2025

Issued June 2026

Healthcare-Associated Infections in North Carolina

Reporting Period:

January 1, 2025—December 31, 2025

Product of:

NC Surveillance for Healthcare-Associated and Resistant Pathogens Patient Safety (SHARPPS) Program

Communicable Disease Branch

Division of Public Health

NC Department of Health and Human Services

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES
Division of Public Health

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North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Advent Health Hendersonville, Hendersonville, Henderson County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	No
Admissions in 2025:	5,457
Patient Days in 2025:	24,502
Total Number of Beds:	105
Number of ICU Beds:	12
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	0.95

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

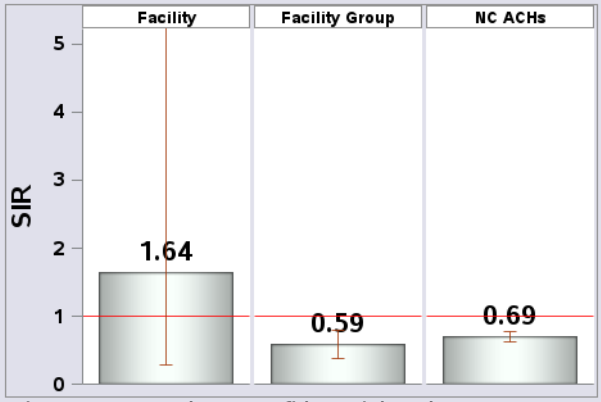

Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	2	Less than 1.0	No Conclusion
All reporting units	**2**	**1.2**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

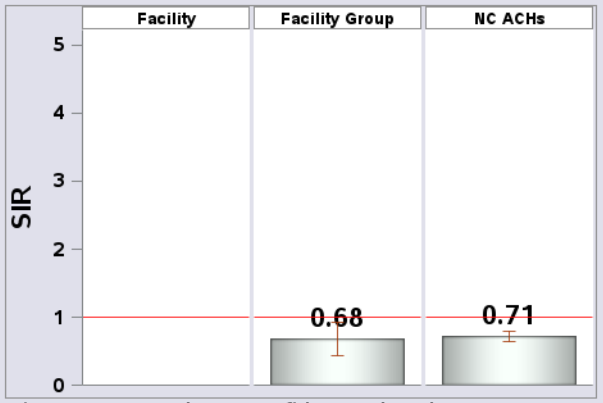

Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

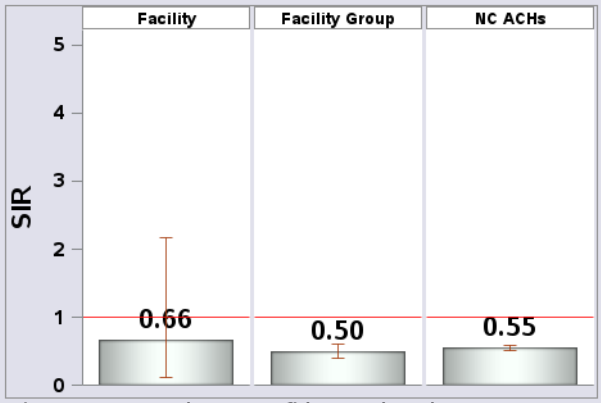

Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**3.0**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Advent Health Hendersonville, Hendersonville, Henderson County

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Central Line-Associated Bloodstream Infections (CLABSI)

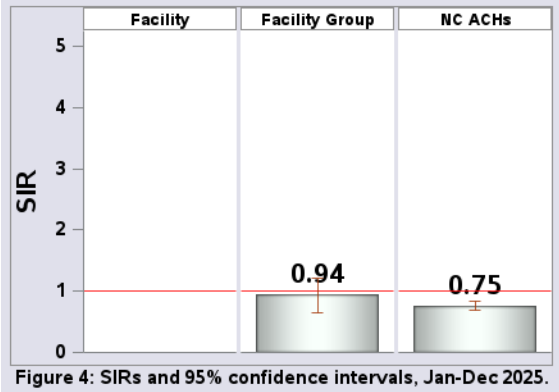


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	1	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

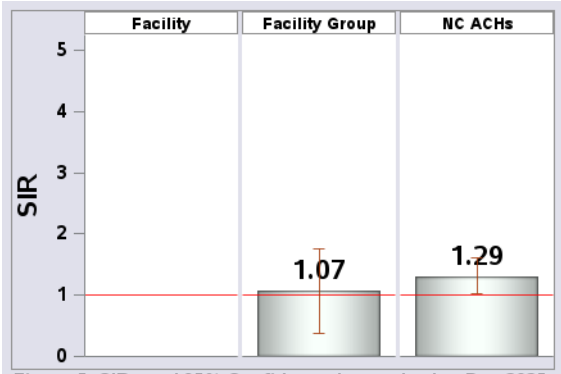


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

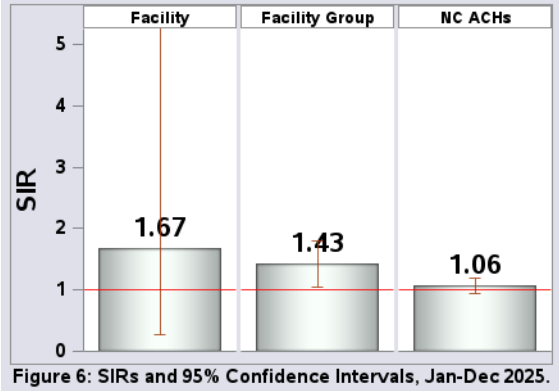


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**1.2**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

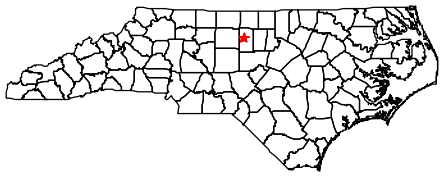
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Alamance Regional Medical Center, Burlington, Alamance County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	11,605
Patient Days in 2025:	53,030
Total Number of Beds:	240
Number of ICU Beds:	32
FTE* Infection Preventionists:	1.10
Number of FTEs* per 100 beds:	0.46

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

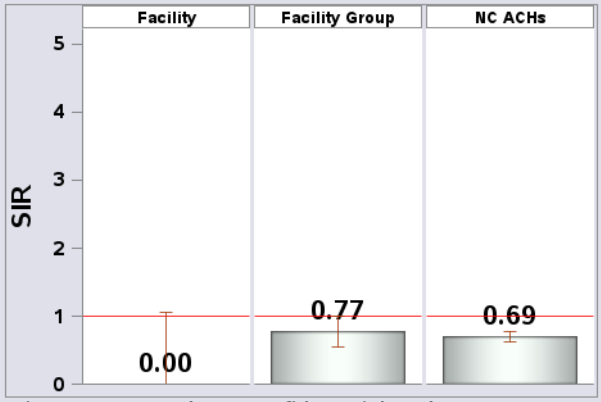


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	1.4	Same
Adult/Ped Wards	0	1.4	Same
All reporting units	**0**	**2.8**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**3.1**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

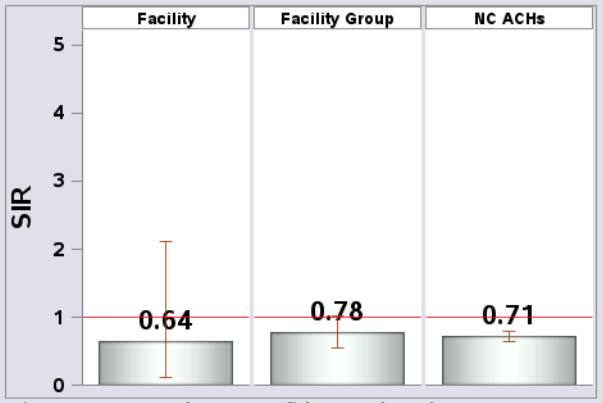


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

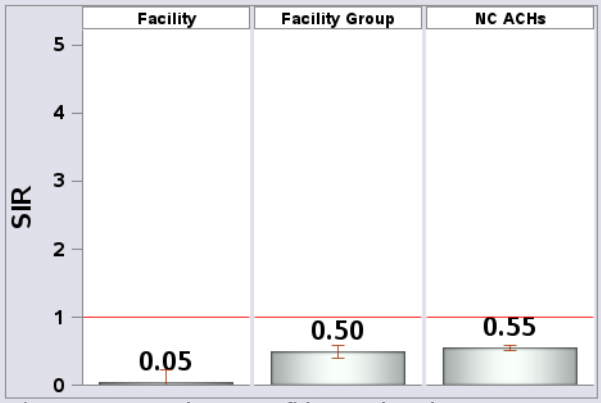


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**21**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Alamance Regional Medical Center, Burlington, Alamance County

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Central Line-Associated Bloodstream Infections (CLABSI)

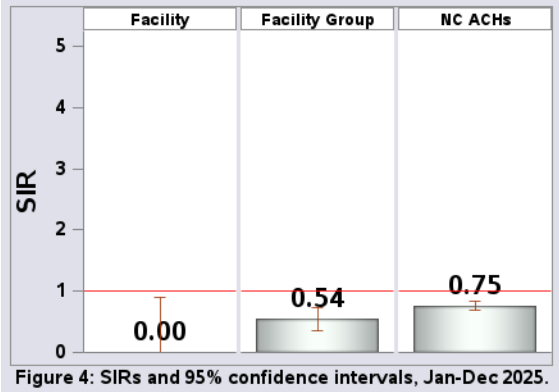

Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	1.8	Same
Adult/Ped Wards	0	1.5	Same
Neonatal Units	0	Less than 1.0	No Conclusion
All reporting units	**0**	**3.3**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

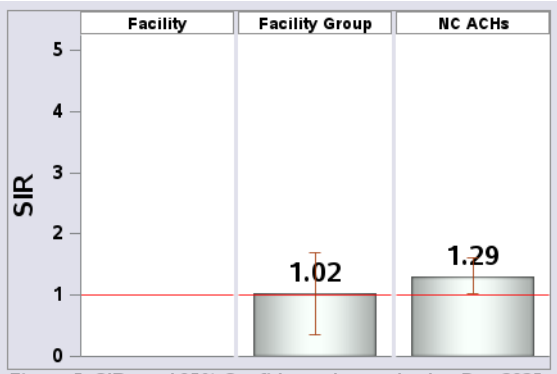

Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

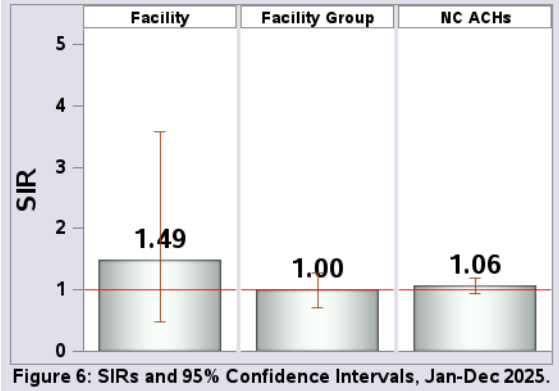

Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**4**	**2.7**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Annie Penn Hospital, Reidsville, Rockingham County

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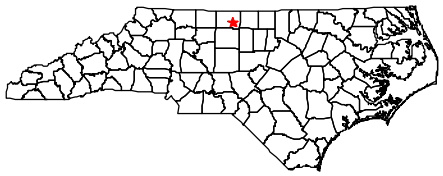
2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Graduate
Admissions in 2025:	3,652
Patient Days in 2025:	15,575
Total Number of Beds:	59
Number of ICU Beds:	12
FTE* Infection Preventionists:	0.50
Number of FTEs* per 100 beds:	0.85

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

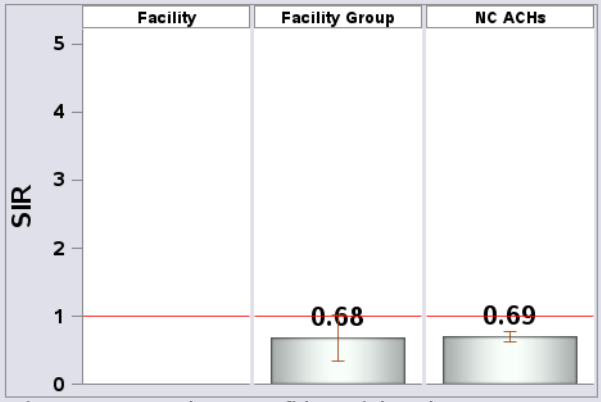


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
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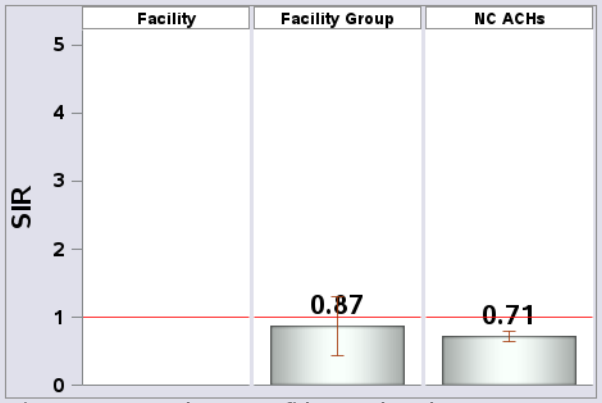
How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison



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Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

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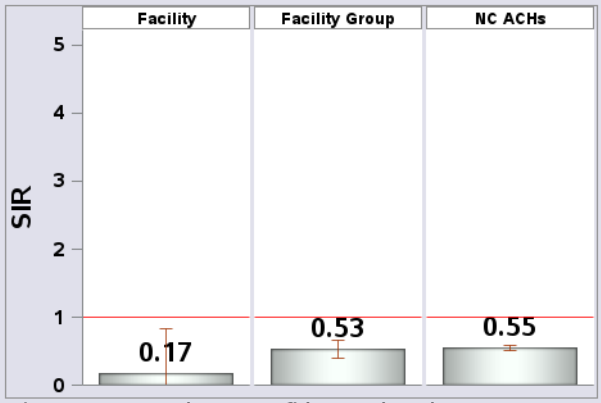

Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**5.9**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
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N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Annie Penn Hospital, Reidsville, Rockingham County

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Central Line-Associated Bloodstream Infections (CLABSI)

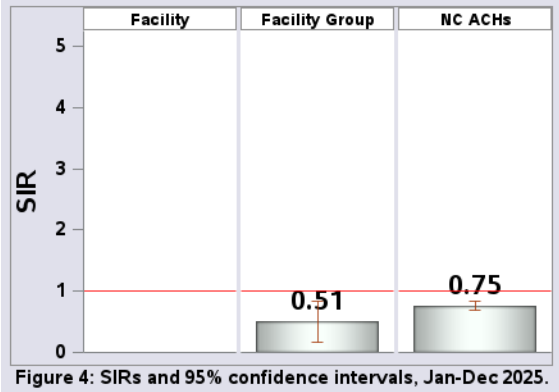


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

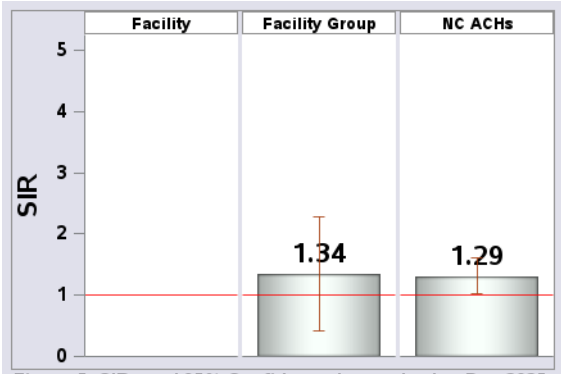
Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison



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Surgical Site Infections (SSI) after Colon Surgeries

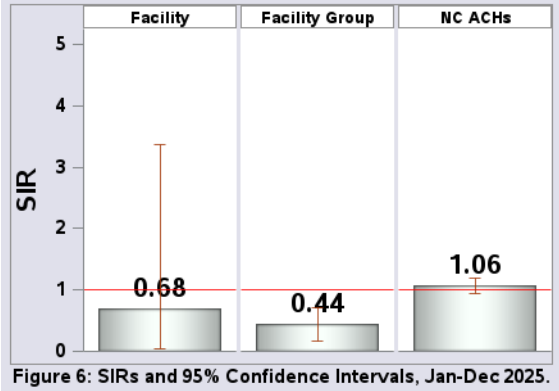

Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**1.5**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
ARHS-Watauga Medical Center, Boone, Watauga County

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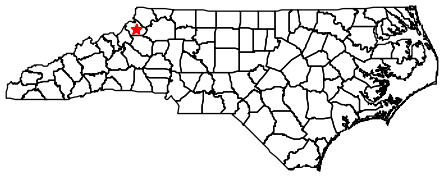
2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	7,222
Patient Days in 2025:	23,407
Total Number of Beds:	117
Number of ICU Beds:	10
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	0.85

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

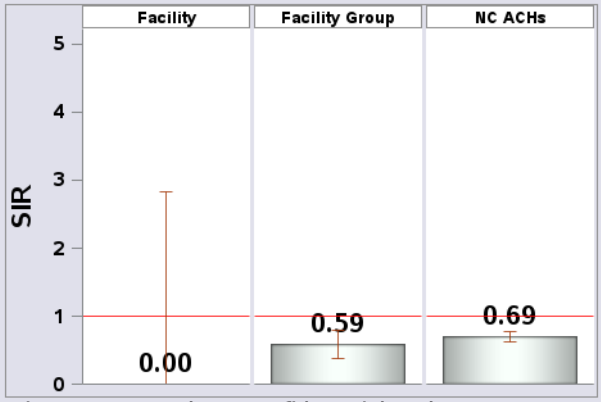


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**1.1**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**1.2**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

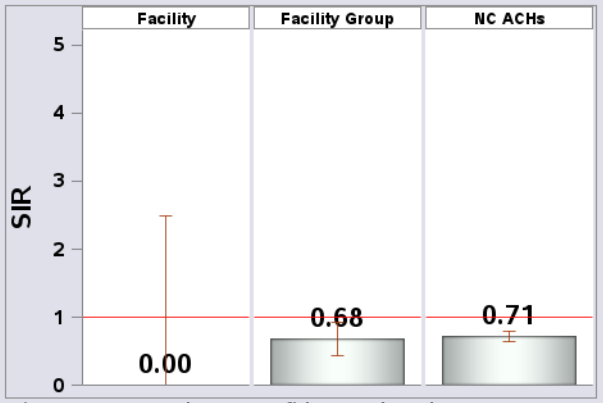


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

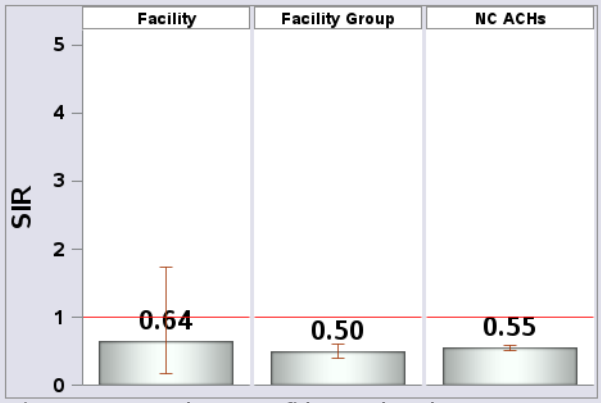


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**3**	**4.7**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
ARHS-Watauga Medical Center, Boone, Watauga County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

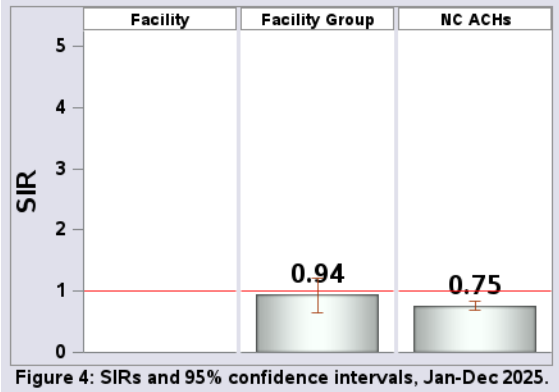


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

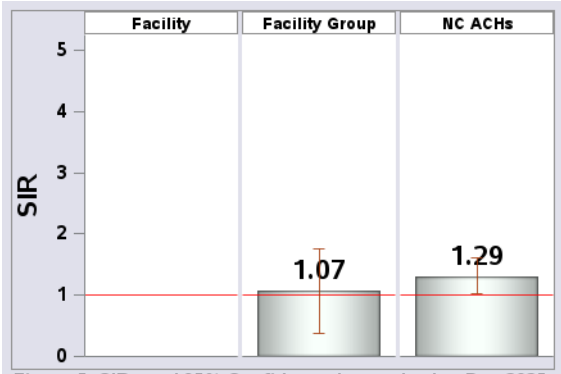


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

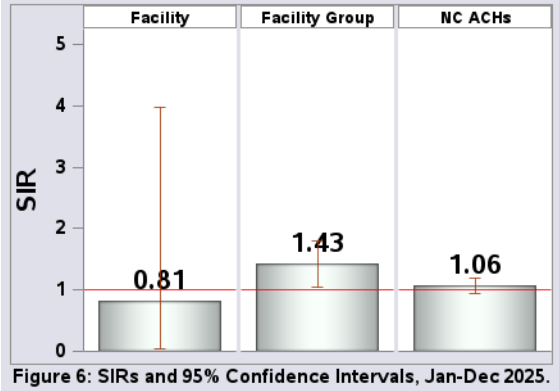


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**1.2**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Atrium Health Cabarrus, Concord, Cabarrus County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	11,744
Patient Days in 2025:	161,320
Total Number of Beds:	457
Number of ICU Beds:	74
FTE* Infection Preventionists:	3.50
Number of FTEs* per 100 beds:	0.77

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

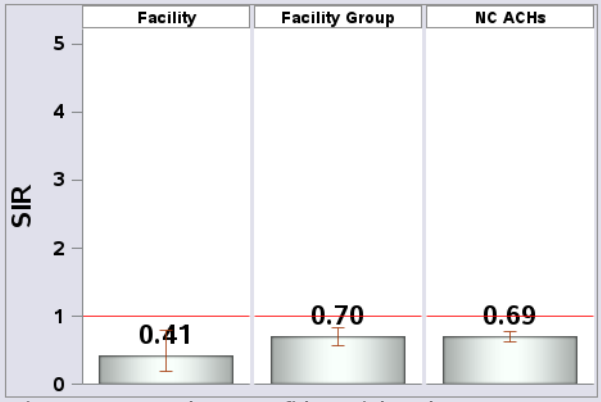


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	1	8.5	Better
Adult/Ped Wards	7	11	Same
All reporting units	**8**	**19**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**12**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

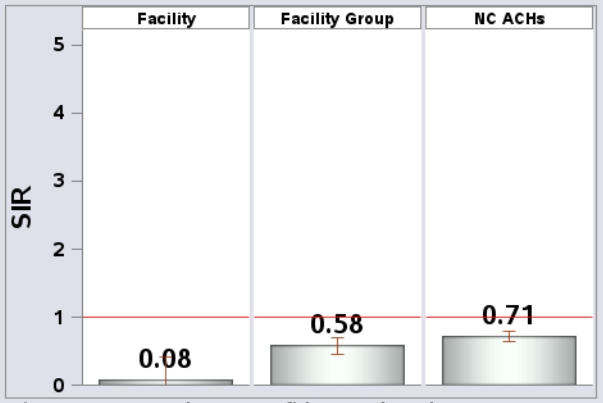


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

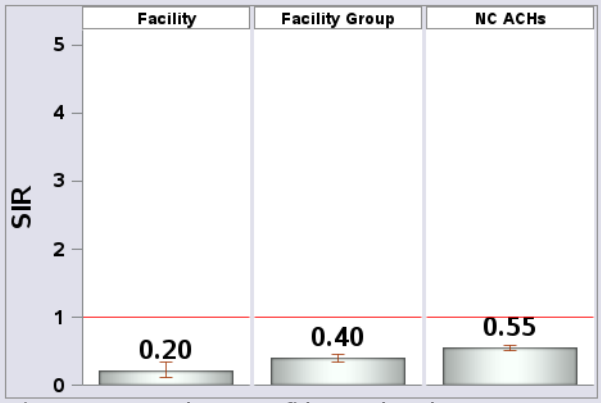


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**12**	**59**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Atrium Health Cabarrus, Concord, Cabarrus County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

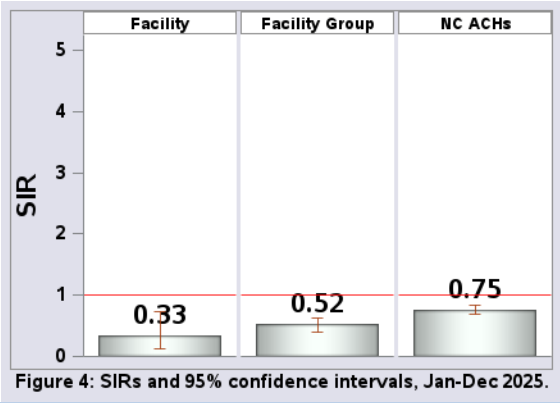


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	5	6.5	Same
Adult/Ped Wards	0	8.2	Better
Neonatal Units	0	Less than 1.0	No Conclusion
All reporting units	**5**	**15**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

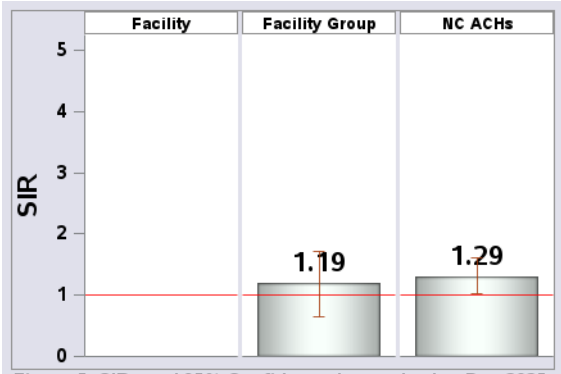


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

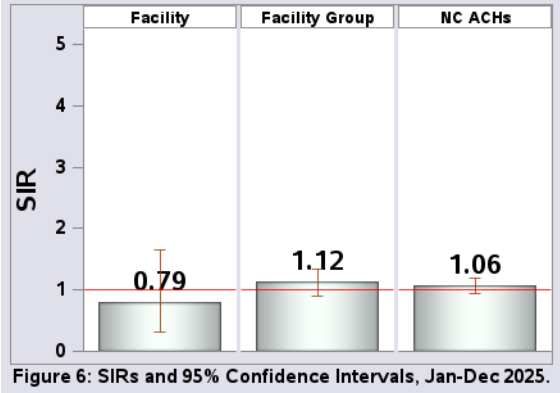


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**6**	**7.6**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

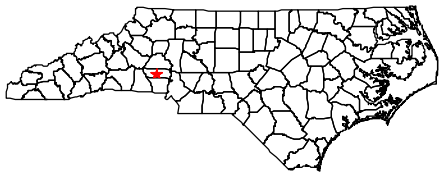
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Atrium Health Lincoln, Lincolnton, Lincoln County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	7,532
Patient Days in 2025:	23,795
Total Number of Beds:	101
Number of ICU Beds:	10
FTE* Infection Preventionists:	0.75
Number of FTEs* per 100 beds:	0.74

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

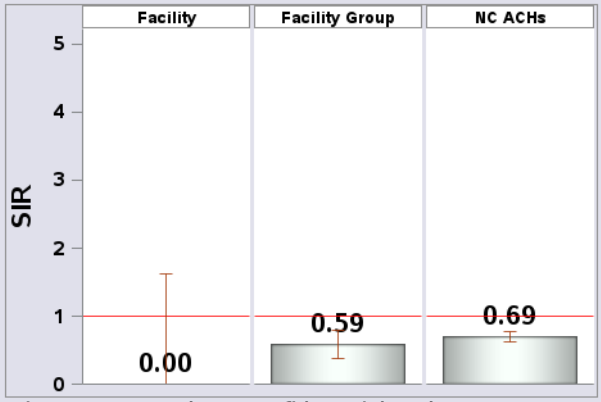


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	1.1	Same
All reporting units	**0**	**1.8**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**1.1**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

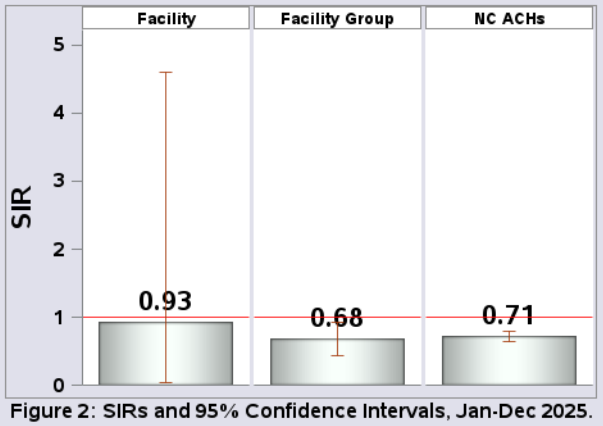


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

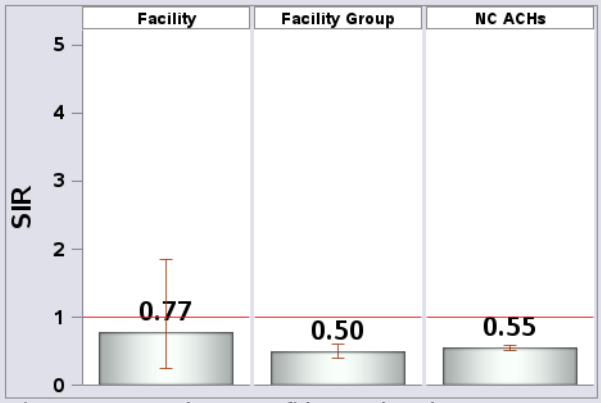


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**4**	**5.2**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Atrium Health Lincoln, Lincolnton, Lincoln County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

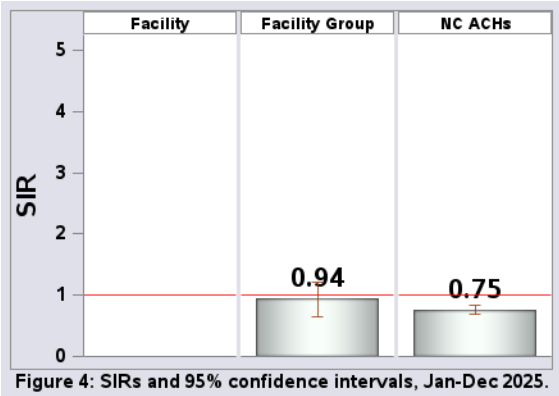


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

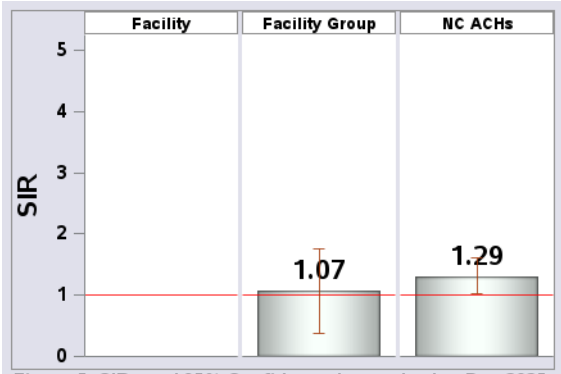


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

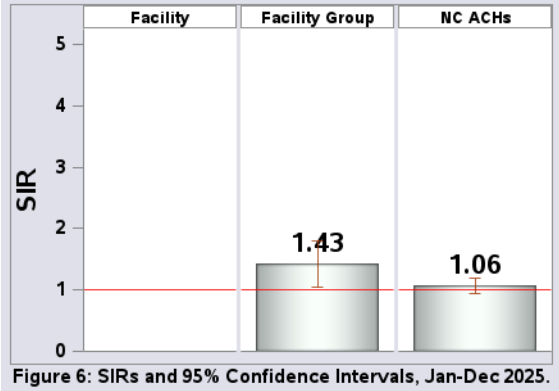


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Atrium Health Stanly, Albemarle, Stanly County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	4,766
Patient Days in 2025:	19,730
Total Number of Beds:	109
Number of ICU Beds:	10
FTE* Infection Preventionists:	0.50
Number of FTEs* per 100 beds:	0.46

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

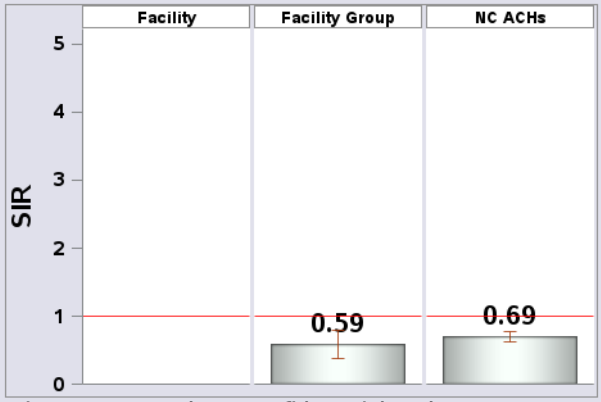


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	1	Less than 1.0	No Conclusion
Adult/Ped Wards	1	Less than 1.0	No Conclusion
All reporting units	**2**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

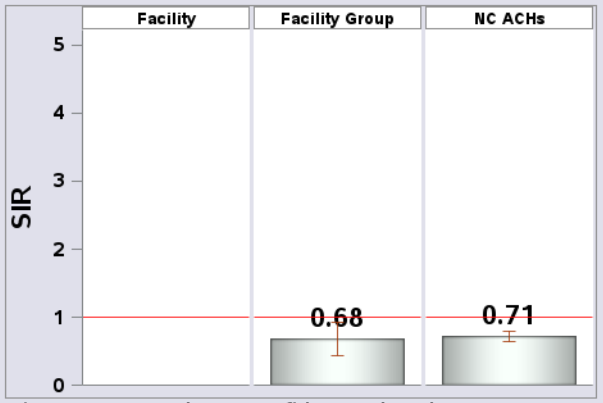


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

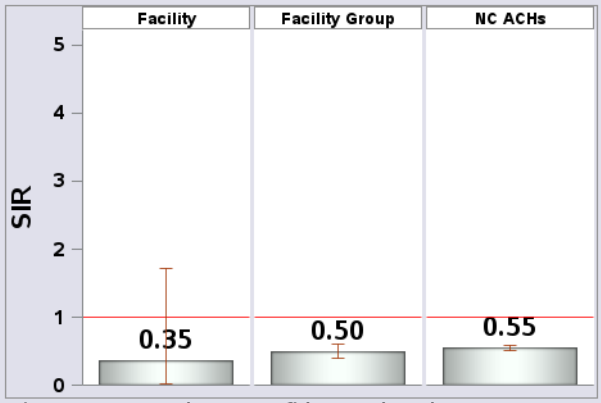


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**2.9**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Atrium Health Stanly, Albemarle, Stanly County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

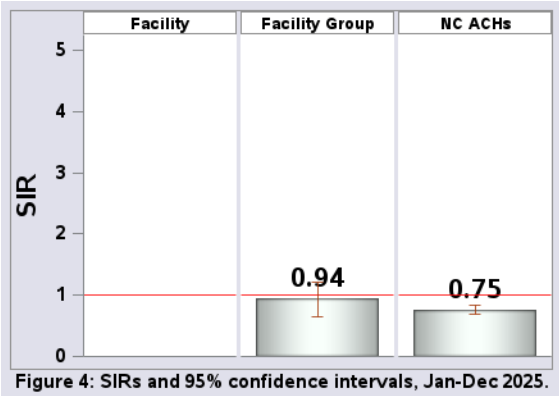


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

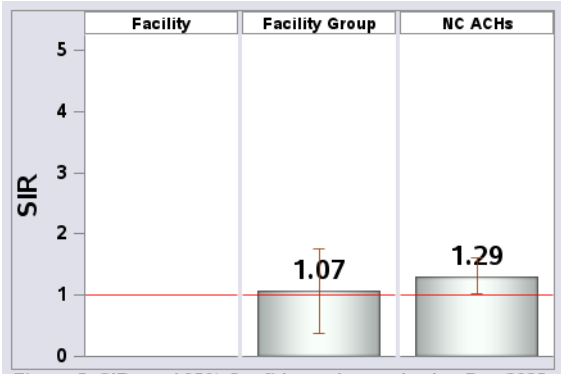


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

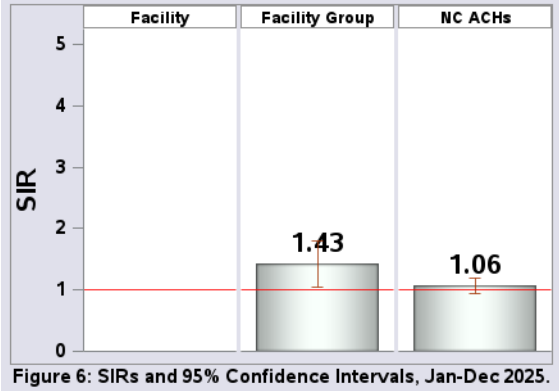


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Atrium Health University City, Charlotte, Mecklenburg County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	10,159
Patient Days in 2025:	48,653
Total Number of Beds:	118
Number of ICU Beds:	18
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	0.85

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

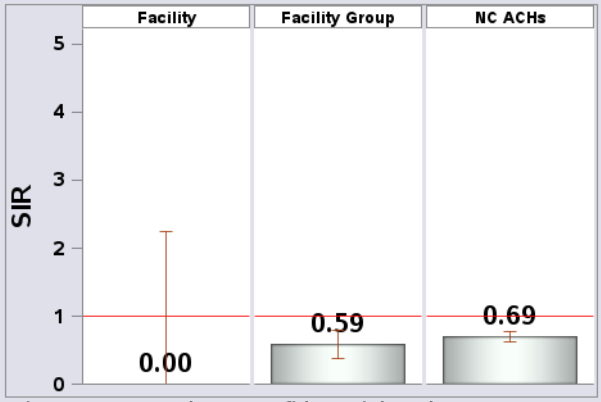


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**1.3**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**2.1**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

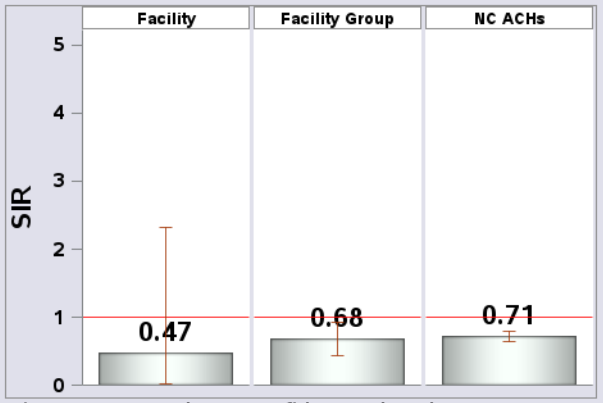


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

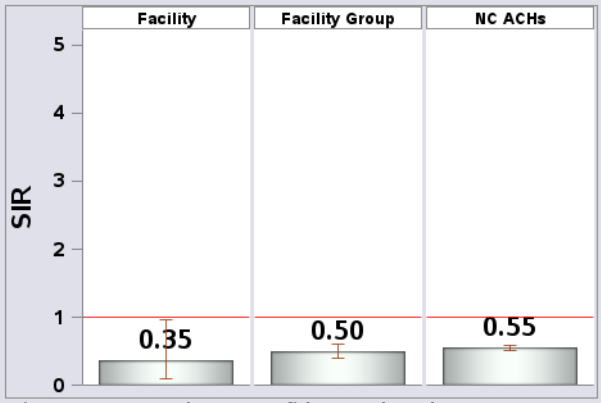


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**3**	**8.5**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Atrium Health University City, Charlotte, Mecklenburg County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

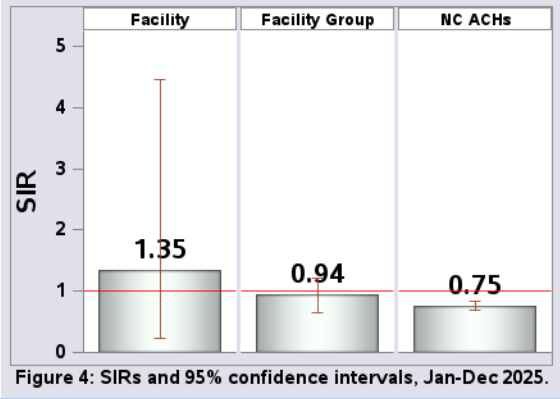


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	1	Less than 1.0	No Conclusion
Adult/Ped Wards	1	Less than 1.0	No Conclusion
Neonatal Units	0	Less than 1.0	No Conclusion
All reporting units	**2**	**1.5**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

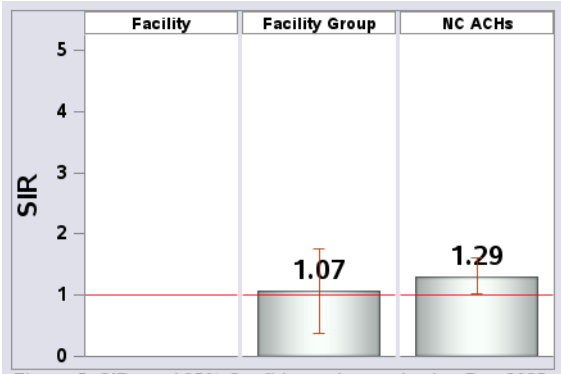


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

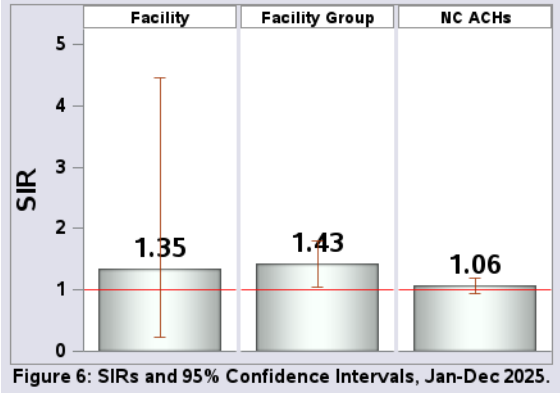


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**1.5**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

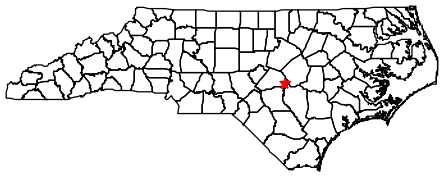
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Betsy Johnson Hospital, Dunn, Harnett County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	2,494
Patient Days in 2025:	13,279
Total Number of Beds:	87
Number of ICU Beds:	6
FTE* Infection Preventionists:	0.50
Number of FTEs* per 100 beds:	0.57

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

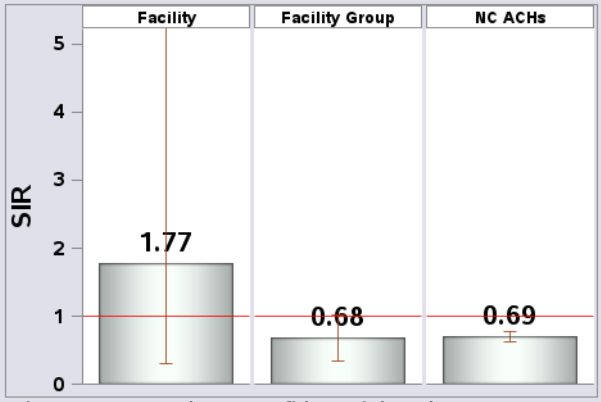


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	2	Less than 1.0	No Conclusion
All reporting units	**2**	**1.1**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**1.0**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

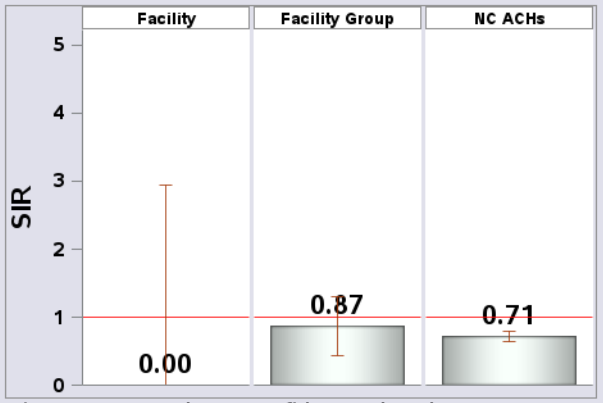


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

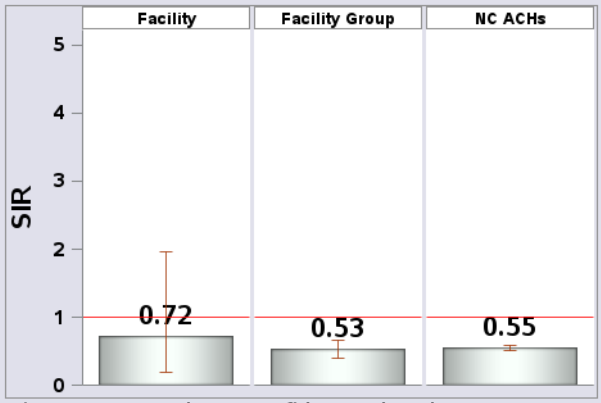


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**3**	**4.2**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Betsy Johnson Hospital, Dunn, Harnett County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

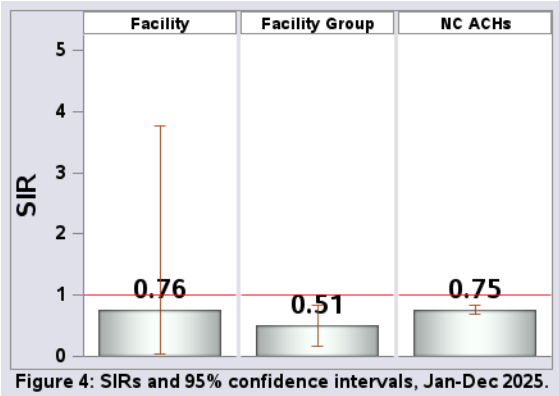


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	1	Less than 1.0	No Conclusion
All reporting units	**1**	**1.3**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

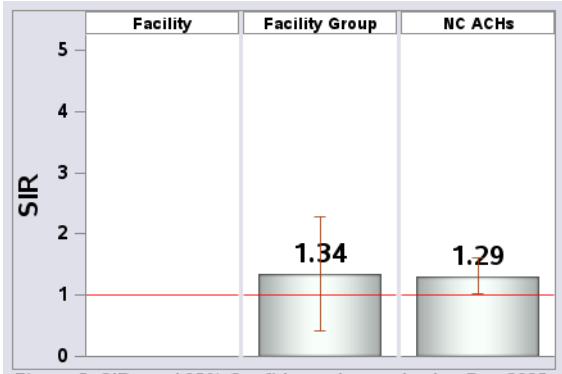


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

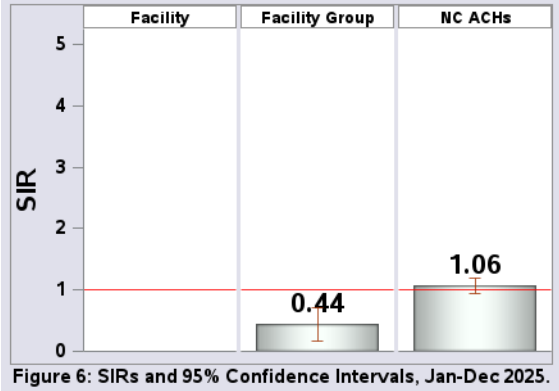


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

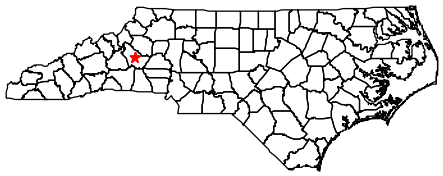
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Broughton Hospital, Morganton, Burke County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Specialty Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	193
Patient Days in 2025:	56,386
Total Number of Beds:	165
Number of ICU Beds:	0
FTE* Infection Preventionists:	2.00
Number of FTEs* per 100 beds:	1.21

