Healthcare-Associated Infections in Pennsylvania

2013 Report

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1. Executive Summary

Overview The 2013 report on the occurrence and patterns of healthcare-associated infections (HAIs) is the sixth to be released by the Pennsylvania Department of Health (PADOH). Overall, the incidence of HAIs in Pennsylvania has declined substantially since the 2007 amendment of the MCARE Act (Act 52 of 2007); however, the dramatic improvements observed in the first few years of the report have slowed and reported rates of some infections have increased (i.e., gastrointestinal and urinary tract HAIs [UTIs], particularly those UTIs not associated with the use of a catheter). Nonetheless, there are fewer HAIs compared to the initial year of collection and Pennsylvania remains a leader in the prevention of HAIs.

PADOH uses three specific categories of HAIs for benchmarking. These are: catheter-associated urinary tract infections (CAUTIs), central line-associated bloodstream infections (CLABSIs) and selected surgical site infections (SSIs). The Pennsylvania CLABSI rate remains well below the national average and the Pennsylvania SSI rate has decreased on par with improvements seen across the country. Although the number of CAUTIs decreased in the first few years of reporting, rates have increased slightly over the last three years but remain equal to or slightly better than the national baseline.

The observed reduction in HAIs is likely the result of ongoing efforts undertaken by infection preventionists, HCPs and systems, professional societies, and governmental agencies to control and prevent the occurrence of HAIs. The observed increase in GI infections may reflect the adoption of more sensitive laboratory tests (i.e., PCR-based assays for *C. difficile*). Similarly, the observed increase from 2012 to 2013 in non-catheter associated UTI infections may reflect recent changes in the case definition. However, these trends warrant further investigation and might suggest new areas for improvement.

The impact of on-going efforts and new initiatives, guided by the best-available scientific evidence, should improve the health status and outcomes of patients cared for in Pennsylvania hospitals — the primary motivation for HAI prevention and control — as well as reduce health care 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 2013 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.

It is important to note that year-to-year comparisons should be interpreted cautiously. Temporal trends are influenced by a number of factors that might result in artificially high or low infection rates. For instance, the SSI follow-up period was 12 months prior to 2013. Now the CDC NHSN-defined follow-up period is 90 days, resulting in a modest decrease in reproted infections. In contrast, the criterion for UTIs changed from 2012 to 2013; these changes likely contribute to an increase in the observed number of non-catheter associated UTIs. The technology used to detect infections has also changed. The dramatic increase in GI infections is likely the result of a transition from antigen-based to PCR-based testing for *C. difficile*.

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. Health care 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 HCP influenza vaccination rates. This 2013 report includes hospital-specific HCP influenza vaccination

rates during the 2013–2014 influenza season and recognizes those facilities that have already achieved the Healthy People 2020 goal.

All Healthcare-Associated Infections (HAIs) In 2013, there were 251 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 24,103 HAIs occurring over 9,845,909 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 2.5 HAIs per 1,000 patient days. This is a 8.4 percent increase from the overall HAI rate in 2012 and a 1.7 percent decrease from 2009, which is considered the baseline year of measurement for Act 52. This represents 7,500 fewer HAIs than would have occurred if the 2009 HAI rate had persisted into 2013. In this report, as in past reports, the most commonly reported categories of HAIs are urinary tract infections (25.9 percent of all HAIs), followed by surgical site infections (24.8 percent) and gastrointestinal infections (19.7 percent). The number of SSIs has remained the same or decreased slightly since 2009; however, the number of UTIs and GI HAIs have rebounded after an approximate decrease of 18 percent or more from baseline. As a whole, the rebound in the number of UTI and GI infections has obscured otherwise impressive decreases in HAIs but is likely the result of changes in surveillance definitions and laboratory technologies.

Catheter-Associated Urinary Tract Infections (CAUTIs) Among the 251 hospitals, there were 230 (91.6 percent) that reported using urinary catheters and 183 (79.6 percent of those using urinary catheters) that reported at least one CAUTI. There were a total of 3,111 CAUTIs reported in 2013 and more than 1.63 million days of urinary catheter use, for a rate of 1.90 CAUTIs per 1,000 urinary catheter days. Compared to 2012, this represents an increase in the CAUTI rate of 11.43 percent, and a 3.6 percent decline when compared to the baseline year of 2009. This translates to 1,828 fewer CAUTIs in Pennsylvania since 2009. Among the 230 hospitals reporting use of urinary catheters in 2013, there were 34 (14.8 percent) that reported significantly fewer CAUTIs than PADOH predicted would occur and 23 (10.0 percent) that reported significantly more CAUTIs than predicted by PADOH.

Central Line-Associated Bloodstream Infections (CLABSIs) Among the 251 hospitals, there were 217 (86.5 percent) that used central lines (catheters inserted into the large arteries near the heart) and 149 (68.7 percent of those using central lines) that reported at least one CLABSI. There were a total of 1,454 CLABSIs reported in 2013 and more than 1.6 million days of central line use, giving an overall rate of 0.89 CLABSIs per 1,000 central line days. This is approximately the same as the rate in 2012 and is 27.9 percent lower the baseline year of 2009. This translates to 2,262 fewer CLABSIs in Pennsylvania since 2009. CLABSIs are subdivided by hospital location type. In neonatal intensive care units (NICUs), the CLABSI rate in 2013 was 1.26 per 1,000 central line days. This rate is nearly half the baseline 2009 rate of 2.46 per 1,000 central line days. In specialty care areas, the CLABSI rate in 2013 was 1.58 per 1,000 central line days. In long term acute care units, the CLABSI rate in 2013 was 1.18 per 1,000 central line days.

Surgical Site Infections (SSIs) A number of changes in SSI surveillance occurred in 2012 and 2013 as a result of changes to NHSN case definitions and CMS reporting requirements. These changes make year-to-year comparisons difficult. Colon surgeries were added in 2012 as a seventh benchmarked procedure. In addition, NHSN definitions for implant-associated surgical procedures currently require a 3-month follow-up period to detect an SSI. It should be noted that this change in the NHSN case definition was only recently implemented in 2013 and prior to that, there was a 12-month follow-up period. Therefore, this report includes both 2012 and 2013 data. The number of observed infections within a 3-month follow-up period is likely to be modestly lower than with a 12-month follow-up period.

In 2012 and 2013, at least one of the seven benchmarked procedures was performed in 168 Pennsylvania hospitals. For all seven procedures combined, a total of 111,982 were recorded for 2012 while 115,024 operations took place in 2013. For both years, knee prostheses formed the largest number: (35.9 percent) (2012) and (35.2 percent) (2013). For all seven procedures combined, a total of 1,921 SSIs were identified in 2012 and 1,839 in 2013. This produced overall rates of 1.72 SSIs per 100 procedures (2012) and 1.60 SSIs per 100 procedures (2013). These rates are higher than rates reported prior to 2012 because colon surgeries, now included in aggregate rates, result in a disproportion number

of infections. Nonethless, SSI rates decreased to their lowest levels among five of the six previously benchmarked procedures.

2. Introduction

Healthcare-associated infection (HAI) is the term used for an infection that occurs in a patient as a direct consequence of the health care interventions being delivered to them. HAIs are one of the major types of adverse events that can occur in the health care 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 health care 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 costs. 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 health care 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 health care system. Although HAIs are an important factor throughout the health care continuum, nowhere are they more impactful than in the hospital setting, where the sickest patients are usually treated.

As recently as the 1990s, HAIs were considered an inevitable consequence of health care delivery. But this view has shifted dramatically as HAIs have come to be recognized as preventable. This had led to a paradigm shift throughout the health care 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 sixth 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 seven 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 seven 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 health care workers in the 2011 report. This section examines vaccination coverage of the health care workforce against influenza. Influenza is recognized as a major cause of illness and death, can be transmitted in health care settings, and is preventable through vaccination. Major health care organizations, societies, and federal and state governments have all promoted influenza vaccination of health care 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 health care workers to be vaccinated against influenza annually.

This is the third PADOH HAI annual report to contain health care worker influenza vaccination data and the second annual report to include facility-specific rates. Submission of data on health care worker vaccination is not a mandated requirement of Act 52. PADOH, in collaboration with the Pennsylvania Health care Quality Alliance (PHCQA), conducted a voluntary survey of hospital health care 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 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. In the 2011 report, PADOH published aggregated health care 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. Since then, PADOH has included facility-specific rates in its annual reports.

Hospital-specific trends in the occurrence of HAIs are included in tabular format throughout the report and as facility-specific report cards in Appendix A. 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; however, year-to-year comparisons are complicated by changes in case definitions and inclusion criteria and statistically imprecise rates for small facilities with few persons at risk. Inferences from year-to-year trends should be used cautiously.

As in previous reports, the information in 2013 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 health care 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 health care 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 2013 describes PSA HAI- related activities and can be found at `http://patientsafetyauthority.org`. The PHC4 report titled, "The Impact of Healthcare-Associated Infections in Pennsylvania, 2013," 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 seven 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. 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.

Elsewhere in the report, CLABSI and CAUTI rates are reported per 1,000 device days (either catheter days or central line days), since these are the more appropriate denominators. Similarly, for benchmarked SSIs, the rates are reported as infections per 100 procedures.

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 Pennsylvania's rates and patterns of HAIs to the rest of the country, this report uses information contained in the NHSN progress report. NHSN now collects data from more than 5,000 hospitals across the United States and produces the definitive dataset on HAIs. The latest CDC progress report from NHSN can be found here: `http://www.cdc.gov/hai/progress-report`

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 2013 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.

Before 2013, the CDC definition of a SSI included a 12 month follow-up period. Since 2013, the follow-up period was reduced to 90 days. As a result, this report includes SSIs that occured after procedures performed in 2012 (12 month follow-up) and 2013 (90 day follow-up). Any comparison of 2013 SSI data to previous years will be influenced by the case definition change and any year-to-year comparisons should be interpreted cautiously. In addition, colon surgeries were added a seventh benchmarked procedure in 2012. For the first time, this state report includes colon surgery data from 2012 and 2013.

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 2013–2014 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 2013–2014 influenza season.

Manuscript preparation and all analyses were performed using R (version 3.2.0 SVN 66626; R Core Team, 2014) and RStudio (version 0.98.1091; RStudio Team, 2012).

4. Results

4.1. Hospital Characteristics

In 2013, a total of 251 Pennsylvania 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, 2013

		N	%
Facility type	Acute care hospital	162	64.54
	Critical access hospital	13	5.18
	Children's hospital	6	2.39
	Long term acute care	26	10.36
	Psychiatric hospital	25	9.96
	Rehab hospital	19	7.57
Medical school affiliation	Affiliation	78	31.08
	No affiliation	173	68.92
Number of infection preventionists	0	1	0.40
	< 1	11	4.38
	1 to 2	166	66.14
	2 to 3	38	15.14
	3 to 4	15	5.98
	>= 4	20	7.97
Hospital bed size	<=200	172	68.53
	201-500	62	24.70
	>500	17	6.77

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

Among the 251 reporting hospitals, there were a total of 24,103 healthcare-associated infections reported (Table 4.2.1). These HAIs occured over a total of 9,845,909 patient days of care in Pennsylvania hospitals. The number of reported HAIs in 2013 is 6.4 percent more than in 2012, and the number of patient days in 2013 is 1.87 percent lower than in 2012. The overall rate of HAIs in 2013 is 2.45 HAIs per 1,000 patient days, which is 8.42 percent higher than the rate of 2.26 per 1,000 patient days in 2012; however, the rate of HAIs reported in 2013 is 1.73 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 **7,525 fewer** healthcare-associated infections having occured in Pennsylvania since 2009.

Table 4.2.1: Healthcare-Associated Infections — Pennsylvania, 2009–2013

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
2013	24,103	9,845,909	2.45	8.42	– 1.73

[a] In the 2009–2011 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 24,103 HAIs that occured in 2013, the most common types are found in Table 4.2.2. Urinary tract (25.9 percent), surgical site (24.8 percent) and gastrointestinal (19.7 percent) infections continue to be the most frequently reported HAIs. This year the number of UTIs have surpassed the number of SSI infections. The transition from a 12-month to 90-day follow-up surveillance period for SSIs and changes in the UTI criteria from 2012 to 2013 may account for the switch. It should be noted that this aggregate data has always included all surgical procedures, not just the benchmarked surgical procedures included later in the report. Therefore, the year-to-year SSI trend reported in this section is not affected by the recent inclusion of colon surgeries as a benchmarked procedure.

Table 4.2.2: Healthcare-Associated Infections—Pennsylvania, 2009–2013

	2009		2010		2011		2012		2013	
Infection Type	n	%	n	%	n	%	n	%	n	%
Bone and joint (BJ)	18	0.1	22	0.1	27	0.1	20	0.1	33	0.1
Blood stream infection (BSI)	3,271	12.6	2,611	11.1	2,479	10.9	2,402	10.6	2,484	10.3
Central nervous system (CNS)	77	0.3	82	0.3	73	0.3	88	0.4	93	0.4
Cardiovascular system (CVS)	96	0.4	104	0.4	103	0.5	106	0.5	106	0.4
Ear, eye, nose and throat (EENT)	603	2.3	647	2.7	741	3.3	724	3.2	797	3.3
Gastrointestinal (GI)	4,848	18.7	4,113	17.4	3,951	17.4	3,856	17.0	4,758	19.7
Lower respiratory tract (LRI)	869	3.4	806	3.4	865	3.8	880	3.9	1,043	4.3
Pneumonia (PNEU)	2,888	11.1	2,584	10.9	2,420	10.7	2,182	9.6	1,652	6.9
Reproductive (REPR)	105	0.4	99	0.4	77	0.3	80	0.4	93	0.4
Surgical site infection (SSI)	6,277	24.2	6,192	26.2	6,113	26.9	6,313	27.9	5,980	24.8
Skin and soft tissue (SST)	712	2.7	825	3.5	799	3.5	812	3.6	827	3.4
Systemic (SYS)	5	0.0	7	0.0	2	0.0	3	0.0	4	0.0
Urinary tract infection (UTI)	6,145	23.7	5,509	23.3	5,063	22.3	5,188	22.9	6,233	25.9
All	25,914	100.0	23,601	100.0	22,713	100.0	22,654	100.0	24,103	100.0

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 2013. 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 19 percent, from 2,117 infections in 2009 to 1,596 infections in 2013. 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, 2009–2013

	2009		2010		2011		2012		2013	
Infection Type	MRSA	%	MRSA	%	MRSA	%	MRSA	%	MRSA	%
Bone and joint (BJ)	6	33.3	2	9.1	5	18.5	7	35.0	8	24.2
Blood stream infection (BSI)	368	11.3	264	10.1	268	10.8	280	11.7	271	10.9
Central nervous system (CNS)	1	1.3	2	2.4	5	6.8	2	2.3	3	3.2
Cardiovascular system (CVS)	17	17.7	21	20.2	15	14.6	12	11.3	12	11.3
Ear, eye, nose and throat (EENT)	16	2.7	34	5.3	26	3.5	20	2.8	24	3.0
Gastrointestinal (GI)	16	0.3	12	0.3	18	0.5	9	0.2	15	0.3
Lower respiratory tract (LRI)	127	14.6	127	15.8	120	13.9	125	14.2	114	10.9
Pneumonia (PNEU)	343	11.9	288	11.1	278	11.5	192	8.8	155	9.4
Reproductive (REPR)	0	0.0	2	2.0	1	1.3	0	0.0	0	0.0
Surgical site infection (SSI)	943	15.0	880	14.2	857	14.0	805	12.8	766	12.8
Skin and soft tissue (SST)	154	21.6	165	20.0	177	22.2	159	19.6	156	18.9
Systemic (SYS)	1	20.0	0	0.0	0	0.0	0	0.0	1	25.0
Urinary tract infection (UTI)	125	2.0	72	1.3	70	1.4	64	1.2	71	1.1
All	2,117	8.2	1,869	7.9	1,840	8.1	1,675	7.4	1,596	6.6

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, 2010–2013

	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)													
2013	45	1	51	3	35	2	115	8	124	3	387	134,586	2.88 (2.60– 3.18)
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)													
2013	0	0	0	0	0	0	0	0	2	0	2	1,169	1.71 (0.21– 6.18)
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)													
2013	53	6	59	13	3	0	45	15	47	10	251	102,364	2.45 (2.16– 2.77)
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)													
2013	3	0	8	0	0	0	12	1	3	0	27	9,960	2.71 (1.79– 3.94)
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)													
2013	3	0	7	0	0	0	0	3	26	0	39	43,328	0.90 (0.64– 1.23)
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)													
2013	87	1	84	77	20	0	144	9	138	12	572	130,089	4.40 (4.04– 4.77)
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)													
2013	8	4	7	0	4	1	22	0	13	0	59	35,566	1.66 (1.26– 2.14)
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)													
2013	1	0	13	0	2	0	0	0	40	0	56	21,252	2.64 (1.99– 3.42)
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)													
2013	26	1	15	0	22	1	51	2	67	0	185	80,978	2.28 (1.97– 2.64)
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)													
2013	13	5	38	2	20	1	34	13	91	1	218	103,768	2.10 (1.83– 2.40)
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)

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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)
ARMSTRONG COUNTY MEMORIAL HOSPITAL (12057)													
2013	2	0	5	0	1	0	4	1	7	0	20	30,446	0.66 (0.40– 1.01)
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)													
2013	0	0	0	0	0	0	0	0	0	0	0	436	0.00 (0.00– 8.46)
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)													
2013	0	0	0	0	0	0	0	0	0	0	0	4,230	0.00 (0.00– 0.87)
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)
BELMONT CENTER FOR COMPREHENSIVE TREATMENT (12505)													
2013	0	1	14	0	0	0	0	2	0	0	17	44,535	0.38 (0.22– 0.61)
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)													
2013	1	0	0	0	0	0	0	1	1	0	3	10,648	0.28 (0.06– 0.82)
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)													
2013	0	0	5	1	4	0	9	1	1	0	21	13,247	1.59 (0.98– 2.42)
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)													
2013	12	0	10	0	7	0	24	2	18	0	73	36,865	1.98 (1.55– 2.49)
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)													
2013	0	0	0	0	0	0	0	0	0	0	0	45,561	0.00 (0.00– 0.08)
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)													
2013	0	0	0	0	0	0	2	0	1	0	3	5,423	0.55 (0.11– 1.62)
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)													
2013	0	0	0	0	0	0	5	0	0	0	5	1,385	3.61 (1.17– 8.42)
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)													
2013	0	1	3	0	1	0	0	2	3	0	10	1,056	9.47 (4.54–17.42)
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)

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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)
BUTLER MEMORIAL HOSPITAL (11736)													
2013	4	1	22	3	14	0	63	2	34	0	143	62,866	2.27 (1.92– 2.68)
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)													
2013	3	0	4	1	0	0	8	1	5	0	22	14,862	1.48 (0.93– 2.24)
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)													
2013	0	0	0	0	1	0	27	1	3	0	32	17,358	1.84 (1.26– 2.60)
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)													
2013	23	1	32	0	9	0	56	1	19	0	141	58,513	2.41 (2.03– 2.84)
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)													
2013	1	2	1	0	2	0	7	1	7	0	21	11,574	1.81 (1.12– 2.77)
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)													
2013	14	2	26	7	27	4	37	6	50	1	174	56,624	3.07 (2.63– 3.56)
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)
CHESTNUT HILL HOSPITAL (12304)													
2013	3	0	0	0	0	0	9	0	2	0	14	27,547	0.51 (0.28– 0.85)
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)													
2013	5	3	1	4	0	0	0	0	2	0	15	5,881	2.55 (1.43– 4.21)
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)													
2013	100	93	114	87	17	5	48	55	91	16	626	158,179	3.96 (3.65– 4.28)
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)													
2013	78	7	11	20	5	0	44	6	35	4	210	86,033	2.44 (2.12– 2.79)
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)													
2013	0	0	0	2	0	0	0	2	1	0	5	10,332	0.48 (0.16– 1.13)
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)

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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)
CLARION HOSPITAL (11654)													
2013	1	0	4	1	5	0	8	1	5	0	25	10,020	2.50 (1.61– 3.68)
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)													
2013	0	12	0	0	0	0	0	3	5	0	20	21,070	0.95 (0.58– 1.47)
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)													
2013	0	5	0	0	0	0	0	1	5	0	11	25,141	0.44 (0.22– 0.78)
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)													
2013	0	0	6	0	0	0	2	0	0	0	8	13,640	0.59 (0.25– 1.16)
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)													
2013	42	4	62	9	4	0	70	7	25	2	225	115,796	1.94 (1.70– 2.21)
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)													
2013	0	0	1	0	0	0	4	0	0	0	5	3,112	1.61 (0.52– 3.75)
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)													
2013	0	0	0	0	1	0	2	0	1	0	4	3,136	1.28 (0.35– 3.27)
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)													
2013	2	0	2	0	0	0	0	0	9	0	13	10,308	1.26 (0.67– 2.16)
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)													
2013	29	0	36	0	3	0	35	7	42	0	152	75,687	2.01 (1.70– 2.35)
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)
CROZER CHESTER MEDICAL CENTER SPRINGFIELD (11851)													
2013	0	0	2	0	0	0	7	0	2	0	11	4,142	2.66 (1.33– 4.75)
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)													
2013	9	0	23	0	5	0	2	0	14	0	53	26,773	1.98 (1.48– 2.59)
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)

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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)
DANVILLE STATE HOSPITAL (11848)													
2013	0	10	4	1	2	0	0	9	8	0	34	59,550	0.57 (0.40– 0.80)
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)													
2013	7	0	9	0	2	2	9	0	5	1	35	37,275	0.94 (0.65– 1.31)
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)													
2013	0	1	0	0	0	0	0	0	1	0	2	11,522	0.17 (0.02– 0.63)
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)													
2013	0	2	5	0	0	0	0	0	0	0	7	5,948	1.18 (0.47– 2.42)
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)													
2013	4	0	35	1	6	0	32	2	18	2	100	50,761	1.97 (1.60– 2.40)
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)													
2013	1	3	11	3	6	2	24	0	8	0	58	41,904	1.38 (1.05– 1.79)
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)													
2013	0	1	1	0	0	0	0	0	1	0	3	17,479	0.17 (0.04– 0.50)
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)													
2013	11	2	27	1	27	0	41	4	25	0	138	15,738	8.77 (7.37–10.36)
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)													
2013	9	3	25	6	18	0	23	6	28	1	119	38,021	3.13 (2.59– 3.75)
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)

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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)
EDGEWOOD SURGICAL HOSPITAL (12552)													
2013	0	0	0	0	0	0	0	0	0	0	0	376	0.00 (0.00– 9.81)
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)
EINSTEIN MEDICAL CENTER MONTGOMERY (30210)													
2013	5	0	17	1	0	0	16	2	12	0	53	39,969	1.33 (0.99– 1.73)
2012	.	.	.	.	.	.	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.	.	.	.	.	.	.
ELK REGIONAL HEALTH CENTER (11859)													
2013	0	0	5	0	2	0	6	0	2	0	15	13,699	1.09 (0.61– 1.81)
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)													
2013	2	3	4	0	4	0	4	2	9	0	28	11,605	2.41 (1.60– 3.49)
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)
ENDLESS MOUNTAINS HEALTH SYSTEMS (11817)													
2013	0	0	0	0	0	0	0	0	0	0	0	3,308	0.00 (0.00– 1.12)
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)													
2013	5	0	14	0	1	1	22	0	10	0	53	24,871	2.13 (1.60– 2.79)
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)													
2013	1	1	6	0	6	1	40	1	13	1	70	21,582	3.24 (2.53– 4.10)
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)													
2013	2	0	5	1	4	0	5	0	2	0	19	12,692	1.50 (0.90– 2.34)
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)													
2013	9	0	8	0	2	0	21	2	11	2	55	22,665	2.43 (1.83– 3.16)
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)													
2013	20	0	26	0	7	0	30	4	38	4	129	79,133	1.63 (1.36– 1.94)
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)													
2013	0	2	0	0	0	1	0	1	0	0	4	80,158	0.05 (0.01– 0.13)
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)

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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)
FIRST HOSPITAL OF WYOMING VALLEY (12050)													
2013	0	0	0	0	1	0	0	0	0	0	1	34,150	0.03 (0.00– 0.16)
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)													
2013	9	1	41	3	10	1	39	3	38	1	146	82,592	1.77 (1.49– 2.08)
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)													
2013	0	16	0	0	0	1	0	3	3	0	23	16,853	1.36 (0.87– 2.05)
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)													
2013	0	29	0	0	2	0	0	5	1	0	37	61,857	0.60 (0.42– 0.82)
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)													
2013	0	0	0	0	0	0	0	0	1	0	1	4,192	0.24 (0.01– 1.33)
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)													
2013	0	0	0	0	0	0	0	0	1	0	1	11,322	0.09 (0.00– 0.49)
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)													
2013	53	8	96	14	31	3	227	14	127	5	578	146,288	3.95 (3.64– 4.29)
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)
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)													
2013	13	1	56	7	24	1	88	2	68	1	261	74,115	3.52 (3.11– 3.98)
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)													
2013	0	0	2	0	1	0	12	0	2	0	17	11,701	1.45 (0.85– 2.33)
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)													
2013	13	0	8	3	16	0	42	2	33	0	117	53,698	2.18 (1.80– 2.61)
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)													
2013	3	0	12	0	2	0	12	0	8	1	38	19,474	1.95 (1.38– 2.68)
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)

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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)
GNADEN HUETTEN MEMORIAL HOSPITAL (12241)													
2013	2	12	9	2	6	0	12	0	11	0	54	17,291	3.12 (2.35– 4.07)
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)													
2013	19	0	22	46	1	0	0	3	30	0	121	10,506	11.52 (9.56–13.76)
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)													
2013	11	11	17	26	8	1	0	12	35	4	125	9,365	13.35 (11.11–15.90)
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)													
2013	5	1	12	0	29	1	25	4	42	0	119	41,380	2.88 (2.38– 3.44)
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)													
2013	0	0	1	0	0	0	2	1	2	0	6	7,717	0.78 (0.29– 1.69)
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)													
2013	46	7	116	6	7	0	60	9	64	2	317	114,138	2.78 (2.48– 3.10)
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)													
2013	3	0	25	0	8	0	10	0	31	0	77	26,879	2.86 (2.26– 3.58)
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)													
2013	0	0	0	0	0	0	0	0	0	0	0	13,854	0.00 (0.00– 0.27)
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)													
2013	6	0	49	4	6	0	16	3	12	0	96	33,088	2.90 (2.35– 3.54)
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)													
2013	3	0	4	2	1	0	0	0	20	0	30	33,138	0.91 (0.61– 1.29)
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)
HEALTHSOUTH NITTANY VALLEY REHABILITATION HOSPITAL (11667)													
2013	3	2	4	0	0	0	0	1	19	0	29	15,733	1.84 (1.23– 2.65)
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)

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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)
HEALTHSOUTH READING REHABILITATION HOSPITAL (12139)													
2013	1	0	3	0	0	0	0	0	15	0	19	16,445	1.16 (0.70– 1.80)
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)													
2013	1	1	1	0	2	0	0	3	21	0	29	25,915	1.12 (0.75– 1.61)
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)													
2013	2	0	7	0	0	0	0	0	0	0	9	21,661	0.42 (0.19– 0.79)
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)													
2013	3	0	2	0	0	0	0	0	18	0	23	18,703	1.23 (0.78– 1.85)
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)													
2013	0	0	3	0	0	0	0	1	14	0	18	12,829	1.40 (0.83– 2.22)
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)													
2013	4	11	11	0	5	0	0	9	36	0	76	18,833	4.04 (3.18– 5.05)
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)													
2013	0	0	2	0	0	1	7	0	4	0	14	11,015	1.27 (0.69– 2.13)
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)													
2013	13	0	52	2	9	0	41	4	45	0	166	72,271	2.30 (1.96– 2.67)
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)													
2013	2	0	26	0	1	0	25	1	13	0	68	41,548	1.64 (1.27– 2.07)
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)													
2013	0	0	2	0	0	0	3	5	2	0	12	11,255	1.07 (0.55– 1.86)
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)													
2013	3	1	27	0	5	2	24	2	12	1	77	58,369	1.32 (1.04– 1.65)
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)

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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)
HOLY SPIRIT HOSPITAL (12387)													
2013	6	3	67	1	5	0	28	3	48	0	161	73,479	2.19 (1.87– 2.56)
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)													
2013	0	25	0	0	0	0	0	0	18	0	43	64,902	0.66 (0.48– 0.89)
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)
HOSPITAL OF FOX CHASE CANCER CENTER (12134)													
2013	18	0	10	0	9	0	45	0	18	0	100	21,559	4.64 (3.77– 5.64)
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)													
2013	77	39	421	220	110	2	273	74	451	15	1,682	254,172	6.62 (6.31– 6.94)
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)													
2013	2	0	8	0	8	0	8	0	20	0	46	37,757	1.22 (0.89– 1.63)
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)													
2013	1	3	2	0	5	0	16	0	6	0	33	7,850	4.20 (2.89– 5.90)
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)													
2013	8	0	11	0	9	0	8	0	7	2	45	38,470	1.17 (0.85– 1.57)
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)													
2013	11	0	8	1	4	0	10	3	26	0	63	33,276	1.89 (1.45– 2.42)
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)													
2013	10	1	61	0	30	0	65	0	20	3	190	75,311	2.52 (2.18– 2.91)
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)													
2013	3	0	4	0	0	0	6	0	2	0	15	12,317	1.22 (0.68– 2.01)
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)													
2013	0	0	0	0	0	0	3	0	1	0	4	4,129	0.97 (0.26– 2.48)
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)

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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)
JOHN HEINZ INSTITUTE OF REHABILITATION (11861)													
2013	1	5	10	0	1	0	0	2	35	0	54	19,943	2.71 (2.03– 3.53)
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)													
2013	0	0	1	0	1	0	4	0	0	0	6	4,230	1.42 (0.52– 3.09)
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)													
2013	0	0	0	0	0	0	0	0	0	0	0	2,421	0.00 (0.00– 1.52)
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)													
2013	0	2	0	0	0	0	0	1	0	0	3	27,338	0.11 (0.02– 0.32)
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)													
2013	18	0	10	2	1	0	0	6	25	1	63	11,096	5.68 (4.36– 7.26)
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)
KINDRED HOSPITAL — PITTSBURGH (12358)													
2013	13	0	9	14	0	0	0	3	15	3	57	10,270	5.55 (4.20– 7.19)
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)													
2013	13	0	1	0	0	0	0	1	10	0	25	8,855	2.82 (1.83– 4.17)
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)													
2013	7	0	22	0	0	0	0	0	10	0	39	8,223	4.74 (3.37– 6.48)
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)													
2013	4	1	10	2	0	0	0	2	16	0	35	6,846	5.11 (3.56– 7.11)
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)													
2013	7	0	17	4	0	0	0	1	12	2	43	14,732	2.92 (2.11– 3.93)
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)													
2013	11	0	0	7	0	0	0	1	1	0	20	6,388	3.13 (1.91– 4.84)
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)

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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 SOUTH PHILADELPHIA (11940)													
2013	4	0	2	4	1	0	0	2	12	0	25	10,174	2.46 (1.59– 3.63)
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)													
2013	0	2	0	1	0	2	0	3	3	0	11	5,811	1.89 (0.94– 3.39)
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)													
2013	30	1	36	24	16	2	129	10	42	6	296	144,167	2.05 (1.83– 2.30)
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)													
2013	6	0	11	1	1	0	14	0	14	0	47	26,814	1.75 (1.29– 2.33)
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)													
2013	0	0	1	0	0	0	0	0	5	0	6	18,797	0.32 (0.12– 0.69)
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)													
2013	1	0	11	0	1	0	7	0	1	0	21	19,657	1.07 (0.66– 1.63)
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)													
2013	22	0	19	0	2	0	25	1	29	1	99	49,802	1.99 (1.62– 2.42)
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)													
2013	108	0	119	26	4	0	183	12	199	5	656	209,562	3.13 (2.90– 3.38)
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)
LEWISTOWN HOSPITAL (11825)													
2013	4	0	13	0	11	0	11	0	7	0	46	25,830	1.78 (1.30– 2.38)
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)													
2013	10	0	5	0	0	0	0	0	9	0	24	7,951	3.02 (1.93– 4.49)
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)													
2013	7	0	2	0	1	0	0	0	13	0	23	8,943	2.57 (1.63– 3.86)
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)

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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)
LIFECARE HOSPITALS OF PITTSBURGH — ALLE-KISKI CAMPUS (18955)													
2013	3	0	1	0	0	0	0	0	2	0	6	6,744	0.89 (0.33– 1.94)
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)													
2013	9	0	9	0	2	0	0	0	9	0	29	13,998	2.07 (1.39– 2.98)
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)													
2013	1	0	1	0	0	0	0	0	1	0	3	7,167	0.42 (0.09– 1.22)
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)													
2013	11	0	7	1	3	0	0	0	12	0	34	24,376	1.39 (0.97– 1.95)
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)													
2013	1	0	0	0	0	0	1	0	0	0	2	4,229	0.47 (0.06– 1.71)
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)													
2013	6	0	0	0	1	0	3	0	3	0	13	22,009	0.59 (0.31– 1.01)
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)													
2013	0	0	15	0	0	0	0	0	29	0	44	29,844	1.47 (1.07– 1.98)
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)													
2013	26	7	42	1	6	4	116	7	34	2	245	89,478	2.74 (2.41– 3.10)
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)													
2013	8	1	23	3	8	0	39	5	30	0	117	55,569	2.11 (1.74– 2.52)
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)													
2013	9	1	53	2	7	0	29	8	36	1	146	66,926	2.18 (1.84– 2.57)
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)													
2013	0	1	7	0	4	0	0	2	51	1	66	36,491	1.81 (1.40– 2.30)
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)													
2013	13	0	21	13	12	0	43	4	31	1	138	79,001	1.75 (1.47– 2.06)
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)													
2013	13	27	22	1	19	2	29	5	25	1	144	36,306	3.97 (3.34– 4.67)
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)													
2013	2	0	22	0	2	0	17	1	14	0	58	25,113	2.31 (1.75– 2.99)
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)													
2013	1	0	1	0	3	0	2	0	0	0	7	4,867	1.44 (0.58– 2.96)
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)													
2013	18	2	17	3	7	0	21	3	24	2	97	42,258	2.30 (1.86– 2.80)
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)													
2013	6	0	7	0	0	0	14	0	1	0	28	38,617	0.73 (0.48– 1.05)
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)													
2013	5	0	2	1	6	0	12	3	2	1	32	23,128	1.38 (0.95– 1.95)
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)													
2013	0	0	1	0	0	0	0	0	1	0	2	1,662	1.20 (0.15– 4.35)
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)													
2013	0	0	7	0	1	0	0	0	0	0	8	3,078	2.60 (1.12– 5.12)
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)													
2013	0	0	0	6	1	0	0	0	12	1	20	24,378	0.82 (0.50– 1.27)
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)													
2013	103	18	132	55	17	0	139	18	136	17	635	149,054	4.26 (3.94– 4.60)
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)

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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)
MINERS MEDICAL CENTER (12295)													
2013	0	0	0	0	1	0	0	1	0	0	2	2,985	0.67 (0.08– 2.42)
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)													
2013	5	4	15	0	16	0	40	2	20	1	103	49,805	2.07 (1.69– 2.51)
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)													
2013	0	0	0	0	0	0	0	0	0	0	0	20,217	0.00 (0.00– 0.18)
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)
MOSES TAYLOR HOSPITAL (11528)													
2013	5	0	15	0	11	1	17	0	8	1	58	51,312	1.13 (0.86– 1.46)
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)													
2013	1	1	42	0	6	1	49	1	38	0	139	49,847	2.79 (2.34– 3.29)
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)													
2013	1	0	3	1	0	0	1	1	3	0	10	4,806	2.08 (1.00– 3.83)
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)													
2013	1	0	0	0	0	0	6	0	2	0	9	7,565	1.19 (0.54– 2.26)
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)													
2013	14	1	21	0	4	0	23	2	22	2	89	42,260	2.11 (1.69– 2.59)
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)													
2013	0	55	0	1	0	0	0	15	4	0	75	95,792	0.78 (0.62– 0.98)
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)													
2013	1	0	1	0	1	0	5	0	2	0	10	22,184	0.45 (0.22– 0.83)
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)

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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)
OSS ORTHOPAEDIC HOSPITAL (18467)													
2013	0	0	0	0	0	0	9	0	0	0	9	3,919	2.30 (1.05– 4.36)
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)													
2013	0	0	1	0	2	0	4	0	2	0	9	11,211	0.80 (0.37– 1.52)
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)													
2013	37	4	17	14	12	0	55	4	44	1	188	60,943	3.08 (2.66– 3.56)
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)													
2013	1	0	3	1	0	0	0	0	30	0	35	17,246	2.03 (1.41– 2.82)
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)													
2013	38	16	43	12	13	3	125	7	65	3	325	97,602	3.33 (2.98– 3.71)
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)													
2013	0	5	1	0	0	1	0	4	2	0	13	20,998	0.62 (0.33– 1.06)
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)													
2013	0	14	0	0	0	0	0	2	12	0	28	32,171	0.87 (0.58– 1.26)
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)
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)													
2013	9	1	15	0	6	0	19	0	5	0	55	32,971	1.67 (1.26– 2.17)
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)													
2013	0	0	0	0	0	0	1	0	0	0	1	1,036	0.97 (0.02– 5.38)
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)													
2013	37	8	97	4	12	3	151	25	91	9	437	157,969	2.77 (2.51– 3.04)
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)													
2013	10	0	10	0	4	0	22	1	16	2	65	53,633	1.21 (0.94– 1.54)
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)

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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)
POTTSTOWN MEMORIAL MEDICAL CENTER (11983)													
2013	5	0	7	1	22	0	17	2	26	1	81	42,128	1.92 (1.53– 2.39)
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)													
2013	0	1	3	0	1	0	6	0	4	0	15	7,683	1.95 (1.09– 3.22)
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)													
2013	47	3	68	9	21	1	132	23	96	6	406	167,901	2.42 (2.19– 2.67)
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)													
2013	7	0	19	0	0	0	5	1	12	0	44	45,651	0.96 (0.70– 1.29)
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)													
2013	9	0	14	0	1	0	13	2	23	0	62	44,830	1.38 (1.06– 1.77)
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)													
2013	21	1	61	13	10	0	26	0	15	1	148	64,255	2.30 (1.95– 2.71)
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)													
2013	1	1	0	0	0	0	0	0	0	0	2	23,849	0.08 (0.01– 0.30)
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)													
2013	0	7	0	0	1	3	0	1	1	0	13	14,498	0.90 (0.48– 1.53)
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)													
2013	2	0	10	2	5	0	13	2	7	0	41	30,343	1.35 (0.97– 1.83)
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)													
2013	5	1	9	0	2	0	14	4	9	0	44	26,682	1.65 (1.20– 2.21)
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)
SCHUYLKILL MEDICAL CENTER — SOUTH JACKSON STREET (12087)													
2013	4	2	3	0	6	0	14	2	7	0	38	34,761	1.09 (0.77– 1.50)
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)

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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)
SELECT SPECIALITY HOSPITAL — CENTRAL PENNSYLVANIA (YORK) (12334)													
2013	11	0	5	0	2	0	0	0	13	0	31	6,041	5.13 (3.49– 7.28)
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)													
2013	6	0	8	2	2	0	0	1	33	0	52	7,822	6.65 (4.96– 8.72)
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)													
2013	3	0	10	0	2	0	0	2	4	0	21	11,479	1.83 (1.13– 2.80)
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)													
2013	8	1	21	0	3	0	0	1	34	1	69	10,803	6.39 (4.97– 8.08)
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)													
2013	10	0	20	0	2	0	0	0	35	0	67	10,345	6.48 (5.02– 8.23)
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)													
2013	1	0	1	0	0	0	0	0	1	0	3	6,501	0.46 (0.10– 1.35)
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)													
2013	0	0	9	0	0	0	0	0	1	0	10	7,840	1.28 (0.61– 2.35)
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)													
2013	6	0	4	0	2	0	0	0	7	0	19	8,544	2.22 (1.34– 3.47)
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)													
2013	7	0	12	0	1	0	0	1	5	0	26	6,436	4.04 (2.64– 5.92)
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)													
2013	0	0	3	1	0	0	8	2	4	1	19	34,895	0.54 (0.33– 0.85)
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)													
2013	1	0	0	0	0	0	4	0	9	0	14	5,090	2.75 (1.50– 4.61)
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)

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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)
SOLDIERS & SAILORS MEM HOSPITAL (11688)													
2013	5	3	8	0	10	0	9	4	5	1	45	11,623	3.87 (2.82– 5.18)
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)													
2013	3	0	3	0	4	0	5	0	5	0	20	18,930	1.06 (0.65– 1.63)
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)
SOUTHWEST REGIONAL MEDICAL CENTER (11942)													
2013	0	0	0	0	0	0	2	0	0	0	2	11,449	0.17 (0.02– 0.63)
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)													
2013	0	25	0	0	0	7	0	10	1	0	43	15,073	2.85 (2.06– 3.84)
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)													
2013	4	0	24	2	0	0	0	1	11	0	42	10,266	4.09 (2.95– 5.53)
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)													
2013	21	9	12	16	2	0	15	5	6	1	87	44,274	1.97 (1.57– 2.42)
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)													
2013	1	0	48	1	7	1	65	1	18	1	143	83,028	1.72 (1.45– 2.03)
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)													
2013	0	1	0	0	0	0	0	1	0	0	2	11,963	0.17 (0.02– 0.60)
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)													
2013	11	0	24	1	8	1	27	0	18	0	90	33,728	2.67 (2.15– 3.28)
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)													
2013	26	0	14	1	10	0	2	1	19	0	73	30,941	2.36 (1.85– 2.97)
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)

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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. LUKES HOSPITAL ANDERSON CAMPUS (21487)													
2013	0	0	5	0	2	0	8	4	3	0	22	20,370	1.08 (0.68– 1.64)
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)													
2013	36	14	61	16	19	0	88	8	78	8	328	137,377	2.39 (2.14– 2.66)
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)													
2013	0	0	2	0	0	0	3	0	1	0	6	7,001	0.86 (0.31– 1.87)
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)													
2013	1	1	0	0	0	0	8	0	3	0	13	14,419	0.90 (0.48– 1.54)
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)													
2013	16	2	84	2	16	0	47	6	78	1	252	100,245	2.51 (2.21– 2.84)
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)													
2013	0	0	8	0	0	0	0	1	13	0	22	9,313	2.36 (1.48– 3.58)
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)
ST. VINCENT HEALTH CENTER (11699)													
2013	12	6	64	11	30	3	80	6	81	0	293	74,136	3.95 (3.51– 4.43)
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)													
2013	0	0	1	0	3	0	2	0	1	0	7	6,541	1.07 (0.43– 2.20)
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)													
2013	0	0	0	0	0	0	7	0	1	0	8	2,015	3.97 (1.71– 7.82)
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)													
2013	0	0	0	0	0	0	2	0	0	0	2	1,941	1.03 (0.12– 3.72)
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)													
2013	37	1	51	12	29	0	66	7	95	0	298	143,434	2.08 (1.85– 2.33)
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)

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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)
THE GOOD SAMARITAN HOSPITAL (11712)													
2013	7	0	4	1	14	0	15	2	10	1	54	38,759	1.39 (1.05– 1.82)
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)													
2013	4	22	8	5	7	0	0	16	62	0	124	28,995	4.28 (3.56– 5.10)
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)													
2013	0	2	0	0	0	1	0	2	0	0	5	32,222	0.16 (0.05– 0.36)
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)													
2013	1	1	30	0	14	0	29	2	26	0	103	54,165	1.90 (1.55– 2.31)
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)													
2013	19	2	26	15	9	0	39	8	27	0	145	57,409	2.53 (2.13– 2.97)
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)													
2013	20	2	41	3	17	0	21	12	39	0	155	46,661	3.32 (2.82– 3.89)
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)													
2013	113	18	148	9	49	12	269	26	159	3	806	196,126	4.11 (3.83– 4.40)
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)													
2013	2	0	1	0	1	0	4	0	8	0	16	6,554	2.44 (1.40– 3.96)
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)													
2013	0	1	0	0	0	0	0	5	0	0	6	33,243	0.18 (0.07– 0.39)
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)
TROY COMMUNITY HOSPITAL (12018)													
2013	3	0	1	0	0	0	1	0	3	1	9	7,100	1.27 (0.58– 2.41)
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)													
2013	1	0	0	0	0	0	0	0	2	0	3	5,653	0.53 (0.11– 1.55)
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)

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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)
TYRONE HOSPITAL (12717)													
2013	0	0	0	0	0	0	1	0	0	0	1	2,668	0.37 (0.01– 2.09)
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)													
2013	4	0	12	1	9	1	23	0	14	1	65	43,957	1.48 (1.14– 1.88)
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)													
2013	0	0	0	0	2	0	5	0	1	0	8	7,301	1.10 (0.47– 2.16)
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 EAST (28812)													
2013	13	0	8	0	1	0	10	1	10	0	43	29,712	1.45 (1.05– 1.95)
2012	.	.	.	.	.	.	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.	.	.	.	.	.	.
UPMC HAMOT (11725)													
2013	35	6	66	1	45	2	114	18	88	1	376	92,583	4.06 (3.66– 4.49)
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)													
2013	3	0	16	0	16	0	29	1	14	0	79	32,503	2.43 (1.92– 3.03)
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)													
2013	8	0	10	3	15	0	13	7	36	0	92	53,354	1.72 (1.39– 2.11)
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)													
2013	22	2	47	7	12	0	87	2	138	3	320	139,206	2.30 (2.05– 2.56)
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)													
2013	2	1	9	2	10	0	11	2	16	1	54	33,929	1.59 (1.20– 2.08)
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)													
2013	26	9	68	5	29	1	124	3	86	2	353	100,207	3.52 (3.16– 3.91)
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)													
2013	94	8	192	23	91	0	278	37	436	30	1,189	221,480	5.37 (5.07– 5.68)
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)

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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 PRESBYTERIAN SHADYSIDE — SHADYSIDE (10118)													
2013	34	22	137	5	95	0	240	28	197	3	761	154,054	4.94 (4.60– 5.30)
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)													
2013	1	6	6	0	1	0	0	1	14	0	29	103,422	0.28 (0.19– 0.40)
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)
UPMC ST MARGARET (11561)													
2013	10	0	27	1	7	0	60	2	53	0	160	69,846	2.29 (1.95– 2.67)
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)													
2013	0	0	0	0	0	0	0	0	0	0	0	16,356	0.00 (0.00– 0.23)
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)													
2013	0	0	7	0	0	0	7	0	6	0	20	15,355	1.30 (0.80– 2.01)
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)													
2013	0	0	0	0	0	0	0	0	0	0	0	66,410	0.00 (0.00– 0.06)
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)													
2013	2	2	5	0	7	2	21	0	5	0	44	16,857	2.61 (1.90– 3.50)
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)													
2013	3	0	1	0	12	0	9	0	1	0	26	9,414	2.76 (1.80– 4.05)
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)
WELLSPAN SURGERY AND REHABILITATION HOSPITAL (27430)													
2013	1	0	7	1	3	0	14	1	20	1	48	15,195	3.16 (2.33– 4.19)
2012	.	.	.	.	.	.	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.	.	.	.	.	.	.
WERNERSVILLE STATE HOSPITAL (12368)													
2013	0	3	0	0	0	0	0	2	1	0	6	94,600	0.06 (0.02– 0.14)
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)
WILKES-BARRE GENERAL HOSPITAL (11916)													
2013	24	9	20	5	23	2	63	6	83	0	235	83,844	2.80 (2.46– 3.19)
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)

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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)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)													
2013	13	66	36	0	17	1	44	7	32	0	216	57,713	3.74 (3.26– 4.28)
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)													
2013	0	0	0	0	0	0	5	0	3	0	8	6,417	1.25 (0.54– 2.46)
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)													
2013	33	9	86	81	42	2	115	17	108	8	501	162,441	3.08 (2.82– 3.37)
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 2013, urinary tract infections constitute the most commonly reported category of HAIs in Pennsylvania, with 6,233 (25.86 percent; see Table 4.2.2) occurences. Almost half (3,111 or 49.91 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 2013, a total of 1,636,227 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 65,582 among the 230 hospitals). The number of hospitals that reported using urinary catheters in 2013 represents 91.63 percent of the 251 hospitals that reported data through NHSN. The 21 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, 2009–2013

	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)
2013	3,111	1,636,227	1.90 (1.84–1.97)	11.43 (– 3.60)	9,845,909	0.17	– 0.87 (– 13.35)

The number of urinary catheter days (1,636,227), divided by the total number of patient days (9,845,909) reported in 2013 produces a device utilization ratio (DUR) of 0.17, meaning that a urinary catheter was used 16.62 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 (72.39 percent of the time), in surgical intensive care units (72.13 percent of the time) and in cardiothoracic critical care units (66.23 percent of the time).

Among the 230 hospitals that reported any use of urinary catheters, 183 (79.6 percent) of them reported at least one CAUTI while the other 47 (20.4 percent) reported no identified CAUTIs. Pennsylvania's CAUTI rate for 2013 was 1.90 CAUTIs per 1,000 urinary catheter days (Table 4.3.1). This is an increase of 11.43 percent compared to last year's rate of 1.71 CAUTIs per 1,000 urinary catheter days; however, it still represents a 3.60 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 **1,828 fewer** CAUTIs than would have otherwise occurred if the 2009 rate persisted into 2013. This likely under estimates the true impact of prevention efforts because urinary catheter use (DUR) has also decreased a total of 13.35 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 a hospital (Table 4.3.2). In 2013, CAUTI rates (per 1,000 catheter days) were highest in surgical intensive care units (cc:Surgery; 3.72), trauma units (cc:Trauma; 3.55) and rehabilitation units (cc:SpecMed; 2.85). From 2012 to 2013, the CAUTI rate in critical care burn units (cc:Burn) improved from 3.65 to 2.76 infections per 1,000 patient days. Among locations with at least 1,000 urinary catheter days, labor/delivery post-partum units (w:LD_pp), neonatal intensive care units (NICU; NICUs were not required to report catheter days until 2012) and 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, 2009–2013

	Number of CAUTI	Urinary Catheter Days	Rate per 1,000 Catheter Days	Patient Days	Device Utilization Ratio — DUR (Cath. Days / Pt. Days)
NICU					
2013	2	2,343	0.85	268,868	0.01
2012	0	3,542	0.00	270,917	0.01
2011	3	.	.	271,973	.
2010	4	.	.	269,940	.
2009	2	.	.	269,141	.
SCA					
2013	49	20,719	2.36	207,810	0.10
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					
2013	212	126,032	1.68	613,261	0.21
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					
2013	239	100,595	2.38	251,711	0.40
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					
2013	13	4,712	2.76	13,088	0.36
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

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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:CT					
2013	129	60,820	2.12	91,830	0.66
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					
2013	527	285,719	1.84	463,063	0.62
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					
2013	216	78,199	2.76	125,925	0.62
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					
2013	25	12,515	2.00	62,108	0.20
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					
2013	98	34,341	2.85	74,545	0.46
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
cc:Surgery					
2013	276	74,180	3.72	102,849	0.72
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					
2013	131	36,889	3.55	50,959	0.72
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					
2013	6	3,295	1.82	1,626,139	0.00
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					
2013	5	42,853	0.12	372,699	0.11
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

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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)
w:MS					
2013	478	386,579	1.24	2,449,401	0.16
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					
2013	337	170,256	1.98	1,242,237	0.14
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					
2013	0	19	0.00	151,918	0.00
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					
2013	13	6,261	2.08	229,380	0.03
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					
2013	113	47,061	2.40	701,821	0.07
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					
2013	242	142,839	1.69	746,297	0.19
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 2013, hospitals reported a total of 3,462 organisms (or isolates) from 3,111 CAUTIs (some patients had an infection with more than one organism). Consistent with previous years, three pathogens (i.e., *Escherichia coli, Pseudomonas aeruginosa, Candida albicans*) accounted for the majority (46.01 percent) of isolates cultured from patients with a CAUTI (Table 4.3.3). The 15 organisms listed in Table 4.3.3 account for 89.49 percent of isolates cultured from CAUTIs. The remaining isolates (10.51 percent) cultured from CAUTIs in 2013 are from 65 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, 2012–2013

	2012		2013	
Pathogen	Count	%	Count	%
Escherichia coli	964	29.90	860	24.84
Pseudomonas aeruginosa	427	13.24	374	10.80
Candida albicans	186	5.77	359	10.37
Klebsiella pneumoniae	335	10.39	307	8.87
Yeast NOS	128	3.97	243	7.02
Enterococcus faecalis	192	5.96	213	6.15
Enterococcus spp.	165	5.12	148	4.27
Proteus mirabilis	179	5.55	138	3.99
Enterococcus faecium	57	1.77	89	2.57
Enterobacter cloacae	81	2.51	86	2.48
Candida glabrata	41	1.27	79	2.28
Staphylococcus aureus	59	1.83	60	1.73
Enterobacter aerogenes	44	1.36	55	1.59
Klebsiella oxytoca	50	1.55	49	1.42
Staphylococcus coagulase negative	40	1.24	38	1.10
Other	276	8.56	364	10.51
All	3,224	100.00	3,462	100.00

4.3.4. CAUTIs — National Comparison

Act 52 requires comparisons between Pennsylvania data and national data (Centers for Disease Control and Prevention, 2015). Due to methodological differences, the most precise way of comparing Pennsylvania data to national data is to present CDC comparisons of aggregated Pennsylvania data to national baseline data. Pennsylvania's aggregate CAUTI SIR for 2013 is four percent lower (better) than the national 2013 SIR. This difference is statistically significant. However, Pennsylvania's 2013 CAUTI SIR is no different than the 2009 national baseline rate overall.

4.3.5. CAUTIs — By Facility

Table 4.3.7 lists alphabetically the 230 hospitals that reported using urinary catheters in 2013. Among these facilities, a total of 156 (67.8 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 47 (20.4 percent) of these hospitals, the SIR was 0.00, as they reported no CAUTIs in 2013. There were 74 (32.2 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 4.3.1–4.3.6) 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 2013 report are consistent with previous reports.

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, 36 (15.7 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 4.3.1–4.3.6, 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 34 (14.8 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 4.3.1 – 4.3.6. There were also 23 (10.0 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 4.3.1 – 4.3.6.

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, 2013

Facility Name and NHSN ID
ALBERT EINSTEIN MEDICAL CENTER (10585)
CHESTNUT HILL HOSPITAL (12304)
CLEARFIELD HOSPITAL (11843)
CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)
EPHRATA COMMUNITY HOSPITAL (11764)
EXCELA HEALTH FRICK HOSPITAL (11639)
EXCELA HEALTH LATROBE HOSPITAL (11651)
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)
HAZLETON GENERAL HOSPITAL (11878)
HERITAGE VALLEY SEWICKLEY (10375)
HOLY REDEEMER HOSPITAL AND MEDICAL CENTER (11973)
JAMESON MEMORIAL HOSPITAL (11954)
JEFFERSON REGIONAL MEDICAL CENTER (10237)
LANCASTER GENERAL HOSPITAL (10183)
LIFECARE HOSPITALS OF PITTSBURGH — ALLE-KISKI CAMPUS (18955)
LIFECARE HOSPITALS OF PITTSBURGH — SUBURBAN CAMPUS (12385)
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)
MERCY PHILADELPHIA HOSPITAL (11946)
MERCY SUBURBAN HOSPITAL NORRISTOWN (11952)
MOSES TAYLOR HOSPITAL (11528)
MOUNT NITTANY MEDICAL CENTER (11797)
PINNACLE HEALTH HOSPITALS (10122)
POCONO MEDICAL CENTER (11772)
REGIONAL HOSPITAL OF SCRANTON (12533)
RIDDLE MEMORIAL HOSPITAL (11731)
ROBERT PACKER HOSPITAL (12422)
ROXBOROUGH MEMORIAL HOSPITAL (11978)
SELECT SPECIALITY HOSPITAL — JOHNSTOWN (12299)
SHARON REGIONAL HEALTH SYSTEM (12250)
ST. CLAIR MEMORIAL HOSPITAL (10561)
ST. LUKES HOSPITAL ANDERSON CAMPUS (21487)
UNIONTOWN HOSPITAL (10441)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)

Table 4.3.5: Facilities with a Significantly More Catheter-Associated Urinary Tract Infections than Predicted (Worse SIR) — Pennsylvania, 2013

Facility Name and NHSN ID
ABINGTON MEMORIAL HOSPITAL (11838)
ALTOONA REGIONAL HEALTH SYSTEM (10178)
BRANDYWINE HOSPITAL (11979)
CHESTER COUNTY HOSPITAL (12016)
GOOD SHEPHERD PENN PARTNERS (13929)
GOOD SHEPHERD SPECIALTY HOSPITAL (11887)
HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)
J C BLAIR MEMORIAL HOSP (11724)
KINDRED HOSPITAL — PHILADELPHIA (11832)
KINDRED HOSPITAL EASTON (12007)
LEHIGH VALLEY HOSPITAL (11884)
MAGEE REHAB HOSPITAL (12146)
SELECT SPECIALITY HOSPITAL — CENTRAL PENNSYLVANIA (YORK) (12334)
SELECT SPECIALITY HOSPITAL — ERIE (11880)
SELECT SPECIALTY HOSPITAL — CENTRAL PA (13921)
SELECT SPECIALTY HOSPITAL — CENTRAL PENNSYLVANIA (CAMP HILL) (12147)
ST. JOSEPHS HOSPITAL (12438)
ST. MARY MEDICAL CENTER (11885)
THE GOOD SHEPHERD REHABILITATION HOSPITAL (11896)
TITUSVILLE AREA HOSPITAL (11738)
UPMC PRESBYTERIAN SHADYSIDE — PRESBYTERIAN (10348)
UPMC PRESBYTERIAN SHADYSIDE — SHADYSIDE (10118)
WILKES-BARRE GENERAL HOSPITAL (11916)

Table 4.3.6: Facilities Omitted from CAUTI SIR Analysis Due to No Reported Urinary Catheter Use — Pennsylvania, 2013

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)
FIRST HOSPITAL OF WYOMING VALLEY (12050)
FOUNDATIONS BEHAVIORAL HEALTH (12832)
FRIENDS HOSPITAL (12488)
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)
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)
WERNERSVILLE STATE HOSPITAL (12368)

Table 4.3.7: Catheter-Associated Urinary Tract Infections, Catheter Utilization Rates and Standardized Infection Ratios by Facility — Pennsylvania, 2010–2013

	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)							
2013	20,986	134,586	0.16	59	43.74	1.35	(1.03 – 1.74)
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)							
2013	393	1,169	0.34	2	0.61	3.30	(0.37 – 11.91)
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)							
2013	20,269	102,364	0.20	27	42.47	0.64	(0.42 – 0.92)
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)							
2013	2,516	9,960	0.25	3	5.30	0.57	(0.11 – 1.65)
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)							
2013	3,334	43,328	0.08	4	4.98	0.80	(0.22 – 2.06)
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)							
2013	46,960	130,089	0.36	114	99.71	1.14	(0.94 – 1.37)
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)							
2013	6,105	35,566	0.17	7	9.28	0.75	(0.30 – 1.55)
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)							
2013	1,538	21,252	0.07	4	2.29	1.74	(0.47 – 4.47)
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)							
2013	19,396	80,978	0.24	49	29.69	1.65	(1.22 – 2.18)
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)							
2013	23,229	103,768	0.22	61	48.81	1.25	(0.96 – 1.61)
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)

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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
ARMSTRONG COUNTY MEMORIAL HOSPITAL (12057)							
2013	4,816	30,446	0.16	4	7.31	0.55	(0.15 – 1.40)
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)
BARIX CLINICS OF PENNSYLVANIA (12037)							
2013	218	436	0.50	0	0.34	0.00	(0.00 – 10.81)
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)							
2013	483	4,230	0.11	0	0.73	0.00	(0.00 – 5.04)
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)							
2013	1,463	10,648	0.14	1	2.21	0.45	(0.01 – 2.51)
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)							
2013	1,503	13,247	0.11	0	2.26	0.00	(0.00 – 1.62)
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)							
2013	4,434	36,865	0.12	13	6.69	1.94	(1.03 – 3.33)
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)							
2013	845	5,423	0.16	1	1.28	0.78	(0.01 – 4.34)
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)							
2013	125	1,385	0.09	0	0.19	0.00	(0.00 – 19.59)
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)							
2013	100	1,056	0.09	1	0.15	6.67	(0.09 – 37.10)
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)							
2013	10,851	62,866	0.17	13	16.49	0.79	(0.42 – 1.35)
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)							
2013	2,999	14,862	0.20	2	4.57	0.44	(0.05 – 1.58)
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)

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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
CARLISLE REGIONAL MEDICAL CENTER (11997)							
2013	3,879	17,358	0.22	3	5.93	0.51	(0.10 – 1.48)
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)							
2013	10,028	58,513	0.17	8	15.24	0.52	(0.23 – 1.03)
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)							
2013	1,265	11,574	0.11	4	1.90	2.10	(0.57 – 5.38)
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)							
2013	7,439	56,624	0.13	25	11.24	2.22	(1.44 – 3.28)
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)
CHESTNUT HILL HOSPITAL (12304)							
2013	6,447	27,547	0.23	1	13.56	0.07	(0.00 – 0.41)
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)							
2013	37	5,881	0.01	0	0.05	0.00	(0.00 – 70.19)
2012	88	5,923	0.01	0	0.11	0.00	(0.00 – 33.96)
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)							
2013	7,022	158,179	0.04	17	14.24	1.19	(0.70 – 1.91)
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)							
2013	8,390	86,033	0.10	16	17.31	0.92	(0.53 – 1.50)
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)							
2013	45	10,332	0.00	1	0.06	15.86	(0.21 – 88.25)
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)							
2013	1,560	10,020	0.16	0	3.25	0.00	(0.00 – 1.13)
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)

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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
CLARKS SUMMIT STATE HOSPITAL (12051)							
2013	130	25,141	0.01	0	0.18	0.00	(0.00 – 20.06)
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)							
2013	2,685	13,640	0.20	0	4.09	0.00	(0.00 – 0.90)
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)							
2013	27,254	115,796	0.24	12	57.33	0.21	(0.11 – 0.37)
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)							
2013	1,050	3,112	0.34	0	1.62	0.00	(0.00 – 2.26)
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)							
2013	597	3,136	0.19	0	0.91	0.00	(0.00 – 4.03)
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)							
2013	1,009	10,308	0.10	2	1.51	1.32	(0.15 – 4.77)
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)							
2013	13,429	75,687	0.18	31	28.07	1.10	(0.75 – 1.57)
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)							
2013	895	4,142	0.22	2	1.88	1.06	(0.12 – 3.84)
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)
CROZER CHESTER MEDICAL CENTER TAYLOR (11932)							
2013	4,786	26,773	0.18	9	10.01	0.90	(0.41 – 1.71)
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)							
2013	188	59,550	0.00	0	0.26	0.00	(0.00 – 14.03)
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)							
2013	8,005	37,275	0.21	3	16.80	0.18	(0.04 – 0.52)
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)

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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
DIVINE PROVIDENCE HOSPITAL (11743)							
2013	66	5,948	0.01	0	0.09	0.00	(0.00 – 38.86)
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)							
2013	8,982	50,761	0.18	7	13.66	0.51	(0.21 – 1.06)
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)							
2013	4,776	41,904	0.11	4	7.19	0.56	(0.15 – 1.42)
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)							
2013	68	17,479	0.00	0	0.10	0.00	(0.00 – 38.60)
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)							
2013	2,795	15,738	0.18	8	4.25	1.88	(0.81 – 3.71)
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)							
2013	7,250	38,021	0.19	15	15.18	0.99	(0.55 – 1.63)
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)							
2013	34	376	0.09	0	0.05	0.00	(0.00 – 72.01)
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)
EINSTEIN MEDICAL CENTER MONTGOMERY (30210)							
2013	5,858	39,969	0.15	5	8.87	0.56	(0.18 – 1.32)
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
ELK REGIONAL HEALTH CENTER (11859)							
2013	2,366	13,699	0.17	0	3.60	0.00	(0.00 – 1.02)
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)							
2013	1,439	11,605	0.12	4	2.17	1.84	(0.50 – 4.72)
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)

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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
ENDLESS MOUNTAINS HEALTH SYSTEMS (11817)							
2013	633	3,308	0.19	0	0.96	0.00	(0.00 – 3.80)
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)							
2013	6,848	24,871	0.28	4	10.52	0.38	(0.10 – 0.97)
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)
EVANGELICAL COMMUNITY HOSPITAL (11701)							
2013	3,640	21,582	0.17	5	7.60	0.66	(0.21 – 1.54)
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)							
2013	2,746	12,692	0.22	0	4.19	0.00	(0.00 – 0.87)
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)							
2013	6,611	22,665	0.29	6	13.97	0.43	(0.16 – 0.93)
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)							
2013	16,500	79,133	0.21	19	34.61	0.55	(0.33 – 0.86)
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)
FORBES REGIONAL HOSPITAL (11265)							
2013	13,991	82,592	0.17	22	29.22	0.75	(0.47 – 1.14)
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)
FULTON COUNTY MEDICAL CENTER (11939)							
2013	460	4,192	0.11	1	0.69	1.44	(0.02 – 8.04)
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)							
2013	574	11,322	0.05	0	0.85	0.00	(0.00 – 4.32)
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)							
2013	23,223	146,288	0.16	48	48.42	0.99	(0.73 – 1.31)
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)							
2013	15,103	74,115	0.20	43	31.67	1.36	(0.98 – 1.83)
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)

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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
GEISINGER-BLOOMSBURG HOSPITAL (12008)							
2013	1,259	11,701	0.11	2	1.89	1.06	(0.12 – 3.81)
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)							
2013	12,105	53,698	0.23	21	25.44	0.83	(0.51 – 1.26)
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)							
2013	2,703	19,474	0.14	3	4.09	0.73	(0.15 – 2.14)
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)
GNADEN HUETTEN MEMORIAL HOSPITAL (12241)							
2013	1,711	17,291	0.10	1	2.57	0.39	(0.01 – 2.17)
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)							
2013	2,159	10,506	0.21	14	3.29	4.25	(2.32 – 7.13)
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)							
2013	3,284	9,365	0.35	23	5.07	4.54	(2.87 – 6.81)
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)							
2013	10,262	41,380	0.25	20	15.72	1.27	(0.78 – 1.96)
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)							
2013	1,328	7,717	0.17	0	2.02	0.00	(0.00 – 1.82)
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)							
2013	15,972	114,138	0.14	29	33.21	0.87	(0.58 – 1.25)
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)							
2013	4,689	26,879	0.17	8	7.13	1.12	(0.48 – 2.21)
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)							
2013	7,910	33,088	0.24	5	12.11	0.41	(0.13 – 0.96)
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)

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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 HARMARVILLE REHABILITATION HOSPITAL (11727)							
2013	3,008	33,138	0.09	5	4.51	1.11	(0.36 – 2.59)
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)							
2013	709	15,733	0.05	1	1.05	0.96	(0.01 – 5.32)
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)							
2013	430	16,445	0.03	0	0.63	0.00	(0.00 – 5.85)
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)							
2013	1,443	25,915	0.06	2	2.14	0.94	(0.11 – 3.38)
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)							
2013	961	21,661	0.04	0	1.42	0.00	(0.00 – 2.59)
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)							
2013	1,412	18,703	0.08	2	2.11	0.95	(0.11 – 3.43)
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)
HEALTHSOUTH REHABILITATION HOSPITAL OF SEWICKLEY (12066)							
2013	1,066	12,829	0.08	0	1.59	0.00	(0.00 – 2.30)
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)							
2013	1,240	18,833	0.07	3	1.84	1.63	(0.33 – 4.75)
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)							
2013	1,898	11,015	0.17	3	3.96	0.76	(0.15 – 2.21)
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)							
2013	17,004	72,271	0.24	25	35.77	0.70	(0.45 – 1.03)
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)							
2013	9,682	41,548	0.23	7	14.81	0.47	(0.19 – 0.97)
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)

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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
HIGHLANDS HOSPITAL (11902)							
2013	1,181	11,255	0.10	0	1.78	0.00	(0.00 – 2.07)
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)							
2013	8,119	58,369	0.14	5	12.28	0.41	(0.13 – 0.95)
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)							
2013	14,769	73,479	0.20	26	22.52	1.15	(0.75 – 1.69)
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)							
2013	5,685	21,559	0.26	14	11.99	1.17	(0.64 – 1.96)
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)							
2013	41,015	254,172	0.16	201	85.55	2.35	(2.04 – 2.70)
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)							
2013	2,997	37,757	0.08	9	4.48	2.01	(0.92 – 3.82)
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)							
2013	1,053	7,850	0.13	5	1.59	3.14	(1.01 – 7.33)
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)							
2013	7,782	38,470	0.20	3	11.87	0.25	(0.05 – 0.74)
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)							
2013	8,145	33,276	0.24	14	12.48	1.12	(0.61 – 1.88)
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)
JEFFERSON REGIONAL MEDICAL CENTER (10237)							
2013	14,650	75,311	0.19	8	22.32	0.36	(0.15 – 0.71)
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)							
2013	2,639	12,317	0.21	1	4.03	0.25	(0.00 – 1.38)
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)

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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
JERSEY SHORE HOSPITAL (11689)							
2013	537	4,129	0.13	0	0.81	0.00	(0.00 – 4.52)
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)							
2013	722	19,943	0.04	3	1.06	2.83	(0.57 – 8.27)
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)							
2013	348	4,230	0.08	0	0.52	0.00	(0.00 – 7.05)
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)							
2013	110	2,421	0.05	0	0.16	0.00	(0.00 – 22.60)
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)							
2013	4,513	11,096	0.41	18	6.99	2.57	(1.53 – 4.07)
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)							
2013	3,706	10,270	0.36	8	5.73	1.40	(0.60 – 2.75)
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)							
2013	5,588	8,855	0.63	9	8.74	1.03	(0.47 – 1.95)
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)							
2013	5,823	8,223	0.71	10	9.13	1.10	(0.52 – 2.01)
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)							
2013	2,870	6,846	0.42	12	4.45	2.70	(1.39 – 4.71)
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)							
2013	5,735	14,732	0.39	6	8.87	0.68	(0.25 – 1.47)
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)							
2013	3,352	6,388	0.52	1	5.22	0.19	(0.00 – 1.07)
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)

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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
KINDRED HOSPITAL SOUTH PHILADELPHIA (11940)							
2013	3,481	10,174	0.34	10	5.37	1.86	(0.89 – 3.42)
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)
LANCASTER GENERAL HOSPITAL (10183)							
2013	22,958	144,167	0.16	18	34.83	0.52	(0.31 – 0.82)
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)							
2013	4,287	26,814	0.16	5	6.50	0.77	(0.25 – 1.79)
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)							
2013	441	18,797	0.02	0	0.64	0.00	(0.00 – 5.72)
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)							
2013	3,311	19,657	0.17	1	5.03	0.20	(0.00 – 1.11)
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)							
2013	9,479	49,802	0.19	27	19.84	1.36	(0.90 – 1.98)
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)							
2013	34,680	209,562	0.17	144	72.38	1.99	(1.68 – 2.34)
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)							
2013	3,782	25,830	0.15	4	5.73	0.70	(0.19 – 1.79)
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)							
2013	4,223	7,951	0.53	9	6.58	1.37	(0.62 – 2.60)
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)							
2013	3,816	8,943	0.43	11	5.92	1.86	(0.93 – 3.33)
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)

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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
LIFECARE HOSPITALS OF PITTSBURGH — ALLE-KISKI CAMPUS (18955)							
2013	4,428	6,744	0.66	1	6.93	0.14	(0.00 – 0.80)
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)							
2013	7,452	13,998	0.53	8	11.61	0.69	(0.30 – 1.36)
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)							
2013	3,709	7,167	0.52	1	5.78	0.17	(0.00 – 0.96)
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)							
2013	4,399	24,376	0.18	10	6.69	1.49	(0.72 – 2.75)
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)
LOCK HAVEN HOSPITAL (12097)							
2013	543	4,229	0.13	0	0.82	0.00	(0.00 – 4.47)
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)							
2013	2,392	22,009	0.11	3	3.60	0.83	(0.17 – 2.44)
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)							
2013	7,812	29,844	0.26	29	11.98	2.42	(1.62 – 3.48)
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)							
2013	13,625	89,478	0.15	20	28.38	0.70	(0.43 – 1.09)
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)							
2013	11,575	55,569	0.21	19	17.67	1.08	(0.65 – 1.68)
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)							
2013	13,728	66,926	0.21	21	28.79	0.73	(0.45 – 1.12)
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)							
2013	1,464	36,491	0.04	4	2.15	1.86	(0.50 – 4.75)
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)

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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
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)							
2013	18,203	79,001	0.23	17	38.27	0.44	(0.26 – 0.71)
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)							
2013	5,697	36,306	0.16	10	11.88	0.84	(0.40 – 1.55)
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)							
2013	3,504	25,113	0.14	11	7.29	1.51	(0.75 – 2.70)
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)							
2013	1,289	4,867	0.26	0	1.98	0.00	(0.00 – 1.85)
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)							
2013	5,281	42,258	0.12	14	10.95	1.28	(0.70 – 2.14)
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)							
2013	4,889	38,617	0.13	1	10.14	0.10	(0.00 – 0.55)
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)							
2013	6,106	23,128	0.26	1	12.88	0.08	(0.00 – 0.43)
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)
MEYERSDALE COMMUNITY HOSPITAL (11968)							
2013	89	1,662	0.05	0	0.13	0.00	(0.00 – 27.83)
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)							
2013	462	3,078	0.15	0	0.70	0.00	(0.00 – 5.24)
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)							
2013	2,003	24,378	0.08	2	4.12	0.49	(0.05 – 1.75)
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)							
2013	27,073	149,054	0.18	60	56.62	1.06	(0.81 – 1.36)
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)

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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
MINERS MEDICAL CENTER (12295)							
2013	394	2,985	0.13	0	0.60	0.00	(0.00 – 6.16)
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)							
2013	5,005	49,805	0.10	7	7.52	0.93	(0.37 – 1.92)
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)							
2013	6,185	51,312	0.12	4	12.82	0.31	(0.08 – 0.80)
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)							
2013	13,783	49,847	0.28	18	29.09	0.62	(0.37 – 0.98)
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)							
2013	441	4,806	0.09	0	0.66	0.00	(0.00 – 5.55)
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)							
2013	1,396	7,565	0.18	2	2.12	0.94	(0.11 – 3.40)
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)							
2013	9,446	42,260	0.22	12	14.44	0.83	(0.43 – 1.45)
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)
NORRISTOWN STATE HOSPITAL (12047)							
2013	29	95,792	0.00	0	0.04	0.00	(0.00 – 95.76)
2012	.	.	.	.	.	.	.
2011	28	125,390	0.00	0	0.02	0.00	(0.00 – 243.07)
2010	3	128,196	0.00	0	0.01	0.00	(0.00 – 543.49)
OHIO VALLEY GENERAL HOSPITAL (12298)							
2013	3,088	22,184	0.14	1	4.67	0.21	(0.00 – 1.19)
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)							
2013	480	3,919	0.12	0	0.72	0.00	(0.00 – 5.07)
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)							
2013	933	11,211	0.08	0	1.40	0.00	(0.00 – 2.63)
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)							
2013	11,071	60,943	0.18	15	23.15	0.65	(0.36 – 1.07)
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)							
2013	887	17,246	0.05	3	1.31	2.29	(0.46 – 6.68)
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)							
2013	13,729	97,602	0.14	25	28.55	0.88	(0.57 – 1.29)
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)							
2013	11	20,998	0.00	0	0.01	0.00	(0.00 – 249.42)
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)							
2013	5,468	32,971	0.17	3	8.30	0.36	(0.07 – 1.06)
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)							
2013	439	1,036	0.42	0	0.68	0.00	(0.00 – 5.39)
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)							
2013	35,283	157,969	0.22	43	74.13	0.58	(0.42 – 0.78)
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)							
2013	11,980	53,633	0.22	9	18.31	0.49	(0.22 – 0.93)
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)							
2013	9,776	42,128	0.23	23	14.96	1.54	(0.97 – 2.31)
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)							
2013	1,498	7,683	0.19	2	2.28	0.88	(0.10 – 3.16)
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)							
2013	21,926	167,901	0.13	45	45.52	0.99	(0.72 – 1.32)
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)

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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
REGIONAL HOSPITAL OF SCRANTON (12533)							
2013	13,840	45,651	0.30	12	29.27	0.41	(0.21 – 0.72)
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)							
2013	15,370	44,830	0.34	12	23.72	0.51	(0.26 – 0.88)
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)							
2013	12,384	64,255	0.19	9	25.93	0.35	(0.16 – 0.66)
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)
ROXBOROUGH MEMORIAL HOSPITAL (11978)							
2013	3,895	23,849	0.16	0	8.13	0.00	(0.00 – 0.45)
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)							
2013	2,592	30,343	0.09	2	5.33	0.38	(0.04 – 1.35)
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)							
2013	3,441	26,682	0.13	3	5.20	0.58	(0.12 – 1.69)
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)							
2013	3,581	34,761	0.10	3	5.38	0.56	(0.11 – 1.63)
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)							
2013	2,275	6,041	0.38	10	3.52	2.84	(1.36 – 5.23)
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)							
2013	1,035	7,822	0.13	5	1.56	3.20	(1.03 – 7.46)
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)							
2013	6,344	11,479	0.55	3	9.89	0.30	(0.06 – 0.89)
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)							
2013	3,404	10,803	0.32	23	5.24	4.39	(2.78 – 6.58)
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)

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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
SELECT SPECIALTY HOSPITAL — CENTRAL PENNSYLVANIA (CAMP HILL) (12147)							
2013	3,648	10,345	0.35	26	5.63	4.62	(3.01 – 6.76)
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)							
2013	927	6,501	0.14	1	1.40	0.71	(0.01 – 3.97)
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)							
2013	2,981	7,840	0.38	1	4.61	0.22	(0.00 – 1.21)
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)							
2013	3,959	8,544	0.46	3	6.15	0.49	(0.10 – 1.43)
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)							
2013	3,627	6,436	0.56	5	5.66	0.88	(0.28 – 2.06)
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)							
2013	6,673	34,895	0.19	2	10.17	0.20	(0.02 – 0.71)
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)
SHRINERS HOSPITAL FOR CHILDREN — PHILADELPHIA (12244)							
2013	1,258	5,090	0.25	3	1.93	1.56	(0.31 – 4.55)
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)							
2013	1,657	11,623	0.14	5	3.45	1.45	(0.47 – 3.39)
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)							
2013	3,997	18,930	0.21	3	8.39	0.36	(0.07 – 1.05)
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)							
2013	1,103	11,449	0.10	0	1.65	0.00	(0.00 – 2.22)
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)							
2013	3,857	10,266	0.38	11	5.96	1.84	(0.92 – 3.30)
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)

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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. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)							
2013	971	44,274	0.02	1	1.94	0.52	(0.01 – 2.87)
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)							
2013	10,039	83,028	0.12	6	20.81	0.29	(0.11 – 0.63)
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)							
2013	5,548	33,728	0.16	11	11.58	0.95	(0.47 – 1.70)
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)							
2013	3,807	30,941	0.12	18	7.89	2.28	(1.35 – 3.60)
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)							
2013	2,541	20,370	0.12	0	5.27	0.00	(0.00 – 0.70)
2012	2,145	16,294	0.13	4	3.93	1.02	(0.27 – 2.61)
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
ST. LUKES HOSPITAL BETHLEHEM (11718)							
2013	20,055	137,377	0.15	37	41.74	0.89	(0.62 – 1.22)
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)							
2013	1,481	7,001	0.21	1	2.26	0.44	(0.01 – 2.46)
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)							
2013	1,151	14,419	0.08	1	1.72	0.58	(0.01 – 3.24)
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)							
2013	12,371	100,245	0.12	37	18.66	1.98	(1.40 – 2.73)
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)
ST. MARY MEDICAL CENTER REHAB (12483)							
2013	342	9,313	0.04	2	0.50	3.98	(0.45 – 14.38)
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)							
2013	16,634	74,136	0.22	28	34.95	0.80	(0.53 – 1.16)
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)

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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
SUNBURY COMMUNITY HOSPITAL (12105)							
2013	849	6,541	0.13	1	1.28	0.78	(0.01 – 4.34)
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)							
2013	583	2,015	0.29	1	0.90	1.12	(0.01 – 6.21)
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)							
2013	767	1,941	0.40	0	1.19	0.00	(0.00 – 3.09)
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)							
2013	30,454	143,434	0.21	79	63.91	1.24	(0.98 – 1.54)
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)							
2013	6,959	38,759	0.18	6	10.59	0.57	(0.21 – 1.23)
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)							
2013	1,589	28,995	0.05	15	2.35	6.37	(3.56 – 10.51)
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)							
2013	8,495	54,165	0.16	11	17.71	0.62	(0.31 – 1.11)
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)							
2013	6,393	57,409	0.11	8	13.23	0.60	(0.26 – 1.19)
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)							
2013	6,463	46,661	0.14	13	13.44	0.97	(0.51 – 1.65)
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)							
2013	52,737	196,126	0.27	97	111.25	0.87	(0.71 – 1.06)
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)							
2013	879	6,554	0.13	6	1.33	4.52	(1.65 – 9.83)
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)							
2013	9	33,243	0.00	0	0.01	0.00	(0.00 – 309.33)
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)							
2013	996	7,100	0.14	3	1.51	1.99	(0.40 – 5.82)
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)							
2013	445	5,653	0.08	0	0.66	0.00	(0.00 – 5.52)
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)							
2013	349	2,668	0.13	0	0.53	0.00	(0.00 – 6.96)
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)							
2013	11,581	43,957	0.26	5	24.42	0.20	(0.07 – 0.48)
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)							
2013	1,655	7,301	0.23	0	2.53	0.00	(0.00 – 1.45)
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 EAST (28812)							
2013	8,549	29,712	0.29	9	13.14	0.68	(0.31 – 1.30)
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
UPMC HAMOT (11725)							
2013	23,405	92,583	0.25	47	49.31	0.95	(0.70 – 1.27)
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)							
2013	6,603	32,503	0.20	7	13.84	0.51	(0.20 – 1.04)
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)							
2013	5,971	53,354	0.11	9	12.35	0.73	(0.33 – 1.38)
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)							
2013	27,628	139,206	0.20	49	57.89	0.85	(0.63 – 1.12)
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)

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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 NORTHWEST (11837)							
2013	4,934	33,929	0.15	4	7.47	0.54	(0.14 – 1.37)
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)							
2013	26,522	100,207	0.26	39	40.69	0.96	(0.68 – 1.31)
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)							
2013	65,582	221,480	0.30	244	138.65	1.76	(1.55 – 2.00)
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)							
2013	39,910	154,054	0.26	111	84.12	1.32	(1.09 – 1.59)
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)
UPMC PRESBYTERIAN SHADYSIDE — WPIC (13702)							
2013	78	103,422	0.00	1	0.14	6.92	(0.09 – 38.51)
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)							
2013	17,286	69,846	0.25	25	36.40	0.69	(0.44 – 1.01)
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)							
2013	2,022	15,355	0.13	2	3.05	0.65	(0.07 – 2.36)
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)							
2013	2,293	16,857	0.14	3	3.47	0.87	(0.17 – 2.53)
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)							
2013	1,554	9,414	0.17	0	2.36	0.00	(0.00 – 1.55)
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)
WELLSPAN SURGERY AND REHABILITATION HOSPITAL (27430)							
2013	975	15,195	0.06	4	1.45	2.76	(0.74 – 7.06)
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
WILKES-BARRE GENERAL HOSPITAL (11916)							
2013	21,708	83,844	0.26	62	45.76	1.35	(1.04 – 1.74)
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)

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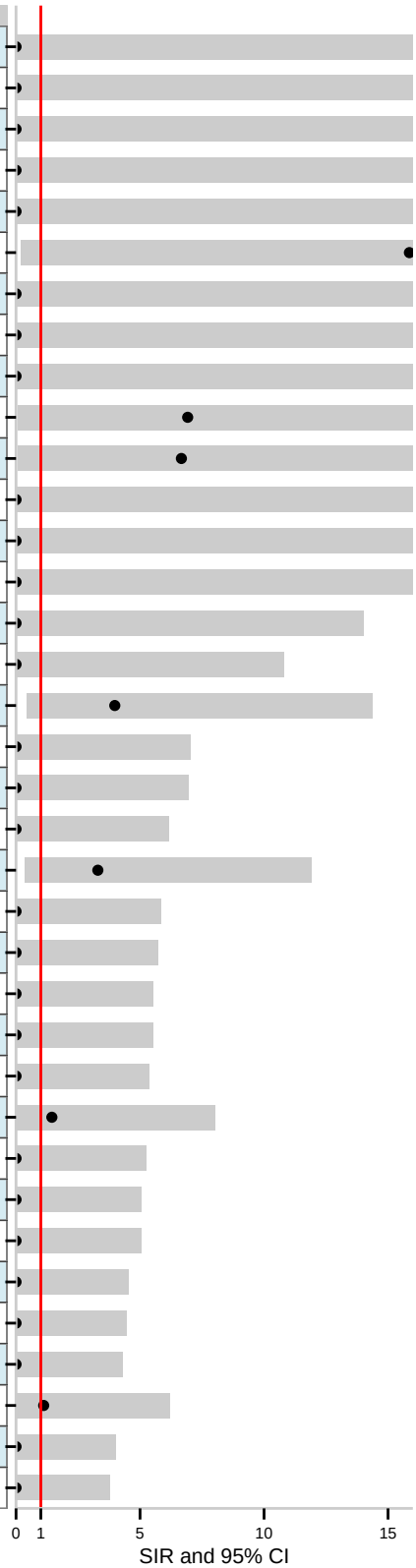
Table 4.3.7 – Continued from previous page

	Catheter Days	Patient Days	Catheter Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)							
2013	9,733	57,713	0.17	11	20.32	0.54	(0.27 – 0.97)
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)							
2013	1,120	6,417	0.17	3	1.70	1.76	(0.35 – 5.15)
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)							
2013	26,694	162,441	0.16	62	55.70	1.11	(0.85 – 1.43)
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 4.3.1: Number of Observed (Obs.) Catheter-Associated Urinary Tract Infections (CAUTI) and Relative Ranking of Facilities by Standardized Infection Ratio (SIR) — Pennsylvania, 2013

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

Obs.	Pred.	SIR	Facility and NHSN ID
0	0.01	0.0	TORRANCE STATE HOSPITAL (12091)
0	0.01	0.0	PENNSYLVANIA PSYCHIATRIC INSTITUTE (14190)
0	0.04	0.0	NORRISTOWN STATE HOSPITAL (12047)
0	0.05	0.0	EDGEWOOD SURGICAL HOSPITAL (12552)
0	0.05	0.0	CHILDRENS HOME OF PITTSBURGH, THE (12336)
1	0.06	15.9	CHILDRENS INSTITUTE OF PITTSBURGH (12266)
0	0.09	0.0	DIVINE PROVIDENCE HOSPITAL (11743)
0	0.10	0.0	EAGLEVILLE HOSPITAL (12965)
0	0.13	0.0	MEYERSDALE COMMUNITY HOSPITAL (11968)
1	0.14	6.9	UPMC PRESBYTERIAN SHADYSIDE −−− WPIC (13702)
1	0.15	6.7	BUCKTAIL MEDICAL CENTER (12461)
0	0.16	0.0	KENSINGTON HOSPITAL (12609)
0	0.18	0.0	CLARKS SUMMIT STATE HOSPITAL (12051)
0	0.19	0.0	BUCKS COUNTY SPECIALTY HOSPITAL (15202)
0	0.26	0.0	DANVILLE STATE HOSPITAL (11848)
0	0.34	0.0	BARIX CLINICS OF PENNSYLVANIA (12037)
2	0.50	4.0	ST. MARY MEDICAL CENTER REHAB (12483)
0	0.52	0.0	KANE COMMUNITY HOSPITAL (12111)
0	0.53	0.0	TYRONE HOSPITAL (12717)
0	0.60	0.0	MINERS MEDICAL CENTER (12295)
2	0.61	3.3	ADVANCED SURGICAL HOSPITAL (16317)
0	0.63	0.0	HEALTHSOUTH READING REHABILITATION HOSPITAL (12139)
0	0.64	0.0	LANCASTER REHABILITATION HOSPITAL (12628)
0	0.66	0.0	MUNCY VALLEY HOSPITAL (11748)
0	0.66	0.0	TYLER MEMORIAL HOSPITAL (11829)
0	0.68	0.0	PHYSICIANS CARE SURGICAL HOSPITAL (19630)
1	0.69	1.4	FULTON COUNTY MEDICAL CENTER (11939)
0	0.70	0.0	MID−VALLEY HOSPITAL (11557)
0	0.72	0.0	OSS ORTHOPAEDIC HOSPITAL (18467)
0	0.73	0.0	BARNES−KASSON COUNTY HOSPITAL (12404)
0	0.81	0.0	JERSEY SHORE HOSPITAL (11689)
0	0.82	0.0	LOCK HAVEN HOSPITAL (12097)
0	0.85	0.0	GEISINGER HEALTHSOUTH REHABILITATION HOSPITAL (11993)
1	0.90	1.1	SURGICAL INSTITUTE OF READING (12535)
0	0.91	0.0	CORRY MEMORIAL HOSPITAL (12283)
0	0.96	0.0	ENDLESS MOUNTAINS HEALTH SYSTEMS (11817)

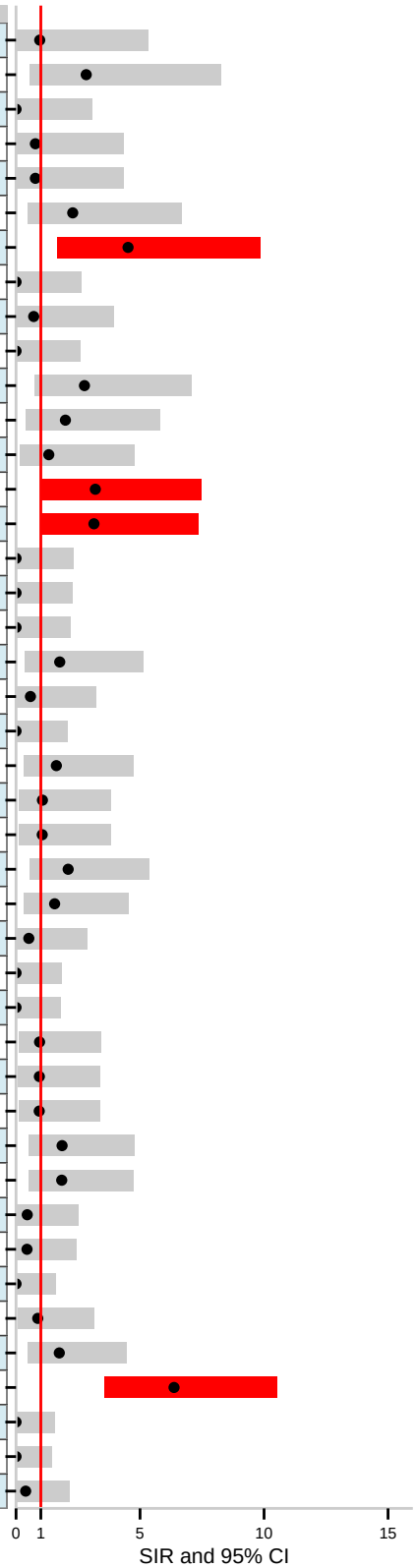


Better than predicted | Not different than predicted | Worse than predicted

Figure 4.3.2: Number of Observed (Obs.) Catheter-Associated Urinary Tract Infections (CAUTI) and Relative Ranking of Facilities by Standardized Infection Ratio (SIR) — Pennsylvania, 2013

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

Obs.	Pred.	SIR	Facility and NHSN ID
1	1.05	1.0	HEALTHSOUTH NITTANY VALLEY REHABILITATION HOSPITAL (11667)
3	1.06	2.8	JOHN HEINZ INSTITUTE OF REHABILITATION (11861)
0	1.19	0.0	SURGICAL SPECIALTY CENTER AT COORDINATED HEALTH, THE (15259)
1	1.28	0.8	BROOKVILLE HOSPITAL (12418)
1	1.28	0.8	SUNBURY COMMUNITY HOSPITAL (12105)
3	1.31	2.3	PENN STATE HERSHEY REHABILITATION LLC (11915)
6	1.33	4.5	TITUSVILLE AREA HOSPITAL (11738)
0	1.40	0.0	PALMERTON HOSPITAL (12396)
1	1.40	0.7	SELECT SPECIALTY HOSPITAL −−− DANVILLE (12123)
0	1.42	0.0	HEALTHSOUTH REHABILITATION HOSPITAL OF ERIE (11810)
4	1.45	2.8	WELLSPAN SURGERY AND REHABILITATION HOSPITAL (27430)
3	1.51	2.0	TROY COMMUNITY HOSPITAL (12018)
2	1.51	1.3	CRICHTON REHABILITATION CENTER (12273)
5	1.56	3.2	SELECT SPECIALITY HOSPITAL −−− ERIE (11880)
5	1.59	3.1	J C BLAIR MEMORIAL HOSP (11724)
0	1.59	0.0	HEALTHSOUTH REHABILITATION HOSPITAL OF SEWICKLEY (12066)
0	1.62	0.0	COORDINATED HEALTH ORTHOPEDIC HOSPITAL, LLC (11872)
0	1.65	0.0	SOUTHWEST REGIONAL MEDICAL CENTER (11942)
3	1.70	1.8	WINDBER HOSPITAL (12031)
1	1.72	0.6	ST. LUKES QUAKERTOWN HOSPITAL (11711)
0	1.78	0.0	HIGHLANDS HOSPITAL (11902)
3	1.84	1.6	HEALTHSOUTH REHABILITATION HOSPITAL OF YORK (12058)
2	1.88	1.1	CROZER CHESTER MEDICAL CENTER SPRINGFIELD (11851)
2	1.89	1.1	GEISINGER−BLOOMSBURG HOSPITAL (12008)
4	1.90	2.1	CHARLES COLE MEMORIAL HOSPITAL (11956)
3	1.93	1.6	SHRINERS HOSPITAL FOR CHILDREN −−− PHILADELPHIA (12244)
1	1.94	0.5	ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)
0	1.98	0.0	MEMORIAL HOSPITAL, INC. TOWANDA (12549)
0	2.02	0.0	GROVE CITY MEDICAL CENTER (11722)
2	2.11	0.9	HEALTHSOUTH REHABILITATION HOSPITAL OF MECHANICSBURG (12402)
2	2.12	0.9	NASON HOSPITAL (11907)
2	2.14	0.9	HEALTHSOUTH REHABILITATION HOSPITAL OF ALTOONA (11903)
4	2.15	1.9	MAIN LINE HOSPITAL BRYN MAWR REHABILITATION (11417)
4	2.17	1.8	ELLWOOD CITY HOSPITAL (11779)
1	2.21	0.5	BERWICK HOSPITAL CENTER (11442)
1	2.26	0.4	ST. LUKES MINERS MEMORIAL HOSPITAL (11784)
0	2.26	0.0	BRADFORD REGIONAL MEDICAL CENTER (12361)
2	2.28	0.9	PUNXSUTAWNEY AREA HOSPITAL (11830)
4	2.29	1.7	ALLIED SERVICES INSTITUTE OF REHABILITATION (12591)
15	2.35	6.4	THE GOOD SHEPHERD REHABILITATION HOSPITAL (11896)
0	2.36	0.0	WAYNESBORO HOSPITAL (11642)
0	2.53	0.0	UPMC BEDFORD (11680)
1	2.57	0.4	GNADEN HUETTEN MEMORIAL HOSPITAL (12241)

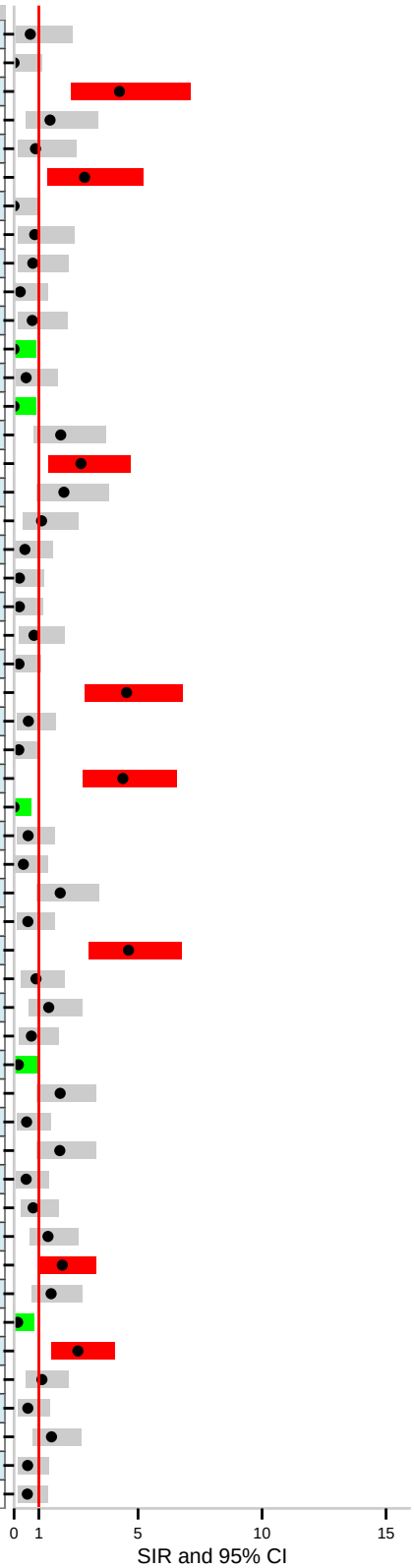


Better than predicted | Not different than predicted | Worse than predicted

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, 2013

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

Obs.	Pred.	SIR	Facility and NHSN ID
2	3.05	0.7	WARREN GENERAL HOSPITAL (12216)
0	3.25	0.0	CLARION HOSPITAL (11654)
14	3.29	4.3	GOOD SHEPHERD PENN PARTNERS (13929)
5	3.45	1.5	SOLDIERS \& SAILORS MEM HOSPITAL (11688)
3	3.47	0.9	WAYNE MEMORIAL HOSPITAL (12004)
10	3.52	2.8	SELECT SPECIALITY HOSPITAL −−− CENTRAL PENNSYLVANIA (YORK) (12334)
0	3.60	0.0	ELK REGIONAL HEALTH CENTER (11859)
3	3.60	0.8	LOWER BUCKS HOSPITAL (12390)
3	3.96	0.8	HEART OF LANCASTER REGIONAL MEDICAL CENTER (12571)
1	4.03	0.2	JENNERSVILLE REGIONAL HOSPITAL (12337)
3	4.09	0.7	GETTYSBURG HOSPITAL (11531)
0	4.09	0.0	CLEARFIELD HOSPITAL (11843)
2	4.12	0.5	MILLCREEK COMMUNITY HOSPITAL (12253)
0	4.19	0.0	EXCELA HEALTH FRICK HOSPITAL (11639)
8	4.25	1.9	EASTERN REGIONAL MEDICAL CENTER (12348)
12	4.45	2.7	KINDRED HOSPITAL EASTON (12007)
9	4.48	2.0	INDIANA REGIONAL MEDICAL CENTER (11759)
5	4.51	1.1	HEALTHSOUTH HARMARVILLE REHABILITATION HOSPITAL (11727)
2	4.57	0.4	CANONSBURG GENERAL HOSPITAL (11586)
1	4.61	0.2	SELECT SPECIALTY HOSPITAL −−− MCKEESPORT, INC. (12271)
1	4.67	0.2	OHIO VALLEY GENERAL HOSPITAL (12298)
4	4.98	0.8	ALBERT EINSTEIN MEDICAL CENTER MOSS REHABILITATION (12508)
1	5.03	0.2	LANSDALE HOSPITAL (12032)
23	5.07	4.5	GOOD SHEPHERD SPECIALTY HOSPITAL (11887)
3	5.20	0.6	SCHUYLKILL MEDICAL CENTER −−− EAST NORWEGIAN STREET (11922)
1	5.22	0.2	KINDRED HOSPITAL PITTSBURGH −−− NORTH SHORE (12296)
23	5.24	4.4	SELECT SPECIALTY HOSPITAL −−− CENTRAL PA (13921)
0	5.27	0.0	ST. LUKES HOSPITAL ANDERSON CAMPUS (21487)
3	5.30	0.6	ALBERT EINSTEIN MEDICAL CENTER AT ELKINS PARK (12500)
2	5.33	0.4	SACRED HEART HOSPITAL (11684)
10	5.37	1.9	KINDRED HOSPITAL SOUTH PHILADELPHIA (11940)
3	5.38	0.6	SCHUYLKILL MEDICAL CENTER −−− SOUTH JACKSON STREET (12087)
26	5.63	4.6	SELECT SPECIALTY HOSPITAL −−− CENTRAL PENNSYLVANIA (CAMP HILL) (12147)
5	5.66	0.9	SELECT SPECIALTY HOSPITAL LAUREL HIGHLANDS, INC. (12108)
8	5.73	1.4	KINDRED HOSPITAL −−− PITTSBURGH (12358)
4	5.73	0.7	LEWISTOWN HOSPITAL (11825)
1	5.78	0.2	LIFECARE HOSPITALS OF PITTSBURGH −−− SUBURBAN CAMPUS (12385)
11	5.92	1.9	LIFECARE HOSPITALS OF MECHANICSBURG (12388)
3	5.93	0.5	CARLISLE REGIONAL MEDICAL CENTER (11997)
11	5.96	1.8	SPECIAL CARE HOSPITAL (12604)
3	6.15	0.5	SELECT SPECIALTY HOSPITAL −−− PITTSBURGH/UPMC (12009)
5	6.50	0.8	LANCASTER REGIONAL MEDICAL CENTER (12335)
9	6.58	1.4	LIFECARE HOSPITALS OF CHESTER COUNTY (12005)
13	6.69	1.9	BRANDYWINE HOSPITAL (11979)
10	6.69	1.5	LIFECARE HOSPITALS OF PITTSBURGH (11945)
1	6.93	0.1	LIFECARE HOSPITALS OF PITTSBURGH −−− ALLE−KISKI CAMPUS (18955)
18	6.99	2.6	KINDRED HOSPITAL −−− PHILADELPHIA (11832)
8	7.13	1.1	HANOVER HOSPITAL (11899)
4	7.19	0.6	DUBOIS REGIONAL MEDICAL CENTER (11606)
11	7.29	1.5	MEMORIAL HOSPITAL (11633)
4	7.31	0.5	ARMSTRONG COUNTY MEMORIAL HOSPITAL (12057)
4	7.47	0.5	UPMC NORTHWEST (11837)

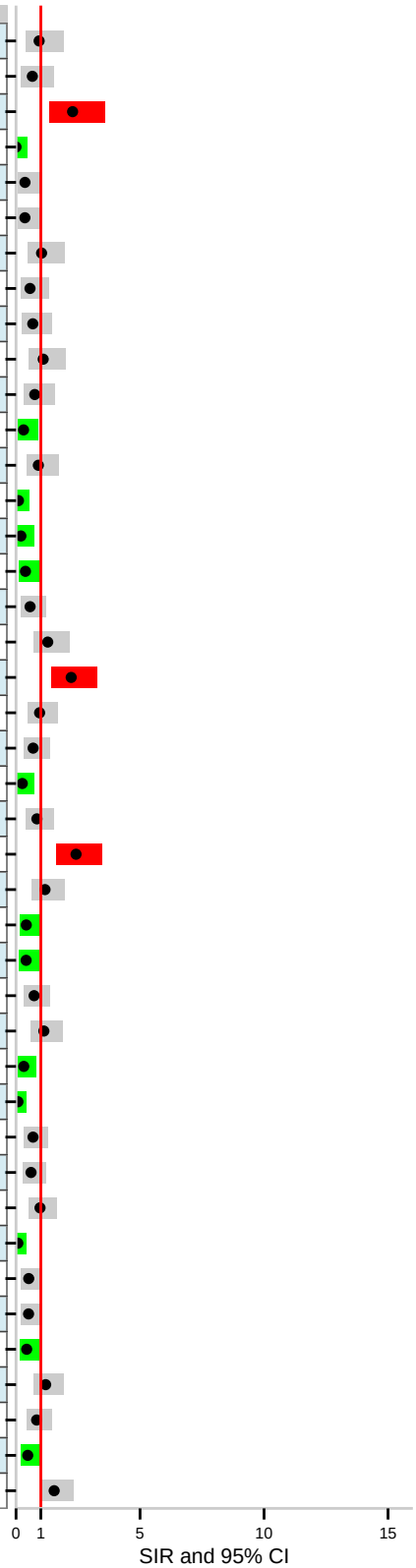


Better than predicted | Not different than predicted | Worse than predicted

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, 2013

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

Obs.	Pred.	SIR	Facility and NHSN ID
7	7.52	0.9	MONONGAHELA VALLEY HOSPITAL (11069)
5	7.60	0.7	EVANGELICAL COMMUNITY HOSPITAL (11701)
18	7.89	2.3	ST. JOSEPHS HOSPITAL (12438)
0	8.13	0.0	ROXBOROUGH MEMORIAL HOSPITAL (11978)
3	8.30	0.4	PHOENIXVILLE HOSPITAL COMPANY LLC (11836)
3	8.39	0.4	SOMERSET HOSPITAL (12282)
9	8.74	1.0	KINDRED HOSPITAL −−− WYOMING VALLEY (12485)
5	8.87	0.6	EINSTEIN MEDICAL CENTER MONTGOMERY (30210)
6	8.87	0.7	KINDRED HOSPITAL PHILADELPHIA −−− HAVERTOWN (12908)
10	9.13	1.1	KINDRED HOSPITAL AT HERITAGE VALLEY (12268)
7	9.28	0.8	ALLEGHENY VALLEY HOSPITAL (11842)
3	9.89	0.3	SELECT SPECIALITY HOSPITAL −−− JOHNSTOWN (12299)
9	10.01	0.9	CROZER CHESTER MEDICAL CENTER TAYLOR (11932)
1	10.14	0.1	MERCY PHILADELPHIA HOSPITAL (11946)
2	10.17	0.2	SHARON REGIONAL HEALTH SYSTEM (12250)
4	10.52	0.4	EPHRATA COMMUNITY HOSPITAL (11764)
6	10.59	0.6	THE GOOD SAMARITAN HOSPITAL (11712)
14	10.95	1.3	MERCY FITZGERALD HOSPITAL (11683)
25	11.24	2.2	CHESTER COUNTY HOSPITAL (12016)
11	11.58	1.0	ST. JOSEPH MEDICAL CENTER (11961)
8	11.61	0.7	LIFECARE HOSPITALS OF PITTSBURGH −−− MONROEVILLE (12254)
3	11.87	0.3	JAMESON MEMORIAL HOSPITAL (11954)
10	11.88	0.8	MEADVILLE MEDICAL CENTER (11583)
29	11.98	2.4	MAGEE REHAB HOSPITAL (12146)
14	11.99	1.2	HOSPITAL OF FOX CHASE CANCER CENTER (12134)
5	12.11	0.4	HAZLETON GENERAL HOSPITAL (11878)
5	12.28	0.4	HOLY REDEEMER HOSPITAL AND MEDICAL CENTER (11973)
9	12.35	0.7	UPMC MCKEESPORT (11707)
14	12.48	1.1	JEANES HOSPITAL (11459)
4	12.82	0.3	MOSES TAYLOR HOSPITAL (11528)
1	12.88	0.1	MERCY SUBURBAN HOSPITAL NORRISTOWN (11952)
9	13.14	0.7	UPMC EAST (28812)
8	13.23	0.6	THE WESTERN PENNSYLVANIA HOSPITAL (11864)
13	13.44	1.0	THOMAS JEFFERSON UNIV HOSP − METHODIST (12017)
1	13.56	0.1	CHESTNUT HILL HOSPITAL (12304)
7	13.66	0.5	DOYLESTOWN HOSPITAL (10190)
7	13.84	0.5	UPMC HORIZON (11675)
6	13.97	0.4	EXCELA HEALTH LATROBE HOSPITAL (11651)
17	14.24	1.2	CHILDRENS HOSPITAL OF PHILADELPHIA (10306)
12	14.44	0.8	NAZARETH HOSPITAL (11919)
7	14.81	0.5	HERITAGE VALLEY SEWICKLEY (10375)
23	14.96	1.5	POTTSTOWN MEMORIAL MEDICAL CENTER (11983)

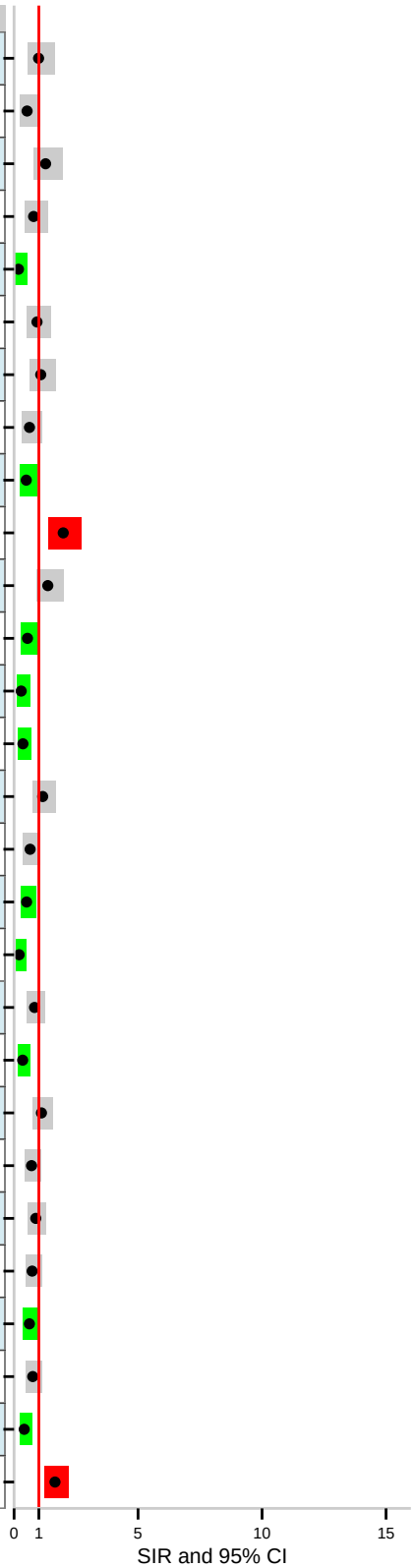


Better than predicted | Not different than predicted | Worse than predicted

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, 2013

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

Obs.	Pred.	SIR	Facility and NHSN ID
15	15.18	1.0	EASTON HOSPITAL (11929)
8	15.24	0.5	CHAMBERSBURG HOSPITAL (11913)
20	15.72	1.3	GRAND VIEW HOSPITAL (11847)
13	16.49	0.8	BUTLER MEMORIAL HOSPITAL (11736)
3	16.80	0.2	DELAWARE COUNTY MEMORIAL HOSPITAL (11972)
16	17.31	0.9	CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)
19	17.67	1.1	MAIN LINE HOSPITAL −−− PAOLI (11750)
11	17.71	0.6	THE WASHINGTON HOSPITAL (11460)
9	18.31	0.5	POCONO MEDICAL CENTER (11772)
37	18.66	2.0	ST. MARY MEDICAL CENTER (11885)
27	19.84	1.4	LEHIGH VALLEY HOSPITAL −−− MUHLENBERG (11898)
11	20.32	0.5	WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)
6	20.81	0.3	ST. CLAIR MEMORIAL HOSPITAL (10561)
8	22.32	0.4	JEFFERSON REGIONAL MEDICAL CENTER (10237)
26	22.52	1.2	HOLY SPIRIT HOSPITAL (12387)
15	23.15	0.6	PENN PRESBYTERIAN MEDICAL CENTER (11814)
12	23.72	0.5	RIDDLE MEMORIAL HOSPITAL (11731)
5	24.42	0.2	UNIONTOWN HOSPITAL (10441)
21	25.44	0.8	GEISINGER−COMMUNITY MEDICAL CENTER (11914)
9	25.93	0.3	ROBERT PACKER HOSPITAL (12422)
31	28.07	1.1	CROZER CHESTER MEDICAL CENTER (11839)
20	28.38	0.7	MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)
25	28.55	0.9	PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS (11448)
21	28.79	0.7	MAIN LINE HOSPITAL BRYN MAWR (11753)
18	29.09	0.6	MOUNT NITTANY MEDICAL CENTER (11797)
22	29.22	0.8	FORBES REGIONAL HOSPITAL (11265)
12	29.27	0.4	REGIONAL HOSPITAL OF SCRANTON (12533)
49	29.69	1.7	ALTOONA REGIONAL HEALTH SYSTEM (10178)

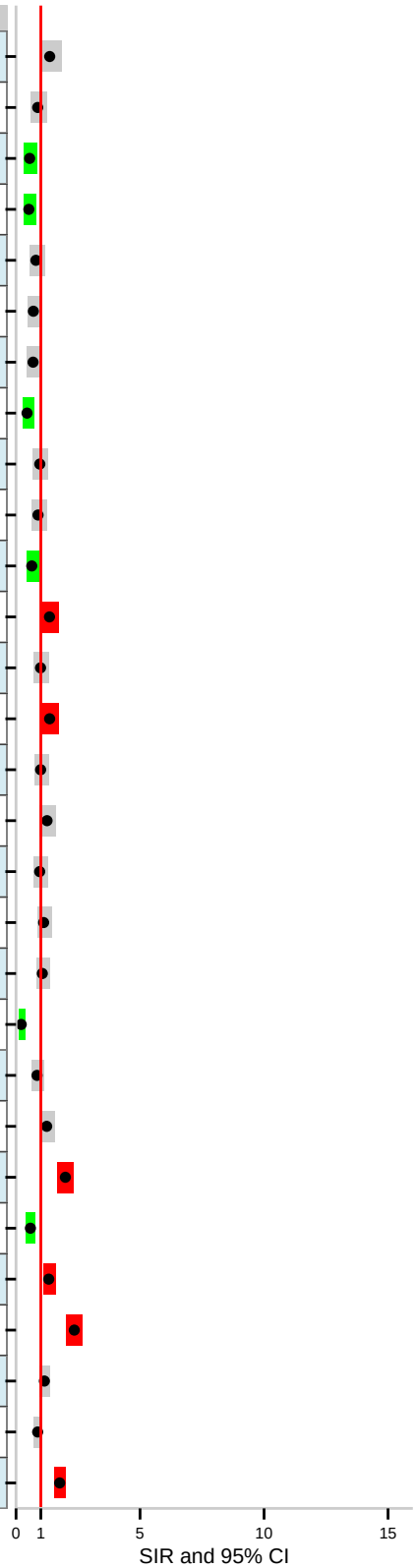


Better than predicted | Not different than predicted | Worse than predicted

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, 2013

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

Obs.	Pred.	SIR	Facility and NHSN ID
43	31.67	1.4	GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)
29	33.21	0.9	HAHNEMANN UNIVERSITY HOSPITAL (11437)
19	34.61	0.5	EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)
18	34.83	0.5	LANCASTER GENERAL HOSPITAL (10183)
28	34.95	0.8	ST. VINCENT HEALTH CENTER (11699)
25	35.77	0.7	HERITAGE VALLEY BEAVER (11831)
25	36.40	0.7	UPMC ST MARGARET (11561)
17	38.27	0.4	MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)
39	40.69	1.0	UPMC PASSAVANT (11242)
37	41.74	0.9	ST. LUKES HOSPITAL BETHLEHEM (11718)
27	42.47	0.6	ALBERT EINSTEIN MEDICAL CENTER (10585)
59	43.74	1.3	ABINGTON MEMORIAL HOSPITAL (11838)
45	45.52	1.0	READING HOSPITAL AND MEDICAL CENTER (12375)
62	45.76	1.4	WILKES−BARRE GENERAL HOSPITAL (11916)
48	48.42	1.0	GEISINGER MEDICAL CENTER (11775)
61	48.81	1.2	ARIA HEALTH (11388)
47	49.31	1.0	UPMC HAMOT (11725)
62	55.70	1.1	YORK HOSPITAL (10108)
60	56.62	1.1	MILTON S HERSHEY MEDICAL CENTER (11747)
12	57.33	0.2	CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)
49	57.89	0.8	UPMC MERCY (10384)
79	63.91	1.2	TEMPLE UNIVERSITY HOSPITAL (12382)
144	72.38	2.0	LEHIGH VALLEY HOSPITAL (11884)
43	74.13	0.6	PINNACLE HEALTH HOSPITALS (10122)
111	84.12	1.3	UPMC PRESBYTERIAN SHADYSIDE −−− SHADYSIDE (10118)
201	85.55	2.3	HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)
114	99.71	1.1	ALLEGHENY GENERAL HOSPITAL (10648)
97	111.25	0.9	THOMAS JEFFERSON UNIV HOSPITAL (11506)
244	138.65	1.8	UPMC PRESBYTERIAN SHADYSIDE −−− PRESBYTERIAN (10348)



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

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 27.92 percent (Table 4.4.2, Figure 4.4.1).

While the findings in 2013 show continued declines in the incidence of CLABSIs, the pace of decline has leveled off. Most of the reduction in CLABSI rates occurred before 2013.

In 2013, a total of 217 (86.45 percent) of the 251 Pennsylvania hospitals reported use of central lines in any of their hospital locations. The 34 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, 138 used them in the ICU and/or other ward locations and 26 institutions were long-term care facilities. 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, 2013

	Number of Facilities
ICUs and other wards	138
ICUs, other wards, and specialty care areas	10
ICUs, other wards, specialty care areas and NICUs	13
ICUs, other wards and NICUs	30
Long-term acute care facilities	26
All	217

Among the 217 hospitals that used central lines in 2013, a total of 149 (68.7 percent) reported at least one CLABSI. During 2013, there were a total of 1,454 CLABSIs reported (Table 4.4.2). Among the 1,454 CLABSIs, 68 (4.7 percent) occurred in the NICU, 199 (13.7 percent) occurred in SCAs, 163 (11.2 percent) occurred in LTACs, 463 (31.8 percent) occurred in ward locations, and 561 (38.6 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, 2013

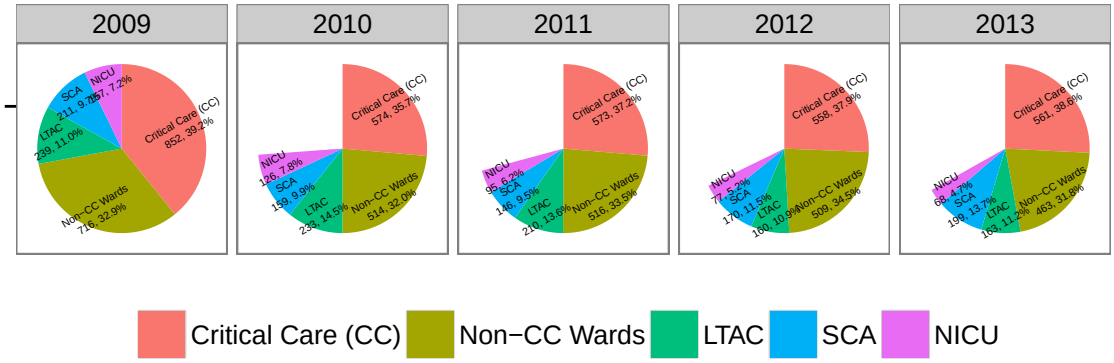


Table 4.4.2: Summary of Central Line-Associated Bloodstream Infections (CLABSI) — Pennsylvania, 2009–2013

	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)
2013	1,454	1,635,871	0.89 (0.84–0.94)	0.22 (−27.92)	9,845,909	0.17	0.30 (−2.02)

These CLABSIs occured over a total of 1,635,871 central line days. The range of central line days reported by hospitals in 2013 ranged from 4 central line days to a high of 103,460 central line days.

The absolute number of CLABSIs reported in 2013 was 1.36 percent lower than in 2012, and the number of central line days reported in 2013 was 1.58 percent lower than in 2012. The device utilization ratio is essentially unchanged. The CLABSI rate for 2013 was 0.89 CLABSIs per 1,000 central line days, which is approximately the same as the rate in 2012 (Table 4.4.2). The rate was 27.92 percent lower than the rate seen in the baseline year of 2009. This translates to 2,262 fewer CLABSIs in Pennsylvania than would have occured if the 2009 CLABSI rate had persisted into 2013.

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, 2009–2013

	Number of CLABSI	Central Line Days	Rate per 1,000 Central Line Days	Patient Days	Device Utilization Ratio — DUR (Line Days / Pt. Days)
NICU					
2013	68	54,182	1.26	268,868	0.20
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					
2013	199	125,719	1.58	207,810	0.60
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					
2013	88	98,647	0.89	613,261	0.16
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					
2013	163	137,716	1.18	251,711	0.55
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					
2013	10	5,316	1.88	13,088	0.41
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					
2013	48	64,956	0.74	91,830	0.71
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					
2013	172	209,603	0.82	463,063	0.45
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					
2013	87	71,263	1.22	125,925	0.57
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

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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:Peds					
2013	47	34,482	1.36	62,108	0.56
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					
2013	25	29,487	0.85	74,545	0.40
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
cc:Surgery					
2013	63	59,069	1.07	102,849	0.57
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					
2013	21	29,722	0.71	50,959	0.58
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					
2013	1	2,378	0.42	1,626,139	0.00
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					
2013	0	1,243	0.00	372,699	0.00
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

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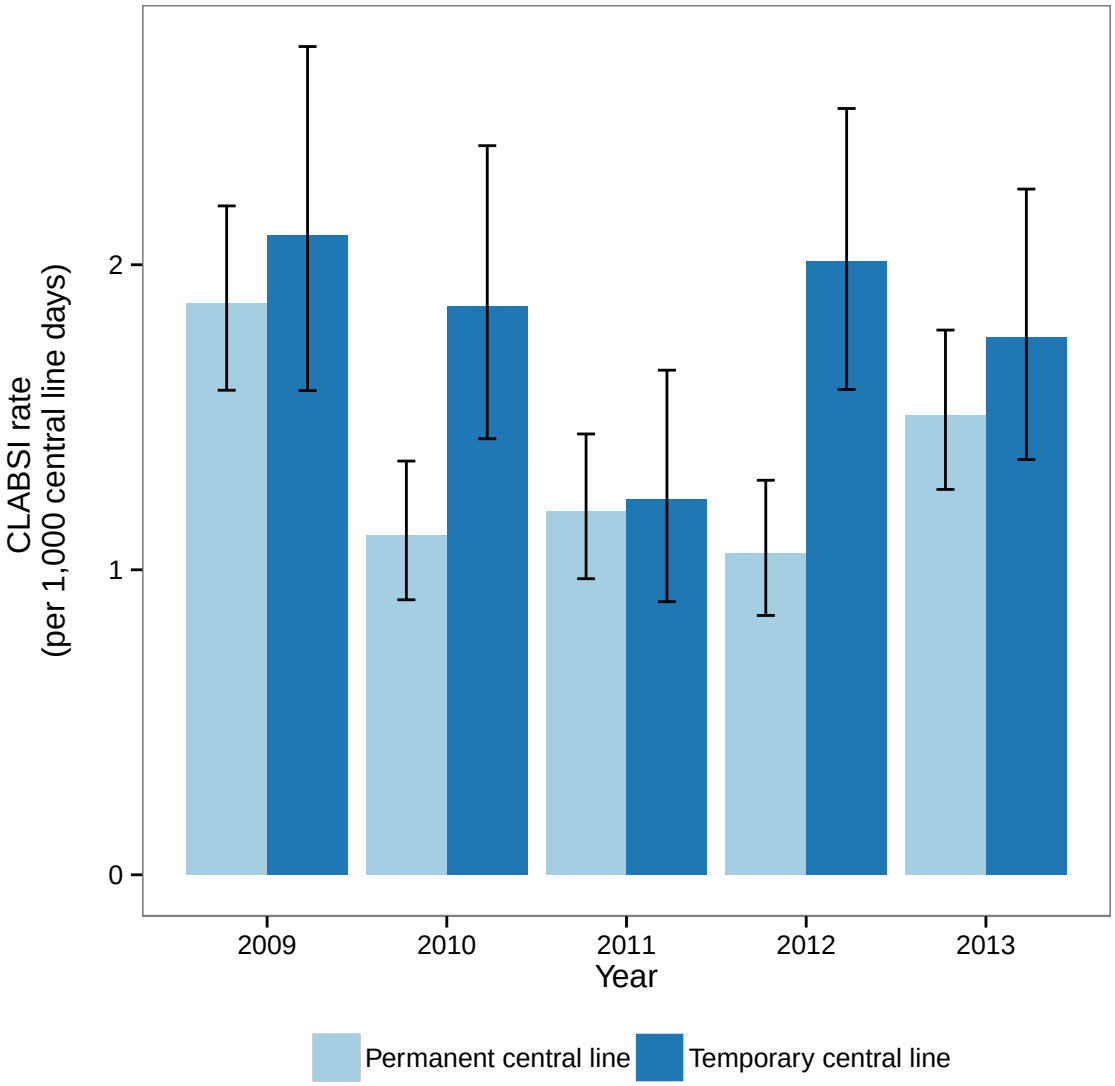
Table 4.4.3 – Continued from previous page

	Number of CLABSI	Central Line Days	Rate per 1,000 Central Line Days	Patient Days	Device Utilization Ratio (Line Days / Pt. Days)
w:MS					
2013	205	321,803	0.64	2,449,401	0.13
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					
2013	152	210,273	0.72	1,242,237	0.17
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					
2013	0	131	0.00	151,918	0.00
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					
2013	48	34,068	1.41	229,380	0.15
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					
2013	14	45,291	0.31	701,821	0.06
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					
2013	43	100,522	0.43	746,297	0.13
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 and 2013 (1.76 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, 2009–2013



4.4.3. CLABSIs — By Pathogen

In 2013, hospitals reported a total of 1,668 isolates from 1,454 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 (32.55 percent) of isolates cultured from patients with a CLABSI (Table 4.4.4). The 20 organisms listed in Table 4.4.4 account for 86.45 percent of isolates cultured from CLABSIs. The remaining isolates (13.55 percent) cultured from CLABSIs in 2013 are from 96 other pathogens, each individually accounting for less than 1 percent of the total results. The patterns seen in 2013 are not substantially different than those in 2012

Table 4.4.4: Pathogens Isolated in Central Line-Associated Infections — Pennsylvania, 2012–2013

	2012		2013	
Pathogen	Count	%	Count	%
Staphylococcus aureus	321	18.93	273	16.37
Enterococcus faecalis	135	7.96	146	8.75
Klebsiella pneumoniae	126	7.43	124	7.43
Enterococcus faecium	69	4.07	106	6.35
Staphylococcus coagulase negative	96	5.66	102	6.12
Escherichia coli	73	4.30	96	5.76
Candida albicans	106	6.25	90	5.40
Staphylococcus epidermidis	102	6.01	89	5.34
Pseudomonas aeruginosa	72	4.25	82	4.92
Enterococcus spp.	53	3.12	52	3.12
Candida glabrata	50	2.95	48	2.88
Enterobacter cloacae	53	3.12	40	2.40
Serratia marcescens	48	2.83	36	2.16
Candida parapsilosis	30	1.77	35	2.10
Klebsiella oxytoca	26	1.53	25	1.50
Acinetobacter baumannii	27	1.59	22	1.32
Stenotrophomonas maltophilia	15	0.88	22	1.32
Candida tropicalis	10	0.59	19	1.14
Streptococcus viridans spp.	10	0.59	18	1.08
Klebsiella pneumoniae ss. pneumoniae	10	0.59	17	1.02
Other	264	15.57	226	13.55
All	1,696	100.00	1,668	100.00

4.4.4. CLABSIs — National Comparison

Act 52 requires comparisons between Pennsylvania data and national data (Centers for Disease Control and Prevention, 2015). Due to methodological differences, the most precise way of comparing Pennsylvania data to national data is to present CDC comparisons of aggregated Pennsylvania data to national baseline data. Pennsylvania's aggregate CLABSI SIR for 2013 is nine percent lower (better) than the national 2013 SIR and 51 percent better than the 2009 national baseline. These differences are statistically significant.

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), 126 (66.0 percent) had a standardized infection ratio (SIR) less than 1.00, meaning the hospital reported **fewer** CLABSIs than predicted based on statewide rates; 65 hospitals (34.0 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 73 (38.2 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 (5.2 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 4.4.3 – 4.4.7. In contrast, 10 hospitals (5.2 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 4.4.3 – 4.4.7. 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), no facilities had an observed number of infections that was significantly worse than predicted. Among 23 specialty care areas, the observed number of infections was significantly better than predicted in three hospitals (13.0 percent) and significantly worse than predicted in four hospitals (17.4 percent). Among 26 long term-acute care hospitals, there was two (7.7 percent) facilities that had an observed number of infections that was significantly better than predicted and one (3.8 percent) that was 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 4.4.3–4.4.12 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, 2013

	Hospital Name (NHSN ID)
ICUs and other wards	
	BUTLER MEMORIAL HOSPITAL (11736)
	DOYLESTOWN HOSPITAL (10190)
	HAHNEMANN UNIVERSITY HOSPITAL (11437)
	HOLY REDEEMER HOSPITAL AND MEDICAL CENTER (11973)
	PINNACLE HEALTH HOSPITALS (10122)
	ST. CLAIR MEMORIAL HOSPITAL (10561)
	THE WASHINGTON HOSPITAL (11460)
	UPMC MERCY (10384)
	UPMC PRESBYTERIAN SHADYSIDE — PRESBYTERIAN (10348)
	UPMC PRESBYTERIAN SHADYSIDE — SHADYSIDE (10118)
Specialty care areas	
	HAHNEMANN UNIVERSITY HOSPITAL (11437)
	THE WESTERN PENNSYLVANIA HOSPITAL (11864)
	UPMC PRESBYTERIAN SHADYSIDE — SHADYSIDE (10118)
Long-term acute care wards	
	LIFECARE HOSPITALS OF PITTSBURGH — SUBURBAN CAMPUS (12385)
	SELECT SPECIALTY HOSPITAL — MCKEESPORT, INC. (12271)
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, 2013

	Hospital Name (NHSN ID)
ICUs and other wards	
	ALBERT EINSTEIN MEDICAL CENTER (10585)
	ALTOONA REGIONAL HEALTH SYSTEM (10178)
	BRANDYWINE HOSPITAL (11979)
	CHILDRENS HOSPITAL OF PHILADELPHIA (10306)
	CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)
	LEHIGH VALLEY HOSPITAL (11884)
	MEADVILLE MEDICAL CENTER (11583)
	NAZARETH HOSPITAL (11919)
	PENN PRESBYTERIAN MEDICAL CENTER (11814)
	ST. JOSEPHS HOSPITAL (12438)
Specialty care areas	
	CHILDRENS HOME OF PITTSBURGH, THE (12336)
	CHILDRENS HOSPITAL OF PHILADELPHIA (10306)
	CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)
	MILTON S HERSHEY MEDICAL CENTER (11747)
Long-term acute care wards	
	KINDRED HOSPITAL PITTSBURGH — NORTH SHORE (12296)

Table 4.4.7: Hospitals Omitted from CLABSI SIR Analysis Due to No Reported Central-Line Use — Pennsylvania, 2013

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)
CORRY MEMORIAL HOSPITAL (12283)
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)
EAGLEVILLE HOSPITAL (12965)
PENNSYLVANIA PSYCHIATRIC INSTITUTE (14190)
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, 2010–2013

	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)							
2013	15,882	118,540	0.13	10	12.84	0.78	(0.37 – 1.43)
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)							
2013	15,590	95,187	0.16	21	12.60	1.67	(1.03 – 2.55)
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)							
2013	1,154	9,960	0.12	1	0.93	1.07	(0.01 – 5.96)
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)							
2013	2,404	43,328	0.06	0	1.62	0.00	(0.00 – 2.27)
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)							
2013	45,312	130,089	0.35	39	36.57	1.07	(0.76 – 1.46)
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)							
2013	4,265	35,566	0.12	5	2.87	1.74	(0.56 – 4.07)
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)							
2013	324	21,252	0.02	0	0.22	0.00	(0.00 – 16.77)
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)							
2013	11,276	80,978	0.14	16	7.58	2.11	(1.21 – 3.43)
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)							
2013	15,785	103,768	0.15	8	12.76	0.63	(0.27 – 1.24)
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)							
2013	4,966	30,446	0.16	2	3.34	0.60	(0.07 – 2.16)
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)							
2013	4	4,230	0.00	0	0.00	0.00	(0.00 –1,352.02)
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)							
2013	307	10,648	0.03	1	0.21	4.83	(0.06 – 26.88)
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)							
2013	446	13,247	0.03	0	0.30	0.00	(0.00 – 12.20)
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)							
2013	3,768	36,865	0.10	9	2.53	3.55	(1.62 – 6.74)
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)							
2013	451	5,423	0.08	0	0.30	0.00	(0.00 – 12.09)
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)							
2013	54	1,056	0.05	0	0.04	0.00	(0.00 – 100.86)
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)							
2013	6,959	62,866	0.11	0	4.68	0.00	(0.00 – 0.78)
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)							
2013	1,774	14,862	0.12	2	1.19	1.68	(0.19 – 6.05)
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)							
2013	2,494	17,358	0.14	0	1.68	0.00	(0.00 – 2.19)
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)							
2013	6,918	58,513	0.12	9	4.65	1.93	(0.88 – 3.67)
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)

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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
CHARLES COLE MEMORIAL HOSPITAL (11956)							
2013	578	11,574	0.05	0	0.39	0.00	(0.00 – 9.42)
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)							
2013	8,910	53,715	0.17	6	5.99	1.00	(0.37 – 2.18)
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)							
2013	3,875	27,547	0.14	3	3.13	0.96	(0.19 – 2.80)
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)
CHILDRENS HOME OF PITTSBURGH, THE (12336)							
2013	347	2,071	0.17	2	0.23	8.58	(0.96 – 30.96)
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	244	1,172	0.21	2	0.16	12.49	(1.40 – 45.08)
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)							
2013	27,574	112,255	0.25	34	22.27	1.53	(1.06 – 2.13)
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)							
2013	22,162	63,703	0.35	38	17.89	2.12	(1.50 – 2.92)
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)							
2013	481	10,332	0.05	0	0.32	0.00	(0.00 – 11.32)
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)							
2013	1,425	10,020	0.14	0	1.15	0.00	(0.00 – 3.18)
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)							
2013	678	13,640	0.05	0	0.46	0.00	(0.00 – 8.03)
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)							
2013	13,309	112,371	0.12	10	10.76	0.93	(0.44 – 1.71)
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)

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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
COORDINATED HEALTH ORTHOPEDIC HOSPITAL, LLC (11872)							
2013	124	3,112	0.04	0	0.08	0.00	(0.00 – 43.90)
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)
CRICHTON REHABILITATION CENTER (12273)							
2013	758	10,308	0.07	1	0.51	1.96	(0.03 – 10.91)
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)							
2013	11,813	72,096	0.16	15	9.55	1.57	(0.88 – 2.59)
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)							
2013	352	4,142	0.08	0	0.28	0.00	(0.00 – 12.88)
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)							
2013	3,155	26,773	0.12	2	2.55	0.78	(0.09 – 2.83)
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)							
2013	6,517	35,679	0.18	3	5.27	0.57	(0.11 – 1.66)
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)
DOYLESTOWN HOSPITAL (10190)							
2013	9,825	50,761	0.19	1	6.60	0.15	(0.00 – 0.84)
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)							
2013	3,702	38,825	0.10	0	2.49	0.00	(0.00 – 1.47)
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)
EASTERN REGIONAL MEDICAL CENTER (12348)							
2013	2,126	2,426	0.88	0	1.42	0.00	(0.00 – 2.57)
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)							
2013	5,214	32,858	0.16	2	4.21	0.47	(0.05 – 1.71)
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)

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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
EINSTEIN MEDICAL CENTER MONTGOMERY (30210)							
2013	5,209	36,994	0.14	3	3.50	0.86	(0.17 – 2.50)
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
ELK REGIONAL HEALTH CENTER (11859)							
2013	649	13,699	0.05	0	0.44	0.00	(0.00 – 8.39)
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)							
2013	836	11,605	0.07	1	0.56	1.78	(0.02 – 9.89)
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)							
2013	91	3,308	0.03	0	0.06	0.00	(0.00 – 59.78)
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)							
2013	2,452	23,701	0.10	2	1.65	1.21	(0.14 – 4.38)
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)							
2013	1,011	21,582	0.05	1	0.82	1.22	(0.02 – 6.79)
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)							
2013	1,704	12,692	0.13	0	1.15	0.00	(0.00 – 3.20)
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)							
2013	2,664	20,774	0.13	3	2.15	1.39	(0.28 – 4.07)
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)							
2013	11,897	79,133	0.15	14	9.62	1.46	(0.80 – 2.44)
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)							
2013	10,721	82,592	0.13	5	8.67	0.58	(0.19 – 1.35)
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)							
2013	290	4,192	0.07	0	0.20	0.00	(0.00 – 18.79)
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)							
2013	335	11,322	0.03	0	0.23	0.00	(0.00 – 16.24)
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)							
2013	21,582	131,035	0.16	13	17.44	0.75	(0.40 – 1.27)
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)							
2013	10,670	72,120	0.15	3	8.62	0.35	(0.07 – 1.02)
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)							
2013	197	11,701	0.02	0	0.13	0.00	(0.00 – 27.59)
2012	652	12,590	0.05	0	0.40	0.00	(0.00 – 9.25)
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
GEISINGER-COMMUNITY MEDICAL CENTER (11914)							
2013	5,166	53,698	0.10	4	4.18	0.96	(0.26 – 2.45)
2012	5,674	54,768	0.10	1	4.19	0.24	(0.00 – 1.33)
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
GETTYSBURG HOSPITAL (11531)							
2013	1,435	19,474	0.07	1	0.97	1.04	(0.01 – 5.76)
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)							
2013	917	17,291	0.05	1	0.62	1.62	(0.02 – 9.01)
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)							
2013	7,932	41,380	0.19	5	5.33	0.94	(0.30 – 2.19)
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)

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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
GROVE CITY MEDICAL CENTER (11722)							
2013	487	7,717	0.06	0	0.33	0.00	(0.00 – 11.19)
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)							
2013	17,253	92,913	0.19	6	13.94	0.43	(0.16 – 0.94)
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)							
2013	2,641	26,879	0.10	2	1.78	1.13	(0.13 – 4.06)
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)							
2013	4,158	33,088	0.13	5	2.80	1.79	(0.58 – 4.17)
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)
HEALTHSOUTH HARMARVILLE REHABILITATION HOSPITAL (11727)							
2013	1,926	33,138	0.06	2	1.30	1.54	(0.17 – 5.57)
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)							
2013	830	15,733	0.05	0	0.56	0.00	(0.00 – 6.56)
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)							
2013	1,003	16,445	0.06	1	0.68	1.48	(0.02 – 8.24)
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)							
2013	1,052	25,915	0.04	0	0.71	0.00	(0.00 – 5.18)
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)							
2013	1,248	21,661	0.06	0	0.84	0.00	(0.00 – 4.36)
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)

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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 REHABILITATION HOSPITAL OF MECHANICSBURG (12402)							
2013	1,401	18,703	0.07	2	0.94	2.12	(0.24 – 7.66)
2012	1,984	18,430	0.11	1	1.35	0.74	(0.01 – 4.11)
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
HEALTHSOUTH REHABILITATION HOSPITAL OF SEWICKLEY (12066)							
2013	693	12,829	0.05	0	0.47	0.00	(0.00 – 7.86)
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)							
2013	1,205	18,833	0.06	2	0.81	2.47	(0.28 – 8.90)
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)							
2013	722	9,579	0.08	0	0.58	0.00	(0.00 – 6.28)
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)							
2013	7,105	72,271	0.10	4	5.75	0.70	(0.19 – 1.78)
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)							
2013	4,043	41,548	0.10	2	2.72	0.74	(0.08 – 2.65)
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)							
2013	602	11,255	0.05	0	0.41	0.00	(0.00 – 9.05)
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)							
2013	5,765	53,561	0.11	0	3.88	0.00	(0.00 – 0.95)
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)							
2013	9,223	72,247	0.13	6	6.20	0.97	(0.35 – 2.11)
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)
HOSPITAL OF FOX CHASE CANCER CENTER (12134)							
2013	1,086	1,833	0.59	2	0.88	2.28	(0.26 – 8.25)
2012	70	145	0.48	0	0.07	0.00	(0.00 – 55.83)
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)							
2013	79,991	241,914	0.33	54	64.57	0.84	(0.63 – 1.09)
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)

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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
INDIANA REGIONAL MEDICAL CENTER (11759)							
2013	1,780	37,757	0.05	1	1.20	0.83	(0.01 – 4.64)
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)							
2013	455	7,850	0.06	0	0.31	0.00	(0.00 – 11.97)
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)							
2013	4,189	38,470	0.11	1	2.82	0.35	(0.00 – 1.97)
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)							
2013	5,714	33,276	0.17	8	3.84	2.08	(0.90 – 4.11)
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)							
2013	9,168	71,956	0.13	4	6.16	0.65	(0.17 – 1.66)
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)							
2013	1,019	12,317	0.08	2	0.69	2.92	(0.33 – 10.53)
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)							
2013	206	4,129	0.05	0	0.14	0.00	(0.00 – 26.44)
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)							
2013	322	19,943	0.02	0	0.22	0.00	(0.00 – 16.88)
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)							
2013	147	4,230	0.03	0	0.10	0.00	(0.00 – 37.02)
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)							
2013	1,385	2,421	0.57	0	0.93	0.00	(0.00 – 3.95)
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)							
2013	16,058	137,114	0.12	10	10.80	0.93	(0.44 – 1.70)
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)

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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 REGIONAL MEDICAL CENTER (12335)							
2013	2,923	26,814	0.11	1	1.97	0.51	(0.01 – 2.83)
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)
LANCASTER REHABILITATION HOSPITAL (12628)							
2013	627	18,797	0.03	0	0.42	0.00	(0.00 – 8.68)
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)							
2013	1,775	19,657	0.09	1	1.19	0.84	(0.01 – 4.66)
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)							
2013	8,708	49,802	0.17	13	7.04	1.85	(0.98 – 3.16)
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)							
2013	38,735	198,067	0.20	74	31.29	2.36	(1.86 – 2.97)
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)							
2013	2,498	25,830	0.10	3	1.68	1.79	(0.36 – 5.22)
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)							
2013	89	4,229	0.02	1	0.06	16.66	(0.22 – 92.68)
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)							
2013	1,721	22,009	0.08	4	1.16	3.45	(0.93 – 8.84)
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)							
2013	1,803	29,844	0.06	0	1.21	0.00	(0.00 – 3.02)
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)							
2013	8,285	64,210	0.13	9	6.70	1.34	(0.61 – 2.55)
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)							
2013	6,214	54,045	0.11	4	4.18	0.96	(0.26 – 2.45)
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)

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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
MAIN LINE HOSPITAL BRYN MAWR (11753)							
2013	11,638	64,588	0.18	5	9.40	0.53	(0.17 – 1.24)
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)							
2013	1,417	36,491	0.04	0	0.95	0.00	(0.00 – 3.84)
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)							
2013	14,330	72,843	0.20	8	11.58	0.69	(0.30 – 1.36)
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)							
2013	3,094	36,306	0.09	7	2.50	2.80	(1.12 – 5.76)
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)
MEMORIAL HOSPITAL (11633)							
2013	3,064	25,113	0.12	1	2.48	0.40	(0.01 – 2.25)
2012	2,474	22,194	0.11	2	1.85	1.08	(0.12 – 3.91)
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
MEMORIAL HOSPITAL, INC. TOWANDA (12549)							
2013	172	4,867	0.04	0	0.12	0.00	(0.00 – 31.64)
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)							
2013	6,046	42,258	0.14	8	4.89	1.64	(0.70 – 3.23)
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)							
2013	4,249	38,617	0.11	4	3.44	1.16	(0.31 – 2.98)
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)							
2013	4,097	23,128	0.18	3	3.31	0.91	(0.18 – 2.65)
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)

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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
MEYERSDALE COMMUNITY HOSPITAL (11968)							
2013	66	1,662	0.04	0	0.04	0.00	(0.00 – 82.48)
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)							
2013	198	3,078	0.06	0	0.13	0.00	(0.00 – 27.52)
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)							
2013	875	24,378	0.04	0	0.71	0.00	(0.00 – 5.17)
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)							
2013	38,733	119,814	0.32	41	31.26	1.31	(0.94 – 1.78)
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)							
2013	129	2,985	0.04	0	0.09	0.00	(0.00 – 42.21)
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)							
2013	4,906	49,805	0.10	2	3.30	0.61	(0.07 – 2.19)
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)							
2013	3,563	47,866	0.07	3	2.88	1.04	(0.21 – 3.04)
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)							
2013	6,332	49,847	0.13	1	5.12	0.20	(0.00 – 1.09)
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)
MUNCY VALLEY HOSPITAL (11748)							
2013	773	4,806	0.16	0	0.52	0.00	(0.00 – 7.06)
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)							
2013	165	7,565	0.02	0	0.11	0.00	(0.00 – 32.96)
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)							
2013	5,710	42,260	0.14	11	3.84	2.87	(1.43 – 5.13)
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)

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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
OHIO VALLEY GENERAL HOSPITAL (12298)							
2013	2,633	22,184	0.12	0	1.77	0.00	(0.00 – 2.07)
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)							
2013	14	3,919	0.00	0	0.01	0.00	(0.00 – 387.20)
2012	6	3,888	0.00	0	0.00	0.00	(0.00 –1,738.94)
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
PALMERTON HOSPITAL (12396)							
2013	315	11,211	0.03	0	0.21	0.00	(0.00 – 17.27)
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)							
2013	11,130	60,943	0.18	18	8.99	2.00	(1.19 – 3.16)
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)							
2013	1,607	17,246	0.09	1	1.08	0.92	(0.01 – 5.15)
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)							
2013	13,426	86,113	0.16	14	10.85	1.29	(0.70 – 2.16)
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)
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)							
2013	5,620	32,971	0.17	4	3.78	1.06	(0.28 – 2.71)
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)							
2013	31,004	150,142	0.21	4	25.05	0.16	(0.04 – 0.41)
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)							
2013	6,010	52,051	0.12	8	4.04	1.98	(0.85 – 3.90)
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)							
2013	5,668	42,128	0.13	4	3.81	1.05	(0.28 – 2.69)
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)							
2013	339	7,683	0.04	0	0.23	0.00	(0.00 – 16.06)
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)							
2013	25,436	154,968	0.16	14	20.56	0.68	(0.37 – 1.14)
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)							
2013	5,330	45,651	0.12	5	4.31	1.16	(0.37 – 2.71)
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)							
2013	6,977	44,830	0.16	5	4.69	1.07	(0.34 – 2.49)
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)							
2013	9,199	57,896	0.16	6	7.43	0.81	(0.29 – 1.76)
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)							
2013	1,701	23,849	0.07	1	1.38	0.73	(0.01 – 4.04)
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)							
2013	1,982	30,229	0.07	0	1.60	0.00	(0.00 – 2.29)
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)							
2013	2,012	26,682	0.08	3	1.35	2.22	(0.45 – 6.47)
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)							
2013	2,086	34,761	0.06	3	1.40	2.14	(0.43 – 6.24)
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)							
2013	3,559	34,895	0.10	0	2.39	0.00	(0.00 – 1.53)
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)

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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
SHRINERS HOSPITAL FOR CHILDREN — PHILADELPHIA (12244)							
2013	855	5,090	0.17	1	0.57	1.74	(0.02 – 9.68)
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)							
2013	582	11,623	0.05	2	0.47	4.24	(0.48 – 15.32)
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)							
2013	2,993	18,930	0.16	2	2.42	0.83	(0.09 – 2.99)
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)							
2013	460	11,449	0.04	0	0.31	0.00	(0.00 – 11.83)
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)
ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)							
2013	5,894	31,935	0.18	2	4.76	0.42	(0.05 – 1.52)
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)							
2013	8,384	83,028	0.10	1	6.78	0.15	(0.00 – 0.82)
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)							
2013	8,025	32,542	0.25	4	6.48	0.62	(0.17 – 1.58)
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)							
2013	4,265	30,941	0.14	21	3.45	6.09	(3.77 – 9.31)
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)							
2013	1,753	19,105	0.09	0	1.42	0.00	(0.00 – 2.59)
2012	1,528	16,294	0.09	2	1.11	1.80	(0.20 – 6.50)
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
ST. LUKES HOSPITAL BETHLEHEM (11718)							
2013	18,754	125,720	0.15	15	15.16	0.99	(0.55 – 1.63)
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)

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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. LUKES MINERS MEMORIAL HOSPITAL (11784)							
2013	322	7,001	0.05	0	0.22	0.00	(0.00 – 16.91)
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)							
2013	729	14,419	0.05	0	0.49	0.00	(0.00 – 7.47)
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)							
2013	12,148	98,714	0.12	10	8.17	1.22	(0.59 – 2.25)
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)							
2013	432	9,313	0.05	0	0.29	0.00	(0.00 – 12.61)
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)							
2013	8,318	71,791	0.12	4	6.73	0.59	(0.16 – 1.52)
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)							
2013	123	6,541	0.02	0	0.08	0.00	(0.00 – 44.20)
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)							
2013	25	1,941	0.01	0	0.02	0.00	(0.00 – 217.32)
2012	14	2,052	0.01	0	0.01	0.00	(0.00 – 591.03)
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
TEMPLE UNIVERSITY HOSPITAL (12382)							
2013	24,604	135,180	0.18	24	19.88	1.21	(0.77 – 1.80)
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)
THE GOOD SAMARITAN HOSPITAL (11712)							
2013	4,880	38,759	0.13	4	3.28	1.22	(0.33 – 3.12)
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)							
2013	1,070	28,995	0.04	1	0.72	1.39	(0.02 – 7.72)
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)							
2013	7,576	54,165	0.14	1	6.12	0.16	(0.00 – 0.91)
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)

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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 WESTERN PENNSYLVANIA HOSPITAL (11864)							
2013	7,891	42,627	0.19	4	6.38	0.63	(0.17 – 1.61)
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)							
2013	6,823	46,661	0.15	8	5.52	1.45	(0.62 – 2.86)
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)							
2013	43,942	174,323	0.25	44	35.49	1.24	(0.90 – 1.66)
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)							
2013	372	6,554	0.06	1	0.25	3.99	(0.05 – 22.21)
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)							
2013	1,747	7,100	0.25	3	1.17	2.56	(0.51 – 7.47)
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)							
2013	209	5,653	0.04	0	0.14	0.00	(0.00 – 26.04)
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)							
2013	143	2,668	0.05	0	0.10	0.00	(0.00 – 38.09)
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)							
2013	4,133	43,957	0.09	1	3.34	0.30	(0.00 – 1.66)
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)							
2013	390	7,301	0.05	0	0.26	0.00	(0.00 – 13.97)
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 EAST (28812)							
2013	7,436	29,712	0.25	4	4.99	0.80	(0.22 – 2.05)
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
UPMC HAMOT (11725)							
2013	23,270	86,702	0.27	24	18.79	1.28	(0.82 – 1.90)
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)

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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 HORIZON (11675)							
2013	3,895	32,503	0.12	3	3.15	0.95	(0.19 – 2.78)
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)
UPMC MCKEESPORT (11707)							
2013	5,839	53,354	0.11	4	4.72	0.85	(0.23 – 2.17)
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)							
2013	24,489	137,491	0.18	11	19.79	0.56	(0.28 – 0.99)
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)							
2013	3,491	28,814	0.12	1	2.35	0.43	(0.01 – 2.37)
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)							
2013	22,070	100,207	0.22	8	14.83	0.54	(0.23 – 1.06)
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)							
2013	103,460	221,480	0.47	64	83.46	0.77	(0.59 – 0.98)
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)							
2013	42,650	126,296	0.34	14	34.42	0.41	(0.22 – 0.68)
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)							
2013	518	103,422	0.01	0	0.42	0.00	(0.00 – 8.71)
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)							
2013	11,706	69,846	0.17	6	9.46	0.63	(0.23 – 1.38)
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)

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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
VALLEY FORGE MEDICAL CENTER AND HOSPITAL (12029)							
2013	240	16,356	0.01	0	0.16	0.00	(0.00 – 22.64)
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)							
2013	748	15,355	0.05	0	0.50	0.00	(0.00 – 7.28)
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)							
2013	1,194	16,857	0.07	0	0.80	0.00	(0.00 – 4.56)
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)							
2013	916	9,414	0.10	0	0.62	0.00	(0.00 – 5.95)
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)
WELLSPAN SURGERY AND REHABILITATION HOSPITAL (27430)							
2013	1,038	15,195	0.07	0	0.70	0.00	(0.00 – 5.25)
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
WILKES-BARRE GENERAL HOSPITAL (11916)							
2013	9,167	74,279	0.12	4	7.41	0.54	(0.15 – 1.38)
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)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)							
2013	8,174	57,713	0.14	6	6.61	0.91	(0.33 – 1.98)
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)							
2013	109	6,417	0.02	0	0.07	0.00	(0.00 – 49.87)
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)							
2013	19,326	153,471	0.13	18	15.63	1.15	(0.68 – 1.82)
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, 2010–2013

	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)							
2013	574	8,830	0.07	2	0.84	2.37	(0.27 – 8.57)
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)							
2013	1,531	7,177	0.21	1	1.95	0.51	(0.01 – 2.86)
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)							
2013	330	2,909	0.11	0	0.44	0.00	(0.00 – 8.26)
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)							
2013	10,339	29,672	0.35	13	12.38	1.05	(0.56 – 1.80)
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)							
2013	4,317	10,178	0.42	4	5.05	0.79	(0.21 – 2.03)
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)

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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
CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)							
2013	589	3,425	0.17	1	0.77	1.30	(0.02 – 7.24)
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)							
2013	719	3,591	0.20	1	0.92	1.09	(0.01 – 6.04)
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)							
2013	131	1,596	0.08	0	0.19	0.00	(0.00 – 19.63)
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)							
2013	75	3,079	0.02	0	0.12	0.00	(0.00 – 30.17)
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)							
2013	3	418	0.01	0	0.01	0.00	(0.00 – 638.51)
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)
EINSTEIN MEDICAL CENTER MONTGOMERY (30210)							
2013	271	2,975	0.09	0	0.37	0.00	(0.00 – 9.79)
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
EPHRATA COMMUNITY HOSPITAL (11764)							
2013	68	1,170	0.06	0	0.10	0.00	(0.00 – 36.96)
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)							
2013	1,809	10,078	0.18	4	2.35	1.70	(0.46 – 4.36)
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)							
2013	16	1,995	0.01	0	0.03	0.00	(0.00 – 121.34)
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)							
2013	1,328	4,323	0.31	3	1.62	1.86	(0.37 – 5.43)
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)							
2013	195	1,436	0.14	0	0.26	0.00	(0.00 – 14.01)
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)							
2013	388	4,808	0.08	1	0.54	1.84	(0.02 – 10.22)
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)							
2013	45	1,232	0.04	0	0.07	0.00	(0.00 – 52.80)
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)							
2013	2,125	12,258	0.17	5	2.77	1.81	(0.58 – 4.21)
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)							
2013	724	7,053	0.10	1	0.99	1.01	(0.01 – 5.64)
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)							
2013	1,973	11,495	0.17	3	2.57	1.17	(0.23 – 3.40)
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)							
2013	.	.	.	.	.	.	.
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)							
2013	3,158	25,268	0.12	3	4.28	0.70	(0.14 – 2.05)
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)

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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
MAIN LINE HOSPITAL — PAOLI (11750)							
2013	112	1,524	0.07	1	0.16	6.29	(0.08 – 35.02)
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)							
2013	175	2,338	0.07	0	0.25	0.00	(0.00 – 14.53)
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)							
2013	805	6,158	0.13	0	1.09	0.00	(0.00 – 3.38)
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)							
2013	3,869	11,160	0.35	5	4.64	1.08	(0.35 – 2.52)
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)
MOSES TAYLOR HOSPITAL (11528)							
2013	250	3,446	0.07	0	0.36	0.00	(0.00 – 10.13)
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)							
2013	1,574	11,489	0.14	4	2.11	1.90	(0.51 – 4.85)
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)							
2013	1,428	7,827	0.18	2	1.85	1.08	(0.12 – 3.90)
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)							
2013	129	1,582	0.08	0	0.18	0.00	(0.00 – 20.30)
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)							
2013	992	6,521	0.15	1	1.31	0.76	(0.01 – 4.24)
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)							
2013	2	114	0.02	0	0.00	0.00	(0.00 –1,067.02)
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)							
2013	5,131	10,410	0.49	6	5.89	1.02	(0.37 – 2.22)
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)

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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
ST. JOSEPH MEDICAL CENTER (11961)							
2013	82	1,186	0.07	0	0.12	0.00	(0.00 – 30.72)
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)							
2013	579	7,302	0.08	0	0.83	0.00	(0.00 – 4.42)
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)							
2013	11	1,531	0.01	0	0.02	0.00	(0.00 – 177.48)
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)							
2013	410	2,345	0.17	0	0.53	0.00	(0.00 – 6.87)
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)							
2013	1,055	4,360	0.24	0	1.32	0.00	(0.00 – 2.78)
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)							
2013	3,169	9,803	0.32	2	3.83	0.52	(0.06 – 1.89)
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)							
2013	1,444	8,240	0.18	2	1.88	1.06	(0.12 – 3.84)
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)
UPMC HAMOT (11725)							
2013	801	5,881	0.14	0	1.07	0.00	(0.00 – 3.41)
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)							
2013	15	1,715	0.01	0	0.03	0.00	(0.00 – 130.79)
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)							
2013	1,441	8,970	0.16	3	1.90	1.58	(0.32 – 4.62)
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, 2010–2013

	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)							
2013	3,740	7,216	0.52	6	5.65	1.06	(0.39 – 2.31)
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)							
2013	561	3,810	0.15	3	0.46	6.55	(1.32 – 19.14)
2012	991	5,923	0.17	3	1.51	1.98	(0.40 – 5.80)
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)							
2013	12,755	16,252	0.78	41	21.47	1.91	(1.37 – 2.59)
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)							
2013	10,021	12,152	0.82	31	17.09	1.81	(1.23 – 2.57)
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)							
2013	.	.	.	.	.	.	.
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)							
2013	9,990	13,312	0.75	11	12.51	0.88	(0.44 – 1.57)
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)							
2013	1,755	4,745	0.37	2	2.42	0.82	(0.09 – 2.98)
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)

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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
EXCELA HEALTH LATROBE HOSPITAL (11651)							
2013	539	1,891	0.29	2	0.70	2.88	(0.32 – 10.38)
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)							
2013	.	.	.	.	.	.	.
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	.	.	.	.	.	.	.
GEISINGER MEDICAL CENTER (11775)							
2013	3,453	5,175	0.67	6	5.57	1.08	(0.39 – 2.34)
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
HAHNEMANN UNIVERSITY HOSPITAL (11437)							
2013	6,514	16,902	0.39	3	9.10	0.33	(0.07 – 0.96)
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)							
2013	9,808	19,726	0.50	13	14.64	0.89	(0.47 – 1.52)
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)							
2013	271	3,355	0.08	0	0.19	0.00	(0.00 – 19.42)
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)							
2013	14,815	18,080	0.82	40	25.22	1.59	(1.13 – 2.16)
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)
READING HOSPITAL AND MEDICAL CENTER (12375)							
2013	2,567	6,412	0.40	1	3.62	0.28	(0.00 – 1.54)
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)							
2013	2,146	6,359	0.34	4	2.89	1.38	(0.37 – 3.54)
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)							
2013	1,783	1,929	0.92	1	3.13	0.32	(0.00 – 1.78)
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)

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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
ST. LUKES HOSPITAL ANDERSON CAMPUS (21487)							
2013	223	1,265	0.18	0	0.25	0.00	(0.00 – 14.47)
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
ST. LUKES HOSPITAL BETHLEHEM (11718)							
2013	819	4,355	0.19	0	0.95	0.00	(0.00 – 3.87)
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
TEMPLE UNIVERSITY HOSPITAL (12382)							
2013	3,577	3,894	0.92	2	6.28	0.32	(0.04 – 1.15)
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)							
2013	4,597	4,979	0.92	2	8.08	0.25	(0.03 – 0.89)
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)							
2013	9,712	13,563	0.72	17	15.96	1.07	(0.62 – 1.71)
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)							
2013	970	5,115	0.19	0	0.85	0.00	(0.00 – 4.34)
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)							
2013	23,262	27,758	0.84	11	39.84	0.28	(0.14 – 0.49)
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)							
2013	1,841	9,565	0.19	3	2.14	1.40	(0.28 – 4.09)
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, 2010–2013

	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)							
2013	.	.	.	.	.	.	.
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)							
2013	4,351	10,506	0.41	10	5.58	1.79	(0.86 – 3.30)
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)							
2013	6,102	9,365	0.65	7	6.97	1.00	(0.40 – 2.07)
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)							
2013	4,468	11,096	0.40	11	5.77	1.91	(0.95 – 3.41)
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)							
2013	6,678	10,270	0.65	12	7.64	1.57	(0.81 – 2.74)
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)							
2013	6,358	8,855	0.72	10	7.09	1.41	(0.68 – 2.59)
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)							
2013	6,262	8,223	0.76	7	6.88	1.02	(0.41 – 2.10)
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)							
2013	4,605	6,846	0.67	4	5.22	0.77	(0.21 – 1.96)
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)							
2013	6,930	14,732	0.47	7	8.60	0.81	(0.33 – 1.68)
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)							
2013	4,030	6,388	0.63	10	4.64	2.15	(1.03 – 3.96)
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)

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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
KINDRED HOSPITAL SOUTH PHILADELPHIA (11940)							
2013	4,540	10,174	0.45	2	5.71	0.35	(0.04 – 1.26)
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)							
2013	6,762	7,951	0.85	10	7.23	1.38	(0.66 – 2.54)
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)
LIFECARE HOSPITALS OF MECHANICSBURG (12388)							
2013	6,288	8,943	0.70	7	7.05	0.99	(0.40 – 2.05)
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)							
2013	4,604	6,744	0.68	3	5.20	0.58	(0.12 – 1.69)
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)							
2013	7,832	13,998	0.56	7	9.30	0.75	(0.30 – 1.55)
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)							
2013	4,739	7,167	0.66	0	5.40	0.00	(0.00 – 0.68)
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)							
2013	5,491	24,376	0.23	10	8.20	1.22	(0.58 – 2.24)
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)							
2013	3,890	6,041	0.64	8	4.46	1.79	(0.77 – 3.53)
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)							
2013	2,822	7,822	0.36	4	3.74	1.07	(0.29 – 2.74)
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)							
2013	6,291	11,479	0.55	3	7.51	0.40	(0.08 – 1.17)
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)

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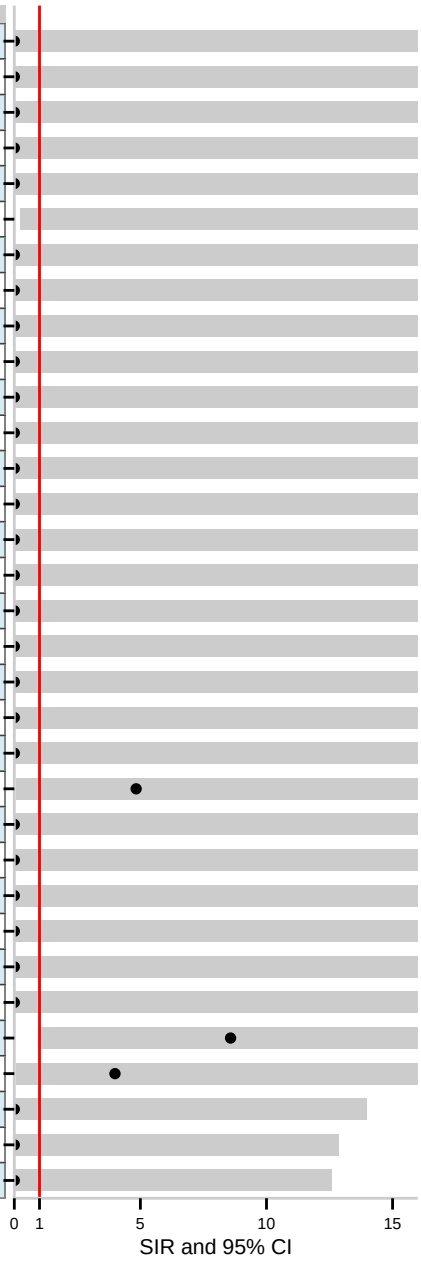
Table 4.4.11 – LTAC CLABSIs by Facility – Continued from previous page

	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
SELECT SPECIALTY HOSPITAL — CENTRAL PA (13921)							
2013	7,559	10,803	0.70	8	8.49	0.94	(0.41 – 1.86)
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)							
2013	7,108	10,345	0.69	6	8.02	0.75	(0.27 – 1.63)
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)							
2013	2,656	6,501	0.41	1	3.41	0.29	(0.00 – 1.63)
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)							
2013	3,793	7,840	0.48	0	4.67	0.00	(0.00 – 0.78)
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)							
2013	5,426	8,544	0.64	6	6.24	0.96	(0.35 – 2.09)
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)							
2013	3,916	6,436	0.61	6	4.55	1.32	(0.48 – 2.87)
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)
SPECIAL CARE HOSPITAL (12604)							
2013	4,215	10,266	0.41	4	5.41	0.74	(0.20 – 1.89)
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 4.4.3: **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, 2013

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

Obs.	Pred.	SIR	Facility and NHSN ID
0	0.00	0.0	BARNES−KASSON COUNTY HOSPITAL (12404)
0	0.01	0.0	OSS ORTHOPAEDIC HOSPITAL (18467)
0	0.02	0.0	SURGICAL SPECIALTY CENTER AT COORDINATED HEALTH, THE (15259)
0	0.04	0.0	BUCKTAIL MEDICAL CENTER (12461)
0	0.04	0.0	MEYERSDALE COMMUNITY HOSPITAL (11968)
1	0.06	16.7	LOCK HAVEN HOSPITAL (12097)
0	0.06	0.0	ENDLESS MOUNTAINS HEALTH SYSTEMS (11817)
0	0.07	0.0	WINDBER HOSPITAL (12031)
0	0.08	0.0	SUNBURY COMMUNITY HOSPITAL (12105)
0	0.08	0.0	COORDINATED HEALTH ORTHOPEDIC HOSPITAL, LLC (11872)
0	0.09	0.0	MINERS MEDICAL CENTER (12295)
0	0.10	0.0	TYRONE HOSPITAL (12717)
0	0.10	0.0	KANE COMMUNITY HOSPITAL (12111)
0	0.11	0.0	NASON HOSPITAL (11907)
0	0.12	0.0	MEMORIAL HOSPITAL, INC. TOWANDA (12549)
0	0.13	0.0	GEISINGER−BLOOMSBURG HOSPITAL (12008)
0	0.13	0.0	MID−VALLEY HOSPITAL (11557)
0	0.14	0.0	JERSEY SHORE HOSPITAL (11689)
0	0.14	0.0	TYLER MEMORIAL HOSPITAL (11829)
0	0.16	0.0	VALLEY FORGE MEDICAL CENTER AND HOSPITAL (12029)
0	0.20	0.0	FULTON COUNTY MEDICAL CENTER (11939)
1	0.21	4.8	BERWICK HOSPITAL CENTER (11442)
0	0.21	0.0	PALMERTON HOSPITAL (12396)
0	0.22	0.0	ST. LUKES MINERS MEMORIAL HOSPITAL (11784)
0	0.22	0.0	JOHN HEINZ INSTITUTE OF REHABILITATION (11861)
0	0.22	0.0	ALLIED SERVICES INSTITUTE OF REHABILITATION (12591)
0	0.23	0.0	GEISINGER HEALTHSOUTH REHABILITATION HOSPITAL (11993)
0	0.23	0.0	PUNXSUTAWNEY AREA HOSPITAL (11830)
2	0.23	8.6	CHILDRENS HOME OF PITTSBURGH, THE (12336)
1	0.25	4.0	TITUSVILLE AREA HOSPITAL (11738)
0	0.26	0.0	UPMC BEDFORD (11680)
0	0.28	0.0	CROZER CHESTER MEDICAL CENTER SPRINGFIELD (11851)
0	0.29	0.0	ST. MARY MEDICAL CENTER REHAB (12483)

