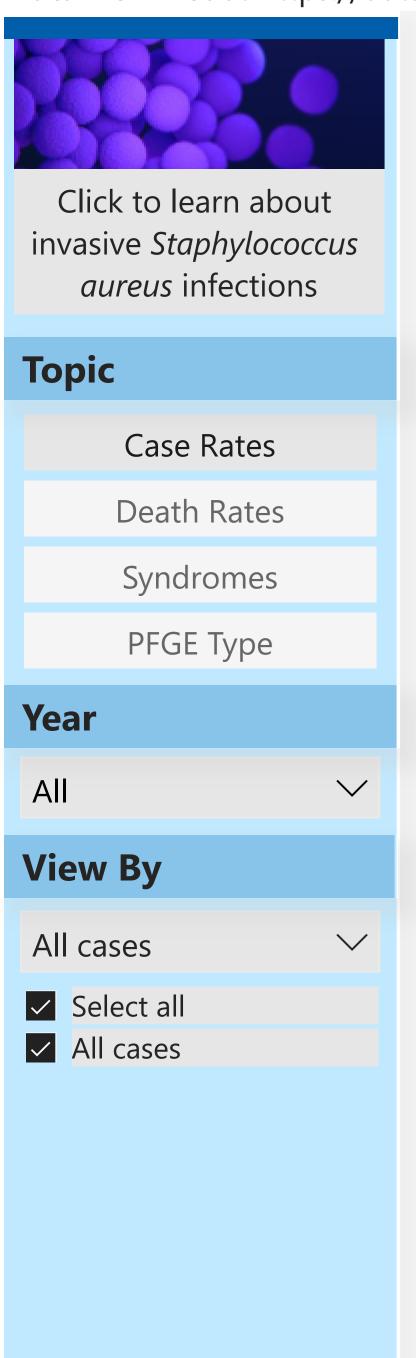
Accessible Version: https://www.cdc.gov/hai/eip/haicviz.html

