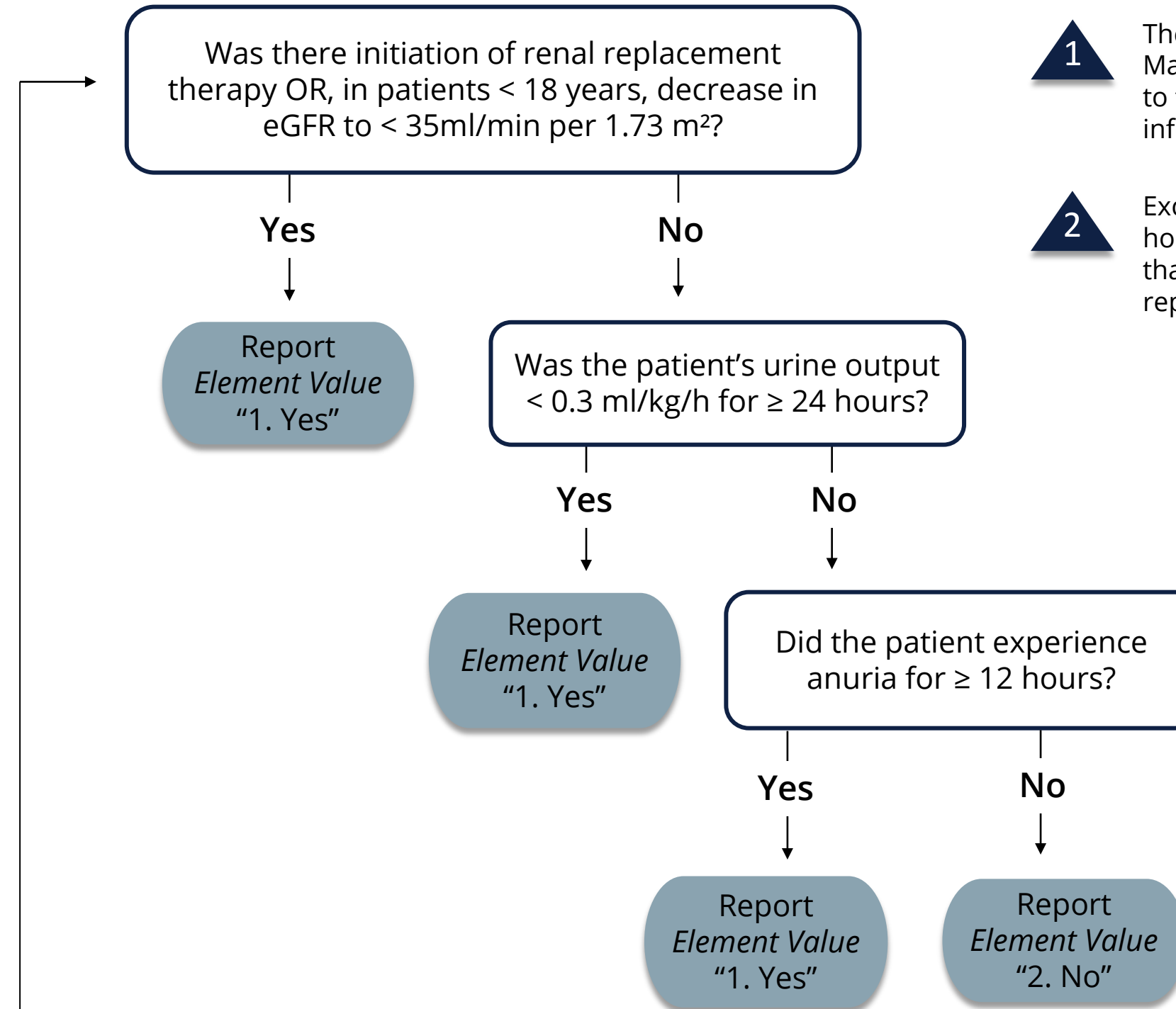
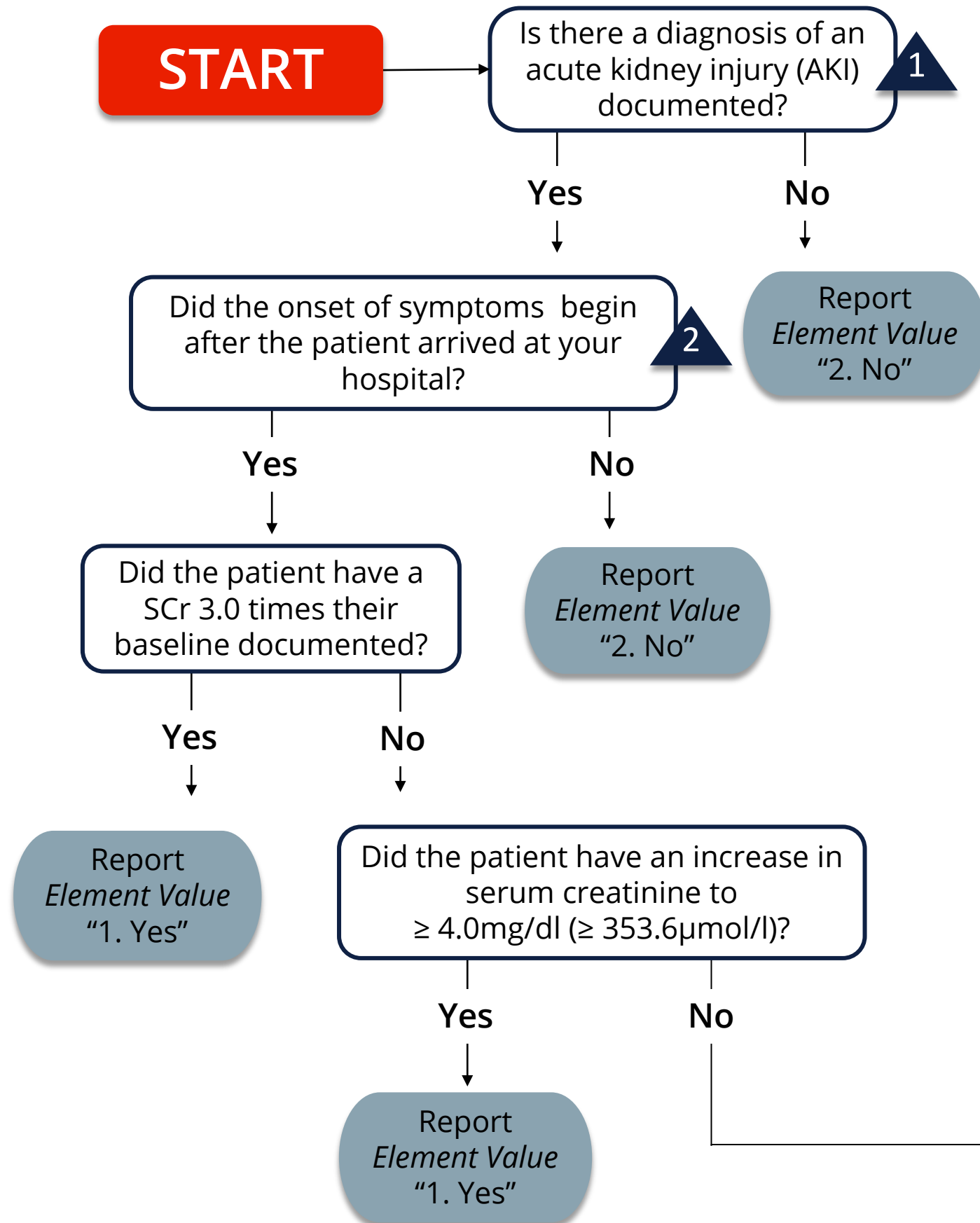


Acute Kidney Injury

2024 NTDS Hospital Event Algorithm



1 The NTDS definition is consistent with the March 2012 KDIGO Guideline. Please refer to that or the TPM/TMD for additional information regarding Stage 3 AKI.

2 Exclude if AKI was present on arrival at your hospital. Exclude patients with renal failure that were requiring chronic renal replacement therapy prior to injury.

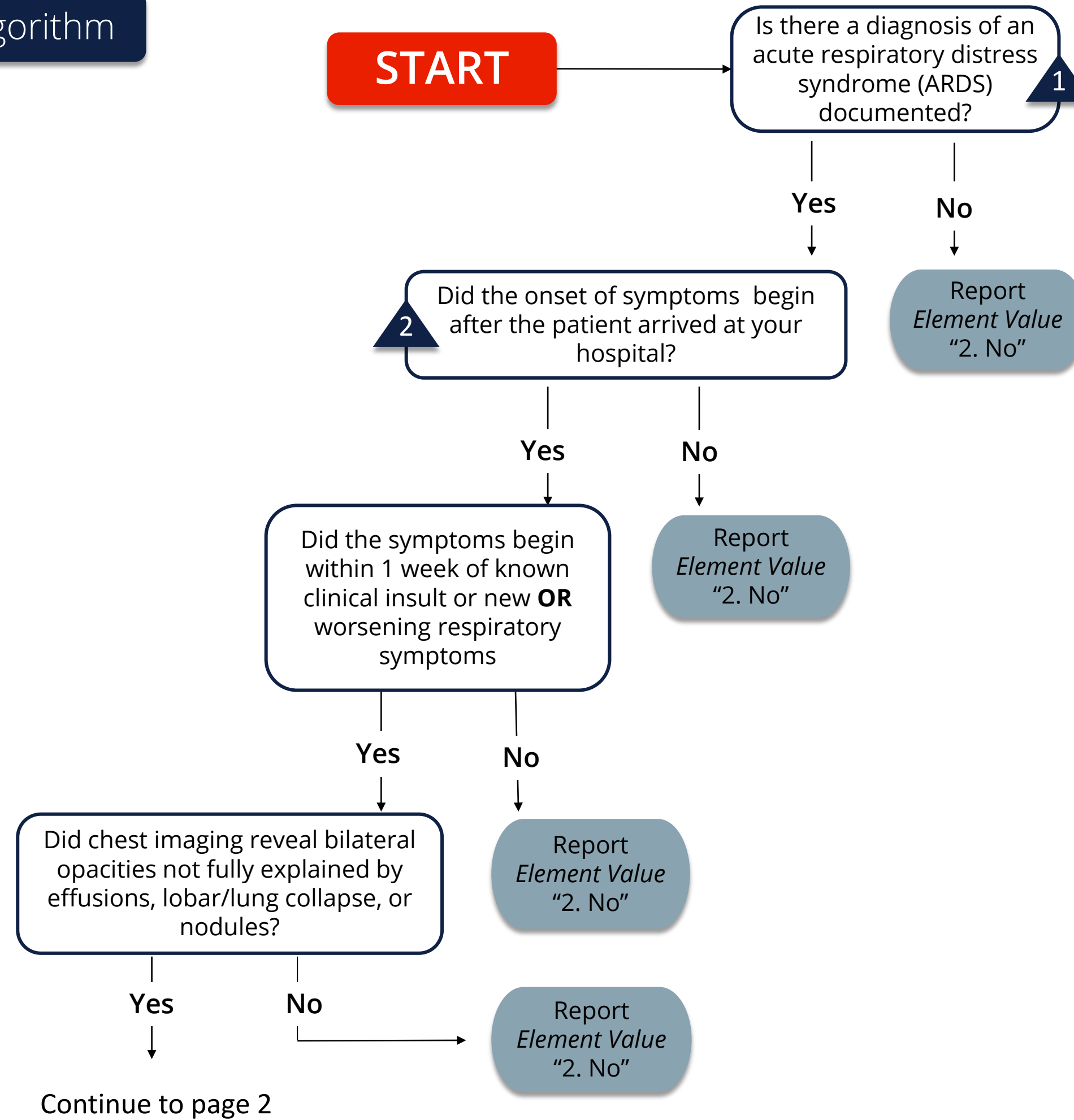
Consistent with the most recent version of the 2024 NTDS Data Dictionary
Refer to complete NTDS definition for additional information



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Acute Respiratory Distress Syndrome (ARDS) (pg. 1 of 2)

2024 NTDS Hospital Event Algorithm



1 The NTDS definition of ARDS is consistent with the 2012 New Berlin Definition.

2 Exclude if ARDS was present on arrival at your hospital.

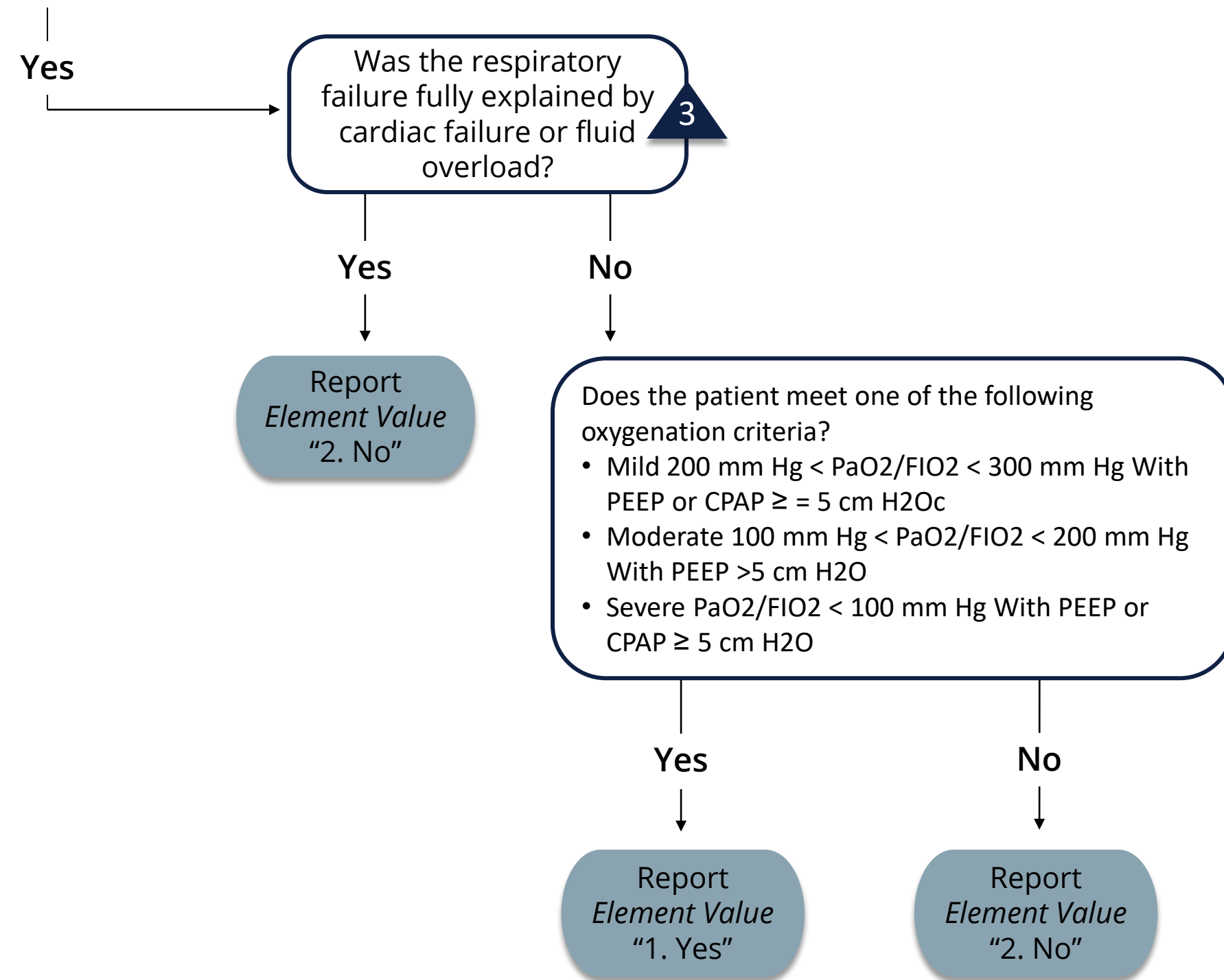
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ACUTE Respiratory Distress Syndrome (ARDS) (pg. 2 of 2)

2024 NTDS Hospital Event Algorithm



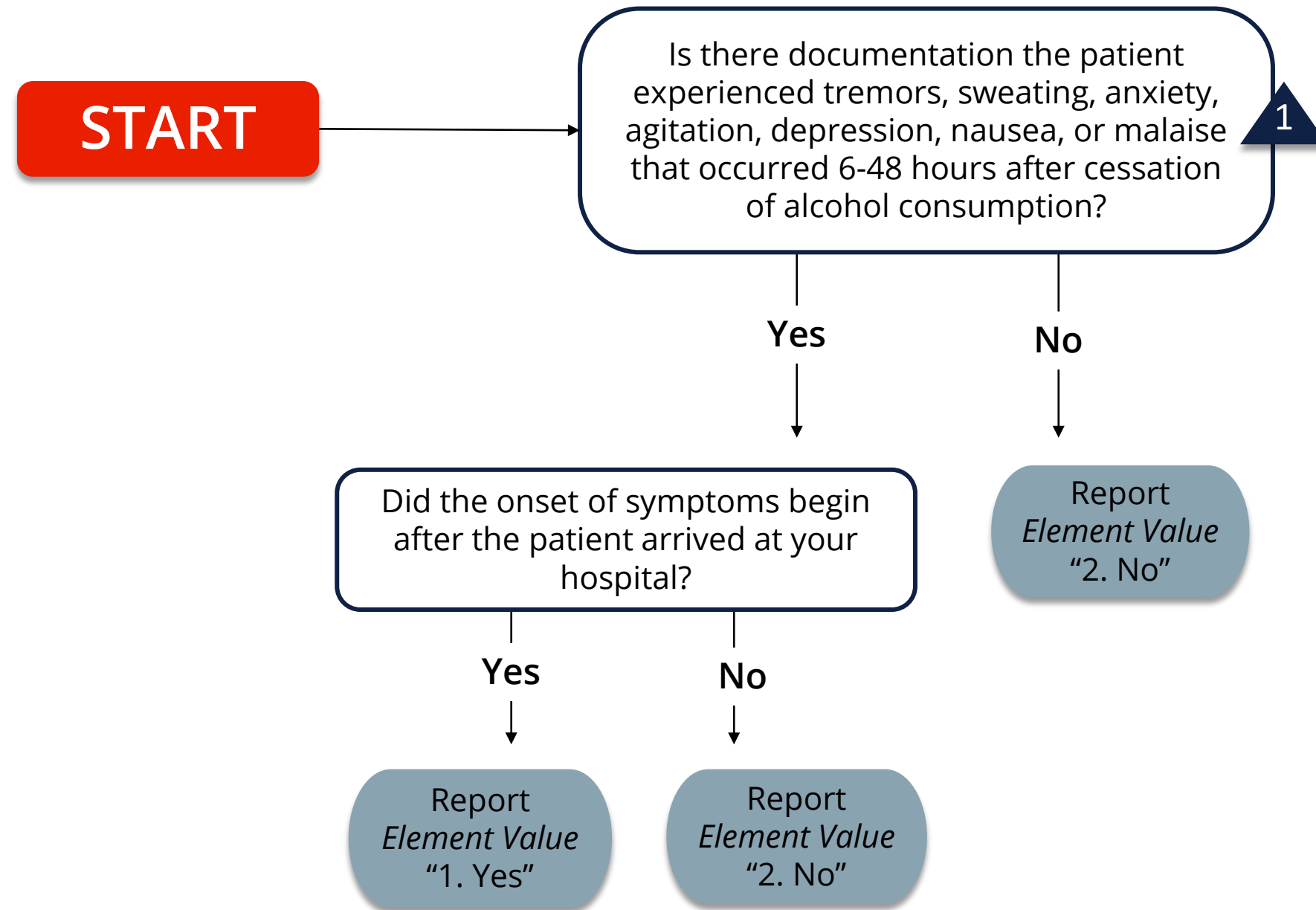
Need objective assessment (e.g., echocardiography) to exclude hydrostatic edema if no risk factor present.

