

SIR – CAUTI Data for CMS IPPS (2022 Baseline)

CAUTI-Onc (Oncology Locations)

December 2025

Purpose: Help facilities review the CAUTI data that NHSN will submit to CMS for the Hospital IQR Program CAUTI ONC measure, using the 2022 national baseline risk models. SIRs calculated under the 2022 baseline compare observed infections to those predicted from 2022 national aggregate data.

The NHSN Analysis Output Option, “**SIR - ACH CAUTI Data - Onc Locations Only - for CMS IPPS (2022 Baseline)**,” lets facilities review the CAUTI data that will be submitted to CMS on their behalf. Keep the following in mind as you use this report:

1. These data are submitted only for facilities participating in the CMS IPPS Hospital IQR Program, as indicated by their CCN in NHSN.
2. This report includes **in-plan CAUTI** data for each **adult and pediatric oncology location (i.e., ICUs, wards, step-down units, and mixed-acuity.)** Only data **from January 2026 forward** are included; earlier years will not appear in this output. **Note:** data from non-oncology locations are **not** included in this report.
3. **IMPORTANT!** You must **Report No Events** for any location-months with no CAUTI events.
4. This output option represents an **SIR for each hospital**, not each CCN. If your hospital shares a CCN, the SIR reflects only your facility’s contribution. Use the Group feature if you need a single SIR across hospitals sharing a CCN.
 - a. More information about the Group feature can be found on the [NHSN Group Users page](#).
 - b. For information on how facilities SIR is aggregated at the CCN level, refer to the [SIR Aggregation for Facilities with a Shared CCN guidance document](#).

The data in this report will represent data current as of the last time you generated datasets. **Note:** data in the Quality Net Provider Participation Report are not updated simultaneously with your data in NHSN. Data changes made in NHSN will be reflected in the next monthly submission to CMS.

EXCEPTION: Quarterly data are frozen as of the final submission date for that quarter. For example, Q1 data will be frozen as of 7am UTC* (3am ET) on August 16th. Any changes made to these data in NHSN after the final submission deadline will not be reflected in later months on the Provider Participation Report or on Hospital Compare.

5. To learn more about the SIR, including how it is calculated for CAUTI data, please see the [NHSN SIR Guide](#).
6. The information in this document should be used in conjunction with the document(s):
 - a. [How to Set Up CLABSI and CAUTI Reporting per NHSN Protocol for the CMS Inpatient Prospective Payment System](#)
 - b. [NHSN Monthly Checklist for Reporting to CMS Hospital IQR Program](#)

*All NHSN timestamps are displayed in the UTC Time Standard. To convert UTC to Eastern Time:

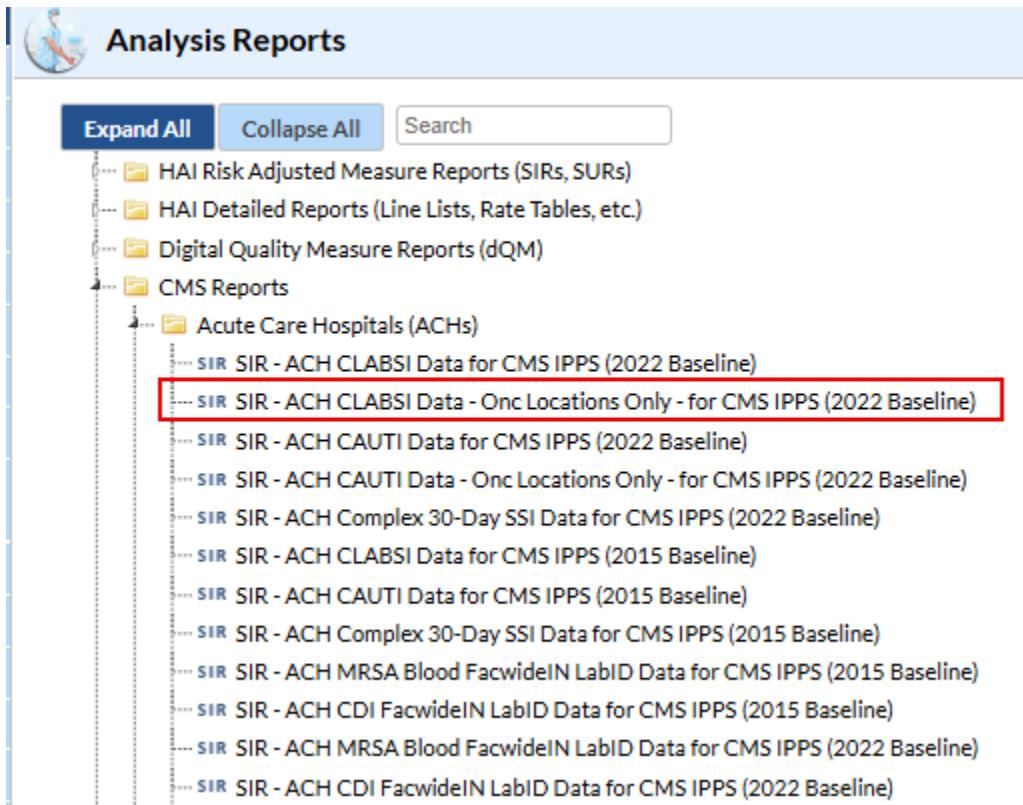
- Between second Sunday in March – first Sunday in November: subtract 4 hours from UTC to get Eastern Daylight Time (EDT).
- Between first Sunday in November – second Sunday in March: subtract 5 hours from UTC to get Eastern Standard Time (EST).



