**Collection Instrument Cross walk**

**FoodNet**

**FN200.1-200.8 FoodNet Variable List**

**FoodNet Active Surveillance Data Elements List**

The following data elements were updated:

* **AgSphlTestType**
	+ Added value: “Meridian ImmunoCard STAT! E. coli O157 Plus”
* **DXO157TestType**
	+ Removed values: “Abbott Shiga Toxin Quik Chek”, “Meridian ImmunoCard STAT! EHEC”, “Meridian Premier EHEC”, “Metametrix”
	+ Added values: “BioCode Gastrointestinal Pathogen Panel (GPP)”, “Great Basin Scientific Stool”, “Medical Diagnostics”
* **PcrClinicTestType**
	+ Added value: “QIAstat-DX Gastrointestinal Panel 2”
* **PcrSphlTestType**
	+ Added value: “QIAstat-DX Gastrointestinal Panel 2”
* **SeroSite**
	+ Added values: *Campylobacter* (*jejuni; jejuni subsp jejuni; jejuni subsp. doylei; coli; ,lari; lari subsp. concheus; lari subsp. lari; upsaliensis; helveticus; fetus; fetus subsp fetus; fetus subsp venerealis; hyointestinalis; hyointestinalis subsp. hyointestinalis; hyointestinalis subsp. lawsonii; sputorum; sputorum bv sputorum; sputorum bv paraureolyticus; lanienae; mucosalis; insulaenigrae; concisus; curvus; rectus; showae; gracilis; canadenesis; peloridis; avium; cuniculorum; hominis; ureolyticus*; Unknown)
* **SiteID**
	+ Added value: “COEX”
* **StecHAg**
	+ Added definition: “999 = non-motile”
* **StecOAg**
	+ Removed value: “666=not O157, O antigen unknown”
* **CSTE**
	+ Removed values: “Yes, confirmed”, “Yes, probable”
	+ Added value: “Yes”

The following data elements were added:

* **CEA\_clinical\_intv**
* **CEA\_intv**
* **CEA\_travel\_intv**
* **NarmsLink\_Other**
* **RUCC**
* **SalGroupLetter**
* **SalGroupNumber**
* **TravelDest\_Clean**
* **Typh\_Salm**

The following data elements were removed:

* **CDCID**
* **NSTID**
* **OtherCDCTestType**
* **SpeciesCdc**

*Refer to attached Excel Spreadsheet – Changes are highlighted in Yellow.*

**HAIC**

**HAIC.400.1 Multi-Site Gram-Negative Surveillance Initiative (MuGSI) Case Report Form**

|  |  |
| --- | --- |
| **Question on original 2025 form** | **Question on 2026 form**  |
| 2025 Multi-site Gram-Negative Surveillance Initiative (MuGSI)Healthcare-Associated Infections Community Interface (HAIC) Case Report | 2026 Multi-site Gram-Negative Surveillance Initiative (MuGSI)Healthcare-Associated Infections Community Interface (HAIC) Case Report |
| Question 17a. Types of Infection Associated with Culture(s): (Check all that apply)* None
* Colonized
* Unknown
* Abscess, not skin
* AV fistula/graft infection
* Bacteremia
* Bursitis
* Catheter site infection (CVC)
* Cellulities
* Chronic ulcer/wound (not decubitus)
* Decubitus/pressure ulcer
* Empyema
* Endocarditis
* Epidural abscess
* Meningitis
* Osteomyelitis
* Peritonitis
* Pneumonia (CRAB cases, complete Q23c)
* Pyelonephritis
* Sepsis
	+ Urosepsis
* Septic arthritis
* Septic emboli
* Septic shock
* Skin abscess
* Surgical incision infection
* Surgical site infection (internal)
* Traumatic wound)
* Urinary tract infection (complete 22a-22c)
* Other (specify):
 | Question 17a. Types of Infection Associated with Culture(s): (Check all that apply)* None
* Colonized
* Unknown
* Abscess, not skin
* AV fistula/graft infection
* Bacteremia
* Biliary tract infection
* Bursitis
* Catheter site infection (CVC)
* Cellulities
* Chronic ulcer/wound (not decubitus)
* Decubitus/pressure ulcer
* Empyema
* Endocarditis
* Epidural abscess
* Meningitis
* Osteomyelitis
* Peritonitis
* Pneumonia (CRAB cases, complete Q23c)
* Pyelonephritis
* Sepsis
	+ Urosepsis
	+ Septic shock
* Septic arthritis
* Septic emboli
* Skin abscess
* Surgical incision infection
* Surgical site infection (internal)
* Traumatic wound)
* Urinary tract infection (complete 22a-22c)

