



Infection Prevention Reports

August 25, 2025

Table of Contents

Accessing Reporting Portal and Generating Reports	2
Line Lists.....	3
Device Reports	4
CMS Validation Reports	5
NHSN Device Denominator Reports.....	5
Healthcare Acquired Infection Reports	6
Health Dept Report	8
NHSN Lab-ID MDRO/CDI Report	8
Organism Prevalence.....	8
Ventilator Associated Event Report	8

Infection Prevention Reports

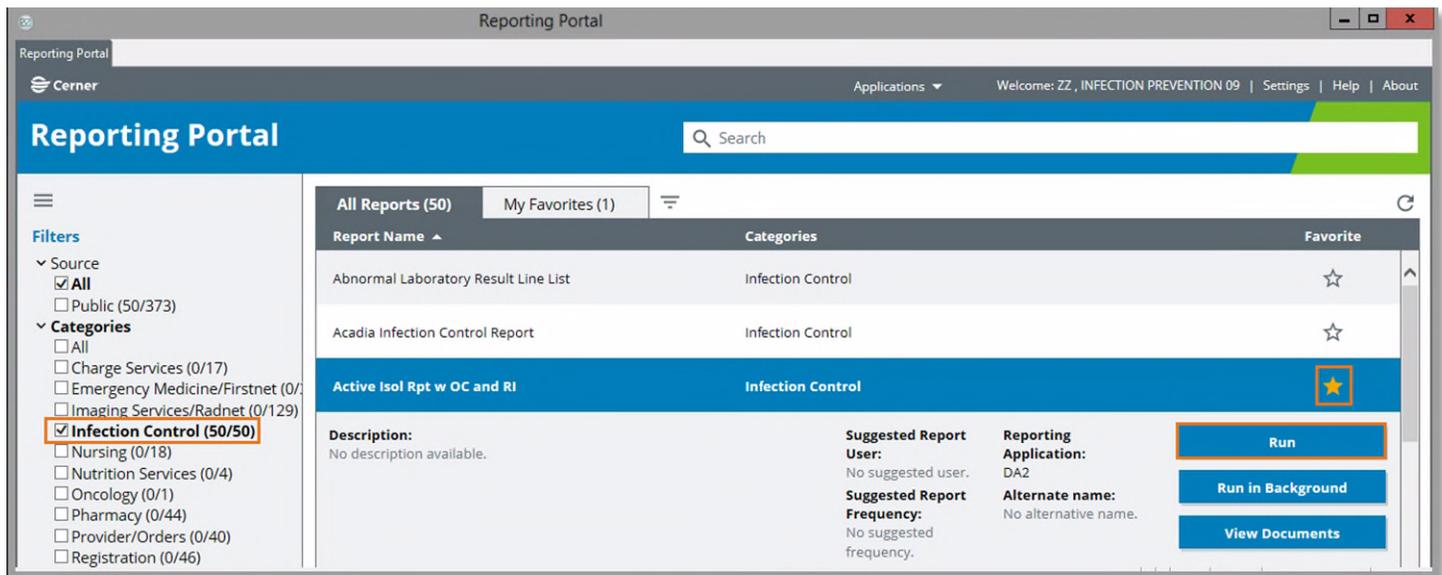
Accessing Reporting Portal and Generating Reports

➤ From the StoreFront or the Toolbar, IPs can access the Reporting Portal and generate reports.