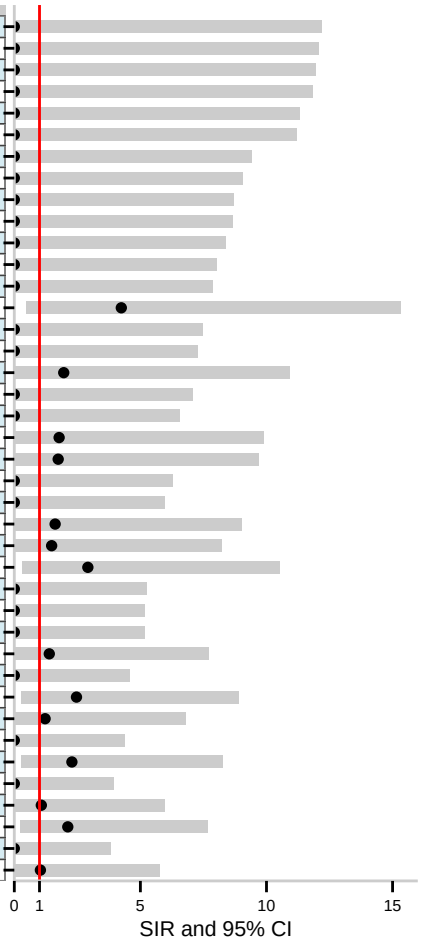


Better than predicted | Not different than predicted | Worse than predicted

Figure 4.4.4: **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, 2013

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

Obs.	Pred.	SIR	Facility and NHSN ID
0	0.30	0.0	BRADFORD REGIONAL MEDICAL CENTER (12361)
0	0.30	0.0	BROOKVILLE HOSPITAL (12418)
0	0.31	0.0	J C BLAIR MEMORIAL HOSP (11724)
0	0.31	0.0	SOUTHWEST REGIONAL MEDICAL CENTER (11942)
0	0.32	0.0	CHILDRENS INSTITUTE OF PITTSBURGH (12266)
0	0.33	0.0	GROVE CITY MEDICAL CENTER (11722)
0	0.39	0.0	CHARLES COLE MEMORIAL HOSPITAL (11956)
0	0.41	0.0	HIGHLANDS HOSPITAL (11902)
0	0.42	0.0	UPMC PRESBYTERIAN SHADYSIDE −−− WPIC (13702)
0	0.42	0.0	LANCASTER REHABILITATION HOSPITAL (12628)
0	0.44	0.0	ELK REGIONAL HEALTH CENTER (11859)
0	0.46	0.0	CLEARFIELD HOSPITAL (11843)
0	0.47	0.0	HEALTHSOUTH REHABILITATION HOSPITAL OF SEWICKLEY (12066)
2	0.47	4.2	SOLDIERS \& SAILORS MEM HOSPITAL (11688)
0	0.49	0.0	ST. LUKES QUAKERTOWN HOSPITAL (11711)
0	0.50	0.0	WARREN GENERAL HOSPITAL (12216)
1	0.51	2.0	CRICHTON REHABILITATION CENTER (12273)
0	0.52	0.0	MUNCY VALLEY HOSPITAL (11748)
0	0.56	0.0	HEALTHSOUTH NITTANY VALLEY REHABILITATION HOSPITAL (11667)
1	0.56	1.8	ELLWOOD CITY HOSPITAL (11779)
1	0.57	1.7	SHRINERS HOSPITAL FOR CHILDREN −−− PHILADELPHIA (12244)
0	0.58	0.0	HEART OF LANCASTER REGIONAL MEDICAL CENTER (12571)
0	0.62	0.0	WAYNESBORO HOSPITAL (11642)
1	0.62	1.6	GNADEN HUETTEN MEMORIAL HOSPITAL (12241)
1	0.68	1.5	HEALTHSOUTH READING REHABILITATION HOSPITAL (12139)
2	0.69	2.9	JENNERSVILLE REGIONAL HOSPITAL (12337)
0	0.70	0.0	WELLSPAN SURGERY AND REHABILITATION HOSPITAL (27430)
0	0.71	0.0	HEALTHSOUTH REHABILITATION HOSPITAL OF ALTOONA (11903)
0	0.71	0.0	MILLCREEK COMMUNITY HOSPITAL (12253)
1	0.72	1.4	THE GOOD SHEPHERD REHABILITATION HOSPITAL (11896)
0	0.80	0.0	WAYNE MEMORIAL HOSPITAL (12004)
2	0.81	2.5	HEALTHSOUTH REHABILITATION HOSPITAL OF YORK (12058)
1	0.82	1.2	EVANGELICAL COMMUNITY HOSPITAL (11701)
0	0.84	0.0	HEALTHSOUTH REHABILITATION HOSPITAL OF ERIE (11810)
2	0.88	2.3	HOSPITAL OF FOX CHASE CANCER CENTER (12134)
0	0.93	0.0	KENSINGTON HOSPITAL (12609)
1	0.93	1.1	ALBERT EINSTEIN MEDICAL CENTER AT ELKINS PARK (12500)
2	0.94	2.1	HEALTHSOUTH REHABILITATION HOSPITAL OF MECHANICSBURG (12402)
0	0.95	0.0	MAIN LINE HOSPITAL BRYN MAWR REHABILITATION (11417)
1	0.97	1.0	GETTYSBURG HOSPITAL (11531)

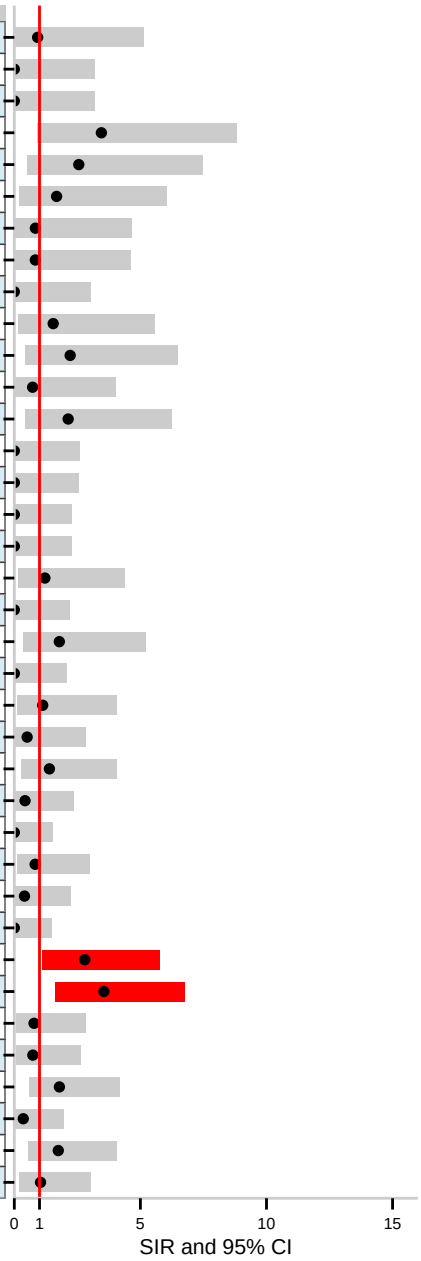


Better than predicted | Not different than predicted | Worse than predicted

Figure 4.4.5: **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, 2013

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

Obs.	Pred.	SIR	Facility and NHSN ID
1	1.08	0.9	PENN STATE HERSHEY REHABILITATION LLC (11915)
0	1.15	0.0	EXCELA HEALTH FRICK HOSPITAL (11639)
0	1.15	0.0	CLARION HOSPITAL (11654)
4	1.16	3.5	LOWER BUCKS HOSPITAL (12390)
3	1.17	2.6	TROY COMMUNITY HOSPITAL (12018)
2	1.19	1.7	CANONSBURG GENERAL HOSPITAL (11586)
1	1.19	0.8	LANSDALE HOSPITAL (12032)
1	1.20	0.8	INDIANA REGIONAL MEDICAL CENTER (11759)
0	1.21	0.0	MAGEE REHAB HOSPITAL (12146)
2	1.30	1.5	HEALTHSOUTH HARMARVILLE REHABILITATION HOSPITAL (11727)
3	1.35	2.2	SCHUYLKILL MEDICAL CENTER −−− EAST NORWEGIAN STREET (11922)
1	1.38	0.7	ROXBOROUGH MEMORIAL HOSPITAL (11978)
3	1.40	2.1	SCHUYLKILL MEDICAL CENTER −−− SOUTH JACKSON STREET (12087)
0	1.42	0.0	ST. LUKES HOSPITAL ANDERSON CAMPUS (21487)
0	1.42	0.0	EASTERN REGIONAL MEDICAL CENTER (12348)
0	1.60	0.0	SACRED HEART HOSPITAL (11684)
0	1.62	0.0	ALBERT EINSTEIN MEDICAL CENTER MOSS REHABILITATION (12508)
2	1.65	1.2	EPHRATA COMMUNITY HOSPITAL (11764)
0	1.68	0.0	CARLISLE REGIONAL MEDICAL CENTER (11997)
3	1.68	1.8	LEWISTOWN HOSPITAL (11825)
0	1.77	0.0	OHIO VALLEY GENERAL HOSPITAL (12298)
2	1.78	1.1	HANOVER HOSPITAL (11899)
1	1.97	0.5	LANCASTER REGIONAL MEDICAL CENTER (12335)
3	2.15	1.4	EXCELA HEALTH LATROBE HOSPITAL (11651)
1	2.35	0.4	UPMC NORTHWEST (11837)
0	2.39	0.0	SHARON REGIONAL HEALTH SYSTEM (12250)
2	2.42	0.8	SOMERSET HOSPITAL (12282)
1	2.48	0.4	MEMORIAL HOSPITAL (11633)
0	2.49	0.0	DUBOIS REGIONAL MEDICAL CENTER (11606)
7	2.50	2.8	MEADVILLE MEDICAL CENTER (11583)
9	2.53	3.6	BRANDYWINE HOSPITAL (11979)
2	2.55	0.8	CROZER CHESTER MEDICAL CENTER TAYLOR (11932)
2	2.72	0.7	HERITAGE VALLEY SEWICKLEY (10375)
5	2.80	1.8	HAZLETON GENERAL HOSPITAL (11878)
1	2.82	0.4	JAMESON MEMORIAL HOSPITAL (11954)
5	2.87	1.7	ALLEGHENY VALLEY HOSPITAL (11842)
3	2.88	1.0	MOSES TAYLOR HOSPITAL (11528)

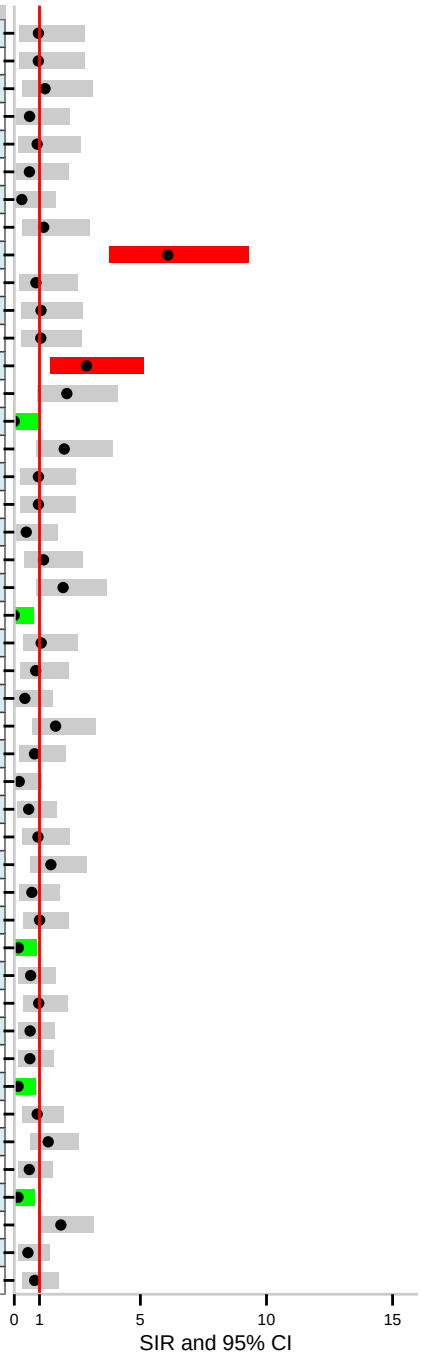


Better than predicted | Not different than predicted | Worse than predicted

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, 2013

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

Obs.	Pred.	SIR	Facility and NHSN ID
3	3.13	1.0	CHESTNUT HILL HOSPITAL (12304)
3	3.15	1.0	UPMC HORIZON (11675)
4	3.28	1.2	THE GOOD SAMARITAN HOSPITAL (11712)
2	3.30	0.6	MONONGAHELA VALLEY HOSPITAL (11069)
3	3.31	0.9	MERCY SUBURBAN HOSPITAL NORRISTOWN (11952)
2	3.34	0.6	ARMSTRONG COUNTY MEMORIAL HOSPITAL (12057)
1	3.34	0.3	UNIONTOWN HOSPITAL (10441)
4	3.44	1.2	MERCY PHILADELPHIA HOSPITAL (11946)
21	3.45	6.1	ST. JOSEPHS HOSPITAL (12438)
3	3.50	0.9	EINSTEIN MEDICAL CENTER MONTGOMERY (30210)
4	3.78	1.1	PHOENIXVILLE HOSPITAL COMPANY LLC (11836)
4	3.81	1.0	POTTSTOWN MEMORIAL MEDICAL CENTER (11983)
11	3.84	2.9	NAZARETH HOSPITAL (11919)
8	3.84	2.1	JEANES HOSPITAL (11459)
0	3.88	0.0	HOLY REDEEMER HOSPITAL AND MEDICAL CENTER (11973)
8	4.04	2.0	POCONO MEDICAL CENTER (11772)
4	4.18	1.0	GEISINGER−COMMUNITY MEDICAL CENTER (11914)
4	4.18	1.0	MAIN LINE HOSPITAL −−− PAOLI (11750)
2	4.21	0.5	EASTON HOSPITAL (11929)
5	4.31	1.2	REGIONAL HOSPITAL OF SCRANTON (12533)
9	4.65	1.9	CHAMBERSBURG HOSPITAL (11913)
0	4.68	0.0	BUTLER MEMORIAL HOSPITAL (11736)
5	4.69	1.1	RIDDLE MEMORIAL HOSPITAL (11731)
4	4.72	0.8	UPMC MCKEESPORT (11707)
2	4.76	0.4	ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)
8	4.89	1.6	MERCY FITZGERALD HOSPITAL (11683)
4	4.99	0.8	UPMC EAST (28812)
1	5.12	0.2	MOUNT NITTANY MEDICAL CENTER (11797)
3	5.27	0.6	DELAWARE COUNTY MEMORIAL HOSPITAL (11972)
5	5.33	0.9	GRAND VIEW HOSPITAL (11847)
8	5.52	1.5	THOMAS JEFFERSON UNIV HOSP − METHODIST (12017)
4	5.75	0.7	HERITAGE VALLEY BEAVER (11831)
6	5.99	1.0	CHESTER COUNTY HOSPITAL (12016)
1	6.12	0.2	THE WASHINGTON HOSPITAL (11460)
4	6.16	0.6	JEFFERSON REGIONAL MEDICAL CENTER (10237)
6	6.20	1.0	HOLY SPIRIT HOSPITAL (12387)
4	6.38	0.6	THE WESTERN PENNSYLVANIA HOSPITAL (11864)
4	6.48	0.6	ST. JOSEPH MEDICAL CENTER (11961)
1	6.60	0.2	DOYLESTOWN HOSPITAL (10190)
6	6.61	0.9	WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)
9	6.70	1.3	MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)
4	6.73	0.6	ST. VINCENT HEALTH CENTER (11699)
1	6.78	0.1	ST. CLAIR MEMORIAL HOSPITAL (10561)
13	7.04	1.8	LEHIGH VALLEY HOSPITAL −−− MUHLENBERG (11898)
4	7.41	0.5	WILKES−BARRE GENERAL HOSPITAL (11916)
6	7.43	0.8	ROBERT PACKER HOSPITAL (12422)

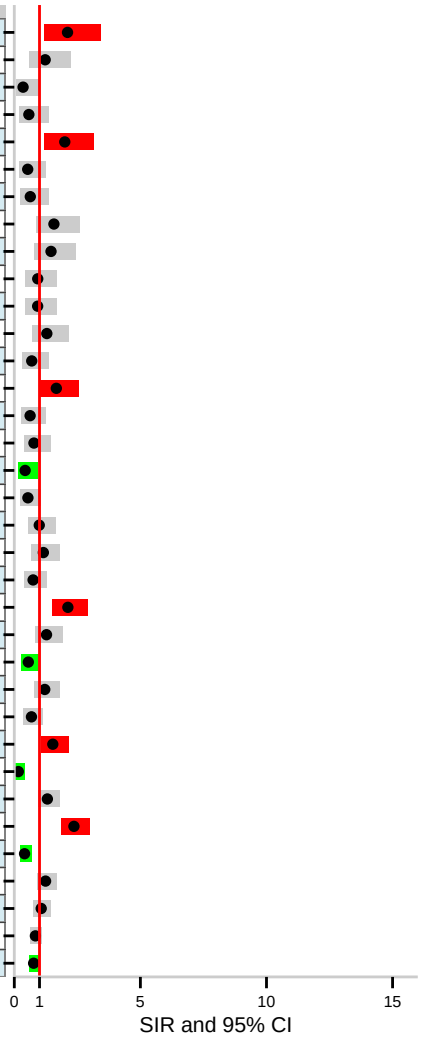


Better than predicted | Not different than predicted | Worse than predicted

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, 2013

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

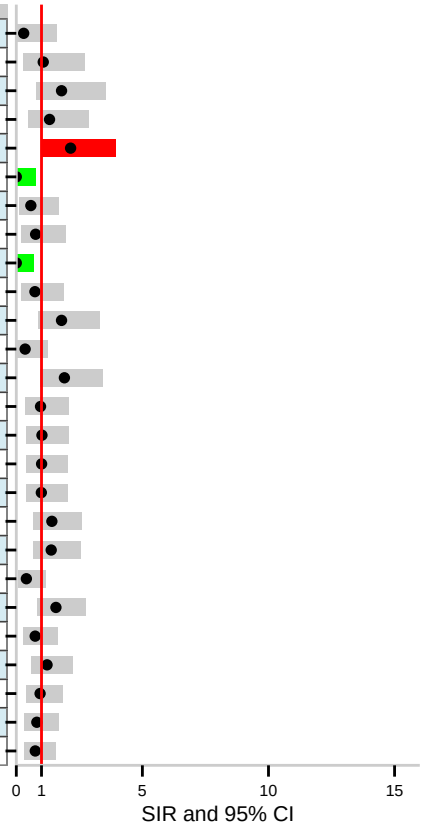
Obs.	Pred.	SIR	Facility and NHSN ID
16	7.58	2.1	ALTOONA REGIONAL HEALTH SYSTEM (10178)
10	8.17	1.2	ST. MARY MEDICAL CENTER (11885)
3	8.62	0.3	GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)
5	8.67	0.6	FORBES REGIONAL HOSPITAL (11265)
18	8.99	2.0	PENN PRESBYTERIAN MEDICAL CENTER (11814)
5	9.40	0.5	MAIN LINE HOSPITAL BRYN MAWR (11753)
6	9.46	0.6	UPMC ST MARGARET (11561)
15	9.55	1.6	CROZER CHESTER MEDICAL CENTER (11839)
14	9.62	1.5	EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)
10	10.76	0.9	CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)
10	10.80	0.9	LANCASTER GENERAL HOSPITAL (10183)
14	10.85	1.3	PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS (11448)
8	11.58	0.7	MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)
21	12.60	1.7	ALBERT EINSTEIN MEDICAL CENTER (10585)
8	12.76	0.6	ARIA HEALTH (11388)
10	12.84	0.8	ABINGTON MEMORIAL HOSPITAL (11838)
6	13.94	0.4	HAHNEMANN UNIVERSITY HOSPITAL (11437)
8	14.83	0.5	UPMC PASSAVANT (11242)
15	15.16	1.0	ST. LUKES HOSPITAL BETHLEHEM (11718)
18	15.63	1.2	YORK HOSPITAL (10108)
13	17.44	0.7	GEISINGER MEDICAL CENTER (11775)
38	17.89	2.1	CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)
24	18.79	1.3	UPMC HAMOT (11725)
11	19.79	0.6	UPMC MERCY (10384)
24	19.88	1.2	TEMPLE UNIVERSITY HOSPITAL (12382)
14	20.56	0.7	READING HOSPITAL AND MEDICAL CENTER (12375)
34	22.27	1.5	CHILDRENS HOSPITAL OF PHILADELPHIA (10306)
4	25.05	0.2	PINNACLE HEALTH HOSPITALS (10122)
41	31.26	1.3	MILTON S HERSHEY MEDICAL CENTER (11747)
74	31.29	2.4	LEHIGH VALLEY HOSPITAL (11884)
14	34.42	0.4	UPMC PRESBYTERIAN SHADYSIDE --- SHADYSIDE (10118)
44	35.49	1.2	THOMAS JEFFERSON UNIV HOSPITAL (11506)
39	36.57	1.1	ALLEGHENY GENERAL HOSPITAL (10648)
54	64.57	0.8	HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)
64	83.46	0.8	UPMC PRESBYTERIAN SHADYSIDE --- PRESBYTERIAN (10348)



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

Figure 4.4.8: **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, 2013

Obs.	Pred.	SIR	Facility and NHSN ID
1	3.41	0.3	SELECT SPECIALTY HOSPITAL −−− DANVILLE (12123)
4	3.74	1.1	SELECT SPECIALITY HOSPITAL −−− ERIE (11880)
8	4.46	1.8	SELECT SPECIALITY HOSPITAL −−− CENTRAL PENNSYLVANIA (YORK) (12334)
6	4.55	1.3	SELECT SPECIALTY HOSPITAL LAUREL HIGHLANDS, INC. (12108)
10	4.64	2.2	KINDRED HOSPITAL PITTSBURGH −−− NORTH SHORE (12296)
0	4.67	0.0	SELECT SPECIALTY HOSPITAL −−− MCKEESPORT, INC. (12271)
3	5.20	0.6	LIFECARE HOSPITALS OF PITTSBURGH −−− ALLE−KISKI CAMPUS (18955)
4	5.22	0.8	KINDRED HOSPITAL EASTON (12007)
0	5.40	0.0	LIFECARE HOSPITALS OF PITTSBURGH −−− SUBURBAN CAMPUS (12385)
4	5.41	0.7	SPECIAL CARE HOSPITAL (12604)
10	5.58	1.8	GOOD SHEPHERD PENN PARTNERS (13929)
2	5.71	0.4	KINDRED HOSPITAL SOUTH PHILADELPHIA (11940)
11	5.77	1.9	KINDRED HOSPITAL −−− PHILADELPHIA (11832)
6	6.24	1.0	SELECT SPECIALTY HOSPITAL −−− PITTSBURGH/UPMC (12009)
7	6.88	1.0	KINDRED HOSPITAL AT HERITAGE VALLEY (12268)
7	6.97	1.0	GOOD SHEPHERD SPECIALTY HOSPITAL (11887)
7	7.05	1.0	LIFECARE HOSPITALS OF MECHANICSBURG (12388)
10	7.09	1.4	KINDRED HOSPITAL −−− WYOMING VALLEY (12485)
10	7.23	1.4	LIFECARE HOSPITALS OF CHESTER COUNTY (12005)
3	7.51	0.4	SELECT SPECIALITY HOSPITAL −−− JOHNSTOWN (12299)
12	7.64	1.6	KINDRED HOSPITAL −−− PITTSBURGH (12358)
6	8.02	0.7	SELECT SPECIALTY HOSPITAL −−− CENTRAL PENNSYLVANIA (CAMP HILL) (12147)
10	8.20	1.2	LIFECARE HOSPITALS OF PITTSBURGH (11945)
8	8.49	0.9	SELECT SPECIALTY HOSPITAL −−− CENTRAL PA (13921)
7	8.60	0.8	KINDRED HOSPITAL PHILADELPHIA −−− HAVERTOWN (12908)
7	9.30	0.8	LIFECARE HOSPITALS OF PITTSBURGH −−− MONROEVILLE (12254)

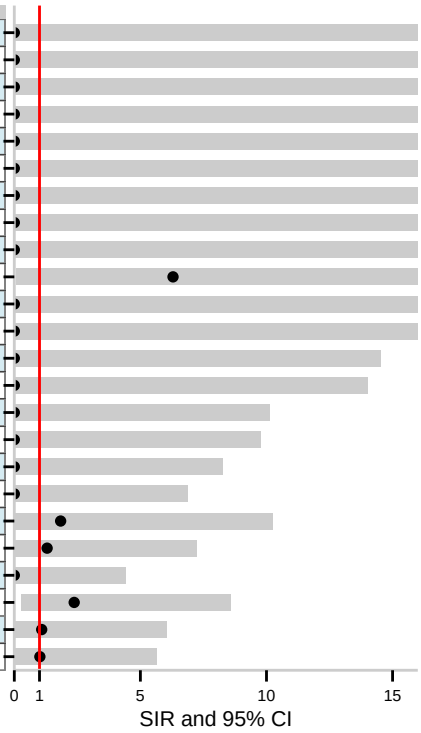


Better than predicted | Not different than predicted | Worse than predicted

Figure 4.4.9: **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, 2013

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

Obs.	Pred.	SIR	Facility and NHSN ID
0	0.00	0.0	SACRED HEART HOSPITAL (11684)
0	0.01	0.0	EASTON HOSPITAL (11929)
0	0.02	0.0	ST. MARY MEDICAL CENTER (11885)
0	0.03	0.0	UPMC MERCY (10384)
0	0.03	0.0	GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)
0	0.07	0.0	HOLY SPIRIT HOSPITAL (12387)
0	0.10	0.0	EPHRATA COMMUNITY HOSPITAL (11764)
0	0.12	0.0	ST. JOSEPH MEDICAL CENTER (11961)
0	0.12	0.0	DUBOIS REGIONAL MEDICAL CENTER (11606)
1	0.16	6.3	MAIN LINE HOSPITAL −−− PAOLI (11750)
0	0.18	0.0	POCONO MEDICAL CENTER (11772)
0	0.19	0.0	DELAWARE COUNTY MEMORIAL HOSPITAL (11972)
0	0.25	0.0	MAIN LINE HOSPITAL BRYN MAWR (11753)
0	0.26	0.0	HEART OF LANCASTER REGIONAL MEDICAL CENTER (12571)
0	0.36	0.0	MOSES TAYLOR HOSPITAL (11528)
0	0.37	0.0	EINSTEIN MEDICAL CENTER MONTGOMERY (30210)
0	0.44	0.0	CHESTER COUNTY HOSPITAL (12016)
0	0.53	0.0	ST. VINCENT HEALTH CENTER (11699)
1	0.54	1.8	HOLY REDEEMER HOSPITAL AND MEDICAL CENTER (11973)
1	0.77	1.3	CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)
0	0.83	0.0	ST. LUKES HOSPITAL BETHLEHEM (11718)
2	0.84	2.4	ABINGTON MEMORIAL HOSPITAL (11838)
1	0.92	1.1	CROZER CHESTER MEDICAL CENTER (11839)
1	0.99	1.0	LANCASTER GENERAL HOSPITAL (10183)

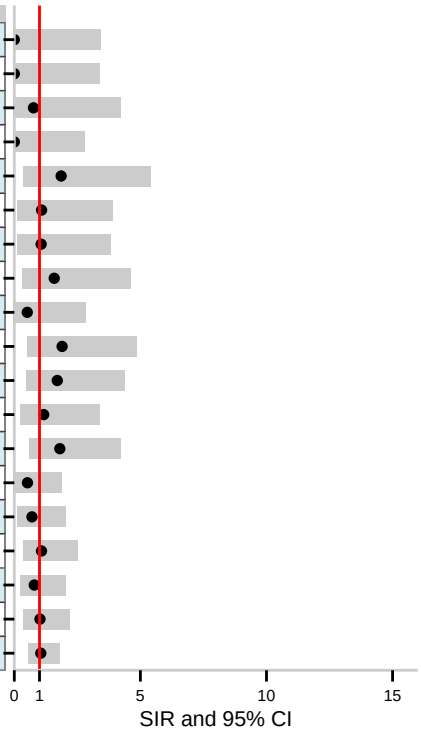


Better than predicted | Not different than predicted | Worse than predicted

Figure 4.4.10: **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, 2013

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

Obs.	Pred.	SIR	Facility and NHSN ID
0	1.07	0.0	UPMC HAMOT (11725)
0	1.09	0.0	MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)
1	1.31	0.8	READING HOSPITAL AND MEDICAL CENTER (12375)
0	1.32	0.0	TEMPLE UNIVERSITY HOSPITAL (12382)
3	1.62	1.9	HAHNEMANN UNIVERSITY HOSPITAL (11437)
2	1.85	1.1	PINNACLE HEALTH HOSPITALS (10122)
2	1.88	1.1	THOMAS JEFFERSON UNIV HOSPITAL (11506)
3	1.90	1.6	YORK HOSPITAL (10108)
1	1.95	0.5	ALBERT EINSTEIN MEDICAL CENTER (10585)
4	2.11	1.9	PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS (11448)
4	2.35	1.7	GEISINGER MEDICAL CENTER (11775)
3	2.57	1.2	LEHIGH VALLEY HOSPITAL (11884)
5	2.77	1.8	HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)
2	3.83	0.5	THE WESTERN PENNSYLVANIA HOSPITAL (11864)
3	4.28	0.7	MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)
5	4.64	1.1	MILTON S HERSHEY MEDICAL CENTER (11747)
4	5.05	0.8	CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)
6	5.89	1.0	ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)
13	12.38	1.0	CHILDRENS HOSPITAL OF PHILADELPHIA (10306)

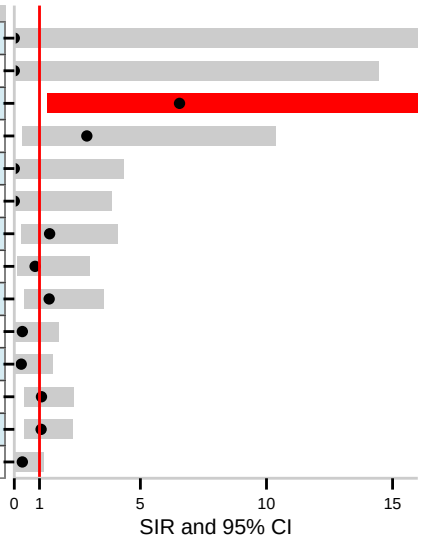


Better than predicted | Not different than predicted | Worse than predicted

Figure 4.4.11: **Specialty Care Areas**: Number of Observed (Obs.) Central Line-Associated Bloodstream Infections (CLABSI) and Relative Ranking of Facilities by Standardized Infection Ratio (SIR) — Pennsylvania, 2013

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

Obs.	Pred.	SIR	Facility and NHSN ID
0	0.19	0.0	JEFFERSON REGIONAL MEDICAL CENTER (10237)
0	0.25	0.0	ST. LUKES HOSPITAL ANDERSON CAMPUS (21487)
3	0.46	6.6	CHILDRENS HOME OF PITTSBURGH, THE (12336)
2	0.70	2.9	EXCELA HEALTH LATROBE HOSPITAL (11651)
0	0.85	0.0	UPMC NORTHWEST (11837)
0	0.95	0.0	ST. LUKES HOSPITAL BETHLEHEM (11718)
3	2.14	1.4	WILKES−BARRE GENERAL HOSPITAL (11916)
2	2.42	0.8	EASTON HOSPITAL (11929)
4	2.89	1.4	ROBERT PACKER HOSPITAL (12422)
1	3.13	0.3	ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)
1	3.62	0.3	READING HOSPITAL AND MEDICAL CENTER (12375)
6	5.57	1.1	GEISINGER MEDICAL CENTER (11775)
6	5.65	1.1	ABINGTON MEMORIAL HOSPITAL (11838)
2	6.28	0.3	TEMPLE UNIVERSITY HOSPITAL (12382)

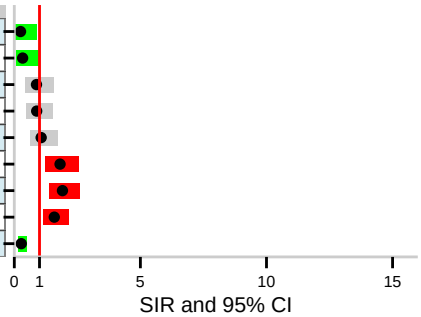


Better than predicted | Not different than predicted | Worse than predicted

Figure 4.4.12: **Specialty Care Areas**: Number of Observed (Obs.) Central Line-Associated Bloodstream Infections (CLABSI) and Relative Ranking of Facilities by Standardized Infection Ratio (SIR) — Pennsylvania, 2013

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

Obs.	Pred.	SIR	Facility and NHSN ID
2	8.08	0.2	THE WESTERN PENNSYLVANIA HOSPITAL (11864)
3	9.10	0.3	HAHNEMANN UNIVERSITY HOSPITAL (11437)
11	12.51	0.9	EASTERN REGIONAL MEDICAL CENTER (12348)
13	14.64	0.9	HOSPITAL OF FOX CHASE CANCER CENTER (12134)
17	15.96	1.1	THOMAS JEFFERSON UNIV HOSPITAL (11506)
31	17.09	1.8	CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)
41	21.47	1.9	CHILDRENS HOSPITAL OF PHILADELPHIA (10306)
40	25.22	1.6	MILTON S HERSHEY MEDICAL CENTER (11747)
11	39.84	0.3	UPMC PRESBYTERIAN SHADYSIDE −−− SHADYSIDE (10118)



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

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 second 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.

4.5.1. SSIs — Statewide Summary

For each procedure type, the total number of hospitals performing that procedure is shown in Table 4.5.1. As discussed in the methods, direct comparison of rates before and after 2012 are complicated by changes in the follow-up surveillance period in 2012 and the inclusion of colon surgeries as a seventh benchmarked procedure in 2013.

Table 4.5.1 shows the SSI rate for each of the seven procedure types performed in 2013, rates for previous years and the percent change. The rates of infection for procedures performed in 2013 ranged from a low of 0.62 SSIs per 100 knee arthroplasties to a high of 5.01 SSIs per 100 colon (COLO) surgeries. When interpreting this table for potential trends, one must exercise caution as the change in surveillance period during this time needs to be accounted for. In particular, a policy change was implemented that began in 2013 and would continue in subsequent years. Here, the follow-up periods between the dates that each of the 7 benchmarked procedures took place and the dates that the occurrence the corresponding SSIs were recorded, was reduced from 12 months to 90 days. Not considering COLO which has only two years of data, there were reductions in the crude rates for all of the other benchmarked procedures. These reductions are notable and range from 5.9% for hip prosthesis to 24.4% for knee arthroplasty. This pattern can largely be attributed to the reduced period of follow-up so that cases that would otherwise have been counted with 3 months to 12 months of follow-up are no longer considered to be part of the numerator when calculating SSI rates. Similarly, the increase in total number of SSIs from all procedures likely increased from 94,634 infections in 2011 to 111,982 infections in 2012 as a result of the addition of colon surgeries but this increase was likely also simultaneously tempered by the change in the follow-up period.

Table 4.5.1: Summary of Reporting Hospitals and Surgical Site Infections (SSIs) by Benchmarked Procedure and Year — Pennsylvania, 2009–2013

	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 Baseline
Cardiac (CARD)						
2013	70	70	8,921	0.78	– 21.63	– 33.39
2012	67	81	8,090	1.00	– 11.17	– 15.00
2011	67	88	7,807	1.13	1.12	– 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)						
2013	59	17	1,061	1.60	– 17.51	22.42
2012	58	27	1,390	1.94	76.49	48.42
2011	53	14	1,272	1.10	– 17.80	– 15.90

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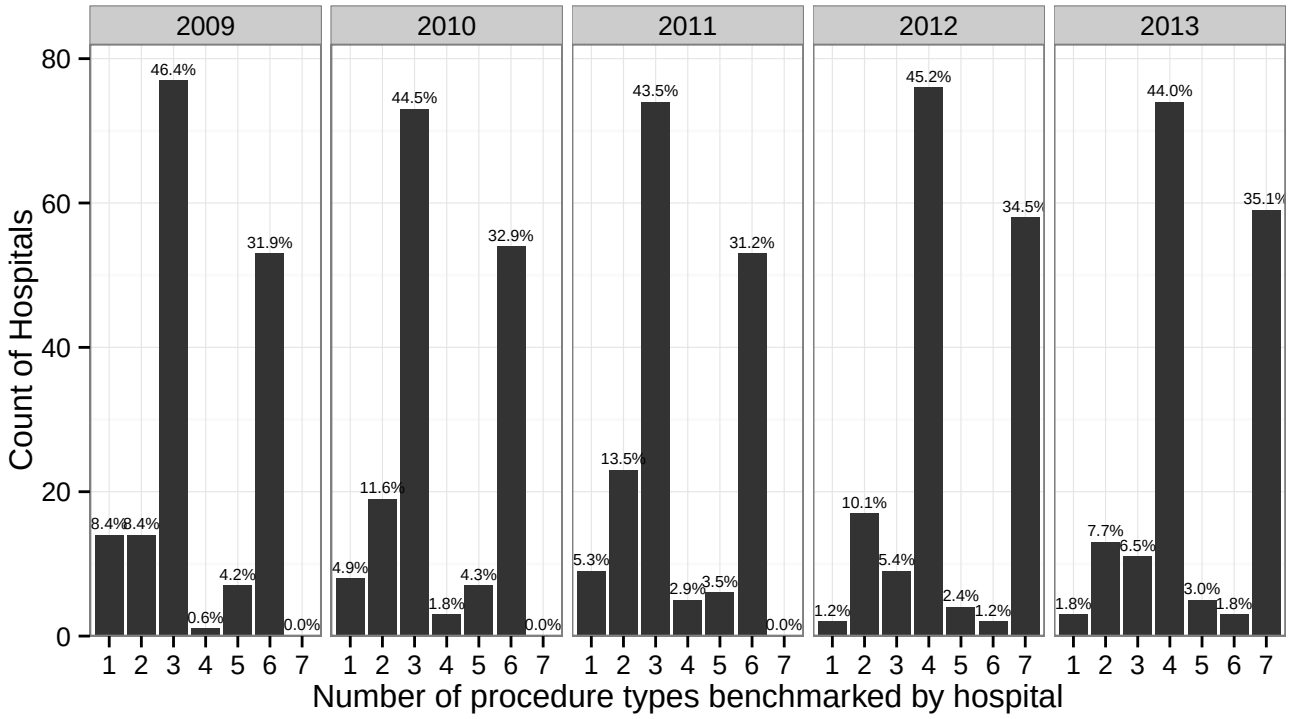
Table 4.5.1 – Continued from previous page

	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 Baseline
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)						
2013	63	151	8,963	1.68	– 23.61	– 32.07
2012	60	193	8,751	2.21	4.80	– 11.07
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)						
2013	157	252	40,491	0.62	– 23.95	– 33.37
2012	157	329	40,201	0.82	– 1.86	– 12.38
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)						
2013	160	329	24,966	1.32	– 5.92	– 5.19
2012	158	334	23,846	1.40	– 5.27	0.77
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)						
2013	146	201	14,268	1.41	– 11.48	– 11.55
2012	146	224	14,076	1.59	0.45	– 0.09
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	.	.
Colon Surgery (COLO)						
2013	159	819	16,354	5.01	6.77	6.77
2012	159	733	15,628	4.69	.	.
2011	.	.	.	.	.	.
2010	.	.	.	.	.	.
2009	.	.	.	.	.	.
Annual Total (All Procedures)						
2013	168	1,839	115,024	1.60	– 6.80	18.65
2012	168	1,921	111,982	1.72	36.88	27.31
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, 2009–2013

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 2011 through 2013. 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, 2011–2013

	2011		2012		2013	
Pathogen	Count	%	Count	%	Count	%
Staphylococcus aureus	481	35.24	559	23.18	480	20.70
Escherichia coli	80	5.86	309	12.81	348	15.01
Enterococcus faecalis	65	4.76	157	6.51	176	7.59
Pseudomonas aeruginosa	82	6.01	118	4.89	129	5.56
Staphylococcus coagulase negative	94	6.89	107	4.44	95	4.10
Enterococcus spp.	36	2.64	109	4.52	88	3.79
Klebsiella pneumoniae	44	3.22	94	3.90	79	3.41
Proteus mirabilis	52	3.81	81	3.36	73	3.15
Enterobacter cloacae	55	4.03	53	2.20	68	2.93
Bacteroides fragilis	12	0.88	71	2.94	60	2.59
Enterococcus faecium	13	0.95	56	2.32	60	2.59
Staphylococcus epidermidis	52	3.81	65	2.69	59	2.54
Candida albicans	5	0.37	35	1.45	35	1.51
Serratia marcescens	24	1.76	39	1.62	28	1.21
Streptococcus viridans spp.	10	0.73	29	1.20	28	1.21
Diphtheroids	10	0.73	26	1.08	25	1.08
Other	250	18.32	504	20.90	488	21.04
All	1,365	100.00	2,412	100.00	2,319	100.00

4.5.3. SSIs — National Comparison

Act 52 requires comparisons between Pennsylvania data and national data (Centers for Disease Control and Prevention, 2015). Due to methodological differences, the most precise way of comparing Pennsylvania data to national data is to present CDC comparisons of aggregated Pennsylvania data to national baseline data. CDC uses two surgical procedures, colon surgeries and abdominal hysterectomies, for benchmarking. Pennsylvania's aggregate 2013 colon surgery SSI SIR is not statistically different than national data from the same year; however, it is 11 percent less than national baseline data from 2008. Pennsylvania's aggregate 2013 abdominal hysterectomy SSI SIR is not statistically different from the 2013 national SIR or from the 2008 national baseline.

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 2013. Studies have shown that, in general, the SSI rate increases in concert with an increasing risk index. In general, this is true for the seven 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 2013, only 19 cardiac bypass (two incisions) procedures were done on patients with a risk index of 0, and a similar small number (11 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, 2013

	Risk Index	Number of SSIs	Number of Procedures	Crude Rate per 100 Procedures
Cardiac (CARD)	0	0	104	0.00
	1	48	6,588	0.73
	2	22	2,174	1.01
	3	0	55	0.00
	All	70	8,921	0.78
Cardiac bypass graft surgery with one incision (CBGC)	0	0	2	0.00
	1	9	839	1.07
	2	8	219	3.65
	3	0	1	0.00
	All	17	1,061	1.60
Cardiac bypass graft surgery with two incisions (CBGB)	0	2	19	10.53
	1	105	6,914	1.52
	2	44	2,019	2.18
	3	0	11	0.00
	All	151	8,963	1.68
Knee prosthesis (KPRO)	0	52	15,771	0.33
	1	141	20,582	0.69
	2	59	4,053	1.46
	3	0	85	0.00
	All	252	40,491	0.62
Hip prosthesis (HPRO)	0	50	9,003	0.56
	1	199	13,048	1.53
	2	79	2,841	2.78
	3	1	74	1.35
	All	329	24,966	1.32
Abdominal hysterectomy (HYST)	0	60	6,428	0.93
	1	82	5,881	1.39
	2	56	1,924	2.91
	3	3	35	8.57
	All	201	14,268	1.41
Colon surgery (COLO)	0	131	3,277	4.00
	1	348	7,870	4.42
	2	278	4,564	6.09
	3	62	643	9.64
	All	819	16,354	5.01

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 fewest to most predicted SSIs. Table 4.5.15 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.

Cardiac surgical procedures As shown in Table 4.5.4, among the 70 hospitals that performed cardiac surgery in 2013, the median number of reported SSIs was 0. In that year, 45 (64.3 percent) of these hospitals reported no cardiac surgery-related SSIs, and 49 (70 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 2013, 53 (75.7 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 17 (24.3 percent) had an SIR ≥ 1.00 (the number reported was higher than predicted). None of the hospitals had significantly fewer or more cardiac surgery-related SSIs than predicted.

Cardiac bypass graft — single incision procedures (CBGC) As shown in Table 4.5.4, among the 59 hospitals that reported performing single (chest) incision cardiac bypass grafts (CBGC) in 2013, the median number of post-surgical SSIs was 0, and only 11 (18.6 percent) of the hospitals reported any CBGC-related SSIs. The remaining 48 (81.4 percent) reported none. In addition, 48 (81.4 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 2013, 48 (81.4 percent) of the hospitals performing CBGCs had a reported number of SSIs that was less than predicted (an SIR <1.00), and only 11 (18.6 percent) reported more SSIs (an SIR >1.00) than predicted; none had significantly better SIRs than predicted, while one (1.7 percent) had a significantly worse SIR than predicted. This hospital is listed in Table 4.5.7.

Cardiac bypass graft — two incision procedures (CBGB) As shown in Table 4.5.4, among the 63 hospitals that performed two-incision (chest and donor site) cardiac bypass grafts in 2013, the median number of SSIs was 1, and 17 (27.0 percent) reported no CBGB-related SSIs. Among these hospitals, only 11 (17 percent) had <1 predicted infection. In 2013, there were 41 (65.1 percent) hospitals performing CBGBs that had a lower number of SSIs than predicted (their adjusted SIR was <1.00), while 22 (34.9 percent) had a greater or equal to number of SSIs than predicted (SIR ≥ 1.00). Among the 63 hospitals, none reported significantly fewer infections than predicted (listed in Table 4.5.6), while five hospitals (7.9 percent) reported significantly more infections than predicted; these hospitals are listed in Table 4.5.7.

Knee prostheses (KPRO) As shown in Table 4.5.4, among the 157 hospitals performing knee arthroplasties (prostheses) in 2013, the median number of SSIs was 1; a total of 63 (40.1 percent) reported no SSIs in this procedure category. Among the 157 hospitals, 77 (49 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 2013, there were 100 (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 57 (36.3 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.

Hip prostheses (HPRO) As shown in Table 4.5.4, among the 160 hospitals performing hip arthroplasties (prostheses) in 2013, the median number of SSIs was 1; a total of 62 (38.8 percent) reported no SSIs in this procedure category, and 70 (44 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 2013, there were 100 (62.5 percent) that had a fewer number (SIR <1.00) of SSIs reported than predicted; among these hospitals, two (1.2 percent) had a significantly lower number of infections reported than predicted. The remaining 60 (37.5 percent) had a greater or equal number (SIR ≥ 1.00) of SSIs reported than predicted; among these hospitals, ten 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.

Abdominal hysterectomies (HYST) As shown in Table 4.5.4, among the 146 hospitals performing abdominal hysterectomies in 2013, the median number of SSIs was 0, and there were 77 (52.7 percent) that reported no SSIs associated with this procedure and 93 (64 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 2013, a total of 104 (71.2 percent) hospitals reported fewer SSIs than predicted (SIR <1.00), while the other 42 (28.8 percent) reported more or equal SSIs than predicted (SIR $\geq$ 1.00). However, no hospitals had a significantly lower number of SSIs than predicted, and six (4.1 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.

Colon surgeries (COLO) As shown in Table 4.5.4, among the 159 hospitals performing colon surgeries in 2013, the median number of SSIs was 2; a total of 32 (20.1 percent) reported no SSIs in this procedure category, and 34 (21 percent) had a predicted number of infections that was <1 (meaning the findings for these hospitals are statistically unreliable). Among hospitals performing colon surgeries in 2013, there were 97 (61.0 percent) that had a fewer number (SIR <1.00) of SSIs reported than predicted; among these hospitals, five (3.1 percent) had a significantly lower number of infections reported than predicted. The remaining 62 (39.0 percent) had a greater or equal number (SIR $\geq$ 1.00) of SSIs reported than predicted; among these hospitals, nine had a significantly higher (or worse) number of 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.

Table 4.5.4: Summary of Surgical Site Infections (SSIs) and Hospital Performance by Benchmarked Procedure and Year — Pennsylvania, 2009–2013

	Median SSIs per Hospital	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	
		n	%	n	%	n	%	n	%	n	%	n	%
Cardiac (CARD)													
2013	0	45	64.3	49	70.0	53	75.7	17	24.3	0	0.0	0	0.0
2012	1	30	44.8	43	64.2	41	61.2	26	38.8	0	0.0	1	1.5
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)													
2013	0	48	81.4	57	96.6	48	81.4	11	18.6	0	0.0	1	1.7
2012	0	40	69.0	52	89.7	42	72.4	16	27.6	0	0.0	0	0.0
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)													
2013	1	17	27.0	11	17.5	41	65.1	22	34.9	0	0.0	5	7.9
2012	3	9	15.0	4	6.7	31	51.7	29	48.3	0	0.0	0	0.0
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)													
2013	1	63	40.1	77	49.0	100	63.7	57	36.3	1	0.6	6	3.8
2012	1	68	43.3	71	45.2	103	65.6	54	34.4	0	0.0	7	4.5
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)													
2013	1	62	38.8	70	43.8	100	62.5	60	37.5	2	1.2	10	6.2
2012	1	63	39.9	70	44.3	96	60.8	62	39.2	3	1.9	3	1.9
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)													
2013	0	77	52.7	93	63.7	104	71.2	42	28.8	0	0.0	6	4.1
2012	0	81	55.5	91	62.3	100	68.5	46	31.5	1	0.7	6	4.1
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
Colon surgery (COLO)													
2013	2	32	20.1	34	21.4	97	61.0	62	39.0	5	3.1	9	5.7
2012	3	26	16.4	34	21.4	93	58.5	66	41.5	4	2.5	6	3.8
2011	.	.	.	.	.	.	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.	.	.	.	.	.	.
2009	.	.	.	.	.	.	.	.	.	.	.	.	.

Table 4.5.5: Hospitals Omitted from SSI SIR Analysis Due to No Reported Procedures — Pennsylvania, 2013

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)
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)
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)

Table 4.5.6: Hospitals with Significantly Fewer Surgical Site Infections (SSIs) than Predicted (Better = Smaller SIR) — Pennsylvania, 2013

	Hospital Name (NHSN ID)
Cardiac (CARD)	NONE
Cardiac bypass graft surgery with one incision (CBGC)	NONE
Cardiac bypass graft surgery with two incisions (CBGB)	NONE
Knee arthroplasty (KPRO)	COORDINATED HEALTH ORTHOPEDIC HOSPITAL, LLC (11872)
Hip arthroplasty (HPRO)	LANCASTER GENERAL HOSPITAL (10183) MAIN LINE HOSPITAL BRYN MAWR (11753)
Abdominal hysterectomy (HYST)	NONE
Colon surgery (COLO)	ARIA HEALTH (11388) LEHIGH VALLEY HOSPITAL — MUHLENBERG (11898) MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770) MILTON S HERSHEY MEDICAL CENTER (11747) PHOENIXVILLE HOSPITAL COMPANY LLC (11836)

Table 4.5.7: Hospitals with Significantly More Surgical Site Infections (SSIs) than Predicted (Worse = Larger SIR) — Pennsylvania, 2013

	Hospital Name (NHSN ID)
Cardiac (CARD)	NONE
Cardiac bypass graft surgery with one incision (CBGC)	CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)
Cardiac bypass graft surgery with two incisions (CBGB)	BRANDYWINE HOSPITAL (11979) HERITAGE VALLEY BEAVER (11831) ROBERT PACKER HOSPITAL (12422) UPMC HAMOT (11725) YORK HOSPITAL (10108)
Knee arthroplasty (KPRO)	CARLISLE REGIONAL MEDICAL CENTER (11997) GEISINGER MEDICAL CENTER (11775) J C BLAIR MEMORIAL HOSP (11724) LEHIGH VALLEY HOSPITAL (11884) PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS (11448) UPMC PRESBYTERIAN SHADYSIDE — SHADYSIDE (10118)
Hip arthroplasty (HPRO)	CHAMBERSBURG HOSPITAL (11913) FORBES REGIONAL HOSPITAL (11265) HOLY REDEEMER HOSPITAL AND MEDICAL CENTER (11973) J C BLAIR MEMORIAL HOSP (11724) LEHIGH VALLEY HOSPITAL (11884) MERCY PHILADELPHIA HOSPITAL (11946) PINNACLE HEALTH HOSPITALS (10122) PUNXSUTAWNEY AREA HOSPITAL (11830) SCHUYLKILL MEDICAL CENTER — SOUTH JACKSON STREET (12087) ST. LUKES MINERS MEMORIAL HOSPITAL (11784)
Abdominal hysterectomy (HYST)	CHESTER COUNTY HOSPITAL (12016) GEISINGER MEDICAL CENTER (11775) GEISINGER WYOMING VALLEY MEDICAL CENTER (11780) MERCY SUBURBAN HOSPITAL NORRISTOWN (11952) ST. LUKES HOSPITAL BETHLEHEM (11718) WAYNE MEMORIAL HOSPITAL (12004)
Colon surgery (COLO)	ALLEGHENY GENERAL HOSPITAL (10648) EASTERN REGIONAL MEDICAL CENTER (12348) EVANGELICAL COMMUNITY HOSPITAL (11701) MEMORIAL HOSPITAL (11633) MONONGAHELA VALLEY HOSPITAL (11069) NASON HOSPITAL (11907) ST. VINCENT HEALTH CENTER (11699) UPMC PASSAVANT (11242) UPMC PRESBYTERIAN SHADYSIDE — SHADYSIDE (10118)

Table 4.5.8: Rate (SIR) of Surgical Site Infections (SSIs) Associated with Cardiac Procedures by Hospital (Ordered by SIR) — Pennsylvania, 2009–2013

	Number of SSIs (CARD)	Predicted Number of SSIs (CARD)	SIR (95% CI)
HERITAGE VALLEY SEWICKLEY (10375)			
2013	.	.	.
2012	.	.	.
2011	0	0.01	0.00 (0.00–315.62)
2010	0	0.04	0.00 (0.00–87.44)
2009	.	.	.
MERCY SUBURBAN HOSPITAL NORRISTOWN (11952)			
2013	.	.	.
2012	0	0.01	0.00 (0.00–394.22)
2011	.	.	.
2010	.	.	.
2009	.	.	.
OHIO VALLEY GENERAL HOSPITAL (12298)			
2013	.	.	.
2012	.	.	.
2011	.	.	.
2010	0	0.01	0.00 (0.00–349.76)
2009	.	.	.
MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)			
2013	0	0.01	0.00 (0.00–503.45)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
UPMC EAST (28812)			
2013	0	0.01	0.00 (0.00–503.45)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
UPMC HORIZON (11675)			
2013	0	0.01	0.00 (0.00–251.72)
2012	0	0.04	0.00 (0.00–98.56)
2011	0	0.05	0.00 (0.00–78.91)
2010	.	.	.
2009	.	.	.
LOWER BUCKS HOSPITAL (12390)			
2013	0	0.03	0.00 (0.00–125.86)
2012	0	0.07	0.00 (0.00–55.32)
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)
UPMC MCKEESPORT (11707)			
2013	0	0.04	0.00 (0.00–100.69)
2012	0	0.01	0.00 (0.00–394.22)
2011	0	0.01	0.00 (0.00–315.62)
2010	.	.	.
2009	.	.	.
THE GOOD SAMARITAN HOSPITAL (11712)			
2013	0	0.04	0.00 (0.00–81.64)
2012	0	0.01	0.00 (0.00–394.22)
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)

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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 ST MARGARET (11561)			
2013	0	0.05	0.00 (0.00–68.14)
2012	0	0.09	0.00 (0.00–39.42)
2011	0	0.00	0.00 (0.00–3,668.10)
2010	.	.	.
2009	.	.	.
SHARON REGIONAL HEALTH SYSTEM (12250)			
2013	0	0.06	0.00 (0.00–64.73)
2012	0	0.16	0.00 (0.00–22.85)
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)
MAIN LINE HOSPITAL — PAOLI (11750)			
2013	0	0.06	0.00 (0.00–57.35)
2012	0	0.14	0.00 (0.00–26.56)
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)
THE WESTERN PENNSYLVANIA HOSPITAL (11864)			
2013	0	0.08	0.00 (0.00–46.71)
2012	.	.	.
2011	.	.	.
2010	2	0.88	2.28 (0.26–8.23)
2009	0	1.59	0.00 (0.00–2.31)
JEANES HOSPITAL (11459)			
2013	0	0.16	0.00 (0.00–23.60)
2012	0	0.11	0.00 (0.00–32.30)
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)
DUBOIS REGIONAL MEDICAL CENTER (11606)			
2013	0	0.16	0.00 (0.00–22.94)
2012	1	0.39	2.55 (0.03–14.20)
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)
THE WASHINGTON HOSPITAL (11460)			
2013	0	0.21	0.00 (0.00–17.73)
2012	0	0.33	0.00 (0.00–11.26)
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)
CROZER CHESTER MEDICAL CENTER (11839)			
2013	0	0.21	0.00 (0.00–17.66)
2012	0	0.49	0.00 (0.00–7.45)
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)
MERCY FITZGERALD HOSPITAL (11683)			
2013	0	0.22	0.00 (0.00–16.42)
2012	0	0.26	0.00 (0.00–14.03)
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)

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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)
MAIN LINE HOSPITAL BRYN MAWR (11753)			
2013	0	0.24	0.00 (0.00–15.54)
2012	0	0.36	0.00 (0.00–10.22)
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)
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)			
2013	0	0.26	0.00 (0.00–14.09)
2012	0	0.32	0.00 (0.00–11.46)
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)
BRANDYWINE HOSPITAL (11979)			
2013	0	0.26	0.00 (0.00–13.92)
2012	1	0.17	5.79 (0.08–32.21)
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)
EASTON HOSPITAL (11929)			
2013	0	0.27	0.00 (0.00–13.75)
2012	1	0.39	2.55 (0.03–14.19)
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)
LANCASTER REGIONAL MEDICAL CENTER (12335)			
2013	0	0.27	0.00 (0.00–13.59)
2012	1	0.20	5.06 (0.07–28.18)
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)
POCONO MEDICAL CENTER (11772)			
2013	0	0.29	0.00 (0.00–12.55)
2012	1	0.23	4.28 (0.06–23.80)
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)
CHESTER COUNTY HOSPITAL (12016)			
2013	0	0.30	0.00 (0.00–12.43)
2012	1	0.61	1.64 (0.02–9.11)
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)
ALBERT EINSTEIN MEDICAL CENTER (10585)			
2013	0	0.30	0.00 (0.00–12.18)
2012	1	0.22	4.48 (0.06–24.95)
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)
HAHNEMANN UNIVERSITY HOSPITAL (11437)			
2013	0	0.34	0.00 (0.00–10.93)
2012	1	0.57	1.76 (0.02–9.80)
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)

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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)
EINSTEIN MEDICAL CENTER MONTGOMERY (30210)			
2013	0	0.36	0.00 (0.00–10.24)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
ST. CLAIR MEMORIAL HOSPITAL (10561)			
2013	0	0.36	0.00 (0.00–10.11)
2012	1	0.53	1.90 (0.02–10.59)
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)
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)			
2013	0	0.37	0.00 (0.00–9.93)
2012	0	0.39	0.00 (0.00–9.39)
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)
WILKES-BARRE GENERAL HOSPITAL (11916)			
2013	0	0.40	0.00 (0.00–9.23)
2012	0	0.50	0.00 (0.00–7.34)
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)
ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)			
2013	0	0.42	0.00 (0.00–8.75)
2012	2	0.50	4.02 (0.45–14.51)
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)
PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS (11448)			
2013	2	0.42	4.72 (0.53–17.05)
2012	0	0.37	0.00 (0.00–9.97)
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)
HOLY SPIRIT HOSPITAL (12387)			
2013	0	0.42	0.00 (0.00–8.66)
2012	0	0.63	0.00 (0.00–5.84)
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)
ARIA HEALTH (11388)			
2013	0	0.44	0.00 (0.00–8.32)
2012	2	0.62	3.23 (0.36–11.66)
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)
LEHIGH VALLEY HOSPITAL — MUHLENBERG (11898)			
2013	1	0.46	2.16 (0.03–12.02)
2012	0	0.42	0.00 (0.00–8.77)
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)

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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-COMMUNITY MEDICAL CENTER (11914)			
2013	0	0.60	0.00 (0.00–6.13)
2012	0	0.48	0.00 (0.00–7.69)
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)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)			
2013	0	0.61	0.00 (0.00–6.03)
2012	0	0.39	0.00 (0.00–9.51)
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)
ST. JOSEPH MEDICAL CENTER (11961)			
2013	3	0.61	4.90 (0.99–14.32)
2012	1	0.65	1.54 (0.02–8.59)
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)
ST. MARY MEDICAL CENTER (11885)			
2013	0	0.66	0.00 (0.00–5.53)
2012	1	0.78	1.28 (0.02–7.10)
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)
DOYLESTOWN HOSPITAL (10190)			
2013	1	0.70	1.43 (0.02–7.93)
2012	1	0.98	1.02 (0.01–5.67)
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)
FORBES REGIONAL HOSPITAL (11265)			
2013	0	0.74	0.00 (0.00–4.97)
2012	2	0.80	2.51 (0.28–9.06)
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)
BUTLER MEMORIAL HOSPITAL (11736)			
2013	0	0.74	0.00 (0.00–4.93)
2012	0	0.49	0.00 (0.00–7.55)
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)
HERITAGE VALLEY BEAVER (11831)			
2013	0	0.76	0.00 (0.00–4.82)
2012	1	0.79	1.26 (0.02–7.03)
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)
REGIONAL HOSPITAL OF SCRANTON (12533)			
2013	0	0.82	0.00 (0.00–4.49)
2012	0	1.22	0.00 (0.00–3.01)
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)

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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)
ROBERT PACKER HOSPITAL (12422)			
2013	1	0.84	1.19 (0.02–6.61)
2012	0	1.19	0.00 (0.00–3.08)
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)
UPMC MERCY (10384)			
2013	0	0.84	0.00 (0.00–4.35)
2012	2	1.12	1.78 (0.20–6.42)
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)
ST. LUKES HOSPITAL BETHLEHEM (11718)			
2013	0	0.85	0.00 (0.00–4.34)
2012	2	1.05	1.90 (0.21–6.87)
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)
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)			
2013	0	0.86	0.00 (0.00–4.27)
2012	0	0.95	0.00 (0.00–3.87)
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)
CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)			
2013	1	0.87	1.15 (0.02–6.41)
2012	0	1.06	0.00 (0.00–3.47)
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)
READING HOSPITAL AND MEDICAL CENTER (12375)			
2013	0	0.95	0.00 (0.00–3.86)
2012	1	0.81	1.24 (0.02–6.90)
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)
UPMC PASSAVANT (11242)			
2013	0	0.95	0.00 (0.00–3.85)
2012	0	1.50	0.00 (0.00–2.45)
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)
ALTOONA REGIONAL HEALTH SYSTEM (10178)			
2013	1	1.03	0.97 (0.01–5.39)
2012	2	0.99	2.01 (0.23–7.26)
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)
ST. VINCENT HEALTH CENTER (11699)			
2013	0	1.07	0.00 (0.00–3.43)
2012	1	1.42	0.70 (0.01–3.92)
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)

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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)
JEFFERSON REGIONAL MEDICAL CENTER (10237)			
2013	2	1.10	1.81 (0.20–6.54)
2012	0	1.32	0.00 (0.00–2.78)
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)
UPMC HAMOT (11725)			
2013	1	1.15	0.87 (0.01–4.83)
2012	0	0.89	0.00 (0.00–4.14)
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)
LANCASTER GENERAL HOSPITAL (10183)			
2013	3	1.16	2.60 (0.52–7.58)
2012	1	0.99	1.01 (0.01–5.61)
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)
THOMAS JEFFERSON UNIV HOSPITAL (11506)			
2013	2	1.19	1.68 (0.19–6.07)
2012	1	1.38	0.72 (0.01–4.02)
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)
ABINGTON MEMORIAL HOSPITAL (11838)			
2013	0	1.20	0.00 (0.00–3.07)
2012	1	1.06	0.94 (0.01–5.26)
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)
CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)			
2013	2	1.45	1.38 (0.16–5.00)
2012	4	1.87	2.14 (0.57–5.47)
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)
TEMPLE UNIVERSITY HOSPITAL (12382)			
2013	4	1.72	2.33 (0.63–5.96)
2012	1	1.62	0.62 (0.01–3.43)
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)
YORK HOSPITAL (10108)			
2013	1	1.75	0.57 (0.01–3.17)
2012	1	2.18	0.46 (0.01–2.55)
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)
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)			
2013	1	1.83	0.55 (0.01–3.04)
2012	5	2.23	2.24 (0.72–5.23)
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)

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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)
PINNACLE HEALTH HOSPITALS (10122)			
2013	2	2.08	0.96 (0.11–3.47)
2012	3	2.33	1.29 (0.26–3.76)
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)
MILTON S HERSHEY MEDICAL CENTER (11747)			
2013	6	2.40	2.50 (0.91–5.45)
2012	2	3.59	0.56 (0.06–2.01)
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)
ALLEGHENY GENERAL HOSPITAL (10648)			
2013	2	2.52	0.79 (0.09–2.87)
2012	0	2.85	0.00 (0.00–1.29)
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)
LEHIGH VALLEY HOSPITAL (11884)			
2013	3	2.78	1.08 (0.22–3.15)
2012	1	3.29	0.30 (0.00–1.69)
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)
GEISINGER MEDICAL CENTER (11775)			
2013	5	2.78	1.80 (0.58–4.19)
2012	1	3.22	0.31 (0.00–1.73)
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)
PENN PRESBYTERIAN MEDICAL CENTER (11814)			
2013	3	2.90	1.03 (0.21–3.02)
2012	2	3.07	0.65 (0.07–2.36)
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)
UPMC PRESBYTERIAN SHADYSIDE — PRESBYTERIAN (10348)			
2013	5	3.70	1.35 (0.44–3.15)
2012	1	4.20	0.24 (0.00–1.33)
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)
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)			
2013	8	3.73	2.14 (0.92–4.22)
2012	16	5.15	3.11 (1.77–5.05)
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)
UPMC PRESBYTERIAN SHADYSIDE — SHADYSIDE (10118)			
2013	3	3.92	0.77 (0.15–2.24)
2012	2	4.18	0.48 (0.05–1.73)
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)

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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)
HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)			
2013	7	8.61	0.81 (0.33–1.67)
2012	12	9.79	1.23 (0.63–2.14)
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)

Table 4.5.9: Rate (SIR) of Surgical Site Infections (SSIs) Associated with Coronary Bypass Surgery With Two Incisions (CBGB) by Hospital — Pennsylvania, 2009–2013

	Number of SSIs (CBGB)	Predicted Number of SSIs (CBGB)	SIR (95% CI)
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)			
2013	0	0.02	0.00 (0.00–241.54)
2012	.	.	.
2011	.	.	.
2010	0	0.02	0.00 (0.00–209.85)
2009	.	.	.
LOWER BUCKS HOSPITAL (12390)			
2013	0	0.02	0.00 (0.00–168.32)
2012	0	0.78	0.00 (0.00–4.71)
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)
THE WESTERN PENNSYLVANIA HOSPITAL (11864)			
2013	1	0.35	2.83 (0.04–15.72)
2012	.	.	.
2011	.	.	.
2010	3	2.36	1.27 (0.26–3.72)
2009	6	4.44	1.35 (0.49–2.94)
MERCY FITZGERALD HOSPITAL (11683)			
2013	0	0.37	0.00 (0.00–10.05)
2012	0	0.59	0.00 (0.00–6.17)
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)
HOLY SPIRIT HOSPITAL (12387)			
2013	0	0.37	0.00 (0.00–9.81)
2012	2	1.34	1.50 (0.17–5.41)
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)
SHARON REGIONAL HEALTH SYSTEM (12250)			
2013	1	0.65	1.53 (0.02–8.53)
2012	0	1.03	0.00 (0.00–3.55)
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)
MAIN LINE HOSPITAL — PAOLI (11750)			
2013	0	0.75	0.00 (0.00–4.89)
2012	0	0.86	0.00 (0.00–4.27)
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)
LANCASTER REGIONAL MEDICAL CENTER (12335)			
2013	0	0.78	0.00 (0.00–4.72)
2012	3	1.10	2.72 (0.55–7.94)
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)
HAHNEMANN UNIVERSITY HOSPITAL (11437)			
2013	1	0.78	1.28 (0.02–7.10)
2012	2	1.20	1.66 (0.19–6.00)
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)

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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)
EASTON HOSPITAL (11929)			
2013	3	0.85	3.53 (0.71–10.32)
2012	2	2.23	0.90 (0.10–3.24)
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)
MAIN LINE HOSPITAL BRYN MAWR (11753)			
2013	0	0.88	0.00 (0.00–4.17)
2012	0	1.35	0.00 (0.00–2.73)
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)
BRANDYWINE HOSPITAL (11979)			
2013	5	1.04	4.80 (1.55–11.21)
2012	4	1.21	3.32 (0.89–8.49)
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)
CROZER CHESTER MEDICAL CENTER (11839)			
2013	3	1.16	2.59 (0.52–7.58)
2012	3	1.48	2.03 (0.41–5.93)
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)
JEANES HOSPITAL (11459)			
2013	0	1.21	0.00 (0.00–3.04)
2012	0	1.37	0.00 (0.00–2.68)
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)
EINSTEIN MEDICAL CENTER MONTGOMERY (30210)			
2013	2	1.22	1.64 (0.18–5.91)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
LEHIGH VALLEY HOSPITAL — MUHLENBERG (11898)			
2013	1	1.24	0.81 (0.01–4.50)
2012	3	1.78	1.69 (0.34–4.94)
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)
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)			
2013	2	1.27	1.57 (0.18–5.67)
2012	4	1.49	2.69 (0.72–6.89)
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)
DUBOIS REGIONAL MEDICAL CENTER (11606)			
2013	0	1.28	0.00 (0.00–2.87)
2012	1	2.33	0.43 (0.01–2.39)
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)

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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)
DOYLESTOWN HOSPITAL (10190)			
2013	1	1.29	0.77 (0.01–4.30)
2012	2	2.15	0.93 (0.10–3.36)
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)
ALBERT EINSTEIN MEDICAL CENTER (10585)			
2013	1	1.30	0.77 (0.01–4.29)
2012	4	2.06	1.94 (0.52–4.97)
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)
PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS (11448)			
2013	1	1.32	0.76 (0.01–4.21)
2012	2	1.66	1.20 (0.14–4.35)
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)			
2013	3	1.45	2.07 (0.42–6.04)
2012	4	1.90	2.11 (0.57–5.40)
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)
CHESTER COUNTY HOSPITAL (12016)			
2013	0	1.50	0.00 (0.00–2.45)
2012	1	1.91	0.52 (0.01–2.91)
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)
ST. CLAIR MEMORIAL HOSPITAL (10561)			
2013	0	1.52	0.00 (0.00–2.41)
2012	1	2.33	0.43 (0.01–2.39)
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)
POCONO MEDICAL CENTER (11772)			
2013	3	1.63	1.84 (0.37–5.38)
2012	1	2.43	0.41 (0.01–2.29)
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)
ROBERT PACKER HOSPITAL (12422)			
2013	6	1.69	3.56 (1.30–7.74)
2012	3	2.13	1.41 (0.28–4.11)
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)
THE WASHINGTON HOSPITAL (11460)			
2013	0	1.71	0.00 (0.00–2.14)
2012	0	1.69	0.00 (0.00–2.18)
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)

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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)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)			
2013	1	1.76	0.57 (0.01–3.16)
2012	1	1.61	0.62 (0.01–3.46)
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)
THE GOOD SAMARITAN HOSPITAL (11712)			
2013	0	1.91	0.00 (0.00–1.92)
2012	3	1.95	1.54 (0.31–4.51)
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)
REGIONAL HOSPITAL OF SCRANTON (12533)			
2013	1	2.05	0.49 (0.01–2.71)
2012	2	2.52	0.79 (0.09–2.87)
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)
THOMAS JEFFERSON UNIV HOSPITAL (11506)			
2013	3	2.11	1.42 (0.29–4.16)
2012	6	3.45	1.74 (0.64–3.79)
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 MERCY (10384)			
2013	1	2.15	0.47 (0.01–2.59)
2012	3	3.12	0.96 (0.19–2.81)
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)
ABINGTON MEMORIAL HOSPITAL (11838)			
2013	2	2.17	0.92 (0.10–3.33)
2012	4	3.75	1.07 (0.29–2.73)
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)
ALTOONA REGIONAL HEALTH SYSTEM (10178)			
2013	0	2.20	0.00 (0.00–1.67)
2012	5	2.70	1.85 (0.60–4.32)
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)
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)			
2013	1	2.24	0.45 (0.01–2.49)
2012	3	2.36	1.27 (0.26–3.71)
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)
GEISINGER-COMMUNITY MEDICAL CENTER (11914)			
2013	3	2.31	1.30 (0.26–3.80)
2012	0	0.59	0.00 (0.00–6.27)
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)

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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)
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)			
2013	0	2.31	0.00 (0.00–1.59)
2012	0	2.81	0.00 (0.00–1.30)
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)
CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)			
2013	3	2.36	1.27 (0.26–3.71)
2012	1	3.72	0.27 (0.00–1.50)
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)
ST. LUKES HOSPITAL BETHLEHEM (11718)			
2013	0	2.39	0.00 (0.00–1.54)
2012	3	2.74	1.10 (0.22–3.20)
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)
HERITAGE VALLEY BEAVER (11831)			
2013	8	2.45	3.27 (1.41–6.44)
2012	6	3.03	1.98 (0.72–4.30)
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)
ARIA HEALTH (11388)			
2013	0	2.71	0.00 (0.00–1.35)
2012	3	2.80	1.07 (0.21–3.13)
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)
MILTON S HERSHEY MEDICAL CENTER (11747)			
2013	5	2.76	1.81 (0.58–4.23)
2012	2	4.95	0.40 (0.05–1.46)
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)
FORBES REGIONAL HOSPITAL (11265)			
2013	1	2.82	0.35 (0.00–1.97)
2012	5	2.71	1.84 (0.59–4.31)
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)
READING HOSPITAL AND MEDICAL CENTER (12375)			
2013	2	3.00	0.67 (0.07–2.41)
2012	3	3.62	0.83 (0.17–2.42)
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)
UPMC PASSAVANT (11242)			
2013	1	3.02	0.33 (0.00–1.84)
2012	2	4.14	0.48 (0.05–1.74)
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)

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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)
TEMPLE UNIVERSITY HOSPITAL (12382)			
2013	2	3.08	0.65 (0.07–2.35)
2012	2	3.97	0.50 (0.06–1.82)
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)
WILKES-BARRE GENERAL HOSPITAL (11916)			
2013	2	3.10	0.65 (0.07–2.33)
2012	3	3.84	0.78 (0.16–2.28)
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)
ST. MARY MEDICAL CENTER (11885)			
2013	3	3.12	0.96 (0.19–2.81)
2012	3	2.72	1.10 (0.22–3.22)
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)
PENN PRESBYTERIAN MEDICAL CENTER (11814)			
2013	4	3.32	1.20 (0.32–3.08)
2012	5	4.41	1.13 (0.37–2.65)
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)
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)			
2013	3	3.52	0.85 (0.17–2.49)
2012	3	4.78	0.63 (0.13–1.83)
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)
PINNACLE HEALTH HOSPITALS (10122)			
2013	1	3.73	0.27 (0.00–1.49)
2012	3	5.49	0.55 (0.11–1.60)
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)
ALLEGHENY GENERAL HOSPITAL (10648)			
2013	1	3.87	0.26 (0.00–1.44)
2012	7	5.20	1.35 (0.54–2.77)
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)
UPMC HAMOT (11725)			
2013	9	3.98	2.26 (1.03–4.30)
2012	7	5.01	1.40 (0.56–2.88)
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)
UPMC PRESBYTERIAN SHADYSIDE — PRESBYTERIAN (10348)			
2013	4	4.22	0.95 (0.26–2.43)
2012	3	5.22	0.57 (0.12–1.68)
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)

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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)
JEFFERSON REGIONAL MEDICAL CENTER (10237)			
2013	3	4.24	0.71 (0.14–2.07)
2012	2	5.89	0.34 (0.04–1.23)
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)
ST. VINCENT HEALTH CENTER (11699)			
2013	2	4.39	0.46 (0.05–1.64)
2012	6	6.53	0.92 (0.34–2.00)
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)
GEISINGER MEDICAL CENTER (11775)			
2013	5	4.49	1.11 (0.36–2.60)
2012	8	4.89	1.64 (0.70–3.23)
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)
BUTLER MEMORIAL HOSPITAL (11736)			
2013	9	4.55	1.98 (0.90–3.76)
2012	8	5.48	1.46 (0.63–2.88)
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)
LEHIGH VALLEY HOSPITAL (11884)			
2013	4	5.28	0.76 (0.20–1.94)
2012	7	7.49	0.93 (0.37–1.93)
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)
YORK HOSPITAL (10108)			
2013	12	5.67	2.12 (1.09–3.70)
2012	7	6.81	1.03 (0.41–2.12)
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)
HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)			
2013	8	5.73	1.40 (0.60–2.75)
2012	7	8.05	0.87 (0.35–1.79)
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)
LANCASTER GENERAL HOSPITAL (10183)			
2013	6	6.54	0.92 (0.33–2.00)
2012	9	7.48	1.20 (0.55–2.28)
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)
UPMC PRESBYTERIAN SHADYSIDE — SHADYSIDE (10118)			
2013	7	7.83	0.89 (0.36–1.84)
2012	9	8.80	1.02 (0.47–1.94)
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)

Table 4.5.10: Rate (SIR) of Surgical Site Infections (SSIs) Associated with Coronary Bypass Surgery With One Incision (CBGC) by Hospital — Pennsylvania, 2009–2013

	Number of SSIs (CBGC)	Predicted Number of SSIs (CBGC)	SIR (95% CI)
YORK HOSPITAL (10108)			
2013	.	.	.
2012	0	0.21	0.00 (0.00–17.48)
2011	.	.	.
2010	.	.	.
2009	0	0.61	0.00 (0.00–6.00)
MAIN LINE HOSPITAL BRYN MAWR (11753)			
2013	.	.	.
2012	0	0.08	0.00 (0.00–48.08)
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)
LOWER BUCKS HOSPITAL (12390)			
2013	.	.	.
2012	0	0.02	0.00 (0.00–173.01)
2011	.	.	.
2010	0	0.08	0.00 (0.00–47.99)
2009	0	0.41	0.00 (0.00–8.86)
ALTOONA REGIONAL HEALTH SYSTEM (10178)			
2013	0	0.01	0.00 (0.00–341.95)
2012	1	0.02	52.43 (0.69–291.71)
2011	.	.	.
2010	0	0.01	0.00 (0.00–266.30)
2009	.	.	.
ST. CLAIR MEMORIAL HOSPITAL (10561)			
2013	0	0.02	0.00 (0.00–170.97)
2012	0	0.10	0.00 (0.00–38.46)
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)
MAIN LINE HOSPITAL — PAOLI (11750)			
2013	0	0.02	0.00 (0.00–170.97)
2012	0	0.06	0.00 (0.00–64.10)
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)
JEFFERSON REGIONAL MEDICAL CENTER (10237)			
2013	0	0.03	0.00 (0.00–113.98)
2012	0	0.12	0.00 (0.00–31.47)
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)

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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)
TEMPLE UNIVERSITY HOSPITAL (12382)			
2013	1	0.03	31.07 (0.41–172.89)
2012	1	0.33	3.02 (0.04–16.83)
2011	.	.	.
2010	0	0.12	0.00 (0.00–29.59)
2009	1	0.04	24.42 (0.32–135.85)
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)			
2013	0	0.04	0.00 (0.00–100.41)
2012	0	0.14	0.00 (0.00–26.62)
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)
WILKES-BARRE GENERAL HOSPITAL (11916)			
2013	0	0.04	0.00 (0.00–85.49)
2012	0	0.10	0.00 (0.00–37.62)
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)
EINSTEIN MEDICAL CENTER MONTGOMERY (30210)			
2013	0	0.04	0.00 (0.00–85.49)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
ST. JOSEPH MEDICAL CENTER (11961)			
2013	1	0.05	21.16 (0.28–117.74)
2012	0	0.12	0.00 (0.00–31.47)
2011	0	0.03	0.00 (0.00–108.85)
2010	0	0.01	0.00 (0.00–266.30)
2009	.	.	.
UPMC MERCY (10384)			
2013	0	0.05	0.00 (0.00–68.39)
2012	2	0.27	7.37 (0.83–26.62)
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)
HAHNEMANN UNIVERSITY HOSPITAL (11437)			
2013	0	0.05	0.00 (0.00–68.39)
2012	0	0.11	0.00 (0.00–32.05)
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)			
2013	0	0.06	0.00 (0.00–63.26)
2012	0	0.02	0.00 (0.00–192.31)
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)
BUTLER MEMORIAL HOSPITAL (11736)			
2013	0	0.06	0.00 (0.00–63.26)
2012	1	0.18	5.68 (0.07–31.63)
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)

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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)
DOYLESTOWN HOSPITAL (10190)			
2013	0	0.06	0.00 (0.00–56.99)
2012	0	0.15	0.00 (0.00–23.71)
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)
DUBOIS REGIONAL MEDICAL CENTER (11606)			
2013	0	0.06	0.00 (0.00–56.99)
2012	0	0.15	0.00 (0.00–24.04)
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)
BRANDYWINE HOSPITAL (11979)			
2013	1	0.06	15.54 (0.20–86.45)
2012	0	0.08	0.00 (0.00–48.08)
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)
THE GOOD SAMARITAN HOSPITAL (11712)			
2013	0	0.07	0.00 (0.00–53.38)
2012	0	0.06	0.00 (0.00–59.67)
2011	.	.	.
2010	0	0.01	0.00 (0.00–287.95)
2009	0	0.06	0.00 (0.00–59.26)
JEANES HOSPITAL (11459)			
2013	0	0.07	0.00 (0.00–50.21)
2012	.	.	.
2011	0	0.03	0.00 (0.00–138.26)
2010	.	.	.
2009	0	0.05	0.00 (0.00–67.17)
UPMC HAMOT (11725)			
2013	0	0.08	0.00 (0.00–46.18)
2012	4	2.73	1.47 (0.39–3.75)
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)
ALBERT EINSTEIN MEDICAL CENTER (10585)			
2013	0	0.09	0.00 (0.00–42.74)
2012	0	0.10	0.00 (0.00–38.46)
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)
ARIA HEALTH (11388)			
2013	0	0.09	0.00 (0.00–42.74)
2012	1	0.31	3.23 (0.04–17.98)
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)
FORBES REGIONAL HOSPITAL (11265)			
2013	0	0.09	0.00 (0.00–40.68)
2012	0	0.61	0.00 (0.00–6.03)
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)

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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)
CHESTER COUNTY HOSPITAL (12016)			
2013	0	0.09	0.00 (0.00–38.81)
2012	0	0.12	0.00 (0.00–31.47)
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)
THE WASHINGTON HOSPITAL (11460)			
2013	0	0.10	0.00 (0.00–37.99)
2012	0	0.70	0.00 (0.00–5.28)
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)
ROBERT PACKER HOSPITAL (12422)			
2013	0	0.10	0.00 (0.00–37.99)
2012	0	0.18	0.00 (0.00–20.85)
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)
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)			
2013	0	0.11	0.00 (0.00–34.85)
2012	0	0.14	0.00 (0.00–27.04)
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)
HERITAGE VALLEY BEAVER (11831)			
2013	0	0.11	0.00 (0.00–32.86)
2012	1	0.33	3.06 (0.04–17.05)
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)
LEHIGH VALLEY HOSPITAL — MUHLENBERG (11898)			
2013	0	0.13	0.00 (0.00–27.99)
2012	0	0.10	0.00 (0.00–37.62)
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)
REGIONAL HOSPITAL OF SCRANTON (12533)			
2013	0	0.13	0.00 (0.00–27.99)
2012	0	0.22	0.00 (0.00–16.64)
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)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)			
2013	0	0.15	0.00 (0.00–25.10)
2012	1	0.02	52.43 (0.69–291.71)
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)
CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)			
2013	3	0.15	19.98 (4.01–58.37)
2012	0	0.31	0.00 (0.00–12.02)
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)

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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)
SHARON REGIONAL HEALTH SYSTEM (12250)			
2013	0	0.15	0.00 (0.00–24.05)
2012	0	0.10	0.00 (0.00–36.05)
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)
POCONO MEDICAL CENTER (11772)			
2013	0	0.18	0.00 (0.00–20.84)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
ST. VINCENT HEALTH CENTER (11699)			
2013	0	0.18	0.00 (0.00–20.57)
2012	1	0.30	3.32 (0.04–18.48)
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)
THE WESTERN PENNSYLVANIA HOSPITAL (11864)			
2013	0	0.21	0.00 (0.00–17.79)
2012	.	.	.
2011	.	.	.
2010	0	0.10	0.00 (0.00–38.46)
2009	0	0.13	0.00 (0.00–28.89)
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)			
2013	0	0.22	0.00 (0.00–16.43)
2012	0	0.21	0.00 (0.00–17.14)
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)
ST. MARY MEDICAL CENTER (11885)			
2013	0	0.23	0.00 (0.00–16.12)
2012	0	0.19	0.00 (0.00–19.23)
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)
UPMC PASSAVANT (11242)			
2013	0	0.23	0.00 (0.00–15.95)
2012	1	0.24	4.25 (0.06–23.65)
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)
ABINGTON MEMORIAL HOSPITAL (11838)			
2013	1	0.24	4.09 (0.05–22.74)
2012	0	0.06	0.00 (0.00–59.67)
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)
LANCASTER REGIONAL MEDICAL CENTER (12335)			
2013	0	0.25	0.00 (0.00–14.59)
2012	0	0.19	0.00 (0.00–19.66)
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)

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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)
MILTON S HERSHEY MEDICAL CENTER (11747)			
2013	0	0.25	0.00 (0.00–14.48)
2012	1	0.27	3.66 (0.05–20.35)
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)
PENN PRESBYTERIAN MEDICAL CENTER (11814)			
2013	0	0.28	0.00 (0.00–13.14)
2012	2	0.35	5.72 (0.64–20.65)
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)
GEISINGER-COMMUNITY MEDICAL CENTER (11914)			
2013	0	0.31	0.00 (0.00–11.70)
2012	2	2.09	0.96 (0.11–3.46)
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)
THOMAS JEFFERSON UNIV HOSPITAL (11506)			
2013	1	0.33	3.02 (0.04–16.82)
2012	1	0.25	4.07 (0.05–22.63)
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)
LEHIGH VALLEY HOSPITAL (11884)			
2013	0	0.38	0.00 (0.00–9.71)
2012	0	0.76	0.00 (0.00–4.85)
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. LUKES HOSPITAL BETHLEHEM (11718)			
2013	0	0.40	0.00 (0.00–9.09)
2012	0	0.11	0.00 (0.00–32.05)
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)
CROZER CHESTER MEDICAL CENTER (11839)			
2013	0	0.40	0.00 (0.00–9.09)
2012	0	0.56	0.00 (0.00–6.53)
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)
MERCY FITZGERALD HOSPITAL (11683)			
2013	0	0.41	0.00 (0.00–8.90)
2012	0	0.37	0.00 (0.00–10.00)
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)
UPMC PRESBYTERIAN SHADYSIDE — SHADYSIDE (10118)			
2013	0	0.47	0.00 (0.00–7.73)
2012	2	1.15	1.73 (0.19–6.26)
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)

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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)
GEISINGER MEDICAL CENTER (11775)			
2013	0	0.49	0.00 (0.00–7.49)
2012	0	0.53	0.00 (0.00–6.95)
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)
READING HOSPITAL AND MEDICAL CENTER (12375)			
2013	0	0.57	0.00 (0.00–6.40)
2012	0	0.26	0.00 (0.00–14.07)
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)
LANCASTER GENERAL HOSPITAL (10183)			
2013	1	0.65	1.55 (0.02–8.61)
2012	2	0.75	2.66 (0.30–9.60)
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)
PINNACLE HEALTH HOSPITALS (10122)			
2013	2	0.77	2.59 (0.29–9.35)
2012	0	1.01	0.00 (0.00–3.63)
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)
EASTON HOSPITAL (11929)			
2013	0	0.80	0.00 (0.00–4.59)
2012	0	0.21	0.00 (0.00–17.30)
2011	0	0.03	0.00 (0.00–138.26)
2010	.	.	.
2009	.	.	.
ALLEGHENY GENERAL HOSPITAL (10648)			
2013	3	0.85	3.51 (0.71–10.26)
2012	0	0.96	0.00 (0.00–3.84)
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)
UPMC PRESBYTERIAN SHADYSIDE — PRESBYTERIAN (10348)			
2013	2	0.90	2.23 (0.25–8.04)
2012	0	0.62	0.00 (0.00–5.89)
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)
HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)			
2013	1	0.95	1.06 (0.01–5.87)
2012	1	0.29	3.42 (0.04–19.02)
2011	.	.	.
2010	2	0.19	10.72 (1.20–38.69)
2009	2	0.07	30.73 (3.45–110.96)
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)			
2013	0	1.71	0.00 (0.00–2.14)
2012	0	2.55	0.00 (0.00–1.44)
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)

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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)
HOLY SPIRIT HOSPITAL (12387)			
2013	0	1.92	0.00 (0.00–1.91)
2012	2	4.48	0.45 (0.05–1.61)
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)

Table 4.5.11: Rate (SIR) of Surgical Site Infections (SSIs) Associated with Knee Arthroplasty (KPRO) by Hospital — Pennsylvania, 2009–2013

	Number of SSIs (KPRO)	Predicted Number of SSIs (KPRO)	SIR (95% CI)
EXCELA HEALTH FRICK HOSPITAL (11639)			
2013	.	.	.
2012	.	.	.
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)
LOCK HAVEN HOSPITAL (12097)			
2013	.	.	.
2012	0	0.10	0.00 (0.00–38.60)
2011	0	0.14	0.00 (0.00–25.33)
2010	0	0.04	0.00 (0.00–82.98)
2009	.	.	.
SHRINERS HOSPITAL FOR CHILDREN — PHILADELPHIA (12244)			
2013	.	.	.
2012	.	.	.
2011	0	0.02	0.00 (0.00–212.80)
2010	.	.	.
2009	.	.	.
EASTERN REGIONAL MEDICAL CENTER (12348)			
2013	.	.	.
2012	0	0.02	0.00 (0.00–171.12)
2011	0	0.01	0.00 (0.00–425.61)
2010	.	.	.
2009	.	.	.
BARNES-KASSON COUNTY HOSPITAL (12404)			
2013	.	.	.
2012	.	.	.
2011	0	0.06	0.00 (0.00–60.86)
2010	0	0.03	0.00 (0.00–117.96)
2009	.	.	.
BROOKVILLE HOSPITAL (12418)			
2013	.	.	.
2012	.	.	.
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)
BARIX CLINICS OF PENNSYLVANIA (12037)			
2013	0	0.01	0.00 (0.00–535.44)
2012	0	0.05	0.00 (0.00–75.29)
2011	.	.	.
2010	.	.	.
2009	.	.	.
HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)			
2013	0	0.02	0.00 (0.00–171.34)
2012	0	0.04	0.00 (0.00–85.56)
2011	.	.	.
2010	.	.	.
2009	.	.	.
TYLER MEMORIAL HOSPITAL (11829)			
2013	0	0.02	0.00 (0.00–171.34)
2012	0	0.03	0.00 (0.00–145.02)
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)

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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)
ST. JOSEPHS HOSPITAL (12438)			
2013	0	0.03	0.00 (0.00–125.99)
2012	0	0.02	0.00 (0.00–171.12)
2011	.	.	.
2010	.	.	.
2009	.	.	.
MINERS MEDICAL CENTER (12295)			
2013	0	0.04	0.00 (0.00–101.99)
2012	0	0.09	0.00 (0.00–39.25)
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)
HIGHLANDS HOSPITAL (11902)			
2013	0	0.05	0.00 (0.00–76.49)
2012	0	0.05	0.00 (0.00–78.31)
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)
UPMC BEDFORD (11680)			
2013	0	0.05	0.00 (0.00–70.74)
2012	1	0.26	3.89 (0.05–21.65)
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)
ST. LUKES HOSPITAL ANDERSON CAMPUS (21487)			
2013	0	0.06	0.00 (0.00–63.93)
2012	0	0.07	0.00 (0.00–50.93)
2011	.	.	.
2010	.	.	.
2009	.	.	.
ALBERT EINSTEIN MEDICAL CENTER (10585)			
2013	0	0.06	0.00 (0.00–57.89)
2012	0	0.43	0.00 (0.00–8.47)
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)
JERSEY SHORE HOSPITAL (11689)			
2013	0	0.11	0.00 (0.00–34.75)
2012	0	0.15	0.00 (0.00–24.17)
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 PRESBYTERIAN SHADYSIDE — PRESBYTERIAN (10348)			
2013	1	0.11	8.71 (0.11–48.49)
2012	1	0.26	3.89 (0.05–21.62)
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)
KANE COMMUNITY HOSPITAL (12111)			
2013	1	0.13	7.54 (0.10–41.96)
2012	0	0.05	0.00 (0.00–71.50)
2011	0	0.20	0.00 (0.00–18.25)
2010	.	.	.
2009	0	0.24	0.00 (0.00–15.42)

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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)
ST. LUKES QUAKERTOWN HOSPITAL (11711)			
2013	0	0.14	0.00 (0.00–26.46)
2012	0	0.23	0.00 (0.00–16.25)
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)
TITUSVILLE AREA HOSPITAL (11738)			
2013	0	0.15	0.00 (0.00–25.09)
2012	0	0.39	0.00 (0.00–9.49)
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)
JENNERSVILLE REGIONAL HOSPITAL (12337)			
2013	0	0.15	0.00 (0.00–24.93)
2012	0	0.13	0.00 (0.00–27.67)
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)
J C BLAIR MEMORIAL HOSP (11724)			
2013	2	0.15	13.45 (1.51–48.56)
2012	1	0.09	11.35 (0.15–63.18)
2011	0	0.22	0.00 (0.00–16.39)
2010	.	.	.
2009	.	.	.
THOMAS JEFFERSON UNIV HOSP - METHODIST (12017)			
2013	1	0.15	6.46 (0.08–35.93)
2012	3	0.32	9.51 (1.91–27.78)
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)
SOUTHWEST REGIONAL MEDICAL CENTER (11942)			
2013	0	0.16	0.00 (0.00–23.59)
2012	0	0.18	0.00 (0.00–20.95)
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)
WINDBER HOSPITAL (12031)			
2013	1	0.16	6.28 (0.08–34.93)
2012	0	0.13	0.00 (0.00–28.49)
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)
ELLWOOD CITY HOSPITAL (11779)			
2013	0	0.17	0.00 (0.00–21.54)
2012	0	0.26	0.00 (0.00–14.08)
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)
MERCY FITZGERALD HOSPITAL (11683)			
2013	1	0.17	5.76 (0.08–32.03)
2012	3	0.44	6.83 (1.37–19.96)
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)

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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)
CORRY MEMORIAL HOSPITAL (12283)			
2013	1	0.19	5.29 (0.07–29.42)
2012	0	0.32	0.00 (0.00–11.43)
2011	1	0.13	7.60 (0.10–42.26)
2010	.	.	.
2009	.	.	.
LOWER BUCKS HOSPITAL (12390)			
2013	0	0.20	0.00 (0.00–18.46)
2012	0	0.34	0.00 (0.00–10.91)
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)
PUNXSUTAWNEY AREA HOSPITAL (11830)			
2013	0	0.22	0.00 (0.00–16.81)
2012	0	0.25	0.00 (0.00–14.84)
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)
WAYNESBORO HOSPITAL (11642)			
2013	1	0.22	4.50 (0.06–25.06)
2012	0	0.29	0.00 (0.00–12.60)
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)
CROZER CHESTER MEDICAL CENTER (11839)			
2013	0	0.22	0.00 (0.00–16.50)
2012	0	1.27	0.00 (0.00–2.89)
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)
SOMERSET HOSPITAL (12282)			
2013	0	0.22	0.00 (0.00–16.34)
2012	0	0.26	0.00 (0.00–14.20)
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)
SUNBURY COMMUNITY HOSPITAL (12105)			
2013	0	0.23	0.00 (0.00–15.62)
2012	0	0.58	0.00 (0.00–6.33)
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)
HEART OF LANCASTER REGIONAL MEDICAL CENTER (12571)			
2013	0	0.24	0.00 (0.00–15.27)
2012	0	0.25	0.00 (0.00–14.74)
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)
BRADFORD REGIONAL MEDICAL CENTER (12361)			
2013	0	0.26	0.00 (0.00–14.23)
2012	0	0.23	0.00 (0.00–16.16)
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)

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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)
ROXBOROUGH MEMORIAL HOSPITAL (11978)			
2013	0	0.26	0.00 (0.00–13.98)
2012	0	0.24	0.00 (0.00–15.26)
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)
CLEARFIELD HOSPITAL (11843)			
2013	0	0.30	0.00 (0.00–12.39)
2012	1	0.39	2.58 (0.03–14.38)
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)
MERCY PHILADELPHIA HOSPITAL (11946)			
2013	2	0.30	6.66 (0.75–24.04)
2012	1	0.36	2.75 (0.04–15.32)
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)
PALMERTON HOSPITAL (12396)			
2013	0	0.30	0.00 (0.00–12.19)
2012	0	0.47	0.00 (0.00–7.75)
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)
HAZLETON GENERAL HOSPITAL (11878)			
2013	1	0.31	3.24 (0.04–18.01)
2012	0	0.41	0.00 (0.00–8.96)
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)
TYRONE HOSPITAL (12717)			
2013	1	0.31	3.21 (0.04–17.83)
2012	2	0.26	7.82 (0.88–28.23)
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)
GNADEN HUETTEN MEMORIAL HOSPITAL (12241)			
2013	1	0.32	3.17 (0.04–17.62)
2012	0	0.49	0.00 (0.00–7.49)
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)
SOLDIERS & SAILORS MEM HOSPITAL (11688)			
2013	0	0.32	0.00 (0.00–11.49)
2012	0	0.42	0.00 (0.00–8.82)
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)
GROVE CITY MEDICAL CENTER (11722)			
2013	0	0.32	0.00 (0.00–11.43)
2012	0	0.20	0.00 (0.00–18.21)
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)

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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)
MERCY SUBURBAN HOSPITAL NORRISTOWN (11952)			
2013	1	0.34	2.98 (0.04–16.58)
2012	0	0.95	0.00 (0.00–3.88)
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)
ELK REGIONAL HEALTH CENTER (11859)			
2013	0	0.34	0.00 (0.00–10.80)
2012	1	0.68	1.47 (0.02–8.17)
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)
ENDLESS MOUNTAINS HEALTH SYSTEMS (11817)			
2013	0	0.36	0.00 (0.00–10.30)
2012	0	0.55	0.00 (0.00–6.67)
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)
UPMC MCKEESPORT (11707)			
2013	1	0.37	2.73 (0.04–15.18)
2012	0	0.70	0.00 (0.00–5.22)
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)
SCHUYLKILL MEDICAL CENTER — SOUTH JACKSON STREET (12087)			
2013	1	0.37	2.71 (0.04–15.06)
2012	0	0.54	0.00 (0.00–6.80)
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)
CHESTNUT HILL HOSPITAL (12304)			
2013	0	0.39	0.00 (0.00–9.52)
2012	1	0.28	3.59 (0.05–19.97)
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)
CROZER CHESTER MEDICAL CENTER TAYLOR (11932)			
2013	0	0.40	0.00 (0.00–9.07)
2012	1	0.50	2.02 (0.03–11.23)
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)
CLARION HOSPITAL (11654)			
2013	0	0.41	0.00 (0.00–8.93)
2012	0	0.60	0.00 (0.00–6.11)
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)
BERWICK HOSPITAL CENTER (11442)			
2013	0	0.42	0.00 (0.00–8.82)
2012	0	0.70	0.00 (0.00–5.26)
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)

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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)
LEWISTOWN HOSPITAL (11825)			
2013	0	0.43	0.00 (0.00–8.47)
2012	0	0.79	0.00 (0.00–4.67)
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)
MEMORIAL HOSPITAL (11633)			
2013	0	0.47	0.00 (0.00–7.86)
2012	2	0.69	2.89 (0.32–10.43)
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)
OHIO VALLEY GENERAL HOSPITAL (12298)			
2013	0	0.48	0.00 (0.00–7.62)
2012	1	0.46	2.16 (0.03–12.00)
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)
MILLCREEK COMMUNITY HOSPITAL (12253)			
2013	0	0.50	0.00 (0.00–7.34)
2012	0	0.48	0.00 (0.00–7.60)
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)
GEISINGER-BLOOMSBURG HOSPITAL (12008)			
2013	2	0.51	3.94 (0.44–14.21)
2012	3	0.87	3.44 (0.69–10.04)
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)
UPMC NORTHWEST (11837)			
2013	0	0.51	0.00 (0.00–7.17)
2012	0	0.55	0.00 (0.00–6.62)
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)
SCHUYLKILL MEDICAL CENTER — EAST NORWEGIAN STREET (11922)			
2013	1	0.52	1.94 (0.03–10.80)
2012	1	0.98	1.02 (0.01–5.66)
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)
BRANDYWINE HOSPITAL (11979)			
2013	2	0.55	3.63 (0.41–13.10)
2012	0	0.80	0.00 (0.00–4.57)
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)
ST. LUKES MINERS MEMORIAL HOSPITAL (11784)			
2013	0	0.58	0.00 (0.00–6.30)
2012	1	0.84	1.18 (0.02–6.59)
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)

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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)
EDGEWOOD SURGICAL HOSPITAL (12552)			
2013	0	0.59	0.00 (0.00–6.19)
2012	0	0.75	0.00 (0.00–4.91)
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)
POCONO MEDICAL CENTER (11772)			
2013	0	0.60	0.00 (0.00–6.07)
2012	0	0.16	0.00 (0.00–22.79)
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)
SACRED HEART HOSPITAL (11684)			
2013	0	0.61	0.00 (0.00–6.00)
2012	0	0.89	0.00 (0.00–4.13)
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)
YORK HOSPITAL (10108)			
2013	0	0.65	0.00 (0.00–5.62)
2012	4	1.88	2.12 (0.57–5.43)
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)
WARREN GENERAL HOSPITAL (12216)			
2013	0	0.67	0.00 (0.00–5.50)
2012	0	0.77	0.00 (0.00–4.74)
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)
THE WESTERN PENNSYLVANIA HOSPITAL (11864)			
2013	1	0.67	1.49 (0.02–8.31)
2012	1	0.84	1.19 (0.02–6.61)
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)
NASON HOSPITAL (11907)			
2013	0	0.69	0.00 (0.00–5.34)
2012	0	0.47	0.00 (0.00–7.74)
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)
WAYNE MEMORIAL HOSPITAL (12004)			
2013	0	0.69	0.00 (0.00–5.29)
2012	0	0.78	0.00 (0.00–4.68)
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)
ST. JOSEPH MEDICAL CENTER (11961)			
2013	1	0.70	1.43 (0.02–7.98)
2012	1	1.20	0.84 (0.01–4.65)
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)

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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)
DUBOIS REGIONAL MEDICAL CENTER (11606)			
2013	0	0.70	0.00 (0.00–5.25)
2012	2	0.84	2.37 (0.27–8.55)
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)
CHARLES COLE MEMORIAL HOSPITAL (11956)			
2013	1	0.80	1.25 (0.02–6.96)
2012	0	0.86	0.00 (0.00–4.27)
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)
UPMC EAST (28812)			
2013	1	0.80	1.25 (0.02–6.93)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
ARMSTRONG COUNTY MEMORIAL HOSPITAL (12057)			
2013	1	0.82	1.22 (0.02–6.76)
2012	0	1.24	0.00 (0.00–2.97)
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)
NAZARETH HOSPITAL (11919)			
2013	0	0.89	0.00 (0.00–4.12)
2012	1	1.18	0.84 (0.01–4.70)
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)
THE WASHINGTON HOSPITAL (11460)			
2013	0	0.90	0.00 (0.00–4.08)
2012	0	1.37	0.00 (0.00–2.67)
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)
LEHIGH VALLEY HOSPITAL — MUHLENBERG (11898)			
2013	1	0.91	1.10 (0.01–6.15)
2012	2	1.37	1.46 (0.16–5.28)
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)
HAHNEMANN UNIVERSITY HOSPITAL (11437)			
2013	3	0.95	3.17 (0.64–9.25)
2012	3	1.00	2.99 (0.60–8.74)
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)
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)			
2013	1	0.97	1.03 (0.01–5.74)
2012	1	0.88	1.14 (0.01–6.34)
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)

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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)
INDIANA REGIONAL MEDICAL CENTER (11759)			
2013	1	0.98	1.02 (0.01–5.67)
2012	0	1.40	0.00 (0.00–2.61)
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)
ALLEGHENY VALLEY HOSPITAL (11842)			
2013	0	0.99	0.00 (0.00–3.71)
2012	0	1.37	0.00 (0.00–2.68)
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)
MONONGAHELA VALLEY HOSPITAL (11069)			
2013	4	1.09	3.66 (0.98–9.37)
2012	3	1.56	1.92 (0.39–5.62)
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)
GETTYSBURG HOSPITAL (11531)			
2013	1	1.10	0.91 (0.01–5.07)
2012	2	1.45	1.38 (0.16–5.00)
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)
PHYSICIANS CARE SURGICAL HOSPITAL (19630)			
2013	0	1.16	0.00 (0.00–3.16)
2012	0	0.35	0.00 (0.00–10.52)
2011	0	0.35	0.00 (0.00–10.36)
2010	.	.	.
2009	.	.	.
CARLISLE REGIONAL MEDICAL CENTER (11997)			
2013	6	1.22	4.93 (1.80–10.73)
2012	1	1.81	0.55 (0.01–3.07)
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)
ALBERT EINSTEIN MEDICAL CENTER AT ELKINS PARK (12500)			
2013	4	1.23	3.24 (0.87–8.30)
2012	0	1.02	0.00 (0.00–3.58)
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)
HANOVER HOSPITAL (11899)			
2013	1	1.26	0.79 (0.01–4.40)
2012	0	1.39	0.00 (0.00–2.64)
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)
SURGICAL INSTITUTE OF READING (12535)			
2013	3	1.27	2.36 (0.48–6.91)
2012	1	1.61	0.62 (0.01–3.46)
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)

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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)			
2013	2	1.27	1.57 (0.18–5.68)
2012	1	2.02	0.49 (0.01–2.75)
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)
JEANES HOSPITAL (11459)			
2013	1	1.28	0.78 (0.01–4.34)
2012	0	1.21	0.00 (0.00–3.02)
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)
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)			
2013	0	1.29	0.00 (0.00–2.85)
2012	1	1.93	0.52 (0.01–2.89)
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)
EASTON HOSPITAL (11929)			
2013	1	1.29	0.78 (0.01–4.31)
2012	5	1.38	3.63 (1.17–8.47)
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)
GRAND VIEW HOSPITAL (11847)			
2013	0	1.34	0.00 (0.00–2.73)
2012	1	1.87	0.53 (0.01–2.97)
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)
UNIONTOWN HOSPITAL (10441)			
2013	0	1.35	0.00 (0.00–2.72)
2012	1	1.89	0.53 (0.01–2.94)
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)
EXCELA HEALTH LATROBE HOSPITAL (11651)			
2013	3	1.38	2.17 (0.44–6.34)
2012	0	1.42	0.00 (0.00–2.59)
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)
FORBES REGIONAL HOSPITAL (11265)			
2013	2	1.40	1.43 (0.16–5.15)
2012	1	2.45	0.41 (0.01–2.27)
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)
HERITAGE VALLEY BEAVER (11831)			
2013	4	1.42	2.81 (0.76–7.20)
2012	6	1.83	3.27 (1.20–7.12)
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)

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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)
LANSDALE HOSPITAL (12032)			
2013	1	1.43	0.70 (0.01–3.90)
2012	0	1.48	0.00 (0.00–2.47)
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)
EINSTEIN MEDICAL CENTER MONTGOMERY (30210)			
2013	4	1.45	2.75 (0.74–7.04)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
SURGICAL SPECIALTY CENTER AT COORDINATED HEALTH, THE (15259)			
2013	0	1.46	0.00 (0.00–2.51)
2012	1	2.51	0.40 (0.01–2.21)
2011	2	2.46	0.81 (0.09–2.94)
2010	1	2.49	0.40 (0.01–2.23)
2009	.	.	.
CHESTER COUNTY HOSPITAL (12016)			
2013	1	1.46	0.68 (0.01–3.80)
2012	6	2.00	3.00 (1.10–6.53)
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)
JAMESON MEMORIAL HOSPITAL (11954)			
2013	1	1.49	0.67 (0.01–3.74)
2012	1	1.48	0.68 (0.01–3.77)
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)
WELLSPAN SURGERY AND REHABILITATION HOSPITAL (27430)			
2013	1	1.49	0.67 (0.01–3.73)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
CROZER CHESTER MEDICAL CENTER SPRINGFIELD (11851)			
2013	1	1.52	0.66 (0.01–3.65)
2012	0	0.06	0.00 (0.00–65.38)
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)
SHARON REGIONAL HEALTH SYSTEM (12250)			
2013	0	1.53	0.00 (0.00–2.40)
2012	1	2.04	0.49 (0.01–2.72)
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)
EPHRATA COMMUNITY HOSPITAL (11764)			
2013	1	1.59	0.63 (0.01–3.49)
2012	2	1.91	1.05 (0.12–3.79)
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)

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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 GOOD SAMARITAN HOSPITAL (11712)			
2013	1	1.62	0.62 (0.01–3.44)
2012	0	2.11	0.00 (0.00–1.73)
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)
POTTSTOWN MEMORIAL MEDICAL CENTER (11983)			
2013	2	1.64	1.22 (0.14–4.39)
2012	4	2.31	1.73 (0.46–4.42)
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)
MOSES TAYLOR HOSPITAL (11528)			
2013	0	1.73	0.00 (0.00–2.12)
2012	0	1.99	0.00 (0.00–1.84)
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)
UPMC MERCY (10384)			
2013	4	1.77	2.26 (0.61–5.79)
2012	2	1.98	1.01 (0.11–3.64)
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)
WILKES-BARRE GENERAL HOSPITAL (11916)			
2013	2	1.78	1.13 (0.13–4.07)
2012	3	2.86	1.05 (0.21–3.06)
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)
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)			
2013	3	1.78	1.68 (0.34–4.92)
2012	2	2.40	0.83 (0.09–3.01)
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)
LANCASTER REGIONAL MEDICAL CENTER (12335)			
2013	1	1.79	0.56 (0.01–3.11)
2012	3	2.49	1.21 (0.24–3.53)
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)
BUCKS COUNTY SPECIALTY HOSPITAL (15202)			
2013	2	1.80	1.11 (0.12–4.01)
2012	3	1.83	1.64 (0.33–4.78)
2011	0	1.27	0.00 (0.00–2.88)
2010	0	0.71	0.00 (0.00–5.16)
2009	.	.	.
GEISINGER-COMMUNITY MEDICAL CENTER (11914)			
2013	2	1.90	1.05 (0.12–3.80)
2012	2	3.64	0.55 (0.06–1.98)
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)

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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)
DOYLESTOWN HOSPITAL (10190)			
2013	2	1.90	1.05 (0.12–3.80)
2012	0	2.35	0.00 (0.00–1.56)
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)
BUTLER MEMORIAL HOSPITAL (11736)			
2013	2	2.01	1.00 (0.11–3.60)
2012	5	2.55	1.96 (0.63–4.57)
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)
HOLY SPIRIT HOSPITAL (12387)			
2013	1	2.05	0.49 (0.01–2.72)
2012	2	2.48	0.81 (0.09–2.92)
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)
ADVANCED SURGICAL HOSPITAL (16317)			
2013	0	2.08	0.00 (0.00–1.76)
2012	1	2.83	0.35 (0.00–1.97)
2011	1	2.67	0.37 (0.00–2.09)
2010	.	.	.
2009	.	.	.
ST. VINCENT HEALTH CENTER (11699)			
2013	0	2.21	0.00 (0.00–1.66)
2012	0	3.30	0.00 (0.00–1.11)
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)
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)			
2013	0	2.30	0.00 (0.00–1.60)
2012	0	3.59	0.00 (0.00–1.02)
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)
UPMC HORIZON (11675)			
2013	5	2.34	2.13 (0.69–4.98)
2012	6	3.04	1.97 (0.72–4.30)
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)
HOLY REDEEMER HOSPITAL AND MEDICAL CENTER (11973)			
2013	1	2.43	0.41 (0.01–2.29)
2012	3	4.19	0.72 (0.14–2.09)
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)
TEMPLE UNIVERSITY HOSPITAL (12382)			
2013	2	2.43	0.82 (0.09–2.97)
2012	4	3.14	1.28 (0.34–3.26)
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)

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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)
EVANGELICAL COMMUNITY HOSPITAL (11701)			
2013	2	2.47	0.81 (0.09–2.92)
2012	7	2.79	2.51 (1.01–5.18)
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)
REGIONAL HOSPITAL OF SCRANTON (12533)			
2013	0	2.50	0.00 (0.00–1.47)
2012	3	3.19	0.94 (0.19–2.75)
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)
ST. MARY MEDICAL CENTER (11885)			
2013	1	2.53	0.40 (0.01–2.20)
2012	3	2.93	1.02 (0.21–2.99)
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)
ROBERT PACKER HOSPITAL (12422)			
2013	0	2.59	0.00 (0.00–1.42)
2012	1	3.76	0.27 (0.00–1.48)
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)
PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS (11448)			
2013	10	2.60	3.84 (1.84–7.06)
2012	9	8.23	1.09 (0.50–2.07)
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)
MAIN LINE HOSPITAL — PAOLI (11750)			
2013	4	2.71	1.48 (0.40–3.78)
2012	4	3.28	1.22 (0.33–3.12)
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)
UPMC HAMOT (11725)			
2013	4	2.79	1.44 (0.39–3.68)
2012	5	3.95	1.27 (0.41–2.95)
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)
CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)			
2013	1	2.79	0.36 (0.00–1.99)
2012	5	4.35	1.15 (0.37–2.68)
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)
ST. LUKES HOSPITAL BETHLEHEM (11718)			
2013	4	2.83	1.41 (0.38–3.62)
2012	1	2.90	0.34 (0.00–1.92)
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)

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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)
RIDDLE MEMORIAL HOSPITAL (11731)			
2013	2	3.11	0.64 (0.07–2.32)
2012	2	4.37	0.46 (0.05–1.65)
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)
GEISINGER MEDICAL CENTER (11775)			
2013	10	3.13	3.19 (1.53–5.87)
2012	6	3.93	1.53 (0.56–3.32)
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)
MEADVILLE MEDICAL CENTER (11583)			
2013	3	3.18	0.94 (0.19–2.76)
2012	4	4.20	0.95 (0.26–2.44)
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)
CHAMBERSBURG HOSPITAL (11913)			
2013	6	3.22	1.87 (0.68–4.06)
2012	9	4.44	2.03 (0.93–3.85)
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)
ALTOONA REGIONAL HEALTH SYSTEM (10178)			
2013	1	3.31	0.30 (0.00–1.68)
2012	4	4.16	0.96 (0.26–2.46)
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)
MILTON S HERSHEY MEDICAL CENTER (11747)			
2013	2	3.38	0.59 (0.07–2.14)
2012	3	5.12	0.59 (0.12–1.71)
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)
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)			
2013	1	3.44	0.29 (0.00–1.62)
2012	0	3.24	0.00 (0.00–1.13)
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)
OSS ORTHOPAEDIC HOSPITAL (18467)			
2013	1	3.56	0.28 (0.00–1.56)
2012	9	5.16	1.74 (0.80–3.31)
2011	7	4.19	1.67 (0.67–3.44)
2010	.	.	.
2009	.	.	.
ABINGTON MEMORIAL HOSPITAL (11838)			
2013	1	3.59	0.28 (0.00–1.55)
2012	4	4.65	0.86 (0.23–2.20)
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)

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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)
HERITAGE VALLEY SEWICKLEY (10375)			
2013	2	3.67	0.55 (0.06–1.97)
2012	5	5.19	0.96 (0.31–2.25)
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)
UPMC PASSAVANT (11242)			
2013	1	3.80	0.26 (0.00–1.46)
2012	4	4.28	0.93 (0.25–2.39)
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)
ST. CLAIR MEMORIAL HOSPITAL (10561)			
2013	3	3.95	0.76 (0.15–2.22)
2012	10	5.32	1.88 (0.90–3.46)
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)
JEFFERSON REGIONAL MEDICAL CENTER (10237)			
2013	3	3.96	0.76 (0.15–2.22)
2012	6	5.72	1.05 (0.38–2.28)
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)
ARIA HEALTH (11388)			
2013	3	4.16	0.72 (0.15–2.11)
2012	1	1.60	0.62 (0.01–3.47)
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)
MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)			
2013	1	4.17	0.24 (0.00–1.33)
2012	5	5.10	0.98 (0.32–2.29)
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)
READING HOSPITAL AND MEDICAL CENTER (12375)			
2013	3	4.22	0.71 (0.14–2.08)
2012	3	5.32	0.56 (0.11–1.65)
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)
COORDINATED HEALTH ORTHOPEDIC HOSPITAL, LLC (11872)			
2013	0	4.35	0.00 (0.00–0.84)
2012	2	5.23	0.38 (0.04–1.38)
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)
ALLEGHENY GENERAL HOSPITAL (10648)			
2013	5	4.50	1.11 (0.36–2.59)
2012	5	6.84	0.73 (0.24–1.71)
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)

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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 ST MARGARET (11561)			
2013	6	4.90	1.22 (0.45–2.66)
2012	4	7.44	0.54 (0.14–1.38)
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)
PENN PRESBYTERIAN MEDICAL CENTER (11814)			
2013	6	5.24	1.14 (0.42–2.49)
2012	12	6.78	1.77 (0.91–3.09)
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)
MOUNT NITTANY MEDICAL CENTER (11797)			
2013	8	5.40	1.48 (0.64–2.92)
2012	7	6.99	1.00 (0.40–2.06)
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)
MAIN LINE HOSPITAL BRYN MAWR (11753)			
2013	4	5.57	0.72 (0.19–1.84)
2012	6	7.25	0.83 (0.30–1.80)
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)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)			
2013	5	5.57	0.90 (0.29–2.10)
2012	8	7.44	1.07 (0.46–2.12)
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)
THOMAS JEFFERSON UNIV HOSPITAL (11506)			
2013	7	5.92	1.18 (0.47–2.44)
2012	15	8.61	1.74 (0.97–2.87)
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)
LEHIGH VALLEY HOSPITAL (11884)			
2013	13	6.59	1.97 (1.05–3.38)
2012	15	8.25	1.82 (1.02–3.00)
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)
LANCASTER GENERAL HOSPITAL (10183)			
2013	4	7.14	0.56 (0.15–1.43)
2012	4	8.51	0.47 (0.13–1.20)
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)
UPMC PRESBYTERIAN SHADYSIDE — SHADYSIDE (10118)			
2013	14	7.31	1.92 (1.05–3.21)
2012	14	10.49	1.33 (0.73–2.24)
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)

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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)
PINNACLE HEALTH HOSPITALS (10122)			
2013	6	8.19	0.73 (0.27–1.60)
2012	11	10.16	1.08 (0.54–1.94)
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)

Table 4.5.12: Rate (SIR) of Surgical Site Infections (SSIs) Associated with Hip Arthroplasty (HPRO) by Hospital — Pennsylvania, 2009–2013

	Number of SSIs (HPRO)	Predicted Number of SSIs (HPRO)	SIR (95% CI)
MID-VALLEY HOSPITAL (11557)			
2013	.	.	.
2012	.	.	.
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)
TYLER MEMORIAL HOSPITAL (11829)			
2013	.	.	.
2012	.	.	.
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)
BARIX CLINICS OF PENNSYLVANIA (12037)			
2013	.	.	.
2012	0	0.05	0.00 (0.00–70.96)
2011	.	.	.
2010	.	.	.
2009	.	.	.
LOCK HAVEN HOSPITAL (12097)			
2013	.	.	.
2012	0	0.05	0.00 (0.00–67.38)
2011	0	0.04	0.00 (0.00–94.63)
2010	0	0.02	0.00 (0.00–242.48)
2009	.	.	.
SHRINERS HOSPITAL FOR CHILDREN — PHILADELPHIA (12244)			
2013	.	.	.
2012	0	0.05	0.00 (0.00–81.49)
2011	0	0.01	0.00 (0.00–272.29)
2010	.	.	.
2009	0	0.07	0.00 (0.00–54.03)
BROOKVILLE HOSPITAL (12418)			
2013	.	.	.
2012	.	.	.
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)
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)			
2013	0	0.02	0.00 (0.00–240.51)
2012	.	.	.
2011	0	0.05	0.00 (0.00–71.94)
2010	0	0.09	0.00 (0.00–38.72)
2009	.	.	.
CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)			
2013	0	0.02	0.00 (0.00–240.51)
2012	0	0.03	0.00 (0.00–111.98)
2011	.	.	.
2010	.	.	.
2009	.	.	.
ST. JOSEPHS HOSPITAL (12438)			
2013	0	0.04	0.00 (0.00–85.19)
2012	0	0.06	0.00 (0.00–58.44)
2011	.	.	.
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)
CORRY MEMORIAL HOSPITAL (12283)			
2013	0	0.06	0.00 (0.00–65.96)
2012	0	0.08	0.00 (0.00–45.56)
2011	.	.	.
2010	.	.	.
2009	.	.	.
ELLWOOD CITY HOSPITAL (11779)			
2013	0	0.07	0.00 (0.00–52.87)
2012	0	0.19	0.00 (0.00–19.53)
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)
MINERS MEDICAL CENTER (12295)			
2013	0	0.07	0.00 (0.00–51.76)
2012	0	0.14	0.00 (0.00–25.60)
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)
MEMORIAL HOSPITAL, INC. TOWANDA (12549)			
2013	0	0.09	0.00 (0.00–41.30)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
EXCELA HEALTH FRICK HOSPITAL (11639)			
2013	0	0.09	0.00 (0.00–40.08)
2012	0	0.03	0.00 (0.00–129.34)
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)
SOUTHWEST REGIONAL MEDICAL CENTER (11942)			
2013	0	0.10	0.00 (0.00–37.79)
2012	0	0.19	0.00 (0.00–19.64)
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)
WINDBER HOSPITAL (12031)			
2013	1	0.11	9.37 (0.12–52.12)
2012	1	0.30	3.32 (0.04–18.45)
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)
JERSEY SHORE HOSPITAL (11689)			
2013	0	0.11	0.00 (0.00–34.31)
2012	0	0.10	0.00 (0.00–37.93)
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)
SOMERSET HOSPITAL (12282)			
2013	0	0.12	0.00 (0.00–31.85)
2012	0	0.12	0.00 (0.00–29.72)
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)

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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)			
2013	0	0.12	0.00 (0.00–30.02)
2012	0	0.08	0.00 (0.00–48.89)
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)
ROXBOROUGH MEMORIAL HOSPITAL (11978)			
2013	0	0.12	0.00 (0.00–29.69)
2012	0	0.20	0.00 (0.00–18.34)
2011	.	.	.
2010	0	0.06	0.00 (0.00–58.69)
2009	1	0.24	4.13 (0.05–22.96)
PUNXSUTAWNEY AREA HOSPITAL (11830)			
2013	2	0.13	15.51 (1.74–55.99)
2012	0	0.12	0.00 (0.00–30.98)
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)
KANE COMMUNITY HOSPITAL (12111)			
2013	0	0.13	0.00 (0.00–27.82)
2012	0	0.18	0.00 (0.00–20.84)
2011	0	0.21	0.00 (0.00–17.73)
2010	.	.	.
2009	0	0.06	0.00 (0.00–62.55)
J C BLAIR MEMORIAL HOSP (11724)			
2013	2	0.21	9.49 (1.07–34.25)
2012	0	0.03	0.00 (0.00–122.24)
2011	.	.	.
2010	.	.	.
2009	.	.	.
WAYNESBORO HOSPITAL (11642)			
2013	0	0.21	0.00 (0.00–17.15)
2012	2	0.48	4.21 (0.47–15.19)
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)
EASTERN REGIONAL MEDICAL CENTER (12348)			
2013	0	0.22	0.00 (0.00–16.83)
2012	0	0.25	0.00 (0.00–14.61)
2011	0	0.21	0.00 (0.00–17.73)
2010	1	0.09	10.55 (0.14–58.72)
2009	.	.	.
ST. LUKES QUAKERTOWN HOSPITAL (11711)			
2013	1	0.22	4.53 (0.06–25.23)
2012	0	0.47	0.00 (0.00–7.87)
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)
CROZER CHESTER MEDICAL CENTER TAYLOR (11932)			
2013	0	0.25	0.00 (0.00–14.76)
2012	0	0.34	0.00 (0.00–10.64)
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)

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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)
TYRONE HOSPITAL (12717)			
2013	0	0.26	0.00 (0.00–14.21)
2012	2	0.23	8.88 (1.00–32.05)
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)
UPMC BEDFORD (11680)			
2013	0	0.26	0.00 (0.00–13.84)
2012	0	0.20	0.00 (0.00–18.03)
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)
PALMERTON HOSPITAL (12396)			
2013	0	0.28	0.00 (0.00–13.29)
2012	0	0.41	0.00 (0.00–9.04)
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)
EDGEWOOD SURGICAL HOSPITAL (12552)			
2013	0	0.28	0.00 (0.00–12.97)
2012	0	0.25	0.00 (0.00–14.89)
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)
BERWICK HOSPITAL CENTER (11442)			
2013	0	0.29	0.00 (0.00–12.77)
2012	2	0.39	5.15 (0.58–18.59)
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)
ST. LUKES MINERS MEMORIAL HOSPITAL (11784)			
2013	3	0.31	9.65 (1.94–28.19)
2012	1	0.45	2.20 (0.03–12.25)
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)
MERCY PHILADELPHIA HOSPITAL (11946)			
2013	3	0.32	9.44 (1.90–27.59)
2012	1	0.43	2.33 (0.03–12.94)
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)
LOWER BUCKS HOSPITAL (12390)			
2013	0	0.33	0.00 (0.00–11.23)
2012	0	0.53	0.00 (0.00–6.98)
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)
TITUSVILLE AREA HOSPITAL (11738)			
2013	0	0.33	0.00 (0.00–11.15)
2012	0	0.17	0.00 (0.00–21.43)
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)

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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)
ST. LUKES HOSPITAL ANDERSON CAMPUS (21487)			
2013	0	0.34	0.00 (0.00–10.88)
2012	1	0.48	2.09 (0.03–11.62)
2011	.	.	.
2010	.	.	.
2009	.	.	.
HEART OF LANCASTER REGIONAL MEDICAL CENTER (12571)			
2013	0	0.35	0.00 (0.00–10.61)
2012	1	0.21	4.85 (0.06–27.00)
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)
BRADFORD REGIONAL MEDICAL CENTER (12361)			
2013	0	0.35	0.00 (0.00–10.41)
2012	0	0.36	0.00 (0.00–10.32)
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)
SCHUYLKILL MEDICAL CENTER — SOUTH JACKSON STREET (12087)			
2013	3	0.36	8.38 (1.68–24.49)
2012	2	0.58	3.44 (0.39–12.40)
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)
WARREN GENERAL HOSPITAL (12216)			
2013	0	0.37	0.00 (0.00–9.96)
2012	2	0.56	3.55 (0.40–12.82)
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)
HAZLETON GENERAL HOSPITAL (11878)			
2013	2	0.38	5.32 (0.60–19.21)
2012	2	0.57	3.54 (0.40–12.77)
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)
SCHUYLKILL MEDICAL CENTER — EAST NORWEGIAN STREET (11922)			
2013	0	0.39	0.00 (0.00–9.40)
2012	3	1.11	2.71 (0.54–7.92)
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)
SOLDIERS & SAILORS MEM HOSPITAL (11688)			
2013	0	0.39	0.00 (0.00–9.34)
2012	0	0.28	0.00 (0.00–12.90)
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)
JENNERSVILLE REGIONAL HOSPITAL (12337)			
2013	1	0.39	2.53 (0.03–14.10)
2012	1	0.45	2.20 (0.03–12.25)
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)

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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)
GROVE CITY MEDICAL CENTER (11722)			
2013	1	0.41	2.46 (0.03–13.69)
2012	2	0.33	6.09 (0.68–21.98)
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)
GNADEN HUETTEN MEMORIAL HOSPITAL (12241)			
2013	0	0.41	0.00 (0.00–9.00)
2012	0	0.43	0.00 (0.00–8.52)
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)
ENDLESS MOUNTAINS HEALTH SYSTEMS (11817)			
2013	0	0.44	0.00 (0.00–8.39)
2012	0	0.32	0.00 (0.00–11.51)
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)
MILLCREEK COMMUNITY HOSPITAL (12253)			
2013	0	0.45	0.00 (0.00–8.10)
2012	0	0.33	0.00 (0.00–10.97)
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)
SUNBURY COMMUNITY HOSPITAL (12105)			
2013	0	0.49	0.00 (0.00–7.49)
2012	0	0.55	0.00 (0.00–6.67)
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)
THOMAS JEFFERSON UNIV HOSP - METHODIST (12017)			
2013	1	0.50	2.01 (0.03–11.16)
2012	0	0.60	0.00 (0.00–6.09)
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)
CLEARFIELD HOSPITAL (11843)			
2013	0	0.50	0.00 (0.00–7.30)
2012	0	0.39	0.00 (0.00–9.42)
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)
HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)			
2013	1	0.52	1.94 (0.03–10.80)
2012	0	0.57	0.00 (0.00–6.41)
2011	0	0.39	0.00 (0.00–9.41)
2010	2	0.51	3.91 (0.44–14.12)
2009	.	.	.
THE WESTERN PENNSYLVANIA HOSPITAL (11864)			
2013	1	0.53	1.89 (0.02–10.52)
2012	1	0.44	2.28 (0.03–12.71)
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)
NASON HOSPITAL (11907)			
2013	0	0.55	0.00 (0.00–6.73)
2012	0	0.43	0.00 (0.00–8.56)
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)
ELK REGIONAL HEALTH CENTER (11859)			
2013	0	0.58	0.00 (0.00–6.31)
2012	1	0.59	1.69 (0.02–9.43)
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)
OHIO VALLEY GENERAL HOSPITAL (12298)			
2013	0	0.60	0.00 (0.00–6.13)
2012	0	0.61	0.00 (0.00–6.06)
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)
CROZER CHESTER MEDICAL CENTER (11839)			
2013	1	0.61	1.64 (0.02–9.14)
2012	1	1.69	0.59 (0.01–3.29)
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)
MERCY SUBURBAN HOSPITAL NORRISTOWN (11952)			
2013	1	0.64	1.57 (0.02–8.73)
2012	0	0.73	0.00 (0.00–5.04)
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)
LEWISTOWN HOSPITAL (11825)			
2013	0	0.65	0.00 (0.00–5.68)
2012	0	0.63	0.00 (0.00–5.85)
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)
MERCY FITZGERALD HOSPITAL (11683)			
2013	2	0.68	2.95 (0.33–10.64)
2012	0	0.57	0.00 (0.00–6.47)
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)
ALBERT EINSTEIN MEDICAL CENTER (10585)			
2013	1	0.69	1.44 (0.02–8.04)
2012	4	1.19	3.36 (0.90–8.60)
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)
CLARION HOSPITAL (11654)			
2013	2	0.74	2.70 (0.30–9.76)
2012	2	0.75	2.67 (0.30–9.64)
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)

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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)			
2013	0	0.75	0.00 (0.00–4.90)
2012	1	0.78	1.29 (0.02–7.17)
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)
GEISINGER-BLOOMSBURG HOSPITAL (12008)			
2013	0	0.79	0.00 (0.00–4.66)
2012	2	0.84	2.39 (0.27–8.64)
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)
MEMORIAL HOSPITAL (11633)			
2013	2	0.79	2.52 (0.28–9.11)
2012	2	0.65	3.08 (0.35–11.13)
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)
SURGICAL INSTITUTE OF READING (12535)			
2013	3	0.81	3.70 (0.74–10.80)
2012	0	0.77	0.00 (0.00–4.76)
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)
BRANDYWINE HOSPITAL (11979)			
2013	2	0.82	2.45 (0.28–8.85)
2012	2	0.68	2.95 (0.33–10.65)
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)
UPMC MCKEESPORT (11707)			
2013	1	0.82	1.21 (0.02–6.75)
2012	0	0.79	0.00 (0.00–4.65)
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)
WAYNE MEMORIAL HOSPITAL (12004)			
2013	0	0.84	0.00 (0.00–4.36)
2012	0	1.16	0.00 (0.00–3.17)
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)
POCONO MEDICAL CENTER (11772)			
2013	0	0.87	0.00 (0.00–4.20)
2012	0	0.75	0.00 (0.00–4.87)
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)
GETTYSBURG HOSPITAL (11531)			
2013	1	0.91	1.10 (0.01–6.12)
2012	1	0.90	1.11 (0.01–6.17)
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)

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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)			
2013	1	0.92	1.09 (0.01–6.07)
2012	1	0.62	1.60 (0.02–8.92)
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)
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)			
2013	1	0.97	1.03 (0.01–5.74)
2012	0	0.80	0.00 (0.00–4.59)
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)
UPMC EAST (28812)			
2013	2	0.99	2.02 (0.23–7.31)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
ARMSTRONG COUNTY MEMORIAL HOSPITAL (12057)			
2013	0	0.99	0.00 (0.00–3.69)
2012	0	1.39	0.00 (0.00–2.64)
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)
NAZARETH HOSPITAL (11919)			
2013	3	1.10	2.72 (0.55–7.95)
2012	0	1.40	0.00 (0.00–2.61)
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)
UPMC NORTHWEST (11837)			
2013	0	1.10	0.00 (0.00–3.32)
2012	3	0.90	3.34 (0.67–9.76)
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)
ST. JOSEPH MEDICAL CENTER (11961)			
2013	1	1.12	0.89 (0.01–4.96)
2012	0	1.42	0.00 (0.00–2.58)
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)
ALBERT EINSTEIN MEDICAL CENTER AT ELKINS PARK (12500)			
2013	3	1.12	2.67 (0.54–7.80)
2012	1	0.74	1.36 (0.02–7.55)
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)
CANONSBURG GENERAL HOSPITAL (11586)			
2013	3	1.13	2.66 (0.54–7.78)
2012	2	1.80	1.11 (0.13–4.02)
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)

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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)
SACRED HEART HOSPITAL (11684)			
2013	0	1.16	0.00 (0.00–3.15)
2012	0	2.00	0.00 (0.00–1.83)
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)
CARLISLE REGIONAL MEDICAL CENTER (11997)			
2013	2	1.19	1.67 (0.19–6.04)
2012	0	1.48	0.00 (0.00–2.48)
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)
DUBOIS REGIONAL MEDICAL CENTER (11606)			
2013	0	1.22	0.00 (0.00–3.01)
2012	1	1.35	0.74 (0.01–4.13)
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)
SURGICAL SPECIALTY CENTER AT COORDINATED HEALTH, THE (15259)			
2013	0	1.30	0.00 (0.00–2.83)
2012	0	0.91	0.00 (0.00–4.03)
2011	0	0.66	0.00 (0.00–5.55)
2010	0	0.83	0.00 (0.00–4.41)
2009	.	.	.
THE GOOD SAMARITAN HOSPITAL (11712)			
2013	0	1.31	0.00 (0.00–2.80)
2012	0	1.18	0.00 (0.00–3.10)
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)
HAHNEMANN UNIVERSITY HOSPITAL (11437)			
2013	1	1.33	0.75 (0.01–4.18)
2012	3	1.69	1.78 (0.36–5.20)
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)
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)			
2013	1	1.36	0.74 (0.01–4.10)
2012	1	1.57	0.64 (0.01–3.55)
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)
PHYSICIANS CARE SURGICAL HOSPITAL (19630)			
2013	1	1.37	0.73 (0.01–4.06)
2012	0	0.31	0.00 (0.00–11.75)
2011	0	0.15	0.00 (0.00–23.85)
2010	.	.	.
2009	.	.	.
UPMC PRESBYTERIAN SHADYSIDE — PRESBYTERIAN (10348)			
2013	0	1.37	0.00 (0.00–2.67)
2012	2	1.63	1.23 (0.14–4.43)
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)

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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)
THE WASHINGTON HOSPITAL (11460)			
2013	3	1.42	2.11 (0.42–6.17)
2012	1	1.49	0.67 (0.01–3.72)
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)
EINSTEIN MEDICAL CENTER MONTGOMERY (30210)			
2013	0	1.46	0.00 (0.00–2.52)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
ALLEGHENY VALLEY HOSPITAL (11842)			
2013	3	1.47	2.04 (0.41–5.96)
2012	2	1.54	1.30 (0.15–4.70)
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)
CROZER CHESTER MEDICAL CENTER SPRINGFIELD (11851)			
2013	3	1.47	2.04 (0.41–5.95)
2012	0	0.17	0.00 (0.00–21.57)
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)
WELLSPAN SURGERY AND REHABILITATION HOSPITAL (27430)			
2013	3	1.47	2.03 (0.41–5.94)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
JEANES HOSPITAL (11459)			
2013	1	1.52	0.66 (0.01–3.65)
2012	1	1.11	0.90 (0.01–5.03)
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)
LEHIGH VALLEY HOSPITAL — MUHLENBERG (11898)			
2013	3	1.55	1.93 (0.39–5.64)
2012	0	1.39	0.00 (0.00–2.63)
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)
JAMESON MEMORIAL HOSPITAL (11954)			
2013	2	1.57	1.27 (0.14–4.59)
2012	3	1.23	2.44 (0.49–7.13)
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)
EXCELA HEALTH LATROBE HOSPITAL (11651)			
2013	1	1.62	0.62 (0.01–3.44)
2012	1	1.71	0.58 (0.01–3.25)
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)

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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)
MONONGAHELA VALLEY HOSPITAL (11069)			
2013	5	1.68	2.97 (0.96–6.93)
2012	2	1.55	1.29 (0.15–4.67)
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)
INDIANA REGIONAL MEDICAL CENTER (11759)			
2013	0	1.69	0.00 (0.00–2.18)
2012	1	1.50	0.67 (0.01–3.72)
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)
HANOVER HOSPITAL (11899)			
2013	0	1.73	0.00 (0.00–2.12)
2012	3	1.55	1.93 (0.39–5.65)
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)
LANCASTER REGIONAL MEDICAL CENTER (12335)			
2013	0	1.73	0.00 (0.00–2.12)
2012	2	2.06	0.97 (0.11–3.51)
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)
BUTLER MEMORIAL HOSPITAL (11736)			
2013	1	1.74	0.58 (0.01–3.20)
2012	4	1.85	2.16 (0.58–5.53)
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)
MOSES TAYLOR HOSPITAL (11528)			
2013	2	1.79	1.12 (0.13–4.04)
2012	2	1.67	1.20 (0.13–4.32)
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)
EASTON HOSPITAL (11929)			
2013	0	1.84	0.00 (0.00–2.00)
2012	0	1.34	0.00 (0.00–2.75)
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)
POTTSTOWN MEMORIAL MEDICAL CENTER (11983)			
2013	1	1.85	0.54 (0.01–3.00)
2012	0	1.99	0.00 (0.00–1.84)
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)
UNIONTOWN HOSPITAL (10441)			
2013	1	1.86	0.54 (0.01–2.99)
2012	4	2.39	1.68 (0.45–4.29)
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)

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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)
EPHRATA COMMUNITY HOSPITAL (11764)			
2013	4	1.97	2.03 (0.55–5.19)
2012	4	1.79	2.23 (0.60–5.71)
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)
COORDINATED HEALTH ORTHOPEDIC HOSPITAL, LLC (11872)			
2013	2	2.01	1.00 (0.11–3.60)
2012	0	1.92	0.00 (0.00–1.91)
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)
GRAND VIEW HOSPITAL (11847)			
2013	2	2.01	1.00 (0.11–3.59)
2012	0	1.82	0.00 (0.00–2.02)
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)
YORK HOSPITAL (10108)			
2013	2	2.05	0.98 (0.11–3.52)
2012	6	3.33	1.80 (0.66–3.93)
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)
UPMC HORIZON (11675)			
2013	1	2.07	0.48 (0.01–2.68)
2012	3	2.48	1.21 (0.24–3.54)
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)
REGIONAL HOSPITAL OF SCRANTON (12533)			
2013	0	2.13	0.00 (0.00–1.72)
2012	2	2.46	0.81 (0.09–2.93)
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)
HOLY REDEEMER HOSPITAL AND MEDICAL CENTER (11973)			
2013	7	2.25	3.11 (1.24–6.40)
2012	1	2.62	0.38 (0.00–2.12)
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)
CHESTER COUNTY HOSPITAL (12016)			
2013	2	2.29	0.87 (0.10–3.16)
2012	0	2.43	0.00 (0.00–1.51)
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)
LANSDALE HOSPITAL (12032)			
2013	0	2.31	0.00 (0.00–1.59)
2012	5	2.34	2.14 (0.69–4.99)
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)

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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)
ADVANCED SURGICAL HOSPITAL (16317)			
2013	0	2.32	0.00 (0.00–1.58)
2012	0	1.76	0.00 (0.00–2.08)
2011	1	1.68	0.59 (0.01–3.30)
2010	.	.	.
2009	.	.	.
EVANGELICAL COMMUNITY HOSPITAL (11701)			
2013	2	2.35	0.85 (0.10–3.08)
2012	1	2.61	0.38 (0.01–2.13)
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)
FORBES REGIONAL HOSPITAL (11265)			
2013	7	2.36	2.96 (1.19–6.11)
2012	3	2.70	1.11 (0.22–3.25)
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)
DOYLESTOWN HOSPITAL (10190)			
2013	0	2.40	0.00 (0.00–1.53)
2012	2	2.42	0.82 (0.09–2.98)
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)
UPMC MERCY (10384)			
2013	1	2.47	0.40 (0.01–2.25)
2012	3	2.53	1.18 (0.24–3.46)
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)
SHARON REGIONAL HEALTH SYSTEM (12250)			
2013	0	2.48	0.00 (0.00–1.48)
2012	0	2.14	0.00 (0.00–1.72)
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)
HERITAGE VALLEY BEAVER (11831)			
2013	4	2.52	1.59 (0.43–4.06)
2012	4	2.49	1.60 (0.43–4.11)
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)
WILKES-BARRE GENERAL HOSPITAL (11916)			
2013	4	2.54	1.57 (0.42–4.03)
2012	5	2.33	2.15 (0.69–5.01)
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)
MEADVILLE MEDICAL CENTER (11583)			
2013	3	2.59	1.16 (0.23–3.38)
2012	4	2.60	1.54 (0.41–3.93)
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)

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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)
GEISINGER-COMMUNITY MEDICAL CENTER (11914)			
2013	6	2.69	2.23 (0.82–4.86)
2012	1	2.87	0.35 (0.00–1.94)
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)
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)			
2013	5	2.73	1.83 (0.59–4.27)
2012	6	3.19	1.88 (0.69–4.10)
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)
HERITAGE VALLEY SEWICKLEY (10375)			
2013	0	2.83	0.00 (0.00–1.30)
2012	6	3.50	1.72 (0.63–3.73)
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)
HOLY SPIRIT HOSPITAL (12387)			
2013	1	2.99	0.33 (0.00–1.86)
2012	3	2.71	1.11 (0.22–3.24)
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)
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)			
2013	2	3.20	0.62 (0.07–2.25)
2012	1	3.59	0.28 (0.00–1.55)
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)
TEMPLE UNIVERSITY HOSPITAL (12382)			
2013	1	3.22	0.31 (0.00–1.73)
2012	3	3.27	0.92 (0.18–2.68)
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)
ARIA HEALTH (11388)			
2013	3	3.23	0.93 (0.19–2.71)
2012	0	2.07	0.00 (0.00–1.77)
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)
OSS ORTHOPAEDIC HOSPITAL (18467)			
2013	2	3.28	0.61 (0.07–2.20)
2012	2	3.59	0.56 (0.06–2.01)
2011	0	3.20	0.00 (0.00–1.15)
2010	.	.	.
2009	.	.	.
ST. VINCENT HEALTH CENTER (11699)			
2013	1	3.28	0.30 (0.00–1.69)
2012	4	3.02	1.33 (0.36–3.39)
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)

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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)
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)			
2013	2	3.37	0.59 (0.07–2.14)
2012	3	3.10	0.97 (0.19–2.83)
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)
CHAMBERSBURG HOSPITAL (11913)			
2013	14	3.45	4.06 (2.22–6.82)
2012	7	3.99	1.76 (0.70–3.62)
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)
CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)			
2013	6	3.57	1.68 (0.61–3.66)
2012	2	4.32	0.46 (0.05–1.67)
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)
ST. MARY MEDICAL CENTER (11885)			
2013	2	3.78	0.53 (0.06–1.91)
2012	0	3.16	0.00 (0.00–1.16)
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)
BUCKS COUNTY SPECIALTY HOSPITAL (15202)			
2013	1	3.82	0.26 (0.00–1.46)
2012	3	3.24	0.93 (0.19–2.70)
2011	0	2.14	0.00 (0.00–1.71)
2010	0	1.02	0.00 (0.00–3.59)
2009	.	.	.
ROBERT PACKER HOSPITAL (12422)			
2013	1	3.85	0.26 (0.00–1.44)
2012	1	4.41	0.23 (0.00–1.26)
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)
MAIN LINE HOSPITAL BRYN MAWR (11753)			
2013	0	4.10	0.00 (0.00–0.89)
2012	1	4.72	0.21 (0.00–1.18)
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)
MAIN LINE HOSPITAL — PAOLI (11750)			
2013	2	4.15	0.48 (0.05–1.74)
2012	3	4.15	0.72 (0.15–2.11)
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)
ST. LUKES HOSPITAL BETHLEHEM (11718)			
2013	2	4.19	0.48 (0.05–1.72)
2012	5	3.65	1.37 (0.44–3.20)
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)

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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)
RIDDLE MEMORIAL HOSPITAL (11731)			
2013	2	4.20	0.48 (0.05–1.72)
2012	5	5.00	1.00 (0.32–2.34)
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)
UPMC HAMOT (11725)			
2013	6	4.59	1.31 (0.48–2.85)
2012	9	3.96	2.27 (1.04–4.31)
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)
ALTOONA REGIONAL HEALTH SYSTEM (10178)			
2013	1	4.59	0.22 (0.00–1.21)
2012	2	4.21	0.48 (0.05–1.72)
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)
JEFFERSON REGIONAL MEDICAL CENTER (10237)			
2013	7	4.70	1.49 (0.60–3.07)
2012	12	4.89	2.46 (1.27–4.29)
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)
UPMC PASSAVANT (11242)			
2013	2	4.77	0.42 (0.05–1.51)
2012	2	4.80	0.42 (0.05–1.50)
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)
UPMC ST MARGARET (11561)			
2013	5	4.81	1.04 (0.33–2.42)
2012	1	6.05	0.17 (0.00–0.92)
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)
GEISINGER MEDICAL CENTER (11775)			
2013	6	4.85	1.24 (0.45–2.69)
2012	7	5.38	1.30 (0.52–2.68)
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)
ST. CLAIR MEMORIAL HOSPITAL (10561)			
2013	4	4.92	0.81 (0.22–2.08)
2012	1	4.62	0.22 (0.00–1.20)
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)
READING HOSPITAL AND MEDICAL CENTER (12375)			
2013	4	5.52	0.73 (0.20–1.86)
2012	1	6.01	0.17 (0.00–0.93)
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)

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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)
MOUNT NITTANY MEDICAL CENTER (11797)			
2013	7	5.70	1.23 (0.49–2.53)
2012	8	4.94	1.62 (0.70–3.19)
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)
MILTON S HERSHEY MEDICAL CENTER (11747)			
2013	9	5.95	1.51 (0.69–2.87)
2012	6	6.72	0.89 (0.33–1.94)
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)
PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS (11448)			
2013	8	6.01	1.33 (0.57–2.62)
2012	11	6.08	1.81 (0.90–3.24)
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)
PENN PRESBYTERIAN MEDICAL CENTER (11814)			
2013	9	6.14	1.47 (0.67–2.78)
2012	7	6.81	1.03 (0.41–2.12)
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)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)			
2013	4	6.27	0.64 (0.17–1.63)
2012	1	7.14	0.14 (0.00–0.78)
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)
MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)			
2013	6	6.37	0.94 (0.34–2.05)
2012	11	6.06	1.82 (0.90–3.25)
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)
ABINGTON MEMORIAL HOSPITAL (11838)			
2013	7	6.67	1.05 (0.42–2.16)
2012	14	6.77	2.07 (1.13–3.47)
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)
ALLEGHENY GENERAL HOSPITAL (10648)			
2013	10	7.90	1.27 (0.61–2.33)
2012	12	7.79	1.54 (0.80–2.69)
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)
LEHIGH VALLEY HOSPITAL (11884)			
2013	17	8.45	2.01 (1.17–3.22)
2012	7	9.20	0.76 (0.30–1.57)
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)

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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)
PINNACLE HEALTH HOSPITALS (10122)			
2013	17	9.37	1.81 (1.06–2.90)
2012	8	8.49	0.94 (0.41–1.86)
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)
LANCASTER GENERAL HOSPITAL (10183)			
2013	3	10.29	0.29 (0.06–0.85)
2012	5	9.25	0.54 (0.17–1.26)
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)
UPMC PRESBYTERIAN SHADYSIDE — SHADYSIDE (10118)			
2013	8	13.72	0.58 (0.25–1.15)
2012	13	14.66	0.89 (0.47–1.52)
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)
THOMAS JEFFERSON UNIV HOSPITAL (11506)			
2013	9	14.00	0.64 (0.29–1.22)
2012	17	14.49	1.17 (0.68–1.88)
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)

Table 4.5.13: Rate (SIR) of Surgical Site Infections (SSIs) Associated with Abdominal Hysterectomy (HYST) by Hospital — Pennsylvania, 2009–2013

	Number of SSIs (HYST)	Predicted Number of SSIs (HYST)	SIR (95% CI)
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)			
2013	.	.	.
2012	.	.	.
2011	0	0.03	0.00 (0.00–144.04)
2010	0	0.01	0.00 (0.00–346.66)
2009	.	.	.
TYLER MEMORIAL HOSPITAL (11829)			
2013	.	.	.
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	0	0.06	0.00 (0.00–60.04)
CROZER CHESTER MEDICAL CENTER SPRINGFIELD (11851)			
2013	.	.	.
2012	0	2.09	0.00 (0.00–1.76)
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)
CROZER CHESTER MEDICAL CENTER TAYLOR (11932)			
2013	.	.	.
2012	0	0.01	0.00 (0.00–417.97)
2011	.	.	.
2010	.	.	.
2009	.	.	.
ROXBOROUGH MEMORIAL HOSPITAL (11978)			
2013	.	.	.
2012	.	.	.
2011	.	.	.
2010	0	0.14	0.00 (0.00–27.07)
2009	0	0.10	0.00 (0.00–35.19)
TROY COMMUNITY HOSPITAL (12018)			
2013	.	.	.
2012	0	0.01	0.00 (0.00–417.97)
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)
CORRY MEMORIAL HOSPITAL (12283)			
2013	.	.	.
2012	.	.	.
2011	.	.	.
2010	0	0.08	0.00 (0.00–45.06)
2009	0	0.13	0.00 (0.00–27.45)
MINERS MEDICAL CENTER (12295)			
2013	.	.	.
2012	.	.	.
2011	0	0.02	0.00 (0.00–200.32)
2010	0	0.01	0.00 (0.00–346.66)
2009	.	.	.
PALMERTON HOSPITAL (12396)			
2013	.	.	.
2012	0	0.01	0.00 (0.00–417.97)
2011	.	.	.
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)
BARNES-KASSON COUNTY HOSPITAL (12404)			
2013	.	.	.
2012	0	0.01	0.00 (0.00–417.97)
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)
COORDINATED HEALTH ORTHOPEDIC HOSPITAL, LLC (11872)			
2013	0	0.01	0.00 (0.00–392.98)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
BROOKVILLE HOSPITAL (12418)			
2013	0	0.01	0.00 (0.00–392.98)
2012	0	0.07	0.00 (0.00–52.74)
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)
ST. LUKES HOSPITAL ANDERSON CAMPUS (21487)			
2013	0	0.01	0.00 (0.00–263.07)
2012	0	0.01	0.00 (0.00–417.97)
2011	.	.	.
2010	.	.	.
2009	.	.	.
UPMC EAST (28812)			
2013	0	0.01	0.00 (0.00–263.07)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
JENNERSVILLE REGIONAL HOSPITAL (12337)			
2013	0	0.02	0.00 (0.00–196.49)
2012	0	0.02	0.00 (0.00–217.19)
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)
ST. LUKES MINERS MEMORIAL HOSPITAL (11784)			
2013	0	0.02	0.00 (0.00–157.58)
2012	0	0.04	0.00 (0.00–84.88)
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)
GEISINGER-COMMUNITY MEDICAL CENTER (11914)			
2013	0	0.02	0.00 (0.00–157.58)
2012	0	0.15	0.00 (0.00–25.20)
2011	0	0.04	0.00 (0.00–89.43)
2010	.	.	.
2009	.	.	.
GEISINGER-BLOOMSBURG HOSPITAL (12008)			
2013	0	0.02	0.00 (0.00–157.58)
2012	0	0.10	0.00 (0.00–38.53)
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)

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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)
ELLWOOD CITY HOSPITAL (11779)			
2013	0	0.03	0.00 (0.00–130.99)
2012	0	0.03	0.00 (0.00–106.50)
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)
LANSDALE HOSPITAL (12032)			
2013	0	0.03	0.00 (0.00–130.99)
2012	0	0.07	0.00 (0.00–53.77)
2011	.	.	.
2010	.	.	.
2009	0	0.04	0.00 (0.00–95.34)
JERSEY SHORE HOSPITAL (11689)			
2013	1	0.03	34.36 (0.45–191.16)
2012	.	.	.
2011	0	0.01	0.00 (0.00–323.09)
2010	.	.	.
2009	.	.	.
SOUTHWEST REGIONAL MEDICAL CENTER (11942)			
2013	0	0.03	0.00 (0.00–126.03)
2012	0	0.04	0.00 (0.00–88.86)
2011	0	0.02	0.00 (0.00–200.32)
2010	0	0.10	0.00 (0.00–35.76)
2009	.	.	.
GNADEN HUETTEN MEMORIAL HOSPITAL (12241)			
2013	0	0.04	0.00 (0.00–98.55)
2012	1	0.17	5.83 (0.08–32.43)
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)
TYRONE HOSPITAL (12717)			
2013	0	0.04	0.00 (0.00–98.24)
2012	0	0.03	0.00 (0.00–106.50)
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)
GROVE CITY MEDICAL CENTER (11722)			
2013	0	0.04	0.00 (0.00–95.42)
2012	0	0.16	0.00 (0.00–22.44)
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)
NASON HOSPITAL (11907)			
2013	0	0.04	0.00 (0.00–87.45)
2012	0	0.12	0.00 (0.00–30.18)
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)
SURGICAL INSTITUTE OF READING (12535)			
2013	0	0.06	0.00 (0.00–65.50)
2012	0	0.04	0.00 (0.00–84.88)
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)

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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)
HIGHLANDS HOSPITAL (11902)			
2013	0	0.06	0.00 (0.00–64.36)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
SUNBURY COMMUNITY HOSPITAL (12105)			
2013	0	0.07	0.00 (0.00–56.24)
2012	0	0.04	0.00 (0.00–86.20)
2011	.	.	.
2010	.	.	.
2009	0	0.01	0.00 (0.00–462.65)
ALBERT EINSTEIN MEDICAL CENTER AT ELKINS PARK (12500)			
2013	0	0.07	0.00 (0.00–51.71)
2012	1	0.51	1.98 (0.03–11.01)
2011	.	.	.
2010	.	.	.
2009	0	0.03	0.00 (0.00–120.09)
ST. LUKES QUAKERTOWN HOSPITAL (11711)			
2013	0	0.08	0.00 (0.00–48.48)
2012	0	0.06	0.00 (0.00–60.36)
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)
LOWER BUCKS HOSPITAL (12390)			
2013	0	0.08	0.00 (0.00–43.66)
2012	0	0.17	0.00 (0.00–21.14)
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)
WAYNESBORO HOSPITAL (11642)			
2013	1	0.09	11.31 (0.15–62.95)
2012	1	0.47	2.12 (0.03–11.77)
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)
ALLEGHENY VALLEY HOSPITAL (11842)			
2013	0	0.09	0.00 (0.00–38.89)
2012	0	0.24	0.00 (0.00–15.36)
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)
SCHUYLKILL MEDICAL CENTER — EAST NORWEGIAN STREET (11922)			
2013	0	0.10	0.00 (0.00–38.59)
2012	.	.	.
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)
PENN PRESBYTERIAN MEDICAL CENTER (11814)			
2013	0	0.11	0.00 (0.00–33.54)
2012	0	0.30	0.00 (0.00–12.09)
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)

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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 PRESBYTERIAN SHADYSIDE — PRESBYTERIAN (10348)			
2013	0	0.11	0.00 (0.00–31.95)
2012	0	0.13	0.00 (0.00–27.61)
2011	0	0.18	0.00 (0.00–20.13)
2010	0	0.02	0.00 (0.00–195.02)
2009	.	.	.
THE GOOD SAMARITAN HOSPITAL (11712)			
2013	1	0.12	8.58 (0.11–47.76)
2012	0	0.60	0.00 (0.00–6.12)
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)
THOMAS JEFFERSON UNIV HOSP - METHODIST (12017)			
2013	0	0.13	0.00 (0.00–29.18)
2012	0	0.14	0.00 (0.00–26.50)
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)
CHARLES COLE MEMORIAL HOSPITAL (11956)			
2013	0	0.14	0.00 (0.00–26.22)
2012	0	0.29	0.00 (0.00–12.84)
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)
MEMORIAL HOSPITAL, INC. TOWANDA (12549)			
2013	0	0.15	0.00 (0.00–25.00)
2012	0	0.21	0.00 (0.00–17.45)
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)
NAZARETH HOSPITAL (11919)			
2013	1	0.15	6.72 (0.09–37.40)
2012	1	0.04	23.50 (0.31–130.75)
2011	0	0.30	0.00 (0.00–12.43)
2010	.	.	.
2009	.	.	.
LOCK HAVEN HOSPITAL (12097)			
2013	0	0.15	0.00 (0.00–23.90)
2012	1	0.11	8.97 (0.12–49.93)
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)
OHIO VALLEY GENERAL HOSPITAL (12298)			
2013	0	0.16	0.00 (0.00–23.15)
2012	0	0.06	0.00 (0.00–61.03)
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)
PHYSICIANS CARE SURGICAL HOSPITAL (19630)			
2013	0	0.16	0.00 (0.00–23.12)
2012	0	0.07	0.00 (0.00–52.25)
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)
ARMSTRONG COUNTY MEMORIAL HOSPITAL (12057)			
2013	0	0.16	0.00 (0.00–22.50)
2012	0	0.13	0.00 (0.00–28.29)
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)
BERWICK HOSPITAL CENTER (11442)			
2013	0	0.17	0.00 (0.00–21.88)
2012	0	0.31	0.00 (0.00–12.02)
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)
CANONSBURG GENERAL HOSPITAL (11586)			
2013	0	0.19	0.00 (0.00–19.03)
2012	0	0.07	0.00 (0.00–53.77)
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)
JEFFERSON REGIONAL MEDICAL CENTER (10237)			
2013	0	0.20	0.00 (0.00–18.13)
2012	0	0.17	0.00 (0.00–21.34)
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)
MONONGAHELA VALLEY HOSPITAL (11069)			
2013	0	0.20	0.00 (0.00–18.00)
2012	0	0.23	0.00 (0.00–15.81)
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)
WINDBER HOSPITAL (12031)			
2013	0	0.21	0.00 (0.00–17.70)
2012	0	0.22	0.00 (0.00–16.80)
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)
ST. JOSEPHS HOSPITAL (12438)			
2013	0	0.25	0.00 (0.00–14.87)
2012	0	0.17	0.00 (0.00–21.51)
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)
TITUSVILLE AREA HOSPITAL (11738)			
2013	0	0.25	0.00 (0.00–14.84)
2012	0	0.44	0.00 (0.00–8.38)
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)
EVANGELICAL COMMUNITY HOSPITAL (11701)			
2013	0	0.25	0.00 (0.00–14.72)
2012	0	0.41	0.00 (0.00–8.93)
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)

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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)
SHARON REGIONAL HEALTH SYSTEM (12250)			
2013	0	0.27	0.00 (0.00–13.47)
2012	0	0.31	0.00 (0.00–12.01)
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)
CLEARFIELD HOSPITAL (11843)			
2013	0	0.28	0.00 (0.00–13.11)
2012	0	0.38	0.00 (0.00–9.63)
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)
UPMC MCKEESPORT (11707)			
2013	1	0.28	3.55 (0.05–19.75)
2012	0	0.39	0.00 (0.00–9.50)
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)
BRANDYWINE HOSPITAL (11979)			
2013	0	0.28	0.00 (0.00–12.98)
2012	1	0.48	2.10 (0.03–11.71)
2011	0	0.61	0.00 (0.00–5.98)
2010	.	.	.
2009	.	.	.
HOLY SPIRIT HOSPITAL (12387)			
2013	0	0.28	0.00 (0.00–12.97)
2012	0	0.29	0.00 (0.00–12.76)
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)
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)			
2013	1	0.29	3.40 (0.04–18.89)
2012	0	0.46	0.00 (0.00–7.92)
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)
POTTSTOWN MEMORIAL MEDICAL CENTER (11983)			
2013	0	0.30	0.00 (0.00–12.29)
2012	1	0.42	2.40 (0.03–13.38)
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)
JAMESON MEMORIAL HOSPITAL (11954)			
2013	0	0.30	0.00 (0.00–12.25)
2012	0	0.46	0.00 (0.00–8.04)
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)
HAZLETON GENERAL HOSPITAL (11878)			
2013	0	0.30	0.00 (0.00–12.24)
2012	1	0.41	2.43 (0.03–13.51)
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)

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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)
GETTYSBURG HOSPITAL (11531)			
2013	0	0.31	0.00 (0.00–12.02)
2012	5	0.54	9.22 (2.97–21.51)
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)
CLARION HOSPITAL (11654)			
2013	1	0.34	2.98 (0.04–16.60)
2012	0	0.51	0.00 (0.00–7.24)
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)
CHAMBERSBURG HOSPITAL (11913)			
2013	0	0.34	0.00 (0.00–10.67)
2012	0	0.45	0.00 (0.00–8.06)
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)
WAYNE MEMORIAL HOSPITAL (12004)			
2013	3	0.35	8.65 (1.74–25.26)
2012	2	0.46	4.34 (0.49–15.67)
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)
PUNXSUTAWNEY AREA HOSPITAL (11830)			
2013	2	0.36	5.57 (0.63–20.11)
2012	0	0.35	0.00 (0.00–10.37)
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)
ELK REGIONAL HEALTH CENTER (11859)			
2013	0	0.38	0.00 (0.00–9.67)
2012	1	0.49	2.06 (0.03–11.47)
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)
BRADFORD REGIONAL MEDICAL CENTER (12361)			
2013	0	0.40	0.00 (0.00–9.25)
2012	0	0.31	0.00 (0.00–11.77)
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)
UPMC NORTHWEST (11837)			
2013	1	0.43	2.32 (0.03–12.91)
2012	2	0.70	2.84 (0.32–10.26)
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)
MILLCREEK COMMUNITY HOSPITAL (12253)			
2013	0	0.46	0.00 (0.00–7.96)
2012	0	0.51	0.00 (0.00–7.13)
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)

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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)
SOLDIERS & SAILORS MEM HOSPITAL (11688)			
2013	0	0.46	0.00 (0.00–7.93)
2012	1	0.83	1.21 (0.02–6.73)
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)
ALLEGHENY GENERAL HOSPITAL (10648)			
2013	0	0.47	0.00 (0.00–7.86)
2012	1	0.47	2.15 (0.03–11.95)
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)
DOYLESTOWN HOSPITAL (10190)			
2013	0	0.49	0.00 (0.00–7.56)
2012	0	0.55	0.00 (0.00–6.71)
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)
MERCY PHILADELPHIA HOSPITAL (11946)			
2013	0	0.54	0.00 (0.00–6.73)
2012	0	0.52	0.00 (0.00–7.05)
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)
UPMC ST MARGARET (11561)			
2013	1	0.56	1.79 (0.02–9.97)
2012	1	0.44	2.25 (0.03–12.51)
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)
SOMERSET HOSPITAL (12282)			
2013	2	0.57	3.54 (0.40–12.77)
2012	0	0.41	0.00 (0.00–8.90)
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)
EASTERN REGIONAL MEDICAL CENTER (12348)			
2013	1	0.57	1.77 (0.02–9.83)
2012	1	0.35	2.90 (0.04–16.11)
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)
UPMC HORIZON (11675)			
2013	0	0.57	0.00 (0.00–6.46)
2012	0	0.80	0.00 (0.00–4.58)
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)
ST. JOSEPH MEDICAL CENTER (11961)			
2013	0	0.60	0.00 (0.00–6.15)
2012	0	0.80	0.00 (0.00–4.56)
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)

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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)
MEADVILLE MEDICAL CENTER (11583)			
2013	2	0.62	3.23 (0.36–11.66)
2012	0	0.55	0.00 (0.00–6.61)
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)
WARREN GENERAL HOSPITAL (12216)			
2013	1	0.62	1.60 (0.02–8.92)
2012	0	0.79	0.00 (0.00–4.65)
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)
HANOVER HOSPITAL (11899)			
2013	0	0.63	0.00 (0.00–5.84)
2012	1	0.78	1.29 (0.02–7.16)
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)
HERITAGE VALLEY BEAVER (11831)			
2013	0	0.64	0.00 (0.00–5.72)
2012	1	0.74	1.35 (0.02–7.53)
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)
HERITAGE VALLEY SEWICKLEY (10375)			
2013	0	0.65	0.00 (0.00–5.66)
2012	0	0.48	0.00 (0.00–7.60)
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)
UPMC BEDFORD (11680)			
2013	0	0.66	0.00 (0.00–5.53)
2012	1	0.92	1.09 (0.01–6.08)
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)
J C BLAIR MEMORIAL HOSP (11724)			
2013	2	0.67	2.98 (0.33–10.75)
2012	2	0.60	3.35 (0.38–12.11)
2011	3	0.32	9.49 (1.91–27.73)
2010	.	.	.
2009	1	0.06	15.48 (0.20–86.13)
MERCY FITZGERALD HOSPITAL (11683)			
2013	0	0.68	0.00 (0.00–5.37)
2012	1	0.53	1.88 (0.02–10.49)
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)
MAIN LINE HOSPITAL BRYN MAWR (11753)			
2013	0	0.70	0.00 (0.00–5.24)
2012	0	0.81	0.00 (0.00–4.50)
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)

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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)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)			
2013	1	0.74	1.35 (0.02–7.53)
2012	0	1.18	0.00 (0.00–3.10)
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)
LANCASTER REGIONAL MEDICAL CENTER (12335)			
2013	0	0.75	0.00 (0.00–4.88)
2012	1	0.28	3.61 (0.05–20.08)
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)
INDIANA REGIONAL MEDICAL CENTER (11759)			
2013	0	0.76	0.00 (0.00–4.86)
2012	1	0.59	1.70 (0.02–9.47)
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)
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)			
2013	0	0.79	0.00 (0.00–4.66)
2012	0	0.85	0.00 (0.00–4.32)
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)
REGIONAL HOSPITAL OF SCRANTON (12533)			
2013	0	0.85	0.00 (0.00–4.29)
2012	0	0.75	0.00 (0.00–4.90)
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)
ARIA HEALTH (11388)			
2013	0	0.87	0.00 (0.00–4.21)
2012	0	1.29	0.00 (0.00–2.84)
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)
HOLY REDEEMER HOSPITAL AND MEDICAL CENTER (11973)			
2013	2	0.91	2.20 (0.25–7.93)
2012	0	1.37	0.00 (0.00–2.68)
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)
JEANES HOSPITAL (11459)			
2013	1	0.93	1.08 (0.01–6.01)
2012	0	0.69	0.00 (0.00–5.28)
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)
POCONO MEDICAL CENTER (11772)			
2013	0	0.93	0.00 (0.00–3.94)
2012	0	2.34	0.00 (0.00–1.57)
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)

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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)			
2013	1	0.94	1.07 (0.01–5.94)
2012	0	1.11	0.00 (0.00–3.30)
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)
ST. CLAIR MEMORIAL HOSPITAL (10561)			
2013	0	0.97	0.00 (0.00–3.78)
2012	2	1.57	1.27 (0.14–4.60)
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)
GRAND VIEW HOSPITAL (11847)			
2013	1	0.97	1.03 (0.01–5.72)
2012	1	2.01	0.50 (0.01–2.77)
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)
ST. VINCENT HEALTH CENTER (11699)			
2013	1	0.99	1.01 (0.01–5.64)
2012	2	1.14	1.76 (0.20–6.36)
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)
FORBES REGIONAL HOSPITAL (11265)			
2013	0	1.01	0.00 (0.00–3.63)
2012	0	1.42	0.00 (0.00–2.58)
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)
MOUNT NITTANY MEDICAL CENTER (11797)			
2013	1	1.01	0.99 (0.01–5.48)
2012	3	1.78	1.69 (0.34–4.92)
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)
MERCY SUBURBAN HOSPITAL NORRISTOWN (11952)			
2013	5	1.09	4.57 (1.47–10.67)
2012	0	0.96	0.00 (0.00–3.82)
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)
MEMORIAL HOSPITAL (11633)			
2013	3	1.10	2.73 (0.55–7.97)
2012	0	0.75	0.00 (0.00–4.91)
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)
BUTLER MEMORIAL HOSPITAL (11736)			
2013	3	1.14	2.63 (0.53–7.68)
2012	7	1.41	4.96 (1.99–10.21)
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)

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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)
ALTOONA REGIONAL HEALTH SYSTEM (10178)			
2013	4	1.19	3.35 (0.90–8.59)
2012	6	1.41	4.25 (1.55–9.26)
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)
ALBERT EINSTEIN MEDICAL CENTER (10585)			
2013	1	1.27	0.79 (0.01–4.37)
2012	0	1.97	0.00 (0.00–1.86)
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)
EXCELA HEALTH LATROBE HOSPITAL (11651)			
2013	1	1.29	0.77 (0.01–4.31)
2012	2	1.93	1.04 (0.12–3.74)
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)
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)			
2013	1	1.31	0.76 (0.01–4.25)
2012	2	2.37	0.84 (0.09–3.04)
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)
EINSTEIN MEDICAL CENTER MONTGOMERY (30210)			
2013	1	1.32	0.76 (0.01–4.21)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
ROBERT PACKER HOSPITAL (12422)			
2013	1	1.32	0.76 (0.01–4.21)
2012	2	2.43	0.82 (0.09–2.97)
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)
EASTON HOSPITAL (11929)			
2013	1	1.32	0.76 (0.01–4.20)
2012	0	1.70	0.00 (0.00–2.16)
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)
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)			
2013	9	1.34	6.70 (3.06–12.71)
2012	4	1.33	3.00 (0.81–7.69)
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)
MAIN LINE HOSPITAL — PAOLI (11750)			
2013	1	1.36	0.73 (0.01–4.08)
2012	0	1.18	0.00 (0.00–3.12)
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)

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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)
DUBOIS REGIONAL MEDICAL CENTER (11606)			
2013	1	1.39	0.72 (0.01–4.00)
2012	0	0.39	0.00 (0.00–9.31)
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)
UPMC PRESBYTERIAN SHADYSIDE — SHADYSIDE (10118)			
2013	1	1.50	0.67 (0.01–3.70)
2012	2	1.98	1.01 (0.11–3.64)
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)
CARLISLE REGIONAL MEDICAL CENTER (11997)			
2013	1	1.56	0.64 (0.01–3.56)
2012	1	1.37	0.73 (0.01–4.05)
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)
MOSES TAYLOR HOSPITAL (11528)			
2013	0	1.59	0.00 (0.00–2.31)
2012	0	1.85	0.00 (0.00–1.98)
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)
SCHUYLKILL MEDICAL CENTER — SOUTH JACKSON STREET (12087)			
2013	0	1.64	0.00 (0.00–2.24)
2012	5	0.51	9.71 (3.13–22.67)
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)
CHESTNUT HILL HOSPITAL (12304)			
2013	0	1.65	0.00 (0.00–2.22)
2012	0	1.76	0.00 (0.00–2.08)
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)
UNIONTOWN HOSPITAL (10441)			
2013	2	1.67	1.20 (0.13–4.34)
2012	2	1.71	1.17 (0.13–4.23)
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)
LEWISTOWN HOSPITAL (11825)			
2013	2	1.69	1.18 (0.13–4.26)
2012	2	2.04	0.98 (0.11–3.53)
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)
WILKES-BARRE GENERAL HOSPITAL (11916)			
2013	1	1.73	0.58 (0.01–3.22)
2012	3	1.23	2.44 (0.49–7.14)
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)

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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)
SACRED HEART HOSPITAL (11684)			
2013	2	1.77	1.13 (0.13–4.07)
2012	3	3.10	0.97 (0.19–2.82)
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)
EPHRATA COMMUNITY HOSPITAL (11764)			
2013	0	1.80	0.00 (0.00–2.04)
2012	0	1.84	0.00 (0.00–1.99)
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)
THE WASHINGTON HOSPITAL (11460)			
2013	1	2.04	0.49 (0.01–2.73)
2012	2	1.52	1.31 (0.15–4.74)
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)
ST. LUKES HOSPITAL BETHLEHEM (11718)			
2013	6	2.11	2.84 (1.04–6.18)
2012	4	2.19	1.83 (0.49–4.69)
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)
ST. MARY MEDICAL CENTER (11885)			
2013	2	2.16	0.92 (0.10–3.34)
2012	3	3.24	0.93 (0.19–2.71)
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)
UPMC HAMOT (11725)			
2013	1	2.38	0.42 (0.01–2.33)
2012	0	1.00	0.00 (0.00–3.65)
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)
CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)			
2013	1	2.42	0.41 (0.01–2.30)
2012	1	0.98	1.02 (0.01–5.68)
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)
HEART OF LANCASTER REGIONAL MEDICAL CENTER (12571)			
2013	4	2.63	1.52 (0.41–3.89)
2012	2	2.94	0.68 (0.08–2.46)
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)
LEHIGH VALLEY HOSPITAL — MUHLENBERG (11898)			
2013	0	2.88	0.00 (0.00–1.27)
2012	0	0.91	0.00 (0.00–4.03)
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)

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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)
HAHNEMANN UNIVERSITY HOSPITAL (11437)			
2013	5	3.02	1.65 (0.53–3.86)
2012	3	2.58	1.16 (0.23–3.40)
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)
GEISINGER MEDICAL CENTER (11775)			
2013	8	3.06	2.61 (1.12–5.15)
2012	8	4.37	1.83 (0.79–3.61)
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)
CROZER CHESTER MEDICAL CENTER (11839)			
2013	2	3.16	0.63 (0.07–2.29)
2012	1	2.60	0.39 (0.01–2.14)
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)
CHESTER COUNTY HOSPITAL (12016)			
2013	8	3.38	2.37 (1.02–4.67)
2012	1	3.99	0.25 (0.00–1.40)
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)
HOSPITAL OF FOX CHASE CANCER CENTER (12134)			
2013	1	3.87	0.26 (0.00–1.44)
2012	3	4.60	0.65 (0.13–1.90)
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)
UPMC MERCY (10384)			
2013	7	4.29	1.63 (0.65–3.36)
2012	15	5.30	2.83 (1.58–4.67)
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)
HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)			
2013	5	4.31	1.16 (0.37–2.71)
2012	9	3.89	2.32 (1.06–4.40)
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)
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)			
2013	4	4.41	0.91 (0.24–2.32)
2012	4	5.37	0.75 (0.20–1.91)
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)
TEMPLE UNIVERSITY HOSPITAL (12382)			
2013	4	4.55	0.88 (0.24–2.25)
2012	2	6.04	0.33 (0.04–1.19)
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)

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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)
THOMAS JEFFERSON UNIV HOSPITAL (11506)			
2013	7	4.60	1.52 (0.61–3.13)
2012	11	5.99	1.84 (0.92–3.28)
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)
MILTON S HERSHEY MEDICAL CENTER (11747)			
2013	3	4.74	0.63 (0.13–1.85)
2012	0	5.46	0.00 (0.00–0.67)
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)
PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS (11448)			
2013	3	4.96	0.60 (0.12–1.77)
2012	3	5.38	0.56 (0.11–1.63)
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)
LANCASTER GENERAL HOSPITAL (10183)			
2013	4	5.06	0.79 (0.21–2.03)
2012	3	1.51	1.99 (0.40–5.82)
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)
READING HOSPITAL AND MEDICAL CENTER (12375)			
2013	6	5.56	1.08 (0.39–2.35)
2012	4	7.68	0.52 (0.14–1.33)
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)
THE WESTERN PENNSYLVANIA HOSPITAL (11864)			
2013	9	5.70	1.58 (0.72–3.00)
2012	4	6.29	0.64 (0.17–1.63)
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)
UPMC PASSAVANT (11242)			
2013	3	6.02	0.50 (0.10–1.46)
2012	11	6.36	1.73 (0.86–3.10)
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)
YORK HOSPITAL (10108)			
2013	4	6.24	0.64 (0.17–1.64)
2012	6	6.62	0.91 (0.33–1.97)
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)
ABINGTON MEMORIAL HOSPITAL (11838)			
2013	8	7.39	1.08 (0.47–2.13)
2012	7	6.56	1.07 (0.43–2.20)
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)
PINNACLE HEALTH HOSPITALS (10122)			
2013	10	8.55	1.17 (0.56–2.15)
2012	9	9.43	0.95 (0.44–1.81)
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)
LEHIGH VALLEY HOSPITAL (11884)			
2013	4	9.93	0.40 (0.11–1.03)
2012	7	11.53	0.61 (0.24–1.25)
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)
MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)			
2013	10	14.09	0.71 (0.34–1.31)
2012	22	17.86	1.23 (0.77–1.87)
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)

Table 4.5.14: Rate (SIR) of Surgical Site Infections (SSIs) Associated with Colon Surgery by Hospital — Pennsylvania, 2009–2013

	Number of SSIs (COLO)	Predicted Number of SSIs (COLO)	SIR (95% CI)
BARNES-KASSON COUNTY HOSPITAL (12404)			
2013	.	.	.
2012	0	0.05	0.00 (0.00–67.52)
CORRY MEMORIAL HOSPITAL (12283)			
2013	0	0.04	0.00 (0.00–82.95)
2012	0	0.38	0.00 (0.00–9.57)
BERWICK HOSPITAL CENTER (11442)			
2013	0	0.06	0.00 (0.00–60.22)
2012	0	0.28	0.00 (0.00–12.90)
TROY COMMUNITY HOSPITAL (12018)			
2013	0	0.06	0.00 (0.00–60.22)
2012	0	0.05	0.00 (0.00–67.52)
MINERS MEDICAL CENTER (12295)			
2013	0	0.10	0.00 (0.00–36.36)
2012	0	0.32	0.00 (0.00–11.35)
LOCK HAVEN HOSPITAL (12097)			
2013	0	0.11	0.00 (0.00–34.89)
2012	0	0.27	0.00 (0.00–13.39)
KANE COMMUNITY HOSPITAL (12111)			
2013	0	0.27	0.00 (0.00–13.62)
2012	0	0.38	0.00 (0.00–9.63)
GROVE CITY MEDICAL CENTER (11722)			
2013	0	0.27	0.00 (0.00–13.41)
2012	1	0.55	1.81 (0.02–10.06)
MEMORIAL HOSPITAL, INC. TOWANDA (12549)			
2013	1	0.28	3.55 (0.05–19.73)
2012	1	0.15	6.77 (0.09–37.68)
BROOKVILLE HOSPITAL (12418)			
2013	1	0.30	3.35 (0.04–18.63)
2012	0	0.40	0.00 (0.00–9.08)
ELLWOOD CITY HOSPITAL (11779)			
2013	0	0.31	0.00 (0.00–11.95)
2012	0	0.82	0.00 (0.00–4.47)
MUNCY VALLEY HOSPITAL (11748)			
2013	1	0.31	3.21 (0.04–17.88)
2012	0	0.35	0.00 (0.00–10.59)
TYRONE HOSPITAL (12717)			
2013	0	0.34	0.00 (0.00–10.89)
2012	0	0.08	0.00 (0.00–44.60)
J C BLAIR MEMORIAL HOSP (11724)			
2013	1	0.37	2.70 (0.04–15.04)
2012	2	0.33	6.11 (0.69–22.05)
PHYSICIANS CARE SURGICAL HOSPITAL (19630)			
2013	0	0.37	0.00 (0.00–9.85)
2012	0	0.39	0.00 (0.00–9.37)
MILLCREEK COMMUNITY HOSPITAL (12253)			
2013	0	0.38	0.00 (0.00–9.58)
2012	0	0.23	0.00 (0.00–15.95)
SURGICAL INSTITUTE OF READING (12535)			
2013	0	0.40	0.00 (0.00–9.18)
2012	2	0.34	5.84 (0.66–21.09)
WAYNESBORO HOSPITAL (11642)			
2013	0	0.46	0.00 (0.00–8.00)
2012	2	0.92	2.17 (0.24–7.85)

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Table 4.5.14 – Rate of SSIs (SIR) — COLO Procedures – Continued from previous page

	Number of SSIs (COLO)	Predicted Number of SSIs (COLO)	SIR (95% CI)
UPMC BEDFORD (11680)			
2013	1	0.46	2.17 (0.03–12.08)
2012	1	0.47	2.12 (0.03–11.81)
TYLER MEMORIAL HOSPITAL (11829)			
2013	0	0.47	0.00 (0.00–7.77)
2012	0	0.39	0.00 (0.00–9.38)
ST. JOSEPHS HOSPITAL (12438)			
2013	0	0.49	0.00 (0.00–7.45)
2012	0	0.67	0.00 (0.00–5.45)
ST. LUKES MINERS MEMORIAL HOSPITAL (11784)			
2013	0	0.69	0.00 (0.00–5.35)
2012	1	0.73	1.37 (0.02–7.61)
HIGHLANDS HOSPITAL (11902)			
2013	0	0.69	0.00 (0.00–5.34)
2012	3	0.93	3.22 (0.65–9.41)
TITUSVILLE AREA HOSPITAL (11738)			
2013	2	0.69	2.88 (0.32–10.40)
2012	2	0.55	3.67 (0.41–13.24)
ROXBOROUGH MEMORIAL HOSPITAL (11978)			
2013	0	0.70	0.00 (0.00–5.21)
2012	0	0.50	0.00 (0.00–7.35)
HEART OF LANCASTER REGIONAL MEDICAL CENTER (12571)			
2013	0	0.72	0.00 (0.00–5.07)
2012	3	1.02	2.95 (0.59–8.62)
CROZER CHESTER MEDICAL CENTER SPRINGFIELD (11851)			
2013	0	0.73	0.00 (0.00–5.06)
2012	0	0.53	0.00 (0.00–6.98)
BRADFORD REGIONAL MEDICAL CENTER (12361)			
2013	2	0.73	2.75 (0.31–9.92)
2012	1	1.04	0.97 (0.01–5.37)
ELK REGIONAL HEALTH CENTER (11859)			
2013	0	0.74	0.00 (0.00–4.93)
2012	1	0.65	1.55 (0.02–8.61)
PUNXSUTAWNEY AREA HOSPITAL (11830)			
2013	0	0.77	0.00 (0.00–4.79)
2012	4	1.02	3.92 (1.05–10.03)
JERSEY SHORE HOSPITAL (11689)			
2013	1	0.79	1.27 (0.02–7.07)
2012	1	0.70	1.43 (0.02–7.98)
WARREN GENERAL HOSPITAL (12216)			
2013	3	0.81	3.69 (0.74–10.79)
2012	2	0.88	2.28 (0.26–8.22)
SUNBURY COMMUNITY HOSPITAL (12105)			
2013	1	0.82	1.22 (0.02–6.80)
2012	2	0.88	2.27 (0.26–8.20)
GNADEN HUETTEN MEMORIAL HOSPITAL (12241)			
2013	2	0.83	2.40 (0.27–8.68)
2012	3	1.33	2.25 (0.45–6.58)
ST. LUKES HOSPITAL ANDERSON CAMPUS (21487)			
2013	1	0.97	1.03 (0.01–5.74)
2012	1	1.06	0.94 (0.01–5.24)
LOWER BUCKS HOSPITAL (12390)			
2013	0	1.10	0.00 (0.00–3.32)
2012	0	1.01	0.00 (0.00–3.64)
UPMC EAST (28812)			
2013	3	1.18	2.54 (0.51–7.41)
2012	.	.	.

