

Healthcare-Associated Infections in Pennsylvania

2015 Report



pennsylvania
DEPARTMENT OF HEALTH

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1 Executive Summary

Overview The 2015 report on the occurrence and patterns of healthcare-associated infections (HAIs) is the eighth to be released by the Pennsylvania Department of Health (PADOH). Overall, the incidence of HAIs has declined since the 2007 amendment of the MCARE Act (Act 52 of 2007). 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. Compared to baseline Pennsylvania data from 2009, the rate of HAIs has decreased 3.0 percent overall with more significant improvements in specific areas. Using conservative estimates, this translates to an estimated minimum savings of \$150 million in direct health care costs.

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 Centers for Disease Control and Prevention (CDC) implemented several case definition changes between 2014 and 2015 that limit the validity of year-to-year comparisons. Due to these changes, 2015 CLABSI and bloodstream (BSI) rates are substantially greater than 2014 rates, while the secondary BSI and urinary tract infection (UTI) rates are significantly less than 2014 rates. Nonetheless, the case definition changes, if uniformly implemented, should not affect the interpretation of the standardized infection ratio (SIR) for benchmarking purposes.

The device utilization ratio (DUR) is an important and robust measure of patient safety and is unaffected by the aforementioned case definition changes. These metrics indicate how many patients are exposed to care that might ultimately result in a CAUTI or CLABSI. Despite increasingly complex medical care, Pennsylvania hospitals have steadily reduced their use of central lines and urinary catheters. The statewide urinary catheter and central line DURs decreased 21.8 and 7.13 percent, respectively, since 2009.

Similarly, SSI surveillance case definitions and statewide benchmarking changed in 2012 and 2013. This limits the usefulness of year-to-year comparisons; however, the steady and robust SSI decreases reported for certain procedure types are impressive and likely reflect real risk reduction. Since 2009, the HAI rate after a hip prosthesis (HPRO), abdominal hysterectomy (HYST), knee prosthesis (KPRO) or cardiac surgery (CARD) decreased 10.4, 20.4, 36.3, 46.6 percent respectively.

Antibiotic resistant organisms are a serious threat to patient safety and health care. The proportion of HAIs caused by methicillin-resistant *Staphylococcus aureus* (MRSA) has decreased substantially. In 2009, hospitals isolated MRSA in 8.17 percent of HAIs; in 2015, hospitals isolated MRSA in 5.33 percent of HAIs.

Health care worker influenza vaccination prevents absenteeism (30 percent reduction in some studies) and prevents transmission to patients and co-workers. During the 2015–2016 influenza season, 152 (60 percent) facilities reported an employee vaccination rate of 90 percent or better, a Healthy People 2020 goal. This is a 245 percent increase since the 2011-2012 influenza season.

The observed reduction in HAIs is likely the result of ongoing efforts undertaken by infection preventionists, health care personnel (HCPs) and systems, professional societies, and governmental agencies to control and prevent the occurrence of HAIs. The impact of ongoing 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 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 2015 report contains a summary of the overall and hospital-specific number and type of HAIs. This is followed by separate sections on each of the three HAI categories that PADOH uses for benchmarking hospital performance. Hospital comparisons in these sections are done using the same risk-adjusted standardized

infection ratio (SIR) approach used in previous Pennsylvania reports. The SIR is a value based on the ratio of infections **reported** by each hospital to NHSN (referred to as observed infections) to the number of infections **predicted** to occur at that hospital (referred to as predicted infections). The number of predicted infections is a calculated value that PADOH assigns to the hospital based on the overall statewide rate for each type of infection.

Universal influenza vaccination is the single most important measure to prevent transmission of influenza, and it is an important indicator of a hospital's commitment to patient safety. 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 2015 report includes hospital-specific HCP influenza vaccination rates during the 2015–2016 influenza season and recognizes those facilities that have already achieved the Healthy People 2020 goal.

All Healthcare-Associated Infections (HAIs) In 2015, 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 23,623 HAIs occurring over 9,774,027 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 2.42 HAIs per 1,000 patient days. This is a 4.4 percent increase from the HAI rate in 2014 and is likely a result of case definition changes implemented by CDC between 2014 and 2015; nonetheless, the 2015 rate is 3.0 percent less than the 2009 rate, which is considered the baseline year of measurement for Act 52. This represents 9,971 fewer HAIs than would have occurred if the 2009 HAI rate had persisted into 2015. In this report, as in past reports, the three most commonly reported categories of HAIs are gastrointestinal infections (GI; 28.5 percent), SSIs (26.0 percent) and urinary tract infections (UTI; 19.0 percent).

Catheter-Associated Urinary Tract Infections (CAUTIs) Among the 251 hospitals, there were 228 (90.1 percent) that reported using urinary catheters and 165 (72.4 percent of those using urinary catheters) that reported at least one CAUTI. There were a total of 1,797 CAUTIs reported in 2015 among more than 1.4 million days of urinary catheter use, for a rate of 1.2 CAUTIs per 1,000 urinary catheter days. Due to case definition changes, infection rates should be compared to previous years with great care. The 2015 rate likely overstates the true risk reduction achieved by Pennsylvania hospitals. However, the definition of the device utilization rate has not changed over this period of time. The urinary catheter DUR has steadily decreased 21.8 percent since 2009. While device use is sometimes necessary and unavoidable, in general, less device use translates to fewer patients at risk for CAUTIs.

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 146 (67.3 percent of those using central lines) that reported at least one CLABSI. There were a total of 1,703 CLABSIs reported in 2015 among more than 1,539,281 million days of central line use, giving an overall rate of 1.1 CLABSIs per 1,000 central line days. This is 51.4 percent more than the rate in 2014. This very large rate increase is very likely a result in case definition changes implemented by CDC between 2014 and 2015 reporting years. Despite these changes, the 2015 CLABSI rate is still 10.3 percent less than the 2009 baseline rate. Like the CAUTI DUR, the CLABSI DUR provides a robust indicator of patient safety. The 2015 CLABSI DUR is 7.1 percent less than 2009 CLABSI DUR.

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 three-month follow-up period to detect an SSI. It should be noted that this change in the NHSN case definition was implemented in 2013; prior to that, there was a 12-month follow-up period. The number of observed infections within a three-month follow-up period is likely to be modestly lower than with a 12-month follow-up period. It is also important to note that this data only reflects inpatient procedures and does not include procedures performed at ambulatory surgery centers or on an outpatient basis.

In 2015, at least one of the seven benchmarked procedures was performed in 169 Pennsylvania hospitals. For all seven procedures combined, a total of 115,975 procedures were performed in 2015. Knee prosthesis surgeries constitute

35.5 percent of all benchmarked surgeries. For all seven procedures combined, a total of 1,828 SSIs were identified in 2015. This produced overall rates of 1.6 SSIs per 100 procedures (unadjusted crude rate). These rates are higher than rates reported prior to 2012 because colon surgeries, now included in aggregate rates, account for 13.9 percent of all procedures and result in a disproportionate number of infections (i.e., 5.3 per 100 procedures in 2015). Nonetheless, the HYST SSI rate in 2015 is lower than any other year since reporting started in 2009. In addition, the 2015 KPRO and HPRO infection rate is 36.3 and 10.4 percent less than in 2009.

2 Introduction

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 pneumonia 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 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 eighth 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 CAUTIs, CLABSIs and seven different types of 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 fifth PADOH HAI annual report to contain health care worker influenza vaccination data and the fourth annual report to include facility-specific rates. Submission of data on health care worker vaccination is not a mandated requirement of Act 52; however, in January 2013, CMS implemented pay-for-reporting requirements. 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.

As in previous reports, the information in 2015 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.

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 2015 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, 2010," 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.health.pa.gov/facilities/Consumers/Healthcare%20Associated%20Infection%20\(HAI\)/Pages/default.aspx](http://www.health.pa.gov/facilities/Consumers/Healthcare%20Associated%20Infection%20(HAI)/Pages/default.aspx).

All hospitals are required to report all HAIs associated with any inpatient location using the Patient Safety Module of CDC's 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).

It is important to note that several NHSN case-definitions changed between 2014 and 2015, resulting in significant swings in several HAI types. These changes affected the classification of bloodstream infections (BSI; including CLABSIs) and secondary BSI. These changes also affected the classification of urinary tract infections (UTI). **As a result, year-to-year comparisons of 2014 and 2015 data for all-cause HAIs, BSIs (inclusive of CLABSIs and secondary BSIs) and UTIs (inclusive of CAUTIs) are extremely problematic and may not be valid.**

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 and 2012, with funding from the American Recovery and Reinvestment Act, PADOH conducted limited audits of 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 hospital's rate was identical to the statewide HAI rate for that infection type. If a hospital reported 10 CAUTIs during 2015 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. Facilities with no patient or device days for a given infection type and year are included in tables with “.” to denote the absence of data for that year.

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; DUR), 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 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 occurred 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.

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 gray in the graphs.

For the section on health care worker influenza vaccination, hospitals were asked to voluntarily submit information on the number of health care 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 2015–2016 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 practitioners, 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 2015–2016 influenza season.

Manuscript preparation and all analyses were performed using R (version 3.3.1; R Core Team, 2015) and RStudio (version 0.99.903; RStudio Team, 2015).

4 Results

4.1 Hospital Characteristics

In 2015, a total of 251 Pennsylvania hospitals reported data on the occurrence of healthcare-associated infections to 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 (n = 251) reporting healthcare-associated infections — Pennsylvania, 2015

		N	%
Facility type	Acute care hospital	161	64.14
	Critical access hospital	14	5.58
	Children's hospital	6	2.39
	Long term acute care	23	9.16
	Psychiatric hospital	27	10.76
	Rehab hospital	20	7.97
Medical school affiliation	Affiliation	87	34.66
	No affiliation	164	65.34
Number of infection preventionists	0	1	0.40
	< 1	18	7.17
	1 to 2	159	63.35
	2 to 3	43	17.13
	3 to 4	12	4.78
	>= 4	18	7.17
Hospital bed size	<=200	175	69.72
	201-500	60	23.90
	>500	16	6.37

4.2 Overall Patterns of Healthcare-Associated Infections (HAIs)

Among the 251 reporting hospitals, there were a total of 23,623 healthcare-associated infections reported (Table 4.2.1). These HAIs occurred over a total of 9,774,027 patient days of care in Pennsylvania hospitals. The number of reported HAIs in 2015 is 4.75 percent more than in 2014, and the number of patient days in 2015 is 0.316 percent more than in 2014. The overall rate of HAIs in 2015 is 2.42 HAIs per 1,000 patient days, which is 4.42 percent more than the rate of 2.31 per 1,000 patient days in 2014; however, the rate of HAIs reported in 2015 is 2.98 percent less than the rate of 2.5 HAIs per 1,000 patient days since 2009 (the baseline year for Pennsylvania data). These declines translate to **9,971 fewer** healthcare-associated infections having occurred in Pennsylvania since 2009.

Table 4.2.1: Healthcare-Associated Infections — Pennsylvania, 2009–2015

Year	Number of HAIs	Number of Patient Days	Rate per 1,000 Patient Days	Percent Decline (prior year)	Percent Decline (since 2009)
2015	23,623	9,774,027	2.42	4.42	– 2.98
2014	22,552	9,743,208	2.31	– 5.45	– 7.09
2013	24,103	9,845,909	2.45	8.42	– 1.73
2012	22,654	10,033,090	2.26	1.52	– 9.36
2011	22,713	10,212,208	2.22	– 3.04	– 10.72
2010	23,601	10,289,079	2.29	– 7.92	– 7.92
2009	25,914	10,402,161	2.49	.	.

^a In the 2009–2011 reports, manual changes were made to 2009 patient days based on communication with facility infection preventionists. In this report, we have chosen to report values in NHSN as entered by the facility. Therefore, 2009 patient day data and any subsequent reanalysis of 2009 data may yield different results.

Among, the 23,623 HAIs that occurred in 2015, the most common types are found in Table 4.2.2. Gastrointestinal (28.5 percent), surgical site (26.0 percent) and urinary tract (19.0 percent) infections continue to be the most frequently reported HAIs.

Table 4.2.2: Healthcare-Associated Infections—Pennsylvania, 2010–2015

Infection Type	2011		2012		2013		2014		2015	
	n	%	n	%	n	%	n	%	n	%
Bone and joint (BJ)	27	0.1	20	0.1	33	0.1	35	0.2	75	0.3
Blood stream infection (BSI)	2,479	10.9	2,402	10.6	2,484	10.3	2,163	9.6	2,958	12.5
Central nervous system (CNS)	73	0.3	88	0.4	93	0.4	61	0.3	85	0.4
Cardiovascular system (CVS)	103	0.5	106	0.5	106	0.4	99	0.4	136	0.6
Ear, eye, nose and throat (EENT)	741	3.3	724	3.2	797	3.3	666	3.0	656	2.8
Gastrointestinal (GI)	3,951	17.4	3,856	17.0	4,758	19.7	4,259	18.9	6,735	28.5
Lower respiratory tract (LRI)	865	3.8	880	3.9	1,043	4.3	1,084	4.8	111	0.5
Pneumonia (PNEU)	2,420	10.7	2,182	9.6	1,652	6.9	1,484	6.6	1,528	6.5
Reproductive (REPR)	77	0.3	80	0.4	93	0.4	64	0.3	79	0.3
Surgical site infection (SSI)	6,113	26.9	6,313	27.9	5,980	24.8	5,963	26.4	6,136	26.0
Skin and soft tissue (SST)	799	3.5	812	3.6	827	3.4	769	3.4	646	2.7
Systemic (SYS)	2	0.0	3	0.0	4	0.0	4	0.0	0	0.0
Urinary tract infection (UTI)	5,063	22.3	5,188	22.9	6,233	25.9	5,901	26.2	4,478	19.0
All	22,713	100.0	22,654	100.0	24,103	100.0	22,552	100.0	23,623	100.0

4.2.1 Methicillin-Resistant *Staphylococcus aureus* (MRSA)

Methicillin-resistant *Staphylococcus aureus* (MRSA) continues to be a serious concern in the health care 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 2013 through 2015. The absolute number of reported HAIs caused by MRSA has steadily declined 34.8 percent, from 2,117 infections in 2009 to 1,258 infections in 2015. The proportion of HAIs attributable to MRSA has also decreased substantially. In 2009, hospitals isolated MRSA in 8.17 percent of HAIs; in 2015, hospitals isolated MRSA in 5.33 percent of HAIs.

Table 4.2.3: Methicillin resistant *Staphylococcus aureus* Healthcare-Associated Infections — Pennsylvania, 2013–2015

Infection Type	2013		2014		2015	
	MRSA	%	MRSA	%	MRSA	%
Bone and joint (BJ)	8	24.2	4	11.4	19	25.3
Blood stream infection (BSI)	271	10.9	202	9.3	244	8.2
Central nervous system (CNS)	3	3.2	1	1.6	2	2.4
Cardiovascular system (CVS)	12	11.3	11	11.1	21	15.4
Ear, eye, nose and throat (EENT)	24	3.0	20	3.0	20	3.0
Gastrointestinal (GI)	15	0.3	14	0.3	25	0.4
Lower respiratory tract (LRI)	114	10.9	117	10.8	17	15.3
Pneumonia (PNEU)	155	9.4	147	9.9	70	4.6
Reproductive (REPR)	0	0.0	1	1.6	5	6.3
Surgical site infection (SSI)	766	12.8	697	11.7	689	11.2
Skin and soft tissue (SST)	156	18.9	167	21.7	103	15.9
Systemic (SYS)	1	25.0	0	0.0	0	—
Urinary tract infection (UTI)	71	1.1	54	0.9	43	1.0
All	1,596	6.6	1,435	6.4	1,258	5.3

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 NHSN. 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 infections 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), or a change in the case definition as occurred between 2014 and 2015 for BSI and UTI and in 2012 and 2013 for SSI, then the crude rate can be used to illustrate trends over time (changes in annual rates).

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, 2010–2015

	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)													
2015	28	2	83	1	20	3	98	8	97	3	343	144,290	2.38 (2.13– 2.64)
2014	40	1	53	6	34	3	109	2	108	0	356	128,015	2.78 (2.50– 3.09)
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)													
2015	0	0	0	0	0	0	1	0	1	1	3	1,489	2.01 (0.42– 5.89)
2014	0	0	0	0	0	0	1	0	0	0	1	1,589	0.63 (0.02– 3.51)
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)													
2015	60	4	66	0	0	1	57	8	69	8	273	105,751	2.58 (2.28– 2.91)
2014	46	3	49	10	4	0	45	8	54	3	222	102,377	2.17 (1.89– 2.47)
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)
ALLEGHENY GENERAL HOSPITAL (10648)													
2015	116	4	225	9	20	0	229	9	116	14	742	126,604	5.86 (5.45– 6.30)
2014	90	0	55	40	12	1	173	12	181	7	571	126,164	4.53 (4.16– 4.91)
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)													
2015	5	1	34	0	3	2	17	2	7	0	71	32,117	2.21 (1.73– 2.79)
2014	9	2	17	0	1	1	18	5	6	0	59	29,738	1.98 (1.51– 2.56)
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)													
2015	1	2	4	0	0	0	0	1	27	0	35	18,945	1.85 (1.29– 2.57)
2014	1	0	8	0	1	0	0	1	29	0	40	20,722	1.93 (1.38– 2.63)
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)
ARIA HEALTH (11388)													
2015	27	3	72	0	28	1	58	5	42	4	240	116,707	2.06 (1.80– 2.33)
2014	22	1	37	0	25	2	38	14	83	2	224	103,349	2.17 (1.89– 2.47)
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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	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)													
2015	0	0	9	0	0	0	3	1	9	0	22	26,342	0.84 (0.52– 1.26)
2014	4	0	3	0	2	0	6	0	4	0	19	27,297	0.70 (0.42– 1.09)
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)													
2015	0	0	0	0	0	0	0	0	0	0	0	451	0.00 (0.00– 8.18)
2014	0	0	0	0	0	0	1	0	0	0	1	464	2.16 (0.05–12.01)
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)													
2015	0	0	0	0	0	0	0	0	0	0	0	3,986	0.00 (0.00– 0.93)
2014	0	0	0	0	0	0	0	0	0	0	0	4,670	0.00 (0.00– 0.79)
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)													
2015	.	.	.	.	.	.	.	.	.	.	.	.	.
2014	0	11	0	0	0	0	0	1	1	0	13	47,706	0.27 (0.15– 0.47)
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)													
2015	0	0	6	0	6	0	1	0	2	0	15	9,208	1.63 (0.91– 2.69)
2014	0	0	0	0	3	0	2	0	1	0	6	8,825	0.68 (0.25– 1.48)
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)													
2015	0	0	5	0	4	0	3	0	3	0	15	9,861	1.52 (0.85– 2.51)
2014	0	0	4	0	3	2	12	0	1	0	22	10,773	2.04 (1.28– 3.09)
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)													
2015	2	0	13	0	7	0	11	0	6	1	40	34,580	1.16 (0.83– 1.58)
2014	4	0	2	0	5	0	16	1	13	0	41	35,609	1.15 (0.83– 1.56)
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)													
2015	0	0	0	0	0	0	0	0	2	0	2	47,411	0.04 (0.01– 0.15)
2014	0	1	0	0	0	0	0	0	0	0	1	44,754	0.02 (0.00– 0.12)
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)

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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)
BUCKTAIL MEDICAL CENTER (12461)													
2015	1	0	0	1	0	0	0	1	3	0	6	1,110	5.41 (1.98–11.77)
2014	0	0	0	0	0	0	0	3	3	0	6	979	6.13 (2.25–13.34)
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)
BUTLER MEMORIAL HOSPITAL (11736)													
2015	11	0	26	0	6	0	40	1	18	0	102	63,680	1.60 (1.31– 1.94)
2014	7	0	15	0	2	0	39	0	20	0	83	62,042	1.34 (1.07– 1.66)
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 HOSPITAL (11586)													
2015	1	0	14	0	1	0	5	1	2	0	24	13,866	1.73 (1.11– 2.58)
2014	0	0	4	0	0	0	7	0	1	0	12	14,210	0.84 (0.44– 1.48)
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)													
2015	3	0	5	0	1	0	17	1	3	0	30	16,423	1.83 (1.23– 2.61)
2014	0	0	0	0	0	0	15	0	0	0	15	16,385	0.92 (0.51– 1.51)
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)													
2015	18	0	41	0	5	0	28	2	18	0	112	58,181	1.93 (1.59– 2.32)
2014	19	0	34	1	6	0	45	1	23	0	129	56,806	2.27 (1.90– 2.70)
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)													
2015	2	0	5	0	3	0	5	0	3	0	18	10,032	1.79 (1.06– 2.84)
2014	1	0	4	0	2	0	6	1	4	3	21	10,668	1.97 (1.22– 3.01)
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)													
2015	8	2	51	0	24	2	40	3	22	0	152	59,625	2.55 (2.16– 2.99)
2014	16	4	20	3	30	2	23	3	39	3	143	56,671	2.52 (2.13– 2.97)
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)													
2015	3	0	0	0	4	0	16	1	15	0	39	40,079	0.97 (0.69– 1.33)
2014	4	0	0	0	1	0	15	2	4	0	26	29,926	0.87 (0.57– 1.27)
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)

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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)
CHILDRENS HOME OF PITTSBURGH, THE (12336)													
2015	1	1	0	2	0	0	0	0	1	0	5	7,057	0.71 (0.23– 1.65)
2014	1	0	0	5	0	0	0	0	1	0	7	4,856	1.44 (0.58– 2.97)
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)													
2015	128	87	140	3	11	0	55	24	78	14	540	161,599	3.34 (3.07– 3.64)
2014	106	54	89	89	16	0	73	47	88	11	573	154,804	3.70 (3.40– 4.02)
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)													
2015	53	9	47	1	2	0	55	3	26	7	203	86,337	2.35 (2.04– 2.70)
2014	42	11	18	15	1	0	33	5	30	6	161	91,318	1.76 (1.50– 2.06)
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, THE (12266)													
2015	2	0	0	0	0	0	0	0	0	0	2	7,485	0.27 (0.03– 0.97)
2014	0	1	0	2	0	0	0	2	0	0	5	7,606	0.66 (0.21– 1.53)
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)
CLARION HOSPITAL (11654)													
2015	1	0	7	0	3	0	8	1	5	1	26	9,819	2.65 (1.73– 3.88)
2014	0	0	5	1	1	0	10	0	9	0	26	9,556	2.72 (1.78– 3.99)
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)													
2015	0	0	0	0	0	0	0	0	0	0	0	25,391	0.00 (0.00– 0.15)
2014	0	4	0	0	0	0	0	0	0	0	4	24,450	0.16 (0.04– 0.42)
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)													
2015	0	0	0	0	0	0	0	0	0	0	0	73,104	0.00 (0.00– 0.05)
2014	0	0	0	0	0	0	0	0	0	0	0	84,033	0.00 (0.00– 0.04)
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)
CONEMAUGH MEMORIAL MEDICAL CENTER (10280)													
2015	36	2	39	4	7	0	62	4	37	1	192	110,501	1.74 (1.50– 2.00)
2014	34	5	41	4	6	1	56	2	24	2	175	112,061	1.56 (1.34– 1.81)
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)

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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)
CONEMAUGH MEYERSDALE MEDICAL CENTER (11968)													
2015	3	0	0	0	0	0	0	0	0	0	3	1,751	1.71 (0.35– 5.01)
2014	0	0	0	0	0	0	0	0	1	0	1	1,992	0.50 (0.01– 2.80)
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)
CONEMAUGH MINERS MEDICAL CENTER (12295)													
2015	0	0	0	0	0	0	0	0	0	0	0	2,247	0.00 (0.00– 1.64)
2014	0	0	0	0	0	0	0	0	1	0	1	2,640	0.38 (0.01– 2.11)
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)
COORDINATED HEALTH ORTHOPEDIC HOSPITAL LLC (11872)													
2015	0	0	0	0	0	0	6	0	0	0	6	2,888	2.08 (0.76– 4.52)
2014	1	0	0	0	0	0	3	0	1	0	5	2,886	1.73 (0.56– 4.04)
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)
CORY MEMORIAL HOSPITAL (12283)													
2015	1	0	0	0	0	0	1	0	0	0	2	2,737	0.73 (0.09– 2.64)
2014	0	0	0	1	2	0	2	0	2	0	7	2,572	2.72 (1.09– 5.61)
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)													
2015	1	0	2	0	0	0	0	0	12	0	15	8,983	1.67 (0.93– 2.75)
2014	0	0	2	1	0	0	0	1	4	0	8	9,690	0.83 (0.36– 1.63)
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 - SPRINGFIELD (11851)													
2015	0	0	2	0	1	0	1	0	0	0	4	3,685	1.09 (0.30– 2.78)
2014	0	0	2	0	0	0	2	0	0	0	4	3,694	1.08 (0.30– 2.77)
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)													
2015	5	0	22	0	1	0	3	0	7	0	38	28,405	1.34 (0.95– 1.84)
2014	9	1	16	0	6	0	6	1	5	0	44	25,842	1.70 (1.24– 2.29)
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)
CROZER CHESTER MEDICAL CENTER (11839)													
2015	16	0	55	0	0	0	22	2	30	0	125	63,819	1.96 (1.63– 2.33)
2014	16	0	35	0	1	1	33	8	46	0	140	68,013	2.06 (1.73– 2.43)
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)

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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)													
2015	0	10	1	0	5	0	0	3	1	0	20	58,941	0.34 (0.21– 0.52)
2014	0	7	2	0	6	0	0	5	3	1	24	60,329	0.40 (0.25– 0.59)
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)													
2015	2	0	7	0	1	0	7	1	2	1	21	35,872	0.59 (0.36– 0.89)
2014	6	1	9	0	0	0	14	0	2	0	32	36,073	0.89 (0.61– 1.25)
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)													
2015	0	3	0	0	0	0	0	1	0	0	4	11,693	0.34 (0.09– 0.88)
2014	0	4	0	0	0	0	0	0	0	0	4	10,926	0.37 (0.10– 0.94)
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)													
2015	0	0	0	0	0	2	0	2	0	0	4	5,816	0.69 (0.19– 1.76)
2014	0	2	0	0	0	0	0	1	0	0	3	5,994	0.50 (0.10– 1.46)
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)													
2015	11	0	53	1	7	1	41	2	17	1	134	47,334	2.83 (2.37– 3.35)
2014	0	0	47	0	4	1	30	0	30	2	114	48,898	2.33 (1.92– 2.80)
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)
EAGLEVILLE HOSPITAL (12965)													
2015	0	1	0	0	1	0	0	0	1	0	3	18,967	0.16 (0.03– 0.46)
2014	0	4	1	0	2	0	0	1	2	0	10	19,617	0.51 (0.24– 0.94)
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)													
2015	8	1	7	0	13	0	19	1	5	1	55	11,035	4.98 (3.75– 6.49)
2014	1	0	24	0	28	0	16	5	15	0	89	13,393	6.65 (5.34– 8.18)
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)													
2015	3	6	30	2	1	0	46	7	26	2	123	33,577	3.66 (3.04– 4.37)
2014	0	4	13	2	17	0	41	2	29	1	109	33,650	3.24 (2.66– 3.91)
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)													
2015	0	0	0	0	0	0	0	0	0	0	0	341	0.00 (0.00–10.82)
2014	0	0	0	0	0	0	0	0	0	0	0	346	0.00 (0.00–10.66)
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 AT ELKINS PARK (12500)													
2015	4	0	7	0	0	0	8	0	2	0	21	8,640	2.43 (1.50– 3.72)
2014	1	0	1	0	0	0	16	0	0	0	18	8,969	2.01 (1.19– 3.17)
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)
EINSTEIN MEDICAL CENTER MONTGOMERY (30210)													
2015	21	0	9	0	0	0	25	2	21	0	78	42,033	1.86 (1.47– 2.32)
2014	13	0	9	0	0	0	29	0	8	1	60	40,683	1.47 (1.13– 1.90)
2013	5	0	17	1	0	0	16	2	12	0	53	39,969	1.33 (0.99– 1.73)
2012	.	.	.	.	.	.	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.	.	.	.	.	.	.
ELLWOOD CITY HOSPITAL (11779)													
2015	2	2	7	0	2	0	3	0	5	2	23	10,495	2.19 (1.39– 3.29)
2014	1	2	9	0	4	0	3	0	6	0	25	10,327	2.42 (1.57– 3.57)
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)													
2015	0	0	2	0	0	0	3	0	0	0	5	4,139	1.21 (0.39– 2.82)
2014	0	0	0	0	0	0	0	0	0	0	0	3,860	0.00 (0.00– 0.96)
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)													
2015	1	0	12	0	5	2	28	0	5	0	53	27,350	1.94 (1.45– 2.53)
2014	0	0	18	0	4	0	24	1	7	0	54	25,466	2.12 (1.59– 2.77)
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)													
2015	3	1	14	0	4	1	23	0	14	1	61	22,696	2.69 (2.06– 3.45)
2014	1	3	5	2	6	0	26	2	16	0	61	22,122	2.76 (2.11– 3.54)
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)													
2015	3	0	12	0	7	0	2	0	4	0	28	9,172	3.05 (2.03– 4.41)
2014	0	0	9	0	3	0	1	0	5	0	18	10,832	1.66 (0.98– 2.63)
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)

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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)
EXCELA HEALTH LATROBE HOSPITAL (11651)													
2015	7	1	37	0	3	0	20	0	16	0	84	22,163	3.79 (3.02– 4.69)
2014	5	0	14	0	2	0	25	0	9	1	56	22,094	2.53 (1.91– 3.29)
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)													
2015	9	0	106	1	4	0	38	1	44	2	205	75,027	2.73 (2.37– 3.13)
2014	7	1	27	0	4	0	37	1	34	1	112	75,458	1.48 (1.22– 1.79)
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)													
2015	0	4	0	0	0	0	0	0	0	0	4	81,002	0.05 (0.01– 0.13)
2014	0	1	0	0	0	0	0	0	0	0	1	81,435	0.01 (0.00– 0.07)
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)
FIRST HOSPITAL OF WYOMING VALLEY (12050)													
2015	0	13	0	0	0	0	0	0	6	0	19	39,319	0.48 (0.29– 0.75)
2014	0	10	0	0	0	0	0	0	4	0	14	37,248	0.38 (0.21– 0.63)
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 HOSPITAL (11265)													
2015	25	1	63	0	5	0	46	1	32	1	174	75,148	2.32 (1.98– 2.69)
2014	12	3	40	4	8	1	47	2	28	2	147	79,832	1.84 (1.56– 2.16)
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)													
2015	0	18	12	0	2	2	0	10	5	0	49	771	63.55 (47.02–84.02)
2014	0	32	12	0	0	1	0	8	1	0	54	17,388	3.11 (2.33– 4.05)
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)													
2015	0	14	0	0	0	0	0	3	0	0	17	64,443	0.26 (0.15– 0.42)
2014	0	11	0	0	0	1	0	2	1	0	15	62,353	0.24 (0.13– 0.40)
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)													
2015	0	0	0	0	0	0	0	0	2	0	2	3,775	0.53 (0.06– 1.91)
2014	0	0	0	0	0	0	0	0	1	0	1	3,761	0.27 (0.01– 1.48)
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)

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Table 4.2.4 – Continued from previous page

	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Total	Patient Days	Crude Infection Rate per 1,000 Patient Days (95% CI)
GEISINGER HEALTHSOUTH REHABILITATION HOSPITAL (11993)													
2015	0	0	1	0	1	0	0	0	3	0	5	11,326	0.44 (0.14– 1.03)
2014	1	0	0	0	1	0	0	0	3	0	5	11,122	0.45 (0.15– 1.05)
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)													
2015	92	10	145	2	26	2	237	12	57	3	586	148,838	3.94 (3.62– 4.27)
2014	54	9	49	37	34	1	210	13	90	7	504	141,137	3.57 (3.27– 3.90)
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)													
2015	30	13	102	1	9	0	85	3	17	2	262	69,790	3.75 (3.31– 4.24)
2014	13	3	41	9	15	0	111	7	67	2	268	73,523	3.65 (3.22– 4.11)
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)													
2015	0	1	5	0	2	0	6	1	0	0	15	9,634	1.56 (0.87– 2.57)
2014	0	1	1	0	1	0	8	0	1	0	12	9,313	1.29 (0.67– 2.25)
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)													
2015	25	2	54	1	18	0	67	2	34	0	203	56,828	3.57 (3.10– 4.10)
2014	8	0	40	2	26	0	60	0	36	0	172	55,497	3.10 (2.65– 3.60)
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)
GEISINGER-LEWISTOWN HOSPITAL (11825)													
2015	1	0	8	0	1	0	16	1	2	0	29	25,574	1.13 (0.76– 1.63)
2014	1	0	5	0	5	0	13	1	3	0	28	24,948	1.12 (0.75– 1.62)
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)
GETTYSBURG HOSPITAL (11531)													
2015	2	0	19	0	2	0	22	0	4	0	49	20,587	2.38 (1.76– 3.15)
2014	3	0	7	0	1	0	20	2	7	0	40	19,313	2.07 (1.48– 2.82)
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)
GNADEN HUETTEN MEMORIAL HOSPITAL (12241)													
2015	2	0	11	1	5	0	3	0	9	0	31	18,083	1.71 (1.16– 2.43)
2014	2	0	3	0	5	0	8	1	6	0	25	18,770	1.33 (0.86– 1.97)
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)

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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)
GOOD SAMARITAN HOSPITAL, THE (11712)													
2015	5	0	12	0	8	0	21	0	9	1	56	38,229	1.46 (1.11– 1.90)
2014	2	0	1	4	10	0	8	2	11	3	41	38,800	1.06 (0.76– 1.43)
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)
GOOD SHEPHERD PENN PARTNERS AT RITTENHOUSE (13929)													
2015	9	0	14	0	5	0	0	2	17	1	48	8,833	5.43 (4.01– 7.20)
2014	15	0	14	44	12	0	0	1	37	2	125	9,423	13.27 (11.04–15.81)
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 REHABILITATION HOSPITAL, THE (11896)													
2015	4	39	12	0	7	0	0	9	60	0	131	27,650	4.74 (3.96– 5.62)
2014	5	24	9	7	2	0	0	8	54	1	110	28,742	3.83 (3.15– 4.61)
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)
GOOD SHEPHERD SPECIALTY HOSPITAL (11887)													
2015	14	20	24	0	10	0	0	20	34	3	125	9,897	12.63 (10.51–15.05)
2014	15	18	9	43	7	0	0	8	40	2	142	10,650	13.33 (11.23–15.72)
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)													
2015	7	0	12	0	4	0	17	1	24	0	65	40,164	1.62 (1.25– 2.06)
2014	1	0	2	0	11	0	17	0	28	1	60	40,456	1.48 (1.13– 1.91)
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)													
2015	0	0	5	0	0	0	0	0	1	1	7	7,373	0.95 (0.38– 1.96)
2014	1	0	2	0	0	0	2	0	2	0	7	7,752	0.90 (0.36– 1.86)
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)
GUTHRIE TOWANDA MEMORIAL HOSPITAL (12549)													
2015	0	0	0	1	0	0	4	0	0	0	5	4,854	1.03 (0.33– 2.40)
2014	0	0	0	1	0	0	2	0	0	0	3	4,790	0.63 (0.13– 1.83)
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)
HAHNEMANN UNIVERSITY HOSPITAL (11437)													
2015	43	4	136	2	8	4	70	16	63	3	349	101,895	3.43 (3.08– 3.80)
2014	37	12	107	4	10	3	76	16	98	2	365	110,786	3.29 (2.97– 3.65)
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)

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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)
HANOVER HOSPITAL (11899)													
2015	5	0	20	0	2	0	17	1	12	0	57	28,647	1.99 (1.51– 2.58)
2014	2	0	14	0	8	0	24	2	13	0	63	26,431	2.38 (1.83– 3.05)
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)													
2015	0	0	3	0	1	0	0	0	0	0	4	15,736	0.25 (0.07– 0.65)
2014	0	0	0	0	0	0	0	0	0	0	0	15,286	0.00 (0.00– 0.24)
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)
HAVEN BEHAVIORAL HOSPITAL OF PHILADELPHIA (37622)													
2015	0	0	0	0	0	0	0	0	1	0	1	9,131	0.11 (0.00– 0.61)
2014	.	.	.	.	.	.	.	.	.	.	.	.	.
2013	.	.	.	.	.	.	.	.	.	.	.	.	.
2012	.	.	.	.	.	.	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.	.	.	.	.	.	.
HEALTHSOUTH HARMARVILLE REHABILITATION HOSPITAL (11727)													
2015	4	0	12	1	2	0	0	4	31	0	54	25,849	2.09 (1.57– 2.73)
2014	7	0	5	2	1	0	0	1	28	0	44	29,465	1.49 (1.09– 2.00)
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)													
2015	2	1	10	0	0	0	0	1	8	0	22	16,450	1.34 (0.84– 2.02)
2014	2	1	0	0	0	0	0	0	11	0	14	15,946	0.88 (0.48– 1.47)
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)
HEALTHSOUTH READING REHABILITATION HOSPITAL (12139)													
2015	0	0	0	0	0	0	0	0	11	0	11	14,394	0.76 (0.38– 1.37)
2014	1	4	0	0	0	0	0	0	13	0	18	15,305	1.18 (0.70– 1.86)
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)													
2015	2	0	8	0	4	0	0	3	11	0	28	25,488	1.10 (0.73– 1.59)
2014	4	2	5	0	3	0	0	0	21	0	35	25,435	1.38 (0.96– 1.91)
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)													
2015	2	0	3	0	0	0	0	0	2	0	7	15,683	0.45 (0.18– 0.92)
2014	0	0	4	0	2	0	0	0	1	0	7	17,077	0.41 (0.16– 0.84)
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)

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Table 4.2.4 – Continued from previous page

	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Total	Patient Days	Crude Infection Rate per 1,000 Patient Days (95% CI)
HEALTHSOUTH REHABILITATION HOSPITAL OF MECHANICSBURG (12402)													
2015	4	12	9	0	1	0	0	0	12	0	38	16,172	2.35 (1.66– 3.23)
2014	2	0	1	0	0	0	0	0	14	0	17	18,129	0.94 (0.55– 1.50)
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)													
2015	3	0	8	0	0	0	0	2	13	0	26	12,988	2.00 (1.31– 2.93)
2014	0	0	13	0	1	0	0	4	6	0	24	13,177	1.82 (1.17– 2.71)
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)													
2015	2	11	26	0	15	0	0	3	13	0	70	22,140	3.16 (2.46– 3.99)
2014	5	12	6	4	5	0	0	6	34	0	72	20,604	3.49 (2.73– 4.40)
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)													
2015	1	0	1	0	4	0	9	3	2	0	20	10,893	1.84 (1.12– 2.84)
2014	1	0	1	0	2	0	10	0	4	0	18	8,575	2.10 (1.24– 3.32)
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)
HELEN M. SIMPSON REHABILITATION HOSPITAL (40371)													
2015	0	0	0	0	0	0	0	0	1	0	1	9,174	0.11 (0.00– 0.61)
2014	.	.	.	.	.	.	.	.	.	.	.	.	.
2013	.	.	.	.	.	.	.	.	.	.	.	.	.
2012	.	.	.	.	.	.	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.	.	.	.	.	.	.
HERITAGE VALLEY BEAVER (11831)													
2015	14	1	63	1	3	0	26	2	29	2	141	64,680	2.18 (1.84– 2.57)
2014	15	2	21	1	0	0	39	4	46	0	128	77,485	1.65 (1.38– 1.96)
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)													
2015	5	1	35	0	2	0	27	2	18	0	90	38,731	2.32 (1.87– 2.86)
2014	2	0	16	0	0	0	21	0	8	0	47	41,063	1.14 (0.84– 1.52)
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)													
2015	0	1	3	1	1	0	5	4	2	0	17	11,591	1.47 (0.85– 2.35)
2014	0	0	3	0	0	0	4	4	3	0	14	11,762	1.19 (0.65– 2.00)
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)

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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)
HOLY REDEEMER HOSPITAL (11973)													
2015	6	0	31	1	11	1	21	2	4	1	78	53,297	1.46 (1.16– 1.83)
2014	8	0	12	0	7	0	26	5	10	3	71	56,273	1.26 (0.99– 1.59)
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)
HOLY SPIRIT HOSPITAL (12387)													
2015	8	1	68	0	2	0	23	0	26	4	132	55,507	2.38 (1.99– 2.82)
2014	11	0	53	1	2	0	18	5	43	0	133	61,705	2.16 (1.80– 2.55)
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)													
2015	0	17	0	0	0	0	0	1	10	0	28	69,682	0.40 (0.27– 0.58)
2014	0	23	0	0	0	0	0	0	13	0	36	61,199	0.59 (0.41– 0.81)
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)													
2015	9	0	0	0	8	0	46	0	22	0	85	23,061	3.69 (2.94– 4.56)
2014	9	0	2	1	13	0	34	0	21	0	80	21,885	3.66 (2.90– 4.55)
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 UNIVERSITY OF PENNSYLVANIA (10219)													
2015	200	35	410	14	125	3	223	47	207	12	1,276	244,739	5.21 (4.93– 5.51)
2014	84	35	421	219	127	2	245	77	402	19	1,631	256,476	6.36 (6.05– 6.68)
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)													
2015	6	0	16	0	3	0	7	0	14	0	46	37,152	1.24 (0.91– 1.65)
2014	4	0	3	0	5	0	7	1	9	0	29	39,217	0.74 (0.50– 1.06)
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 HOSPITAL (11724)													
2015	0	1	8	0	10	0	18	0	8	0	45	9,741	4.62 (3.37– 6.18)
2014	0	0	4	0	4	0	20	1	7	0	36	9,027	3.99 (2.79– 5.52)
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)													
2015	3	0	29	0	4	0	12	0	5	1	54	30,376	1.78 (1.34– 2.32)
2014	3	0	22	0	5	0	16	0	7	0	53	35,508	1.49 (1.12– 1.95)
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)

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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)
JEANES HOSPITAL (11459)													
2015	5	0	20	0	7	0	7	2	13	0	54	33,796	1.60 (1.20– 2.08)
2014	5	0	9	0	3	0	5	7	19	0	48	33,971	1.41 (1.04– 1.87)
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 HOSPITAL (10237)													
2015	18	0	105	0	27	0	90	5	22	2	269	64,841	4.15 (3.67– 4.68)
2014	7	0	46	2	20	0	81	5	37	0	198	67,428	2.94 (2.54– 3.38)
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)													
2015	2	0	2	0	0	0	0	0	0	0	4	10,789	0.37 (0.10– 0.95)
2014	0	0	0	0	2	0	3	0	1	0	6	12,022	0.50 (0.18– 1.09)
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)													
2015	0	0	0	0	0	0	2	0	0	0	2	4,497	0.44 (0.05– 1.61)
2014	0	0	0	0	0	0	3	0	0	0	3	4,414	0.68 (0.14– 1.99)
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)
JOHN HEINZ INSTITUTE OF REHABILITATION (11861)													
2015	0	1	14	0	3	0	0	1	13	0	32	17,681	1.81 (1.24– 2.55)
2014	0	0	9	0	2	0	0	1	15	0	27	18,600	1.45 (0.96– 2.11)
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)													
2015	0	0	0	0	0	0	1	0	0	0	1	3,522	0.28 (0.01– 1.58)
2014	0	0	1	0	1	0	3	0	0	0	5	3,806	1.31 (0.43– 3.07)
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)													
2015	1	0	0	0	0	0	0	0	0	0	1	2,625	0.38 (0.01– 2.12)
2014	1	0	0	0	0	0	0	0	0	0	1	2,536	0.39 (0.01– 2.20)
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)													
2015	0	0	0	0	0	0	0	0	0	0	0	33,202	0.00 (0.00– 0.11)
2014	0	2	0	0	0	0	0	0	0	0	2	28,286	0.07 (0.01– 0.26)
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)

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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 - PHILADELPHIA (11832)													
2015	21	0	13	0	4	0	0	3	10	0	51	11,132	4.58 (3.41– 6.02)
2014	10	1	8	11	1	0	0	11	24	0	66	11,947	5.52 (4.27– 7.03)
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)													
2015	16	1	5	2	3	0	0	6	18	0	51	9,101	5.60 (4.17– 7.37)
2014	16	1	17	17	2	0	0	10	12	5	80	10,161	7.87 (6.24– 9.80)
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 AT HERITAGE VALLEY (12268)													
2015	8	0	13	0	1	0	0	0	7	0	29	7,204	4.03 (2.70– 5.78)
2014	3	0	18	0	0	0	0	0	8	0	29	7,953	3.65 (2.44– 5.24)
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 PHILADELPHIA-HAVERTOWN (12908)													
2015	16	0	18	0	2	0	0	1	10	0	47	12,069	3.89 (2.86– 5.18)
2014	7	0	22	2	0	0	0	3	9	0	43	13,913	3.09 (2.24– 4.16)
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 SOUTH PHILADELPHIA (11940)													
2015	10	0	18	0	1	0	0	0	12	0	41	10,546	3.89 (2.79– 5.27)
2014	0	0	0	2	2	0	0	2	3	1	10	12,158	0.82 (0.39– 1.51)
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)													
2015	0	0	0	0	0	0	0	0	0	0	0	10,430	0.00 (0.00– 0.35)
2014	0	1	0	0	0	0	0	0	2	0	3	5,130	0.58 (0.12– 1.71)
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)													
2015	48	2	115	1	18	1	129	7	42	2	365	150,321	2.43 (2.19– 2.69)
2014	55	0	36	12	17	2	174	9	40	2	347	151,559	2.29 (2.05– 2.54)
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)													
2015	5	0	3	0	2	0	23	3	10	0	46	25,430	1.81 (1.32– 2.41)
2014	4	0	5	0	1	0	13	1	8	0	32	25,054	1.28 (0.87– 1.80)
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)

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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)
LANCASTER REHABILITATION HOSPITAL (12628)													
2015	0	0	5	0	0	0	0	0	9	0	14	19,834	0.71 (0.39– 1.18)
2014	0	0	9	0	0	0	0	0	2	0	11	19,167	0.57 (0.29– 1.03)
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)													
2015	4	0	16	0	1	0	5	0	3	0	29	22,411	1.29 (0.87– 1.86)
2014	3	0	15	0	2	0	10	4	3	0	37	20,017	1.85 (1.30– 2.55)
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 - HAZLETON (11878)													
2015	9	2	17	6	2	0	19	2	18	1	76	32,943	2.31 (1.82– 2.89)
2014	4	1	59	6	6	0	18	6	24	0	124	31,188	3.98 (3.31– 4.74)
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)
LEHIGH VALLEY HOSPITAL - MUHLENBERG (11898)													
2015	16	0	30	1	0	0	20	0	17	1	85	41,817	2.03 (1.62– 2.51)
2014	12	1	10	0	2	0	24	1	10	1	61	45,559	1.34 (1.02– 1.72)
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)													
2015	129	2	173	3	15	0	189	6	199	6	722	216,650	3.33 (3.09– 3.58)
2014	95	3	124	47	4	1	176	11	252	6	719	219,888	3.27 (3.04– 3.52)
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)
LIFECARE HOSPITALS OF CHESTER COUNTY LLC (12005)													
2015	8	0	11	0	0	0	0	0	6	0	25	8,979	2.78 (1.80– 4.11)
2014	1	0	2	1	0	0	0	0	5	0	9	8,574	1.05 (0.48– 1.99)
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)													
2015	3	0	21	0	0	0	0	0	4	0	28	8,041	3.48 (2.31– 5.03)
2014	1	0	4	0	0	0	0	0	9	0	14	6,820	2.05 (1.12– 3.44)
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)
LIFECARE HOSPITALS OF PITTSBURGH - ALLE-KISKI CAMPUS (18955)													
2015	11	0	11	0	0	0	0	0	4	0	26	6,927	3.75 (2.45– 5.50)
2014	5	0	1	0	0	0	0	1	3	0	10	6,352	1.57 (0.75– 2.90)
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

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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 - MONROEVILLE (12254)													
2015	12	0	11	0	2	0	0	0	9	0	34	10,683	3.18 (2.20– 4.45)
2014	6	0	3	1	0	0	0	0	8	0	18	11,374	1.58 (0.94– 2.50)
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)													
2015	10	0	9	0	0	0	0	0	4	0	23	6,896	3.34 (2.11– 5.00)
2014	13	0	0	0	0	0	0	0	1	0	14	7,673	1.82 (1.00– 3.06)
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)													
2015	17	0	12	0	0	0	0	0	9	0	38	20,105	1.89 (1.34– 2.59)
2014	3	0	6	0	1	0	0	1	7	0	18	16,146	1.11 (0.66– 1.76)
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)													
2015	2	0	1	0	0	0	2	0	1	0	6	4,419	1.36 (0.50– 2.96)
2014	2	1	0	0	0	0	2	1	4	0	10	3,611	2.77 (1.33– 5.09)
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)													
2015	1	0	0	0	0	0	1	0	1	0	3	33,107	0.09 (0.02– 0.26)
2014	10	0	1	0	1	0	1	0	3	0	16	21,237	0.75 (0.43– 1.22)
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 REHABILITATION HOSPITAL (12146)													
2015	1	0	0	0	0	0	0	0	18	0	19	26,862	0.71 (0.43– 1.10)
2014	1	0	2	0	0	0	0	0	29	0	32	25,440	1.26 (0.86– 1.78)
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)													
2015	23	2	52	0	8	3	73	5	22	0	188	87,605	2.15 (1.85– 2.48)
2014	14	2	14	0	3	2	77	3	11	1	127	101,499	1.25 (1.04– 1.49)
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)													
2015	12	2	39	1	19	0	39	0	19	0	131	56,487	2.32 (1.94– 2.75)
2014	11	2	32	3	15	3	33	0	23	1	123	55,634	2.21 (1.84– 2.64)
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)

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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 BRYN MAWR (11753)													
2015	20	2	36	0	2	0	29	2	40	0	131	62,504	2.10 (1.75– 2.49)
2014	15	1	38	1	5	0	37	4	55	0	156	64,525	2.42 (2.05– 2.83)
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)													
2015	2	1	11	0	3	0	0	1	24	1	43	36,267	1.19 (0.86– 1.60)
2014	0	0	8	0	1	0	0	1	48	0	58	36,576	1.59 (1.20– 2.05)
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)
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)													
2015	31	0	35	1	10	0	53	6	50	3	189	90,126	2.10 (1.81– 2.42)
2014	16	3	28	26	12	1	47	7	45	2	187	82,286	2.27 (1.96– 2.62)
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)
MEADOWS PSYCHIATRIC CENTER, THE (12156)													
2015	0	0	0	0	1	0	0	0	1	0	2	35,339	0.06 (0.01– 0.20)
2014	0	5	0	0	0	0	0	0	1	0	6	34,539	0.17 (0.06– 0.38)
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)
MEADVILLE MEDICAL CENTER (11583)													
2015	7	4	35	0	8	0	17	2	11	0	84	35,993	2.33 (1.86– 2.89)
2014	5	12	24	0	2	0	13	2	25	0	83	36,576	2.27 (1.81– 2.81)
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)													
2015	0	1	7	0	2	0	15	0	1	0	26	17,996	1.44 (0.94– 2.12)
2014	4	0	6	0	0	0	6	1	6	0	23	18,203	1.26 (0.80– 1.90)
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)
MERCY FITZGERALD HOSPITAL (11683)													
2015	16	3	26	0	6	0	13	5	8	4	81	39,648	2.04 (1.62– 2.54)
2014	21	4	16	0	4	0	26	2	33	2	108	40,953	2.64 (2.16– 3.18)
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)													
2015	5	0	11	0	1	0	4	0	1	0	22	40,099	0.55 (0.34– 0.83)
2014	3	0	8	0	0	0	3	0	2	0	16	37,345	0.43 (0.24– 0.70)
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)

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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)
MERCY SUBURBAN HOSPITAL (11952)													
2015	4	0	7	0	1	0	10	0	0	1	23	16,957	1.36 (0.86– 2.04)
2014	4	0	2	0	0	0	13	0	2	0	21	20,009	1.05 (0.65– 1.60)
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)
MILLCREEK COMMUNITY HOSPITAL (12253)													
2015	0	0	0	0	0	0	2	0	21	0	23	27,966	0.82 (0.52– 1.23)
2014	1	0	0	3	0	0	3	0	15	1	23	28,656	0.80 (0.51– 1.20)
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)													
2015	106	29	159	1	11	0	154	12	87	23	582	184,100	3.16 (2.91– 3.43)
2014	79	15	106	53	10	0	132	16	108	13	532	155,105	3.43 (3.14– 3.73)
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)
MONONGAHELA VALLEY HOSPITAL (11069)													
2015	8	2	49	0	18	0	26	0	19	0	122	49,387	2.47 (2.05– 2.95)
2014	7	1	21	0	16	0	31	3	26	0	105	48,793	2.15 (1.76– 2.61)
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)													
2015	0	0	0	0	0	0	0	0	0	0	0	19,592	0.00 (0.00– 0.19)
2014	0	0	0	0	0	0	0	0	0	0	0	19,452	0.00 (0.00– 0.19)
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)													
2015	7	3	17	0	10	1	21	1	1	0	61	49,915	1.22 (0.93– 1.57)
2014	4	2	13	0	10	1	18	4	9	0	61	48,344	1.26 (0.97– 1.62)
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)
MOSS REHABILITATION (12508)													
2015	1	0	10	0	0	0	0	0	29	0	40	45,637	0.88 (0.63– 1.19)
2014	3	5	8	1	1	0	0	3	26	1	48	44,198	1.09 (0.80– 1.44)
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)
MOUNT NITTANY MEDICAL CENTER (11797)													
2015	8	0	53	0	0	2	45	0	21	1	130	61,159	2.13 (1.78– 2.52)
2014	5	3	34	3	6	2	67	1	31	0	152	57,047	2.66 (2.26– 3.12)
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)

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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)
MUNCY VALLEY HOSPITAL (11748)													
2015	0	1	1	0	2	0	0	1	1	0	6	4,241	1.41 (0.52– 3.08)
2014	1	0	1	0	0	0	0	0	1	0	3	4,415	0.68 (0.14– 1.99)
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)													
2015	0	0	1	0	0	0	7	0	0	0	8	6,824	1.17 (0.51– 2.31)
2014	0	0	0	0	0	0	6	0	1	0	7	7,228	0.97 (0.39– 2.00)
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)													
2015	4	0	26	0	5	0	11	1	16	0	63	35,651	1.77 (1.36– 2.26)
2014	21	0	23	0	6	0	17	4	33	0	104	40,226	2.59 (2.11– 3.13)
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)													
2015	0	30	0	5	0	3	0	13	4	0	55	92,895	0.59 (0.45– 0.77)
2014	0	38	0	2	0	0	0	3	2	0	45	93,918	0.48 (0.35– 0.64)
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)													
2015	2	0	6	0	0	0	3	0	1	0	12	22,918	0.52 (0.27– 0.91)
2014	1	0	0	0	0	0	4	1	2	0	8	21,491	0.37 (0.16– 0.73)
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)
OSS ORTHOPAEDIC HOSPITAL (18467)													
2015	0	0	2	0	0	0	13	0	3	0	18	4,315	4.17 (2.47– 6.59)
2014	0	0	1	0	0	0	14	0	4	0	19	4,145	4.58 (2.76– 7.16)
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)													
2015	1	0	7	1	5	0	1	0	7	1	23	11,750	1.96 (1.24– 2.94)
2014	0	0	2	0	3	0	7	0	2	0	14	12,240	1.14 (0.63– 1.92)
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 HIGHLANDS BROOKVILLE (12418)													
2015	1	0	0	0	0	0	0	0	2	0	3	6,925	0.43 (0.09– 1.27)
2014	0	0	0	0	0	0	0	0	1	0	1	4,874	0.21 (0.01– 1.14)
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)

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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)
PENN HIGHLANDS CLEARFIELD (11843)													
2015	0	0	0	0	0	0	1	0	1	0	2	10,165	0.20 (0.02– 0.71)
2014	0	0	2	0	0	0	1	0	0	0	3	11,297	0.27 (0.05– 0.78)
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)
PENN HIGHLANDS DUBOIS (11606)													
2015	5	1	35	0	2	1	20	2	10	1	77	44,225	1.74 (1.37– 2.18)
2014	5	4	14	8	4	2	19	2	14	1	73	44,838	1.63 (1.28– 2.05)
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)
PENN HIGHLANDS ELK (11859)													
2015	0	0	1	0	1	0	3	0	0	0	5	8,972	0.56 (0.18– 1.30)
2014	0	0	2	0	0	0	7	0	0	0	9	10,543	0.85 (0.39– 1.62)
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)
PENN PRESBYTERIAN MEDICAL CENTER (11814)													
2015	48	4	75	2	14	1	80	7	41	4	276	78,297	3.53 (3.12– 3.97)
2014	37	1	20	10	3	0	56	2	48	4	181	63,103	2.87 (2.47– 3.32)
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)													
2015	0	0	0	0	0	0	0	0	13	0	13	17,458	0.74 (0.40– 1.27)
2014	0	0	4	0	0	0	0	0	27	0	31	18,144	1.71 (1.16– 2.43)
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 HOSPITAL OF THE UNIVERSITY OF PA HEALTH SYS (11448)													
2015	54	2	55	0	26	3	119	19	41	7	326	93,938	3.47 (3.10– 3.87)
2014	32	4	52	7	24	5	115	14	66	4	323	96,178	3.36 (3.00– 3.75)
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)													
2015	0	7	4	0	1	0	0	0	2	0	14	19,089	0.73 (0.40– 1.23)
2014	0	2	0	0	0	0	0	1	2	0	5	19,057	0.26 (0.09– 0.61)
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)													
2015	0	17	0	0	1	0	0	5	7	0	30	34,924	0.86 (0.58– 1.23)
2014	1	28	3	1	0	1	0	8	5	0	47	34,882	1.35 (0.99– 1.79)
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)

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Table 4.2.4 – Continued from previous page

	BSI	EENT	GI	LRI	PNEU	REPR	SSI	SST	UTI	Other	Total	Patient Days	Crude Infection Rate per 1,000 Patient Days (95% CI)
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)													
2015	4	0	19	0	7	0	14	0	17	0	61	37,090	1.64 (1.26– 2.11)
2014	2	0	11	1	9	0	14	0	22	1	60	35,174	1.71 (1.30– 2.20)
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)													
2015	0	0	0	0	0	0	1	0	0	0	1	1,401	0.71 (0.02– 3.98)
2014	0	0	0	0	0	0	1	0	0	0	1	1,341	0.75 (0.02– 4.15)
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 - COMMUNITY GENERAL OSTEOPATHIC HOSPITAL (34069)													
2015	13	1	34	0	1	1	33	2	7	1	93	38,633	2.41 (1.94– 2.95)
2014	14	0	28	2	7	0	42	7	32	2	134	48,295	2.77 (2.32– 3.29)
2013	.	.	.	.	.	.	.	.	.	.	.	.	.
2012	.	.	.	.	.	.	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.	.	.	.	.	.	.
PINNACLE HEALTH HOSPITALS - HARRISBURG HOSPITAL (34068)													
2015	24	1	73	1	9	0	72	6	33	5	224	93,348	2.40 (2.10– 2.74)
2014	16	5	77	3	6	0	79	17	75	1	279	105,146	2.65 (2.35– 2.98)
2013	.	.	.	.	.	.	.	.	.	.	.	.	.
2012	.	.	.	.	.	.	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.	.	.	.	.	.	.
PINNACLE HEALTH HOSPITALS - WEST SHORE HOSPITAL (35123)													
2015	8	1	27	0	2	0	21	1	10	3	73	29,091	2.51 (1.97– 3.16)
2014	.	.	.	.	.	.	.	.	.	.	.	.	.
2013	.	.	.	.	.	.	.	.	.	.	.	.	.
2012	.	.	.	.	.	.	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.	.	.	.	.	.	.
POCONO MEDICAL CENTER (11772)													
2015	10	5	21	0	7	1	30	1	11	0	86	53,092	1.62 (1.30– 2.00)
2014	6	1	12	0	6	0	50	2	11	0	88	48,377	1.82 (1.46– 2.24)
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)
POST ACUTE MEDICAL SPECIALTY HOSPITAL OF WILKES-BARRE (12604)													
2015	19	0	21	0	3	0	0	2	9	0	54	13,221	4.08 (3.07– 5.33)
2014	5	0	8	6	1	0	0	1	6	0	27	8,262	3.27 (2.15– 4.75)
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)
POTTSTOWN MEMORIAL MEDICAL CENTER (11983)													
2015	5	0	0	0	11	2	29	0	21	0	68	39,499	1.72 (1.34– 2.18)
2014	7	2	7	1	11	1	22	4	16	0	71	38,922	1.82 (1.42– 2.30)
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)

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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)
PUNXSUTAWNEY AREA HOSPITAL (11830)													
2015	1	0	3	1	2	0	2	0	3	0	12	8,931	1.34 (0.69– 2.35)
2014	0	2	6	0	4	0	8	0	4	0	24	8,655	2.77 (1.78– 4.13)
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 (12375)													
2015	38	4	153	2	17	2	205	18	71	13	523	161,227	3.24 (2.97– 3.53)
2014	48	5	59	8	4	1	167	17	136	13	458	163,481	2.80 (2.55– 3.07)
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)													
2015	8	0	29	0	1	0	8	0	8	0	54	47,980	1.13 (0.85– 1.47)
2014	3	0	16	0	1	0	5	0	10	0	35	46,820	0.75 (0.52– 1.04)
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)													
2015	9	0	29	0	5	0	13	0	14	0	70	40,887	1.71 (1.33– 2.16)
2014	13	0	8	0	5	0	16	0	23	0	65	42,659	1.52 (1.18– 1.94)
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)													
2015	13	0	51	1	7	0	23	1	12	0	108	64,154	1.68 (1.38– 2.03)
2014	10	1	50	5	6	0	24	1	21	0	118	64,027	1.84 (1.53– 2.21)
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)
ROTHMAN ORTHOPAEDIC SPECIALTY HOSPITAL (15202)													
2015	0	0	0	0	0	0	2	0	0	0	2	2,111	0.95 (0.11– 3.42)
2014	0	0	0	0	0	0	0	0	0	0	0	1,468	0.00 (0.00– 2.51)
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)
ROXBOROUGH MEMORIAL HOSPITAL (11978)													
2015	1	0	3	0	0	0	1	0	1	0	6	22,296	0.27 (0.10– 0.59)
2014	1	0	0	0	1	0	0	0	1	0	3	22,567	0.13 (0.03– 0.39)
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)													
2015	0	6	0	0	0	0	0	3	0	0	9	15,814	0.57 (0.26– 1.08)
2014	0	10	0	0	0	0	0	2	0	0	12	2,411	4.98 (2.57– 8.69)
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)

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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)
SACRED HEART HOSPITAL (11684)													
2015	1	0	8	0	3	0	21	0	6	0	39	29,550	1.32 (0.94– 1.80)
2014	5	0	5	2	2	1	15	0	16	0	46	31,223	1.47 (1.08– 1.97)
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)
SAINT VINCENT HOSPITAL (11699)													
2015	16	1	80	0	19	1	106	5	41	2	271	72,378	3.74 (3.31– 4.22)
2014	11	5	69	5	15	2	87	4	61	0	259	76,357	3.39 (2.99– 3.83)
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)
SCHUYLKILL MEDICAL CENTER - EAST NORWEGIAN STREET (11922)													
2015	0	2	8	0	5	0	14	0	11	1	41	22,631	1.81 (1.30– 2.46)
2014	2	3	3	0	14	0	7	3	11	1	44	24,025	1.83 (1.33– 2.46)
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)													
2015	4	2	2	0	4	0	12	0	4	0	28	28,355	0.99 (0.66– 1.43)
2014	3	1	2	2	10	1	17	1	10	0	47	32,746	1.44 (1.05– 1.91)
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)
SELECT SPECIALTY HOSPITAL - ERIE (11880)													
2015	8	0	8	0	2	0	0	1	22	1	42	10,208	4.11 (2.97– 5.56)
2014	3	0	11	4	4	0	0	4	25	2	53	8,648	6.13 (4.59– 8.02)
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 SPECIALTY HOSPITAL - CENTRAL PA (13921)													
2015	5	0	8	1	0	0	0	0	7	0	21	10,648	1.97 (1.22– 3.01)
2014	7	0	9	0	7	0	0	0	14	2	39	10,284	3.79 (2.70– 5.18)
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)													
2015	4	0	7	0	2	0	0	1	13	0	27	10,227	2.64 (1.74– 3.84)
2014	11	2	7	2	7	0	0	1	31	0	61	10,293	5.93 (4.53– 7.61)
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 - CENTRAL PENNSYLVANIA (YORK) (12334)													
2015	8	0	5	0	0	0	0	0	2	0	15	5,926	2.53 (1.42– 4.17)
2014	1	1	6	0	0	0	0	0	9	0	17	5,770	2.95 (1.72– 4.72)
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)

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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 SPECIALTY HOSPITAL - DANVILLE (12123)													
2015	5	0	8	0	0	0	0	0	4	1	18	8,825	2.04 (1.21– 3.22)
2014	0	0	2	0	0	0	0	0	2	0	4	6,510	0.61 (0.17– 1.57)
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 - JOHNSTOWN (12299)													
2015	4	0	15	0	0	0	0	0	0	0	19	11,706	1.62 (0.98– 2.53)
2014	4	0	13	0	3	0	0	1	7	0	28	10,221	2.74 (1.82– 3.96)
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 - MCKEESPORT, INC. (12271)													
2015	2	0	6	4	0	0	0	1	3	0	16	6,745	2.37 (1.36– 3.85)
2014	7	0	1	0	0	0	0	0	1	0	9	6,946	1.30 (0.59– 2.46)
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)													
2015	7	0	5	0	2	0	0	0	2	0	16	9,645	1.66 (0.95– 2.69)
2014	6	0	2	1	3	0	0	0	7	0	19	9,533	1.99 (1.20– 3.11)
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)													
2015	1	0	12	0	0	0	0	0	0	0	13	8,276	1.57 (0.84– 2.69)
2014	5	0	7	1	0	0	0	1	5	0	19	7,100	2.68 (1.61– 4.18)
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)													
2015	2	0	0	0	0	0	20	3	3	0	28	31,627	0.89 (0.59– 1.28)
2014	1	0	0	2	6	0	21	0	9	0	39	38,092	1.02 (0.73– 1.40)
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 HOSPITALS FOR CHILDREN - PHILA (12244)													
2015	0	0	4	0	0	0	1	1	2	0	8	4,045	1.98 (0.85– 3.90)
2014	0	0	1	0	0	0	6	0	6	0	13	4,361	2.98 (1.59– 5.10)
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)
SOLDIERS AND SAILORS MEMORIAL HOSPITAL (11688)													
2015	2	1	7	0	8	0	5	2	3	1	29	8,406	3.45 (2.31– 4.95)
2014	2	1	8	2	3	0	6	2	2	0	26	10,117	2.57 (1.68– 3.77)
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)

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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)
SOMERSET HOSPITAL (12282)													
2015	0	0	0	0	0	0	4	0	0	0	4	17,325	0.23 (0.06– 0.59)
2014	1	0	2	0	1	0	2	0	0	0	6	15,166	0.40 (0.15– 0.86)
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)													
2015	0	0	0	0	0	0	1	0	2	0	3	9,573	0.31 (0.06– 0.92)
2014	2	0	0	0	0	0	2	0	3	0	7	10,418	0.67 (0.27– 1.38)
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)													
2015	0	0	0	0	0	0	0	0	0	0	0	18,003	0.00 (0.00– 0.20)
2014	0	0	0	0	0	0	0	0	0	0	0	17,291	0.00 (0.00– 0.21)
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)
ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)													
2015	17	13	23	0	1	0	19	5	4	0	82	41,688	1.97 (1.56– 2.44)
2014	12	18	12	12	1	0	15	2	8	3	83	40,772	2.04 (1.62– 2.52)
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)													
2015	2	0	49	0	5	0	59	1	14	0	130	80,862	1.61 (1.34– 1.91)
2014	4	0	36	2	3	0	52	2	13	0	112	86,277	1.30 (1.07– 1.56)
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)													
2015	0	0	0	0	0	0	0	1	0	0	1	14,176	0.07 (0.00– 0.39)
2014	0	0	0	0	0	0	0	0	1	0	1	13,998	0.07 (0.00– 0.40)
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 CTR (11961)													
2015	13	0	30	0	5	0	31	0	16	1	96	34,405	2.79 (2.26– 3.41)
2014	7	0	20	0	0	1	31	0	7	1	67	32,614	2.05 (1.59– 2.61)
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)													
2015	9	0	2	0	7	0	1	0	8	0	27	30,609	0.88 (0.58– 1.28)
2014	12	0	0	0	12	0	4	0	21	1	50	30,140	1.66 (1.23– 2.19)
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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	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 BETHLEHEM (11718)													
2015	33	15	92	2	40	0	89	7	89	1	368	154,413	2.38 (2.15– 2.64)
2014	30	8	51	11	27	1	83	16	88	3	318	150,512	2.11 (1.89– 2.36)
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 HOSPITAL- ANDERSON CAMPUS (21487)													
2015	0	0	12	0	1	0	9	0	5	0	27	25,843	1.04 (0.69– 1.52)
2014	2	0	12	0	3	0	10	0	9	0	36	22,218	1.62 (1.13– 2.24)
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 MINERS MEMORIAL HOSPITAL (11784)													
2015	0	0	9	0	0	0	3	0	1	1	14	7,326	1.91 (1.04– 3.21)
2014	0	0	1	0	0	1	4	1	2	0	9	7,403	1.22 (0.56– 2.31)
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)													
2015	1	1	5	0	2	0	4	0	3	0	16	13,465	1.19 (0.68– 1.93)
2014	0	0	1	0	0	0	3	2	2	0	8	13,846	0.58 (0.25– 1.14)
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)													
2015	22	7	106	1	23	2	80	4	58	3	306	91,097	3.36 (2.99– 3.76)
2014	20	2	93	2	20	2	68	4	93	0	304	98,939	3.07 (2.74– 3.44)
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 REHABILITATION HOSPITAL LLP (36959)													
2015	2	0	4	0	3	0	0	4	30	0	43	13,877	3.10 (2.24– 4.17)
2014	.	.	.	.	.	.	.	.	.	.	.	.	.
2013	.	.	.	.	.	.	.	.	.	.	.	.	.
2012	.	.	.	.	.	.	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.	.	.	.	.	.	.
SUNBURY COMMUNITY HOSP (12105)													
2015	0	0	0	0	2	0	3	0	0	0	5	5,429	0.92 (0.30– 2.15)
2014	0	0	0	0	0	0	0	0	0	0	0	6,350	0.00 (0.00– 0.58)
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)													
2015	0	0	0	0	0	0	5	0	2	0	7	1,816	3.85 (1.55– 7.94)
2014	0	0	0	0	0	0	8	0	0	0	8	1,693	4.73 (2.04– 9.31)
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)

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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)
SURGICAL SPECIALTY CENTER AT COORDINATED HEALTH, THE (15259)													
2015	0	0	0	0	0	0	5	0	3	0	8	2,422	3.30 (1.43– 6.51)
2014	0	0	0	0	0	0	4	0	0	0	4	1,955	2.05 (0.56– 5.24)
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)													
2015	59	4	70	1	20	0	59	4	125	2	344	149,928	2.29 (2.06– 2.55)
2014	28	5	36	10	9	0	64	7	78	0	237	146,564	1.62 (1.42– 1.84)
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)
THOMAS JEFFERSON UNIVERSITY HOSPITAL - METHODIST (12017)													
2015	12	0	37	0	12	0	14	4	21	5	105	70,561	1.49 (1.22– 1.80)
2014	11	0	17	1	13	1	14	5	32	0	94	51,933	1.81 (1.46– 2.22)
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 UNIVERSITY HOSPITAL (11506)													
2015	130	5	211	2	71	2	219	23	164	8	835	192,758	4.33 (4.04– 4.64)
2014	117	10	157	90	64	5	256	10	198	3	910	195,809	4.65 (4.35– 4.96)
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)													
2015	0	0	0	0	0	0	5	0	2	0	7	5,162	1.36 (0.55– 2.79)
2014	.	.	.	.	.	.	.	.	.	.	.	.	.
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)													
2015	0	8	0	0	0	1	0	2	0	0	11	40,960	0.27 (0.13– 0.48)
2014	0	0	0	0	1	0	0	3	1	0	5	36,947	0.14 (0.04– 0.32)
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)													
2015	0	0	4	0	0	0	0	0	2	0	6	6,879	0.87 (0.32– 1.90)
2014	0	0	3	0	1	0	0	0	3	0	7	7,070	0.99 (0.40– 2.04)
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)													
2015	0	0	0	0	0	0	1	0	0	0	1	2,093	0.48 (0.01– 2.66)
2014	0	0	0	0	0	0	0	0	0	0	0	3,430	0.00 (0.00– 1.08)
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)													
2015	0	0	0	0	0	0	9	0	0	0	9	2,530	3.56 (1.63– 6.75)
2014	0	0	0	0	0	0	4	0	0	0	4	2,290	1.75 (0.48– 4.47)
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)													
2015	5	0	9	0	7	0	14	0	18	0	53	37,577	1.41 (1.06– 1.84)
2014	4	0	14	0	16	0	21	3	16	0	74	41,357	1.79 (1.40– 2.25)
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 ALTOONA (10178)													
2015	50	0	39	0	59	0	65	5	45	3	266	87,354	3.05 (2.69– 3.43)
2014	20	0	5	0	30	1	52	2	77	1	188	81,988	2.29 (1.98– 2.65)
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)
UPMC BEDFORD (11680)													
2015	0	0	4	0	4	0	2	0	0	0	10	6,429	1.56 (0.75– 2.86)
2014	1	0	0	0	1	0	4	1	0	0	7	7,219	0.97 (0.39– 2.00)
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)													
2015	9	0	42	0	9	0	22	4	25	2	113	46,066	2.45 (2.02– 2.95)
2014	9	0	14	1	3	0	14	2	21	0	64	42,254	1.51 (1.17– 1.93)
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)													
2015	39	1	74	0	19	0	85	12	76	0	306	90,868	3.37 (3.00– 3.77)
2014	30	3	61	0	19	0	111	12	84	0	320	86,141	3.71 (3.32– 4.14)
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)													
2015	6	0	26	0	15	1	28	2	14	2	94	32,110	2.93 (2.37– 3.58)
2014	4	0	10	1	17	0	19	1	18	0	70	33,387	2.10 (1.63– 2.65)
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)													
2015	7	1	26	0	10	0	13	5	11	2	75	45,027	1.67 (1.31– 2.09)
2014	6	4	21	5	6	0	10	5	30	0	87	49,590	1.75 (1.41– 2.16)
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)

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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 MERCY (10384)													
2015	28	4	85	3	17	0	58	10	93	1	299	131,690	2.27 (2.02– 2.54)
2014	28	2	49	1	5	0	87	6	122	3	303	134,664	2.25 (2.00– 2.52)
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)													
2015	3	1	15	1	2	0	11	6	6	1	46	29,589	1.55 (1.14– 2.07)
2014	2	0	11	3	5	2	23	4	7	1	58	32,984	1.76 (1.34– 2.27)
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)													
2015	37	4	116	0	15	1	149	8	73	3	406	90,252	4.50 (4.07– 4.96)
2014	18	2	53	5	17	0	108	2	67	2	274	98,593	2.78 (2.46– 3.13)
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 - SHADYSIDE (10118)													
2015	124	13	212	6	74	10	227	29	122	25	842	148,882	5.66 (5.28– 6.05)
2014	23	19	158	6	53	1	238	24	152	2	676	145,787	4.64 (4.29– 5.00)
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 (10348)													
2015	147	15	306	5	105	1	391	33	226	29	1,258	207,546	6.06 (5.73– 6.41)
2014	99	16	197	25	98	0	318	40	411	13	1,217	216,611	5.62 (5.31– 5.94)
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)
UPMC ST. MARGARET (11561)													
2015	18	1	84	0	14	0	60	5	68	1	251	66,909	3.75 (3.30– 4.25)
2014	17	0	36	3	17	0	48	5	64	0	190	70,654	2.69 (2.32– 3.10)
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)													
2015	0	0	0	0	0	0	0	0	0	0	0	16,980	0.00 (0.00– 0.22)
2014	0	0	0	0	0	0	0	0	0	0	0	15,363	0.00 (0.00– 0.24)
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)													
2015	0	0	10	0	2	2	6	0	6	0	26	14,133	1.84 (1.20– 2.70)
2014	0	0	4	0	2	0	10	0	3	0	19	14,525	1.31 (0.79– 2.04)
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)

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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)
WARREN STATE HOSPITAL (12081)													
2015	0	0	0	0	0	0	0	0	0	0	0	59,130	0.00 (0.00– 0.06)
2014	0	0	0	0	0	0	0	0	0	0	0	61,676	0.00 (0.00– 0.06)
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)
WASHINGTON HOSPITAL, THE (11460)													
2015	6	0	35	3	10	0	19	4	12	0	89	54,096	1.65 (1.32– 2.02)
2014	1	0	29	0	10	0	22	1	30	0	93	52,992	1.75 (1.42– 2.15)
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)
WAYNE MEMORIAL HOSPITAL (12004)													
2015	2	0	6	0	3	2	7	0	5	1	26	16,448	1.58 (1.03– 2.32)
2014	1	2	5	0	7	0	15	0	6	0	36	16,887	2.13 (1.49– 2.95)
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)													
2015	0	1	1	1	3	1	2	0	0	0	9	8,596	1.05 (0.48– 1.99)
2014	1	1	1	2	2	0	6	0	1	0	14	8,868	1.58 (0.86– 2.65)
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)													
2015	0	8	6	0	2	0	15	1	26	0	58	17,003	3.41 (2.59– 4.41)
2014	1	0	5	0	3	0	8	3	26	0	46	16,960	2.71 (1.99– 3.62)
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)													
2015	0	1	0	0	0	0	0	0	1	0	2	94,018	0.02 (0.00– 0.08)
2014	0	0	0	0	0	0	0	0	0	0	0	94,320	0.00 (0.00– 0.04)
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)
WEST PENN HOSPITAL (11864)													
2015	29	5	35	0	11	6	66	6	16	2	176	67,175	2.62 (2.25– 3.04)
2014	16	4	23	11	18	0	39	3	27	2	143	62,189	2.30 (1.94– 2.71)
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)
WESTERN PSYCHIATRIC INSTITUTE AND CLINIC (13702)													
2015	1	7	15	0	1	1	0	3	18	0	46	93,517	0.49 (0.36– 0.66)
2014	1	8	6	1	1	0	0	7	21	0	45	97,915	0.46 (0.34– 0.61)
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)

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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)
WILKES-BARRE GENERAL HOSPITAL (11916)													
2015	11	2	42	0	22	0	57	5	17	0	156	75,937	2.05 (1.74– 2.40)
2014	21	5	27	2	22	0	47	4	41	0	169	82,084	2.06 (1.76– 2.39)
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)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)													
2015	7	17	31	0	18	0	29	10	11	0	123	50,463	2.44 (2.03– 2.91)
2014	11	35	21	0	8	0	21	13	18	3	130	53,831	2.41 (2.02– 2.87)
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)
WILLS EYE HOSPITAL (34846)													
2015	0	0	0	0	0	0	0	0	0	0	0	103	0.00 (0.00–35.81)
2014	0	0	0	0	0	0	0	0	0	0	0	170	0.00 (0.00–21.70)
2013	.	.	.	.	.	.	.	.	.	.	.	.	.
2012	.	.	.	.	.	.	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.	.	.	.	.	.	.
WINDBER HOSPITAL (12031)													
2015	0	0	0	0	0	0	5	0	3	0	8	4,477	1.79 (0.77– 3.52)
2014	0	0	0	0	0	0	4	0	3	0	7	5,609	1.25 (0.50– 2.57)
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)													
2015	27	17	138	1	31	0	172	23	69	18	496	177,103	2.80 (2.56– 3.06)
2014	19	10	102	59	65	0	165	36	127	6	589	167,963	3.51 (3.23– 3.80)
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 2015, urinary tract infections constitute the second most commonly reported category of HAIs in Pennsylvania, with 4,478 (18.96 percent; see Table 4.2.2) occurrences. Almost half (1,797 or 40.13 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 2015, a total of 1,465,489 urinary catheter days (Table 4.3.1) were reported by 228 Pennsylvania hospitals (urinary catheter days ranged from a low of four for the year to a high of 62,216 among the 228 hospitals). The number of hospitals that reported using urinary catheters in 2015 represents 90.84 percent of the 251 hospitals that reported data through NHSN. The 23 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, 2009–2015

	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)
2015	1,797	1,465,489	1.23 (1.17–1.28)	– 32.46 (– 37.83)	9,774,027	0.15	– 2.67 (– 21.83)
2014	2,725	1,500,982	1.82 (1.75–1.88)	– 4.52 (– 7.95)	9,743,208	0.15	– 7.30 (– 19.68)
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)
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)
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)
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)
2009	3,935	1,995,114	1.97 (1.91–2.03)	.	10,402,161	0.19	.

The number of urinary catheter days (1,995,114), divided by the total number of patient days (10,402,161) reported in 2015 produces a DUR of 0.1, meaning that a urinary catheter was used 15.0 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 surgical intensive care units (65.3 percent of the time), in surgical trauma intensive care units (64.8 percent of the time) and in cardiothoracic critical care units (63.0 percent of the time).

Among the 228 hospitals that reported any use of urinary catheters, 165 (72.4 percent) of them reported at least one CAUTI while the other 63 (27.6 percent) reported no identified CAUTIs. Pennsylvania’s CAUTI rate for 2015 was 1.23 CAUTIs per 1,000 urinary catheter days (Table 4.3.1). This is a decrease of 32.46 percent compared to last year’s rate of 1.82 CAUTIs per 1,000 urinary catheter days. This dramatic decrease is likely due to the case definition changes implemented between 2014 and 2015. Overall, the rate reductions since 2009 translate to **3,157 fewer** CAUTIs than would have otherwise occurred if the 2009 rate persisted into 2015. This likely under estimates the true impact of prevention efforts because urinary catheter use (DUR) has also decreased a total of 21.83 percent since 2009 (Table 4.3.1). The observed, steady DUR reduction is not impacted by the aforementioned case definition change.

