

**Catheter-associated Urinary Tract Infections
(CAUTI) in ICUs and select wards**

NQF #: 0138

Developer: Centers for Disease Control and Prevention (CDC)

Data Source: Leapfrog Hospital Survey; CMS

Description: Standardized Infection Ratio (SIR) of healthcare-associated, catheter-associated urinary tract infections (CAUTI) among patients in intensive care units (ICUs) and medical, surgical, and medical/surgical wards.

Rationale: CAUTI is the most common type of healthcare-associated infection, accounting for more than 30% of acute care hospital infections. 13,000 deaths are associated with UTIs each year. There are estimated to be 449,334 CAUTI events per year. Each CAUTI is associated with the medical cost of \$758. And, a total of over \$340 million spent in health care is attributable to the incident of CAUTI in the U.S. each year.

Citations for Rationale:

- Klevens RM, Edwards JR, et al. Estimating healthcare-associated infection and deaths in U.S. hospitals, 2002. Public Health Reports 2007; 122:160- 166.
- Scott, RD. The Direct Medical Costs of Healthcare-Associated Infections in U.S. Hospitals and the Benefits of Prevention. http://www.cdc.gov/ncidod/dhqp/pdf/Scott_CostPaper.pdf accessed April 12, 2010.
- Dudeck M, et al., National Healthcare Safety Network (NHSN) report, data summary for 2009, device-associated module. American Journal of Infection Control, 2011;39:349-367.

Impact:

- CAUTI is the most common type of healthcare-associated infection, accounting for more than 30% of acute care hospital infections
- 13,000 deaths associated with UTIs each year
- 449,334 estimated CAUTIs/yr
- \$758 medical cost/CAUTI
- Total >\$340 million attributable to CAUTI in U.S. each year

Citations for Impact:

- Klevens RM, Edwards JR, et al. Estimating healthcare-associated infection and deaths in U.S. hospitals, 2002. Public Health Reports 2007; 122:160- 166.
- Scott, RD. The Direct Medical Costs of Healthcare-Associated Infections in U.S. Hospitals and the Benefits of Prevention. http://www.cdc.gov/ncidod/dhqp/pdf/Scott_CostPaper.pdf accessed April 12, 2010

Opportunity:

- Opportunity for improvement exists, based on the coefficient of variation for the measure.

Evidence:

- Evidence-based guidelines; randomized controlled trials; expert opinion; systematic synthesis of research; and meta-analysis.

Citations for Evidence:

- National Quality Forum. National Healthcare Safety Network (NHSN) catheter-associated urinary tract infection (CAUTI) outcome measure. 2017. <http://www.qualityforum.org/QPS/QPSTool.aspx?m=1121&e=1#qpsPageState=%7B%22TabType%22%3A1,%22TabContentType%22%3A2,%22ItemsToCompare%22%3A%5B%5D,%22StandardID%22%3A1121,%22EntityTypeID%22%3A1%7D>
- Centers for Disease Control and Prevention. Catheter-associated urinary tract infections (CAUTI). 2017. https://www.cdc.gov/HAI/ca_uti/uti.html