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Table 4.5.14 – Rate of SSIs (SIR) — COLO Procedures – Continued from previous page

	Number of SSIs (COLO)	Predicted Number of SSIs (COLO)	SIR (95% CI)
ST. LUKES QUAKERTOWN HOSPITAL (11711)			
2013	1	1.19	0.84 (0.01–4.66)
2012	1	1.12	0.89 (0.01–4.98)
CHARLES COLE MEMORIAL HOSPITAL (11956)			
2013	1	1.19	0.84 (0.01–4.66)
2012	3	0.66	4.55 (0.91–13.28)
CLARION HOSPITAL (11654)			
2013	1	1.23	0.81 (0.01–4.51)
2012	0	0.64	0.00 (0.00–5.70)
PALMERTON HOSPITAL (12396)			
2013	3	1.35	2.23 (0.45–6.52)
2012	1	1.07	0.93 (0.01–5.20)
SOLDIERS & SAILORS MEM HOSPITAL (11688)			
2013	2	1.38	1.45 (0.16–5.23)
2012	4	1.10	3.64 (0.98–9.33)
SACRED HEART HOSPITAL (11684)			
2013	2	1.40	1.43 (0.16–5.15)
2012	3	1.59	1.89 (0.38–5.52)
GEISINGER-BLOOMSBURG HOSPITAL (12008)			
2013	2	1.55	1.29 (0.14–4.66)
2012	1	1.03	0.97 (0.01–5.42)
ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)			
2013	1	1.56	0.64 (0.01–3.56)
2012	1	1.38	0.72 (0.01–4.02)
CHESTNUT HILL HOSPITAL (12304)			
2013	2	1.61	1.24 (0.14–4.49)
2012	1	0.98	1.02 (0.01–5.66)
SOUTHWEST REGIONAL MEDICAL CENTER (11942)			
2013	0	1.70	0.00 (0.00–2.16)
2012	0	2.10	0.00 (0.00–1.75)
NASON HOSPITAL (11907)			
2013	6	1.70	3.53 (1.29–7.69)
2012	0	1.74	0.00 (0.00–2.11)
GETTYSBURG HOSPITAL (11531)			
2013	3	1.86	1.61 (0.32–4.71)
2012	2	2.54	0.79 (0.09–2.84)
JENNERSVILLE REGIONAL HOSPITAL (12337)			
2013	2	1.93	1.04 (0.12–3.74)
2012	2	1.33	1.50 (0.17–5.43)
UPMC NORTHWEST (11837)			
2013	1	1.96	0.51 (0.01–2.85)
2012	1	1.73	0.58 (0.01–3.22)
EXCELA HEALTH FRICK HOSPITAL (11639)			
2013	2	2.04	0.98 (0.11–3.54)
2012	1	1.24	0.81 (0.01–4.48)
MEMORIAL HOSPITAL (11633)			
2013	6	2.07	2.90 (1.06–6.32)
2012	5	1.78	2.81 (0.91–6.55)
ALBERT EINSTEIN MEDICAL CENTER AT ELKINS PARK (12500)			
2013	1	2.14	0.47 (0.01–2.60)
2012	2	1.25	1.61 (0.18–5.80)
JAMESON MEMORIAL HOSPITAL (11954)			
2013	2	2.16	0.93 (0.10–3.34)
2012	4	3.72	1.08 (0.29–2.76)
CLEARFIELD HOSPITAL (11843)			
2013	0	2.22	0.00 (0.00–1.65)
2012	2	2.33	0.86 (0.10–3.11)

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Table 4.5.14 – Rate of SSIs (SIR) — COLO Procedures – Continued from previous page

	Number of SSIs (COLO)	Predicted Number of SSIs (COLO)	SIR (95% CI)
THOMAS JEFFERSON UNIV HOSP - METHODIST (12017)			
2013	1	2.23	0.45 (0.01–2.50)
2012	1	1.29	0.78 (0.01–4.32)
SHARON REGIONAL HEALTH SYSTEM (12250)			
2013	2	2.27	0.88 (0.10–3.18)
2012	3	2.36	1.27 (0.26–3.72)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)			
2013	3	2.30	1.31 (0.26–3.82)
2012	5	2.02	2.48 (0.80–5.78)
SCHUYLKILL MEDICAL CENTER — SOUTH JACKSON STREET (12087)			
2013	0	2.30	0.00 (0.00–1.59)
2012	2	2.00	1.00 (0.11–3.61)
LANSDALE HOSPITAL (12032)			
2013	0	2.30	0.00 (0.00–1.59)
2012	0	2.90	0.00 (0.00–1.27)
OHIO VALLEY GENERAL HOSPITAL (12298)			
2013	1	2.31	0.43 (0.01–2.41)
2012	3	1.54	1.95 (0.39–5.68)
THE WESTERN PENNSYLVANIA HOSPITAL (11864)			
2013	3	2.36	1.27 (0.26–3.72)
2012	1	1.09	0.91 (0.01–5.08)
ARMSTRONG COUNTY MEMORIAL HOSPITAL (12057)			
2013	1	2.44	0.41 (0.01–2.28)
2012	2	2.38	0.84 (0.09–3.04)
HANOVER HOSPITAL (11899)			
2013	0	2.46	0.00 (0.00–1.49)
2012	6	2.22	2.70 (0.99–5.88)
SOMERSET HOSPITAL (12282)			
2013	2	2.54	0.79 (0.09–2.84)
2012	1	2.16	0.46 (0.01–2.57)
WINDBER HOSPITAL (12031)			
2013	1	2.60	0.38 (0.01–2.14)
2012	1	2.36	0.42 (0.01–2.36)
WAYNE MEMORIAL HOSPITAL (12004)			
2013	5	2.62	1.91 (0.61–4.45)
2012	6	2.40	2.50 (0.91–5.43)
MEADVILLE MEDICAL CENTER (11583)			
2013	2	2.63	0.76 (0.09–2.74)
2012	1	2.56	0.39 (0.01–2.18)
LEWISTOWN HOSPITAL (11825)			
2013	1	2.70	0.37 (0.00–2.06)
2012	5	2.63	1.90 (0.61–4.43)
LANCASTER REGIONAL MEDICAL CENTER (12335)			
2013	4	2.76	1.45 (0.39–3.71)
2012	2	1.96	1.02 (0.11–3.69)
UPMC MCKEESPORT (11707)			
2013	0	2.78	0.00 (0.00–1.32)
2012	2	2.45	0.82 (0.09–2.94)
CARLISLE REGIONAL MEDICAL CENTER (11997)			
2013	4	2.84	1.41 (0.38–3.60)
2012	4	3.11	1.29 (0.35–3.30)
EINSTEIN MEDICAL CENTER MONTGOMERY (30210)			
2013	0	2.84	0.00 (0.00–1.29)
2012	.	.	.
CANONSBURG GENERAL HOSPITAL (11586)			
2013	0	2.89	0.00 (0.00–1.27)
2012	2	2.95	0.68 (0.08–2.45)

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Table 4.5.14 – Rate of SSIs (SIR) — COLO Procedures – Continued from previous page

	Number of SSIs (COLO)	Predicted Number of SSIs (COLO)	SIR (95% CI)
MERCY PHILADELPHIA HOSPITAL (11946)			
2013	4	2.91	1.37 (0.37–3.52)
2012	2	2.82	0.71 (0.08–2.56)
POTTSTOWN MEMORIAL MEDICAL CENTER (11983)			
2013	1	2.95	0.34 (0.00–1.89)
2012	0	3.51	0.00 (0.00–1.05)
INDIANA REGIONAL MEDICAL CENTER (11759)			
2013	3	3.03	0.99 (0.20–2.89)
2012	4	3.32	1.21 (0.32–3.09)
ALLEGHENY VALLEY HOSPITAL (11842)			
2013	7	3.15	2.22 (0.89–4.58)
2012	3	2.48	1.21 (0.24–3.53)
JEANES HOSPITAL (11459)			
2013	2	3.17	0.63 (0.07–2.28)
2012	1	3.56	0.28 (0.00–1.56)
GRAND VIEW HOSPITAL (11847)			
2013	4	3.29	1.22 (0.33–3.11)
2012	2	4.43	0.45 (0.05–1.63)
UPMC HORIZON (11675)			
2013	1	3.35	0.30 (0.00–1.66)
2012	2	3.09	0.65 (0.07–2.34)
EASTERN REGIONAL MEDICAL CENTER (12348)			
2013	19	3.62	5.25 (3.16–8.21)
2012	13	3.03	4.30 (2.29–7.35)
MERCY SUBURBAN HOSPITAL NORRISTOWN (11952)			
2013	2	3.74	0.53 (0.06–1.93)
2012	0	3.81	0.00 (0.00–0.96)
ST. JOSEPH MEDICAL CENTER (11961)			
2013	4	3.81	1.05 (0.28–2.69)
2012	5	3.60	1.39 (0.45–3.24)
EVANGELICAL COMMUNITY HOSPITAL (11701)			
2013	12	3.89	3.09 (1.59–5.39)
2012	4	2.61	1.53 (0.41–3.92)
MERCY FITZGERALD HOSPITAL (11683)			
2013	6	3.98	1.51 (0.55–3.28)
2012	2	3.59	0.56 (0.06–2.01)
EPHRATA COMMUNITY HOSPITAL (11764)			
2013	7	4.03	1.74 (0.70–3.58)
2012	4	3.93	1.02 (0.27–2.61)
THE GOOD SAMARITAN HOSPITAL (11712)			
2013	5	4.08	1.23 (0.40–2.86)
2012	2	3.32	0.60 (0.07–2.18)
MONONGAHELA VALLEY HOSPITAL (11069)			
2013	9	4.08	2.20 (1.01–4.18)
2012	4	3.72	1.08 (0.29–2.75)
CHAMBERSBURG HOSPITAL (11913)			
2013	7	4.12	1.70 (0.68–3.50)
2012	3	5.27	0.57 (0.11–1.66)
HAZLETON GENERAL HOSPITAL (11878)			
2013	2	4.19	0.48 (0.05–1.72)
2012	7	4.71	1.49 (0.60–3.06)
CROZER CHESTER MEDICAL CENTER TAYLOR (11932)			
2013	1	4.22	0.24 (0.00–1.32)
2012	3	2.31	1.30 (0.26–3.80)
RIDDLE MEMORIAL HOSPITAL (11731)			
2013	2	4.35	0.46 (0.05–1.66)
2012	2	4.57	0.44 (0.05–1.58)

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Table 4.5.14 – Rate of SSIs (SIR) — COLO Procedures – Continued from previous page

	Number of SSIs (COLO)	Predicted Number of SSIs (COLO)	SIR (95% CI)
DOYLESTOWN HOSPITAL (10190)			
2013	3	4.35	0.69 (0.14–2.01)
2012	2	4.20	0.48 (0.05–1.72)
DUBOIS REGIONAL MEDICAL CENTER (11606)			
2013	5	4.38	1.14 (0.37–2.66)
2012	5	4.29	1.17 (0.38–2.72)
EASTON HOSPITAL (11929)			
2013	3	4.39	0.68 (0.14–2.00)
2012	4	3.98	1.00 (0.27–2.57)
BRANDYWINE HOSPITAL (11979)			
2013	2	4.40	0.45 (0.05–1.64)
2012	3	3.32	0.90 (0.18–2.64)
MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)			
2013	2	4.50	0.44 (0.05–1.60)
2012	5	5.64	0.89 (0.29–2.07)
NAZARETH HOSPITAL (11919)			
2013	6	4.66	1.29 (0.47–2.80)
2012	4	4.11	0.97 (0.26–2.49)
HOLY REDEEMER HOSPITAL AND MEDICAL CENTER (11973)			
2013	1	4.74	0.21 (0.00–1.17)
2012	3	3.48	0.86 (0.17–2.52)
MOSES TAYLOR HOSPITAL (11528)			
2013	2	4.76	0.42 (0.05–1.52)
2012	3	4.52	0.66 (0.13–1.94)
REGIONAL HOSPITAL OF SCRANTON (12533)			
2013	1	4.80	0.21 (0.00–1.16)
2012	1	4.72	0.21 (0.00–1.18)
MOUNT NITTANY MEDICAL CENTER (11797)			
2013	2	4.83	0.41 (0.05–1.50)
2012	2	4.46	0.45 (0.05–1.62)
BUTLER MEMORIAL HOSPITAL (11736)			
2013	7	4.89	1.43 (0.57–2.95)
2012	6	5.14	1.17 (0.43–2.54)
SCHUYLKILL MEDICAL CENTER — EAST NORWEGIAN STREET (11922)			
2013	3	4.90	0.61 (0.12–1.79)
2012	2	3.21	0.62 (0.07–2.25)
ST. MARY MEDICAL CENTER (11885)			
2013	5	4.95	1.01 (0.33–2.36)
2012	5	5.12	0.98 (0.31–2.28)
ALBERT EINSTEIN MEDICAL CENTER (10585)			
2013	4	4.95	0.81 (0.22–2.07)
2012	4	4.26	0.94 (0.25–2.41)
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)			
2013	0	4.97	0.00 (0.00–0.74)
2012	5	3.85	1.30 (0.42–3.03)
EXCELA HEALTH LATROBE HOSPITAL (11651)			
2013	4	5.03	0.79 (0.21–2.03)
2012	4	4.22	0.95 (0.26–2.43)
PENN PRESBYTERIAN MEDICAL CENTER (11814)			
2013	3	5.18	0.58 (0.12–1.69)
2012	4	4.98	0.80 (0.22–2.06)
HERITAGE VALLEY SEWICKLEY (10375)			
2013	9	5.45	1.65 (0.75–3.14)
2012	7	4.43	1.58 (0.63–3.26)
GEISINGER-COMMUNITY MEDICAL CENTER (11914)			
2013	5	5.57	0.90 (0.29–2.09)
2012	1	3.72	0.27 (0.00–1.50)

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Table 4.5.14 – Rate of SSIs (SIR) — COLO Procedures – Continued from previous page

	Number of SSIs (COLO)	Predicted Number of SSIs (COLO)	SIR (95% CI)
ST. CLAIR MEMORIAL HOSPITAL (10561)			
2013	11	5.63	1.96 (0.97–3.50)
2012	20	5.65	3.54 (2.16–5.47)
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)			
2013	2	5.66	0.35 (0.04–1.28)
2012	2	5.58	0.36 (0.04–1.29)
UNIONTOWN HOSPITAL (10441)			
2013	7	5.74	1.22 (0.49–2.51)
2012	6	5.19	1.16 (0.42–2.52)
CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)			
2013	8	5.78	1.38 (0.60–2.73)
2012	1	4.98	0.20 (0.00–1.12)
MAIN LINE HOSPITAL BRYN MAWR (11753)			
2013	4	5.95	0.67 (0.18–1.72)
2012	1	4.39	0.23 (0.00–1.27)
LEHIGH VALLEY HOSPITAL — MUHLENBERG (11898)			
2013	1	5.96	0.17 (0.00–0.93)
2012	6	5.61	1.07 (0.39–2.33)
THE WASHINGTON HOSPITAL (11460)			
2013	2	6.16	0.32 (0.04–1.17)
2012	4	5.96	0.67 (0.18–1.72)
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)			
2013	5	6.17	0.81 (0.26–1.89)
2012	14	7.65	1.83 (1.00–3.07)
ALLEGHENY GENERAL HOSPITAL (10648)			
2013	15	6.22	2.41 (1.35–3.98)
2012	9	5.90	1.53 (0.70–2.90)
CROZER CHESTER MEDICAL CENTER (11839)			
2013	6	6.48	0.93 (0.34–2.02)
2012	5	6.25	0.80 (0.26–1.87)
HOSPITAL OF FOX CHASE CANCER CENTER (12134)			
2013	4	6.66	0.60 (0.16–1.54)
2012	6	7.26	0.83 (0.30–1.80)
POCONO MEDICAL CENTER (11772)			
2013	8	6.77	1.18 (0.51–2.33)
2012	2	6.23	0.32 (0.04–1.16)
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)			
2013	2	7.07	0.28 (0.03–1.02)
2012	3	6.57	0.46 (0.09–1.33)
MAIN LINE HOSPITAL — PAOLI (11750)			
2013	6	7.55	0.79 (0.29–1.73)
2012	0	5.40	0.00 (0.00–0.68)
HOLY SPIRIT HOSPITAL (12387)			
2013	5	7.65	0.65 (0.21–1.53)
2012	4	6.89	0.58 (0.16–1.49)
HAHNEMANN UNIVERSITY HOSPITAL (11437)			
2013	9	8.02	1.12 (0.51–2.13)
2012	9	7.56	1.19 (0.54–2.26)
FORBES REGIONAL HOSPITAL (11265)			
2013	7	8.05	0.87 (0.35–1.79)
2012	9	7.59	1.19 (0.54–2.25)
CHESTER COUNTY HOSPITAL (12016)			
2013	4	8.50	0.47 (0.13–1.20)
2012	3	7.43	0.40 (0.08–1.18)
ST. VINCENT HEALTH CENTER (11699)			
2013	16	8.53	1.88 (1.07–3.05)
2012	9	7.09	1.27 (0.58–2.41)

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Table 4.5.14 – Rate of SSIs (SIR) — COLO Procedures – Continued from previous page

	Number of SSIs (COLO)	Predicted Number of SSIs (COLO)	SIR (95% CI)
ROBERT PACKER HOSPITAL (12422)			
2013	3	8.62	0.35 (0.07–1.02)
2012	5	8.23	0.61 (0.20–1.42)
CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)			
2013	7	9.01	0.78 (0.31–1.60)
2012	6	9.57	0.63 (0.23–1.36)
UPMC MERCY (10384)			
2013	11	9.16	1.20 (0.60–2.15)
2012	13	9.75	1.33 (0.71–2.28)
UPMC ST MARGARET (11561)			
2013	6	9.44	0.64 (0.23–1.38)
2012	6	8.58	0.70 (0.26–1.52)
HERITAGE VALLEY BEAVER (11831)			
2013	5	9.60	0.52 (0.17–1.21)
2012	4	5.95	0.67 (0.18–1.72)
TEMPLE UNIVERSITY HOSPITAL (12382)			
2013	6	9.79	0.61 (0.22–1.33)
2012	4	8.15	0.49 (0.13–1.26)
READING HOSPITAL AND MEDICAL CENTER (12375)			
2013	16	10.18	1.57 (0.90–2.55)
2012	24	13.84	1.73 (1.11–2.58)
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)			
2013	12	10.36	1.16 (0.60–2.02)
2012	14	7.76	1.80 (0.99–3.03)
ST. LUKES HOSPITAL BETHLEHEM (11718)			
2013	11	10.52	1.05 (0.52–1.87)
2012	6	9.73	0.62 (0.23–1.34)
PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS (11448)			
2013	16	10.84	1.48 (0.84–2.40)
2012	13	7.91	1.64 (0.87–2.81)
ARIA HEALTH (11388)			
2013	2	11.54	0.17 (0.02–0.63)
2012	8	13.12	0.61 (0.26–1.20)
UPMC HAMOT (11725)			
2013	19	11.62	1.63 (0.98–2.55)
2012	12	14.88	0.81 (0.42–1.41)
ALTOONA REGIONAL HEALTH SYSTEM (10178)			
2013	7	11.85	0.59 (0.24–1.22)
2012	13	9.89	1.31 (0.70–2.25)
YORK HOSPITAL (10108)			
2013	15	13.23	1.13 (0.63–1.87)
2012	8	11.59	0.69 (0.30–1.36)
WILKES-BARRE GENERAL HOSPITAL (11916)			
2013	17	13.29	1.28 (0.74–2.05)
2012	16	11.60	1.38 (0.79–2.24)
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)			
2013	5	14.07	0.36 (0.11–0.83)
2012	5	10.58	0.47 (0.15–1.10)
JEFFERSON REGIONAL MEDICAL CENTER (10237)			
2013	17	14.60	1.16 (0.68–1.86)
2012	9	13.15	0.68 (0.31–1.30)
LANCASTER GENERAL HOSPITAL (10183)			
2013	21	14.63	1.44 (0.89–2.19)
2012	27	12.24	2.21 (1.45–3.21)
ABINGTON MEMORIAL HOSPITAL (11838)			
2013	15	17.01	0.88 (0.49–1.45)
2012	10	14.40	0.69 (0.33–1.28)

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Table 4.5.14 – Rate of SSIs (SIR) — COLO Procedures – Continued from previous page

	Number of SSIs (COLO)	Predicted Number of SSIs (COLO)	SIR (95% CI)
THOMAS JEFFERSON UNIV HOSPITAL (11506)			
2013	17	19.71	0.86 (0.50–1.38)
2012	24	17.46	1.37 (0.88–2.05)
PINNACLE HEALTH HOSPITALS (10122)			
2013	19	20.59	0.92 (0.56–1.44)
2012	25	15.99	1.56 (1.01–2.31)
GEISINGER MEDICAL CENTER (11775)			
2013	13	21.11	0.62 (0.33–1.05)
2012	11	16.60	0.66 (0.33–1.19)
MILTON S HERSHEY MEDICAL CENTER (11747)			
2013	10	21.81	0.46 (0.22–0.84)
2012	8	19.14	0.42 (0.18–0.82)
UPMC PRESBYTERIAN SHADYSIDE — SHADYSIDE (10118)			
2013	69	22.59	3.05 (2.38–3.87)
2012	15	18.61	0.81 (0.45–1.33)
HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)			
2013	23	23.11	1.00 (0.63–1.49)
2012	18	13.70	1.31 (0.78–2.08)
LEHIGH VALLEY HOSPITAL (11884)			
2013	18	25.25	0.71 (0.42–1.13)
2012	25	24.26	1.03 (0.67–1.52)
UPMC PASSAVANT (11242)			
2013	43	25.76	1.67 (1.21–2.25)
2012	31	22.72	1.36 (0.93–1.94)
UPMC PRESBYTERIAN SHADYSIDE — PRESBYTERIAN (10348)			
2013	21	30.24	0.69 (0.43–1.06)
2012	13	24.69	0.53 (0.28–0.90)

Table 4.5.15: Rate (SIR) of Surgical Site Infections (SSIs) Associated with Each Benchmarked Procedure by Hospital in Alphabetical Order — Pennsylvania, 2013

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
ABINGTON MEMORIAL HOSPITAL (11838)			
Cardiac (CARD)	0	1.20	0.00 (0.00–3.07)
Cardiac Bypass — Single Incision (CBGC)	1	0.24	4.09 (0.05–22.74)
Cardiac Bypass — Dual Incision (CBGB)	2	2.17	0.92 (0.10–3.33)
Knee Arthroplasty (KPRO)	1	3.59	0.28 (0.00–1.55)
Hip Arthroplasty (HPRO)	7	6.67	1.05 (0.42–2.16)
Abdominal Hysterectomy (HYST)	8	7.39	1.08 (0.47–2.13)
Colon surgery (COLO)	15	17.01	0.88 (0.49–1.45)
ADVANCED SURGICAL HOSPITAL (16317)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	2.08	0.00 (0.00–1.76)
Hip Arthroplasty (HPRO)	0	2.32	0.00 (0.00–1.58)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	.	.	.
ALBERT EINSTEIN MEDICAL CENTER (10585)			
Cardiac (CARD)	0	0.30	0.00 (0.00–12.18)
Cardiac Bypass — Single Incision (CBGC)	0	0.09	0.00 (0.00–42.74)
Cardiac Bypass — Dual Incision (CBGB)	1	1.30	0.77 (0.01–4.29)
Knee Arthroplasty (KPRO)	0	0.06	0.00 (0.00–57.89)
Hip Arthroplasty (HPRO)	1	0.69	1.44 (0.02–8.04)
Abdominal Hysterectomy (HYST)	1	1.27	0.79 (0.01–4.37)
Colon surgery (COLO)	4	4.95	0.81 (0.22–2.07)
ALBERT EINSTEIN MEDICAL CENTER AT ELKINS PARK (12500)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	4	1.23	3.24 (0.87–8.30)
Hip Arthroplasty (HPRO)	3	1.12	2.67 (0.54–7.80)
Abdominal Hysterectomy (HYST)	0	0.07	0.00 (0.00–51.71)
Colon surgery (COLO)	1	2.14	0.47 (0.01–2.60)
ALLEGHENY GENERAL HOSPITAL (10648)			
Cardiac (CARD)	2	2.52	0.79 (0.09–2.87)
Cardiac Bypass — Single Incision (CBGC)	3	0.85	3.51 (0.71–10.26)
Cardiac Bypass — Dual Incision (CBGB)	1	3.87	0.26 (0.00–1.44)
Knee Arthroplasty (KPRO)	5	4.50	1.11 (0.36–2.59)
Hip Arthroplasty (HPRO)	10	7.90	1.27 (0.61–2.33)
Abdominal Hysterectomy (HYST)	0	0.47	0.00 (0.00–7.86)
Colon surgery (COLO)	15	6.22	2.41 (1.35–3.98)
ALLEGHENY VALLEY HOSPITAL (11842)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.99	0.00 (0.00–3.71)
Hip Arthroplasty (HPRO)	3	1.47	2.04 (0.41–5.96)
Abdominal Hysterectomy (HYST)	0	0.09	0.00 (0.00–38.89)
Colon surgery (COLO)	7	3.15	2.22 (0.89–4.58)

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Table 4.5.15 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
ALTOONA REGIONAL HEALTH SYSTEM (10178)			
Cardiac (CARD)	1	1.03	0.97 (0.01–5.39)
Cardiac Bypass — Single Incision (CBGC)	0	0.01	0.00 (0.00–341.95)
Cardiac Bypass — Dual Incision (CBGB)	0	2.20	0.00 (0.00–1.67)
Knee Arthroplasty (KPRO)	1	3.31	0.30 (0.00–1.68)
Hip Arthroplasty (HPRO)	1	4.59	0.22 (0.00–1.21)
Abdominal Hysterectomy (HYST)	4	1.19	3.35 (0.90–8.59)
Colon surgery (COLO)	7	11.85	0.59 (0.24–1.22)
ARIA HEALTH (11388)			
Cardiac (CARD)	0	0.44	0.00 (0.00–8.32)
Cardiac Bypass — Single Incision (CBGC)	0	0.09	0.00 (0.00–42.74)
Cardiac Bypass — Dual Incision (CBGB)	0	2.71	0.00 (0.00–1.35)
Knee Arthroplasty (KPRO)	3	4.16	0.72 (0.15–2.11)
Hip Arthroplasty (HPRO)	3	3.23	0.93 (0.19–2.71)
Abdominal Hysterectomy (HYST)	0	0.87	0.00 (0.00–4.21)
Colon surgery (COLO)	2	11.54	0.17 (0.02–0.63)
ARMSTRONG COUNTY MEMORIAL HOSPITAL (12057)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.82	1.22 (0.02–6.76)
Hip Arthroplasty (HPRO)	0	0.99	0.00 (0.00–3.69)
Abdominal Hysterectomy (HYST)	0	0.16	0.00 (0.00–22.50)
Colon surgery (COLO)	1	2.44	0.41 (0.01–2.28)
BARIX CLINICS OF PENNSYLVANIA (12037)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.01	0.00 (0.00–535.44)
Hip Arthroplasty (HPRO)	.	.	.
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	.	.	.
BERWICK HOSPITAL CENTER (11442)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.42	0.00 (0.00–8.82)
Hip Arthroplasty (HPRO)	0	0.29	0.00 (0.00–12.77)
Abdominal Hysterectomy (HYST)	0	0.17	0.00 (0.00–21.88)
Colon surgery (COLO)	0	0.06	0.00 (0.00–60.22)
BRADFORD REGIONAL MEDICAL CENTER (12361)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.26	0.00 (0.00–14.23)
Hip Arthroplasty (HPRO)	0	0.35	0.00 (0.00–10.41)
Abdominal Hysterectomy (HYST)	0	0.40	0.00 (0.00–9.25)
Colon surgery (COLO)	2	0.73	2.75 (0.31–9.92)
BRANDYWINE HOSPITAL (11979)			
Cardiac (CARD)	0	0.26	0.00 (0.00–13.92)
Cardiac Bypass — Single Incision (CBGC)	1	0.06	15.54 (0.20–86.45)
Cardiac Bypass — Dual Incision (CBGB)	5	1.04	4.80 (1.55–11.21)
Knee Arthroplasty (KPRO)	2	0.55	3.63 (0.41–13.10)
Hip Arthroplasty (HPRO)	2	0.82	2.45 (0.28–8.85)
Abdominal Hysterectomy (HYST)	0	0.28	0.00 (0.00–12.98)
Colon surgery (COLO)	2	4.40	0.45 (0.05–1.64)

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Table 4.5.15 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
BROOKVILLE HOSPITAL (12418)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	.	.	.
Hip Arthroplasty (HPRO)	.	.	.
Abdominal Hysterectomy (HYST)	0	0.01	0.00 (0.00–392.98)
Colon surgery (COLO)	1	0.30	3.35 (0.04–18.63)
BUCKS COUNTY SPECIALTY HOSPITAL (15202)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	2	1.80	1.11 (0.12–4.01)
Hip Arthroplasty (HPRO)	1	3.82	0.26 (0.00–1.46)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	.	.	.
BUTLER MEMORIAL HOSPITAL (11736)			
Cardiac (CARD)	0	0.74	0.00 (0.00–4.93)
Cardiac Bypass — Single Incision (CBGC)	0	0.06	0.00 (0.00–63.26)
Cardiac Bypass — Dual Incision (CBGB)	9	4.55	1.98 (0.90–3.76)
Knee Arthroplasty (KPRO)	2	2.01	1.00 (0.11–3.60)
Hip Arthroplasty (HPRO)	1	1.74	0.58 (0.01–3.20)
Abdominal Hysterectomy (HYST)	3	1.14	2.63 (0.53–7.68)
Colon surgery (COLO)	7	4.89	1.43 (0.57–2.95)
CANONSBURG GENERAL HOSPITAL (11586)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	2	1.27	1.57 (0.18–5.68)
Hip Arthroplasty (HPRO)	3	1.13	2.66 (0.54–7.78)
Abdominal Hysterectomy (HYST)	0	0.19	0.00 (0.00–19.03)
Colon surgery (COLO)	0	2.89	0.00 (0.00–1.27)
CARLISLE REGIONAL MEDICAL CENTER (11997)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	6	1.22	4.93 (1.80–10.73)
Hip Arthroplasty (HPRO)	2	1.19	1.67 (0.19–6.04)
Abdominal Hysterectomy (HYST)	1	1.56	0.64 (0.01–3.56)
Colon surgery (COLO)	4	2.84	1.41 (0.38–3.60)
CHAMBERSBURG HOSPITAL (11913)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	6	3.22	1.87 (0.68–4.06)
Hip Arthroplasty (HPRO)	14	3.45	4.06 (2.22–6.82)
Abdominal Hysterectomy (HYST)	0	0.34	0.00 (0.00–10.67)
Colon surgery (COLO)	7	4.12	1.70 (0.68–3.50)
CHARLES COLE MEMORIAL HOSPITAL (11956)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.80	1.25 (0.02–6.96)
Hip Arthroplasty (HPRO)	0	0.75	0.00 (0.00–4.90)
Abdominal Hysterectomy (HYST)	0	0.14	0.00 (0.00–26.22)
Colon surgery (COLO)	1	1.19	0.84 (0.01–4.66)

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Table 4.5.15 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
CHESTER COUNTY HOSPITAL (12016)			
Cardiac (CARD)	0	0.30	0.00 (0.00–12.43)
Cardiac Bypass — Single Incision (CBGC)	0	0.09	0.00 (0.00–38.81)
Cardiac Bypass — Dual Incision (CBGB)	0	1.50	0.00 (0.00–2.45)
Knee Arthroplasty (KPRO)	1	1.46	0.68 (0.01–3.80)
Hip Arthroplasty (HPRO)	2	2.29	0.87 (0.10–3.16)
Abdominal Hysterectomy (HYST)	8	3.38	2.37 (1.02–4.67)
Colon surgery (COLO)	4	8.50	0.47 (0.13–1.20)
CHESTNUT HILL HOSPITAL (12304)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.39	0.00 (0.00–9.52)
Hip Arthroplasty (HPRO)	1	0.92	1.09 (0.01–6.07)
Abdominal Hysterectomy (HYST)	0	1.65	0.00 (0.00–2.22)
Colon surgery (COLO)	2	1.61	1.24 (0.14–4.49)
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)			
Cardiac (CARD)	8	3.73	2.14 (0.92–4.22)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	0	0.02	0.00 (0.00–241.54)
Knee Arthroplasty (KPRO)	.	.	.
Hip Arthroplasty (HPRO)	0	0.02	0.00 (0.00–240.51)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	2	7.07	0.28 (0.03–1.02)
CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)			
Cardiac (CARD)	2	1.45	1.38 (0.16–5.00)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	.	.	.
Hip Arthroplasty (HPRO)	0	0.02	0.00 (0.00–240.51)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	8	5.78	1.38 (0.60–2.73)
CLARION HOSPITAL (11654)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.41	0.00 (0.00–8.93)
Hip Arthroplasty (HPRO)	2	0.74	2.70 (0.30–9.76)
Abdominal Hysterectomy (HYST)	1	0.34	2.98 (0.04–16.60)
Colon surgery (COLO)	1	1.23	0.81 (0.01–4.51)
CLEARFIELD HOSPITAL (11843)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.30	0.00 (0.00–12.39)
Hip Arthroplasty (HPRO)	0	0.50	0.00 (0.00–7.30)
Abdominal Hysterectomy (HYST)	0	0.28	0.00 (0.00–13.11)
Colon surgery (COLO)	0	2.22	0.00 (0.00–1.65)
CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)			
Cardiac (CARD)	1	0.87	1.15 (0.02–6.41)
Cardiac Bypass — Single Incision (CBGC)	3	0.15	19.98 (4.01–58.37)
Cardiac Bypass — Dual Incision (CBGB)	3	2.36	1.27 (0.26–3.71)
Knee Arthroplasty (KPRO)	1	2.79	0.36 (0.00–1.99)
Hip Arthroplasty (HPRO)	6	3.57	1.68 (0.61–3.66)
Abdominal Hysterectomy (HYST)	1	2.42	0.41 (0.01–2.30)
Colon surgery (COLO)	7	9.01	0.78 (0.31–1.60)

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Table 4.5.15 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
COORDINATED HEALTH ORTHOPEDIC HOSPITAL, LLC (11872)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	4.35	0.00 (0.00–0.84)
Hip Arthroplasty (HPRO)	2	2.01	1.00 (0.11–3.60)
Abdominal Hysterectomy (HYST)	0	0.01	0.00 (0.00–392.98)
Colon surgery (COLO)	.	.	.
CORRY MEMORIAL HOSPITAL (12283)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.19	5.29 (0.07–29.42)
Hip Arthroplasty (HPRO)	0	0.06	0.00 (0.00–65.96)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	0	0.04	0.00 (0.00–82.95)
CROZER CHESTER MEDICAL CENTER (11839)			
Cardiac (CARD)	0	0.21	0.00 (0.00–17.66)
Cardiac Bypass — Single Incision (CBGC)	0	0.40	0.00 (0.00–9.09)
Cardiac Bypass — Dual Incision (CBGB)	3	1.16	2.59 (0.52–7.58)
Knee Arthroplasty (KPRO)	0	0.22	0.00 (0.00–16.50)
Hip Arthroplasty (HPRO)	1	0.61	1.64 (0.02–9.14)
Abdominal Hysterectomy (HYST)	2	3.16	0.63 (0.07–2.29)
Colon surgery (COLO)	6	6.48	0.93 (0.34–2.02)
CROZER CHESTER MEDICAL CENTER SPRINGFIELD (11851)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	1.52	0.66 (0.01–3.65)
Hip Arthroplasty (HPRO)	3	1.47	2.04 (0.41–5.95)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	0	0.73	0.00 (0.00–5.06)
CROZER CHESTER MEDICAL CENTER TAYLOR (11932)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.40	0.00 (0.00–9.07)
Hip Arthroplasty (HPRO)	0	0.25	0.00 (0.00–14.76)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	1	4.22	0.24 (0.00–1.32)
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	1.29	0.00 (0.00–2.85)
Hip Arthroplasty (HPRO)	1	1.36	0.74 (0.01–4.10)
Abdominal Hysterectomy (HYST)	1	0.29	3.40 (0.04–18.89)
Colon surgery (COLO)	2	5.66	0.35 (0.04–1.28)
DOYLESTOWN HOSPITAL (10190)			
Cardiac (CARD)	1	0.70	1.43 (0.02–7.93)
Cardiac Bypass — Single Incision (CBGC)	0	0.06	0.00 (0.00–56.99)
Cardiac Bypass — Dual Incision (CBGB)	1	1.29	0.77 (0.01–4.30)
Knee Arthroplasty (KPRO)	2	1.90	1.05 (0.12–3.80)
Hip Arthroplasty (HPRO)	0	2.40	0.00 (0.00–1.53)
Abdominal Hysterectomy (HYST)	0	0.49	0.00 (0.00–7.56)
Colon surgery (COLO)	3	4.35	0.69 (0.14–2.01)

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Table 4.5.15 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
DUBOIS REGIONAL MEDICAL CENTER (11606)			
Cardiac (CARD)	0	0.16	0.00 (0.00–22.94)
Cardiac Bypass — Single Incision (CBGC)	0	0.06	0.00 (0.00–56.99)
Cardiac Bypass — Dual Incision (CBGB)	0	1.28	0.00 (0.00–2.87)
Knee Arthroplasty (KPRO)	0	0.70	0.00 (0.00–5.25)
Hip Arthroplasty (HPRO)	0	1.22	0.00 (0.00–3.01)
Abdominal Hysterectomy (HYST)	1	1.39	0.72 (0.01–4.00)
Colon surgery (COLO)	5	4.38	1.14 (0.37–2.66)
EASTERN REGIONAL MEDICAL CENTER (12348)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	.	.	.
Hip Arthroplasty (HPRO)	0	0.22	0.00 (0.00–16.83)
Abdominal Hysterectomy (HYST)	1	0.57	1.77 (0.02–9.83)
Colon surgery (COLO)	19	3.62	5.25 (3.16–8.21)
EASTON HOSPITAL (11929)			
Cardiac (CARD)	0	0.27	0.00 (0.00–13.75)
Cardiac Bypass — Single Incision (CBGC)	0	0.80	0.00 (0.00–4.59)
Cardiac Bypass — Dual Incision (CBGB)	3	0.85	3.53 (0.71–10.32)
Knee Arthroplasty (KPRO)	1	1.29	0.78 (0.01–4.31)
Hip Arthroplasty (HPRO)	0	1.84	0.00 (0.00–2.00)
Abdominal Hysterectomy (HYST)	1	1.32	0.76 (0.01–4.20)
Colon surgery (COLO)	3	4.39	0.68 (0.14–2.00)
EDGEWOOD SURGICAL HOSPITAL (12552)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.59	0.00 (0.00–6.19)
Hip Arthroplasty (HPRO)	0	0.28	0.00 (0.00–12.97)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	.	.	.
EINSTEIN MEDICAL CENTER MONTGOMERY (30210)			
Cardiac (CARD)	0	0.36	0.00 (0.00–10.24)
Cardiac Bypass — Single Incision (CBGC)	0	0.04	0.00 (0.00–85.49)
Cardiac Bypass — Dual Incision (CBGB)	2	1.22	1.64 (0.18–5.91)
Knee Arthroplasty (KPRO)	4	1.45	2.75 (0.74–7.04)
Hip Arthroplasty (HPRO)	0	1.46	0.00 (0.00–2.52)
Abdominal Hysterectomy (HYST)	1	1.32	0.76 (0.01–4.21)
Colon surgery (COLO)	0	2.84	0.00 (0.00–1.29)
ELK REGIONAL HEALTH CENTER (11859)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.34	0.00 (0.00–10.80)
Hip Arthroplasty (HPRO)	0	0.58	0.00 (0.00–6.31)
Abdominal Hysterectomy (HYST)	0	0.38	0.00 (0.00–9.67)
Colon surgery (COLO)	0	0.74	0.00 (0.00–4.93)

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Table 4.5.15 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
ELLWOOD CITY HOSPITAL (11779)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.17	0.00 (0.00–21.54)
Hip Arthroplasty (HPRO)	0	0.07	0.00 (0.00–52.87)
Abdominal Hysterectomy (HYST)	0	0.03	0.00 (0.00–130.99)
Colon surgery (COLO)	0	0.31	0.00 (0.00–11.95)
ENDLESS MOUNTAINS HEALTH SYSTEMS (11817)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.36	0.00 (0.00–10.30)
Hip Arthroplasty (HPRO)	0	0.44	0.00 (0.00–8.39)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	.	.	.
EPHRATA COMMUNITY HOSPITAL (11764)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	1.59	0.63 (0.01–3.49)
Hip Arthroplasty (HPRO)	4	1.97	2.03 (0.55–5.19)
Abdominal Hysterectomy (HYST)	0	1.80	0.00 (0.00–2.04)
Colon surgery (COLO)	7	4.03	1.74 (0.70–3.58)
EVANGELICAL COMMUNITY HOSPITAL (11701)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	2	2.47	0.81 (0.09–2.92)
Hip Arthroplasty (HPRO)	2	2.35	0.85 (0.10–3.08)
Abdominal Hysterectomy (HYST)	0	0.25	0.00 (0.00–14.72)
Colon surgery (COLO)	12	3.89	3.09 (1.59–5.39)
EXCELA HEALTH FRICK HOSPITAL (11639)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	.	.	.
Hip Arthroplasty (HPRO)	0	0.09	0.00 (0.00–40.08)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	2	2.04	0.98 (0.11–3.54)
EXCELA HEALTH LATROBE HOSPITAL (11651)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	3	1.38	2.17 (0.44–6.34)
Hip Arthroplasty (HPRO)	1	1.62	0.62 (0.01–3.44)
Abdominal Hysterectomy (HYST)	1	1.29	0.77 (0.01–4.31)
Colon surgery (COLO)	4	5.03	0.79 (0.21–2.03)
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)			
Cardiac (CARD)	0	0.37	0.00 (0.00–9.93)
Cardiac Bypass — Single Incision (CBGC)	0	0.04	0.00 (0.00–100.41)
Cardiac Bypass — Dual Incision (CBGB)	0	2.31	0.00 (0.00–1.59)
Knee Arthroplasty (KPRO)	1	3.44	0.29 (0.00–1.62)
Hip Arthroplasty (HPRO)	2	3.37	0.59 (0.07–2.14)
Abdominal Hysterectomy (HYST)	0	0.79	0.00 (0.00–4.66)
Colon surgery (COLO)	5	6.17	0.81 (0.26–1.89)

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Table 4.5.15 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
FORBES REGIONAL HOSPITAL (11265)			
Cardiac (CARD)	0	0.74	0.00 (0.00–4.97)
Cardiac Bypass — Single Incision (CBGC)	0	0.09	0.00 (0.00–40.68)
Cardiac Bypass — Dual Incision (CBGB)	1	2.82	0.35 (0.00–1.97)
Knee Arthroplasty (KPRO)	2	1.40	1.43 (0.16–5.15)
Hip Arthroplasty (HPRO)	7	2.36	2.96 (1.19–6.11)
Abdominal Hysterectomy (HYST)	0	1.01	0.00 (0.00–3.63)
Colon surgery (COLO)	7	8.05	0.87 (0.35–1.79)
GEISINGER MEDICAL CENTER (11775)			
Cardiac (CARD)	5	2.78	1.80 (0.58–4.19)
Cardiac Bypass — Single Incision (CBGC)	0	0.49	0.00 (0.00–7.49)
Cardiac Bypass — Dual Incision (CBGB)	5	4.49	1.11 (0.36–2.60)
Knee Arthroplasty (KPRO)	10	3.13	3.19 (1.53–5.87)
Hip Arthroplasty (HPRO)	6	4.85	1.24 (0.45–2.69)
Abdominal Hysterectomy (HYST)	8	3.06	2.61 (1.12–5.15)
Colon surgery (COLO)	13	21.11	0.62 (0.33–1.05)
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)			
Cardiac (CARD)	0	0.86	0.00 (0.00–4.27)
Cardiac Bypass — Single Incision (CBGC)	0	0.22	0.00 (0.00–16.43)
Cardiac Bypass — Dual Incision (CBGB)	1	2.24	0.45 (0.01–2.49)
Knee Arthroplasty (KPRO)	3	1.78	1.68 (0.34–4.92)
Hip Arthroplasty (HPRO)	5	2.73	1.83 (0.59–4.27)
Abdominal Hysterectomy (HYST)	9	1.34	6.70 (3.06–12.71)
Colon surgery (COLO)	12	10.36	1.16 (0.60–2.02)
GEISINGER-BLOOMSBURG HOSPITAL (12008)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	2	0.51	3.94 (0.44–14.21)
Hip Arthroplasty (HPRO)	0	0.79	0.00 (0.00–4.66)
Abdominal Hysterectomy (HYST)	0	0.02	0.00 (0.00–157.58)
Colon surgery (COLO)	2	1.55	1.29 (0.14–4.66)
GEISINGER-COMMUNITY MEDICAL CENTER (11914)			
Cardiac (CARD)	0	0.60	0.00 (0.00–6.13)
Cardiac Bypass — Single Incision (CBGC)	0	0.31	0.00 (0.00–11.70)
Cardiac Bypass — Dual Incision (CBGB)	3	2.31	1.30 (0.26–3.80)
Knee Arthroplasty (KPRO)	2	1.90	1.05 (0.12–3.80)
Hip Arthroplasty (HPRO)	6	2.69	2.23 (0.82–4.86)
Abdominal Hysterectomy (HYST)	0	0.02	0.00 (0.00–157.58)
Colon surgery (COLO)	5	5.57	0.90 (0.29–2.09)
GETTYSBURG HOSPITAL (11531)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	1.10	0.91 (0.01–5.07)
Hip Arthroplasty (HPRO)	1	0.91	1.10 (0.01–6.12)
Abdominal Hysterectomy (HYST)	0	0.31	0.00 (0.00–12.02)
Colon surgery (COLO)	3	1.86	1.61 (0.32–4.71)
GNADEN HUETTEN MEMORIAL HOSPITAL (12241)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.32	3.17 (0.04–17.62)
Hip Arthroplasty (HPRO)	0	0.41	0.00 (0.00–9.00)
Abdominal Hysterectomy (HYST)	0	0.04	0.00 (0.00–98.55)
Colon surgery (COLO)	2	0.83	2.40 (0.27–8.68)

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Table 4.5.15 – 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	1.34	0.00 (0.00–2.73)
Hip Arthroplasty (HPRO)	2	2.01	1.00 (0.11–3.59)
Abdominal Hysterectomy (HYST)	1	0.97	1.03 (0.01–5.72)
Colon surgery (COLO)	4	3.29	1.22 (0.33–3.11)
GROVE CITY MEDICAL CENTER (11722)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.32	0.00 (0.00–11.43)
Hip Arthroplasty (HPRO)	1	0.41	2.46 (0.03–13.69)
Abdominal Hysterectomy (HYST)	0	0.04	0.00 (0.00–95.42)
Colon surgery (COLO)	0	0.27	0.00 (0.00–13.41)
HAHNEMANN UNIVERSITY HOSPITAL (11437)			
Cardiac (CARD)	0	0.34	0.00 (0.00–10.93)
Cardiac Bypass — Single Incision (CBGC)	0	0.05	0.00 (0.00–68.39)
Cardiac Bypass — Dual Incision (CBGB)	1	0.78	1.28 (0.02–7.10)
Knee Arthroplasty (KPRO)	3	0.95	3.17 (0.64–9.25)
Hip Arthroplasty (HPRO)	1	1.33	0.75 (0.01–4.18)
Abdominal Hysterectomy (HYST)	5	3.02	1.65 (0.53–3.86)
Colon surgery (COLO)	9	8.02	1.12 (0.51–2.13)
HANOVER HOSPITAL (11899)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	1.26	0.79 (0.01–4.40)
Hip Arthroplasty (HPRO)	0	1.73	0.00 (0.00–2.12)
Abdominal Hysterectomy (HYST)	0	0.63	0.00 (0.00–5.84)
Colon surgery (COLO)	0	2.46	0.00 (0.00–1.49)
HAZLETON GENERAL HOSPITAL (11878)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.31	3.24 (0.04–18.01)
Hip Arthroplasty (HPRO)	2	0.38	5.32 (0.60–19.21)
Abdominal Hysterectomy (HYST)	0	0.30	0.00 (0.00–12.24)
Colon surgery (COLO)	2	4.19	0.48 (0.05–1.72)
HEART OF LANCASTER REGIONAL MEDICAL CENTER (12571)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.24	0.00 (0.00–15.27)
Hip Arthroplasty (HPRO)	0	0.35	0.00 (0.00–10.61)
Abdominal Hysterectomy (HYST)	4	2.63	1.52 (0.41–3.89)
Colon surgery (COLO)	0	0.72	0.00 (0.00–5.07)
HERITAGE VALLEY BEAVER (11831)			
Cardiac (CARD)	0	0.76	0.00 (0.00–4.82)
Cardiac Bypass — Single Incision (CBGC)	0	0.11	0.00 (0.00–32.86)
Cardiac Bypass — Dual Incision (CBGB)	8	2.45	3.27 (1.41–6.44)
Knee Arthroplasty (KPRO)	4	1.42	2.81 (0.76–7.20)
Hip Arthroplasty (HPRO)	4	2.52	1.59 (0.43–4.06)
Abdominal Hysterectomy (HYST)	0	0.64	0.00 (0.00–5.72)
Colon surgery (COLO)	5	9.60	0.52 (0.17–1.21)

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Table 4.5.15 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
HERITAGE VALLEY SEWICKLEY (10375)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	2	3.67	0.55 (0.06–1.97)
Hip Arthroplasty (HPRO)	0	2.83	0.00 (0.00–1.30)
Abdominal Hysterectomy (HYST)	0	0.65	0.00 (0.00–5.66)
Colon surgery (COLO)	9	5.45	1.65 (0.75–3.14)
HIGHLANDS HOSPITAL (11902)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.05	0.00 (0.00–76.49)
Hip Arthroplasty (HPRO)	0	0.12	0.00 (0.00–30.02)
Abdominal Hysterectomy (HYST)	0	0.06	0.00 (0.00–64.36)
Colon surgery (COLO)	0	0.69	0.00 (0.00–5.34)
HOLY REDEEMER HOSPITAL AND MEDICAL CENTER (11973)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	2.43	0.41 (0.01–2.29)
Hip Arthroplasty (HPRO)	7	2.25	3.11 (1.24–6.40)
Abdominal Hysterectomy (HYST)	2	0.91	2.20 (0.25–7.93)
Colon surgery (COLO)	1	4.74	0.21 (0.00–1.17)
HOLY SPIRIT HOSPITAL (12387)			
Cardiac (CARD)	0	0.42	0.00 (0.00–8.66)
Cardiac Bypass — Single Incision (CBGC)	0	1.92	0.00 (0.00–1.91)
Cardiac Bypass — Dual Incision (CBGB)	0	0.37	0.00 (0.00–9.81)
Knee Arthroplasty (KPRO)	1	2.05	0.49 (0.01–2.72)
Hip Arthroplasty (HPRO)	1	2.99	0.33 (0.00–1.86)
Abdominal Hysterectomy (HYST)	0	0.28	0.00 (0.00–12.97)
Colon surgery (COLO)	5	7.65	0.65 (0.21–1.53)
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)	1	3.87	0.26 (0.00–1.44)
Colon surgery (COLO)	4	6.66	0.60 (0.16–1.54)
HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)			
Cardiac (CARD)	7	8.61	0.81 (0.33–1.67)
Cardiac Bypass — Single Incision (CBGC)	1	0.95	1.06 (0.01–5.87)
Cardiac Bypass — Dual Incision (CBGB)	8	5.73	1.40 (0.60–2.75)
Knee Arthroplasty (KPRO)	0	0.02	0.00 (0.00–171.34)
Hip Arthroplasty (HPRO)	1	0.52	1.94 (0.03–10.80)
Abdominal Hysterectomy (HYST)	5	4.31	1.16 (0.37–2.71)
Colon surgery (COLO)	23	23.11	1.00 (0.63–1.49)
INDIANA REGIONAL MEDICAL CENTER (11759)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.98	1.02 (0.01–5.67)
Hip Arthroplasty (HPRO)	0	1.69	0.00 (0.00–2.18)
Abdominal Hysterectomy (HYST)	0	0.76	0.00 (0.00–4.86)
Colon surgery (COLO)	3	3.03	0.99 (0.20–2.89)

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Table 4.5.15 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
J C BLAIR MEMORIAL HOSP (11724)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	2	0.15	13.45 (1.51–48.56)
Hip Arthroplasty (HPRO)	2	0.21	9.49 (1.07–34.25)
Abdominal Hysterectomy (HYST)	2	0.67	2.98 (0.33–10.75)
Colon surgery (COLO)	1	0.37	2.70 (0.04–15.04)
JAMESON MEMORIAL HOSPITAL (11954)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	1.49	0.67 (0.01–3.74)
Hip Arthroplasty (HPRO)	2	1.57	1.27 (0.14–4.59)
Abdominal Hysterectomy (HYST)	0	0.30	0.00 (0.00–12.25)
Colon surgery (COLO)	2	2.16	0.93 (0.10–3.34)
JEANES HOSPITAL (11459)			
Cardiac (CARD)	0	0.16	0.00 (0.00–23.60)
Cardiac Bypass — Single Incision (CBGC)	0	0.07	0.00 (0.00–50.21)
Cardiac Bypass — Dual Incision (CBGB)	0	1.21	0.00 (0.00–3.04)
Knee Arthroplasty (KPRO)	1	1.28	0.78 (0.01–4.34)
Hip Arthroplasty (HPRO)	1	1.52	0.66 (0.01–3.65)
Abdominal Hysterectomy (HYST)	1	0.93	1.08 (0.01–6.01)
Colon surgery (COLO)	2	3.17	0.63 (0.07–2.28)
JEFFERSON REGIONAL MEDICAL CENTER (10237)			
Cardiac (CARD)	2	1.10	1.81 (0.20–6.54)
Cardiac Bypass — Single Incision (CBGC)	0	0.03	0.00 (0.00–113.98)
Cardiac Bypass — Dual Incision (CBGB)	3	4.24	0.71 (0.14–2.07)
Knee Arthroplasty (KPRO)	3	3.96	0.76 (0.15–2.22)
Hip Arthroplasty (HPRO)	7	4.70	1.49 (0.60–3.07)
Abdominal Hysterectomy (HYST)	0	0.20	0.00 (0.00–18.13)
Colon surgery (COLO)	17	14.60	1.16 (0.68–1.86)
JENNERSVILLE REGIONAL HOSPITAL (12337)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.15	0.00 (0.00–24.93)
Hip Arthroplasty (HPRO)	1	0.39	2.53 (0.03–14.10)
Abdominal Hysterectomy (HYST)	0	0.02	0.00 (0.00–196.49)
Colon surgery (COLO)	2	1.93	1.04 (0.12–3.74)
JERSEY SHORE HOSPITAL (11689)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.11	0.00 (0.00–34.75)
Hip Arthroplasty (HPRO)	0	0.11	0.00 (0.00–34.31)
Abdominal Hysterectomy (HYST)	1	0.03	34.36 (0.45–191.16)
Colon surgery (COLO)	1	0.79	1.27 (0.02–7.07)

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Table 4.5.15 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
KANE COMMUNITY HOSPITAL (12111)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.13	7.54 (0.10–41.96)
Hip Arthroplasty (HPRO)	0	0.13	0.00 (0.00–27.82)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	0	0.27	0.00 (0.00–13.62)
LANCASTER GENERAL HOSPITAL (10183)			
Cardiac (CARD)	3	1.16	2.60 (0.52–7.58)
Cardiac Bypass — Single Incision (CBGC)	1	0.65	1.55 (0.02–8.61)
Cardiac Bypass — Dual Incision (CBGB)	6	6.54	0.92 (0.33–2.00)
Knee Arthroplasty (KPRO)	4	7.14	0.56 (0.15–1.43)
Hip Arthroplasty (HPRO)	3	10.29	0.29 (0.06–0.85)
Abdominal Hysterectomy (HYST)	4	5.06	0.79 (0.21–2.03)
Colon surgery (COLO)	21	14.63	1.44 (0.89–2.19)
LANCASTER REGIONAL MEDICAL CENTER (12335)			
Cardiac (CARD)	0	0.27	0.00 (0.00–13.59)
Cardiac Bypass — Single Incision (CBGC)	0	0.25	0.00 (0.00–14.59)
Cardiac Bypass — Dual Incision (CBGB)	0	0.78	0.00 (0.00–4.72)
Knee Arthroplasty (KPRO)	1	1.79	0.56 (0.01–3.11)
Hip Arthroplasty (HPRO)	0	1.73	0.00 (0.00–2.12)
Abdominal Hysterectomy (HYST)	0	0.75	0.00 (0.00–4.88)
Colon surgery (COLO)	4	2.76	1.45 (0.39–3.71)
LANSDALE HOSPITAL (12032)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	1.43	0.70 (0.01–3.90)
Hip Arthroplasty (HPRO)	0	2.31	0.00 (0.00–1.59)
Abdominal Hysterectomy (HYST)	0	0.03	0.00 (0.00–130.99)
Colon surgery (COLO)	0	2.30	0.00 (0.00–1.59)
LEHIGH VALLEY HOSPITAL — MUHLENBERG (11898)			
Cardiac (CARD)	1	0.46	2.16 (0.03–12.02)
Cardiac Bypass — Single Incision (CBGC)	0	0.13	0.00 (0.00–27.99)
Cardiac Bypass — Dual Incision (CBGB)	1	1.24	0.81 (0.01–4.50)
Knee Arthroplasty (KPRO)	1	0.91	1.10 (0.01–6.15)
Hip Arthroplasty (HPRO)	3	1.55	1.93 (0.39–5.64)
Abdominal Hysterectomy (HYST)	0	2.88	0.00 (0.00–1.27)
Colon surgery (COLO)	1	5.96	0.17 (0.00–0.93)
LEHIGH VALLEY HOSPITAL (11884)			
Cardiac (CARD)	3	2.78	1.08 (0.22–3.15)
Cardiac Bypass — Single Incision (CBGC)	0	0.38	0.00 (0.00–9.71)
Cardiac Bypass — Dual Incision (CBGB)	4	5.28	0.76 (0.20–1.94)
Knee Arthroplasty (KPRO)	13	6.59	1.97 (1.05–3.38)
Hip Arthroplasty (HPRO)	17	8.45	2.01 (1.17–3.22)
Abdominal Hysterectomy (HYST)	4	9.93	0.40 (0.11–1.03)
Colon surgery (COLO)	18	25.25	0.71 (0.42–1.13)
LEWISTOWN HOSPITAL (11825)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.43	0.00 (0.00–8.47)
Hip Arthroplasty (HPRO)	0	0.65	0.00 (0.00–5.68)
Abdominal Hysterectomy (HYST)	2	1.69	1.18 (0.13–4.26)
Colon surgery (COLO)	1	2.70	0.37 (0.00–2.06)

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Table 4.5.15 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
LOCK HAVEN HOSPITAL (12097)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	.	.	.
Hip Arthroplasty (HPRO)	.	.	.
Abdominal Hysterectomy (HYST)	0	0.15	0.00 (0.00–23.90)
Colon surgery (COLO)	0	0.11	0.00 (0.00–34.89)
LOWER BUCKS HOSPITAL (12390)			
Cardiac (CARD)	0	0.03	0.00 (0.00–125.86)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	0	0.02	0.00 (0.00–168.32)
Knee Arthroplasty (KPRO)	0	0.20	0.00 (0.00–18.46)
Hip Arthroplasty (HPRO)	0	0.33	0.00 (0.00–11.23)
Abdominal Hysterectomy (HYST)	0	0.08	0.00 (0.00–43.66)
Colon surgery (COLO)	0	1.10	0.00 (0.00–3.32)
MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)			
Cardiac (CARD)	0	0.01	0.00 (0.00–503.45)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	4.17	0.24 (0.00–1.33)
Hip Arthroplasty (HPRO)	6	6.37	0.94 (0.34–2.05)
Abdominal Hysterectomy (HYST)	10	14.09	0.71 (0.34–1.31)
Colon surgery (COLO)	2	4.50	0.44 (0.05–1.60)
MAIN LINE HOSPITAL — PAOLI (11750)			
Cardiac (CARD)	0	0.06	0.00 (0.00–57.35)
Cardiac Bypass — Single Incision (CBGC)	0	0.02	0.00 (0.00–170.97)
Cardiac Bypass — Dual Incision (CBGB)	0	0.75	0.00 (0.00–4.89)
Knee Arthroplasty (KPRO)	4	2.71	1.48 (0.40–3.78)
Hip Arthroplasty (HPRO)	2	4.15	0.48 (0.05–1.74)
Abdominal Hysterectomy (HYST)	1	1.36	0.73 (0.01–4.08)
Colon surgery (COLO)	6	7.55	0.79 (0.29–1.73)
MAIN LINE HOSPITAL BRYN MAWR (11753)			
Cardiac (CARD)	0	0.24	0.00 (0.00–15.54)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	0	0.88	0.00 (0.00–4.17)
Knee Arthroplasty (KPRO)	4	5.57	0.72 (0.19–1.84)
Hip Arthroplasty (HPRO)	0	4.10	0.00 (0.00–0.89)
Abdominal Hysterectomy (HYST)	0	0.70	0.00 (0.00–5.24)
Colon surgery (COLO)	4	5.95	0.67 (0.18–1.72)
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)			
Cardiac (CARD)	1	1.83	0.55 (0.01–3.04)
Cardiac Bypass — Single Incision (CBGC)	0	1.71	0.00 (0.00–2.14)
Cardiac Bypass — Dual Incision (CBGB)	3	3.52	0.85 (0.17–2.49)
Knee Arthroplasty (KPRO)	0	2.30	0.00 (0.00–1.60)
Hip Arthroplasty (HPRO)	2	3.20	0.62 (0.07–2.25)
Abdominal Hysterectomy (HYST)	4	4.41	0.91 (0.24–2.32)
Colon surgery (COLO)	5	14.07	0.36 (0.11–0.83)
MEADVILLE MEDICAL CENTER (11583)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	3	3.18	0.94 (0.19–2.76)
Hip Arthroplasty (HPRO)	3	2.59	1.16 (0.23–3.38)
Abdominal Hysterectomy (HYST)	2	0.62	3.23 (0.36–11.66)
Colon surgery (COLO)	2	2.63	0.76 (0.09–2.74)

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Table 4.5.15 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
MEMORIAL HOSPITAL (11633)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.47	0.00 (0.00–7.86)
Hip Arthroplasty (HPRO)	2	0.79	2.52 (0.28–9.11)
Abdominal Hysterectomy (HYST)	3	1.10	2.73 (0.55–7.97)
Colon surgery (COLO)	6	2.07	2.90 (1.06–6.32)
MEMORIAL HOSPITAL, INC. TOWANDA (12549)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	.	.	.
Hip Arthroplasty (HPRO)	0	0.09	0.00 (0.00–41.30)
Abdominal Hysterectomy (HYST)	0	0.15	0.00 (0.00–25.00)
Colon surgery (COLO)	1	0.28	3.55 (0.05–19.73)
MERCY FITZGERALD HOSPITAL (11683)			
Cardiac (CARD)	0	0.22	0.00 (0.00–16.42)
Cardiac Bypass — Single Incision (CBGC)	0	0.41	0.00 (0.00–8.90)
Cardiac Bypass — Dual Incision (CBGB)	0	0.37	0.00 (0.00–10.05)
Knee Arthroplasty (KPRO)	1	0.17	5.76 (0.08–32.03)
Hip Arthroplasty (HPRO)	2	0.68	2.95 (0.33–10.64)
Abdominal Hysterectomy (HYST)	0	0.68	0.00 (0.00–5.37)
Colon surgery (COLO)	6	3.98	1.51 (0.55–3.28)
MERCY PHILADELPHIA HOSPITAL (11946)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	2	0.30	6.66 (0.75–24.04)
Hip Arthroplasty (HPRO)	3	0.32	9.44 (1.90–27.59)
Abdominal Hysterectomy (HYST)	0	0.54	0.00 (0.00–6.73)
Colon surgery (COLO)	4	2.91	1.37 (0.37–3.52)
MERCY SUBURBAN HOSPITAL NORRISTOWN (11952)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.34	2.98 (0.04–16.58)
Hip Arthroplasty (HPRO)	1	0.64	1.57 (0.02–8.73)
Abdominal Hysterectomy (HYST)	5	1.09	4.57 (1.47–10.67)
Colon surgery (COLO)	2	3.74	0.53 (0.06–1.93)
MILLCREEK COMMUNITY HOSPITAL (12253)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.50	0.00 (0.00–7.34)
Hip Arthroplasty (HPRO)	0	0.45	0.00 (0.00–8.10)
Abdominal Hysterectomy (HYST)	0	0.46	0.00 (0.00–7.96)
Colon surgery (COLO)	0	0.38	0.00 (0.00–9.58)
MILTON S HERSHEY MEDICAL CENTER (11747)			
Cardiac (CARD)	6	2.40	2.50 (0.91–5.45)
Cardiac Bypass — Single Incision (CBGC)	0	0.25	0.00 (0.00–14.48)
Cardiac Bypass — Dual Incision (CBGB)	5	2.76	1.81 (0.58–4.23)
Knee Arthroplasty (KPRO)	2	3.38	0.59 (0.07–2.14)
Hip Arthroplasty (HPRO)	9	5.95	1.51 (0.69–2.87)
Abdominal Hysterectomy (HYST)	3	4.74	0.63 (0.13–1.85)
Colon surgery (COLO)	10	21.81	0.46 (0.22–0.84)

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Table 4.5.15 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
MINERS MEDICAL CENTER (12295)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.04	0.00 (0.00–101.99)
Hip Arthroplasty (HPRO)	0	0.07	0.00 (0.00–51.76)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	0	0.10	0.00 (0.00–36.36)
MONONGAHELA VALLEY HOSPITAL (11069)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	4	1.09	3.66 (0.98–9.37)
Hip Arthroplasty (HPRO)	5	1.68	2.97 (0.96–6.93)
Abdominal Hysterectomy (HYST)	0	0.20	0.00 (0.00–18.00)
Colon surgery (COLO)	9	4.08	2.20 (1.01–4.18)
MOSES TAYLOR HOSPITAL (11528)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	1.73	0.00 (0.00–2.12)
Hip Arthroplasty (HPRO)	2	1.79	1.12 (0.13–4.04)
Abdominal Hysterectomy (HYST)	0	1.59	0.00 (0.00–2.31)
Colon surgery (COLO)	2	4.76	0.42 (0.05–1.52)
MOUNT NITTANY MEDICAL CENTER (11797)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	8	5.40	1.48 (0.64–2.92)
Hip Arthroplasty (HPRO)	7	5.70	1.23 (0.49–2.53)
Abdominal Hysterectomy (HYST)	1	1.01	0.99 (0.01–5.48)
Colon surgery (COLO)	2	4.83	0.41 (0.05–1.50)
MUNCY VALLEY HOSPITAL (11748)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	.	.	.
Hip Arthroplasty (HPRO)	.	.	.
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	1	0.31	3.21 (0.04–17.88)
NASON HOSPITAL (11907)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.69	0.00 (0.00–5.34)
Hip Arthroplasty (HPRO)	0	0.55	0.00 (0.00–6.73)
Abdominal Hysterectomy (HYST)	0	0.04	0.00 (0.00–87.45)
Colon surgery (COLO)	6	1.70	3.53 (1.29–7.69)
NAZARETH HOSPITAL (11919)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.89	0.00 (0.00–4.12)
Hip Arthroplasty (HPRO)	3	1.10	2.72 (0.55–7.95)
Abdominal Hysterectomy (HYST)	1	0.15	6.72 (0.09–37.40)
Colon surgery (COLO)	6	4.66	1.29 (0.47–2.80)

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Table 4.5.15 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
OHIO VALLEY GENERAL HOSPITAL (12298)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.48	0.00 (0.00–7.62)
Hip Arthroplasty (HPRO)	0	0.60	0.00 (0.00–6.13)
Abdominal Hysterectomy (HYST)	0	0.16	0.00 (0.00–23.15)
Colon surgery (COLO)	1	2.31	0.43 (0.01–2.41)
OSS ORTHOPAEDIC HOSPITAL (18467)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	3.56	0.28 (0.00–1.56)
Hip Arthroplasty (HPRO)	2	3.28	0.61 (0.07–2.20)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	.	.	.
PALMERTON HOSPITAL (12396)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.30	0.00 (0.00–12.19)
Hip Arthroplasty (HPRO)	0	0.28	0.00 (0.00–13.29)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	3	1.35	2.23 (0.45–6.52)
PENN PRESBYTERIAN MEDICAL CENTER (11814)			
Cardiac (CARD)	3	2.90	1.03 (0.21–3.02)
Cardiac Bypass — Single Incision (CBGC)	0	0.28	0.00 (0.00–13.14)
Cardiac Bypass — Dual Incision (CBGB)	4	3.32	1.20 (0.32–3.08)
Knee Arthroplasty (KPRO)	6	5.24	1.14 (0.42–2.49)
Hip Arthroplasty (HPRO)	9	6.14	1.47 (0.67–2.78)
Abdominal Hysterectomy (HYST)	0	0.11	0.00 (0.00–33.54)
Colon surgery (COLO)	3	5.18	0.58 (0.12–1.69)
PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS (11448)			
Cardiac (CARD)	2	0.42	4.72 (0.53–17.05)
Cardiac Bypass — Single Incision (CBGC)	0	0.06	0.00 (0.00–63.26)
Cardiac Bypass — Dual Incision (CBGB)	1	1.32	0.76 (0.01–4.21)
Knee Arthroplasty (KPRO)	10	2.60	3.84 (1.84–7.06)
Hip Arthroplasty (HPRO)	8	6.01	1.33 (0.57–2.62)
Abdominal Hysterectomy (HYST)	3	4.96	0.60 (0.12–1.77)
Colon surgery (COLO)	16	10.84	1.48 (0.84–2.40)
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)			
Cardiac (CARD)	0	0.26	0.00 (0.00–14.09)
Cardiac Bypass — Single Incision (CBGC)	0	0.11	0.00 (0.00–34.85)
Cardiac Bypass — Dual Incision (CBGB)	2	1.27	1.57 (0.18–5.67)
Knee Arthroplasty (KPRO)	1	0.97	1.03 (0.01–5.74)
Hip Arthroplasty (HPRO)	1	0.97	1.03 (0.01–5.74)
Abdominal Hysterectomy (HYST)	1	1.31	0.76 (0.01–4.25)
Colon surgery (COLO)	0	4.97	0.00 (0.00–0.74)
PHYSICIANS CARE SURGICAL HOSPITAL (19630)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	1.16	0.00 (0.00–3.16)
Hip Arthroplasty (HPRO)	1	1.37	0.73 (0.01–4.06)
Abdominal Hysterectomy (HYST)	0	0.16	0.00 (0.00–23.12)
Colon surgery (COLO)	0	0.37	0.00 (0.00–9.85)

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Table 4.5.15 – 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)	2	2.08	0.96 (0.11–3.47)
Cardiac Bypass — Single Incision (CBGC)	2	0.77	2.59 (0.29–9.35)
Cardiac Bypass — Dual Incision (CBGB)	1	3.73	0.27 (0.00–1.49)
Knee Arthroplasty (KPRO)	6	8.19	0.73 (0.27–1.60)
Hip Arthroplasty (HPRO)	17	9.37	1.81 (1.06–2.90)
Abdominal Hysterectomy (HYST)	10	8.55	1.17 (0.56–2.15)
Colon surgery (COLO)	19	20.59	0.92 (0.56–1.44)
POCONO MEDICAL CENTER (11772)			
Cardiac (CARD)	0	0.29	0.00 (0.00–12.55)
Cardiac Bypass — Single Incision (CBGC)	0	0.18	0.00 (0.00–20.84)
Cardiac Bypass — Dual Incision (CBGB)	3	1.63	1.84 (0.37–5.38)
Knee Arthroplasty (KPRO)	0	0.60	0.00 (0.00–6.07)
Hip Arthroplasty (HPRO)	0	0.87	0.00 (0.00–4.20)
Abdominal Hysterectomy (HYST)	0	0.93	0.00 (0.00–3.94)
Colon surgery (COLO)	8	6.77	1.18 (0.51–2.33)
POTTSTOWN MEMORIAL MEDICAL CENTER (11983)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	2	1.64	1.22 (0.14–4.39)
Hip Arthroplasty (HPRO)	1	1.85	0.54 (0.01–3.00)
Abdominal Hysterectomy (HYST)	0	0.30	0.00 (0.00–12.29)
Colon surgery (COLO)	1	2.95	0.34 (0.00–1.89)
PUNXSUTAWNEY AREA HOSPITAL (11830)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.22	0.00 (0.00–16.81)
Hip Arthroplasty (HPRO)	2	0.13	15.51 (1.74–55.99)
Abdominal Hysterectomy (HYST)	2	0.36	5.57 (0.63–20.11)
Colon surgery (COLO)	0	0.77	0.00 (0.00–4.79)
READING HOSPITAL AND MEDICAL CENTER (12375)			
Cardiac (CARD)	0	0.95	0.00 (0.00–3.86)
Cardiac Bypass — Single Incision (CBGC)	0	0.57	0.00 (0.00–6.40)
Cardiac Bypass — Dual Incision (CBGB)	2	3.00	0.67 (0.07–2.41)
Knee Arthroplasty (KPRO)	3	4.22	0.71 (0.14–2.08)
Hip Arthroplasty (HPRO)	4	5.52	0.73 (0.20–1.86)
Abdominal Hysterectomy (HYST)	6	5.56	1.08 (0.39–2.35)
Colon surgery (COLO)	16	10.18	1.57 (0.90–2.55)
REGIONAL HOSPITAL OF SCRANTON (12533)			
Cardiac (CARD)	0	0.82	0.00 (0.00–4.49)
Cardiac Bypass — Single Incision (CBGC)	0	0.13	0.00 (0.00–27.99)
Cardiac Bypass — Dual Incision (CBGB)	1	2.05	0.49 (0.01–2.71)
Knee Arthroplasty (KPRO)	0	2.50	0.00 (0.00–1.47)
Hip Arthroplasty (HPRO)	0	2.13	0.00 (0.00–1.72)
Abdominal Hysterectomy (HYST)	0	0.85	0.00 (0.00–4.29)
Colon surgery (COLO)	1	4.80	0.21 (0.00–1.16)
RIDDLE MEMORIAL HOSPITAL (11731)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	2	3.11	0.64 (0.07–2.32)
Hip Arthroplasty (HPRO)	2	4.20	0.48 (0.05–1.72)
Abdominal Hysterectomy (HYST)	1	0.94	1.07 (0.01–5.94)
Colon surgery (COLO)	2	4.35	0.46 (0.05–1.66)

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Table 4.5.15 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
ROBERT PACKER HOSPITAL (12422)			
Cardiac (CARD)	1	0.84	1.19 (0.02–6.61)
Cardiac Bypass — Single Incision (CBGC)	0	0.10	0.00 (0.00–37.99)
Cardiac Bypass — Dual Incision (CBGB)	6	1.69	3.56 (1.30–7.74)
Knee Arthroplasty (KPRO)	0	2.59	0.00 (0.00–1.42)
Hip Arthroplasty (HPRO)	1	3.85	0.26 (0.00–1.44)
Abdominal Hysterectomy (HYST)	1	1.32	0.76 (0.01–4.21)
Colon surgery (COLO)	3	8.62	0.35 (0.07–1.02)
ROXBOROUGH MEMORIAL HOSPITAL (11978)			
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)	0	0.12	0.00 (0.00–29.69)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	0	0.70	0.00 (0.00–5.21)
SACRED HEART HOSPITAL (11684)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.61	0.00 (0.00–6.00)
Hip Arthroplasty (HPRO)	0	1.16	0.00 (0.00–3.15)
Abdominal Hysterectomy (HYST)	2	1.77	1.13 (0.13–4.07)
Colon surgery (COLO)	2	1.40	1.43 (0.16–5.15)
SCHUYLKILL MEDICAL CENTER — EAST NORWEGIAN STREET (11922)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.52	1.94 (0.03–10.80)
Hip Arthroplasty (HPRO)	0	0.39	0.00 (0.00–9.40)
Abdominal Hysterectomy (HYST)	0	0.10	0.00 (0.00–38.59)
Colon surgery (COLO)	3	4.90	0.61 (0.12–1.79)
SCHUYLKILL MEDICAL CENTER — SOUTH JACKSON STREET (12087)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.37	2.71 (0.04–15.06)
Hip Arthroplasty (HPRO)	3	0.36	8.38 (1.68–24.49)
Abdominal Hysterectomy (HYST)	0	1.64	0.00 (0.00–2.24)
Colon surgery (COLO)	0	2.30	0.00 (0.00–1.59)
SHARON REGIONAL HEALTH SYSTEM (12250)			
Cardiac (CARD)	0	0.06	0.00 (0.00–64.73)
Cardiac Bypass — Single Incision (CBGC)	0	0.15	0.00 (0.00–24.05)
Cardiac Bypass — Dual Incision (CBGB)	1	0.65	1.53 (0.02–8.53)
Knee Arthroplasty (KPRO)	0	1.53	0.00 (0.00–2.40)
Hip Arthroplasty (HPRO)	0	2.48	0.00 (0.00–1.48)
Abdominal Hysterectomy (HYST)	0	0.27	0.00 (0.00–13.47)
Colon surgery (COLO)	2	2.27	0.88 (0.10–3.18)
SOLDIERS & SAILORS MEM HOSPITAL (11688)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.32	0.00 (0.00–11.49)
Hip Arthroplasty (HPRO)	0	0.39	0.00 (0.00–9.34)
Abdominal Hysterectomy (HYST)	0	0.46	0.00 (0.00–7.93)
Colon surgery (COLO)	2	1.38	1.45 (0.16–5.23)

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Table 4.5.15 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
SOMERSET HOSPITAL (12282)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.22	0.00 (0.00–16.34)
Hip Arthroplasty (HPRO)	0	0.12	0.00 (0.00–31.85)
Abdominal Hysterectomy (HYST)	2	0.57	3.54 (0.40–12.77)
Colon surgery (COLO)	2	2.54	0.79 (0.09–2.84)
SOUTHWEST REGIONAL MEDICAL CENTER (11942)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.16	0.00 (0.00–23.59)
Hip Arthroplasty (HPRO)	0	0.10	0.00 (0.00–37.79)
Abdominal Hysterectomy (HYST)	0	0.03	0.00 (0.00–126.03)
Colon surgery (COLO)	0	1.70	0.00 (0.00–2.16)
ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)			
Cardiac (CARD)	0	0.42	0.00 (0.00–8.75)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	.	.	.
Hip Arthroplasty (HPRO)	.	.	.
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	1	1.56	0.64 (0.01–3.56)
ST. CLAIR MEMORIAL HOSPITAL (10561)			
Cardiac (CARD)	0	0.36	0.00 (0.00–10.11)
Cardiac Bypass — Single Incision (CBGC)	0	0.02	0.00 (0.00–170.97)
Cardiac Bypass — Dual Incision (CBGB)	0	1.52	0.00 (0.00–2.41)
Knee Arthroplasty (KPRO)	3	3.95	0.76 (0.15–2.22)
Hip Arthroplasty (HPRO)	4	4.92	0.81 (0.22–2.08)
Abdominal Hysterectomy (HYST)	0	0.97	0.00 (0.00–3.78)
Colon surgery (COLO)	11	5.63	1.96 (0.97–3.50)
ST. JOSEPH MEDICAL CENTER (11961)			
Cardiac (CARD)	3	0.61	4.90 (0.99–14.32)
Cardiac Bypass — Single Incision (CBGC)	1	0.05	21.16 (0.28–117.74)
Cardiac Bypass — Dual Incision (CBGB)	3	1.45	2.07 (0.42–6.04)
Knee Arthroplasty (KPRO)	1	0.70	1.43 (0.02–7.98)
Hip Arthroplasty (HPRO)	1	1.12	0.89 (0.01–4.96)
Abdominal Hysterectomy (HYST)	0	0.60	0.00 (0.00–6.15)
Colon surgery (COLO)	4	3.81	1.05 (0.28–2.69)
ST. JOSEPHS HOSPITAL (12438)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.03	0.00 (0.00–125.99)
Hip Arthroplasty (HPRO)	0	0.04	0.00 (0.00–85.19)
Abdominal Hysterectomy (HYST)	0	0.25	0.00 (0.00–14.87)
Colon surgery (COLO)	0	0.49	0.00 (0.00–7.45)
ST. LUKES HOSPITAL ANDERSON CAMPUS (21487)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.06	0.00 (0.00–63.93)
Hip Arthroplasty (HPRO)	0	0.34	0.00 (0.00–10.88)
Abdominal Hysterectomy (HYST)	0	0.01	0.00 (0.00–263.07)
Colon surgery (COLO)	1	0.97	1.03 (0.01–5.74)

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Table 4.5.15 – 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. LUKES HOSPITAL BETHLEHEM (11718)			
Cardiac (CARD)	0	0.85	0.00 (0.00–4.34)
Cardiac Bypass — Single Incision (CBGC)	0	0.40	0.00 (0.00–9.09)
Cardiac Bypass — Dual Incision (CBGB)	0	2.39	0.00 (0.00–1.54)
Knee Arthroplasty (KPRO)	4	2.83	1.41 (0.38–3.62)
Hip Arthroplasty (HPRO)	2	4.19	0.48 (0.05–1.72)
Abdominal Hysterectomy (HYST)	6	2.11	2.84 (1.04–6.18)
Colon surgery (COLO)	11	10.52	1.05 (0.52–1.87)
ST. LUKES MINERS MEMORIAL HOSPITAL (11784)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.58	0.00 (0.00–6.30)
Hip Arthroplasty (HPRO)	3	0.31	9.65 (1.94–28.19)
Abdominal Hysterectomy (HYST)	0	0.02	0.00 (0.00–157.58)
Colon surgery (COLO)	0	0.69	0.00 (0.00–5.35)
ST. LUKES QUAKERTOWN HOSPITAL (11711)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.14	0.00 (0.00–26.46)
Hip Arthroplasty (HPRO)	1	0.22	4.53 (0.06–25.23)
Abdominal Hysterectomy (HYST)	0	0.08	0.00 (0.00–48.48)
Colon surgery (COLO)	1	1.19	0.84 (0.01–4.66)
ST. MARY MEDICAL CENTER (11885)			
Cardiac (CARD)	0	0.66	0.00 (0.00–5.53)
Cardiac Bypass — Single Incision (CBGC)	0	0.23	0.00 (0.00–16.12)
Cardiac Bypass — Dual Incision (CBGB)	3	3.12	0.96 (0.19–2.81)
Knee Arthroplasty (KPRO)	1	2.53	0.40 (0.01–2.20)
Hip Arthroplasty (HPRO)	2	3.78	0.53 (0.06–1.91)
Abdominal Hysterectomy (HYST)	2	2.16	0.92 (0.10–3.34)
Colon surgery (COLO)	5	4.95	1.01 (0.33–2.36)
ST. VINCENT HEALTH CENTER (11699)			
Cardiac (CARD)	0	1.07	0.00 (0.00–3.43)
Cardiac Bypass — Single Incision (CBGC)	0	0.18	0.00 (0.00–20.57)
Cardiac Bypass — Dual Incision (CBGB)	2	4.39	0.46 (0.05–1.64)
Knee Arthroplasty (KPRO)	0	2.21	0.00 (0.00–1.66)
Hip Arthroplasty (HPRO)	1	3.28	0.30 (0.00–1.69)
Abdominal Hysterectomy (HYST)	1	0.99	1.01 (0.01–5.64)
Colon surgery (COLO)	16	8.53	1.88 (1.07–3.05)
SUNBURY COMMUNITY HOSPITAL (12105)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.23	0.00 (0.00–15.62)
Hip Arthroplasty (HPRO)	0	0.49	0.00 (0.00–7.49)
Abdominal Hysterectomy (HYST)	0	0.07	0.00 (0.00–56.24)
Colon surgery (COLO)	1	0.82	1.22 (0.02–6.80)
SURGICAL INSTITUTE OF READING (12535)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	3	1.27	2.36 (0.48–6.91)
Hip Arthroplasty (HPRO)	3	0.81	3.70 (0.74–10.80)
Abdominal Hysterectomy (HYST)	0	0.06	0.00 (0.00–65.50)
Colon surgery (COLO)	0	0.40	0.00 (0.00–9.18)

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Table 4.5.15 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
SURGICAL SPECIALTY CENTER AT COORDINATED HEALTH, THE (15259)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	1.46	0.00 (0.00–2.51)
Hip Arthroplasty (HPRO)	0	1.30	0.00 (0.00–2.83)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	.	.	.
TEMPLE UNIVERSITY HOSPITAL (12382)			
Cardiac (CARD)	4	1.72	2.33 (0.63–5.96)
Cardiac Bypass — Single Incision (CBGC)	1	0.03	31.07 (0.41–172.89)
Cardiac Bypass — Dual Incision (CBGB)	2	3.08	0.65 (0.07–2.35)
Knee Arthroplasty (KPRO)	2	2.43	0.82 (0.09–2.97)
Hip Arthroplasty (HPRO)	1	3.22	0.31 (0.00–1.73)
Abdominal Hysterectomy (HYST)	4	4.55	0.88 (0.24–2.25)
Colon surgery (COLO)	6	9.79	0.61 (0.22–1.33)
THE GOOD SAMARITAN HOSPITAL (11712)			
Cardiac (CARD)	0	0.04	0.00 (0.00–81.64)
Cardiac Bypass — Single Incision (CBGC)	0	0.07	0.00 (0.00–53.38)
Cardiac Bypass — Dual Incision (CBGB)	0	1.91	0.00 (0.00–1.92)
Knee Arthroplasty (KPRO)	1	1.62	0.62 (0.01–3.44)
Hip Arthroplasty (HPRO)	0	1.31	0.00 (0.00–2.80)
Abdominal Hysterectomy (HYST)	1	0.12	8.58 (0.11–47.76)
Colon surgery (COLO)	5	4.08	1.23 (0.40–2.86)
THE WASHINGTON HOSPITAL (11460)			
Cardiac (CARD)	0	0.21	0.00 (0.00–17.73)
Cardiac Bypass — Single Incision (CBGC)	0	0.10	0.00 (0.00–37.99)
Cardiac Bypass — Dual Incision (CBGB)	0	1.71	0.00 (0.00–2.14)
Knee Arthroplasty (KPRO)	0	0.90	0.00 (0.00–4.08)
Hip Arthroplasty (HPRO)	3	1.42	2.11 (0.42–6.17)
Abdominal Hysterectomy (HYST)	1	2.04	0.49 (0.01–2.73)
Colon surgery (COLO)	2	6.16	0.32 (0.04–1.17)
THE WESTERN PENNSYLVANIA HOSPITAL (11864)			
Cardiac (CARD)	0	0.08	0.00 (0.00–46.71)
Cardiac Bypass — Single Incision (CBGC)	0	0.21	0.00 (0.00–17.79)
Cardiac Bypass — Dual Incision (CBGB)	1	0.35	2.83 (0.04–15.72)
Knee Arthroplasty (KPRO)	1	0.67	1.49 (0.02–8.31)
Hip Arthroplasty (HPRO)	1	0.53	1.89 (0.02–10.52)
Abdominal Hysterectomy (HYST)	9	5.70	1.58 (0.72–3.00)
Colon surgery (COLO)	3	2.36	1.27 (0.26–3.72)
THOMAS JEFFERSON UNIV HOSP - METHODIST (12017)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.15	6.46 (0.08–35.93)
Hip Arthroplasty (HPRO)	1	0.50	2.01 (0.03–11.16)
Abdominal Hysterectomy (HYST)	0	0.13	0.00 (0.00–29.18)
Colon surgery (COLO)	1	2.23	0.45 (0.01–2.50)
THOMAS JEFFERSON UNIV HOSPITAL (11506)			
Cardiac (CARD)	2	1.19	1.68 (0.19–6.07)
Cardiac Bypass — Single Incision (CBGC)	1	0.33	3.02 (0.04–16.82)
Cardiac Bypass — Dual Incision (CBGB)	3	2.11	1.42 (0.29–4.16)
Knee Arthroplasty (KPRO)	7	5.92	1.18 (0.47–2.44)
Hip Arthroplasty (HPRO)	9	14.00	0.64 (0.29–1.22)
Abdominal Hysterectomy (HYST)	7	4.60	1.52 (0.61–3.13)
Colon surgery (COLO)	17	19.71	0.86 (0.50–1.38)

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Table 4.5.15 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
TITUSVILLE AREA HOSPITAL (11738)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.15	0.00 (0.00–25.09)
Hip Arthroplasty (HPRO)	0	0.33	0.00 (0.00–11.15)
Abdominal Hysterectomy (HYST)	0	0.25	0.00 (0.00–14.84)
Colon surgery (COLO)	2	0.69	2.88 (0.32–10.40)
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)	.	.	.
Colon surgery (COLO)	0	0.06	0.00 (0.00–60.22)
TYLER MEMORIAL HOSPITAL (11829)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.02	0.00 (0.00–171.34)
Hip Arthroplasty (HPRO)	.	.	.
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	0	0.47	0.00 (0.00–7.77)
TYRONE HOSPITAL (12717)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.31	3.21 (0.04–17.83)
Hip Arthroplasty (HPRO)	0	0.26	0.00 (0.00–14.21)
Abdominal Hysterectomy (HYST)	0	0.04	0.00 (0.00–98.24)
Colon surgery (COLO)	0	0.34	0.00 (0.00–10.89)
UNIONTOWN HOSPITAL (10441)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	1.35	0.00 (0.00–2.72)
Hip Arthroplasty (HPRO)	1	1.86	0.54 (0.01–2.99)
Abdominal Hysterectomy (HYST)	2	1.67	1.20 (0.13–4.34)
Colon surgery (COLO)	7	5.74	1.22 (0.49–2.51)
UPMC BEDFORD (11680)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.05	0.00 (0.00–70.74)
Hip Arthroplasty (HPRO)	0	0.26	0.00 (0.00–13.84)
Abdominal Hysterectomy (HYST)	0	0.66	0.00 (0.00–5.53)
Colon surgery (COLO)	1	0.46	2.17 (0.03–12.08)
UPMC EAST (28812)			
Cardiac (CARD)	0	0.01	0.00 (0.00–503.45)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.80	1.25 (0.02–6.93)
Hip Arthroplasty (HPRO)	2	0.99	2.02 (0.23–7.31)
Abdominal Hysterectomy (HYST)	0	0.01	0.00 (0.00–263.07)
Colon surgery (COLO)	3	1.18	2.54 (0.51–7.41)

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Table 4.5.15 – 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 HAMOT (11725)			
Cardiac (CARD)	1	1.15	0.87 (0.01–4.83)
Cardiac Bypass — Single Incision (CBGC)	0	0.08	0.00 (0.00–46.18)
Cardiac Bypass — Dual Incision (CBGB)	9	3.98	2.26 (1.03–4.30)
Knee Arthroplasty (KPRO)	4	2.79	1.44 (0.39–3.68)
Hip Arthroplasty (HPRO)	6	4.59	1.31 (0.48–2.85)
Abdominal Hysterectomy (HYST)	1	2.38	0.42 (0.01–2.33)
Colon surgery (COLO)	19	11.62	1.63 (0.98–2.55)
UPMC HORIZON (11675)			
Cardiac (CARD)	0	0.01	0.00 (0.00–251.72)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	5	2.34	2.13 (0.69–4.98)
Hip Arthroplasty (HPRO)	1	2.07	0.48 (0.01–2.68)
Abdominal Hysterectomy (HYST)	0	0.57	0.00 (0.00–6.46)
Colon surgery (COLO)	1	3.35	0.30 (0.00–1.66)
UPMC MCKEESPORT (11707)			
Cardiac (CARD)	0	0.04	0.00 (0.00–100.69)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.37	2.73 (0.04–15.18)
Hip Arthroplasty (HPRO)	1	0.82	1.21 (0.02–6.75)
Abdominal Hysterectomy (HYST)	1	0.28	3.55 (0.05–19.75)
Colon surgery (COLO)	0	2.78	0.00 (0.00–1.32)
UPMC MERCY (10384)			
Cardiac (CARD)	0	0.84	0.00 (0.00–4.35)
Cardiac Bypass — Single Incision (CBGC)	0	0.05	0.00 (0.00–68.39)
Cardiac Bypass — Dual Incision (CBGB)	1	2.15	0.47 (0.01–2.59)
Knee Arthroplasty (KPRO)	4	1.77	2.26 (0.61–5.79)
Hip Arthroplasty (HPRO)	1	2.47	0.40 (0.01–2.25)
Abdominal Hysterectomy (HYST)	7	4.29	1.63 (0.65–3.36)
Colon surgery (COLO)	11	9.16	1.20 (0.60–2.15)
UPMC NORTHWEST (11837)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.51	0.00 (0.00–7.17)
Hip Arthroplasty (HPRO)	0	1.10	0.00 (0.00–3.32)
Abdominal Hysterectomy (HYST)	1	0.43	2.32 (0.03–12.91)
Colon surgery (COLO)	1	1.96	0.51 (0.01–2.85)
UPMC PASSAVANT (11242)			
Cardiac (CARD)	0	0.95	0.00 (0.00–3.85)
Cardiac Bypass — Single Incision (CBGC)	0	0.23	0.00 (0.00–15.95)
Cardiac Bypass — Dual Incision (CBGB)	1	3.02	0.33 (0.00–1.84)
Knee Arthroplasty (KPRO)	1	3.80	0.26 (0.00–1.46)
Hip Arthroplasty (HPRO)	2	4.77	0.42 (0.05–1.51)
Abdominal Hysterectomy (HYST)	3	6.02	0.50 (0.10–1.46)
Colon surgery (COLO)	43	25.76	1.67 (1.21–2.25)
UPMC PRESBYTERIAN SHADYSIDE — PRESBYTERIAN (10348)			
Cardiac (CARD)	5	3.70	1.35 (0.44–3.15)
Cardiac Bypass — Single Incision (CBGC)	2	0.90	2.23 (0.25–8.04)
Cardiac Bypass — Dual Incision (CBGB)	4	4.22	0.95 (0.26–2.43)
Knee Arthroplasty (KPRO)	1	0.11	8.71 (0.11–48.49)
Hip Arthroplasty (HPRO)	0	1.37	0.00 (0.00–2.67)
Abdominal Hysterectomy (HYST)	0	0.11	0.00 (0.00–31.95)
Colon surgery (COLO)	21	30.24	0.69 (0.43–1.06)

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Table 4.5.15 – 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	3.92	0.77 (0.15–2.24)
Cardiac Bypass — Single Incision (CBGC)	0	0.47	0.00 (0.00–7.73)
Cardiac Bypass — Dual Incision (CBGB)	7	7.83	0.89 (0.36–1.84)
Knee Arthroplasty (KPRO)	14	7.31	1.92 (1.05–3.21)
Hip Arthroplasty (HPRO)	8	13.72	0.58 (0.25–1.15)
Abdominal Hysterectomy (HYST)	1	1.50	0.67 (0.01–3.70)
Colon surgery (COLO)	69	22.59	3.05 (2.38–3.87)
UPMC ST MARGARET (11561)			
Cardiac (CARD)	0	0.05	0.00 (0.00–68.14)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	6	4.90	1.22 (0.45–2.66)
Hip Arthroplasty (HPRO)	5	4.81	1.04 (0.33–2.42)
Abdominal Hysterectomy (HYST)	1	0.56	1.79 (0.02–9.97)
Colon surgery (COLO)	6	9.44	0.64 (0.23–1.38)
WARREN GENERAL HOSPITAL (12216)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.67	0.00 (0.00–5.50)
Hip Arthroplasty (HPRO)	0	0.37	0.00 (0.00–9.96)
Abdominal Hysterectomy (HYST)	1	0.62	1.60 (0.02–8.92)
Colon surgery (COLO)	3	0.81	3.69 (0.74–10.79)
WAYNE MEMORIAL HOSPITAL (12004)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.69	0.00 (0.00–5.29)
Hip Arthroplasty (HPRO)	0	0.84	0.00 (0.00–4.36)
Abdominal Hysterectomy (HYST)	3	0.35	8.65 (1.74–25.26)
Colon surgery (COLO)	5	2.62	1.91 (0.61–4.45)
WAYNESBORO HOSPITAL (11642)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.22	4.50 (0.06–25.06)
Hip Arthroplasty (HPRO)	0	0.21	0.00 (0.00–17.15)
Abdominal Hysterectomy (HYST)	1	0.09	11.31 (0.15–62.95)
Colon surgery (COLO)	0	0.46	0.00 (0.00–8.00)
WELLSPAN SURGERY AND REHABILITATION HOSPITAL (27430)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	1.49	0.67 (0.01–3.73)
Hip Arthroplasty (HPRO)	3	1.47	2.03 (0.41–5.94)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	.	.	.
WILKES-BARRE GENERAL HOSPITAL (11916)			
Cardiac (CARD)	0	0.40	0.00 (0.00–9.23)
Cardiac Bypass — Single Incision (CBGC)	0	0.04	0.00 (0.00–85.49)
Cardiac Bypass — Dual Incision (CBGB)	2	3.10	0.65 (0.07–2.33)
Knee Arthroplasty (KPRO)	2	1.78	1.13 (0.13–4.07)
Hip Arthroplasty (HPRO)	4	2.54	1.57 (0.42–4.03)
Abdominal Hysterectomy (HYST)	1	1.73	0.58 (0.01–3.22)
Colon surgery (COLO)	17	13.29	1.28 (0.74–2.05)

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Table 4.5.15 – Rate of SSIs (SIR) — All Procedures By Facility (alphabetical order) – Continued from previous page

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)			
Cardiac (CARD)	0	0.61	0.00 (0.00–6.03)
Cardiac Bypass — Single Incision (CBGC)	0	0.15	0.00 (0.00–25.10)
Cardiac Bypass — Dual Incision (CBGB)	1	1.76	0.57 (0.01–3.16)
Knee Arthroplasty (KPRO)	5	5.57	0.90 (0.29–2.10)
Hip Arthroplasty (HPRO)	4	6.27	0.64 (0.17–1.63)
Abdominal Hysterectomy (HYST)	1	0.74	1.35 (0.02–7.53)
Colon surgery (COLO)	3	2.30	1.31 (0.26–3.82)
WINDBER HOSPITAL (12031)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.16	6.28 (0.08–34.93)
Hip Arthroplasty (HPRO)	1	0.11	9.37 (0.12–52.12)
Abdominal Hysterectomy (HYST)	0	0.21	0.00 (0.00–17.70)
Colon surgery (COLO)	1	2.60	0.38 (0.01–2.14)
YORK HOSPITAL (10108)			
Cardiac (CARD)	1	1.75	0.57 (0.01–3.17)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	12	5.67	2.12 (1.09–3.70)
Knee Arthroplasty (KPRO)	0	0.65	0.00 (0.00–5.62)
Hip Arthroplasty (HPRO)	2	2.05	0.98 (0.11–3.52)
Abdominal Hysterectomy (HYST)	4	6.24	0.64 (0.17–1.64)
Colon surgery (COLO)	15	13.23	1.13 (0.63–1.87)

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.

PADOH published hospital HCP influenza vaccination rates in aggregate in the 2011 annual report and has published facility-specific vaccination rates since then to promote awareness and provide a statewide baseline for this important measure of institutional commitment to patient safety. 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 are now 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/`

This is the second year that PADOH is publishing facility-specific HCP vaccination rates. These rates are based on data submitted by facilities to NHSN. The NHSN assessment of HCP vaccination rates is based on National Quality Forum (NQF) Metric 0431. 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 253 hospitals open during the 2013–2014 influenza season reported healthcare personnel influenza vaccination rates to NHSN (including two hospitals that opened part way through the season), and 174 hospitals (69 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 400,660 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 median percent of HCP with unknown vaccination status decreased 43 percent from the 2012–2013 season to the

2013–2014 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 2013–2014 Influenza Season — Pennsylvania

	Vaccinated		Declined		Medical Contraindication		Unknown	
	n	median %	n	median %	n	median %	n	median %
Employee	266,696	84.91	25,316	6.78	2,694	0.70	14,830	1.77
LIP	41,839	67.70	2,194	0.00	373	0.00	22,214	25.93
STV	51,997	92.31	1,732	0.00	410	0.00	8,872	1.21
Contractor	6,963	88.35	422	0.00	24	0.00	1,420	0.00
All	367,495	83.96	29,664	0.43	3,501	0.00	47,336	3.15

4.6.2. Influenza Vaccination of HCP — By Facility

Hospitals reported significant improvements from last year. The median employee vaccination rate increased 13 percent (from 75 percent to 85 percent) from the 2012–2013 season to the 2013–2014 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 2013–2014 influenza season, 103 facilities (41 percent of 253 facilities) reported employee vaccination rates above 90 percent and 48 facilities (19 percent) reported vaccination rates at goal for employees, LIPs and STVs; this is an increase of 47 percent and 71 percent respectively from the previous season. Overall, the percent of facilities with employee vaccination rates at goal has increased 134 percent since the 2011–2012 influenza 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 103 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 71 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): 13 (52 percent) reported all-HCP vaccination rates above 90 percent; one facility reported a rate of 88 percent; and the remaining 13 facilities reported all-HCP vaccination rates between 38 and 77 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, 2013–2014

Healthy People 2020 Goal = 90%

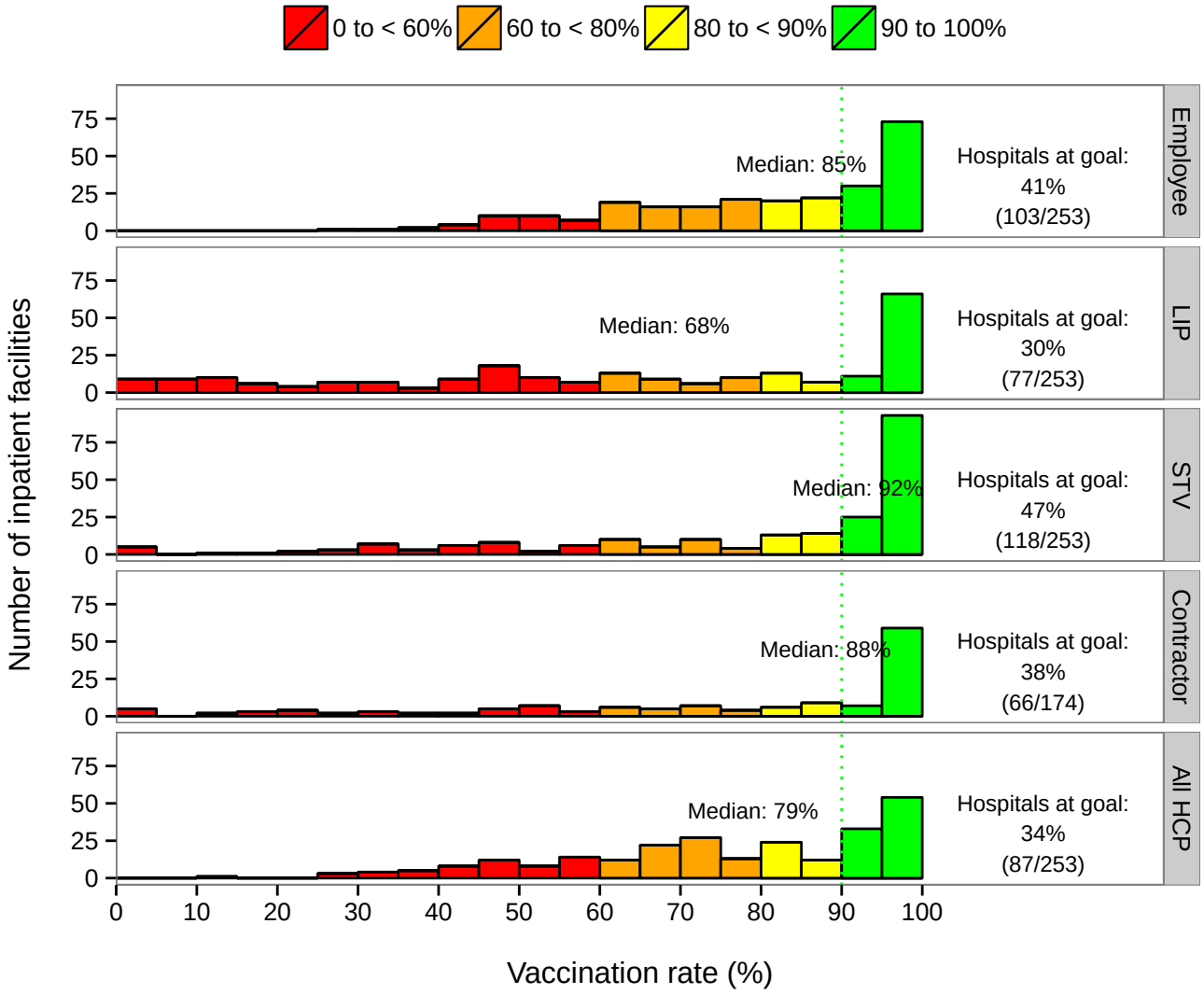

Figure 4.6.2: Distribution of Facility Healthcare Personnel (HCP) Seasonal Influneza Vaccination Rates Among 25 Largest Facilities — Pennsylvania, 2013–2014

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

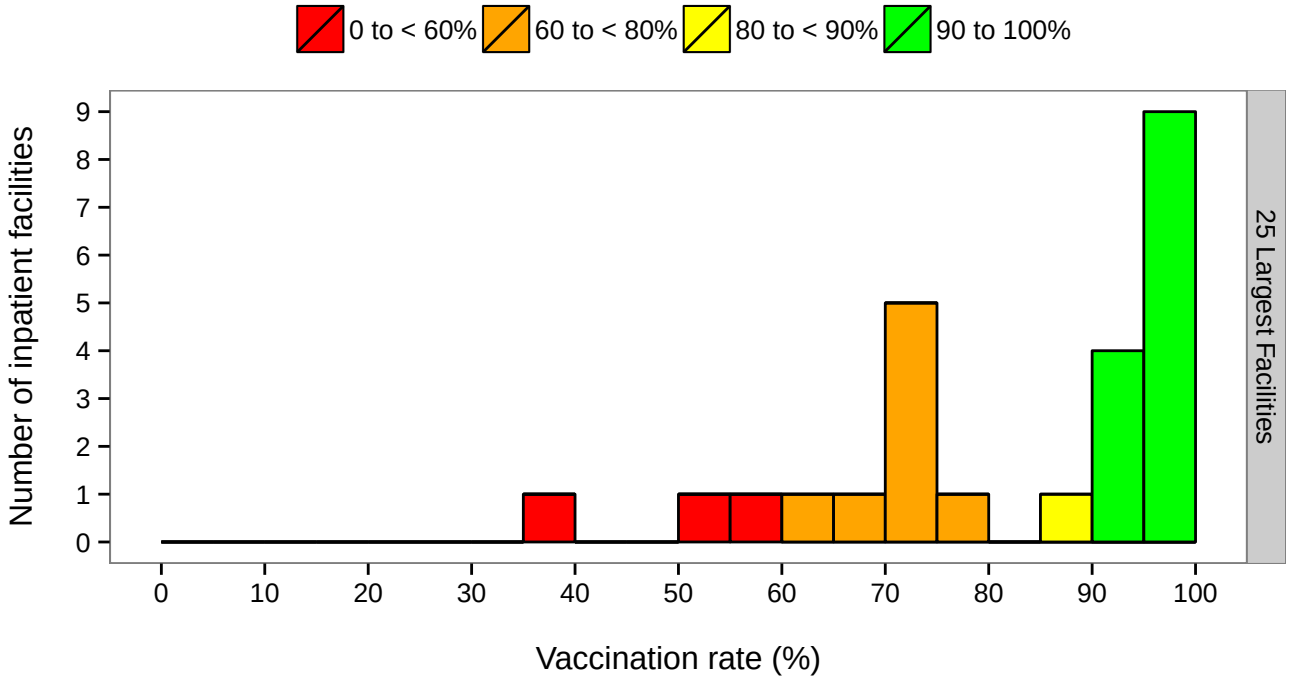

Figure 4.6.3: Map of Employee Seasonal Influneza Vaccination Rates by Facility — Pennsylvania, 2013–2014

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

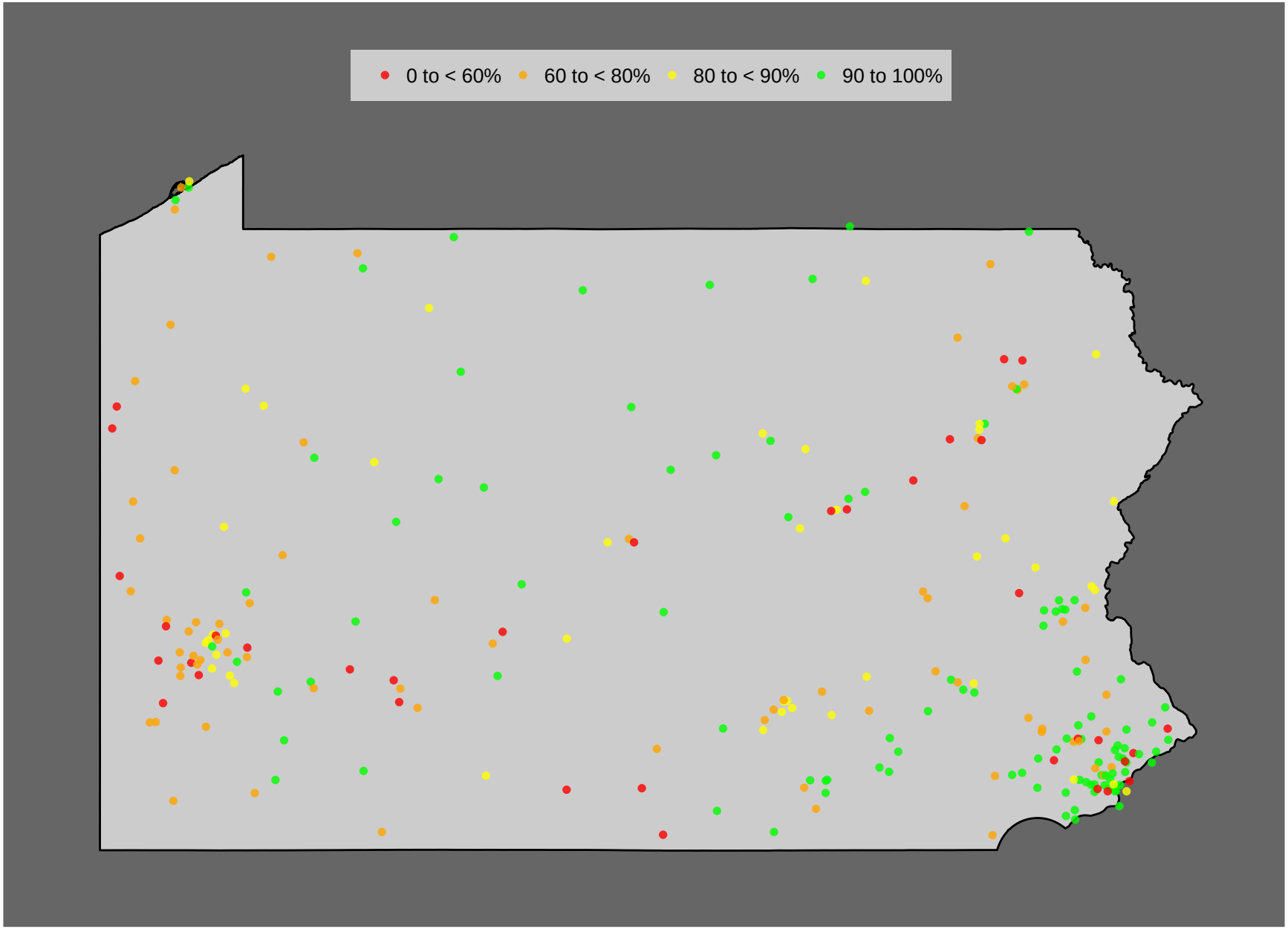

Table 4.6.2: Hospitals with Employee Seasonal Influenza Vaccination Rates of 90 Percent or Better — Pennsylvania, 2013–2014

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)*
BUCKS COUNTY SPECIALTY HOSPITAL (15202)
BUCKTAIL MEDICAL CENTER (12461)*
CARLISLE REGIONAL MEDICAL CENTER (11997)
CHARLES COLE MEMORIAL HOSPITAL (11956)
CHESTER COUNTY HOSPITAL (12016)
CHESTNUT HILL HOSPITAL (12304)
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)*
CLARION HOSPITAL (11654)
CLEARFIELD HOSPITAL (11843)*
COORDINATED HEALTH ORTHOPEDIC HOSPITAL, LLC (11872)
CROZER CHESTER MEDICAL CENTER (11839)*
CROZER CHESTER MEDICAL CENTER SPRINGFIELD (11851)
CROZER CHESTER MEDICAL CENTER TAYLOR (11932)*
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)*
DOYLESTOWN HOSPITAL (10190)*
DUBOIS REGIONAL MEDICAL CENTER (11606)
EAGLEVILLE HOSPITAL (12965)*
EINSTEIN MEDICAL CENTER MONTGOMERY (30210)
ELK REGIONAL HEALTH CENTER (11859)*
EPHRATA COMMUNITY HOSPITAL (11764)*
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)
GETTYSBURG HOSPITAL (11531)
GOOD SHEPHERD SPECIALTY HOSPITAL (11887)*
GRAND VIEW HOSPITAL (11847)*
HAHNEMANN UNIVERSITY HOSPITAL (11437)
HANOVER HOSPITAL (11899)*
HAVEN BEHAVIORAL HOSPITAL OF EASTERN PENNSYLVANIA (14471)
HEART OF LANCASTER REGIONAL MEDICAL CENTER (12571)
HIGHLANDS HOSPITAL (11902)
HOLY REDEEMER HOSPITAL AND MEDICAL CENTER (11973)*
HOSPITAL OF FOX CHASE CANCER CENTER (12134)*
HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)
INDIANA REGIONAL MEDICAL CENTER (11759)
JEANES HOSPITAL (11459)
JERSEY SHORE HOSPITAL (11689)
LANCASTER GENERAL HOSPITAL (10183)*
LANCASTER REGIONAL MEDICAL CENTER (12335)
LANCASTER REHABILITATION HOSPITAL (12628)*
LANSDALE HOSPITAL (12032)*
LEHIGH VALLEY HOSPITAL — MUHLENBERG (11898)*
LEHIGH VALLEY HOSPITAL (11884)*
LEWISTOWN HOSPITAL (11825)

Table 4.6.2: **(continued)**

Hospital Name (NHSN ID)
LIFECARE HOSPITALS OF CHESTER COUNTY (12005)
LIFECARE HOSPITALS OF PITTSBURGH — ALLE-KISKI CAMPUS (18955)
LOCK HAVEN HOSPITAL (12097)*
LOWER BUCKS HOSPITAL (12390)
MAGEE REHAB HOSPITAL (12146)
MAIN LINE HOSPITAL — PAOLI (11750)*
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)
NASON HOSPITAL (11907)
NAZARETH HOSPITAL (11919)
PENN PRESBYTERIAN MEDICAL CENTER (11814)
PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS (11448)
PUNXSUTAWNEY AREA HOSPITAL (11830)
RIDDLE MEMORIAL HOSPITAL (11731)*
ROBERT PACKER HOSPITAL (12422)*
ROXBOROUGH MEMORIAL HOSPITAL (11978)*
SACRED HEART HOSPITAL (11684)*
SELECT SPECIALITY HOSPITAL — CENTRAL PENNSYLVANIA (YORK) (12334)
SELECT SPECIALITY HOSPITAL — ERIE (11880)
SELECT SPECIALTY HOSPITAL — PITTSBURGH/UPMC (12009)
SOLDIERS & SAILORS MEM HOSPITAL (11688)*
SOMERSET HOSPITAL (12282)
ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)*
ST. JOHN VIANNEY HOSPITAL (12548)*
ST. JOSEPH MEDICAL CENTER (11961)*
ST. MARY MEDICAL CENTER (11885)*
ST. MARY MEDICAL CENTER REHAB (12483)*
ST. VINCENT HEALTH CENTER (11699)*
SURGICAL INSTITUTE OF READING (12535)
SURGICAL SPECIALTY CENTER AT COORDINATED HEALTH, THE (15259)
TEMPLE UNIVERSITY HOSPITAL (12382)
THE GOOD SHEPHERD REHABILITATION HOSPITAL (11896)
THOMAS JEFFERSON UNIV HOSP - METHODIST (12017)*
THOMAS JEFFERSON UNIV HOSPITAL (11506)*
TROY COMMUNITY HOSPITAL (12018)
TYRONE HOSPITAL (12717)*
UPMC EAST (28812)
WARREN GENERAL HOSPITAL (12216)*
WELLSPAN SURGERY AND REHABILITATION HOSPITAL (27430)*
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)
YORK HOSPITAL (10108)*

* 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, 2013–2014

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
ABINGTON MEMORIAL HOSPITAL (11838)				
Employee	100	0	0	0
LIP	99	0	1	0
STV	97	1	2	0
Contractor	.	.	.	.
ADVANCED SURGICAL HOSPITAL (16317)				
Employee	66	27	0	7
LIP	28	3	0	69
STV	0	0	0	100
Contractor	0	0	0	100
ALBERT EINSTEIN MEDICAL CENTER (10585)				
Employee	98	0	1	1
LIP	50	0	0	50
STV	84	0	0	16
Contractor	.	.	.	.
ALBERT EINSTEIN MEDICAL CENTER AT ELKINS PARK (12500)				
Employee	98	0	1	1
LIP	.	.	.	.
STV	.	.	.	.
Contractor	.	.	.	.
ALBERT EINSTEIN MEDICAL CENTER MOSS REHABILITATION (12508)				
Employee	98	0	1	1
LIP	.	.	.	.
STV	100	0	0	0
Contractor	.	.	.	.
ALLEGHENY GENERAL HOSPITAL (10648)				
Employee	57	11	0	32
LIP	18	0	0	82
STV	32	0	1	67
Contractor	64	7	1	28
ALLEGHENY VALLEY HOSPITAL (11842)				
Employee	64	16	0	20
LIP	19	1	0	81
STV	71	1	0	28
Contractor	62	0	0	38
ALLIED SERVICES INSTITUTE OF REHABILITATION (12591)				
Employee	77	14	2	7
LIP	94	6	0	0
STV	97	0	0	3
Contractor	.	.	.	.
ALTOONA REGIONAL HEALTH SYSTEM (10178)				
Employee	62	27	1	10
LIP	29	0	0	71
STV	43	23	0	34
Contractor	15	53	0	32
ARIA HEALTH (11388)				
Employee	98	0	2	0
LIP	100	0	0	0
STV	100	0	0	0
Contractor	97	1	3	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	76	16	1	7
LIP	78	0	0	22
STV	82	0	0	18
Contractor	100	0	0	0
BARIX CLINICS OF PENNSYLVANIA (12037)				
Employee	46	0	0	54
LIP	7	0	0	93
STV	.	.	.	.
Contractor	.	.	.	.
BARNES-KASSON COUNTY HOSPITAL (12404)				
Employee	97	0	3	0
LIP	100	0	0	0
STV	.	.	.	.
Contractor	.	.	.	.
BELMONT CENTER FOR COMPREHENSIVE TREATMENT (12505)				
Employee	99	0	1	0
LIP	.	.	.	.
STV	.	.	.	.
Contractor	.	.	.	.
BERWICK HOSPITAL CENTER (11442)				
Employee	60	33	4	3
LIP	43	4	0	53
STV	88	12	0	0
Contractor	0	0	0	100
BRADFORD REGIONAL MEDICAL CENTER (12361)				
Employee	97	2	0	1
LIP	90	2	0	8
STV	97	1	0	2
Contractor	98	1	1	0
BRANDYWINE HOSPITAL (11979)				
Employee	65	12	1	22
LIP	87	6	4	2
STV	81	13	0	6
Contractor	.	.	.	.
BROOKE GLEN BEHAVIORAL HOSPITAL (12623)				
Employee	51	5	1	43
LIP	0	0	8	92
STV	33	0	0	67
Contractor	42	8	0	50
BROOKVILLE HOSPITAL (12418)				
Employee	86	7	1	6
LIP	68	0	0	32
STV	100	0	0	0
Contractor	68	4	0	29
BUCKS COUNTY SPECIALTY HOSPITAL (15202)				
Employee	99	1	1	0
LIP	99	0	1	0
STV	.	.	.	.
Contractor	.	.	.	.
BUCKTAIL MEDICAL CENTER (12461)				
Employee	99	0	1	0
LIP	100	0	0	0
STV	95	5	0	0
Contractor	98	2	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 %
BUTLER MEMORIAL HOSPITAL (11736)				
Employee	86	14	0	0
LIP	50	32	0	18
STV	96	4	0	0
Contractor	.	.	.	.
CANONSBURG GENERAL HOSPITAL (11586)				
Employee	40	7	1	52
LIP	5	0	0	95
STV	75	10	0	16
Contractor	61	0	0	39
CARLISLE REGIONAL MEDICAL CENTER (11997)				
Employee	97	3	0	0
LIP	91	1	0	8
STV	87	3	0	10
Contractor	100	0	0	0
CHAMBERSBURG HOSPITAL (11913)				
Employee	54	17	2	27
LIP	33	14	1	53
STV	41	11	9	39
Contractor	31	5	0	64
CHARLES COLE MEMORIAL HOSPITAL (11956)				
Employee	95	5	0	0
LIP	84	16	0	0
STV	93	7	0	0
Contractor	100	0	0	0
CHESTER COUNTY HOSPITAL (12016)				
Employee	99	0	1	0
LIP	72	0	2	26
STV	99	0	1	0
Contractor	99	0	1	0
CHESTNUT HILL HOSPITAL (12304)				
Employee	93	6	1	0
LIP	49	0	1	50
STV	96	0	0	4
Contractor	74	3	0	23
CHILDRENS HOME OF PITTSBURGH, THE (12336)				
Employee	87	12	1	0
LIP	.	.	.	.
STV	80	20	0	0
Contractor	.	.	.	.
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)				
Employee	99	0	0	0
LIP	98	1	1	1
STV	100	0	0	0
Contractor	.	.	.	.
CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)				
Employee	87	1	0	12
LIP	47	0	0	53
STV	47	0	0	53
Contractor	.	.	.	.
CHILDRENS INSTITUTE OF PITTSBURGH (12266)				
Employee	65	35	0	0
LIP	50	0	0	50
STV	30	8	0	62
Contractor	56	44	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 %
CLARION HOSPITAL (11654)				
Employee	92	7	0	1
LIP	83	15	0	1
STV	95	5	0	0
Contractor	.	.	.	.
CLARION PSYCHIATRIC CENTER (12454)				
Employee	73	8	1	17
LIP	60	10	0	30
STV	.	.	.	.
Contractor	0	0	0	100
CLARKS SUMMIT STATE HOSPITAL (12051)				
Employee	44	56	0	0
LIP	.	.	.	.
STV	.	.	.	.
Contractor	.	.	.	.
CLEARFIELD HOSPITAL (11843)				
Employee	96	3	0	0
LIP	100	0	0	0
STV	97	2	1	0
Contractor	64	29	0	7
CONEMAUGH VALLEY MEMORIAL HOSPITAL (10280)				
Employee	58	37	1	4
LIP	54	12	0	33
STV	62	21	0	17
Contractor	33	26	0	41
COORDINATED HEALTH ORTHOPEDIC HOSPITAL, LLC (11872)				
Employee	91	0	1	8
LIP	100	0	0	0
STV	.	.	.	.
Contractor	100	0	0	0
CORRY MEMORIAL HOSPITAL (12283)				
Employee	68	32	0	0
LIP	82	18	0	0
STV	100	0	0	0
Contractor	.	.	.	.
CRICHTON REHABILITATION CENTER (12273)				
Employee	47	50	3	0
LIP	61	2	2	36
STV	100	0	0	0
Contractor	50	25	25	0
CROZER CHESTER MEDICAL CENTER (11839)				
Employee	95	2	3	0
LIP	98	0	2	0
STV	95	2	0	3
Contractor	.	.	.	.
CROZER CHESTER MEDICAL CENTER SPRINGFIELD (11851)				
Employee	93	1	3	3
LIP	98	0	2	0
STV	89	0	11	0
Contractor	.	.	.	.
CROZER CHESTER MEDICAL CENTER TAYLOR (11932)				
Employee	96	1	3	0
LIP	98	0	2	0
STV	94	1	4	2
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	51	49	0	0
LIP	38	50	0	12
STV	13	6	0	81
Contractor	18	4	0	79
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)				
Employee	94	0	5	0
LIP	97	0	3	0
STV	97	0	3	0
Contractor	.	.	.	.
DEVEREUX CHILDRENS BEHAVIORAL HEALTH INSTITUTE (12738)				
Employee	50	24	6	20
LIP	100	0	0	0
STV	93	0	0	7
Contractor	.	.	.	.
DIVINE PROVIDENCE HOSPITAL (11743)				
Employee	90	0	1	10
LIP	75	0	0	25
STV	85	0	0	15
Contractor	98	0	0	2
DOYLESTOWN HOSPITAL (10190)				
Employee	98	0	1	1
LIP	99	0	1	0
STV	100	0	0	0
Contractor	.	.	.	.
DUBOIS REGIONAL MEDICAL CENTER (11606)				
Employee	95	5	0	0
LIP	79	2	0	19
STV	93	5	0	2
Contractor	88	7	0	4
EAGLEVILLE HOSPITAL (12965)				
Employee	96	3	1	0
LIP	100	0	0	0
STV	100	0	0	0
Contractor	100	0	0	0
EASTERN REGIONAL MEDICAL CENTER (12348)				
Employee	56	6	0	38
LIP	100	0	0	0
STV	100	0	0	0
Contractor	.	.	.	.
EASTON HOSPITAL (11929)				
Employee	83	15	0	1
LIP	41	0	0	59
STV	58	0	0	42
Contractor	91	0	0	9
EDGEWOOD SURGICAL HOSPITAL (12552)				
Employee	26	57	0	17
LIP	40	0	0	60
STV	100	0	0	0
Contractor	100	0	0	0
EINSTEIN MEDICAL CENTER MONTGOMERY (30210)				
Employee	99	0	1	0
LIP	50	0	0	50
STV	100	0	0	0
Contractor	.	.	.	.

Continued on next page . . .

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	99	0	0	0
LIP	100	0	0	0
STV	100	0	0	0
Contractor	100	0	0	0
ELLWOOD CITY HOSPITAL (11779)				
Employee	70	26	2	3
LIP	27	3	0	71
STV	50	17	1	32
Contractor	.	.	.	.
ENDLESS MOUNTAINS HEALTH SYSTEMS (11817)				
Employee	71	2	1	26
LIP	53	0	0	47
STV	0	0	0	100
Contractor	.	.	.	.
EPHRATA COMMUNITY HOSPITAL (11764)				
Employee	98	0	2	0
LIP	100	0	0	0
STV	100	0	0	0
Contractor	100	0	0	0
EVANGELICAL COMMUNITY HOSPITAL (11701)				
Employee	94	5	0	0
LIP	92	4	0	4
STV	93	7	0	0
Contractor	.	.	.	.
EXCELA HEALTH FRICK HOSPITAL (11639)				
Employee	95	4	0	1
LIP	90	10	0	0
STV	92	8	0	0
Contractor	100	0	0	0
EXCELA HEALTH LATROBE HOSPITAL (11651)				
Employee	97	3	0	0
LIP	92	8	0	0
STV	91	3	1	5
Contractor	100	0	0	0
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)				
Employee	91	5	1	3
LIP	92	7	1	0
STV	87	1	0	12
Contractor	100	0	0	0
FAIRMOUNT BEHAVIORAL HEALTH SYSTEM (12565)				
Employee	76	11	1	12
LIP	.	.	.	.
STV	.	.	.	.
Contractor	.	.	.	.
FIRST HOSPITAL OF WYOMING VALLEY (12050)				
Employee	47	26	5	23
LIP	33	0	0	67
STV	.	.	.	.
Contractor	.	.	.	.
FORBES REGIONAL HOSPITAL (11265)				
Employee	56	17	1	26
LIP	27	0	0	73
STV	47	33	0	20
Contractor	.	.	.	.

Continued on next page . . .

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	63	28	4	5
LIP	100	0	0	0
STV	100	0	0	0
Contractor	.	.	.	.
FRIENDS HOSPITAL (12488)				
Employee	46	11	1	41
LIP	14	5	0	81
STV	63	0	0	37
Contractor	67	0	0	33
FULTON COUNTY MEDICAL CENTER (11939)				
Employee	47	24	2	27
LIP	25	0	0	75
STV	30	0	0	70
Contractor	.	.	.	.
GEISINGER HEALTHSOUTH REHABILITATION HOSPITAL (11993)				
Employee	81	13	2	4
LIP	100	0	0	0
STV	78	2	2	17
Contractor	39	6	0	56
GEISINGER MEDICAL CENTER (11775)				
Employee	96	4	0	0
LIP	33	0	0	67
STV	97	3	0	0
Contractor	.	.	.	.
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)				
Employee	95	5	1	0
LIP	1	0	0	99
STV	81	19	0	0
Contractor	.	.	.	.
GEISINGER-BLOOMSBURG HOSPITAL (12008)				
Employee	92	8	0	0
LIP	0	0	0	100
STV	32	10	0	57
Contractor	.	.	.	.
GEISINGER-COMMUNITY MEDICAL CENTER (11914)				
Employee	94	6	1	0
LIP	8	0	0	92
STV	81	17	2	0
Contractor	.	.	.	.
GETTYSBURG HOSPITAL (11531)				
Employee	95	0	1	4
LIP	100	0	0	0
STV	85	0	15	0
Contractor	100	0	0	0
GNADEN HUETTEN MEMORIAL HOSPITAL (12241)				
Employee	84	4	0	11
LIP	49	0	0	51
STV	90	0	1	9
Contractor	67	0	0	33
GOOD SHEPHERD PENN PARTNERS (13929)				
Employee	90	1	1	9
LIP	.	.	.	.
STV	23	0	0	77
Contractor	87	1	1	10

Continued on next page . . .

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	97	0	1	3
LIP	96	0	0	4
STV	100	0	0	0
Contractor	.	.	.	.
GRAND VIEW HOSPITAL (11847)				
Employee	99	1	0	0
LIP	99	0	1	0
STV	100	0	0	0
Contractor	100	0	0	0
GROVE CITY MEDICAL CENTER (11722)				
Employee	78	22	0	0
LIP	91	9	0	0
STV	89	10	1	0
Contractor	.	.	.	.
HAHNEMANN UNIVERSITY HOSPITAL (11437)				
Employee	95	0	0	5
LIP	61	0	0	39
STV	100	0	0	0
Contractor	94	0	0	6
HANOVER HOSPITAL (11899)				
Employee	98	0	1	0
LIP	97	0	3	0
STV	99	0	1	0
Contractor	98	0	0	2
HAVEN BEHAVIORAL HOSPITAL OF EASTERN PENNSYLVANIA (14471)				
Employee	96	0	4	0
LIP	.	.	.	.
STV	.	.	.	.
Contractor	.	.	.	.
HAZLETON GENERAL HOSPITAL (11878)				
Employee	67	30	1	2
LIP	5	0	0	95
STV	28	0	0	72
Contractor	100	0	0	0
HEALTHSOUTH HARMARVILLE REHABILITATION HOSPITAL (11727)				
Employee	74	26	0	0
LIP	12	0	0	88
STV	70	0	0	30
Contractor	12	0	0	88
HEALTHSOUTH NITTANY VALLEY REHABILITATION HOSPITAL (11667)				
Employee	66	17	3	15
LIP	64	0	0	36
STV	75	5	0	20
Contractor	.	.	.	.
HEALTHSOUTH READING REHABILITATION HOSPITAL (12139)				
Employee	83	8	0	9
LIP	73	9	0	18
STV	25	0	0	75
Contractor	.	.	.	.
HEALTHSOUTH REHABILITATION HOSPITAL OF ALTOONA (11903)				
Employee	41	46	1	12
LIP	48	19	1	32
STV	40	60	0	0
Contractor	45	55	0	0

Continued on next page . . .

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	64	19	4	12
LIP	63	2	0	35
STV	91	7	1	2
Contractor	74	17	3	6
HEALTHSOUTH REHABILITATION HOSPITAL OF MECHANICSBURG (12402)				
Employee	80	20	1	0
LIP	83	15	2	0
STV	79	21	0	0
Contractor	57	0	0	43
HEALTHSOUTH REHABILITATION HOSPITAL OF SEWICKLEY (12066)				
Employee	31	12	0	57
LIP	19	3	0	78
STV	100	0	0	0
Contractor	.	.	.	.
HEALTHSOUTH REHABILITATION HOSPITAL OF YORK (12058)				
Employee	75	21	1	3
LIP	45	3	0	52
STV	87	3	0	9
Contractor	.	.	.	.
HEART OF LANCASTER REGIONAL MEDICAL CENTER (12571)				
Employee	99	0	0	0
LIP	73	0	0	27
STV	100	0	0	0
Contractor	88	2	0	10
HERITAGE VALLEY BEAVER (11831)				
Employee	60	22	0	18
LIP	10	0	0	90
STV	36	10	0	54
Contractor	.	.	.	.
HERITAGE VALLEY SEWICKLEY (10375)				
Employee	60	26	1	13
LIP	9	0	0	91
STV	59	14	0	27
Contractor	.	.	.	.
HIGHLANDS HOSPITAL (11902)				
Employee	92	6	0	3
LIP	24	0	0	76
STV	66	0	0	34
Contractor	.	.	.	.
HOLY REDEEMER HOSPITAL AND MEDICAL CENTER (11973)				
Employee	99	0	1	0
LIP	99	1	0	0
STV	100	0	0	0
Contractor	98	0	2	0
HOLY SPIRIT HOSPITAL (12387)				
Employee	78	1	0	22
LIP	30	0	0	70
STV	91	0	0	9
Contractor	.	.	.	.
HORSHAM CLINIC (12543)				
Employee	71	15	10	5
LIP	.	.	.	.
STV	.	.	.	.
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 %
HOSPITAL OF FOX CHASE CANCER CENTER (12134)				
Employee	91	1	0	8
LIP	100	0	0	0
STV	100	0	0	0
Contractor	100	0	0	0
HOSPITAL OF THE UNIV OF PENNSYLVANIA (10219)				
Employee	97	0	1	1
LIP	78	0	0	21
STV	98	0	0	2
Contractor	99	0	0	1
INDIANA REGIONAL MEDICAL CENTER (11759)				
Employee	91	6	0	2
LIP	45	0	0	55
STV	98	2	0	0
Contractor	93	0	0	7
J C BLAIR MEMORIAL HOSP (11724)				
Employee	85	10	0	4
LIP	72	3	0	25
STV	77	14	0	9
Contractor	.	.	.	.
JAMESON MEMORIAL HOSPITAL (11954)				
Employee	61	12	0	26
LIP	9	0	0	91
STV	47	0	0	53
Contractor	.	.	.	.
JEANES HOSPITAL (11459)				
Employee	97	1	2	0
LIP	83	0	1	15
STV	99	0	1	0
Contractor	100	0	0	0
JEFFERSON REGIONAL MEDICAL CENTER (10237)				
Employee	51	30	0	19
LIP	46	8	0	46
STV	64	9	0	28
Contractor	0	0	0	100
JENNERSVILLE REGIONAL HOSPITAL (12337)				
Employee	73	13	4	9
LIP	39	0	0	61
STV	61	1	14	24
Contractor	50	0	0	50
JERSEY SHORE HOSPITAL (11689)				
Employee	96	3	0	2
LIP	85	0	0	15
STV	100	0	0	0
Contractor	71	14	0	14
JOHN HEINZ INSTITUTE OF REHABILITATION (11861)				
Employee	84	6	5	5
LIP	78	0	0	22
STV	100	0	0	0
Contractor	100	0	0	0
KANE COMMUNITY HOSPITAL (12111)				
Employee	81	14	2	2
LIP	85	0	0	15
STV	96	0	0	4
Contractor	20	0	0	80

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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	83	16	1	0
LIP	83	17	0	0
STV	0	0	0	100
Contractor	100	0	0	0
KIDSPEACE ORCHARD HILLS CAMPUS (12430)				
Employee	45	55	0	0
LIP	43	57	0	0
STV	.	.	.	.
Contractor	.	.	.	.
KINDRED HOSPITAL — PHILADELPHIA (11832)				
Employee	45	18	0	38
LIP	4	0	0	96
STV	.	.	.	.
Contractor	75	25	0	0
KINDRED HOSPITAL — PITTSBURGH (12358)				
Employee	46	49	0	5
LIP	18	16	0	67
STV	.	.	.	.
Contractor	52	48	0	0
KINDRED HOSPITAL — WYOMING VALLEY (12485)				
Employee	86	13	1	0
LIP	65	2	0	33
STV	94	6	0	0
Contractor	94	6	0	0
KINDRED HOSPITAL AT HERITAGE VALLEY (12268)				
Employee	53	37	5	4
LIP	0	0	0	100
STV	50	0	0	50
Contractor	19	8	0	72
KINDRED HOSPITAL EASTON (12007)				
Employee	82	18	0	0
LIP	100	0	0	0
STV	.	.	.	.
Contractor	.	.	.	.
KINDRED HOSPITAL PHILADELPHIA — HAVERTOWN (12908)				
Employee	90	8	3	0
LIP	5	0	0	95
STV	.	.	.	.
Contractor	80	20	0	0
KINDRED HOSPITAL PITTSBURGH — NORTH SHORE (12296)				
Employee	70	23	3	4
LIP	50	0	0	50
STV	.	.	.	.
Contractor	.	.	.	.
KINDRED HOSPITAL SOUTH PHILADELPHIA (11940)				
Employee	49	2	0	49
LIP	69	0	0	31
STV	.	.	.	.
Contractor	100	0	0	0
KIRKBRIDE CENTER (12624)				
Employee	52	42	1	5
LIP	.	.	.	.
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 %
LANCASTER GENERAL HOSPITAL (10183)				
Employee	99	1	0	0
LIP	99	0	0	1
STV	100	0	0	0
Contractor	99	0	1	0
LANCASTER REGIONAL MEDICAL CENTER (12335)				
Employee	94	0	0	6
LIP	66	0	0	34
STV	70	0	1	29
Contractor	85	1	0	14
LANCASTER REHABILITATION HOSPITAL (12628)				
Employee	100	0	0	0
LIP	100	0	0	0
STV	97	1	0	2
Contractor	100	0	0	0
LANSDALE HOSPITAL (12032)				
Employee	100	0	0	0
LIP	99	1	0	0
STV	100	0	0	0
Contractor	.	.	.	.
LEHIGH VALLEY HOSPITAL — MUHLENBERG (11898)				
Employee	100	0	0	0
LIP	99	0	1	0
STV	98	2	0	0
Contractor	.	.	.	.
LEHIGH VALLEY HOSPITAL (11884)				
Employee	98	1	0	0
LIP	99	0	1	0
STV	98	2	0	0
Contractor	.	.	.	.
LEWISTOWN HOSPITAL (11825)				
Employee	95	4	1	0
LIP	50	4	0	45
STV	99	0	0	1
Contractor	.	.	.	.
LIFECARE HOSPITALS OF CHESTER COUNTY (12005)				
Employee	99	0	1	0
LIP	63	0	2	34
STV	.	.	.	.
Contractor	100	0	0	0
LIFECARE HOSPITALS OF MECHANICSBURG (12388)				
Employee	89	8	2	2
LIP	82	12	4	2
STV	100	0	0	0
Contractor	100	0	0	0
LIFECARE HOSPITALS OF PITTSBURGH — ALLE-KISKI CAMPUS (18955)				
Employee	93	6	0	1
LIP	.	.	.	.
STV	.	.	.	.
Contractor	.	.	.	.
LIFECARE HOSPITALS OF PITTSBURGH — MONROEVILLE (12254)				
Employee	69	2	2	27
LIP	22	0	0	78
STV	93	0	0	7
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	75	9	0	15
LIP	3	6	0	91
STV	100	0	0	0
Contractor	.	.	.	.
LIFECARE HOSPITALS OF PITTSBURGH (11945)				
Employee	62	4	1	33
LIP	23	0	0	77
STV	100	0	0	0
Contractor	90	0	10	0
LOCK HAVEN HOSPITAL (12097)				
Employee	99	1	0	0
LIP	100	0	0	0
STV	100	0	0	0
Contractor	100	0	0	0
LOWER BUCKS HOSPITAL (12390)				
Employee	99	0	0	0
LIP	98	0	0	2
STV	90	0	0	10
Contractor	97	0	0	3
MAGEE REHAB HOSPITAL (12146)				
Employee	99	0	1	0
LIP	95	0	5	0
STV	.	.	.	.
Contractor	.	.	.	.
MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)				
Employee	85	13	0	2
LIP	56	0	0	44
STV	41	0	0	59
Contractor	.	.	.	.
MAIN LINE HOSPITAL — PAOLI (11750)				
Employee	99	0	1	0
LIP	98	0	2	0
STV	100	0	0	0
Contractor	.	.	.	.
MAIN LINE HOSPITAL BRYN MAWR (11753)				
Employee	99	0	1	0
LIP	96	0	4	0
STV	100	0	0	0
Contractor	.	.	.	.
MAIN LINE HOSPITAL BRYN MAWR REHABILITATION (11417)				
Employee	99	0	1	0
LIP	100	0	0	0
STV	100	0	0	0
Contractor	.	.	.	.
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)				
Employee	99	0	1	0
LIP	97	0	3	0
STV	100	0	0	0
Contractor	.	.	.	.
MEADVILLE MEDICAL CENTER (11583)				
Employee	72	24	3	2
LIP	84	15	0	1
STV	71	18	1	10
Contractor	71	29	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 (11633)				
Employee	92	3	0	5
LIP	100	0	0	0
STV	92	0	0	7
Contractor	83	0	0	17
MEMORIAL HOSPITAL, INC. TOWANDA (12549)				
Employee	82	14	3	1
LIP	44	0	0	56
STV	100	0	0	0
Contractor	94	3	3	0
MERCY FITZGERALD HOSPITAL (11683)				
Employee	96	0	1	3
LIP	70	0	0	30
STV	100	0	0	0
Contractor	100	0	0	0
MERCY PHILADELPHIA HOSPITAL (11946)				
Employee	94	0	1	4
LIP	77	0	0	23
STV	100	0	0	0
Contractor	.	.	.	.
MERCY SUBURBAN HOSPITAL NORRISTOWN (11952)				
Employee	94	0	2	4
LIP	67	1	1	31
STV	98	1	1	0
Contractor	100	0	0	0
MEYERSDALE COMMUNITY HOSPITAL (11968)				
Employee	63	37	0	0
LIP	50	0	0	50
STV	56	0	0	44
Contractor	50	0	0	50
MID-VALLEY HOSPITAL (11557)				
Employee	49	48	3	0
LIP	100	0	0	0
STV	33	0	0	67
Contractor	.	.	.	.
MILLCREEK COMMUNITY HOSPITAL (12253)				
Employee	63	36	0	1
LIP	85	15	0	0
STV	100	0	0	0
Contractor	80	20	0	0
MILTON S HERSHEY MEDICAL CENTER (11747)				
Employee	87	5	1	7
LIP	100	0	0	0
STV	96	0	0	4
Contractor	100	0	0	0
MINERS MEDICAL CENTER (12295)				
Employee	66	34	1	0
LIP	10	90	0	0
STV	92	0	0	8
Contractor	20	36	0	44
MONONGAHELA VALLEY HOSPITAL (11069)				
Employee	70	27	3	0
LIP	50	8	1	41
STV	63	7	1	29
Contractor	62	26	0	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 %
MONTGOMERY COUNTY MH/MR EMERGENCY SERVICES, INC. (12287)				
Employee	68	4	0	29
LIP	.	.	.	.
STV	.	.	.	.
Contractor	.	.	.	.
MOSES TAYLOR HOSPITAL (11528)				
Employee	65	31	0	4
LIP	25	4	0	71
STV	49	0	0	51
Contractor	46	50	1	3
MOUNT NITTANY MEDICAL CENTER (11797)				
Employee	88	10	2	1
LIP	91	3	2	5
STV	92	0	0	7
Contractor	.	.	.	.
MUNCY VALLEY HOSPITAL (11748)				
Employee	90	0	1	10
LIP	75	0	0	25
STV	85	0	0	15
Contractor	98	0	0	2
NASON HOSPITAL (11907)				
Employee	94	5	1	1
LIP	82	5	3	10
STV	100	0	0	0
Contractor	100	0	0	0
NAZARETH HOSPITAL (11919)				
Employee	97	0	1	1
LIP	30	1	0	69
STV	100	0	0	0
Contractor	.	.	.	.
NORRISTOWN STATE HOSPITAL (12047)				
Employee	55	4	1	40
LIP	.	.	.	.
STV	3	0	0	97
Contractor	.	.	.	.
OHIO VALLEY GENERAL HOSPITAL (12298)				
Employee	70	25	1	5
LIP	12	0	0	88
STV	86	0	0	14
Contractor	72	8	0	20
OSS ORTHOPAEDIC HOSPITAL (18467)				
Employee	63	27	0	9
LIP	84	9	0	7
STV	62	12	0	25
Contractor	.	.	.	.
PALMERTON HOSPITAL (12396)				
Employee	88	4	0	7
LIP	49	0	0	51
STV	85	1	0	14
Contractor	67	0	0	33
PENN PRESBYTERIAN MEDICAL CENTER (11814)				
Employee	98	0	2	0
LIP	76	0	0	23
STV	74	0	0	26
Contractor	80	7	0	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 %
PENN STATE HERSHEY REHABILITATION LLC (11915)				
Employee	76	8	0	16
LIP	100	0	0	0
STV	100	0	0	0
Contractor	.	.	.	.
PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS (11448)				
Employee	98	2	0	0
LIP	49	0	0	51
STV	100	0	0	0
Contractor	.	.	.	.
PENNSYLVANIA PSYCHIATRIC INSTITUTE (14190)				
Employee	67	26	1	6
LIP	81	6	0	12
STV	93	6	0	1
Contractor	83	17	0	0
PHILHAVEN HOSPITAL (11740)				
Employee	66	30	3	2
LIP	20	20	0	60
STV	50	16	0	34
Contractor	70	0	0	30
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)				
Employee	75	18	1	6
LIP	75	5	3	16
STV	65	5	0	30
Contractor	49	1	0	50
PHYSICIANS CARE SURGICAL HOSPITAL (19630)				
Employee	66	16	0	18
LIP	18	0	0	82
STV	.	.	.	.
Contractor	25	0	0	75
PINNACLE HEALTH SYSTEM COMMUNITY GENERAL OSTEOPATHIC HOSPITAL (34069)				
Employee	81	4	0	15
LIP	72	2	0	26
STV	60	1	1	38
Contractor	.	.	.	.
PINNACLE HEALTH SYSTEM HARRISBURG HOSPITAL (34068)				
Employee	83	3	0	14
LIP	72	2	0	26
STV	60	1	1	38
Contractor	.	.	.	.
POCONO MEDICAL CENTER (11772)				
Employee	88	3	0	9
LIP	93	0	0	7
STV	95	1	0	4
Contractor	84	0	0	16
POTTSTOWN MEMORIAL MEDICAL CENTER (11983)				
Employee	68	24	1	7
LIP	15	1	0	85
STV	33	0	0	67
Contractor	49	5	1	46
PUNXSUTAWNEY AREA HOSPITAL (11830)				
Employee	92	5	2	0
LIP	83	10	4	4
STV	94	3	2	0
Contractor	77	9	3	11

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

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
READING HOSPITAL AND MEDICAL CENTER (12375)				
Employee	73	19	1	8
LIP	86	10	0	4
STV	58	8	0	34
Contractor	.	.	.	.
REGIONAL HOSPITAL OF SCRANTON (12533)				
Employee	70	18	7	4
LIP	11	0	0	89
STV	38	0	0	62
Contractor	33	0	0	67
RIDDLE MEMORIAL HOSPITAL (11731)				
Employee	99	0	1	0
LIP	99	0	1	0
STV	100	0	0	0
Contractor	.	.	.	.
ROBERT PACKER HOSPITAL (12422)				
Employee	98	1	2	0
LIP	97	2	1	0
STV	96	0	0	3
Contractor	97	3	0	0
ROXBOROUGH MEMORIAL HOSPITAL (11978)				
Employee	98	0	2	0
LIP	99	0	1	0
STV	100	0	0	0
Contractor	100	0	0	0
ROXBURY TREATMENT CENTER (12723)				
Employee	63	34	1	1
LIP	100	0	0	0
STV	.	.	.	.
Contractor	.	.	.	.
SACRED HEART HOSPITAL (11684)				
Employee	99	0	1	0
LIP	100	0	0	0
STV	100	0	0	0
Contractor	100	0	0	0
SCHUYLKILL MEDICAL CENTER — EAST NORWEGIAN STREET (11922)				
Employee	74	24	0	2
LIP	47	10	0	44
STV	83	17	0	0
Contractor	88	12	0	0
SCHUYLKILL MEDICAL CENTER — SOUTH JACKSON STREET (12087)				
Employee	71	24	1	4
LIP	47	10	0	44
STV	83	17	0	0
Contractor	88	12	0	0
SELECT SPECIALITY HOSPITAL — CENTRAL PENNSYLVANIA (YORK) (12334)				
Employee	92	8	0	0
LIP	65	1	1	33
STV	.	.	.	.
Contractor	100	0	0	0
SELECT SPECIALITY HOSPITAL — ERIE (11880)				
Employee	95	2	3	0
LIP	85	5	0	10
STV	100	0	0	0
Contractor	89	11	0	0

Continued on next page . . .

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

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
SELECT SPECIALITY HOSPITAL — JOHNSTOWN (12299)				
Employee	79	5	0	16
LIP	48	11	0	41
STV	100	0	0	0
Contractor	0	0	0	100
SELECT SPECIALTY HOSPITAL — CENTRAL PA (13921)				
Employee	89	6	0	6
LIP	65	1	1	33
STV	.	.	.	.
Contractor	.	.	.	.
SELECT SPECIALTY HOSPITAL — CENTRAL PENNSYLVANIA (CAMP HILL) (12147)				
Employee	85	7	1	8
LIP	65	1	1	33
STV	.	.	.	.
Contractor	.	.	.	.
SELECT SPECIALTY HOSPITAL — DANVILLE (12123)				
Employee	56	2	0	42
LIP	0	0	0	100
STV	.	.	.	.
Contractor	.	.	.	.
SELECT SPECIALTY HOSPITAL — MCKEESPORT, INC. (12271)				
Employee	81	16	3	0
LIP	.	.	.	.
STV	.	.	.	.
Contractor	100	0	0	0
SELECT SPECIALTY HOSPITAL — PITTSBURGH/UPMC (12009)				
Employee	96	4	0	0
LIP	11	0	0	89
STV	.	.	.	.
Contractor	.	.	.	.
SELECT SPECIALTY HOSPITAL LAUREL HIGHLANDS, INC. (12108)				
Employee	75	16	4	4
LIP	66	0	0	34
STV	100	0	0	0
Contractor	47	47	7	0
SHARON REGIONAL HEALTH SYSTEM (12250)				
Employee	54	26	4	16
LIP	70	0	0	30
STV	47	0	0	53
Contractor	65	0	0	35
SHRINERS HOSPITAL FOR CHILDREN — PHILADELPHIA (12244)				
Employee	77	15	0	8
LIP	100	0	0	0
STV	100	0	0	0
Contractor	100	0	0	0
SOLDIERS & SAILORS MEM HOSPITAL (11688)				
Employee	94	5	1	0
LIP	100	0	0	0
STV	99	1	0	0
Contractor	71	29	0	0
SOMERSET HOSPITAL (12282)				
Employee	97	0	2	0
LIP	57	2	1	39
STV	88	0	0	12
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 %
SOUTHWEST REGIONAL MEDICAL CENTER (11942)				
Employee	62	15	0	22
LIP	40	0	0	60
STV	19	0	0	81
Contractor	.	.	.	.
SOUTHWOOD PSYCHIATRIC HOSPITAL (12453)				
Employee	64	29	3	5
LIP	.	.	.	.
STV	.	.	.	.
Contractor	.	.	.	.
SPECIAL CARE HOSPITAL (12604)				
Employee	53	39	2	6
LIP	2	0	0	98
STV	100	0	0	0
Contractor	.	.	.	.
ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)				
Employee	99	0	0	0
LIP	100	0	0	0
STV	100	0	0	0
Contractor	98	0	0	2
ST. CLAIR MEMORIAL HOSPITAL (10561)				
Employee	80	19	1	0
LIP	93	7	0	0
STV	81	8	8	4
Contractor	90	10	0	0
ST. JOHN VIANNEY HOSPITAL (12548)				
Employee	99	1	0	0
LIP	100	0	0	0
STV	100	0	0	0
Contractor	100	0	0	0
ST. JOSEPH MEDICAL CENTER (11961)				
Employee	99	0	1	0
LIP	96	4	0	0
STV	100	0	0	0
Contractor	.	.	.	.
ST. JOSEPHS HOSPITAL (12438)				
Employee	77	21	2	0
LIP	61	0	1	38
STV	100	0	0	0
Contractor	.	.	.	.
ST. LUKES HOSPITAL ANDERSON CAMPUS (21487)				
Employee	78	19	3	0
LIP	48	1	2	49
STV	95	5	0	0
Contractor	.	.	.	.
ST. LUKES HOSPITAL BETHLEHEM (11718)				
Employee	80	12	2	6
LIP	35	1	1	64
STV	73	5	0	22
Contractor	.	.	.	.
ST. LUKES MINERS MEMORIAL HOSPITAL (11784)				
Employee	81	15	1	2
LIP	52	1	2	45
STV	89	11	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 %
ST. LUKES QUAKERTOWN HOSPITAL (11711)				
Employee	79	19	2	0
LIP	91	1	3	5
STV	66	34	0	0
Contractor	50	50	0	0
ST. MARY MEDICAL CENTER (11885)				
Employee	99	0	1	0
LIP	100	0	0	0
STV	98	1	1	0
Contractor	.	.	.	.
ST. MARY MEDICAL CENTER REHAB (12483)				
Employee	98	0	2	0
LIP	100	0	0	0
STV	98	1	1	0
Contractor	.	.	.	.
ST. VINCENT HEALTH CENTER (11699)				
Employee	99	0	0	0
LIP	100	0	0	0
STV	100	0	0	0
Contractor	100	0	0	0
SUNBURY COMMUNITY HOSPITAL (12105)				
Employee	81	8	1	10
LIP	7	0	0	93
STV	61	0	0	39
Contractor	37	0	0	63
SURGICAL INSTITUTE OF READING (12535)				
Employee	98	0	0	2
LIP	30	0	0	70
STV	.	.	.	.
Contractor	14	0	0	86
SURGICAL SPECIALTY CENTER AT COORDINATED HEALTH, THE (15259)				
Employee	94	0	0	6
LIP	100	0	0	0
STV	.	.	.	.
Contractor	100	0	0	0
TEMPLE UNIVERSITY HOSPITAL (12382)				
Employee	94	5	1	0
LIP	97	1	1	1
STV	89	0	2	9
Contractor	94	5	0	1
THE GOOD SAMARITAN HOSPITAL (11712)				
Employee	82	15	1	2
LIP	10	0	0	90
STV	33	0	0	67
Contractor	20	4	0	76
THE GOOD SHEPHERD REHABILITATION HOSPITAL (11896)				
Employee	97	0	2	2
LIP	86	0	0	14
STV	100	0	0	0
Contractor	.	.	.	.
THE MEADOWS PSYCHIATRIC CENTER (12156)				
Employee	36	49	3	12
LIP	.	.	.	.
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 %
THE WASHINGTON HOSPITAL (11460)				
Employee	77	15	1	7
LIP	58	4	1	36
STV	62	6	0	32
Contractor	53	0	0	47
THE WESTERN PENNSYLVANIA HOSPITAL (11864)				
Employee	52	14	0	34
LIP	11	0	0	89
STV	37	4	0	60
Contractor	54	3	0	44
THOMAS JEFFERSON UNIV HOSP - METHODIST (12017)				
Employee	98	0	1	0
LIP	98	0	1	1
STV	96	0	2	2
Contractor	100	0	0	0
THOMAS JEFFERSON UNIV HOSPITAL (11506)				
Employee	98	0	1	1
LIP	97	0	2	1
STV	92	0	0	8
Contractor	88	0	0	12
TITUSVILLE AREA HOSPITAL (11738)				
Employee	88	11	1	0
LIP	100	0	0	0
STV	95	4	2	0
Contractor	67	31	2	0
TORRANCE STATE HOSPITAL (12091)				
Employee	39	21	1	39
LIP	58	8	0	33
STV	72	26	2	0
Contractor	45	38	3	14
TROY COMMUNITY HOSPITAL (12018)				
Employee	99	0	1	0
LIP	.	.	.	.
STV	92	0	0	8
Contractor	.	.	.	.
TYLER MEMORIAL HOSPITAL (11829)				
Employee	72	22	4	1
LIP	65	2	0	32
STV	45	4	4	48
Contractor	59	0	0	41
TYRONE HOSPITAL (12717)				
Employee	95	4	0	0
LIP	96	4	0	0
STV	100	0	0	0
Contractor	75	25	0	0
UNIONTOWN HOSPITAL (10441)				
Employee	69	28	1	3
LIP	40	0	0	60
STV	95	0	1	5
Contractor	100	0	0	0
UPMC BEDFORD (11680)				
Employee	85	15	0	0
LIP	75	7	2	16
STV	75	0	0	25
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 EAST (28812)				
Employee	91	9	0	0
LIP	64	0	0	35
STV	4	0	0	96
Contractor	.	.	.	.
UPMC HAMOT (11725)				
Employee	84	16	0	0
LIP	35	0	0	65
STV	81	0	0	19
Contractor	.	.	.	.
UPMC HORIZON (11675)				
Employee	76	22	1	1
LIP	43	2	0	56
STV	80	1	0	18
Contractor	.	.	.	.
UPMC MCKEESPORT (11707)				
Employee	85	14	1	0
LIP	56	0	0	44
STV	100	0	0	0
Contractor	100	0	0	0
UPMC MERCY (10384)				
Employee	86	14	0	0
LIP	47	0	0	53
STV	49	1	0	50
Contractor	.	.	.	.
UPMC NORTHWEST (11837)				
Employee	88	3	1	8
LIP	55	0	5	40
STV	100	0	0	0
Contractor	100	0	0	0
UPMC PASSAVANT (11242)				
Employee	77	20	0	3
LIP	49	1	0	49
STV	94	4	2	0
Contractor	.	.	.	.
UPMC PRESBYTERIAN SHADYSIDE — PRESBYTERIAN (10348)				
Employee	84	15	0	0
LIP	58	42	0	0
STV	61	13	2	24
Contractor	.	.	.	.
UPMC PRESBYTERIAN SHADYSIDE — SHADYSIDE (10118)				
Employee	79	19	0	2
LIP	61	4	0	35
STV	64	36	0	0
Contractor	.	.	.	.
UPMC PRESBYTERIAN SHADYSIDE — WPIC (13702)				
Employee	70	25	0	5
LIP	0	0	0	100
STV	21	59	0	20
Contractor	.	.	.	.
UPMC ST MARGARET (11561)				
Employee	80	17	0	3
LIP	52	0	0	48
STV	69	0	0	31
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 %
VALLEY FORGE MEDICAL CENTER AND HOSPITAL (12029)				
Employee	74	6	1	18
LIP	.	.	.	.
STV	100	0	0	0
Contractor	100	0	0	0
WARREN GENERAL HOSPITAL (12216)				
Employee	90	7	2	1
LIP	95	2	2	0
STV	91	7	1	1
Contractor	.	.	.	.
WARREN STATE HOSPITAL (12081)				
Employee	62	28	3	6
LIP	40	0	0	60
STV	100	0	0	0
Contractor	23	0	0	77
WAYNE MEMORIAL HOSPITAL (12004)				
Employee	88	3	0	8
LIP	15	0	0	85
STV	100	0	0	0
Contractor	100	0	0	0
WAYNESBORO HOSPITAL (11642)				
Employee	58	29	3	9
LIP	65	13	0	22
STV	43	0	0	57
Contractor	.	.	.	.
WELLSPAN SURGERY AND REHABILITATION HOSPITAL (27430)				
Employee	94	0	0	5
LIP	100	0	0	0
STV	92	0	8	0
Contractor	100	0	0	0
WERNERSVILLE STATE HOSPITAL (12368)				
Employee	65	16	2	17
LIP	100	0	0	0
STV	67	33	0	0
Contractor	78	22	0	0
WILKES-BARRE GENERAL HOSPITAL (11916)				
Employee	66	28	4	1
LIP	56	8	0	36
STV	70	12	0	17
Contractor	.	.	.	.
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)				
Employee	93	0	0	6
LIP	40	0	0	60
STV	83	0	0	17
Contractor	99	0	0	1
WINDBER HOSPITAL (12031)				
Employee	67	26	1	6
LIP	5	0	0	95
STV	46	0	2	52
Contractor	.	.	.	.
YORK HOSPITAL (10108)				
Employee	95	0	0	4
LIP	99	0	1	0
STV	95	0	5	0
Contractor	100	0	0	0

5. Conclusion

The 2013 report is the sixth report published by PADOH since reporting was mandated by the 2007 amendment to the MCARE Act. This report, like previous reports, demonstrates the significant progress and enduring committment made by hospitals in Pennsylvania to reduce HAIs. Hospitals have demonstrated particular success in driving down CLABSI rates (28 percent decrease since 2009) and improving influenza vaccination rates among health care personnel (134 percent increase since 2011–2012 influenza season). Prevention of other benchmarked infections are less impressive but their rates are also complicated by recent case definition changes.