Data Download: https://data.cdc.gov/Case-Surveillance/HAICViz-iSA/ssz5-s49e



Download Data



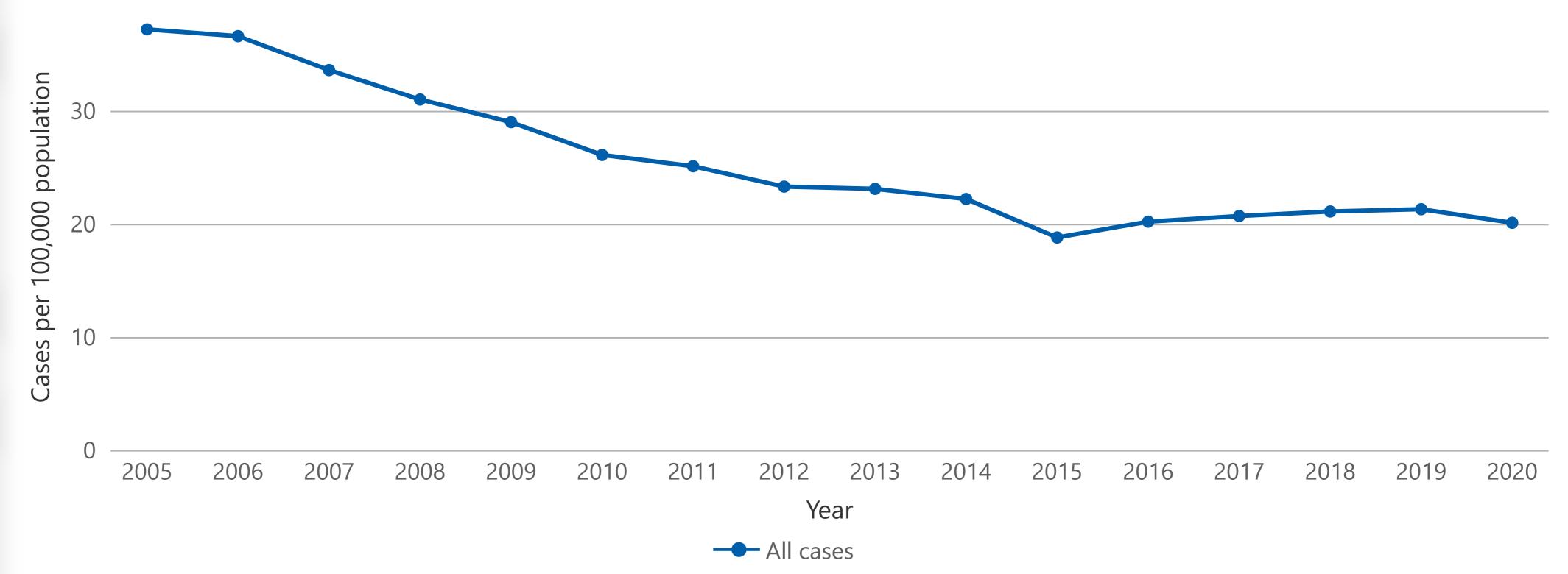
Clostridioides difficile infections

Invasive *Staphylococcus* aureus infections

Multi-site Gram-negative Surveillance Initiative



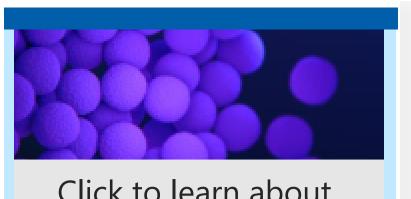
Rates of invasive methicillin-resistant *Staphylococcus aureus* infections in HAIC surveillance area All Cases



Note: Epidemiologic classification (epi class): A case is classified as Hospital-onset (HO) if the *Staphylococcus aureus* culture was obtained on or after the fourth calendar day of hospitalization, where admission is hospital day 1; Healthcare-associated community-onset (HACO) if the culture was obtained in an outpatient setting or before the fourth calendar day of hospitalization and had one of the following: 1) a history of hospitalization, surgery, dialysis or residence in a long-term care facility in the previous year or, 2) the presence of a central vascular catheter (CVC) within 2 days prior to culture; Community-associated (CA) if none of the previously mentioned criteria are met.

Methods for this surveillance activity have changed over time. MRSA annual reports provide information about changes in methods from year to year. Surveillance areas have changed over time.

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Click to learn about invasive *Staphylococcus* aureus infections

Topic

Case Rates

Death Rates

Syndromes

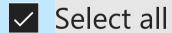
PFGE Type

Year

All

View By

All cases



✓ All cases

Candida bloodstream infections (Candidemia)