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 2015, CAUTI rates (per 1,000 catheter days) were highest in intensive care burn units (cc:Burn: 4.19), behavioral health wards (w:Behavior: 2.6), surgical intensive care units (cc:Surgery: 2.58). Among locations with at least 1,000 urinary catheter days, NICU (NICU: 0), labor and delivery and post-partum units (w:LD_pp: 0.049) and pediatric medical/surgical units (w:Ped_ms: 0.88) 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, 2009–2015

	Number of CAUTI	Urinary Catheter Days	Rate per 1,000 Catheter Days	Patient Days	Device Utilization Ratio — DUR (Cath. Days / Pt. Days)
Neonatal Intensive Care Unit (NICU)					
2015	0	3,254	0.00	285,784	0.01
2014	0	2,652	0.00	275,572	0.01
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	.
Specialty Care Area (SCA)					
2015	50	24,234	2.06	254,551	0.10
2014	37	20,366	1.82	206,506	0.10
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
Stepdown Unit (Step)					
2015	128	115,185	1.11	591,911	0.19
2014	205	114,606	1.79	612,059	0.19
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
Long Term Acute Care (LTAC) Area					
2015	119	70,908	1.68	225,840	0.31
2014	155	72,696	2.13	216,711	0.34
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
Burn ICU (cc:Burn)					
2015	17	4,061	4.19	11,742	0.35
2014	19	4,425	4.29	12,671	0.35
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
Cardiothoracic ICU (cc:CT)					
2015	75	58,396	1.28	92,646	0.63
2014	124	60,057	2.06	94,088	0.64
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

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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)
Medical/Surgical ICU (cc:MS)					
2015	252	260,164	0.97	440,489	0.59
2014	487	266,777	1.83	440,304	0.61
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
Medical ICU (cc:Med)					
2015	78	71,239	1.09	120,846	0.59
2014	218	72,237	3.02	124,738	0.58
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
Pediatric ICU (cc:Peds)					
2015	21	12,755	1.65	63,590	0.20
2014	19	12,272	1.55	61,738	0.20
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
Specialty Medicine ICU (cc:SpecMed)					
2015	44	31,174	1.41	64,146	0.49
2014	90	33,306	2.70	76,244	0.44
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
Surgical ICU (cc:Surgery)					
2015	159	61,723	2.58	94,560	0.65
2014	254	69,771	3.64	99,475	0.70
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
Trauma ICU (cc:Trauma)					
2015	89	36,924	2.41	56,999	0.65
2014	123	34,233	3.59	51,018	0.67
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

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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)
Behavioral Ward (w:Behavior)					
2015	7	2,692	2.60	1,636,134	0.00
2014	5	2,540	1.97	1,680,120	0.00
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
Labor, Delivery and Post-Partum Ward (w:LD_PP)					
2015	2	40,476	0.05	371,339	0.11
2014	4	40,687	0.10	374,919	0.11
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
Medical/Surgical Ward (w:MS)					
2015	289	316,222	0.91	2,270,400	0.14
2014	416	340,936	1.22	2,305,133	0.15
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
Medical Ward (w:Med)					
2015	210	169,047	1.24	1,343,010	0.13
2014	228	159,461	1.43	1,261,364	0.13
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
Newborn Nursery (w:Newborn)					
2015	0	168	0.00	179,952	0.00
2014	0	88	0.00	173,218	0.00
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
Pediatric Medical/Surgical Ward (w:Ped_ms)					
2015	5	5,680	0.88	221,751	0.03
2014	3	5,849	0.51	224,727	0.03
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
Rehabilitation Ward (w:Rehab)					
2015	112	46,656	2.40	694,347	0.07
2014	109	47,406	2.30	689,599	0.07
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

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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)
Surgical Ward (w:Surgery)					
2015	140	134,531	1.04	753,990	0.18
2014	229	140,617	1.63	763,004	0.18
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 2015, hospitals reported a total of 2,003 organisms (or isolates) from 1,797 CAUTIs (some patients had an infection with more than one organism). Consistent with previous years, three pathogens (i.e., *Escherichia coli*, *Pseudomonas aeruginosa*, *Klebsiella pneumoniae*) accounted for 59.96 percent of isolates cultured from patients with a CAUTI (Table 4.3.3). The 14 organisms listed in Table 4.3.3 account for 92.51 percent of isolates cultured from CAUTIs. The remaining isolates (7.49 percent) cultured from CAUTIs in 2015 are from 45 other pathogens, each individually accounting for less than 1 percent of the total results.

Table 4.3.3: Pathogens Isolated in Catheter-Associated Urinary Tract Infections — Pennsylvania, 2014–2015

Pathogen	2014		2015	
	Count	%	Count	%
<i>Escherichia coli</i>	797	26.06	658	32.85
<i>Pseudomonas aeruginosa</i>	324	10.60	304	15.18
<i>Klebsiella pneumoniae</i>	287	9.39	239	11.93
<i>Enterococcus faecalis</i>	228	7.46	172	8.59
<i>Proteus mirabilis</i>	115	3.76	113	5.64
<i>Enterococcus spp.</i>	102	3.34	91	4.54
<i>Enterococcus faecium</i>	57	1.86	48	2.40
<i>Staphylococcus aureus</i>	51	1.67	48	2.40
<i>Enterobacter cloacae</i>	69	2.26	44	2.20
<i>Klebsiella pneumoniae ss. pneumoniae</i>	13	0.43	39	1.95
<i>Enterobacter aerogenes</i>	32	1.05	30	1.50
<i>Klebsiella oxytoca</i>	43	1.41	24	1.20
<i>Citrobacter freundii</i>	26	0.85	22	1.10
<i>Staphylococcus coagulase negative</i>	26	0.85	21	1.05
Other	888	29.04	150	7.49
All	3,058	100.00	2,003	100.00

4.3.4 CAUTIs — By Facility

Table 4.3.7 lists alphabetically the 228 hospitals that reported using urinary catheters in 2015. Among these facilities, a total of 150 (65.8 percent) had a 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 63 (27.6 percent) of these hospitals, the SIR was 0.00, as they reported no CAUTIs in 2015. There were 78 (34.2 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 2015 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, 47 (20.6 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 26 (11.4 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 20 (8.8 percent) facilities in which the reported number of CAUTIs was significantly 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 and 4.3.7.

Table 4.3.4: Facilities with a Significantly Fewer Catheter-Associated Urinary Tract Infections than Predicted (Better = Smaller SIR) — Pennsylvania, 2015

Facility Name and NHSN ID
CONEMAUGH MEMORIAL MEDICAL CENTER (10280)
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)
EPHRATA COMMUNITY HOSPITAL (11764)
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)
GOOD SAMARITAN HOSPITAL, THE (11712)
HOLY REDEEMER HOSPITAL (11973)
JAMESON MEMORIAL HOSPITAL (11954)
LANCASTER GENERAL HOSPITAL (10183)
LOWER BUCKS HOSPITAL (12390)
MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)
MERCY SUBURBAN HOSPITAL (11952)
MOSES TAYLOR HOSPITAL (11528)
MOUNT NITTANY MEDICAL CENTER (11797)
PENN PRESBYTERIAN MEDICAL CENTER (11814)
PINNACLE HEALTH HOSPITALS - COMMUNITY GENERAL OSTEOPATHIC HOSPITAL (34069)
POCONO MEDICAL CENTER (11772)
READING HOSPITAL (12375)
REGIONAL HOSPITAL OF SCRANTON (12533)
RIDDLE MEMORIAL HOSPITAL (11731)
ROBERT PACKER HOSPITAL (12422)
ROXBOROUGH MEMORIAL HOSPITAL (11978)
SELECT SPECIALTY HOSPITAL - JOHNSTOWN (12299)
UPMC MERCY (10384)
UPMC NORTHWEST (11837)
WASHINGTON HOSPITAL, THE (11460)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)

Table 4.3.5: Facilities with a Significantly More Catheter-Associated Urinary Tract Infections than Predicted (Worse = Larger SIR) — Pennsylvania, 2015

Facility Name and NHSN ID
ABINGTON MEMORIAL HOSPITAL (11838)
ALBERT EINSTEIN MEDICAL CENTER (10585)
ALLEGHENY GENERAL HOSPITAL (10648)
BUCKTAIL MEDICAL CENTER (12461)
GOOD SHEPHERD PENN PARTNERS AT RITTENHOUSE (13929)
GOOD SHEPHERD REHABILITATION HOSPITAL, THE (11896)
GOOD SHEPHERD SPECIALTY HOSPITAL (11887)
HOSPITAL OF THE UNIVERSITY OF PENNSYLVANIA (10219)
KINDRED HOSPITAL - PITTSBURGH (12358)
KINDRED HOSPITAL SOUTH PHILADELPHIA (11940)
LEHIGH VALLEY HOSPITAL (11884)
MAGEE REHABILITATION HOSPITAL (12146)
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)
SELECT SPECIALTY HOSPITAL - ERIE (11880)
ST. LUKES HOSPITAL BETHLEHEM (11718)
ST. MARY MEDICAL CENTER (11885)
ST. MARY REHABILITATION HOSPITAL LLP (36959)
TEMPLE UNIVERSITY HOSPITAL (12382)
THOMAS JEFFERSON UNIVERSITY HOSPITAL (11506)
UPMC PRESBYTERIAN SHADYSIDE (10348)

Table 4.3.6: Facilities Omitted from CAUTI SIR Analysis Due to No Reported Urinary Catheter Use — Pennsylvania, 2015

Facility Name and NHSN ID
BELMONT CENTER FOR COMPREHENSIVE TREATMENT (12505)
BROOKE GLEN BEHAVIORAL HOSPITAL (12623)
CHILDRENS HOME OF PITTSBURGH, THE (12336)
CLARION PSYCHIATRIC CENTER (12454)
CLARKS SUMMIT STATE HOSPITAL (12051)
DEVEREUX CHILDRENS BEHAVIORAL HEALTH INSTITUTE (12738)
FAIRMOUNT BEHAVIORAL HEALTH SYSTEM (12565)
FIRST HOSPITAL OF WYOMING VALLEY (12050)
FOUNDATIONS BEHAVIORAL HEALTH (12832)
HORSHAM CLINIC (12543)
KIDSPEACE ORCHARD HILLS CAMPUS (12430)
KIRKBRIDE CENTER (12624)
MEADOWS PSYCHIATRIC CENTER, THE (12156)
MONTGOMERY COUNTY MH/MR EMERGENCY SERVICES, INC. (12287)
PENNSYLVANIA PSYCHIATRIC INSTITUTE (14190)
PHILHAVEN HOSPITAL (11740)
ROXBURY TREATMENT CENTER (12723)
SOUTHWOOD PSYCHIATRIC HOSPITAL (12453)
ST. JOHN VIANNEY HOSPITAL (12548)
TORRANCE STATE HOSPITAL (12091)
VALLEY FORGE MEDICAL CENTER AND HOSPITAL (12029)
WARREN STATE HOSPITAL (12081)
WERNERSVILLE STATE HOSPITAL (12368)
WILLS EYE HOSPITAL (34846)

Table 4.3.7: Catheter-Associated Urinary Tract Infections, Catheter Utilization Rates and Standardized Infection Ratios by Facility — Pennsylvania, 2010–2015

	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)							
2015	16,944	144,290	0.12	36	22.96	1.57	(1.10 – 2.17)
2014	19,028	128,015	0.15	54	38.32	1.41	(1.06 – 1.84)
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)							
2015	343	1,489	0.23	0	0.36	0.00	(0.00 – 10.28)
2014	517	1,589	0.33	0	0.72	0.00	(0.00 – 5.07)
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)							
2015	19,758	105,751	0.19	46	25.61	1.80	(1.32 – 2.40)
2014	20,719	102,377	0.20	38	41.87	0.91	(0.64 – 1.25)
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)
ALLEGHENY GENERAL HOSPITAL (10648)							
2015	39,628	126,604	0.31	83	48.89	1.70	(1.35 – 2.10)
2014	42,943	126,164	0.34	137	87.27	1.57	(1.32 – 1.86)
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)							
2015	3,929	32,117	0.12	5	5.30	0.94	(0.30 – 2.20)
2014	4,224	29,738	0.14	4	5.85	0.68	(0.18 – 1.75)
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)							
2015	1,285	18,945	0.07	1	1.50	0.67	(0.01 – 3.70)
2014	1,366	20,722	0.07	2	1.88	1.07	(0.12 – 3.85)
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)
ARIA HEALTH (11388)							
2015	22,621	116,707	0.19	25	29.21	0.86	(0.55 – 1.26)
2014	20,762	103,349	0.20	66	41.95	1.57	(1.22 – 2.00)
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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	Catheter Utilization Rate (DUR)	Catheter 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)							
2015	0.15	26,342	0.15	4	4.26	0.94	(0.25 – 2.40)
2014	0.16	27,297	0.16	2	6.19	0.32	(0.04 – 1.17)
2013	0.16	30,446	0.16	4	7.31	0.55	(0.15 – 1.40)
2012	0.15	32,277	0.15	1	6.72	0.15	(0.00 – 0.83)
2011	0.15	34,165	0.15	5	6.88	0.73	(0.23 – 1.70)
2010	0.15	33,954	0.15	1	8.32	0.12	(0.00 – 0.67)
BARIX CLINICS OF PENNSYLVANIA (12037)							
2015	0.54	451	0.54	0	0.23	0.00	(0.00 – 15.74)
2014	0.31	464	0.31	0	0.20	0.00	(0.00 – 18.35)
2013	0.50	436	0.50	0	0.34	0.00	(0.00 – 10.81)
2012	0.48	539	0.48	0	0.37	0.00	(0.00 – 9.78)
2011	0.87	661	0.87	0	0.95	0.00	(0.00 – 3.88)
2010	0.47	882	0.47	0	0.66	0.00	(0.00 – 5.55)
BARNES-KASSON COUNTY HOSPITAL (12404)							
2015	0.06	3,986	0.06	0	0.27	0.00	(0.00 – 13.65)
2014	0.07	4,670	0.07	0	0.43	0.00	(0.00 – 8.50)
2013	0.11	4,230	0.11	0	0.73	0.00	(0.00 – 5.04)
2012	0.15	4,386	0.15	0	0.92	0.00	(0.00 – 4.01)
2011	0.16	4,251	0.16	0	0.88	0.00	(0.00 – 4.19)
2010	0.15	4,933	0.15	0	1.25	0.00	(0.00 – 2.93)
BERWICK HOSPITAL CENTER (11442)							
2015	0.12	9,208	0.12	2	1.25	1.60	(0.18 – 5.79)
2014	0.17	8,825	0.17	1	2.05	0.49	(0.01 – 2.71)
2013	0.14	10,648	0.14	1	2.21	0.45	(0.01 – 2.51)
2012	0.17	12,578	0.17	0	2.98	0.00	(0.00 – 1.23)
2011	0.18	14,647	0.18	2	3.51	0.57	(0.06 – 2.06)
2010	0.18	15,376	0.18	1	4.47	0.22	(0.00 – 1.24)
BRADFORD REGIONAL MEDICAL CENTER (12361)							
2015	0.12	9,861	0.12	0	1.26	0.00	(0.00 – 2.90)
2014	0.10	10,773	0.10	1	1.56	0.64	(0.01 – 3.57)
2013	0.11	13,247	0.11	0	2.26	0.00	(0.00 – 1.62)
2012	0.16	12,697	0.16	0	2.74	0.00	(0.00 – 1.34)
2011	0.20	11,423	0.20	0	3.16	0.00	(0.00 – 1.16)
2010	0.25	11,429	0.25	5	4.64	1.08	(0.35 – 2.51)
BRANDYWINE HOSPITAL (11979)							
2015	0.08	34,580	0.08	2	3.20	0.62	(0.07 – 2.25)
2014	0.09	35,609	0.09	7	4.18	1.67	(0.67 – 3.45)
2013	0.12	36,865	0.12	13	6.69	1.94	(1.03 – 3.33)
2012	0.12	37,089	0.12	16	5.93	2.70	(1.54 – 4.38)
2011	0.14	37,170	0.14	10	6.74	1.48	(0.71 – 2.73)
2010	0.22	25,194	0.22	12	9.05	1.33	(0.68 – 2.32)
BUCKTAIL MEDICAL CENTER (12461)							
2015	0.18	1,110	0.18	2	0.22	9.27	(1.04 – 33.45)
2014	0.04	979	0.04	0	0.06	0.00	(0.00 – 65.44)
2013	0.09	1,056	0.09	1	0.15	6.67	(0.09 – 37.10)
2012	0.09	1,260	0.09	0	0.15	0.00	(0.00 – 24.74)
2011	0.09	1,078	0.09	0	0.12	0.00	(0.00 – 30.91)
2010	0.17	1,264	0.17	0	0.35	0.00	(0.00 – 10.55)
BUTLER MEMORIAL HOSPITAL (11736)							
2015	0.15	63,680	0.15	10	10.36	0.97	(0.46 – 1.78)
2014	0.15	62,042	0.15	11	13.02	0.84	(0.42 – 1.51)
2013	0.17	62,866	0.17	13	16.49	0.79	(0.42 – 1.35)
2012	0.18	65,912	0.18	22	16.23	1.36	(0.85 – 2.05)
2011	0.19	67,225	0.19	12	16.72	0.72	(0.37 – 1.25)
2010	0.19	63,971	0.19	11	20.30	0.54	(0.27 – 0.97)

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Table 4.3.7 – Continued from previous page

	Catheter Utilization Rate (DUR)	Catheter Days	Patient Days	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
CANONSBURG HOSPITAL (11586)							
2015	0.18	2,503	13,866	0	2.66	0.00	(0.00 – 1.38)
2014	0.18	2,604	14,210	1	3.62	0.28	(0.00 – 1.54)
2013	0.20	2,999	14,862	2	4.57	0.44	(0.05 – 1.58)
2012	0.19	3,299	17,168	4	4.57	0.87	(0.24 – 2.24)
2011	0.19	3,329	17,798	2	4.44	0.45	(0.05 – 1.63)
2010	0.18	3,374	18,963	0	5.55	0.00	(0.00 – 0.66)
CARLISLE REGIONAL MEDICAL CENTER (11997)							
2015	0.19	3,182	16,423	1	3.36	0.30	(0.00 – 1.65)
2014	0.22	3,595	16,385	0	5.01	0.00	(0.00 – 0.73)
2013	0.22	3,879	17,358	3	5.93	0.51	(0.10 – 1.48)
2012	0.23	4,909	20,990	1	6.87	0.15	(0.00 – 0.81)
2011	0.28	7,230	26,235	0	10.17	0.00	(0.00 – 0.36)
2010	0.25	7,058	28,397	15	11.47	1.31	(0.73 – 2.16)
CHAMBERSBURG HOSPITAL (11913)							
2015	0.13	7,375	58,181	5	8.12	0.62	(0.20 – 1.44)
2014	0.16	9,316	56,806	11	12.93	0.85	(0.42 – 1.52)
2013	0.17	10,028	58,513	8	15.24	0.52	(0.23 – 1.03)
2012	0.17	9,207	54,266	19	12.69	1.50	(0.90 – 2.34)
2011	0.18	9,954	56,846	8	13.17	0.61	(0.26 – 1.20)
2010	0.19	10,045	52,912	14	16.47	0.85	(0.46 – 1.43)
CHARLES COLE MEMORIAL HOSPITAL (11956)							
2015	0.13	1,256	10,032	0	1.38	0.00	(0.00 – 2.65)
2014	0.11	1,173	10,668	0	1.62	0.00	(0.00 – 2.26)
2013	0.11	1,265	11,574	4	1.90	2.10	(0.57 – 5.38)
2012	0.12	1,233	10,297	5	1.67	2.99	(0.96 – 6.98)
2011	0.16	1,448	9,233	2	1.89	1.06	(0.12 – 3.83)
2010	0.17	1,644	9,535	0	2.71	0.00	(0.00 – 1.36)
CHESTER COUNTY HOSPITAL (12016)							
2015	0.12	7,409	59,625	9	8.17	1.10	(0.50 – 2.09)
2014	0.12	6,688	56,671	9	9.25	0.97	(0.44 – 1.85)
2013	0.13	7,439	56,624	25	11.24	2.22	(1.44 – 3.28)
2012	0.13	7,700	58,920	21	10.48	2.00	(1.24 – 3.06)
2011	0.15	8,779	59,845	26	13.69	1.90	(1.24 – 2.78)
2010	0.17	9,737	58,559	22	17.29	1.27	(0.80 – 1.93)
CHESTNUT HILL HOSPITAL (12304)							
2015	0.21	8,425	40,079	8	10.80	0.74	(0.32 – 1.46)
2014	0.21	6,399	29,926	1	12.94	0.08	(0.00 – 0.43)
2013	0.23	6,447	27,547	1	13.56	0.07	(0.00 – 0.41)
2012	0.23	6,035	26,818	1	8.43	0.12	(0.00 – 0.66)
2011	0.24	6,698	27,803	4	9.25	0.43	(0.12 – 1.11)
2010	0.25	6,693	27,053	7	11.72	0.60	(0.24 – 1.23)
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)							
2015	0.04	6,508	161,599	11	9.77	1.13	(0.56 – 2.02)
2014	0.04	6,264	154,804	12	12.43	0.97	(0.50 – 1.69)
2013	0.04	7,022	158,179	17	14.24	1.19	(0.70 – 1.91)
2012	0.04	5,464	154,870	11	9.39	1.17	(0.58 – 2.10)
2011	0.03	4,108	150,455	10	5.11	1.96	(0.94 – 3.60)
2010	0.03	3,638	137,053	18	6.89	2.61	(1.55 – 4.13)
CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)							
2015	0.11	9,402	86,337	11	12.83	0.86	(0.43 – 1.53)
2014	0.10	8,879	91,318	5	17.80	0.28	(0.09 – 0.66)
2013	0.10	8,390	86,033	16	17.31	0.92	(0.53 – 1.50)
2012	0.09	7,570	84,386	8	13.60	0.59	(0.25 – 1.16)
2011	0.09	7,579	84,133	6	11.07	0.54	(0.20 – 1.18)
2010	0.10	8,226	79,661	13	14.85	0.88	(0.47 – 1.50)

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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
CHILDRENS INSTITUTE OF PITTSBURGH, THE (12266)							
2015	20	7,485	0.00	0	0.03	0.00	(0.00 – 115.16)
2014	144	7,606	0.02	0	0.20	0.00	(0.00 – 18.80)
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)							
2015	1,073	9,819	0.11	2	1.46	1.37	(0.15 – 4.93)
2014	1,222	9,556	0.13	3	2.46	1.22	(0.25 – 3.57)
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)
CONEMAUGH MEMORIAL MEDICAL CENTER (10280)							
2015	27,167	110,501	0.25	19	34.30	0.55	(0.33 – 0.87)
2014	27,234	112,061	0.24	14	55.14	0.25	(0.14 – 0.43)
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)
CONEMAUGH MEYERSDALE MEDICAL CENTER (11968)							
2015	174	1,751	0.10	0	0.20	0.00	(0.00 – 18.70)
2014	248	1,992	0.12	1	0.34	2.91	(0.04 – 16.21)
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)
CONEMAUGH MINERS MEDICAL CENTER (12295)							
2015	204	2,247	0.09	0	0.23	0.00	(0.00 – 15.82)
2014	233	2,640	0.09	1	0.32	3.11	(0.04 – 17.32)
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)
COORDINATED HEALTH ORTHOPEDIC HOSPITAL LLC (11872)							
2015	763	2,888	0.26	0	0.78	0.00	(0.00 – 4.68)
2014	956	2,886	0.33	0	1.34	0.00	(0.00 – 2.74)
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)

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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
CORRY MEMORIAL HOSPITAL (12283)							
2015	429	2,737	0.16	0	0.46	0.00	(0.00 – 7.92)
2014	465	2,572	0.18	0	0.65	0.00	(0.00 – 5.68)
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)							
2015	890	8,983	0.10	1	1.00	1.00	(0.01 – 5.54)
2014	917	9,690	0.09	0	1.27	0.00	(0.00 – 2.90)
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 - SPRINGFIELD (11851)							
2015	617	3,685	0.17	0	0.81	0.00	(0.00 – 4.54)
2014	768	3,694	0.21	0	1.55	0.00	(0.00 – 2.36)
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)							
2015	4,218	28,405	0.15	5	5.59	0.89	(0.29 – 2.09)
2014	4,486	25,842	0.17	5	9.05	0.55	(0.18 – 1.29)
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)
CROZER CHESTER MEDICAL CENTER (11839)							
2015	11,523	63,819	0.18	17	14.98	1.13	(0.66 – 1.82)
2014	11,789	68,013	0.17	31	23.78	1.30	(0.89 – 1.85)
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)
DANVILLE STATE HOSPITAL (11848)							
2015	6	58,941	0.00	0	0.01	0.00	(0.00 – 280.87)
2014	9	60,329	0.00	0	0.01	0.00	(0.00 – 317.24)
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)							
2015	6,196	35,872	0.17	2	8.09	0.25	(0.03 – 0.89)
2014	6,905	36,073	0.19	2	13.94	0.14	(0.02 – 0.52)
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)							
2015	31	5,816	0.01	0	0.05	0.00	(0.00 – 79.37)
2014	38	5,994	0.01	0	0.05	0.00	(0.00 – 72.09)
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)							
2015	8,766	47,334	0.19	8	9.31	0.86	(0.37 – 1.69)
2014	8,976	48,898	0.18	7	12.47	0.56	(0.22 – 1.16)
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)
EAGLEVILLE HOSPITAL (12965)							
2015	16	18,967	0.00	0	0.03	0.00	(0.00 – 128.93)
2014	125	19,617	0.01	0	0.17	0.00	(0.00 – 21.91)
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)							
2015	1,833	11,035	0.17	2	1.97	1.02	(0.11 – 3.67)
2014	2,125	13,393	0.16	4	2.95	1.36	(0.36 – 3.47)
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)							
2015	5,456	33,577	0.16	12	7.17	1.67	(0.86 – 2.93)
2014	5,997	33,650	0.18	16	12.10	1.32	(0.76 – 2.15)
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)							
2015	42	341	0.12	0	0.05	0.00	(0.00 – 79.09)
2014	18	346	0.05	0	0.02	0.00	(0.00 – 148.70)
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 AT ELKINS PARK (12500)							
2015	1,733	8,640	0.20	2	2.23	0.90	(0.10 – 3.24)
2014	2,144	8,969	0.24	0	4.34	0.00	(0.00 – 0.85)
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)

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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
EINSTEIN MEDICAL CENTER MONTGOMERY (30210)							
2015	6,684	42,033	0.16	13	7.20	1.80	(0.96 – 3.09)
2014	6,095	40,683	0.15	6	8.45	0.71	(0.26 – 1.55)
2013	5,858	39,969	0.15	5	8.87	0.56	(0.18 – 1.32)
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
ELLWOOD CITY HOSPITAL (11779)							
2015	1,156	10,495	0.11	2	1.29	1.55	(0.17 – 5.60)
2014	1,101	10,327	0.11	3	1.52	1.97	(0.40 – 5.76)
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)
ENDLESS MOUNTAINS HEALTH SYSTEMS (11817)							
2015	807	4,139	0.19	0	0.85	0.00	(0.00 – 4.30)
2014	630	3,860	0.16	0	0.87	0.00	(0.00 – 4.20)
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)							
2015	6,491	27,350	0.24	1	6.73	0.15	(0.00 – 0.83)
2014	6,171	25,466	0.24	1	8.60	0.12	(0.00 – 0.65)
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)							
2015	3,143	22,696	0.14	3	4.19	0.72	(0.14 – 2.09)
2014	3,336	22,122	0.15	5	6.72	0.74	(0.24 – 1.74)
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)							
2015	2,272	9,172	0.25	1	2.35	0.43	(0.01 – 2.37)
2014	2,451	10,832	0.23	1	3.41	0.29	(0.00 – 1.63)
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)							
2015	6,345	22,163	0.29	5	7.89	0.63	(0.20 – 1.48)
2014	6,342	22,094	0.29	4	12.86	0.31	(0.08 – 0.80)
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)							
2015	16,550	75,027	0.22	15	21.11	0.71	(0.40 – 1.17)
2014	16,520	75,458	0.22	21	33.41	0.63	(0.39 – 0.96)
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)

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	Catheter Utilization Days	Patient Days	Catheter Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
FORBES HOSPITAL (11265)							
2015	13,965	75,148	0.19	15	18.11	0.83	(0.46 – 1.37)
2014	14,013	79,832	0.18	13	28.27	0.46	(0.24 – 0.79)
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)
FRIENDS HOSPITAL (12488)							
2015	26	64,443	0.00	0	0.06	0.00	(0.00 – 60.54)
2014	.	.	.	.	.	.	.
2013	.	.	.	.	.	.	.
2012	7	58,046	0.00	0	0.01	0.00	(0.00 – 399.17)
2011	10	52,675	0.00	0	0.01	0.00	(0.00 – 576.19)
2010	.	.	.	.	.	.	.
FULTON COUNTY MEDICAL CENTER (11939)							
2015	524	3,775	0.14	1	0.57	1.75	(0.02 – 9.73)
2014	336	3,761	0.09	1	0.46	2.16	(0.03 – 12.01)
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)							
2015	435	11,326	0.04	0	0.54	0.00	(0.00 – 6.83)
2014	441	11,122	0.04	0	0.60	0.00	(0.00 – 6.09)
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)							
2015	20,849	148,838	0.14	19	27.77	0.68	(0.41 – 1.07)
2014	19,995	141,137	0.14	34	40.24	0.84	(0.58 – 1.18)
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)							
2015	9,773	69,790	0.14	5	13.02	0.38	(0.12 – 0.90)
2014	10,604	73,523	0.14	24	21.35	1.12	(0.72 – 1.67)
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)
GEISINGER-BLOOMSBURG HOSPITAL (12008)							
2015	495	9,634	0.05	0	0.59	0.00	(0.00 – 6.17)
2014	618	9,313	0.07	0	0.85	0.00	(0.00 – 4.32)
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)							
2015	11,213	56,828	0.20	19	14.46	1.31	(0.79 – 2.05)
2014	12,695	55,497	0.23	23	25.69	0.90	(0.57 – 1.34)
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)

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	Catheter Utilization Rate (DUR)	Catheter Days	Patient Days	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
GEISINGER-LEWISTOWN HOSPITAL (11825)							
2015	0.15	3,791	25,574	1	5.02	0.20	(0.00 – 1.11)
2014	0.16	3,957	24,948	2	7.97	0.25	(0.03 – 0.91)
2013	0.15	3,782	25,830	4	5.73	0.70	(0.19 – 1.79)
2012	0.15	3,715	25,305	1	5.08	0.20	(0.00 – 1.09)
2011	0.14	3,526	24,902	3	4.53	0.66	(0.13 – 1.93)
2010	0.17	3,916	23,437	10	6.45	1.55	(0.74 – 2.85)
GETTYSBURG HOSPITAL (11531)							
2015	0.13	2,770	20,587	2	3.03	0.66	(0.07 – 2.38)
2014	0.15	2,824	19,313	4	3.91	1.02	(0.27 – 2.62)
2013	0.14	2,703	19,474	3	4.09	0.73	(0.15 – 2.14)
2012	0.14	2,588	18,278	2	3.54	0.57	(0.06 – 2.04)
2011	0.14	2,590	18,089	1	3.33	0.30	(0.00 – 1.67)
2010	0.16	2,772	17,456	3	4.57	0.66	(0.13 – 1.92)
GNADEN HUETTEN MEMORIAL HOSPITAL (12241)							
2015	0.09	1,675	18,083	2	1.90	1.05	(0.12 – 3.80)
2014	0.12	2,295	18,770	3	3.18	0.94	(0.19 – 2.76)
2013	0.10	1,711	17,291	1	2.57	0.39	(0.01 – 2.17)
2012	0.12	2,155	18,176	6	2.92	2.06	(0.75 – 4.47)
2011	0.14	2,393	16,886	5	3.08	1.63	(0.52 – 3.79)
2010	0.15	2,400	16,243	1	3.97	0.25	(0.00 – 1.40)
GOOD SAMARITAN HOSPITAL, THE (11712)							
2015	0.18	6,796	38,229	2	7.25	0.28	(0.03 – 1.00)
2014	0.16	6,213	38,800	4	8.62	0.46	(0.12 – 1.19)
2013	0.18	6,959	38,759	6	10.59	0.57	(0.21 – 1.23)
2012	0.26	10,182	39,790	15	14.31	1.05	(0.59 – 1.73)
2011	0.31	13,414	42,849	8	19.19	0.42	(0.18 – 0.82)
2010	0.31	12,837	41,180	12	20.69	0.58	(0.30 – 1.01)
GOOD SHEPHERD PENN PARTNERS AT RITTENHOUSE (13929)							
2015	0.22	1,969	8,833	13	2.05	6.33	(3.37 – 10.82)
2014	0.18	1,686	9,423	18	2.34	7.68	(4.55 – 12.15)
2013	0.21	2,159	10,506	14	3.29	4.25	(2.32 – 7.13)
2012	0.24	2,322	9,813	11	3.25	3.38	(1.69 – 6.06)
2011	0.18	1,514	8,537	2	2.01	1.00	(0.11 – 3.60)
2010	0.12	1,075	8,874	6	1.79	3.35	(1.22 – 7.29)
GOOD SHEPHERD REHABILITATION HOSPITAL, THE (11896)							
2015	0.07	1,806	27,650	8	2.12	3.78	(1.63 – 7.44)
2014	0.07	1,913	28,742	8	2.63	3.04	(1.31 – 6.00)
2013	0.05	1,589	28,995	15	2.35	6.37	(3.56 – 10.51)
2012	0.07	2,052	28,461	8	2.71	2.95	(1.27 – 5.81)
2011	0.08	2,351	29,920	4	2.79	1.43	(0.39 – 3.67)
2010	0.10	2,403	24,553	4	4.03	0.99	(0.27 – 2.54)
GOOD SHEPHERD SPECIALTY HOSPITAL (11887)							
2015	0.32	3,159	9,897	16	3.18	5.02	(2.87 – 8.16)
2014	0.32	3,386	10,650	26	4.73	5.49	(3.59 – 8.05)
2013	0.35	3,284	9,365	23	5.07	4.54	(2.87 – 6.81)
2012	0.40	4,007	9,982	22	5.75	3.82	(2.40 – 5.79)
2011	0.36	3,816	10,551	9	5.57	1.62	(0.74 – 3.07)
2010	0.37	3,844	10,503	15	6.16	2.43	(1.36 – 4.02)
GRAND VIEW HOSPITAL (11847)							
2015	0.19	7,819	40,164	9	8.26	1.09	(0.50 – 2.07)
2014	0.23	9,129	40,456	14	12.72	1.10	(0.60 – 1.85)
2013	0.25	10,262	41,380	20	15.72	1.27	(0.78 – 1.96)
2012	0.23	9,450	40,826	11	13.22	0.83	(0.41 – 1.49)
2011	0.24	10,175	42,899	17	14.02	1.21	(0.71 – 1.94)
2010	0.23	9,484	41,631	10	15.45	0.65	(0.31 – 1.19)

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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
GROVE CITY MEDICAL CENTER (11722)							
2015	1,409	7,373	0.19	0	1.49	0.00	(0.00 – 2.46)
2014	1,352	7,752	0.17	0	1.88	0.00	(0.00 – 1.95)
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)
GUTHRIE TOWANDA MEMORIAL HOSPITAL (12549)							
2015	1,095	4,854	0.23	0	1.14	0.00	(0.00 – 3.21)
2014	1,072	4,790	0.22	0	1.49	0.00	(0.00 – 2.46)
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)
HAHNEMANN UNIVERSITY HOSPITAL (11437)							
2015	12,999	101,895	0.13	26	17.47	1.49	(0.97 – 2.18)
2014	13,811	110,786	0.12	51	27.76	1.84	(1.37 – 2.42)
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)							
2015	3,993	28,647	0.14	7	4.36	1.61	(0.64 – 3.31)
2014	3,878	26,431	0.15	5	5.38	0.93	(0.30 – 2.17)
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)
HAVEN BEHAVIORAL HOSPITAL OF EASTERN PENNSYLVANIA (14471)							
2015	4	15,736	0.00	0	0.01	0.00	(0.00 – 459.82)
2014	.	.	.	.	.	.	.
2013	.	.	.	.	.	.	.
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
HAVEN BEHAVIORAL HOSPITAL OF PHILADELPHIA (37622)							
2015	41	9,131	0.00	0	0.06	0.00	(0.00 – 59.03)
2014	.	.	.	.	.	.	.
2013	.	.	.	.	.	.	.
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
HEALTHSOUTH HARMARVILLE REHABILITATION HOSPITAL (11727)							
2015	2,681	25,849	0.10	7	3.01	2.33	(0.93 – 4.79)
2014	3,237	29,465	0.11	7	4.47	1.56	(0.63 – 3.22)
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)

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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 NITTANY VALLEY REHABILITATION HOSPITAL (11667)							
2015	1,035	16,450	0.06	0	1.22	0.00	(0.00 – 3.01)
2014	838	15,946	0.05	0	1.15	0.00	(0.00 – 3.19)
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)							
2015	519	14,394	0.04	0	0.64	0.00	(0.00 – 5.69)
2014	659	15,305	0.04	0	0.90	0.00	(0.00 – 4.07)
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)							
2015	1,408	25,488	0.06	2	1.68	1.19	(0.13 – 4.30)
2014	1,192	25,435	0.05	0	1.63	0.00	(0.00 – 2.25)
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)							
2015	539	15,683	0.03	0	0.67	0.00	(0.00 – 5.46)
2014	634	17,077	0.04	0	0.87	0.00	(0.00 – 4.24)
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)							
2015	1,374	16,172	0.08	2	1.57	1.27	(0.14 – 4.59)
2014	1,460	18,129	0.08	2	2.01	0.99	(0.11 – 3.59)
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)							
2015	868	12,988	0.07	1	1.02	0.98	(0.01 – 5.48)
2014	1,183	13,177	0.09	1	1.63	0.61	(0.01 – 3.41)
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)							
2015	1,615	22,140	0.07	3	1.87	1.60	(0.32 – 4.68)
2014	1,142	20,604	0.06	4	1.57	2.55	(0.69 – 6.54)
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)							
2015	1,734	10,893	0.16	0	2.28	0.00	(0.00 – 1.61)
2014	1,680	8,575	0.20	2	3.39	0.59	(0.07 – 2.13)
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)

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Table 4.3.7 – Continued from previous page

	Catheter Utilization Rate (DUR)	Patient Days	Catheter Days	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
HELEN M. SIMPSON REHABILITATION HOSPITAL (40371)							
2015	0.04	9,174	353	1	0.44	2.30	(0.03 – 12.77)
2014	.	.	.	.	.	.	.
2013	.	.	.	.	.	.	.
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
HERITAGE VALLEY BEAVER (11831)							
2015	0.21	64,680	13,793	13	17.65	0.74	(0.39 – 1.26)
2014	0.21	77,485	15,890	25	32.11	0.78	(0.50 – 1.15)
2013	0.24	72,271	17,004	25	35.77	0.70	(0.45 – 1.03)
2012	0.23	79,459	18,302	57	34.40	1.66	(1.25 – 2.15)
2011	0.24	83,343	19,749	46	32.85	1.40	(1.03 – 1.87)
2010	0.22	86,652	19,447	30	34.17	0.88	(0.59 – 1.25)
HERITAGE VALLEY SEWICKLEY (10375)							
2015	0.24	38,731	9,247	7	9.58	0.73	(0.29 – 1.50)
2014	0.25	41,063	10,157	3	14.16	0.21	(0.04 – 0.62)
2013	0.23	41,548	9,682	7	14.81	0.47	(0.19 – 0.97)
2012	0.27	44,927	12,154	19	17.12	1.11	(0.67 – 1.73)
2011	0.27	46,555	12,669	11	17.78	0.62	(0.31 – 1.11)
2010	0.28	45,426	12,829	8	20.75	0.39	(0.17 – 0.76)
HIGHLANDS HOSPITAL (11902)							
2015	0.06	11,591	734	0	0.86	0.00	(0.00 – 4.25)
2014	0.05	11,762	588	0	0.81	0.00	(0.00 – 4.55)
2013	0.10	11,255	1,181	0	1.78	0.00	(0.00 – 2.07)
2012	0.08	11,661	939	0	1.25	0.00	(0.00 – 2.94)
2011	0.08	12,457	995	1	1.18	0.84	(0.01 – 4.70)
2010	0.06	12,273	716	1	1.22	0.82	(0.01 – 4.55)
HOLY REDEEMER HOSPITAL (11973)							
2015	0.16	53,297	8,460	3	9.12	0.33	(0.07 – 0.96)
2014	0.15	56,273	8,224	5	11.40	0.44	(0.14 – 1.02)
2013	0.14	58,369	8,119	5	12.28	0.41	(0.13 – 0.95)
2012	0.15	60,087	8,736	4	11.95	0.33	(0.09 – 0.86)
2011	0.16	64,189	10,123	2	13.20	0.15	(0.02 – 0.55)
2010	0.18	64,672	11,424	11	18.78	0.59	(0.29 – 1.05)
HOLY SPIRIT HOSPITAL (12387)							
2015	0.18	55,507	9,834	13	10.49	1.24	(0.66 – 2.12)
2014	0.20	61,705	12,186	25	16.95	1.48	(0.95 – 2.18)
2013	0.20	73,479	14,769	26	22.52	1.15	(0.75 – 1.69)
2012	0.20	72,802	14,663	23	20.37	1.13	(0.72 – 1.69)
2011	0.23	73,682	16,655	24	22.80	1.05	(0.67 – 1.57)
2010	0.23	71,373	16,594	31	27.02	1.15	(0.78 – 1.63)
HOSPITAL OF FOX CHASE CANCER CENTER (12134)							
2015	0.25	23,061	5,701	8	7.19	1.11	(0.48 – 2.19)
2014	0.27	21,885	5,845	11	11.85	0.93	(0.46 – 1.66)
2013	0.26	21,559	5,685	14	11.99	1.17	(0.64 – 1.96)
2012	0.29	22,764	6,542	23	12.43	1.85	(1.17 – 2.78)
2011	0.28	22,367	6,370	21	10.86	1.93	(1.20 – 2.96)
2010	0.32	22,646	7,220	13	12.53	1.04	(0.55 – 1.77)
HOSPITAL OF THE UNIVERSITY OF PENNSYLVANIA (10219)							
2015	0.15	244,739	36,920	70	48.84	1.43	(1.12 – 1.81)
2014	0.16	256,476	39,920	148	80.43	1.84	(1.56 – 2.16)
2013	0.16	254,172	41,015	201	85.55	2.35	(2.04 – 2.70)
2012	0.17	254,736	43,895	194	81.37	2.38	(2.06 – 2.74)
2011	0.18	249,501	43,758	114	69.90	1.63	(1.35 – 1.96)
2010	0.18	251,135	45,452	227	80.47	2.82	(2.47 – 3.21)

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Table 4.3.7 – Continued from previous page

	Catheter Utilization Rate (DUR)	Catheter Patient Days	Catheter Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
INDIANA REGIONAL MEDICAL CENTER (11759)							
2015	0.09	3,276	37,152	6	3.73	1.61	(0.59 – 3.50)
2014	0.09	3,625	39,217	6	5.00	1.20	(0.44 – 2.61)
2013	0.08	2,997	37,757	9	4.48	2.01	(0.92 – 3.82)
2012	0.07	2,814	38,299	7	3.73	1.88	(0.75 – 3.87)
2011	0.09	3,564	40,201	4	4.30	0.93	(0.25 – 2.38)
2010	0.09	3,705	39,751	4	6.23	0.64	(0.17 – 1.64)
J C BLAIR MEMORIAL HOSPITAL (11724)							
2015	0.11	1,048	9,741	2	1.17	1.71	(0.19 – 6.16)
2014	0.13	1,186	9,027	4	1.64	2.44	(0.66 – 6.24)
2013	0.13	1,053	7,850	5	1.59	3.14	(1.01 – 7.33)
2012	0.18	1,510	8,363	3	2.09	1.44	(0.29 – 4.20)
2011	0.17	1,686	9,767	3	2.23	1.35	(0.27 – 3.94)
2010	0.18	1,945	10,598	16	3.19	5.01	(2.86 – 8.14)
JAMESON MEMORIAL HOSPITAL (11954)							
2015	0.24	7,335	30,376	2	7.59	0.26	(0.03 – 0.95)
2014	0.23	8,121	35,508	5	11.31	0.44	(0.14 – 1.03)
2013	0.20	7,782	38,470	3	11.87	0.25	(0.05 – 0.74)
2012	0.18	6,919	39,038	1	9.55	0.10	(0.00 – 0.58)
2011	0.18	7,033	38,782	1	9.35	0.11	(0.00 – 0.60)
2010	0.17	7,621	44,114	2	12.54	0.16	(0.02 – 0.58)
JEANES HOSPITAL (11459)							
2015	0.22	7,276	33,796	9	7.62	1.18	(0.54 – 2.24)
2014	0.23	7,871	33,971	12	10.97	1.09	(0.56 – 1.91)
2013	0.24	8,145	33,276	14	12.48	1.12	(0.61 – 1.88)
2012	0.21	8,155	38,533	8	11.36	0.70	(0.30 – 1.39)
2011	0.20	8,336	41,037	5	13.58	0.37	(0.12 – 0.86)
2010	0.24	9,917	42,199	12	17.40	0.69	(0.36 – 1.20)
JEFFERSON HOSPITAL (10237)							
2015	0.18	11,958	64,841	8	12.70	0.63	(0.27 – 1.24)
2014	0.19	13,046	67,428	15	18.14	0.83	(0.46 – 1.36)
2013	0.19	14,650	75,311	8	22.32	0.36	(0.15 – 0.71)
2012	0.18	13,920	75,632	15	19.26	0.78	(0.44 – 1.28)
2011	0.19	15,779	83,272	14	21.10	0.66	(0.36 – 1.11)
2010	0.20	17,518	86,374	23	28.66	0.80	(0.51 – 1.20)
JENNERSVILLE REGIONAL HOSPITAL (12337)							
2015	0.25	2,740	10,789	0	2.82	0.00	(0.00 – 1.30)
2014	0.22	2,608	12,022	1	3.63	0.28	(0.00 – 1.53)
2013	0.21	2,639	12,317	1	4.03	0.25	(0.00 – 1.38)
2012	0.21	2,634	12,583	2	3.67	0.55	(0.06 – 1.97)
2011	0.22	3,010	13,563	1	4.11	0.24	(0.00 – 1.35)
2010	0.27	3,603	13,221	9	5.83	1.54	(0.70 – 2.93)
JERSEY SHORE HOSPITAL (11689)							
2015	0.06	287	4,497	0	0.34	0.00	(0.00 – 10.87)
2014	0.11	475	4,414	0	0.66	0.00	(0.00 – 5.59)
2013	0.13	537	4,129	0	0.81	0.00	(0.00 – 4.52)
2012	0.14	639	4,497	0	0.87	0.00	(0.00 – 4.20)
2011	0.15	774	5,197	0	1.00	0.00	(0.00 – 3.66)
2010	0.14	629	4,527	2	1.04	1.92	(0.22 – 6.92)
JOHN HEINZ INSTITUTE OF REHABILITATION (11861)							
2015	0.05	932	17,681	2	1.12	1.79	(0.20 – 6.47)
2014	0.04	818	18,600	1	1.12	0.89	(0.01 – 4.97)
2013	0.04	722	19,943	3	1.06	2.83	(0.57 – 8.27)
2012	0.05	935	20,244	3	1.21	2.48	(0.50 – 7.24)
2011	0.06	1,254	21,076	4	1.43	2.79	(0.75 – 7.14)
2010	0.05	1,052	20,170	5	1.81	2.77	(0.89 – 6.46)

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Table 4.3.7 – Continued from previous page

	Catheter Utilization Rate (DUR)	Catheter Patient Days	Catheter Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
KANE COMMUNITY HOSPITAL (12111)							
2015	368	3,522	0.10	0	0.41	0.00	(0.00 – 8.89)
2014	297	3,806	0.08	0	0.41	0.00	(0.00 – 8.97)
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)							
2015	12	2,625	0.00	0	0.02	0.00	(0.00 – 202.04)
2014	163	2,536	0.06	0	0.22	0.00	(0.00 – 16.38)
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)							
2015	1,529	11,132	0.14	5	1.67	2.99	(0.96 – 6.98)
2014	3,604	11,947	0.30	17	5.04	3.38	(1.97 – 5.41)
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)							
2015	2,481	9,101	0.27	9	2.54	3.54	(1.62 – 6.73)
2014	2,716	10,161	0.27	5	3.79	1.32	(0.43 – 3.08)
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 AT HERITAGE VALLEY (12268)							
2015	3,416	7,204	0.47	6	3.32	1.81	(0.66 – 3.94)
2014	4,281	7,953	0.54	8	6.02	1.33	(0.57 – 2.62)
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 PHILADELPHIA-HAVERTOWN (12908)							
2015	4,369	12,069	0.36	4	4.35	0.92	(0.25 – 2.35)
2014	4,929	13,913	0.35	4	6.90	0.58	(0.16 – 1.48)
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 SOUTH PHILADELPHIA (11940)							
2015	3,101	10,546	0.29	12	3.15	3.81	(1.97 – 6.65)
2014	3,607	12,158	0.30	3	5.04	0.60	(0.12 – 1.74)
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)							
2015	22,233	150,321	0.15	14	24.12	0.58	(0.32 – 0.97)
2014	21,985	151,559	0.15	26	30.47	0.85	(0.56 – 1.25)
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)

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Table 4.3.7 – Continued from previous page

	Catheter	Patient	Catheter Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
LANCASTER REGIONAL MEDICAL CENTER (12335)							
2015	3,955	25,430	0.16	5	4.27	1.17	(0.38 – 2.73)
2014	4,327	25,054	0.17	0	6.01	0.00	(0.00 – 0.61)
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)							
2015	795	19,834	0.04	0	0.98	0.00	(0.00 – 3.75)
2014	367	19,167	0.02	0	0.50	0.00	(0.00 – 7.37)
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)							
2015	3,478	22,411	0.16	1	3.76	0.27	(0.00 – 1.48)
2014	3,114	20,017	0.16	2	4.32	0.46	(0.05 – 1.67)
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 - HAZLETON (11878)							
2015	5,938	32,943	0.18	8	6.32	1.27	(0.54 – 2.49)
2014	7,004	31,188	0.22	9	9.75	0.92	(0.42 – 1.75)
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)
LEHIGH VALLEY HOSPITAL - MUHLENBERG (11898)							
2015	7,139	41,817	0.17	9	9.33	0.96	(0.44 – 1.83)
2014	7,997	45,559	0.18	9	16.13	0.56	(0.25 – 1.06)
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)							
2015	34,070	216,650	0.16	121	44.89	2.70	(2.24 – 3.22)
2014	35,923	219,888	0.16	180	72.42	2.49	(2.14 – 2.88)
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)
LIFECARE HOSPITALS OF CHESTER COUNTY LLC (12005)							
2015	3,313	8,979	0.37	4	3.29	1.21	(0.33 – 3.11)
2014	3,328	8,574	0.39	4	4.66	0.86	(0.23 – 2.20)
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)							
2015	2,574	8,041	0.32	4	2.59	1.54	(0.41 – 3.95)
2014	2,723	6,820	0.40	6	3.82	1.57	(0.57 – 3.42)
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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	Catheter Utilization Rate (DUR)	Catheter 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)							
2015	3,278	6,927	0.47	3	3.18	0.94	(0.19 – 2.75)
2014	3,247	6,352	0.51	3	4.56	0.66	(0.13 – 1.92)
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)							
2015	3,473	10,683	0.33	6	3.50	1.72	(0.63 – 3.74)
2014	4,144	11,374	0.36	8	5.80	1.38	(0.59 – 2.72)
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)							
2015	3,886	6,896	0.56	4	3.71	1.08	(0.29 – 2.76)
2014	3,718	7,673	0.48	1	5.22	0.19	(0.00 – 1.07)
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)							
2015	3,034	20,105	0.15	5	3.29	1.52	(0.49 – 3.55)
2014	2,991	16,146	0.19	4	4.16	0.96	(0.26 – 2.46)
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)							
2015	713	4,419	0.16	0	0.77	0.00	(0.00 – 4.78)
2014	679	3,611	0.19	0	0.94	0.00	(0.00 – 3.89)
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)							
2015	5,909	33,107	0.18	1	6.30	0.16	(0.00 – 0.88)
2014	2,702	21,237	0.13	3	3.74	0.80	(0.16 – 2.34)
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 REHABILITATION HOSPITAL (12146)							
2015	4,997	26,862	0.19	18	5.30	3.39	(2.01 – 5.36)
2014	6,445	25,440	0.25	29	8.99	3.23	(2.16 – 4.63)
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)							
2015	10,941	87,605	0.12	6	14.74	0.41	(0.15 – 0.89)
2014	11,733	101,499	0.12	3	23.56	0.13	(0.03 – 0.37)
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)

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	Catheter Utilization Rate (DUR)	Catheter Days	Patient Days	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
MAIN LINE HOSPITAL - PAOLI (11750)							
2015	0.19	10,656	56,487	10	11.30	0.89	(0.42 – 1.63)
2014	0.21	11,455	55,634	16	15.94	1.00	(0.57 – 1.63)
2013	0.21	11,575	55,569	19	17.67	1.08	(0.65 – 1.68)
2012	0.21	12,096	56,763	10	16.85	0.59	(0.28 – 1.09)
2011	0.16	9,458	59,968	16	12.34	1.30	(0.74 – 2.11)
2010	0.15	8,777	57,279	23	14.50	1.59	(1.00 – 2.38)
MAIN LINE HOSPITAL BRYN MAWR (11753)							
2015	0.17	10,790	62,504	15	14.09	1.06	(0.60 – 1.76)
2014	0.19	12,005	64,525	28	24.24	1.16	(0.77 – 1.67)
2013	0.21	13,728	66,926	21	28.79	0.73	(0.45 – 1.12)
2012	0.18	12,617	71,732	17	23.41	0.73	(0.42 – 1.16)
2011	0.11	10,352	94,116	13	15.53	0.84	(0.45 – 1.43)
2010	0.11	10,872	95,295	24	19.56	1.23	(0.79 – 1.83)
MAIN LINE HOSPITAL BRYN MAWR REHABILITATION (11417)							
2015	0.02	872	36,267	2	1.13	1.78	(0.20 – 6.41)
2014	0.03	1,175	36,576	0	1.60	0.00	(0.00 – 2.29)
2013	0.04	1,464	36,491	4	2.15	1.86	(0.50 – 4.75)
2012	0.05	2,030	38,707	2	2.65	0.76	(0.08 – 2.73)
2011	0.05	2,267	41,448	5	2.56	1.95	(0.63 – 4.55)
2010	0.06	2,584	43,374	2	4.41	0.45	(0.05 – 1.64)
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)							
2015	0.24	21,213	90,126	23	26.89	0.86	(0.54 – 1.28)
2014	0.22	18,194	82,286	24	36.80	0.65	(0.42 – 0.97)
2013	0.23	18,203	79,001	17	38.27	0.44	(0.26 – 0.71)
2012	0.23	17,383	76,127	32	32.66	0.98	(0.67 – 1.38)
2011	0.19	15,890	85,861	23	25.57	0.90	(0.57 – 1.35)
2010	0.18	16,369	90,598	29	28.98	1.00	(0.67 – 1.44)
MEADVILLE MEDICAL CENTER (11583)							
2015	0.13	4,841	35,993	5	6.47	0.77	(0.25 – 1.80)
2014	0.16	5,820	36,576	11	11.73	0.94	(0.47 – 1.68)
2013	0.16	5,697	36,306	10	11.88	0.84	(0.40 – 1.55)
2012	0.15	5,391	35,113	6	9.94	0.60	(0.22 – 1.31)
2011	0.17	6,276	36,634	6	9.99	0.60	(0.22 – 1.31)
2010	0.15	5,475	36,711	9	9.76	0.92	(0.42 – 1.75)
MEMORIAL HOSPITAL (11633)							
2015	0.14	2,450	17,996	0	3.27	0.00	(0.00 – 1.12)
2014	0.13	2,321	18,203	4	4.67	0.86	(0.23 – 2.19)
2013	0.14	3,504	25,113	11	7.29	1.51	(0.75 – 2.70)
2012	0.24	5,260	22,194	22	9.90	2.22	(1.39 – 3.36)
2011	0.26	5,986	23,341	17	10.06	1.69	(0.98 – 2.70)
2010	0.27	5,968	22,073	16	10.42	1.54	(0.88 – 2.49)
MERCY FITZGERALD HOSPITAL (11683)							
2015	0.08	3,031	39,648	2	4.28	0.47	(0.05 – 1.69)
2014	0.09	3,798	40,953	16	7.61	2.10	(1.20 – 3.42)
2013	0.12	5,281	42,258	14	10.95	1.28	(0.70 – 2.14)
2012	0.13	5,801	45,719	8	10.60	0.75	(0.33 – 1.49)
2011	0.17	8,307	47,715	10	13.26	0.75	(0.36 – 1.39)
2010	0.19	9,510	50,205	17	16.81	1.01	(0.59 – 1.62)
MERCY PHILADELPHIA HOSPITAL (11946)							
2015	0.10	3,962	40,099	1	5.46	0.18	(0.00 – 1.02)
2014	0.11	3,938	37,345	2	7.90	0.25	(0.03 – 0.91)
2013	0.13	4,889	38,617	1	10.14	0.10	(0.00 – 0.55)
2012	0.14	5,405	40,012	2	9.90	0.20	(0.02 – 0.73)
2011	0.16	7,119	43,434	0	11.27	0.00	(0.00 – 0.33)
2010	0.16	7,664	47,304	1	13.62	0.07	(0.00 – 0.41)

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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
MERCY SUBURBAN HOSPITAL (11952)							
2015	6,256	16,957	0.37	0	7.60	0.00	(0.00 – 0.48)
2014	6,941	20,009	0.35	2	14.11	0.14	(0.02 – 0.51)
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)
MILLCREEK COMMUNITY HOSPITAL (12253)							
2015	2,085	27,966	0.07	4	2.95	1.36	(0.36 – 3.47)
2014	2,268	28,656	0.08	3	4.54	0.66	(0.13 – 1.93)
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)							
2015	25,652	184,100	0.14	25	34.19	0.73	(0.47 – 1.08)
2014	22,933	155,105	0.15	32	46.18	0.69	(0.47 – 0.98)
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)
MONONGAHELA VALLEY HOSPITAL (11069)							
2015	5,227	49,387	0.11	4	5.86	0.68	(0.18 – 1.75)
2014	5,060	48,793	0.10	11	6.99	1.57	(0.78 – 2.82)
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)							
2015	6,481	49,915	0.13	1	8.70	0.11	(0.00 – 0.64)
2014	6,804	48,344	0.14	3	13.69	0.22	(0.04 – 0.64)
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)
MOSS REHABILITATION (12508)							
2015	3,714	45,637	0.08	8	4.27	1.87	(0.81 – 3.69)
2014	3,391	44,198	0.08	5	4.67	1.07	(0.35 – 2.50)
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)
MOUNT NITTANY MEDICAL CENTER (11797)							
2015	14,787	61,159	0.24	6	18.70	0.32	(0.12 – 0.70)
2014	12,641	57,047	0.22	10	25.57	0.39	(0.19 – 0.72)
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)

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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
MUNCY VALLEY HOSPITAL (11748)							
2015	287	4,241	0.07	0	0.34	0.00	(0.00 – 10.93)
2014	333	4,415	0.08	0	0.46	0.00	(0.00 – 8.00)
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)							
2015	1,217	6,824	0.18	0	1.30	0.00	(0.00 – 2.83)
2014	1,260	7,228	0.17	0	1.75	0.00	(0.00 – 2.10)
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)							
2015	6,318	35,651	0.18	3	6.74	0.45	(0.09 – 1.30)
2014	7,884	40,226	0.20	25	10.96	2.28	(1.48 – 3.37)
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)							
2015	28	92,895	0.00	0	0.05	0.00	(0.00 – 66.77)
2014	1	93,918	0.00	0	0.00	0.00	(0.00 – 2,939.56)
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)							
2015	3,167	22,918	0.14	1	3.46	0.29	(0.00 – 1.61)
2014	2,643	21,491	0.12	2	3.66	0.55	(0.06 – 1.97)
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)							
2015	211	4,315	0.05	1	0.25	3.93	(0.05 – 21.86)
2014	268	4,145	0.06	1	0.37	2.72	(0.04 – 15.11)
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)							
2015	1,107	11,750	0.09	0	1.25	0.00	(0.00 – 2.92)
2014	947	12,240	0.08	1	1.30	0.77	(0.01 – 4.27)
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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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
PENN HIGHLANDS BROOKVILLE (12418)							
2015	847	6,925	0.12	0	0.94	0.00	(0.00 – 3.92)
2014	606	4,874	0.12	0	0.84	0.00	(0.00 – 4.37)
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)
PENN HIGHLANDS CLEARFIELD (11843)							
2015	2,214	10,165	0.22	0	2.32	0.00	(0.00 – 1.58)
2014	2,157	11,297	0.19	0	3.00	0.00	(0.00 – 1.22)
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)
PENN HIGHLANDS DUBOIS (11606)							
2015	5,372	44,225	0.12	4	5.94	0.67	(0.18 – 1.72)
2014	4,934	44,838	0.11	8	6.82	1.17	(0.51 – 2.31)
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)
PENN HIGHLANDS ELK (11859)							
2015	1,277	8,972	0.14	0	1.39	0.00	(0.00 – 2.64)
2014	1,515	10,543	0.14	0	2.10	0.00	(0.00 – 1.75)
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)
PENN PRESBYTERIAN MEDICAL CENTER (11814)							
2015	17,992	78,297	0.23	12	22.86	0.52	(0.27 – 0.92)
2014	13,268	63,103	0.21	16	26.82	0.60	(0.34 – 0.97)
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)							
2015	891	17,458	0.05	0	1.07	0.00	(0.00 – 3.43)
2014	1,098	18,144	0.06	3	1.51	1.99	(0.40 – 5.82)
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 HOSPITAL OF THE UNIVERSITY OF PA HEALTH SYS (11448)							
2015	11,813	93,938	0.13	20	15.90	1.26	(0.77 – 1.94)
2014	12,847	96,178	0.13	22	25.84	0.85	(0.53 – 1.29)
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)
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)							
2015	5,267	37,090	0.14	12	5.74	2.09	(1.08 – 3.65)
2014	4,702	35,174	0.13	7	6.51	1.08	(0.43 – 2.22)
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)

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Table 4.3.7 – Continued from previous page

	Catheter Utilization Days	Patient Days	Catheter Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
PHYSICIANS CARE SURGICAL HOSPITAL (19630)							
2015	401	1,401	0.29	0	0.41	0.00	(0.00 – 8.98)
2014	497	1,341	0.37	0	0.70	0.00	(0.00 – 5.27)
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 - COMMUNITY GENERAL OSTEOPATHIC HOSPITAL (34069)							
2015	9,224	38,633	0.24	3	11.68	0.26	(0.05 – 0.75)
2014	9,317	48,295	0.19	12	18.82	0.64	(0.33 – 1.11)
2013	.	.	.	.	.	.	.
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
PINNACLE HEALTH HOSPITALS - HARRISBURG HOSPITAL (34068)							
2015	18,966	93,348	0.20	19	24.38	0.78	(0.47 – 1.22)
2014	22,019	105,146	0.21	36	44.51	0.81	(0.57 – 1.12)
2013	.	.	.	.	.	.	.
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
PINNACLE HEALTH HOSPITALS - WEST SHORE HOSPITAL (35123)							
2015	6,325	29,091	0.22	4	8.08	0.50	(0.13 – 1.27)
2014	.	.	.	.	.	.	.
2013	.	.	.	.	.	.	.
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
POCONO MEDICAL CENTER (11772)							
2015	8,427	53,092	0.16	2	11.09	0.18	(0.02 – 0.65)
2014	8,315	48,377	0.17	6	11.55	0.52	(0.19 – 1.13)
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)
POST ACUTE MEDICAL SPECIALTY HOSPITAL OF WILKES-BARRE (12604)							
2015	6,511	13,221	0.49	8	6.30	1.27	(0.55 – 2.50)
2014	3,950	8,262	0.48	5	5.55	0.90	(0.29 – 2.10)
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)
POTTSTOWN MEMORIAL MEDICAL CENTER (11983)							
2015	5,986	39,499	0.15	11	6.48	1.70	(0.85 – 3.04)
2014	6,972	38,922	0.18	12	9.69	1.24	(0.64 – 2.16)
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)							
2015	990	8,931	0.11	0	1.10	0.00	(0.00 – 3.32)
2014	1,578	8,655	0.18	2	2.19	0.91	(0.10 – 3.29)
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)

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Table 4.3.7 – Continued from previous page

	Catheter Utilization Days	Patient Days	Catheter Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
READING HOSPITAL (12375)							
2015	18,710	161,227	0.12	8	25.38	0.32	(0.14 – 0.62)
2014	20,701	163,481	0.13	59	41.61	1.42	(1.08 – 1.83)
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)
REGIONAL HOSPITAL OF SCRANTON (12533)							
2015	14,160	47,980	0.30	8	17.57	0.46	(0.20 – 0.90)
2014	14,204	46,820	0.30	10	28.83	0.35	(0.17 – 0.64)
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)							
2015	11,834	40,887	0.29	4	12.04	0.33	(0.09 – 0.85)
2014	12,729	42,659	0.30	10	17.78	0.56	(0.27 – 1.03)
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)							
2015	14,743	64,154	0.23	8	18.73	0.43	(0.18 – 0.84)
2014	13,191	64,027	0.21	16	26.66	0.60	(0.34 – 0.97)
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)
ROTHMAN ORTHOPAEDIC SPECIALTY HOSPITAL (15202)							
2015	94	2,111	0.04	0	0.11	0.00	(0.00 – 32.06)
2014	68	1,468	0.05	0	0.09	0.00	(0.00 – 39.41)
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)
ROXBOROUGH MEMORIAL HOSPITAL (11978)							
2015	2,971	22,296	0.13	0	3.98	0.00	(0.00 – 0.92)
2014	3,191	22,567	0.14	0	6.42	0.00	(0.00 – 0.57)
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)							
2015	2,271	29,550	0.08	1	3.20	0.31	(0.00 – 1.74)
2014	2,356	31,223	0.08	3	4.71	0.64	(0.13 – 1.86)
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)
SAINT VINCENT HOSPITAL (11699)							
2015	14,448	72,378	0.20	14	18.61	0.75	(0.41 – 1.26)
2014	15,605	76,357	0.20	29	31.54	0.92	(0.62 – 1.32)
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 Utilization	Catheter Patient	Catheter Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
SCHUYLKILL MEDICAL CENTER - EAST NORWEGIAN STREET (11922)							
2015	2,548	22,631	0.11	2	2.84	0.70	(0.08 – 2.54)
2014	2,730	24,025	0.11	3	3.77	0.79	(0.16 – 2.32)
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)							
2015	2,470	28,355	0.09	2	2.82	0.71	(0.08 – 2.56)
2014	3,537	32,746	0.11	6	4.89	1.23	(0.45 – 2.67)
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 SPECIALTY HOSPITAL - ERIE (11880)							
2015	1,364	10,208	0.13	7	1.49	4.68	(1.88 – 9.65)
2014	1,467	8,648	0.17	8	2.04	3.93	(1.69 – 7.74)
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 SPECIALTY HOSPITAL - CENTRAL PA (13921)							
2015	2,658	10,648	0.25	3	2.74	1.09	(0.22 – 3.20)
2014	2,512	10,284	0.24	8	3.50	2.28	(0.98 – 4.50)
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)
SELECT SPECIALTY HOSPITAL - CENTRAL PENNSYLVANIA (CAMP HILL) (12147)							
2015	2,763	10,227	0.27	3	2.83	1.06	(0.21 – 3.10)
2014	2,583	10,293	0.25	3	3.60	0.83	(0.17 – 2.43)
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 - CENTRAL PENNSYLVANIA (YORK) (12334)							
2015	1,730	5,926	0.29	1	1.76	0.57	(0.01 – 3.16)
2014	1,821	5,770	0.32	5	2.55	1.96	(0.63 – 4.58)
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 SPECIALTY HOSPITAL - DANVILLE (12123)							
2015	1,094	8,825	0.12	2	1.21	1.66	(0.19 – 5.98)
2014	793	6,510	0.12	1	1.10	0.91	(0.01 – 5.07)
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 - JOHNSTOWN (12299)							
2015	4,781	11,706	0.41	0	4.71	0.00	(0.00 – 0.78)
2014	4,688	10,221	0.46	7	6.58	1.06	(0.43 – 2.19)
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)

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Table 4.3.7 – Continued from previous page

	Catheter	Patient	Catheter	Number of	Number of	Standardized	95% Confidence
	Days	Days	Utilization	Observed	Predicted	Infection	Interval
			Rate	Infections	Infections	Ratio	
			(DUR)			(SIR)	
SELECT SPECIALTY HOSPITAL - MCKEESPORT, INC. (12271)							
2015	2,661	6,745	0.39	3	2.63	1.14	(0.23 – 3.33)
2014	2,616	6,946	0.38	1	3.66	0.27	(0.00 – 1.52)
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)							
2015	4,363	9,645	0.45	1	4.25	0.24	(0.00 – 1.31)
2014	4,559	9,533	0.48	5	6.40	0.78	(0.25 – 1.82)
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)							
2015	3,401	8,276	0.41	0	3.35	0.00	(0.00 – 1.10)
2014	3,347	7,100	0.47	5	4.70	1.06	(0.34 – 2.48)
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)							
2015	5,608	31,627	0.18	2	5.98	0.33	(0.04 – 1.21)
2014	5,861	38,092	0.15	2	8.13	0.25	(0.03 – 0.89)
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 HOSPITALS FOR CHILDREN - PHILA (12244)							
2015	642	4,045	0.16	1	0.69	1.45	(0.02 – 8.04)
2014	982	4,361	0.23	2	1.37	1.46	(0.16 – 5.28)
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 AND SAILORS MEMORIAL HOSPITAL (11688)							
2015	1,448	8,406	0.17	1	1.89	0.53	(0.01 – 2.94)
2014	1,492	10,117	0.15	1	3.00	0.33	(0.00 – 1.85)
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)							
2015	3,224	17,325	0.19	0	3.42	0.00	(0.00 – 1.07)
2014	3,610	15,166	0.24	0	7.31	0.00	(0.00 – 0.50)
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)							
2015	471	9,573	0.05	0	0.57	0.00	(0.00 – 6.46)
2014	740	10,418	0.07	0	1.02	0.00	(0.00 – 3.60)
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)

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	Catheter	Patient	Catheter	Number of	Number of	Standardized	95% Confidence
	Days	Days	Utilization	Observed	Predicted	Infection	Interval
			Rate	Infections	Infections	Ratio	
			(DUR)			(SIR)	
ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)							
2015	1,005	41,688	0.02	0	1.58	0.00	(0.00 – 2.32)
2014	1,039	40,772	0.03	3	2.05	1.46	(0.29 – 4.27)
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)							
2015	10,345	80,862	0.13	9	13.90	0.65	(0.30 – 1.23)
2014	9,905	86,277	0.11	6	19.89	0.30	(0.11 – 0.66)
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 CTR (11961)							
2015	5,167	34,405	0.15	8	6.84	1.17	(0.50 – 2.31)
2014	4,427	32,614	0.14	4	8.91	0.45	(0.12 – 1.15)
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)							
2015	2,130	30,609	0.07	7	3.03	2.31	(0.92 – 4.75)
2014	2,608	30,140	0.09	17	5.22	3.26	(1.90 – 5.21)
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 BETHLEHEM (11718)							
2015	15,916	154,413	0.10	33	21.83	1.51	(1.04 – 2.12)
2014	18,378	150,512	0.12	35	36.93	0.95	(0.66 – 1.32)
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 HOSPITAL- ANDERSON CAMPUS (21487)							
2015	1,846	25,843	0.07	2	2.62	0.76	(0.09 – 2.75)
2014	2,285	22,218	0.10	3	4.58	0.65	(0.13 – 1.91)
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 MINERS MEMORIAL HOSPITAL (11784)							
2015	1,131	7,326	0.15	1	1.22	0.82	(0.01 – 4.55)
2014	1,341	7,403	0.18	2	1.86	1.07	(0.12 – 3.88)
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)							
2015	1,038	13,465	0.08	1	1.20	0.83	(0.01 – 4.64)
2014	1,036	13,846	0.07	0	1.43	0.00	(0.00 – 2.57)
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)

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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
ST. MARY MEDICAL CENTER (11885)							
2015	11,852	91,097	0.13	24	13.02	1.84	(1.18 – 2.74)
2014	11,598	98,939	0.12	28	16.04	1.75	(1.16 – 2.52)
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 REHABILITATION HOSPITAL LLP (36959)							
2015	618	13,877	0.04	4	0.75	5.32	(1.43 – 13.62)
2014	.	.	.	.	.	.	.
2013	.	.	.	.	.	.	.
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
SUNBURY COMMUNITY HOSP (12105)							
2015	738	5,429	0.14	0	0.81	0.00	(0.00 – 4.54)
2014	1,000	6,350	0.16	0	1.39	0.00	(0.00 – 2.64)
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)							
2015	750	1,816	0.41	0	0.74	0.00	(0.00 – 4.97)
2014	643	1,693	0.38	0	0.90	0.00	(0.00 – 4.07)
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)							
2015	540	2,422	0.22	1	0.56	1.77	(0.02 – 9.88)
2014	552	1,955	0.28	0	0.77	0.00	(0.00 – 4.76)
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)							
2015	29,838	149,928	0.20	70	38.44	1.82	(1.42 – 2.30)
2014	28,357	146,564	0.19	53	57.27	0.93	(0.69 – 1.21)
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)
THOMAS JEFFERSON UNIVERSITY HOSPITAL - METHODIST (12017)							
2015	4,296	70,561	0.06	2	6.20	0.32	(0.04 – 1.17)
2014	5,978	51,933	0.12	4	12.00	0.33	(0.09 – 0.85)
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 UNIVERSITY HOSPITAL (11506)							
2015	43,589	192,758	0.23	73	55.47	1.32	(1.03 – 1.65)
2014	49,086	195,809	0.25	112	99.42	1.13	(0.93 – 1.36)
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)

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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
TITUSVILLE AREA HOSPITAL (11738)							
2015	445	5,162	0.09	0	0.51	0.00	(0.00 – 7.21)
2014	.	.	.	.	.	.	.
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)
TROY COMMUNITY HOSPITAL (12018)							
2015	2,167	6,879	0.32	0	2.19	0.00	(0.00 – 1.68)
2014	1,702	7,070	0.24	1	2.37	0.42	(0.01 – 2.35)
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)							
2015	301	2,093	0.14	0	0.33	0.00	(0.00 – 11.20)
2014	328	3,430	0.10	0	0.45	0.00	(0.00 – 8.11)
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)							
2015	226	2,530	0.09	0	0.26	0.00	(0.00 – 14.25)
2014	258	2,290	0.11	0	0.36	0.00	(0.00 – 10.29)
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)							
2015	10,666	37,577	0.28	6	10.87	0.55	(0.20 – 1.20)
2014	10,759	41,357	0.26	8	21.80	0.37	(0.16 – 0.72)
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 ALTOONA (10178)							
2015	22,475	87,354	0.26	20	28.25	0.71	(0.43 – 1.09)
2014	19,140	81,988	0.23	51	26.67	1.91	(1.42 – 2.51)
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)
UPMC BEDFORD (11680)							
2015	1,372	6,429	0.21	0	1.44	0.00	(0.00 – 2.55)
2014	1,479	7,219	0.20	0	2.06	0.00	(0.00 – 1.78)
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)

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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 EAST (28812)							
2015	8,780	46,066	0.19	9	9.30	0.97	(0.44 – 1.84)
2014	8,927	42,254	0.21	11	12.42	0.89	(0.44 – 1.58)
2013	8,549	29,712	0.29	9	13.14	0.68	(0.31 – 1.30)
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
UPMC HAMOT (11725)							
2015	20,065	90,868	0.22	35	25.59	1.37	(0.95 – 1.90)
2014	20,501	86,141	0.24	45	41.50	1.08	(0.79 – 1.45)
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)							
2015	6,758	32,110	0.21	5	8.66	0.58	(0.19 – 1.35)
2014	7,053	33,387	0.21	8	14.26	0.56	(0.24 – 1.11)
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)							
2015	5,768	45,027	0.13	3	7.75	0.39	(0.08 – 1.13)
2014	6,596	49,590	0.13	9	13.27	0.68	(0.31 – 1.29)
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)							
2015	22,934	131,690	0.17	19	29.92	0.63	(0.38 – 0.99)
2014	23,910	134,664	0.18	33	48.24	0.68	(0.47 – 0.96)
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)
UPMC NORTHWEST (11837)							
2015	4,520	29,589	0.15	1	5.97	0.17	(0.00 – 0.93)
2014	5,120	32,984	0.16	2	7.10	0.28	(0.03 – 1.02)
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)							
2015	21,282	90,252	0.24	27	22.09	1.22	(0.81 – 1.78)
2014	23,476	98,593	0.24	25	32.72	0.76	(0.49 – 1.13)
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 - SHADYSIDE (10118)							
2015	38,539	148,882	0.26	56	48.41	1.16	(0.87 – 1.50)
2014	36,960	145,787	0.25	86	74.87	1.15	(0.92 – 1.42)
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)

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Table 4.3.7 – Continued from previous page

	Catheter Days	Patient Days	Catheter Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
UPMC PRESBYTERIAN SHADYSIDE (10348)							
2015	62,216	207,546	0.30	97	77.07	1.26	(1.02 – 1.54)
2014	65,367	216,611	0.30	200	132.67	1.51	(1.31 – 1.73)
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 ST. MARGARET (11561)							
2015	16,607	66,909	0.25	20	20.95	0.95	(0.58 – 1.47)
2014	17,030	70,654	0.24	30	34.48	0.87	(0.59 – 1.24)
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)							
2015	2,104	14,133	0.15	3	2.28	1.31	(0.26 – 3.84)
2014	1,908	14,525	0.13	1	2.64	0.38	(0.00 – 2.11)
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)
WASHINGTON HOSPITAL, THE (11460)							
2015	9,329	54,096	0.17	5	12.18	0.41	(0.13 – 0.96)
2014	9,856	52,992	0.19	12	19.90	0.60	(0.31 – 1.05)
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)
WAYNE MEMORIAL HOSPITAL (12004)							
2015	1,782	16,448	0.11	0	1.99	0.00	(0.00 – 1.84)
2014	1,975	16,887	0.12	2	2.73	0.73	(0.08 – 2.64)
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)							
2015	1,172	8,596	0.14	0	1.28	0.00	(0.00 – 2.86)
2014	1,227	8,868	0.14	0	1.70	0.00	(0.00 – 2.16)
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)							
2015	1,208	17,003	0.07	2	1.41	1.42	(0.16 – 5.14)
2014	968	16,960	0.06	1	1.33	0.75	(0.01 – 4.19)
2013	975	15,195	0.06	4	1.45	2.76	(0.74 – 7.06)
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
WEST PENN HOSPITAL (11864)							
2015	5,574	67,175	0.08	5	7.81	0.64	(0.21 – 1.49)
2014	5,198	62,189	0.08	6	10.40	0.58	(0.21 – 1.26)
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)

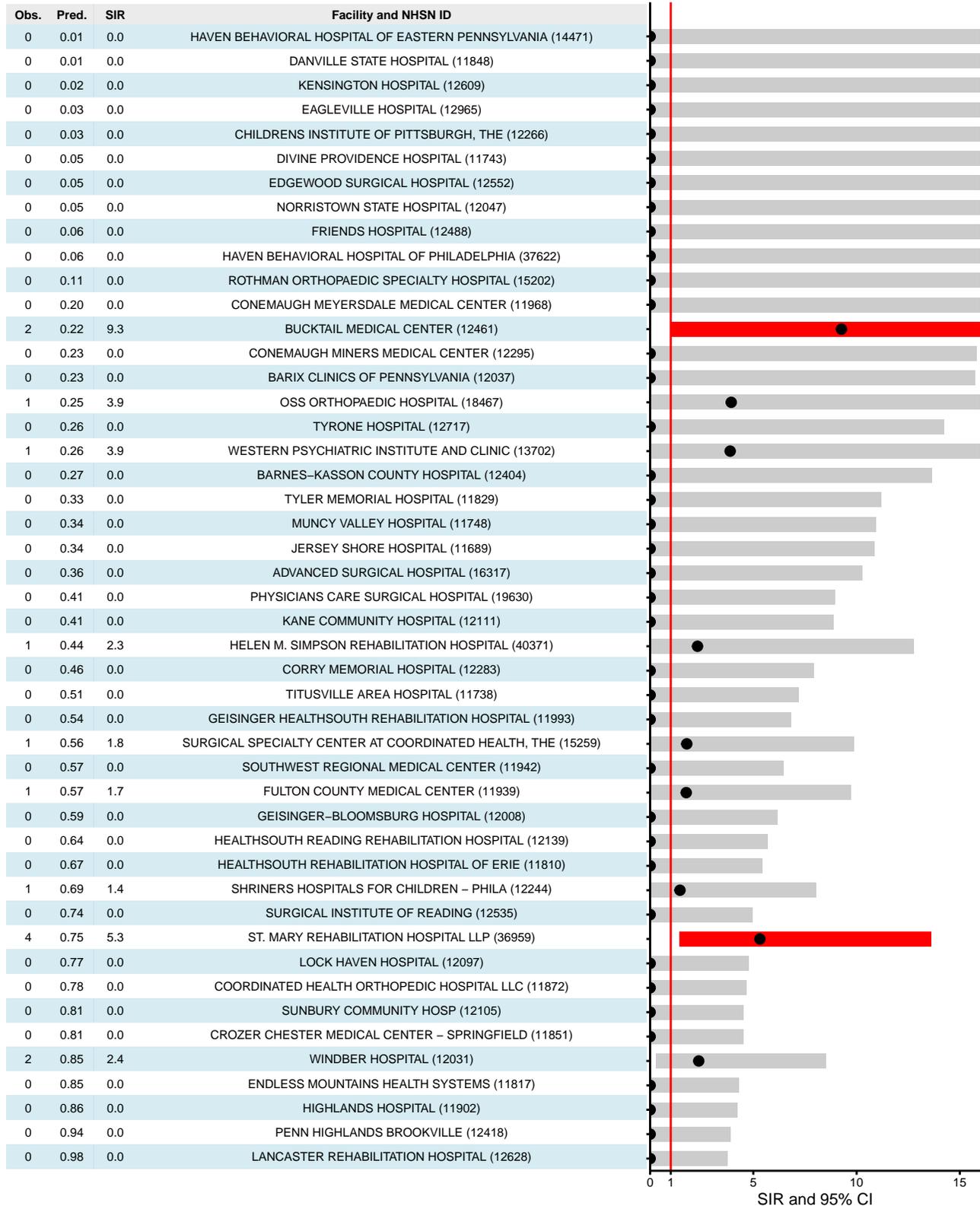
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Table 4.3.7 – Continued from previous page

	Catheter Days	Patient Days	Catheter Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
WESTERN PSYCHIATRIC INSTITUTE AND CLINIC (13702)							
2015	124	93,517	0.00	1	0.26	3.88	(0.05 – 21.57)
2014	94	97,915	0.00	3	0.18	16.75	(3.37 – 48.96)
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)
WILKES-BARRE GENERAL HOSPITAL (11916)							
2015	18,359	75,937	0.24	16	23.21	0.69	(0.39 – 1.12)
2014	20,132	82,084	0.25	25	40.77	0.61	(0.40 – 0.91)
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)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)							
2015	10,802	50,463	0.21	2	13.82	0.14	(0.02 – 0.52)
2014	11,570	53,831	0.21	6	23.39	0.26	(0.09 – 0.56)
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)							
2015	797	4,477	0.18	2	0.85	2.35	(0.26 – 8.50)
2014	963	5,609	0.17	3	1.34	2.24	(0.45 – 6.55)
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)							
2015	23,342	177,103	0.13	31	31.28	0.99	(0.67 – 1.41)
2014	22,262	167,963	0.13	63	44.77	1.41	(1.08 – 1.80)
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, 2015