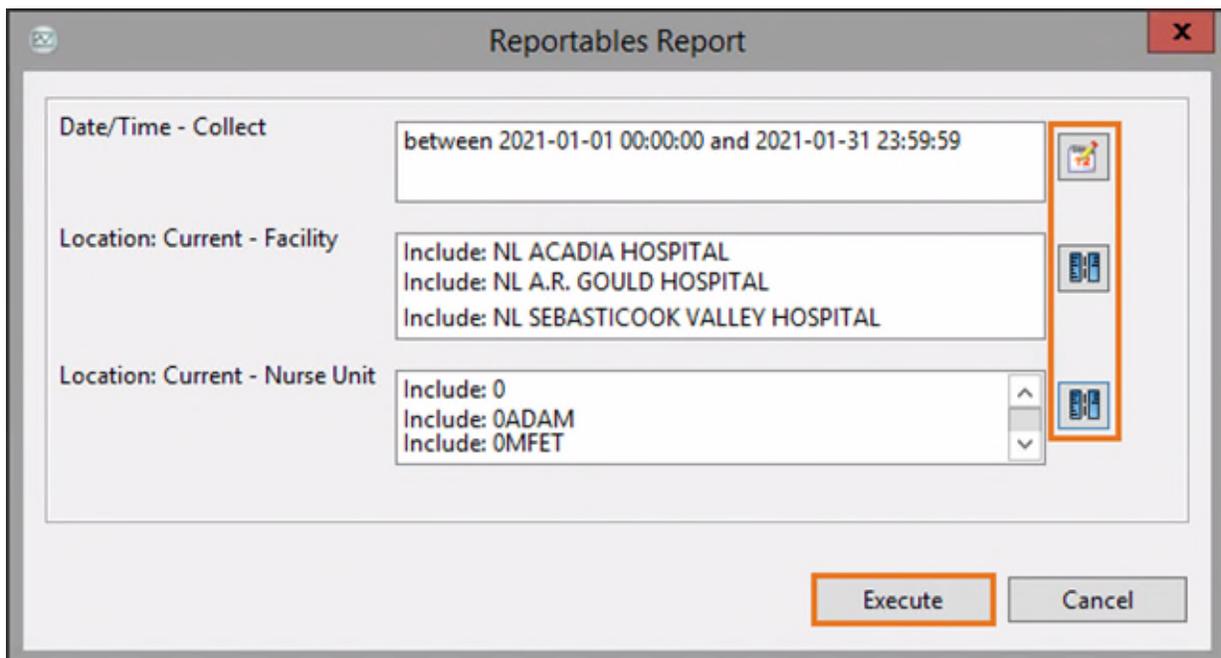


➤ Click the Star icon to save as a favorite.

➤ Click the Infection Prevention category to focus to pertinent report options.



➤ Click Run to generate the report and use the icons to the right of the parameter windows to enter desired information and click Execute.



Line Lists

A display of abnormal laboratory results associated with line placement during an identified time frame.

- **Isolation Report/ All events:** can be scheduled to print a list of pt with order; all events would include admit date/time, start of isolation date/time, discontinuation date/time and reason for isolation.

Isolation Report All Events

Showing page 1 of 2

Isolation Detail Report
 Isolation 2021-01-01 00:00:00,2021-01-31 23:59:59
 Begin
 Date/Time:
 Isolation 2021-01-01 00:00:00,2021-01-31 23:59:59
 End
 Date/Time:
 Selected Include: NL A.R. GOULD HOSPITAL,NL ACADIA HOSPITAL,NL EASTERN MAINE MEDICAL CENTER,NL INLAND HOSPITAL,NL MAINE COAST HOSPITAL,NL SEBASTICOOK VAL
 Facility:
 Selected Include: Null,0_LABPIM_M,zzLFCCRadOncDictation,LR,ZZEMM_B,ZMS,1PIPR,0VENT,0VENT,CT_B,OT_B,ER_B,0VENT,BLAB,TSTROKE,ANIH,ZZSSEIDIGENFR_M,DEL_A,CCS,NET
 Nurse Unit: Scan,zzPOC2,ZZ3SOUPO2,SEDIP,0DIAL,AL_T,ER_T,LA_T,LB_T,TCADeanBCE,XAcadiaBCE,XSVHBCE,ER,3SOU,5BLA,PEDO,COM,CCOC,CCBO,RR,BCESP,OT,P1,SZZZ,DHC,S,EAU,I,LBDEL,I,HER,I,PTPA,T,FB,T,SO,T,SP,T,EX,OTB,B,OBSV,B,RACOM1,0VENT,LRAD/M

