



# Annual Report

## Healthcare-Associated Infections in Alabama

2011

---

Alabama Department of Public Health

201 Monroe Street

Montgomery, AL 36104

Phone: 334-206-5971 Toll Free: 1-800-338-8374 Web: [www.adph.org/hai](http://www.adph.org/hai)



---

## CONTENTS

---

Executive Summary	4
Introduction	5
Healthcare Facilities Defined	5
Method of HAI Data Collection	5
Reporting Variables	7
Catheter Associated Urinary Tract Infections (CAUTI)	7
Central Line Associated Bloodstream Infection (CLABSI)	7
Surgical Site Infection (SSI)	8
Volume (Low, Medium, and High)	8
Accuracy in HAI Reporting	9
ADPH Data Validation Program	9
Training	10
Performance Measurement	11
Minimal Reporting Thresholds	11
Risk Adjustment	11
Standardized Infection Ratio	11
Hospital Performance Compared to National	12
HAI Data, Statewide	13
Pathogen's involved in Surgical Site Infections, 2011	15
HAI Data, Hospital Specific	16
Alabama General Critical Access Facilities	46
Alabama Healthcare Data Advisory Council Members, 2012	49

---



**This report has been prepared by the Alabama Department of Public Health.**

**Healthcare-Associated Infections Program**

Kelly Stevens, M.S., Epidemiology Division Director

Nadine Crawford, M.S.N., R.N., State Healthcare-Associated Infection Coordinator

Dagny Magill, M.P.H., Epidemiologist

**Healthcare-Associated Infection Advisory Council**

Chairman: Donald E. Williamson, M.D., State Health Officer

*For a complete list of HAI Advisory Council members, please see [Alabama Healthcare Data Advisory Council Members, 2012](#)*



## Executive Summary

In 2011, Alabama hospitals began reporting infection measures to the Alabama Department of Public Health (ADPH): catheter associated urinary tract infection (CAUTI), central line-associated blood stream infection (CLABSI), surgical site infection (SSI) associated with colon surgery, and SSI associated with abdominal hysterectomy. Infection measure data is required to be reported into the National Healthcare and Safety Network (NHSN) each month.

In 2011 there were 359 CAUTIs associated with 214,809 catheter days in Alabama general, critical access, and specialized hospitals reported in NHSN. The standardized infection ratio (SIR) was found to be 0.959, and was considered to be similar to national performance. Ninety-two facilities met the criteria required to report CAUTI data. Five facilities had fewer infections compared to national infection averages (statistically significant), and were considered to have performed better than the national average. Four facilities performed below the national performance level with regard to the CAUTI infections number.

In 2011, 145 CLABSIs were reported in Alabama and associated with 118,423 central line days. Taken as a whole, the state of Alabama performed better compared to national performance, with an SIR of 0.623. Seventy-four facilities met the criteria for required CLABSI reporting. Of these 74, ten facilities had statistically significantly fewer infections compared to the national averages, and were considered to have performed better than the national performance. One facility had statistically significantly higher infections compared to national, and was considered to have performed below the national performance.

Alabama hospitals reported 5,250 colon surgery procedures. There were 228 SSIs associated with these procedures. Overall, Alabama performed better than national performance (SIR = 0.704). Among the hospitals required to report HAIs, there were 73 facilities that performed colon surgeries. Of these, five facilities had statistically significantly fewer infections compared to the national performance. No hospitals in this report had a statistically significantly higher infection rate compared to national performance.

Sixty-five Alabama hospitals included in this report performed 6,779 abdominal hysterectomies in 2011. There were 75 surgical site infections associated with these hysterectomy procedures, resulting in an SIR of 0.654, and a performance comparison that was better than the national performance. Only one facility had statistically significantly fewer infections compared to the national average. Additionally, one facility had statistically significantly higher infections compared to national average.



## Introduction

The Centers for Disease Control and Prevention (CDC), has estimated that nearly 1.7 million patients in the United States each year will develop a healthcare-associated infection (HAI)<sup>1</sup>. Approximately 99,000 deaths each year are caused by or associated with an HAI, a fatality count higher than any other notifiable condition<sup>1</sup>. This number of infections creates a burden to the population in terms of morbidity and mortality, as well as a monetary burden. An estimated \$28.4 - 45 billion of direct healthcare costs are attributable to HAIs each year in the United States<sup>2</sup>.

In an effort to combat HAIs, Alabama passed the Mike Denton Infection Reporting Act (SB98) on August 1, 2009, which requires the collection and reporting of certain HAI data by Alabama healthcare facilities. The Act designates the Alabama Department of Public Health (ADPH) as the agency responsible for the analysis of submitted data and creates a Healthcare Data Advisory Council to assist with development of the HAI reporting and prevention program. Additionally, the Act makes provisions for the development of certain rules and regulations and the development of public reports comparing the HAI data.

*For more details regarding the Advisory Council members, the Alabama State HAI Action Plan, Alabama Reporting Prevention Program, Rules and Regulations, and NHSN visit <http://www.ADPH.org/HAI>.*

## Healthcare Facilities Defined

In accordance with the Rules and Regulations supporting the Mike Denton Infection Reporting Act, healthcare facilities are defined as general, critical access, and specialized hospitals, including pediatric hospitals but excluding psychiatric, rehabilitation, long term care, and eye hospitals, licensed pursuant to Code of Ala. 1975, § 22-21-20.

*For a complete list of the healthcare facilities included in this report, please see [Alabama General Critical Access Facilities](#).*

## Method of HAI Data Collection

An HAI describes an infection that a patient acquires while in a healthcare setting that was not present or developing before the patient was admitted to the facility. For the purposes of HAI reporting in Alabama, an HAI must meet specific criteria defined in CDC's National Health Surveillance Network (NHSN).





The NHSN is a secure, internet-based surveillance system which is used for the collection and reporting of HAI data by trained infection preventionists (IPs) or other trained NHSN Users at each healthcare facility in Alabama. The IPs and NHSN Users are required to enter the HAI data into NHSN no later than the last day of the subsequent month. Each Alabama healthcare facility must grant permission for ADPH HAI program staff to view and analyze the designated HAI data using NHSN to compile reports for public reporting.



The HAI data required to be reported in NHSN for Alabama include certain Surgical Site Infections (SSIs), Catheter-Associated Urinary Tract Infections (CAUTIs), and Central Line-Associated Bloodstream Infections (CLABSIs).

<sup>1</sup> Division of Healthcare Quality Promotion, Coordinating Center for Infectious Diseases, Centers for Disease Control and Prevention (2009). *The Direct Medical Costs of Healthcare-Associated Infections in U.S. Hospitals and the Benefits of Prevention*. Scott, R. Douglas II. Retrieved on September 10, 2012 from [http://www.cdc.gov/hai/pdfs/hai/scott\\_costpaper.pdf](http://www.cdc.gov/hai/pdfs/hai/scott_costpaper.pdf)

<sup>2</sup> Klevens, R.M., J. R. Edwards, C. L. Richards (2007). Estimating Health Care-Associated Infections and Deaths in U.S. Hospitals, 2002, *Public Health Reports*, Volume 122, pages 160-166. Retrieved on September 10, 2012 from [http://www.cdc.gov/HAI/pdfs/hai/infections\\_deaths.pdf](http://www.cdc.gov/HAI/pdfs/hai/infections_deaths.pdf)



## Reporting Variables

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

An indwelling urethral catheter, also referred to as a Foley catheter, is a urine drainage tube that is connected to a closed drainage system (bag). The catheter is inserted into the bladder through the urethra for the collection of urine over a period of time.

A CAUTI is an infection associated with an indwelling urethral catheter. A CAUTI must be reported if it meets NHSN established criteria and occurs in a patient that has had an indwelling urethral catheter in place within 48 hours before the onset of the UTI. The patient must be symptomatic.

During 2011, CAUTIs that were attributed to medical wards/floors, surgical wards/floors, or medical surgical wards/floors were required to be reported using the CDC National Healthcare Safety Network (NHSN) based on Alabama's HAI Infection Reporting Rules. Facilities were also required to report the number of patients (patient days) and the number of patients with indwelling urethral catheters (catheter days) from the above locations using NHSN monthly. The patient days and catheter days must be assessed at the same time each day; however, the time of day for collection was based on facility preference.

### **Central Line-Associated Bloodstream Infection (CLABSI)**

A central line is a catheter that is inserted into one of the great (large) blood vessels that terminates near the heart. Central line catheters are used for the administration of fluids, medication, intravenous nutrition, hemodynamic monitoring, and drawing blood for laboratory testing.

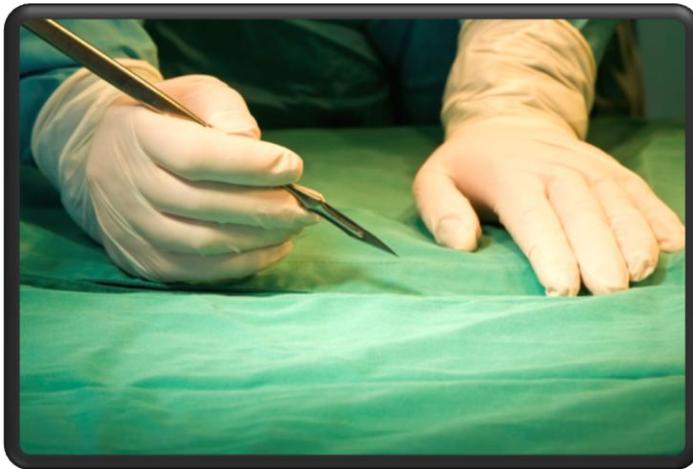
A CLABSI is an infection that results from a central line catheter or umbilical catheter (if patient is less than one year old). A CLABSI must be reportable if it meets NHSN established criteria and occurs in a patient that has had a central line or umbilical catheter in place at the time of, or within 48 hours before a laboratory-confirmed bloodstream infection event occurs, and the bloodstream infection is not caused by an infection at another site in the body.

During 2011, CLABSIs that were attributed to medical intensive care unit (ICU), surgical ICU, medical/surgical ICU, or pediatric ICU were required to be reported using NHSN based on Alabama's HAI Infection Reporting Rules. Facilities were also required to report the number of patients per day (patient days), and the number of patients per day with central lines (central line days) using CDC's NHSN each month from the above care unit locations. The patient days and central line days must be tallied at the same time each day; however, the time of day for collection was based on facility preference.



## Surgical Site Infection (SSI)

An SSI is a procedure-associated HAI, resulting from an inpatient or outpatient surgery, during which an incision was made through the skin or mucous membranes. An SSI is reported if an infection occurs in a patient within 30 days of the operative procedure. If an implant was left in place during the operative procedure, the time frame in which an infection can be attributed to the procedure is expanded to within one year of the surgery. ADPH only collects data on inpatient procedures, i.e., those in which the date of admission and date of discharge are different.



During 2011, SSIs resulting from inpatient colon surgeries or abdominal hysterectomies in an Alabama healthcare facility or post discharge were required to be reported using CDC's National Healthcare Safety Network (NHSN) based on Alabama's HAI Infection Reporting Rules. Facilities were also required to report the number of colon surgeries and abdominal hysterectomies that were performed each month using CDC's NHSN.

Colon surgery is a surgical procedure in which a portion of the colon or intestine is operated on, including incision, resection, or anastomosis (reconnection) of the large intestine. Abdominal hysterectomy is a surgical procedure in which the uterus is removed through an incision in the lower abdomen. It may include removal of one or both ovaries, fallopian tubes, and use of laparoscopic or robotic surgical approaches.

## Volume (Low, Medium, and High)

Volume was based on the number of device days which was representative of number of procedures performed. Low volume consisted of hospitals whose device utilization days or procedure counts were within the lowest quartile. Medium volume consisted of hospitals whose device utilization days or procedure counts were in the 2<sup>nd</sup> and 3<sup>rd</sup> quartiles. And the high volume category consisted of hospitals whose device utilization days or procedure counts were in the highest quartile.