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 over the last four years in Pennsylvania have saved a minimum of $114 million in direct health care costs that would have been associated with those HAIs.

The CAUTI rate in Pennsylvania has increased over the last two years. However, the CAUTI rate is still 3.6 percent lower than the baseline 2009 Pennsylvania rate and is 4 percent better than the 2013 national rate. Furthermore, Pennsylvania hospitals have decreased the number of days patients are at risk of developing a CAUTI for the fourth year in row; the device utilization ratio has decreased 13 percent since 2009. Decreasing the number of days at risk is an important accomplishment.

Pennsylvania hosiptals have achieved a 28 percent decrease in the rate of CLABSIs and achieved a year-after-year decrease in the total number of catheter days, thereby decreasing the total number of days patients are at risk to develop a CLABSI. While, Pennsylvania facilities have sustained these improvements, progress has plateaued recently. Nonetheless, CLABSI rates in Pennsylvania are 9 percent lower than national rates in 2013 and 51 percent better than the 2009 national baseline.

The number of reported SSIs decreased dramatically for five of the six previously benchmarked procedures. Much of this decrease is likely attributable to NHSN's transition to a 3 month, instead of 12 month, follow-up period. Nonetheless, the SSI rate for five of the benchmarked procedures has steadily decreased 5–33 percent since 2009 baseline data. Relatively few cardiac bypass graft surgeries with one incision are performed each year and consequently the rate of infections has varied significantly from year-to-year for this particular benchmarked procedure. Future reports will provide additional data to trend the rate of colon SSIs.

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, health care providers and health care 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 251 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 health care; 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 2013 report dealing with health care personnel influenza vaccination provides an alternative metric in measuring hospital commitment to patient safety and HAI prevention. The median HCP influenza vaccination rate was 85 percent and 103 facilities achieved the 2020 Healthy People goal of 90 percent HCP vaccination during the 2013–2014 influenza season. This is a dramatic 134 percent improvement from baseline data. The number of facilities at goal for employees, licensed independent practioners and students, trainees and volunteers increased from

6 to 48 since the 2011–2012 influenza season. This is a 700 percent improvement. There is widespread agreement in the health care community that health care 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 health care 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 on the CMS Hospital Compare Website (`https://data.medicare.gov/data/hospital-compare`) for those facilities that receive reimbursement for services through the Inpatient Prospective Payment System.

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 health care 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.

6. References

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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 (2013): 656

Number of reported Healthcare-Associated Infections:

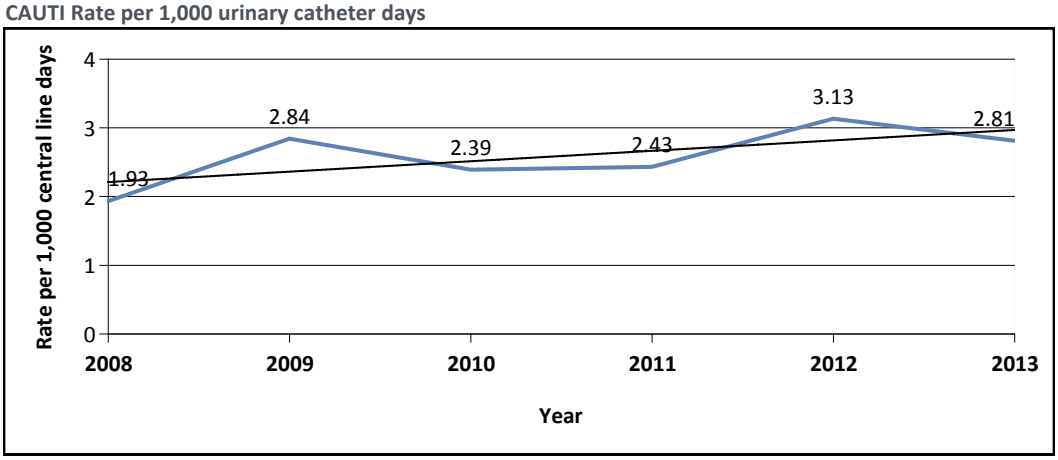
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	86,802	36	1	31	3	45	1	54	6	59	0	2.72
2009	190,508	76	1	66	6	110	7	99	4	133	4	2.66
2010	162,085	65	1	59	3	82	8	113	8	123	8	2.90
2011	151,539	59	1	40	4	51	0	100	5	119	2	2.51
2012	141,039	56	3	46	12	27	1	104	10	137	4	2.84
2013	134,586	45	1	51	3	35	2	115	8	124	3	2.88

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
2013	59	43.74	1.35	1.03 - 1.74	Worse

CAUTI Rate per 1,000 urinary catheter days



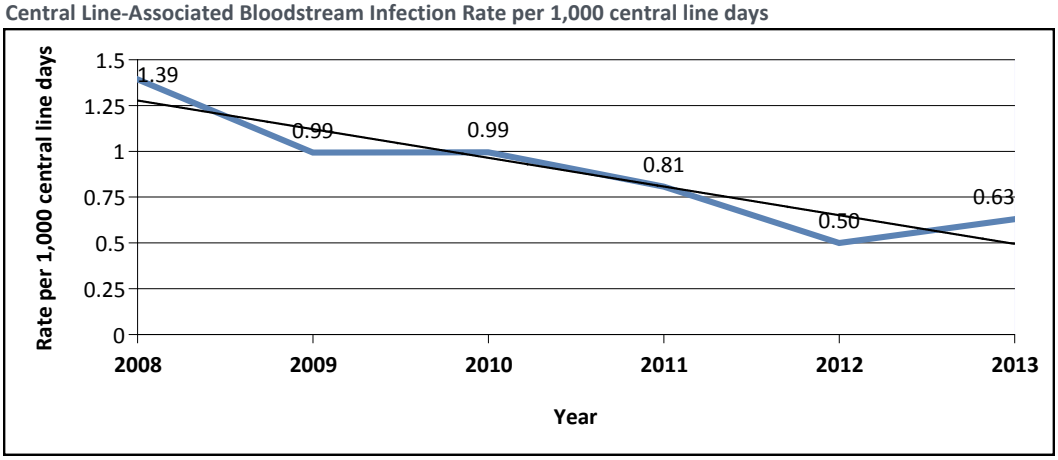
ABINGTON MEMORIAL HOSPITAL

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
2013	10	12.84	0.78	0.37 - 1.43	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
2013	2	0.84	2.37	0.27 - 8.57	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
2013	6	5.65	1.06	0.39 - 2.31	Same as

ADVANCED SURGICAL HOSPITAL

NHSN ID: 16317

Hospital type: Acute care general hospital

Number of licensed beds (2013): 14

Number of reported Healthcare-Associated Infections:

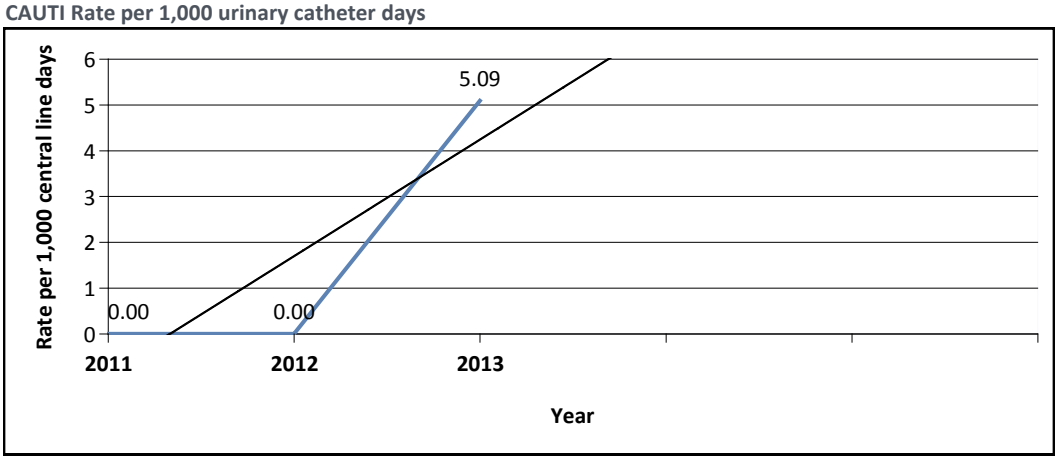
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008												
2009												
2010												
2011	1,116	0	0	0	0	0	0	1	0	0	0	0.90
2012	1,263	0	0	0	0	0	0	2	0	0	0	1.58
2013	1,169	0	0	0	0	0	0	0	0	2	0	1.71

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
2013	2	0.61	3.30	0.37 - 11.91	Same as

CAUTI Rate per 1,000 urinary catheter days



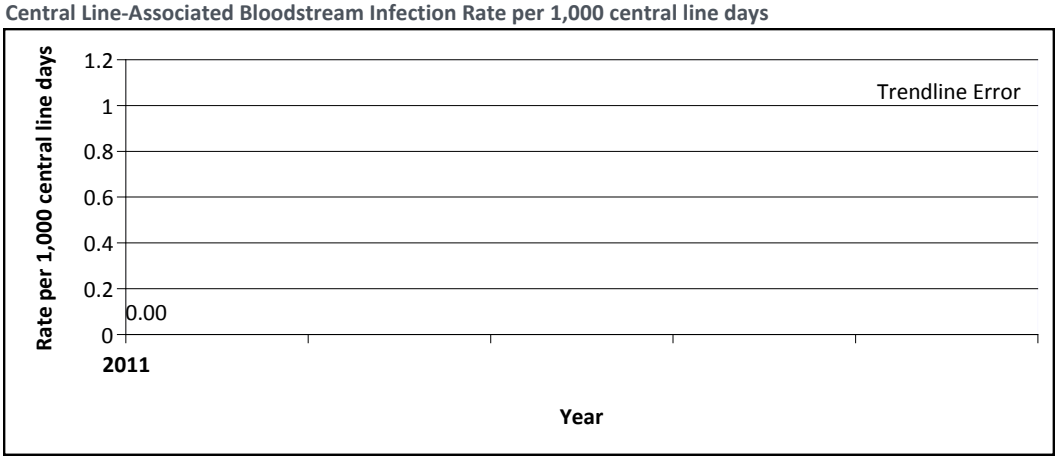
ADVANCED SURGICAL HOSPITAL

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				-	
2013				-	

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 (2013): 538

Number of reported Healthcare-Associated Infections:

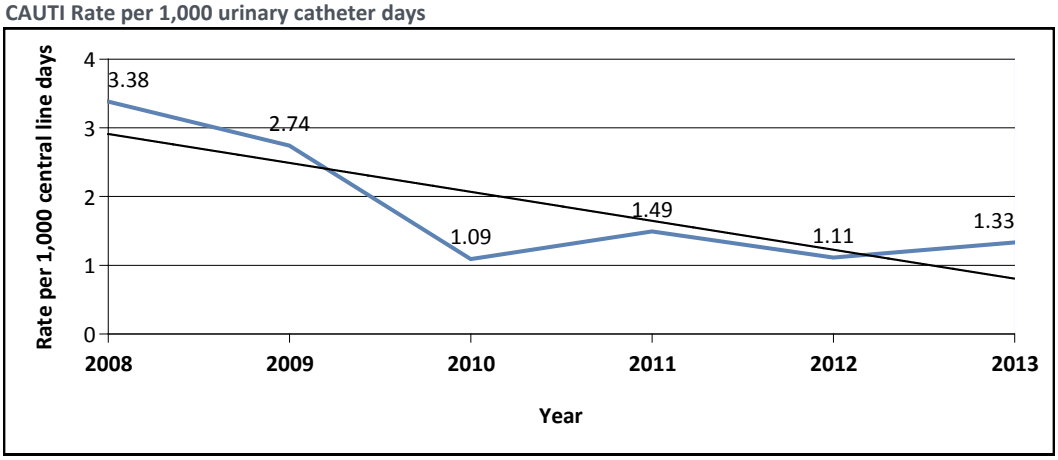
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	64,057	95	4	35	2	33	1	48	8	67	5	4.65
2009	136,211	125	7	60	5	42	0	103	13	100	10	3.41
2010	120,974	73	9	66	4	11	0	95	10	53	12	2.75
2011	111,995	73	8	44	4	20	1	94	6	53	5	2.75
2012	104,188	30	6	46	5	8	0	74	19	34	4	2.17
2013	102,364	53	6	59	13	3	0	45	15	47	10	2.45

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
2013	27	42.47	0.64	0.42 - 0.92	Better

CAUTI Rate per 1,000 urinary catheter days



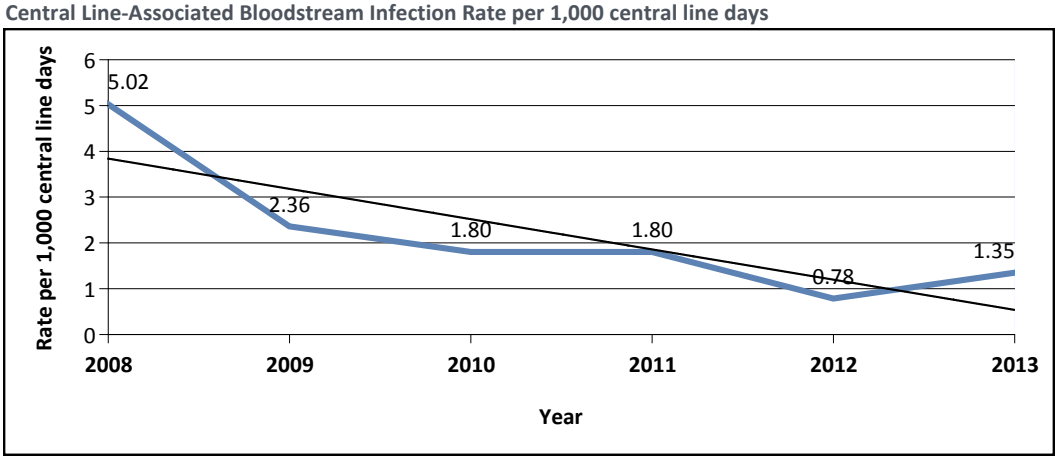
ALBERT EINSTEIN MEDICAL CENTER

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
2013	21	12.60	1.67	1.03 - 2.55	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	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
2013	1	1.95	0.51	0.01 - 2.86	Same as

ALBERT EINSTEIN MEDICAL CENTER AT ELKINS PARK

NHSN ID: 12500

Hospital type: Acute care general hospital

Number of licensed beds (2013): 38

Number of reported Healthcare-Associated Infections:

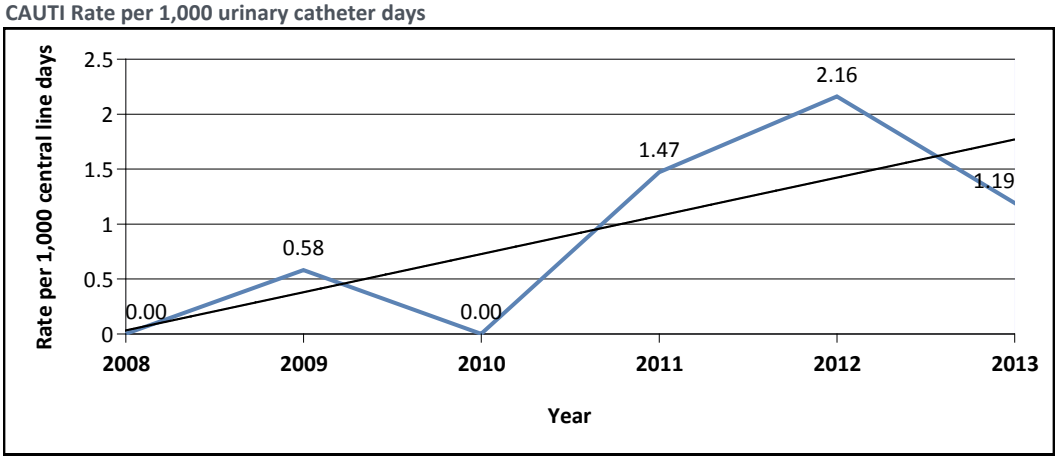
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	5,594	2	0	5	0	0	0	2	0	1	0	1.79
2009	13,264	10	0	11	0	0	0	6	0	3	0	2.26
2010	12,656	4	1	3	0	1	0	5	0	0	0	1.11
2011	10,601	9	0	6	0	1	0	8	1	5	1	2.92
2012	10,144	4	0	5	0	1	0	14	0	7	0	3.06
2013	9,960	3	0	8	0	0	0	12	1	3	0	2.71

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
2013	3	5.30	0.57	0.11 - 1.65	Same as

CAUTI Rate per 1,000 urinary catheter days



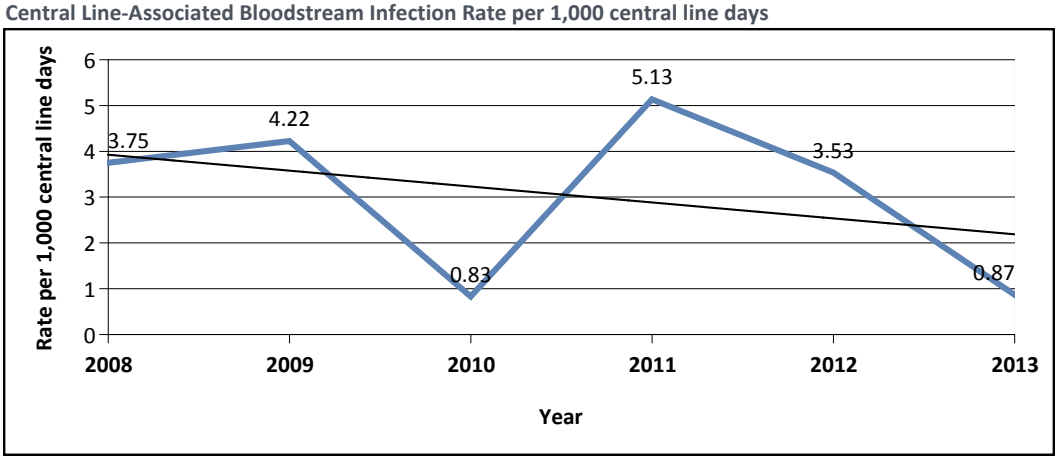
ALBERT EINSTEIN MEDICAL CENTER AT ELKINS PARK

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
2013	1	0.93	1.07	0.01 - 5.96	Same as

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 (2013): 196

Number of reported Healthcare-Associated Infections:

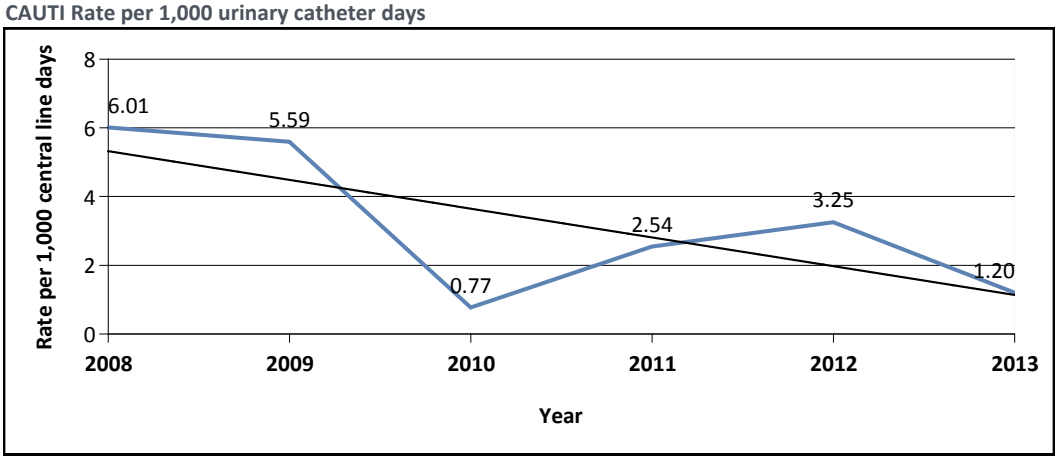
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	20,924	3	0	20	0	0	0	0	2	33	0	2.77
2009	39,604	7	1	31	0	0	0	0	2	43	0	2.12
2010	41,823	3	0	17	0	0	0	0	2	30	0	1.24
2011	40,945	2	0	7	0	1	0	0	2	30	0	1.03
2012	43,005	1	0	13	0	2	0	0	2	34	0	1.21
2013	43,328	3	0	7	0	0	0	0	3	26	0	0.90

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
2013	4	4.98	0.80	0.22 - 2.06	Same as

CAUTI Rate per 1,000 urinary catheter days



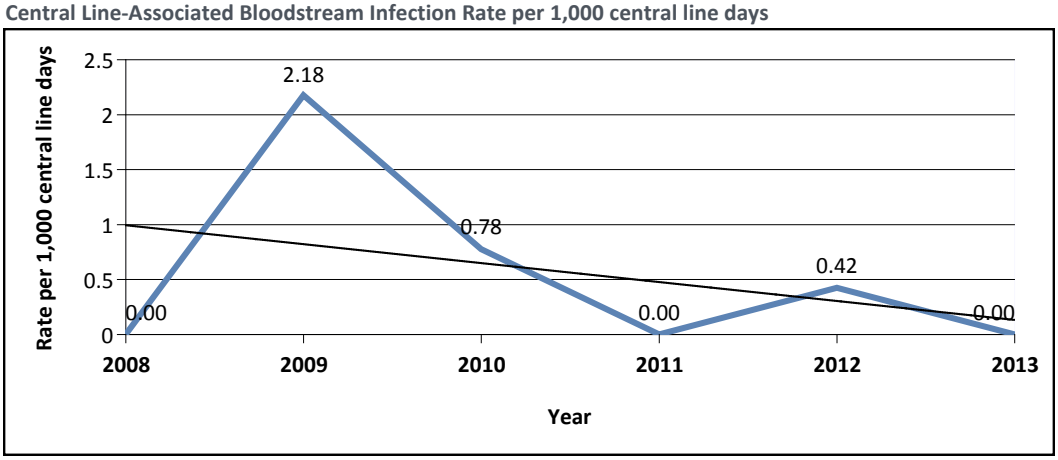
ALBERT EINSTEIN MEDICAL CENTER MOSS REHABILITATION

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
2013	0	1.62	0.00	0 - 2.27	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 (2013): 631

Number of reported Healthcare-Associated Infections:

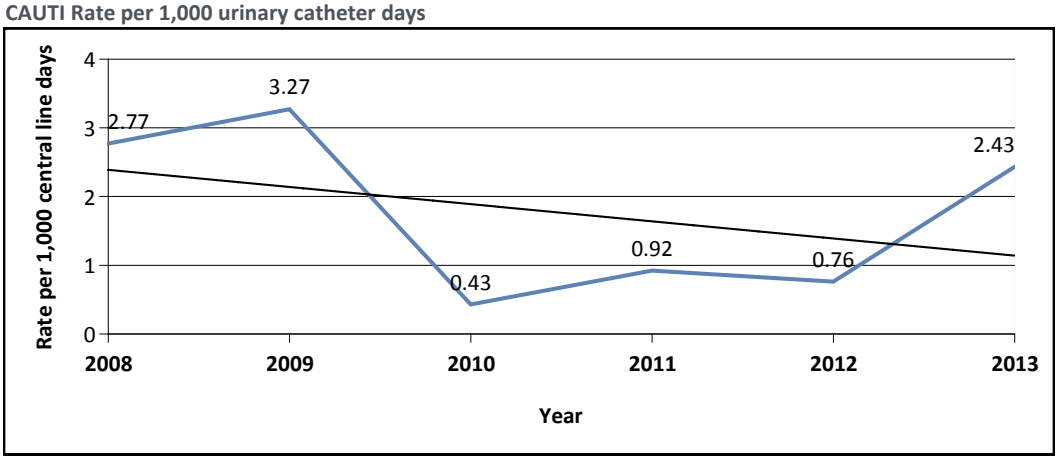
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	81,994	64	3	100	66	38	0	103	1	78	8	5.62
2009	167,653	154	4	230	108	97	0	181	13	205	12	5.99
2010	135,673	153	8	200	62	63	0	179	7	38	7	5.28
2011	133,596	174	2	158	81	36	0	149	12	65	11	5.15
2012	131,537	140	1	181	71	47	0	115	10	51	7	4.74
2013	130,089	87	1	84	77	20	0	144	9	138	12	4.40

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
2013	114	99.71	1.14	0.94 - 1.37	Same as

CAUTI Rate per 1,000 urinary catheter days



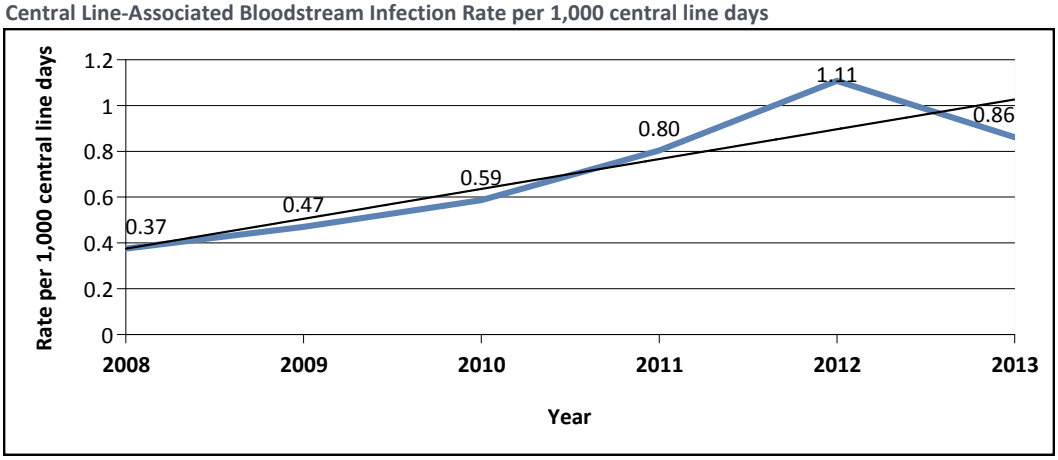
ALLEGHENY GENERAL HOSPITAL

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
2013	39	36.57	1.07	0.76 - 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	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				-	
2013				-	

ALLEGHENY VALLEY HOSPITAL

NHSN ID: 11842

Hospital type: Acute care general hospital

Number of licensed beds (2013): 228

Number of reported Healthcare-Associated Infections:

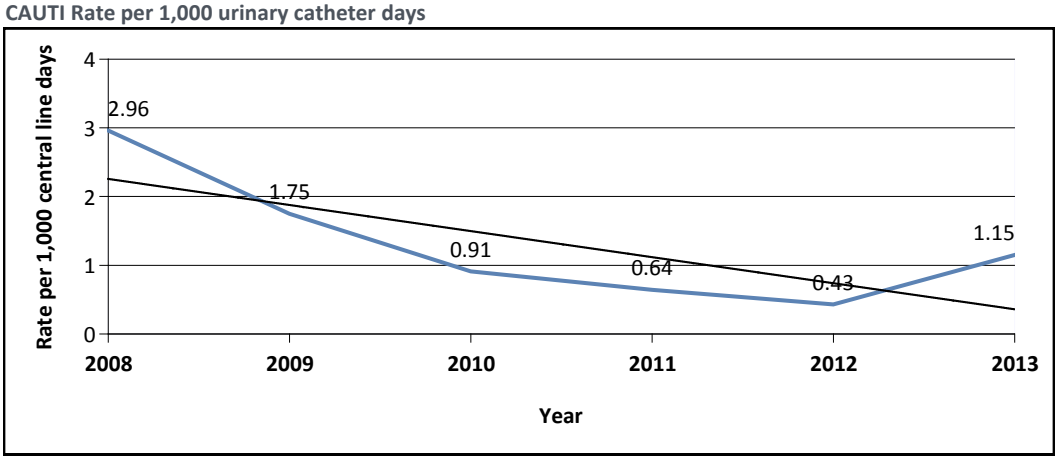
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	22,901	3	0	14	0	1	0	10	3	16	0	2.05
2009	51,349	7	0	39	0	7	0	14	2	21	0	1.75
2010	50,338	2	1	28	0	3	0	25	3	13	0	1.49
2011	46,228	6	6	19	0	4	0	25	3	9	1	1.58
2012	42,082	6	6	15	0	2	0	18	3	6	0	1.33
2013	35,566	8	4	7	0	4	1	22	0	13	0	1.66

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
2013	7	9.28	0.75	0.3 - 1.55	Same as

CAUTI Rate per 1,000 urinary catheter days



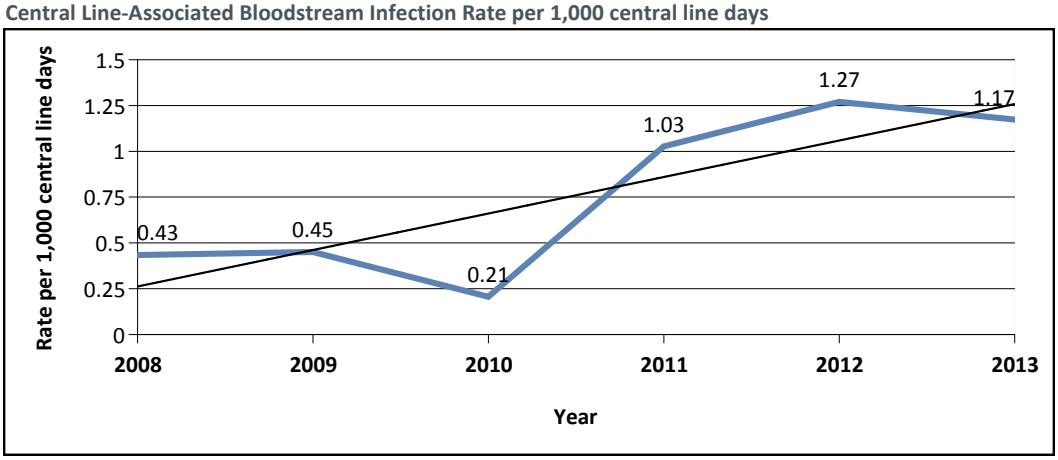
ALLEGHENY VALLEY HOSPITAL

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
2013	5	2.87	1.74	0.56 - 4.07	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 (2013): 82

Number of reported Healthcare-Associated Infections:

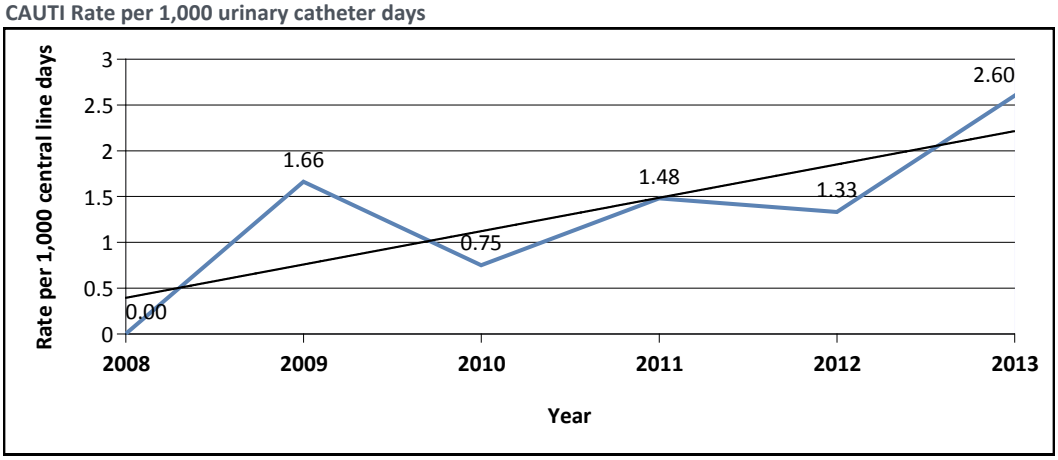
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	12,111	0	0	4	0	0	0	0	0	11	0	1.24
2009	23,441	1	0	0	0	0	0	0	0	17	0	0.77
2010	21,464	1	0	1	0	0	0	0	0	9	0	0.51
2011	20,817	2	0	1	0	0	0	0	0	16	0	0.91
2012	22,151	1	0	0	0	1	0	0	0	23	0	1.13
2013	21,252	1	0	13	0	2	0	0	0	40	0	2.64

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
2013	4	2.29	1.74	0.47 - 4.47	Same as

CAUTI Rate per 1,000 urinary catheter days



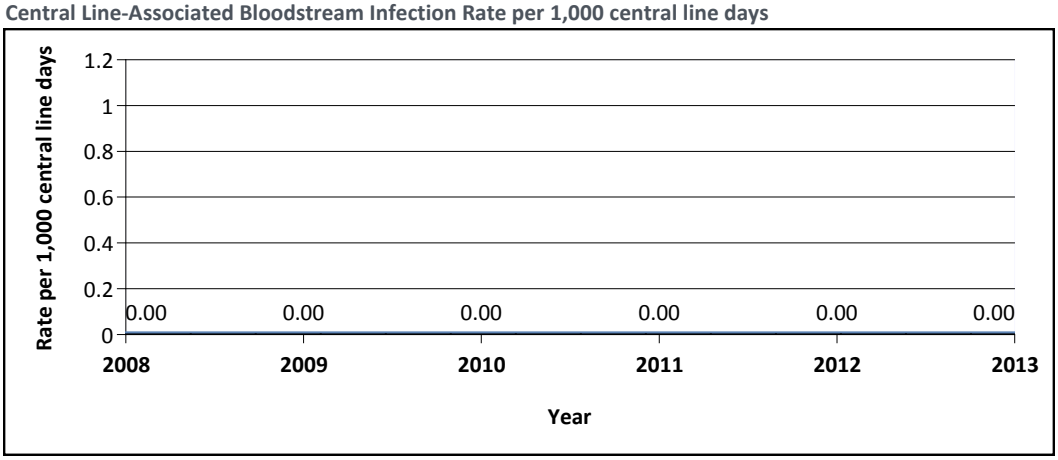
ALLIED SERVICES INSTITUTE OF REHABILITATION

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
2013	0	0.22	0.00	0 - 16.77	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 (2013): 376

Number of reported Healthcare-Associated Infections:

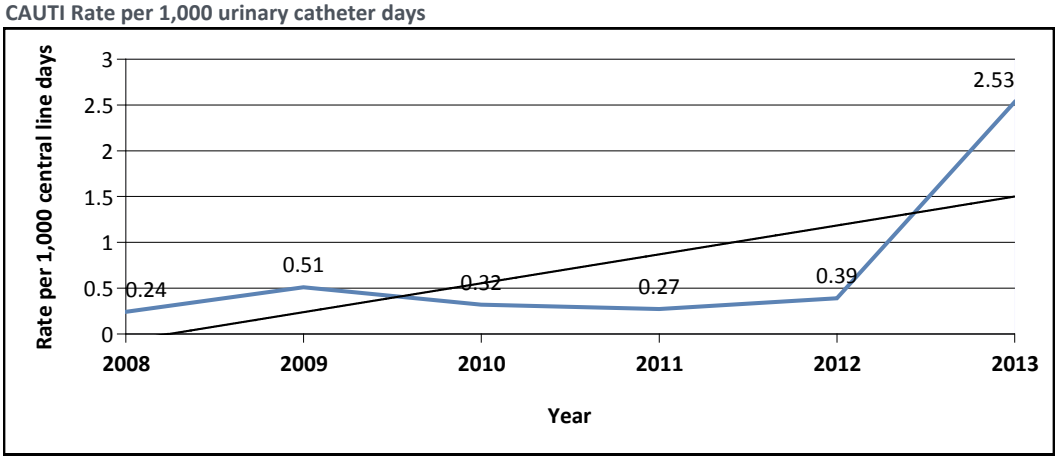
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	43,174	8	2	4	0	17	0	42	6	3	0	1.90
2009	98,004	9	1	23	0	7	1	50	1	16	0	1.10
2010	89,928	7	2	7	0	5	1	66	10	8	0	1.18
2011	89,191	7	0	4	0	12	0	70	3	6	0	1.14
2012	82,234	4	0	3	0	8	0	61	2	13	0	1.11
2013	80,978	26	1	15	0	22	1	51	2	67	0	2.28

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
2013	49	29.69	1.65	1.22 - 2.18	Worse

CAUTI Rate per 1,000 urinary catheter days



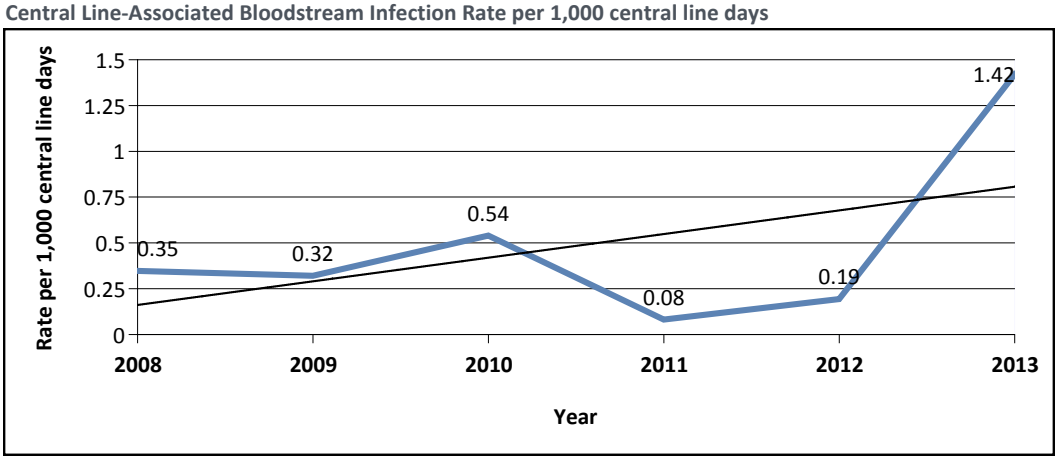
ALTOONA REGIONAL HEALTH SYSTEM

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
2013	16	7.58	2.11	1.21 - 3.43	Worse

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 (2013): 480

Number of reported Healthcare-Associated Infections:

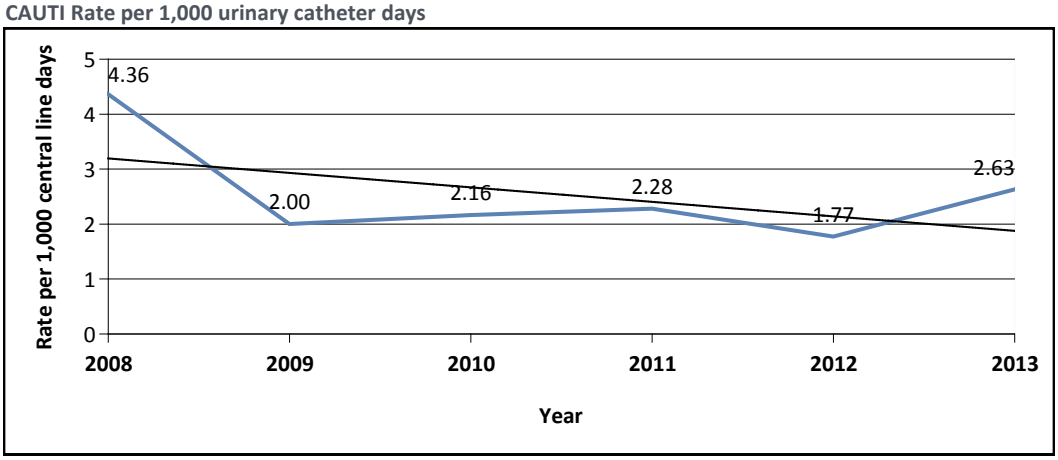
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	71,519	55	2	70	3	26	0	44	4	82	5	4.07
2009	154,215	63	3	81	12	73	3	80	20	84	1	2.72
2010	131,905	31	2	40	15	45	1	43	7	92	2	2.11
2011	115,743	28	4	39	14	37	0	42	7	78	3	2.18
2012	108,401	25	2	30	2	21	0	41	16	61	3	1.85
2013	103,768	13	5	38	2	20	1	34	13	91	1	2.10

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
2013	61	48.81	1.25	0.96 - 1.61	Same as

CAUTI Rate per 1,000 urinary catheter days



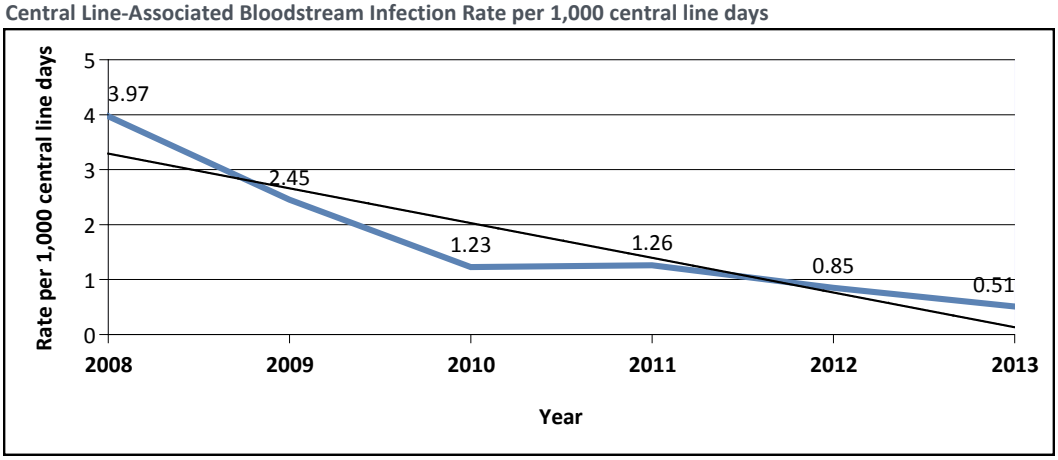
ARIA HEALTH

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
2013	8	12.76	0.63	0.27 - 1.24	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 (2013): 154

Number of reported Healthcare-Associated Infections:

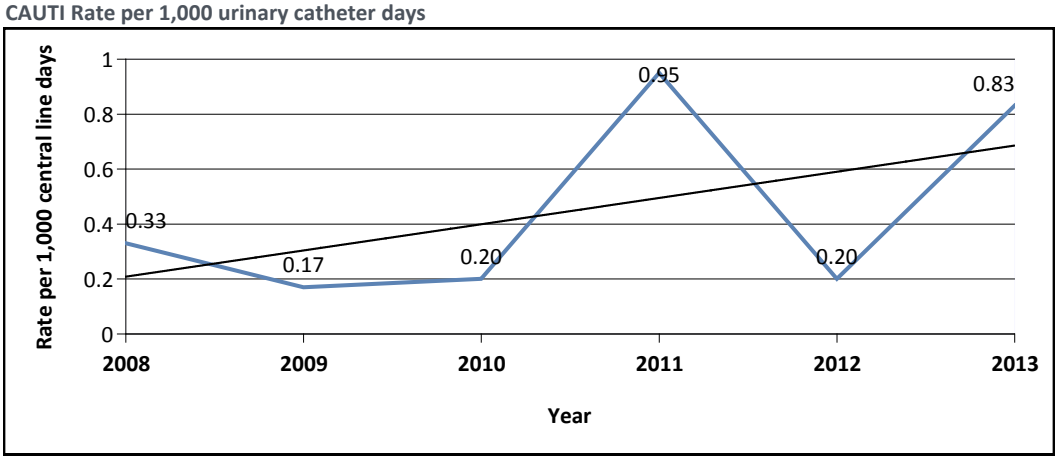
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	16,141	1	0	4	0	1	0	5	0	1	0	0.74
2009	33,060	3	0	9	0	2	0	7	0	5	0	0.79
2010	33,954	4	0	6	0	2	1	4	1	4	0	0.65
2011	34,165	3	0	10	0	3	1	12	0	6	0	1.02
2012	32,277	2	0	4	0	3	0	6	0	6	0	0.65
2013	30,446	2	0	5	0	1	0	4	1	7	0	0.66

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
2013	4	7.31	0.55	0.15 - 1.4	Same as

CAUTI Rate per 1,000 urinary catheter days



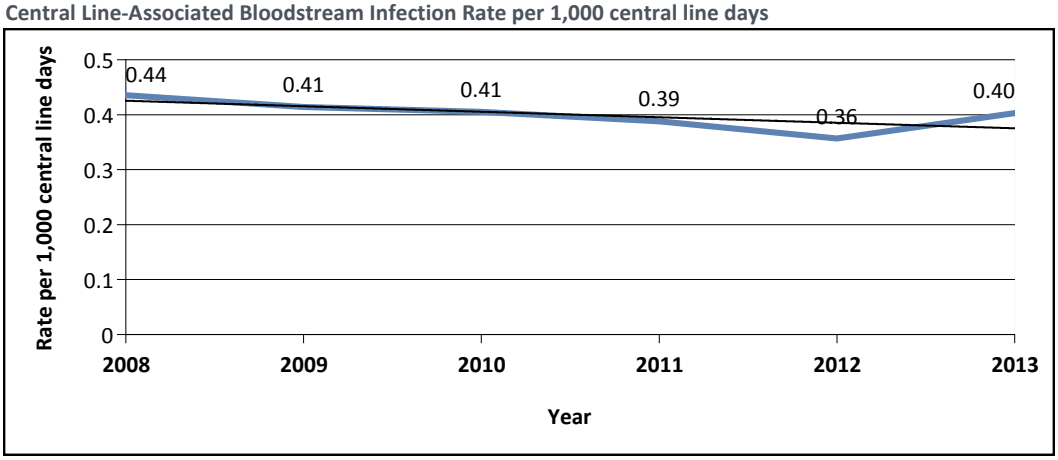
ARMSTRONG COUNTY MEMORIAL HOSPITAL

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
2013	2	3.34	0.60	0.07 - 2.16	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 (2013): 47

Number of reported Healthcare-Associated Infections:

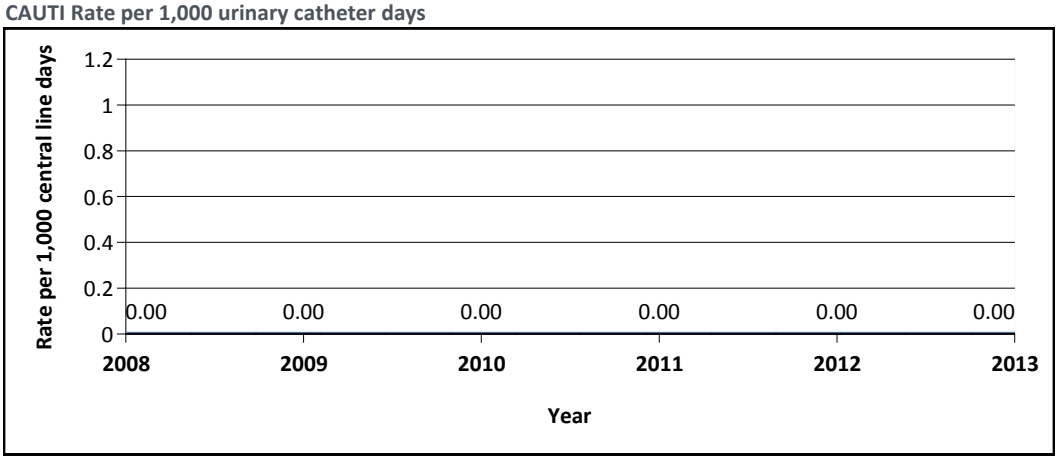
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	766	0	0	0	0	0	0	2	0	0	0	2.61
2009	1,081	0	0	0	0	0	0	1	0	0	0	0.93
2010	882	0	0	0	0	1	0	2	0	0	0	3.40
2011	661	0	0	0	0	0	0	1	0	0	0	1.51
2012	539	0	0	0	0	0	0	0	0	0	0	0.00
2013	436	0	0	0	0	0	0	0	0	0	0	0.00

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
2013	0	0.34	0.00	0 - 10.81	Same as

CAUTI Rate per 1,000 urinary catheter days



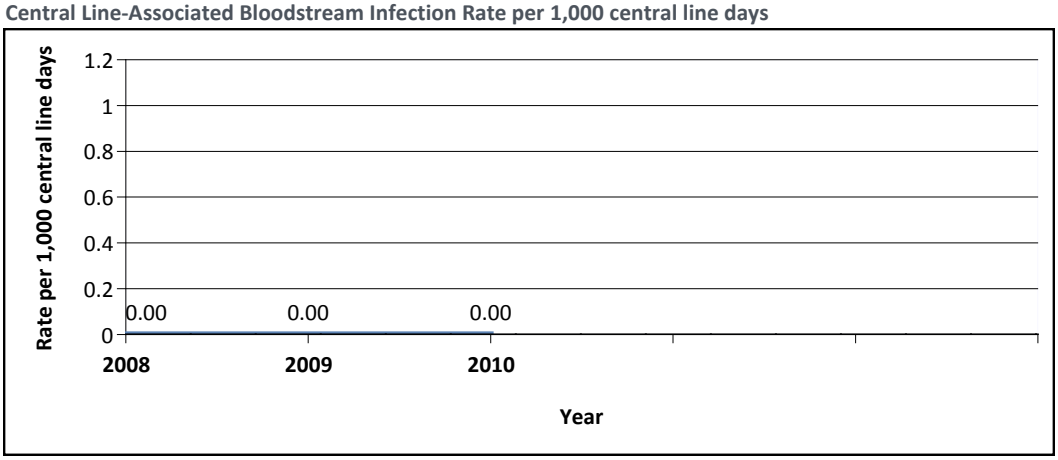
BARIX CLINICS OF PENNSYLVANIA

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				-	
2013				-	

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 (2013): 25

Number of reported Healthcare-Associated Infections:

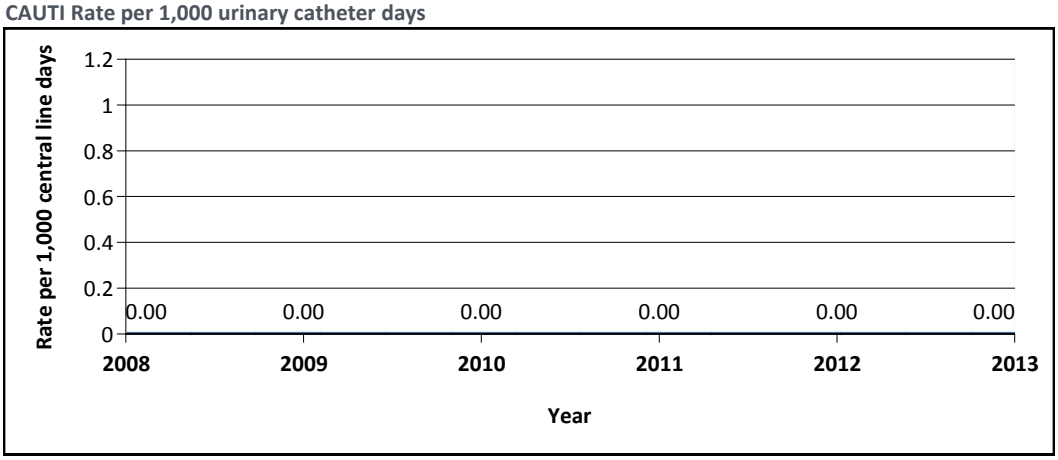
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	2,834	0	0	1	0	0	0	0	0	0	0	0.35
2009	5,884	0	0	0	0	0	0	0	0	0	0	0.00
2010	4,933	0	0	0	0	0	0	0	0	0	0	0.00
2011	4,251	0	0	0	0	0	0	0	0	0	0	0.00
2012	4,386	0	0	0	0	0	0	0	0	0	0	0.00
2013	4,230	0	0	0	0	0	0	0	0	0	0	

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
2013	0	0.73	0.00	0 - 5.04	Same as

CAUTI Rate per 1,000 urinary catheter days



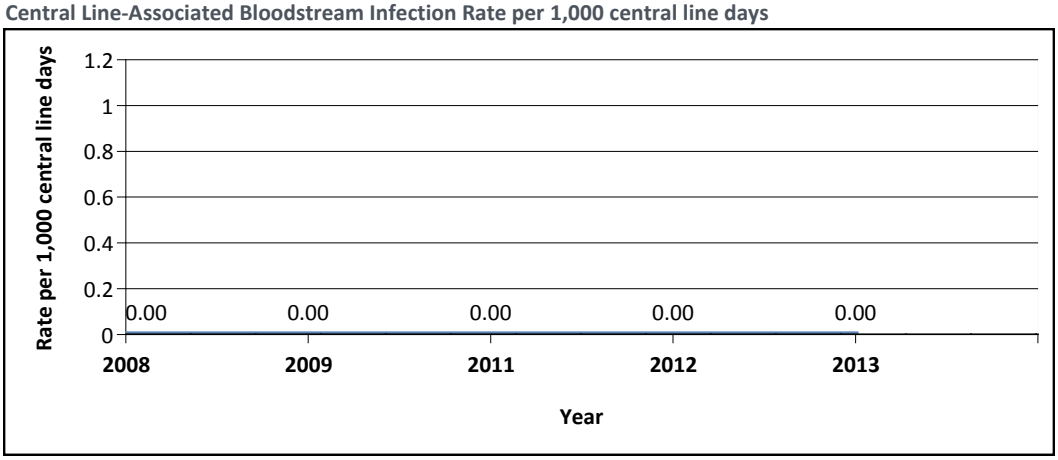
BARNES-KASSON COUNTY HOSPITAL

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
2013	0	0.00	0.00	0 - 1352.02	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 (2013): 147

Number of reported Healthcare-Associated Infections:

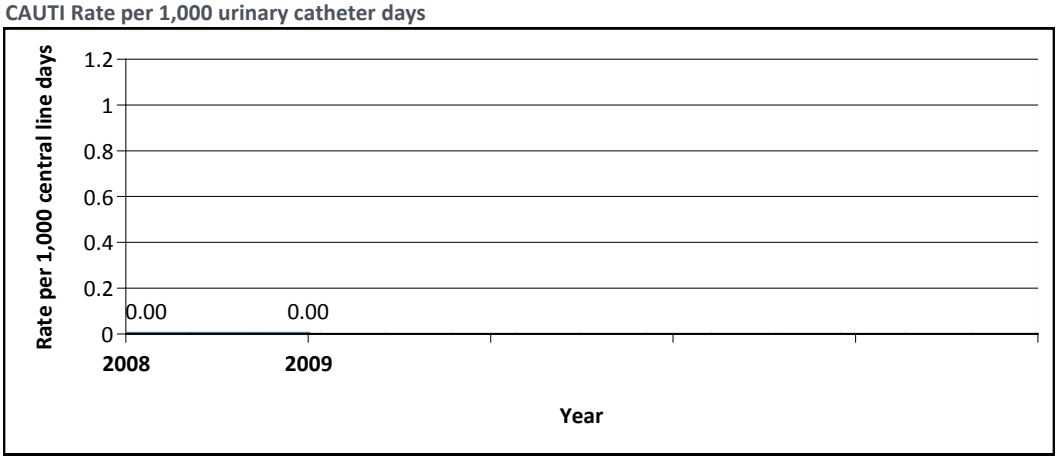
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	23,734	0	0	0	0	0	0	0	0	0	0	0.00
2009	48,910	0	22	0	0	0	0	0	4	5	0	0.63
2010	49,557	0	3	1	0	0	0	0	2	1	0	0.14
2011	47,456	0	9	0	0	0	0	0	1	0	0	0.21
2012	48,168	0	2	0	0	0	0	0	0	1	0	0.06
2013	44,535	0	1	14	0	0	0	0	2	0	0	0.38

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				-	
2013				-	

CAUTI Rate per 1,000 urinary catheter days



BERWICK HOSPITAL CENTER

NHSN ID: 11442

Hospital type: Acute care general hospital

Number of licensed beds (2013): 101

Number of reported Healthcare-Associated Infections:

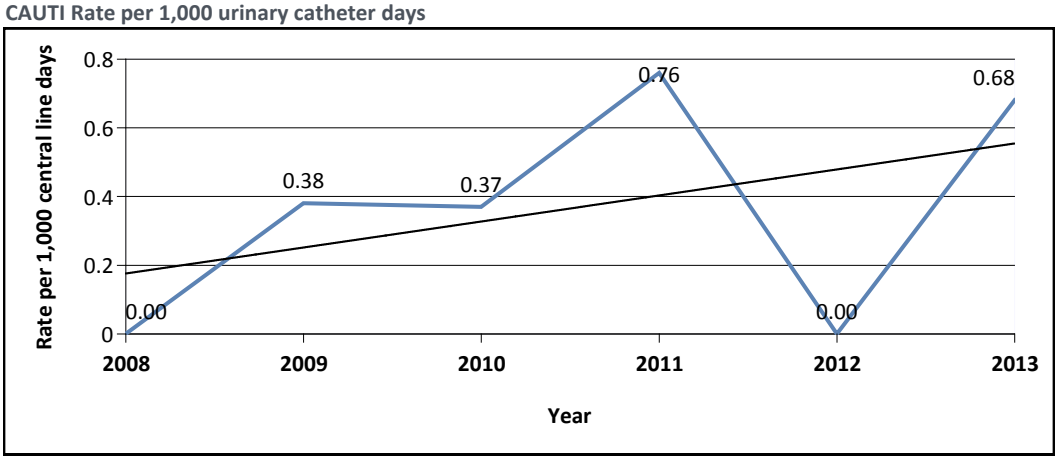
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	8,531	0	0	1	0	0	0	0	0	2	0	0.35
2009	16,750	0	0	0	1	0	0	2	1	2	0	0.36
2010	15,376	0	0	0	1	0	0	4	0	2	0	0.46
2011	14,647	2	0	0	1	2	0	1	0	2	0	0.55
2012	12,578	0	0	1	0	1	0	3	0	1	1	0.56
2013	10,648	1	0	0	0	0	0	0	1	1	0	0.28

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
2013	1	2.21	0.45	0.01 - 2.51	Same as

CAUTI Rate per 1,000 urinary catheter days



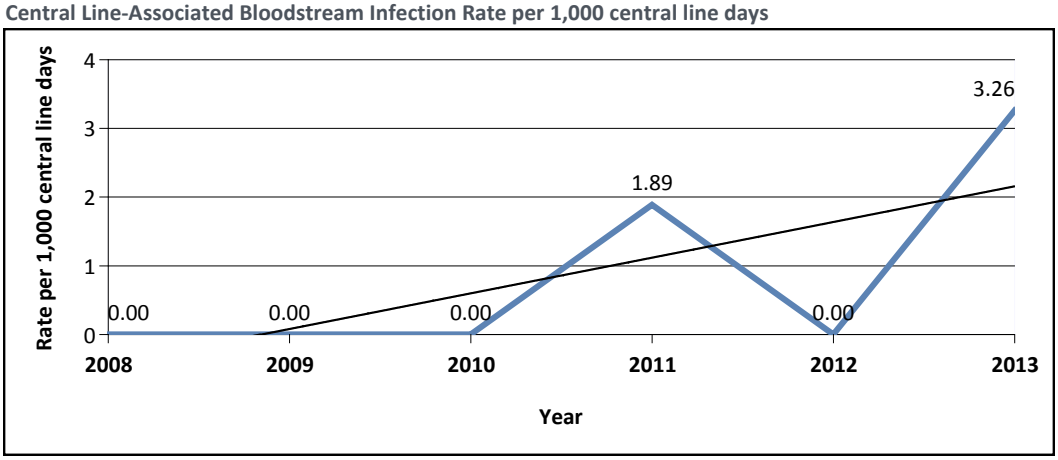
BERWICK HOSPITAL CENTER

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
2013	1	0.21	4.83	0.06 - 26.88	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 (2013): 107

Number of reported Healthcare-Associated Infections:

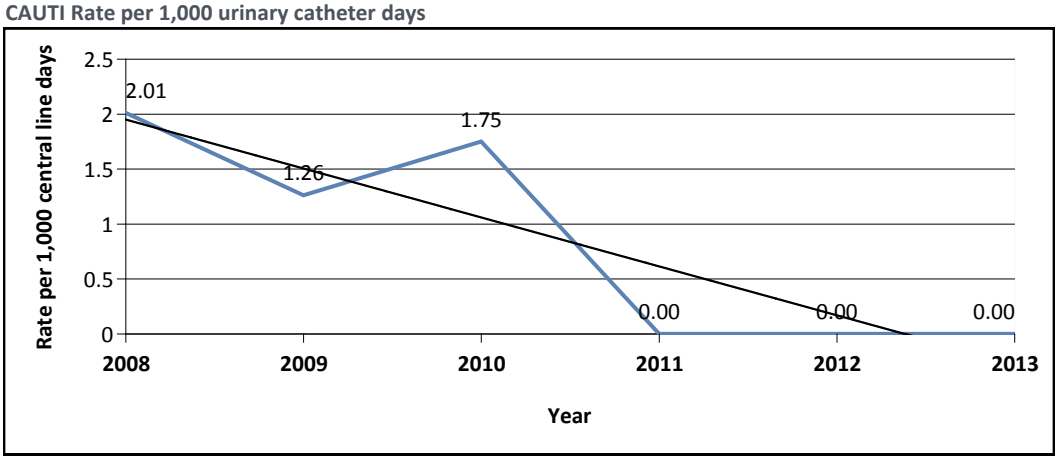
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	5,124	1	0	4	0	3	0	3	0	3	0	2.73
2009	11,333	0	0	3	0	2	0	2	1	4	1	1.15
2010	11,429	1	0	4	0	6	0	1	0	5	0	1.49
2011	11,423	0	0	3	0	2	0	3	3	1	0	1.05
2012	12,697	0	0	4	0	5	0	1	4	0	0	1.10
2013	13,247	0	0	5	1	4	0	9	1	1	0	1.59

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
2013	0	2.26	0.00	0 - 1.62	Same as

CAUTI Rate per 1,000 urinary catheter days



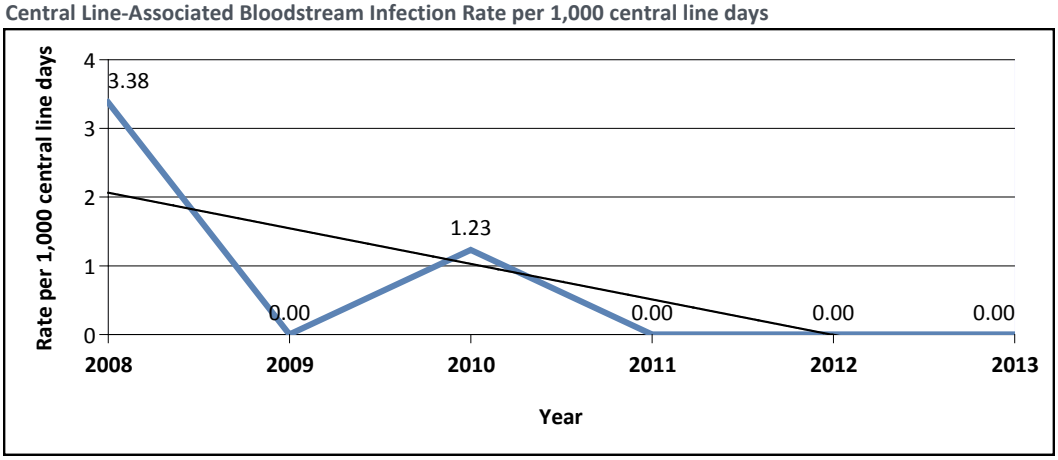
BRADFORD REGIONAL MEDICAL CENTER

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
2013	0	0.30	0.00	0 - 12.2	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 (2013): 169

Number of reported Healthcare-Associated Infections:

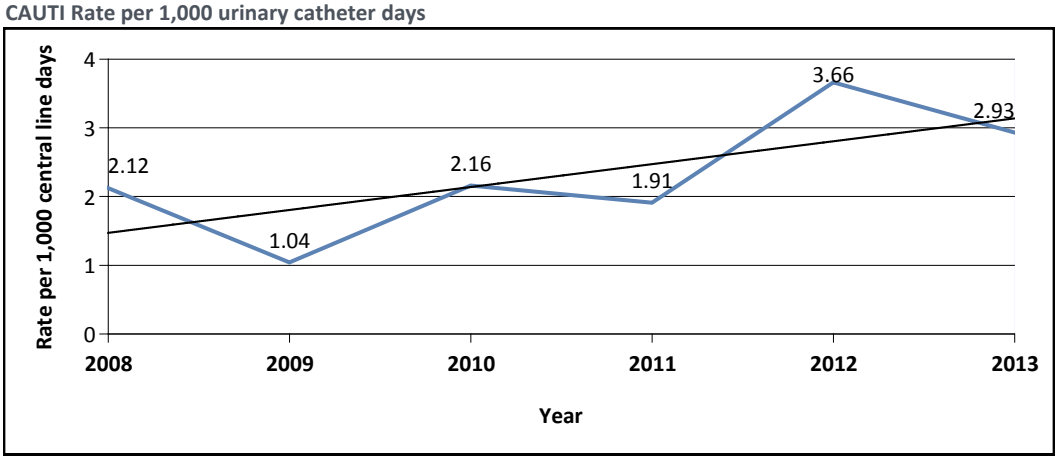
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	18,322	2	0	10	0	2	0	8	0	9	0	1.69
2009	35,033	3	0	7	1	11	0	13	1	7	0	1.23
2010	25,194	4	0	9	0	10	0	19	0	12	0	2.14
2011	37,170	4	0	6	0	12	0	19	0	11	0	1.40
2012	37,089	3	0	4	0	14	0	19	0	19	0	1.59
2013	36,865	12	0	10	0	7	0	24	2	18	0	1.98

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
2013	13	6.69	1.94	1.03 - 3.33	Worse

CAUTI Rate per 1,000 urinary catheter days



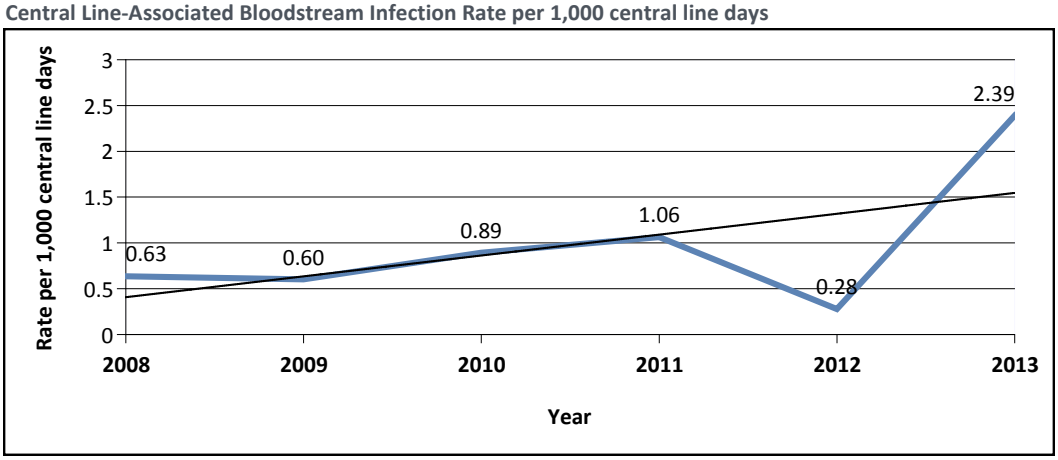
BRANDYWINE HOSPITAL

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
2013	9	2.53	3.55	1.62 - 6.74	Worse

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 (2013): 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
2013	45,561	0	0	0	0	0	0	0	0	0	0	0.00

BROOKVILLE HOSPITAL

NHSN ID: 12418

Hospital type: Critical access hospital

Number of licensed beds (2013): 35

Number of reported Healthcare-Associated Infections:

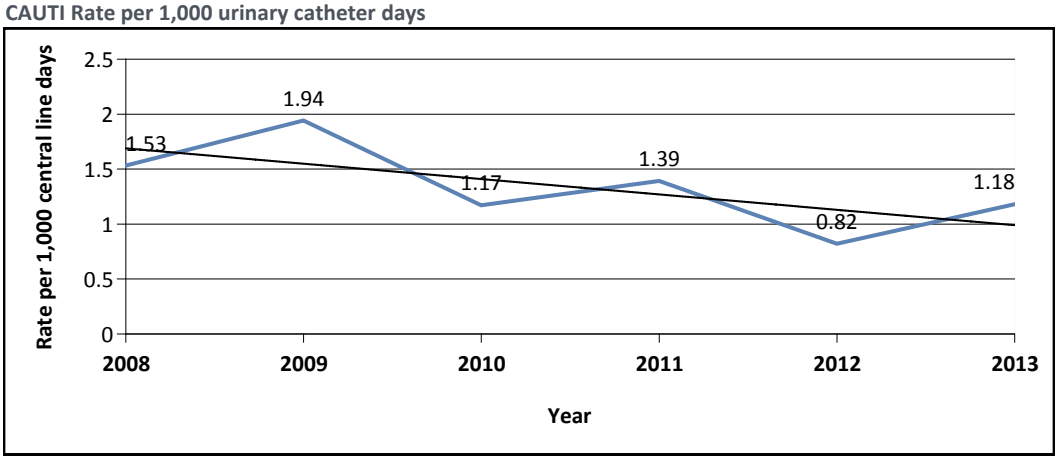
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,721	1	0	1	0	1	3	0	0	4	0	2.69
2009	6,989	1	0	0	0	1	1	3	1	3	1	1.57
2010	6,307	1	0	0	0	0	1	0	0	1	0	0.48
2011	6,425	0	0	0	0	0	1	2	0	3	0	0.93
2012	6,036	0	0	1	0	1	0	2	1	3	0	1.33
2013	5,423	0	0	0	0	0	0	2	0	1	0	0.55

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
2013	1	1.28	0.78	0.01 - 4.34	Same as

CAUTI Rate per 1,000 urinary catheter days



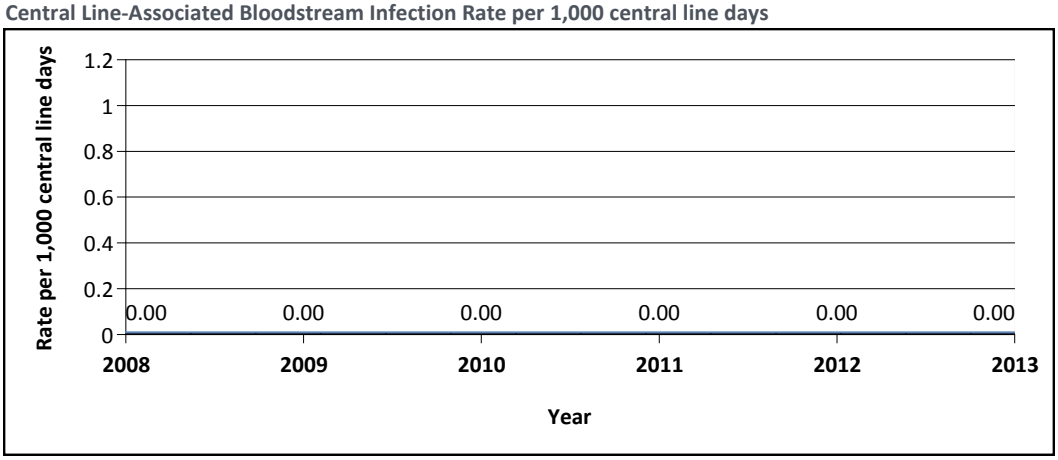
BROOKVILLE HOSPITAL

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
2013	0	0.30	0.00	0 - 12.09	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 (2013): 24

Number of reported Healthcare-Associated Infections:

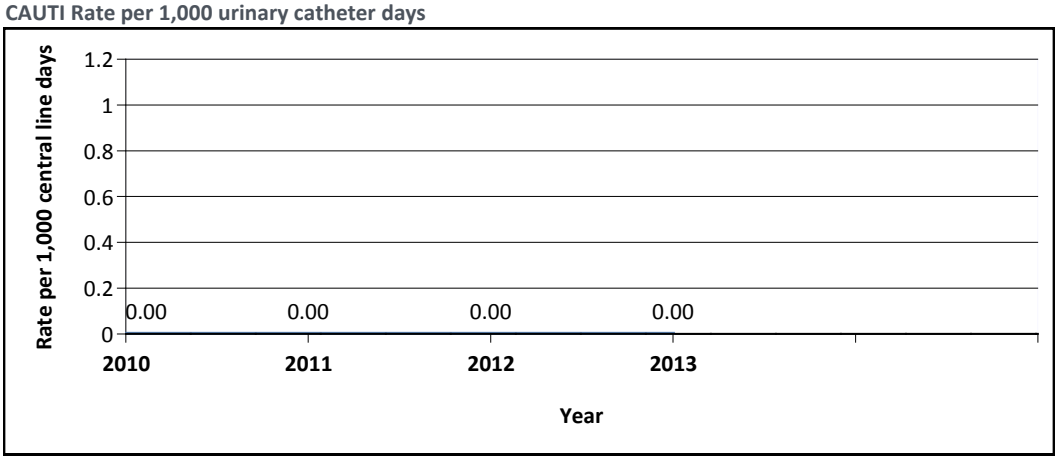
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008												
2009												
2010	380	0	0	0	0	0	0	0	0	0	0	0.00
2011	739	0	0	0	0	0	0	0	0	0	0	0.00
2012	985	0	0	0	0	0	0	7	0	0	0	7.11
2013	1,385	0	0	0	0	0	0	5	0	0	0	3.61

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
2013	0	0.19	0.00	0 - 19.59	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 (2013): 21

Number of reported Healthcare-Associated Infections:

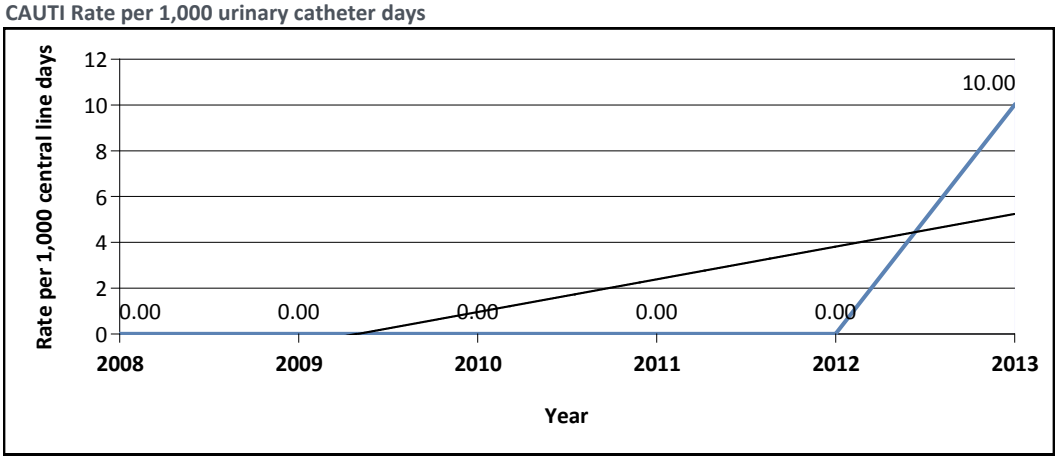
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	481	0	0	0	0	0	0	0	0	0	0	0.00
2009	1,026	0	0	0	0	0	0	0	0	0	0	0.00
2010	1,264	0	0	0	0	0	0	0	0	0	0	0.00
2011	1,078	0	0	1	0	0	0	0	0	0	0	0.93
2012	1,260	0	0	2	0	0	0	0	1	0	0	2.38
2013	1,056	0	1	3	0	1	0	0	2	3	0	9.47

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
2013	1	0.15	6.67	0.09 - 37.1	Same as

CAUTI Rate per 1,000 urinary catheter days



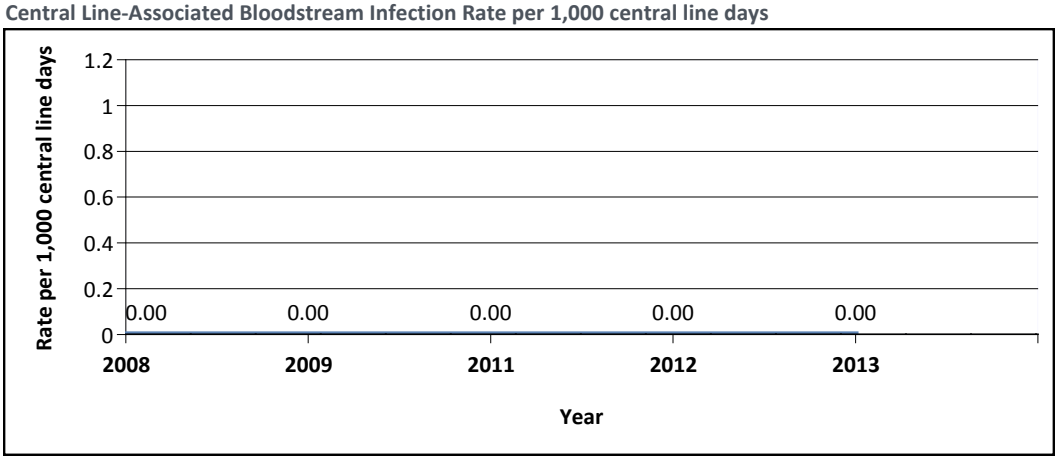
BUCKTAIL MEDICAL CENTER

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
2013	0	0.04	0.00	0 - 100.86	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 (2013): 296

Number of reported Healthcare-Associated Infections:

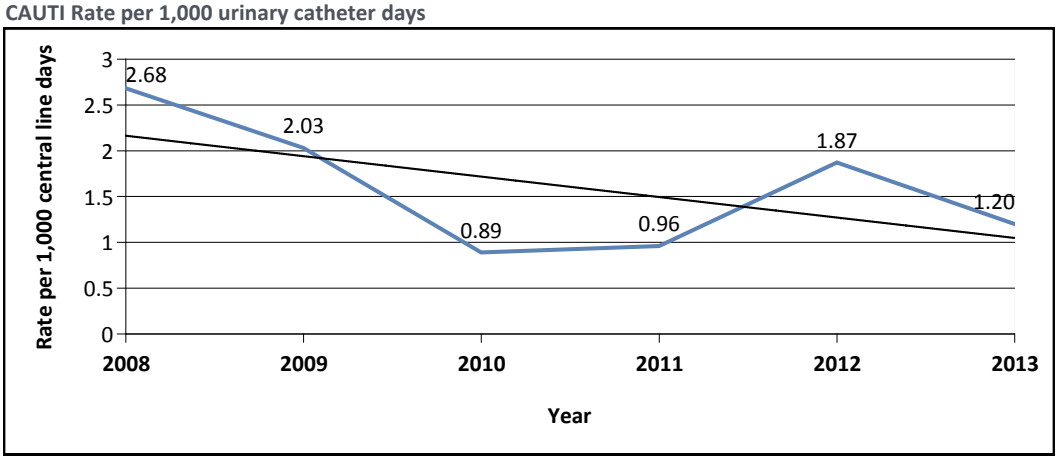
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	28,358	3	1	4	1	11	0	33	4	25	0	2.89
2009	66,212	7	2	15	10	18	0	76	5	39	0	2.60
2010	63,971	7	2	12	3	22	0	74	4	34	0	2.47
2011	67,225	8	0	11	4	10	1	57	5	20	0	1.73
2012	65,912	10	0	17	2	16	0	75	3	40	1	2.49
2013	62,866	4	1	22	3	14	0	63	2	34	0	2.27

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
2013	13	16.49	0.79	0.42 - 1.35	Same as

CAUTI Rate per 1,000 urinary catheter days



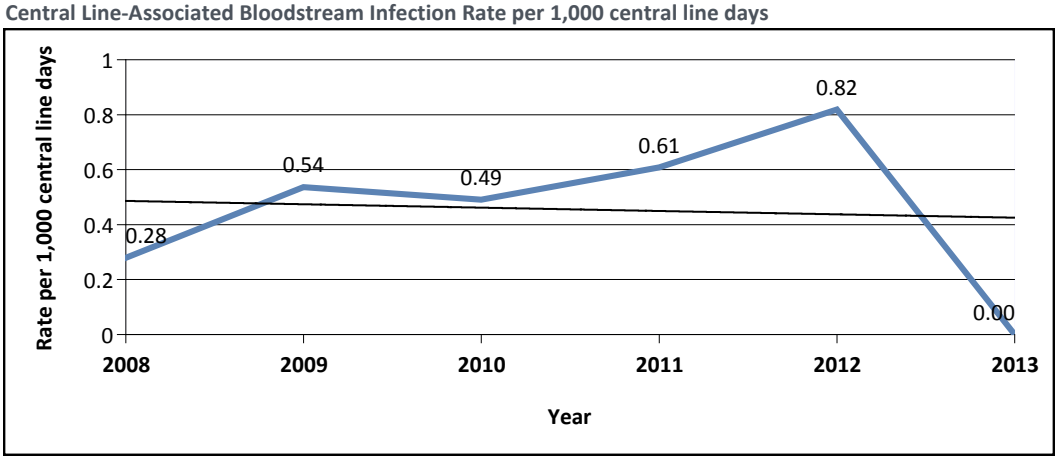
BUTLER MEMORIAL HOSPITAL

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
2013	0	4.68	0.00	0 - 0.78	Better

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 (2013): 104

Number of reported Healthcare-Associated Infections:

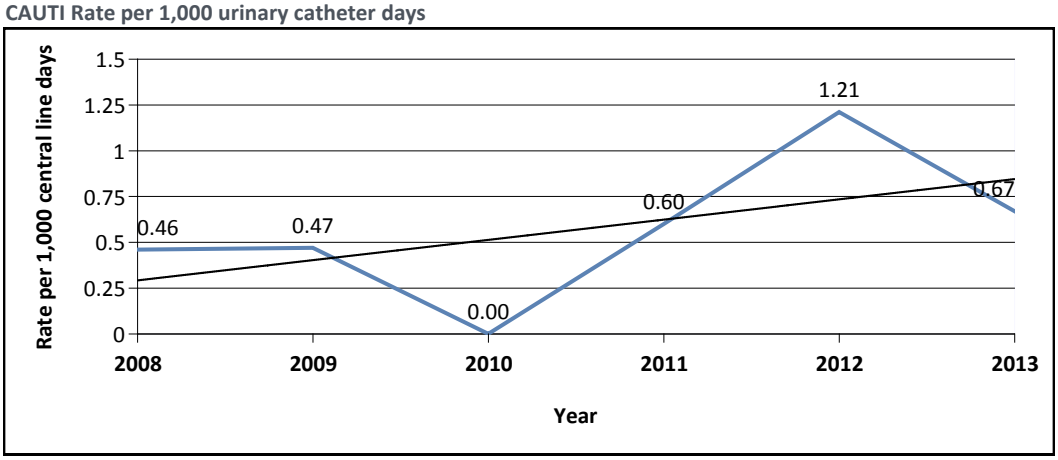
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	10,404	1	0	5	0	1	0	9	1	2	0	1.83
2009	21,655	5	0	5	0	1	0	10	1	5	1	1.29
2010	18,963	2	0	8	0	0	0	10	0	1	2	1.21
2011	17,798	1	0	5	0	1	0	6	1	6	1	1.18
2012	17,168	1	0	2	0	0	0	16	1	9	0	1.69
2013	14,862	3	0	4	1	0	0	8	1	5	0	1.48

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
2013	2	4.57	0.44	0.05 - 1.58	Same as

CAUTI Rate per 1,000 urinary catheter days



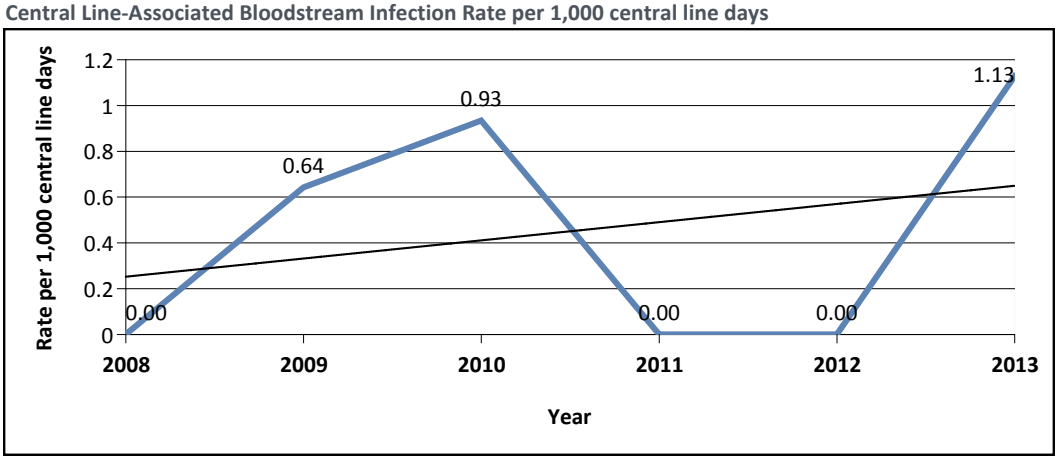
CANONSBURG GENERAL HOSPITAL

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
2013	2	1.19	1.68	0.19 - 6.05	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 (2013): 165

Number of reported Healthcare-Associated Infections:

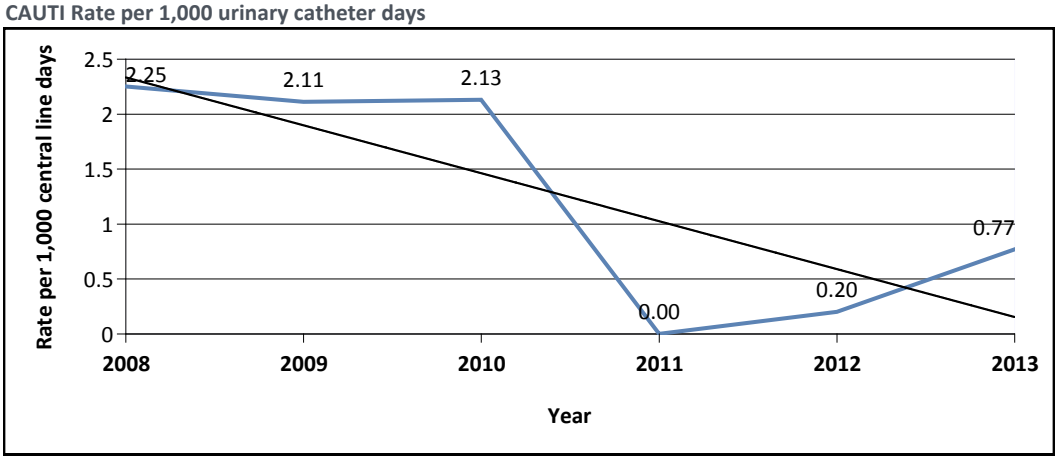
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	13,657	2	0	4	0	6	1	35	2	14	0	4.69
2009	29,884	8	1	4	1	10	0	37	4	32	0	3.25
2010	28,397	1	0	1	0	5	0	33	0	39	0	2.78
2011	26,235	1	0	1	0	0	0	21	0	2	0	0.95
2012	20,990	0	0	0	0	1	0	10	0	1	0	0.57
2013	17,358	0	0	0	0	1	0	27	1	3	0	1.84

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
2013	3	5.93	0.51	0.1 - 1.48	Same as

CAUTI Rate per 1,000 urinary catheter days



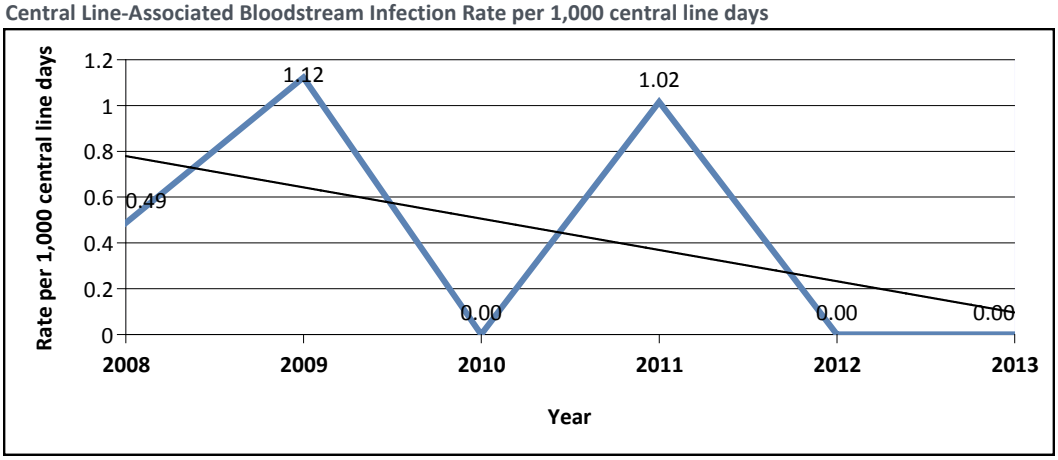
CARLISLE REGIONAL MEDICAL CENTER

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
2013	0	1.68	0.00	0 - 2.19	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 (2013): 248

Number of reported Healthcare-Associated Infections:

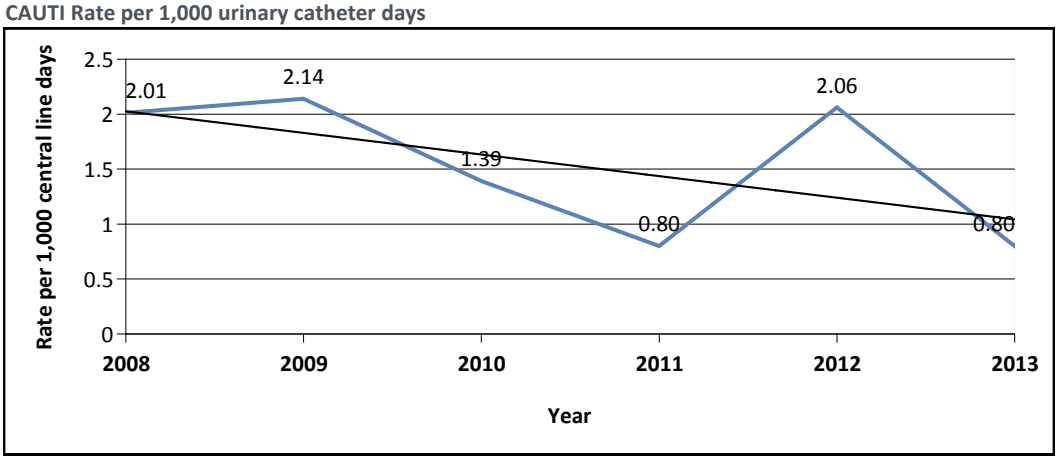
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	23,492	5	0	7	0	7	0	17	0	13	0	2.09
2009	55,289	7	1	18	0	28	0	45	5	41	1	2.64
2010	52,912	3	0	3	1	9	0	60	0	33	1	2.08
2011	56,846	6	0	22	0	12	0	62	1	21	0	2.18
2012	54,266	11	0	27	0	16	0	44	5	30	2	2.49
2013	58,513	23	1	32	0	9	0	56	1	19	0	2.41

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
2013	8	15.24	0.52	0.23 - 1.03	Same as

CAUTI Rate per 1,000 urinary catheter days



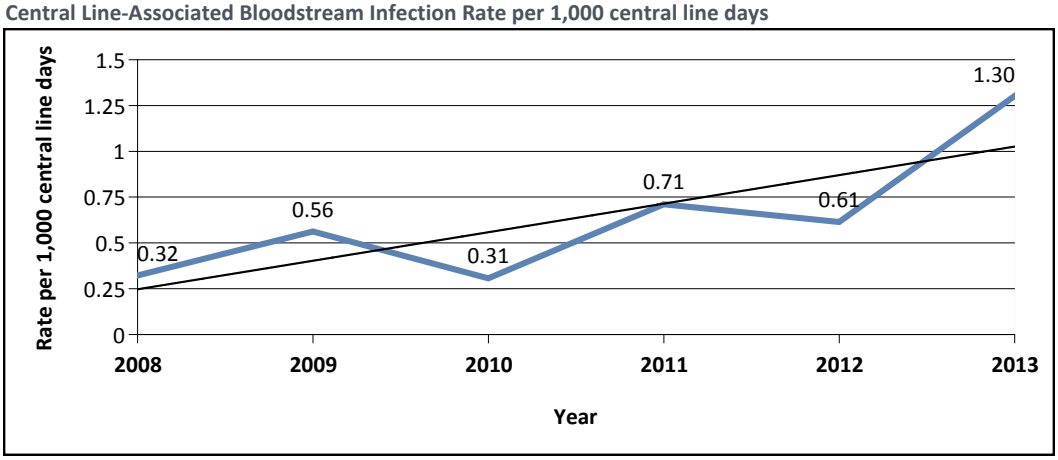
CHAMBERSBURG HOSPITAL

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
2013	9	4.65	1.93	0.88 - 3.67	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 (2013): 59

Number of reported Healthcare-Associated Infections:

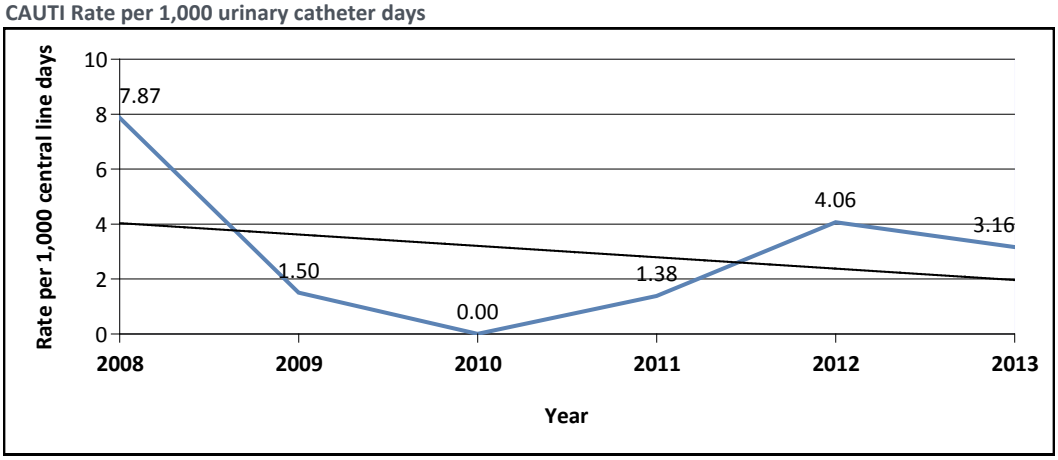
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,987	2	0	0	0	1	0	2	0	5	0	2.01
2009	10,171	1	0	1	0	2	0	3	0	4	0	1.08
2010	9,535	1	0	1	0	10	0	4	0	1	0	1.78
2011	9,233	1	0	0	0	1	0	4	0	4	0	1.08
2012	10,297	1	0	0	0	3	0	6	0	7	0	1.65
2013	11,574	1	2	1	0	2	0	7	1	7	0	1.81

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
2013	4	1.90	2.10	0.57 - 5.38	Same as

CAUTI Rate per 1,000 urinary catheter days



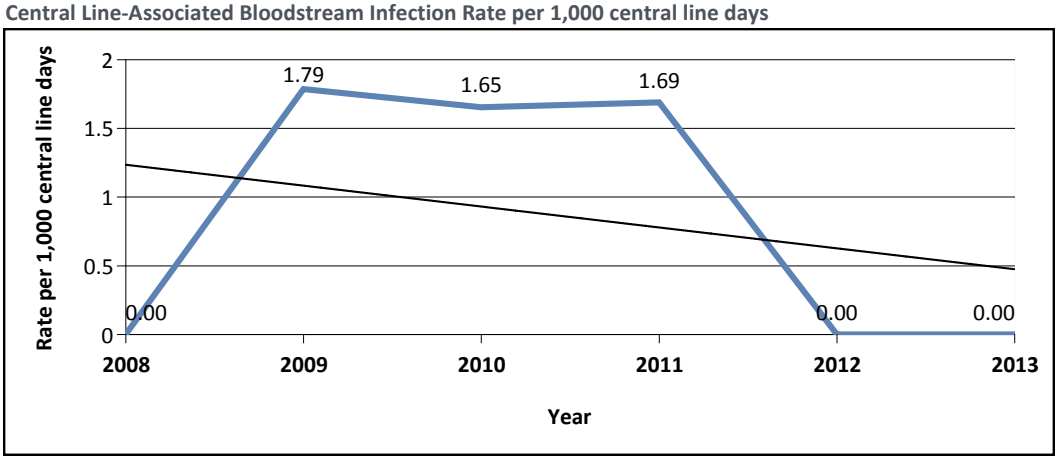
CHARLES COLE MEMORIAL HOSPITAL

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
2013	0	0.39	0.00	0 - 9.42	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 (2013): 263

Number of reported Healthcare-Associated Infections:

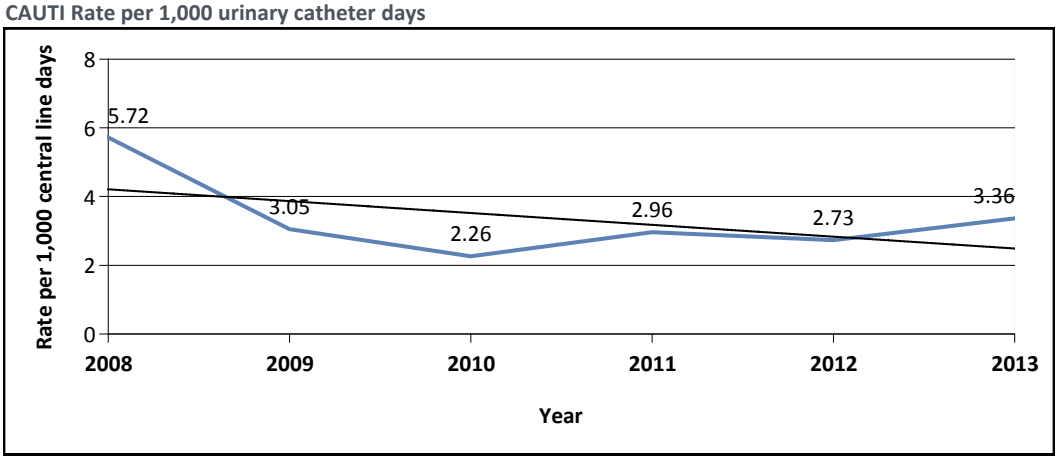
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	29,447	6	4	10	4	7	1	9	6	45	0	3.12
2009	65,525	9	4	19	6	13	7	36	14	56	1	2.52
2010	58,559	8	4	20	9	17	4	20	7	41	3	2.27
2011	59,845	10	4	33	6	14	2	30	10	46	1	2.61
2012	58,920	16	2	32	3	9	5	42	2	38	0	2.53
2013	56,624	14	2	26	7	27	4	37	6	50	1	3.07

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
2013	25	11.24	2.22	1.44 - 3.28	Worse

CAUTI Rate per 1,000 urinary catheter days



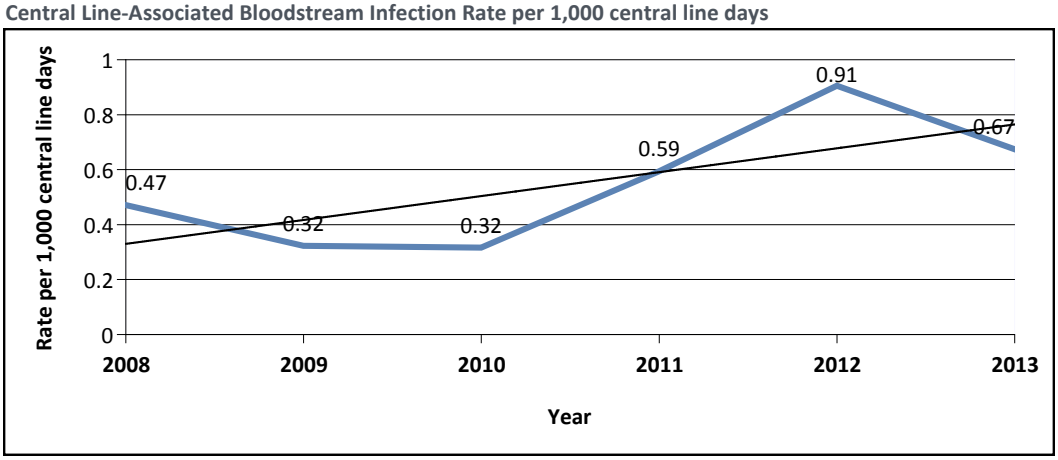
CHESTER COUNTY HOSPITAL

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
2013	6	5.99	1.00	0.37 - 2.18	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
2013	0	0.44	0.00	0 - 8.26	Same as

CHESTNUT HILL HOSPITAL

NHSN ID: 12304

Hospital type: Acute care general hospital

Number of licensed beds (2013): 130

Number of reported Healthcare-Associated Infections:

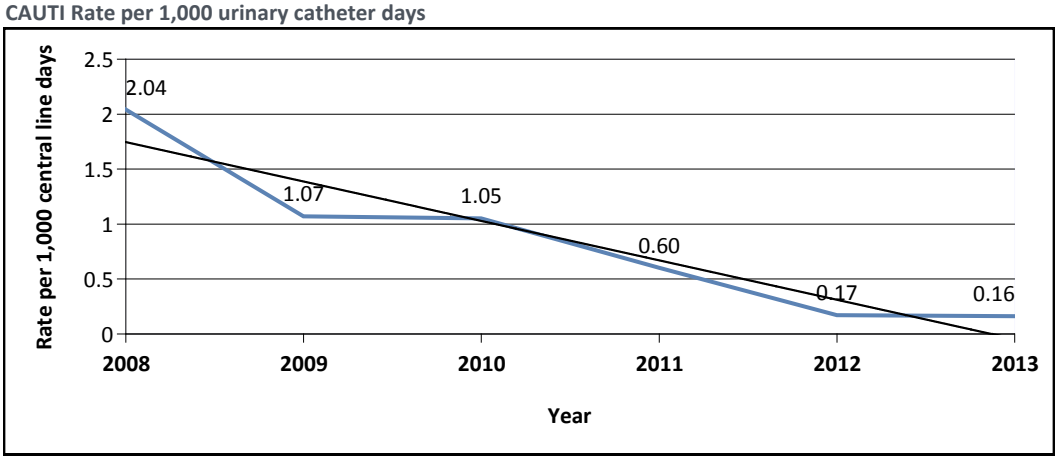
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	15,170	4	0	8	1	7	0	3	0	8	0	2.04
2009	29,924	0	0	3	0	6	0	8	0	10	0	0.90
2010	27,053	3	0	1	0	3	0	10	0	7	0	0.89
2011	27,803	1	0	6	0	0	0	13	3	4	0	0.97
2012	26,818	5	0	1	0	1	0	7	0	1	0	0.56
2013	27,547	3	0	0	0	0	0	9	0	2	0	0.51

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
2013	1	13.56	0.07	0 - 0.41	Better

CAUTI Rate per 1,000 urinary catheter days



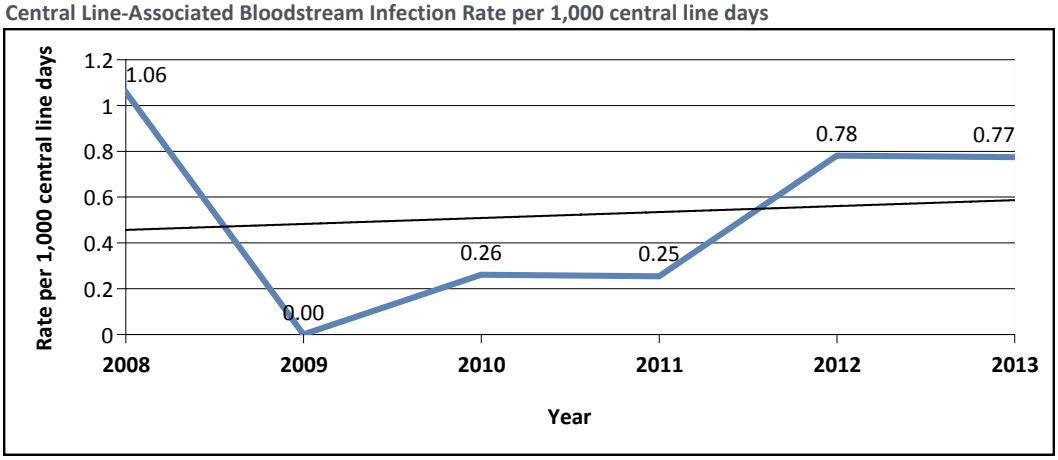
CHESTNUT HILL HOSPITAL

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
2013	3	3.13	0.96	0.19 - 2.8	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	0.09	0.00	0 - 41.93	Same as
2009				-	
2010				-	
2011				-	
2012				-	
2013				-	

CHILDRENS HOME OF PITTSBURGH, THE

NHSN ID: 12336

Hospital type: Children's Hospital

Number of licensed beds (2013): 16

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
2013	5,881	5	3	1	4	0	0	0	0	2	0	2.55

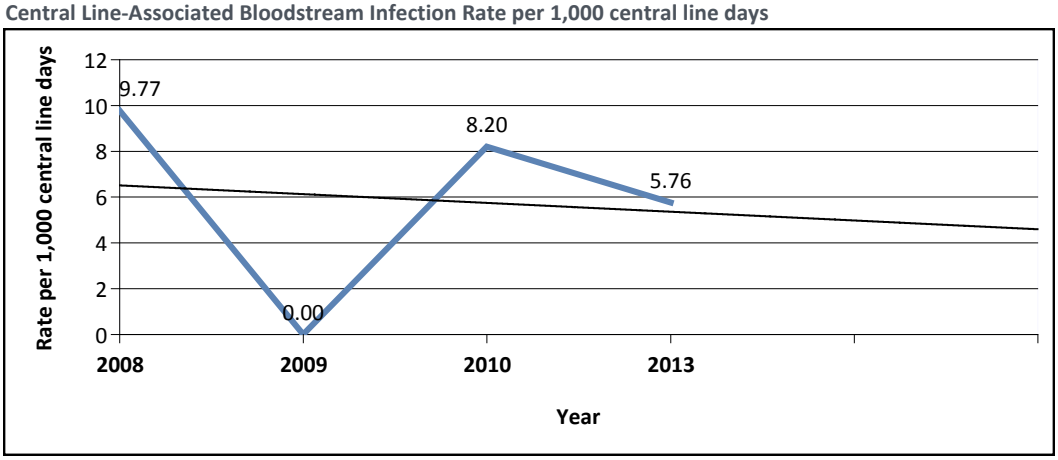
CHILDRENS HOME OF PITTSBURGH, THE

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				-	
2013	2	0.23	8.58	0.96 - 30.96	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				-	
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
2013	3	0.46	6.55	1.32 - 19.14	Worse

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				-	
2013				-	

CHILDRENS HOSPITAL OF PHILADELPHIA

NHSN ID: 10306

Hospital type: Children's Hospital

Number of licensed beds (2013): 535

Number of reported Healthcare-Associated Infections:

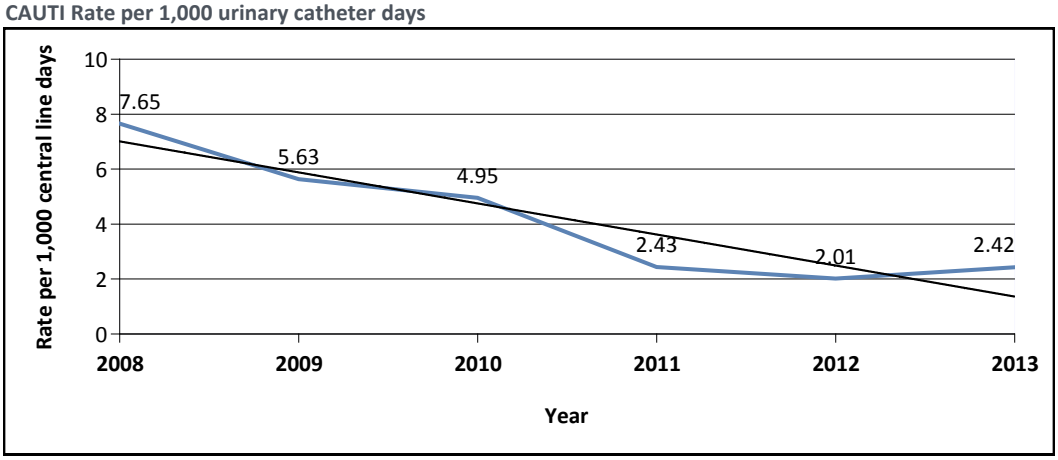
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	62,287	101	0	0	0	5	0	7	0	36	0	2.39
2009	130,369	154	0	0	0	13	0	16	0	77	0	1.99
2010	137,053	98	24	22	9	19	1	75	22	61	9	2.48
2011	150,455	97	78	73	50	24	1	68	43	45	17	3.30
2012	154,870	103	78	77	71	20	1	73	32	70	10	3.45
2013	158,179	100	93	114	87	17	5	48	55	91	16	3.96

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
2013	17	14.24	1.19	0.7 - 1.91	Same as

CAUTI Rate per 1,000 urinary catheter days



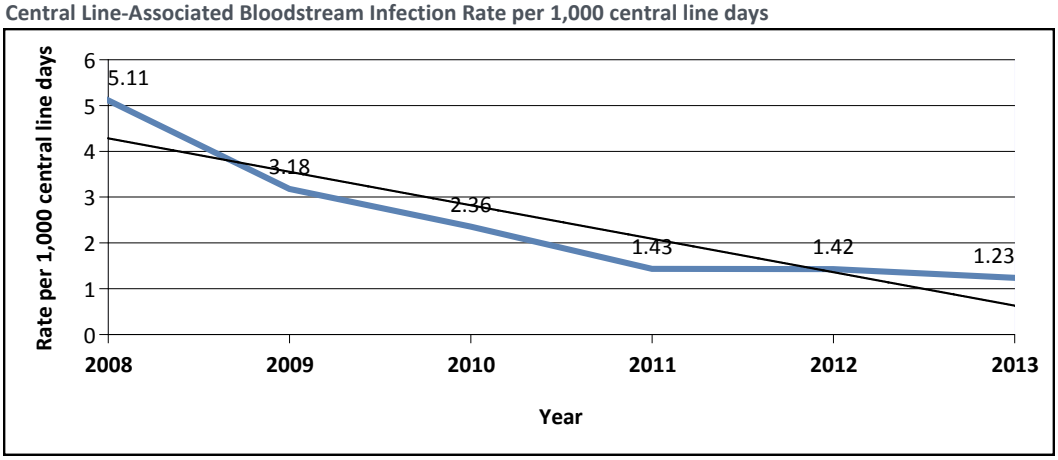
CHILDRENS HOSPITAL OF PHILADELPHIA

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
2013	34	22.27	1.53	1.06 - 2.13	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
2013	13	12.38	1.05	0.56 - 1.8	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
2013	41	21.47	1.91	1.37 - 2.59	Worse

CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC

NHSN ID: 11640

Hospital type: Children's Hospital

Number of licensed beds (2013): 304

Number of reported Healthcare-Associated Infections:

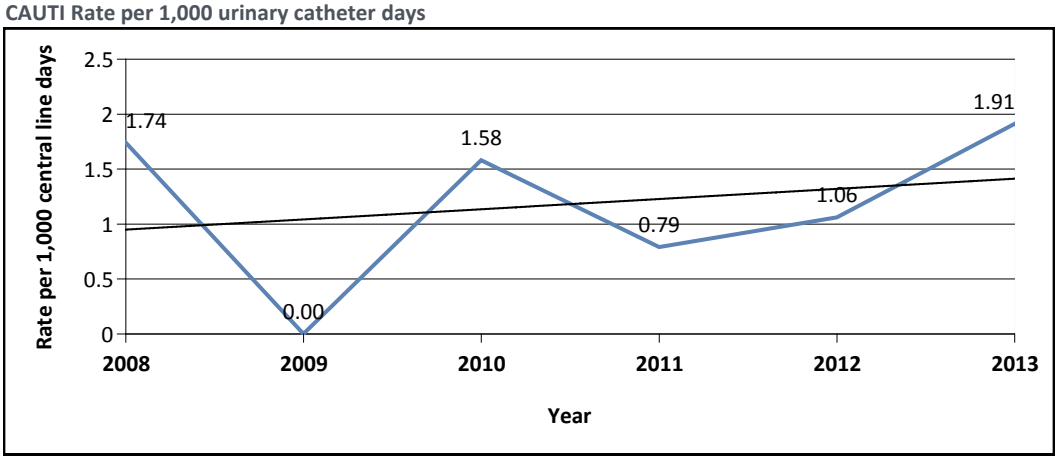
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	31,932	29	0	14	6	8	0	12	0	6	1	2.38
2009	75,521	71	5	16	6	9	0	26	3	8	11	2.05
2010	79,661	75	6	9	14	7	0	16	11	20	8	2.08
2011	84,133	62	7	26	26	11	0	40	8	11	5	2.33
2012	84,386	53	7	34	7	3	0	54	6	11	6	2.14
2013	86,033	78	7	11	20	5	0	44	6	35	4	2.44

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
2013	16	17.31	0.92	0.53 - 1.5	Same as

CAUTI Rate per 1,000 urinary catheter days



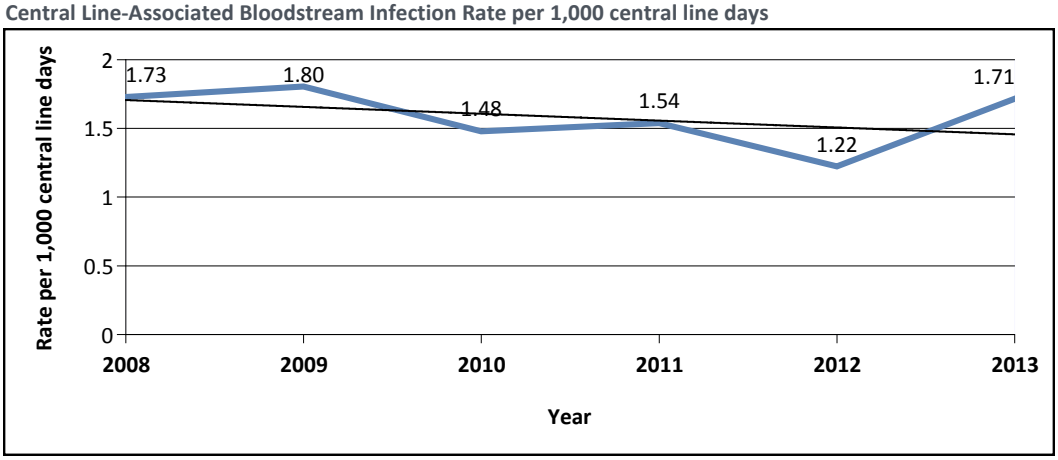
CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC

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
2013	38	17.89	2.12	1.5 - 2.92	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	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
2013	4	5.05	0.79	0.21 - 2.03	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
2013	31	17.09	1.81	1.23 - 2.57	Worse

CHILDRENS INSTITUTE OF PITTSBURGH

NHSN ID: 12266

Hospital type: Children's Hospital

Number of licensed beds (2013): 62

Number of reported Healthcare-Associated Infections:

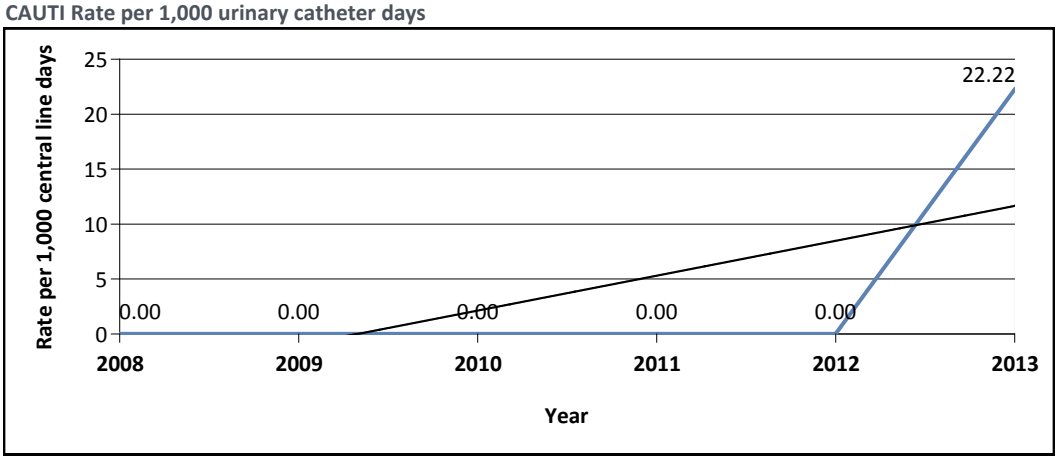
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	9,523	1	0	1	0	0	0	0	0	0	0	0.21
2009	11,882	2	0	0	0	1	0	0	0	0	1	0.34
2010	9,990	6	0	0	0	1	0	0	0	0	0	0.70
2011	7,631	1	0	0	0	0	0	0	4	0	0	0.66
2012	11,368	2	0	0	0	0	0	0	1	0	0	0.26
2013	10,332	0	0	0	2	0	0	0	2	1	0	0.48

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
2013	1	0.06	15.86	0.21 - 88.25	Same as

CAUTI Rate per 1,000 urinary catheter days



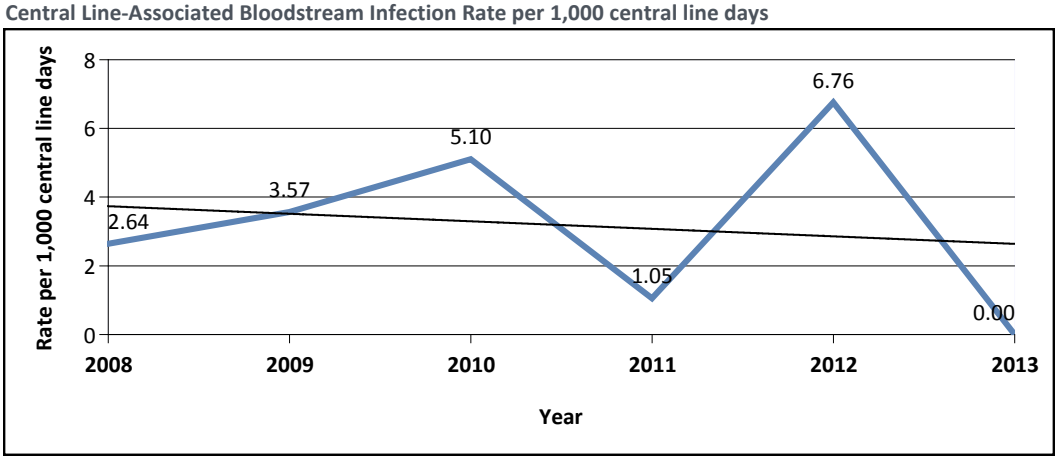
CHILDRENS INSTITUTE OF PITTSBURGH

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
2013	0	0.32	0.00	0 - 11.32	Same as

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 (2013): 82

Number of reported Healthcare-Associated Infections:

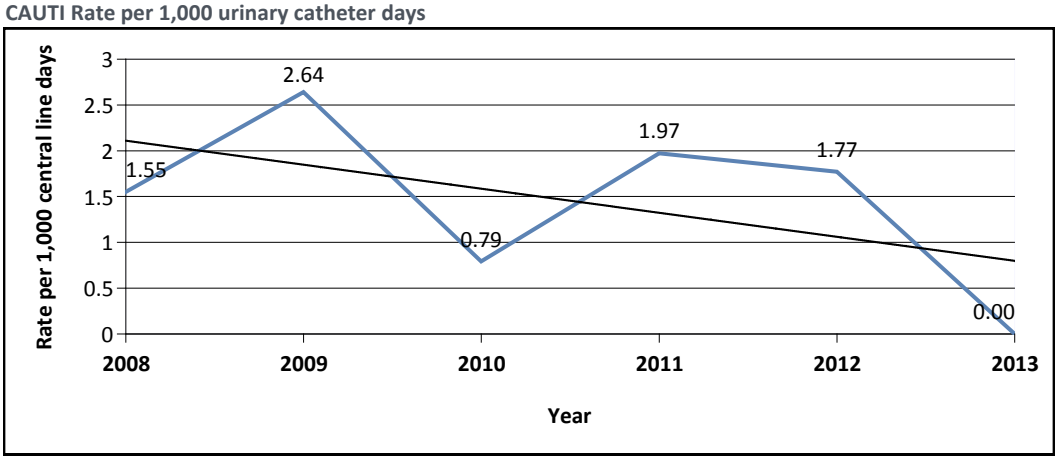
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	5,649	1	0	0	0	2	0	1	0	2	0	1.06
2009	11,584	0	0	6	0	5	2	5	2	11	0	2.68
2010	11,420	1	0	4	0	3	0	9	2	10	1	2.63
2011	10,903	0	0	4	0	6	0	11	2	12	0	3.21
2012	10,706	1	1	5	0	6	0	7	1	5	1	2.52
2013	10,020	1	0	4	1	5	0	8	1	5	0	2.50

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
2013	0	3.25	0.00	0 - 1.13	Same as

CAUTI Rate per 1,000 urinary catheter days



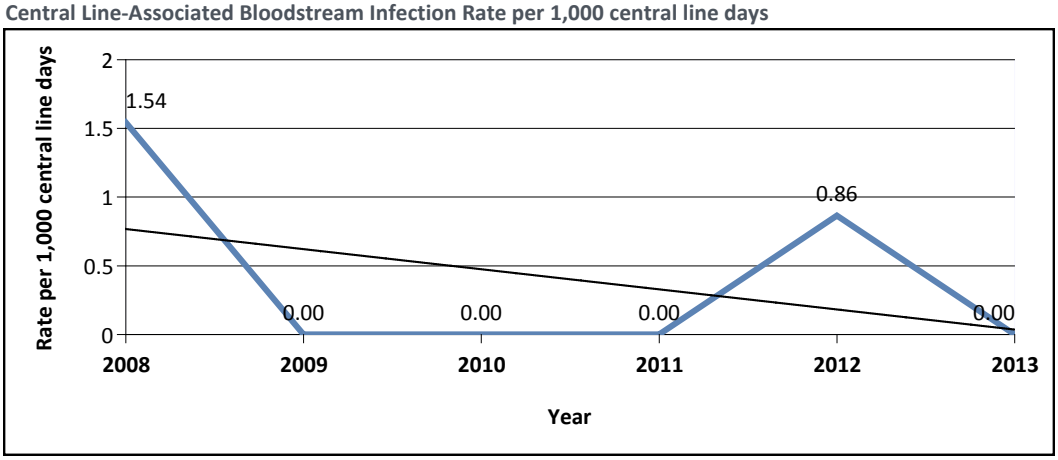
CLARION HOSPITAL

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
2013	0	1.15	0.00	0 - 3.18	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 (2013): 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
2013	21,070	0	12	0	0	0	0	0	3	5	0	0.95

CLARKS SUMMIT STATE HOSPITAL

NHSN ID: 12051

Hospital type: Psychiatric hospital

Number of licensed beds (2013): 222

Number of reported Healthcare-Associated Infections:

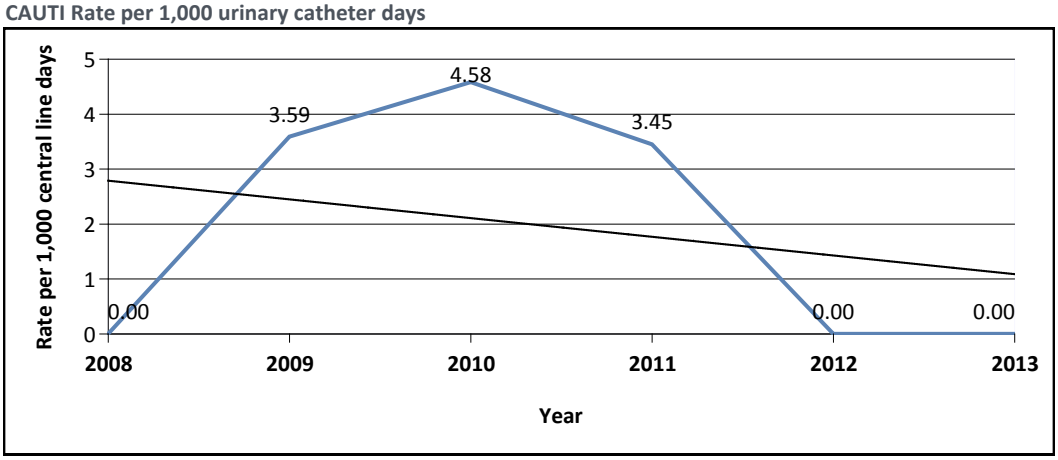
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	40,766	0	5	0	0	0	1	0	1	4	0	0.27
2009	79,660	0	21	0	0	0	0	0	2	14	0	0.46
2010	76,460	1	7	0	0	0	0	0	0	25	1	0.44
2011	67,128	0	12	0	0	0	0	0	1	17	0	0.45
2012	78,564	0	13	0	1	0	0	0	2	6	0	0.28
2013	25,141	0	5	0	0	0	0	0	1	5	0	0.44

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
2013	0	0.18	0.00	0 - 20.06	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 (2013): 96

Number of reported Healthcare-Associated Infections:

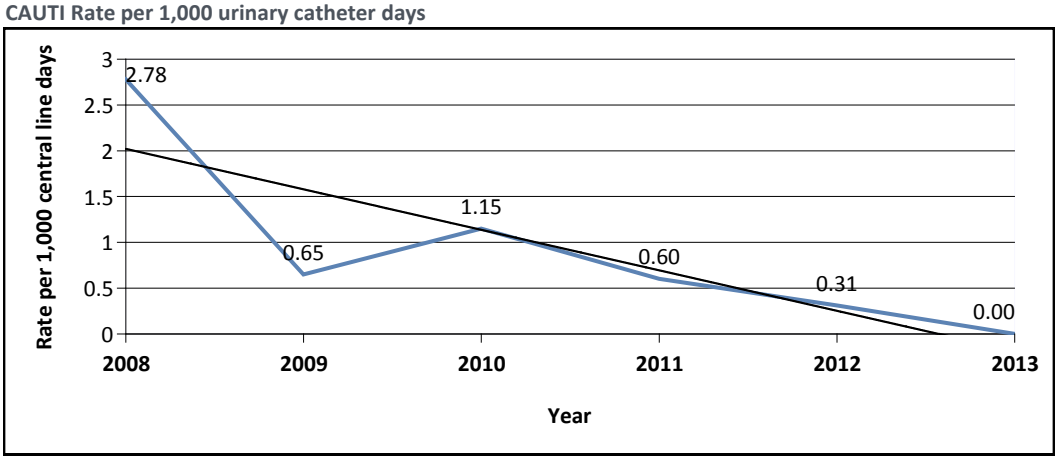
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	10,158	0	0	0	0	1	0	5	0	6	0	1.18
2009	20,585	1	0	3	0	1	0	13	0	4	0	1.07
2010	19,573	1	0	1	0	1	0	9	0	6	0	0.92
2011	16,613	0	0	0	0	0	0	5	0	2	0	0.42
2012	15,717	3	0	0	0	0	0	4	0	1	1	0.57
2013	13,640	0	0	6	0	0	0	2	0	0	0	0.59

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
2013	0	4.09	0.00	0 - 0.9	Better

CAUTI Rate per 1,000 urinary catheter days



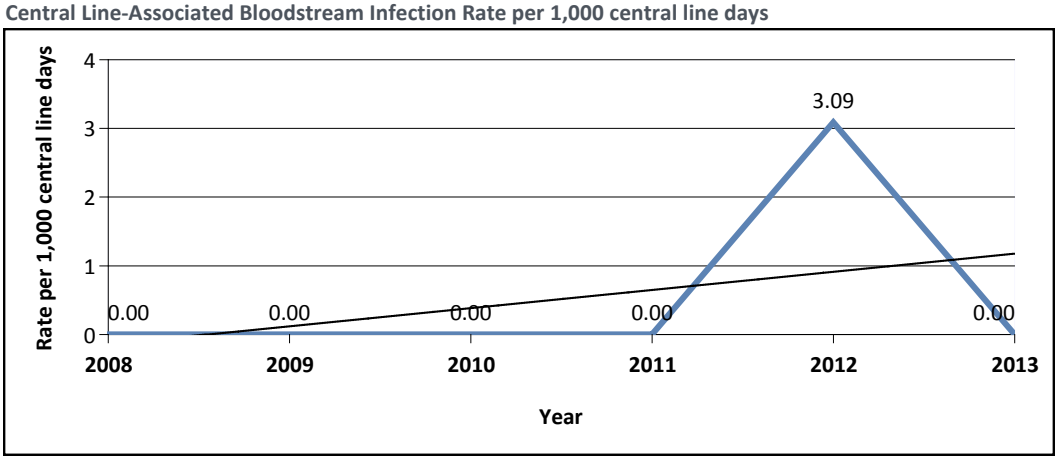
CLEARFIELD HOSPITAL

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
2013	0	0.46	0.00	0 - 8.03	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 (2013): 470

Number of reported Healthcare-Associated Infections:

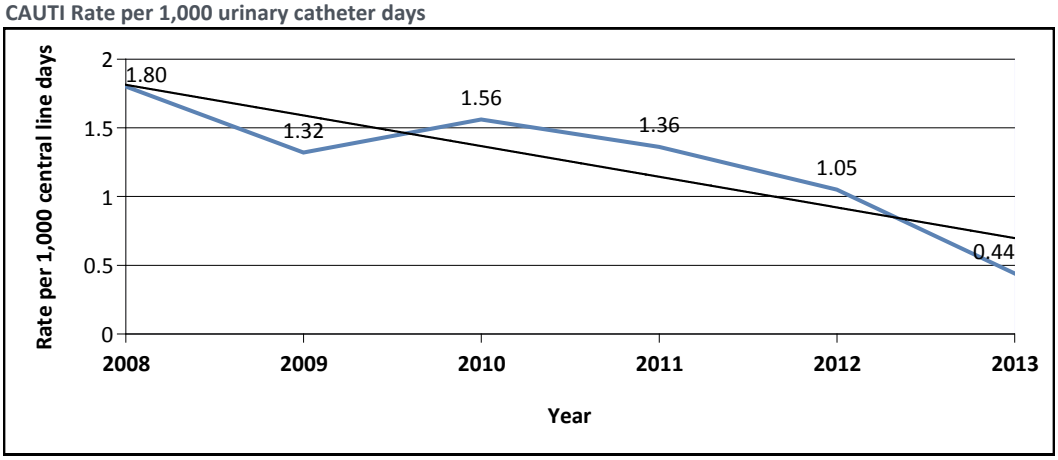
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	61,738	32	2	37	14	2	0	34	2	29	4	2.53
2009	136,354	75	1	73	40	2	0	55	2	52	3	2.22
2010	133,148	69	3	64	45	7	0	55	0	70	1	2.36
2011	121,737	73	2	62	52	5	0	69	2	62	3	2.71
2012	120,230	59	3	70	20	2	0	63	2	40	1	2.16
2013	115,796	42	4	62	9	4	0	70	7	25	2	1.94

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
2013	12	57.33	0.21	0.11 - 0.37	Better

CAUTI Rate per 1,000 urinary catheter days



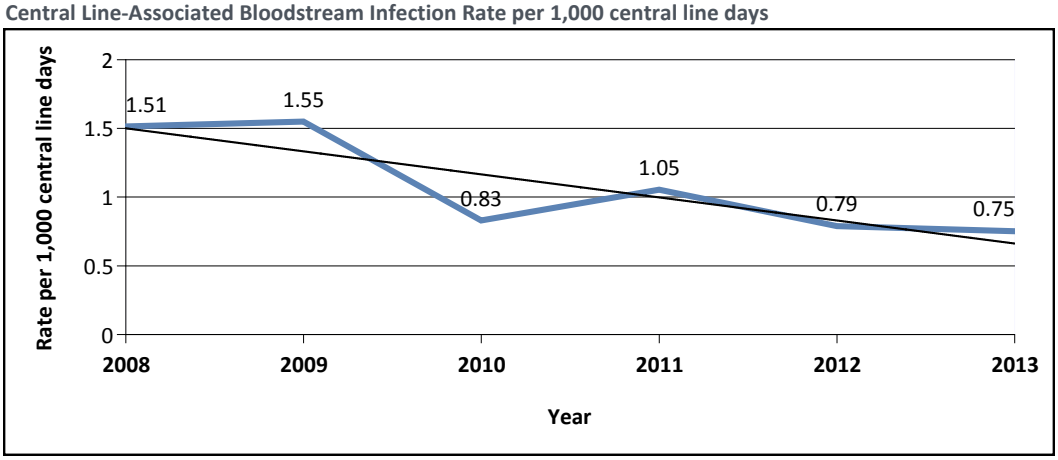
CONEMAUGH VALLEY MEMORIAL HOSPITAL

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
2013	10	10.76	0.93	0.44 - 1.71	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
2013	1	0.77	1.30	0.02 - 7.24	Same as

COORDINATED HEALTH ORTHOPEDIC HOSPITAL, LLC

NHSN ID: 11872

Hospital type: Acute care general hospital

Number of licensed beds (2013): 20

Number of reported Healthcare-Associated Infections:

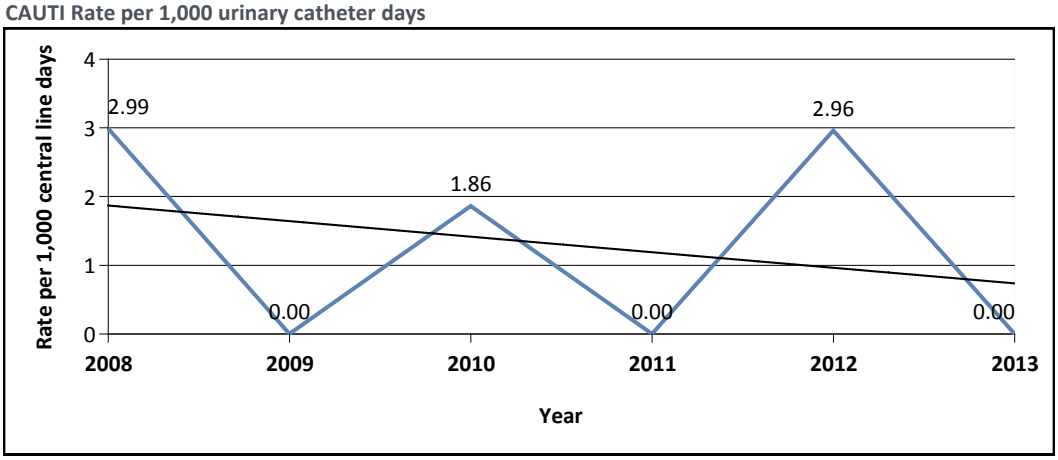
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	844	0	0	0	0	0	0	4	0	1	0	5.92
2009	4,684	0	0	0	0	0	0	7	0	0	0	1.49
2010	2,994	0	0	0	0	0	0	7	0	2	0	3.01
2011	3,107	0	0	0	0	1	0	9	0	0	0	3.22
2012	3,085	0	0	0	0	1	0	2	0	4	0	2.27
2013	3,112	0	0	1	0	0	0	4	0	0	0	1.61

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
2013	0	1.62	0.00	0 - 2.26	Same as

CAUTI Rate per 1,000 urinary catheter days



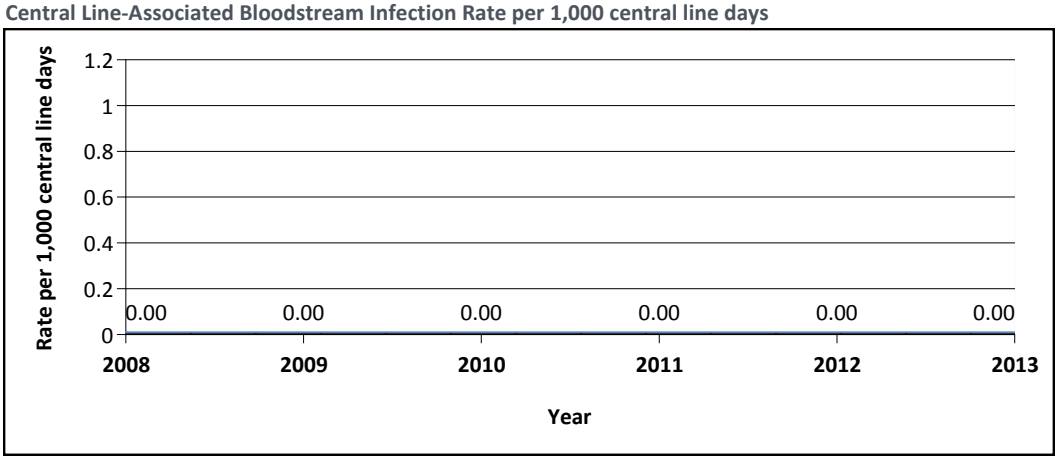
COORDINATED HEALTH ORTHOPEDIC HOSPITAL, LLC

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
2013	0	0.08	0.00	0 - 43.9	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 (2013): 20

Number of reported Healthcare-Associated Infections:

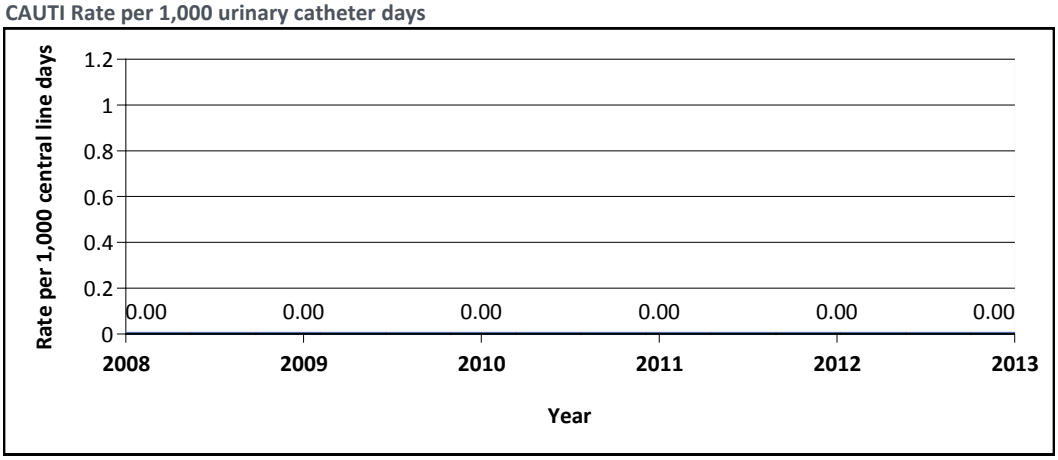
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	2,619	0	0	0	0	1	0	0	0	0	0	0.38
2009	5,769	0	0	1	0	1	0	0	0	0	0	0.35
2010	5,177	0	0	1	0	1	0	1	1	3	0	1.35
2011	5,107	0	0	0	0	0	0	1	0	2	0	0.59
2012	3,598	0	0	1	0	1	0	1	0	0	0	0.83
2013	3,136	0	0	0	0	1	0	2	0	1	0	1.28

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
2013	0	0.91	0.00	0 - 4.03	Same as

CAUTI Rate per 1,000 urinary catheter days



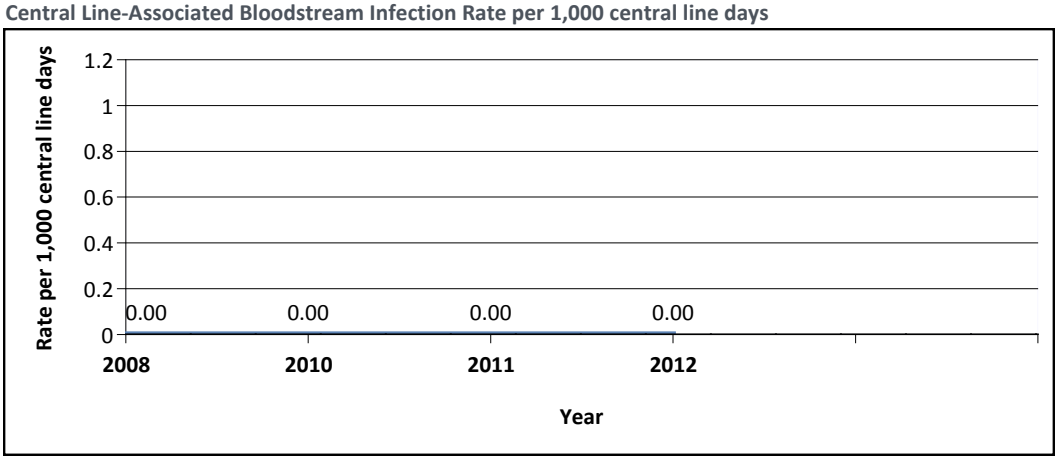
CORRY MEMORIAL HOSPITAL

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
2013				-	

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 (2013): 39

Number of reported Healthcare-Associated Infections:

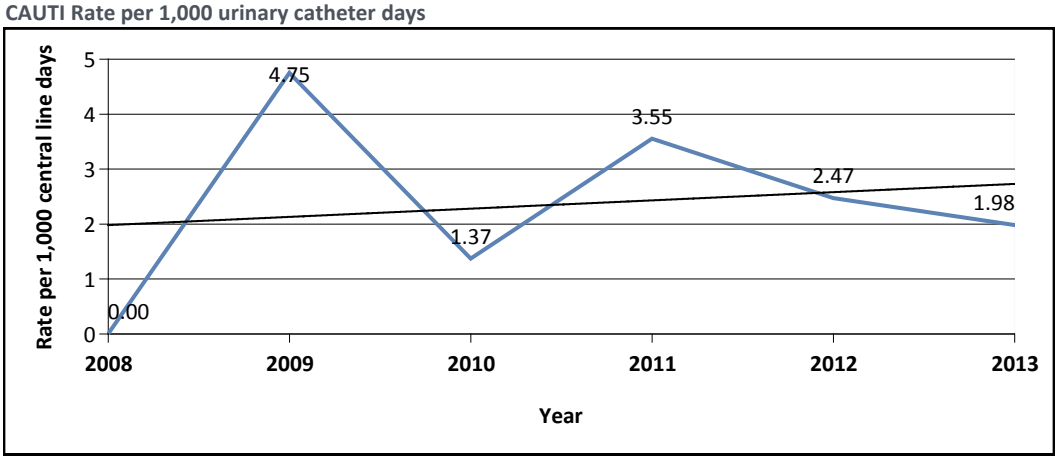
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,709	0	0	1	0	0	0	0	0	2	0	0.64
2009	9,418	0	0	3	1	0	0	0	0	10	0	1.49
2010	9,026	2	0	4	0	0	0	0	0	9	1	1.77
2011	9,740	1	0	2	0	0	0	0	0	7	0	1.03
2012	9,732	0	0	3	0	0	0	0	0	11	0	1.44
2013	10,308	2	0	2	0	0	0	0	0	9	0	1.26

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
2013	2	1.51	1.32	0.15 - 4.77	Same as

CAUTI Rate per 1,000 urinary catheter days



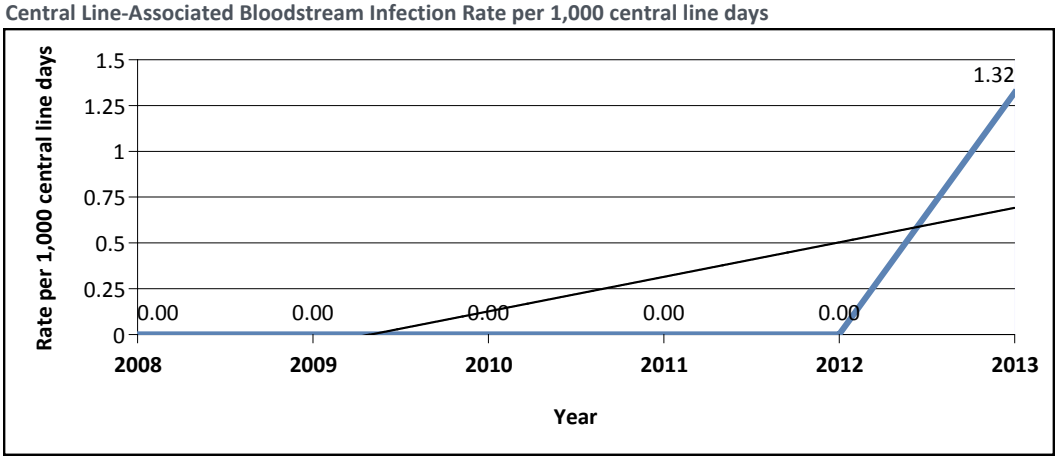
CRICHTON REHABILITATION CENTER

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
2013	1	0.51	1.96	0.03 - 10.91	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 (2013): 350

Number of reported Healthcare-Associated Infections:

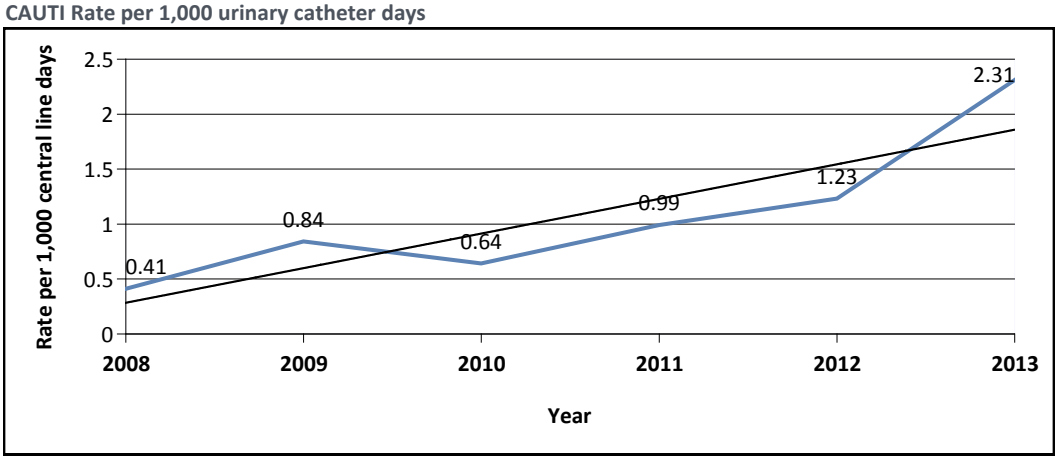
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	50,616	18	0	9	0	7	0	22	3	4	0	1.24
2009	105,374	36	3	27	0	16	0	43	5	23	0	1.45
2010	99,590	31	1	16	1	20	0	30	6	23	1	1.30
2011	88,176	17	2	39	2	20	0	36	1	26	0	1.62
2012	74,144	12	0	31	2	10	1	31	4	23	2	1.56
2013	75,687	29	0	36	0	3	0	35	7	42	0	2.01

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
2013	31	28.07	1.10	0.75 - 1.57	Same as

CAUTI Rate per 1,000 urinary catheter days



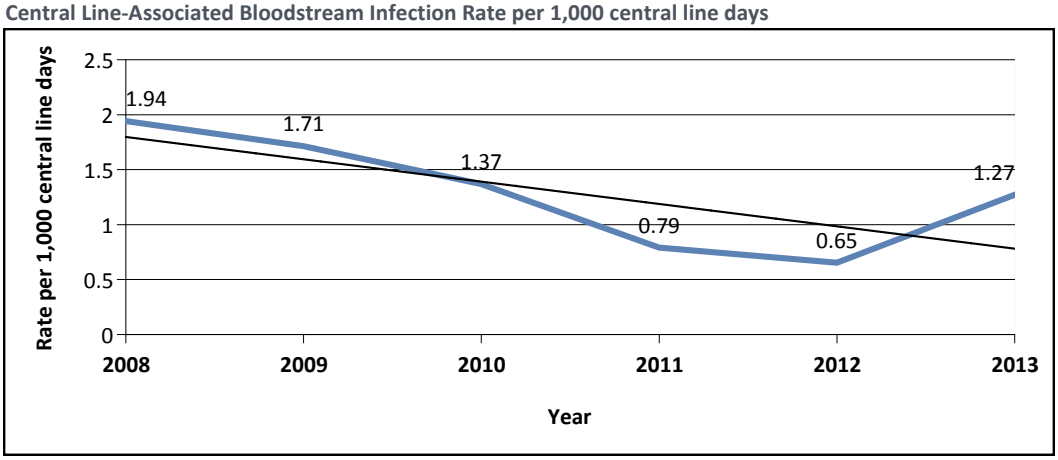
CROZER CHESTER MEDICAL CENTER

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
2013	15	9.55	1.57	0.88 - 2.59	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
2013	1	0.92	1.09	0.01 - 6.04	Same as

CROZER CHESTER MEDICAL CENTER SPRINGFIELD

NHSN ID: 11851

Hospital type: Acute care general hospital

Number of licensed beds (2013): 25

Number of reported Healthcare-Associated Infections:

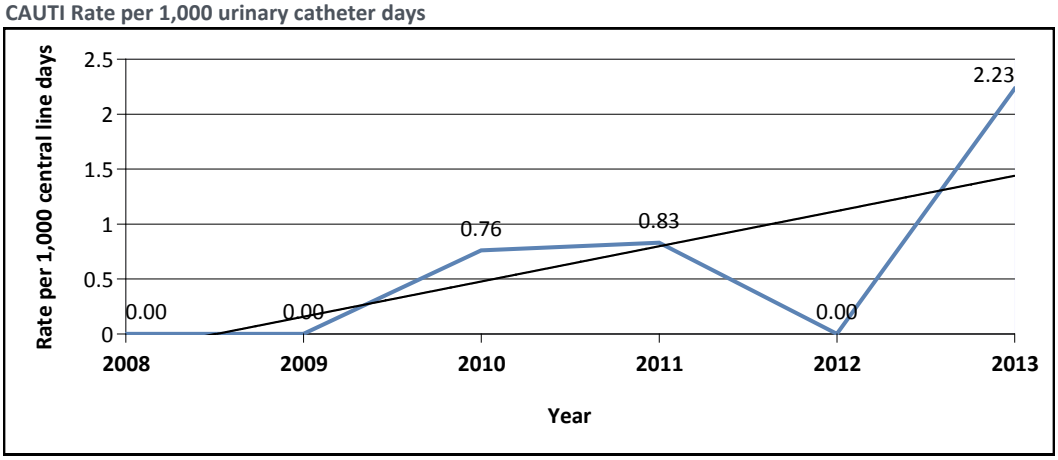
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,340	0	0	1	0	1	0	1	0	0	0	0.90
2009	7,121	1	0	4	0	0	0	1	0	0	0	0.84
2010	6,843	1	0	1	0	0	0	1	0	1	0	0.58
2011	5,467	0	0	2	0	0	0	0	0	1	0	0.55
2012	4,316	0	0	1	0	0	0	2	0	0	0	0.70
2013	4,142	0	0	2	0	0	0	7	0	2	0	2.66

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
2013	2	1.88	1.06	0.12 - 3.84	Same as

CAUTI Rate per 1,000 urinary catheter days



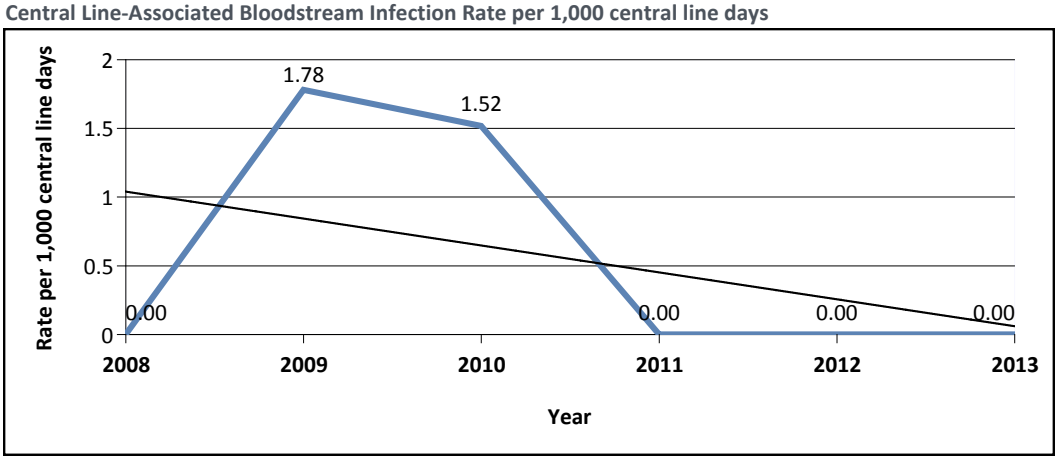
CROZER CHESTER MEDICAL CENTER SPRINGFIELD

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
2013	0	0.28	0.00	0 - 12.88	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 (2013): 105

Number of reported Healthcare-Associated Infections:

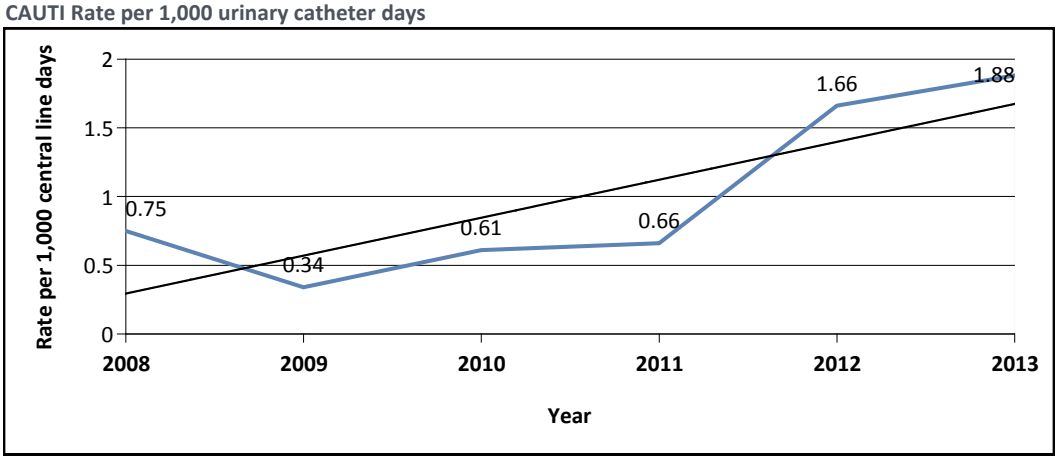
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	20,053	2	0	22	0	1	0	3	1	4	0	1.65
2009	39,941	5	0	18	0	1	0	15	3	6	0	1.20
2010	38,591	9	0	16	0	0	0	9	3	6	0	1.11
2011	35,178	9	0	36	0	2	0	15	2	11	0	2.13
2012	28,514	5	0	18	0	2	0	8	3	13	0	1.72
2013	26,773	9	0	23	0	5	0	2	0	14	0	1.98

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
2013	9	10.01	0.90	0.41 - 1.71	Same as

CAUTI Rate per 1,000 urinary catheter days



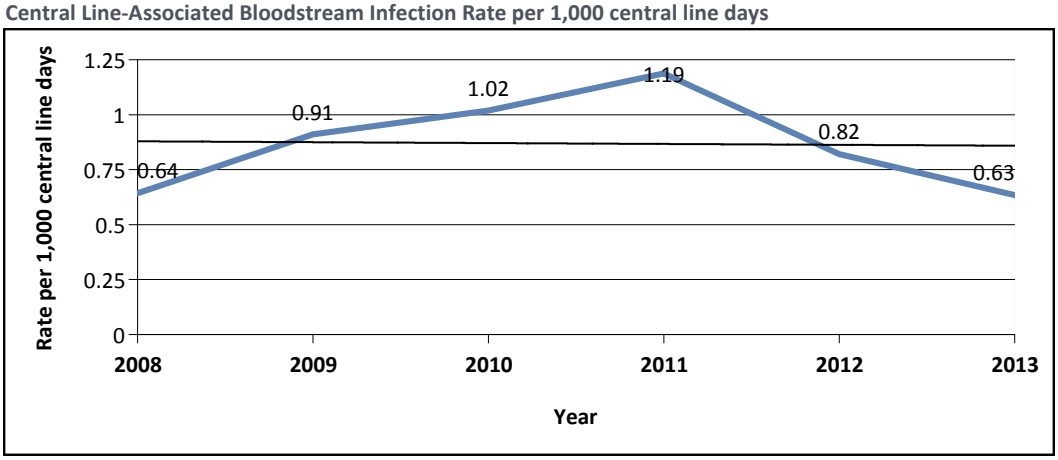
CROZER CHESTER MEDICAL CENTER TAYLOR

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
2013	2	2.55	0.78	0.09 - 2.83	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 (2013): 178

Number of reported Healthcare-Associated Infections:

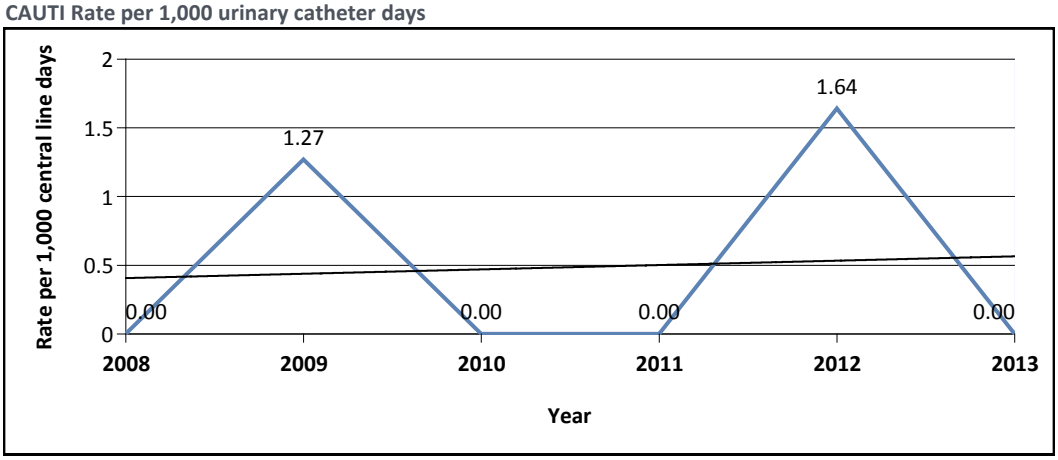
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	28,462	0	5	0	0	1	1	0	5	4	0	0.56
2009	59,652	0	7	3	0	3	0	0	7	8	0	0.47
2010	62,294	0	8	2	0	1	0	0	8	7	1	0.43
2011	60,873	0	11	2	0	1	0	0	15	8	0	0.61
2012	58,459	0	8	3	0	0	0	0	15	10	0	0.62
2013	59,550	0	10	4	1	2	0	0	9	8	0	0.57

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
2013	0	0.26	0.00	0 - 14.03	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 (2013): 208

Number of reported Healthcare-Associated Infections:

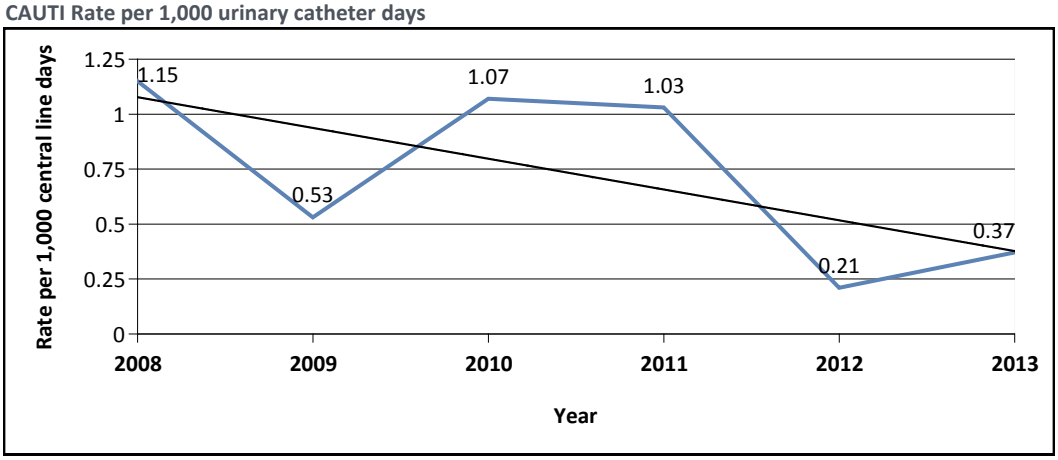
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	29,508	11	1	11	0	4	0	3	1	8	0	1.32
2009	57,618	4	0	16	0	5	0	12	0	9	0	0.80
2010	51,226	5	0	21	0	7	0	11	1	16	0	1.19
2011	48,197	7	0	14	0	4	0	16	2	13	0	1.16
2012	41,967	6	0	0	0	1	0	23	2	5	0	0.88
2013	37,275	7	0	9	0	2	2	9	0	5	1	0.94

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
2013	3	16.80	0.18	0.04 - 0.52	Better

CAUTI Rate per 1,000 urinary catheter days



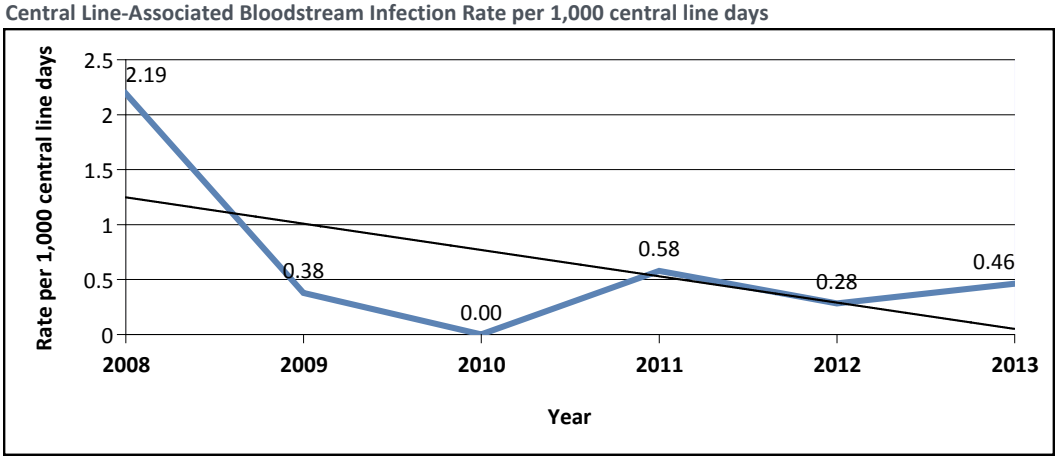
DELAWARE COUNTY MEMORIAL HOSPITAL

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
2013	3	5.27	0.57	0.11 - 1.66	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
2013	0	0.19	0.00	0 - 19.63	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
2013				-	

DEVEREUX CHILDRENS BEHAVIORAL HEALTH INSTITUTE

NHSN ID: 12738

Hospital type: Psychiatric hospital

Number of licensed beds (2013): 49

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
2013	11,522	0	1	0	0	0	0	0	0	1	0	0.17

DIVINE PROVIDENCE HOSPITAL

NHSN ID: 11743

Hospital type: Acute care general hospital

Number of licensed beds (2013): 31

Number of reported Healthcare-Associated Infections:

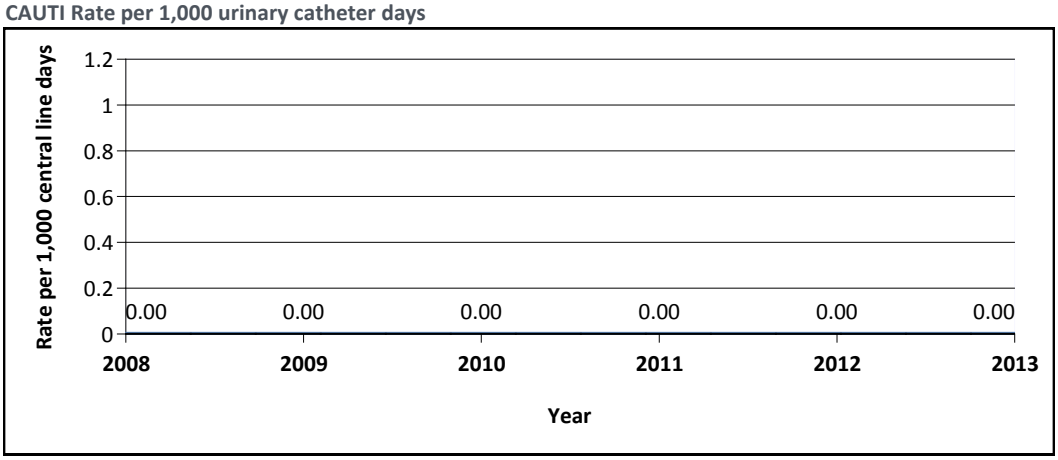
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	2,352	0	0	0	0	0	0	0	1	0	0	0.43
2009	4,431	0	0	1	0	0	0	0	0	1	0	0.45
2010	5,569	0	0	0	0	1	0	0	0	1	0	0.36
2011	6,529	0	1	0	0	0	0	0	1	1	0	0.46
2012	6,986	0	0	0	0	0	1	0	0	1	0	0.29
2013	5,948	0	2	5	0	0	0	0	0	0	0	1.18

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
2013	0	0.09	0.00	0 - 38.86	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 (2013): 237

Number of reported Healthcare-Associated Infections:

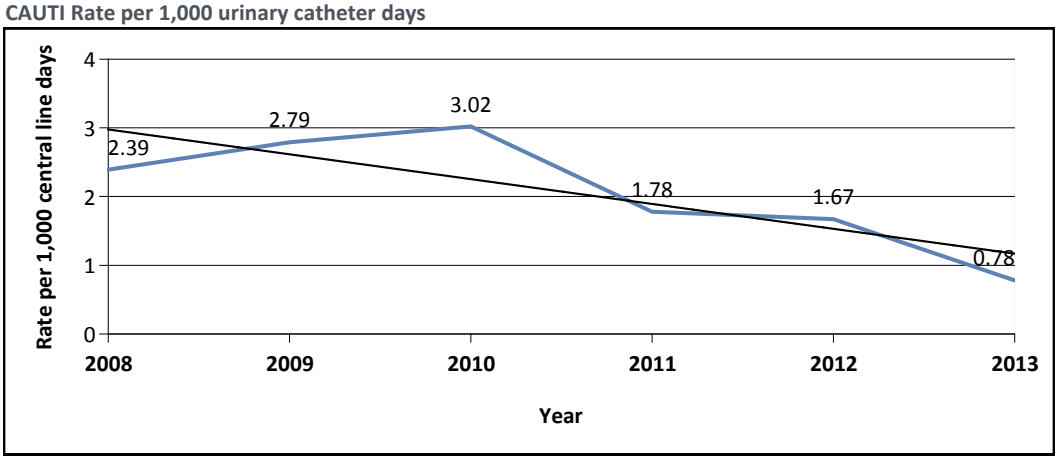
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	25,813	4	2	23	1	12	1	18	2	23	0	3.33
2009	54,593	5	3	33	0	19	0	27	5	43	1	2.49
2010	51,572	4	3	25	2	18	0	31	3	48	0	2.60
2011	53,945	0	3	31	0	15	0	27	0	24	0	1.85
2012	50,723	4	0	32	0	15	1	24	1	29	0	2.09
2013	50,761	4	0	35	1	6	0	32	2	18	2	1.97

