 urinary catheter days



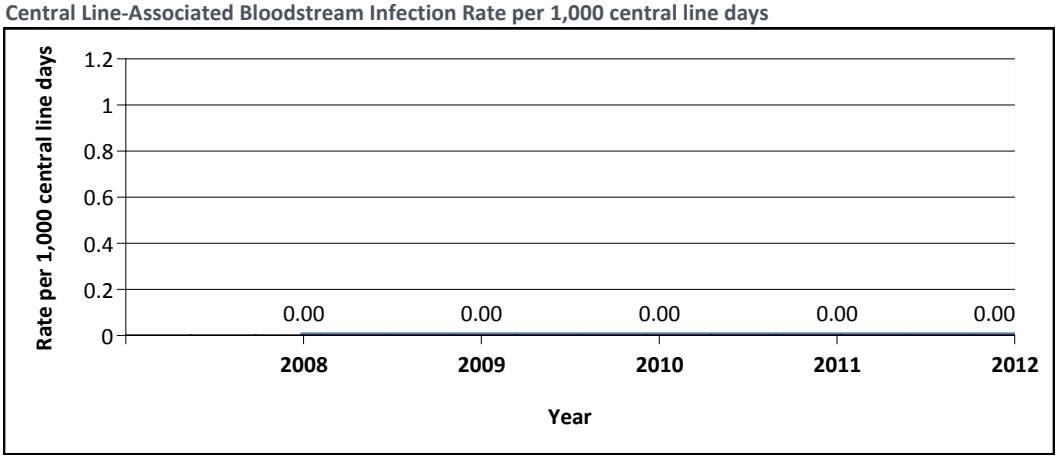
NASON HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.08	0.00	0 - 47.06	Same as
2009	0	0.23	0.00	0 - 16.18	Same as
2010	0	0.20	0.00	0 - 18.27	Same as
2011	0	0.15	0.00	0 - 23.68	Same as
2012	0	0.10	0.00	0 - 36.31	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



NAZARETH HOSPITAL

NHSN ID: 11919

Hospital type: Acute care general hospital

Number of licensed beds (2012): 203

Number of reported Healthcare-Associated Infections:

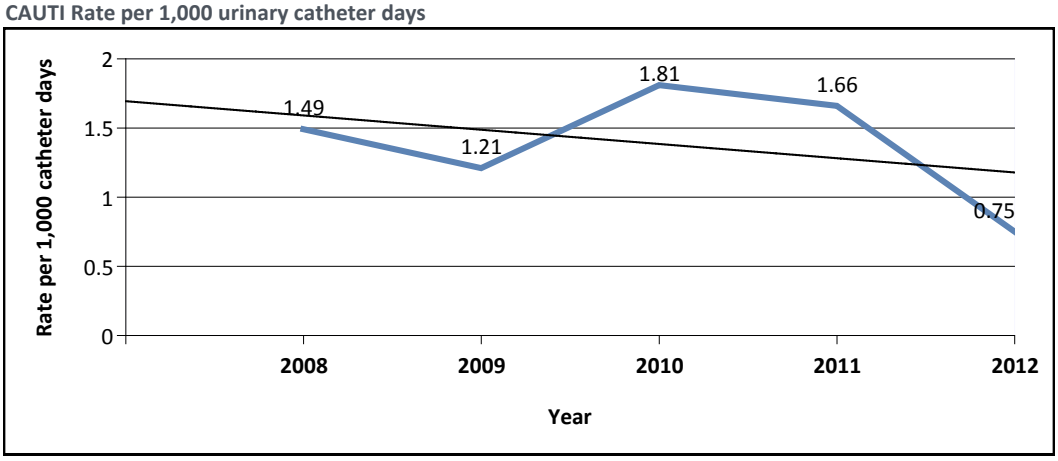
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	24,093	9	0	14	0	0	0	7	0	16	1	1.95
2009	60,481	29	0	23	0	8	0	16	3	20	2	1.67
2010	48,223	20	2	35	1	11	0	27	6	36	1	2.88
2011	46,634	22	4	20	0	8	0	12	2	28	0	2.06
2012	45,817	16	0	17	2	7	0	21	3	28	2	2.10

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	10	14.95	0.67	0.32 - 1.23	Same as
2009	15	19.88	0.75	0.42 - 1.24	Same as
2010	22	19.88	1.11	0.69 - 1.68	Same as
2011	18	13.90	1.29	0.77 - 2.05	Same as
2012	7	12.89	0.54	0.22 - 1.12	Same as

CAUTI Rate per 1,000 urinary catheter days



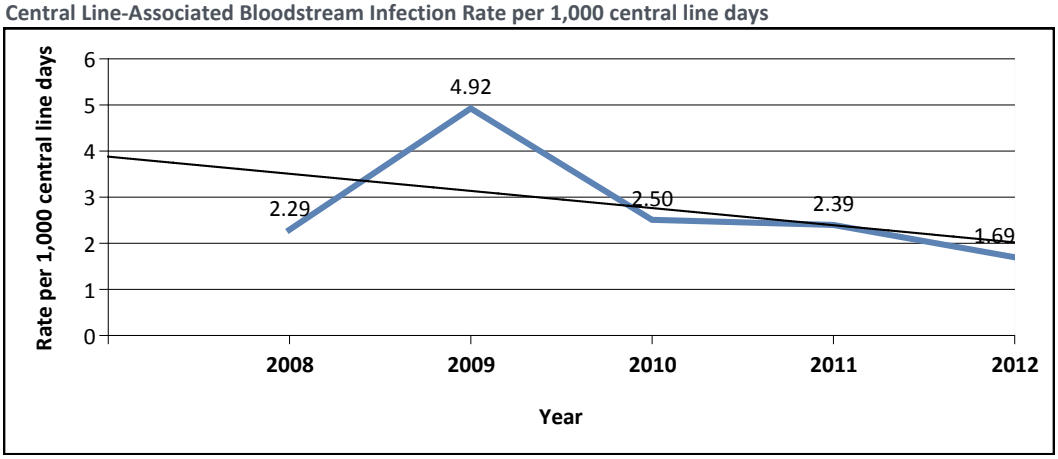
NAZARETH HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	6	3.75	1.60	0.59 - 3.49	Same as
2009	26	4.92	5.28	3.45 - 7.74	Worse
2010	15	4.20	3.57	2 - 5.89	Worse
2011	16	3.87	4.14	2.36 - 6.72	Worse
2012	11	4.62	2.38	1.19 - 4.26	Worse

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



NORRISTOWN STATE HOSPITAL

NHSN ID: 12047

Hospital type: Psychiatric hospital

Number of licensed beds (2012): 455

Number of reported Healthcare-Associated Infections:

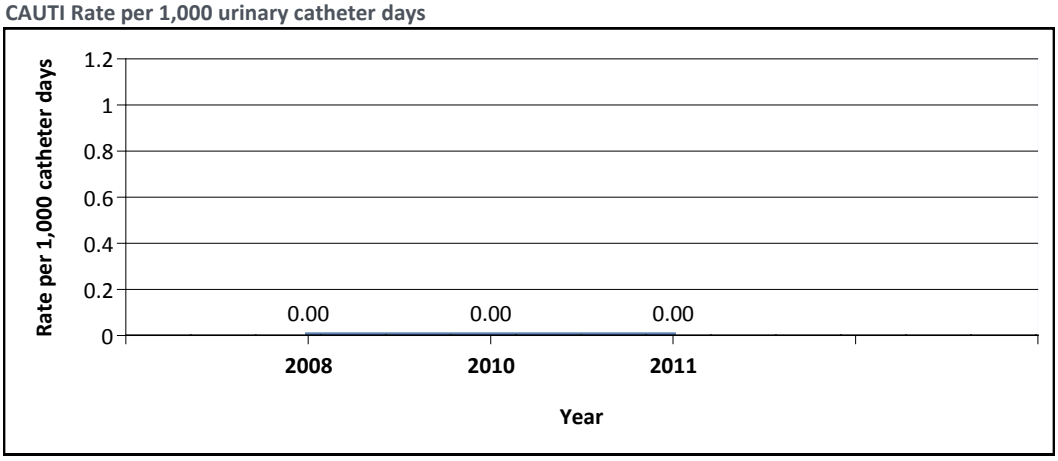
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	67,666	0	0	0	0	0	0	0	0	0	0	0.00
2009	135,928	0	0	0	0	0	0	0	1	5	0	0.04
2010	128,196	0	48	0	0	0	1	0	42	16	0	0.83
2011	125,390	0	66	1	1	1	6	0	49	5	0	1.03
2012	112,213	0	71	10	1	0	2	0	30	0	0	1.02

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.04	0.00	0 - 99.31	Same as
2009				-	
2010	0	0.01	0.00	0 - 583.29	Same as
2011	0	0.01	0.00	0 - 276.21	Same as
2012				-	

CAUTI Rate per 1,000 urinary catheter days



OHIO VALLEY GENERAL HOSPITAL

NHSN ID: 12298

Hospital type: Acute care general hospital

Number of licensed beds (2012): 138

Number of reported Healthcare-Associated Infections:

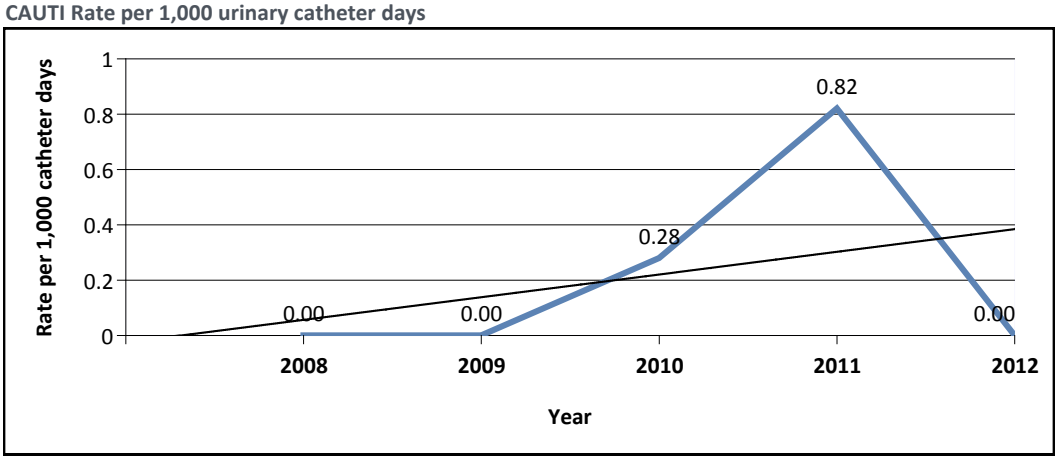
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	10,943	1	0	1	0	0	0	2	0	0	0	0.37
2009	20,017	0	0	1	0	3	0	7	2	0	0	0.65
2010	19,315	2	0	3	0	1	0	17	6	1	0	1.55
2011	21,440	6	0	9	0	0	0	1	0	5	0	0.98
2012	23,943	1	0	1	0	0	0	3	0	0	0	0.21

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	3.43	0.00	0 - 1.07	Same as
2009	0	9.40	0.00	0 - 0.39	Better
2010	1	5.91	0.17	0 - 0.94	Better
2011	3	4.48	0.67	0.13 - 1.96	Same as
2012	0	3.93	0.00	0 - 0.93	Better

CAUTI Rate per 1,000 urinary catheter days



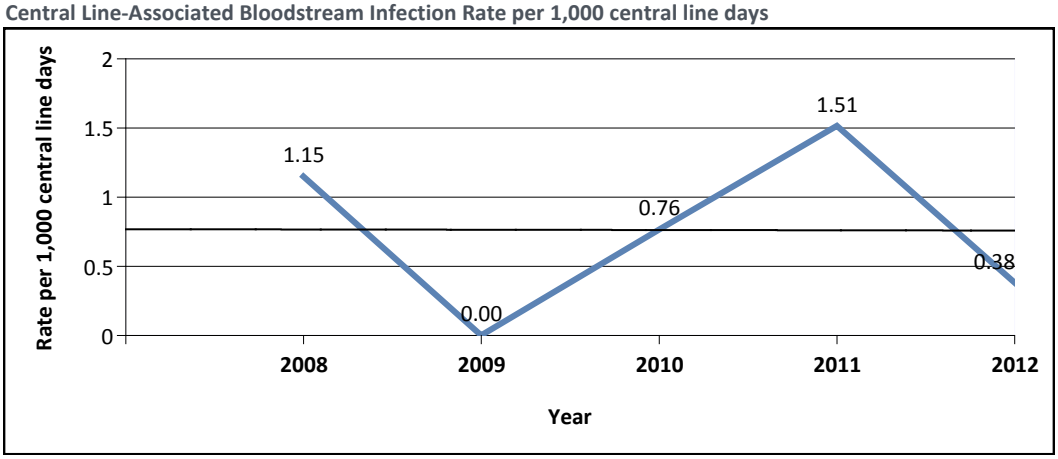
OHIO VALLEY GENERAL HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	1.22	0.82	0.01 - 4.55	Same as
2009	0	3.52	0.00	0 - 1.04	Same as
2010	2	1.81	1.10	0.12 - 3.98	Same as
2011	5	1.89	2.65	0.85 - 6.18	Same as
2012	1	1.80	0.56	0.01 - 3.1	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



OSS ORTHOPAEDIC HOSPITAL

NHSN ID: 18467

Hospital type: Acute care general hospital

Number of licensed beds (2012): 30

Number of reported Healthcare-Associated Infections:

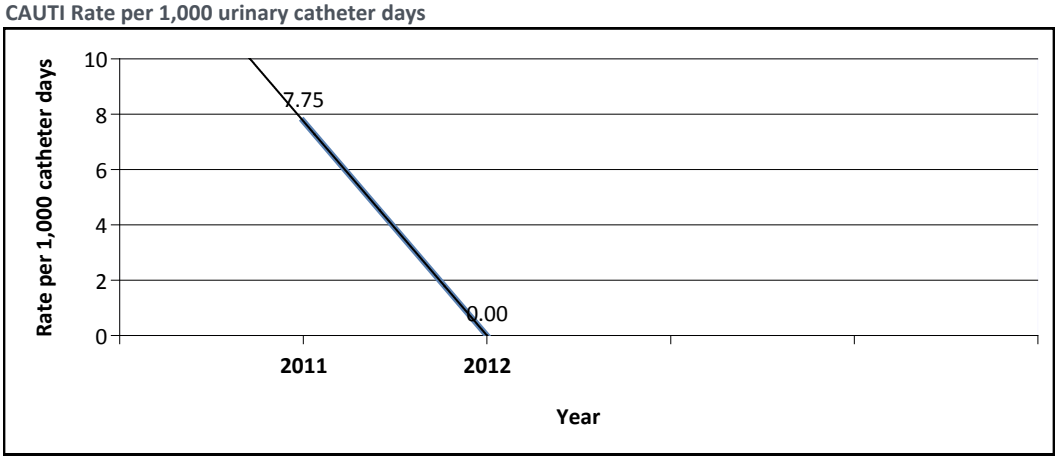
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008												
2009												
2010												
2011	3,302	0	0	0	0	0	0	17	0	3	0	6.06
2012	3,888	0	0	2	0	2	0	29	0	1	0	8.74

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008				-	
2009				-	
2010				-	
2011	3	0.45	6.66	1.34 - 19.45	Worse
2012	0	0.62	0.00	0 - 5.91	Same as

CAUTI Rate per 1,000 urinary catheter days



PALMERTON HOSPITAL

NHSN ID: 12396

Hospital type: Acute care general hospital

Number of licensed beds (2012): 60

Number of reported Healthcare-Associated Infections:

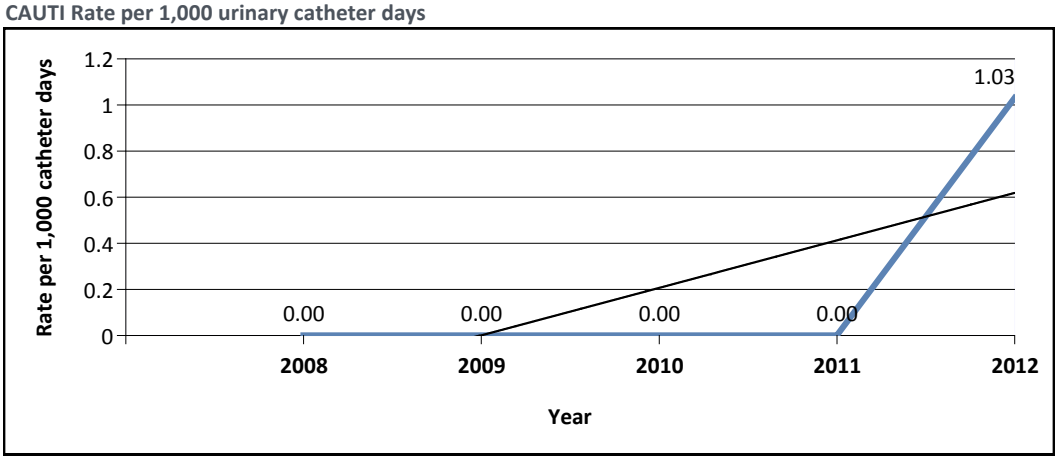
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	6,037	0	0	1	0	0	0	0	0	0	0	0.17
2009	10,700	0	0	0	0	0	0	4	0	0	0	0.37
2010	11,028	0	0	1	0	1	0	4	0	0	0	0.54
2011	11,229	0	0	1	0	5	0	0	1	0	0	0.62
2012	11,321	0	0	1	0	2	0	3	0	2	0	0.71

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	2.63	0.00	0 - 1.39	Same as
2009	0	2.32	0.00	0 - 1.58	Same as
2010	0	1.96	0.00	0 - 1.87	Same as
2011	0	1.35	0.00	0 - 2.72	Same as
2012	1	1.30	0.77	0.01 - 4.29	Same as

CAUTI Rate per 1,000 urinary catheter days



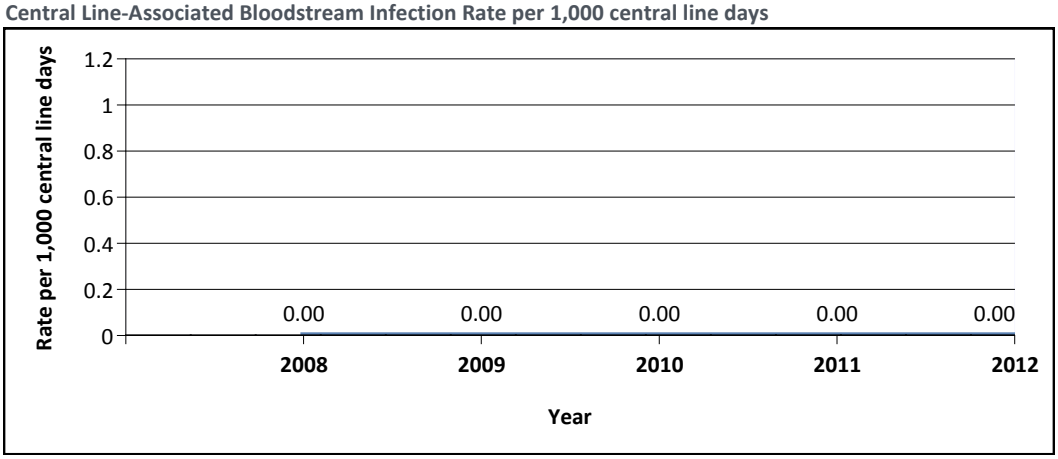
PALMERTON HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.54	0.00	0 - 6.78	Same as
2009	0	0.67	0.00	0 - 5.46	Same as
2010	0	0.58	0.00	0 - 6.37	Same as
2011	0	0.37	0.00	0 - 9.91	Same as
2012	0	0.18	0.00	0 - 20.06	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



PENN PRESBYTERIAN MEDICAL CENTER

NHSN ID: 11814

Hospital type: Acute care general hospital

Number of licensed beds (2012): 305

Number of reported Healthcare-Associated Infections:

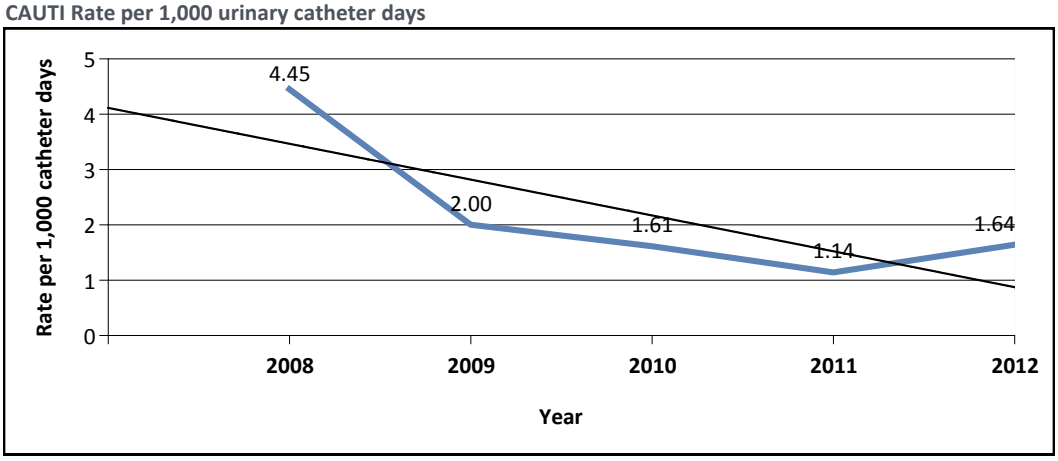
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	31,657	20	0	21	3	7	0	21	0	24	0	3.03
2009	84,751	26	0	29	12	14	0	44	3	43	0	2.02
2010	64,014	20	0	14	10	7	0	44	1	41	0	2.14
2011	65,272	33	1	20	20	10	0	59	4	33	0	2.76
2012	62,055	27	0	13	21	12	0	66	5	40	0	2.97

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	22	12.02	1.83	1.15 - 2.77	Worse
2009	22	24.38	0.90	0.57 - 1.37	Same as
2010	19	20.78	0.91	0.55 - 1.43	Same as
2011	13	18.71	0.69	0.37 - 1.19	Same as
2012	18	20.42	0.88	0.52 - 1.39	Same as

CAUTI Rate per 1,000 urinary catheter days



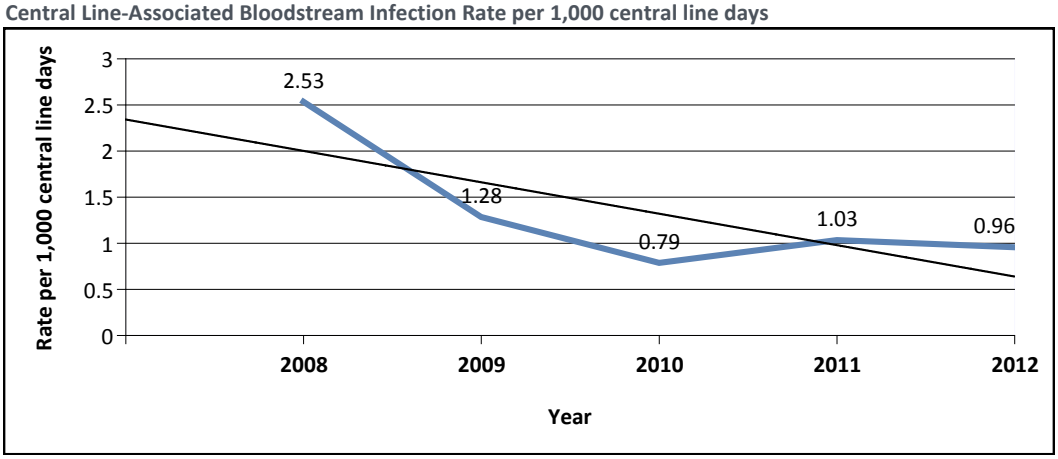
PENN PRESBYTERIAN MEDICAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	14	8.11	1.73	0.94 - 2.9	Same as
2009	16	14.93	1.07	0.61 - 1.74	Same as
2010	10	10.43	0.96	0.46 - 1.76	Same as
2011	12	10.02	1.20	0.62 - 2.09	Same as
2012	11	9.30	1.18	0.59 - 2.12	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



PENN STATE HERSHEY REHABILITATION LLC

NHSN ID: 11915

Hospital type: Rehabilitation hospital

Number of licensed beds (2012): 54

Number of reported Healthcare-Associated Infections:

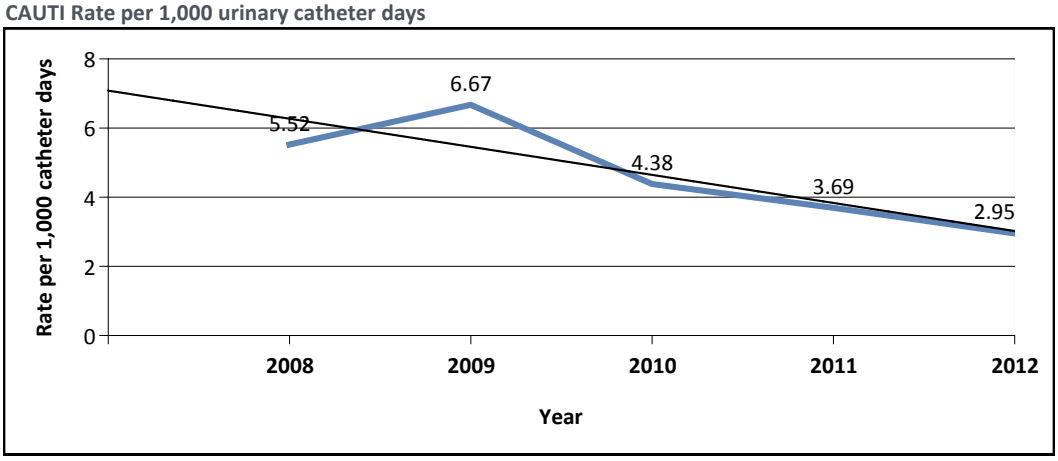
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,667	0	0	3	0	1	0	0	0	8	0	3.27
2009	7,479	0	0	6	0	0	1	0	0	8	0	2.01
2010	9,804	0	0	4	0	0	0	0	0	8	0	1.22
2011	14,130	2	0	5	0	0	0	0	1	26	0	2.41
2012	15,851	1	1	5	1	0	0	0	2	38	0	3.03

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	0.94	2.13	0.24 - 7.69	Same as
2009	4	1.34	2.97	0.8 - 7.62	Same as
2010	2	0.84	2.39	0.27 - 8.63	Same as
2011	3	1.13	2.64	0.53 - 7.73	Same as
2012	3	1.34	2.24	0.45 - 6.56	Same as

CAUTI Rate per 1,000 urinary catheter days



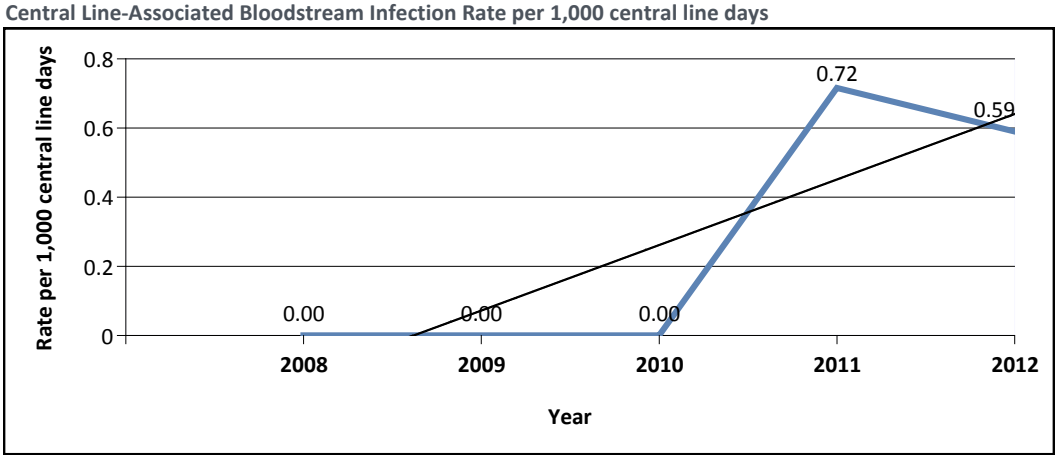
PENN STATE HERSHEY REHABILITATION LLC

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.65	0.00	0 - 5.63	Same as
2009	0	1.53	0.00	0 - 2.4	Same as
2010	0	0.75	0.00	0 - 4.9	Same as
2011	1	1.33	0.75	0.01 - 4.18	Same as
2012	1	1.16	0.87	0.01 - 4.82	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS

NHSN ID: 11448

Hospital type: Acute care general hospital

Number of licensed beds (2012): 500

Number of reported Healthcare-Associated Infections:

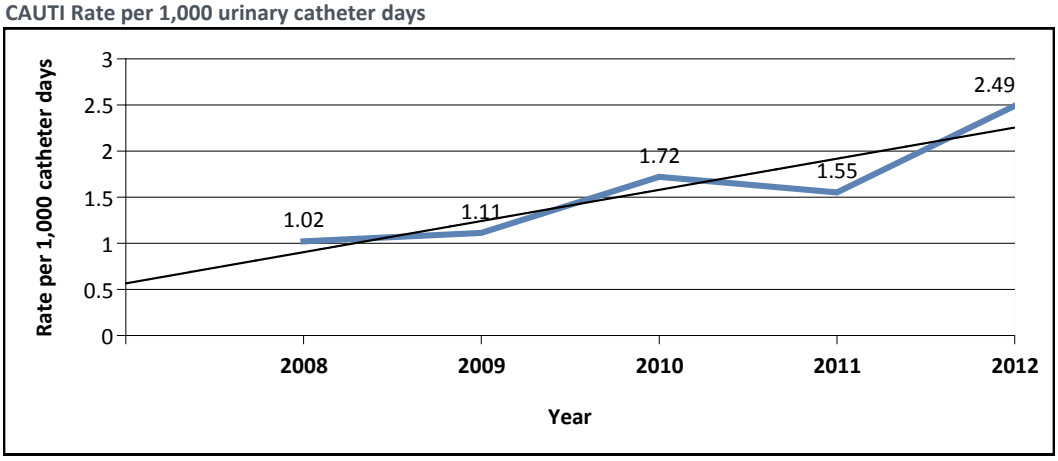
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	55,294	23	8	49	3	14	3	87	4	15	5	3.82
2009	136,501	44	16	77	11	17	11	177	5	49	1	2.99
2010	112,059	62	22	50	19	34	11	180	8	53	1	3.93
2011	129,191	42	12	73	14	20	9	161	21	59	2	3.20
2012	104,403	47	16	54	9	26	13	149	12	60	1	3.71

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	11	25.35	0.43	0.22 - 0.78	Better
2009	24	48.01	0.50	0.32 - 0.74	Better
2010	36	36.87	0.98	0.68 - 1.35	Same as
2011	30	30.89	0.97	0.66 - 1.39	Same as
2012	39	28.79	1.35	0.96 - 1.85	Same as

CAUTI Rate per 1,000 urinary catheter days



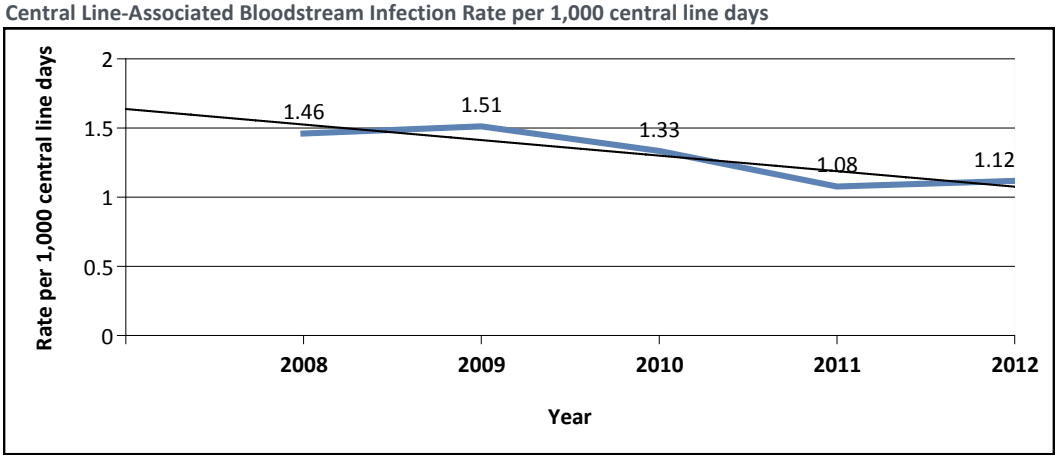
PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	10	9.92	1.01	0.48 - 1.85	Same as
2009	21	17.93	1.17	0.72 - 1.79	Same as
2010	19	12.28	1.55	0.93 - 2.42	Same as
2011	14	12.14	1.15	0.63 - 1.94	Same as
2012	15	10.47	1.43	0.8 - 2.36	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	2.77	1.08	0.2 - 3.16	Same as
2009	0	4.65	0.00	0 - 0.79	Better
2010	9	5.36	1.68	0.77 - 3.19	Same as
2011	6	2.99	2.01	0.73 - 4.37	Same as
2012	8	3.01	2.66	1.15 - 5.24	Worse

PENNSYLVANIA PSYCHIATRIC INSTITUTE

NHSN ID: 14190

Hospital type: Psychiatric hospital

Number of licensed beds (2012): 74

Number of reported Healthcare-Associated Infections:

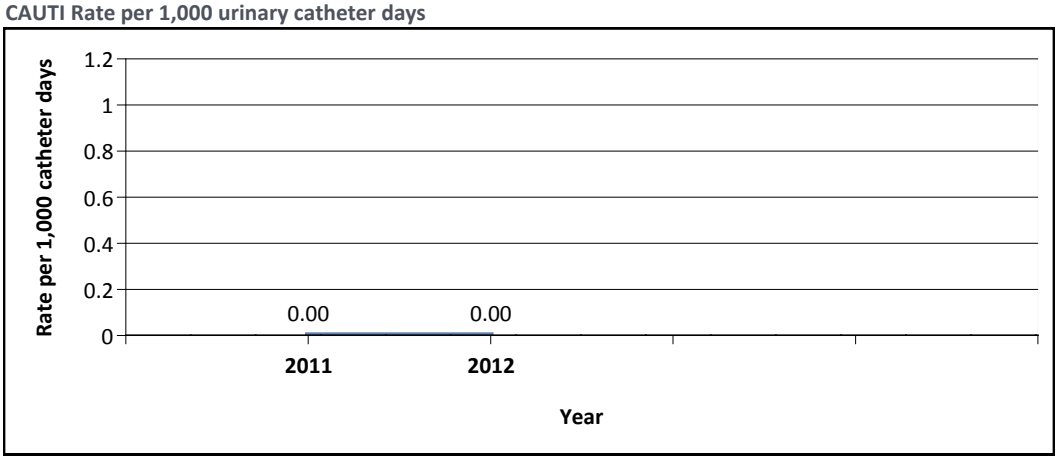
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008												
2009	19,602	0	4	0	0	0	0	0	0	2	0	0.31
2010	19,437	0	0	0	0	1	0	0	0	1	0	0.10
2011	20,269	0	1	0	0	1	0	0	0	1	0	0.15
2012	19,892	0	4	0	0	0	0	0	2	0	0	0.30

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008				-	
2009				-	
2010				-	
2011	0	0.01	0.00	0 - 352.49	Same as
2012	0	0.00	0.00	0 - 3915.5	Same as

CAUTI Rate per 1,000 urinary catheter days



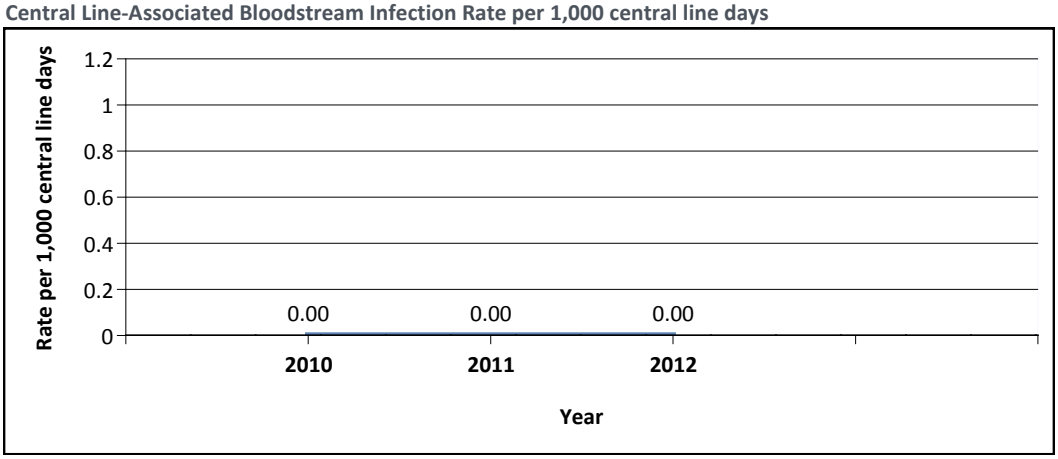
PENNSYLVANIA PSYCHIATRIC INSTITUTE

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008				-	
2009				-	
2010	0	0.05	0.00	0 - 76.36	Same as
2011	0	0.00	0.00	0 - 946.23	Same as
2012	0	0.00	0.00	0 - 1608.59	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



PHILHAVEN HOSPITAL

NHSN ID: 11740

Hospital type: Psychiatric hospital

Number of licensed beds (2012): 91

Number of reported Healthcare-Associated Infections:

Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	17,486	0	7	0	0	0	0	0	3	7	0	0.97
2009	48,070	0	3	0	0	0	0	0	0	3	0	0.12
2010	26,943	0	0	0	0	0	0	0	0	0	0	0.00
2011	28,128	0	0	0	0	0	0	0	0	0	0	0.00
2012	31,017	0	7	0	0	0	0	0	1	4	0	0.39

PHOENIXVILLE HOSPITAL COMPANY LLC

NHSN ID: 11836

Hospital type: Acute care general hospital

Number of licensed beds (2012): 137

Number of reported Healthcare-Associated Infections:

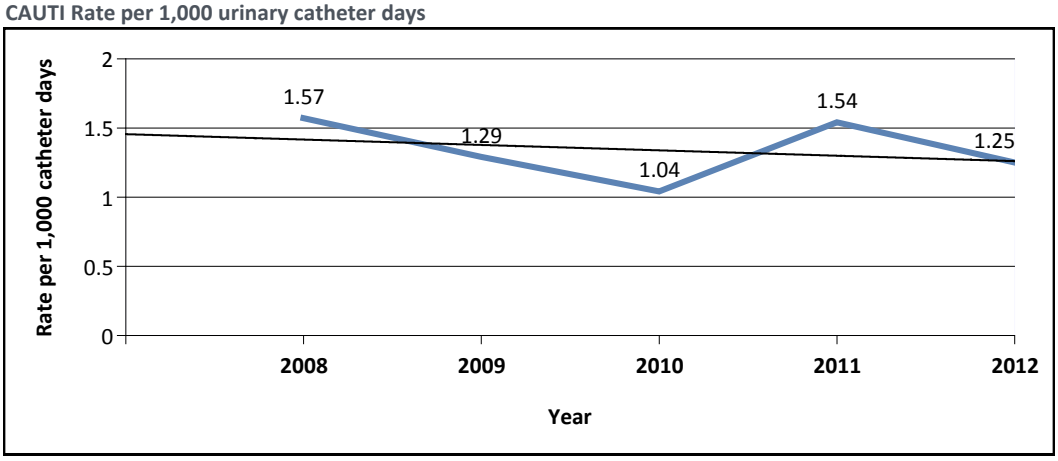
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	17,095	2	2	4	0	16	1	11	1	8	1	2.69
2009	35,921	8	0	10	0	21	1	23	1	15	0	2.20
2010	34,362	3	2	6	0	28	1	27	0	10	1	2.27
2011	34,445	3	0	11	0	12	0	24	2	11	1	1.86
2012	33,584	3	0	5	1	9	0	26	0	8	0	1.55

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	6	8.79	0.68	0.25 - 1.49	Same as
2009	10	12.42	0.72	0.33 - 1.38	Same as
2010	7	11.13	0.63	0.25 - 1.3	Same as
2011	9	7.16	1.26	0.57 - 2.39	Same as
2012	7	7.69	0.91	0.36 - 1.88	Same as

CAUTI Rate per 1,000 urinary catheter days



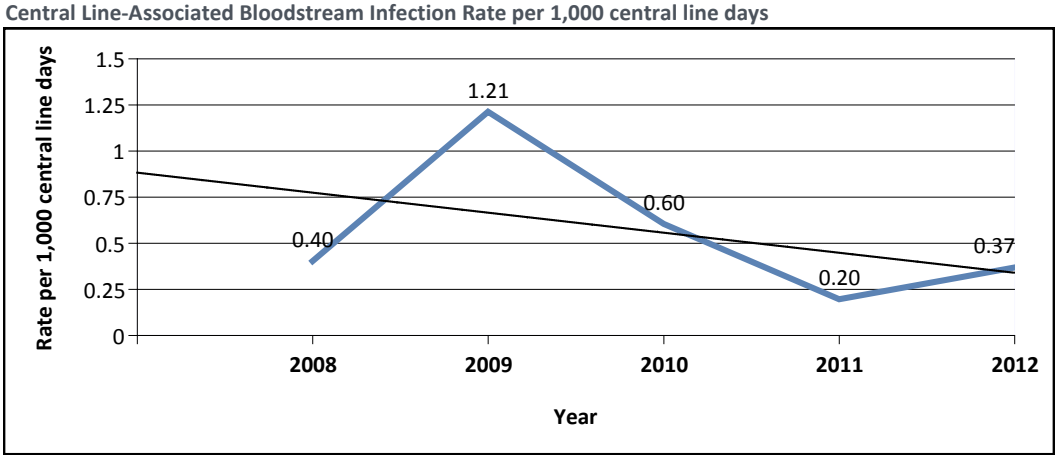
PHOENIXVILLE HOSPITAL COMPANY LLC

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	3.60	0.28	0 - 1.54	Same as
2009	6	4.43	1.35	0.49 - 2.95	Same as
2010	3	3.41	0.88	0.18 - 2.57	Same as
2011	1	2.95	0.34	0 - 1.89	Same as
2012	2	3.94	0.51	0.06 - 1.83	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



PHYSICIANS CARE SURGICAL HOSPITAL

NHSN ID: 19630

Hospital type: Acute care general hospital

Number of licensed beds (2012): 12

Number of reported Healthcare-Associated Infections:

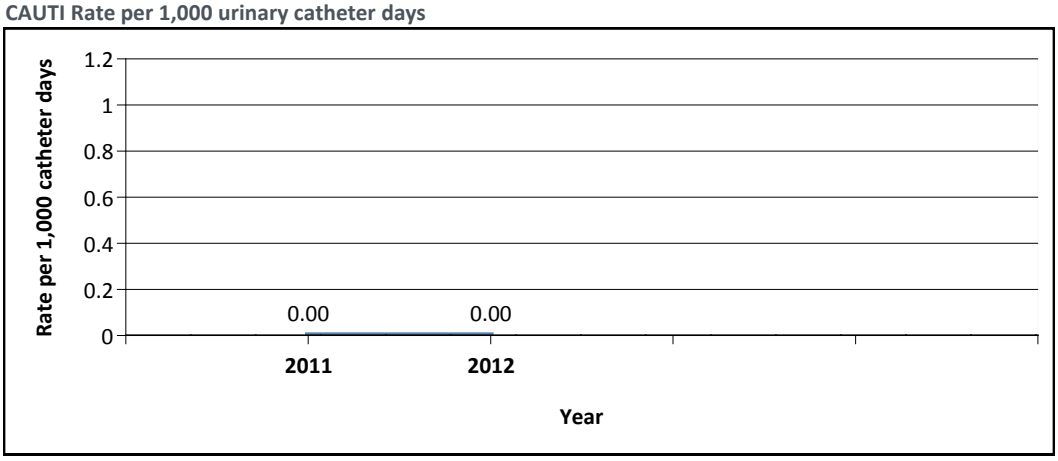
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008												
2009												
2010												
2011	215	0	0	0	0	0	0	0	0	0	0	0.00
2012	381	0	0	0	0	0	0	0	0	0	0	0.00

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008				-	
2009				-	
2010				-	
2011	0	0.07	0.00	0 - 53.42	Same as
2012	0	0.15	0.00	0 - 24.77	Same as

