



January 17, 2019

Dear Hospital Infection Prevention staff,

The Department of Health is providing an important update regarding Centers for Disease Control and Prevention's (CDC) addition to the National Healthcare Safety Network (NHSN) 2019 Patient Safety Component Manual, chapter (11): Pediatric Ventilator-Associated Event (PedVAE). The protocol and forms are available online. The implementation of this update will affect reporting requirements under Act 52, Pennsylvania's Healthcare-Associated Infection (HAI) reduction and reporting law. As provided in Section 404(b) of the MCARE Act, 40 P.S. § 1303.404(b), hospitals shall report HAI data in accordance with the NHSN Manual, Patient Safety Component Protocol.

To align with ACT 52 reporting requirements, Pediatric Ventilator-Associated Events (PedVAEs) must be added to the monthly NHSN reporting plan for all inpatient neonatal and pediatric locations within acute care hospitals (including free standing pediatric hospitals), long term acute care hospitals, and inpatient rehabilitation facilities. **Facilities are to begin reporting events (beginning 1/1/2019) that meet the PedVAE definition criteria.** In addition, facilities must continue to submit ventilator days for each location.

Unlike the three tier criteria/algorithm for Adult Ventilator-Associated Event (Ventilator-Associated Condition (VAC), Infection-related Ventilator-Associated Complication (IVAC), and Possible Ventilator-Associated Pneumonia (PVAP), PedVAE criteria/algorithm includes only one reporting tier, Pediatric Ventilator-Associated Event (PedVAE). This tier identifies *complications* of mechanical ventilation, not necessarily infection; therefore, the aforementioned facilities are required to **continue reporting pediatric ventilator-associated pneumonia (VAP) events** per criteria detailed in Chapter 6 Device-associated Module – Pneumonia of the NHSN 2019 Manual.

At this time, events meeting the PedVAE criteria will **not** require hospitals to provide serious event letters to patients (per ACT 13). Department of Health, in collaboration with the Pennsylvania Patient Safety Authority (PSA), will communicate any changes to this guidance, as necessary.

Additional guidance regarding PedVAE is located at <https://www.cdc.gov/nhsn/pdfs/pscmanual/pedvae-current-508.pdf>.

**Several (not all inclusive)** of these notations are extracted for your reference:

- **NHSN PedVAE defined eligible setting population:** Inpatient locations eligible to participate in PedVAE surveillance are those neonatal and pediatric locations in acute care hospitals, long term acute care hospitals, and inpatient rehabilitation facilities where

denominator data (ventilator and patient days) can be collected for patients. Such locations may include critical/intensive care units (ICU), specialty care areas (SCA), step-down units and wards. A complete listing of neonatal and pediatric inpatient locations can be found in Chapter 15.

- **NHSN Setting NOTE:** All patients in the neonatal and pediatric inpatient locations found in Chapter 15 are included **regardless of patient's age.**
- **NHSN Setting NOTE:** Non-acute care mapped locations in acute care facilities (chronic care units in acute care facilities) are not eligible to participate in PedVAE surveillance.
- **NHSN Definitions NOTE:** Patients on extracorporeal life support or paracorporeal membrane oxygenation are EXCLUDED from PedVAE surveillance during periods of time when the support is in place the entire calendar day.
- **NHSN Definition NOTE:** Patients on high-frequency oscillatory or jet ventilation are INCLUDED in PedVAE surveillance. Additionally, patients who are receiving a conventional mode of mechanical ventilation or high frequency oscillatory or jet ventilation while in the prone position are INCLUDED in PedVAE surveillance, and patients who are receiving a conventional mode of mechanical ventilation or high frequency oscillatory or jet ventilation while receiving surfactant, corticosteroids, nitric oxide therapy, helium-oxygen mixtures (heliox) or epoprostenol therapy are also INCLUDED in PedVAE surveillance.

The Department appreciates the continued efforts of hospitals in complying with the MCARE Act to improve infection surveillance and control to reduce HAIs in Pennsylvania. Questions regarding this notice or the HAI reporting requirements under the MCARE Act may be directed to Healthcare-Associated Infection Prevention and Antimicrobial Stewardship Program at 717-425-5422.

Sincerely,

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cc: Hospital Administrator