Other (specify): |

**HAIC.400.3 MuGSI Supplemental Surveillance Officer Survey**

|  |  |
| --- | --- |
| **2024 Survey Question** | **2025 Survey Question**  |
| 2024 HAIC Multi-site Gram-negative Surveillance Initiative (MuGSI) Supplemental Surveillance Officer Survey | 2025 HAIC Multi-site Gram-negative Surveillance Initiative (MuGSI) Supplemental Surveillance Officer Survey |
| Please answer the following questions for the year 2024, unless otherwise specified. The purpose of the survey is to verify and document current surveillance procedures, including isolate collection and testing methods at clinical laboratories. Please enter your responses into the corresponding REDCap database. If you have questions, please contact Julian Grass (hij3@cdc.gov) and Joshua Brandenburg (ode4@cdc.gov). | Please answer the following questions for the year 2025, unless otherwise specified. The purpose of the survey is to verify and document current surveillance procedures, including isolate collection and testing methods at clinical laboratories. Please enter your responses into the corresponding REDCap database. If you have questions, please contact Joshua Brandenburg (ode4@cdc.gov) and the MuGSI Inbox (mugsi@cdc.gov). |
| 1. Did any laboratories drop out of participation in 2023? \_\_\_\_\_\_\_ yes \_\_\_\_\_\_\_ no
 | 1. Did any laboratories drop out of participation in 2024? \_\_\_\_\_\_\_ yes \_\_\_\_\_\_\_ no
 |
| 1. 3. In 2023, did you identify additional laboratories, regardless of location, which identify MuGSI isolates from persons who are residents of the MuGSI surveillance area at your site?

\_\_\_\_\_\_\_ yes \_\_\_\_\_\_\_ no | 1. 3. In 2024, did you identify additional laboratories, regardless of location, which identify MuGSI isolates from persons who are residents of the MuGSI surveillance area at your site?

\_\_\_\_\_\_\_ yes \_\_\_\_\_\_\_ no |
| 4. Did your site send any MuGSI isolates to CDC for characterization in calendar year 2023?  \_\_\_\_\_\_\_ yes \_\_\_\_\_\_\_ no  | 4. Did your site send any MuGSI isolates to CDC for characterization in calendar year 2024?  \_\_\_\_\_\_\_ yes \_\_\_\_\_\_\_ no  |
| 5. How many isolates with a specimen collection date in 2023 did you expect to be able to collect from the clinical laboratories? \_\_\_\_\_\_\_ CRE; \_\_\_\_\_\_\_ CRAB; \_\_\_\_\_\_\_ ESBL; \_\_\_\_\_\_\_\_iEC | 5. How many isolates with a specimen collection date in 2024 did you expect to be able to collect from the clinical laboratories? \_\_\_\_\_\_\_ CRE; \_\_\_\_\_\_\_ CRAB; \_\_\_\_\_\_\_ ESBL; \_\_\_\_\_\_\_\_iEC |
| 6. What was the total number of isolates with a specimen collection date in 2023 that were collected from the clinical laboratories? \_\_\_\_\_\_\_ CRE; \_\_\_\_\_\_\_ CRAB; \_\_\_\_\_\_\_ ESBL; \_\_\_\_\_\_\_iEC | 6. What was the total number of isolates with a specimen collection date in 2024 that were collected from the clinical laboratories? \_\_\_\_\_\_\_ CRE; \_\_\_\_\_\_\_ CRAB; \_\_\_\_\_\_\_ ESBL; \_\_\_\_\_\_\_iEC |
| **Laboratory Participation and Isolate Testing – Part 2***Please complete the following information for each clinical laboratory participating in MuGSI surveillance at your site in 2023* | **Laboratory Participation and Isolate Testing – Part 2***Please complete the following information for each clinical laboratory participating in MuGSI surveillance at your site in 2024* |
| 2. In 2023, did your site update its inventory of facilities within the MuGSI surveillance area? \_\_\_\_\_\_\_ yes \_\_\_\_\_\_\_ no | 2. In 2024, did your site update its inventory of facilities within the MuGSI surveillance area? \_\_\_\_\_\_\_ yes \_\_\_\_\_\_\_ no |
| 4. Did your site geocode MuGSI cases in 2024? \_\_\_\_\_ yes \_\_\_\_\_\_ no | 4. Did your site geocode MuGSI cases in 2024? \_\_\_\_\_ yes \_\_\_\_\_\_ no |
| 5. Did your site match MuGSI cases to the state vital statistics death registry in 2023?  \_\_\_\_\_ yes \_\_\_\_\_\_ no | 5. Did your site match MuGSI cases to the state vital statistics death registry in 2024?  \_\_\_\_\_ yes \_\_\_\_\_\_ no |
| 6. Did your site complete CRF re-abstractions in 2023? \_\_\_\_\_ yes \_\_\_\_\_\_ no | 6. Did your site complete CRF re-abstractions in 2024? \_\_\_\_\_ yes \_\_\_\_\_\_ no |