CAUTI Rate per 1,000 urinary catheter days



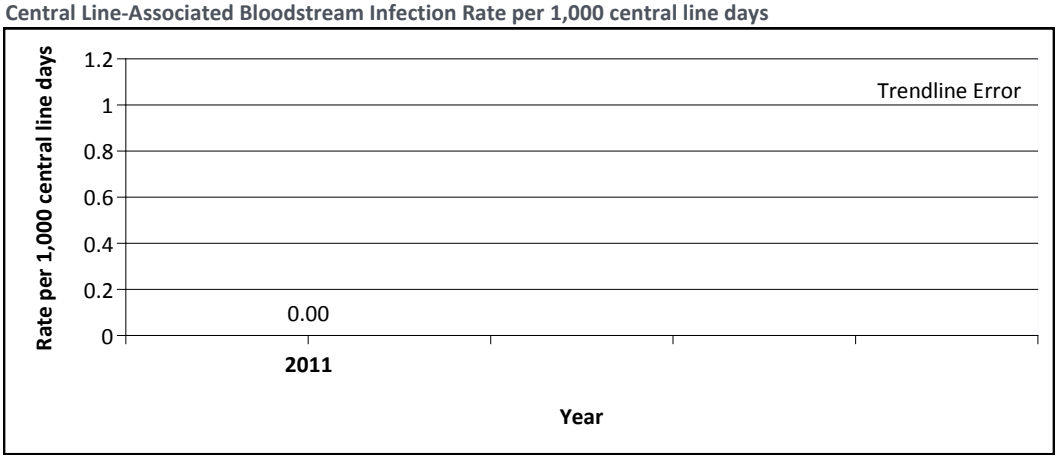
PHYSICIANS CARE SURGICAL HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008				-	
2009				-	
2010				-	
2011	0	0.00	0.00	0 - 3586.87	Same as
2012				-	

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



PINNACLE HEALTH HOSPITALS

NHSN ID: 10122

Hospital type: Acute care general hospital

Number of licensed beds (2012): 438

Number of reported Healthcare-Associated Infections:

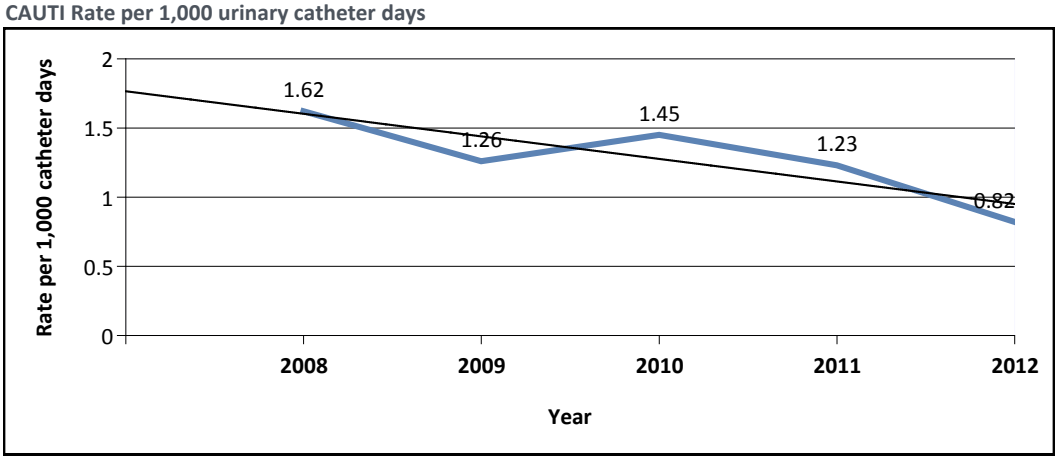
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	70,926	21	3	43	1	20	2	89	10	48	6	3.43
2009	155,441	17	5	75	1	25	2	210	16	93	8	2.91
2010	144,537	17	5	54	0	16	0	189	7	95	11	2.73
2011	149,719	25	5	54	0	22	1	173	18	93	10	2.68
2012	156,563	24	9	78	1	20	0	154	7	73	11	2.41

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	41	54.54	0.75	0.54 - 1.02	Same as
2009	61	106.08	0.58	0.44 - 0.74	Better
2010	60	72.04	0.83	0.64 - 1.07	Same as
2011	50	71.13	0.70	0.52 - 0.93	Better
2012	30	68.49	0.44	0.3 - 0.63	Better

CAUTI Rate per 1,000 urinary catheter days



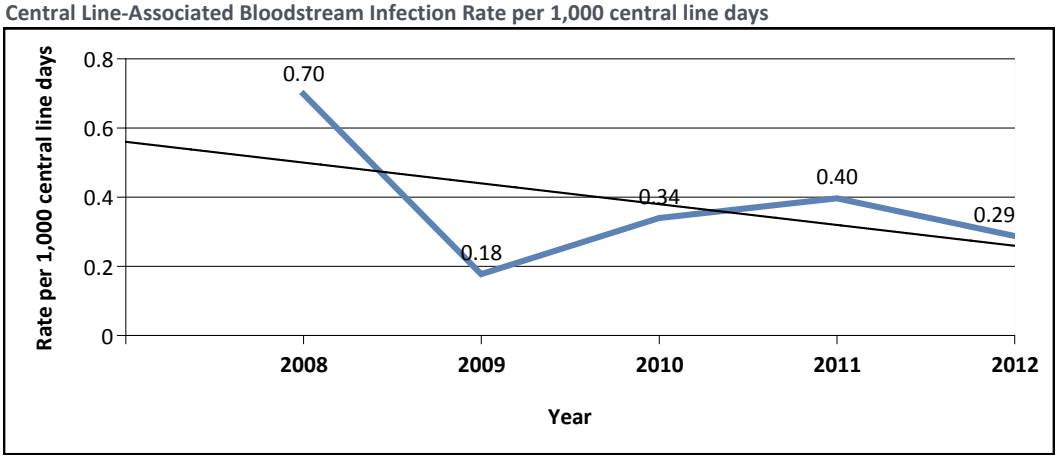
PINNACLE HEALTH HOSPITALS

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	11	23.54	0.47	0.23 - 0.84	Better
2009	6	38.76	0.15	0.06 - 0.34	Better
2010	11	25.89	0.42	0.21 - 0.76	Better
2011	13	27.11	0.48	0.26 - 0.82	Better
2012	9	25.87	0.35	0.16 - 0.66	Better

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	2.24	0.89	0.12 - 3.22	Same as
2009	2	4.96	0.40	0.05 - 1.46	Same as
2010	1	5.23	0.19	0 - 1.06	Same as
2011	2	3.54	0.57	0.06 - 2.04	Same as
2012	2	2.94	0.68	0.08 - 2.46	Same as

POCONO MEDICAL CENTER

NHSN ID: 11772

Hospital type: Acute care general hospital

Number of licensed beds (2012): 235

Number of reported Healthcare-Associated Infections:

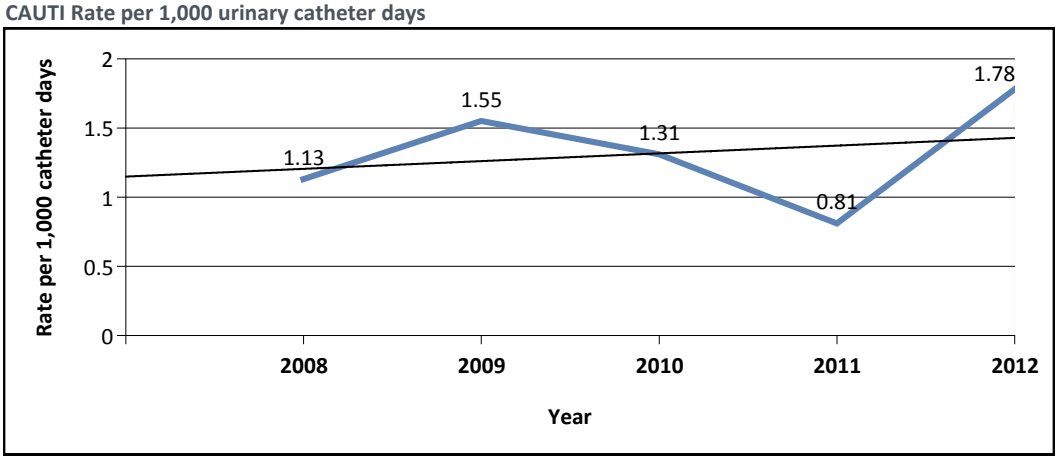
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	28,900	6	0	11	0	14	1	34	3	7	0	2.63
2009	54,252	6	0	17	0	18	0	33	1	19	0	1.73
2010	51,833	3	0	8	0	18	0	41	4	13	0	1.68
2011	56,600	8	0	10	0	9	0	43	4	7	0	1.43
2012	55,157	8	0	7	0	8	0	14	3	14	0	0.98

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	6	12.57	0.48	0.17 - 1.04	Same as
2009	15	15.60	0.96	0.54 - 1.59	Same as
2010	11	13.88	0.79	0.4 - 1.42	Same as
2011	7	13.93	0.50	0.2 - 1.04	Same as
2012	12	12.31	0.98	0.5 - 1.7	Same as

CAUTI Rate per 1,000 urinary catheter days



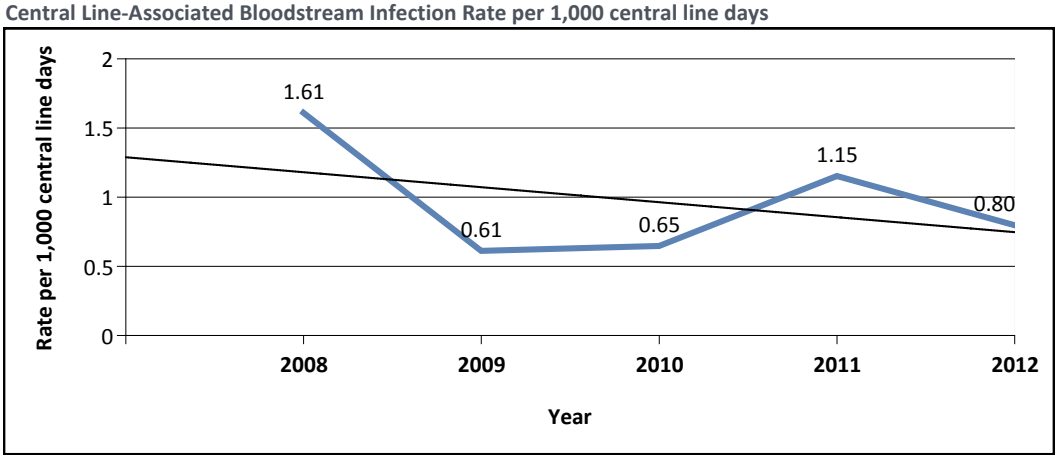
POCONO MEDICAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	5	4.44	1.13	0.36 - 2.63	Same as
2009	4	6.03	0.66	0.18 - 1.7	Same as
2010	3	3.42	0.88	0.18 - 2.57	Same as
2011	6	5.00	1.20	0.44 - 2.61	Same as
2012	5	4.73	1.06	0.34 - 2.47	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008				-	
2009				-	
2010	0	0.07	0.00	0 - 53.4	Same as
2011	0	0.14	0.00	0 - 25.38	Same as
2012	0	0.18	0.00	0 - 20.93	Same as

POTTSTOWN MEMORIAL MEDICAL CENTER

NHSN ID: 11983

Hospital type: Acute care general hospital

Number of licensed beds (2012): 224

Number of reported Healthcare-Associated Infections:

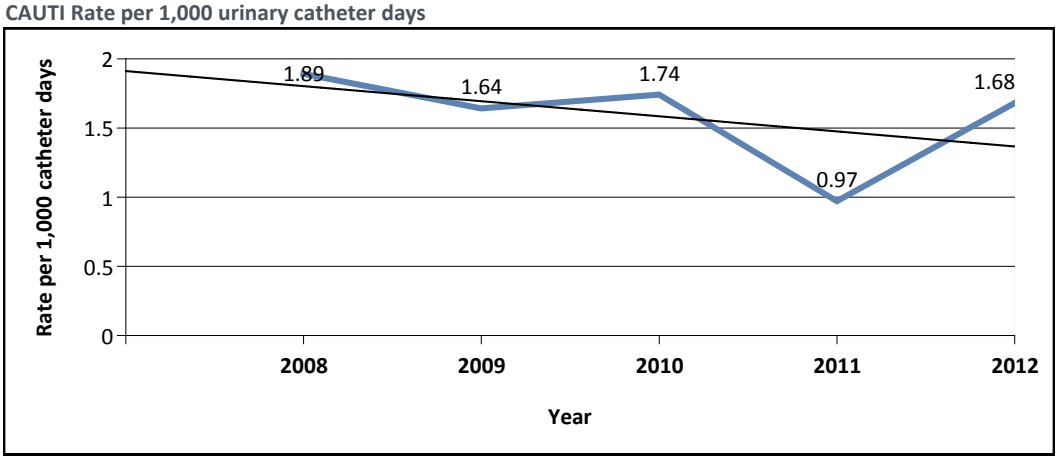
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	20,772	2	0	4	0	18	1	13	0	9	0	2.26
2009	44,071	2	0	4	0	19	1	27	1	18	0	1.63
2010	43,283	1	0	9	0	18	1	20	0	17	0	1.52
2011	43,413	2	0	5	0	4	0	11	1	10	0	0.76
2012	42,914	8	0	3	0	19	0	18	2	13	1	1.49

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	9	10.93	0.82	0.38 - 1.56	Same as
2009	16	15.69	1.02	0.58 - 1.66	Same as
2010	16	15.15	1.06	0.6 - 1.72	Same as
2011	9	11.84	0.76	0.35 - 1.44	Same as
2012	12	9.84	1.22	0.63 - 2.13	Same as

CAUTI Rate per 1,000 urinary catheter days



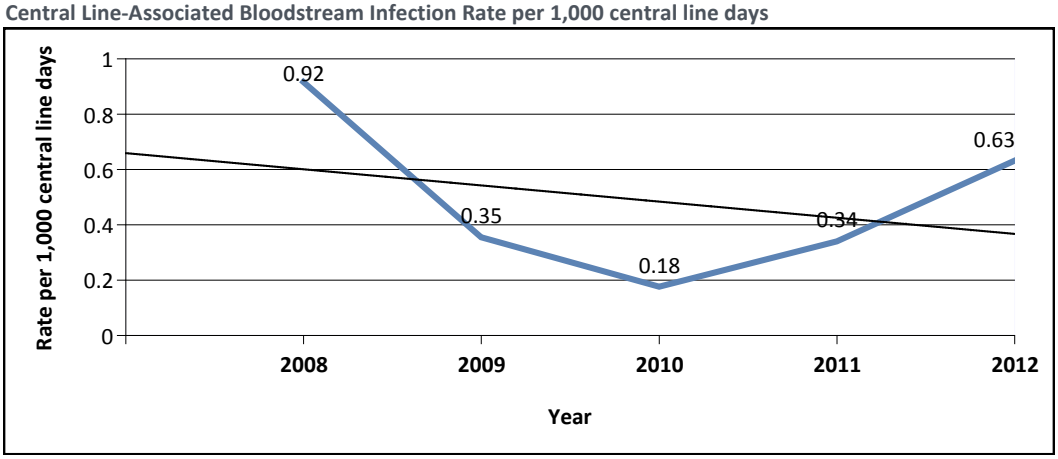
POTTSTOWN MEMORIAL MEDICAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	3.11	0.64	0.07 - 2.32	Same as
2009	2	5.12	0.39	0.04 - 1.41	Same as
2010	1	3.96	0.25	0 - 1.41	Same as
2011	2	3.44	0.58	0.07 - 2.1	Same as
2012	3	3.25	0.92	0.19 - 2.69	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



PUNXSUTAWNEY AREA HOSPITAL

NHSN ID: 11830

Hospital type: Acute care general hospital

Number of licensed beds (2012): 49

Number of reported Healthcare-Associated Infections:

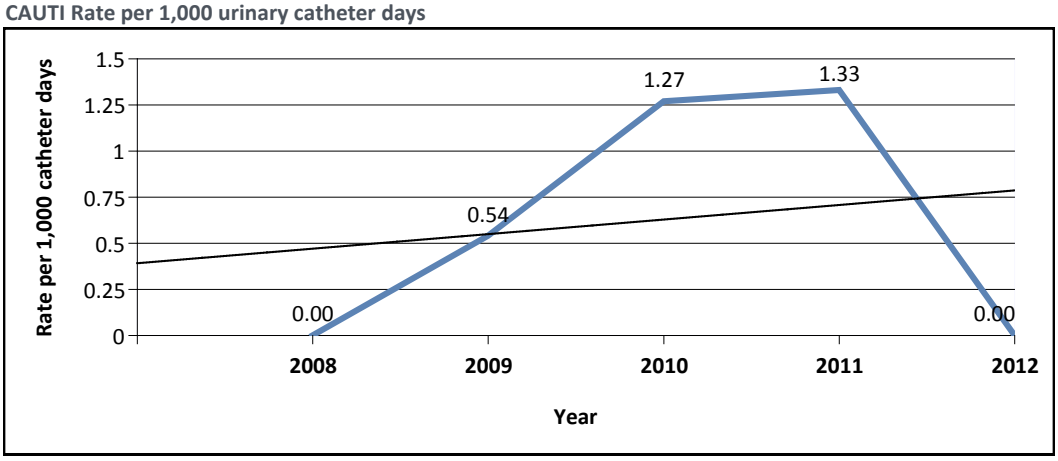
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,825	0	0	2	2	1	0	1	0	0	0	1.57
2009	8,923	0	0	2	0	2	0	7	0	2	0	1.46
2010	7,440	0	0	4	0	1	1	8	0	2	0	2.15
2011	7,380	0	0	5	0	1	0	13	1	3	1	3.25
2012	7,111	1	0	4	0	2	0	6	0	0	0	1.83

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	2.04	0.00	0 - 1.8	Same as
2009	1	2.97	0.34	0 - 1.87	Same as
2010	2	2.58	0.78	0.09 - 2.8	Same as
2011	2	1.90	1.05	0.12 - 3.81	Same as
2012	0	2.27	0.00	0 - 1.62	Same as

CAUTI Rate per 1,000 urinary catheter days



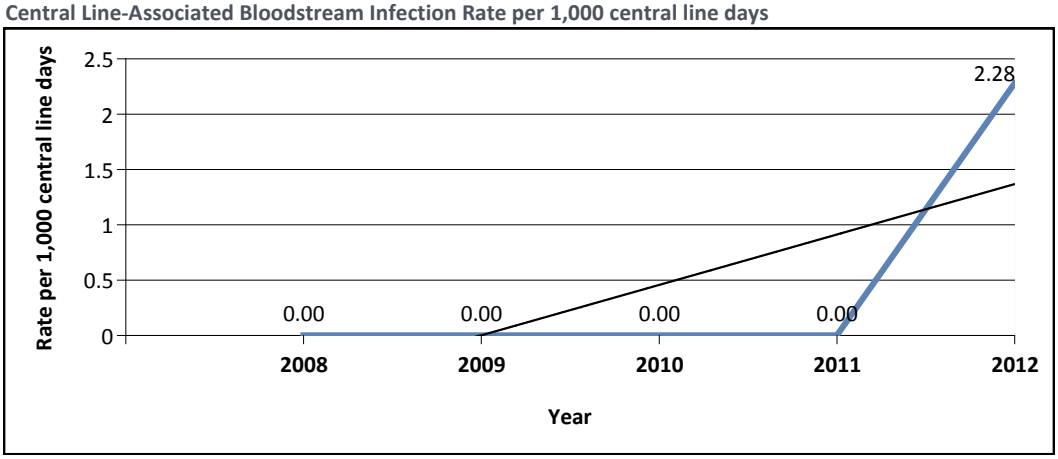
PUNXSUTAWNEY AREA HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.25	0.00	0 - 14.78	Same as
2009	0	0.56	0.00	0 - 6.55	Same as
2010	0	0.35	0.00	0 - 10.55	Same as
2011	0	0.33	0.00	0 - 11.28	Same as
2012	1	0.27	3.64	0.05 - 20.28	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



READING HOSPITAL AND MEDICAL CENTER

NHSN ID: 12375

Hospital type: Acute care general hospital

Number of licensed beds (2012): 735

Number of reported Healthcare-Associated Infections:

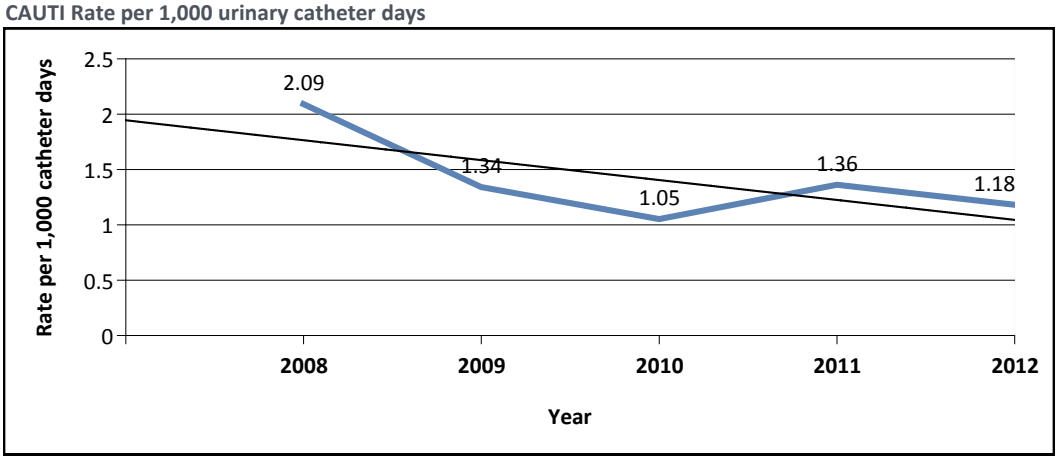
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	75,622	25	2	34	0	6	0	61	7	47	1	2.42
2009	155,742	40	6	75	1	19	1	111	16	67	1	2.16
2010	149,322	41	9	44	3	14	0	84	21	58	4	1.86
2011	158,238	36	2	63	10	21	2	110	24	85	3	2.25
2012	165,967	47	1	48	12	12	2	136	24	69	13	2.19

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	26	29.92	0.87	0.57 - 1.27	Same as
2009	34	56.19	0.61	0.42 - 0.85	Better
2010	24	40.49	0.59	0.38 - 0.88	Better
2011	32	37.74	0.85	0.58 - 1.2	Same as
2012	27	41.85	0.65	0.43 - 0.94	Better

CAUTI Rate per 1,000 urinary catheter days



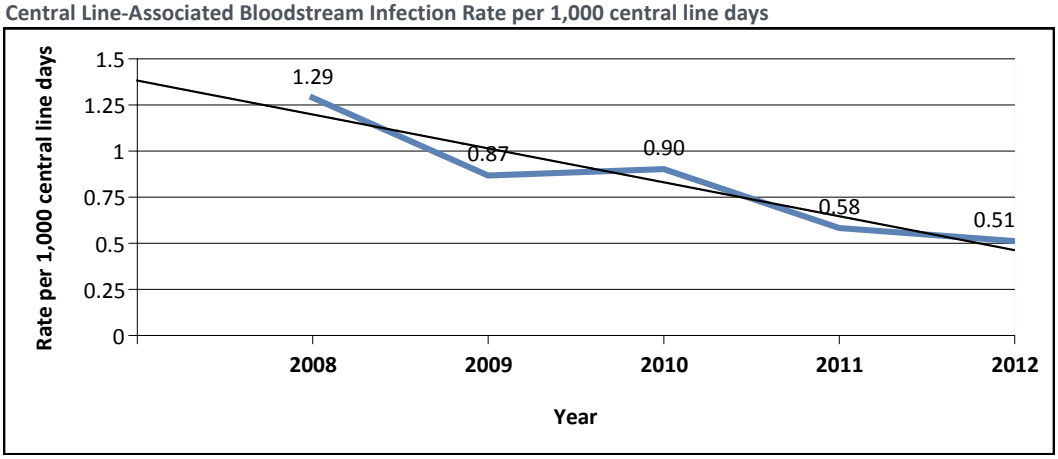
READING HOSPITAL AND MEDICAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	18	20.60	0.87	0.52 - 1.38	Same as
2009	24	33.53	0.72	0.46 - 1.06	Same as
2010	22	20.36	1.08	0.68 - 1.64	Same as
2011	15	22.26	0.67	0.38 - 1.11	Same as
2012	13	20.23	0.64	0.34 - 1.1	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	0.94	2.12	0.04 - 7.66	Same as
2009	2	3.22	0.62	0.07 - 2.24	Same as
2010	1	2.94	0.34	0 - 1.89	Same as
2011	1	1.67	0.60	0.01 - 3.34	Same as
2012	3	1.66	1.80	0.36 - 5.27	Same as

Standardized Infection Ratio - Specialty Care Area

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008				-	
2009				-	
2010	0	2.18	0.00	0 - 1.68	Same as
2011	0	3.14	0.00	0 - 1.17	Same as
2012	1	2.56	0.39	0.01 - 2.18	Same as

REGIONAL HOSPITAL OF SCRANTON

NHSN ID: 12533

Hospital type: Acute care general hospital

Number of licensed beds (2012): 198

Number of reported Healthcare-Associated Infections:

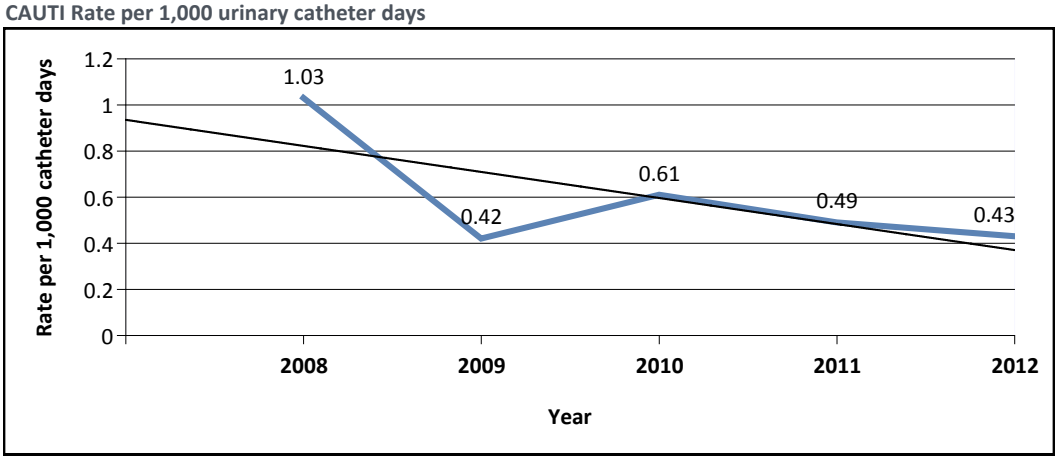
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	22,669	10	0	0	0	5	0	6	0	6	0	1.19
2009	46,078	4	0	3	0	7	0	20	0	5	0	0.85
2010	44,463	7	0	5	0	8	0	14	3	10	0	1.06
2011	43,923	10	0	8	0	6	0	13	0	8	0	1.02
2012	49,636	2	0	2	0	5	0	12	0	6	0	0.54

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	6	13.13	0.46	0.17 - 0.99	Better
2009	5	26.27	0.19	0.06 - 0.44	Better
2010	7	20.10	0.35	0.14 - 0.72	Better
2011	6	21.41	0.28	0.1 - 0.61	Better
2012	6	26.30	0.23	0.08 - 0.5	Better

CAUTI Rate per 1,000 urinary catheter days



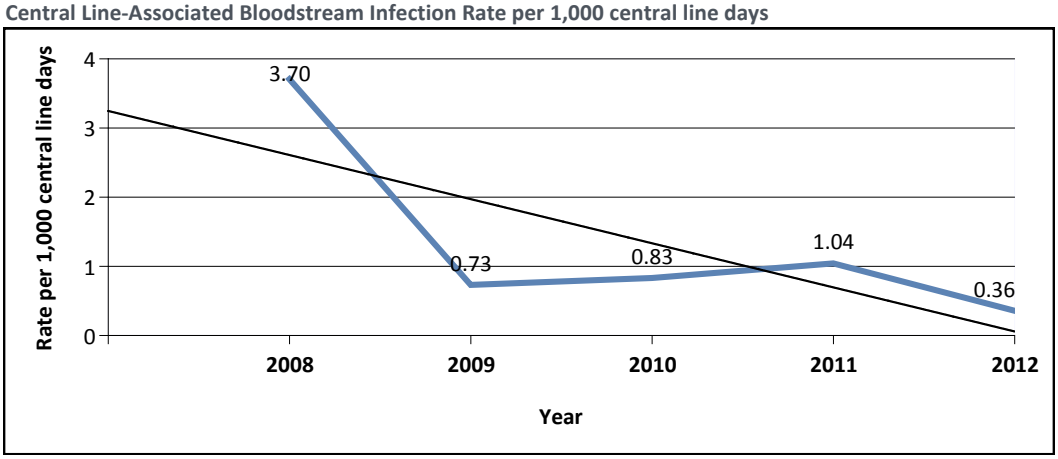
REGIONAL HOSPITAL OF SCRANTON

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	10	3.88	2.58	1.23 - 4.74	Worse
2009	4	7.29	0.55	0.15 - 1.4	Same as
2010	5	5.22	0.96	0.31 - 2.23	Same as
2011	6	5.24	1.15	0.42 - 2.49	Same as
2012	2	4.19	0.48	0.05 - 1.72	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



RIDDLE MEMORIAL HOSPITAL

NHSN ID: 11731

Hospital type: Acute care general hospital

Number of licensed beds (2012): 204

Number of reported Healthcare-Associated Infections:

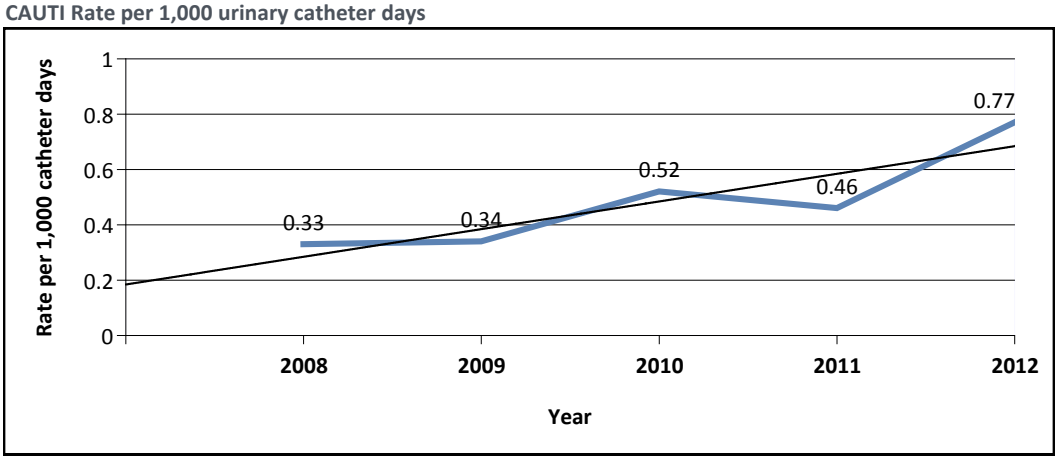
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	24,194	5	0	9	2	3	0	8	0	5	0	1.32
2009	48,102	19	1	12	0	4	0	46	4	10	0	2.00
2010	49,708	7	0	5	0	6	0	29	1	15	1	1.29
2011	49,126	4	3	0	0	5	0	15	0	12	0	0.79
2012	47,311	6	0	6	0	5	0	19	0	16	0	1.10

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	19.47	0.15	0.03 - 0.45	Better
2009	6	28.44	0.21	0.08 - 0.46	Better
2010	9	28.18	0.32	0.15 - 0.61	Better
2011	8	23.58	0.34	0.15 - 0.67	Better
2012	12	22.31	0.54	0.28 - 0.94	Better

CAUTI Rate per 1,000 urinary catheter days



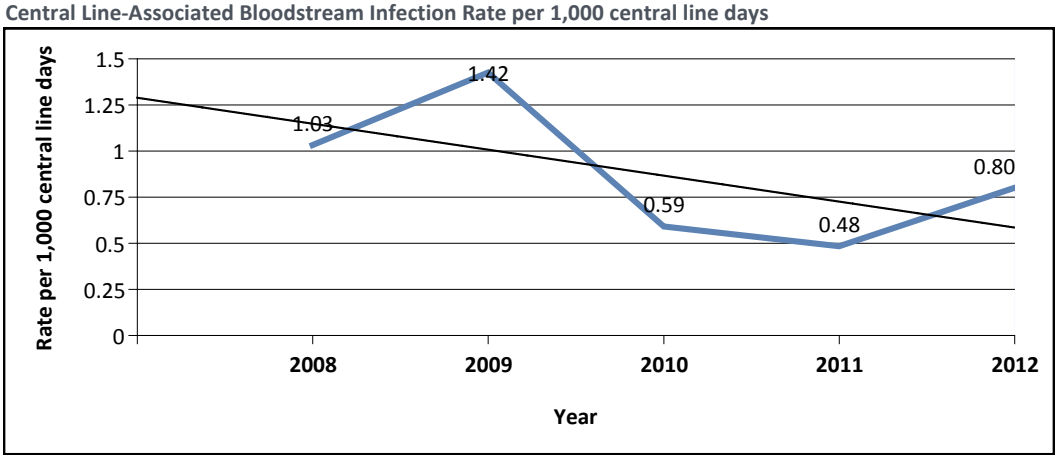
RIDDLE MEMORIAL HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	5	7.16	0.70	0.22 - 1.63	Same as
2009	13	7.63	1.70	0.91 - 2.92	Same as
2010	5	5.68	0.88	0.28 - 2.05	Same as
2011	4	4.66	0.86	0.23 - 2.2	Same as
2012	6	5.44	1.10	0.4 - 2.4	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



ROBERT PACKER HOSPITAL

NHSN ID: 12422

Hospital type: Acute care general hospital

Number of licensed beds (2012): 238

Number of reported Healthcare-Associated Infections:

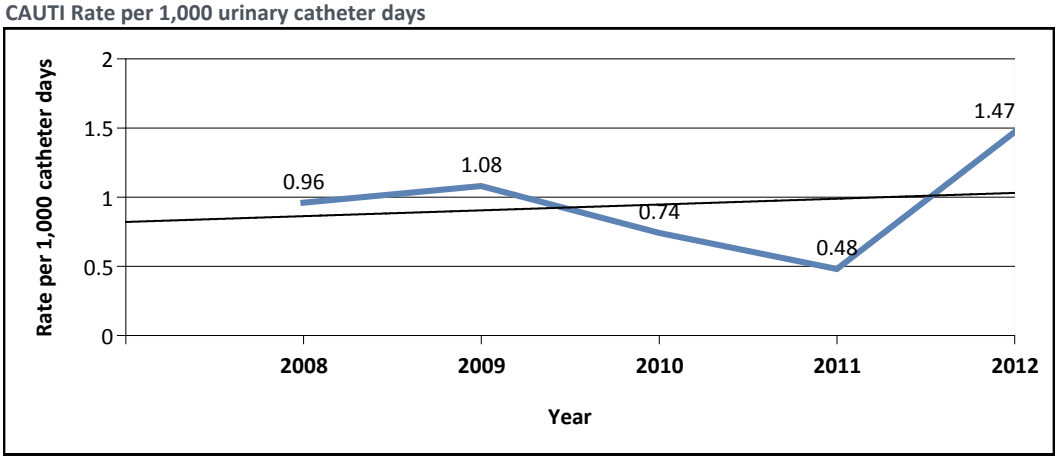
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	24,891	13	0	6	1	4	0	11	1	11	0	1.89
2009	55,742	15	0	27	2	14	0	22	1	16	0	1.74
2010	61,472	21	0	16	3	7	0	16	3	11	1	1.27
2011	63,820	31	0	0	6	21	0	32	3	20	0	1.77
2012	67,861	31	0	3	9	37	0	37	5	37	1	2.36

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	7	16.16	0.43	0.17 - 0.89	Better
2009	15	30.68	0.49	0.27 - 0.81	Better
2010	9	21.34	0.42	0.19 - 0.8	Better
2011	6	20.60	0.29	0.11 - 0.63	Better
2012	19	24.15	0.79	0.47 - 1.23	Same as

CAUTI Rate per 1,000 urinary catheter days



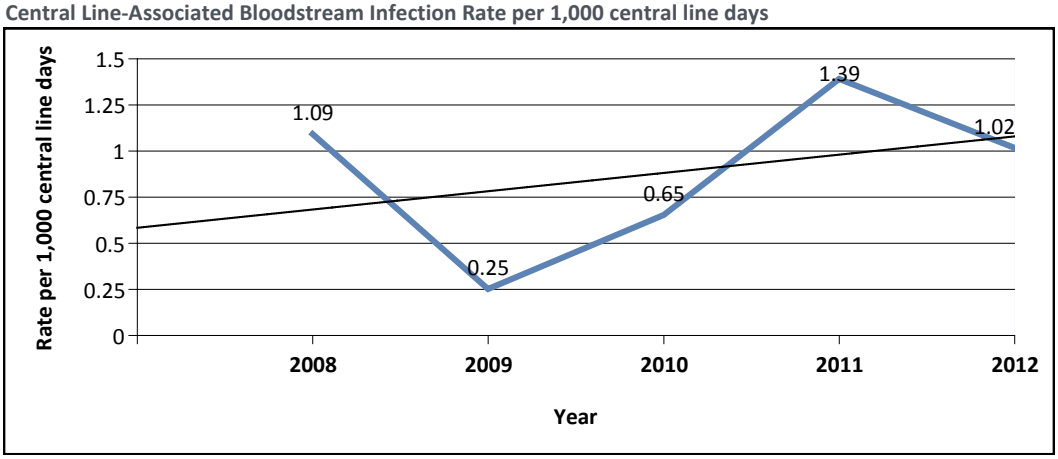
ROBERT PACKER HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	4	5.37	0.74	0.2 - 1.91	Same as
2009	2	9.91	0.20	0.02 - 0.73	Better
2010	5	6.62	0.76	0.24 - 1.76	Same as
2011	13	8.18	1.59	0.85 - 2.72	Same as
2012	10	7.78	1.29	0.62 - 2.36	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Specialty Care Area

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	3.11	0.00	0 - 1.18	Same as
2009	3	2.86	1.05	0.21 - 3.07	Same as
2010	3	1.89	1.59	0.32 - 4.63	Same as
2011	6	3.08	1.95	0.71 - 4.25	Same as
2012	8	2.66	3.00	1.29 - 5.92	Worse

ROXBOROUGH MEMORIAL HOSPITAL

NHSN ID: 11978

Hospital type: Acute care general hospital

Number of licensed beds (2012): 141

Number of reported Healthcare-Associated Infections:

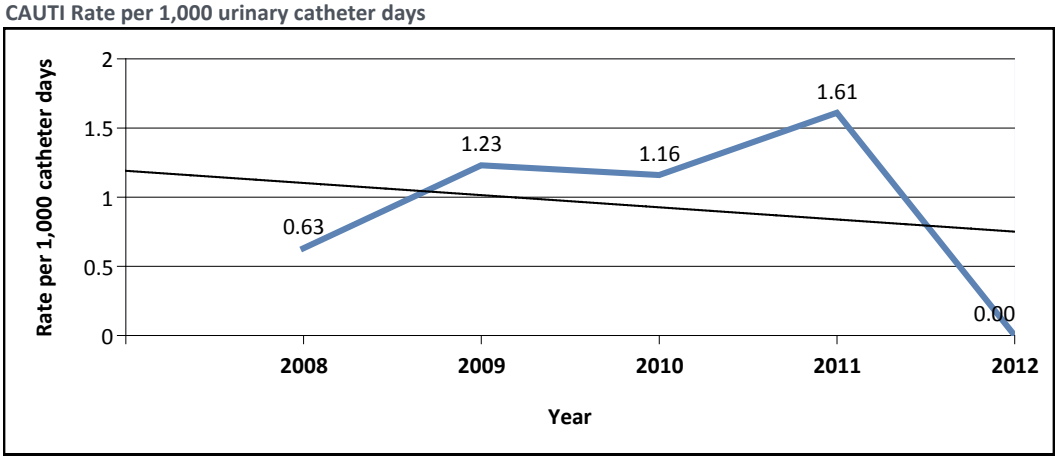
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	16,168	8	1	7	0	2	0	2	1	5	1	1.67
2009	31,146	8	0	9	0	5	0	4	0	10	0	1.16
2010	30,472	12	0	11	1	11	0	5	3	15	0	1.90
2011	29,113	13	0	5	0	3	0	3	1	11	0	1.24
2012	25,179	0	0	1	1	0	0	1	0	0	0	0.12

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	7.46	0.27	0.03 - 0.97	Better
2009	8	14.40	0.56	0.24 - 1.09	Same as
2010	7	10.65	0.66	0.26 - 1.35	Same as
2011	9	9.25	0.97	0.44 - 1.85	Same as
2012	0	7.30	0.00	0 - 0.5	Better

CAUTI Rate per 1,000 urinary catheter days



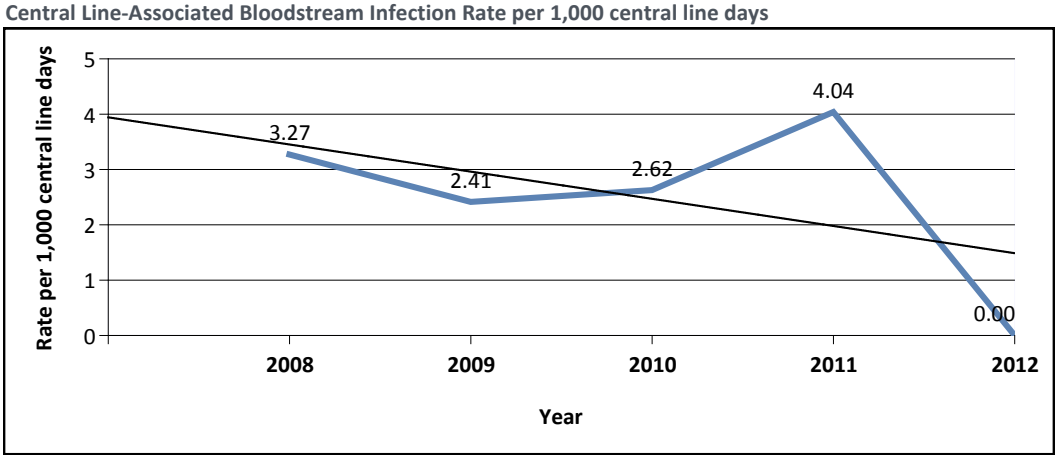
ROXBOROUGH MEMORIAL HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	5	2.17	2.31	0.74 - 5.38	Same as
2009	6	3.59	1.67	0.61 - 3.64	Same as
2010	8	2.77	2.89	1.24 - 5.69	Worse
2011	10	2.42	4.14	1.98 - 7.61	Worse
2012	0	1.36	0.00	0 - 2.69	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



ROXBURY TREATMENT CENTER

NHSN ID: 12723

Hospital type: Psychiatric hospital

Number of licensed beds (2012): 26

Number of reported Healthcare-Associated Infections:

Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008		0	14	0	1	1	0	0	6	1	0	
2009	7,955	0	4	0	1	0	3	0	4	2	0	1.76
2010	30,173	0	10	0	1	0	2	0	5	2	0	0.66
2011	33,540	0	21	0	0	0	1	0	2	0	0	0.72
2012	14,253	0	11	0	0	0	1	0	2	1	0	1.05

SACRED HEART HOSPITAL

NHSN ID: 11684

Hospital type: Acute care general hospital

Number of licensed beds (2012): 215

Number of reported Healthcare-Associated Infections:

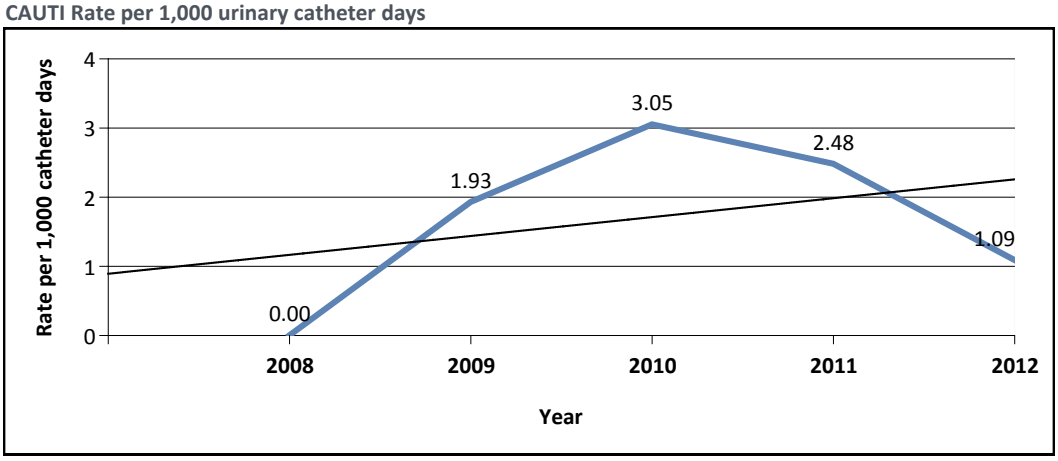
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	16,815	0	0	5	0	4	0	5	1	2	0	1.01
2009	30,405	5	1	4	1	3	0	10	0	9	0	1.09
2010	30,395	5	0	4	0	1	0	24	0	17	0	1.68
2011	33,338	4	1	8	0	1	0	25	2	10	0	1.53
2012	32,025	2	0	8	1	6	0	18	0	8	1	1.37

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	4.23	0.00	0 - 0.87	Better
2009	6	5.04	1.19	0.43 - 2.59	Same as
2010	10	5.48	1.83	0.87 - 3.36	Same as
2011	8	3.66	2.19	0.94 - 4.31	Same as
2012	3	4.92	0.61	0.12 - 1.78	Same as