# Accuracy in HAI Reporting

## ADPH Data Validation Program

**Background:** The Mike Denton Infection Reporting Act assigns the Alabama Department of Public Health (ADPH) the responsibility and authority to evaluate the quality and accuracy of HAI reporting. As required in the law, the Healthcare Data Advisory Council was established to advise the Department regarding public reporting of HAIs. The Advisory Council agreed that validation of each healthcare facility's individual surveillance program was necessary to ensure that accurate data is presented to the public. Validation ensures that a program operates on correct and useful data.

**Purpose:** The purpose of the ADPH validation process is to:

1. Foster understanding of reporting expectations.
2. Improve reporting accuracy.
3. Provide opportunity for improving surveillance methods/resources.
4. Provide opportunity to correct errors prior to public report.
5. Identify system issues affecting accurate reporting.
6. Engage/compel internal communication.
7. Minimize hospital reporting misconceptions.
8. Provide an educational opportunity, not a regulatory visit (regulatory visits will be limited to willful and intentional failure to report).

**Methods:** A variety of methods will be utilized to validate the different aspects of the reporting program. The methods include but are not limited to:

1. Verify that all Facility Administrators (FA) complete the minimal required National Healthcare Safety Network (NHSN) and ADPH training.
2. Ensure each facility has granted ADPH permission to view the data, i.e., conferred rights.
3. Review Monthly Plans for each facility.
4. Notify NHSN FA of noted discrepancies for correction.

**Reporting Validation:** This procedure will be performed for each facility, for each HAI category that is required to be reported.

1. A biannual report of NHSN data for each facility is provided to facilities to identify discrepancies.
2. Monthly data submitted is reviewed for consistency and completeness.
3. Facilities are notified through e-mail or phone regarding missing, inconsistent, or duplicate data for the review period.
4. The facility has 45 days to verify the data and make corrections if needed.



**Site Visits:** Site visits are made at the facility's request, for repeated errors, or as part of a random validation process. In 2011, 30 site visits were conducted.

The site visit consists of three components:

1. Validate the HAIs that are reported meet the case criteria (case finding, laboratory notification, and data mining).
2. Assesses whether the Infection Preventionist (IP) applies the NHSN definitions correctly
3. Assures cases are detected and whether NHSN definitions are applied correctly. (Sensitivity and specificity of data).

Each hospital's infection surveillance program's records and the NHSN line listing for the review period are the main information sources used in this portion of the validation process. Laboratory results and data mining results may also be incorporated. Facility representatives are debriefed at the end of the visit.

## **Training**

Hospitals are required to have one NHSN Facility Administrator who has completed NHSN and ADPH training in NHSN and HAI reporting. The ADPH HAI website is updated to include the training information, newsletters, and tips. Training is offered periodically throughout the year.

During the 2011 reporting year, four regional training classes reviewing reporting techniques, infection identification, case classification, and data entry were led by the HAI team. Collaboration with the Alabama Hospital Association (AHA) and with the Alabama Healthcare Quality Initiative has provided additional opportunities for training and reviews. Additionally, HAI staff was available for one-on-one training opportunities upon request.



# Performance Measurement

## Minimal Reporting Thresholds

Alabama healthcare facilities that perform low numbers of surgical procedures, or insert few central lines or indwelling urinary catheters may have infection rates that appear high or low only because of the number of cases performed. For example, if a healthcare facility only performs two colon surgeries in a year, one of which results in a colon SSI, the facility's colon SSI rate would be 50%. However, a similar facility which performs two colon surgeries in a year with neither resulting in a colon SSI, would calculate a colon SSI rate of 0%.

To decrease the risk of unfairly comparing healthcare facility rates, the Healthcare Data Advisory Council adopted CDC's NHSN minimum thresholds used in their Annual National HAI Report. The minimum thresholds indicate that standardized infection ratios (the comparison measure used for the report) will only be calculated if the predicted number of infections, based on the individual facility's denominator data (procedure counts or device days) and the national rates, are greater than or equal to one.

## Risk Adjustment

To ensure the process of determining facilities' performance compared to other facilities nationwide, statistical risk stratification was necessary. Risk stratification is important in comparisons to avoid penalizing facilities for performing procedures, or utilizing catheters or central lines, in patients that may carry higher risk of infection or complications. For CAUTI and CLABSI surveillance, facility locations or wards (e.g. surgical ICU) are used in risk adjustment. For procedures, the patient's pre-surgical medical status, length of surgery compared to similar surgeries, and the extent of the contamination of the surgical wound are taken into account for risk adjustment. For SSIs, logistic regression models were used to calculate the risk adjustment.

## Standardized Infection Ratio

To determine the comparison of a facility to other facilities nationally, the Standardized Infection Ratio (SIR) is used. The SIR is the number of infections the facility reported, over the number of infections that were predicted based on national averages. The predicted number of infections is determined by taking into account the "risk" of the event, and the number of events that occurred (e.g. the number of central line days).

$$SIR = \frac{\textit{observed}}{\textit{predicted}}$$



- When an SIR is equal to the number one, the Observed number of events is the same as the predicted number.
- When the SIR is greater than the number one, the Observed number of events is more than the predicted number.
- When the SIR is less than one, the Observed number of events is less than the predicted number.

**Note:** The SIR is only calculated if the predicted number is greater than 1. Predicted numbers equal or less than one indicate too few procedures performed or device days to calculate a precise SIR and comparative statistics.

For more information regarding SIRs, please visit  
[http://www.cdc.gov/nhsn/PDFs/Newsletters/NHSN\\_NL\\_OCT\\_2010SE\\_final.pdf](http://www.cdc.gov/nhsn/PDFs/Newsletters/NHSN_NL_OCT_2010SE_final.pdf).

## Hospital Performance Compared to National

A facility's "performance compared to the national performance" is determined by calculating the 95% confidence interval of the SIR. Facilities that do not show a statistically significantly different infection number compared to the national average are considered to be "Similar" to the national average. Facilities that show a statistically significantly high number of infection will be considered "Worse". Facilities that show a statistically significantly lower number of infection will be considered "Better". A statistically significant number indicates an infection rate that is not likely due to chance.

The Comparison to the National Average is based on the SIR and its associated Confidence Interval. If the SIR has a confidence interval that includes the number one (one being considered no difference in risk), it is considered to not be statistically significant. If the SIR has a confidence interval that does not include the number one, then it is considered to be statistically significant, or, not likely due to chance.

Comparisons which are statistically significantly higher than the national average indicate a greater risk of infection compared to the average of hospitals across the nation. Comparisons which are statistically significantly lower than the national average indicate a lower risk of infection compared to the average of hospitals across the nation. These are based on a 95% confidence interval.

Note: Because the comparison is based on SIRs *and* the 95% confidence interval, occasionally you may have a facility considered 'similar to the national' or 'not statistically different', with an SIR that would appear similar to a facility that is considered 'statistically different'. This is because confidence intervals are related to the sample size.

For example, Hospital A has an SIR of .80 and is considered statistically lower than the national average. Hospital B has an SIR of .75 yet is considered similar to the national average. This is because the denominator used (procedures performed or device days) was not large enough for the confidence interval to exclude one.



## HAI Data, Statewide

In 2011, there were 359 catheter-associated urinary tract infections associated with general, critical access, and specialized hospitals reporting in NHSN for Alabama. The SIR was found to be 0.959, and was considered to be similar to national performance.

Only five of these infections were associated with hospitals having fewer than 583 catheter days in 2011. The SIR for these Low Volume Hospitals was 0.353, and was considered to have performed better than national performance. Hospitals of medium volume, those that had 583 to 3,595 catheter days, were found to have performed similarly to national performance. Likewise, high volume facilities performed similarly to national.

Catheter-associated urinary tract infections				
	Number of Catheter Days	Number of CAUTI	Ratio of Actual to Predicted Infections (SIR)	Performance Compared to National Performance
<b>Alabama- all facilities</b>	<b>214,809</b>	<b>359</b>	<b>0.959</b>	<b>Similar</b>
<b>Low Volume Hospitals</b> (less than 583 catheter days)	7,906	5	0.353	Better
<b>Medium Volume Hospitals</b> (583-3,595 catheter days)	72,876	117	0.951	Similar
<b>High Volume Hospitals</b> (more than 3,595 catheter days)	134,027	237	0.999	Similar

In 2011, there were 145 CLABSIs in Alabama and 118,423 central line days. Alabama had better performance compared to national, with an SIR of 0.623. Alabama's high volume hospitals, those with more than 1,917 central line days, also performed better than national collectively. Low and medium volume hospitals were found to have performed similar to national in regard to CLABSI infection surveillance.

Central-line-associated blood stream infections				
	Number of Central Line Days	Number of CLABSI	Ratio of Actual to Predicted Infections (SIR)	Hospital Performance Compared to National Performance
<b>Alabama- all facilities</b>	<b>118,423</b>	<b>145</b>	<b>0.623</b>	<b>Better</b>
<b>Low Volume Hospitals</b> (less than 152 central line days)	1,554	3	1.251	Similar
<b>Medium Volume Hospitals</b> (152-1,917 central line days)	27,537	44	0.880	Similar
<b>High Volume Hospitals</b> (more than 1,917 central line days)	89,332	98	0.544	Better



Alabama hospitals incorporated in this HAI surveillance performed a reported 5,250 colon surgery procedures. There were a reported 228 surgical site infections associated with these procedures. Overall, Alabama had fewer infections compared to the national average. This trend was seen in all volumes of hospitals, though high and medium volume facilities showed statistically significantly fewer infections compared to the national rates.

Surgical site infections associated with colon surgeries				
	Number of Procedures	Number of SSI	Ratio of Actual to Predicted Infections (SIR)	Hospital Performance Compared to National Performance
<b>Alabama- all facilities</b>	<b>5,250</b>	<b>228</b>	<b>0.704</b>	<b>Better</b>
<b>Low Volume Hospitals</b> (less than 12 procedures)	112	3	0.442	Similar
<b>Medium Volume Hospitals</b> (12-96 procedures)	1,550	66	0.731	Better
<b>High Volume Hospitals</b> (more than 96 procedures)	3,588	159	0.702	Better

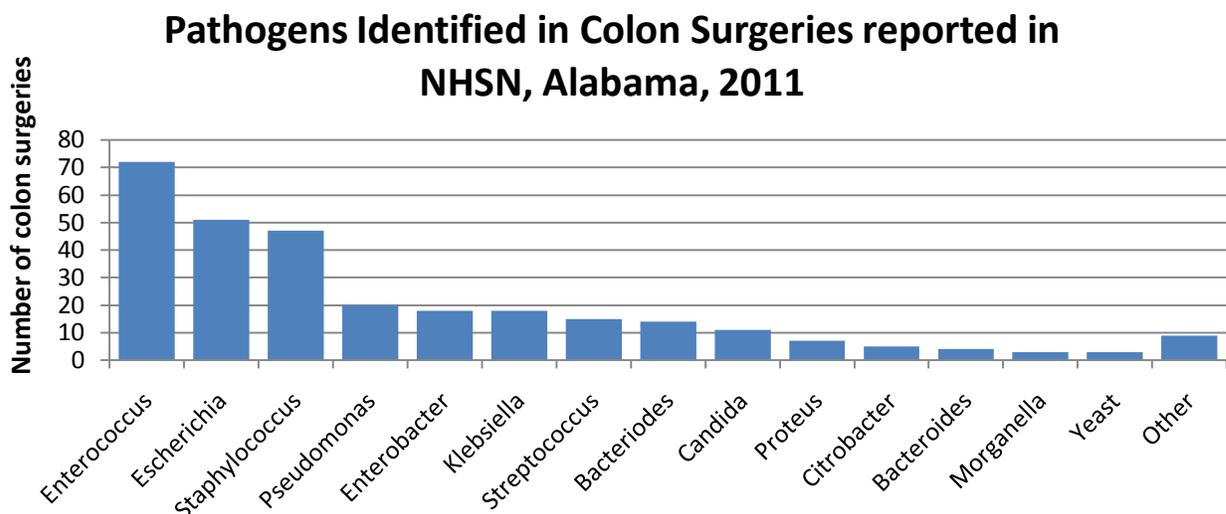
Alabama hospitals reported performing 6,779 abdominal hysterectomy surgeries. There were 75 surgical site infections associated with these hysterectomy procedures, giving Alabama a Standardized Infection Ratio of 0.654, and a comparison that was better than the national performance. Five infections were associated with the 91 procedures done by Alabama's low volume hospitals, giving a high SIR of 2.053. Despite the high SIR, taking into account the confidence intervals, this was not statistically significantly different compared to the national performance. Both medium volume hospitals and high volume hospitals performed better than expected showing statistically significantly fewer infections compared to the national averages.

