

## MRSA/CDI LabID Event Reporting Guidance, Flowsheets, and Case Examples

**LabID Event Report** – An event report must be filled out and submitted to MDCH for each case of a laboratory-confirmed MRSA or CDI, meeting the LabID event definitions below. Only submit forms for cases that have been laboratory confirmed by your facility.

You may opt to submit event report forms as you identify new cases or you can submit all your event reports at the end of the month. We encourage you to use the system that works the best and makes the most sense for you.

Do NOT fill out an event report form for the following:

- Patients/residents with a history of MRSA or CDI, but have not been lab-confirmed
- Patients/residents who are transferred in with a diagnosis of MRSA or CDI, but have not been lab confirmed
- Patients/residents who you suspect have MRSA or CDI, but have not been lab-confirmed.

**Denominator Report** – Denominator reports are important for calculating location and facility rates. Therefore, a denominator report must be completed at the end of each month for each location (unit, floor, or ward) where your facility is conducting MRSA/CDI surveillance. So if your facility is conducting surveillance on MRSA and CDI on the West wing and the East wing you should submit two denominator forms at the end of the month, one for each location.

**LabID Event and Denominator Report Deadlines** – Timely submission of surveillance data is crucial to the prevention initiative. Therefore, we are asking that you please complete and submit all event and denominator form to us within 2 weeks from the end of each month. So for example June 2012 data should be submitted to MDCH no later than July 14<sup>th</sup>.

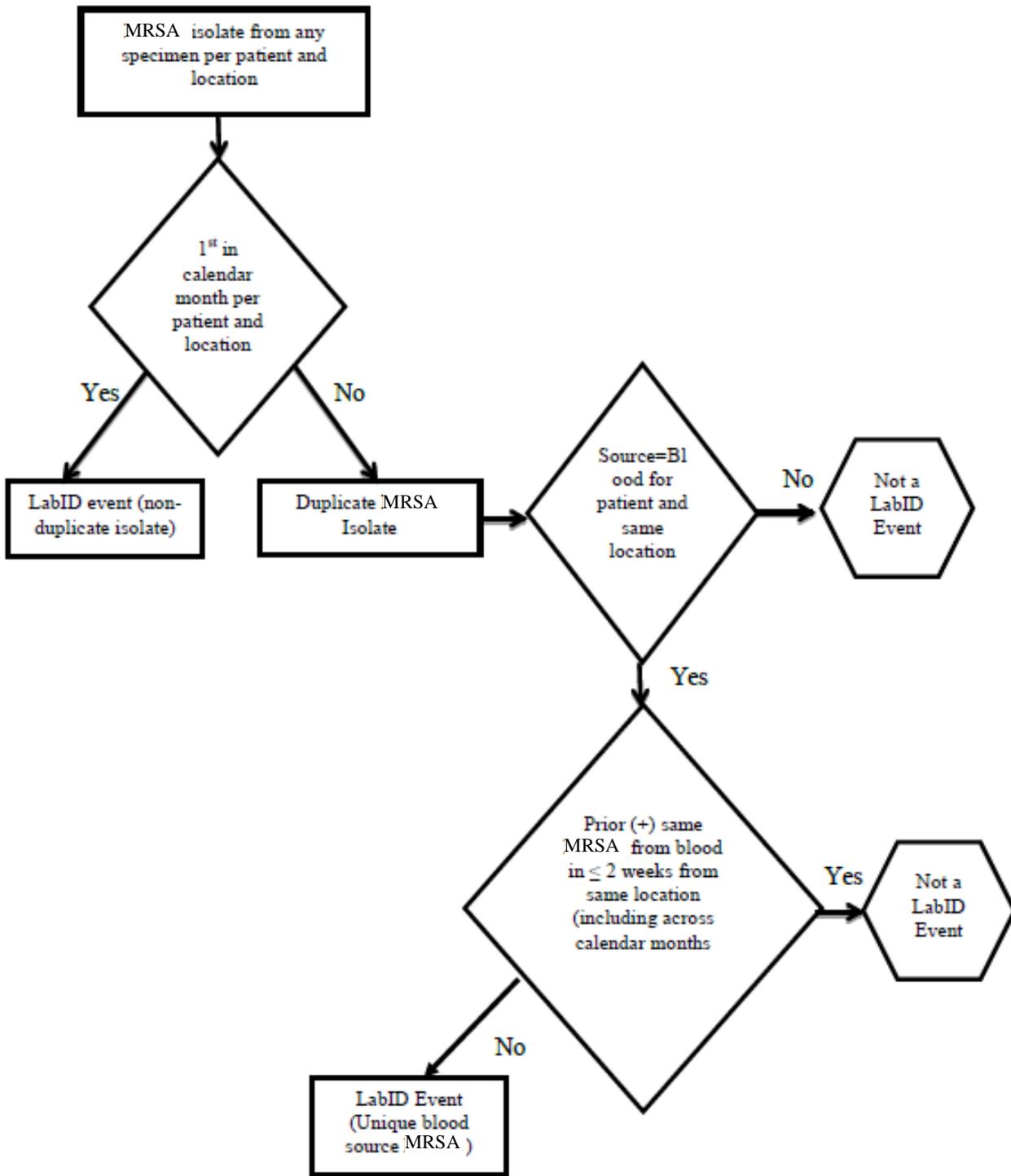
**MRSA LabID Event Definition** – a non-duplicate MRSA isolate from any specimen source and unique isolates from blood cultures. See the MRSA LabID Flowsheet below on page 2.

