

**North Carolina Healthcare-Associated Infections Report**  
**Data from January 1 – June 30, 2019**  
**Alamance Regional Medical Center, Burlington, Alamance County**

**2018 Hospital Survey Information**

Hospital Type: Acute Care Hospital  
 Medical Affiliation: Major  
 Admissions in 2019: 11,222  
 Patient Days in 2019: 49,291  
 Total Number of Beds: 238  
 Number of ICU Beds: 32  
 FTE\* Infection Preventionists: 1.60  
 Number of FTEs\* per 100 beds: 0.67

[\*FTE = Full-time equivalent]



**Commentary From Facility:**

Cone Health is committed to preventing harm from Healthcare Associated Infections across our community. We have dedicated multi-disciplinary teams focused on process improvements to ensure improved outcomes for our patients. If you would like further information, please contact Cone Health Infection Prevention Department. Thank you.

**Catheter-Associated Urinary Tract Infections (CAUTI)**

**Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Jun 2019.**

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	1.6	Same
Adult/Ped Wards	0	Less than 1.0	No Conclusion
<b>All reporting units</b>	<b>0</b>	<b>2.4</b>	<b>Same</b>

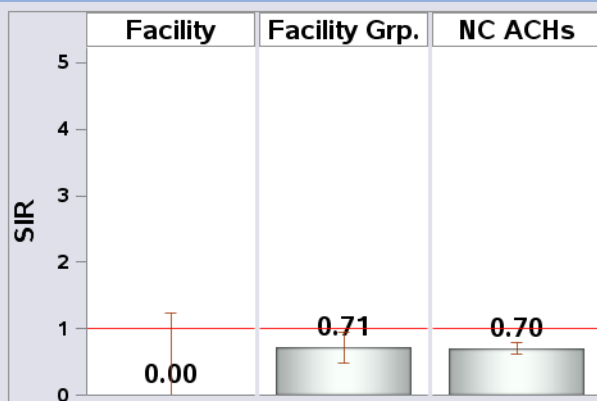
Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.

Note: SIR not calculated if <50 catheter days or <1 predicted infection.

Note: Red line represents the NHSN baseline experience, 2015.

**How Does This Facility Compare to the National Experience?**

= Same: About the same number of infections as predicted by the national baseline experience



**Figure 1: SIRs and 95% confidence intervals, Jan-Jun 2019.**

**Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)**

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

**Table 2. Number of Observed and Predicted MRSA Events, Jan-Jun 2019**

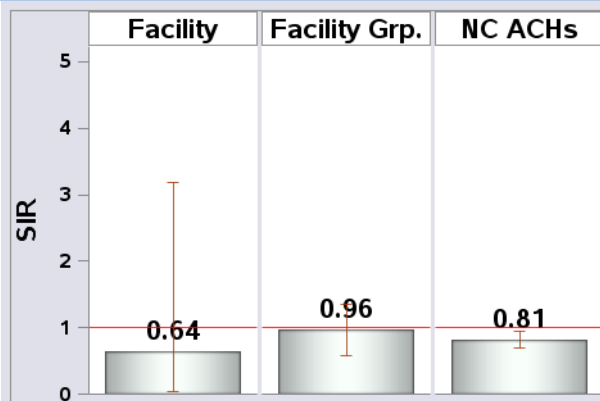
Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	1	1.6	Same

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.

Note: Red line represents the NHSN baseline experience, 2015.

**How Does This Facility Compare to the National Experience?**

= Same: About the same number of infections as predicted by the national baseline experience



**Figure 2: SIRs and 95% Confidence Intervals, Jan-Jun 2019.**

**Clostridioides difficile Laboratory-Identified Infections (CDI LabID)**

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

**Table 3. Number of Observed and Predicted CDIs, Jan-Jun 2019**

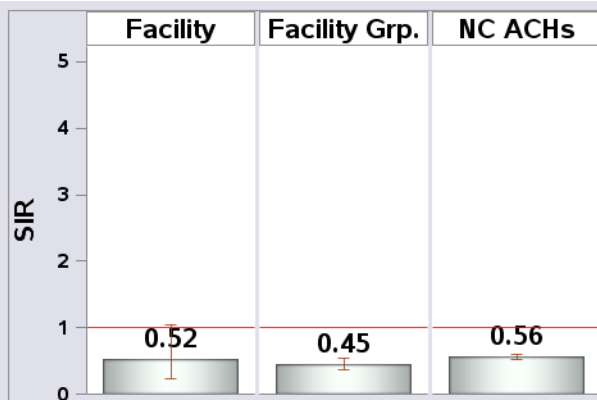
Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	7	13	Same

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.