CAUTI Rate per 1,000 urinary catheter days



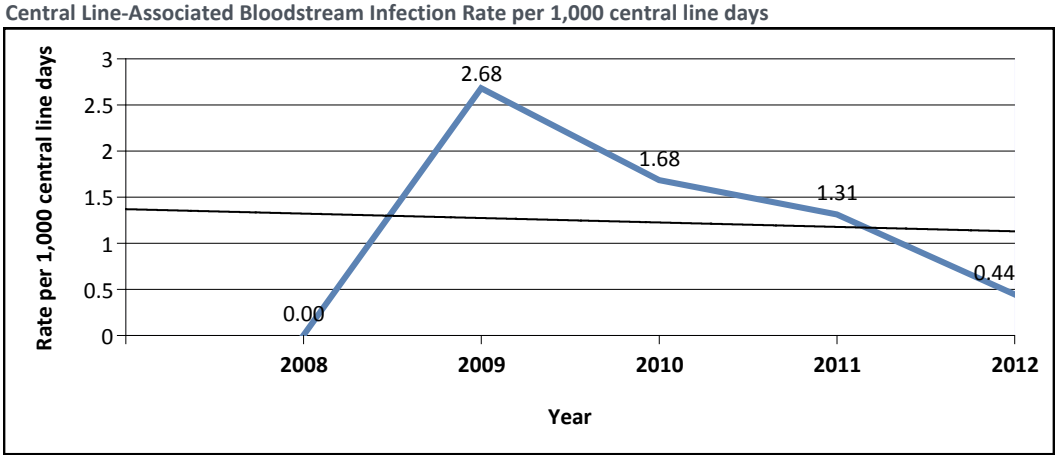
SACRED HEART HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	1.34	0.00	0 - 2.73	Same as
2009	5	1.99	2.52	0.81 - 5.88	Same as
2010	4	1.79	2.24	0.6 - 5.74	Same as
2011	3	1.49	2.01	0.4 - 5.86	Same as
2012	1	1.57	0.64	0.01 - 3.55	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008				-	
2009				-	
2010	0	0.00	0.00	0 - 784.65	Same as
2011	0	0.00	0.00	0 - 1383.57	Same as
2012	0	0.01	0.00	0 - 302.78	Same as

SCHUYLKILL MEDICAL CENTER --- EAST NORWEGIAN STREET

NHSN ID: 11922

Hospital type: Acute care general hospital

Number of licensed beds (2012): 126

Number of reported Healthcare-Associated Infections:

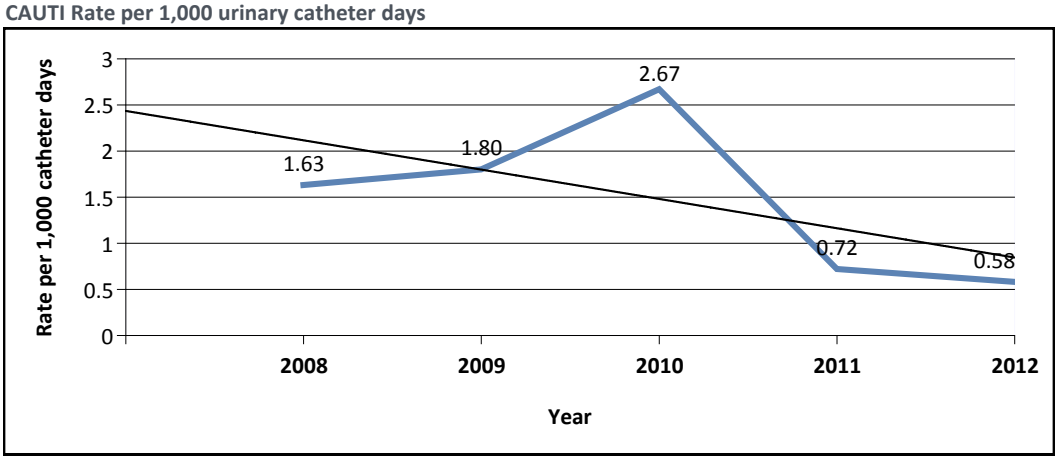
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	16,884	5	0	6	0	2	0	6	3	13	0	2.07
2009	32,693	10	0	22	0	3	0	28	3	16	0	2.51
2010	32,932	9	0	13	0	4	0	7	2	21	0	1.70
2011	30,491	4	0	8	1	4	0	9	0	5	0	1.02
2012	26,766	5	2	5	0	4	0	17	0	10	0	1.61

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	5	7.28	0.69	0.22 - 1.6	Same as
2009	9	8.08	1.11	0.51 - 2.11	Same as
2010	14	8.69	1.61	0.88 - 2.7	Same as
2011	3	4.94	0.61	0.12 - 1.77	Same as
2012	2	4.71	0.43	0.05 - 1.53	Same as

CAUTI Rate per 1,000 urinary catheter days



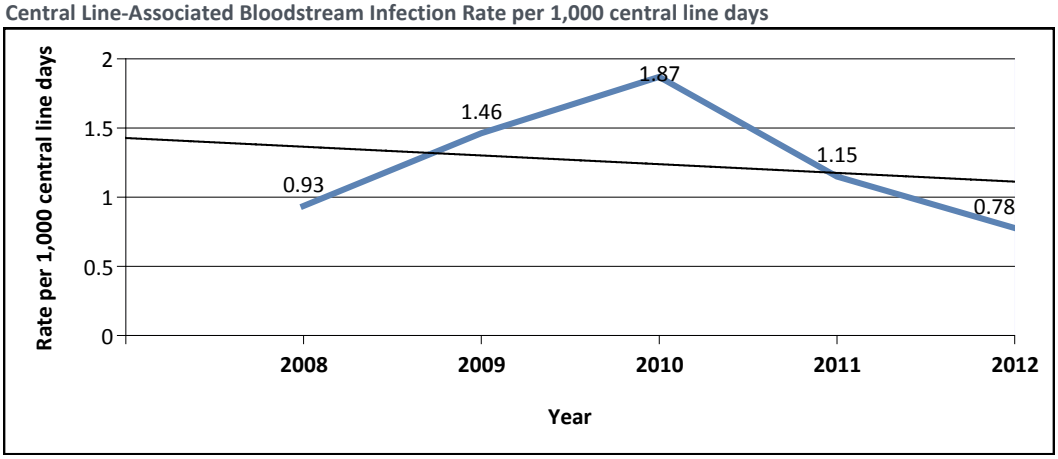
SCHUYLKILL MEDICAL CENTER --- EAST NORWEGIAN STREET

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	1.48	0.67	0.01 - 3.75	Same as
2009	4	2.73	1.47	0.39 - 3.75	Same as
2010	5	2.00	2.50	0.81 - 5.83	Same as
2011	3	1.65	1.82	0.37 - 5.32	Same as
2012	2	1.73	1.16	0.13 - 4.18	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



SCHUYLKILL MEDICAL CENTER --- SOUTH JACKSON STREET

NHSN ID: 12087

Hospital type: Acute care general hospital

Number of licensed beds (2012): 179

Number of reported Healthcare-Associated Infections:

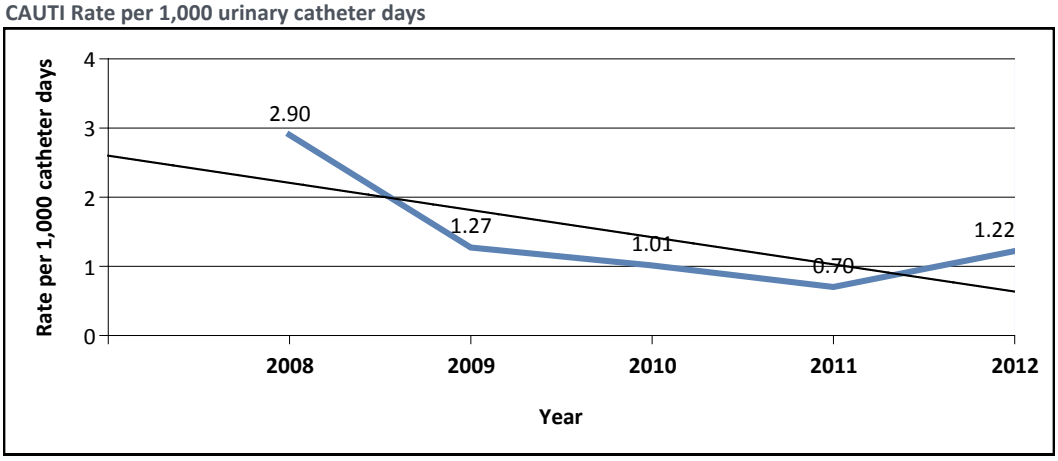
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	22,013	1	0	12	0	0	0	5	0	14	0	1.45
2009	42,927	3	1	17	0	4	0	15	1	15	0	1.30
2010	38,688	4	1	8	0	2	0	19	0	11	0	1.16
2011	37,078	3	0	1	0	7	0	15	3	4	0	0.89
2012	34,712	5	1	8	0	8	0	25	0	7	1	1.58

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	8	6.91	1.16	0.5 - 2.28	Same as
2009	7	8.95	0.78	0.31 - 1.61	Same as
2010	5	8.25	0.61	0.2 - 1.41	Same as
2011	3	4.96	0.61	0.12 - 1.77	Same as
2012	5	5.57	0.90	0.29 - 2.09	Same as

CAUTI Rate per 1,000 urinary catheter days



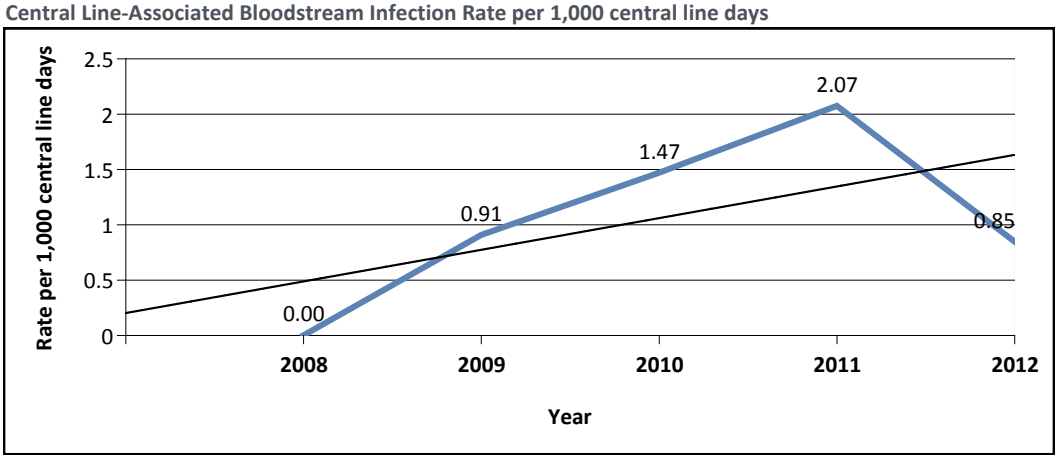
SCHUYLKILL MEDICAL CENTER --- SOUTH JACKSON STREET

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	1.04	0.00	0 - 3.53	Same as
2009	2	2.44	0.82	0.09 - 2.96	Same as
2010	3	1.63	1.85	0.37 - 5.39	Same as
2011	3	1.04	2.89	0.58 - 8.43	Same as
2012	2	1.50	1.33	0.15 - 4.81	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



SELECT SPECIALITY HOSPITAL --- CENTRAL PENNSYLVANIA (YORK)

NHSN ID: 12334

Hospital type: Long-term acute care hospital

Number of licensed beds (2012): 23

Number of reported Healthcare-Associated Infections:

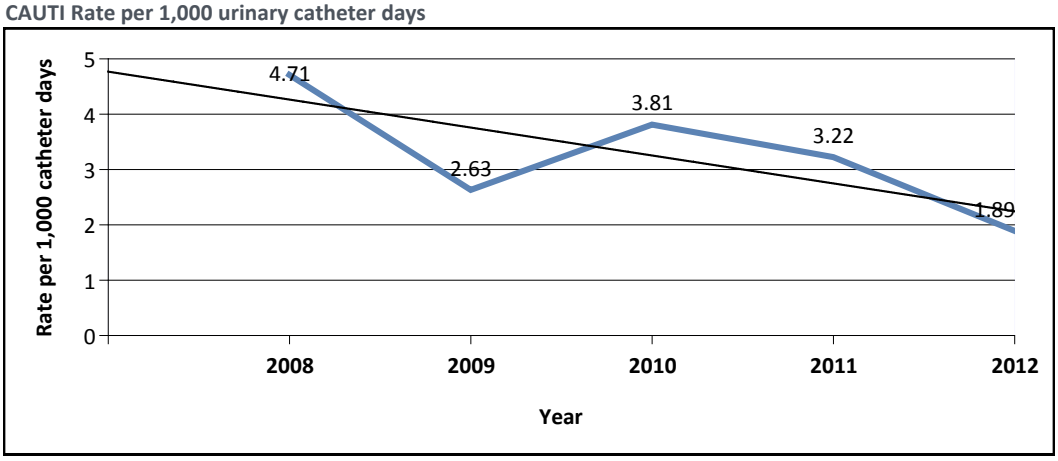
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	1,920	6	0	4	0	0	0	0	1	5	0	8.33
2009	5,929	4	0	11	0	0	0	0	1	10	0	4.39
2010	5,309	9	0	4	0	0	0	0	0	12	0	4.71
2011	5,387	1	0	9	0	0	0	0	0	11	0	3.90
2012	5,709	4	0	9	0	1	0	0	1	10	0	4.38

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	5	2.14	2.33	0.75 - 5.44	Same as
2009	8	4.82	1.66	0.71 - 3.27	Same as
2010	10	4.22	2.37	1.13 - 4.36	Worse
2011	10	4.55	2.20	1.05 - 4.05	Worse
2012	6	4.64	1.29	0.47 - 2.81	Same as

CAUTI Rate per 1,000 urinary catheter days



Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Long-Term Acute Care

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation

SELECT SPECIALITY HOSPITAL --- CENTRAL PENNSYLVANIA (YORK)

2008	6	2.23	2.69	0.2 - 5.86	Same as
2009	4	5.45	0.73	0.2 - 1.88	Same as
2010	9	4.66	1.93	0.88 - 3.67	Same as
2011	0	4.40	0.00	0 - 0.83	Better
2012	4	4.40	0.91	0.24 - 2.33	Same as

SELECT SPECIALITY HOSPITAL --- ERIE

NHSN ID: 11880

Hospital type: Long-term acute care hospital

Number of licensed beds (2012): 50

Number of reported Healthcare-Associated Infections:

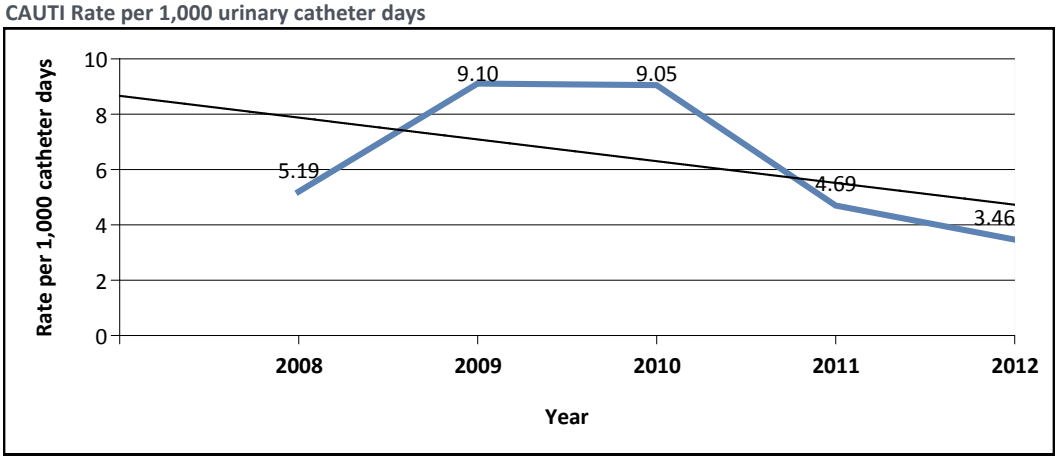
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	10,464	6	0	10	3	5	0	0	2	26	2	5.16
2009	10,362	13	0	18	3	7	0	0	5	47	1	9.07
2010	10,950	6	0	15	3	6	0	0	2	50	1	7.58
2011	10,883	5	4	16	5	12	0	0	3	42	1	8.09
2012	9,699	4	1	8	2	4	0	0	1	29	0	5.05

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	12	5.34	2.25	1.16 - 3.92	Worse
2009	20	3.53	5.66	3.46 - 8.75	Worse
2010	21	3.81	5.51	3.41 - 8.42	Worse
2011	11	2.98	3.69	1.84 - 6.6	Worse
2012	5	1.98	2.52	0.81 - 5.89	Same as

CAUTI Rate per 1,000 urinary catheter days



Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Long-Term Acute Care

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation

SELECT SPECIALITY HOSPITAL --- ERIE

2008	5	10.30	0.49	0.77 - 1.13	Same as
2009	12	8.08	1.48	0.77 - 2.59	Same as
2010	6	8.05	0.75	0.27 - 1.62	Same as
2011	5	7.87	0.64	0.2 - 1.48	Same as
2012	4	4.98	0.80	0.22 - 2.05	Same as

SELECT SPECIALITY HOSPITAL --- JOHNSTOWN

NHSN ID: 12299

Hospital type: Long-term acute care hospital

Number of licensed beds (2012): 39

Number of reported Healthcare-Associated Infections:

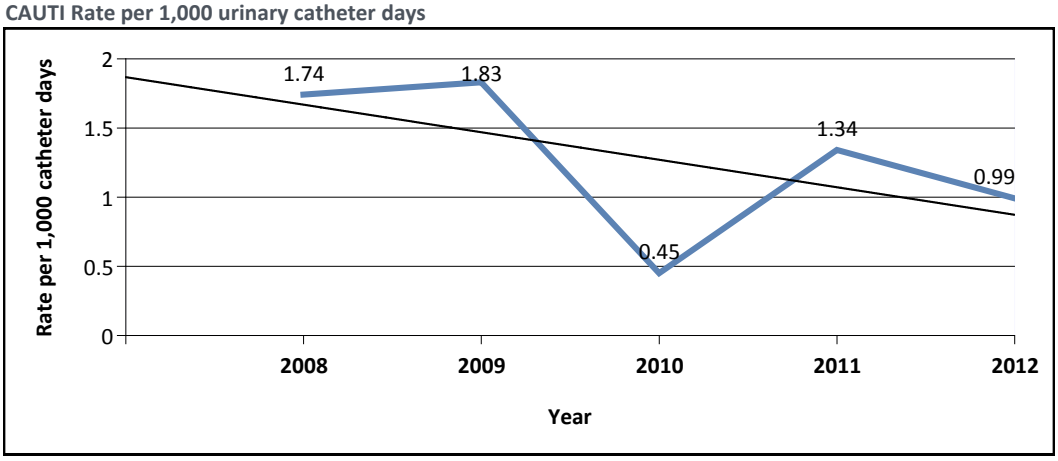
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,635	2	0	11	7	4	0	0	1	3	0	7.70
2009	8,677	5	0	17	4	11	0	0	1	12	1	5.88
2010	10,513	5	0	14	0	4	0	0	0	5	0	2.66
2011	10,110	6	0	0	0	2	0	0	2	9	0	1.88
2012	11,242	5	0	3	0	2	0	0	1	8	0	1.69

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	3.56	0.84	0.17 - 2.46	Same as
2009	9	7.80	1.15	0.53 - 2.19	Same as
2010	3	10.69	0.28	0.06 - 0.82	Better
2011	9	10.03	0.90	0.41 - 1.7	Same as
2012	7	10.37	0.67	0.27 - 1.39	Same as

CAUTI Rate per 1,000 urinary catheter days



Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Long-Term Acute Care

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation

SELECT SPECIALITY HOSPITAL --- JOHNSTOWN

2008	2	3.39	0.59	0.24 - 2.13	Same as
2009	5	6.83	0.73	0.24 - 1.71	Same as
2010	4	8.07	0.50	0.13 - 1.27	Same as
2011	5	7.64	0.65	0.21 - 1.53	Same as
2012	4	6.62	0.60	0.16 - 1.55	Same as

SELECT SPECIALTY HOSPITAL --- CENTRAL PA

NHSN ID: 13921

Hospital type: Long-term acute care hospital

Number of licensed beds (2012): 38

Number of reported Healthcare-Associated Infections:

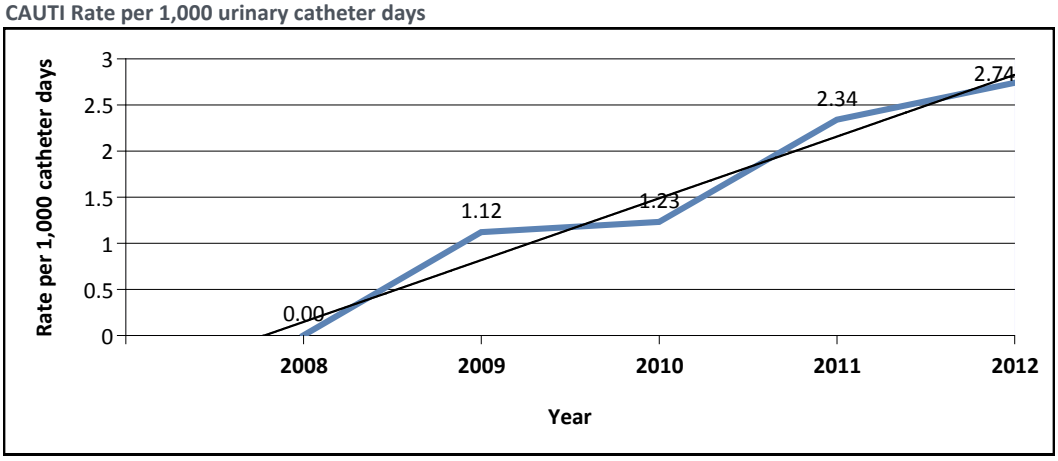
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	546	0	0	1	0	0	0	0	0	0	0	1.83
2009	6,721	5	0	1	0	0	0	0	0	4	0	1.49
2010	7,323	5	0	22	0	0	0	0	0	4	0	4.23
2011	9,728	6	0	14	0	0	0	0	1	8	0	2.98
2012	9,672	4	0	21	0	1	0	0	2	13	0	4.24

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.54	0.00	0 - 6.74	Same as
2009	4	5.66	0.71	0.19 - 1.81	Same as
2010	4	5.25	0.76	0.21 - 1.95	Same as
2011	8	4.67	1.71	0.74 - 3.37	Same as
2012	8	4.14	1.93	0.83 - 3.81	Same as

CAUTI Rate per 1,000 urinary catheter days



Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Long-Term Acute Care

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation

SELECT SPECIALTY HOSPITAL --- CENTRAL PA

2008	0	0.64	0.00	0.26 - 5.74	Same as
2009	5	6.30	0.79	0.26 - 1.85	Same as
2010	5	7.17	0.70	0.22 - 1.63	Same as
2011	6	7.90	0.76	0.28 - 1.65	Same as
2012	4	7.24	0.55	0.15 - 1.42	Same as

SELECT SPECIALTY HOSPITAL --- CENTRAL PENNSYLVANIA (CAMP HILL)

NHSN ID: 12147

Hospital type: Long-term acute care hospital

Number of licensed beds (2012): 31

Number of reported Healthcare-Associated Infections:

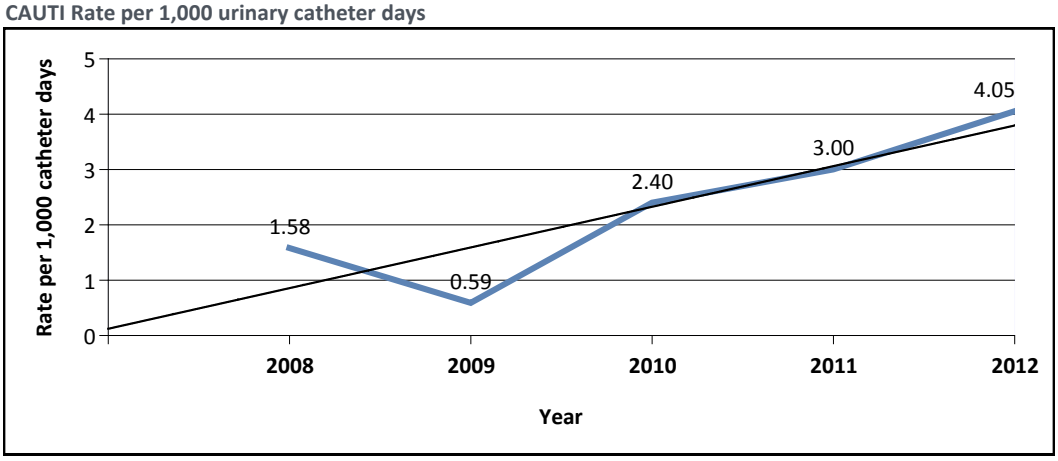
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,851	10	0	5	0	0	0	0	1	4	0	5.19
2009	7,732	3	0	9	0	0	0	0	0	3	0	1.94
2010	7,225	2	0	11	0	0	0	0	0	9	0	3.04
2011	8,609	5	0	9	0	0	0	0	0	13	0	3.14
2012	9,567	7	0	8	1	0	0	0	2	28	0	4.81

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	4	4.98	0.80	0.22 - 2.06	Same as
2009	3	8.00	0.37	0.08 - 1.1	Same as
2010	9	6.02	1.49	0.68 - 2.84	Same as
2011	12	5.67	2.12	1.09 - 3.7	Worse
2012	14	4.94	2.83	1.55 - 4.76	Worse

CAUTI Rate per 1,000 urinary catheter days



Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Long-Term Acute Care

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation

SELECT SPECIALTY HOSPITAL --- CENTRAL PENNSYLVANIA (CAMP HILL)

2008	10	4.72	2.12	0.08 - 3.9	Worse
2009	3	7.52	0.40	0.08 - 1.17	Same as
2010	2	7.39	0.27	0.03 - 0.98	Better
2011	5	7.00	0.71	0.23 - 1.67	Same as
2012	7	6.73	1.04	0.42 - 2.14	Same as

SELECT SPECIALTY HOSPITAL --- DANVILLE

NHSN ID: 12123

Hospital type: Long-term acute care hospital

Number of licensed beds (2012): 30

Number of reported Healthcare-Associated Infections:

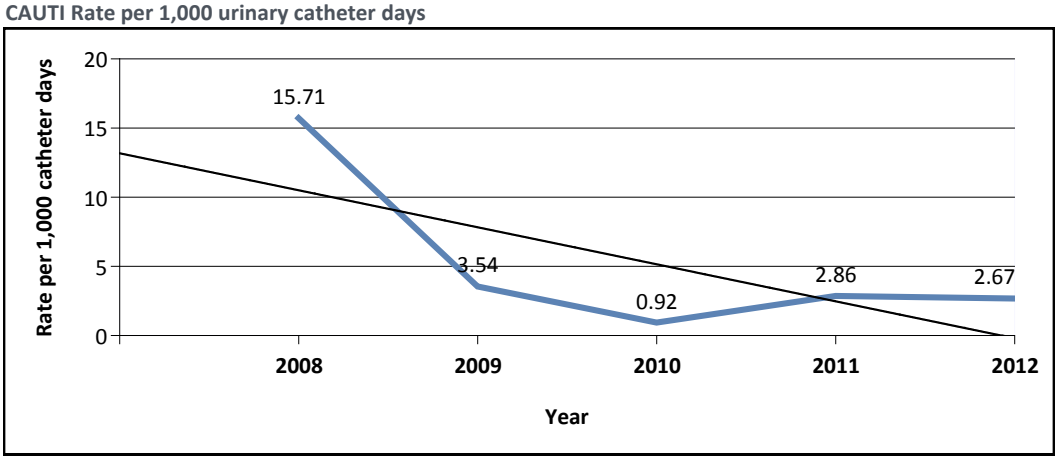
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,071	5	0	20	0	1	0	0	0	15	0	13.35
2009	5,530	1	0	10	0	3	0	0	0	10	0	4.34
2010	5,097	2	0	9	0	2	0	0	0	4	0	3.34
2011	5,168	4	0	11	0	2	0	0	0	4	0	4.06
2012	4,886	1	0	3	0	0	0	0	0	9	0	2.66

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	12	1.73	6.92	3.57 - 12.09	Worse
2009	5	2.26	2.21	0.71 - 5.15	Same as
2010	1	1.78	0.56	0.01 - 3.12	Same as
2011	2	0.83	2.41	0.27 - 8.69	Same as
2012	2	1.03	1.94	0.22 - 7.02	Same as

CAUTI Rate per 1,000 urinary catheter days



Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Long-Term Acute Care

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation

SELECT SPECIALTY HOSPITAL --- DANVILLE

2008	2	2.65	0.76	0 - 2.73	Same as
2009	1	4.23	0.24	0 - 1.31	Same as
2010	2	4.10	0.49	0.05 - 1.76	Same as
2011	4	3.84	1.04	0.28 - 2.67	Same as
2012	1	2.38	0.42	0.01 - 2.34	Same as

SELECT SPECIALTY HOSPITAL --- MCKEESPORT, INC.

NHSN ID: 12271

Hospital type: Long-term acute care hospital

Number of licensed beds (2012): 30

Number of reported Healthcare-Associated Infections:

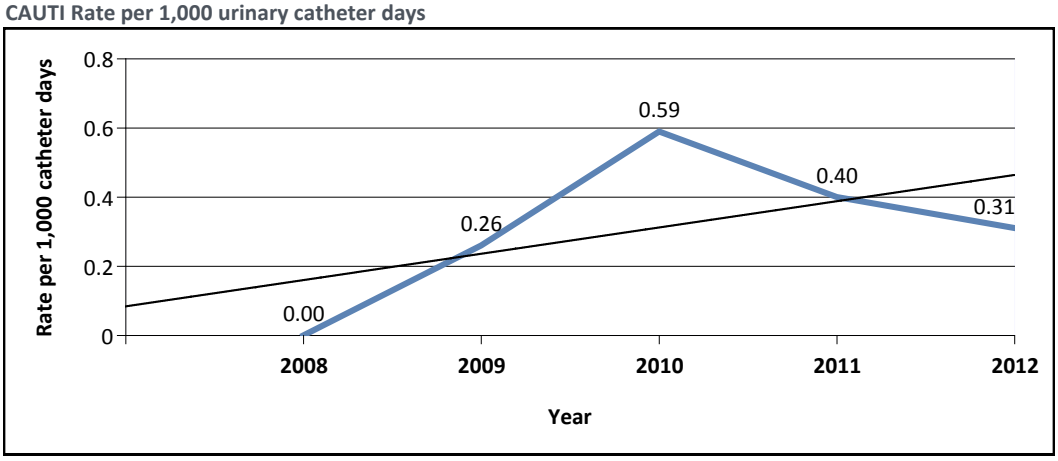
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,249	1	0	0	0	0	0	0	0	0	0	0.31
2009	6,866	1	0	0	0	0	0	0	0	1	0	0.29
2010	7,001	10	0	0	0	1	0	0	0	2	0	1.86
2011	7,857	3	0	1	1	0	0	0	1	1	0	0.89
2012	7,993	6	0	10	0	1	0	0	1	4	0	2.75

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	4.15	0.00	0 - 0.88	Better
2009	1	5.99	0.17	0 - 0.93	Better
2010	2	5.43	0.37	0.04 - 1.33	Same as
2011	1	3.37	0.30	0 - 1.65	Same as
2012	1	4.63	0.22	0 - 1.2	Same as

CAUTI Rate per 1,000 urinary catheter days



Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Long-Term Acute Care

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation

SELECT SPECIALTY HOSPITAL --- MCKEESPORT, INC.

2008	1	4.03	0.25	0 - 1.38	Same as
2009	1	5.96	0.17	0 - 0.93	Better
2010	10	6.08	1.64	0.79 - 3.02	Same as
2011	3	5.98	0.50	0.1 - 1.47	Same as
2012	4	5.42	0.74	0.2 - 1.89	Same as

SELECT SPECIALTY HOSPITAL --- PITTSBURGH/UPMC

NHSN ID: 12009

Hospital type: Long-term acute care hospital

Number of licensed beds (2012): 32

Number of reported Healthcare-Associated Infections:

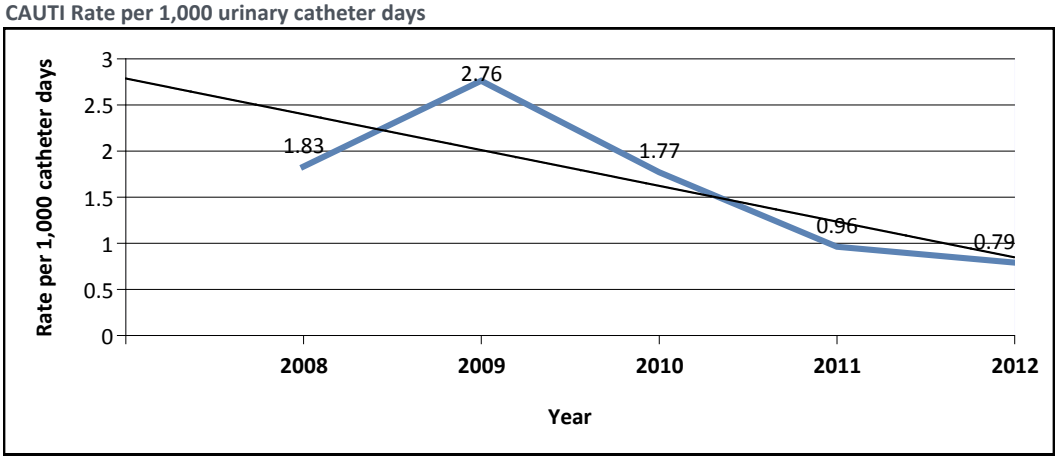
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,142	12	0	1	1	3	0	0	1	7	0	6.04
2009	8,254	17	0	15	2	4	0	0	1	17	1	6.91
2010	7,656	10	0	17	1	4	0	0	0	9	0	5.36
2011	8,138	12	0	17	1	5	0	0	2	6	0	5.28
2012	8,770	6	0	7	0	4	0	0	1	8	0	2.96

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	5	5.38	0.93	0.3 - 2.17	Same as
2009	15	8.60	1.74	0.98 - 2.88	Same as
2010	9	8.11	1.11	0.51 - 2.11	Same as
2011	5	7.76	0.64	0.21 - 1.5	Same as
2012	4	7.35	0.54	0.15 - 1.39	Same as

CAUTI Rate per 1,000 urinary catheter days



Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Long-Term Acute Care

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation

SELECT SPECIALTY HOSPITAL --- PITTSBURGH/UPMC

2008	11	4.34	2.54	1.35 - 4.54	Worse
2009	17	7.35	2.31	1.35 - 3.7	Worse
2010	9	7.47	1.21	0.55 - 2.29	Same as
2011	12	6.75	1.78	0.92 - 3.1	Same as
2012	6	6.64	0.90	0.33 - 1.97	Same as

SELECT SPECIALTY HOSPITAL LAUREL HIGHLANDS, INC.

NHSN ID: 12108

Hospital type: Long-term acute care hospital

Number of licensed beds (2012): 40

Number of reported Healthcare-Associated Infections:

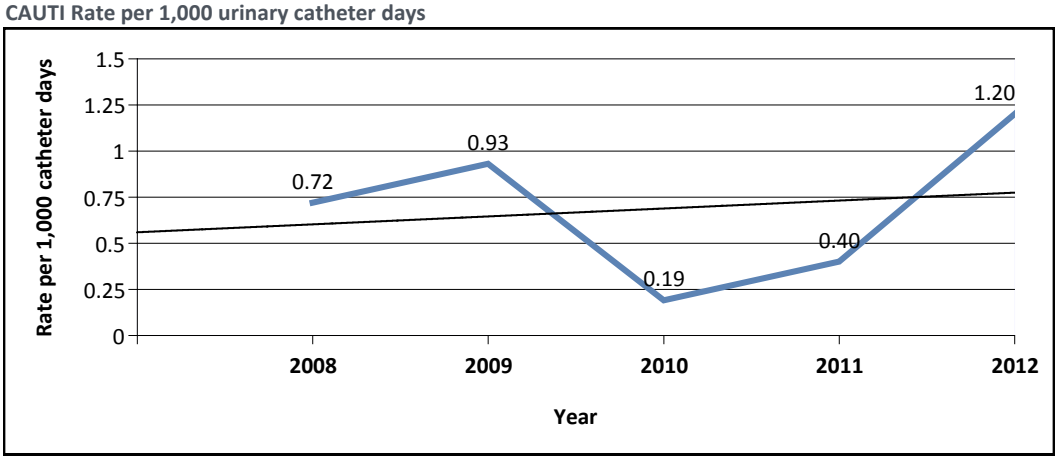
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,353	10	0	7	0	0	0	0	1	5	0	5.28
2009	9,448	9	0	13	2	1	0	0	3	5	0	3.49
2010	9,020	4	0	12	3	0	0	0	0	1	0	2.22
2011	7,750	2	0	6	0	0	0	0	1	3	0	1.55
2012	7,337	7	0	8	1	0	0	0	0	6	0	3.00

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	5.47	0.37	0.04 - 1.32	Same as
2009	5	8.49	0.59	0.19 - 1.37	Same as
2010	1	8.42	0.12	0 - 0.66	Better
2011	2	7.39	0.27	0.03 - 0.98	Better
2012	5	6.09	0.82	0.26 - 1.92	Same as

CAUTI Rate per 1,000 urinary catheter days



Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Long-Term Acute Care

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation

SELECT SPECIALTY HOSPITAL LAUREL HIGHLANDS, INC.

2008	10	4.39	2.28	0.36 - 4.19	Worse
2009	7	7.75	0.90	0.36 - 1.86	Same as
2010	3	8.18	0.37	0.07 - 1.07	Same as
2011	2	6.31	0.32	0.04 - 1.14	Same as
2012	7	5.46	1.28	0.51 - 2.64	Same as

SHARON REGIONAL HEALTH SYSTEM

NHSN ID: 12250

Hospital type: Acute care general hospital

Number of licensed beds (2012): 220

Number of reported Healthcare-Associated Infections:

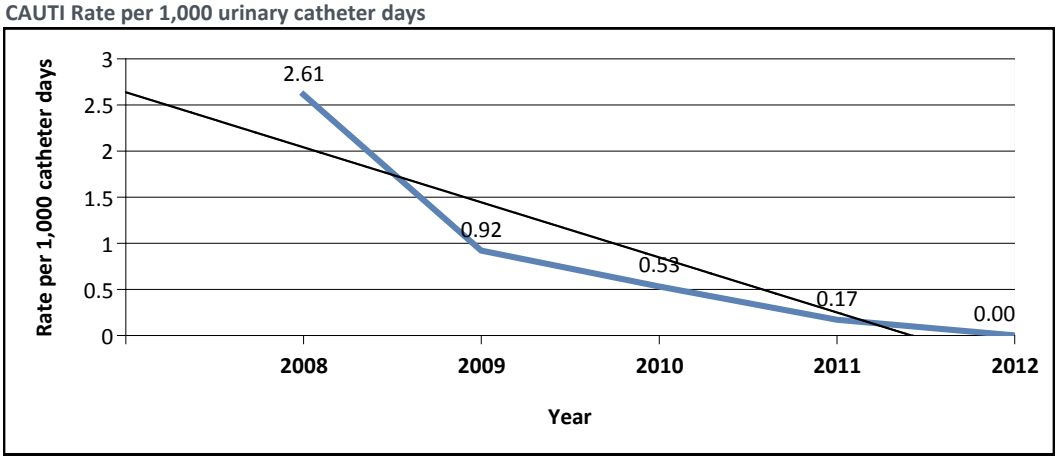
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	19,913	3	1	2	1	11	0	9	0	8	0	1.76
2009	46,567	5	1	21	3	8	0	16	6	12	0	1.55
2010	35,112	6	1	9	2	6	0	8	5	11	0	1.37
2011	37,998	2	0	30	1	3	0	12	0	6	0	1.42
2012	33,922	2	0	4	0	3	0	9	1	3	0	0.65

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	7	6.65	1.05	0.42 - 2.17	Same as
2009	6	10.51	0.57	0.21 - 1.24	Same as
2010	3	9.39	0.32	0.06 - 0.93	Better
2011	1	6.92	0.14	0 - 0.8	Better
2012	0	7.83	0.00	0 - 0.47	Better

CAUTI Rate per 1,000 urinary catheter days



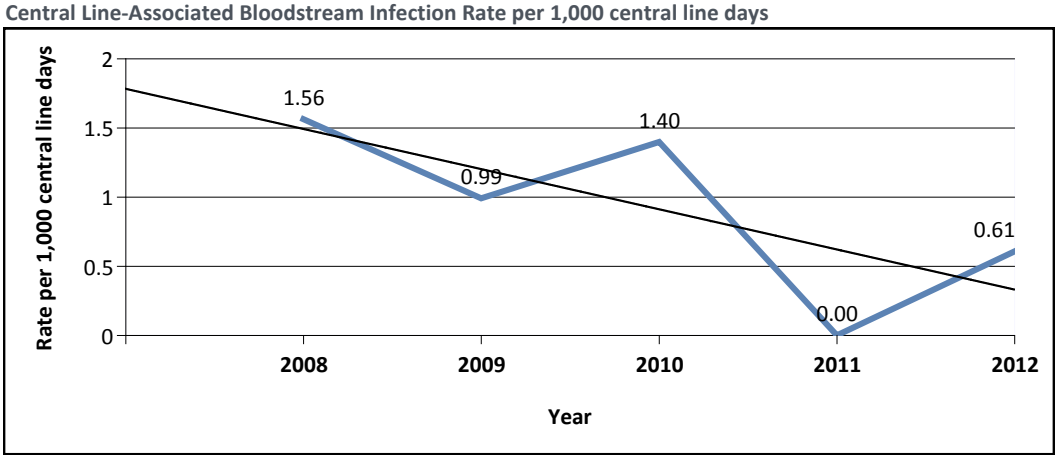
SHARON REGIONAL HEALTH SYSTEM

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	2.72	1.10	0.22 - 3.22	Same as
2009	4	3.83	1.05	0.28 - 2.68	Same as
2010	5	2.59	1.93	0.62 - 4.51	Same as
2011	0	2.07	0.00	0 - 1.78	Same as
2012	2	2.21	0.90	0.1 - 3.27	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



SHRINERS HOSPITAL FOR CHILDREN --- PHILADELPHIA

NHSN ID: 12244

Hospital type: Children's Hospital

Number of licensed beds (2012): 53

Number of reported Healthcare-Associated Infections:

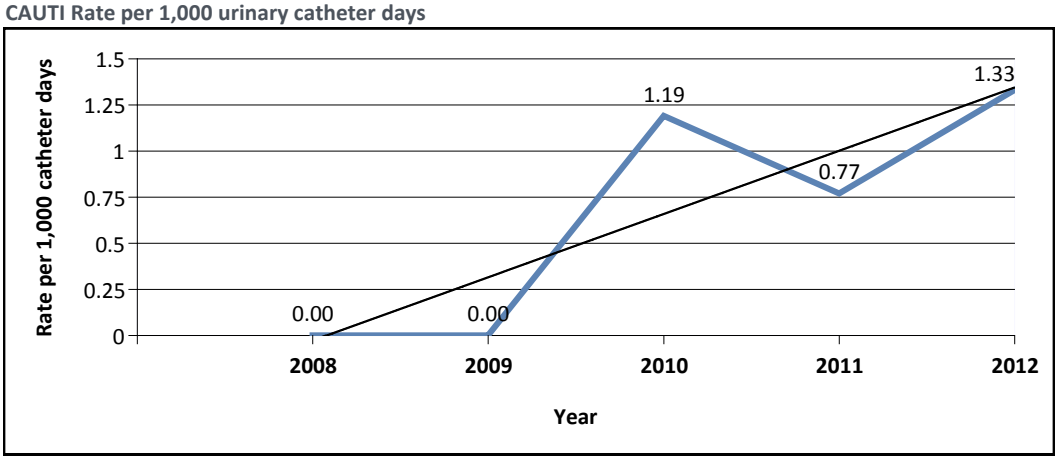
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,923	0	0	1	0	0	0	5	0	1	0	1.42
2009	5,946	0	0	1	0	0	0	2	0	3	0	1.01
2010	4,863	0	0	1	1	0	0	2	0	2	0	1.23
2011	4,514	0	0	0	0	0	0	6	0	4	0	2.22
2012	4,835	1	0	3	0	0	0	3	0	5	0	2.48

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	1.64	0.00	0 - 2.23	Same as
2009	0	1.96	0.00	0 - 1.87	Same as
2010	1	1.39	0.72	0.01 - 4	Same as
2011	1	1.73	0.58	0.01 - 3.22	Same as
2012	2	2.14	0.94	0.11 - 3.38	Same as