Patient Location	Name	HRN	Gender	Birth DT	Admit DT	Type	Isol Days	Start DT	End DT	Reason For Isol	
NL A.R. GOULD HOSPITAL GMCH	---	zztest, IC2	2290167	Female	12/15/1983 00:00	12/15/20 00:00	Contact	1.25	01/07/21 08:44	01/08/21 15:03	E5BL

- **MDRO Line List:** provides all MDROs displayed on the ICP Worklist for a selected time period.
- **Organism Line List:** displays organisms from culture results for an identified time frame.
- **Pos Neg Serology Result Line List:** specific serology/fecal tests can be viewed by positive/negative result; can be used to report total number of tests performed and number of each result.
- **Reportable Report/ by Risk DT:** generates a list of reportable conditions displayed on the ICP Worklist; DT will pull in Date/Time and can be used with Health Dept Report to validate all were reported.

Reportables Report

Showing page 1 of 1

Reportables Detail Report
 Collected D/T 2021-01-01 00:00:00,2021-01-31 23:59:59
 Range:
 Selected Include: NL A.R. GOULD HOSPITAL,NL ACADIA HOSPITAL,NL BLUE HILL HOSPITAL,NL CHARLES A. DEAN HOSPITAL,NL EASTERN MAINE MEDICAL CENTER,NL INLAND
 Facility:
 Selected Nurse Include: Null,0_LABPIM_M,zzLFCCRadOncDictation,LBMF_T,AKET,CSME/TAVR,ZZEMMC K6 Provider Area,INSS_T,BSSC_B,ZMS,1PIPR,0VENT,0VENT,CT_B,OT_B,ER_B,0V
 Unit: Scan,zzPOC2,ZZ3SOUPO2,SEDIP,0DIAL,AL_T,ER_T,EEG_I,NURS_I,ISOP_I,LA_T,LB_T,RO_T,GMSU,PTU_I,AH_T,BI_T,XCADeanBCE,XAcadiaBCE,XSVHBCE,ER,3SOU,5BLA

Patient Location	Name	FIN	HRN	Birth DT	Age	Admit DT	Collected DT	Source	Reportable
24 Hour Reportable									
NL EASTERN MAINE MEDICAL CENTER									
5BLA									
---	TESTING, SALLY	256359068	2289128	10/04/1991 00:00	29 years	12/21/20 00:00	01/15/21 10:11	NASOPHARYNX	SARS CoV-2

- **Serology Line List:** displays positive serology/fecal results that are seen on the ICP worklist.
- **Significant Pathogen Report:** generate to validate MDROs, reportable and positives from the ICP worklist have been added to the Problem List and show the appropriate isolation type.

From the Office of Health Informatics
Infection Prevention Reports

- **Abnormal Lab Result Line List/by Facility** displays serology, cultures and organisms for trending community location and notifying patients.

Abnormal Laboratory Result Line List													
Showing page 1 of 1													
Abnormal Laboratory Result Line List													
Verified D/T Range:		2021-01-01 00:00:00,2021-01-31 23:59:59											
Selected Service Resource:		Include: NL MAINE COAST HOSPITAL, Mercy Gen lab											
Selected Serology Order:		Exclude: 0											
Selected Serology Test:		Include: #RBC LG SQ											
Selected Culture:		Include: 0											
Selected Organisms:		Include: ENTEROBACTER SPECIES											
General Laboratory and Non-Culture Microbiology Results													
Age - Years	Verified DT	County	Nurse Unit	FIN	Name	DOB	Assay	Result	MRN	Admit DT	Disch DT	Address	Collect DT
****No qualifying data available****													
Culture Microbiology Results													
Age - Years	Verified DT	County	Nurse Unit	FIN	Name	DOB	Order	Organism	MRN	Admit DT	Disch DT	Address	Collect DT
****No qualifying data available****													
Created on: Feb 9, 2021, 12:05 PM												1 / 1	

- **Active Isolation Report with Order Comments and Reason for Isolation:** list of patients with order and reason for Isolation.

