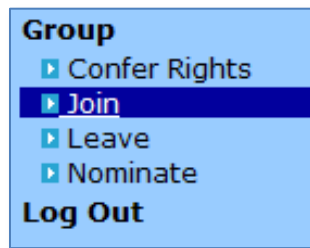


## How to Join the Texas NHSN Groups & Accept the Confer Rights Template General Hospitals

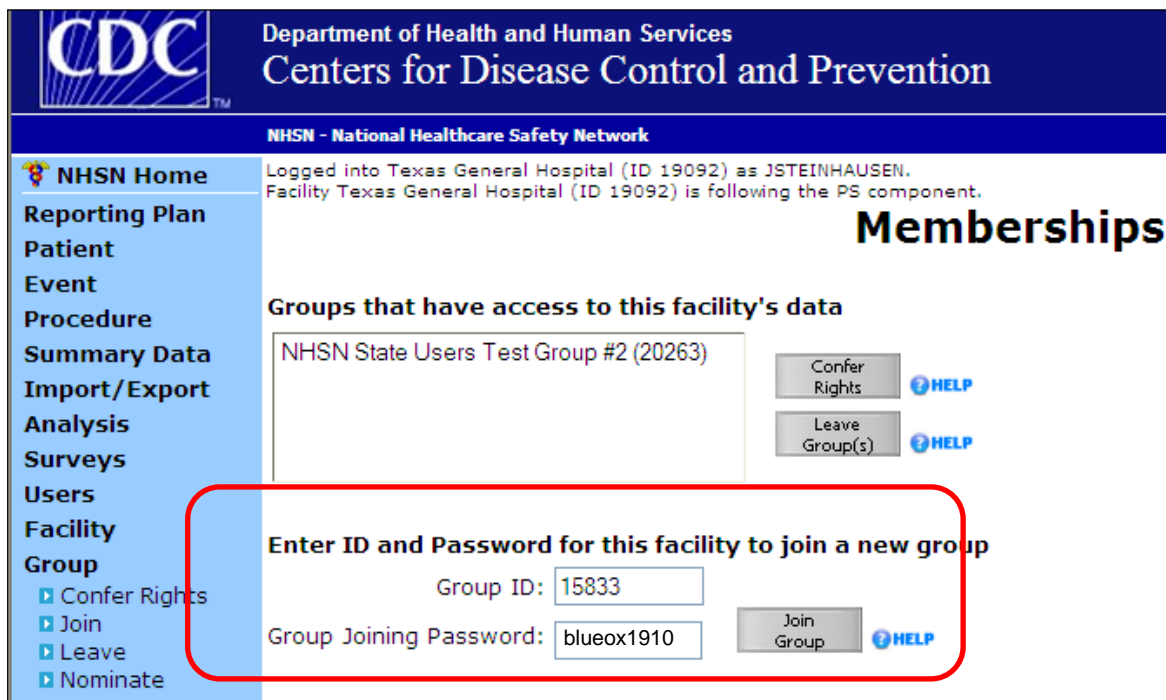
**NOTE:** General Hospitals will need to join the Texas group (group ID = 15833) in NHSN.

### Instructions for General Hospitals including Children’s hospitals:

1. Log into NHSN (<https://sdn.cdc.gov>)
2. From the blue navigation bar on the left side of the screen, click on “Group” and select “Join.”



3. Under the section “Enter ID and Password for this facility to join a new group,” enter “15833” for the box called “Group ID.” In the box for “Group Joining Password:” enter “blueox1910” and click on the “Join Group” button on the right.



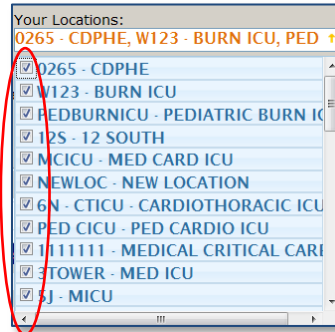
4. The Confer Rights-Patient Safety page will then be displayed. Scroll down to the section called “Infections and other Events (Not specific to MDRO/CDI).” In this section the first two rows and the last three rows should list your facility’s ICU locations under “Your

Locations:” (see screenshot below). Make sure all of your facility’s ICU locations are listed here, by clicking on the down arrow (circled in red).