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

Note from N.C. Division of Public Health: This facility did not have locations required to report CAUTI during this time period

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Note from N.C. Division of Public Health: This facility did not have locations required to report MRSA during this time period

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

Note from N.C. Division of Public Health: This facility did not have locations required to report CDI during this time period

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Broughton Hospital, Morganton, Burke County

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Central Line-Associated Bloodstream Infections (CLABSI)

Note from N.C. Division of Public Health: This facility did not have locations required to report CLABSI during this time period

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from N.C. Division of Public Health: This facility did not have locations required to report SSI during this time period

Surgical Site Infections (SSI) after Colon Surgeries

Note from N.C. Division of Public Health: This facility did not have locations required to report SSI during this time period

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Bryant T. Aldridge Rehabilitation Center, Rocky Mount, Nash County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Inpatient Rehabilitation Facility
Admissions in 2025:	536
Patient Days in 2025:	7,295
Total Number of Beds:	23
FTE* Infection Preventionists:	0.10
Number of FTEs* per 100 beds:	0.43

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

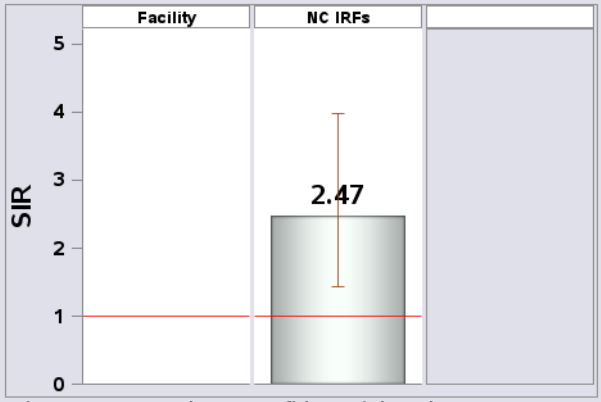


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
All reporting units	2	Less than 1.0	No Conclusion

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Note from NCDHHS Division of Public Health: MRSA is not reportable at this facility type after 2018Q3

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

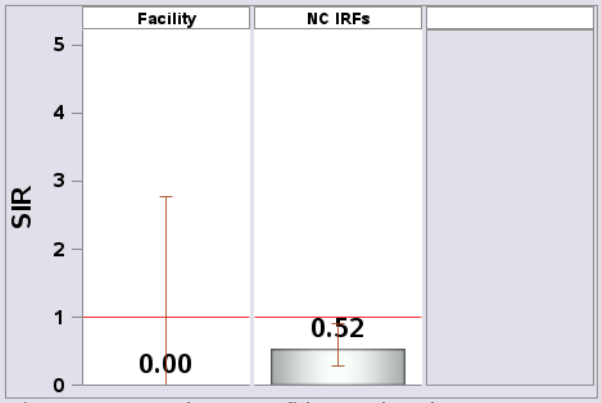


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	0	1.1	Same

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Bryant T. Aldridge Rehabilitation Center, Rocky Mount, Nash County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

Note from NCDHHS Division of Public Health: CLABSIs are not reportable at this facility type

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from NCDHHS Division of Public Health: SSIs are not reportable at this facility type

Surgical Site Infections (SSI) after Colon Surgeries

Note from NCDHHS Division of Public Health: SSIs are not reportable at this facility type

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

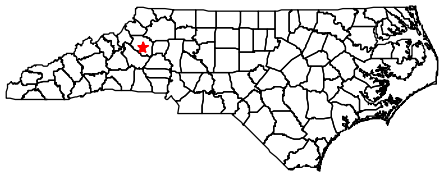
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Caldwell Memorial Hospital, Lenoir, Caldwell County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	4,104
Patient Days in 2025:	19,356
Total Number of Beds:	137
Number of ICU Beds:	12
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	0.73

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

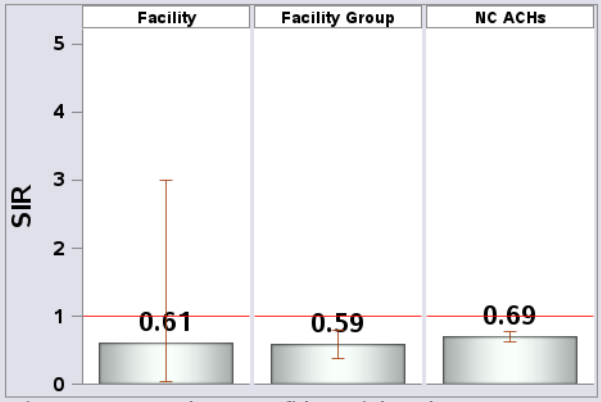


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	1	1.1	Same
All reporting units	**1**	**1.6**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**1.0**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

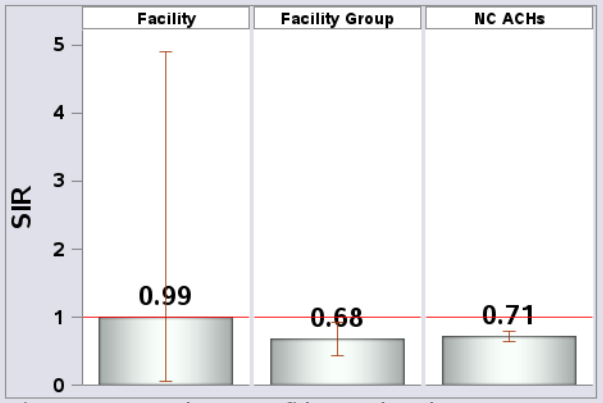


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

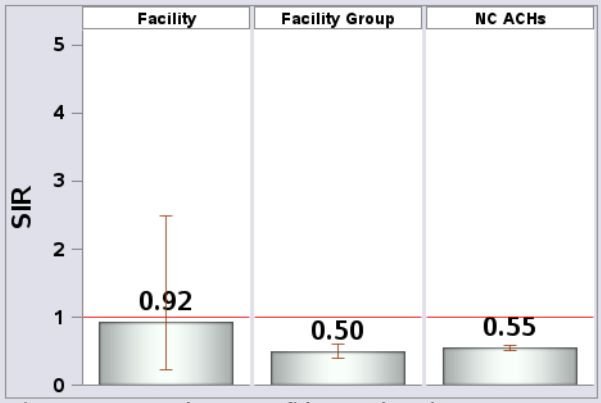


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**3**	**3.3**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Caldwell Memorial Hospital, Lenoir, Caldwell County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

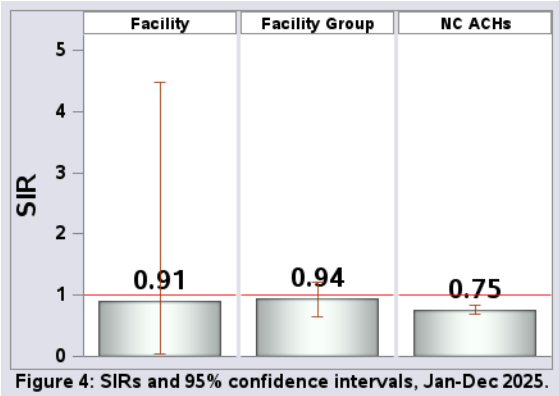


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	1	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**1**	**1.1**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

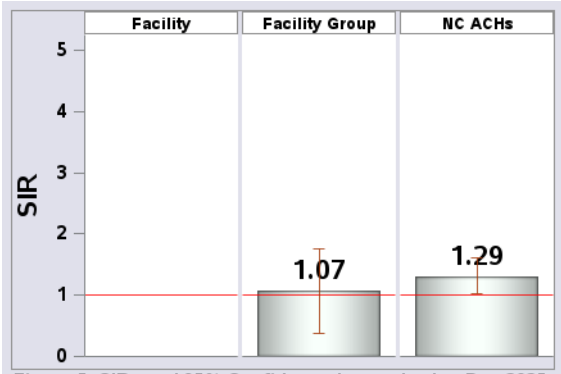


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

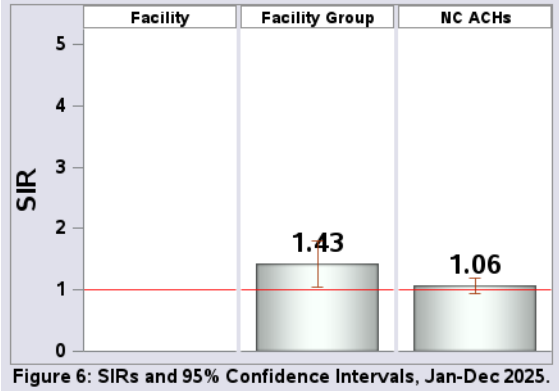


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

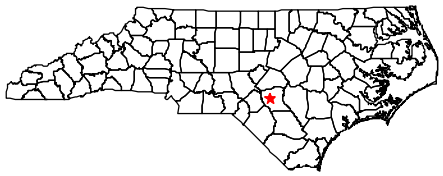
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Cape Fear Valley Health System, Fayetteville, Cumberland County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	39,967
Patient Days in 2025:	200,478
Total Number of Beds:	692
Number of ICU Beds:	136
FTE* Infection Preventionists:	7.00
Number of FTEs* per 100 beds:	1.01

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

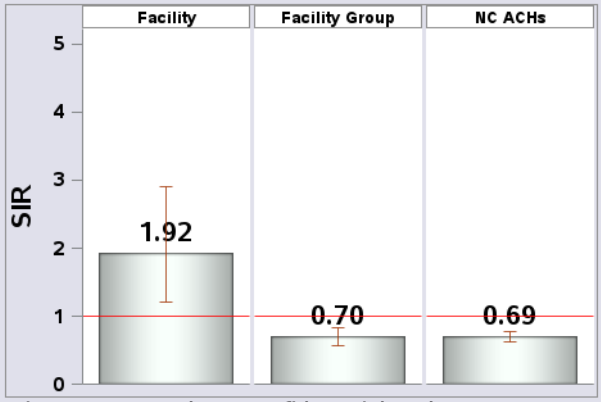


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	12	6.5	Same
Adult/Ped Wards	8	3.9	Same
All reporting units	**20**	**10**	**Worse**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
× Worse: More infections than predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**8**	**12**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

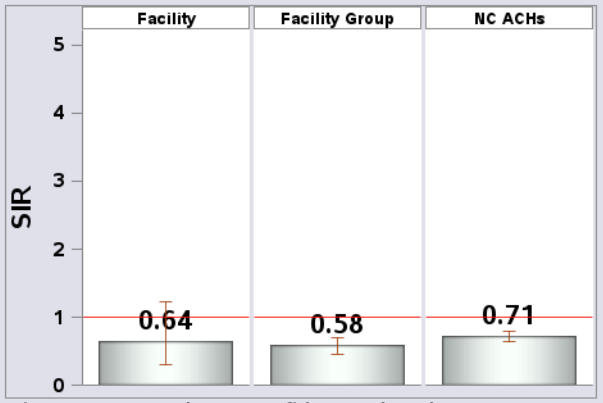


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

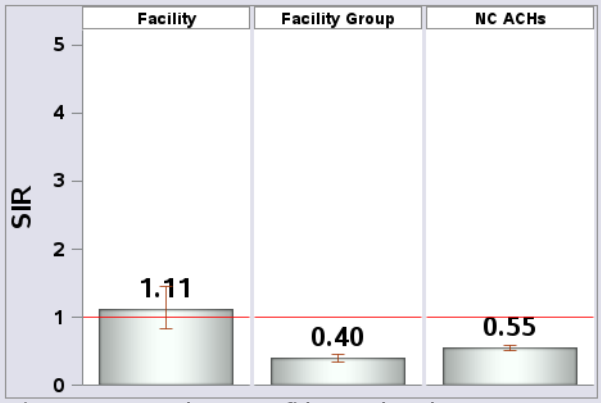


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**49**	**44**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Cape Fear Valley Health System, Fayetteville, Cumberland County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

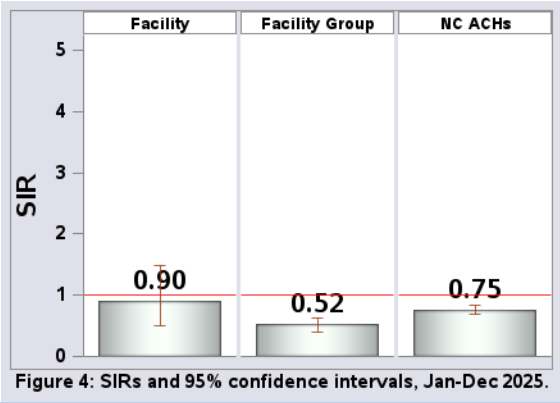


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	8	10	Same
Adult/Ped Wards	1	3.7	Same
Neonatal Units	4	Less than 1.0	No Conclusion
All reporting units	**13**	**14**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**4**	**2.3**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

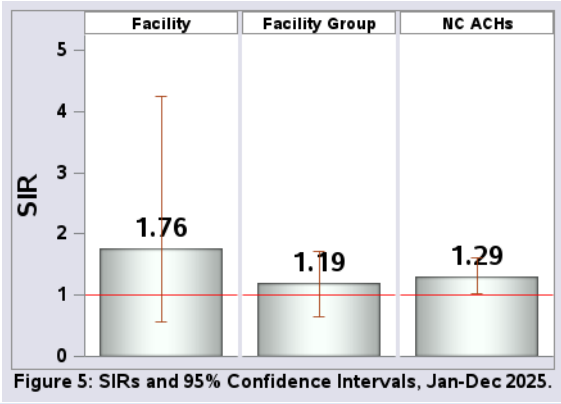


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

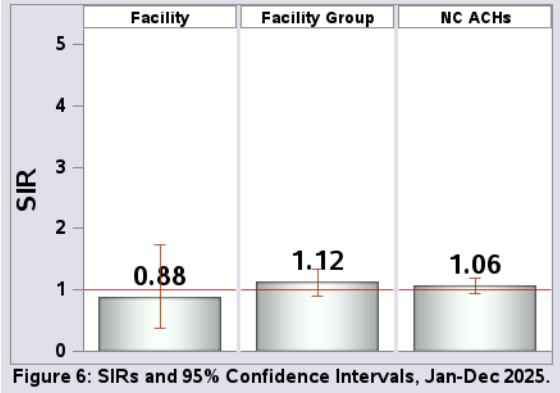


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**7**	**8.0**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Cape Fear Valley Hoke Hospital, Raeford, Hoke County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	1,763
Patient Days in 2025:	5,305
Total Number of Beds:	25
Number of ICU Beds:	0
FTE* Infection Preventionists:	0.20
Number of FTEs* per 100 beds:	0.80

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

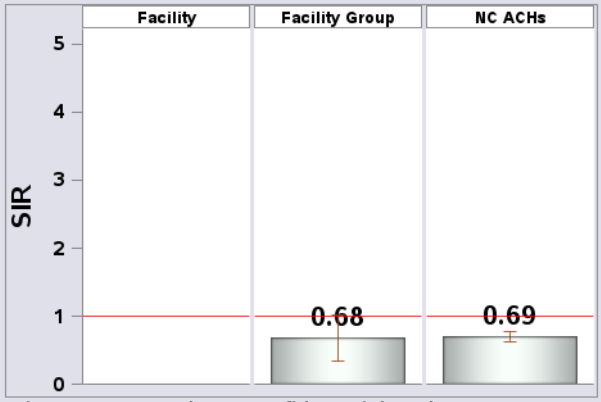


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	1	Less than 1.0	No Conclusion
All reporting units	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

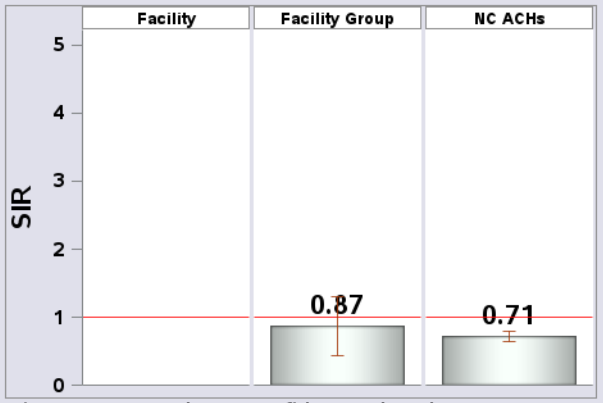


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

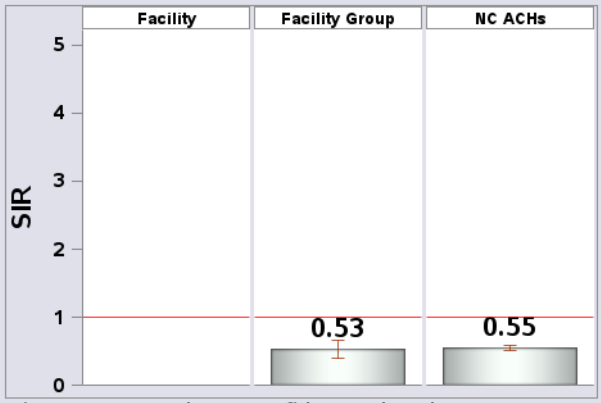


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Cape Fear Valley Hoke Hospital, Raeford, Hoke County

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Central Line-Associated Bloodstream Infections (CLABSI)

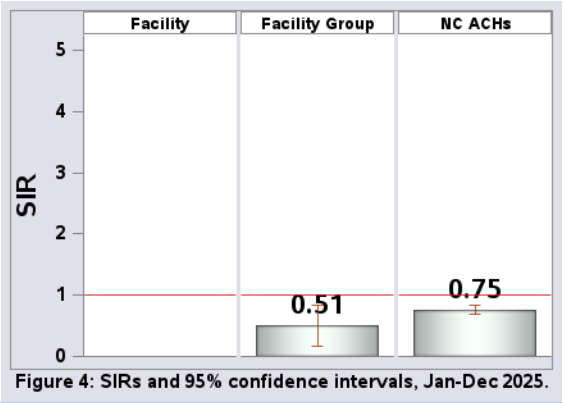


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.

Note: SIR not calculated if <50 central line days or <1 predicted infection.

Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?

No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Surgical Site Infections (SSI) after Colon Surgeries

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

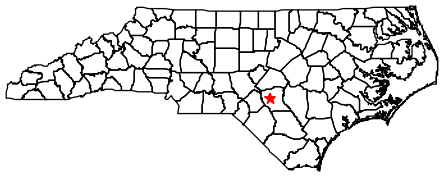
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Cape Fear Valley Rehabilitation Center, Fayetteville, Cumberland County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Inpatient Rehabilitation Facility
Admissions in 2025:	988
Patient Days in 2025:	13,748
Total Number of Beds:	78
FTE* Infection Preventionists:	0.25
Number of FTEs* per 100 beds:	0.32

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

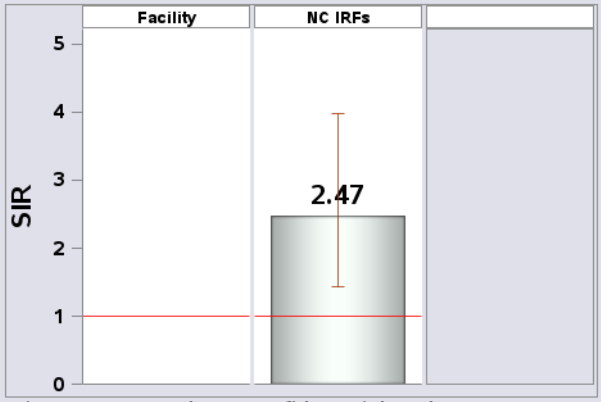


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
All reporting units	1	Less than 1.0	No Conclusion

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Note from NCDHHS Division of Public Health: MRSA is not reportable at this facility type after 2018Q3

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

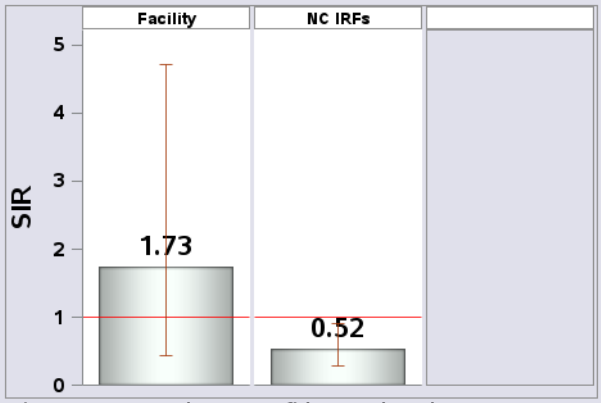


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	3	1.7	Same

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Cape Fear Valley Rehabilitation Center, Fayetteville, Cumberland County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

Note from NCDHHS Division of Public Health: CLABSIs are not reportable at this facility type

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from NCDHHS Division of Public Health: SSIs are not reportable at this facility type

Surgical Site Infections (SSI) after Colon Surgeries

Note from NCDHHS Division of Public Health: SSIs are not reportable at this facility type

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
CarePartners Health Services, Asheville, Buncombe County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Inpatient Rehabilitation Facility
Admissions in 2025:	1,427
Patient Days in 2025:	19,886
Total Number of Beds:	80
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	1.25

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

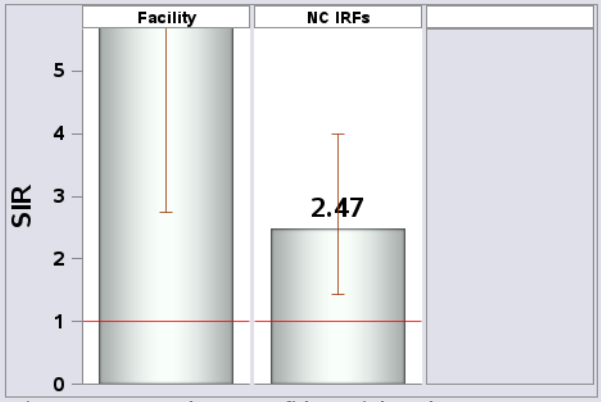


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
All reporting units	8	1.3	Worse

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
× Worse: More infections than predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Note from NCDHHS Division of Public Health: MRSA is not reportable at this facility type after 2018Q3

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

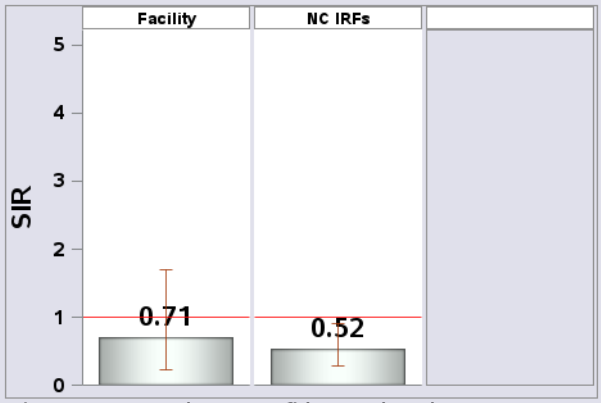


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	4	5.7	Same

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
CarePartners Health Services, Asheville, Buncombe County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

Note from NCDHHS Division of Public Health: CLABSIs are not reportable at this facility type

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from NCDHHS Division of Public Health: SSIs are not reportable at this facility type

Surgical Site Infections (SSI) after Colon Surgeries

Note from NCDHHS Division of Public Health: SSIs are not reportable at this facility type

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
CarolinaEast Medical Center, New Bern, Craven County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	14,189
Patient Days in 2025:	70,661
Total Number of Beds:	350
Number of ICU Beds:	33
FTE* Infection Preventionists:	4.00
Number of FTEs* per 100 beds:	1.14

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

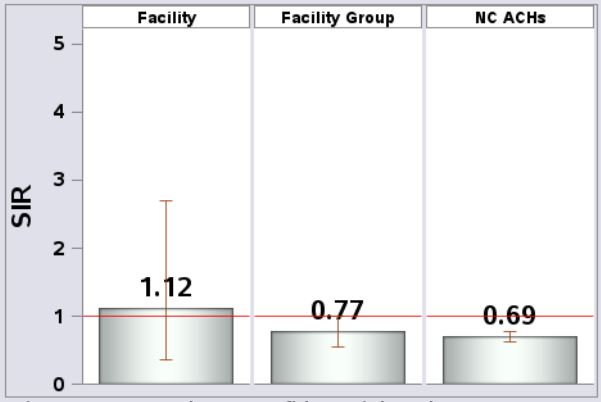


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	4	1.3	Worse
Adult/Ped Wards	0	2.3	Same
All reporting units	**4**	**3.6**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**3.1**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

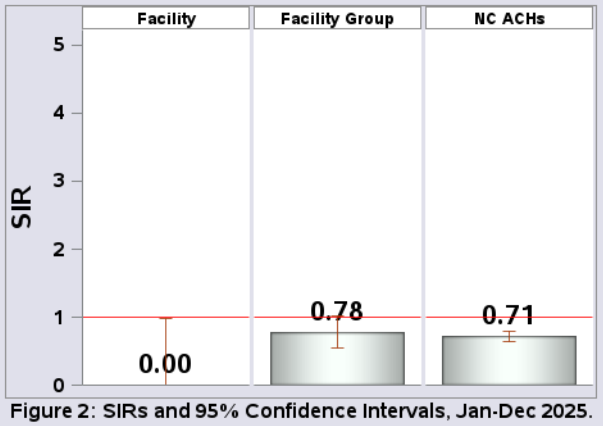


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

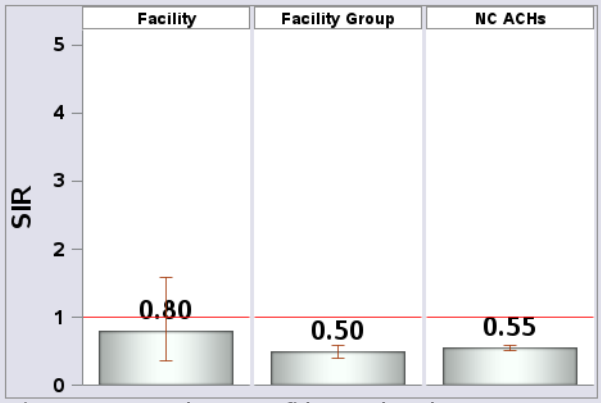


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**7**	**8.7**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
CarolinaEast Medical Center, New Bern, Craven County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

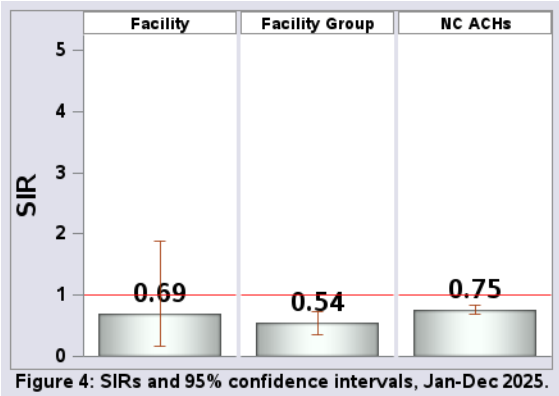


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	2.0	Same
Adult/Ped Wards	3	2.3	Same
All reporting units	**3**	**4.4**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

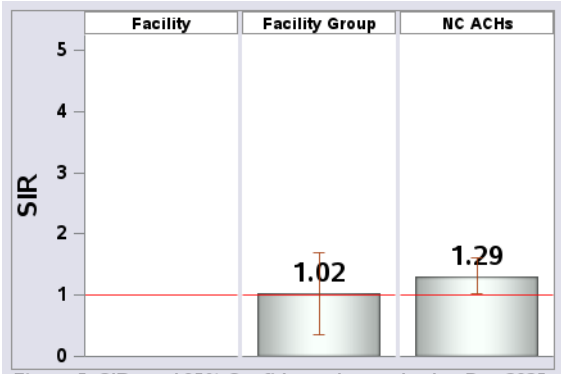


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

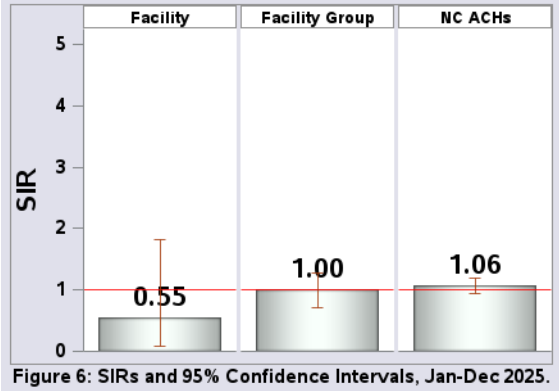


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**3.6**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Carolinas Healthcare System Anson, Wadesboro, Anson County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	631
Patient Days in 2025:	1,838
Total Number of Beds:	15
Number of ICU Beds:	0
FTE* Infection Preventionists:	0.20
Number of FTEs* per 100 beds:	1.33

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

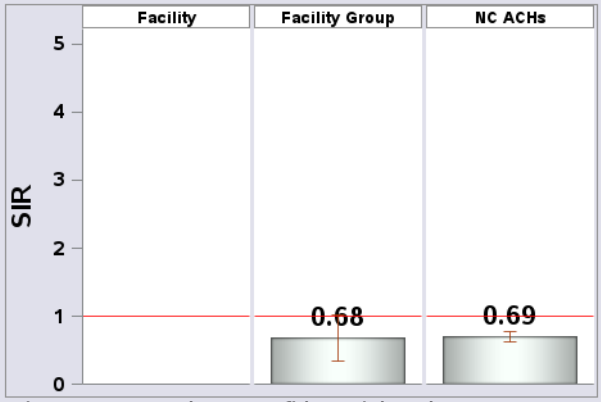


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

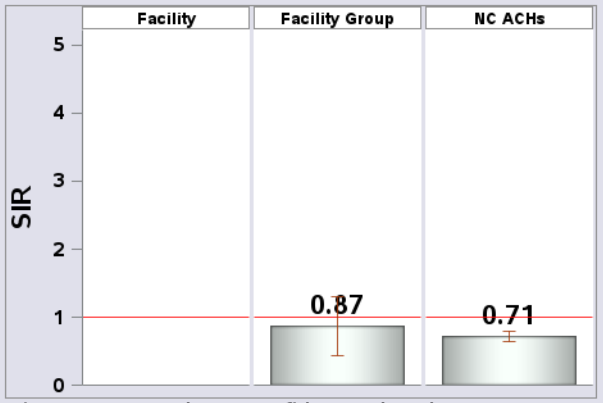


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

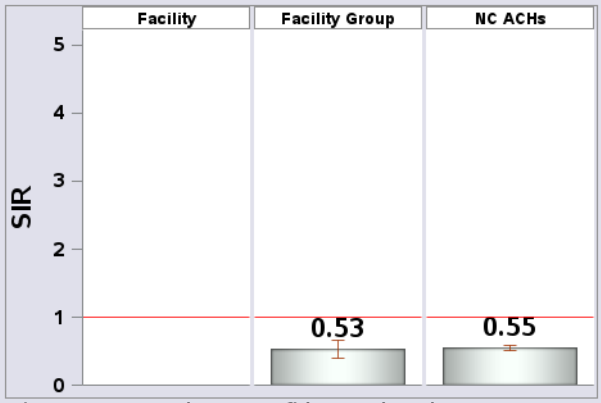


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Carolinas Healthcare System Anson, Wadesboro, Anson County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

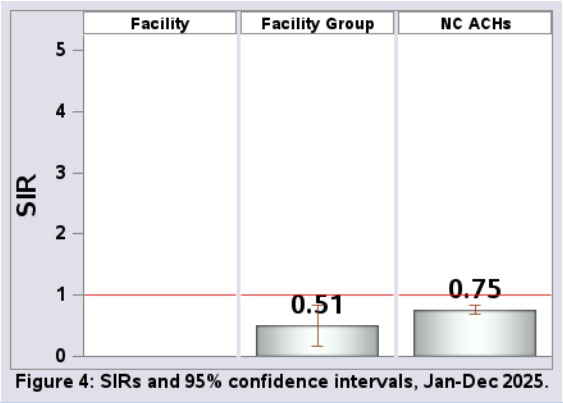


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Surgical Site Infections (SSI) after Colon Surgeries

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

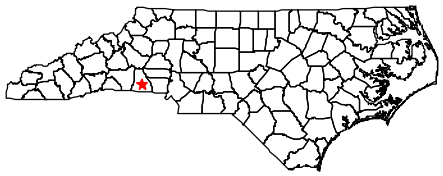
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Carolinas Healthcare System Cleveland, Shelby, Cleveland County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	12,561
Patient Days in 2025:	55,441
Total Number of Beds:	241
Number of ICU Beds:	18
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	0.41

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

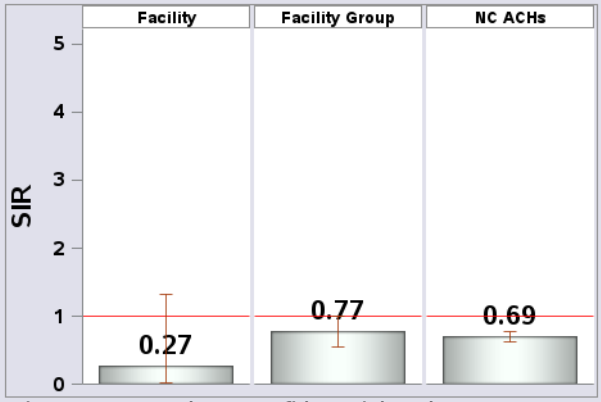


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	1	1.8	Same
Adult/Ped Wards	0	1.9	Same
All reporting units	**1**	**3.7**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**3**	**3.1**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

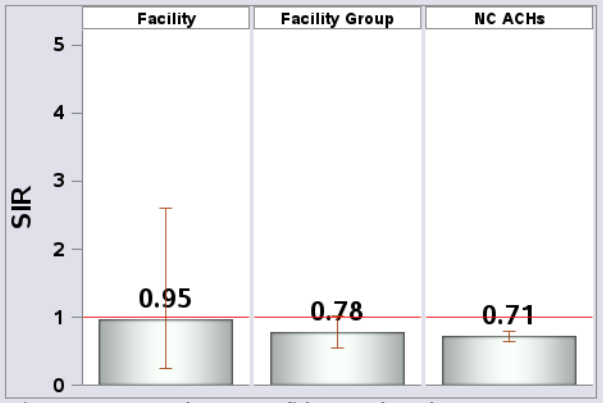


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

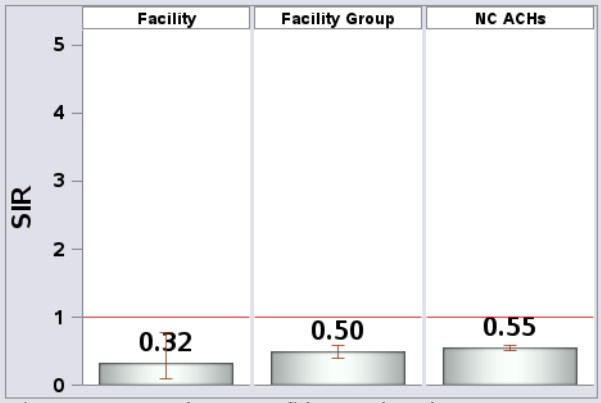


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**4**	**12**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Carolinas Healthcare System Cleveland, Shelby, Cleveland County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

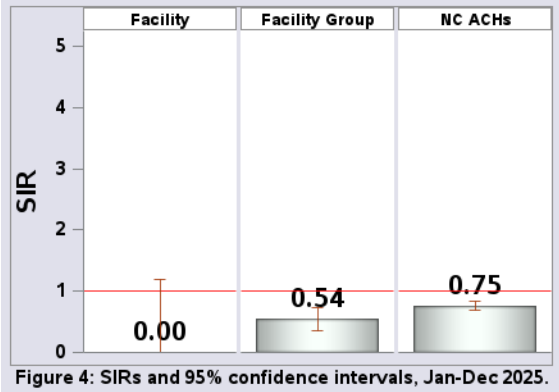


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	1.5	Same
Adult/Ped Wards	0	1.1	Same
All reporting units	**0**	**2.5**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

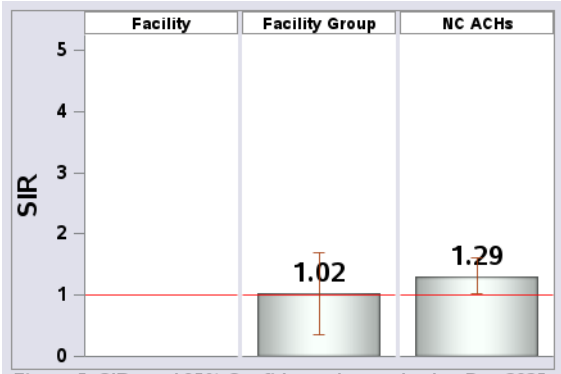


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

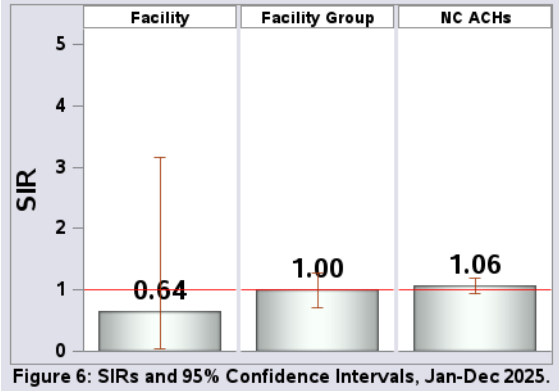


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**1.6**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Carolinas Medical Center, Charlotte, Mecklenburg County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	22,862
Patient Days in 2025:	350,336
Total Number of Beds:	881
Number of ICU Beds:	243
FTE* Infection Preventionists:	7.00
Number of FTEs* per 100 beds:	0.79

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

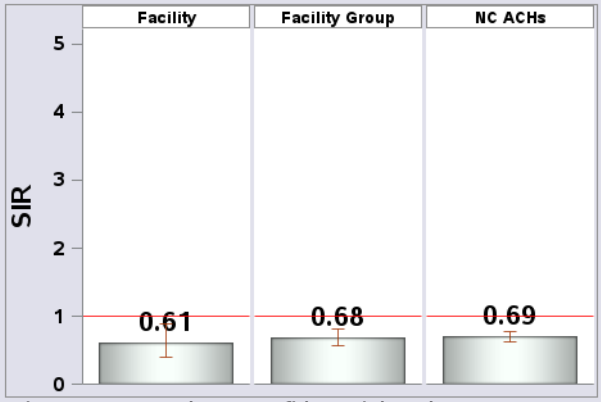


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	14	27	Better
Adult/Ped Wards	9	11	Same
All reporting units	**23**	**38**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**13**	**29**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

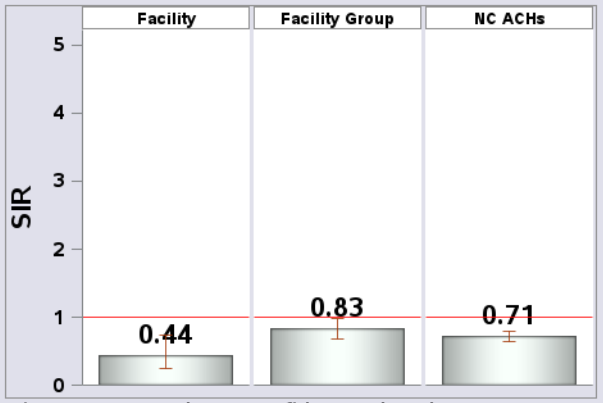


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

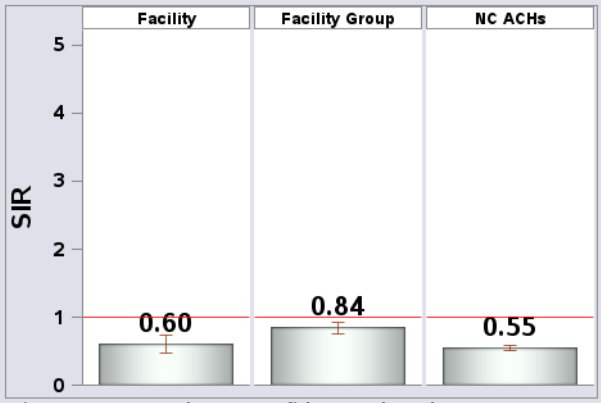


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**77**	**129**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Carolinas Medical Center, Charlotte, Mecklenburg County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

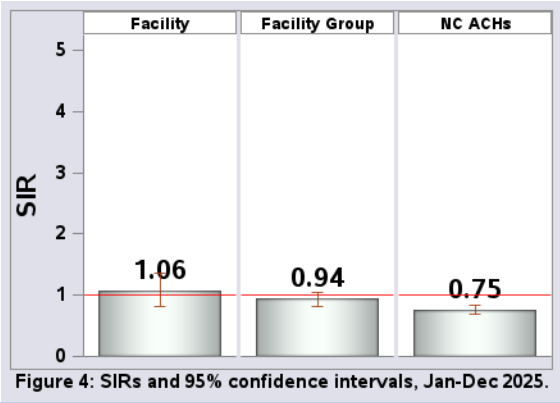


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	27	35	Same
Adult/Ped Wards	24	15	Worse
Neonatal Units	9	5.9	Same
All reporting units	**60**	**56**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**3**	**3.9**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

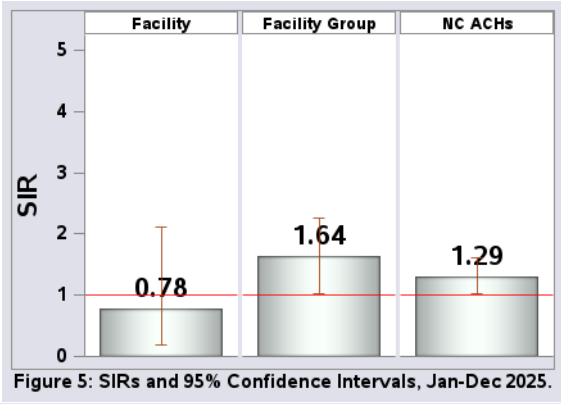


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

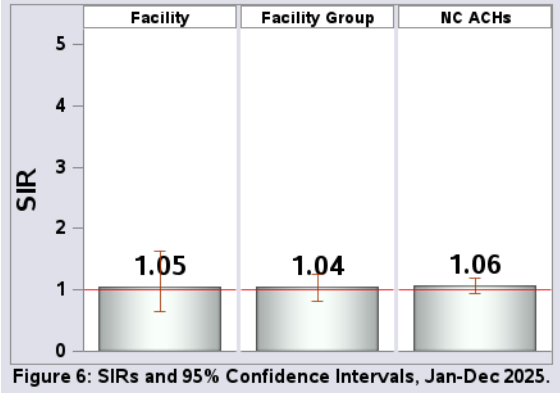


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**18**	**17**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Carolinas Medical Center-Mercy, Charlotte, Mecklenburg County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	6,355
Patient Days in 2025:	77,370
Total Number of Beds:	207
Number of ICU Beds:	20
FTE* Infection Preventionists:	2.00
Number of FTEs* per 100 beds:	0.97

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

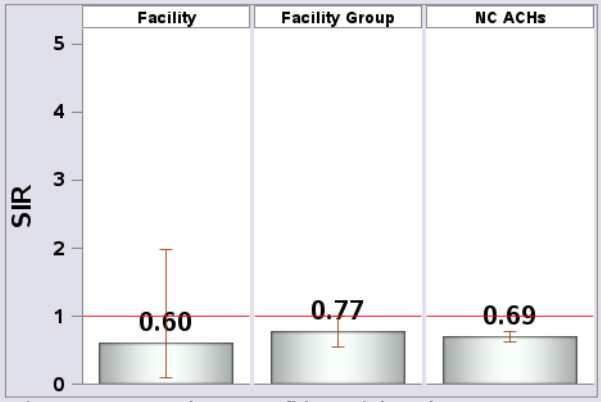


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	1.6	Same
Adult/Ped Wards	2	1.7	Same
All reporting units	**2**	**3.3**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**5.8**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

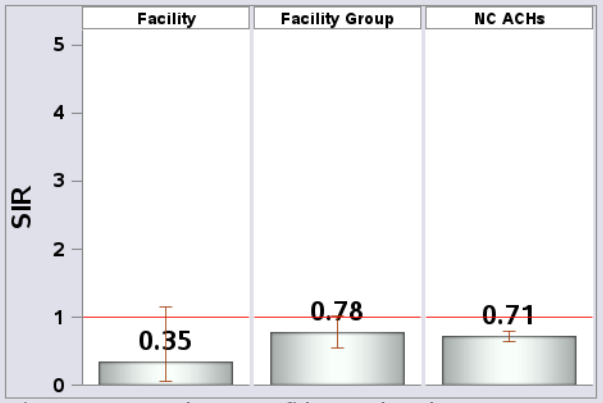


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

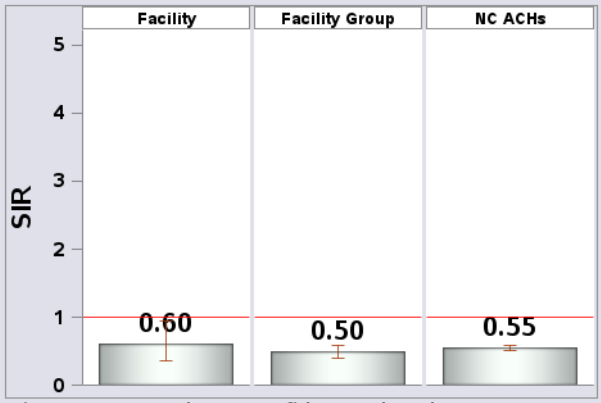


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**17**	**28**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Carolinas Medical Center-Mercy, Charlotte, Mecklenburg County

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Central Line-Associated Bloodstream Infections (CLABSI)

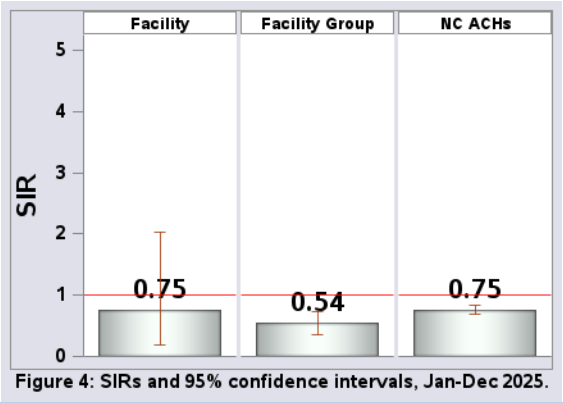

Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	3	2.0	Same
Adult/Ped Wards	0	2.0	Same
All reporting units	**3**	**4.0**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.

Note: SIR not calculated if <50 central line days or <1 predicted infection.

Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?

= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Surgical Site Infections (SSI) after Colon Surgeries

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Carolinas Medical Center-Pineville, Charlotte, Mecklenburg County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	26,470
Patient Days in 2025:	112,816
Total Number of Beds:	308
Number of ICU Beds:	56
FTE* Infection Preventionists:	2.08
Number of FTEs* per 100 beds:	0.67

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

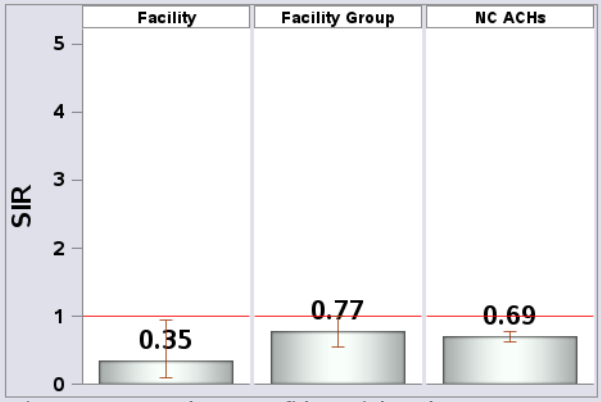

Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	2	4.4	Same
Adult/Ped Wards	1	4.3	Same
All reporting units	**3**	**8.7**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**3**	**5.9**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

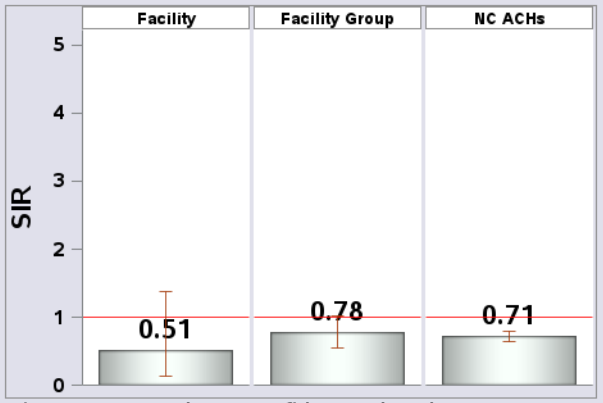

Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

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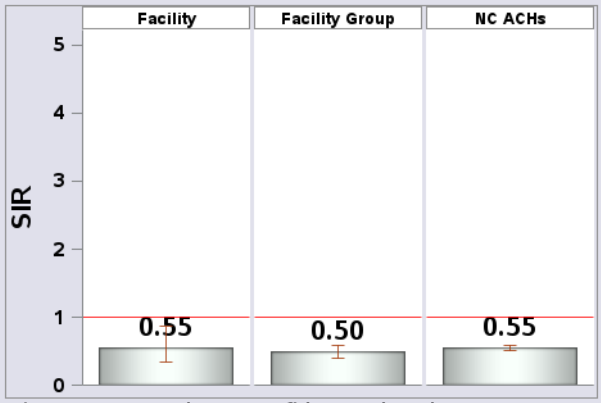

Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**17**	**31**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Carolinas Medical Center-Pineville, Charlotte, Mecklenburg County

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Central Line-Associated Bloodstream Infections (CLABSI)

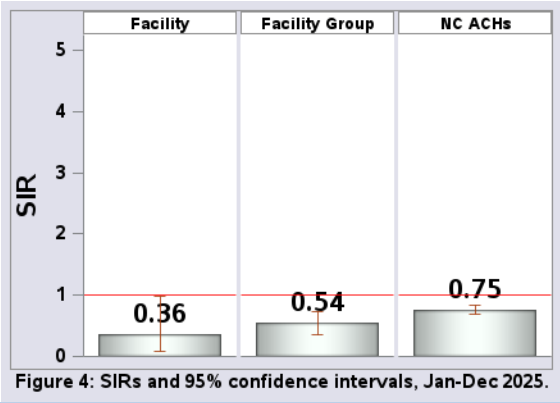


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	5.3	Better
Adult/Ped Wards	3	2.9	Same
Neonatal Units	0	Less than 1.0	No Conclusion
All reporting units	**3**	**8.3**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

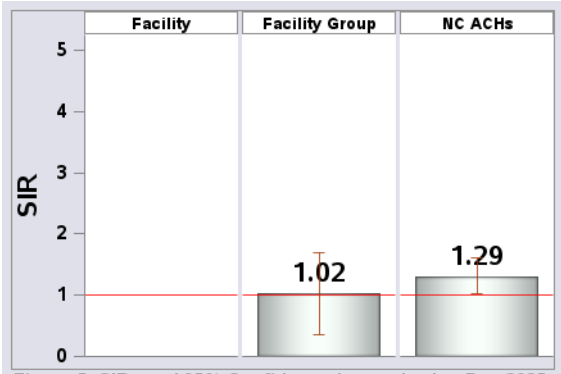


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

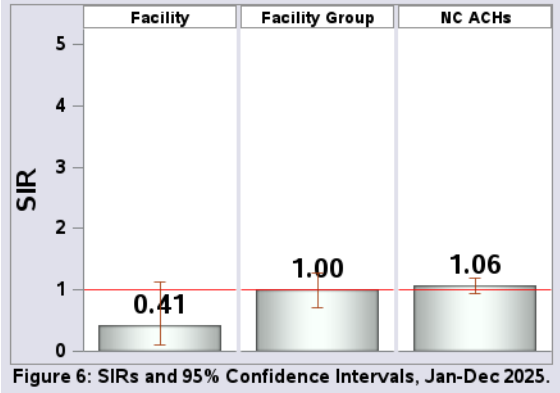


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**3**	**7.3**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

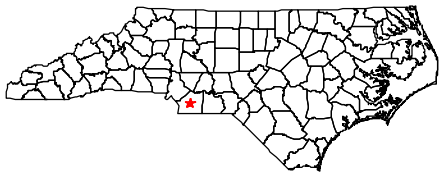
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Carolinas Medical Center-Union, Monroe, Union County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	10,335
Patient Days in 2025:	51,340
Total Number of Beds:	142
Number of ICU Beds:	14
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	0.70

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

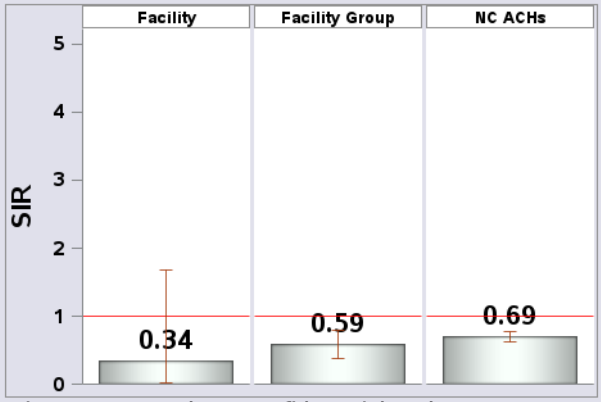


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	1	1.5	Same
Adult/Ped Wards	0	1.4	Same
All reporting units	**1**	**2.9**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**1.9**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

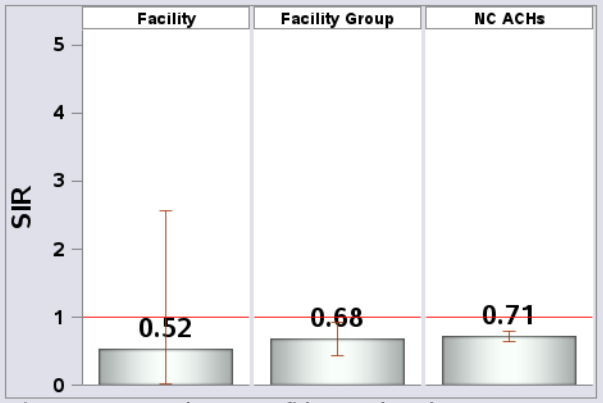


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

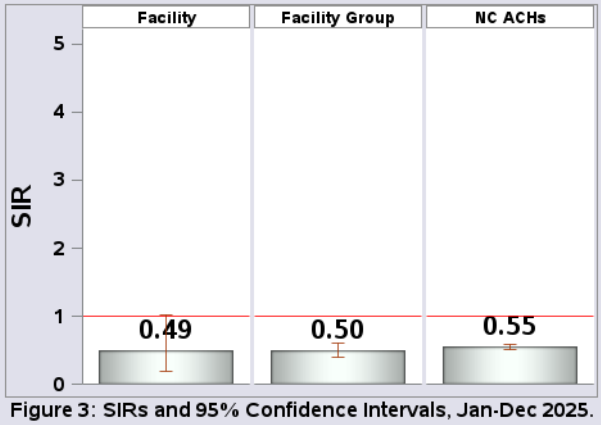


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**6**	**12**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Carolinas Medical Center-Union, Monroe, Union County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

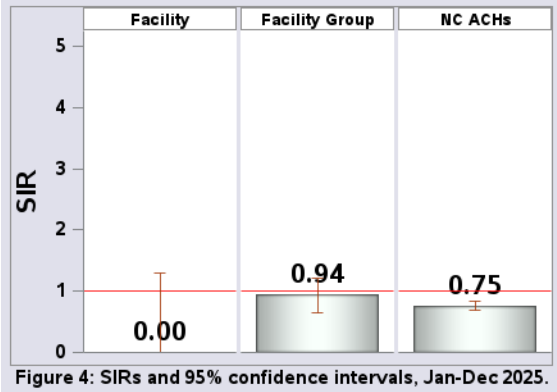


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	1.4	Same
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**2.3**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

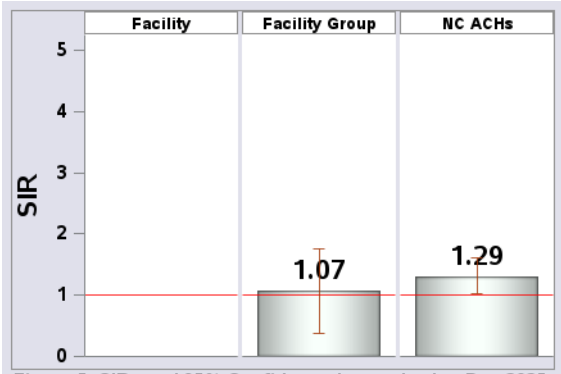


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

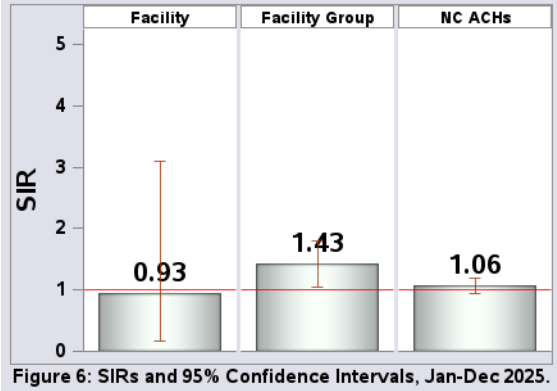


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**2.1**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Carolinas Rehabilitation, Charlotte, Mecklenburg County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Inpatient Rehabilitation Facility
Admissions in 2025:	1,574
Patient Days in 2025:	23,240
Total Number of Beds:	72
FTE* Infection Preventionists:	0.38
Number of FTEs* per 100 beds:	0.52

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

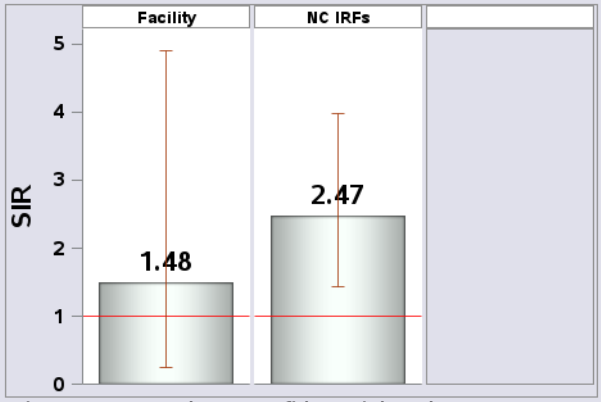


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
All reporting units	2	1.3	Same

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Note from NCDHHS Division of Public Health: MRSA is not reportable at this facility type after 2018Q3

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

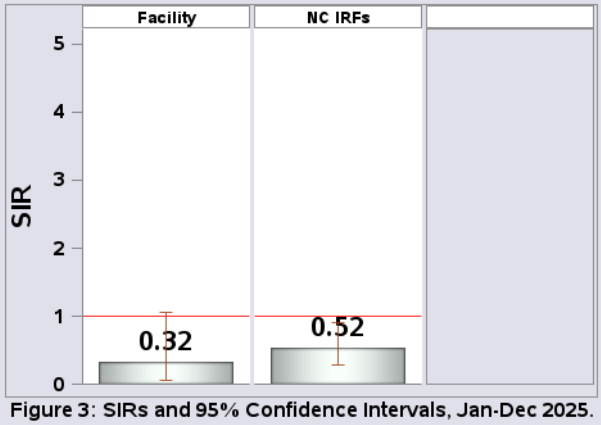


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	2	6.2	Same

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Carolinas Rehabilitation, Charlotte, Mecklenburg County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

Note from NCDHHS Division of Public Health: CLABSIs are not reportable at this facility type

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from NCDHHS Division of Public Health: SSIs are not reportable at this facility type

Surgical Site Infections (SSI) after Colon Surgeries

Note from NCDHHS Division of Public Health: SSIs are not reportable at this facility type

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Carolinas Rehabilitation Mount Holly, Belmont, Gaston County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Inpatient Rehabilitation Facility
Admissions in 2025:	822
Patient Days in 2025:	11,298
Total Number of Beds:	40
FTE* Infection Preventionists:	0.20
Number of FTEs* per 100 beds:	0.50

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

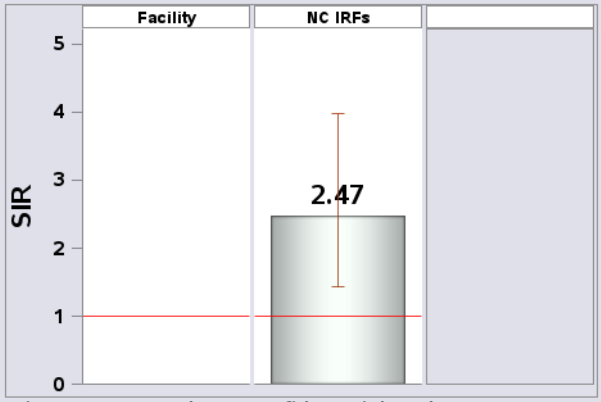


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
All reporting units	0	Less than 1.0	No Conclusion

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Note from NCDHHS Division of Public Health: MRSA is not reportable at this facility type after 2018Q3

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

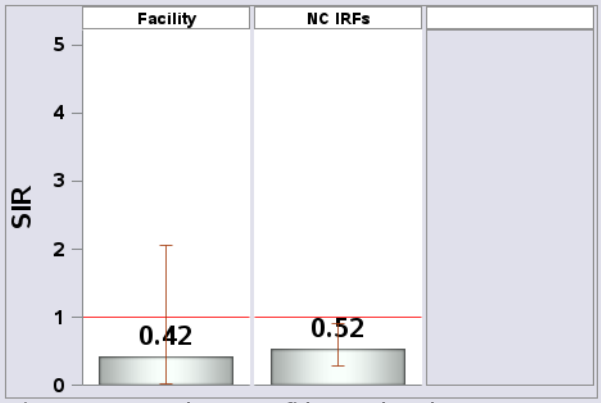


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	1	2.4	Same

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Carolinas Rehabilitation Mount Holly, Belmont, Gaston County

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Central Line-Associated Bloodstream Infections (CLABSI)

Note from NCDHHS Division of Public Health: CLABSIs are not reportable at this facility type

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from NCDHHS Division of Public Health: SSIs are not reportable at this facility type

Surgical Site Infections (SSI) after Colon Surgeries

Note from NCDHHS Division of Public Health: SSIs are not reportable at this facility type

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Carolinas Rehabilitation North East, Concord, Cabarrus County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Inpatient Rehabilitation Facility
Admissions in 2025:	806
Patient Days in 2025:	11,358
Total Number of Beds:	38
FTE* Infection Preventionists:	0.20
Number of FTEs* per 100 beds:	0.53

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

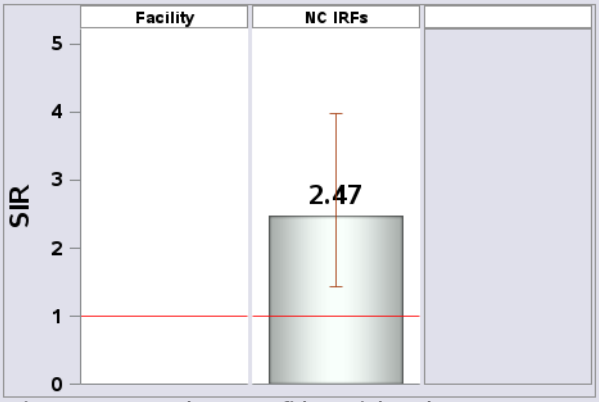

Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
All reporting units	1	Less than 1.0	No Conclusion

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

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Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

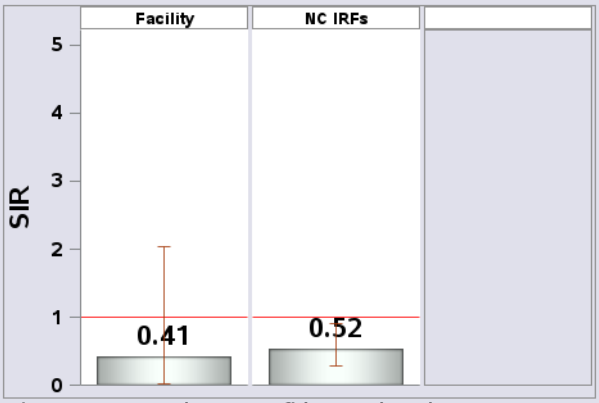

Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	1	2.4	Same

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Carolinas Rehabilitation North East, Concord, Cabarrus County

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Central Line-Associated Bloodstream Infections (CLABSI)

Note from NCDHHS Division of Public Health: CLABSIs are not reportable at this facility type

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from NCDHHS Division of Public Health: SSIs are not reportable at this facility type

Surgical Site Infections (SSI) after Colon Surgeries

Note from NCDHHS Division of Public Health: SSIs are not reportable at this facility type

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Carolinas Specialty Hospital, Charlotte, Mecklenburg County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Long-term Acute Care Hospital
Admissions in 2025:	360
Patient Days in 2025:	10,446
Total Number of Beds:	40
FTE* Infection Preventionists:	0.50
Number of FTEs* per 100 beds:	1.25

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

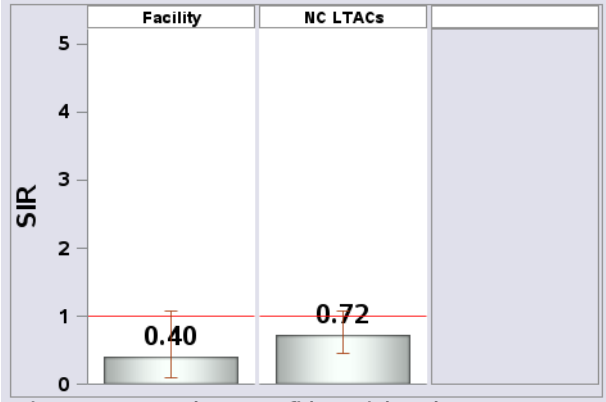

Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Reporting Wards	3	7.6	Same
All reporting units	**3**	**7.6**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
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Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Note from NCDHHS Division of Public Health: MRSA is not reportable at this facility type after 2018Q3

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

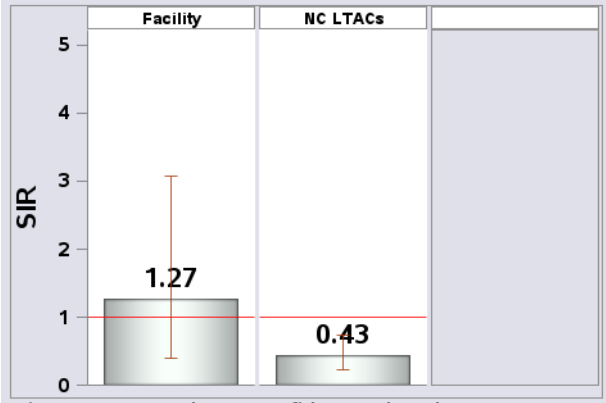

Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**4**	**3.1**	**Same**
Facility-wide inpatient	**.**	**Less than 1.0**	**No Conclusion**
Facility-wide inpatient	**.**	**Less than 1.0**	**No Conclusion**
Facility-wide inpatient	**.**	**Less than 1.0**	**No Conclusion**
Facility-wide inpatient	**.**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

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Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

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N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
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Carolinas Specialty Hospital, Charlotte, Mecklenburg County

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Central Line-Associated Bloodstream Infections (CLABSI)

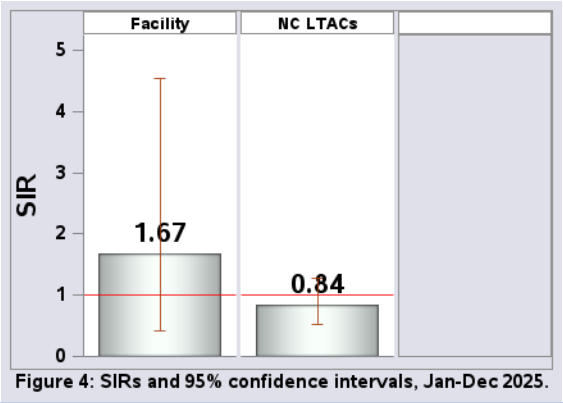


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Reporting Wards	3	1.8	Same
All reporting units	**3**	**1.8**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from NCDHHS Division of Public Health: SSIs are not reportable at this facility type

Surgical Site Infections (SSI) after Colon Surgeries

Note from NCDHHS Division of Public Health: SSIs are not reportable at this facility type

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Carteret General Hospital, Morehead City, Carteret County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	6,350
Patient Days in 2025:	30,422
Total Number of Beds:	103
Number of ICU Beds:	0
FTE* Infection Preventionists:	1.50
Number of FTEs* per 100 beds:	1.46

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

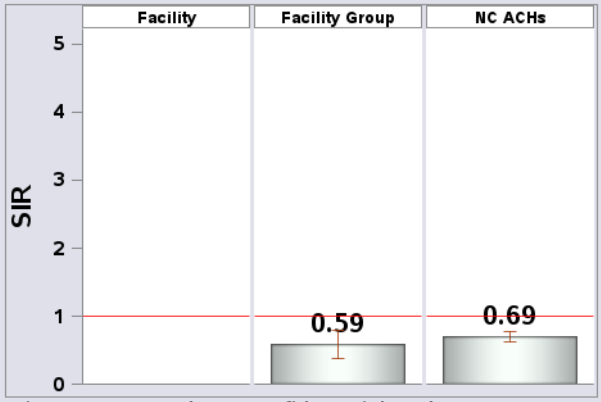


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**1.1**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

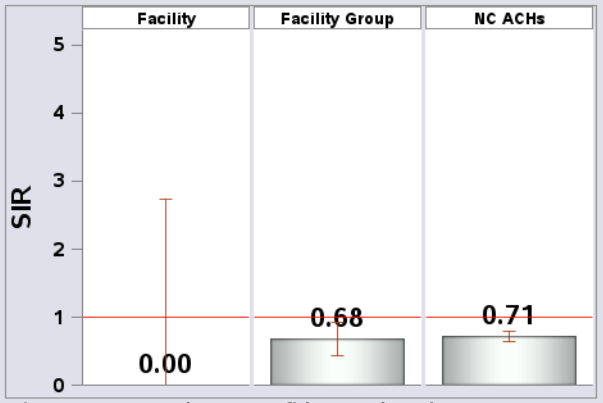


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

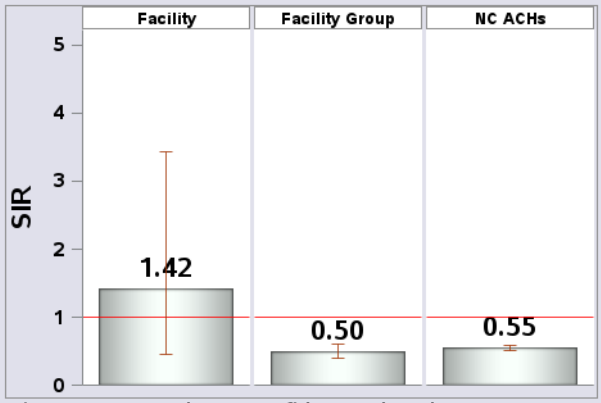


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**4**	**2.8**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Carteret General Hospital, Morehead City, Carteret County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

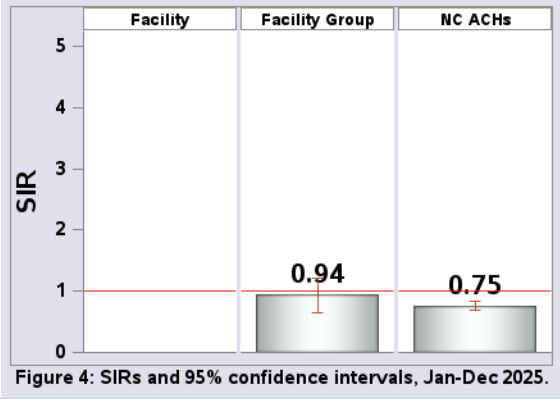


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped Wards	1	Less than 1.0	No Conclusion
All reporting units	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

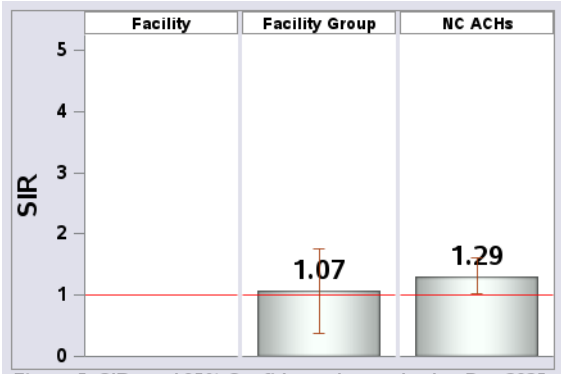


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

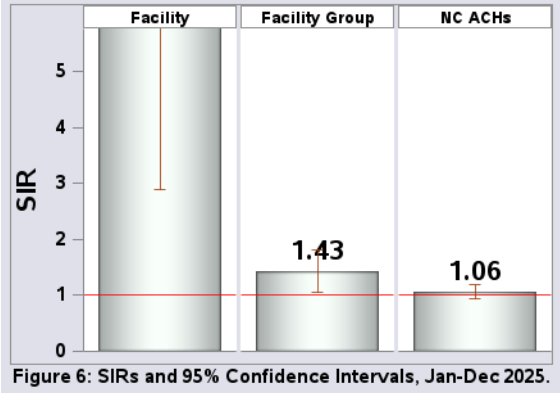


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**7**	**1.1**	**Worse**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
✕ Worse: More infections than predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

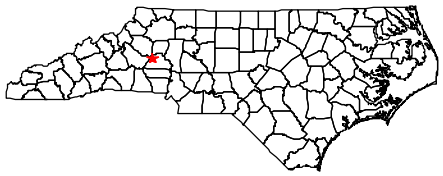
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Catawba Valley Medical Center, Hickory, Catawba County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	No
Admissions in 2025:	13,524
Patient Days in 2025:	54,488
Total Number of Beds:	253
Number of ICU Beds:	36
FTE* Infection Preventionists:	3.00
Number of FTEs* per 100 beds:	1.19

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

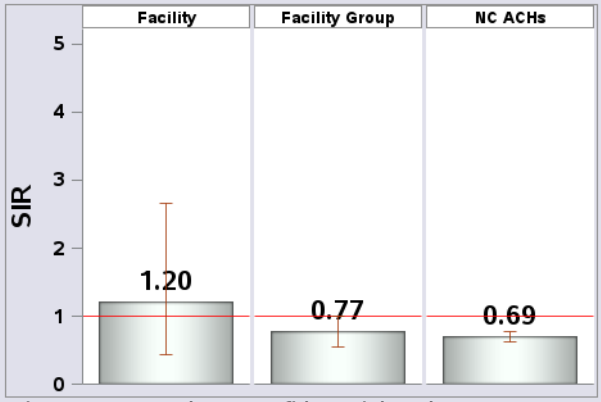


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	2	1.8	Same
Adult/Ped Wards	3	2.4	Same
All reporting units	**5**	**4.2**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**2.0**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

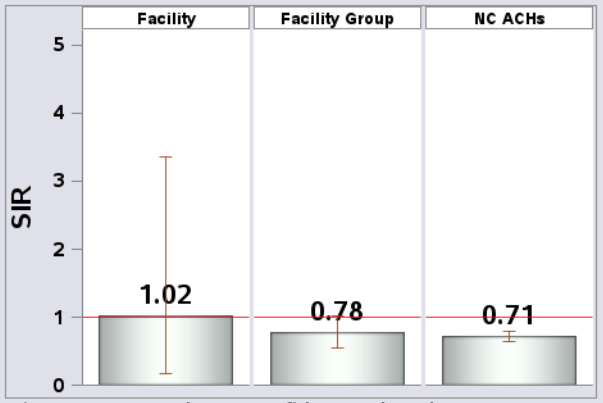


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

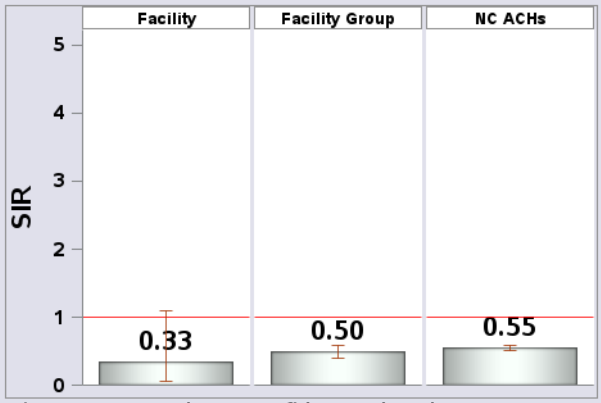


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**6.0**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Catawba Valley Medical Center, Hickory, Catawba County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

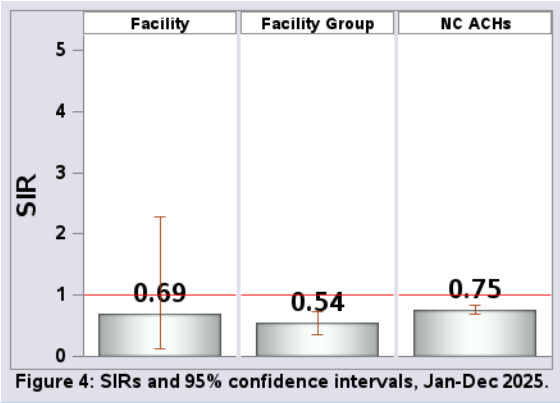


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	1	1.3	Same
Adult/Ped Wards	0	Less than 1.0	No Conclusion
Neonatal Units	1	Less than 1.0	No Conclusion
All reporting units	**2**	**2.9**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

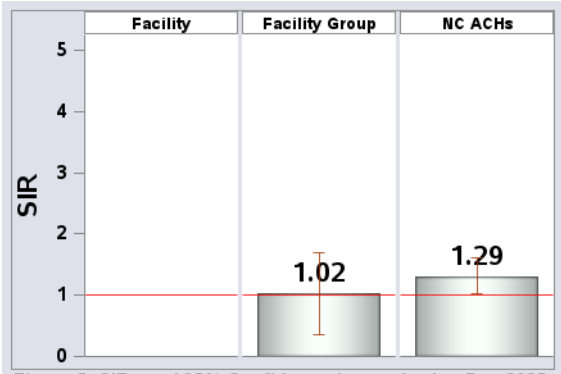


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

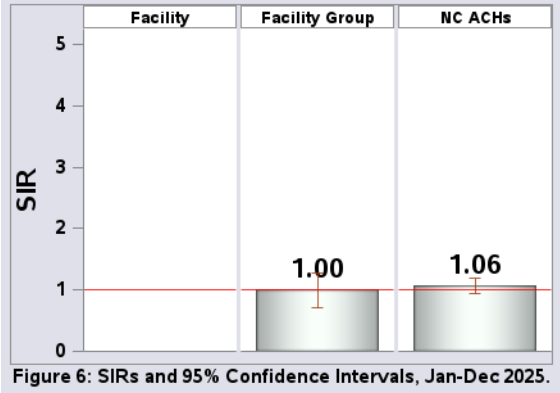


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

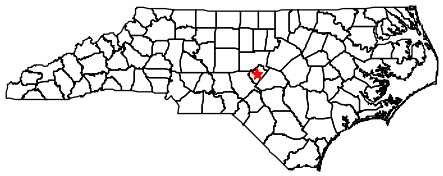
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Central Carolina Hospital, Sanford, Lee County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	2,756
Patient Days in 2025:	9,292
Total Number of Beds:	59
Number of ICU Beds:	0
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	1.69

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

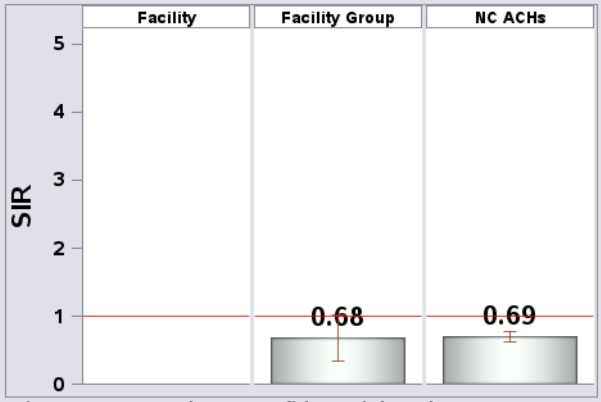


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

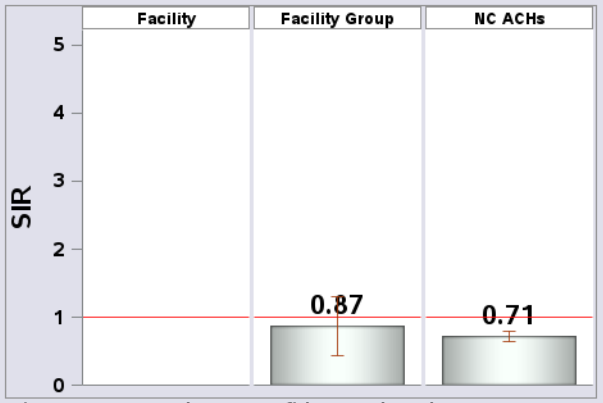


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

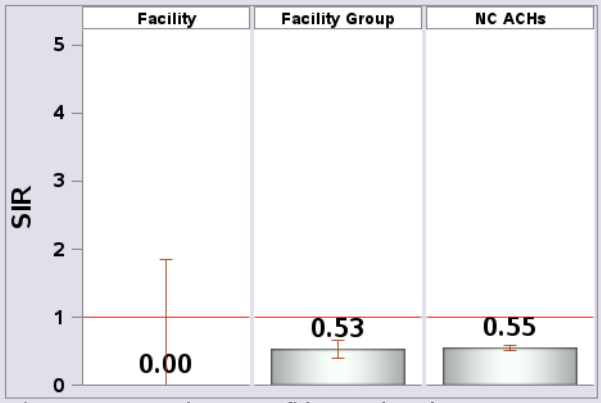


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**1.6**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Central Carolina Hospital, Sanford, Lee County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

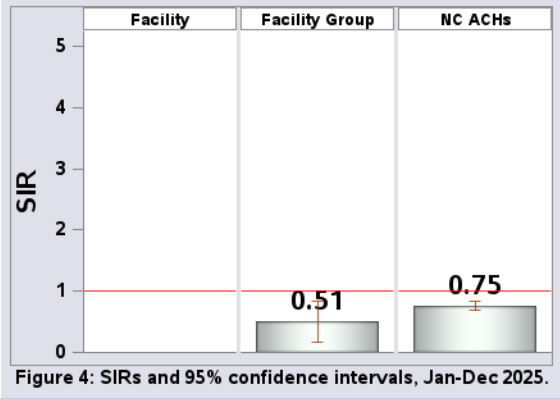


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

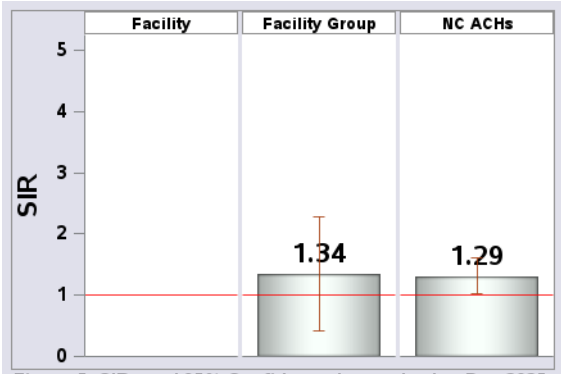


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

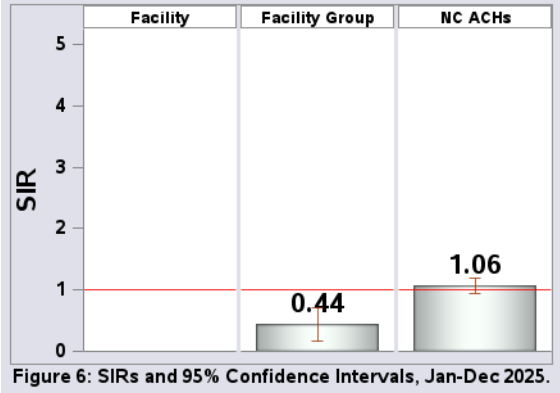


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

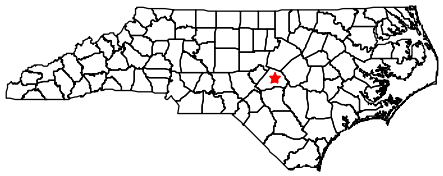
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Central Harnett Hospital, Lillington, Harnett County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	2,060
Patient Days in 2025:	7,827
Total Number of Beds:	44
Number of ICU Beds:	8
FTE* Infection Preventionists:	0.50
Number of FTEs* per 100 beds:	1.14

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

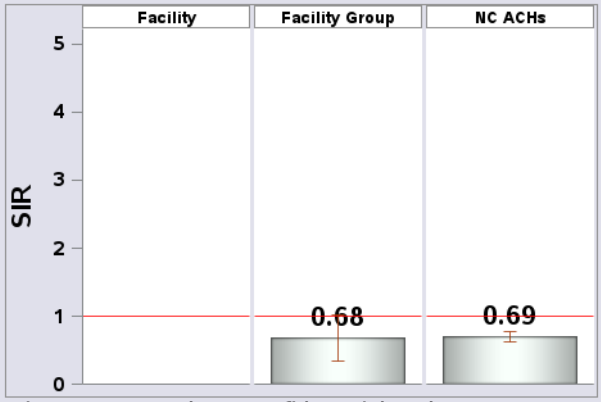


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	1	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

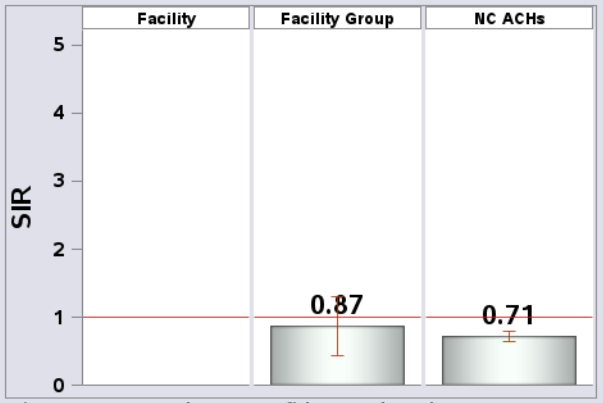


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

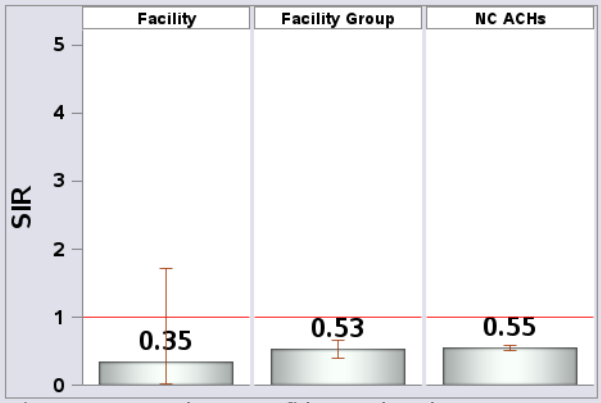


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**2.9**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Central Harnett Hospital, Lillington, Harnett County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

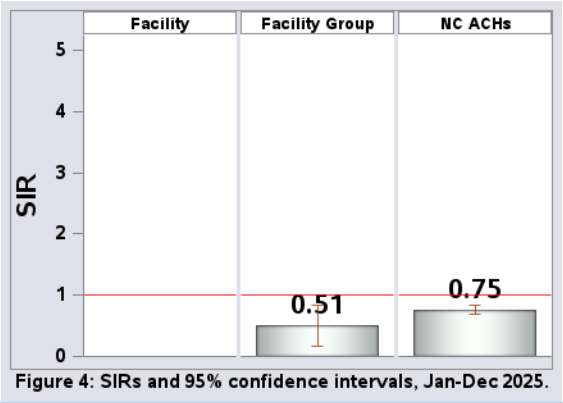


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.

Note: SIR not calculated if <50 central line days or <1 predicted infection.

Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?