Example of the “SIR - ACH CAUTI Data - Onc Locations Only - for CMS IPPS (2022 Baseline)”: Interpretation and Data Checking

Before running this output option, remember to generate your datasets for the most up-to-date data reported to NHSN by your facility! To generate datasets, go to Analysis > Generate Data Sets, then click “Generate New”. Please refer to the [Generating Data Sets guidance document](#) for more detailed instructions.

- 1) After selecting Analysis > Reports, navigate through the following folders: CMS Reports > Acute Care Hospitals (ACHs). Click **Run** next to “SIR - ACH CAUTI Data - Onc Locations Only - for CMS IPPS (2022 Baseline)”, as shown below:



The screenshot shows the Analysis Reports interface with the following folder structure:

- Expand All
- Collapse All
- Search
- HAI Risk Adjusted Measure Reports (SIRs, SURs)
- HAI Detailed Reports (Line Lists, Rate Tables, etc.)
- Digital Quality Measure Reports (dQM)
- CMS Reports
 - Acute Care Hospitals (ACHs)
 - SIR SIR - ACH CLABSI Data for CMS IPPS (2022 Baseline)
 - SIR SIR - ACH CAUTI Data - Onc Locations Only - for CMS IPPS (2022 Baseline)**
 - SIR SIR - ACH CAUTI Data for CMS IPPS (2022 Baseline)
 - SIR SIR - ACH CAUTI Data - Onc Locations Only - for CMS IPPS (2022 Baseline)
 - SIR SIR - ACH Complex 30-Day SSI Data for CMS IPPS (2022 Baseline)
 - SIR SIR - ACH CLABSI Data for CMS IPPS (2015 Baseline)
 - SIR SIR - ACH CAUTI Data for CMS IPPS (2015 Baseline)
 - SIR SIR - ACH Complex 30-Day SSI Data for CMS IPPS (2015 Baseline)
 - SIR SIR - ACH MRSA Blood FacwideIN LabID Data for CMS IPPS (2015 Baseline)
 - SIR SIR - ACH CDI FacwideIN LabID Data for CMS IPPS (2015 Baseline)
 - SIR SIR - ACH MRSA Blood FacwideIN LabID Data for CMS IPPS (2022 Baseline)
 - SIR SIR - ACH CDI FacwideIN LabID Data for CMS IPPS (2022 Baseline)

- 2) By default, the results will appear in an HTML window. If a second window does not pop-up, please be sure to check your pop-up blocker and allow pop-ups from *.cdc.gov. Within the output, there will be 4 tables, each described below:



Standardized Infection Ratio for Catheter-Associated UTI in Oncology Locations within Acute Care Hospitals for CMS IPPS (2022 Baseline)- By OrgID

The first table represents an overall, single SIR for your facility, per calendar-year quarter, as shown below. This is the information that will be submitted to CMS for each IPPS participating facility, as indicated by the facility's CCN

National Healthcare Safety Network

Standardized Infection Ratio for Catheter-Associated UTI in Oncology Locations within Acute Care Hospitals for CMS IPPS (2022 Baseline) - By OrgID