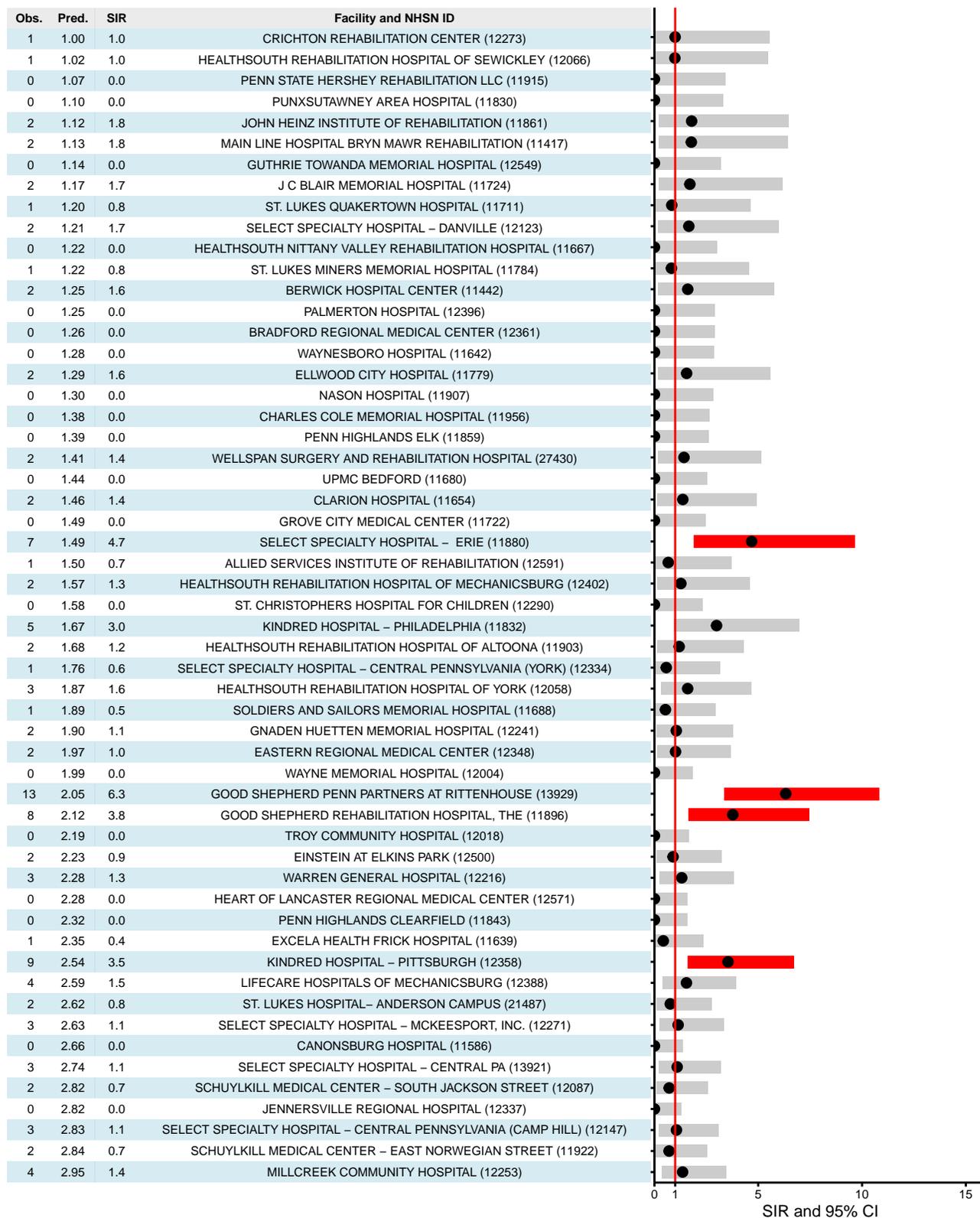
Grouped by Number of Predicted (Pred.) Infections: <1



■ 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, 2015

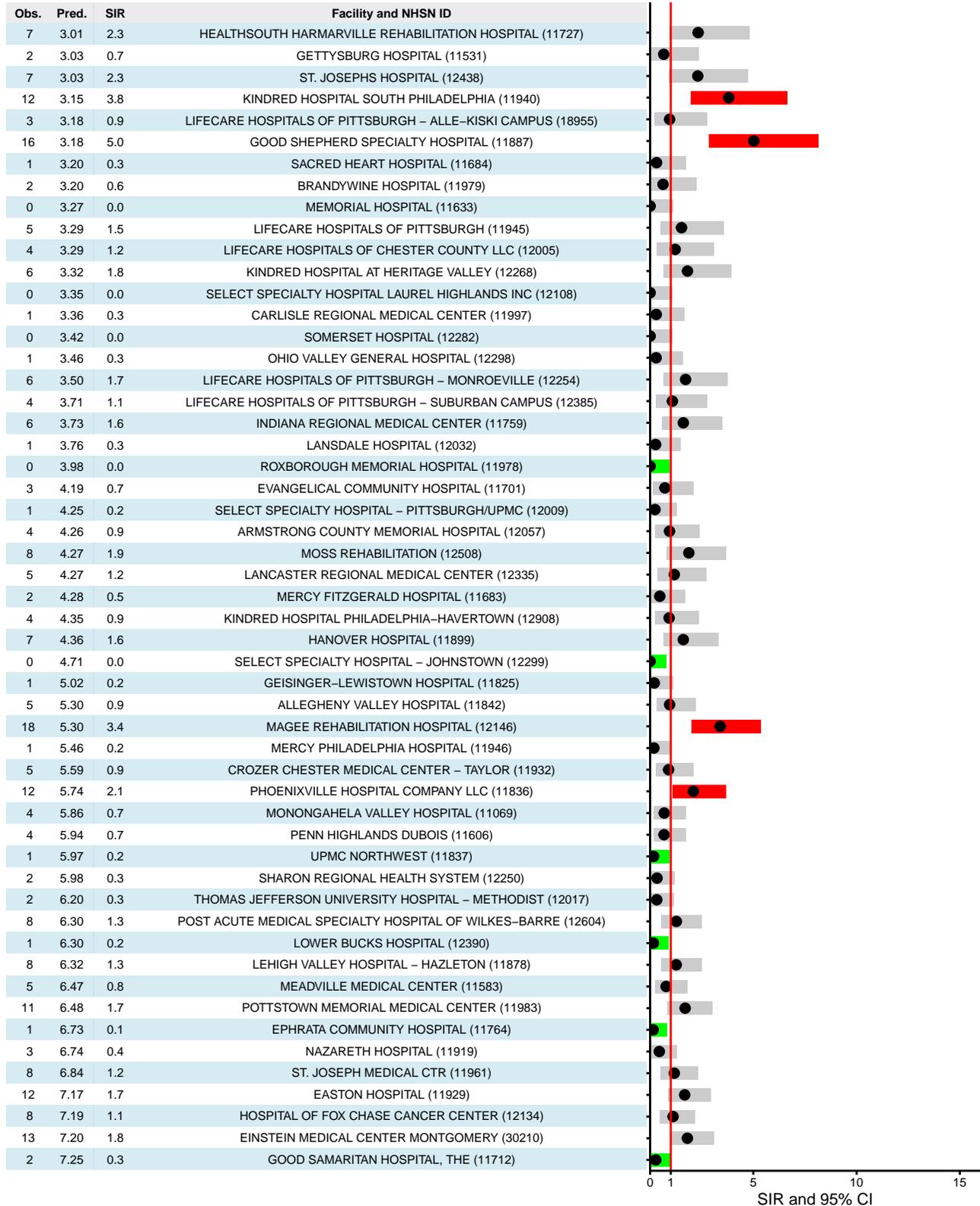
Grouped by Number of Predicted (Pred.) Infections: 1–2.99



■ 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, 2015

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



■ 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, 2015

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

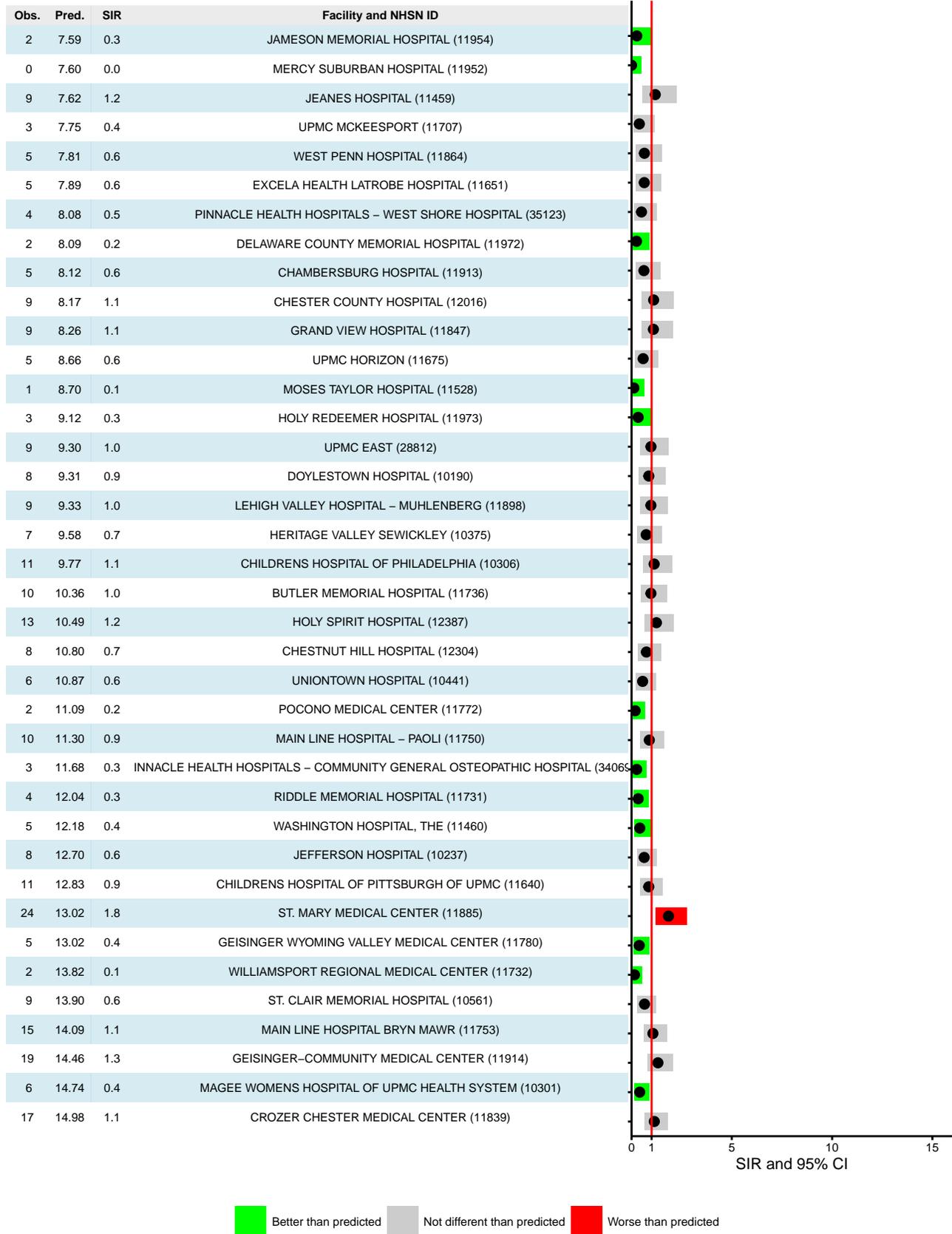


Figure 4.3.5: Number of Observed (Obs.) Catheter-Associated Urinary Tract Infections (CAUTI) and Relative Ranking of Facilities by Standardized Infection Ratio (SIR) — Pennsylvania, 2015

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

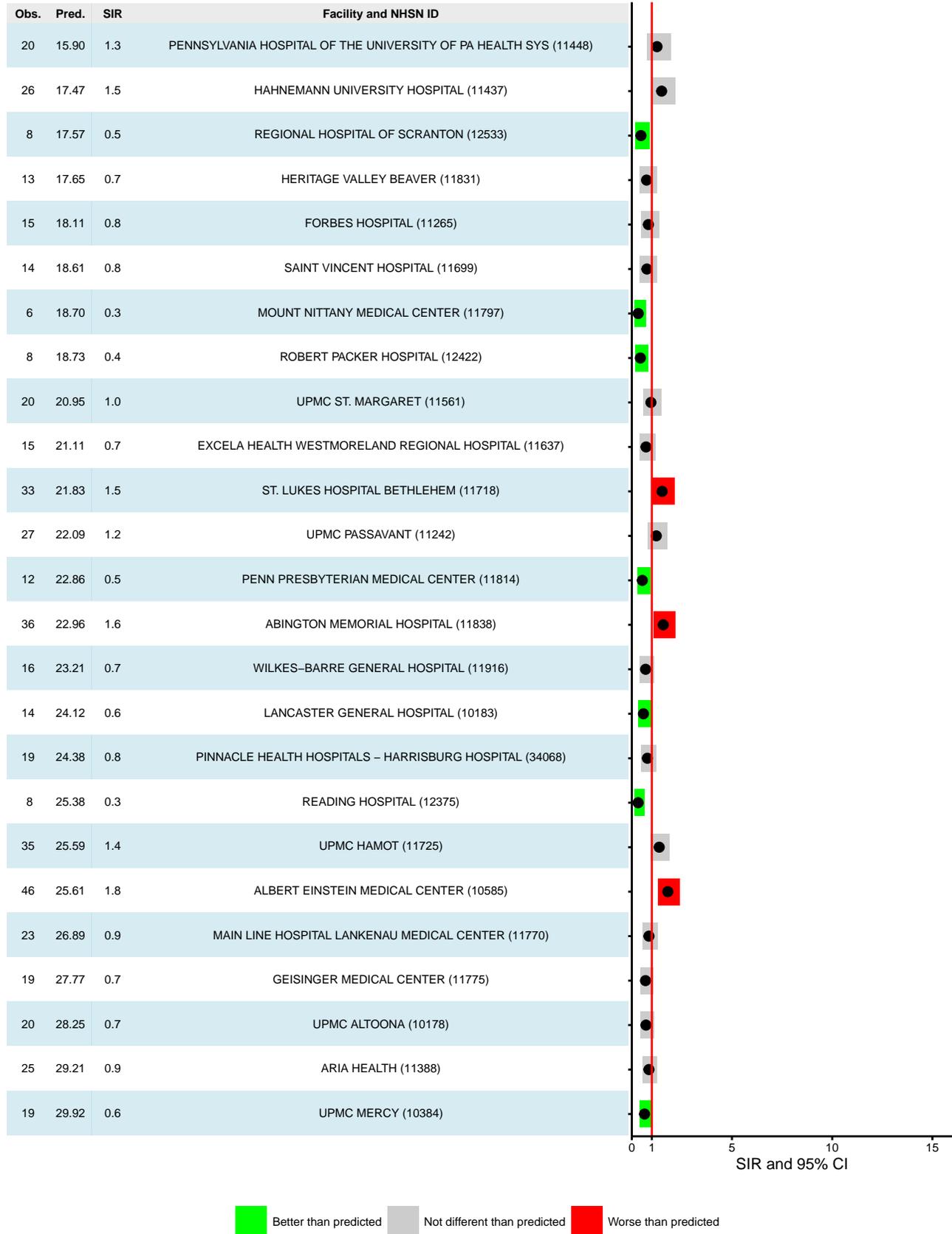
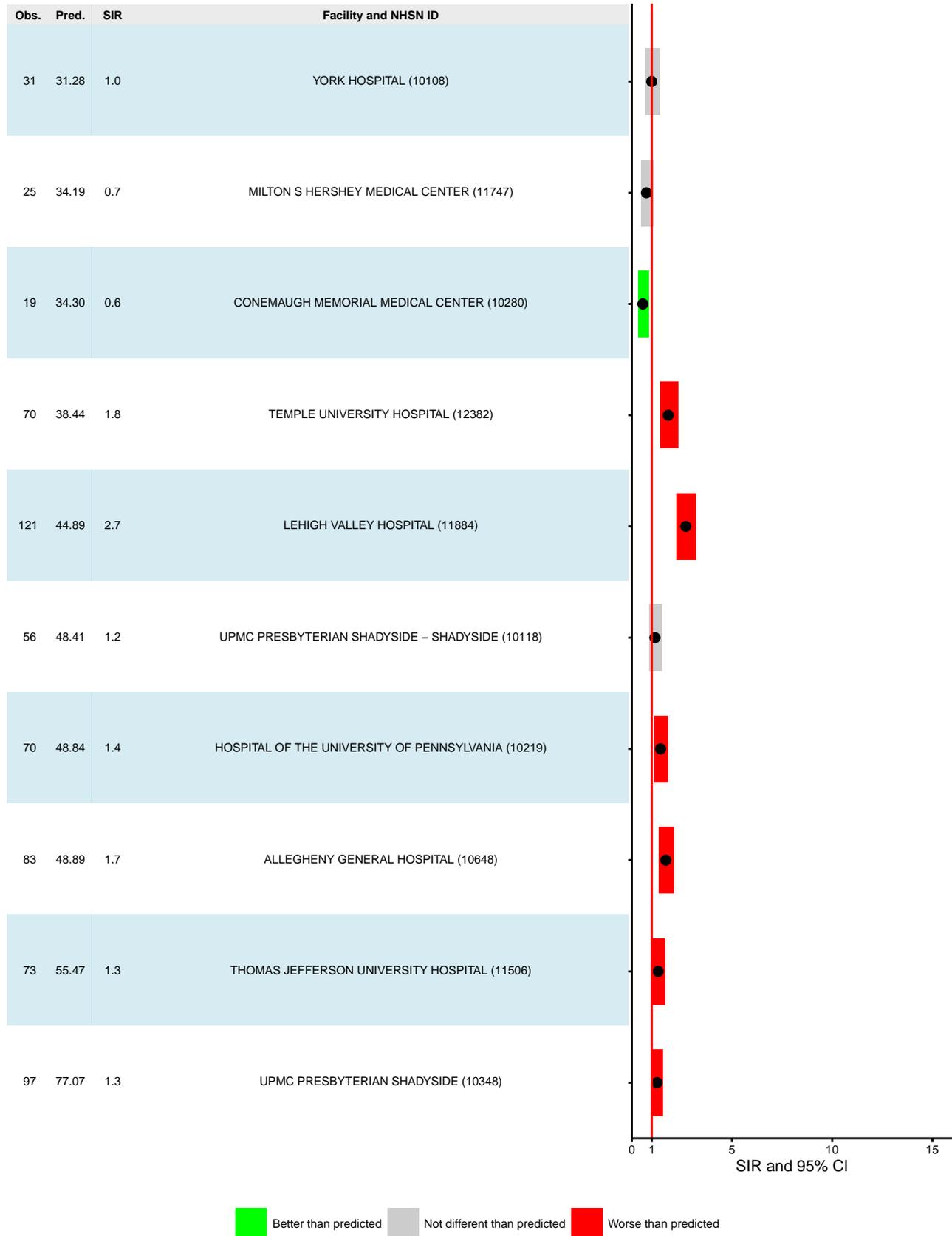


Figure 4.3.6: Number of Observed (Obs.) Catheter-Associated Urinary Tract Infections (CAUTI) and Relative Ranking of Facilities by Standardized Infection Ratio (SIR) — Pennsylvania, 2015

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



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 health care 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 10.28 percent (Table 4.4.2, Figure 4.4.1); however, the 2015 rate is 51.5 percent higher than 2014. This dramatic increase in the CLABSI rate is likely due to implementation of new CDC case definitions between 2014 and 2015. These case definition changes affected the way primary and secondary BSI are categorized. In 2015, hospitals reported fewer secondary BSI and more BSI, including CLABSIs. Comparison of 2014 and 2015 crude BSI or CLABSI rates is not recommended. Also, as previously noted, PADOH calculates its own standardized infection ratios, using statewide data from the year of analysis as a baseline. Therefore, year-to-year changes in the SIR should also be interpreted cautiously. The definition of the central-line device utilization rate has not changed, and year-to-year comparisons are still valid.

In 2015, 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, 144 used them in the ICU and/or other ward locations and 23 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, 2015

	Number of Facilities
ICUs and other wards	144
ICUs, other wards, and specialty care areas	8
ICUs, other wards, specialty care areas and NICUs	15
ICUs, other wards and NICUs	27
Long-term acute care facilities	23
All	217

Among the 217 hospitals that used central lines in 2015, a total of 146 (67.3 percent) reported at least one CLABSI. During 2015, there were a total of 1,703 CLABSIs reported (Table 4.4.2). Among the 1,703 CLABSIs, 93 (5.5 percent) occurred in the NICU, 327 (19.2 percent) occurred in SCAs, 156 (9.2 percent) occurred in LTACs, 497 (29.2 percent) occurred in ward locations, and 630 (37.0 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, 2015

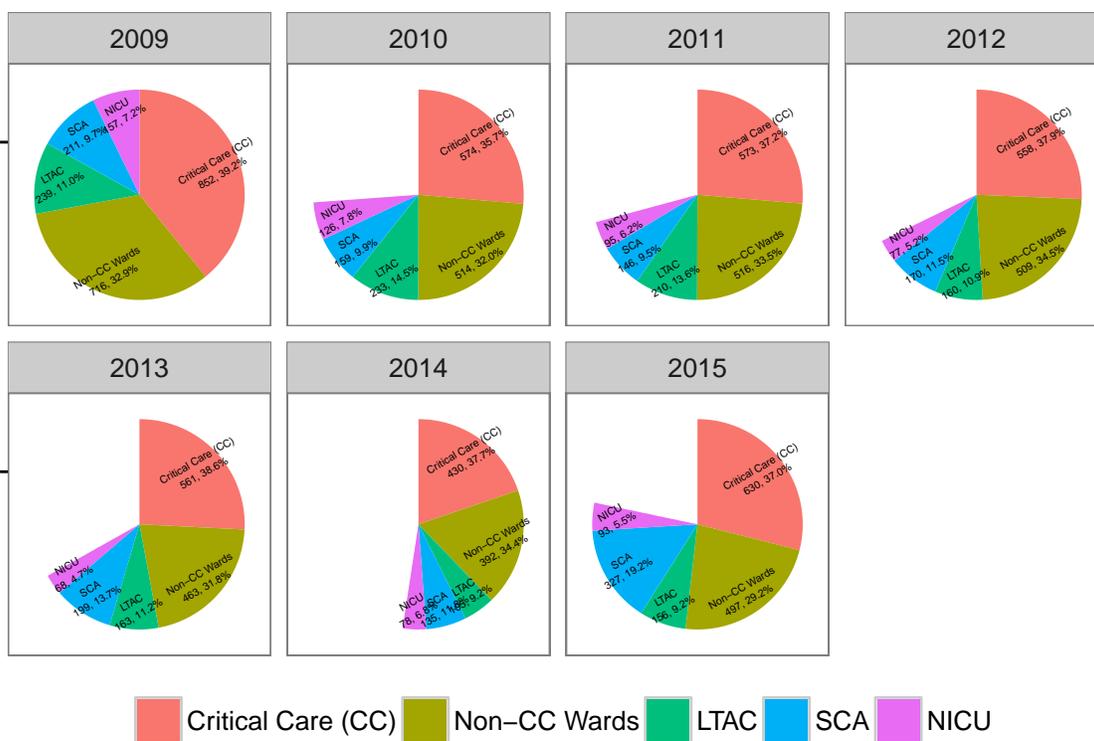


Table 4.4.2: Summary of Central Line-Associated Bloodstream Infections (CLABSI) — Pennsylvania, 2009–2015

	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)
2015	1,703	1,539,281	1.11 (1.05–1.16)	51.48 (– 10.28)	9,774,027	0.16	– 1.69 (– 7.13)
2014	1,140	1,560,837	0.73 (0.69–0.77)	– 17.83 (– 40.77)	9,743,208	0.16	– 3.58 (– 5.53)
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)
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)
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)
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)
2009	2,175	1,763,902	1.23 (1.18–1.29)	.	10,402,161	0.17	.

These CLABSIs occurred over a total of 1,539,281 central line days. The range of central line days reported by hospitals in 2015 ranged from 6 central line days to a high of 93,736 central line days.

The absolute number of CLABSIs reported in 2015 was 49.39 percent higher than in 2014, and the number of central line days reported in 2015 was 1.38 percent lower than in 2014. The device utilization ratio decreased 1.69 percent between 2014 and 2015. The CLABSI rate for 2015 was 1.11 CLABSIs per 1,000 central line days; this is an increase of 51.48 percent from 2014 to 2015 and a 10.28 percent decrease from 2009 to 2015. This translates to 3,242 fewer CLABSIs in Pennsylvania than would have occurred if the 2009 CLABSI rate had persisted into 2015.

4.4.2 CLABSI — 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, 2009–2015

	Number of CLABSI	Central Line Days	Rate per 1,000 Central Line Days	Patient Days	Device Utilization Ratio — DUR (Line Days / Pt. Days)
Neonatal Intensive Care Unit (NICU)					
2015	93	55,195	1.68	285,784	0.19
2014	78	53,928	1.45	275,572	0.20
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
Specialty Care Area (SCA)					
2015	327	153,901	2.12	254,551	0.60
2014	135	121,881	1.11	206,506	0.59
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
Stepdown Unit (Step)					
2015	74	88,866	0.83	591,911	0.15
2014	57	91,714	0.62	612,059	0.15
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
Long Term Acute Care (LTAC) Area					
2015	156	118,374	1.32	225,840	0.52
2014	105	118,757	0.88	216,711	0.55
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
Burn ICU (cc:Burn)					
2015	12	4,014	2.99	11,742	0.34
2014	7	4,492	1.56	12,671	0.35
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
Cardiothoracic ICU (cc:CT)					
2015	84	64,639	1.30	92,646	0.70
2014	45	66,505	0.68	94,088	0.71
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

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	Number of CLABSI	Central Line Days	Rate per 1,000 Central Line Days	Patient Days	Device Utilization Ratio (Line Days / Pt. Days)
Medical/Surgical ICU (cc:MS)					
2015	171	196,887	0.87	440,489	0.45
2014	156	200,923	0.78	440,304	0.46
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
Medical ICU (cc:Med)					
2015	94	66,924	1.40	120,846	0.55
2014	61	67,257	0.91	124,738	0.54
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
Pediatric ICU (cc:Peds)					
2015	63	34,734	1.81	63,590	0.55
2014	31	33,832	0.92	61,738	0.55
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
Specialty Medicine ICU (cc:SpecMed)					
2015	28	27,563	1.02	64,146	0.43
2014	18	28,799	0.63	76,244	0.38
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
Surgical ICU (cc:Surgery)					
2015	60	48,656	1.23	94,560	0.51
2014	37	55,618	0.67	99,475	0.56
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
Trauma ICU (cc:Trauma)					
2015	44	31,082	1.42	56,999	0.55
2014	18	29,111	0.62	51,018	0.57
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

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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)
Behavioral Ward (w:Behavior)					
2015	2	2,228	0.90	1,636,134	0.00
2014	5	2,721	1.84	1,680,120	0.00
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
Labor, Delivery and Post-Partum Ward (w:LD_PP)					
2015	1	1,168	0.86	371,339	0.00
2014	1	1,089	0.92	374,919	0.00
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
Medical/Surgical Ward (w:MS)					
2015	190	265,732	0.72	2,270,400	0.12
2014	150	284,842	0.53	2,305,133	0.12
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
Medical Ward (w:Med)					
2015	161	187,492	0.86	1,343,010	0.14
2014	134	203,047	0.66	1,261,364	0.16
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
Newborn Nursery (w:Newborn)					
2015	0	359	0.00	179,952	0.00
2014	0	106	0.00	173,218	0.00
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
Pediatric Medical/Surgical Ward (w:Ped_ms)					
2015	38	33,698	1.13	221,751	0.15
2014	35	36,109	0.97	224,727	0.16
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
Rehabilitation Ward (w:Rehab)					
2015	21	46,219	0.45	694,347	0.07
2014	21	46,928	0.45	689,599	0.07
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

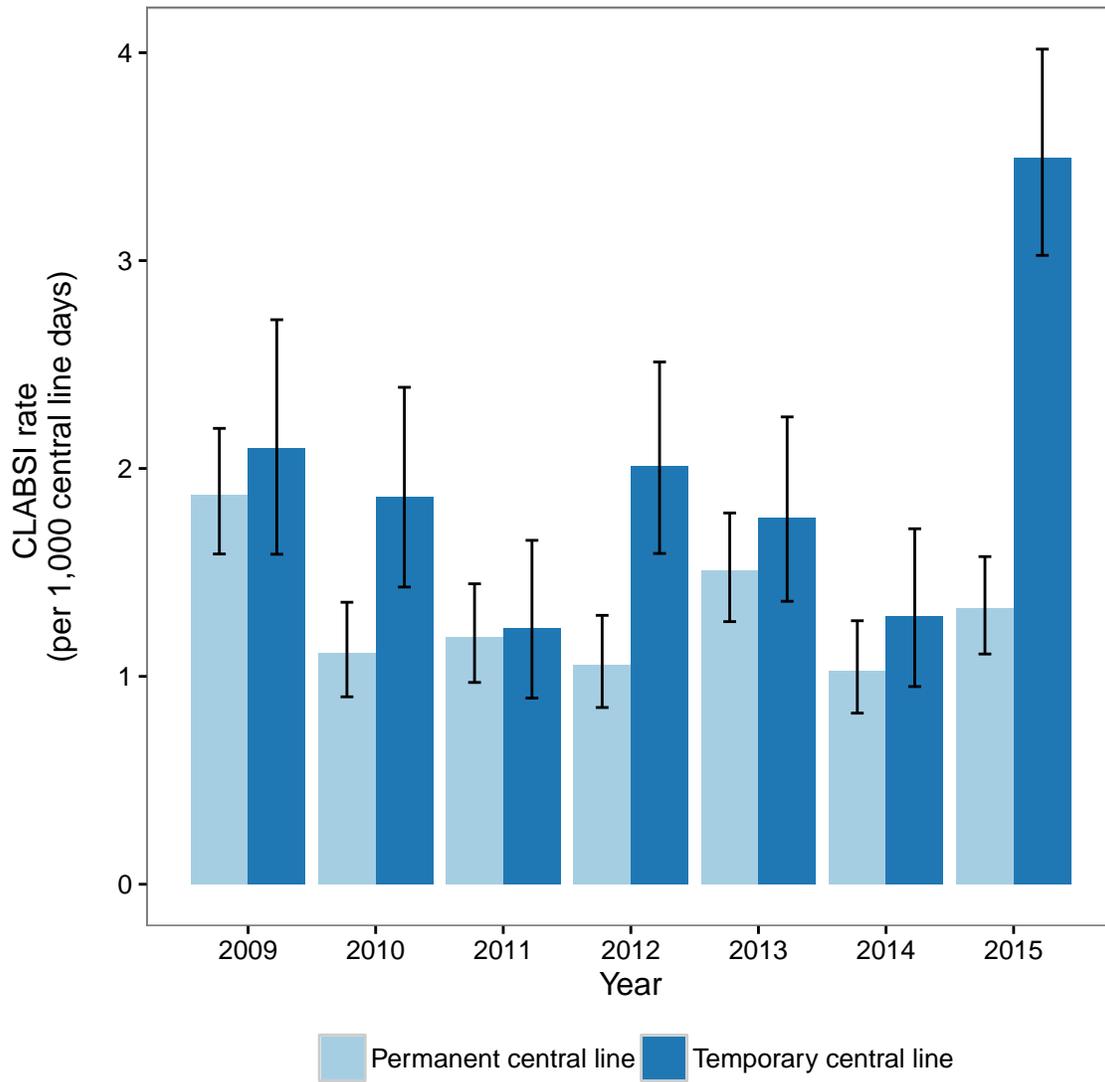
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Table 4.4.3 – Continued from previous page

	Number of CLABSI	Central Line Days	Rate per 1,000 Central Line Days	Patient Days	Device Utilization Ratio (Line Days / Pt. Days)
Surgical Ward (w:Surgery)					
2015	84	111,550	0.75	753,990	0.15
2014	46	113,178	0.41	763,004	0.15
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 (Figure 4.4.2.) Notably, the SCA CLABSI rate for temporary central lines nearly tripled between 2014 and 2015 but not for permanent central lines.

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, 2009–2015



4.4.3 CLABSIs — By Pathogen

In 2015, hospitals reported a total of 1,928 isolates from 1,703 CLABSIs (some patients had an infection with more than one organism). Consistent with previous years, three pathogens (i.e., *Staphylococcus aureus*, *Klebsiella pneumoniae*, *Enterococcus faecalis*) accounted for 31.28 percent of isolates cultured from patients with a CLABSI (Table 4.4.4). The 16 organisms listed in Table 4.4.4 account for 80.08 percent of isolates cultured from CLABSIs. The remaining isolates (19.92 percent) cultured from CLABSIs in 2015 are from 125 other pathogens, each individually accounting for less than 1 percent of the total results. The patterns seen in 2015 are not substantially different than those in 2014.

Table 4.4.4: Pathogens Isolated in Central Line-Associated Infections — Pennsylvania, 2014–2015

Pathogen	2014		2015	
	Count	%	Count	%
<i>Staphylococcus aureus</i>	209	15.99	270	14.00
<i>Klebsiella pneumoniae</i>	94	7.19	171	8.87
<i>Enterococcus faecalis</i>	115	8.80	162	8.40
<i>Escherichia coli</i>	88	6.73	149	7.73
<i>Enterococcus faecium</i>	73	5.59	130	6.74
<i>Candida albicans</i>	66	5.05	111	5.76
<i>Staphylococcus epidermidis</i>	66	5.05	108	5.60
<i>Pseudomonas aeruginosa</i>	64	4.90	87	4.51
<i>Candida glabrata</i>	43	3.29	74	3.84
<i>Staphylococcus coagulase negative</i>	76	5.81	59	3.06
<i>Enterobacter cloacae</i>	29	2.22	52	2.70
<i>Serratia marcescens</i>	37	2.83	52	2.70
<i>Klebsiella oxytoca</i>	18	1.38	40	2.07
<i>Candida parapsilosis</i>	25	1.91	34	1.76
<i>Enterobacter cloacae complex</i>	18	1.38	24	1.24
<i>Stenotrophomonas maltophilia</i>	10	0.77	21	1.09
Other	276	21.12	384	19.92
All	1,307	100.00	1,928	100.00

4.4.4 CLABSIs — By Facility

Among the 194 hospitals that used central lines in intensive care or general ward units (the ICU-Other category), 134 (69.1 percent) had a standardized infection ratio (SIR) less than 1.00, meaning the hospital reported **fewer** CLABSIs than predicted based on statewide rates; 60 hospitals (30.9 percent) had a SIR greater than 1.00, meaning the hospital reported **more** CLABSIs than predicted.

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 76 (39.2 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 194 hospitals in the ICU-other category, four hospitals (2.1 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, eight hospitals (4.1 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 infection predicted based on statewide rates of CLABSIs.

Among the other CLABSI-related locations (NICU, SCA and LTAC), two facilities with specialty care areas and one facility with a long-term acute care facility reported more CLABSIs than predicted. No NICUs 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 two hospitals (8.7 percent). Among 23 long term-acute care hospitals, there was three (13.0 percent) facilities that had an observed number of infections that was significantly better than predicted and one (4.3 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, 2015

	Hospital Name (NHSN ID)
ICUs and other wards	CONEMAUGH MEMORIAL MEDICAL CENTER (10280) PINNACLE HEALTH HOSPITALS - HARRISBURG HOSPITAL (34068) PINNACLE HEALTH HOSPITALS - WEST SHORE HOSPITAL (35123) ST. CLAIR MEMORIAL HOSPITAL (10561)
Specialty care areas	HOSPITAL OF FOX CHASE CANCER CENTER (12134) ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290) UPMC PRESBYTERIAN SHADYSIDE - SHADYSIDE (10118)
Long-term acute care wards	SELECT SPECIALTY HOSPITAL - CENTRAL PA (13921) SELECT SPECIALTY HOSPITAL - CENTRAL PENNSYLVANIA (CAMP HILL) (12147) SELECT SPECIALTY HOSPITAL LAUREL HIGHLANDS INC (12108)
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, 2015

	Hospital Name (NHSN ID)
ICUs and other wards	ALLEGHENY GENERAL HOSPITAL (10648) CHILDRENS HOSPITAL OF PHILADELPHIA (10306) CHILDRENS INSTITUTE OF PITTSBURGH, THE (12266) CORRY MEMORIAL HOSPITAL (12283) EINSTEIN MEDICAL CENTER MONTGOMERY (30210) GEISINGER MEDICAL CENTER (11775) LEHIGH VALLEY HOSPITAL (11884) ST. JOSEPHS HOSPITAL (12438)
Specialty care areas	GEISINGER MEDICAL CENTER (11775) HOSPITAL OF THE UNIVERSITY OF PENNSYLVANIA (10219)
Long-term acute care wards	LIFECARE HOSPITALS OF PITTSBURGH - ALLE-KISKI CAMPUS (18955)
Neonatal Intensive Care Units	NONE

Table 4.4.7: Hospitals Omitted from CLABSI SIR Analysis Due to No Reported Central-Line Use — Pennsylvania, 2015

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)
HEALTHSOUTH READING REHABILITATION HOSPITAL (12139)
MEADOWS PSYCHIATRIC CENTER, THE (12156)
MONTGOMERY COUNTY MH/MR EMERGENCY SERVICES, INC. (12287)
WERNERSVILLE STATE HOSPITAL (12368)
KIDSPEACE ORCHARD HILLS CAMPUS (12430)
SOUTHWOOD PSYCHIATRIC HOSPITAL (12453)
CLARION PSYCHIATRIC CENTER (12454)
FRIENDS HOSPITAL (12488)
BELMONT CENTER FOR COMPREHENSIVE TREATMENT (12505)
SURGICAL INSTITUTE OF READING (12535)
HORSHAM CLINIC (12543)
ST. JOHN VIANNEY HOSPITAL (12548)
EDGEWOOD SURGICAL HOSPITAL (12552)
FAIRMOUNT BEHAVIORAL HEALTH SYSTEM (12565)
BROOKE GLEN BEHAVIORAL HOSPITAL (12623)
KIRKBRIDE CENTER (12624)
ROXBURY TREATMENT CENTER (12723)
DEVEREUX CHILDRENS BEHAVIORAL HEALTH INSTITUTE (12738)
FOUNDATIONS BEHAVIORAL HEALTH (12832)
PENNSYLVANIA PSYCHIATRIC INSTITUTE (14190)
HAVEN BEHAVIORAL HOSPITAL OF EASTERN PENNSYLVANIA (14471)
ROTHMAN ORTHOPAEDIC SPECIALTY HOSPITAL (15202)
ADVANCED SURGICAL HOSPITAL (16317)
PHYSICIANS CARE SURGICAL HOSPITAL (19630)
WILLS EYE HOSPITAL (34846)
HAVEN BEHAVIORAL HOSPITAL OF PHILADELPHIA (37622)

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, 2010–2015

	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)							
2015	13,593	127,065	0.11	7	11.21	0.62	(0.25 – 1.29)
2014	13,319	111,800	0.12	14	9.34	1.50	(0.82 – 2.52)
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)							
2015	15,762	99,384	0.16	21	14.47	1.45	(0.90 – 2.22)
2014	14,520	95,712	0.15	19	9.99	1.90	(1.14 – 2.97)
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)
ALLEGHENY GENERAL HOSPITAL (10648)							
2015	43,264	126,604	0.34	66	48.93	1.35	(1.04 – 1.72)
2014	43,434	126,164	0.34	44	28.07	1.57	(1.14 – 2.10)
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)							
2015	3,035	32,117	0.09	3	2.42	1.24	(0.25 – 3.62)
2014	3,404	29,738	0.11	4	1.94	2.06	(0.55 – 5.27)
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	4,873	50,338	0.10	1	3.54	0.28	(0.00 – 1.57)
ALLIED SERVICES INSTITUTE OF REHABILITATION (12591)							
2015	383	18,945	0.02	0	0.17	0.00	(0.00 – 21.25)
2014	520	20,722	0.03	0	0.33	0.00	(0.00 – 10.99)
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)
ARIA HEALTH (11388)							
2015	14,011	116,707	0.12	13	11.92	1.09	(0.58 – 1.86)
2014	14,705	103,349	0.14	11	10.17	1.08	(0.54 – 1.94)
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)							
2015	3,670	26,342	0.14	0	2.80	0.00	(0.00 – 1.31)
2014	4,174	27,297	0.15	0	2.33	0.00	(0.00 – 1.57)
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 CLABSI by Facility – Continued from previous page

			Central Line			Standardized	
	Central Line	Patient	Utilization	Number of	Number of	Infection	95% Confidence
	Days	Days	Rate	Observed	Predicted	Ratio	Interval
			(DUR)	Infections	Infections	(SIR)	
BARNES-KASSON COUNTY HOSPITAL (12404)							
2015	8	3,986	0.00	0	0.00	0.00	(0.00 – 1,907.47)
2014	5	4,670	0.00	0	0.00	0.00	(0.00 – 897.17)
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)							
2015	176	9,208	0.02	0	0.08	0.00	(0.00 – 46.96)
2014	287	8,825	0.03	0	0.18	0.00	(0.00 – 20.31)
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)							
2015	345	9,861	0.03	0	0.18	0.00	(0.00 – 20.32)
2014	349	10,773	0.03	0	0.22	0.00	(0.00 – 16.70)
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)							
2015	2,669	34,580	0.08	1	1.73	0.58	(0.01 – 3.21)
2014	2,886	35,609	0.08	3	1.69	1.77	(0.36 – 5.18)
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)
BUCKTAIL MEDICAL CENTER (12461)							
2015	185	1,110	0.17	1	0.15	6.76	(0.09 – 37.59)
2014	203	979	0.21	0	0.11	0.00	(0.00 – 33.11)
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)							
2015	6,018	63,680	0.09	5	4.13	1.21	(0.39 – 2.83)
2014	5,666	62,042	0.09	3	3.29	0.91	(0.18 – 2.66)
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 HOSPITAL (11586)							
2015	1,641	13,866	0.12	1	1.20	0.84	(0.01 – 4.65)
2014	1,440	14,210	0.10	0	0.83	0.00	(0.00 – 4.42)
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)							
2015	1,793	16,423	0.11	1	1.28	0.78	(0.01 – 4.35)
2014	2,076	16,385	0.13	0	1.18	0.00	(0.00 – 3.12)
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)

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

	Central Line Utilization Rate (DUR)	Patient Days	Central Line Days	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
CHAMBERSBURG HOSPITAL (11913)							
2015	0.10	58,181	5,912	9	4.13	2.18	(0.99 – 4.13)
2014	0.11	56,806	6,344	5	3.63	1.38	(0.44 – 3.21)
2013	0.12	58,513	6,918	9	4.65	1.93	(0.88 – 3.67)
2012	0.12	54,266	6,519	4	4.52	0.88	(0.24 – 2.27)
2011	0.12	56,846	7,045	5	4.09	1.22	(0.39 – 2.85)
2010	0.12	52,912	6,539	2	4.60	0.43	(0.05 – 1.57)
CHARLES COLE MEMORIAL HOSPITAL (11956)							
2015	0.04	10,032	402	0	0.22	0.00	(0.00 – 16.81)
2014	0.06	10,668	661	0	0.40	0.00	(0.00 – 9.27)
2013	0.05	11,574	578	0	0.39	0.00	(0.00 – 9.42)
2012	0.06	10,297	583	0	0.36	0.00	(0.00 – 10.20)
2011	0.06	9,233	592	1	0.39	2.58	(0.03 – 14.35)
2010	0.06	9,535	605	1	0.46	2.15	(0.03 – 11.97)
CHESTER COUNTY HOSPITAL (12016)							
2015	0.13	56,544	7,174	3	5.33	0.56	(0.11 – 1.64)
2014	0.15	52,898	8,059	5	4.50	1.11	(0.36 – 2.59)
2013	0.17	53,715	8,910	6	5.99	1.00	(0.37 – 2.18)
2012	0.18	55,568	9,944	9	7.34	1.23	(0.56 – 2.33)
2011	0.18	57,018	10,105	6	8.81	0.68	(0.25 – 1.48)
2010	0.17	54,838	9,490	3	7.88	0.38	(0.08 – 1.11)
CHESTNUT HILL HOSPITAL (12304)							
2015	0.11	40,079	4,567	1	3.83	0.26	(0.00 – 1.45)
2014	0.12	29,926	3,562	1	2.50	0.40	(0.01 – 2.23)
2013	0.14	27,547	3,875	3	3.13	0.96	(0.19 – 2.80)
2012	0.14	26,818	3,844	3	2.74	1.09	(0.22 – 3.20)
2011	0.14	27,803	3,947	1	2.24	0.45	(0.01 – 2.49)
2010	0.14	27,053	3,835	1	3.27	0.31	(0.00 – 1.70)
CHILDRENS HOME OF PITTSBURGH, THE (12336)							
2015	0.12	7,057	866	1	0.64	1.57	(0.02 – 8.73)
2014	0.11	4,856	527	1	0.30	3.31	(0.04 – 18.41)
2013	0.17	2,071	347	2	0.23	8.58	(0.96 – 30.96)
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	0.21	1,172	244	2	0.16	12.49	(1.40 – 45.08)
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)							
2015	0.23	113,465	26,080	51	26.48	1.93	(1.43 – 2.53)
2014	0.25	107,883	26,648	35	17.67	1.98	(1.38 – 2.76)
2013	0.25	112,255	27,574	34	22.27	1.53	(1.06 – 2.13)
2012	0.22	111,334	24,577	35	20.42	1.71	(1.19 – 2.38)
2011	0.20	110,317	21,675	31	18.55	1.67	(1.14 – 2.37)
2010	0.20	99,632	20,376	48	16.55	2.90	(2.14 – 3.84)
CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)							
2015	0.39	58,470	22,720	22	26.61	0.83	(0.52 – 1.25)
2014	0.35	68,856	23,961	12	15.47	0.78	(0.40 – 1.35)
2013	0.35	63,703	22,162	38	17.89	2.12	(1.50 – 2.92)
2012	0.34	61,717	21,255	26	18.93	1.37	(0.90 – 2.01)
2011	0.37	61,579	22,774	35	17.36	2.02	(1.40 – 2.80)
2010	0.39	57,325	22,313	33	16.65	1.98	(1.36 – 2.78)
CHILDRENS INSTITUTE OF PITTSBURGH, THE (12266)							
2015	0.04	7,485	326	2	0.18	11.05	(1.24 – 39.89)
2014	0.06	7,606	429	0	0.26	0.00	(0.00 – 14.18)
2013	0.05	10,332	481	0	0.32	0.00	(0.00 – 11.32)
2012	0.03	11,368	296	2	0.16	12.37	(1.39 – 44.66)
2011	0.13	7,631	954	1	0.55	1.81	(0.02 – 10.06)
2010	0.12	9,990	1,177	6	0.83	7.20	(2.63 – 15.68)

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

	Central Line Utilization Rate (DUR)	Patient Days	Central Line Days	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
CLARION HOSPITAL (11654)							
2015	0.13	9,819	1,240	0	1.07	0.00	(0.00 – 3.43)
2014	0.14	9,556	1,383	0	0.96	0.00	(0.00 – 3.84)
2013	0.14	10,020	1,425	0	1.15	0.00	(0.00 – 3.18)
2012	0.11	10,706	1,157	1	0.86	1.16	(0.02 – 6.47)
2011	0.16	10,903	1,792	0	1.58	0.00	(0.00 – 2.31)
2010	0.11	11,420	1,255	0	1.11	0.00	(0.00 – 3.31)
CONEMAUGH MEMORIAL MEDICAL CENTER (10280)							
2015	0.14	107,339	14,702	5	12.97	0.39	(0.12 – 0.90)
2014	0.13	108,472	14,079	1	9.81	0.10	(0.00 – 0.57)
2013	0.12	112,371	13,309	10	10.76	0.93	(0.44 – 1.71)
2012	0.13	116,423	15,230	12	11.66	1.03	(0.53 – 1.80)
2011	0.14	118,549	17,082	18	15.48	1.16	(0.69 – 1.84)
2010	0.15	129,768	19,275	16	16.33	0.98	(0.56 – 1.59)
CONEMAUGH MEYERSDALE MEDICAL CENTER (11968)							
2015	0.04	1,751	76	0	0.04	0.00	(0.00 – 87.00)
2014	0.07	1,992	146	0	0.09	0.00	(0.00 – 42.50)
2013	0.04	1,662	66	0	0.04	0.00	(0.00 – 82.48)
2012	0.01	1,877	13	0	0.01	0.00	(0.00 – 635.01)
2011	.	.	.	.	.	.	.
2010	0.01	1,735	24	0	0.02	0.00	(0.00 – 162.69)
CONEMAUGH MINERS MEDICAL CENTER (12295)							
2015	0.04	2,247	86	0	0.05	0.00	(0.00 – 79.56)
2014	0.04	2,640	98	0	0.06	0.00	(0.00 – 60.10)
2013	0.04	2,985	129	0	0.09	0.00	(0.00 – 42.21)
2012	0.03	3,839	102	0	0.06	0.00	(0.00 – 65.62)
2011	0.02	4,420	81	0	0.07	0.00	(0.00 – 54.94)
2010	0.04	4,521	172	0	0.14	0.00	(0.00 – 25.95)
COORDINATED HEALTH ORTHOPEDIC HOSPITAL LLC (11872)							
2015	0.04	2,888	107	0	0.06	0.00	(0.00 – 64.51)
2014	0.02	2,886	63	0	0.04	0.00	(0.00 – 89.75)
2013	0.04	3,112	124	0	0.08	0.00	(0.00 – 43.90)
2012	0.02	3,085	66	0	0.03	0.00	(0.00 – 104.90)
2011	0.04	3,107	131	0	0.09	0.00	(0.00 – 39.58)
2010	0.05	2,994	157	0	0.12	0.00	(0.00 – 29.66)
CORY MEMORIAL HOSPITAL (12283)							
2015	0.01	2,737	14	1	0.00	230.37	(3.01 –1,281.77)
2014	0.01	2,572	13	0	0.01	0.00	(0.00 – 388.73)
2013	.	.	.	.	.	.	.
2012	0.01	3,598	39	0	0.02	0.00	(0.00 – 197.38)
2011	0.00	5,107	9	0	0.01	0.00	(0.00 – 321.85)
2010	0.00	5,177	8	0	0.01	0.00	(0.00 – 365.33)
CRICHTON REHABILITATION CENTER (12273)							
2015	0.05	8,983	448	0	0.26	0.00	(0.00 – 14.21)
2014	0.07	9,690	681	0	0.40	0.00	(0.00 – 9.08)
2013	0.07	10,308	758	1	0.51	1.96	(0.03 – 10.91)
2012	0.04	9,732	412	0	0.24	0.00	(0.00 – 15.11)
2011	0.03	9,740	310	0	0.23	0.00	(0.00 – 15.88)
2010	0.03	9,026	237	0	0.25	0.00	(0.00 – 14.53)
CROZER CHESTER MEDICAL CENTER - SPRINGFIELD (11851)							
2015	0.05	3,685	185	0	0.12	0.00	(0.00 – 29.54)
2014	0.04	3,694	136	0	0.10	0.00	(0.00 – 35.15)
2013	0.08	4,142	352	0	0.28	0.00	(0.00 – 12.88)
2012	0.09	4,316	379	0	0.27	0.00	(0.00 – 13.45)
2011	0.08	5,467	416	0	0.42	0.00	(0.00 – 8.66)
2010	0.10	6,843	659	1	0.59	1.69	(0.02 – 9.41)

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

	Central Line	Patient	Central Line	Number of	Number of	Standardized	95% Confidence
	Days	Days	Utilization	Observed	Predicted	Infection	Interval
			Rate	Infections	Infections	Ratio	
			(DUR)			(SIR)	
CROZER CHESTER MEDICAL CENTER - TAYLOR (11932)							
2015	2,820	28,405	0.10	2	2.28	0.88	(0.10 – 3.17)
2014	2,994	25,842	0.12	6	2.10	2.85	(1.04 – 6.21)
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)
CROZER CHESTER MEDICAL CENTER (11839)							
2015	10,498	60,132	0.17	5	9.89	0.51	(0.16 – 1.18)
2014	10,430	64,867	0.16	7	7.15	0.98	(0.39 – 2.02)
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)
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)							
2015	5,939	34,873	0.17	2	5.56	0.36	(0.04 – 1.30)
2014	5,663	34,558	0.16	5	3.87	1.29	(0.42 – 3.01)
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)							
2015	9,406	47,334	0.20	4	7.89	0.51	(0.14 – 1.30)
2014	8,844	48,898	0.18	0	4.88	0.00	(0.00 – 0.75)
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)
EAGLEVILLE HOSPITAL (12965)							
2015	6	18,967	0.00	0	0.00	0.00	(0.00 – 4,204.51)
2014	13	19,617	0.00	0	0.01	0.00	(0.00 – 332.59)
2013	.	.	.	.	.	.	.
2012	61	17,781	0.00	0	0.02	0.00	(0.00 – 151.00)
2011	18	6,561	0.00	0	0.02	0.00	(0.00 – 174.53)
2010	.	.	.	.	.	.	.
EASTERN REGIONAL MEDICAL CENTER (12348)							
2015	1,261	1,869	0.67	1	1.48	0.68	(0.01 – 3.77)
2014	1,469	1,870	0.79	0	0.72	0.00	(0.00 – 5.07)
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)							
2015	5,599	32,954	0.17	2	5.24	0.38	(0.04 – 1.38)
2014	4,591	28,644	0.16	0	3.15	0.00	(0.00 – 1.17)
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)
EINSTEIN AT ELKINS PARK (12500)							
2015	1,002	8,640	0.12	1	0.84	1.18	(0.02 – 6.59)
2014	1,147	8,969	0.13	1	0.80	1.25	(0.02 – 6.96)
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)

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

	Central Line	Patient	Central Line	Number of	Number of	Standardized	95% Confidence
	Days	Days	Utilization	Observed	Predicted	Infection	Interval
			Rate	Infections	Infections	Ratio	
			(DUR)			(SIR)	
EINSTEIN MEDICAL CENTER MONTGOMERY (30210)							
2015	5,161	38,921	0.13	14	3.88	3.61	(1.97 – 6.05)
2014	5,491	37,344	0.15	4	3.08	1.30	(0.35 – 3.33)
2013	5,209	36,994	0.14	3	3.50	0.86	(0.17 – 2.50)
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
ELLWOOD CITY HOSPITAL (11779)							
2015	777	10,495	0.07	1	0.50	2.01	(0.03 – 11.16)
2014	845	10,327	0.08	1	0.50	2.02	(0.03 – 11.23)
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)							
2015	61	4,139	0.01	0	0.03	0.00	(0.00 – 145.42)
2014	89	3,860	0.02	0	0.06	0.00	(0.00 – 63.80)
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	84	3,421	0.02	0	0.07	0.00	(0.00 – 50.15)
EPHRATA COMMUNITY HOSPITAL (11764)							
2015	2,611	26,280	0.10	1	1.81	0.55	(0.01 – 3.07)
2014	2,523	24,474	0.10	0	1.45	0.00	(0.00 – 2.52)
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)							
2015	751	22,696	0.03	0	0.45	0.00	(0.00 – 8.15)
2014	789	22,122	0.04	0	0.61	0.00	(0.00 – 6.04)
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)							
2015	1,521	9,172	0.17	0	1.22	0.00	(0.00 – 3.02)
2014	1,775	10,832	0.16	0	0.99	0.00	(0.00 – 3.72)
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)							
2015	2,823	19,771	0.14	1	2.52	0.40	(0.01 – 2.21)
2014	2,684	19,656	0.14	1	1.86	0.54	(0.01 – 2.99)
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)							
2015	10,464	75,027	0.14	4	9.27	0.43	(0.12 – 1.10)
2014	11,354	75,458	0.15	7	7.82	0.90	(0.36 – 1.84)
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 CLABSI by Facility – Continued from previous page

	Central Line Utilization Rate (DUR)	Patient Days	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
FORBES HOSPITAL (11265)						
2015	10,680	75,148	0.14	14	9.51	1.47 (0.80 – 2.47)
2014	10,488	79,832	0.13	7	7.30	0.96 (0.38 – 1.98)
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	8,705	72,327	0.12	3	7.58	0.40 (0.08 – 1.16)
FULTON COUNTY MEDICAL CENTER (11939)						
2015	235	3,775	0.06	0	0.14	0.00 (0.00 – 25.51)
2014	328	3,761	0.09	0	0.19	0.00 (0.00 – 19.17)
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)						
2015	494	11,326	0.04	0	0.27	0.00 (0.00 – 13.37)
2014	541	11,122	0.05	1	0.33	3.03 (0.04 – 16.86)
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)						
2015	22,599	130,110	0.17	32	21.26	1.51 (1.03 – 2.12)
2014	21,756	126,012	0.17	21	14.82	1.42 (0.88 – 2.17)
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)						
2015	9,563	67,734	0.14	11	8.50	1.29 (0.64 – 2.31)
2014	10,559	70,902	0.15	5	7.28	0.69 (0.22 – 1.60)
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)						
2015	101	9,634	0.01	0	0.04	0.00 (0.00 – 96.36)
2014	100	9,313	0.01	0	0.07	0.00 (0.00 – 53.54)
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	393	13,619	0.03	2	0.30	6.71 (0.75 – 24.23)
2010	419	14,502	0.03	0	0.36	0.00 (0.00 – 10.27)
GEISINGER-COMMUNITY MEDICAL CENTER (11914)						
2015	7,539	56,828	0.13	10	6.59	1.52 (0.73 – 2.79)
2014	7,670	55,497	0.14	4	5.32	0.75 (0.20 – 1.93)
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	4,917	52,727	0.09	1	4.82	0.21 (0.00 – 1.15)
2010	4,613	51,169	0.09	1	4.18	0.24 (0.00 – 1.33)
GEISINGER-LEWISTOWN HOSPITAL (11825)						
2015	2,775	25,574	0.11	1	2.30	0.44 (0.01 – 2.42)
2014	3,027	24,948	0.12	1	2.12	0.47 (0.01 – 2.63)
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)

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

	Central Line Utilization Rate (DUR)	Patient Days	Central Line Days	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
GETTYSBURG HOSPITAL (11531)							
2015	0.07	20,587	1,475	1	0.94	1.07	(0.01 – 5.93)
2014	0.08	19,313	1,453	1	0.86	1.17	(0.02 – 6.49)
2013	0.07	19,474	1,435	1	0.97	1.04	(0.01 – 5.76)
2012	0.08	18,278	1,551	2	1.02	1.96	(0.22 – 7.09)
2011	0.09	18,089	1,576	0	0.98	0.00	(0.00 – 3.76)
2010	0.09	17,456	1,629	0	1.19	0.00	(0.00 – 3.08)
GNADEN HUETTEN MEMORIAL HOSPITAL (12241)							
2015	0.05	18,083	883	0	0.51	0.00	(0.00 – 7.25)
2014	0.05	18,770	893	2	0.55	3.67	(0.41 – 13.23)
2013	0.05	17,291	917	1	0.62	1.62	(0.02 – 9.01)
2012	0.05	18,176	835	2	0.50	4.01	(0.45 – 14.49)
2011	0.06	16,886	1,044	0	0.69	0.00	(0.00 – 5.33)
2010	0.07	16,243	1,167	1	0.88	1.13	(0.01 – 6.31)
GOOD SAMARITAN HOSPITAL, THE (11712)							
2015	0.12	38,229	4,580	2	3.35	0.60	(0.07 – 2.16)
2014	0.12	38,800	4,499	0	2.57	0.00	(0.00 – 1.43)
2013	0.13	38,759	4,880	4	3.28	1.22	(0.33 – 3.12)
2012	0.11	39,790	4,409	3	3.02	0.99	(0.20 – 2.90)
2011	0.13	42,849	5,370	4	3.11	1.29	(0.35 – 3.29)
2010	0.12	41,180	4,965	11	3.50	3.14	(1.57 – 5.62)
GOOD SHEPHERD REHABILITATION HOSPITAL, THE (11896)							
2015	0.04	27,650	970	2	0.51	3.94	(0.44 – 14.22)
2014	0.04	28,742	1,057	1	0.66	1.52	(0.02 – 8.45)
2013	0.04	28,995	1,070	1	0.72	1.39	(0.02 – 7.72)
2012	0.05	28,461	1,305	3	0.78	3.85	(0.77 – 11.26)
2011	0.06	29,920	1,659	4	1.12	3.58	(0.96 – 9.17)
2010	0.07	24,553	1,643	1	1.25	0.80	(0.01 – 4.44)
GRAND VIEW HOSPITAL (11847)							
2015	0.17	40,164	6,773	6	5.44	1.10	(0.40 – 2.40)
2014	0.18	40,456	7,084	0	3.92	0.00	(0.00 – 0.94)
2013	0.19	41,380	7,932	5	5.33	0.94	(0.30 – 2.19)
2012	0.18	40,826	7,517	4	5.57	0.72	(0.19 – 1.84)
2011	0.20	42,899	8,690	2	4.61	0.43	(0.05 – 1.57)
2010	0.19	41,631	7,968	2	5.29	0.38	(0.04 – 1.37)
GROVE CITY MEDICAL CENTER (11722)							
2015	0.07	7,373	515	0	0.33	0.00	(0.00 – 11.28)
2014	0.08	7,752	600	0	0.35	0.00	(0.00 – 10.39)
2013	0.06	7,717	487	0	0.33	0.00	(0.00 – 11.19)
2012	0.05	8,181	437	0	0.27	0.00	(0.00 – 13.74)
2011	0.06	7,906	513	0	0.34	0.00	(0.00 – 10.94)
2010	0.07	7,396	531	1	0.40	2.49	(0.03 – 13.87)
GUTHRIE TOWANDA MEMORIAL HOSPITAL (12549)							
2015	0.05	4,854	240	0	0.14	0.00	(0.00 – 26.59)
2014	0.04	4,790	192	0	0.12	0.00	(0.00 – 30.86)
2013	0.04	4,867	172	0	0.12	0.00	(0.00 – 31.64)
2012	0.05	6,544	314	0	0.19	0.00	(0.00 – 19.44)
2011	0.03	4,432	140	0	0.10	0.00	(0.00 – 35.12)
2010	0.06	4,659	285	0	0.22	0.00	(0.00 – 16.67)
HAHNEMANN UNIVERSITY HOSPITAL (11437)							
2015	0.19	87,581	16,774	17	16.21	1.05	(0.61 – 1.68)
2014	0.17	91,756	15,432	4	10.54	0.38	(0.10 – 0.97)
2013	0.19	92,913	17,253	6	13.94	0.43	(0.16 – 0.94)
2012	0.19	95,805	18,334	9	14.90	0.60	(0.28 – 1.15)
2011	0.19	106,200	19,702	20	17.04	1.17	(0.72 – 1.81)
2010	0.20	104,749	20,674	25	16.87	1.48	(0.96 – 2.19)

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

	Central Line Utilization Rate (DUR)	Patient Days	Central Line Days	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
HANOVER HOSPITAL (11899)							
2015	0.07	28,647	1,994	3	1.26	2.38	(0.48 – 6.97)
2014	0.07	26,431	1,918	0	1.13	0.00	(0.00 – 3.23)
2013	0.10	26,879	2,641	2	1.78	1.13	(0.13 – 4.06)
2012	0.11	24,815	2,669	3	1.82	1.65	(0.33 – 4.82)
2011	0.13	25,152	3,182	0	1.84	0.00	(0.00 – 1.99)
2010	0.14	26,527	3,646	4	2.53	1.58	(0.43 – 4.05)
HEALTHSOUTH HARMARVILLE REHABILITATION HOSPITAL (11727)							
2015	0.10	25,849	2,511	1	1.73	0.58	(0.01 – 3.21)
2014	0.08	29,465	2,273	4	1.34	2.99	(0.80 – 7.65)
2013	0.06	33,138	1,926	2	1.30	1.54	(0.17 – 5.57)
2012	0.08	34,709	2,777	1	1.81	0.55	(0.01 – 3.08)
2011	0.08	31,608	2,630	0	1.64	0.00	(0.00 – 2.23)
2010	0.07	30,991	2,227	0	1.68	0.00	(0.00 – 2.18)
HEALTHSOUTH NITTANY VALLEY REHABILITATION HOSPITAL (11667)							
2015	0.05	16,450	881	0	0.52	0.00	(0.00 – 7.09)
2014	0.05	15,946	800	1	0.49	2.05	(0.03 – 11.43)
2013	0.05	15,733	830	0	0.56	0.00	(0.00 – 6.56)
2012	0.05	13,305	633	0	0.38	0.00	(0.00 – 9.66)
2011	0.04	11,594	458	0	0.33	0.00	(0.00 – 11.19)
2010	0.04	12,452	451	0	0.37	0.00	(0.00 – 9.83)
HEALTHSOUTH REHABILITATION HOSPITAL OF ALTOONA (11903)							
2015	0.06	25,488	1,533	0	0.93	0.00	(0.00 – 3.95)
2014	0.06	25,435	1,631	0	0.97	0.00	(0.00 – 3.77)
2013	0.04	25,915	1,052	0	0.71	0.00	(0.00 – 5.18)
2012	0.05	25,280	1,334	0	0.81	0.00	(0.00 – 4.51)
2011	0.05	23,971	1,141	0	0.79	0.00	(0.00 – 4.65)
2010	0.04	22,173	855	0	0.70	0.00	(0.00 – 5.23)
HEALTHSOUTH REHABILITATION HOSPITAL OF ERIE (11810)							
2015	0.06	15,683	935	1	0.57	1.77	(0.02 – 9.84)
2014	0.04	17,077	745	0	0.46	0.00	(0.00 – 8.00)
2013	0.06	21,661	1,248	0	0.84	0.00	(0.00 – 4.36)
2012	0.06	22,729	1,350	1	0.84	1.19	(0.02 – 6.63)
2011	0.06	25,219	1,598	1	1.05	0.95	(0.01 – 5.30)
2010	0.05	26,319	1,375	1	1.08	0.92	(0.01 – 5.13)
HEALTHSOUTH REHABILITATION HOSPITAL OF MECHANICSBURG (12402)							
2015	0.07	16,172	1,098	1	0.69	1.45	(0.02 – 8.09)
2014	0.08	18,129	1,469	0	0.86	0.00	(0.00 – 4.26)
2013	0.07	18,703	1,401	2	0.94	2.12	(0.24 – 7.66)
2012	0.11	18,430	1,984	1	1.35	0.74	(0.01 – 4.11)
2011	0.13	16,976	2,176	0	1.26	0.00	(0.00 – 2.92)
2010	0.12	17,596	2,175	1	1.53	0.65	(0.01 – 3.64)
HEALTHSOUTH REHABILITATION HOSPITAL OF SEWICKLEY (12066)							
2015	0.07	12,988	962	1	0.62	1.62	(0.02 – 9.01)
2014	0.07	13,177	929	0	0.55	0.00	(0.00 – 6.66)
2013	0.05	12,829	693	0	0.47	0.00	(0.00 – 7.86)
2012	0.07	12,014	868	0	0.56	0.00	(0.00 – 6.60)
2011	0.08	11,046	841	0	0.53	0.00	(0.00 – 6.87)
2010	0.05	9,586	526	0	0.41	0.00	(0.00 – 8.91)
HEALTHSOUTH REHABILITATION HOSPITAL OF YORK (12058)							
2015	0.07	22,140	1,516	0	0.95	0.00	(0.00 – 3.85)
2014	0.08	20,604	1,735	1	1.01	0.99	(0.01 – 5.48)
2013	0.06	18,833	1,205	2	0.81	2.47	(0.28 – 8.90)
2012	0.05	19,635	1,077	1	0.66	1.51	(0.02 – 8.42)
2011	0.04	20,041	749	0	0.54	0.00	(0.00 – 6.77)
2010	0.04	19,468	699	0	0.58	0.00	(0.00 – 6.34)

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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
HEART OF LANCASTER REGIONAL MEDICAL CENTER (12571)							
2015	688	9,048	0.08	1	0.52	1.93	(0.03 – 10.76)
2014	792	7,057	0.11	1	0.56	1.79	(0.02 – 9.97)
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)
HELEN M. SIMPSON REHABILITATION HOSPITAL (40371)							
2015	784	9,174	0.09	0	0.52	0.00	(0.00 – 7.01)
2014	.	.	.	.	.	.	.
2013	.	.	.	.	.	.	.
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
HERITAGE VALLEY BEAVER (11831)							
2015	5,475	64,680	0.08	4	4.24	0.94	(0.25 – 2.42)
2014	6,537	77,485	0.08	7	4.71	1.49	(0.60 – 3.06)
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)							
2015	4,347	38,731	0.11	2	3.12	0.64	(0.07 – 2.31)
2014	3,702	41,063	0.09	2	2.15	0.93	(0.10 – 3.35)
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)							
2015	224	11,591	0.02	0	0.10	0.00	(0.00 – 36.79)
2014	236	11,762	0.02	0	0.15	0.00	(0.00 – 23.80)
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 (11973)							
2015	5,934	48,547	0.12	4	4.36	0.92	(0.25 – 2.35)
2014	5,655	51,668	0.11	2	3.24	0.62	(0.07 – 2.23)
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)							
2015	6,457	54,189	0.12	6	4.71	1.27	(0.46 – 2.77)
2014	7,709	60,203	0.13	5	4.37	1.15	(0.37 – 2.67)
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)

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

	Central Line	Patient	Central Line	Number of	Number of	Standardized	95% Confidence
	Days	Days	Utilization	Observed	Predicted	Infection	Interval
			Rate	Infections	Infections	Ratio	
			(DUR)			(SIR)	
HOSPITAL OF FOX CHASE CANCER CENTER (12134)							
2015	849	1,753	0.48	2	1.06	1.89	(0.21 – 6.84)
2014	1,151	1,906	0.60	1	0.71	1.40	(0.02 – 7.81)
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 UNIVERSITY OF PENNSYLVANIA (10219)							
2015	50,547	202,626	0.25	48	52.48	0.91	(0.67 – 1.21)
2014	78,071	244,708	0.32	45	50.75	0.89	(0.65 – 1.19)
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)
INDIANA REGIONAL MEDICAL CENTER (11759)							
2015	2,169	37,152	0.06	3	1.30	2.30	(0.46 – 6.72)
2014	2,329	39,217	0.06	0	1.40	0.00	(0.00 – 2.62)
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 HOSPITAL (11724)							
2015	589	9,741	0.06	0	0.36	0.00	(0.00 – 10.26)
2014	546	9,027	0.06	0	0.33	0.00	(0.00 – 11.20)
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)							
2015	3,522	30,376	0.12	1	2.55	0.39	(0.01 – 2.18)
2014	3,734	35,508	0.11	2	2.15	0.93	(0.10 – 3.36)
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)							
2015	6,634	33,796	0.20	3	5.55	0.54	(0.11 – 1.58)
2014	6,121	33,971	0.18	4	3.38	1.18	(0.32 – 3.03)
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 HOSPITAL (10237)							
2015	6,734	64,841	0.10	4	4.74	0.84	(0.23 – 2.16)
2014	7,785	67,428	0.12	1	4.44	0.23	(0.00 – 1.25)
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)							
2015	808	10,789	0.07	1	0.52	1.92	(0.03 – 10.70)
2014	813	12,022	0.07	0	0.48	0.00	(0.00 – 7.59)
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)

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

	Central Line Utilization Rate (DUR)	Patient Days	Central Line Days	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
JERSEY SHORE HOSPITAL (11689)							
2015	0.06	4,497	279	0	0.17	0.00	(0.00 – 21.50)
2014	0.04	4,414	155	0	0.10	0.00	(0.00 – 37.83)
2013	0.05	4,129	206	0	0.14	0.00	(0.00 – 26.44)
2012	0.06	4,497	263	0	0.16	0.00	(0.00 – 22.50)
2011	0.09	5,197	443	0	0.28	0.00	(0.00 – 13.32)
2010	0.04	4,527	188	0	0.15	0.00	(0.00 – 24.02)
JOHN HEINZ INSTITUTE OF REHABILITATION (11861)							
2015	0.02	17,681	374	0	0.17	0.00	(0.00 – 21.50)
2014	0.02	18,600	413	0	0.27	0.00	(0.00 – 13.71)
2013	0.02	19,943	322	0	0.22	0.00	(0.00 – 16.88)
2012	0.02	20,244	471	0	0.25	0.00	(0.00 – 14.51)
2011	0.02	21,076	399	0	0.33	0.00	(0.00 – 11.22)
2010	0.02	20,170	451	0	0.40	0.00	(0.00 – 9.22)
KANE COMMUNITY HOSPITAL (12111)							
2015	0.03	3,522	91	0	0.04	0.00	(0.00 – 83.67)
2014	0.04	3,806	152	0	0.09	0.00	(0.00 – 38.96)
2013	0.03	4,230	147	0	0.10	0.00	(0.00 – 37.02)
2012	0.07	4,769	311	2	0.20	10.20	(1.15 – 36.83)
2011	0.06	5,398	298	0	0.20	0.00	(0.00 – 18.28)
2010	0.03	4,608	158	0	0.13	0.00	(0.00 – 27.86)
KENSINGTON HOSPITAL (12609)							
2015	0.68	2,625	1,790	1	2.10	0.48	(0.01 – 2.65)
2014	0.63	2,536	1,596	1	0.80	1.25	(0.02 – 6.96)
2013	0.57	2,421	1,385	0	0.93	0.00	(0.00 – 3.95)
2012	0.71	2,885	2,042	0	1.87	0.00	(0.00 – 1.96)
2011	0.54	2,751	1,478	1	0.66	1.52	(0.02 – 8.48)
2010	0.61	2,732	1,667	1	0.95	1.05	(0.01 – 5.86)
LANCASTER GENERAL HOSPITAL (10183)							
2015	0.12	143,955	16,927	17	12.32	1.38	(0.80 – 2.21)
2014	0.12	143,974	17,369	18	9.88	1.82	(1.08 – 2.88)
2013	0.12	137,114	16,058	10	10.80	0.93	(0.44 – 1.70)
2012	0.13	146,705	18,634	8	13.03	0.61	(0.26 – 1.21)
2011	0.15	154,617	22,739	8	12.79	0.63	(0.27 – 1.23)
2010	0.15	145,807	21,983	5	15.06	0.33	(0.11 – 0.77)
LANCASTER REGIONAL MEDICAL CENTER (12335)							
2015	0.09	25,430	2,408	1	1.65	0.61	(0.01 – 3.37)
2014	0.12	25,054	2,893	2	1.65	1.21	(0.14 – 4.37)
2013	0.11	26,814	2,923	1	1.97	0.51	(0.01 – 2.83)
2012	0.11	28,382	3,048	2	2.08	0.96	(0.11 – 3.48)
2011	0.11	28,792	3,247	8	1.92	4.17	(1.80 – 8.22)
2010	0.10	28,064	2,890	3	2.08	1.44	(0.29 – 4.21)
LANCASTER REHABILITATION HOSPITAL (12628)							
2015	0.04	19,834	699	0	0.37	0.00	(0.00 – 10.01)
2014	0.04	19,167	767	0	0.47	0.00	(0.00 – 7.72)
2013	0.03	18,797	627	0	0.42	0.00	(0.00 – 8.68)
2012	0.04	18,153	788	0	0.47	0.00	(0.00 – 7.87)
2011	0.03	17,607	554	0	0.41	0.00	(0.00 – 8.87)
2010	0.05	17,398	834	0	0.66	0.00	(0.00 – 5.52)
LANSDALE HOSPITAL (12032)							
2015	0.07	22,411	1,639	0	1.05	0.00	(0.00 – 3.50)
2014	0.09	20,017	1,789	2	1.04	1.92	(0.22 – 6.93)
2013	0.09	19,657	1,775	1	1.19	0.84	(0.01 – 4.66)
2012	0.11	20,308	2,261	1	1.55	0.65	(0.01 – 3.59)
2011	0.11	21,292	2,360	3	1.40	2.15	(0.43 – 6.27)
2010	0.12	21,572	2,525	2	1.79	1.12	(0.13 – 4.04)

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

	Central Line Utilization Rate (DUR)	Patient Days	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
LEHIGH VALLEY HOSPITAL - HAZLETON (11878)						
2015	0.11	32,943	6	2.48	2.42	(0.88 – 5.27)
2014	0.12	31,188	4	2.17	1.85	(0.50 – 4.73)
2013	0.13	33,088	5	2.80	1.79	(0.58 – 4.17)
2012	0.09	32,401	6	1.99	3.02	(1.10 – 6.57)
2011	0.08	33,295	3	1.63	1.84	(0.37 – 5.38)
2010	0.07	34,045	4	1.85	2.17	(0.58 – 5.55)
LEHIGH VALLEY HOSPITAL - MUHLENBERG (11898)						
2015	0.17	41,817	5	6.64	0.75	(0.24 – 1.76)
2014	0.16	45,559	6	5.09	1.18	(0.43 – 2.57)
2013	0.17	49,802	13	7.04	1.85	(0.98 – 3.16)
2012	0.19	49,028	8	7.34	1.09	(0.47 – 2.15)
2011	0.21	50,937	0	8.98	0.00	(0.00 – 0.41)
2010	0.21	50,646	3	8.63	0.35	(0.07 – 1.02)
LEHIGH VALLEY HOSPITAL (11884)						
2015	0.17	199,202	64	32.76	1.95	(1.50 – 2.49)
2014	0.19	206,975	55	26.26	2.09	(1.58 – 2.73)
2013	0.20	198,067	74	31.29	2.36	(1.86 – 2.97)
2012	0.21	212,056	77	36.86	2.09	(1.65 – 2.61)
2011	0.21	212,148	37	37.32	0.99	(0.70 – 1.37)
2010	0.21	202,185	18	34.73	0.52	(0.31 – 0.82)
LOCK HAVEN HOSPITAL (12097)						
2015	0.03	4,419	0	0.06	0.00	(0.00 – 60.66)
2014	0.06	3,611	1	0.12	8.17	(0.11 – 45.43)
2013	0.02	4,229	1	0.06	16.66	(0.22 – 92.68)
2012	0.04	4,456	1	0.11	8.98	(0.12 – 49.94)
2011	0.04	4,158	0	0.13	0.00	(0.00 – 28.68)
2010	0.04	4,819	0	0.16	0.00	(0.00 – 22.77)
LOWER BUCKS HOSPITAL (12390)						
2015	0.07	33,107	1	1.51	0.66	(0.01 – 3.68)
2014	0.08	21,237	2	1.04	1.93	(0.22 – 6.96)
2013	0.08	22,009	4	1.16	3.45	(0.93 – 8.84)
2012	0.07	29,147	4	1.28	3.13	(0.84 – 8.00)
2011	0.07	30,245	1	1.36	0.73	(0.01 – 4.08)
2010	0.07	34,713	3	1.92	1.57	(0.31 – 4.58)
MAGEE REHABILITATION HOSPITAL (12146)						
2015	0.05	26,862	1	0.86	1.16	(0.02 – 6.47)
2014	0.06	25,440	0	0.97	0.00	(0.00 – 3.80)
2013	0.06	29,844	0	1.21	0.00	(0.00 – 3.02)
2012	0.07	26,781	1	1.11	0.90	(0.01 – 5.01)
2011	0.09	28,612	0	1.59	0.00	(0.00 – 2.30)
2010	0.07	28,308	0	1.91	0.00	(0.00 – 1.92)
MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)						
2015	0.10	62,941	5	5.24	0.95	(0.31 – 2.23)
2014	0.09	75,587	1	4.88	0.20	(0.00 – 1.14)
2013	0.13	64,210	9	6.70	1.34	(0.61 – 2.55)
2012	0.13	60,856	9	6.25	1.44	(0.66 – 2.73)
2011	0.14	56,186	5	7.08	0.71	(0.23 – 1.65)
2010	0.12	57,225	8	6.15	1.30	(0.56 – 2.56)
MAIN LINE HOSPITAL - PAOLI (11750)						
2015	0.11	55,203	5	4.55	1.10	(0.35 – 2.56)
2014	0.11	54,574	5	3.41	1.47	(0.47 – 3.43)
2013	0.11	54,045	4	4.18	0.96	(0.26 – 2.45)
2012	0.11	55,386	10	4.35	2.30	(1.10 – 4.23)
2011	0.11	58,816	3	3.77	0.80	(0.16 – 2.32)
2010	0.12	55,763	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)							
2015	8,976	59,296	0.15	7	8.13	0.86	(0.34 – 1.77)
2014	9,830	62,332	0.16	6	6.75	0.89	(0.32 – 1.94)
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)							
2015	1,486	36,267	0.04	1	0.81	1.23	(0.02 – 6.86)
2014	1,203	36,576	0.03	0	0.76	0.00	(0.00 – 4.85)
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)							
2015	18,493	84,385	0.22	15	18.54	0.81	(0.45 – 1.33)
2014	15,500	76,756	0.20	6	10.44	0.57	(0.21 – 1.25)
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	15,007	85,093	0.18	14	12.43	1.13	(0.62 – 1.89)
MEADVILLE MEDICAL CENTER (11583)							
2015	2,584	35,993	0.07	3	1.91	1.57	(0.32 – 4.59)
2014	2,436	36,576	0.07	3	1.79	1.68	(0.34 – 4.91)
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)							
2015	1,480	17,996	0.08	0	1.14	0.00	(0.00 – 3.23)
2014	1,447	18,203	0.08	3	1.05	2.87	(0.58 – 8.38)
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	2,701	23,341	0.12	3	2.55	1.18	(0.24 – 3.44)
2010	2,345	22,073	0.11	4	2.08	1.93	(0.52 – 4.93)
MERCY FITZGERALD HOSPITAL (11683)							
2015	4,303	39,648	0.11	7	3.56	1.97	(0.79 – 4.05)
2014	5,186	40,953	0.13	9	3.62	2.49	(1.13 – 4.72)
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)							
2015	4,576	40,099	0.11	2	3.84	0.52	(0.06 – 1.88)
2014	3,433	37,345	0.09	2	2.46	0.81	(0.09 – 2.94)
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 (11952)							
2015	3,902	16,957	0.23	2	3.96	0.50	(0.06 – 1.82)
2014	4,006	20,009	0.20	1	2.70	0.37	(0.00 – 2.06)
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			Standardized	
	Central Line	Patient	Utilization	Number of	Number of	Infection	95% Confidence
	Days	Days	Rate	Observed	Predicted	Ratio	Interval
			(DUR)	Infections	Infections	(SIR)	
MILLCREEK COMMUNITY HOSPITAL (12253)							
2015	916	27,966	0.03	0	0.55	0.00	(0.00 – 6.70)
2014	929	28,656	0.03	1	0.72	1.39	(0.02 – 7.73)
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)							
2015	39,507	150,731	0.26	43	41.57	1.03	(0.75 – 1.39)
2014	38,533	125,593	0.31	20	25.12	0.80	(0.49 – 1.23)
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)
MONONGAHELA VALLEY HOSPITAL (11069)							
2015	5,677	49,387	0.11	8	4.11	1.95	(0.84 – 3.84)
2014	5,077	48,793	0.10	4	2.92	1.37	(0.37 – 3.51)
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)							
2015	3,298	46,486	0.07	1	2.43	0.41	(0.01 – 2.29)
2014	3,423	44,614	0.08	2	2.48	0.81	(0.09 – 2.91)
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)
MOSS REHABILITATION (12508)							
2015	2,470	45,637	0.05	0	1.46	0.00	(0.00 – 2.52)
2014	1,990	44,198	0.05	2	1.22	1.64	(0.18 – 5.91)
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)
MOUNT NITTANY MEDICAL CENTER (11797)							
2015	7,059	61,159	0.12	5	5.94	0.84	(0.27 – 1.96)
2014	6,437	57,047	0.11	0	4.53	0.00	(0.00 – 0.81)
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)							
2015	412	4,241	0.10	0	0.28	0.00	(0.00 – 12.89)
2014	571	4,415	0.13	0	0.32	0.00	(0.00 – 11.35)
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)							
2015	117	6,824	0.02	0	0.05	0.00	(0.00 – 72.76)
2014	151	7,228	0.02	0	0.10	0.00	(0.00 – 37.32)
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)

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Table 4.4.8 – Critical Care Unit and Ward CLABSI 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
NAZARETH HOSPITAL (11919)							
2015	4,165	35,651	0.12	2	3.03	0.66	(0.07 – 2.39)
2014	4,871	40,226	0.12	11	2.77	3.97	(1.98 – 7.10)
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)
OHIO VALLEY GENERAL HOSPITAL (12298)							
2015	3,072	22,918	0.13	1	2.32	0.43	(0.01 – 2.40)
2014	2,306	21,491	0.11	1	1.32	0.76	(0.01 – 4.20)
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)							
2015	12	4,315	0.00	0	0.00	0.00	(0.00 – 1,163.66)
2014	10	4,145	0.00	0	0.01	0.00	(0.00 – 477.45)
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)							
2015	298	11,750	0.03	0	0.14	0.00	(0.00 – 25.68)
2014	290	12,240	0.02	0	0.19	0.00	(0.00 – 19.62)
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 HIGHLANDS BROOKVILLE (12418)							
2015	781	6,925	0.11	1	0.56	1.78	(0.02 – 9.90)
2014	299	4,874	0.06	0	0.18	0.00	(0.00 – 20.47)
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)
PENN HIGHLANDS CLEARFIELD (11843)							
2015	424	10,165	0.04	0	0.23	0.00	(0.00 – 15.76)
2014	468	11,297	0.04	0	0.29	0.00	(0.00 – 12.69)
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)
PENN HIGHLANDS DUBOIS (11606)							
2015	3,269	41,601	0.08	1	2.13	0.47	(0.01 – 2.61)
2014	3,611	40,935	0.09	0	2.10	0.00	(0.00 – 1.74)
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)
PENN HIGHLANDS ELK (11859)							
2015	298	8,972	0.03	0	0.15	0.00	(0.00 – 23.86)
2014	346	10,543	0.03	0	0.22	0.00	(0.00 – 16.86)
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)