No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Surgical Site Infections (SSI) after Colon Surgeries

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

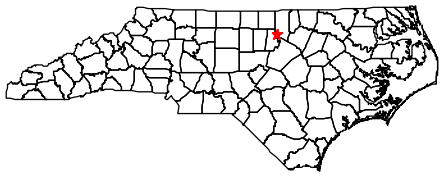
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Central Regional Hospital, Butner, Granville County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Specialty Acute Care Hospital
Medical Affiliation:	Graduate
Admissions in 2025:	443
Patient Days in 2025:	91,651
Total Number of Beds:	368
Number of ICU Beds:	0
FTE* Infection Preventionists:	2.00
Number of FTEs* per 100 beds:	0.54

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

Note from N.C. Division of Public Health: This facility did not have locations required to report CAUTI during this time period

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Note from N.C. Division of Public Health: This facility did not have locations required to report MRSA during this time period

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

Note from N.C. Division of Public Health: This facility did not have locations required to report CDI during this time period

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Central Regional Hospital, Butner, Granville County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

Note from N.C. Division of Public Health: This facility did not have locations required to report CLABSI during this time period

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from N.C. Division of Public Health: This facility did not have locations required to report SSI during this time period

Surgical Site Infections (SSI) after Colon Surgeries

Note from N.C. Division of Public Health: This facility did not have locations required to report SSI during this time period

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Cherry Hospital, Goldsboro, Wayne County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Specialty Acute Care Hospital
Medical Affiliation:	No
Admissions in 2025:	411
Patient Days in 2025:	54,647
Total Number of Beds:	259
Number of ICU Beds:	0
FTE* Infection Preventionists:	2.00
Number of FTEs* per 100 beds:	0.77

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

Note from N.C. Division of Public Health: This facility did not have locations required to report CAUTI during this time period

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Note from N.C. Division of Public Health: This facility did not have locations required to report MRSA during this time period

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

Note from N.C. Division of Public Health: This facility did not have locations required to report CDI during this time period

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Cherry Hospital, Goldsboro, Wayne County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

Note from N.C. Division of Public Health: This facility did not have locations required to report CLABSI during this time period

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from N.C. Division of Public Health: This facility did not have locations required to report SSI during this time period

Surgical Site Infections (SSI) after Colon Surgeries

Note from N.C. Division of Public Health: This facility did not have locations required to report SSI during this time period

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
CHS Pineville Rehabilitation, Charlotte, Mecklenburg County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Inpatient Rehabilitation Facility
Admissions in 2025:	710
Patient Days in 2025:	9,658
Total Number of Beds:	29
FTE* Infection Preventionists:	0.20
Number of FTEs* per 100 beds:	0.69

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

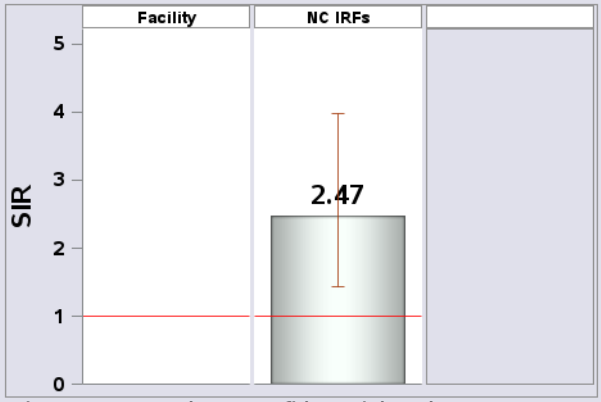


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
All reporting units	1	Less than 1.0	No Conclusion

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Note from NCDHHS Division of Public Health: MRSA is not reportable at this facility type after 2018Q3

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

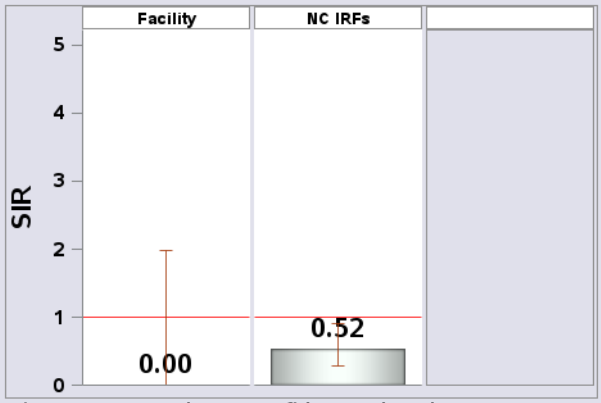


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	0	1.5	Same

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
CHS Pineville Rehabilitation, Charlotte, Mecklenburg County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

Note from NCDHHS Division of Public Health: CLABSIs are not reportable at this facility type

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from NCDHHS Division of Public Health: SSIs are not reportable at this facility type

Surgical Site Infections (SSI) after Colon Surgeries

Note from NCDHHS Division of Public Health: SSIs are not reportable at this facility type

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

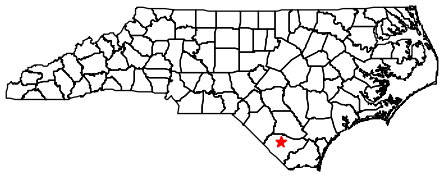
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Columbus Regional Healthcare System, Whiteville, Columbus County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	4,614
Patient Days in 2025:	21,337
Total Number of Beds:	77
Number of ICU Beds:	9
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	1.30

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

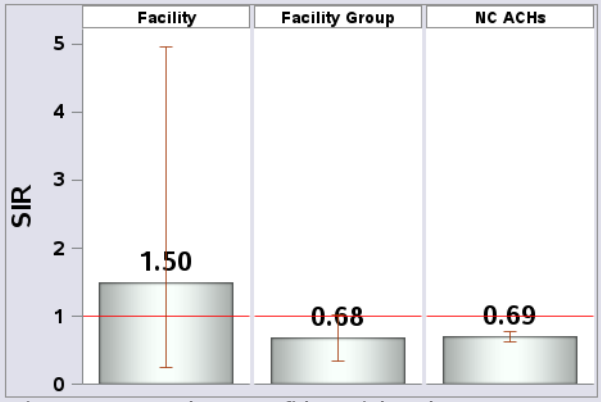


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	2	Less than 1.0	No Conclusion
All reporting units	**2**	**1.3**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

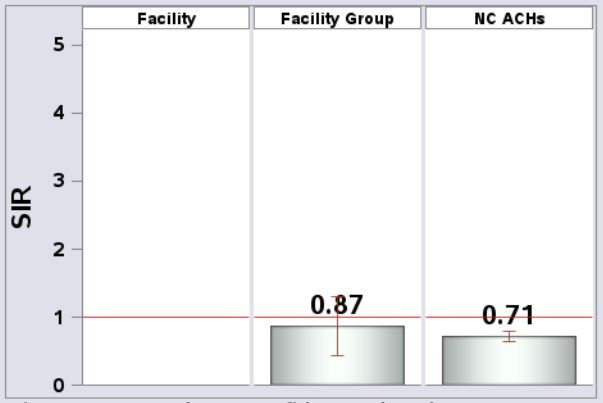


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

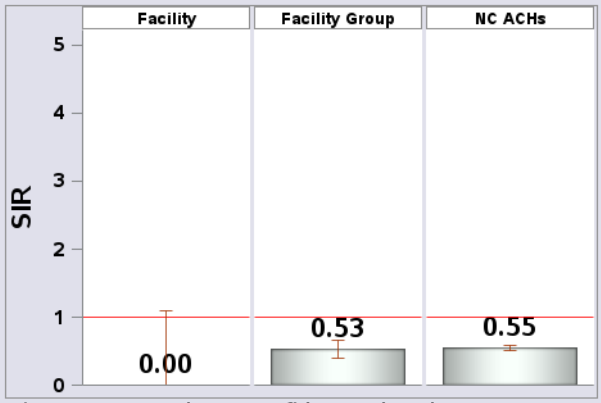


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**2.7**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Columbus Regional Healthcare System, Whiteville, Columbus County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

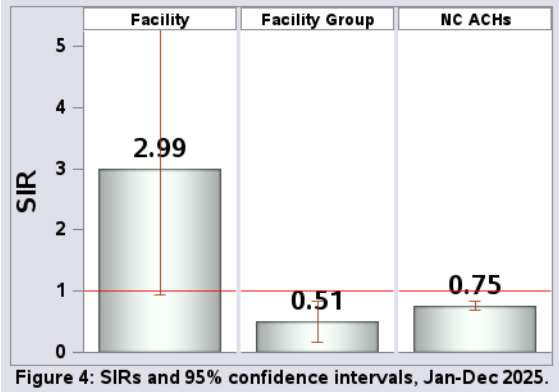


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	3	Less than 1.0	No Conclusion
Adult/Ped Wards	1	Less than 1.0	No Conclusion
All reporting units	**4**	**1.3**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

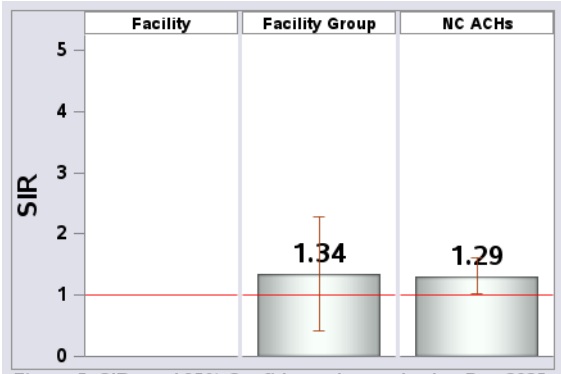


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

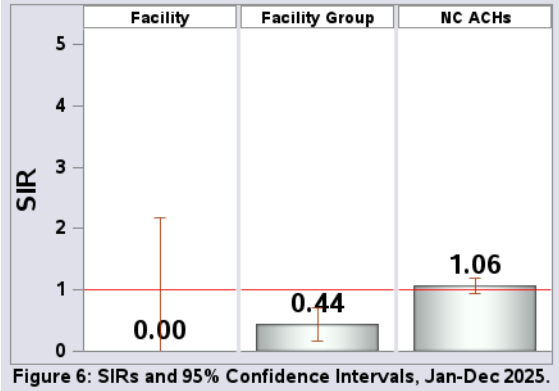


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**1.4**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
DLP - Harris Regional Hospital, Sylva, Jackson County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	3,280
Patient Days in 2025:	11,824
Total Number of Beds:	72
Number of ICU Beds:	8
FTE* Infection Preventionists:	0.80
Number of FTEs* per 100 beds:	1.11

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

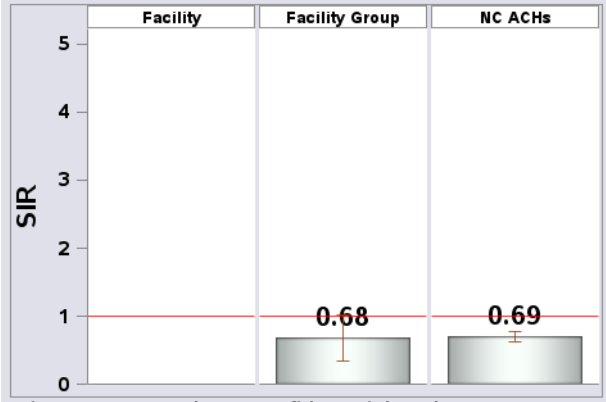


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

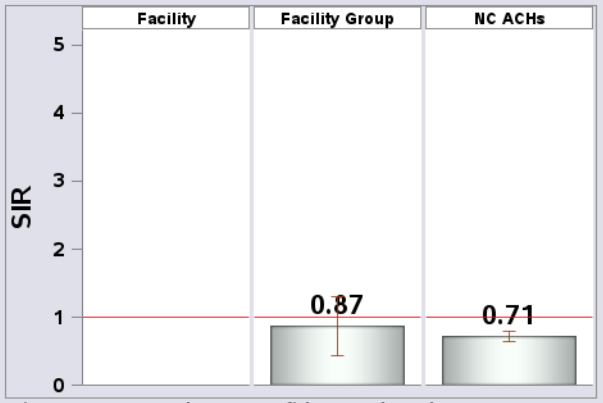


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

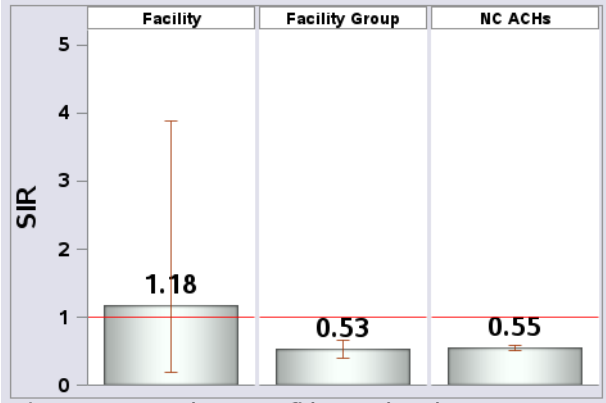


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**1.7**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
DLP - Harris Regional Hospital, Sylva, Jackson County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

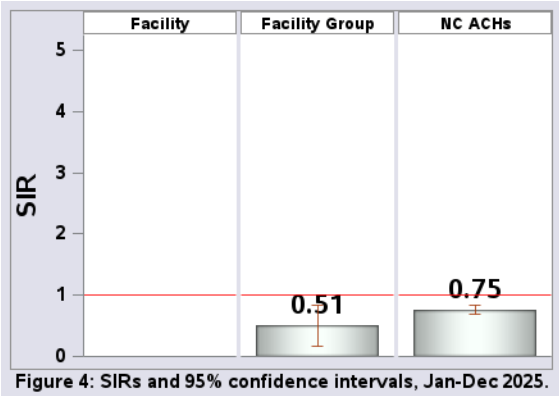


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

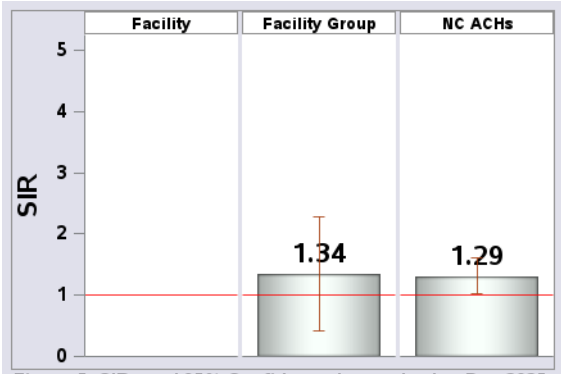


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

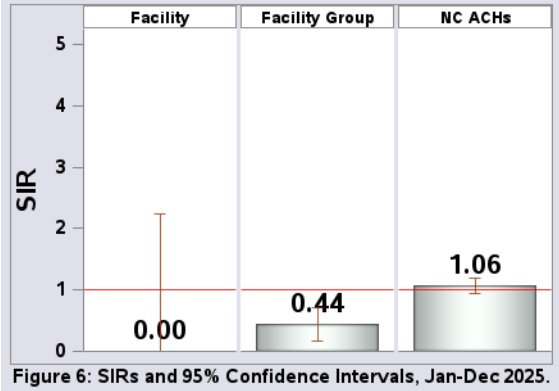


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**1.3**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Duke Health Lake Norman Hospital, Mooresville, Iredell County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	3,295
Patient Days in 2025:	11,034
Total Number of Beds:	123
Number of ICU Beds:	12
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	0.81

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

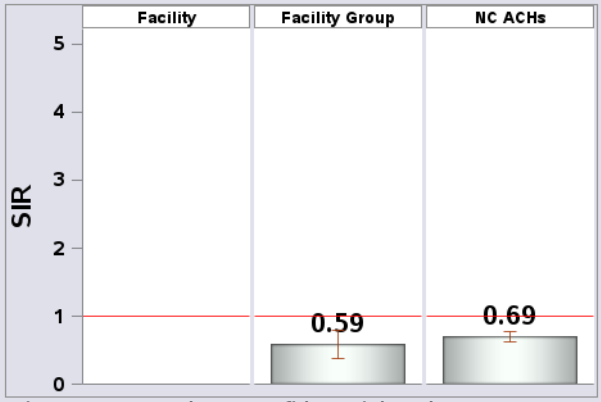


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

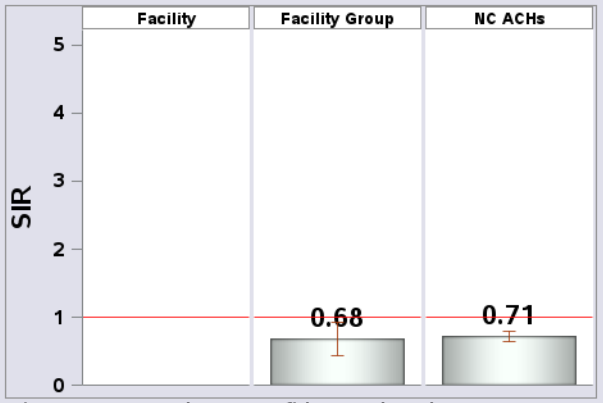


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

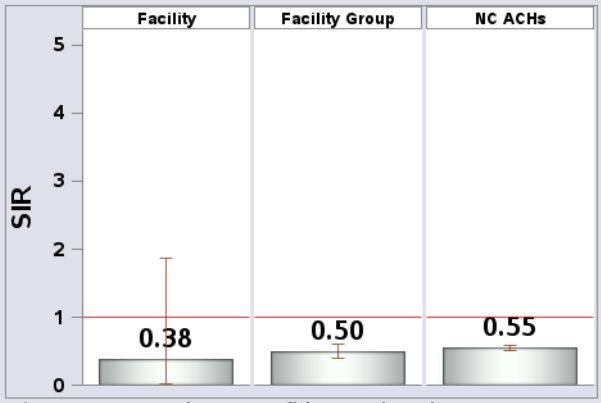


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**2.6**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Duke Health Lake Norman Hospital, Mooresville, Iredell County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

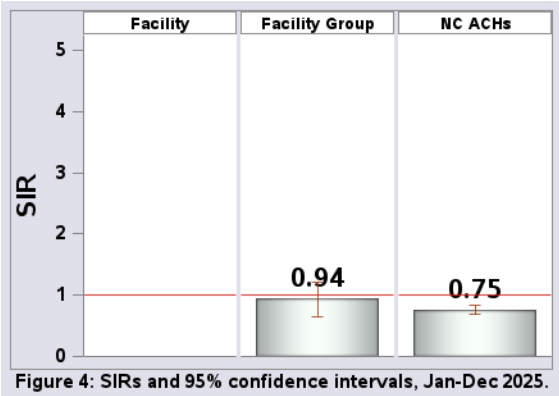


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

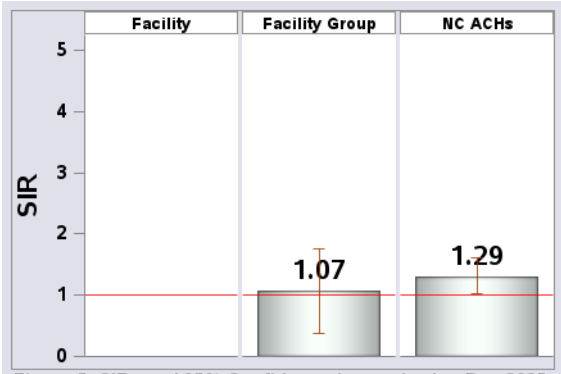


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

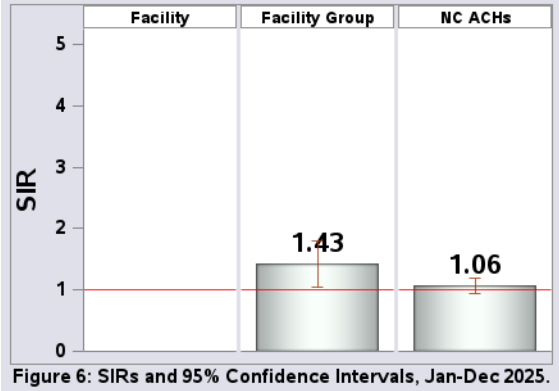


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

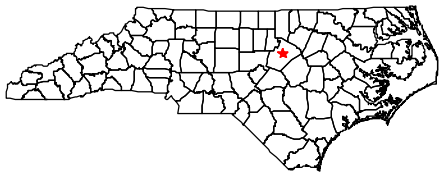
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Duke Raleigh Hospital, Raleigh, Wake County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	18,373
Patient Days in 2025:	69,990
Total Number of Beds:	204
Number of ICU Beds:	18
FTE* Infection Preventionists:	3.00
Number of FTEs* per 100 beds:	1.47

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

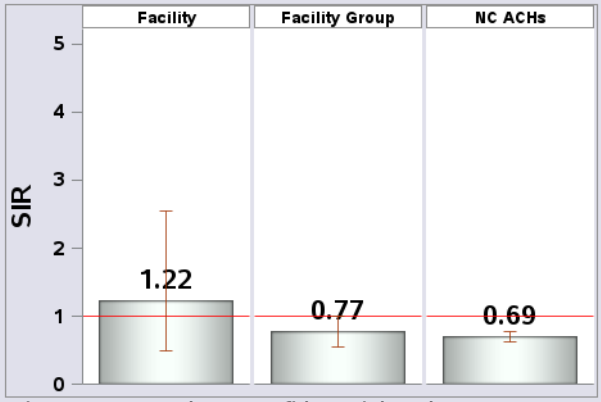


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	2	1.9	Same
Adult/Ped Wards	4	3.0	Same
All reporting units	**6**	**4.9**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**3.9**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

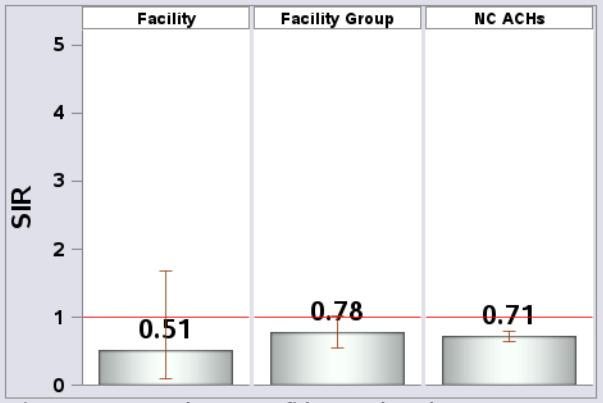


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

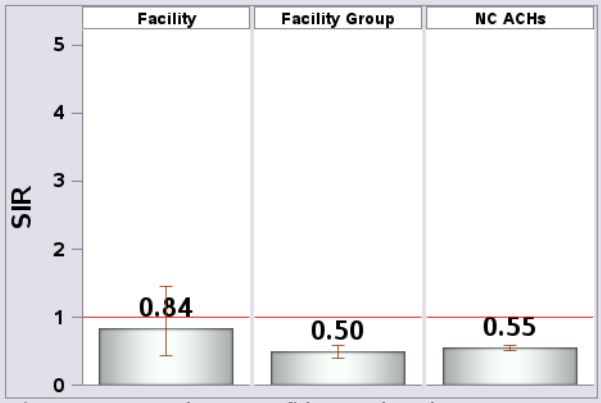


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**11**	**13**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
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North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Duke Raleigh Hospital, Raleigh, Wake County

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Central Line-Associated Bloodstream Infections (CLABSI)

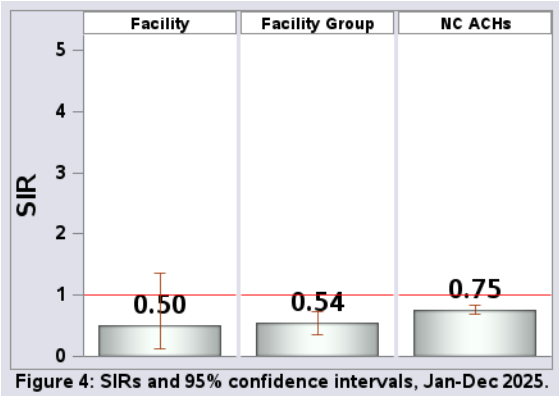


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	2	1.9	Same
Adult/Ped Wards	1	4.1	Same
All reporting units	**3**	**6.0**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

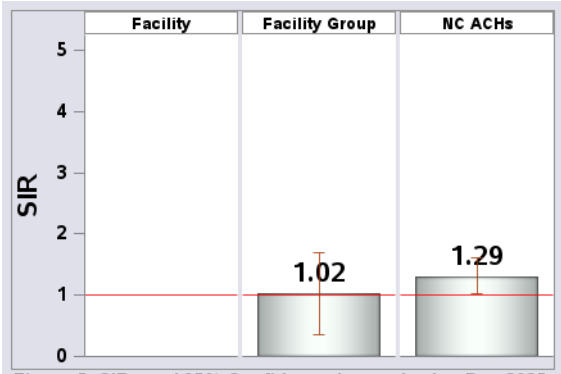


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

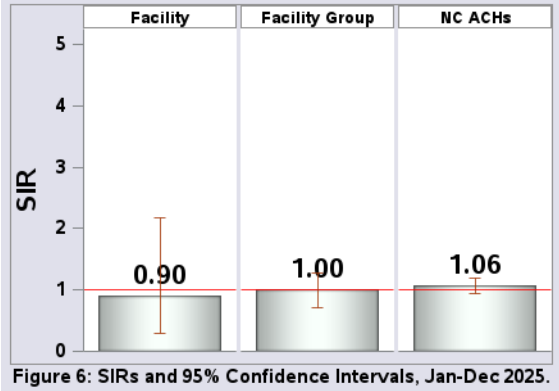


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**4**	**4.4**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

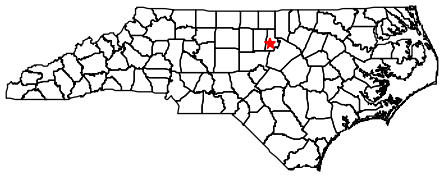
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Duke Regional Hospital, Durham, Durham County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	22,875
Patient Days in 2025:	107,659
Total Number of Beds:	388
Number of ICU Beds:	17
FTE* Infection Preventionists:	4.00
Number of FTEs* per 100 beds:	1.03

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

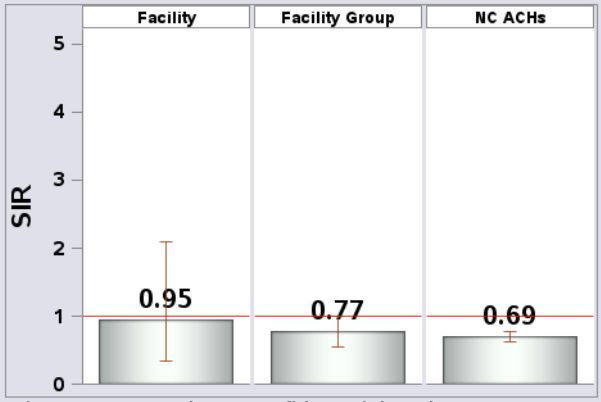


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	1	2.1	Same
Adult/Ped Wards	4	3.2	Same
All reporting units	**5**	**5.3**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**5**	**5.1**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

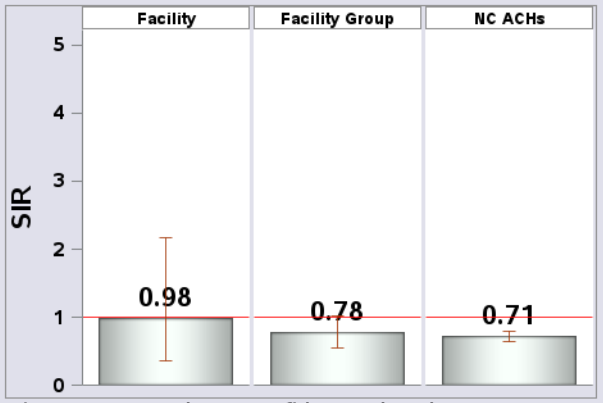


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

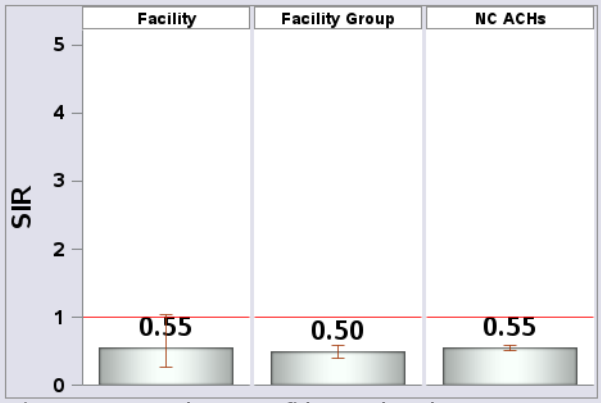


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**8**	**15**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Duke Regional Hospital, Durham, Durham County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

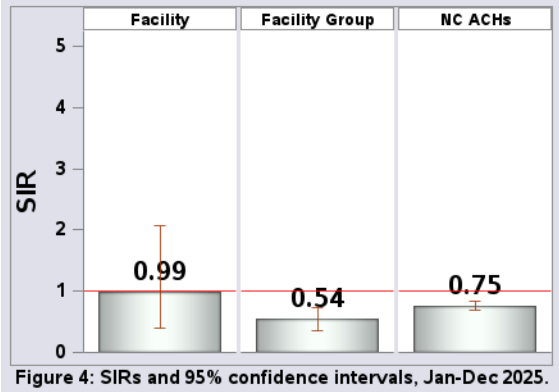


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	3	2.4	Same
Adult/Ped Wards	3	3.6	Same
All reporting units	**6**	**6.0**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

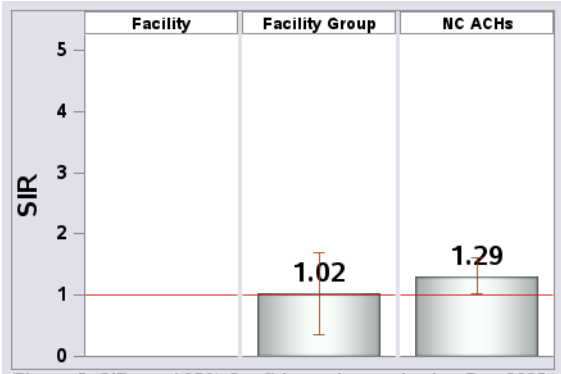


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

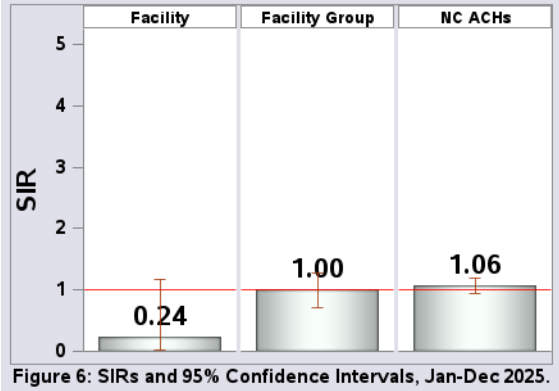


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**4.2**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

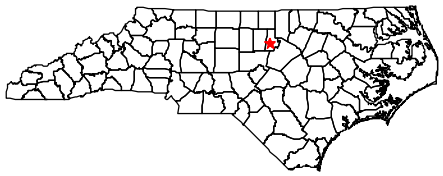
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Duke University Hospital, Durham, Durham County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	53,233
Patient Days in 2025:	359,162
Total Number of Beds:	1,106
Number of ICU Beds:	264
FTE* Infection Preventionists:	12.3
Number of FTEs* per 100 beds:	1.11

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

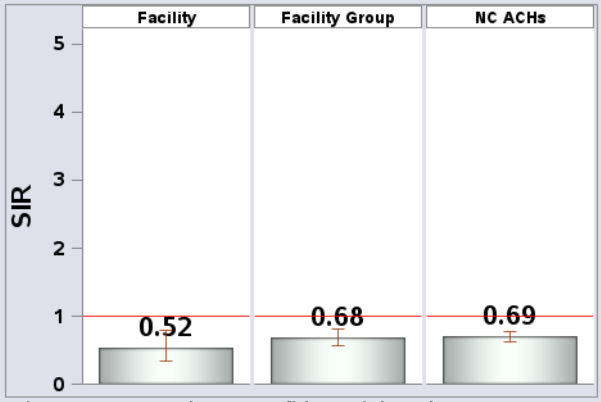


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	16	27	Better
Adult/Ped Wards	5	13	Better
All reporting units	**21**	**40**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**30**	**39**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

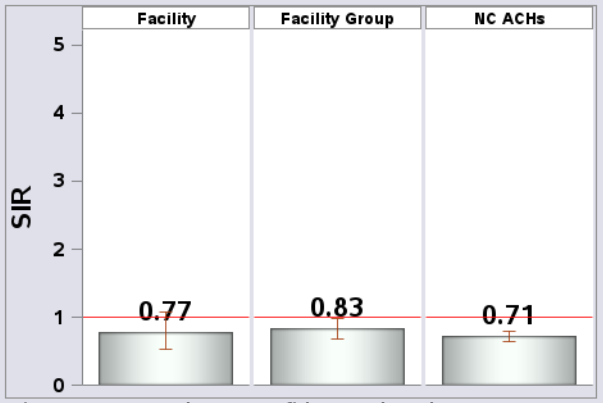


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

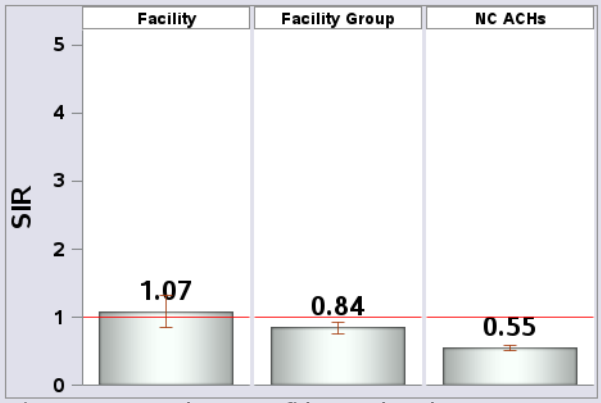


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**79**	**74**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

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N.C. HAI 2025 Q4 Report

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Data from January 1 - December 31, 2025
Duke University Hospital, Durham, Durham County

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Central Line-Associated Bloodstream Infections (CLABSI)

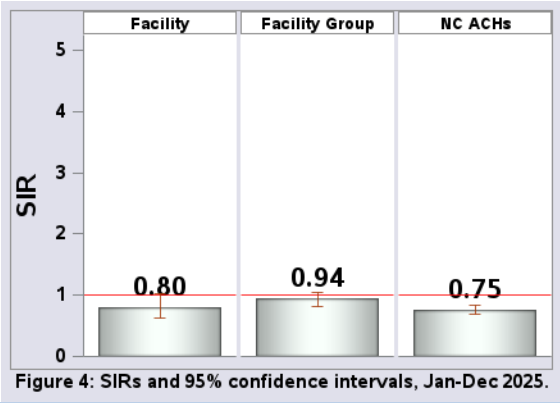

Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	35	52	Better
Adult/Ped Wards	23	19	Same
Neonatal Units	4	6.5	Same
All reporting units	**62**	**77**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**3**	**2.8**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

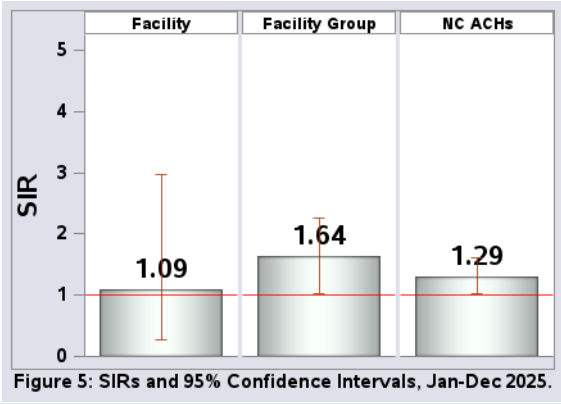

Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

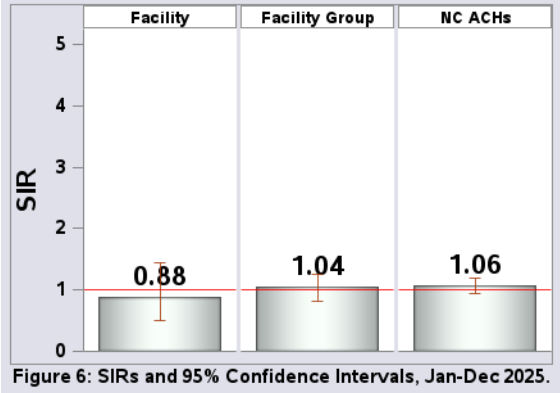

Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**14**	**16**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
ECU Health Beaufort Hospital, Washington, Beaufort County

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2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	5,476
Patient Days in 2025:	16,688
Total Number of Beds:	76
Number of ICU Beds:	11
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	1.32

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

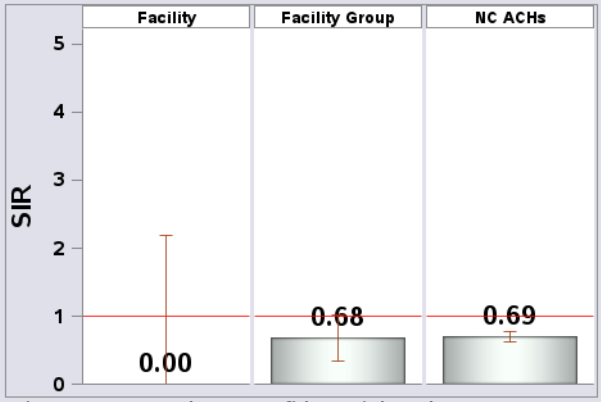

Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**1.4**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**1.2**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

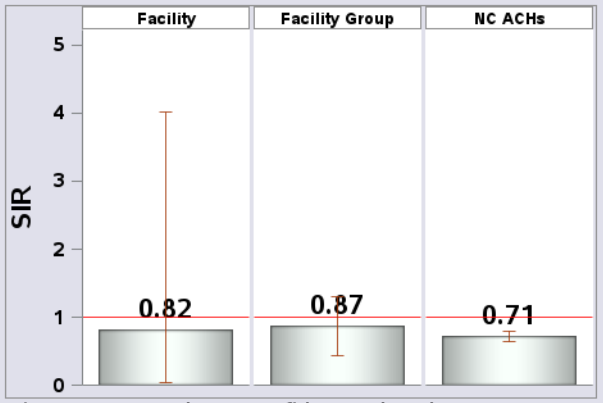

Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

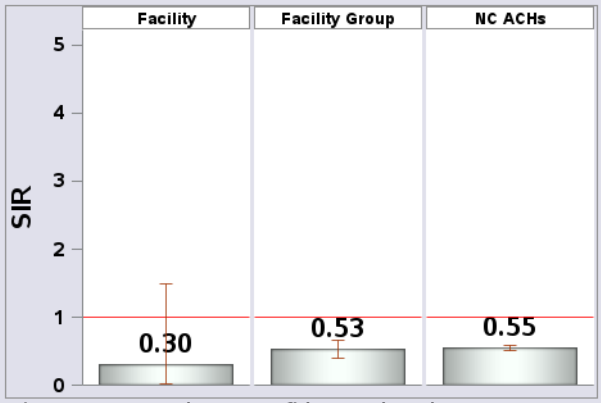

Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**3.3**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
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North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
ECU Health Beaufort Hospital, Washington, Beaufort County

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Central Line-Associated Bloodstream Infections (CLABSI)

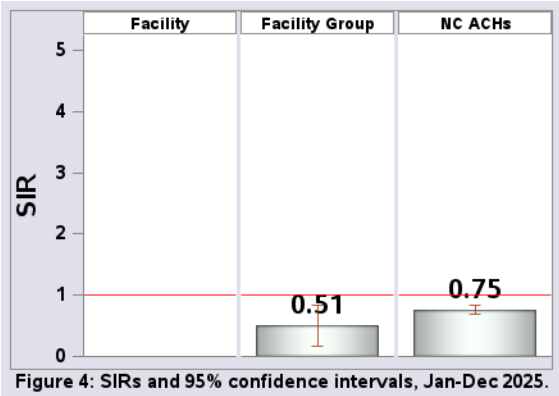


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

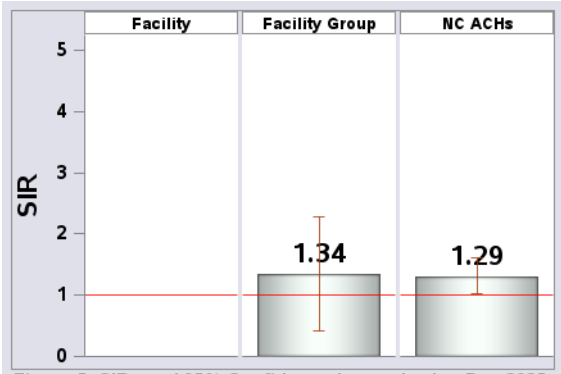


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

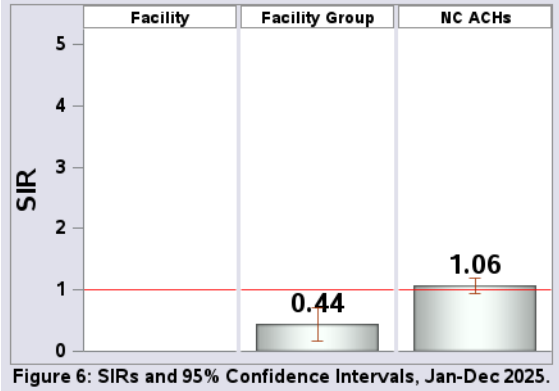


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
ECU Health Duplin Hospital, Kenansville, Duplin County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	3,838
Patient Days in 2025:	12,001
Total Number of Beds:	56
Number of ICU Beds:	9
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	1.79

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

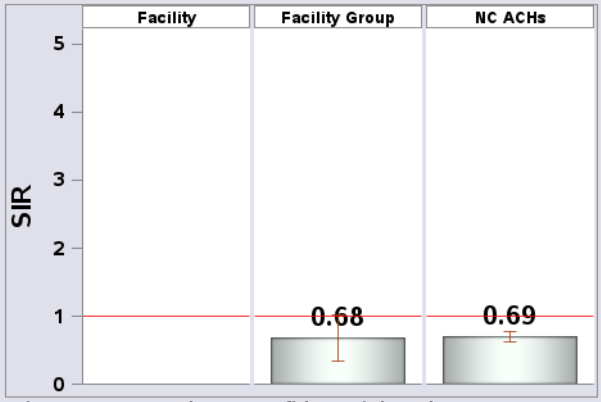


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

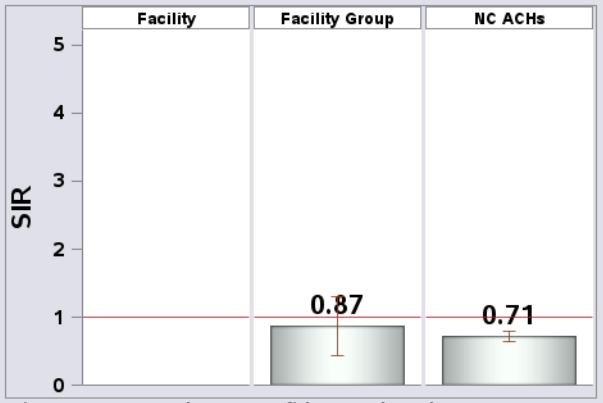
Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison



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Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

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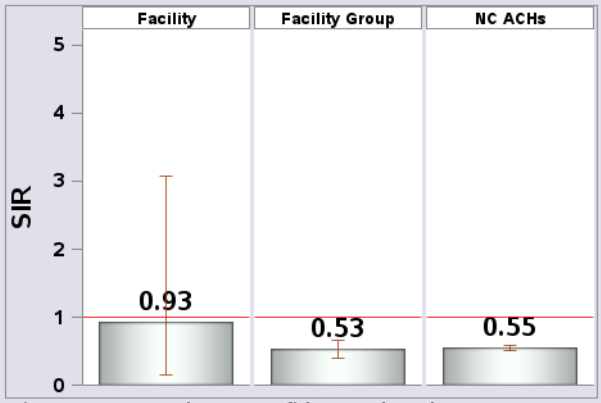

Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**2.2**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
ECU Health Duplin Hospital, Kenansville, Duplin County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

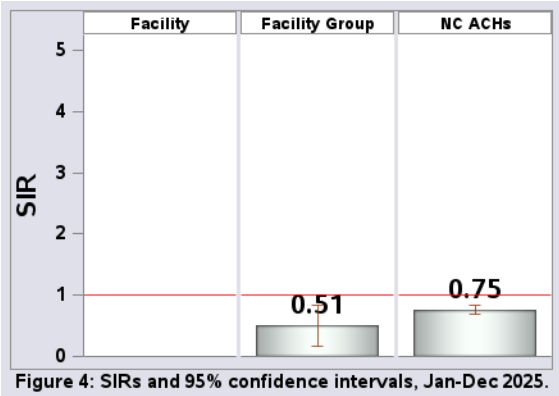

Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

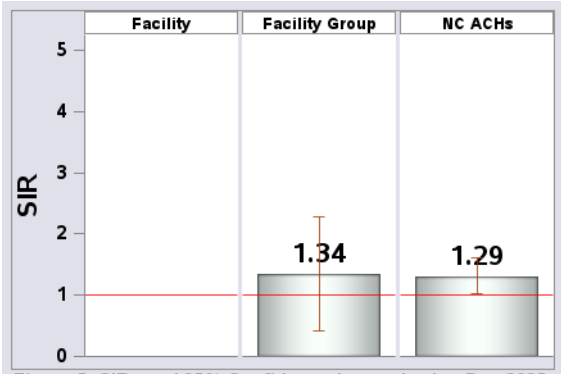

Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

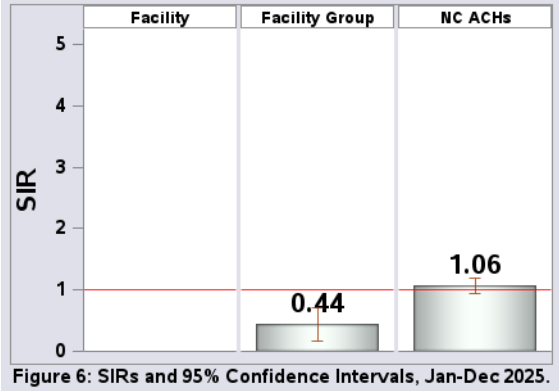

Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
ECU Health Edgecombe Hospital, Tarboro, Edgecombe County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	3,216
Patient Days in 2025:	12,817
Total Number of Beds:	117
Number of ICU Beds:	8
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	0.85

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

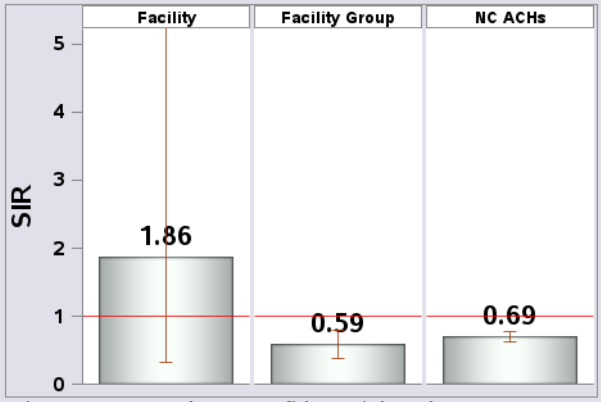

Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	2	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**2**	**1.1**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

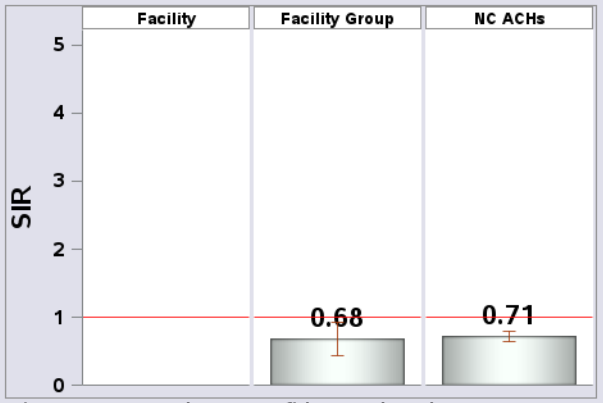

Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

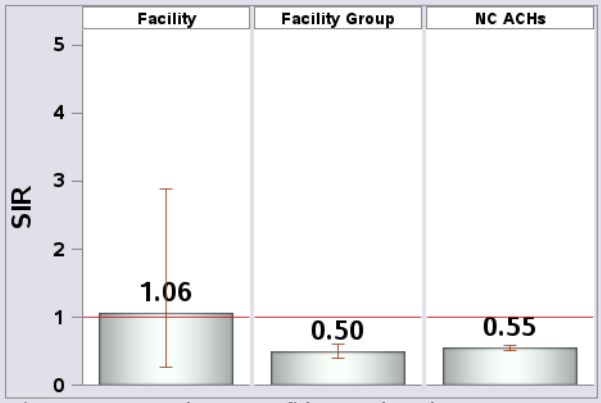

Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**3**	**2.8**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
ECU Health Edgecombe Hospital, Tarboro, Edgecombe County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

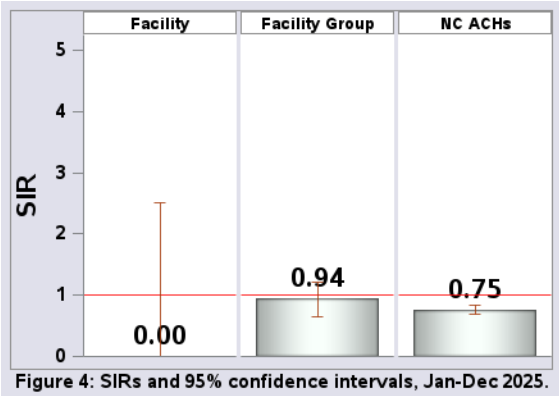

Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**1.2**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

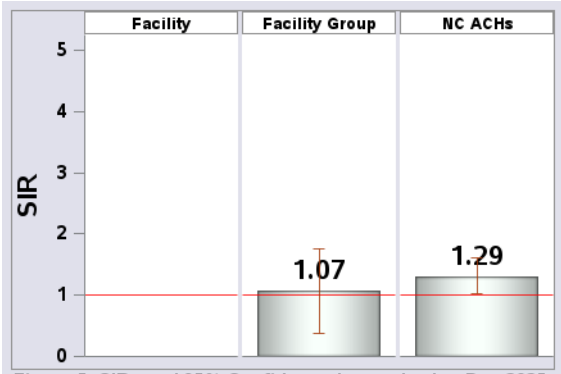

Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

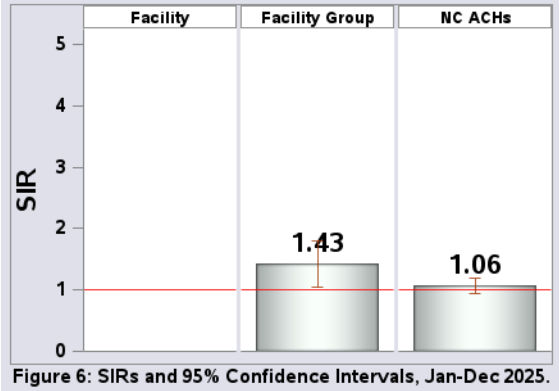

Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
ECU Health Medical Center, Greenville, Pitt County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	44,213
Patient Days in 2025:	291,531
Total Number of Beds:	974
Number of ICU Beds:	162
FTE* Infection Preventionists:	8.50
Number of FTEs* per 100 beds:	0.87

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

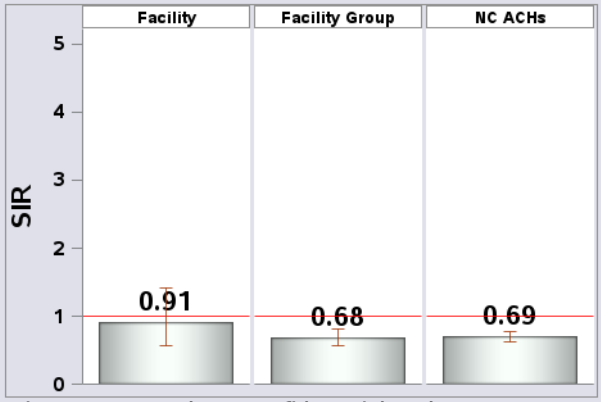

Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	7	14	Better
Adult/Ped Wards	11	5.7	Worse
All reporting units	**18**	**20**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**26**	**25**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

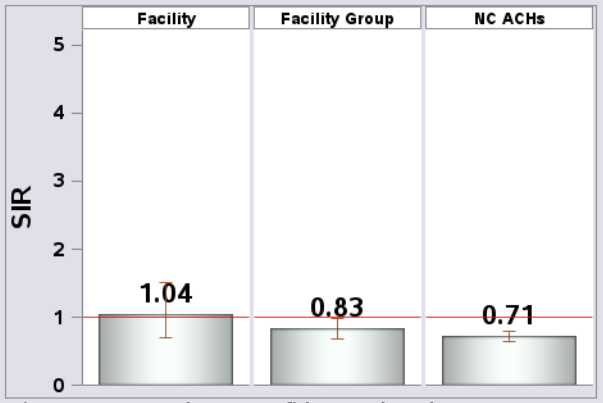

Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

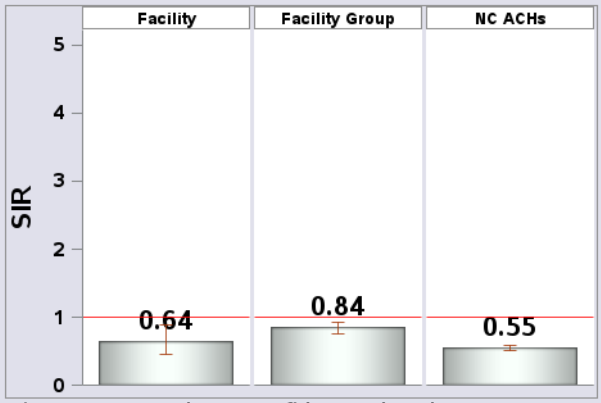

Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**35**	**55**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
ECU Health Medical Center, Greenville, Pitt County