CAUTI Rate per 1,000 urinary catheter days



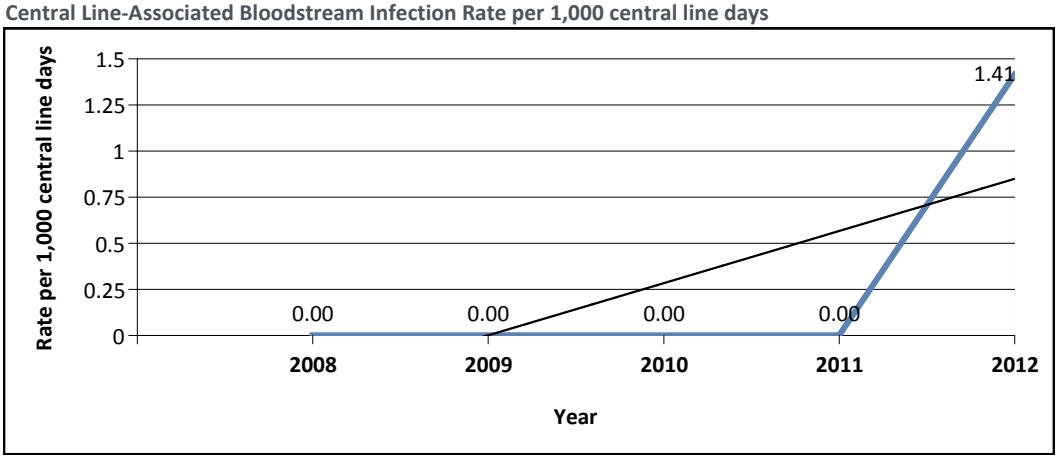
SHRINERS HOSPITAL FOR CHILDREN --- PHILADELPHIA

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.97	0.00	0 - 3.78	Same as
2009	0	0.89	0.00	0 - 4.13	Same as
2010	0	0.46	0.00	0 - 8	Same as
2011	0	0.46	0.00	0 - 7.94	Same as
2012	1	0.51	1.98	0.03 - 11.01	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



SOLDIERS & SAILORS MEM HOSPITAL

NHSN ID: 11688

Hospital type: Acute care general hospital

Number of licensed beds (2012): 83

Number of reported Healthcare-Associated Infections:

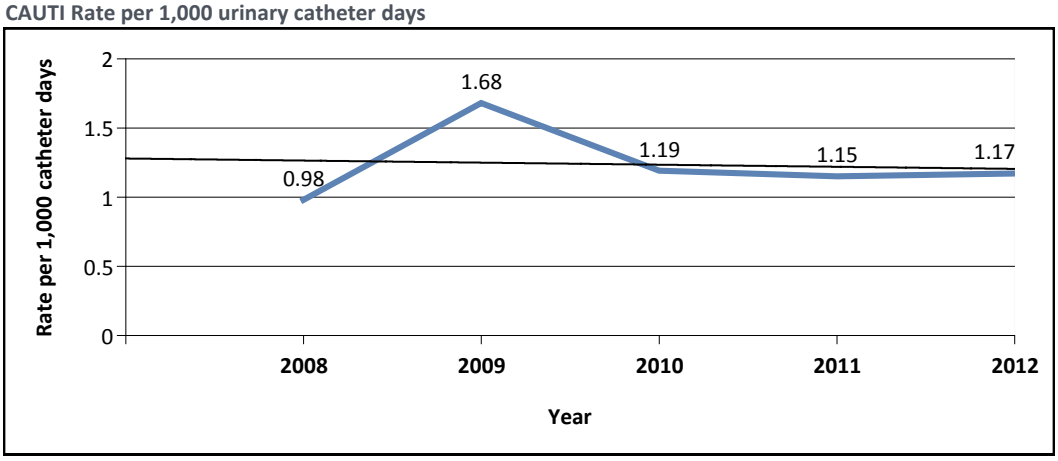
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	5,953	0	0	0	0	3	0	5	0	1	0	1.51
2009	12,976	1	0	5	0	4	0	6	0	4	0	1.54
2010	12,009	0	0	6	0	2	1	5	1	2	0	1.42
2011	11,733	1	0	3	0	7	0	10	0	3	1	2.13
2012	11,622	3	0	0	0	2	1	11	1	4	0	1.89

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	2.44	0.41	0.01 - 2.28	Same as
2009	3	2.90	1.04	0.21 - 3.03	Same as
2010	2	2.79	0.72	0.08 - 2.58	Same as
2011	2	2.10	0.95	0.11 - 3.44	Same as
2012	2	3.14	0.64	0.07 - 2.3	Same as

CAUTI Rate per 1,000 urinary catheter days



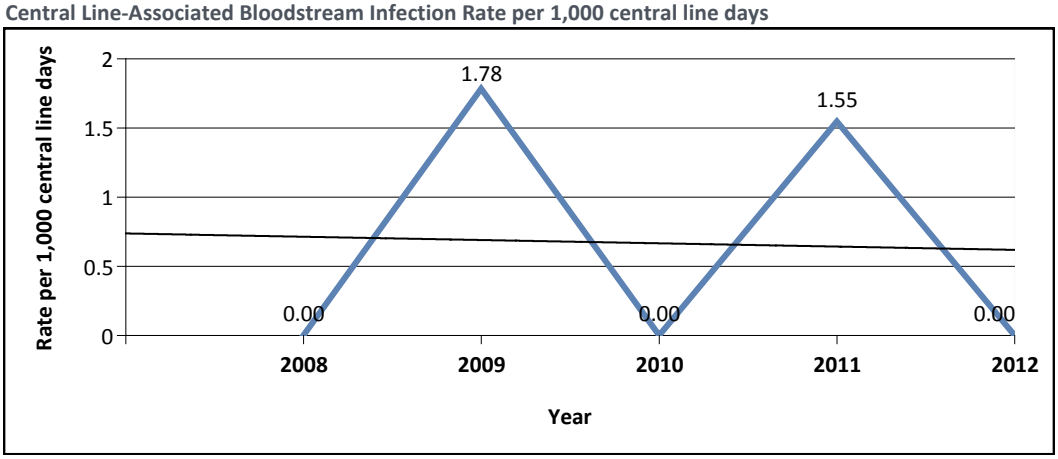
SOLDIERS & SAILORS MEM HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.41	0.00	0 - 8.94	Same as
2009	1	0.64	1.55	0.02 - 8.63	Same as
2010	0	0.51	0.00	0 - 7.18	Same as
2011	1	0.44	2.28	0.03 - 12.68	Same as
2012	0	0.31	0.00	0 - 11.72	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



SOMERSET HOSPITAL

NHSN ID: 12282

Hospital type: Acute care general hospital

Number of licensed beds (2012): 111

Number of reported Healthcare-Associated Infections:

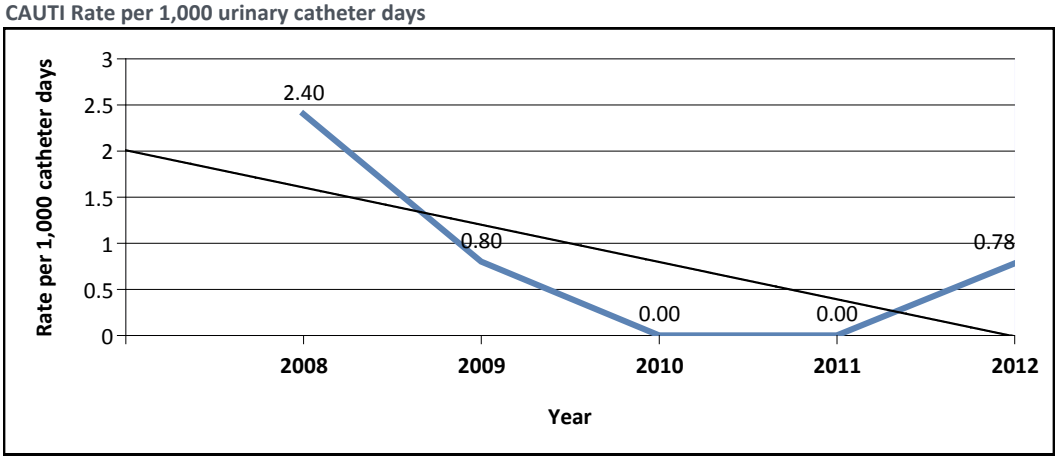
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	10,478	2	0	6	0	3	0	2	0	7	0	1.91
2009	22,371	5	0	3	0	1	0	3	1	5	0	0.80
2010	19,768	0	0	1	0	2	0	3	0	0	0	0.30
2011	19,366	2	0	1	0	1	0	3	0	1	0	0.41
2012	17,538	0	1	3	0	3	0	4	3	5	0	1.08

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	6	5.71	1.05	0.38 - 2.29	Same as
2009	4	8.04	0.50	0.13 - 1.27	Same as
2010	0	6.28	0.00	0 - 0.58	Better
2011	0	5.32	0.00	0 - 0.69	Better
2012	3	5.35	0.56	0.11 - 1.64	Same as

CAUTI Rate per 1,000 urinary catheter days



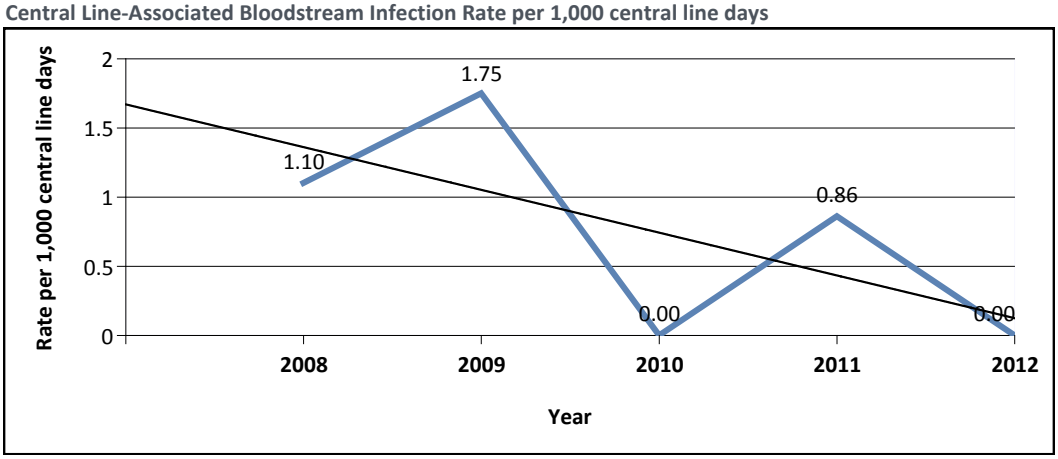
SOMERSET HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	1.28	0.78	0.01 - 4.34	Same as
2009	4	2.18	1.84	0.49 - 4.7	Same as
2010	0	1.62	0.00	0 - 2.27	Same as
2011	2	1.38	1.44	0.16 - 5.21	Same as
2012	0	1.74	0.00	0 - 2.1	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



SOUTHWEST REGIONAL MEDICAL CENTER

NHSN ID: 11942

Hospital type: Acute care general hospital

Number of licensed beds (2012): 77

Number of reported Healthcare-Associated Infections:

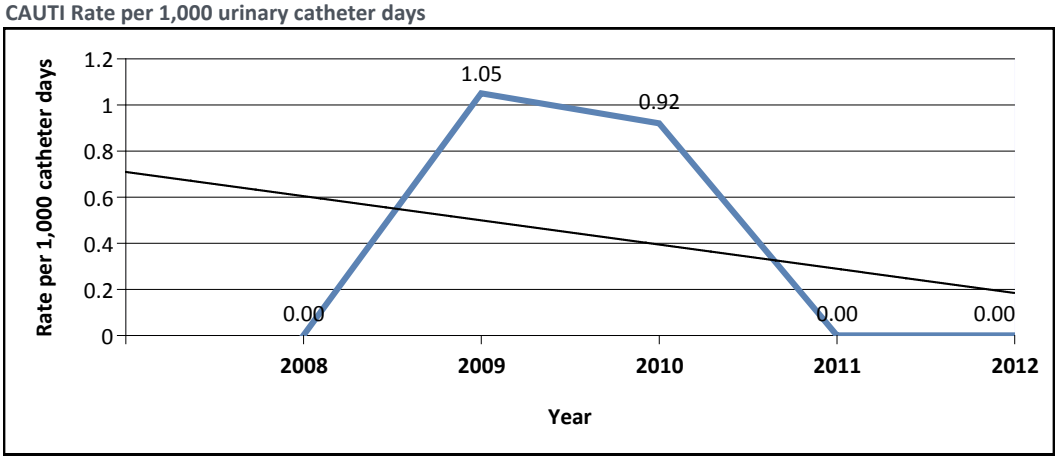
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	7,428	0	0	0	0	0	0	0	0	1	0	0.13
2009	15,069	2	0	0	0	0	0	1	0	3	0	0.40
2010	17,904	1	0	0	0	0	0	2	0	2	0	0.28
2011	16,853	1	0	0	0	0	0	4	0	0	0	0.30
2012	14,297	0	0	0	0	0	0	0	0	3	0	0.21

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	3.07	0.00	0 - 1.2	Same as
2009	2	3.09	0.65	0.07 - 2.34	Same as
2010	2	3.62	0.55	0.06 - 2	Same as
2011	0	2.25	0.00	0 - 1.63	Same as
2012	0	2.41	0.00	0 - 1.52	Same as

CAUTI Rate per 1,000 urinary catheter days



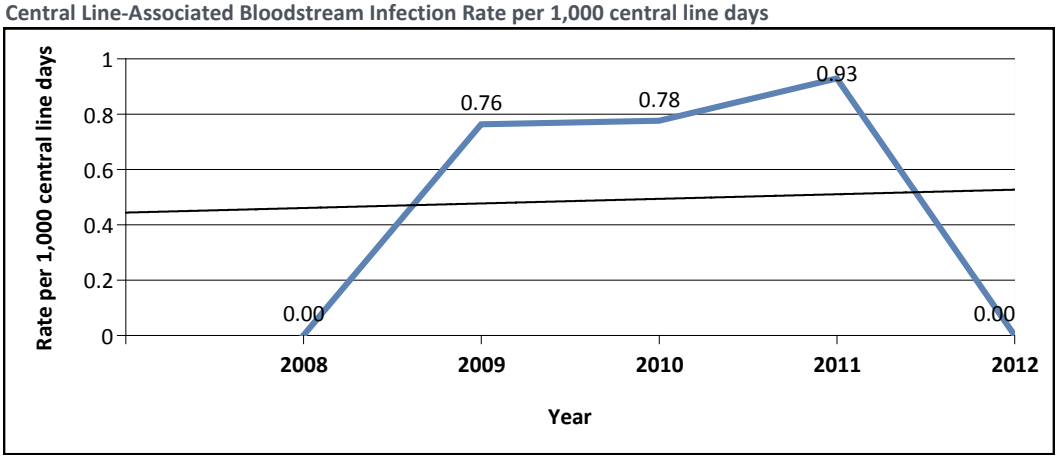
SOUTHWEST REGIONAL MEDICAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.81	0.00	0 - 4.53	Same as
2009	1	1.30	0.77	0.01 - 4.29	Same as
2010	1	0.98	1.02	0.01 - 5.68	Same as
2011	1	0.71	1.40	0.02 - 7.8	Same as
2012	0	0.51	0.00	0 - 7.19	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



SOUTHWOOD PSYCHIATRIC HOSPITAL

NHSN ID: 12453

Hospital type: Psychiatric hospital

Number of licensed beds (2012): 33

Number of reported Healthcare-Associated Infections:

Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008												
2009	8,353	0	1	0	0	0	0	0	0	0	0	0.12
2010	9,686	0	6	0	0	0	0	0	7	0	0	1.34
2011	11,388	0	20	0	1	0	0	0	8	1	0	2.63
2012	13,263	0	20	0	0	0	1	0	3	1	0	1.88

SPECIAL CARE HOSPITAL

NHSN ID: 12604

Hospital type: Long-term acute care hospital

Number of licensed beds (2012): 67

Number of reported Healthcare-Associated Infections:

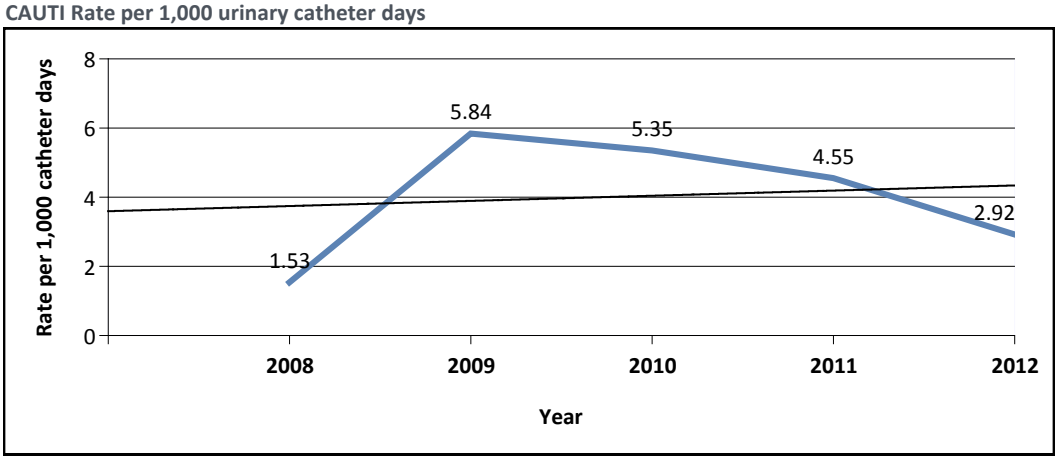
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	8,217	1	4	3	11	1	0	0	2	8	0	3.65
2009	16,338	5	2	13	25	4	1	0	1	33	0	5.14
2010	16,248	3	0	8	36	1	0	0	0	28	0	4.68
2011	14,958	1	0	11	14	1	0	0	0	30	0	3.81
2012	13,572	6	0	5	3	3	0	0	2	19	0	2.80

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	4	5.71	0.70	0.19 - 1.79	Same as
2009	26	7.13	3.65	2.38 - 5.34	Worse
2010	26	7.92	3.28	2.14 - 4.81	Worse
2011	24	7.20	3.33	2.14 - 4.96	Worse
2012	15	7.36	2.04	1.14 - 3.36	Worse

CAUTI Rate per 1,000 urinary catheter days



Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Long-Term Acute Care

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation

SPECIAL CARE HOSPITAL

2008	1	4.65	0.21	0.17 - 1.2	Same as
2009	5	9.31	0.54	0.17 - 1.25	Same as
2010	2	8.28	0.24	0.03 - 0.87	Better
2011	1	9.70	0.10	0 - 0.57	Better
2012	5	7.22	0.69	0.22 - 1.62	Same as

ST. CHRISTOPHERS HOSPITAL FOR CHILDREN

NHSN ID: 12290

Hospital type: Children's Hospital

Number of licensed beds (2012): 189

Number of reported Healthcare-Associated Infections:

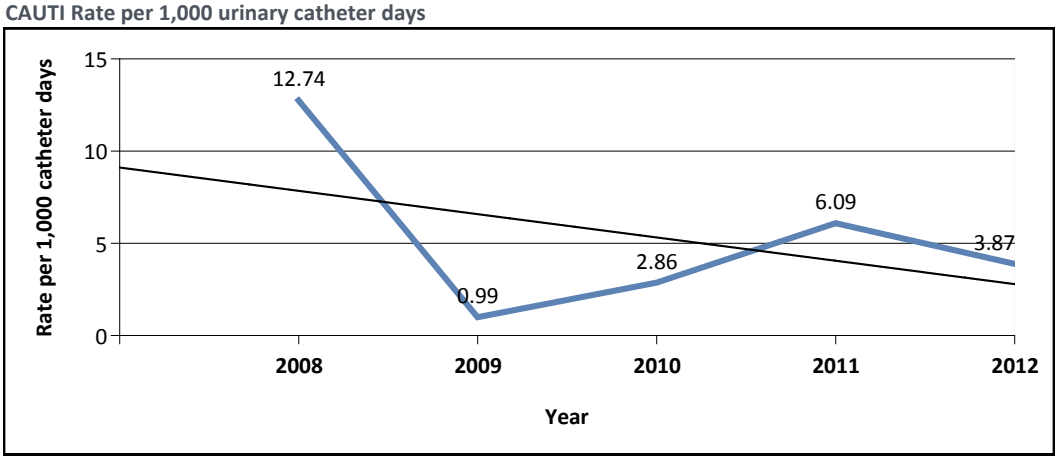
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	23,619	22	11	6	11	1	0	11	3	17	2	3.56
2009	49,106	29	27	8	11	4	0	15	2	20	0	2.36
2010	41,556	21	12	7	12	1	0	19	6	11	1	2.17
2011	46,423	27	17	7	15	3	0	16	8	12	2	2.30
2012	47,658	21	20	8	17	3	0	15	6	8	3	2.12

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	8	1.97	4.06	1.75 - 7.99	Worse
2009	1	2.32	0.43	0.01 - 2.4	Same as
2010	3	1.94	1.55	0.31 - 4.53	Same as
2011	7	1.42	4.93	1.97 - 10.15	Worse
2012	4	1.74	2.31	0.62 - 5.9	Same as

CAUTI Rate per 1,000 urinary catheter days



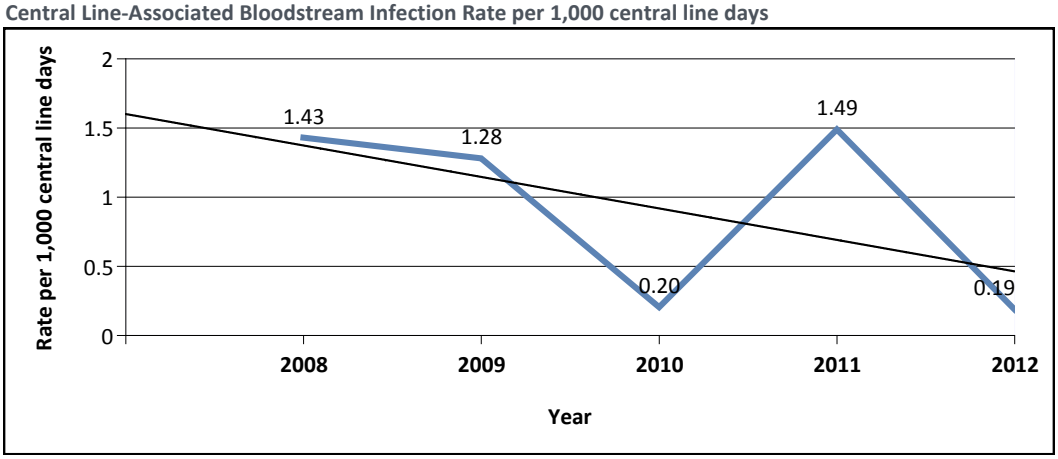
ST. CHRISTOPHERS HOSPITAL FOR CHILDREN

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	4	4.09	0.98	0.26 - 2.5	Same as
2009	5	5.29	0.95	0.3 - 2.21	Same as
2010	1	4.13	0.24	0 - 1.35	Same as
2011	7	4.21	1.66	0.67 - 3.43	Same as
2012	1	4.22	0.24	0 - 1.32	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	7.09	0.42	0.16 - 1.24	Same as
2009	8	6.64	1.20	0.52 - 2.37	Same as
2010	2	8.58	0.23	0.03 - 0.84	Better
2011	3	8.14	0.37	0.07 - 1.08	Same as
2012	4	5.72	0.70	0.19 - 1.79	Same as

Standardized Infection Ratio - Specialty Care Area

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	1.39	0.00	0 - 2.63	Same as
2009	2	4.88	0.41	0.05 - 1.48	Same as
2010	2	3.25	0.62	0.07 - 2.22	Same as
2011	0	2.00	0.00	0 - 1.83	Same as
2012	1	2.18	0.46	0.01 - 2.55	Same as

ST. CLAIR MEMORIAL HOSPITAL

NHSN ID: 10561

Hospital type: Acute care general hospital

Number of licensed beds (2012): 328

Number of reported Healthcare-Associated Infections:

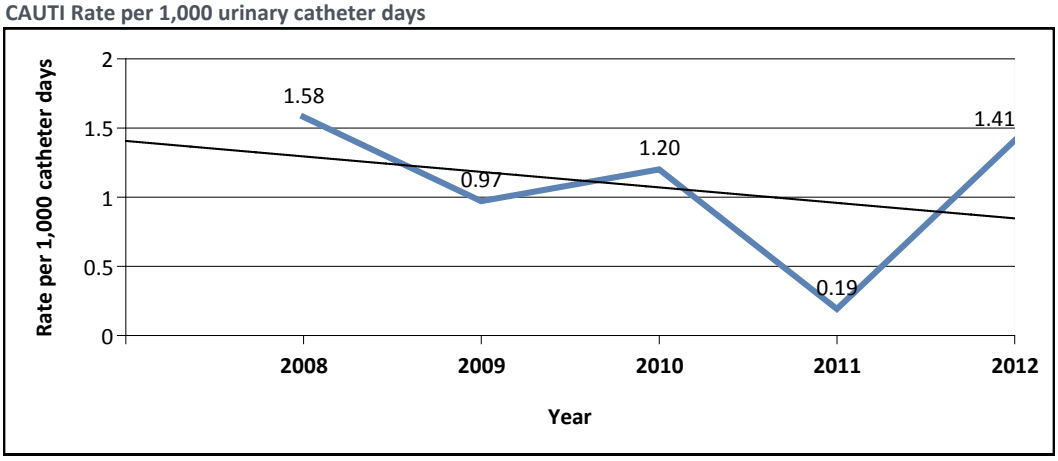
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	38,756	10	1	13	0	11	0	41	5	11	0	2.37
2009	83,364	4	0	39	4	12	0	82	6	21	5	2.08
2010	86,799	5	3	65	2	10	1	77	3	17	0	2.11
2011	85,606	2	1	81	1	15	0	66	4	8	2	2.10
2012	83,473	4	0	77	1	5	1	74	3	20	0	2.22

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	9	13.97	0.64	0.29 - 1.22	Same as
2009	10	22.90	0.44	0.21 - 0.8	Better
2010	12	17.85	0.67	0.35 - 1.17	Same as
2011	2	16.12	0.12	0.01 - 0.45	Better
2012	14	18.04	0.78	0.42 - 1.3	Same as

CAUTI Rate per 1,000 urinary catheter days



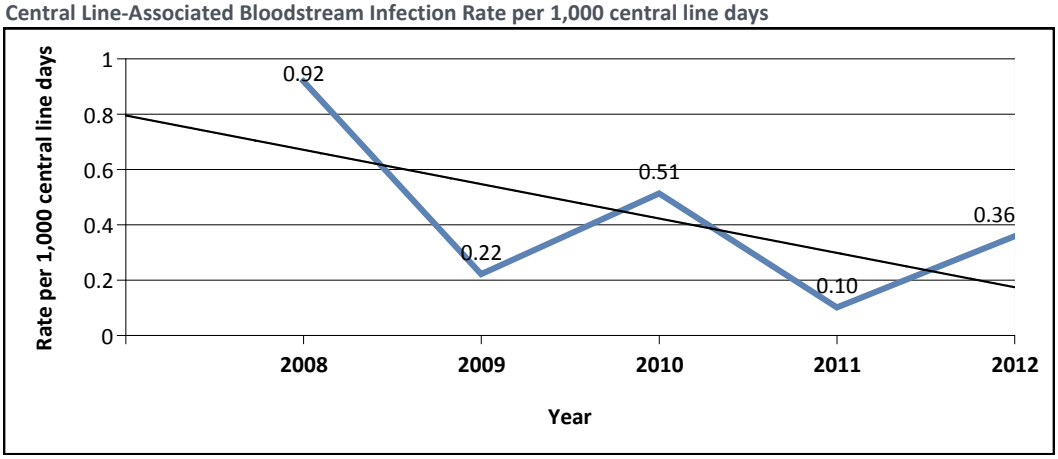
ST. CLAIR MEMORIAL HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	4	6.23	0.64	0.17 - 1.64	Same as
2009	2	12.25	0.16	0.02 - 0.59	Better
2010	5	8.71	0.57	0.19 - 1.34	Same as
2011	1	9.16	0.11	0 - 0.61	Better
2012	3	6.16	0.49	0.1 - 1.42	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



ST. JOHN VIANNEY HOSPITAL

NHSN ID: 12548

Hospital type: Psychiatric hospital

Number of licensed beds (2012): 50

Number of reported Healthcare-Associated Infections:

Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008		0	1	0	0	0	0	0	0	0	0	
2009	12,709	0	0	0	0	0	0	0	1	0	0	0.08
2010	12,687	0	0	0	0	0	0	0	1	0	0	0.08
2011	14,231	0	0	4	0	0	0	0	4	0	0	0.56
2012	11,673	0	1	0	0	0	0	0	2	0	0	0.26

ST. JOSEPH MEDICAL CENTER

NHSN ID: 11961

Hospital type: Acute care general hospital

Number of licensed beds (2012): 204

Number of reported Healthcare-Associated Infections:

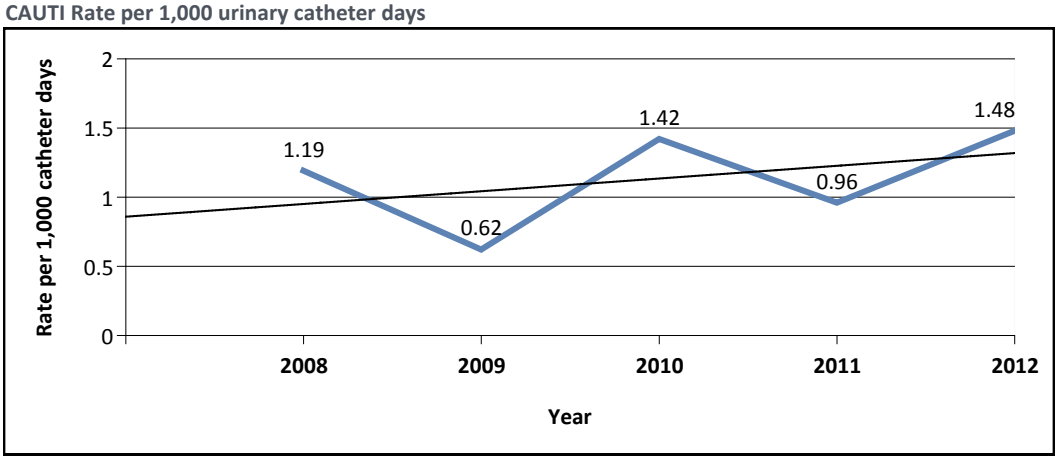
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	22,430	5	0	0	0	3	0	8	0	6	0	0.98
2009	45,015	4	0	0	1	1	0	10	0	6	0	0.49
2010	38,065	7	0	2	0	2	0	19	1	14	0	1.18
2011	37,733	10	0	2	1	4	0	28	0	16	0	1.62
2012	37,252	11	0	10	1	7	0	24	3	14	0	1.88

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	5	9.92	0.50	0.16 - 1.18	Same as
2009	5	17.74	0.28	0.09 - 0.66	Better
2010	9	11.18	0.80	0.37 - 1.53	Same as
2011	6	10.15	0.59	0.22 - 1.29	Same as
2012	9	11.25	0.80	0.37 - 1.52	Same as

CAUTI Rate per 1,000 urinary catheter days



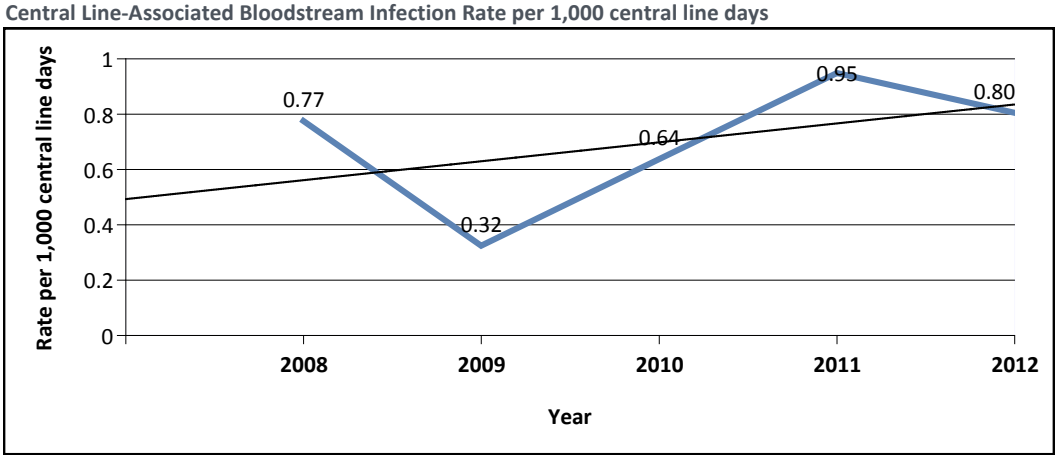
ST. JOSEPH MEDICAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	5.68	0.53	0.11 - 1.54	Same as
2009	3	10.61	0.28	0.06 - 0.83	Better
2010	6	7.45	0.81	0.29 - 1.75	Same as
2011	9	7.71	1.17	0.53 - 2.22	Same as
2012	7	7.32	0.96	0.38 - 1.97	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.13	0.00	0 - 29.2	Same as
2009	0	0.20	0.00	0 - 18.5	Same as
2010	0	0.31	0.00	0 - 12.01	Same as
2011	0	0.12	0.00	0 - 31.34	Same as
2012	0	0.15	0.00	0 - 24.15	Same as

ST. JOSEPHS HOSPITAL

NHSN ID: 12438

Hospital type: Acute care general hospital

Number of licensed beds (2012): 197

Number of reported Healthcare-Associated Infections:

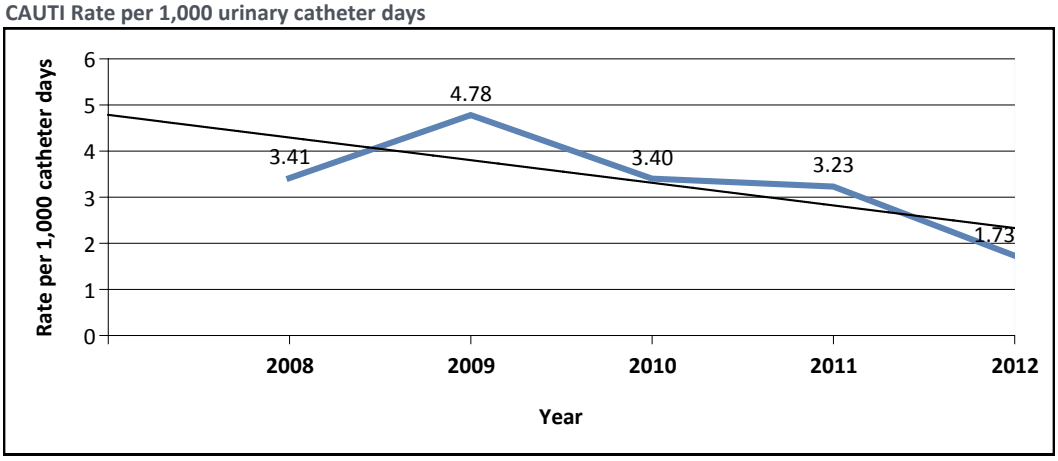
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	10,585	25	0	0	0	9	0	0	0	16	0	4.72
2009	21,478	28	0	4	0	1	0	0	2	42	0	3.59
2010	22,626	27	0	8	0	5	0	2	0	22	0	2.83
2011	23,411	20	0	3	0	7	0	1	1	25	0	2.43
2012	31,637	6	0	4	1	6	0	0	0	11	0	0.89

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	14	8.74	1.60	0.87 - 2.69	Same as
2009	41	18.76	2.19	1.57 - 2.96	Worse
2010	21	10.80	1.95	1.2 - 2.97	Worse
2011	13	6.56	1.98	1.05 - 3.39	Worse
2012	7	7.40	0.95	0.38 - 1.95	Same as

CAUTI Rate per 1,000 urinary catheter days



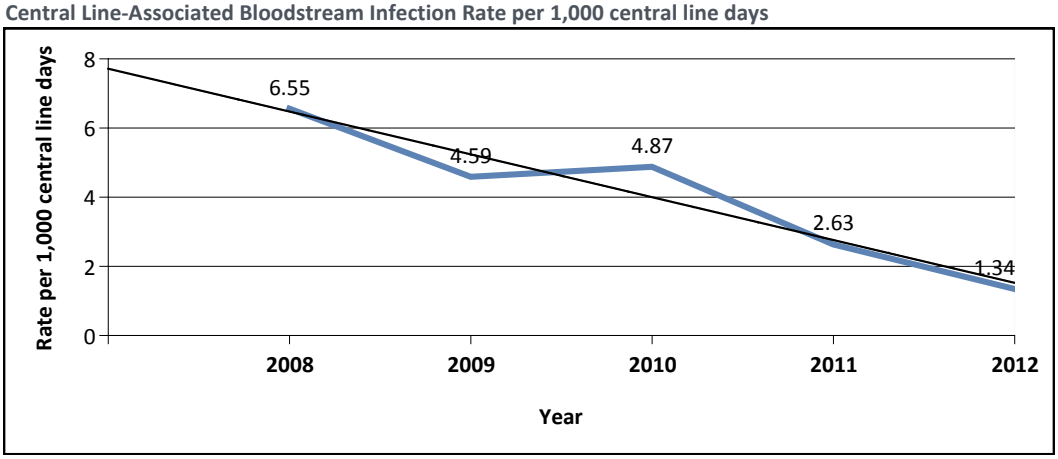
ST. JOSEPHS HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	22	5.10	4.32	2.7 - 6.54	Worse
2009	28	6.73	4.16	2.77 - 6.02	Worse
2010	26	4.27	6.09	3.98 - 8.92	Worse
2011	16	4.93	3.24	1.85 - 5.27	Worse
2012	6	3.48	1.73	0.63 - 3.76	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



ST. LUKES HOSPITAL ANDERSON CAMPUS

NHSN ID: 21487

Hospital type: Acute care general hospital

Number of licensed beds (2012): 72

Number of reported Healthcare-Associated Infections:

Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008												
2009												
2010												
2011												
2012	16,294	6	0	9	1	2	0	4	4	8	0	2.09

ST. LUKES HOSPITAL BETHLEHEM

NHSN ID: 11718

Hospital type: Acute care general hospital

Number of licensed beds (2012): 601

Number of reported Healthcare-Associated Infections:

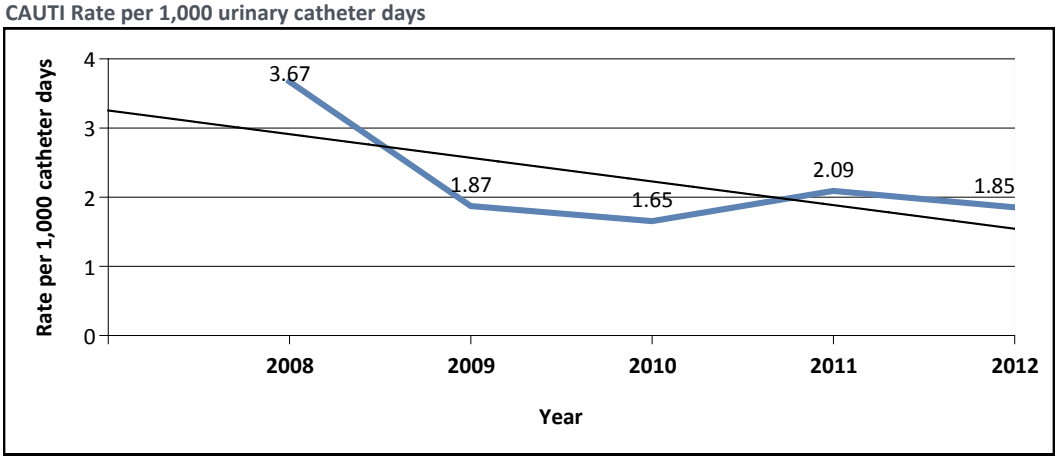
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	71,870	24	12	31	15	11	0	35	3	107	1	3.33
2009	158,307	60	9	15	37	39	1	79	10	117	3	2.34
2010	146,029	54	9	56	59	49	3	91	18	89	4	2.96
2011	142,433	38	10	75	41	36	1	105	9	104	6	2.98
2012	134,196	39	21	11	49	26	0	81	14	66	7	2.34

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	76	46.01	1.65	1.3 - 2.07	Worse
2009	72	85.07	0.85	0.66 - 1.07	Same as
2010	56	59.65	0.94	0.71 - 1.22	Same as
2011	62	49.88	1.24	0.95 - 1.59	Same as
2012	42	41.95	1.00	0.72 - 1.35	Same as

CAUTI Rate per 1,000 urinary catheter days



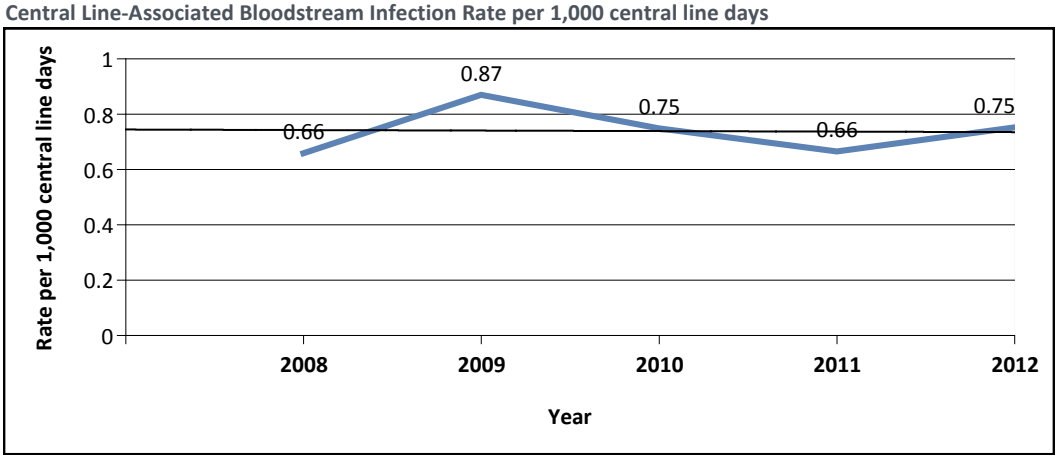
ST. LUKES HOSPITAL BETHLEHEM

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	13	29.74	0.44	0.23 - 0.75	Better
2009	33	43.33	0.76	0.52 - 1.07	Same as
2010	24	25.90	0.93	0.59 - 1.38	Same as
2011	20	25.16	0.79	0.49 - 1.23	Same as
2012	16	16.94	0.94	0.54 - 1.53	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	5	0.71	7.05	0.06 - 16.44	Same as
2009	4	3.15	1.27	0.34 - 3.25	Same as
2010	2	1.13	1.78	0.2 - 6.42	Same as
2011	0	1.18	0.00	0 - 3.1	Same as
2012	2	1.33	1.50	0.17 - 5.42	Same as

ST. LUKES MINERS MEMORIAL HOSPITAL

NHSN ID: 11784

Hospital type: Acute care general hospital

Number of licensed beds (2012): 44

Number of reported Healthcare-Associated Infections:

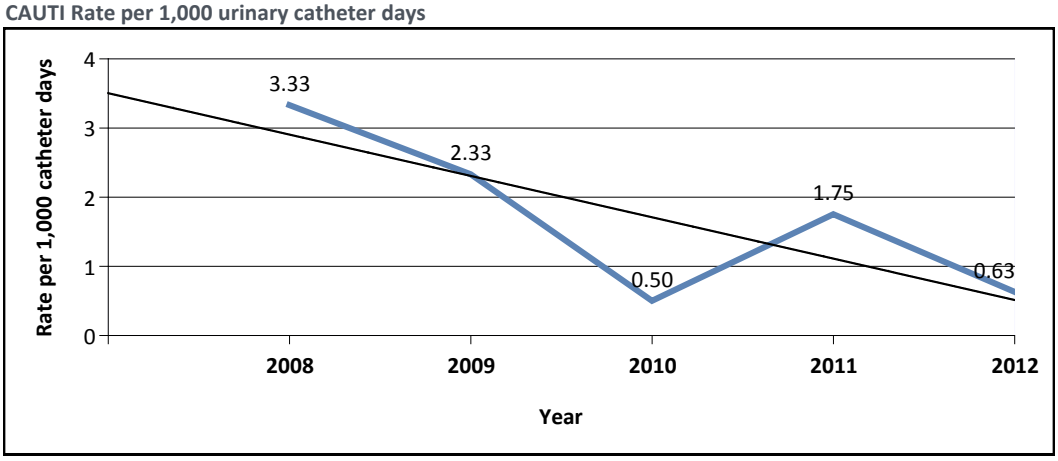
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,488	0	0	0	0	0	0	2	0	5	0	1.56
2009	8,567	0	1	3	0	1	0	11	0	7	0	2.68
2010	6,549	0	1	4	0	0	0	2	0	2	0	1.37
2011	6,390	0	0	0	0	0	0	2	0	3	0	0.78
2012	7,014	1	0	1	0	1	0	5	2	1	0	1.57

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	4	2.70	1.48	0.4 - 3.79	Same as
2009	6	4.12	1.46	0.53 - 3.17	Same as
2010	1	3.24	0.31	0 - 1.72	Same as
2011	3	2.25	1.33	0.27 - 3.9	Same as
2012	1	2.22	0.45	0.01 - 2.5	Same as

