

Catheter-Associate Urinary Tract Infections in Mississippi, 2014

Catheter-associated urinary tract infections (CAUTI) are bacterial infections of the urinary tract, including the urethra, bladder, ureters, and kidneys, identified in the urine of patients that have a urinary catheter in place. In order for the infection to be associated with the catheter, it must be in place consistently for at least two days when the infection is identified. Urinary catheters are used when patients are unable to expel urine from the bladder, whether due to mobility difficulties or anatomical dysfunctions. Some symptoms of CAUTIs include fever, abdominal pain around the urinary tract, and burning sensation during urination after the catheter is removed. In 2014, CAUTI reporting to CMS was required for intensive care units at acute care facilities (starting January 2012), all units at long-term acute care facilities (starting October 2012), and all units at inpatient rehabilitation facilities (starting October 2012).

Acute Care Facilities (ACF):

Number of Facilities with Urinary Catheters: 44

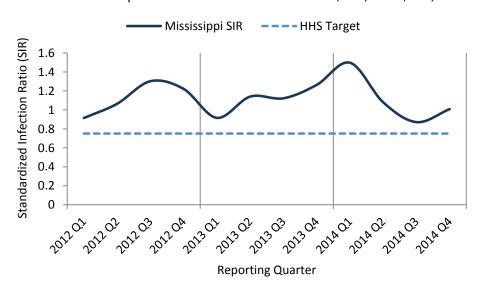
Number of CAUTIs Reported: 264

Infection Rate: 2.06 infections per 1,000 catheter days

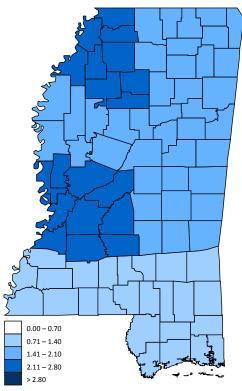
Comparison to 2009 National Baseline: no significant difference Comparison to 2013 Infection Rates: no significant difference

Comparison to HHS Target: above (50%)

Estimated Excess Costs Spent on CAUTI Treatment in 2014: \$350,856 - \$409,992



CAUTI SIRs by Quarter, Acute Care Facilities, Mississippi, 2012-2014



CAUTI Rates (per 1,000 catheter days) by Public Health District, Acute Care Facilities, Mississippi, 2014

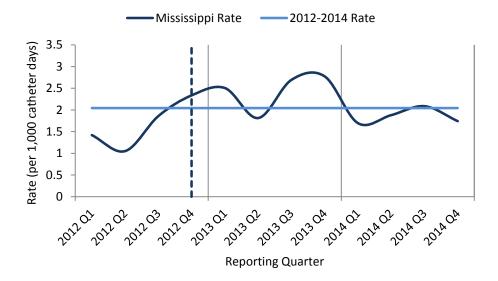
Long-Term Acute Care (LTAC) Facilities:

Number of Facilities with Urinary Catheters: 8

Number of CAUTIs Reported: 88

Infection Rate: 1.85 infections per 1,000 catheter days Comparison to 2013 Infection Rates: below (24%)

Estimated Excess Costs Spent on CAUTI Treatment in 2014: \$116,952 - \$136,664



CAUTI Rates by Quarter, Long-Term Acute Care Facilities, Mississippi, 2012-2014

*LTAC reporting of CAUTIs was required by CMS starting Quarter 4

of 2012. Reporting prior to then was voluntary; therefore, some
facilities may not have reported infections.

Inpatient Rehabilitation Facilities (IRF):

In Mississippi, there is only one independent IRF and 10 IRF units in acute care facilities (ACF). All 11 of these are required to report HAIs to CMS. Mississippi did not collect data on these facilities in 2014.

For more information on CAUTIs: http://www.cdc.gov/hai/pdfs/uti/CA-UTI tagged.pdf and http://www.cdc.gov/hAI/ca_uti/uti.html For more information on facility reporting of CAUTIs: http://www.cdc.gov/hAI/ca_uti/uti.html For more information on facility reporting of CAUTIs: http://www.cdc.gov/hAI/ca_uti/uti.html