



Los Angeles County Department of Public Health PUBLIC HEALTH QUARTERLY CONNECT

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Important Updates from Public Health

Influenza Season 2018-2019

Unlike last year's extreme season, the 2018-2019 flu season is following patterns of previous years. As of January 25, 2019 there have been 23 confirmed influenza-associated deaths, none pediatric. The most common strain is Influenza A (H1N1) which can be more severe in children and pregnant women. There is still time to get your flu shot and providers should continue to encourage their patients and staff to get vaccinated if they are not already.

Bloodstream Infections After Stem Cell Injections

Currently, the FDA approves stem cell therapies for hematopoietic or immunologic reconstitution; however, many companies, clinics, and clinicians continue to market products from various sources as treatment for orthopedic, neurologic, and rheumatologic conditions without FDA approval. In 2018, a CDC investigation identified 12 bloodstream infections in patients from Texas, Florida, and Arizona who had received injections or infusions of non-FDA-approved umbilical cord blood-derived stem cell products. This led to the voluntary recall of stem cell products distributed by Liveyon, LLC and processed by Genetech, Inc.

In late December 2018, LAC DPH identified 2 cases of *Enterobacter cloacae* bloodstream infections in individuals after receiving stem cell injections. These individuals received the stem cells in late August 2018 from a distributor different from Liveyon, LLC. It is important that clinicians remain vigilant for additional suspected infections. Inquire about recent stem cell therapy in patients presenting with infections such as acute discitis, joint, bone, or bloodstream infections as well as cellulitis and abscesses, and report them to public health to prevent further disease transmission. For more information and details on how to report, go to:

<http://publichealth.lacounty.gov/eprp/Health%20Alerts/LAHANStemCellInfections012219.pdf>

Antibiotic Resistant Infections Found in Patients Returning from Mexico

LAC DPH and the CDC have issued travel alerts regarding cases of surgical site infections caused by Verona Integron-Encoded Metallo-beta-lactamase (VIM)-producing carbapenem-resistant *Pseudomonas aeruginosa* (VIM-CRPA) among US residents who underwent invasive medical procedures in Tijuana, Mexico. Most, but not all, of the cases were associated with bariatric surgery, and half had their surgery done at the Grand View Hospital. The Grand View Hospital has been closed by the Mexican government until further notice. To date, one case has been reported among LA County residents. LAC DPH asks clinicians to call 213-240-7941 to report a case or to receive assistance. Mechanism testing to confirm carbapenemase-producing bacteria is available through the Los Angeles County Public Health Laboratory.

For more information go to: <https://wwwnc.cdc.gov/travel/notices/alert/drug-resistant-infections-mexico>

National Healthcare Safety Network - Outpatient Procedure Component

What is NHSN?

The National Healthcare Safety Network (NHSN) is a system created by the CDC to track healthcare associated infections (HAIs). It is used across the country and provides facilities and health departments with data needed to identify problem areas, measure progress, and work towards eliminating HAIs. Additionally, NHSN gives medical facilities the ability to see their data in real-time and share that information with clinicians and leadership within their facility. It can also help facilities to comply with reporting requirements for the Centers for Medicare and Medicaid Services (CMS).

Furthermore, NHSN allows the CDC, state, and local health departments the ability to analyze the burden of disease and measure progress nationwide and within specific jurisdictions. LAC DPH currently uses hospital data entered into NHSN to focus our resources and prevention efforts, and to create and distribute an annual Regional Summary of HAIs in Los Angeles County.

<http://publichealth.lacounty.gov/acd/docs/HAIRegionalSummary2017.pdf>

The Outpatient Procedure Component

NHSN began as a tracking system for hospitals, but has since expanded to include more healthcare settings, including skilled nursing facilities, dialysis centers, and now, ambulatory surgery centers (ASCs). While ASCs could previously track and report surgical site infection (SSI) data using the general Patient Safety Component, NHSN has now created a separate platform to meet the specific needs of ASCs, the Outpatient Procedure Component (OPC). The OPC allows ASCs to report mandates, as well as optional measures by using one reporting system. Note: The OPC is not meant for Hospital Outpatient Procedure Departments, those should report under their hospital's Patient Safety Component.