Active Isol Rpt w OC and RI										
Showing page 1 of 1										
Active Isolation Line List										
Selected Facility:		Include: NL A.R. GOULD HOSPITAL								
Selected Nurse Unit:		Include: GMSU								
Patient Location	Name	MRN	Gender	Birth DT	Admit DT	Type	Start DT	Reason For Isolation	Order Comment	
NL A.R. GOULD HOSPITAL GMSU										
M205-01	TESTING, ASPHARG	2288817	Male	01/02/1934 00:00	03/15/20 10:49	Contact	03/23/20 13:08	CDIFF	Refer to facility clinical practice guidelines pertaining to personal protective equipment (PPE).	

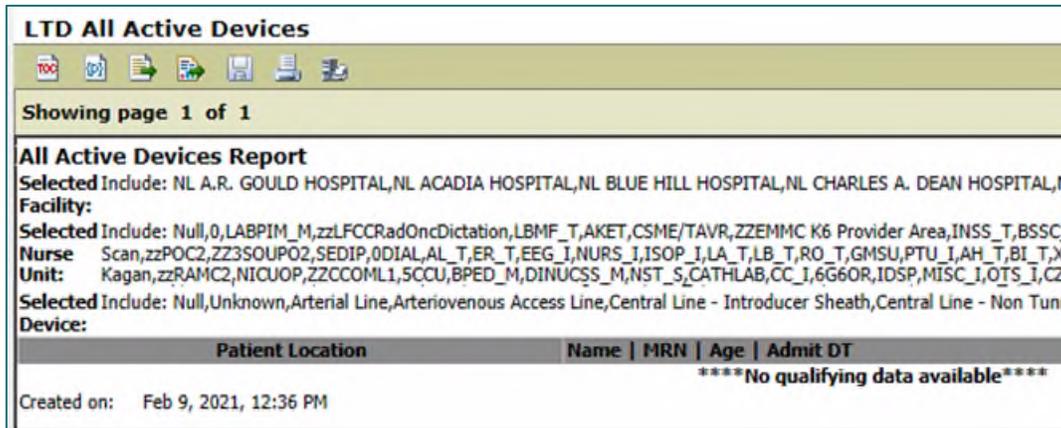
Device Reports

A review of device days and can be used to determine possible HAIs and reporting data to NHSN.

LTD Active Central Lines w Periph									
Showing page 1 of 1									
All Active Central Lines with Peripheral Lines Report									
Selected Include: NL A.R. GOULD HOSPITAL, NL ACADIA HOSPITAL, NL BLUE HILL HOSPITAL, NL CHARLES A. DEAN HOSPITAL, NL EASTERN MAINE MEDICAL CENTER, NL INLAND HOSPITAL, NL MAINE COAST HOSPITAL									
Facility:									
Selected Include: Null, 0_LABPIM_M, zzLFCRradOncDictation, LBMF_T, AKET, CSME/TAVR, ZZEMMC K6 Provider Area, INSS_T, BSSC_B, ZMS, 1PIPR, 0VENT, 0VENT, CT_B, OT_B, ER_B, 0VENT, BLAB, TSTROKE, ANIH, ZZS									
Nurse Scan, zzPOC2, ZZ3SOUP02, SEDIP, 0DIAL_AL_T, ER_T, EEG_I, NURS_I, ISOP_I, LA_T, LB_T, RO_T, GMSU, PTU_I, AH_T, BI_T, XCADeanBCE, XAcadiaBCE, XSVHBCE, ER, 3SOU, 5BLA, PEDO, CCOM, CCOC, CCBD, RRC									
Unit: Kagan, zzRAMC2, NICUOP, ZZCCOML1, SCCU, BPED_M, DINUCSS_M, NST_S, CATHLAB, CC_1, 6G60R, IOSP, MISC_1, OTS_I, CZZZ, PACE_I, SNH_S, ADVD_S, DEL_T, LEH_I, NOT_S, NPT_S, LAC_I, LSBH_T, ZZPCOF									
Patient Location	Name	MRN	Age	Admit DT	Arterial Lines	Central Lines	Left Atrial Lines	Pulm Art Lines	Peripheral IVs
****No qualifying data available****									
Created on: Feb 9, 2021, 12:35 PM								1 / 1	