CAUTI Rate per 1,000 urinary catheter days



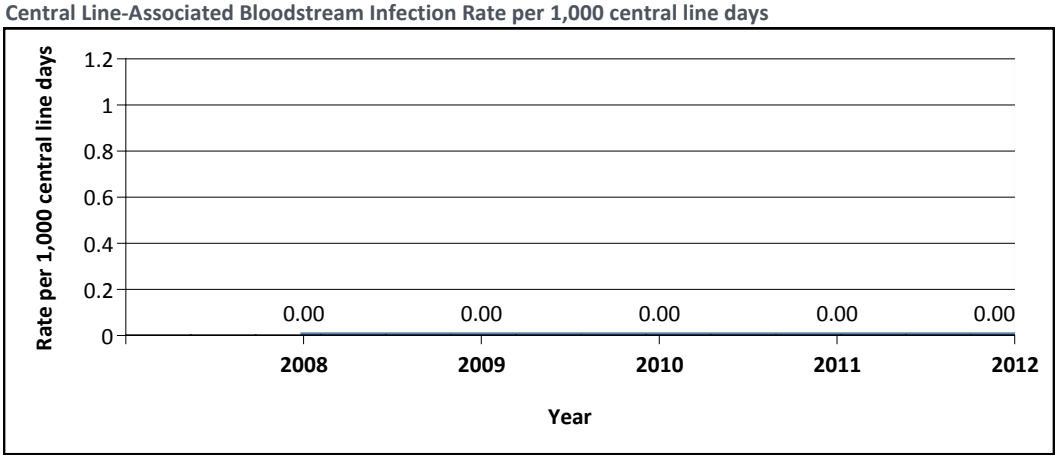
ST. LUKES MINERS MEMORIAL HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.13	0.00	0 - 28.39	Same as
2009	0	0.23	0.00	0 - 16.11	Same as
2010	0	0.15	0.00	0 - 23.82	Same as
2011	0	0.18	0.00	0 - 20.36	Same as
2012	0	0.17	0.00	0 - 21.46	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



ST. LUKES QUAKERTOWN HOSPITAL

NHSN ID: 11711

Hospital type: Acute care general hospital

Number of licensed beds (2012): 62

Number of reported Healthcare-Associated Infections:

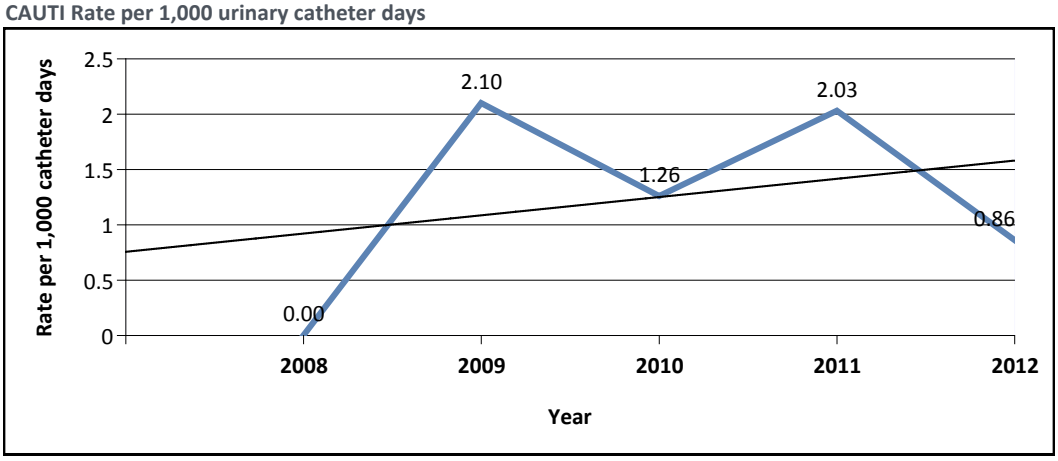
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	6,672	1	0	4	0	0	0	3	0	1	0	1.35
2009	14,733	1	0	3	0	1	0	7	1	4	0	1.15
2010	14,903	0	0	5	0	2	0	9	2	5	0	1.54
2011	15,057	0	0	4	0	2	0	7	1	3	0	1.13
2012	14,938	2	1	1	0	3	0	5	0	4	0	1.07

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	1.93	0.00	0 - 1.9	Same as
2009	3	2.32	1.29	0.26 - 3.78	Same as
2010	2	2.66	0.75	0.08 - 2.71	Same as
2011	3	1.68	1.79	0.36 - 5.22	Same as
2012	1	1.54	0.65	0.01 - 3.6	Same as

CAUTI Rate per 1,000 urinary catheter days



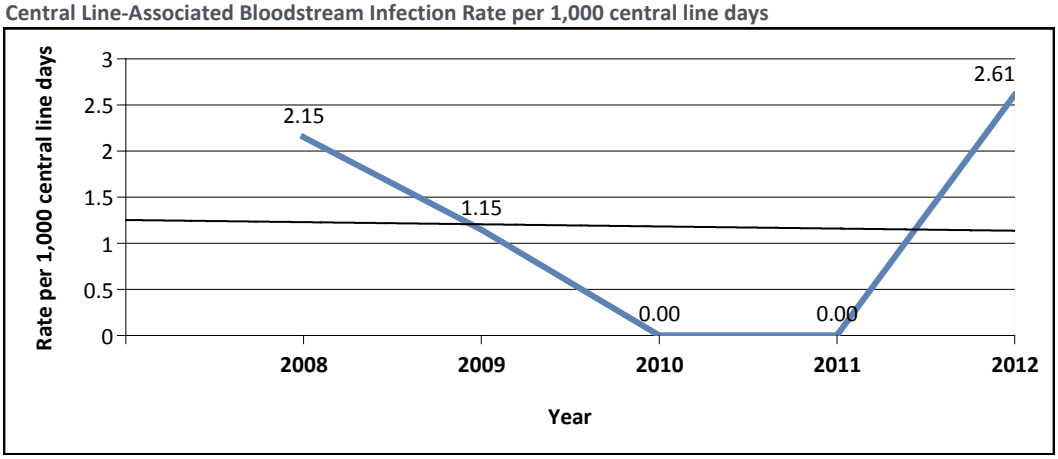
ST. LUKES QUAKERTOWN HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	0.65	1.54	0.02 - 8.59	Same as
2009	1	0.94	1.07	0.01 - 5.94	Same as
2010	0	0.83	0.00	0 - 4.44	Same as
2011	0	0.66	0.00	0 - 5.58	Same as
2012	2	0.47	4.29	0.48 - 15.5	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



ST. MARY MEDICAL CENTER

NHSN ID: 11885

Hospital type: Acute care general hospital

Number of licensed beds (2012): 342

Number of reported Healthcare-Associated Infections:

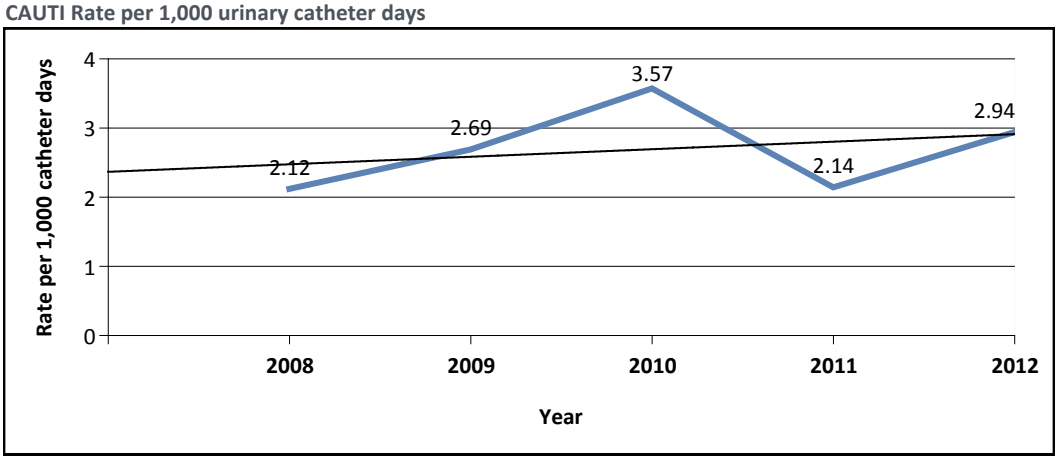
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	47,464	15	1	16	1	12	0	22	4	21	0	1.94
2009	97,024	20	0	28	0	26	0	46	5	65	1	1.97
2010	99,895	15	1	43	2	30	0	35	1	76	0	2.03
2011	99,643	15	0	27	1	19	0	30	7	64	2	1.66
2012	94,985	15	1	37	1	19	0	43	5	69	1	2.01

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	15	17.32	0.87	0.48 - 1.43	Same as
2009	36	21.68	1.66	1.16 - 2.3	Worse
2010	50	23.23	2.15	1.6 - 2.84	Worse
2011	31	17.43	1.78	1.21 - 2.52	Worse
2012	38	17.64	2.15	1.52 - 2.96	Worse

CAUTI Rate per 1,000 urinary catheter days



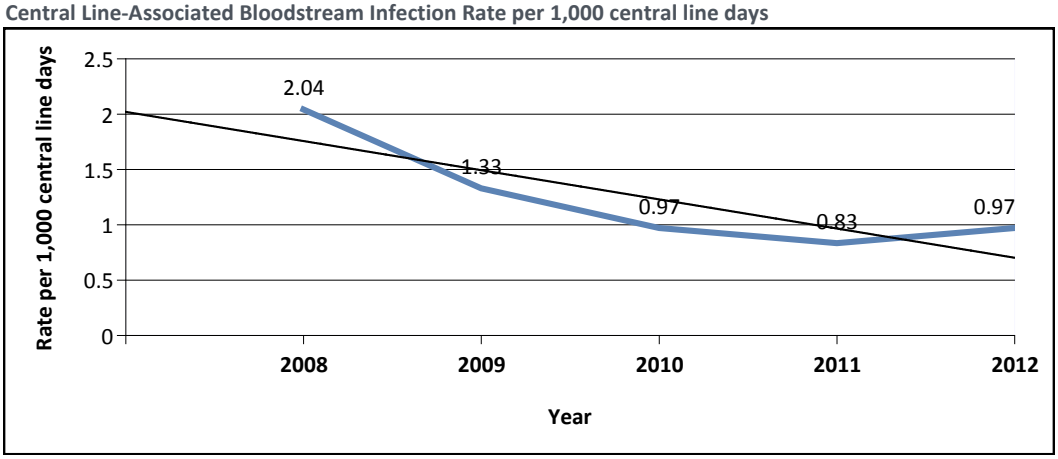
ST. MARY MEDICAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	15	10.72	1.40	0.78 - 2.31	Same as
2009	19	12.57	1.51	0.91 - 2.36	Same as
2010	14	9.89	1.41	0.77 - 2.37	Same as
2011	12	8.30	1.44	0.75 - 2.52	Same as
2012	13	9.54	1.36	0.72 - 2.33	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.11	0.00	0 - 33.14	Same as
2009	0	0.06	0.00	0 - 62.15	Same as
2010	0	0.06	0.00	0 - 62.94	Same as
2011	0	0.04	0.00	0 - 86.23	Same as
2012	0	0.07	0.00	0 - 51.38	Same as

ST. MARY MEDICAL CENTER REHAB

NHSN ID: 12483

Hospital type: Acute care general hospital

Number of licensed beds (2012): 31

Number of reported Healthcare-Associated Infections:

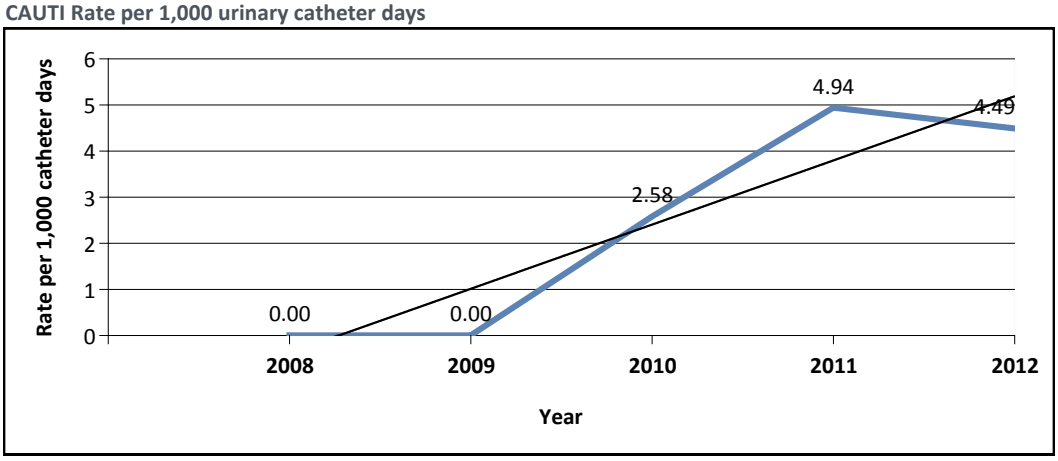
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,867	0	0	3	0	0	0	0	0	5	0	2.07
2009	6,839	0	0	5	0	0	0	0	0	7	0	1.75
2010	6,712	0	0	2	0	0	0	0	0	8	0	1.49
2011	8,745	0	0	2	0	0	0	0	0	15	0	1.94
2012	9,315	1	0	3	0	0	0	0	1	13	0	1.93

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.39	0.00	0 - 9.48	Same as
2009	0	0.78	0.00	0 - 4.73	Same as
2010	1	0.66	1.52	0.02 - 8.45	Same as
2011	2	0.41	4.84	0.54 - 17.49	Same as
2012	2	0.58	3.46	0.39 - 12.51	Same as

CAUTI Rate per 1,000 urinary catheter days



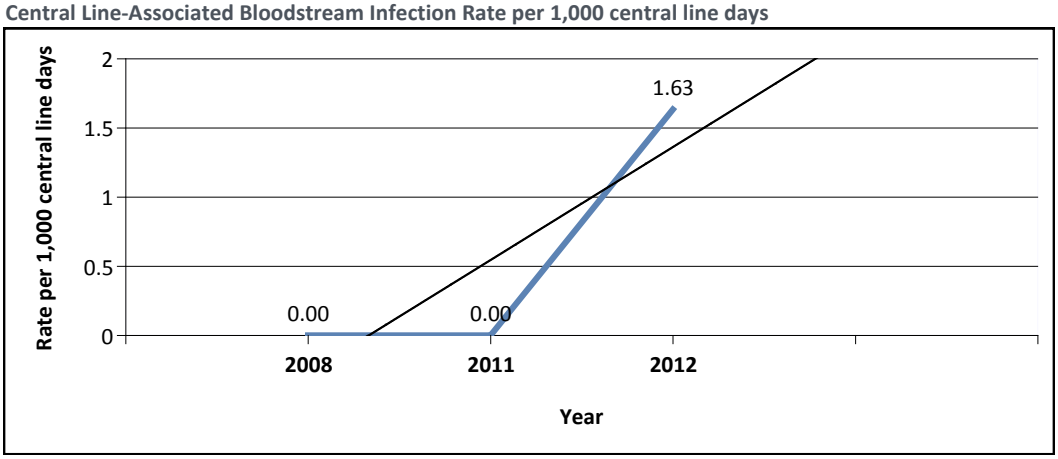
ST. MARY MEDICAL CENTER REHAB

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.68	0.00	0 - 5.43	Same as
2009				-	
2010				-	
2011	0	0.28	0.00	0 - 12.97	Same as
2012	1	0.39	2.59	0.03 - 14.4	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



ST. VINCENT HEALTH CENTER

NHSN ID: 11699

Hospital type: Acute care general hospital

Number of licensed beds (2012): 428

Number of reported Healthcare-Associated Infections:

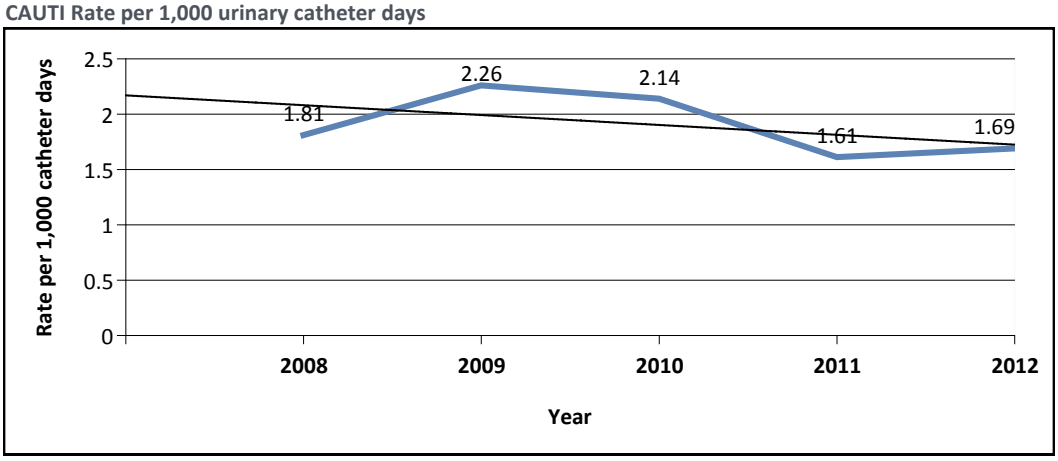
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	42,712	4	1	26	7	19	2	47	3	28	1	3.23
2009	94,889	14	4	53	11	46	1	104	6	91	1	3.49
2010	90,106	21	4	45	11	45	0	79	5	86	1	3.30
2011	83,108	11	3	48	7	30	0	93	7	63	3	3.19
2012	76,297	21	2	51	8	28	0	95	9	56	1	3.55

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	18	22.82	0.79	0.47 - 1.25	Same as
2009	42	41.09	1.02	0.74 - 1.38	Same as
2010	44	36.04	1.22	0.89 - 1.64	Same as
2011	32	33.91	0.94	0.65 - 1.33	Same as
2012	30	33.32	0.90	0.61 - 1.29	Same as

CAUTI Rate per 1,000 urinary catheter days



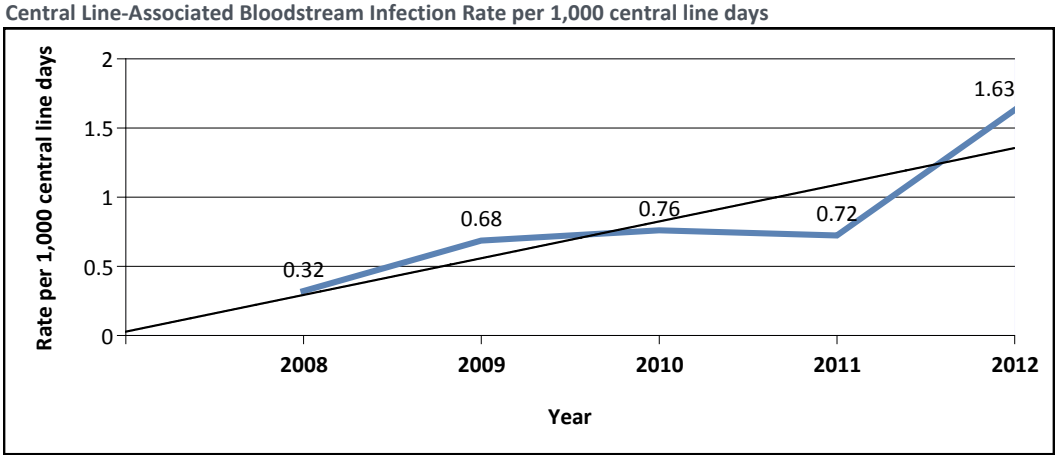
ST. VINCENT HEALTH CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	9.21	0.22	0.02 - 0.78	Better
2009	10	17.94	0.56	0.27 - 1.03	Same as
2010	10	11.19	0.89	0.43 - 1.64	Same as
2011	8	9.94	0.81	0.35 - 1.59	Same as
2012	14	6.47	2.16	1.18 - 3.63	Worse

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	1.74	0.00	0 - 2.11	Same as
2009	2	2.17	0.92	0.1 - 3.32	Same as
2010	3	3.14	0.96	0.19 - 2.79	Same as
2011	2	1.45	1.38	0.16 - 4.99	Same as
2012	2	0.92	2.18	0.25 - 7.88	Same as

Standardized Infection Ratio - Specialty Care Area

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	1.91	0.52	0.01 - 2.92	Same as
2009				-	
2010				-	
2011				-	
2012				-	

SUNBURY COMMUNITY HOSPITAL

NHSN ID: 12105

Hospital type: Acute care general hospital

Number of licensed beds (2012): 89

Number of reported Healthcare-Associated Infections:

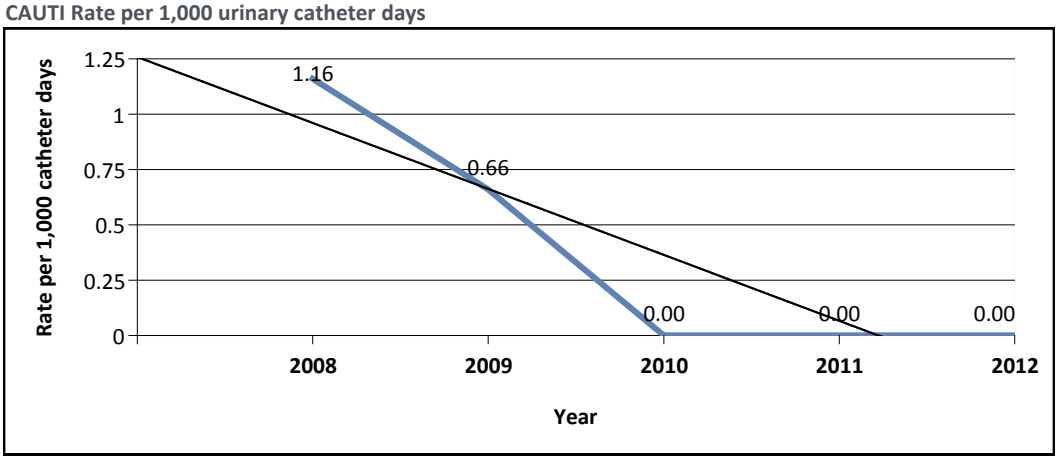
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,861	0	2	2	0	3	0	1	0	1	0	1.85
2009	9,135	0	0	2	0	7	0	3	0	1	0	1.42
2010	7,978	0	4	0	0	1	0	4	1	0	0	1.25
2011	7,897	0	3	1	0	6	0	2	0	0	0	1.52
2012	6,518	1	1	0	0	1	0	4	0	0	0	1.07

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	2.05	0.49	0.01 - 2.71	Same as
2009	1	2.46	0.41	0.01 - 2.26	Same as
2010	0	2.31	0.00	0 - 1.59	Same as
2011	0	1.54	0.00	0 - 2.39	Same as
2012	0	1.41	0.00	0 - 2.6	Same as

CAUTI Rate per 1,000 urinary catheter days



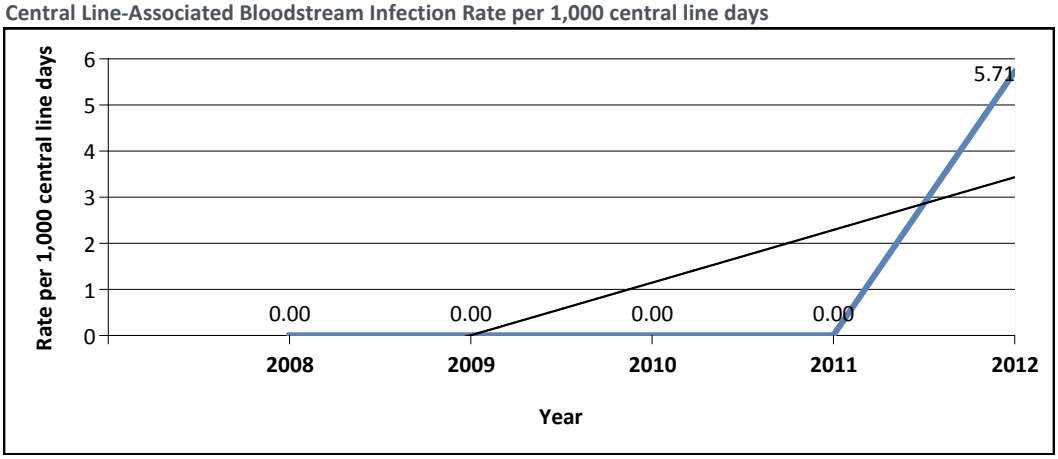
SUNBURY COMMUNITY HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.18	0.00	0 - 20.71	Same as
2009	0	0.45	0.00	0 - 8.07	Same as
2010	0	0.26	0.00	0 - 14.09	Same as
2011	0	0.14	0.00	0 - 25.94	Same as
2012	1	0.10	10.41	0.14 - 57.92	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



SURGICAL INSTITUTE OF READING

NHSN ID: 12535

Hospital type: Acute care general hospital

Number of licensed beds (2012): 15

Number of reported Healthcare-Associated Infections:

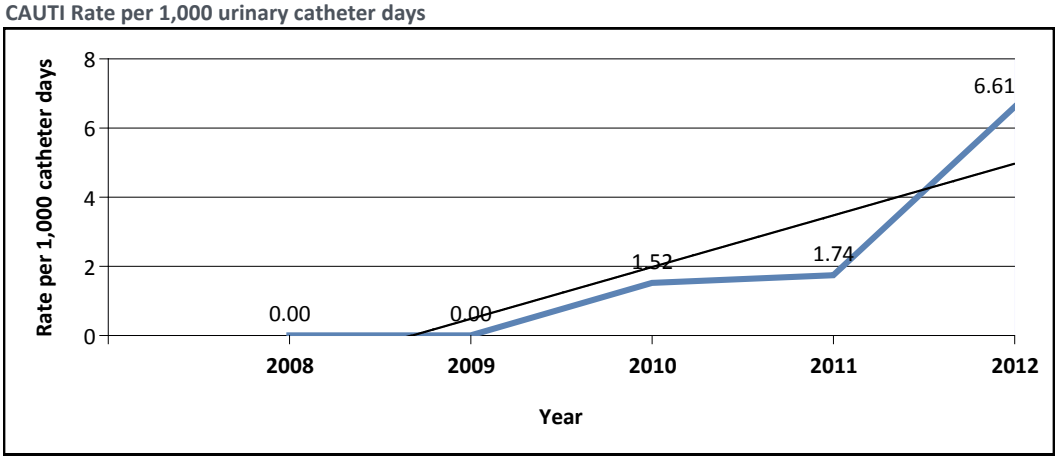
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	1,185	0	0	0	0	0	0	0	0	0	0	0.00
2009	3,059	0	0	0	0	0	0	5	0	0	0	1.63
2010	2,962	0	0	0	0	0	0	6	0	1	0	2.36
2011	2,646	0	0	0	0	0	0	3	0	1	0	1.51
2012	2,585	0	0	0	0	0	0	4	0	5	0	3.48

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.68	0.00	0 - 5.43	Same as
2009	0	1.20	0.00	0 - 3.05	Same as
2010	1	1.08	0.93	0.01 - 5.16	Same as
2011	1	0.73	1.37	0.02 - 7.62	Same as
2012	4	0.85	4.73	1.27 - 12.1	Worse

CAUTI Rate per 1,000 urinary catheter days



SURGICAL SPECIALTY CENTER AT COORDINATED HEALTH, THE

NHSN ID: 15259

Hospital type: Acute care general hospital

Number of licensed beds (2012): 20

Number of reported Healthcare-Associated Infections:

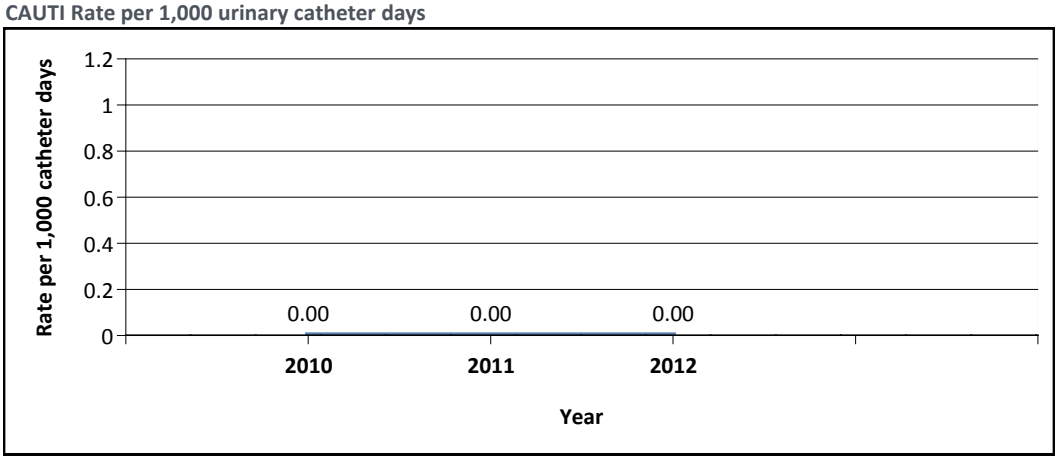
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008												
2009												
2010	1,611	0	0	0	0	0	0	6	0	0	0	3.72
2011	1,913	0	0	0	0	0	0	2	0	1	0	1.57
2012	2,052	0	0	0	0	0	0	5	0	0	0	2.44

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008				-	
2009				-	
2010	0	1.04	0.00	0 - 3.53	Same as
2011	0	1.10	0.00	0 - 3.34	Same as
2012	0	1.25	0.00	0 - 2.93	Same as

CAUTI Rate per 1,000 urinary catheter days



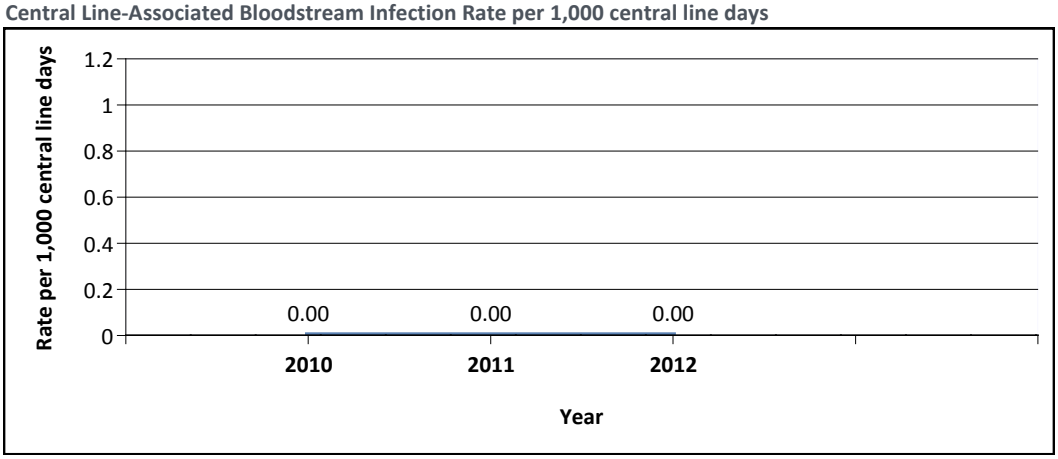
SURGICAL SPECIALTY CENTER AT COORDINATED HEALTH, THE

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008				-	
2009				-	
2010	0	0.00	0.00	0 - 2395.68	Same as
2011	0	0.02	0.00	0 - 176.2	Same as
2012	0	0.01	0.00	0 - 591.03	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



TEMPLE UNIVERSITY HOSPITAL

NHSN ID: 12382

Hospital type: Acute care general hospital

Number of licensed beds (2012): 714

Number of reported Healthcare-Associated Infections:

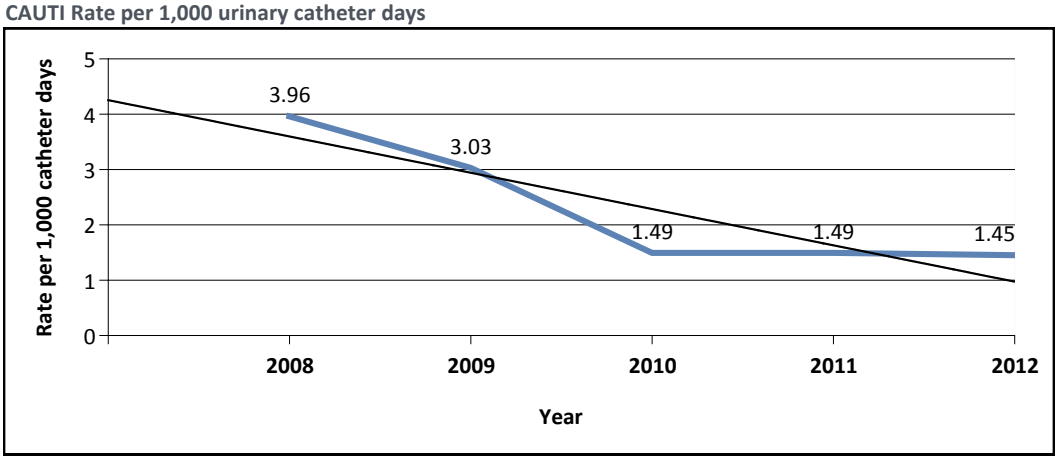
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	69,633	66	0	37	19	26	0	47	13	86	8	4.34
2009	196,477	126	6	74	49	76	0	101	8	141	11	3.01
2010	141,832	108	2	72	36	64	1	78	8	65	4	3.09
2011	145,364	62	3	46	16	65	0	60	9	69	0	2.27
2012	152,814	27	2	21	18	50	0	62	10	67	2	1.69

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	65	37.57	1.73	1.34 - 2.21	Worse
2009	105	76.34	1.38	1.13 - 1.67	Worse
2010	50	58.86	0.85	0.63 - 1.12	Same as
2011	48	54.57	0.88	0.65 - 1.17	Same as
2012	45	58.10	0.77	0.56 - 1.04	Same as

CAUTI Rate per 1,000 urinary catheter days



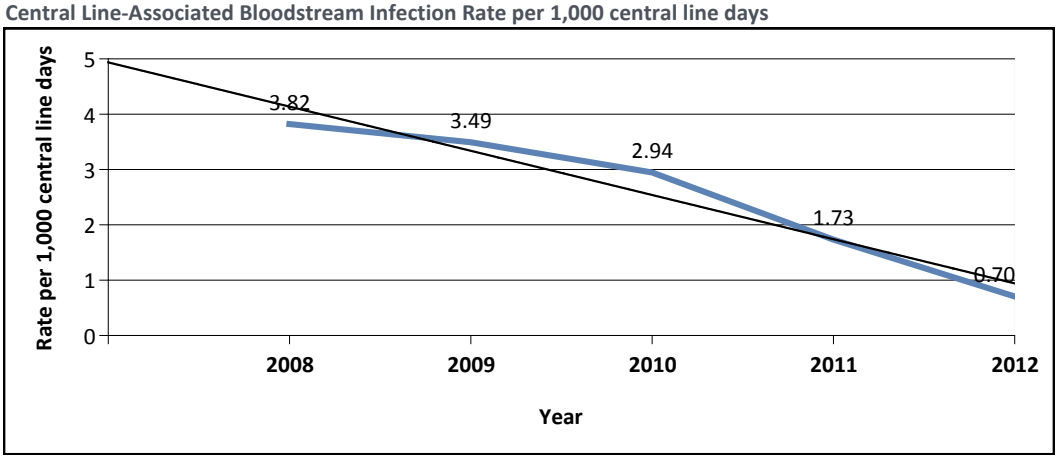
TEMPLE UNIVERSITY HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	48	18.55	2.59	1.91 - 3.43	Worse
2009	92	31.32	2.94	2.37 - 3.6	Worse
2010	79	21.99	3.59	2.84 - 4.48	Worse
2011	45	22.21	2.03	1.48 - 2.71	Worse
2012	18	20.51	0.88	0.52 - 1.39	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	6	2.24	2.68	0.43 - 5.84	Same as
2009	4	5.27	0.76	0.2 - 1.94	Same as
2010	7	2.57	2.72	1.09 - 5.61	Worse
2011	4	2.02	1.98	0.53 - 5.07	Same as
2012	0	1.41	0.00	0 - 2.6	Same as

Standardized Infection Ratio - Specialty Care Area

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	5	3.43	1.46	0.47 - 3.4	Same as
2009	9	6.23	1.44	0.66 - 2.74	Same as
2010	1	5.46	0.18	0 - 1.02	Same as
2011	3	3.93	0.76	0.15 - 2.23	Same as
2012	0	4.55	0.00	0 - 0.81	Better

THE GOOD SAMARITAN HOSPITAL

NHSN ID: 11712

Hospital type: Acute care general hospital

Number of licensed beds (2012): 172

Number of reported Healthcare-Associated Infections:

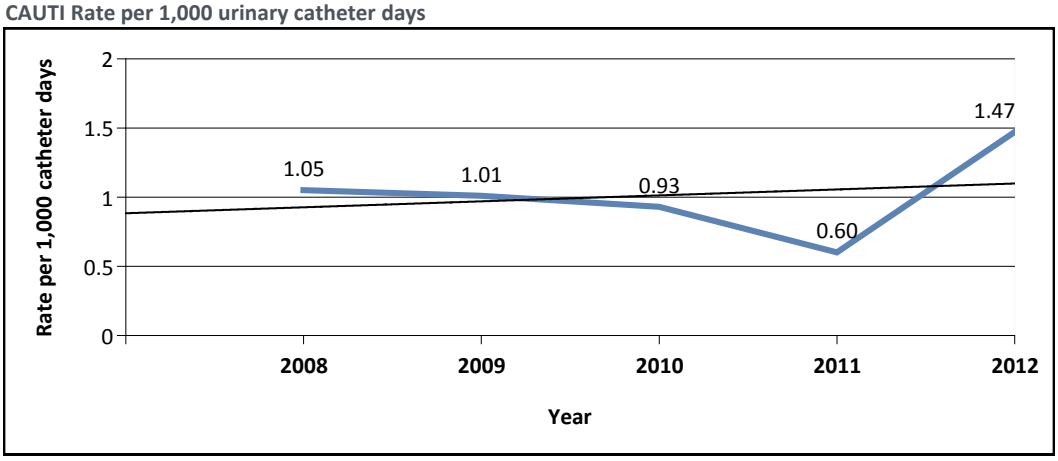
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	22,238	7	4	7	3	3	0	20	7	14	0	2.92
2009	44,601	11	0	11	3	10	0	40	14	26	1	2.60
2010	41,180	11	1	22	3	13	0	20	8	26	4	2.62
2011	42,849	4	1	16	2	9	0	14	5	25	1	1.80
2012	39,790	7	0	11	0	4	0	14	1	26	0	1.58

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	7	14.69	0.48	0.19 - 0.98	Better
2009	13	20.63	0.63	0.34 - 1.08	Same as
2010	12	20.88	0.57	0.3 - 1	Same as
2011	8	17.99	0.44	0.19 - 0.88	Better
2012	15	14.31	1.05	0.59 - 1.73	Same as

CAUTI Rate per 1,000 urinary catheter days



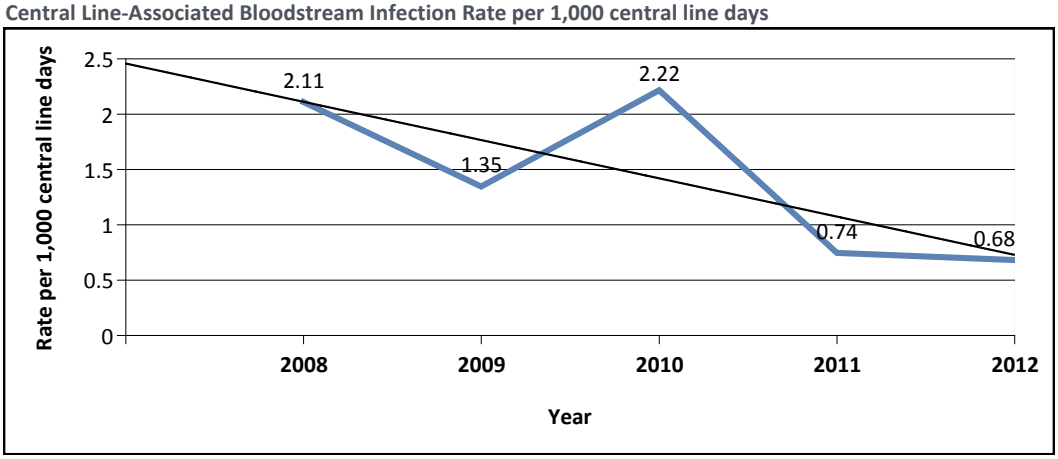
THE GOOD SAMARITAN HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	6	4.10	1.46	0.53 - 3.18	Same as
2009	6	4.24	1.42	0.52 - 3.08	Same as
2010	11	3.50	3.14	1.57 - 5.62	Worse
2011	4	3.18	1.26	0.34 - 3.22	Same as
2012	3	3.02	0.99	0.2 - 2.9	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



THE GOOD SHEPHERD REHABILITATION HOSPITAL

NHSN ID: 11896

Hospital type: Rehabilitation hospital

Number of licensed beds (2012): 106

Number of reported Healthcare-Associated Infections:

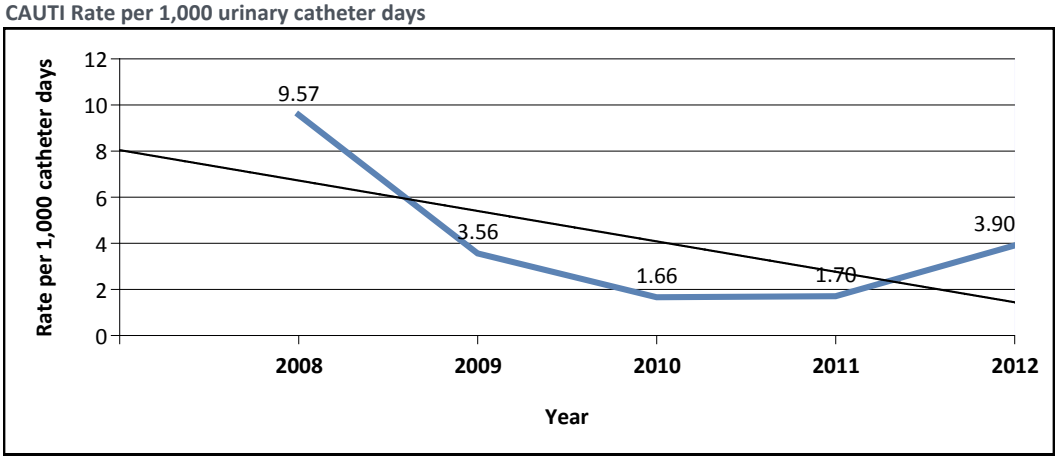
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	11,331	3	0	4	0	0	0	0	0	24	0	2.74
2009	23,931	5	0	9	2	0	0	0	2	32	0	2.09
2010	24,553	4	1	9	0	0	0	0	4	19	0	1.51
2011	29,920	4	1	3	0	1	0	0	4	24	0	1.24
2012	28,461	4	7	10	7	8	0	0	7	44	0	3.06

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	13	3.43	3.79	2.02 - 6.48	Worse
2009	9	4.10	2.20	1 - 4.17	Worse
2010	4	4.03	0.99	0.27 - 2.54	Same as
2011	4	2.59	1.55	0.42 - 3.96	Same as
2012	8	2.71	2.95	1.27 - 5.81	Worse

CAUTI Rate per 1,000 urinary catheter days



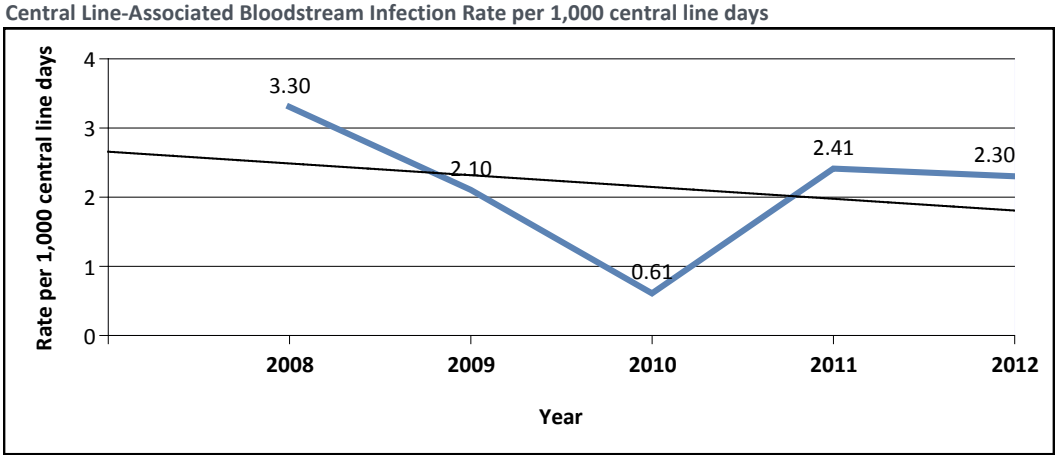
THE GOOD SHEPHERD REHABILITATION HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	1.28	2.35	0.47 - 6.87	Same as
2009	4	1.92	2.09	0.56 - 5.34	Same as
2010	1	1.26	0.79	0.01 - 4.4	Same as
2011	4	1.12	3.56	0.96 - 9.11	Same as
2012	3	0.78	3.85	0.77 - 11.26	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



