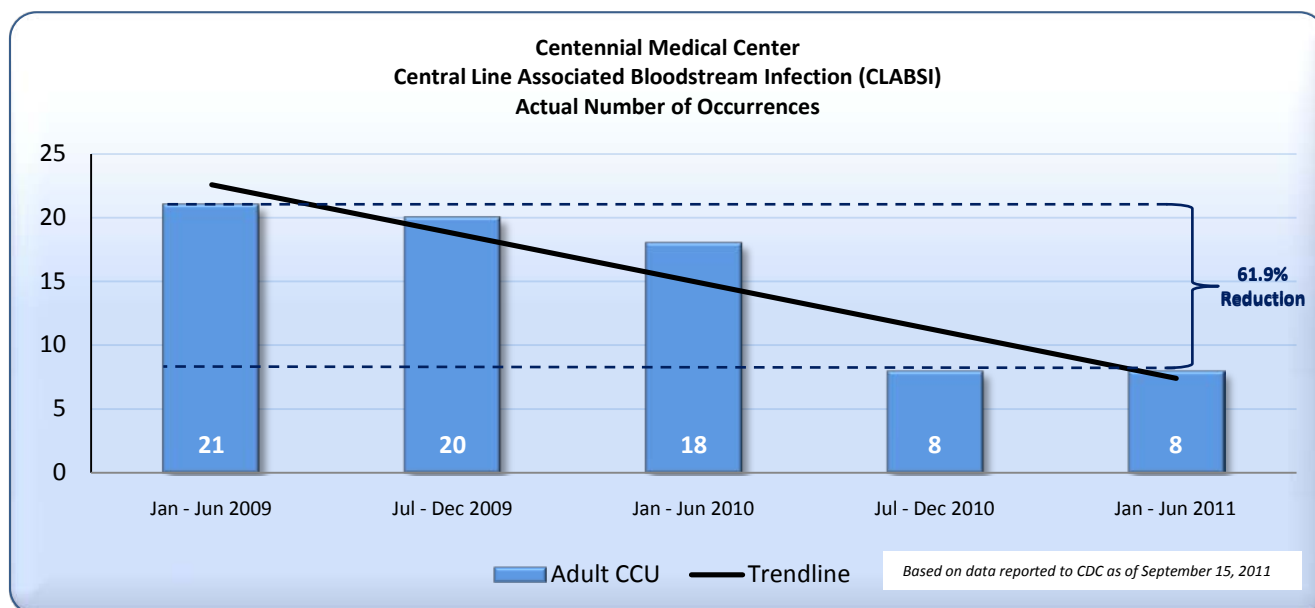


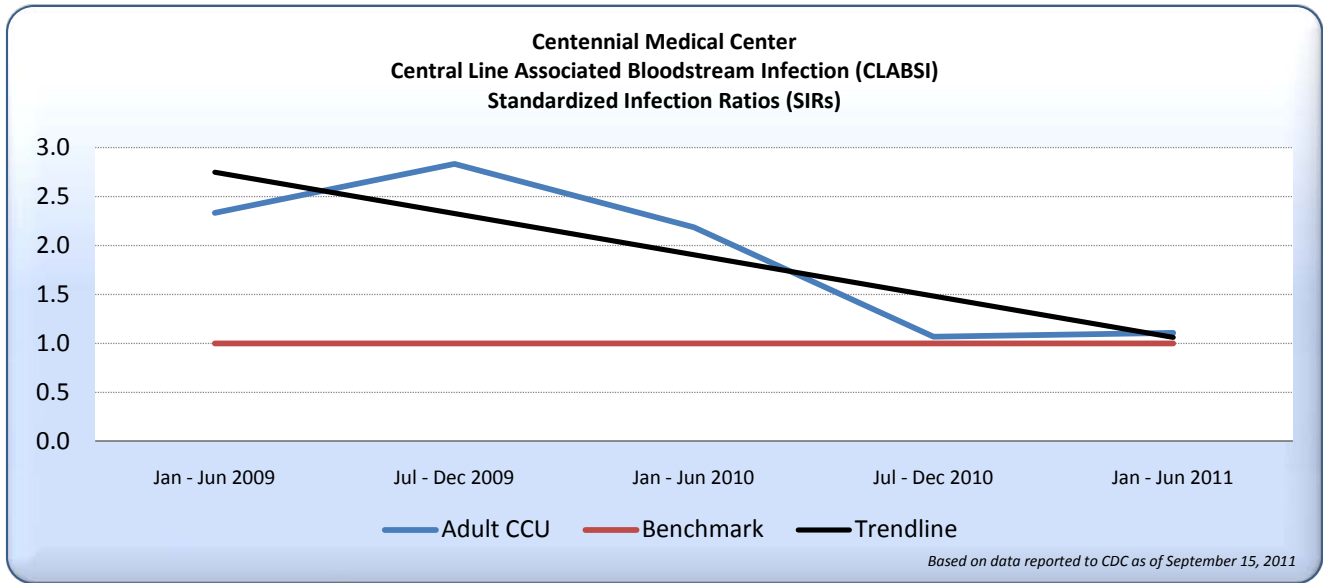
The Centers for Disease Control (CDC) estimates that over 248,000 central line-associated bloodstream infections (CLABSIs) occur each year in U.S. hospitals.

A “central line” or “central venous catheter” is a device that is used to give life saving medications, fluids and to draw blood. These devices are typically inserted in the large veins of the neck, chest, arm or groin. For infants and neonates, they may also be placed through the umbilical vein or artery. Central lines may be left in place for several weeks and can increase the risk for patients developing a bloodstream infection, as bacteria or other germs can travel down or through the catheter and enter the blood. For more information about CLABSIs, please visit SHEA’s website: http://www.shea-online.org/Assets/files/patient%20guides/New_Logo_CA-BSI_largertext_New_Logo.pdf

Centennial Medical Center has implemented nationally-recognized best practices for the insertion, care and maintenance of these lines. As a result, the number of infections has been reduced significantly since 2009.



The graph below shows our progress since January 2009. This graph reflects our Standardized Infection Ratio (SIR) for our Adult Critical Care Units (CCUs). The SIR is a number that the CDC calculates by dividing the number of observed infections by the number of expected infections. The number of expected infections, in the context of statistical prediction, is calculated using CLABSI rates from a standard population during a baseline time period.



The blue line is CMC’s Standardized Infection Ratio for the timeframe listed above. The red line is the National Benchmark, and the black line tracks our progress. This graph demonstrates our significant and sustained improvement with the clear reduction of our Standardized Infection Ratio.