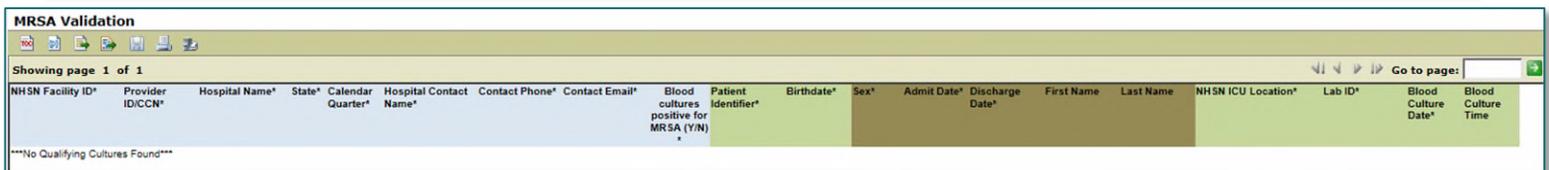
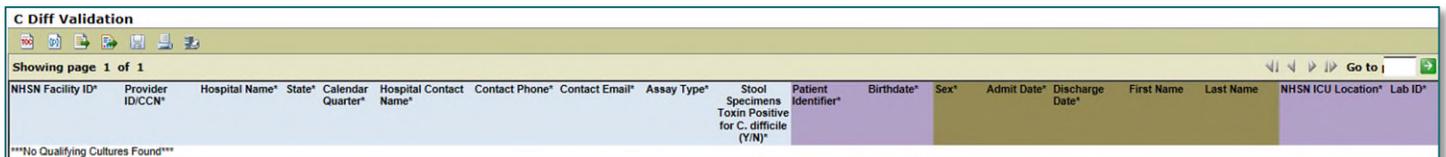
- **LTD Active Central Lines/ w/Periph:** Tunneled, non, Central, Periph, duration information. Print and use to validate when rounding.
- **LTD Active Device Line List:** Insertion/Present on Admission, type, site, duration, device info can be printed to use when rounding.

- **LTD Active Lines:** duration, type: use to determine risk of infection, necessity, and facilitation of removal.
- **LTD All Active Device:** Central/Periph, Urinary, ETT, drains; can filter by type; can be used to validate line days.



CMS Validation Reports

Patients who have a positive culture for CAUTI, CLABSI, C.diff or MRSA as a final result will populate the corresponding report for validation.



NHSN Device Denominator Reports

Infection Preventionists can generate reports to examine denominator data for the purpose of HAI outcomes and reporting.

- **NHSN Device Report ICU Other/ NICU/SCA:** bed days, central line days, urinary cath days, vent days.
- **NHSN Person ICU Device/ NICU/ SCA:** pt name, unit, MRN, FIN will display when initial line start is documented, which starts the line count for NHSN requirement.

Infection Prevention Reports

Healthcare Acquired Infection Reports

Patients who have Infection Confirmation Advisor documentation will appear on this report. IPs will be able to sort by specific HAIs for review.

- **HAI Advisor Detail:** documented information regarding UTI, SSI, BSI, CAUTI, CLABSI and Title 17 Infections pulls in for IP review.