**HAIC.400.4 Invasive Staphylococcus aureus HAIC Case Report**

|  |  |
| --- | --- |
| **Question on original 2025 form**  | **Question on 2026 form**  |
| Title: Invasive *Staphyloccocus aureus* Healthcare-Associated Infections Community Interface (HAIC) Case Report - 2025 | Title: Invasive *Staphyloccocus aureus* Healthcare-Associated Infections Community Interface (HAIC) Case Report - 2026 |
| Question 28a: Does the patient have:Non-dialysis vascular graft? □ Yes □ No □ Unknown  | Question 28a: Does the patient have:Non-dialysis prosthetic vascular graft? □ Yes □ No □ Unknown  |

**HAIC.400.6 HAIC Invasive Staphylococcus aureus Supplemental Surveillance Officer Survey**

|  |  |
| --- | --- |
| **Question on original 2024 form**  | **Question on 2025 form**  |
| Please answer the following questions for the year 2024. The purpose of the survey is to verify and document current surveillance procedures, including cases ascertainment and auditing methods. Please enter your responses into the corresponding REDCap database. If you have any questions, please contact Kelly Jackson (gqv8@cdc.gov). | Please answer the following questions for the surveillance year. The purpose of the survey is to verify and document current surveillance procedures, including cases ascertainment and auditing methods. Please enter your responses into the corresponding REDCap database. If you have any questions, please contact Kelly Jackson (gqv8@cdc.gov). |
|  | Surveillance year: \_\_\_\_\_ |
| Did your site send MRSA/MSSA isolates to CDC for characterization in 2024? \_\_\_yes \_\_\_\_no | Did your site send MRSA/MSSA isolates to CDC for characterization in the surveillance year? \_\_\_yes \_\_\_\_no |
| **Lab Participation and Case Finding***Please answer the following questions for hospitals and labs under surveillance for 2024.* | **Lab Participation and Case Finding***Please answer the following questions for hospitals and labs under surveillance during the surveillance year.* |
| Indicate the percentage contribution of each case finding method to your site’s total SA case counts (100%) in 2024.  | Indicate the percentage contribution of each case finding method to your site’s total SA case counts (100%) during the surveillance year.  |
| Do you expect this distribution and/or percentage values to change in 2025?  | Do you expect this distribution and/or percentage values to change next surveillance year?  |
| Did any labs drop out of participation in 2024? | Did any labs drop out of participation in the surveillance year? |
| In 2024, did you identify any additional labs, regardless of location, which identify invasive SA isolates from persons who are residents of your catchment area? | In the surveillance year, did you identify any additional labs, regardless of location, which identify invasive SA isolates from persons who are residents of your catchment area? |
| Did your site complete CRF re-abstractions during 2024?  | Did your site complete CRF re-abstractions during the surveillance year?  |
| How did your site define an audit case in 2024? | How did your site define an audit case during the surveillance year? |
| Indicate the percentage contribution of each case finding method to your site’s audit counts (100%) in 2024.  | Indicate the percentage contribution of each case finding method to your site’s audit counts (100%) in the surveillance year.  |
| How many laboratories did you audit in 2024? | How many laboratories did you audit in the surveillance year? |
| In 2024, did your site update its inventory of facilities within the EIP catchment area? | In the surveillance year, did your site update its inventory of facilities within the EIP catchment area? |
| Did your site geocode SA cases in 2024? | Did your site geocode SA cases in the surveillance year? |
| Did your site link SA cases to vital records (mortality matching) in 2024? | Did your site link SA cases to vital records (mortality matching) in the surveillance year? |
| CDC staff are responsive to questions/concerns/emails (e.g., Holly Biggs, Davina Campbell, Kelly Jackson, Isaac See, and Shirley Zhang) | CDC staff are responsive to questions/concerns/emails (e.g., Holly Biggs, Davina Campbell, Kelly Jackson, and Isaac See) |

**HAIC.400.7 CDI Case Report and Treatment Form**

|  |  |
| --- | --- |
| **2025 CRF**  | **2026 CRF**  |
| Title: CDI Case Report Treatment Form - 2025 | Title: Title: CDI Case Report Treatment Form - 2026 |