Surgical site infections associated with abdominal hysterectomies				
	Number of Procedures	Number of SSI	Ratio of Actual to Predicted Infections (SIR)	Hospital Performance Compared to National Performance
<b>Alabama- all facilities</b>	<b>6,779</b>	<b>75</b>	<b>0.654</b>	<b>Better</b>
<b>Low Volume Hospitals</b> (less than 11 procedures)	91	5	2.053	Similar
<b>Medium Volume Hospitals</b> (11-105 procedures)	1,544	21	0.638	Better
<b>High Volume Hospitals</b> (more than 105 procedures)	5,144	49	0.618	Better



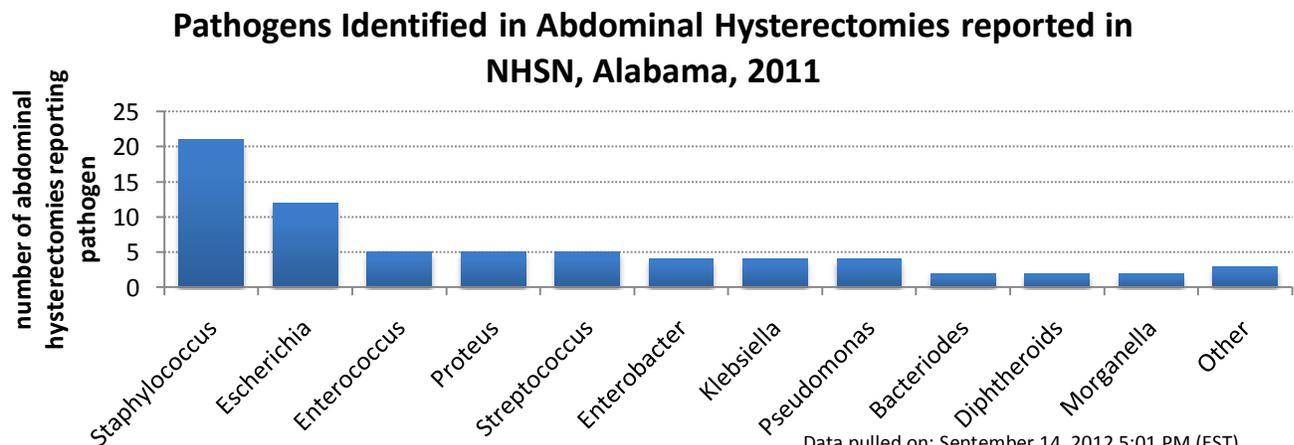
## Pathogens involved in Surgical Site Infections, 2011

In Alabama in 2011, *Enterococcus* species were the most commonly identified pathogen in colon surgery SSIs in which pathogen level data was available. Approximately 24.2% of SSIs reported identified an *Enterococcus* species. *Escherichia* species were identified in 17.2%, and *Staphylococcus* 15.8% of colon surgery SSIs.



Data pulled on: September 14, 2012 5:01 PM (EST)

Abdominal hysterectomy SSIs in which pathogen data was available, reported *Staphylococcus* species were most commonly associated pathogen, making up approximately 30.4% of pathogens. *Escherichia* was the second commonly reported infection, 17.4%, in abdominal hysterectomy SSIs.

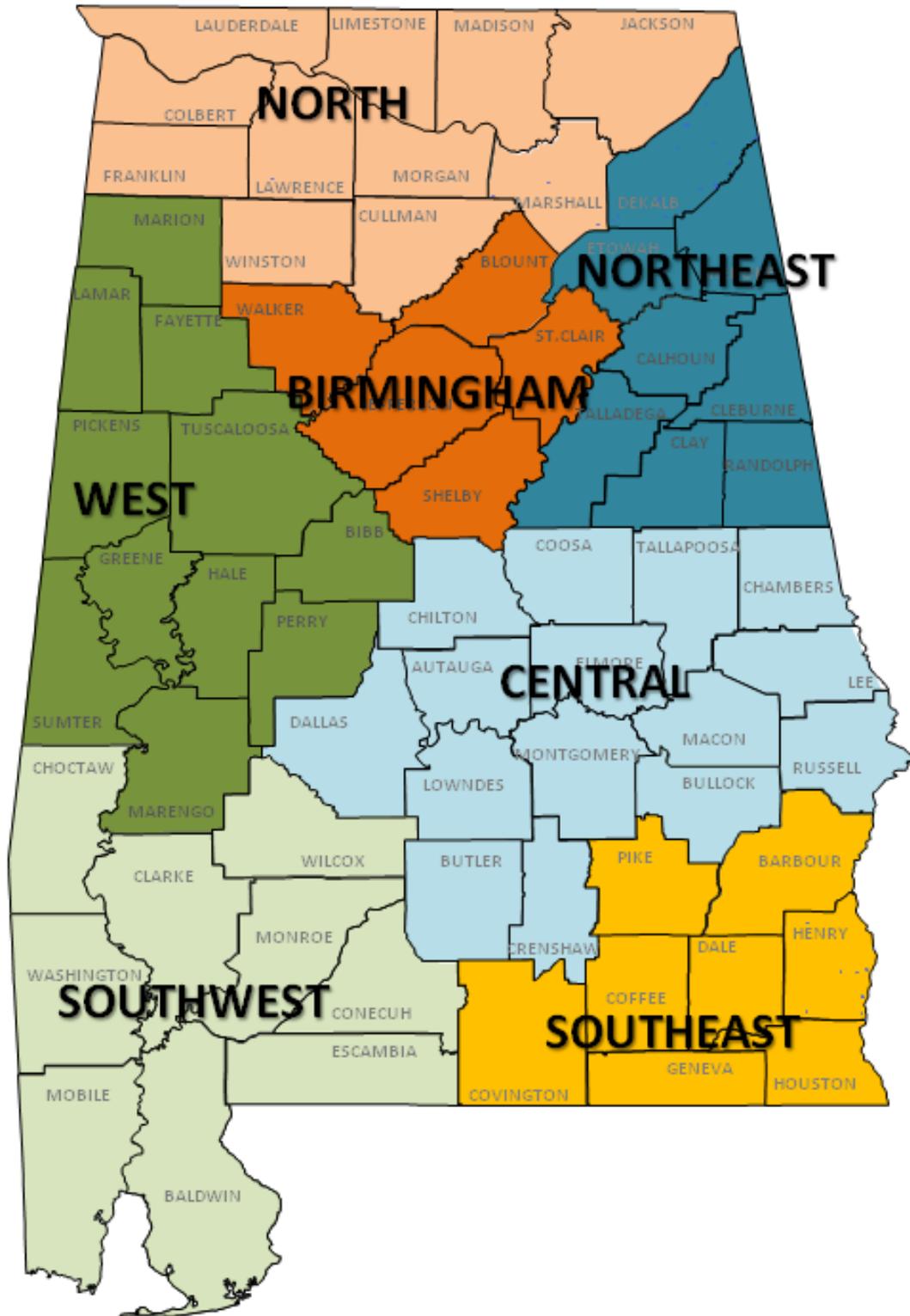


Data pulled on: September 14, 2012 5:01 PM (EST)



## HAI Data, Hospital Specific

The following tables list individual hospital performance in each of the four infection measures: CAUTI (pages 18-25), CLABSI (pages 26-32), Colon SSI (pages 33-39), and Abdominal Hysterectomy SSI (pages 40-46). The hospitals are arranged by geographical region in which the hospital is located. The region boundary is designated by the Alabama Hospital Association (AIAHA) regions. Hospitals are then arranged by number of device days or procedures performed.



HAI Reporting Regions



BIRMINGHAM REGION				
Alabama Catheter-Associated Urinary Tract Infections (CAUTI) January 1, 2011 – December 31, 2011				
Hospital Name	Number of Catheter Days	Number of CAUTI	Ratio of Actual to Predicted Infections (SIR)	Hospital Performance Compared to National Performance
<b>Low Volume Hospitals (fewer than 583 catheter days)</b>				
St. Vincent's St. Clair	515	1	N/A	N/A
<b>Medium Volume Hospitals (583-3,595 catheter days)</b>				
St. Vincent's Blount	607	0	N/A	N/A
Medical West	1,930	0	0	Similar
Trinity Medical Center	1,841	2	0.679	Similar
Brookwood Medical Center	2,426	5	1.123	Similar
Cooper Green Mercy Hospital	1,004	2	1.245	Similar
<b>High Volume Hospitals (more than 3,595 catheter days)</b>				
UAB Hospital	4,448	4	0.518	Similar
Walker Baptist Medical Center	5,328	5	0.534	Similar
St. Vincent Hospital	6,079	8	0.693	Similar
St. Vincent's East	4,093	6	0.916	Similar
Princeton Baptist Medical Center	10,724	20	1.000	Similar
Shelby Baptist Medical Center	7,830	13	1.038	Similar

Data pulled on: September 14, 2012 5:01 PM (EST)

**N/A:** Hospital submitted data though number of catheter days was too few for SIR and performance comparisons to be accurately calculated.

**Catheter days:** The sum of patients per day with an indwelling catheter in general medical, surgical, and medical/surgical wards.

**CAUTI:** Urinary tract infections resulting from indwelling catheters and occurring in general medical, surgical, and medical/surgical wards.

**SIR:** The standardized infection ratio is the ratio of observed infections to predicted infections based on the accumulated risks of the locations (based on national data).

**Better:** Indicates a facility that has statistically, significantly fewer infections compared to national averages (based on a 95% confidence interval).

**Similar:** Indicates a facility that does not have statistically, significantly different infections compared to national averages (based on a 95% confidence interval).

**Worse:** Indicates a facility that has statistically, significantly more infections compared to national averages (based on a 95% confidence interval).





CENTRAL REGION				
Alabama Catheter-Associated Urinary Tract Infections (CAUTI) January 1, 2011 – December 31, 2011				
Hospital Name	Number of Catheter Days	Number of CAUTI	Ratio of Actual to Predicted Infections (SIR)	Hospital Performance Compared to National Performance
<b>Low Volume Hospitals (fewer than 583 catheter days)</b>				
Chilton Medical Center	500	0	N/A	N/A
Georgiana Hospital	393	0	N/A	N/A
Lake Martin Community Hospital	318	0	N/A	N/A
Bullock County Hospital	154	0	N/A	N/A
LV Stabler Memorial Hospital	389	0	N/A	N/A
Crenshaw Community Hospital	580	0	0	Similar
<b>Medium Volume Hospitals (583-3,595 catheter days)</b>				
Baptist Medical Center East	3,103	0	0	Better
Prattville Baptist Hospital	1,087	1	0.575	Similar
Community Hospital	1,073	1	0.582	Similar
George H. Lanier Memorial Hospital	1,537	2	0.685	Similar
Vaughan Regional Medical Center	3,595	7	1.217	Similar
<b>High Volume Hospitals (more than 3,595 catheter days)</b>				
Russell Medical Center	5,524	3	0.339	Better
Jackson Hospital & Clinic	6,348	5	0.492	Similar
Baptist Medical Center South	3,641	7	1.032	Similar
East Alabama Medical Center	3,596	7	1.133	Similar

Data pulled on: September 14, 2012 5:01 PM (EST)

**N/A:** Hospital submitted data though number of catheter days was too few for SIR and performance comparisons to be accurately calculated.

**Catheter days:** The sum of patients per day with an indwelling catheter in general medical, surgical, and medical/surgical wards.