Note: Red line represents the NHSN baseline experience, 2015.

**How Does This Facility Compare to the National Experience?**

= Same: About the same number of infections as predicted by the national baseline experience



**Figure 3: SIRs and 95% Confidence Intervals, Jan-Jun 2019.**

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**Central Line-Associated Bloodstream Infections (CLABSI)**

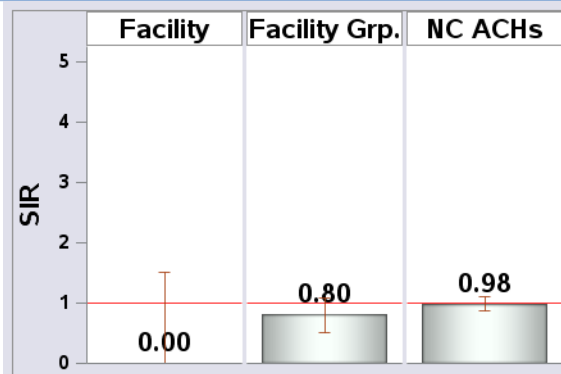


Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Jun 2019

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	1.0	Same
Adult/Ped Wards	0	Less than 1.0	No Conclusion
Neonatal Units	0	Less than 1.0	No Conclusion
<b>All reporting units</b>	<b>0</b>	<b>2.0</b>	<b>Same</b>

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.

Note: SIR not calculated if <50 central line days or <1 predicted infection.

Note: Red line represents the NHSN baseline experience, 2015.

**How Does This Facility Compare to the National Experience?**

= Same: About the same number of infections as predicted by the national baseline experience

Figure 4: SIRs and 95% confidence intervals, Jan-Jun 2019.

**Surgical Site Infections (SSI) after Abdominal Hysterectomies**

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Jun 2019.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	1	Less than 1.0	No Conclusion

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.

Note: Infections from deep incisional and/or organ space.

Note: Red line represents the NHSN baseline experience, 2015.

**How Does This Facility Compare to the National Experience?**

No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

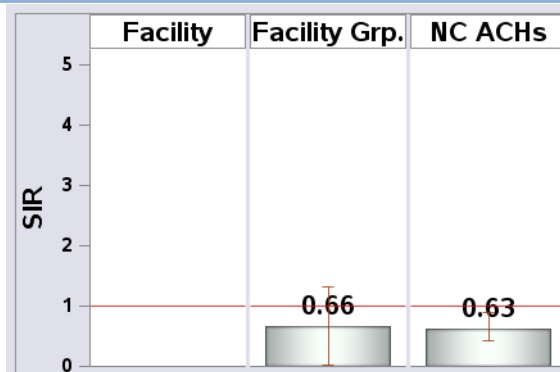


Figure 5: SIRs and 95% Confidence Intervals, Jan-Jun 2019.

**Surgical Site Infections (SSI) after Colon Surgeries**

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Jun 2019.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	2	1.3	Same

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.

Note: Infections from deep incisional and/or organ space.

Note: Red line represents the NHSN baseline experience, 2015.

**How Does This Facility Compare to the National Experience?**

= Same: About the same number of infections as predicted by the national baseline experience

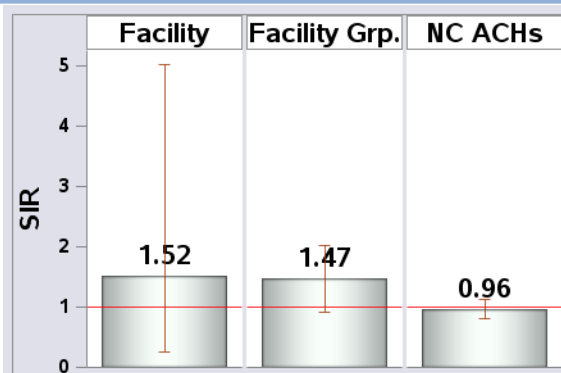


Figure 6: SIRs and 95% Confidence Intervals, Jan-Jun 2019.

**Ventilator-Associated Events (VAE)**

Note from N.C. Division of Public Health: VAEs are not reportable at this facility type after 2018Q3