Consistent with the most recent version of the 2024 NTDS Data Dictionary
Refer to complete NTDS definition for additional information

Alcohol Withdrawal Syndrome

2024 NTDS Hospital Event Algorithm

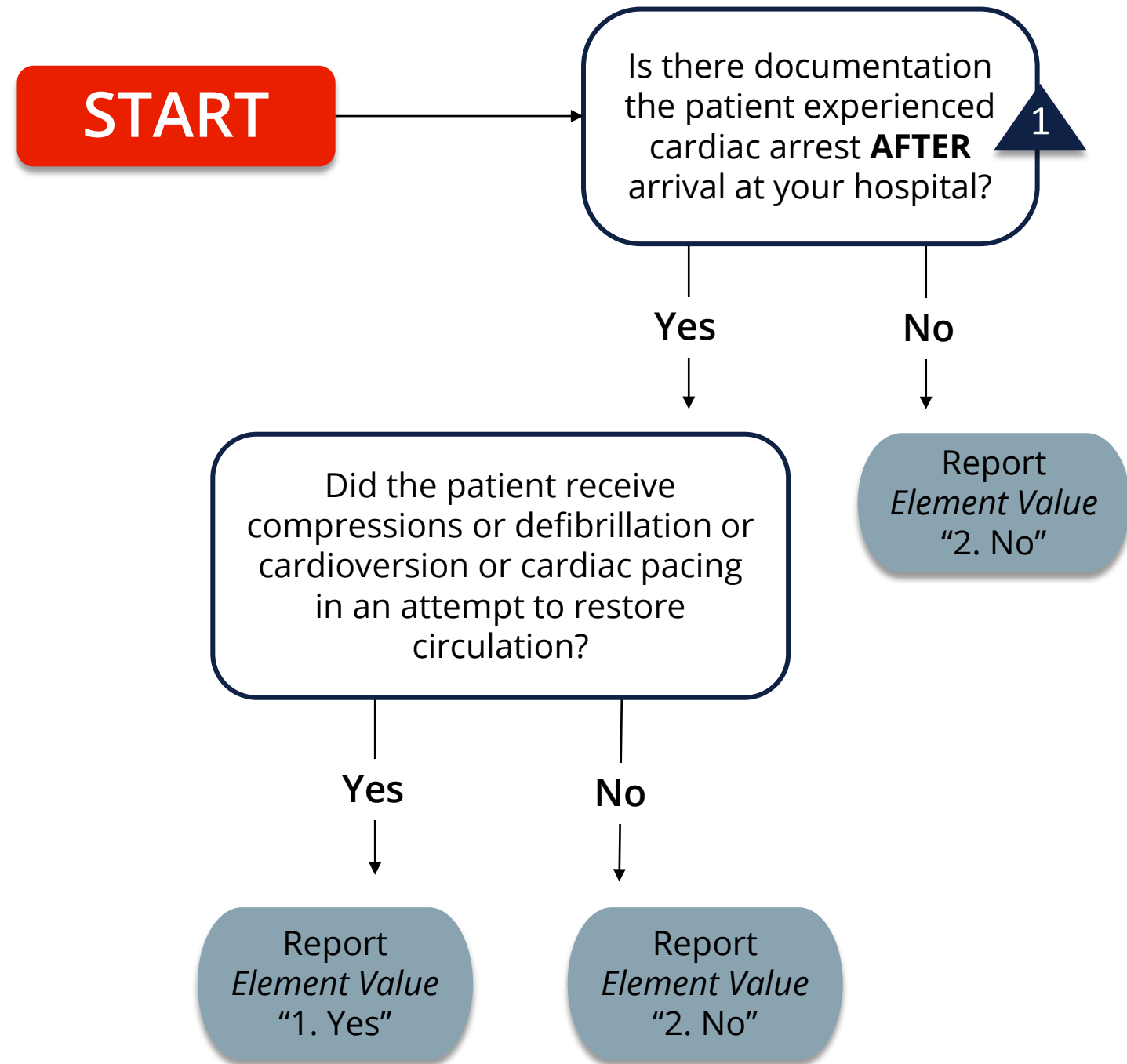
1 Note that a diagnosis of alcohol withdrawal syndrome is not required by the NTDS definition.



Consistent with the most recent version of the 2024 NTDS Data Dictionary
Refer to complete NTDS definition for additional information

Cardiac Arrest with CPR

2024 NTDS Hospital Event Algorithm



Cardiac arrest is the sudden cessation of cardiac activity after hospital arrival. The patient becomes unresponsive with no normal breathing and no signs of circulation. If corrective measures are not taken rapidly, this condition progresses to sudden death.

EXCLUDE patients whose ONLY episode of cardiac arrest with CPR was on arrival to your hospital.

Consistent with the most recent version of the 2024 NTDS Data Dictionary
Refer to complete NTDS definition for additional information

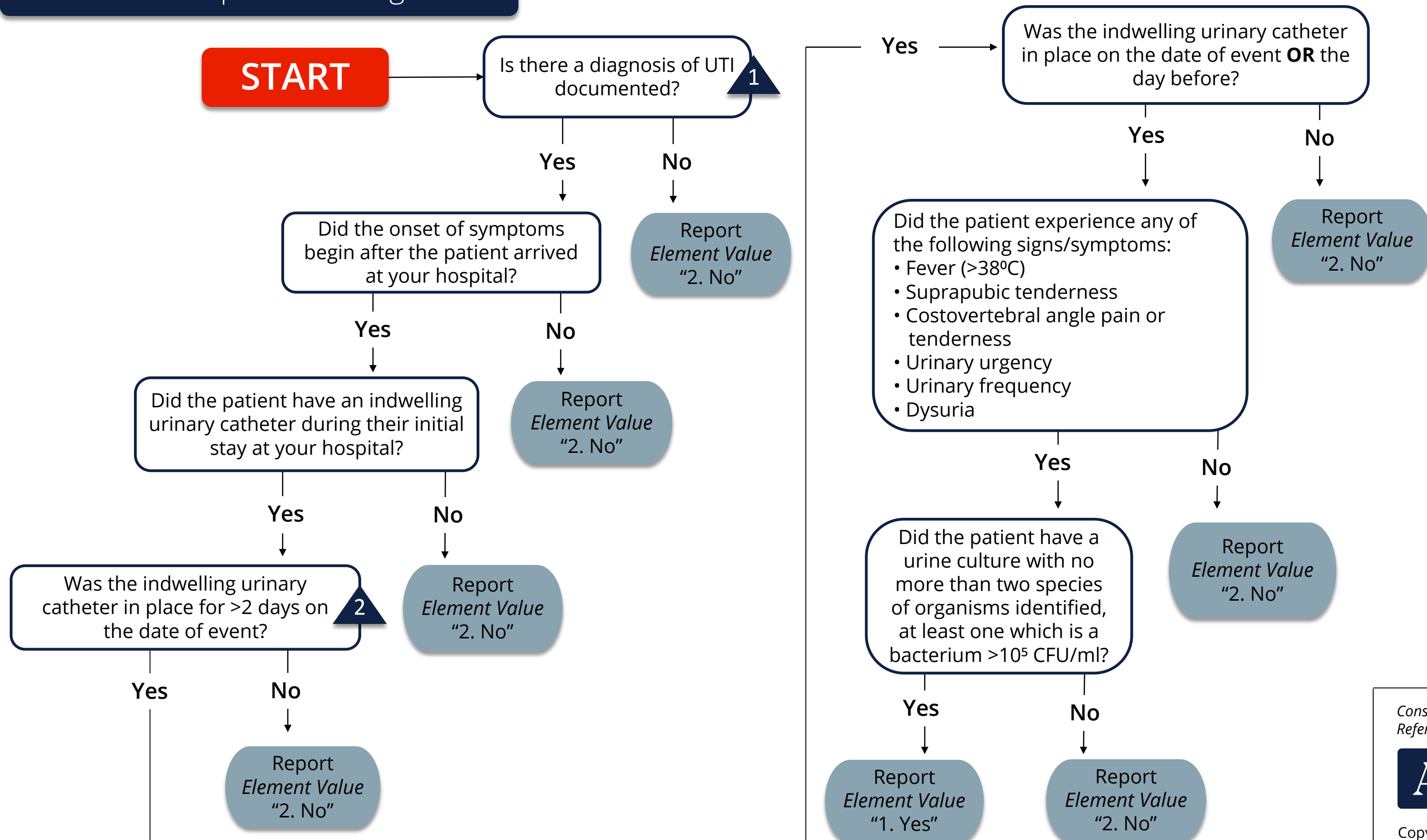


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Catheter-associated Urinary Tract Infection (CAUTI)

SUTI 1a (Patients >1 year of age)

2024 NTDS Hospital Event Algorithm



1 The NTDS definition is consistent with the January 2019 CDC CAUTI definition. If information not contained in the NTDS definition is needed, please refer to the CDC or your hospital's infection control department.

2 The Date of Event is the date the first element used to meet an NHSN site-specific infection criterion occurs for the first time within the seven-day infection window period. The day of device placement is Day 1.

Consistent with the most recent version of the 2024 NTDS Data Dictionary
Refer to complete NTDS definition for additional information

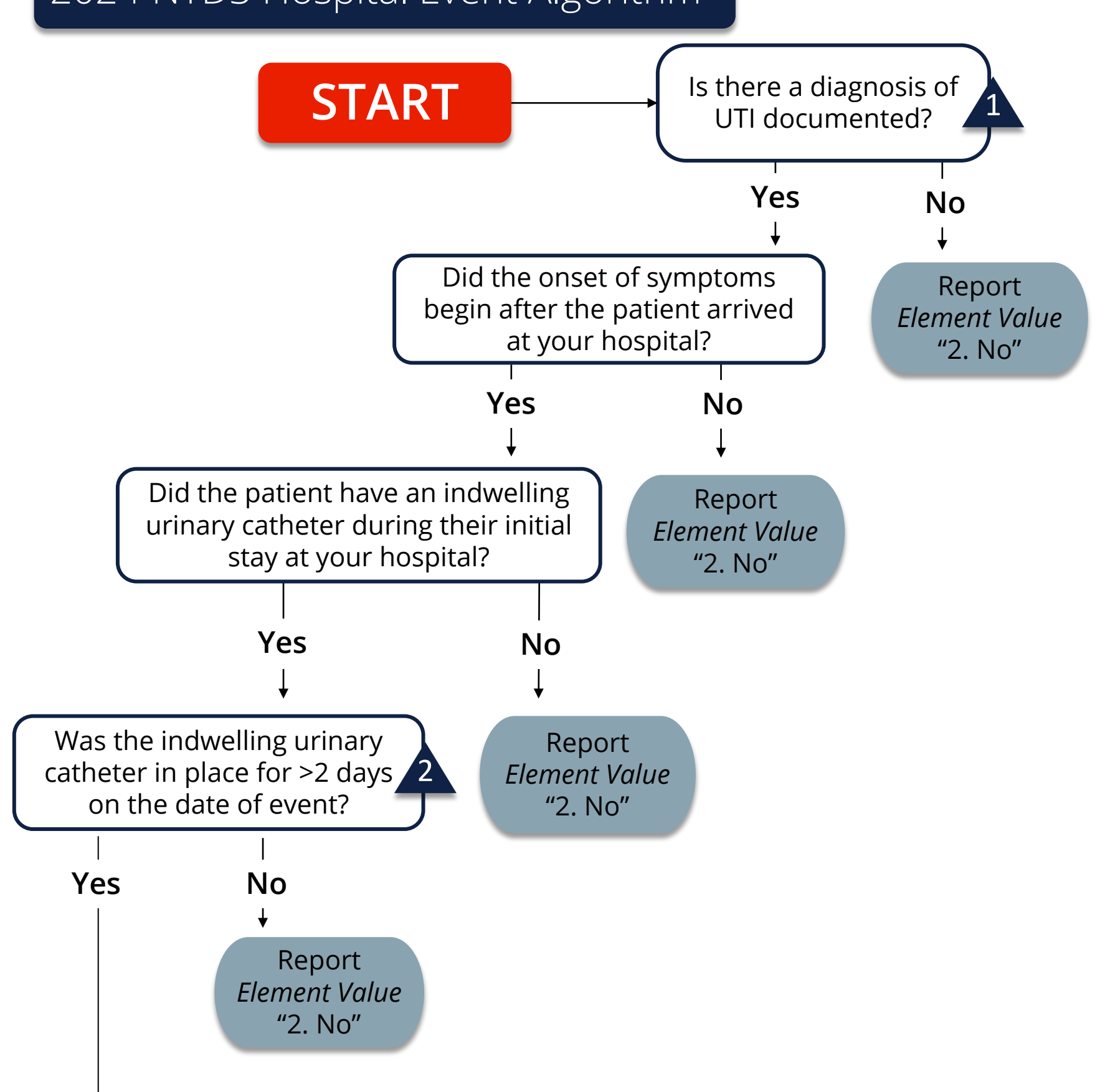


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Catheter-associated Urinary Tract Infection (CAUTI)

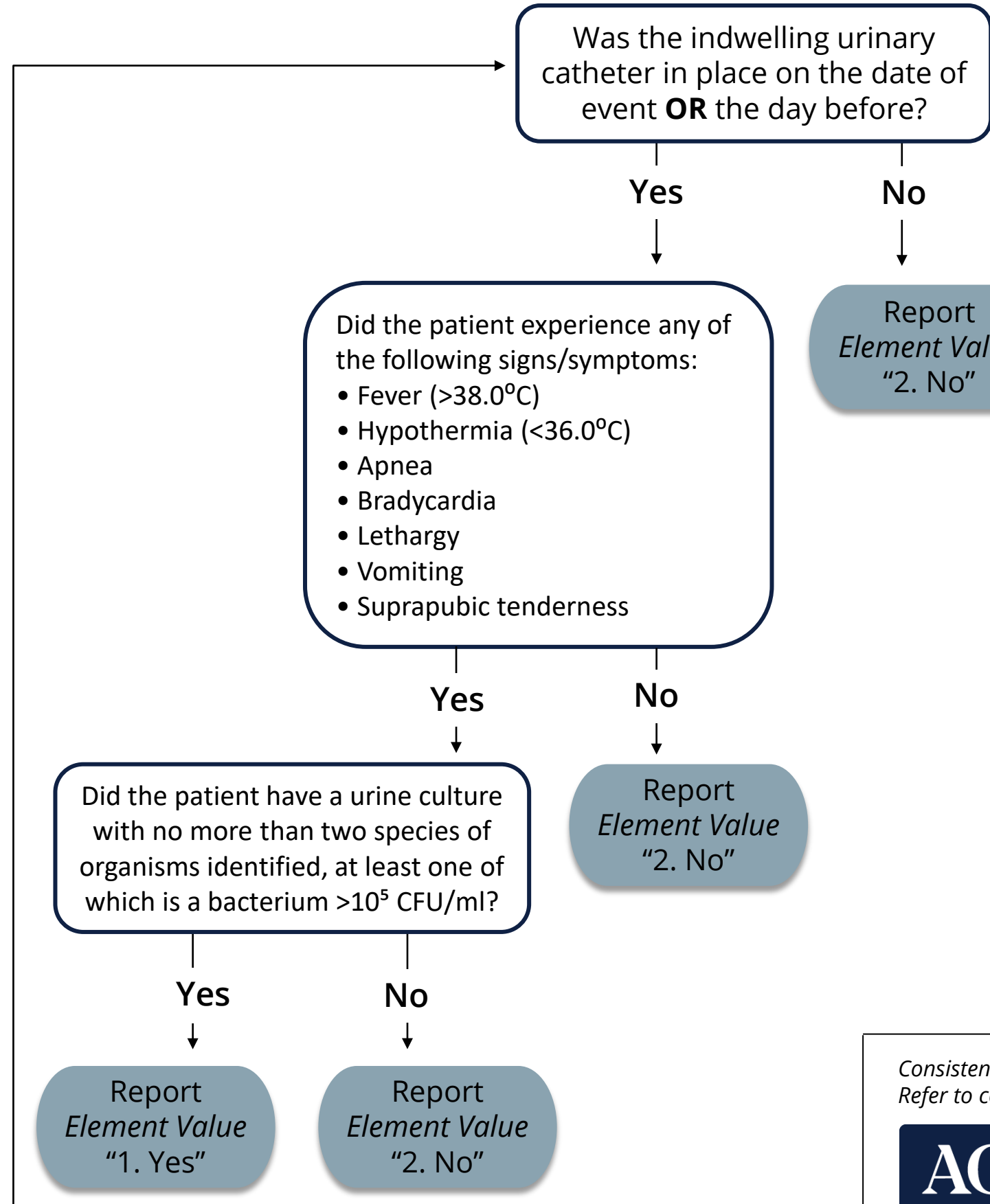
SUTI 2 (Patients ≤ 1 year of age)

2024 NTDS Hospital Event Algorithm



1 The NTDS definition is consistent with the January 2019 CDC CAUTI definition. If information not contained in the NTDS definition is needed, please refer to the CDC or your hospital's infection control department.

2 The Date of Event is the date the first element used to meet an NHSN site-specific infection criterion occurs for the first time within the seven-day infection window period. The day of device placement is Day 1.