Advisor Detail Report															
Showing page 1 of 3															
Advisor Detail Report															
Event Date Range: 2021-01-01 00:00:00,2021-01-31 23:59:59															
Selected Facility: Include: NL A.R. GOULD HOSPITAL,NL ACADIA HOSPITAL,NL BLUE HILL HOSPITAL,NL EASTERN MAINE MEDICAL CENTER,NL INLAND HOSPITAL,NL MAINE COAST HOSPITAL,NL MERCY HOSPITAL,NL SEBASTICOOK VALLEY HOSPITAL															
Selected Event Type: Include: Null,0,BNUNT,CNS,CVS,EENT,GENERAL,GI,IC Blood Stream Infection,IC Pneumonia,IC Surgical Site Infection,IC Urinary Tract Infection,LRI,REPR,SST,SYS															
Selected Status: Include: Null,0,Complete,Delete,In Error,In Progress,Incomplete,Submitted															
NL ACADIA HOSPITAL															
IC Blood Stream Infection-LCBI															
TESTING, FRED	Age: 33 years	MRN: 2287538	Admit: 11/30/20 09:59	Disch: --	Eth: Not Hispanic, Latino, or Spanish Origin										
Male	DOB: 04/05/87 00:00	FIN: 256353293	Type: Inpatient	RfV: --	Loc: 2NOR										
Event Date	NHSN Event Date	Event	Status	Update Personnel											
01/13/21	01/13/21	IC Blood Stream Infection-LCBI	Complete	SHAH , VAISHALI											
Title	ASP7ACADIA11921														
Comment															
Identify Risk - IC Blood Stream Infection															
Microbiology															
Source	Body Site	Collect DT	Results	Status	Collect Location										
BLOOD	-	01/13/21 09:00	SeeReport	In Progress	ACADIA HOSPITAL 2NOR/N235-01										
# Pathogen	MDRO			InPlan											
1 ESCHERICHIA COLI															
AMK	AMP	AMPSUL	AMXCLV	AZT	CEFAZ	CEFEP	CEFOT	CEFOX	CEFTAZ	CEFTRX	CEFUR	CETET	CHLOR	CIPRO	
N	S	N	N	N	N	S	N	N	N	N	S	N	N	N	
COL	DORI	DOXY	ERTA	GENT	IMI	LEVO	MERO	MINO	MOXI	PB	PIPTAZ	TETRA	TIG	TMZ	TOBRA
N	N	N	N	S	N	N	N	N	N	N	N	N	N	N	N
Lines, Tubes, and Drains															
Name	Type	Description	Location	Insert DT	Duration Days	Unit Origin	DC DT	POA							
Central Line	Peripherally inserted central catheter (PICC)			01/10/21 08:00	10	ACADIA HOSPITAL 2NOR/N235-01	--	N							
Select Criteria - IC Blood Stream Infection															
Signs & Symptoms															
Selected Criteria															
Fever															
Lab & Diagnostics															
Selected Criteria															
Recognized Pathogen from one or more blood cultures															
Created on: Feb 9, 2021, 12:14 PM 1 / 3															
*****End event for TESTING, FRED*****															

Health Dept Report

This report provides a line list of the Disclosure Reporting documented in iView.

Health Dept Report																				
Showing page 1 of 1																				
Health Department Report																				
Collect 2021-01-01 00:00:00,2021-01-31 23:59:59																				
D/T																				
Range:																				
Selected Include: NL A.R. GOULD HOSPITAL, NL ACADIA HOSPITAL, NL CHARLES A. DEAN HOSPITAL, NL EASTERN MAINE MEDICAL CENTER, NL INLAND HOSPITAL, NL MAINE COAST HOSPITAL, NL FACILITY:																				
Selected Include: Null, 0, RHB, CCMT, ADV, DPT, DEL, SLTR, EPNV, RD, ODDON, O/PR, P, REA, SHRI, VLAB, XTAMCBCE, LBBFM_B, LBCCCH_B, LBIFM_B, ADVA, ZZAROP, CHPH, APNV, ECTA, ACOT, APRE, CR, CARD, RESP, OT, M Nurse OR, PACU, OT, C, PT, C, P, REA, C, AMB, C, MAM, CC, ER, C, OPS, C, PACE, CR, C, FLU, C, RAD, C, RETS, NHL, C, DEL, C, PACS, TRM, C, ZZGYME, FEME, HEIS, ZZABUP, LWLTC, I, LWDU, I, ENDOSCO, I, MR Unit: HHS, WGT, M, CATHLAB, ZZCCOM4, MPM, T, DXPCBORN, T, HOOC, T, PREBORN, I, ZZPOC4, HOOM, T, SOT, C, ZZPOC3, ZZPMR2, ZZPOC1, ZZEDOrtho, ATEL, ZZNEUSU, EYE, T, RDIP, RTIP, EXFR, M, PL																				
Patient Name	Primary	Secondary	Medicare	Gender	DOB	Cell	Date/Time	Organism Type	Source	Body Site	Date Admitted to Facility	Location	Encounter Type	OP	Date Admitted to Location	INP DC from Same Facility	Date of Last Disch from Facility	DC from Other Facility in Past 4 Weeks	Last DC Location Other Facility	Last Overnight Location
*****No qualifying data available*****																				
Created on: Feb 9, 2021, 12:27 PM																				
1 / 1																				

NHSN Lab-ID MDRO/CDI Report

Gathers data for NHSN defined reportable MDROs to be uploaded.