**HAIC.400.8 Annual Survey of Laboratory Testing Practices for C. difficile Infections**

|  |  |
| --- | --- |
| Existing question | Modified question |
| Was this a new laboratory in 2024?    | Was this a new laboratory in 2025?    |
| How often did you receive line lists from this lab in 2024?  | How often did you receive line lists from this lab in 2025?  |
| How did you receive line lists from this lab in 2024?  | How did you receive line lists from this lab in 2025?  |
| Did you receive specimens from this lab in 2024?  | Did you receive specimens from this lab in 2025?  |
| Was this lab audited in 2024?  | Was this lab audited in 2025?  |
| Types of facilities in your catchment area served by this lab in 2024 | Types of facilities in your catchment area served by this lab in 2025 |
| Did your laboratory ever send specimens off-site for Clostridioides difficile testing in 2024? | Did your laboratory ever send specimens off-site for Clostridioides difficile testing in 2025? |
| 2a. Which testing method(s) for Clostridioides difficile (C. difficile) did your laboratory perform in 2024? | 2a. Which testing method(s) for Clostridioides difficile (C. difficile) did your laboratory perform in 2025? |
| Did your laboratory use this testing method for Clostridioides difficile (C. difficile) in 2024? | Did your laboratory use this testing method for Clostridioides difficile (C. difficile) in 2025? |
| Did you use this testing method in this way for all of 2024?  | Did you use this testing method in this way for all of 2025?  |
| 3a. Which EIA test kit was used by your laboratory in 2024? | 3a. Which EIA test kit was used by your laboratory in 2025? |
| 3b. Which Nucleic Acid Amplification test was used by your laboratory in 2024? | 3b. Which Nucleic Acid Amplification test was used by your laboratory in 2025? |
| 4a. If your laboratory used a multiplexed molecular diagnostic (e.g., Biofire Filmarray GI Panel, Luminex xTAG GPP) to test for several GI pathogens in 2024, did your laboratory suppress the C. difficile result so that clinicians could not see it?  | 4a. If your laboratory used a multiplexed molecular diagnostic (e.g., Biofire Filmarray GI Panel, Luminex xTAG GPP) to test for several GI pathogens in 2025, did your laboratory suppress the C. difficile result so that clinicians could not see it?  |
| 4b. If your laboratory used a multiplexed diagnostic in 2024 and the result was suppressed, where does the suppression occur?  | 4b. If your laboratory used a multiplexed diagnostic in 2025 and the result was suppressed, where does the suppression occur?  |
| 5a. If your laboratory used a nucleic acid amplification test (NAAT) (e.g., Cepheid Xpert C. difficile) as first line testing followed by a toxin EIA test (whenever NAAT result is positive) in 2024, did your laboratory suppress the positive NAAT result so that clinicians could not see it?   | 5a. If your laboratory used a nucleic acid amplification test (NAAT) (e.g., Cepheid Xpert C. difficile) as first line testing followed by a toxin EIA test (whenever NAAT result is positive) in 2025, did your laboratory suppress the positive NAAT result so that clinicians could not see it?   |
| 5b. If your laboratory used NAAT as first line testing followed by confirmatory toxin EIA testing in 2024, and both the NAAT and toxin EIA results were released to the clinician, did your laboratory provide any comments to help the clinician interpret the test results (e.g., NAAT-positive only result might represent colonization, etc.)?  | 5b. If your laboratory used NAAT as first line testing followed by confirmatory toxin EIA testing in 2025, and both the NAAT and toxin EIA results were released to the clinician, did your laboratory provide any comments to help the clinician interpret the test results (e.g., NAAT-positive only result might represent colonization, etc.)?  |
|  6. What are the LOINC or internal testing codes associated with the tests your lab used in 2024 (e.g. LOINC codes 13957-6, 34713-8, or 54067-4)?   |  6. What are the LOINC or internal testing codes associated with the tests your lab used in 2025 (e.g. LOINC codes 13957-6, 34713-8, or 54067-4)?   |
| 7. Did your lab have a policy to reject stool specimens for C. difficile testing in 2024? | 7. Did your lab have a policy to reject stool specimens for C. difficile testing in 2025? |
| 7a. Did your rejection policy for stool specimens change between January 1, 2024 and December 31, 2024?  | 7a. Did your rejection policy for stool specimens change between January 1, 2025 and December 31, 2025?  |
| 8. How many stool samples did you test for C. difficile each month in 2024?  | 8. How many stool samples did you test for C. difficile each month in 2025?  |

**HAIC.400.9 CDI Annual Surveillance Officers Survey**

|  |  |
| --- | --- |
| **Existing question**  | **Modified question**  |
| 2. In 2024, did any laboratories drop out of participation? | 2. In 2025, did any laboratories drop out of participation? |
| 3. In 2024, did you identify any additional laboratories inside or outside of your catchment area which identify *C.diff* assays from persons who are residents of your catchment area? | 3. In 2025, did you identify any additional laboratories inside or outside of your catchment area which identify *C.diff* assays from persons who are residents of your catchment area? |
| 10. Did your site complete a physician/outpatient provider survey in 2024? | 10. Did your site complete a physician/outpatient provider survey in 2025? |
| 13. For each facility that treated a case in 2024, please provide the following | 13. For each facility that treated a case in 2025, please provide the following |