As of: February 1, 2026 at 4:34 PM UTC

Date Range: All BS3_CAU_RATESICUOTHER_SCA

if (((utiPlan = "Y") AND (locCDC IN ("IN:ACUTE:WARD:ONC_HSCT", "IN:ACUTE:WARD:ONC_HONC", "IN:ACUTE:WARD:ONC_HSCT_PED", "IN:ACUTE:WARD:ONC_HONC_PED", "IN:ACUTE:WARD:ONC_LEUK", "IN:ACUTE:WARD:ONC_LYMPH", "IN:ACUTE:WARD:ONC_LL", "IN:ACUTE:WARD:ONC_ST", "IN:ACUTE:STEP:ONC", "IN:ACUTE:MIXED:ONC")))

orgID=17972

orgID	ccn	summaryYQ	CAUCount	numPred	numucathdays	SIR	SIR_pval	sir95ci
17972		2026Q1	1	7.034	5068	0.142	0.0080	0.007, 0.701

Using the table above, one can conclude the following:

- This facility identified 1 CAUTI (CAUcount) among 5,068 indwelling urinary catheter days (numucathdays) during the 1st quarter of 2026 (2026Q1).
- The number of CAUTIs predicted (numPred), based on 2022 national data, was 7.034.
- The overall SIR for this facility during this time period is 0.142, indicating that this facility observed approximately 42% fewer CAUTI events than predicted.
- Based on the p-value (SIR_pval) and the 95% confidence interval (sir95ci), the SIR for this facility is statistically different from 1, indicating that there were significantly fewer infections identified than were predicted.



Standardized Infection Ratio for Catheter-Associated UTI in Oncology Locations within Acute Care Hospitals for CMS IPPS (2022 Baseline)- By OrgID/Location Type

The second table provides an SIR for each quarter and location type with reported in-plan CAUTI data during each time period. “CC_ONC” in this table will represent all oncology critical/intensive care units; “STEP_ONC” will represent all oncology step down units; “WARD_ONC” will include all adult and pediatric oncology wards; and not shown in the table below, “OTHER” will include mixed acuity oncology locations.

National Healthcare Safety Network

Standardized Infection Ratio for Catheter-Associated UTI in Oncology Locations within Acute Care Hospitals for CMS IPPS (2022 Baseline) - By OrgID/Location Type

As of: February 1, 2026 at 4:34 PM UTC

Date Range: All BS3_CAU_RATESICUOTHER_SCA

if (((utiPlan = "Y") AND (locCDC IN ("IN:ACUTE:WARD:ONC_HSCT", "IN:ACUTE:WARD:ONC_HONC", "IN:ACUTE:WARD:ONC_HSCT_PED", "IN:ACUTE:WARD:ONC_HONC_PED", "IN:ACUTE:WARD:ONC_LEUK", "IN:ACUTE:WARD:ONC_LYMPH", "IN:ACUTE:WARD:ONC_LL", "IN:ACUTE:WARD:ONC_ST", "IN:ACUTE:STEP:ONC", "IN:ACUTE:MIXED:ONC")))

orgID=17972

orgID	ccn	locationType	summaryYQ	CAUCount	numPred	numucathdays	SIR	SIR_pval	sir95ci
17972		STEP_ONC	2026Q1	1	1.021	939	0.980	1.0000	0.049, 4.832
17972		WARD_ONC	2026Q1	0	6.014	4129	0.000	0.0024	, 0.498

*Note the SIR will not be calculated if the number of predicted infection (numPred) is <1.

The data in this table can be interpreted similarly to the first SIR table, described above. Note that this table will allow you to see how many CAUTIs and device days were reported in each location type, as defined by CDC.

Standardized Infection Ratio for Catheter-Associated UTI in Oncology Locations within Acute Care Hospitals for CMS IPPS (2022 Baseline)- By OrgID/CDC Location Code

The third table provides an SIR for each quarter and CDC location. Note that if your facility reports data for more than one location of the same CDC type (for example, 2 oncology step-down units), these locations will be grouped into one SIR in this table.