**Note: only complete survey data are shared with groups.**

Infections and other Events (Not specific to MDRO/CDI)							
Plan	Month	Year	Month	Year	Event	Your Locations	N/A
In	10	2011	to		BSI - Bloodstream Infection (CLA)	0265 - CDPHE, W123 - BURN ICU, PED	<input type="checkbox"/>
					Location type: Location: (ALL)	Other Location Requirements: You must report CLABSIs in all of your ICUs/CCUs.	
In	10	2011	to		BSI - Bloodstream Infection (CLA)	10323-5 - NICU, NICU - 2W, NNC - NN	<input type="checkbox"/>
					Location type: Location: (ALL)	Other Location Requirements: You must report CLABSIs in all of your ICUs/CCUs.	
In	10	2011	to		SSI - Surgical Site Infection		<input type="checkbox"/>
					Location type: Location: (ALL)	Other Location Requirements: This applies to cancer hospitals only.	
In	7	2013	to		UTI - Urinary Tract Infection (Cath)	0265 - CDPHE, W123 - BURN ICU, PED	<input type="checkbox"/>
					Location type: Location: (ALL)	Other Location Requirements: You must report CAUTI data for all ICUs/CCUs.	
In	7	2013	to		UTI - Urinary Tract Infection (Cath)	ONC-ICU - ONCOLOGY MED SURG IC	<input type="checkbox"/>
					Location type: Location: (ALL)	Other Location Requirements: This applies to cancer hospitals only.	
In	1	2013	to		BSI - Bloodstream Infection (CLA)	ONC-ICU - ONCOLOGY MED SURG IC	<input type="checkbox"/>
					Location type: Location: (ALL)	Other Location Requirements: This applies to cancer hospitals only.	

A drop down menu will appear showing all the units in your facility of that location type. Be sure all the units listed are checked. **Note:** For the CC\_ONC location types, those of you who are not cancer hospitals will have a message in red that says “No locations meet criteria.”



- Next, scroll down to the section “Summary Data for Events.” Repeat step 4 (verify all ICU locations are listed) for each of the rows, as applicable in this section.

Summary Data for Events									
Plan	Month	Year	Month	Year	Location Type	Location	Other Location Requirements	Your Locations	N/A
In	10	2011	to		CC	(ALL)	You must report CLABSIs in all of your ICUs/CCUs.	0265 - CDPHE, W123 - BURN ICU, PED	<input type="checkbox"/>
In	10	2011	to		CC_N	(ALL)	You must report CLABSIs in all of your ICUs/CCUs.	10323-5 - NICU, NICU - 2W, NNC - NNC	<input type="checkbox"/>
In	7	2013	to		CC	(ALL)	You must report CAUTI data for all ICUs/CCUs.	0265 - CDPHE, W123 - BURN ICU, PED	<input type="checkbox"/>
In	7	2013	to		CC_ONC	(ALL)	This applies to cancer hospitals only.	ONC-ICU - ONCOLOGY MED SURG ICU	<input type="checkbox"/>
In	1	2013	to		CC_ONC	(ALL)	This applies to cancer hospitals only.	ONC-ICU - ONCOLOGY MED SURG ICU	<input type="checkbox"/>

6. Scroll back up to the section called “Infections and other Events (Not specific to MDRO/CDI).” There are 16 rows in this section that refer to the types of surgical procedures for which SSIs should be reported. **However**, the procedures that will be reported for children’s hospitals and adult general hospitals will differ and therefore, you will be required to N/A (by checking the N/A box on the right) certain rows.

**NOTE: IF YOU DO NOT CURRENTLY PERFORM A SPECIFIC SURGERY THAT YOUR FACILITY TYPE IS REQUIRED TO REPORT, DO NOT CHECK THE N/A BOX FOR THOSE PROCEDURES. This way, if your facility adds those procedures later, you will not have to change your conferred rights.**

**Adult care general hospitals ONLY:** Check the N/A box located on the right hand side of the webpage for VSHN, CARD, HTP, FUSN, RFUSN, & LAM procedures as these are only reportable for pediatric/adolescent specialty hospitals. See screenshot below.

In	1	2013 to			SSI - Surgical Site Infection	<input type="checkbox"/>
					Procedure: HYST - Abdominal hysterectomy	Setting: X IN X OUT
In	1	2013 to			SSI - Surgical Site Infection	<input type="checkbox"/>
					Procedure: VHYS - Vaginal hysterectomy	Setting: X IN X OUT
In	10	2011 to			SSI - Surgical Site Infection	<input checked="" type="checkbox"/>
					Procedure: VSHN - Ventricular shunt	Setting: X IN X OUT
In	1	2012 to			SSI - Surgical Site Infection	<input checked="" type="checkbox"/>
					Procedure: CARD - Cardiac surgery	Setting: X IN X OUT
In	1	2012 to			SSI - Surgical Site Infection	<input checked="" type="checkbox"/>
					Procedure: HTP - Heart transplant	Setting: X IN X OUT
In	1	2013 to			SSI - Surgical Site Infection	<input checked="" type="checkbox"/>
					Procedure: FUSN - Spinal fusion	Setting: X IN X OUT
In	1	2013 to			SSI - Surgical Site Infection	<input checked="" type="checkbox"/>
					Procedure: RFUSN - Refusion of spine	Setting: X IN X OUT
In	1	2013 to			SSI - Surgical Site Infection	<input checked="" type="checkbox"/>
					Procedure: LAM - Laminectomy	Setting: X IN X OUT
In	7	2013 to			UTI - Urinary Tract Infection (Cath)	<input type="checkbox"/>
					Location type: Location: Other Location Requirements:	Your Locations:
					CC (ALL) You must report CAUTI data for all ICUs/CCUs.	0265 - CDPHE, W123 - BURN ICU, PED ↓

