

Patient Safety Component—Annual Hospital Survey

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Facility Microbiology Laboratory Practices

*1. Does your facility have its own laboratory that performs antimicrobial susceptibility testing?

Yes No

If No, where is your facility's antimicrobial susceptibility testing performed? (check one)

Affiliated medical center Commercial referral laboratory

*2. Does the laboratory use CLSI (formerly NCCLS) antimicrobial susceptibility standards?

Yes No

If Yes, specify the version of the M100 document that the laboratory uses: M100- S _____

*3. For the following organisms please indicate which methods are used for:

(1) primary susceptibility testing and

(2) secondary, supplemental, or confirmatory testing (if performed).

If your laboratory does not perform susceptibility testing, please indicate the methods used at the referral laboratory.

Please use the testing codes listed below the table.

Pathogen	(1) Primary	(2) Secondary	Comments
Coagulase-negative staphylococci	_____	_____	_____
<i>Staphylococcus aureus</i>	_____	_____	_____
<i>Enterococcus</i> spp.	_____	_____	_____
Enterobacteriaceae	_____	_____	_____
<i>Pseudomonas aeruginosa</i>	_____	_____	_____
<i>Acinetobacter</i> spp.	_____	_____	_____
<i>Stenotrophomonas maltophilia</i>	_____	_____	_____
1 = Kirby-Bauer disk diffusion 2 = Vitek (Legacy) 2.1 = Vitek 2 3.1 = BD Phoenix 4 = Sensititre	5.1 = MicroScan walkaway rapid 5.2 = MicroScan walkaway conventional 5.3 = MicroScan auto or touchscan 6 = Other micro-broth dilution method 7 = Agar dilution method	10 = E test 12 = Vancomycin agar screen (BHI + vancomycin) 13 = Other (describe in Comments section)	

*4. Does the laboratory confirm vancomycin-resistant staphylococci using a second method? Yes No

If Yes, please indicate methods: (check all that apply)

- | | | |
|---|--|--|
| <input type="checkbox"/> Kirby-Bauer disk diffusion | <input type="checkbox"/> MicroScan walkaway rapid | <input type="checkbox"/> E test |
| <input type="checkbox"/> Vitek (Legacy) | <input type="checkbox"/> MicroScan walkaway conventional | <input type="checkbox"/> Vancomycin agar screen (BHI + vancomycin) |
| <input type="checkbox"/> Vitek 2 | <input type="checkbox"/> MicroScan auto or touchscan | <input type="checkbox"/> Other (specify): _____ |
| <input type="checkbox"/> BD Phoenix | <input type="checkbox"/> Other micro-broth dilution method | |
| <input type="checkbox"/> Sensititre | <input type="checkbox"/> Agar dilution method | |

*5. Has your laboratory implemented the revised cephalosporin and monobactam breakpoints for Enterobacteriaceae recommended by CLSI as of 2010? Yes No

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*6. Does the laboratory perform a special test for ESBL production? Yes No
 If Yes, please indicate what is done if ESBL production is detected: (check one)

Change susceptible and intermediate interpretations for third generation cephalosporins and aztreonam to resistant

Suppress the results for third generation cephalosporins and aztreonam for the report

No changes are made in the interpretation of cephalosporins and aztreonam, the test is used for epidemiological or infection control purposes

*7. Has your laboratory implemented the revised carbapenem breakpoints for Enterobacteriaceae recommended by CLSI as of 2010? Yes No

*8. Does your laboratory perform a special test for carbapenemase production? Yes No
 If Yes, please indicate what is done if carbapenemase production is detected: (check one)

Change susceptible carbapenem results to resistant

Report carbapenem MIC results without an interpretation

No changes are made in the interpretation of carbapenems, the test is used for epidemiological or infection control purposes

*9. Does your laboratory perform colistin or polymyxin B susceptibility testing for drug-resistant gram negative bacilli? Yes No
 If Yes, please indicate methods: (check all that apply)

<input type="checkbox"/> Kirby-Bauer disk diffusion	<input type="checkbox"/> MicroScan walkaway rapid	<input type="checkbox"/> E test
<input type="checkbox"/> Vitek (Legacy)	<input type="checkbox"/> MicroScan walkaway conventional	<input type="checkbox"/> Vancomycin agar screen (BHI + vancomycin)
<input type="checkbox"/> Vitek 2	<input type="checkbox"/> MicroScan auto or touchscan	<input type="checkbox"/> Other (specify): _____
<input type="checkbox"/> BD Phoenix	<input type="checkbox"/> Other micro-broth dilution method	
<input type="checkbox"/> Sensititre	<input type="checkbox"/> Agar dilution method	

*10. Does your facility have its own laboratory that performs antifungal susceptibility testing for *Candida* species?
 Yes No
 If No, where is your facility's antifungal susceptibility testing performed? (check one)

Affiliated medical center Commercial referral laboratory Not offered by my facility

11. If antifungal susceptibility testing is performed at your facility or an outside laboratory, what methods are used? (check all that apply)

<input type="checkbox"/> Broth macrodilution	<input type="checkbox"/> Broth microdilution	<input type="checkbox"/> YeastOne colorimetric microdilution	<input type="checkbox"/> E test
<input type="checkbox"/> Vitek 2 card	<input type="checkbox"/> Disk diffusion	<input type="checkbox"/> Other: _____	

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*12. Is antifungal susceptibility testing performed automatically/reflexively for *Candida* spp. cultured from normally sterile body sites (such as blood), without needing a specific order or request for susceptibility testing from the clinician?

Yes No

If Yes, what antifungal drugs are tested automatically/reflexively? (check all that apply)

Fluconazole Itraconazole Voriconazole Caspofungin
 Miconazole Anidulafungin Flucytosine Other

*13. What is the primary testing method for *C. difficile* used most often by your facility's laboratory or the outside laboratory where your facility's testing is performed? (check one)

- Enzyme immunoassay (EIA) for toxin
- Cell cytotoxicity neutralization assay
- Nucleic acid amplification test (NAAT) (e.g., PCR, LAMP)
- Glutamate dehydrogenase (GDH) antigen plus EIA for toxin (2-step algorithm)
- GDH plus NAAT (2-step algorithm)
- GDH plus EIA for toxin, followed by NAAT for discrepant results
- Toxigenic culture (*C. difficile* culture followed by detection of toxins)
- Other (specify): _____
("Other" should not be used to name specific laboratories, reference laboratories, or the brand names of *C. difficile* tests; most methods can be categorized accurately by selecting from the options provided. Please ask your laboratory, refer to the Tables of Instructions for this form, or conduct a search for further guidance on selecting the correct option to report.)