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
2013	7	13.66	0.51	0.21 - 1.06	Same as

CAUTI Rate per 1,000 urinary catheter days



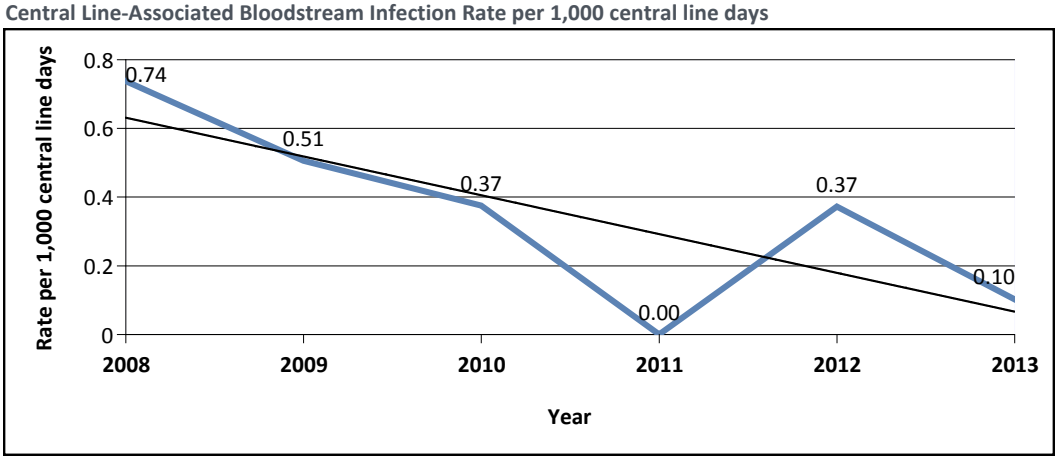
DOYLESTOWN HOSPITAL

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
2013	1	6.60	0.15	0 - 0.84	Better

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 (2013): 219

Number of reported Healthcare-Associated Infections:

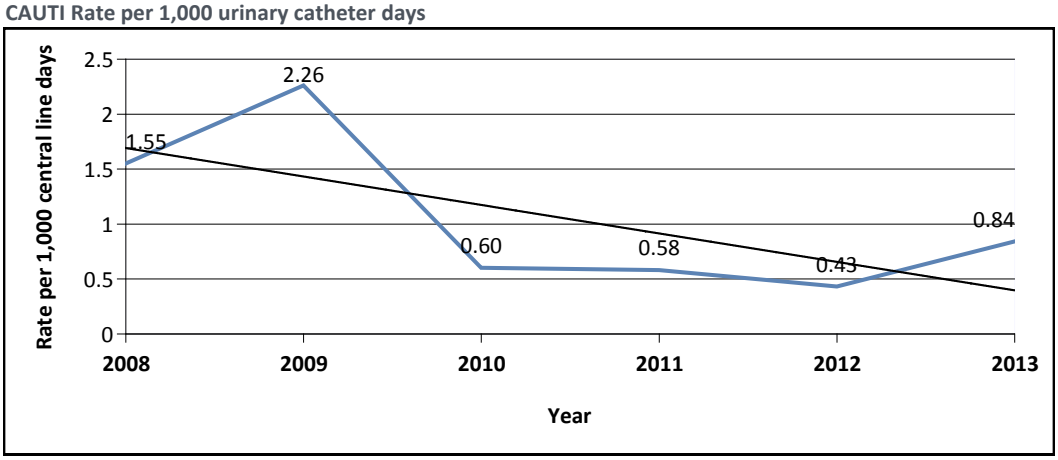
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	18,268	10	0	14	2	9	0	33	1	10	1	4.38
2009	46,698	7	11	31	8	29	0	46	5	29	3	3.62
2010	43,098	4	5	27	2	8	1	19	1	4	1	1.67
2011	41,223	6	4	16	2	8	2	26	3	10	0	1.87
2012	40,601	1	5	5	2	6	1	19	1	7	0	1.16
2013	41,904	1	3	11	3	6	2	24	0	8	0	1.38

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
2013	4	7.19	0.56	0.15 - 1.42	Same as

CAUTI Rate per 1,000 urinary catheter days



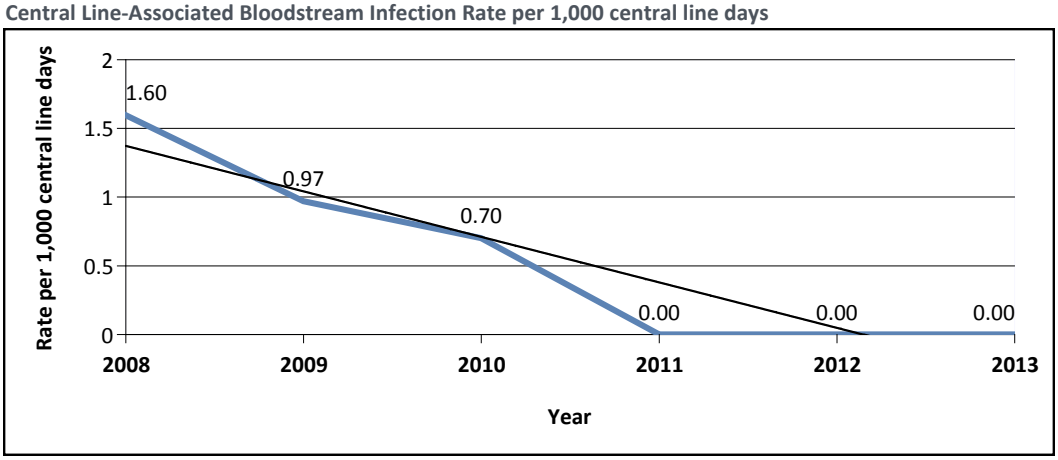
DUBOIS REGIONAL MEDICAL CENTER

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
2013	0	2.49	0.00	0 - 1.47	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	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
2013	0	0.12	0.00	0 - 30.17	Same as

EAGLEVILLE HOSPITAL

NHSN ID: 12965

Hospital type: Rehabilitation hospital

Number of licensed beds (2013): 83

Number of reported Healthcare-Associated Infections:

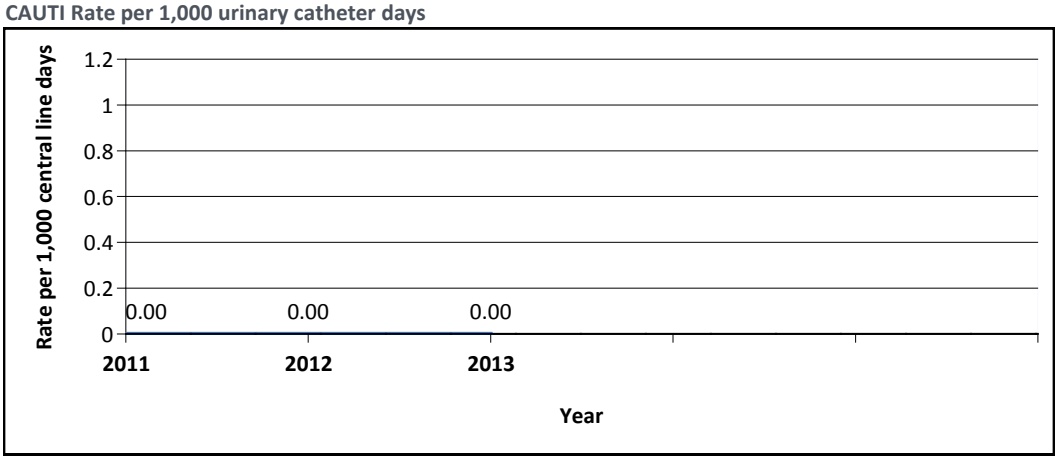
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	7,274	0	0	0	0	0	0	0	0	0	0	0.00
2009	13,134	0	0	0	0	0	0	0	0	0	0	0.00
2010	3,797	0	0	0	0	0	0	0	0	0	0	0.00
2011	6,561	0	0	0	0	0	0	0	0	0	0	0.00
2012	17,781	0	3	2	0	0	0	0	1	0	0	0.34
2013	17,479	0	1	1	0	0	0	0	0	1	0	0.17

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
2013	0	0.10	0.00	0 - 38.6	Same as

CAUTI Rate per 1,000 urinary catheter days



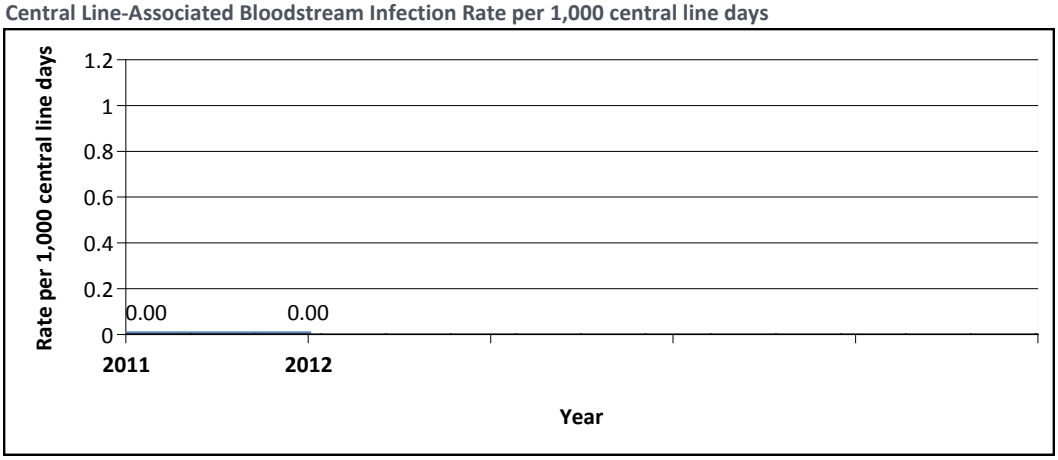
EAGLEVILLE HOSPITAL

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
2013				-	

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 (2013): 74

Number of reported Healthcare-Associated Infections:

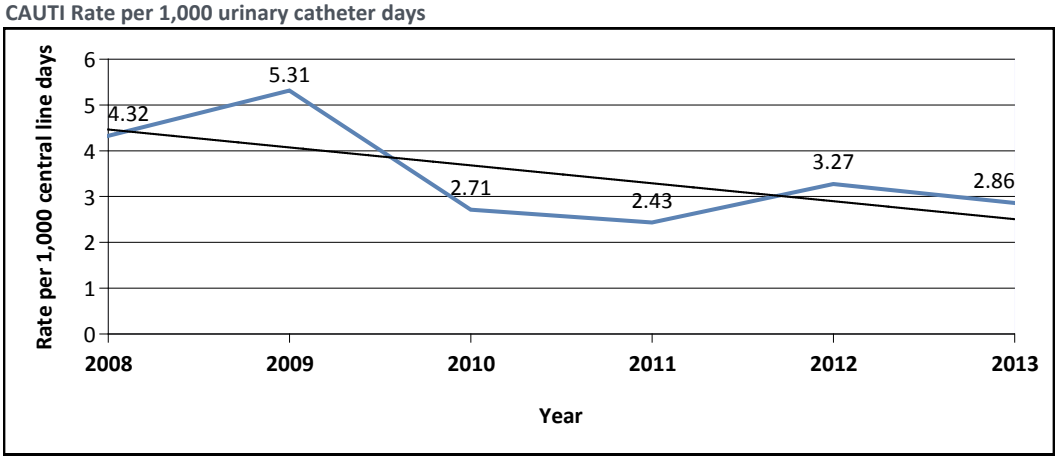
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,987	17	1	4	0	1	0	0	0	8	0	6.22
2009	10,328	51	0	3	5	6	0	5	1	12	1	8.13
2010	11,255	18	1	11	1	19	0	11	6	11	1	7.02
2011	13,007	21	1	26	5	21	0	12	1	16	0	7.92
2012	16,417	45	0	13	1	28	0	34	4	19	0	8.77
2013	15,738	11	2	27	1	27	0	41	4	25	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
2013	8	4.25	1.88	0.81 - 3.71	Same as

CAUTI Rate per 1,000 urinary catheter days



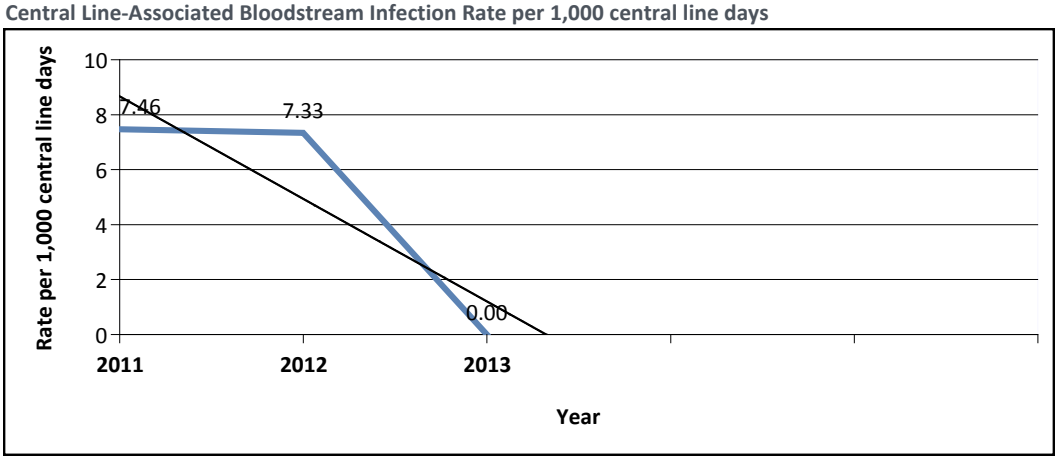
EASTERN REGIONAL MEDICAL CENTER

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
2013	0	1.42	0.00	0 - 2.57	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	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
2013	11	12.51	0.88	0.44 - 1.57	Same as

EASTON HOSPITAL

NHSN ID: 11929

Hospital type: Acute care general hospital

Number of licensed beds (2013): 238

Number of reported Healthcare-Associated Infections:

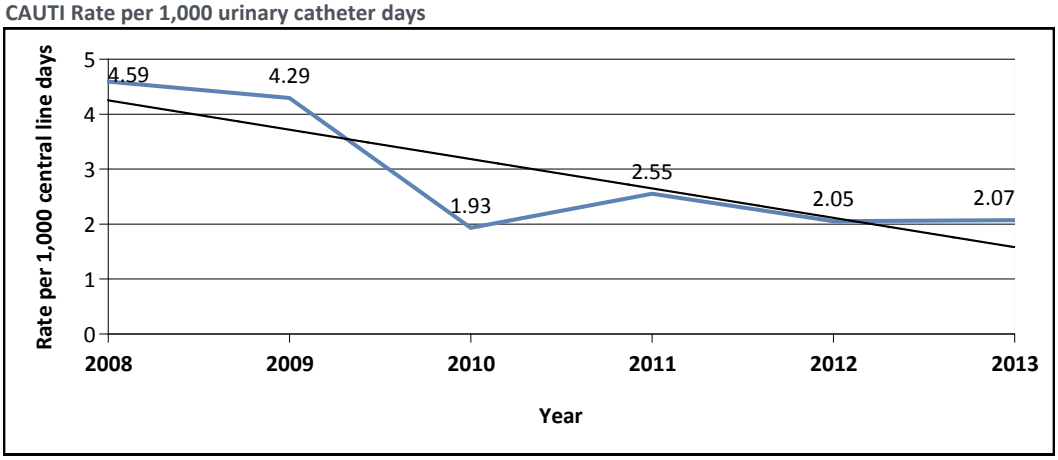
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	24,575	24	0	19	5	8	0	13	2	36	2	4.44
2009	54,492	26	8	18	6	21	2	47	9	63	6	3.78
2010	50,269	28	4	11	7	22	0	50	9	34	7	3.42
2011	48,864	4	3	23	7	19	0	48	7	34	4	3.05
2012	45,205	6	3	16	8	15	1	35	5	29	3	2.68
2013	38,021	9	3	25	6	18	0	23	6	28	1	3.13

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
2013	15	15.18	0.99	0.55 - 1.63	Same as

CAUTI Rate per 1,000 urinary catheter days



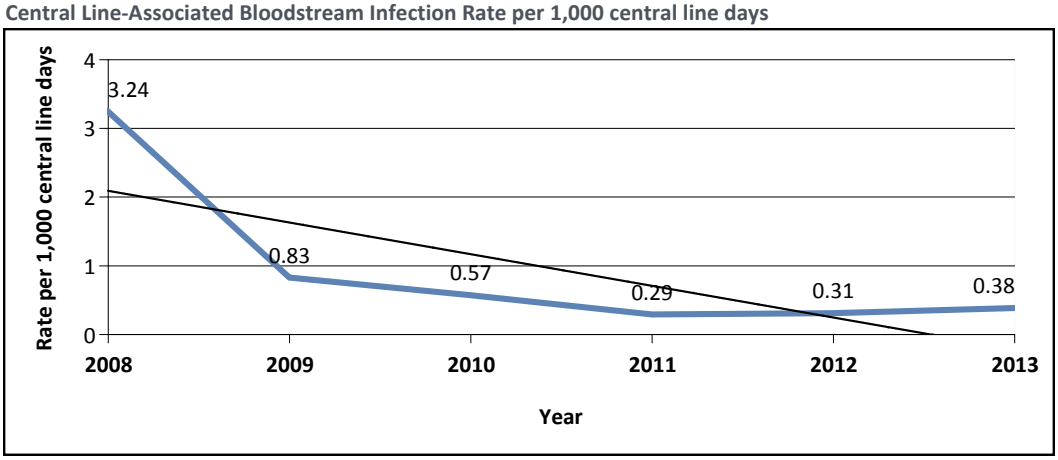
EASTON HOSPITAL

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
2013	2	4.21	0.47	0.05 - 1.71	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
2013	0	0.01	0.00	0 - 638.51	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
2013	2	2.42	0.82	0.09 - 2.98	Same as

EDGEWOOD SURGICAL HOSPITAL

NHSN ID: 12552

Hospital type: Acute care general hospital

Number of licensed beds (2013): 10

Number of reported Healthcare-Associated Infections:

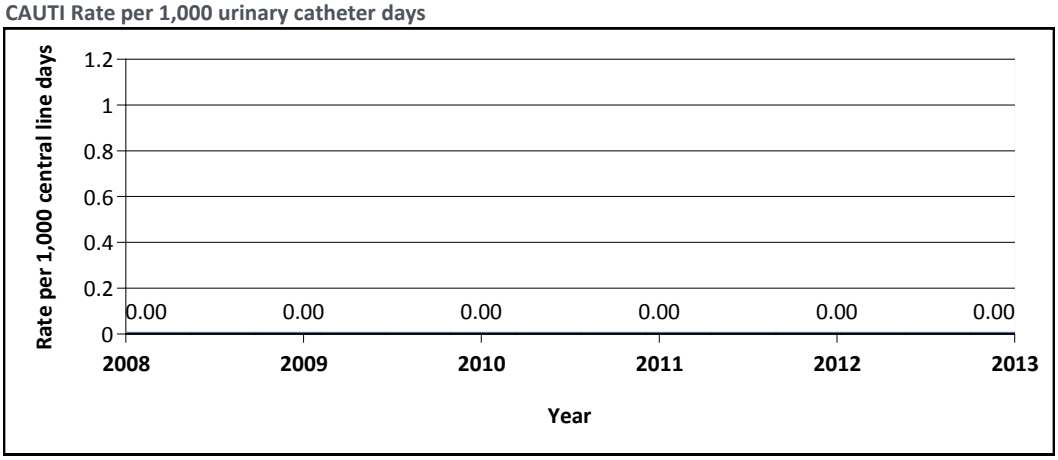
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	181	0	0	0	0	0	0	0	0	0	0	0.00
2009	386	0	0	0	0	0	0	0	0	0	0	0.00
2010	376	0	0	0	0	0	0	0	0	0	0	0.00
2011	373	0	0	0	0	0	0	0	0	0	0	0.00
2012	367	0	0	0	0	0	0	0	0	0	0	0.00
2013	376	0	0	0	0	0	0	0	0	0	0	

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
2013	0	0.05	0.00	0 - 72.01	Same as

CAUTI Rate per 1,000 urinary catheter days



EINSTEIN MEDICAL CENTER MONTGOMERY

NHSN ID: 30210

Hospital type:

Number of licensed beds (2013): 146

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												
2013	39,969	5	0	17	1	0	0	16	2	12	0	1.33

ELK REGIONAL HEALTH CENTER

NHSN ID: 11859

Hospital type: Acute care general hospital

Number of licensed beds (2013): 75

Number of reported Healthcare-Associated Infections:

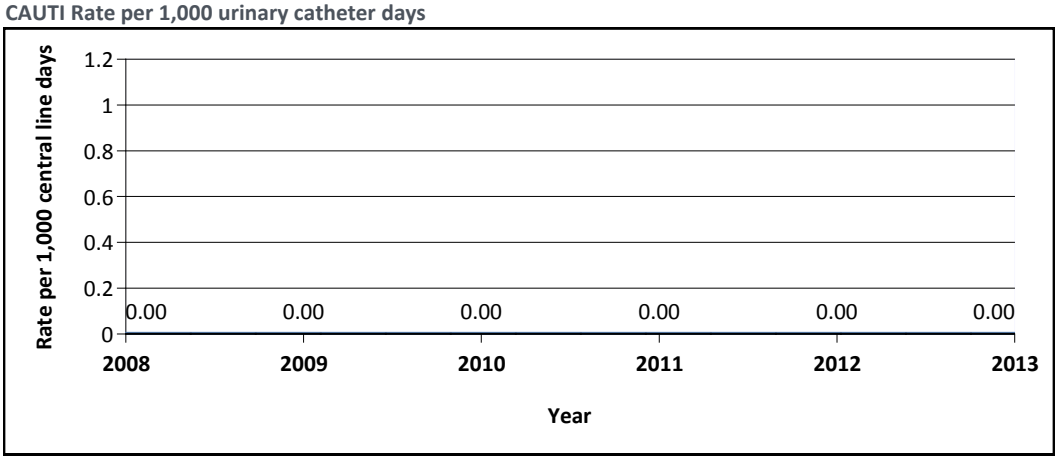
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	6,538	0	0	1	1	3	0	0	3	3	0	1.68
2009	14,263	0	4	10	0	2	1	3	0	0	0	1.40
2010	15,030	0	1	14	0	7	0	7	8	3	0	2.66
2011	14,320	0	6	6	0	0	0	6	7	1	1	1.89
2012	14,143	0	0	10	0	3	0	9	2	3	0	1.91
2013	13,699	0	0	5	0	2	0	6	0	2	0	1.09

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
2013	0	3.60	0.00	0 - 1.02	Same as

CAUTI Rate per 1,000 urinary catheter days



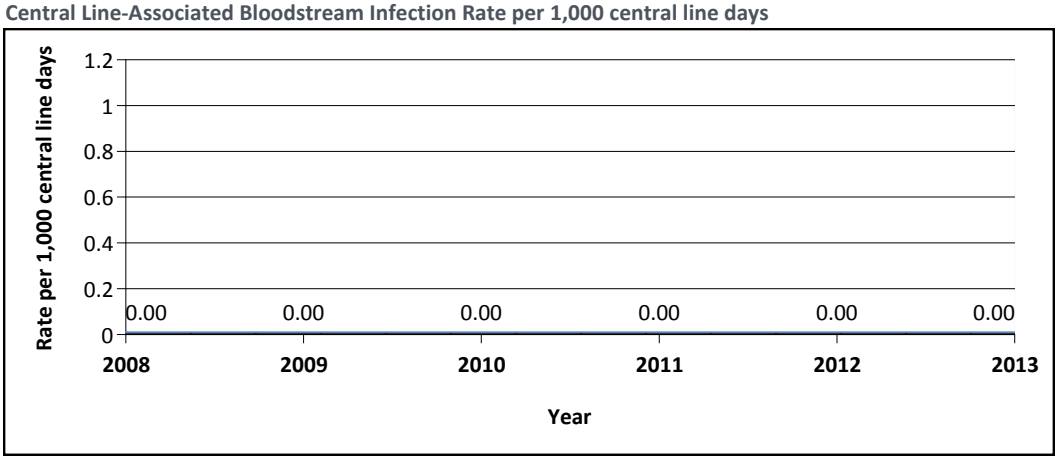
ELK REGIONAL HEALTH CENTER

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
2013	0	0.44	0.00	0 - 8.39	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 (2013): 70

Number of reported Healthcare-Associated Infections:

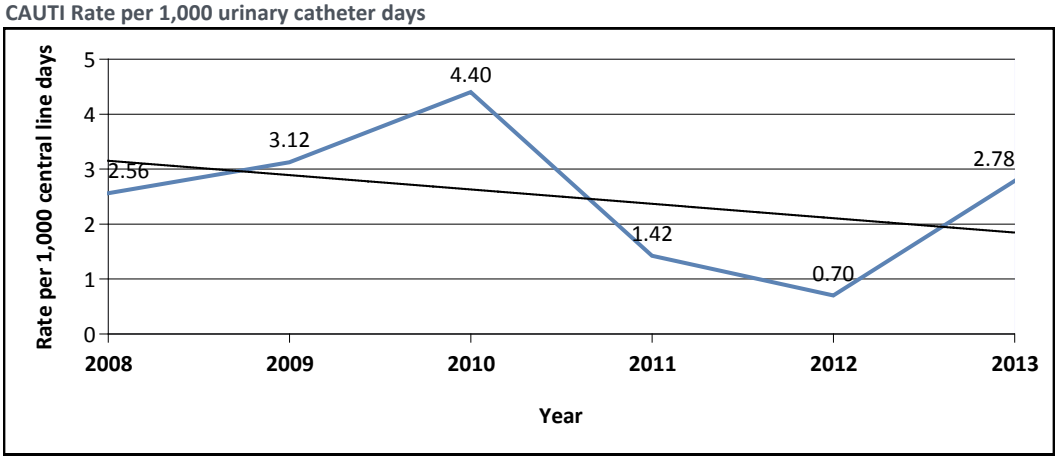
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	5,643	1	0	5	0	0	0	0	0	5	0	1.95
2009	11,930	0	0	5	0	4	0	10	2	8	0	2.43
2010	11,683	0	0	1	0	9	0	0	2	11	0	1.97
2011	11,686	0	0	1	0	5	0	1	0	7	0	1.20
2012	9,518	0	1	2	0	7	0	4	1	2	0	1.79
2013	11,605	2	3	4	0	4	0	4	2	9	0	2.41

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
2013	4	2.17	1.84	0.5 - 4.72	Same as

CAUTI Rate per 1,000 urinary catheter days



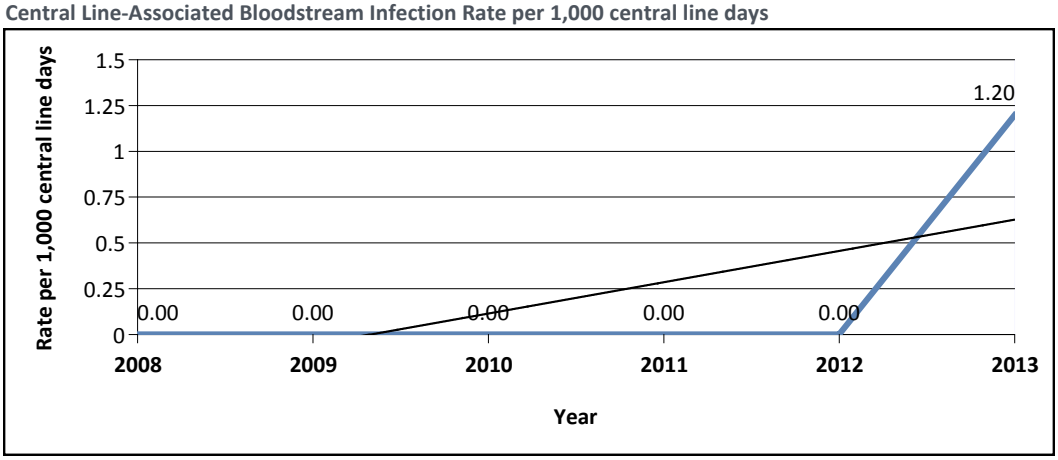
ELLWOOD CITY HOSPITAL

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
2013	1	0.56	1.78	0.02 - 9.89	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 (2013): 25

Number of reported Healthcare-Associated Infections:

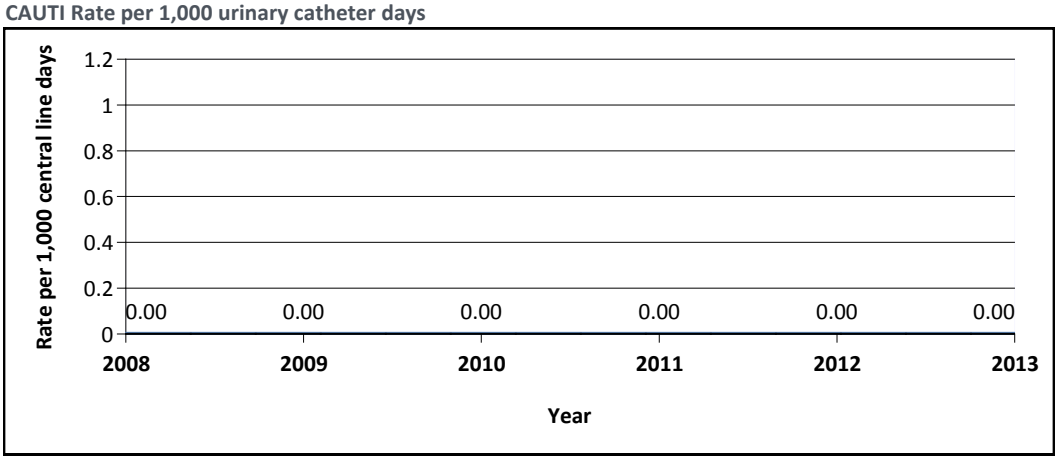
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	2,001	0	0	0	0	0	0	0	0	0	0	0.00
2009	3,918	0	0	0	0	1	0	1	1	0	0	0.77
2010	3,421	0	0	0	0	0	0	2	0	0	0	0.58
2011	3,542	0	0	0	0	0	0	1	0	0	0	0.28
2012	3,440	0	0	0	0	0	0	0	0	0	0	0.00
2013	3,308	0	0	0	0	0	0	0	0	0	0	0.00

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
2013	0	0.96	0.00	0 - 3.8	Same as

CAUTI Rate per 1,000 urinary catheter days



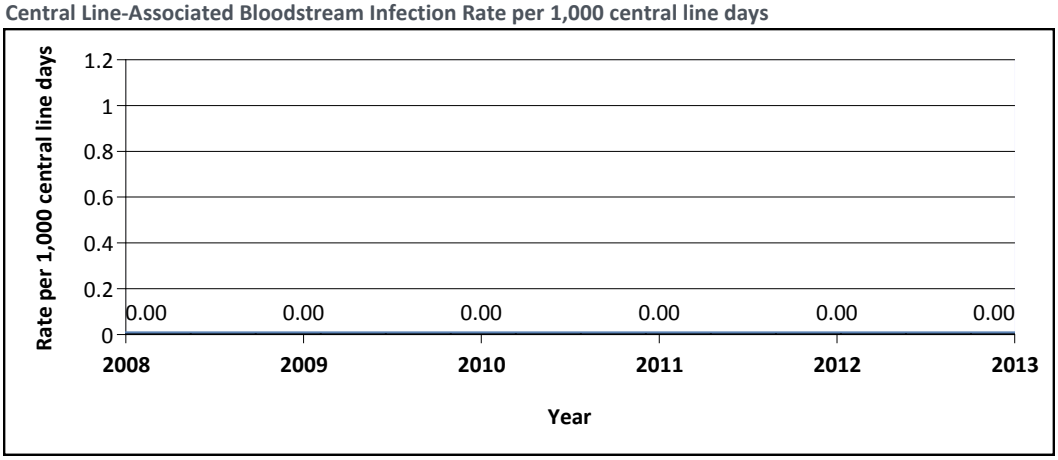
ENDLESS MOUNTAINS HEALTH SYSTEMS

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
2013	0	0.06	0.00	0 - 59.78	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 (2013): 130

Number of reported Healthcare-Associated Infections:

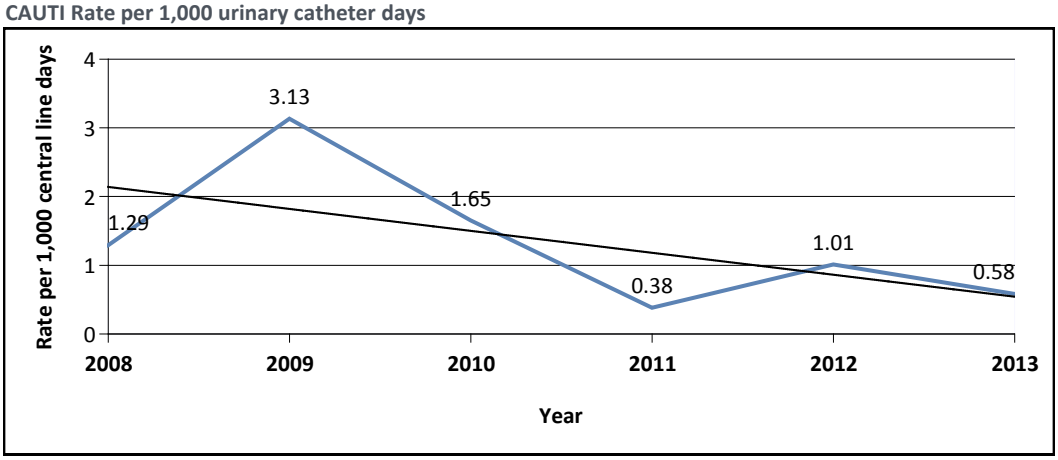
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	15,859	2	0	0	0	4	0	10	0	5	0	1.32
2009	35,026	3	0	19	0	5	0	19	0	29	0	2.14
2010	29,198	3	0	10	0	5	1	20	2	11	0	1.78
2011	28,104	1	1	3	0	8	1	15	1	6	0	1.28
2012	25,852	2	0	12	0	6	0	21	0	8	0	1.90
2013	24,871	5	0	14	0	1	1	22	0	10	0	2.13

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
2013	4	10.52	0.38	0.1 - 0.97	Better

CAUTI Rate per 1,000 urinary catheter days



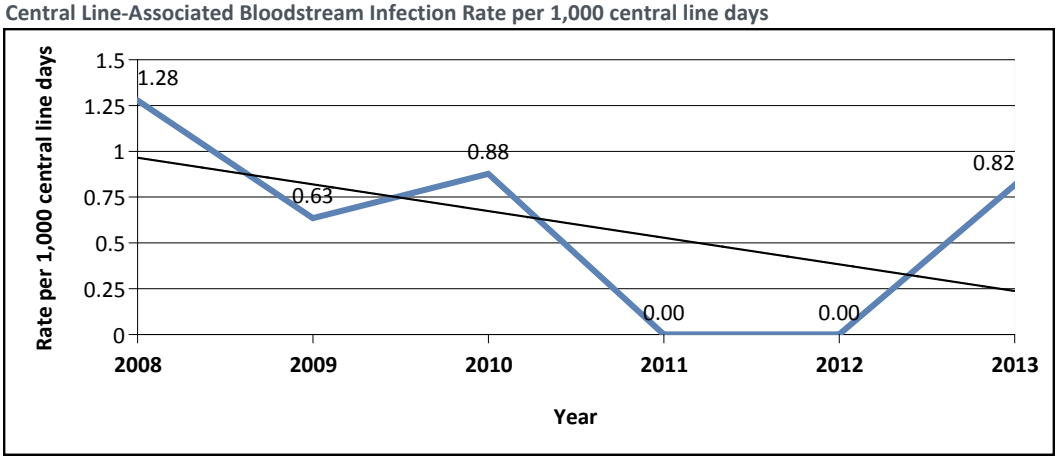
EPHRATA COMMUNITY HOSPITAL

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
2013	2	1.65	1.21	0.14 - 4.38	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
2013	0	0.10	0.00	0 - 36.96	Same as

EVANGELICAL COMMUNITY HOSPITAL

NHSN ID: 11701

Hospital type: Acute care general hospital

Number of licensed beds (2013): 132

Number of reported Healthcare-Associated Infections:

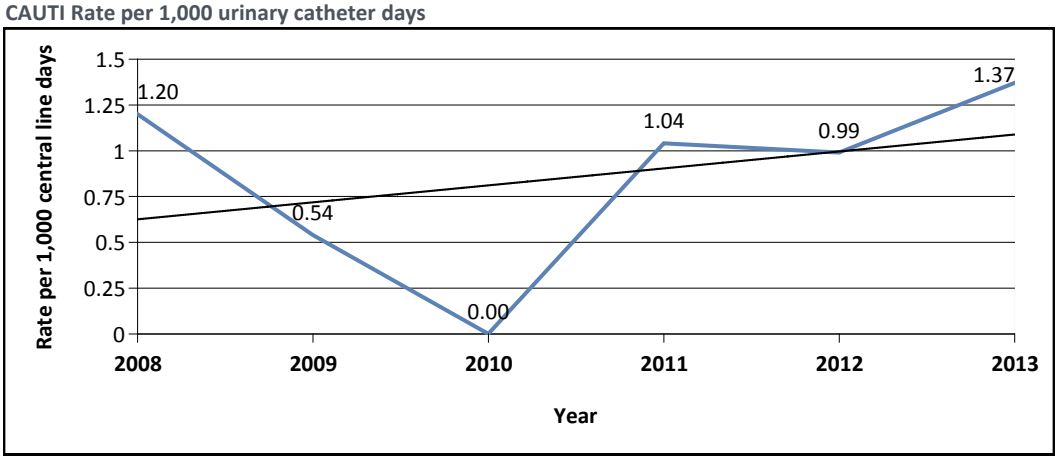
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	11,968	0	0	3	0	1	0	6	1	7	0	1.50
2009	22,351	1	0	7	0	5	0	25	0	11	0	2.19
2010	19,122	1	0	10	0	3	0	34	1	4	0	2.77
2011	21,474	0	1	2	3	7	0	35	0	10	0	2.70
2012	21,725	2	2	2	0	3	0	43	4	11	0	3.08
2013	21,582	1	1	6	0	6	1	40	1	13	1	3.24

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
2013	5	7.60	0.66	0.21 - 1.54	Same as

CAUTI Rate per 1,000 urinary catheter days



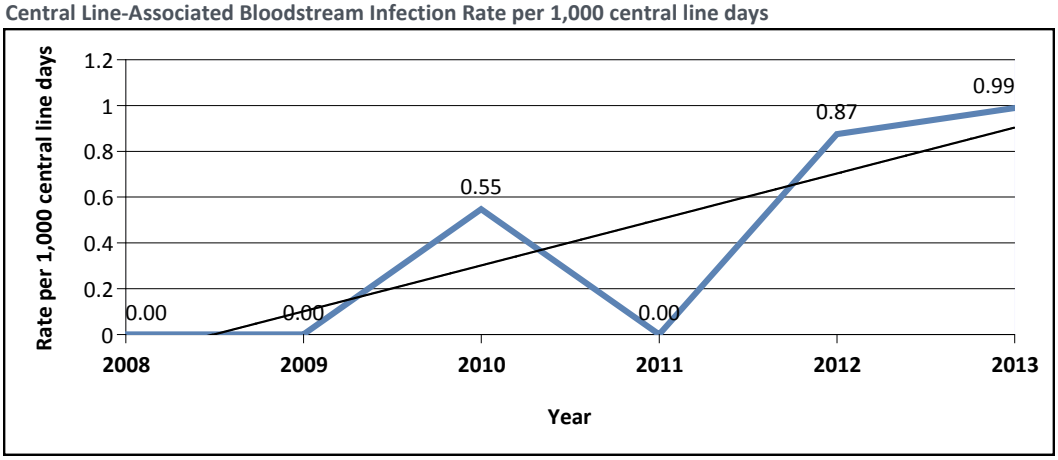
EVANGELICAL COMMUNITY HOSPITAL

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
2013	1	0.82	1.22	0.02 - 6.79	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 (2013): 103

Number of reported Healthcare-Associated Infections:

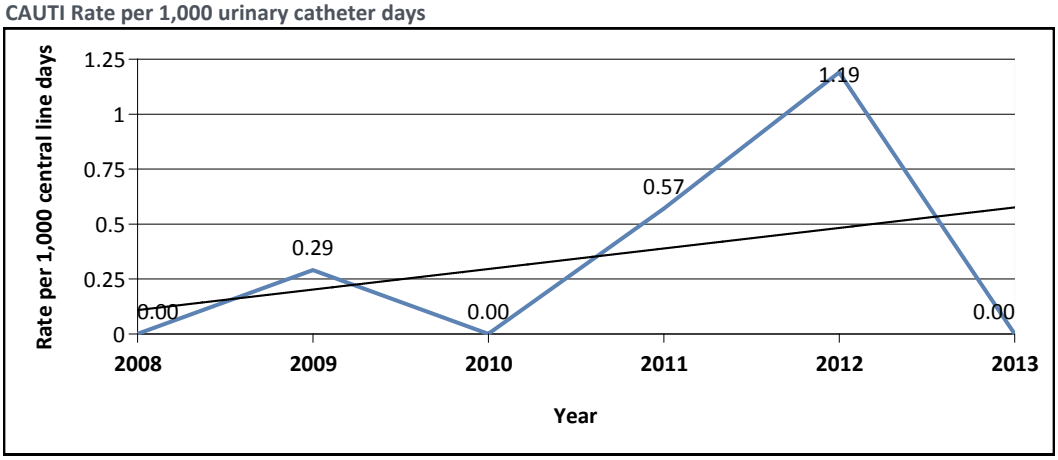
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	11,183	0	0	3	0	3	0	6	0	0	0	1.07
2009	22,069	1	0	9	0	6	0	13	3	2	0	1.54
2010	15,584	0	1	11	0	0	0	2	1	2	0	1.09
2011	14,998	2	0	8	0	4	0	3	1	6	0	1.60
2012	12,696	2	0	5	0	1	0	3	1	4	0	1.26
2013	12,692	2	0	5	1	4	0	5	0	2	0	1.50

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
2013	0	4.19	0.00	0 - 0.87	Better

CAUTI Rate per 1,000 urinary catheter days



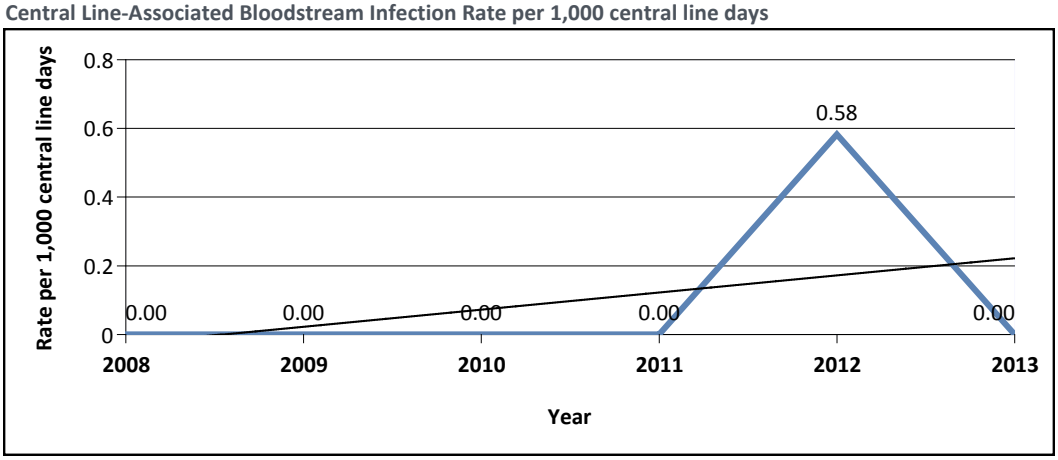
EXCELA HEALTH FRICK HOSPITAL

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
2013	0	1.15	0.00	0 - 3.2	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 (2013): 188

Number of reported Healthcare-Associated Infections:

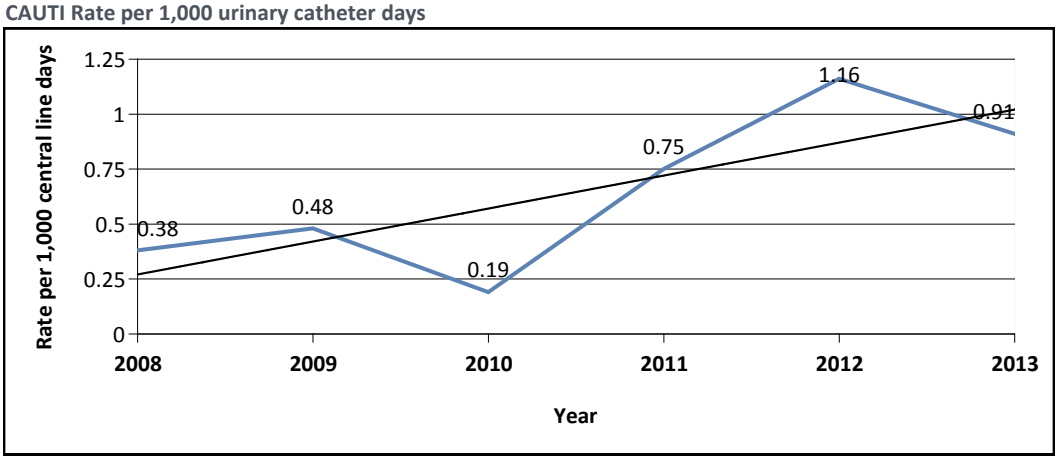
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	20,892	4	0	5	0	2	0	16	1	3	0	1.48
2009	44,015	4	0	10	0	6	0	22	3	12	0	1.30
2010	30,030	6	0	10	0	2	0	28	3	6	0	1.83
2011	28,678	10	1	8	1	7	0	23	1	13	0	2.23
2012	24,746	4	0	8	1	6	0	18	1	16	0	2.18
2013	22,665	9	0	8	0	2	0	21	2	11	2	2.43

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
2013	6	13.97	0.43	0.16 - 0.93	Better

CAUTI Rate per 1,000 urinary catheter days



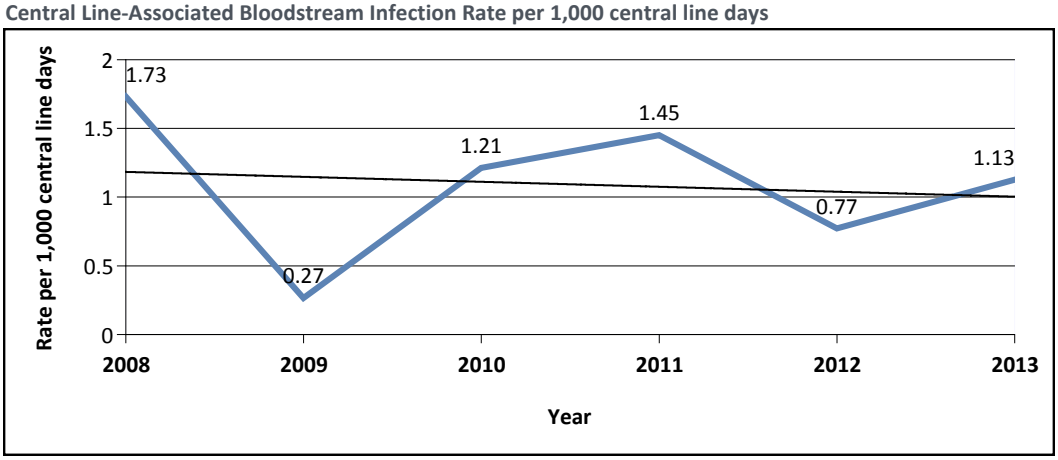
EXCELA HEALTH LATROBE HOSPITAL

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
2013	3	2.15	1.39	0.28 - 4.07	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
2013	2	0.70	2.88	0.32 - 10.38	Same as

EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL

NHSN ID: 11637

Hospital type: Acute care general hospital

Number of licensed beds (2013): 364

Number of reported Healthcare-Associated Infections:

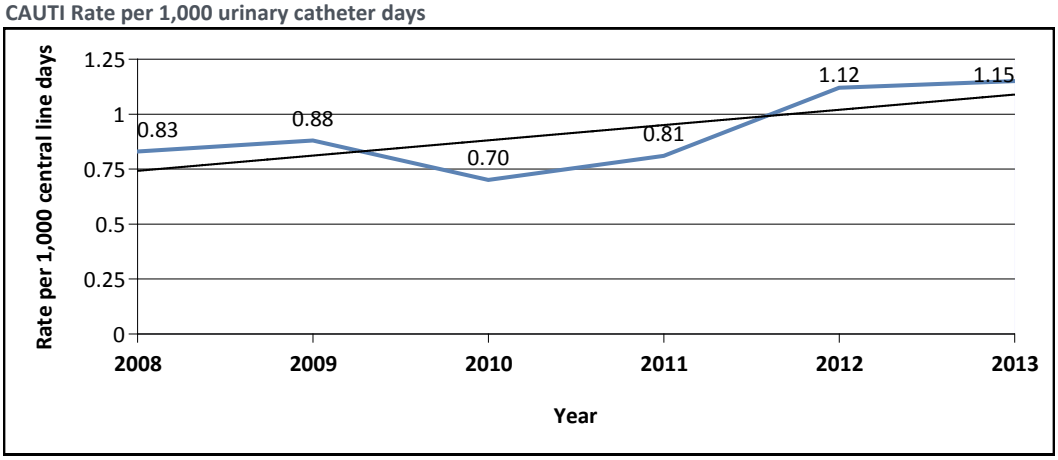
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	65,649	6	0	14	0	6	0	7	3	16	0	0.79
2009	136,642	8	1	35	4	9	0	32	9	37	0	0.99
2010	95,320	8	1	20	2	16	0	40	11	37	3	1.45
2011	94,631	11	3	22	1	10	0	33	0	27	0	1.13
2012	87,500	16	0	15	0	13	0	39	5	30	1	1.36
2013	79,133	20	0	26	0	7	0	30	4	38	4	1.63

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
2013	19	34.61	0.55	0.33 - 0.86	Better

CAUTI Rate per 1,000 urinary catheter days



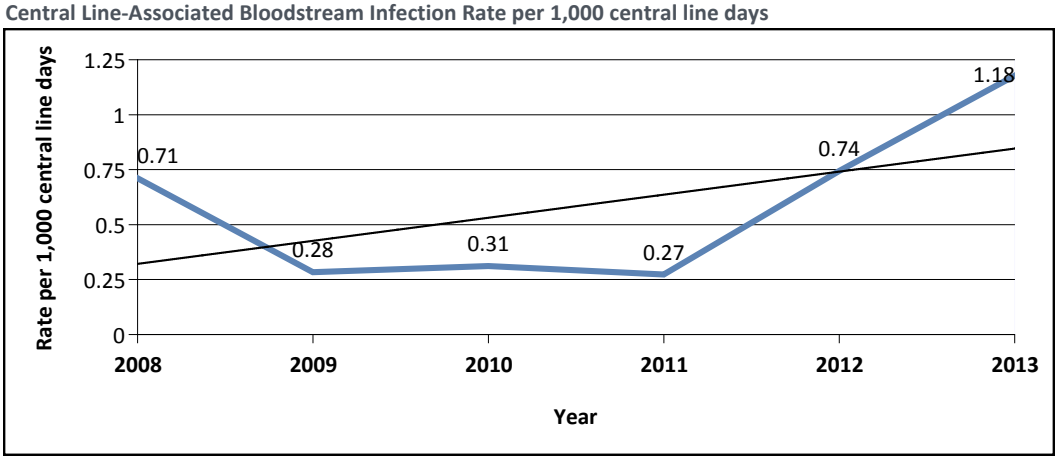
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL

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
2013	14	9.62	1.46	0.8 - 2.44	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 (2013): 239

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
2013	80,158	0	2	0	0	0	1	0	1	0	0	0.05

FIRST HOSPITAL OF WYOMING VALLEY

NHSN ID: 12050

Hospital type: Psychiatric hospital

Number of licensed beds (2013): 127

Number of reported Healthcare-Associated Infections:

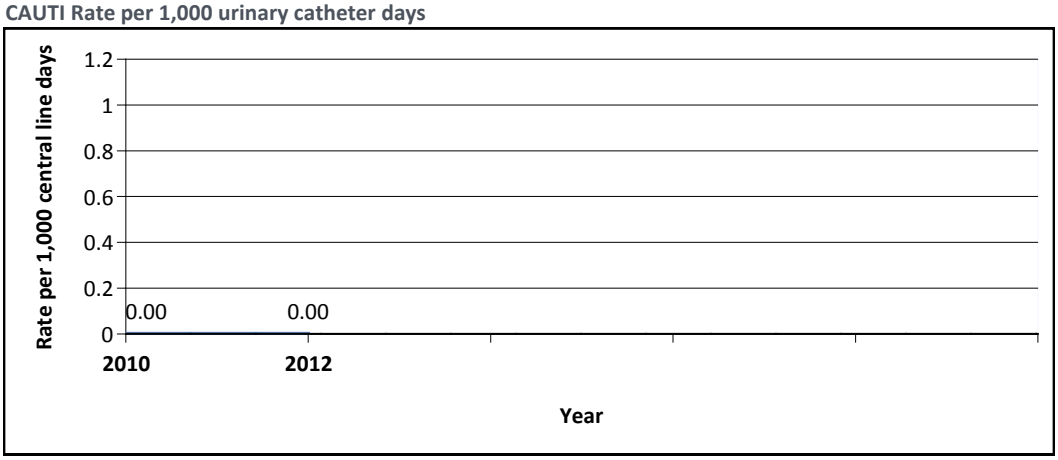
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	14,198	0	0	0	0	0	0	0	0	0	0	0.00
2009	31,062	0	0	0	0	0	0	0	0	0	0	0.00
2010	32,369	0	0	0	0	0	0	0	0	0	0	0.00
2011	33,733	0	0	0	0	0	0	0	0	0	0	0.00
2012	33,278	0	0	0	0	0	0	0	0	0	0	0.00
2013	34,150	0	0	0	0	1	0	0	0	0	0	0.03

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
2013				-	

CAUTI Rate per 1,000 urinary catheter days



FORBES REGIONAL HOSPITAL

NHSN ID: 11265

Hospital type: Acute care general hospital

Number of licensed beds (2013): 349

Number of reported Healthcare-Associated Infections:

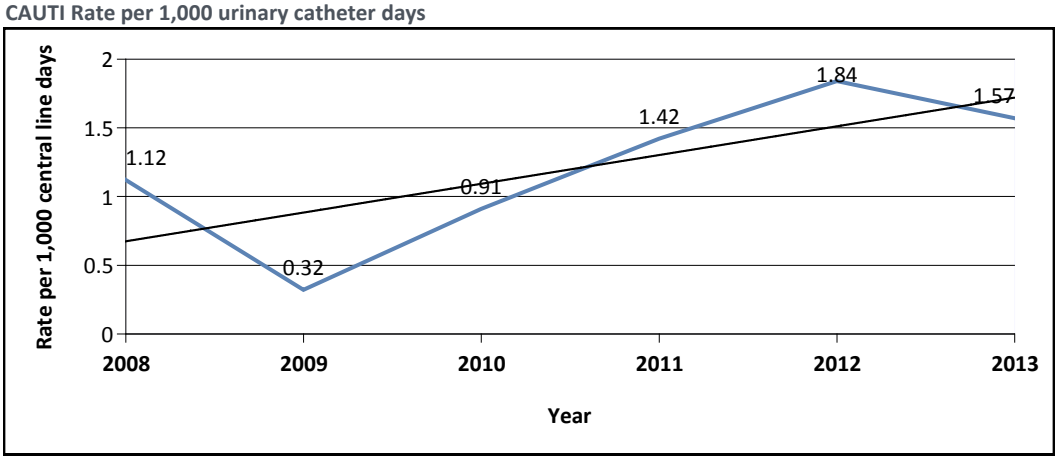
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	37,643	3	1	33	1	5	0	14	1	10	0	1.81
2009	75,134	13	0	59	0	14	1	28	8	7	2	1.76
2010	79,998	13	0	49	4	23	0	44	8	23	5	2.11
2011	85,996	16	0	68	1	13	0	41	1	24	1	1.92
2012	84,685	17	1	60	3	12	1	46	3	38	1	2.15
2013	82,592	9	1	41	3	10	1	39	3	38	1	1.77

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
2013	22	29.22	0.75	0.47 - 1.14	Same as

CAUTI Rate per 1,000 urinary catheter days



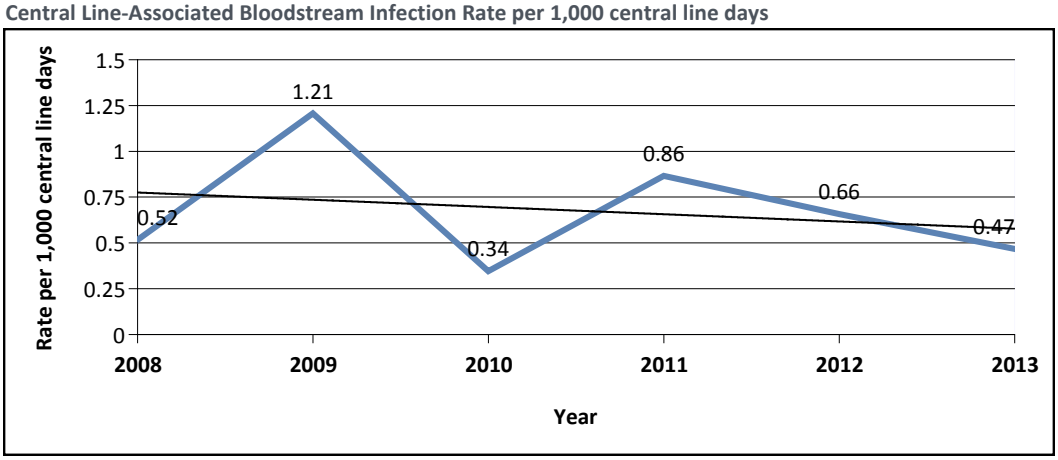
FORBES REGIONAL HOSPITAL

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
2013	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 - 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
2013				-	

FOUNDATIONS BEHAVIORAL HEALTH

NHSN ID: 12832

Hospital type: Psychiatric hospital

Number of licensed beds (2013): 58

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
2013	16,853	0	16	0	0	0	1	0	3	3	0	1.36

FRIENDS HOSPITAL

NHSN ID: 12488

Hospital type: Psychiatric hospital

Number of licensed beds (2013): 192

Number of reported Healthcare-Associated Infections:

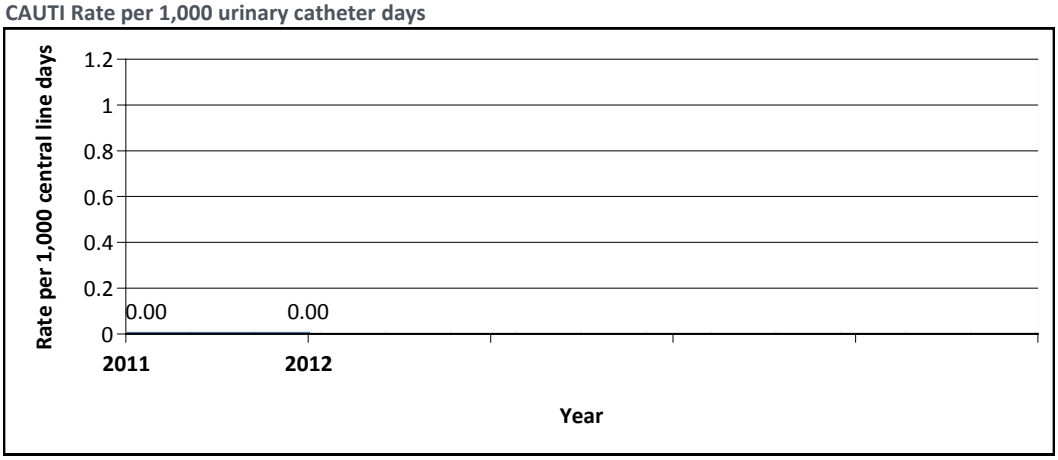
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	28,139	0	0	1	0	0	0	0	0	0	0	0.04
2009	154,000	0	0	0	0	0	0	0	0	0	0	0.00
2010	51,693	0	0	0	0	0	0	0	0	0	0	0.00
2011	52,675	0	36	0	0	0	0	0	6	3	0	0.85
2012	58,046	0	26	0	2	1	0	0	3	1	0	0.57
2013	61,857	0	29	0	0	2	0	0	5	1	0	0.60

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
2013				-	

CAUTI Rate per 1,000 urinary catheter days



FULTON COUNTY MEDICAL CENTER

NHSN ID: 11939

Hospital type: Critical access hospital

Number of licensed beds (2013): 21

Number of reported Healthcare-Associated Infections:

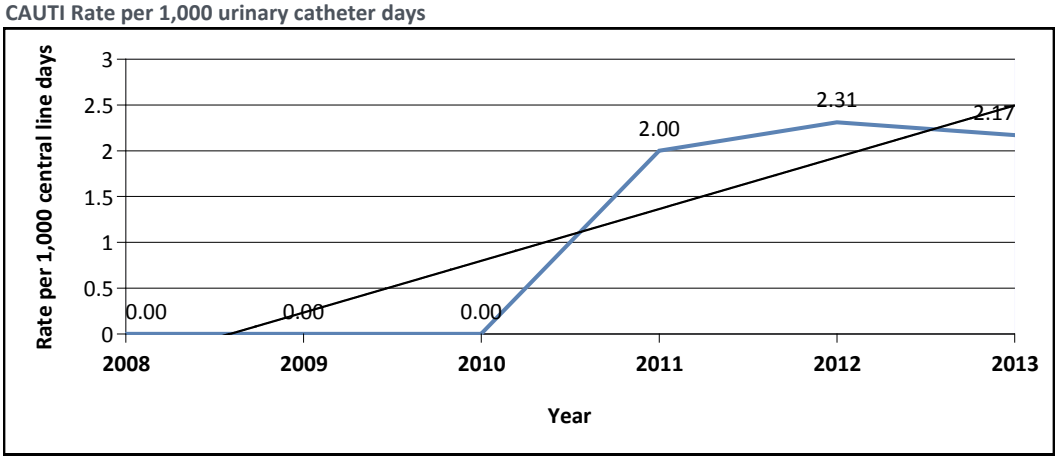
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	2,056	0	0	0	0	0	0	0	0	0	0	0.00
2009	4,515	1	0	0	0	1	0	0	0	0	0	0.44
2010	4,574	0	0	0	0	0	0	0	0	0	0	0.00
2011	4,065	0	0	0	0	3	0	0	0	3	0	1.48
2012	4,625	0	0	2	0	1	0	0	2	1	0	1.30
2013	4,192	0	0	0	0	0	0	0	0	1	0	0.24

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
2013	1	0.69	1.44	0.02 - 8.04	Same as

CAUTI Rate per 1,000 urinary catheter days



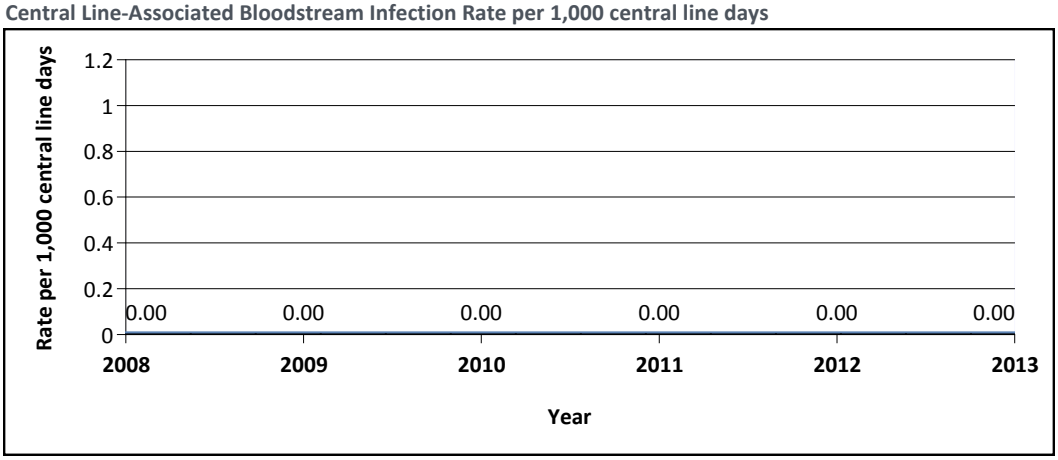
FULTON COUNTY MEDICAL CENTER

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
2013	0	0.20	0.00	0 - 18.79	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 (2013): 42

Number of reported Healthcare-Associated Infections:

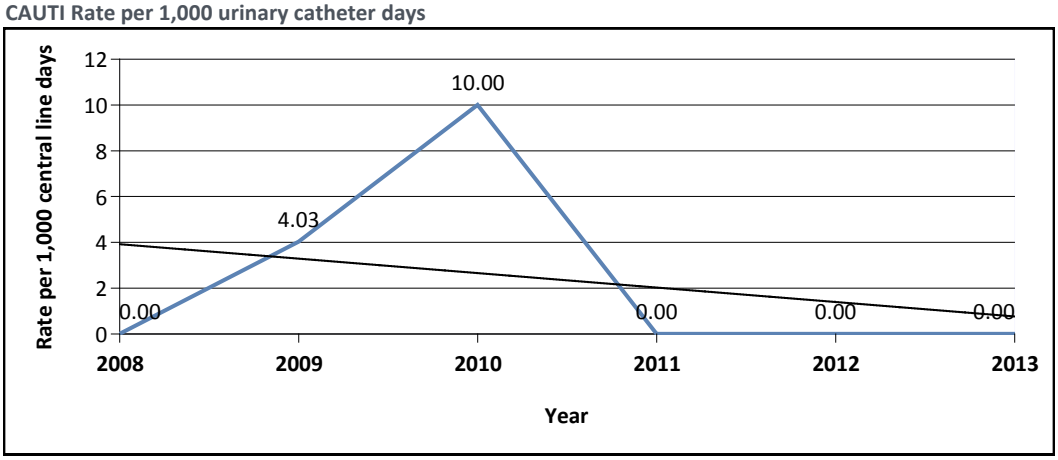
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	5,473	0	2	1	0	0	0	0	0	1	0	0.73
2009	11,203	0	0	6	0	0	0	0	0	4	0	0.89
2010	10,867	0	0	3	0	1	0	0	0	2	0	0.55
2011	10,978	0	0	5	0	0	0	0	0	3	0	0.73
2012	11,741	0	0	4	0	0	0	0	0	8	0	1.02
2013	11,322	0	0	0	0	0	0	0	0	1	0	0.09

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
2013	0	0.85	0.00	0 - 4.32	Same as

CAUTI Rate per 1,000 urinary catheter days



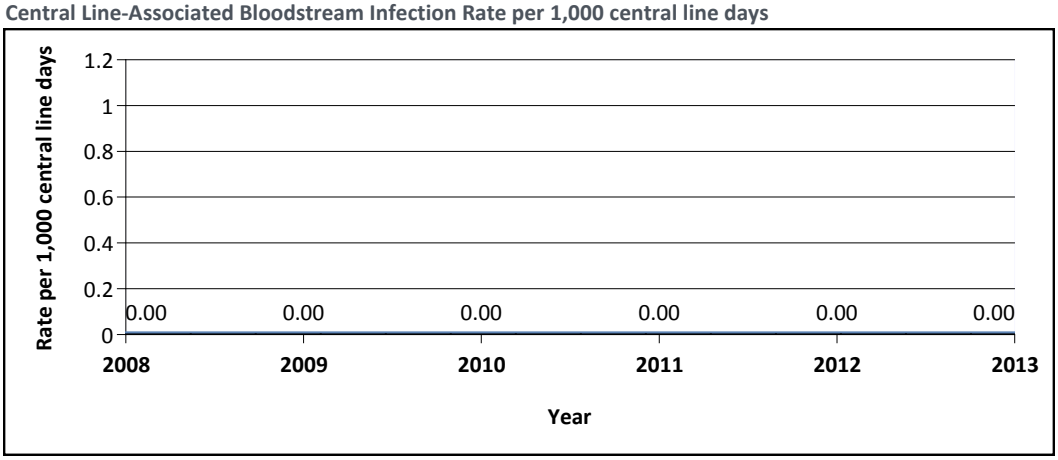
GEISINGER HEALTHSOUTH REHABILITATION HOSPITAL

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
2013	0	0.23	0.00	0 - 16.24	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 (2013): 560

Number of reported Healthcare-Associated Infections:

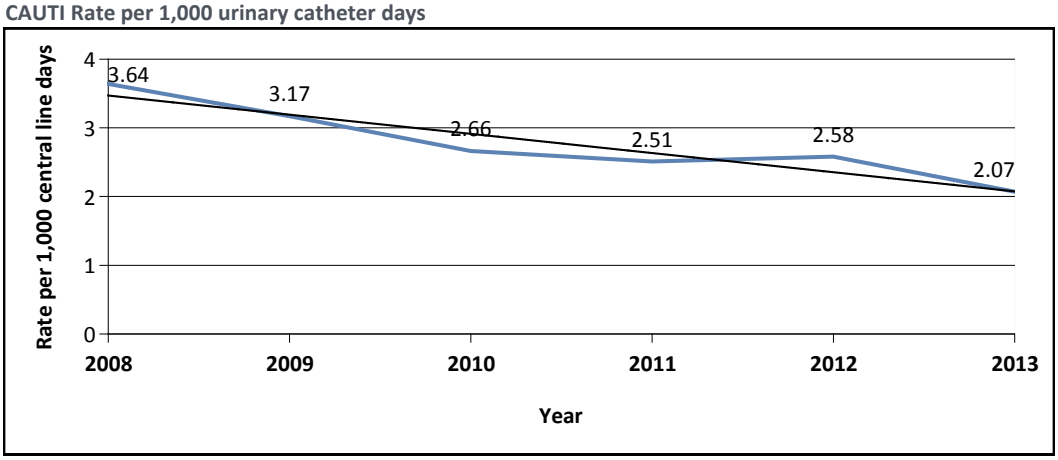
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	61,711	43	0	25	2	19	0	104	4	51	1	4.03
2009	127,978	86	1	70	7	23	0	205	6	115	4	4.04
2010	129,984	56	2	66	6	15	0	176	6	91	2	3.23
2011	136,175	82	3	76	19	34	0	213	19	112	1	4.11
2012	142,149	59	4	59	13	22	0	204	19	114	4	3.50
2013	146,288	53	8	96	14	31	3	227	14	127	5	3.95

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
2013	48	48.42	0.99	0.73 - 1.31	Same as

CAUTI Rate per 1,000 urinary catheter days



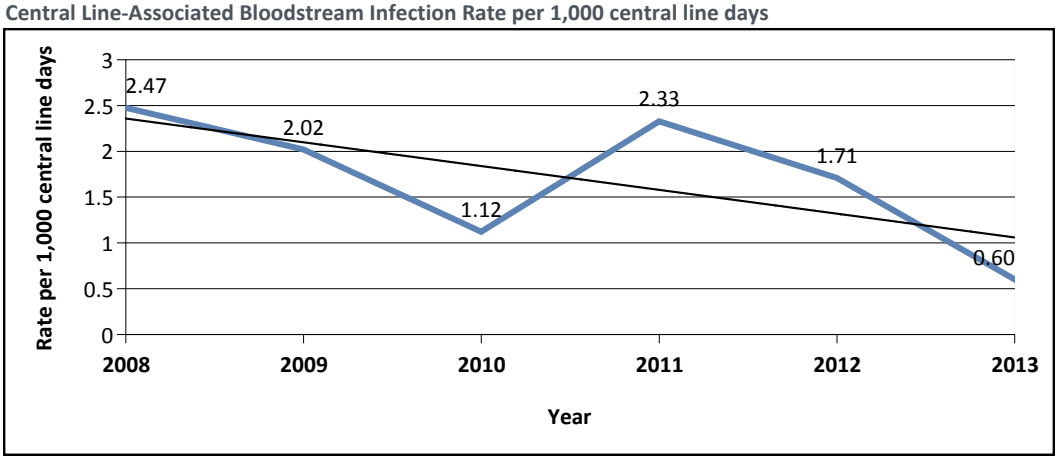
GEISINGER MEDICAL CENTER

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
2013	13	17.44	0.75	0.4 - 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	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
2013	4	2.35	1.70	0.46 - 4.36	Same as

GEISINGER WYOMING VALLEY MEDICAL CENTER

NHSN ID: 11780

Hospital type: Acute care general hospital

Number of licensed beds (2013): 250

Number of reported Healthcare-Associated Infections:

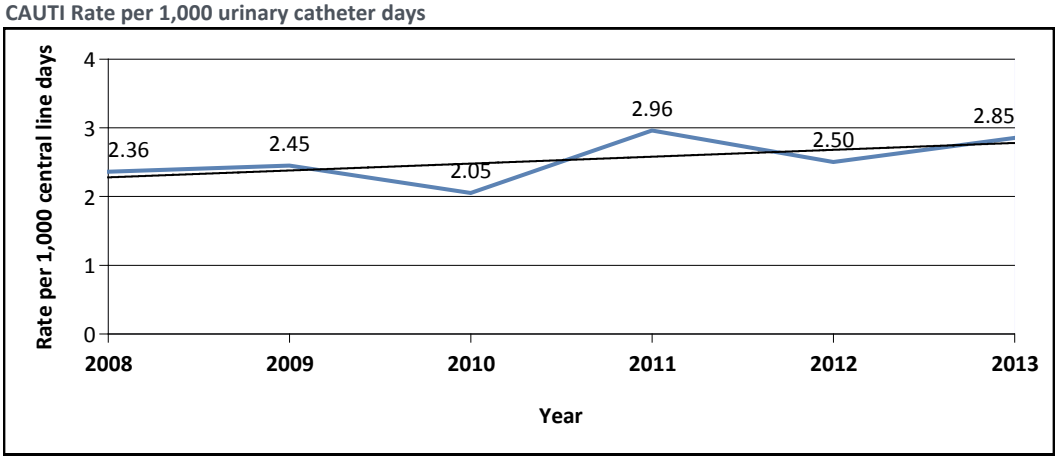
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	28,296	17	0	4	1	13	0	44	0	20	0	3.50
2009	51,912	23	0	29	7	28	0	95	1	50	0	4.49
2010	58,226	12	0	40	6	29	0	134	8	40	1	4.64
2011	64,749	14	0	40	14	32	0	111	5	67	2	4.40
2012	67,922	15	6	48	10	19	1	120	9	60	3	4.28
2013	74,115	13	1	56	7	24	1	88	2	68	1	3.52

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
2013	43	31.67	1.36	0.98 - 1.83	Same as

CAUTI Rate per 1,000 urinary catheter days



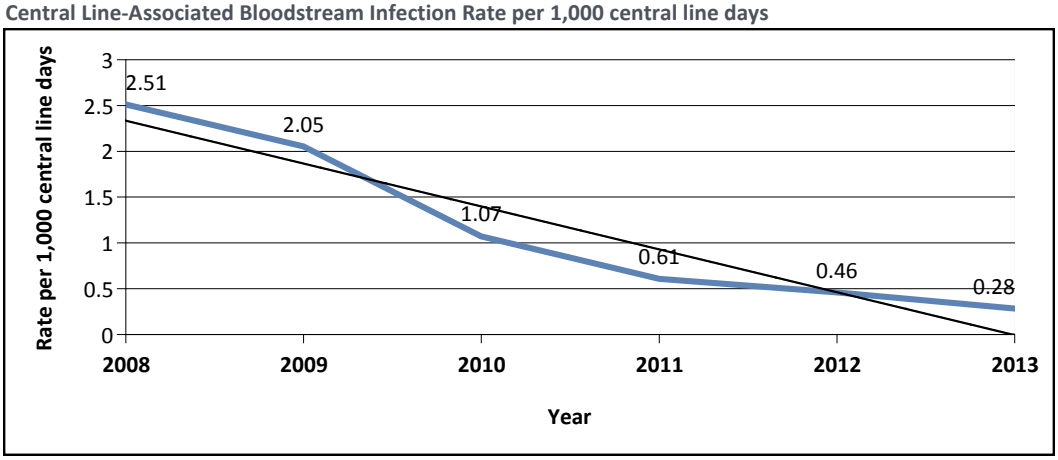
GEISINGER WYOMING VALLEY MEDICAL CENTER

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
2013	3	8.62	0.35	0.07 - 1.02	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
2013	0	0.03	0.00	0 - 121.34	Same as

GEISINGER-BLOOMSBURG HOSPITAL

NHSN ID: 12008

Hospital type: Acute care general hospital

Number of licensed beds (2013): 72

Number of reported Healthcare-Associated Infections:

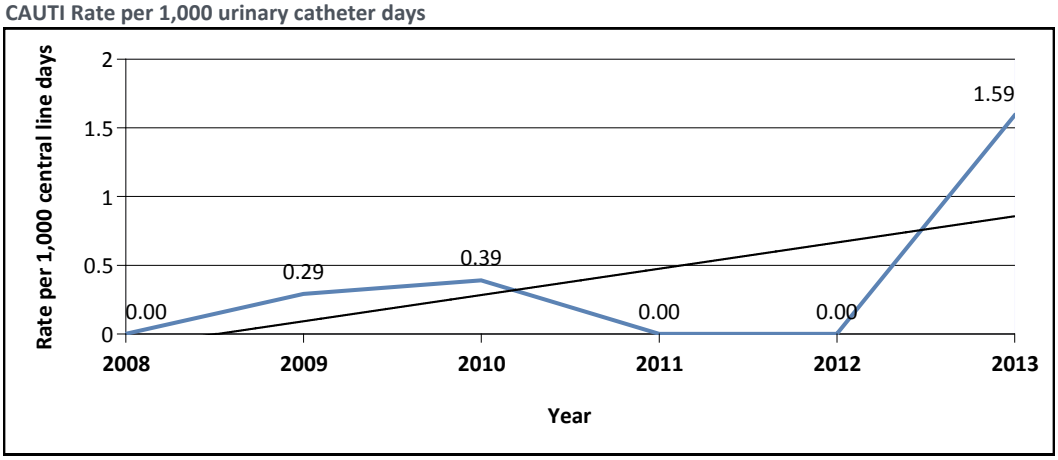
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	7,176	0	0	0	0	2	0	1	0	0	0	0.42
2009	16,990	1	0	1	0	1	1	3	0	1	1	0.53
2010	14,502	0	0	0	0	0	0	9	0	1	1	0.76
2011	13,619	2	0	0	0	2	0	3	0	0	0	0.51
2012	12,590	3	0	0	0	2	0	6	0	0	1	0.95
2013	11,701	0	0	2	0	1	0	12	0	2	0	1.45

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
2013	2	1.89	1.06	0.12 - 3.81	Same as

CAUTI Rate per 1,000 urinary catheter days



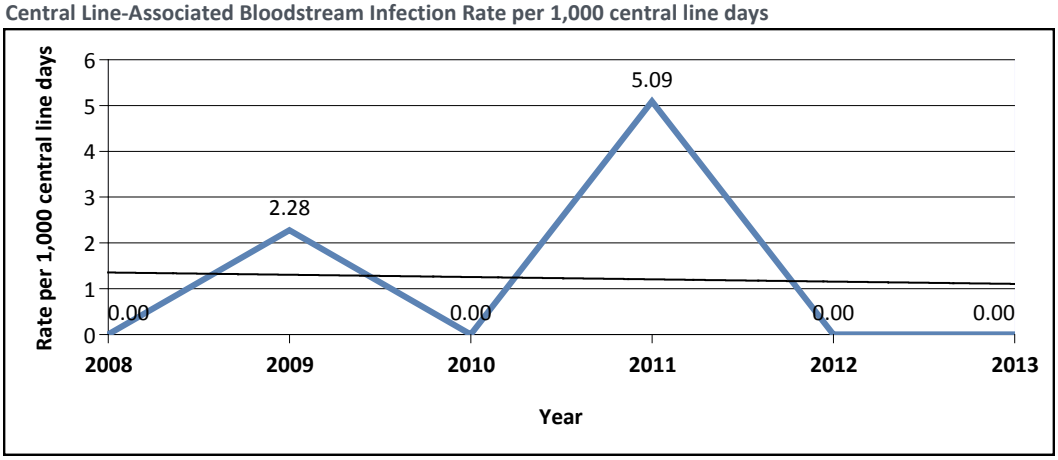
GEISINGER-BLOOMSBURG HOSPITAL

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
2013	0	0.13	0.00	0 - 27.59	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 (2013): 297

Number of reported Healthcare-Associated Infections:

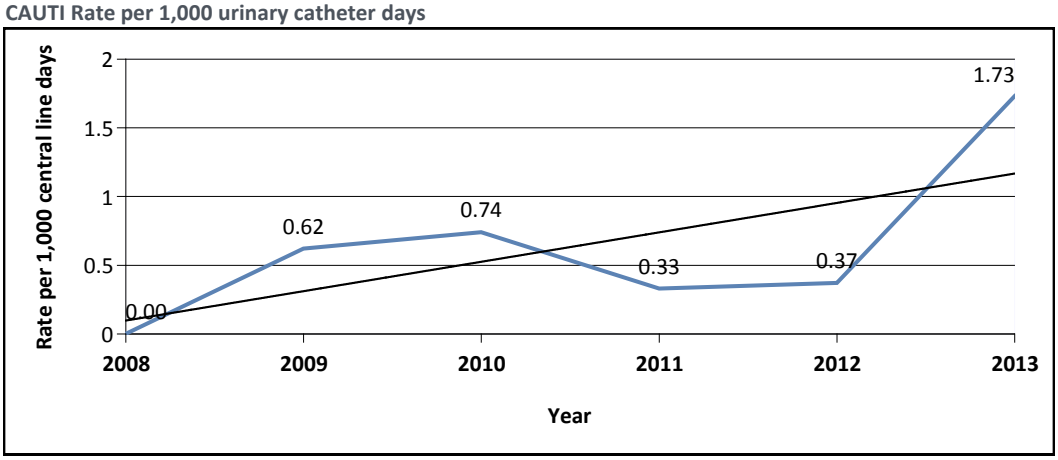
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	28,156	3	0	2	0	9	0	25	0	0	2	1.46
2009	58,896	4	0	3	0	14	0	51	0	9	0	1.38
2010	51,767	4	0	1	0	11	0	37	0	12	0	1.26
2011	52,727	1	0	1	0	14	0	36	0	6	0	1.10
2012	54,768	1	0	2	0	9	0	26	0	6	0	0.80
2013	53,698	13	0	8	3	16	0	42	2	33	0	2.18

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
2013	21	25.44	0.83	0.51 - 1.26	Same as

CAUTI Rate per 1,000 urinary catheter days



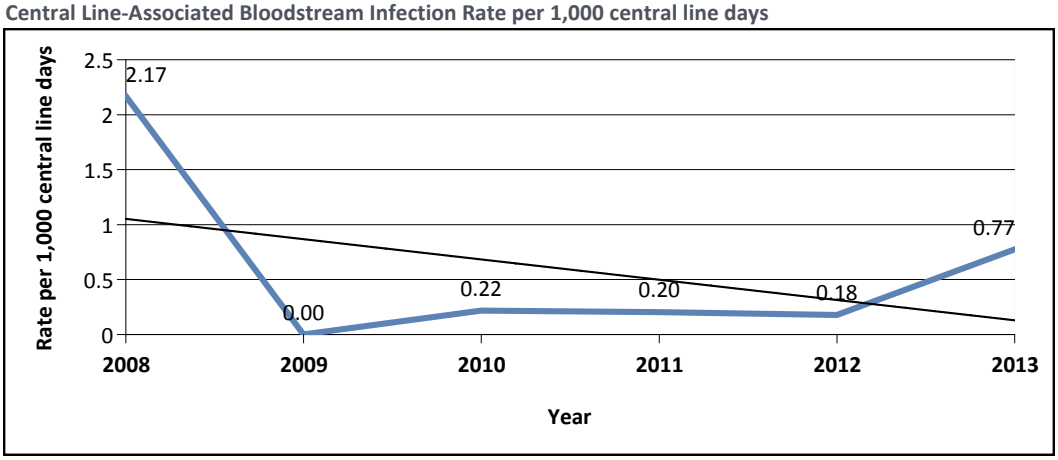
GEISINGER-COMMUNITY MEDICAL CENTER

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
2013	4	4.18	0.96	0.26 - 2.45	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				-	
2013				-	

GETTYSBURG HOSPITAL

NHSN ID: 11531

Hospital type: Acute care general hospital

Number of licensed beds (2013): 76

Number of reported Healthcare-Associated Infections:

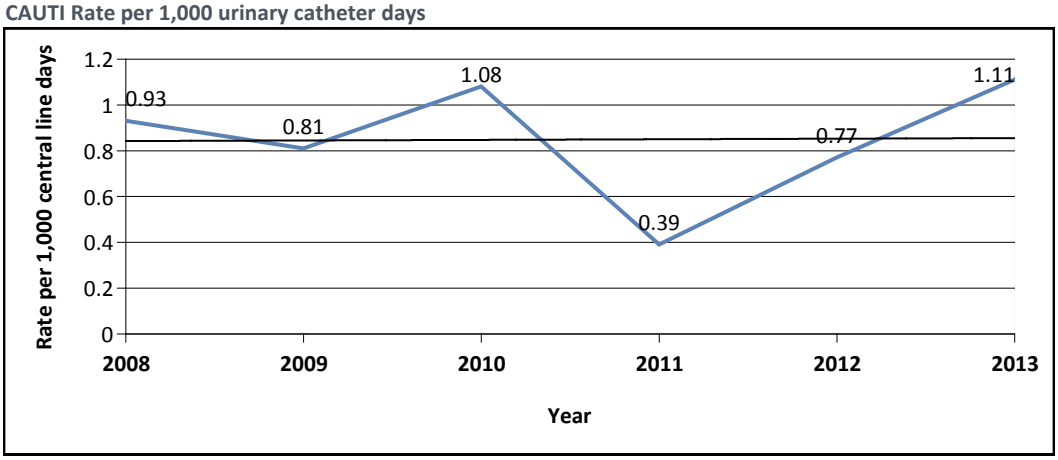
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	7,515	0	0	3	0	1	1	10	1	1	0	2.26
2009	16,461	1	0	8	0	1	0	9	0	2	0	1.28
2010	17,456	0	0	13	0	4	0	8	0	4	0	1.66
2011	18,089	0	0	10	0	2	2	19	0	2	0	1.93
2012	18,278	2	0	5	0	6	0	16	0	2	0	1.70
2013	19,474	3	0	12	0	2	0	12	0	8	1	1.95

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
2013	3	4.09	0.73	0.15 - 2.14	Same as

CAUTI Rate per 1,000 urinary catheter days



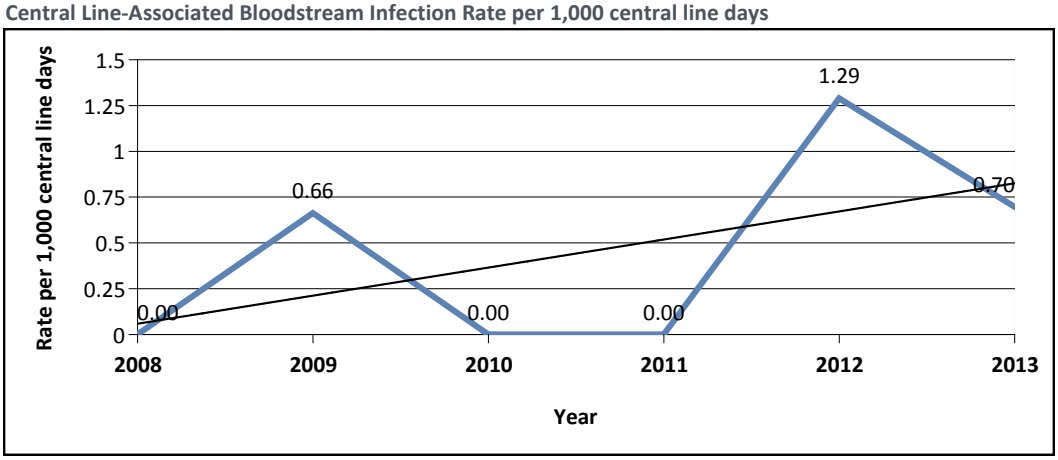
GETTYSBURG HOSPITAL

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
2013	1	0.97	1.04	0.01 - 5.76	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 (2013): 90

Number of reported Healthcare-Associated Infections:

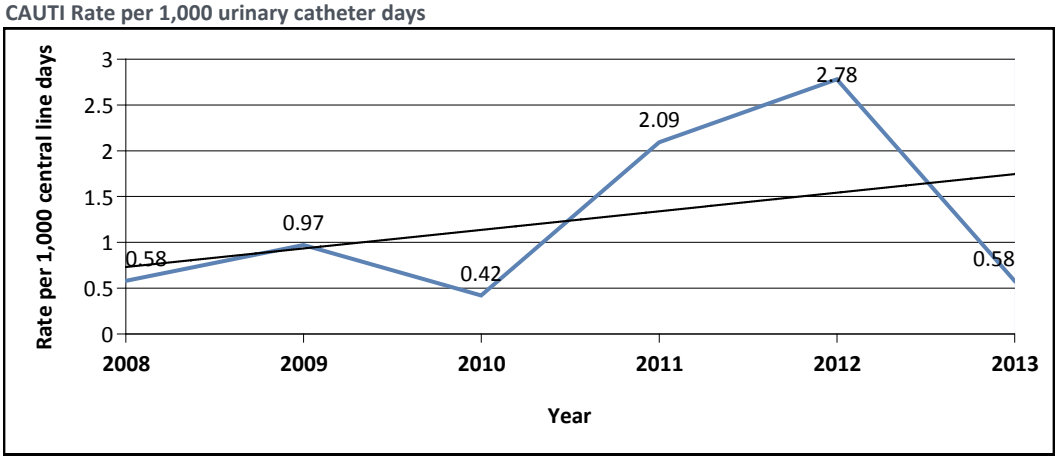
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	7,260	1	0	2	0	1	0	10	0	1	0	2.07
2009	16,768	2	3	3	0	1	0	10	0	5	0	1.43
2010	16,243	1	5	2	0	1	0	9	1	7	1	1.66
2011	16,886	1	4	3	0	3	0	6	2	13	0	1.90
2012	18,176	3	8	9	0	4	2	10	1	22	0	3.25
2013	17,291	2	12	9	2	6	0	12	0	11	0	3.12

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
2013	1	2.57	0.39	0.01 - 2.17	Same as

CAUTI Rate per 1,000 urinary catheter days



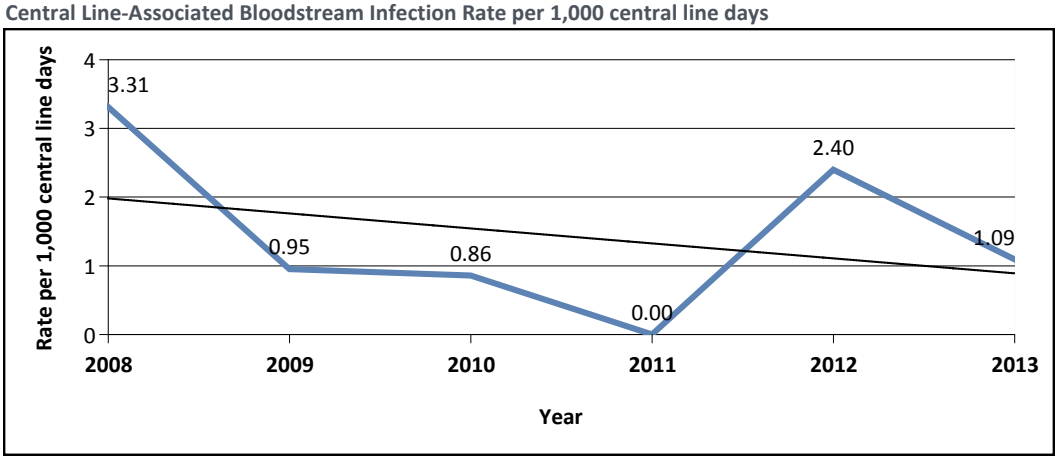
GNADEN HUETTEN MEMORIAL HOSPITAL

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
2013	1	0.62	1.62	0.02 - 9.01	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 (2013): 38

Number of reported Healthcare-Associated Infections:

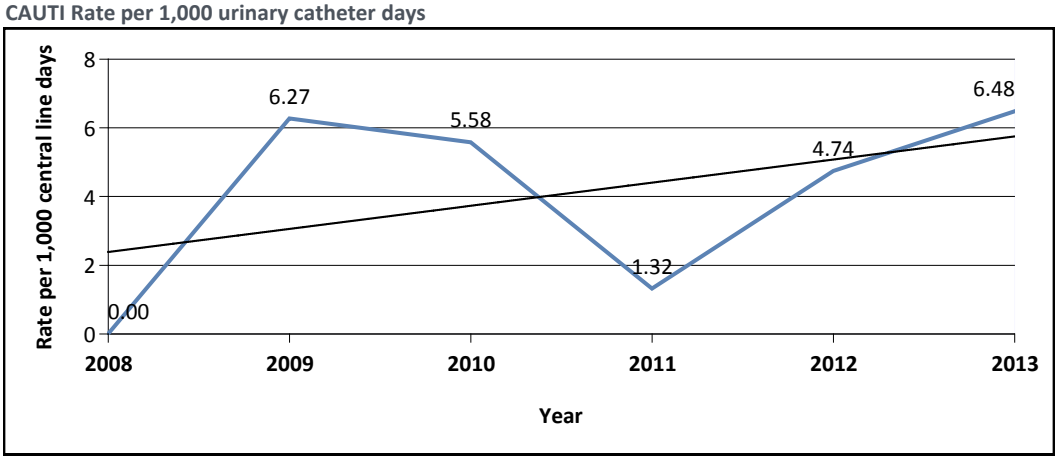
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	931	2	0	0	0	0	0	0	0	0	0	2.15
2009	5,486	13	0	25	10	1	0	0	7	6	0	11.30
2010	8,874	9	0	47	15	1	0	0	6	18	2	11.04
2011	8,537	22	0	11	15	1	0	0	2	4	0	6.44
2012	9,813	22	0	16	22	7	0	0	1	26	0	9.58
2013	10,506	19	0	22	46	1	0	0	3	30	0	11.52

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
2013	14	3.29	4.25	2.32 - 7.13	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
2013	10	5.58	1.79	0.86 - 3.3	Same as

GOOD SHEPHERD SPECIALTY HOSPITAL

NHSN ID: 11887

Hospital type: Long-term acute care hospital

Number of licensed beds (2013): 32

Number of reported Healthcare-Associated Infections:

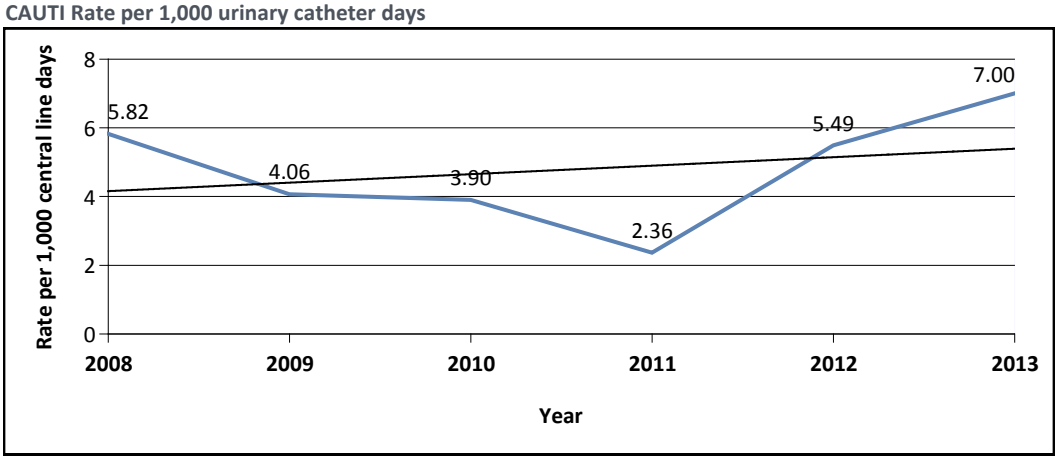
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	5,221	11	0	7	0	1	0	0	2	19	0	7.66
2009	10,497	7	0	6	2	0	0	0	5	30	0	4.76
2010	10,503	15	1	4	1	0	0	0	1	17	2	3.90
2011	10,551	9	0	6	0	0	0	0	3	12	0	2.84
2012	9,982	8	1	9	13	9	0	0	4	36	0	8.01
2013	9,365	11	11	17	26	8	1	0	12	35	4	13.35

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
2013	23	5.07	4.54	2.87 - 6.81	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
2013	7	6.97	1.00	0.4 - 2.07	Same as

GRAND VIEW HOSPITAL

NHSN ID: 11847

Hospital type: Acute care general hospital

Number of licensed beds (2013): 202

Number of reported Healthcare-Associated Infections:

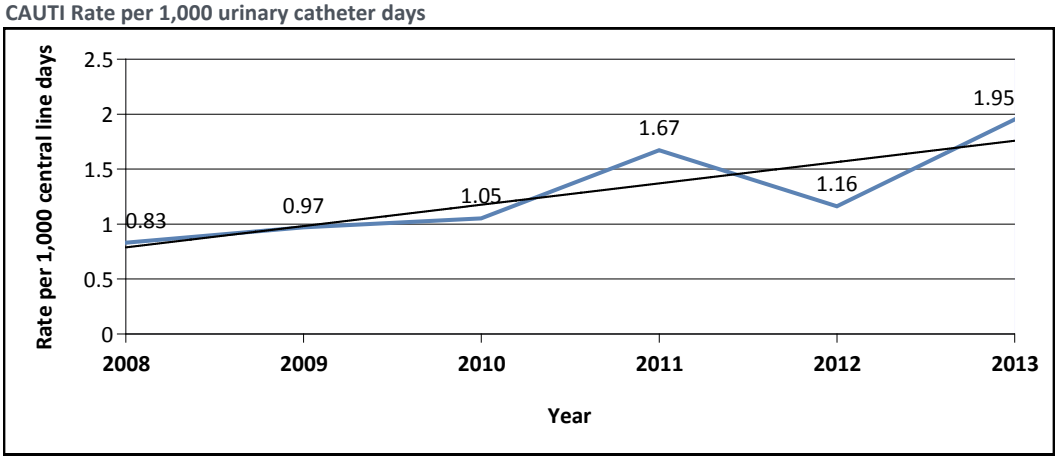
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	23,358	3	0	9	0	14	0	17	2	8	0	2.27
2009	46,252	9	0	14	0	25	0	27	0	15	0	1.95
2010	41,631	7	2	18	0	28	0	20	1	22	0	2.35
2011	42,899	7	2	21	0	46	0	21	2	35	0	3.12
2012	40,826	7	0	5	0	8	0	14	0	26	0	1.47
2013	41,380	5	1	12	0	29	1	25	4	42	0	2.88

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
2013	20	15.72	1.27	0.78 - 1.96	Same as

CAUTI Rate per 1,000 urinary catheter days



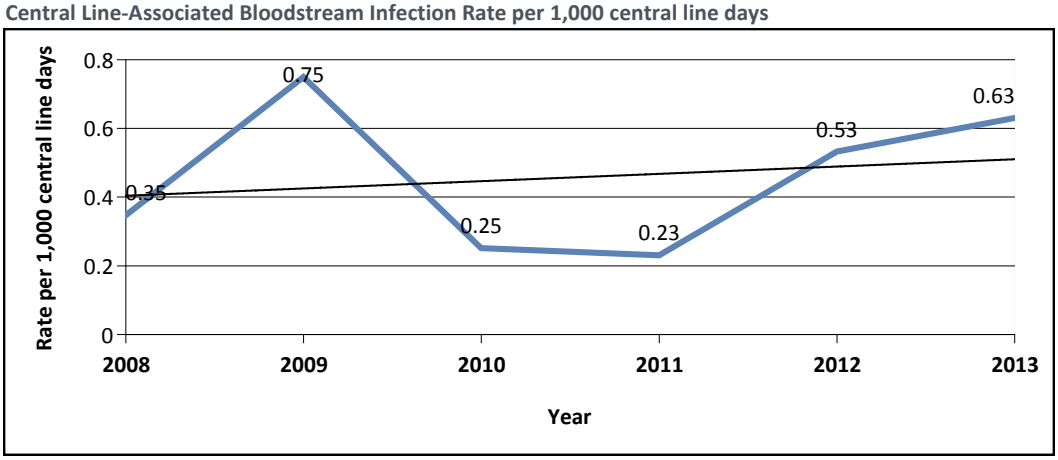
GRAND VIEW HOSPITAL

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
2013	5	5.33	0.94	0.3 - 2.19	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 (2013): 90

Number of reported Healthcare-Associated Infections:

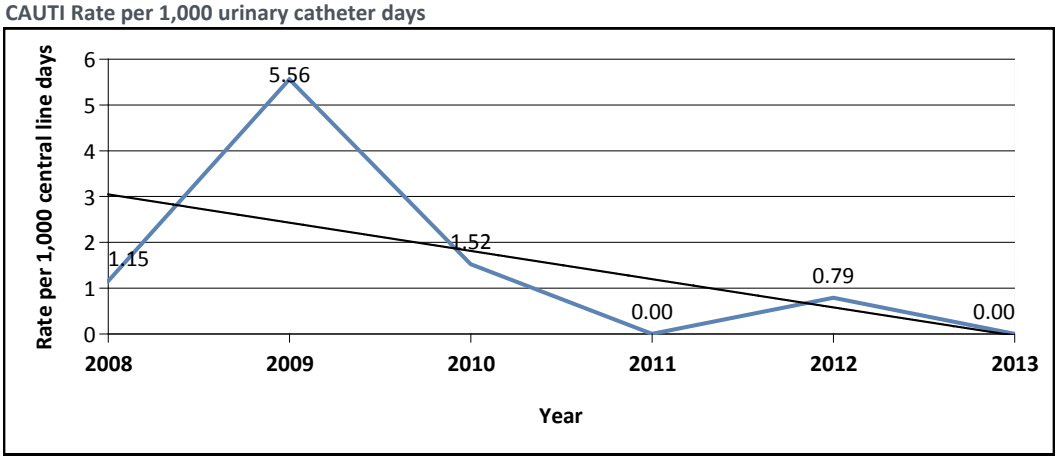
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	6,461	1	0	3	0	1	1	1	3	4	0	2.17
2009	11,653	1	0	2	0	3	0	5	2	19	0	2.75
2010	7,396	1	0	8	0	2	0	4	1	3	0	2.57
2011	7,906	0	0	5	0	1	0	5	0	0	0	1.39
2012	8,181	0	0	4	0	0	0	6	0	1	0	1.34
2013	7,717	0	0	1	0	0	0	2	1	2	0	0.78

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
2013	0	2.02	0.00	0 - 1.82	Same as

CAUTI Rate per 1,000 urinary catheter days



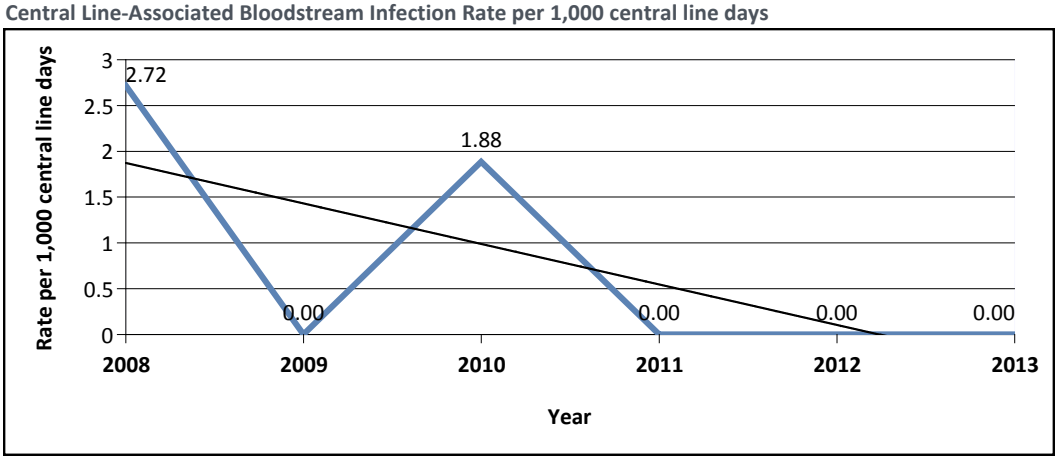
GROVE CITY MEDICAL CENTER

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
2013	0	0.33	0.00	0 - 11.19	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 (2013): 496

Number of reported Healthcare-Associated Infections:

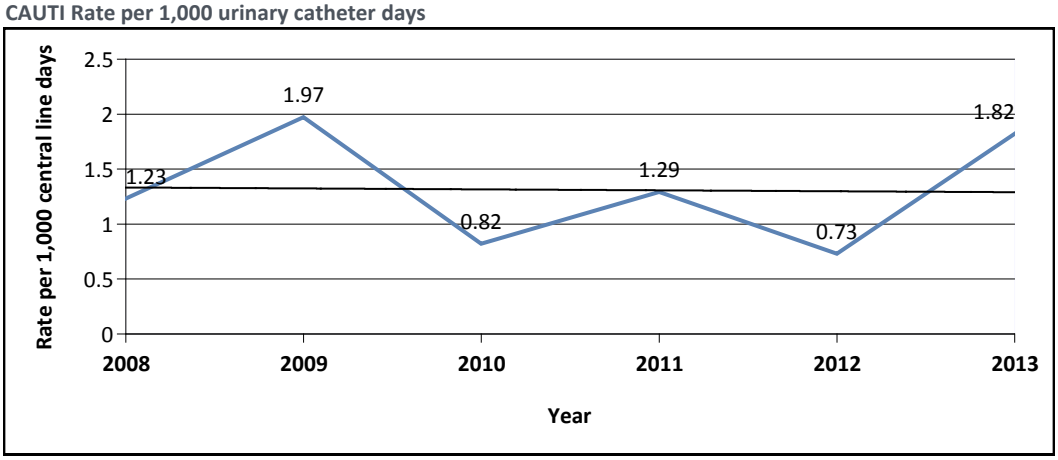
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	63,854	31	1	49	1	8	0	2	3	24	1	1.88
2009	130,864	78	3	60	4	24	0	61	4	63	0	2.27
2010	123,052	49	0	39	2	5	1	60	11	33	3	1.65
2011	127,259	46	6	75	7	16	0	54	10	44	4	2.06
2012	115,028	24	14	76	5	23	1	89	15	30	0	2.41
2013	114,138	46	7	116	6	7	0	60	9	64	2	2.78

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
2013	29	33.21	0.87	0.58 - 1.25	Same as

CAUTI Rate per 1,000 urinary catheter days



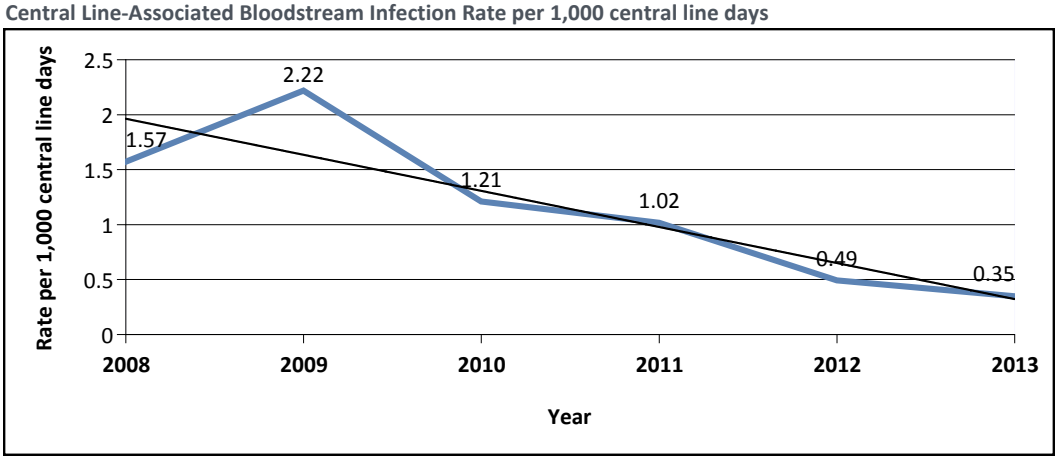
HAHNEMANN UNIVERSITY HOSPITAL

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
2013	6	13.94	0.43	0.16 - 0.94	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	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
2013	3	1.62	1.86	0.37 - 5.43	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
2013	3	9.10	0.33	0.07 - 0.96	Better

HANOVER HOSPITAL

NHSN ID: 11899

Hospital type: Acute care general hospital

Number of licensed beds (2013): 108

Number of reported Healthcare-Associated Infections:

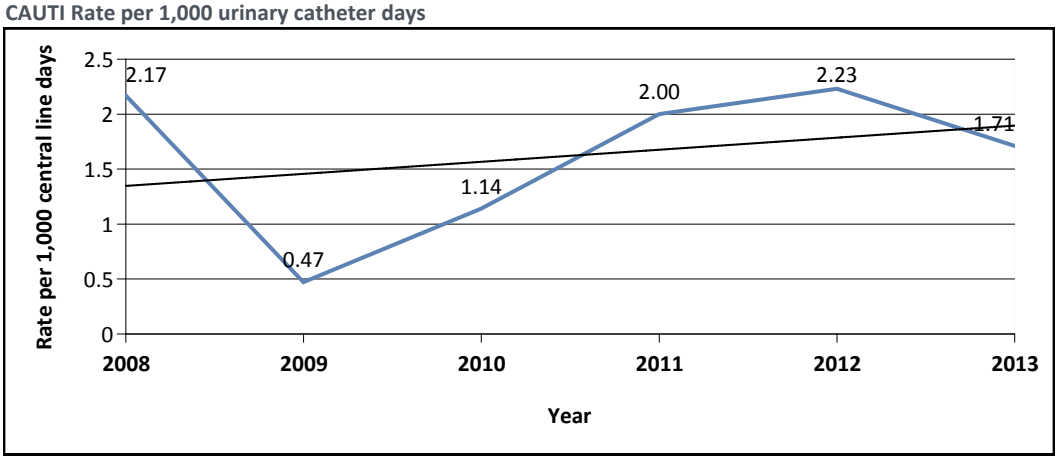
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	10,765	1	0	8	0	1	0	7	1	11	0	2.69
2009	27,442	4	1	9	0	5	0	15	2	11	0	1.71
2010	26,527	6	0	17	0	6	0	26	1	20	1	2.90
2011	25,152	0	0	23	1	8	0	20	3	27	0	3.26
2012	24,815	6	0	10	0	9	0	26	0	22	3	3.06
2013	26,879	3	0	25	0	8	0	10	0	31	0	2.86

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
2013	8	7.13	1.12	0.48 - 2.21	Same as

CAUTI Rate per 1,000 urinary catheter days



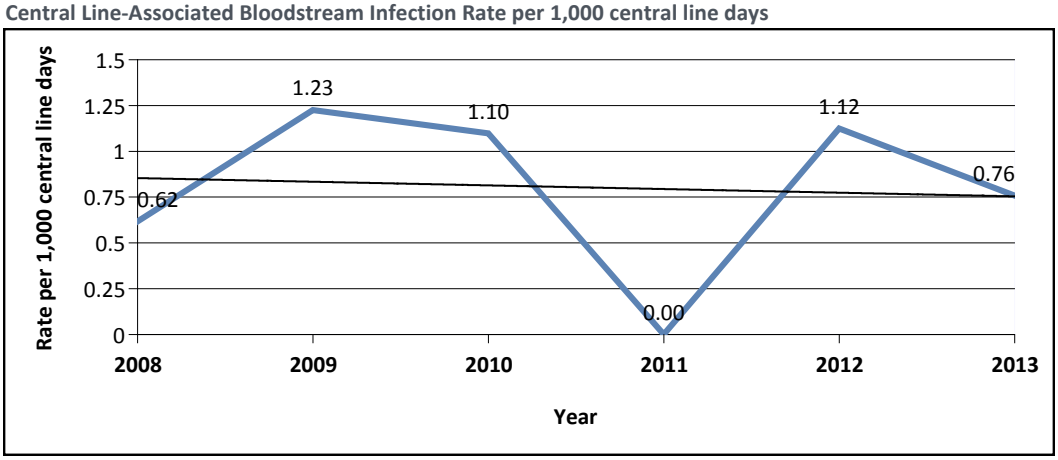
HANOVER HOSPITAL

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
2013	2	1.78	1.13	0.13 - 4.06	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 (2013): 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
2013	13,854	0	0	0	0	0	0	0	0	0	0	0.00

HAZLETON GENERAL HOSPITAL

NHSN ID: 11878

Hospital type: Acute care general hospital

Number of licensed beds (2013): 150

Number of reported Healthcare-Associated Infections:

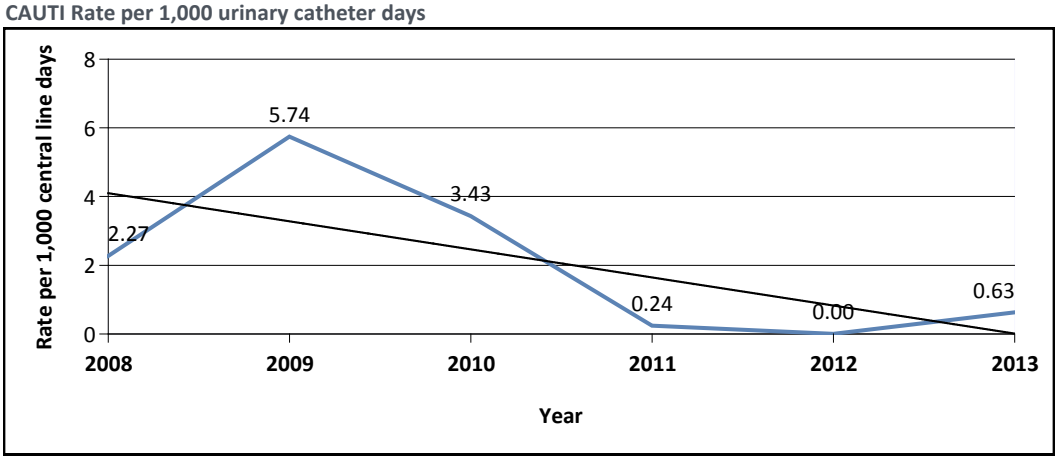
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	18,376	0	0	18	0	2	0	3	1	14	0	2.07
2009	34,673	5	0	37	0	7	0	7	2	60	0	3.40
2010	34,045	5	0	23	0	5	0	12	3	42	0	2.64
2011	33,295	5	0	10	0	6	0	10	2	8	0	1.23
2012	32,401	6	0	46	1	8	0	22	0	3	0	2.65
2013	33,088	6	0	49	4	6	0	16	3	12	0	2.90

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
2013	5	12.11	0.41	0.13 - 0.96	Better

CAUTI Rate per 1,000 urinary catheter days



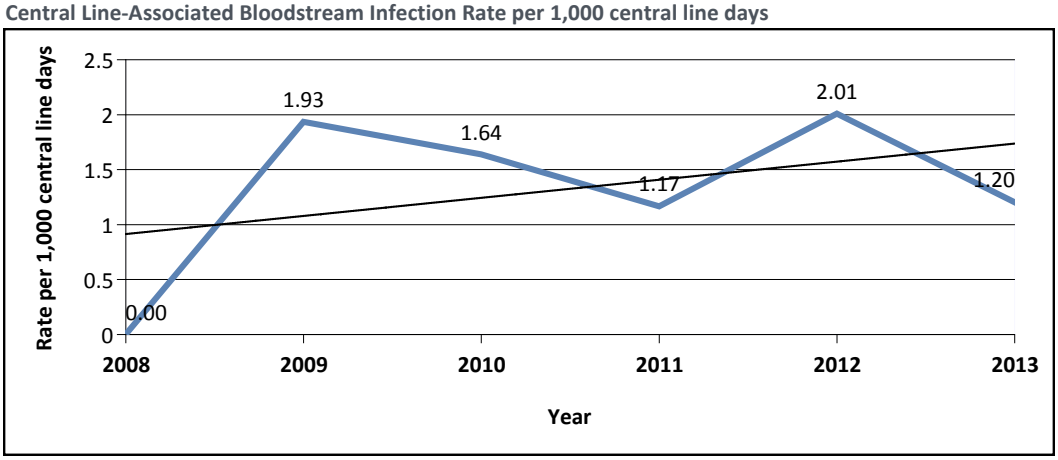
HAZLETON GENERAL HOSPITAL

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
2013	5	2.80	1.79	0.58 - 4.17	Same as

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 (2013): 162

Number of reported Healthcare-Associated Infections:

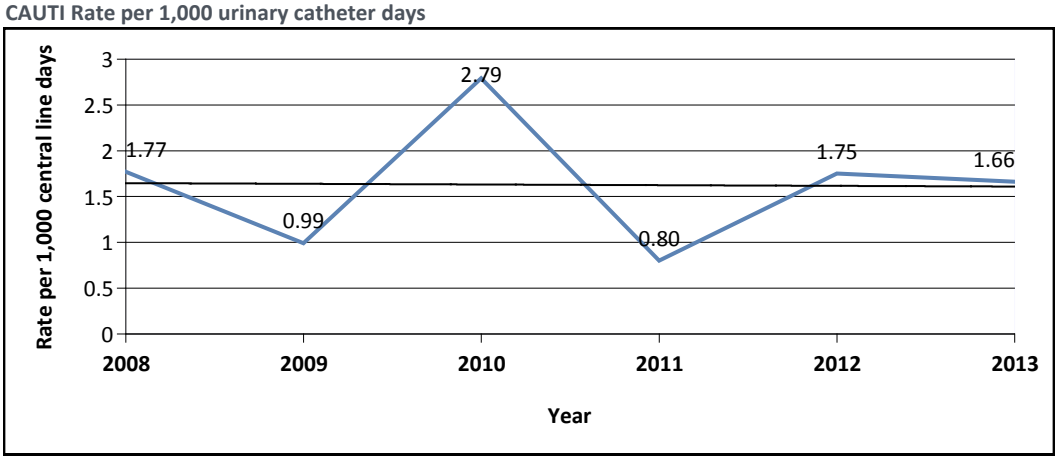
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	17,726	3	2	16	1	1	0	0	2	15	0	2.26
2009	36,648	0	0	12	0	1	0	0	1	16	0	0.82
2010	30,991	1	0	9	0	3	0	0	0	25	0	1.23
2011	31,608	2	1	5	0	0	0	0	0	29	0	1.17
2012	34,709	1	0	1	0	0	0	0	0	12	0	0.40
2013	33,138	3	0	4	2	1	0	0	0	20	0	0.91

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
2013	5	4.51	1.11	0.36 - 2.59	Same as

CAUTI Rate per 1,000 urinary catheter days



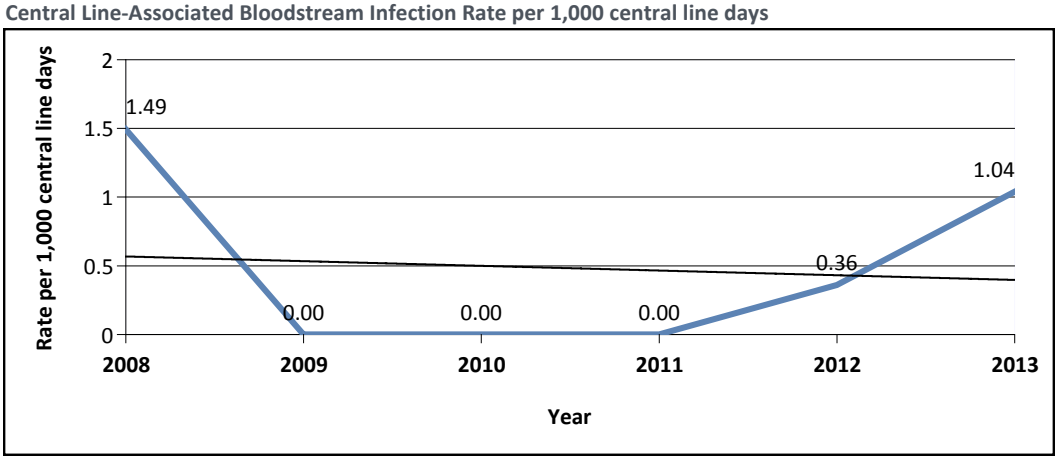
HEALTHSOUTH HARMARVILLE REHABILITATION HOSPITAL

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
2013	2	1.30	1.54	0.17 - 5.57	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 (2013): 73

Number of reported Healthcare-Associated Infections:

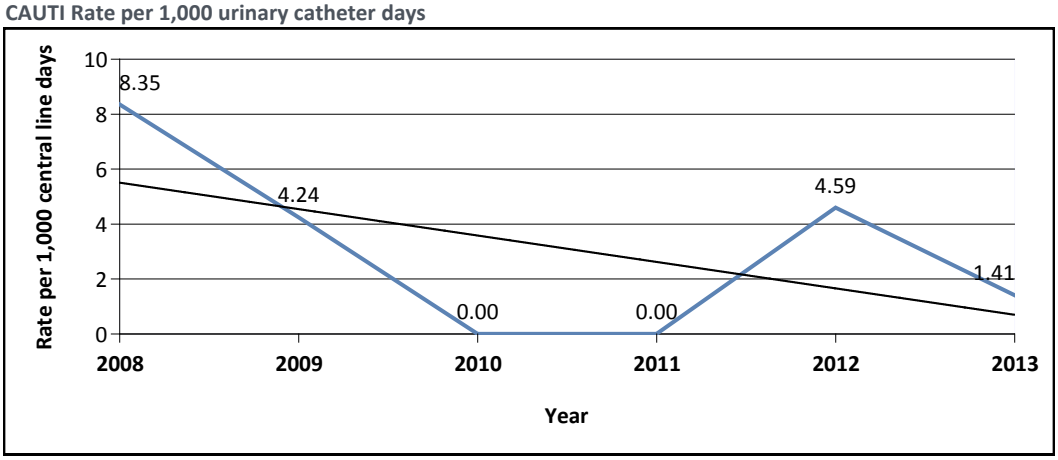
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	6,429	1	0	4	0	0	0	0	1	12	0	2.80
2009	13,464	3	0	2	0	0	0	0	0	17	0	1.63
2010	12,452	1	0	4	0	1	0	0	2	6	0	1.12
2011	11,594	1	0	7	0	0	0	0	2	11	0	1.81
2012	13,305	3	0	4	0	0	0	0	3	15	0	1.88
2013	15,733	3	2	4	0	0	0	0	1	19	0	1.84

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
2013	1	1.05	0.96	0.01 - 5.32	Same as

CAUTI Rate per 1,000 urinary catheter days



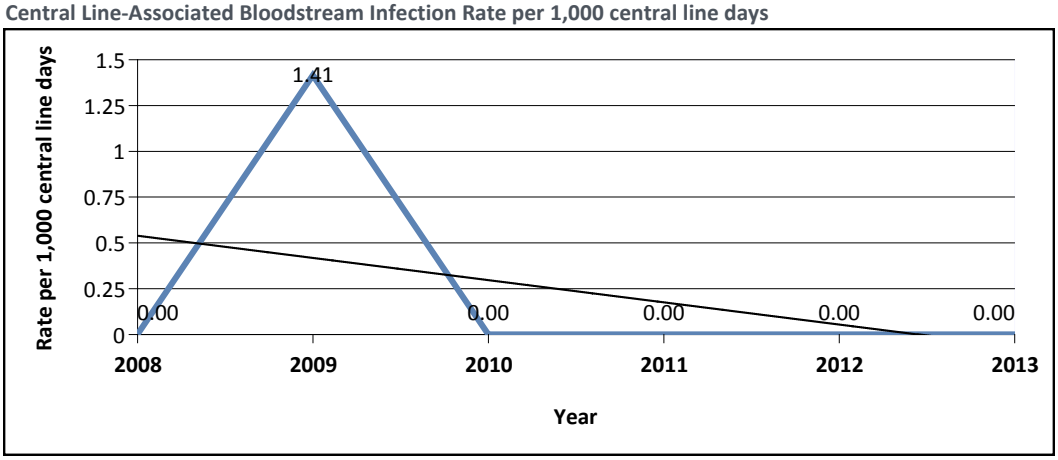
HEALTHSOUTH NITTANY VALLEY REHABILITATION HOSPITAL

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
2013	0	0.56	0.00	0 - 6.56	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 (2013): 60

Number of reported Healthcare-Associated Infections:

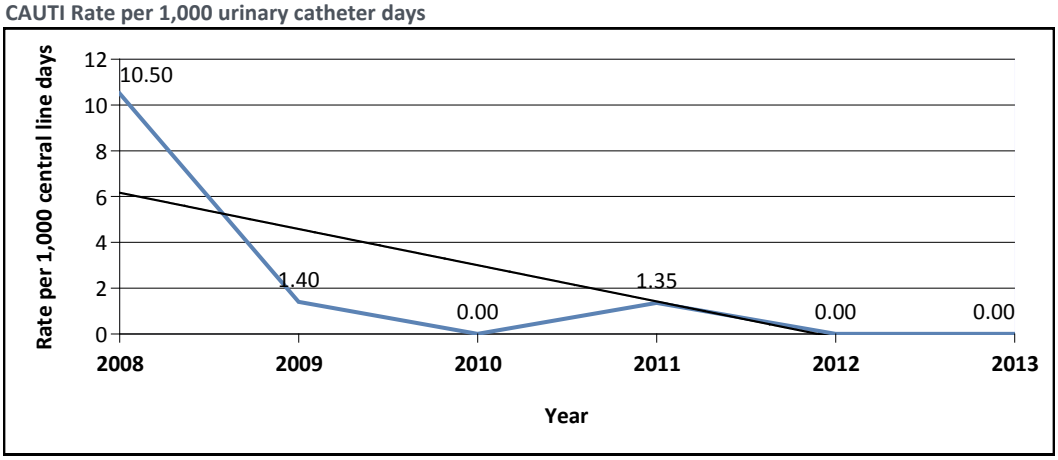
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	6,829	1	2	1	0	0	0	0	0	12	0	2.34
2009	15,227	0	1	1	0	0	0	0	0	11	0	0.85
2010	14,813	0	0	3	0	0	0	0	0	12	0	1.01
2011	15,204	1	0	2	0	0	0	0	0	17	0	1.32
2012	15,333	0	1	3	1	0	0	0	0	7	0	0.78
2013	16,445	1	0	3	0	0	0	0	0	15	0	1.16

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
2013	0	0.63	0.00	0 - 5.85	Same as

CAUTI Rate per 1,000 urinary catheter days



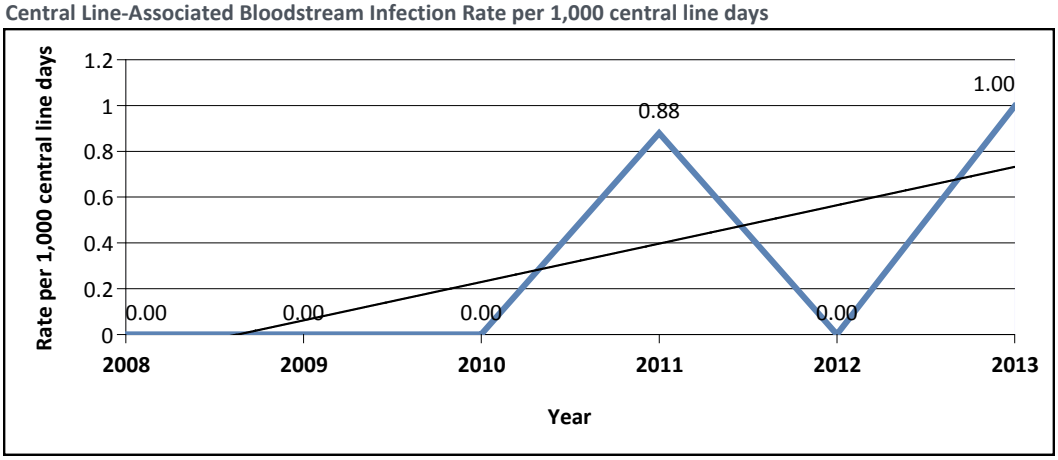
HEALTHSOUTH READING REHABILITATION HOSPITAL

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
2013	1	0.68	1.48	0.02 - 8.24	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 (2013): 80

Number of reported Healthcare-Associated Infections:

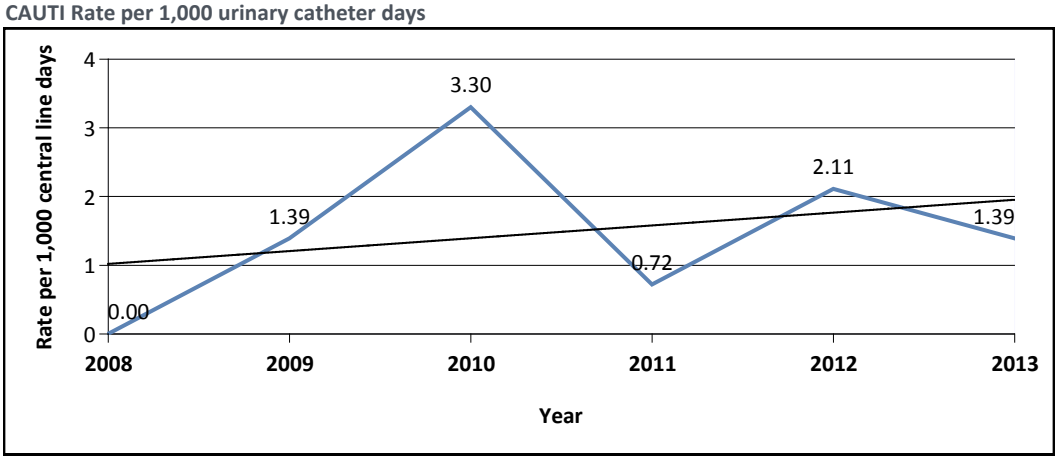
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	11,317	2	0	5	1	1	0	0	5	7	0	1.86
2009	22,000	3	0	6	1	2	0	0	0	33	0	2.05
2010	22,173	0	2	7	0	2	0	0	5	26	0	1.89
2011	23,971	1	0	4	0	2	0	0	4	22	0	1.38
2012	25,280	2	0	4	0	2	0	0	6	26	0	1.58
2013	25,915	1	1	1	0	2	0	0	3	21	0	1.12

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
2013	2	2.14	0.94	0.11 - 3.38	Same as

CAUTI Rate per 1,000 urinary catheter days



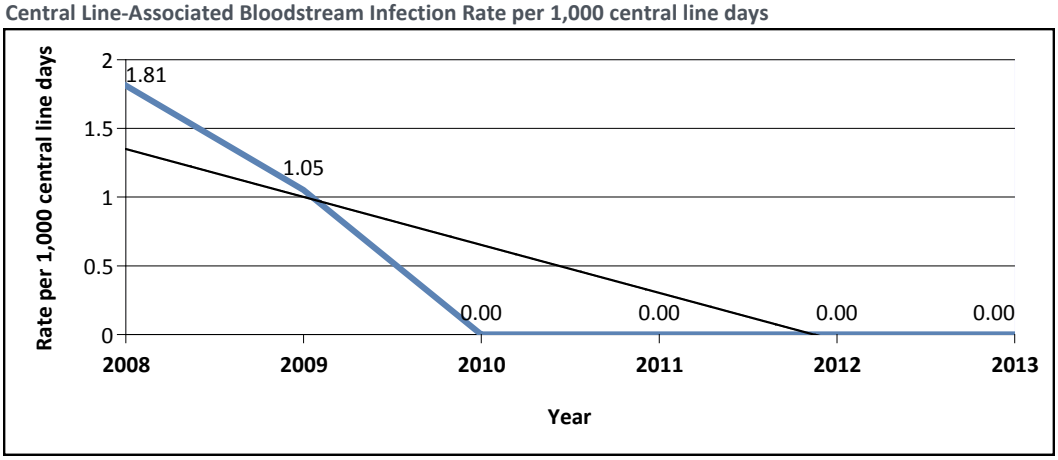
HEALTHSOUTH REHABILITATION HOSPITAL OF ALTOONA

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
2013	0	0.71	0.00	0 - 5.18	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 (2013): 108

Number of reported Healthcare-Associated Infections:

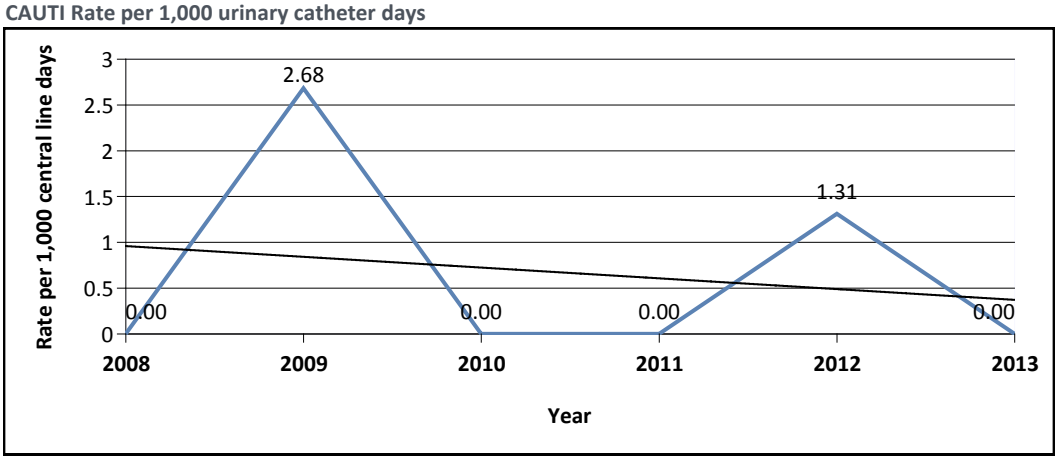
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	8,032	1	0	1	1	1	0	0	2	9	0	1.87
2009	24,254	2	0	0	0	4	0	0	4	11	0	0.87
2010	26,319	3	0	13	0	2	0	0	3	4	0	0.95
2011	25,219	1	0	1	0	4	0	0	0	3	0	0.36
2012	22,729	1	0	8	0	0	0	0	0	2	0	0.48
2013	21,661	2	0	7	0	0	0	0	0	0	0	0.42

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
2013	0	1.42	0.00	0 - 2.59	Same as

CAUTI Rate per 1,000 urinary catheter days



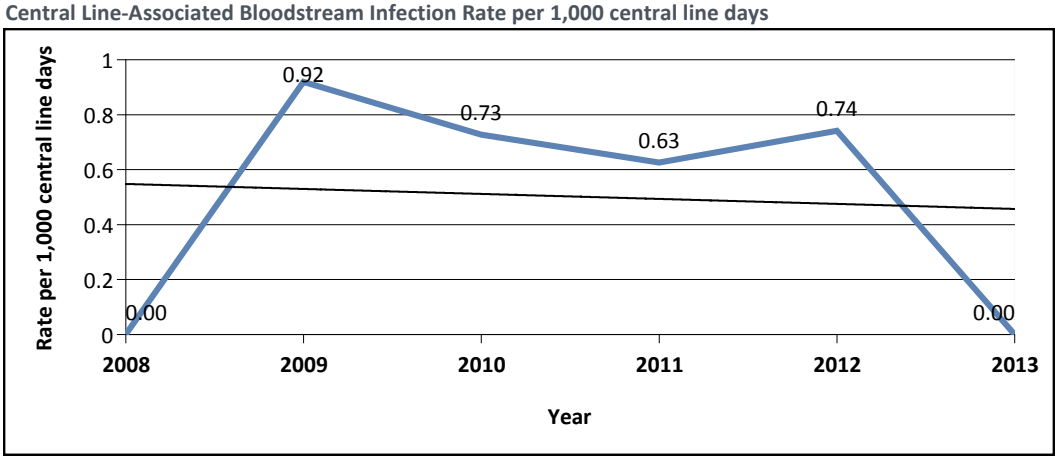
HEALTHSOUTH REHABILITATION HOSPITAL OF ERIE

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
2013	0	0.84	0.00	0 - 4.36	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 (2013): 75

Number of reported Healthcare-Associated Infections:

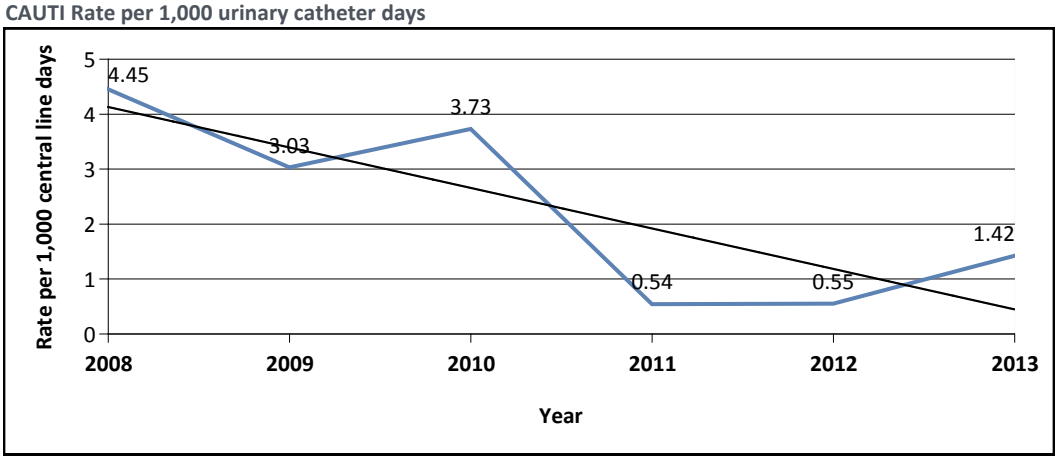
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	7,446	1	0	6	0	1	0	0	0	7	0	2.01
2009	17,563	0	0	6	0	2	0	0	0	22	0	1.71
2010	17,596	1	0	4	0	3	0	0	0	15	0	1.31
2011	16,976	0	0	2	0	0	0	0	0	9	0	0.65
2012	18,430	2	0	2	0	0	0	0	0	5	0	0.49
2013	18,703	3	0	2	0	0	0	0	0	18	0	1.23

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
2013	2	2.11	0.95	0.11 - 3.43	Same as

CAUTI Rate per 1,000 urinary catheter days



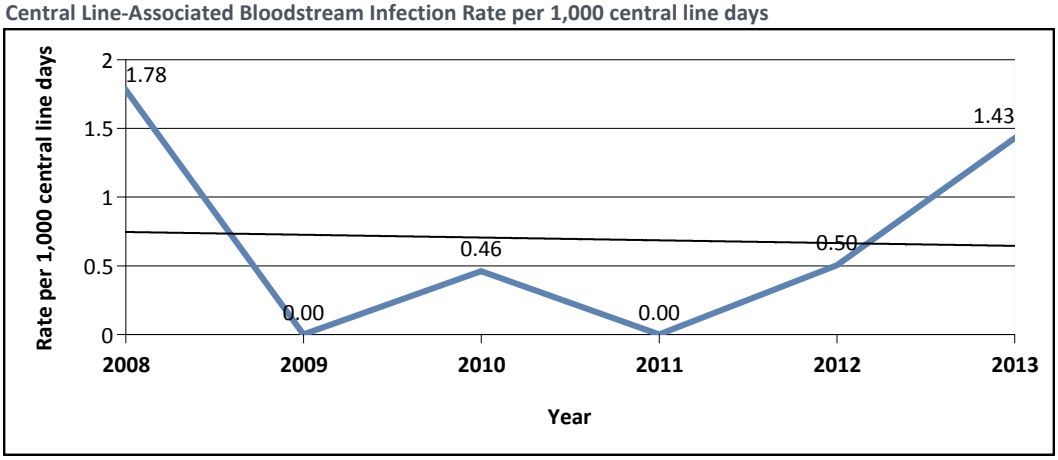
HEALTHSOUTH REHABILITATION HOSPITAL OF MECHANICSBURG

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
2013	2	0.94	2.12	0.24 - 7.66	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 (2013): 44

Number of reported Healthcare-Associated Infections:

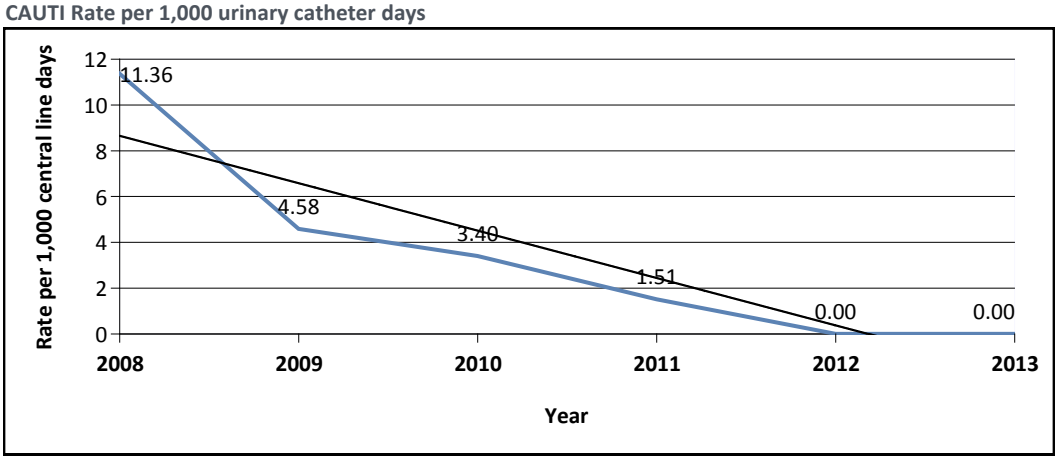
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,541	0	0	2	0	0	0	0	1	12	0	3.30
2009	10,110	1	0	2	0	0	0	0	0	18	0	2.08
2010	9,586	1	0	4	0	0	0	0	1	12	0	1.88
2011	11,046	0	0	0	0	2	0	0	0	14	0	1.45
2012	12,014	0	0	0	0	0	0	0	0	14	0	1.17
2013	12,829	0	0	3	0	0	0	0	1	14	0	1.40

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
2013	0	1.59	0.00	0 - 2.3	Same as

CAUTI Rate per 1,000 urinary catheter days



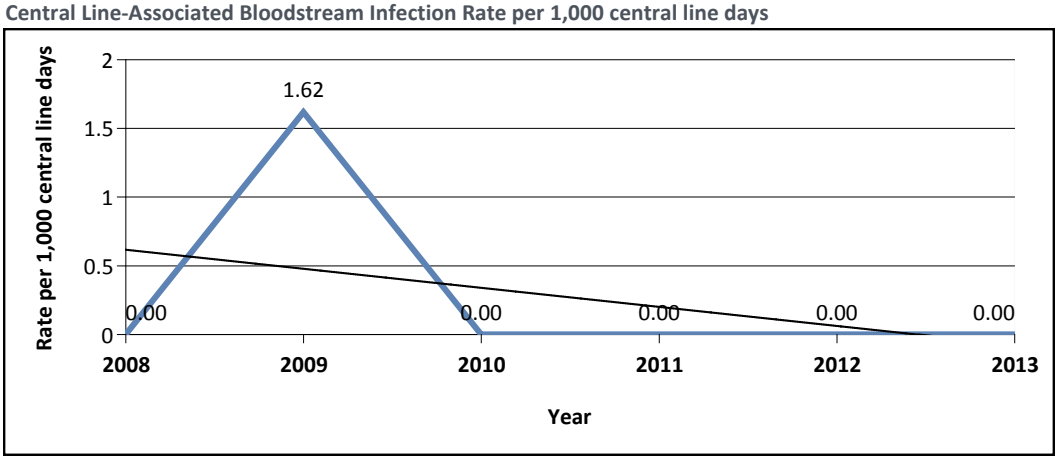
HEALTHSOUTH REHABILITATION HOSPITAL OF SEWICKLEY

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
2013	0	0.47	0.00	0 - 7.86	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 (2013): 90

Number of reported Healthcare-Associated Infections:

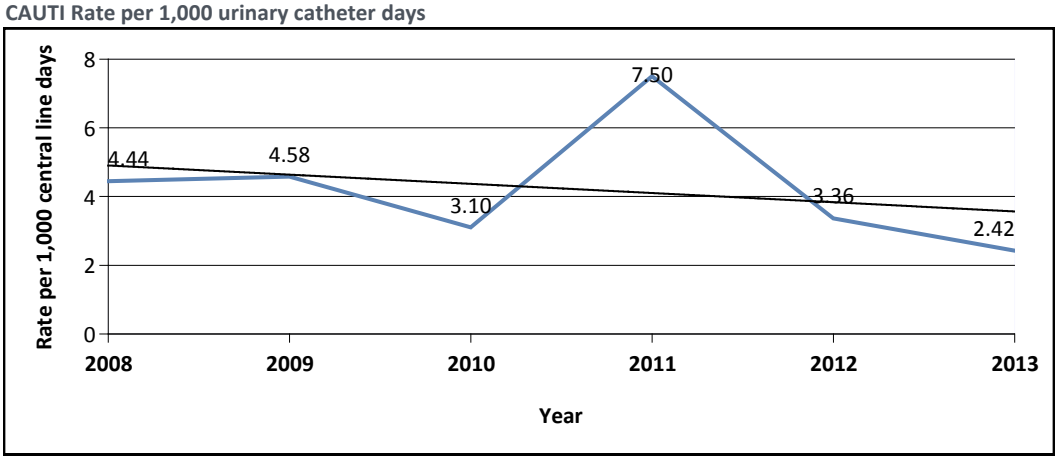
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	10,125	0	0	7	0	0	0	0	0	15	0	2.17
2009	19,198	0	0	24	0	0	0	0	1	27	0	2.71
2010	19,468	0	1	2	1	1	0	0	3	20	0	1.44
2011	20,041	1	8	20	1	5	0	0	1	34	0	3.49
2012	19,635	1	5	6	1	9	0	0	5	19	0	2.34
2013	18,833	4	11	11	0	5	0	0	9	36	0	4.04

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
2013	3	1.84	1.63	0.33 - 4.75	Same as

CAUTI Rate per 1,000 urinary catheter days



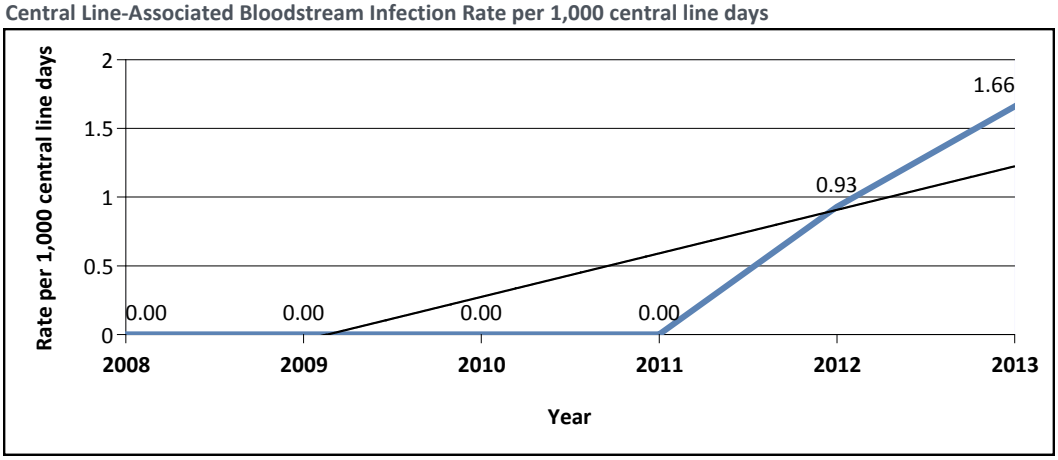
HEALTHSOUTH REHABILITATION HOSPITAL OF YORK

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
2013	2	0.81	2.47	0.28 - 8.9	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 (2013): 148

Number of reported Healthcare-Associated Infections:

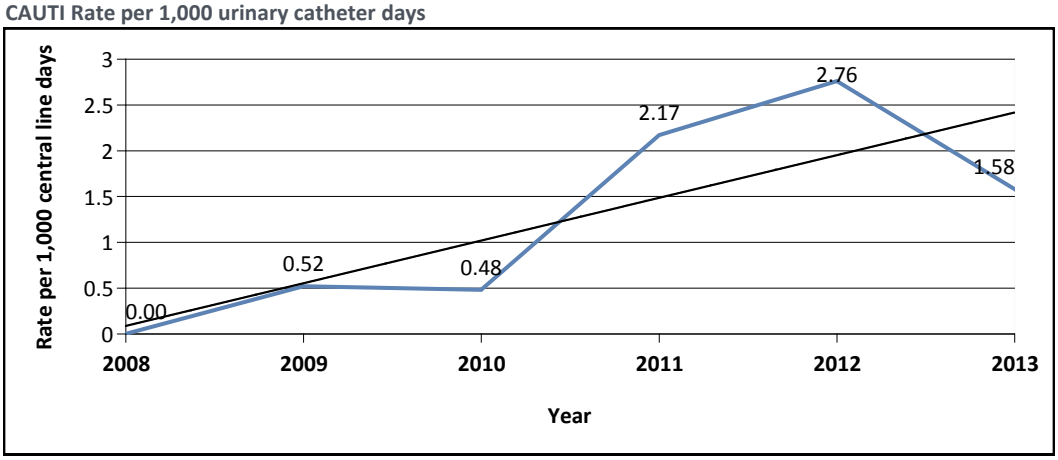
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,353	0	0	0	0	1	0	1	0	0	1	0.89
2009	9,706	1	0	2	0	4	0	6	0	1	0	1.44
2010	10,276	0	0	2	0	2	3	16	1	2	0	2.53
2011	10,692	2	0	0	0	5	6	14	3	10	0	3.74
2012	11,050	1	0	0	0	1	1	21	6	7	0	3.35
2013	11,015	0	0	2	0	0	1	7	0	4	0	1.27

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
2013	3	3.96	0.76	0.15 - 2.21	Same as

CAUTI Rate per 1,000 urinary catheter days



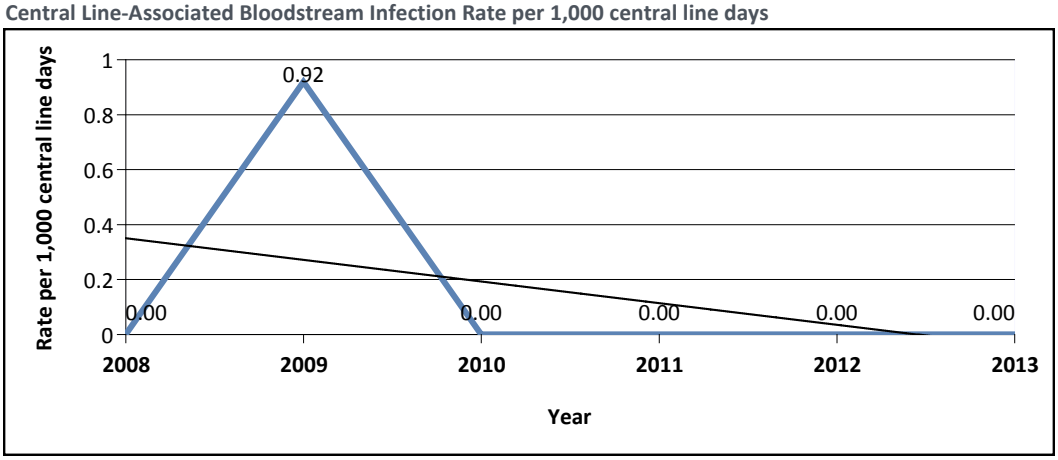
HEART OF LANCASTER REGIONAL MEDICAL CENTER

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
2013	0	0.58	0.00	0 - 6.28	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				-	
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
2013	0	0.26	0.00	0 - 14.01	Same as

HERITAGE VALLEY BEAVER

NHSN ID: 11831

Hospital type: Acute care general hospital

Number of licensed beds (2013): 359

Number of reported Healthcare-Associated Infections:

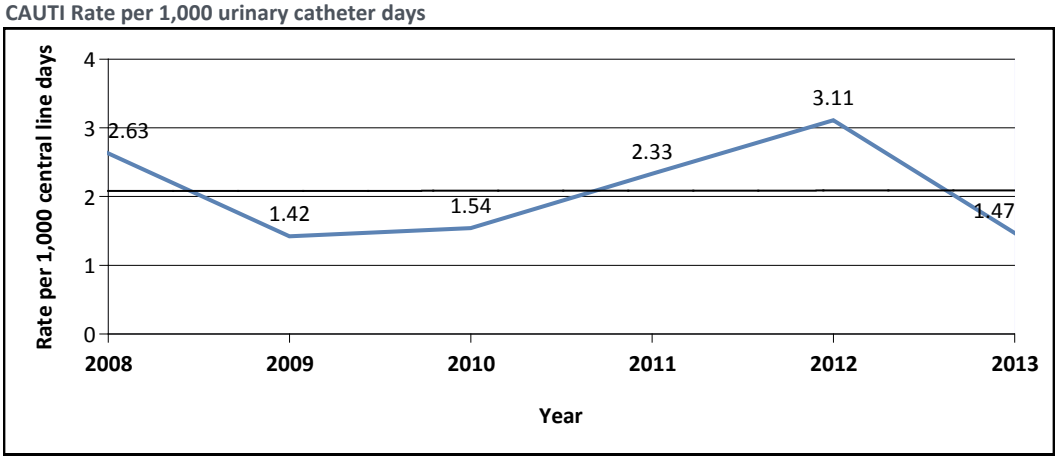
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	34,571	9	0	15	0	6	1	26	2	21	0	2.31
2009	86,120	30	0	41	0	17	0	55	6	34	0	2.12
2010	86,652	18	2	43	2	17	1	71	12	45	0	2.44
2011	83,343	24	0	46	1	20	2	37	11	64	2	2.48
2012	79,459	15	0	44	2	22	0	47	7	79	0	2.72
2013	72,271	13	0	52	2	9	0	41	4	45	0	2.30

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
2013	25	35.77	0.70	0.45 - 1.03	Same as

CAUTI Rate per 1,000 urinary catheter days



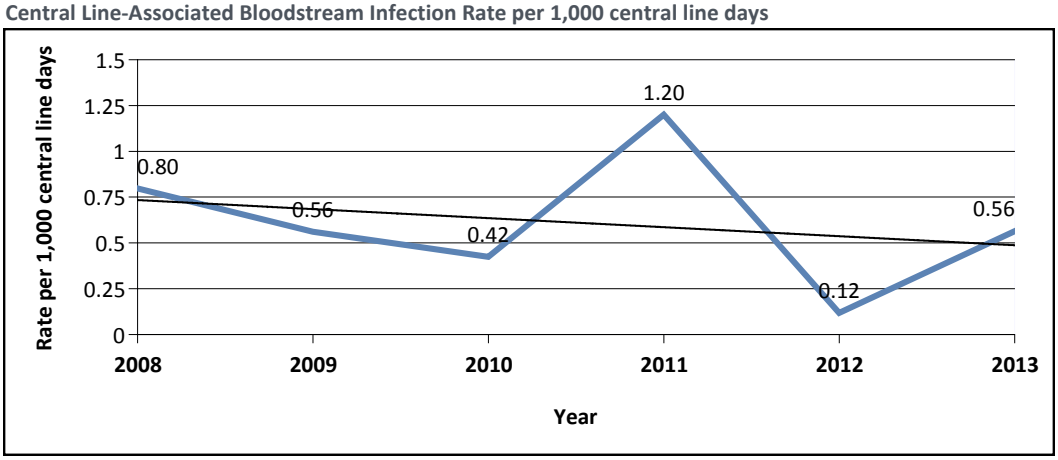
HERITAGE VALLEY BEAVER

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
2013	4	5.75	0.70	0.19 - 1.78	Same as

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 (2013): 186

Number of reported Healthcare-Associated Infections:

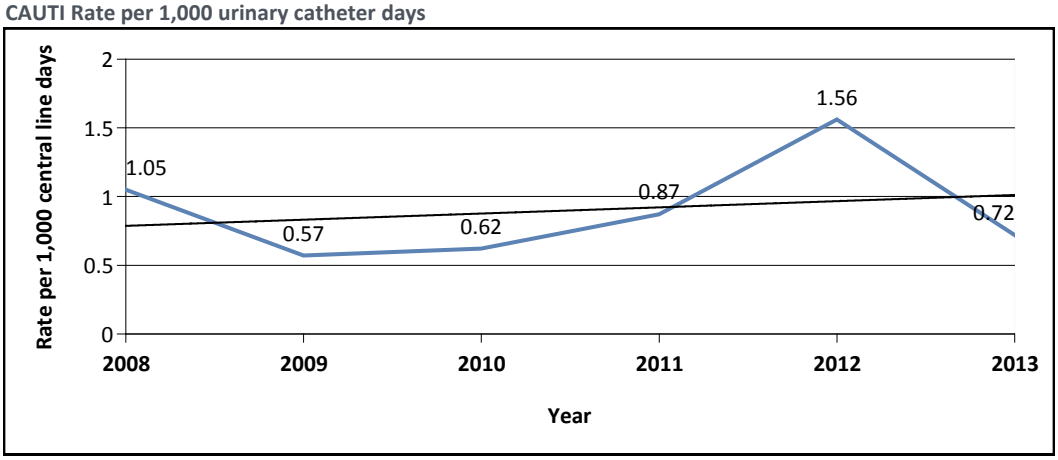
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	22,112	3	0	6	0	2	1	5	1	7	1	1.18
2009	47,101	4	1	2	0	2	0	36	2	11	0	1.23
2010	45,426	3	0	10	0	2	0	39	0	11	0	1.43
2011	46,555	8	0	28	3	8	0	29	1	17	0	2.02
2012	44,927	4	0	20	0	11	0	35	3	31	0	2.31
2013	41,548	2	0	26	0	1	0	25	1	13	0	1.64

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
2013	7	14.81	0.47	0.19 - 0.97	Better

CAUTI Rate per 1,000 urinary catheter days



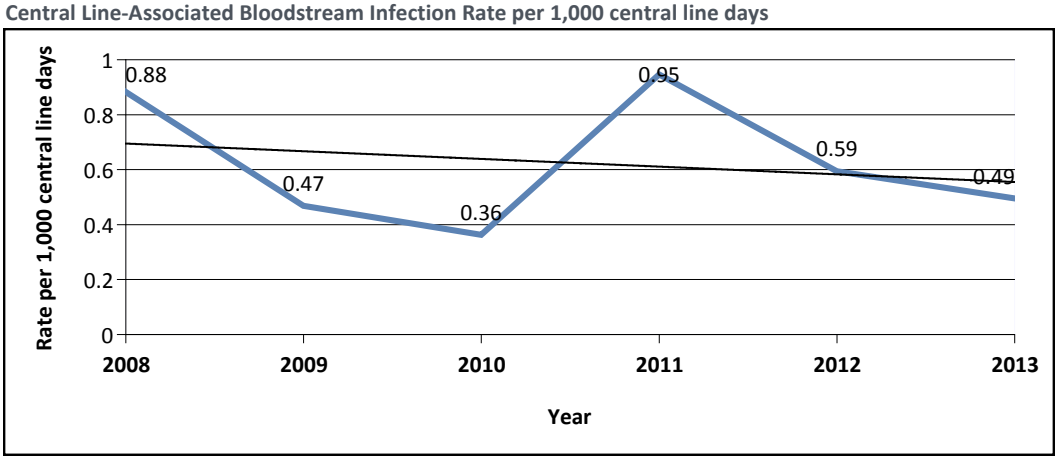
HERITAGE VALLEY SEWICKLEY

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
2013	2	2.72	0.74	0.08 - 2.65	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 (2013): 71

Number of reported Healthcare-Associated Infections:

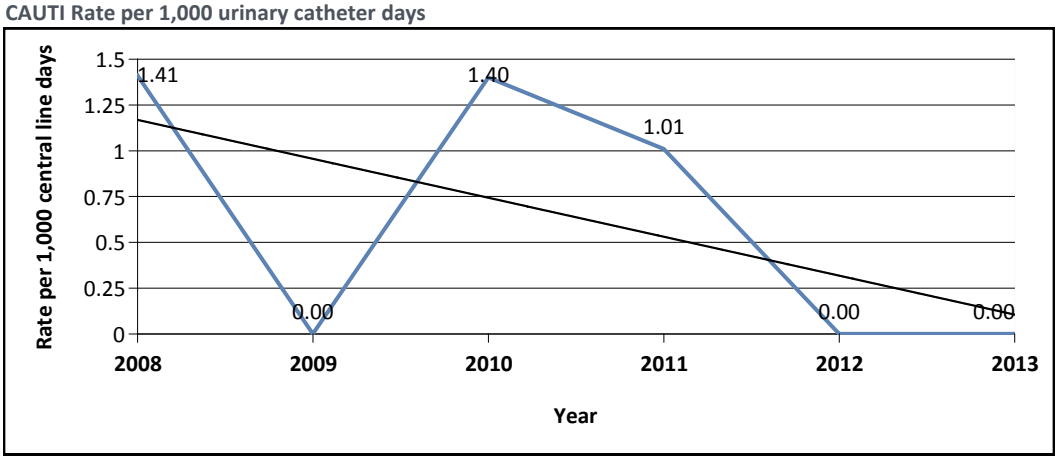
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	5,867	3	0	1	0	0	0	1	0	1	1	1.19
2009	11,495	0	0	1	0	0	0	1	0	0	0	0.17
2010	12,273	0	0	1	0	2	0	2	1	1	0	0.57
2011	12,457	1	1	0	0	0	0	6	0	1	0	0.72
2012	11,661	2	0	4	0	0	0	5	0	0	0	0.94
2013	11,255	0	0	2	0	0	0	3	5	2	0	1.07

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
2013	0	1.78	0.00	0 - 2.07	Same as

CAUTI Rate per 1,000 urinary catheter days



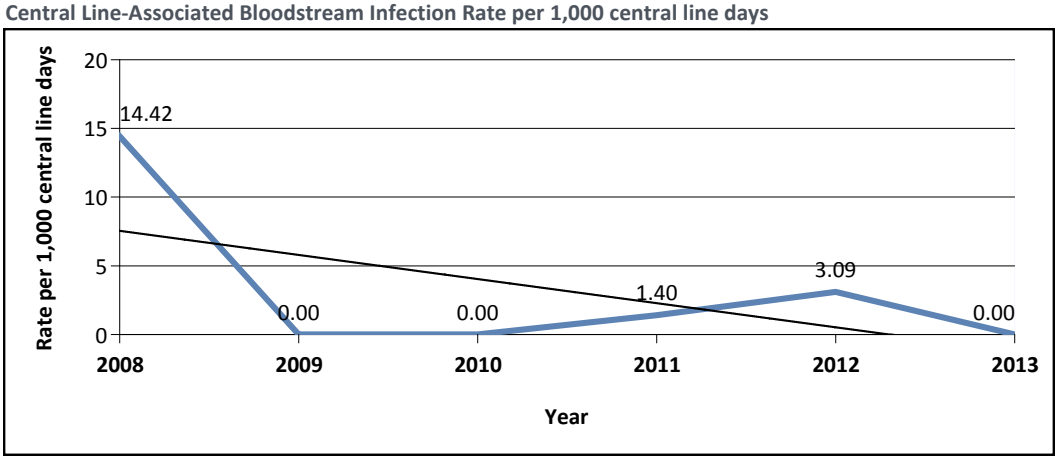
HIGHLANDS HOSPITAL

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
2013	0	0.41	0.00	0 - 9.05	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 (2013): 242

Number of reported Healthcare-Associated Infections:

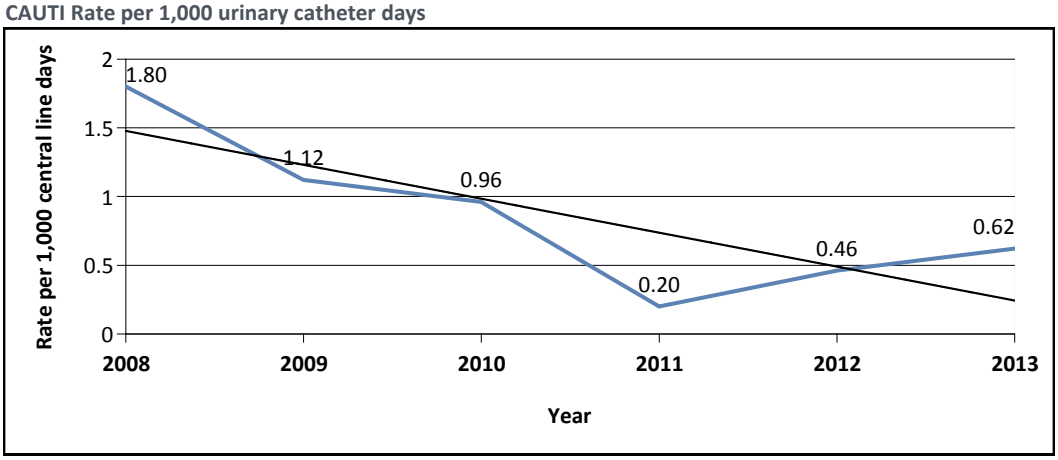
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	33,506	11	0	7	0	0	1	9	2	19	0	1.46
2009	67,803	19	3	21	8	3	1	30	2	35	2	1.83
2010	64,672	7	0	31	2	13	2	34	6	16	1	1.73
2011	64,189	3	0	75	0	6	1	19	5	10	0	1.85
2012	60,087	7	0	23	0	10	0	28	5	12	0	1.41
2013	58,369	3	1	27	0	5	2	24	2	12	1	1.32

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
2013	5	12.28	0.41	0.13 - 0.95	Better

CAUTI Rate per 1,000 urinary catheter days



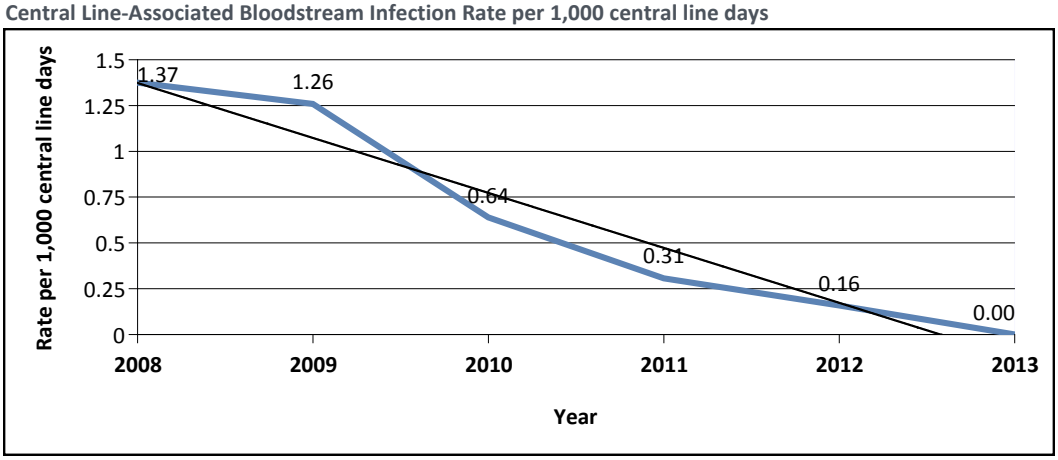
HOLY REDEEMER HOSPITAL AND MEDICAL CENTER

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
2013	0	3.88	0.00	0 - 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	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
2013	1	0.54	1.84	0.02 - 10.22	Same as

HOLY SPIRIT HOSPITAL

NHSN ID: 12387

Hospital type: Acute care general hospital

Number of licensed beds (2013): 311

Number of reported Healthcare-Associated Infections:

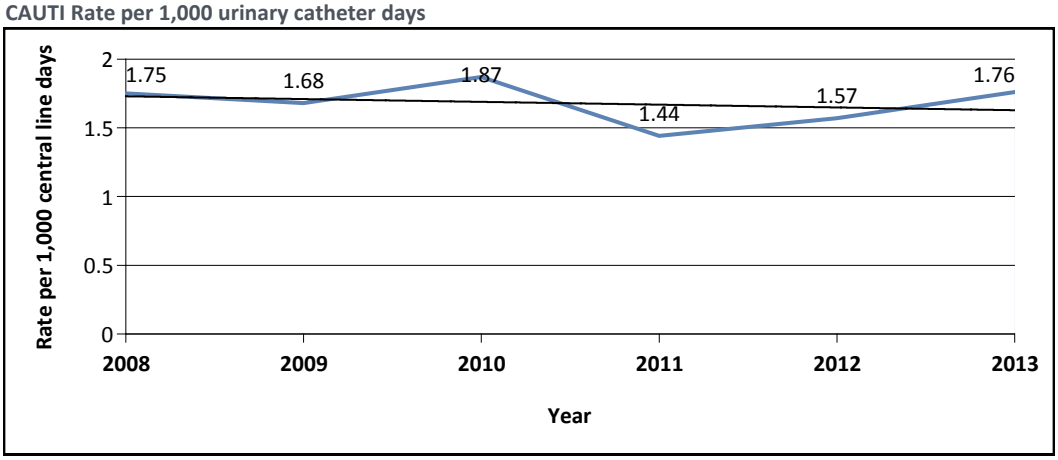
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	31,669	10	4	23	0	9	0	20	4	22	0	2.91
2009	69,804	14	3	43	7	18	0	58	7	35	0	2.65
2010	71,373	17	4	34	5	29	1	39	5	43	2	2.51
2011	73,682	12	2	32	4	8	0	36	6	38	1	1.89
2012	72,802	9	1	24	3	11	0	36	1	29	1	1.58
2013	73,479	6	3	67	1	5	0	28	3	48	0	2.19

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
2013	26	22.52	1.15	0.75 - 1.69	Same as