- Report the first monthly isolate of MRSA for a patient/resident regardless of specimen source (i.e. wound, sputum, blood, etc.)
- Subsequent monthly MRSA isolates are NOT considered new LabID events unless the specimen is collected from blood
- Report all MRSA isolates from blood unless they occur within 2 weeks of a previous MRSA blood culture

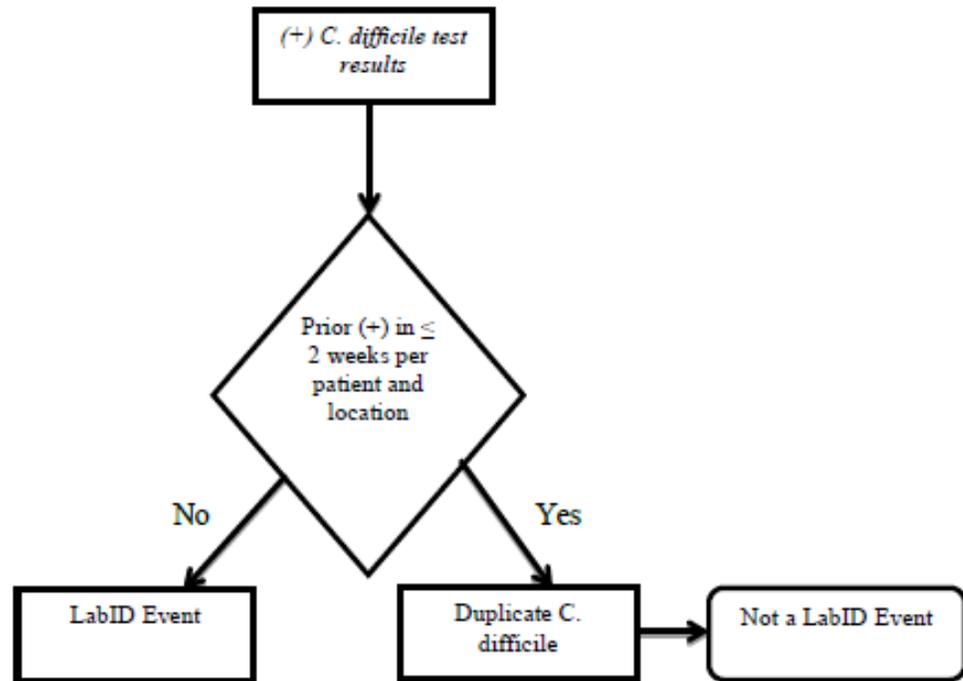
**CDI LabID Event Definition** – Any non-duplicate CDI positive lab assay. See the CDI LabID Flowsheet below on page 3.

- All instances of lab-confirmed CDI should be reported except for assays from the same patient/resident within 2 weeks.

**MRSA LabID Event Flowsheet**



## CDI LabID Event Flowsheet



### MRSA and CDI Examples:

Case 1: A resident tests positive for MRSA in sputum on April 12<sup>th</sup>. The resident also has a draining wound that tests positive for MRSA on April 27<sup>th</sup>. On April 28<sup>th</sup> the resident tests positive for MRSA in blood. What LabID event(s) should be reported for this resident?

Answer: There are two LabID events for this resident. The first MRSA isolate of the month is reported, however subsequent MRSA isolates are not reported unless they are unique blood cultures. Therefore, the April 12<sup>th</sup> isolate from sputum meets the definition of a LabID event, but the wound culture on the 27<sup>th</sup> does not. Even though the culture on April 28<sup>th</sup> is not the first of the month, it is a unique blood culture and so it is also a confirmed MRSA LabID event.

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Case 2: A resident is admitted on August 29<sup>th</sup> and the resident's wound tests positive for MRSA. On September 3<sup>rd</sup> a repeat wound culture also tests positive for MRSA. What LabID event(s) should be reported?

Answer: Both should be reported! Even though the cultures may be related they occur in different months. Therefore, the wound culture on August 29<sup>th</sup> is counted for the month of August and the wound culture on September 3<sup>rd</sup> is counted as the first MRSA isolate for the month of September for that resident.

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Case 3: A resident tests positive for C.diff for the first time on February 24<sup>th</sup>. Another C.diff test is collected on March 2<sup>nd</sup> and is also positive. What LabID Event(s) should be reported?

Answer: Only the first C.diff assay on February 24<sup>th</sup> is reported as a LabID event because the assay on March 2<sup>nd</sup> is a duplicate assay as it falls within 2 weeks of the assay on February 24<sup>th</sup>. So even though the March 2<sup>nd</sup> assay is the first of the month, it is not reported because it falls within 2 weeks of a previous positive CDI assay.

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Case 4: A resident tests positive for C.diff on December 5<sup>th</sup>. It appeared that the resident's diarrhea had resolved, but after stopping treatment the diarrhea returns and the resident subsequently tests positive for C.diff a second time on December 22<sup>nd</sup>. What LabID Event(s) should be reported?

Answer: Both assays should be reported as CDI LabID events. Even though both assays were positive in the same month, the tests were separated by more than 2 weeks and are thus considered to be separate LabID events.