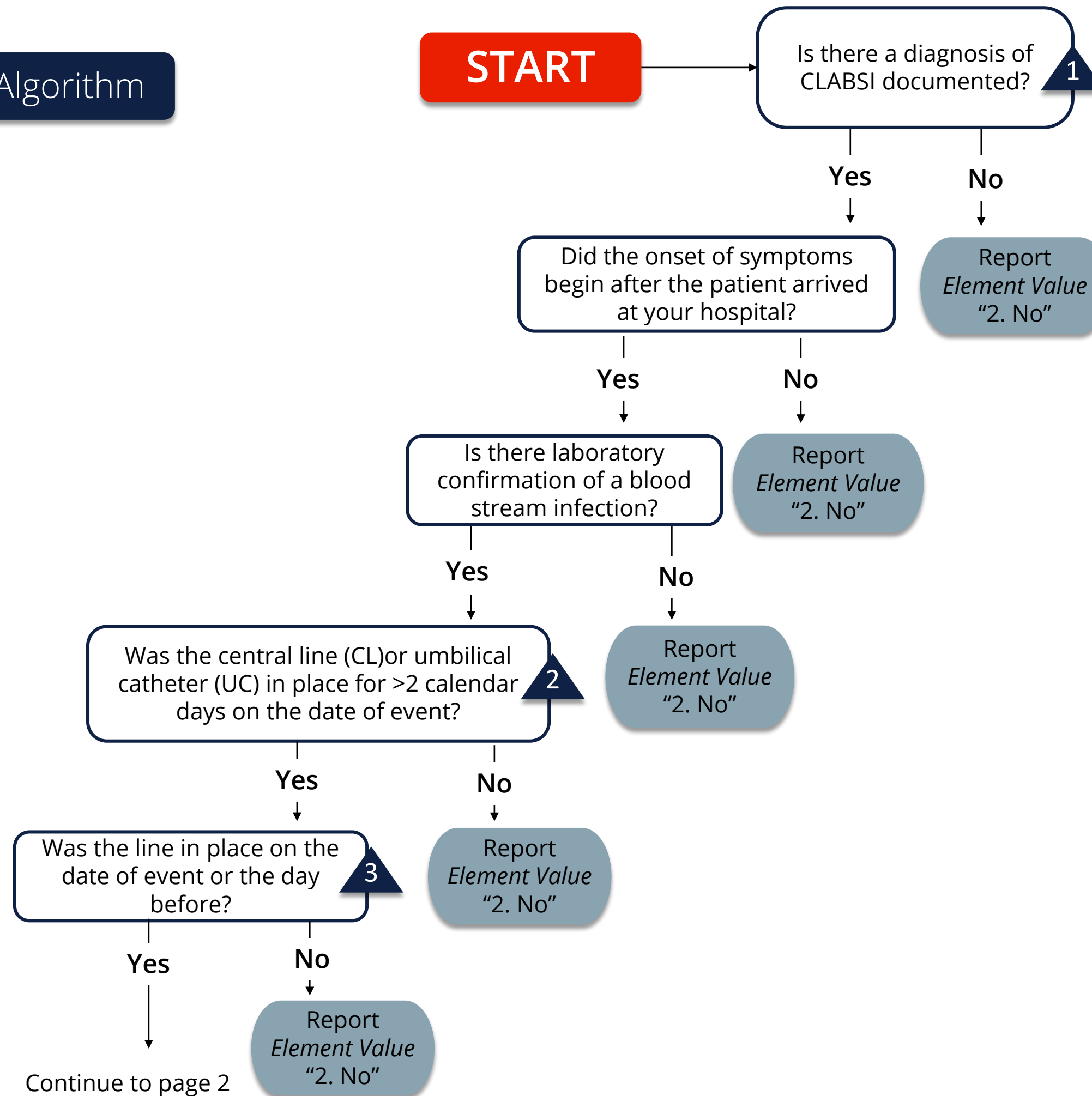
Consistent with the most recent version of the 2024 NTDS Data Dictionary
Refer to complete NTDS definition for additional information



Central Line-Associated Blood Stream Infection (CLABSI)

(pg. 1 of 3)

2024 NTDS Hospital Event Algorithm



- 1** The NTDS definition is consistent with the January 2016 CDC CLABSI definition. If information not contained in the NTDS definition is needed, please refer to the CDC or your hospital's infection control department.
- 2** The Date of Event is the date the first element used to meet an NHSN site-specific infection criterion occurs for the first time within the seven-day infection window period. The day of device placement is Day 1.
- 3** If a CL or UC was in place for > 2 calendar days and then removed, the date of event of the LCBI must be the day of discontinuation or the next day to be a CLABSI. If the patient is admitted or transferred into a facility with an implanted central line (port) in place, and that is the patient's only central line, day of first access in an inpatient location is considered Day 1. "Access" is defined as line placement, infusion or withdrawal through the line. Such lines continue to be eligible for CLABSI once they are accessed until they are either discontinued or the day after patient discharge (as per the Transfer Rule). Note that the "de-access" of a port does not result in the patient's removal from CLABSI surveillance.

Consistent with the most recent version of the 2024 NTDS Data Dictionary
Refer to complete NTDS definition for additional information

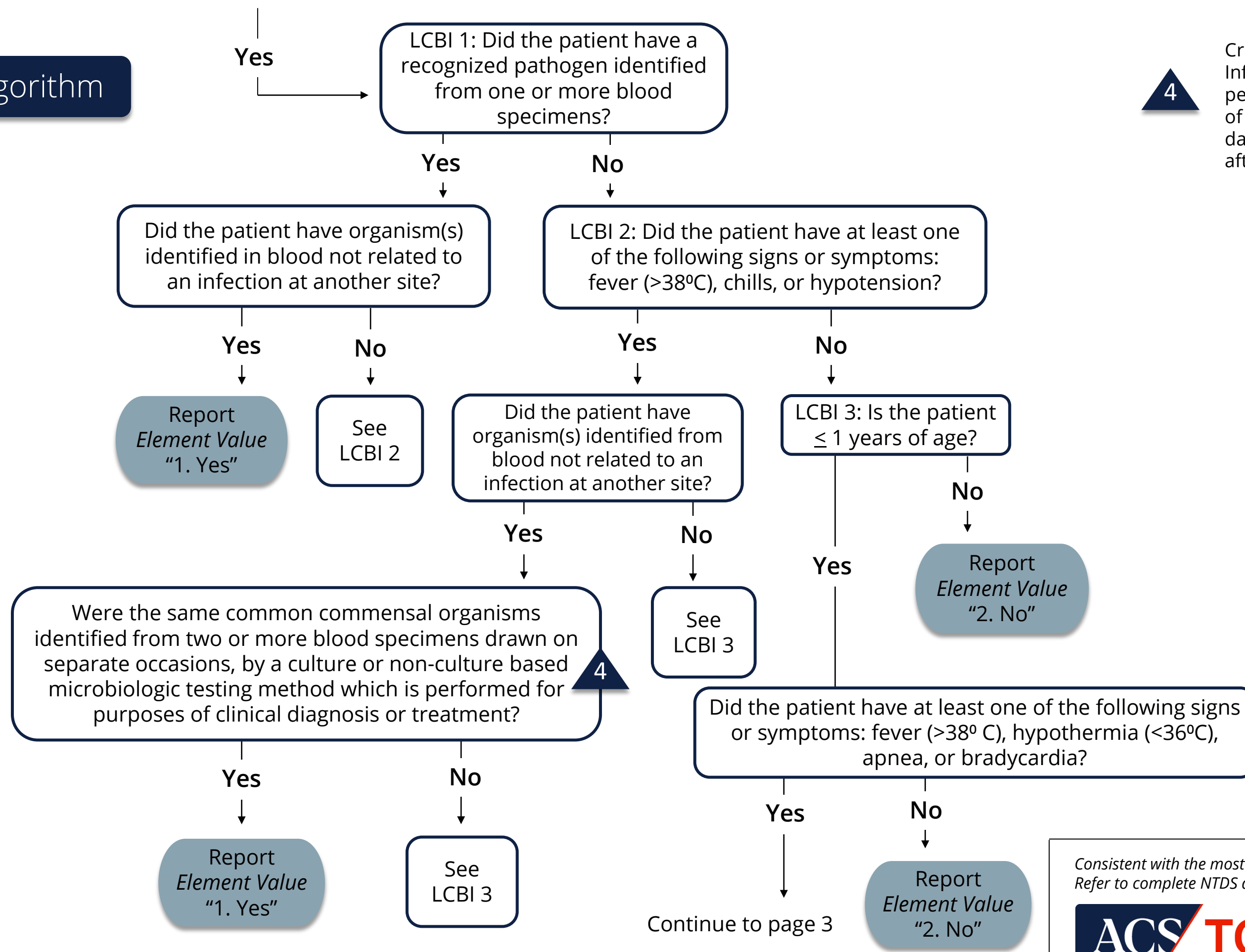


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Central Line-Associated Blood Stream Infection (CLABSI)

(pg. 2 of 3)

2024 NTDS Hospital Event Algorithm



4

Criterion elements must occur within the Infection Window Period, the 7-day time period which includes the collection date of the positive blood, the 3 calendar days before and the 3 calendar days after.

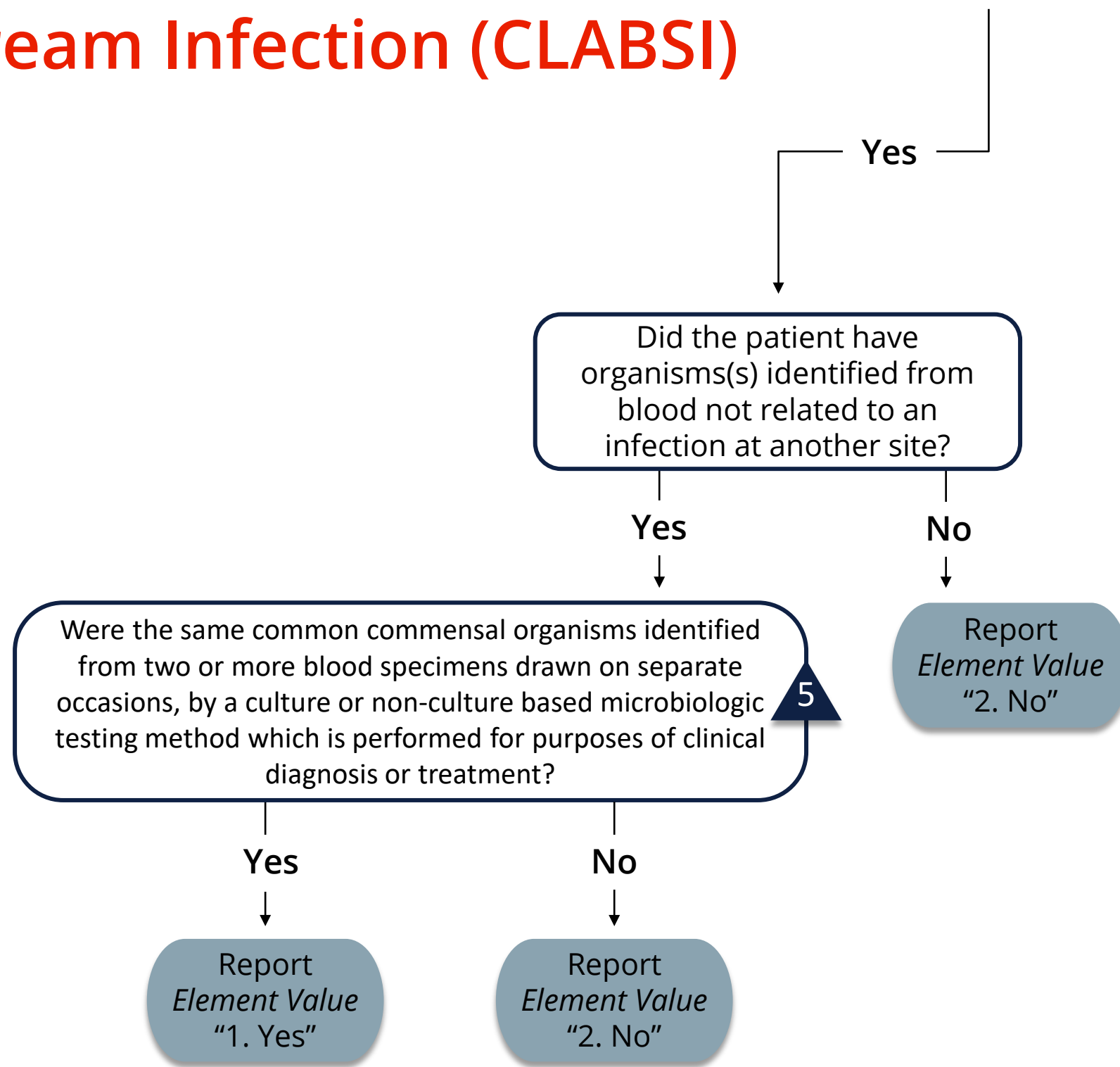
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Central Line-Associated Blood Stream Infection (CLABSI) (pg. 3 of 3)

2024 NTDS Hospital Event Algorithm



5

Criterion elements must occur within the Infection Window Period, the 7-day time period which includes the collection date of the positive blood, the 3 calendar days before and the 3 calendar days after.

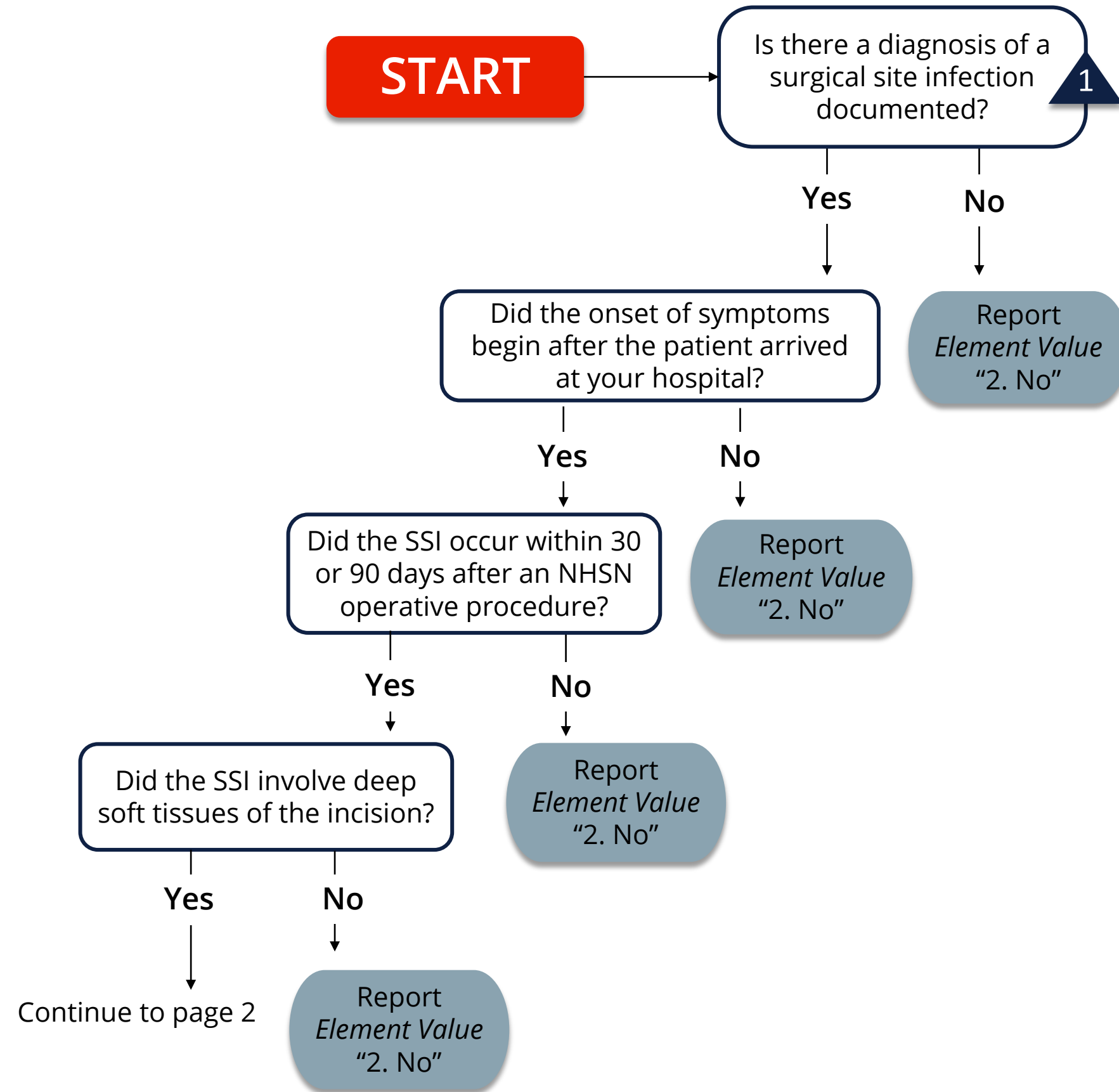
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Refer to complete NTDS definition for additional information



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Deep Surgical Site Infection (Deep SSI) (pg. 1 of 2)

2024 NTDS Hospital Event Algorithm



1

The NTDS definition is consistent with the January 2019 CDC SSI definition. If information not contained in the NTDS definition is needed, please refer to the CDC or your hospital's infection control department.

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Deep Surgical Site Infection (Deep SSI) (pg. 2 of 2)

2024 NTDS Hospital Event Algorithm

Did the patient have at least *one* of the following:

- a. Purulent drainage from the deep incision.
- b. A deep incision that spontaneously dehisces, or is deliberately opened or aspirated by a surgeon, **attending physician** or other designee

AND

organism(s) identified from the deep soft tissues of the incision by a culture or non-culture based microbiologic testing method which is performed for purposes of clinical diagnosis or treatment (for example, not Active Surveillance Culture/Testing (ASC/AST)) or culture or non-culture based test from the deep soft tissues of the incision that has a negative finding does not meet this criterion.

AND

Patient has at least **one** of the following signs or symptoms:
fever (>38 °C); localized pain or tenderness.

- c. An abscess or other evidence of infection involving the deep incision that is detected on gross anatomical or histopathological exam, or imaging test.

1

The term **attending physician** for the purposes of application of the NHSN SSI criteria may be interpreted to mean the surgeon(s), infectious disease, other physician on the case, emergency physician, or physician's designee (nurse practitioner or physician's assistant).

Yes

Yes

No

Was there documented evidence of infection?