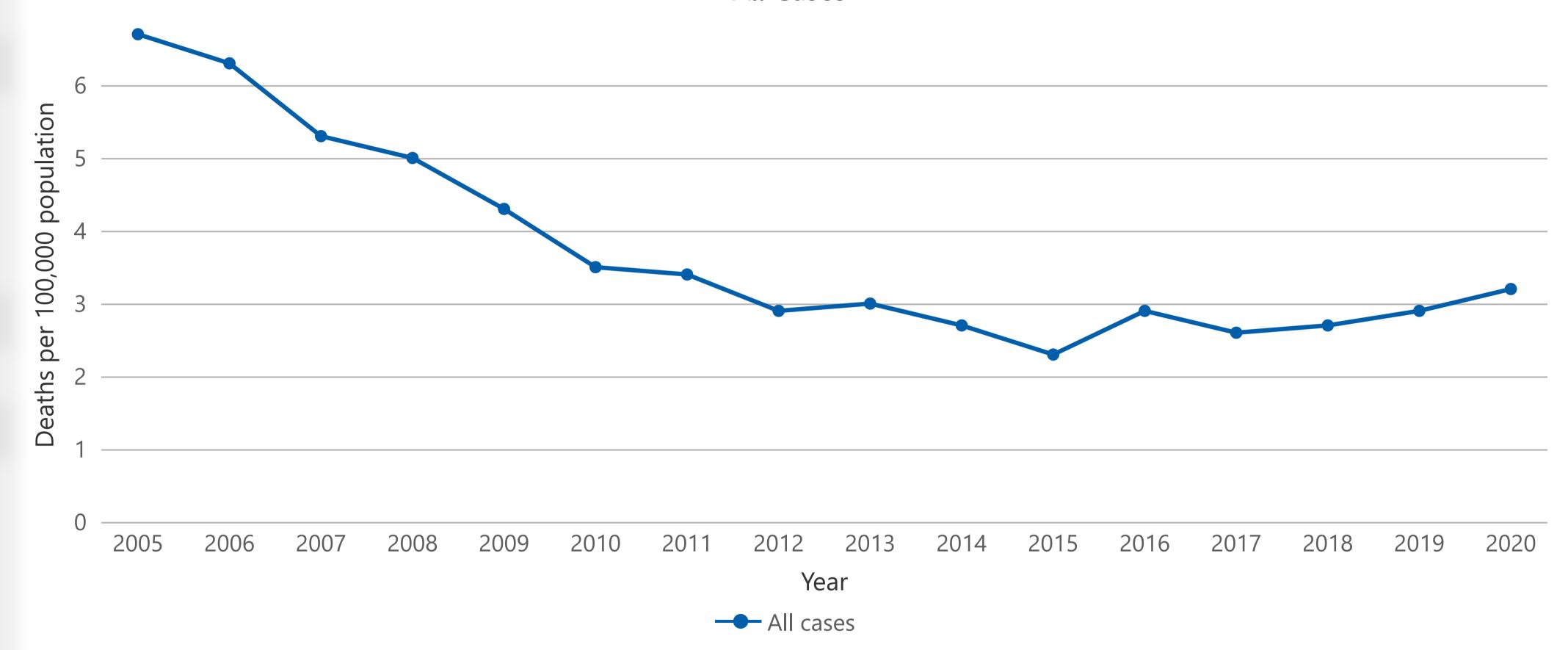
Clostridioides difficile infections

Invasive *Staphylococcus* aureus infections

Multi-site Gram-negative Surveillance Initiative



Rates of death following invasive methicillin-resistant *Staphylococcus aureus* infections in HAIC surveillance area All Cases



Note: For patients admitted to a hospital, vital status was assessed at the time of discharge. For patients that were in a long term care facility, long term acute care facility, or seen at an outpatient dialysis center, vital status was assessed 30 days after the date of incident culture. For all other patients, vital status was ascertained using medical records from the healthcare facility encounter associated with the incident culture. Methods, such as the way missing data are taken into account, have changed over time. MRSA annual reports describe the specific methodology

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used each year. Surveillance areas have changed over time.



Click to learn about invasive *Staphylococcus* aureus infections

Topic

Case Rates

Death Rates

Syndromes

PFGE Type

Year

All

View By

Syndromes

- ✓ Select all
- ✓ Bloodstream infection...

- ✓ Bloodstream infection...
- ✓ Non-bloodstream inf...

Candida bloodstream infections (Candidemia)