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Central Line-Associated Bloodstream Infections (CLABSI)

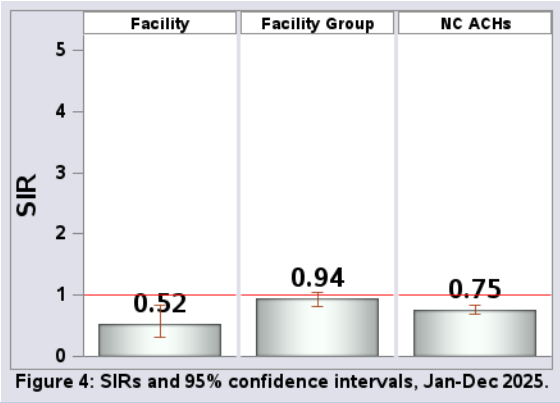

Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	9	20	Better
Adult/Ped Wards	4	7.5	Same
Neonatal Units	3	3.0	Same
All reporting units	**16**	**31**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**8**	**3.3**	**Worse**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
× Worse: More infections than predicted by the national baseline experience

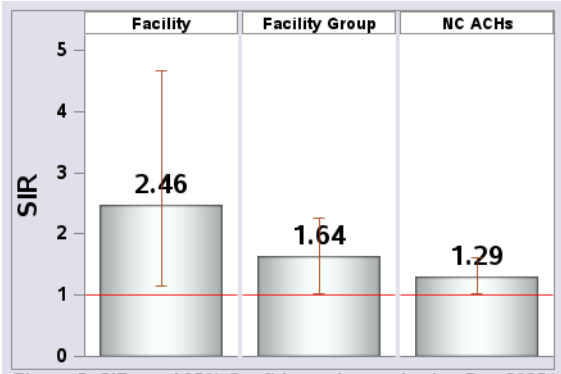

Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

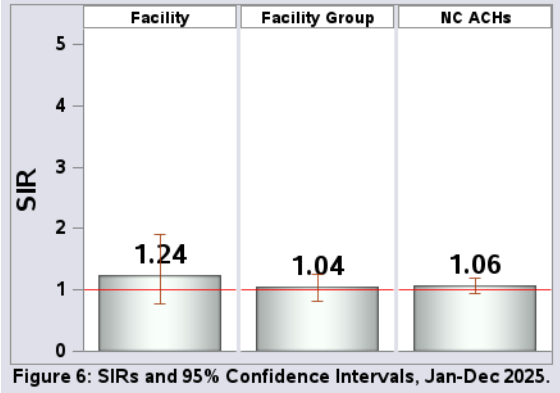

Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**19**	**15**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
ECU Health North Hospital, Roanoke Rapids, Halifax County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	5,227
Patient Days in 2025:	23,474
Total Number of Beds:	82
Number of ICU Beds:	8
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	1.22

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

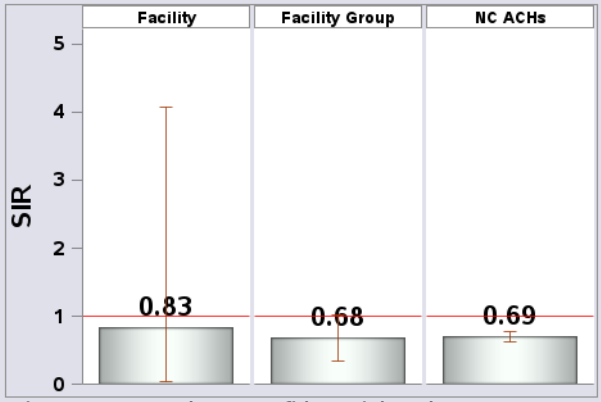

Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	1	Less than 1.0	No Conclusion
All reporting units	**1**	**1.2**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**1.2**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

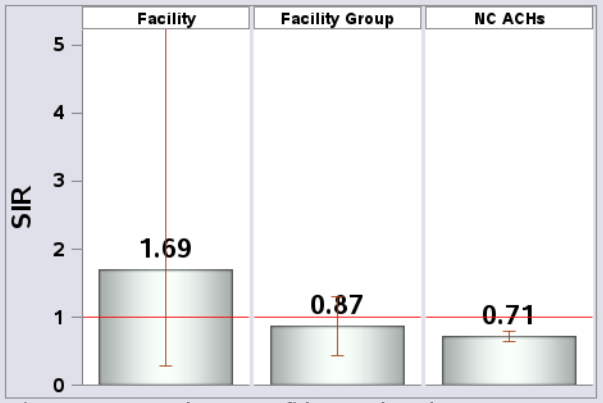

Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

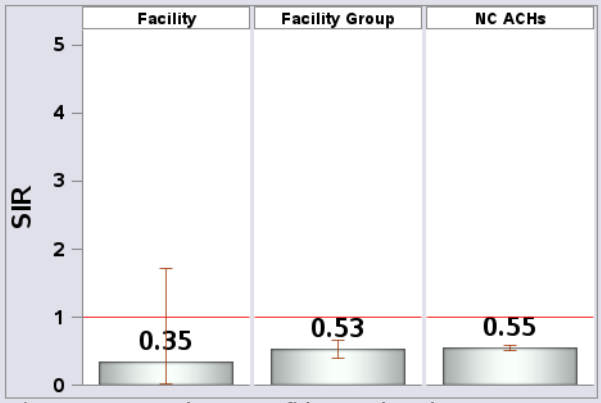

Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**2.9**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

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N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
ECU Health North Hospital, Roanoke Rapids, Halifax County

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Central Line-Associated Bloodstream Infections (CLABSI)

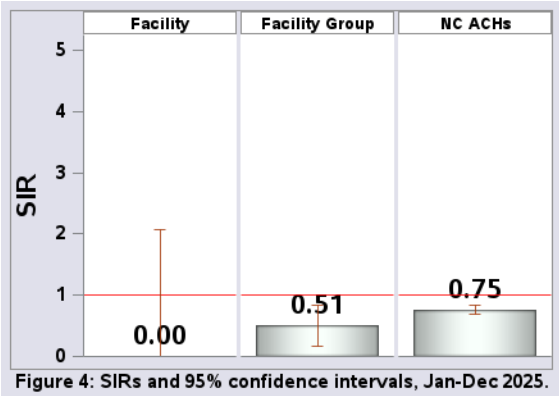

Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**1.4**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

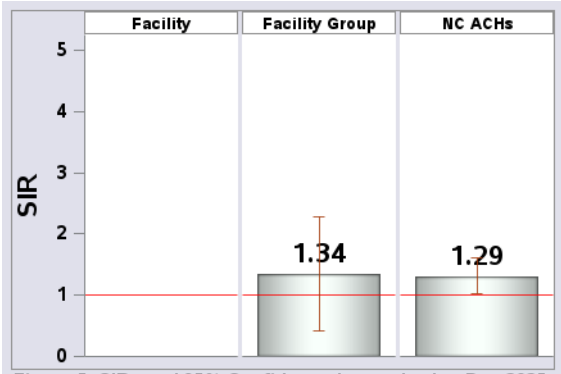

Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

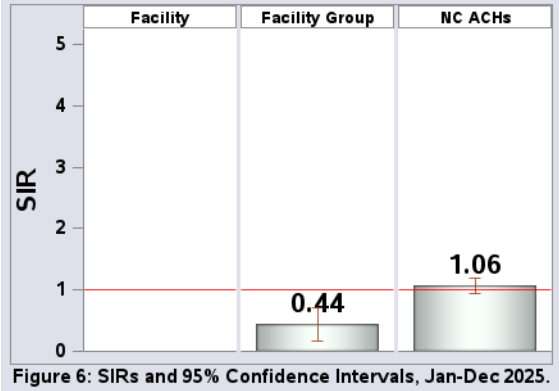

Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
ECU Health Roanoke-Chowan Hospital, Ahoskie, Hertford County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	4,666
Patient Days in 2025:	21,759
Total Number of Beds:	114
Number of ICU Beds:	10
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	0.88

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

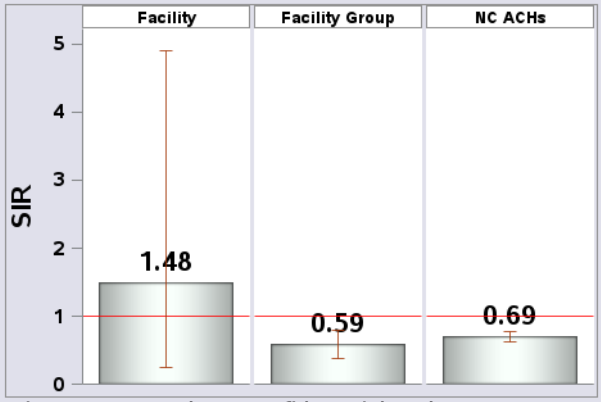

Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	1	Less than 1.0	No Conclusion
Adult/Ped Wards	1	Less than 1.0	No Conclusion
All reporting units	**2**	**1.3**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

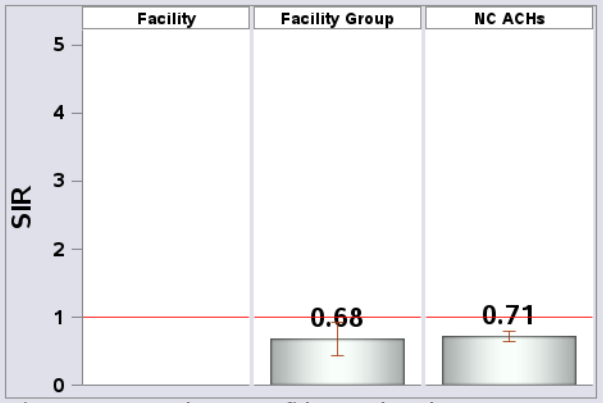

Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

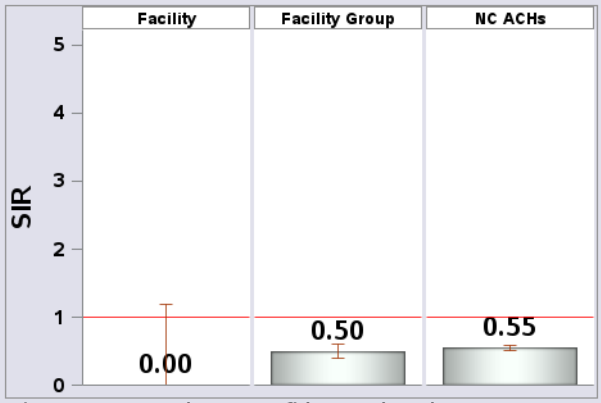

Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**2.5**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
ECU Health Roanoke-Chowan Hospital, Ahoskie, Hertford County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

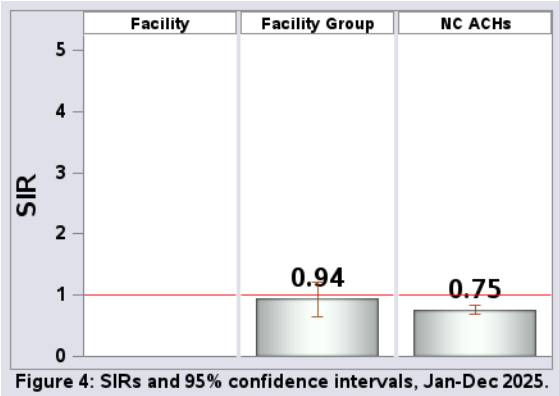

Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

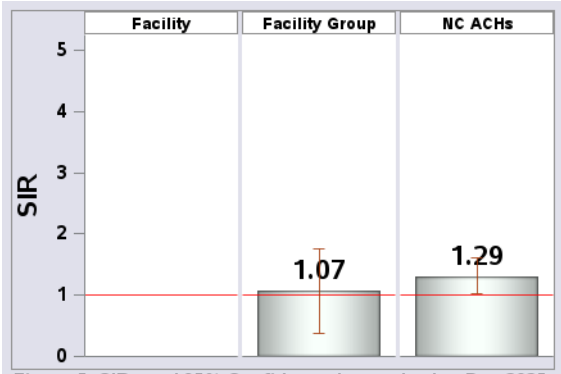

Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

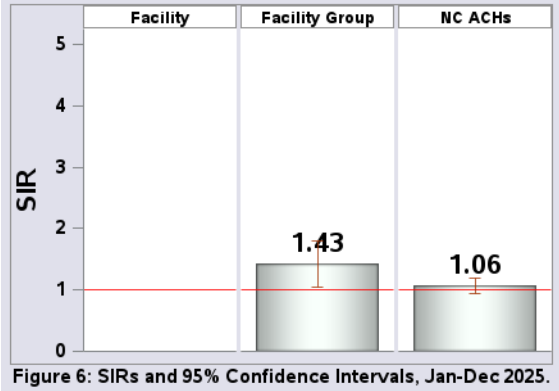

Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
FirstHealth Moore Regional Hospital, Pinehurst, Moore County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	23,065
Patient Days in 2025:	100,233
Total Number of Beds:	362
Number of ICU Beds:	23
FTE* Infection Preventionists:	3.50
Number of FTEs* per 100 beds:	0.97

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

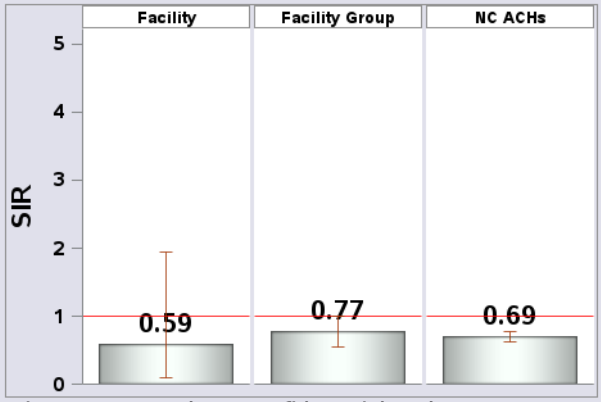

Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	2	2.8	Same
All reporting units	**2**	**3.4**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**5**	**5.5**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

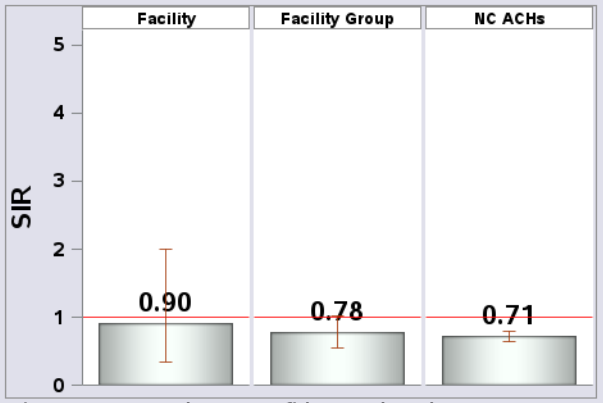

Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

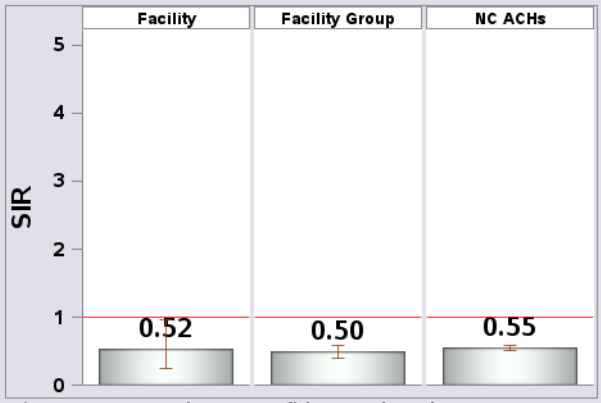

Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**9**	**17**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
FirstHealth Moore Regional Hospital, Pinehurst, Moore County

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Central Line-Associated Bloodstream Infections (CLABSI)

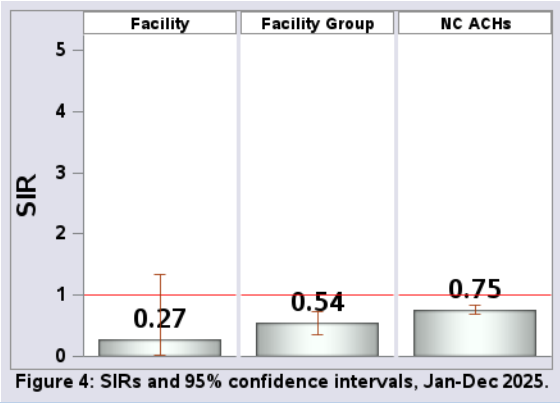

Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	1	2.6	Same
Neonatal Units	0	Less than 1.0	No Conclusion
All reporting units	**1**	**3.7**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**1.6**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

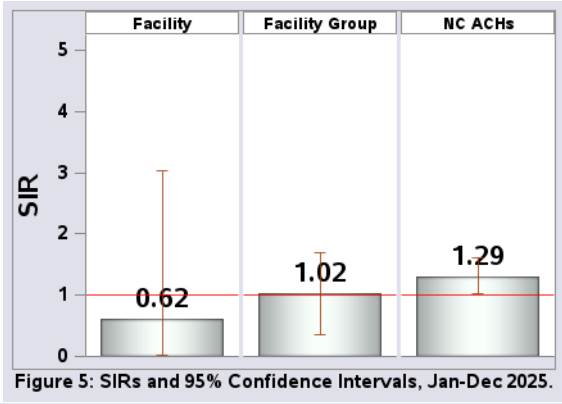

Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

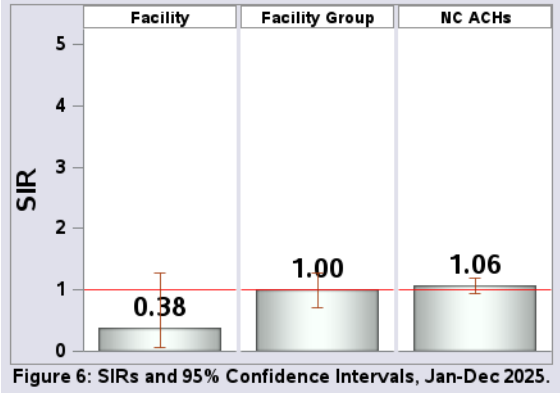

Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**5.2**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Firsthealth Moore Regional Hospital - Hoke Campus, Raeford, Hoke County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	845
Patient Days in 2025:	1,532
Total Number of Beds:	8
Number of ICU Beds:	0
FTE* Infection Preventionists:	0.20
Number of FTEs* per 100 beds:	2.50

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

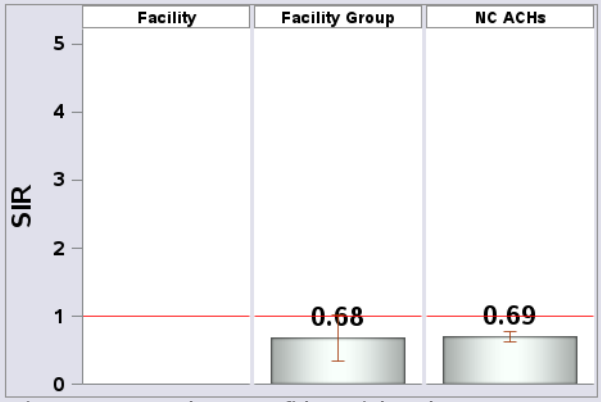

Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

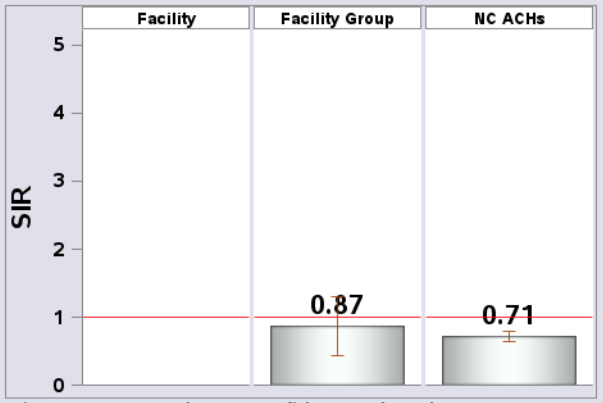

Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

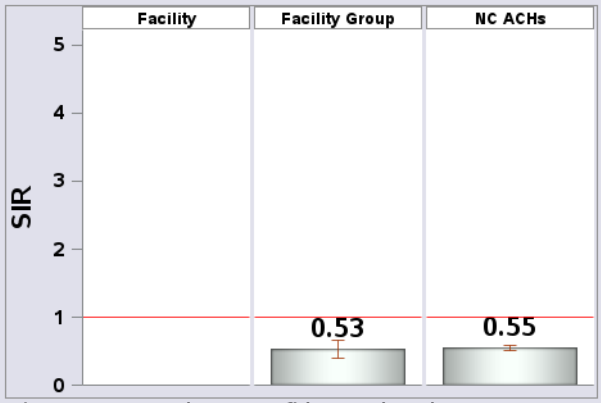

Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Firsthealth Moore Regional Hospital - Hoke Campus, Raeford, Hoke County

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Central Line-Associated Bloodstream Infections (CLABSI)

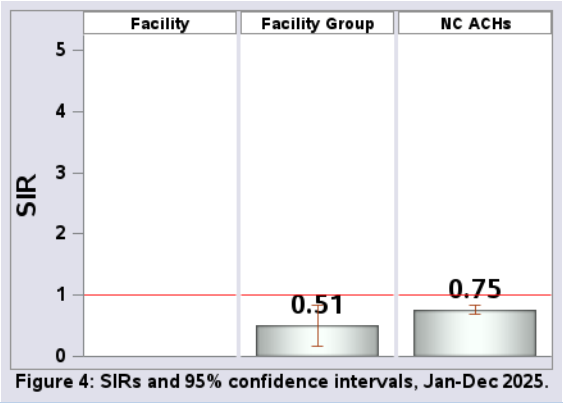


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Surgical Site Infections (SSI) after Colon Surgeries

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Firsthealth Moore Regional Hospital - Richmond Campus, Rockingham, Richmond County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	2,397
Patient Days in 2025:	6,901
Total Number of Beds:	79
Number of ICU Beds:	12
FTE* Infection Preventionists:	0.50
Number of FTEs* per 100 beds:	0.63

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

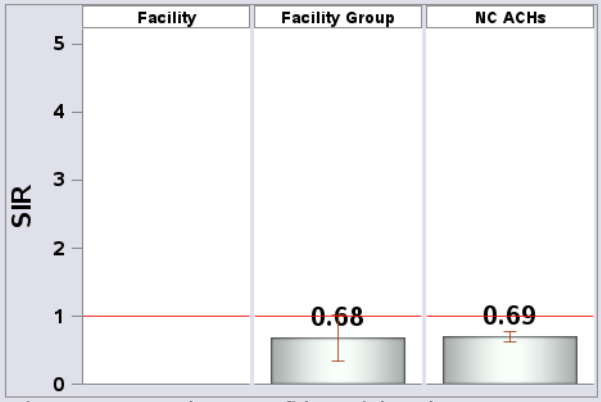


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

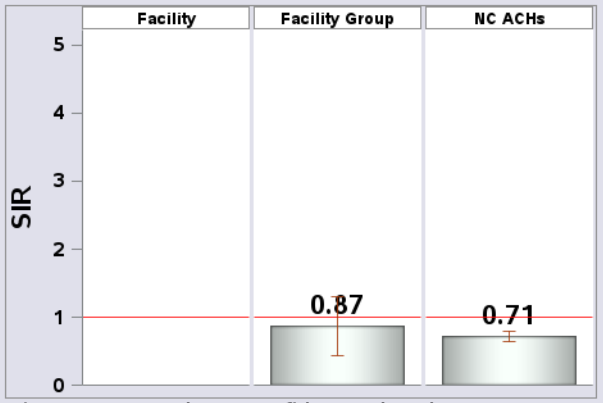


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

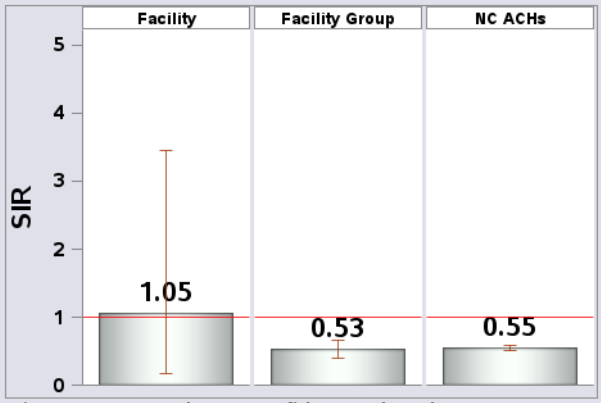


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**1.9**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Firsthealth Moore Regional Hospital - Richmond Campus, Rockingham, Richmond County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

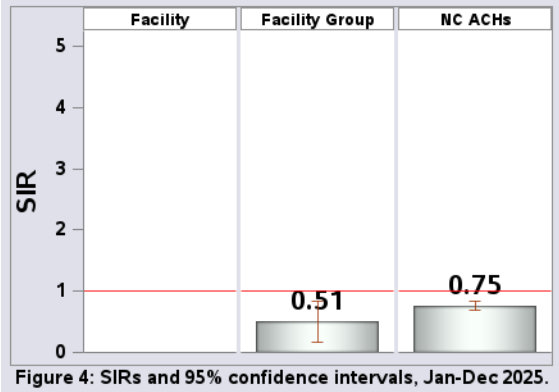


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

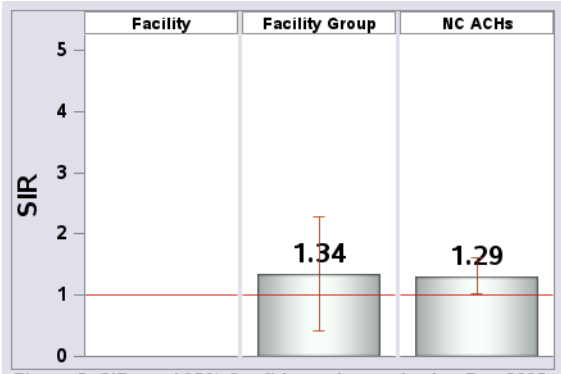


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

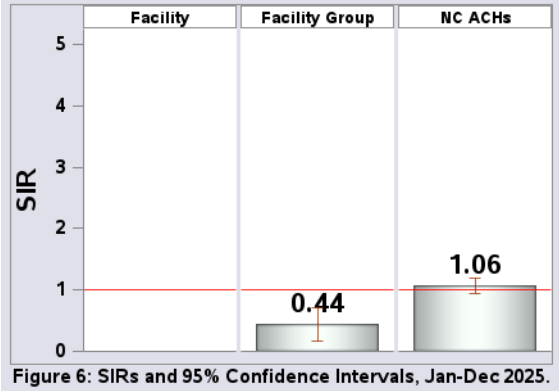


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

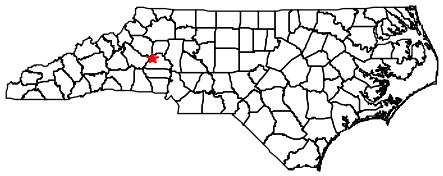
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Frye Regional Medical Center, Hickory, Catawba County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	9,822
Patient Days in 2025:	45,751
Total Number of Beds:	192
Number of ICU Beds:	24
FTE* Infection Preventionists:	1.50
Number of FTEs* per 100 beds:	0.78

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

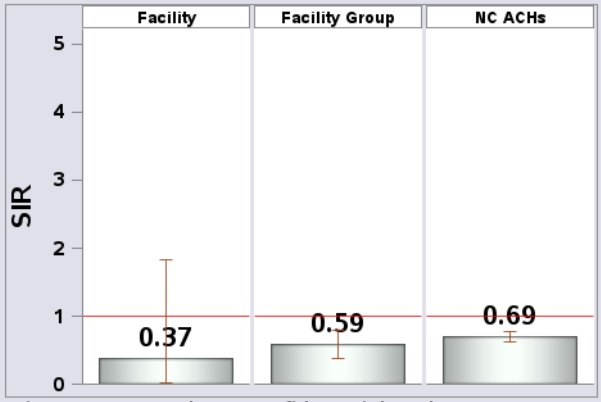


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	1.4	Same
Adult/Ped Wards	1	1.3	Same
All reporting units	**1**	**2.7**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**6**	**2.7**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

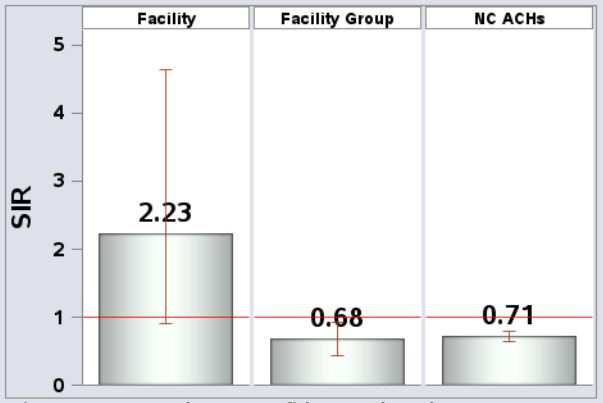


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

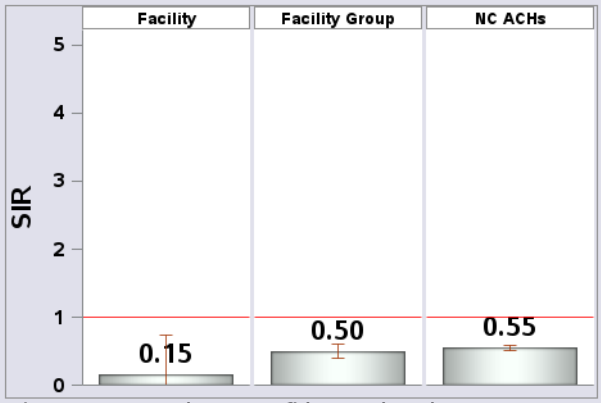


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**6.7**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Frye Regional Medical Center, Hickory, Catawba County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

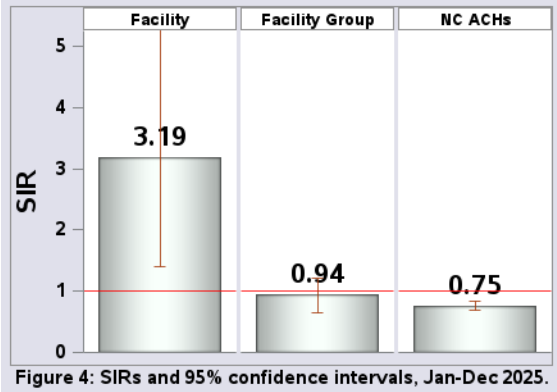


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	4	1.5	Same
Adult/Ped Wards	3	Less than 1.0	No Conclusion
All reporting units	**7**	**2.2**	**Worse**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
✕ Worse: More infections than predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

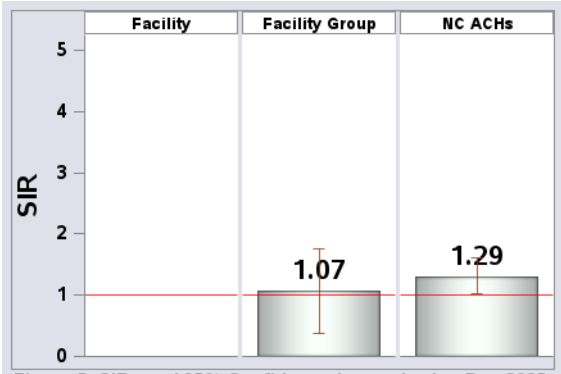


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

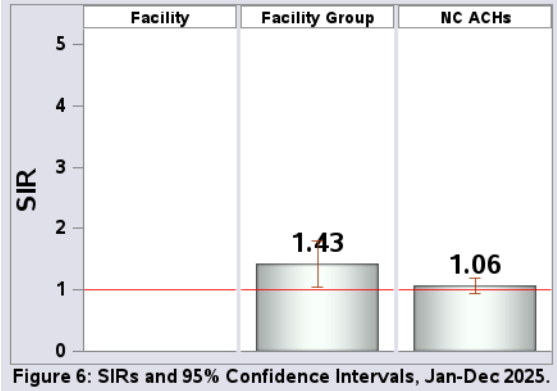


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

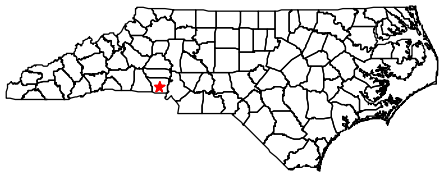
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Gaston Memorial Hospital, Gastonia, Gaston County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Graduate
Admissions in 2025:	28,035
Patient Days in 2025:	122,277
Total Number of Beds:	548
Number of ICU Beds:	68
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	0.18

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

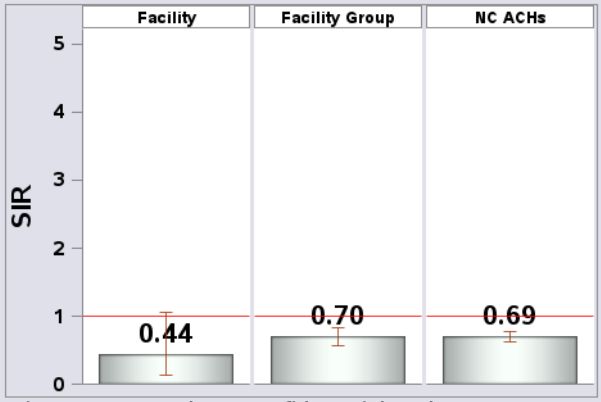


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	1	5.1	Better
Adult/Ped Wards	3	4.0	Same
All reporting units	**4**	**9.1**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**5**	**6.8**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

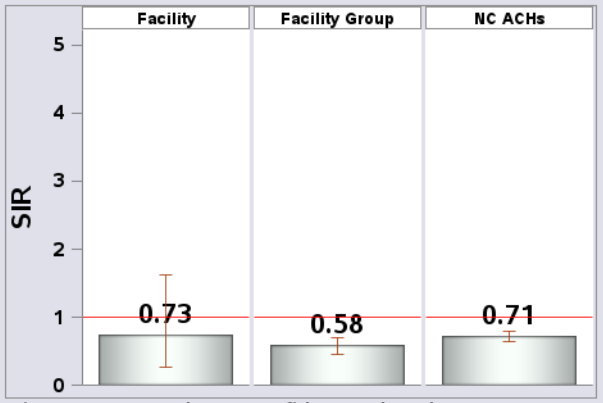


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

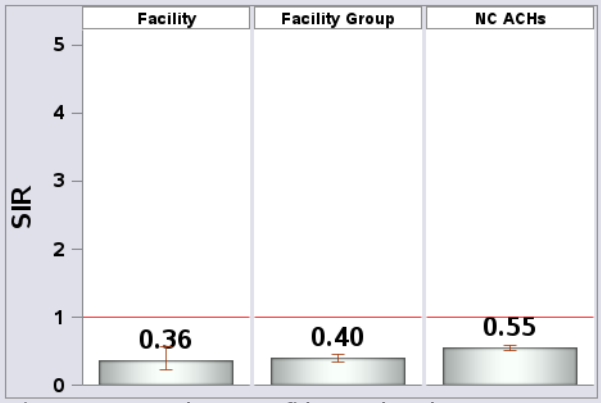


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**18**	**50**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Gaston Memorial Hospital, Gastonia, Gaston County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

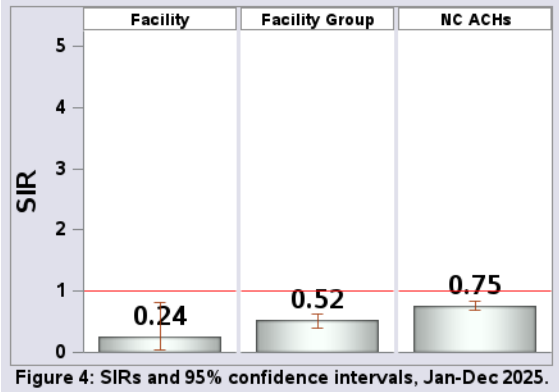


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	1	6.1	Better
Adult/Ped Wards	1	2.0	Same
Neonatal Units	0	Less than 1.0	No Conclusion
All reporting units	**2**	**8.2**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

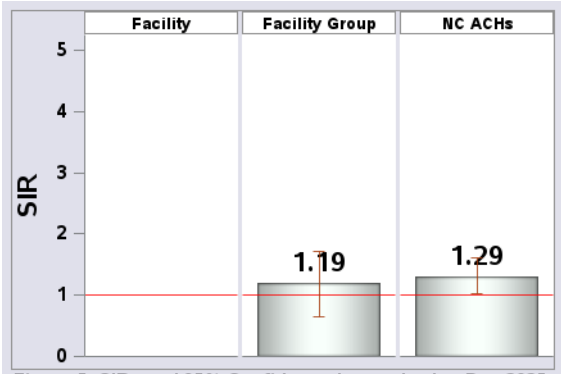


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

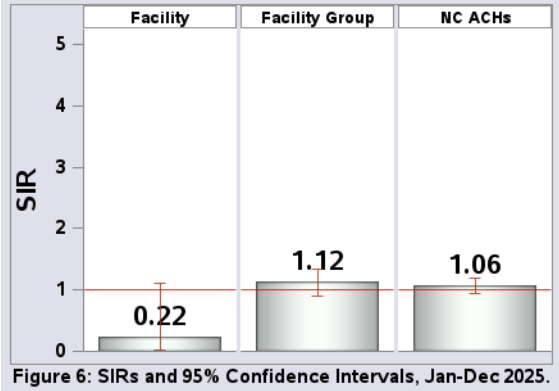


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**4.5**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

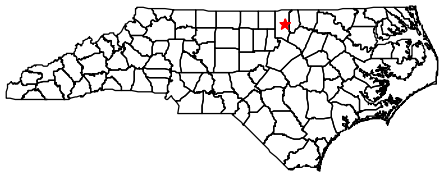
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Granville Medical Center, Oxford, Granville County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	No
Admissions in 2025:	1,219
Patient Days in 2025:	4,758
Total Number of Beds:	43
Number of ICU Beds:	6
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	2.33

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

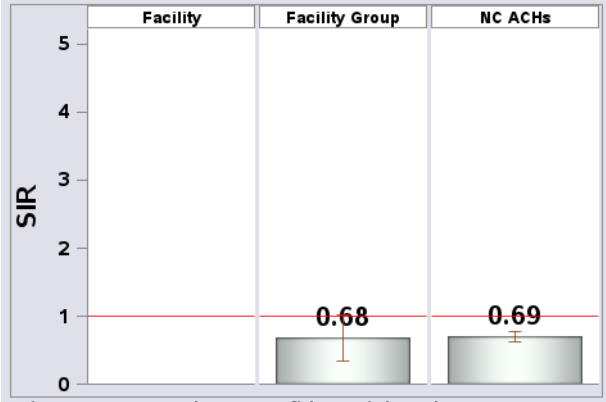


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

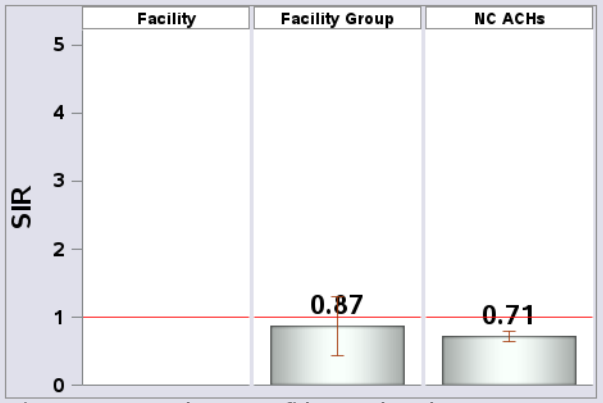


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

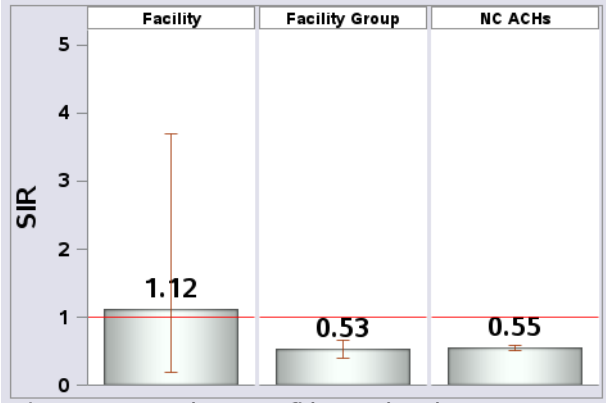


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**1.8**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Granville Medical Center, Oxford, Granville County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

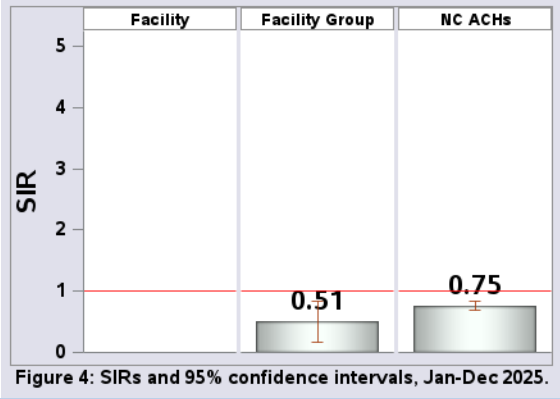


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Surgical Site Infections (SSI) after Colon Surgeries

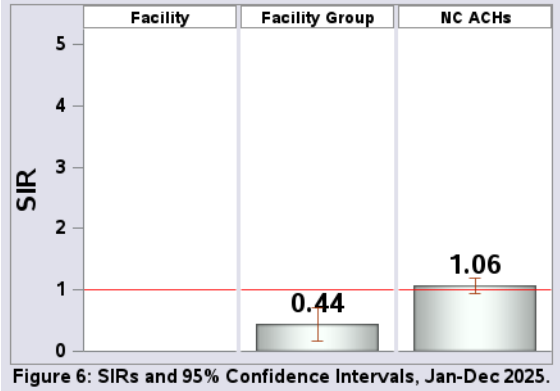


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Haywood Regional Medical Center, Clyde, Haywood County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	6,172
Patient Days in 2025:	28,933
Total Number of Beds:	117
Number of ICU Beds:	12
FTE* Infection Preventionists:	2.50
Number of FTEs* per 100 beds:	2.14

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

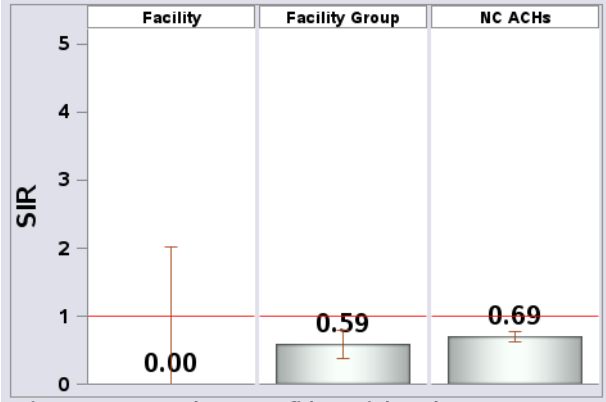


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**1.5**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**1.1**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

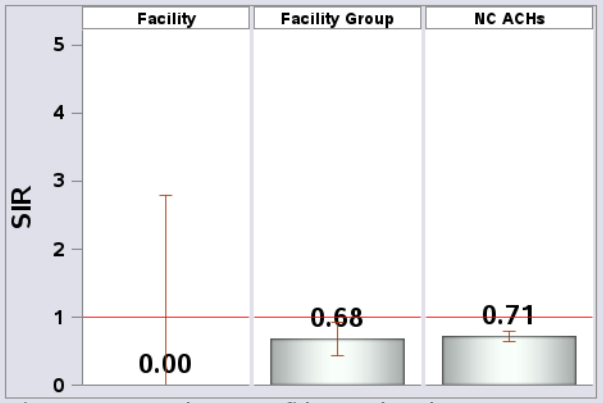


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

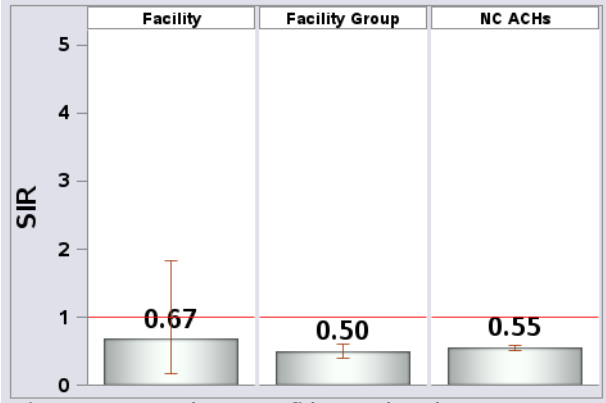


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**3**	**4.5**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Haywood Regional Medical Center, Clyde, Haywood County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

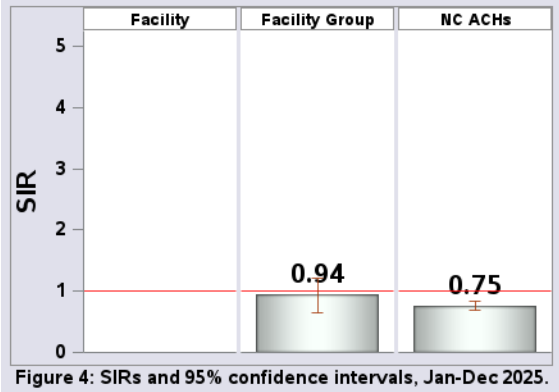


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

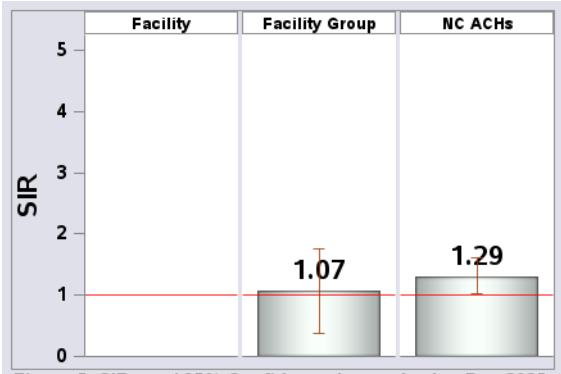


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

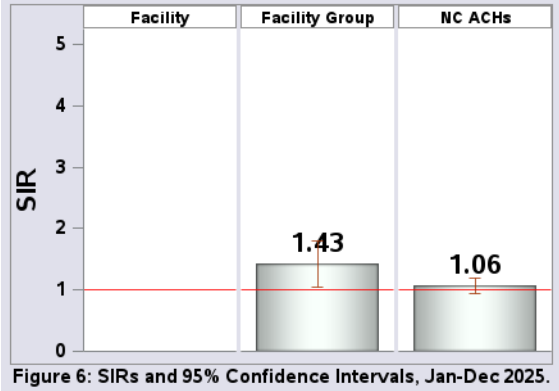


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

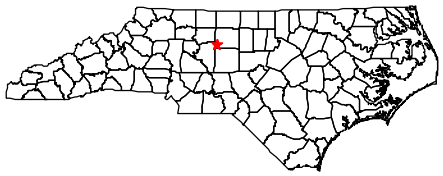
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
High Point Regional Health System, High Point, Guilford County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	19,533
Patient Days in 2025:	79,118
Total Number of Beds:	331
Number of ICU Beds:	28
FTE* Infection Preventionists:	1.60
Number of FTEs* per 100 beds:	0.48