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

	Central Line Utilization Rate (DUR)	Patient Days	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
PENN PRESBYTERIAN MEDICAL CENTER (11814)						
2015	14,536	78,297	0.19	21	13.93	1.51 (0.93 – 2.31)
2014	11,837	63,103	0.19	16	8.01	2.00 (1.14 – 3.24)
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)						
2015	1,527	17,458	0.09	0	1.03	0.00 (0.00 – 3.58)
2014	1,760	18,144	0.10	0	1.02	0.00 (0.00 – 3.60)
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 HOSPITAL OF THE UNIVERSITY OF PA HEALTH SYS (11448)						
2015	10,950	79,208	0.14	14	9.68	1.45 (0.79 – 2.43)
2014	13,868	85,079	0.16	16	9.49	1.69 (0.96 – 2.74)
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)						
2015	5,624	37,090	0.15	2	4.39	0.46 (0.05 – 1.65)
2014	5,426	35,174	0.15	1	3.03	0.33 (0.00 – 1.84)
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 - COMMUNITY GENERAL OSTEOPATHIC HOSPITAL (34069)						
2015	7,789	38,633	0.20	4	7.63	0.52 (0.14 – 1.34)
2014	8,585	48,295	0.18	2	5.84	0.34 (0.04 – 1.24)
2013	.	.	.	.	.	.
2012	.	.	.	.	.	.
2011	.	.	.	.	.	.
2010	.	.	.	.	.	.
PINNACLE HEALTH HOSPITALS - HARRISBURG HOSPITAL (34068)						
2015	17,932	84,279	0.21	6	17.83	0.34 (0.12 – 0.73)
2014	21,454	96,660	0.22	2	14.34	0.14 (0.02 – 0.50)
2013	.	.	.	.	.	.
2012	.	.	.	.	.	.
2011	.	.	.	.	.	.
2010	.	.	.	.	.	.
PINNACLE HEALTH HOSPITALS - WEST SHORE HOSPITAL (35123)						
2015	6,238	29,091	0.21	1	6.22	0.16 (0.00 – 0.90)
2014	.	.	.	.	.	.
2013	.	.	.	.	.	.
2012	.	.	.	.	.	.
2011	.	.	.	.	.	.
2010	.	.	.	.	.	.
POCONO MEDICAL CENTER (11772)						
2015	5,674	51,278	0.11	3	4.72	0.64 (0.13 – 1.86)
2014	3,990	47,169	0.08	4	2.33	1.71 (0.46 – 4.39)
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)

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

	Central Line Utilization Rate (DUR)	Patient Days	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
POTTSTOWN MEMORIAL MEDICAL CENTER (11983)						
2015	5,226	39,499	4	3.93	1.02	(0.27 – 2.61)
2014	4,339	38,922	4	2.48	1.61	(0.43 – 4.12)
2013	5,668	42,128	4	3.81	1.05	(0.28 – 2.69)
2012	4,752	42,914	3	3.25	0.92	(0.19 – 2.69)
2011	5,890	43,413	2	3.36	0.59	(0.07 – 2.15)
2010	5,683	43,283	1	3.97	0.25	(0.00 – 1.40)
PUNXSUTAWNEY AREA HOSPITAL (11830)						
2015	318	8,931	0	0.17	0.00	(0.00 – 21.94)
2014	359	8,655	0	0.22	0.00	(0.00 – 16.55)
2013	339	7,683	0	0.23	0.00	(0.00 – 16.06)
2012	439	7,111	1	0.27	3.64	(0.05 – 20.28)
2011	495	7,380	0	0.32	0.00	(0.00 – 11.40)
2010	445	7,440	0	0.34	0.00	(0.00 – 10.65)
READING HOSPITAL (12375)						
2015	21,589	147,229	11	19.40	0.57	(0.28 – 1.01)
2014	24,159	149,687	14	16.55	0.85	(0.46 – 1.42)
2013	25,436	154,968	14	20.56	0.68	(0.37 – 1.14)
2012	25,448	152,935	13	20.23	0.64	(0.34 – 1.10)
2011	25,747	145,790	15	22.47	0.67	(0.37 – 1.10)
2010	24,408	137,380	22	20.20	1.09	(0.68 – 1.65)
REGIONAL HOSPITAL OF SCRANTON (12533)						
2015	4,962	47,980	7	4.05	1.73	(0.69 – 3.56)
2014	5,180	46,820	2	3.65	0.55	(0.06 – 1.98)
2013	5,330	45,651	5	4.31	1.16	(0.37 – 2.71)
2012	5,598	49,636	2	4.19	0.48	(0.05 – 1.72)
2011	5,770	43,923	6	5.32	1.13	(0.41 – 2.46)
2010	6,015	44,463	5	5.16	0.97	(0.31 – 2.26)
RIDDLE MEMORIAL HOSPITAL (11731)						
2015	5,674	40,887	3	4.32	0.69	(0.14 – 2.03)
2014	6,371	42,659	6	3.57	1.68	(0.61 – 3.66)
2013	6,977	44,830	5	4.69	1.07	(0.34 – 2.49)
2012	7,505	47,311	6	5.44	1.10	(0.40 – 2.40)
2011	8,274	49,126	4	4.54	0.88	(0.24 – 2.26)
2010	8,478	49,708	5	5.71	0.87	(0.28 – 2.04)
ROBERT PACKER HOSPITAL (12422)						
2015	8,687	58,570	5	7.83	0.64	(0.21 – 1.49)
2014	7,983	57,975	4	5.54	0.72	(0.19 – 1.85)
2013	9,199	57,896	6	7.43	0.81	(0.29 – 1.76)
2012	9,832	60,870	10	7.78	1.29	(0.62 – 2.36)
2011	9,346	56,802	13	8.26	1.57	(0.84 – 2.69)
2010	7,662	54,475	5	6.54	0.76	(0.25 – 1.78)
ROXBOROUGH MEMORIAL HOSPITAL (11978)						
2015	1,494	22,296	0	1.08	0.00	(0.00 – 3.38)
2014	1,556	22,567	1	1.14	0.88	(0.01 – 4.89)
2013	1,701	23,849	1	1.38	0.73	(0.01 – 4.04)
2012	1,934	25,179	0	1.36	0.00	(0.00 – 2.69)
2011	2,477	29,113	10	2.47	4.05	(1.94 – 7.44)
2010	3,050	30,472	8	2.72	2.94	(1.26 – 5.79)
SACRED HEART HOSPITAL (11684)						
2015	1,698	29,358	1	1.18	0.84	(0.01 – 4.70)
2014	1,634	31,152	4	1.22	3.28	(0.88 – 8.39)
2013	1,982	30,229	0	1.60	0.00	(0.00 – 2.29)
2012	2,253	31,930	1	1.57	0.64	(0.01 – 3.55)
2011	2,286	33,195	3	1.48	2.03	(0.41 – 5.93)
2010	2,377	30,323	4	1.78	2.25	(0.61 – 5.77)

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

	Central Line	Patient	Central Line	Number of	Number of	Standardized	95% Confidence
	Days	Days	Utilization	Observed	Predicted	Infection	Interval
			Rate	Infections	Infections	Ratio	
			(DUR)			(SIR)	
SAINT VINCENT HOSPITAL (11699)							
2015	8,191	70,366	0.12	6	6.91	0.87	(0.32 – 1.89)
2014	8,881	73,871	0.12	5	6.22	0.80	(0.26 – 1.88)
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)
SCHUYLKILL MEDICAL CENTER - EAST NORWEGIAN STREET (11922)							
2015	1,540	22,631	0.07	0	0.97	0.00	(0.00 – 3.80)
2014	1,988	24,025	0.08	2	1.16	1.72	(0.19 – 6.20)
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)							
2015	955	28,355	0.03	2	0.49	4.04	(0.45 – 14.60)
2014	1,735	32,746	0.05	2	1.05	1.90	(0.21 – 6.87)
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)							
2015	3,039	31,627	0.10	1	2.09	0.48	(0.01 – 2.66)
2014	3,653	38,092	0.10	0	2.12	0.00	(0.00 – 1.73)
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)
SHRINERS HOSPITALS FOR CHILDREN - PHILA (12244)							
2015	895	4,045	0.22	0	0.77	0.00	(0.00 – 4.74)
2014	844	4,361	0.19	0	0.46	0.00	(0.00 – 7.92)
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 AND SAILORS MEMORIAL HOSPITAL (11688)							
2015	410	8,406	0.05	0	0.27	0.00	(0.00 – 13.43)
2014	460	10,117	0.05	1	0.35	2.88	(0.04 – 16.02)
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	643	12,009	0.05	0	0.51	0.00	(0.00 – 7.26)
SOMERSET HOSPITAL (12282)							
2015	2,073	17,325	0.12	0	1.52	0.00	(0.00 – 2.42)
2014	2,803	15,166	0.18	0	1.90	0.00	(0.00 – 1.93)
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)							
2015	192	9,573	0.02	0	0.09	0.00	(0.00 – 42.49)
2014	360	10,418	0.03	0	0.23	0.00	(0.00 – 16.27)
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)

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

	Central Line Utilization Rate (DUR)	Patient Days	Central Line Days	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)							
2015	0.19	28,113	5,449	4	5.28	0.76	(0.20 – 1.94)
2014	0.21	28,298	5,919	0	3.97	0.00	(0.00 – 0.92)
2013	0.18	31,935	5,894	2	4.76	0.42	(0.05 – 1.52)
2012	0.16	34,050	5,353	1	4.22	0.24	(0.00 – 1.32)
2011	0.14	32,754	4,701	7	4.26	1.64	(0.66 – 3.38)
2010	0.16	29,714	4,895	1	4.09	0.24	(0.00 – 1.36)
ST. CLAIR MEMORIAL HOSPITAL (10561)							
2015	0.10	80,862	7,830	0	6.28	0.00	(0.00 – 0.58)
2014	0.09	86,277	7,987	0	5.71	0.00	(0.00 – 0.64)
2013	0.10	83,028	8,384	1	6.78	0.15	(0.00 – 0.82)
2012	0.10	83,473	8,379	3	6.16	0.49	(0.10 – 1.42)
2011	0.12	85,606	9,873	1	9.32	0.11	(0.00 – 0.60)
2010	0.11	86,799	9,756	5	8.58	0.58	(0.19 – 1.36)
ST. JOSEPH MEDICAL CTR (11961)							
2015	0.27	33,255	8,924	7	9.45	0.74	(0.30 – 1.53)
2014	0.23	31,625	7,329	3	4.88	0.61	(0.12 – 1.80)
2013	0.25	32,542	8,025	4	6.48	0.62	(0.17 – 1.58)
2012	0.24	36,148	8,696	7	7.32	0.96	(0.38 – 1.97)
2011	0.26	36,742	9,493	9	7.73	1.16	(0.53 – 2.21)
2010	0.26	36,866	9,420	6	7.43	0.81	(0.29 – 1.76)
ST. JOSEPHS HOSPITAL (12438)							
2015	0.07	30,609	2,186	7	1.61	4.33	(1.74 – 8.93)
2014	0.10	30,140	3,035	9	2.16	4.18	(1.91 – 7.93)
2013	0.14	30,941	4,265	21	3.45	6.09	(3.77 – 9.31)
2012	0.14	31,637	4,483	6	3.48	1.73	(0.63 – 3.76)
2011	0.26	23,411	6,080	16	4.94	3.24	(1.85 – 5.26)
2010	0.24	22,626	5,337	26	4.25	6.11	(3.99 – 8.95)
ST. LUKES HOSPITAL BETHLEHEM (11718)							
2015	0.13	134,948	16,946	16	14.60	1.10	(0.63 – 1.78)
2014	0.13	130,484	16,771	3	11.69	0.26	(0.05 – 0.75)
2013	0.15	125,720	18,754	15	15.16	0.99	(0.55 – 1.63)
2012	0.17	127,448	21,292	16	16.94	0.94	(0.54 – 1.53)
2011	0.22	139,179	30,097	20	25.31	0.79	(0.48 – 1.22)
2010	0.22	145,123	32,060	24	25.78	0.93	(0.60 – 1.39)
ST. LUKES HOSPITAL- ANDERSON CAMPUS (21487)							
2015	0.07	15,167	1,034	0	0.75	0.00	(0.00 – 4.86)
2014	0.10	16,331	1,557	0	1.11	0.00	(0.00 – 3.30)
2013	0.09	19,105	1,753	0	1.42	0.00	(0.00 – 2.59)
2012	0.09	16,294	1,528	2	1.11	1.80	(0.20 – 6.50)
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
ST. LUKES MINERS MEMORIAL HOSPITAL (11784)							
2015	0.06	7,326	464	0	0.29	0.00	(0.00 – 12.86)
2014	0.05	7,403	350	0	0.21	0.00	(0.00 – 17.14)
2013	0.05	7,001	322	0	0.22	0.00	(0.00 – 16.91)
2012	0.04	7,014	291	0	0.17	0.00	(0.00 – 21.46)
2011	0.04	6,390	251	0	0.18	0.00	(0.00 – 20.39)
2010	0.03	6,549	175	0	0.15	0.00	(0.00 – 24.34)
ST. LUKES QUAKERTOWN HOSPITAL (11711)							
2015	0.05	13,465	623	1	0.35	2.84	(0.04 – 15.82)
2014	0.05	13,846	650	0	0.40	0.00	(0.00 – 9.23)
2013	0.05	14,419	729	0	0.49	0.00	(0.00 – 7.47)
2012	0.05	14,938	767	2	0.47	4.29	(0.48 – 15.50)
2011	0.07	15,057	999	0	0.65	0.00	(0.00 – 5.64)
2010	0.07	14,903	1,090	0	0.82	0.00	(0.00 – 4.46)

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

	Central Line	Patient	Central Line	Number of	Number of	Standardized	95% Confidence
	Days	Days	Utilization	Observed	Predicted	Infection	Interval
			Rate	Infections	Infections	Ratio	
			(DUR)			(SIR)	
ST. MARY MEDICAL CENTER (11885)							
2015	10,745	89,655	0.12	12	7.86	1.53	(0.79 – 2.67)
2014	11,651	97,183	0.12	10	6.63	1.51	(0.72 – 2.77)
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 REHABILITATION HOSPITAL LLP (36959)							
2015	1,271	13,877	0.09	0	0.86	0.00	(0.00 – 4.25)
2014	.	.	.	.	.	.	.
2013	.	.	.	.	.	.	.
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
SUNBURY COMMUNITY HOSP (12105)							
2015	35	5,429	0.01	0	0.01	0.00	(0.00 – 317.39)
2014	186	6,350	0.03	0	0.12	0.00	(0.00 – 31.09)
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)							
2015	101	2,422	0.04	0	0.06	0.00	(0.00 – 66.18)
2014	113	1,955	0.06	0	0.07	0.00	(0.00 – 53.92)
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	24	1,913	0.01	0	0.02	0.00	(0.00 – 172.97)
2010	1	1,611	0.00	0	0.00	0.00	(0.00 – 2,590.75)
TEMPLE UNIVERSITY HOSPITAL (12382)							
2015	25,697	141,670	0.18	31	24.46	1.27	(0.86 – 1.80)
2014	24,853	138,877	0.18	17	16.89	1.01	(0.59 – 1.61)
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)
THOMAS JEFFERSON UNIVERSITY HOSPITAL - METHODIST (12017)							
2015	5,109	70,561	0.07	3	3.79	0.79	(0.16 – 2.31)
2014	5,695	51,933	0.11	5	4.02	1.24	(0.40 – 2.90)
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 UNIVERSITY HOSPITAL (11506)							
2015	37,621	164,210	0.23	36	38.16	0.94	(0.66 – 1.31)
2014	42,789	174,861	0.24	34	28.39	1.20	(0.83 – 1.67)
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)							
2015	34	5,162	0.01	0	0.01	0.00	(0.00 – 324.82)
2014	.	.	.	.	.	.	.
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)

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

	Central Line Utilization Rate (DUR)	Patient Days	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
TROY COMMUNITY HOSPITAL (12018)						
2015	1,486	6,879	0	1.28	0.00	(0.00 – 2.88)
2014	2,039	7,070	0	1.08	0.00	(0.00 – 3.38)
2013	1,747	7,100	3	1.17	2.56	(0.51 – 7.47)
2012	1,658	7,782	2	1.26	1.59	(0.18 – 5.74)
2011	2,289	7,358	1	1.12	0.89	(0.01 – 4.96)
2010	1,818	7,457	0	1.17	0.00	(0.00 – 3.14)
TYLER MEMORIAL HOSPITAL (11829)						
2015	74	2,093	0	0.04	0.00	(0.00 – 94.48)
2014	122	3,430	0	0.08	0.00	(0.00 – 48.12)
2013	209	5,653	0	0.14	0.00	(0.00 – 26.04)
2012	226	5,258	0	0.13	0.00	(0.00 – 27.48)
2011	40	6,054	0	0.04	0.00	(0.00 – 92.27)
2010	83	6,047	0	0.08	0.00	(0.00 – 46.99)
TYRONE HOSPITAL (12717)						
2015	152	2,530	0	0.09	0.00	(0.00 – 39.82)
2014	23	2,290	0	0.02	0.00	(0.00 – 231.61)
2013	143	2,668	0	0.10	0.00	(0.00 – 38.09)
2012	55	2,809	0	0.03	0.00	(0.00 – 127.63)
2011	123	2,672	0	0.09	0.00	(0.00 – 42.84)
2010	125	2,567	0	0.10	0.00	(0.00 – 36.89)
UNIONTOWN HOSPITAL (10441)						
2015	4,461	37,577	0	3.25	0.00	(0.00 – 1.13)
2014	4,071	41,357	1	2.90	0.35	(0.00 – 1.92)
2013	4,133	43,957	1	3.34	0.30	(0.00 – 1.66)
2012	4,199	39,143	2	3.12	0.64	(0.07 – 2.32)
2011	4,408	42,132	3	4.24	0.71	(0.14 – 2.07)
2010	4,172	46,143	0	3.78	0.00	(0.00 – 0.97)
UPMC ALTOONA (10178)						
2015	15,381	87,354	19	14.52	1.31	(0.79 – 2.04)
2014	12,391	81,988	9	6.93	1.30	(0.59 – 2.47)
2013	11,276	80,978	16	7.58	2.11	(1.21 – 3.43)
2012	10,388	82,234	2	7.26	0.28	(0.03 – 0.99)
2011	12,277	89,191	1	6.99	0.14	(0.00 – 0.80)
2010	11,115	89,928	6	7.82	0.77	(0.28 – 1.67)
UPMC BEDFORD (11680)						
2015	381	6,429	0	0.23	0.00	(0.00 – 15.94)
2014	384	7,219	0	0.23	0.00	(0.00 – 15.77)
2013	390	7,301	0	0.26	0.00	(0.00 – 13.97)
2012	287	6,670	0	0.17	0.00	(0.00 – 21.63)
2011	214	6,685	0	0.16	0.00	(0.00 – 23.03)
2010	356	6,977	0	0.28	0.00	(0.00 – 13.03)
UPMC EAST (28812)						
2015	7,297	46,066	8	5.76	1.39	(0.60 – 2.74)
2014	7,501	42,254	5	4.14	1.21	(0.39 – 2.82)
2013	7,436	29,712	4	4.99	0.80	(0.22 – 2.05)
2012	.	.	.	.	.	.
2011	.	.	.	.	.	.
2010	.	.	.	.	.	.
UPMC HAMOT (11725)						
2015	17,594	85,297	20	17.35	1.15	(0.70 – 1.78)
2014	18,939	81,099	16	12.61	1.27	(0.72 – 2.06)
2013	23,270	86,702	24	18.79	1.28	(0.82 – 1.90)
2012	24,608	83,500	13	21.39	0.61	(0.32 – 1.04)
2011	26,692	83,515	7	20.90	0.33	(0.13 – 0.69)
2010	23,342	79,770	7	18.09	0.39	(0.16 – 0.80)

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

	Central Line Utilization Rate (DUR)	Patient Days	Central Line Days	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
UPMC HORIZON (11675)							
2015	0.12	32,110	4,009	1	3.45	0.29	(0.00 – 1.61)
2014	0.12	33,387	3,967	3	2.78	1.08	(0.22 – 3.15)
2013	0.12	32,503	3,895	3	3.15	0.95	(0.19 – 2.78)
2012	0.11	34,860	3,971	0	2.98	0.00	(0.00 – 1.23)
2011	0.12	34,976	4,325	2	2.51	0.80	(0.09 – 2.87)
2010	0.11	40,285	4,518	2	3.22	0.62	(0.07 – 2.24)
UPMC MCKEESPORT (11707)							
2015	0.12	45,027	5,553	3	4.76	0.63	(0.13 – 1.84)
2014	0.13	49,590	6,319	2	4.41	0.45	(0.05 – 1.64)
2013	0.11	53,354	5,839	4	4.72	0.85	(0.23 – 2.17)
2012	0.13	56,499	7,103	6	5.40	1.11	(0.41 – 2.42)
2011	0.11	64,473	7,184	4	6.82	0.59	(0.16 – 1.50)
2010	0.11	62,590	6,687	2	5.92	0.34	(0.04 – 1.22)
UPMC MERCY (10384)							
2015	0.16	129,339	20,361	11	18.65	0.59	(0.29 – 1.06)
2014	0.18	133,030	23,625	11	16.06	0.68	(0.34 – 1.23)
2013	0.18	137,491	24,489	11	19.79	0.56	(0.28 – 0.99)
2012	0.20	145,278	28,868	26	23.59	1.10	(0.72 – 1.61)
2011	0.16	141,723	22,470	6	20.00	0.30	(0.11 – 0.65)
2010	0.16	143,866	23,469	15	19.64	0.76	(0.43 – 1.26)
UPMC NORTHWEST (11837)							
2015	0.10	24,532	2,495	0	2.03	0.00	(0.00 – 1.81)
2014	0.11	27,824	3,005	1	1.72	0.58	(0.01 – 3.23)
2013	0.12	28,814	3,491	1	2.35	0.43	(0.01 – 2.37)
2012	0.12	28,315	3,537	1	2.47	0.41	(0.01 – 2.25)
2011	0.11	29,476	3,232	1	1.92	0.52	(0.01 – 2.90)
2010	0.10	30,786	3,175	0	2.29	0.00	(0.00 – 1.60)
UPMC PASSAVANT (11242)							
2015	0.21	90,252	18,704	19	15.88	1.20	(0.72 – 1.87)
2014	0.21	98,593	21,024	8	11.45	0.70	(0.30 – 1.38)
2013	0.22	100,207	22,070	8	14.83	0.54	(0.23 – 1.06)
2012	0.21	102,897	21,420	13	16.18	0.80	(0.43 – 1.37)
2011	0.20	105,433	21,204	7	11.27	0.62	(0.25 – 1.28)
2010	0.22	96,673	20,910	25	13.66	1.83	(1.18 – 2.70)
UPMC PRESBYTERIAN SHADYSIDE - SHADYSIDE (10118)							
2015	0.38	116,848	44,290	57	51.53	1.11	(0.84 – 1.43)
2014	0.36	117,928	42,642	11	27.45	0.40	(0.20 – 0.72)
2013	0.34	126,296	42,650	14	34.42	0.41	(0.22 – 0.68)
2012	0.33	131,289	43,185	17	38.18	0.45	(0.26 – 0.71)
2011	0.30	142,753	42,730	21	33.86	0.62	(0.38 – 0.95)
2010	0.25	138,159	34,543	12	27.33	0.44	(0.23 – 0.77)
UPMC PRESBYTERIAN SHADYSIDE (10348)							
2015	0.45	207,546	93,736	94	114.38	0.82	(0.66 – 1.01)
2014	0.47	216,611	102,013	66	64.36	1.03	(0.79 – 1.30)
2013	0.47	221,480	103,460	64	83.46	0.77	(0.59 – 0.98)
2012	0.47	227,985	106,039	84	98.95	0.85	(0.68 – 1.05)
2011	0.46	224,769	103,214	79	75.61	1.04	(0.83 – 1.30)
2010	0.45	222,461	100,818	76	73.72	1.03	(0.81 – 1.29)
UPMC ST. MARGARET (11561)							
2015	0.16	66,909	10,832	12	10.00	1.20	(0.62 – 2.10)
2014	0.15	70,654	10,624	8	7.32	1.09	(0.47 – 2.15)
2013	0.17	69,846	11,706	6	9.46	0.63	(0.23 – 1.38)
2012	0.17	75,976	13,240	3	10.60	0.28	(0.06 – 0.83)
2011	0.15	79,022	12,071	4	10.82	0.37	(0.10 – 0.95)
2010	0.15	76,041	11,165	8	9.48	0.84	(0.36 – 1.66)

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

	Central Line Days	Patient Days	Central Line	Number of Observed Infections	Number of Predicted Infections	Standardized	95% Confidence Interval
			Utilization Rate (DUR)			Infection Ratio (SIR)	
VALLEY FORGE MEDICAL CENTER AND HOSPITAL (12029)							
2015	321	16,980	0.02	0	0.14	0.00	(0.00 – 25.82)
2014	287	15,363	0.02	0	0.19	0.00	(0.00 – 19.47)
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)							
2015	831	14,133	0.06	0	0.50	0.00	(0.00 – 7.33)
2014	791	14,525	0.05	0	0.48	0.00	(0.00 – 7.67)
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)
WASHINGTON HOSPITAL, THE (11460)							
2015	6,602	54,096	0.12	3	5.64	0.53	(0.11 – 1.55)
2014	6,695	52,992	0.13	1	4.67	0.21	(0.00 – 1.19)
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)
WAYNE MEMORIAL HOSPITAL (12004)							
2015	933	16,448	0.06	1	0.56	1.80	(0.02 – 9.99)
2014	1,068	16,887	0.06	1	0.64	1.57	(0.02 – 8.71)
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)							
2015	498	8,596	0.06	0	0.30	0.00	(0.00 – 12.27)
2014	530	8,868	0.06	0	0.32	0.00	(0.00 – 11.53)
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)							
2015	1,437	17,003	0.08	0	0.96	0.00	(0.00 – 3.84)
2014	1,085	16,960	0.06	0	0.65	0.00	(0.00 – 5.66)
2013	1,038	15,195	0.07	0	0.70	0.00	(0.00 – 5.25)
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
WEST PENN HOSPITAL (11864)							
2015	5,516	50,935	0.11	9	4.56	1.97	(0.90 – 3.74)
2014	8,508	46,621	0.18	2	5.77	0.35	(0.04 – 1.25)
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)
WESTERN PSYCHIATRIC INSTITUTE AND CLINIC (13702)							
2015	694	93,517	0.01	0	0.28	0.00	(0.00 – 13.25)
2014	1,070	97,915	0.01	1	0.90	1.11	(0.01 – 6.17)
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)

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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
WILKES-BARRE GENERAL HOSPITAL (11916)							
2015	8,521	68,268	0.12	5	7.33	0.68	(0.22 – 1.59)
2014	9,754	72,498	0.13	7	6.77	1.03	(0.41 – 2.13)
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)							
2015	9,317	50,463	0.18	4	8.91	0.45	(0.12 – 1.15)
2014	8,713	53,831	0.16	8	5.97	1.34	(0.58 – 2.64)
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)							
2015	96	4,477	0.02	0	0.04	0.00	(0.00 – 83.44)
2014	151	5,609	0.03	0	0.10	0.00	(0.00 – 38.05)
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)							
2015	19,556	167,653	0.12	14	16.51	0.85	(0.46 – 1.42)
2014	19,381	159,769	0.12	12	13.57	0.88	(0.46 – 1.54)
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, 2010–2015

	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)							
2015	669	10,746	0.06	2	1.10	1.82	(0.20 – 6.57)
2014	445	9,589	0.05	1	0.74	1.36	(0.02 – 7.57)
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)							
2015	1,377	6,367	0.22	2	2.26	0.88	(0.10 – 3.19)
2014	1,427	6,665	0.21	2	2.09	0.96	(0.11 – 3.46)
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)							
2015	414	3,081	0.13	0	1.08	0.00	(0.00 – 3.40)
2014	694	3,773	0.18	1	0.99	1.01	(0.01 – 5.63)
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)							
2015	12,850	32,103	0.40	21	21.14	0.99	(0.61 – 1.52)
2014	13,106	30,979	0.42	27	18.13	1.49	(0.98 – 2.17)
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)							
2015	6,443	15,643	0.41	7	10.60	0.66	(0.26 – 1.36)
2014	4,841	10,306	0.47	5	6.64	0.75	(0.24 – 1.76)
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)
CONEMAUGH MEMORIAL MEDICAL CENTER (10280)							
2015	554	3,162	0.18	0	0.91	0.00	(0.00 – 4.03)
2014	646	3,589	0.18	0	0.96	0.00	(0.00 – 3.83)
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)							
2015	665	3,687	0.18	3	1.09	2.74	(0.55 – 8.02)
2014	583	3,146	0.19	1	0.86	1.16	(0.02 – 6.46)
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)

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

	Central Line	Patient	Central Line	Number of	Number of	Standardized	95% Confidence
	Days	Days	Utilization	Observed	Predicted	Infection	Interval
			Rate	Infections	Infections	Ratio	
			(DUR)			(SIR)	
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)							
2015	106	999	0.11	0	0.17	0.00	(0.00 – 21.05)
2014	54	1,515	0.04	0	0.09	0.00	(0.00 – 40.26)
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)
EASTON HOSPITAL (11929)							
2015	7	623	0.01	0	0.01	0.00	(0.00 – 319.15)
2014	12	665	0.02	0	0.02	0.00	(0.00 – 171.54)
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)							
2015	368	3,112	0.12	2	0.96	2.09	(0.23 – 7.53)
2014	300	3,339	0.09	0	0.45	0.00	(0.00 – 8.10)
2013	271	2,975	0.09	0	0.37	0.00	(0.00 – 9.79)
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
EPHRATA COMMUNITY HOSPITAL (11764)							
2015	82	1,070	0.08	0	0.21	0.00	(0.00 – 17.17)
2014	47	992	0.05	0	0.07	0.00	(0.00 – 49.14)
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)							
2015	1,656	13,485	0.12	4	2.72	1.47	(0.40 – 3.76)
2014	1,330	10,369	0.13	3	2.02	1.48	(0.30 – 4.33)
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)
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)							
2015	11	2,056	0.01	0	0.02	0.00	(0.00 – 203.19)
2014	.	.	.	.	.	.	.
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	.	.	.	.	.	.	.
GEISINGER-COMMUNITY MEDICAL CENTER (11914)							
2015	.	.	.	.	.	.	.
2014	.	.	.	.	.	.	.
2013	.	.	.	.	.	.	.
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	17	598	0.03	0	0.06	0.00	(0.00 – 57.17)
HAHNEMANN UNIVERSITY HOSPITAL (11437)							
2015	496	3,915	0.13	1	0.82	1.23	(0.02 – 6.82)
2014	584	4,084	0.14	0	0.88	0.00	(0.00 – 4.16)
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)

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

	Central Line	Patient	Central Line	Number of	Number of	Standardized	95% Confidence
	Days	Days	Utilization	Observed	Predicted	Infection	Interval
			Rate	Infections	Infections	Ratio	
			(DUR)			(SIR)	
HEART OF LANCASTER REGIONAL MEDICAL CENTER (12571)							
2015	197	1,845	0.11	0	0.32	0.00	(0.00 – 11.33)
2014	207	1,518	0.14	0	0.31	0.00	(0.00 – 11.70)
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 (11973)							
2015	357	4,750	0.08	0	0.93	0.00	(0.00 – 3.94)
2014	312	4,605	0.07	1	0.48	2.08	(0.03 – 11.55)
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)							
2015	8	1,318	0.01	0	0.02	0.00	(0.00 – 176.21)
2014	55	1,502	0.04	0	0.09	0.00	(0.00 – 41.13)
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 UNIVERSITY OF PENNSYLVANIA (10219)							
2015	1,931	11,484	0.17	4	3.18	1.26	(0.34 – 3.22)
2014	2,265	11,768	0.19	7	3.34	2.10	(0.84 – 4.32)
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)							
2015	921	6,366	0.14	4	2.40	1.67	(0.45 – 4.27)
2014	1,014	7,585	0.13	2	1.48	1.35	(0.15 – 4.87)
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)							
2015	2,237	11,691	0.19	4	3.68	1.09	(0.29 – 2.78)
2014	2,059	12,913	0.16	2	3.08	0.65	(0.07 – 2.34)
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)							
2015	.	.	.	.	.	.	.
2014	.	.	.	.	.	.	.
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)							
2015	3,594	24,664	0.15	4	5.91	0.68	(0.18 – 1.73)
2014	3,216	25,912	0.12	3	4.91	0.61	(0.12 – 1.79)
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)							
2015	50	1,284	0.04	0	0.13	0.00	(0.00 – 28.16)
2014	24	1,060	0.02	0	0.04	0.00	(0.00 – 90.69)
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)							
2015	344	3,208	0.11	0	0.57	0.00	(0.00 – 6.49)
2014	201	2,193	0.09	0	0.31	0.00	(0.00 – 11.67)
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)							
2015	670	5,741	0.12	0	1.10	0.00	(0.00 – 3.33)
2014	733	5,530	0.13	0	1.11	0.00	(0.00 – 3.30)
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	956	5,505	0.17	0	2.22	0.00	(0.00 – 1.65)
MILTON S HERSHEY MEDICAL CENTER (11747)							
2015	2,905	12,355	0.24	2	4.78	0.42	(0.05 – 1.51)
2014	3,489	10,917	0.32	3	4.94	0.61	(0.12 – 1.78)
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)							
2015	197	3,429	0.06	0	0.32	0.00	(0.00 – 11.33)
2014	223	3,730	0.06	0	0.36	0.00	(0.00 – 10.16)
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)
PENN HIGHLANDS DUBOIS (11606)							
2015	73	2,624	0.03	0	0.19	0.00	(0.00 – 19.29)
2014	114	3,903	0.03	0	0.19	0.00	(0.00 – 19.49)
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)
PENNSYLVANIA HOSPITAL OF THE UNIVERSITY OF PA HEALTH SYS (11448)							
2015	1,223	11,697	0.10	4	2.01	1.99	(0.54 – 5.09)
2014	1,438	11,099	0.13	4	2.19	1.83	(0.49 – 4.68)
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)

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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
PINNACLE HEALTH HOSPITALS - HARRISBURG HOSPITAL (34068)							
2015	1,503	9,069	0.17	3	2.47	1.21	(0.24 – 3.55)
2014	1,434	8,486	0.17	1	2.14	0.47	(0.01 – 2.61)
2013	.	.	.	.	.	.	.
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
POCONO MEDICAL CENTER (11772)							
2015	109	1,814	0.06	0	0.18	0.00	(0.00 – 20.48)
2014	96	1,208	0.08	0	0.15	0.00	(0.00 – 25.08)
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 (12375)							
2015	769	7,788	0.10	2	1.26	1.58	(0.18 – 5.71)
2014	1,075	7,678	0.14	2	1.63	1.23	(0.14 – 4.44)
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)							
2015	.	.	.	.	.	.	.
2014	.	.	.	.	.	.	.
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)
SAINT VINCENT HOSPITAL (11699)							
2015	266	2,012	0.13	0	0.44	0.00	(0.00 – 8.39)
2014	407	2,486	0.16	2	0.61	3.29	(0.37 – 11.88)
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)
ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)							
2015	4,810	11,576	0.42	8	7.91	1.01	(0.44 – 1.99)
2014	3,842	10,467	0.37	1	5.38	0.19	(0.00 – 1.03)
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)
ST. JOSEPH MEDICAL CTR (11961)							
2015	111	1,150	0.10	0	0.18	0.00	(0.00 – 20.10)
2014	50	989	0.05	0	0.08	0.00	(0.00 – 44.72)
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)

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

	Central Line	Patient	Central Line	Number of	Number of	Standardized	95% Confidence
	Days	Days	Utilization	Observed	Predicted	Infection	Interval
			Rate	Infections	Infections	Ratio	
			(DUR)			(SIR)	
ST. LUKES HOSPITAL BETHLEHEM (11718)							
2015	437	7,833	0.06	0	0.72	0.00	(0.00 – 5.11)
2014	627	8,717	0.07	1	1.00	1.00	(0.01 – 5.56)
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)							
2015	29	1,442	0.02	0	0.08	0.00	(0.00 – 48.58)
2014	33	1,756	0.02	0	0.06	0.00	(0.00 – 64.98)
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)
TEMPLE UNIVERSITY HOSPITAL (12382)							
2015	810	3,783	0.21	1	1.33	0.75	(0.01 – 4.18)
2014	888	3,963	0.22	0	1.29	0.00	(0.00 – 2.84)
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)
THOMAS JEFFERSON UNIVERSITY HOSPITAL (11506)							
2015	1,197	8,348	0.14	3	1.97	1.52	(0.31 – 4.45)
2014	1,175	8,400	0.14	3	1.78	1.69	(0.34 – 4.93)
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)							
2015	809	5,571	0.15	1	1.33	0.75	(0.01 – 4.18)
2014	1,150	5,042	0.23	1	1.67	0.60	(0.01 – 3.33)
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)							
2015	122	2,351	0.05	0	0.20	0.00	(0.00 – 18.30)
2014	27	1,634	0.02	1	0.05	20.64	(0.27 – 114.83)
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)
WEST PENN HOSPITAL (11864)							
2015	2,916	10,900	0.27	10	4.80	2.08	(1.00 – 3.83)
2014	2,997	10,614	0.28	3	4.28	0.70	(0.14 – 2.05)
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)

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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
YORK HOSPITAL (10108)							
2015	902	9,450	0.10	1	1.48	0.67	(0.01 – 3.75)
2014	708	8,194	0.09	1	1.11	0.90	(0.01 – 5.00)
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, 2010–2015

	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)							
2015	2,847	6,479	0.44	0	2.86	0.00	(0.00 – 1.28)
2014	3,216	6,626	0.49	5	3.10	1.61	(0.52 – 3.76)
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)							
2015	.	.	.	.	.	.	.
2014	.	.	.	.	.	.	.
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)							
2015	14,067	16,031	0.88	38	42.82	0.89	(0.63 – 1.22)
2014	13,581	15,942	0.85	29	18.34	1.58	(1.06 – 2.27)
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)							
2015	10,687	12,224	0.87	22	32.34	0.68	(0.43 – 1.03)
2014	10,412	12,156	0.86	21	14.11	1.49	(0.92 – 2.28)
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)							
2015	.	.	.	.	.	.	.
2014	.	.	.	.	.	.	.
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)							
2015	6,378	9,166	0.70	7	7.00	1.00	(0.40 – 2.06)
2014	8,259	11,523	0.72	1	0.95	1.05	(0.01 – 5.86)
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)							
2015	.	.	.	.	.	.	.
2014	1,432	4,341	0.33	0	1.10	0.00	(0.00 – 3.35)
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 Utilization Rate (DUR)	Patient Days	Number of Observed Infections	Number of Predicted Infections	Standardized Infection Ratio (SIR)	95% Confidence Interval
EXCELA HEALTH LATROBE HOSPITAL (11651)						
2015	599	2,392	1	0.24	4.09	(0.05 – 22.76)
2014	536	2,438	3	0.32	9.33	(1.88 – 27.26)
2013	539	1,891	2	0.70	2.88	(0.32 – 10.38)
2012	662	2,308	0	0.59	0.00	(0.00 – 6.19)
2011	634	2,078	1	0.71	1.42	(0.02 – 7.89)
2010	639	2,314	1	0.45	2.22	(0.03 – 12.36)
FORBES HOSPITAL (11265)						
2015	.	.	.	.	.	.
2014	.	.	.	.	.	.
2013	.	.	.	.	.	.
2012	1,278	7,911	1	0.93	1.07	(0.01 – 5.98)
2011	1,724	8,573	3	1.88	1.60	(0.32 – 4.67)
2010	1,855	7,671	1	1.20	0.84	(0.01 – 4.65)
GEISINGER MEDICAL CENTER (11775)						
2015	3,450	5,243	16	6.62	2.42	(1.38 – 3.92)
2014	3,444	4,756	11	4.22	2.61	(1.30 – 4.66)
2013	3,453	5,175	6	5.57	1.08	(0.39 – 2.34)
2012	.	.	.	.	.	.
2011	.	.	.	.	.	.
2010	.	.	.	.	.	.
HAHNEMANN UNIVERSITY HOSPITAL (11437)						
2015	5,194	10,399	3	6.41	0.47	(0.09 – 1.37)
2014	6,192	14,946	0	5.43	0.00	(0.00 – 0.68)
2013	6,514	16,902	3	9.10	0.33	(0.07 – 0.96)
2012	6,580	14,447	1	6.95	0.14	(0.00 – 0.80)
2011	7,076	15,604	8	8.02	1.00	(0.43 – 1.97)
2010	6,794	13,888	11	7.03	1.56	(0.78 – 2.80)
HOSPITAL OF FOX CHASE CANCER CENTER (12134)						
2015	10,708	21,308	5	13.34	0.37	(0.12 – 0.87)
2014	9,247	19,979	6	8.67	0.69	(0.25 – 1.51)
2013	9,808	19,726	13	14.64	0.89	(0.47 – 1.52)
2012	11,826	22,619	14	13.13	1.07	(0.58 – 1.79)
2011	10,983	22,367	9	12.50	0.72	(0.33 – 1.37)
2010	11,073	22,646	5	11.46	0.44	(0.14 – 1.02)
HOSPITAL OF THE UNIVERSITY OF PENNSYLVANIA (10219)						
2015	23,776	30,629	99	59.47	1.66	(1.35 – 2.03)
2014	.	.	.	.	.	.
2013	.	.	.	.	.	.
2012	.	.	.	.	.	.
2011	.	.	.	.	.	.
2010	.	.	.	.	.	.
JEFFERSON HOSPITAL (10237)						
2015	.	.	.	.	.	.
2014	.	.	.	.	.	.
2013	271	3,355	0	0.19	0.00	(0.00 – 19.42)
2012	482	6,153	1	0.56	1.79	(0.02 – 9.93)
2011	787	8,004	0	1.23	0.00	(0.00 – 2.97)
2010	1,032	7,393	2	0.74	2.72	(0.31 – 9.82)

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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
LEHIGH VALLEY HOSPITAL (11884)							
2015	2,743	5,757	0.48	3	3.14	0.96	(0.19 – 2.79)
2014	.	.	.	.	.	.	.
2013	.	.	.	.	.	.	.
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
MILTON S HERSHEY MEDICAL CENTER (11747)							
2015	14,266	21,014	0.68	27	28.79	0.94	(0.62 – 1.36)
2014	15,080	18,595	0.81	27	19.78	1.37	(0.90 – 1.99)
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)
PENNSYLVANIA HOSPITAL OF THE UNIVERSITY OF PA HEALTH SYS (11448)							
2015	2,348	3,033	0.77	8	5.85	1.37	(0.59 – 2.70)
2014	.	.	.	.	.	.	.
2013	.	.	.	.	.	.	.
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
READING HOSPITAL (12375)							
2015	2,109	6,210	0.34	1	1.40	0.71	(0.01 – 3.97)
2014	2,340	6,116	0.38	0	1.96	0.00	(0.00 – 1.88)
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)							
2015	1,431	5,584	0.26	0	0.61	0.00	(0.00 – 6.05)
2014	1,852	6,052	0.31	3	1.35	2.22	(0.45 – 6.47)
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)							
2015	1,810	1,999	0.91	0	5.79	0.00	(0.00 – 0.63)
2014	1,917	2,007	0.96	1	2.77	0.36	(0.00 – 2.01)
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 BETHLEHEM (11718)							
2015	2,493	11,632	0.21	2	0.79	2.52	(0.28 – 9.11)
2014	2,183	11,311	0.19	1	1.21	0.83	(0.01 – 4.59)
2013	819	4,355	0.19	0	0.95	0.00	(0.00 – 3.87)
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
ST. LUKES HOSPITAL- ANDERSON CAMPUS (21487)							
2015	809	10,676	0.08	0	0.05	0.00	(0.00 – 75.42)
2014	677	5,887	0.11	0	0.28	0.00	(0.00 – 13.32)
2013	223	1,265	0.18	0	0.25	0.00	(0.00 – 14.47)
2012	.	.	.	.	.	.	.
2011	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.
TEMPLE UNIVERSITY HOSPITAL (12382)							
2015	3,325	4,475	0.74	10	7.75	1.29	(0.62 – 2.37)
2014	3,607	3,724	0.97	1	5.26	0.19	(0.00 – 1.06)
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)
THOMAS JEFFERSON UNIVERSITY HOSPITAL (11506)							
2015	12,307	20,200	0.61	27	20.88	1.29	(0.85 – 1.88)
2014	7,899	12,548	0.63	18	8.90	2.02	(1.20 – 3.20)
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)							
2015	1,053	5,057	0.21	0	0.32	0.00	(0.00 – 11.47)
2014	971	5,160	0.19	0	0.05	0.00	(0.00 – 73.21)
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)							
2015	25,921	32,034	0.81	52	69.30	0.75	(0.56 – 0.98)
2014	23,174	27,859	0.83	8	30.86	0.26	(0.11 – 0.51)
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)
WEST PENN HOSPITAL (11864)							
2015	4,227	5,340	0.79	6	10.91	0.55	(0.20 – 1.20)
2014	4,066	4,954	0.82	0	5.37	0.00	(0.00 – 0.68)
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)

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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
WILKES-BARRE GENERAL HOSPITAL (11916)							
2015	1,353	7,669	0.18	0	0.32	0.00	(0.00 – 11.64)
2014	1,796	9,586	0.19	0	0.98	0.00	(0.00 – 3.75)
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, 2010–2015

	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)							
2015	.	.	.	.	.	.	.
2014	.	.	.	.	.	.	.
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 AT RITTENHOUSE (13929)							
2015	3,538	8,833	0.40	4	5.83	0.69	(0.18 – 1.76)
2014	3,870	9,423	0.41	7	3.15	2.22	(0.89 – 4.58)
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)							
2015	6,020	9,897	0.61	12	7.09	1.69	(0.87 – 2.96)
2014	7,521	10,650	0.71	13	7.03	1.85	(0.98 – 3.16)
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)							
2015	3,777	11,132	0.34	12	7.12	1.69	(0.87 – 2.95)
2014	4,818	11,947	0.40	7	3.91	1.79	(0.72 – 3.69)
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)							
2015	5,490	9,101	0.60	8	6.51	1.23	(0.53 – 2.42)
2014	5,891	10,161	0.58	9	5.24	1.72	(0.78 – 3.26)
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 AT HERITAGE VALLEY (12268)							
2015	5,142	7,204	0.71	6	5.32	1.13	(0.41 – 2.45)
2014	5,167	7,953	0.65	3	4.73	0.63	(0.13 – 1.85)
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 PHILADELPHIA-HAVERTOWN (12908)							
2015	4,714	12,069	0.39	10	7.93	1.26	(0.60 – 2.32)
2014	5,859	13,913	0.42	4	4.80	0.83	(0.22 – 2.13)
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)

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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)							
2015	4,773	10,546	0.45	10	7.13	1.40	(0.67 – 2.58)
2014	5,000	12,158	0.41	0	4.07	0.00	(0.00 – 0.90)
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	2,850	7,458	0.38	17	5.01	3.40	(1.98 – 5.44)
LIFECARE HOSPITALS OF CHESTER COUNTY LLC (12005)							
2015	7,097	8,979	0.79	6	6.77	0.89	(0.32 – 1.93)
2014	6,897	8,574	0.80	1	6.66	0.15	(0.00 – 0.84)
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)							
2015	5,279	8,041	0.66	3	5.85	0.51	(0.10 – 1.50)
2014	4,723	6,820	0.69	0	4.39	0.00	(0.00 – 0.84)
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	9,976	14,747	0.68	9	13.32	0.68	(0.31 – 1.28)
LIFECARE HOSPITALS OF PITTSBURGH - ALLE-KISKI CAMPUS (18955)							
2015	4,941	6,927	0.71	11	5.12	2.15	(1.07 – 3.85)
2014	5,122	6,352	0.81	5	4.95	1.01	(0.33 – 2.36)
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)							
2015	5,827	10,683	0.55	11	7.49	1.47	(0.73 – 2.63)
2014	6,843	11,374	0.60	5	6.14	0.81	(0.26 – 1.90)
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	9,666	15,345	0.63	9	13.35	0.67	(0.31 – 1.28)
LIFECARE HOSPITALS OF PITTSBURGH - SUBURBAN CAMPUS (12385)							
2015	4,670	6,896	0.68	10	5.04	1.98	(0.95 – 3.65)
2014	5,368	7,673	0.70	11	5.00	2.20	(1.10 – 3.93)
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)							
2015	4,918	20,105	0.24	10	12.06	0.83	(0.40 – 1.52)
2014	5,740	16,146	0.36	3	4.51	0.67	(0.13 – 1.95)
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)
POST ACUTE MEDICAL SPECIALTY HOSPITAL OF WILKES-BARRE (12604)							
2015	8,692	13,221	0.66	15	9.61	1.56	(0.87 – 2.57)
2014	4,058	8,262	0.49	4	3.46	1.16	(0.31 – 2.96)
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	3,658	16,248	0.23	2	8.28	0.24	(0.03 – 0.87)

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

	Central Line Days	Patient Days	Central Line		Standardized		95% Confidence Interval
			Utilization Rate (DUR)	Number of Observed Infections	Number of Predicted Infections	Infection Ratio (SIR)	
SELECT SPECIALTY HOSPITAL - ERIE (11880)							
2015	3,441	10,208	0.34	8	6.52	1.23	(0.53 – 2.42)
2014	3,716	8,648	0.43	2	3.06	0.65	(0.07 – 2.36)
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 SPECIALTY HOSPITAL - CENTRAL PA (13921)							
2015	6,275	10,648	0.59	1	7.58	0.13	(0.00 – 0.73)
2014	6,187	10,284	0.60	5	5.55	0.90	(0.29 – 2.10)
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	7,091	9,728	0.73	6	7.86	0.76	(0.28 – 1.66)
2010	5,795	7,323	0.79	5	7.17	0.70	(0.22 – 1.63)
SELECT SPECIALTY HOSPITAL - CENTRAL PENNSYLVANIA (CAMP HILL) (12147)							
2015	6,433	10,227	0.63	0	7.37	0.00	(0.00 – 0.50)
2014	6,539	10,293	0.64	4	5.95	0.67	(0.18 – 1.72)
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 - CENTRAL PENNSYLVANIA (YORK) (12334)							
2015	3,254	5,926	0.55	3	4.16	0.72	(0.14 – 2.11)
2014	3,505	5,770	0.61	1	3.15	0.32	(0.00 – 1.76)
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 SPECIALTY HOSPITAL - DANVILLE (12123)							
2015	3,380	8,825	0.38	4	5.78	0.69	(0.19 – 1.77)
2014	2,469	6,510	0.38	0	1.97	0.00	(0.00 – 1.86)
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 - JOHNSTOWN (12299)							
2015	6,542	11,706	0.56	4	8.25	0.48	(0.13 – 1.24)
2014	5,689	10,221	0.56	4	5.00	0.80	(0.22 – 2.05)
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)
SELECT SPECIALTY HOSPITAL - MCKEESPORT, INC. (12271)							
2015	4,141	6,745	0.61	2	4.84	0.41	(0.05 – 1.49)
2014	3,783	6,946	0.54	7	3.31	2.12	(0.85 – 4.36)
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)							
2015	5,221	9,645	0.54	5	6.75	0.74	(0.24 – 1.73)
2014	5,716	9,533	0.60	6	5.12	1.17	(0.43 – 2.55)
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)

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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 LAUREL HIGHLANDS INC (12108)							
2015	4,809	8,276	0.58	1	5.88	0.17	(0.00 – 0.95)
2014	4,276	7,100	0.60	4	3.84	1.04	(0.28 – 2.67)
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)

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, 2015

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

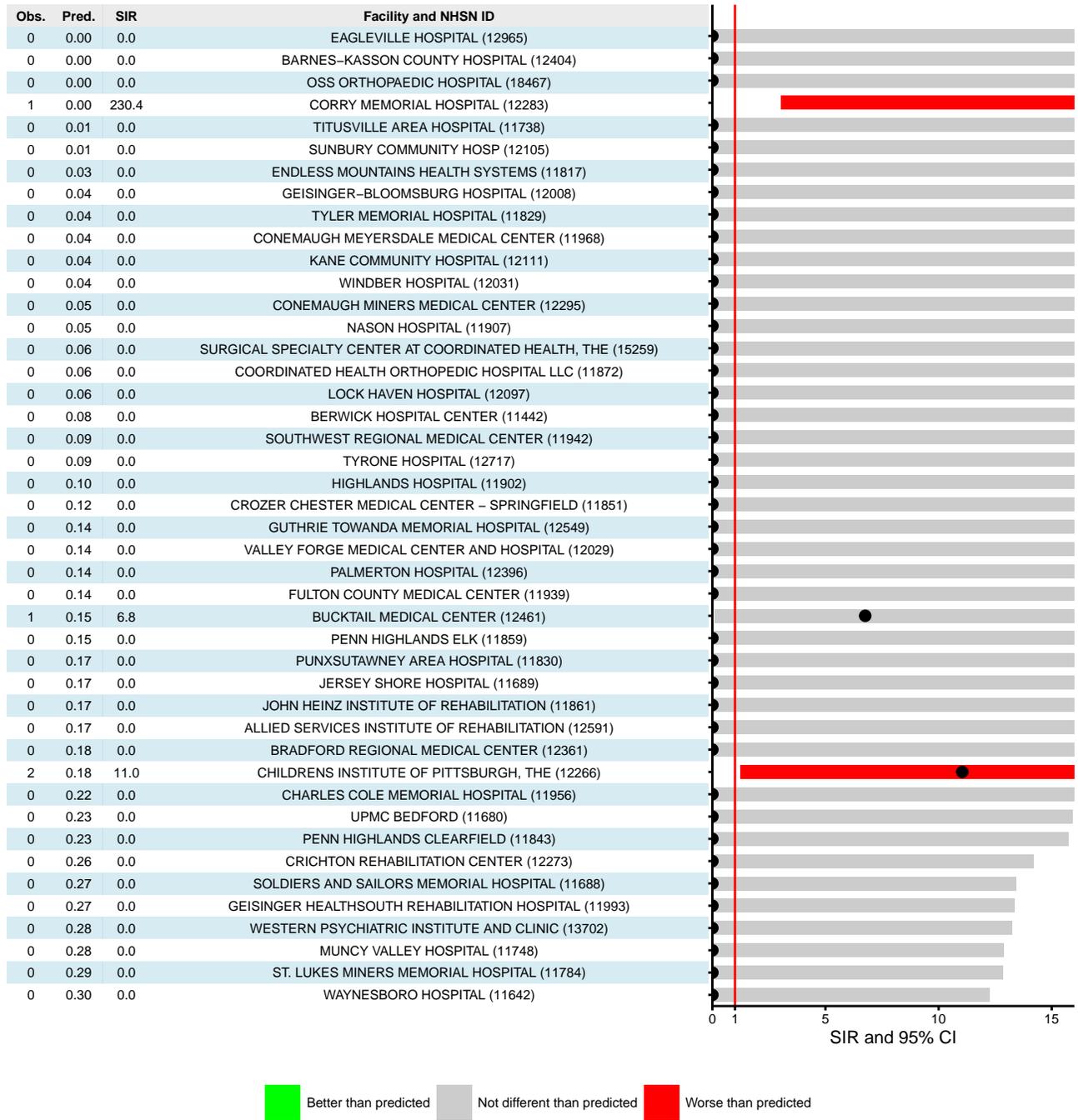


Figure 4.4.4: **Critical Care Units and Wards:** Number of Observed (Obs.) Central Line-Associated Bloodstream Infections (CLABSI) and Relative Ranking of Facilities by Standardized Infection Ratio (SIR) — Pennsylvania, 2015

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



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, 2015**

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

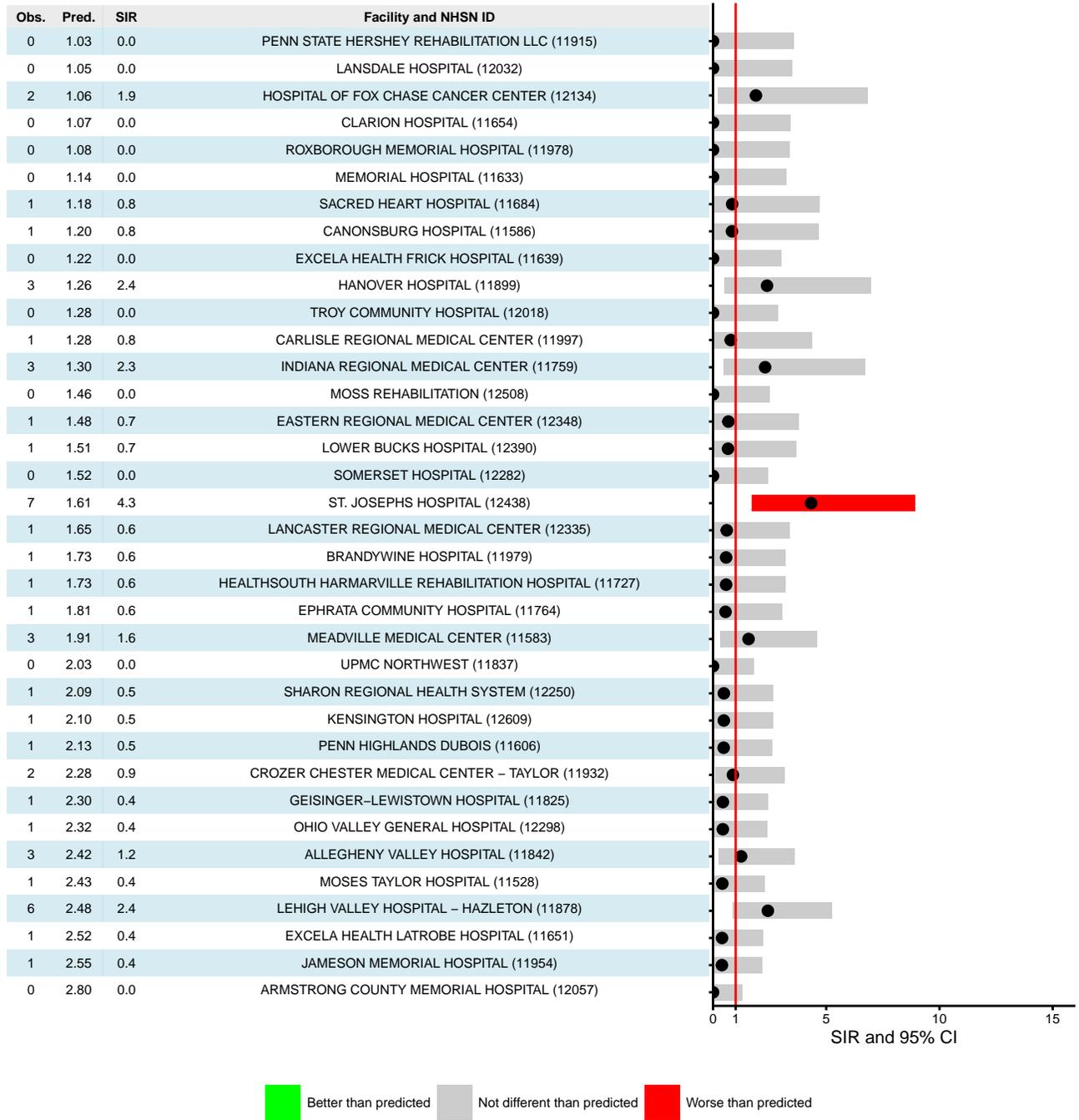


Figure 4.4.6: **Critical Care Units and Wards: Number of Observed (Obs.) Central Line-Associated Bloodstream Infections (CLABSI) and Relative Ranking of Facilities by Standardized Infection Ratio (SIR) — Pennsylvania, 2015**

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

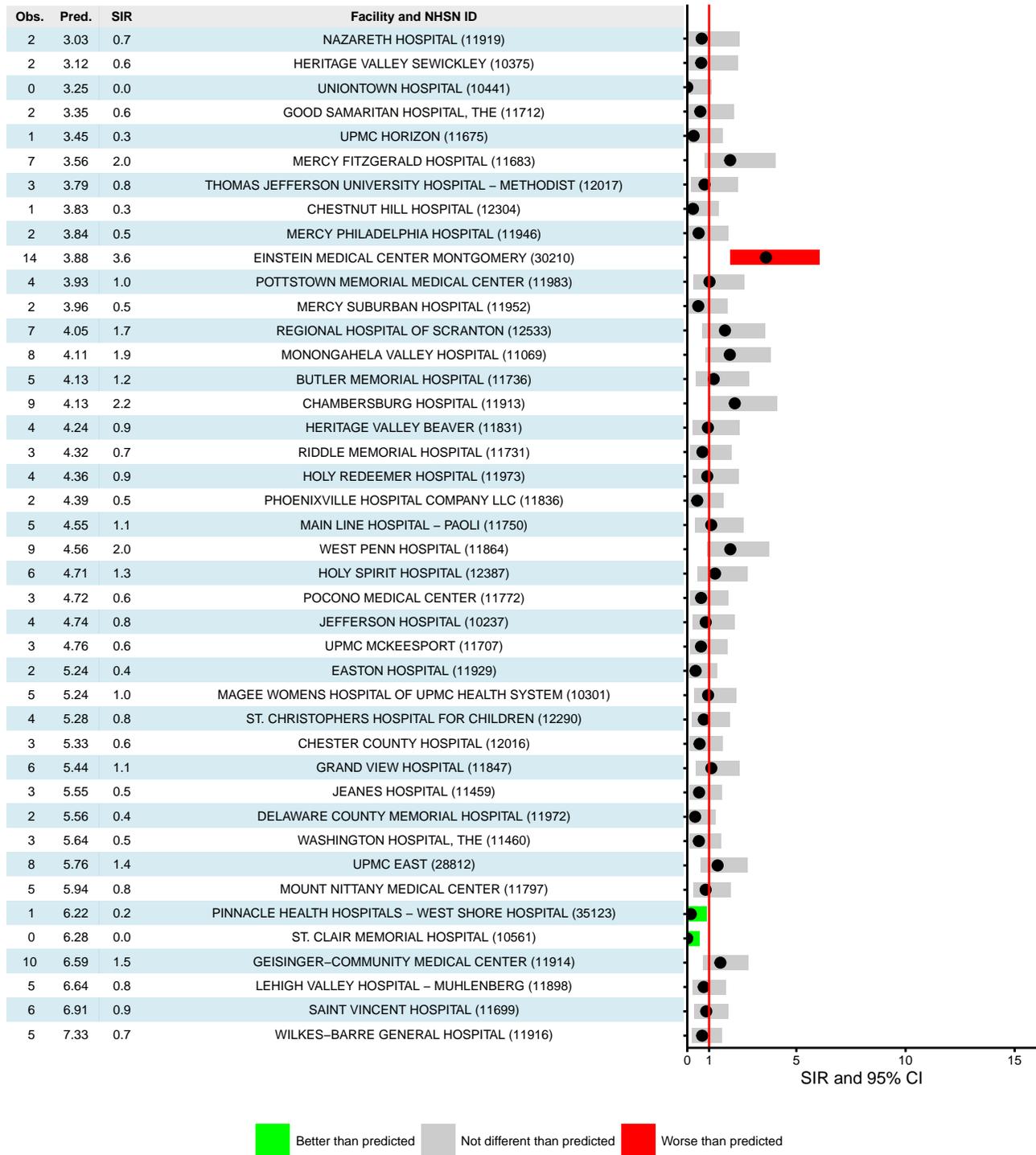


Figure 4.4.7: **Critical Care Units and Wards:** Number of Observed (Obs.) Central Line-Associated Bloodstream Infections (CLABSI) and Relative Ranking of Facilities by Standardized Infection Ratio (SIR) — Pennsylvania, 2015

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

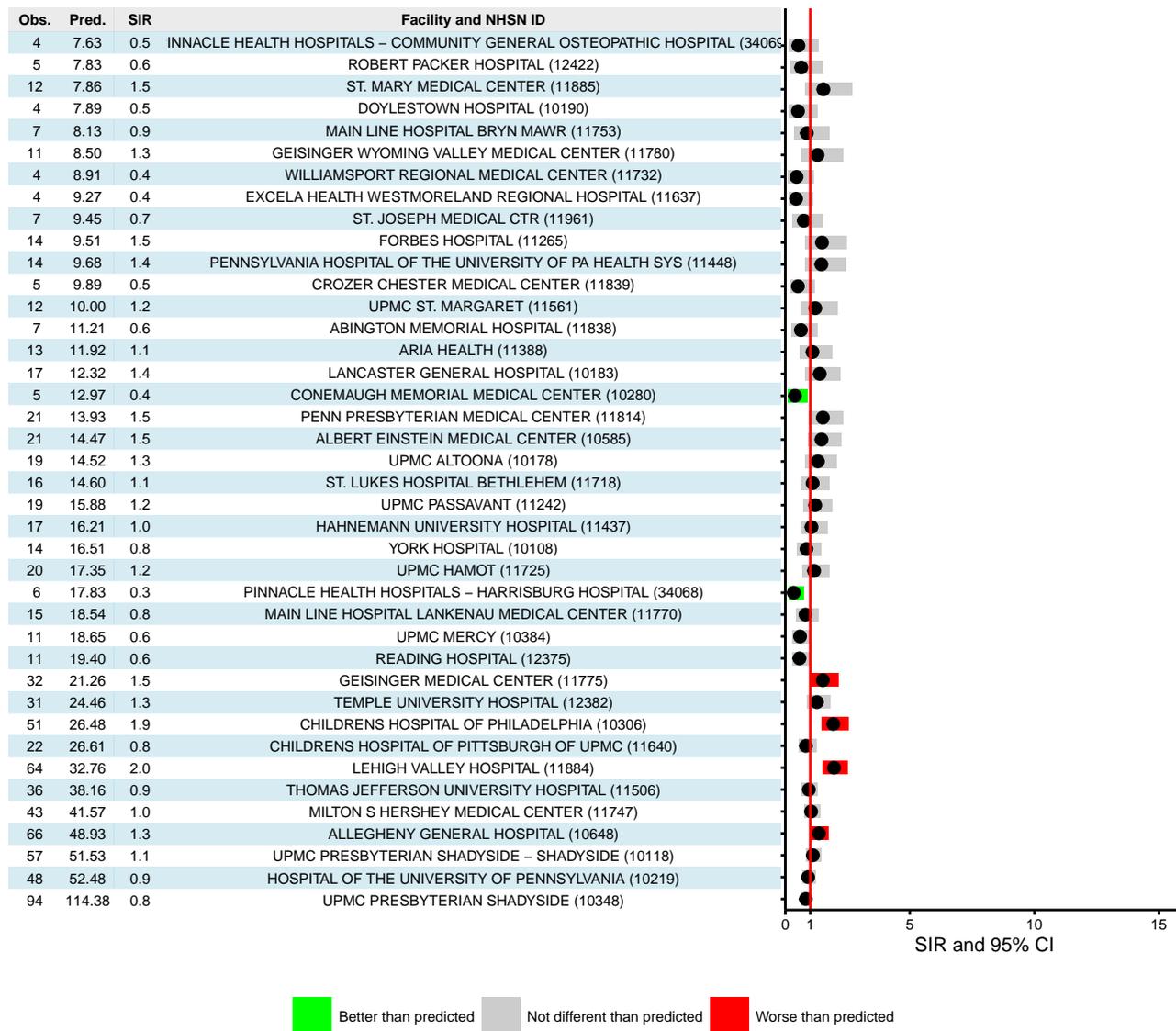
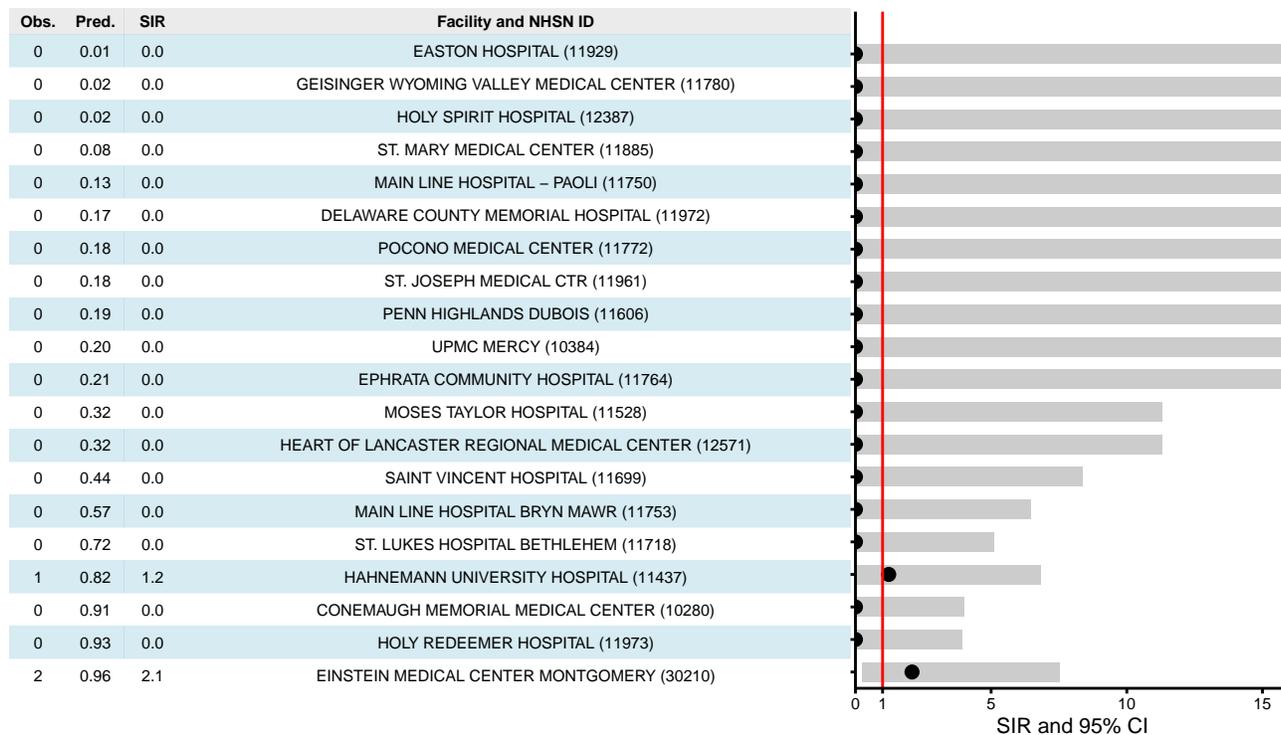


Figure 4.4.8: **Long Term Acute Care Hospitals:** Number of Observed (Obs.) Central Line-Associated Bloodstream Infections (CLABSI) and Relative Ranking of Facilities by Standardized Infection Ratio (SIR) — Pennsylvania, 2015



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, 2015**

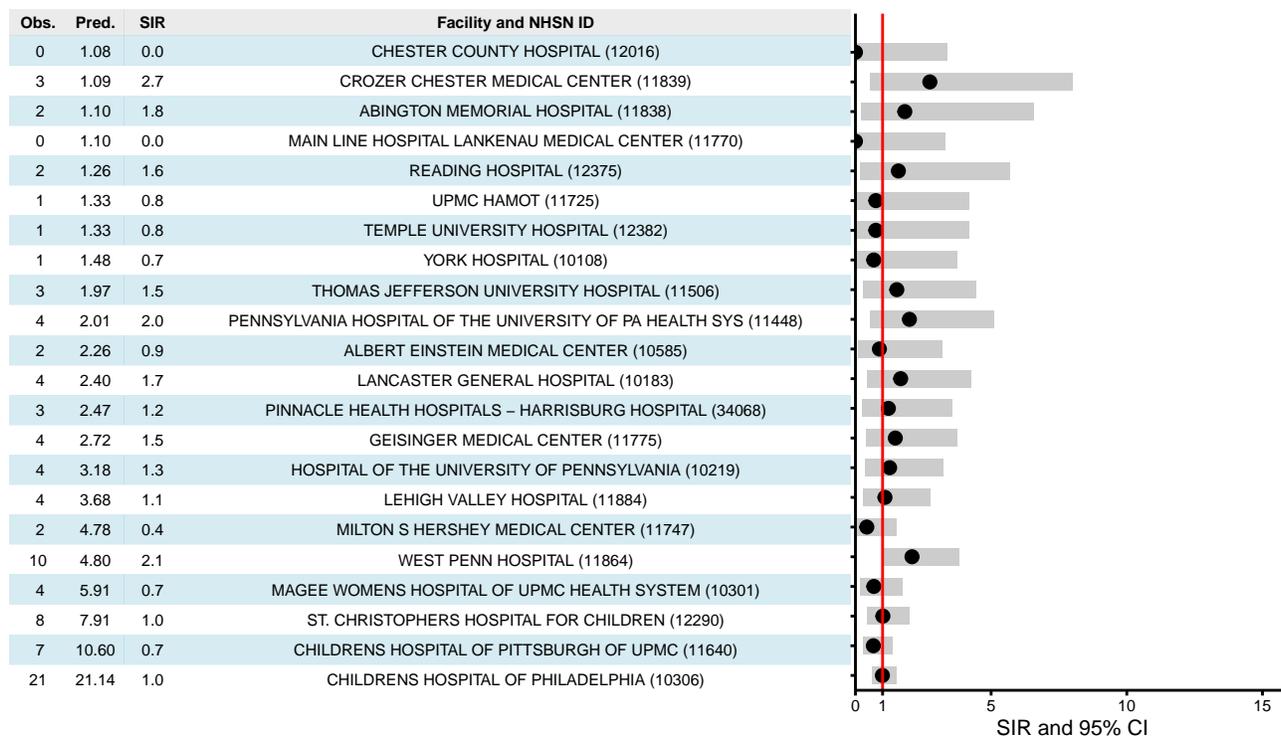
Grouped by Number of Predicted (Pred.) Infections: < 1



■ 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, 2015

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



■ 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, 2015

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

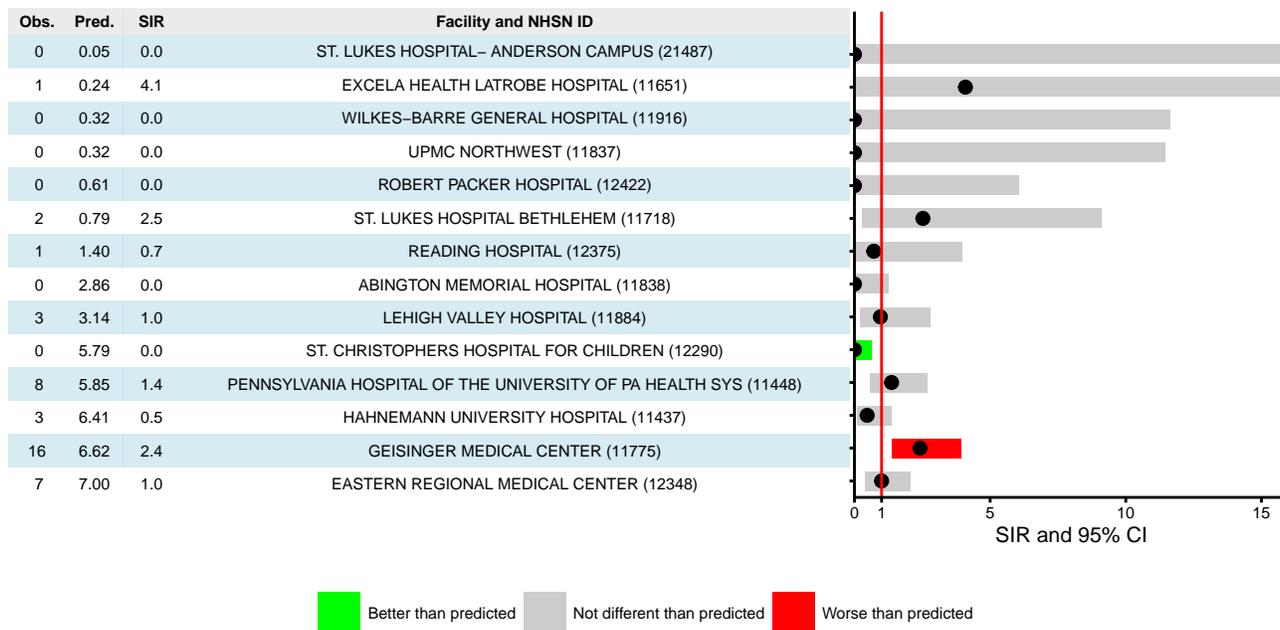
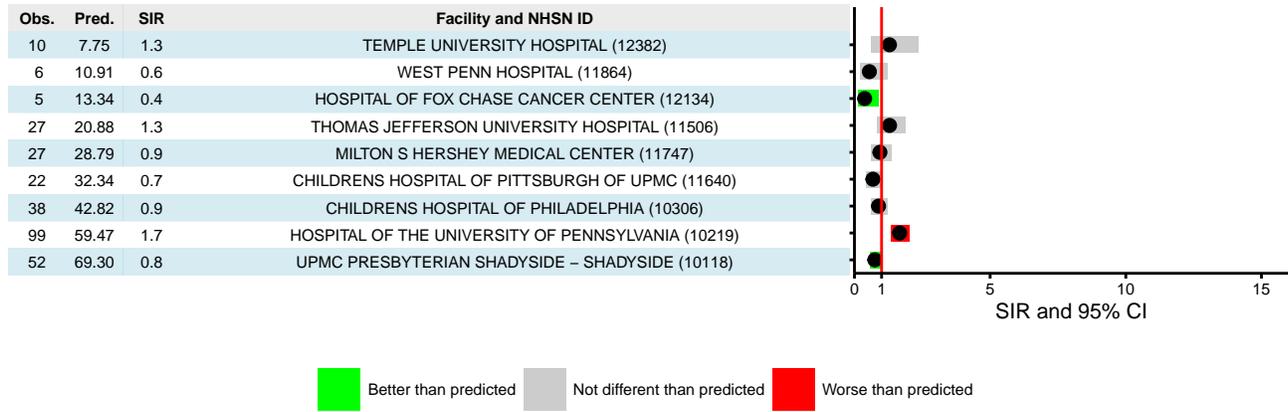


Figure 4.4.12: **Specialty Care Areas:** Number of Observed (Obs.) Central Line-Associated Bloodstream Infections (CLABSI) and Relative Ranking of Facilities by Standardized Infection Ratio (SIR) — Pennsylvania, 2015

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



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 in 2015, exceeded for the first time by GI infections. This is likely due to changes in the *C. difficile* case definition.

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. In addition, the infection rates for some SSI types (e.g., cardiac bypass graft surgery with one incision) have varied significantly from year-to-year, whereas, the rate point-estimates appear to be somewhat more stable for benchmarked procedures performed more frequently (e.g., knee prosthesis and hip prosthesis).

Table 4.5.1 shows the SSI rate for each of the seven procedure types performed in 2015, rates for previous years and the percent change. The rates of infection for procedures performed in 2015 ranged from a low of 0.59 SSIs per 100 knee arthroplasties to a high of 5.30 per 100 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 and the addition of colon surgeries as a benchmarked procedure needs to be accounted for. See previous reports for a detailed discussion of these limitations. Nonetheless, statewide rates of infection have decreased dramatically since 2009 for some surgery types; the rate of infection after a hip prosthesis, abdominal hysterectomy, knee prosthesis or cardiac surgery decreased 10.4, 20.4, 36.3 and 46.6 percent, respectively.

Table 4.5.1: Summary of Reporting Hospitals and Surgical Site Infections (SSIs) by Benchmarked Procedure and Year — Pennsylvania, 2009–2015

	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)						
2015	70	56	8,904	0.63	- 4.88	- 46.61
2014	72	59	8,923	0.66	- 15.73	- 43.87
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)						
2015	59	19	1,225	1.55	109.39	18.51
2014	61	8	1,080	0.74	- 53.77	- 43.40
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
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)						
2015	62	153	8,377	1.83	33.09	- 26.35
2014	61	121	8,817	1.37	- 18.54	- 44.66
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)						
2015	156	245	41,184	0.59	2.63	- 36.31
2014	158	240	41,405	0.58	- 6.86	- 37.94
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)						
2015	161	328	26,341	1.25	4.78	- 10.41
2014	158	313	26,337	1.19	- 9.82	- 14.50
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)						
2015	142	176	13,878	1.27	- 14.30	- 20.38
2014	141	210	14,191	1.48	5.04	- 7.09
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	.	.

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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
Colon Surgery (COLO)						
2015	157	851	16,066	5.30	1.80	12.93
2014	156	834	16,028	5.20	3.90	10.94
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)						
2015	169	1,828	115,975	1.58	3.12	16.98
2014	167	1,785	116,781	1.53	– 4.40	13.44
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	.	.

4.5.2 SSIs — By Pathogen

Table 4.5.2 shows the pathogen data for surgical site infections resulting from procedures performed in 2013 through 2015. 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, 2013–2015

Pathogen	2013		2014		2015	
	Count	%	Count	%	Count	%
<i>Staphylococcus aureus</i>	480	20.70	494	20.52	486	20.05
<i>Escherichia coli</i>	348	15.01	353	14.67	336	13.86
<i>Enterococcus faecalis</i>	176	7.59	166	6.90	187	7.71
<i>Pseudomonas aeruginosa</i>	129	5.56	114	4.74	130	5.36
<i>Klebsiella pneumoniae</i>	79	3.41	95	3.95	103	4.25
<i>Staphylococcus coagulase negative</i>	95	4.10	89	3.70	89	3.67
<i>Enterobacter cloacae</i>	68	2.93	67	2.78	84	3.47
<i>Enterococcus spp.</i>	88	3.79	105	4.36	76	3.14
<i>Bacteroides fragilis</i>	60	2.59	58	2.41	72	2.97
<i>Staphylococcus epidermidis</i>	59	2.54	68	2.83	72	2.97
<i>Proteus mirabilis</i>	73	3.15	74	3.07	64	2.64
<i>Enterococcus faecium</i>	60	2.59	73	3.03	59	2.43
<i>Candida albicans</i>	35	1.51	55	2.29	42	1.73
<i>Streptococcus group B</i>	21	0.91	42	1.74	40	1.65
<i>Serratia marcescens</i>	28	1.21	36	1.50	37	1.53
<i>Klebsiella oxytoca</i>	20	0.86	21	0.87	27	1.11
<i>Morganella morganii</i>	21	0.91	30	1.25	26	1.07
Other	479	20.66	467	19.40	494	20.38
All	2,319	100.00	2,407	100.00	2,424	100.00

4.5.3 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 2015. 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 2015, only 18 cardiac bypass (two incisions) procedures were done on patients with a risk index of 0, and a similar small number (9 procedures) were done on patients with a risk index of 3.