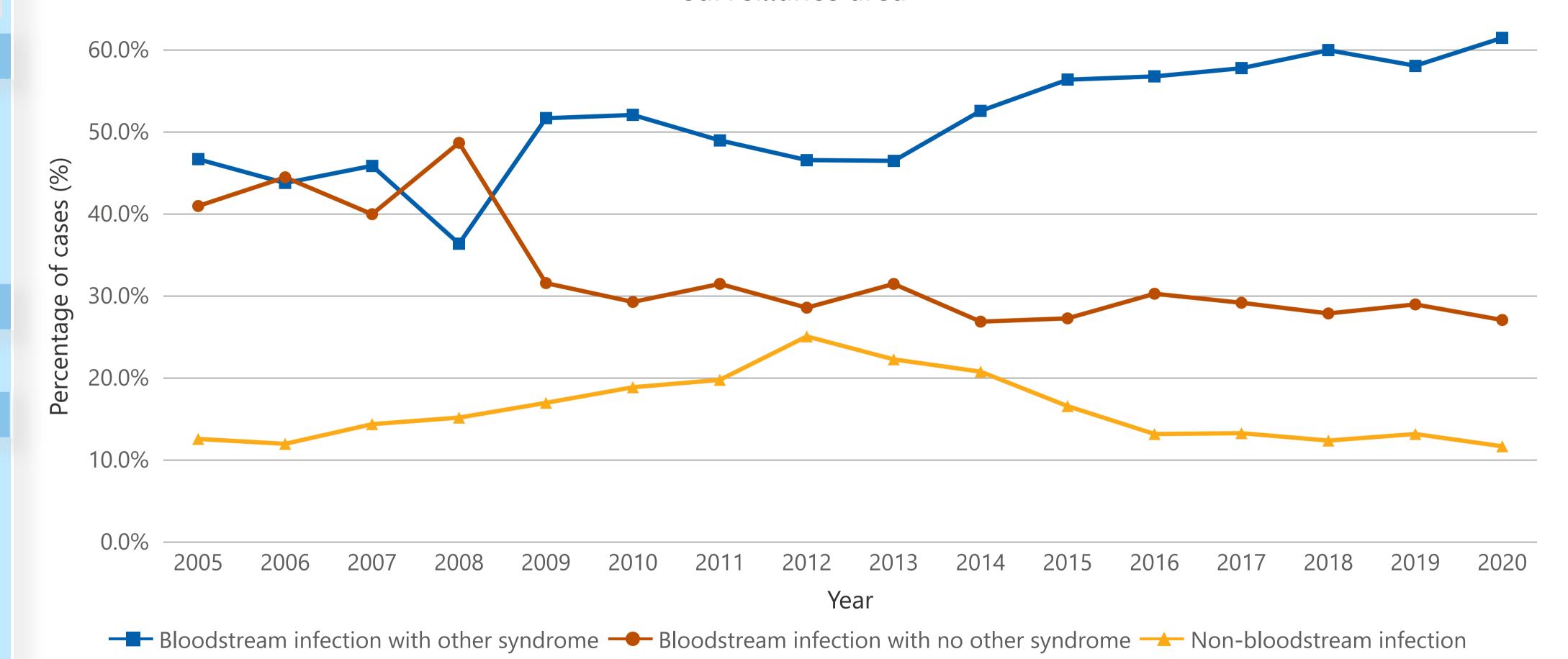
Clostridioides difficile infections

Invasive *Staphylococcus* aureus infections

Multi-site Gram-negative Surveillance Initiative



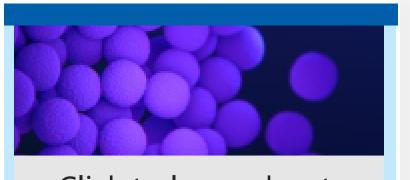
Percent of invasive methicillin-resistant *Staphylococcus aureus* infections with selected syndromes in HAIC surveillance area



Note: Bloodstream infections with no other syndrome are cases who had a positive blood culture but no other clinical syndrome identified (e.g., pneumonia or meningitis).

Methods, such as the way missing data are taken into account, have changed over time. MRSA annual reports describe the specific methodology used each year. Surveillance areas have changed over time.