**CAUTI:** Urinary tract infections resulting from indwelling catheters and occurring in general medical, surgical, and medical/surgical wards.

**SIR:** The standardized infection ratio is the ratio of observed infections to predicted infections based on the accumulated risks of the locations (based on national data).

**Better:** Indicates a facility that has statistically, significantly fewer infections compared to national averages (based on a 95% confidence interval).

**Similar:** Indicates a facility that does not have statistically, significantly different infections compared to national averages (based on a 95% confidence interval).

**Worse:** Indicates a facility that has statistically, significantly more infections compared to national averages (based on a 95% confidence interval).





NORTH REGION				
Alabama Catheter-Associated Urinary Tract Infections (CAUTI) January 1, 2011 – December 31, 2011				
Hospital Name	Number of Catheter Days	Number of CAUTI	Ratio of Actual to Predicted Infections (SIR)	Hospital Performance Compared to National Performance
<b>Low Volume Hospitals (fewer than 583 catheter days)</b>				
Hartselle Medical Center	554	0	N/A	N/A
Red Bay Hospital	575	0	0	Similar
<b>Medium Volume Hospitals (583-3,595 catheter days)</b>				
North Mississippi Medical Center-Hamilton	608	1	N/A	N/A
Athens Limestone Hospital	2,240	0	0	Better
Parkway Medical Center	2,028	1	0.308	Similar
Russellville Hospital	2,187	2	0.553	Similar
Lakeland Community Hospital	788	1	0.793	Similar
Marshall Medical Center South	2,474	4	0.925	Similar
Lawrence Medical Center	1,178	2	1.061	Similar
Marshall Medical Center North	2,271	4	1.101	Similar
Highlands Medical Center	2,477	7	1.562	Similar
Shoals Hospital	1,237	4	1.702	Similar
<b>High Volume Hospitals (more than 3,595 catheter days)</b>				
Cullman Regional Medical Center	7,394	5	0.363	Better
Helen Keller Hospital	5,535	4	0.388	Better
Eliza Coffee Memorial Hospital	5,578	9	0.871	Similar
Decatur General	4,432	10	1.318	Similar
Huntsville Hospital	10,051	35	1.881	Worse
Crestwood Medical Center	3,810	14	1.965	Worse

Data pulled on: September 14, 2012 5:01 PM (EST)-----

**N/A:** Hospital submitted data though number of catheter days was too few for SIR and performance comparisons to be accurately calculated.

**Catheter days:** The sum of patients per day with an indwelling catheter in general medical, surgical, and medical/surgical wards.

**CAUTI:** Urinary tract infections resulting from indwelling catheters and occurring in general medical, surgical, and medical/surgical wards.

**SIR:** The standardized infection ratio is the ratio of observed infections to predicted infections based on the accumulated risks of the locations (based on national data).

**Better:** Indicates a facility that has statistically, significantly fewer infections compared to national averages (based on a 95% confidence interval).

**Similar:** Indicates a facility that does not have statistically, significantly different infections compared to national averages (based on a 95% confidence interval).

**Worse:** Indicates a facility that has statistically, significantly more infections compared to national averages (based on a 95% confidence interval).





NORTHEAST				
Alabama Catheter-Associated Urinary Tract Infections (CAUTI) January 1, 2011 – December 31, 2011				
Hospital Name	Number of Catheter Days	Number of CAUTI	Ratio of Actual to Predicted Infections (SIR)	Hospital Performance Compared to National Performance
<b>Low Volume Hospitals (fewer than 583 catheter days)</b>				
Jacksonville Medical Center	435	0	N/A	N/A
Cherokee Medical Center	285	1	N/A	N/A
Clay County Hospital	547	0	0	Similar
<b>Medium Volume Hospitals (583-3,595 catheter days)</b>				
Citizens Baptist Medical Center	867	0	0	Similar
Stringfellow Memorial Hospital	1,288	0	0	Similar
Wedowee Hospital	593	0	0	Similar
Dekalb Regional Medical Center	1,737	1	0.36	Similar
Coosa Valley Medical Center	1,971	2	0.556	Similar
Northeast Alabama Regional Medical Center	2,188	10	2.461	Worse
<b>High Volume Hospitals (more than 3,595 catheter days)</b>				
Gadsden Regional Medical Center	6,248	5	0.474	Similar
Riverview Regional Medical Center	4,540	6	0.773	Similar

Data pulled on: September 14, 2012 5:01 PM (EST)

**N/A:** Hospital submitted data though number of catheter days was too few for SIR and performance comparisons to be accurately calculated.

**Catheter days:** The sum of patients per day with an indwelling catheter in general medical, surgical, and medical/surgical wards.

**CAUTI:** Urinary tract infections resulting from indwelling catheters and occurring in general medical, surgical, and medical/surgical wards.

**SIR:** The standardized infection ratio is the ratio of observed infections to predicted infections based on the accumulated risks of the locations (based on national data).

**Better:** Indicates a facility that has statistically, significantly fewer infections compared to national averages (based on a 95% confidence interval).

**Similar:** Indicates a facility that does not have statistically, significantly different infections compared to national averages (based on a 95% confidence interval).

**Worse:** Indicates a facility that has statistically, significantly more infections compared to national averages (based on a 95% confidence interval).





SOUTHEAST REGION				
Alabama Catheter-Associated Urinary Tract Infections (CAUTI) January 1, 2011 – December 31, 2011				
Hospital Name	Number of Catheter Days	Number of CAUTI	Ratio of Actual to Predicted Infections (SIR)	Hospital Performance Compared to National Performance
<b>Low Volume Hospitals (fewer than 583 catheter days)</b>				
Elba General Hospital	62	1	N/A	N/A
Floral Memorial Hospital	144	1	N/A	N/A
<b>Medium Volume Hospitals (583-3,595 catheter days)</b>				
Wiregrass Medical Center	610	5	N/A	N/A
Dale Medical Center	1,186	0	0	Similar
Medical Center Barbour	1,069	0	0	Similar
Andalusia Regional Hospital	1,151	1	0.468	Similar
Troy Regional Medical Center	1,336	1	0.468	Similar
Medical Center Enterprise	2,181	4	1.069	Similar
Mizell Memorial Hospital	1,213	5	2.169	Similar
<b>High Volume Hospitals (more than 3,595 catheter days)</b>				
Southeast Alabama Medical Center	3,663	3	0.431	Similar
Flowers Hospital	5,226	14	1.441	Similar

Data pulled on: September 14, 2012 5:01 PM (EST)

**N/A:** Hospital submitted data though number of catheter days was too few for SIR and performance comparisons to be accurately calculated.

**Catheter days:** The sum of patients per day with an indwelling catheter in general medical, surgical, and medical/surgical wards.

**CAUTI:** Urinary tract infections resulting from indwelling catheters and occurring in general medical, surgical, and medical/surgical wards.

**SIR:** The standardized infection ratio is the ratio of observed infections to predicted infections based on the accumulated risks of the locations (based on national data).

**Better:** Indicates a facility that has statistically, significantly fewer infections compared to national averages (based on a 95% confidence interval).

**Similar:** Indicates a facility that does not have statistically, significantly different infections compared to national averages (based on a 95% confidence interval).

**Worse:** Indicates a facility that has statistically, significantly more infections compared to national averages (based on a 95% confidence interval).





SOUTHWEST REGION				
Alabama Catheter-Associated Urinary Tract Infections (CAUTI) January 1, 2011 – December 31, 2011				
Hospital Name	Number of Catheter Days	Number of CAUTI	Ratio of Actual to Predicted Infections (SIR)	Hospital Performance Compared to National Performance
<b>Low Volume Hospitals (fewer than 583 catheter days)</b>				
Monroe County Hospital	342	0	N/A	N/A
J. Paul Jones Hospital	116	0	N/A	N/A
Evergreen Medical Center	527	0	N/A	N/A
Jackson Medical Center	382	0	N/A	N/A
North Baldwin Infirmary	373	1	N/A	N/A
<b>Medium Volume Hospitals (583-3,595 catheter days)</b>				
D.W. McMillan Memorial Hospital	821	0	0	Similar
Atmore Community Hospital	758	0	0	Similar
Infirmary West	932	1	0.671	Similar
Thomas Hospital	2,299	5	1.26	Similar
South Baldwin Regional Medical Center	1,962	6	1.911	Similar
University of South Alabama Medical Center	3,152	10	1.983	Similar
Springhill Medical Center	1,206	5	2.591	Similar
<b>High Volume Hospitals (more than 3,595 catheter days)</b>				
Providence Hospital	5,130	11	1.34	Similar
Mobile Infirmary Medical Center	3,623	9	1.553	Similar

Data pulled on: September 14, 2012 5:01 PM (EST)-----

**N/A:** Hospital submitted data though number of catheter days was too few for SIR and performance comparisons to be accurately calculated.

**Catheter days:** The sum of patients per day with an indwelling catheter in general medical, surgical, and medical/surgical wards.

**CAUTI:** Urinary tract infections resulting from indwelling catheters and occurring in general medical, surgical, and medical/surgical wards.

**SIR:** The standardized infection ratio is the ratio of observed infections to predicted infections based on the accumulated risks of the locations (based on national data).

**Better:** Indicates a facility that has statistically, significantly fewer infections compared to national averages (based on a 95% confidence interval).

**Similar:** Indicates a facility that does not have statistically, significantly different infections compared to national averages (based on a 95% confidence interval).

**Worse:** Indicates a facility that has statistically, significantly more infections compared to national averages (based on a 95% confidence interval).





WEST REGION				
Alabama Catheter-Associated Urinary Tract Infections (CAUTI) January 1, 2011 – December 31, 2011				
Hospital Name	Number of Catheter Days	Number of CAUTI	Ratio of Actual to Predicted Infections (SIR)	Hospital Performance Compared to National Performance
<b>Low Volume Hospitals (fewer than 583 catheter days)</b>				
Bibb Medical Center	227	0	N/A	N/A
Hale County Hospital	333	0	N/A	N/A
Hill Hospital	6	0	N/A	N/A
Greene County Hospital	149	0	N/A	N/A
<b>Medium Volume Hospitals (583-3,595 catheter days)</b>				
Pickens County Medical Center	584	0	N/A	N/A
Fayette Medical Center	1,850	1	0.338	Similar
Northwest Medical Center	1,752	3	1.07	Similar
Northport Medical Center	3,545	7	1.234	Similar
Bryan W. Whitfield Memorial Hospital	934	4	2.677	Similar
<b>High Volume Hospitals (more than 3,595 catheter days)</b>				
DCH Regional Medical Center	11,206	34	1.637	Worse

Data pulled on: September 14, 2012 5:01 PM (EST)

**N/A:** Hospital submitted data though number of catheter days was too few for SIR and performance comparisons to be accurately calculated.

**Catheter days:** The sum of patients per day with an indwelling catheter in general medical, surgical, and medical/surgical wards.

**CAUTI:** Urinary tract infections resulting from indwelling catheters and occurring in general medical, surgical, and medical/surgical wards.

**SIR:** The standardized infection ratio is the ratio of observed infections to predicted infections based on the accumulated risks of the locations (based on national data).

**Better:** Indicates a facility that has statistically, significantly fewer infections compared to national averages (based on a 95% confidence interval).

**Similar:** Indicates a facility that does not have statistically, significantly different infections compared to national averages (based on a 95% confidence interval).

**Worse:** Indicates a facility that has statistically, significantly more infections compared to national averages (based on a 95% confidence interval).