To determine the risk-adjusted 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, 2015

	Risk Index	Number of SSIs	Number of Procedures	Crude Rate per 100 Procedures
Cardiac (CARD)	0	0	100	0.00
	1	44	6,733	0.65
	2	11	1,803	0.61
	3	1	39	2.56
	All	56	8,675	0.65
Cardiac bypass graft surgery with one incision (CBGC)	0	0	3	0.00
	1	18	1,008	1.79
	2	1	208	0.48
	3	0	0	.
	All	19	1,219	1.56
Cardiac bypass graft surgery with two incisions (CBGB)	0	0	18	0.00
	1	111	6,417	1.73
	2	42	1,877	2.24
	3	0	9	0.00
	All	153	8,321	1.84
Knee prosthesis (KPRO)	0	49	16,961	0.29
	1	127	20,366	0.62
	2	65	3,684	1.76
	3	4	106	3.77
	All	245	41,117	0.60
Hip prosthesis (HPRO)	0	61	9,923	0.61
	1	158	13,421	1.18
	2	102	2,876	3.55
	3	7	72	9.72
	All	328	26,292	1.25
Abdominal hysterectomy (HYST)	0	53	5,975	0.89
	1	73	5,729	1.27
	2	50	2,096	2.39
	3	0	39	0.00
	All	176	13,839	1.27
Colon surgery (COLO)	0	94	2,865	3.28
	1	351	7,265	4.83
	2	345	4,565	7.56
	3	61	598	10.20
	All	851	15,293	5.56

4.5.4 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 2015, the median number of reported SSIs was 0. In that year, 46 (65.7 percent) of these hospitals reported no cardiac surgery-related SSIs, and 54 (77 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 2015, 51 (72.9 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 19 (27.1 percent) had an SIR ≥ 1.00 (the number reported was higher than predicted). Table 4.5.7 includes one (1.4) hospital which had a significantly worse SIR than predicted. Facility-specific rates are found in Table 4.5.8.

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 2015, the median number of post-surgical SSIs was 0, and only 13 (22.0 percent) of the hospitals reported any CBGC-related SSIs. The remaining 46 (78.0 percent) reported none. In addition, 47 (79.7 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 2015, 47 (79.7 percent) of the hospitals performing CBGCs had a reported number of SSIs that was less than predicted (an SIR <1.00), and only 12 (20.3 percent) reported more SSIs (an SIR >1.00) than predicted; none had significantly better or worse SIRs than predicted (Table 4.5.7), 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 62 hospitals that performed two-incision (chest and donor site) cardiac bypass grafts in 2015, the median number of SSIs was 2, and 19 (30.6 percent) reported no CBGB-related SSIs. Among these hospitals, only 12 (19 percent) had <1 predicted infection. In 2015, there were 34 (54.8 percent) hospitals performing CBGBs that had a lower number of SSIs than predicted (their adjusted SIR was <1.00), while 28 (45.2 percent) had a greater or equal to number of SSIs than predicted (SIR ≥ 1.00). Among the 62 hospitals, one (2 percent) reported significantly fewer infections than predicted (listed in Table 4.5.6), while two hospitals (3.2 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 156 hospitals performing knee arthroplasties (prostheses) in 2015, the median number of SSIs was 1; a total of 59 (37.8 percent) reported no SSIs in this procedure category. Among the 156 hospitals, 73 (47 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 2015, there were 93 (59.6 percent) that had a fewer number (SIR <1.00) of knee prosthesis-related SSIs reported than predicted; two hospitals (1 percent) had a significantly lower SIR (better) than predicted. The remaining 63 (40.4 percent) had a greater or equal number (SIR ≥ 1.00) of SSIs reported than predicted; two (1.3 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 161 hospitals performing hip arthroplasties (prostheses) in 2015, the median number of SSIs was 1; a total of 65 (40.4 percent) reported no SSIs in this procedure category, and 65 (40 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 2015, there were 101 (62.7 percent) that had a fewer number (SIR

<1.00) of SSIs reported than predicted; among these hospitals, two (1 percent) had a significantly lower number of infections reported than predicted. The remaining 60 (37.3 percent) had a greater or equal number ($SIR \geq 1.00$) of SSIs reported than predicted; among these hospitals, eight 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 142 hospitals performing abdominal hysterectomies in 2015, the median number of SSIs was 0, and there were 74 (52.1 percent) that reported no SSIs associated with this procedure and 87 (61 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 performed abdominal hysterectomies in 2015, a total of 91 (64.1 percent) hospitals reported fewer SSIs than predicted ($SIR < 1.00$), while the other 51 (35.9 percent) reported more or equal SSIs than predicted ($SIR \geq 1.00$). Two hospitals (1 percent) had a significantly lower number of SSIs than predicted, and six (4.2 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 157 hospitals performing colon surgeries in 2015, the median number of SSIs was 3; a total of 35 (22.3 percent) reported no SSIs in this procedure category, and 30 (19 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 2015, there were 101 (64.3 percent) that had a fewer number ($SIR < 1.00$) of SSIs reported than predicted; among these hospitals, twelve (8 percent) had a significantly lower number of infections reported than predicted. The remaining 56 (35.7 percent) had a greater or equal number ($SIR \geq 1.00$) of SSIs reported than predicted; among these hospitals, eight 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, 2009–2015

	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)											
2015	0	46	65.7	54	77.1	51	72.9	19	27.1	0	0.0	1	1.4
2014	0	51	70.8	56	77.8	56	77.8	16	22.2	0	0.0	4	5.6
2013	0	45	65.2	49	71.0	52	75.4	17	24.6	0	0.0	0	0.0
2012	1	30	45.5	43	65.2	41	62.1	25	37.9	0	0.0	1	1.5
2011	0	36	54.5	39	59.1	48	72.7	18	27.3	0	0.0	2	3.0
2010	0	34	52.3	38	58.5	44	67.7	21	32.3	0	0.0	2	3.1
2009	0	35	55.6	36	57.1	46	73.0	17	27.0	0	0.0	3	4.8
Cardiac bypass graft surgery with one incision (CBGC)													
2015	0	46	78.0	56	94.9	47	79.7	12	20.3	0	0.0	1	1.7
2014	0	53	86.9	61	100.0	53	86.9	8	13.1	0	0.0	0	0.0
2013	0	48	82.8	56	96.6	48	82.8	10	17.2	0	0.0	1	1.7
2012	0	39	68.4	52	91.2	41	71.9	16	28.1	0	0.0	0	0.0
2011	0	42	80.8	49	94.2	43	82.7	9	17.3	0	0.0	1	1.9
2010	0	41	73.2	52	92.9	44	78.6	12	21.4	0	0.0	1	1.8
2009	0	40	71.4	49	87.5	43	76.8	13	23.2	0	0.0	2	3.6
Cardiac bypass graft surgery with two incisions (CBGB)													
2015	2	19	30.6	12	19.4	34	54.8	28	45.2	1	1.6	2	3.2
2014	1	15	24.6	12	19.7	34	55.7	27	44.3	0	0.0	4	6.6
2013	2	17	27.4	11	17.7	40	64.5	22	35.5	0	0.0	5	8.1
2012	3	9	15.3	4	6.8	30	50.8	29	49.2	0	0.0	0	0.0
2011	2	8	13.6	4	6.8	34	57.6	25	42.4	1	1.7	4	6.8
2010	3	8	13.1	4	6.6	35	57.4	26	42.6	0	0.0	3	4.9
2009	4	7	11.7	1	1.7	29	48.3	31	51.7	5	8.3	5	8.3
Knee prosthesis (KPRO)													
2015	1	59	37.8	73	46.8	93	59.6	63	40.4	2	1.3	2	1.3
2014	1	68	43.0	76	48.1	104	65.8	54	34.2	2	1.3	7	4.4
2013	1	63	40.4	77	49.4	99	63.5	57	36.5	1	0.6	6	3.8
2012	1	67	43.2	70	45.2	102	65.8	53	34.2	0	0.0	7	4.5
2011	1	60	38.7	70	45.2	98	63.2	57	36.8	1	0.6	6	3.9
2010	1	54	36.7	61	41.5	93	63.3	54	36.7	1	0.7	6	4.1
2009	1	51	35.4	54	37.5	88	61.1	56	38.9	2	1.4	6	4.2
Hip prosthesis (HPRO)													
2015	1	65	40.4	65	40.4	101	62.7	60	37.3	2	1.2	8	5.0
2014	1	54	34.2	64	40.5	93	58.9	65	41.1	2	1.3	3	1.9
2013	1	62	39.0	70	44.0	100	62.9	59	37.1	2	1.3	9	5.7
2012	1	63	40.1	70	44.6	95	60.5	62	39.5	3	1.9	3	1.9
2011	1	55	35.9	65	42.5	95	62.1	58	37.9	2	1.3	5	3.3
2010	1	58	38.9	64	43.0	90	60.4	59	39.6	1	0.7	7	4.7
2009	1	56	38.6	61	42.1	93	64.1	52	35.9	1	0.7	4	2.8

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Table 4.5.4 – Continued from previous page

		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	%
Abdominal hysterectomy (HYST)													
2015	0	74	52.1	87	61.3	91	64.1	51	35.9	2	1.4	6	4.2
2014	0	72	51.1	84	59.6	98	69.5	43	30.5	3	2.1	8	5.7
2013	0	77	53.1	93	64.1	104	71.7	41	28.3	0	0.0	6	4.1
2012	0	80	55.6	90	62.5	98	68.1	46	31.9	1	0.7	6	4.2
2011	0	76	53.5	88	62.0	92	64.8	50	35.2	2	1.4	3	2.1
2010	1	63	45.7	74	53.6	90	65.2	48	34.8	1	0.7	5	3.6
2009	1	61	43.9	74	53.2	93	66.9	46	33.1	1	0.7	7	5.0
Colon surgery (COLO)													
2015	3	35	22.3	30	19.1	101	64.3	56	35.7	12	7.6	8	5.1
2014	3	30	19.2	33	21.2	92	59.0	64	41.0	7	4.5	11	7.1
2013	2	32	20.3	34	21.5	96	60.8	62	39.2	5	3.2	9	5.7
2012	3	25	15.9	33	21.0	92	58.6	65	41.4	4	2.5	5	3.2
2011	.	.	.	.	.	.	.	.	.	.	.	.	.
2010	.	.	.	.	.	.	.	.	.	.	.	.	.
2009	.	.	.	.	.	.	.	.	.	.	.	.	.

Table 4.5.5: Hospitals Omitted from SSI SIR Analysis Due to No Reported Procedures — Pennsylvania, 2015

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 SPECIALTY HOSPITAL - ERIE (11880)
GOOD SHEPHERD SPECIALTY HOSPITAL (11887)
GOOD SHEPHERD REHABILITATION HOSPITAL, THE (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)
CONEMAUGH MEYERSDALE MEDICAL CENTER (11968)
GEISINGER HEALTHSOUTH REHABILITATION HOSPITAL (11993)
LIFECARE HOSPITALS OF CHESTER COUNTY LLC (12005)
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 REHABILITATION HOSPITAL (12146)
SELECT SPECIALTY HOSPITAL - CENTRAL PENNSYLVANIA (CAMP HILL) (12147)
MEADOWS PSYCHIATRIC CENTER, THE (12156)
LIFECARE HOSPITALS OF PITTSBURGH - MONROEVILLE (12254)
CHILDRENS INSTITUTE OF PITTSBURGH, THE (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)
SELECT SPECIALTY HOSPITAL - JOHNSTOWN (12299)
SELECT SPECIALTY 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)
FRIENDS HOSPITAL (12488)
BELMONT CENTER FOR COMPREHENSIVE TREATMENT (12505)
MOSS REHABILITATION (12508)
HORSHAM CLINIC (12543)
ST. JOHN VIANNEY HOSPITAL (12548)

FAIRMOUNT BEHAVIORAL HEALTH SYSTEM (12565)
ALLIED SERVICES INSTITUTE OF REHABILITATION (12591)
POST ACUTE MEDICAL SPECIALTY HOSPITAL OF WILKES-BARRE (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)
WESTERN PSYCHIATRIC INSTITUTE AND CLINIC (13702)
SELECT SPECIALTY HOSPITAL - CENTRAL PA (13921)
GOOD SHEPHERD PENN PARTNERS AT RITTENHOUSE (13929)
PENNSYLVANIA PSYCHIATRIC INSTITUTE (14190)
HAVEN BEHAVIORAL HOSPITAL OF EASTERN PENNSYLVANIA (14471)
LIFECARE HOSPITALS OF PITTSBURGH - ALLE-KISKI CAMPUS (18955)
WILLS EYE HOSPITAL (34846)
ST. MARY REHABILITATION HOSPITAL LLP (36959)
HAVEN BEHAVIORAL HOSPITAL OF PHILADELPHIA (37622)
HELEN M. SIMPSON REHABILITATION HOSPITAL (40371)

Table 4.5.6: Hospitals with Significantly Fewer Surgical Site Infections (SSIs) than Predicted (Better = Smaller SIR)
 — Pennsylvania, 2015

	Hospital Name (NHSN ID)
Cardiac (CARD)	NONE
Cardiac bypass graft surgery with one incision (CBGC)	NONE
Cardiac bypass graft surgery with two incisions (CBGB)	BUTLER MEMORIAL HOSPITAL (11736)
Knee arthroplasty (KPRO)	ARIA HEALTH (11388) READING HOSPITAL (12375)
Hip arthroplasty (HPRO)	CHAMBERSBURG HOSPITAL (11913) MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)
Abdominal hysterectomy (HYST)	MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301) MILTON S HERSHEY MEDICAL CENTER (11747)
Colon surgery (COLO)	CHILDRENS HOSPITAL OF PHILADELPHIA (10306) CROZER CHESTER MEDICAL CENTER (11839) LEHIGH VALLEY HOSPITAL (11884) MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301) MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770) MOSES TAYLOR HOSPITAL (11528) RIDDLE MEMORIAL HOSPITAL (11731) ROBERT PACKER HOSPITAL (12422) ST. LUKES HOSPITAL BETHLEHEM (11718) TEMPLE UNIVERSITY HOSPITAL (12382) THOMAS JEFFERSON UNIVERSITY HOSPITAL (11506) WASHINGTON HOSPITAL, THE (11460)

Table 4.5.7: Hospitals with Significantly More Surgical Site Infections (SSIs) than Predicted (Worse = Larger SIR)
 — Pennsylvania, 2015

	Hospital Name (NHSN ID)
Cardiac (CARD)	CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)
Cardiac bypass graft surgery with one incision (CBGC)	LANCASTER REGIONAL MEDICAL CENTER (12335)
Cardiac bypass graft surgery with two incisions (CBGB)	BRANDYWINE HOSPITAL (11979) UPMC ALTOONA (10178)
Knee arthroplasty (KPRO)	ELLWOOD CITY HOSPITAL (11779) PENN HIGHLANDS DUBOIS (11606)
Hip arthroplasty (HPRO)	CARLISLE REGIONAL MEDICAL CENTER (11997) EASTON HOSPITAL (11929) GEISINGER MEDICAL CENTER (11775) SUNBURY COMMUNITY HOSP (12105) TYRONE HOSPITAL (12717) UPMC ST. MARGARET (11561) WELLSPAN SURGERY AND REHABILITATION HOSPITAL (27430) WINDBER HOSPITAL (12031)
Abdominal hysterectomy (HYST)	ARMSTRONG COUNTY MEMORIAL HOSPITAL (12057) HERITAGE VALLEY BEAVER (11831) HOLY SPIRIT HOSPITAL (12387) UPMC ALTOONA (10178) WAYNE MEMORIAL HOSPITAL (12004) WEST PENN HOSPITAL (11864)
Colon surgery (COLO)	ALLEGHENY GENERAL HOSPITAL (10648) J C BLAIR MEMORIAL HOSPITAL (11724) READING HOSPITAL (12375) SAINT VINCENT HOSPITAL (11699) UPMC PASSAVANT (11242) UPMC PRESBYTERIAN SHADYSIDE - SHADYSIDE (10118) UPMC PRESBYTERIAN SHADYSIDE (10348) WILKES-BARRE GENERAL HOSPITAL (11916)

Table 4.5.8: Rate (SIR) of Surgical Site Infections (SSIs) Associated with Cardiac Procedures by Hospital (Ordered by Predicted Infections) — Pennsylvania, 2009–2015

	Number of SSIs (CARD)	Predicted Number of SSIs (CARD)	SIR (95% CI)
MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)			
2015	.	.	.
2014	.	.	.
2013	0	0.01	0.00 (0.00–503.45)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
UPMC MCKEESPORT (11707)			
2015	.	.	.
2014	0	0.01	0.00 (0.00–536.68)
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	.	.	.
RIDDLE MEMORIAL HOSPITAL (11731)			
2015	.	.	.
2014	0	0.02	0.00 (0.00–178.89)
2013	.	.	.
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
MERCY SUBURBAN HOSPITAL (11952)			
2015	.	.	.
2014	.	.	.
2013	.	.	.
2012	0	0.01	0.00 (0.00–394.22)
2011	.	.	.
2010	.	.	.
2009	.	.	.
OHIO VALLEY GENERAL HOSPITAL (12298)			
2015	.	.	.
2014	.	.	.
2013	.	.	.
2012	.	.	.
2011	.	.	.
2010	0	0.01	0.00 (0.00–349.76)
2009	.	.	.
ST. LUKES HOSPITAL- ANDERSON CAMPUS (21487)			
2015	.	.	.
2014	0	0.01	0.00 (0.00–536.68)
2013	.	.	.
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.

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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 EAST (28812)			
2015	.	.	.
2014	0	0.01	0.00 (0.00–268.34)
2013	0	0.01	0.00 (0.00–503.45)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
LOWER BUCKS HOSPITAL (12390)			
2015	0	0.01	0.00 (0.00–561.30)
2014	0	0.02	0.00 (0.00–178.89)
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)
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)			
2015	0	0.01	0.00 (0.00–290.29)
2014	.	.	.
2013	.	.	.
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
HERITAGE VALLEY SEWICKLEY (10375)			
2015	0	0.01	0.00 (0.00–280.65)
2014	0	0.01	0.00 (0.00–268.34)
2013	.	.	.
2012	.	.	.
2011	0	0.01	0.00 (0.00–315.62)
2010	0	0.04	0.00 (0.00–87.44)
2009	.	.	.
UPMC ST. MARGARET (11561)			
2015	0	0.01	0.00 (0.00–280.65)
2014	0	0.05	0.00 (0.00–76.42)
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	.	.	.
UPMC HORIZON (11675)			
2015	0	0.01	0.00 (0.00–280.65)
2014	0	0.03	0.00 (0.00–107.34)
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	.	.	.
SHARON REGIONAL HEALTH SYSTEM (12250)			
2015	0	0.06	0.00 (0.00–63.30)
2014	0	0.05	0.00 (0.00–66.90)
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)

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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)			
2015	0	0.08	0.00 (0.00–47.04)
2014	0	0.20	0.00 (0.00–18.49)
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)
LANCASTER REGIONAL MEDICAL CENTER (12335)			
2015	0	0.08	0.00 (0.00–44.08)
2014	0	0.15	0.00 (0.00–25.20)
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)
WEST PENN HOSPITAL (11864)			
2015	0	0.09	0.00 (0.00–40.87)
2014	0	0.14	0.00 (0.00–25.47)
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)
PINNACLE HEALTH HOSPITALS - WEST SHORE HOSPITAL (35123)			
2015	0	0.10	0.00 (0.00–37.42)
2014	.	.	.
2013	.	.	.
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
WILKES-BARRE GENERAL HOSPITAL (11916)			
2015	1	0.10	9.77 (0.13–54.34)
2014	0	0.27	0.00 (0.00–13.71)
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)
HOLY SPIRIT HOSPITAL (12387)			
2015	0	0.11	0.00 (0.00–33.28)
2014	0	0.27	0.00 (0.00–13.75)
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)
GOOD SAMARITAN HOSPITAL, THE (11712)			
2015	0	0.11	0.00 (0.00–32.38)
2014	0	0.01	0.00 (0.00–536.68)
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)
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)			
2015	0	0.11	0.00 (0.00–32.13)
2014	0	0.17	0.00 (0.00–22.17)
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)			
2015	0	0.14	0.00 (0.00–25.83)
2014	0	0.16	0.00 (0.00–23.24)
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)
ARIA HEALTH (11388)			
2015	1	0.15	6.75 (0.09–37.56)
2014	0	0.32	0.00 (0.00–11.63)
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)
MERCY FITZGERALD HOSPITAL (11683)			
2015	0	0.16	0.00 (0.00–22.94)
2014	0	0.23	0.00 (0.00–16.05)
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)
JEANES HOSPITAL (11459)			
2015	0	0.16	0.00 (0.00–22.64)
2014	0	0.18	0.00 (0.00–20.39)
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)
MAIN LINE HOSPITAL - PAOLI (11750)			
2015	0	0.17	0.00 (0.00–21.05)
2014	0	0.16	0.00 (0.00–22.36)
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)
EASTON HOSPITAL (11929)			
2015	0	0.22	0.00 (0.00–16.60)
2014	0	0.19	0.00 (0.00–18.88)
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)

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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)
HAHNEMANN UNIVERSITY HOSPITAL (11437)			
2015	0	0.22	0.00 (0.00–16.54)
2014	1	0.16	6.08 (0.08–33.86)
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)
PENN HIGHLANDS DUBOIS (11606)			
2015	0	0.23	0.00 (0.00–15.65)
2014	0	0.21	0.00 (0.00–17.80)
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)
WASHINGTON HOSPITAL, THE (11460)			
2015	0	0.25	0.00 (0.00–14.65)
2014	0	0.29	0.00 (0.00–12.45)
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)
ST. CLAIR MEMORIAL HOSPITAL (10561)			
2015	0	0.25	0.00 (0.00–14.44)
2014	0	0.22	0.00 (0.00–16.75)
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)
ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)			
2015	0	0.29	0.00 (0.00–12.78)
2014	3	0.40	7.56 (1.52–22.10)
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)
LEHIGH VALLEY HOSPITAL - MUHLENBERG (11898)			
2015	1	0.29	3.40 (0.04–18.92)
2014	0	0.34	0.00 (0.00–10.88)
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)
CHESTER COUNTY HOSPITAL (12016)			
2015	1	0.30	3.33 (0.04–18.51)
2014	0	0.40	0.00 (0.00–9.19)
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)

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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)
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)			
2015	0	0.35	0.00 (0.00–10.62)
2014	0	0.30	0.00 (0.00–12.16)
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)
ST. JOSEPH MEDICAL CTR (11961)			
2015	2	0.35	5.70 (0.64–20.56)
2014	0	0.50	0.00 (0.00–7.38)
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)
POCONO MEDICAL CENTER (11772)			
2015	0	0.40	0.00 (0.00–9.26)
2014	0	0.25	0.00 (0.00–14.50)
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)
PENNSYLVANIA HOSPITAL OF THE UNIVERSITY OF PA HEALTH SYS (11448)			
2015	0	0.40	0.00 (0.00–9.22)
2014	0	0.33	0.00 (0.00–11.11)
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)
GEISINGER-COMMUNITY MEDICAL CENTER (11914)			
2015	0	0.43	0.00 (0.00–8.59)
2014	0	0.60	0.00 (0.00–6.12)
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)
CROZER CHESTER MEDICAL CENTER (11839)			
2015	1	0.43	2.31 (0.03–12.87)
2014	0	0.21	0.00 (0.00–17.20)
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)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)			
2015	0	0.44	0.00 (0.00–8.42)
2014	0	0.30	0.00 (0.00–12.42)
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)

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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)
ALBERT EINSTEIN MEDICAL CENTER (10585)			
2015	1	0.49	2.03 (0.03–11.32)
2014	0	0.40	0.00 (0.00–9.08)
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)
DOYLESTOWN HOSPITAL (10190)			
2015	0	0.52	0.00 (0.00–7.05)
2014	0	0.73	0.00 (0.00–5.04)
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)
UPMC MERCY (10384)			
2015	0	0.53	0.00 (0.00–6.86)
2014	1	0.69	1.45 (0.02–8.06)
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)
CONEMAUGH MEMORIAL MEDICAL CENTER (10280)			
2015	0	0.55	0.00 (0.00–6.72)
2014	1	0.71	1.40 (0.02–7.80)
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)
ROBERT PACKER HOSPITAL (12422)			
2015	0	0.60	0.00 (0.00–6.11)
2014	0	0.66	0.00 (0.00–5.57)
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)
EINSTEIN MEDICAL CENTER MONTGOMERY (30210)			
2015	0	0.61	0.00 (0.00–6.05)
2014	3	0.72	4.14 (0.83–12.09)
2013	0	0.36	0.00 (0.00–10.24)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)			
2015	0	0.63	0.00 (0.00–5.78)
2014	1	0.83	1.20 (0.02–6.69)
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)

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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)
HERITAGE VALLEY BEAVER (11831)			
2015	1	0.65	1.54 (0.02–8.59)
2014	0	0.58	0.00 (0.00–6.36)
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)
FORBES HOSPITAL (11265)			
2015	0	0.65	0.00 (0.00–5.62)
2014	0	0.67	0.00 (0.00–5.51)
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)
SAINT VINCENT HOSPITAL (11699)			
2015	0	0.70	0.00 (0.00–5.21)
2014	1	0.89	1.12 (0.01–6.24)
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)
REGIONAL HOSPITAL OF SCRANTON (12533)			
2015	0	0.71	0.00 (0.00–5.20)
2014	0	0.83	0.00 (0.00–4.41)
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)
READING HOSPITAL (12375)			
2015	1	0.72	1.40 (0.02–7.77)
2014	0	0.56	0.00 (0.00–6.57)
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 HAMOT (11725)			
2015	0	0.74	0.00 (0.00–4.99)
2014	0	0.97	0.00 (0.00–3.78)
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)
UPMC PASSAVANT (11242)			
2015	0	0.76	0.00 (0.00–4.83)
2014	1	0.84	1.19 (0.02–6.60)
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)

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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 ALTOONA (10178)			
2015	3	0.76	3.94 (0.79–11.50)
2014	0	0.54	0.00 (0.00–6.76)
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)
THOMAS JEFFERSON UNIVERSITY HOSPITAL (11506)			
2015	1	0.79	1.27 (0.02–7.07)
2014	0	0.88	0.00 (0.00–4.16)
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)
BUTLER MEMORIAL HOSPITAL (11736)			
2015	0	0.82	0.00 (0.00–4.45)
2014	0	0.93	0.00 (0.00–3.96)
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)
ABINGTON MEMORIAL HOSPITAL (11838)			
2015	2	0.90	2.22 (0.25–8.02)
2014	1	0.91	1.09 (0.01–6.09)
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)			
2015	4	0.94	4.26 (1.15–10.91)
2014	5	1.53	3.27 (1.06–7.64)
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)
ST. MARY MEDICAL CENTER (11885)			
2015	0	0.94	0.00 (0.00–3.90)
2014	0	0.73	0.00 (0.00–5.05)
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)
JEFFERSON HOSPITAL (10237)			
2015	0	1.03	0.00 (0.00–3.56)
2014	0	1.04	0.00 (0.00–3.53)
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)

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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)
ST. LUKES HOSPITAL BETHLEHEM (11718)			
2015	0	1.05	0.00 (0.00–3.50)
2014	0	0.97	0.00 (0.00–3.79)
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)
LANCASTER GENERAL HOSPITAL (10183)			
2015	1	1.15	0.87 (0.01–4.82)
2014	2	1.10	1.82 (0.20–6.58)
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)
TEMPLE UNIVERSITY HOSPITAL (12382)			
2015	0	1.36	0.00 (0.00–2.70)
2014	1	1.66	0.60 (0.01–3.35)
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)			
2015	1	1.55	0.64 (0.01–3.58)
2014	1	1.52	0.66 (0.01–3.66)
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)
GEISINGER MEDICAL CENTER (11775)			
2015	0	1.89	0.00 (0.00–1.94)
2014	2	2.13	0.94 (0.11–3.38)
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)
MILTON S HERSHEY MEDICAL CENTER (11747)			
2015	4	2.01	1.99 (0.53–5.08)
2014	6	2.39	2.51 (0.92–5.46)
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)			
2015	4	2.21	1.81 (0.49–4.63)
2014	0	1.69	0.00 (0.00–2.17)
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)

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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)
LEHIGH VALLEY HOSPITAL (11884)			
2015	1	2.24	0.45 (0.01–2.49)
2014	0	2.31	0.00 (0.00–1.59)
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)
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)			
2015	5	2.34	2.14 (0.69–4.99)
2014	3	1.79	1.68 (0.34–4.90)
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)
PENN PRESBYTERIAN MEDICAL CENTER (11814)			
2015	2	2.39	0.84 (0.09–3.03)
2014	4	2.67	1.50 (0.40–3.84)
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)
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)			
2015	6	2.54	2.36 (0.86–5.13)
2014	9	2.33	3.86 (1.76–7.33)
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)
PINNACLE HEALTH HOSPITALS - HARRISBURG HOSPITAL (34068)			
2015	0	2.59	0.00 (0.00–1.42)
2014	0	2.53	0.00 (0.00–1.45)
2013	.	.	.
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
UPMC PRESBYTERIAN SHADYSIDE (10348)			
2015	5	2.76	1.81 (0.58–4.23)
2014	8	3.28	2.44 (1.05–4.81)
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)
UPMC PRESBYTERIAN SHADYSIDE - SHADYSIDE (10118)			
2015	3	2.96	1.01 (0.20–2.96)
2014	1	3.15	0.32 (0.00–1.77)
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 UNIVERSITY OF PENNSYLVANIA (10219)			
2015	4	5.38	0.74 (0.20–1.90)
2014	4	5.68	0.70 (0.19–1.80)
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 (Ordered by Predicted Infections) — Pennsylvania, 2009–2015

	Number of SSIs (CBGB)	Predicted Number of SSIs (CBGB)	SIR (95% CI)
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)			
2015	.	.	.
2014	.	.	.
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)			
2015	.	.	.
2014	.	.	.
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)
MAIN LINE HOSPITAL BRYN MAWR (11753)			
2015	0	0.02	0.00 (0.00–212.06)
2014	1	0.46	2.18 (0.03–12.13)
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)
MERCY FITZGERALD HOSPITAL (11683)			
2015	0	0.46	0.00 (0.00–8.05)
2014	1	0.35	2.82 (0.04–15.68)
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)
SHARON REGIONAL HEALTH SYSTEM (12250)			
2015	2	0.46	4.32 (0.49–15.60)
2014	1	0.33	3.05 (0.04–16.97)
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)
PINNACLE HEALTH HOSPITALS - WEST SHORE HOSPITAL (35123)			
2015	0	0.65	0.00 (0.00–5.66)
2014	.	.	.
2013	.	.	.
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.

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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)
HAHNEMANN UNIVERSITY HOSPITAL (11437)			
2015	0	0.66	0.00 (0.00–5.52)
2014	1	0.45	2.21 (0.03–12.28)
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)
LANCASTER REGIONAL MEDICAL CENTER (12335)			
2015	0	0.68	0.00 (0.00–5.43)
2014	0	0.98	0.00 (0.00–3.76)
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)
HOLY SPIRIT HOSPITAL (12387)			
2015	0	0.68	0.00 (0.00–5.43)
2014	0	0.32	0.00 (0.00–11.47)
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)
GOOD SAMARITAN HOSPITAL, THE (11712)			
2015	0	0.82	0.00 (0.00–4.49)
2014	1	1.76	0.57 (0.01–3.16)
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)
MAIN LINE HOSPITAL - PAOLI (11750)			
2015	1	0.84	1.20 (0.02–6.65)
2014	1	0.54	1.85 (0.02–10.31)
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)
LEHIGH VALLEY HOSPITAL - MUHLENBERG (11898)			
2015	0	0.95	0.00 (0.00–3.88)
2014	0	1.04	0.00 (0.00–3.53)
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)
BRANDYWINE HOSPITAL (11979)			
2015	5	0.98	5.11 (1.65–11.93)
2014	4	0.69	5.82 (1.57–14.90)
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)

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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)
EINSTEIN MEDICAL CENTER MONTGOMERY (30210)			
2015	2	0.98	2.04 (0.23–7.38)
2014	4	0.81	4.91 (1.32–12.57)
2013	2	1.22	1.64 (0.18–5.91)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)			
2015	2	1.00	2.00 (0.22–7.21)
2014	0	0.87	0.00 (0.00–4.24)
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)
WASHINGTON HOSPITAL, THE (11460)			
2015	1	1.14	0.87 (0.01–4.86)
2014	0	1.21	0.00 (0.00–3.03)
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)
JEANES HOSPITAL (11459)			
2015	0	1.21	0.00 (0.00–3.03)
2014	0	1.06	0.00 (0.00–3.47)
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)
CROZER CHESTER MEDICAL CENTER (11839)			
2015	0	1.21	0.00 (0.00–3.02)
2014	1	0.70	1.42 (0.02–7.91)
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)
EASTON HOSPITAL (11929)			
2015	2	1.24	1.61 (0.18–5.83)
2014	1	1.42	0.70 (0.01–3.91)
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)
ST. JOSEPH MEDICAL CTR (11961)			
2015	3	1.32	2.28 (0.46–6.65)
2014	2	1.36	1.47 (0.17–5.30)
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)

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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)
PENN HIGHLANDS DUBOIS (11606)			
2015	3	1.45	2.07 (0.42–6.05)
2014	0	1.40	0.00 (0.00–2.62)
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)
DOYLESTOWN HOSPITAL (10190)			
2015	1	1.46	0.68 (0.01–3.81)
2014	1	1.29	0.77 (0.01–4.31)
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)
ST. CLAIR MEMORIAL HOSPITAL (10561)			
2015	0	1.50	0.00 (0.00–2.45)
2014	0	1.28	0.00 (0.00–2.86)
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)
ALBERT EINSTEIN MEDICAL CENTER (10585)			
2015	2	1.56	1.28 (0.14–4.64)
2014	1	1.30	0.77 (0.01–4.29)
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)
ROBERT PACKER HOSPITAL (12422)			
2015	2	1.64	1.22 (0.14–4.42)
2014	3	1.43	2.10 (0.42–6.13)
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)
UPMC ALTOONA (10178)			
2015	6	1.68	3.58 (1.31–7.79)
2014	3	1.47	2.04 (0.41–5.96)
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)
PENNSYLVANIA HOSPITAL OF THE UNIVERSITY OF PA HEALTH SYS (11448)			
2015	0	1.73	0.00 (0.00–2.12)
2014	1	0.82	1.22 (0.02–6.79)
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)

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

	Number of SSIs (CBGB)	Predicted Number of SSIs (CBGB)	SIR (95% CI)
GEISINGER-COMMUNITY MEDICAL CENTER (11914)			
2015	4	1.78	2.24 (0.60–5.75)
2014	5	1.99	2.51 (0.81–5.86)
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)
WEST PENN HOSPITAL (11864)			
2015	5	1.83	2.73 (0.88–6.37)
2014	0	1.15	0.00 (0.00–3.20)
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)
UPMC MERCY (10384)			
2015	0	1.87	0.00 (0.00–1.96)
2014	0	1.74	0.00 (0.00–2.11)
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)
REGIONAL HOSPITAL OF SCRANTON (12533)			
2015	1	1.89	0.53 (0.01–2.95)
2014	1	1.69	0.59 (0.01–3.29)
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)
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)			
2015	0	1.96	0.00 (0.00–1.87)
2014	4	2.13	1.88 (0.51–4.82)
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)
CHESTER COUNTY HOSPITAL (12016)			
2015	2	1.98	1.01 (0.11–3.65)
2014	0	1.14	0.00 (0.00–3.21)
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)
WILKES-BARRE GENERAL HOSPITAL (11916)			
2015	3	2.02	1.49 (0.30–4.35)
2014	3	1.74	1.73 (0.35–5.05)
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)

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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)
FORBES HOSPITAL (11265)			
2015	4	2.12	1.89 (0.51–4.83)
2014	2	1.55	1.29 (0.14–4.66)
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)
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)			
2015	1	2.14	0.47 (0.01–2.60)
2014	1	1.63	0.61 (0.01–3.41)
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)
THOMAS JEFFERSON UNIVERSITY HOSPITAL (11506)			
2015	2	2.14	0.93 (0.10–3.38)
2014	3	2.01	1.49 (0.30–4.35)
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)
ARIA HEALTH (11388)			
2015	2	2.17	0.92 (0.10–3.32)
2014	0	1.33	0.00 (0.00–2.76)
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)
READING HOSPITAL (12375)			
2015	2	2.42	0.83 (0.09–2.98)
2014	3	2.69	1.12 (0.22–3.26)
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)
HERITAGE VALLEY BEAVER (11831)			
2015	0	2.43	0.00 (0.00–1.51)
2014	2	2.12	0.94 (0.11–3.40)
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)
ABINGTON MEMORIAL HOSPITAL (11838)			
2015	2	2.44	0.82 (0.09–2.96)
2014	2	1.90	1.05 (0.12–3.81)
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)

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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)
POCONO MEDICAL CENTER (11772)			
2015	2	2.67	0.75 (0.08–2.70)
2014	3	1.37	2.19 (0.44–6.40)
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)
CONEMAUGH MEMORIAL MEDICAL CENTER (10280)			
2015	0	2.72	0.00 (0.00–1.35)
2014	2	1.77	1.13 (0.13–4.08)
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. MARY MEDICAL CENTER (11885)			
2015	6	2.79	2.15 (0.78–4.67)
2014	2	2.08	0.96 (0.11–3.48)
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)
UPMC PASSAVANT (11242)			
2015	4	2.90	1.38 (0.37–3.54)
2014	2	2.73	0.73 (0.08–2.64)
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)
ST. LUKES HOSPITAL BETHLEHEM (11718)			
2015	0	3.07	0.00 (0.00–1.20)
2014	0	2.32	0.00 (0.00–1.58)
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)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)			
2015	2	3.48	0.57 (0.06–2.07)
2014	5	1.32	3.80 (1.22–8.87)
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)
TEMPLE UNIVERSITY HOSPITAL (12382)			
2015	3	3.48	0.86 (0.17–2.52)
2014	2	2.21	0.90 (0.10–3.27)
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)

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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)
UPMC PRESBYTERIAN SHADYSIDE (10348)			
2015	0	3.59	0.00 (0.00–1.02)
2014	2	3.87	0.52 (0.06–1.86)
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)
GEISINGER MEDICAL CENTER (11775)			
2015	3	3.67	0.82 (0.16–2.39)
2014	4	4.06	0.99 (0.27–2.52)
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)
MILTON S HERSHEY MEDICAL CENTER (11747)			
2015	1	3.79	0.26 (0.00–1.47)
2014	1	3.11	0.32 (0.00–1.79)
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)
UPMC HAMOT (11725)			
2015	5	3.84	1.30 (0.42–3.04)
2014	2	3.01	0.66 (0.07–2.40)
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)
SAINT VINCENT HOSPITAL (11699)			
2015	1	3.91	0.26 (0.00–1.42)
2014	1	3.49	0.29 (0.00–1.60)
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)
BUTLER MEMORIAL HOSPITAL (11736)			
2015	0	3.95	0.00 (0.00–0.93)
2014	2	3.36	0.59 (0.07–2.15)
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)
PENN PRESBYTERIAN MEDICAL CENTER (11814)			
2015	6	4.05	1.48 (0.54–3.23)
2014	11	3.04	3.61 (1.80–6.47)
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)

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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)
ALLEGHENY GENERAL HOSPITAL (10648)			
2015	9	4.46	2.02 (0.92–3.83)
2014	4	2.78	1.44 (0.39–3.69)
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)
HOSPITAL OF THE UNIVERSITY OF PENNSYLVANIA (10219)			
2015	6	4.68	1.28 (0.47–2.79)
2014	5	4.33	1.16 (0.37–2.70)
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)
YORK HOSPITAL (10108)			
2015	5	4.73	1.06 (0.34–2.47)
2014	4	2.64	1.51 (0.41–3.88)
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)
PINNACLE HEALTH HOSPITALS - HARRISBURG HOSPITAL (34068)			
2015	5	4.75	1.05 (0.34–2.46)
2014	0	3.06	0.00 (0.00–1.20)
2013	.	.	.
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)			
2015	9	5.00	1.80 (0.82–3.41)
2014	0	3.42	0.00 (0.00–1.07)
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)
JEFFERSON HOSPITAL (10237)			
2015	2	5.62	0.36 (0.04–1.29)
2014	1	3.77	0.26 (0.00–1.47)
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)
LANCASTER GENERAL HOSPITAL (10183)			
2015	7	6.51	1.08 (0.43–2.22)
2014	9	4.73	1.90 (0.87–3.61)
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)

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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)
LEHIGH VALLEY HOSPITAL (11884)			
2015	7	6.55	1.07 (0.43–2.20)
2014	3	4.64	0.65 (0.13–1.89)
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)
UPMC PRESBYTERIAN SHADYSIDE - SHADYSIDE (10118)			
2015	10	7.31	1.37 (0.66–2.52)
2014	3	5.74	0.52 (0.11–1.53)
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 (Ordered by Predicted Infections)— Pennsylvania, 2009–2015

	Number of SSIs (CBGC)	Predicted Number of SSIs (CBGC)	SIR (95% CI)
JEFFERSON HOSPITAL (10237)			
2015	.	.	.
2014	0	0.01	0.00 (0.00–267.47)
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)
CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)			
2015	.	.	.
2014	0	0.01	0.00 (0.00–534.93)
2013	.	.	.
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)			
2015	.	.	.
2014	.	.	.
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)
MAIN LINE HOSPITAL BRYN MAWR (11753)			
2015	.	.	.
2014	0	0.03	0.00 (0.00–133.73)
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)			
2015	.	.	.
2014	.	.	.
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)
LEHIGH VALLEY HOSPITAL - MUHLENBERG (11898)			
2015	0	0.02	0.00 (0.00–205.41)
2014	0	0.03	0.00 (0.00–117.32)
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)

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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)			
2015	0	0.02	0.00 (0.00–205.41)
2014	0	0.01	0.00 (0.00–534.93)
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)
ST. CLAIR MEMORIAL HOSPITAL (10561)			
2015	0	0.04	0.00 (0.00–102.71)
2014	0	0.03	0.00 (0.00–133.73)
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)
PINNACLE HEALTH HOSPITALS - WEST SHORE HOSPITAL (35123)			
2015	0	0.04	0.00 (0.00–102.71)
2014	.	.	.
2013	.	.	.
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
PENN HIGHLANDS DUBOIS (11606)			
2015	0	0.04	0.00 (0.00–90.52)
2014	0	0.03	0.00 (0.00–106.99)
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)
MAIN LINE HOSPITAL - PAOLI (11750)			
2015	0	0.04	0.00 (0.00–90.52)
2014	0	0.01	0.00 (0.00–342.97)
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)
BRANDYWINE HOSPITAL (11979)			
2015	0	0.04	0.00 (0.00–90.52)
2014	1	0.02	48.61 (0.64–270.47)
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)
EASTON HOSPITAL (11929)			
2015	0	0.05	0.00 (0.00–80.92)
2014	0	0.02	0.00 (0.00–208.98)
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	.	.	.

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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)
JEANES HOSPITAL (11459)			
2015	0	0.05	0.00 (0.00–68.47)
2014	0	0.03	0.00 (0.00–117.32)
2013	0	0.07	0.00 (0.00–50.21)
2012	0	0.03	0.00 (0.00–138.26)
2011	0	0.03	0.00 (0.00–138.26)
2010	0	0.03	0.00 (0.00–138.26)
2009	0	0.05	0.00 (0.00–67.17)
CHESTER COUNTY HOSPITAL (12016)			
2015	0	0.05	0.00 (0.00–68.47)
2014	0	0.01	0.00 (0.00–267.47)
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)
HAHNEMANN UNIVERSITY HOSPITAL (11437)			
2015	0	0.06	0.00 (0.00–62.83)
2014	0	0.02	0.00 (0.00–208.98)
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)
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)			
2015	0	0.06	0.00 (0.00–58.05)
2014	0	0.03	0.00 (0.00–117.32)
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)
PENNSYLVANIA HOSPITAL OF THE UNIVERSITY OF PA HEALTH SYS (11448)			
2015	1	0.07	14.71 (0.19–81.83)
2014	1	0.08	11.92 (0.16–66.30)
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)
SAINT VINCENT HOSPITAL (11699)			
2015	0	0.07	0.00 (0.00–53.95)
2014	0	0.06	0.00 (0.00–65.88)
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)
GEISINGER-COMMUNITY MEDICAL CENTER (11914)			
2015	0	0.08	0.00 (0.00–48.11)
2014	0	0.05	0.00 (0.00–70.76)
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)

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

	Number of SSIs (CBGC)	Predicted Number of SSIs (CBGC)	SIR (95% CI)
UPMC MERCY (10384)			
2015	0	0.09	0.00 (0.00–42.73)
2014	0	0.06	0.00 (0.00–61.63)
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)
WEST PENN HOSPITAL (11864)			
2015	0	0.10	0.00 (0.00–37.09)
2014	1	0.21	4.80 (0.06–26.73)
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)
MILTON S HERSHEY MEDICAL CENTER (11747)			
2015	0	0.11	0.00 (0.00–32.77)
2014	0	0.11	0.00 (0.00–32.30)
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)
LANCASTER REGIONAL MEDICAL CENTER (12335)			
2015	2	0.11	17.87 (2.01–64.50)
2014	0	0.06	0.00 (0.00–64.93)
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)
POCONO MEDICAL CENTER (11772)			
2015	0	0.12	0.00 (0.00–29.34)
2014	0	0.03	0.00 (0.00–106.99)
2013	0	0.18	0.00 (0.00–20.84)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
MERCY FITZGERALD HOSPITAL (11683)			
2015	0	0.13	0.00 (0.00–28.26)
2014	0	0.09	0.00 (0.00–42.19)
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)

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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)			
2015	0	0.13	0.00 (0.00–28.26)
2014	0	0.08	0.00 (0.00–48.11)
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)
ROBERT PACKER HOSPITAL (12422)			
2015	0	0.13	0.00 (0.00–28.26)
2014	1	0.06	17.96 (0.23–99.93)
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)
ST. JOSEPH MEDICAL CTR (11961)			
2015	0	0.14	0.00 (0.00–26.31)
2014	1	0.06	17.96 (0.23–99.93)
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 PASSAVANT (11242)			
2015	1	0.16	6.30 (0.08–35.07)
2014	1	0.18	5.70 (0.07–31.70)
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)
THOMAS JEFFERSON UNIVERSITY HOSPITAL (11506)			
2015	1	0.16	6.17 (0.08–34.33)
2014	0	0.05	0.00 (0.00–69.66)
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)
WASHINGTON HOSPITAL, THE (11460)			
2015	0	0.17	0.00 (0.00–22.16)
2014	0	0.01	0.00 (0.00–267.47)
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)
BUTLER MEMORIAL HOSPITAL (11736)			
2015	0	0.21	0.00 (0.00–17.80)
2014	0	0.05	0.00 (0.00–76.42)
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)
ST. LUKES HOSPITAL BETHLEHEM (11718)			
2015	0	0.21	0.00 (0.00–17.12)
2014	0	0.07	0.00 (0.00–55.27)
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)			
2015	1	0.21	4.67 (0.06–25.96)
2014	0	0.15	0.00 (0.00–24.67)
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)
REGIONAL HOSPITAL OF SCRANTON (12533)			
2015	0	0.21	0.00 (0.00–17.12)
2014	0	0.04	0.00 (0.00–89.16)
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)
UPMC ALTOONA (10178)			
2015	0	0.25	0.00 (0.00–14.40)
2014	0	0.06	0.00 (0.00–61.63)
2013	0	0.01	0.00 (0.00–341.95)
2012	1	0.02	52.43 (0.69–291.71)
2011	0	0.01	0.00 (0.00–266.30)
2010	0	0.01	0.00 (0.00–266.30)
2009	0	0.01	0.00 (0.00–266.30)
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)			
2015	0	0.26	0.00 (0.00–14.13)
2014	0	0.04	0.00 (0.00–81.55)
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)
CONEMAUGH MEMORIAL MEDICAL CENTER (10280)			
2015	0	0.27	0.00 (0.00–13.69)
2014	0	0.13	0.00 (0.00–27.18)
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)
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)			
2015	0	0.27	0.00 (0.00–13.69)
2014	0	0.05	0.00 (0.00–66.87)
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)
ARIA HEALTH (11388)			
2015	1	0.29	3.50 (0.05–19.47)
2014	0	0.08	0.00 (0.00–44.58)
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)
WILKES-BARRE GENERAL HOSPITAL (11916)			
2015	0	0.29	0.00 (0.00–12.81)
2014	0	0.08	0.00 (0.00–48.63)
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)
UPMC HAMOT (11725)			
2015	0	0.29	0.00 (0.00–12.78)
2014	0	0.04	0.00 (0.00–81.55)
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)
HERITAGE VALLEY BEAVER (11831)			
2015	0	0.30	0.00 (0.00–12.42)
2014	0	0.12	0.00 (0.00–31.03)
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)
ST. MARY MEDICAL CENTER (11885)			
2015	0	0.30	0.00 (0.00–12.22)
2014	0	0.11	0.00 (0.00–33.43)
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)
DOYLESTOWN HOSPITAL (10190)			
2015	0	0.32	0.00 (0.00–11.54)
2014	0	0.03	0.00 (0.00–106.99)
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)

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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)
ABINGTON MEMORIAL HOSPITAL (11838)			
2015	0	0.33	0.00 (0.00–11.24)
2014	0	0.10	0.00 (0.00–35.38)
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)
UPMC PRESBYTERIAN SHADYSIDE (10348)			
2015	1	0.35	2.84 (0.04–15.82)
2014	0	0.31	0.00 (0.00–11.98)
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 UNIVERSITY OF PENNSYLVANIA (10219)			
2015	0	0.36	0.00 (0.00–10.25)
2014	0	0.20	0.00 (0.00–18.42)
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)
FORBES HOSPITAL (11265)			
2015	0	0.38	0.00 (0.00–9.54)
2014	0	0.06	0.00 (0.00–62.49)
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)
EINSTEIN MEDICAL CENTER MONTGOMERY (30210)			
2015	0	0.41	0.00 (0.00–9.01)
2014	0	0.28	0.00 (0.00–13.33)
2013	0	0.04	0.00 (0.00–85.49)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
GEISINGER MEDICAL CENTER (11775)			
2015	0	0.42	0.00 (0.00–8.70)
2014	0	0.16	0.00 (0.00–22.90)
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)
PENN PRESBYTERIAN MEDICAL CENTER (11814)			
2015	0	0.42	0.00 (0.00–8.70)
2014	0	0.16	0.00 (0.00–23.02)
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)

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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)
LANCASTER GENERAL HOSPITAL (10183)			
2015	0	0.50	0.00 (0.00–7.37)
2014	0	0.26	0.00 (0.00–14.11)
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)
GOOD SAMARITAN HOSPITAL, THE (11712)			
2015	0	0.54	0.00 (0.00–6.86)
2014	0	0.02	0.00 (0.00–171.48)
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)
ALLEGHENY GENERAL HOSPITAL (10648)			
2015	1	0.61	1.63 (0.02–9.07)
2014	1	0.31	3.22 (0.04–17.94)
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)
LEHIGH VALLEY HOSPITAL (11884)			
2015	3	0.68	4.38 (0.88–12.80)
2014	0	0.25	0.00 (0.00–14.76)
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)
ALBERT EINSTEIN MEDICAL CENTER (10585)			
2015	0	0.71	0.00 (0.00–5.14)
2014	0	0.20	0.00 (0.00–18.73)
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)
PINNACLE HEALTH HOSPITALS - HARRISBURG HOSPITAL (34068)			
2015	1	0.79	1.26 (0.02–7.03)
2014	0	0.38	0.00 (0.00–9.70)
2013	.	.	.
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
UPMC PRESBYTERIAN SHADYSIDE - SHADYSIDE (10118)			
2015	3	0.86	3.47 (0.70–10.14)
2014	0	0.34	0.00 (0.00–10.73)
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)
READING HOSPITAL (12375)			
2015	2	0.94	2.13 (0.24–7.69)
2014	0	0.24	0.00 (0.00–15.13)
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)
HOLY SPIRIT HOSPITAL (12387)			
2015	0	1.11	0.00 (0.00–3.31)
2014	1	0.79	1.27 (0.02–7.09)
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)
YORK HOSPITAL (10108)			
2015	1	1.52	0.66 (0.01–3.65)
2014	0	0.68	0.00 (0.00–5.40)
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 LANKENAU MEDICAL CENTER (11770)			
2015	0	2.12	0.00 (0.00–1.73)
2014	0	0.74	0.00 (0.00–4.95)
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)

Table 4.5.11: Rate (SIR) of Surgical Site Infections (SSIs) Associated with Knee Arthroplasty (KPRO) by Hospital (Ordered by Predicted Infections) — Pennsylvania, 2009–2015

	Number of SSIs (KPRO)	Predicted Number of SSIs (KPRO)	SIR (95% CI)
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)			
2015	.	.	.
2014	0	0.02	0.00 (0.00–239.67)
2013	.	.	.
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
EXCELA HEALTH FRICK HOSPITAL (11639)			
2015	.	.	.
2014	.	.	.
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)
WAYNESBORO HOSPITAL (11642)			
2015	.	.	.
2014	.	.	.
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)
TYLER MEMORIAL HOSPITAL (11829)			
2015	.	.	.
2014	0	0.01	0.00 (0.00–586.92)
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)
BARIX CLINICS OF PENNSYLVANIA (12037)			
2015	.	.	.
2014	.	.	.
2013	0	0.01	0.00 (0.00–535.44)
2012	0	0.05	0.00 (0.00–75.29)
2011	.	.	.
2010	.	.	.
2009	.	.	.
LOCK HAVEN HOSPITAL (12097)			
2015	.	.	.
2014	.	.	.
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	.	.	.

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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)
SUNBURY COMMUNITY HOSP (12105)			
2015	.	.	.
2014	0	0.03	0.00 (0.00–119.43)
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)
SHRINERS HOSPITALS FOR CHILDREN - PHILA (12244)			
2015	.	.	.
2014	.	.	.
2013	.	.	.
2012	.	.	.
2011	0	0.02	0.00 (0.00–212.80)
2010	.	.	.
2009	.	.	.
EASTERN REGIONAL MEDICAL CENTER (12348)			
2015	.	.	.
2014	0	0.02	0.00 (0.00–239.67)
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)			
2015	.	.	.
2014	.	.	.
2013	.	.	.
2012	.	.	.
2011	0	0.06	0.00 (0.00–60.86)
2010	0	0.03	0.00 (0.00–117.96)
2009	.	.	.
PENN HIGHLANDS BROOKVILLE (12418)			
2015	.	.	.
2014	.	.	.
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)
ST. JOSEPHS HOSPITAL (12438)			
2015	.	.	.
2014	1	0.02	46.39 (0.61–258.13)
2013	0	0.03	0.00 (0.00–125.99)
2012	0	0.02	0.00 (0.00–171.12)
2011	.	.	.
2010	.	.	.
2009	.	.	.
CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)			
2015	0	0.02	0.00 (0.00–207.90)
2014	0	0.03	0.00 (0.00–131.93)
2013	.	.	.
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.

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

	Number of SSIs (KPRO)	Predicted Number of SSIs (KPRO)	SIR (95% CI)
GUTHRIE TOWANDA MEMORIAL HOSPITAL (12549)			
2015	0	0.02	0.00 (0.00–153.61)
2014	.	.	.
2013	.	.	.
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
HIGHLANDS HOSPITAL (11902)			
2015	0	0.03	0.00 (0.00–131.79)
2014	0	0.02	0.00 (0.00–149.31)
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)
SOUTHWEST REGIONAL MEDICAL CENTER (11942)			
2015	0	0.03	0.00 (0.00–121.21)
2014	0	0.09	0.00 (0.00–42.18)
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)
CONEMAUGH MINERS MEDICAL CENTER (12295)			
2015	0	0.04	0.00 (0.00–103.95)
2014	0	0.07	0.00 (0.00–49.76)
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)
CROZER CHESTER MEDICAL CENTER (11839)			
2015	0	0.04	0.00 (0.00–100.91)
2014	0	0.07	0.00 (0.00–53.24)
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)
HOSPITAL OF THE UNIVERSITY OF PENNSYLVANIA (10219)			
2015	1	0.07	13.96 (0.18–77.66)
2014	0	0.03	0.00 (0.00–109.43)
2013	0	0.02	0.00 (0.00–171.34)
2012	0	0.04	0.00 (0.00–85.56)
2011	.	.	.
2010	.	.	.
2009	.	.	.
CORRY MEMORIAL HOSPITAL (12283)			
2015	0	0.07	0.00 (0.00–49.22)
2014	0	0.10	0.00 (0.00–38.24)
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	.	.	.

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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)
MEMORIAL HOSPITAL (11633)			
2015	0	0.08	0.00 (0.00–48.52)
2014	1	0.20	5.07 (0.07–28.21)
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)
KANE COMMUNITY HOSPITAL (12111)			
2015	0	0.08	0.00 (0.00–45.42)
2014	0	0.08	0.00 (0.00–44.26)
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)
UPMC PRESBYTERIAN SHADYSIDE (10348)			
2015	0	0.09	0.00 (0.00–41.08)
2014	0	0.16	0.00 (0.00–23.21)
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)
JENNERSVILLE REGIONAL HOSPITAL (12337)			
2015	0	0.10	0.00 (0.00–36.88)
2014	0	0.17	0.00 (0.00–22.12)
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)
TITUSVILLE AREA HOSPITAL (11738)			
2015	1	0.10	9.60 (0.13–53.41)
2014	.	.	.
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)
HEART OF LANCASTER REGIONAL MEDICAL CENTER (12571)			
2015	0	0.10	0.00 (0.00–35.06)
2014	0	0.26	0.00 (0.00–14.29)
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)
ST. LUKES HOSPITAL- ANDERSON CAMPUS (21487)			
2015	0	0.11	0.00 (0.00–33.92)
2014	0	0.06	0.00 (0.00–57.31)
2013	0	0.06	0.00 (0.00–63.93)
2012	0	0.07	0.00 (0.00–50.93)
2011	.	.	.
2010	.	.	.
2009	.	.	.

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

	Number of SSIs (KPRO)	Predicted Number of SSIs (KPRO)	SIR (95% CI)
JERSEY SHORE HOSPITAL (11689)			
2015	0	0.11	0.00 (0.00–32.68)
2014	0	0.07	0.00 (0.00–50.36)
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)
J C BLAIR MEMORIAL HOSPITAL (11724)			
2015	0	0.12	0.00 (0.00–31.16)
2014	1	0.16	6.35 (0.08–35.34)
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	.	.	.
UPMC BEDFORD (11680)			
2015	0	0.12	0.00 (0.00–31.16)
2014	0	0.11	0.00 (0.00–34.91)
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)
PUNXSUTAWNEY AREA HOSPITAL (11830)			
2015	1	0.12	8.15 (0.11–45.33)
2014	0	0.12	0.00 (0.00–30.70)
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)
ALBERT EINSTEIN MEDICAL CENTER (10585)			
2015	0	0.12	0.00 (0.00–29.85)
2014	0	0.38	0.00 (0.00–9.60)
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)
WINDBER HOSPITAL (12031)			
2015	0	0.14	0.00 (0.00–25.96)
2014	0	0.13	0.00 (0.00–28.99)
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)			
2015	2	0.16	12.77 (1.43–46.10)
2014	0	0.23	0.00 (0.00–15.88)
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)

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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)
CLARION HOSPITAL (11654)			
2015	1	0.16	6.29 (0.08–35.01)
2014	2	0.26	7.70 (0.86–27.79)
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)
LOWER BUCKS HOSPITAL (12390)			
2015	0	0.17	0.00 (0.00–21.03)
2014	0	0.10	0.00 (0.00–38.50)
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)
ST. LUKES QUAKERTOWN HOSPITAL (11711)			
2015	1	0.20	5.11 (0.07–28.45)
2014	0	0.12	0.00 (0.00–31.49)
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)
MERCY PHILADELPHIA HOSPITAL (11946)			
2015	0	0.20	0.00 (0.00–18.71)
2014	0	0.17	0.00 (0.00–21.91)
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)
GEISINGER-BLOOMSBURG HOSPITAL (12008)			
2015	0	0.21	0.00 (0.00–17.64)
2014	0	0.33	0.00 (0.00–11.11)
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)
PALMERTON HOSPITAL (12396)			
2015	0	0.22	0.00 (0.00–17.04)
2014	0	0.29	0.00 (0.00–12.56)
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)
MERCY FITZGERALD HOSPITAL (11683)			
2015	0	0.25	0.00 (0.00–14.42)
2014	0	0.16	0.00 (0.00–23.06)
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)
MERCY SUBURBAN HOSPITAL (11952)			
2015	0	0.27	0.00 (0.00–13.76)
2014	0	0.27	0.00 (0.00–13.77)
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)
ROXBOROUGH MEMORIAL HOSPITAL (11978)			
2015	0	0.27	0.00 (0.00–13.63)
2014	0	0.21	0.00 (0.00–17.55)
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)
GROVE CITY MEDICAL CENTER (11722)			
2015	0	0.28	0.00 (0.00–13.16)
2014	1	0.43	2.31 (0.03–12.87)
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)
GNADEN HUETTEN MEMORIAL HOSPITAL (12241)			
2015	0	0.30	0.00 (0.00–12.07)
2014	0	0.39	0.00 (0.00–9.44)
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)
PENN HIGHLANDS ELK (11859)			
2015	0	0.31	0.00 (0.00–11.82)
2014	1	0.40	2.49 (0.03–13.84)
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)
PENN HIGHLANDS CLEARFIELD (11843)			
2015	0	0.31	0.00 (0.00–11.81)
2014	0	0.36	0.00 (0.00–10.20)
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)
THOMAS JEFFERSON UNIVERSITY HOSPITAL - METHODIST (12017)			
2015	1	0.34	2.94 (0.04–16.35)
2014	1	0.31	3.25 (0.04–18.10)
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)

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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 MCKEESPORT (11707)			
2015	1	0.35	2.85 (0.04–15.86)
2014	1	0.49	2.02 (0.03–11.24)
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)
BRANDYWINE HOSPITAL (11979)			
2015	0	0.36	0.00 (0.00–10.31)
2014	1	0.41	2.45 (0.03–13.63)
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)
SOLDIERS AND SAILORS MEMORIAL HOSPITAL (11688)			
2015	0	0.37	0.00 (0.00–10.04)
2014	0	0.42	0.00 (0.00–8.69)
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)
CANONSBURG HOSPITAL (11586)			
2015	0	0.37	0.00 (0.00–9.91)
2014	1	0.12	8.29 (0.11–46.10)
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)
ST. LUKES MINERS MEMORIAL HOSPITAL (11784)			
2015	1	0.39	2.56 (0.03–14.25)
2014	0	0.53	0.00 (0.00–6.89)
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)
SACRED HEART HOSPITAL (11684)			
2015	1	0.40	2.53 (0.03–14.07)
2014	0	0.40	0.00 (0.00–9.16)
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)
UPMC NORTHWEST (11837)			
2015	1	0.42	2.38 (0.03–13.24)
2014	0	0.49	0.00 (0.00–7.54)
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)

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

	Number of SSIs (KPRO)	Predicted Number of SSIs (KPRO)	SIR (95% CI)
GEISINGER-LEWISTOWN HOSPITAL (11825)			
2015	0	0.44	0.00 (0.00–8.36)
2014	0	0.78	0.00 (0.00–4.69)
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)
LEHIGH VALLEY HOSPITAL - HAZLETON (11878)			
2015	2	0.46	4.37 (0.49–15.77)
2014	0	0.40	0.00 (0.00–9.20)
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)
EDGEWOOD SURGICAL HOSPITAL (12552)			
2015	0	0.48	0.00 (0.00–7.60)
2014	0	0.41	0.00 (0.00–8.90)
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)
SCHUYLKILL MEDICAL CENTER - SOUTH JACKSON STREET (12087)			
2015	1	0.49	2.04 (0.03–11.36)
2014	0	0.32	0.00 (0.00–11.35)
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)
POCONO MEDICAL CENTER (11772)			
2015	1	0.49	2.03 (0.03–11.32)
2014	1	0.54	1.85 (0.02–10.27)
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)
SCHUYLKILL MEDICAL CENTER - EAST NORWEGIAN STREET (11922)			
2015	0	0.57	0.00 (0.00–6.48)
2014	0	0.45	0.00 (0.00–8.22)
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)
BRADFORD REGIONAL MEDICAL CENTER (12361)			
2015	1	0.60	1.66 (0.02–9.25)
2014	0	0.52	0.00 (0.00–7.10)
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)
BERWICK HOSPITAL CENTER (11442)			
2015	0	0.62	0.00 (0.00–5.96)
2014	1	0.50	1.99 (0.03–11.06)
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)
PENN HIGHLANDS DUBOIS (11606)			
2015	5	0.62	8.08 (2.60–18.85)
2014	0	0.86	0.00 (0.00–4.28)
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)
WASHINGTON HOSPITAL, THE (11460)			
2015	1	0.63	1.60 (0.02–8.90)
2014	2	0.65	3.06 (0.34–11.05)
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)
ENDLESS MOUNTAINS HEALTH SYSTEMS (11817)			
2015	1	0.63	1.58 (0.02–8.80)
2014	0	0.59	0.00 (0.00–6.17)
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)
WAYNE MEMORIAL HOSPITAL (12004)			
2015	1	0.67	1.50 (0.02–8.35)
2014	0	0.52	0.00 (0.00–7.04)
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)
CROZER CHESTER MEDICAL CENTER - TAYLOR (11932)			
2015	0	0.67	0.00 (0.00–5.47)
2014	0	0.51	0.00 (0.00–7.20)
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)
OHIO VALLEY GENERAL HOSPITAL (12298)			
2015	0	0.68	0.00 (0.00–5.40)
2014	0	0.60	0.00 (0.00–6.16)
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)

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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)
TYRONE HOSPITAL (12717)			
2015	3	0.69	4.38 (0.88–12.79)
2014	3	0.49	6.15 (1.24–17.97)
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)
CHESTNUT HILL HOSPITAL (12304)			
2015	0	0.69	0.00 (0.00–5.30)
2014	3	0.53	5.64 (1.13–16.48)
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)
SOMERSET HOSPITAL (12282)			
2015	0	0.71	0.00 (0.00–5.15)
2014	0	0.26	0.00 (0.00–14.05)
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)
MILLCREEK COMMUNITY HOSPITAL (12253)			
2015	0	0.71	0.00 (0.00–5.15)
2014	1	0.87	1.16 (0.02–6.43)
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)
ARMSTRONG COUNTY MEMORIAL HOSPITAL (12057)			
2015	0	0.73	0.00 (0.00–5.04)
2014	0	0.77	0.00 (0.00–4.76)
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)
EASTON HOSPITAL (11929)			
2015	1	0.80	1.25 (0.02–6.96)
2014	3	1.02	2.93 (0.59–8.56)
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)
JEANES HOSPITAL (11459)			
2015	1	0.81	1.24 (0.02–6.87)
2014	0	0.82	0.00 (0.00–4.48)
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)

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

	Number of SSIs (KPRO)	Predicted Number of SSIs (KPRO)	SIR (95% CI)
HAHNEMANN UNIVERSITY HOSPITAL (11437)			
2015	3	0.83	3.60 (0.72–10.51)
2014	2	0.79	2.53 (0.28–9.13)
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)
EXCELA HEALTH LATROBE HOSPITAL (11651)			
2015	2	0.84	2.39 (0.27–8.64)
2014	4	0.97	4.12 (1.11–10.55)
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)
CHARLES COLE MEMORIAL HOSPITAL (11956)			
2015	1	0.85	1.17 (0.02–6.52)
2014	0	0.84	0.00 (0.00–4.37)
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)
NASON HOSPITAL (11907)			
2015	2	0.86	2.33 (0.26–8.43)
2014	0	0.70	0.00 (0.00–5.21)
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)
CROZER CHESTER MEDICAL CENTER - SPRINGFIELD (11851)			
2015	1	0.86	1.16 (0.02–6.44)
2014	0	1.10	0.00 (0.00–3.34)
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)
LEHIGH VALLEY HOSPITAL - MUHLENBERG (11898)			
2015	1	0.87	1.15 (0.02–6.41)
2014	1	0.94	1.07 (0.01–5.93)
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)
PINNACLE HEALTH HOSPITALS - WEST SHORE HOSPITAL (35123)			
2015	2	0.91	2.19 (0.25–7.91)
2014	.	.	.
2013	.	.	.
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.

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

	Number of SSIs (KPRO)	Predicted Number of SSIs (KPRO)	SIR (95% CI)
ST. JOSEPH MEDICAL CTR (11961)			
2015	3	0.96	3.13 (0.63–9.16)
2014	3	0.68	4.44 (0.89–12.96)
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)
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)			
2015	0	0.99	0.00 (0.00–3.70)
2014	1	1.06	0.94 (0.01–5.25)
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)
YORK HOSPITAL (10108)			
2015	0	1.02	0.00 (0.00–3.58)
2014	2	0.85	2.35 (0.26–8.50)
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)			
2015	0	1.03	0.00 (0.00–3.55)
2014	0	0.90	0.00 (0.00–4.07)
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)
UPMC MERCY (10384)			
2015	1	1.03	0.97 (0.01–5.39)
2014	1	1.35	0.74 (0.01–4.13)
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)
FORBES HOSPITAL (11265)			
2015	0	1.11	0.00 (0.00–3.30)
2014	2	1.03	1.94 (0.22–7.01)
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)			
2015	1	1.12	0.89 (0.01–4.97)
2014	5	1.28	3.90 (1.26–9.11)
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)
HOLY SPIRIT HOSPITAL (12387)			
2015	2	1.14	1.75 (0.20–6.31)
2014	0	1.02	0.00 (0.00–3.59)
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)
GOOD SAMARITAN HOSPITAL, THE (11712)			
2015	0	1.20	0.00 (0.00–3.06)
2014	0	1.33	0.00 (0.00–2.76)
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)
UPMC EAST (28812)			
2015	4	1.23	3.25 (0.87–8.32)
2014	2	1.74	1.15 (0.13–4.16)
2013	1	0.80	1.25 (0.02–6.93)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
ALLEGHENY VALLEY HOSPITAL (11842)			
2015	0	1.25	0.00 (0.00–2.94)
2014	2	0.91	2.21 (0.25–7.97)
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)
LANSDALE HOSPITAL (12032)			
2015	0	1.27	0.00 (0.00–2.90)
2014	1	1.29	0.78 (0.01–4.33)
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)
WEST PENN HOSPITAL (11864)			
2015	1	1.29	0.78 (0.01–4.32)
2014	1	0.94	1.06 (0.01–5.89)
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)
HANOVER HOSPITAL (11899)			
2015	2	1.30	1.54 (0.17–5.56)
2014	3	1.19	2.53 (0.51–7.39)
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)

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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)
UNIONTOWN HOSPITAL (10441)			
2015	0	1.31	0.00 (0.00–2.80)
2014	0	1.26	0.00 (0.00–2.92)
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)
GRAND VIEW HOSPITAL (11847)			
2015	0	1.33	0.00 (0.00–2.76)
2014	1	1.42	0.70 (0.01–3.91)
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)
JAMESON MEMORIAL HOSPITAL (11954)			
2015	3	1.36	2.20 (0.44–6.44)
2014	2	1.20	1.67 (0.19–6.02)
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)
INDIANA REGIONAL MEDICAL CENTER (11759)			
2015	1	1.38	0.72 (0.01–4.03)
2014	0	1.13	0.00 (0.00–3.26)
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)
NAZARETH HOSPITAL (11919)			
2015	1	1.40	0.71 (0.01–3.97)
2014	0	1.22	0.00 (0.00–3.02)
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)
CHESTER COUNTY HOSPITAL (12016)			
2015	2	1.41	1.42 (0.16–5.13)
2014	0	1.46	0.00 (0.00–2.51)
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)
MONONGAHELA VALLEY HOSPITAL (11069)			
2015	2	1.41	1.42 (0.16–5.11)
2014	2	1.07	1.86 (0.21–6.73)
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)

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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)
EPHRATA COMMUNITY HOSPITAL (11764)			
2015	3	1.45	2.07 (0.42–6.06)
2014	1	1.55	0.64 (0.01–3.58)
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)
POTTSTOWN MEMORIAL MEDICAL CENTER (11983)			
2015	4	1.47	2.73 (0.73–6.98)
2014	1	1.30	0.77 (0.01–4.27)
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)
EINSTEIN AT ELKINS PARK (12500)			
2015	2	1.47	1.36 (0.15–4.91)
2014	9	1.63	5.52 (2.52–10.49)
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)
UPMC ALTOONA (10178)			
2015	2	1.50	1.34 (0.15–4.82)
2014	1	2.36	0.42 (0.01–2.36)
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)
SHARON REGIONAL HEALTH SYSTEM (12250)			
2015	1	1.53	0.65 (0.01–3.64)
2014	0	1.37	0.00 (0.00–2.67)
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)
LANCASTER REGIONAL MEDICAL CENTER (12335)			
2015	4	1.59	2.51 (0.67–6.42)
2014	6	1.79	3.34 (1.22–7.28)
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)
GETTYSBURG HOSPITAL (11531)			
2015	5	1.63	3.07 (0.99–7.16)
2014	2	1.55	1.29 (0.15–4.66)
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)

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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 HORIZON (11675)			
2015	4	1.65	2.42 (0.65–6.19)
2014	1	2.06	0.48 (0.01–2.70)
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)
PHYSICIANS CARE SURGICAL HOSPITAL (19630)			
2015	1	1.69	0.59 (0.01–3.29)
2014	1	1.74	0.58 (0.01–3.20)
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)			
2015	5	1.72	2.91 (0.94–6.78)
2014	2	1.55	1.29 (0.14–4.65)
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)
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)			
2015	0	1.73	0.00 (0.00–2.12)
2014	0	1.08	0.00 (0.00–3.39)
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)
EINSTEIN MEDICAL CENTER MONTGOMERY (30210)			
2015	1	1.75	0.57 (0.01–3.18)
2014	3	1.27	2.36 (0.47–6.90)
2013	4	1.45	2.75 (0.74–7.04)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
WILKES-BARRE GENERAL HOSPITAL (11916)			
2015	4	1.85	2.16 (0.58–5.54)
2014	1	1.79	0.56 (0.01–3.12)
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)
SURGICAL INSTITUTE OF READING (12535)			
2015	3	1.85	1.62 (0.33–4.74)
2014	1	1.48	0.67 (0.01–3.75)
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)
ADVANCED SURGICAL HOSPITAL (16317)			
2015	1	1.86	0.54 (0.01–2.99)
2014	1	2.08	0.48 (0.01–2.67)
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	.	.	.
WELLSPAN SURGERY AND REHABILITATION HOSPITAL (27430)			
2015	3	1.97	1.52 (0.31–4.44)
2014	2	1.68	1.19 (0.13–4.31)
2013	1	1.49	0.67 (0.01–3.73)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
DOYLESTOWN HOSPITAL (10190)			
2015	2	2.04	0.98 (0.11–3.55)
2014	2	1.86	1.07 (0.12–3.88)
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)
SAINT VINCENT HOSPITAL (11699)			
2015	1	2.05	0.49 (0.01–2.72)
2014	1	2.07	0.48 (0.01–2.69)
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)
MOSES TAYLOR HOSPITAL (11528)			
2015	4	2.06	1.94 (0.52–4.98)
2014	3	2.26	1.33 (0.27–3.87)
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)
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)			
2015	0	2.17	0.00 (0.00–1.69)
2014	1	2.27	0.44 (0.01–2.45)
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)
UPMC HAMOT (11725)			
2015	2	2.18	0.92 (0.10–3.32)
2014	5	2.98	1.68 (0.54–3.92)
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)

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

	Number of SSIs (KPRO)	Predicted Number of SSIs (KPRO)	SIR (95% CI)
GEISINGER-COMMUNITY MEDICAL CENTER (11914)			
2015	5	2.19	2.29 (0.74–5.33)
2014	2	1.56	1.28 (0.14–4.63)
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)
SURGICAL SPECIALTY CENTER AT COORDINATED HEALTH, THE (15259)			
2015	2	2.36	0.85 (0.09–3.05)
2014	2	1.68	1.19 (0.13–4.29)
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			
TEMPLE UNIVERSITY HOSPITAL (12382)			
2015	3	2.38	1.26 (0.25–3.69)
2014	0	2.32	0.00 (0.00–1.58)
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)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)			
2015	5	2.47	2.02 (0.65–4.72)
2014	4	1.94	2.07 (0.56–5.29)
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)
HOLY REDEEMER HOSPITAL (11973)			
2015	2	2.50	0.80 (0.09–2.89)
2014	2	2.42	0.82 (0.09–2.98)
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)
ROBERT PACKER HOSPITAL (12422)			
2015	0	2.50	0.00 (0.00–1.47)
2014	1	3.17	0.32 (0.00–1.76)
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)
MAIN LINE HOSPITAL - PAOLI (11750)			
2015	3	2.53	1.19 (0.24–3.47)
2014	4	2.42	1.65 (0.44–4.22)
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)

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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)
BUTLER MEMORIAL HOSPITAL (11736)			
2015	0	2.57	0.00 (0.00–1.43)
2014	0	2.53	0.00 (0.00–1.45)
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)
ROTHMAN ORTHOPAEDIC SPECIALTY HOSPITAL (15202)			
2015	0	2.58	0.00 (0.00–1.42)
2014	0	1.90	0.00 (0.00–1.93)
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			
EVANGELICAL COMMUNITY HOSPITAL (11701)			
2015	0	2.59	0.00 (0.00–1.42)
2014	5	2.30	2.17 (0.70–5.07)
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)
MEADVILLE MEDICAL CENTER (11583)			
2015	1	2.60	0.38 (0.01–2.14)
2014	0	3.10	0.00 (0.00–1.18)
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)
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)			
2015	2	2.70	0.74 (0.08–2.68)
2014	1	2.08	0.48 (0.01–2.67)
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 PASSAVANT (11242)			
2015	2	2.73	0.73 (0.08–2.64)
2014	0	3.75	0.00 (0.00–0.98)
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)
CHAMBERSBURG HOSPITAL (11913)			
2015	5	2.81	1.78 (0.57–4.15)
2014	3	2.38	1.26 (0.25–3.68)
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)

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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)
CONEMAUGH MEMORIAL MEDICAL CENTER (10280)			
2015	2	2.81	0.71 (0.08–2.57)
2014	2	2.42	0.83 (0.09–2.99)
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)
REGIONAL HOSPITAL OF SCRANTON (12533)			
2015	3	2.84	1.06 (0.21–3.09)
2014	1	2.55	0.39 (0.01–2.18)
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)
MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)			
2015	1	3.09	0.32 (0.00–1.80)
2014	2	4.54	0.44 (0.05–1.59)
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)
ST. MARY MEDICAL CENTER (11885)			
2015	3	3.19	0.94 (0.19–2.75)
2014	4	2.48	1.61 (0.43–4.13)
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)
OSS ORTHOPAEDIC HOSPITAL (18467)			
2015	4	3.21	1.25 (0.34–3.19)
2014	2	3.13	0.64 (0.07–2.31)
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	.	.	.
ST. LUKES HOSPITAL BETHLEHEM (11718)			
2015	1	3.22	0.31 (0.00–1.73)
2014	3	3.08	0.97 (0.20–2.85)
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)
ABINGTON MEMORIAL HOSPITAL (11838)			
2015	1	3.26	0.31 (0.00–1.71)
2014	2	3.53	0.57 (0.06–2.04)
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)
RIDDLE MEMORIAL HOSPITAL (11731)			
2015	2	3.28	0.61 (0.07–2.20)
2014	2	3.24	0.62 (0.07–2.23)
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)
COORDINATED HEALTH ORTHOPEDIC HOSPITAL LLC (11872)			
2015	2	3.28	0.61 (0.07–2.20)
2014	1	3.47	0.29 (0.00–1.60)
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)
PINNACLE HEALTH HOSPITALS - COMMUNITY GENERAL OSTEOPATHIC HOSPITAL (34069)			
2015	3	3.34	0.90 (0.18–2.62)
2014	1	3.07	0.33 (0.00–1.81)
2013	.	.	.
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
GEISINGER MEDICAL CENTER (11775)			
2015	5	3.42	1.46 (0.47–3.41)
2014	4	2.66	1.50 (0.40–3.85)
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)
PINNACLE HEALTH HOSPITALS - HARRISBURG HOSPITAL (34068)			
2015	7	3.58	1.95 (0.78–4.03)
2014	0	3.73	0.00 (0.00–0.98)
2013	.	.	.
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)			
2015	4	3.61	1.11 (0.30–2.84)
2014	3	3.21	0.94 (0.19–2.73)
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)
UPMC ST. MARGARET (11561)			
2015	3	3.62	0.83 (0.17–2.42)
2014	1	4.76	0.21 (0.00–1.17)
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)

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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)			
2015	3	3.67	0.82 (0.16–2.39)
2014	2	3.49	0.57 (0.06–2.07)
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)
JEFFERSON HOSPITAL (10237)			
2015	1	3.74	0.27 (0.00–1.49)
2014	5	3.72	1.34 (0.43–3.13)
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)
MILTON S HERSHEY MEDICAL CENTER (11747)			
2015	1	3.75	0.27 (0.00–1.48)
2014	2	3.59	0.56 (0.06–2.01)
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)
READING HOSPITAL (12375)			
2015	0	3.98	0.00 (0.00–0.92)
2014	1	3.84	0.26 (0.00–1.45)
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)
PENNSYLVANIA HOSPITAL OF THE UNIVERSITY OF PA HEALTH SYS (11448)			
2015	6	4.05	1.48 (0.54–3.23)
2014	6	3.45	1.74 (0.64–3.79)
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)
ARIA HEALTH (11388)			
2015	0	4.12	0.00 (0.00–0.89)
2014	4	4.38	0.91 (0.25–2.34)
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)
ST. CLAIR MEMORIAL HOSPITAL (10561)			
2015	2	4.14	0.48 (0.05–1.74)
2014	4	3.84	1.04 (0.28–2.67)
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)

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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 PRESBYTERIAN SHADYSIDE - SHADYSIDE (10118)			
2015	7	4.28	1.64 (0.66–3.37)
2014	10	6.87	1.46 (0.70–2.68)
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)
ALLEGHENY GENERAL HOSPITAL (10648)			
2015	4	4.91	0.81 (0.22–2.09)
2014	2	4.60	0.43 (0.05–1.57)
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)
MAIN LINE HOSPITAL BRYN MAWR (11753)			
2015	5	5.00	1.00 (0.32–2.33)
2014	5	4.61	1.08 (0.35–2.53)
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)
THOMAS JEFFERSON UNIVERSITY HOSPITAL (11506)			
2015	3	5.20	0.58 (0.12–1.69)
2014	5	5.64	0.89 (0.29–2.07)
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)
MOUNT NITTANY MEDICAL CENTER (11797)			
2015	8	6.39	1.25 (0.54–2.47)
2014	21	5.94	3.54 (2.19–5.41)
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)
LEHIGH VALLEY HOSPITAL (11884)			
2015	5	6.51	0.77 (0.25–1.79)
2014	4	6.13	0.65 (0.18–1.67)
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)
PENN PRESBYTERIAN MEDICAL CENTER (11814)			
2015	9	6.75	1.33 (0.61–2.53)
2014	10	5.46	1.83 (0.88–3.37)
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)

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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)
LANCASTER GENERAL HOSPITAL (10183)			
2015	3	7.31	0.41 (0.08–1.20)
2014	3	5.93	0.51 (0.10–1.48)
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)

Table 4.5.12: Rate (SIR) of Surgical Site Infections (SSIs) Associated with Hip Arthroplasty (HPRO) by Hospital (Ordered by Predicted Infections) — Pennsylvania, 2009–2015

	Number of SSIs (HPRO)	Predicted Number of SSIs (HPRO)	SIR (95% CI)
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)			
2015	.	.	.
2014	0	0.04	0.00 (0.00–91.17)
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	.	.	.
WAYNESBORO HOSPITAL (11642)			
2015	.	.	.
2014	.	.	.
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)
TYLER MEMORIAL HOSPITAL (11829)			
2015	.	.	.
2014	.	.	.
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)			
2015	.	.	.
2014	.	.	.
2013	.	.	.
2012	0	0.05	0.00 (0.00–70.96)
2011	.	.	.
2010	.	.	.
2009	.	.	.
LOCK HAVEN HOSPITAL (12097)			
2015	.	.	.
2014	.	.	.
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	.	.	.
PENN HIGHLANDS BROOKVILLE (12418)			
2015	.	.	.
2014	.	.	.
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)