Report
Element Value
"2. No"

Yes

No

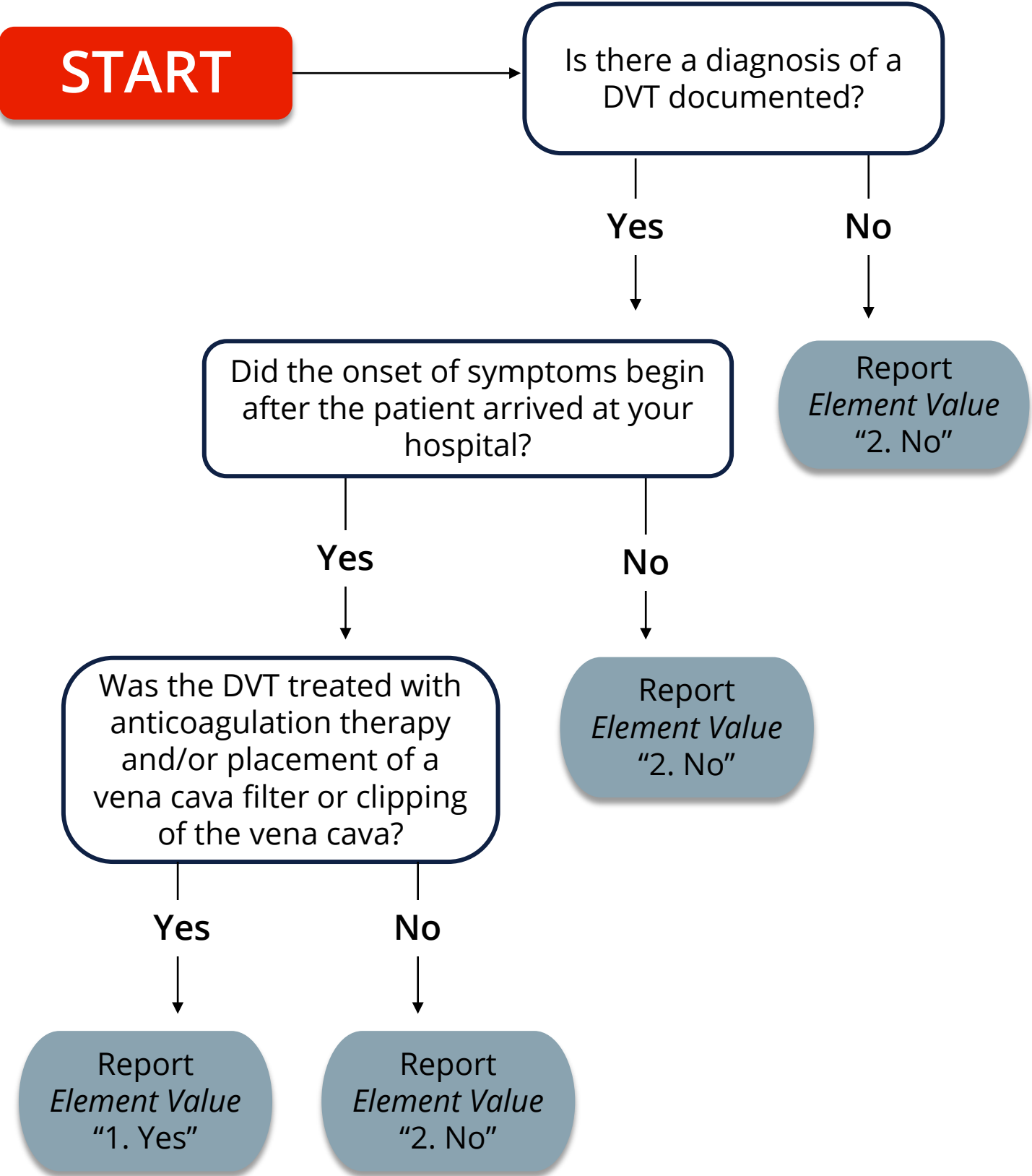
Report
Element Value
"1. Yes"

Report
Element Value
"2. No"

Consistent with the most recent version of the 2024 NTDS Data Dictionary
Refer to complete NTDS definition for additional information

Deep Vein Thrombosis (DVT)

2024 NTDS Hospital Event Algorithm

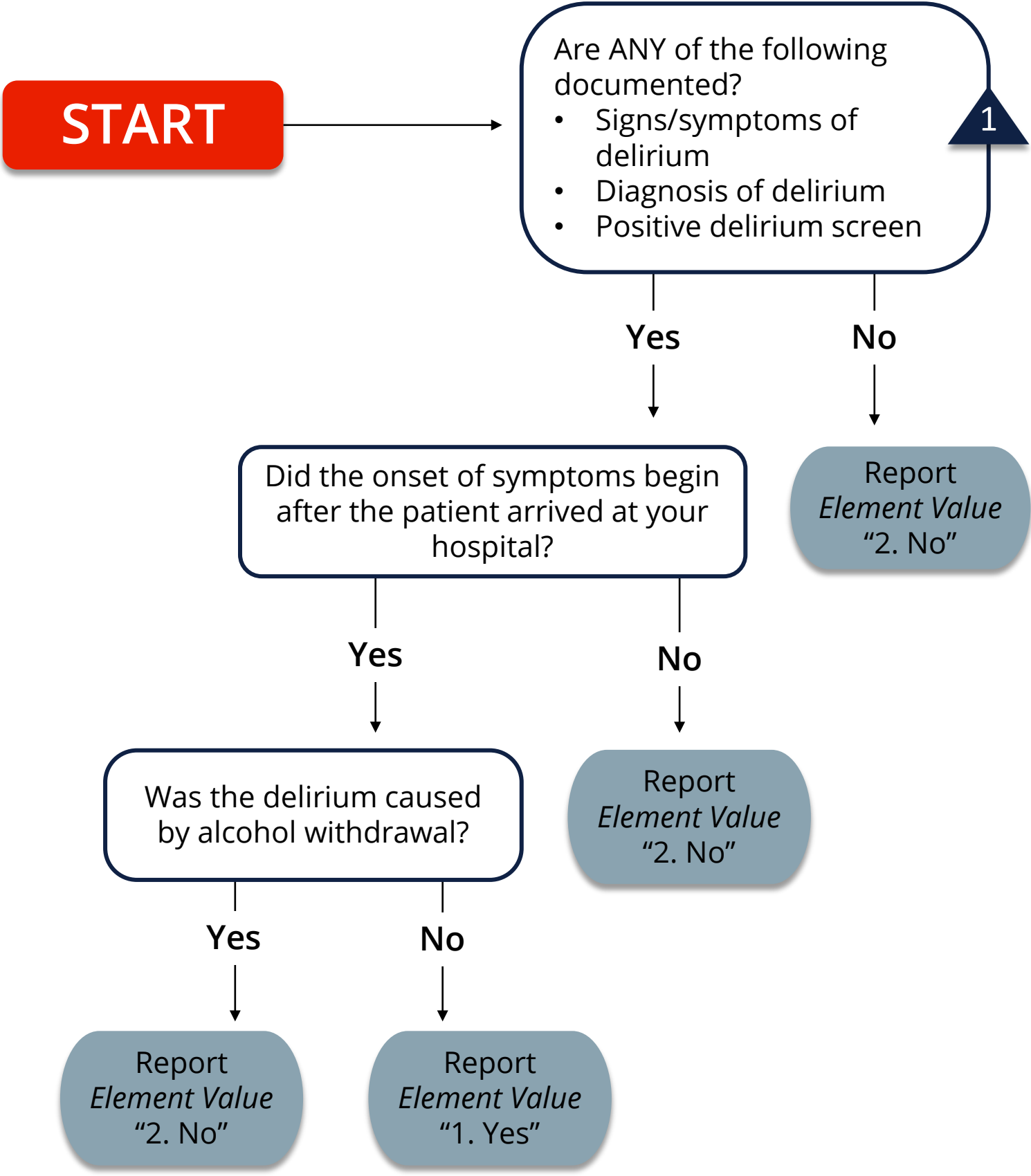


Consistent with the most recent version of the 2024 NTDS Data Dictionary
Refer to complete NTDS definition for additional information



Delirium

2024 NTDS Hospital Event Algorithm



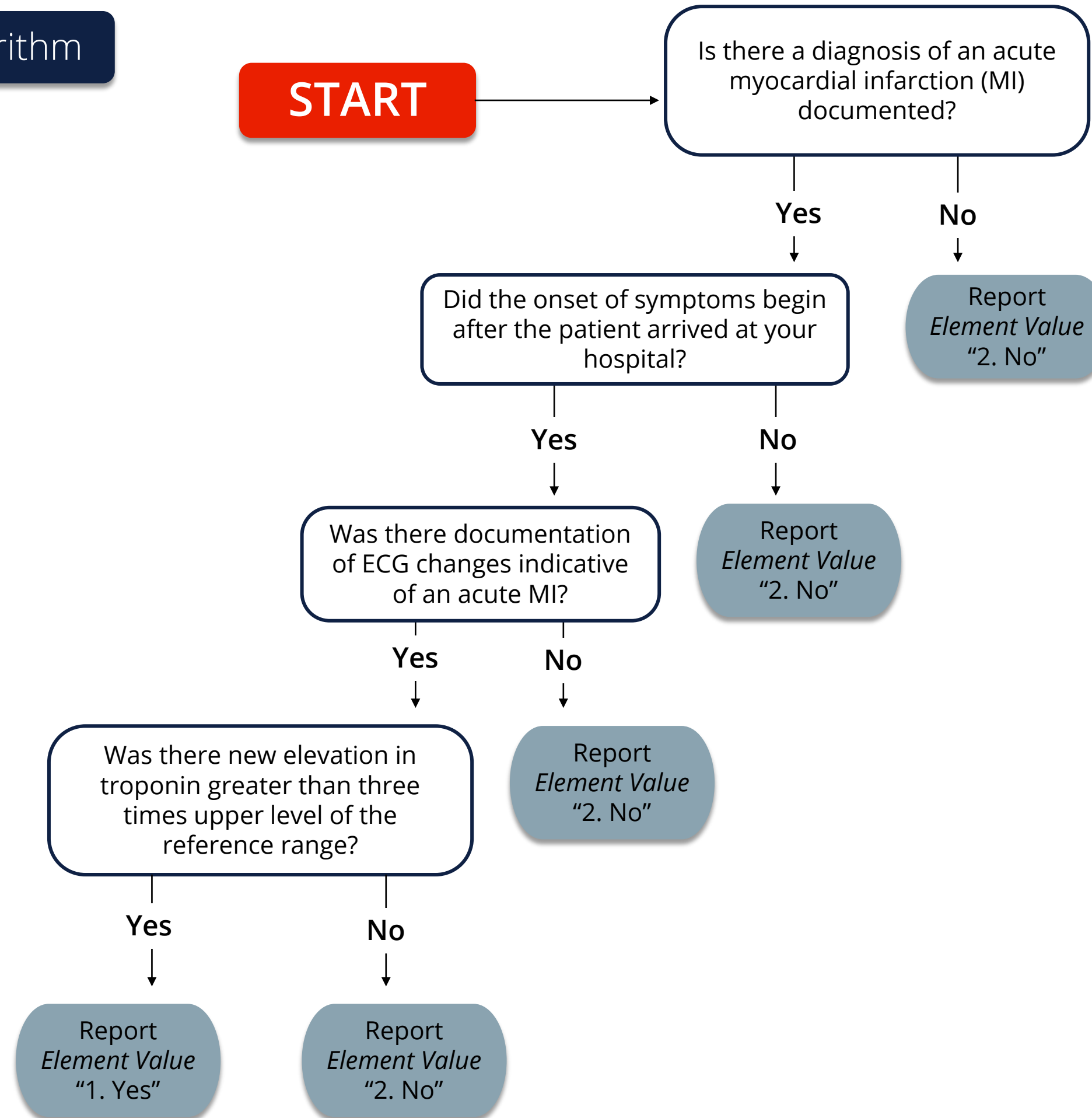
Delirium can often be traced to one or more contributing factors, such as a severe or chronic medical illness, changes in your metabolic balance (such as low sodium), medication, infection, surgery, or alcohol or drug withdrawal.

Consistent with the most recent version of the 2024 NTDS Data Dictionary
Refer to complete NTDS definition for additional information



Myocardial Infarction

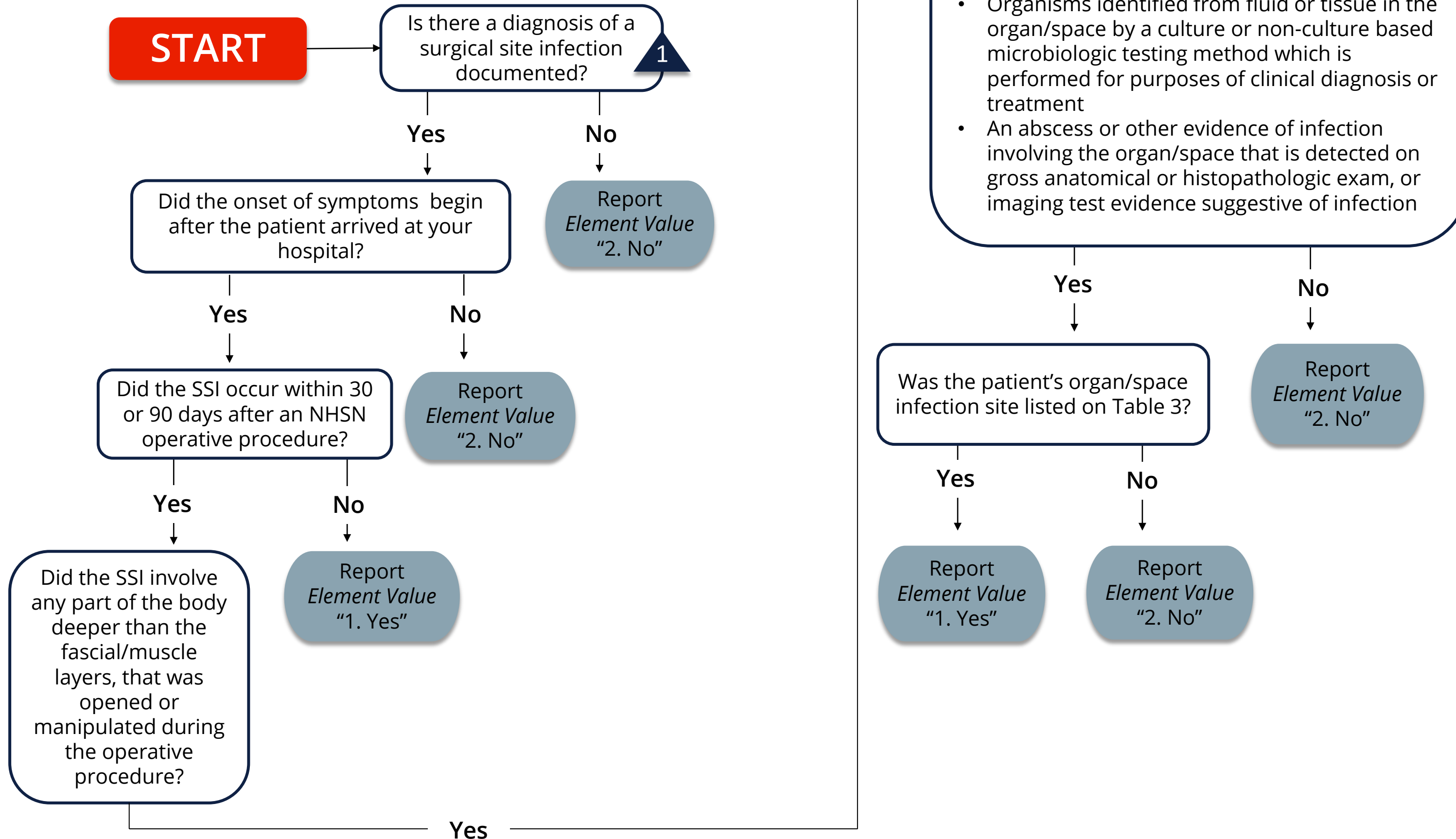
2024 NTDS Hospital Event Algorithm



Consistent with the most recent version of the 2024 NTDS Data Dictionary
Refer to complete NTDS definition for additional information

Organ/Space Surgical Site Infection (O/S SSI)

2024 NTDS Hospital Event Algorithm



The NTDS definition is consistent with the January 2019 CDC SSI definition. If information not contained in the NTDS definition is needed, please refer to the CDC or your hospital's infection control department.

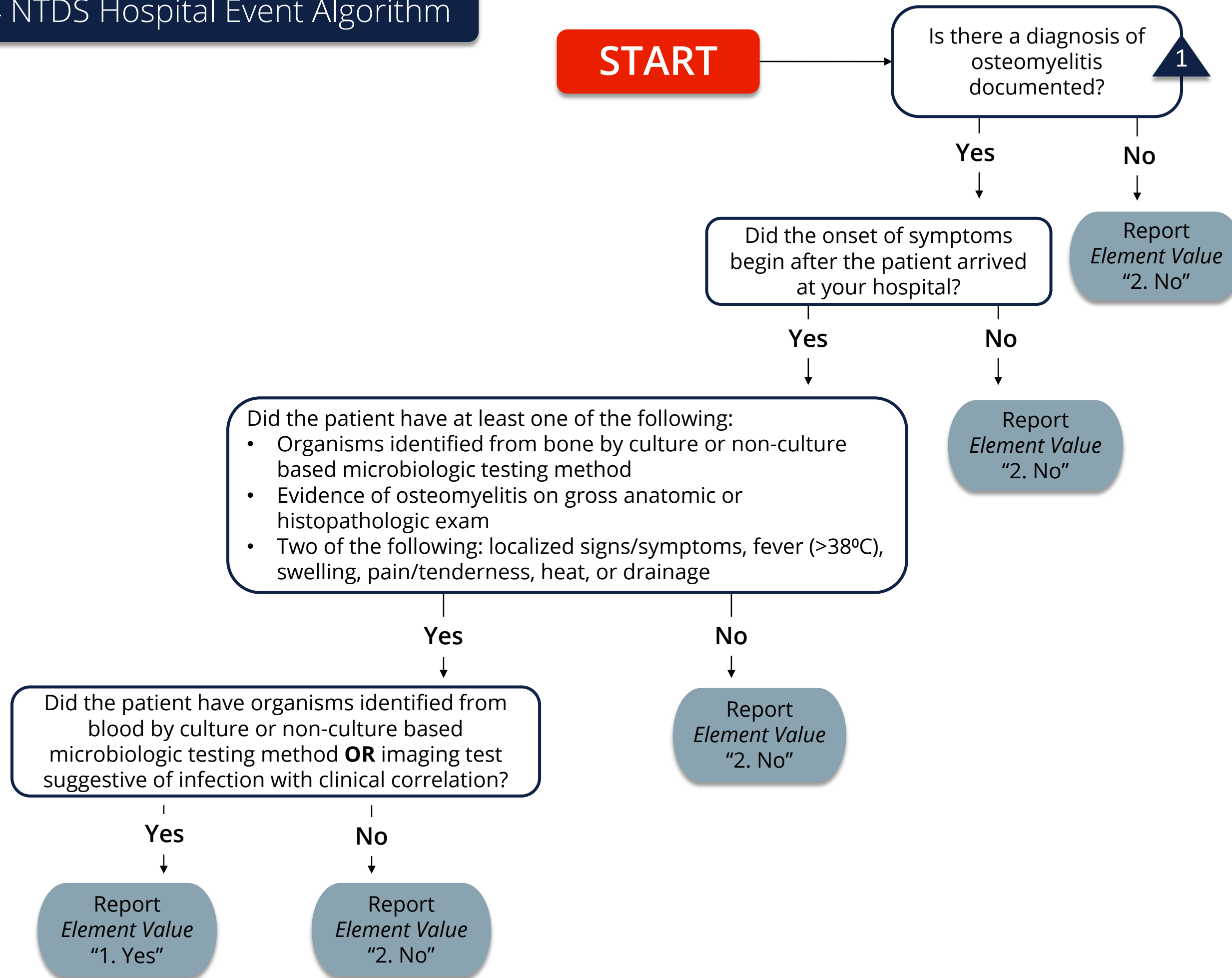
Consistent with the most recent version of the 2024 NTDS Data Dictionary
Refer to complete NTDS definition for additional information



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Osteomyelitis

2024 NTDS Hospital Event Algorithm



The NTDS definition is consistent with the January 2020 CDC Bone and Joint Infection definition. If information not contained in the NTDS definition is needed, please refer to the CDC or your hospital's infection control department.

