

Attachment I. Estimates of Annualized Burden Hours and Cost

Table A. Estimated national annual burden in number of hours to collect and report data, by form for existing NHSN forms

Form Letter and Title	No. of Respondents		No. of Responses/ Respondent		Total No. of Responses		Average Burden/ Response		Total Burden (hrs)		
	2004	2007	Annually 2004	Annually 2007	2004	2007	2004	2007	2004	2007	Increase
R Facility Contact Information	350	1,500	1	1	350	1,500	10/60	10/60	58	250	192
S Patient Safety Component Annual Facility Survey	350	1,500	1	1	350	1,500	30/60	30/60	175	750	575
T Agreement to Participate and Consent	350	1,500	1	1	350	1,500	15/60	15/60	88	375	287
U Group Contact Information	350	1,500	1	1	350	1,500	5/60	5/60	29	125	96
A Patient Safety Monthly Reporting Plan	350	1,500	9	9	3,150	13,500	25/60	35/60	1,312	7,875	6,563
B Healthcare Personnel Safety Reporting Plan	90	150	2	9	180	1,350	10/60	10/60	30	225	195
C Patient Data*	-	-	-	-	-	-	-	-	-	-	-
D Primary Bloodstream Infection (BSI)**	200	1,500	36	36	7,200	54,000	25/60	30/60	3,000	27,000	24,000
G Pneumonia (PNEU) (Includes decision algorithms: Ga Any Patient - Pneumonia Flow Diagram Gb Infant and Children - Pneumonia Flow Diagram)	200	1,500	72	72	14,400	108,000	25/60	30/60	6,000	54,000	48,000
H Urinary Tract Infection (UTI)	200	1,500	27	27	5,400	40,500	25/60	30/60	2,250	20,250	18,000
N Surgical Site Infection (SSI)	200	1,500	27	27	5,400	40,500	25/60	30/60	2,250	20,250	18,000
E Dialysis Event	80	80	90	200	200	16,000	12/60	15/60	1,440	4,000	2,560
I Custom Event (not reported to CDC)	-	-	-	-	-	-	-	-	-	-	-
P Antimicrobial	20	1,500	45	45	900	67,500	3	3	2,700	202,500	199,800

Form Letter and Title	No. of Respondents		No. of Responses/ Respondent		Total No. of Responses Annually		Average Burden/ Response (hrs)		Total Burden (hrs)		
	2004	2007	2004	2007	2004	2007	2004	2007	2004	2007	Increase
Use and Resistance (AUR) – Microbiology Laboratory Data**		00				0				00	00
Q Antimicrobial Use and Resistance (AUR) – Pharmacy Data**	20	1,500	36	36	720	54,000	2	2	1,440	108,000	106,560
L Denominators for Intensive Care Unit (ICU)/Other locations (Not NICU or SCA)	245	1,500	18	18	4,410	27,000	5	5	22,050	135,000	112,950
K Denominators for Specialty Care Area (SCA)	75	1,500	9	9	675	13,500	5	5	3,375	67,500	64,125
J Denominators for Neonatal Intensive Care Unit (NICU)	100	1,500	9	9	900	13,500	4	4	3,600	54,000	50,400
O Denominator for Procedure	200	1,500	54	54	108,000	810,000	5/6	8/60	9,000	108,000	99,000
F Dialysis Log Form (not reported to CDC)	-	-	-	-	-	-	-	-	-	-	-
M Denominators for Outpatient Dialysis	80	80	9	9	720	720	5/6	5/60	60	60	0
BB Dialysis Survey	80	80	1	1	80	80	1	1	80	80	0
CC List of Blood Isolates+	350	1,500	1	1	350	1,500	1	1	350	1,500	1,150
DD Manual Categorization of Positive Blood Cultures+	350	1,500	1	1	350	1,500	1	1	350	1,500	1,150
V Exposure to Blood/Body Fluids	90	150	42	50	3,780	7,500	1	1	3,780	7,500	3,720
W Healthcare Worker Postexposure Prophylaxis	90	150	6	10	540	1,500	15/60	15/60	135	375	240
X Healthcare Worker Demographic Data	90	150	42	20	3,780	30,000	10/60	20/60	630	10,000	9,370
Y Healthcare Worker	90	150	42	30	3,780	45,000	15/60	10/60	945	7,500	6,555