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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)
CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)			
2015	0	0.01	0.00 (0.00–596.70)
2014	0	0.03	0.00 (0.00–131.36)
2013	0	0.02	0.00 (0.00–240.51)
2012	0	0.03	0.00 (0.00–111.98)
2011	.	.	.
2010	.	.	.
2009	.	.	.
EXCELA HEALTH FRICK HOSPITAL (11639)			
2015	0	0.01	0.00 (0.00–311.58)
2014	0	0.04	0.00 (0.00–84.53)
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)
SHRINERS HOSPITALS FOR CHILDREN - PHILA (12244)			
2015	0	0.04	0.00 (0.00–103.86)
2014	0	0.04	0.00 (0.00–98.77)
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)
ST. JOSEPHS HOSPITAL (12438)			
2015	0	0.04	0.00 (0.00–103.43)
2014	.	.	.
2013	0	0.04	0.00 (0.00–85.19)
2012	0	0.06	0.00 (0.00–58.44)
2011	.	.	.
2010	.	.	.
2009	.	.	.
CORRY MEMORIAL HOSPITAL (12283)			
2015	0	0.05	0.00 (0.00–77.65)
2014	.	.	.
2013	0	0.06	0.00 (0.00–65.96)
2012	0	0.08	0.00 (0.00–45.56)
2011	.	.	.
2010	.	.	.
2009	.	.	.
CONEMAUGH MINERS MEDICAL CENTER (12295)			
2015	0	0.05	0.00 (0.00–77.65)
2014	0	0.07	0.00 (0.00–53.74)
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)
HIGHLANDS HOSPITAL (11902)			
2015	0	0.06	0.00 (0.00–61.77)
2014	0	0.02	0.00 (0.00–197.55)
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)

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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)
SUNBURY COMMUNITY HOSP (12105)			
2015	2	0.07	30.76 (3.46–111.07)
2014	0	0.26	0.00 (0.00–13.91)
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)
GUTHRIE TOWANDA MEMORIAL HOSPITAL (12549)			
2015	1	0.09	10.58 (0.14–58.89)
2014	1	0.09	11.52 (0.15–64.08)
2013	0	0.09	0.00 (0.00–41.30)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
SOUTHWEST REGIONAL MEDICAL CENTER (11942)			
2015	0	0.09	0.00 (0.00–38.73)
2014	1	0.13	7.86 (0.10–43.73)
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)
UPMC BEDFORD (11680)			
2015	0	0.10	0.00 (0.00–36.56)
2014	0	0.20	0.00 (0.00–17.93)
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)
KANE COMMUNITY HOSPITAL (12111)			
2015	0	0.14	0.00 (0.00–26.91)
2014	1	0.25	3.98 (0.05–22.15)
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)
ROXBOROUGH MEMORIAL HOSPITAL (11978)			
2015	1	0.14	7.33 (0.10–40.77)
2014	0	0.08	0.00 (0.00–43.81)
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)
GEISINGER-BLOOMSBURG HOSPITAL (12008)			
2015	0	0.15	0.00 (0.00–24.71)
2014	2	0.28	7.26 (0.82–26.23)
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)

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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)
EASTERN REGIONAL MEDICAL CENTER (12348)			
2015	0	0.15	0.00 (0.00–23.88)
2014	1	0.15	6.46 (0.08–35.96)
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	.	.	.
WINDBER HOSPITAL (12031)			
2015	2	0.17	12.10 (1.36–43.69)
2014	0	0.12	0.00 (0.00–29.57)
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)
HOSPITAL OF THE UNIVERSITY OF PENNSYLVANIA (10219)			
2015	0	0.18	0.00 (0.00–20.02)
2014	1	0.69	1.44 (0.02–8.01)
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	.	.	.
JERSEY SHORE HOSPITAL (11689)			
2015	0	0.19	0.00 (0.00–19.37)
2014	0	0.17	0.00 (0.00–21.51)
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)
J C BLAIR MEMORIAL HOSPITAL (11724)			
2015	0	0.22	0.00 (0.00–16.73)
2014	0	0.14	0.00 (0.00–26.86)
2013	2	0.21	9.49 (1.07–34.25)
2012	0	0.03	0.00 (0.00–122.24)
2011	.	.	.
2010	.	.	.
2009	.	.	.
PENN HIGHLANDS ELK (11859)			
2015	1	0.24	4.11 (0.05–22.85)
2014	0	0.28	0.00 (0.00–13.16)
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)
PALMERTON HOSPITAL (12396)			
2015	0	0.25	0.00 (0.00–14.43)
2014	0	0.28	0.00 (0.00–12.99)
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)

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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)
PUNXSUTAWNEY AREA HOSPITAL (11830)			
2015	0	0.25	0.00 (0.00–14.42)
2014	0	0.08	0.00 (0.00–45.49)
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)
HEART OF LANCASTER REGIONAL MEDICAL CENTER (12571)			
2015	0	0.26	0.00 (0.00–14.37)
2014	0	0.31	0.00 (0.00–11.83)
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)
ELLWOOD CITY HOSPITAL (11779)			
2015	1	0.26	3.89 (0.05–21.65)
2014	1	0.15	6.59 (0.09–36.67)
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)
MERCY PHILADELPHIA HOSPITAL (11946)			
2015	2	0.27	7.34 (0.82–26.49)
2014	1	0.12	8.50 (0.11–47.29)
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)
EDGEWOOD SURGICAL HOSPITAL (12552)			
2015	0	0.28	0.00 (0.00–13.12)
2014	0	0.31	0.00 (0.00–11.85)
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)
TITUSVILLE AREA HOSPITAL (11738)			
2015	0	0.29	0.00 (0.00–12.66)
2014	0	0.29	0.00 (0.00–12.66)
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)
ST. LUKES MINERS MEMORIAL HOSPITAL (11784)			
2015	0	0.31	0.00 (0.00–11.94)
2014	0	0.16	0.00 (0.00–22.31)
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)

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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)
JENNERSVILLE REGIONAL HOSPITAL (12337)			
2015	0	0.31	0.00 (0.00–11.93)
2014	1	0.56	1.78 (0.02–9.91)
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)
GNADEN HUETTEN MEMORIAL HOSPITAL (12241)			
2015	0	0.31	0.00 (0.00–11.70)
2014	0	0.29	0.00 (0.00–12.86)
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)
PENN HIGHLANDS CLEARFIELD (11843)			
2015	0	0.32	0.00 (0.00–11.50)
2014	0	0.35	0.00 (0.00–10.38)
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)
GEISINGER-LEWISTOWN HOSPITAL (11825)			
2015	0	0.32	0.00 (0.00–11.49)
2014	1	0.73	1.38 (0.02–7.66)
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)
MEMORIAL HOSPITAL (11633)			
2015	0	0.32	0.00 (0.00–11.30)
2014	1	0.30	3.29 (0.04–18.31)
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)
ENDLESS MOUNTAINS HEALTH SYSTEMS (11817)			
2015	1	0.35	2.83 (0.04–15.74)
2014	0	0.36	0.00 (0.00–10.32)
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)
GROVE CITY MEDICAL CENTER (11722)			
2015	0	0.35	0.00 (0.00–10.34)
2014	1	0.47	2.12 (0.03–11.81)
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)

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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)
BERWICK HOSPITAL CENTER (11442)			
2015	1	0.38	2.64 (0.03–14.70)
2014	1	0.58	1.72 (0.02–9.54)
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)
MERCY SUBURBAN HOSPITAL (11952)			
2015	0	0.41	0.00 (0.00–8.99)
2014	1	0.55	1.83 (0.02–10.20)
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)
ST. LUKES HOSPITAL- ANDERSON CAMPUS (21487)			
2015	0	0.41	0.00 (0.00–8.97)
2014	0	0.37	0.00 (0.00–10.03)
2013	0	0.34	0.00 (0.00–10.88)
2012	1	0.48	2.09 (0.03–11.62)
2011	.	.	.
2010	.	.	.
2009	.	.	.
ST. LUKES QUAKERTOWN HOSPITAL (11711)			
2015	0	0.42	0.00 (0.00–8.73)
2014	0	0.38	0.00 (0.00–9.70)
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)
SOLDIERS AND SAILORS MEMORIAL HOSPITAL (11688)			
2015	1	0.43	2.34 (0.03–13.01)
2014	1	0.46	2.18 (0.03–12.13)
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)
UPMC MCKEESPORT (11707)			
2015	0	0.44	0.00 (0.00–8.39)
2014	0	0.70	0.00 (0.00–5.26)
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)
SCHUYLKILL MEDICAL CENTER - SOUTH JACKSON STREET (12087)			
2015	1	0.44	2.26 (0.03–12.57)
2014	2	0.41	4.85 (0.54–17.50)
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)

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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)
CROZER CHESTER MEDICAL CENTER - TAYLOR (11932)			
2015	0	0.52	0.00 (0.00–7.03)
2014	0	0.40	0.00 (0.00–9.24)
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)
THOMAS JEFFERSON UNIVERSITY HOSPITAL - METHODIST (12017)			
2015	0	0.57	0.00 (0.00–6.40)
2014	0	0.70	0.00 (0.00–5.23)
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)
CROZER CHESTER MEDICAL CENTER (11839)			
2015	1	0.60	1.67 (0.02–9.27)
2014	1	0.30	3.36 (0.04–18.71)
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)
SCHUYLKILL MEDICAL CENTER - EAST NORWEGIAN STREET (11922)			
2015	1	0.60	1.66 (0.02–9.25)
2014	0	0.72	0.00 (0.00–5.10)
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)
LOWER BUCKS HOSPITAL (12390)			
2015	0	0.60	0.00 (0.00–6.09)
2014	1	0.32	3.10 (0.04–17.27)
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)
CLARION HOSPITAL (11654)			
2015	0	0.64	0.00 (0.00–5.76)
2014	1	0.35	2.83 (0.04–15.74)
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)
CANONSBURG HOSPITAL (11586)			
2015	1	0.66	1.51 (0.02–8.39)
2014	0	0.32	0.00 (0.00–11.37)
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)
WARREN GENERAL HOSPITAL (12216)			
2015	1	0.67	1.50 (0.02–8.34)
2014	0	0.60	0.00 (0.00–6.13)
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)
MERCY FITZGERALD HOSPITAL (11683)			
2015	0	0.67	0.00 (0.00–5.50)
2014	1	0.67	1.50 (0.02–8.35)
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)
TYRONE HOSPITAL (12717)			
2015	6	0.68	8.89 (3.25–19.34)
2014	1	0.49	2.03 (0.03–11.29)
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)
MILLCREEK COMMUNITY HOSPITAL (12253)			
2015	1	0.70	1.43 (0.02–7.98)
2014	0	0.37	0.00 (0.00–9.93)
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)
NASON HOSPITAL (11907)			
2015	2	0.70	2.86 (0.32–10.34)
2014	0	0.66	0.00 (0.00–5.59)
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)
BRADFORD REGIONAL MEDICAL CENTER (12361)			
2015	0	0.74	0.00 (0.00–4.98)
2014	1	0.73	1.37 (0.02–7.63)
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)
ALBERT EINSTEIN MEDICAL CENTER (10585)			
2015	0	0.74	0.00 (0.00–4.96)
2014	2	1.04	1.93 (0.22–6.95)
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)

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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)			
2015	2	0.75	2.65 (0.30–9.58)
2014	0	1.12	0.00 (0.00–3.27)
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)
CHARLES COLE MEMORIAL HOSPITAL (11956)			
2015	1	0.76	1.31 (0.02–7.31)
2014	0	0.71	0.00 (0.00–5.18)
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)
BRANDYWINE HOSPITAL (11979)			
2015	1	0.76	1.31 (0.02–7.30)
2014	1	0.68	1.46 (0.02–8.13)
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 NORTHWEST (11837)			
2015	0	0.81	0.00 (0.00–4.52)
2014	3	1.12	2.69 (0.54–7.85)
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)
LEHIGH VALLEY HOSPITAL - HAZLETON (11878)			
2015	0	0.82	0.00 (0.00–4.49)
2014	2	0.47	4.21 (0.47–15.21)
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)
ARMSTRONG COUNTY MEMORIAL HOSPITAL (12057)			
2015	0	0.86	0.00 (0.00–4.26)
2014	0	1.08	0.00 (0.00–3.41)
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)
OHIO VALLEY GENERAL HOSPITAL (12298)			
2015	0	0.87	0.00 (0.00–4.21)
2014	1	0.69	1.46 (0.02–8.12)
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)

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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)
PENN HIGHLANDS DUBOIS (11606)			
2015	2	0.92	2.18 (0.24–7.86)
2014	1	1.20	0.83 (0.01–4.63)
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)
JEANES HOSPITAL (11459)			
2015	0	0.93	0.00 (0.00–3.94)
2014	0	1.09	0.00 (0.00–3.36)
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)
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)			
2015	0	1.00	0.00 (0.00–3.66)
2014	2	1.11	1.80 (0.20–6.50)
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)
LEHIGH VALLEY HOSPITAL - MUHLENBERG (11898)			
2015	2	1.00	1.99 (0.22–7.20)
2014	1	1.32	0.76 (0.01–4.22)
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)
SURGICAL INSTITUTE OF READING (12535)			
2015	1	1.01	0.99 (0.01–5.49)
2014	1	0.95	1.05 (0.01–5.85)
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)
CROZER CHESTER MEDICAL CENTER - SPRINGFIELD (11851)			
2015	0	1.05	0.00 (0.00–3.48)
2014	1	1.33	0.75 (0.01–4.17)
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)
GOOD SAMARITAN HOSPITAL, THE (11712)			
2015	1	1.09	0.92 (0.01–5.11)
2014	1	0.98	1.02 (0.01–5.68)
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)

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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)
WAYNE MEMORIAL HOSPITAL (12004)			
2015	1	1.09	0.92 (0.01–5.09)
2014	0	0.68	0.00 (0.00–5.36)
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)
GETTYSBURG HOSPITAL (11531)			
2015	1	1.10	0.91 (0.01–5.04)
2014	2	1.02	1.96 (0.22–7.07)
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)
CHESTNUT HILL HOSPITAL (12304)			
2015	3	1.16	2.59 (0.52–7.57)
2014	0	1.03	0.00 (0.00–3.56)
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)
UPMC PRESBYTERIAN SHADYSIDE (10348)			
2015	4	1.21	3.30 (0.89–8.46)
2014	1	1.52	0.66 (0.01–3.66)
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)
JAMESON MEMORIAL HOSPITAL (11954)			
2015	1	1.25	0.80 (0.01–4.44)
2014	0	1.28	0.00 (0.00–2.86)
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)
ST. JOSEPH MEDICAL CTR (11961)			
2015	1	1.31	0.76 (0.01–4.25)
2014	1	1.23	0.81 (0.01–4.53)
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)
EXCELA HEALTH LATROBE HOSPITAL (11651)			
2015	2	1.34	1.50 (0.17–5.40)
2014	1	1.40	0.71 (0.01–3.96)
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)
EINSTEIN AT ELKINS PARK (12500)			
2015	2	1.37	1.46 (0.16–5.26)
2014	0	1.31	0.00 (0.00–2.80)
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)
WASHINGTON HOSPITAL, THE (11460)			
2015	0	1.44	0.00 (0.00–2.55)
2014	0	1.00	0.00 (0.00–3.67)
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)
CARLISLE REGIONAL MEDICAL CENTER (11997)			
2015	6	1.45	4.15 (1.51–9.03)
2014	1	1.00	1.00 (0.01–5.56)
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)
LANCASTER REGIONAL MEDICAL CENTER (12335)			
2015	1	1.47	0.68 (0.01–3.79)
2014	2	1.96	1.02 (0.11–3.69)
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)
POCONO MEDICAL CENTER (11772)			
2015	0	1.47	0.00 (0.00–2.50)
2014	2	1.50	1.33 (0.15–4.82)
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)
HANOVER HOSPITAL (11899)			
2015	0	1.51	0.00 (0.00–2.43)
2014	2	1.23	1.62 (0.18–5.86)
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)
ALLEGHENY VALLEY HOSPITAL (11842)			
2015	2	1.53	1.30 (0.15–4.70)
2014	1	0.99	1.01 (0.01–5.63)
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)

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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)
NAZARETH HOSPITAL (11919)			
2015	0	1.56	0.00 (0.00–2.35)
2014	2	1.62	1.23 (0.14–4.45)
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)
HAHNEMANN UNIVERSITY HOSPITAL (11437)			
2015	0	1.59	0.00 (0.00–2.31)
2014	0	1.52	0.00 (0.00–2.41)
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)
UPMC HORIZON (11675)			
2015	3	1.60	1.88 (0.38–5.49)
2014	0	1.96	0.00 (0.00–1.87)
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)
INDIANA REGIONAL MEDICAL CENTER (11759)			
2015	1	1.60	0.63 (0.01–3.48)
2014	0	1.50	0.00 (0.00–2.45)
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)
UPMC EAST (28812)			
2015	1	1.62	0.62 (0.01–3.44)
2014	2	2.12	0.95 (0.11–3.41)
2013	2	0.99	2.02 (0.23–7.31)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
SOMERSET HOSPITAL (12282)			
2015	0	1.62	0.00 (0.00–2.26)
2014	0	0.57	0.00 (0.00–6.39)
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)
HOLY SPIRIT HOSPITAL (12387)			
2015	1	1.66	0.60 (0.01–3.36)
2014	2	1.27	1.57 (0.18–5.68)
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)

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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)
EASTON HOSPITAL (11929)			
2015	7	1.68	4.17 (1.67–8.60)
2014	3	1.30	2.32 (0.47–6.76)
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)
PINNACLE HEALTH HOSPITALS - WEST SHORE HOSPITAL (35123)			
2015	0	1.68	0.00 (0.00–2.18)
2014	.	.	.
2013	.	.	.
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
GRAND VIEW HOSPITAL (11847)			
2015	0	1.73	0.00 (0.00–2.12)
2014	1	1.94	0.51 (0.01–2.86)
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)
COORDINATED HEALTH ORTHOPEDIC HOSPITAL LLC (11872)			
2015	1	1.77	0.56 (0.01–3.14)
2014	1	1.55	0.65 (0.01–3.60)
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)
EINSTEIN MEDICAL CENTER MONTGOMERY (30210)			
2015	2	1.81	1.11 (0.12–3.99)
2014	0	1.30	0.00 (0.00–2.83)
2013	0	1.46	0.00 (0.00–2.52)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
ADVANCED SURGICAL HOSPITAL (16317)			
2015	0	1.82	0.00 (0.00–2.01)
2014	0	1.85	0.00 (0.00–1.99)
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	.	.	.
UPMC MERCY (10384)			
2015	1	1.83	0.55 (0.01–3.04)
2014	4	1.91	2.10 (0.56–5.37)
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)

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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)
POTTSTOWN MEMORIAL MEDICAL CENTER (11983)			
2015	0	1.84	0.00 (0.00–1.99)
2014	1	1.49	0.67 (0.01–3.72)
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)
WEST PENN HOSPITAL (11864)			
2015	1	1.90	0.53 (0.01–2.92)
2014	1	0.45	2.24 (0.03–12.46)
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)
SURGICAL SPECIALTY CENTER AT COORDINATED HEALTH, THE (15259)			
2015	2	1.93	1.04 (0.12–3.74)
2014	0	1.61	0.00 (0.00–2.28)
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			
EPHRATA COMMUNITY HOSPITAL (11764)			
2015	3	1.95	1.54 (0.31–4.50)
2014	4	1.71	2.34 (0.63–5.99)
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)
MONONGAHELA VALLEY HOSPITAL (11069)			
2015	2	1.95	1.02 (0.12–3.70)
2014	2	1.57	1.28 (0.14–4.61)
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)
UNIONTOWN HOSPITAL (10441)			
2015	2	1.95	1.02 (0.11–3.70)
2014	4	1.56	2.56 (0.69–6.56)
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)
SHARON REGIONAL HEALTH SYSTEM (12250)			
2015	2	1.99	1.01 (0.11–3.63)
2014	2	2.10	0.95 (0.11–3.43)
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)

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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)
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)			
2015	1	2.05	0.49 (0.01–2.72)
2014	0	1.48	0.00 (0.00–2.48)
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)
WILKES-BARRE GENERAL HOSPITAL (11916)			
2015	1	2.06	0.49 (0.01–2.70)
2014	2	2.06	0.97 (0.11–3.50)
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)			
2015	1	2.06	0.49 (0.01–2.70)
2014	1	1.88	0.53 (0.01–2.96)
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)
HOLY REDEEMER HOSPITAL (11973)			
2015	2	2.10	0.95 (0.11–3.43)
2014	4	1.83	2.18 (0.59–5.59)
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)
LANSDALE HOSPITAL (12032)			
2015	2	2.13	0.94 (0.11–3.40)
2014	4	2.22	1.80 (0.48–4.61)
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)
HERITAGE VALLEY BEAVER (11831)			
2015	0	2.24	0.00 (0.00–1.64)
2014	5	2.25	2.22 (0.72–5.19)
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)
PHYSICIANS CARE SURGICAL HOSPITAL (19630)			
2015	0	2.34	0.00 (0.00–1.57)
2014	0	1.94	0.00 (0.00–1.89)
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	.	.	.

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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)
DOYLESTOWN HOSPITAL (10190)			
2015	3	2.34	1.28 (0.26–3.74)
2014	2	2.25	0.89 (0.10–3.21)
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)
WELLSPAN SURGERY AND REHABILITATION HOSPITAL (27430)			
2015	8	2.34	3.42 (1.47–6.73)
2014	2	1.66	1.21 (0.14–4.36)
2013	3	1.47	2.03 (0.41–5.94)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
FORBES HOSPITAL (11265)			
2015	0	2.34	0.00 (0.00–1.57)
2014	3	1.96	1.53 (0.31–4.48)
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)
UPMC ALTOONA (10178)			
2015	5	2.36	2.12 (0.68–4.94)
2014	2	3.51	0.57 (0.06–2.06)
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)
BUTLER MEMORIAL HOSPITAL (11736)			
2015	2	2.39	0.84 (0.09–3.03)
2014	0	2.33	0.00 (0.00–1.57)
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)
GEISINGER-COMMUNITY MEDICAL CENTER (11914)			
2015	1	2.41	0.42 (0.01–2.31)
2014	9	2.31	3.89 (1.78–7.39)
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)
CHESTER COUNTY HOSPITAL (12016)			
2015	2	2.53	0.79 (0.09–2.85)
2014	2	2.01	1.00 (0.11–3.59)
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)

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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)
EVANGELICAL COMMUNITY HOSPITAL (11701)			
2015	2	2.54	0.79 (0.09–2.84)
2014	1	2.75	0.36 (0.00–2.03)
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)
MOSES TAYLOR HOSPITAL (11528)			
2015	1	2.58	0.39 (0.01–2.16)
2014	1	2.14	0.47 (0.01–2.60)
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)
HERITAGE VALLEY SEWICKLEY (10375)			
2015	3	2.61	1.15 (0.23–3.36)
2014	2	2.10	0.95 (0.11–3.44)
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)
REGIONAL HOSPITAL OF SCRANTON (12533)			
2015	0	3.05	0.00 (0.00–1.20)
2014	1	2.61	0.38 (0.01–2.13)
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)
UPMC PASSAVANT (11242)			
2015	4	3.10	1.29 (0.35–3.31)
2014	7	4.72	1.48 (0.59–3.05)
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)
OSS ORTHOPAEDIC HOSPITAL (18467)			
2015	0	3.12	0.00 (0.00–1.18)
2014	3	3.22	0.93 (0.19–2.72)
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	.	.	.
MAIN LINE HOSPITAL - PAOLI (11750)			
2015	0	3.27	0.00 (0.00–1.12)
2014	4	3.57	1.12 (0.30–2.87)
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)

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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)
ARIA HEALTH (11388)			
2015	4	3.37	1.19 (0.32–3.04)
2014	3	3.50	0.86 (0.17–2.51)
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)
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)			
2015	0	3.37	0.00 (0.00–1.09)
2014	4	3.61	1.11 (0.30–2.84)
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)
CONEMAUGH MEMORIAL MEDICAL CENTER (10280)			
2015	5	3.49	1.43 (0.46–3.35)
2014	7	3.76	1.86 (0.75–3.84)
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)
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)			
2015	0	3.55	0.00 (0.00–1.03)
2014	0	2.90	0.00 (0.00–1.26)
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)
SAINT VINCENT HOSPITAL (11699)			
2015	4	3.57	1.12 (0.30–2.87)
2014	2	3.68	0.54 (0.06–1.96)
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)
YORK HOSPITAL (10108)			
2015	8	3.65	2.19 (0.94–4.32)
2014	1	2.50	0.40 (0.01–2.23)
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 ST. MARGARET (11561)			
2015	11	3.66	3.01 (1.50–5.38)
2014	4	5.41	0.74 (0.20–1.89)
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)

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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)
ROBERT PACKER HOSPITAL (12422)			
2015	1	3.68	0.27 (0.00–1.51)
2014	0	3.52	0.00 (0.00–1.04)
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)
TEMPLE UNIVERSITY HOSPITAL (12382)			
2015	4	3.68	1.09 (0.29–2.78)
2014	3	3.70	0.81 (0.16–2.37)
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)
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)			
2015	2	3.95	0.51 (0.06–1.83)
2014	2	3.66	0.55 (0.06–1.97)
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)
UPMC HAMOT (11725)			
2015	5	4.00	1.25 (0.40–2.92)
2014	1	4.56	0.22 (0.00–1.22)
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)
CHAMBERSBURG HOSPITAL (11913)			
2015	0	4.03	0.00 (0.00–0.91)
2014	4	3.30	1.21 (0.33–3.10)
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)
MAIN LINE HOSPITAL BRYN MAWR (11753)			
2015	1	4.11	0.24 (0.00–1.36)
2014	0	4.15	0.00 (0.00–0.88)
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)
PINNACLE HEALTH HOSPITALS - HARRISBURG HOSPITAL (34068)			
2015	7	4.12	1.70 (0.68–3.50)
2014	12	4.25	2.82 (1.46–4.93)
2013	.	.	.
2012	.	.	.
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)
ST. MARY MEDICAL CENTER (11885)			
2015	4	4.32	0.93 (0.25–2.37)
2014	4	3.73	1.07 (0.29–2.74)
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)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)			
2015	6	4.51	1.33 (0.49–2.90)
2014	1	2.81	0.36 (0.00–1.98)
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)			
2015	0	4.54	0.00 (0.00–0.81)
2014	3	5.94	0.51 (0.10–1.48)
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)
RIDDLE MEMORIAL HOSPITAL (11731)			
2015	4	4.57	0.88 (0.24–2.24)
2014	2	4.51	0.44 (0.05–1.60)
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)
ST. CLAIR MEMORIAL HOSPITAL (10561)			
2015	4	4.78	0.84 (0.23–2.14)
2014	2	4.54	0.44 (0.05–1.59)
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)
JEFFERSON HOSPITAL (10237)			
2015	1	5.00	0.20 (0.00–1.11)
2014	7	5.26	1.33 (0.53–2.74)
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)
ST. LUKES HOSPITAL BETHLEHEM (11718)			
2015	5	5.28	0.95 (0.31–2.21)
2014	4	4.20	0.95 (0.26–2.44)
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)
PINNACLE HEALTH HOSPITALS - COMMUNITY GENERAL OSTEOPATHIC HOSPITAL (34069)			
2015	3	5.36	0.56 (0.11–1.64)
2014	4	4.56	0.88 (0.24–2.25)
2013	.	.	.
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
READING HOSPITAL (12375)			
2015	6	5.36	1.12 (0.41–2.43)
2014	4	4.79	0.83 (0.22–2.14)
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)
MILTON S HERSHEY MEDICAL CENTER (11747)			
2015	10	5.39	1.86 (0.89–3.41)
2014	6	4.74	1.27 (0.46–2.76)
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)
ROTHMAN ORTHOPAEDIC SPECIALTY HOSPITAL (15202)			
2015	1	5.50	0.18 (0.00–1.01)
2014	0	3.80	0.00 (0.00–0.97)
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	.	.	.
MOUNT NITTANY MEDICAL CENTER (11797)			
2015	10	5.60	1.79 (0.85–3.28)
2014	6	5.55	1.08 (0.39–2.35)
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)
GEISINGER MEDICAL CENTER (11775)			
2015	27	5.77	4.68 (3.08–6.81)
2014	15	4.79	3.13 (1.75–5.16)
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)
ABINGTON MEMORIAL HOSPITAL (11838)			
2015	8	6.41	1.25 (0.54–2.46)
2014	7	6.77	1.03 (0.41–2.13)
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)

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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)
PENNSYLVANIA HOSPITAL OF THE UNIVERSITY OF PA HEALTH SYS (11448)			
2015	7	6.80	1.03 (0.41–2.12)
2014	4	6.57	0.61 (0.16–1.56)
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)			
2015	9	7.74	1.16 (0.53–2.21)
2014	7	6.55	1.07 (0.43–2.20)
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)
LEHIGH VALLEY HOSPITAL (11884)			
2015	4	8.85	0.45 (0.12–1.16)
2014	4	7.69	0.52 (0.14–1.33)
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)
UPMC PRESBYTERIAN SHADYSIDE - SHADYSIDE (10118)			
2015	10	9.15	1.09 (0.52–2.01)
2014	19	12.34	1.54 (0.93–2.41)
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)
ALLEGHENY GENERAL HOSPITAL (10648)			
2015	13	9.93	1.31 (0.70–2.24)
2014	10	8.56	1.17 (0.56–2.15)
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)
LANCASTER GENERAL HOSPITAL (10183)			
2015	8	10.68	0.75 (0.32–1.48)
2014	5	8.71	0.57 (0.18–1.34)
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)
THOMAS JEFFERSON UNIVERSITY HOSPITAL (11506)			
2015	8	11.21	0.71 (0.31–1.41)
2014	19	12.73	1.49 (0.90–2.33)
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 (Ordered by Predicted Infections) — Pennsylvania, 2009–2015

	Number of SSIs (HYST)	Predicted Number of SSIs (HYST)	SIR (95% CI)
JERSEY SHORE HOSPITAL (11689)			
2015	.	.	.
2014	.	.	.
2013	1	0.03	34.36 (0.45–191.16)
2012	.	.	.
2011	0	0.01	0.00 (0.00–323.09)
2010	.	.	.
2009	.	.	.
ST. LUKES QUAKERTOWN HOSPITAL (11711)			
2015	.	.	.
2014	0	0.05	0.00 (0.00–71.83)
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)
TITUSVILLE AREA HOSPITAL (11738)			
2015	.	.	.
2014	.	.	.
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)
ELLWOOD CITY HOSPITAL (11779)			
2015	.	.	.
2014	.	.	.
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)
TYLER MEMORIAL HOSPITAL (11829)			
2015	.	.	.
2014	.	.	.
2013	.	.	.
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	0	0.06	0.00 (0.00–60.04)

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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)
CROZER CHESTER MEDICAL CENTER - SPRINGFIELD (11851)			
2015	.	.	.
2014	.	.	.
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)
COORDINATED HEALTH ORTHOPEDIC HOSPITAL LLC (11872)			
2015	.	.	.
2014	0	0.02	0.00 (0.00–183.01)
2013	0	0.01	0.00 (0.00–392.98)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
CROZER CHESTER MEDICAL CENTER - TAYLOR (11932)			
2015	.	.	.
2014	.	.	.
2013	.	.	.
2012	0	0.01	0.00 (0.00–417.97)
2011	.	.	.
2010	.	.	.
2009	.	.	.
SOUTHWEST REGIONAL MEDICAL CENTER (11942)			
2015	.	.	.
2014	.	.	.
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	.	.	.
LANSDALE HOSPITAL (12032)			
2015	.	.	.
2014	0	0.02	0.00 (0.00–183.01)
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)
SUNBURY COMMUNITY HOSP (12105)			
2015	.	.	.
2014	0	0.03	0.00 (0.00–141.64)
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)
CORRY MEMORIAL HOSPITAL (12283)			
2015	.	.	.
2014	.	.	.
2013	.	.	.
2012	.	.	.
2011	.	.	.
2010	0	0.08	0.00 (0.00–45.06)
2009	0	0.13	0.00 (0.00–27.45)

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

	Number of SSIs (HYST)	Predicted Number of SSIs (HYST)	SIR (95% CI)
CONEMAUGH MINERS MEDICAL CENTER (12295)			
2015	.	.	.
2014	.	.	.
2013	.	.	.
2012	.	.	.
2011	0	0.02	0.00 (0.00–200.32)
2010	0	0.01	0.00 (0.00–346.66)
2009	.	.	.
BARNES-KASSON COUNTY HOSPITAL (12404)			
2015	.	.	.
2014	.	.	.
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)
PENN HIGHLANDS BROOKVILLE (12418)			
2015	.	.	.
2014	.	.	.
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)
EINSTEIN AT ELKINS PARK (12500)			
2015	.	.	.
2014	0	0.12	0.00 (0.00–29.79)
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)
GUTHRIE TOWANDA MEMORIAL HOSPITAL (12549)			
2015	.	.	.
2014	0	0.02	0.00 (0.00–231.05)
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)
CANONSBURG HOSPITAL (11586)			
2015	0	0.01	0.00 (0.00–413.53)
2014	0	0.03	0.00 (0.00–115.53)
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)
GROVE CITY MEDICAL CENTER (11722)			
2015	0	0.01	0.00 (0.00–413.53)
2014	0	0.04	0.00 (0.00–91.51)
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)

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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)
ST. LUKES MINERS MEMORIAL HOSPITAL (11784)			
2015	0	0.01	0.00 (0.00–413.53)
2014	0	0.01	0.00 (0.00–366.03)
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)
TROY COMMUNITY HOSPITAL (12018)			
2015	0	0.01	0.00 (0.00–413.53)
2014	.	.	.
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)
ST. LUKES HOSPITAL- ANDERSON CAMPUS (21487)			
2015	0	0.01	0.00 (0.00–413.53)
2014	0	0.04	0.00 (0.00–87.81)
2013	0	0.01	0.00 (0.00–263.07)
2012	0	0.01	0.00 (0.00–417.97)
2011	.	.	.
2010	.	.	.
2009	.	.	.
HIGHLANDS HOSPITAL (11902)			
2015	0	0.01	0.00 (0.00–287.87)
2014	0	0.02	0.00 (0.00–231.05)
2013	0	0.06	0.00 (0.00–64.36)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
PALMERTON HOSPITAL (12396)			
2015	0	0.01	0.00 (0.00–287.87)
2014	.	.	.
2013	.	.	.
2012	0	0.01	0.00 (0.00–417.97)
2011	.	.	.
2010	.	.	.
2009	.	.	.
UPMC EAST (28812)			
2015	0	0.02	0.00 (0.00–206.76)
2014	0	0.02	0.00 (0.00–183.01)
2013	0	0.01	0.00 (0.00–263.07)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
JENNERSVILLE REGIONAL HOSPITAL (12337)			
2015	0	0.02	0.00 (0.00–169.72)
2014	0	0.02	0.00 (0.00–183.01)
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)

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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)
SCHUYLKILL MEDICAL CENTER - EAST NORWEGIAN STREET (11922)			
2015	0	0.02	0.00 (0.00–153.77)
2014	0	0.02	0.00 (0.00–38.59)
2013	0	0.10	0.00 (0.00–38.59)
2012	0	0.02	0.00 (0.00–99.63)
2011	0	0.04	0.00 (0.00–118.86)
2010	0	0.03	0.00 (0.00–118.86)
2009	1	0.15	6.89 (0.09–38.36)
ALLEGHENY VALLEY HOSPITAL (11842)			
2015	0	0.03	0.00 (0.00–143.94)
2014	0	0.30	0.00 (0.00–12.14)
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)
SURGICAL INSTITUTE OF READING (12535)			
2015	0	0.03	0.00 (0.00–137.84)
2014	1	0.06	16.18 (0.21–90.01)
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)
OHIO VALLEY GENERAL HOSPITAL (12298)			
2015	0	0.04	0.00 (0.00–95.96)
2014	0	0.04	0.00 (0.00–23.15)
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)
TYRONE HOSPITAL (12717)			
2015	0	0.04	0.00 (0.00–82.71)
2014	0	0.06	0.00 (0.00–65.55)
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)
GNADEN HUETTEN MEMORIAL HOSPITAL (12241)			
2015	0	0.05	0.00 (0.00–70.41)
2014	0	0.20	0.00 (0.00–18.51)
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)
ST. JOSEPHS HOSPITAL (12438)			
2015	0	0.05	0.00 (0.00–70.41)
2014	0	0.06	0.00 (0.00–60.05)
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)

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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)
ROXBOROUGH MEMORIAL HOSPITAL (11978)			
2015	0	0.06	0.00 (0.00–63.02)
2014	.	.	.
2013	.	.	.
2012	.	.	.
2011	.	.	.
2010	0	0.14	0.00 (0.00–27.07)
2009	0	0.10	0.00 (0.00–35.19)
GOOD SAMARITAN HOSPITAL, THE (11712)			
2015	0	0.07	0.00 (0.00–52.52)
2014	0	0.11	0.00 (0.00–34.27)
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)
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)			
2015	0	0.07	0.00 (0.00–50.11)
2014	.	.	.
2013	.	.	.
2012	.	.	.
2011	0	0.03	0.00 (0.00–144.04)
2010	0	0.01	0.00 (0.00–346.66)
2009	.	.	.
JAMESON MEMORIAL HOSPITAL (11954)			
2015	0	0.09	0.00 (0.00–42.43)
2014	1	0.23	4.43 (0.06–24.65)
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)
NAZARETH HOSPITAL (11919)			
2015	0	0.09	0.00 (0.00–41.89)
2014	1	0.35	2.87 (0.04–15.95)
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	.	.	.
NASON HOSPITAL (11907)			
2015	0	0.09	0.00 (0.00–41.35)
2014	0	0.12	0.00 (0.00–29.67)
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)
ENDLESS MOUNTAINS HEALTH SYSTEMS (11817)			
2015	0	0.09	0.00 (0.00–41.07)
2014	0	0.04	0.00 (0.00–89.37)
2013	.	.	.
2012	.	.	.
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)
LOWER BUCKS HOSPITAL (12390)			
2015	0	0.10	0.00 (0.00–38.03)
2014	0	0.15	0.00 (0.00–24.93)
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)
UPMC PRESBYTERIAN SHADYSIDE (10348)			
2015	0	0.10	0.00 (0.00–37.80)
2014	0	0.11	0.00 (0.00–34.20)
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			
WAYNESBORO HOSPITAL (11642)			
2015	0	0.10	0.00 (0.00–37.60)
2014	1	0.15	6.72 (0.09–37.39)
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)
BRADFORD REGIONAL MEDICAL CENTER (12361)			
2015	0	0.10	0.00 (0.00–36.75)
2014	0	0.15	0.00 (0.00–25.07)
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)
LOCK HAVEN HOSPITAL (12097)			
2015	1	0.11	9.30 (0.12–51.73)
2014	0	0.07	0.00 (0.00–55.59)
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)
MONONGAHELA VALLEY HOSPITAL (11069)			
2015	1	0.13	7.43 (0.10–41.32)
2014	0	0.15	0.00 (0.00–23.98)
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)
PHYSICIANS CARE SURGICAL HOSPITAL (19630)			
2015	0	0.14	0.00 (0.00–26.79)
2014	0	0.19	0.00 (0.00–19.10)
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)
THOMAS JEFFERSON UNIVERSITY HOSPITAL - METHODIST (12017)			
2015	0	0.18	0.00 (0.00–20.68)
2014	0	0.28	0.00 (0.00–12.91)
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)
MERCY PHILADELPHIA HOSPITAL (11946)			
2015	0	0.18	0.00 (0.00–20.49)
2014	0	0.30	0.00 (0.00–12.13)
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)
ARMSTRONG COUNTY MEMORIAL HOSPITAL (12057)			
2015	2	0.18	11.00 (1.24–39.73)
2014	0	0.21	0.00 (0.00–17.85)
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)
UPMC NORTHWEST (11837)			
2015	0	0.19	0.00 (0.00–19.41)
2014	0	0.25	0.00 (0.00–14.53)
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)
PUNXSUTAWNEY AREA HOSPITAL (11830)			
2015	1	0.20	4.93 (0.06–27.43)
2014	4	0.25	16.02 (4.31–41.01)
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)
PENN HIGHLANDS ELK (11859)			
2015	0	0.21	0.00 (0.00–17.84)
2014	0	0.33	0.00 (0.00–11.25)
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)
SHARON REGIONAL HEALTH SYSTEM (12250)			
2015	0	0.21	0.00 (0.00–17.74)
2014	0	0.19	0.00 (0.00–19.52)
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)

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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)
HOLY SPIRIT HOSPITAL (12387)			
2015	2	0.21	9.45 (1.06–34.10)
2014	0	0.26	0.00 (0.00–14.24)
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)
CHAMBERSBURG HOSPITAL (11913)			
2015	1	0.22	4.48 (0.06–24.91)
2014	0	0.27	0.00 (0.00–13.55)
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)			
2015	2	0.22	8.95 (1.01–32.33)
2014	0	0.28	0.00 (0.00–13.33)
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)
CHARLES COLE MEMORIAL HOSPITAL (11956)			
2015	1	0.22	4.48 (0.06–24.91)
2014	1	0.20	5.06 (0.07–28.18)
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)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)			
2015	0	0.24	0.00 (0.00–15.32)
2014	0	0.25	0.00 (0.00–14.92)
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)
PENN HIGHLANDS CLEARFIELD (11843)			
2015	1	0.24	4.08 (0.05–22.71)
2014	0	0.23	0.00 (0.00–15.78)
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)
GEISINGER-BLOOMSBURG HOSPITAL (12008)			
2015	2	0.25	8.15 (0.91–29.42)
2014	0	0.03	0.00 (0.00–141.64)
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)
GEISINGER-COMMUNITY MEDICAL CENTER (11914)			
2015	1	0.25	4.06 (0.05–22.61)
2014	1	0.20	4.98 (0.07–27.71)
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	.	.	.
PENN PRESBYTERIAN MEDICAL CENTER (11814)			
2015	0	0.25	0.00 (0.00–14.84)
2014	1	0.27	3.71 (0.05–20.67)
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)
MERCY FITZGERALD HOSPITAL (11683)			
2015	0	0.25	0.00 (0.00–14.51)
2014	0	0.50	0.00 (0.00–7.37)
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)
MILLCREEK COMMUNITY HOSPITAL (12253)			
2015	0	0.27	0.00 (0.00–13.50)
2014	0	0.36	0.00 (0.00–10.13)
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)
UPMC MCKEESPORT (11707)			
2015	0	0.28	0.00 (0.00–13.31)
2014	1	0.59	1.69 (0.02–9.41)
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)
EVANGELICAL COMMUNITY HOSPITAL (11701)			
2015	0	0.29	0.00 (0.00–12.53)
2014	2	0.41	4.90 (0.55–17.67)
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)
CLARION HOSPITAL (11654)			
2015	2	0.32	6.35 (0.71–22.92)
2014	1	0.52	1.93 (0.03–10.71)
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)

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

	Number of SSIs (HYST)	Predicted Number of SSIs (HYST)	SIR (95% CI)
BERWICK HOSPITAL CENTER (11442)			
2015	0	0.32	0.00 (0.00–11.39)
2014	0	0.35	0.00 (0.00–10.45)
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)
INDIANA REGIONAL MEDICAL CENTER (11759)			
2015	0	0.32	0.00 (0.00–11.31)
2014	0	0.61	0.00 (0.00–6.06)
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)
PINNACLE HEALTH HOSPITALS - COMMUNITY GENERAL OSTEOPATHIC HOSPITAL (34069)			
2015	0	0.33	0.00 (0.00–11.09)
2014	0	0.40	0.00 (0.00–9.12)
2013	.	.	.
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
POTTSTOWN MEMORIAL MEDICAL CENTER (11983)			
2015	0	0.33	0.00 (0.00–10.96)
2014	0	0.33	0.00 (0.00–11.06)
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)
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)			
2015	0	0.34	0.00 (0.00–10.80)
2014	0	0.23	0.00 (0.00–15.67)
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)
SOMERSET HOSPITAL (12282)			
2015	0	0.35	0.00 (0.00–10.59)
2014	0	0.35	0.00 (0.00–10.63)
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)
LEHIGH VALLEY HOSPITAL - HAZLETON (11878)			
2015	0	0.38	0.00 (0.00–9.70)
2014	3	0.45	6.65 (1.34–19.43)
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)
BRANDYWINE HOSPITAL (11979)			
2015	0	0.39	0.00 (0.00–9.29)
2014	0	0.40	0.00 (0.00–9.07)
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	.	.	.
SOLDIERS AND SAILORS MEMORIAL HOSPITAL (11688)			
2015	0	0.42	0.00 (0.00–8.74)
2014	2	0.53	3.77 (0.42–13.61)
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)
UPMC ST. MARGARET (11561)			
2015	2	0.42	4.75 (0.53–17.14)
2014	0	0.43	0.00 (0.00–8.59)
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)
GRAND VIEW HOSPITAL (11847)			
2015	1	0.42	2.37 (0.03–13.19)
2014	0	0.45	0.00 (0.00–8.10)
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)
GETTYSBURG HOSPITAL (11531)			
2015	1	0.42	2.37 (0.03–13.17)
2014	1	0.56	1.78 (0.02–9.90)
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)
DOYLESTOWN HOSPITAL (10190)			
2015	1	0.44	2.25 (0.03–12.53)
2014	0	0.53	0.00 (0.00–6.88)
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)
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)			
2015	1	0.48	2.07 (0.03–11.51)
2014	8	1.54	5.19 (2.23–10.22)
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)

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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)
EASTON HOSPITAL (11929)			
2015	1	0.54	1.86 (0.02–10.34)
2014	0	1.20	0.00 (0.00–3.06)
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)
LANCASTER REGIONAL MEDICAL CENTER (12335)			
2015	1	0.55	1.83 (0.02–10.19)
2014	1	0.75	1.34 (0.02–7.46)
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)
EASTERN REGIONAL MEDICAL CENTER (12348)			
2015	0	0.57	0.00 (0.00–6.46)
2014	0	0.87	0.00 (0.00–4.21)
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)
ALLEGHENY GENERAL HOSPITAL (10648)			
2015	1	0.61	1.65 (0.02–9.18)
2014	2	0.46	4.32 (0.48–15.58)
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)
HERITAGE VALLEY SEWICKLEY (10375)			
2015	1	0.68	1.46 (0.02–8.15)
2014	0	0.63	0.00 (0.00–5.87)
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)
WINDBER HOSPITAL (12031)			
2015	0	0.69	0.00 (0.00–5.35)
2014	0	0.18	0.00 (0.00–20.37)
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)
MAIN LINE HOSPITAL BRYN MAWR (11753)			
2015	1	0.71	1.41 (0.02–7.84)
2014	0	0.61	0.00 (0.00–6.02)
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)
ROBERT PACKER HOSPITAL (12422)			
2015	0	0.71	0.00 (0.00–5.15)
2014	0	1.50	0.00 (0.00–2.44)
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)
UPMC HORIZON (11675)			
2015	0	0.73	0.00 (0.00–5.04)
2014	0	0.94	0.00 (0.00–3.91)
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)
JEANES HOSPITAL (11459)			
2015	1	0.74	1.36 (0.02–7.55)
2014	0	1.00	0.00 (0.00–3.67)
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)
J C BLAIR MEMORIAL HOSPITAL (11724)			
2015	2	0.75	2.68 (0.30–9.67)
2014	4	0.79	5.06 (1.36–12.96)
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)
HANOVER HOSPITAL (11899)			
2015	0	0.77	0.00 (0.00–4.79)
2014	1	0.90	1.10 (0.01–6.15)
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)
ST. JOSEPH MEDICAL CTR (11961)			
2015	0	0.78	0.00 (0.00–4.67)
2014	1	0.70	1.42 (0.02–7.89)
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)
UPMC BEDFORD (11680)			
2015	0	0.79	0.00 (0.00–4.62)
2014	0	0.74	0.00 (0.00–4.99)
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)

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

	Number of SSIs (HYST)	Predicted Number of SSIs (HYST)	SIR (95% CI)
FORBES HOSPITAL (11265)			
2015	2	0.82	2.43 (0.27–8.79)
2014	2	1.65	1.21 (0.14–4.37)
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)
HERITAGE VALLEY BEAVER (11831)			
2015	5	0.85	5.91 (1.91–13.80)
2014	1	0.91	1.10 (0.01–6.10)
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)
HOLY REDEEMER HOSPITAL (11973)			
2015	0	0.85	0.00 (0.00–4.32)
2014	1	0.98	1.02 (0.01–5.70)
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)
WILKES-BARRE GENERAL HOSPITAL (11916)			
2015	1	0.87	1.14 (0.01–6.37)
2014	4	2.43	1.65 (0.44–4.22)
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)
MOUNT NITTANY MEDICAL CENTER (11797)			
2015	0	0.92	0.00 (0.00–3.97)
2014	0	1.04	0.00 (0.00–3.54)
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)
PENN HIGHLANDS DUBOIS (11606)			
2015	0	0.94	0.00 (0.00–3.92)
2014	1	1.35	0.74 (0.01–4.11)
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)
RIDDLE MEMORIAL HOSPITAL (11731)			
2015	0	0.95	0.00 (0.00–3.84)
2014	0	0.99	0.00 (0.00–3.72)
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)

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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)			
2015	1	0.97	1.03 (0.01–5.73)
2014	0	0.72	0.00 (0.00–5.10)
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)			
2015	2	1.02	1.97 (0.22–7.11)
2014	3	0.69	4.36 (0.88–12.73)
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)
CHESTNUT HILL HOSPITAL (12304)			
2015	0	1.05	0.00 (0.00–3.49)
2014	1	1.16	0.86 (0.01–4.81)
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)
MERCY SUBURBAN HOSPITAL (11952)			
2015	2	1.07	1.87 (0.21–6.75)
2014	3	0.83	3.60 (0.72–10.52)
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)
ST. CLAIR MEMORIAL HOSPITAL (10561)			
2015	2	1.07	1.86 (0.21–6.73)
2014	0	1.23	0.00 (0.00–2.98)
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)
EINSTEIN MEDICAL CENTER MONTGOMERY (30210)			
2015	1	1.10	0.91 (0.01–5.06)
2014	2	1.70	1.17 (0.13–4.24)
2013	1	1.32	0.76 (0.01–4.21)
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
BUTLER MEMORIAL HOSPITAL (11736)			
2015	2	1.10	1.81 (0.20–6.55)
2014	2	1.15	1.74 (0.20–6.28)
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)
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)			
2015	3	1.16	2.59 (0.52–7.56)
2014	0	0.77	0.00 (0.00–4.79)
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)
GEISINGER-LEWISTOWN HOSPITAL (11825)			
2015	2	1.17	1.71 (0.19–6.16)
2014	0	2.16	0.00 (0.00–1.70)
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)
JEFFERSON HOSPITAL (10237)			
2015	0	1.17	0.00 (0.00–3.13)
2014	2	0.26	7.80 (0.88–28.15)
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)
UPMC PRESBYTERIAN SHADYSIDE - SHADYSIDE (10118)			
2015	1	1.18	0.85 (0.01–4.72)
2014	0	1.18	0.00 (0.00–3.12)
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)
ARIA HEALTH (11388)			
2015	1	1.19	0.84 (0.01–4.66)
2014	0	1.68	0.00 (0.00–2.18)
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)
CARLISLE REGIONAL MEDICAL CENTER (11997)			
2015	1	1.20	0.83 (0.01–4.63)
2014	1	1.61	0.62 (0.01–3.46)
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)
ALBERT EINSTEIN MEDICAL CENTER (10585)			
2015	1	1.22	0.82 (0.01–4.56)
2014	1	1.46	0.69 (0.01–3.81)
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)

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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)
SAINT VINCENT HOSPITAL (11699)			
2015	4	1.22	3.27 (0.88–8.38)
2014	0	1.54	0.00 (0.00–2.39)
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)
UNIONTOWN HOSPITAL (10441)			
2015	0	1.28	0.00 (0.00–2.87)
2014	1	1.63	0.61 (0.01–3.41)
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)
EXCELA HEALTH LATROBE HOSPITAL (11651)			
2015	0	1.32	0.00 (0.00–2.78)
2014	1	1.13	0.88 (0.01–4.91)
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)
MEMORIAL HOSPITAL (11633)			
2015	0	1.37	0.00 (0.00–2.67)
2014	0	1.13	0.00 (0.00–3.24)
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)
SACRED HEART HOSPITAL (11684)			
2015	2	1.49	1.35 (0.15–4.86)
2014	1	1.68	0.60 (0.01–3.32)
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)
UPMC HAMOT (11725)			
2015	3	1.49	2.02 (0.41–5.90)
2014	2	1.85	1.08 (0.12–3.90)
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)
HEART OF LANCASTER REGIONAL MEDICAL CENTER (12571)			
2015	1	1.50	0.67 (0.01–3.71)
2014	3	2.04	1.47 (0.30–4.30)
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)

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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 MERCY (10384)			
2015	1	1.52	0.66 (0.01–3.66)
2014	4	3.52	1.14 (0.31–2.91)
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)
REGIONAL HOSPITAL OF SCRANTON (12533)			
2015	0	1.54	0.00 (0.00–2.39)
2014	0	0.79	0.00 (0.00–4.62)
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)
WASHINGTON HOSPITAL, THE (11460)			
2015	0	1.69	0.00 (0.00–2.16)
2014	1	2.72	0.37 (0.00–2.04)
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. MARY MEDICAL CENTER (11885)			
2015	2	1.70	1.18 (0.13–4.26)
2014	2	2.08	0.96 (0.11–3.48)
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)
EPHRATA COMMUNITY HOSPITAL (11764)			
2015	2	1.74	1.15 (0.13–4.15)
2014	1	1.78	0.56 (0.01–3.12)
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)
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)			
2015	0	1.76	0.00 (0.00–2.09)
2014	1	1.90	0.53 (0.01–2.93)
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)
MAIN LINE HOSPITAL - PAOLI (11750)			
2015	4	1.79	2.23 (0.60–5.72)
2014	0	2.40	0.00 (0.00–1.53)
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)
POCONO MEDICAL CENTER (11772)			
2015	0	1.81	0.00 (0.00–2.03)
2014	0	1.53	0.00 (0.00–2.39)
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)
UPMC ALTOONA (10178)			
2015	8	1.85	4.33 (1.86–8.53)
2014	8	1.80	4.45 (1.92–8.78)
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)
CROZER CHESTER MEDICAL CENTER (11839)			
2015	0	1.91	0.00 (0.00–1.92)
2014	2	2.21	0.91 (0.10–3.27)
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)
SCHUYLKILL MEDICAL CENTER - SOUTH JACKSON STREET (12087)			
2015	1	2.09	0.48 (0.01–2.67)
2014	4	2.49	1.61 (0.43–4.12)
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)
MOSES TAYLOR HOSPITAL (11528)			
2015	2	2.24	0.89 (0.10–3.22)
2014	2	2.77	0.72 (0.08–2.61)
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)
ST. LUKES HOSPITAL BETHLEHEM (11718)			
2015	3	2.26	1.33 (0.27–3.88)
2014	4	2.65	1.51 (0.41–3.86)
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)
LEHIGH VALLEY HOSPITAL - MUHLENBERG (11898)			
2015	0	2.47	0.00 (0.00–1.48)
2014	1	3.24	0.31 (0.00–1.72)
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)
TEMPLE UNIVERSITY HOSPITAL (12382)			
2015	1	2.48	0.40 (0.01–2.24)
2014	3	3.43	0.87 (0.18–2.56)
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)
CONEMAUGH MEMORIAL MEDICAL CENTER (10280)			
2015	0	2.56	0.00 (0.00–1.43)
2014	1	2.63	0.38 (0.00–2.11)
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)
HAHNEMANN UNIVERSITY HOSPITAL (11437)			
2015	3	2.74	1.09 (0.22–3.19)
2014	5	2.48	2.01 (0.65–4.70)
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)
LANCASTER GENERAL HOSPITAL (10183)			
2015	1	2.90	0.34 (0.00–1.92)
2014	11	4.79	2.30 (1.14–4.11)
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)
UPMC PASSAVANT (11242)			
2015	3	3.03	0.99 (0.20–2.89)
2014	1	4.71	0.21 (0.00–1.18)
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)
CHESTER COUNTY HOSPITAL (12016)			
2015	0	3.17	0.00 (0.00–1.16)
2014	2	2.59	0.77 (0.09–2.79)
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)
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)			
2015	0	3.23	0.00 (0.00–1.14)
2014	3	3.75	0.80 (0.16–2.34)
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)

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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 UNIVERSITY HOSPITAL (11506)			
2015	6	3.27	1.83 (0.67–3.99)
2014	13	4.76	2.73 (1.45–4.67)
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)
PINNACLE HEALTH HOSPITALS - HARRISBURG HOSPITAL (34068)			
2015	1	3.29	0.30 (0.00–1.69)
2014	3	5.90	0.51 (0.10–1.49)
2013	.	.	.
2012	.	.	.
2011	.	.	.
2010	.	.	.
2009	.	.	.
HOSPITAL OF FOX CHASE CANCER CENTER (12134)			
2015	4	3.77	1.06 (0.29–2.72)
2014	5	4.48	1.12 (0.36–2.60)
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)
MILTON S HERSHEY MEDICAL CENTER (11747)			
2015	0	3.91	0.00 (0.00–0.94)
2014	2	5.21	0.38 (0.04–1.39)
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)
GEISINGER MEDICAL CENTER (11775)			
2015	6	4.42	1.36 (0.50–2.95)
2014	9	2.84	3.17 (1.45–6.02)
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)
HOSPITAL OF THE UNIVERSITY OF PENNSYLVANIA (10219)			
2015	6	4.49	1.34 (0.49–2.91)
2014	5	5.44	0.92 (0.30–2.15)
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)
PINNACLE HEALTH HOSPITALS - WEST SHORE HOSPITAL (35123)			
2015	4	4.52	0.88 (0.24–2.26)
2014	.	.	.
2013	.	.	.
2012	.	.	.
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)
ABINGTON MEMORIAL HOSPITAL (11838)			
2015	3	4.83	0.62 (0.12–1.81)
2014	4	6.96	0.57 (0.15–1.47)
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)
PENNSYLVANIA HOSPITAL OF THE UNIVERSITY OF PA HEALTH SYS (11448)			
2015	7	4.90	1.43 (0.57–2.95)
2014	8	6.85	1.17 (0.50–2.30)
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)
READING HOSPITAL (12375)			
2015	8	5.60	1.43 (0.61–2.81)
2014	2	7.39	0.27 (0.03–0.98)
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)
YORK HOSPITAL (10108)			
2015	8	6.02	1.33 (0.57–2.62)
2014	11	7.38	1.49 (0.74–2.67)
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)
WEST PENN HOSPITAL (11864)			
2015	14	7.25	1.93 (1.05–3.24)
2014	11	6.80	1.62 (0.81–2.89)
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)
LEHIGH VALLEY HOSPITAL (11884)			
2015	6	8.28	0.72 (0.26–1.58)
2014	4	10.24	0.39 (0.11–1.00)
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)			
2015	4	11.87	0.34 (0.09–0.86)
2014	7	15.03	0.47 (0.19–0.96)
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 (Ordered by Predicted Infections) — Pennsylvania, 2009–2015

	Number of SSIs (COLO)	Predicted Number of SSIs (COLO)	SIR (95% CI)
MUNCY VALLEY HOSPITAL (11748)			
2015	.	.	.
2014	.	.	.
2013	1	0.31	3.21 (0.04–17.88)
2012	0	0.35	0.00 (0.00–10.59)
TROY COMMUNITY HOSPITAL (12018)			
2015	.	.	.
2014	.	.	.
2013	0	0.06	0.00 (0.00–60.22)
2012	0	0.05	0.00 (0.00–67.52)
CONEMAUGH MINERS MEDICAL CENTER (12295)			
2015	.	.	.
2014	0	0.12	0.00 (0.00–31.63)
2013	0	0.10	0.00 (0.00–36.36)
2012	0	0.32	0.00 (0.00–11.35)
BARNES-KASSON COUNTY HOSPITAL (12404)			
2015	.	.	.
2014	0	0.13	0.00 (0.00–28.32)
2013	.	.	.
2012	0	0.05	0.00 (0.00–67.52)
PHYSICIANS CARE SURGICAL HOSPITAL (19630)			
2015	.	.	.
2014	.	.	.
2013	0	0.37	0.00 (0.00–9.85)
2012	0	0.39	0.00 (0.00–9.37)
TYRONE HOSPITAL (12717)			
2015	1	0.07	15.24 (0.20–84.79)
2014	0	0.13	0.00 (0.00–28.60)
2013	0	0.34	0.00 (0.00–10.89)
2012	0	0.08	0.00 (0.00–44.60)
PENN HIGHLANDS BROOKVILLE (12418)			
2015	1	0.10	10.35 (0.14–57.58)
2014	0	0.17	0.00 (0.00–21.56)
2013	1	0.30	3.35 (0.04–18.63)
2012	0	0.40	0.00 (0.00–9.08)
CORRY MEMORIAL HOSPITAL (12283)			
2015	0	0.10	0.00 (0.00–35.96)
2014	0	0.03	0.00 (0.00–114.40)
2013	0	0.04	0.00 (0.00–82.95)
2012	0	0.38	0.00 (0.00–9.57)
CROZER CHESTER MEDICAL CENTER - SPRINGFIELD (11851)			
2015	0	0.11	0.00 (0.00–32.20)
2014	0	0.21	0.00 (0.00–17.19)
2013	0	0.73	0.00 (0.00–5.06)
2012	0	0.53	0.00 (0.00–6.98)
GROVE CITY MEDICAL CENTER (11722)			
2015	0	0.12	0.00 (0.00–29.61)
2014	0	0.34	0.00 (0.00–10.79)
2013	0	0.27	0.00 (0.00–13.41)
2012	1	0.55	1.81 (0.02–10.06)

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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. JOSEPHS HOSPITAL (12438)			
2015	0	0.18	0.00 (0.00–20.66)
2014	1	0.42	2.41 (0.03–13.40)
2013	0	0.49	0.00 (0.00–7.45)
2012	0	0.67	0.00 (0.00–5.45)
SURGICAL INSTITUTE OF READING (12535)			
2015	0	0.21	0.00 (0.00–17.27)
2014	0	0.19	0.00 (0.00–19.07)
2013	0	0.40	0.00 (0.00–9.18)
2012	2	0.34	5.84 (0.66–21.09)
SOUTHWEST REGIONAL MEDICAL CENTER (11942)			
2015	0	0.28	0.00 (0.00–13.07)
2014			
2013	0	1.70	0.00 (0.00–2.16)
2012	0	2.10	0.00 (0.00–1.75)
LOCK HAVEN HOSPITAL (12097)			
2015	0	0.28	0.00 (0.00–13.07)
2014	0	0.12	0.00 (0.00–31.63)
2013	0	0.11	0.00 (0.00–34.89)
2012	0	0.27	0.00 (0.00–13.39)
BERWICK HOSPITAL CENTER (11442)			
2015	0	0.35	0.00 (0.00–10.60)
2014	0	0.16	0.00 (0.00–22.70)
2013	0	0.06	0.00 (0.00–60.22)
2012	0	0.28	0.00 (0.00–12.90)
PUNXSUTAWNEY AREA HOSPITAL (11830)			
2015	0	0.37	0.00 (0.00–9.84)
2014	0	0.64	0.00 (0.00–5.77)
2013	0	0.77	0.00 (0.00–4.79)
2012	4	1.02	3.92 (1.05–10.03)
TITUSVILLE AREA HOSPITAL (11738)			
2015	1	0.39	2.58 (0.03–14.33)
2014			
2013	2	0.69	2.88 (0.32–10.40)
2012	2	0.55	3.67 (0.41–13.24)
GUTHRIE TOWANDA MEMORIAL HOSPITAL (12549)			
2015	2	0.42	4.79 (0.54–17.30)
2014	0	0.13	0.00 (0.00–28.32)
2013	1	0.28	3.55 (0.05–19.73)
2012	1	0.15	6.77 (0.09–37.68)
CHARLES COLE MEMORIAL HOSPITAL (11956)			
2015	0	0.43	0.00 (0.00–8.53)
2014	1	0.40	2.53 (0.03–14.07)
2013	1	1.19	0.84 (0.01–4.66)
2012	3	0.66	4.55 (0.91–13.28)
ROXBOROUGH MEMORIAL HOSPITAL (11978)			
2015	0	0.44	0.00 (0.00–8.39)
2014	0	0.46	0.00 (0.00–7.98)
2013	0	0.70	0.00 (0.00–5.21)
2012	0	0.50	0.00 (0.00–7.35)
SUNBURY COMMUNITY HOSP (12105)			
2015	0	0.47	0.00 (0.00–7.81)
2014	0	0.57	0.00 (0.00–6.44)
2013	1	0.82	1.22 (0.02–6.80)
2012	2	0.88	2.27 (0.26–8.20)

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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)			
2015	0	0.48	0.00 (0.00–7.65)
2014	0	0.50	0.00 (0.00–7.27)
2013	1	0.46	2.17 (0.03–12.08)
2012	1	0.47	2.12 (0.03–11.81)
KANE COMMUNITY HOSPITAL (12111)			
2015	0	0.51	0.00 (0.00–7.24)
2014	1	0.16	6.07 (0.08–33.78)
2013	0	0.27	0.00 (0.00–13.62)
2012	0	0.38	0.00 (0.00–9.63)
ST. LUKES MINERS MEMORIAL HOSPITAL (11784)			
2015	0	0.53	0.00 (0.00–6.88)
2014	1	0.70	1.43 (0.02–7.97)
2013	0	0.69	0.00 (0.00–5.35)
2012	1	0.73	1.37 (0.02–7.61)
GEISINGER-BLOOMSBURG HOSPITAL (12008)			
2015	0	0.55	0.00 (0.00–6.62)
2014	2	0.93	2.15 (0.24–7.75)
2013	2	1.55	1.29 (0.14–4.66)
2012	1	1.03	0.97 (0.01–5.42)
GNADEN HUETTEN MEMORIAL HOSPITAL (12241)			
2015	1	0.55	1.80 (0.02–10.03)
2014	3	0.56	5.39 (1.08–15.75)
2013	2	0.83	2.40 (0.27–8.68)
2012	3	1.33	2.25 (0.45–6.58)
PENN HIGHLANDS ELK (11859)			
2015	0	0.68	0.00 (0.00–5.40)
2014	2	0.73	2.73 (0.31–9.87)
2013	0	0.74	0.00 (0.00–4.93)
2012	1	0.65	1.55 (0.02–8.61)
JERSEY SHORE HOSPITAL (11689)			
2015	0	0.70	0.00 (0.00–5.26)
2014	1	0.59	1.70 (0.02–9.48)
2013	1	0.79	1.27 (0.02–7.07)
2012	1	0.70	1.43 (0.02–7.98)
ELLWOOD CITY HOSPITAL (11779)			
2015	0	0.70	0.00 (0.00–5.24)
2014	1	0.86	1.16 (0.02–6.47)
2013	0	0.31	0.00 (0.00–11.95)
2012	0	0.82	0.00 (0.00–4.47)
LOWER BUCKS HOSPITAL (12390)			
2015	0	0.73	0.00 (0.00–5.01)
2014	0	1.08	0.00 (0.00–3.41)
2013	0	1.10	0.00 (0.00–3.32)
2012	0	1.01	0.00 (0.00–3.64)
WAYNESBORO HOSPITAL (11642)			
2015	1	0.84	1.20 (0.02–6.66)
2014	1	0.68	1.46 (0.02–8.14)
2013	0	0.46	0.00 (0.00–8.00)
2012	2	0.92	2.17 (0.24–7.85)
HEART OF LANCASTER REGIONAL MEDICAL CENTER (12571)			
2015	2	0.84	2.38 (0.27–8.59)
2014	2	0.61	3.31 (0.37–11.93)
2013	0	0.72	0.00 (0.00–5.07)
2012	3	1.02	2.95 (0.59–8.62)

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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)
SOLDIERS AND SAILORS MEMORIAL HOSPITAL (11688)			
2015	3	0.91	3.29 (0.66–9.61)
2014	0	0.72	0.00 (0.00–5.10)
2013	2	1.38	1.45 (0.16–5.23)
2012	4	1.10	3.64 (0.98–9.33)
WARREN GENERAL HOSPITAL (12216)			
2015	2	0.93	2.15 (0.24–7.78)
2014	6	1.46	4.12 (1.51–8.98)
2013	3	0.81	3.69 (0.74–10.79)
2012	2	0.88	2.28 (0.26–8.22)
SACRED HEART HOSPITAL (11684)			
2015	2	0.95	2.11 (0.24–7.60)
2014	0	0.41	0.00 (0.00–9.05)
2013	2	1.40	1.43 (0.16–5.15)
2012	3	1.59	1.89 (0.38–5.52)
HIGHLANDS HOSPITAL (11902)			
2015	0	1.02	0.00 (0.00–3.59)
2014	4	2.20	1.82 (0.49–4.66)
2013	0	0.69	0.00 (0.00–5.34)
2012	3	0.93	3.22 (0.65–9.41)
PALMERTON HOSPITAL (12396)			
2015	0	1.06	0.00 (0.00–3.47)
2014	5	1.73	2.90 (0.93–6.76)
2013	3	1.35	2.23 (0.45–6.52)
2012	1	1.07	0.93 (0.01–5.20)
EINSTEIN AT ELKINS PARK (12500)			
2015	1	1.07	0.94 (0.01–5.21)
2014	3	2.09	1.43 (0.29–4.19)
2013	1	2.14	0.47 (0.01–2.60)
2012	2	1.25	1.61 (0.18–5.80)
BRADFORD REGIONAL MEDICAL CENTER (12361)			
2015	1	1.09	0.92 (0.01–5.13)
2014	0	0.93	0.00 (0.00–3.93)
2013	2	0.73	2.75 (0.31–9.92)
2012	1	1.04	0.97 (0.01–5.37)
ST. LUKES QUAKERTOWN HOSPITAL (11711)			
2015	1	1.12	0.89 (0.01–4.97)
2014	1	1.08	0.93 (0.01–5.16)
2013	1	1.19	0.84 (0.01–4.66)
2012	1	1.12	0.89 (0.01–4.98)
TYLER MEMORIAL HOSPITAL (11829)			
2015	1	1.13	0.88 (0.01–4.92)
2014	0	0.50	0.00 (0.00–7.40)
2013	0	0.47	0.00 (0.00–7.77)
2012	0	0.39	0.00 (0.00–9.38)
PENN HIGHLANDS CLEARFIELD (11843)			
2015	0	1.14	0.00 (0.00–3.23)
2014	1	1.47	0.68 (0.01–3.78)
2013	0	2.22	0.00 (0.00–1.65)
2012	2	2.33	0.86 (0.10–3.11)
J C BLAIR MEMORIAL HOSPITAL (11724)			
2015	5	1.15	4.36 (1.40–10.17)
2014	4	0.61	6.53 (1.76–16.72)
2013	1	0.37	2.70 (0.04–15.04)
2012	2	0.33	6.11 (0.69–22.05)

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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)
MILLCREEK COMMUNITY HOSPITAL (12253)			
2015	0	1.20	0.00 (0.00–3.07)
2014	0	0.52	0.00 (0.00–7.08)
2013	0	0.38	0.00 (0.00–9.58)
2012	0	0.23	0.00 (0.00–15.95)
EXCELA HEALTH FRICK HOSPITAL (11639)			
2015	1	1.21	0.82 (0.01–4.59)
2014	1	1.70	0.59 (0.01–3.28)
2013	2	2.04	0.98 (0.11–3.54)
2012	1	1.24	0.81 (0.01–4.48)
NASON HOSPITAL (11907)			
2015	0	1.23	0.00 (0.00–2.97)
2014	3	1.28	2.35 (0.47–6.85)
2013	6	1.70	3.53 (1.29–7.69)
2012	0	1.74	0.00 (0.00–2.11)
MEMORIAL HOSPITAL (11633)			
2015	2	1.24	1.62 (0.18–5.84)
2014	0	1.26	0.00 (0.00–2.91)
2013	6	2.07	2.90 (1.06–6.32)
2012	5	1.78	2.81 (0.91–6.55)
CROZER CHESTER MEDICAL CENTER - TAYLOR (11932)			
2015	1	1.45	0.69 (0.01–3.84)
2014	3	2.18	1.37 (0.28–4.02)
2013	1	4.22	0.24 (0.00–1.32)
2012	3	2.31	1.30 (0.26–3.80)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)			
2015	4	1.52	2.62 (0.71–6.72)
2014	2	0.77	2.60 (0.29–9.37)
2013	3	2.30	1.31 (0.26–3.82)
2012	5	2.02	2.48 (0.80–5.78)
MEADVILLE MEDICAL CENTER (11583)			
2015	3	1.65	1.82 (0.37–5.32)
2014	0	1.29	0.00 (0.00–2.85)
2013	2	2.63	0.76 (0.09–2.74)
2012	1	2.56	0.39 (0.01–2.18)
JENNERSVILLE REGIONAL HOSPITAL (12337)			
2015	0	1.77	0.00 (0.00–2.08)
2014	0	1.55	0.00 (0.00–2.36)
2013	2	1.93	1.04 (0.12–3.74)
2012	2	1.33	1.50 (0.17–5.43)
ARMSTRONG COUNTY MEMORIAL HOSPITAL (12057)			
2015	0	1.77	0.00 (0.00–2.07)
2014	4	2.35	1.70 (0.46–4.36)
2013	1	2.44	0.41 (0.01–2.28)
2012	2	2.38	0.84 (0.09–3.04)
ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)			
2015	1	1.82	0.55 (0.01–3.06)
2014	1	1.37	0.73 (0.01–4.05)
2013	1	1.56	0.64 (0.01–3.56)
2012	1	1.38	0.72 (0.01–4.02)
CLARION HOSPITAL (11654)			
2015	2	1.82	1.10 (0.12–3.97)
2014	0	1.87	0.00 (0.00–1.96)
2013	1	1.23	0.81 (0.01–4.51)
2012	0	0.64	0.00 (0.00–5.70)

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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)
LANCASTER REGIONAL MEDICAL CENTER (12335)			
2015	1	1.86	0.54 (0.01–2.98)
2014	2	1.70	1.18 (0.13–4.25)
2013	4	2.76	1.45 (0.39–3.71)
2012	2	1.96	1.02 (0.11–3.69)
UPMC NORTHWEST (11837)			
2015	2	1.88	1.06 (0.12–3.84)
2014	3	1.75	1.72 (0.35–5.02)
2013	1	1.96	0.51 (0.01–2.85)
2012	1	1.73	0.58 (0.01–3.22)
SCHUYLKILL MEDICAL CENTER - SOUTH JACKSON STREET (12087)			
2015	0	1.89	0.00 (0.00–1.94)
2014	2	2.68	0.75 (0.08–2.69)
2013	0	2.30	0.00 (0.00–1.59)
2012	2	2.00	1.00 (0.11–3.61)
UPMC MCKEESPORT (11707)			
2015	2	1.92	1.04 (0.12–3.77)
2014	0	2.86	0.00 (0.00–1.28)
2013	0	2.78	0.00 (0.00–1.32)
2012	2	2.45	0.82 (0.09–2.94)
OHIO VALLEY GENERAL HOSPITAL (12298)			
2015	1	1.92	0.52 (0.01–2.90)
2014	1	1.56	0.64 (0.01–3.56)
2013	1	2.31	0.43 (0.01–2.41)
2012	3	1.54	1.95 (0.39–5.68)
CHESTNUT HILL HOSPITAL (12304)			
2015	3	1.98	1.51 (0.30–4.42)
2014	2	1.65	1.21 (0.14–4.37)
2013	2	1.61	1.24 (0.14–4.49)
2012	1	0.98	1.02 (0.01–5.66)
LANSDALE HOSPITAL (12032)			
2015	0	2.05	0.00 (0.00–1.79)
2014	2	2.66	0.75 (0.08–2.72)
2013	0	2.30	0.00 (0.00–1.59)
2012	0	2.90	0.00 (0.00–1.27)
WINDBER HOSPITAL (12031)			
2015	0	2.11	0.00 (0.00–1.74)
2014	1	2.40	0.42 (0.01–2.32)
2013	1	2.60	0.38 (0.01–2.14)
2012	1	2.36	0.42 (0.01–2.36)
ALLEGHENY VALLEY HOSPITAL (11842)			
2015	3	2.20	1.36 (0.27–3.98)
2014	8	2.94	2.72 (1.17–5.36)
2013	7	3.15	2.22 (0.89–4.58)
2012	3	2.48	1.21 (0.24–3.53)
POTTSTOWN MEMORIAL MEDICAL CENTER (11983)			
2015	2	2.34	0.85 (0.10–3.08)
2014	4	1.38	2.89 (0.78–7.40)
2013	1	2.95	0.34 (0.00–1.89)
2012	0	3.51	0.00 (0.00–1.05)
GEISINGER-LEWISTOWN HOSPITAL (11825)			
2015	2	2.35	0.85 (0.10–3.07)
2014	6	3.18	1.89 (0.69–4.11)
2013	1	2.70	0.37 (0.00–2.06)
2012	5	2.63	1.90 (0.61–4.43)

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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)
WAYNE MEMORIAL HOSPITAL (12004)			
2015	1	2.43	0.41 (0.01–2.29)
2014	4	2.21	1.81 (0.49–4.64)
2013	5	2.62	1.91 (0.61–4.45)
2012	6	2.40	2.50 (0.91–5.43)
THOMAS JEFFERSON UNIVERSITY HOSPITAL - METHODIST (12017)			
2015	4	2.57	1.55 (0.42–3.98)
2014	1	3.28	0.30 (0.00–1.70)
2013	1	2.23	0.45 (0.01–2.50)
2012	1	1.29	0.78 (0.01–4.32)
EPHRATA COMMUNITY HOSPITAL (11764)			
2015	3	2.59	1.16 (0.23–3.39)
2014	3	2.38	1.26 (0.25–3.68)
2013	7	4.03	1.74 (0.70–3.58)
2012	4	3.93	1.02 (0.27–2.61)
SOMERSET HOSPITAL (12282)			
2015	3	2.59	1.16 (0.23–3.38)
2014	0	2.73	0.00 (0.00–1.35)
2013	2	2.54	0.79 (0.09–2.84)
2012	1	2.16	0.46 (0.01–2.57)
ST. LUKES HOSPITAL- ANDERSON CAMPUS (21487)			
2015	2	2.60	0.77 (0.09–2.78)
2014	3	1.62	1.85 (0.37–5.41)
2013	1	0.97	1.03 (0.01–5.74)
2012	1	1.06	0.94 (0.01–5.24)
MERCY PHILADELPHIA HOSPITAL (11946)			
2015	0	2.75	0.00 (0.00–1.33)
2014	0	2.35	0.00 (0.00–1.56)
2013	4	2.91	1.37 (0.37–3.52)
2012	2	2.82	0.71 (0.08–2.56)
CANONSBURG HOSPITAL (11586)			
2015	1	2.77	0.36 (0.00–2.01)
2014	5	2.67	1.88 (0.60–4.38)
2013	0	2.89	0.00 (0.00–1.27)
2012	2	2.95	0.68 (0.08–2.45)
EASTERN REGIONAL MEDICAL CENTER (12348)			
2015	4	2.91	1.38 (0.37–3.52)
2014	7	4.25	1.65 (0.66–3.40)
2013	19	3.62	5.25 (3.16–8.21)
2012	13	3.03	4.30 (2.29–7.35)
EVANGELICAL COMMUNITY HOSPITAL (11701)			
2015	3	2.91	1.03 (0.21–3.01)
2014	3	2.45	1.22 (0.25–3.58)
2013	12	3.89	3.09 (1.59–5.39)
2012	4	2.61	1.53 (0.41–3.92)
MERCY SUBURBAN HOSPITAL (11952)			
2015	4	3.05	1.31 (0.35–3.35)
2014	2	2.98	0.67 (0.08–2.42)
2013	2	3.74	0.53 (0.06–1.93)
2012	0	3.81	0.00 (0.00–0.96)
JEANES HOSPITAL (11459)			
2015	3	3.06	0.98 (0.20–2.87)
2014	1	1.50	0.67 (0.01–3.71)
2013	2	3.17	0.63 (0.07–2.28)
2012	1	3.56	0.28 (0.00–1.56)

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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)
EINSTEIN MEDICAL CENTER MONTGOMERY (30210)			
2015	2	3.07	0.65 (0.07–2.35)
2014	2	4.04	0.49 (0.06–1.79)
2013	0	2.84	0.00 (0.00–1.29)
2012	.	.	.
JAMESON MEMORIAL HOSPITAL (11954)			
2015	3	3.09	0.97 (0.20–2.84)
2014	3	3.47	0.87 (0.17–2.53)
2013	2	2.16	0.93 (0.10–3.34)
2012	4	3.72	1.08 (0.29–2.76)
INDIANA REGIONAL MEDICAL CENTER (11759)			
2015	0	3.12	0.00 (0.00–1.18)
2014	2	4.34	0.46 (0.05–1.66)
2013	3	3.03	0.99 (0.20–2.89)
2012	4	3.32	1.21 (0.32–3.09)
EASTON HOSPITAL (11929)			
2015	7	3.18	2.20 (0.88–4.54)
2014	7	4.33	1.62 (0.65–3.33)
2013	3	4.39	0.68 (0.14–2.00)
2012	4	3.98	1.00 (0.27–2.57)
HOLY SPIRIT HOSPITAL (12387)			
2015	4	3.25	1.23 (0.33–3.15)
2014	5	2.73	1.83 (0.59–4.27)
2013	5	7.65	0.65 (0.21–1.53)
2012	4	6.89	0.58 (0.16–1.49)
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)			
2015	1	3.33	0.30 (0.00–1.67)
2014	1	4.06	0.25 (0.00–1.37)
2013	2	5.66	0.35 (0.04–1.28)
2012	2	5.58	0.36 (0.04–1.29)
NAZARETH HOSPITAL (11919)			
2015	0	3.36	0.00 (0.00–1.09)
2014	3	3.81	0.79 (0.16–2.30)
2013	6	4.66	1.29 (0.47–2.80)
2012	4	4.11	0.97 (0.26–2.49)
HANOVER HOSPITAL (11899)			
2015	4	3.38	1.18 (0.32–3.03)
2014	2	2.24	0.89 (0.10–3.22)
2013	0	2.46	0.00 (0.00–1.49)
2012	6	2.22	2.70 (0.99–5.88)
UPMC HORIZON (11675)			
2015	1	3.43	0.29 (0.00–1.62)
2014	0	3.29	0.00 (0.00–1.12)
2013	1	3.35	0.30 (0.00–1.66)
2012	2	3.09	0.65 (0.07–2.34)
SHARON REGIONAL HEALTH SYSTEM (12250)			
2015	3	3.44	0.87 (0.18–2.55)
2014	5	3.03	1.65 (0.53–3.85)
2013	2	2.27	0.88 (0.10–3.18)
2012	3	2.36	1.27 (0.26–3.72)
UPMC EAST (28812)			
2015	3	3.49	0.86 (0.17–2.51)
2014	2	3.16	0.63 (0.07–2.28)
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)
MERCY FITZGERALD HOSPITAL (11683)			
2015	2	3.52	0.57 (0.06–2.05)
2014	4	3.35	1.19 (0.32–3.06)
2013	6	3.98	1.51 (0.55–3.28)
2012	2	3.59	0.56 (0.06–2.01)
SCHUYLKILL MEDICAL CENTER - EAST NORWEGIAN STREET (11922)			
2015	4	3.61	1.11 (0.30–2.84)
2014	2	3.06	0.65 (0.07–2.36)
2013	3	4.90	0.61 (0.12–1.79)
2012	2	3.21	0.62 (0.07–2.25)
CARLISLE REGIONAL MEDICAL CENTER (11997)			
2015	1	3.68	0.27 (0.00–1.51)
2014	2	4.16	0.48 (0.05–1.74)
2013	4	2.84	1.41 (0.38–3.60)
2012	4	3.11	1.29 (0.35–3.30)
MOSES TAYLOR HOSPITAL (11528)			
2015	0	3.72	0.00 (0.00–0.99)
2014	2	4.31	0.46 (0.05–1.68)
2013	2	4.76	0.42 (0.05–1.52)
2012	3	4.52	0.66 (0.13–1.94)
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)			
2015	7	3.75	1.87 (0.75–3.85)
2014	6	5.29	1.14 (0.41–2.47)
2013	0	4.97	0.00 (0.00–0.74)
2012	5	3.85	1.30 (0.42–3.03)
MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)			
2015	0	3.75	0.00 (0.00–0.98)
2014	2	4.29	0.47 (0.05–1.68)
2013	2	4.50	0.44 (0.05–1.60)
2012	5	5.64	0.89 (0.29–2.07)
MONONGAHELA VALLEY HOSPITAL (11069)			
2015	4	3.78	1.06 (0.28–2.71)
2014	7	3.75	1.87 (0.75–3.84)
2013	9	4.08	2.20 (1.01–4.18)
2012	4	3.72	1.08 (0.29–2.75)
GETTYSBURG HOSPITAL (11531)			
2015	3	3.97	0.76 (0.15–2.21)
2014	5	2.76	1.81 (0.58–4.23)
2013	3	1.86	1.61 (0.32–4.71)
2012	2	2.54	0.79 (0.09–2.84)
ST. JOSEPH MEDICAL CTR (11961)			
2015	6	4.24	1.42 (0.52–3.08)
2014	1	2.66	0.38 (0.00–2.09)
2013	4	3.81	1.05 (0.28–2.69)
2012	5	3.60	1.39 (0.45–3.24)
UNIONTOWN HOSPITAL (10441)			
2015	1	4.40	0.23 (0.00–1.26)
2014	4	4.70	0.85 (0.23–2.18)
2013	7	5.74	1.22 (0.49–2.51)
2012	6	5.19	1.16 (0.42–2.52)
CHAMBERSBURG HOSPITAL (11913)			
2015	6	4.44	1.35 (0.49–2.94)
2014	8	3.97	2.02 (0.87–3.97)
2013	7	4.12	1.70 (0.68–3.50)
2012	3	5.27	0.57 (0.11–1.66)