**Pediatric/Adolescent general hospitals ONLY:** Check the N/A box located on the right hand side of the webpage for KPRO, HPRO, CBGB, CBGC, AAA, CEA, PVBY, COLO, HYST, & VHYS as these are only reportable for adult care hospitals.

In	10	2011 to	<input type="checkbox"/>	<input type="checkbox"/>	SSI - Surgical Site Infection	<input checked="" type="checkbox"/>
		Procedure:			Setting:	
		KPRO - Knee prosthesis			X IN X OUT	
In	1	2012 to	<input type="checkbox"/>	<input type="checkbox"/>	SSI - Surgical Site Infection	<input checked="" type="checkbox"/>
		Procedure:			Setting:	
		HPRO - Hip prosthesis			X IN X OUT	
In	1	2012 to	<input type="checkbox"/>	<input type="checkbox"/>	SSI - Surgical Site Infection	<input checked="" type="checkbox"/>
		Procedure:			Setting:	
		CBGB - Coronary bypass w/ chest & donor incisions			X IN X OUT	
In	1	2012 to	<input type="checkbox"/>	<input type="checkbox"/>	SSI - Surgical Site Infection	<input checked="" type="checkbox"/>
		Procedure:			Setting:	
		CBGC - Coronary bypass graft with chest incision			X IN X OUT	
In	1	2013 to	<input type="checkbox"/>	<input type="checkbox"/>	SSI - Surgical Site Infection	<input checked="" type="checkbox"/>
		Procedure:			Setting:	
		AAA - Abdominal aortic aneurysm repair			X IN X OUT	
In	1	2013 to	<input type="checkbox"/>	<input type="checkbox"/>	SSI - Surgical Site Infection	<input checked="" type="checkbox"/>
		Procedure:			Setting:	
		CEA - Carotid endarterectomy			X IN X OUT	
In	1	2013 to	<input type="checkbox"/>	<input type="checkbox"/>	SSI - Surgical Site Infection	<input checked="" type="checkbox"/>
		Procedure:			Setting:	
		PVBY - Peripheral vascular bypass surgery			X IN X OUT	
In	1	2013 to	<input type="checkbox"/>	<input type="checkbox"/>	SSI - Surgical Site Infection	<input checked="" type="checkbox"/>
		Procedure:			Setting:	
		COLO - Colon surgery			X IN X OUT	
In	1	2013 to	<input type="checkbox"/>	<input type="checkbox"/>	SSI - Surgical Site Infection	<input checked="" type="checkbox"/>
		Procedure:			Setting:	
		HYST - Abdominal hysterectomy			X IN X OUT	
In	1	2013 to	<input type="checkbox"/>	<input type="checkbox"/>	SSI - Surgical Site Infection	<input checked="" type="checkbox"/>
		Procedure:			Setting:	
		VHYS - Vaginal hysterectomy			X IN X OUT	

7. Scroll down to the section called “Denominator Data for Events.” This section should reflect the N/A’d boxes you checked in the “Infections and Other Events Section” above.