Form Letter and Title	No. of Respondents		No. of Responses/ Respondent		Total No. of Responses Annually		Average Burden/ Response (hrs)		Total Burden (hrs)			
	2004	2007	2004	2007	2004	2007	2004	2007	2004	2007	Increase	
Vaccination History												
Za Healthcare Personnel Safety Component Facility Survey	90	150	1	1	90	150	5.5	8	495	1,200	705	
Z Implementation of Engineering (safety devices) Controls for Sharps Injury Prevention	90	150	1	1	90	150	30/60	30/60	45	75	30	
AA Healthcare Worker Survey	90	150	10	10	900	15,000	10/60	10/60	150	2,500	2,350	
EE Denominator for Custom Procedure	-	-	-	-	-	-	-	-	-	-	-	
Total									65,817	842,390	776,573	

*Data on Patient Data Form (Form C) are entered as part of an, therefore the burden of these are included under each event form's burden estimate.

**Burden will be eliminated when reporting these data once an NHSN institution implements electronic data capture.

+Burden during validation phase only, then eliminated.

Table B. Estimated national annual burden in number of hours to collect and report data, by form for proposed new NHSN forms

Form Letter and Title	No. of Respondents	No. of Responses/ Respondent Annually	Total No. of Responses Annually	Average Burden/ Response (hrs)	Total Burden (hrs)
FF Healthcare Worker Influenza Vaccination	150	500	75,000	10/60	12,500
GG Healthcare Worker Influenza Antiviral Medication Administration	150	50	7,500	10/60	1,250
HH Pre-season Survey on Influenza Vaccination Programs for Healthcare Personnel	150	1	150	10/60	25
II Post-season Survey on Influenza Vaccination Programs for Healthcare Personnel	150	1	150	10/60	25
JJ Central Line Insertion Practices Adherence Monitoring Form	1,500	100	150,000	5/60	12,500
KK Laboratory Testing	150	100	15,000	15/60	3,750
LL Multidrug Resistant Organism Prevention Process and Outcome Measures Monthly Monitoring Form	1,500	24	36,000	10/60	6,000
MM MDRO Infection Event	1,500	72	108,000	30/60	54,000
NN Laboratory-identified MDRO Event	1,500	240	360,000	30/60	180,000
OO NHSN Registration Form	1,500	1	1,500	5/60	125
PP High Risk Inpatient Influenza Vaccination Monthly Monitoring Form - Method A	1,500	5	7,500	16	120,000
QQ High Risk Inpatient Influenza Vaccination Numerator Data Form - Method B	500	250	125,000	10/60	20,833
RR High Risk Inpatient Influenza Vaccination Monthly Monitoring Form - Method B	500	5	2,500	4	10,000
SS High Risk Inpatient Influenza Vaccination Denominator Data Form - Method B	500	250	125,000	5/60	10,417
TT Laboratory-identified MDRO Event Summary Form	1,500	3	4,500	1	4,500
VV High Risk Inpatient Influenza Vaccination Standing Orders Form - Optional (not reported to CDC)*	-	-	-	-	-
					435,925

*The Standing Orders Form (VV) is an optional form that may be used in NHSN, but is not required as part of the Patient Influenza High Risk Inpatient Influenza Vaccine Module

Table C. Estimated national annual cost burden to collect and report data by form, for existing NHSN forms

The average salaries of the professional disciplines most frequently involved in performing surveillance have been used in the calculations and they are based on data from the Department of Labor, Bureau of Labor Statistics. All costs related to salary are the hourly salary in 2005 by occupation adjusted 4% annually for inflation. The disciplines currently most often involved in hospital-associated infections surveillance along with their average hourly salary in 2005 are: Infection control/occupational health professional \$34.65, staff registered nurse \$29.58, laboratory technician \$17.25, and pharmacy technician \$13.18. The estimate of the infection control/occupational health professional's salary is based on the 75th percentile of registered nurse salary because of their specialized position.

