

## $\begin{tabular}{ll} Table~XX~.~Instructions~for~Completion~of~the~MDRO~and~CDI\\ Prevention~Process~and~Outcome~Measures~Monthly~Monitoring~form \end{tabular}$

(CDC 57.139) (Tables of Instructions List)

| Data Field                        | Instructions for Form Completion   |
|-----------------------------------|--|
| Facility ID                       | The NHSN-assigned facility ID number will be auto-entered by the computer  |
| Month                             | Required. Enter the 2-digit month during which surveillance was performed.   |
| Year                              | Required. Enter the 4-digit year during which surveillance was performed.  |
| Location<br>Code                  | <i>Required</i> . Enter the code of the resident care location where the outcome measures monitoring was done.   |
| Process Measures: Hand Hygiene    |  |
| Performed                         | Conditionally required, if enrolled in hand hygiene adherence process measures.  Enter the total number of observed contacts during which a healthcare worker touched either the resident or inanimate objects in the immediate vicinity of the resident and appropriate hand hygiene was performed (i.e., Hand Hygiene Performed).  |
| Indicated                         | Conditionally required, if enrolled in hand hygiene adherence process measures.  Enter the total number of observed contacts during which a healthcare worker touched either the resident or inanimate objects in the immediate vicinity of the resident and therefore, appropriate hand hygiene was <a href="indicated">indicated</a> (i.e., Hand Hygiene Indicated).             |
| Process Measures: Gown and Gloves |  |
| Used                              | Conditionally required, if enrolled in gown and gloves use adherence process measures.  Among patients on Contact Precautions, enter the total number of observed contacts between a healthcare worker and a resident or inanimate objects in the immediate vicinity of the resident for which gloves and gowns had been donned prior to the contact (i.e., Gown and Gloves Used). |
| Indicated                         | Conditionally required, if enrolled in gown and gloves use adherence process measures.  Among patients on Contact Precautions, enter the total number of observed contacts between a healthcare worker and a resident or inanimate objects in the immediate vicinity of the resident and therefore, gloves and gowns were <u>indicated</u> (i.e., Gown and Gloves Indicated).      |
| Custom Fields                     |  |
| Labels                            | <i>Optional</i> . Up to two date fields, 2 numeric and 10 alphanumeric fields that may be customized for local use. <b>NOTE:</b> Each Custom Field must be set up in the Facility/Custom Options section of the application before the field can be selected for use.  |
| Comments                          | Optional.  |