Laboratory-Identified MDRO/CDI Report																				
Facility Name		Facility ID		Date Range																
NL A R GOULD HOSPITAL		2.16.840.1.114222.4.1.9091		01/01/21-01/31/21																
Patient Name	Primary	Secondary	Medicare	Gender	DOB	Cell	Date/Time	Organism Type	Source	Body Site	Date Admitted to Facility	Location	Encounter Type	OP	Date Admitted to Location	INP DC from Same Facility	Date of Last Disch from Facility	DC from Other Facility in Past 4 Weeks	Last DC Location Other Facility	Last Overnight Location
TES TINGON E, IC1	2290254	256361452		Male	01/01/1990		01/11/2021	NHSN VRE	URINE-CLEAN CATCH	N/A	01/11/2021	GSCU	Inpatient	No	01/11/2021	No		Unk		Unk

Organism Prevalence

This report can be used to trend infections and consider adjustments to infection control protocols or education of the guidelines.

Ventilator Associated Event Report

A list of patients who have triggered the criteria for identified parameters for surveillance. IPs can sort the results and print to use when rounding as needed.

VAE Report												
Showing page 1 of 1												
VAE Report												
Event 2021-01-01 00:00:00,2021-01-31 23:59:59												
D/T												
Range:												
Selected Include: NL A.R. GOULD HOSPITAL, NL EASTERN MAINE MEDICAL CENTER, NL INLAND HOSPITAL, NL MAINE COAST HOSPITAL, NL MERCY HOSPITAL												
Facility:												
Selected Include: Null, 0, RHB, CCMT, ADV, DPT, DEL, SLTR, EPNV, LABO, MRTO, ER, MRD, ODDON, O/PR, P, REA, SHRI, VLAB, XTAMCBCE, CR, CARD, RESP, OT, MRI, PT, SPEE, PEDO, CCOM, CCOD, RRC, BOC, LWSCU, I, FICH, NUT Nurse OR, PACU, ZZOU, PACE, RETS, PACS, ZZGYME, FEME, HEIS, LWLTC, I, LWDU, I, ENDOSCO, I, MRI, I, RESP, I, HERH, I, NMD, I, PLST, I, ADV, I, LBDEL, I, ECHO, I, EMPH, I, MTSTJO, I, TI, I, MODI, I, GOOD, I, GOBH, I, LAE Kagan, WHOM, T, SAPP, M, SMRC, M, TCM, M, APGYN, T, ZZLFCCPalliativeCare2, ALIPOR, M, NMSS, T, FMCD, NDXMMC, M, NDXSCAR, M, MCC, M, LEDGE, M, CHVC, SPRGWSTB3, M, CPT, UMORAD, ZFRMDLounge, DIML Room, VAC, T, VAC, E, VAC, M, VAC, I, XMCHBCE, VACCROSS, E, VACNMCC, T, MRTPODS, VACMAYO, E, VACMCH, E, VACKVCC, I, VACWSK, M, VACEXPO, M, 8PICU, 7G7LD, 8PEDS, 7NUR, 4G4CA, 7OBYN, 0ADAM, 4G4CB												
Patient Reviewed	Patient Information	Event Date	Admit DT	Post Procedure VAE	Location of Event	Location of MV	Mech Vent Start DT	APRV	Specific Criteria	Secondary BSI	Contributed to Death	
Created on: Feb 9, 2021, 12:40 PM												
1 / 1												

For questions regarding process and/or policies, please contact your unit's Clinical Educator. For questions regarding workflow, please [place a ticket](#) to Health Informatics. For any other questions please contact the Customer Support Center at: 207-973-7728 or 1-888-827-7728.