

OMB No. 0920-0666 Exp. Date: 12/31/2026 www.cdc.gov/nhsn

Medication Safety- Digital Measure Reporting Plan (CDC57.700)

Page 1 of 1					
required for saving					
Facility ID:					
Measure					
Glycemic Contr					
	l: Measure data are			inpatient locations	s, emergency
departments, 24	-hour observation u	nits, and IRF/IPF I	ocations.		
lhmadhraamia (LIVDO)				
Hypoglycemia (птРО)				
Measure	Following	Start Month*	Start Year*	End Month	End Year
HYPO					
Hyperglycemia	(HYPER)				
Measure	Following	Start Month*	Start Year*	End Month	End Year
HYPER					
	ney Injury Measure rtments, and 24-ho			clude all inpatient l	ocations,
Measure	Following	Start Mont	h* Start	End Month	End Year
HAKI		Otal Cilion	Year*	Ziia montii	Ziid i cai
Opioid Related	I Adverse Event (C	DRAE) Module			
	Related Adverse Ev			racility and include	all inpatient
iocations, emer	gency departments	, and ∠4-nour obs	ervation units.		
Measure	Following	Start Mont	:h* Start	End Month	End Year
ORAE		Start Morn	Year*	Life Worth	Liiu i cai
OTTAL			i cai		
Votes: During the	e specified reporting	period, the facilit	v authorizes NHS	SN to guery your fa	cility's FHIR serve
	soified data element				

Notes: During the specified reporting period, the facility authorizes NHSN to query your facility's FHIR server to collect the specified data elements as per the NHSN Medication Safety Component (MSC) Digital Quality Measure (dQM) protocols for each of the modules that appear on this form. The data collected will be used to provide measure specific event rates for each measure followed, as well as additional analytic and reporting options (for example, line-level lists).

- To participate in any of the NHSN MSC dQM modules, a Medication Safety Annual Survey must be completed and submitted. The survey must be completed annually and submitted by the end of February. This will allow addition of reporting plans for the current year. Data will only be pulled when there is a completed annual survey.
- Completion of the reporting plan indicates that data transmitted by your facility conforms to the NHSN dQM protocol(s) for the measures your facility elected to follow and instructions for reporting FHIR dQMs to NHSN. This includes adherence to technical specifications for value sets (i.e., local or non-standardized codes are mapped to established value sets such as RxNorm, LOINC, and HSLOC).

Assurance of Confidentiality: The voluntarily provided information obtained in this surveillance system that would permit identification of any individual or institution is collected with a guarantee that it will be held in strict confidence, will be used only for the purposes stated, and will not otherwise be disclosed or released without the consent of the individual, or the institution in accordance with Sections 304, 306



Form Approved

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and 308(d) of the Public Health Service Act (42 USC 242b, 242k, and 242m(d)).

Public reporting burden of this collection of information is estimated to average 10 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering, and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC, Reports Clearance Officer, 1600 Clifton Rd., MS H21-8, Atlanta, GA 30333, ATTN: PRA (0920-0666).

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