

Revision of Estimated Annual Burden Hours

Form Number	Form Name	Number of Respondents (Annual)		Responses per Respondent (Annual)		Burden per Response (Hours)		Total Annual Burden (Hours)		Change in Burden (Hours)
		07/2012	06/2013	07/2012	06/2013	07/2012	06/2013	07/2012	06/2013	
57.100	NHSN Registration Form	2,000	2,000	1	1	5/60	5/60	167	167	0
57.101	Facility Contact Information	2,000	2,000	1	1	10/60	10/60	333	333	0
57.103	Patient Safety Component--Annual Hospital Survey	6,000	6,000	1	1	30/60	30/60	3,000	3,000	0
57.105	Group Contact Information	6,000	6,000	1	1	5/60	5/60	500	500	0
57.106	Patient Safety Monthly Reporting Plan	10,000	6,000	12	12	35/60	35/60	70,000	42,000	(28,000)
57.108	Primary Bloodstream Infection (BSI)	6,000	6,000	36	36	35/60	32/60	126,000	115,200	(10,800)
57.111	Pneumonia (PNEU)	6,000	6,000	72	72	32/60	29/60	230,400	208,800	(21,600)
57.112	Ventilator-Associated Event	6,000	6,000	144	144	25/60	22/60	360,000	316,800	(43,200)
57.114	Urinary Tract Infection (UTI)	6,000	6,000	27	27	32/60	29/60	86,400	78,300	(8,100)
57.116	Denominators for Neonatal Intensive Care Unit (NICU)	6,000	6,000	9	9	3	3	162,000	162,000	0
57.117	Denominators for Specialty Care Area (SCA)/Oncology (ONC)	6,000	6,000	9	9	5	5	270,000	270,000	0
57.118	Denominators for Intensive Care Unit (ICU)/Other locations (not NICU or SCA)	6,000	6,000	18	54	5	5	540,000	1,620,000	1,080,000
57.120	Surgical Site Infection (SSI)	6,000	6,000	36	36	32/60	29/60	115,200	104,400	(10,800)
57.121	Denominator for Procedure	6,000	6,000	540	540	5/60	5/60	270,000	270,000	0
57.123	Antimicrobial Use and Resistance (AUR)-Microbiology Data Electronic Upload Specification Tables	6,000	6,000	12	12	5/60	5/60	6,000	6,000	0
57.124	Antimicrobial Use and Resistance (AUR)-Pharmacy Data Electronic Upload Specification Tables	6,000	6,000	12	12	5/60	5/60	6,000	6,000	0
57.125	Central Line Insertion Practices Adherence Monitoring	1,000	1,000	100	100	5/60	5/60	8,333	8,333	0
57.126	MDRO or CDI Infection Form	6,000	6,000	72	72	32/60	29/60	230,400	208,800	(21,600)
57.127	MDRO and CDI Prevention Process and Outcome Measures Monthly Monitoring	6,000	6,000	24	24	10/60	12/60	24,000	28,800	4,800
57.128	Laboratory-identified MDRO or CDI Event	6,000	6,000	240	240	15/60	15/60	360,000	360,000	0
57.130	Vaccination Monthly Monitoring Form--Summary Method	6,000	100	5	5	14	14	420,000	7,000	(413,000)
57.131	Vaccination Monthly Monitoring Form--Patient-Level Method	2,000	100	5	5	2	2	20,000	1,000	(19,000)
57.133	Patient Vaccination	2,000	100	250	250	10/60	10/60	83,333	4,167	(79,167)
57.137	Long-Term Care Facility Component - Annual Facility Survey	250	250	1	1	45/60	45/60	188	188	0
57.138	Laboratory-identified MDRO or CDI Event for LTCF	250	250	8	8	15/60	15/60	500	500	0
57.139	MDRO and CDI Prevention Process Measures Monthly	250	250	12	12	5/60	5/60	250	250	0

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		07/2012	06/2013	07/2012	06/2013	07/2012	06/2013	07/2012	06/2013	
	Monitoring for LTCF									
57.140	Urinary Tract Infection (UTI) for LTCF	250	250	9	9	30/60	27/60	1,125	1,013	(113)
57.141	Monthly Reporting Plan for LTCF	250	250	12	12	5/60	5/60	250	250	0
57.142	Denominators for LTCF Locations	250	250	12	12	3	3	9,000	9,000	0
57.143	Prevention Process Measures Monthly Monitoring for LTCF	250	250	12	12	5/60	5/60	250	250	0
57.150	LTAC Annual Survey	400	400	1	1	30/60	30/60	200	200	0
57.151	Rehab Annual Survey	1,000	1,000	1	1	25/60	25/60	417	417	0
57.200	Healthcare Personnel Safety Component Annual Facility Survey	100	50	1	1	8	8	800	400	(400)
57.203	Healthcare Personnel Safety Monthly Reporting Plan	100	50	9	9	10/60	10/60	150	75	(75)
57.204	Healthcare Worker Demographic Data	100	50	200	200	20/60	20/60	6,667	3,333	(3,333)
57.205	Exposure to Blood/Body Fluids	100	50	50	50	1	1	5,000	2,500	(2,500)
57.206	Healthcare Worker Prophylaxis/Treatment	100	50	30	30	15/60	15/60	750	375	(375)
57.207	Follow-Up Laboratory Testing	100	50	50	50	15/60	15/60	1,250	625	(625)
57.210	Healthcare Worker Prophylaxis/Treatment-Influenza	600	50	50	50	10/60	10/60	5,000	417	(4,583)
57.300	Hemovigilance Module Annual Survey	500	500	1	1	2	2	1,000	1,000	0
57.301	Hemovigilance Module Monthly Reporting Plan	500	500	12	12	2/60	1/60	200	100	(100)
57.303	Hemovigilance Module Monthly Reporting Denominators	500	500	12	12	30/60	1	3,000	6,000	(3,000)
57.304	Hemovigilance Adverse Reaction	500	500	120	48	10/60	15/60	10,000	6,000	(4,000)
57.305	Hemovigilance Incident	500	500	72	12	10/60	10/60	6,000	1,000	(5,000)
57.400	Outpatient Procedure Component—Annual Facility Survey	-	5,000	-	1	-	5/60	-	417	417
57.401	Outpatient Procedure Component - Monthly Reporting Plan	-	5,000	-	12	-	15/60	-	15,000	15,000
57.402	Outpatient Procedure Component Event	-	5,000	-	25	-	40/60	-	83,333	83,333
57.403	Outpatient Procedure Component - Monthly Denominators and Summary	-	5,000	-	12	-	40/60	-	40,000	40,000
57.500	Outpatient Dialysis Center Practices Survey	5,700	6,000	1	1	1.5	1.75	8,550	10,500	1,950
57.501	Dialysis Monthly Reporting Plan	-	6,000	-	12	-	5/60	-	6,000	6,000
57.502	Dialysis Event	5,700	6,000	60	60	16/60	13/60	91,200	78,000	(13,200)
57.503	Denominator for Outpatient Dialysis	5,700	6,000	12	12	6/60	6/60	6,840	7,200	360
57.504	Prevention Process Measures Monthly Monitoring for Dialysis	-	600	-	12	-	30/60	-	3,600	3,600
57.505	Dialysis Patient Influenza Vaccination	-	250	-	75	-	10/60	-	3,125	3,125

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57.506	Dialysis Patient Influenza Vaccination Denominator	-	250	-	5	-	10/60	-	208	208
57.600	State Health Department Validation Record	-	152	-	50	-	15/60	-	1,900	1,900
Total Estimated Annual Burden (Hours)								3,562,653	4,104,775	542,123