BIRMINGHAM REGION				
Alabama Central Line-Associated Blood Stream Infections (CLABSI) January 1, 2011 – December 31, 2011				
Hospital Name	Number of Central Line Days	Number of CLABSI	Ratio of Actual to Predicted Infections (SIR)	Hospital Performance Compared to National Performance
<b>Low Volume Hospitals (fewer than 152 central line days)</b>				
St. Vincent's Blount	145	0	N/A	N/A
<b>Medium Volume Hospitals (152-1,917 central line days)</b>				
St. Vincent's St. Clair	186	0	N/A	N/A
Walker Baptist Medical Center	565	1	N/A	N/A
Children's Health System	1,884	2	0.354	Similar
Cooper Green Mercy Hospital	1,457	9	2.941	Worse
<b>High Volume Hospitals (more than 1,917 central line days)</b>				
Shelby Baptist Medical Center	3,605	1	0.136	Better
Medical West	2,436	1	0.216	Similar
Trinity Medical Center	4,274	2	0.221	Better
Brookwood Medical Center	5,580	4	0.366	Better
UAB Hospital	10,487	13	0.504	Better
Princeton Baptist Medical Center	6,139	9	0.719	Similar
St. Vincent's East	4,130	7	0.803	Similar
St. Vincent Hospital	4,583	9	1.148	Similar

Data pulled on: September 14, 2012 5:01 PM (EST)

**N/A:** Hospital submitted data though number of catheter days was too few for SIR and performance comparisons to be accurately calculated.

**Central line days:** The sum of patients per day with a central line in medical, surgical, and medical/surgical ICUs.

**CLABSI :** Blood stream infections resulting from central lines in medical, surgical, and medical/surgical ICUs.

**SIR:** The standardized infection ratio is the ratio of observed infections to predicted infections based on the accumulated risks of the locations (based on national data).

**Better:** Indicates a facility that has statistically, significantly fewer infections compared to national averages (based on a 95% confidence interval).

**Similar:** Indicates a facility that does not have statistically, significantly different infections compared to national averages (based on a 95% confidence interval).

**Worse:** Indicates a facility that has statistically, significantly more infections compared to national averages (based on a 95% confidence interval).





CENTRAL REGION				
Alabama Central Line-Associated Blood Stream Infections (CLABSI) January 1, 2011 – December 31, 2011				
Hospital Name	Number of Central Line Days	Number of CLABSI	Ratio of Actual to Predicted Infections (SIR)	Hospital Performance Compared to National Performance
<b>Low Volume Hospitals (fewer than 152 central line days)</b>				
Community Hospital	48	0	N/A	N/A
LV Stabler Memorial Hospital	30	0	N/A	N/A
Prattville Baptist Hospital	110	0	N/A	N/A
<b>Medium Volume Hospitals (152-1,917 central line days)</b>				
George H. Lanier Memorial Hospital	327	1	N/A	N/A
Baptist Medical Center East	1,194	1	0.441	Similar
Russell Medical Center	1,151	1	0.579	Similar
Baptist Medical Center South	1,807	2	0.583	Similar
Vaughan Regional Medical Center	1,704	2	0.782	Similar
<b>High Volume Hospitals (more than 1,917 central line days)</b>				
East Alabama Medical Center	2,614	0	0	Better
Jackson Hospital & Clinic	4,069	7	1.147	Similar

Data pulled on: September 14, 2012 5:01 PM (EST)

**N/A:** Hospital submitted data though number of central line days was too few for SIR and performance comparisons to be accurately calculated.

**Central line days:** The sum of patients per day with a central line in medical, surgical, and medical/surgical ICUs.

**CLABSI infections:** Blood stream infections resulting from central lines in medical, surgical, and medical/surgical ICUs.

**SIR:** The standardized infection ratio is the ratio of observed infections to predicted infections based on the accumulated risks of the locations (based on national data).

**Better:** Indicates a facility that has statistically, significantly fewer infections compared to national averages (based on a 95% confidence interval).

**Similar:** Indicates a facility that does not have statistically, significantly different infections compared to national averages (based on a 95% confidence interval).

**Worse:** Indicates a facility that has statistically, significantly more infections compared to national averages (based on a 95% confidence interval).





NORTH REGION				
Alabama Central Line-Associated Blood Stream Infections (CLABSI) January 1, 2011 – December 31, 2011				
Hospital Name	Number of Central Line Days	Number of CLABSI	Ratio of Actual to Predicted Infections (SIR)	Hospital Performance Compared to National Performance
<b>Low Volume Hospitals (fewer than 152 central line days)</b>				
Hartselle Medical Center	26	0	N/A	N/A
Lakeland Community Hospital	31	0	N/A	N/A
North Mississippi Medical Center- Hamilton	25	0	N/A	N/A
<b>Medium Volume Hospitals (152-1,917 central line days)</b>				
Athens Limestone Hospital	527	0	N/A	N/A
Helen Keller Hospital	443	0	N/A	N/A
Marshall Medical Center North	287	0	N/A	N/A
Parkway Medical Center	385	1	N/A	N/A
Russellville Hospital	246	0	N/A	N/A
Shoals Hospital	224	1	N/A	N/A
Marshall Medical Center South	473	2	N/A	N/A
Eliza Coffee Memorial Hospital	1,598	2	0.834	Similar
Cullman Regional Medical Center	908	3	2.203	Similar
Crestwood Medical Center	854	3	2.342	Similar
Decatur General	744	3	2.688	Similar
<b>High Volume Hospitals (more than 1,917 central line days)</b>				
Huntsville Hospital	6,304	19	1.424	Similar

Data pulled on: September 14, 2012 5:01 PM (EST)

**N/A:** Hospital submitted data though number of central line days was too few for SIR and performance comparisons to be accurately calculated.

**Central line days:** The sum of patients per day with a central line in medical, surgical, and medical/surgical ICUs.

**CLABSI infections:** Blood stream infections resulting from central lines in medical, surgical, and medical/surgical ICUs.

**SIR:** The standardized infection ratio is the ratio of observed infections to predicted infections based on the accumulated risks of the locations (based on national data).

**Better:** Indicates a facility that has statistically, significantly fewer infections compared to national averages (based on a 95% confidence interval).

**Similar:** Indicates a facility that does not have statistically, significantly different infections compared to national averages (based on a 95% confidence interval).

**Worse:** Indicates a facility that has statistically, significantly more infections compared to national averages (based on a 95% confidence interval).





NORTHEAST REGION				
Alabama Central Line-Associated Blood Stream Infections (CLABSI) January 1, 2011 – December 31, 2011				
Hospital Name	Number of Central Line Days	Number of CLABSI	Ratio of Actual to Predicted Infections (SIR)	Hospital Performance Compared to National Performance
<b>Low Volume Hospitals (fewer than 152 central line days)</b>				
Clay County Hospital	23	0	N/A	N/A
Jacksonville Medical Center	134	1	N/A	N/A
<b>Medium Volume Hospitals (152-1,917 central line days)</b>				
Citizens Baptist Medical Center	312	0	N/A	N/A
Coosa Valley Medical Center	610	0	N/A	N/A
Dekalb Regional Medical Center	216	0	N/A	N/A
Stringfellow Memorial Hospital	470	0	N/A	N/A
Riverview Regional Medical Center	1,823	0	0	Better
Northeast Alabama Regional Medical Center	741	2	1.799	Similar
<b>High Volume Hospitals (more than 1,917 central line days)</b>				
Gadsden Regional Medical Center	4,931	1	0.104	Better

Data pulled on: September 14, 2012 5:01 PM (EST)

**N/A:** Hospital submitted data though number of central line days was too few for SIR and performance comparisons to be accurately calculated.

**Central line days:** The sum of patients per day with a central line in medical, surgical, and medical/surgical ICUs.

**CLABSI infections:** Blood stream infections resulting from central lines in medical, surgical, and medical/surgical ICUs.

**SIR:** The standardized infection ratio is the ratio of observed infections to predicted infections based on the accumulated risks of the locations (based on national data).

**Better:** Indicates a facility that has statistically, significantly fewer infections compared to national averages (based on a 95% confidence interval).

**Similar:** Indicates a facility that does not have statistically, significantly different infections compared to national averages (based on a 95% confidence interval).

**Worse:** Indicates a facility that has statistically, significantly more infections compared to national averages (based on a 95% confidence interval).





SOUTHEAST REGION				
Alabama Central Line-Associated Blood Stream Infections (CLABSI) January 1, 2011 – December 31, 2011				
Hospital Name	Number of Central Line Days	Number of CLABSI	Ratio of Actual to Predicted Infections (SIR)	Hospital Performance Compared to National Performance
<b>Low Volume Hospitals (fewer than 152 central line days)</b>				
Andalusia Regional Hospital	119	0	N/A	N/A
Dale Medical Center	89	0	N/A	N/A
Medical Center Barbour	84	0	N/A	N/A
Mizell Memorial Hospital	68	0	N/A	N/A
Wiregrass Medical Center	110	0	N/A	N/A
<b>Medium Volume Hospitals (152-1,917 central line days)</b>				
Medical Center Enterprise	155	0	N/A	N/A
Troy Regional Medical Center	333	0	N/A	N/A
<b>High Volume Hospitals (more than 1,917 central line days)</b>				
Flowers Hospital	1,929	0	0	Better
Southeast Alabama Medical Center	4,192	3	0.477	Similar

Data pulled on: September 14, 2012 5:01 PM (EST)

**N/A:** Hospital submitted data though number of central line days was too few for SIR and performance comparisons to be accurately calculated.

**Central line days:** The sum of patients per day with a central line in medical, surgical, and medical/surgical ICUs.

**CLABSI infections:** Blood stream infections resulting from central lines in medical, surgical, and medical/surgical ICUs.

**SIR:** The standardized infection ratio is the ratio of observed infections to predicted infections based on the accumulated risks of the locations (based on national data).

**Better:** Indicates a facility that has statistically, significantly fewer infections compared to national averages (based on a 95% confidence interval).

**Similar:** Indicates a facility that does not have statistically, significantly different infections compared to national averages (based on a 95% confidence interval).

**Worse:** Indicates a facility that has statistically, significantly more infections compared to national averages (based on a 95% confidence interval).





SOUTHWEST REGION				
Alabama Central Line-Associated Blood Stream Infections (CLABSI) January 1, 2011 – December 31, 2011				
Hospital Name	Number of Central Line Days	Number of CLABSI	Ratio of Actual to Predicted Infections (SIR)	Hospital Performance Compared to National Performance
<b>Low Volume Hospitals (fewer than 152 central line days)</b>				
Atmore Community Hospital	107	0	N/A	N/A
Monroe County Hospital	102	0	N/A	N/A
<b>Medium Volume Hospitals (152-1,917 central line days)</b>				
D.W. McMillan Memorial Hospital	304	0	N/A	N/A
Infirmiry West	567	0	N/A	N/A
North Baldwin Infirmiry	194	1	N/A	N/A
University of South Alabama Medical Center	1,551	1	0.307	Similar
Thomas Hospital	1,028	1	0.512	Similar
South Baldwin Regional Medical Center	1,252	3	1.597	Similar
<b>High Volume Hospitals (more than 1,917 central line days)</b>				
Mobile Infirmiry Medical Center	7,239	2	0.127	Better
Springhill Medical Center	3,704	1	0.180	Similar
Providence Hospital	3,807	2	0.251	Better
USA Children's & Women's Hospital	1,942	8	1.373	Similar

Data pulled on: September 14, 2012 5:01 PM (EST)

**N/A:** Hospital submitted data though number of central line days was too few for SIR and performance comparisons to be accurately calculated.

**Central line days:** The sum of patients per day with a central line in medical, surgical, and medical/surgical ICUs.

**CLABSI infections:** Blood stream infections resulting from central lines in medical, surgical, and medical/surgical ICUs.

**SIR:** The standardized infection ratio is the ratio of observed infections to predicted infections based on the accumulated risks of the locations (based on national data).

**Better:** Indicates a facility that has statistically, significantly fewer infections compared to national averages (based on a 95% confidence interval).

**Similar:** Indicates a facility that does not have statistically, significantly different infections compared to national averages (based on a 95% confidence interval).

**Worse:** Indicates a facility that has statistically, significantly more infections compared to national averages (based on a 95% confidence interval).