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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)
BRANDYWINE HOSPITAL (11979)			
2015	2	4.54	0.44 (0.05–1.59)
2014	2	2.95	0.68 (0.08–2.45)
2013	2	4.40	0.45 (0.05–1.64)
2012	3	3.32	0.90 (0.18–2.64)
MOUNT NITTANY MEDICAL CENTER (11797)			
2015	4	4.61	0.87 (0.23–2.22)
2014	6	6.08	0.99 (0.36–2.15)
2013	2	4.83	0.41 (0.05–1.50)
2012	2	4.46	0.45 (0.05–1.62)
GOOD SAMARITAN HOSPITAL, THE (11712)			
2015	4	4.75	0.84 (0.23–2.16)
2014	1	4.03	0.25 (0.00–1.38)
2013	5	4.08	1.23 (0.40–2.86)
2012	2	3.32	0.60 (0.07–2.18)
HOLY REDEEMER HOSPITAL (11973)			
2015	4	4.75	0.84 (0.23–2.16)
2014	1	4.79	0.21 (0.00–1.16)
2013	1	4.74	0.21 (0.00–1.17)
2012	3	3.48	0.86 (0.17–2.52)
EXCELA HEALTH LATROBE HOSPITAL (11651)			
2015	3	4.96	0.61 (0.12–1.77)
2014	6	7.18	0.84 (0.31–1.82)
2013	4	5.03	0.79 (0.21–2.03)
2012	4	4.22	0.95 (0.26–2.43)
HERITAGE VALLEY SEWICKLEY (10375)			
2015	4	5.09	0.79 (0.21–2.01)
2014	3	4.23	0.71 (0.14–2.07)
2013	9	5.45	1.65 (0.75–3.14)
2012	7	4.43	1.58 (0.63–3.26)
GRAND VIEW HOSPITAL (11847)			
2015	5	5.34	0.94 (0.30–2.18)
2014	3	3.15	0.95 (0.19–2.78)
2013	4	3.29	1.22 (0.33–3.11)
2012	2	4.43	0.45 (0.05–1.63)
WEST PENN HOSPITAL (11864)			
2015	2	5.38	0.37 (0.04–1.34)
2014	2	3.49	0.57 (0.06–2.07)
2013	3	2.36	1.27 (0.26–3.72)
2012	1	1.09	0.91 (0.01–5.08)
ALBERT EINSTEIN MEDICAL CENTER (10585)			
2015	5	5.39	0.93 (0.30–2.17)
2014	8	5.80	1.38 (0.59–2.72)
2013	4	4.95	0.81 (0.22–2.07)
2012	4	4.26	0.94 (0.25–2.41)
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)			
2015	5	5.43	0.92 (0.30–2.15)
2014	6	5.29	1.13 (0.41–2.47)
2013	5	6.17	0.81 (0.26–1.89)
2012	14	7.65	1.83 (1.00–3.07)
DOYLESTOWN HOSPITAL (10190)			
2015	9	5.44	1.66 (0.76–3.14)
2014	5	5.38	0.93 (0.30–2.17)
2013	3	4.35	0.69 (0.14–2.01)
2012	2	4.20	0.48 (0.05–1.72)

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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)
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)			
2015	1	5.71	0.18 (0.00–0.97)
2014	1	5.29	0.19 (0.00–1.05)
2013	2	7.07	0.28 (0.03–1.02)
2012	3	6.57	0.46 (0.09–1.33)
PENN HIGHLANDS DUBOIS (11606)			
2015	2	5.73	0.35 (0.04–1.26)
2014	5	3.80	1.32 (0.42–3.07)
2013	5	4.38	1.14 (0.37–2.66)
2012	5	4.29	1.17 (0.38–2.72)
LEHIGH VALLEY HOSPITAL - MUHLENBERG (11898)			
2015	6	6.06	0.99 (0.36–2.16)
2014	3	7.82	0.38 (0.08–1.12)
2013	1	5.96	0.17 (0.00–0.93)
2012	6	5.61	1.07 (0.39–2.33)
UPMC MERCY (10384)			
2015	9	6.12	1.47 (0.67–2.79)
2014	23	8.40	2.74 (1.73–4.11)
2013	11	9.16	1.20 (0.60–2.15)
2012	13	9.75	1.33 (0.71–2.28)
RIDDLE MEMORIAL HOSPITAL (11731)			
2015	1	6.21	0.16 (0.00–0.90)
2014	1	4.76	0.21 (0.00–1.17)
2013	2	4.35	0.46 (0.05–1.66)
2012	2	4.57	0.44 (0.05–1.58)
LEHIGH VALLEY HOSPITAL - HAZLETON (11878)			
2015	2	6.38	0.31 (0.04–1.13)
2014	0	4.34	0.00 (0.00–0.85)
2013	2	4.19	0.48 (0.05–1.72)
2012	7	4.71	1.49 (0.60–3.06)
POCONO MEDICAL CENTER (11772)			
2015	10	6.42	1.56 (0.75–2.87)
2014	13	7.10	1.83 (0.97–3.13)
2013	8	6.77	1.18 (0.51–2.33)
2012	2	6.23	0.32 (0.04–1.16)
MAIN LINE HOSPITAL BRYN MAWR (11753)			
2015	5	6.67	0.75 (0.24–1.75)
2014	10	5.84	1.71 (0.82–3.15)
2013	4	5.95	0.67 (0.18–1.72)
2012	1	4.39	0.23 (0.00–1.27)
PINNACLE HEALTH HOSPITALS - COMMUNITY GENERAL OSTEOPATHIC HOSPITAL (34069)			
2015	6	6.82	0.88 (0.32–1.91)
2014	6	5.32	1.13 (0.41–2.45)
2013	.	.	.
2012	.	.	.
HAHNEMANN UNIVERSITY HOSPITAL (11437)			
2015	3	7.03	0.43 (0.09–1.25)
2014	13	8.20	1.59 (0.84–2.71)
2013	9	8.02	1.12 (0.51–2.13)
2012	9	7.56	1.19 (0.54–2.26)
CROZER CHESTER MEDICAL CENTER (11839)			
2015	1	7.10	0.14 (0.00–0.78)
2014	6	6.89	0.87 (0.32–1.90)
2013	6	6.48	0.93 (0.34–2.02)
2012	5	6.25	0.80 (0.26–1.87)

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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)
BUTLER MEMORIAL HOSPITAL (11736)			
2015	6	7.22	0.83 (0.30–1.81)
2014	8	7.07	1.13 (0.49–2.23)
2013	7	4.89	1.43 (0.57–2.95)
2012	6	5.14	1.17 (0.43–2.54)
UPMC ST. MARGARET (11561)			
2015	7	7.32	0.96 (0.38–1.97)
2014	12	9.95	1.21 (0.62–2.11)
2013	6	9.44	0.64 (0.23–1.38)
2012	6	8.58	0.70 (0.26–1.52)
PINNACLE HEALTH HOSPITALS - WEST SHORE HOSPITAL (35123)			
2015	6	8.05	0.75 (0.27–1.62)
2014	.	.	.
2013	.	.	.
2012	.	.	.
UPMC HAMOT (11725)			
2015	12	8.05	1.49 (0.77–2.60)
2014	11	11.43	0.96 (0.48–1.72)
2013	19	11.62	1.63 (0.98–2.55)
2012	12	14.88	0.81 (0.42–1.41)
GEISINGER-COMMUNITY MEDICAL CENTER (11914)			
2015	9	8.10	1.11 (0.51–2.11)
2014	6	4.40	1.36 (0.50–2.97)
2013	5	5.57	0.90 (0.29–2.09)
2012	1	3.72	0.27 (0.00–1.50)
SAINT VINCENT HOSPITAL (11699)			
2015	18	8.36	2.15 (1.28–3.40)
2014	22	9.29	2.37 (1.48–3.58)
2013	16	8.53	1.88 (1.07–3.05)
2012	9	7.09	1.27 (0.58–2.41)
WASHINGTON HOSPITAL, THE (11460)			
2015	2	8.50	0.24 (0.03–0.85)
2014	3	6.28	0.48 (0.10–1.40)
2013	2	6.16	0.32 (0.04–1.17)
2012	4	5.96	0.67 (0.18–1.72)
CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)			
2015	5	8.51	0.59 (0.19–1.37)
2014	2	6.33	0.32 (0.04–1.14)
2013	8	5.78	1.38 (0.60–2.73)
2012	1	4.98	0.20 (0.00–1.12)
FORBES HOSPITAL (11265)			
2015	6	8.68	0.69 (0.25–1.51)
2014	12	9.08	1.32 (0.68–2.31)
2013	7	8.05	0.87 (0.35–1.79)
2012	9	7.59	1.19 (0.54–2.25)
PENN PRESBYTERIAN MEDICAL CENTER (11814)			
2015	14	8.78	1.60 (0.87–2.68)
2014	4	5.89	0.68 (0.18–1.74)
2013	3	5.18	0.58 (0.12–1.69)
2012	4	4.98	0.80 (0.22–2.06)
PINNACLE HEALTH HOSPITALS - HARRISBURG HOSPITAL (34068)			
2015	11	8.89	1.24 (0.62–2.22)
2014	11	13.23	0.83 (0.41–1.49)
2013	.	.	.
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)
HERITAGE VALLEY BEAVER (11831)			
2015	6	9.19	0.65 (0.24–1.42)
2014	4	8.84	0.45 (0.12–1.16)
2013	5	9.60	0.52 (0.17–1.21)
2012	4	5.95	0.67 (0.18–1.72)
MAIN LINE HOSPITAL - PAOLI (11750)			
2015	10	9.22	1.08 (0.52–2.00)
2014	2	7.88	0.25 (0.03–0.92)
2013	6	7.55	0.79 (0.29–1.73)
2012	0	5.40	0.00 (0.00–0.68)
HOSPITAL OF FOX CHASE CANCER CENTER (12134)			
2015	6	9.30	0.65 (0.24–1.40)
2014	6	5.94	1.01 (0.37–2.20)
2013	4	6.66	0.60 (0.16–1.54)
2012	6	7.26	0.83 (0.30–1.80)
PENNSYLVANIA HOSPITAL OF THE UNIVERSITY OF PA HEALTH SYS (11448)			
2015	14	9.37	1.49 (0.82–2.51)
2014	8	9.77	0.82 (0.35–1.61)
2013	16	10.84	1.48 (0.84–2.40)
2012	13	7.91	1.64 (0.87–2.81)
REGIONAL HOSPITAL OF SCRANTON (12533)			
2015	4	9.39	0.43 (0.11–1.09)
2014	1	5.43	0.18 (0.00–1.03)
2013	1	4.80	0.21 (0.00–1.16)
2012	1	4.72	0.21 (0.00–1.18)
CHESTER COUNTY HOSPITAL (12016)			
2015	7	9.48	0.74 (0.30–1.52)
2014	6	9.06	0.66 (0.24–1.44)
2013	4	8.50	0.47 (0.13–1.20)
2012	3	7.43	0.40 (0.08–1.18)
WILKES-BARRE GENERAL HOSPITAL (11916)			
2015	20	9.53	2.10 (1.28–3.24)
2014	7	11.56	0.61 (0.24–1.25)
2013	17	13.29	1.28 (0.74–2.05)
2012	16	11.60	1.38 (0.79–2.24)
ST. MARY MEDICAL CENTER (11885)			
2015	17	10.07	1.69 (0.98–2.70)
2014	9	7.21	1.25 (0.57–2.37)
2013	5	4.95	1.01 (0.33–2.36)
2012	5	5.12	0.98 (0.31–2.28)
CONEMAUGH MEMORIAL MEDICAL CENTER (10280)			
2015	6	10.18	0.59 (0.22–1.28)
2014	9	9.75	0.92 (0.42–1.75)
2013	7	9.01	0.78 (0.31–1.60)
2012	6	9.57	0.63 (0.23–1.36)
ROBERT PACKER HOSPITAL (12422)			
2015	2	10.21	0.20 (0.02–0.71)
2014	1	8.63	0.12 (0.00–0.64)
2013	3	8.62	0.35 (0.07–1.02)
2012	5	8.23	0.61 (0.20–1.42)
ST. CLAIR MEMORIAL HOSPITAL (10561)			
2015	15	10.71	1.40 (0.78–2.31)
2014	10	9.11	1.10 (0.53–2.02)
2013	11	5.63	1.96 (0.97–3.50)
2012	20	5.65	3.54 (2.16–5.47)

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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)
ALLEGHENY GENERAL HOSPITAL (10648)			
2015	23	11.04	2.08 (1.32–3.13)
2014	19	6.78	2.80 (1.69–4.38)
2013	15	6.22	2.41 (1.35–3.98)
2012	9	5.90	1.53 (0.70–2.90)
UPMC ALTOONA (10178)			
2015	5	11.42	0.44 (0.14–1.02)
2014	9	13.19	0.68 (0.31–1.30)
2013	7	11.85	0.59 (0.24–1.22)
2012	13	9.89	1.31 (0.70–2.25)
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)			
2015	17	11.43	1.49 (0.87–2.38)
2014	17	8.80	1.93 (1.13–3.09)
2013	12	10.36	1.16 (0.60–2.02)
2012	14	7.76	1.80 (0.99–3.03)
ARIA HEALTH (11388)			
2015	13	11.93	1.09 (0.58–1.86)
2014	10	14.65	0.68 (0.33–1.26)
2013	2	11.54	0.17 (0.02–0.63)
2012	8	13.12	0.61 (0.26–1.20)
ST. LUKES HOSPITAL BETHLEHEM (11718)			
2015	5	12.54	0.40 (0.13–0.93)
2014	7	11.19	0.63 (0.25–1.29)
2013	11	10.52	1.05 (0.52–1.87)
2012	6	9.73	0.62 (0.23–1.34)
READING HOSPITAL (12375)			
2015	37	13.05	2.83 (2.00–3.91)
2014	23	11.90	1.93 (1.22–2.90)
2013	16	10.18	1.57 (0.90–2.55)
2012	24	13.84	1.73 (1.11–2.58)
JEFFERSON HOSPITAL (10237)			
2015	14	13.28	1.05 (0.58–1.77)
2014	16	14.13	1.13 (0.65–1.84)
2013	17	14.60	1.16 (0.68–1.86)
2012	9	13.15	0.68 (0.31–1.30)
TEMPLE UNIVERSITY HOSPITAL (12382)			
2015	6	14.37	0.42 (0.15–0.91)
2014	2	12.73	0.16 (0.02–0.57)
2013	6	9.79	0.61 (0.22–1.33)
2012	4	8.15	0.49 (0.13–1.26)
THOMAS JEFFERSON UNIVERSITY HOSPITAL (11506)			
2015	7	15.44	0.45 (0.18–0.93)
2014	11	18.68	0.59 (0.29–1.05)
2013	17	19.71	0.86 (0.50–1.38)
2012	24	17.46	1.37 (0.88–2.05)
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)			
2015	4	16.25	0.25 (0.07–0.63)
2014	7	16.96	0.41 (0.17–0.85)
2013	5	14.07	0.36 (0.11–0.83)
2012	5	10.58	0.47 (0.15–1.10)
ABINGTON MEMORIAL HOSPITAL (11838)			
2015	11	17.12	0.64 (0.32–1.15)
2014	13	20.53	0.63 (0.34–1.08)
2013	15	17.01	0.88 (0.49–1.45)
2012	10	14.40	0.69 (0.33–1.28)

Continued on next page ...

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 PRESBYTERIAN SHADYSIDE - SHADYSIDE (10118)			
2015	54	18.43	2.93 (2.20–3.82)
2014	57	20.68	2.76 (2.09–3.57)
2013	69	22.59	3.05 (2.38–3.87)
2012	15	18.61	0.81 (0.45–1.33)
YORK HOSPITAL (10108)			
2015	24	18.50	1.30 (0.83–1.93)
2014	24	17.91	1.34 (0.86–1.99)
2013	15	13.23	1.13 (0.63–1.87)
2012	8	11.59	0.69 (0.30–1.36)
UPMC PASSAVANT (11242)			
2015	44	20.70	2.13 (1.54–2.85)
2014	19	23.23	0.82 (0.49–1.28)
2013	43	25.76	1.67 (1.21–2.25)
2012	31	22.72	1.36 (0.93–1.94)
LANCASTER GENERAL HOSPITAL (10183)			
2015	25	21.39	1.17 (0.76–1.73)
2014	32	17.25	1.86 (1.27–2.62)
2013	21	14.63	1.44 (0.89–2.19)
2012	27	12.24	2.21 (1.45–3.21)
GEISINGER MEDICAL CENTER (11775)			
2015	21	23.23	0.90 (0.56–1.38)
2014	18	21.97	0.82 (0.49–1.29)
2013	13	21.11	0.62 (0.33–1.05)
2012	11	16.60	0.66 (0.33–1.19)
UPMC PRESBYTERIAN SHADYSIDE (10348)			
2015	47	23.42	2.01 (1.47–2.67)
2014	30	30.43	0.99 (0.66–1.41)
2013	21	30.24	0.69 (0.43–1.06)
2012	13	24.69	0.53 (0.28–0.90)
MILTON S HERSHEY MEDICAL CENTER (11747)			
2015	16	24.47	0.65 (0.37–1.06)
2014	6	20.60	0.29 (0.11–0.63)
2013	10	21.81	0.46 (0.22–0.84)
2012	8	19.14	0.42 (0.18–0.82)
HOSPITAL OF THE UNIVERSITY OF PENNSYLVANIA (10219)			
2015	19	26.57	0.71 (0.43–1.12)
2014	32	29.90	1.07 (0.73–1.51)
2013	23	23.11	1.00 (0.63–1.49)
2012	18	13.70	1.31 (0.78–2.08)
LEHIGH VALLEY HOSPITAL (11884)			
2015	18	32.03	0.56 (0.33–0.89)
2014	15	31.30	0.48 (0.27–0.79)
2013	18	25.25	0.71 (0.42–1.13)
2012	25	24.26	1.03 (0.67–1.52)

Table 4.5.15: Rate (SIR) of Surgical Site Infections (SSIs) Associated with Each Benchmarked Procedure by Hospital in Alphabetical Order — Pennsylvania, 2015

	Number of SSIs	Predicted Number of SSIs	SIR (95% CI)
ABINGTON MEMORIAL HOSPITAL (11838)			
Cardiac (CARD)	2	0.90	2.22 (0.25–8.02)
Cardiac Bypass — Single Incision (CBGC)	0	0.33	0.00 (0.00–11.24)
Cardiac Bypass — Dual Incision (CBGB)	2	2.44	0.82 (0.09–2.96)
Knee Arthroplasty (KPRO)	1	3.26	0.31 (0.00–1.71)
Hip Arthroplasty (HPRO)	8	6.41	1.25 (0.54–2.46)
Abdominal Hysterectomy (HYST)	3	4.83	0.62 (0.12–1.81)
Colon surgery (COLO)	11	17.12	0.64 (0.32–1.15)
ADVANCED SURGICAL HOSPITAL (16317)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	1.86	0.54 (0.01–2.99)
Hip Arthroplasty (HPRO)	0	1.82	0.00 (0.00–2.01)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	.	.	.
ALBERT EINSTEIN MEDICAL CENTER (10585)			
Cardiac (CARD)	1	0.49	2.03 (0.03–11.32)
Cardiac Bypass — Single Incision (CBGC)	0	0.71	0.00 (0.00–5.14)
Cardiac Bypass — Dual Incision (CBGB)	2	1.56	1.28 (0.14–4.64)
Knee Arthroplasty (KPRO)	0	0.12	0.00 (0.00–29.85)
Hip Arthroplasty (HPRO)	0	0.74	0.00 (0.00–4.96)
Abdominal Hysterectomy (HYST)	1	1.22	0.82 (0.01–4.56)
Colon surgery (COLO)	5	5.39	0.93 (0.30–2.17)
ALLEGHENY GENERAL HOSPITAL (10648)			
Cardiac (CARD)	4	2.21	1.81 (0.49–4.63)
Cardiac Bypass — Single Incision (CBGC)	1	0.61	1.63 (0.02–9.07)
Cardiac Bypass — Dual Incision (CBGB)	9	4.46	2.02 (0.92–3.83)
Knee Arthroplasty (KPRO)	4	4.91	0.81 (0.22–2.09)
Hip Arthroplasty (HPRO)	13	9.93	1.31 (0.70–2.24)
Abdominal Hysterectomy (HYST)	1	0.61	1.65 (0.02–9.18)
Colon surgery (COLO)	23	11.04	2.08 (1.32–3.13)
ALLEGHENY VALLEY HOSPITAL (11842)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	1.25	0.00 (0.00–2.94)
Hip Arthroplasty (HPRO)	2	1.53	1.30 (0.15–4.70)
Abdominal Hysterectomy (HYST)	0	0.03	0.00 (0.00–143.94)
Colon surgery (COLO)	3	2.20	1.36 (0.27–3.98)
ARIA HEALTH (11388)			
Cardiac (CARD)	1	0.15	6.75 (0.09–37.56)
Cardiac Bypass — Single Incision (CBGC)	1	0.29	3.50 (0.05–19.47)
Cardiac Bypass — Dual Incision (CBGB)	2	2.17	0.92 (0.10–3.32)
Knee Arthroplasty (KPRO)	0	4.12	0.00 (0.00–0.89)
Hip Arthroplasty (HPRO)	4	3.37	1.19 (0.32–3.04)
Abdominal Hysterectomy (HYST)	1	1.19	0.84 (0.01–4.66)
Colon surgery (COLO)	13	11.93	1.09 (0.58–1.86)

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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)
ARMSTRONG COUNTY MEMORIAL HOSPITAL (12057)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.73	0.00 (0.00–5.04)
Hip Arthroplasty (HPRO)	0	0.86	0.00 (0.00–4.26)
Abdominal Hysterectomy (HYST)	2	0.18	11.00 (1.24–39.73)
Colon surgery (COLO)	0	1.77	0.00 (0.00–2.07)
BERWICK HOSPITAL CENTER (11442)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.62	0.00 (0.00–5.96)
Hip Arthroplasty (HPRO)	1	0.38	2.64 (0.03–14.70)
Abdominal Hysterectomy (HYST)	0	0.32	0.00 (0.00–11.39)
Colon surgery (COLO)	0	0.35	0.00 (0.00–10.60)
BRADFORD REGIONAL MEDICAL CENTER (12361)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.60	1.66 (0.02–9.25)
Hip Arthroplasty (HPRO)	0	0.74	0.00 (0.00–4.98)
Abdominal Hysterectomy (HYST)	0	0.10	0.00 (0.00–36.75)
Colon surgery (COLO)	1	1.09	0.92 (0.01–5.13)
BRANDYWINE HOSPITAL (11979)			
Cardiac (CARD)	0	0.14	0.00 (0.00–25.83)
Cardiac Bypass — Single Incision (CBGC)	0	0.04	0.00 (0.00–90.52)
Cardiac Bypass — Dual Incision (CBGB)	5	0.98	5.11 (1.65–11.93)
Knee Arthroplasty (KPRO)	0	0.36	0.00 (0.00–10.31)
Hip Arthroplasty (HPRO)	1	0.76	1.31 (0.02–7.30)
Abdominal Hysterectomy (HYST)	0	0.39	0.00 (0.00–9.29)
Colon surgery (COLO)	2	4.54	0.44 (0.05–1.59)
BUTLER MEMORIAL HOSPITAL (11736)			
Cardiac (CARD)	0	0.82	0.00 (0.00–4.45)
Cardiac Bypass — Single Incision (CBGC)	0	0.21	0.00 (0.00–17.80)
Cardiac Bypass — Dual Incision (CBGB)	0	3.95	0.00 (0.00–0.93)
Knee Arthroplasty (KPRO)	0	2.57	0.00 (0.00–1.43)
Hip Arthroplasty (HPRO)	2	2.39	0.84 (0.09–3.03)
Abdominal Hysterectomy (HYST)	2	1.10	1.81 (0.20–6.55)
Colon surgery (COLO)	6	7.22	0.83 (0.30–1.81)
CANONSBURG HOSPITAL (11586)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.37	0.00 (0.00–9.91)
Hip Arthroplasty (HPRO)	1	0.66	1.51 (0.02–8.39)
Abdominal Hysterectomy (HYST)	0	0.01	0.00 (0.00–413.53)
Colon surgery (COLO)	1	2.77	0.36 (0.00–2.01)
CARLISLE REGIONAL MEDICAL CENTER (11997)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	5	1.72	2.91 (0.94–6.78)
Hip Arthroplasty (HPRO)	6	1.45	4.15 (1.51–9.03)
Abdominal Hysterectomy (HYST)	1	1.20	0.83 (0.01–4.63)
Colon surgery (COLO)	1	3.68	0.27 (0.00–1.51)

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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)
CHAMBERSBURG HOSPITAL (11913)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	5	2.81	1.78 (0.57–4.15)
Hip Arthroplasty (HPRO)	0	4.03	0.00 (0.00–0.91)
Abdominal Hysterectomy (HYST)	1	0.22	4.48 (0.06–24.91)
Colon surgery (COLO)	6	4.44	1.35 (0.49–2.94)
CHARLES COLE MEMORIAL HOSPITAL (11956)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.85	1.17 (0.02–6.52)
Hip Arthroplasty (HPRO)	1	0.76	1.31 (0.02–7.31)
Abdominal Hysterectomy (HYST)	1	0.22	4.48 (0.06–24.91)
Colon surgery (COLO)	0	0.43	0.00 (0.00–8.53)
CHESTER COUNTY HOSPITAL (12016)			
Cardiac (CARD)	1	0.30	3.33 (0.04–18.51)
Cardiac Bypass — Single Incision (CBGC)	0	0.05	0.00 (0.00–68.47)
Cardiac Bypass — Dual Incision (CBGB)	2	1.98	1.01 (0.11–3.65)
Knee Arthroplasty (KPRO)	2	1.41	1.42 (0.16–5.13)
Hip Arthroplasty (HPRO)	2	2.53	0.79 (0.09–2.85)
Abdominal Hysterectomy (HYST)	0	3.17	0.00 (0.00–1.16)
Colon surgery (COLO)	7	9.48	0.74 (0.30–1.52)
CHESTNUT HILL HOSPITAL (12304)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.69	0.00 (0.00–5.30)
Hip Arthroplasty (HPRO)	3	1.16	2.59 (0.52–7.57)
Abdominal Hysterectomy (HYST)	0	1.05	0.00 (0.00–3.49)
Colon surgery (COLO)	3	1.98	1.51 (0.30–4.42)
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)			
Cardiac (CARD)	6	2.54	2.36 (0.86–5.13)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	.	.	.
Hip Arthroplasty (HPRO)	.	.	.
Abdominal Hysterectomy (HYST)	0	0.07	0.00 (0.00–50.11)
Colon surgery (COLO)	1	5.71	0.18 (0.00–0.97)
CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)			
Cardiac (CARD)	4	0.94	4.26 (1.15–10.91)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.02	0.00 (0.00–207.90)
Hip Arthroplasty (HPRO)	0	0.01	0.00 (0.00–596.70)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	5	8.51	0.59 (0.19–1.37)
CLARION HOSPITAL (11654)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.16	6.29 (0.08–35.01)
Hip Arthroplasty (HPRO)	0	0.64	0.00 (0.00–5.76)
Abdominal Hysterectomy (HYST)	2	0.32	6.35 (0.71–22.92)
Colon surgery (COLO)	2	1.82	1.10 (0.12–3.97)

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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)
CONEMAUGH MEMORIAL MEDICAL CENTER (10280)			
Cardiac (CARD)	0	0.55	0.00 (0.00–6.72)
Cardiac Bypass — Single Incision (CBGC)	0	0.27	0.00 (0.00–13.69)
Cardiac Bypass — Dual Incision (CBGB)	0	2.72	0.00 (0.00–1.35)
Knee Arthroplasty (KPRO)	2	2.81	0.71 (0.08–2.57)
Hip Arthroplasty (HPRO)	5	3.49	1.43 (0.46–3.35)
Abdominal Hysterectomy (HYST)	0	2.56	0.00 (0.00–1.43)
Colon surgery (COLO)	6	10.18	0.59 (0.22–1.28)
CONEMAUGH MINERS MEDICAL CENTER (12295)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.04	0.00 (0.00–103.95)
Hip Arthroplasty (HPRO)	0	0.05	0.00 (0.00–77.65)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	.	.	.
COORDINATED HEALTH ORTHOPEDIC HOSPITAL LLC (11872)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	2	3.28	0.61 (0.07–2.20)
Hip Arthroplasty (HPRO)	1	1.77	0.56 (0.01–3.14)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	.	.	.
CORRY MEMORIAL HOSPITAL (12283)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.07	0.00 (0.00–49.22)
Hip Arthroplasty (HPRO)	0	0.05	0.00 (0.00–77.65)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	0	0.10	0.00 (0.00–35.96)
CROZER CHESTER MEDICAL CENTER - SPRINGFIELD (11851)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.86	1.16 (0.02–6.44)
Hip Arthroplasty (HPRO)	0	1.05	0.00 (0.00–3.48)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	0	0.11	0.00 (0.00–32.20)
CROZER CHESTER MEDICAL CENTER - TAYLOR (11932)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.67	0.00 (0.00–5.47)
Hip Arthroplasty (HPRO)	0	0.52	0.00 (0.00–7.03)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	1	1.45	0.69 (0.01–3.84)
CROZER CHESTER MEDICAL CENTER (11839)			
Cardiac (CARD)	1	0.43	2.31 (0.03–12.87)
Cardiac Bypass — Single Incision (CBGC)	1	0.21	4.67 (0.06–25.96)
Cardiac Bypass — Dual Incision (CBGB)	0	1.21	0.00 (0.00–3.02)
Knee Arthroplasty (KPRO)	0	0.04	0.00 (0.00–100.91)
Hip Arthroplasty (HPRO)	1	0.60	1.67 (0.02–9.27)
Abdominal Hysterectomy (HYST)	0	1.91	0.00 (0.00–1.92)
Colon surgery (COLO)	1	7.10	0.14 (0.00–0.78)

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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)
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)			
Cardiac (CARD)	0	0.01	0.00 (0.00–290.29)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.99	0.00 (0.00–3.70)
Hip Arthroplasty (HPRO)	0	1.00	0.00 (0.00–3.66)
Abdominal Hysterectomy (HYST)	0	0.34	0.00 (0.00–10.80)
Colon surgery (COLO)	1	3.33	0.30 (0.00–1.67)
DOYLESTOWN HOSPITAL (10190)			
Cardiac (CARD)	0	0.52	0.00 (0.00–7.05)
Cardiac Bypass — Single Incision (CBGC)	0	0.32	0.00 (0.00–11.54)
Cardiac Bypass — Dual Incision (CBGB)	1	1.46	0.68 (0.01–3.81)
Knee Arthroplasty (KPRO)	2	2.04	0.98 (0.11–3.55)
Hip Arthroplasty (HPRO)	3	2.34	1.28 (0.26–3.74)
Abdominal Hysterectomy (HYST)	1	0.44	2.25 (0.03–12.53)
Colon surgery (COLO)	9	5.44	1.66 (0.76–3.14)
EASTERN REGIONAL MEDICAL CENTER (12348)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	.	.	.
Hip Arthroplasty (HPRO)	0	0.15	0.00 (0.00–23.88)
Abdominal Hysterectomy (HYST)	0	0.57	0.00 (0.00–6.46)
Colon surgery (COLO)	4	2.91	1.38 (0.37–3.52)
EASTON HOSPITAL (11929)			
Cardiac (CARD)	0	0.22	0.00 (0.00–16.60)
Cardiac Bypass — Single Incision (CBGC)	0	0.05	0.00 (0.00–80.92)
Cardiac Bypass — Dual Incision (CBGB)	2	1.24	1.61 (0.18–5.83)
Knee Arthroplasty (KPRO)	1	0.80	1.25 (0.02–6.96)
Hip Arthroplasty (HPRO)	7	1.68	4.17 (1.67–8.60)
Abdominal Hysterectomy (HYST)	1	0.54	1.86 (0.02–10.34)
Colon surgery (COLO)	7	3.18	2.20 (0.88–4.54)
EDGEWOOD SURGICAL HOSPITAL (12552)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.48	0.00 (0.00–7.60)
Hip Arthroplasty (HPRO)	0	0.28	0.00 (0.00–13.12)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	.	.	.
EINSTEIN AT ELKINS PARK (12500)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	2	1.47	1.36 (0.15–4.91)
Hip Arthroplasty (HPRO)	2	1.37	1.46 (0.16–5.26)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	1	1.07	0.94 (0.01–5.21)
EINSTEIN MEDICAL CENTER MONTGOMERY (30210)			
Cardiac (CARD)	0	0.61	0.00 (0.00–6.05)
Cardiac Bypass — Single Incision (CBGC)	0	0.41	0.00 (0.00–9.01)
Cardiac Bypass — Dual Incision (CBGB)	2	0.98	2.04 (0.23–7.38)
Knee Arthroplasty (KPRO)	1	1.75	0.57 (0.01–3.18)
Hip Arthroplasty (HPRO)	2	1.81	1.11 (0.12–3.99)
Abdominal Hysterectomy (HYST)	1	1.10	0.91 (0.01–5.06)
Colon surgery (COLO)	2	3.07	0.65 (0.07–2.35)

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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)	2	0.16	12.77 (1.43–46.10)
Hip Arthroplasty (HPRO)	1	0.26	3.89 (0.05–21.65)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	0	0.70	0.00 (0.00–5.24)
ENDLESS MOUNTAINS HEALTH SYSTEMS (11817)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.63	1.58 (0.02–8.80)
Hip Arthroplasty (HPRO)	1	0.35	2.83 (0.04–15.74)
Abdominal Hysterectomy (HYST)	0	0.09	0.00 (0.00–41.07)
Colon surgery (COLO)	.	.	.
EPHRATA COMMUNITY HOSPITAL (11764)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	3	1.45	2.07 (0.42–6.06)
Hip Arthroplasty (HPRO)	3	1.95	1.54 (0.31–4.50)
Abdominal Hysterectomy (HYST)	2	1.74	1.15 (0.13–4.15)
Colon surgery (COLO)	3	2.59	1.16 (0.23–3.39)
EVANGELICAL COMMUNITY HOSPITAL (11701)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	2.59	0.00 (0.00–1.42)
Hip Arthroplasty (HPRO)	2	2.54	0.79 (0.09–2.84)
Abdominal Hysterectomy (HYST)	0	0.29	0.00 (0.00–12.53)
Colon surgery (COLO)	3	2.91	1.03 (0.21–3.01)
EXCELA HEALTH FRICK HOSPITAL (11639)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	.	.	.
Hip Arthroplasty (HPRO)	0	0.01	0.00 (0.00–311.58)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	1	1.21	0.82 (0.01–4.59)
EXCELA HEALTH LATROBE HOSPITAL (11651)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	2	0.84	2.39 (0.27–8.64)
Hip Arthroplasty (HPRO)	2	1.34	1.50 (0.17–5.40)
Abdominal Hysterectomy (HYST)	0	1.32	0.00 (0.00–2.78)
Colon surgery (COLO)	3	4.96	0.61 (0.12–1.77)
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)			
Cardiac (CARD)	0	0.35	0.00 (0.00–10.62)
Cardiac Bypass — Single Incision (CBGC)	0	0.27	0.00 (0.00–13.69)
Cardiac Bypass — Dual Incision (CBGB)	1	2.14	0.47 (0.01–2.60)
Knee Arthroplasty (KPRO)	4	3.61	1.11 (0.30–2.84)
Hip Arthroplasty (HPRO)	2	3.95	0.51 (0.06–1.83)
Abdominal Hysterectomy (HYST)	3	1.16	2.59 (0.52–7.56)
Colon surgery (COLO)	5	5.43	0.92 (0.30–2.15)

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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 HOSPITAL (11265)			
Cardiac (CARD)	0	0.65	0.00 (0.00–5.62)
Cardiac Bypass — Single Incision (CBGC)	0	0.38	0.00 (0.00–9.54)
Cardiac Bypass — Dual Incision (CBGB)	4	2.12	1.89 (0.51–4.83)
Knee Arthroplasty (KPRO)	0	1.11	0.00 (0.00–3.30)
Hip Arthroplasty (HPRO)	0	2.34	0.00 (0.00–1.57)
Abdominal Hysterectomy (HYST)	2	0.82	2.43 (0.27–8.79)
Colon surgery (COLO)	6	8.68	0.69 (0.25–1.51)
GEISINGER MEDICAL CENTER (11775)			
Cardiac (CARD)	0	1.89	0.00 (0.00–1.94)
Cardiac Bypass — Single Incision (CBGC)	0	0.42	0.00 (0.00–8.70)
Cardiac Bypass — Dual Incision (CBGB)	3	3.67	0.82 (0.16–2.39)
Knee Arthroplasty (KPRO)	5	3.42	1.46 (0.47–3.41)
Hip Arthroplasty (HPRO)	27	5.77	4.68 (3.08–6.81)
Abdominal Hysterectomy (HYST)	6	4.42	1.36 (0.50–2.95)
Colon surgery (COLO)	21	23.23	0.90 (0.56–1.38)
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)			
Cardiac (CARD)	0	0.63	0.00 (0.00–5.78)
Cardiac Bypass — Single Incision (CBGC)	0	0.26	0.00 (0.00–14.13)
Cardiac Bypass — Dual Incision (CBGB)	0	1.96	0.00 (0.00–1.87)
Knee Arthroplasty (KPRO)	0	2.17	0.00 (0.00–1.69)
Hip Arthroplasty (HPRO)	0	3.37	0.00 (0.00–1.09)
Abdominal Hysterectomy (HYST)	1	0.48	2.07 (0.03–11.51)
Colon surgery (COLO)	17	11.43	1.49 (0.87–2.38)
GEISINGER-BLOOMSBURG HOSPITAL (12008)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.21	0.00 (0.00–17.64)
Hip Arthroplasty (HPRO)	0	0.15	0.00 (0.00–24.71)
Abdominal Hysterectomy (HYST)	2	0.25	8.15 (0.91–29.42)
Colon surgery (COLO)	0	0.55	0.00 (0.00–6.62)
GEISINGER-COMMUNITY MEDICAL CENTER (11914)			
Cardiac (CARD)	0	0.43	0.00 (0.00–8.59)
Cardiac Bypass — Single Incision (CBGC)	0	0.08	0.00 (0.00–48.11)
Cardiac Bypass — Dual Incision (CBGB)	4	1.78	2.24 (0.60–5.75)
Knee Arthroplasty (KPRO)	5	2.19	2.29 (0.74–5.33)
Hip Arthroplasty (HPRO)	1	2.41	0.42 (0.01–2.31)
Abdominal Hysterectomy (HYST)	1	0.25	4.06 (0.05–22.61)
Colon surgery (COLO)	9	8.10	1.11 (0.51–2.11)
GEISINGER-LEWISTOWN HOSPITAL (11825)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.44	0.00 (0.00–8.36)
Hip Arthroplasty (HPRO)	0	0.32	0.00 (0.00–11.49)
Abdominal Hysterectomy (HYST)	2	1.17	1.71 (0.19–6.16)
Colon surgery (COLO)	2	2.35	0.85 (0.10–3.07)
GETTYSBURG HOSPITAL (11531)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	5	1.63	3.07 (0.99–7.16)
Hip Arthroplasty (HPRO)	1	1.10	0.91 (0.01–5.04)
Abdominal Hysterectomy (HYST)	1	0.42	2.37 (0.03–13.17)
Colon surgery (COLO)	3	3.97	0.76 (0.15–2.21)

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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)
GNADEN HUETTEN MEMORIAL HOSPITAL (12241)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.30	0.00 (0.00–12.07)
Hip Arthroplasty (HPRO)	0	0.31	0.00 (0.00–11.70)
Abdominal Hysterectomy (HYST)	0	0.05	0.00 (0.00–70.41)
Colon surgery (COLO)	1	0.55	1.80 (0.02–10.03)
GOOD SAMARITAN HOSPITAL, THE (11712)			
Cardiac (CARD)	0	0.11	0.00 (0.00–32.38)
Cardiac Bypass — Single Incision (CBGC)	0	0.54	0.00 (0.00–6.86)
Cardiac Bypass — Dual Incision (CBGB)	0	0.82	0.00 (0.00–4.49)
Knee Arthroplasty (KPRO)	0	1.20	0.00 (0.00–3.06)
Hip Arthroplasty (HPRO)	1	1.09	0.92 (0.01–5.11)
Abdominal Hysterectomy (HYST)	0	0.07	0.00 (0.00–52.52)
Colon surgery (COLO)	4	4.75	0.84 (0.23–2.16)
GRAND VIEW HOSPITAL (11847)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	1.33	0.00 (0.00–2.76)
Hip Arthroplasty (HPRO)	0	1.73	0.00 (0.00–2.12)
Abdominal Hysterectomy (HYST)	1	0.42	2.37 (0.03–13.19)
Colon surgery (COLO)	5	5.34	0.94 (0.30–2.18)
GROVE CITY MEDICAL CENTER (11722)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.28	0.00 (0.00–13.16)
Hip Arthroplasty (HPRO)	0	0.35	0.00 (0.00–10.34)
Abdominal Hysterectomy (HYST)	0	0.01	0.00 (0.00–413.53)
Colon surgery (COLO)	0	0.12	0.00 (0.00–29.61)
GUTHRIE TOWANDA MEMORIAL HOSPITAL (12549)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.02	0.00 (0.00–153.61)
Hip Arthroplasty (HPRO)	1	0.09	10.58 (0.14–58.89)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	2	0.42	4.79 (0.54–17.30)
HAHNEMANN UNIVERSITY HOSPITAL (11437)			
Cardiac (CARD)	0	0.22	0.00 (0.00–16.54)
Cardiac Bypass — Single Incision (CBGC)	0	0.06	0.00 (0.00–62.83)
Cardiac Bypass — Dual Incision (CBGB)	0	0.66	0.00 (0.00–5.52)
Knee Arthroplasty (KPRO)	3	0.83	3.60 (0.72–10.51)
Hip Arthroplasty (HPRO)	0	1.59	0.00 (0.00–2.31)
Abdominal Hysterectomy (HYST)	3	2.74	1.09 (0.22–3.19)
Colon surgery (COLO)	3	7.03	0.43 (0.09–1.25)
HANOVER HOSPITAL (11899)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	2	1.30	1.54 (0.17–5.56)
Hip Arthroplasty (HPRO)	0	1.51	0.00 (0.00–2.43)
Abdominal Hysterectomy (HYST)	0	0.77	0.00 (0.00–4.79)
Colon surgery (COLO)	4	3.38	1.18 (0.32–3.03)

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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)
HEART OF LANCASTER REGIONAL MEDICAL CENTER (12571)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.10	0.00 (0.00–35.06)
Hip Arthroplasty (HPRO)	0	0.26	0.00 (0.00–14.37)
Abdominal Hysterectomy (HYST)	1	1.50	0.67 (0.01–3.71)
Colon surgery (COLO)	2	0.84	2.38 (0.27–8.59)
HERITAGE VALLEY BEAVER (11831)			
Cardiac (CARD)	1	0.65	1.54 (0.02–8.59)
Cardiac Bypass — Single Incision (CBGC)	0	0.30	0.00 (0.00–12.42)
Cardiac Bypass — Dual Incision (CBGB)	0	2.43	0.00 (0.00–1.51)
Knee Arthroplasty (KPRO)	1	1.12	0.89 (0.01–4.97)
Hip Arthroplasty (HPRO)	0	2.24	0.00 (0.00–1.64)
Abdominal Hysterectomy (HYST)	5	0.85	5.91 (1.91–13.80)
Colon surgery (COLO)	6	9.19	0.65 (0.24–1.42)
HERITAGE VALLEY SEWICKLEY (10375)			
Cardiac (CARD)	0	0.01	0.00 (0.00–280.65)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	3	3.67	0.82 (0.16–2.39)
Hip Arthroplasty (HPRO)	3	2.61	1.15 (0.23–3.36)
Abdominal Hysterectomy (HYST)	1	0.68	1.46 (0.02–8.15)
Colon surgery (COLO)	4	5.09	0.79 (0.21–2.01)
HIGHLANDS HOSPITAL (11902)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.03	0.00 (0.00–131.79)
Hip Arthroplasty (HPRO)	0	0.06	0.00 (0.00–61.77)
Abdominal Hysterectomy (HYST)	0	0.01	0.00 (0.00–287.87)
Colon surgery (COLO)	0	1.02	0.00 (0.00–3.59)
HOLY REDEEMER HOSPITAL (11973)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	2	2.50	0.80 (0.09–2.89)
Hip Arthroplasty (HPRO)	2	2.10	0.95 (0.11–3.43)
Abdominal Hysterectomy (HYST)	0	0.85	0.00 (0.00–4.32)
Colon surgery (COLO)	4	4.75	0.84 (0.23–2.16)
HOLY SPIRIT HOSPITAL (12387)			
Cardiac (CARD)	0	0.11	0.00 (0.00–33.28)
Cardiac Bypass — Single Incision (CBGC)	0	1.11	0.00 (0.00–3.31)
Cardiac Bypass — Dual Incision (CBGB)	0	0.68	0.00 (0.00–5.43)
Knee Arthroplasty (KPRO)	2	1.14	1.75 (0.20–6.31)
Hip Arthroplasty (HPRO)	1	1.66	0.60 (0.01–3.36)
Abdominal Hysterectomy (HYST)	2	0.21	9.45 (1.06–34.10)
Colon surgery (COLO)	4	3.25	1.23 (0.33–3.15)
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)	4	3.77	1.06 (0.29–2.72)
Colon surgery (COLO)	6	9.30	0.65 (0.24–1.40)

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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)
HOSPITAL OF THE UNIVERSITY OF PENNSYLVANIA (10219)			
Cardiac (CARD)	4	5.38	0.74 (0.20–1.90)
Cardiac Bypass — Single Incision (CBGC)	0	0.36	0.00 (0.00–10.25)
Cardiac Bypass — Dual Incision (CBGB)	6	4.68	1.28 (0.47–2.79)
Knee Arthroplasty (KPRO)	1	0.07	13.96 (0.18–77.66)
Hip Arthroplasty (HPRO)	0	0.18	0.00 (0.00–20.02)
Abdominal Hysterectomy (HYST)	6	4.49	1.34 (0.49–2.91)
Colon surgery (COLO)	19	26.57	0.71 (0.43–1.12)
INDIANA REGIONAL MEDICAL CENTER (11759)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	1.38	0.72 (0.01–4.03)
Hip Arthroplasty (HPRO)	1	1.60	0.63 (0.01–3.48)
Abdominal Hysterectomy (HYST)	0	0.32	0.00 (0.00–11.31)
Colon surgery (COLO)	0	3.12	0.00 (0.00–1.18)
J C BLAIR MEMORIAL HOSPITAL (11724)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.12	0.00 (0.00–31.16)
Hip Arthroplasty (HPRO)	0	0.22	0.00 (0.00–16.73)
Abdominal Hysterectomy (HYST)	2	0.75	2.68 (0.30–9.67)
Colon surgery (COLO)	5	1.15	4.36 (1.40–10.17)
JAMESON MEMORIAL HOSPITAL (11954)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	3	1.36	2.20 (0.44–6.44)
Hip Arthroplasty (HPRO)	1	1.25	0.80 (0.01–4.44)
Abdominal Hysterectomy (HYST)	0	0.09	0.00 (0.00–42.43)
Colon surgery (COLO)	3	3.09	0.97 (0.20–2.84)
JEANES HOSPITAL (11459)			
Cardiac (CARD)	0	0.16	0.00 (0.00–22.64)
Cardiac Bypass — Single Incision (CBGC)	0	0.05	0.00 (0.00–68.47)
Cardiac Bypass — Dual Incision (CBGB)	0	1.21	0.00 (0.00–3.03)
Knee Arthroplasty (KPRO)	1	0.81	1.24 (0.02–6.87)
Hip Arthroplasty (HPRO)	0	0.93	0.00 (0.00–3.94)
Abdominal Hysterectomy (HYST)	1	0.74	1.36 (0.02–7.55)
Colon surgery (COLO)	3	3.06	0.98 (0.20–2.87)
JEFFERSON HOSPITAL (10237)			
Cardiac (CARD)	0	1.03	0.00 (0.00–3.56)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	2	5.62	0.36 (0.04–1.29)
Knee Arthroplasty (KPRO)	1	3.74	0.27 (0.00–1.49)
Hip Arthroplasty (HPRO)	1	5.00	0.20 (0.00–1.11)
Abdominal Hysterectomy (HYST)	0	1.17	0.00 (0.00–3.13)
Colon surgery (COLO)	14	13.28	1.05 (0.58–1.77)
JENNERSVILLE REGIONAL HOSPITAL (12337)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.10	0.00 (0.00–36.88)
Hip Arthroplasty (HPRO)	0	0.31	0.00 (0.00–11.93)
Abdominal Hysterectomy (HYST)	0	0.02	0.00 (0.00–169.72)
Colon surgery (COLO)	0	1.77	0.00 (0.00–2.08)

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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)
JERSEY SHORE HOSPITAL (11689)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.11	0.00 (0.00–32.68)
Hip Arthroplasty (HPRO)	0	0.19	0.00 (0.00–19.37)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	0	0.70	0.00 (0.00–5.26)
KANE COMMUNITY HOSPITAL (12111)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.08	0.00 (0.00–45.42)
Hip Arthroplasty (HPRO)	0	0.14	0.00 (0.00–26.91)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	0	0.51	0.00 (0.00–7.24)
LANCASTER GENERAL HOSPITAL (10183)			
Cardiac (CARD)	1	1.15	0.87 (0.01–4.82)
Cardiac Bypass — Single Incision (CBGC)	0	0.50	0.00 (0.00–7.37)
Cardiac Bypass — Dual Incision (CBGB)	7	6.51	1.08 (0.43–2.22)
Knee Arthroplasty (KPRO)	3	7.31	0.41 (0.08–1.20)
Hip Arthroplasty (HPRO)	8	10.68	0.75 (0.32–1.48)
Abdominal Hysterectomy (HYST)	1	2.90	0.34 (0.00–1.92)
Colon surgery (COLO)	25	21.39	1.17 (0.76–1.73)
LANCASTER REGIONAL MEDICAL CENTER (12335)			
Cardiac (CARD)	0	0.08	0.00 (0.00–44.08)
Cardiac Bypass — Single Incision (CBGC)	2	0.11	17.87 (2.01–64.50)
Cardiac Bypass — Dual Incision (CBGB)	0	0.68	0.00 (0.00–5.43)
Knee Arthroplasty (KPRO)	4	1.59	2.51 (0.67–6.42)
Hip Arthroplasty (HPRO)	1	1.47	0.68 (0.01–3.79)
Abdominal Hysterectomy (HYST)	1	0.55	1.83 (0.02–10.19)
Colon surgery (COLO)	1	1.86	0.54 (0.01–2.98)
LANSDALE HOSPITAL (12032)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	1.27	0.00 (0.00–2.90)
Hip Arthroplasty (HPRO)	2	2.13	0.94 (0.11–3.40)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	0	2.05	0.00 (0.00–1.79)
LEHIGH VALLEY HOSPITAL - HAZLETON (11878)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	2	0.46	4.37 (0.49–15.77)
Hip Arthroplasty (HPRO)	0	0.82	0.00 (0.00–4.49)
Abdominal Hysterectomy (HYST)	0	0.38	0.00 (0.00–9.70)
Colon surgery (COLO)	2	6.38	0.31 (0.04–1.13)
LEHIGH VALLEY HOSPITAL - MUHLENBERG (11898)			
Cardiac (CARD)	1	0.29	3.40 (0.04–18.92)
Cardiac Bypass — Single Incision (CBGC)	0	0.02	0.00 (0.00–205.41)
Cardiac Bypass — Dual Incision (CBGB)	0	0.95	0.00 (0.00–3.88)
Knee Arthroplasty (KPRO)	1	0.87	1.15 (0.02–6.41)
Hip Arthroplasty (HPRO)	2	1.00	1.99 (0.22–7.20)
Abdominal Hysterectomy (HYST)	0	2.47	0.00 (0.00–1.48)
Colon surgery (COLO)	6	6.06	0.99 (0.36–2.16)

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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)
LEHIGH VALLEY HOSPITAL (11884)			
Cardiac (CARD)	1	2.24	0.45 (0.01–2.49)
Cardiac Bypass — Single Incision (CBGC)	3	0.68	4.38 (0.88–12.80)
Cardiac Bypass — Dual Incision (CBGB)	7	6.55	1.07 (0.43–2.20)
Knee Arthroplasty (KPRO)	5	6.51	0.77 (0.25–1.79)
Hip Arthroplasty (HPRO)	4	8.85	0.45 (0.12–1.16)
Abdominal Hysterectomy (HYST)	6	8.28	0.72 (0.26–1.58)
Colon surgery (COLO)	18	32.03	0.56 (0.33–0.89)
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)	1	0.11	9.30 (0.12–51.73)
Colon surgery (COLO)	0	0.28	0.00 (0.00–13.07)
LOWER BUCKS HOSPITAL (12390)			
Cardiac (CARD)	0	0.01	0.00 (0.00–561.30)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.17	0.00 (0.00–21.03)
Hip Arthroplasty (HPRO)	0	0.60	0.00 (0.00–6.09)
Abdominal Hysterectomy (HYST)	0	0.10	0.00 (0.00–38.03)
Colon surgery (COLO)	0	0.73	0.00 (0.00–5.01)
MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	3.09	0.32 (0.00–1.80)
Hip Arthroplasty (HPRO)	0	4.54	0.00 (0.00–0.81)
Abdominal Hysterectomy (HYST)	4	11.87	0.34 (0.09–0.86)
Colon surgery (COLO)	0	3.75	0.00 (0.00–0.98)
MAIN LINE HOSPITAL - PAOLI (11750)			
Cardiac (CARD)	0	0.17	0.00 (0.00–21.05)
Cardiac Bypass — Single Incision (CBGC)	0	0.04	0.00 (0.00–90.52)
Cardiac Bypass — Dual Incision (CBGB)	1	0.84	1.20 (0.02–6.65)
Knee Arthroplasty (KPRO)	3	2.53	1.19 (0.24–3.47)
Hip Arthroplasty (HPRO)	0	3.27	0.00 (0.00–1.12)
Abdominal Hysterectomy (HYST)	4	1.79	2.23 (0.60–5.72)
Colon surgery (COLO)	10	9.22	1.08 (0.52–2.00)
MAIN LINE HOSPITAL BRYN MAWR (11753)			
Cardiac (CARD)	0	0.08	0.00 (0.00–47.04)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	0	0.02	0.00 (0.00–212.06)
Knee Arthroplasty (KPRO)	5	5.00	1.00 (0.32–2.33)
Hip Arthroplasty (HPRO)	1	4.11	0.24 (0.00–1.36)
Abdominal Hysterectomy (HYST)	1	0.71	1.41 (0.02–7.84)
Colon surgery (COLO)	5	6.67	0.75 (0.24–1.75)
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)			
Cardiac (CARD)	5	2.34	2.14 (0.69–4.99)
Cardiac Bypass — Single Incision (CBGC)	0	2.12	0.00 (0.00–1.73)
Cardiac Bypass — Dual Incision (CBGB)	9	5.00	1.80 (0.82–3.41)
Knee Arthroplasty (KPRO)	2	2.70	0.74 (0.08–2.68)
Hip Arthroplasty (HPRO)	0	3.55	0.00 (0.00–1.03)
Abdominal Hysterectomy (HYST)	0	3.23	0.00 (0.00–1.14)
Colon surgery (COLO)	4	16.25	0.25 (0.07–0.63)

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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)
MEADVILLE MEDICAL CENTER (11583)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	2.60	0.38 (0.01–2.14)
Hip Arthroplasty (HPRO)	1	2.06	0.49 (0.01–2.70)
Abdominal Hysterectomy (HYST)	1	0.97	1.03 (0.01–5.73)
Colon surgery (COLO)	3	1.65	1.82 (0.37–5.32)
MEMORIAL HOSPITAL (11633)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.08	0.00 (0.00–48.52)
Hip Arthroplasty (HPRO)	0	0.32	0.00 (0.00–11.30)
Abdominal Hysterectomy (HYST)	0	1.37	0.00 (0.00–2.67)
Colon surgery (COLO)	2	1.24	1.62 (0.18–5.84)
MERCY FITZGERALD HOSPITAL (11683)			
Cardiac (CARD)	0	0.16	0.00 (0.00–22.94)
Cardiac Bypass — Single Incision (CBGC)	0	0.13	0.00 (0.00–28.26)
Cardiac Bypass — Dual Incision (CBGB)	0	0.46	0.00 (0.00–8.05)
Knee Arthroplasty (KPRO)	0	0.25	0.00 (0.00–14.42)
Hip Arthroplasty (HPRO)	0	0.67	0.00 (0.00–5.50)
Abdominal Hysterectomy (HYST)	0	0.25	0.00 (0.00–14.51)
Colon surgery (COLO)	2	3.52	0.57 (0.06–2.05)
MERCY PHILADELPHIA HOSPITAL (11946)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.20	0.00 (0.00–18.71)
Hip Arthroplasty (HPRO)	2	0.27	7.34 (0.82–26.49)
Abdominal Hysterectomy (HYST)	0	0.18	0.00 (0.00–20.49)
Colon surgery (COLO)	0	2.75	0.00 (0.00–1.33)
MERCY SUBURBAN HOSPITAL (11952)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.27	0.00 (0.00–13.76)
Hip Arthroplasty (HPRO)	0	0.41	0.00 (0.00–8.99)
Abdominal Hysterectomy (HYST)	2	1.07	1.87 (0.21–6.75)
Colon surgery (COLO)	4	3.05	1.31 (0.35–3.35)
MILLCREEK COMMUNITY HOSPITAL (12253)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.71	0.00 (0.00–5.15)
Hip Arthroplasty (HPRO)	1	0.70	1.43 (0.02–7.98)
Abdominal Hysterectomy (HYST)	0	0.27	0.00 (0.00–13.50)
Colon surgery (COLO)	0	1.20	0.00 (0.00–3.07)
MILTON S HERSHEY MEDICAL CENTER (11747)			
Cardiac (CARD)	4	2.01	1.99 (0.53–5.08)
Cardiac Bypass — Single Incision (CBGC)	0	0.11	0.00 (0.00–32.77)
Cardiac Bypass — Dual Incision (CBGB)	1	3.79	0.26 (0.00–1.47)
Knee Arthroplasty (KPRO)	1	3.75	0.27 (0.00–1.48)
Hip Arthroplasty (HPRO)	10	5.39	1.86 (0.89–3.41)
Abdominal Hysterectomy (HYST)	0	3.91	0.00 (0.00–0.94)
Colon surgery (COLO)	16	24.47	0.65 (0.37–1.06)

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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)
MONONGAHELA VALLEY HOSPITAL (11069)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	2	1.41	1.42 (0.16–5.11)
Hip Arthroplasty (HPRO)	2	1.95	1.02 (0.12–3.70)
Abdominal Hysterectomy (HYST)	1	0.13	7.43 (0.10–41.32)
Colon surgery (COLO)	4	3.78	1.06 (0.28–2.71)
MOSES TAYLOR HOSPITAL (11528)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	4	2.06	1.94 (0.52–4.98)
Hip Arthroplasty (HPRO)	1	2.58	0.39 (0.01–2.16)
Abdominal Hysterectomy (HYST)	2	2.24	0.89 (0.10–3.22)
Colon surgery (COLO)	0	3.72	0.00 (0.00–0.99)
MOUNT NITTANY MEDICAL CENTER (11797)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	8	6.39	1.25 (0.54–2.47)
Hip Arthroplasty (HPRO)	10	5.60	1.79 (0.85–3.28)
Abdominal Hysterectomy (HYST)	0	0.92	0.00 (0.00–3.97)
Colon surgery (COLO)	4	4.61	0.87 (0.23–2.22)
NASON HOSPITAL (11907)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	2	0.86	2.33 (0.26–8.43)
Hip Arthroplasty (HPRO)	2	0.70	2.86 (0.32–10.34)
Abdominal Hysterectomy (HYST)	0	0.09	0.00 (0.00–41.35)
Colon surgery (COLO)	0	1.23	0.00 (0.00–2.97)
NAZARETH HOSPITAL (11919)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	1.40	0.71 (0.01–3.97)
Hip Arthroplasty (HPRO)	0	1.56	0.00 (0.00–2.35)
Abdominal Hysterectomy (HYST)	0	0.09	0.00 (0.00–41.89)
Colon surgery (COLO)	0	3.36	0.00 (0.00–1.09)
OHIO VALLEY GENERAL HOSPITAL (12298)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.68	0.00 (0.00–5.40)
Hip Arthroplasty (HPRO)	0	0.87	0.00 (0.00–4.21)
Abdominal Hysterectomy (HYST)	0	0.04	0.00 (0.00–95.96)
Colon surgery (COLO)	1	1.92	0.52 (0.01–2.90)

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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)
OSS ORTHOPAEDIC HOSPITAL (18467)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	4	3.21	1.25 (0.34–3.19)
Hip Arthroplasty (HPRO)	0	3.12	0.00 (0.00–1.18)
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	0.22	0.00 (0.00–17.04)
Hip Arthroplasty (HPRO)	0	0.25	0.00 (0.00–14.43)
Abdominal Hysterectomy (HYST)	0	0.01	0.00 (0.00–287.87)
Colon surgery (COLO)	0	1.06	0.00 (0.00–3.47)
PENN HIGHLANDS BROOKVILLE (12418)			
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	0.10	10.35 (0.14–57.58)
PENN HIGHLANDS CLEARFIELD (11843)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.31	0.00 (0.00–11.81)
Hip Arthroplasty (HPRO)	0	0.32	0.00 (0.00–11.50)
Abdominal Hysterectomy (HYST)	1	0.24	4.08 (0.05–22.71)
Colon surgery (COLO)	0	1.14	0.00 (0.00–3.23)
PENN HIGHLANDS DUBOIS (11606)			
Cardiac (CARD)	0	0.23	0.00 (0.00–15.65)
Cardiac Bypass — Single Incision (CBGC)	0	0.04	0.00 (0.00–90.52)
Cardiac Bypass — Dual Incision (CBGB)	3	1.45	2.07 (0.42–6.05)
Knee Arthroplasty (KPRO)	5	0.62	8.08 (2.60–18.85)
Hip Arthroplasty (HPRO)	2	0.92	2.18 (0.24–7.86)
Abdominal Hysterectomy (HYST)	0	0.94	0.00 (0.00–3.92)
Colon surgery (COLO)	2	5.73	0.35 (0.04–1.26)
PENN HIGHLANDS ELK (11859)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.31	0.00 (0.00–11.82)
Hip Arthroplasty (HPRO)	1	0.24	4.11 (0.05–22.85)
Abdominal Hysterectomy (HYST)	0	0.21	0.00 (0.00–17.84)
Colon surgery (COLO)	0	0.68	0.00 (0.00–5.40)
PENN PRESBYTERIAN MEDICAL CENTER (11814)			
Cardiac (CARD)	2	2.39	0.84 (0.09–3.03)
Cardiac Bypass — Single Incision (CBGC)	0	0.42	0.00 (0.00–8.70)
Cardiac Bypass — Dual Incision (CBGB)	6	4.05	1.48 (0.54–3.23)
Knee Arthroplasty (KPRO)	9	6.75	1.33 (0.61–2.53)
Hip Arthroplasty (HPRO)	9	7.74	1.16 (0.53–2.21)
Abdominal Hysterectomy (HYST)	0	0.25	0.00 (0.00–14.84)
Colon surgery (COLO)	14	8.78	1.60 (0.87–2.68)

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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)
PENNSYLVANIA HOSPITAL OF THE UNIVERSITY OF PA HEALTH SYS (11448)			
Cardiac (CARD)	0	0.40	0.00 (0.00–9.22)
Cardiac Bypass — Single Incision (CBGC)	1	0.07	14.71 (0.19–81.83)
Cardiac Bypass — Dual Incision (CBGB)	0	1.73	0.00 (0.00–2.12)
Knee Arthroplasty (KPRO)	6	4.05	1.48 (0.54–3.23)
Hip Arthroplasty (HPRO)	7	6.80	1.03 (0.41–2.12)
Abdominal Hysterectomy (HYST)	7	4.90	1.43 (0.57–2.95)
Colon surgery (COLO)	14	9.37	1.49 (0.82–2.51)
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)			
Cardiac (CARD)	0	0.11	0.00 (0.00–32.13)
Cardiac Bypass — Single Incision (CBGC)	0	0.06	0.00 (0.00–58.05)
Cardiac Bypass — Dual Incision (CBGB)	2	1.00	2.00 (0.22–7.21)
Knee Arthroplasty (KPRO)	0	1.73	0.00 (0.00–2.12)
Hip Arthroplasty (HPRO)	1	2.05	0.49 (0.01–2.72)
Abdominal Hysterectomy (HYST)	0	1.76	0.00 (0.00–2.09)
Colon surgery (COLO)	7	3.75	1.87 (0.75–3.85)
PHYSICIANS CARE SURGICAL HOSPITAL (19630)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	1.69	0.59 (0.01–3.29)
Hip Arthroplasty (HPRO)	0	2.34	0.00 (0.00–1.57)
Abdominal Hysterectomy (HYST)	0	0.14	0.00 (0.00–26.79)
Colon surgery (COLO)	.	.	.
PINNACLE HEALTH HOSPITALS - COMMUNITY GENERAL OSTEOPATHIC HOSPITAL (34069)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	3	3.34	0.90 (0.18–2.62)
Hip Arthroplasty (HPRO)	3	5.36	0.56 (0.11–1.64)
Abdominal Hysterectomy (HYST)	0	0.33	0.00 (0.00–11.09)
Colon surgery (COLO)	6	6.82	0.88 (0.32–1.91)
PINNACLE HEALTH HOSPITALS - HARRISBURG HOSPITAL (34068)			
Cardiac (CARD)	0	2.59	0.00 (0.00–1.42)
Cardiac Bypass — Single Incision (CBGC)	1	0.79	1.26 (0.02–7.03)
Cardiac Bypass — Dual Incision (CBGB)	5	4.75	1.05 (0.34–2.46)
Knee Arthroplasty (KPRO)	7	3.58	1.95 (0.78–4.03)
Hip Arthroplasty (HPRO)	7	4.12	1.70 (0.68–3.50)
Abdominal Hysterectomy (HYST)	1	3.29	0.30 (0.00–1.69)
Colon surgery (COLO)	11	8.89	1.24 (0.62–2.22)
PINNACLE HEALTH HOSPITALS - WEST SHORE HOSPITAL (35123)			
Cardiac (CARD)	0	0.10	0.00 (0.00–37.42)
Cardiac Bypass — Single Incision (CBGC)	0	0.04	0.00 (0.00–102.71)
Cardiac Bypass — Dual Incision (CBGB)	0	0.65	0.00 (0.00–5.66)
Knee Arthroplasty (KPRO)	2	0.91	2.19 (0.25–7.91)
Hip Arthroplasty (HPRO)	0	1.68	0.00 (0.00–2.18)
Abdominal Hysterectomy (HYST)	4	4.52	0.88 (0.24–2.26)
Colon surgery (COLO)	6	8.05	0.75 (0.27–1.62)
POCONO MEDICAL CENTER (11772)			
Cardiac (CARD)	0	0.40	0.00 (0.00–9.26)
Cardiac Bypass — Single Incision (CBGC)	0	0.12	0.00 (0.00–29.34)
Cardiac Bypass — Dual Incision (CBGB)	2	2.67	0.75 (0.08–2.70)
Knee Arthroplasty (KPRO)	1	0.49	2.03 (0.03–11.32)
Hip Arthroplasty (HPRO)	0	1.47	0.00 (0.00–2.50)
Abdominal Hysterectomy (HYST)	0	1.81	0.00 (0.00–2.03)
Colon surgery (COLO)	10	6.42	1.56 (0.75–2.87)

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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)
POTTSTOWN MEMORIAL MEDICAL CENTER (11983)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	4	1.47	2.73 (0.73–6.98)
Hip Arthroplasty (HPRO)	0	1.84	0.00 (0.00–1.99)
Abdominal Hysterectomy (HYST)	0	0.33	0.00 (0.00–10.96)
Colon surgery (COLO)	2	2.34	0.85 (0.10–3.08)
PUNXSUTAWNEY AREA HOSPITAL (11830)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.12	8.15 (0.11–45.33)
Hip Arthroplasty (HPRO)	0	0.25	0.00 (0.00–14.42)
Abdominal Hysterectomy (HYST)	1	0.20	4.93 (0.06–27.43)
Colon surgery (COLO)	0	0.37	0.00 (0.00–9.84)
READING HOSPITAL (12375)			
Cardiac (CARD)	1	0.72	1.40 (0.02–7.77)
Cardiac Bypass — Single Incision (CBGC)	2	0.94	2.13 (0.24–7.69)
Cardiac Bypass — Dual Incision (CBGB)	2	2.42	0.83 (0.09–2.98)
Knee Arthroplasty (KPRO)	0	3.98	0.00 (0.00–0.92)
Hip Arthroplasty (HPRO)	6	5.36	1.12 (0.41–2.43)
Abdominal Hysterectomy (HYST)	8	5.60	1.43 (0.61–2.81)
Colon surgery (COLO)	37	13.05	2.83 (2.00–3.91)
REGIONAL HOSPITAL OF SCRANTON (12533)			
Cardiac (CARD)	0	0.71	0.00 (0.00–5.20)
Cardiac Bypass — Single Incision (CBGC)	0	0.21	0.00 (0.00–17.12)
Cardiac Bypass — Dual Incision (CBGB)	1	1.89	0.53 (0.01–2.95)
Knee Arthroplasty (KPRO)	3	2.84	1.06 (0.21–3.09)
Hip Arthroplasty (HPRO)	0	3.05	0.00 (0.00–1.20)
Abdominal Hysterectomy (HYST)	0	1.54	0.00 (0.00–2.39)
Colon surgery (COLO)	4	9.39	0.43 (0.11–1.09)
RIDDLE MEMORIAL HOSPITAL (11731)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	2	3.28	0.61 (0.07–2.20)
Hip Arthroplasty (HPRO)	4	4.57	0.88 (0.24–2.24)
Abdominal Hysterectomy (HYST)	0	0.95	0.00 (0.00–3.84)
Colon surgery (COLO)	1	6.21	0.16 (0.00–0.90)
ROBERT PACKER HOSPITAL (12422)			
Cardiac (CARD)	0	0.60	0.00 (0.00–6.11)
Cardiac Bypass — Single Incision (CBGC)	0	0.13	0.00 (0.00–28.26)
Cardiac Bypass — Dual Incision (CBGB)	2	1.64	1.22 (0.14–4.42)
Knee Arthroplasty (KPRO)	0	2.50	0.00 (0.00–1.47)
Hip Arthroplasty (HPRO)	1	3.68	0.27 (0.00–1.51)
Abdominal Hysterectomy (HYST)	0	0.71	0.00 (0.00–5.15)
Colon surgery (COLO)	2	10.21	0.20 (0.02–0.71)

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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)
ROTHMAN ORTHOPAEDIC SPECIALTY HOSPITAL (15202)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	2.58	0.00 (0.00–1.42)
Hip Arthroplasty (HPRO)	1	5.50	0.18 (0.00–1.01)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	.	.	.
ROXBOROUGH MEMORIAL HOSPITAL (11978)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.27	0.00 (0.00–13.63)
Hip Arthroplasty (HPRO)	1	0.14	7.33 (0.10–40.77)
Abdominal Hysterectomy (HYST)	0	0.06	0.00 (0.00–63.02)
Colon surgery (COLO)	0	0.44	0.00 (0.00–8.39)
SACRED HEART HOSPITAL (11684)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.40	2.53 (0.03–14.07)
Hip Arthroplasty (HPRO)	2	0.75	2.65 (0.30–9.58)
Abdominal Hysterectomy (HYST)	2	1.49	1.35 (0.15–4.86)
Colon surgery (COLO)	2	0.95	2.11 (0.24–7.60)
SAINT VINCENT HOSPITAL (11699)			
Cardiac (CARD)	0	0.70	0.00 (0.00–5.21)
Cardiac Bypass — Single Incision (CBGC)	0	0.07	0.00 (0.00–53.95)
Cardiac Bypass — Dual Incision (CBGB)	1	3.91	0.26 (0.00–1.42)
Knee Arthroplasty (KPRO)	1	2.05	0.49 (0.01–2.72)
Hip Arthroplasty (HPRO)	4	3.57	1.12 (0.30–2.87)
Abdominal Hysterectomy (HYST)	4	1.22	3.27 (0.88–8.38)
Colon surgery (COLO)	18	8.36	2.15 (1.28–3.40)
SCHUYLKILL MEDICAL CENTER - EAST NORWEGIAN STREET (11922)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.57	0.00 (0.00–6.48)
Hip Arthroplasty (HPRO)	1	0.60	1.66 (0.02–9.25)
Abdominal Hysterectomy (HYST)	0	0.02	0.00 (0.00–153.77)
Colon surgery (COLO)	4	3.61	1.11 (0.30–2.84)
SCHUYLKILL MEDICAL CENTER - SOUTH JACKSON STREET (12087)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.49	2.04 (0.03–11.36)
Hip Arthroplasty (HPRO)	1	0.44	2.26 (0.03–12.57)
Abdominal Hysterectomy (HYST)	1	2.09	0.48 (0.01–2.67)
Colon surgery (COLO)	0	1.89	0.00 (0.00–1.94)
SHARON REGIONAL HEALTH SYSTEM (12250)			
Cardiac (CARD)	0	0.06	0.00 (0.00–63.30)
Cardiac Bypass — Single Incision (CBGC)	0	0.02	0.00 (0.00–205.41)
Cardiac Bypass — Dual Incision (CBGB)	2	0.46	4.32 (0.49–15.60)
Knee Arthroplasty (KPRO)	1	1.53	0.65 (0.01–3.64)
Hip Arthroplasty (HPRO)	2	1.99	1.01 (0.11–3.63)
Abdominal Hysterectomy (HYST)	0	0.21	0.00 (0.00–17.74)
Colon surgery (COLO)	3	3.44	0.87 (0.18–2.55)

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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)
SHRINERS HOSPITALS FOR CHILDREN - PHILA (12244)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	.	.	.
Hip Arthroplasty (HPRO)	0	0.04	0.00 (0.00–103.86)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	.	.	.
SOLDIERS AND SAILORS MEMORIAL HOSPITAL (11688)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.37	0.00 (0.00–10.04)
Hip Arthroplasty (HPRO)	1	0.43	2.34 (0.03–13.01)
Abdominal Hysterectomy (HYST)	0	0.42	0.00 (0.00–8.74)
Colon surgery (COLO)	3	0.91	3.29 (0.66–9.61)
SOMERSET HOSPITAL (12282)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.71	0.00 (0.00–5.15)
Hip Arthroplasty (HPRO)	0	1.62	0.00 (0.00–2.26)
Abdominal Hysterectomy (HYST)	0	0.35	0.00 (0.00–10.59)
Colon surgery (COLO)	3	2.59	1.16 (0.23–3.38)
SOUTHWEST REGIONAL MEDICAL CENTER (11942)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.03	0.00 (0.00–121.21)
Hip Arthroplasty (HPRO)	0	0.09	0.00 (0.00–38.73)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	0	0.28	0.00 (0.00–13.07)
ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)			
Cardiac (CARD)	0	0.29	0.00 (0.00–12.78)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	.	.	.
Hip Arthroplasty (HPRO)	.	.	.
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	1	1.82	0.55 (0.01–3.06)
ST. CLAIR MEMORIAL HOSPITAL (10561)			
Cardiac (CARD)	0	0.25	0.00 (0.00–14.44)
Cardiac Bypass — Single Incision (CBGC)	0	0.04	0.00 (0.00–102.71)
Cardiac Bypass — Dual Incision (CBGB)	0	1.50	0.00 (0.00–2.45)
Knee Arthroplasty (KPRO)	2	4.14	0.48 (0.05–1.74)
Hip Arthroplasty (HPRO)	4	4.78	0.84 (0.23–2.14)
Abdominal Hysterectomy (HYST)	2	1.07	1.86 (0.21–6.73)
Colon surgery (COLO)	15	10.71	1.40 (0.78–2.31)
ST. JOSEPH MEDICAL CTR (11961)			
Cardiac (CARD)	2	0.35	5.70 (0.64–20.56)
Cardiac Bypass — Single Incision (CBGC)	0	0.14	0.00 (0.00–26.31)
Cardiac Bypass — Dual Incision (CBGB)	3	1.32	2.28 (0.46–6.65)
Knee Arthroplasty (KPRO)	3	0.96	3.13 (0.63–9.16)
Hip Arthroplasty (HPRO)	1	1.31	0.76 (0.01–4.25)
Abdominal Hysterectomy (HYST)	0	0.78	0.00 (0.00–4.67)
Colon surgery (COLO)	6	4.24	1.42 (0.52–3.08)

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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. JOSEPHS HOSPITAL (12438)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	.	.	.
Hip Arthroplasty (HPRO)	0	0.04	0.00 (0.00–103.43)
Abdominal Hysterectomy (HYST)	0	0.05	0.00 (0.00–70.41)
Colon surgery (COLO)	0	0.18	0.00 (0.00–20.66)
ST. LUKES HOSPITAL BETHLEHEM (11718)			
Cardiac (CARD)	0	1.05	0.00 (0.00–3.50)
Cardiac Bypass — Single Incision (CBGC)	0	0.21	0.00 (0.00–17.12)
Cardiac Bypass — Dual Incision (CBGB)	0	3.07	0.00 (0.00–1.20)
Knee Arthroplasty (KPRO)	1	3.22	0.31 (0.00–1.73)
Hip Arthroplasty (HPRO)	5	5.28	0.95 (0.31–2.21)
Abdominal Hysterectomy (HYST)	3	2.26	1.33 (0.27–3.88)
Colon surgery (COLO)	5	12.54	0.40 (0.13–0.93)
ST. LUKES HOSPITAL- ANDERSON CAMPUS (21487)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.11	0.00 (0.00–33.92)
Hip Arthroplasty (HPRO)	0	0.41	0.00 (0.00–8.97)
Abdominal Hysterectomy (HYST)	0	0.01	0.00 (0.00–413.53)
Colon surgery (COLO)	2	2.60	0.77 (0.09–2.78)
ST. LUKES MINERS MEMORIAL HOSPITAL (11784)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.39	2.56 (0.03–14.25)
Hip Arthroplasty (HPRO)	0	0.31	0.00 (0.00–11.94)
Abdominal Hysterectomy (HYST)	0	0.01	0.00 (0.00–413.53)
Colon surgery (COLO)	0	0.53	0.00 (0.00–6.88)
ST. LUKES QUAKERTOWN HOSPITAL (11711)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.20	5.11 (0.07–28.45)
Hip Arthroplasty (HPRO)	0	0.42	0.00 (0.00–8.73)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	1	1.12	0.89 (0.01–4.97)
ST. MARY MEDICAL CENTER (11885)			
Cardiac (CARD)	0	0.94	0.00 (0.00–3.90)
Cardiac Bypass — Single Incision (CBGC)	0	0.30	0.00 (0.00–12.22)
Cardiac Bypass — Dual Incision (CBGB)	6	2.79	2.15 (0.78–4.67)
Knee Arthroplasty (KPRO)	3	3.19	0.94 (0.19–2.75)
Hip Arthroplasty (HPRO)	4	4.32	0.93 (0.25–2.37)
Abdominal Hysterectomy (HYST)	2	1.70	1.18 (0.13–4.26)
Colon surgery (COLO)	17	10.07	1.69 (0.98–2.70)
SUNBURY COMMUNITY HOSP (12105)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	.	.	.
Hip Arthroplasty (HPRO)	2	0.07	30.76 (3.46–111.07)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	0	0.47	0.00 (0.00–7.81)

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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 INSTITUTE OF READING (12535)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	3	1.85	1.62 (0.33–4.74)
Hip Arthroplasty (HPRO)	1	1.01	0.99 (0.01–5.49)
Abdominal Hysterectomy (HYST)	0	0.03	0.00 (0.00–137.84)
Colon surgery (COLO)	0	0.21	0.00 (0.00–17.27)
SURGICAL SPECIALTY CENTER AT COORDINATED HEALTH, THE (15259)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	2	2.36	0.85 (0.09–3.05)
Hip Arthroplasty (HPRO)	2	1.93	1.04 (0.12–3.74)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	.	.	.
TEMPLE UNIVERSITY HOSPITAL (12382)			
Cardiac (CARD)	0	1.36	0.00 (0.00–2.70)
Cardiac Bypass — Single Incision (CBGC)	0	0.13	0.00 (0.00–28.26)
Cardiac Bypass — Dual Incision (CBGB)	3	3.48	0.86 (0.17–2.52)
Knee Arthroplasty (KPRO)	3	2.38	1.26 (0.25–3.69)
Hip Arthroplasty (HPRO)	4	3.68	1.09 (0.29–2.78)
Abdominal Hysterectomy (HYST)	1	2.48	0.40 (0.01–2.24)
Colon surgery (COLO)	6	14.37	0.42 (0.15–0.91)
THOMAS JEFFERSON UNIVERSITY HOSPITAL - METHODIST (12017)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.34	2.94 (0.04–16.35)
Hip Arthroplasty (HPRO)	0	0.57	0.00 (0.00–6.40)
Abdominal Hysterectomy (HYST)	0	0.18	0.00 (0.00–20.68)
Colon surgery (COLO)	4	2.57	1.55 (0.42–3.98)
THOMAS JEFFERSON UNIVERSITY HOSPITAL (11506)			
Cardiac (CARD)	1	0.79	1.27 (0.02–7.07)
Cardiac Bypass — Single Incision (CBGC)	1	0.16	6.17 (0.08–34.33)
Cardiac Bypass — Dual Incision (CBGB)	2	2.14	0.93 (0.10–3.38)
Knee Arthroplasty (KPRO)	3	5.20	0.58 (0.12–1.69)
Hip Arthroplasty (HPRO)	8	11.21	0.71 (0.31–1.41)
Abdominal Hysterectomy (HYST)	6	3.27	1.83 (0.67–3.99)
Colon surgery (COLO)	7	15.44	0.45 (0.18–0.93)