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

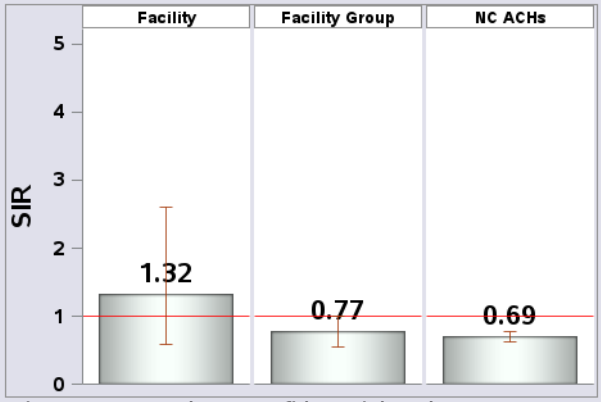


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	1	2.6	Same
Adult/Ped Wards	6	2.7	Same
All reporting units	**7**	**5.3**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**3**	**5.8**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

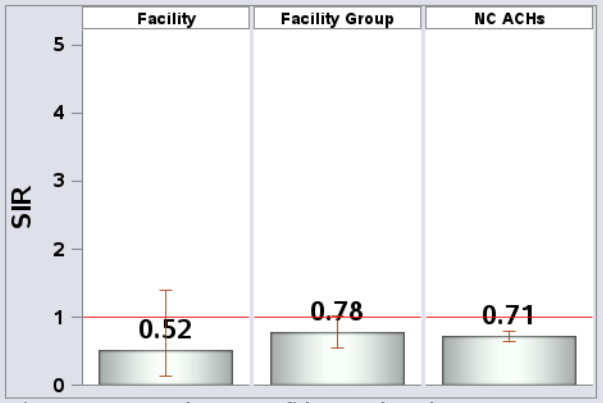


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

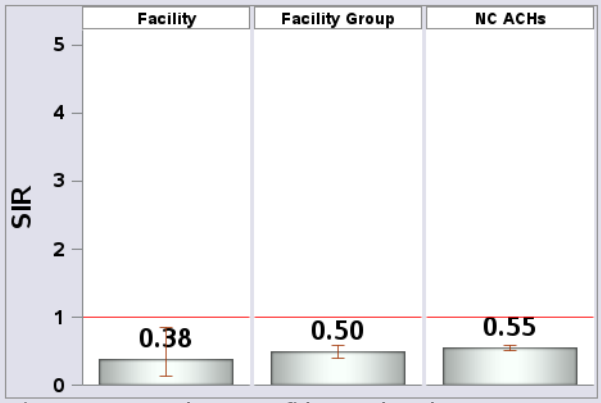


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**5**	**13**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
High Point Regional Health System, High Point, Guilford County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

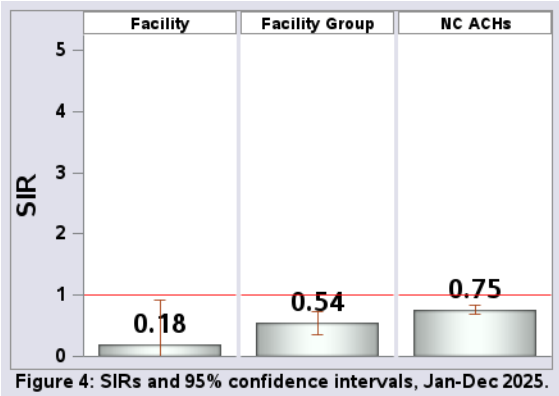


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	2.9	Same
Adult/Ped Wards	1	2.6	Same
All reporting units	**1**	**5.4**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**1.2**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

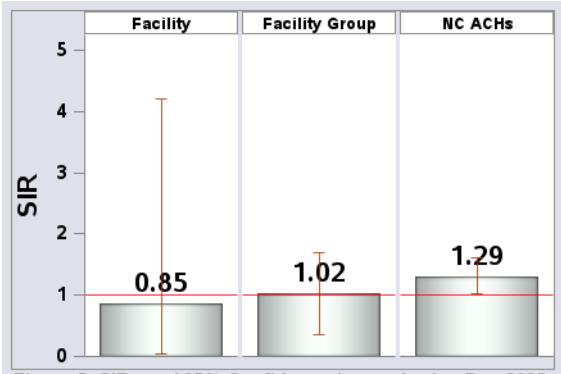


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

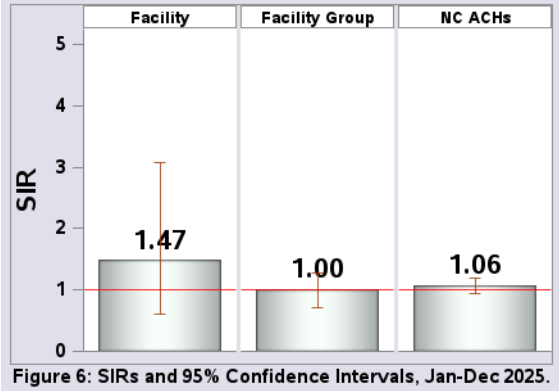


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**6**	**4.1**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

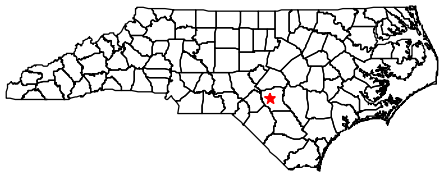
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Highsmith Rainey Specialty Hospital, Fayetteville, Cumberland County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Long-term Acute Care Hospital
Admissions in 2025:	272
Patient Days in 2025:	13,857
Total Number of Beds:	66
FTE* Infection Preventionists:	0.50
Number of FTEs* per 100 beds:	0.76

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

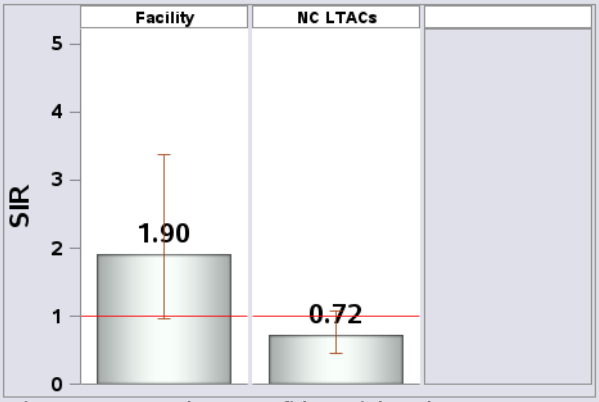


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Reporting ICUs	2	Less than 1.0	No Conclusion
Reporting Wards	8	4.6	Same
All reporting units	**10**	**5.3**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Note from NCDHHS Division of Public Health: MRSA is not reportable at this facility type after 2018Q3

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

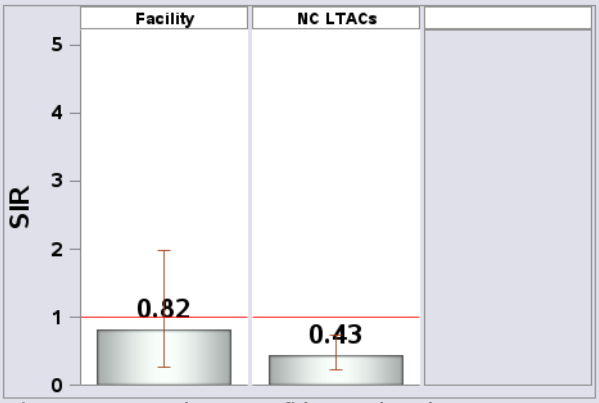


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**4**	**4.9**	**Same**
Facility-wide inpatient	**.**	**Less than 1.0**	**No Conclusion**
Facility-wide inpatient	**.**	**Less than 1.0**	**No Conclusion**
Facility-wide inpatient	**.**	**Less than 1.0**	**No Conclusion**
Facility-wide inpatient	**.**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Highsmith Rainey Specialty Hospital, Fayetteville, Cumberland County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

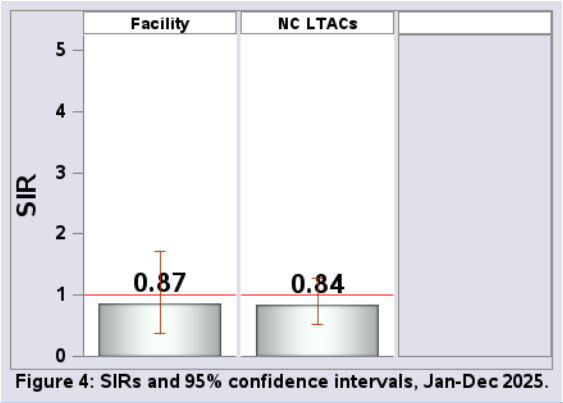


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Reporting ICUs	0	2.0	Same
Reporting Wards	7	6.1	Same
All reporting units	**7**	**8.1**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.

Note: SIR not calculated if <50 central line days or <1 predicted infection.

Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?

= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from NCDHHS Division of Public Health: SSIs are not reportable at this facility type

Surgical Site Infections (SSI) after Colon Surgeries

Note from NCDHHS Division of Public Health: SSIs are not reportable at this facility type

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Hugh Chatham Memorial Hospital, Elkin, Surry County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	No
Admissions in 2025:	4,351
Patient Days in 2025:	10,983
Total Number of Beds:	60
Number of ICU Beds:	8
FTE* Infection Preventionists:	0.88
Number of FTEs* per 100 beds:	1.46

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

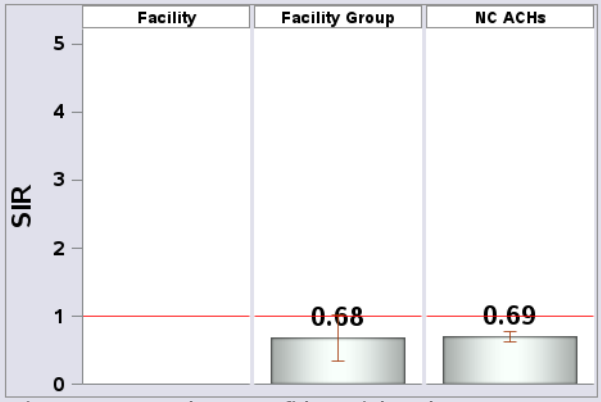


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

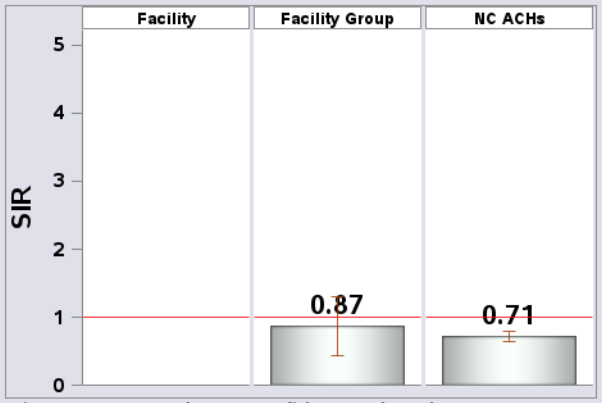


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

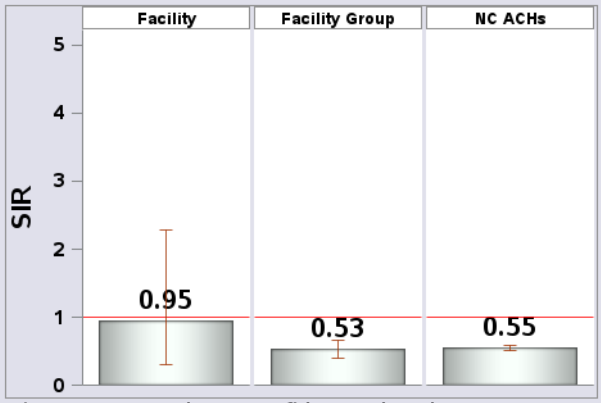


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**4**	**4.2**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Hugh Chatham Memorial Hospital, Elkin, Surry County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

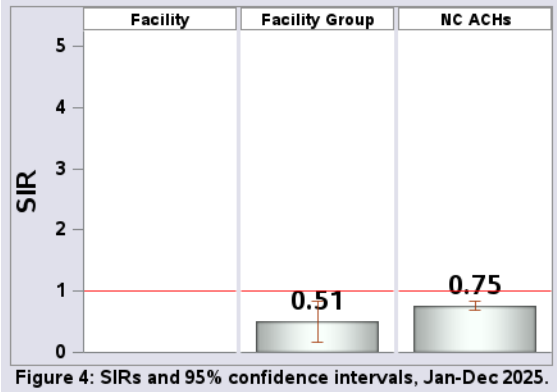


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

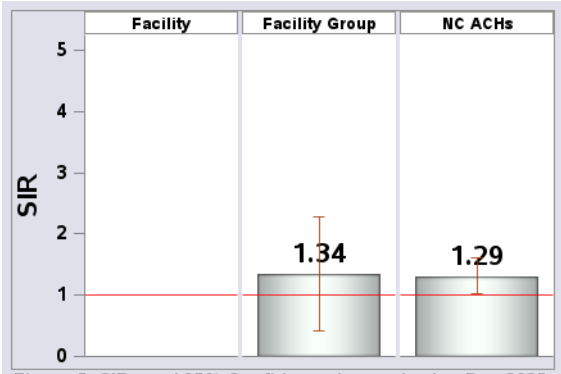


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

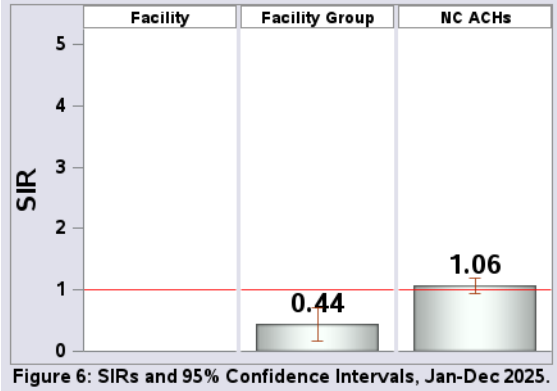


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

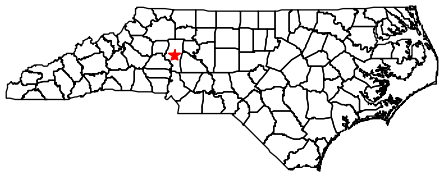
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Iredell Davis Behavioral Health, Statesville, Iredell County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	
Medical Affiliation:	Undergraduate
Admissions in 2025:	1,386
Patient Days in 2025:	11,740
Total Number of Beds:	42
Number of ICU Beds:	0
FTE* Infection Preventionists:	0.50
Number of FTEs* per 100 beds:	1.19

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

Note from N.C. Division of Public Health: Data are unavailable for this time period.

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Iredell Davis Behavioral Health, Statesville, Iredell County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Surgical Site Infections (SSI) after Colon Surgeries

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

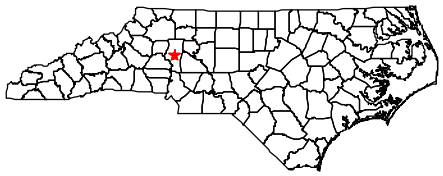
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Iredell Memorial Hospital, Statesville, Iredell County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Graduate
Admissions in 2025:	12,249
Patient Days in 2025:	42,957
Total Number of Beds:	199
Number of ICU Beds:	16
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	0.50

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

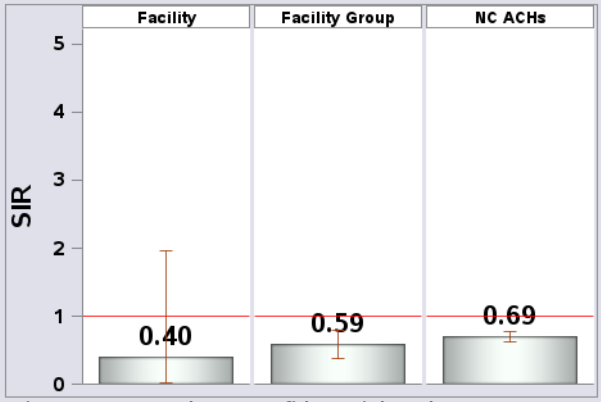


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	1	1.3	Same
Adult/Ped Wards	0	1.2	Same
All reporting units	**1**	**2.5**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**1.8**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

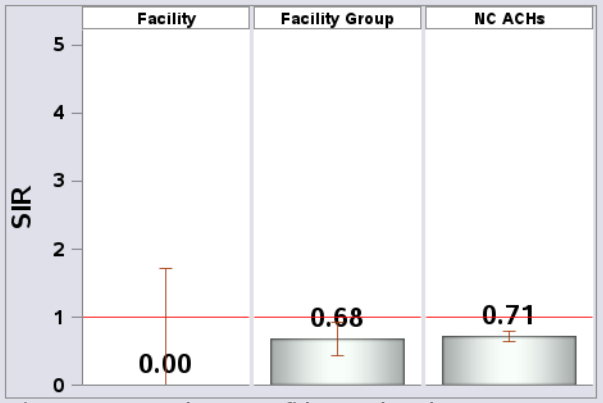


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

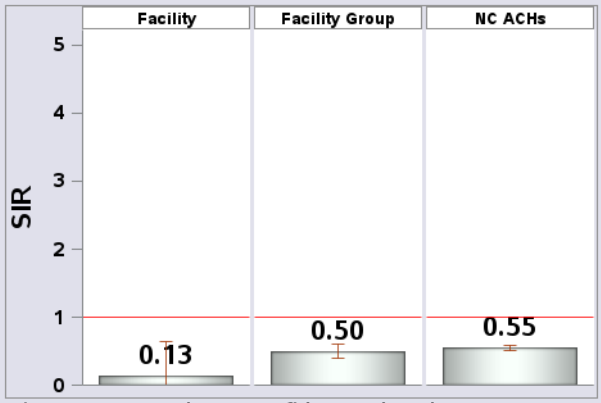


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**7.6**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Iredell Memorial Hospital, Statesville, Iredell County

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Central Line-Associated Bloodstream Infections (CLABSI)

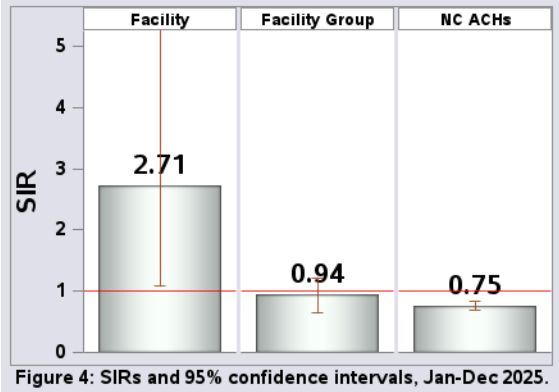


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	4	1.5	Same
Adult/Ped Wards	2	Less than 1.0	No Conclusion
All reporting units	**6**	**2.2**	**Worse**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
× Worse: More infections than predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

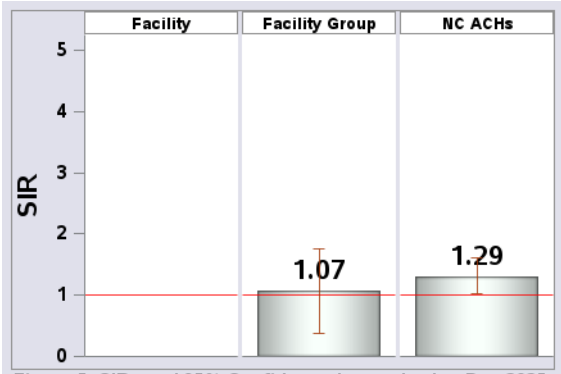


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

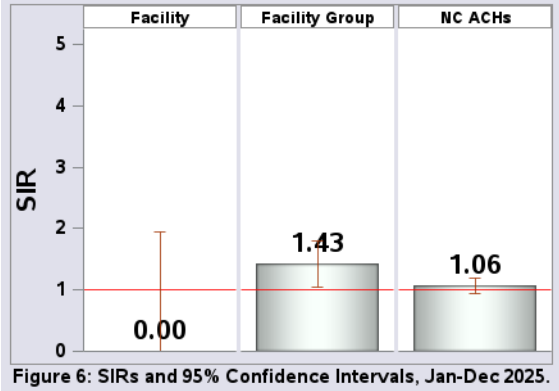


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**1.5**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

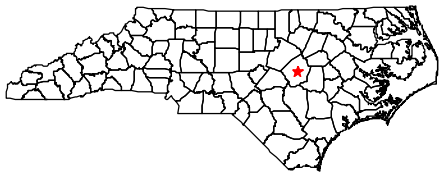
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Johnston Health, Smithfield, Johnston County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	9,314
Patient Days in 2025:	47,872
Total Number of Beds:	165
Number of ICU Beds:	16
FTE* Infection Preventionists:	1.50
Number of FTEs* per 100 beds:	0.91

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

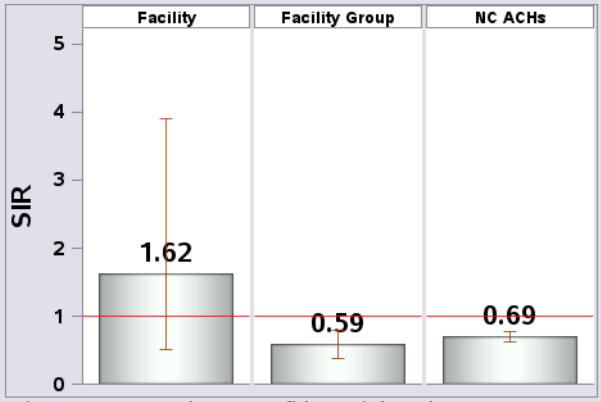


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	2	Less than 1.0	No Conclusion
Adult/Ped Wards	2	1.5	Same
All reporting units	**4**	**2.5**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**2.0**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

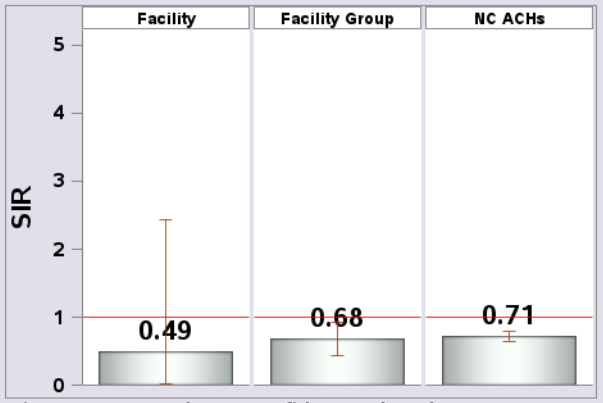


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

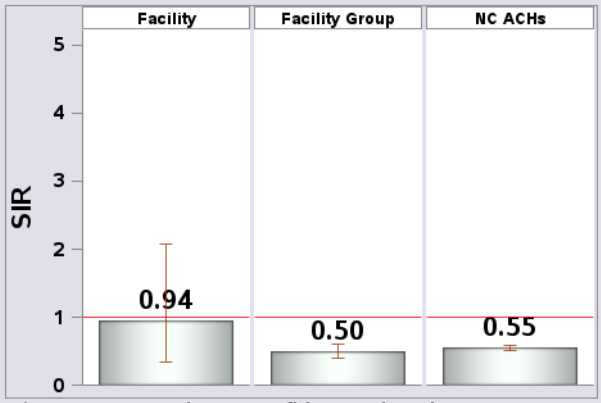


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**5**	**5.3**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Johnston Health, Smithfield, Johnston County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

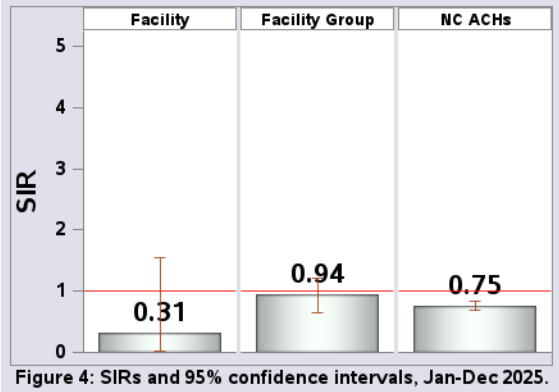


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	1	1.6	Same
Adult/Ped Wards	0	1.6	Same
All reporting units	**1**	**3.2**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

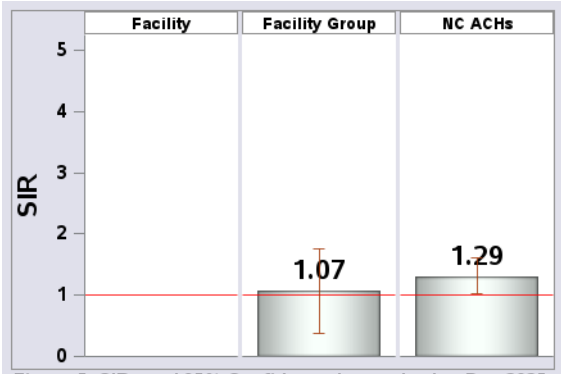


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

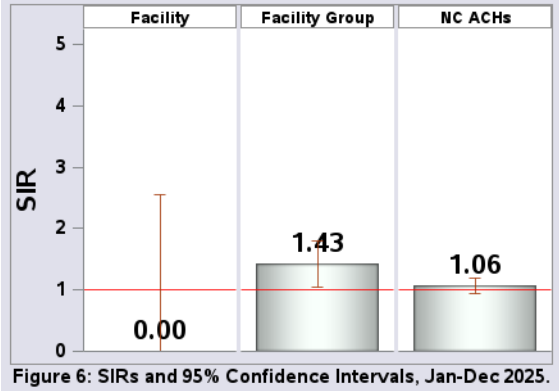


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**1.2**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

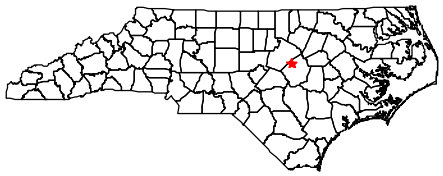
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Johnston Health Clayton, Clayton, Johnston County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	6,000
Patient Days in 2025:	15,934
Total Number of Beds:	50
Number of ICU Beds:	0
FTE* Infection Preventionists:	0.50
Number of FTEs* per 100 beds:	1.00

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

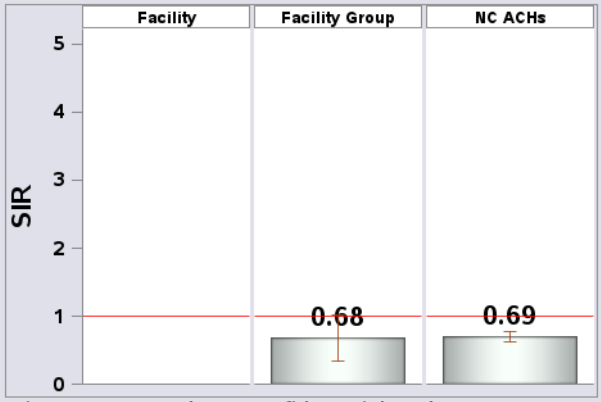


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped Wards	1	Less than 1.0	No Conclusion
All reporting units	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

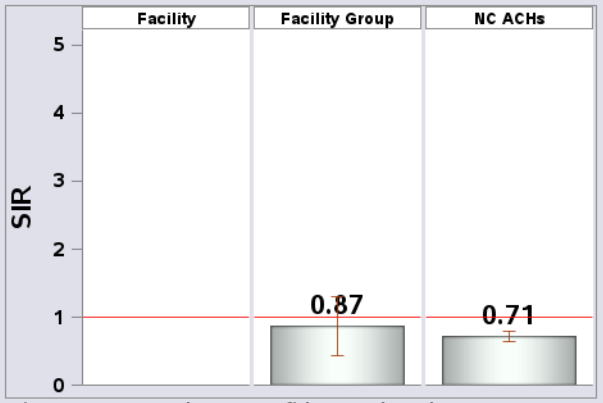


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

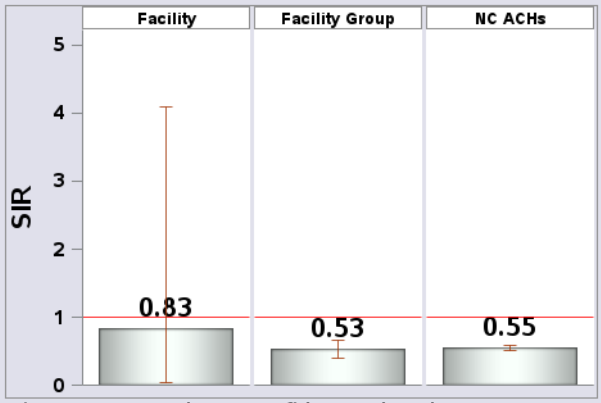


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**1.2**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

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North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Johnston Health Clayton, Clayton, Johnston County

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Central Line-Associated Bloodstream Infections (CLABSI)

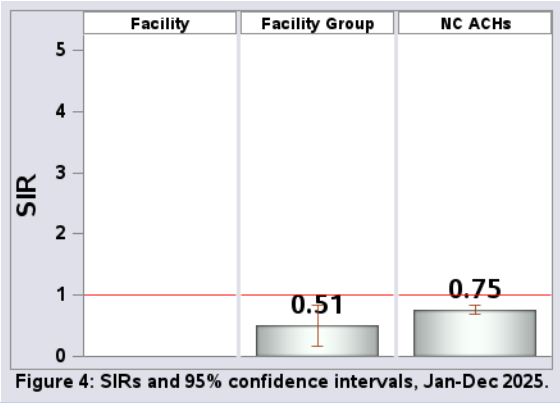


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

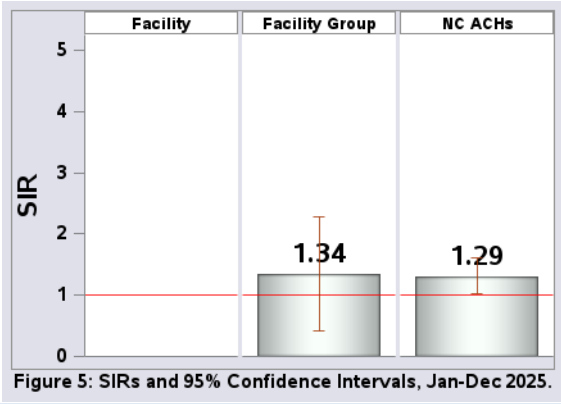


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

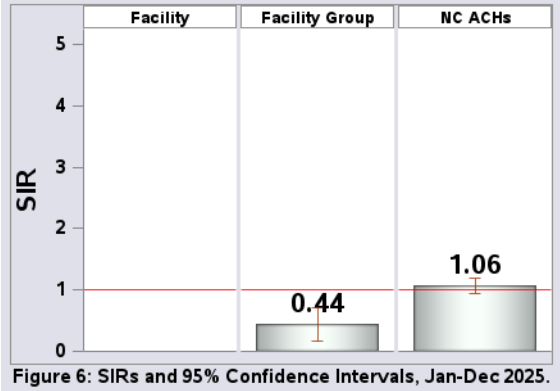


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

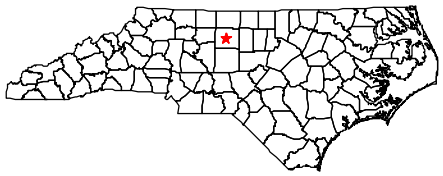
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Kindred Hospital-Greensboro, Greensboro, Guilford County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Long-term Acute Care Hospital
Admissions in 2025:	299
Patient Days in 2025:	9,862
Total Number of Beds:	101
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	0.99

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

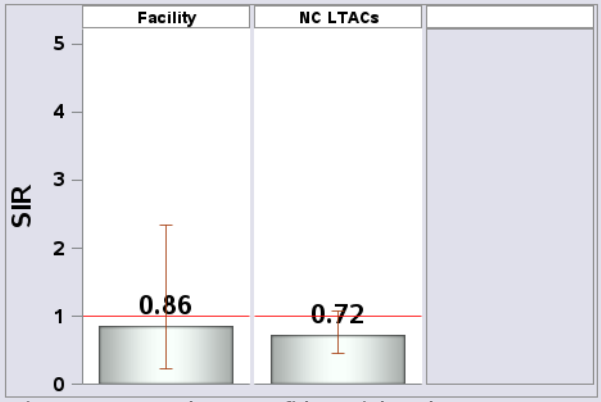


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Reporting Wards	3	3.5	Same
All reporting units	**3**	**3.5**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Note from NCDHHS Division of Public Health: MRSA is not reportable at this facility type after 2018Q3

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

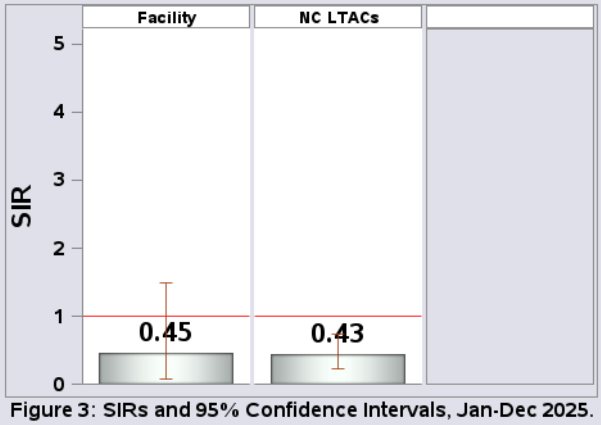


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**4.4**	**Same**
Facility-wide inpatient	**.**	**Less than 1.0**	**No Conclusion**
Facility-wide inpatient	**.**	**Less than 1.0**	**No Conclusion**
Facility-wide inpatient	**.**	**Less than 1.0**	**No Conclusion**
Facility-wide inpatient	**.**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Kindred Hospital-Greensboro, Greensboro, Guilford County

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Central Line-Associated Bloodstream Infections (CLABSI)

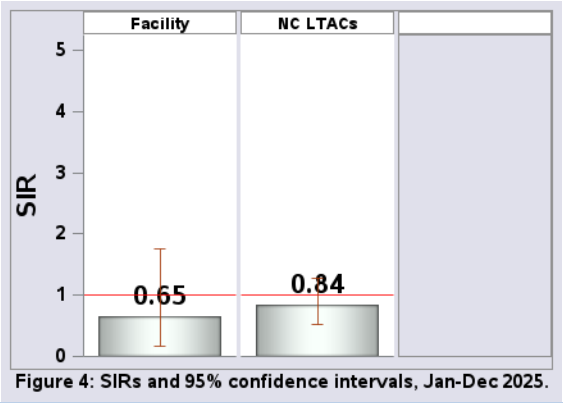


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Reporting Wards	3	4.6	Same
All reporting units	**3**	**4.6**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from NCDHHS Division of Public Health: SSIs are not reportable at this facility type

Surgical Site Infections (SSI) after Colon Surgeries

Note from NCDHHS Division of Public Health: SSIs are not reportable at this facility type

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

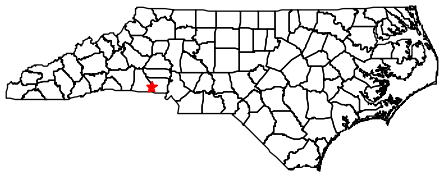
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Kings Mountain Hospital, Kings Mountain, Cleveland County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	2,534
Patient Days in 2025:	13,951
Total Number of Beds:	67
Number of ICU Beds:	0
FTE* Infection Preventionists:	0.20
Number of FTEs* per 100 beds:	0.30

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

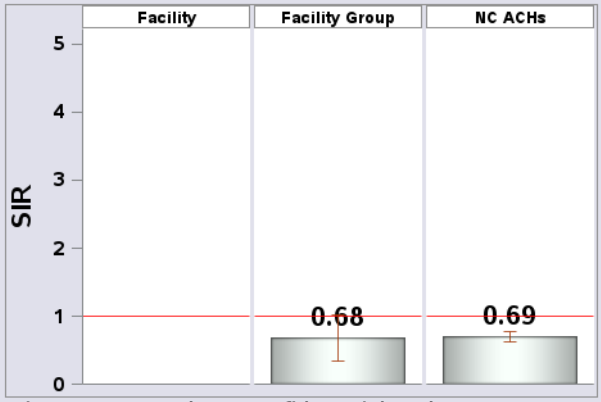


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

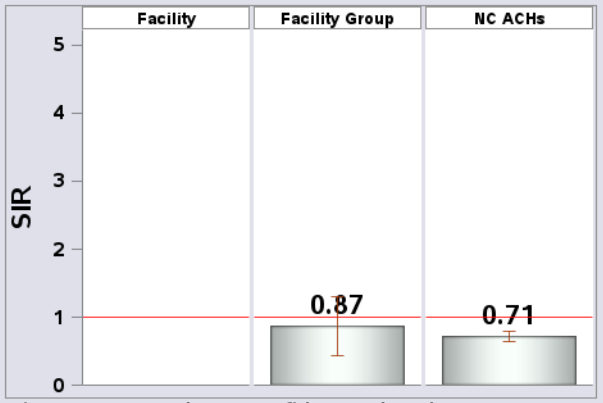


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

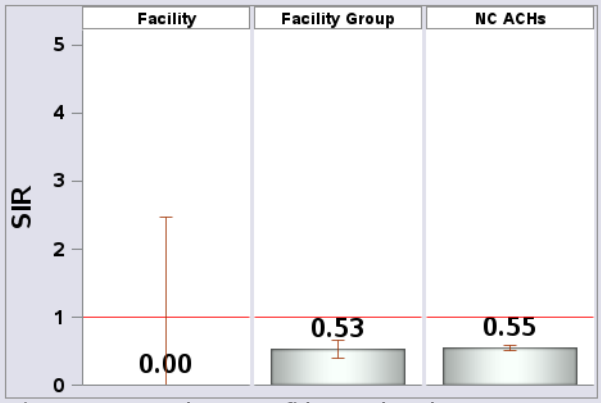


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**1.2**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

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N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Kings Mountain Hospital, Kings Mountain, Cleveland County

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Central Line-Associated Bloodstream Infections (CLABSI)

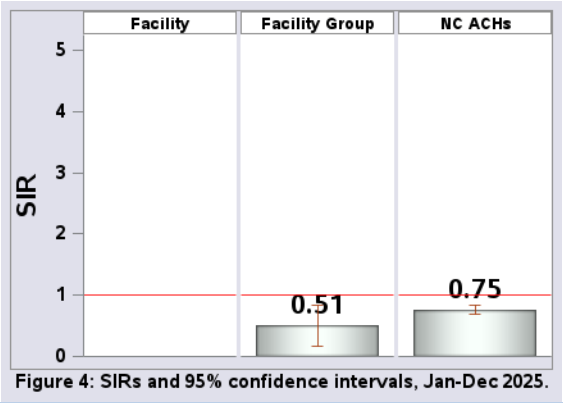


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Surgical Site Infections (SSI) after Colon Surgeries

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Lenoir Memorial Hospital, Kinston, Lenoir County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	6,048
Patient Days in 2025:	27,769
Total Number of Beds:	120
Number of ICU Beds:	12
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	0.83

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

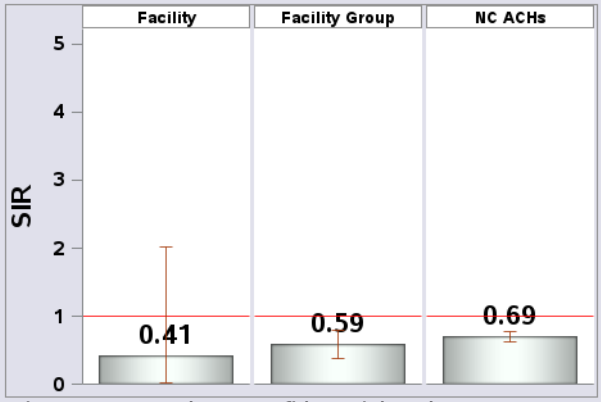


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	1	1.8	Same
All reporting units	**1**	**2.5**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**1.6**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

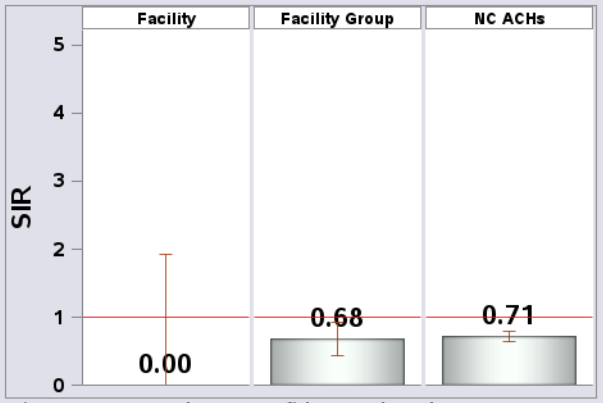


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

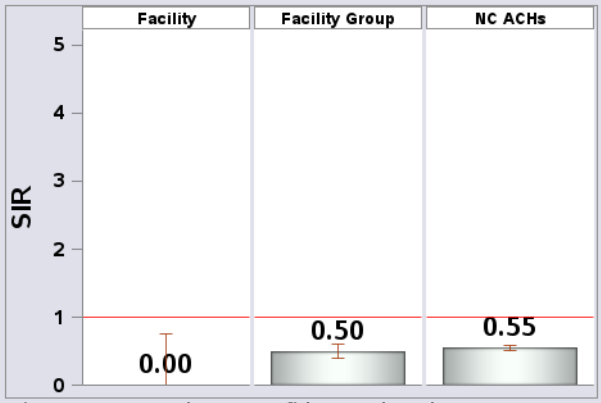


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**4.0**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Lenoir Memorial Hospital, Kinston, Lenoir County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

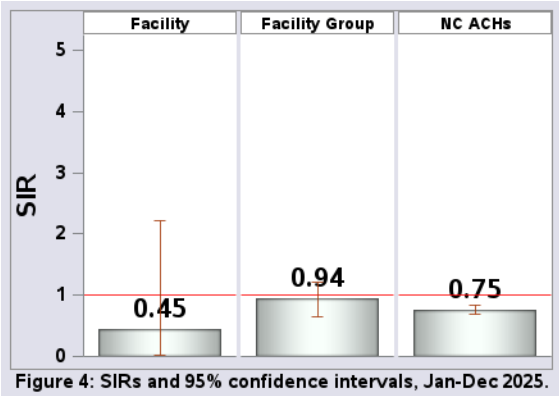


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	1.1	Same
Adult/Ped Wards	1	1.2	Same
All reporting units	**1**	**2.2**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**3**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

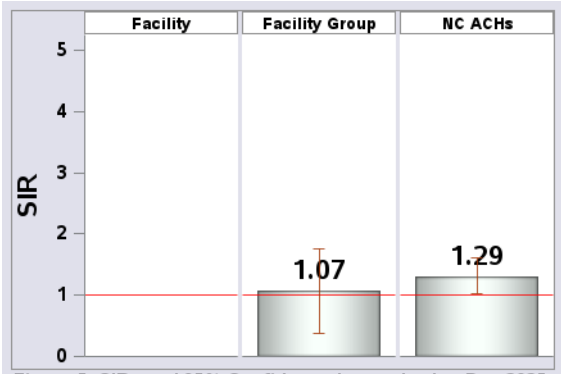


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

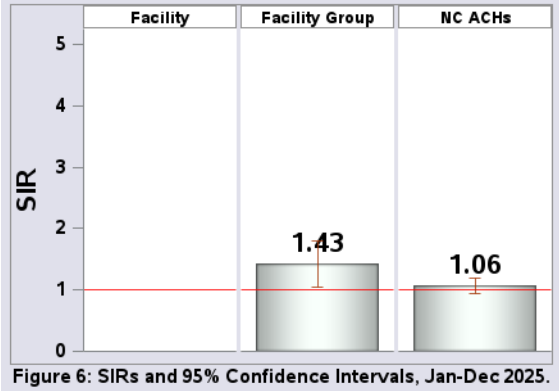


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**4**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

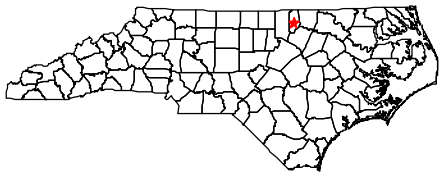
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Maria Parham Medical Center, Henderson, Vance County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	5,167
Patient Days in 2025:	26,080
Total Number of Beds:	122
Number of ICU Beds:	8
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	0.82

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

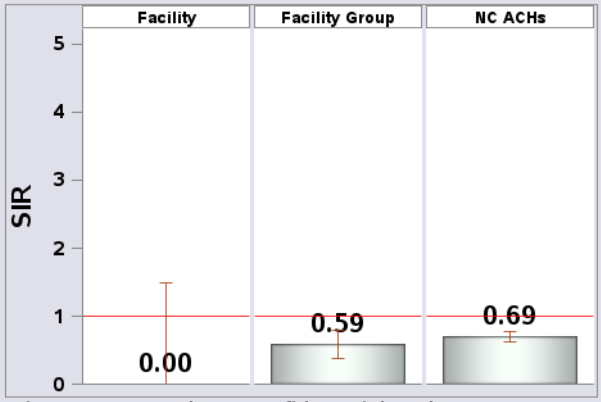


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	1.1	Same
All reporting units	**0**	**2.0**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**1.0**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

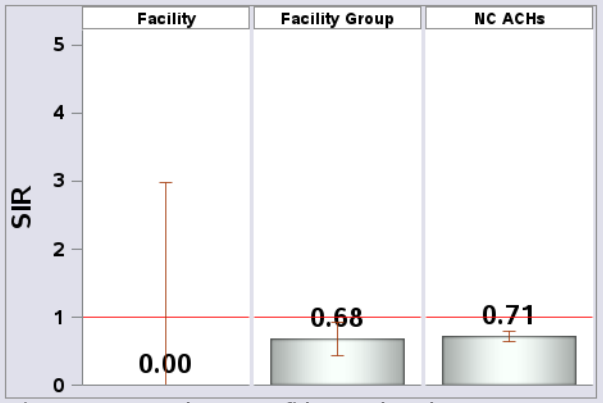


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

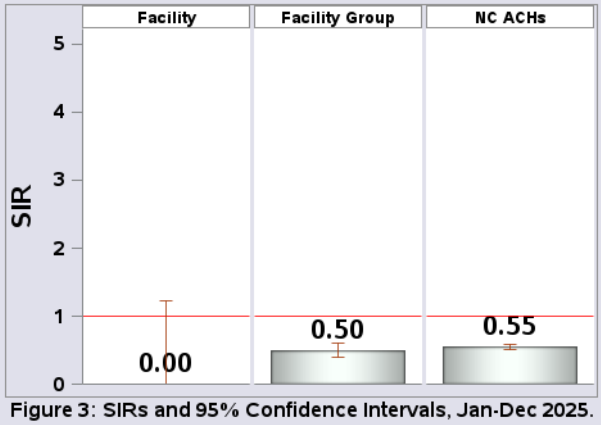


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**2.5**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Maria Parham Medical Center, Henderson, Vance County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