CAUTI Rate per 1,000 urinary catheter days



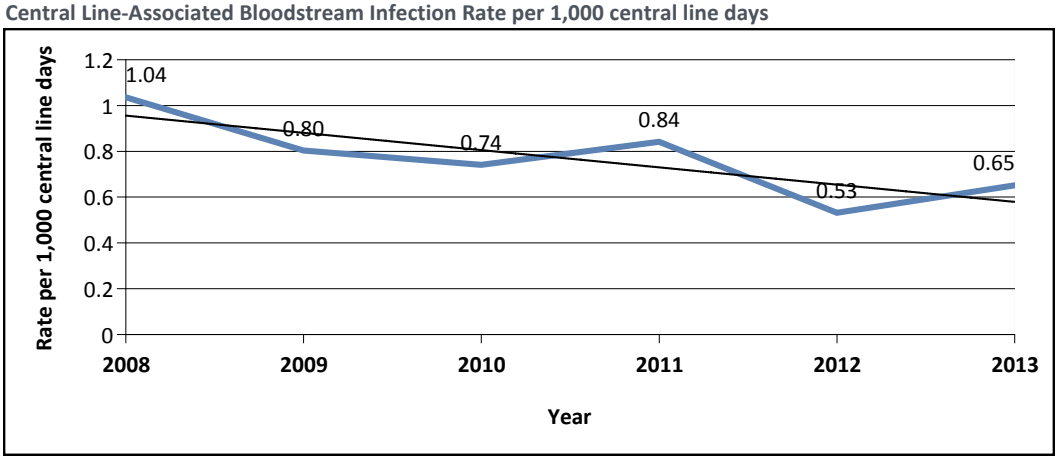
HOLY SPIRIT HOSPITAL

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
2013	6	6.20	0.97	0.35 - 2.11	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
2013	0	0.07	0.00	0 - 52.8	Same as

HORSHAM CLINIC

NHSN ID: 12543

Hospital type: Psychiatric hospital

Number of licensed beds (2013): 206

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
2013	64,902	0	25	0	0	0	0	0	0	18	0	0.66

HOSPITAL OF FOX CHASE CANCER CENTER

NHSN ID: 12134

Hospital type: Acute care general hospital

Number of licensed beds (2013): 98

Number of reported Healthcare-Associated Infections:

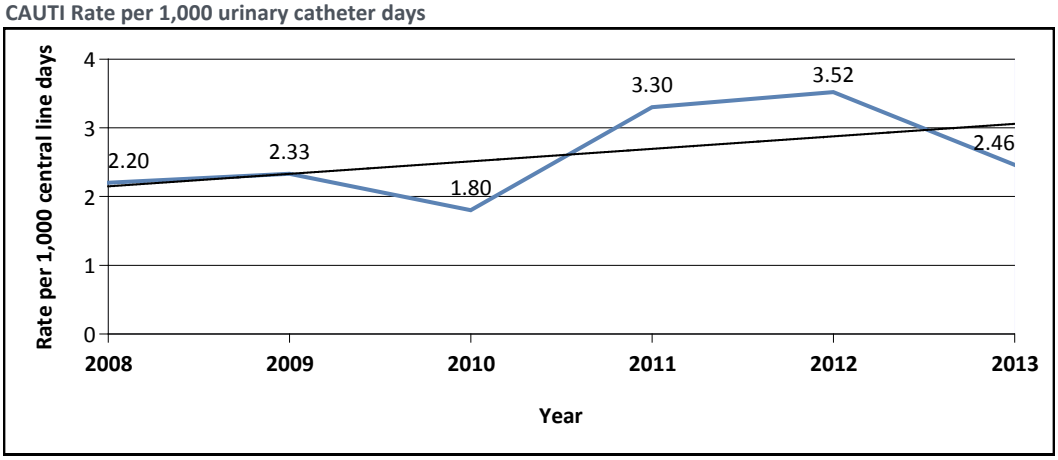
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	11,091	18	0	0	0	11	0	22	0	18	0	6.22
2009	23,117	6	0	13	0	8	0	17	0	23	0	2.90
2010	22,646	5	0	18	0	5	0	38	0	19	0	3.75
2011	22,367	11	0	8	0	6	0	37	0	24	0	3.84
2012	22,764	18	0	16	1	9	0	43	0	33	0	5.27
2013	21,559	18	0	10	0	9	0	45	0	18	0	4.64

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
2013	14	11.99	1.17	0.64 - 1.96	Same as

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
2013	13	14.64	0.89	0.47 - 1.52	Same as

HOSPITAL OF THE UNIV OF PENNSYLVANIA

NHSN ID: 10219

Hospital type: Acute care general hospital

Number of licensed beds (2013): 789

Number of reported Healthcare-Associated Infections:

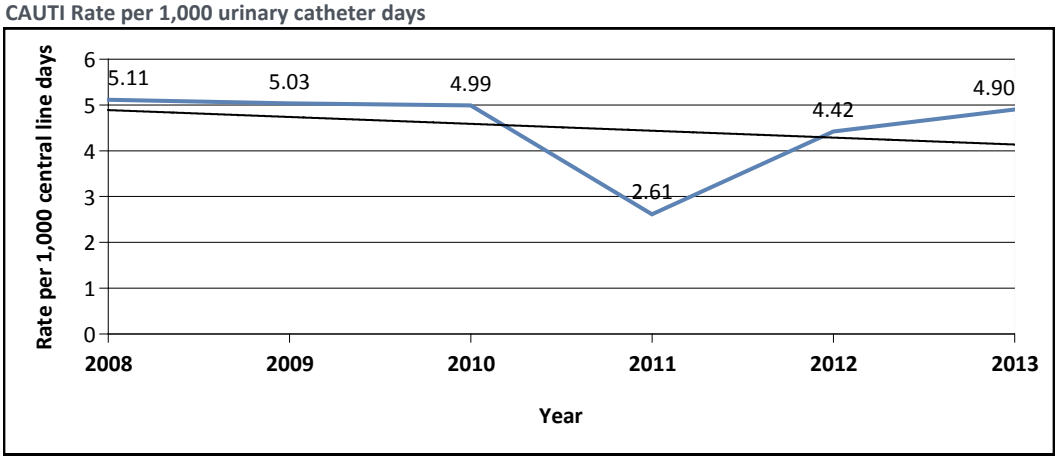
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	116,109	62	10	166	76	51	0	139	43	172	8	6.26
2009	249,449	73	50	387	151	119	5	226	82	335	18	5.80
2010	251,135	41	38	285	103	38	2	230	83	348	13	4.70
2011	249,501	39	52	232	103	71	2	264	60	235	11	4.28
2012	254,736	79	34	316	118	146	3	260	61	325	15	5.33
2013	254,172	77	39	421	220	110	2	273	74	451	15	6.62

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
2013	201	85.55	2.35	2.04 - 2.7	Worse

CAUTI Rate per 1,000 urinary catheter days



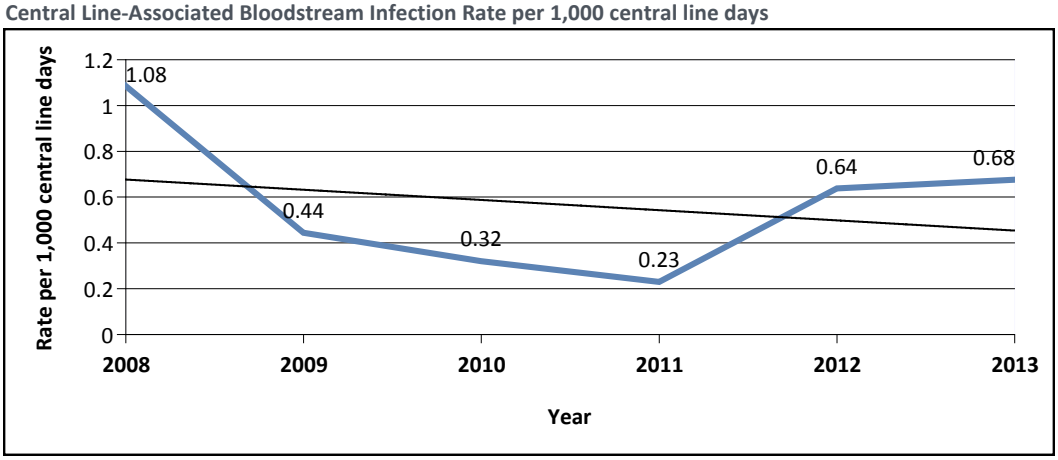
HOSPITAL OF THE UNIV OF PENNSYLVANIA

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
2013	54	64.57	0.84	0.63 - 1.09	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	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
2013	5	2.77	1.81	0.58 - 4.21	Same as

INDIANA REGIONAL MEDICAL CENTER

NHSN ID: 11759

Hospital type: Acute care general hospital

Number of licensed beds (2013): 164

Number of reported Healthcare-Associated Infections:

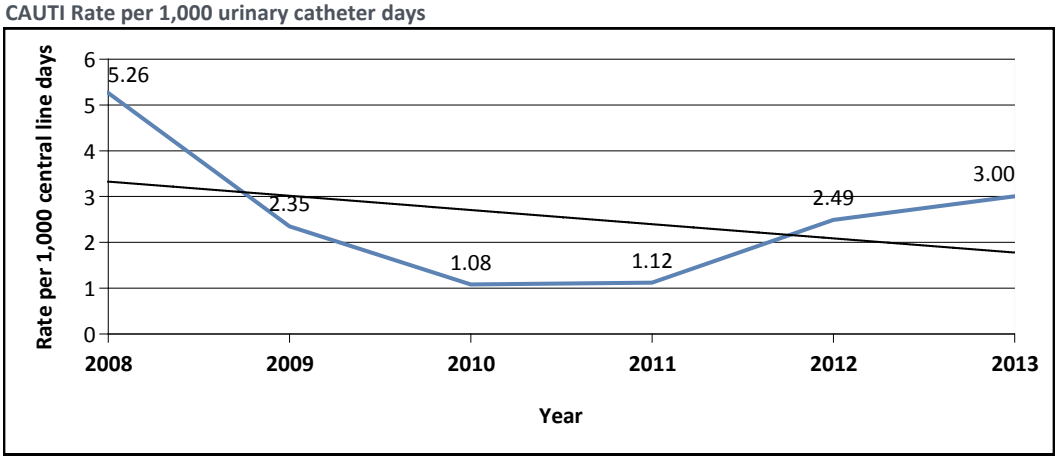
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	18,803	4	0	10	0	6	0	8	8	22	0	3.08
2009	43,329	4	0	32	0	12	1	10	8	22	0	2.05
2010	39,751	3	1	16	0	13	0	16	3	12	0	1.61
2011	40,201	3	0	23	0	14	0	12	1	15	0	1.69
2012	38,299	3	0	10	0	7	0	18	1	17	0	1.46
2013	37,757	2	0	8	0	8	0	8	0	20	0	1.22

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
2013	9	4.48	2.01	0.92 - 3.82	Same as

CAUTI Rate per 1,000 urinary catheter days



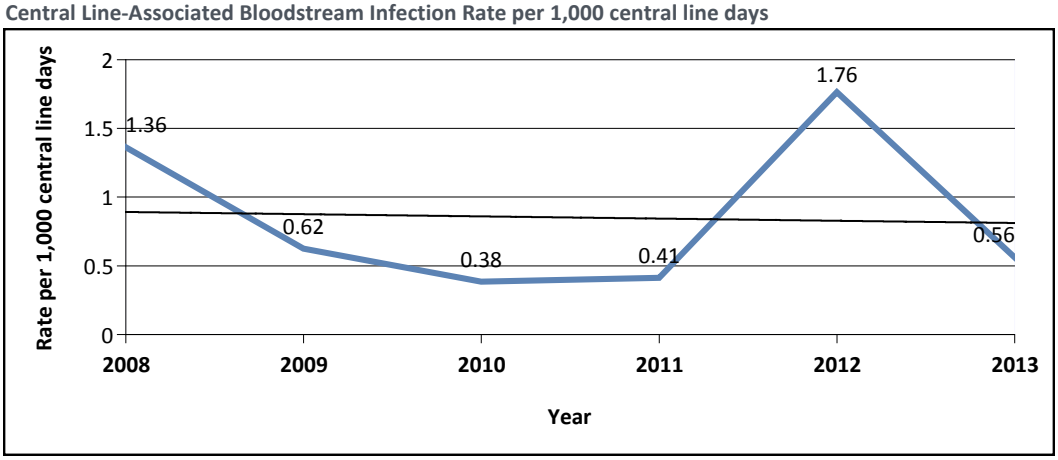
INDIANA REGIONAL MEDICAL CENTER

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
2013	1	1.20	0.83	0.01 - 4.64	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 (2013): 100

Number of reported Healthcare-Associated Infections:

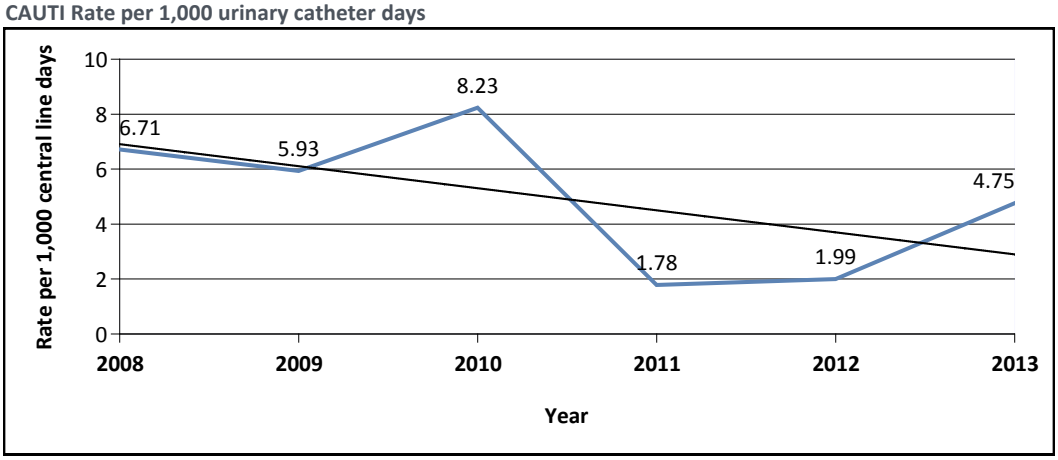
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	6,495	1	2	1	0	9	0	14	0	9	1	5.70
2009	11,852	1	1	13	1	9	0	14	0	16	0	4.64
2010	10,598	1	4	3	0	9	0	20	0	20	0	5.38
2011	9,767	1	2	4	0	9	1	15	3	8	0	4.40
2012	8,363	1	2	4	0	9	1	12	3	6	0	4.54
2013	7,850	1	3	2	0	5	0	16	0	6	0	4.20

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
2013	5	1.59	3.14	1.01 - 7.33	Worse

CAUTI Rate per 1,000 urinary catheter days



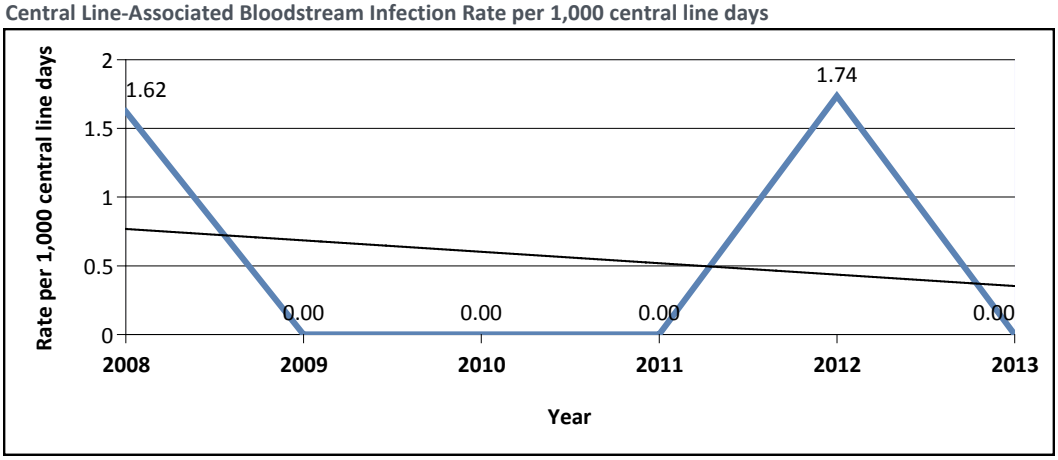
J C BLAIR MEMORIAL HOSP

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
2013	0	0.31	0.00	0 - 11.97	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 (2013): 217

Number of reported Healthcare-Associated Infections:

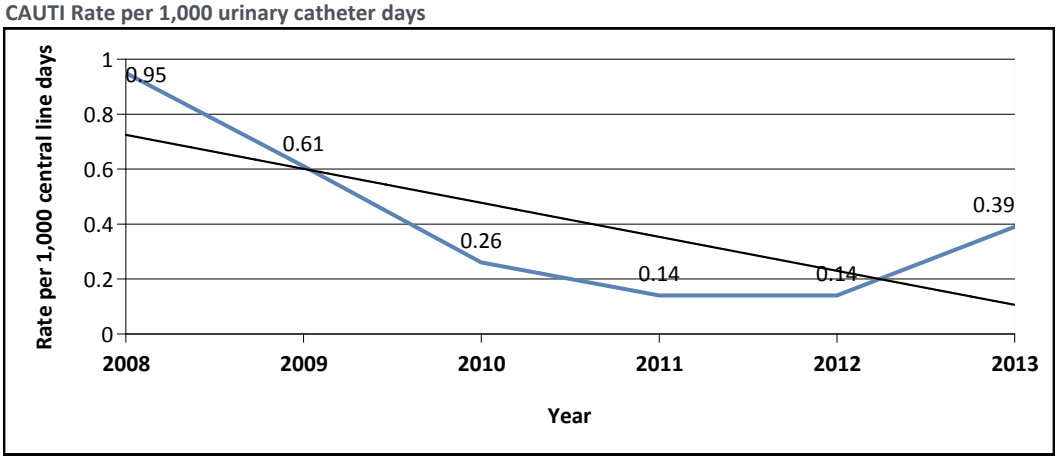
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	20,202	1	0	16	0	4	0	4	0	8	0	1.63
2009	53,157	6	0	54	0	7	0	18	0	6	1	1.73
2010	44,114	6	0	17	0	6	0	13	1	4	2	1.11
2011	38,782	7	0	15	0	6	0	8	0	3	1	1.03
2012	39,038	2	0	21	0	11	0	13	0	4	1	1.33
2013	38,470	8	0	11	0	9	0	8	0	7	2	1.17

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
2013	3	11.87	0.25	0.05 - 0.74	Better

CAUTI Rate per 1,000 urinary catheter days



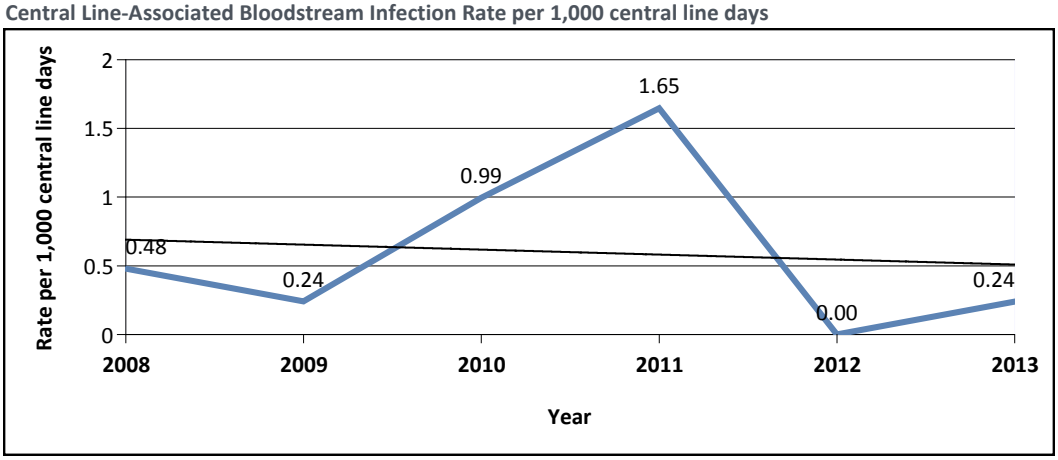
JAMESON MEMORIAL HOSPITAL

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
2013	1	2.82	0.35	0 - 1.97	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 (2013): 176

Number of reported Healthcare-Associated Infections:

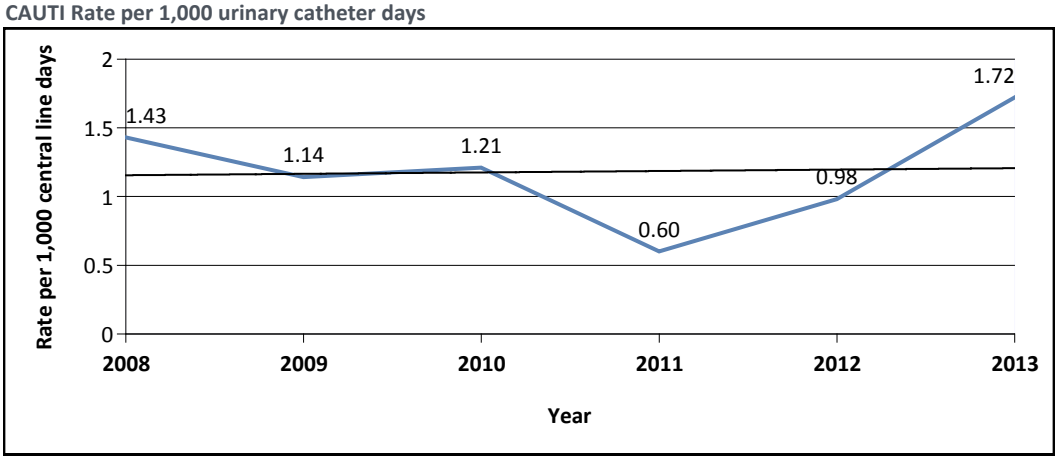
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	16,420	5	0	6	0	1	0	8	3	9	0	1.95
2009	43,447	16	0	10	0	0	0	12	3	18	1	1.38
2010	42,199	8	0	11	0	4	0	11	1	15	0	1.18
2011	41,037	3	0	4	1	5	0	12	1	8	0	0.83
2012	38,533	3	0	8	0	0	0	6	0	16	1	0.88
2013	33,276	11	0	8	1	4	0	10	3	26	0	1.89

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
2013	14	12.48	1.12	0.61 - 1.88	Same as

CAUTI Rate per 1,000 urinary catheter days



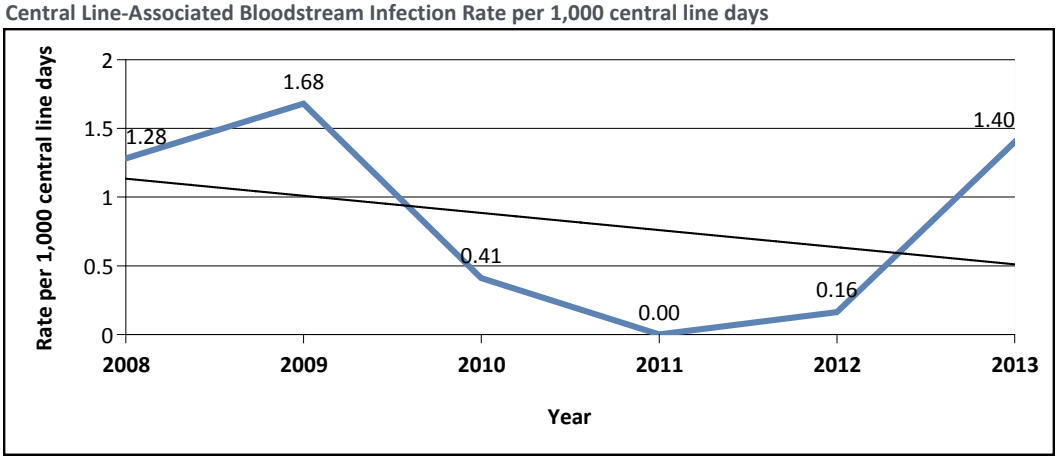
JEANES HOSPITAL

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
2013	8	3.84	2.08	0.9 - 4.11	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 (2013): 369

Number of reported Healthcare-Associated Infections:

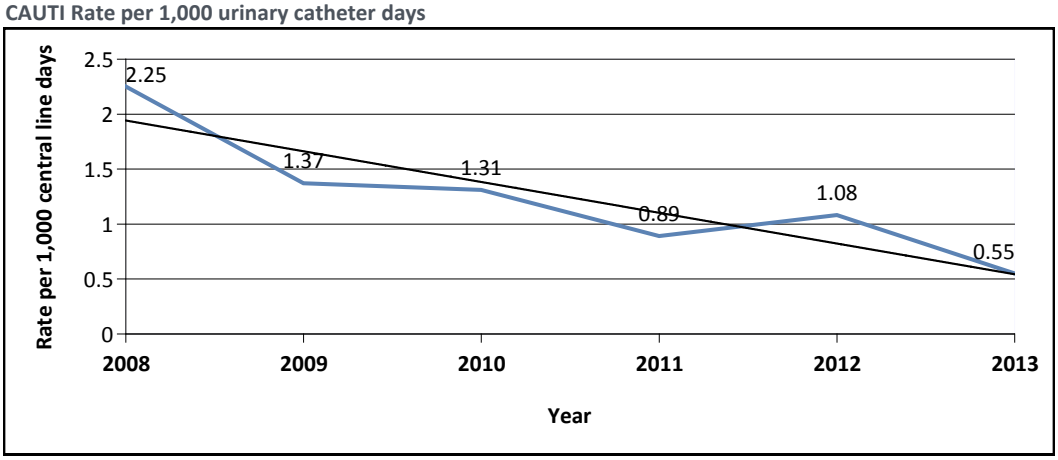
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	44,487	15	1	14	1	25	0	51	2	31	3	3.21
2009	88,644	17	4	44	3	36	0	111	7	32	0	2.87
2010	86,374	17	6	27	4	42	1	89	8	37	5	2.73
2011	83,272	21	1	33	3	40	0	74	5	30	2	2.51
2012	75,632	13	2	49	3	39	0	75	0	28	4	2.82
2013	75,311	10	1	61	0	30	0	65	0	20	3	2.52

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
2013	8	22.32	0.36	0.15 - 0.71	Better

CAUTI Rate per 1,000 urinary catheter days



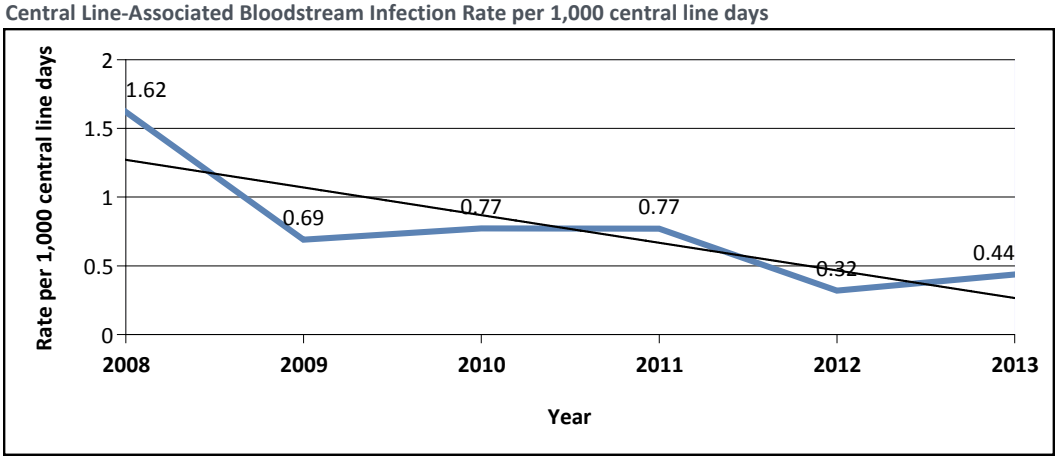
JEFFERSON REGIONAL MEDICAL CENTER

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
2013	4	6.16	0.65	0.17 - 1.66	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
2013	0	0.19	0.00	0 - 19.42	Same as

JENNERSVILLE REGIONAL HOSPITAL

NHSN ID: 12337

Hospital type: Acute care general hospital

Number of licensed beds (2013): 63

Number of reported Healthcare-Associated Infections:

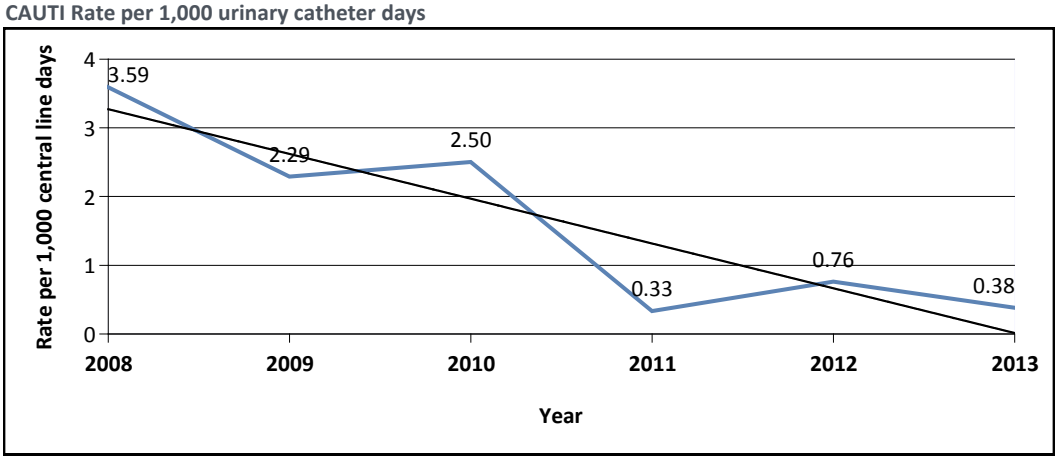
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	6,504	0	0	2	0	8	0	5	0	6	0	3.23
2009	13,531	5	0	3	0	20	2	6	0	12	1	3.62
2010	13,221	7	0	3	0	14	1	6	1	11	0	3.25
2011	13,563	1	0	5	0	3	0	3	0	2	0	1.03
2012	12,583	1	0	2	0	3	0	7	0	2	0	1.19
2013	12,317	3	0	4	0	0	0	6	0	2	0	1.22

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
2013	1	4.03	0.25	0 - 1.38	Same as

CAUTI Rate per 1,000 urinary catheter days



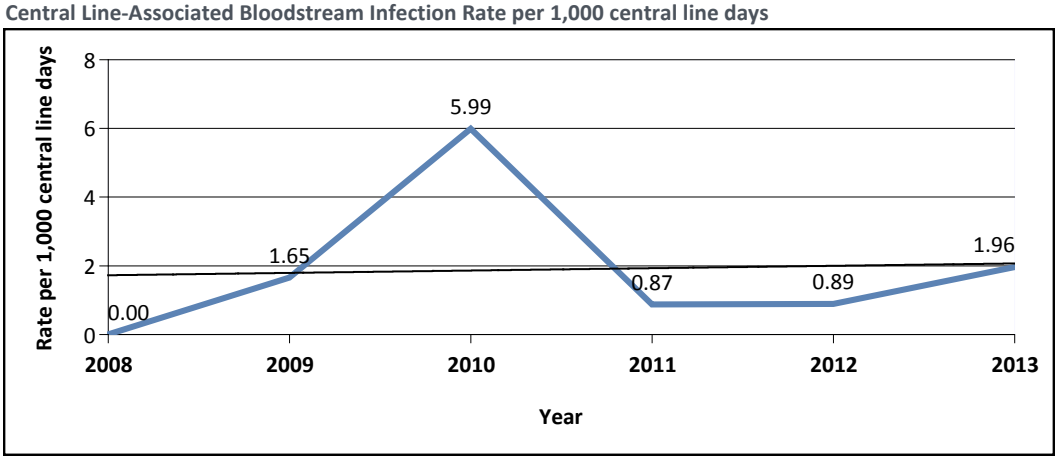
JENNERSVILLE REGIONAL HOSPITAL

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
2013	2	0.69	2.92	0.33 - 10.53	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 (2013): 25

Number of reported Healthcare-Associated Infections:

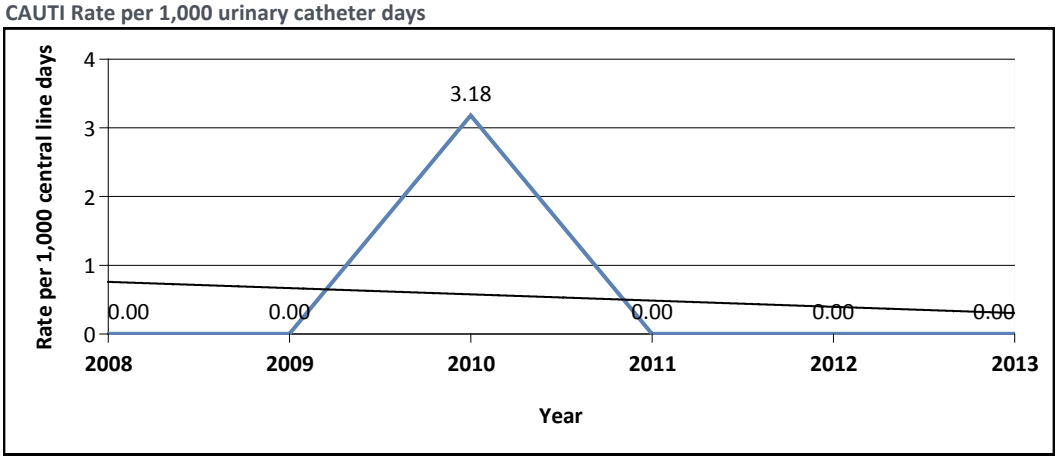
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	2,110	0	0	0	0	0	0	1	0	0	0	0.47
2009	4,947	0	0	0	0	0	0	3	0	0	0	0.61
2010	4,527	0	0	0	0	0	0	2	0	2	0	0.88
2011	5,197	0	0	0	0	1	0	0	0	1	0	0.38
2012	4,497	0	0	0	0	0	0	4	0	0	0	0.89
2013	4,129	0	0	0	0	0	0	3	0	1	0	0.97

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
2013	0	0.81	0.00	0 - 4.52	Same as

CAUTI Rate per 1,000 urinary catheter days



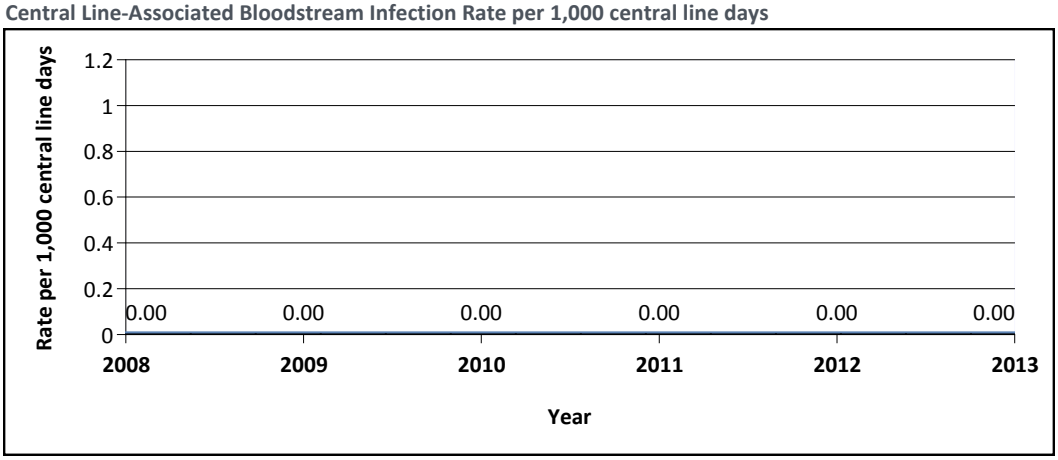
JERSEY SHORE HOSPITAL

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
2013	0	0.14	0.00	0 - 26.44	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 (2013): 67

Number of reported Healthcare-Associated Infections:

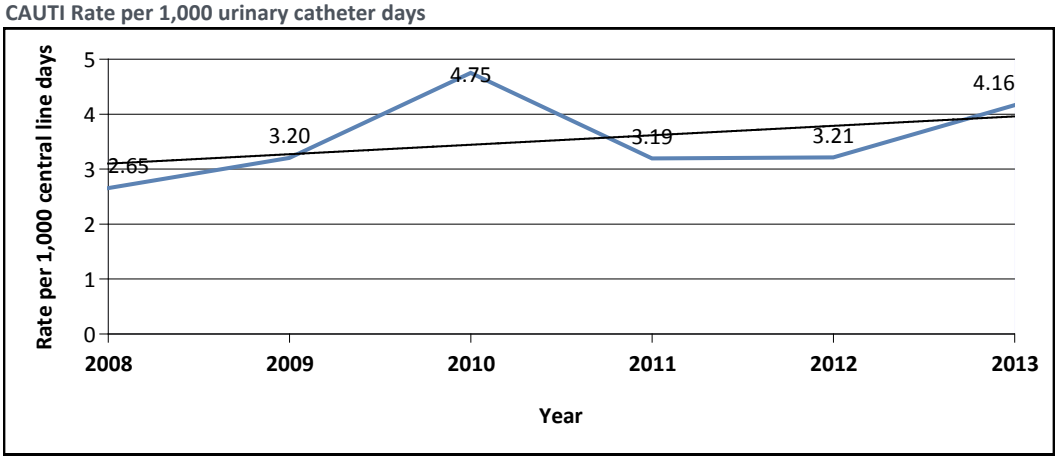
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	10,804	0	1	27	0	2	0	0	0	15	0	4.17
2009	21,704	3	0	56	0	0	0	0	3	23	0	3.92
2010	20,170	0	0	4	0	9	0	0	0	35	0	2.38
2011	21,076	0	1	9	0	2	0	0	1	24	0	1.76
2012	20,244	3	6	4	3	3	0	0	1	40	0	2.96
2013	19,943	1	5	10	0	1	0	0	2	35	0	2.71

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
2013	3	1.06	2.83	0.57 - 8.27	Same as

CAUTI Rate per 1,000 urinary catheter days



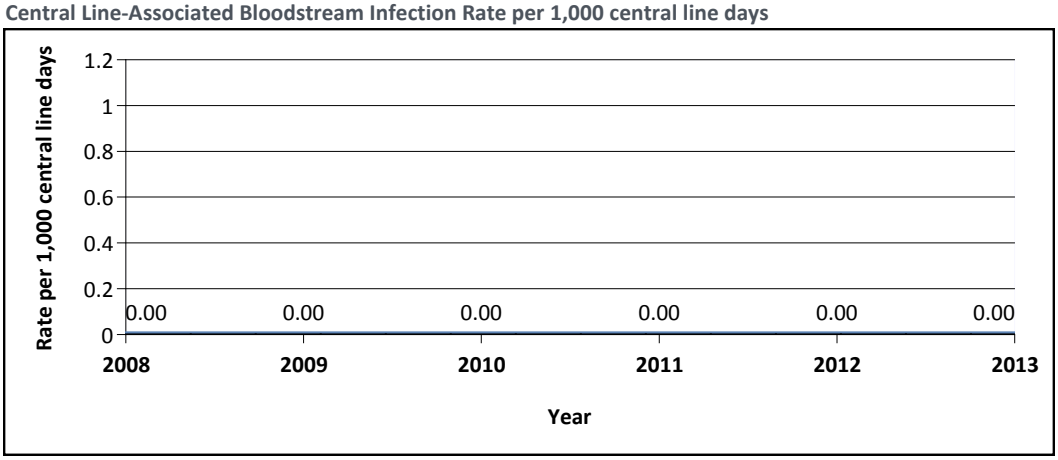
JOHN HEINZ INSTITUTE OF REHABILITATION

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
2013	0	0.22	0.00	0 - 16.88	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 (2013): 31

Number of reported Healthcare-Associated Infections:

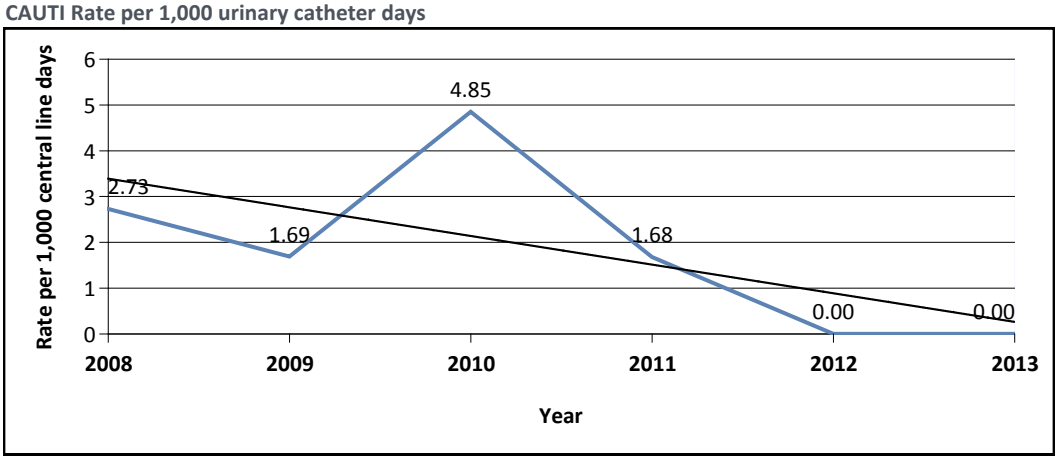
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	2,302	0	0	0	0	0	0	2	0	1	0	1.30
2009	5,247	0	0	0	0	6	0	0	0	3	0	1.72
2010	4,608	0	0	0	0	0	0	0	0	2	0	0.43
2011	5,398	0	0	2	0	3	0	0	0	1	0	1.11
2012	4,769	2	0	6	0	0	0	0	0	1	0	1.89
2013	4,230	0	0	1	0	1	0	4	0	0	0	1.42

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
2013	0	0.52	0.00	0 - 7.05	Same as

CAUTI Rate per 1,000 urinary catheter days



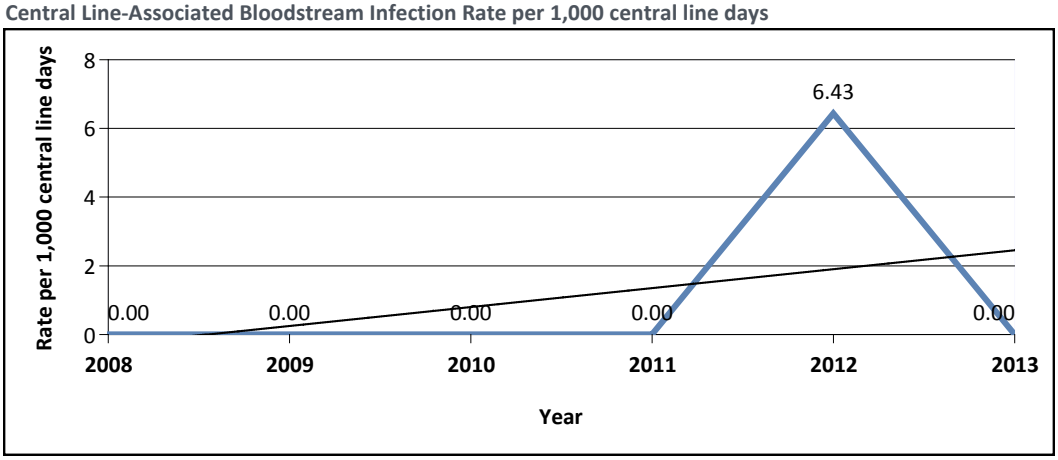
KANE COMMUNITY HOSPITAL

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
2013	0	0.10	0.00	0 - 37.02	Same as

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 (2013): 35

Number of reported Healthcare-Associated Infections:

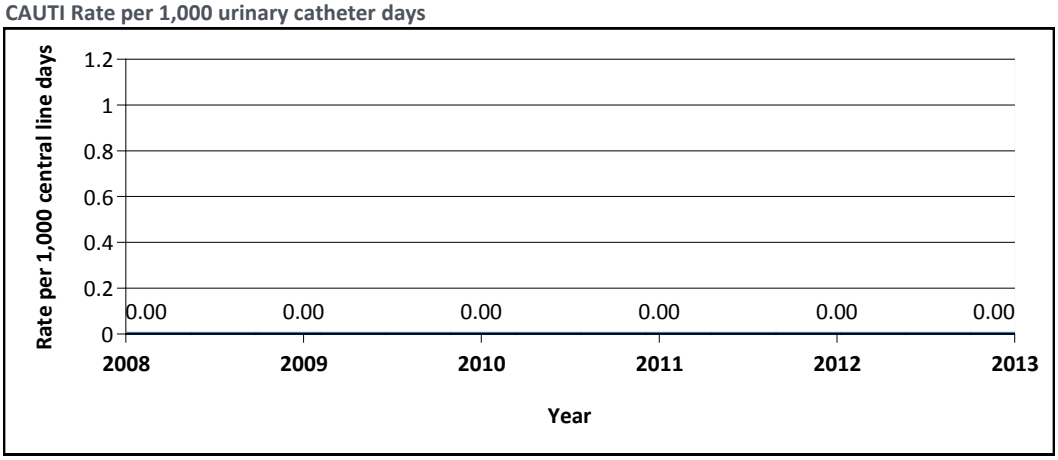
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	2,259	0	0	0	0	0	0	0	0	0	0	0.00
2009	4,084	0	0	0	0	0	0	0	0	0	0	0.00
2010	2,732	1	0	0	0	0	0	0	0	0	0	0.37
2011	2,751	1	0	0	0	0	0	0	0	1	0	0.73
2012	2,885	0	0	0	0	0	0	0	1	1	0	0.69
2013	2,421	0	0	0	0	0	0	0	0	0	0	0.00

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	0	0.87	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
2013	0	0.16	0.00	0 - 22.6	Same as

CAUTI Rate per 1,000 urinary catheter days



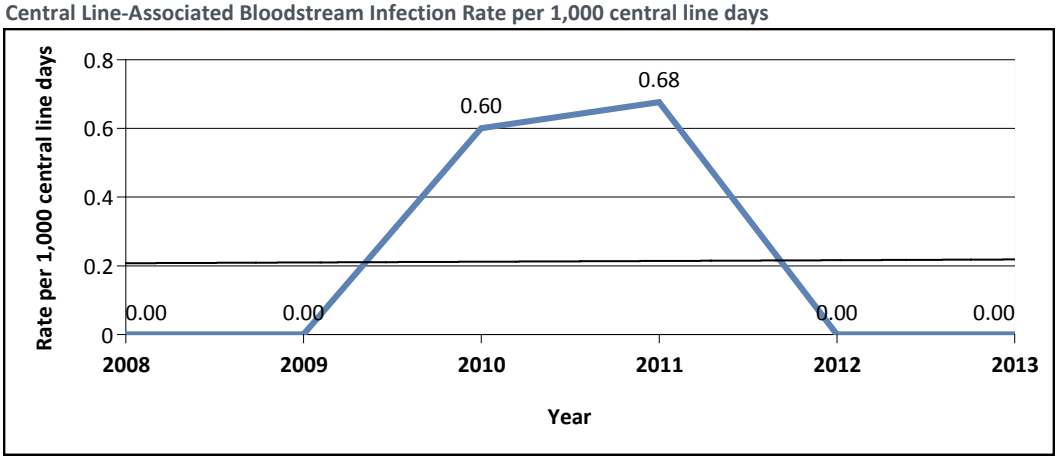
KENSINGTON HOSPITAL

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
2013	0	0.93	0.00	0 - 3.95	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 (2013): 96

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
2013	27,338	0	2	0	0	0	0	0	1	0	0	0.11

KINDRED HOSPITAL --- PHILADELPHIA

NHSN ID: 11832

Hospital type: Long-term acute care hospital

Number of licensed beds (2013): 52

Number of reported Healthcare-Associated Infections:

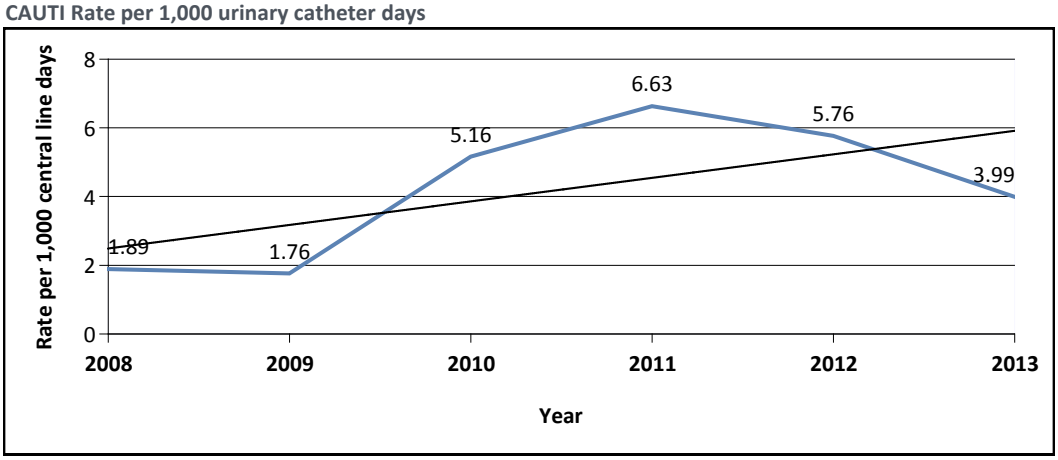
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	7,212	1	0	1	1	0	0	0	0	11	0	1.94
2009	14,710	16	0	22	0	1	0	0	0	20	0	4.01
2010	14,138	37	1	8	11	3	0	0	2	56	0	8.35
2011	13,457	24	0	19	6	3	0	0	2	57	0	8.25
2012	11,725	25	0	8	1	1	0	0	2	35	1	6.23
2013	11,096	18	0	10	2	1	0	0	6	25	1	5.68

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
2013	18	6.99	2.57	1.53 - 4.07	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
2013	11	5.77	1.91	0.95 - 3.41	Same as

KINDRED HOSPITAL --- PITTSBURGH

NHSN ID: 12358

Hospital type: Long-term acute care hospital

Number of licensed beds (2013): 63

Number of reported Healthcare-Associated Infections:

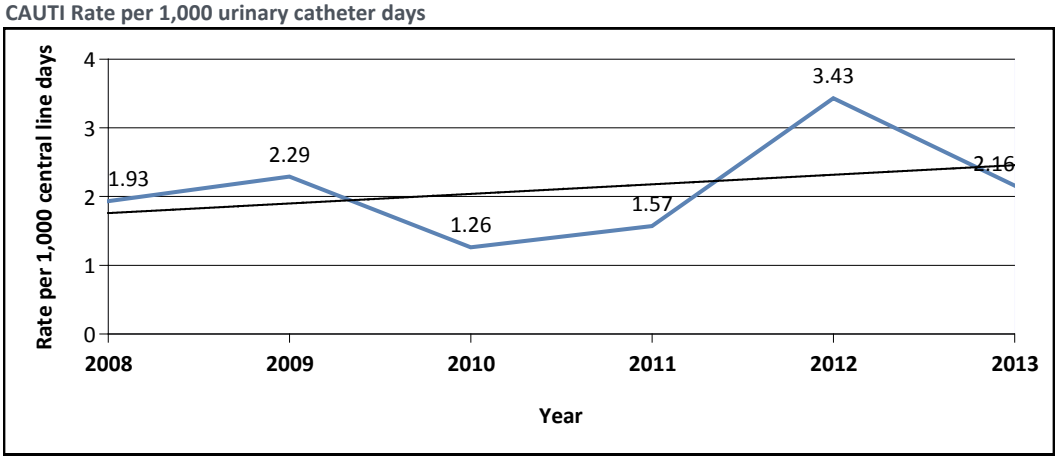
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	6,743	8	3	11	0	1	0	0	0	9	0	4.75
2009	12,835	10	1	10	9	0	0	0	2	21	0	4.13
2010	12,513	4	0	7	9	1	0	0	3	10	1	2.80
2011	10,214	12	0	4	15	1	0	0	4	11	0	4.60
2012	10,309	10	1	11	16	2	0	0	5	22	1	6.60
2013	10,270	13	0	9	14	0	0	0	3	15	3	5.55

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
2013	8	5.73	1.40	0.6 - 2.75	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

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
2013	12	7.64	1.57	0.81 - 2.74	Same as

KINDRED HOSPITAL --- WYOMING VALLEY

NHSN ID: 12485

Hospital type: Long-term acute care hospital

Number of licensed beds (2013): 36

Number of reported Healthcare-Associated Infections:

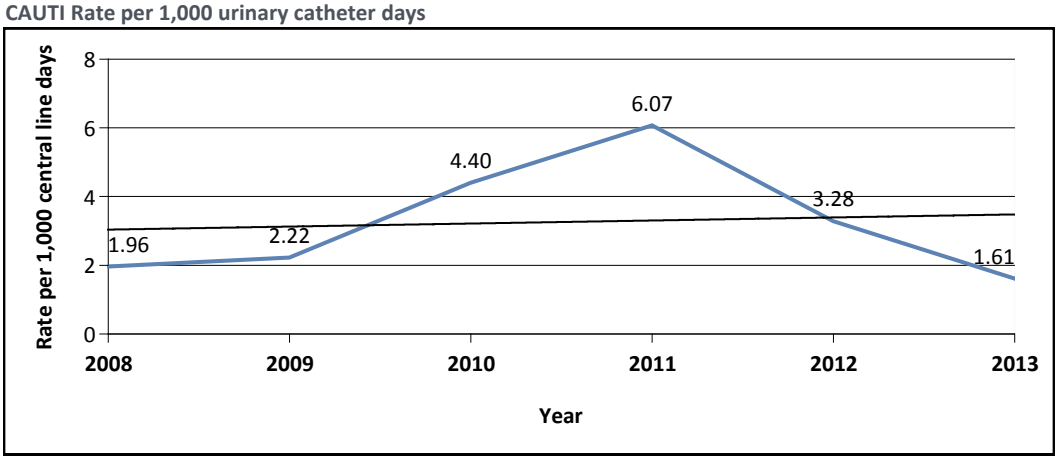
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,795	5	0	0	0	0	0	0	0	7	0	3.16
2009	15,338	4	0	0	0	0	0	0	0	18	0	1.43
2010	8,431	7	0	11	0	7	0	0	10	22	0	6.76
2011	8,404	7	0	8	4	14	0	0	6	27	0	7.85
2012	8,444	16	0	2	2	3	0	0	0	16	0	4.62
2013	8,855	13	0	1	0	0	0	0	1	10	0	2.82

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
2013	9	8.74	1.03	0.47 - 1.95	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 --- 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
2013	10	7.09	1.41	0.68 - 2.59	Same as

KINDRED HOSPITAL AT HERITAGE VALLEY

NHSN ID: 12268

Hospital type: Long-term acute care hospital

Number of licensed beds (2013): 35

Number of reported Healthcare-Associated Infections:

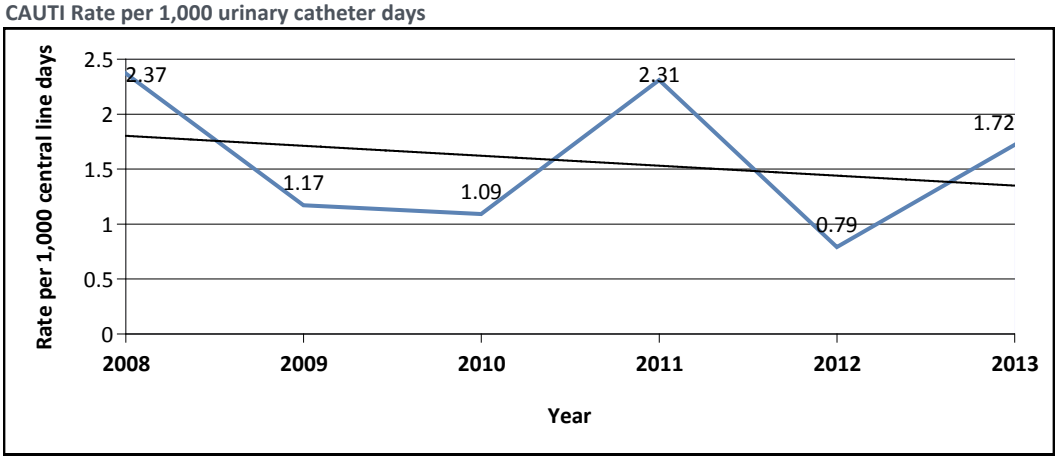
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,868	5	0	10	11	0	0	0	0	8	0	6.98
2009	9,868	11	0	26	19	0	0	0	6	9	0	7.19
2010	8,815	6	0	14	14	0	0	0	1	8	0	4.88
2011	8,765	6	0	8	10	0	0	0	2	15	0	4.68
2012	8,898	4	0	19	2	0	0	0	0	5	0	3.37
2013	8,223	7	0	22	0	0	0	0	0	10	0	4.74

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
2013	10	9.13	1.10	0.52 - 2.01	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
2013	7	6.88	1.02	0.41 - 2.1	Same as

KINDRED HOSPITAL EASTON

NHSN ID: 12007

Hospital type: Long-term acute care hospital

Number of licensed beds (2013): 31

Number of reported Healthcare-Associated Infections:

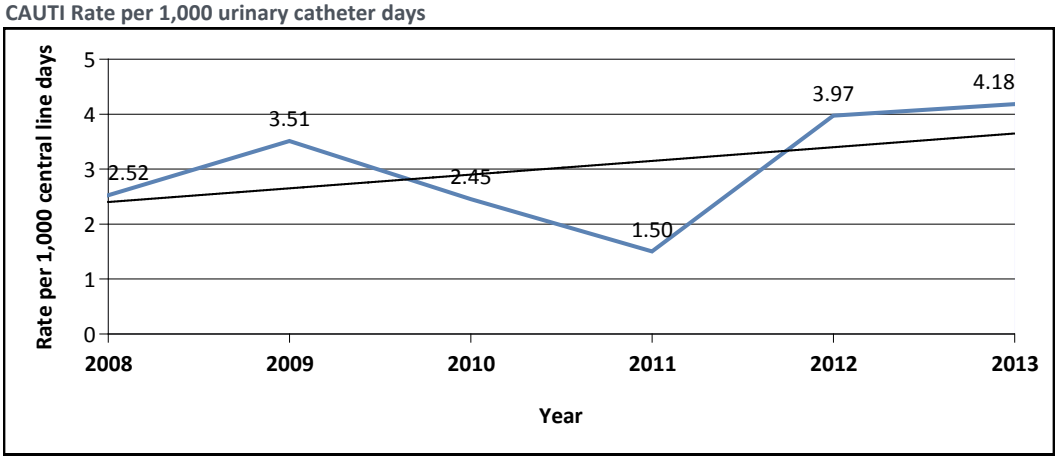
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,877	12	0	2	3	3	0	0	2	6	0	7.22
2009	7,460	17	0	14	4	4	0	0	5	15	0	7.91
2010	7,147	22	0	9	4	1	0	0	2	11	1	7.00
2011	6,982	8	0	12	3	1	0	0	1	9	0	4.87
2012	7,352	7	0	8	4	0	0	0	1	15	0	4.76
2013	6,846	4	1	10	2	0	0	0	2	16	0	5.11

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
2013	12	4.45	2.70	1.39 - 4.71	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
2013	4	5.22	0.77	0.21 - 1.96	Same as

KINDRED HOSPITAL PHILADELPHIA --- HAVERTOWN

NHSN ID: 12908

Hospital type: Long-term acute care hospital

Number of licensed beds (2013): 57

Number of reported Healthcare-Associated Infections:

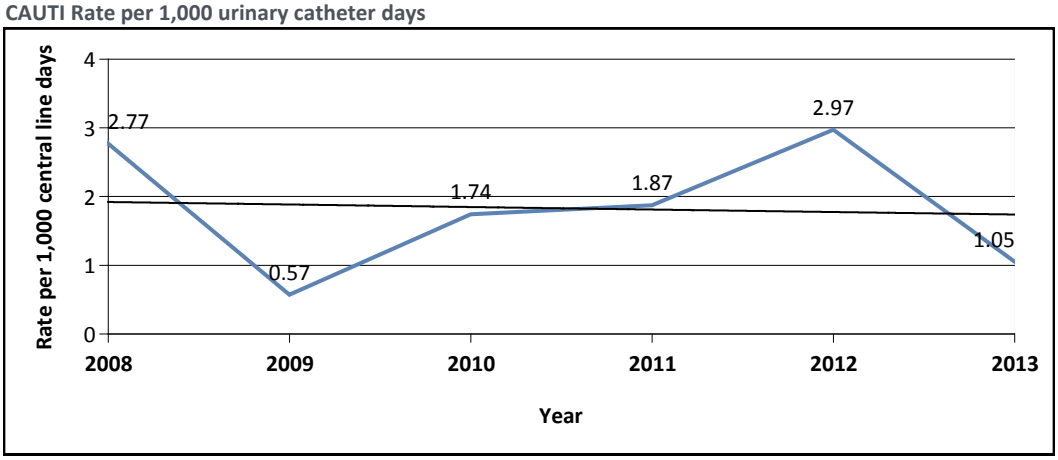
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,379	0	0	2	0	0	0	0	0	7	0	2.06
2009	9,259	4	0	2	0	0	0	0	0	3	0	0.97
2010	12,095	18	0	0	0	2	0	0	2	14	0	2.98
2011	12,225	11	0	7	0	0	0	0	5	13	0	2.94
2012	15,040	10	0	13	1	2	0	0	2	19	1	3.19
2013	14,732	7	0	17	4	0	0	0	1	12	2	2.92

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
2013	6	8.87	0.68	0.25 - 1.47	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 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
2013	7	8.60	0.81	0.33 - 1.68	Same as

KINDRED HOSPITAL PITTSBURGH --- NORTH SHORE

NHSN ID: 12296

Hospital type: Long-term acute care hospital

Number of licensed beds (2013): 72

Number of reported Healthcare-Associated Infections:

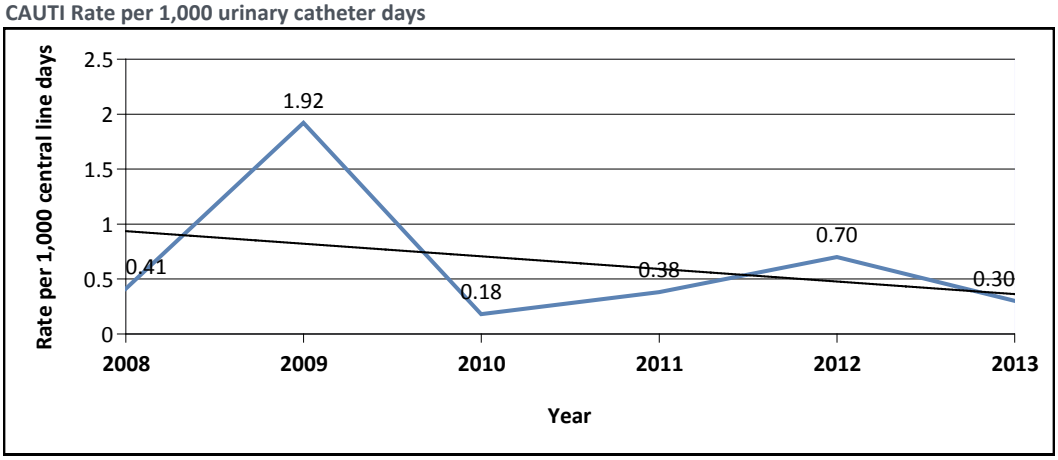
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,356	7	0	0	0	0	0	0	0	1	0	1.84
2009	9,016	5	0	0	0	0	0	0	0	14	0	2.11
2010	8,602	3	0	0	0	0	0	0	0	1	0	0.47
2011	8,578	3	0	0	3	1	0	0	0	2	0	1.05
2012	6,882	4	0	3	15	1	0	0	0	4	0	3.92
2013	6,388	11	0	0	7	0	0	0	1	1	0	3.13

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
2013	1	5.22	0.19	0 - 1.07	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
2013	10	4.64	2.15	1.03 - 3.96	Worse

KINDRED HOSPITAL SOUTH PHILADELPHIA

NHSN ID: 11940

Hospital type: Long-term acute care hospital

Number of licensed beds (2013): 58

Number of reported Healthcare-Associated Infections:

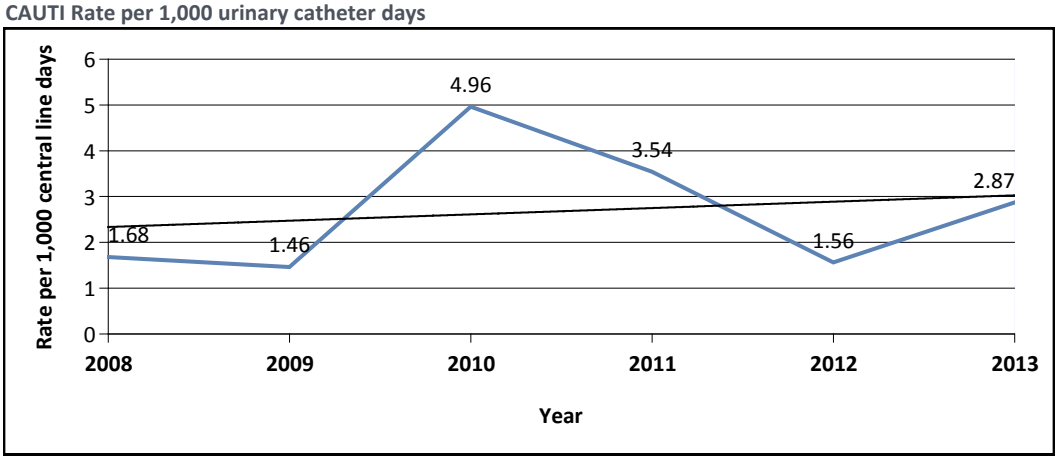
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	5,543	24	0	4	1	6	0	0	0	8	1	7.94
2009	9,716	31	0	5	0	12	0	0	2	8	1	6.07
2010	7,458	22	0	2	0	11	0	0	3	20	2	8.05
2011	6,625	20	2	11	9	21	0	0	2	10	0	11.32
2012	9,100	8	0	2	5	15	0	0	0	8	0	4.18
2013	10,174	4	0	2	4	1	0	0	2	12	0	2.46

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
2013	10	5.37	1.86	0.89 - 3.42	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
2013	2	5.71	0.35	0.04 - 1.26	Same as

KIRKBRIDE CENTER

NHSN ID: 12624

Hospital type: Psychiatric hospital

Number of licensed beds (2013): 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
2013	5,811	0	2	0	1	0	2	0	3	3	0	1.89

LANCASTER GENERAL HOSPITAL

NHSN ID: 10183

Hospital type: Acute care general hospital

Number of licensed beds (2013): 631

Number of reported Healthcare-Associated Infections:

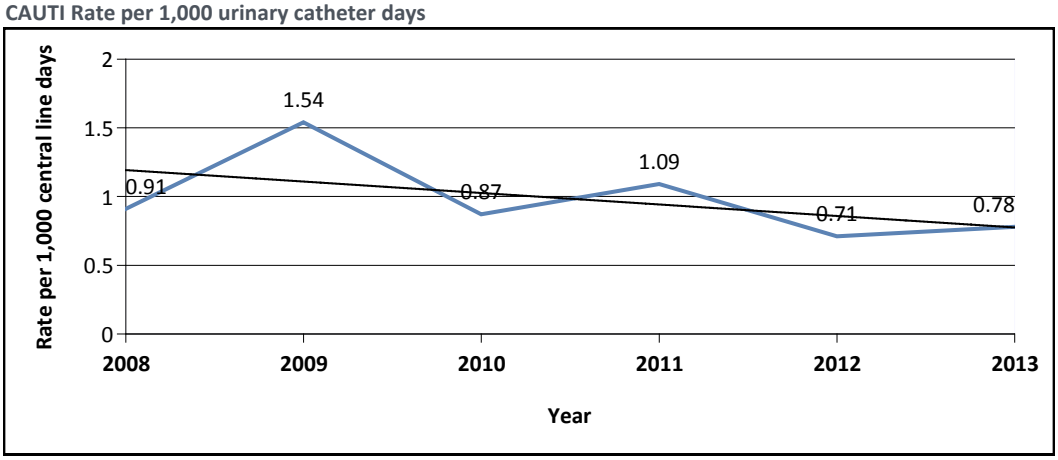
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	81,748	19	3	14	28	32	3	88	7	20	5	2.68
2009	182,464	61	4	33	47	79	4	185	14	91	10	2.89
2010	153,609	41	3	15	17	51	4	156	17	64	2	2.41
2011	161,796	39	1	17	12	46	3	157	13	74	14	2.32
2012	153,050	33	0	18	25	32	3	142	20	43	5	2.10
2013	144,167	30	1	36	24	16	2	129	10	42	6	2.05

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
2013	18	34.83	0.52	0.31 - 0.82	Better

CAUTI Rate per 1,000 urinary catheter days



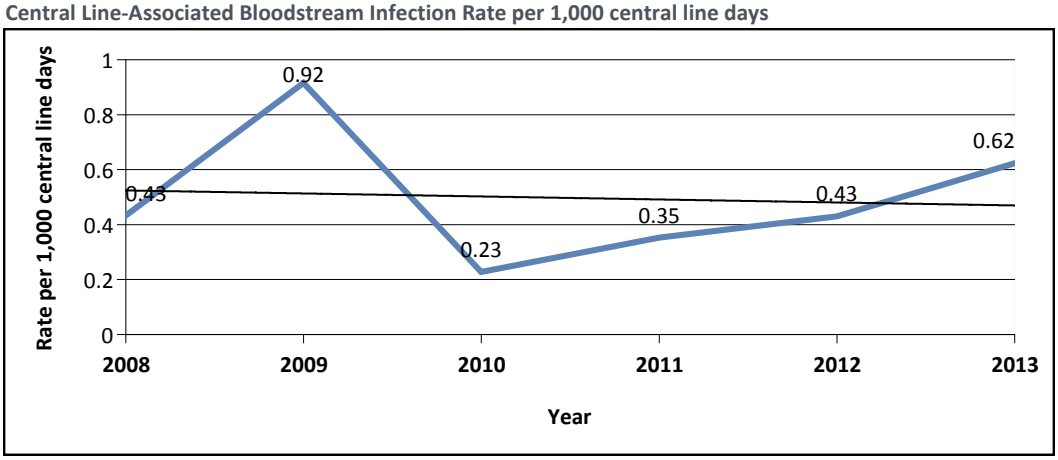
LANCASTER GENERAL HOSPITAL

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
2013	10	10.80	0.93	0.44 - 1.7	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
2013	1	0.99	1.01	0.01 - 5.64	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				-	
2013				-	

LANCASTER REGIONAL MEDICAL CENTER

NHSN ID: 12335

Hospital type: Acute care general hospital

Number of licensed beds (2013): 214

Number of reported Healthcare-Associated Infections:

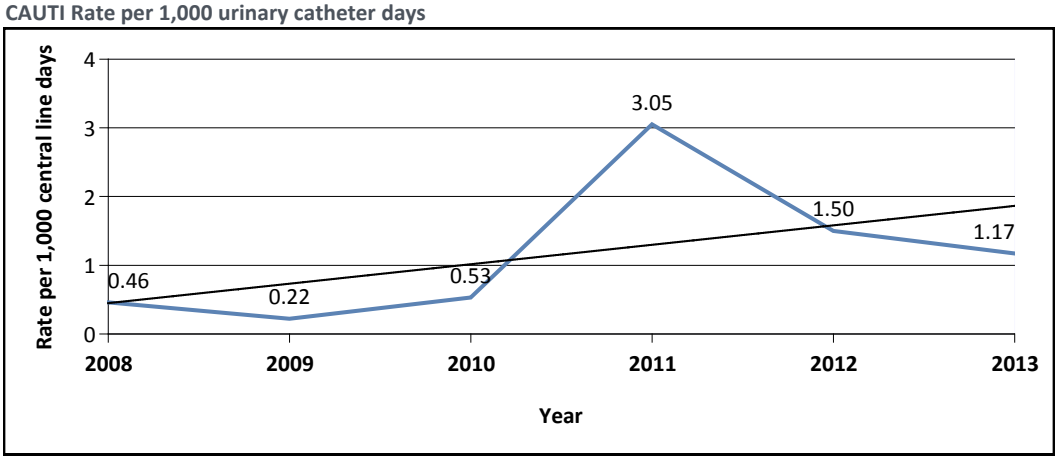
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	11,887	4	0	0	0	0	0	4	0	1	0	0.76
2009	29,172	3	0	4	0	1	0	16	1	1	0	0.89
2010	28,064	5	0	8	0	3	0	15	7	6	1	1.60
2011	28,792	10	0	5	0	10	0	25	2	26	1	2.74
2012	28,382	3	0	0	0	9	0	26	3	25	0	2.33
2013	26,814	6	0	11	1	1	0	14	0	14	0	1.75

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
2013	5	6.50	0.77	0.25 - 1.79	Same as

CAUTI Rate per 1,000 urinary catheter days



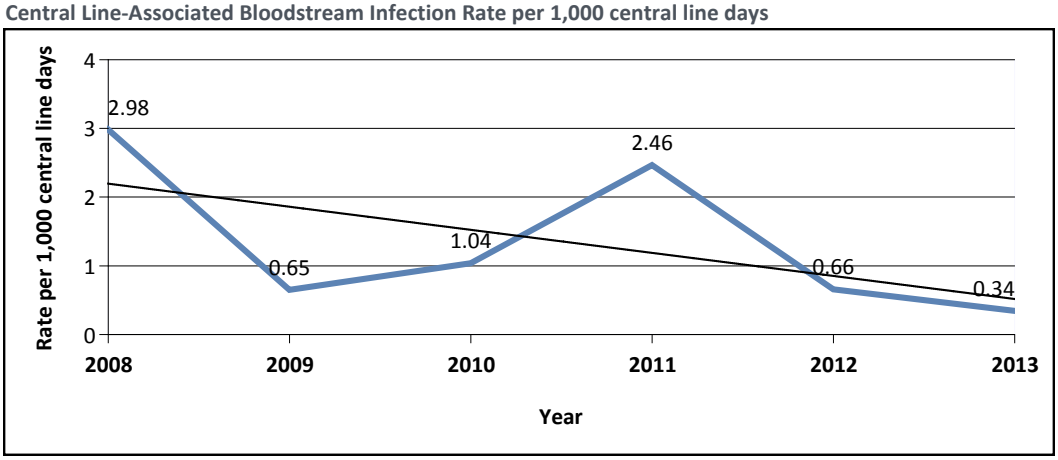
LANCASTER REGIONAL MEDICAL CENTER

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
2013	1	1.97	0.51	0.01 - 2.83	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 (2013): 59

Number of reported Healthcare-Associated Infections:

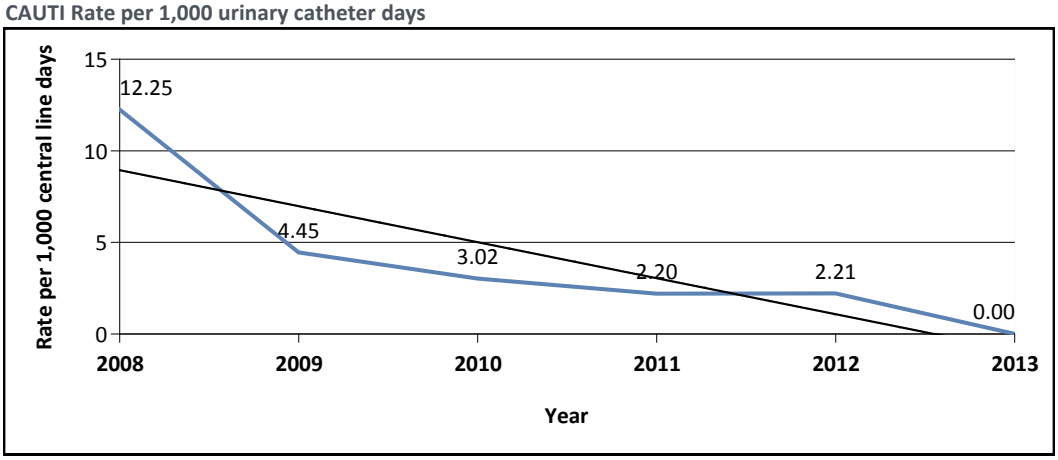
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	7,583	0	0	1	0	0	0	0	0	39	0	5.27
2009	15,958	0	0	0	0	0	0	0	0	43	0	2.69
2010	17,398	0	0	1	0	0	0	0	0	20	0	1.21
2011	17,607	0	0	4	0	0	0	0	0	14	0	1.02
2012	18,153	0	0	8	0	0	0	0	0	8	0	0.88
2013	18,797	0	0	1	0	0	0	0	0	5	0	0.32

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
2013	0	0.64	0.00	0 - 5.72	Same as

CAUTI Rate per 1,000 urinary catheter days



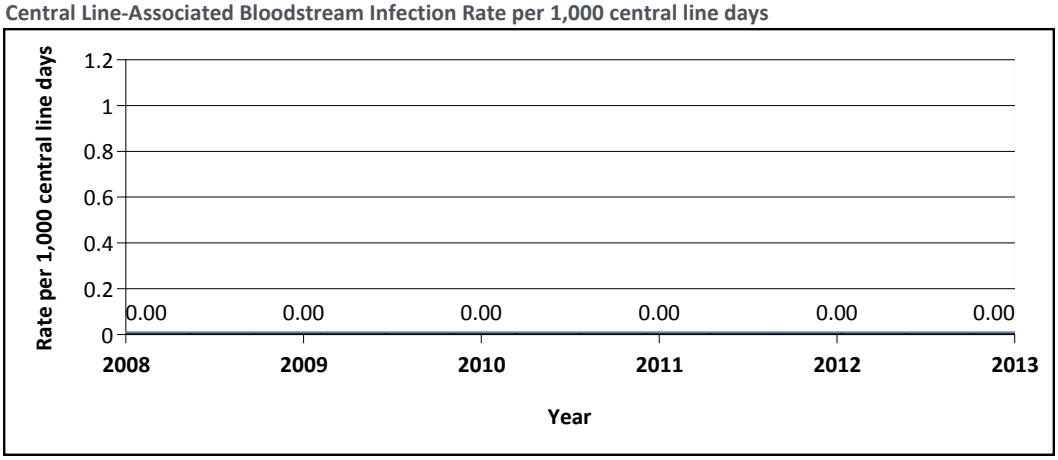
LANCASTER REHABILITATION HOSPITAL

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
2013	0	0.42	0.00	0 - 8.68	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 (2013): 135

Number of reported Healthcare-Associated Infections:

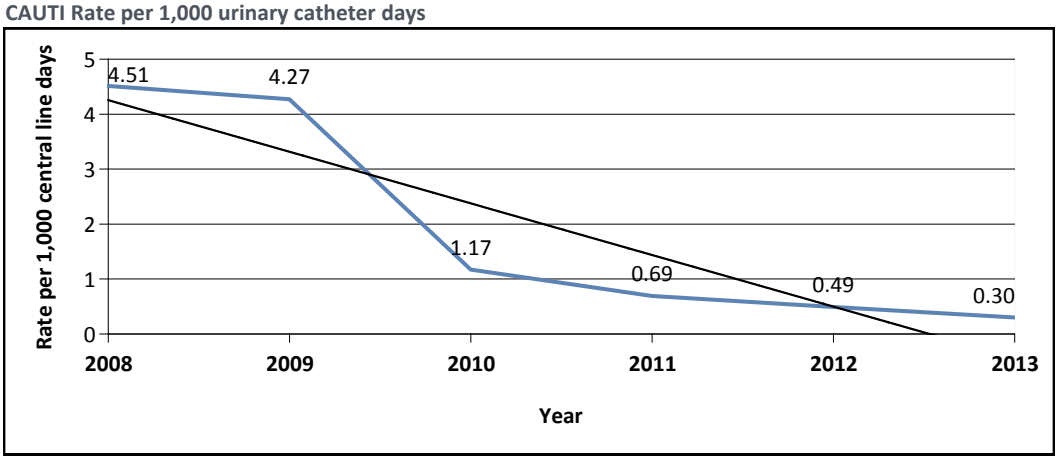
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	10,843	3	0	4	1	5	0	1	2	12	0	2.58
2009	21,363	8	0	21	0	11	0	6	0	24	0	3.28
2010	21,572	2	0	10	0	3	0	4	0	8	0	1.25
2011	21,292	7	0	5	0	3	0	5	0	4	0	1.13
2012	20,308	2	0	0	0	3	0	7	0	2	0	0.69
2013	19,657	1	0	11	0	1	0	7	0	1	0	1.07

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	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
2013	1	5.03	0.20	0 - 1.11	Same as

CAUTI Rate per 1,000 urinary catheter days



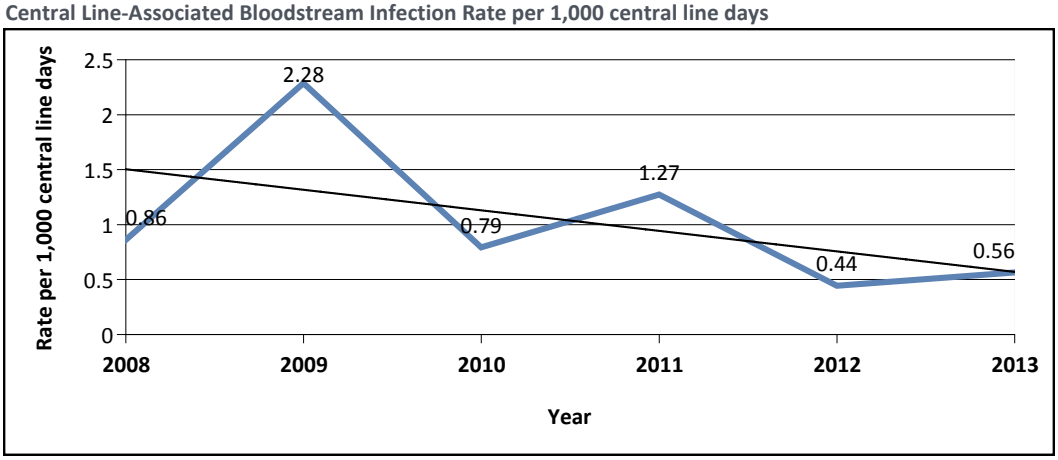
LANSDALE HOSPITAL

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
2013	1	1.19	0.84	0.01 - 4.66	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 (2013): 816

Number of reported Healthcare-Associated Infections:

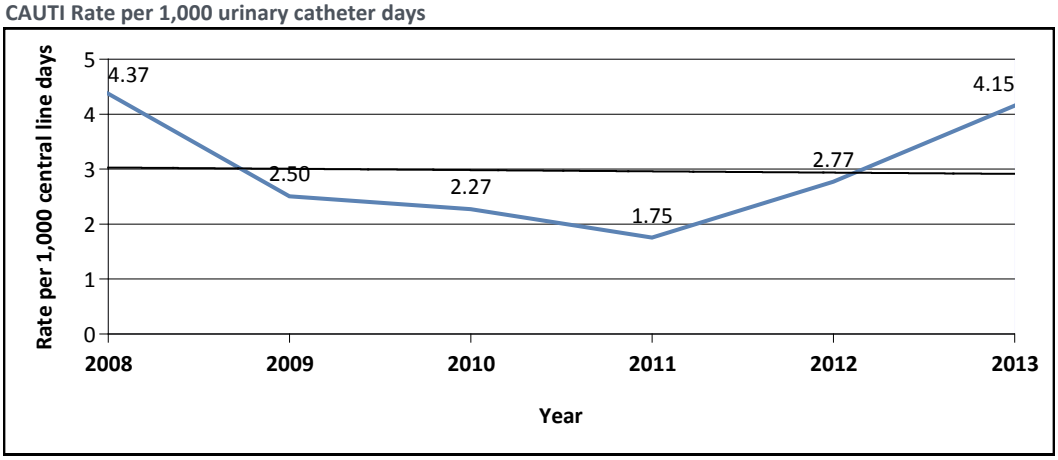
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	98,286	67	0	51	4	33	1	73	1	108	3	3.47
2009	221,287	120	1	107	1	57	1	130	3	140	14	2.59
2010	214,368	86	1	102	0	45	1	120	4	124	13	2.31
2011	221,791	105	0	84	5	47	2	124	2	104	9	2.17
2012	222,590	120	0	119	3	35	1	167	7	145	9	2.72
2013	209,562	108	0	119	26	4	0	183	12	199	5	3.13

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
2013	144	72.38	1.99	1.68 - 2.34	Worse

CAUTI Rate per 1,000 urinary catheter days



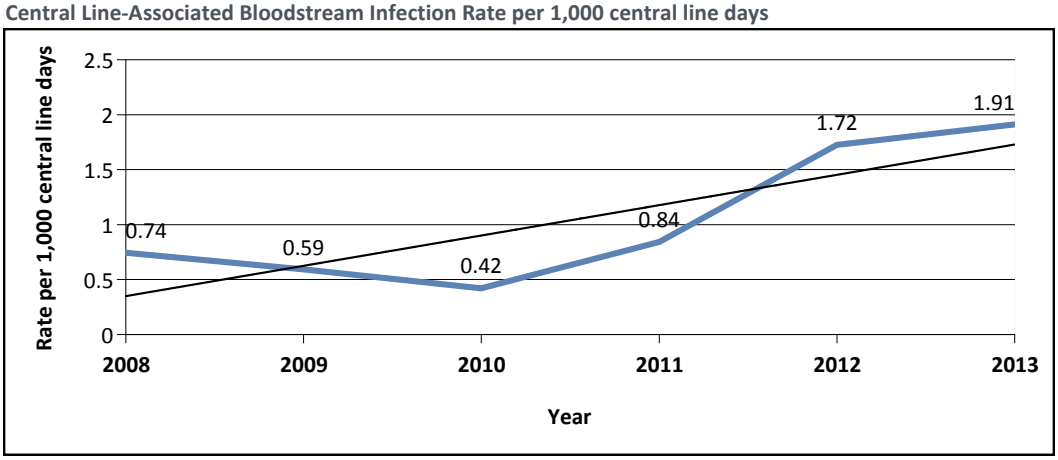
LEHIGH VALLEY HOSPITAL

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
2013	74	31.29	2.36	1.86 - 2.97	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
2013	3	2.57	1.17	0.23 - 3.4	Same as

LEHIGH VALLEY HOSPITAL --- MUHLENBERG

NHSN ID: 11898

Hospital type: Acute care general hospital

Number of licensed beds (2013): 195

Number of reported Healthcare-Associated Infections:

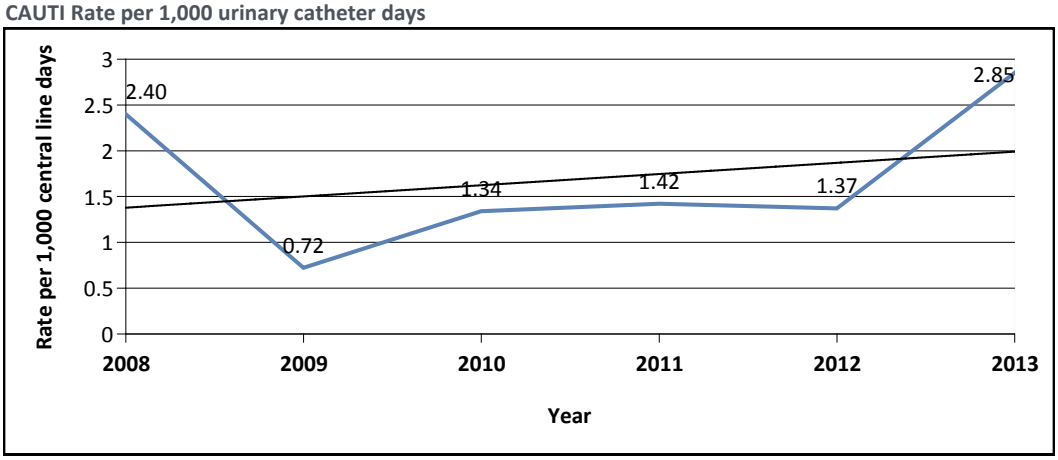
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	23,973	10	0	16	2	3	0	5	2	19	2	2.46
2009	48,399	15	0	20	0	8	0	22	2	14	0	1.67
2010	50,646	31	0	31	0	3	0	26	3	25	1	2.37
2011	50,937	9	0	21	0	2	0	30	0	20	2	1.65
2012	49,028	21	0	25	0	4	0	22	2	21	0	1.94
2013	49,802	22	0	19	0	2	0	25	1	29	1	1.99

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
2013	27	19.84	1.36	0.9 - 1.98	Same as

CAUTI Rate per 1,000 urinary catheter days



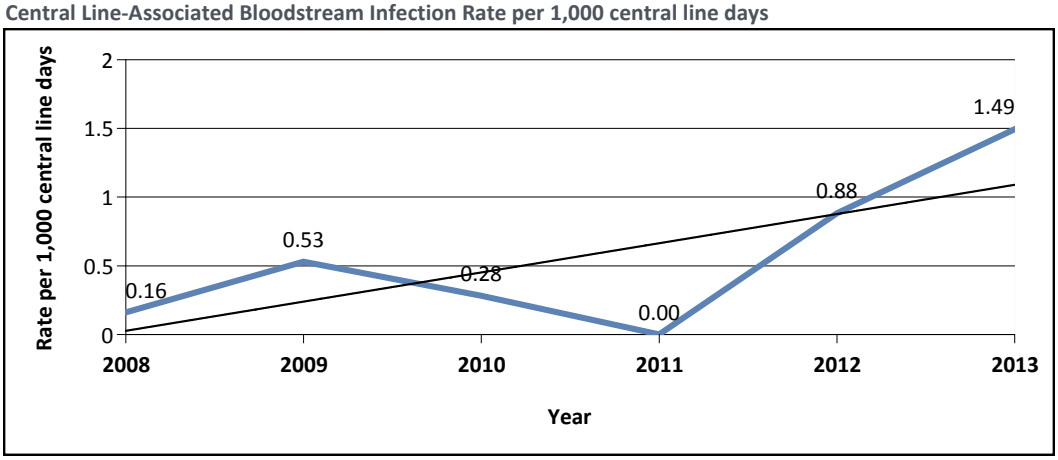
LEHIGH VALLEY HOSPITAL --- MUHLENBERG

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
2013	13	7.04	1.85	0.98 - 3.16	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 (2013): 123

Number of reported Healthcare-Associated Infections:

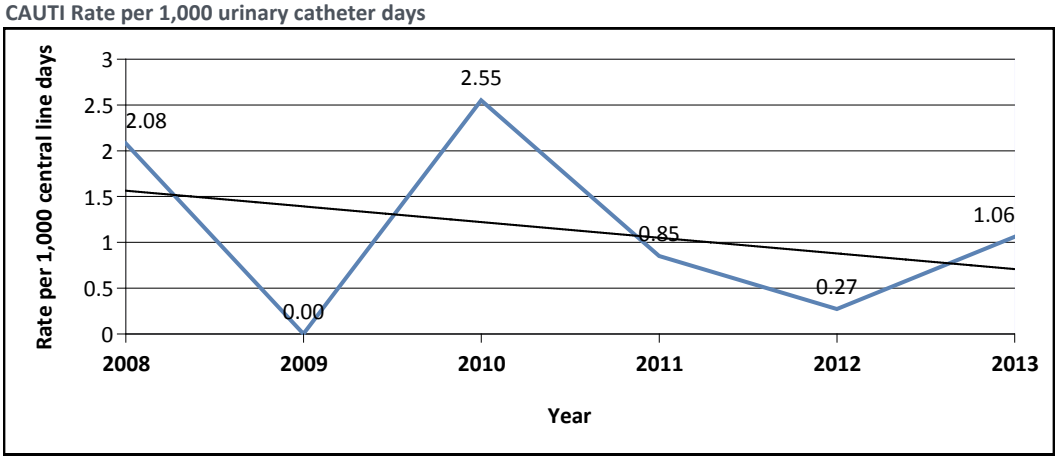
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	12,571	0	0	5	0	2	0	4	0	5	0	1.27
2009	24,272	1	0	5	0	6	0	17	0	0	1	1.24
2010	23,437	1	0	3	0	9	0	19	0	13	0	1.92
2011	24,902	1	0	7	0	4	2	18	0	8	0	1.61
2012	25,305	2	0	7	1	13	1	15	3	4	0	1.82
2013	25,830	4	0	13	0	11	0	11	0	7	0	1.78

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
2013	4	5.73	0.70	0.19 - 1.79	Same as

CAUTI Rate per 1,000 urinary catheter days



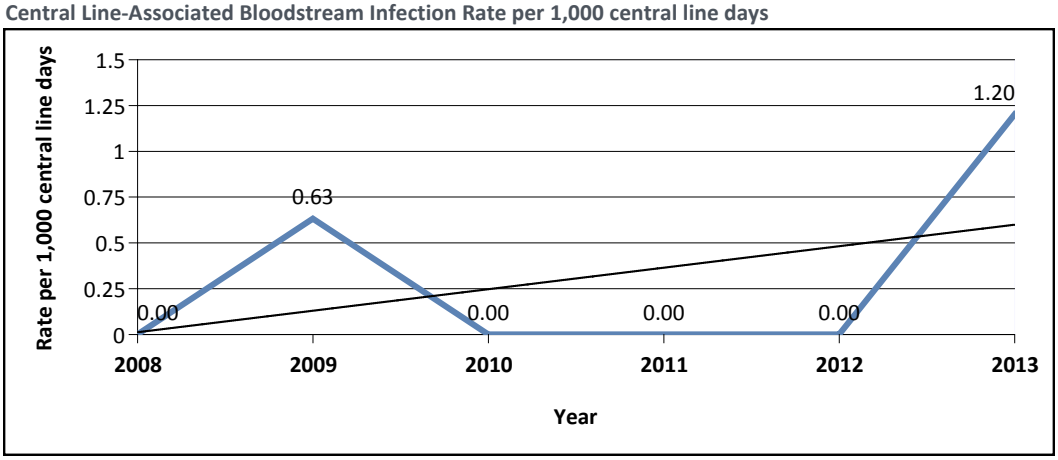
LEWISTOWN HOSPITAL

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
2013	3	1.68	1.79	0.36 - 5.22	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 (2013): 39

Number of reported Healthcare-Associated Infections:

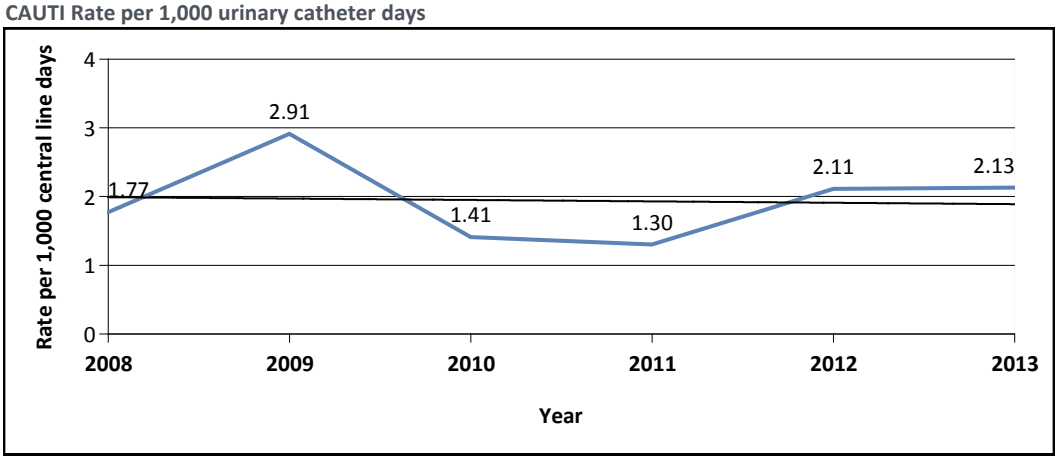
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,517	7	0	3	0	1	0	0	0	5	0	3.54
2009	8,522	12	0	3	0	10	0	0	0	17	0	4.93
2010	8,384	5	0	8	0	2	0	0	0	8	0	2.74
2011	8,890	12	0	12	0	1	0	0	0	7	0	3.60
2012	7,658	6	0	4	0	2	0	0	1	8	0	2.74
2013	7,951	10	0	5	0	0	0	0	0	9	0	3.02

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
2013	9	6.58	1.37	0.62 - 2.6	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
2013	10	7.23	1.38	0.66 - 2.54	Same as

LIFECARE HOSPITALS OF MECHANICSBURG

NHSN ID: 12388

Hospital type: Long-term acute care hospital

Number of licensed beds (2013): 68

Number of reported Healthcare-Associated Infections:

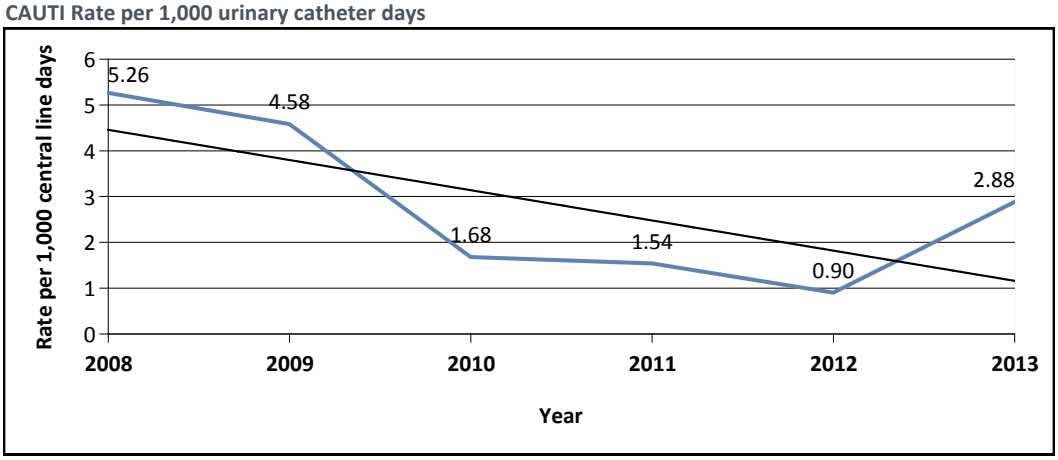
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	6,663	8	0	13	0	7	0	0	0	19	0	7.05
2009	13,713	21	2	18	0	9	0	0	0	37	0	6.34
2010	14,747	9	0	4	0	3	0	0	1	22	0	2.64
2011	11,607	5	0	2	0	1	0	0	0	12	0	1.72
2012	9,277	5	0	6	0	3	0	0	0	9	0	2.48
2013	8,943	7	0	2	0	1	0	0	0	13	0	2.57

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
2013	11	5.92	1.86	0.93 - 3.33	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
2013	7	7.05	0.99	0.4 - 2.05	Same as

LIFECARE HOSPITALS OF PITTSBURGH

NHSN ID: 11945

Hospital type: Long-term acute care hospital

Number of licensed beds (2013): 129

Number of reported Healthcare-Associated Infections:

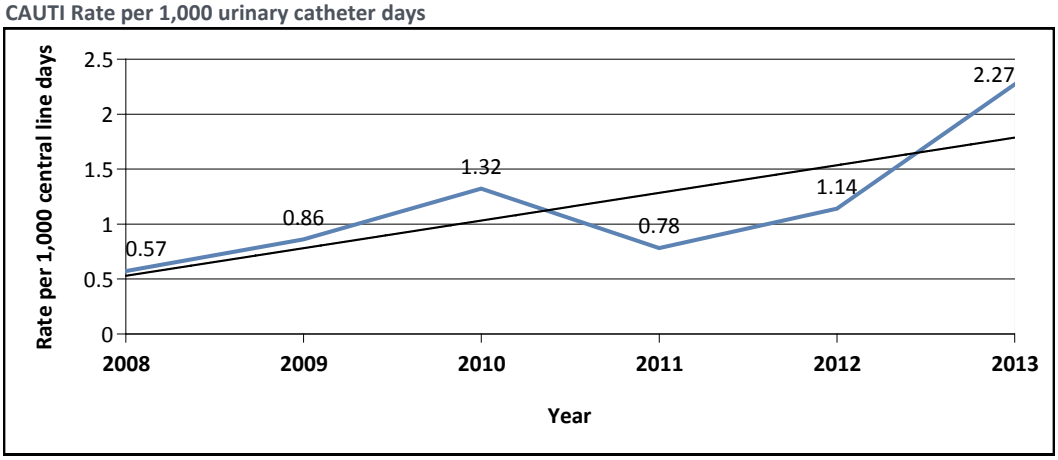
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	15,237	2	1	5	0	1	0	0	1	3	0	0.85
2009	29,647	7	1	33	1	6	0	0	2	11	0	2.06
2010	33,719	21	1	28	6	13	0	0	1	15	0	2.52
2011	27,933	19	0	19	0	6	0	0	1	5	0	1.79
2012	25,487	8	0	8	0	3	0	0	0	6	0	0.98
2013	24,376	11	0	7	1	3	0	0	0	12	0	1.39

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
2013	10	6.69	1.49	0.72 - 2.75	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
2013	10	8.20	1.22	0.58 - 2.24	Same as

LIFECARE HOSPITALS OF PITTSBURGH --- ALLE-KISKI CAMPUS

NHSN ID: 18955

Hospital type: Long-term acute care hospital

Number of licensed beds (2013): 35

Number of reported Healthcare-Associated Infections:

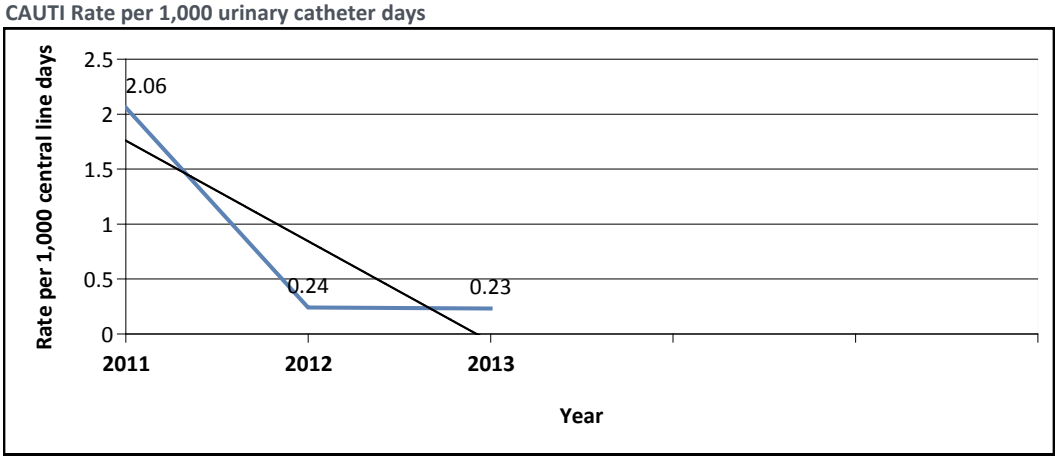
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008												
2009												
2010												
2011	7,254	1	0	3	0	1	0	0	0	10	0	2.07
2012	6,811	1	0	0	0	0	0	0	0	1	0	0.29
2013	6,744	3	0	1	0	0	0	0	0	2	0	0.89

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
2013	1	6.93	0.14	0 - 0.8	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
2013	3	5.20	0.58	0.12 - 1.69	Same as

LIFECARE HOSPITALS OF PITTSBURGH --- MONROEVILLE

NHSN ID: 12254

Hospital type: Long-term acute care hospital

Number of licensed beds (2013): 87

Number of reported Healthcare-Associated Infections:

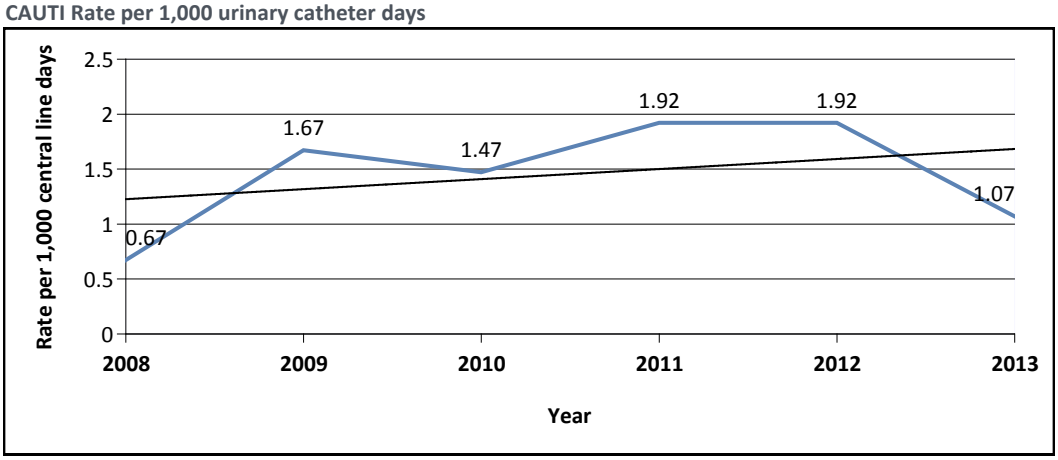
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	9,785	8	0	26	5	1	0	0	1	7	0	4.91
2009	17,502	17	0	29	9	7	0	0	1	21	0	4.80
2010	15,345	10	0	17	8	3	0	0	0	19	0	3.71
2011	14,075	10	0	17	4	0	0	0	0	19	0	3.55
2012	12,994	6	0	6	2	2	0	0	0	13	0	2.23
2013	13,998	9	0	9	0	2	0	0	0	9	0	2.07

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
2013	8	11.61	0.69	0.3 - 1.36	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
2013	7	9.30	0.75	0.3 - 1.55	Same as

LIFECARE HOSPITALS OF PITTSBURGH --- SUBURBAN CAMPUS

NHSN ID: 12385

Hospital type: Long-term acute care hospital

Number of licensed beds (2013): 32

Number of reported Healthcare-Associated Infections:

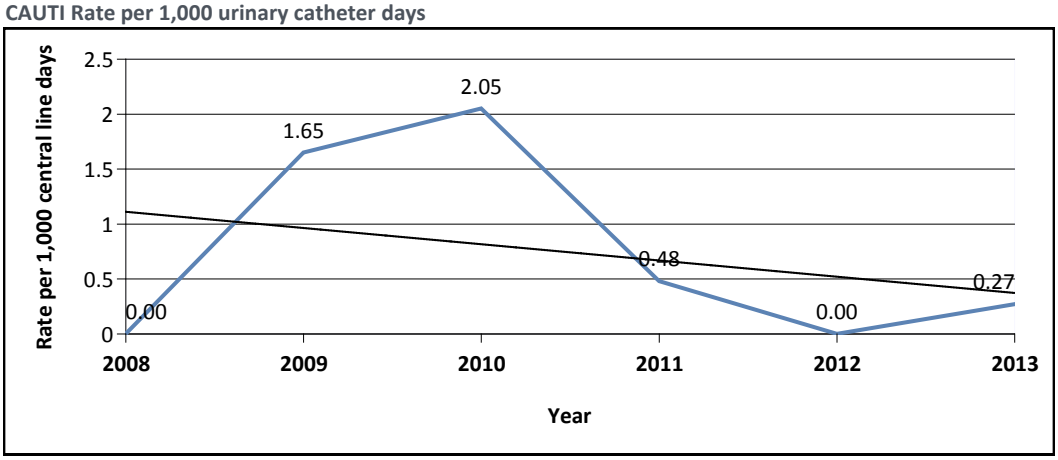
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,375	0	0	0	0	0	0	0	0	0	0	0.00
2009	8,527	8	0	10	0	0	0	0	0	8	0	3.05
2010	6,461	4	0	12	0	0	0	0	0	6	0	3.41
2011	7,155	9	0	9	0	0	0	0	0	2	0	2.80
2012	8,068	7	0	3	0	0	0	0	0	0	0	1.24
2013	7,167	1	0	1	0	0	0	0	0	1	0	0.42

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
2013	1	5.78	0.17	0 - 0.96	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
2013	0	5.40	0.00	0 - 0.68	Better

LOCK HAVEN HOSPITAL

NHSN ID: 12097

Hospital type: Acute care general hospital

Number of licensed beds (2013): 47

Number of reported Healthcare-Associated Infections:

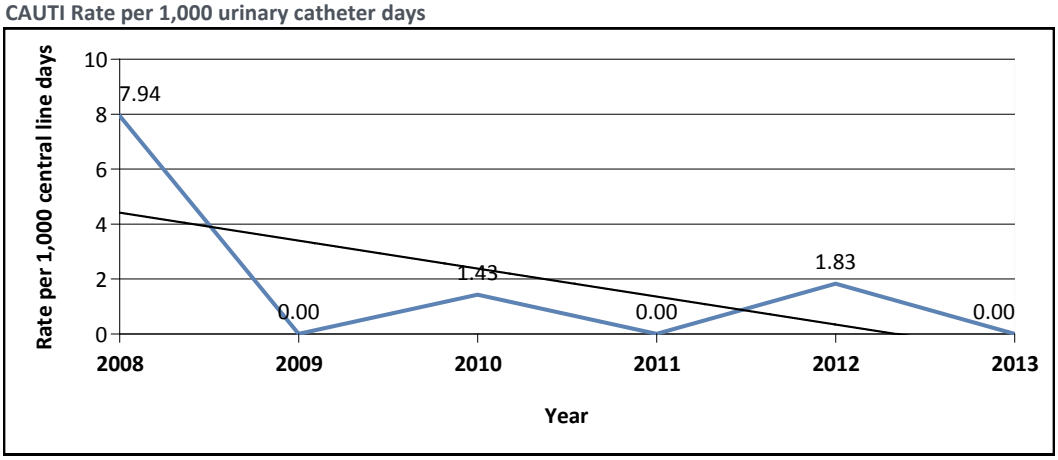
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,198	0	0	0	0	0	0	1	0	4	0	1.56
2009	5,378	0	0	0	0	1	2	6	1	2	0	2.23
2010	4,819	0	0	1	0	8	0	5	1	3	2	4.15
2011	4,158	0	0	0	0	2	0	2	0	1	0	1.20
2012	4,456	1	0	0	0	0	0	1	0	1	0	0.67
2013	4,229	1	0	0	0	0	0	1	0	0	0	0.47

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
2013	0	0.82	0.00	0 - 4.47	Same as

CAUTI Rate per 1,000 urinary catheter days



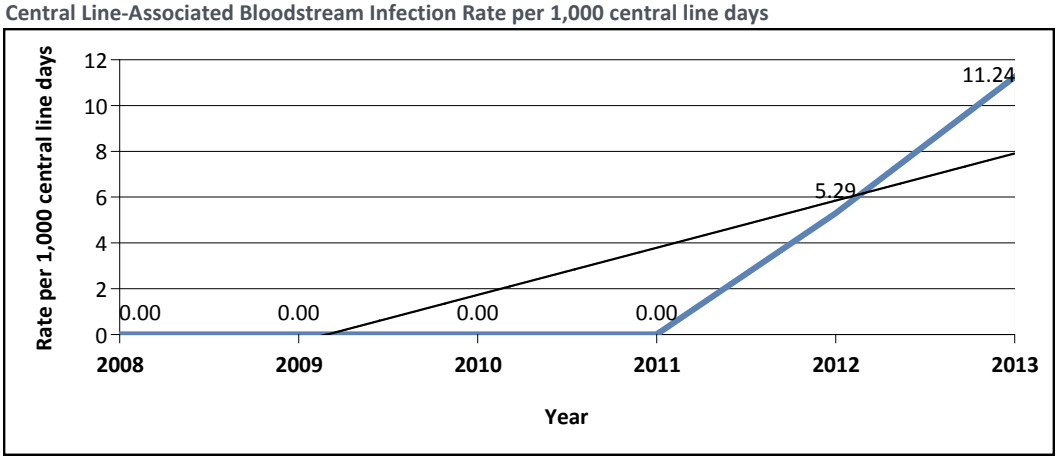
LOCK HAVEN HOSPITAL

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
2013	1	0.06	16.66	0.22 - 92.68	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 (2013): 186

Number of reported Healthcare-Associated Infections:

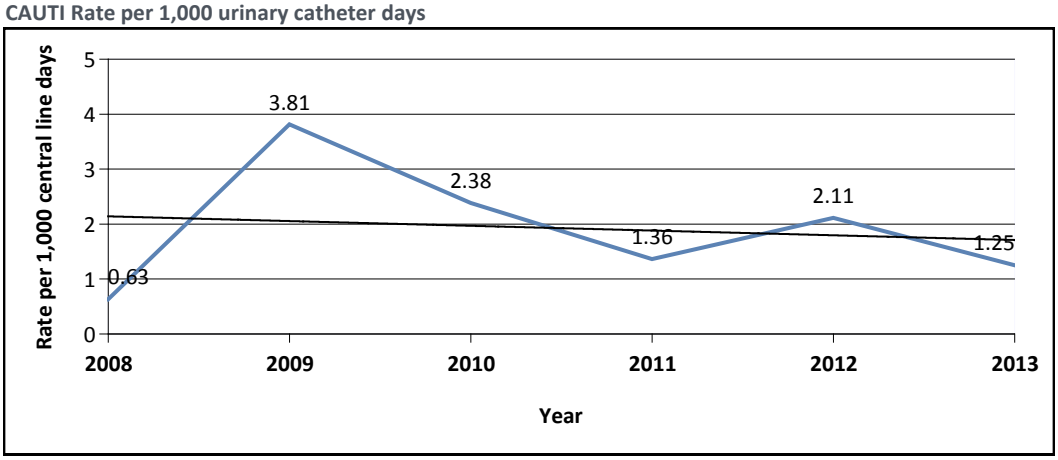
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	11,371	1	0	0	0	2	0	0	0	1	0	0.35
2009	35,300	10	0	0	0	11	0	8	0	21	0	1.42
2010	35,488	5	0	0	0	6	0	10	0	11	0	0.90
2011	31,448	1	0	0	5	2	0	13	0	5	0	0.83
2012	30,332	4	0	0	0	1	1	0	0	6	0	0.40
2013	22,009	6	0	0	0	1	0	3	0	3	0	0.59

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
2013	3	3.60	0.83	0.17 - 2.44	Same as

CAUTI Rate per 1,000 urinary catheter days



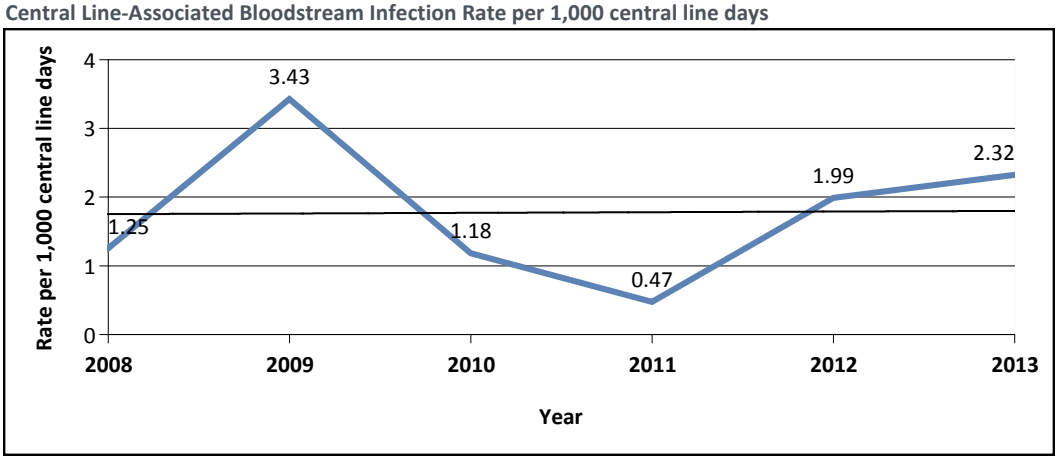
LOWER BUCKS HOSPITAL

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
2013	4	1.16	3.45	0.93 - 8.84	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
2013				-	

MAGEE REHAB HOSPITAL

NHSN ID: 12146

Hospital type: Rehabilitation hospital

Number of licensed beds (2013): 96

Number of reported Healthcare-Associated Infections:

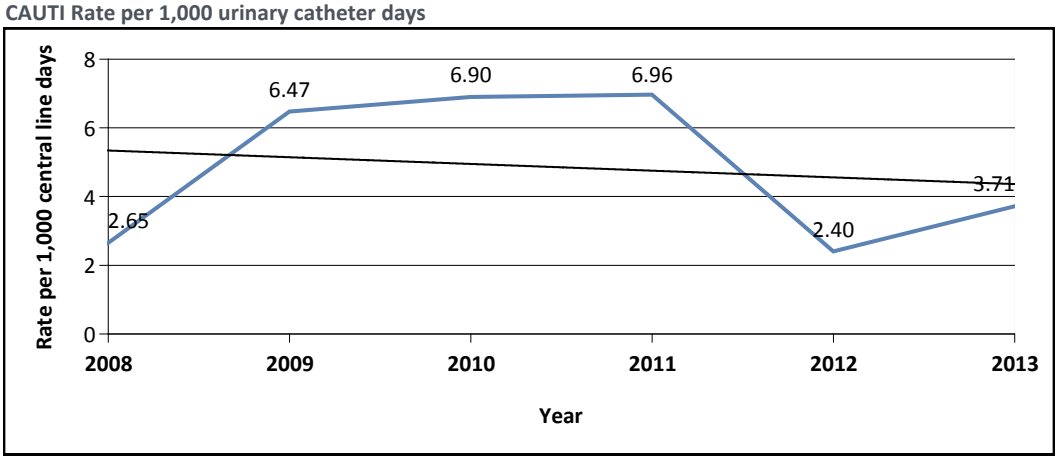
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	15,285	0	0	0	0	0	0	0	0	19	0	1.24
2009	30,485	0	0	0	0	0	0	0	0	101	0	3.31
2010	28,308	0	0	0	0	0	0	0	0	98	0	3.46
2011	28,612	2	0	10	0	1	0	0	0	60	0	2.55
2012	26,781	1	0	10	0	0	0	0	0	21	0	1.19
2013	29,844	0	0	15	0	0	0	0	0	29	0	1.47

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
2013	29	11.98	2.42	1.62 - 3.48	Worse

CAUTI Rate per 1,000 urinary catheter days



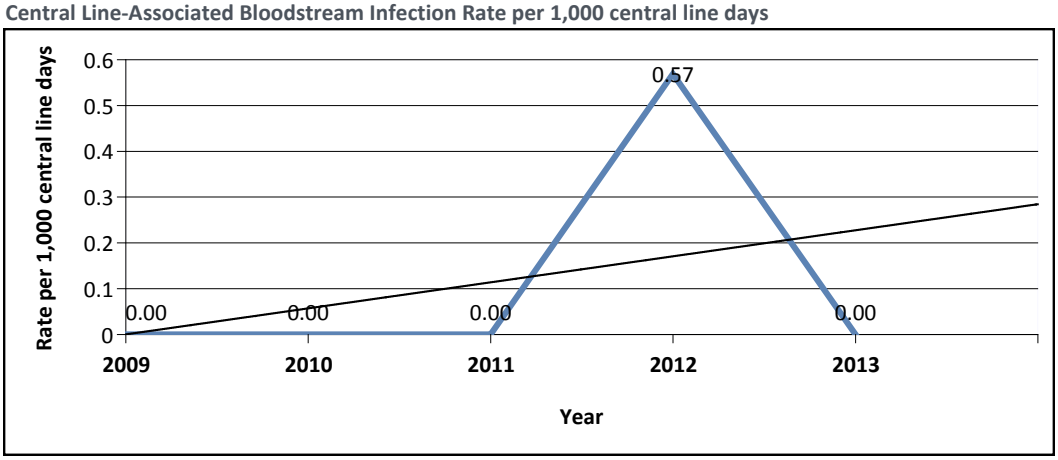
MAGEE REHAB HOSPITAL

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
2013	0	1.21	0.00	0 - 3.02	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 (2013): 363

Number of reported Healthcare-Associated Infections:

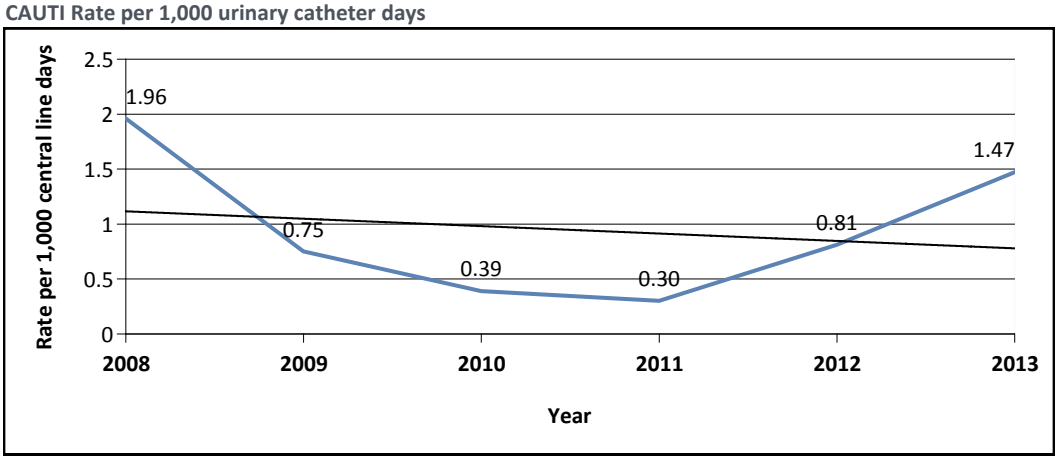
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	46,121	3	11	13	6	8	1	38	2	13	0	2.06
2009	103,134	18	1	27	11	11	3	85	6	14	0	1.71
2010	78,301	22	5	10	14	20	2	91	5	17	2	2.40
2011	77,844	18	7	4	5	17	1	95	7	15	0	2.17
2012	85,243	22	6	30	2	12	1	154	15	21	0	3.09
2013	89,478	26	7	42	1	6	4	116	7	34	2	2.74

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
2013	20	28.38	0.70	0.43 - 1.09	Same as

CAUTI Rate per 1,000 urinary catheter days



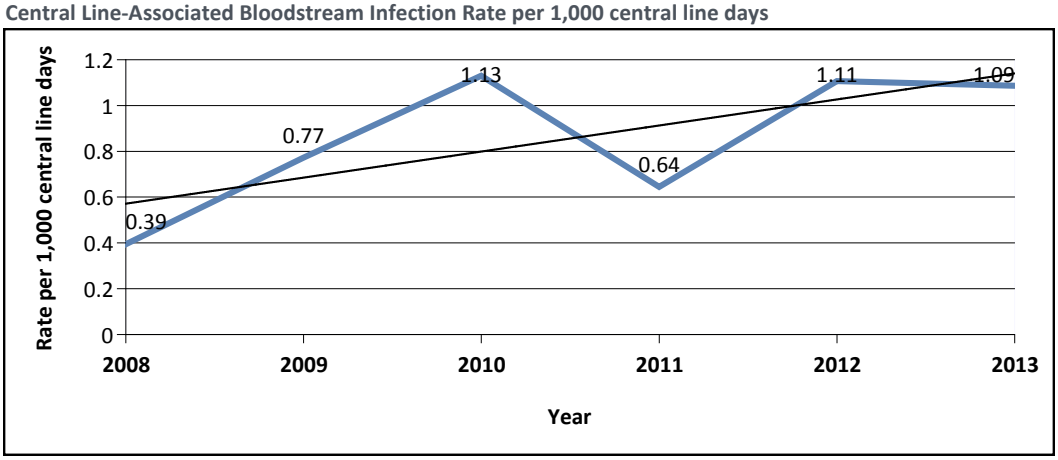
MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM

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
2013	9	6.70	1.34	0.61 - 2.55	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	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
2013	3	4.28	0.70	0.14 - 2.05	Same as

MAIN LINE HOSPITAL --- PAOLI

NHSN ID: 11750

Hospital type: Acute care general hospital

Number of licensed beds (2013): 231

Number of reported Healthcare-Associated Infections:

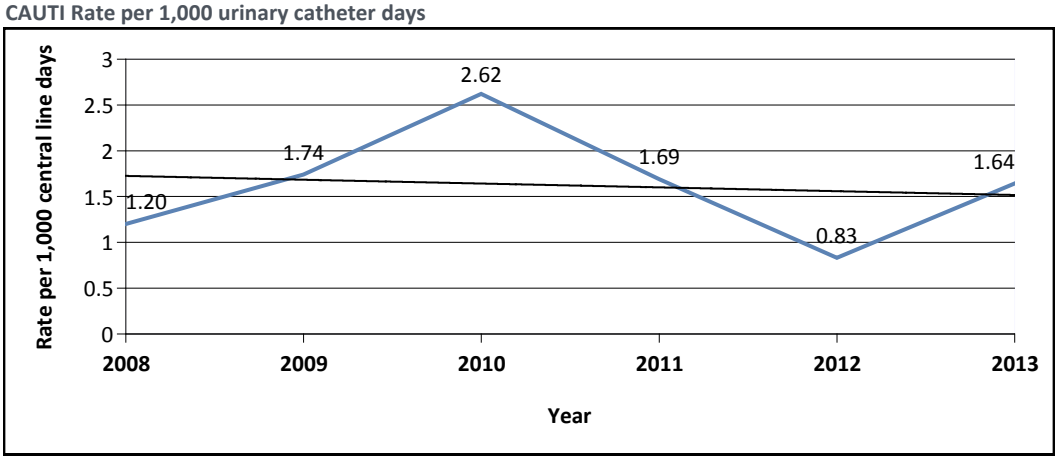
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	24,458	5	0	3	0	8	0	11	1	5	3	1.47
2009	51,576	10	3	13	0	11	0	19	5	19	0	1.55
2010	57,279	6	1	13	0	20	0	35	2	25	1	1.80
2011	59,968	6	1	15	3	14	0	33	2	20	2	1.60
2012	56,763	11	1	21	3	19	5	25	1	15	1	1.80
2013	55,569	8	1	23	3	8	0	39	5	30	0	2.11

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
2013	19	17.67	1.08	0.65 - 1.68	Same as

CAUTI Rate per 1,000 urinary catheter days



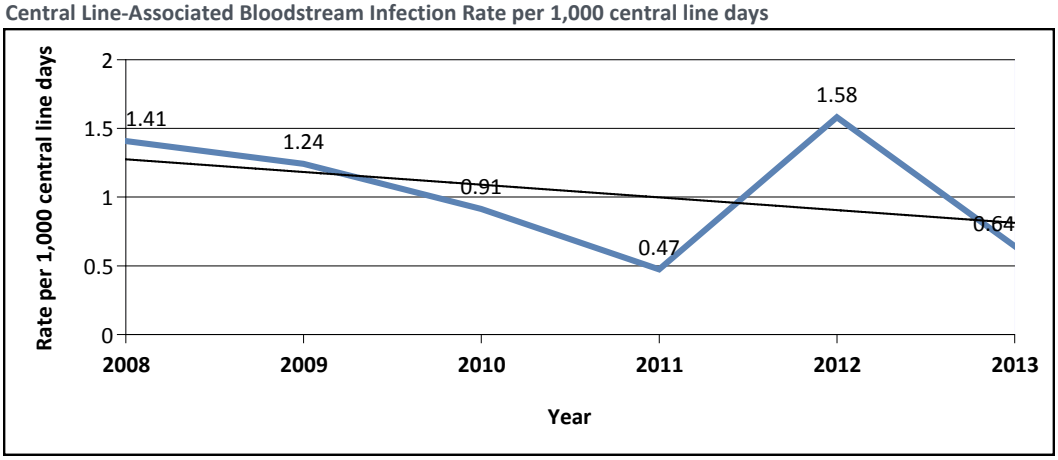
MAIN LINE HOSPITAL --- PAOLI

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
2013	4	4.18	0.96	0.26 - 2.45	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	0.05	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
2013	1	0.16	6.29	0.08 - 35.02	Same as

MAIN LINE HOSPITAL BRYN MAWR

NHSN ID: 11753

Hospital type: Acute care general hospital

Number of licensed beds (2013): 319

Number of reported Healthcare-Associated Infections:

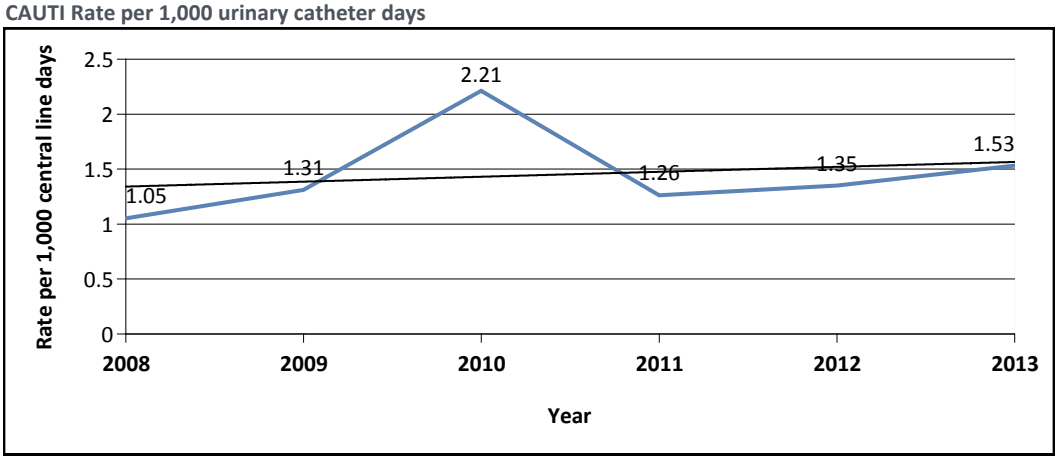
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	49,231	12	0	18	0	15	0	12	1	9	0	1.36
2009	95,265	26	1	30	0	24	0	22	2	24	2	1.38
2010	95,295	23	0	29	3	32	0	36	2	26	2	1.61
2011	94,116	19	0	25	1	29	0	30	3	26	1	1.42
2012	71,732	11	0	36	3	17	0	27	1	24	1	1.67
2013	66,926	9	1	53	2	7	0	29	8	36	1	2.18

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
2013	21	28.79	0.73	0.45 - 1.12	Same as

CAUTI Rate per 1,000 urinary catheter days



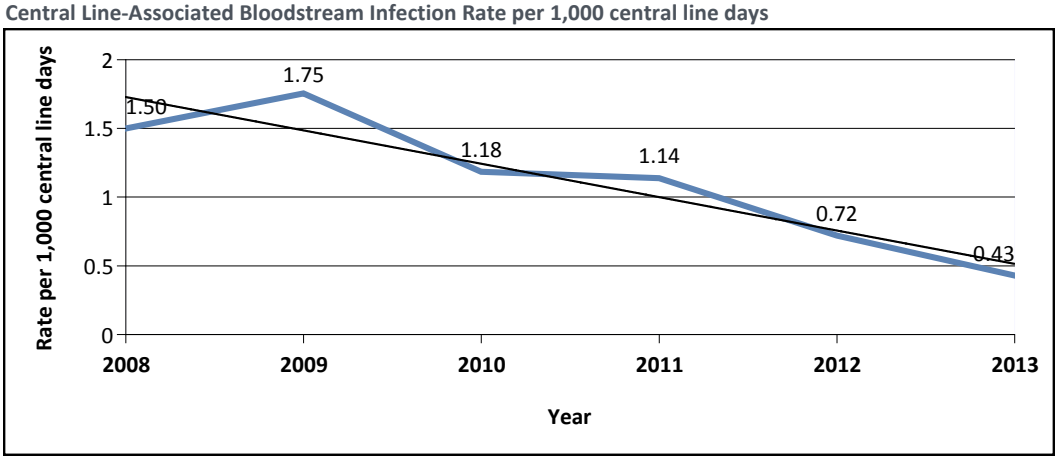
MAIN LINE HOSPITAL BRYN MAWR

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
2013	5	9.40	0.53	0.17 - 1.24	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
2013	0	0.25	0.00	0 - 14.53	Same as

MAIN LINE HOSPITAL BRYN MAWR REHABILITATION

NHSN ID: 11417

Hospital type: Rehabilitation hospital

Number of licensed beds (2013): 148

Number of reported Healthcare-Associated Infections:

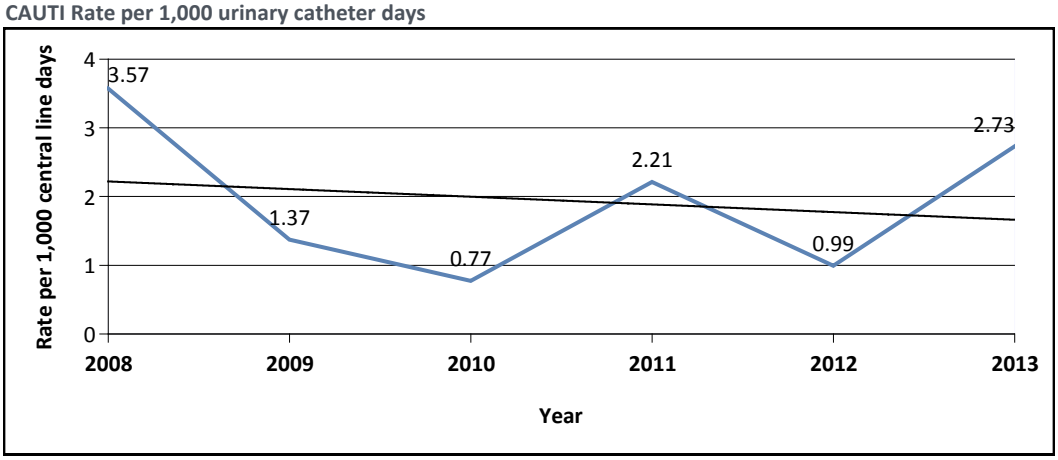
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	23,443	3	0	22	0	0	0	0	4	35	0	2.73
2009	46,834	2	0	45	0	2	0	0	3	43	0	2.03
2010	43,374	0	0	17	0	1	0	0	2	35	0	1.27
2011	41,448	1	0	9	2	3	0	0	4	63	0	1.98
2012	38,707	0	0	16	0	5	0	0	0	27	0	1.24
2013	36,491	0	1	7	0	4	0	0	2	51	1	1.81

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
2013	4	2.15	1.86	0.5 - 4.75	Same as

CAUTI Rate per 1,000 urinary catheter days



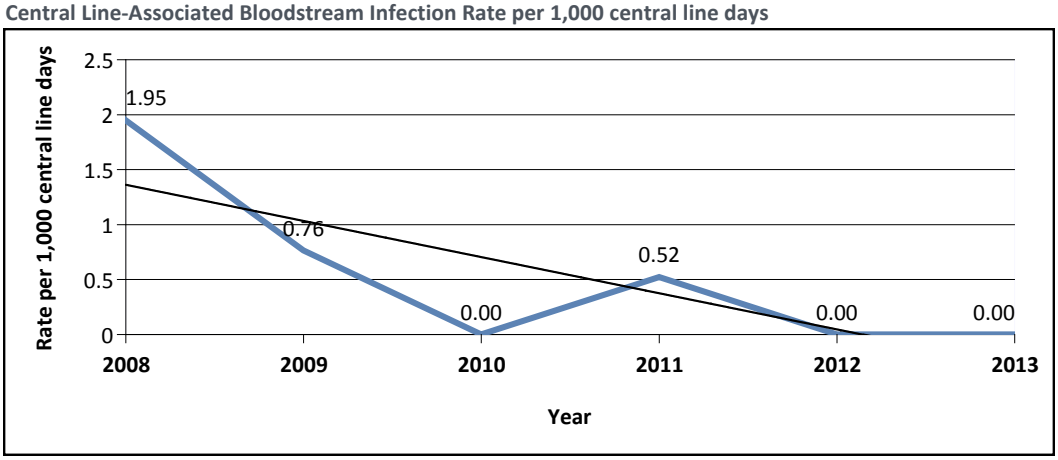
MAIN LINE HOSPITAL BRYN MAWR REHABILITATION

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
2013	0	0.95	0.00	0 - 3.84	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 (2013): 323

Number of reported Healthcare-Associated Infections:

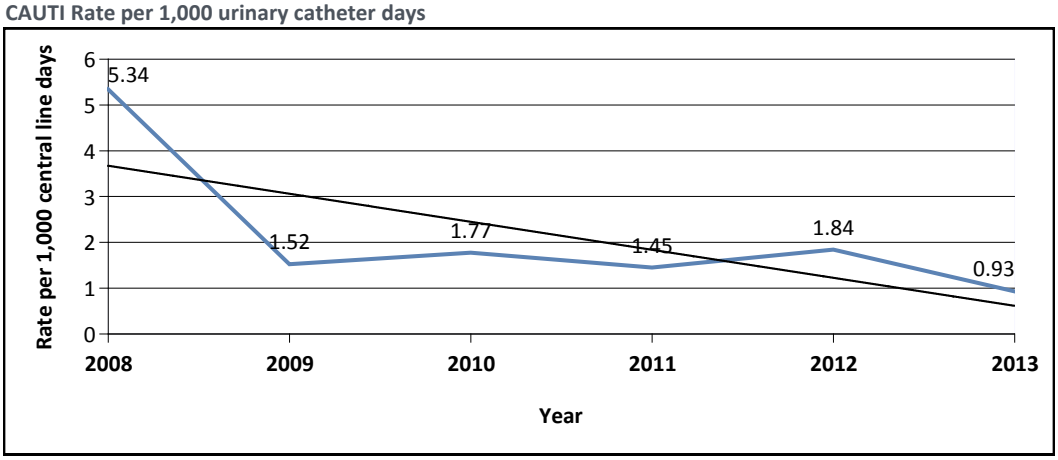
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	42,245	49	5	15	5	60	0	40	3	54	0	5.47
2009	105,206	37	9	21	26	35	1	56	11	46	2	2.32
2010	90,598	22	11	18	19	27	0	57	10	48	1	2.35
2011	85,861	18	10	20	14	25	0	60	1	34	0	2.12
2012	76,127	7	1	27	24	21	1	57	7	39	0	2.42
2013	79,001	13	0	21	13	12	0	43	4	31	1	1.75

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
2013	17	38.27	0.44	0.26 - 0.71	Better

CAUTI Rate per 1,000 urinary catheter days



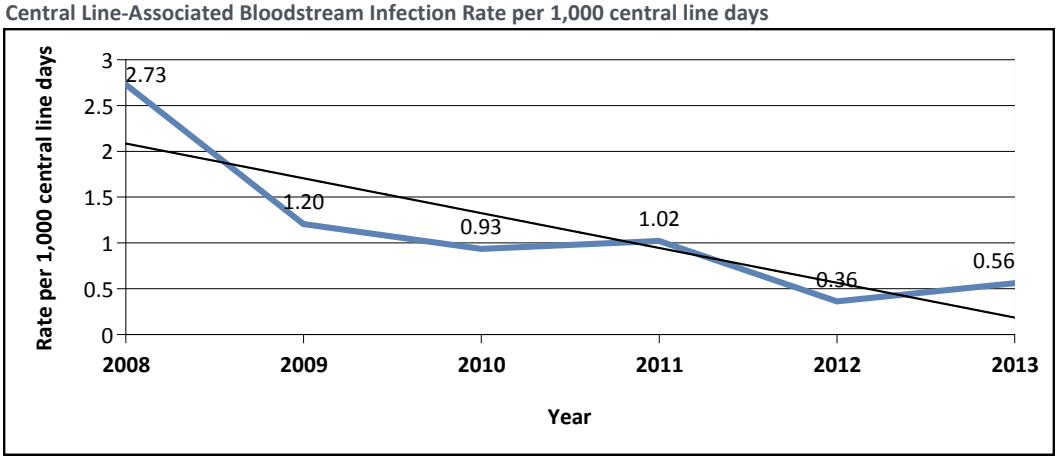
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER

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
2013	8	11.58	0.69	0.3 - 1.36	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	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
2013	0	1.09	0.00	0 - 3.38	Same as

MEADVILLE MEDICAL CENTER

NHSN ID: 11583

Hospital type: Acute care general hospital

Number of licensed beds (2013): 203

Number of reported Healthcare-Associated Infections:

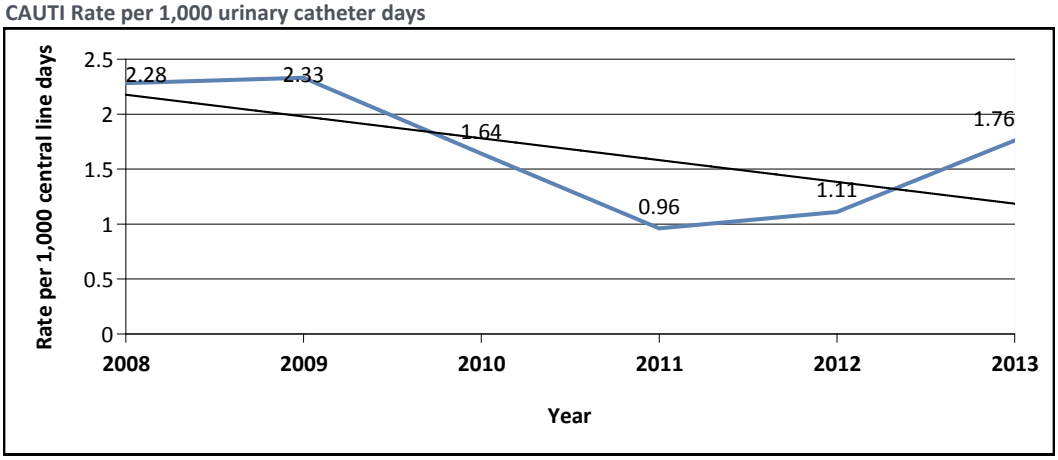
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	17,576	1	1	6	1	7	0	15	6	22	1	3.41
2009	43,184	8	2	12	3	14	1	17	1	23	0	1.88
2010	36,711	2	7	12	0	6	1	28	0	21	0	2.10
2011	36,634	2	1	16	1	10	0	19	1	10	0	1.64
2012	35,113	4	6	18	0	6	2	22	5	8	0	2.02
2013	36,306	13	27	22	1	19	2	29	5	25	1	3.97

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
2013	10	11.88	0.84	0.4 - 1.55	Same as

CAUTI Rate per 1,000 urinary catheter days



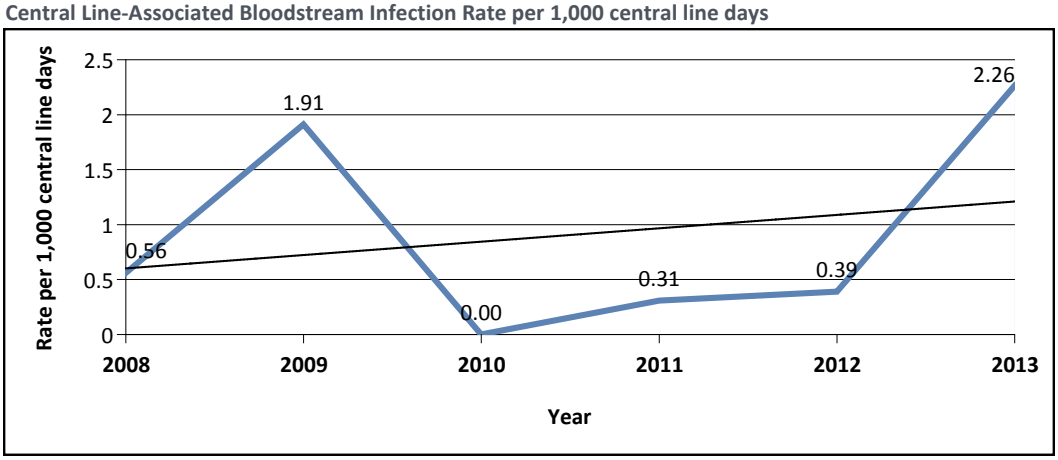
MEADVILLE MEDICAL CENTER

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
2013	7	2.50	2.80	1.12 - 5.76	Worse

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 (2013): 100

Number of reported Healthcare-Associated Infections:

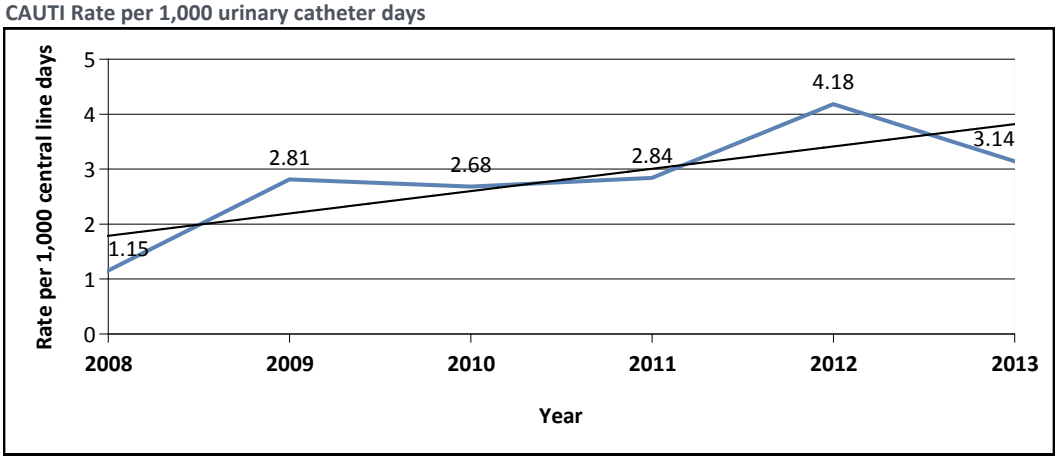
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	12,977	1	0	0	0	5	0	12	0	4	0	1.70
2009	21,940	5	0	3	0	12	0	27	0	18	0	2.96
2010	22,073	4	0	3	0	11	0	19	1	17	0	2.49
2011	23,341	3	1	9	0	6	1	28	5	23	0	3.26
2012	22,194	2	0	9	1	11	0	41	3	24	2	4.19
2013	25,113	2	0	22	0	2	0	17	1	14	0	2.31

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
2013	11	7.29	1.51	0.75 - 2.7	Same as

CAUTI Rate per 1,000 urinary catheter days



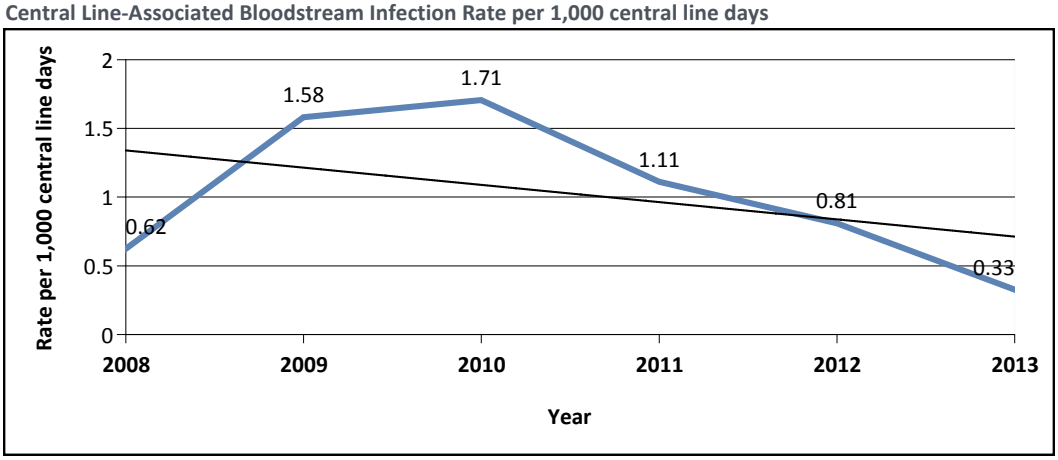
MEMORIAL HOSPITAL

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
2013	1	2.48	0.40	0.01 - 2.25	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 (2013): 35

Number of reported Healthcare-Associated Infections:

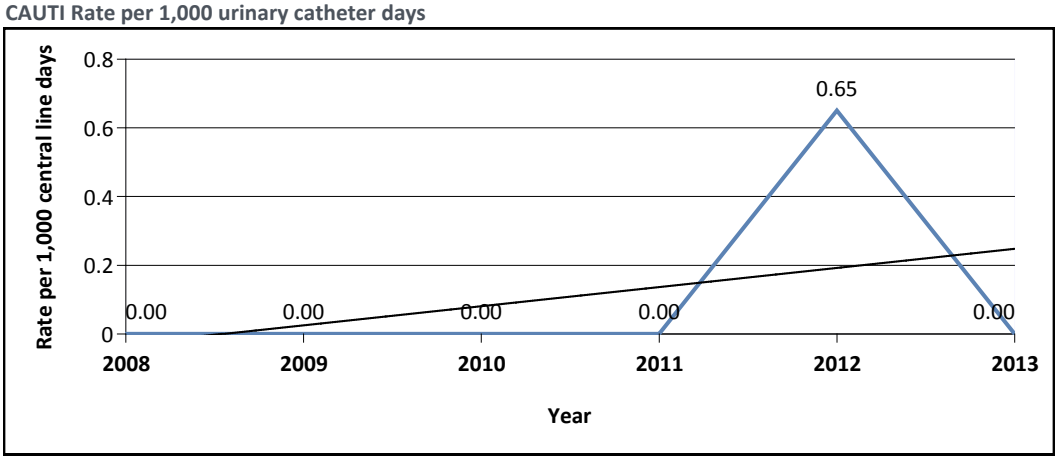
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,123	0	0	0	0	0	0	0	0	0	0	0.00
2009	6,353	0	0	0	0	0	0	0	0	0	0	0.00
2010	4,659	0	0	0	0	1	0	4	0	0	0	1.07
2011	4,432	0	0	0	0	0	0	0	1	0	0	0.23
2012	6,544	0	0	0	0	2	0	4	0	1	0	1.07
2013	4,867	1	0	1	0	3	0	2	0	0	0	1.44

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
2013	0	1.98	0.00	0 - 1.85	Same as

CAUTI Rate per 1,000 urinary catheter days



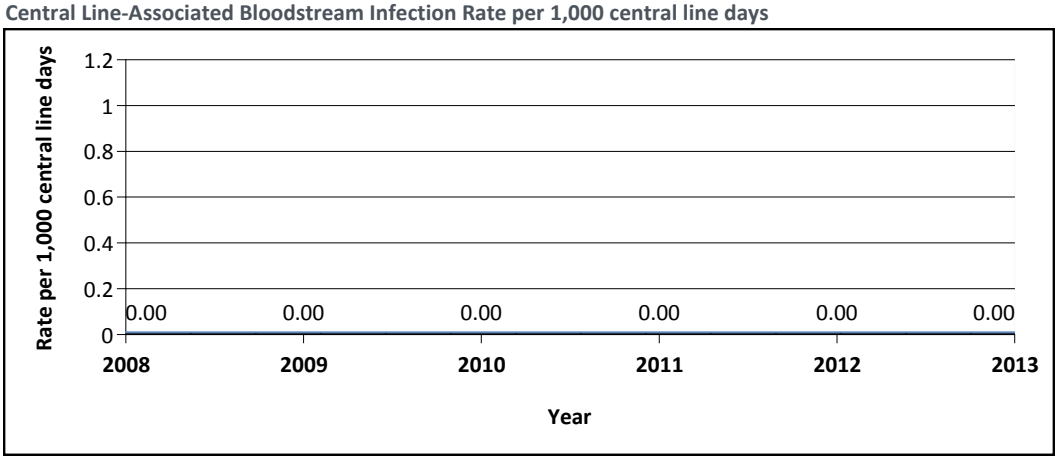
MEMORIAL HOSPITAL, INC. TOWANDA

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
2013	0	0.12	0.00	0 - 31.64	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 (2013): 204

Number of reported Healthcare-Associated Infections:

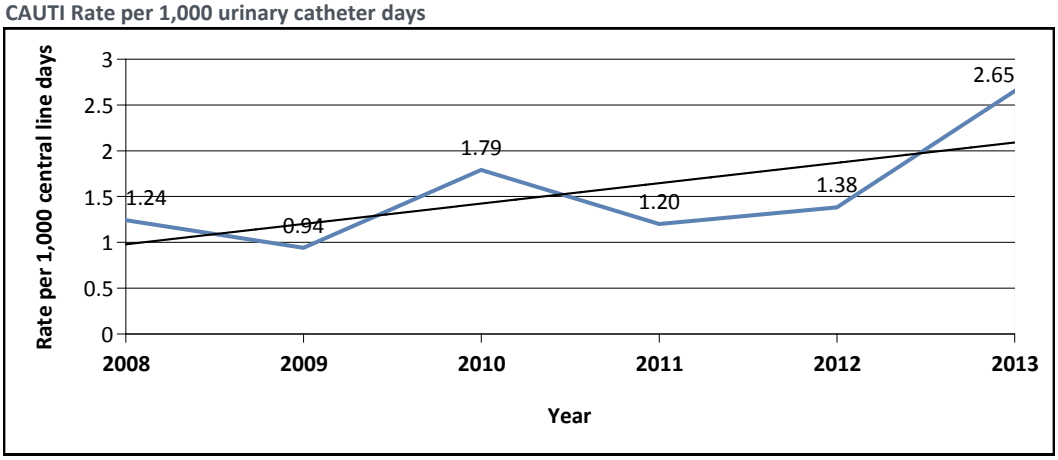
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	27,273	17	0	22	4	15	0	18	2	8	1	3.19
2009	60,404	38	0	33	10	19	0	38	1	24	2	2.73
2010	50,205	29	0	28	7	12	0	29	0	23	1	2.57
2011	47,715	19	0	14	1	9	0	19	1	20	1	1.76
2012	45,719	11	0	20	5	7	0	32	5	13	0	2.03
2013	42,258	18	2	17	3	7	0	21	3	24	2	2.30

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
2013	14	10.95	1.28	0.7 - 2.14	Same as

CAUTI Rate per 1,000 urinary catheter days



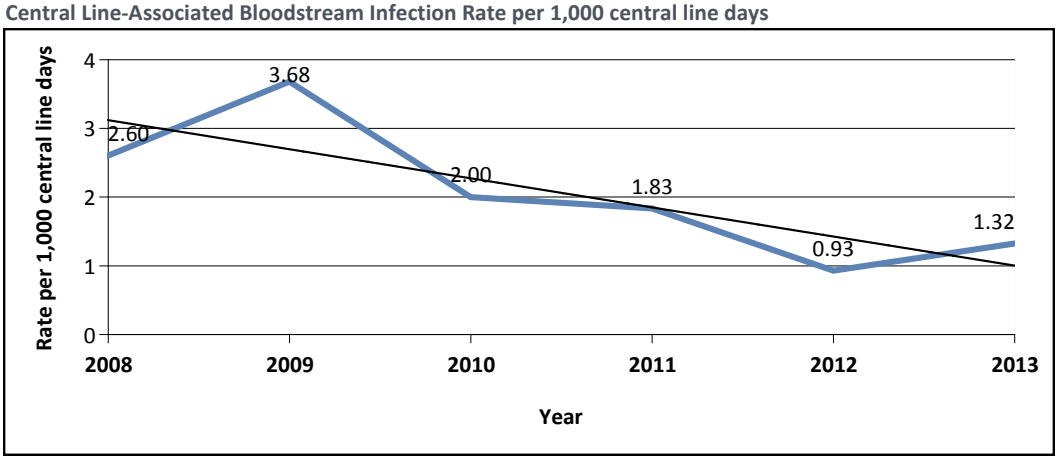
MERCY FITZGERALD HOSPITAL

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
2013	8	4.89	1.64	0.7 - 3.23	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 (2013): 178

Number of reported Healthcare-Associated Infections:

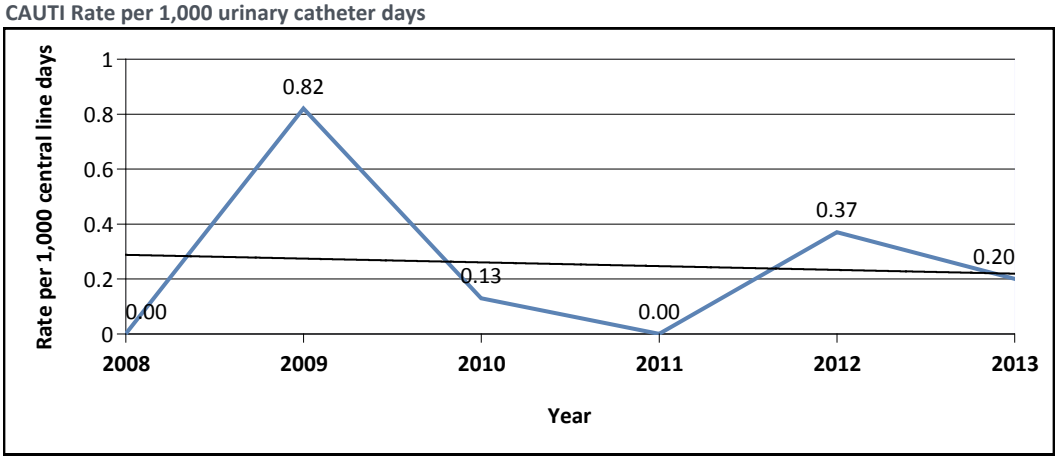
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	22,450	22	0	12	0	4	0	4	0	0	0	1.87
2009	57,803	14	0	25	2	3	0	13	1	7	0	1.12
2010	47,304	3	0	19	3	0	0	5	0	1	1	0.68
2011	43,434	1	0	5	1	0	0	9	1	0	0	0.39
2012	40,012	4	0	8	0	1	0	11	0	2	1	0.67
2013	38,617	6	0	7	0	0	0	14	0	1	0	0.73

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
2013	1	10.14	0.10	0 - 0.55	Better

CAUTI Rate per 1,000 urinary catheter days



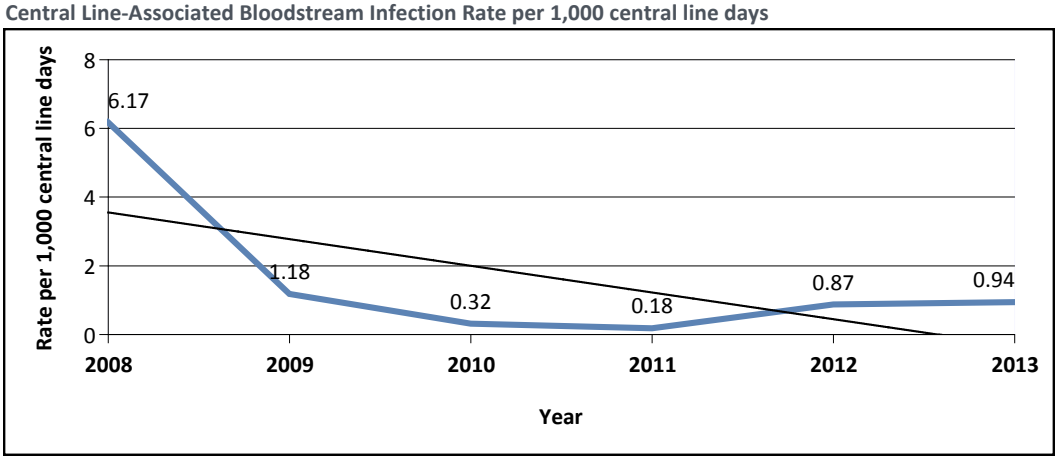
MERCY PHILADELPHIA HOSPITAL

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
2013	4	3.44	1.16	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 (2013): 126

Number of reported Healthcare-Associated Infections:

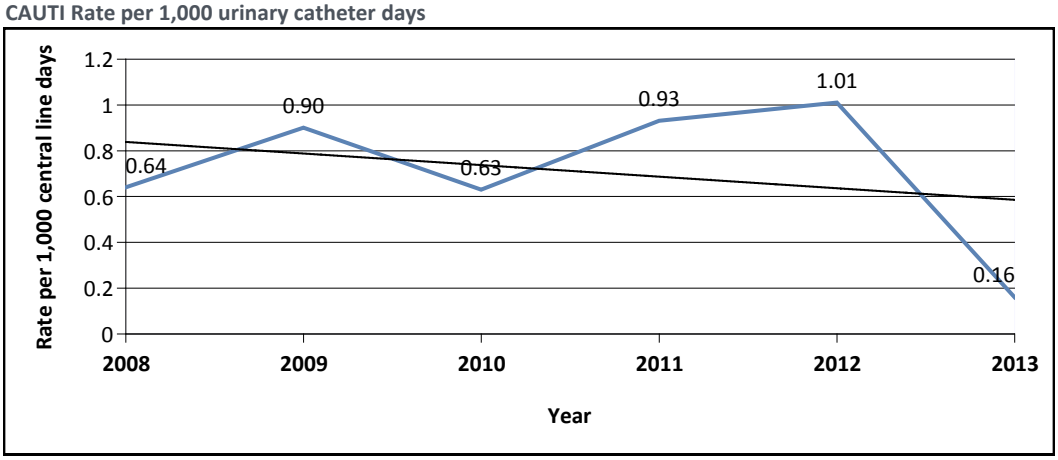
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	17,128	6	0	3	0	10	1	17	3	3	0	2.51
2009	33,366	15	0	2	1	19	3	21	9	9	0	2.37
2010	30,578	6	2	5	1	13	0	27	3	10	0	2.19
2011	28,748	6	0	7	0	4	0	21	4	9	3	1.88
2012	26,003	4	0	7	1	7	0	9	3	9	3	1.65
2013	23,128	5	0	2	1	6	0	12	3	2	1	1.38

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
2013	1	12.88	0.08	0 - 0.43	Better

CAUTI Rate per 1,000 urinary catheter days



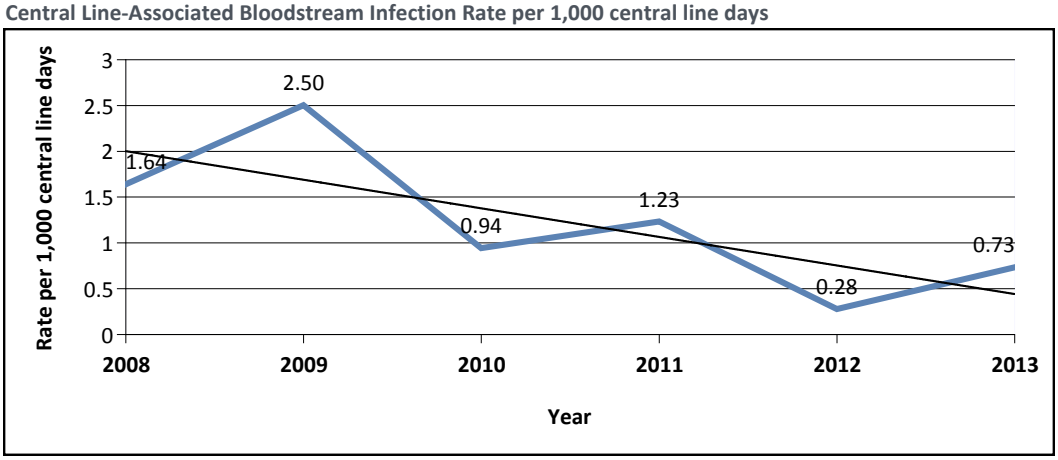
MERCY SUBURBAN HOSPITAL NORRISTOWN

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
2013	3	3.31	0.91	0.18 - 2.65	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 (2013): 20

Number of reported Healthcare-Associated Infections:

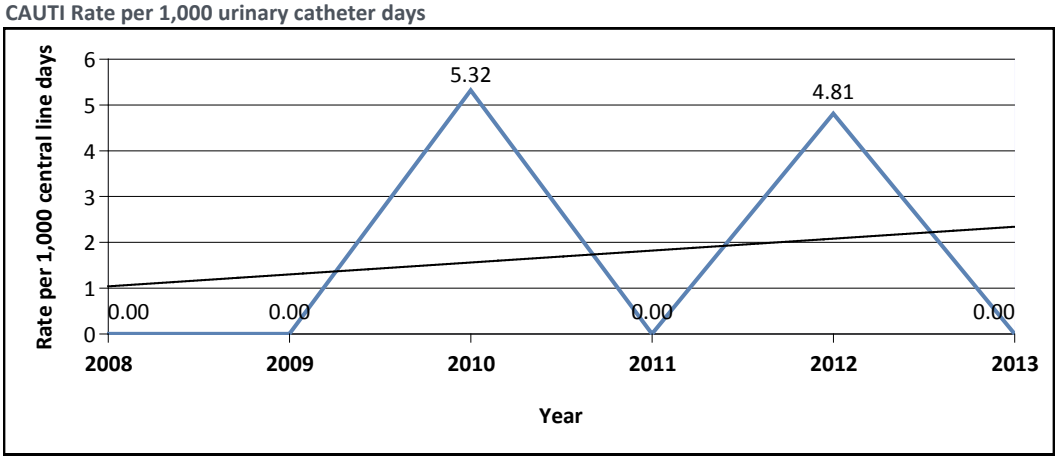
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	900	0	0	0	0	0	0	0	0	0	0	0.00
2009	2,679	0	0	0	0	0	0	0	0	1	0	0.37
2010	1,735	0	0	0	0	1	0	0	0	1	0	1.15
2011	1,727	0	0	0	0	0	0	0	0	1	0	0.58
2012	1,877	0	0	0	0	0	0	0	0	2	0	1.07
2013	1,662	0	0	1	0	0	0	0	0	1	0	1.20

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
2013	0	0.13	0.00	0 - 27.83	Same as

CAUTI Rate per 1,000 urinary catheter days



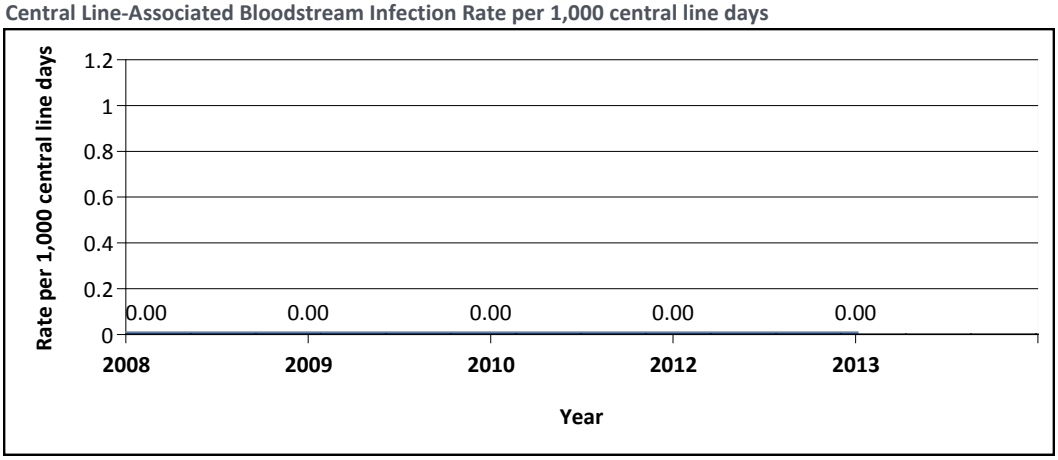
MEYERSDALE COMMUNITY HOSPITAL

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
2013	0	0.04	0.00	0 - 82.48	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 (2013): 25

Number of reported Healthcare-Associated Infections:

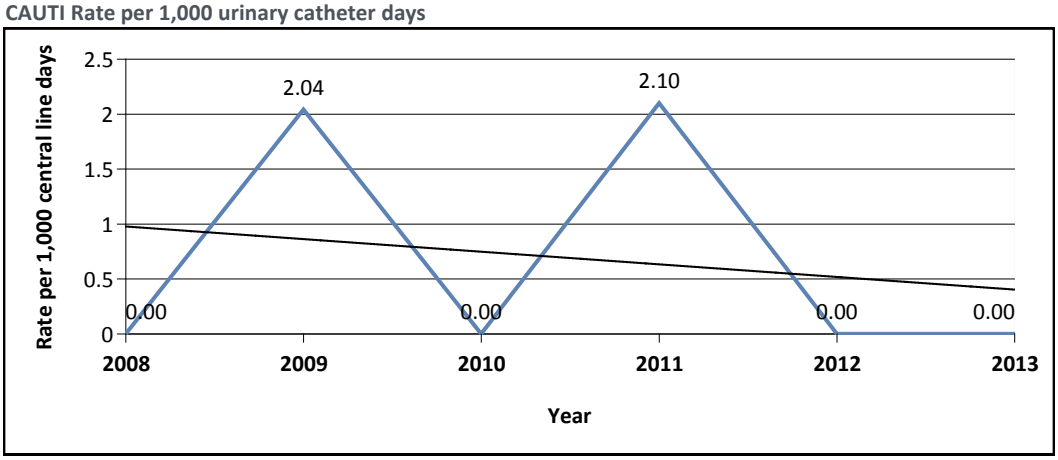
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	2,570	2	0	0	0	0	0	0	1	0	0	1.17
2009	4,401	0	0	0	0	0	0	0	1	2	0	0.68
2010	4,584	0	0	0	0	0	0	1	0	1	0	0.44
2011	4,247	0	0	0	0	0	0	0	0	2	0	0.47
2012	4,018	0	0	0	0	0	0	0	0	0	0	0.00
2013	3,078	0	0	7	0	1	0	0	0	0	0	2.60

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
2013	0	0.70	0.00	0 - 5.24	Same as

CAUTI Rate per 1,000 urinary catheter days



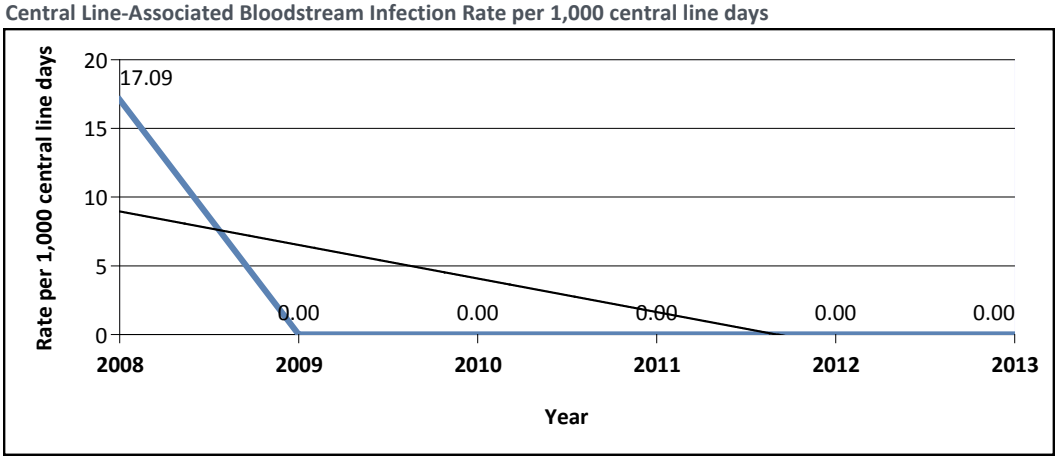
MID-VALLEY HOSPITAL

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
2013	0	0.13	0.00	0 - 27.52	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 (2013): 144