**Adult care general hospitals ONLY:**

Denominator Data for Events										
Plan	Month	Year	Month	Year	Procedure	Setting		N/A		
In	10	2011	to		KPRO - Knee prosthesis	X	IN	X	OUT	<input type="checkbox"/>
In	1	2012	to		HPRO - Hip prosthesis	X	IN	X	OUT	<input type="checkbox"/>
In	1	2012	to		CBGB - Coronary bypass w/ chest & donor incisions	X	IN	X	OUT	<input type="checkbox"/>
In	1	2012	to		CBGC - Coronary bypass graft with chest incision	X	IN	X	OUT	<input type="checkbox"/>
In	1	2013	to		AAA - Abdominal aortic aneurysm repair	X	IN	X	OUT	<input type="checkbox"/>
In	1	2013	to		CEA - Carotid endarterectomy	X	IN	X	OUT	<input type="checkbox"/>
In	1	2013	to		PVBY - Peripheral vascular bypass surgery	X	IN	X	OUT	<input type="checkbox"/>
In	1	2013	to		COLO - Colon surgery	X	IN	X	OUT	<input type="checkbox"/>
In	1	2013	to		HYST - Abdominal hysterectomy	X	IN	X	OUT	<input type="checkbox"/>
In	1	2013	to		VHYS - Vaginal hysterectomy	X	IN	X	OUT	<input type="checkbox"/>
In	10	2011	to		VSHN - Ventricular shunt	X	IN	X	OUT	<input checked="" type="checkbox"/>
In	1	2012	to		CARD - Cardiac surgery	X	IN	X	OUT	<input checked="" type="checkbox"/>
In	1	2012	to		HTP - Heart transplant	X	IN	X	OUT	<input checked="" type="checkbox"/>
In	1	2013	to		FUSN - Spinal fusion	X	IN	X	OUT	<input checked="" type="checkbox"/>
In	1	2013	to		RFUSN - Refusion of spine	X	IN	X	OUT	<input checked="" type="checkbox"/>
In	1	2013	to		LAM - Laminectomy	X	IN	X	OUT	<input checked="" type="checkbox"/>

**Pediatric/Adolescent general hospitals ONLY:**

Denominator Data for Events										
Plan	Month	Year	Month	Year	Procedure	Setting		N/A		
In	10	2011	to		KPRO - Knee prosthesis	X	IN	X	OUT	<input checked="" type="checkbox"/>
In	1	2012	to		HPRO - Hip prosthesis	X	IN	X	OUT	<input checked="" type="checkbox"/>
In	1	2012	to		CBGB - Coronary bypass w/ chest & donor incisions	X	IN	X	OUT	<input checked="" type="checkbox"/>
In	1	2012	to		CBGC - Coronary bypass graft with chest incision	X	IN	X	OUT	<input checked="" type="checkbox"/>
In	1	2013	to		AAA - Abdominal aortic aneurysm repair	X	IN	X	OUT	<input checked="" type="checkbox"/>
In	1	2013	to		CEA - Carotid endarterectomy	X	IN	X	OUT	<input checked="" type="checkbox"/>
In	1	2013	to		PVBY - Peripheral vascular bypass surgery	X	IN	X	OUT	<input checked="" type="checkbox"/>
In	1	2013	to		COLO - Colon surgery	X	IN	X	OUT	<input checked="" type="checkbox"/>
In	1	2013	to		HYST - Abdominal hysterectomy	X	IN	X	OUT	<input checked="" type="checkbox"/>
In	1	2013	to		VHYS - Vaginal hysterectomy	X	IN	X	OUT	<input checked="" type="checkbox"/>
In	10	2011	to		VSHN - Ventricular shunt	X	IN	X	OUT	<input type="checkbox"/>
In	1	2012	to		CARD - Cardiac surgery	X	IN	X	OUT	<input type="checkbox"/>
In	1	2012	to		HTP - Heart transplant	X	IN	X	OUT	<input type="checkbox"/>
In	1	2013	to		FUSN - Spinal fusion	X	IN	X	OUT	<input type="checkbox"/>
In	1	2013	to		RFUSN - Refusion of spine	X	IN	X	OUT	<input type="checkbox"/>
In	1	2013	to		LAM - Laminectomy	X	IN	X	OUT	<input type="checkbox"/>

8. **Scroll past the last 5 sections, all the way to the bottom of the screen.** Regardless of whether you are reporting these data to other entities (e.g. CMS), the last 5 sections have been left blank because they are not reportable to Texas and therefore you do not need to confer rights to that data. Click “Accept” Button.

Antimicrobial Use and Resistance										
Plan	Month	Year	Month	Year	Location Type	Location	Other	Location Requirements	Your Locations	N/A

Summary Data for Vaccinations						
Plan	Month	Year	Month	Year	Vaccination Type	N/A

MDRO/CDI Events										
Plan	Month	Year	Month	Year	Location Type	Location	Other	Location Requirements	Your Locations	N/A

MDRO/CDI Summary Data (Denominators)										
Plan	Month	Year	Month	Year	Location Type	Location	Other	Location Requirements	Your Locations	N/A

MDRO/CDI Process & Outcome Measures										
Plan	Month	Year	Month	Year	Location Type	Location	Other	Location Requirements	Your Locations	N/A

9. You should see green checkmark and a confirmation message that says “Conferred Rights saved successfully for group Texas (15833).”