Table 1 – Metrics and National 5-Year Prevention Targets

Metric Number and Label	Metric	Measurement System	National 5-Year Prevention Target
1. CLABSI 1	CLABSIs per 1000 device days by ICU and other locations	CDC NHSN; Administrative discharge data[1]	CLABSIs per 1,000 device days by ICU and other locations below present NHSN 25th percentile by location type (75% reduction in Stratified Infection Ratio)
2. CLABSI 4	Central line bundle compliance (non-emergent insertions)	NHSN CLIP module	100% compliance with central line bundle (non-emergent insertions)
3. C diff 1	Case rate per patient days; administrative/discharge data for ICD-9 CM coded *Clostridium difficile* Infections	Administrative discharge data; NHSN MDRO module	30% reduction in the case rate per patient days and administrative / discharge data for ICD-9-CM coded *Clostridium difficile* Infections NOTE: Preventability of endemic CDI is unknown; therefore, the meeting attendee experts suggested that HHS revisit this target in 2 years as prevention research findings may become available
4. CAUTI 2	# of symptomatic UTI / 1,000 urinary catheter days [Number of UTIs (ICD-9-CM +not present on admission) / (# major surgery ICD-9-CM + urinary catheter ICD-9CM)]*100 discharges	CDC NHSN Administrative discharge data[1]	25% reduction in the number of symptomatic UTI / 1,000 urinary catheter days 25% reduction in the [Number of UTIs (ICD-9-CM+not present on admission) / (# major surgery ICD-9-CM + urinary catheter ICD-9-CM)]*100 discharges[3]
5. MRSA 1	Incidence rate (number per 100,000 persons) of invasive MRSA infections	CDC EIP/ABCs	50% reduction in incidence rate of all healthcare-associated invasive MRSA infections
6. SSI 1	Deep incision and organ space infection rates using NHSN definitions (SCIP procedures)	CDC NHSN	Median deep incision and organ space infection rate for each procedure/risk group will be at or below the current NHSN 25th percentile
7. SSI 2	Adherence to SCIP/NQF infection process measures (perioperative antibiotics, hair removal, postoperative glucose control, normothermia)	CMS SCIPF infection process measure	95% adherence rates to each SCIP/NQ

1. Any source that would provide nationally representative hospital discharge coding (i.e., ICD9 or, in the future, ICD10) data, including such sources as the Agency for Healthcare Research and Quality (AHRQ) Healthcare Cost and Utilization Project, the CDC National Center for Health Statistics or National Hospital Discharge Survey, and those in the Centers for Medicare & Medicaid Services (CMS).

2. See above.

3. Zhan C, et.al. *Medical Care* (in press).