Number of reported Healthcare-Associated Infections:

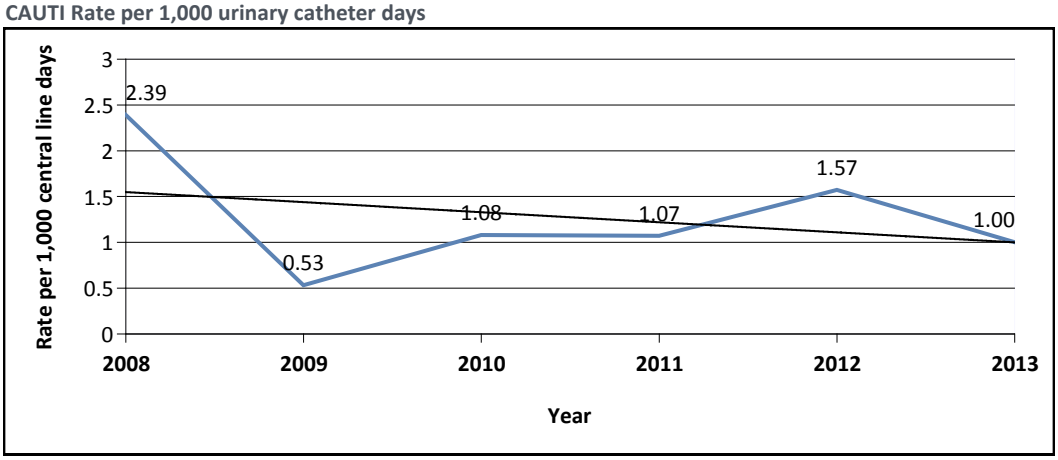
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	9,656	1	0	2	1	1	0	3	1	8	0	1.76
2009	21,516	0	0	0	0	0	0	4	0	7	0	0.51
2010	21,824	0	0	1	1	0	0	1	0	16	0	0.87
2011	20,062	2	0	0	6	0	0	2	2	14	1	1.35
2012	22,098	2	0	0	1	0	0	2	1	14	0	0.91
2013	24,378	0	0	0	6	1	0	0	0	12	1	0.82

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
2013	2	4.12	0.49	0.05 - 1.75	Same as

CAUTI Rate per 1,000 urinary catheter days



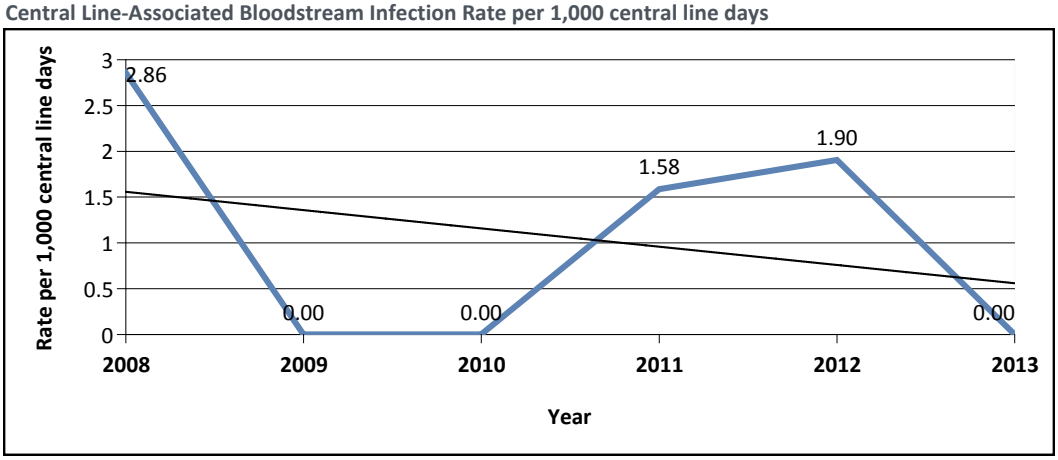
MILLCREEK COMMUNITY HOSPITAL

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
2013	0	0.71	0.00	0 - 5.17	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 (2013): 551

Number of reported Healthcare-Associated Infections:

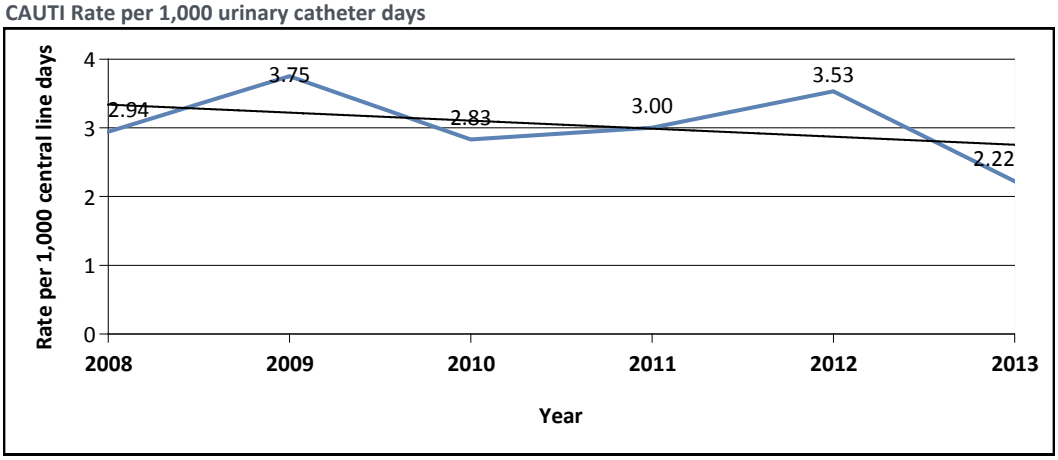
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	68,769	81	0	24	2	14	0	71	1	59	3	3.71
2009	141,376	126	5	71	6	88	0	137	15	186	9	4.55
2010	144,877	77	22	80	17	92	2	143	19	132	15	4.13
2011	144,466	76	22	88	44	31	0	146	11	119	15	3.82
2012	143,148	96	12	114	34	27	0	150	17	156	28	4.43
2013	149,054	103	18	132	55	17	0	139	18	136	17	4.26

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
2013	60	56.62	1.06	0.81 - 1.36	Same as

CAUTI Rate per 1,000 urinary catheter days



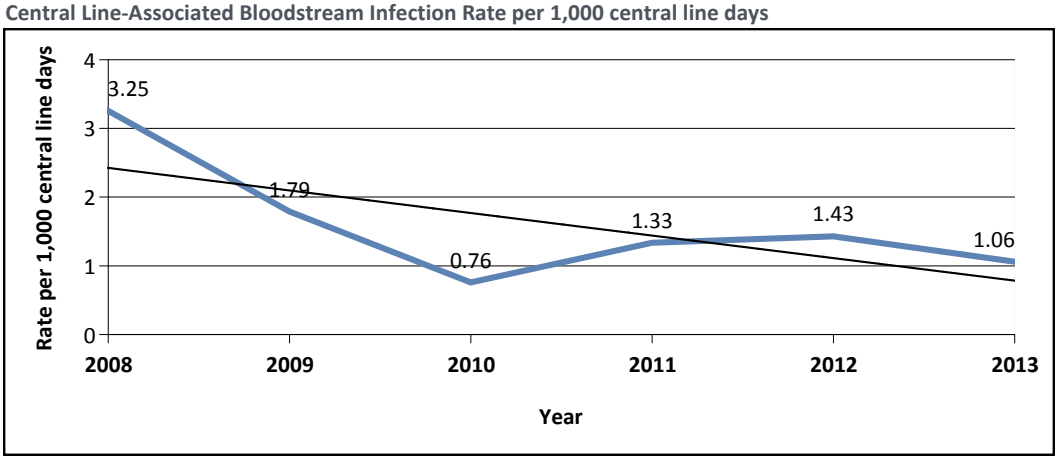
MILTON S HERSHEY MEDICAL CENTER

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
2013	41	31.26	1.31	0.94 - 1.78	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	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
2013	5	4.64	1.08	0.35 - 2.52	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
2013	40	25.22	1.59	1.13 - 2.16	Worse

MINERS MEDICAL CENTER

NHSN ID: 12295

Hospital type: Acute care general hospital

Number of licensed beds (2013): 30

Number of reported Healthcare-Associated Infections:

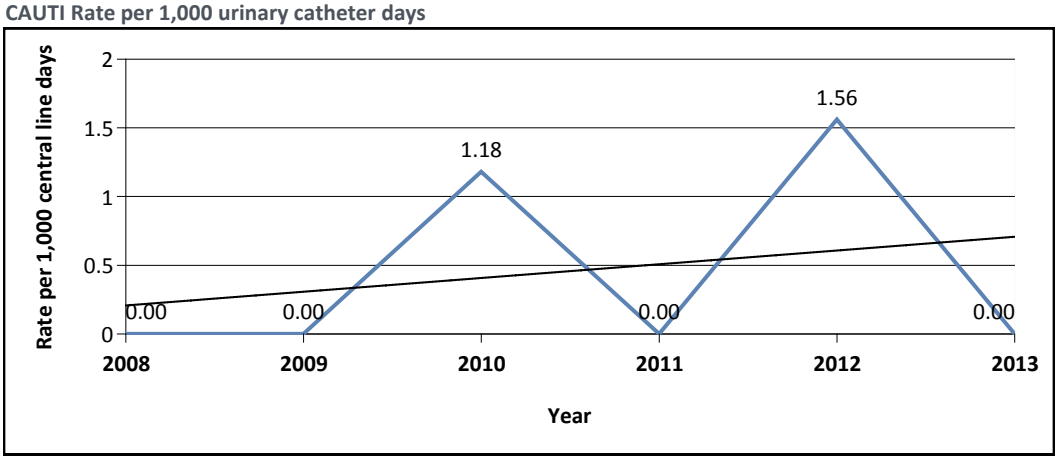
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	2,313	0	0	0	0	2	0	2	0	0	0	1.73
2009	4,660	0	0	0	0	1	0	1	1	2	0	1.07
2010	4,521	0	0	0	1	2	0	1	0	3	0	1.55
2011	4,420	0	0	1	0	1	0	1	0	0	1	0.90
2012	3,839	1	0	0	0	0	0	1	0	3	0	1.30
2013	2,985	0	0	0	0	1	0	0	1	0	0	0.67

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
2013	0	0.60	0.00	0 - 6.16	Same as

CAUTI Rate per 1,000 urinary catheter days



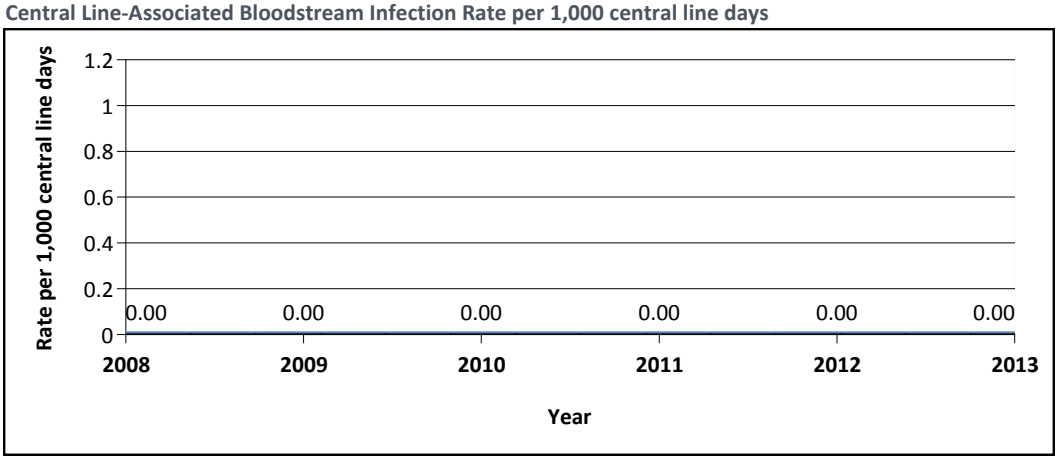
MINERS MEDICAL CENTER

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
2013	0	0.09	0.00	0 - 42.21	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 (2013): 210

Number of reported Healthcare-Associated Infections:

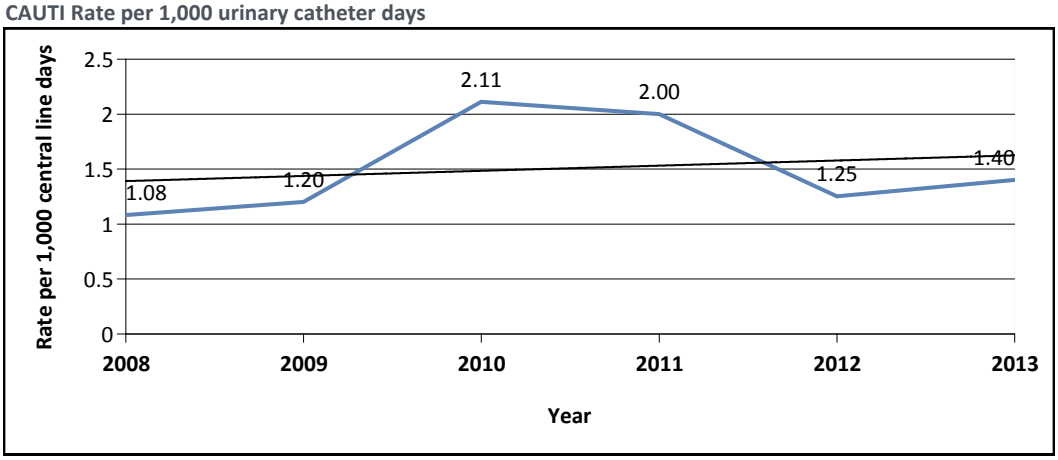
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	26,302	4	0	2	0	11	0	6	0	6	0	1.10
2009	54,262	5	0	11	0	37	0	19	0	10	0	1.51
2010	53,137	7	1	6	0	29	0	24	0	14	0	1.52
2011	51,094	7	2	14	0	26	0	21	2	18	0	1.76
2012	48,871	10	0	19	0	34	0	34	0	8	0	2.15
2013	49,805	5	4	15	0	16	0	40	2	20	1	2.07

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
2013	7	7.52	0.93	0.37 - 1.92	Same as

CAUTI Rate per 1,000 urinary catheter days



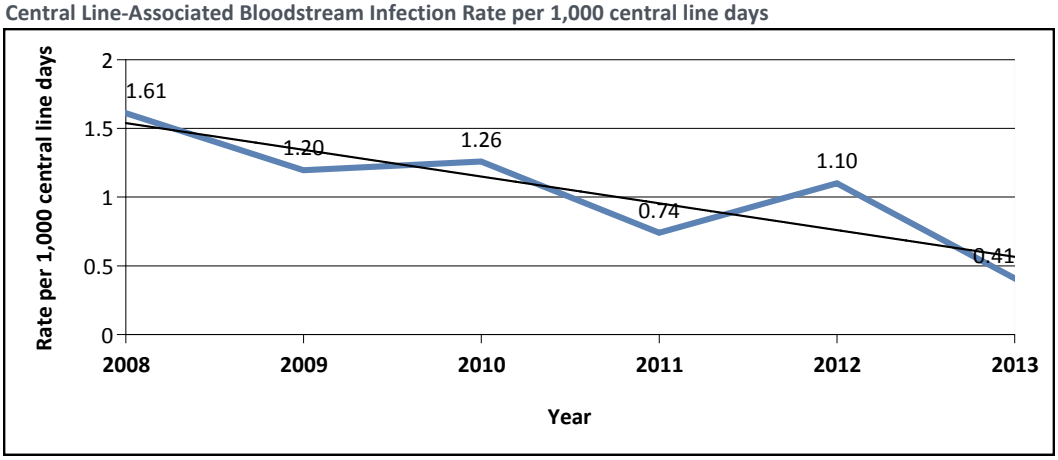
MONONGAHELA VALLEY HOSPITAL

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
2013	2	3.30	0.61	0.07 - 2.19	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 (2013): 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
2013	20,217	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 (2013): 217

Number of reported Healthcare-Associated Infections:

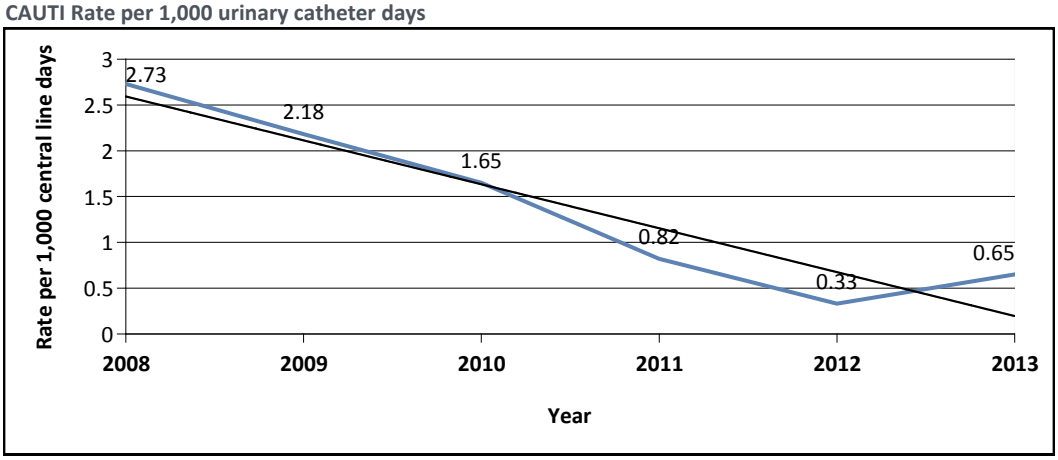
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	20,788	15	0	11	0	27	0	19	7	16	0	4.57
2009	60,499	23	3	12	0	18	2	37	2	25	0	2.02
2010	56,820	11	11	13	1	24	1	25	3	14	0	1.81
2011	57,390	8	4	5	0	10	2	30	4	11	0	1.29
2012	54,019	6	4	6	1	15	0	22	1	8	0	1.17
2013	51,312	5	0	15	0	11	1	17	0	8	1	1.13

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
2013	4	12.82	0.31	0.08 - 0.8	Better

CAUTI Rate per 1,000 urinary catheter days



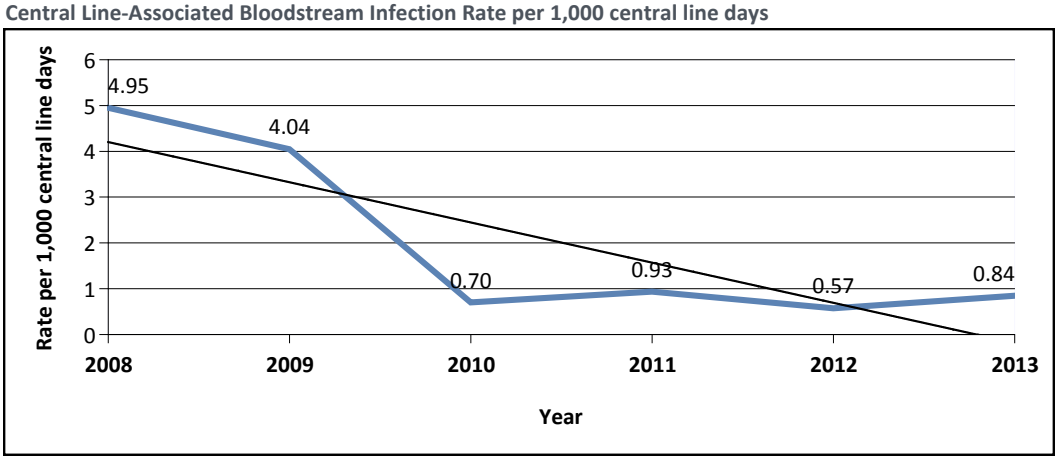
MOSES TAYLOR HOSPITAL

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
2013	3	2.88	1.04	0.21 - 3.04	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	0.55	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
2013	0	0.36	0.00	0 - 10.13	Same as

MOUNT NITTANY MEDICAL CENTER

NHSN ID: 11797

Hospital type: Acute care general hospital

Number of licensed beds (2013): 260

Number of reported Healthcare-Associated Infections:

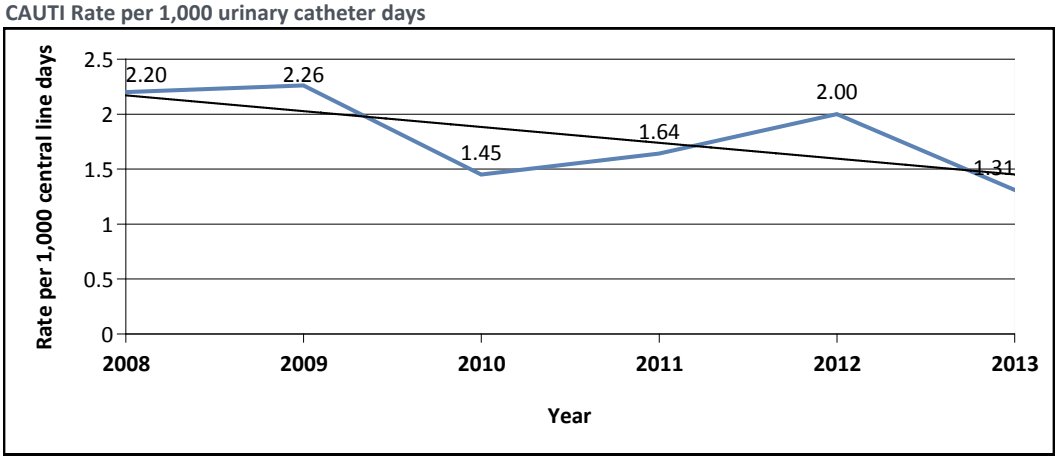
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	25,538	9	0	9	0	8	1	29	4	28	0	3.45
2009	52,307	11	1	24	0	13	1	56	2	49	0	3.00
2010	51,043	6	1	29	0	13	2	53	0	38	0	2.78
2011	51,928	5	1	18	0	9	1	58	0	31	1	2.39
2012	50,164	3	1	22	0	9	0	62	1	38	0	2.71
2013	49,847	1	1	42	0	6	1	49	1	38	0	2.79

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
2013	18	29.09	0.62	0.37 - 0.98	Better

CAUTI Rate per 1,000 urinary catheter days



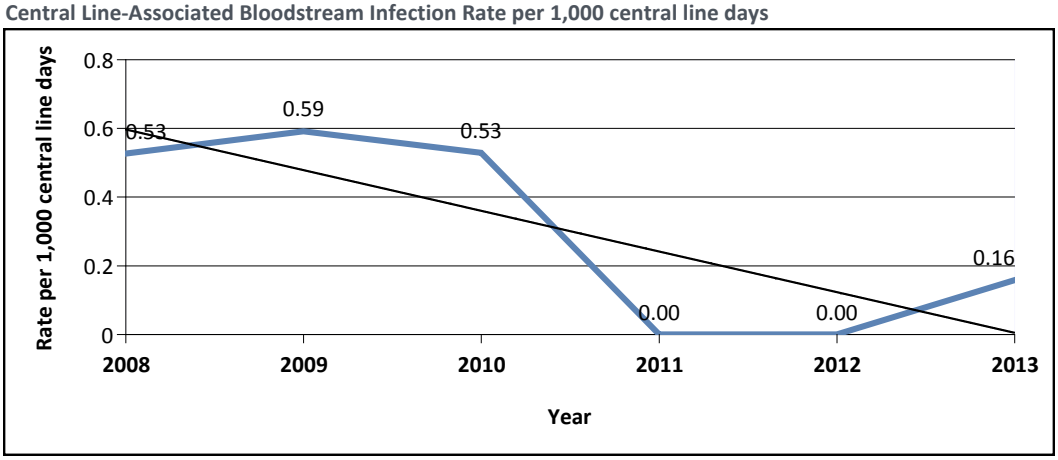
MOUNT NITTANY MEDICAL CENTER

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
2013	1	5.12	0.20	0 - 1.09	Same as

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 (2013): 20

Number of reported Healthcare-Associated Infections:

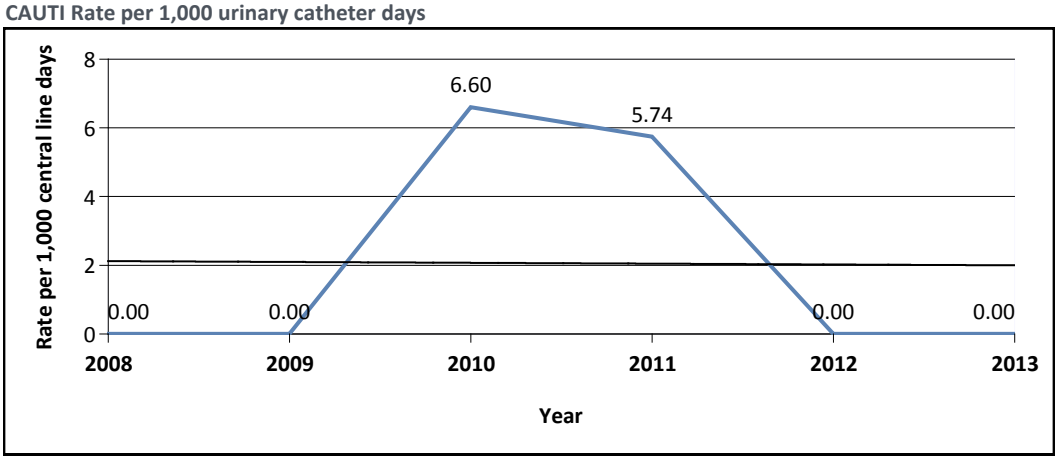
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	2,557	1	0	2	0	0	0	1	0	0	0	1.56
2009	5,236	2	0	3	0	0	0	0	0	0	0	0.95
2010	4,632	0	0	2	0	1	0	2	3	5	0	2.81
2011	4,785	1	0	2	0	2	0	2	1	7	0	3.13
2012	4,703	2	0	0	0	0	0	0	0	3	0	1.06
2013	4,806	1	0	3	1	0	0	1	1	3	0	2.08

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
2013	0	0.66	0.00	0 - 5.55	Same as

CAUTI Rate per 1,000 urinary catheter days



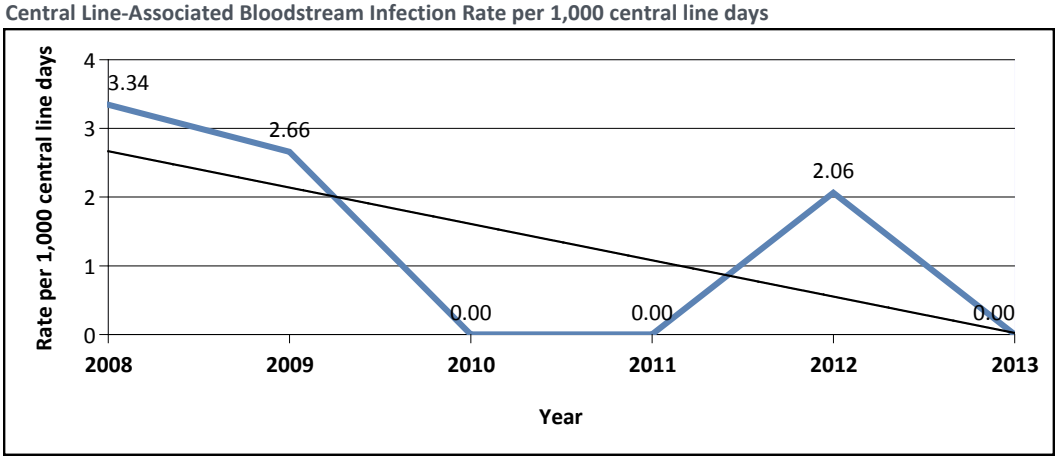
MUNCY VALLEY HOSPITAL

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
2013	0	0.52	0.00	0 - 7.06	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 (2013): 45

Number of reported Healthcare-Associated Infections:

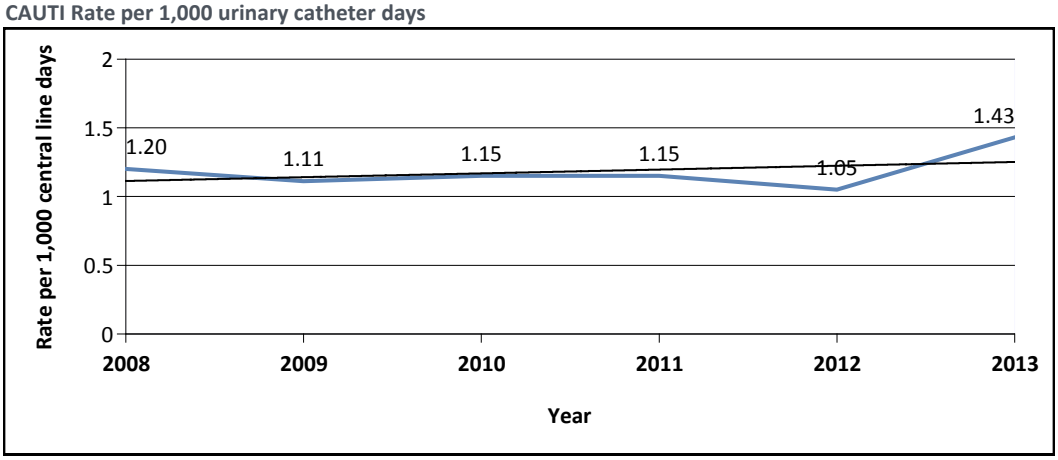
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,028	0	0	0	0	0	0	1	0	1	0	0.50
2009	8,775	0	0	0	0	1	0	4	0	2	0	0.80
2010	8,793	0	0	1	0	0	0	5	0	2	0	0.91
2011	8,468	0	0	1	0	1	0	9	0	2	0	1.54
2012	8,346	0	0	0	0	0	0	1	0	3	0	0.48
2013	7,565	1	0	0	0	0	0	6	0	2	0	1.19

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	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
2013	2	2.12	0.94	0.11 - 3.4	Same as

CAUTI Rate per 1,000 urinary catheter days



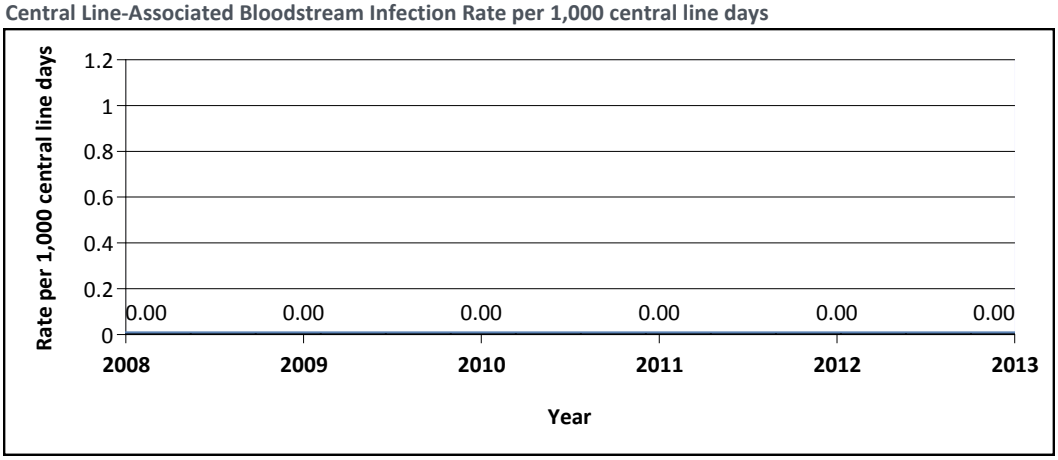
NASON HOSPITAL

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
2013	0	0.11	0.00	0 - 32.96	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 (2013): 203

Number of reported Healthcare-Associated Infections:

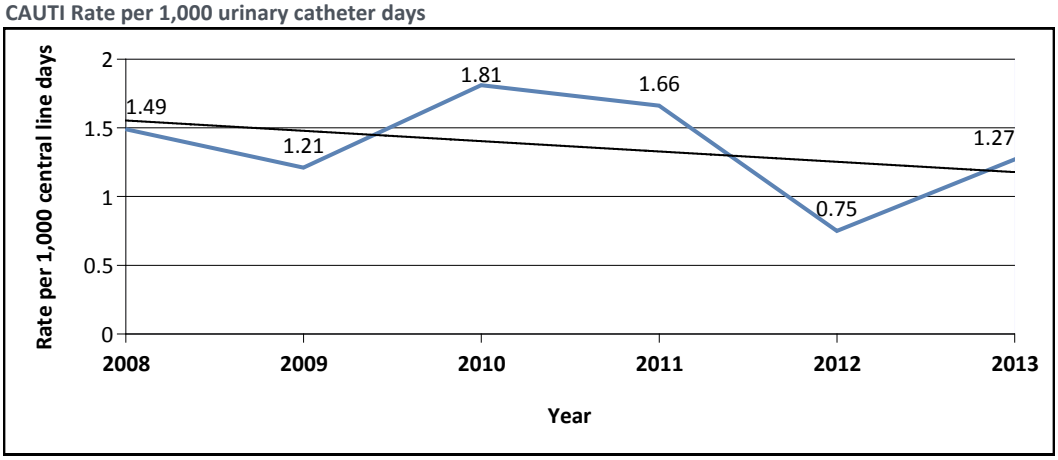
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	24,093	9	0	14	0	0	0	7	0	16	1	1.95
2009	60,481	29	0	23	0	8	0	16	3	20	2	1.67
2010	48,223	20	2	35	1	11	0	27	6	36	1	2.88
2011	46,634	22	4	20	0	8	0	12	2	28	0	2.06
2012	45,817	16	0	17	2	7	0	21	3	28	2	2.10
2013	42,260	14	1	21	0	4	0	23	2	22	2	2.11

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
2013	12	14.44	0.83	0.43 - 1.45	Same as

CAUTI Rate per 1,000 urinary catheter days



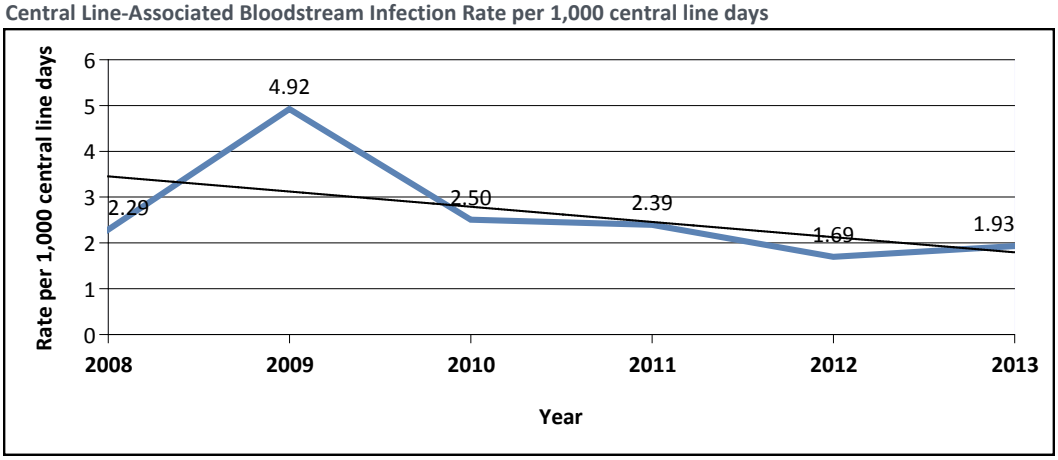
NAZARETH HOSPITAL

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
2013	11	3.84	2.87	1.43 - 5.13	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 (2013): 455

Number of reported Healthcare-Associated Infections:

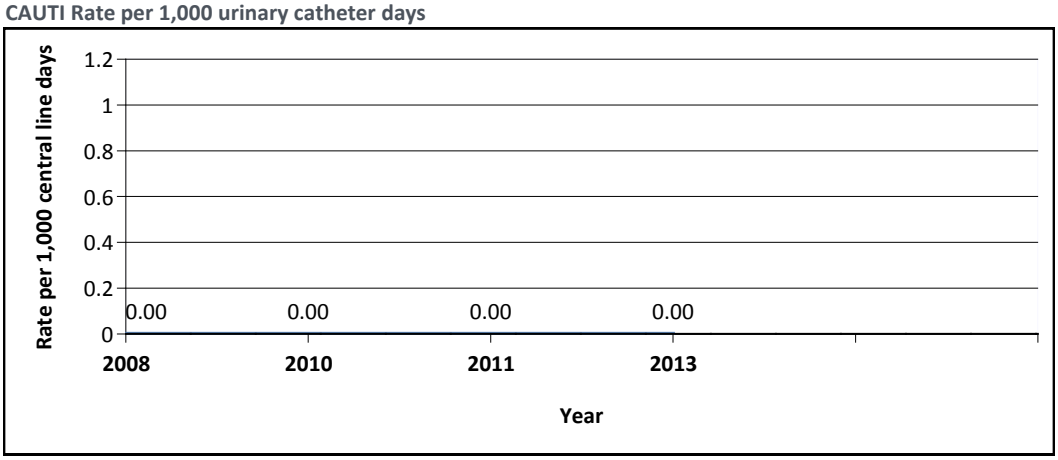
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	67,666	0	0	0	0	0	0	0	0	0	0	0.00
2009	135,928	0	0	0	0	0	0	0	1	5	0	0.04
2010	128,196	0	48	0	0	0	1	0	42	16	0	0.83
2011	125,390	0	66	1	1	1	6	0	49	5	0	1.03
2012	112,213	0	71	10	1	0	2	0	30	0	0	1.02
2013	95,792	0	55	0	1	0	0	0	15	4	0	0.78

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				-	
2013	0	0.04	0.00	0 - 95.76	Same as

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 (2013): 138

Number of reported Healthcare-Associated Infections:

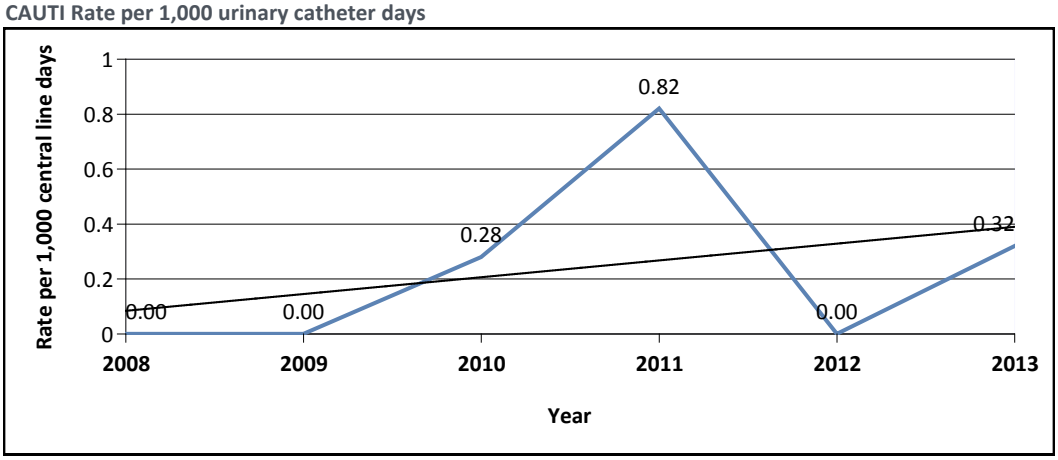
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	10,943	1	0	1	0	0	0	2	0	0	0	0.37
2009	20,017	0	0	1	0	3	0	7	2	0	0	0.65
2010	19,315	2	0	3	0	1	0	17	6	1	0	1.55
2011	21,440	6	0	9	0	0	0	1	0	5	0	0.98
2012	23,943	1	0	1	0	0	0	3	0	0	0	0.21
2013	22,184	1	0	1	0	1	0	5	0	2	0	0.45

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
2013	1	4.67	0.21	0 - 1.19	Same as

CAUTI Rate per 1,000 urinary catheter days



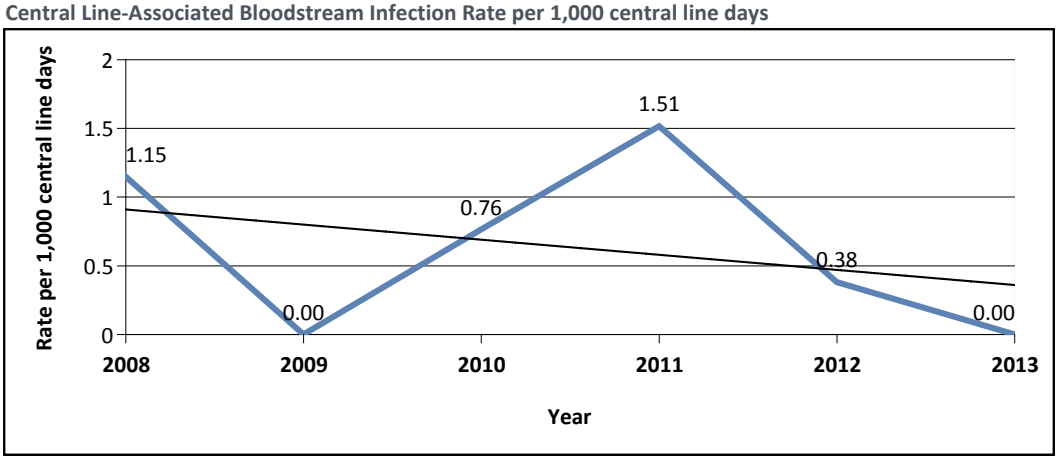
OHIO VALLEY GENERAL HOSPITAL

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
2013	0	1.77	0.00	0 - 2.07	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 (2013): 30

Number of reported Healthcare-Associated Infections:

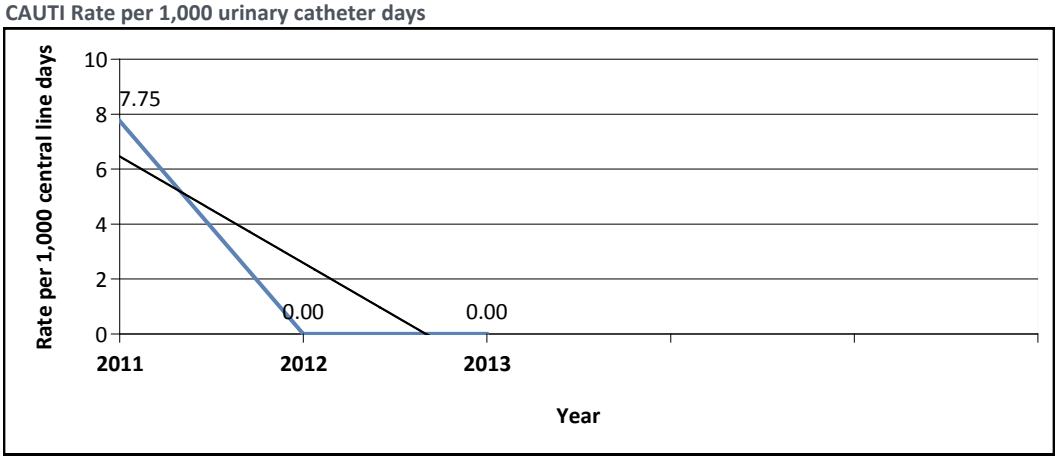
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008												
2009												
2010												
2011	3,302	0	0	0	0	0	0	17	0	3	0	6.06
2012	3,888	0	0	2	0	2	0	29	0	1	0	8.74
2013	3,919	0	0	0	0	0	0	9	0	0	0	2.30

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
2013	0	0.72	0.00	0 - 5.07	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 (2013): 60

Number of reported Healthcare-Associated Infections:

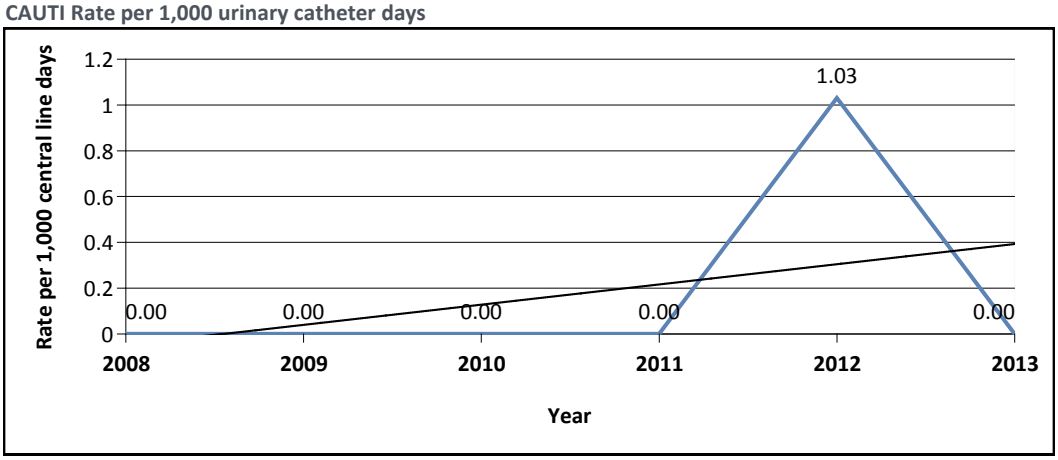
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	6,037	0	0	1	0	0	0	0	0	0	0	0.17
2009	10,700	0	0	0	0	0	0	4	0	0	0	0.37
2010	11,028	0	0	1	0	1	0	4	0	0	0	0.54
2011	11,229	0	0	1	0	5	0	0	1	0	0	0.62
2012	11,321	0	0	1	0	2	0	3	0	2	0	0.71
2013	11,211	0	0	1	0	2	0	4	0	2	0	0.80

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
2013	0	1.40	0.00	0 - 2.63	Same as

CAUTI Rate per 1,000 urinary catheter days



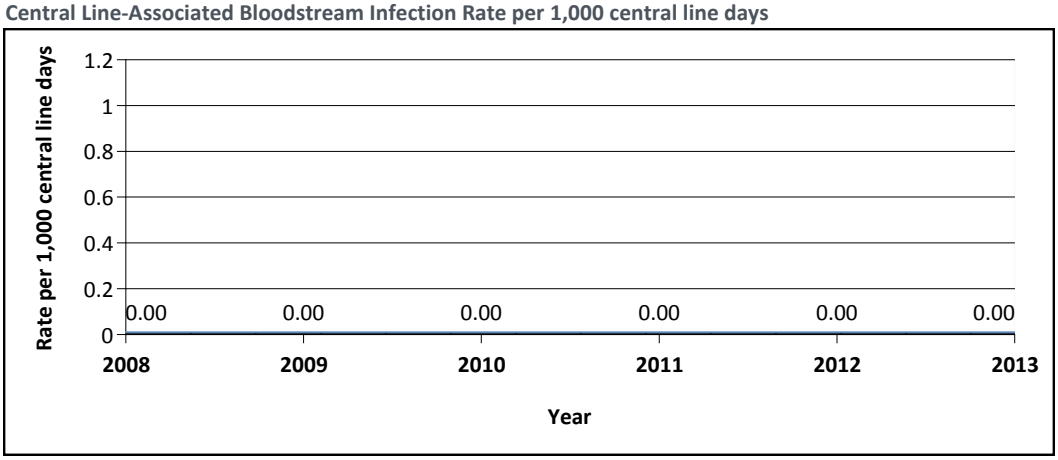
PALMERTON HOSPITAL

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
2013	0	0.21	0.00	0 - 17.27	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 (2013): 305

Number of reported Healthcare-Associated Infections:

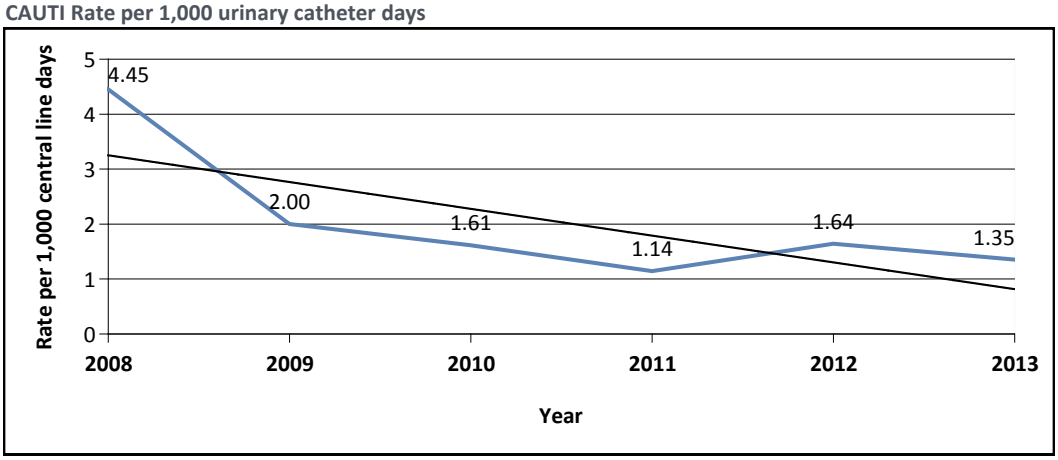
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	31,657	20	0	21	3	7	0	21	0	24	0	3.03
2009	84,751	26	0	29	12	14	0	44	3	43	0	2.02
2010	64,014	20	0	14	10	7	0	44	1	41	0	2.14
2011	65,272	33	1	20	20	10	0	59	4	33	0	2.76
2012	62,055	27	0	13	21	12	0	66	5	40	0	2.97
2013	60,943	37	4	17	14	12	0	55	4	44	1	3.08

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
2013	15	23.15	0.65	0.36 - 1.07	Same as

CAUTI Rate per 1,000 urinary catheter days



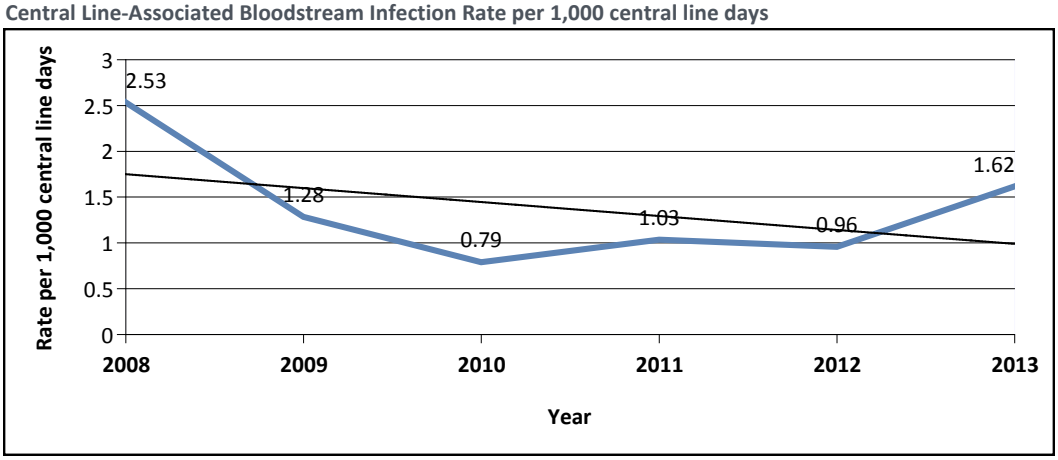
PENN PRESBYTERIAN MEDICAL CENTER

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
2013	18	8.99	2.00	1.19 - 3.16	Worse

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 (2013): 54

Number of reported Healthcare-Associated Infections:

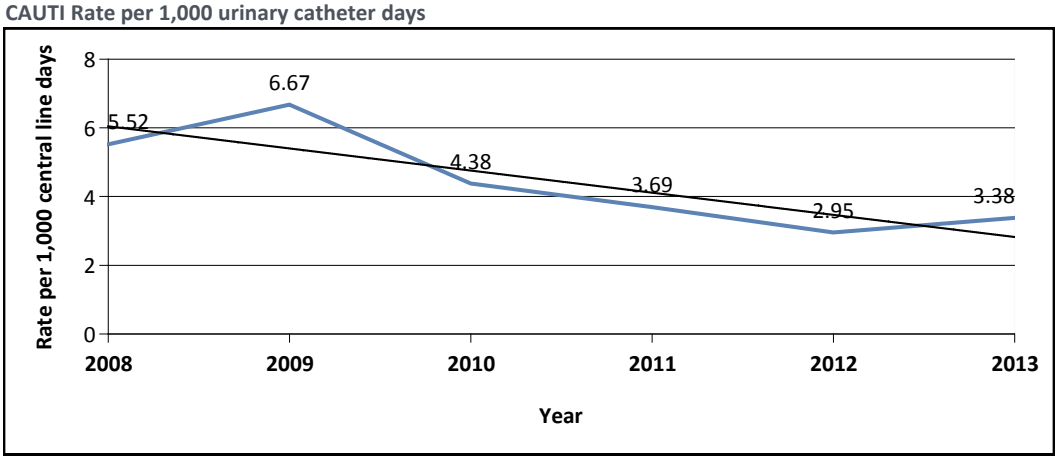
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,667	0	0	3	0	1	0	0	0	8	0	3.27
2009	7,479	0	0	6	0	0	1	0	0	8	0	2.01
2010	9,804	0	0	4	0	0	0	0	0	8	0	1.22
2011	14,130	2	0	5	0	0	0	0	1	26	0	2.41
2012	15,851	1	1	5	1	0	0	0	2	38	0	3.03
2013	17,246	1	0	3	1	0	0	0	0	30	0	2.03

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
2013	3	1.31	2.29	0.46 - 6.68	Same as

CAUTI Rate per 1,000 urinary catheter days



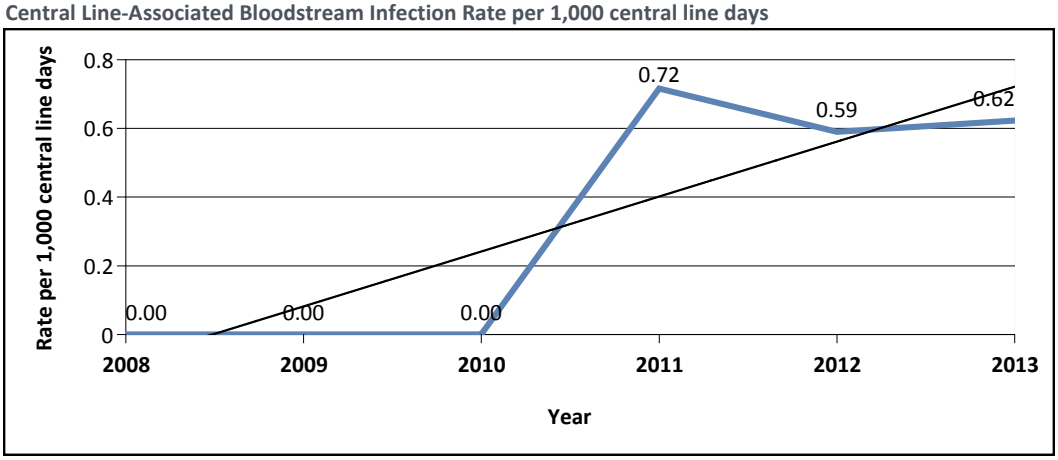
PENN STATE HERSHEY REHABILITATION LLC

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
2013	1	1.08	0.92	0.01 - 5.15	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 (2013): 496

Number of reported Healthcare-Associated Infections:

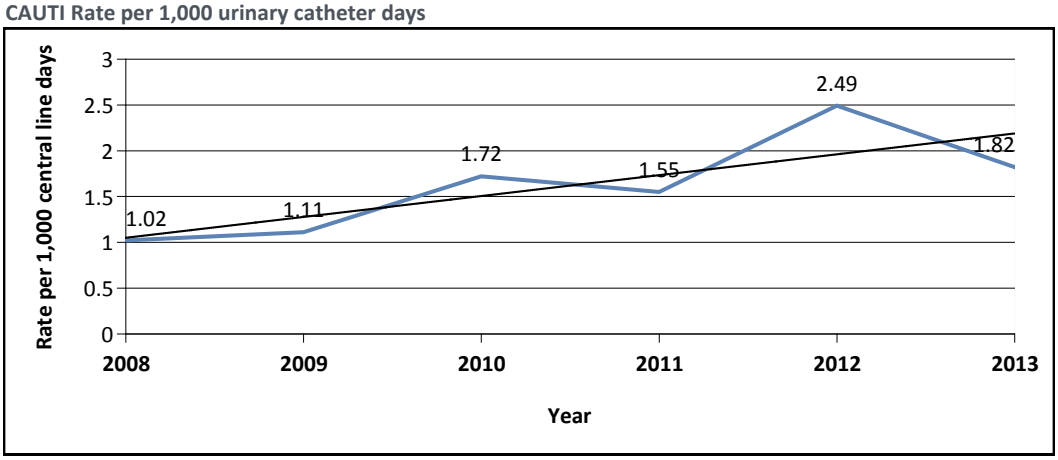
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	55,294	23	8	49	3	14	3	87	4	15	5	3.82
2009	136,501	44	16	77	11	17	11	177	5	49	1	2.99
2010	112,059	62	22	50	19	34	11	180	8	53	1	3.93
2011	129,191	42	12	73	14	20	9	161	21	59	2	3.20
2012	104,403	47	16	54	9	26	13	149	12	60	1	3.71
2013	97,602	38	16	43	12	13	3	125	7	65	3	3.33

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
2013	25	28.55	0.88	0.57 - 1.29	Same as

CAUTI Rate per 1,000 urinary catheter days



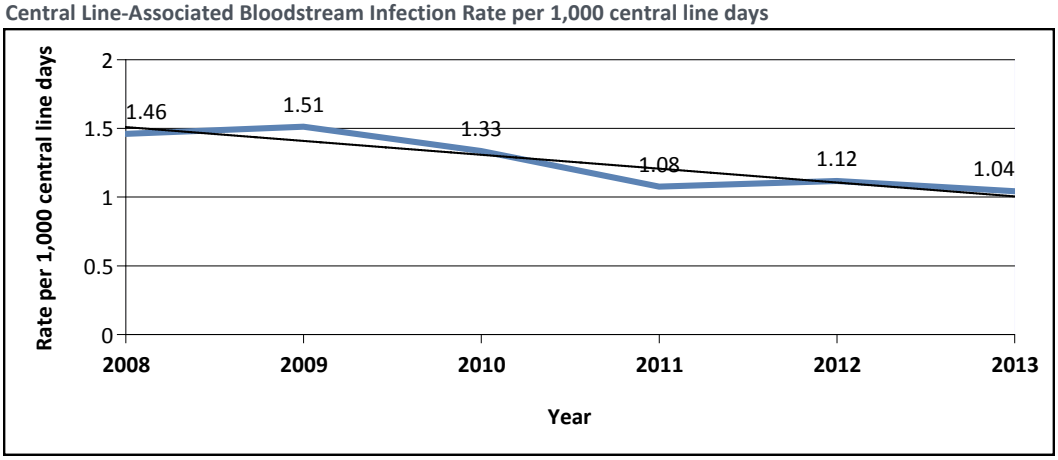
PENNSYLVANIA HOSP OF THE UNIV OF PA HEALTH SYS

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
2013	14	10.85	1.29	0.7 - 2.16	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
2013	4	2.11	1.90	0.51 - 4.85	Same as

PENNSYLVANIA PSYCHIATRIC INSTITUTE

NHSN ID: 14190

Hospital type: Psychiatric hospital

Number of licensed beds (2013): 80

Number of reported Healthcare-Associated Infections:

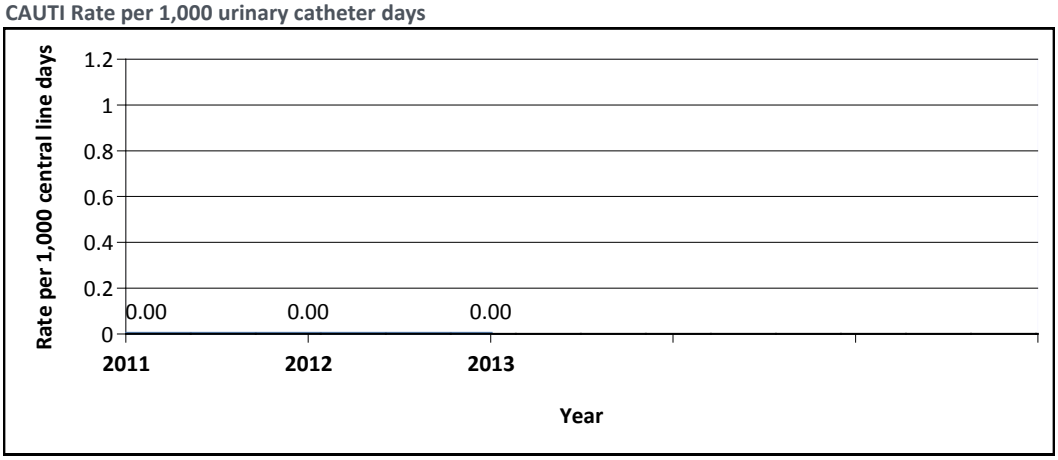
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008												
2009	19,602	0	4	0	0	0	0	0	0	2	0	0.31
2010	19,437	0	0	0	0	1	0	0	0	1	0	0.10
2011	20,269	0	1	0	0	1	0	0	0	1	0	0.15
2012	19,892	0	4	0	0	0	0	0	2	0	0	0.30
2013	20,998	0	5	1	0	0	1	0	4	2	0	0.62

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
2013	0	0.01	0.00	0 - 249.42	Same as

CAUTI Rate per 1,000 urinary catheter days



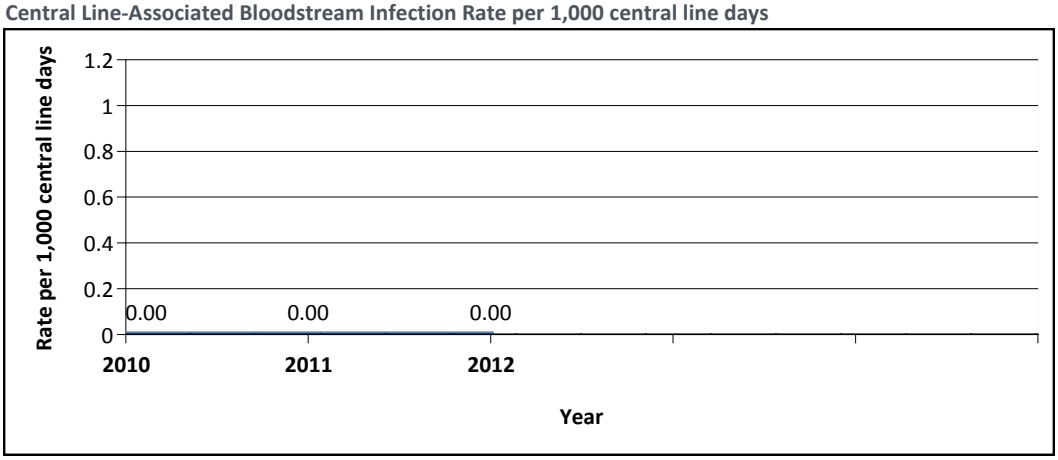
PENNSYLVANIA PSYCHIATRIC INSTITUTE

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
2013				-	

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 (2013): 103

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
2013	32,171	0	14	0	0	0	0	0	2	12	0	0.87

PHOENIXVILLE HOSPITAL COMPANY LLC

NHSN ID: 11836

Hospital type: Acute care general hospital

Number of licensed beds (2013): 151

Number of reported Healthcare-Associated Infections:

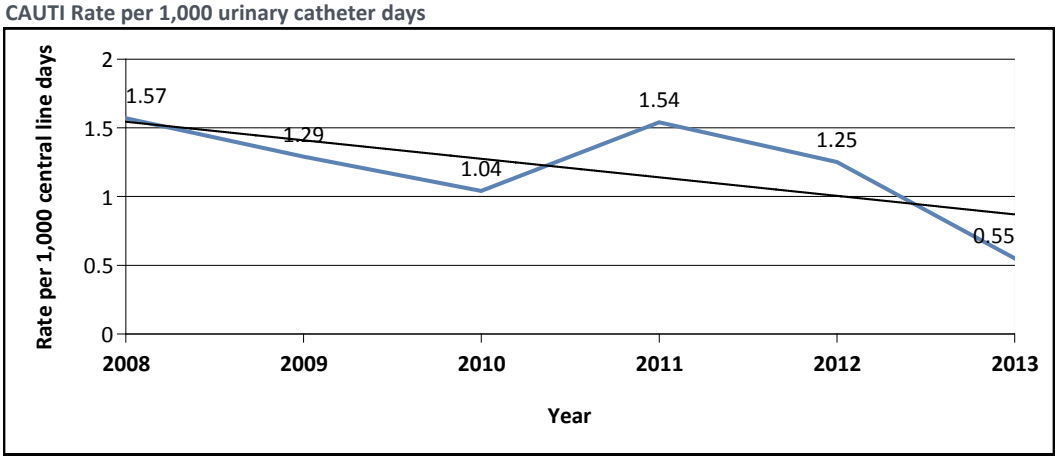
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	17,095	2	2	4	0	16	1	11	1	8	1	2.69
2009	35,921	8	0	10	0	21	1	23	1	15	0	2.20
2010	34,362	3	2	6	0	28	1	27	0	10	1	2.27
2011	34,445	3	0	11	0	12	0	24	2	11	1	1.86
2012	33,584	3	0	5	1	9	0	26	0	8	0	1.55
2013	32,971	9	1	15	0	6	0	19	0	5	0	1.67

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
2013	3	8.30	0.36	0.07 - 1.06	Same as

CAUTI Rate per 1,000 urinary catheter days



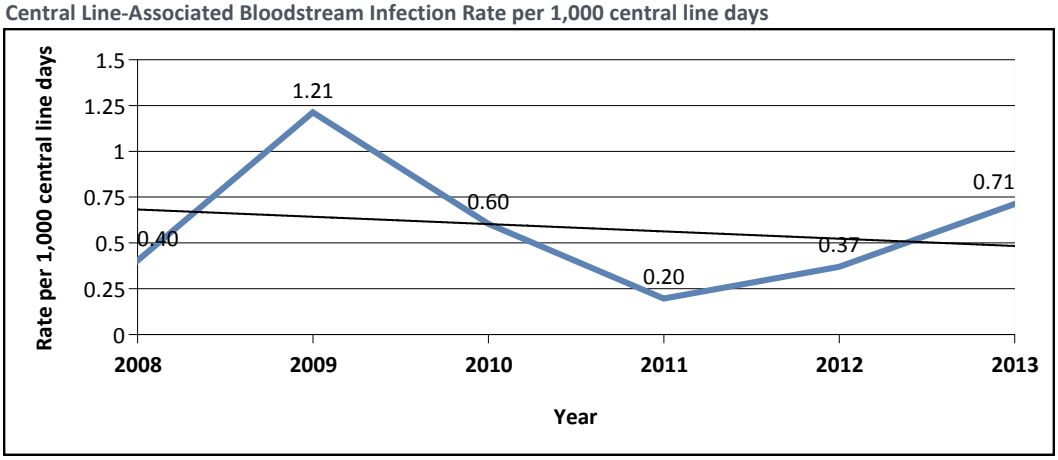
PHOENIXVILLE HOSPITAL COMPANY LLC

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
2013	4	3.78	1.06	0.28 - 2.71	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 (2013): 12

Number of reported Healthcare-Associated Infections:

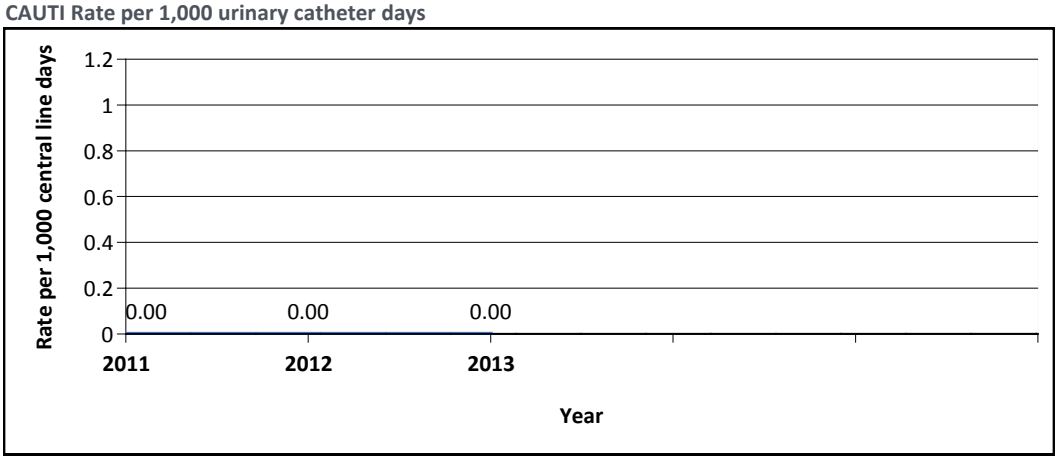
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008												
2009												
2010												
2011	215	0	0	0	0	0	0	0	0	0	0	0.00
2012	381	0	0	0	0	0	0	0	0	0	0	0.00
2013	1,036	0	0	0	0	0	0	1	0	0	0	0.97

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
2013	0	0.68	0.00	0 - 5.39	Same as

CAUTI Rate per 1,000 urinary catheter days



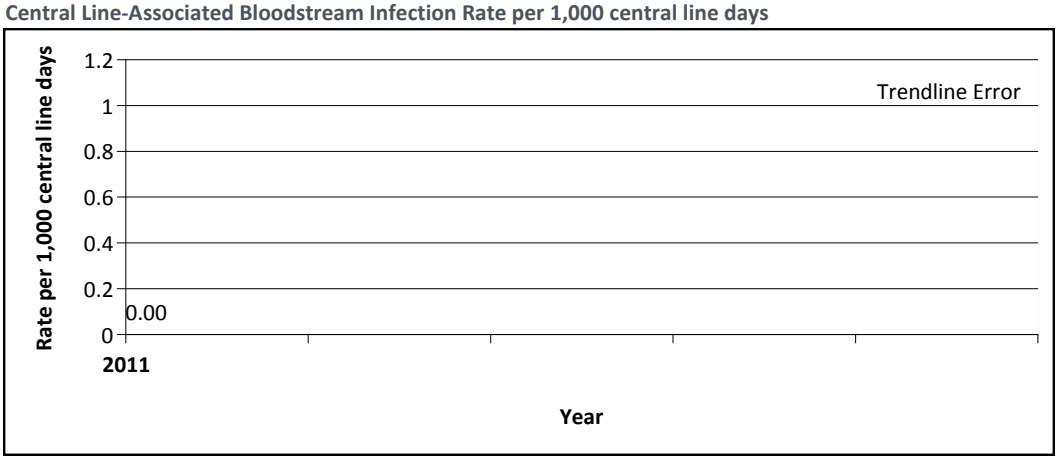
PHYSICIANS CARE SURGICAL HOSPITAL

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				-	
2013				-	

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 (2013): 631

Number of reported Healthcare-Associated Infections:

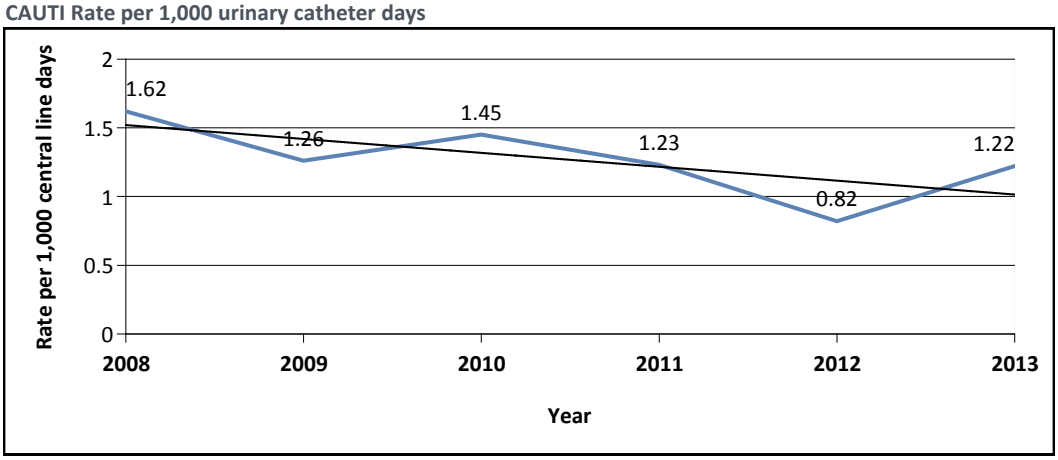
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	70,926	21	3	43	1	20	2	89	10	48	6	3.43
2009	155,441	17	5	75	1	25	2	210	16	93	8	2.91
2010	144,537	17	5	54	0	16	0	189	7	95	11	2.73
2011	149,719	25	5	54	0	22	1	173	18	93	10	2.68
2012	156,563	24	9	78	1	20	0	154	7	73	11	2.41
2013	157,969	37	8	97	4	12	3	151	25	91	9	2.77

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
2013	43	74.13	0.58	0.42 - 0.78	Better

CAUTI Rate per 1,000 urinary catheter days



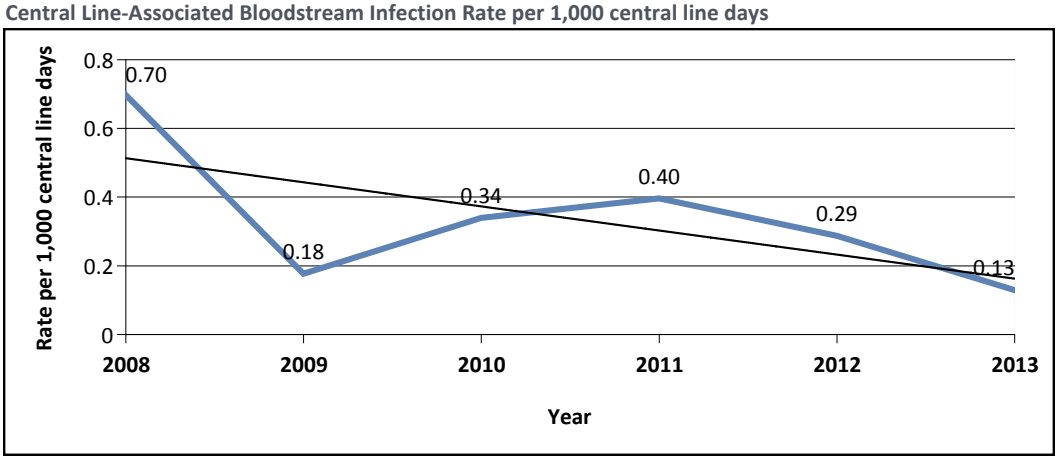
PINNACLE HEALTH HOSPITALS

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
2013	4	25.05	0.16	0.04 - 0.41	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
2013	2	1.85	1.08	0.12 - 3.9	Same as

POCONO MEDICAL CENTER

NHSN ID: 11772

Hospital type: Acute care general hospital

Number of licensed beds (2013): 235

Number of reported Healthcare-Associated Infections:

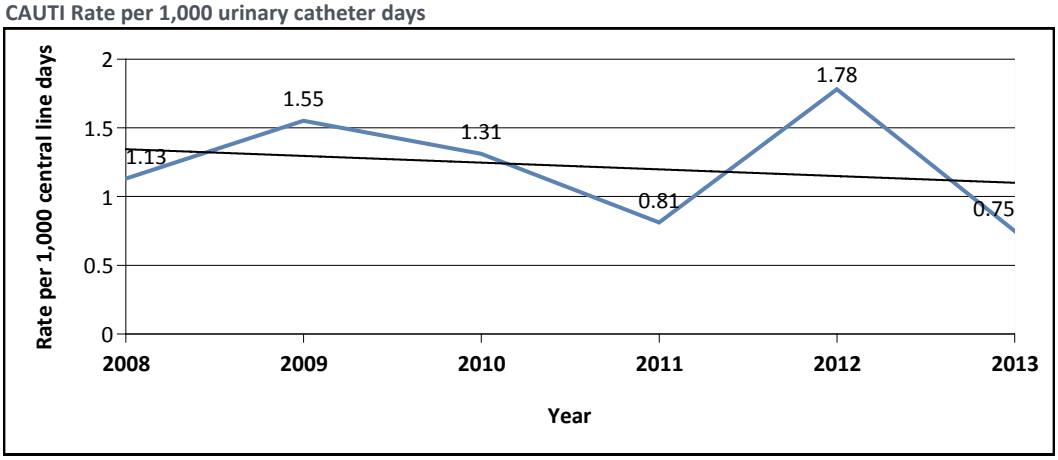
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	28,900	6	0	11	0	14	1	34	3	7	0	2.63
2009	54,252	6	0	17	0	18	0	33	1	19	0	1.73
2010	51,833	3	0	8	0	18	0	41	4	13	0	1.68
2011	56,600	8	0	10	0	9	0	43	4	7	0	1.43
2012	55,157	8	0	7	0	8	0	14	3	14	0	0.98
2013	53,633	10	0	10	0	4	0	22	1	16	2	1.21

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
2013	9	18.31	0.49	0.22 - 0.93	Better

CAUTI Rate per 1,000 urinary catheter days



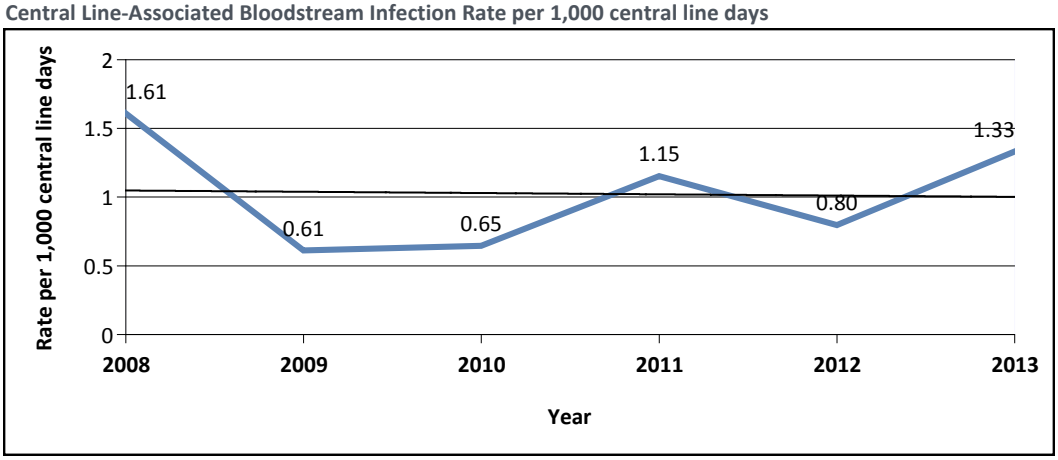
POCONO MEDICAL CENTER

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
2013	8	4.04	1.98	0.85 - 3.9	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
2013	0	0.18	0.00	0 - 20.3	Same as

POTTSTOWN MEMORIAL MEDICAL CENTER

NHSN ID: 11983

Hospital type: Acute care general hospital

Number of licensed beds (2013): 224

Number of reported Healthcare-Associated Infections:

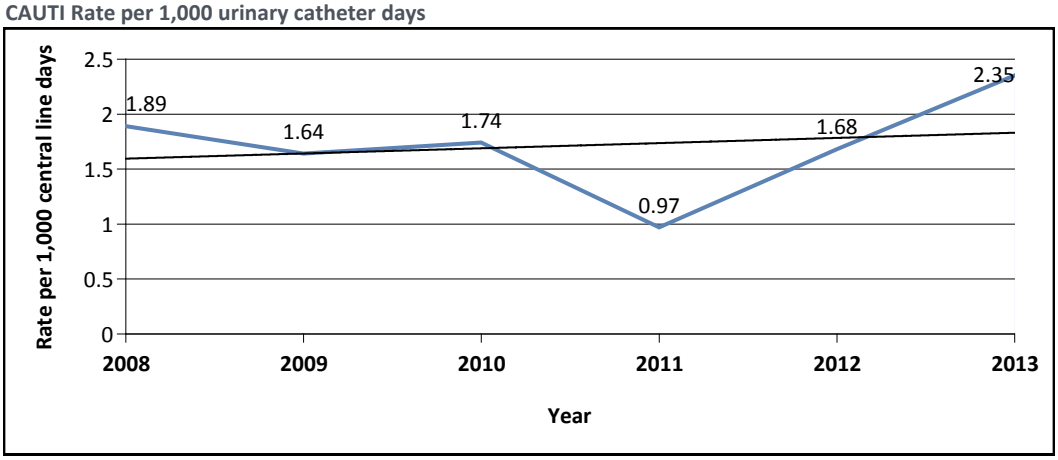
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	20,772	2	0	4	0	18	1	13	0	9	0	2.26
2009	44,071	2	0	4	0	19	1	27	1	18	0	1.63
2010	43,283	1	0	9	0	18	1	20	0	17	0	1.52
2011	43,413	2	0	5	0	4	0	11	1	10	0	0.76
2012	42,914	8	0	3	0	19	0	18	2	13	1	1.49
2013	42,128	5	0	7	1	22	0	17	2	26	1	1.92

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
2013	23	14.96	1.54	0.97 - 2.31	Same as

CAUTI Rate per 1,000 urinary catheter days



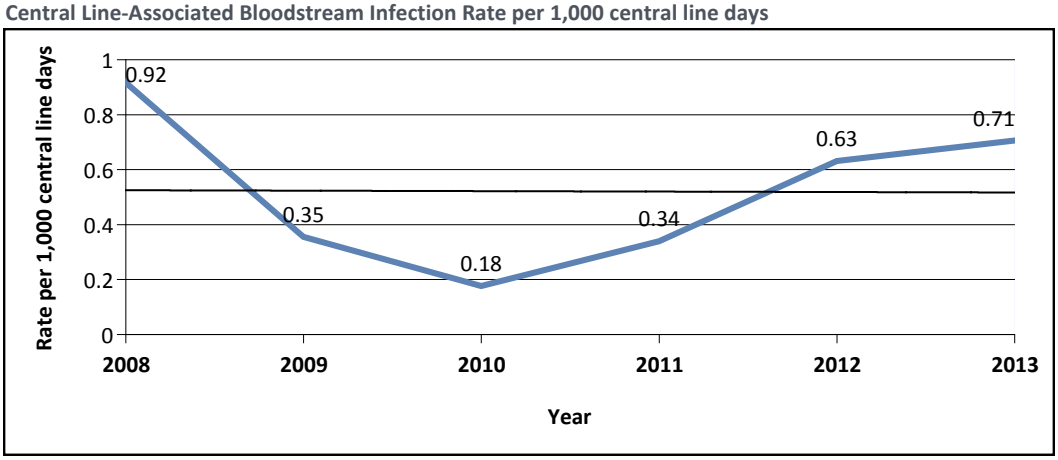
POTTSTOWN MEMORIAL MEDICAL CENTER

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
2013	4	3.81	1.05	0.28 - 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 (2013): 49

Number of reported Healthcare-Associated Infections:

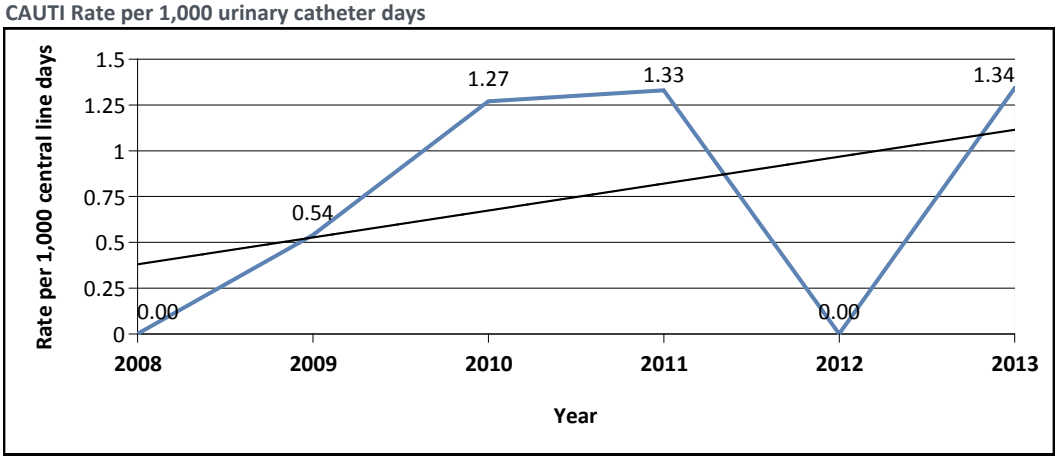
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,825	0	0	2	2	1	0	1	0	0	0	1.57
2009	8,923	0	0	2	0	2	0	7	0	2	0	1.46
2010	7,440	0	0	4	0	1	1	8	0	2	0	2.15
2011	7,380	0	0	5	0	1	0	13	1	3	1	3.25
2012	7,111	1	0	4	0	2	0	6	0	0	0	1.83
2013	7,683	0	1	3	0	1	0	6	0	4	0	1.95

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
2013	2	2.28	0.88	0.1 - 3.16	Same as

CAUTI Rate per 1,000 urinary catheter days



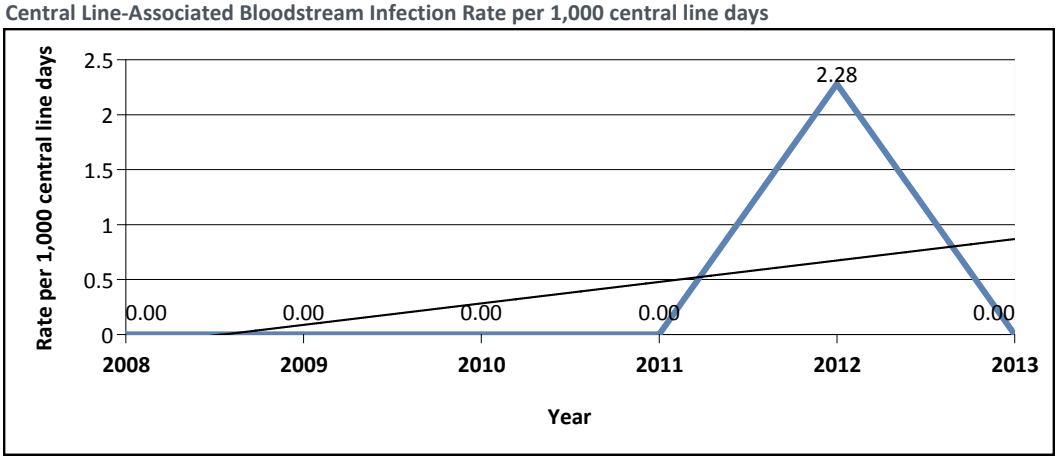
PUNXSUTAWNEY AREA HOSPITAL

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
2013	0	0.23	0.00	0 - 16.06	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 (2013): 735

Number of reported Healthcare-Associated Infections:

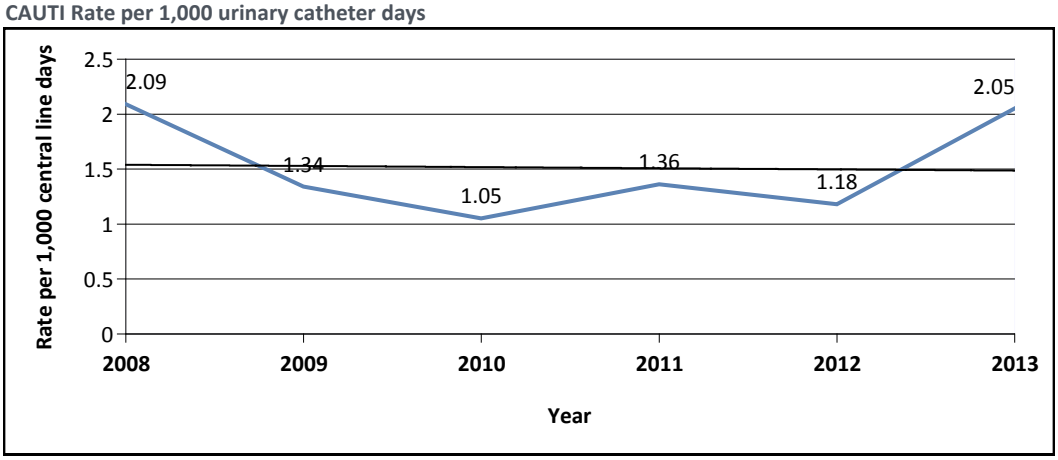
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	75,622	25	2	34	0	6	0	61	7	47	1	2.42
2009	155,742	40	6	75	1	19	1	111	16	67	1	2.16
2010	149,322	41	9	44	3	14	0	84	21	58	4	1.86
2011	158,238	36	2	63	10	21	2	110	24	85	3	2.25
2012	165,967	47	1	48	12	12	2	136	24	69	13	2.19
2013	167,901	47	3	68	9	21	1	132	23	96	6	2.42

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
2013	45	45.52	0.99	0.72 - 1.32	Same as

CAUTI Rate per 1,000 urinary catheter days



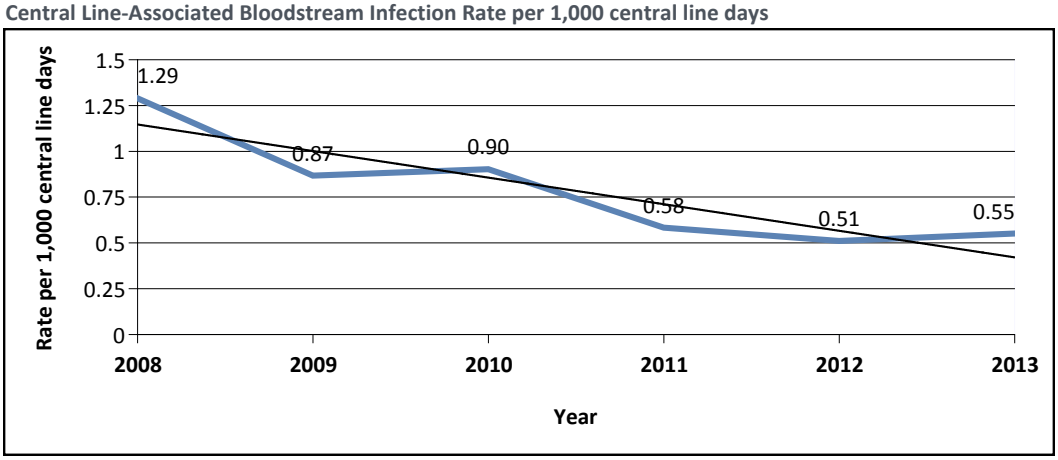
READING HOSPITAL AND MEDICAL CENTER

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
2013	14	20.56	0.68	0.37 - 1.14	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
2013	1	1.31	0.76	0.01 - 4.24	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
2013	1	3.62	0.28	0 - 1.54	Same as

REGIONAL HOSPITAL OF SCRANTON

NHSN ID: 12533

Hospital type: Acute care general hospital

Number of licensed beds (2013): 198

Number of reported Healthcare-Associated Infections:

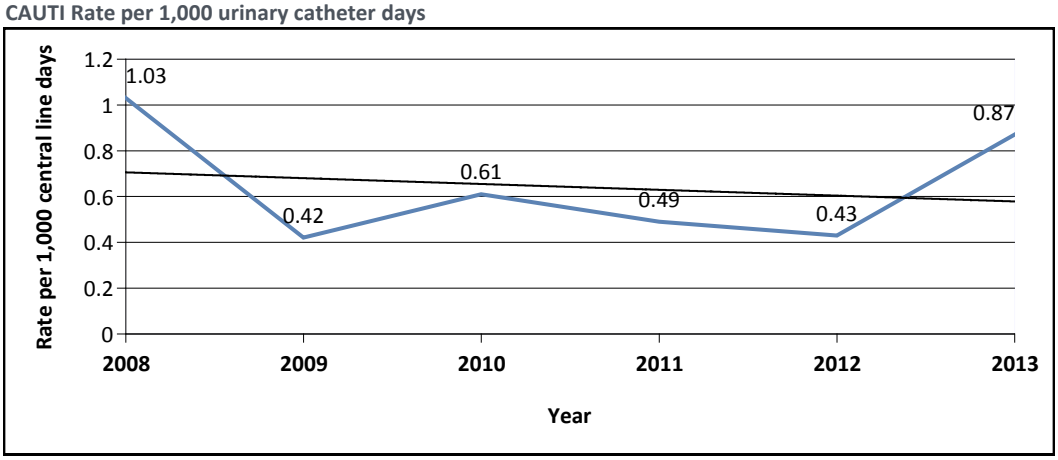
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	22,669	10	0	0	0	5	0	6	0	6	0	1.19
2009	46,078	4	0	3	0	7	0	20	0	5	0	0.85
2010	44,463	7	0	5	0	8	0	14	3	10	0	1.06
2011	43,923	10	0	8	0	6	0	13	0	8	0	1.02
2012	49,636	2	0	2	0	5	0	12	0	6	0	0.54
2013	45,651	7	0	19	0	0	0	5	1	12	0	0.96

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
2013	12	29.27	0.41	0.21 - 0.72	Better

CAUTI Rate per 1,000 urinary catheter days



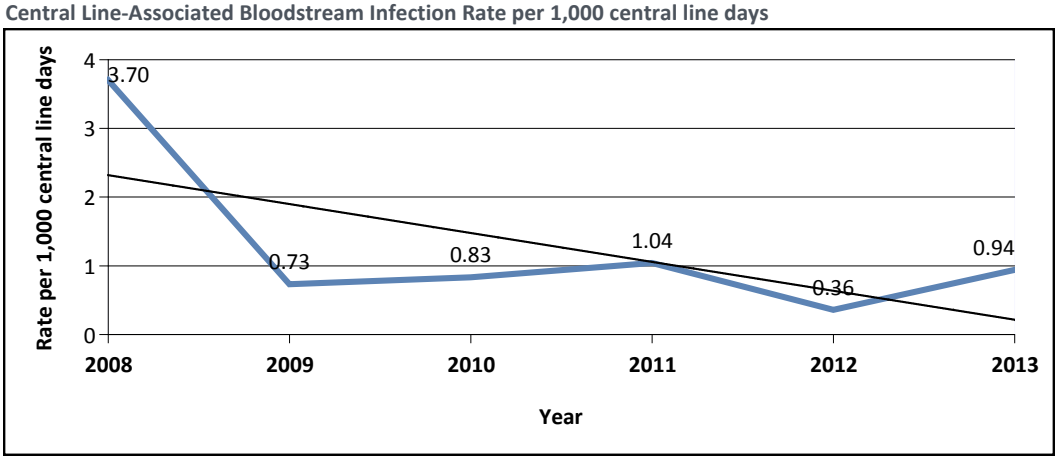
REGIONAL HOSPITAL OF SCRANTON

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
2013	5	4.31	1.16	0.37 - 2.71	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 (2013): 204

Number of reported Healthcare-Associated Infections:

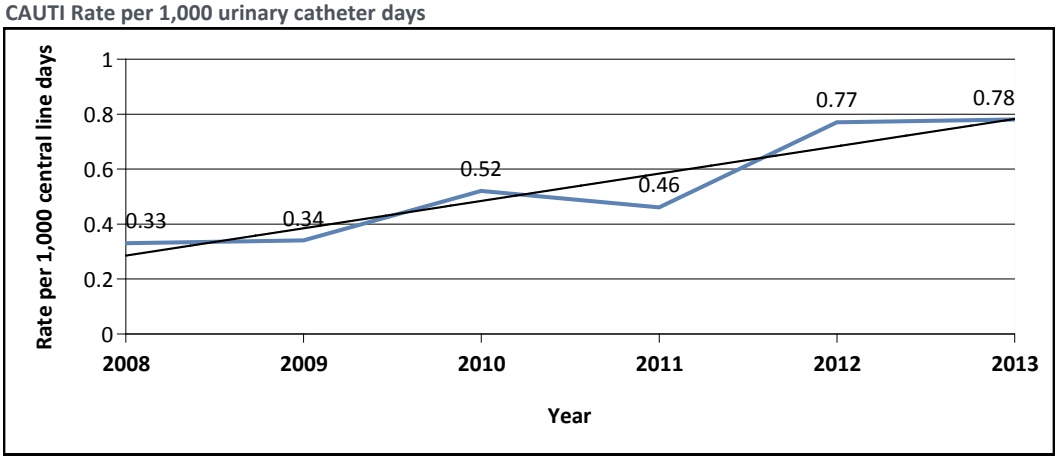
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	24,194	5	0	9	2	3	0	8	0	5	0	1.32
2009	48,102	19	1	12	0	4	0	46	4	10	0	2.00
2010	49,708	7	0	5	0	6	0	29	1	15	1	1.29
2011	49,126	4	3	0	0	5	0	15	0	12	0	0.79
2012	47,311	6	0	6	0	5	0	19	0	16	0	1.10
2013	44,830	9	0	14	0	1	0	13	2	23	0	1.38

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
2013	12	23.72	0.51	0.26 - 0.88	Better

CAUTI Rate per 1,000 urinary catheter days



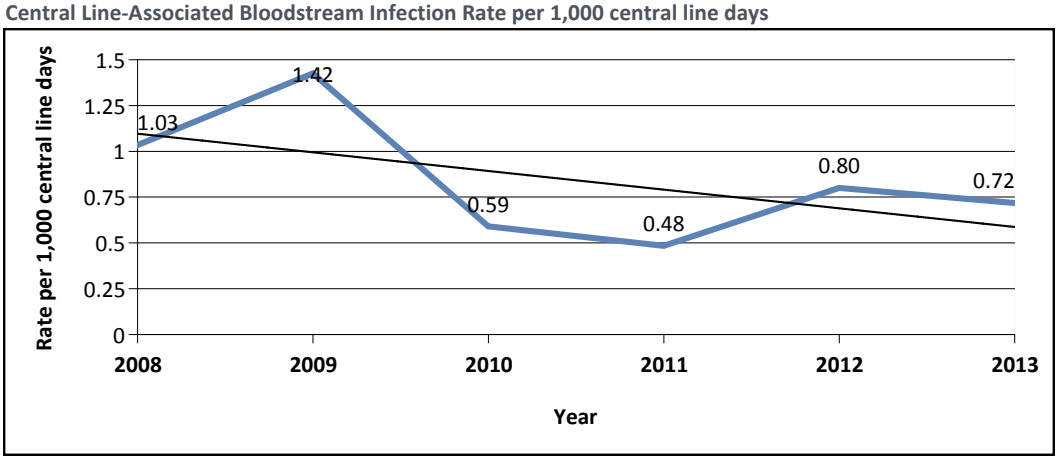
RIDDLE MEMORIAL HOSPITAL

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
2013	5	4.69	1.07	0.34 - 2.49	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 (2013): 254

Number of reported Healthcare-Associated Infections:

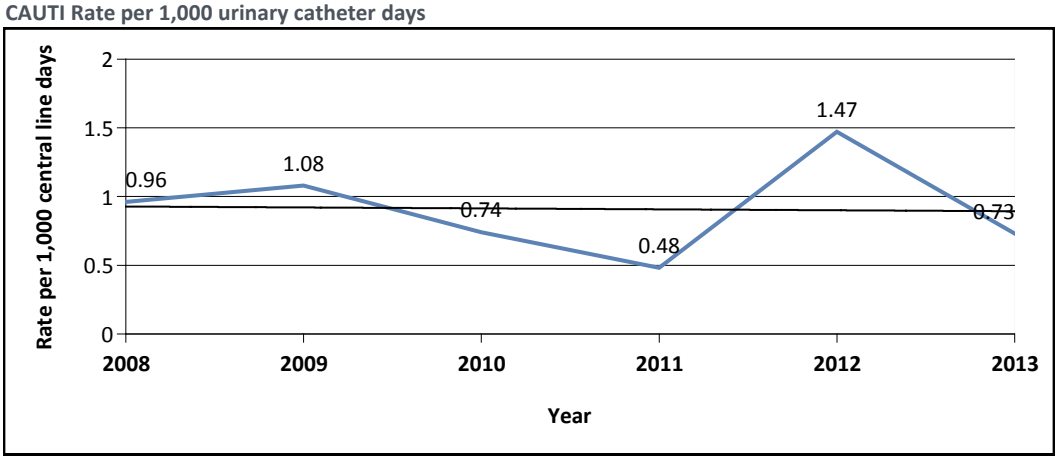
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	24,891	13	0	6	1	4	0	11	1	11	0	1.89
2009	55,742	15	0	27	2	14	0	22	1	16	0	1.74
2010	61,472	21	0	16	3	7	0	16	3	11	1	1.27
2011	63,820	31	0	0	6	21	0	32	3	20	0	1.77
2012	67,861	31	0	3	9	37	0	37	5	37	1	2.36
2013	64,255	21	1	61	13	10	0	26	0	15	1	2.30

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
2013	9	25.93	0.35	0.16 - 0.66	Better

CAUTI Rate per 1,000 urinary catheter days



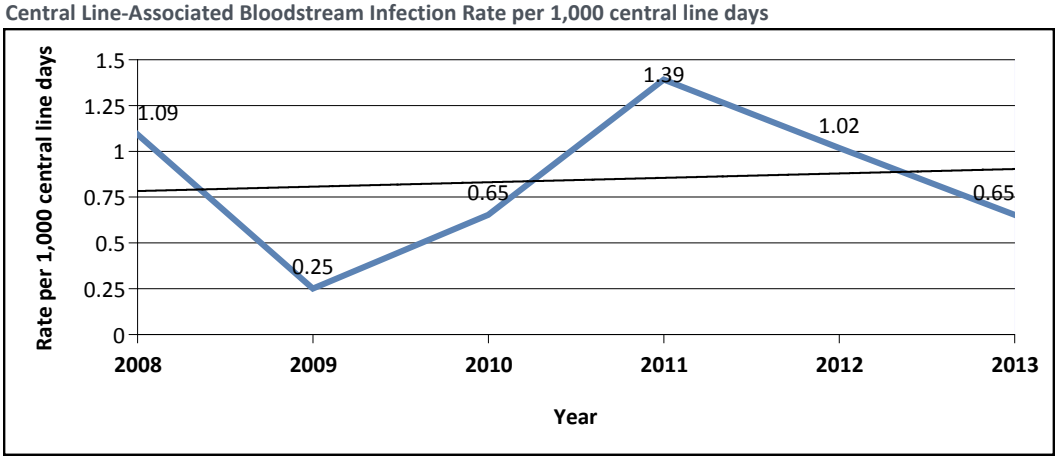
ROBERT PACKER HOSPITAL

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
2013	6	7.43	0.81	0.29 - 1.76	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
2013	4	2.89	1.38	0.37 - 3.54	Same as

ROXBOROUGH MEMORIAL HOSPITAL

NHSN ID: 11978

Hospital type: Acute care general hospital

Number of licensed beds (2013): 141

Number of reported Healthcare-Associated Infections:

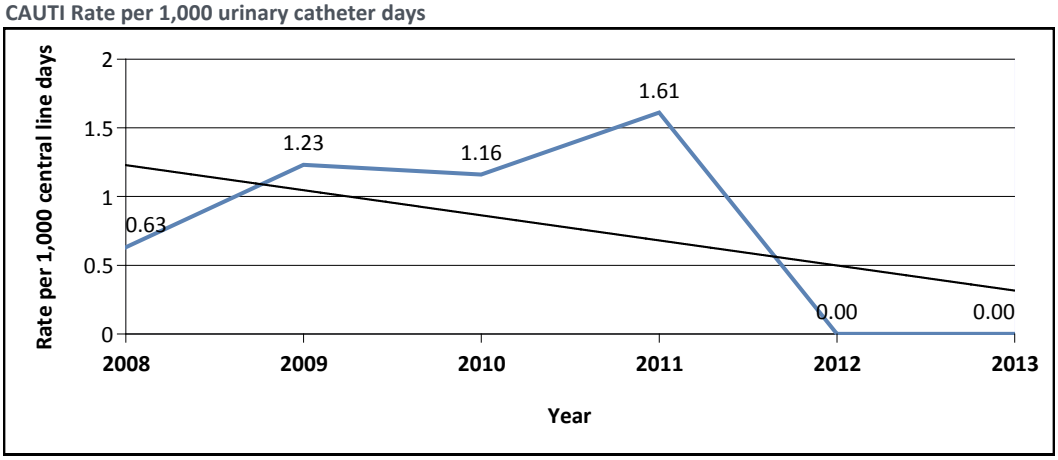
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	16,168	8	1	7	0	2	0	2	1	5	1	1.67
2009	31,146	8	0	9	0	5	0	4	0	10	0	1.16
2010	30,472	12	0	11	1	11	0	5	3	15	0	1.90
2011	29,113	13	0	5	0	3	0	3	1	11	0	1.24
2012	25,179	0	0	1	1	0	0	1	0	0	0	0.12
2013	23,849	1	1	0	0	0	0	0	0	0	0	0.08

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
2013	0	8.13	0.00	0 - 0.45	Better

CAUTI Rate per 1,000 urinary catheter days



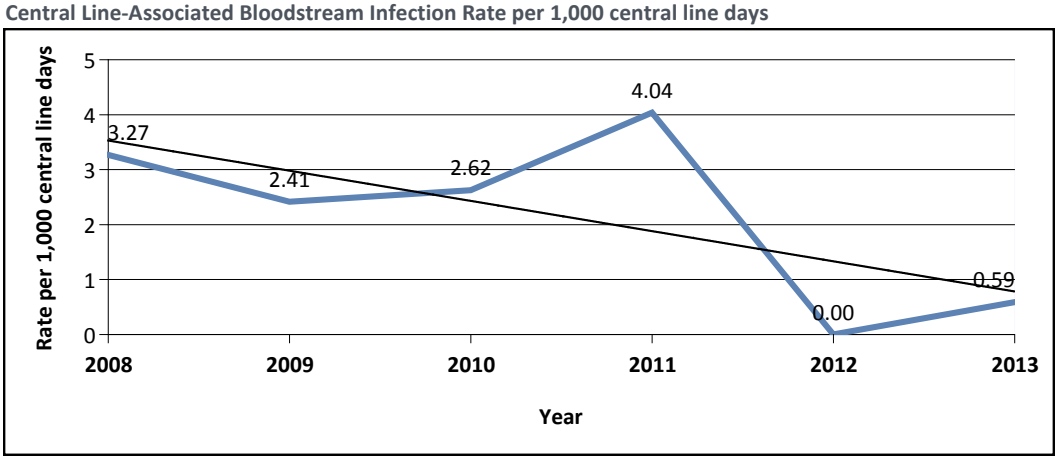
ROXBOROUGH MEMORIAL HOSPITAL

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
2013	1	1.38	0.73	0.01 - 4.04	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 (2013): 52

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
2013	14,498	0	7	0	0	1	3	0	1	1	0	0.90

SACRED HEART HOSPITAL

NHSN ID: 11684

Hospital type: Acute care general hospital

Number of licensed beds (2013): 215

Number of reported Healthcare-Associated Infections:

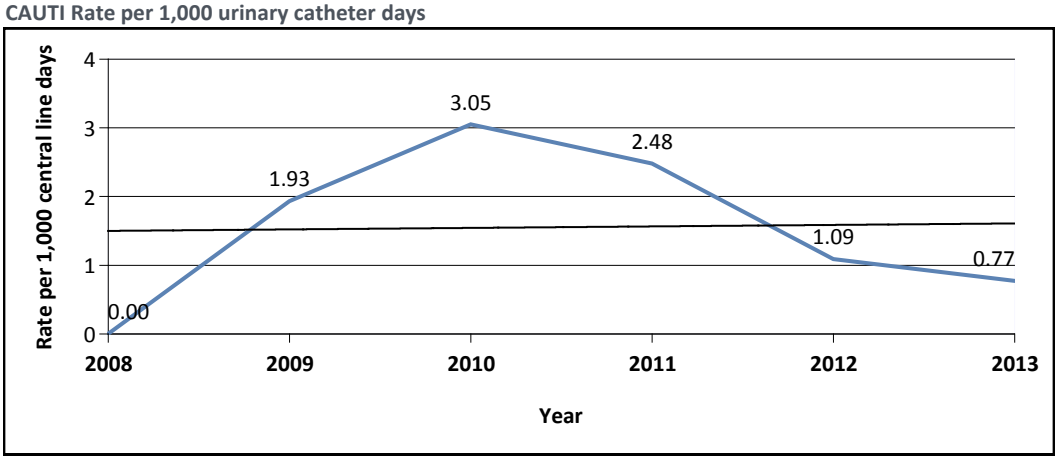
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	16,815	0	0	5	0	4	0	5	1	2	0	1.01
2009	30,405	5	1	4	1	3	0	10	0	9	0	1.09
2010	30,395	5	0	4	0	1	0	24	0	17	0	1.68
2011	33,338	4	1	8	0	1	0	25	2	10	0	1.53
2012	32,025	2	0	8	1	6	0	18	0	8	1	1.37
2013	30,343	2	0	10	2	5	0	13	2	7	0	1.35

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
2013	2	5.33	0.38	0.04 - 1.35	Same as

CAUTI Rate per 1,000 urinary catheter days



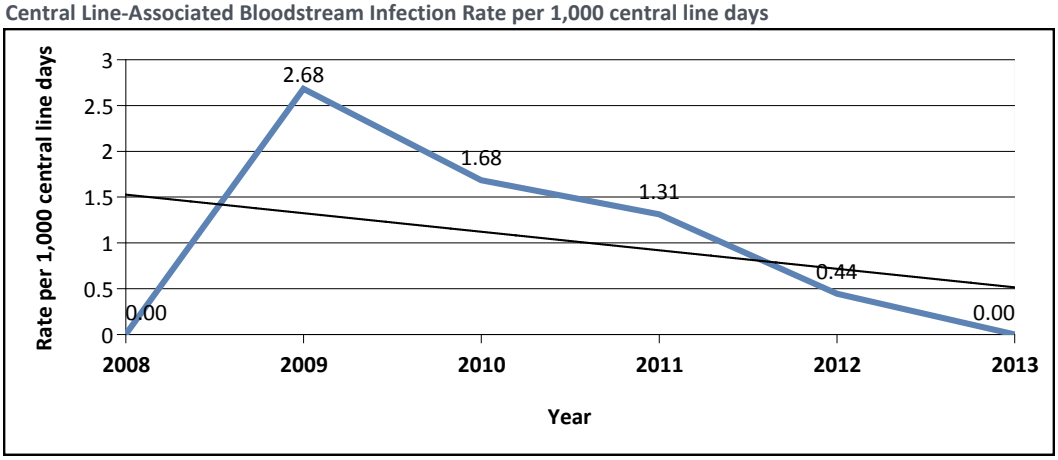
SACRED HEART HOSPITAL

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
2013	0	1.60	0.00	0 - 2.29	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
2013	0	0.00	0.00	0 - 1067.02	Same as

SCHUYLKILL MEDICAL CENTER --- EAST NORWEGIAN STREET

NHSN ID: 11922

Hospital type: Acute care general hospital

Number of licensed beds (2013): 126

Number of reported Healthcare-Associated Infections:

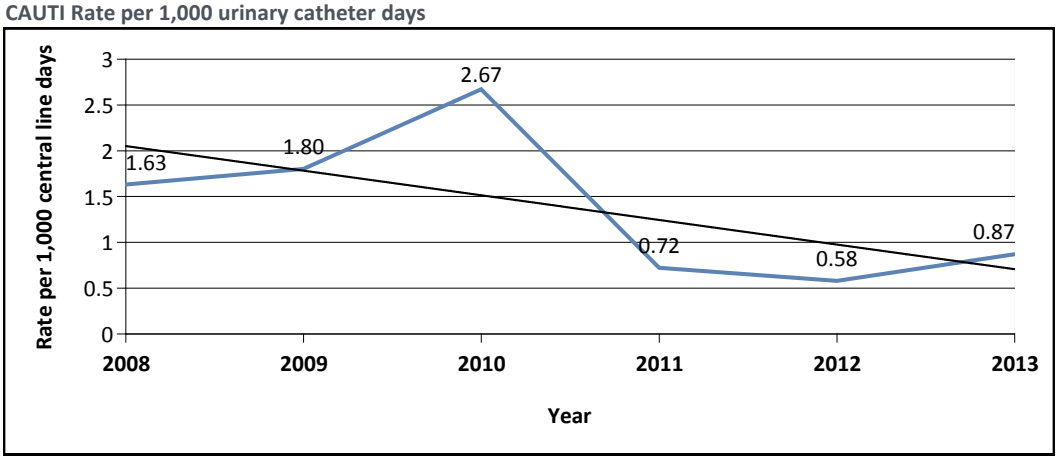
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	16,884	5	0	6	0	2	0	6	3	13	0	2.07
2009	32,693	10	0	22	0	3	0	28	3	16	0	2.51
2010	32,932	9	0	13	0	4	0	7	2	21	0	1.70
2011	30,491	4	0	8	1	4	0	9	0	5	0	1.02
2012	26,766	5	2	5	0	4	0	17	0	10	0	1.61
2013	26,682	5	1	9	0	2	0	14	4	9	0	1.65

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
2013	3	5.20	0.58	0.12 - 1.69	Same as

CAUTI Rate per 1,000 urinary catheter days



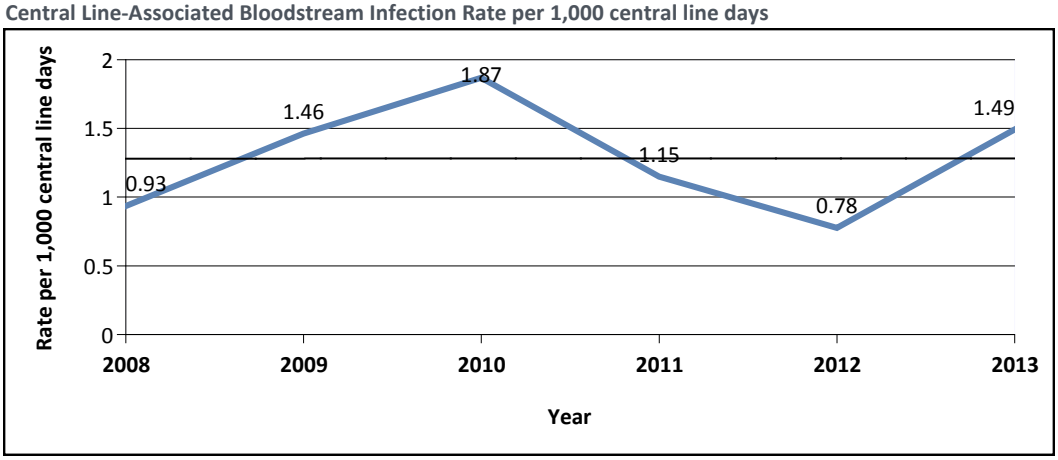
SCHUYLKILL MEDICAL CENTER --- EAST NORWEGIAN STREET

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
2013	3	1.35	2.22	0.45 - 6.47	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 (2013): 179

Number of reported Healthcare-Associated Infections:

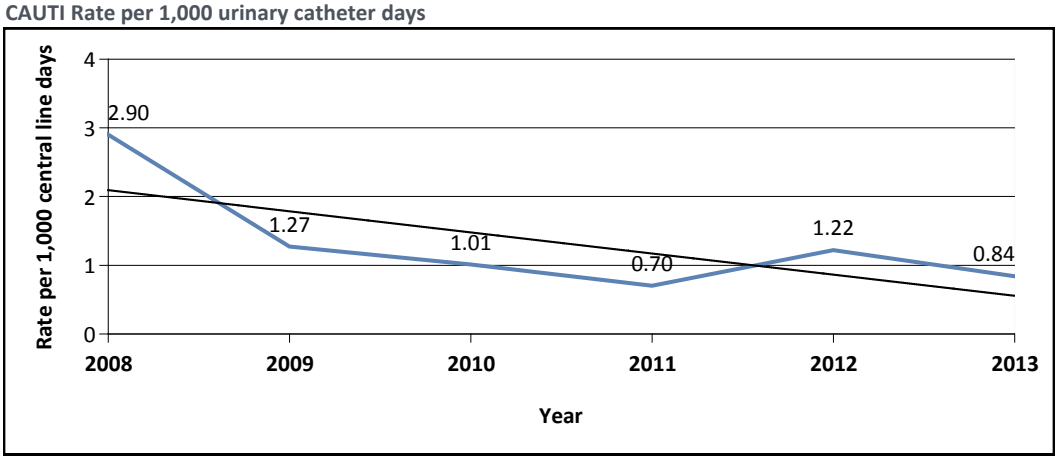
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	22,013	1	0	12	0	0	0	5	0	14	0	1.45
2009	42,927	3	1	17	0	4	0	15	1	15	0	1.30
2010	38,688	4	1	8	0	2	0	19	0	11	0	1.16
2011	37,078	3	0	1	0	7	0	15	3	4	0	0.89
2012	34,712	5	1	8	0	8	0	25	0	7	1	1.58
2013	34,761	4	2	3	0	6	0	14	2	7	0	1.09

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
2013	3	5.38	0.56	0.11 - 1.63	Same as

CAUTI Rate per 1,000 urinary catheter days



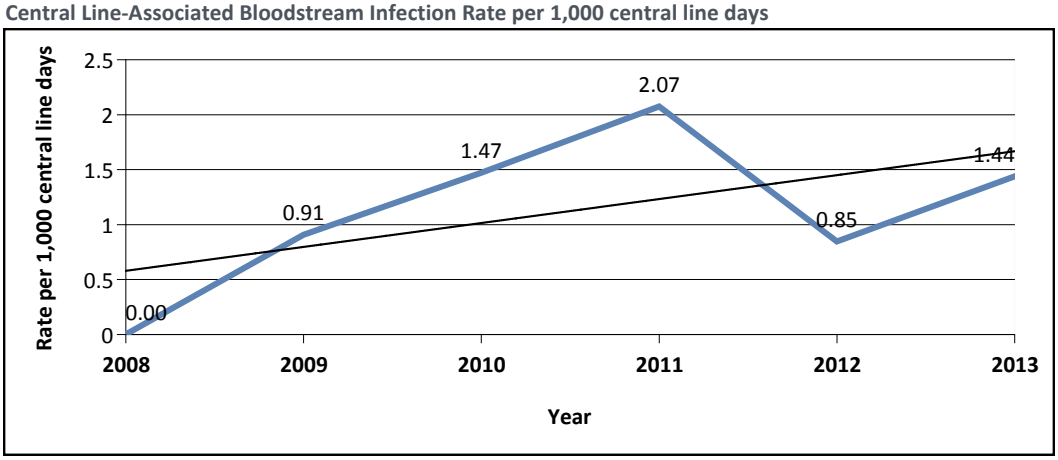
SCHUYLKILL MEDICAL CENTER --- SOUTH JACKSON STREET

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
2013	3	1.40	2.14	0.43 - 6.24	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 (2013): 23

Number of reported Healthcare-Associated Infections:

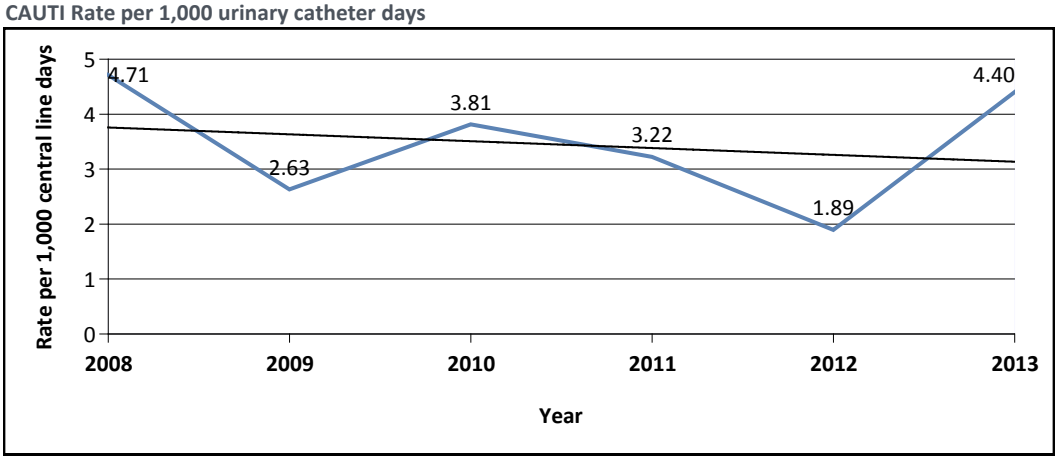
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	1,920	6	0	4	0	0	0	0	1	5	0	8.33
2009	5,929	4	0	11	0	0	0	0	1	10	0	4.39
2010	5,309	9	0	4	0	0	0	0	0	12	0	4.71
2011	5,387	1	0	9	0	0	0	0	0	11	0	3.90
2012	5,709	4	0	9	0	1	0	0	1	10	0	4.38
2013	6,041	11	0	5	0	2	0	0	0	13	0	5.13

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
2013	10	3.52	2.84	1.36 - 5.23	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 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
2013	8	4.46	1.79	0.77 - 3.53	Same as

SELECT SPECIALITY HOSPITAL --- ERIE

NHSN ID: 11880

Hospital type: Long-term acute care hospital

Number of licensed beds (2013): 50

Number of reported Healthcare-Associated Infections:

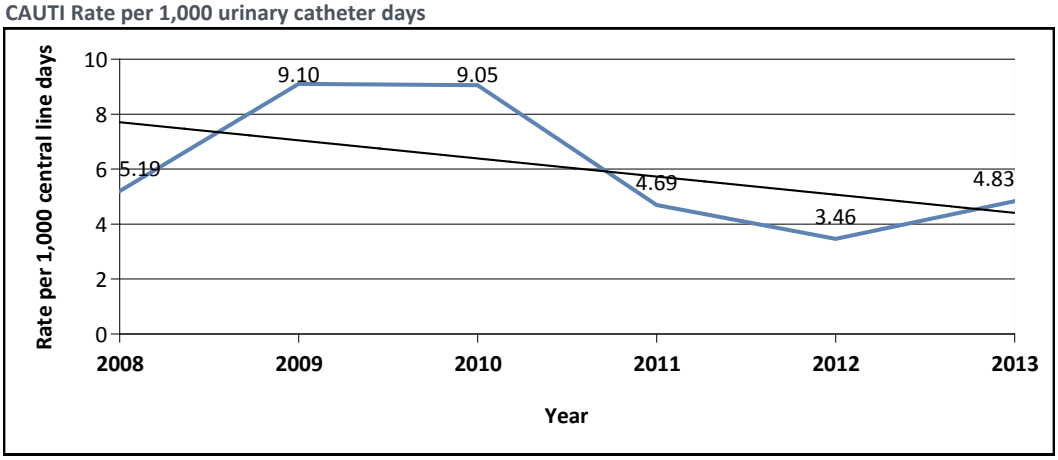
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	10,464	6	0	10	3	5	0	0	2	26	2	5.16
2009	10,362	13	0	18	3	7	0	0	5	47	1	9.07
2010	10,950	6	0	15	3	6	0	0	2	50	1	7.58
2011	10,883	5	4	16	5	12	0	0	3	42	1	8.09
2012	9,699	4	1	8	2	4	0	0	1	29	0	5.05
2013	7,822	6	0	8	2	2	0	0	1	33	0	6.65

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
2013	5	1.56	3.20	1.03 - 7.46	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 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
2013	4	3.74	1.07	0.29 - 2.74	Same as

SELECT SPECIALITY HOSPITAL --- JOHNSTOWN

NHSN ID: 12299

Hospital type: Long-term acute care hospital

Number of licensed beds (2013): 39

Number of reported Healthcare-Associated Infections:

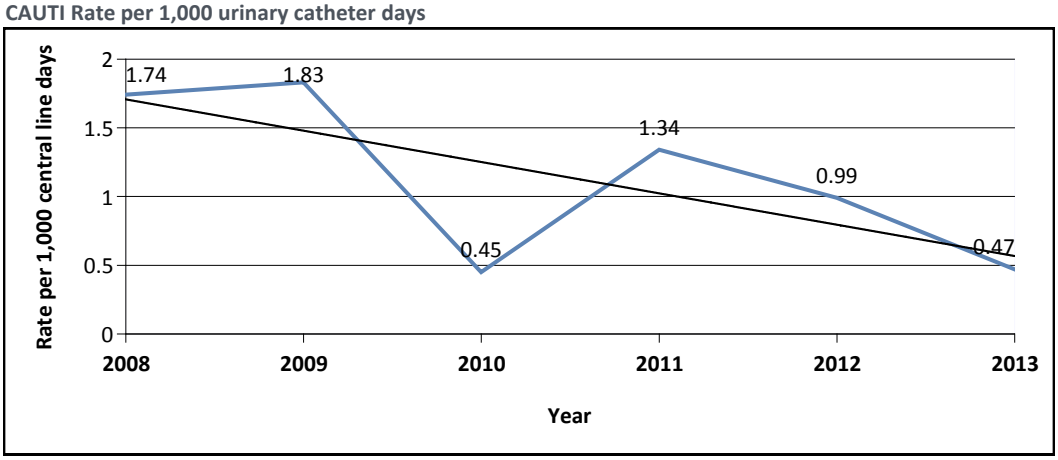
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,635	2	0	11	7	4	0	0	1	3	0	7.70
2009	8,677	5	0	17	4	11	0	0	1	12	1	5.88
2010	10,513	5	0	14	0	4	0	0	0	5	0	2.66
2011	10,110	6	0	0	0	2	0	0	2	9	0	1.88
2012	11,242	5	0	3	0	2	0	0	1	8	0	1.69
2013	11,479	3	0	10	0	2	0	0	2	4	0	1.83

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
2013	3	9.89	0.30	0.06 - 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

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
2013	3	7.51	0.40	0.08 - 1.17	Same as

SELECT SPECIALTY HOSPITAL --- CENTRAL PA

NHSN ID: 13921

Hospital type: Long-term acute care hospital

Number of licensed beds (2013): 38

Number of reported Healthcare-Associated Infections:

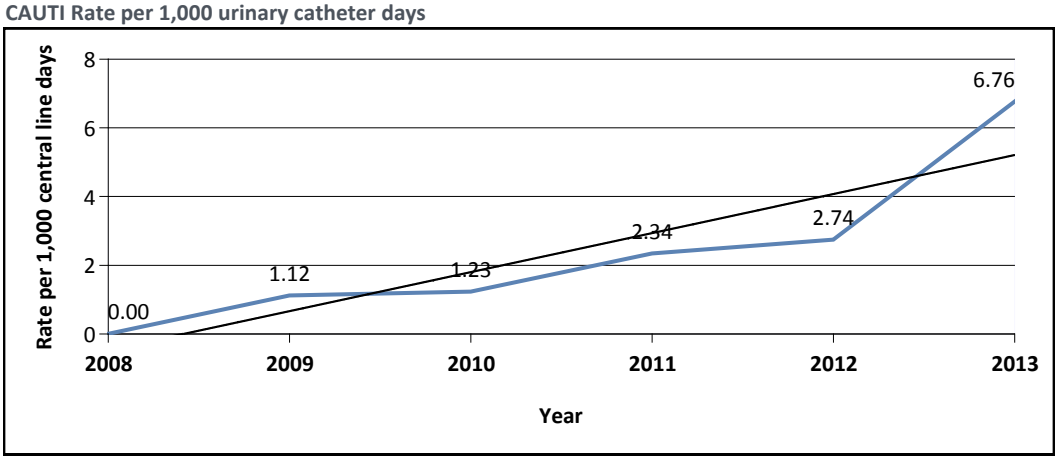
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	546	0	0	1	0	0	0	0	0	0	0	1.83
2009	6,721	5	0	1	0	0	0	0	0	4	0	1.49
2010	7,323	5	0	22	0	0	0	0	0	4	0	4.23
2011	9,728	6	0	14	0	0	0	0	1	8	0	2.98
2012	9,672	4	0	21	0	1	0	0	2	13	0	4.24
2013	10,803	8	1	21	0	3	0	0	1	34	1	6.39

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
2013	23	5.24	4.39	2.78 - 6.58	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 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
2013	8	8.49	0.94	0.41 - 1.86	Same as

SELECT SPECIALTY HOSPITAL --- CENTRAL PENNSYLVANIA (CAMP HILL)

NHSN ID: 12147

Hospital type: Long-term acute care hospital

Number of licensed beds (2013): 31

Number of reported Healthcare-Associated Infections:

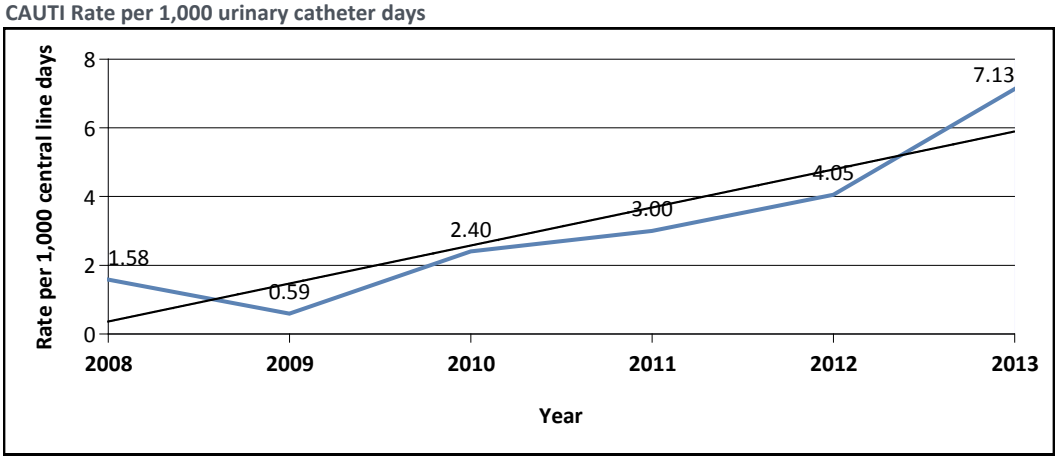
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,851	10	0	5	0	0	0	0	1	4	0	5.19
2009	7,732	3	0	9	0	0	0	0	0	3	0	1.94
2010	7,225	2	0	11	0	0	0	0	0	9	0	3.04
2011	8,609	5	0	9	0	0	0	0	0	13	0	3.14
2012	9,567	7	0	8	1	0	0	0	2	28	0	4.81
2013	10,345	10	0	20	0	2	0	0	0	35	0	6.48

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
2013	26	5.63	4.62	3.01 - 6.76	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
2013	6	8.02	0.75	0.27 - 1.63	Same as

SELECT SPECIALTY HOSPITAL --- DANVILLE

NHSN ID: 12123

Hospital type: Long-term acute care hospital

Number of licensed beds (2013): 30

Number of reported Healthcare-Associated Infections:

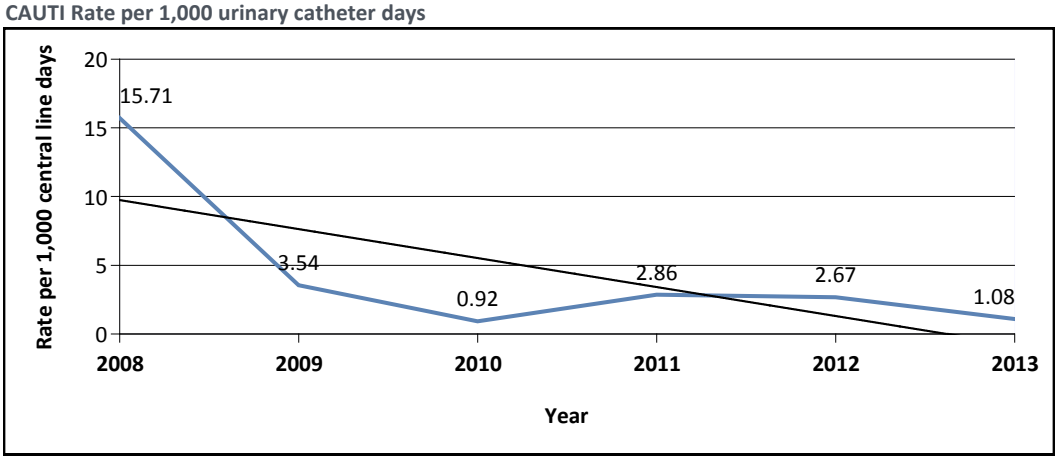
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,071	5	0	20	0	1	0	0	0	15	0	13.35
2009	5,530	1	0	10	0	3	0	0	0	10	0	4.34
2010	5,097	2	0	9	0	2	0	0	0	4	0	3.34
2011	5,168	4	0	11	0	2	0	0	0	4	0	4.06
2012	4,886	1	0	3	0	0	0	0	0	9	0	2.66
2013	6,501	1	0	1	0	0	0	0	0	1	0	0.46

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
2013	1	1.40	0.71	0.01 - 3.97	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
2013	1	3.41	0.29	0 - 1.63	Same as

SELECT SPECIALTY HOSPITAL --- MCKEESPORT, INC.

NHSN ID: 12271

Hospital type: Long-term acute care hospital

Number of licensed beds (2013): 30

Number of reported Healthcare-Associated Infections:

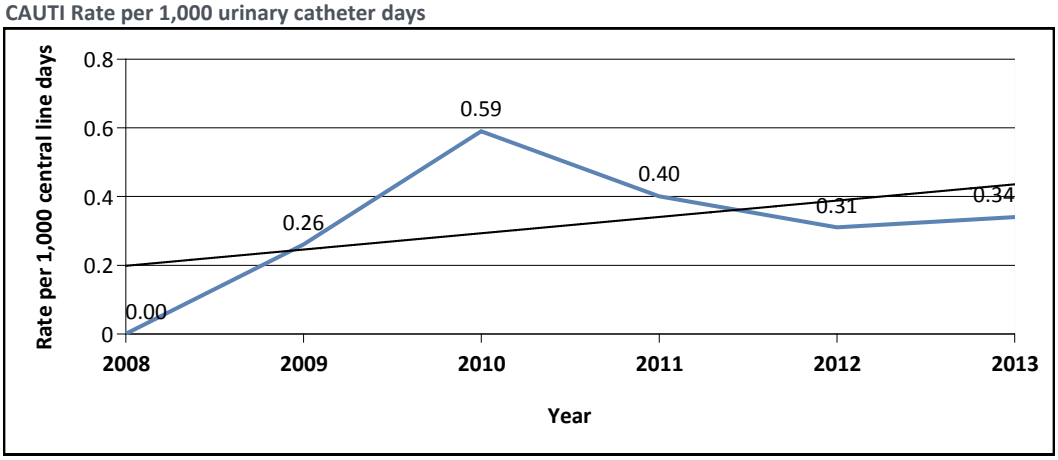
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,249	1	0	0	0	0	0	0	0	0	0	0.31
2009	6,866	1	0	0	0	0	0	0	0	1	0	0.29
2010	7,001	10	0	0	0	1	0	0	0	2	0	1.86
2011	7,857	3	0	1	1	0	0	0	1	1	0	0.89
2012	7,993	6	0	10	0	1	0	0	1	4	0	2.75
2013	7,840	0	0	9	0	0	0	0	0	1	0	1.28

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
2013	1	4.61	0.22	0 - 1.21	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
2013	0	4.67	0.00	0 - 0.78	Better

SELECT SPECIALTY HOSPITAL --- PITTSBURGH/UPMC

NHSN ID: 12009

Hospital type: Long-term acute care hospital

Number of licensed beds (2013): 32

Number of reported Healthcare-Associated Infections:

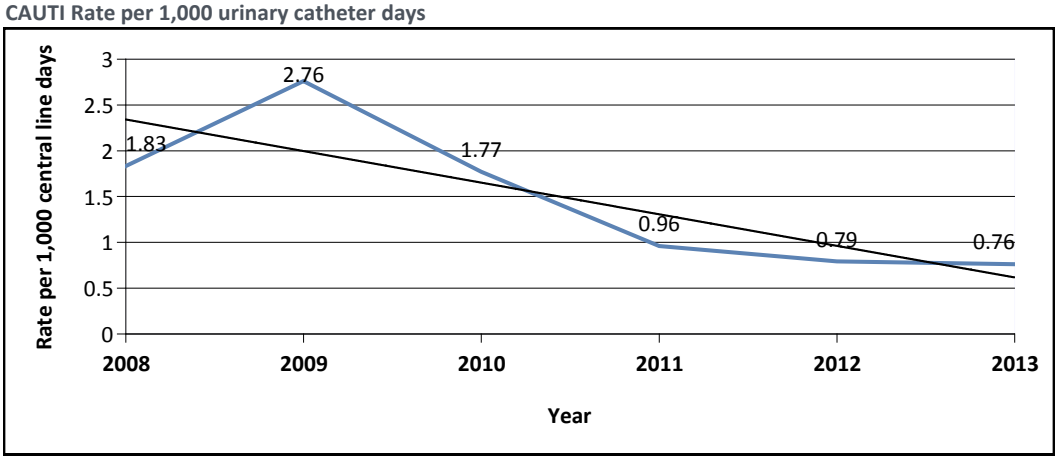
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,142	12	0	1	1	3	0	0	1	7	0	6.04
2009	8,254	17	0	15	2	4	0	0	1	17	1	6.91
2010	7,656	10	0	17	1	4	0	0	0	9	0	5.36
2011	8,138	12	0	17	1	5	0	0	2	6	0	5.28
2012	8,770	6	0	7	0	4	0	0	1	8	0	2.96
2013	8,544	6	0	4	0	2	0	0	0	7	0	2.22

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
2013	3	6.15	0.49	0.1 - 1.43	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
2013	6	6.24	0.96	0.35 - 2.09	Same as

SELECT SPECIALTY HOSPITAL LAUREL HIGHLANDS, INC.

NHSN ID: 12108

Hospital type: Long-term acute care hospital

Number of licensed beds (2013): 40

Number of reported Healthcare-Associated Infections:

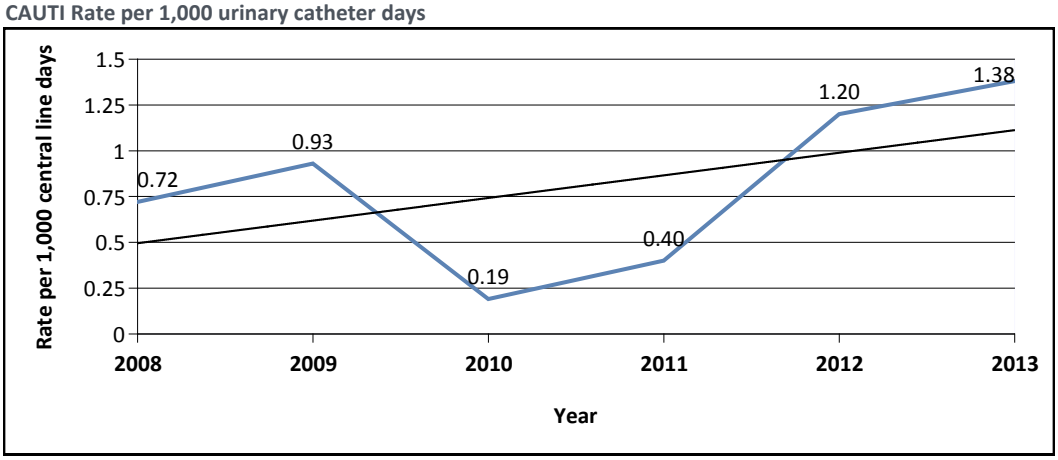
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,353	10	0	7	0	0	0	0	1	5	0	5.28
2009	9,448	9	0	13	2	1	0	0	3	5	0	3.49
2010	9,020	4	0	12	3	0	0	0	0	1	0	2.22
2011	7,750	2	0	6	0	0	0	0	1	3	0	1.55
2012	7,337	7	0	8	1	0	0	0	0	6	0	3.00
2013	6,436	7	0	12	0	1	0	0	1	5	0	4.04

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
2013	5	5.66	0.88	0.28 - 2.06	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
2013	6	4.55	1.32	0.48 - 2.87	Same as

SHARON REGIONAL HEALTH SYSTEM

NHSN ID: 12250

Hospital type: Acute care general hospital

Number of licensed beds (2013): 220

Number of reported Healthcare-Associated Infections:

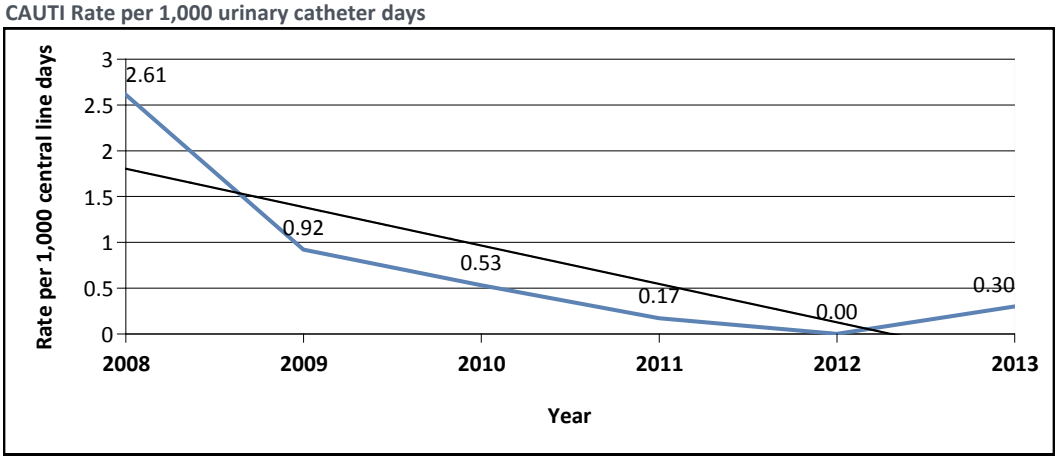
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	19,913	3	1	2	1	11	0	9	0	8	0	1.76
2009	46,567	5	1	21	3	8	0	16	6	12	0	1.55
2010	35,112	6	1	9	2	6	0	8	5	11	0	1.37
2011	37,998	2	0	30	1	3	0	12	0	6	0	1.42
2012	33,922	2	0	4	0	3	0	9	1	3	0	0.65
2013	34,895	0	0	3	1	0	0	8	2	4	1	0.54

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
2013	2	10.17	0.20	0.02 - 0.71	Better

CAUTI Rate per 1,000 urinary catheter days



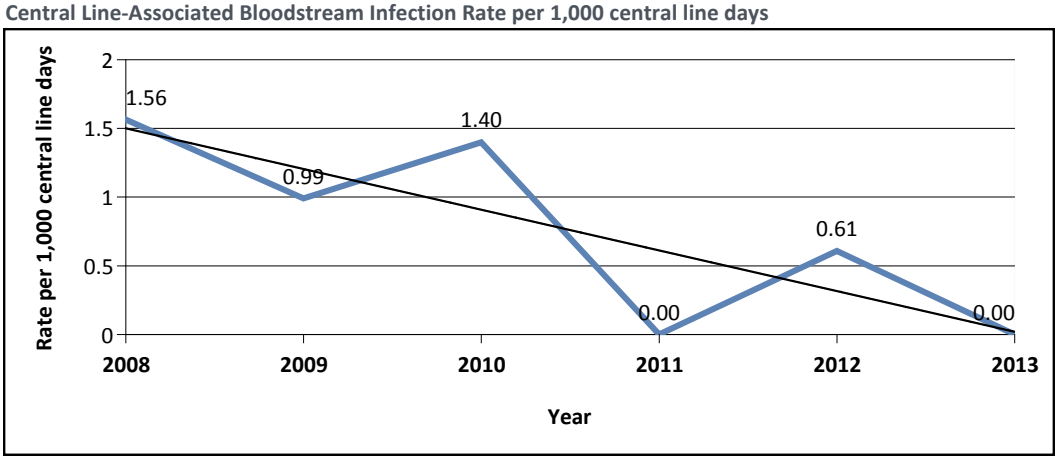
SHARON REGIONAL HEALTH SYSTEM

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
2013	0	2.39	0.00	0 - 1.53	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 (2013): 53

Number of reported Healthcare-Associated Infections:

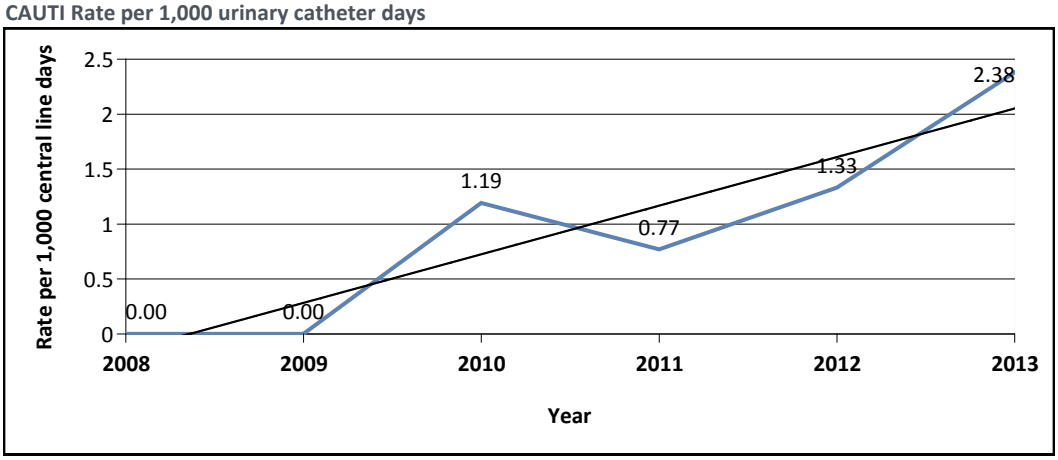
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,923	0	0	1	0	0	0	5	0	1	0	1.42
2009	5,946	0	0	1	0	0	0	2	0	3	0	1.01
2010	4,863	0	0	1	1	0	0	2	0	2	0	1.23
2011	4,514	0	0	0	0	0	0	6	0	4	0	2.22
2012	4,835	1	0	3	0	0	0	3	0	5	0	2.48
2013	5,090	1	0	0	0	0	0	4	0	9	0	2.75

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
2013	3	1.93	1.56	0.31 - 4.55	Same as

CAUTI Rate per 1,000 urinary catheter days



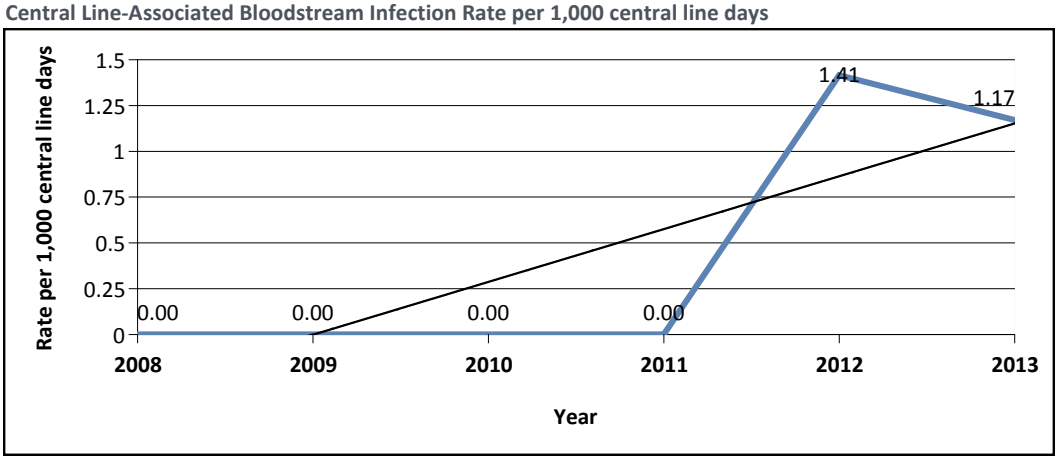
SHRINERS HOSPITAL FOR CHILDREN --- PHILADELPHIA

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
2013	1	0.57	1.74	0.02 - 9.68	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 (2013): 83

Number of reported Healthcare-Associated Infections:

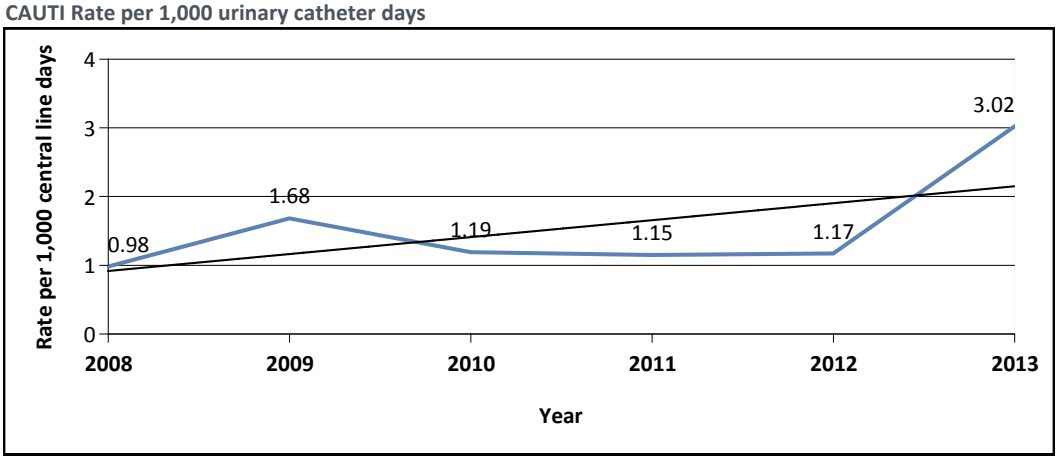
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	5,953	0	0	0	0	3	0	5	0	1	0	1.51
2009	12,976	1	0	5	0	4	0	6	0	4	0	1.54
2010	12,009	0	0	6	0	2	1	5	1	2	0	1.42
2011	11,733	1	0	3	0	7	0	10	0	3	1	2.13
2012	11,622	3	0	0	0	2	1	11	1	4	0	1.89
2013	11,623	5	3	8	0	10	0	9	4	5	1	3.87

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
2013	5	3.45	1.45	0.47 - 3.39	Same as

CAUTI Rate per 1,000 urinary catheter days



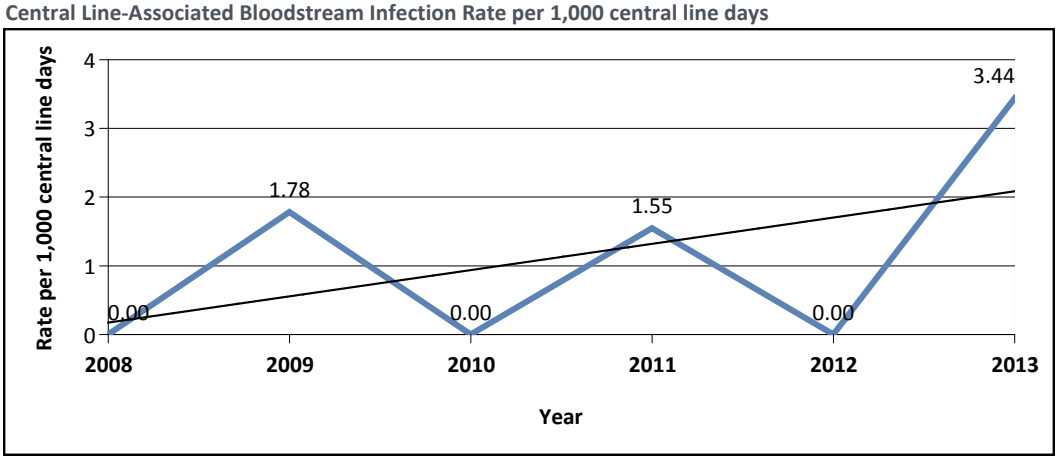
SOLDIERS & SAILORS MEM HOSPITAL

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
2013	2	0.47	4.24	0.48 - 15.32	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 (2013): 111

Number of reported Healthcare-Associated Infections:

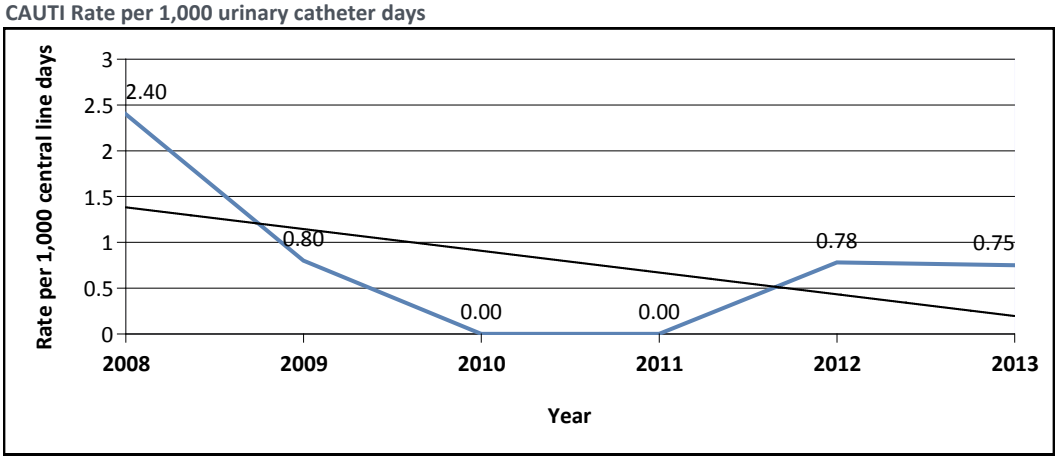
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	10,478	2	0	6	0	3	0	2	0	7	0	1.91
2009	22,371	5	0	3	0	1	0	3	1	5	0	0.80
2010	19,768	0	0	1	0	2	0	3	0	0	0	0.30
2011	19,366	2	0	1	0	1	0	3	0	1	0	0.41
2012	17,538	0	1	3	0	3	0	4	3	5	0	1.08
2013	18,930	3	0	3	0	4	0	5	0	5	0	1.06

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
2013	3	8.39	0.36	0.07 - 1.05	Same as

CAUTI Rate per 1,000 urinary catheter days



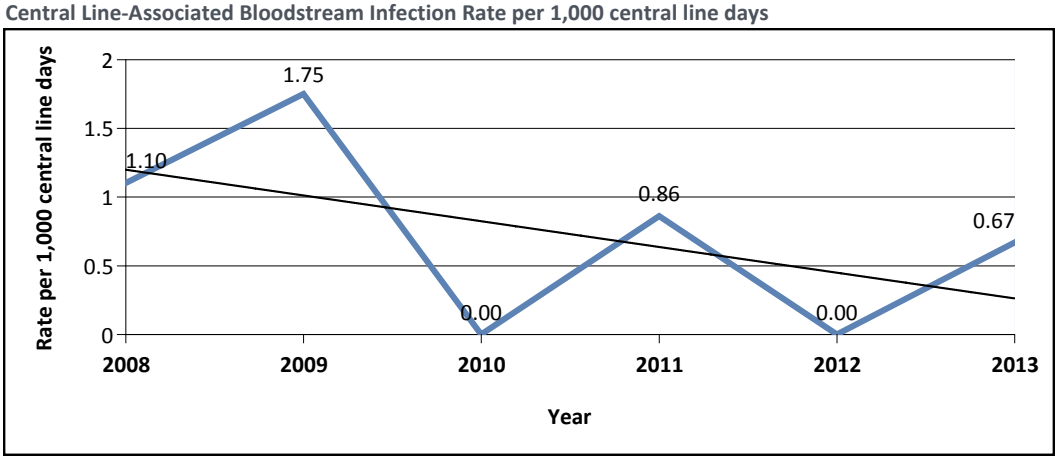
SOMERSET HOSPITAL

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
2013	2	2.42	0.83	0.09 - 2.99	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 (2013): 49

Number of reported Healthcare-Associated Infections:

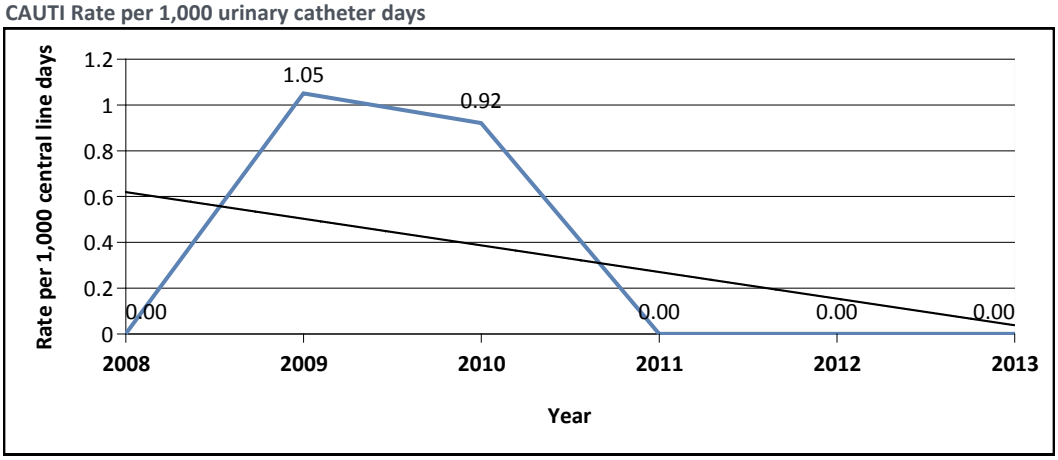
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	7,428	0	0	0	0	0	0	0	0	1	0	0.13
2009	15,069	2	0	0	0	0	0	1	0	3	0	0.40
2010	17,904	1	0	0	0	0	0	2	0	2	0	0.28
2011	16,853	1	0	0	0	0	0	4	0	0	0	0.30
2012	14,297	0	0	0	0	0	0	0	0	3	0	0.21
2013	11,449	0	0	0	0	0	0	2	0	0	0	0.17

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
2013	0	1.65	0.00	0 - 2.22	Same as

CAUTI Rate per 1,000 urinary catheter days



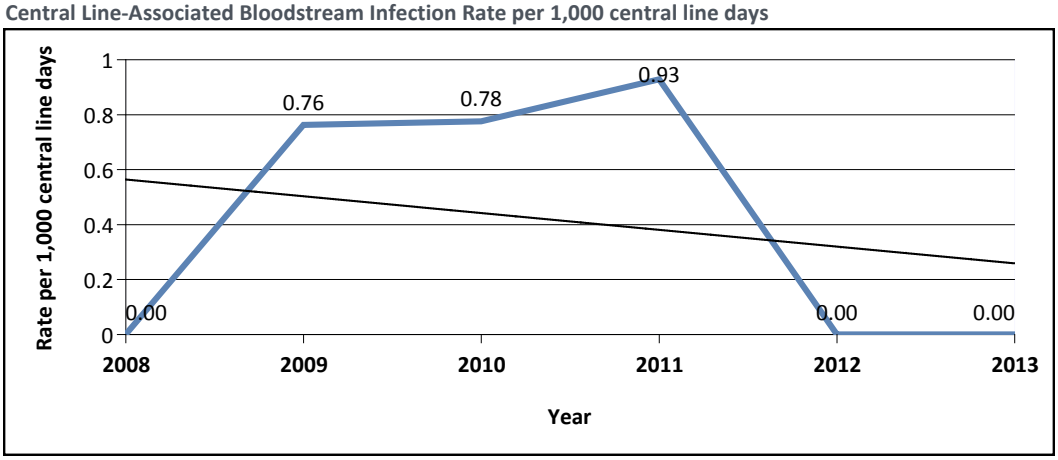
SOUTHWEST REGIONAL MEDICAL CENTER

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
2013	0	0.31	0.00	0 - 11.83	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 (2013): 50

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
2013	15,073	0	25	0	0	0	7	0	10	1	0	2.85

SPECIAL CARE HOSPITAL

NHSN ID: 12604

Hospital type: Long-term acute care hospital

Number of licensed beds (2013): 67

Number of reported Healthcare-Associated Infections:

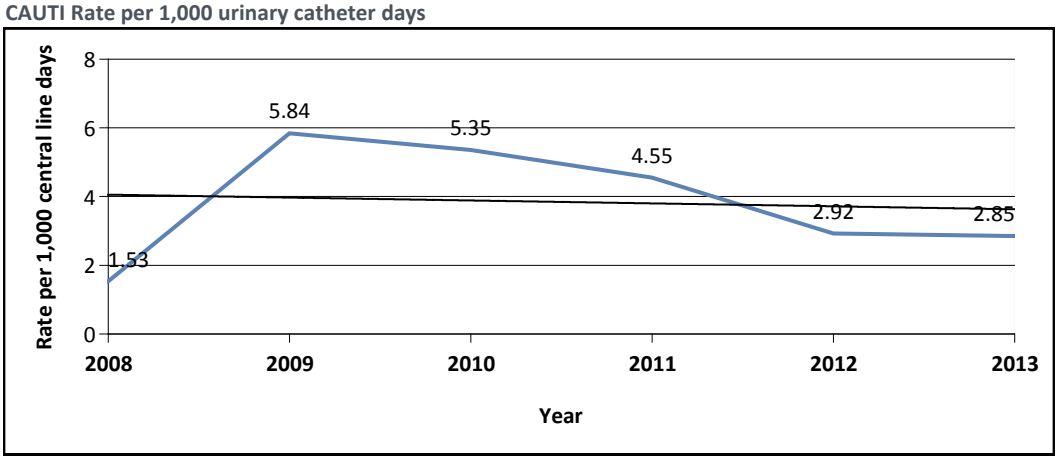
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	8,217	1	4	3	11	1	0	0	2	8	0	3.65
2009	16,338	5	2	13	25	4	1	0	1	33	0	5.14
2010	16,248	3	0	8	36	1	0	0	0	28	0	4.68
2011	14,958	1	0	11	14	1	0	0	0	30	0	3.81
2012	13,572	6	0	5	3	3	0	0	2	19	0	2.80
2013	10,266	4	0	24	2	0	0	0	1	11	0	4.09

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
2013	11	5.96	1.84	0.92 - 3.3	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

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
2013	4	5.41	0.74	0.2 - 1.89	Same as

ST. CHRISTOPHERS HOSPITAL FOR CHILDREN

NHSN ID: 12290

Hospital type: Children's Hospital

Number of licensed beds (2013): 189

Number of reported Healthcare-Associated Infections:

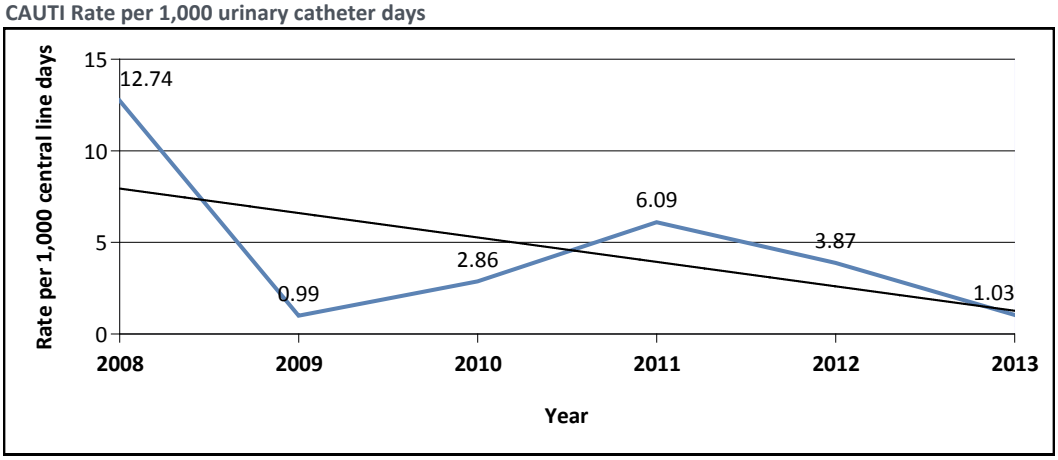
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	23,619	22	11	6	11	1	0	11	3	17	2	3.56
2009	49,106	29	27	8	11	4	0	15	2	20	0	2.36
2010	41,556	21	12	7	12	1	0	19	6	11	1	2.17
2011	46,423	27	17	7	15	3	0	16	8	12	2	2.30
2012	47,658	21	20	8	17	3	0	15	6	8	3	2.12
2013	44,274	21	9	12	16	2	0	15	5	6	1	1.97

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
2013	1	1.94	0.52	0.01 - 2.87	Same as

CAUTI Rate per 1,000 urinary catheter days



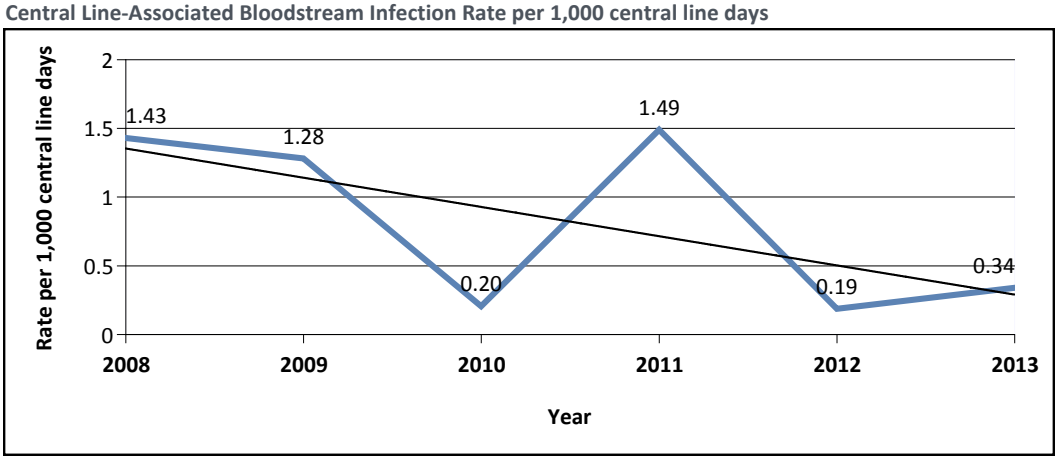
ST. CHRISTOPHERS HOSPITAL FOR CHILDREN

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
2013	2	4.76	0.42	0.05 - 1.52	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
2013	6	5.89	1.02	0.37 - 2.22	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
2013	1	3.13	0.32	0 - 1.78	Same as

ST. CLAIR MEMORIAL HOSPITAL

NHSN ID: 10561

Hospital type: Acute care general hospital

Number of licensed beds (2013): 328

Number of reported Healthcare-Associated Infections:

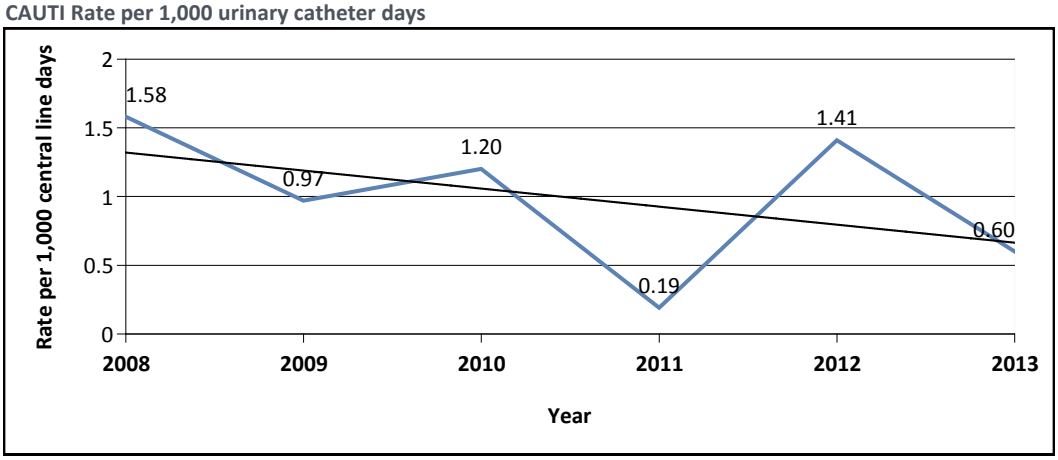
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	38,756	10	1	13	0	11	0	41	5	11	0	2.37
2009	83,364	4	0	39	4	12	0	82	6	21	5	2.08
2010	86,799	5	3	65	2	10	1	77	3	17	0	2.11
2011	85,606	2	1	81	1	15	0	66	4	8	2	2.10
2012	83,473	4	0	77	1	5	1	74	3	20	0	2.22
2013	83,028	1	0	48	1	7	1	65	1	18	1	1.72

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
2013	6	20.81	0.29	0.11 - 0.63	Better

CAUTI Rate per 1,000 urinary catheter days



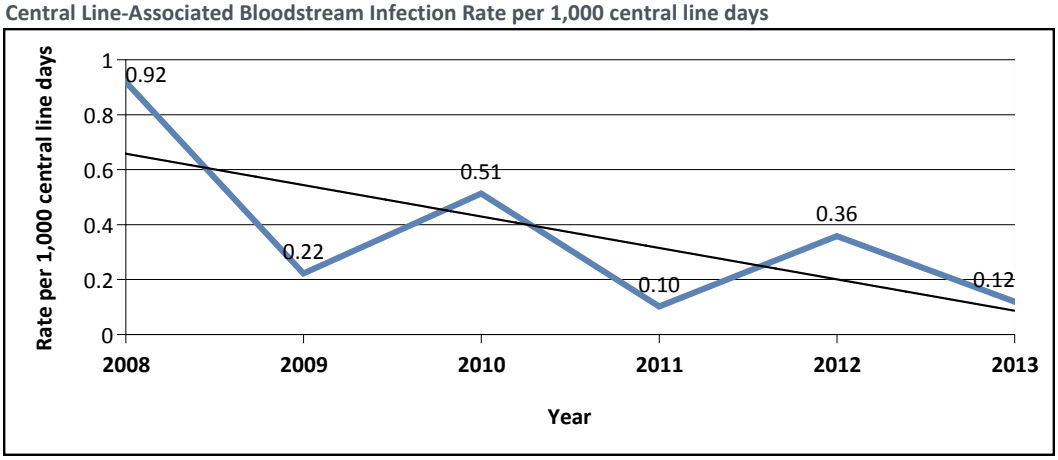
ST. CLAIR MEMORIAL HOSPITAL

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
2013	1	6.78	0.15	0 - 0.82	Better

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 (2013): 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
2013	11,963	0	1	0	0	0	0	0	1	0	0	0.17

ST. JOSEPH MEDICAL CENTER

NHSN ID: 11961

Hospital type: Acute care general hospital

Number of licensed beds (2013): 204

Number of reported Healthcare-Associated Infections:

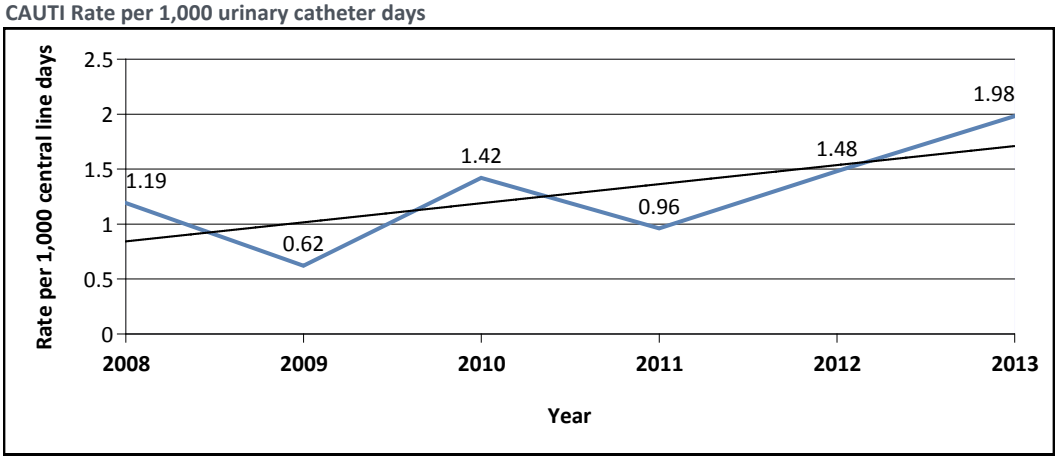
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	22,430	5	0	0	0	3	0	8	0	6	0	0.98
2009	45,015	4	0	0	1	1	0	10	0	6	0	0.49
2010	38,065	7	0	2	0	2	0	19	1	14	0	1.18
2011	37,733	10	0	2	1	4	0	28	0	16	0	1.62
2012	37,252	11	0	10	1	7	0	24	3	14	0	1.88
2013	33,728	11	0	24	1	8	1	27	0	18	0	2.67

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
2013	11	11.58	0.95	0.47 - 1.7	Same as

CAUTI Rate per 1,000 urinary catheter days



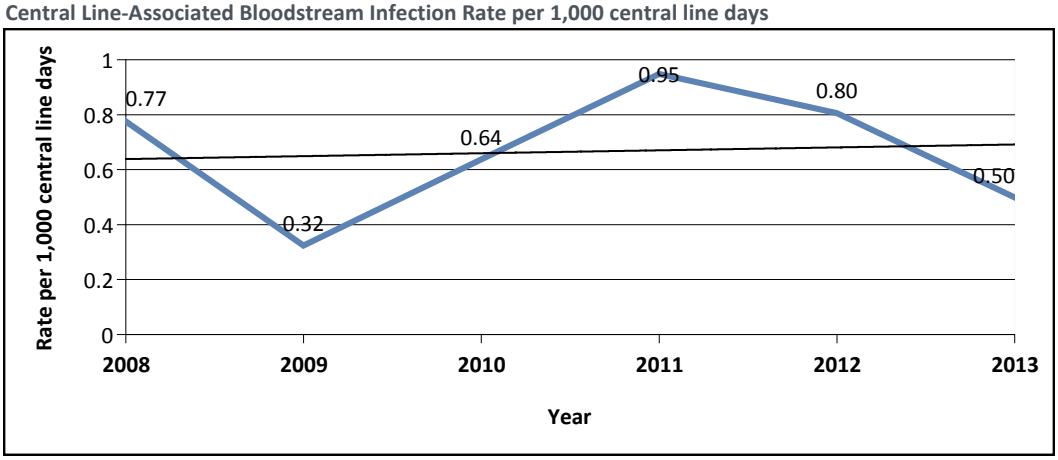
ST. JOSEPH MEDICAL CENTER

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
2013	4	6.48	0.62	0.17 - 1.58	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
2013	0	0.12	0.00	0 - 30.72	Same as

ST. JOSEPHS HOSPITAL

NHSN ID: 12438

Hospital type: Acute care general hospital

Number of licensed beds (2013): 197

Number of reported Healthcare-Associated Infections:

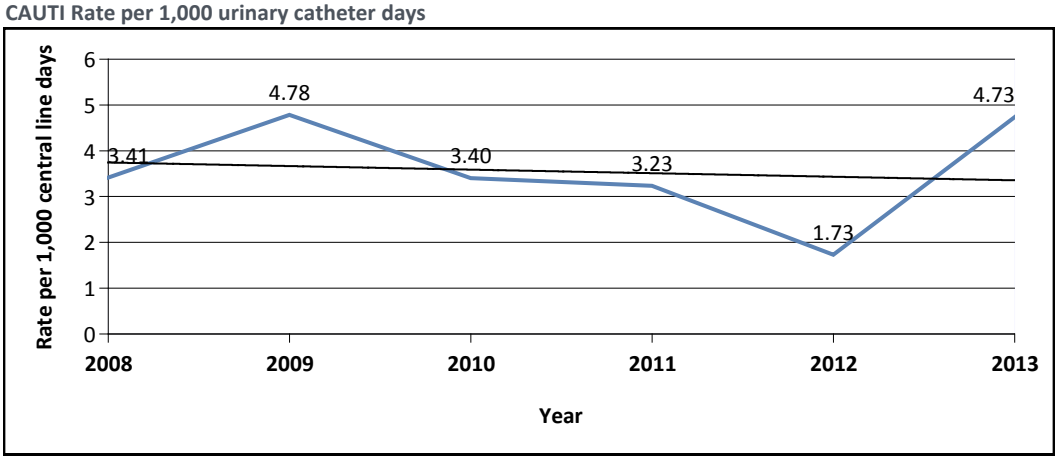
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	10,585	25	0	0	0	9	0	0	0	16	0	4.72
2009	21,478	28	0	4	0	1	0	0	2	42	0	3.59
2010	22,626	27	0	8	0	5	0	2	0	22	0	2.83
2011	23,411	20	0	3	0	7	0	1	1	25	0	2.43
2012	31,637	6	0	4	1	6	0	0	0	11	0	0.89
2013	30,941	26	0	14	1	10	0	2	1	19	0	2.36

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
2013	18	7.89	2.28	1.35 - 3.6	Worse

CAUTI Rate per 1,000 urinary catheter days



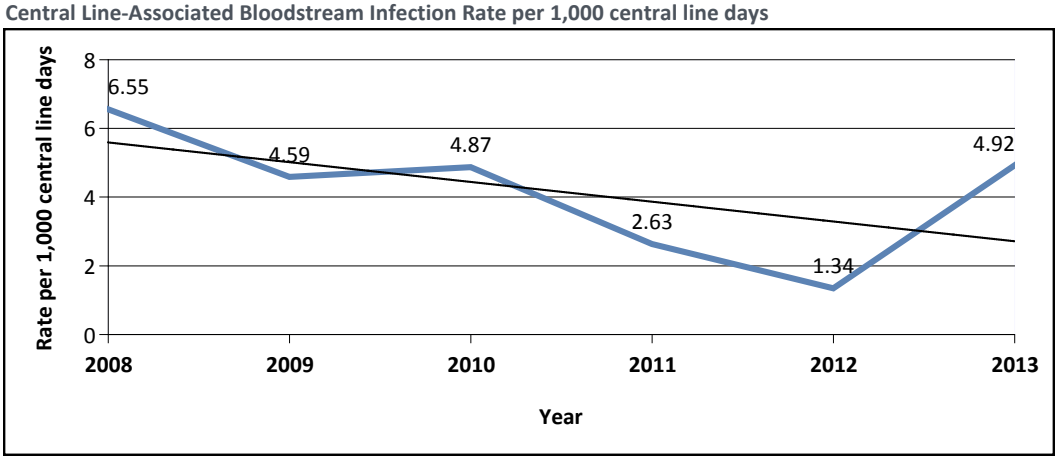
ST. JOSEPHS HOSPITAL

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
2013	21	3.45	6.09	3.77 - 9.31	Worse

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 (2013): 108

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
2013	20,370	0	0	5	0	2	0	8	4	3	0	1.08

ST. LUKES HOSPITAL BETHLEHEM

NHSN ID: 11718

Hospital type: Acute care general hospital

Number of licensed beds (2013): 560

Number of reported Healthcare-Associated Infections:

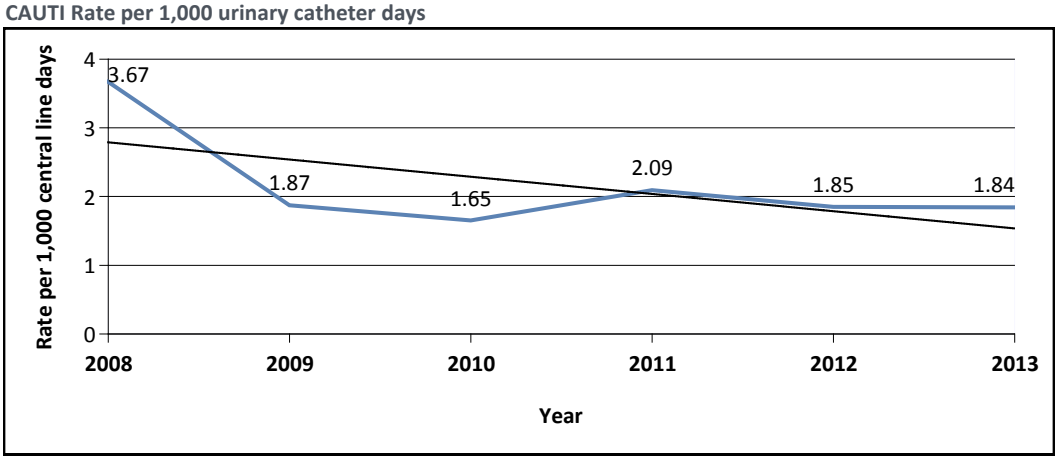
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	71,870	24	12	31	15	11	0	35	3	107	1	3.33
2009	158,307	60	9	15	37	39	1	79	10	117	3	2.34
2010	146,029	54	9	56	59	49	3	91	18	89	4	2.96
2011	142,433	38	10	75	41	36	1	105	9	104	6	2.98
2012	134,196	39	21	11	49	26	0	81	14	66	7	2.34
2013	137,377	36	14	61	16	19	0	88	8	78	8	2.39

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
2013	37	41.74	0.89	0.62 - 1.22	Same as

CAUTI Rate per 1,000 urinary catheter days



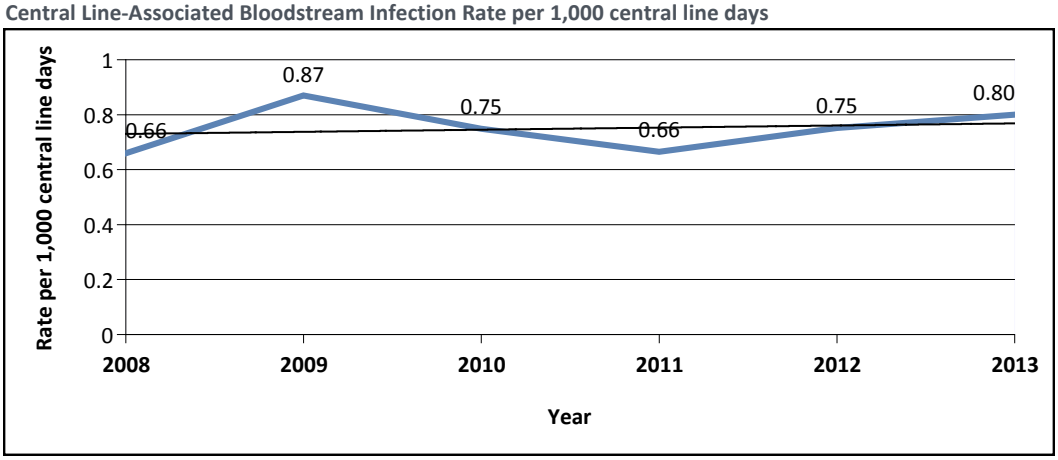
ST. LUKES HOSPITAL BETHLEHEM

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
2013	15	15.16	0.99	0.55 - 1.63	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
2013	0	0.83	0.00	0 - 4.42	Same as

ST. LUKES MINERS MEMORIAL HOSPITAL

NHSN ID: 11784

Hospital type: Acute care general hospital

Number of licensed beds (2013): 44

Number of reported Healthcare-Associated Infections:

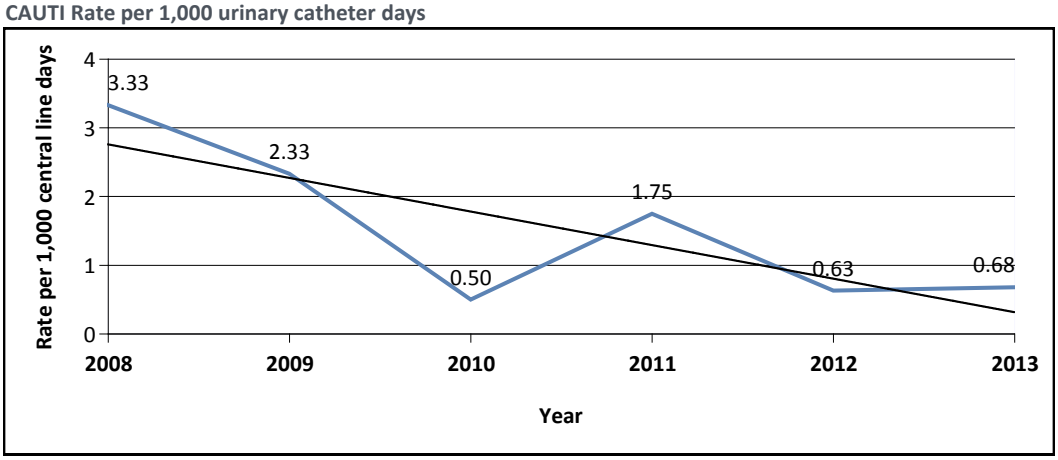
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,488	0	0	0	0	0	0	2	0	5	0	1.56
2009	8,567	0	1	3	0	1	0	11	0	7	0	2.68
2010	6,549	0	1	4	0	0	0	2	0	2	0	1.37
2011	6,390	0	0	0	0	0	0	2	0	3	0	0.78
2012	7,014	1	0	1	0	1	0	5	2	1	0	1.57
2013	7,001	0	0	2	0	0	0	3	0	1	0	0.86

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
2013	1	2.26	0.44	0.01 - 2.46	Same as

CAUTI Rate per 1,000 urinary catheter days



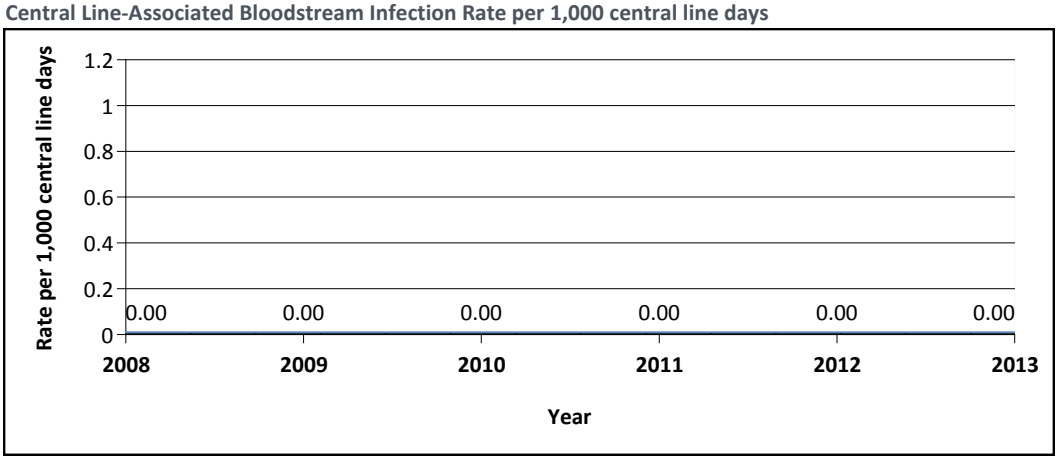
ST. LUKES MINERS MEMORIAL HOSPITAL

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
2013	0	0.22	0.00	0 - 16.91	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 (2013): 62

Number of reported Healthcare-Associated Infections:

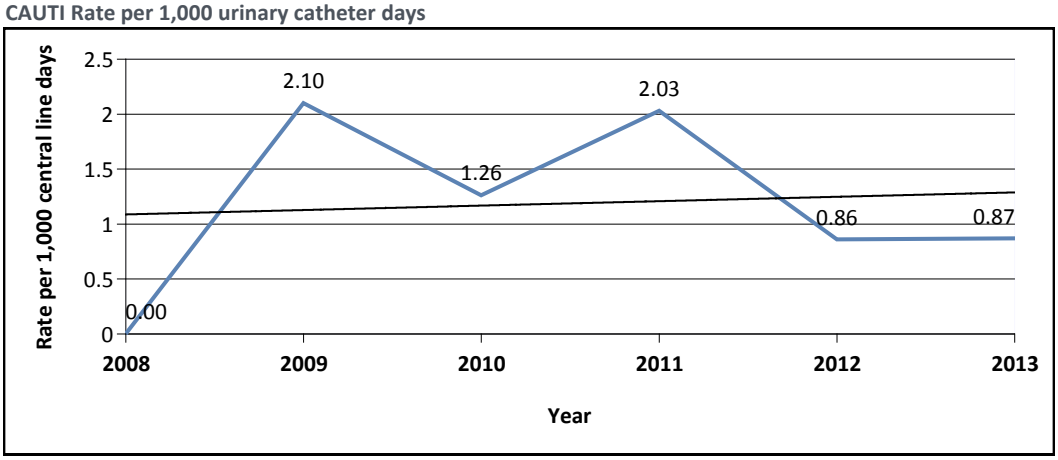
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	6,672	1	0	4	0	0	0	3	0	1	0	1.35
2009	14,733	1	0	3	0	1	0	7	1	4	0	1.15
2010	14,903	0	0	5	0	2	0	9	2	5	0	1.54
2011	15,057	0	0	4	0	2	0	7	1	3	0	1.13
2012	14,938	2	1	1	0	3	0	5	0	4	0	1.07
2013	14,419	1	1	0	0	0	0	8	0	3	0	0.90

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
2013	1	1.72	0.58	0.01 - 3.24	Same as

CAUTI Rate per 1,000 urinary catheter days



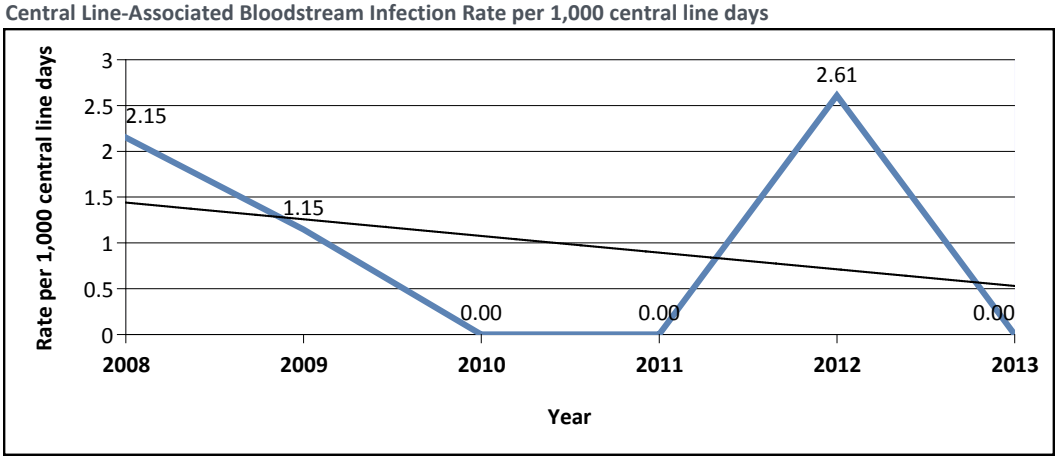
ST. LUKES QUAKERTOWN HOSPITAL

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
2013	0	0.49	0.00	0 - 7.47	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 (2013): 342

Number of reported Healthcare-Associated Infections:

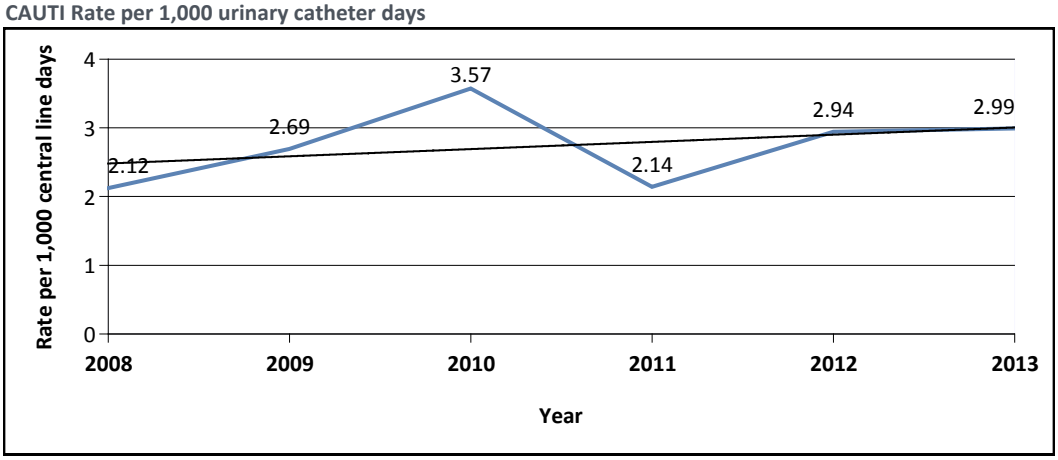
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	47,464	15	1	16	1	12	0	22	4	21	0	1.94
2009	97,024	20	0	28	0	26	0	46	5	65	1	1.97
2010	99,895	15	1	43	2	30	0	35	1	76	0	2.03
2011	99,643	15	0	27	1	19	0	30	7	64	2	1.66
2012	94,985	15	1	37	1	19	0	43	5	69	1	2.01
2013	100,245	16	2	84	2	16	0	47	6	78	1	2.51

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
2013	37	18.66	1.98	1.4 - 2.73	Worse

CAUTI Rate per 1,000 urinary catheter days



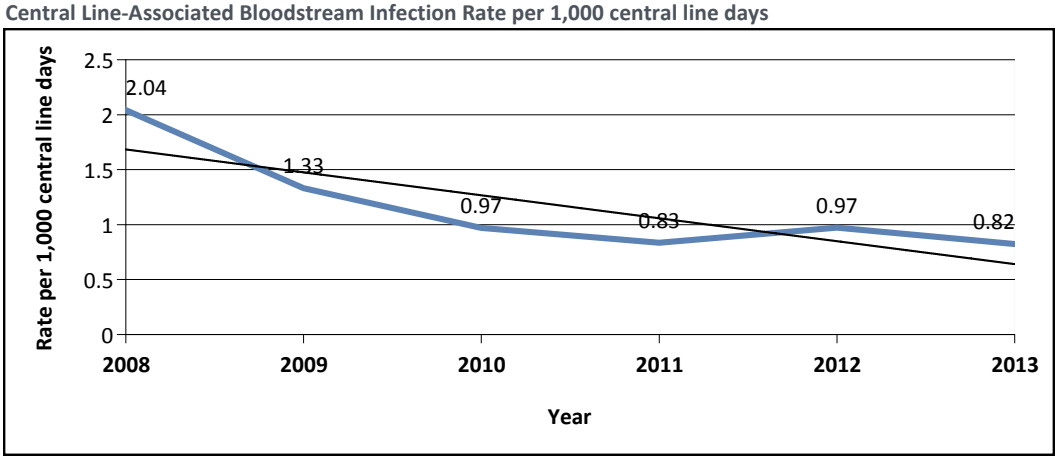
ST. MARY MEDICAL CENTER

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
2013	10	8.17	1.22	0.59 - 2.25	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
2013	0	0.02	0.00	0 - 177.48	Same as

ST. MARY MEDICAL CENTER REHAB

NHSN ID: 12483

Hospital type: Acute care general hospital

Number of licensed beds (2013): 31

Number of reported Healthcare-Associated Infections:

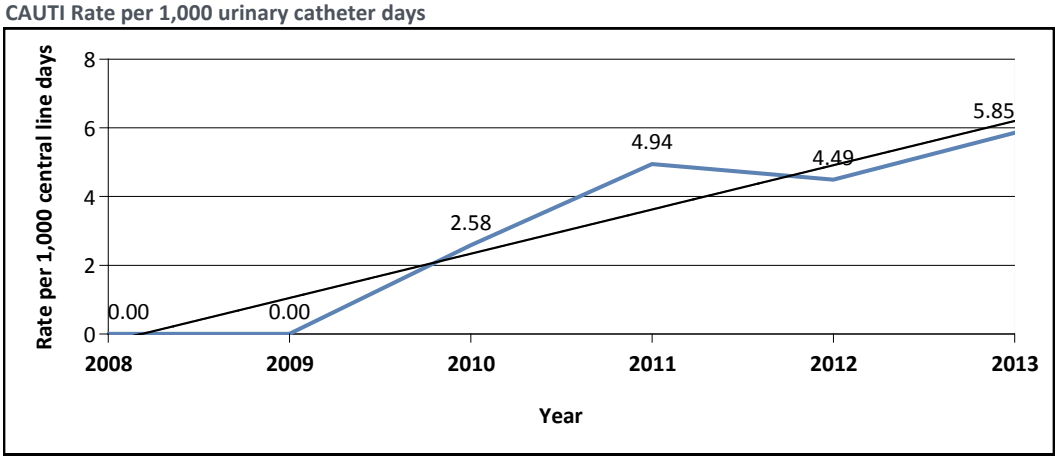
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,867	0	0	3	0	0	0	0	0	5	0	2.07
2009	6,839	0	0	5	0	0	0	0	0	7	0	1.75
2010	6,712	0	0	2	0	0	0	0	0	8	0	1.49
2011	8,745	0	0	2	0	0	0	0	0	15	0	1.94
2012	9,315	1	0	3	0	0	0	0	1	13	0	1.93
2013	9,313	0	0	8	0	0	0	0	1	13	0	2.36

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
2013	2	0.50	3.98	0.45 - 14.38	Same as

CAUTI Rate per 1,000 urinary catheter days



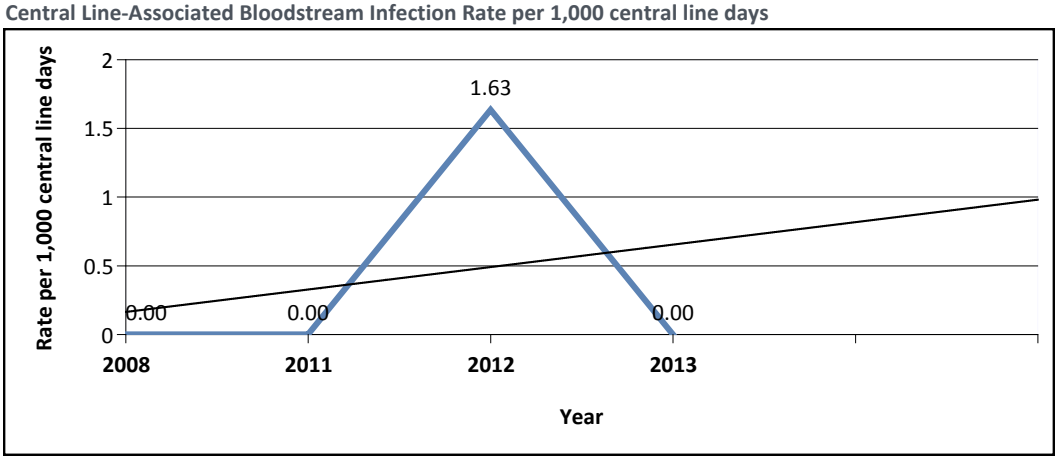
ST. MARY MEDICAL CENTER REHAB

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
2013	0	0.29	0.00	0 - 12.61	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 (2013): 428

Number of reported Healthcare-Associated Infections:

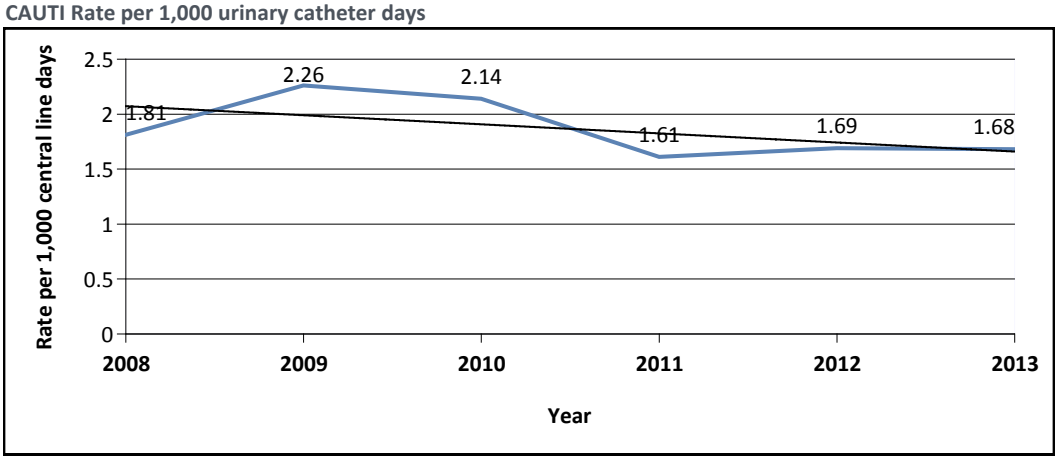
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	42,712	4	1	26	7	19	2	47	3	28	1	3.23
2009	94,889	14	4	53	11	46	1	104	6	91	1	3.49
2010	90,106	21	4	45	11	45	0	79	5	86	1	3.30
2011	83,108	11	3	48	7	30	0	93	7	63	3	3.19
2012	76,297	21	2	51	8	28	0	95	9	56	1	3.55
2013	74,136	12	6	64	11	30	3	80	6	81	0	3.95

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
2013	28	34.95	0.80	0.53 - 1.16	Same as

CAUTI Rate per 1,000 urinary catheter days



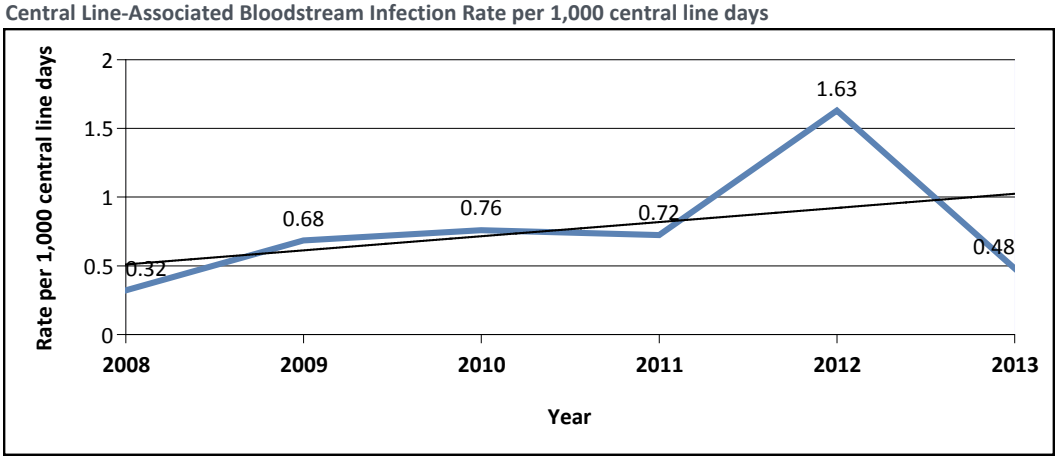
ST. VINCENT HEALTH CENTER

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
2013	4	6.73	0.59	0.16 - 1.52	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	1.74	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
2013	0	0.53	0.00	0 - 6.87	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				-	
2013				-	

SUNBURY COMMUNITY HOSPITAL

NHSN ID: 12105

Hospital type: Acute care general hospital

Number of licensed beds (2013): 89

Number of reported Healthcare-Associated Infections:

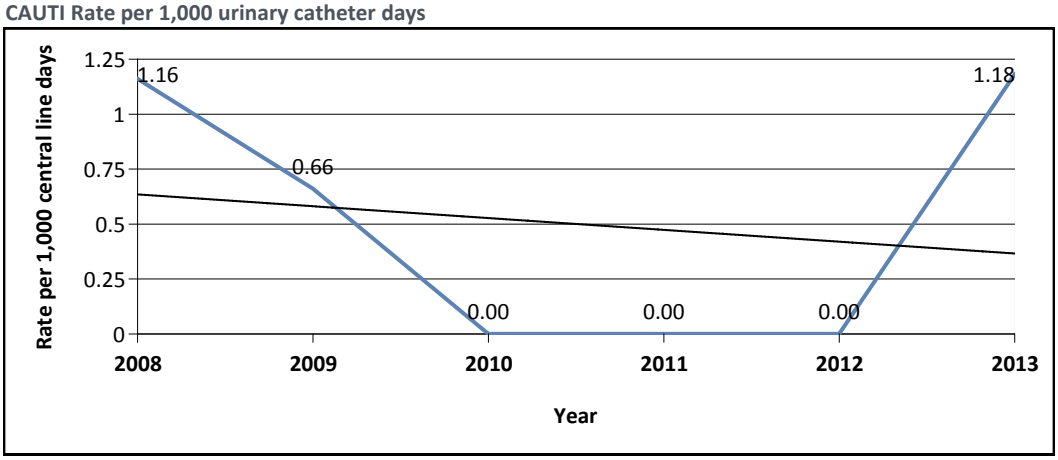
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,861	0	2	2	0	3	0	1	0	1	0	1.85
2009	9,135	0	0	2	0	7	0	3	0	1	0	1.42
2010	7,978	0	4	0	0	1	0	4	1	0	0	1.25
2011	7,897	0	3	1	0	6	0	2	0	0	0	1.52
2012	6,518	1	1	0	0	1	0	4	0	0	0	1.07
2013	6,541	0	0	1	0	3	0	2	0	1	0	1.07

Catheter-Associated Urinary Tract Infections:

Standardized Infection Ratio

Year	Observed Infections	Predicted Infections	Standardized Infection Ratio	Confidence Interval	Interpretation
2008	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
2013	1	1.28	0.78	0.01 - 4.34	Same as

CAUTI Rate per 1,000 urinary catheter days



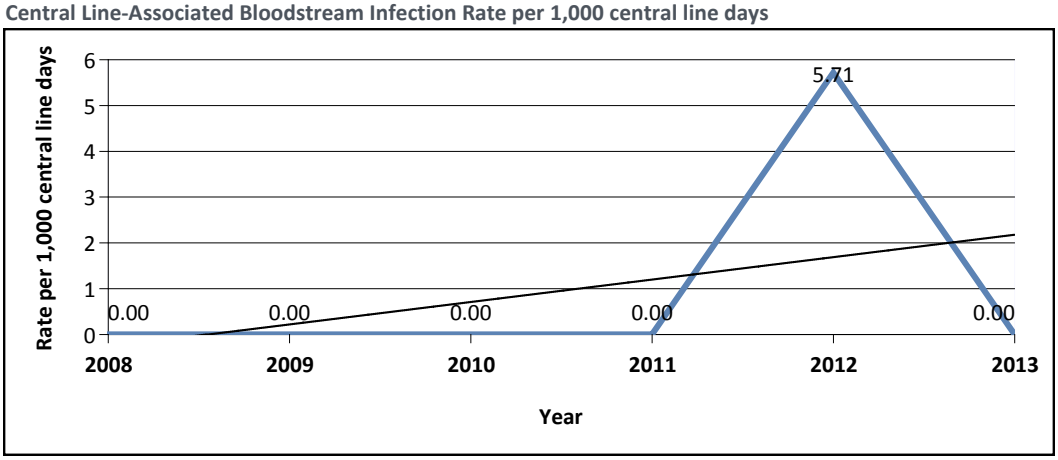
SUNBURY COMMUNITY HOSPITAL

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
2013	0	0.08	0.00	0 - 44.2	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 (2013): 15

Number of reported Healthcare-Associated Infections:

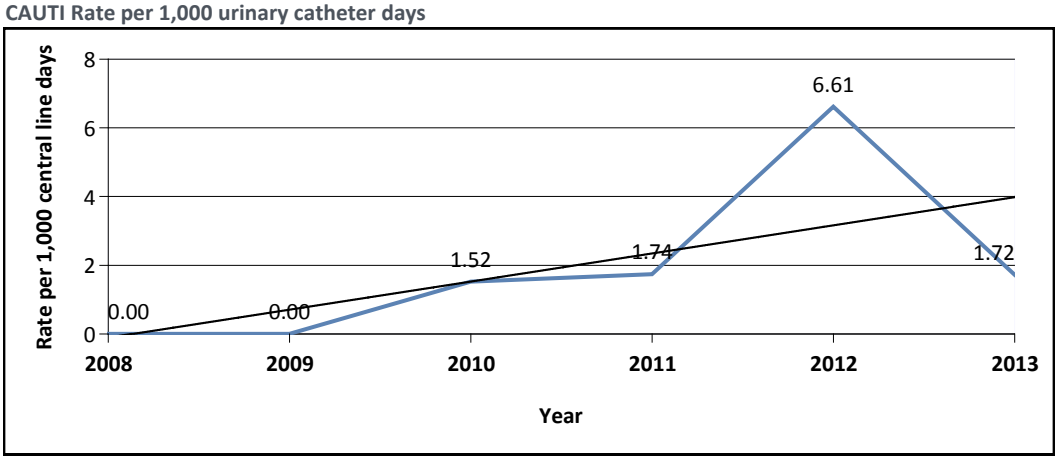
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	1,185	0	0	0	0	0	0	0	0	0	0	0.00
2009	3,059	0	0	0	0	0	0	5	0	0	0	1.63
2010	2,962	0	0	0	0	0	0	6	0	1	0	2.36
2011	2,646	0	0	0	0	0	0	3	0	1	0	1.51
2012	2,585	0	0	0	0	0	0	4	0	5	0	3.48
2013	2,015	0	0	0	0	0	0	7	0	1	0	3.97

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
2013	1	0.90	1.12	0.01 - 6.21	Same as

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 (2013): 20

Number of reported Healthcare-Associated Infections:

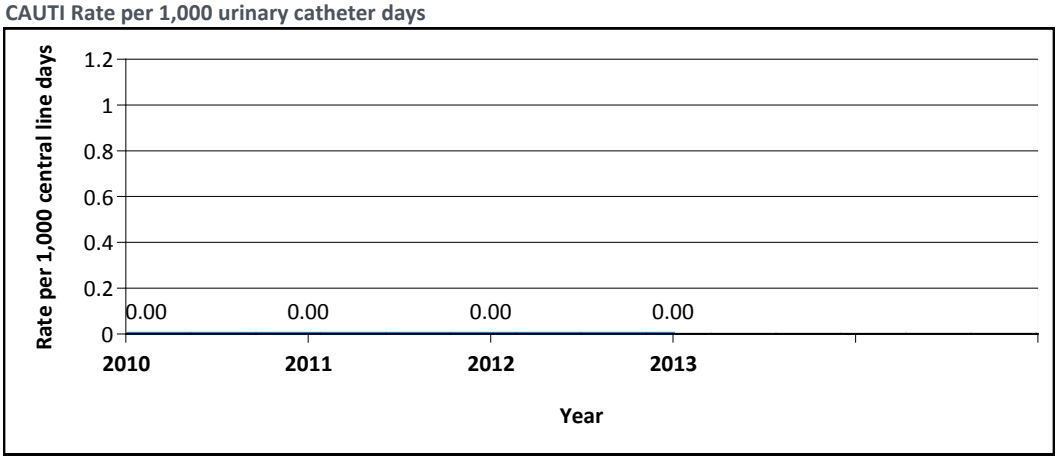
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008												
2009												
2010	1,611	0	0	0	0	0	0	6	0	0	0	3.72
2011	1,913	0	0	0	0	0	0	2	0	1	0	1.57
2012	2,052	0	0	0	0	0	0	5	0	0	0	2.44
2013	1,941	0	0	0	0	0	0	2	0	0	0	1.03

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
2013	0	1.19	0.00	0 - 3.09	Same as

CAUTI Rate per 1,000 urinary catheter days



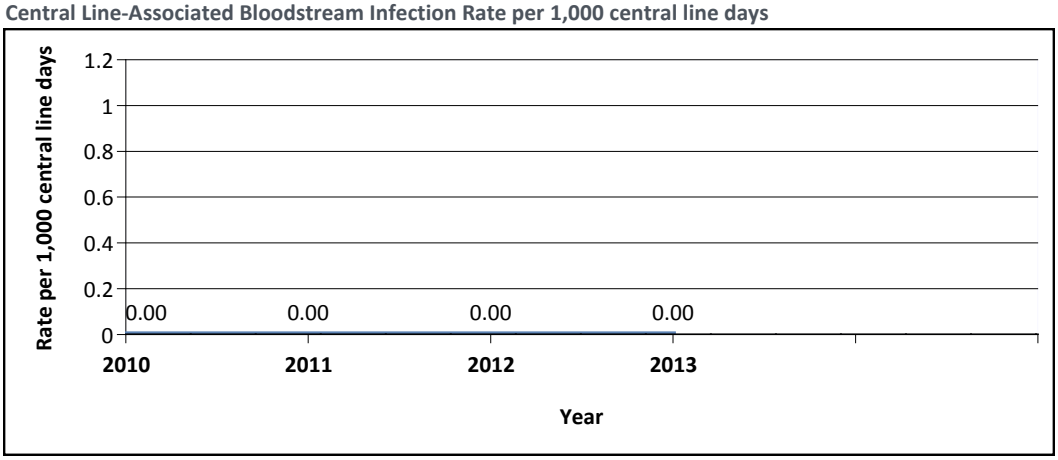
SURGICAL SPECIALTY CENTER AT COORDINATED HEALTH, THE

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
2013	0	0.02	0.00	0 - 217.32	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 (2013): 721

Number of reported Healthcare-Associated Infections:

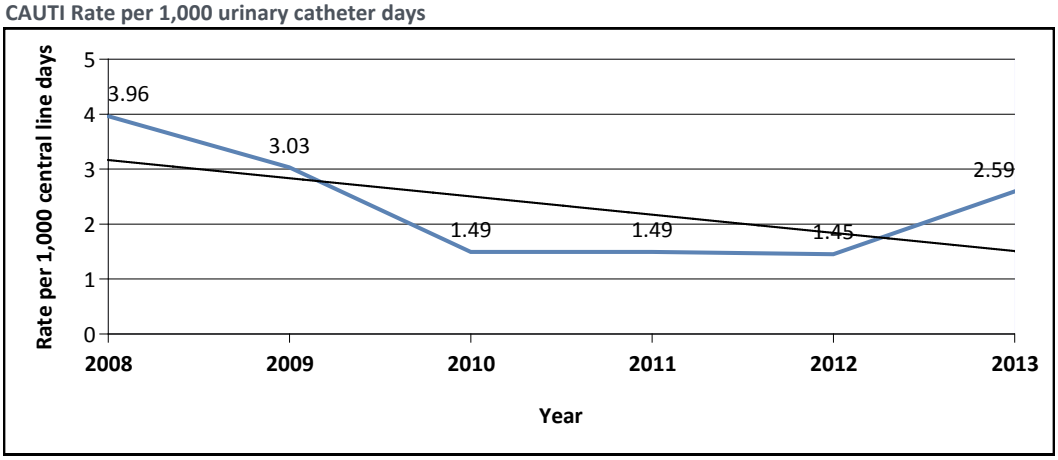
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	69,633	66	0	37	19	26	0	47	13	86	8	4.34
2009	196,477	126	6	74	49	76	0	101	8	141	11	3.01
2010	141,832	108	2	72	36	64	1	78	8	65	4	3.09
2011	145,364	62	3	46	16	65	0	60	9	69	0	2.27
2012	152,814	27	2	21	18	50	0	62	10	67	2	1.69
2013	143,434	37	1	51	12	29	0	66	7	95	0	2.08

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
2013	79	63.91	1.24	0.98 - 1.54	Same as

CAUTI Rate per 1,000 urinary catheter days



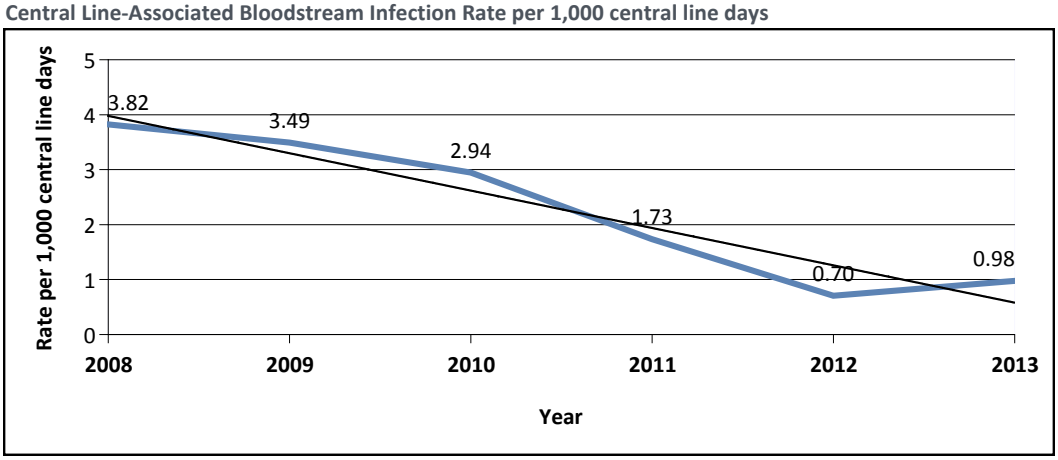
TEMPLE UNIVERSITY HOSPITAL

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
2013	24	19.88	1.21	0.77 - 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	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
2013	0	1.32	0.00	0 - 2.78	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
2013	2	6.28	0.32	0.04 - 1.15	Same as

THE GOOD SAMARITAN HOSPITAL

NHSN ID: 11712

Hospital type: Acute care general hospital

Number of licensed beds (2013): 172

Number of reported Healthcare-Associated Infections:

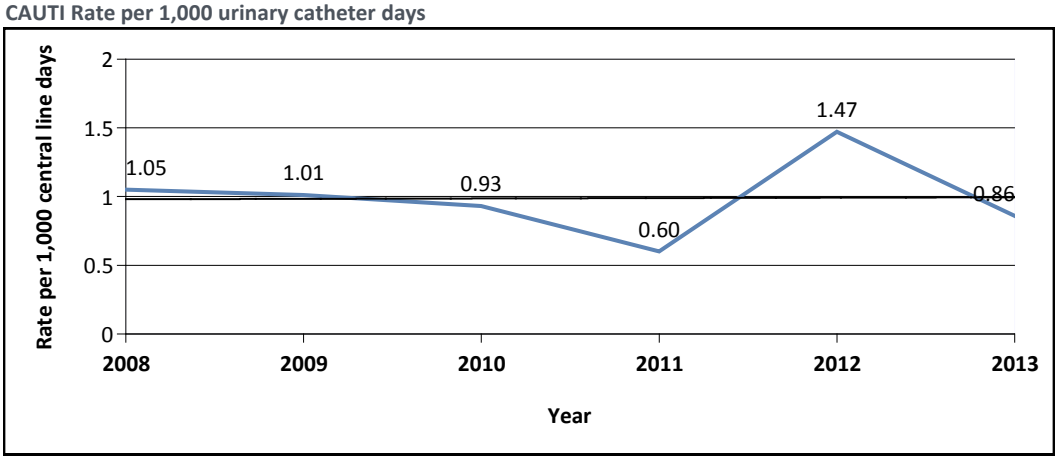
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	22,238	7	4	7	3	3	0	20	7	14	0	2.92
2009	44,601	11	0	11	3	10	0	40	14	26	1	2.60
2010	41,180	11	1	22	3	13	0	20	8	26	4	2.62
2011	42,849	4	1	16	2	9	0	14	5	25	1	1.80
2012	39,790	7	0	11	0	4	0	14	1	26	0	1.58
2013	38,759	7	0	4	1	14	0	15	2	10	1	1.39

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
2013	6	10.59	0.57	0.21 - 1.23	Same as

CAUTI Rate per 1,000 urinary catheter days



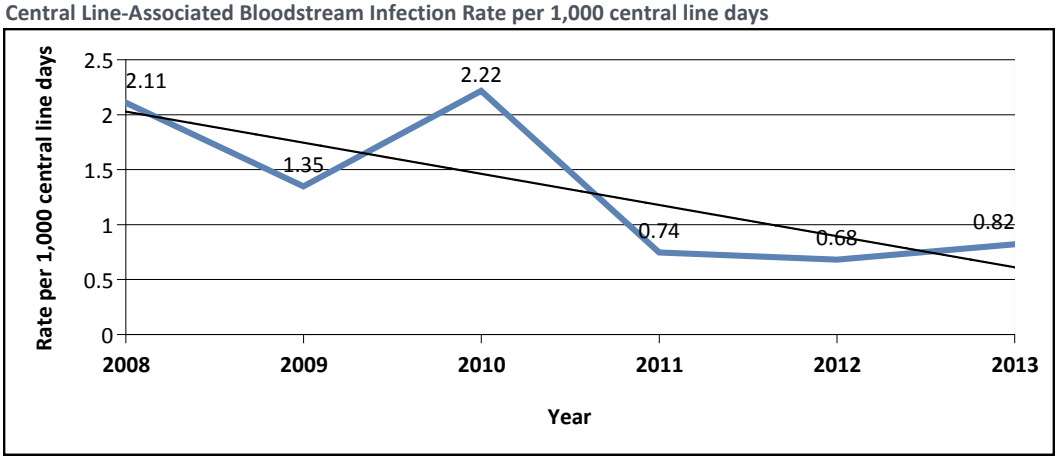
THE GOOD SAMARITAN HOSPITAL

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
2013	4	3.28	1.22	0.33 - 3.12	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 (2013): 106

Number of reported Healthcare-Associated Infections:

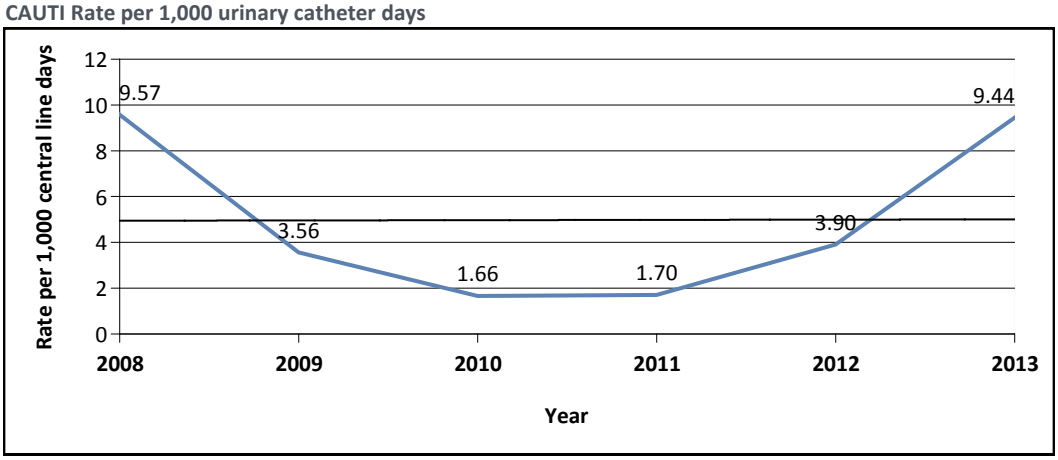
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	11,331	3	0	4	0	0	0	0	0	24	0	2.74
2009	23,931	5	0	9	2	0	0	0	2	32	0	2.09
2010	24,553	4	1	9	0	0	0	0	4	19	0	1.51
2011	29,920	4	1	3	0	1	0	0	4	24	0	1.24
2012	28,461	4	7	10	7	8	0	0	7	44	0	3.06
2013	28,995	4	22	8	5	7	0	0	16	62	0	4.28

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
2013	15	2.35	6.37	3.56 - 10.51	Worse

CAUTI Rate per 1,000 urinary catheter days



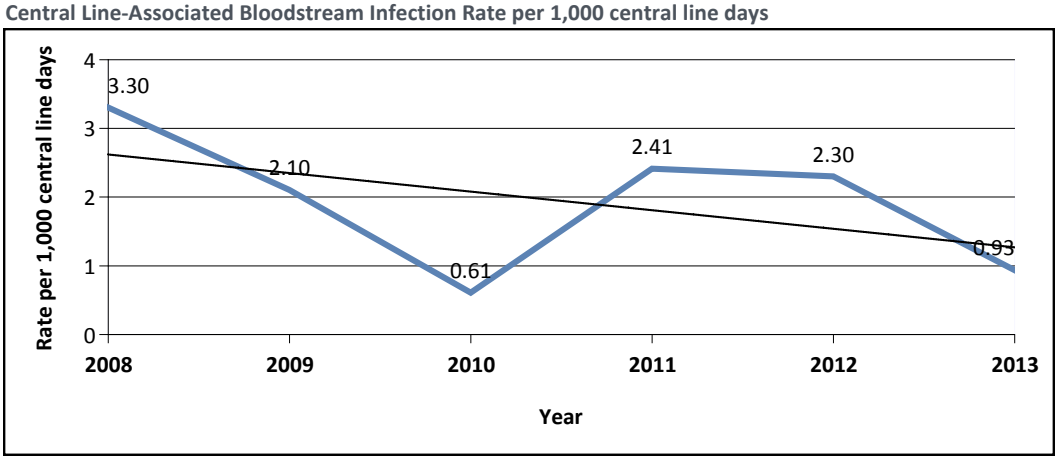
THE GOOD SHEPHERD REHABILITATION HOSPITAL

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
2013	1	0.72	1.39	0.02 - 7.72	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 (2013): 107

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
2013	32,222	0	2	0	0	0	1	0	2	0	0	0.16

THE WASHINGTON HOSPITAL

NHSN ID: 11460

Hospital type: Acute care general hospital

Number of licensed beds (2013): 260

Number of reported Healthcare-Associated Infections:

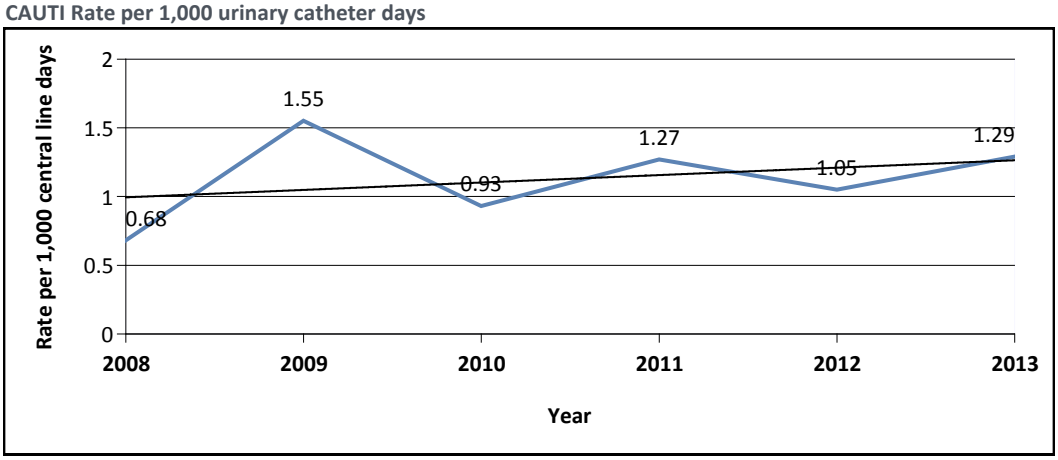
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	33,570	1	0	8	0	12	0	23	1	10	0	1.64
2009	68,588	0	0	30	1	34	0	38	0	37	0	2.04
2010	65,063	0	0	27	0	23	0	37	1	24	0	1.72
2011	62,228	3	0	22	1	21	0	31	0	28	0	1.70
2012	54,486	4	1	23	0	8	0	36	1	16	0	1.63
2013	54,165	1	1	30	0	14	0	29	2	26	0	1.90

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
2013	11	17.71	0.62	0.31 - 1.11	Same as

CAUTI Rate per 1,000 urinary catheter days



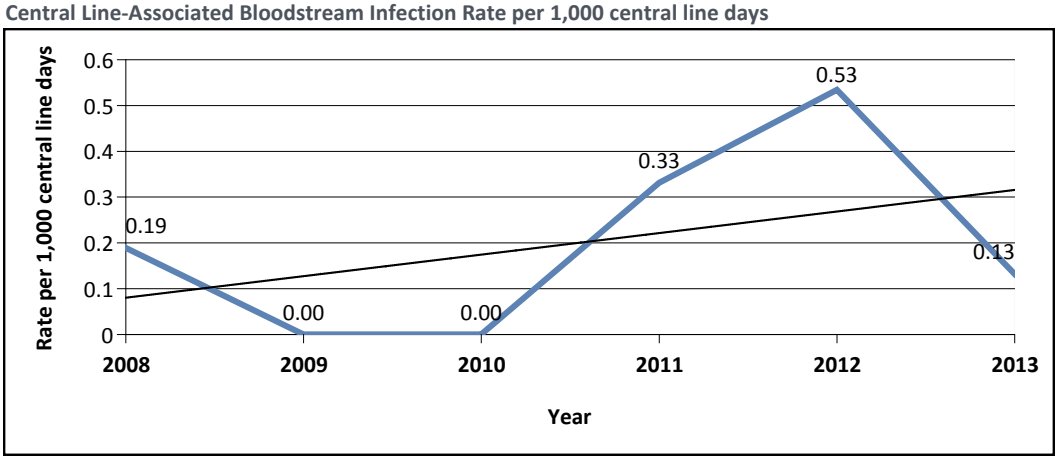
THE WASHINGTON HOSPITAL

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
2013	1	6.12	0.16	0 - 0.91	Better

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 (2013): 308

Number of reported Healthcare-Associated Infections:

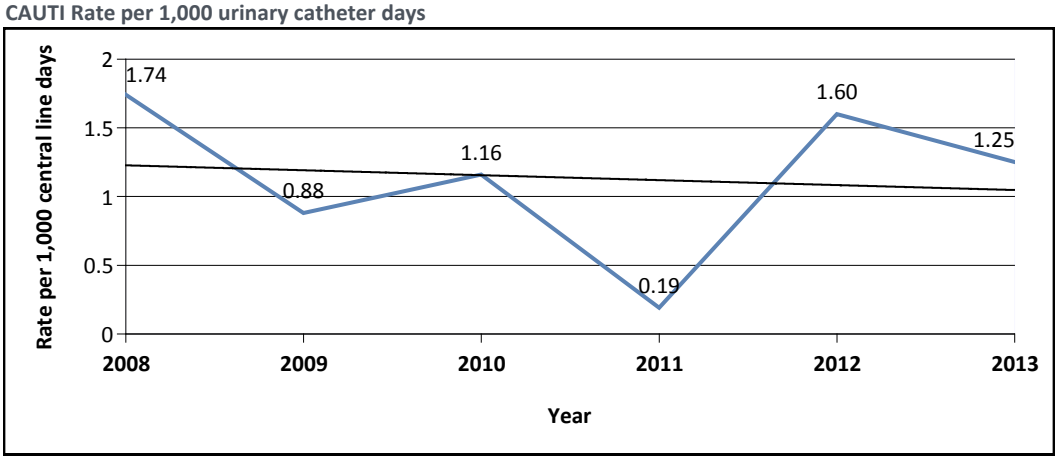
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	45,683	33	3	24	9	14	1	43	5	27	0	3.48
2009	98,066	54	1	59	29	46	0	88	4	28	0	3.15
2010	88,109	65	9	65	20	26	0	57	2	33	1	3.16
2011	41,736	32	1	24	11	1	0	17	1	10	0	2.32
2012	53,366	31	4	32	10	14	0	31	2	19	0	2.68
2013	57,409	19	2	26	15	9	0	39	8	27	0	2.53

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
2013	8	13.23	0.60	0.26 - 1.19	Same as

CAUTI Rate per 1,000 urinary catheter days



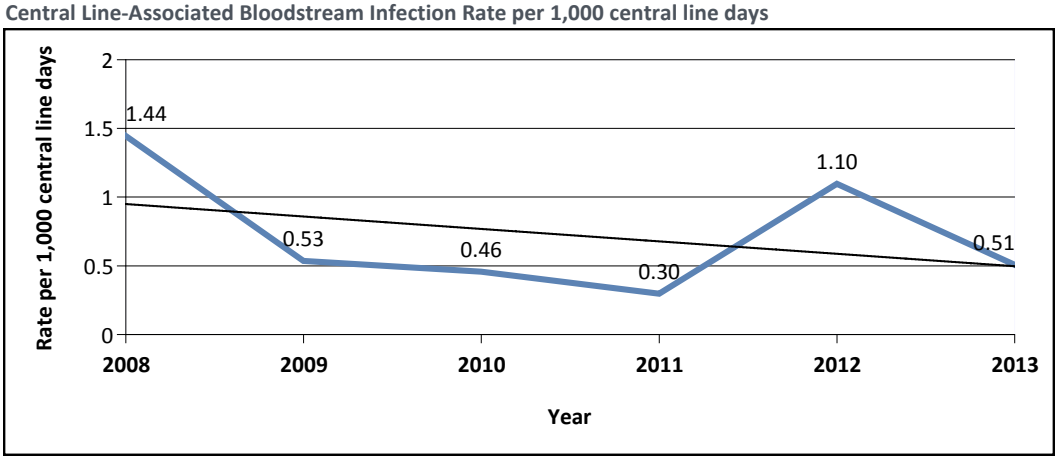
THE WESTERN PENNSYLVANIA HOSPITAL

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
2013	4	6.38	0.63	0.17 - 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	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
2013	2	3.83	0.52	0.06 - 1.89	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
2013	2	8.08	0.25	0.03 - 0.89	Better

THOMAS JEFFERSON UNIV HOSP - METHODIST

NHSN ID: 12017

Hospital type: Acute care general hospital

Number of licensed beds (2013): 198

Number of reported Healthcare-Associated Infections:

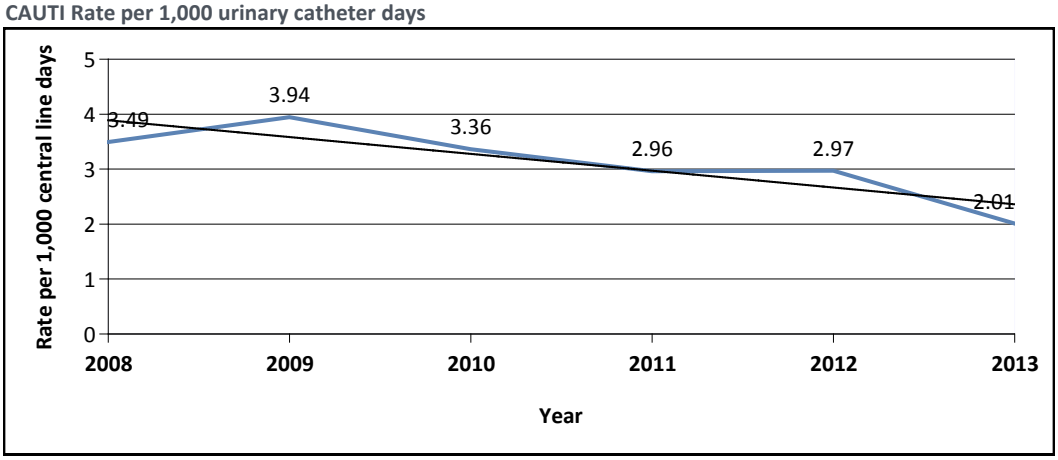
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	28,703	23	0	16	1	23	0	6	4	33	0	3.69
2009	53,925	26	0	42	3	36	0	24	2	61	0	3.60
2010	48,856	13	0	9	2	38	0	21	5	48	0	2.78
2011	46,785	28	1	29	2	55	0	17	7	42	0	3.87
2012	48,112	12	2	45	7	42	0	20	8	41	1	3.70
2013	46,661	20	2	41	3	17	0	21	12	39	0	3.32

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
2013	13	13.44	0.97	0.51 - 1.65	Same as

CAUTI Rate per 1,000 urinary catheter days



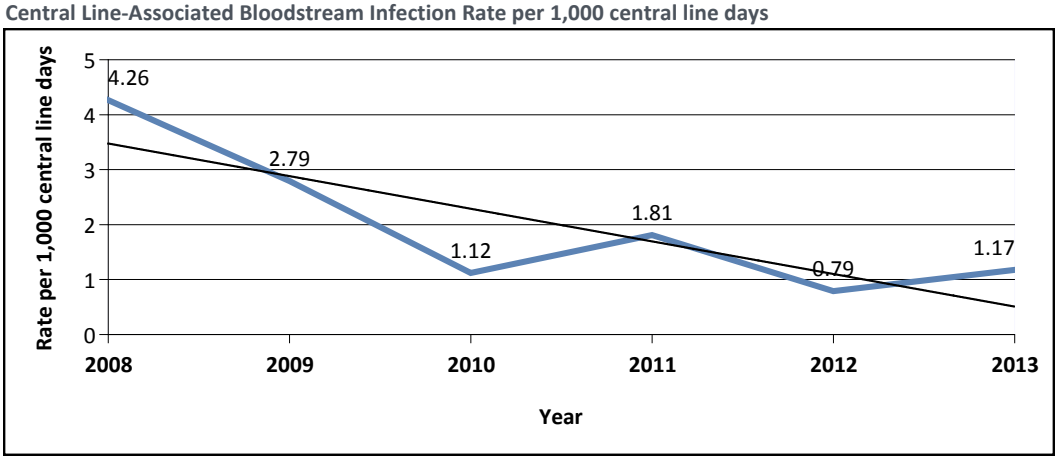
THOMAS JEFFERSON UNIV HOSP - METHODIST

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
2013	8	5.52	1.45	0.62 - 2.86	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 (2013): 757

Number of reported Healthcare-Associated Infections:

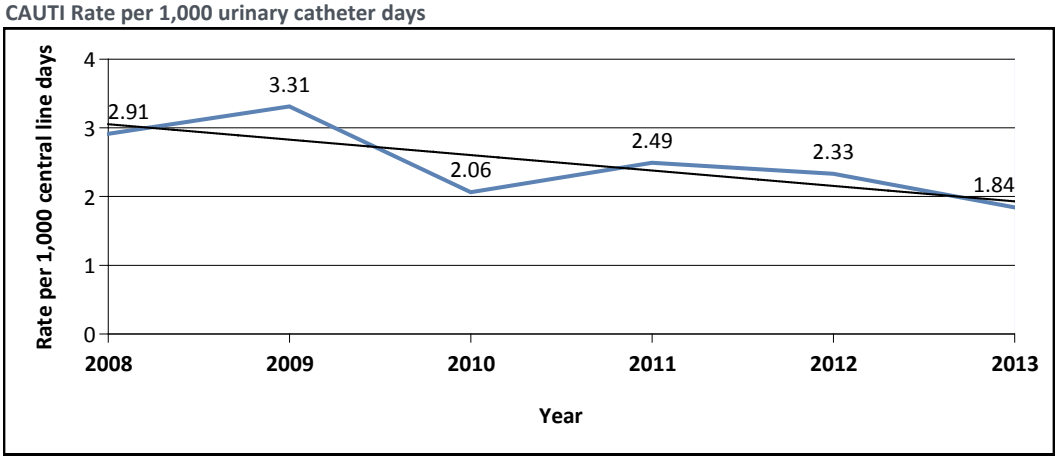
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	86,260	37	0	92	0	66	0	146	0	105	1	5.18
2009	191,315	53	0	146	0	124	0	301	0	241	0	4.52
2010	176,486	33	0	155	0	88	0	272	0	219	0	4.35
2011	192,353	56	1	130	0	64	0	253	6	203	2	3.72
2012	199,428	106	10	145	17	72	7	306	19	177	10	4.36
2013	196,126	113	18	148	9	49	12	269	26	159	3	4.11

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
2013	97	111.25	0.87	0.71 - 1.06	Same as

CAUTI Rate per 1,000 urinary catheter days



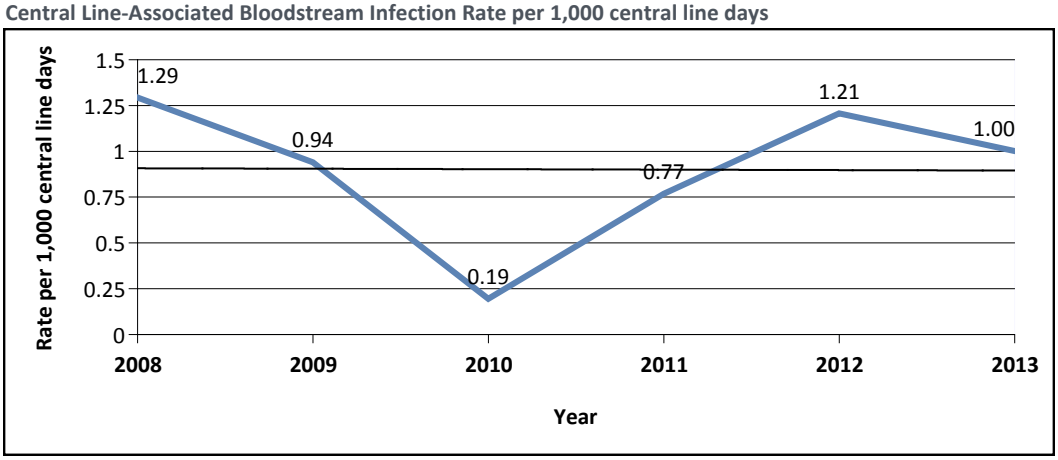
THOMAS JEFFERSON UNIV HOSPITAL

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
2013	44	35.49	1.24	0.9 - 1.66	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	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
2013	2	1.88	1.06	0.12 - 3.84	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
2013	17	15.96	1.07	0.62 - 1.71	Same as

TITUSVILLE AREA HOSPITAL

NHSN ID: 11738

Hospital type: Acute care general hospital

Number of licensed beds (2013): 72

Number of reported Healthcare-Associated Infections:

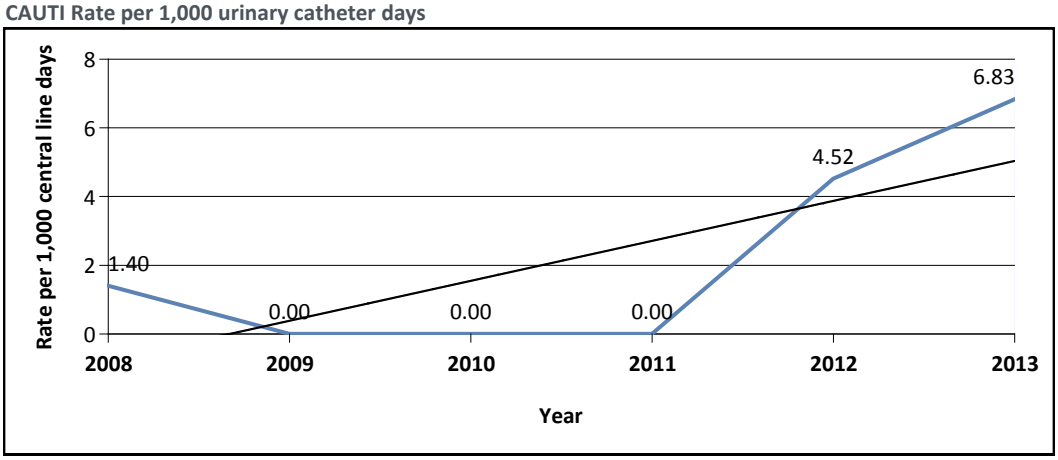
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,690	0	0	0	0	3	0	2	0	1	0	1.28
2009	8,960	1	0	0	0	0	0	2	0	0	0	0.33
2010	8,438	0	0	0	0	2	0	2	0	0	0	0.47
2011	7,822	0	0	0	0	0	0	5	2	0	0	0.89
2012	7,565	0	1	0	0	0	0	7	0	4	0	1.59
2013	6,554	2	0	1	0	1	0	4	0	8	0	2.44

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
2013	6	1.33	4.52	1.65 - 9.83	Worse

CAUTI Rate per 1,000 urinary catheter days



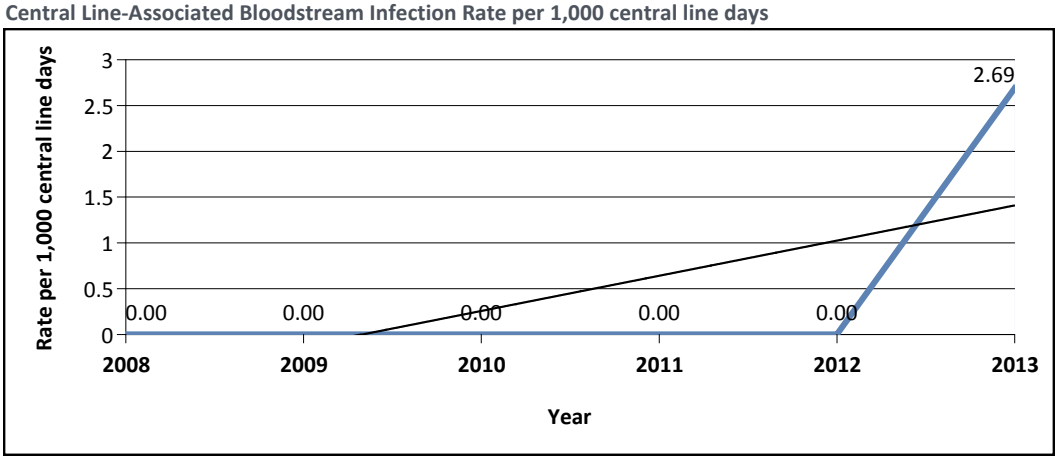
TITUSVILLE AREA HOSPITAL

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
2013	1	0.25	3.99	0.05 - 22.21	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 (2013): 351

Number of reported Healthcare-Associated Infections:

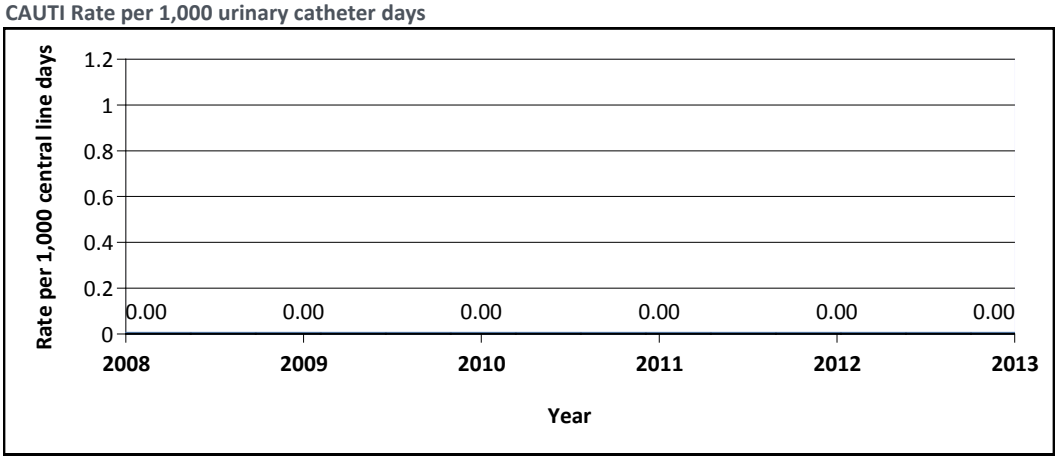
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	202	1	16	0	1	7	0	0	3	12	0	198.02
2009	104,610	0	15	1	0	2	0	0	8	15	0	0.39
2010	103,015	0	8	0	2	1	1	0	12	13	0	0.36
2011	109,720	0	7	1	0	1	1	0	20	12	1	0.39
2012	113,753	1	11	0	0	3	0	0	18	12	0	0.40
2013	33,243	0	1	0	0	0	0	0	5	0	0	0.18

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
2013	0	0.01	0.00	0 - 309.33	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 (2013): 25

Number of reported Healthcare-Associated Infections:

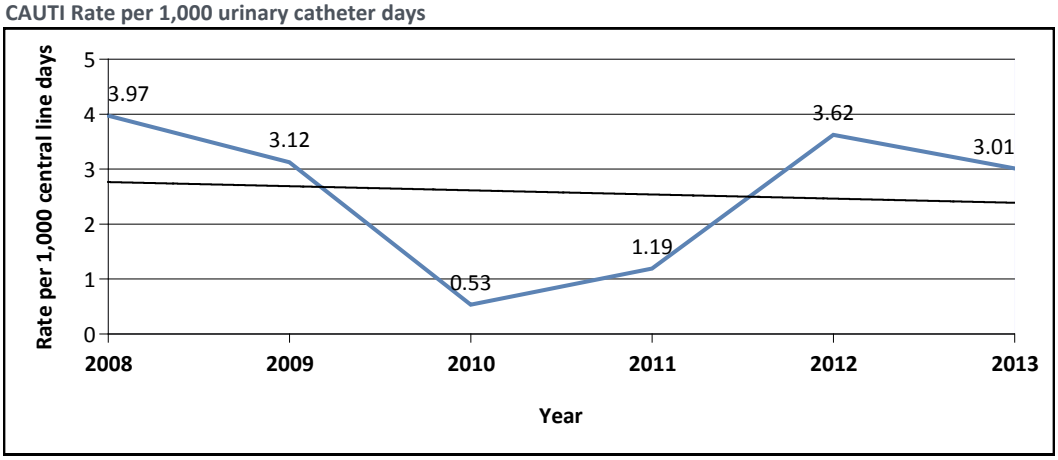
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,645	0	0	0	0	4	0	0	0	4	0	2.19
2009	7,341	5	0	0	0	0	0	0	1	8	0	1.91
2010	7,457	0	0	5	1	0	0	0	0	2	0	1.07
2011	7,358	1	0	1	2	1	0	1	2	4	0	1.63
2012	7,782	2	0	0	1	6	0	0	2	8	0	2.44
2013	7,100	3	0	1	0	0	0	1	0	3	1	1.27

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
2013	3	1.51	1.99	0.4 - 5.82	Same as

CAUTI Rate per 1,000 urinary catheter days



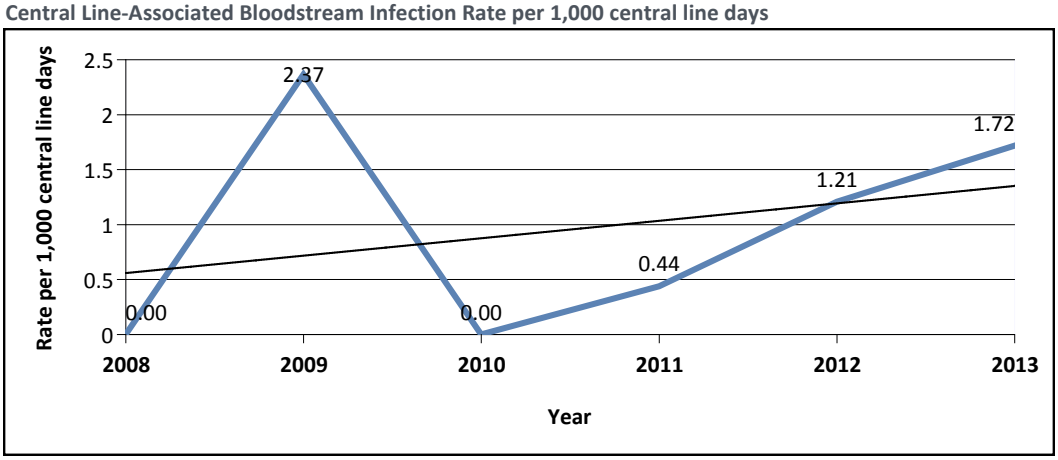
TROY COMMUNITY HOSPITAL

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
2013	3	1.17	2.56	0.51 - 7.47	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 (2013): 48

Number of reported Healthcare-Associated Infections:

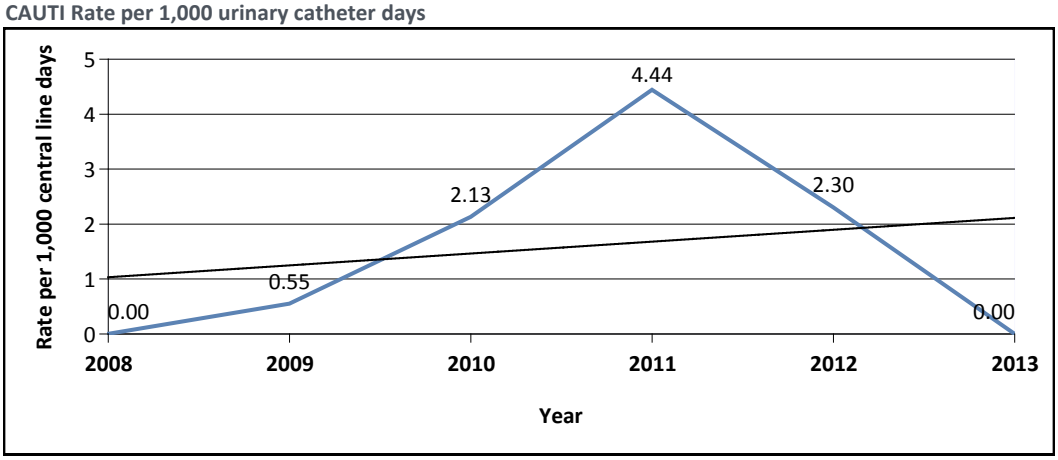
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	4,006	0	0	0	0	4	0	1	0	0	0	1.25
2009	7,911	0	0	0	0	3	0	1	0	1	0	0.63
2010	6,047	0	0	0	0	2	0	4	0	4	0	1.65
2011	6,054	0	0	0	1	3	0	4	2	8	0	2.97
2012	5,258	0	0	1	0	0	0	0	0	4	0	0.95
2013	5,653	1	0	0	0	0	0	0	0	2	0	0.53

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
2013	0	0.66	0.00	0 - 5.52	Same as

CAUTI Rate per 1,000 urinary catheter days



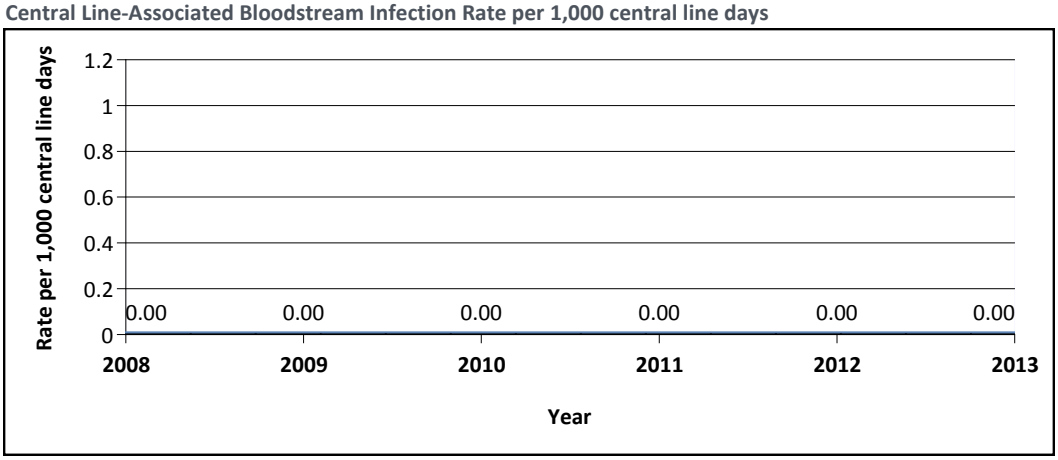
TYLER MEMORIAL HOSPITAL

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
2013	0	0.14	0.00	0 - 26.04	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 (2013): 25

Number of reported Healthcare-Associated Infections:

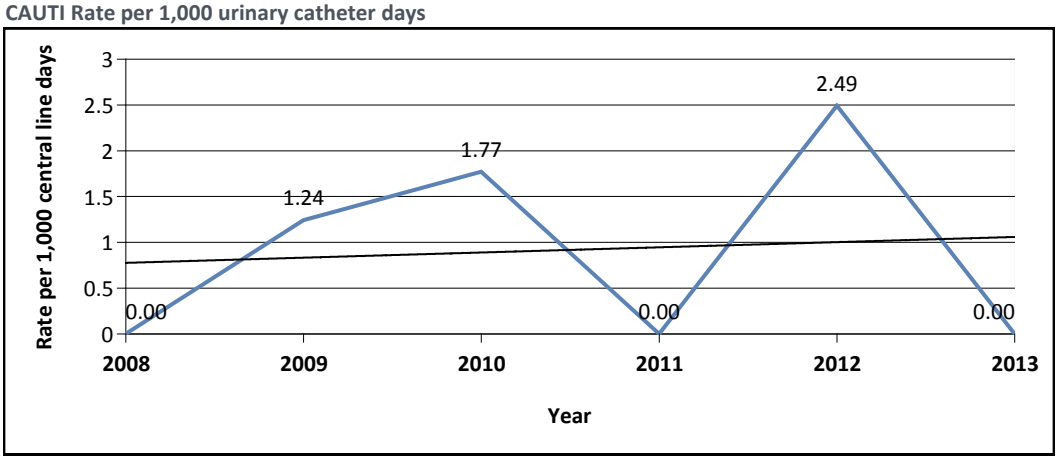
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	1,773	0	0	0	0	0	0	0	0	0	0	0.00
2009	2,786	0	0	0	0	0	0	0	0	1	0	0.36
2010	2,567	0	0	0	0	0	0	3	0	1	0	1.56
2011	2,672	0	0	0	0	0	0	4	1	0	0	1.87
2012	2,809	0	0	1	0	0	0	5	0	1	0	2.49
2013	2,668	0	0	0	0	0	0	1	0	0	0	0.37

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
2013	0	0.53	0.00	0 - 6.96	Same as

CAUTI Rate per 1,000 urinary catheter days



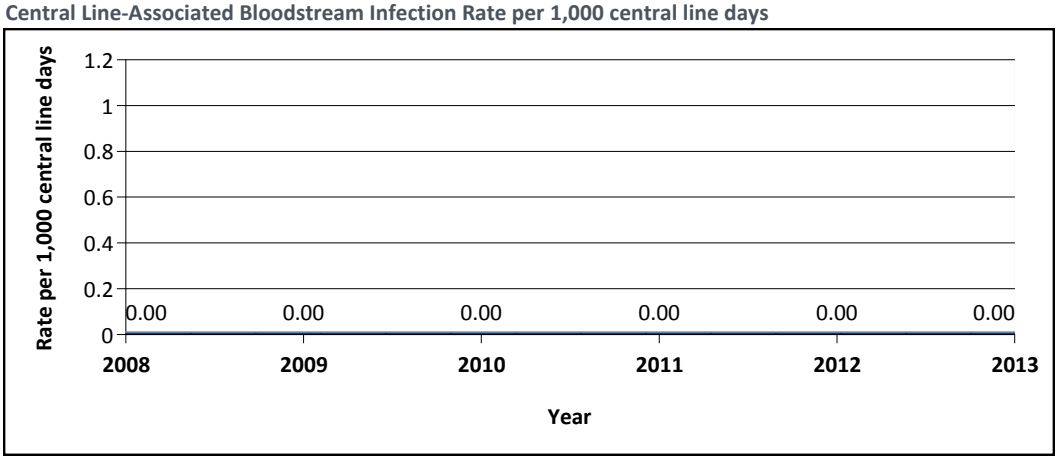
TYRONE HOSPITAL

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
2013	0	0.10	0.00	0 - 38.09	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 (2013): 175

Number of reported Healthcare-Associated Infections:

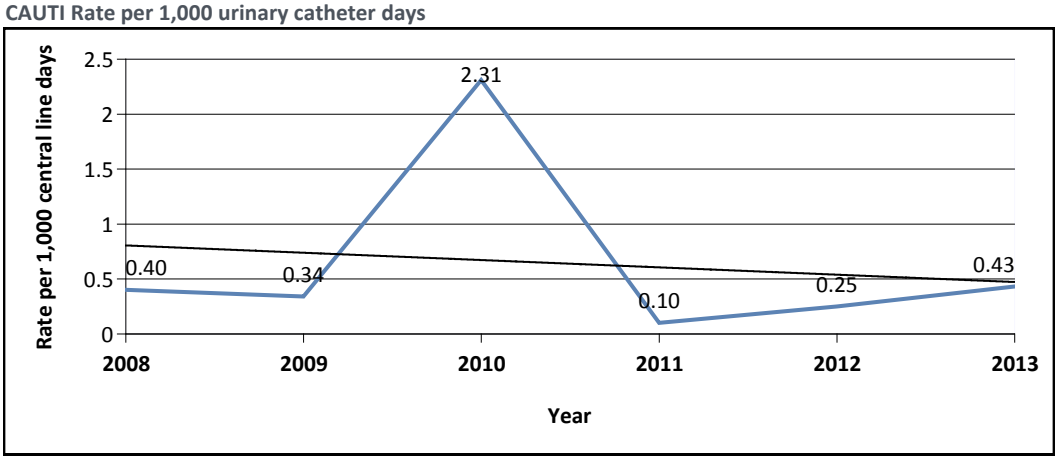
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	22,142	1	0	15	0	3	0	10	0	2	0	1.40
2009	54,030	0	1	35	1	4	0	23	1	6	0	1.31
2010	46,143	2	0	37	0	12	0	34	3	24	1	2.45
2011	42,132	3	0	32	1	10	0	29	1	11	0	2.06
2012	39,143	4	0	24	0	12	2	30	0	13	0	2.17
2013	43,957	4	0	12	1	9	1	23	0	14	1	1.48

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
2013	5	24.42	0.20	0.07 - 0.48	Better

CAUTI Rate per 1,000 urinary catheter days



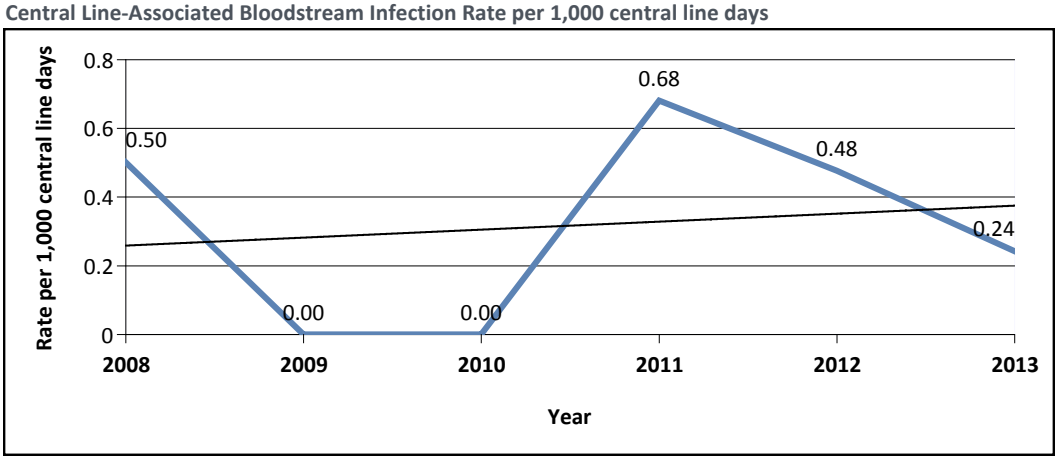
UNIONTOWN HOSPITAL

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
2013	1	3.34	0.30	0 - 1.66	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 (2013): 49

Number of reported Healthcare-Associated Infections:

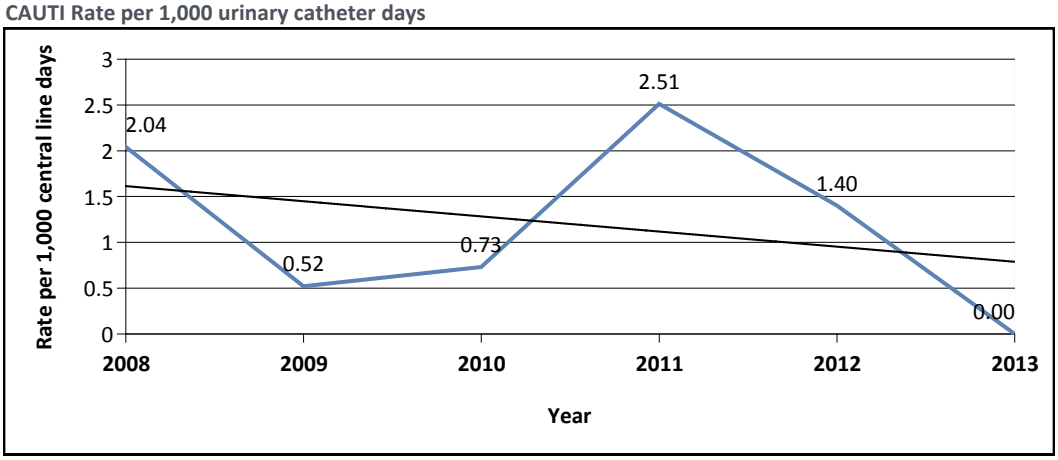
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,665	0	0	4	0	0	1	4	1	2	0	3.27
2009	7,351	2	0	5	0	1	0	4	0	1	0	1.77
2010	6,977	0	0	1	0	2	0	6	0	1	0	1.43
2011	6,685	0	0	0	0	0	0	6	0	3	0	1.35
2012	6,670	1	0	2	0	2	0	6	0	2	0	1.95
2013	7,301	0	0	0	0	2	0	5	0	1	0	1.10

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
2013	0	2.53	0.00	0 - 1.45	Same as

CAUTI Rate per 1,000 urinary catheter days



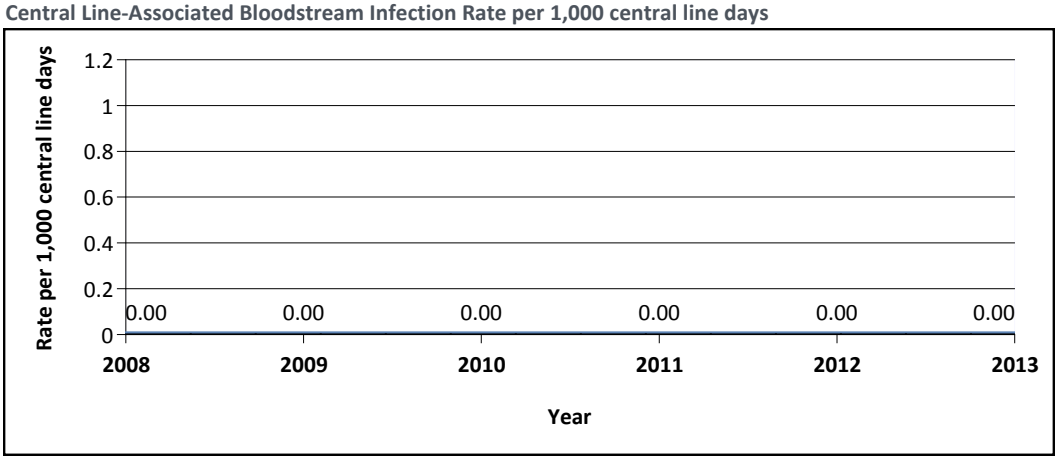
UPMC BEDFORD

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
2013	0	0.26	0.00	0 - 13.97	Same as

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



UPMC EAST

NHSN ID: 28812

Hospital type:

Number of licensed beds (2013): 156

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												
2013	29,712	13	0	8	0	1	0	10	1	10	0	1.45

UPMC HAMOT

NHSN ID: 11725

Hospital type: Acute care general hospital

Number of licensed beds (2013): 446

Number of reported Healthcare-Associated Infections:

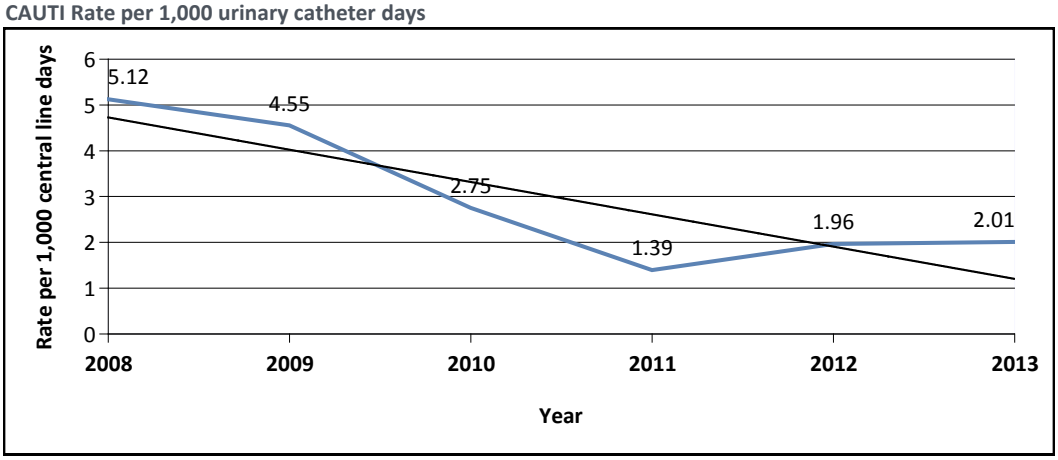
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	39,577	9	0	16	3	15	0	44	1	62	0	3.79
2009	82,906	14	0	59	8	42	0	87	17	125	0	4.25
2010	81,512	13	1	59	3	45	0	84	16	92	2	3.86
2011	87,580	13	4	33	2	38	0	105	5	43	1	2.79
2012	87,032	16	1	40	2	49	0	108	10	63	0	3.32
2013	92,583	35	6	66	1	45	2	114	18	88	1	4.06

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
2013	47	49.31	0.95	0.7 - 1.27	Same as

CAUTI Rate per 1,000 urinary catheter days



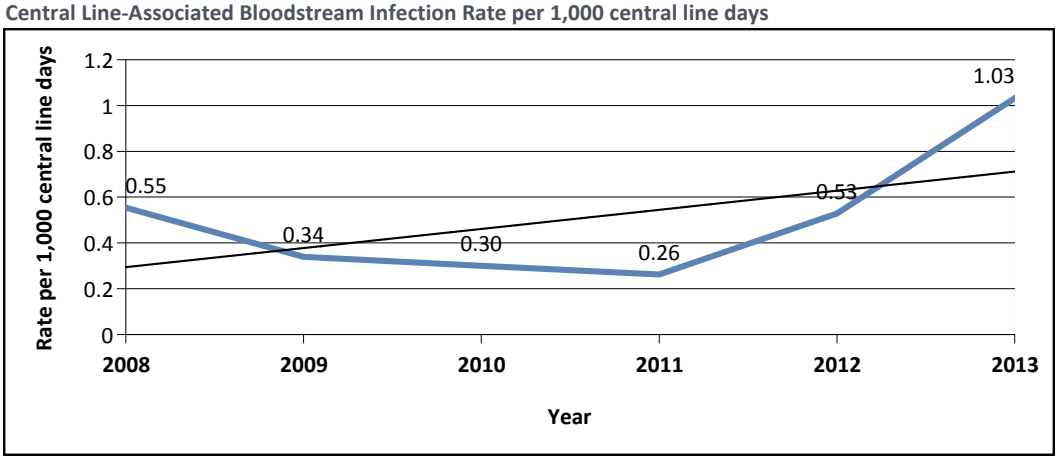
UPMC HAMOT

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
2013	24	18.79	1.28	0.82 - 1.9	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
2013	0	1.07	0.00	0 - 3.41	Same as

UPMC HORIZON

NHSN ID: 11675

Hospital type: Acute care general hospital

Number of licensed beds (2013): 171

Number of reported Healthcare-Associated Infections:

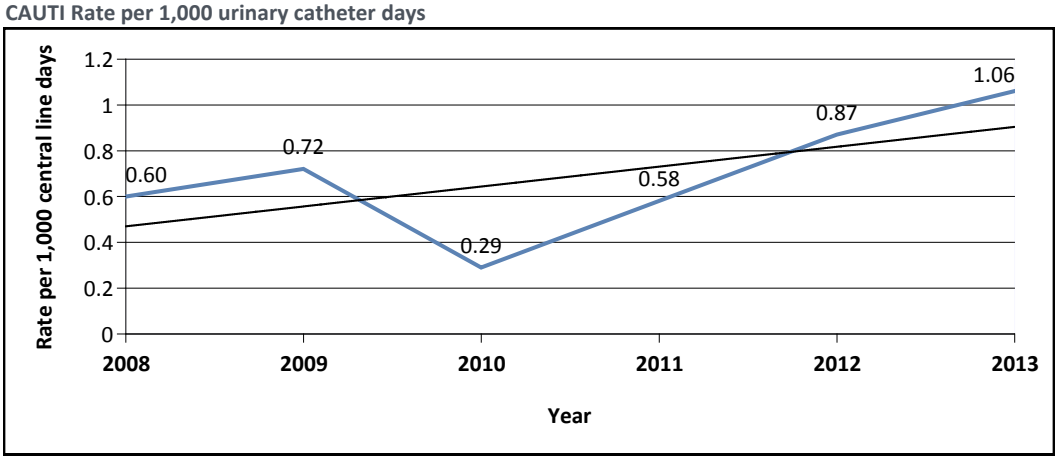
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	19,278	4	0	11	0	8	0	10	0	6	0	2.02
2009	39,194	8	0	24	1	49	0	32	1	11	0	3.21
2010	40,285	3	0	8	0	22	0	32	2	7	0	1.84
2011	34,976	2	0	2	0	30	0	24	4	6	0	1.94
2012	34,860	1	0	9	0	28	0	25	0	11	0	2.12
2013	32,503	3	0	16	0	16	0	29	1	14	0	2.43

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
2013	7	13.84	0.51	0.2 - 1.04	Same as

CAUTI Rate per 1,000 urinary catheter days



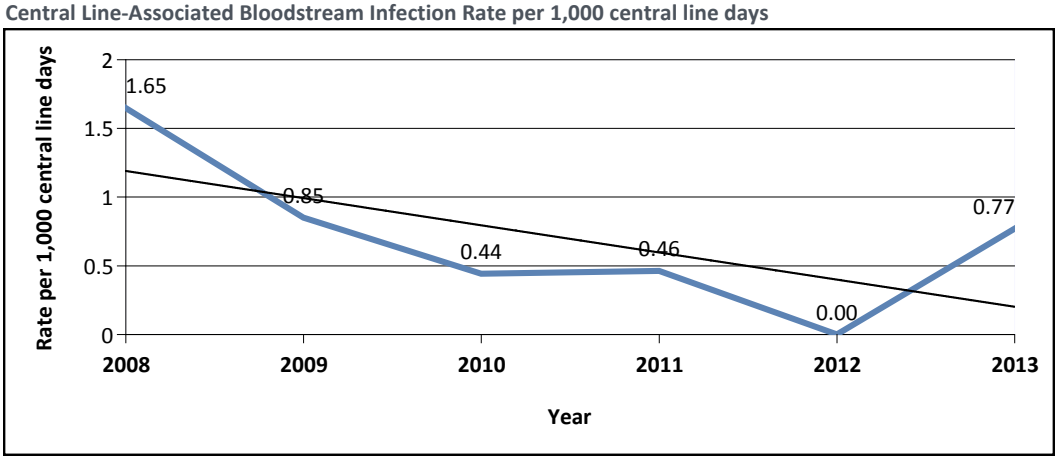
UPMC HORIZON

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
2013	3	3.15	0.95	0.19 - 2.78	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 (2013): 198

Number of reported Healthcare-Associated Infections:

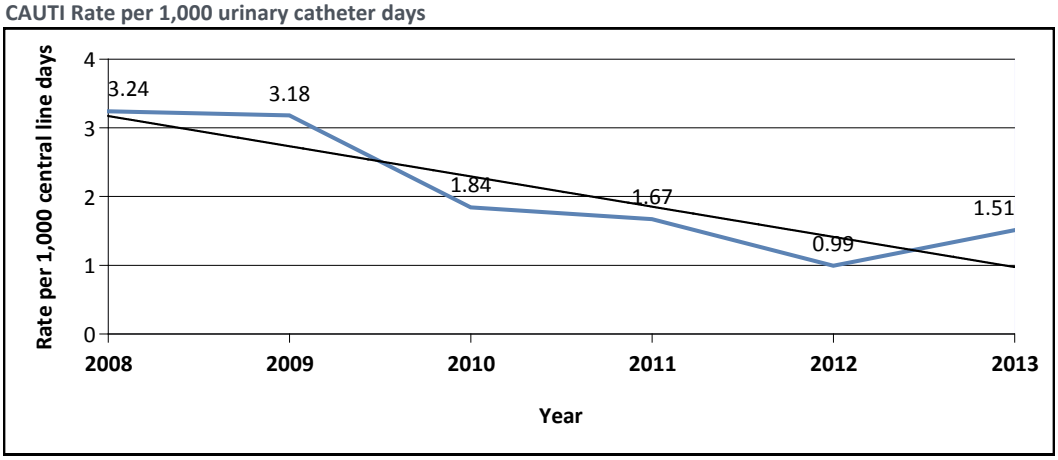
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	21,456	5	0	21	0	9	0	5	4	31	0	3.50
2009	54,051	11	2	63	1	26	0	30	8	46	0	3.46
2010	62,590	9	4	42	1	23	0	29	10	40	0	2.52
2011	64,473	6	0	24	0	30	1	26	6	36	0	2.00
2012	56,499	10	0	10	1	17	0	13	6	30	0	1.54
2013	53,354	8	0	10	3	15	0	13	7	36	0	1.72

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
2013	9	12.35	0.73	0.33 - 1.38	Same as

CAUTI Rate per 1,000 urinary catheter days



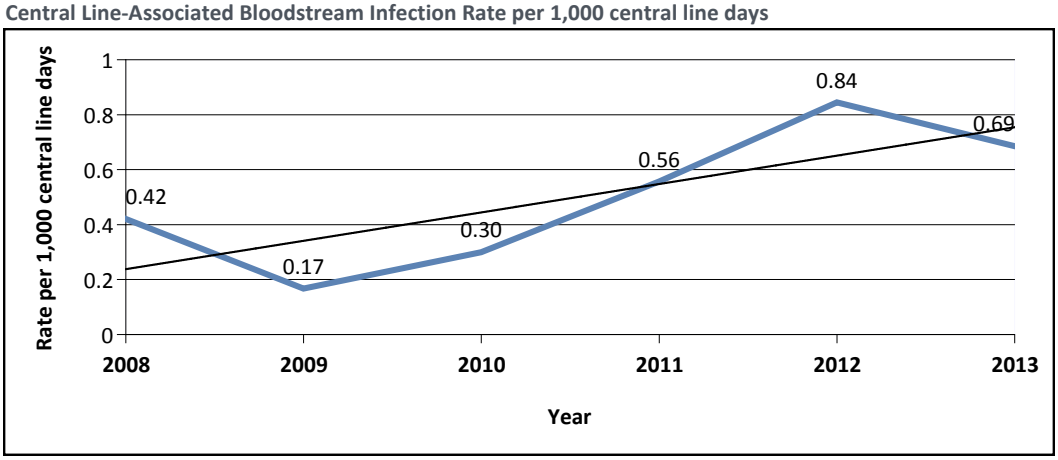
UPMC MCKEESPORT

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
2013	4	4.72	0.85	0.23 - 2.17	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 (2013): 495

Number of reported Healthcare-Associated Infections:

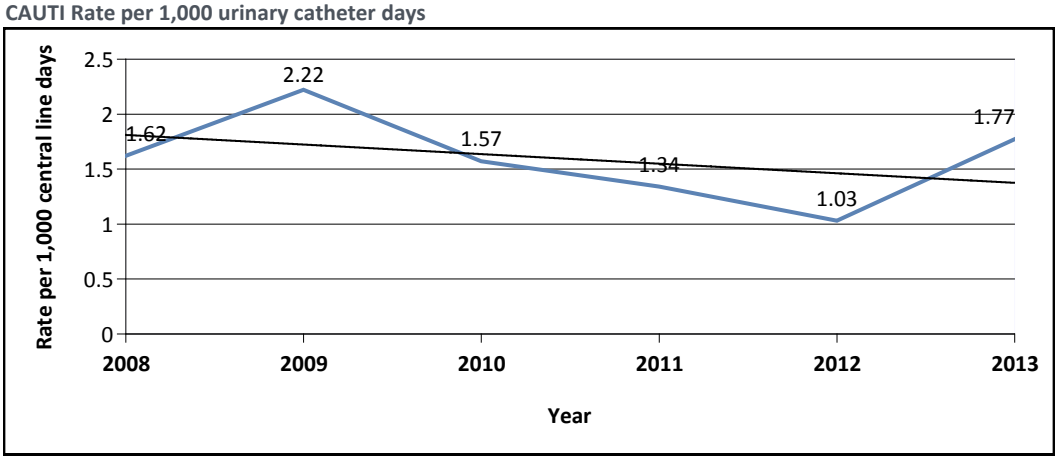
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	48,782	17	0	47	1	30	0	33	1	42	4	3.59
2009	120,160	77	0	78	8	85	0	112	5	107	2	3.94
2010	145,652	24	1	54	25	80	1	123	10	111	2	2.96
2011	144,046	12	1	28	7	57	0	93	4	93	4	2.08
2012	147,425	33	3	50	2	39	0	131	7	116	4	2.61
2013	139,206	22	2	47	7	12	0	87	2	138	3	2.30

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
2013	49	57.89	0.85	0.63 - 1.12	Same as

CAUTI Rate per 1,000 urinary catheter days



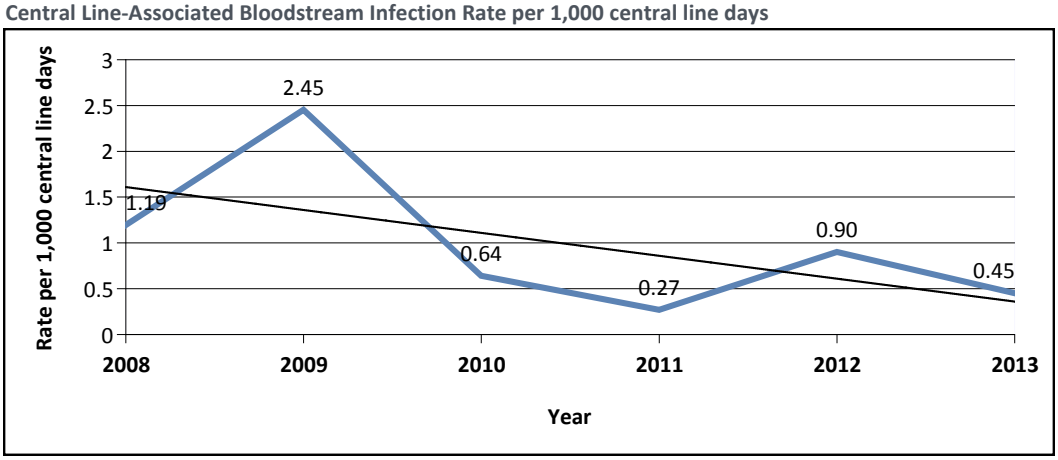
UPMC MERCY

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
2013	11	19.79	0.56	0.28 - 0.99	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	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
2013	0	0.03	0.00	0 - 130.79	Same as

UPMC NORTHWEST

NHSN ID: 11837

Hospital type: Acute care general hospital

Number of licensed beds (2013): 164

Number of reported Healthcare-Associated Infections:

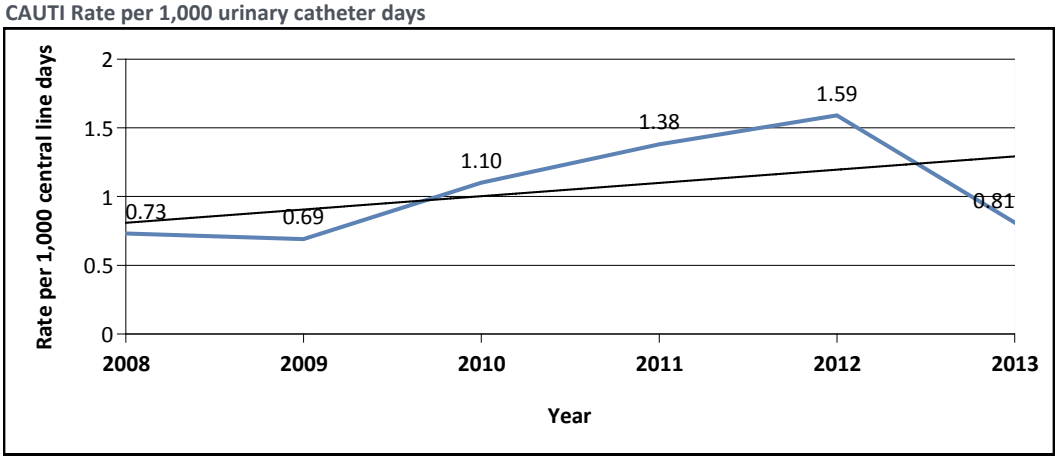
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	17,788	1	0	5	0	2	1	3	0	8	0	1.12
2009	41,211	8	0	20	0	6	0	24	0	5	0	1.53
2010	37,231	1	0	4	0	1	0	12	1	13	0	0.86
2011	35,676	2	0	7	0	4	0	13	0	21	0	1.32
2012	34,147	2	0	10	0	3	0	14	1	18	0	1.41
2013	33,929	2	1	9	2	10	0	11	2	16	1	1.59

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
2013	4	7.47	0.54	0.14 - 1.37	Same as

CAUTI Rate per 1,000 urinary catheter days



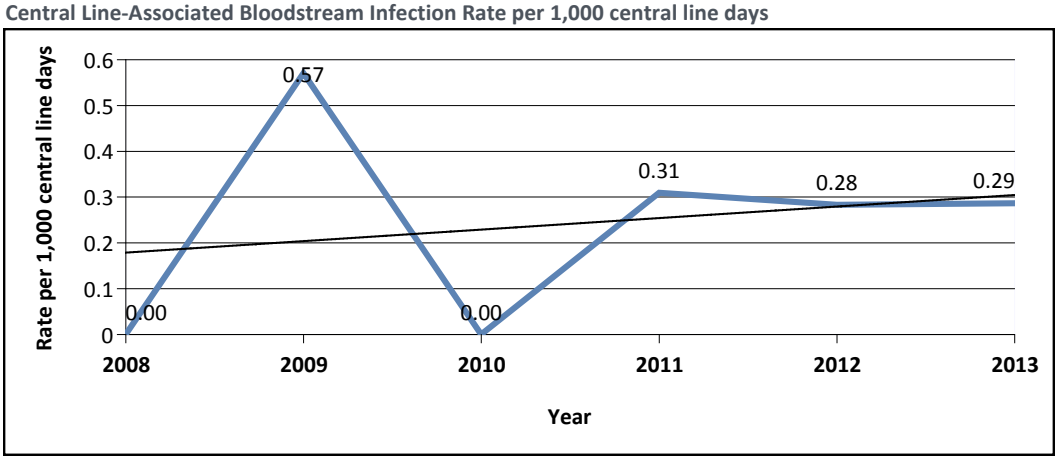
UPMC NORTHWEST

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
2013	1	2.35	0.43	0.01 - 2.37	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
2013	0	0.85	0.00	0 - 4.34	Same as

UPMC PASSAVANT

NHSN ID: 11242

Hospital type: Acute care general hospital

Number of licensed beds (2013): 413

Number of reported Healthcare-Associated Infections:

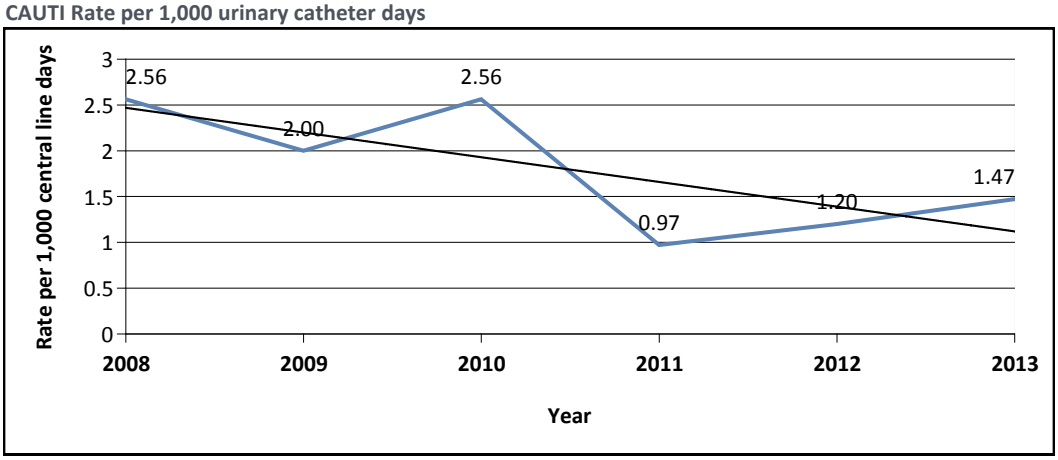
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	42,196	14	1	37	3	25	1	32	1	37	1	3.60
2009	87,432	25	2	92	7	48	0	84	1	76	0	3.83
2010	96,673	33	2	67	9	44	0	107	3	93	0	3.70
2011	105,433	15	0	67	8	48	0	138	5	74	0	3.37
2012	102,897	23	1	48	16	24	2	130	10	67	1	3.13
2013	100,207	26	9	68	5	29	1	124	3	86	2	3.52

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
2013	39	40.69	0.96	0.68 - 1.31	Same as

CAUTI Rate per 1,000 urinary catheter days



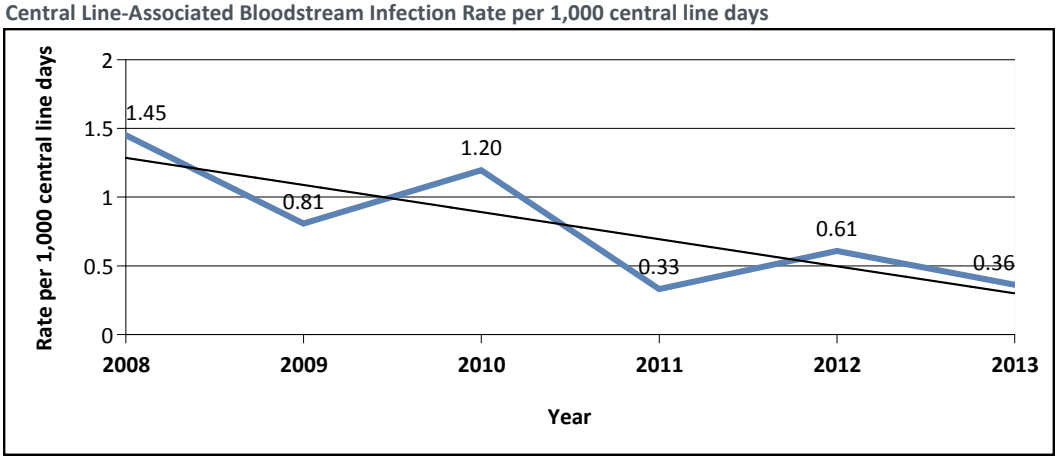
UPMC PASSAVANT

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
2013	8	14.83	0.54	0.23 - 1.06	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 (2013): 762

Number of reported Healthcare-Associated Infections:

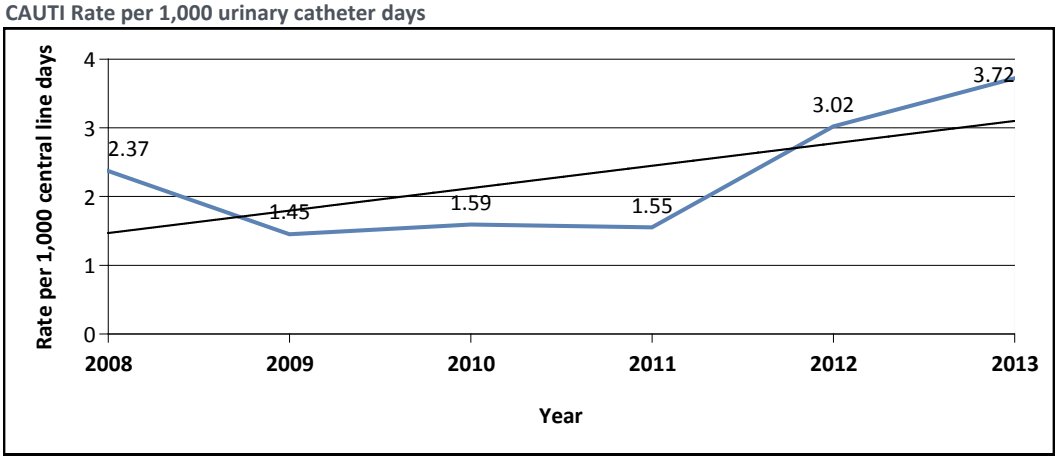
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	140,034	42	2	102	10	65	0	104	9	105	6	3.18
2009	215,188	83	6	138	27	139	0	254	12	159	17	3.88
2010	222,461	96	10	184	24	161	0	283	17	202	8	4.43
2011	224,769	95	13	150	27	198	0	315	17	193	13	4.54
2012	227,985	111	8	116	21	148	0	264	14	308	15	4.41
2013	221,480	94	8	192	23	91	0	278	37	436	30	5.37

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
2013	244	138.65	1.76	1.55 - 2	Worse

CAUTI Rate per 1,000 urinary catheter days



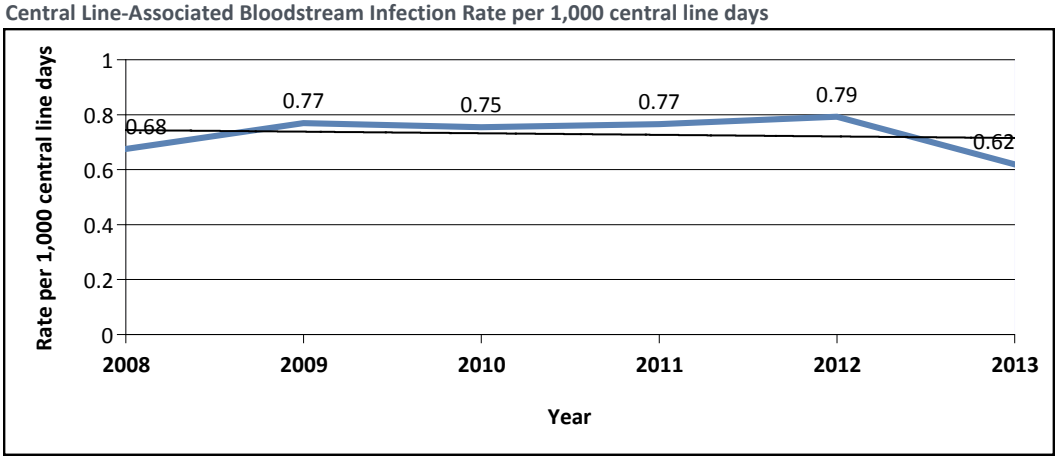
UPMC PRESBYTERIAN SHADYSIDE --- PRESBYTERIAN

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
2013	64	83.46	0.77	0.59 - 0.98	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	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				-	
2013				-	

UPMC PRESBYTERIAN SHADYSIDE --- SHADYSIDE

NHSN ID: 10118

Hospital type: Acute care general hospital

Number of licensed beds (2013): 520

Number of reported Healthcare-Associated Infections:

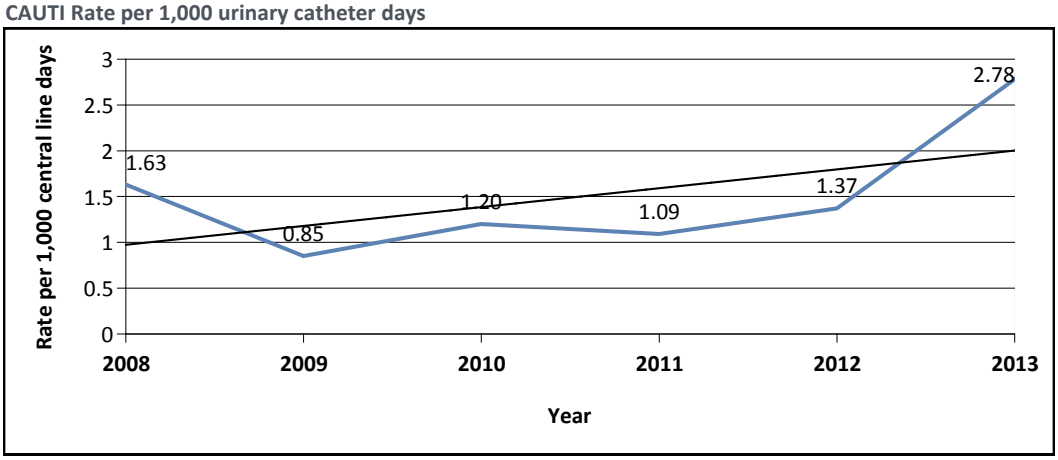
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	70,674	60	3	109	2	37	0	81	7	41	6	4.90
2009	149,079	55	10	184	2	51	0	180	8	55	2	3.67
2010	164,107	29	16	174	2	79	0	150	22	77	2	3.36
2011	170,109	38	15	189	6	114	0	183	15	99	8	3.92
2012	157,128	36	12	123	8	119	0	216	17	89	1	3.95
2013	154,054	34	22	137	5	95	0	240	28	197	3	4.94

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
2013	111	84.12	1.32	1.09 - 1.59	Worse

CAUTI Rate per 1,000 urinary catheter days



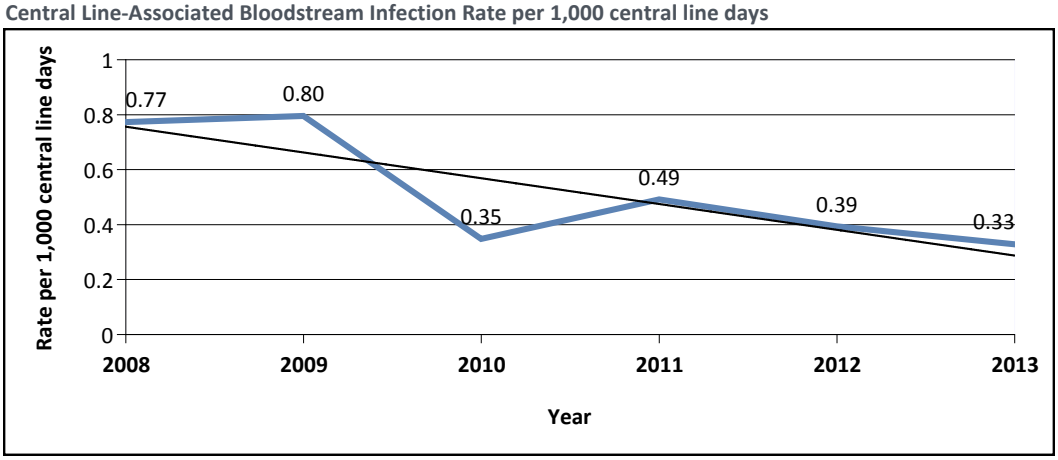
UPMC PRESBYTERIAN SHADYSIDE --- SHADYSIDE

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
2013	14	34.42	0.41	0.22 - 0.68	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
2013	11	39.84	0.28	0.14 - 0.49	Better

UPMC PRESBYTERIAN SHADYSIDE --- WPIC

NHSN ID: 13702

Hospital type: Acute care general hospital

Number of licensed beds (2013): 310

Number of reported Healthcare-Associated Infections:

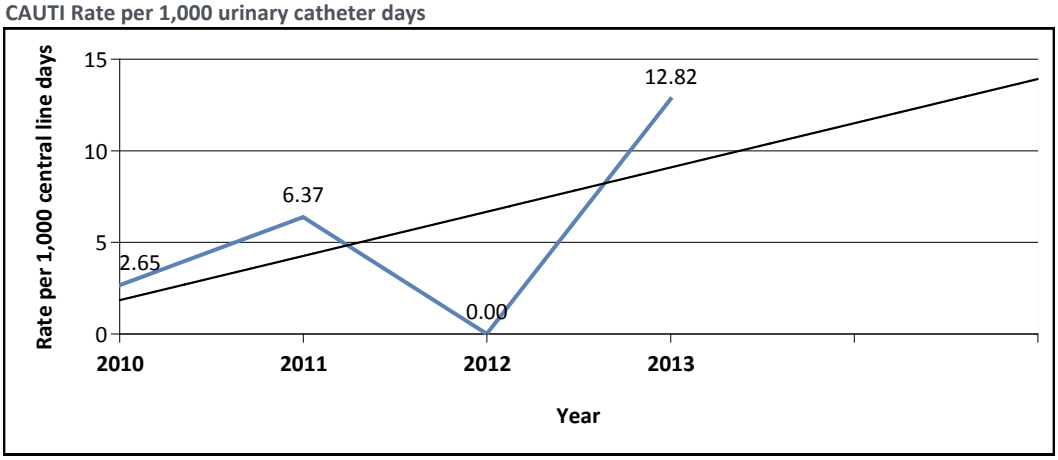
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008												
2009												
2010	102,693	1	1	2	0	2	0	0	2	17	0	0.24
2011	102,650	3	14	3	0	3	0	0	5	20	0	0.47
2012	104,169	2	23	2	0	1	0	0	3	10	0	0.39
2013	103,422	1	6	6	0	1	0	0	1	14	0	0.28

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
2013	1	0.14	6.92	0.09 - 38.51	Same as

CAUTI Rate per 1,000 urinary catheter days



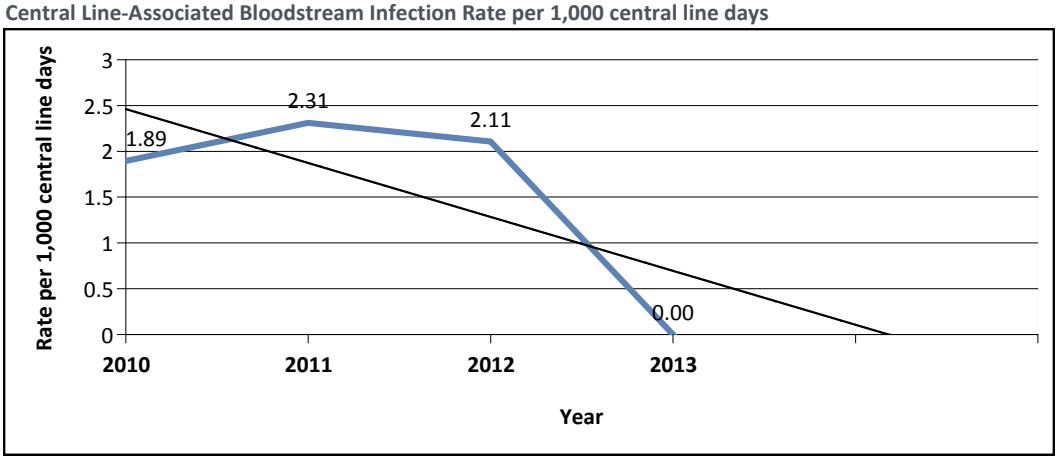
UPMC PRESBYTERIAN SHADYSIDE --- WPIC

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
2013	0	0.42	0.00	0 - 8.71	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 (2013): 249

Number of reported Healthcare-Associated Infections:

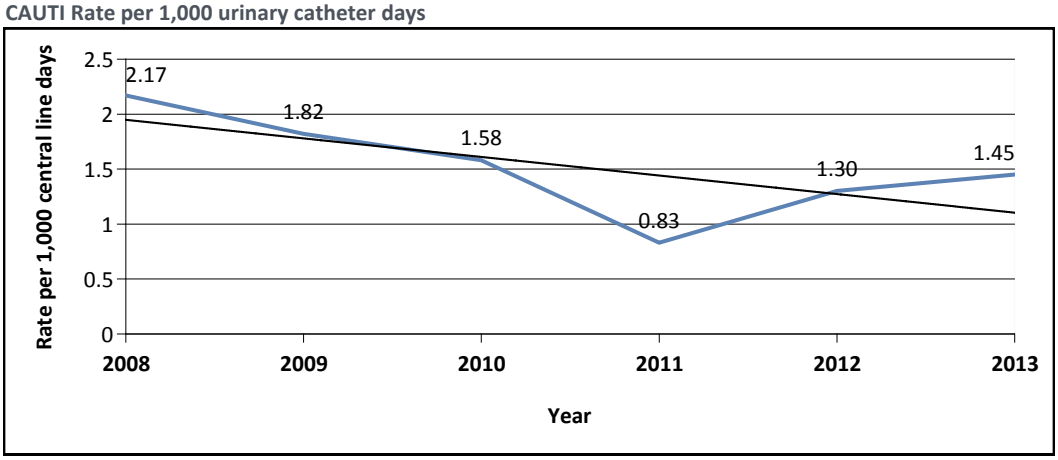
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	35,007	6	0	28	0	16	0	27	1	17	0	2.71
2009	74,555	12	0	42	0	12	0	55	4	37	0	2.17
2010	76,041	10	1	24	0	26	0	51	2	35	1	1.97
2011	79,022	12	1	19	1	23	0	59	3	25	0	1.81
2012	75,976	10	2	32	0	13	0	46	2	43	0	1.95
2013	69,846	10	0	27	1	7	0	60	2	53	0	2.29

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
2013	25	36.40	0.69	0.44 - 1.01	Same as

CAUTI Rate per 1,000 urinary catheter days



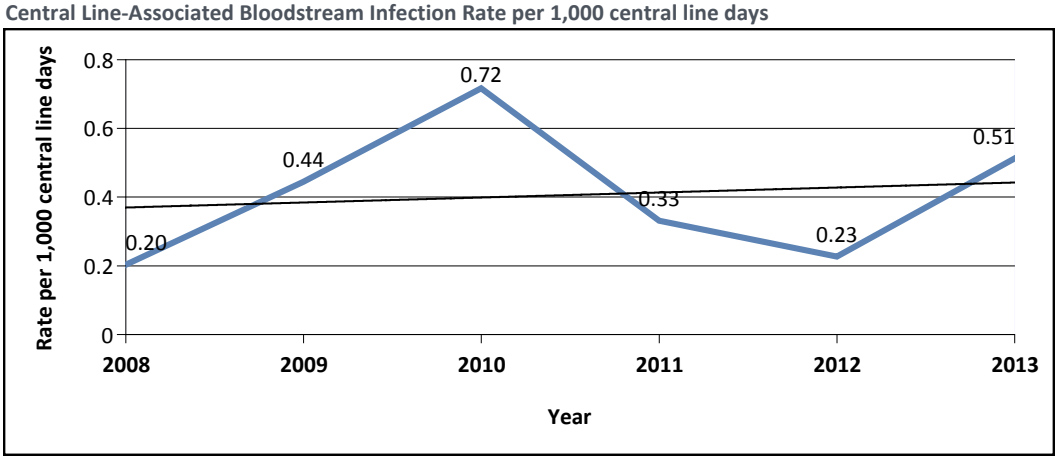
UPMC ST MARGARET

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
2013	6	9.46	0.63	0.23 - 1.38	Same as

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 (2013): 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
2013	16,356	0	0	0	0	0	0	0	0	0	0	

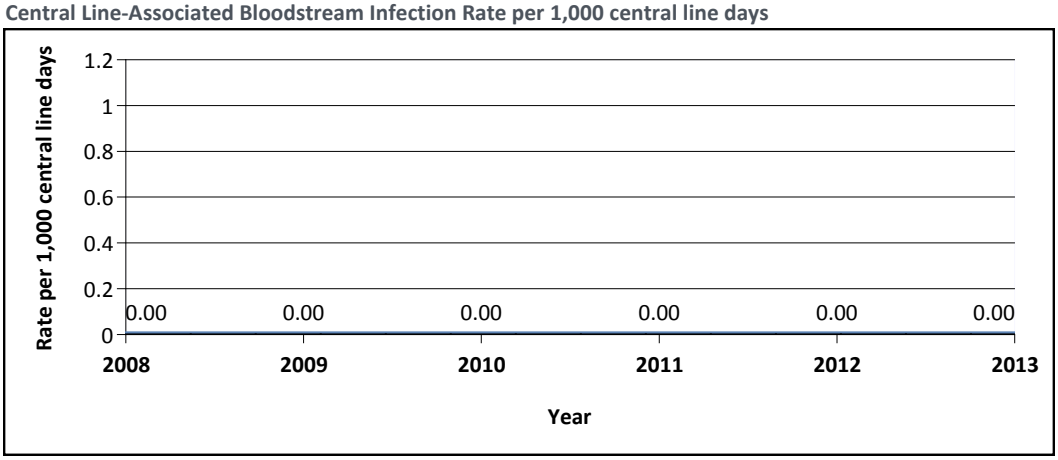
VALLEY FORGE MEDICAL CENTER AND HOSPITAL

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
2013	0	0.16	0.00	0 - 22.64	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 (2013): 87

Number of reported Healthcare-Associated Infections:

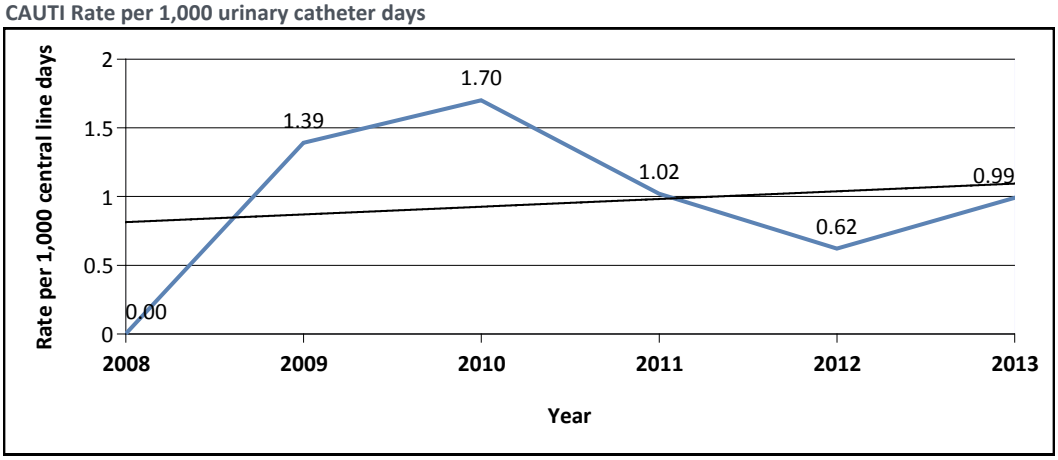
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	6,126	0	0	0	0	0	1	2	0	2	0	0.82
2009	12,347	0	0	3	0	1	0	3	1	3	0	0.89
2010	11,870	0	0	2	0	2	0	7	1	7	0	1.60
2011	13,033	2	0	8	0	4	0	8	0	2	0	1.84
2012	13,257	2	0	3	0	0	1	11	1	2	2	1.66
2013	15,355	0	0	7	0	0	0	7	0	6	0	1.30

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
2013	2	3.05	0.65	0.07 - 2.36	Same as

CAUTI Rate per 1,000 urinary catheter days



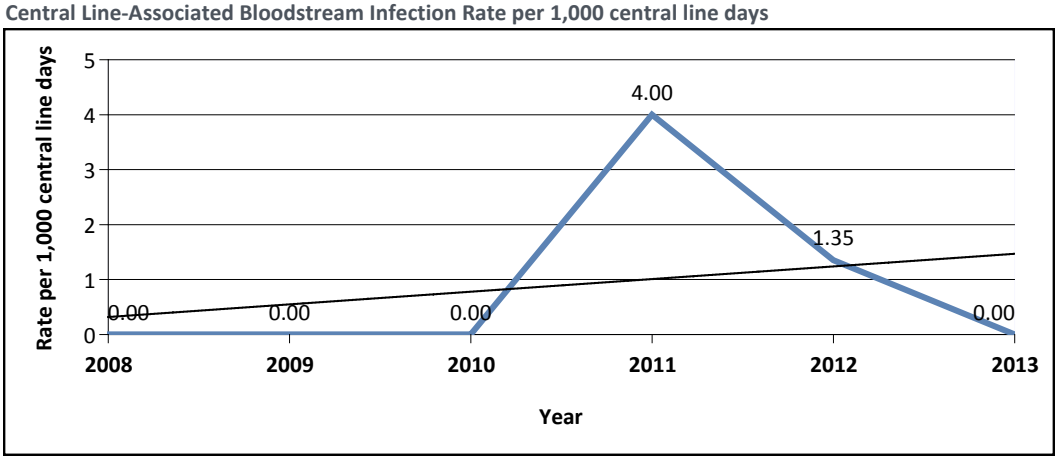
WARREN GENERAL HOSPITAL

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
2013	0	0.50	0.00	0 - 7.28	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 (2013): 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
2013	66,410	0	0	0	0	0	0	0	0	0	0	

WAYNE MEMORIAL HOSPITAL

NHSN ID: 12004

Hospital type: Acute care general hospital

Number of licensed beds (2013): 112

Number of reported Healthcare-Associated Infections:

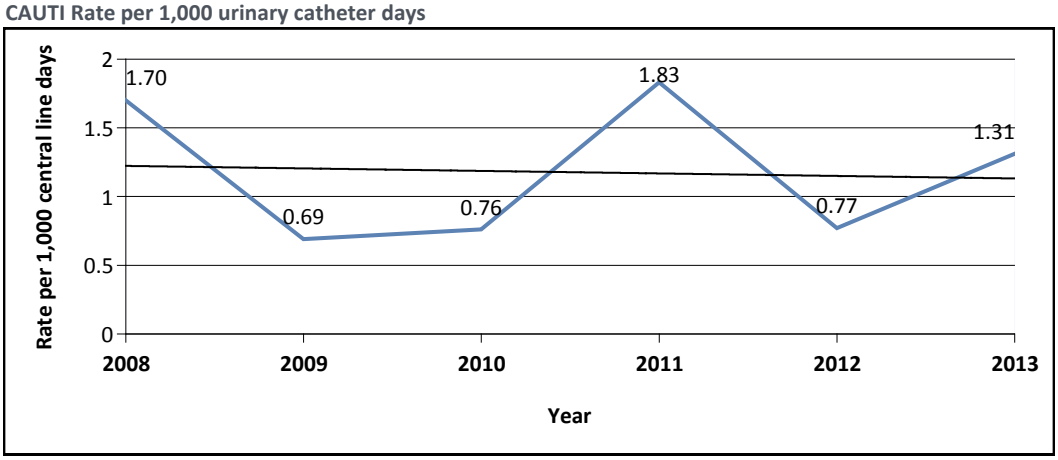
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	10,129	1	0	6	0	1	0	5	0	4	0	1.68
2009	19,702	1	0	1	0	2	0	9	0	5	0	0.91
2010	18,141	0	0	3	0	6	1	6	1	8	0	1.38
2011	15,942	1	1	3	0	11	0	13	0	5	0	2.13
2012	18,519	4	2	6	0	9	1	19	1	11	0	2.86
2013	16,857	2	2	5	0	7	2	21	0	5	0	2.61

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
2013	3	3.47	0.87	0.17 - 2.53	Same as

CAUTI Rate per 1,000 urinary catheter days



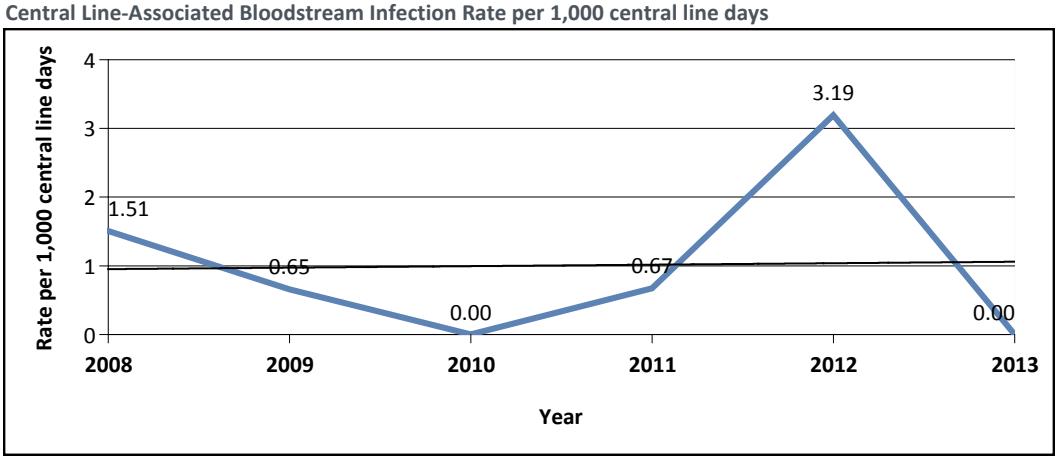
WAYNE MEMORIAL HOSPITAL

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
2013	0	0.80	0.00	0 - 4.56	Same as

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 (2013): 62

Number of reported Healthcare-Associated Infections:

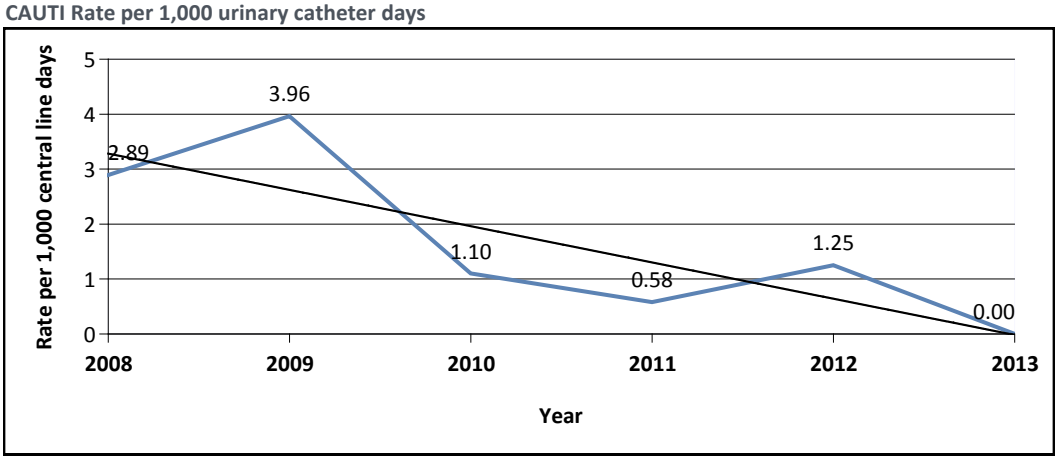
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	6,153	1	0	6	0	7	3	1	0	4	0	3.58
2009	11,953	0	0	10	0	9	1	4	0	8	0	2.68
2010	9,970	0	0	3	0	7	1	5	0	4	0	2.01
2011	9,729	0	0	0	0	2	0	1	0	1	0	0.41
2012	9,841	0	0	0	0	14	0	6	0	2	0	2.24
2013	9,414	3	0	1	0	12	0	9	0	1	0	2.76

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
2013	0	2.36	0.00	0 - 1.55	Same as

CAUTI Rate per 1,000 urinary catheter days



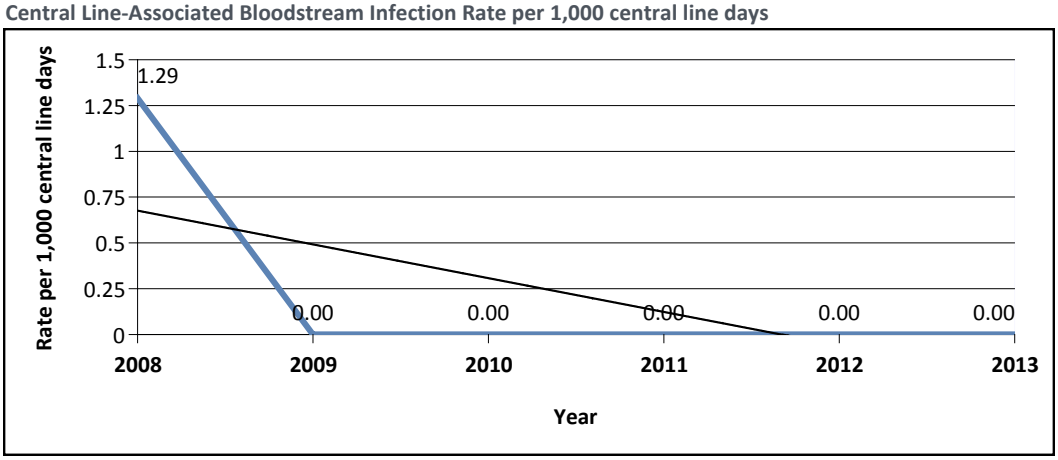
WAYNESBORO HOSPITAL

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
2013	0	0.62	0.00	0 - 5.95	Same as

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



WELLSPAN SURGERY AND REHABILITATION HOSPITAL

NHSN ID: 27430

Hospital type:

Number of licensed beds (2013): 56

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												
2013	15,195	1	0	7	1	3	0	14	1	20	1	3.16

WERNERSVILLE STATE HOSPITAL

NHSN ID: 12368

Hospital type: Psychiatric hospital

Number of licensed beds (2013): 266

Number of reported Healthcare-Associated Infections:

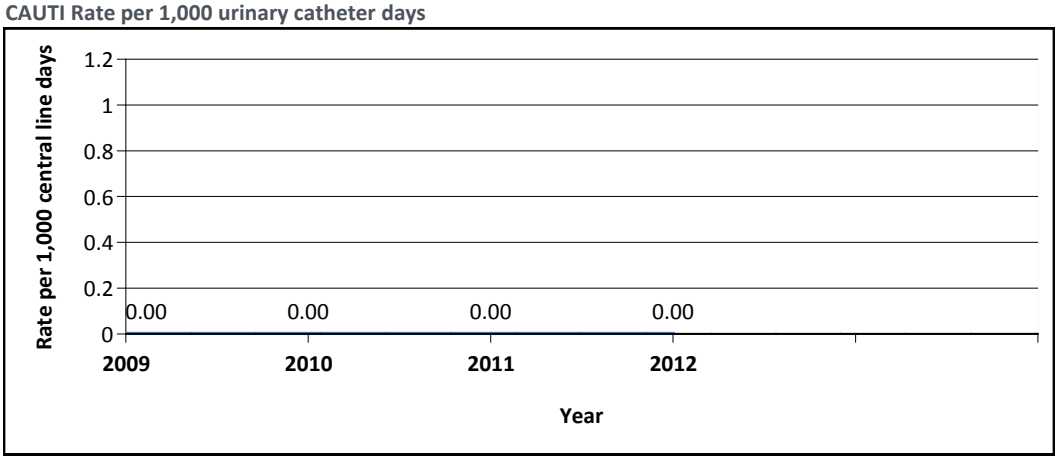
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008												
2009	78,230	0	8	0	0	4	0	0	6	10	0	0.36
2010	89,641	0	10	0	0	0	0	0	13	14	0	0.41
2011	97,823	0	12	1	0	0	0	0	15	8	0	0.37
2012	97,099	0	15	1	0	0	0	0	25	8	0	0.50
2013	94,600	0	3	0	0	0	0	0	2	1	0	0.06

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
2013				-	

CAUTI Rate per 1,000 urinary catheter days



WESTFIELD HOSPITAL

NHSN ID: 12487

Hospital type: Acute care general hospital

Number of licensed beds (2013): 25

Number of reported Healthcare-Associated Infections:

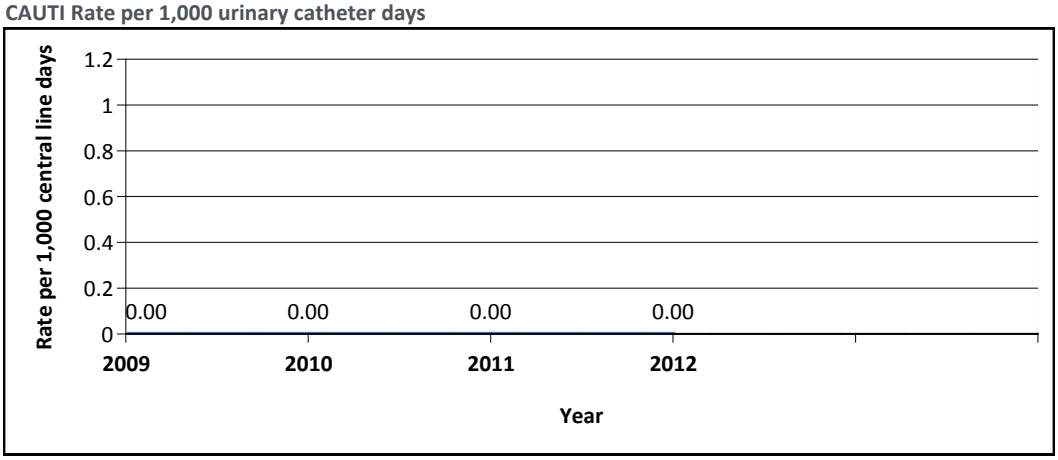
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	386	0	0	0	0	0	0	0	0	0	0	0.00
2009	1,462	0	0	0	0	0	0	0	0	0	0	0.00
2010	1,823	0	0	0	0	0	0	1	0	1	0	1.10
2011	2,004	0	0	0	0	0	0	2	0	0	0	1.00
2012	1,361	0	0	0	0	0	0	2	0	0	0	1.47
2013												

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
2013				-	

CAUTI Rate per 1,000 urinary catheter days



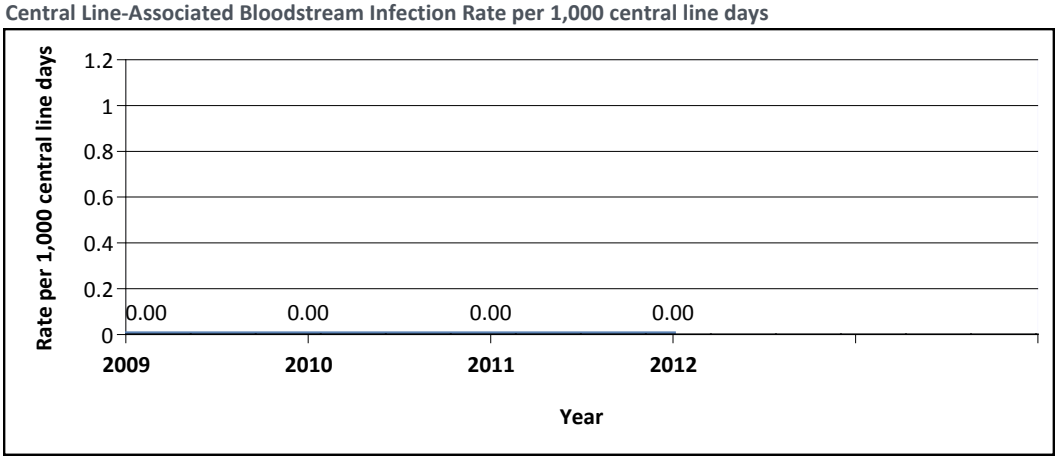
WESTFIELD HOSPITAL

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
2013				-	

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 (2013): 412

Number of reported Healthcare-Associated Infections:

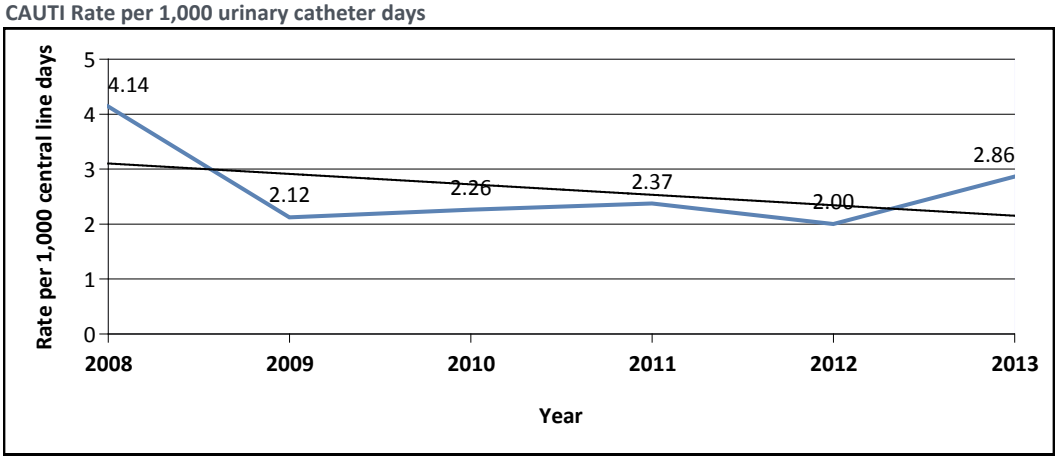
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	40,913	27	1	12	5	28	0	33	7	62	1	4.30
2009	84,199	22	1	29	3	48	1	72	8	65	5	3.02
2010	82,205	29	3	21	5	46	0	80	4	81	3	3.31
2011	84,294	32	3	25	5	37	2	56	5	67	3	2.79
2012	88,283	16	4	40	7	24	1	79	3	64	0	2.70
2013	83,844	24	9	20	5	23	2	63	6	83	0	2.80

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
2013	62	45.76	1.35	1.04 - 1.74	Worse

CAUTI Rate per 1,000 urinary catheter days



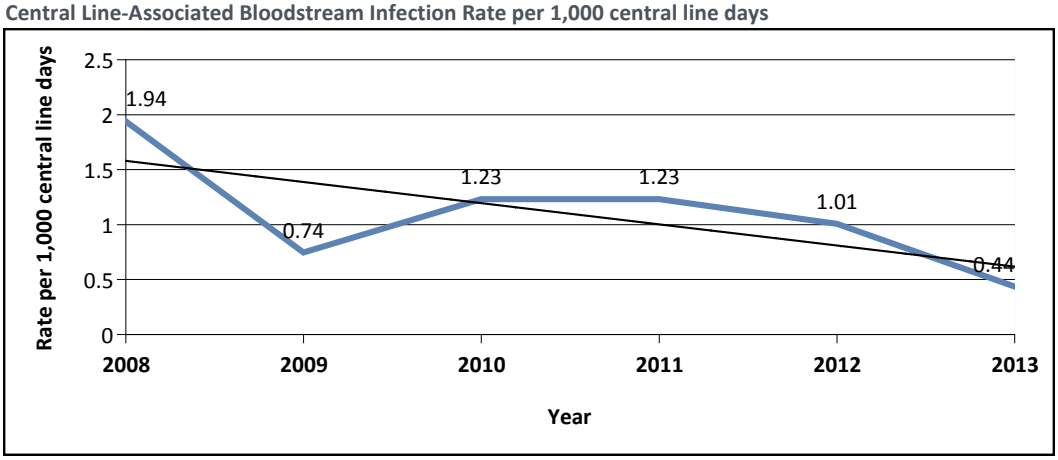
WILKES-BARRE GENERAL HOSPITAL

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
2013	4	7.41	0.54	0.15 - 1.38	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
2013	3	2.14	1.40	0.28 - 4.09	Same as

WILLIAMSPORT REGIONAL MEDICAL CENTER

NHSN ID: 11732

Hospital type: Acute care general hospital

Number of licensed beds (2013): 230

Number of reported Healthcare-Associated Infections:

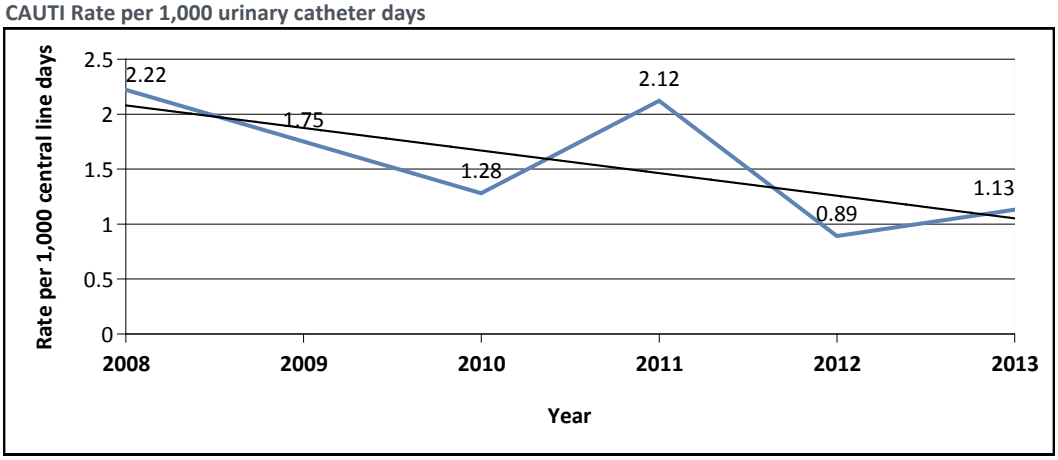
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	25,552	7	0	28	1	6	0	43	7	19	1	4.38
2009	53,384	11	1	20	3	25	0	55	3	43	1	3.03
2010	49,673	9	0	18	6	6	4	43	9	29	0	2.50
2011	54,085	7	10	21	4	15	1	47	9	48	2	3.03
2012	53,152	5	39	20	2	9	3	42	5	45	0	3.20
2013	57,713	13	66	36	0	17	1	44	7	32	0	3.74

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
2013	11	20.32	0.54	0.27 - 0.97	Better

CAUTI Rate per 1,000 urinary catheter days



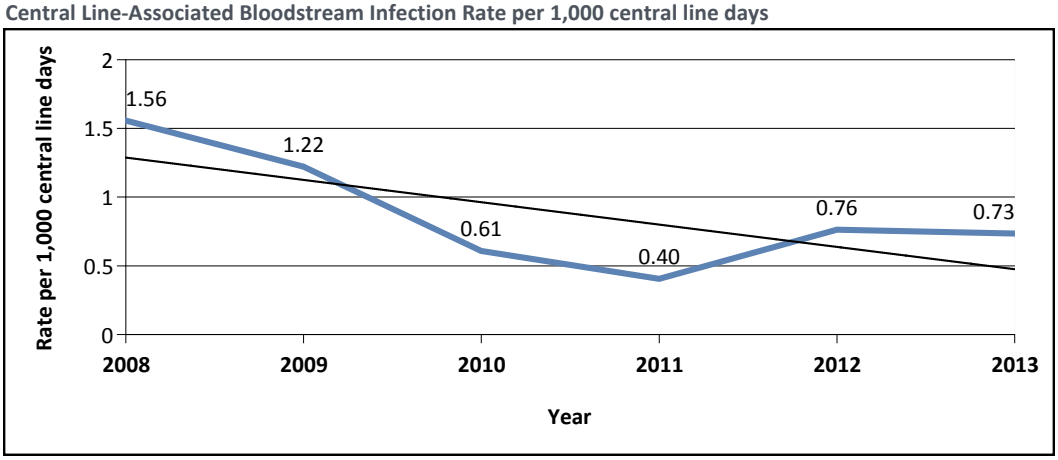
WILLIAMSPORT REGIONAL MEDICAL CENTER

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
2013	6	6.61	0.91	0.33 - 1.98	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				-	
2013				-	

WINDBER HOSPITAL

NHSN ID: 12031

Hospital type: Acute care general hospital

Number of licensed beds (2013): 54

Number of reported Healthcare-Associated Infections:

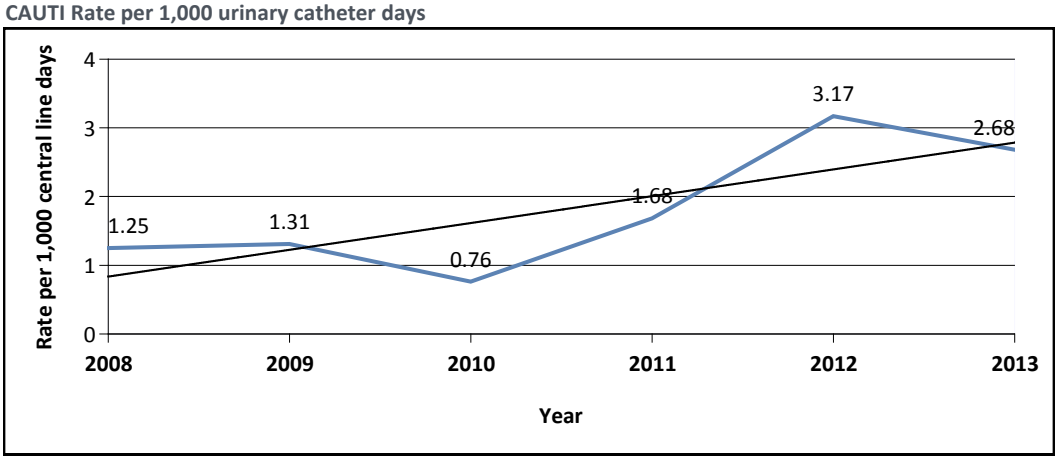
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	3,755	0	2	0	0	0	0	3	0	1	0	1.60
2009	9,160	0	0	1	0	0	0	7	1	4	1	1.53
2010	8,114	1	0	0	0	1	0	8	0	2	0	1.48
2011	7,878	0	0	0	0	1	0	6	0	2	0	1.14
2012	7,704	0	0	0	0	1	0	9	0	6	0	2.08
2013	6,417	0	0	0	0	0	0	5	0	3	0	1.25

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
2013	3	1.70	1.76	0.35 - 5.15	Same as

CAUTI Rate per 1,000 urinary catheter days



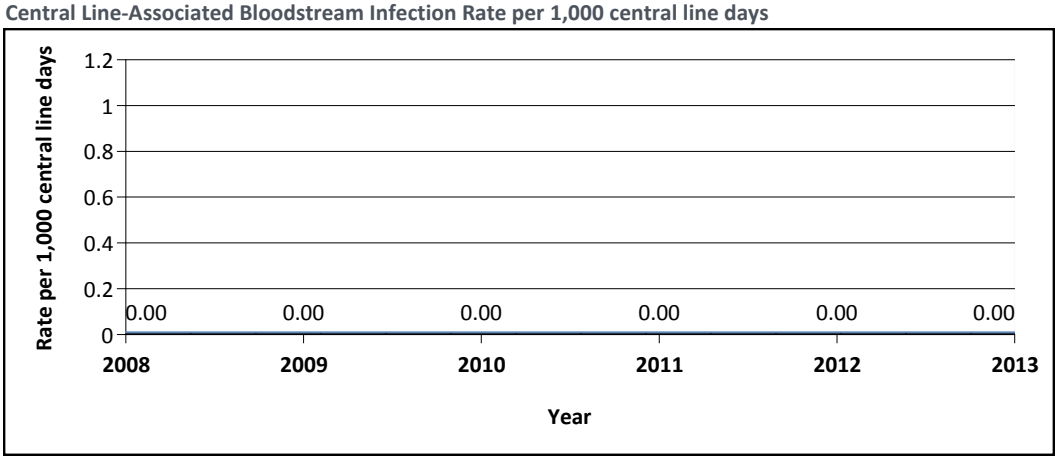
WINDBER HOSPITAL

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
2013	0	0.07	0.00	0 - 49.87	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 (2013): 572

Number of reported Healthcare-Associated Infections:

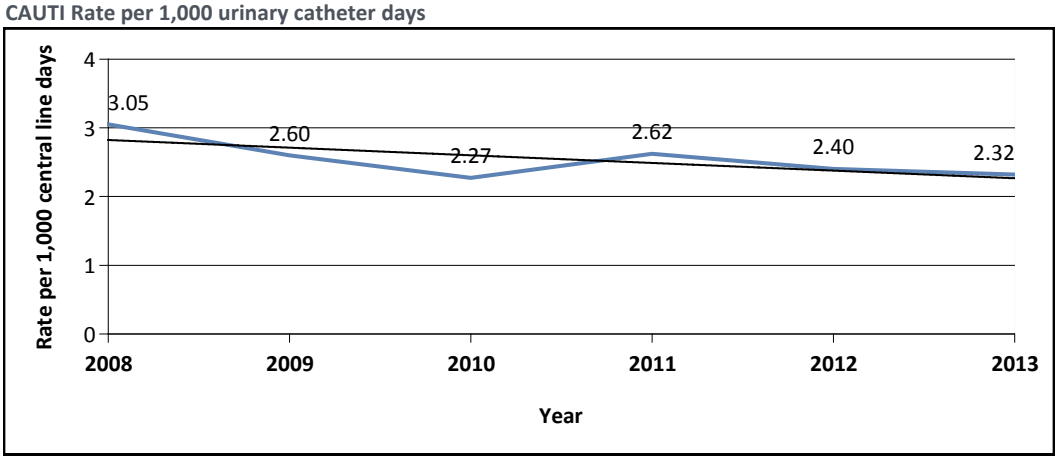
Year	Patient Days	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Crude Rate
2008	75,640	15	12	57	4	31	6	70	8	62	4	3.56
2009	172,273	22	5	131	4	72	10	128	9	108	2	2.85
2010	167,442	26	5	94	18	87	7	145	8	102	1	2.94
2011	175,653	17	7	89	30	85	8	147	19	112	5	2.95
2012	162,496	23	11	78	55	61	3	128	13	101	4	2.94
2013	162,441	33	9	86	81	42	2	115	17	108	8	3.08

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
2013	62	55.70	1.11	0.85 - 1.43	Same as

CAUTI Rate per 1,000 urinary catheter days



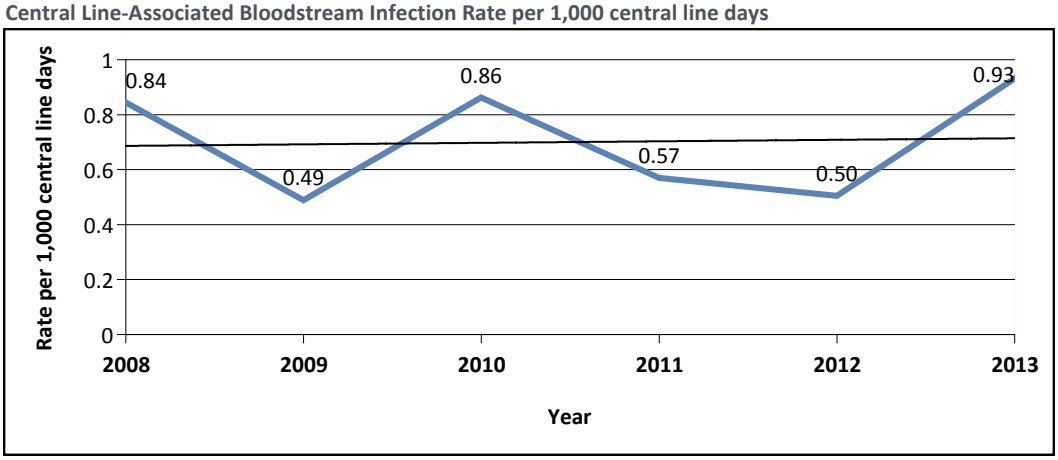
YORK HOSPITAL

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
2013	18	15.63	1.15	0.68 - 1.82	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
2013	3	1.90	1.58	0.32 - 4.62	Same as