Non-tuberculous Mycobacterium (NTM) Infection Resources

CDC Health Advisory
The CDC issued a Health Alert Network Advisory on Sept. 11, 2015, alerting health care facilities of the need to properly maintain, clean, and disinfect or sterilize reusable medical devices and equipment. Health care facilities that utilize reusable medical devices were urged to immediately review their current reprocessing practices, policies, and procedures to ensure manufacturer’s instructions are being followed and that their policies and procedures are consistent with current standards and guidelines.

FDA Safety Communication – NTM Infections
The U. S. Food and Drug Administration (FDA) provided a safety communication on Oct. 15, 2015, to heighten the awareness about infections with heater-cooler devices and steps health care providers and health care facilities can take to mitigate risks to patients. Recommendations for health care facilities and staff and information for reporting adverse events were included.

CDC Interim Practical Guidance – NTM Infections
The CDC issued a document titled Non-tuberculous Mycobacterium (NTM) Infections and Heater-Cooler Devices Interim Practical Guidance: Updated October 27, 2015 to raise awareness of the possible association between NTM infections and the use of heater-cooler devices and to provide guidance on identifying patients with infection. Recommendations for health departments, health care facilities, health care providers and patients are also provided.

Patient Safety Communication – NTM Infections
The Pennsylvania Department of Health (PADOH) and Pennsylvania Patient Safety Authority (PSA) issued guidance through the Health Alert Network regarding Non-Tuberculous Mycobacterium Infections Among Patients Undergoing Open Heart Surgeries on Cardiopulmonary Bypass. Frequently Asked Questions regarding this topic are also available.
NHSN Information

NHSN Version 8.5 Release

There are a number of updates and reminders in NHSN as a result of the Version 8.5 Release on Jan. 9, 2016. Please be sure to review the NHSN newsletters for September and December 2015, as well as any emails from NHSN, to keep abreast of these changes. Also, be aware that the 2016 updated protocols can be found within each specific HAI chapter. A summary of the revisions is provided on the CDC NHSN Communication Updates page.

NHSN Training Course for 2016

The NHSN training course “Applying the 2016 Changes to Accurately Report HAIs,” will be held February 29 and March 1-4, 2016 at the CDC Global Communications Center in Atlanta, Ga. Registration opened on Monday, January 11, 2016. There is no registration fee for the course. However, registrants will be responsible for all travel expenses and the cost of food and beverages. The capacity for this training is limited, and seats fill very quickly.

The course and associated materials will be available via live Web streaming. In addition, the sessions will be accessible and archived on the NHSN website for future access and viewing. Additional details regarding registration for the live Web streaming will be sent by NHSN.

On Feb. 29th, the training will focus on infection surveillance in long-term care facilities. The NHSN training sessions will include: CMS reporting, definition and protocol clarification for catheter-associated urinary tract infections (CAUTI), central line-associated bloodstream infections (CLABSI), surgical site infections (SSI), ventilator-associated events (VAE), and laboratory-identified (LabID) event reporting for Clostridium difficile (CDI) and methicillin-resistant Staphylococcus aureus bacteremia (MRSA BSI). A half-day of training on antibiotic stewardship will be offered Friday, March 4.

Act 52 Pennsylvania Reporting Requirements

Reminder: Although certain reporting required for facilities that participate in CMS Quality Reporting Programs allows for submission of data on a quarterly basis, Act 52 of 2007 requires reporting events within 24 hours of confirmation and denominator data within 30 days of the end of the month.
The 2015 annual survey is now available in NHSN. Please ensure the information entered in the annual survey is accurate.

Surveys must be completed and submitted in NHSN by March 1, 2016. If a facility does not complete an annual survey by this deadline, it will be unable to complete monthly reporting plans.

The Centers for Medicare and Medicaid Services (CMS) published a final rule that included HCP influenza vaccination summary reporting from inpatient psychiatric facilities that participate in the CMS Inpatient Psychiatric Facility Quality Reporting (IPFQR) program.

Inpatient psychiatric facilities must collect and report data on all HCP physically working in the facility for at least one working day between Oct. 1, 2015 through March 31, 2016. Inpatient psychiatric units located within an acute care hospital or critical access hospital must also collect data for all HCP physically working in the unit for at least one working day between Oct. 1, 2015 through March 31, 2016.

Inpatient psychiatric facilities located as patient care units within acute care or critical access hospitals and free-standing inpatient psychiatric facilities are required to report HCP influenza vaccination summary data. Acute care hospitals and critical access hospitals must determine if these units have a different CMS Certification Number (CCN) from the main facility. If so, data from these inpatient psychiatric units must be entered separately.

For NHSN help, please send an email to: nhsn@cdc.gov. Remember to include the facility five-digit NHSN assigned ID number with your question. CDC’s NHSN website: [www.cdc.gov/nhsn](http://www.cdc.gov/nhsn)
The Agency for Healthcare Research and Quality (AHRQ) recently released a new toolkit for reducing catheter-associated urinary tract infections (CAUTI) that helps hospitals prevent CAUTI in patients and improve safety culture at the unit level by implementing concepts from the Comprehensive Unit-based Safety Program (CUSP).