Facility ID*: Pike Nursing Home (ID 11106) 🗸														
1	Month*: January V													
Year*:														
Den	Denominators for Long Term Care Locations													
	Location Code	Total Resident Days	Urina	Urinary Catheter Days		New Antibio Starts for U Indicatio	tic ITI n							
ì	Facility-wide Inpatient (FacWIDEIn)	*		*		*	Cu	stom Fields						
MDR	IDRO & CDI LabID Event Reporting  CRE- CRE- MDR-													
	Location Code				MRSA	VRE	CephR- Klebsiella	CRE-Ecoli	Enterobacte	CRE- Klebsiella	C. difficile			
TÎT	Facility-wide Inpatient (FacWIDEIn) 🗸	Resident Admissions:  * Resident Days:  * Number of Admi on C. diff Treat  *	spe Rep ssions	oID Event (All ecimens) port No Event									Custom Fields	
Prevention Process Measures														
	Location Code			Gown and Gloves										
-	Performed		Indicated Use		ed	Indicated								
	Facility-wide Inpatient (FacWIDEIn)	*		*	*	*	Custom Fie	elds						
						Save	Back							