Consistent with the most recent version of the 2024 NTDS Data Dictionary
Refer to complete NTDS definition for additional information

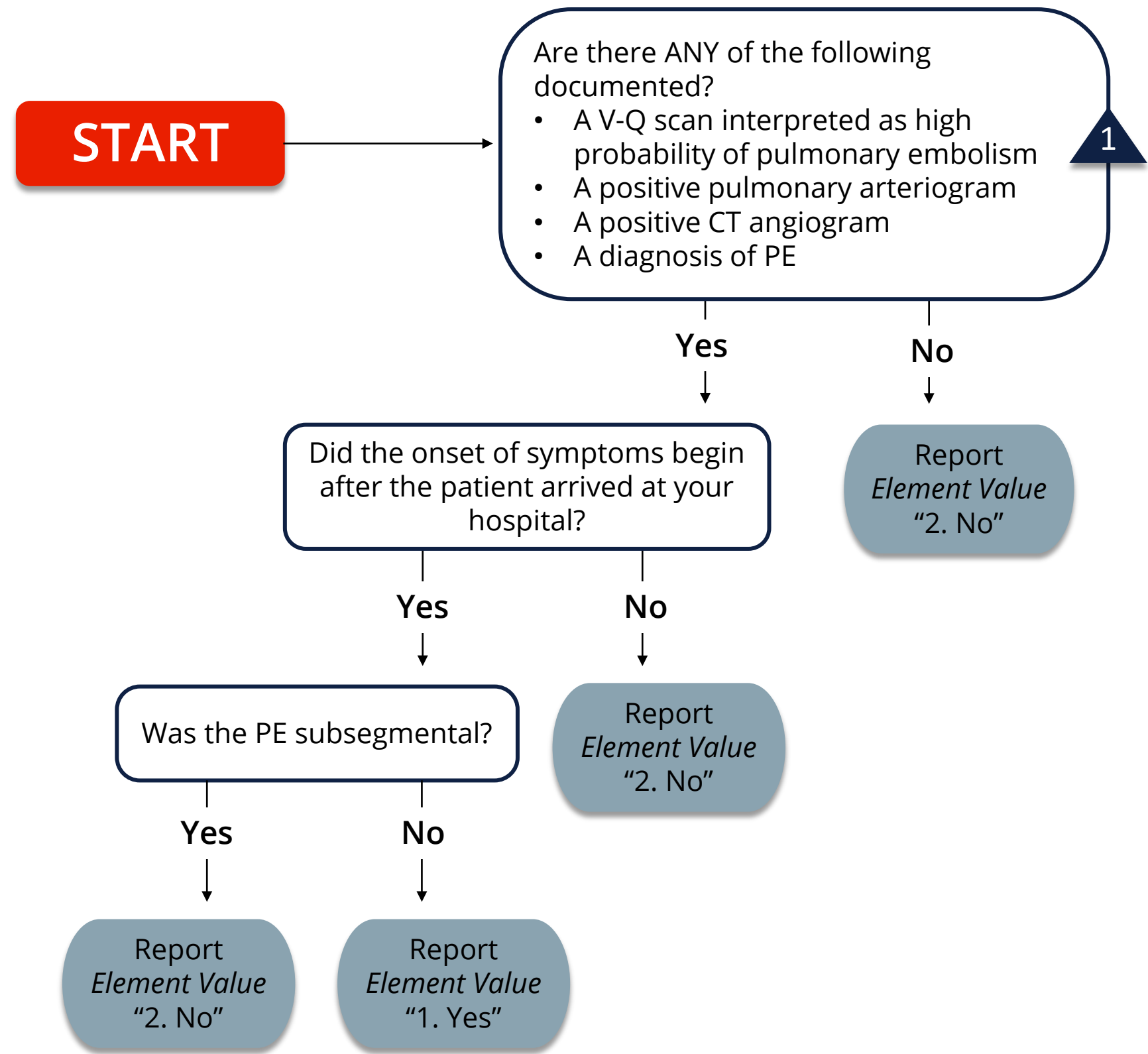


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Pulmonary Embolism (PE)

2024 NTDS Hospital Event Algorithm

1 Subsegmental PEs are excluded from the NTDS definition of PE.

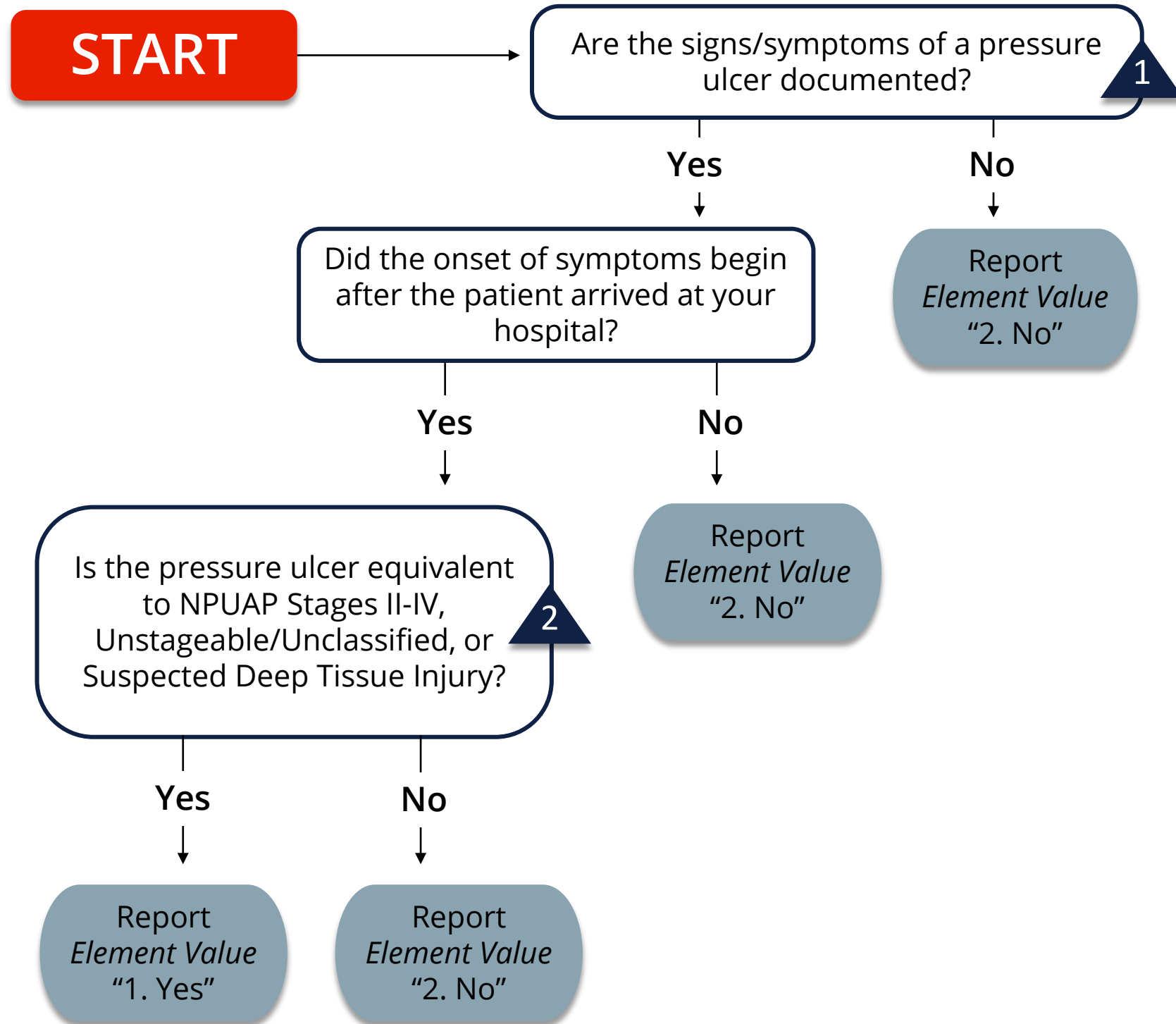


Consistent with the most recent version of the 2024 NTDS Data Dictionary
Refer to complete NTDS definition for additional information



Pressure Ulcer

2024 NTDS Hospital Event Algorithm



A pressure ulcer is a localized injury to the skin and/or underlying tissue usually over a bony prominence, as a result of pressure, or pressure in combination with shear. A number of contributing or confounding factors are also associated with pressure ulcers; the significance of these factors is yet to be elucidated.



The NTDS definition is consistent with the NPUAP 2014.

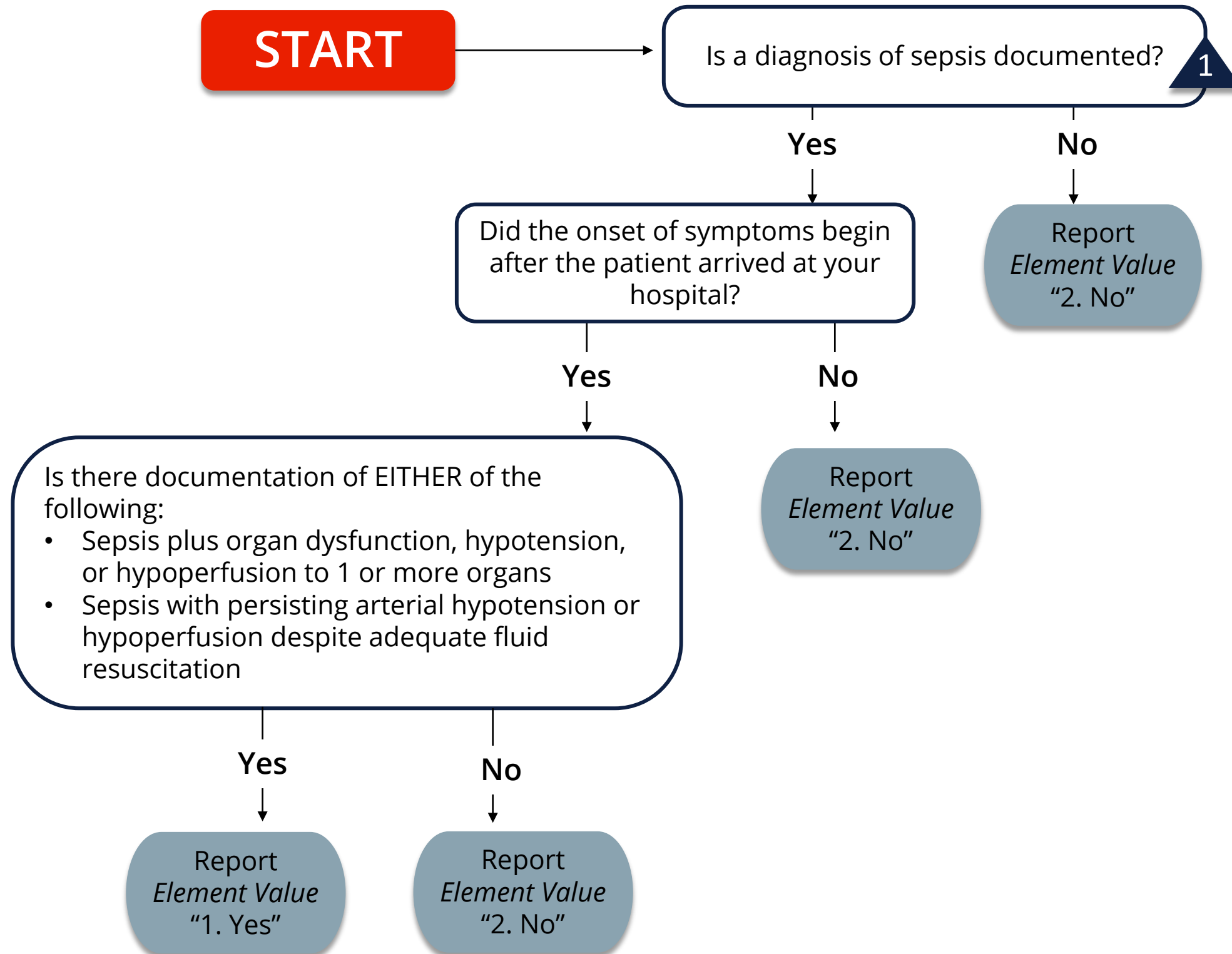
Consistent with the most recent version of the 2024 NTDS Data Dictionary
Refer to complete NTDS definition for additional information

Severe Sepsis

2024 NTDS Hospital Event Algorithm



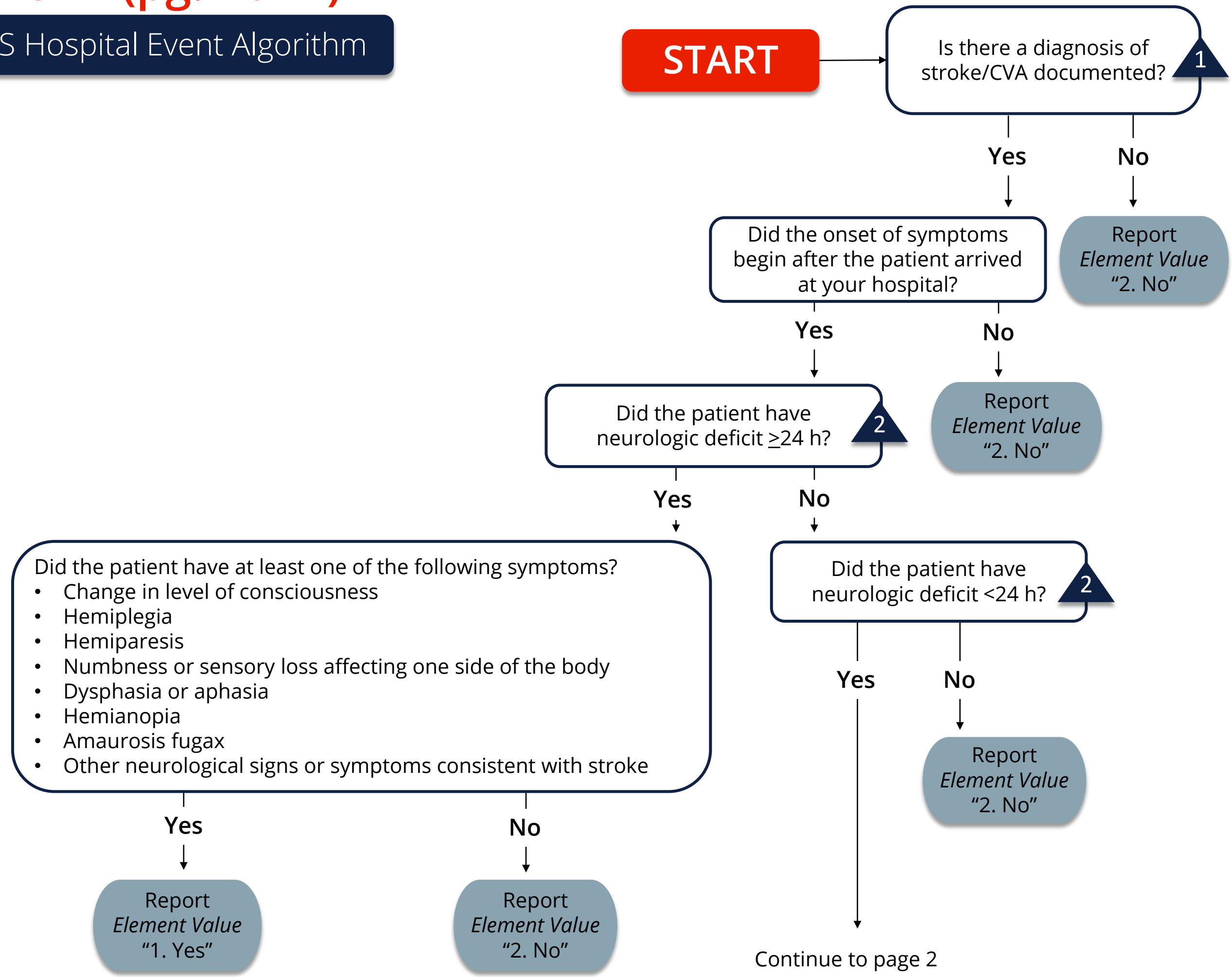
The NTDS definition is consistent with the American College of Chest Physicians and the Society of Critical Care Medicine October 2010.



Consistent with the most recent version of the 2024 NTDS Data Dictionary
Refer to complete NTDS definition for additional information

Stroke/CVA (pg.1 of 2)

2024 NTDS Hospital Event Algorithm



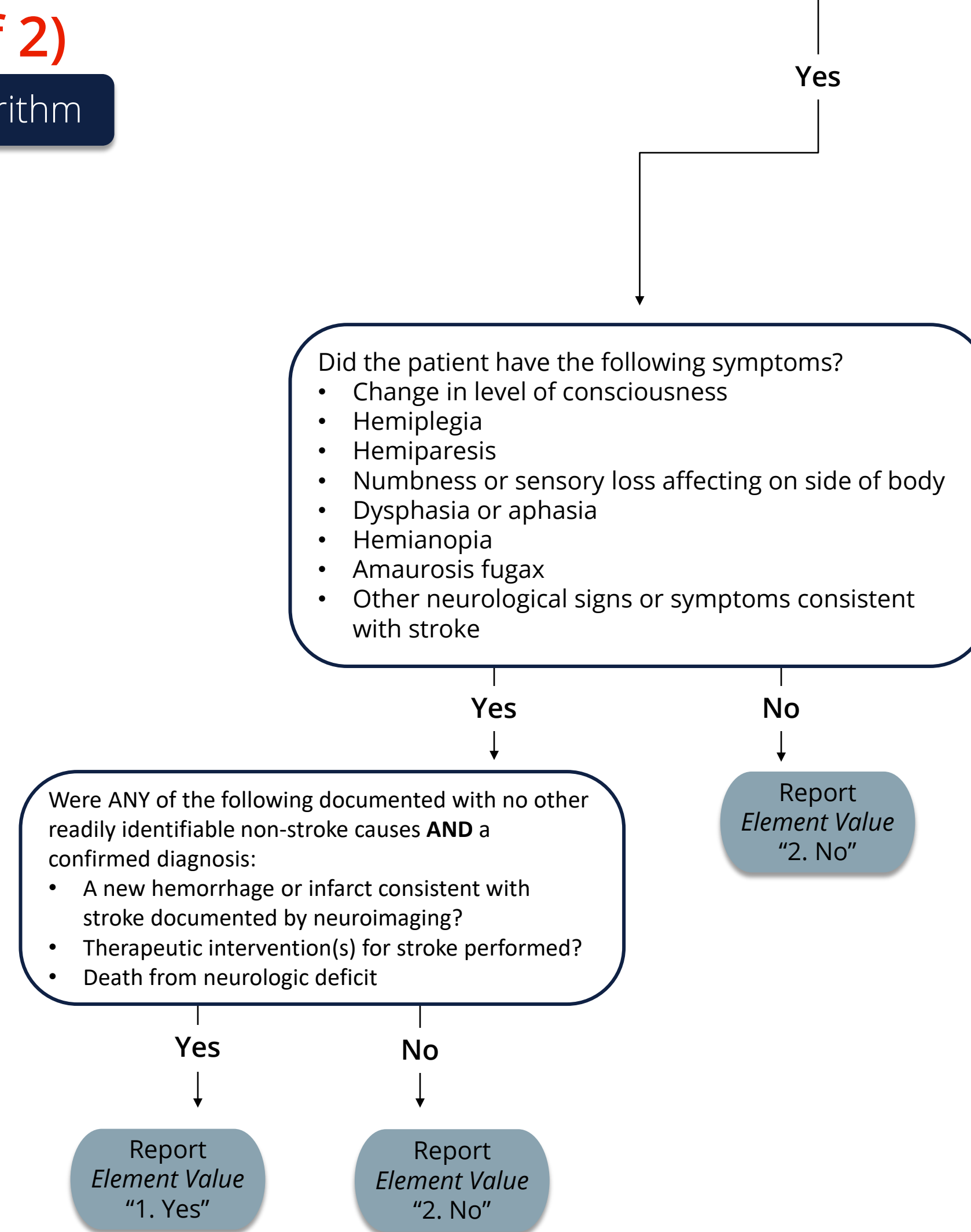
- 1** A focal or global neurological deficit of rapid onset and NOT present on admission caused by a clot obstructing the flow of blood to the brain (ischemic stroke). Or by a blood vessel rupturing and preventing blood flow to the brain (hemorrhagic stroke). Or a transient ischemic attack which is temporarily caused by a temporary clot.
- 2** Although the neurologic deficit must not present on admission, risk factors predisposing to stroke (e.g., blunt cerebrovascular injury, dysrhythmia) may be present on admission.