The OPC tracks events using two distinct modules: 1- Same Day Outcome Measures (OPC-SDOM), 2- Surgical Site Infection Surveillance (OPC-SSI).



Why report if it's optional?

- Opportunity to analyze other payer data along with its Medicare data in one system
- Ability to look at trends and track patterns
- Compare to national and local data

Same Day Outcome Measures

In the OPC-SDOM surveillance, patients are monitored from admission to discharge, there are no measurements to track once a patient is discharged. There are four types of adverse events tracked in the OPC-SDOM:

SDOM 1 – Patient Burn

- Any unintended tissue injury caused by scalds, contact, fire, chemical, electrical or radiation
- Ex. warming device or prep solution

SDOM 2 – Patient Fall

- A sudden, uncontrolled, unintended downward displacement of the body
- Excludes falls resulting from violent blows or other purposeful actions

SDOM 3 – Wrong Events

- Wrong events = performance or occurrence of a procedure in such a way that was not in accordance with the intended surgical procedure
- Wrong events include wrong site, wrong side, wrong patient, wrong procedure, and/or wrong implant

SDOM 4 – All cause hospital transfer/admission

- Any direct transfer or admission from an ASC to an Acute Care Hospital

Note that SDOM does not meet the reporting requirements for the CMS Ambulatory Surgical Center Quality Reporting (ASCQR) Program, it is optional.

National Healthcare Safety Network - Outpatient Procedure Component

Surgical Site Infections Module

The OPC-SSI module includes select outpatient operative procedures where the facility must perform surveillance after a patient is discharged. Note: If your facility was previously reporting to the Patient Safety Component SSI protocol, this will replace that protocol and all data will be copied to OPC and available for analysis. There are two sets of SSI criteria as infections attributable to breast surgeries are considered separate from all other procedures. This is due to the fact that breast procedures were found to be the highest volume and have the highest SSI risk among ASCs reporting to NHSN through the Patient Safety Component.

NHSN has 30 Operative Procedure Categories available for ASCs to monitor. Depending on the category, surveillance must be completed for 30 or 90 days following operation. Once a category is selected, the facility must monitor **all** procedures within that category. SSIs should be monitored for all 3 levels identified as:

1. Superficial Incisional SSI
2. Deep Incisional SSI
3. Organ/Space SSI

SSI surveillance requires monitoring post discharge. This can be done in two ways:

1. Active Surveillance - the facility has an active plan for identifying infections.
 - Ex. Review of medical records, letters or phone calls to patients post discharge, in-person follow-up visits, etc.
2. Passive Surveillance - identification of the infection that is not initiated by the facility.
 - Ex. Patient/caregiver, surgeon, or another facility contacts the facility to report an SSI.

How to Enroll in the OPC

Your next steps depend on if your facility is currently using NHSN. Below describes each of the necessary steps depending on three scenarios:

1. An ASC that is currently enrolled in NHSN and using the Patient Safety Component to report SSI data.

ASCs that are currently enrolled in the Patient Safety Component for SSI surveillance are automatically enrolled in the OPC and no action is required to enroll. However, these ASCs will need to confer rights to groups to which they belong, in order to allow access to their data.

2. An ASC that is currently enrolled in NHSN and only using the Healthcare Personnel Safety Component (HCP) to report healthcare personnel vaccination data and not using the PSC.

ASCs that are currently enrolled in the Healthcare Personnel Safety Component (HCP) for reporting healthcare personnel vaccination data may choose to participate in the OPC. These ASCs will need to:

- a. Add the OPC as a component, and
- b. Complete an OPC Annual Facility Survey

3. An ASC that is currently NOT enrolled nor participating in any of the NHSN components.

ASCs that are currently NOT enrolled nor participating in one of the NHSN components may choose to participate in the OPC. These ASCs will need to complete both the:

- a. NHSN enrollment at <https://www.cdc.gov/nhsn/ambulatory-surgery/enroll.html>, and
- b. NHSN set-up at <https://www.cdc.gov/nhsn/ambulatory-surgery/setup.html>

For more information on NHSN and the OPC, including trainings and webinars, go to:

<https://www.cdc.gov/nhsn/ambulatory-surgery/index.html>

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