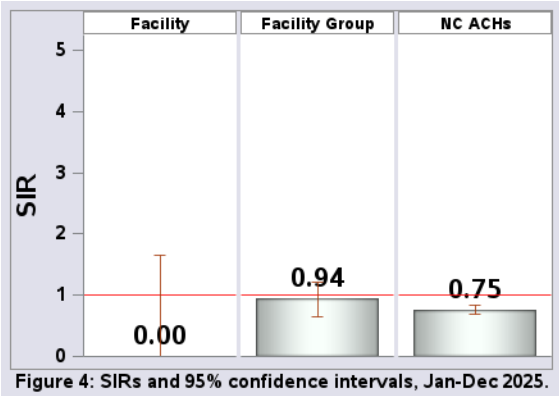


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	1.1	Same
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**1.8**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

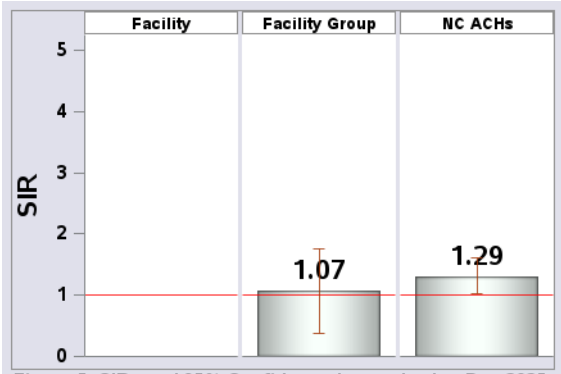


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

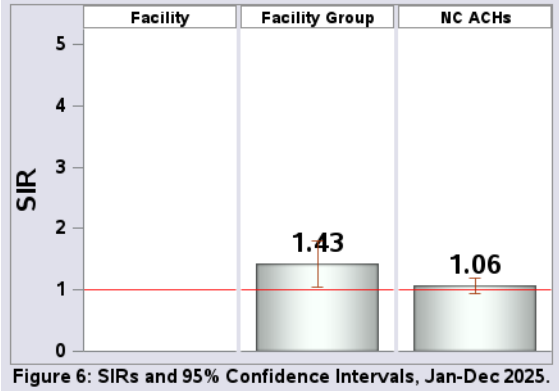


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
McDowell Hospital, Marion, McDowell County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	2,319
Patient Days in 2025:	7,544
Total Number of Beds:	29
Number of ICU Beds:	4
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	3.45

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

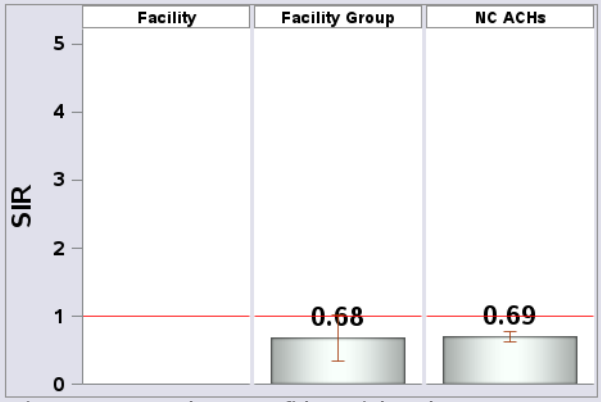


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

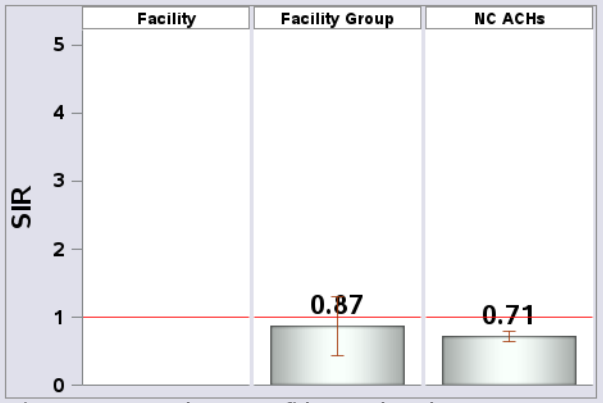


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

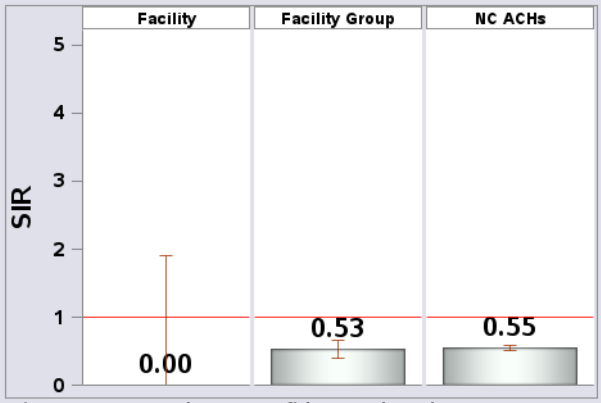


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**1.6**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
McDowell Hospital, Marion, McDowell County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

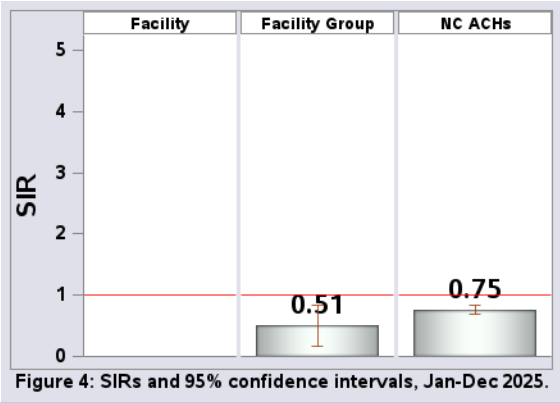


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped Wards	1	Less than 1.0	No Conclusion
All reporting units	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

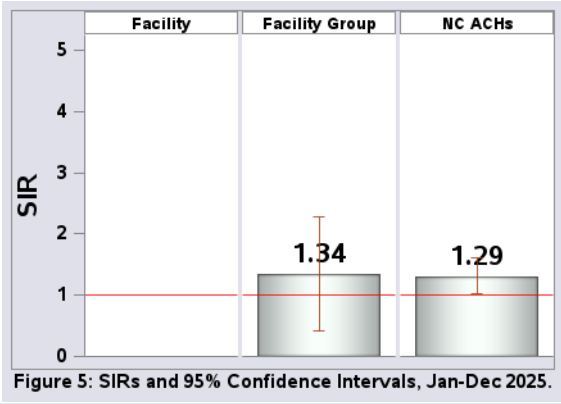


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

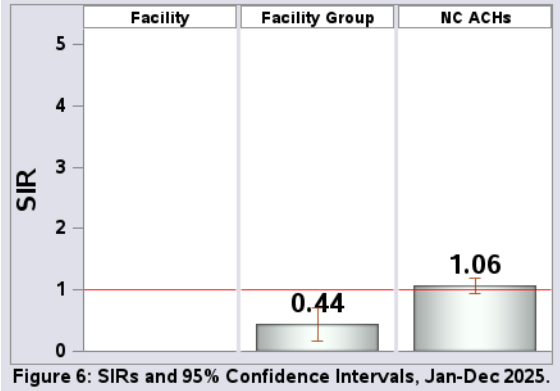


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Mission Hospital, Asheville, Buncombe County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	52,517
Patient Days in 2025:	258,416
Total Number of Beds:	733
Number of ICU Beds:	151
FTE* Infection Preventionists:	8.75
Number of FTEs* per 100 beds:	1.19

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

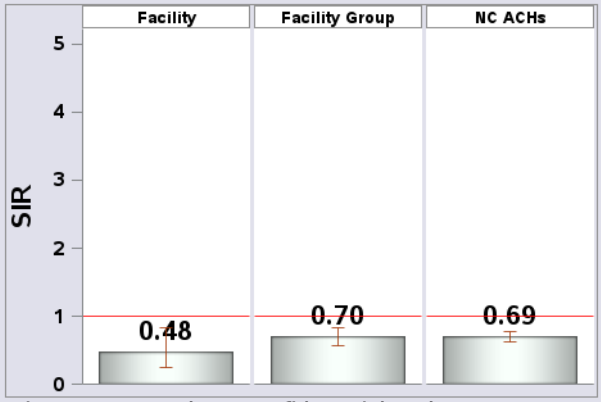


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	7	15	Better
Adult/Ped Wards	4	8.5	Same
All reporting units	**11**	**23**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**10**	**21**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

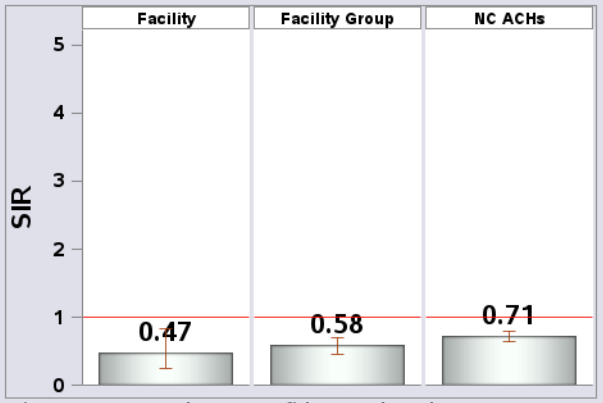


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

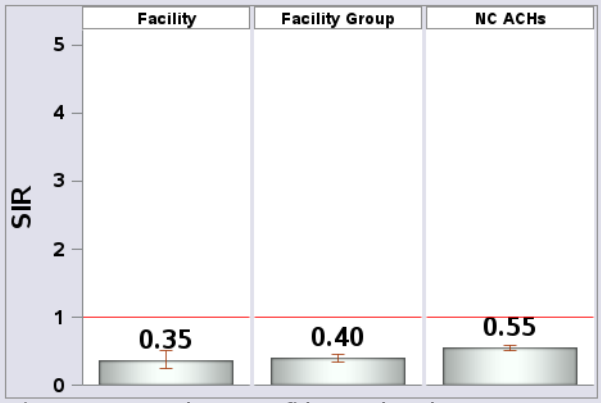


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**27**	**77**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Mission Hospital, Asheville, Buncombe County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

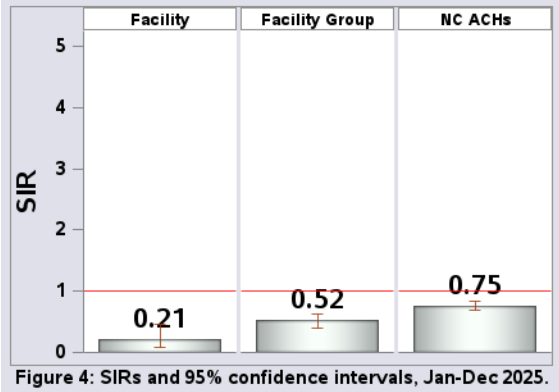


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	1	15	Better
Adult/Ped Wards	3	7.0	Same
Neonatal Units	1	2.0	Same
All reporting units	**5**	**24**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**6**	**2.8**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

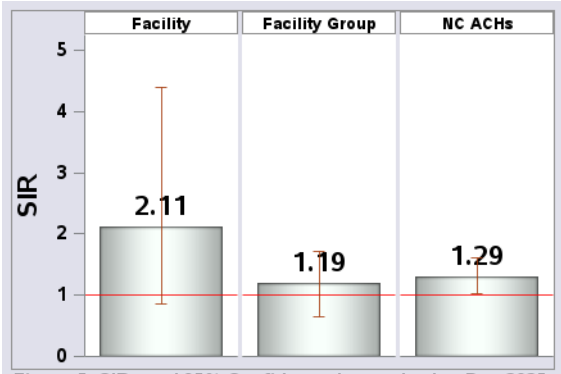


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

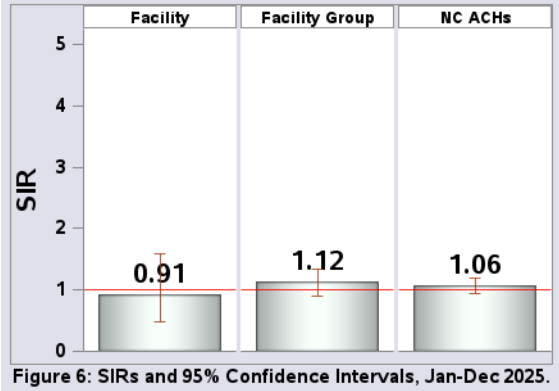


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**11**	**12**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

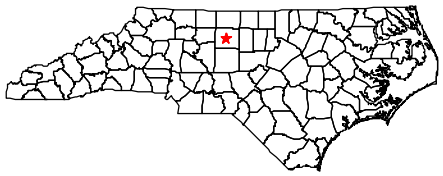
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Moses Cone Hospital, Greensboro, Guilford County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	30,447
Patient Days in 2025:	175,963
Total Number of Beds:	581
Number of ICU Beds:	109
FTE* Infection Preventionists:	3.30
Number of FTEs* per 100 beds:	0.57

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

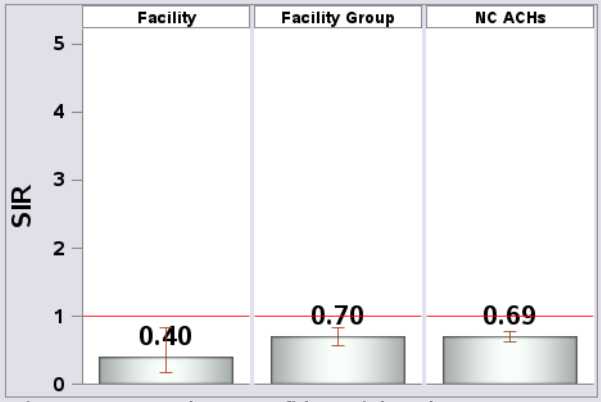


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	4	9.6	Same
Adult/Ped Wards	2	5.5	Same
All reporting units	**6**	**15**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**9**	**12**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

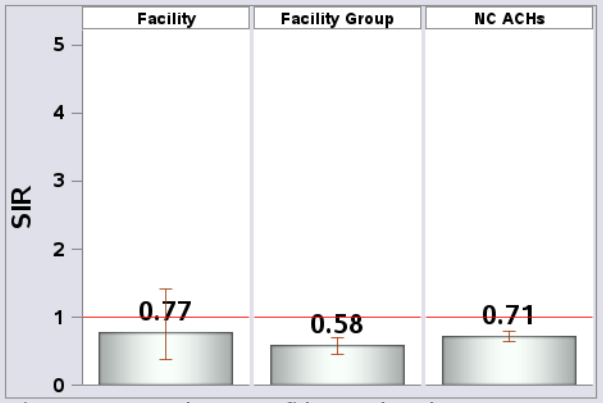


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

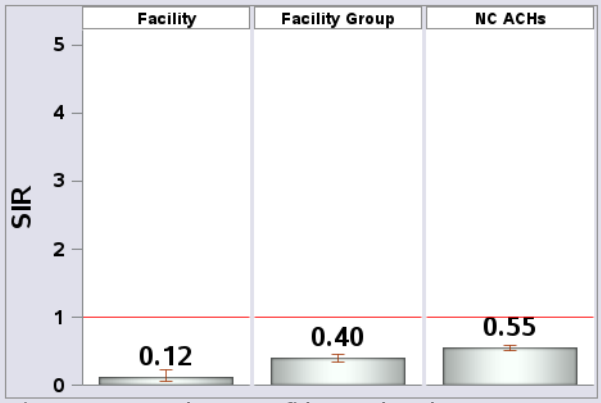


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**7**	**61**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Moses Cone Hospital, Greensboro, Guilford County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

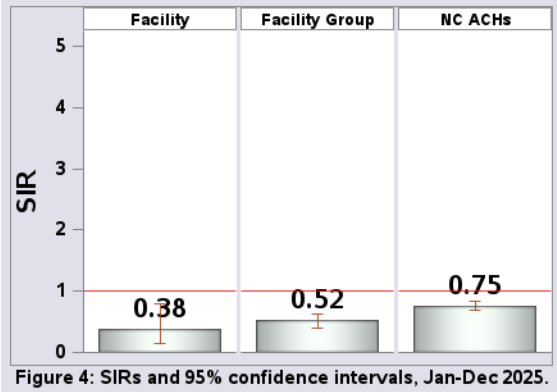


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	4	11	Better
Adult/Ped Wards	2	5.0	Same
All reporting units	**6**	**16**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**3**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

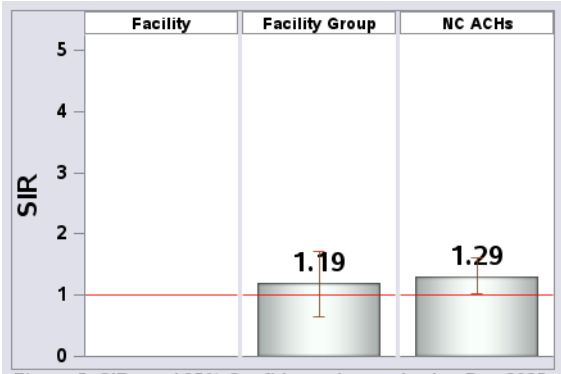


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

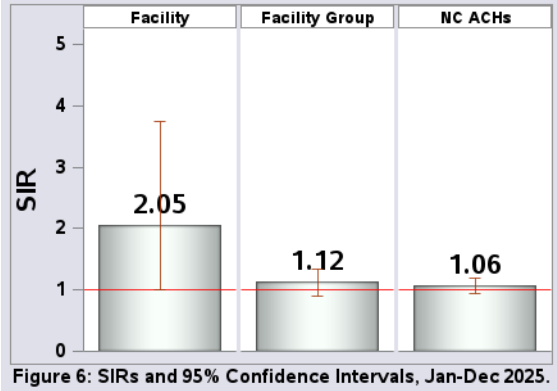


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**9**	**4.4**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Nash Health Care Systems, Rocky Mount, Nash County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	14,283
Patient Days in 2025:	59,383
Total Number of Beds:	191
Number of ICU Beds:	14
FTE* Infection Preventionists:	3.00
Number of FTEs* per 100 beds:	1.57

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

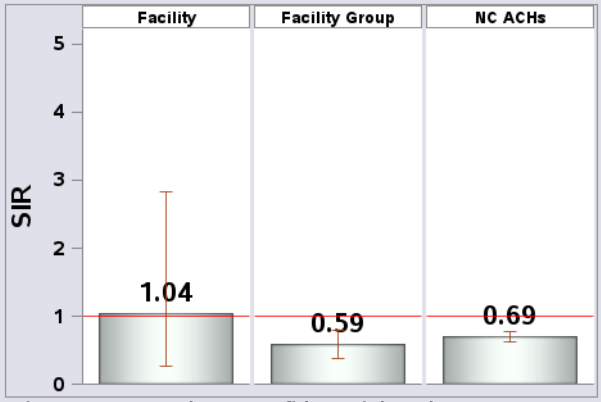


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	3	1.4	Same
Adult/Ped Wards	0	1.5	Same
All reporting units	**3**	**2.9**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**6**	**3.5**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

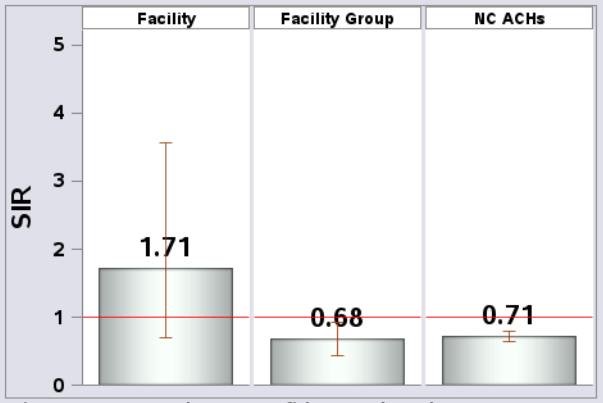


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

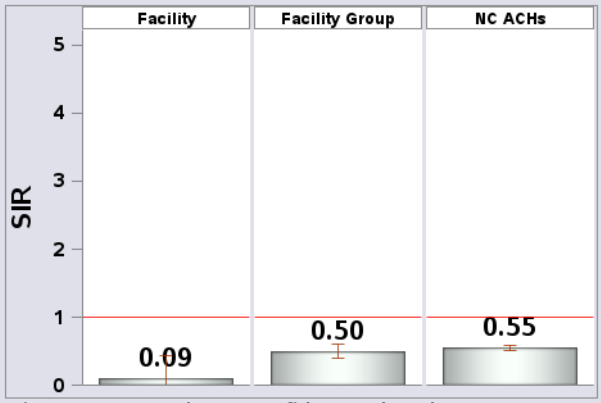


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**12**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Nash Health Care Systems, Rocky Mount, Nash County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

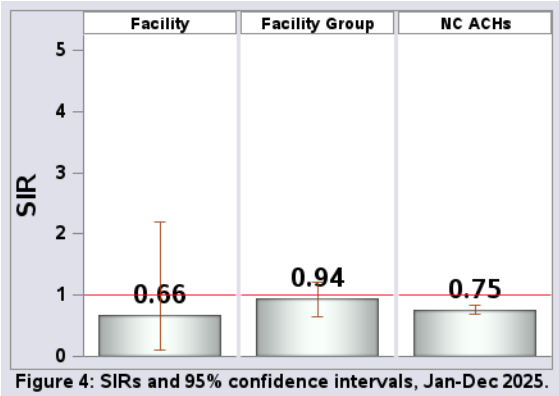


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	1	1.4	Same
Adult/Ped Wards	1	1.6	Same
All reporting units	**2**	**3.0**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

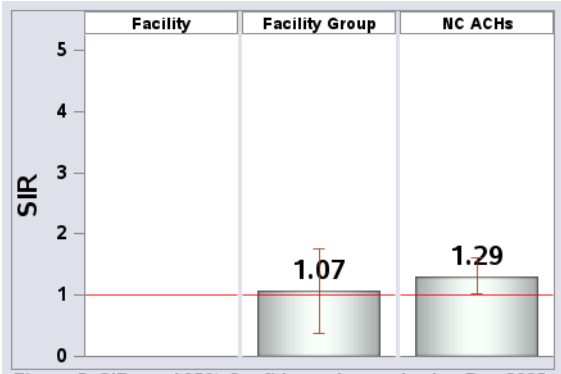


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

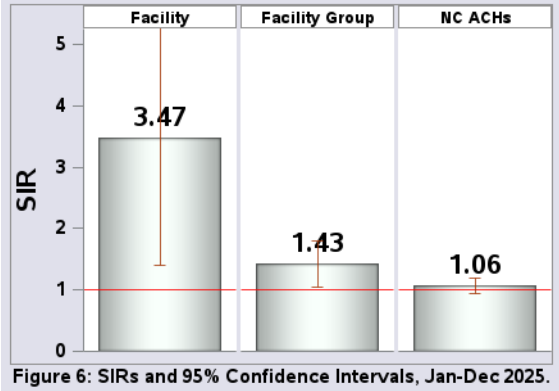


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**6**	**1.7**	**Worse**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
× Worse: More infections than predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
New Hanover Regional Medical Center, Wilmington, New Hanover County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	45,633
Patient Days in 2025:	261,030
Total Number of Beds:	845
Number of ICU Beds:	115
FTE* Infection Preventionists:	6.90
Number of FTEs* per 100 beds:	0.82

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

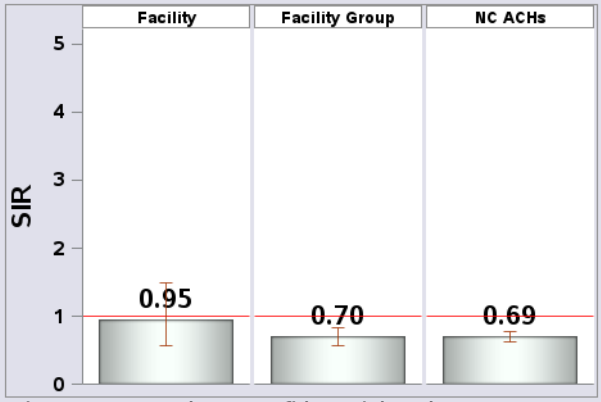


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	7	10	Same
Adult/Ped Wards	10	7.5	Same
All reporting units	**17**	**18**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**14**	**16**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

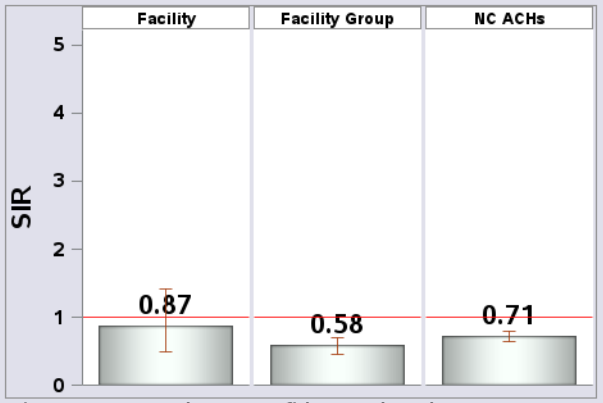


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

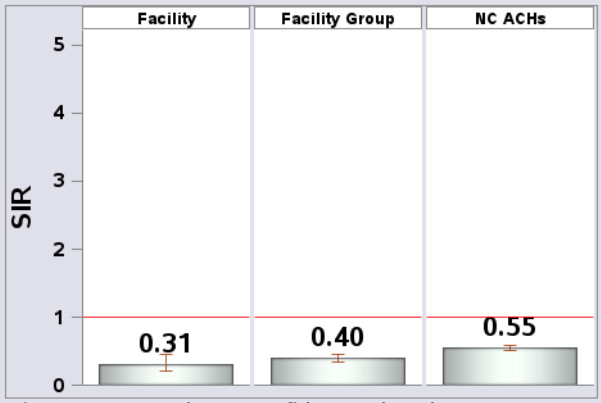


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**25**	**81**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
New Hanover Regional Medical Center, Wilmington, New Hanover County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

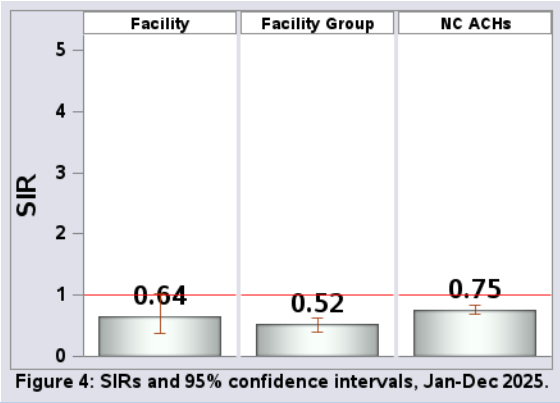


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	12	13	Same
Adult/Ped Wards	1	8.5	Better
Neonatal Units	3	3.9	Same
All reporting units	**16**	**25**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**3**	**2.1**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

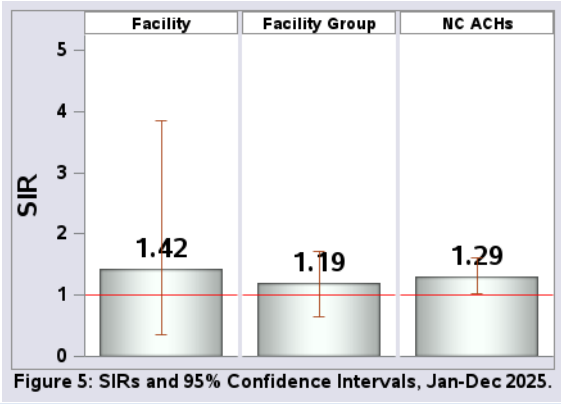


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

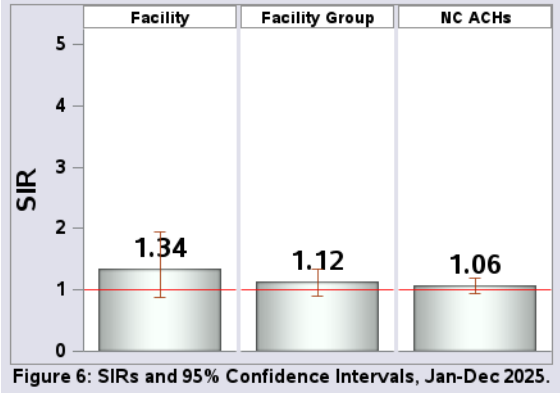


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**25**	**19**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

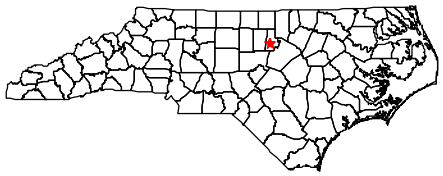
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
North Carolina Specialty Hospital, Durham, Durham County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	2,166
Patient Days in 2025:	2,579
Total Number of Beds:	24
Number of ICU Beds:	0
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	4.17

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

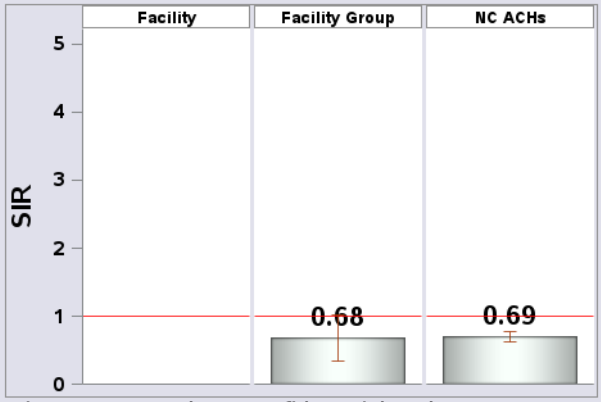


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

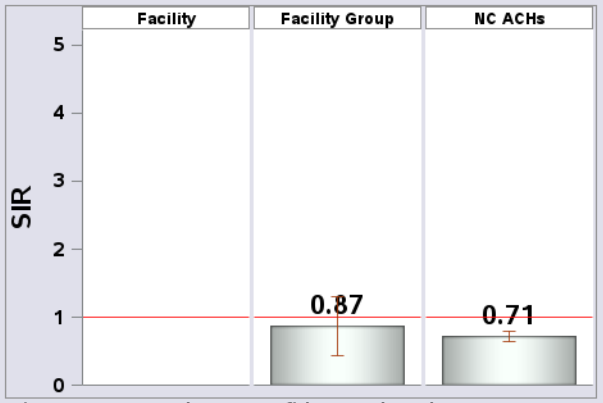


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

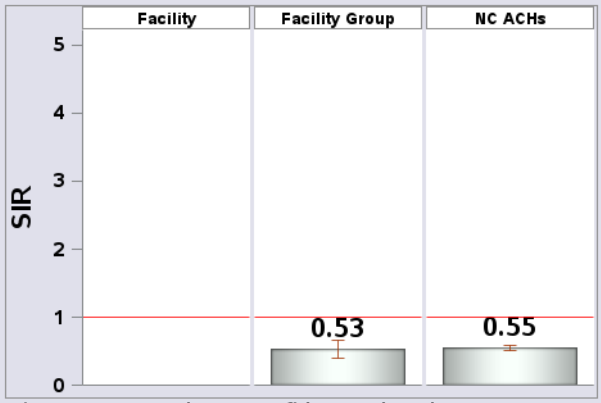


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
North Carolina Specialty Hospital, Durham, Durham County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

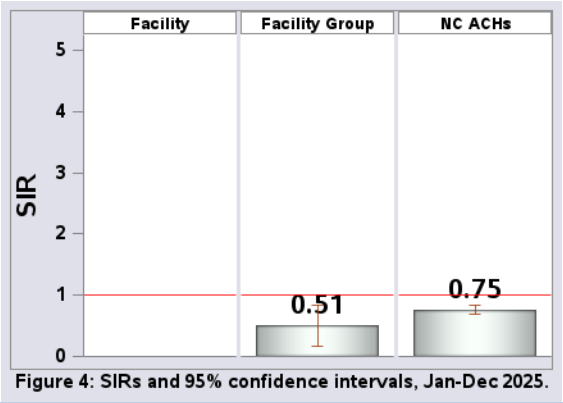


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from N.C. Division of Public Health: This facility did not have locations required to report SSI during this time period

Surgical Site Infections (SSI) after Colon Surgeries

Note from N.C. Division of Public Health: This facility did not have locations required to report SSI during this time period

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Northern Regional Hospital, Mount Airy, Surry County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	No
Admissions in 2025:	3,549
Patient Days in 2025:	13,893
Total Number of Beds:	100
Number of ICU Beds:	10
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	1.00

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

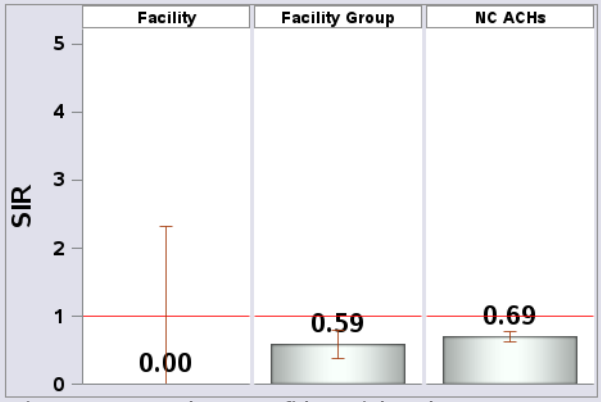


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**1.3**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

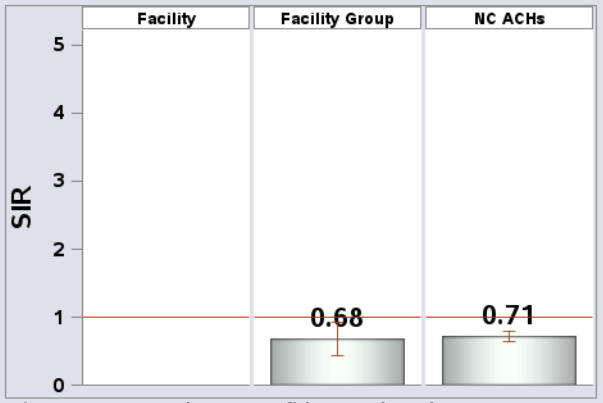


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

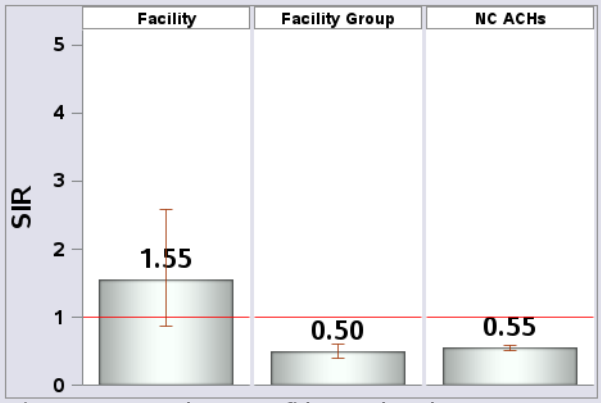


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**13**	**8.4**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Northern Regional Hospital, Mount Airy, Surry County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

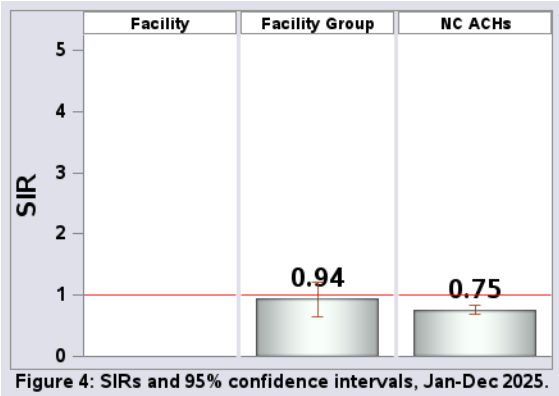


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

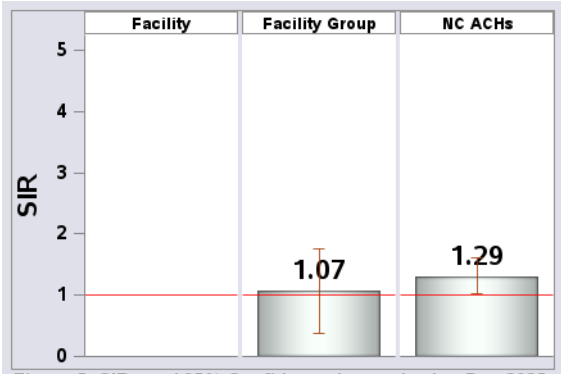


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

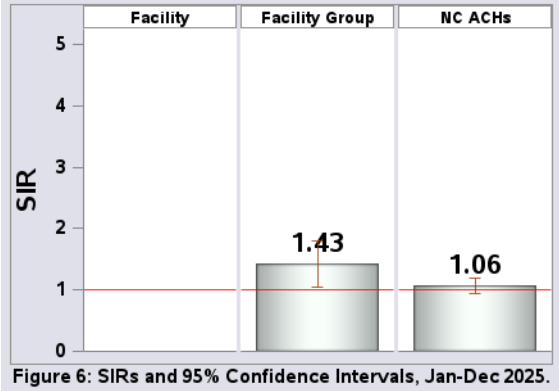


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**3**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

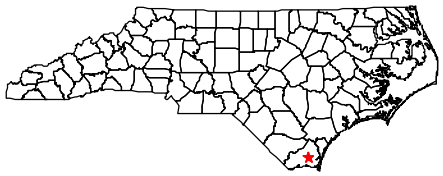
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Novant Health Brunswick Medical Center, Bolivia, Brunswick County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	7,612
Patient Days in 2025:	25,204
Total Number of Beds:	88
Number of ICU Beds:	5
FTE* Infection Preventionists:	0.90
Number of FTEs* per 100 beds:	1.02

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

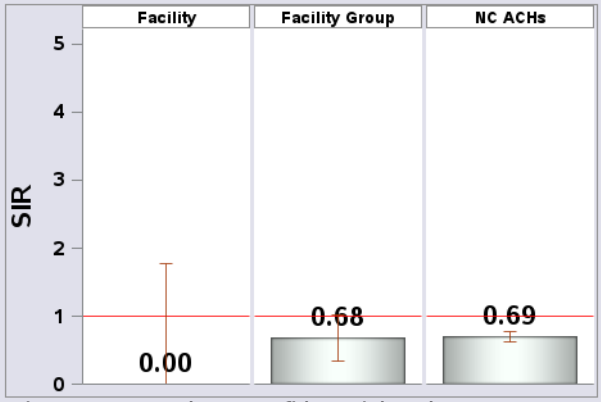


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	1.2	Same
All reporting units	**0**	**1.7**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

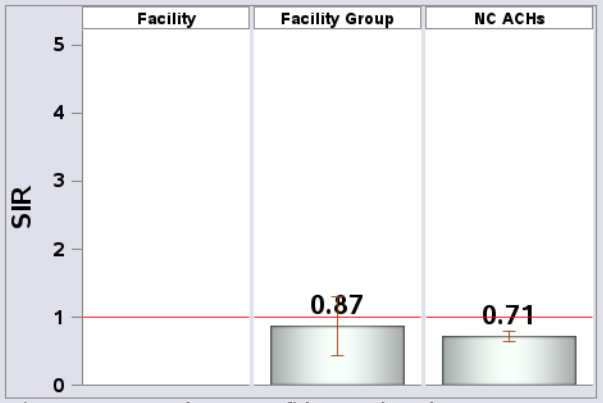


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

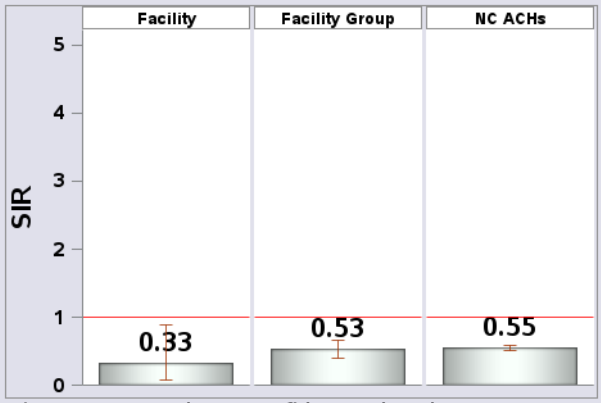


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**3**	**9.1**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Novant Health Brunswick Medical Center, Bolivia, Brunswick County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

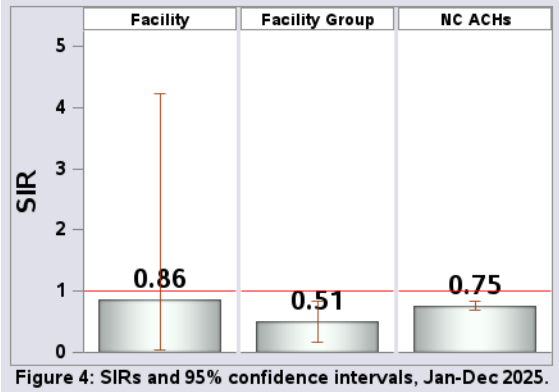


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	1	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**1**	**1.2**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

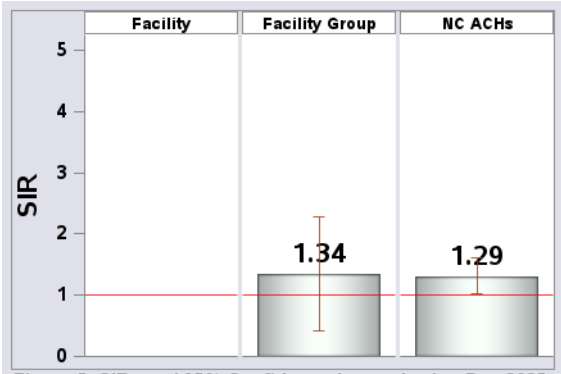


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

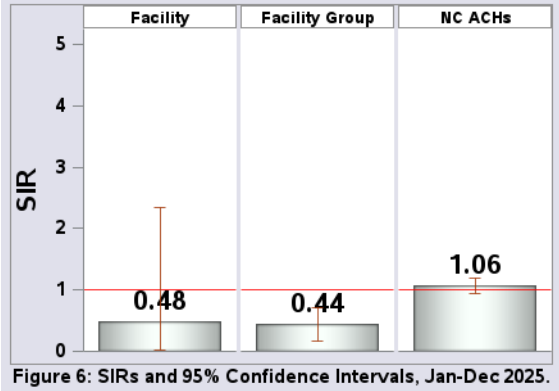


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**2.1**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Novant Health Charlotte Orthopedic Hospital, Charlotte, Mecklenburg County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Specialty Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	3,248
Patient Days in 2025:	13,487
Total Number of Beds:	42
Number of ICU Beds:	0
FTE* Infection Preventionists:	0.30
Number of FTEs* per 100 beds:	0.71

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	0	Less than 1.0	No Conclusion

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

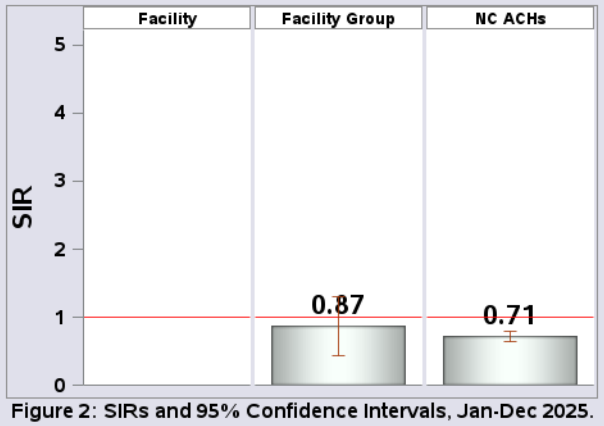


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

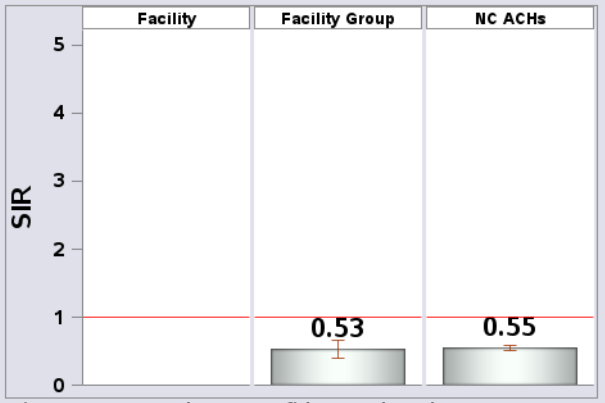


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	0	Less than 1.0	No Conclusion

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Novant Health Charlotte Orthopedic Hospital, Charlotte, Mecklenburg County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Surgical Site Infections (SSI) after Colon Surgeries

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Novant Health Clemmons Medical Center, Clemmons, Forsyth County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	3,896
Patient Days in 2025:	8,306
Total Number of Beds:	36
Number of ICU Beds:	0
FTE* Infection Preventionists:	0.50
Number of FTEs* per 100 beds:	1.39

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

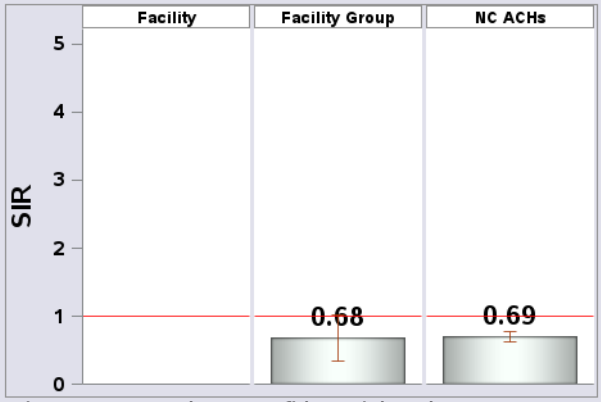


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

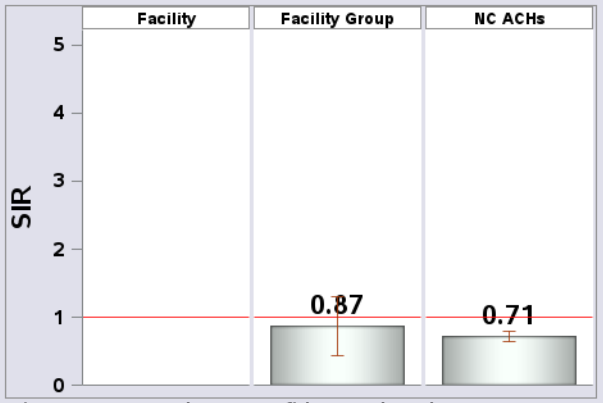


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

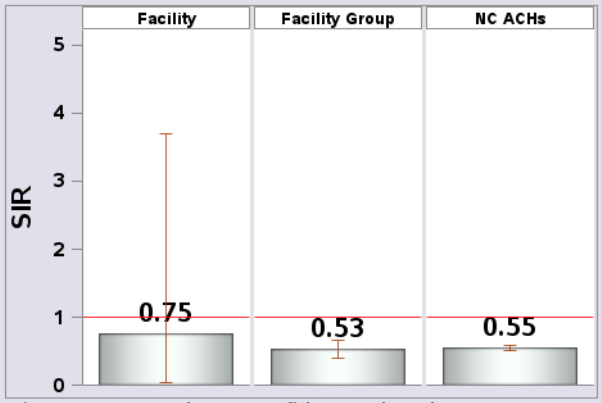


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**1.3**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Novant Health Clemmons Medical Center, Clemmons, Forsyth County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