Consistent with the most recent version of the 2024 NTDS Data Dictionary Refer to complete NTDS definition for additional information



Stroke/CVA (pg. 2 of 2)

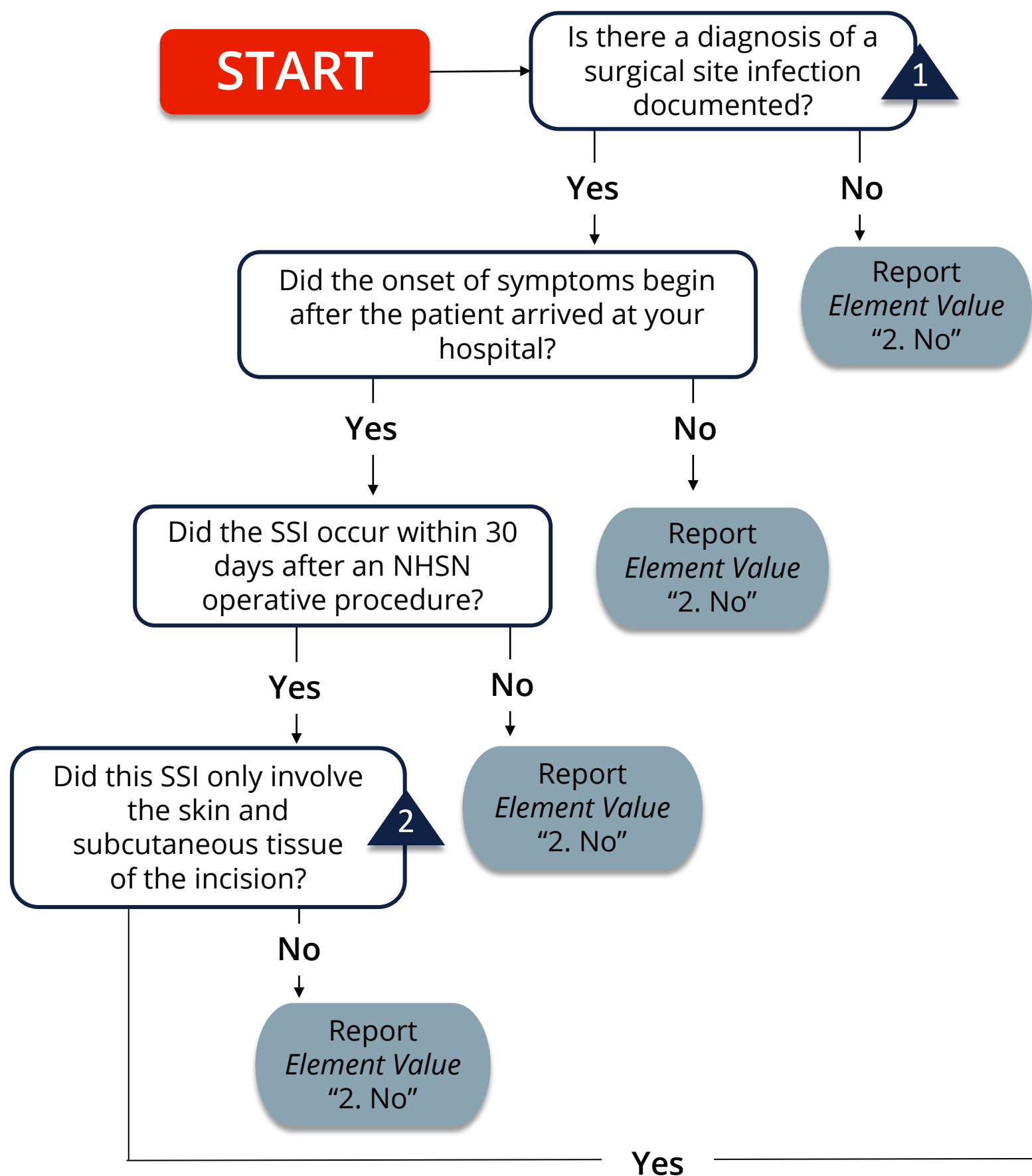
2024 NTDS Hospital Event Algorithm



Consistent with the most recent version of the 2024 NTDS Data Dictionary
Refer to complete NTDS definition for additional information

Superficial Incisional Surgical Site Infection (S/I SSI)

2024 NTDS Hospital Event Algorithm



Did the patient have at least ONE of the following:

- Purulent drainage from the superficial incision
- Organisms identified from an aseptically-obtained specimen from the superficial incision or subcutaneous tissue by a culture or non-culture based microbiologic testing method which is performed for purposes of clinical diagnosis or treatment
- A superficial incision that was deliberately opened by a surgeon, attending physician or other designee and culture or non-culture-based testing is not performed **AND** at least one of the following signs or symptoms: pain or tenderness; localized swelling; erythema; or heat

1

The NTDS definition is consistent with the January 2019 CDC SSI definition. If information not contained in the NTDS definition is needed, please refer to the CDC or your hospital's infection control department.

2

There are two specific types of superficial incisional SSIs:

1. Superficial Incisional Primary (SIP) - a superficial incisional SSI that is identified in the primary incision in a patient that has had an operation with one or more incisions (e.g., C-section incision or chest incision for CBGB)
2. Superficial Incisional Secondary (SIS) - a superficial incisional SSI that is identified in the secondary incision in a patient that has had an operation with more than one incision (e.g., donor site incision for CBGC)

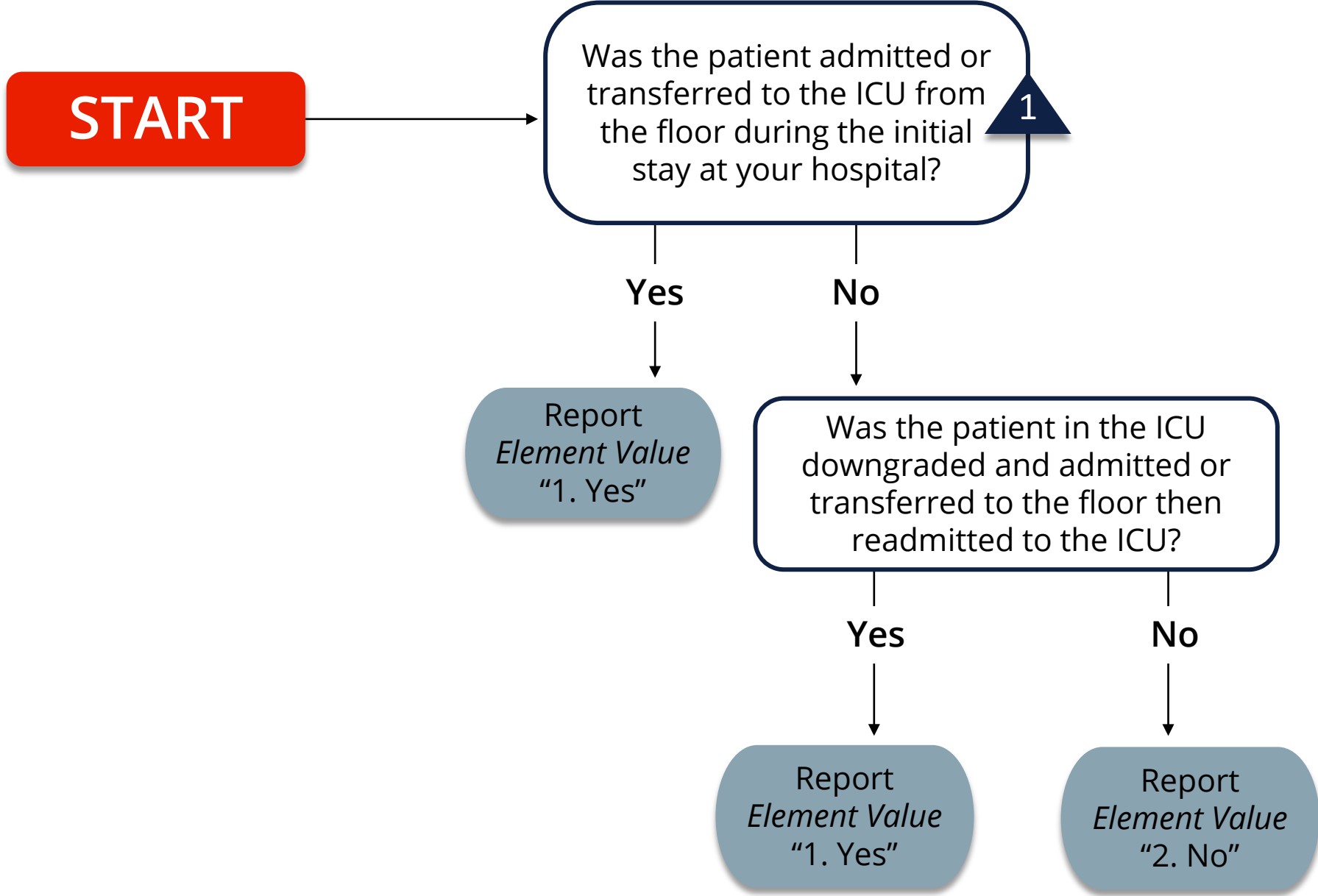
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Unplanned Admission to the ICU

2024 NTDS Hospital Event Algorithm



Floor is defined as any other ward that is not an ICU. "Floor" also includes step-down units and the operating room for the purposes of this definition.

EXCLUDE: Patients with a planned post-operative ICU stay. This means that it was known prior to surgery that the patient would require post-operative ICU care.

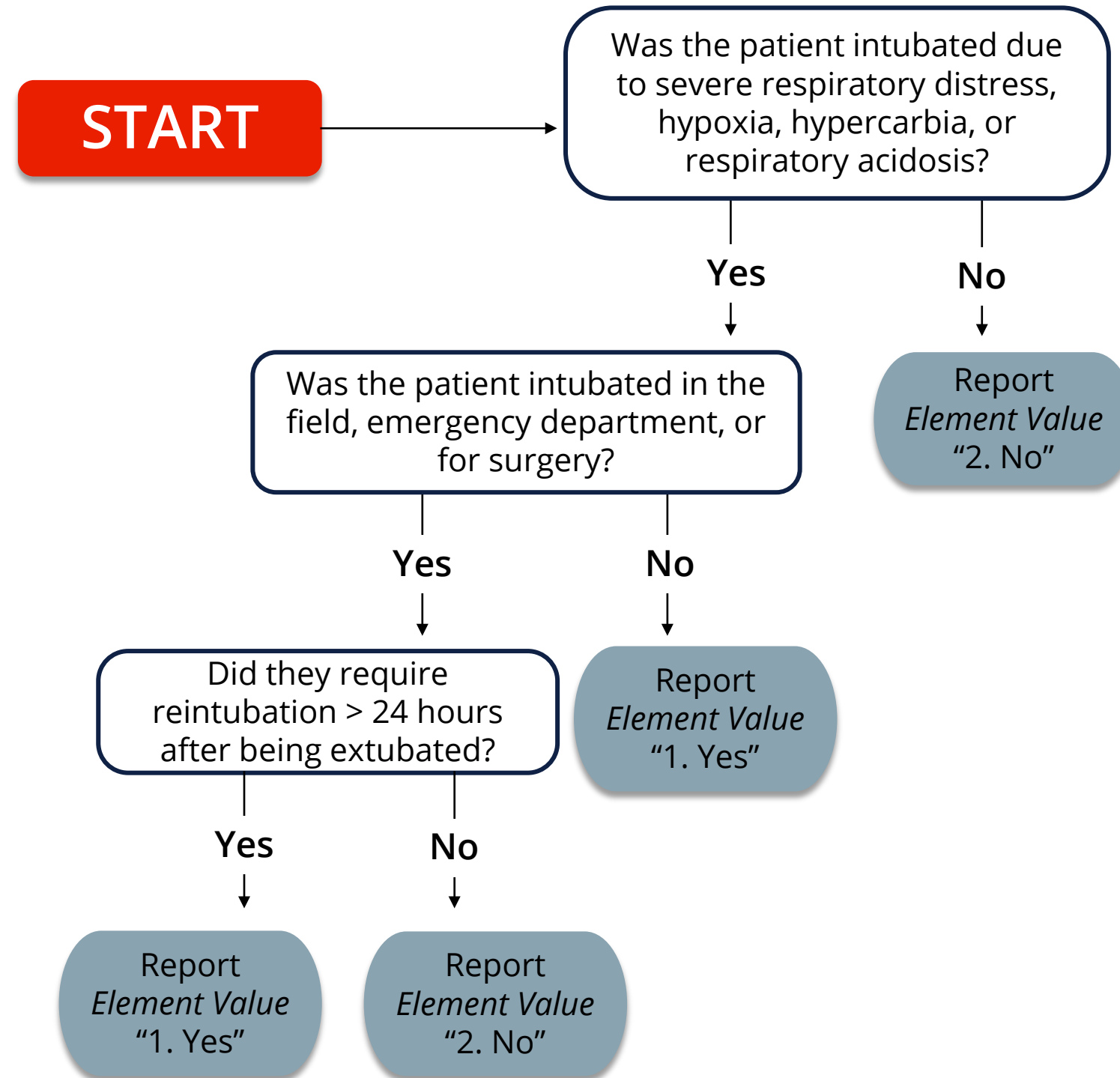
INCLUDE: Patients who required ICU care due to an event that occurred during surgery or in the PACU.

Consistent with the most recent version of the 2024 NTDS Data Dictionary
Refer to complete NTDS definition for additional information



Unplanned Intubation

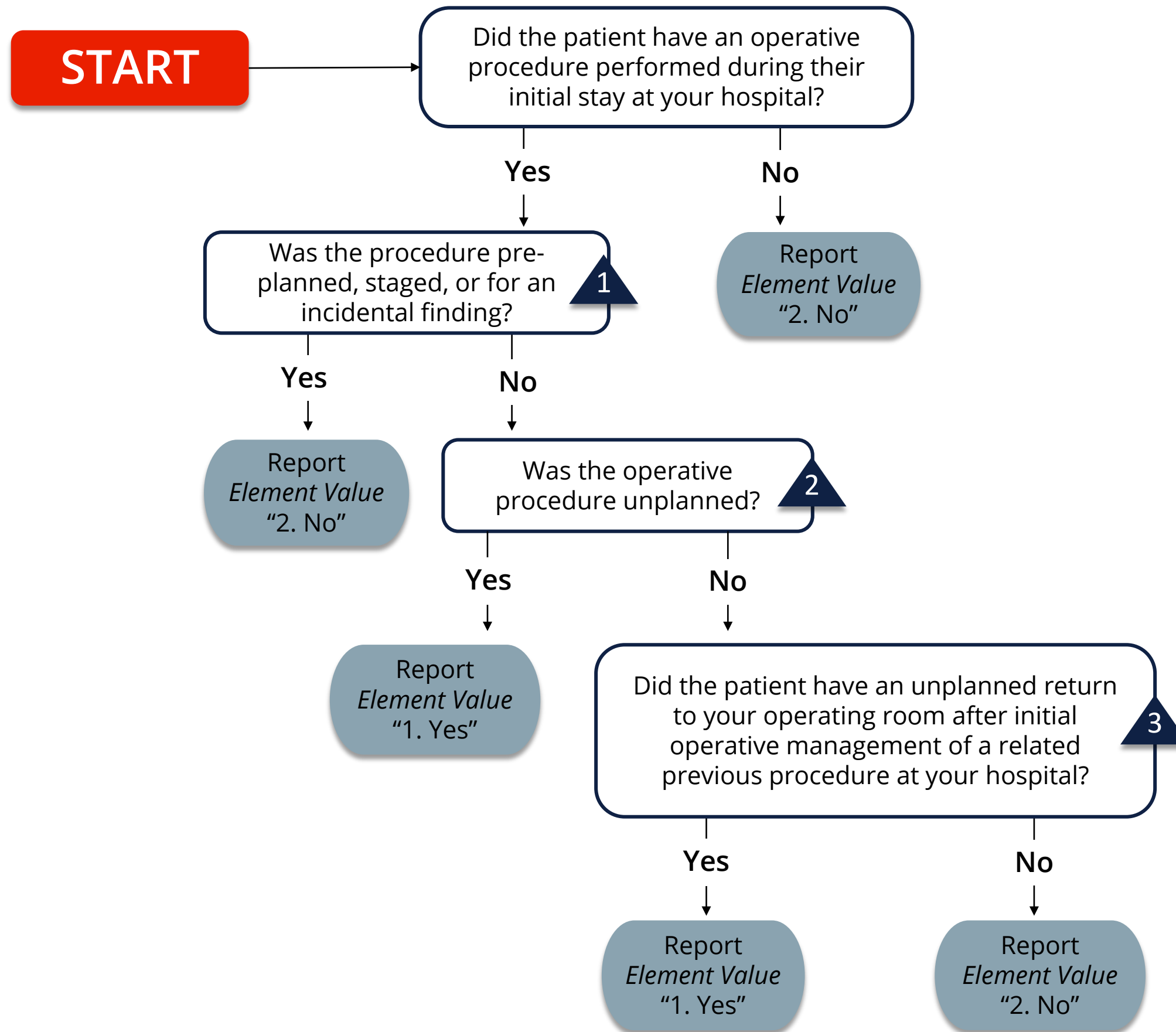
2024 NTDS Hospital Event Algorithm



Consistent with the most recent version of the 2024 NTDS Data Dictionary
Refer to complete NTDS definition for additional information

Unplanned Visit to the Operating Room

2024 NTDS Hospital Event Algorithm



A pre-planned procedure is a procedure indicated in the patient's original plan of care.



An unplanned procedure is a procedure that was not indicated in the patient's original plan of care.

EXCLUDE: Non-urgent tracheostomy and percutaneous endoscopic gastrostomy.



EXCLUDE: Operative management of related procedures performed prior to arrival at your hospital.