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Click to learn about invasive *Staphylococcus* aureus infections

Topic

Case Rates

Death Rates

Syndromes

PFGE Type

Year

All

View By

All cases

- ✓ Select all
- ✓ USA 100
- ✓ USA 300
- ✓ Other

Candida bloodstream infections (Candidemia)

Clostridioides difficile infections

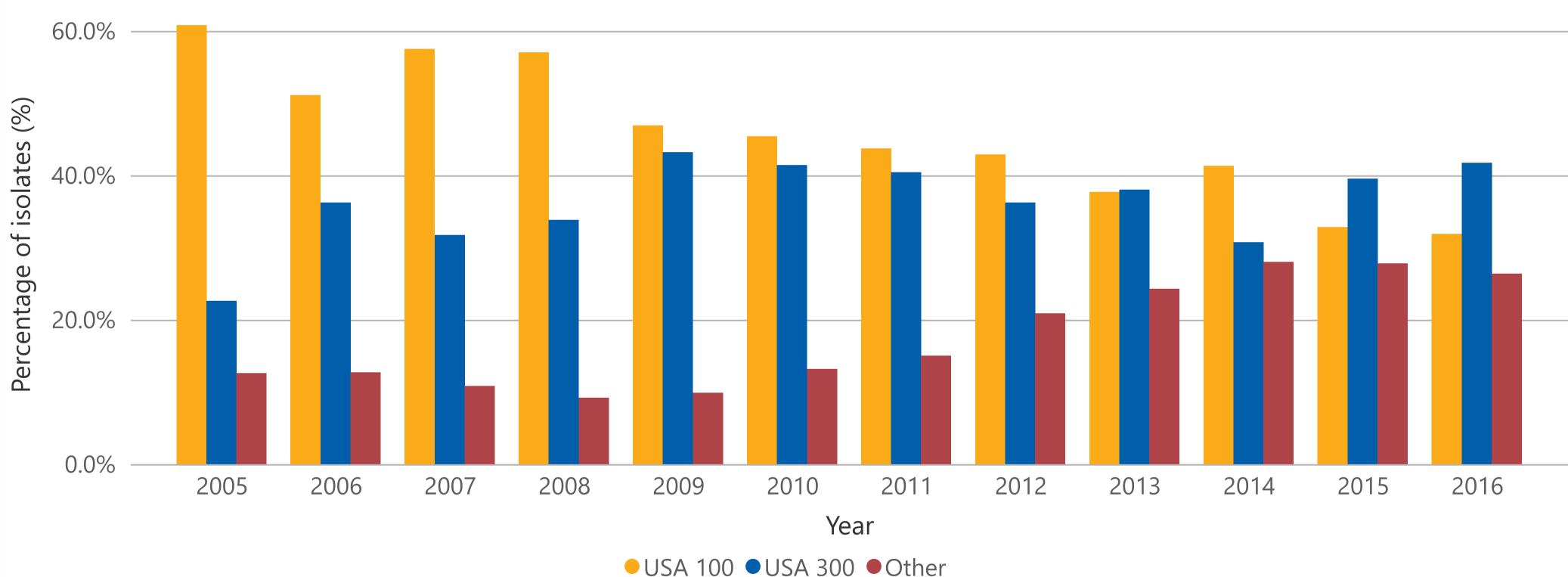
Invasive *Staphylococcus* aureus infections

Multi-site Gram-negative Surveillance Initiative



Percent of invasive methicillin-resistant *Staphylococcus aureus* by pulsed-field gel electrophoresis (PFGE) type among isolates in HAIC surveillance area





Note: Pulsed field gel electrophoresis (PFGE) was discontinued in 2008; up until 2012, PFGE was inferred based on <u>a validated algorithm</u>. *spa* typing was added to routine laboratory testing in 2012. Pulsed field type is currently <u>inferred based on *spa* type</u>, inferred multilocus sequence typing clonal complex and molecular characteristics of the isolates. USA300 isolates are confirmed using a <u>SNP assay</u>.

MRSA annual reports provide information about epidemiologic classification and changes in methods from year to year.

Surveillance areas have changed over time. Surveillance areas collecting isolates include counties in CA (through 2013), CO (through 2011), CT

(through 2011), GA, MD (2008 through 2011), MN, NY (through 2013), OR (through 2011), and TN.

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