Form Letter and Title	Average Hourly Salary of Respondent		Total Burden (hrs)		Total Burden (dollars)		
	2004	2007	2004	2007	2004	2007	Increase
R Facility Contact Information	30.23	34.65	58	250	\$1,753.00	\$8,662.50	\$6,909.50
S Patient Safety Component Annual Facility Survey	30.23	34.65	175	750	\$5,290.00	\$25,987.50	\$20,697.50
T Agreement to Participate and Consent	30.23	34.65	88	375	2,660.00	\$12,993.75	\$10,333.75
U Group Contact Information	30.23	34.65	29	125	\$877.00	\$4,331.25	\$3,454.25
A Patient Safety Monthly Reporting Plan	30.23	34.65	1,312	7,875	\$39,662.00	\$272,868.75	\$233,206.75
B Healthcare Personnel Safety Reporting Plan	30.23	34.65	30	225	\$907.00	\$7,796.25	\$6,889.25
C Patient Data*	-	-	-	-	-	-	-
D Primary Bloodstream Infection (BSI)**	30.23	34.65	3,000	27,000	\$90,690.00	\$935,550.00	\$844,860
G Pneumonia (PNEU) (Includes decision algorithms: Ga Any Patient – Pneumonia Flow Diagram Gb Infants and Children – Pneumonia Flow Diagram)	30.23	34.65	6,000	54,000	\$181,380.00	\$1,871,100.00	\$1,689,720.00
H Urinary Tract Infection (UTI)	30.23	34.65	2,250	20,250	\$68,018.00	\$701,662.50	\$633,644.50
N Surgical Site Infection (SSI)	30.23	34.65	2,250	20,250	\$68,018.00	\$701,662.50	\$633,644.50
E Dialysis Event	25.24	29.58	1,440	4,000	\$36,346.00	\$118,320.00	\$81,974.00
I Custom Event (not reported to CDC)	-	-	-	-	-	-	-
P Antimicrobial Use and Resistance (AUR) – Microbiology Laboratory Data**	15.58	17.25	2,700	202,500	\$42,066.00	\$3,493,125.00	\$3,451,059.00
Q Antimicrobial Use and Resistance (AUR) –	11.70	13.18	1,440	108,000	\$16,848.00	\$1,423,440.00	\$1,406,592.00

Pharmacy Data**								
L Denominators for Intensive Care Unit (ICU)/Other locations (Not NICU or SCA)	25.24	29.58	22,050	135,000	\$556,542.00	\$3,993,300.00	\$3,436,758.00	
K Denominators for Specialty Care Area (SCA)	25.24	29.58	3,375	67,500	\$85,185.00	\$1,996,650.00	\$1,911,465.00	
J Denominators for Neonatal Intensive Care Unit (NICU)	25.24	29.58	3,600	54,000	\$90,864.00	\$1,597,320.00	\$1,506,456.00	
O Denominator for Procedure	25.24	29.58	9,000	108,000	\$227,160.00	\$3,194,640.00	\$2,967,480.00	
F Dialysis Log Form (not reported to CDC)	-	-	-	-	-	-	-	
M Denominators for Outpatient Dialysis	25.24	29.58	60	60	\$1,514.00	\$1,774.80	\$260.80	
BB Dialysis Survey	30.23	34.65	80	80	\$2,418.00	\$2,772.00	\$354.00	
CC List of Blood Isolates+	30.23	34.65	350	1,500	\$10,581.00	\$51,975.00	\$41,394.00	
DD Manual Categorization of Positive Blood Cultures+	30.23	34.65	350	1,500	\$10,581.00	\$51,975.00	\$41,394.00	
V Exposure to Blood/Body Fluids	30.23	34.65	3,780	7,500	\$114,269.00	\$259,875.00	\$145,606.00	
W Healthcare Worker Postexposure Prophylaxis	30.23	34.65	135	375	\$4,081.00	\$12,993.75	\$8,912.75	
X Healthcare Worker Demographic Data	30.23	34.65	630	10,000	\$19,045.00	\$346,500.00	\$327,455.00	
Y Healthcare Worker Vaccination History	30.23	34.65	945	7,500	\$28,567.00	\$259,875.00	\$231,308.00	
Za Healthcare Personnel Safety Component Facility Survey	30.23	34.65	495	1,200	\$14,964.00	\$41,580.00	\$26,616.00	
Z Implementation of Engineering (safety devices) Controls for Sharps Injury Prevention	30.23	29.58	45	75	\$1,360.00	\$2,218.50	\$858.50	
AA Healthcare Worker Survey	23.13	34.65	150	2,500	\$3,470.00	\$86,625.00	\$83,155.00	
EE Denominator for Custom Procedure	-	-	-	-	-	-	-	
Total					\$1,725,116.00	\$21,477,574.05	\$19,752,458.05	

