



February 2026 Dialysis Office Hours

Benefits of Accurate Reporting on the Outpatient Dialysis Survey

Vannessa Cox

Public Health Analyst II

Centers for Disease Control and Prevention

National Center for Emerging and Zoonotic Infectious Diseases

Division of Healthcare Quality Promotion Surveillance Branch

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Agenda

- About the Outpatient Dialysis Survey
- Why accurate reporting on the Outpatient Dialysis Survey is important
- How survey data are used to support infection prevention activities
- How survey data are used in BSI SIR calculation and rebaselining
- How survey data are used for outreach
- How survey data support research and analytic efforts
- How reported data contribute to publications and real-world public health impact

Purpose of the Outpatient Dialysis Survey

- Collects standardized data on dialysis facilities and services
- Informs federal, state, and local public health efforts
- Supports oversight, quality improvement, and patient safety
- Enables comparison across regions and time

Timeline and Reporting Consequences

- The survey is made available annually in February.
- Facilities must complete and save the current year Annual Survey; while CDC does not set deadlines, organizations may establish internal deadlines.
- Facilities cannot create Monthly Reporting Plans or submit monthly data (May–December) until the current year Annual Survey is completed.
- Without a completed survey, denominator (patient days) and numerator data (events) cannot get entered to NHSN.

Impact of Survey Data

- Identifies potential over or under reporting and supports targeted facility level follow up
- Informs data quality improvement and analytic validation efforts
- Enables high quality epidemiologic and health services research
- Supports analyses of access to care, outcomes, disparities, and trends
- Informs identification of best practices and emerging risks
- The 2023 Baseline SIR calculations are derived from Annual Survey data, making accurate data entry critical.

Annual Survey and 2023 Rebaseline

- Annual Survey data are necessary to calculate the newly rebaselined Standardized Infection Ratio (SIR).
- The process of updating how the SIR is calculated is called rebaselining, and the Annual Survey played an integral role.
- Previously, the dialysis SIR was based on 2014 data and considered access type only, whereas other HAI SIRs use models that incorporate additional factors.
- The updated dialysis SIR uses 2023 data and is calculated using a statistical model that includes access type and facility characteristics collected through the Annual Survey.

Annual Survey and 2023 Rebaseline *Continued...*

- Subject matter experts reviewed the entire survey to identify factors that impact facility infection control and determined which items are important for BSI SIR calculations.
- After in-depth survey review and discussion, facility location (free-standing, hospital-located, hospital-affiliated) and number of stations were selected for testing in a statistical model.
- The updated SIR now reflects current healthcare practices and incorporates critical factors that impact infection rates.

Benefits for Research

- Enables high quality epidemiologic and health services research
- Supports studies on access to care, outcomes, and disparities
- Improves validity of trend analyses and predictive modeling
- Helps researchers identify best practices and emerging risks

Research Projects Based on the Survey

- [Facility Reported Hepatitis C Virus Prevalence and Screening Practices in U.S.](#)
- [Vital Signs: Health Disparities in Hemodialysis-Associated Staphylococcus aureus Bloodstream Infections United States, 2017–2020](#)
- [A Six Year Follow Up of Bloodstream Infections in Hemodialysis Facilities \(2020\)](#)
- [CDC NHSN Dialysis Event Reports](#)

Key Takeaways

- Annual Survey completion is required.
- Accurate data supports accurate reporting and analysis.
- Survey data drives public health action and research.
- Your participation strengthens national surveillance.
- Accurate data helps protect patients and improves care.

RESOURCES

- [Dialysis Event Protocol](#)
- [Dialysis NHSN Training](#)
- [NHSN Introduction Training](#)
- [NHSN Application](#)
- [NHSN Dialysis Forms and Instructions](#)

Contact Info:

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hvl9@cdc.gov



Thank you.

For more information, contact CDC
1-800-CDC-INFO (232-4636)
TTY: 1-888-232-6348 <https://www.cdc.gov/>
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