

(0920-0666). CDC 57.403 r1,v9.0 OMB No. 0920-0666 Exp. Date: XX-XX-XXXX www.cdc.gov/nhsn

## Outpatient Procedure Component Monthly Denominators for Same Day Outcome Measures

*required for saving			
Facility ID:		*Month	/Year:/
Same Day Outcome Meas	ures		
*Total number of encounters	s (admissions) for the mon	th:	
Custom Fields			
Label		Label	
			/
Comments			
Assurance of Confidentiality: The	ne voluntarily provided informatio	n obtained in this surveillance system tha	t would permit identification of any
individual or institution is collected	with a guarantee that it will be he	eld in strict confidence, will be used only for	or the purposes stated, and will not
otherwise be disclosed or released Public Health Service Act (42 USC		dual, or the institution in accordance with	Sections 304, 306 and 308(d) of the
		to average 40 minutes per response, inc	
		ining the data needed, and completing an is not required to respond to a collection	
currently valid OMB control number	er. Send comments regarding this	s burden estimate or any other aspect of	this collection of information,
including suggestions for reducing this burden to CDC, Project Clearance Officer, 1600 Clifton Rd., MS D-74, Atlanta, GA 30333, ATTN: PRA			