Consistent with the most recent version of the 2024 NTDS Data Dictionary
Refer to complete NTDS definition for additional information

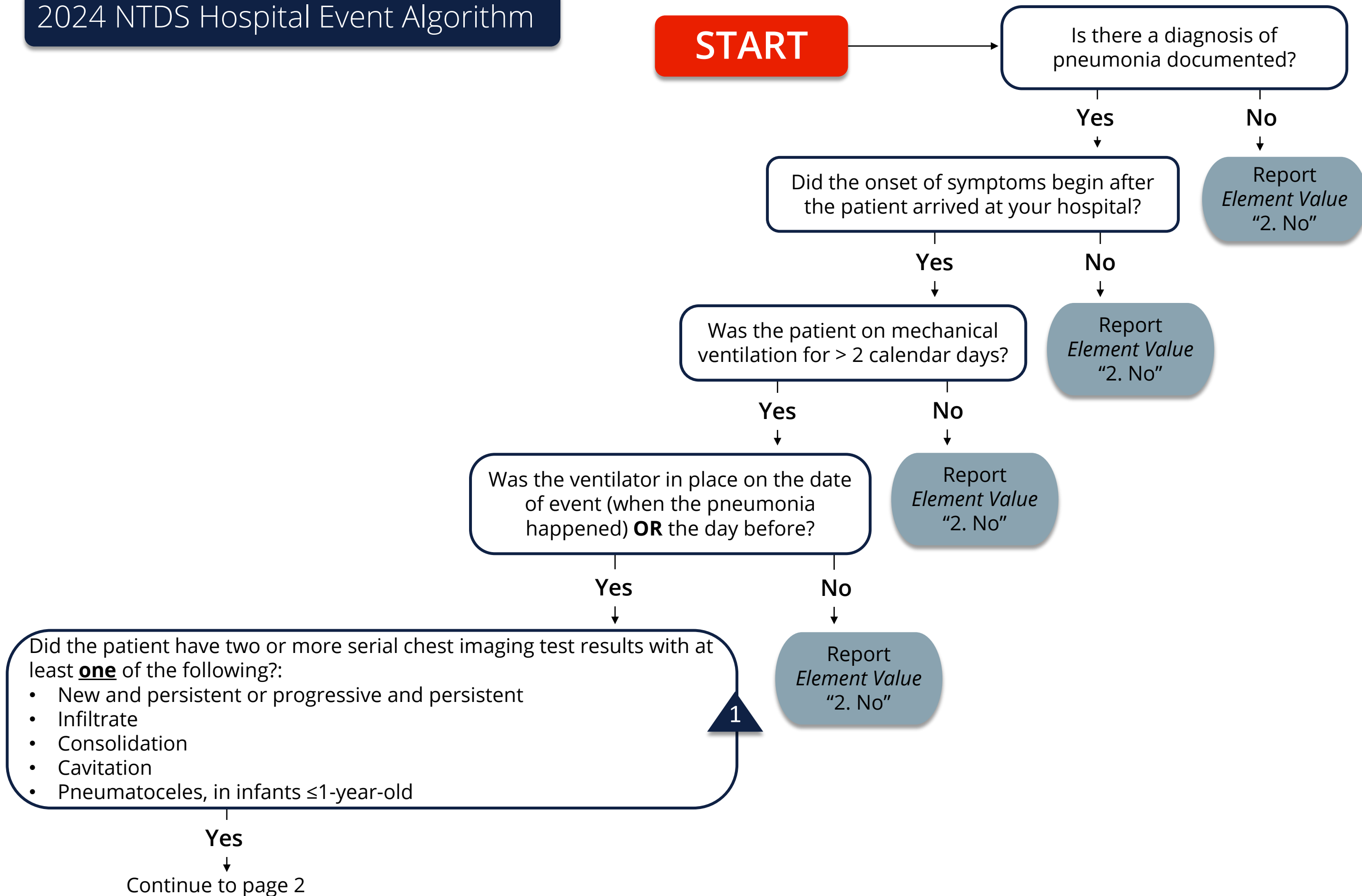


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Ventilator-Associated Pneumonia (VAP)

PNU2 Bacterial or Filamentous Fungal Pathogens (pg. 1 of 2)

2024 NTDS Hospital Event Algorithm



NOTE: In patients without underlying pulmonary or cardiac disease (for example: respiratory distress syndrome, bronchopulmonary dysplasia, pulmonary edema, or chronic obstructive pulmonary disease), one definitive chest imaging test result is acceptable.

Consistent with the most recent version of the 2024 NTDS Data Dictionary
Refer to complete NTDS definition for additional information

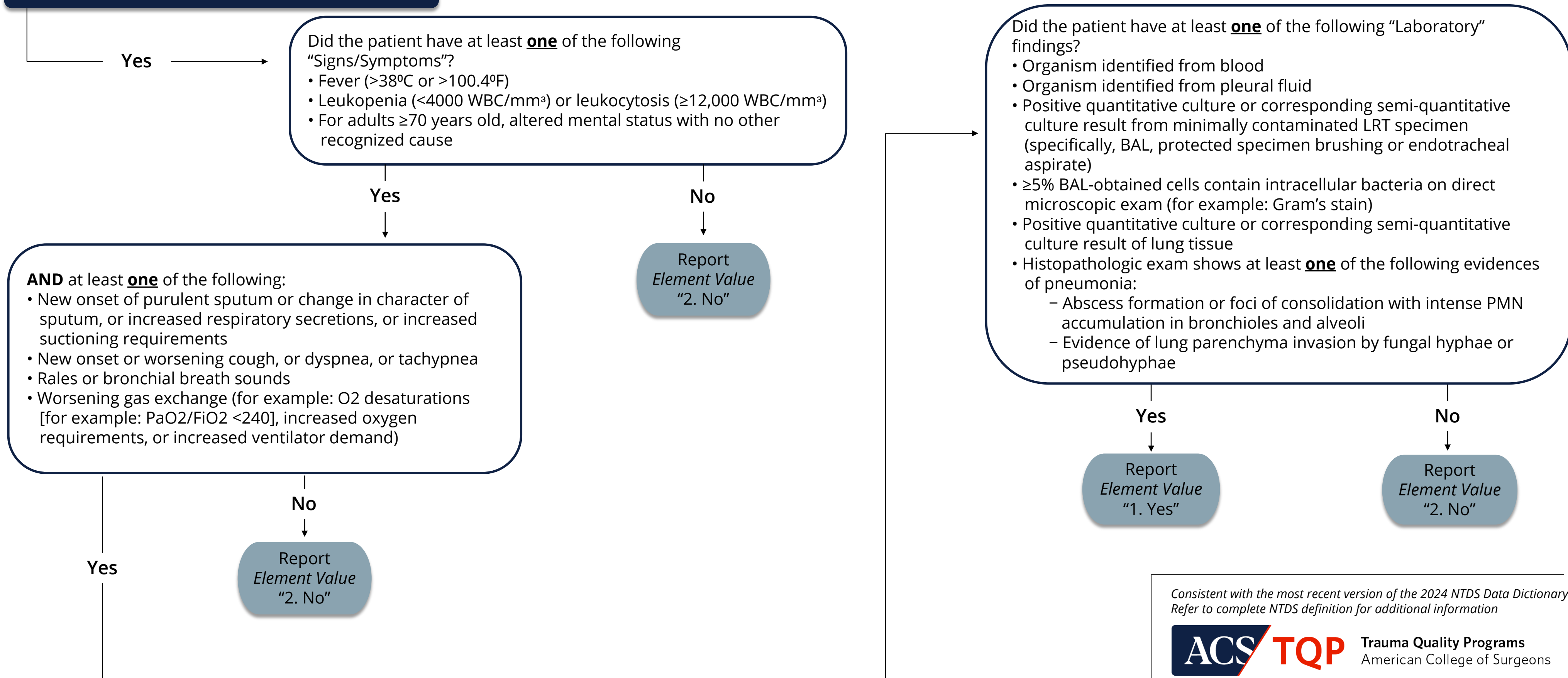


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Ventilator-Associated Pneumonia (VAP)

PNU2 Bacterial or Filamentous Fungal Pathogens (pg. 2 of 2)

2024 NTDS Hospital Event Algorithm



Consistent with the most recent version of the 2024 NTDS Data Dictionary
Refer to complete NTDS definition for additional information

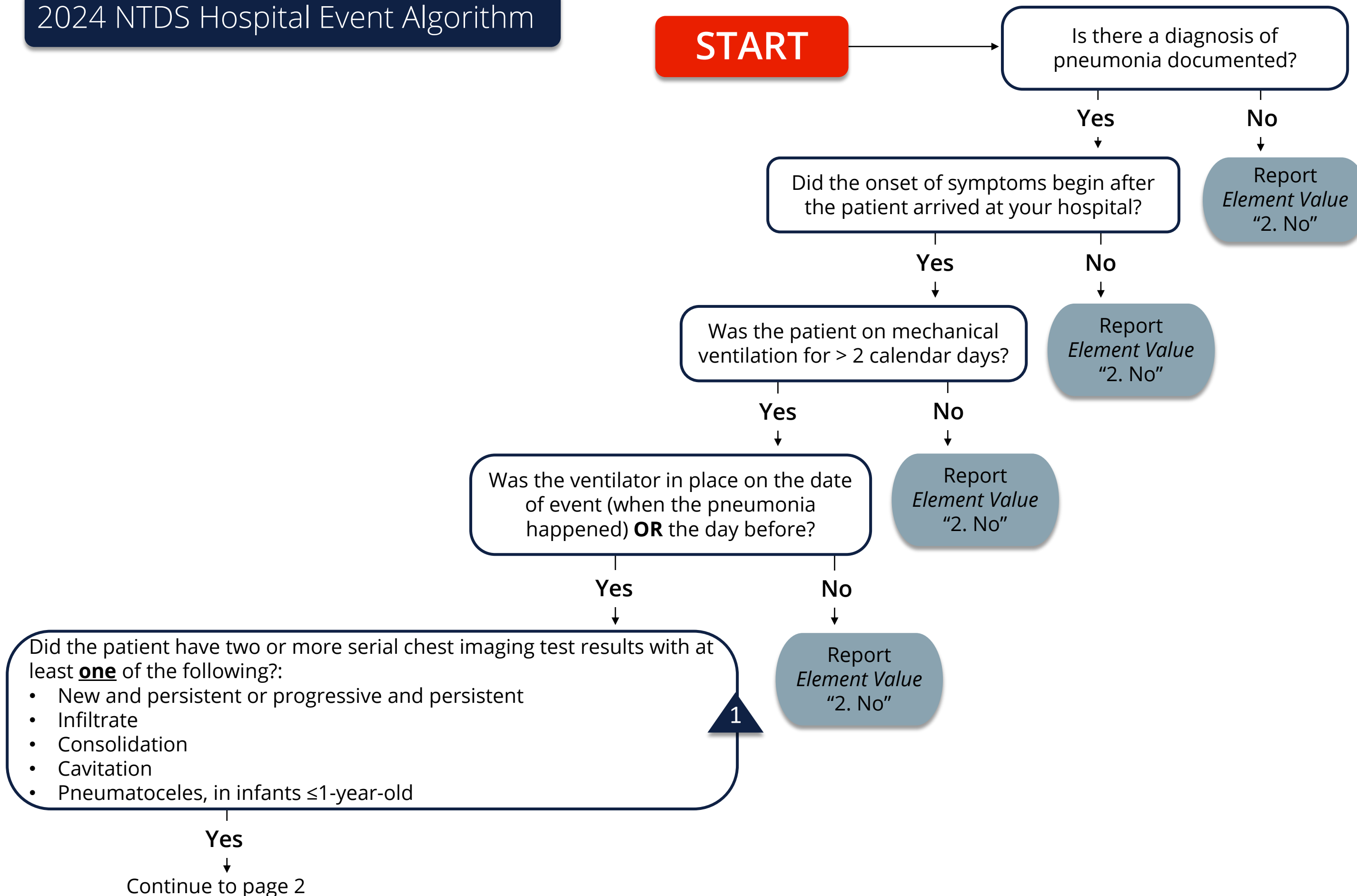
Ventilator-Associated Pneumonia (VAP)

PNU2 Viral, Legionella, and other Bacterial Pneumonias (pg. 1 of 2)

2024 NTDS Hospital Event Algorithm

1

NOTE: In patients without underlying pulmonary or cardiac disease (for example: respiratory distress syndrome, bronchopulmonary dysplasia, pulmonary edema, or chronic obstructive pulmonary disease), one definitive chest imaging test result is acceptable.

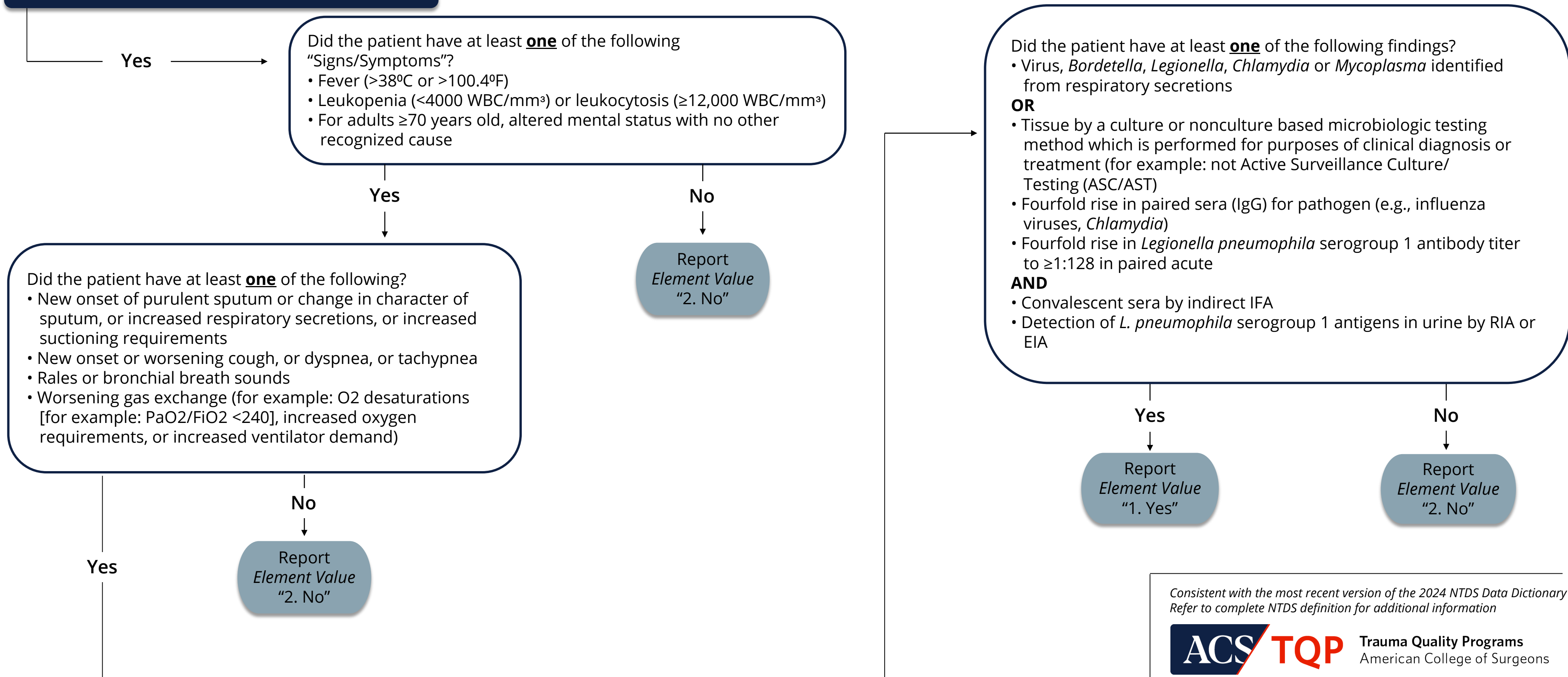


Consistent with the most recent version of the 2024 NTDS Data Dictionary
Refer to complete NTDS definition for additional information

Ventilator-Associated Pneumonia (VAP)

PNU2 Viral, Legionella, and other Bacterial Pneumonias (pg. 2 of 2)

2024 NTDS Hospital Event Algorithm



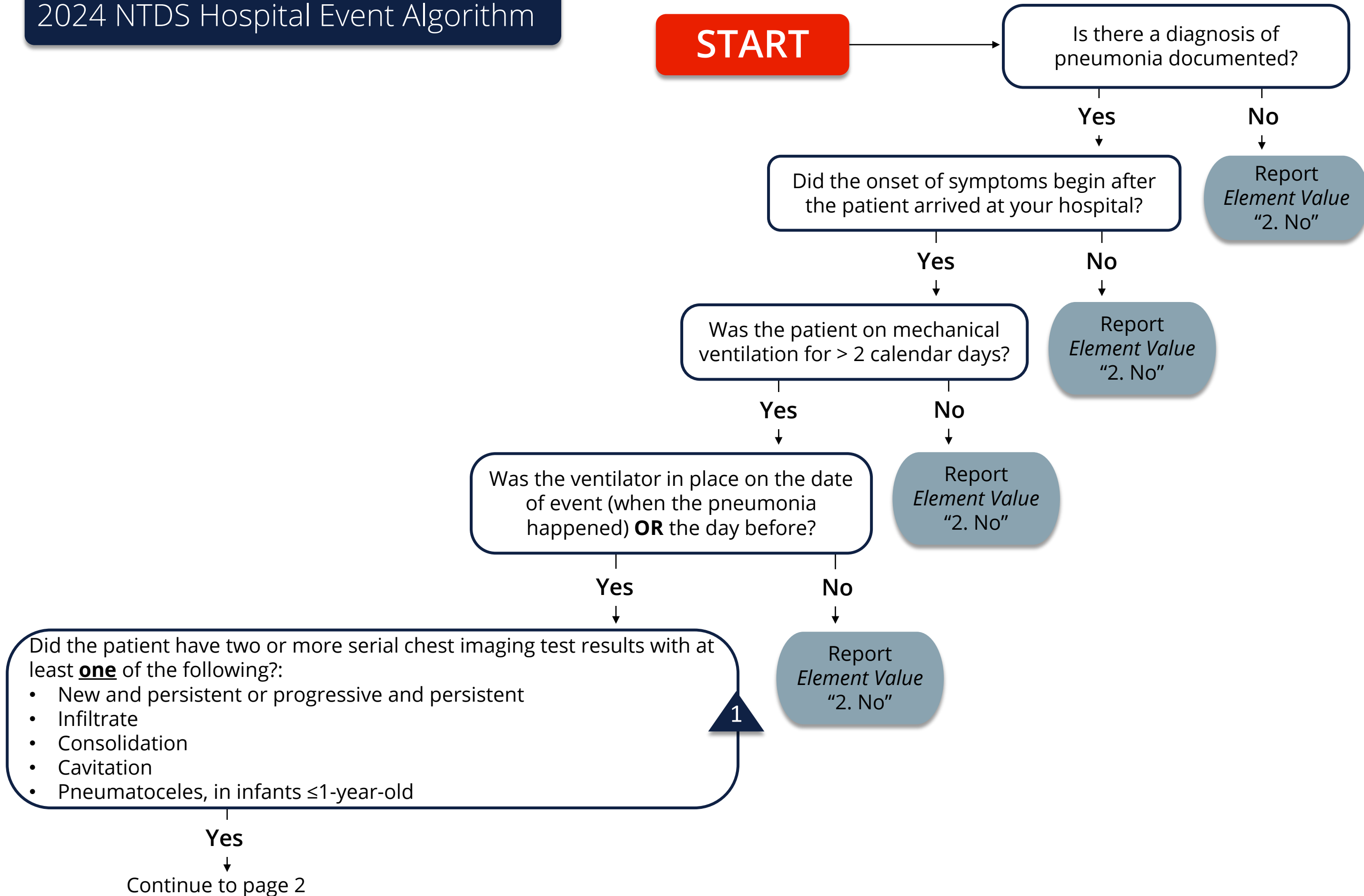
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Refer to complete NTDS definition for additional information



Ventilator-Associated Pneumonia (VAP)

PNU3 Immunocompromised Patients (pg. 1 of 2)

2024 NTDS Hospital Event Algorithm



1

NOTE: In patients without underlying pulmonary or cardiac disease (for example: respiratory distress syndrome, bronchopulmonary dysplasia, pulmonary edema, or chronic obstructive pulmonary disease), one definitive chest imaging test result is acceptable.