WEST REGION				
Alabama Central Line-Associated Blood Stream Infections (CLABSI) January 1, 2011 – December 31, 2011				
Hospital Name	Number of Central Line Days	Number of CLABSI	Ratio of Actual to Predicted Infections (SIR)	Hospital Performance Compared to National Performance
<b>Low Volume Hospitals (fewer than 152 central line days)</b>				
Bryan W. Whitfield Memorial Hospital	67	1	N/A	N/A
Northwest Medical Center	150	1	N/A	N/A
Pickens County Medical Center	86	0	N/A	N/A
<b>Medium Volume Hospitals (152-1,917 central line days)</b>				
Fayette Medical Center	169	0	N/A	N/A
Northport Medical Center	848	2	1.241	Similar
<b>High Volume Hospitals (more than 1,917 central line days)</b>				
DCH Regional Medical Center	7,367	9	0.599	Similar

Data pulled on: September 14, 2012 5:01 PM (EST)

**N/A:** Hospital submitted data though number of central line days was too few for SIR and performance comparisons to be accurately calculated.

**Central line days:** The sum of patients per day with a central line in medical, surgical, and medical/surgical ICUs.

**CLABSI infections:** Blood stream infections resulting from central lines in medical, surgical, and medical/surgical ICUs.

**SIR:** The standardized infection ratio is the ratio of observed infections to predicted infections based on the accumulated risks of the locations (based on national data).

**Better:** Indicates a facility that has statistically, significantly fewer infections compared to national averages (based on a 95% confidence interval).

**Similar:** Indicates a facility that does not have statistically, significantly different infections compared to national averages (based on a 95% confidence interval).

**Worse:** Indicates a facility that has statistically, significantly more infections compared to national averages (based on a 95% confidence interval).





BIRMINGHAM REGION				
Alabama Surgical Site Infections (SSI)- Colon Surgeries January 1, 2011 – December 31, 2011				
Hospital Name	Number of Procedures	Number of SSI	Ratio of Actual to Predicted Infections (SIR)	Hospital Performance Compared to National Performance
<b>Low Volume Hospitals (fewer than 12 procedures) in Region</b>				
St. Vincent's Blount	5	0	N/A	N/A
<b>Medium Volume Hospitals (12-96 procedures)</b>				
St. Vincent's East	18	0	0	Similar
Children's Health System	80	1	0.232	Similar
Walker Baptist Medical Center	36	1	0.43	Similar
Medical West	96	3	0.652	Similar
Cooper Green Mercy Hospital	25	1	0.686	Similar
<b>High Volume Hospitals (more than 96 procedures)</b>				
Princeton Baptist Medical Center	169	1	0.113	Better
UAB Hospital	527	13	0.316	Better
Trinity Medical Center	156	4	0.505	Similar
Brookwood Medical Center	248	11	0.637	Similar
St. Vincent Hospital	269	12	0.765	Similar
Shelby Baptist Medical Center	176	14	1.49	Similar

Data pulled on: September 14, 2012 5:01 PM (EST)

**N/A:** Hospital submitted data though number of procedures was too few for SIR and performance comparisons to be accurately calculated.

**Procedures:** The number of in-patient colon surgeries performed in 2011.

**SSI infections:** Infections that occur after in-patient colon surgery and are related to the surgery.

**SIR:** The standardized infection ratio is the ratio of observed infections to predicted infections based on the accumulated risks of the procedures (based on national data).

**Better:** Indicates a facility that has statistically, significantly fewer infections compared to national averages (based on a 95% confidence interval).

**Similar:** Indicates a facility that does not have statistically, significantly different infections compared to national averages (based on a 95% confidence interval).

**Worse:** Indicates a facility that has statistically, significantly more infections compared to national averages (based on a 95% confidence interval).





CENTRAL REGION				
Alabama Surgical Site Infections (SSI)- Colon Surgeries January 1, 2011 – December 31, 2011				
Hospital Name	Number of Procedures	Number of SSI	Ratio of Actual to Predicted Infections (SIR)	Hospital Performance Compared to National Performance
<b>Low Volume Hospitals (fewer than 12 procedures)</b>				
Community Hospital	10	0	N/A	N/A
LV Stabler Memorial Hospital	6	0	N/A	N/A
Jack Hughston Memorial Hospital	7	0	N/A	N/A
<b>Medium Volume Hospitals (12-96 procedures)</b>				
Baptist Medical Center East	83	0	0	Better
Russell Medical Center	41	0	0	Similar
Prattville Baptist Hospital	24	0	0	Similar
Vaughan Regional Medical Center	43	1	0.398	Similar
George H. Lanier Memorial Hospital	34	1	0.482	Similar
<b>High Volume Hospitals (more than 96 procedures)</b>				
East Alabama Medical Center	142	5	0.662	Similar
Baptist Medical Center South	155	6	0.774	Similar
Jackson Hospital & Clinic	137	7	0.826	Similar

Data pulled on: September 14, 2012 5:01 PM (EST)

**N/A:** Hospital submitted data though number of procedures was too few for SIR and performance comparisons to be accurately calculated.

**Procedures:** The number of in-patient colon surgeries performed in 2011.

**SSI infections:** Infections that occur after in-patient colon surgery and are related to the surgery.

**SIR:** The standardized infection ratio is the ratio of observed infections to predicted infections based on the accumulated risks of the procedures (based on national data).

**Better:** Indicates a facility that has statistically, significantly fewer infections compared to national averages (based on a 95% confidence interval).

**Similar:** Indicates a facility that does not have statistically, significantly different infections compared to national averages (based on a 95% confidence interval).

**Worse:** Indicates a facility that has statistically, significantly more infections compared to national averages (based on a 95% confidence interval).





NORTH REGION				
Alabama Surgical Site Infections (SSI)- Colon Surgeries January 1, 2011 – December 31, 2011				
Hospital Name	Number of Procedures	Number of SSI	Ratio of Actual to Predicted Infections (SIR)	Hospital Performance Compared to National Performance

Low Volume Hospitals (fewer than 12 procedures)				
North Mississippi Medical Center-Hamilton	5	0	N/A	N/A
Hartselle Medical Center	1	0	N/A	N/A
Lakeland Community Hospital	8	0	N/A	N/A
Medium Volume Hospitals (12-96 procedures)				
Russellville Hospital	13	0	N/A	N/A
Marshall Medical Center South	29	0	0	Similar
Athens Limestone Hospital	27	0	0	Similar
Parkway Medical Center	21	1	0.799	Similar
Highlands Medical Center	15	1	0.952	Similar
Helen Keller Hospital	56	5	1.499	Similar
Shoals Hospital	43	4	1.561	Similar
Cullman Regional Medical Center	66	6	1.616	Similar
Marshall Medical Center North	31	3	1.724	Similar
High Volume Hospitals (more than 96 procedures)				
Crestwood Medical Center	118	3	0.398	Similar
Eliza Coffee Memorial Hospital	99	5	0.785	Similar
Decatur General	108	7	1.124	Similar
Huntsville Hospital	321	26	1.128	Similar

Data pulled on: September 14, 2012 5:01 PM (EST)-----

**N/A:** Hospital submitted data though number of procedures was too few for SIR and performance comparisons to be accurately calculated.

**Procedures:** The number in-patient of colon surgeries performed in 2011.

**SSI infections:** Infections that occur after in-patient colon surgery and are related to the surgery.

**SIR:** The standardized infection ratio is the ratio of observed infections to predicted infections based on the accumulated risks of the procedures (based on national data).

**Better:** Indicates a facility that has statistically, significantly fewer infections compared to national averages (based on a 95% confidence interval).

**Similar:** Indicates a facility that does not have statistically, significantly different infections compared to national averages (based on a 95% confidence interval).

**Worse:** Indicates a facility that has statistically, significantly more infections compared to national averages (based on a 95% confidence interval).





NORTHEAST REGION				
Alabama Surgical Site Infections (SSI)- Colon Surgeries January 1, 2011 – December 31, 2011				
Hospital Name	Number of Procedures	Number of SSI	Ratio of Actual to Predicted Infections (SIR)	Hospital Performance Compared to National Performance
<b>Low Volume Hospitals (fewer than 12 procedures)</b>				
Citizens Baptist Medical Center	10	0	N/A	N/A
Jacksonville Medical Center	5	0	N/A	N/A
<b>Medium Volume Hospitals (12-96 procedures)</b>				
Dekalb Regional Medical Center	12	0	N/A	N/A
Riverview Regional Medical Center	45	0	0	Similar
Coosa Valley Medical Center	27	0	0	Similar
Gadsden Regional Medical Center	94	0	0	Better
Stringfellow Memorial Hospital	57	1	0.307	Similar
Northeast Alabama Regional Medical Center	48	7	2.455	Similar
<b>No High Volume Hospitals (more than 96 procedures) in Region</b>				

Data pulled on: September 14, 2012 5:01 PM (EST)

**N/A:** Hospital submitted data though number of procedures was too few for SIR and performance comparisons to be accurately calculated.

**Procedures:** The number of in-patient colon surgeries performed in 2011.

**SSI infections:** Infections that occur after in-patient colon surgery and are related to the surgery.

**SIR:** The standardized infection ratio is the ratio of observed infections to predicted infections based on the accumulated risks of the procedures (based on national data).

**Better:** Indicates a facility that has statistically, significantly fewer infections compared to national averages (based on a 95% confidence interval).

**Similar:** Indicates a facility that does not have statistically, significantly different infections compared to national averages (based on a 95% confidence interval).

**Worse:** Indicates a facility that has statistically, significantly more infections compared to national averages (based on a 95% confidence interval).





SOUTHEAST REGION				
Alabama Surgical Site Infections (SSI)- Colon Surgeries January 1, 2011 – December 31, 2011				
Hospital Name	Number of Procedures	Number of SSI	Ratio of Actual to Predicted Infections (SIR)	Hospital Performance Compared to National Performance
<b>Low Volume Hospitals (fewer than 12 procedures)</b>				
Dale Medical Center	3	0	N/A	N/A
Medical Center Barbour	9	0	N/A	N/A
Troy Regional Medical Center	7	0	N/A	N/A
Wiregrass Medical Center	1	0	N/A	N/A
<b>Medium Volume Hospitals (12-96 procedures)</b>				
Mizell Memorial Hospital	15	0	N/A	N/A
Medical Center Enterprise	29	1	0.571	Similar
Flowers Hospital	87	3	0.623	Similar
Andalusia Regional Hospital	40	2	0.923	Similar
<b>High Volume Hospitals (more than 96 procedures)</b>				
Southeast Alabama Medical Center	147	4	0.432	Similar

Data pulled on: September 14, 2012 5:01 PM (EST)

**N/A:** Hospital submitted data though number of procedures was too few for SIR and performance comparisons to be accurately calculated.

**Procedures:** The number of in-patient colon surgeries performed in 2011.

**SSI infections:** Infections that occur after in-patient colon surgery and are related to the surgery.

**SIR:** The standardized infection ratio is the ratio of observed infections to predicted infections based on the accumulated risks of the procedures (based on national data).

**Better:** Indicates a facility that has statistically, significantly fewer infections compared to national averages (based on a 95% confidence interval).

**Similar:** Indicates a facility that does not have statistically, significantly different infections compared to national averages (based on a 95% confidence interval).

**Worse:** Indicates a facility that has statistically, significantly more infections compared to national averages (based on a 95% confidence interval).





SOUTHWEST REGION				
Alabama Surgical Site Infections (SSI)- Colon Surgeries January 1, 2011 – December 31, 2011				
Hospital Name	Number of Procedures	Number of SSI	Ratio of Actual to Predicted Infections (SIR)	Hospital Performance Compared to National Performance
<b>Low Volume Hospitals (fewer than 12 procedures)</b>				
USA Children's & Women's Hospital	1	0	N/A	N/A
Monroe County Hospital	3	1	N/A	N/A
Atmore Community Hospital	4	1	N/A	N/A
North Baldwin Infirmary	11	0	N/A	N/A
<b>Medium Volume Hospitals (12-96 procedures)</b>				
Infirmary West	16	2	N/A	N/A
South Baldwin Regional Medical Center	71	3	0.758	Similar
University of South Alabama Medical Center	61	7	1.459	Similar
Springhill Medical Center	75	6	1.502	Similar
D.W. McMillan Memorial Hospital	23	2	1.739	Similar
<b>High Volume Hospitals (more than 96 procedures)</b>				
Mobile Infirmary Medical Center	305	11	0.505	Better
Providence Hospital	163	8	0.839	Similar
Thomas Hospital	104	11	1.975	Similar

Data pulled on: September 14, 2012 5:01 PM (EST)

**N/A:** Hospital submitted data though number of procedures was too few for SIR and performance comparisons to be accurately calculated.