National Healthcare Safety Network

Standardized Infection Ratio for Catheter-Associated UTI in Oncology Locations within Acute Care Hospitals for CMS IPPS (2022 Baseline) - By OrgID/CDC Location Code

As of: February 1, 2026 at 4:34 PM UTC

Date Range: All BS3_CAU_RATESICUOTHER_SCA

if (((utiPlan = "Y") AND (locCDC IN ("IN:ACUTE:WARD:ONC_HSCT", "IN:ACUTE:WARD:ONC_HONC", "IN:ACUTE:WARD:ONC_HSCT_PED", "IN:ACUTE:WARD:ONC_HONC_PED", "IN:ACUTE:WARD:ONC_LEUK", "IN:ACUTE:WARD:ONC_LYMPH", "IN:ACUTE:WARD:ONC_LL", "IN:ACUTE:WARD:ONC_ST", "IN:ACUTE:STEP:ONC", "IN:ACUTE:MIXED:ONC")))

orgID=17972

orgID	ccn	locCDC	summaryYQ	CAUCount	numPred	numucathdays	SIR	SIR_pval	sir95ci
17972		IN:ACUTE:STEP:ONC	2026Q1	1	1.021	939	0.980	1.0000	0.049, 4.832
17972		IN:ACUTE:WARD:ONC_HONC	2026Q1	0	2.267	1818	0.000	0.1036	, 1.321
17972		IN:ACUTE:WARD:ONC_HONC_PED	2026Q1	0	3.747	2311	0.000	0.0236	, 0.800



Standardized Infection Ratio for Catheter-Associated UTI in Oncology Locations within Acute Care Hospitals for CMS IPPS (2022 Baseline) - By OrgID/Location

The fourth table provides an SIR for each quarter and individual location within your facility. This is also the only table that will allow you to see how many months of data are included in each location's quarterly SIR.

For example, looking at the ONC_STEP location below, we can see that the "months" column shows a value of 2, indicating that only 2 months of data have contributed to the quarterly SIR for this location. This indicates that the SIR in this output option are incomplete and additional data validation is required.

National Healthcare Safety Network

Standardized Infection Ratio for Catheter-Associated UTI in Oncology Locations within Acute Care Hospitals for CMS IPPS (2022 Baseline) - By OrgID/Location

As of: February 1, 2025 at 4:34 PM UTC

Date Range: All BS3_CAU_RATESICUOTHER_SCA

if (((utiPlan = "Y") AND (locCDC IN ("IN:ACUTE:WARD:ONC_HSCT", "IN:ACUTE:WARD:ONC_HONC", "IN:ACUTE:WARD:ONC_HSCT_PED", "IN:ACUTE:WARD:ONC_HONC_PED", "IN:ACUTE:WARD:ONC_LEUK", "IN:ACUTE:WARD:ONC_LYMPH", "IN:ACUTE:WARD:ONC_LL", "IN:ACUTE:WARD:ONC_ST", "IN:ACUTE:STEP:ONC", "IN:ACUTE:MIXED:ONC"))))

orgID=17972

orgID	ccn	location	summaryYQ	months	CAUCount	numPred	numucathdays	SIR	SIR_pval	sir95ci
17972		HONC_PED	2026Q1	3	0	3.747	2311	0.000	0.0236	, 0.800
17972		ONC_HONC	2026Q1	3	0	2.267	1818	0.000	0.1036	, 1.321
17972		ONC_STEP	2026Q1	2	1	1.021	939	0.980	1.0000	0.049, 4.832

3) What can be done if data are incomplete, as in the ONC_STEP example above, or if the number of events (CAUCount) or indwelling urinary catheter days (numucathdays) are incorrect?

- i. Check that the summary data for this location have been entered for each month in the quarter. This includes indwelling urinary catheter days and patient days.
- ii. If summary data have been entered, double-check your monthly reporting plan for each month in the quarter. Check to make sure that each location is included in your monthly reporting plan, with the CAUTI box checked.
- iii. If summary data have been entered and no CAUTIs have been identified, be sure to check the 'Report No Events' box on the summary record, next to the urinary catheter days count.
- iv. If the number of infections is less than you reported and you've confirmed that the summary data have been entered in-plan, double check the UTI events in NHSN: if urinary catheter is entered as "Neither", the event is not considered a CAUTI and will not appear in this report. Note that you can edit the event with the correct information.

REMEMBER: If you have made any changes to your data, regenerate your datasets in order to review your output options with the most up-to-date data in NHSN.



IMPORTANT REMINDERS:

- The SIR is only calculated if the number predicted (numPred) is ≥ 1 . Lower bound of 95% Confidence Interval only calculated when number of observed events > 0 .
- The number of predicted events is calculated based on national 2022 NHSN data. Please see the [SIR Guide](#) for details on the HAI-specific risk adjustments and inclusion/exclusion criteria.
- This report will only include CAUTI summary data and associated events from January 2026 and later.

Additional Resources:

- [CMS Resources for NHSN Users](#)
- [Operational Guidance](#)
- [Analysis Quick Reference Guides](#)