Consistent with the most recent version of the 2024 NTDS Data Dictionary
Refer to complete NTDS definition for additional information

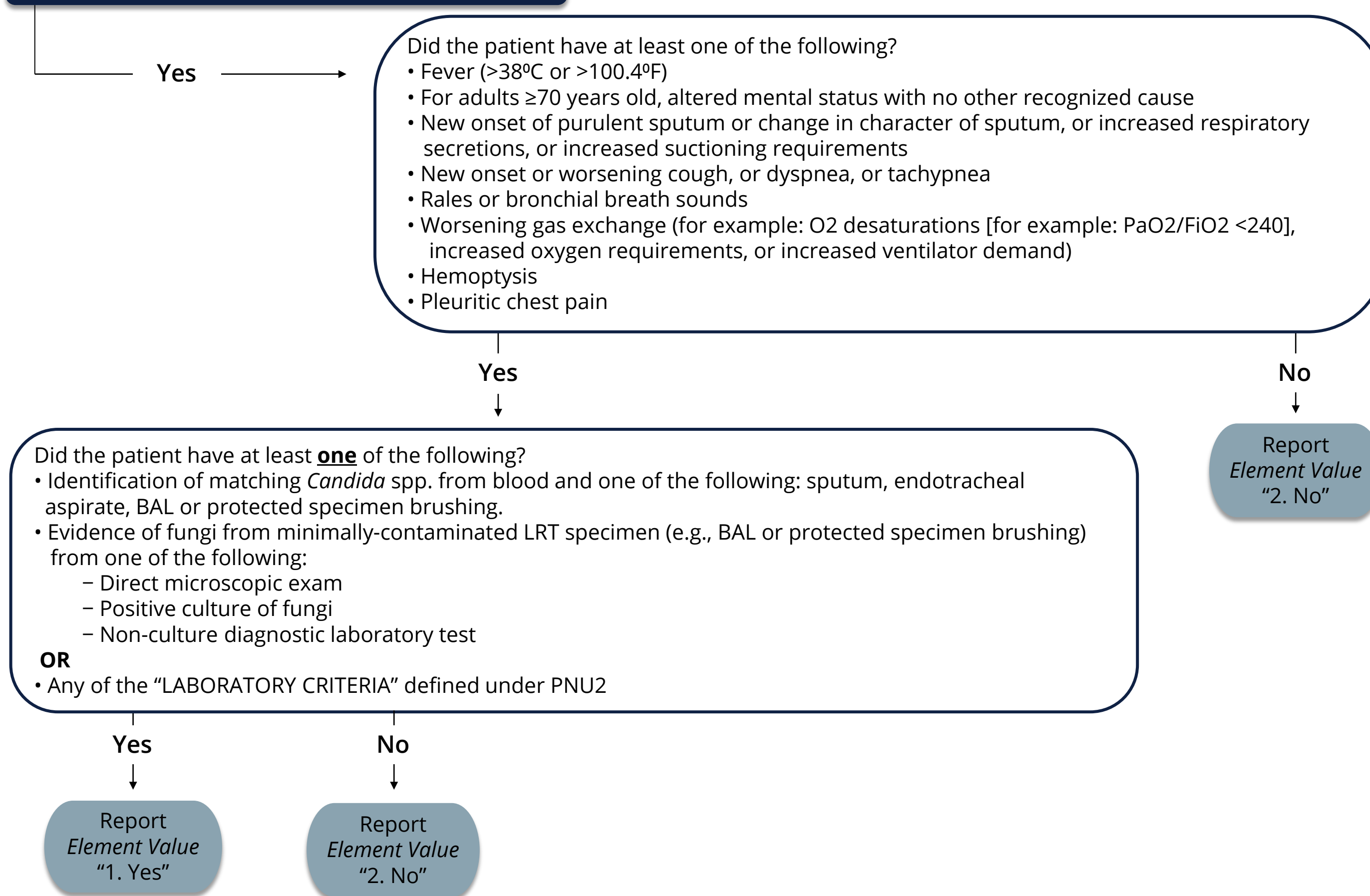


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Ventilator-Associated Pneumonia (VAP)

PNU3 Immunocompromised Patients (pg. 2 of 2)

2024 NTDS Hospital Event Algorithm

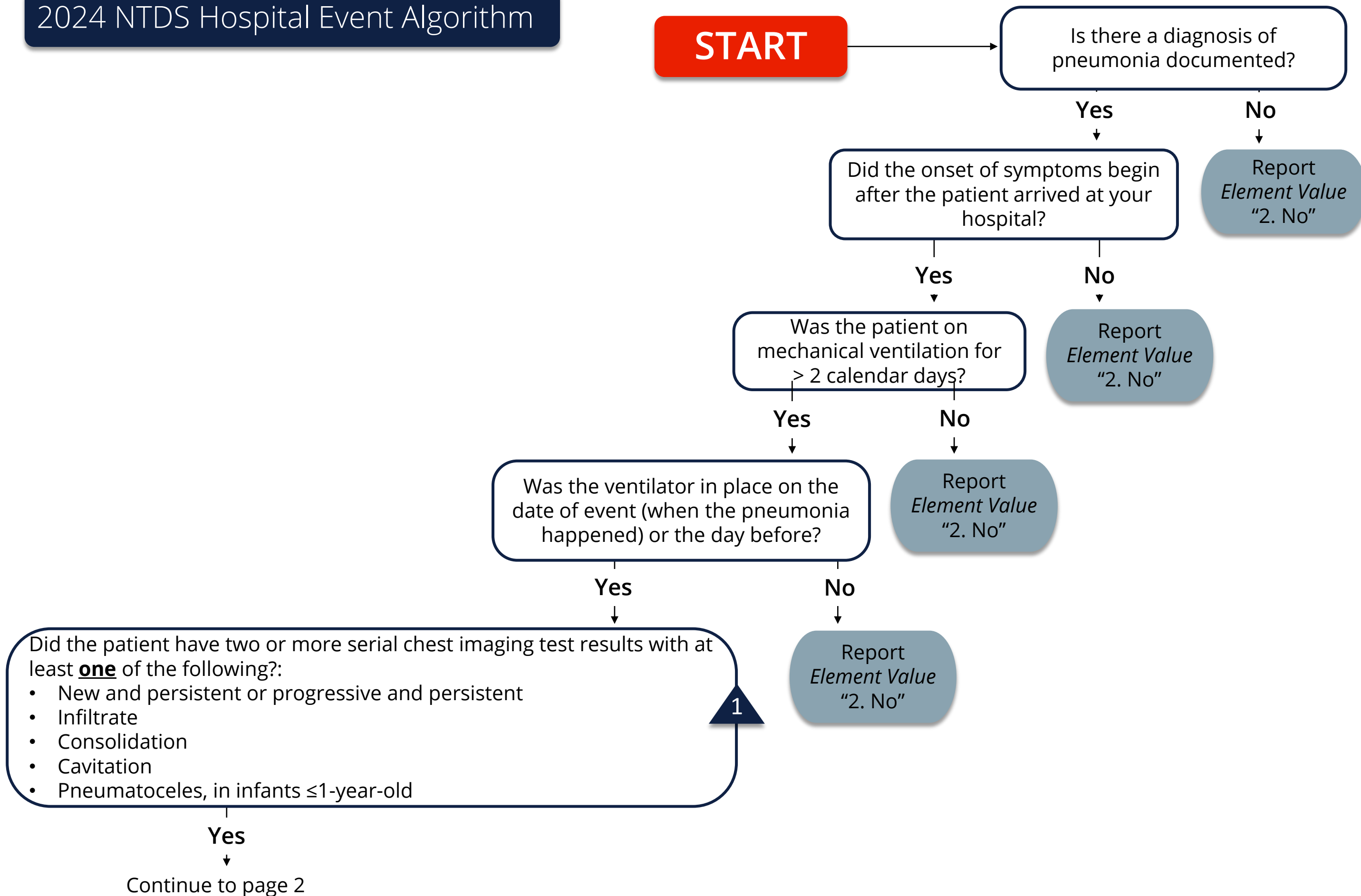


Consistent with the most recent version of the 2024 NTDS Data Dictionary
Refer to complete NTDS definition for additional information

Ventilator-Associated Pneumonia (VAP)

ALTERNATE CRITERIA (PNU1), for infants ≤ 1-year-old (pg. 1 of 2)

2024 NTDS Hospital Event Algorithm



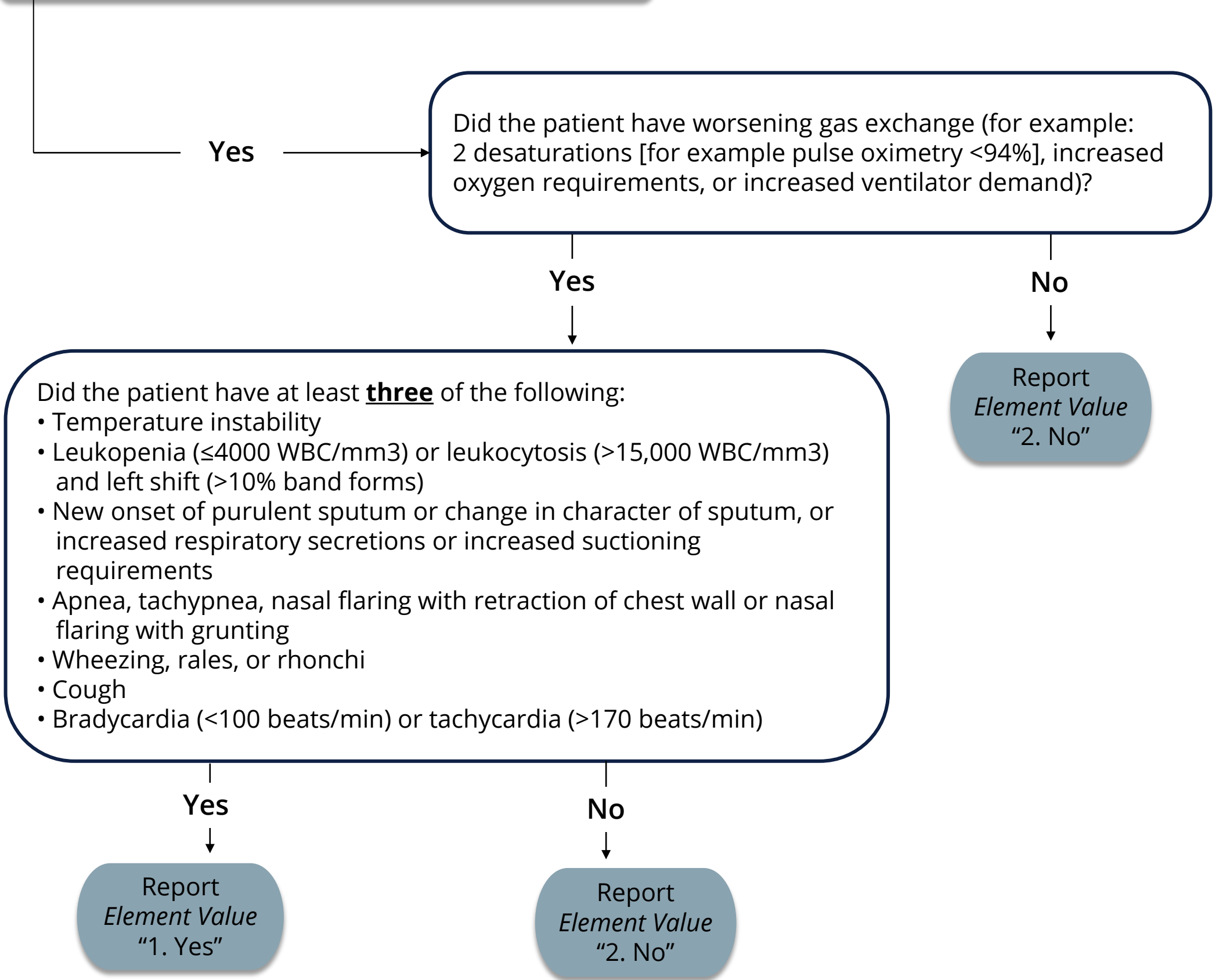
1

NOTE: In patients without underlying pulmonary or cardiac disease (for example: respiratory distress syndrome, bronchopulmonary dysplasia, pulmonary edema, or chronic obstructive pulmonary disease), one definitive chest imaging test result is acceptable

Consistent with the most recent version of the 2024 NTDS Data Dictionary
Refer to complete NTDS definition for additional information

Ventilator-Associated Pneumonia (VAP) ALTERNATE CRITERIA (PNU1), for infants ≤ 1-year-old (pg. 2 of 2)

2024 NTDS Hospital Event Algorithm



Consistent with the most recent version of the 2024 NTDS Data Dictionary
Refer to complete NTDS definition for additional information

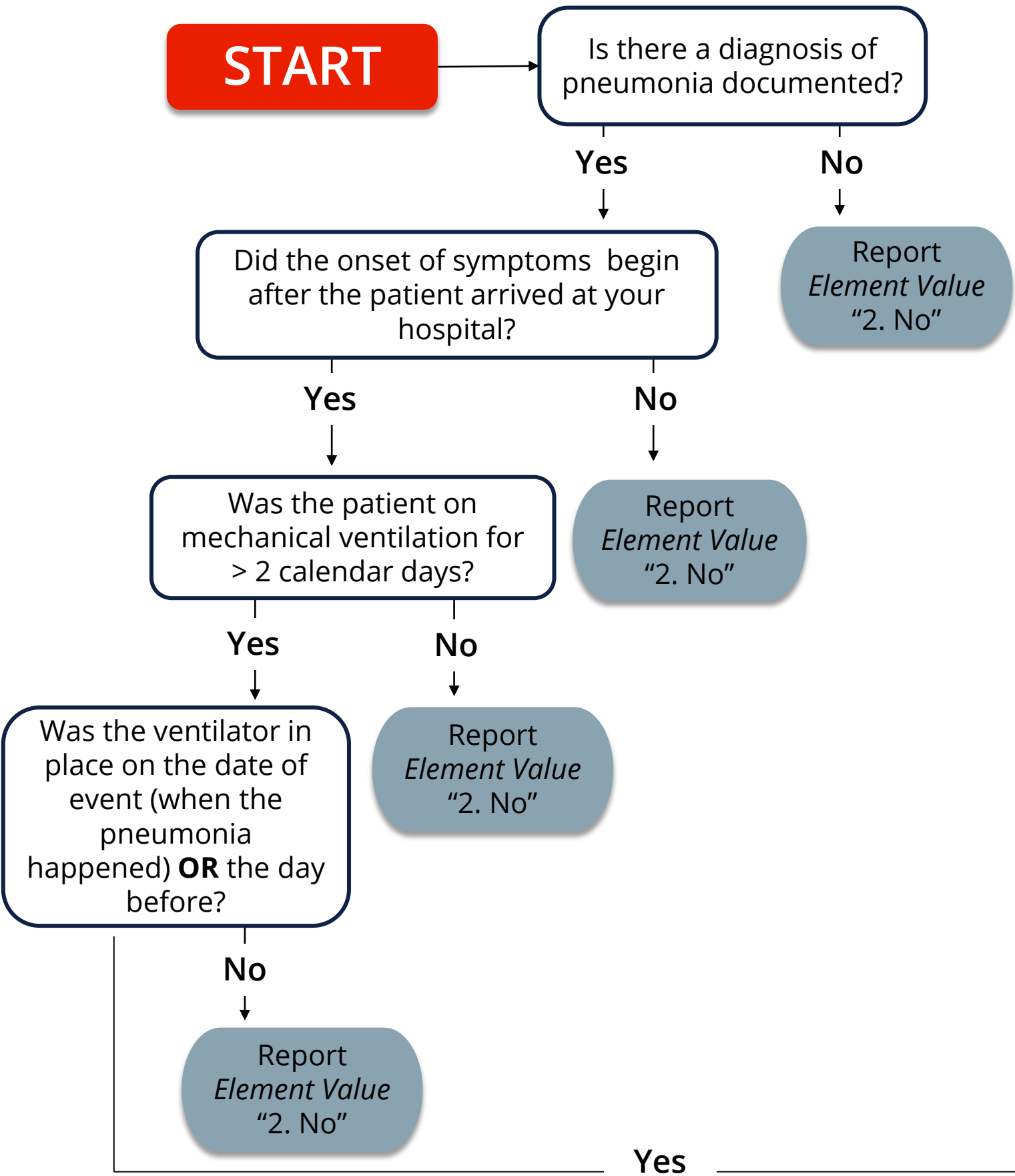


Ventilator-Associated Pneumonia (VAP) ALTERNATE CRITERIA (PNU1), for children > 1-year-old or ≤ 12-years-old

2024 NTDS Hospital Event Algorithm

1

NOTE: In patients without underlying pulmonary or cardiac disease (for example: respiratory distress syndrome, bronchopulmonary dysplasia, pulmonary edema, or chronic obstructive pulmonary disease), one definitive chest imaging test result is acceptable.



Did the patient have two or more serial chest imaging test results with at least **one** of the following?

- New and persistent or progressive and persistent
- Infiltrate
- Consolidation
- Cavitation
- Pneumatocoles, in infants ≤1-year-old

Yes

No

ALTERNATE CRITERIA, for child >1 year old or ≤12 years old:
Did the patient have at least **three** of the following:

- Fever (>38. 0°C or >100. 4°F) or hypothermia (<36. 0°C or <96. 8°F)
- Leukopenia (≤4000 WBC/mm3) or leukocytosis (≥15,000 WBC/mm3)
- New onset of purulent sputum or change in character of sputum, or increased respiratory secretions, or increased suctioning requirements
- New onset or worsening cough, or dyspnea, apnea, or tachypnea
- Rales or bronchial breath sounds
- Worsening gas exchange (for example: O2 desaturations [for example pulse oximetry <94%], increased oxygen requirements, or increased ventilator demand)

Yes

No

Report Element Value "1. Yes"

Report Element Value "2. No"

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