*Data on Patient Data Form (Form C) are entered as part of an event therefore, the burden of these are included under each event form's burden estimate.

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+Burden during validation phase only, then eliminated.

Table D. Estimated national annual cost burden to collect and report data by form, for new NHSN forms

The average salaries of the professional disciplines most frequently involved in performing surveillance have been used in the calculations and they are based on data from the Department of Labor, Bureau of Labor Statistics. All costs related to salary are the hourly salary in 2005 by occupation adjusted 4% annually for inflation. The disciplines currently most often involved in hospital-associated infections surveillance along with their average hourly salary in 2005 are: Infection control/occupational health professional \$34.65, staff registered nurse \$29.58, laboratory technician \$17.25, and pharmacy technician \$13.18. The estimate of the infection control/occupational health professional's salary is based on the 75th percentile of registered nurse salary because of their specialized position.

Form Letter and Title	Average Hourly Salary of Respondent	Total Burden (hrs)	Total Burden (dollars)
FF Healthcare Worker Influenza Vaccination	34.65	12,500	\$433,125.00
GG Healthcare Worker Influenza Antiviral Medication Administration	34.65	1,250	\$43,312.50
HH Pre-season Survey on Influenza Vaccination Programs for Healthcare Personnel	34.65	25	\$866.25
II Post-season Survey on Influenza Vaccination Programs for Healthcare Personnel	34.65	25	\$866.25
JJ Central Line Insertion Practices Adherence Monitoring Form	34.65	12,500	\$433,125.00
KK Laboratory Testing	17.25	3,750	\$64,687.50
LL Multidrug-Resistant Organism Prevention Process and Outcome Measures Monthly Monitoring Form	34.65	6,000	\$207,900.00
MM MDRO Infection Event	34.65	54,000	\$1,871,100.00
NN Laboratory-identified MDRO Event	34.65	180,000	\$6,237,000.00
OO NHSN Registration Form	34.65	125	\$4,331.25
PP High Risk Inpatient Influenza Vaccination Monthly Monitoring Form - Method A	34.65	120,000	\$4,158,000.00
QQ High Risk Inpatient Influenza Vaccination Numerator Data Form - Method B	34.65	20,833	\$721,863.45
RR High Risk Inpatient Influenza Vaccination Monthly Monitoring Form - Method B	34.65	10,000	\$346,500.00
SS High Risk Inpatient Influenza Vaccination Denominator Data Form - Method B	34.65	10,417	\$360,949.05
TT Laboratory-identified MDRO Event Summary Form	34.65	4,500	\$155,925.00
VV High Risk Inpatient Influenza Vaccination Standing Orders Form – Optional (not reported to CDC)	-	-	-
		435,925	\$15,039,551.25

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