**Procedures:** The number of in-patient colon surgeries performed in 2011.

**SSI infections:** Infections that occur after in-patient colon surgery and are related to the surgery.

**SIR:** The standardized infection ratio is the ratio of observed infections to predicted infections based on the accumulated risks of the procedures (based on national data).

**Better:** Indicates a facility that has statistically, significantly fewer infections compared to national averages (based on a 95% confidence interval).

**Similar:** Indicates a facility that does not have statistically, significantly different infections compared to national averages (based on a 95% confidence interval).

**Worse:** Indicates a facility that has statistically, significantly more infections compared to national averages (based on a 95% confidence interval).





WEST REGION				
Alabama Surgical Site Infections (SSI)- Colon Surgeries January 1, 2011 – December 31, 2011				
Hospital Name	Number of Procedures	Number of SSI	Ratio of Actual to Predicted Infections (SIR)	Hospital Performance Compared to National Performance
<b>Low Volume Hospitals (fewer than 12 procedures)</b>				
Northwest Medical Center	6	1	N/A	N/A
Fayette Medical Center	10	0	N/A	N/A
<b>Medium Volume Hospitals (12-96 procedures)</b>				
Pickens County Medical Center	19	1	0.806	Similar
Northport Medical Center	50	3	1.084	Similar
<b>High Volume Hospitals (more than 96 procedures)</b>				
DCH Regional Medical Center	244	11	0.832	Similar

Data pulled on: September 14, 2012 5:01 PM (EST)

**N/A:** Hospital submitted data though number of procedures was too few for SIR and performance comparisons to be accurately calculated.

**Procedures:** The number of in-patient colon surgeries performed in 2011.

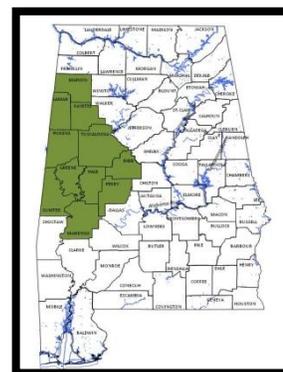
**SSI infections:** Infections that occur after in-patient colon surgery and are related to the surgery.

**SIR:** The standardized infection ratio is the ratio of observed infections to predicted infections based on the accumulated risks of the procedures (based on national data).

**Better:** Indicates a facility that has statistically, significantly fewer infections compared to national averages (based on a 95% confidence interval).

**Similar:** Indicates a facility that does not have statistically, significantly different infections compared to national averages (based on a 95% confidence interval).

**Worse:** Indicates a facility that has statistically, significantly more infections compared to national averages (based on a 95% confidence interval).





BIRMINGHAM REGION				
Alabama Surgical Site Infections (SSI)- Abdominal Hysterectomies January 1, 2011 – December 31, 2011				
Hospital Name	Number of Procedures	Number of SSI	Ratio of Actual to Predicted Infections (SIR)	Hospital Performance Compared to National Performance
<b>Low Volume Hospitals (fewer than 11 procedures)</b>				
Walker Baptist Medical Center	10	0	N/A	N/A
St. Vincent's Blount	4	0	N/A	N/A
<b>Medium Volume Hospitals (11-105 procedures)</b>				
Trinity Medical Center	37	0	N/A	N/A
Shelby Baptist Medical Center	58	0	0	Similar
Princeton Baptist Medical Center	93	1	0.419	Similar
Medical West	71	1	0.66	Similar
Cooper Green Mercy Hospital	45	3	2.586	Similar
<b>High Volume Hospitals (more than 105 procedures)</b>				
St. Vincent's East	158	0	0	Similar
Brookwood Medical Center	973	2	0.169	Better
St. Vincent Hospital	518	2	0.394	Similar
UAB Hospital	630	12	0.899	Similar

Data pulled on: September 14, 2012 5:01 PM (EST)

**N/A:** Hospital submitted data though number of procedures was too few for SIR and performance comparisons to be accurately calculated.

**Procedures:** The number of in-patient abdominal hysterectomy surgeries performed in 2011.

**SSI infections:** Infections that occur after in-patient abdominal hysterectomy surgeries and are related to the surgery.

**SIR:** The standardized infection ratio is the ratio of observed infections to predicted infections based on the accumulated risks of the procedures (based on national data).

**Better:** Indicates a facility that has statistically, significantly fewer infections compared to national averages (based on a 95% confidence interval).

**Similar:** Indicates a facility that does not have statistically, significantly different infections compared to national averages (based on a 95% confidence interval).

**Worse:** Indicates a facility that has statistically, significantly more infections compared to national averages (based on a 95% confidence interval).





CENTRAL REGION				
Alabama Surgical Site Infections (SSI)- Abdominal Hysterectomies January 1, 2011 – December 31, 2011				
Hospital Name	Number of Procedures	Number of SSI	Ratio of Actual to Predicted Infections (SIR)	Hospital Performance Compared to National Performance
<b>Low Volume Hospitals (fewer than 11 procedures)</b>				
Prattville Baptist Hospital	3	0	N/A	N/A
LV Stabler Memorial Hospital	2	1	N/A	N/A
<b>Medium Volume Hospitals (11-105 procedures)</b>				
Russell Medical Center	28	1	N/A	N/A
Vaughan Regional Medical Center	49	0	0	Similar
George H. Lanier Memorial Hospital	80	0	0	Similar
Baptist Medical Center South	105	2	0.913	Similar
<b>High Volume Hospitals (more than 105 procedures)</b>				
Baptist Medical Center East	144	1	0.339	Similar
East Alabama Medical Center	194	1	0.374	Similar
Jackson Hospital & Clinic	293	2	0.421	Similar

Data pulled on: September 14, 2012 5:01 PM (EST)

**N/A:** Hospital submitted data though number of procedures was too few for SIR and performance comparisons to be accurately calculated.

**Procedures:** The number of in-patient abdominal hysterectomy surgeries performed in 2011.

**SSI infections:** Infections that occur after in-patient abdominal hysterectomy surgeries and are related to the surgery.

**SIR:** The standardized infection ratio is the ratio of observed infections to predicted infections based on the accumulated risks of the procedures (based on national data).

**Better:** Indicates a facility that has statistically, significantly fewer infections compared to national averages (based on a 95% confidence interval).

**Similar:** Indicates a facility that does not have statistically, significantly different infections compared to national averages (based on a 95% confidence interval).

**Worse:** Indicates a facility that has statistically, significantly more infections compared to national averages (based on a 95% confidence interval).





NORTH REGION				
Alabama Surgical Site Infections (SSI)- Abdominal Hysterectomies January 1, 2011 – December 31, 2011				
Hospital Name	Number of Procedures	Number of SSI	Ratio of Actual to Predicted Infections (SIR)	Hospital Performance Compared to National Performance
<b>Low Volume Hospitals (fewer than 11 procedures)</b>				
North Mississippi Medical Center-Hamilton	2	0	N/A	N/A
Shoals Hospital	1	0	N/A	N/A
Lakeland Community Hospital	3	0	N/A	N/A
<b>Medium Volume Hospitals (11-105 procedures)</b>				
Highlands Medical Center	18	0	N/A	N/A
Athens Limestone Hospital	14	0	N/A	N/A
Parkway Medical Center	41	0	N/A	N/A
Helen Keller Hospital	27	1	N/A	N/A
Crestwood Medical Center	37	0	N/A	N/A
Marshall Medical Center North	12	0	N/A	N/A
Russellville Hospital	16	0	N/A	N/A
Decatur General	69	0	0	Similar
Marshall Medical Center South	63	1	0.725	Similar
Eliza Coffee Memorial Hospital	49	1	0.919	Similar
Cullman Regional Medical Center	61	3	2.449	Similar
<b>High Volume Hospitals (more than 105 procedures)</b>				
Huntsville Hospital	765	7	0.616	Similar

Data pulled on: September 14, 2012 5:01 PM (EST)

**N/A:** Hospital submitted data though number of procedures was too few for SIR and performance comparisons to be accurately calculated.

**Procedures:** The number of in-patient abdominal hysterectomy surgeries performed in 2011.

**SSI infections:** Infections that occur after in-patient abdominal hysterectomy surgeries and are related to the surgery.

**SIR:** The standardized infection ratio is the ratio of observed infections to predicted infections based on the accumulated risks of the procedures (based on national data).

**Better:** Indicates a facility that has statistically, significantly fewer infections compared to national averages (based on a 95% confidence interval).

**Similar:** Indicates a facility that does not have statistically, significantly different infections compared to national averages (based on a 95% confidence interval).

**Worse:** Indicates a facility that has statistically, significantly more infections compared to national averages (based on a 95% confidence interval).





NORTHEAST REGION				
Alabama Surgical Site Infections (SSI)- Abdominal Hysterectomies January 1, 2011 – December 31, 2011				
Hospital Name	Number of Procedures	Number of SSI	Ratio of Actual to Predicted Infections (SIR)	Hospital Performance Compared to National Performance
<b>Low Volume Hospitals (fewer than 11 procedures)</b>				
Riverview Regional Medical Center	9	0	N/A	N/A
Citizens Baptist Medical Center	10	0	N/A	N/A
Jacksonville Medical Center	10	1	N/A	N/A
Stringfellow Memorial Hospital	9	0	N/A	N/A
<b>Medium Volume Hospitals (11-105 procedures)</b>				
Dekalb Regional Medical Center	83	0	0	Similar
Coosa Valley Medical Center	43	0	0	Similar
Gadsden Regional Medical Center	57	0	0	Similar
Northeast Alabama Regional Medical Center	60	1	0.718	Similar
<b>No High Volume Hospitals (more than 105 procedures)</b>				

Data pulled on: September 14, 2012 5:01 PM (EST)

**N/A:** Hospital submitted data though number of procedures was too few for SIR and performance comparisons to be accurately calculated.

**Procedures:** The number of in-patient abdominal hysterectomy surgeries performed in 2011.

**SSI infections:** Infections that occur after in-patient abdominal hysterectomy surgeries and are related to the surgery.

**SIR:** The standardized infection ratio is the ratio of observed infections to predicted infections based on the accumulated risks of the procedures (based on national data).

**Better:** Indicates a facility that has statistically, significantly fewer infections compared to national averages (based on a 95% confidence interval).

**Similar:** Indicates a facility that does not have statistically, significantly different infections compared to national averages (based on a 95% confidence interval).

**Worse:** Indicates a facility that has statistically, significantly more infections compared to national averages (based on a 95% confidence interval).







SOUTHWEST REGION				
Alabama Surgical Site Infections (SSI)- Abdominal Hysterectomies January 1, 2011 – December 31, 2011				
Hospital Name	Number of Procedures	Number of SSI	Ratio of Actual to Predicted Infections (SIR)	Hospital Performance Compared to National Performance
<b>Low Volume Hospitals (fewer than 11 procedures)</b>				
University of South Alabama Medical Center	3	0	N/A	N/A
D.W. McMillan Memorial Hospital	6	0	N/A	N/A
Grove Hill Memorial Hospital	4	0	N/A	N/A
North Baldwin Infirmary	6	1	N/A	N/A
<b>Medium Volume Hospitals (11-105 procedures)</b>				
Monroe County Hospital	29	0	N/A	N/A
South Baldwin Regional Medical Center	86	3	2.56	Similar
<b>High Volume Hospitals (more than 105 procedures)</b>				
Providence Hospital	208	0	0	Similar
Mobile Infirmary Medical Center	271	1	0.274	Similar
Springhill Medical Center	131	1	0.478	Similar
Thomas Hospital	159	1	0.6	Similar
USA Children's & Women's Hospital	207	11	2.336	Worse

Data pulled on: September 14, 2012 5:01 PM (EST)

**N/A:** Hospital submitted data though number of procedures was too few for SIR and performance comparisons to be accurately calculated.