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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)
TITUSVILLE AREA HOSPITAL (11738)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.10	9.60 (0.13–53.41)
Hip Arthroplasty (HPRO)	0	0.29	0.00 (0.00–12.66)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	1	0.39	2.58 (0.03–14.33)
TROY COMMUNITY HOSPITAL (12018)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	.	.	.
Hip Arthroplasty (HPRO)	.	.	.
Abdominal Hysterectomy (HYST)	0	0.01	0.00 (0.00–413.53)
Colon surgery (COLO)	.	.	.
TYLER MEMORIAL HOSPITAL (11829)			
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	1.13	0.88 (0.01–4.92)
TYRONE HOSPITAL (12717)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	3	0.69	4.38 (0.88–12.79)
Hip Arthroplasty (HPRO)	6	0.68	8.89 (3.25–19.34)
Abdominal Hysterectomy (HYST)	0	0.04	0.00 (0.00–82.71)
Colon surgery (COLO)	1	0.07	15.24 (0.20–84.79)
UNIONTOWN HOSPITAL (10441)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	1.31	0.00 (0.00–2.80)
Hip Arthroplasty (HPRO)	2	1.95	1.02 (0.11–3.70)
Abdominal Hysterectomy (HYST)	0	1.28	0.00 (0.00–2.87)
Colon surgery (COLO)	1	4.40	0.23 (0.00–1.26)
UPMC ALTOONA (10178)			
Cardiac (CARD)	3	0.76	3.94 (0.79–11.50)
Cardiac Bypass — Single Incision (CBGC)	0	0.25	0.00 (0.00–14.40)
Cardiac Bypass — Dual Incision (CBGB)	6	1.68	3.58 (1.31–7.79)
Knee Arthroplasty (KPRO)	2	1.50	1.34 (0.15–4.82)
Hip Arthroplasty (HPRO)	5	2.36	2.12 (0.68–4.94)
Abdominal Hysterectomy (HYST)	8	1.85	4.33 (1.86–8.53)
Colon surgery (COLO)	5	11.42	0.44 (0.14–1.02)
UPMC BEDFORD (11680)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.12	0.00 (0.00–31.16)
Hip Arthroplasty (HPRO)	0	0.10	0.00 (0.00–36.56)
Abdominal Hysterectomy (HYST)	0	0.79	0.00 (0.00–4.62)
Colon surgery (COLO)	0	0.48	0.00 (0.00–7.65)

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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 EAST (28812)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	4	1.23	3.25 (0.87–8.32)
Hip Arthroplasty (HPRO)	1	1.62	0.62 (0.01–3.44)
Abdominal Hysterectomy (HYST)	0	0.02	0.00 (0.00–206.76)
Colon surgery (COLO)	3	3.49	0.86 (0.17–2.51)
UPMC HAMOT (11725)			
Cardiac (CARD)	0	0.74	0.00 (0.00–4.99)
Cardiac Bypass — Single Incision (CBGC)	0	0.29	0.00 (0.00–12.78)
Cardiac Bypass — Dual Incision (CBGB)	5	3.84	1.30 (0.42–3.04)
Knee Arthroplasty (KPRO)	2	2.18	0.92 (0.10–3.32)
Hip Arthroplasty (HPRO)	5	4.00	1.25 (0.40–2.92)
Abdominal Hysterectomy (HYST)	3	1.49	2.02 (0.41–5.90)
Colon surgery (COLO)	12	8.05	1.49 (0.77–2.60)
UPMC HORIZON (11675)			
Cardiac (CARD)	0	0.01	0.00 (0.00–280.65)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	4	1.65	2.42 (0.65–6.19)
Hip Arthroplasty (HPRO)	3	1.60	1.88 (0.38–5.49)
Abdominal Hysterectomy (HYST)	0	0.73	0.00 (0.00–5.04)
Colon surgery (COLO)	1	3.43	0.29 (0.00–1.62)
UPMC MCKEESPORT (11707)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.35	2.85 (0.04–15.86)
Hip Arthroplasty (HPRO)	0	0.44	0.00 (0.00–8.39)
Abdominal Hysterectomy (HYST)	0	0.28	0.00 (0.00–13.31)
Colon surgery (COLO)	2	1.92	1.04 (0.12–3.77)
UPMC MERCY (10384)			
Cardiac (CARD)	0	0.53	0.00 (0.00–6.86)
Cardiac Bypass — Single Incision (CBGC)	0	0.09	0.00 (0.00–42.73)
Cardiac Bypass — Dual Incision (CBGB)	0	1.87	0.00 (0.00–1.96)
Knee Arthroplasty (KPRO)	1	1.03	0.97 (0.01–5.39)
Hip Arthroplasty (HPRO)	1	1.83	0.55 (0.01–3.04)
Abdominal Hysterectomy (HYST)	1	1.52	0.66 (0.01–3.66)
Colon surgery (COLO)	9	6.12	1.47 (0.67–2.79)
UPMC NORTHWEST (11837)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.42	2.38 (0.03–13.24)
Hip Arthroplasty (HPRO)	0	0.81	0.00 (0.00–4.52)
Abdominal Hysterectomy (HYST)	0	0.19	0.00 (0.00–19.41)
Colon surgery (COLO)	2	1.88	1.06 (0.12–3.84)
UPMC PASSAVANT (11242)			
Cardiac (CARD)	0	0.76	0.00 (0.00–4.83)
Cardiac Bypass — Single Incision (CBGC)	1	0.16	6.30 (0.08–35.07)
Cardiac Bypass — Dual Incision (CBGB)	4	2.90	1.38 (0.37–3.54)
Knee Arthroplasty (KPRO)	2	2.73	0.73 (0.08–2.64)
Hip Arthroplasty (HPRO)	4	3.10	1.29 (0.35–3.31)
Abdominal Hysterectomy (HYST)	3	3.03	0.99 (0.20–2.89)
Colon surgery (COLO)	44	20.70	2.13 (1.54–2.85)

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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)
UPMC PRESBYTERIAN SHADYSIDE - SHADYSIDE (10118)			
Cardiac (CARD)	3	2.96	1.01 (0.20–2.96)
Cardiac Bypass — Single Incision (CBGC)	3	0.86	3.47 (0.70–10.14)
Cardiac Bypass — Dual Incision (CBGB)	10	7.31	1.37 (0.66–2.52)
Knee Arthroplasty (KPRO)	7	4.28	1.64 (0.66–3.37)
Hip Arthroplasty (HPRO)	10	9.15	1.09 (0.52–2.01)
Abdominal Hysterectomy (HYST)	1	1.18	0.85 (0.01–4.72)
Colon surgery (COLO)	54	18.43	2.93 (2.20–3.82)
UPMC PRESBYTERIAN SHADYSIDE (10348)			
Cardiac (CARD)	5	2.76	1.81 (0.58–4.23)
Cardiac Bypass — Single Incision (CBGC)	1	0.35	2.84 (0.04–15.82)
Cardiac Bypass — Dual Incision (CBGB)	0	3.59	0.00 (0.00–1.02)
Knee Arthroplasty (KPRO)	0	0.09	0.00 (0.00–41.08)
Hip Arthroplasty (HPRO)	4	1.21	3.30 (0.89–8.46)
Abdominal Hysterectomy (HYST)	0	0.10	0.00 (0.00–37.80)
Colon surgery (COLO)	47	23.42	2.01 (1.47–2.67)
UPMC ST. MARGARET (11561)			
Cardiac (CARD)	0	0.01	0.00 (0.00–280.65)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	3	3.62	0.83 (0.17–2.42)
Hip Arthroplasty (HPRO)	11	3.66	3.01 (1.50–5.38)
Abdominal Hysterectomy (HYST)	2	0.42	4.75 (0.53–17.14)
Colon surgery (COLO)	7	7.32	0.96 (0.38–1.97)
WARREN GENERAL HOSPITAL (12216)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	1.03	0.00 (0.00–3.55)
Hip Arthroplasty (HPRO)	1	0.67	1.50 (0.02–8.34)
Abdominal Hysterectomy (HYST)	2	1.02	1.97 (0.22–7.11)
Colon surgery (COLO)	2	0.93	2.15 (0.24–7.78)
WASHINGTON HOSPITAL, THE (11460)			
Cardiac (CARD)	0	0.25	0.00 (0.00–14.65)
Cardiac Bypass — Single Incision (CBGC)	0	0.17	0.00 (0.00–22.16)
Cardiac Bypass — Dual Incision (CBGB)	1	1.14	0.87 (0.01–4.86)
Knee Arthroplasty (KPRO)	1	0.63	1.60 (0.02–8.90)
Hip Arthroplasty (HPRO)	0	1.44	0.00 (0.00–2.55)
Abdominal Hysterectomy (HYST)	0	1.69	0.00 (0.00–2.16)
Colon surgery (COLO)	2	8.50	0.24 (0.03–0.85)
WAYNE MEMORIAL HOSPITAL (12004)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	1	0.67	1.50 (0.02–8.35)
Hip Arthroplasty (HPRO)	1	1.09	0.92 (0.01–5.09)
Abdominal Hysterectomy (HYST)	2	0.22	8.95 (1.01–32.33)
Colon surgery (COLO)	1	2.43	0.41 (0.01–2.29)
WAYNESBORO HOSPITAL (11642)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	.	.	.
Hip Arthroplasty (HPRO)	.	.	.
Abdominal Hysterectomy (HYST)	0	0.10	0.00 (0.00–37.60)
Colon surgery (COLO)	1	0.84	1.20 (0.02–6.66)

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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)
WELLSPAN SURGERY AND REHABILITATION HOSPITAL (27430)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	3	1.97	1.52 (0.31–4.44)
Hip Arthroplasty (HPRO)	8	2.34	3.42 (1.47–6.73)
Abdominal Hysterectomy (HYST)	.	.	.
Colon surgery (COLO)	.	.	.
WEST PENN HOSPITAL (11864)			
Cardiac (CARD)	0	0.09	0.00 (0.00–40.87)
Cardiac Bypass — Single Incision (CBGC)	0	0.10	0.00 (0.00–37.09)
Cardiac Bypass — Dual Incision (CBGB)	5	1.83	2.73 (0.88–6.37)
Knee Arthroplasty (KPRO)	1	1.29	0.78 (0.01–4.32)
Hip Arthroplasty (HPRO)	1	1.90	0.53 (0.01–2.92)
Abdominal Hysterectomy (HYST)	14	7.25	1.93 (1.05–3.24)
Colon surgery (COLO)	2	5.38	0.37 (0.04–1.34)
WILKES-BARRE GENERAL HOSPITAL (11916)			
Cardiac (CARD)	1	0.10	9.77 (0.13–54.34)
Cardiac Bypass — Single Incision (CBGC)	0	0.29	0.00 (0.00–12.81)
Cardiac Bypass — Dual Incision (CBGB)	3	2.02	1.49 (0.30–4.35)
Knee Arthroplasty (KPRO)	4	1.85	2.16 (0.58–5.54)
Hip Arthroplasty (HPRO)	1	2.06	0.49 (0.01–2.70)
Abdominal Hysterectomy (HYST)	1	0.87	1.14 (0.01–6.37)
Colon surgery (COLO)	20	9.53	2.10 (1.28–3.24)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)			
Cardiac (CARD)	0	0.44	0.00 (0.00–8.42)
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	2	3.48	0.57 (0.06–2.07)
Knee Arthroplasty (KPRO)	5	2.47	2.02 (0.65–4.72)
Hip Arthroplasty (HPRO)	6	4.51	1.33 (0.49–2.90)
Abdominal Hysterectomy (HYST)	0	0.24	0.00 (0.00–15.32)
Colon surgery (COLO)	4	1.52	2.62 (0.71–6.72)
WINDBER HOSPITAL (12031)			
Cardiac (CARD)	.	.	.
Cardiac Bypass — Single Incision (CBGC)	.	.	.
Cardiac Bypass — Dual Incision (CBGB)	.	.	.
Knee Arthroplasty (KPRO)	0	0.14	0.00 (0.00–25.96)
Hip Arthroplasty (HPRO)	2	0.17	12.10 (1.36–43.69)
Abdominal Hysterectomy (HYST)	0	0.69	0.00 (0.00–5.35)
Colon surgery (COLO)	0	2.11	0.00 (0.00–1.74)
YORK HOSPITAL (10108)			
Cardiac (CARD)	1	1.55	0.64 (0.01–3.58)
Cardiac Bypass — Single Incision (CBGC)	1	1.52	0.66 (0.01–3.65)
Cardiac Bypass — Dual Incision (CBGB)	5	4.73	1.06 (0.34–2.47)
Knee Arthroplasty (KPRO)	0	1.02	0.00 (0.00–3.58)
Hip Arthroplasty (HPRO)	8	3.65	2.19 (0.94–4.32)
Abdominal Hysterectomy (HYST)	8	6.02	1.33 (0.57–2.62)
Colon surgery (COLO)	24	18.50	1.30 (0.83–1.93)

4.6 Influenza Vaccination of Health Care 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 health care 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 health care institutions to have effective health care personnel influenza vaccination programs in place:

1. Health care 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 health care personnel influenza vaccination rates through 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 health care personnel to achieve vaccination of health care 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 fourth 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 254 hospitals open during the 2015–2016 influenza season reported healthcare personnel influenza vaccination rates to NHSN (including three hospitals that opened part way through the season), and 175 hospitals (69 percent) reported vaccination rates for contractors in addition to vaccination rates for employees, licensed independent practitioners (LIP), and adult students, trainees and volunteers (STV). Overall, hospitals reported the vaccination status of 409,601 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).

Facilities have continued to build systems for effectively tracking HCP influenza vaccination rates. The median

facility HCP unknown vaccination rate is near zero for the 2015–2016 influenza season. Notably, the median facility unknown vaccination rate among LIPs decreased from 10.7 percent to 5.3 percent. Consistent with previous data, less than 0.01 percent of HCP were not vaccinated because of a reported medical contraindication to influenza vaccine.

Table 4.6.1: Summary of Healthcare Personnel Influenza Vaccination Rates (Median Facility Percentage) During the 2015–2016 Influenza Season — Pennsylvania

	Vaccinated		Declined		Medical Contraindication		Unknown	
	n	median %	n	median %	n	median %	n	median %
Employee	279,787	93.77	14,322	2.89	2,204	0.62	9,254	0.56
LIP ^b	41,673	87.45	944	0.00	458	0.00	13,252	5.33
STV ^c	58,213	97.18	1,831	0.00	152	0.00	3,806	0.00
Contractor	9,666	97.68	305	0.00	46	0.00	989	0.00
All	389,339	94.24	17,402	0.23	2,860	0.00	27,301	0.00

^a 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. Rates are the median facility vaccination rate.

^b Licensed independent practitioner

^c Student, trainee, volunteer

4.6.2 Influenza Vaccination of HCP — By Facility

Hospitals reported significant improvements from last year. The median employee vaccination rate increased 5 percent (from 89 percent to 94 percent) from the 2014–2015 season to the 2015–2016 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 2015–2016 influenza season, 152 facilities (60 percent of 254 facilities) reported employee vaccination rates above 90 percent, and 71 facilities (28 percent) reported vaccination rates at goal for employees, LIPs and STVs; this is an increase of 27 percent and 42 percent respectively from the previous season. Overall, the percent of facilities with employee vaccination rates at goal has increased 245 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 continue to vary substantially between facilities; however, unlike the bimodal distribution of facility vaccination rates of the 2011–2012 and 2012–2013 influenza seasons, the distribution of influenza vaccination rates is becoming increasingly skewed with 60 percent of all facilities at or above goal and a long tail of facilities below goal (Figure 4.6.1). Among the 152 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 72 percent.

Among the 25 largest facilities in the state (tenth decile by bed size; Figure 4.6.2), 19 (76 percent) reported all-HCP vaccination rates above 90 percent; three facilities reported a rate between 80 and 90 percent; and the remaining three facilities reported all-HCP vaccination rates between 41 and 78 percent. Figure 4.6.3 is a map of the approximate location of each hospital; the color of the mapped hospital indicates its employee vaccination rate. Notably, the number of facilities at goal in western Pennsylvania increased substantially from last year. Table 4.6.3 lists HCP seasonal influenza vaccination rates by facility.

Among the 26 smallest facilities (i.e., smallest decile by bed size) rates were more widely distributed; 14 facilities reported all-HCP vaccination rates above 90 percent, four facilities reported rates between 80 and 90 percent, four reported rates between 60 and 80 percent and four facilities reported rates between 40 and 60 percent. Table 4.6.3 lists HCP seasonal influenza vaccination rates by facility.

Figure 4.6.1: Distribution of Facility Healthcare Personnel (HCP) Seasonal Influenza Vaccination Rates by Worker Type — Pennsylvania, 2015–2016

Healthy People 2020 Goal = 90%

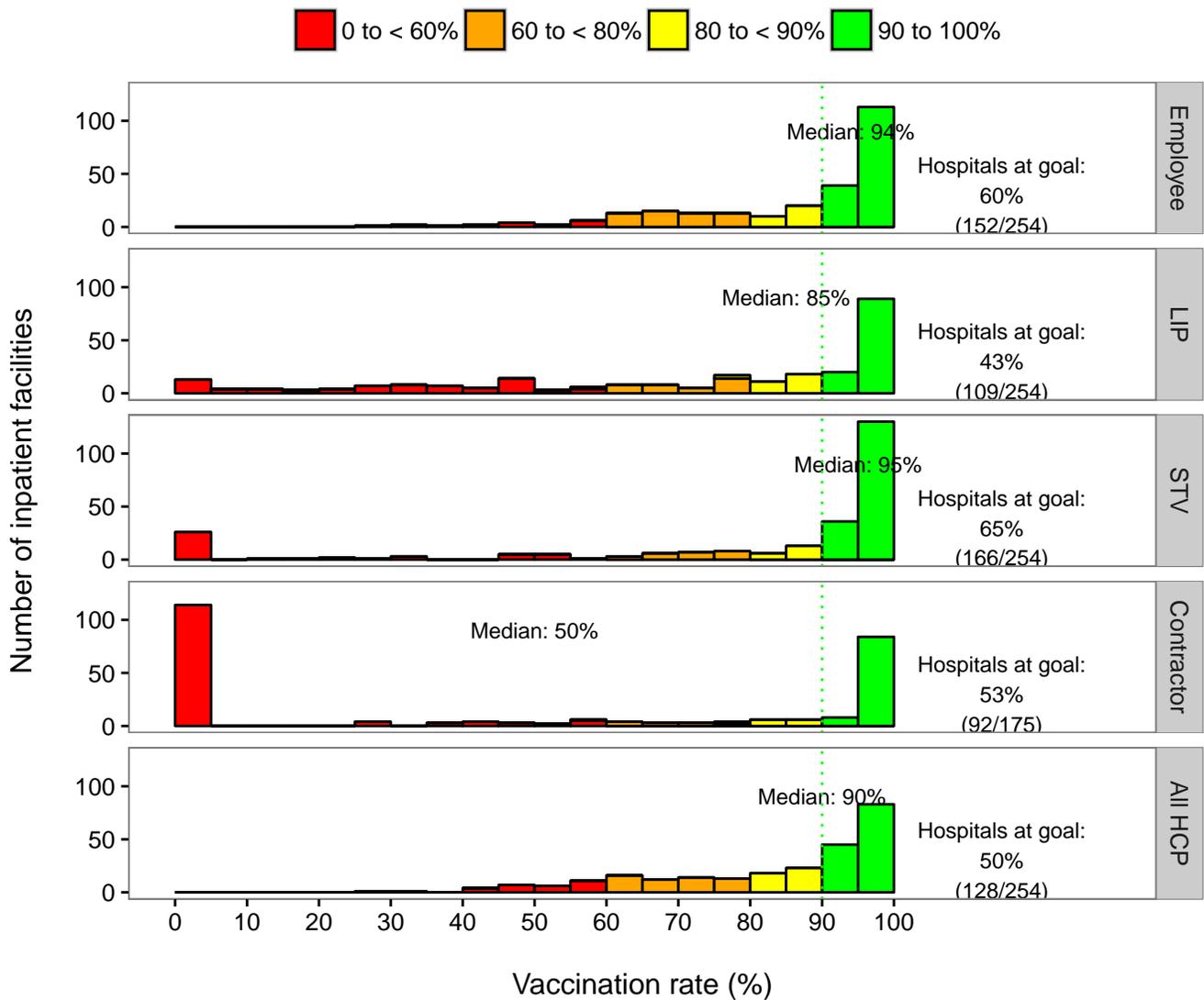


Figure 4.6.2: Distribution of Facility Healthcare Personnel (HCP) Seasonal Influenza Vaccination Rates Among 25 Largest Facilities — Pennsylvania, 2015–2016

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

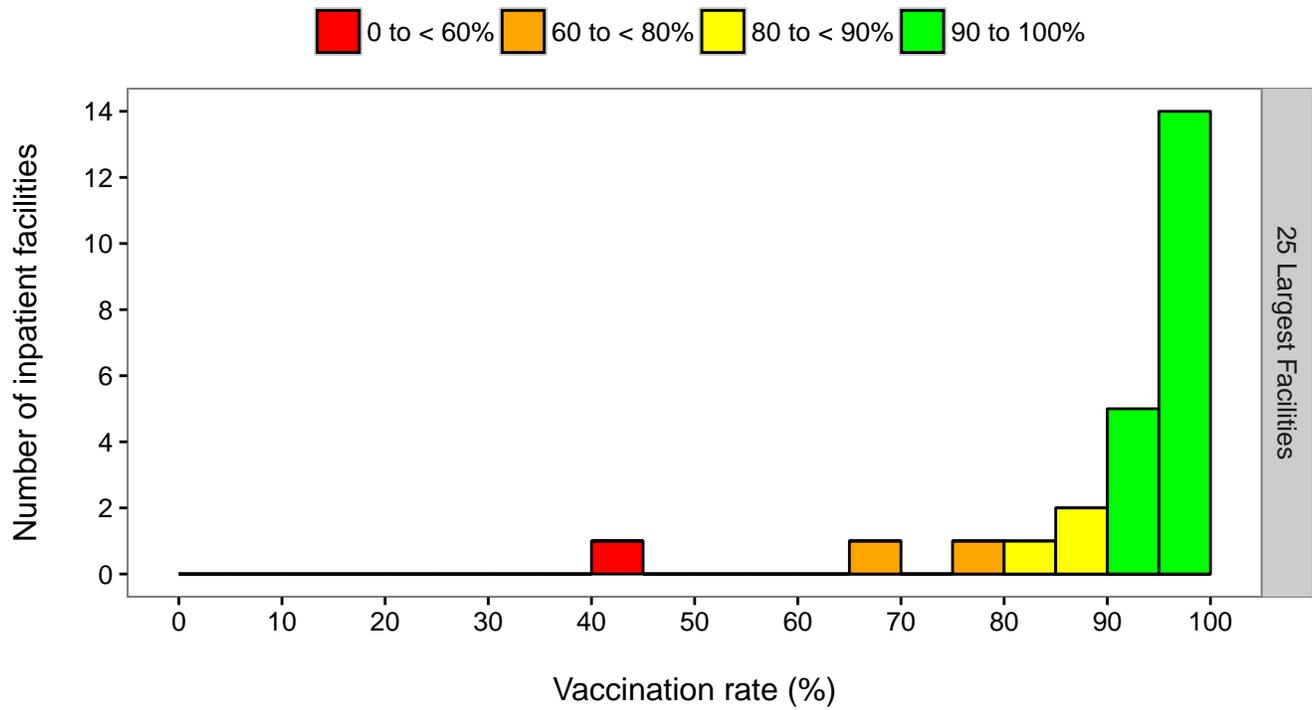


Figure 4.6.3: Map of Employee Seasonal Influenza Vaccination Rates by Facility — Pennsylvania, 2015–2016

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

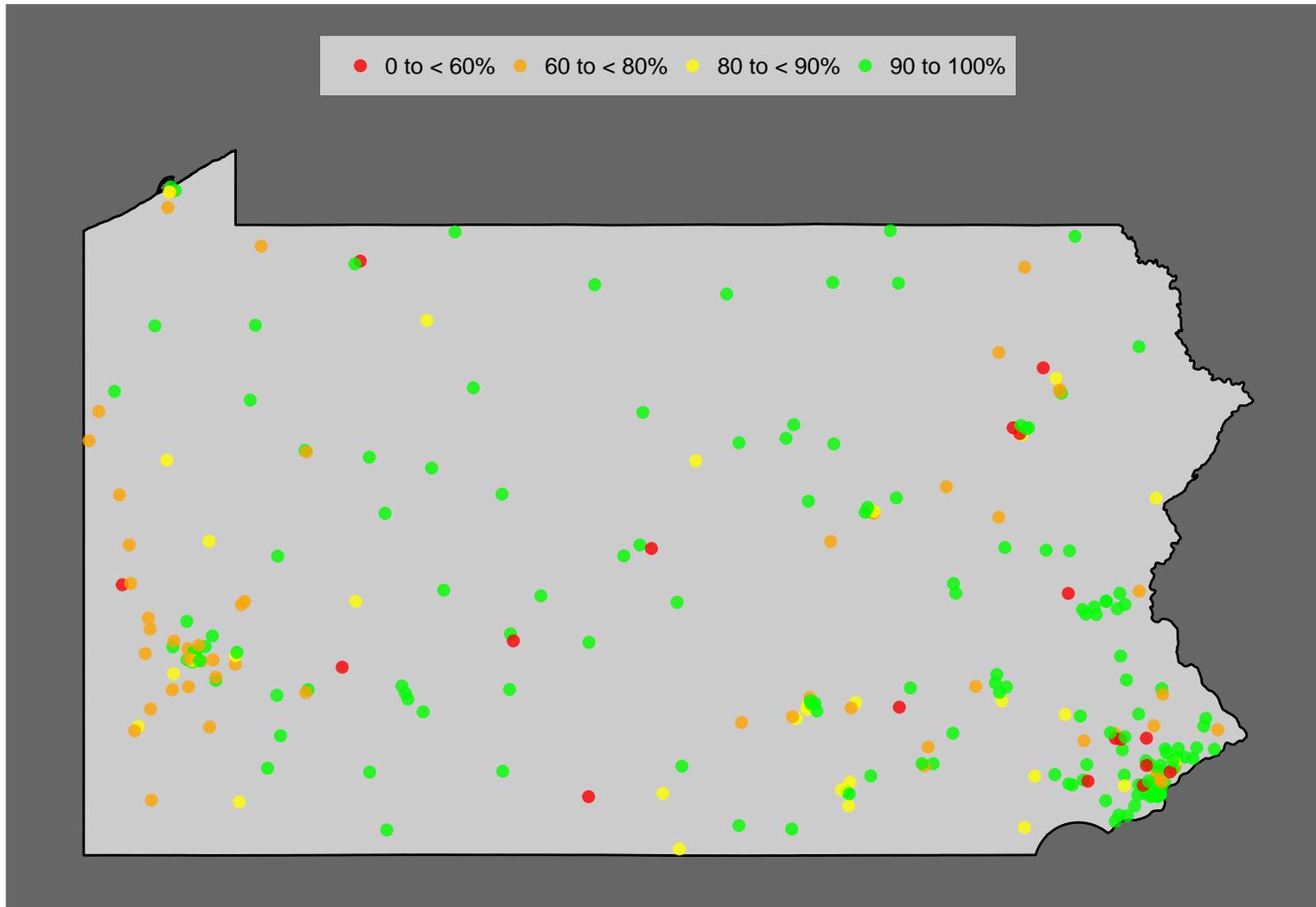


Table 4.6.2: Hospitals with Employee Seasonal Influenza Vaccination Rates of 90 Percent or Better — Pennsylvania, 2015–2016

Hospital Name (NHSN ID)
ABINGTON MEMORIAL HOSPITAL (11838)*
ALBERT EINSTEIN MEDICAL CENTER (10585)
ARIA HEALTH (11388)*
ARMSTRONG COUNTY MEMORIAL HOSPITAL (12057)
BARNES-KASSON COUNTY HOSPITAL (12404)
BELMONT BEHAVIORAL HOSPITAL, LLC (44290)*
BRADFORD REGIONAL MEDICAL CENTER (12361)
BUCKTAIL MEDICAL CENTER (12461)*
CHARLES COLE MEMORIAL HOSPITAL (11956)*
CHESTER COUNTY HOSPITAL (12016)
CHESTNUT HILL HOSPITAL (12304)
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)*
CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)
CLARION HOSPITAL (11654)
CONEMAUGH MEMORIAL MEDICAL CENTER (10280)*
CONEMAUGH MEYERSDALE MEDICAL CENTER (11968)
CONEMAUGH MINERS MEDICAL CENTER (12295)*
COORDINATED HEALTH ORTHOPEDIC HOSPITAL LLC (11872)
CRICHTON REHABILITATION CENTER (12273)*
CROZER CHESTER MEDICAL CENTER - SPRINGFIELD (11851)*
CROZER CHESTER MEDICAL CENTER - TAYLOR (11932)*
CROZER CHESTER MEDICAL CENTER (11839)*
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)*
DIVINE PROVIDENCE HOSPITAL (11743)
DOYLESTOWN HOSPITAL (10190)*
EAGLEVILLE HOSPITAL (12965)*
EASTERN REGIONAL MEDICAL CENTER (12348)
EINSTEIN AT ELKINS PARK (12500)
EINSTEIN MEDICAL CENTER MONTGOMERY (30210)
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 SHAMOKIN AREA COMMUNITY HOSPITAL (43346)
GEISINGER SOUTH WILKES BARRE (43981)
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)
GEISINGER-BLOOMSBURG HOSPITAL (12008)
GEISINGER-COMMUNITY MEDICAL CENTER (11914)
GEISINGER-LEWISTOWN HOSPITAL (11825)
GETTYSBURG HOSPITAL (11531)*
GNADEN HUETTEN MEMORIAL HOSPITAL (12241)
GOOD SAMARITAN HOSPITAL, THE (11712)*
GOOD SHEPHERD PENN PARTNERS AT RITTENHOUSE (13929)*
GOOD SHEPHERD REHABILITATION HOSPITAL, THE (11896)
GOOD SHEPHERD SPECIALTY HOSPITAL (11887)*
GRAND VIEW HOSPITAL (11847)*
GUTHRIE TOWANDA MEMORIAL HOSPITAL (12549)*
HAHNEMANN UNIVERSITY HOSPITAL (11437)
HANOVER HOSPITAL (11899)*
HAVEN BEHAVIORAL HOSPITAL OF EASTERN PENNSYLVANIA (14471)*
HEALTHSOUTH HARMARVILLE REHABILITATION HOSPITAL (11727)
HEALTHSOUTH NITTANY VALLEY REHABILITATION HOSPITAL (11667)
HEALTHSOUTH REHABILITATION HOSPITAL OF YORK (12058)*
HELEN M. SIMPSON REHABILITATION HOSPITAL (40371)
HIGHLANDS HOSPITAL (11902)

Table 4.6.2: (continued)

Hospital Name (NHSN ID)
HOLY REDEEMER HOSPITAL (11973)*
HOSPITAL OF THE UNIVERSITY OF PENNSYLVANIA (10219)
J C BLAIR MEMORIAL HOSPITAL (11724)*
JEANES HOSPITAL (11459)
JERSEY SHORE HOSPITAL (11689)
KINDRED HOSPITAL SOUTH PHILADELPHIA (11940)
LANCASTER GENERAL HOSPITAL (10183)*
LANCASTER REHABILITATION HOSPITAL (12628)*
LANSDALE HOSPITAL (12032)*
LEHIGH VALLEY HOSPITAL - MUHLENBERG (11898)*
LEHIGH VALLEY HOSPITAL (11884)*
LIFECARE HOSPITALS OF CHESTER COUNTY LLC (12005)
LOWER BUCKS HOSPITAL (12390)*
MAGEE REHABILITATION HOSPITAL (12146)*
MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)*
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)*
MEADVILLE MEDICAL CENTER (11583)*
MERCY FITZGERALD HOSPITAL (11683)
MERCY PHILADELPHIA HOSPITAL (11946)*
MERCY SUBURBAN HOSPITAL (11952)
MOSS REHABILITATION (12508)
MOUNT NITTANY MEDICAL CENTER (11797)
MUNCY VALLEY HOSPITAL (11748)*
NASON HOSPITAL (11907)
NAZARETH HOSPITAL (11919)
OHIO VALLEY GENERAL HOSPITAL (12298)
PALMERTON HOSPITAL (12396)
PENN HIGHLANDS BROOKVILLE (12418)
PENN HIGHLANDS CLEARFIELD (11843)*
PENN HIGHLANDS DUBOIS (11606)
PENN HIGHLANDS ELK (11859)*
PENN PRESBYTERIAN MEDICAL CENTER (11814)
PENNSYLVANIA HOSPITAL OF THE UNIVERSITY OF PA HEALTH SYS (11448)
PHYSICIANS CARE SURGICAL HOSPITAL (19630)*
PINNACLE HEALTH HOSPITALS - COMMUNITY GENERAL OSTEOPATHIC HOSPITAL (34069)
PINNACLE HEALTH HOSPITALS - HARRISBURG HOSPITAL (34068)
PINNACLE HEALTH HOSPITALS - WEST SHORE HOSPITAL (35123)
POST ACUTE MEDICAL SPECIALTY HOSPITAL OF WILKES-BARRE (12604)
PUNXSUTAWNEY AREA HOSPITAL (11830)*
READING HOSPITAL (12375)*
RIDDLE MEMORIAL HOSPITAL (11731)*
ROBERT PACKER HOSPITAL (12422)*
ROTHMAN ORTHOPAEDIC SPECIALTY HOSPITAL (15202)
ROXBOROUGH MEMORIAL HOSPITAL (11978)*
ROXBURY TREATMENT CENTER (12723)*
SACRED HEART HOSPITAL (11684)*
SAINT VINCENT HOSPITAL (11699)*
SCHUYLKILL MEDICAL CENTER - EAST NORWEGIAN STREET (11922)
SCHUYLKILL MEDICAL CENTER - SOUTH JACKSON STREET (12087)
SELECT SPECIALTY HOSPITAL - CENTRAL PA (13921)
SELECT SPECIALTY HOSPITAL - DANVILLE (12123)
SELECT SPECIALTY HOSPITAL - JOHNSTOWN (12299)*
SOLDIERS AND SAILORS MEMORIAL HOSPITAL (11688)*
SOMERSET HOSPITAL (12282)*

Table 4.6.2: (continued)

Hospital Name (NHSN ID)
ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)
ST. JOHN VIANNEY HOSPITAL (12548)*
ST. JOSEPH MEDICAL CTR (11961)*
ST. JOSEPHS HOSPITAL (12438)
ST. LUKES HOSPITAL BETHLEHEM (11718)
ST. LUKES HOSPITAL- ANDERSON CAMPUS (21487)
ST. LUKES MINERS MEMORIAL HOSPITAL (11784)*
ST. LUKES QUAKERTOWN HOSPITAL (11711)
ST. MARY MEDICAL CENTER (11885)*
ST. MARY REHABILITATION HOSPITAL LLP (36959)
SURGICAL INSTITUTE OF READING (12535)
SURGICAL SPECIALTY CENTER AT COORDINATED HEALTH, THE (15259)
TEMPLE UNIVERSITY HOSPITAL (12382)*
THOMAS JEFFERSON UNIVERSITY HOSPITAL - METHODIST (12017)*
THOMAS JEFFERSON UNIVERSITY HOSPITAL (11506)*
TITUSVILLE AREA HOSPITAL (11738)*
TROY COMMUNITY HOSPITAL (12018)*
TYRONE HOSPITAL (12717)*
UPMC ALTOONA (10178)
UPMC BEDFORD (11680)*
UPMC EAST (28812)
UPMC HAMOT (11725)
UPMC HORIZON (11675)
UPMC MCKEESPORT (11707)
UPMC MERCY (10384)
UPMC NORTHWEST (11837)*
UPMC PASSAVANT (11242)
UPMC PRESBYTERIAN SHADYSIDE - SHADYSIDE (10118)*
UPMC PRESBYTERIAN SHADYSIDE (10348)
UPMC ST. MARGARET (11561)
WARREN GENERAL HOSPITAL (12216)*
WAYNE MEMORIAL HOSPITAL (12004)
WELLSPAN SURGERY AND REHABILITATION HOSPITAL (27430)
WESTERN PSYCHIATRIC INSTITUTE AND CLINIC (13702)
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)
WILLS EYE HOSPITAL (34846)
WINDBER HOSPITAL (12031)
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, 2015–2016

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
ABINGTON MEMORIAL HOSPITAL (11838)				
Employee	99	0	0	0
LIP	98	0	2	0
STV	100	0	0	0
Contractor	.	.	.	.
ADVANCED SURGICAL HOSPITAL (16317)				
Employee	63	13	1	23
LIP	31	7	0	61
STV	.	.	.	.
Contractor	100	0	0	0
ALBERT EINSTEIN MEDICAL CENTER (10585)				
Employee	98	0	1	1
LIP	35	0	0	65
STV	100	0	0	0
Contractor	.	.	.	.
ALLEGHENY GENERAL HOSPITAL (10648)				
Employee	74	1	0	25
LIP	33	2	1	64
STV	54	0	0	46
Contractor	65	5	0	30
ALLEGHENY VALLEY HOSPITAL (11842)				
Employee	74	26	0	0
LIP	24	13	0	63
STV	53	1	0	46
Contractor	80	15	0	4
ALLIED SERVICES INSTITUTE OF REHABILITATION (12591)				
Employee	85	11	2	2
LIP	100	0	0	0
STV	81	7	4	7
Contractor	.	.	.	.
ARIA HEALTH (11388)				
Employee	98	0	1	0
LIP	98	0	2	0
STV	100	0	0	0
Contractor	98	0	2	0
ARMSTRONG COUNTY MEMORIAL HOSPITAL (12057)				
Employee	94	6	0	0
LIP	89	2	0	10
STV	99	0	0	1
Contractor	100	0	0	0
BARIX CLINICS OF PENNSYLVANIA (12037)				
Employee	60	0	0	40
LIP	8	0	0	92
STV	.	.	.	.
Contractor	.	.	.	.
BARNES-KASSON COUNTY HOSPITAL (12404)				
Employee	97	0	3	0
LIP	.	.	.	.
STV	.	.	.	.
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 %
BELMONT BEHAVIORAL HOSPITAL, LLC (44290)				
Employee	99	1	0	0
LIP	100	0	0	0
STV	94	0	6	0
Contractor	.	.	.	.
BERWICK HOSPITAL CENTER (11442)				
Employee	61	38	1	0
LIP	50	15	0	35
STV	100	0	0	0
Contractor	73	27	0	0
BRADFORD REGIONAL MEDICAL CENTER (12361)				
Employee	96	1	1	2
LIP	87	3	0	11
STV	94	2	0	4
Contractor	97	3	0	0
BRANDYWINE HOSPITAL (11979)				
Employee	87	5	0	9
LIP	94	6	0	0
STV	87	13	0	0
Contractor	62	0	0	38
BROOKE GLEN BEHAVIORAL HOSPITAL (12623)				
Employee	49	8	0	42
LIP	45	0	9	45
STV	17	17	0	67
Contractor	40	5	0	55
BUCKTAIL MEDICAL CENTER (12461)				
Employee	97	1	2	0
LIP	100	0	0	0
STV	94	6	0	0
Contractor	96	4	0	0
BUTLER MEMORIAL HOSPITAL (11736)				
Employee	84	16	0	0
LIP	76	5	1	17
STV	100	0	0	0
Contractor	.	.	.	.
CANONSBURG HOSPITAL (11586)				
Employee	77	2	0	21
LIP	35	6	1	59
STV	13	0	0	87
Contractor	49	26	0	26
CARLISLE REGIONAL MEDICAL CENTER (11997)				
Employee	72	19	0	9
LIP	73	13	0	14
STV	65	2	0	33
Contractor	67	10	0	22
CHAMBERSBURG HOSPITAL (11913)				
Employee	85	15	0	0
LIP	92	8	0	0
STV	94	6	0	0
Contractor	.	.	.	.
CHARLES COLE MEMORIAL HOSPITAL (11956)				
Employee	95	3	1	0
LIP	100	0	0	0
STV	100	0	0	0
Contractor	100	0	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 %
CHESTER COUNTY HOSPITAL (12016)				
Employee	99	0	1	0
LIP	88	0	2	10
STV	100	0	0	0
Contractor	100	0	0	0
CHESTNUT HILL HOSPITAL (12304)				
Employee	93	5	1	2
LIP	63	0	1	36
STV	100	0	0	0
Contractor	83	5	0	12
CHILDRENS HOME OF PITTSBURGH, THE (12336)				
Employee	61	13	0	26
LIP	50	0	0	50
STV	99	1	0	0
Contractor	100	0	0	0
CHILDRENS HOSPITAL OF PHILADELPHIA (10306)				
Employee	100	0	0	0
LIP	100	0	0	0
STV	100	0	0	0
Contractor	99	0	1	0
CHILDRENS HOSPITAL OF PITTSBURGH OF UPMC (11640)				
Employee	99	0	1	0
LIP	45	0	0	54
STV	51	49	0	0
Contractor	98	1	1	0
CHILDRENS INSTITUTE OF PITTSBURGH, THE (12266)				
Employee	66	25	0	9
LIP	100	0	0	0
STV	54	9	0	37
Contractor	60	40	0	0
CLARION HOSPITAL (11654)				
Employee	92	7	0	1
LIP	89	6	1	4
STV	98	2	0	0
Contractor	100	0	0	0
CLARION PSYCHIATRIC CENTER (12454)				
Employee	69	19	3	9
LIP	12	12	0	75
STV	100	0	0	0
Contractor	.	.	.	.
CLARKS SUMMIT STATE HOSPITAL (12051)				
Employee	51	46	4	0
LIP	64	27	9	0
STV	90	0	0	10
Contractor	.	.	.	.
CONEMAUGH MEMORIAL MEDICAL CENTER (10280)				
Employee	96	3	2	0
LIP	93	0	1	5
STV	98	0	1	0
Contractor	96	1	3	0
CONEMAUGH MEYERSDALE MEDICAL CENTER (11968)				
Employee	95	0	1	4
LIP	89	0	11	0
STV	100	0	0	0
Contractor	96	0	4	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 %
CONEMAUGH MINERS MEDICAL CENTER (12295)				
Employee	96	0	4	1
LIP	98	1	1	0
STV	100	0	0	0
Contractor	97	0	3	0
COORDINATED HEALTH ORTHOPEDIC HOSPITAL LLC (11872)				
Employee	96	0	1	3
LIP	100	0	0	0
STV	.	.	.	.
Contractor	.	.	.	.
CORY MEMORIAL HOSPITAL (12283)				
Employee	75	23	0	1
LIP	56	44	0	0
STV	67	31	1	0
Contractor	.	.	.	.
CRICHTON REHABILITATION CENTER (12273)				
Employee	100	0	0	0
LIP	98	0	2	0
STV	100	0	0	0
Contractor	100	0	0	0
CROZER CHESTER MEDICAL CENTER - SPRINGFIELD (11851)				
Employee	97	0	3	0
LIP	98	0	2	0
STV	91	0	9	0
Contractor	.	.	.	.
CROZER CHESTER MEDICAL CENTER - TAYLOR (11932)				
Employee	97	0	3	0
LIP	98	0	2	0
STV	95	0	5	0
Contractor	.	.	.	.
CROZER CHESTER MEDICAL CENTER (11839)				
Employee	97	0	3	0
LIP	98	0	2	0
STV	100	0	0	0
Contractor	.	.	.	.
DANVILLE STATE HOSPITAL (11848)				
Employee	62	37	0	1
LIP	60	10	0	30
STV	71	13	1	15
Contractor	.	.	.	.
DELAWARE COUNTY MEMORIAL HOSPITAL (11972)				
Employee	96	0	4	0
LIP	98	0	2	0
STV	100	0	0	0
Contractor	.	.	.	.
DEVEREUX CHILDRENS BEHAVIORAL HEALTH INSTITUTE (12738)				
Employee	56	19	2	23
LIP	100	0	0	0
STV	100	0	0	0
Contractor	.	.	.	.
DIVINE PROVIDENCE HOSPITAL (11743)				
Employee	98	1	1	1
LIP	97	0	3	0
STV	89	0	0	11
Contractor	80	1	0	19

Continued on next page ...

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

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
DOYLESTOWN HOSPITAL (10190)				
Employee	99	0	1	0
LIP	99	0	1	0
STV	100	0	0	0
Contractor	.	.	.	.
EAGLEVILLE HOSPITAL (12965)				
Employee	94	4	2	0
LIP	100	0	0	0
STV	100	0	0	0
Contractor	100	0	0	0
EASTERN REGIONAL MEDICAL CENTER (12348)				
Employee	91	8	1	0
LIP	100	0	0	0
STV	73	27	0	0
Contractor	.	.	.	.
EASTON HOSPITAL (11929)				
Employee	72	0	1	28
LIP	14	0	0	86
STV	64	0	0	36
Contractor	38	0	0	62
EDGEWOOD SURGICAL HOSPITAL (12552)				
Employee	66	34	0	0
LIP	60	0	0	40
STV	.	.	.	.
Contractor	0	0	0	100
EINSTEIN AT ELKINS PARK (12500)				
Employee	98	0	1	1
LIP	.	.	.	.
STV	100	0	0	0
Contractor	.	.	.	.
EINSTEIN MEDICAL CENTER MONTGOMERY (30210)				
Employee	98	0	1	1
LIP	46	0	0	54
STV	100	0	0	0
Contractor	.	.	.	.
ELLWOOD CITY HOSPITAL (11779)				
Employee	72	26	2	0
LIP	42	2	1	55
STV	65	2	0	33
Contractor	.	.	.	.
ENDLESS MOUNTAINS HEALTH SYSTEMS (11817)				
Employee	66	0	1	33
LIP	19	0	0	81
STV	33	0	0	67
Contractor	.	.	.	.
EPHRATA COMMUNITY HOSPITAL (11764)				
Employee	96	0	1	3
LIP	100	0	0	0
STV	100	0	0	0
Contractor	100	0	0	0
EVANGELICAL COMMUNITY HOSPITAL (11701)				
Employee	95	0	0	4
LIP	87	10	0	3
STV	87	7	0	6
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 %
EXCELA HEALTH FRICK HOSPITAL (11639)				
Employee	93	2	0	5
LIP	81	0	0	19
STV	93	4	0	3
Contractor	100	0	0	0
EXCELA HEALTH LATROBE HOSPITAL (11651)				
Employee	92	1	0	6
LIP	78	5	0	16
STV	96	2	0	2
Contractor	100	0	0	0
EXCELA HEALTH WESTMORELAND REGIONAL HOSPITAL (11637)				
Employee	95	2	0	3
LIP	79	2	0	18
STV	97	2	0	1
Contractor	94	6	0	0
FAIRMOUNT BEHAVIORAL HEALTH SYSTEM (12565)				
Employee	44	29	2	25
LIP	.	.	.	.
STV	95	5	0	0
Contractor	100	0	0	0
FIRST HOSPITAL OF WYOMING VALLEY (12050)				
Employee	42	17	0	40
LIP	0	0	0	100
STV	0	0	0	100
Contractor	.	.	.	.
FORBES HOSPITAL (11265)				
Employee	77	23	0	0
LIP	27	1	1	71
STV	87	8	1	4
Contractor	84	16	0	0
FOUNDATIONS BEHAVIORAL HEALTH (12832)				
Employee	65	31	1	4
LIP	83	17	0	0
STV	100	0	0	0
Contractor	.	.	.	.
FRIENDS HOSPITAL (12488)				
Employee	49	11	1	40
LIP	100	0	0	0
STV	100	0	0	0
Contractor	100	0	0	0
FULTON COUNTY MEDICAL CENTER (11939)				
Employee	57	32	4	7
LIP	25	5	0	70
STV	100	0	0	0
Contractor	3	0	0	97
GEISINGER HEALTHSOUTH REHABILITATION HOSPITAL (11993)				
Employee	88	11	2	0
LIP	100	0	0	0
STV	96	3	0	1
Contractor	92	8	1	0
GEISINGER MEDICAL CENTER (11775)				
Employee	93	7	0	0
LIP	76	22	2	0
STV	96	4	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 %
GEISINGER SHAMOKIN AREA COMMUNITY HOSPITAL (43346)				
Employee	95	5	0	0
LIP	76	22	2	0
STV	95	5	0	0
Contractor	.	.	.	.
GEISINGER SOUTH WILKES BARRE (43981)				
Employee	94	6	0	0
LIP	61	39	0	0
STV	98	2	0	0
Contractor	.	.	.	.
GEISINGER WYOMING VALLEY MEDICAL CENTER (11780)				
Employee	93	7	0	0
LIP	64	21	0	16
STV	96	4	0	0
Contractor	.	.	.	.
GEISINGER-BLOOMSBURG HOSPITAL (12008)				
Employee	94	6	0	0
LIP	64	36	0	0
STV	99	0	1	0
Contractor	.	.	.	.
GEISINGER-COMMUNITY MEDICAL CENTER (11914)				
Employee	94	6	0	0
LIP	76	18	2	4
STV	96	4	0	0
Contractor	.	.	.	.
GEISINGER-LEWISTOWN HOSPITAL (11825)				
Employee	97	2	1	0
LIP	82	13	3	2
STV	97	3	0	0
Contractor	.	.	.	.
GETTYSBURG HOSPITAL (11531)				
Employee	95	0	1	4
LIP	100	0	0	0
STV	100	0	0	0
Contractor	100	0	0	0
GNADEN HUETTEN MEMORIAL HOSPITAL (12241)				
Employee	90	2	0	7
LIP	33	0	0	67
STV	76	1	0	23
Contractor	.	.	.	.
GOOD SAMARITAN HOSPITAL, THE (11712)				
Employee	99	0	1	0
LIP	97	0	2	0
STV	100	0	0	0
Contractor	100	0	0	0
GOOD SHEPHERD PENN PARTNERS AT RITTENHOUSE (13929)				
Employee	98	1	1	1
LIP	100	0	0	0
STV	100	0	0	0
Contractor	99	0	1	0
GOOD SHEPHERD REHABILITATION HOSPITAL, THE (11896)				
Employee	96	0	1	2
LIP	85	0	1	14
STV	99	0	1	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 %
GOOD SHEPHERD SPECIALTY HOSPITAL (11887)				
Employee	97	1	2	0
LIP	96	0	0	4
STV	100	0	0	0
Contractor	.	.	.	.
GRAND VIEW HOSPITAL (11847)				
Employee	99	1	1	0
LIP	98	1	1	0
STV	100	0	0	0
Contractor	100	0	0	0
GROVE CITY MEDICAL CENTER (11722)				
Employee	87	12	0	0
LIP	94	5	1	0
STV	93	7	0	0
Contractor	.	.	.	.
GUTHRIE TOWANDA MEMORIAL HOSPITAL (12549)				
Employee	97	1	1	0
LIP	100	0	0	0
STV	100	0	0	0
Contractor	100	0	0	0
HAHNEMANN UNIVERSITY HOSPITAL (11437)				
Employee	97	3	0	0
LIP	77	22	1	0
STV	100	0	0	0
Contractor	99	1	0	0
HANOVER HOSPITAL (11899)				
Employee	99	0	1	0
LIP	96	0	3	1
STV	95	0	1	4
Contractor	100	0	0	0
HAVEN BEHAVIORAL HOSPITAL OF EASTERN PENNSYLVANIA (14471)				
Employee	96	3	1	0
LIP	100	0	0	0
STV	100	0	0	0
Contractor	100	0	0	0
HAVEN BEHAVIORAL HOSPITAL OF PHILADELPHIA (37622)				
Employee	65	8	0	27
LIP	100	0	0	0
STV	.	.	.	.
Contractor	0	0	0	100
HEALTHSOUTH HARMARVILLE REHABILITATION HOSPITAL (11727)				
Employee	94	5	0	1
LIP	42	5	0	53
STV	97	3	0	0
Contractor	91	9	0	0
HEALTHSOUTH NITTANY VALLEY REHABILITATION HOSPITAL (11667)				
Employee	93	6	0	1
LIP	80	10	0	10
STV	100	0	0	0
Contractor	73	16	0	11
HEALTHSOUTH READING REHABILITATION HOSPITAL (12139)				
Employee	81	13	1	5
LIP	89	4	4	2
STV	98	2	0	0
Contractor	60	17	3	20

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 ALTOONA (11903)				
Employee	56	40	2	2
LIP	88	3	2	7
STV	100	0	0	0
Contractor	94	0	0	6
HEALTHSOUTH REHABILITATION HOSPITAL OF ERIE (11810)				
Employee	76	16	2	6
LIP	79	3	0	18
STV	94	0	0	6
Contractor	29	0	0	71
HEALTHSOUTH REHABILITATION HOSPITAL OF MECHANICSBURG (12402)				
Employee	79	19	2	0
LIP	93	6	1	0
STV	66	34	0	0
Contractor	.	.	.	.
HEALTHSOUTH REHABILITATION HOSPITAL OF SEWICKLEY (12066)				
Employee	63	29	1	7
LIP	97	3	0	0
STV	100	0	0	0
Contractor	100	0	0	0
HEALTHSOUTH REHABILITATION HOSPITAL OF YORK (12058)				
Employee	96	1	2	1
LIP	96	4	0	0
STV	100	0	0	0
Contractor	.	.	.	.
HEART OF LANCASTER REGIONAL MEDICAL CENTER (12571)				
Employee	79	9	0	12
LIP	95	0	0	5
STV	32	0	0	68
Contractor	.	.	.	.
HELEN M. SIMPSON REHABILITATION HOSPITAL (40371)				
Employee	93	2	2	3
LIP	52	0	0	48
STV	100	0	0	0
Contractor	100	0	0	0
HERITAGE VALLEY BEAVER (11831)				
Employee	59	29	1	11
LIP	44	0	0	55
STV	79	8	1	13
Contractor	.	.	.	.
HERITAGE VALLEY SEWICKLEY (10375)				
Employee	70	28	1	0
LIP	37	6	1	56
STV	91	8	1	0
Contractor	.	.	.	.
HIGHLANDS HOSPITAL (11902)				
Employee	91	9	0	0
LIP	33	0	0	67
STV	92	1	0	7
Contractor	.	.	.	.
HOLY REDEEMER HOSPITAL (11973)				
Employee	99	0	1	0
LIP	100	0	0	0
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 %
HOLY SPIRIT HOSPITAL (12387)				
Employee	86	12	1	0
LIP	87	3	0	10
STV	82	7	0	11
Contractor	.	.	.	.
HORSHAM CLINIC (12543)				
Employee	65	17	9	10
LIP	.	.	.	.
STV	76	24	0	0
Contractor	94	6	0	0
HOSPITAL OF FOX CHASE CANCER CENTER (12134)				
Employee	88	1	1	10
LIP	.	.	.	.
STV	86	1	0	12
Contractor	.	.	.	.
HOSPITAL OF THE UNIVERSITY OF PENNSYLVANIA (10219)				
Employee	99	0	1	0
LIP	90	0	0	10
STV	97	0	0	2
Contractor	100	0	0	0
INDIANA REGIONAL MEDICAL CENTER (11759)				
Employee	88	7	0	4
LIP	97	3	0	0
STV	96	1	0	4
Contractor	95	5	0	0
J C BLAIR MEMORIAL HOSPITAL (11724)				
Employee	92	3	0	4
LIP	92	2	0	5
STV	94	0	0	6
Contractor	.	.	.	.
JAMESON MEMORIAL HOSPITAL (11954)				
Employee	67	30	1	2
LIP	21	3	0	75
STV	67	0	0	33
Contractor	.	.	.	.
JEANES HOSPITAL (11459)				
Employee	95	0	0	4
LIP	85	0	0	15
STV	100	0	0	0
Contractor	100	0	0	0
JEFFERSON HOSPITAL (10237)				
Employee	66	34	0	0
LIP	20	1	0	79
STV	32	6	0	62
Contractor	51	10	2	36
JENNERSVILLE REGIONAL HOSPITAL (12337)				
Employee	85	11	2	2
LIP	80	0	0	20
STV	91	3	3	3
Contractor	.	.	.	.
JERSEY SHORE HOSPITAL (11689)				
Employee	95	3	1	1
LIP	82	18	0	0
STV	100	0	0	0
Contractor	100	0	0	0

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

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
JOHN HEINZ INSTITUTE OF REHABILITATION (11861)				
Employee	88	11	0	1
LIP	73	9	0	18
STV	100	0	0	0
Contractor	83	0	0	17
KANE COMMUNITY HOSPITAL (12111)				
Employee	82	11	6	2
LIP	100	0	0	0
STV	100	0	0	0
Contractor	100	0	0	0
KENSINGTON HOSPITAL (12609)				
Employee	77	23	0	0
LIP	88	12	0	0
STV	100	0	0	0
Contractor	.	.	.	.
KIDSPEACE ORCHARD HILLS CAMPUS (12430)				
Employee	25	75	0	0
LIP	100	0	0	0
STV	.	.	.	.
Contractor	.	.	.	.
KINDRED HOSPITAL - PHILADELPHIA (11832)				
Employee	70	8	0	21
LIP	4	0	0	96
STV	.	.	.	.
Contractor	.	.	.	.
KINDRED HOSPITAL - PITTSBURGH (12358)				
Employee	64	34	2	0
LIP	70	5	3	23
STV	100	0	0	0
Contractor	53	42	0	5
KINDRED HOSPITAL AT HERITAGE VALLEY (12268)				
Employee	65	30	0	5
LIP	50	4	0	46
STV	.	.	.	.
Contractor	83	11	0	6
KINDRED HOSPITAL PHILADELPHIA-HAVERTOWN (12908)				
Employee	83	10	0	6
LIP	100	0	0	0
STV	100	0	0	0
Contractor	82	18	0	0
KINDRED HOSPITAL SOUTH PHILADELPHIA (11940)				
Employee	98	2	0	0
LIP	35	7	3	55
STV	.	.	.	.
Contractor	100	0	0	0
KIRKBRIDE CENTER (12624)				
Employee	32	59	0	9
LIP	80	20	0	0
STV	100	0	0	0
Contractor	100	0	0	0
LANCASTER GENERAL HOSPITAL (10183)				
Employee	99	0	1	0
LIP	97	1	2	0
STV	100	0	0	0
Contractor	98	0	2	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 REGIONAL MEDICAL CENTER (12335)				
Employee	65	8	0	27
LIP	100	0	0	0
STV	100	0	0	0
Contractor	.	.	.	.
LANCASTER REHABILITATION HOSPITAL (12628)				
Employee	99	0	1	0
LIP	100	0	0	0
STV	100	0	0	0
Contractor	100	0	0	0
LANSDALE HOSPITAL (12032)				
Employee	99	0	0	0
LIP	98	0	2	0
STV	100	0	0	0
Contractor	.	.	.	.
LEHIGH VALLEY HOSPITAL - HAZLETON (11878)				
Employee	74	21	3	1
LIP	100	0	0	0
STV	100	0	0	0
Contractor	100	0	0	0
LEHIGH VALLEY HOSPITAL - MUHLENBERG (11898)				
Employee	99	1	0	0
LIP	98	2	0	0
STV	90	10	0	0
Contractor	.	.	.	.
LEHIGH VALLEY HOSPITAL (11884)				
Employee	99	1	0	0
LIP	98	2	0	0
STV	94	6	0	0
Contractor	.	.	.	.
LIFECARE HOSPITALS OF CHESTER COUNTY LLC (12005)				
Employee	97	1	1	1
LIP	68	0	3	28
STV	.	.	.	.
Contractor	.	.	.	.
LIFECARE HOSPITALS OF MECHANICSBURG (12388)				
Employee	88	7	1	4
LIP	73	5	6	15
STV	100	0	0	0
Contractor	.	.	.	.
LIFECARE HOSPITALS OF PITTSBURGH - ALLE-KISKI CAMPUS (18955)				
Employee	77	11	1	11
LIP	27	2	0	71
STV	93	6	0	1
Contractor	.	.	.	.
LIFECARE HOSPITALS OF PITTSBURGH - MONROEVILLE (12254)				
Employee	81	8	2	8
LIP	29	0	0	70
STV	90	6	3	0
Contractor	.	.	.	.
LIFECARE HOSPITALS OF PITTSBURGH - SUBURBAN CAMPUS (12385)				
Employee	77	11	1	11
LIP	27	2	0	71
STV	93	6	0	1
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 %
LIFECARE HOSPITALS OF PITTSBURGH (11945)				
Employee	78	11	1	11
LIP	27	2	0	71
STV	93	6	0	1
Contractor	.	.	.	.
LOCK HAVEN HOSPITAL (12097)				
Employee	88	1	0	11
LIP	69	0	0	31
STV	24	0	0	76
Contractor	89	0	0	11
LOWER BUCKS HOSPITAL (12390)				
Employee	99	0	1	0
LIP	99	0	1	0
STV	100	0	0	0
Contractor	100	0	0	0
MAGEE REHABILITATION HOSPITAL (12146)				
Employee	99	0	1	0
LIP	100	0	0	0
STV	100	0	0	0
Contractor	100	0	0	0
MAGEE WOMENS HOSPITAL OF UPMC HEALTH SYSTEM (10301)				
Employee	99	1	0	0
LIP	100	0	0	0
STV	100	0	0	0
Contractor	.	.	.	.
MAIN LINE HOSPITAL - PAOLI (11750)				
Employee	97	0	3	0
LIP	97	1	2	0
STV	100	0	0	0
Contractor	.	.	.	.
MAIN LINE HOSPITAL BRYN MAWR (11753)				
Employee	98	0	2	0
LIP	95	1	4	0
STV	100	0	0	0
Contractor	.	.	.	.
MAIN LINE HOSPITAL BRYN MAWR REHABILITATION (11417)				
Employee	97	0	3	0
LIP	100	0	0	0
STV	100	0	0	0
Contractor	.	.	.	.
MAIN LINE HOSPITAL LANKENAU MEDICAL CENTER (11770)				
Employee	98	1	1	0
LIP	95	1	4	0
STV	100	0	0	0
Contractor	.	.	.	.
MEADOWS PSYCHIATRIC CENTER, THE (12156)				
Employee	55	34	4	7
LIP	.	.	.	.
STV	92	0	0	8
Contractor	39	0	0	61
MEADVILLE MEDICAL CENTER (11583)				
Employee	95	3	1	1
LIP	94	4	2	1
STV	94	5	0	1
Contractor	91	7	0	2

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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	86	3	0	10
LIP	39	0	0	61
STV	79	0	0	21
Contractor	55	1	0	44
MERCY FITZGERALD HOSPITAL (11683)				
Employee	94	0	1	6
LIP	67	1	0	32
STV	100	0	0	0
Contractor	.	.	.	.
MERCY PHILADELPHIA HOSPITAL (11946)				
Employee	99	0	1	0
LIP	99	0	1	0
STV	100	0	0	0
Contractor	100	0	0	0
MERCY SUBURBAN HOSPITAL (11952)				
Employee	98	0	1	1
LIP	0	0	0	100
STV	100	0	0	0
Contractor	100	0	0	0
MILLCREEK COMMUNITY HOSPITAL (12253)				
Employee	66	32	0	2
LIP	84	9	0	7
STV	93	4	0	3
Contractor	74	26	0	0
MILTON S HERSHEY MEDICAL CENTER (11747)				
Employee	86	2	0	11
LIP	80	0	0	20
STV	95	0	0	5
Contractor	97	0	0	3
MONONGAHELA VALLEY HOSPITAL (11069)				
Employee	69	29	1	0
LIP	45	11	2	42
STV	86	10	0	4
Contractor	59	38	0	3
MONTGOMERY COUNTY MH/MR EMERGENCY SERVICES, INC. (12287)				
Employee	35	4	1	60
LIP	.	.	.	.
STV	100	0	0	0
Contractor	.	.	.	.
MOSES TAYLOR HOSPITAL (11528)				
Employee	64	32	1	2
LIP	7	0	0	93
STV	22	0	0	78
Contractor	42	10	0	48
MOSS REHABILITATION (12508)				
Employee	98	0	1	1
LIP	.	.	.	.
STV	98	0	2	0
Contractor	.	.	.	.
MOUNT NITTANY MEDICAL CENTER (11797)				
Employee	91	9	0	0
LIP	96	3	0	0
STV	86	0	0	14
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 %
MUNCY VALLEY HOSPITAL (11748)				
Employee	96	2	1	0
LIP	100	0	0	0
STV	94	2	0	5
Contractor	96	0	0	4
NASON HOSPITAL (11907)				
Employee	95	2	1	1
LIP	72	1	0	28
STV	67	0	0	33
Contractor	.	.	.	.
NAZARETH HOSPITAL (11919)				
Employee	99	0	1	0
LIP	82	0	0	18
STV	100	0	0	0
Contractor	.	.	.	.
NORRISTOWN STATE HOSPITAL (12047)				
Employee	53	8	1	38
LIP	.	.	.	.
STV	29	0	0	71
Contractor	100	0	0	0
OHIO VALLEY GENERAL HOSPITAL (12298)				
Employee	97	2	1	0
LIP	62	25	7	6
STV	88	3	5	3
Contractor	69	12	12	7
OSS ORTHOPAEDIC HOSPITAL (18467)				
Employee	89	6	1	4
LIP	96	2	0	2
STV	100	0	0	0
Contractor	.	.	.	.
PALMERTON HOSPITAL (12396)				
Employee	92	2	1	5
LIP	33	0	0	67
STV	83	1	0	16
Contractor	.	.	.	.
PENN HIGHLANDS BROOKVILLE (12418)				
Employee	94	6	0	0
LIP	100	0	0	0
STV	67	0	0	33
Contractor	.	.	.	.
PENN HIGHLANDS CLEARFIELD (11843)				
Employee	94	5	0	0
LIP	90	0	0	10
STV	92	4	4	1
Contractor	100	0	0	0
PENN HIGHLANDS DUBOIS (11606)				
Employee	97	3	0	0
LIP	42	0	0	58
STV	91	3	0	6
Contractor	.	.	.	.
PENN HIGHLANDS ELK (11859)				
Employee	95	5	0	0
LIP	100	0	0	0
STV	100	0	0	0
Contractor	100	0	0	0

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

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
PENN PRESBYTERIAN MEDICAL CENTER (11814)				
Employee	99	0	1	0
LIP	87	0	0	12
STV	72	28	0	1
Contractor	97	1	0	1
PENN STATE HERSHEY REHABILITATION LLC (11915)				
Employee	73	10	2	16
LIP	89	0	0	11
STV	100	0	0	0
Contractor	100	0	0	0
PENNSYLVANIA HOSPITAL OF THE UNIVERSITY OF PA HEALTH SYS (11448)				
Employee	98	1	1	0
LIP	38	0	0	62
STV	100	0	0	0
Contractor	.	.	.	.
PENNSYLVANIA PSYCHIATRIC INSTITUTE (14190)				
Employee	77	5	2	16
LIP	27	0	0	73
STV	100	0	0	0
Contractor	100	0	0	0
PHILHAVEN HOSPITAL (11740)				
Employee	57	32	2	8
LIP	20	0	0	80
STV	74	5	0	20
Contractor	55	10	0	35
PHOENIXVILLE HOSPITAL COMPANY LLC (11836)				
Employee	77	15	2	6
LIP	77	2	0	21
STV	93	5	0	2
Contractor	80	5	0	15
PHYSICIANS CARE SURGICAL HOSPITAL (19630)				
Employee	100	0	0	0
LIP	96	0	0	4
STV	100	0	0	0
Contractor	100	0	0	0
PINNACLE HEALTH HOSPITALS - COMMUNITY GENERAL OSTEOPATHIC HOSPITAL (34069)				
Employee	97	0	0	3
LIP	79	1	0	20
STV	97	1	1	1
Contractor	.	.	.	.
PINNACLE HEALTH HOSPITALS - HARRISBURG HOSPITAL (34068)				
Employee	97	0	1	2
LIP	79	1	0	20
STV	97	1	0	2
Contractor	.	.	.	.
PINNACLE HEALTH HOSPITALS - WEST SHORE HOSPITAL (35123)				
Employee	97	0	0	3
LIP	79	1	0	20
STV	96	2	1	0
Contractor	.	.	.	.
POCONO MEDICAL CENTER (11772)				
Employee	83	1	0	15
LIP	70	0	0	30
STV	49	0	0	50
Contractor	69	0	0	31

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

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
POST ACUTE MEDICAL SPECIALTY HOSPITAL OF WILKES-BARRE (12604)				
Employee	90	6	1	3
LIP	15	3	1	82
STV	100	0	0	0
Contractor	100	0	0	0
POTTSTOWN MEMORIAL MEDICAL CENTER (11983)				
Employee	86	7	1	6
LIP	69	1	0	29
STV	84	5	1	10
Contractor	87	11	0	1
PUNXSUTAWNEY AREA HOSPITAL (11830)				
Employee	92	6	1	0
LIP	92	8	0	0
STV	94	6	0	0
Contractor	86	9	5	0
READING HOSPITAL (12375)				
Employee	99	0	1	1
LIP	99	0	1	0
STV	90	0	0	9
Contractor	93	0	0	7
REGIONAL HOSPITAL OF SCRANTON (12533)				
Employee	65	22	7	6
LIP	8	0	0	92
STV	49	0	0	51
Contractor	43	0	0	57
RIDDLE MEMORIAL HOSPITAL (11731)				
Employee	97	0	3	0
LIP	98	0	2	0
STV	100	0	0	0
Contractor	.	.	.	.
ROBERT PACKER HOSPITAL (12422)				
Employee	99	1	0	0
LIP	99	0	0	0
STV	97	1	1	2
Contractor	100	0	0	0
ROTHMAN ORTHOPAEDIC SPECIALTY HOSPITAL (15202)				
Employee	99	1	0	0
LIP	98	0	0	2
STV	.	.	.	.
Contractor	100	0	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	93	6	0	1
LIP	100	0	0	0
STV	98	2	0	0
Contractor	.	.	.	.
SACRED HEART HOSPITAL (11684)				
Employee	99	0	1	0
LIP	99	0	1	0
STV	100	0	0	0
Contractor	100	0	0	0

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

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
SAINT VINCENT HOSPITAL (11699)				
Employee	100	0	0	0
LIP	100	0	0	0
STV	100	0	0	0
Contractor	100	0	0	0
SCHUYLKILL MEDICAL CENTER - EAST NORWEGIAN STREET (11922)				
Employee	99	1	0	0
LIP	85	0	0	15
STV	77	0	0	23
Contractor	29	0	0	71
SCHUYLKILL MEDICAL CENTER - SOUTH JACKSON STREET (12087)				
Employee	99	0	1	0
LIP	80	0	0	20
STV	74	0	0	26
Contractor	29	0	0	71
SELECT SPECIALTY HOSPITAL - ERIE (11880)				
Employee	86	5	1	9
LIP	70	0	0	30
STV	.	.	.	.
Contractor	.	.	.	.
SELECT SPECIALTY HOSPITAL - CENTRAL PA (13921)				
Employee	96	1	0	2
LIP	47	3	2	48
STV	.	.	.	.
Contractor	.	.	.	.
SELECT SPECIALTY HOSPITAL - CENTRAL PENNSYLVANIA (CAMP HILL) (12147)				
Employee	86	10	0	4
LIP	40	2	2	56
STV	.	.	.	.
Contractor	.	.	.	.
SELECT SPECIALTY HOSPITAL - CENTRAL PENNSYLVANIA (YORK) (12334)				
Employee	85	13	2	0
LIP	40	0	0	60
STV	74	0	0	26
Contractor	80	0	20	0
SELECT SPECIALTY HOSPITAL - DANVILLE (12123)				
Employee	98	2	0	0
LIP	98	0	2	0
STV	.	.	.	.
Contractor	.	.	.	.
SELECT SPECIALTY HOSPITAL - JOHNSTOWN (12299)				
Employee	96	4	0	0
LIP	98	2	0	0
STV	100	0	0	0
Contractor	.	.	.	.
SELECT SPECIALTY HOSPITAL - MCKEESPORT, INC. (12271)				
Employee	74	5	1	20
LIP	76	1	1	22
STV	.	.	.	.
Contractor	.	.	.	.
SELECT SPECIALTY HOSPITAL - PITTSBURGH/UPMC (12009)				
Employee	87	7	2	4
LIP	63	3	0	34
STV
Contractor

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

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
SELECT SPECIALTY HOSPITAL LAUREL HIGHLANDS INC (12108)				
Employee	71	2	2	25
LIP	37	1	1	62
STV	.	.	.	.
Contractor	.	.	.	.
SHARON REGIONAL HEALTH SYSTEM (12250)				
Employee	62	29	0	9
LIP	90	10	0	0
STV	94	6	0	0
Contractor	.	.	.	.
SHRINERS HOSPITALS FOR CHILDREN - PHILA (12244)				
Employee	73	27	1	0
LIP	100	0	0	0
STV	94	0	0	6
Contractor	100	0	0	0
SOLDIERS AND SAILORS MEMORIAL HOSPITAL (11688)				
Employee	96	4	0	0
LIP	100	0	0	0
STV	99	0	1	0
Contractor	88	12	0	0
SOMERSET HOSPITAL (12282)				
Employee	97	0	3	0
LIP	100	0	0	0
STV	100	0	0	0
Contractor	100	0	0	0
SOUTHWEST REGIONAL MEDICAL CENTER (11942)				
Employee	67	20	0	13
LIP	95	5	0	0
STV	77	5	0	19
Contractor	50	0	0	50
SOUTHWOOD PSYCHIATRIC HOSPITAL (12453)				
Employee	64	26	1	9
LIP	100	0	0	0
STV	.	.	.	.
Contractor	.	.	.	.
ST. CHRISTOPHERS HOSPITAL FOR CHILDREN (12290)				
Employee	99	0	0	0
LIP	88	0	0	12
STV	99	0	1	0
Contractor	99	0	0	0
ST. CLAIR MEMORIAL HOSPITAL (10561)				
Employee	85	13	2	0
LIP	99	0	1	0
STV	88	3	3	6
Contractor	100	0	0	0
ST. JOHN VIANNEY HOSPITAL (12548)				
Employee	97	0	3	0
LIP	100	0	0	0
STV	100	0	0	0
Contractor	100	0	0	0
ST. JOSEPH MEDICAL CTR (11961)				
Employee	96	0	1	2
LIP	99	1	0	0
STV	100	0	0	0
Contractor	99	0	1	0

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

	Vaccinated %	Declined %	Medical Contraindication %	Unknown %
ST. JOSEPHS HOSPITAL (12438)				
Employee	92	0	2	6
LIP	11	1	1	88
STV	100	0	0	0
Contractor	100	0	0	0
ST. LUKES HOSPITAL BETHLEHEM (11718)				
Employee	96	0	0	4
LIP	89	1	0	10
STV	82	0	0	18
Contractor	.	.	.	.
ST. LUKES HOSPITAL- ANDERSON CAMPUS (21487)				
Employee	100	0	0	0
LIP	90	1	0	8
STV	.	.	.	.
Contractor	.	.	.	.
ST. LUKES MINERS MEMORIAL HOSPITAL (11784)				
Employee	99	0	1	0
LIP	91	1	1	8
STV	100	0	0	0
Contractor	100	0	0	0
ST. LUKES QUAKERTOWN HOSPITAL (11711)				
Employee	98	0	2	0
LIP	89	0	1	10
STV	100	0	0	0
Contractor	96	0	4	0
ST. MARY MEDICAL CENTER (11885)				
Employee	99	0	1	0
LIP	93	0	2	5
STV	100	0	0	0
Contractor	.	.	.	.
ST. MARY REHABILITATION HOSPITAL LLP (36959)				
Employee	98	0	2	0
LIP	88	0	0	12
STV	100	0	0	0
Contractor	100	0	0	0
SUNBURY COMMUNITY HOSP (12105)				
Employee	78	13	4	5
LIP	50	0	0	50
STV	47	3	3	47
Contractor	58	10	2	31
SURGICAL INSTITUTE OF READING (12535)				
Employee	100	0	0	0
LIP	48	12	0	39
STV	.	.	.	.
Contractor	100	0	0	0
SURGICAL SPECIALTY CENTER AT COORDINATED HEALTH, THE (15259)				
Employee	96	0	0	4
LIP	100	0	0	0
STV	.	.	.	.
Contractor	.	.	.	.
TEMPLE UNIVERSITY HOSPITAL (12382)				
Employee	97	2	1	0
LIP	94	3	2	1
STV	93	1	1	5
Contractor	100	0	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 %
THOMAS JEFFERSON UNIVERSITY HOSPITAL - METHODIST (12017)				
Employee	99	0	1	0
LIP	100	0	0	0
STV	95	0	5	0
Contractor	100	0	0	0
THOMAS JEFFERSON UNIVERSITY HOSPITAL (11506)				
Employee	99	0	0	0
LIP	97	0	1	1
STV	95	0	0	4
Contractor	85	0	0	15
TITUSVILLE AREA HOSPITAL (11738)				
Employee	97	2	1	1
LIP	100	0	0	0
STV	99	1	0	0
Contractor	50	0	0	50
TORRANCE STATE HOSPITAL (12091)				
Employee	39	37	1	22
LIP	45	9	0	45
STV	93	7	0	0
Contractor	43	14	7	36
TROY COMMUNITY HOSPITAL (12018)				
Employee	98	1	1	0
LIP	100	0	0	0
STV	100	0	0	0
Contractor	100	0	0	0
TYLER MEMORIAL HOSPITAL (11829)				
Employee	73	21	4	2
LIP	54	0	0	46
STV	62	26	3	9
Contractor	78	22	0	0
TYRONE HOSPITAL (12717)				
Employee	93	6	1	0
LIP	94	2	4	0
STV	100	0	0	0
Contractor	100	0	0	0
UNIONTOWN HOSPITAL (10441)				
Employee	90	5	1	4
LIP	56	2	0	43
STV	90	1	0	9
Contractor	85	15	0	0
UPMC ALTOONA (10178)				
Employee	96	3	0	0
LIP	81	3	1	16
STV	98	1	1	0
Contractor	28	0	0	72
UPMC BEDFORD (11680)				
Employee	100	0	0	0
LIP	95	2	3	0
STV	100	0	0	0
Contractor	.	.	.	.
UPMC EAST (28812)				
Employee	100	0	0	0
LIP	55	0	0	45
STV	87	13	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 %
UPMC HAMOT (11725)				
Employee	100	0	0	0
LIP	47	0	0	53
STV	90	0	0	10
Contractor	.	.	.	.
UPMC HORIZON (11675)				
Employee	97	0	1	2
LIP	84	0	0	16
STV	99	1	0	0
Contractor	.	.	.	.
UPMC MCKEESPORT (11707)				
Employee	99	0	1	0
LIP	29	0	0	71
STV	47	0	0	53
Contractor	100	0	0	0
UPMC MERCY (10384)				
Employee	99	1	0	0
LIP	44	0	0	55
STV	100	0	0	0
Contractor	.	.	.	.
UPMC NORTHWEST (11837)				
Employee	99	0	1	0
LIP	99	0	1	0
STV	100	0	0	0
Contractor	.	.	.	.
UPMC PASSAVANT (11242)				
Employee	97	3	0	0
LIP	46	0	0	54
STV	47	0	0	53
Contractor	100	0	0	0
UPMC PRESBYTERIAN SHADYSIDE - SHADYSIDE (10118)				
Employee	99	0	0	0
LIP	99	0	1	0
STV	100	0	0	0
Contractor	100	0	0	0
UPMC PRESBYTERIAN SHADYSIDE (10348)				
Employee	95	4	0	0
LIP	62	0	0	38
STV	98	0	2	0
Contractor	.	.	.	.
UPMC ST. MARGARET (11561)				
Employee	100	0	0	0
LIP	51	0	0	48
STV	100	0	0	0
Contractor	.	.	.	.
VALLEY FORGE MEDICAL CENTER AND HOSPITAL (12029)				
Employee	61	36	0	3
LIP	.	.	.	.
STV	.	.	.	.
Contractor	.	.	.	.
WARREN GENERAL HOSPITAL (12216)				
Employee	91	7	2	0
LIP	95	5	0	0
STV	94	6	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 %
WARREN STATE HOSPITAL (12081)				
Employee	47	34	4	16
LIP	100	0	0	0
STV	100	0	0	0
Contractor	100	0	0	0
WASHINGTON HOSPITAL, THE (11460)				
Employee	80	11	0	8
LIP	48	1	0	51
STV	92	5	0	3
Contractor	45	0	0	55
WAYNE MEMORIAL HOSPITAL (12004)				
Employee	93	3	0	4
LIP	60	2	0	38
STV	77	1	0	23
Contractor	100	0	0	0
WAYNESBORO HOSPITAL (11642)				
Employee	86	14	0	0
LIP	92	8	0	0
STV	95	5	0	0
Contractor	.	.	.	.
WELLSPAN SURGERY AND REHABILITATION HOSPITAL (27430)				
Employee	99	0	0	0
LIP	100	0	0	0
STV	71	0	0	29
Contractor	96	0	0	4
WERNERSVILLE STATE HOSPITAL (12368)				
Employee	66	25	3	5
LIP	67	0	0	33
STV	92	8	0	0
Contractor	61	11	6	22
WEST PENN HOSPITAL (11864)				
Employee	72	1	0	26
LIP	34	6	1	60
STV	51	4	0	45
Contractor	58	7	0	35
WESTERN PSYCHIATRIC INSTITUTE AND CLINIC (13702)				
Employee	93	6	0	0
LIP	68	0	0	32
STV	100	0	0	0
Contractor	.	.	.	.
WILKES-BARRE GENERAL HOSPITAL (11916)				
Employee	48	29	0	23
LIP	7	0	0	93
STV	83	0	0	17
Contractor	0	0	0	100
WILLIAMSPORT REGIONAL MEDICAL CENTER (11732)				
Employee	100	0	0	0
LIP	100	0	0	0
STV	57	0	0	43
Contractor	98	0	0	2
WILLS EYE HOSPITAL (34846)				
Employee	95	0	5	0
LIP	98	0	2	0
STV
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 %
WINDBER HOSPITAL (12031)				
Employee	91	8	1	0
LIP	22	1	0	77
STV	77	0	0	23
Contractor	.	.	.	.
YORK HOSPITAL (10108)				
Employee	94	1	1	5
LIP	99	1	0	0
STV	100	0	0	0
Contractor	100	0	0	0

5 Conclusion

The 2015 report is the eighth 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 commitment made by hospitals in Pennsylvania to reduce HAIs.

Hospitals have demonstrated particular success in reducing the use of urinary catheters and central lines, decreasing the proportion of HAIs attributable to MRSA, preventing KPRO, HPRO, HYST and CARD SSIs and preventing and improving influenza vaccination rates among health care personnel (245 percent increase since 2011–2012 influenza season).

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 an estimated minimum of \$150 million in direct health care costs that would have been associated with those HAIs.

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 throughout this report, there is significant 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 2015 report dealing with health care personnel influenza vaccination provides an alternative metric in measuring hospital commitment to patient safety and HAI prevention. The median employee influenza vaccination rate was 94 percent and 152 facilities (60 percent) achieved employee vaccination rates of 90 percent or better, a 2020 Healthy People goal, during the 2015–2016 influenza season. This is a dramatic 245 percent improvement from baseline data. The number of facilities at goal for employees, licensed independent practitioners, and students, trainees and volunteers increased from 6 to 71 since the 2011–2012 influenza season. This is a 1083 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. Vaccination also decreases absenteeism (up to 30 percent in some studies) and preserves surge capacity during flu season. 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 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, outside organizations and the infection prevention community to collect data on the occurrence of HAIs and to recommend methods to reduce their occurrence. 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 usable 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.

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