THE MEADOWS PSYCHIATRIC CENTER

NHSN ID: 12156

Hospital type: Psychiatric hospital

Number of licensed beds (2012): 69

Number of reported Healthcare-Associated Infections:

Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008		0	12	0	1	0	2	0	12	6	0	
2009	310,210	0	49	0	4	0	2	0	18	16	0	0.29
2010	34,542	0	33	1	2	1	3	0	19	25	1	2.46
2011	34,542	0	21	0	3	1	0	0	2	5	0	0.93
2012	32,072	0	0	0	0	0	0	0	0	0	0	0.00

THE WASHINGTON HOSPITAL

NHSN ID: 11460

Hospital type: Acute care general hospital

Number of licensed beds (2012): 260

Number of reported Healthcare-Associated Infections:

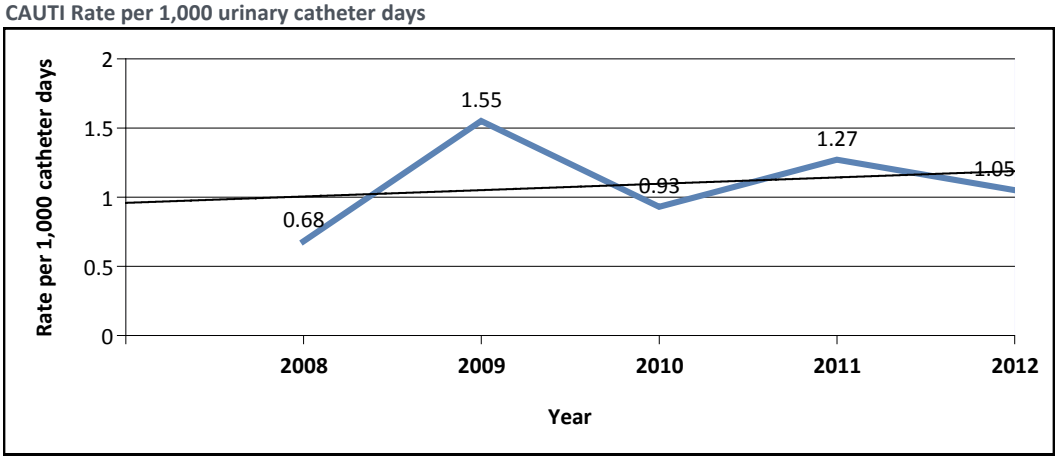
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	33,570	1	0	8	0	12	0	23	1	10	0	1.64
2009	68,588	0	0	30	1	34	0	38	0	37	0	2.04
2010	65,063	0	0	27	0	23	0	37	1	24	0	1.72
2011	62,228	3	0	22	1	21	0	31	0	28	0	1.70
2012	54,486	4	1	23	0	8	0	36	1	16	0	1.63

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	4	14.11	0.28	0.08 - 0.73	Better
2009	15	15.67	0.96	0.54 - 1.58	Same as
2010	9	16.12	0.56	0.25 - 1.06	Same as
2011	12	11.38	1.05	0.54 - 1.84	Same as
2012	9	11.77	0.76	0.35 - 1.45	Same as

CAUTI Rate per 1,000 urinary catheter days



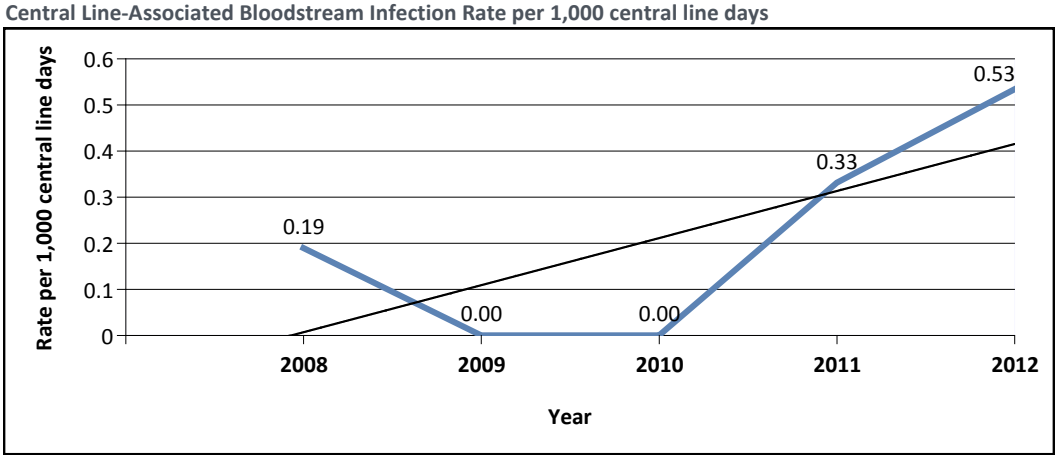
THE WASHINGTON HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	7.71	0.13	0 - 0.72	Better
2009	0	8.82	0.00	0 - 0.42	Better
2010	0	6.88	0.00	0 - 0.53	Better
2011	3	5.23	0.57	0.12 - 1.68	Same as
2012	4	5.31	0.75	0.2 - 1.93	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



THE WESTERN PENNSYLVANIA HOSPITAL

NHSN ID: 11864

Hospital type: Acute care general hospital

Number of licensed beds (2012): 292

Number of reported Healthcare-Associated Infections:

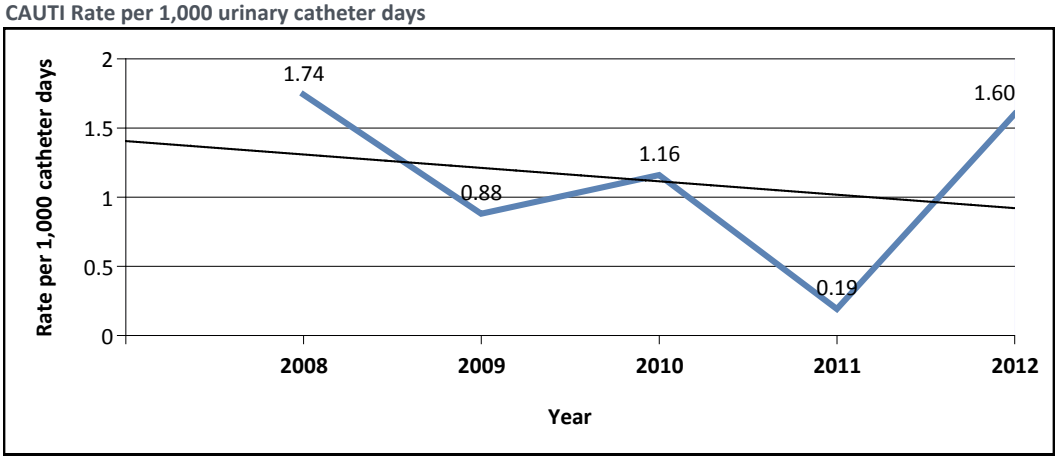
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	45,683	33	3	24	9	14	1	43	5	27	0	3.48
2009	98,066	54	1	59	29	46	0	88	4	28	0	3.15
2010	88,109	65	9	65	20	26	0	57	2	33	1	3.16
2011	41,736	32	1	24	11	1	0	17	1	10	0	2.32
2012	53,366	31	4	32	10	14	0	31	2	19	0	2.68

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	23	29.33	0.78	0.5 - 1.18	Same as
2009	22	55.18	0.40	0.25 - 0.6	Better
2010	23	34.55	0.67	0.42 - 1	Better
2011	1	8.18	0.12	0 - 0.68	Better
2012	8	9.01	0.89	0.38 - 1.75	Same as

CAUTI Rate per 1,000 urinary catheter days



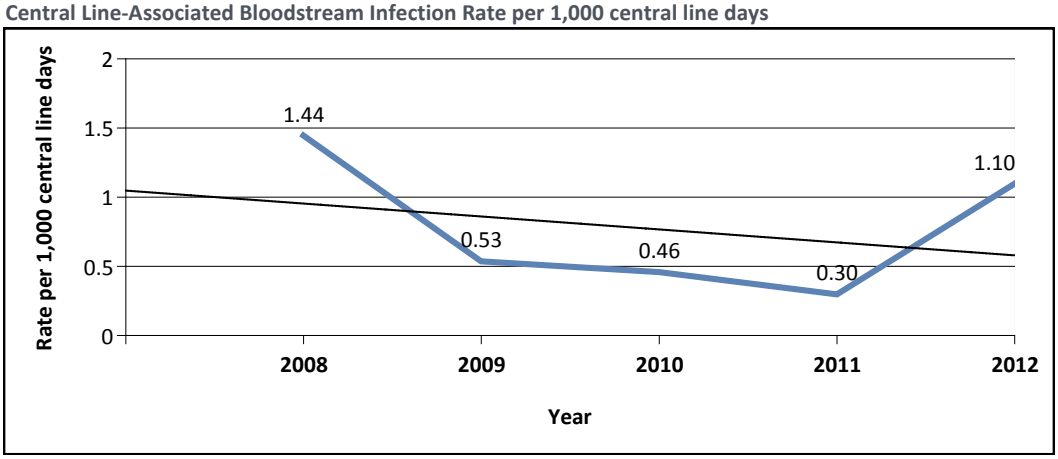
THE WESTERN PENNSYLVANIA HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	11	11.26	0.98	0.49 - 1.75	Same as
2009	9	19.56	0.46	0.21 - 0.87	Better
2010	6	10.88	0.55	0.2 - 1.2	Same as
2011	1	3.07	0.33	0 - 1.81	Same as
2012	6	4.26	1.41	0.51 - 3.06	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	3.32	0.00	0 - 1.1	Same as
2009	8	9.32	0.86	0.37 - 1.69	Same as
2010	3	6.69	0.45	0.09 - 1.31	Same as
2011	4	4.59	0.87	0.23 - 2.23	Same as
2012	3	3.72	0.81	0.16 - 2.36	Same as

Standardized Infection Ratio - Specialty Care Area

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	7	4.26	1.64	0.66 - 3.39	Same as
2009	0	1.41	0.00	0 - 2.59	Same as
2010	0	8.86	0.00	0 - 0.41	Better
2011	4	5.63	0.71	0.19 - 1.82	Same as
2012	3	6.42	0.47	0.09 - 1.37	Same as

THOMAS JEFFERSON UNIV HOSP - METHODIST

NHSN ID: 12017

Hospital type: Acute care general hospital

Number of licensed beds (2012): 198

Number of reported Healthcare-Associated Infections:

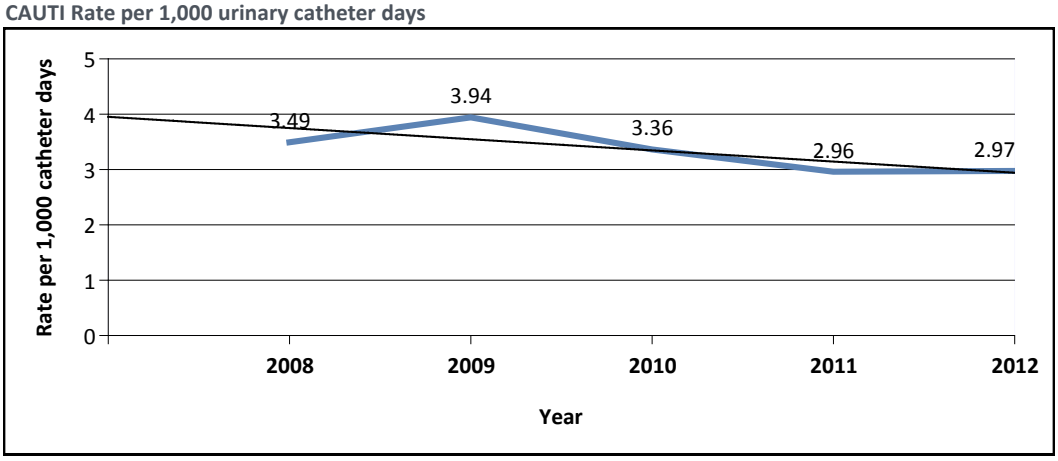
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	28,703	23	0	16	1	23	0	6	4	33	0	3.69
2009	53,925	26	0	42	3	36	0	24	2	61	0	3.60
2010	48,856	13	0	9	2	38	0	21	5	48	0	2.78
2011	46,785	28	1	29	2	55	0	17	7	42	0	3.87
2012	48,112	12	2	45	7	42	0	20	8	41	1	3.70

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	25	16.23	1.54	1 - 2.27	Same as
2009	48	26.86	1.79	1.32 - 2.37	Worse
2010	34	17.79	1.91	1.32 - 2.67	Worse
2011	30	17.12	1.75	1.18 - 2.5	Worse
2012	25	15.64	1.60	1.03 - 2.36	Worse

CAUTI Rate per 1,000 urinary catheter days



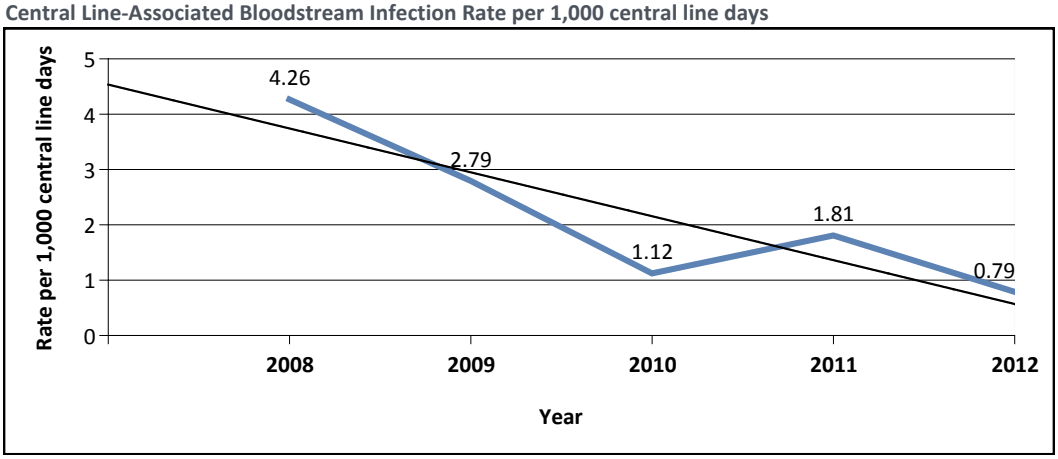
THOMAS JEFFERSON UNIV HOSP - METHODIST

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	22	7.59	2.90	1.82 - 4.39	Worse
2009	25	11.04	2.26	1.46 - 3.34	Worse
2010	9	6.79	1.33	0.61 - 2.52	Same as
2011	16	7.57	2.11	1.21 - 3.43	Worse
2012	6	6.00	1.00	0.37 - 2.18	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



THOMAS JEFFERSON UNIV HOSPITAL

NHSN ID: 11506

Hospital type: Acute care general hospital

Number of licensed beds (2012): 771

Number of reported Healthcare-Associated Infections:

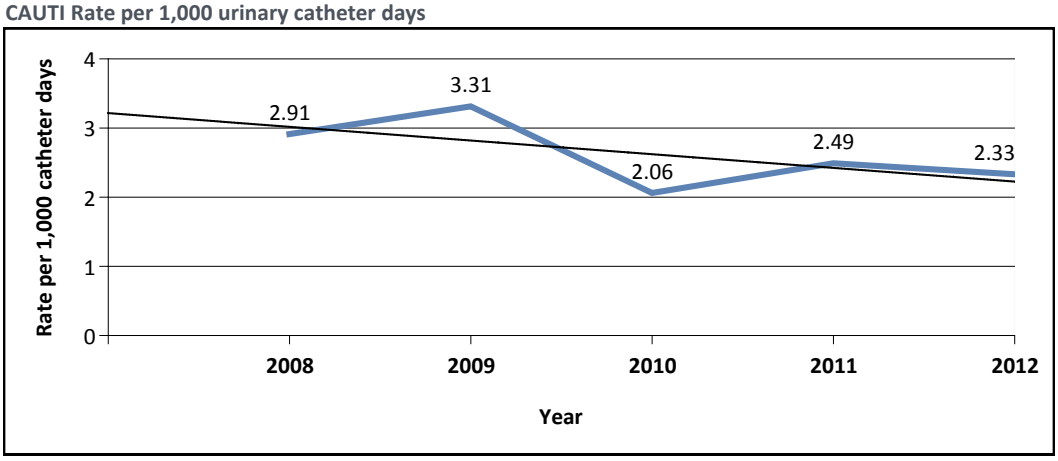
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	86,260	37	0	92	0	66	0	146	0	105	1	5.18
2009	191,315	53	0	146	0	124	0	301	0	241	0	4.52
2010	176,486	33	0	155	0	88	0	272	0	219	0	4.35
2011	192,353	56	1	130	0	64	0	253	6	203	2	3.72
2012	199,428	106	10	145	17	72	7	306	19	177	10	4.36

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	82	61.50	1.33	1.06 - 1.65	Worse
2009	185	122.76	1.51	1.3 - 1.74	Worse
2010	123	103.60	1.19	0.99 - 1.42	Same as
2011	151	107.80	1.40	1.19 - 1.64	Worse
2012	131	106.90	1.23	1.02 - 1.45	Worse

CAUTI Rate per 1,000 urinary catheter days



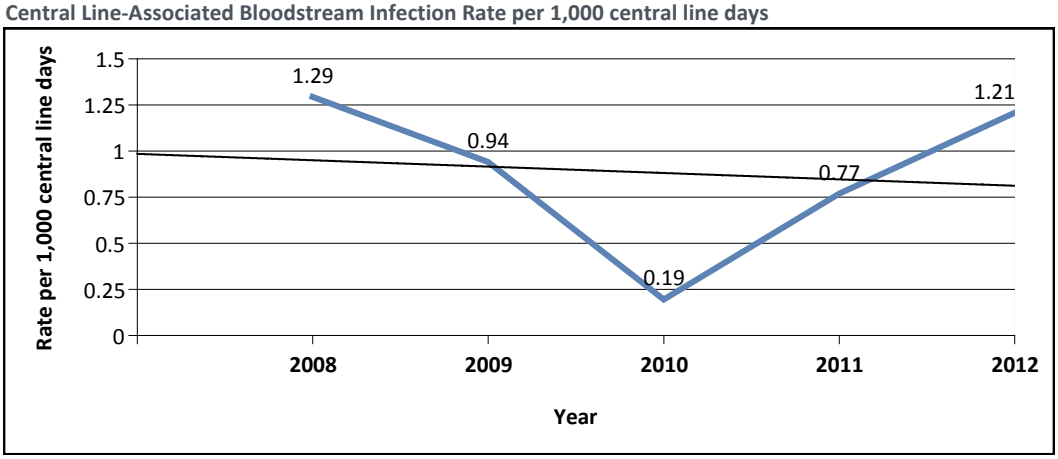
THOMAS JEFFERSON UNIV HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	24	27.78	0.86	0.55 - 1.29	Same as
2009	37	43.77	0.85	0.6 - 1.17	Same as
2010	8	32.28	0.25	0.11 - 0.49	Better
2011	35	36.72	0.95	0.66 - 1.33	Same as
2012	55	38.92	1.41	1.06 - 1.84	Worse

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	8	6.39	1.25	0.48 - 2.47	Same as
2009	13	10.81	1.20	0.64 - 2.06	Same as
2010	20	6.49	3.08	1.88 - 4.76	Worse
2011	7	3.96	1.77	0.71 - 3.64	Same as
2012	1	3.34	0.30	0 - 1.67	Same as

Standardized Infection Ratio - Specialty Care Area

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	8.01	0.37	0.08 - 1.09	Same as
2009	2	4.27	0.47	0.05 - 1.69	Same as
2010	5	13.55	0.37	0.12 - 0.86	Better
2011	4	11.55	0.35	0.09 - 0.89	Better
2012	11	12.83	0.86	0.43 - 1.53	Same as

TITUSVILLE AREA HOSPITAL

NHSN ID: 11738

Hospital type: Acute care general hospital

Number of licensed beds (2012): 72

Number of reported Healthcare-Associated Infections:

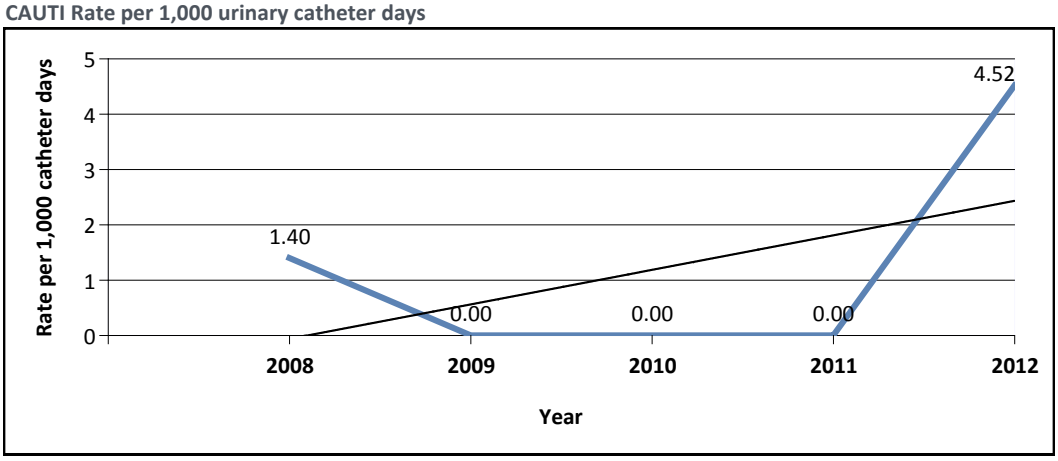
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,690	0	0	0	0	3	0	2	0	1	0	1.28
2009	8,960	1	0	0	0	0	0	2	0	0	0	0.33
2010	8,438	0	0	0	0	2	0	2	0	0	0	0.47
2011	7,822	0	0	0	0	0	0	5	2	0	0	0.89
2012	7,565	0	1	0	0	0	0	7	0	4	0	1.59

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	1.74	0.58	0.01 - 3.2	Same as
2009	0	2.47	0.00	0 - 1.48	Same as
2010	0	2.03	0.00	0 - 1.81	Same as
2011	0	1.29	0.00	0 - 2.84	Same as
2012	4	1.20	3.34	0.9 - 8.56	Same as

CAUTI Rate per 1,000 urinary catheter days



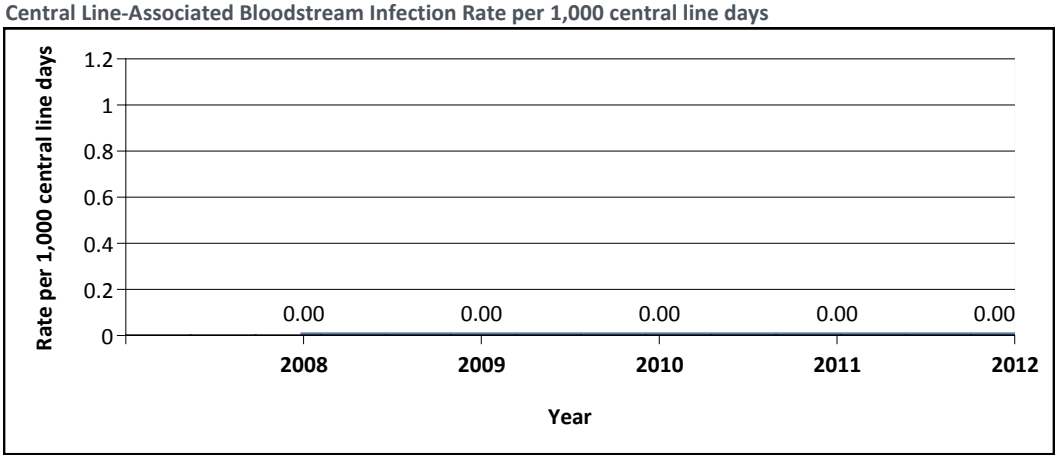
TITUSVILLE AREA HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.15	0.00	0 - 23.85	Same as
2009	0	0.28	0.00	0 - 13.02	Same as
2010	0	0.17	0.00	0 - 21.3	Same as
2011	0	0.19	0.00	0 - 18.88	Same as
2012	0	0.14	0.00	0 - 26.74	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



TORRANCE STATE HOSPITAL

NHSN ID: 12091

Hospital type: Psychiatric hospital

Number of licensed beds (2012): 352

Number of reported Healthcare-Associated Infections:

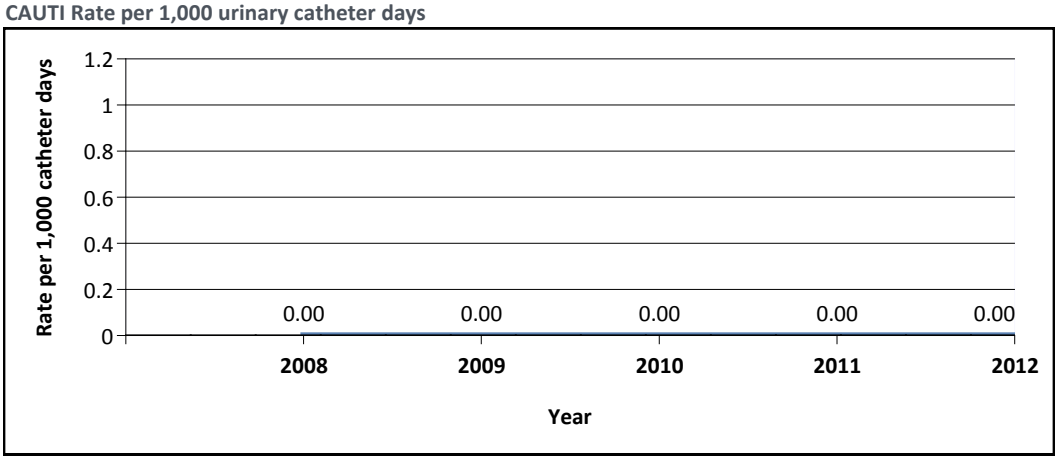
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	202	1	16	0	1	7	0	0	3	12	0	198.02
2009	104,610	0	15	1	0	2	0	0	8	15	0	0.39
2010	103,015	0	8	0	2	1	1	0	12	13	0	0.36
2011	109,720	0	7	1	0	1	1	0	20	12	1	0.39
2012	113,753	1	11	0	0	3	0	0	18	12	0	0.40

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.02	0.00	0 - 154.7	Same as
2009	0	0.02	0.00	0 - 171.24	Same as
2010	0	0.01	0.00	0 - 356.86	Same as
2011	0	0.09	0.00	0 - 41.33	Same as
2012	0	0.11	0.00	0 - 34.91	Same as

CAUTI Rate per 1,000 urinary catheter days



TROY COMMUNITY HOSPITAL

NHSN ID: 12018

Hospital type: Critical access hospital

Number of licensed beds (2012): 25

Number of reported Healthcare-Associated Infections:

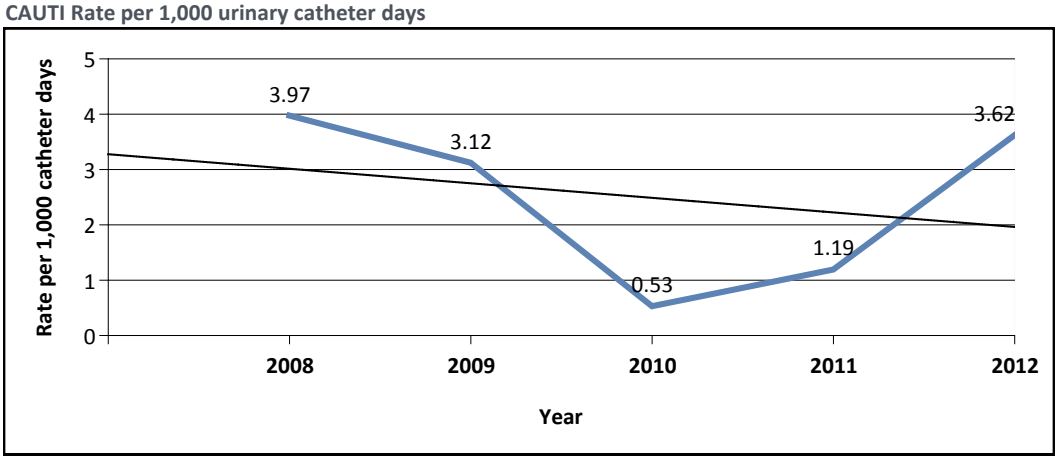
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,645	0	0	0	0	4	0	0	0	4	0	2.19
2009	7,341	5	0	0	0	0	0	0	1	8	0	1.91
2010	7,457	0	0	5	1	0	0	0	0	2	0	1.07
2011	7,358	1	0	1	2	1	0	1	2	4	0	1.63
2012	7,782	2	0	0	1	6	0	0	2	8	0	2.44

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	4	2.25	1.78	0.48 - 4.55	Same as
2009	7	3.58	1.95	0.78 - 4.02	Same as
2010	1	3.10	0.32	0 - 1.8	Same as
2011	2	2.15	0.93	0.1 - 3.37	Same as
2012	6	2.31	2.60	0.95 - 5.65	Same as

CAUTI Rate per 1,000 urinary catheter days



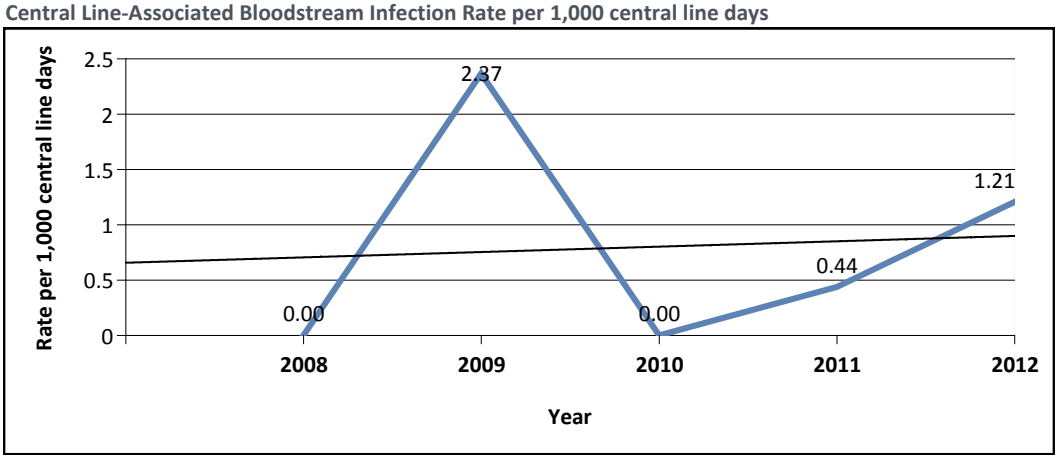
TROY COMMUNITY HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	1.46	0.00	0 - 2.52	Same as
2009	5	1.62	3.10	1 - 7.22	Same as
2010	0	1.16	0.00	0 - 3.17	Same as
2011	1	1.17	0.86	0.01 - 4.77	Same as
2012	2	1.26	1.59	0.18 - 5.74	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



TYLER MEMORIAL HOSPITAL

NHSN ID: 11829

Hospital type: Acute care general hospital

Number of licensed beds (2012): 48

Number of reported Healthcare-Associated Infections:

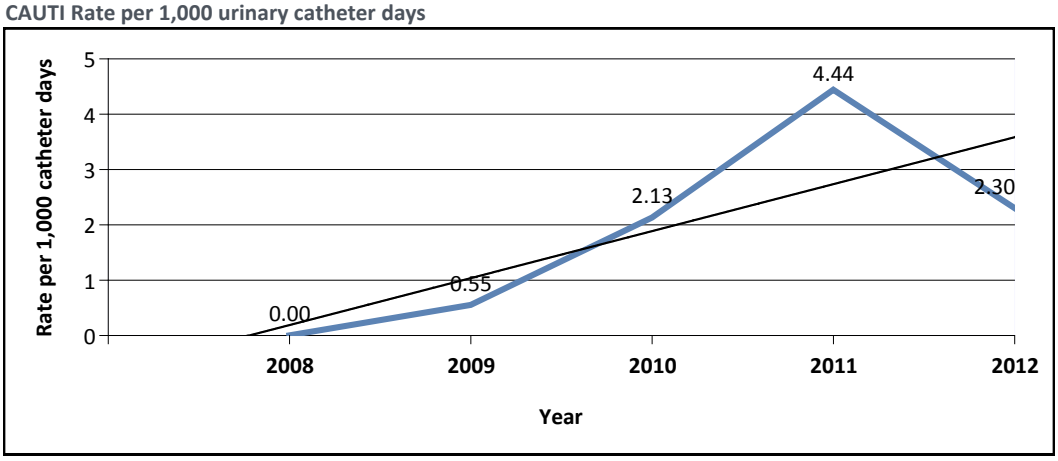
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,006	0	0	0	0	4	0	1	0	0	0	1.25
2009	7,911	0	0	0	0	3	0	1	0	1	0	0.63
2010	6,047	0	0	0	0	2	0	4	0	4	0	1.65
2011	6,054	0	0	0	1	3	0	4	2	8	0	2.97
2012	5,258	0	0	1	0	0	0	0	0	4	0	0.95

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	2.35	0.00	0 - 1.56	Same as
2009	1	2.93	0.34	0 - 1.9	Same as
2010	3	2.31	1.30	0.26 - 3.8	Same as
2011	5	1.40	3.57	1.15 - 8.32	Worse
2012	2	1.20	1.67	0.19 - 6.03	Same as

CAUTI Rate per 1,000 urinary catheter days



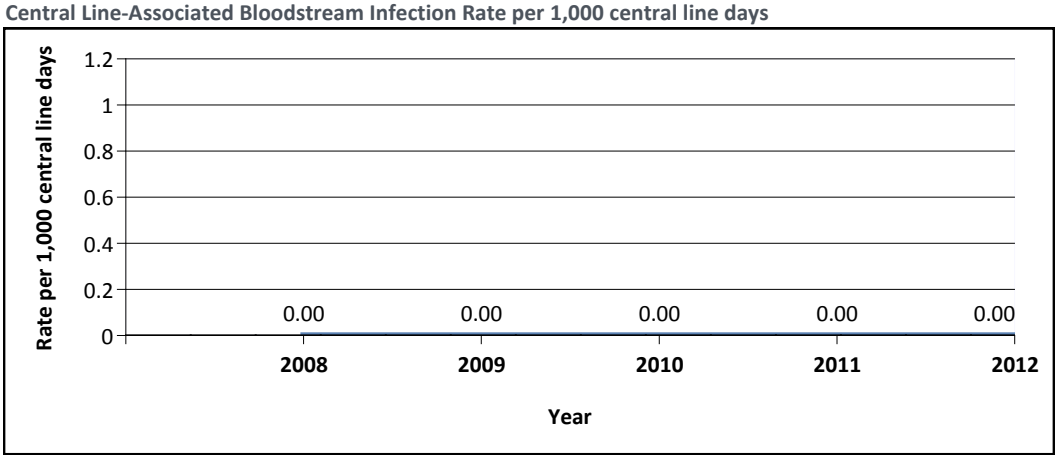
TYLER MEMORIAL HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.21	0.00	0 - 17.8	Same as
2009	0	0.16	0.00	0 - 22.58	Same as
2010	0	0.08	0.00	0 - 45.53	Same as
2011	0	0.04	0.00	0 - 95.05	Same as
2012	0	0.13	0.00	0 - 27.48	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



TYRONE HOSPITAL

NHSN ID: 12717

Hospital type: Critical access hospital

Number of licensed beds (2012): 25

Number of reported Healthcare-Associated Infections:

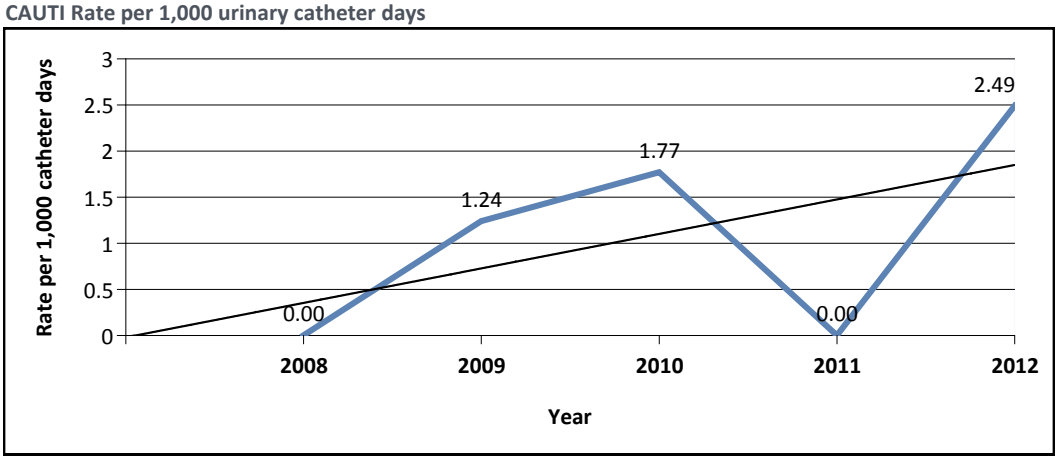
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	1,773	0	0	0	0	0	0	0	0	0	0	0.00
2009	2,786	0	0	0	0	0	0	0	0	1	0	0.36
2010	2,567	0	0	0	0	0	0	3	0	1	0	1.56
2011	2,672	0	0	0	0	0	0	4	1	0	0	1.87
2012	2,809	0	0	1	0	0	0	5	0	1	0	2.49

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	1.25	0.00	0 - 2.93	Same as
2009	1	1.29	0.77	0.01 - 4.3	Same as
2010	1	0.93	1.08	0.01 - 6	Same as
2011	0	0.50	0.00	0 - 7.27	Same as
2012	1	0.55	1.82	0.02 - 10.15	Same as

CAUTI Rate per 1,000 urinary catheter days



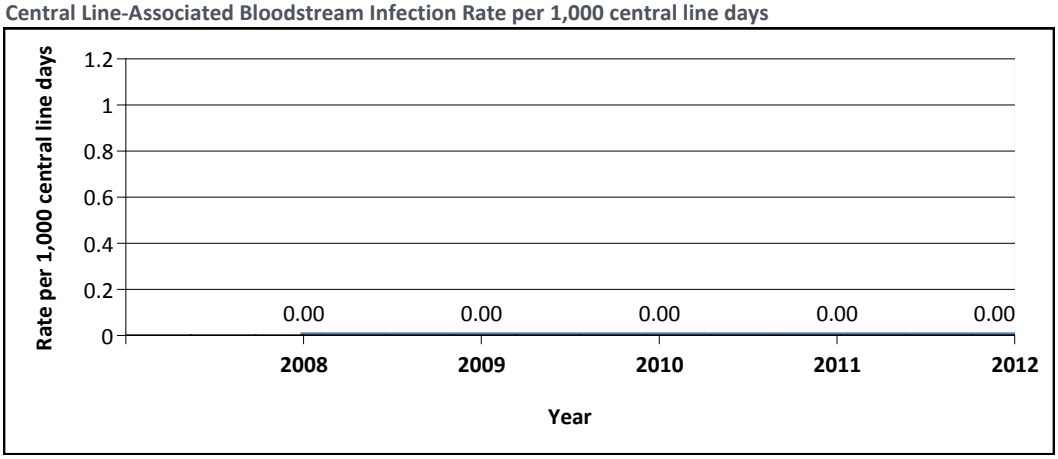
TYRONE HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.19	0.00	0 - 19.71	Same as
2009	0	0.16	0.00	0 - 23.17	Same as
2010	0	0.10	0.00	0 - 36.43	Same as
2011	0	0.09	0.00	0 - 42.66	Same as
2012	0	0.03	0.00	0 - 127.63	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



UNIONTOWN HOSPITAL

NHSN ID: 10441

Hospital type: Acute care general hospital

Number of licensed beds (2012): 212

Number of reported Healthcare-Associated Infections:

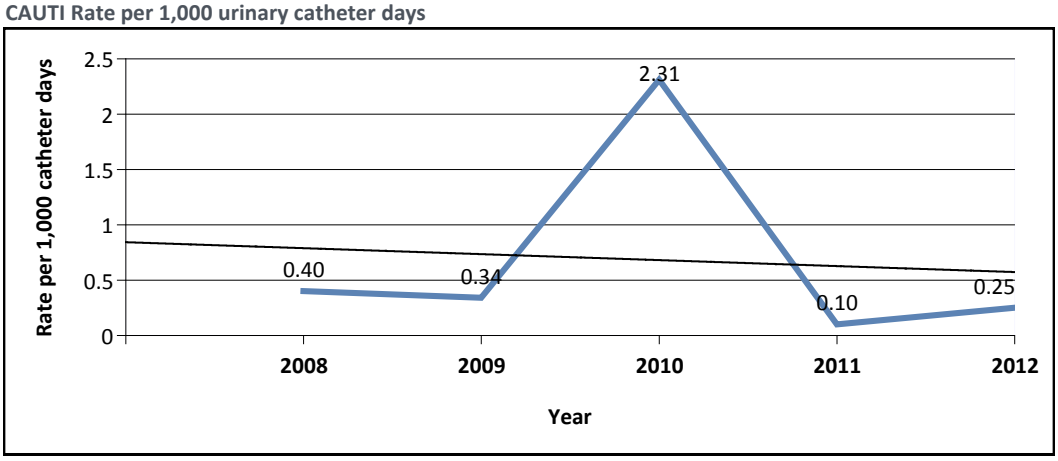
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	22,142	1	0	15	0	3	0	10	0	2	0	1.40
2009	54,030	0	1	35	1	4	0	23	1	6	0	1.31
2010	46,143	2	0	37	0	12	0	34	3	24	1	2.45
2011	42,132	3	0	32	1	10	0	29	1	11	0	2.06
2012	39,143	4	0	24	0	12	2	30	0	13	0	2.17

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	11.50	0.17	0.02 - 0.63	Better
2009	3	14.28	0.21	0.04 - 0.61	Better
2010	20	14.25	1.40	0.86 - 2.17	Same as
2011	1	16.94	0.06	0 - 0.33	Better
2012	3	22.42	0.13	0.03 - 0.39	Better

CAUTI Rate per 1,000 urinary catheter days



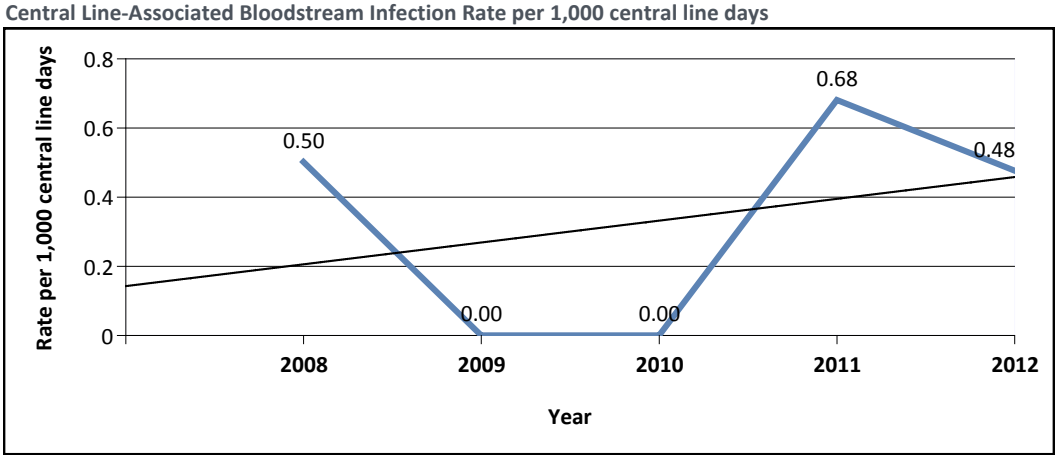
UNIONTOWN HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	2.82	0.35	0 - 1.97	Same as
2009	0	3.89	0.00	0 - 0.94	Better
2010	0	3.07	0.00	0 - 1.2	Same as
2011	3	4.16	0.72	0.15 - 2.11	Same as
2012	2	3.12	0.64	0.07 - 2.32	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



UPMC BEDFORD

NHSN ID: 11680

Hospital type: Acute care general hospital

Number of licensed beds (2012): 49

Number of reported Healthcare-Associated Infections:

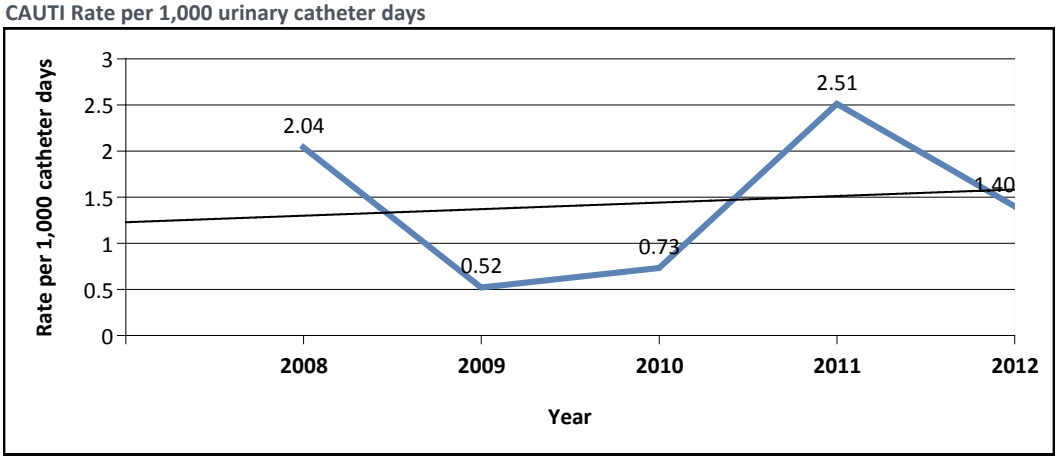
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,665	0	0	4	0	0	1	4	1	2	0	3.27
2009	7,351	2	0	5	0	1	0	4	0	1	0	1.77
2010	6,977	0	0	1	0	2	0	6	0	1	0	1.43
2011	6,685	0	0	0	0	0	0	6	0	3	0	1.35
2012	6,670	1	0	2	0	2	0	6	0	2	0	1.95

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	2.20	0.91	0.1 - 3.29	Same as
2009	1	3.11	0.32	0 - 1.79	Same as
2010	1	2.27	0.44	0.01 - 2.45	Same as
2011	3	1.48	2.03	0.41 - 5.93	Same as
2012	2	1.99	1.01	0.11 - 3.64	Same as

CAUTI Rate per 1,000 urinary catheter days



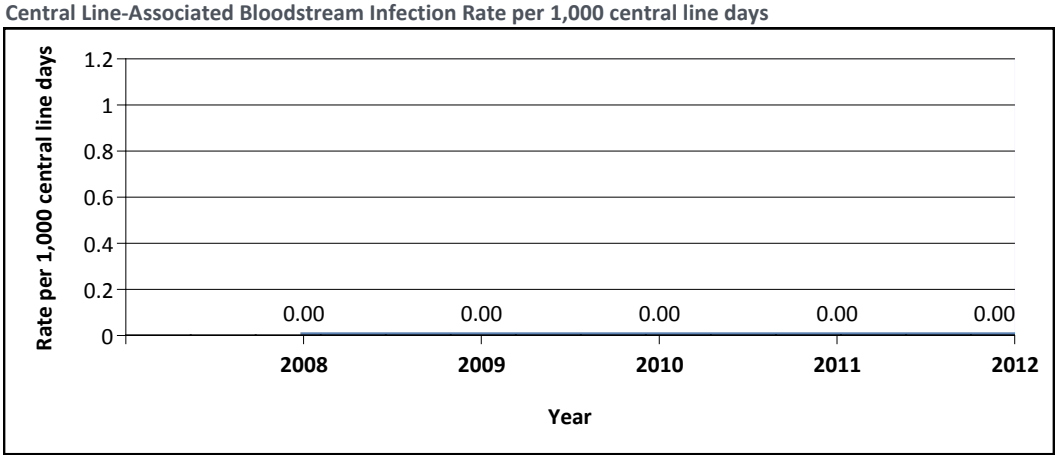
UPMC BEDFORD

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.25	0.00	0 - 14.83	Same as
2009	0	0.55	0.00	0 - 6.61	Same as
2010	0	0.28	0.00	0 - 12.88	Same as
2011	0	0.16	0.00	0 - 23.08	Same as
2012	0	0.17	0.00	0 - 21.63	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



UPMC HAMOT

NHSN ID: 11725

Hospital type: Acute care general hospital

Number of licensed beds (2012): 412

Number of reported Healthcare-Associated Infections:

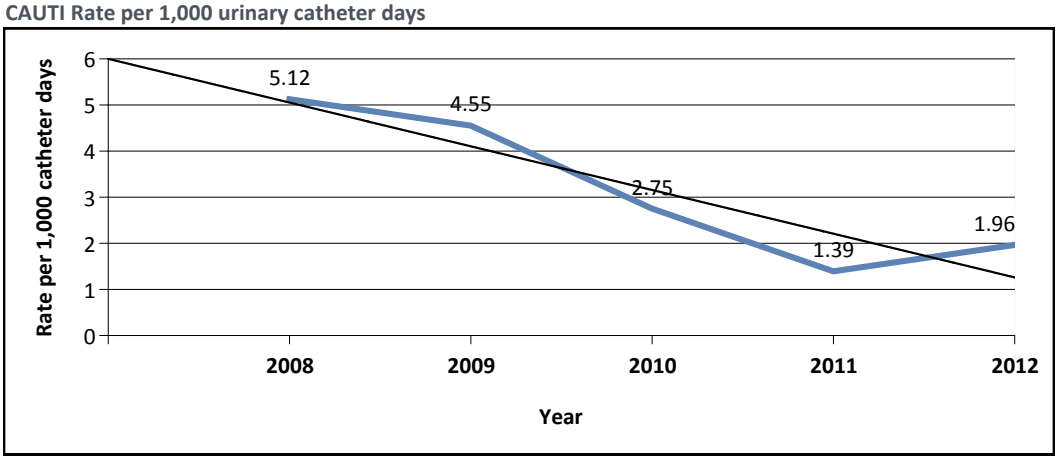
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	39,577	9	0	16	3	15	0	44	1	62	0	3.79
2009	82,906	14	0	59	8	42	0	87	17	125	0	4.25
2010	81,512	13	1	59	3	45	0	84	16	92	2	3.86
2011	87,580	13	4	33	2	38	0	105	5	43	1	2.79
2012	87,032	16	1	40	2	49	0	108	10	63	0	3.32

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	46	20.66	2.23	1.63 - 2.97	Worse
2009	92	44.52	2.07	1.67 - 2.53	Worse
2010	57	36.24	1.57	1.19 - 2.04	Worse
2011	30	37.01	0.81	0.55 - 1.16	Same as
2012	41	39.49	1.04	0.75 - 1.41	Same as

CAUTI Rate per 1,000 urinary catheter days



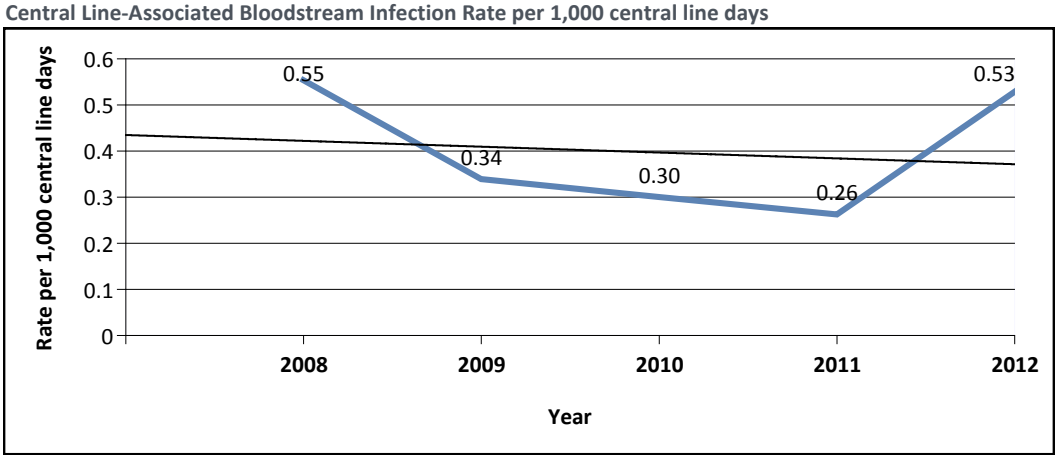
UPMC HAMOT

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	6	16.34	0.37	0.13 - 0.8	Better
2009	8	25.69	0.31	0.13 - 0.61	Better
2010	7	18.09	0.39	0.15 - 0.8	Better
2011	7	20.91	0.33	0.13 - 0.69	Better
2012	13	21.39	0.61	0.32 - 1.04	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.51	0.00	0 - 7.24	Same as
2009	2	0.87	2.29	0.26 - 8.27	Same as
2010	0	0.83	0.00	0 - 4.44	Same as
2011	2	1.07	1.87	0.21 - 6.75	Same as
2012	0	0.90	0.00	0 - 4.06	Same as

UPMC HORIZON

NHSN ID: 11675

Hospital type: Acute care general hospital

Number of licensed beds (2012): 171

Number of reported Healthcare-Associated Infections:

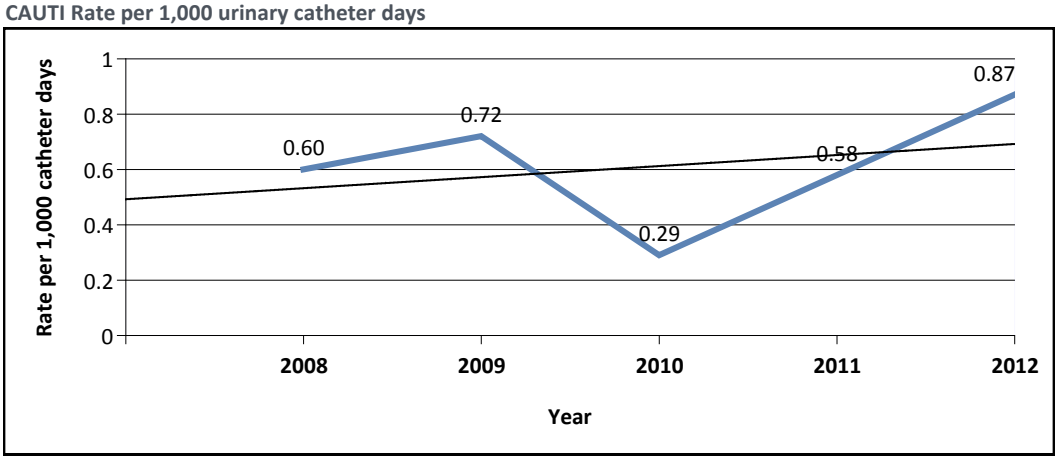
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	19,278	4	0	11	0	8	0	10	0	6	0	2.02
2009	39,194	8	0	24	1	49	0	32	1	11	0	3.21
2010	40,285	3	0	8	0	22	0	32	2	7	0	1.84
2011	34,976	2	0	2	0	30	0	24	4	6	0	1.94
2012	34,860	1	0	9	0	28	0	25	0	11	0	2.12

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	7.93	0.25	0.03 - 0.91	Better
2009	5	15.28	0.33	0.11 - 0.76	Better
2010	2	12.02	0.17	0.02 - 0.6	Better
2011	4	8.58	0.47	0.13 - 1.19	Same as
2012	6	12.82	0.47	0.17 - 1.02	Same as

CAUTI Rate per 1,000 urinary catheter days



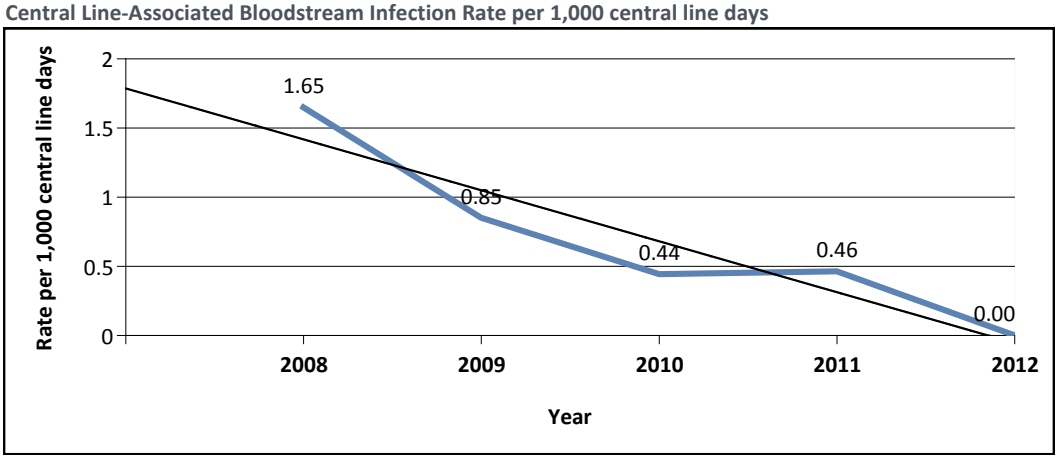
UPMC HORIZON

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	4	3.50	1.14	0.31 - 2.93	Same as
2009	4	6.24	0.64	0.17 - 1.64	Same as
2010	2	4.03	0.50	0.06 - 1.79	Same as
2011	2	2.57	0.78	0.09 - 2.81	Same as
2012	0	2.98	0.00	0 - 1.23	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



UPMC MCKEESPORT

NHSN ID: 11707

Hospital type: Acute care general hospital

Number of licensed beds (2012): 207

Number of reported Healthcare-Associated Infections:

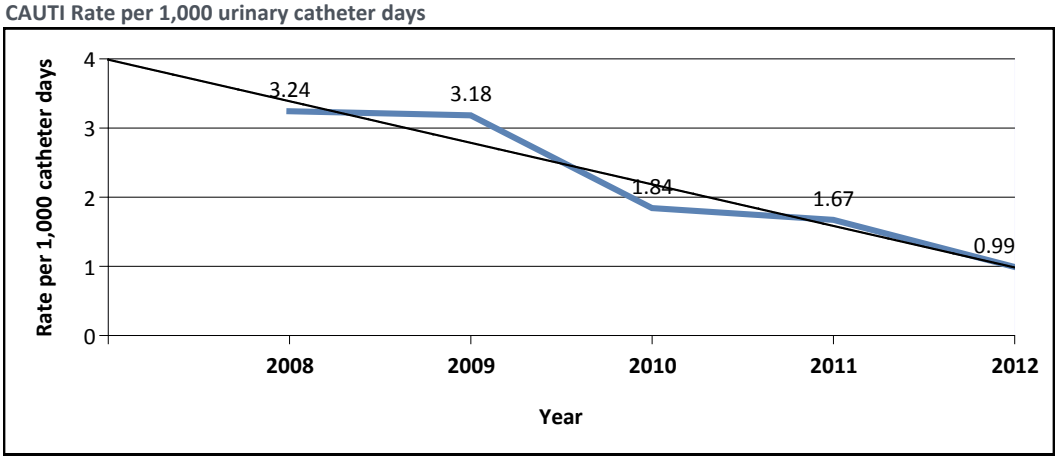
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	21,456	5	0	21	0	9	0	5	4	31	0	3.50
2009	54,051	11	2	63	1	26	0	30	8	46	0	3.46
2010	62,590	9	4	42	1	23	0	29	10	40	0	2.52
2011	64,473	6	0	24	0	30	1	26	6	36	0	2.00
2012	56,499	10	0	10	1	17	0	13	6	30	0	1.54

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	9	6.93	1.30	0.59 - 2.46	Same as
2009	23	16.06	1.43	0.91 - 2.15	Same as
2010	13	12.61	1.03	0.55 - 1.76	Same as
2011	11	9.95	1.10	0.55 - 1.98	Same as
2012	6	10.95	0.55	0.2 - 1.19	Same as

CAUTI Rate per 1,000 urinary catheter days



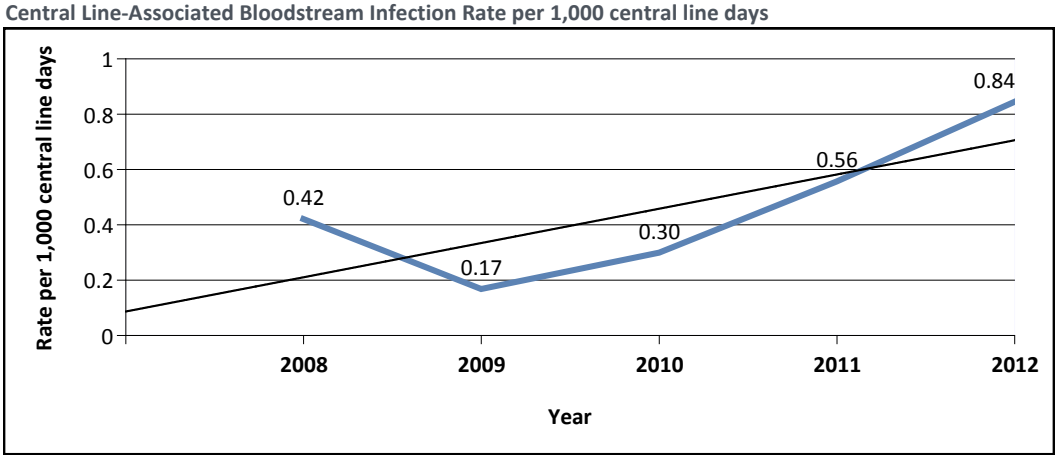
UPMC MCKEESPORT

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	3.40	0.29	0 - 1.64	Same as
2009	1	8.06	0.12	0 - 0.69	Better
2010	2	6.01	0.33	0.04 - 1.2	Same as
2011	4	6.70	0.60	0.16 - 1.53	Same as
2012	6	5.40	1.11	0.41 - 2.42	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



UPMC MERCY

NHSN ID: 10384

Hospital type: Acute care general hospital

Number of licensed beds (2012): 495

Number of reported Healthcare-Associated Infections:

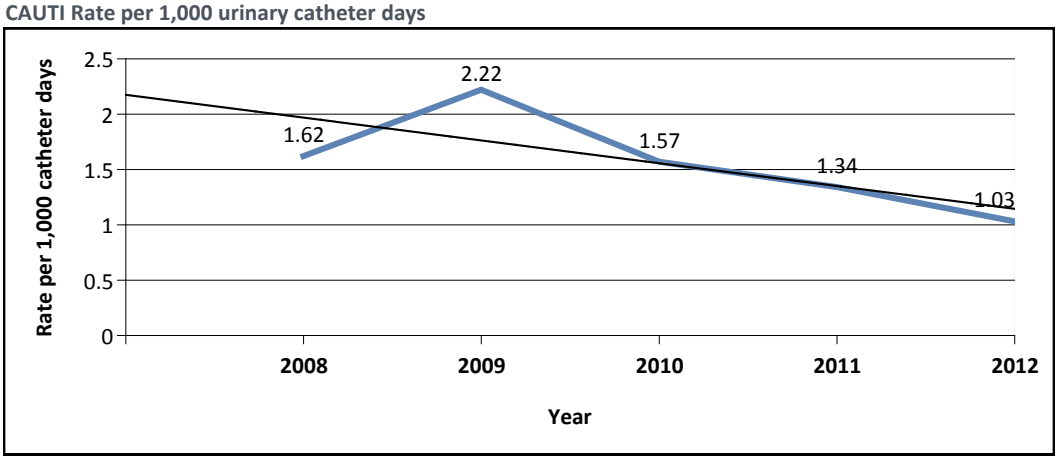
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	48,782	17	0	47	1	30	0	33	1	42	4	3.59
2009	120,160	77	0	78	8	85	0	112	5	107	2	3.94
2010	145,652	24	1	54	25	80	1	123	10	111	2	2.96
2011	144,046	12	1	28	7	57	0	93	4	93	4	2.08
2012	147,425	33	3	50	2	39	0	131	7	116	4	2.61

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	20	27.88	0.72	0.44 - 1.11	Same as
2009	53	52.73	1.01	0.75 - 1.31	Same as
2010	42	47.12	0.89	0.64 - 1.2	Same as
2011	33	40.08	0.82	0.57 - 1.16	Same as
2012	29	52.25	0.55	0.37 - 0.8	Better

CAUTI Rate per 1,000 urinary catheter days



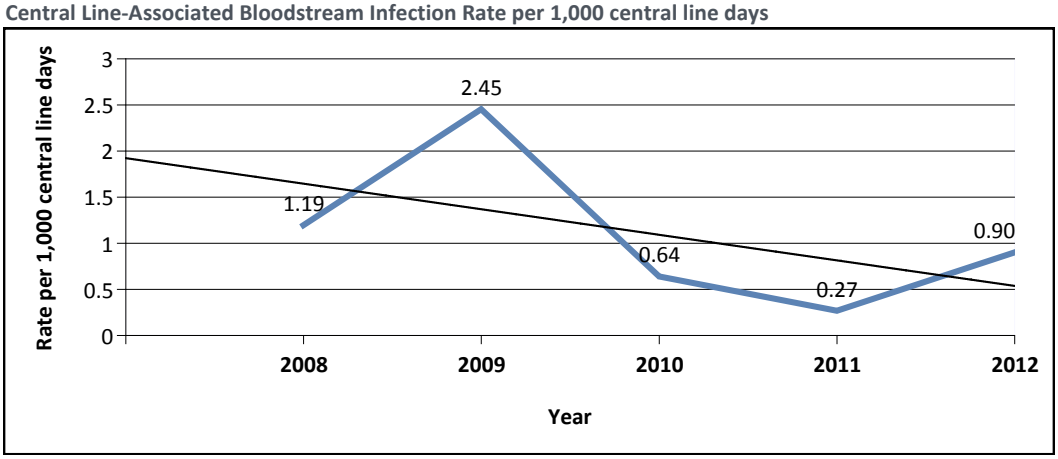
UPMC MERCY

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	15	18.88	0.79	0.44 - 1.31	Same as
2009	51	25.42	2.01	1.49 - 2.64	Worse
2010	15	19.83	0.76	0.42 - 1.25	Same as
2011	6	19.78	0.30	0.11 - 0.66	Better
2012	26	23.59	1.10	0.72 - 1.61	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.09	0.00	0 - 41.95	Same as
2009	0	0.21	0.00	0 - 17.16	Same as
2010	0	0.55	0.00	0 - 6.68	Same as
2011	1	0.17	5.91	0.08 - 32.88	Same as
2012	1	0.22	4.63	0.06 - 25.76	Same as

UPMC NORTHWEST

NHSN ID: 11837

Hospital type: Acute care general hospital

Number of licensed beds (2012): 164

Number of reported Healthcare-Associated Infections:

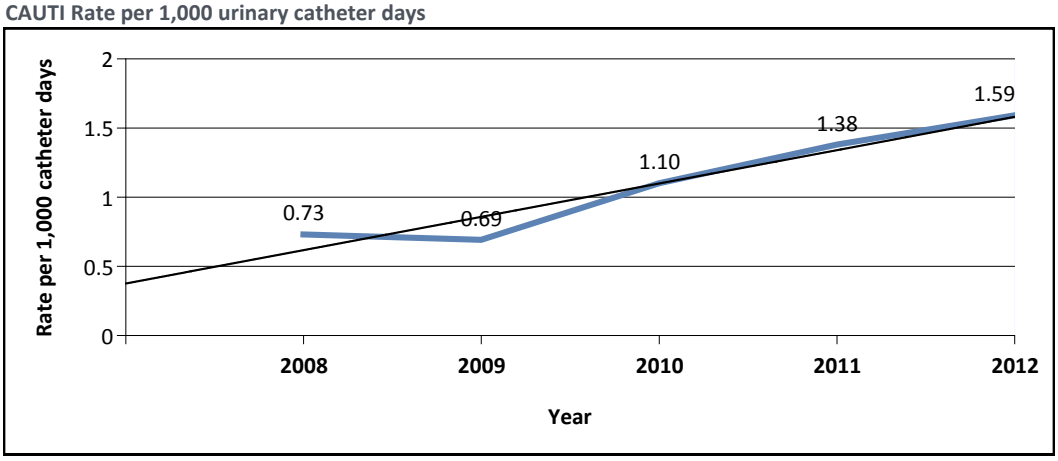
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	17,788	1	0	5	0	2	1	3	0	8	0	1.12
2009	41,211	8	0	20	0	6	0	24	0	5	0	1.53
2010	37,231	1	0	4	0	1	0	12	1	13	0	0.86
2011	35,676	2	0	7	0	4	0	13	0	21	0	1.32
2012	34,147	2	0	10	0	3	0	14	1	18	0	1.41

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	2	6.65	0.30	0.03 - 1.09	Same as
2009	4	9.31	0.43	0.12 - 1.1	Same as
2010	6	9.05	0.66	0.24 - 1.44	Same as
2011	7	6.06	1.16	0.46 - 2.38	Same as
2012	9	7.80	1.15	0.53 - 2.19	Same as

CAUTI Rate per 1,000 urinary catheter days



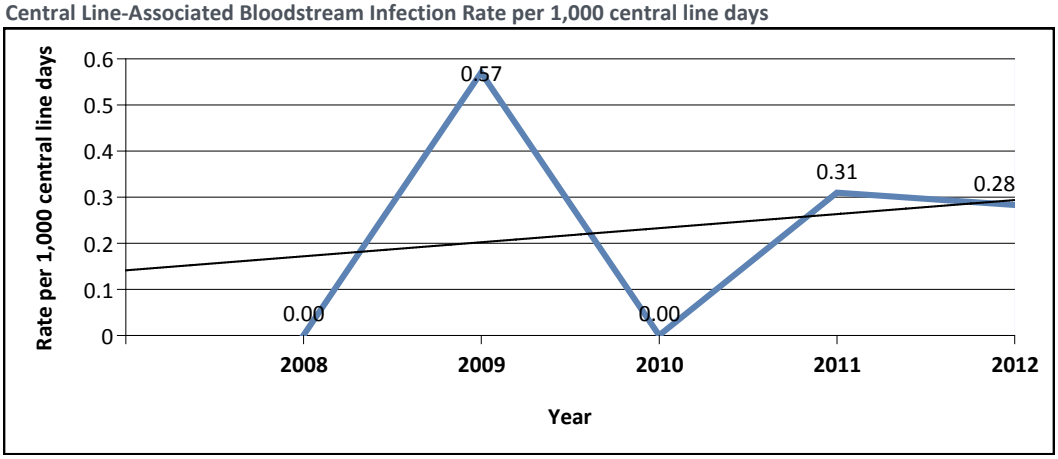
UPMC NORTHWEST

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	2.00	0.00	0 - 1.84	Same as
2009	2	3.27	0.61	0.07 - 2.21	Same as
2010	0	2.29	0.00	0 - 1.6	Same as
2011	1	1.96	0.51	0.01 - 2.84	Same as
2012	1	2.47	0.41	0.01 - 2.25	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Specialty Care Area

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	1.75	0.00	0 - 2.09	Same as
2009	2	3.91	0.51	0.06 - 1.85	Same as
2010	0	0.96	0.00	0 - 3.84	Same as
2011	1	2.43	0.41	0.01 - 2.29	Same as
2012	1	1.85	0.54	0.01 - 3	Same as

UPMC PASSAVANT

NHSN ID: 11242

Hospital type: Acute care general hospital

Number of licensed beds (2012): 413

Number of reported Healthcare-Associated Infections:

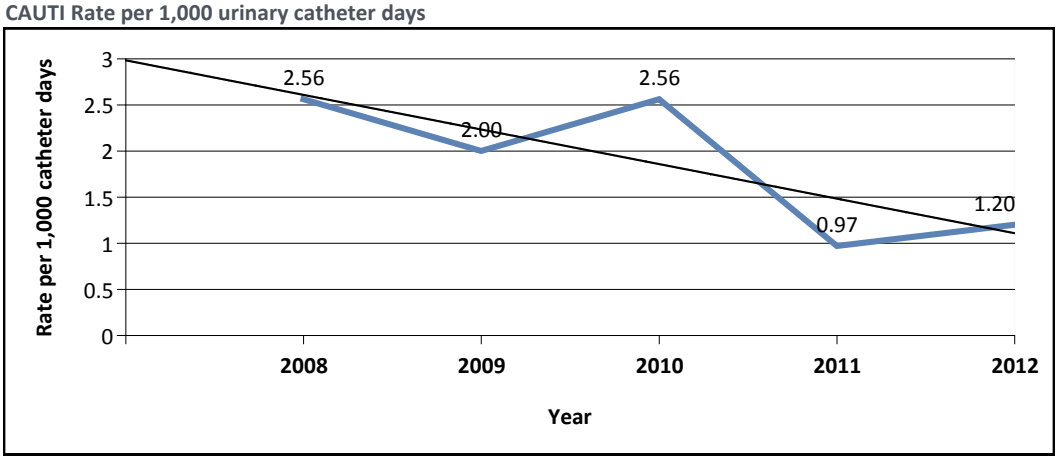
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	42,196	14	1	37	3	25	1	32	1	37	1	3.60
2009	87,432	25	2	92	7	48	0	84	1	76	0	3.83
2010	96,673	33	2	67	9	44	0	107	3	93	0	3.70
2011	105,433	15	0	67	8	48	0	138	5	74	0	3.37
2012	102,897	23	1	48	16	24	2	130	10	67	1	3.13

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	26	23.13	1.12	0.73 - 1.65	Same as
2009	51	40.81	1.25	0.93 - 1.64	Same as
2010	65	41.47	1.57	1.21 - 2	Worse
2011	30	41.16	0.73	0.49 - 1.04	Same as
2012	33	38.79	0.85	0.59 - 1.19	Same as

CAUTI Rate per 1,000 urinary catheter days



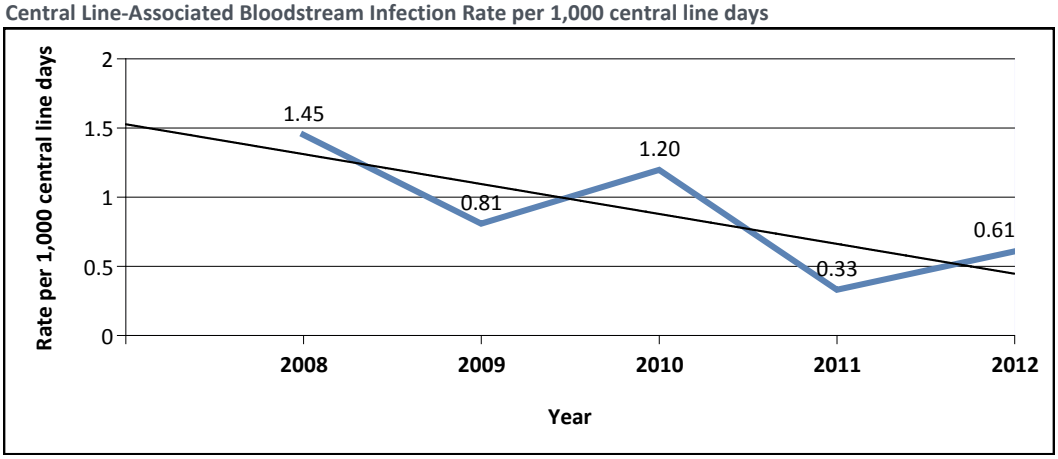
UPMC PASSAVANT

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	10	10.09	0.99	0.47 - 1.82	Same as
2009	15	15.16	0.99	0.55 - 1.63	Same as
2010	25	13.53	1.85	1.2 - 2.73	Worse
2011	7	11.61	0.60	0.24 - 1.24	Same as
2012	13	16.18	0.80	0.43 - 1.37	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



UPMC PRESBYTERIAN SHADYSIDE --- PRESBYTERIAN

NHSN ID: 10348

Hospital type: Acute care general hospital

Number of licensed beds (2012): 765

Number of reported Healthcare-Associated Infections:

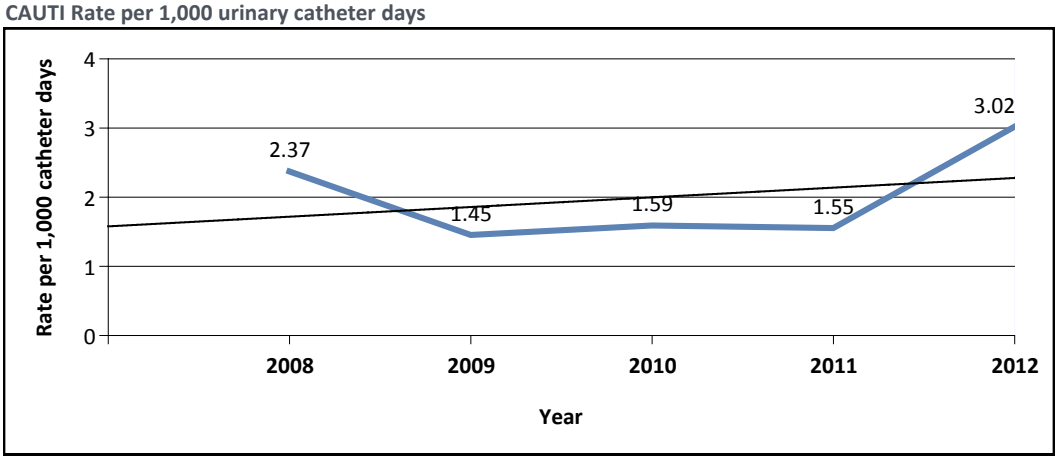
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	140,034	42	2	102	10	65	0	104	9	105	6	3.18
2009	215,188	83	6	138	27	139	0	254	12	159	17	3.88
2010	222,461	96	10	184	24	161	0	283	17	202	8	4.43
2011	224,769	95	13	150	27	198	0	315	17	193	13	4.54
2012	227,985	111	8	116	21	148	0	264	14	308	15	4.41

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	92	86.64	1.06	0.86 - 1.3	Same as
2009	119	179.14	0.66	0.55 - 0.79	Better
2010	138	150.37	0.92	0.77 - 1.08	Same as
2011	124	145.16	0.85	0.71 - 1.02	Same as
2012	215	135.56	1.59	1.38 - 1.81	Worse

CAUTI Rate per 1,000 urinary catheter days



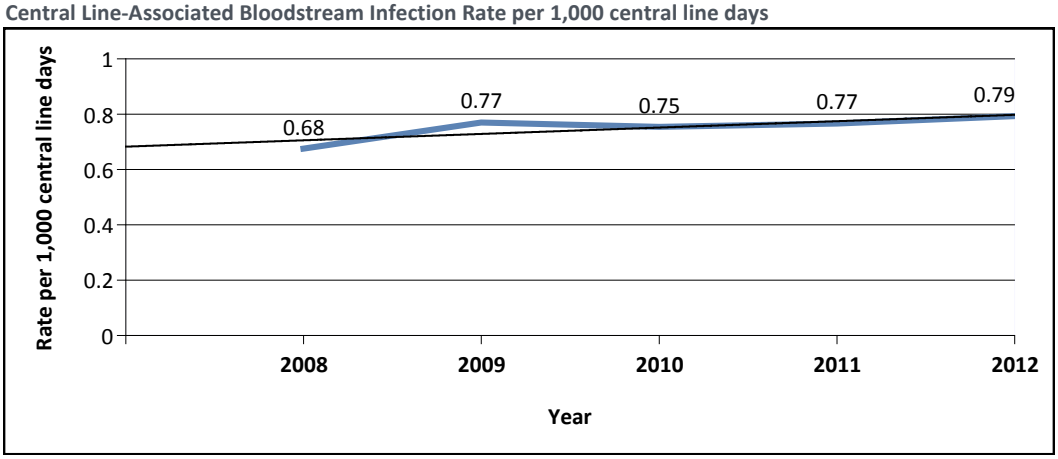
UPMC PRESBYTERIAN SHADYSIDE --- PRESBYTERIAN

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	25	55.82	0.45	0.29 - 0.66	Better
2009	72	93.30	0.77	0.6 - 0.97	Better
2010	76	73.28	1.04	0.82 - 1.3	Same as
2011	79	76.15	1.04	0.82 - 1.29	Same as
2012	84	98.95	0.85	0.68 - 1.05	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Specialty Care Area

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	7.41	0.41	0.08 - 1.18	Same as
2009	2	1.98	1.01	0.11 - 3.65	Same as
2010				-	
2011				-	
2012				-	

UPMC PRESBYTERIAN SHADYSIDE --- SHADYSIDE

NHSN ID: 10118

Hospital type: Acute care general hospital

Number of licensed beds (2012): 517

Number of reported Healthcare-Associated Infections:

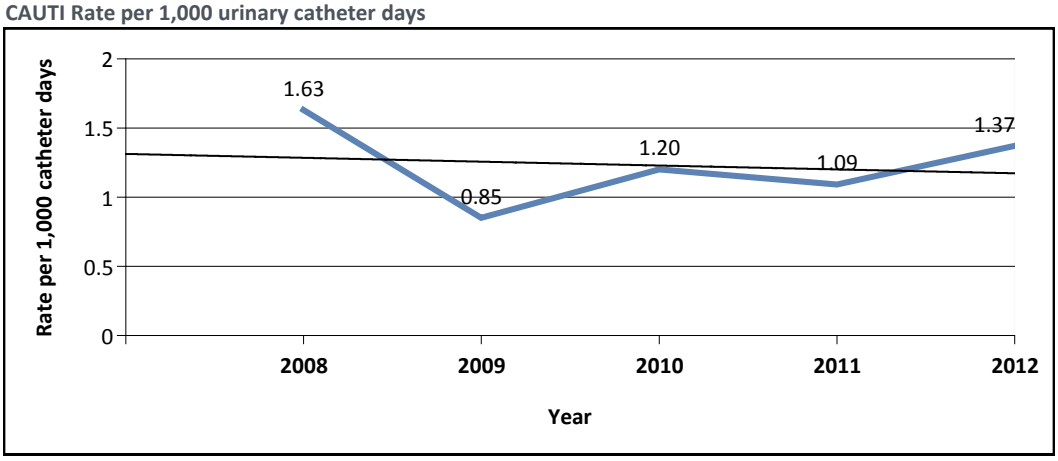
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	70,674	60	3	109	2	37	0	81	7	41	6	4.90
2009	149,079	55	10	184	2	51	0	180	8	55	2	3.67
2010	164,107	29	16	174	2	79	0	150	22	77	2	3.36
2011	170,109	38	15	189	6	114	0	183	15	99	8	3.92
2012	157,128	36	12	123	8	119	0	216	17	89	1	3.95

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	32	43.87	0.73	0.5 - 1.03	Same as
2009	32	83.11	0.39	0.26 - 0.54	Better
2010	42	61.22	0.69	0.49 - 0.93	Better
2011	49	78.23	0.63	0.46 - 0.83	Better
2012	55	75.68	0.73	0.55 - 0.95	Better

CAUTI Rate per 1,000 urinary catheter days



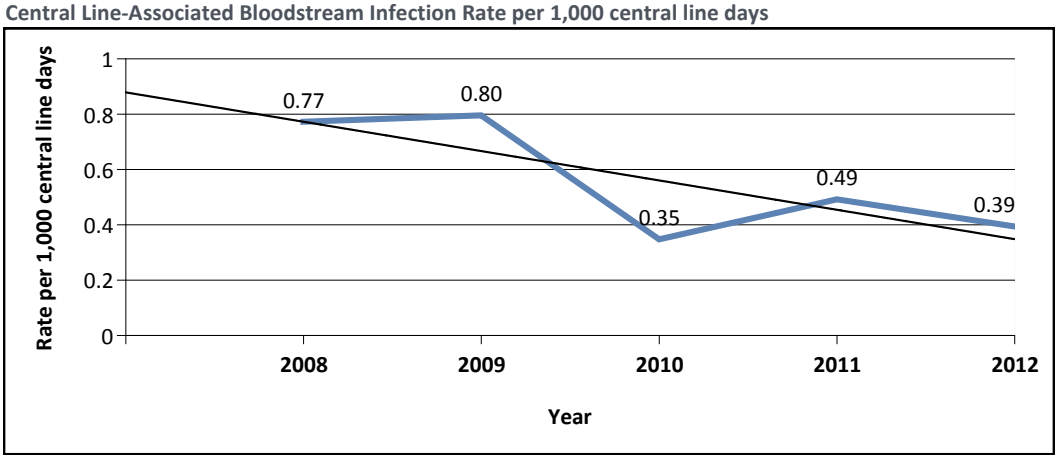
UPMC PRESBYTERIAN SHADYSIDE --- SHADYSIDE

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	13	25.34	0.51	0.27 - 0.88	Better
2009	26	36.76	0.71	0.46 - 1.04	Same as
2010	12	27.41	0.44	0.23 - 0.76	Better
2011	21	33.85	0.62	0.38 - 0.95	Better
2012	17	38.18	0.45	0.26 - 0.71	Better

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Specialty Care Area

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	10	13.22	0.76	0.36 - 1.39	Same as
2009	16	34.27	0.47	0.27 - 0.76	Better
2010	9	19.67	0.46	0.21 - 0.87	Better
2011	12	21.17	0.57	0.29 - 0.99	Better
2012	12	26.00	0.46	0.24 - 0.81	Better

UPMC PRESBYTERIAN SHADYSIDE --- WPIC

NHSN ID: 13702

Hospital type: Acute care general hospital

Number of licensed beds (2012): 312

Number of reported Healthcare-Associated Infections:

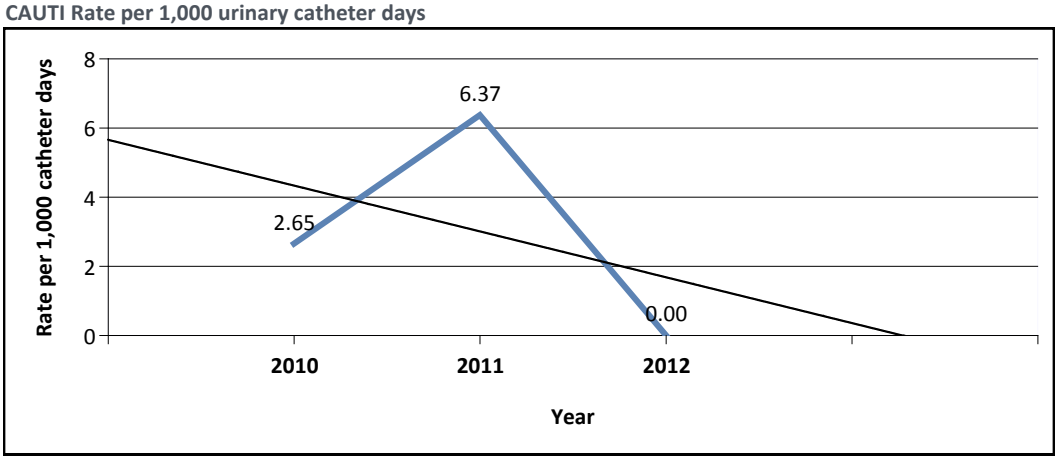
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008												
2009												
2010	102,693	1	1	2	0	2	0	0	2	17	0	0.24
2011	102,650	3	14	3	0	3	0	0	5	20	0	0.47
2012	104,169	2	23	2	0	1	0	0	3	10	0	0.39

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008				-	
2009				-	
2010	1	0.74	1.35	0.02 - 7.51	Same as
2011	2	0.29	6.95	0.78 - 25.1	Same as
2012	0	0.29	0.00	0 - 12.72	Same as

CAUTI Rate per 1,000 urinary catheter days



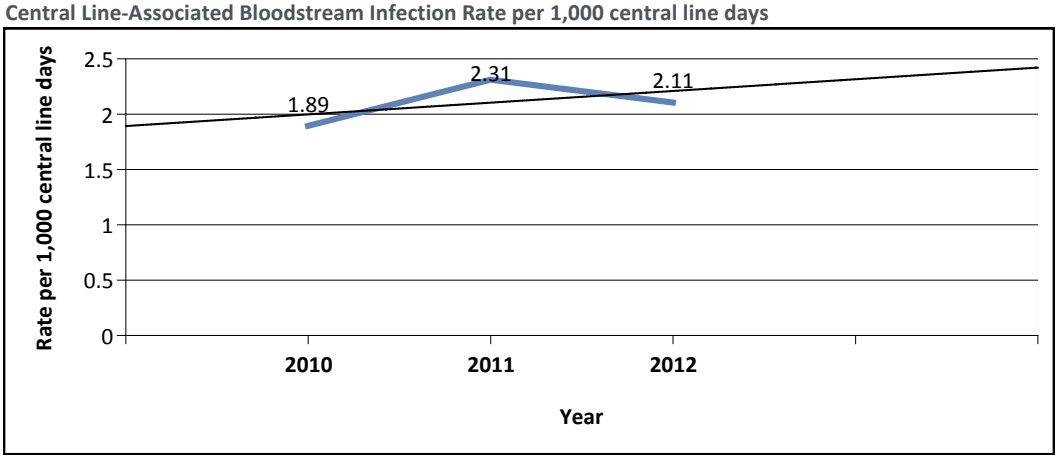
UPMC PRESBYTERIAN SHADYSIDE --- WPIC

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008				-	
2009				-	
2010	1	0.74	1.35	0.02 - 7.5	Same as
2011	3	1.74	1.72	0.35 - 5.04	Same as
2012	1	0.22	4.64	0.06 - 25.83	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



UPMC ST MARGARET

NHSN ID: 11561

Hospital type: Acute care general hospital

Number of licensed beds (2012): 249

Number of reported Healthcare-Associated Infections:

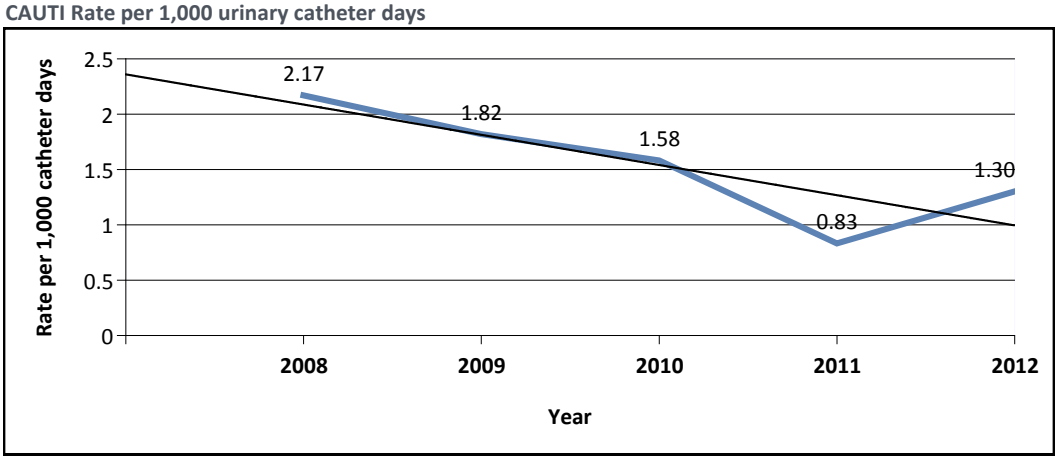
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	35,007	6	0	28	0	16	0	27	1	17	0	2.71
2009	74,555	12	0	42	0	12	0	55	4	37	0	2.17
2010	76,041	10	1	24	0	26	0	51	2	35	1	1.97
2011	79,022	12	1	19	1	23	0	59	3	25	0	1.81
2012	75,976	10	2	32	0	13	0	46	2	43	0	1.95

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	17	18.07	0.94	0.55 - 1.51	Same as
2009	34	41.09	0.83	0.57 - 1.16	Same as
2010	30	33.24	0.90	0.61 - 1.29	Same as
2011	15	30.87	0.49	0.27 - 0.8	Better
2012	24	34.72	0.69	0.44 - 1.03	Same as

CAUTI Rate per 1,000 urinary catheter days



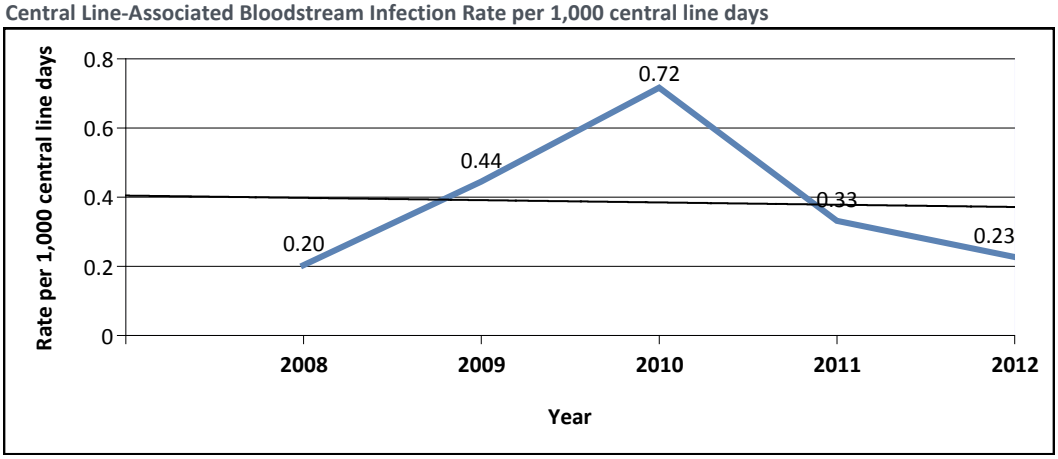
UPMC ST MARGARET

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	7.14	0.14	0 - 0.78	Better
2009	5	14.20	0.35	0.11 - 0.82	Better
2010	8	9.58	0.84	0.36 - 1.65	Same as
2011	4	10.69	0.37	0.1 - 0.96	Better
2012	3	10.60	0.28	0.06 - 0.83	Better

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



VALLEY FORGE MEDICAL CENTER AND HOSPITAL

NHSN ID: 12029

Hospital type: Rehabilitation hospital

Number of licensed beds (2012): 50

Number of reported Healthcare-Associated Infections:

Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	7,784	0	0	0	0	0	0	0	0	0	0	0.00
2009	15,969	0	0	0	0	0	0	0	0	0	0	0.00
2010	16,659	0	0	0	0	0	0	0	0	0	0	0.00
2011	17,024	0	0	0	0	0	0	0	0	0	0	0.00
2012	16,874	0	0	0	0	0	0	0	0	0	0	0.00

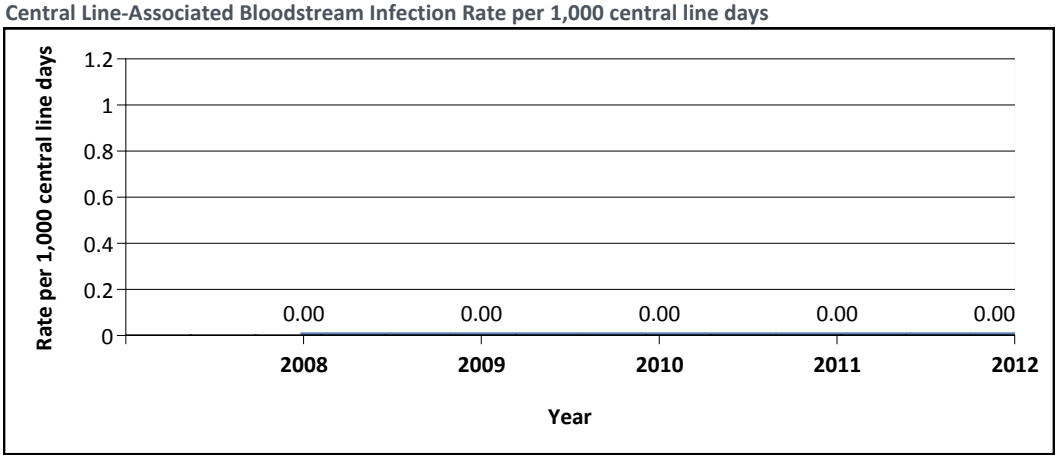
VALLEY FORGE MEDICAL CENTER AND HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.32	0.00	0 - 11.39	Same as
2009	0	0.56	0.00	0 - 6.5	Same as
2010	0	0.42	0.00	0 - 8.8	Same as
2011	0	0.27	0.00	0 - 13.4	Same as
2012	0	0.07	0.00	0 - 49.85	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



WARREN GENERAL HOSPITAL

NHSN ID: 12216

Hospital type: Acute care general hospital

Number of licensed beds (2012): 87

Number of reported Healthcare-Associated Infections:

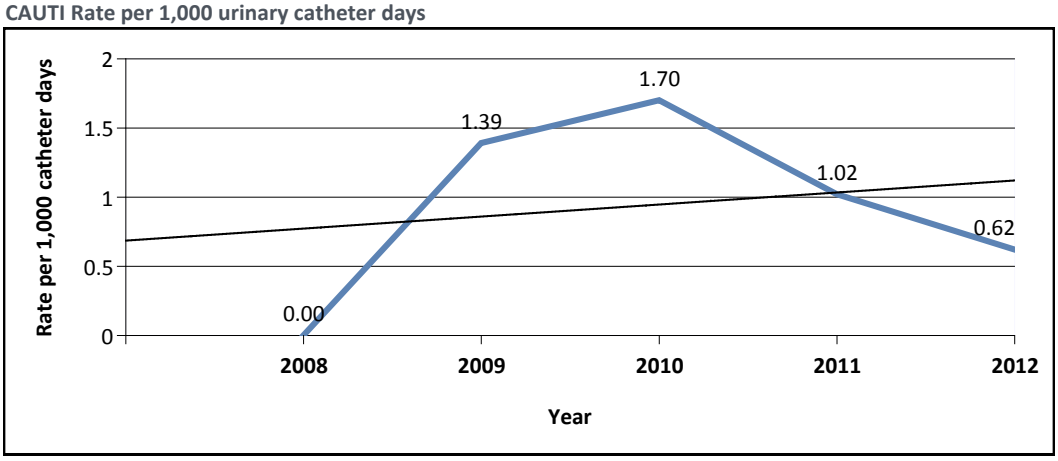
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	6,126	0	0	0	0	0	1	2	0	2	0	0.82
2009	12,347	0	0	3	0	1	0	3	1	3	0	0.89
2010	11,870	0	0	2	0	2	0	7	1	7	0	1.60
2011	13,033	2	0	8	0	4	0	8	0	2	0	1.84
2012	13,257	2	0	3	0	0	1	11	1	2	2	1.66

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	2.46	0.00	0 - 1.49	Same as
2009	3	3.48	0.86	0.17 - 2.52	Same as
2010	4	3.88	1.03	0.28 - 2.64	Same as
2011	2	2.37	0.84	0.09 - 3.04	Same as
2012	1	2.18	0.46	0.01 - 2.55	Same as

CAUTI Rate per 1,000 urinary catheter days



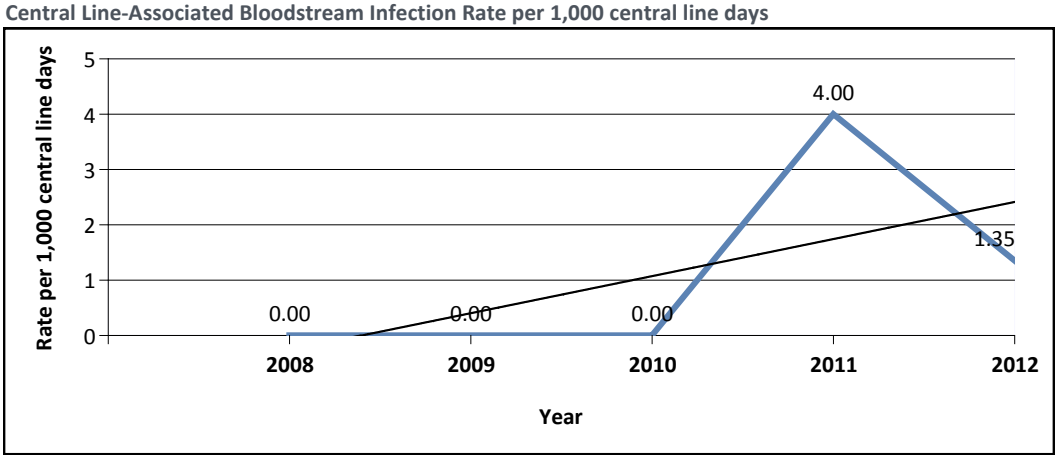
WARREN GENERAL HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.18	0.00	0 - 20.03	Same as
2009	0	0.51	0.00	0 - 7.22	Same as
2010	0	0.19	0.00	0 - 19.56	Same as
2011	2	0.36	5.55	0.62 - 20.04	Same as
2012	1	0.46	2.20	0.03 - 12.22	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



WARREN STATE HOSPITAL

NHSN ID: 12081

Hospital type: Psychiatric hospital

Number of licensed beds (2012): 190

Number of reported Healthcare-Associated Infections:

Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008												
2009	6,068	0	0	0	0	0	0	0	0	0	0	0.00
2010	65,960	0	0	0	0	0	0	0	0	0	0	0.00
2011	5,042	0	0	0	0	0	0	0	0	0	0	0.00
2012	42,705	0	0	0	0	0	0	0	0	0	0	0.00

WAYNE MEMORIAL HOSPITAL

NHSN ID: 12004

Hospital type: Acute care general hospital

Number of licensed beds (2012): 112

Number of reported Healthcare-Associated Infections:

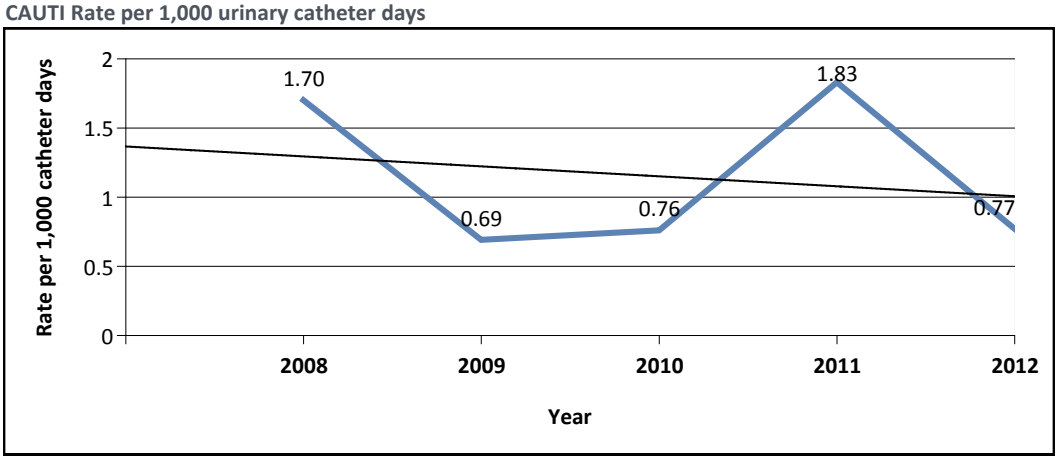
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	10,129	1	0	6	0	1	0	5	0	4	0	1.68
2009	19,702	1	0	1	0	2	0	9	0	5	0	0.91
2010	18,141	0	0	3	0	6	1	6	1	8	0	1.38
2011	15,942	1	1	3	0	11	0	13	0	5	0	2.13
2012	18,519	4	2	6	0	9	1	19	1	11	0	2.86

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	4.22	0.71	0.14 - 2.08	Same as
2009	2	4.68	0.43	0.05 - 1.54	Same as
2010	2	4.38	0.46	0.05 - 1.65	Same as
2011	5	3.36	1.49	0.48 - 3.47	Same as
2012	2	3.54	0.56	0.06 - 2.04	Same as

CAUTI Rate per 1,000 urinary catheter days



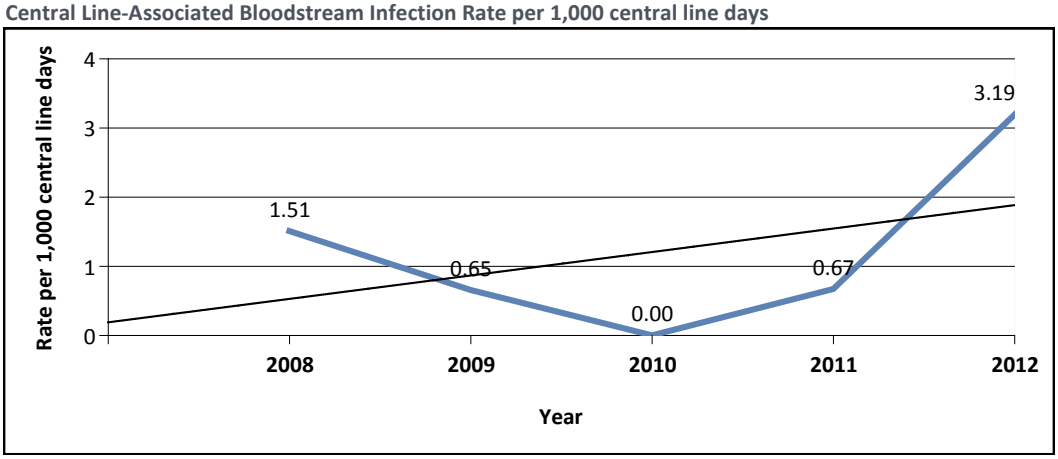
WAYNE MEMORIAL HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	0.92	1.08	0.01 - 6.04	Same as
2009	1	1.55	0.65	0.01 - 3.6	Same as
2010	0	1.10	0.00	0 - 3.33	Same as
2011	1	0.93	1.08	0.01 - 6.01	Same as
2012	4	0.79	5.03	1.35 - 12.89	Worse

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



WAYNESBORO HOSPITAL

NHSN ID: 11642

Hospital type: Acute care general hospital

Number of licensed beds (2012): 62

Number of reported Healthcare-Associated Infections:

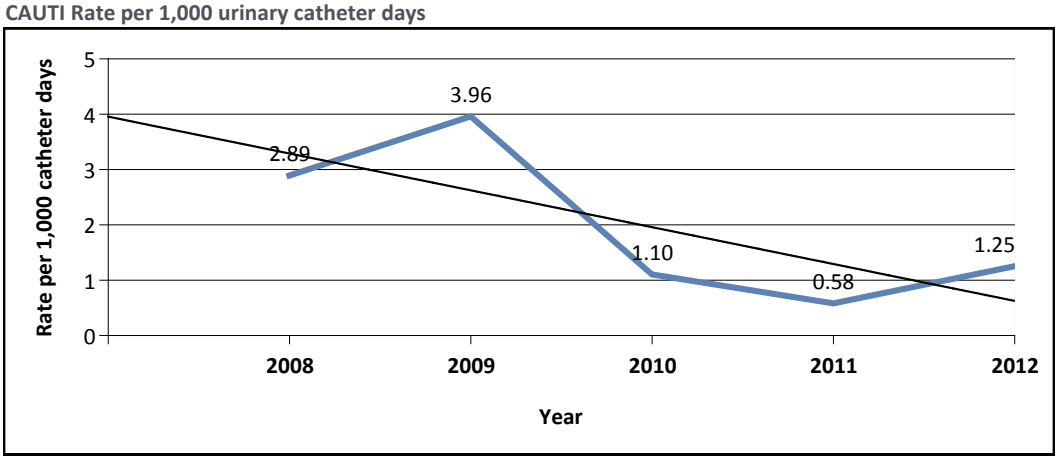
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	6,153	1	0	6	0	7	3	1	0	4	0	3.58
2009	11,953	0	0	10	0	9	1	4	0	8	0	2.68
2010	9,970	0	0	3	0	7	1	5	0	4	0	2.01
2011	9,729	0	0	0	0	2	0	1	0	1	0	0.41
2012	9,841	0	0	0	0	14	0	6	0	2	0	2.24

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	2.49	1.20	0.24 - 3.52	Same as
2009	7	2.85	2.45	0.98 - 5.05	Same as
2010	2	3.00	0.67	0.07 - 2.4	Same as
2011	1	2.13	0.47	0.01 - 2.61	Same as
2012	2	2.19	0.91	0.1 - 3.29	Same as

CAUTI Rate per 1,000 urinary catheter days



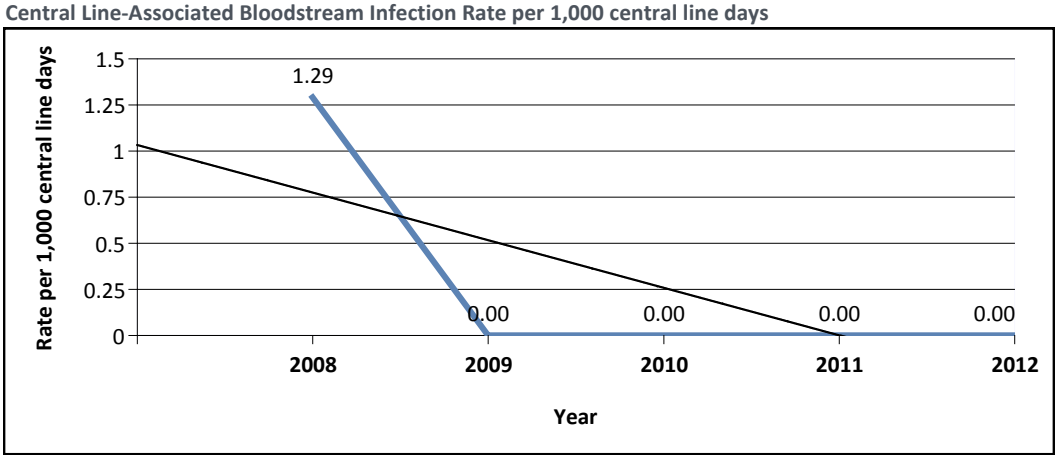
WAYNESBORO HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	1.12	0.90	0.01 - 4.98	Same as
2009	0	1.24	0.00	0 - 2.95	Same as
2010	0	0.80	0.00	0 - 4.59	Same as
2011	0	0.58	0.00	0 - 6.32	Same as
2012	0	0.72	0.00	0 - 5.09	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



WERNERSVILLE STATE HOSPITAL

NHSN ID: 12368

Hospital type: Psychiatric hospital

Number of licensed beds (2012): 320

Number of reported Healthcare-Associated Infections:

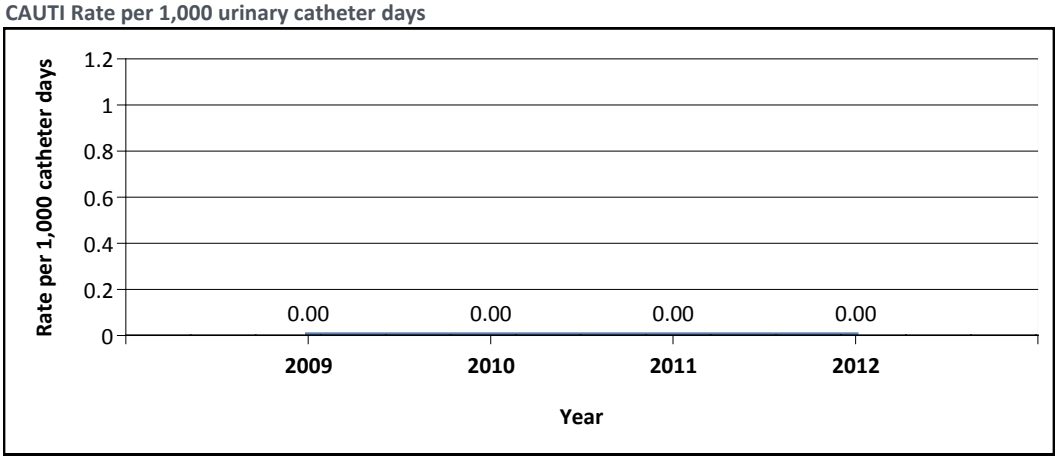
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008												
2009	78,230	0	8	0	0	4	0	0	6	10	0	0.36
2010	89,641	0	10	0	0	0	0	0	13	14	0	0.41
2011	97,823	0	12	1	0	0	0	0	15	8	0	0.37
2012	97,099	0	15	1	0	0	0	0	25	8	0	0.50

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008				-	
2009	0	0.65	0.00	0 - 5.62	Same as
2010	0	0.51	0.00	0 - 7.25	Same as
2011	0	0.11	0.00	0 - 34.83	Same as
2012	0	0.13	0.00	0 - 28.03	Same as

CAUTI Rate per 1,000 urinary catheter days



WESTFIELD HOSPITAL

NHSN ID: 12487

Hospital type: Acute care general hospital

Number of licensed beds (2012): 25

Number of reported Healthcare-Associated Infections:

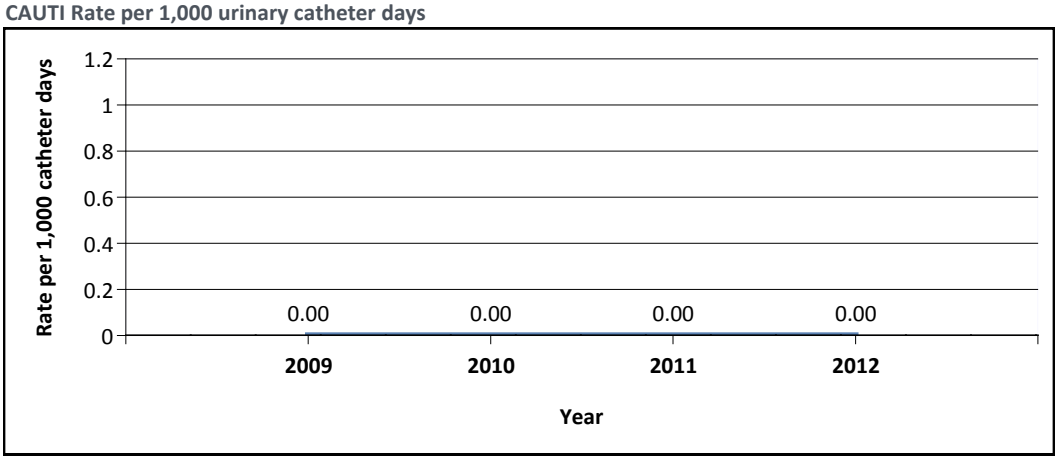
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	386	0	0	0	0	0	0	0	0	0	0	0.00
2009	1,462	0	0	0	0	0	0	0	0	0	0	0.00
2010	1,823	0	0	0	0	0	0	1	0	1	0	1.10
2011	2,004	0	0	0	0	0	0	2	0	0	0	1.00
2012	1,361	0	0	0	0	0	0	2	0	0	0	1.47

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008				-	
2009	0	0.20	0.00	0 - 18.45	Same as
2010	0	0.22	0.00	0 - 16.31	Same as
2011	0	0.19	0.00	0 - 19.15	Same as
2012	0	0.19	0.00	0 - 19.33	Same as

CAUTI Rate per 1,000 urinary catheter days



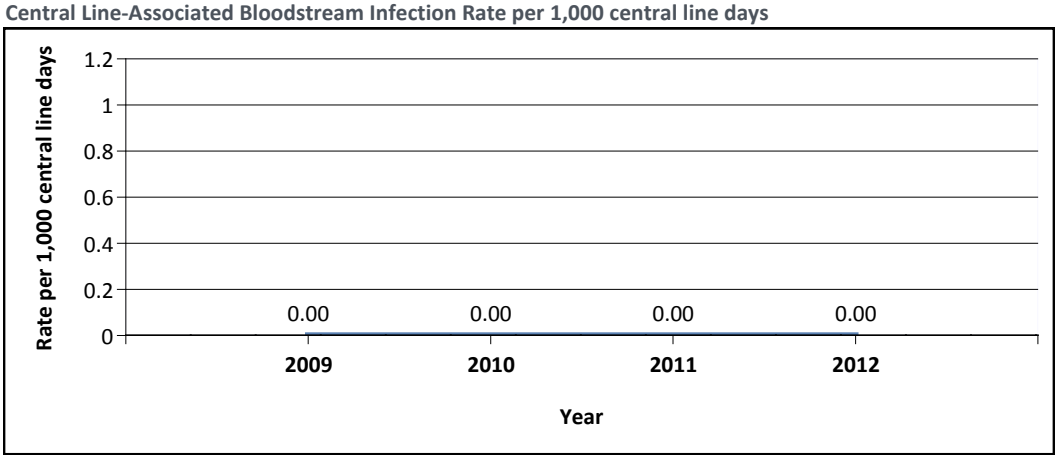
WESTFIELD HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008				-	
2009	0	0.07	0.00	0 - 53.32	Same as
2010	0	0.06	0.00	0 - 58.56	Same as
2011	0	0.08	0.00	0 - 44.75	Same as
2012	0	0.05	0.00	0 - 68.92	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



WILKES-BARRE GENERAL HOSPITAL

NHSN ID: 11916

Hospital type: Acute care general hospital

Number of licensed beds (2012): 412

Number of reported Healthcare-Associated Infections:

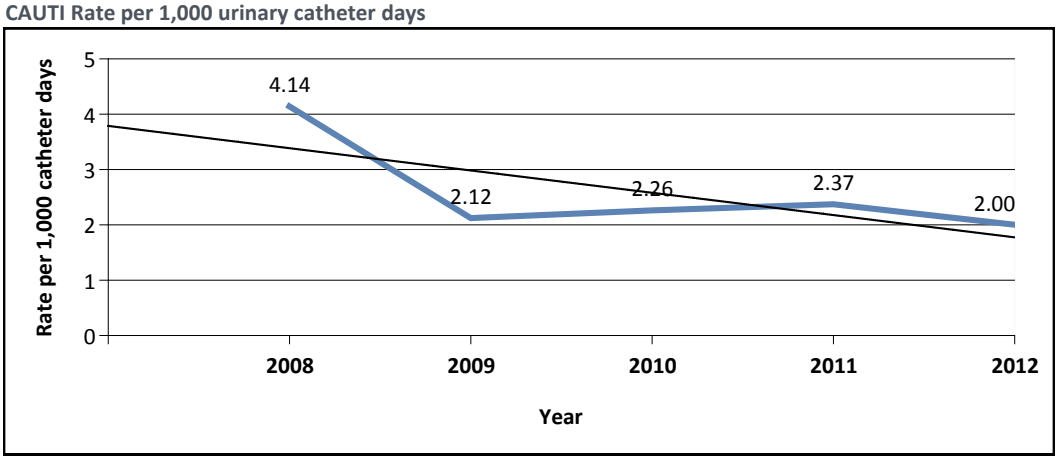
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	40,913	27	1	12	5	28	0	33	7	62	1	4.30
2009	84,199	22	1	29	3	48	1	72	8	65	5	3.02
2010	82,205	29	3	21	5	46	0	80	4	81	3	3.31
2011	84,294	32	3	25	5	37	2	56	5	67	3	2.79
2012	88,283	16	4	40	7	24	1	79	3	64	0	2.70

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	54	28.57	1.89	1.42 - 2.47	Worse
2009	54	40.66	1.33	1 - 1.73	Same as
2010	51	36.89	1.38	1.03 - 1.82	Worse
2011	52	37.95	1.37	1.02 - 1.8	Worse
2012	45	42.54	1.06	0.77 - 1.42	Same as

CAUTI Rate per 1,000 urinary catheter days



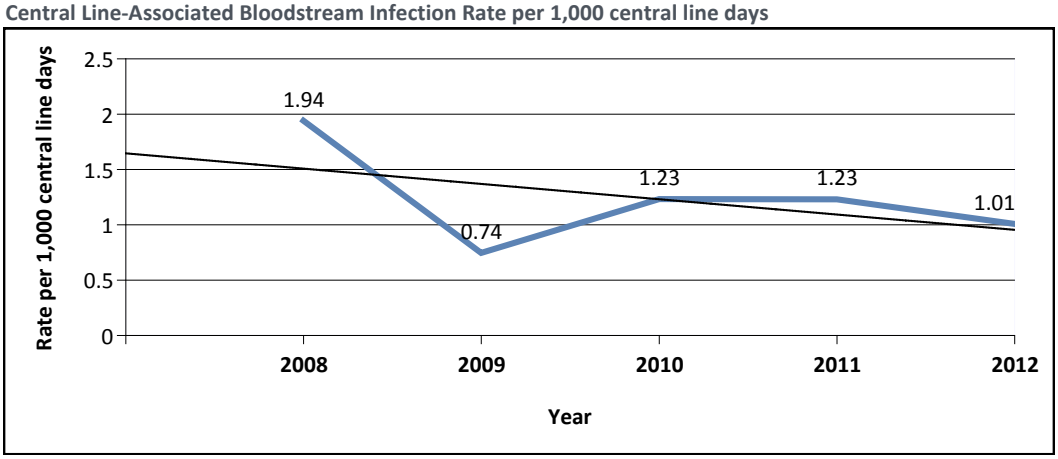
WILKES-BARRE GENERAL HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	7	5.14	1.36	0.55 - 2.81	Same as
2009	6	7.55	0.79	0.29 - 1.73	Same as
2010	10	5.78	1.73	0.83 - 3.18	Same as
2011	10	7.61	1.31	0.63 - 2.42	Same as
2012	9	6.72	1.34	0.61 - 2.54	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Specialty Care Area

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	5	3.53	1.42	0.46 - 3.31	Same as
2009	6	5.09	1.18	0.43 - 2.57	Same as
2010	2	1.75	1.14	0.13 - 4.12	Same as
2011	7	2.38	2.94	1.18 - 6.05	Worse
2012	1	1.71	0.58	0.01 - 3.25	Same as

WILLIAMSPORT REGIONAL MEDICAL CENTER

NHSN ID: 11732

Hospital type: Acute care general hospital

Number of licensed beds (2012): 207

Number of reported Healthcare-Associated Infections:

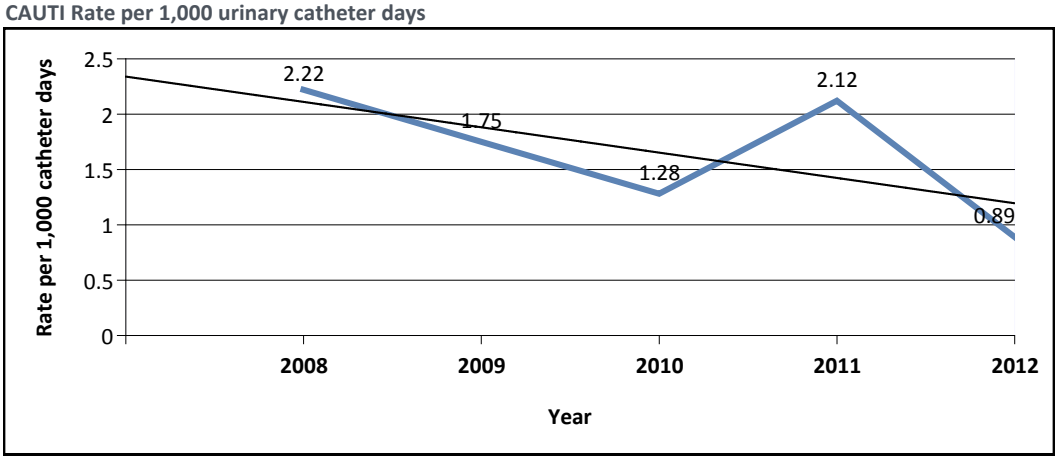
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	25,552	7	0	28	1	6	0	43	7	19	1	4.38
2009	53,384	11	1	20	3	25	0	55	3	43	1	3.03
2010	49,673	9	0	18	6	6	4	43	9	29	0	2.50
2011	54,085	7	10	21	4	15	1	47	9	48	2	3.03
2012	53,152	5	39	20	2	9	3	42	5	45	0	3.20

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	14	14.32	0.98	0.53 - 1.64	Same as
2009	20	25.28	0.79	0.48 - 1.22	Same as
2010	12	16.49	0.73	0.38 - 1.27	Same as
2011	20	15.40	1.30	0.79 - 2.01	Same as
2012	7	14.41	0.49	0.19 - 1	Same as

CAUTI Rate per 1,000 urinary catheter days



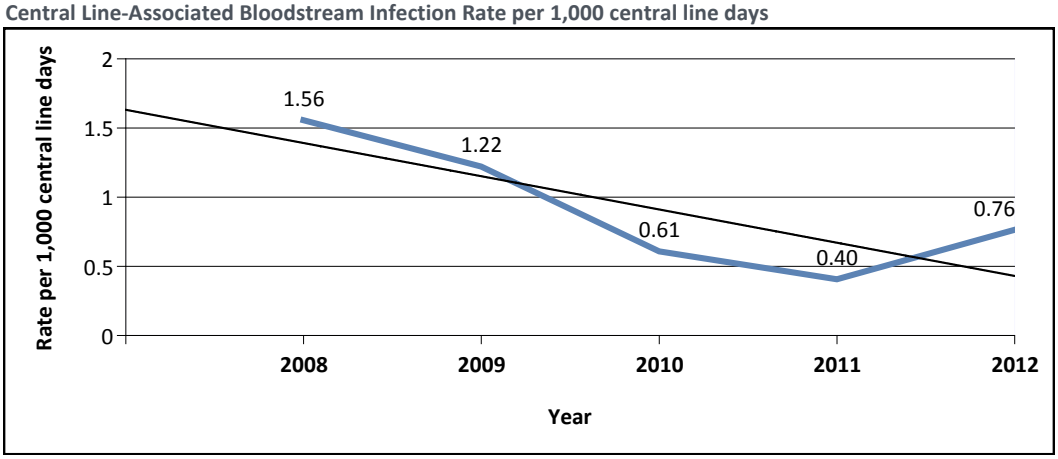
WILLIAMSPORT REGIONAL MEDICAL CENTER

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	5	4.63	1.08	0.35 - 2.52	Same as
2009	8	8.64	0.93	0.4 - 1.82	Same as
2010	4	5.73	0.70	0.19 - 1.79	Same as
2011	3	6.68	0.45	0.09 - 1.31	Same as
2012	5	4.98	1.00	0.32 - 2.34	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.00	0.00	0 - 940.12	Same as
2009	0	0.01	0.00	0 - 288.11	Same as
2010				-	
2011				-	
2012				-	

WINDBER HOSPITAL

NHSN ID: 12031

Hospital type: Acute care general hospital

Number of licensed beds (2012): 54

Number of reported Healthcare-Associated Infections:

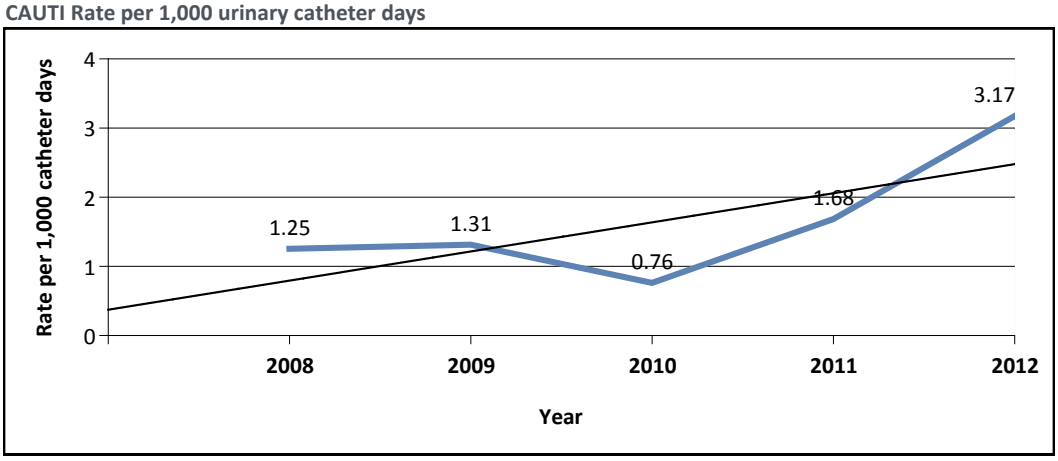
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,755	0	2	0	0	0	0	3	0	1	0	1.60
2009	9,160	0	0	1	0	0	0	7	1	4	1	1.53
2010	8,114	1	0	0	0	1	0	8	0	2	0	1.48
2011	7,878	0	0	0	0	1	0	6	0	2	0	1.14
2012	7,704	0	0	0	0	1	0	9	0	6	0	2.08

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	1	1.85	0.54	0.01 - 3	Same as
2009	2	2.46	0.81	0.09 - 2.94	Same as
2010	1	2.17	0.46	0.01 - 2.57	Same as
2011	2	1.44	1.39	0.16 - 5.02	Same as
2012	4	1.73	2.31	0.62 - 5.9	Same as

CAUTI Rate per 1,000 urinary catheter days



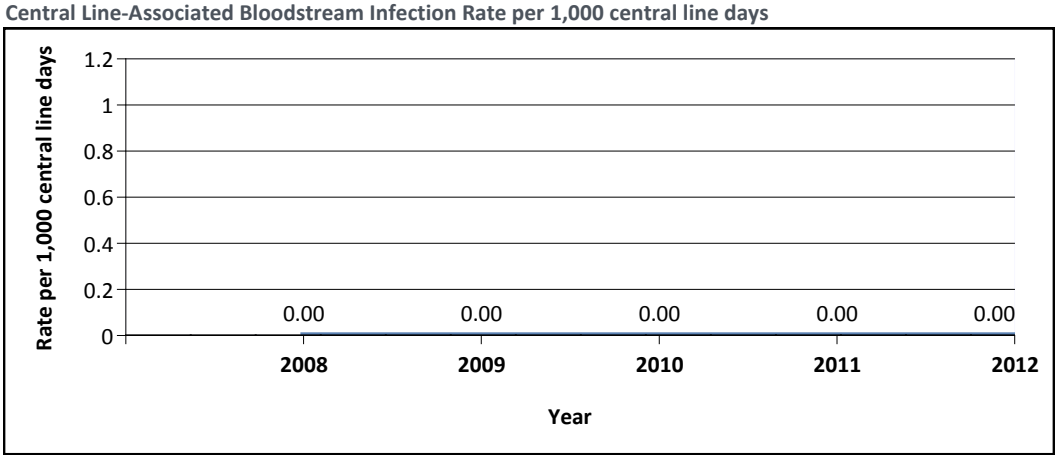
WINDBER HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.07	0.00	0 - 50.36	Same as
2009	0	0.19	0.00	0 - 19.69	Same as
2010	0	0.10	0.00	0 - 38.17	Same as
2011	0	0.10	0.00	0 - 35.18	Same as
2012	0	0.04	0.00	0 - 102.79	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



YORK HOSPITAL

NHSN ID: 10108

Hospital type: Acute care general hospital

Number of licensed beds (2012): 572

Number of reported Healthcare-Associated Infections:

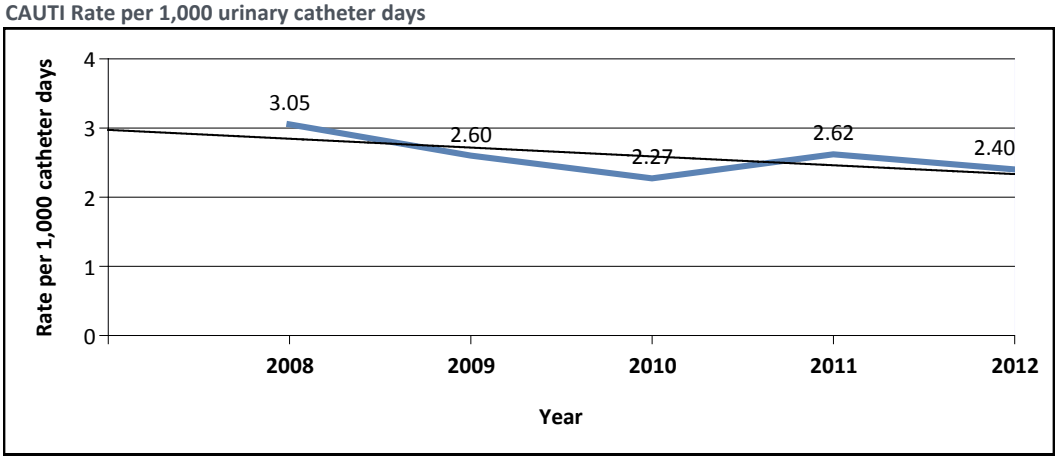
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	75,640	15	12	57	4	31	6	70	8	62	4	3.56
2009	172,273	22	5	131	4	72	10	128	9	108	2	2.85
2010	167,442	26	5	94	18	87	7	145	8	102	1	2.94
2011	175,653	17	7	89	30	85	8	147	19	112	5	2.95
2012	162,496	23	11	78	55	61	3	128	13	101	4	2.94

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	55	41.19	1.34	1.01 - 1.74	Worse
2009	87	73.94	1.18	0.94 - 1.45	Same as
2010	72	55.80	1.29	1.01 - 1.63	Worse
2011	74	45.58	1.62	1.27 - 2.04	Worse
2012	67	51.70	1.30	1 - 1.65	Worse

CAUTI Rate per 1,000 urinary catheter days



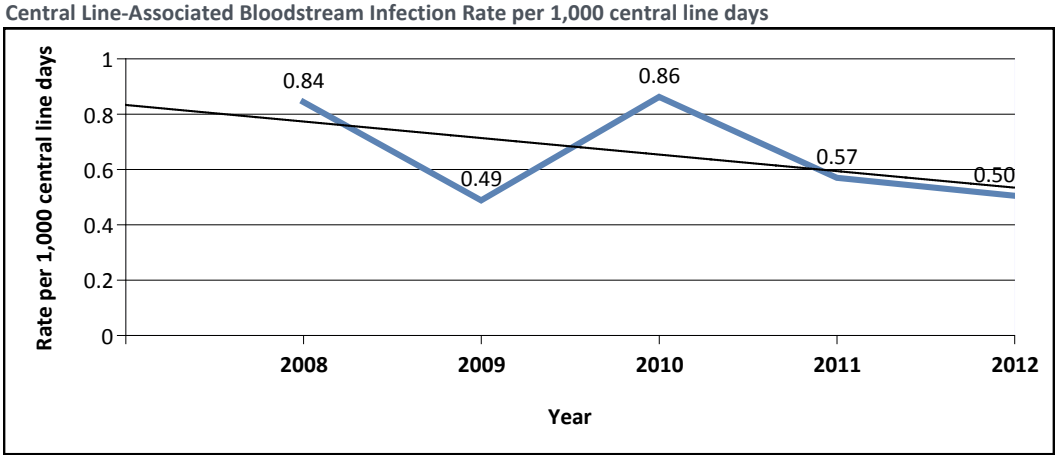
YORK HOSPITAL

Central Line-Associated Bloodstream Infections:

Standardized Infection Ratio - Ward ICU locations

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	10	17.34	0.58	0.28 - 1.06	Same as
2009	11	29.02	0.38	0.19 - 0.68	Better
2010	16	16.48	0.97	0.55 - 1.58	Same as
2011	10	16.56	0.60	0.29 - 1.11	Same as
2012	9	13.41	0.67	0.31 - 1.27	Same as

Central Line-Associated Bloodstream Infection Rate per 1,000 central line days



Standardized Infection Ratio - Neonatal Intensive Care Unit

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	3	2.66	1.13	0.2 - 3.29	Same as
2009	4	4.28	0.94	0.25 - 2.39	Same as
2010	3	3.24	0.93	0.19 - 2.7	Same as
2011	1	1.81	0.55	0.01 - 3.07	Same as
2012	1	1.95	0.51	0.01 - 2.85	Same as