**Procedures:** The number of in-patient abdominal hysterectomy surgeries performed in 2011.

**SSI infections:** Infections that occur after in-patient abdominal hysterectomy surgeries and are related to the surgery.

**SIR:** The standardized infection ratio is the ratio of observed infections to predicted infections based on the accumulated risks of the procedures (based on national data).

**Better:** Indicates a facility that has statistically, significantly fewer infections compared to national averages (based on a 95% confidence interval).

**Similar:** Indicates a facility that does not have statistically, significantly different infections compared to national averages (based on a 95% confidence interval).

**Worse:** Indicates a facility that has statistically, significantly more infections compared to national averages (based on a 95% confidence interval).





WEST REGION				
Alabama Surgical Site Infections (SSI)- Abdominal Hysterectomies January 1, 2011 – December 31, 2011				
Hospital Name	Number of Procedures	Number of SSI	Ratio of Actual to Predicted Infections (SIR)	Hospital Performance Compared to National Performance
<b>Low Volume Hospitals (fewer than 11 procedures)</b>				
Pickens County Medical Center	1	0	N/A	N/A
<b>Medium Volume Hospitals (11-105 procedures)</b>				
Northwest Medical Center	53	0	0	Similar
<b>High Volume Hospitals (more than 105 procedures)</b>				
Northport Medical Center	61	2	1.72	Similar
DCH Regional Medical Center	111	3	1.303	Similar

Data pulled on: September 14, 2012 5:01 PM (EST)

**N/A:** Hospital submitted data though number of procedures was too few for SIR and performance comparisons to be accurately calculated.

**Procedures:** The number of in-patient abdominal hysterectomy surgeries performed in 2011.

**SSI infections:** Infections that occur after in-patient abdominal hysterectomy surgeries and are related to the surgery.

**SIR:** The standardized infection ratio is the ratio of observed infections to predicted infections based on the accumulated risks of the procedures (based on national data).

**Better:** Indicates a facility that has statistically, significantly fewer infections compared to national averages (based on a 95% confidence interval).

**Similar:** Indicates a facility that does not have statistically, significantly different infections compared to national averages (based on a 95% confidence interval).

**Worse:** Indicates a facility that has statistically, significantly more infections compared to national averages (based on a 95% confidence interval).





## Alabama General Critical Access Facilities

<b>Birmingham Region</b>	<b>Facility Type</b>	<b>Pages</b>
BROOKWOOD MEDICAL CENTER	General	18, 25, 32, 39
CHILDREN'S HEALTH SYSTEM	Children's	25, 32
COOPER GREEN MERCY HOSPITAL	General	18, 25, 32, 39
MEDICAL WEST	General	18, 25, 32, 39
PRINCETON BAPTIST MEDICAL CENTER	General	18, 25, 32, 39
SHELBY BAPTIST MEDICAL CENTER	General	18, 25, 32, 39
ST. VINCENT HOSPITAL	General	18, 25, 32, 39
ST. VINCENT'S BLOUNT	General	18, 25, 32, 39
ST. VINCENT'S EAST	General	18, 25, 32, 39
ST. VINCENT'S ST. CLAIR	General	18, 25
TRINITY MEDICAL CENTER	General	18, 25, 32, 39
UNIVERSITY OF ALABAMA AT BIRMINGHAM (UAB)	General	18, 25, 32, 39
WALKER BAPTIST MEDICAL CENTER	General	18,25,33,40
<b>Central Region</b>	<b>Facility Type</b>	<b>Pages</b>
BAPTIST MEDICAL CENTER EAST	General	19, 26, 33, 40
BAPTIST MEDICAL CENTER SOUTH	General	19, 26, 33, 40
BULLOCK COUNTY HOSPITAL	General	19
CHILTON MEDICAL CENTER	General	19
COMMUNITY HOSPITAL	General	19, 26, 33
CRENSHAW COMMUNITY HOSPITAL	General	19
EAST ALABAMA MEDICAL CENTER	General	19, 26, 33, 40
ELMORE COMMUNITY HOSPITAL	<i>HAI reporting begins 2012</i>	
GEORGE H. LANIER MEMORIAL HOSPITAL	General	19, 26, 33, 40
GEORGIANA HOSPITAL	General	19
JACK HUGHSTON MEMORIAL HOSPITAL	General	33
JACKSON HOSPITAL & CLINIC	General	19, 26, 33, 40
LAKE MARTIN COMMUNITY HOSPITAL	General	19
LV STABLER MEMORIAL HOSPITAL	General	19, 26, 33, 40
PRATTVILLE BAPTIST HOSPITAL	General	19, 26, 33, 40
RUSSELL MEDICAL CENTER	General	19, 26, 33, 40
VAUGHAN REGIONAL MEDICAL CENTER	General	19, 26, 33, 40
<b>North Region</b>	<b>Facility Type</b>	<b>Pages</b>
ATHENS LIMESTONE HOSPITAL	General	20, 27, 34, 41
CRESTWOOD MEDICAL CENTER	General	20, 27, 34, 41



CULLMAN REGIONAL MEDICAL CENTER	General	20, 27, 34, 41
DECATUR GENERAL	General	20, 27, 34, 41
ELIZA COFFEE MEMORIAL HOSPITAL	General	20, 27, 34, 41
HARTSELLE MEDICAL CENTER	General	20, 27, 34
HELEN KELLER HOSPITAL	General	20, 27, 34, 41
HIGHLANDS MEDICAL CENTER	General	20, 34, 41
HUNTSVILLE HOSPITAL	General	20, 27, 34, 41
LAKELAND COMMUNITY HOSPITAL	General	20, 27, 34, 41
LAWRENCE MEDICAL CENTER	General	20
MARSHALL MEDICAL CENTER NORTH	General	20, 27, 34, 41
MARSHALL MEDICAL CENTER SOUTH	General	20, 27, 34, 41
NORTH MISSISSIPPI MEDICAL CENTER-HAMILTON	General	20, 27, 34, 41
PARKWAY MEDICAL CENTER	General	20, 27, 34, 41
RED BAY HOSPITAL	General	20
RUSSELLVILLE HOSPITAL	General	20, 27, 34, 41
SHOALS HOSPITAL	General	20, 27, 34, 41
<b>Northeast Region</b>	<b>Facility Type</b>	<b>Pages</b>
CHEROKEE MEDICAL CENTER	General	21
CITIZENS BAPTIST MEDICAL CENTER	General	21, 28, 35, 42
CLAY COUNTY HOSPITAL	General	21, 28
COOSA VALLEY MEDICAL CENTER	General	21, 28, 35, 42
DEKALB REGIONAL MEDICAL CENTER	General	21, 28, 35, 42
GADSDEN REGIONAL MEDICAL CENTER	General	21, 28, 35, 42
JACKSONVILLE MEDICAL CENTER	General	21, 28, 35, 42
NORTHEAST ALABAMA REGIONAL MEDICAL CENTER	General	21, 28, 35, 42
RANDOLPH HOSPITAL	<i>Closed in March 2011</i>	
RIVERVIEW REGIONAL MEDICAL CENTER	General	21, 28, 35, 42
STRINGFELLOW MEMORIAL HOSPITAL	General	21, 28, 35, 42
WEDOWEE HOSPITAL	General	21
<b>Southeast Region</b>	<b>Facility Type</b>	<b>Pages</b>
ANDALUSIA REGIONAL HOSPITAL	General	22, 29, 36, 43
DALE MEDICAL CENTER	General	22, 29, 36, 43
ELBA GENERAL HOSPITAL	General	22
FLORALA MEMORIAL HOSPITAL	General	22
FLOWERS HOSPITAL	General	22, 29, 36, 43
MEDICAL CENTER BARBOUR	General	22, 29, 36, 43



MEDICAL CENTER ENTERPRISE	General	22, 29, 36, 43
MIZELL MEMORIAL HOSPITAL	General	22, 29, 36, 43
SOUTHEAST ALABAMA MEDICAL CENTER	General	22, 29, 36, 43
TROY REGIONAL MEDICAL CENTER	General	22, 29, 36
WIREGRASS MEDICAL CENTER	General	22, 29, 36
<b>Southwest Region</b>	<b>Facility Type</b>	<b>Pages</b>
ATMORE COMMUNITY HOSPITAL	General	23, 30, 37
D.W. MCMILLAN MEMORIAL HOSPITAL	General	23, 30, 37, 44
EVERGREEN MEDICAL CENTER	General	23
GROVE HILL MEMORIAL HOSPITAL	General	44
INFIRMARY WEST	General	23, 30, 37
J. PAUL JONES HOSPITAL	General	23
JACKSON MEDICAL CENTER	General	23
MOBILE INFIRMARY MEDICAL CENTER	General	23, 30, 37, 44
MONROE COUNTY HOSPITAL	General	23, 30, 37, 44
NORTH BALDWIN INFIRMARY	General	23, 30, 37, 44
PROVIDENCE HOSPITAL	General	23, 30, 37, 44
SOUTH BALDWIN REGIONAL MEDICAL CENTER	General	23, 30, 37, 44
SOUTHWEST ALABAMA MEDICAL CENTER	<i>Closed in August 2011</i>	
SPRINGHILL MEDICAL CENTER	General	23, 30, 37, 44
THOMAS HOSPITAL	General	23, 30, 37, 44
UNIVERSITY OF SOUTH ALABAMA (USA) MEDICAL CENTER	General	23, 30, 37, 44
UNIVERSITY OF SOUTH ALABAMA (USA) CHILDREN'S & WOMEN'S HOSPITAL	Women's and Children's	30, 37, 44
WASHINGTON COUNTY HOSPITAL	<i>HAI reporting begins 2012</i>	
<b>West Region</b>	<b>Facility Type</b>	<b>Pages</b>
BIBB MEDICAL CENTER	General	24
BRYAN W. WHITFIELD MEMORIAL HOSPITAL	General	24, 31
DCH REGIONAL MEDICAL CENTER	General	24, 31, 38, 45
FAYETTE MEDICAL CENTER	General	24, 31, 38
GREENE COUNTY HOSPITAL	General	24
HALE COUNTY HOSPITAL	General	24
HILL HOSPITAL	General	24
NORTHPORT MEDICAL CENTER	General	24, 31, 38, 45
NORTHWEST MEDICAL CENTER	General	24, 31, 38, 45
PICKENS COUNTY MEDICAL CENTER	General	24, 31, 38, 45



# Alabama Healthcare Data Advisory Council Members, 2012

Donald E. Williamson, M.D., State Health Officer – Chair

## Alabama Hospital Association Appointees

Keith Granger, President/CEO, Trinity Medical Center  
Beth Anderson, Administrator, USA Medical Center  
Laura Bell, Director of Clinical Effectiveness, East Alabama Medical Center  
Linda Jordan, Administrator, Clay County Hospital  
Beth Goodall, Epidemiology Director, DCH Regional Medical Center  
Patty Miller, Manager of Infection Control and Prevention, Baptist Medical Center South

## Business Council of Alabama Appointees

Rick Finch, Drummond Co., Inc.  
Michael Jordan, Alabama Power Co. (resigned in 2012)  
Foster Ware, (appointed in June 2012)

## Mineral District Medical Society

William McCollum, M.D.

## Governor Appointed Consumer Member

Stacey Hollis

## Blue Cross and Blue Shield of Alabama Appointee

Susan Warren, Health Information Technology

## Alabama Association of Health Plans Appointee

Michael O'Malley, Executive Director

## State Health Officer Appointed member from the Association for Professionals in Infection Control and Epidemiology

Alan M. Stamm, M.D.

## Public Education Employees Health Insurance Plan Appointee

Donna Joyner, Assistant Director



State Employees Insurance Board Appointee

Debbie Taylor, Clinical Director

Medical Association of the State of Alabama

Claude L. Kinzer, M.D. (appointed in July 2012)

Randall Weaver, M.D. (appointed in July 2012)

Julia Boothe, M.D. (appointed in July 2012)