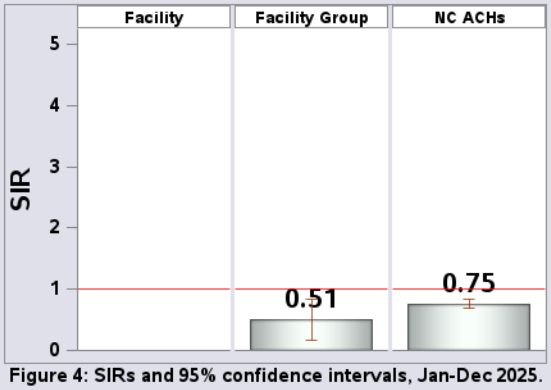


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

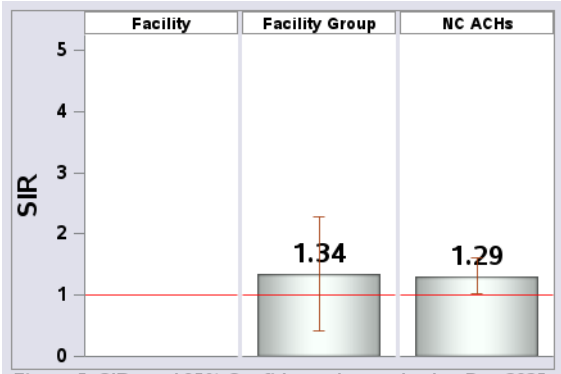


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

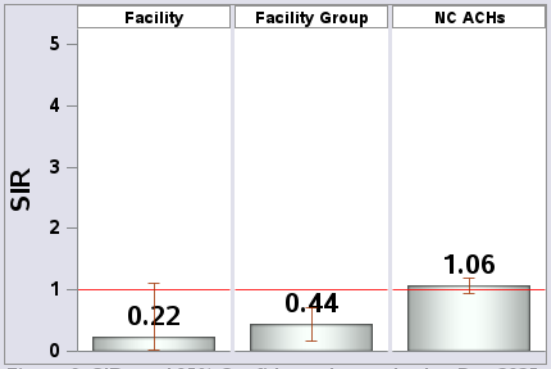


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**4.5**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Novant Health Forsyth Medical Center, Winston Salem, Forsyth County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	43,849
Patient Days in 2025:	242,517
Total Number of Beds:	881
Number of ICU Beds:	154
FTE* Infection Preventionists:	7.60
Number of FTEs* per 100 beds:	0.86

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

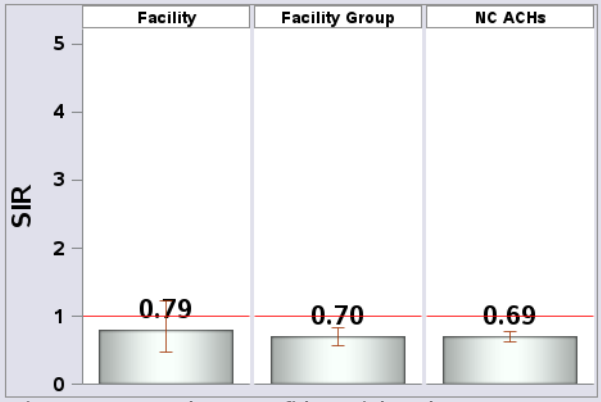


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	11	15	Same
Adult/Ped Wards	6	7.0	Same
All reporting units	**17**	**22**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**7**	**25**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

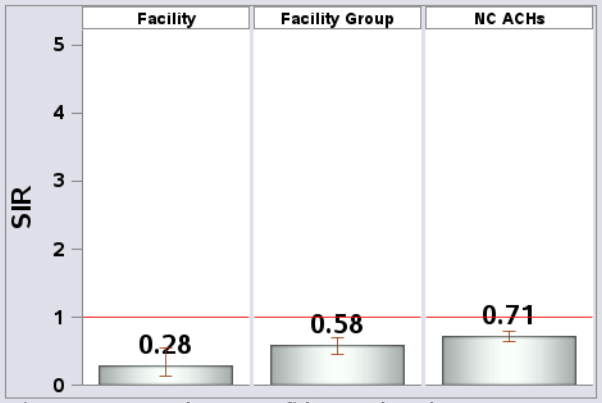


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

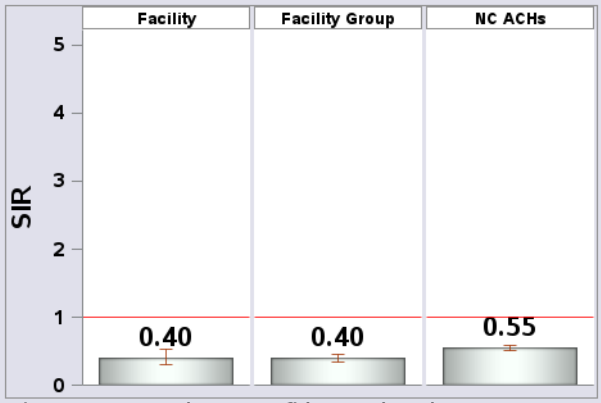


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**48**	**121**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Novant Health Forsyth Medical Center, Winston Salem, Forsyth County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

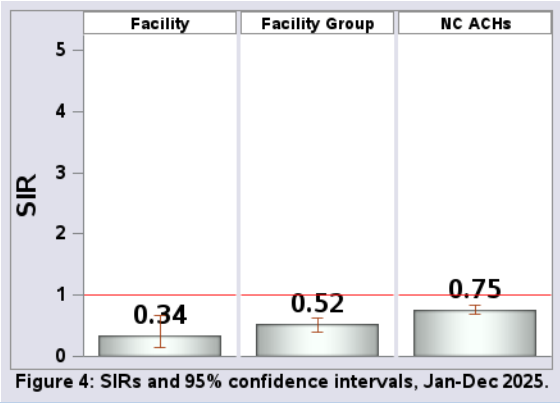


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	5	15	Better
Adult/Ped Wards	0	4.9	Better
Neonatal Units	2	Less than 1.0	No Conclusion
All reporting units	**7**	**21**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**2.2**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

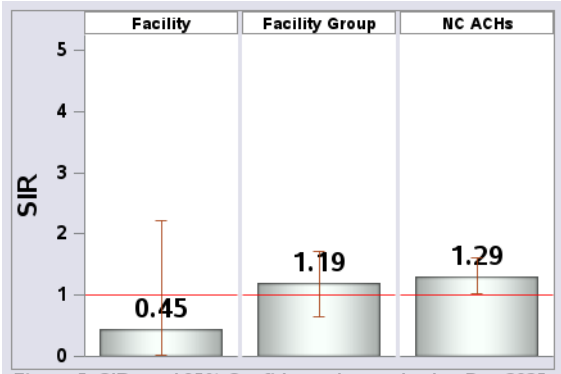


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

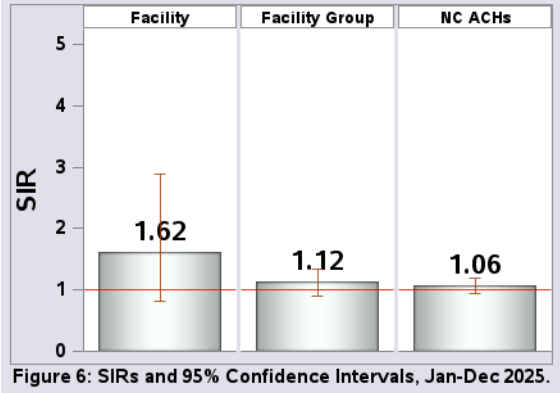


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**10**	**6.2**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Novant Health Huntersville Medical Center, Huntersville, Mecklenburg County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	12,537
Patient Days in 2025:	45,751
Total Number of Beds:	193
Number of ICU Beds:	8
FTE* Infection Preventionists:	1.40
Number of FTEs* per 100 beds:	0.73

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

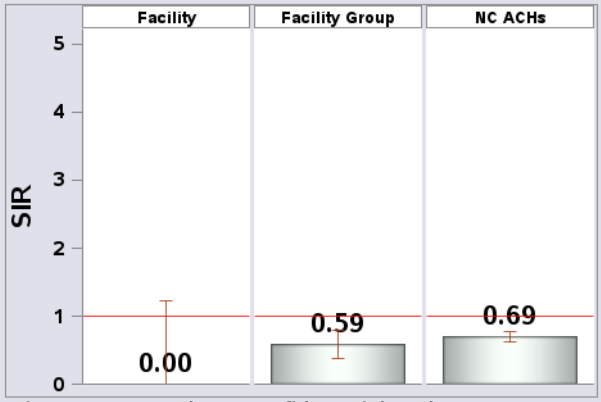


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	1.9	Same
All reporting units	**0**	**2.5**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**1.6**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

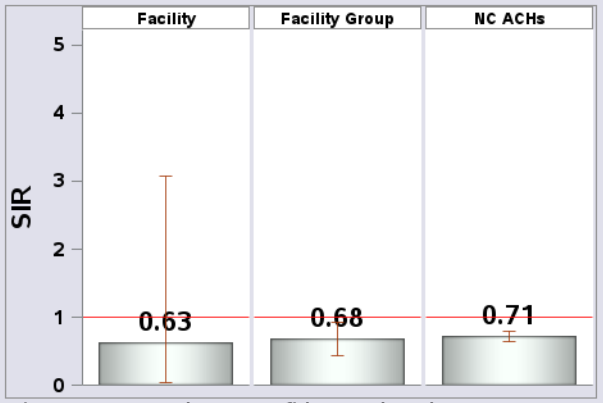


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

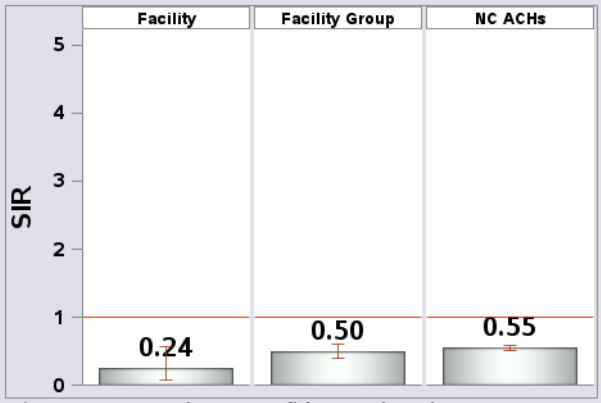


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**4**	**17**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

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N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Novant Health Huntersville Medical Center, Huntersville, Mecklenburg County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

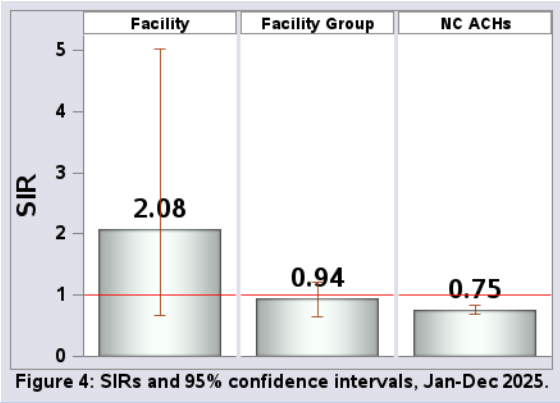

Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	1	Less than 1.0	No Conclusion
Adult/Ped Wards	3	1.4	Same
Neonatal Units	0	Less than 1.0	No Conclusion
All reporting units	**4**	**1.9**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

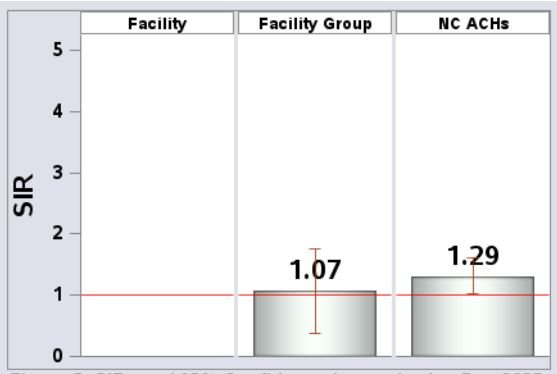

Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

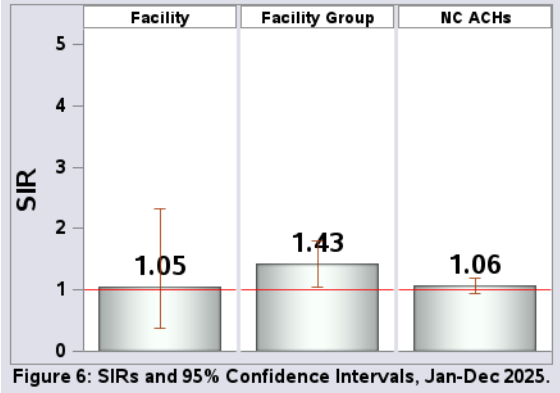

Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**5**	**4.8**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Novant Health Kernersville Medical Center, Kernersville, Forsyth County

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2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	7,297
Patient Days in 2025:	23,638
Total Number of Beds:	100
Number of ICU Beds:	8
FTE* Infection Preventionists:	0.70
Number of FTEs* per 100 beds:	0.70

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

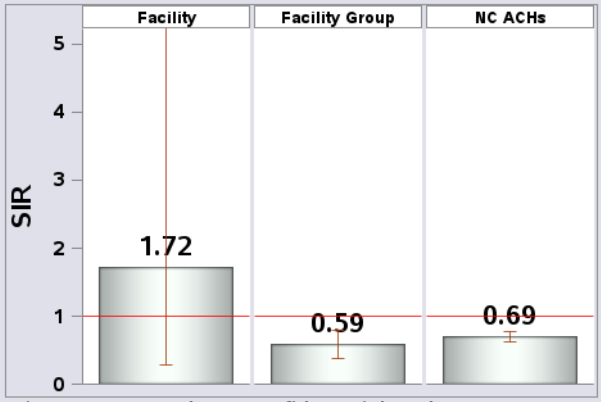

Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	2	Less than 1.0	No Conclusion
All reporting units	**2**	**1.2**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

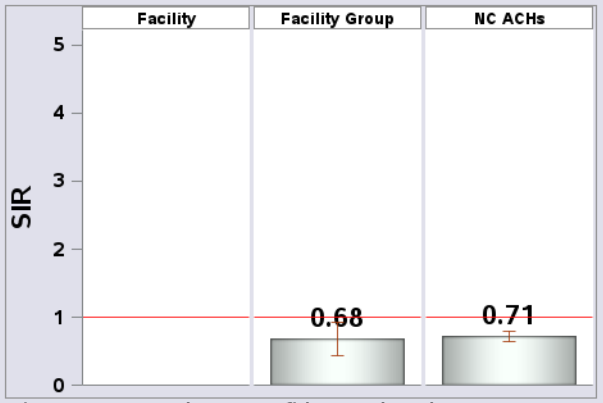

Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

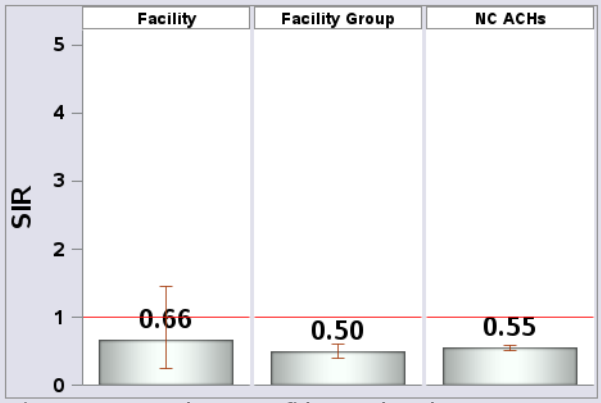

Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**5**	**7.6**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Novant Health Kernersville Medical Center, Kernersville, Forsyth County

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Central Line-Associated Bloodstream Infections (CLABSI)

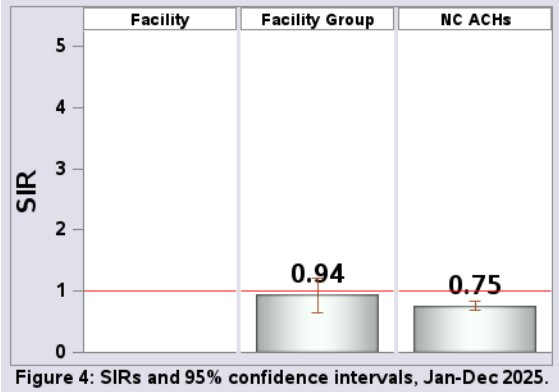


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

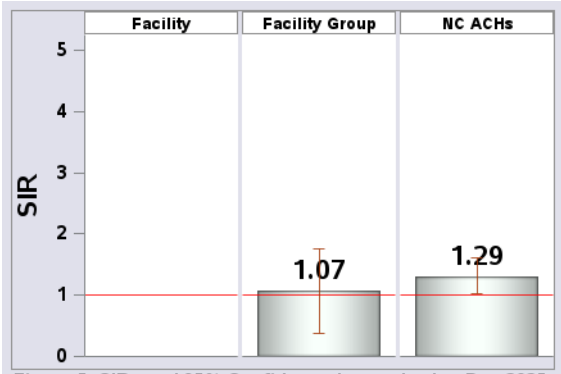
Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison



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Surgical Site Infections (SSI) after Colon Surgeries

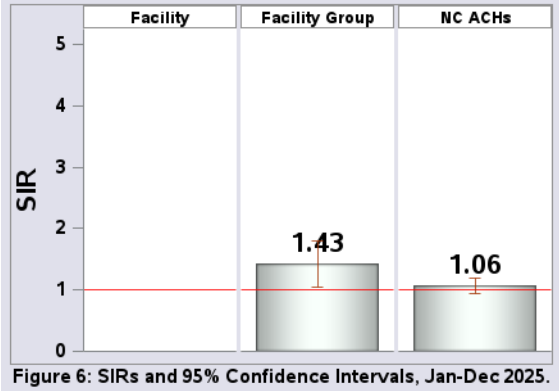

Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Novant Health Matthews Medical Center, Matthews, Mecklenburg County

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2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	14,480
Patient Days in 2025:	51,509
Total Number of Beds:	221
Number of ICU Beds:	24
FTE* Infection Preventionists:	1.40
Number of FTEs* per 100 beds:	0.63

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

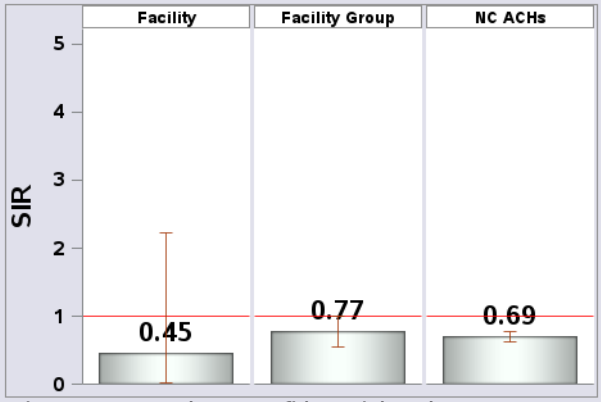


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	1	1.6	Same
All reporting units	**1**	**2.2**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

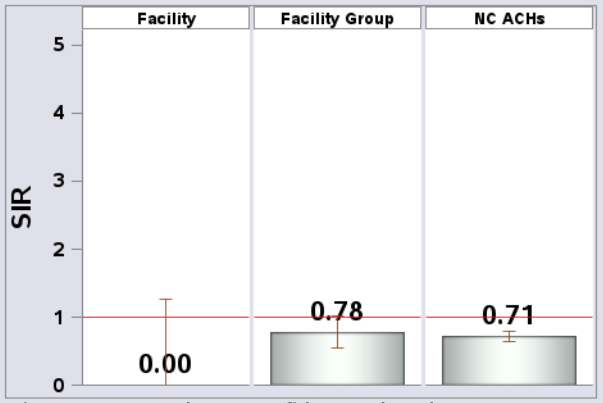
Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**2.4**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience



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Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

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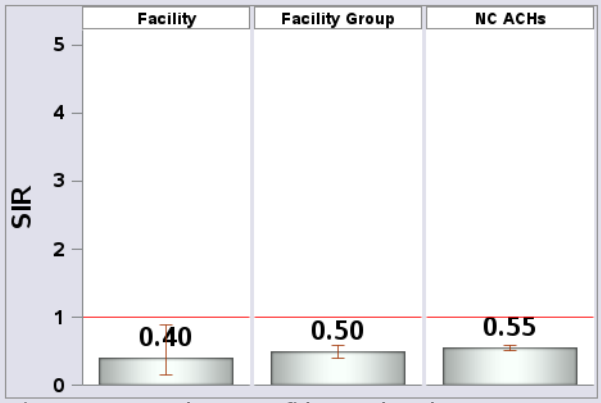

Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**5**	**13**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
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Central Line-Associated Bloodstream Infections (CLABSI)

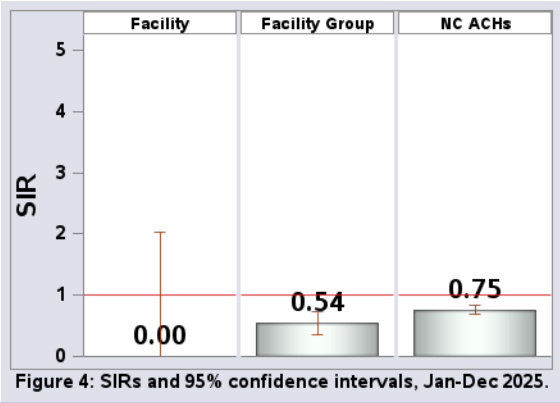

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Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
Neonatal Units	0	Less than 1.0	No Conclusion
All reporting units	**0**	**1.5**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

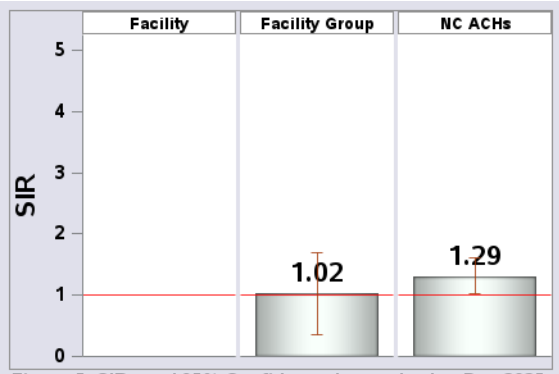
Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**3**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison



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Surgical Site Infections (SSI) after Colon Surgeries

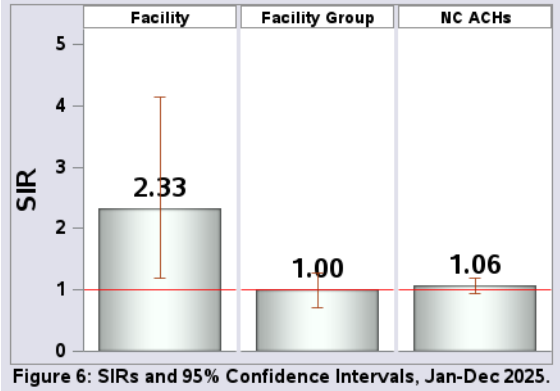

Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**10**	**4.3**	**Worse**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
× Worse: More infections than predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Novant Health Medical Park Hospital, Winston Salem, Forsyth County

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2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	1,522
Patient Days in 2025:	2,558
Total Number of Beds:	33
Number of ICU Beds:	0
FTE* Infection Preventionists:	0.40
Number of FTEs* per 100 beds:	1.21

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

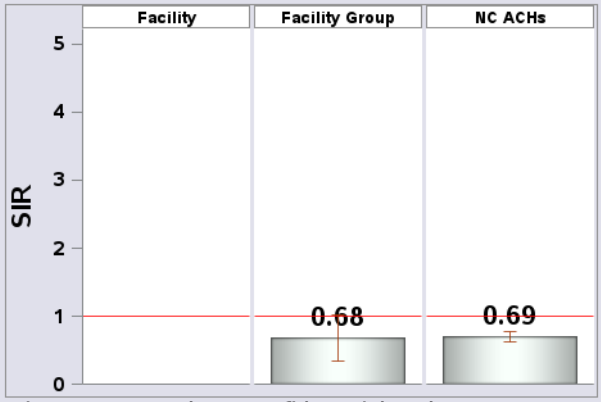

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Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
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How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

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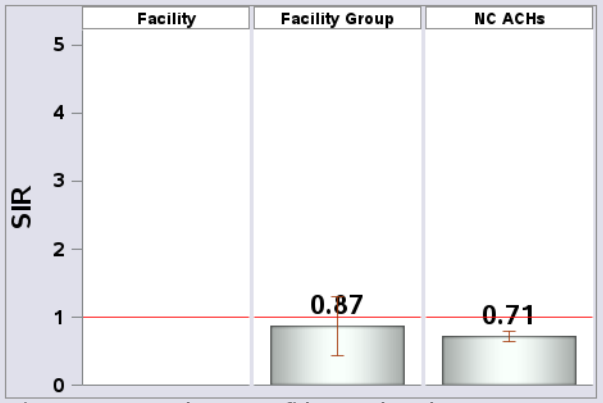

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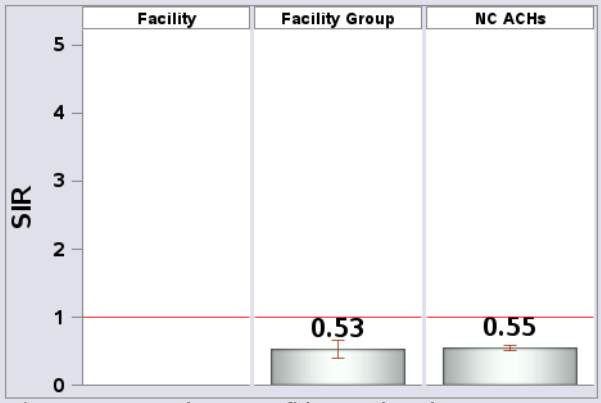

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Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

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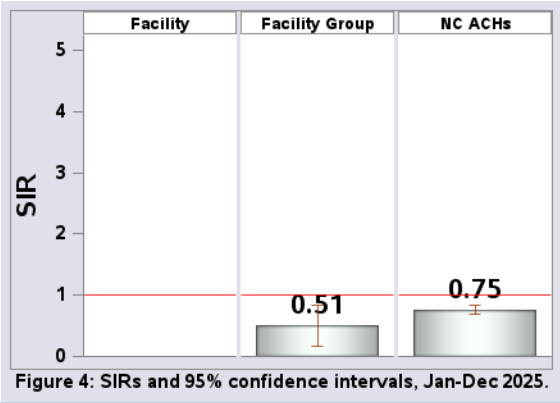

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Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

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Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
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Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**4**	**1.5**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

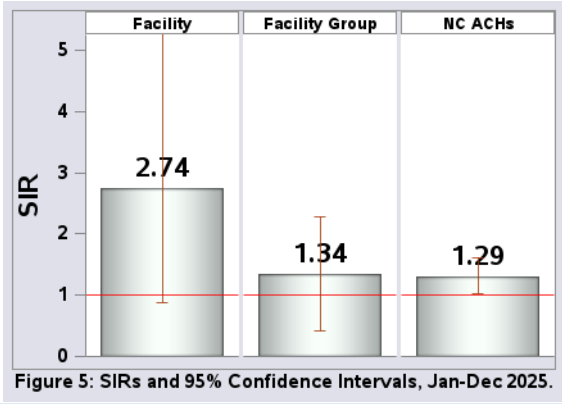


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

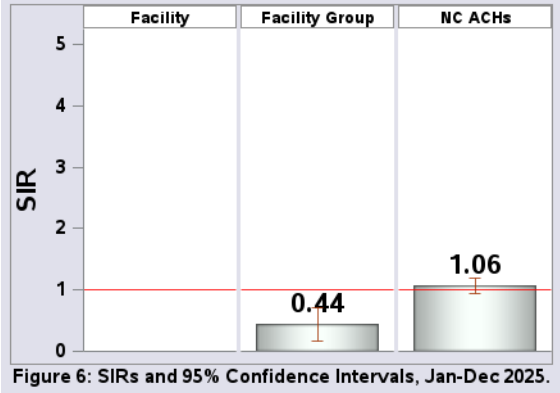


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Novant Health New Hanover Orthopedic Hospital, Wilmington, New Hanover County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Specialty Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	3,270
Patient Days in 2025:	10,467
Total Number of Beds:	55
Number of ICU Beds:	0
FTE* Infection Preventionists:	0.20
Number of FTEs* per 100 beds:	0.36

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	0	Less than 1.0	No Conclusion

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

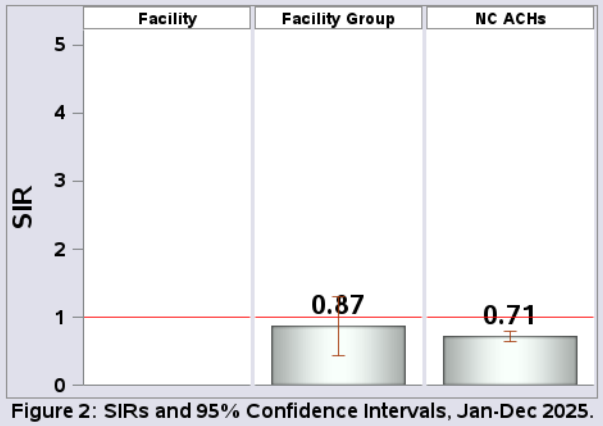


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

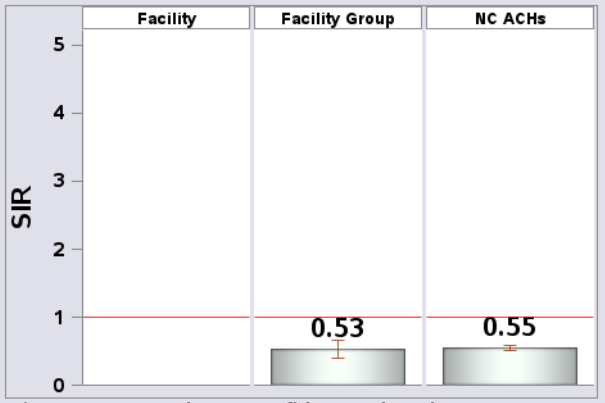


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	1	Less than 1.0	No Conclusion

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Novant Health New Hanover Orthopedic Hospital, Wilmington, New Hanover County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Surgical Site Infections (SSI) after Colon Surgeries

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Novant Health Presbyterian Medical Center, Charlotte, Mecklenburg County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	32,886
Patient Days in 2025:	198,252
Total Number of Beds:	642
Number of ICU Beds:	116
FTE* Infection Preventionists:	6.30
Number of FTEs* per 100 beds:	0.98

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

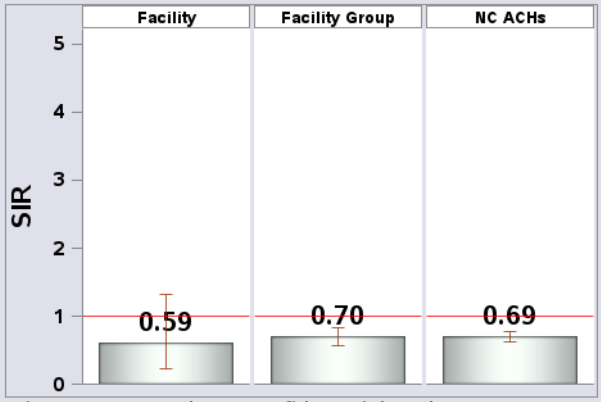


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	2	5.5	Same
Adult/Ped Wards	3	2.9	Same
All reporting units	**5**	**8.4**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**7**	**12**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

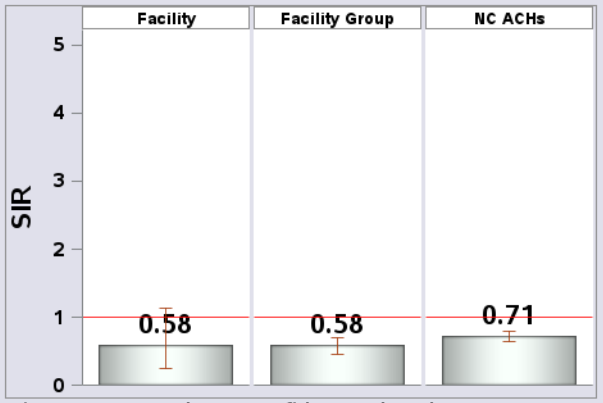


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

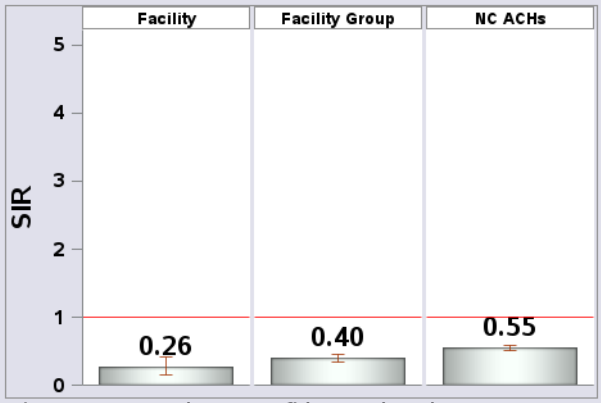


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**15**	**58**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Novant Health Presbyterian Medical Center, Charlotte, Mecklenburg County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

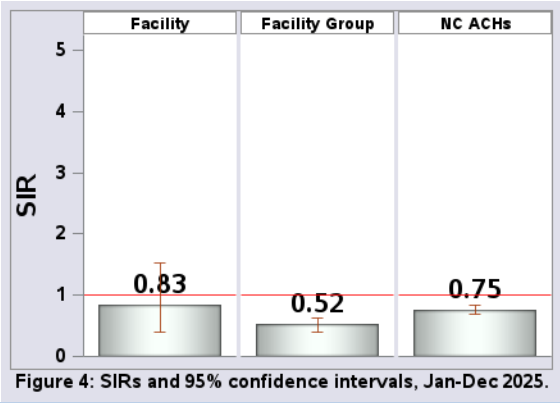


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	6	5.2	Same
Adult/Ped Wards	1	2.5	Same
Neonatal Units	2	3.1	Same
All reporting units	**9**	**11**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**2.7**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

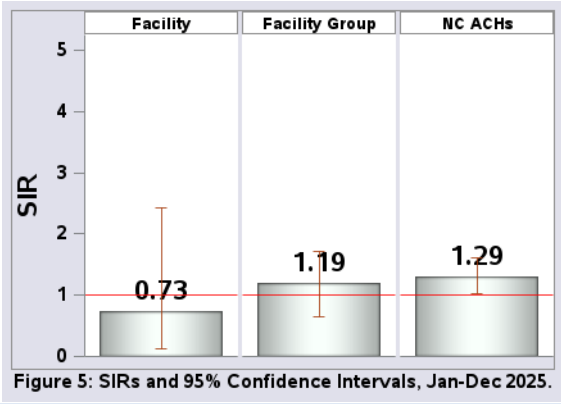


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

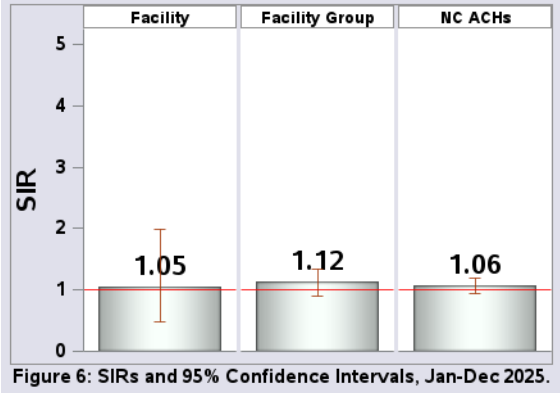


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**8**	**7.7**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

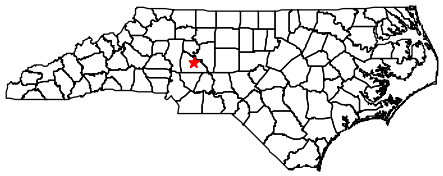
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Novant Health Rowan Medical Center, Salisbury, Rowan County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	13,193
Patient Days in 2025:	62,059
Total Number of Beds:	245
Number of ICU Beds:	12
FTE* Infection Preventionists:	1.40
Number of FTEs* per 100 beds:	0.57

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

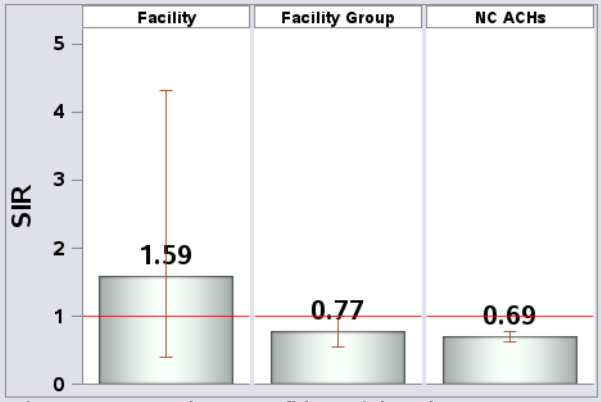


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	3	1.3	Same
All reporting units	**3**	**1.9**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**1.8**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

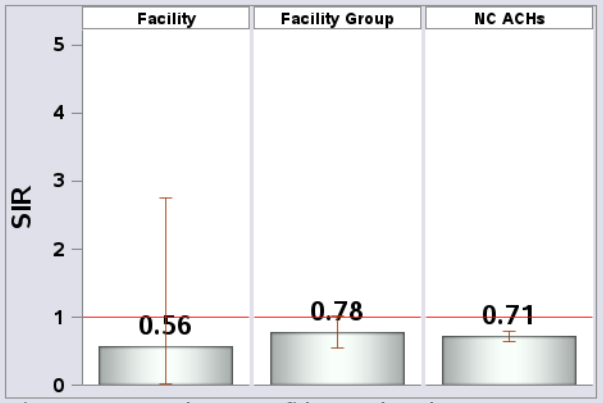


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

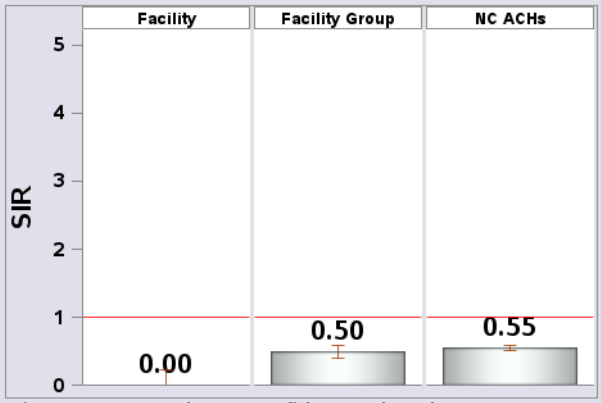


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**13**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Novant Health Rowan Medical Center, Salisbury, Rowan County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

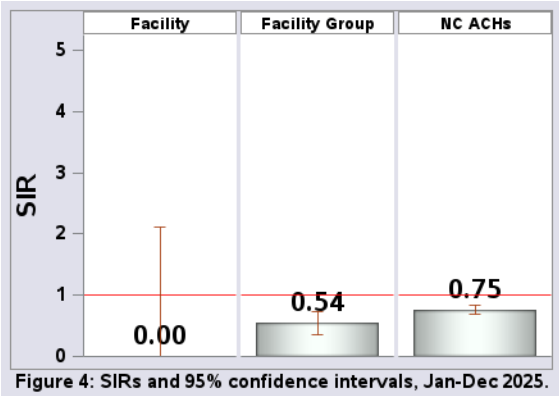


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**1.4**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

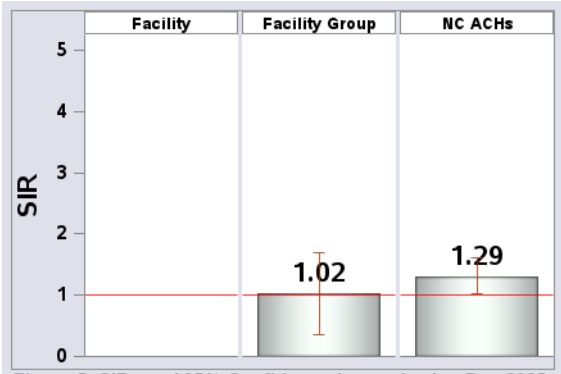


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

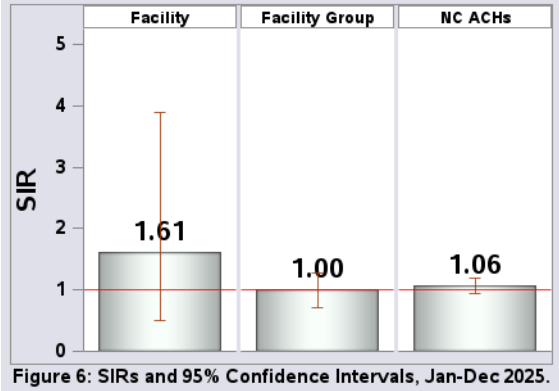


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**4**	**2.5**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Novant Health Thomasville Medical Center, Thomasville, Davidson County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	6,309
Patient Days in 2025:	24,209
Total Number of Beds:	129
Number of ICU Beds:	13
FTE* Infection Preventionists:	1.10
Number of FTEs* per 100 beds:	0.85

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

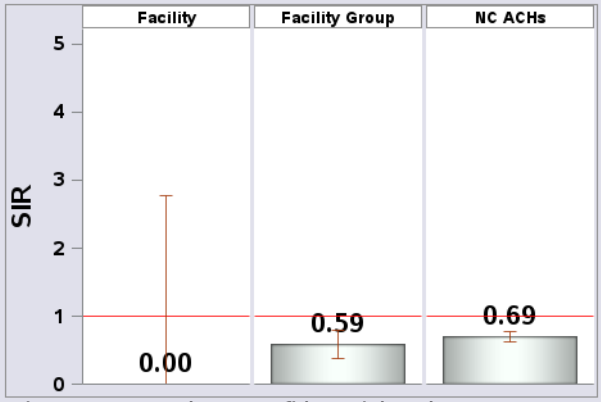


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**1.1**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

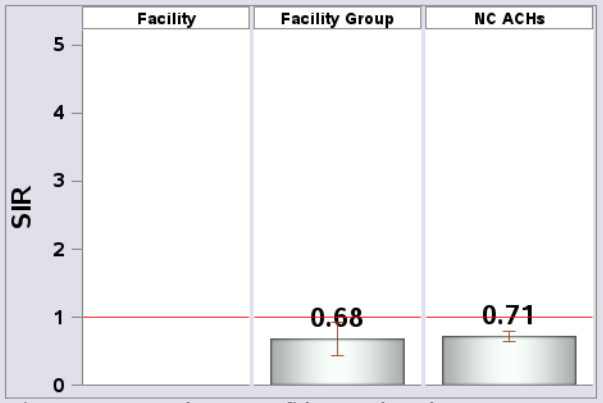


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

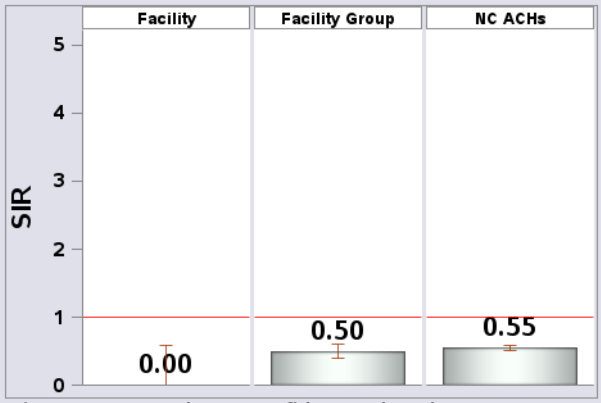


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**5.1**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Novant Health Thomasville Medical Center, Thomasville, Davidson County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

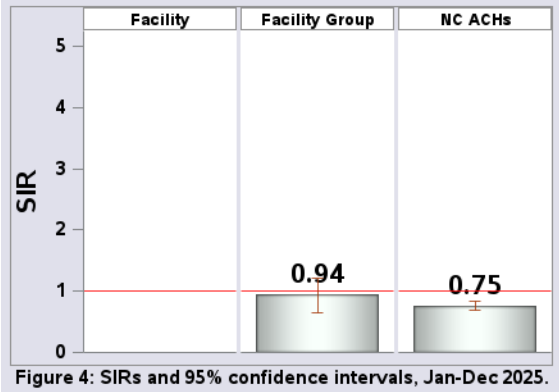


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

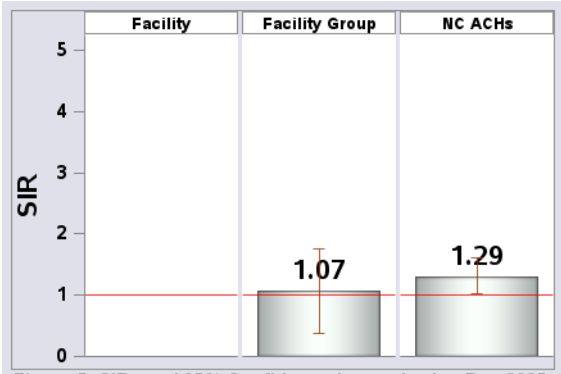


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

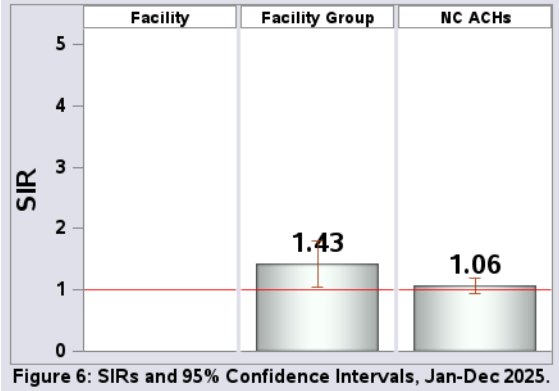


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Onslow Memorial Hospital, Jacksonville, Onslow County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	No
Admissions in 2025:	7,774
Patient Days in 2025:	37,640
Total Number of Beds:	162
Number of ICU Beds:	30
FTE* Infection Preventionists:	1.50
Number of FTEs* per 100 beds:	0.93

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

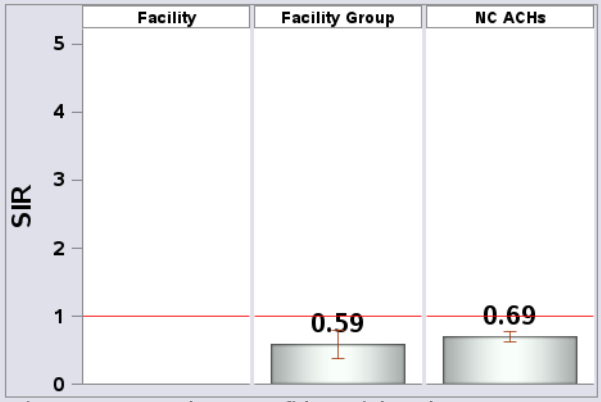


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**1.9**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

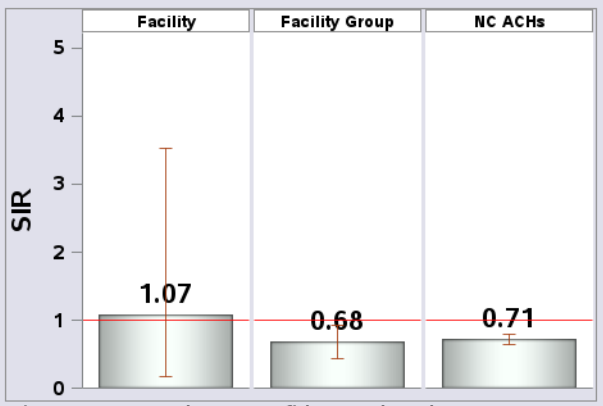


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

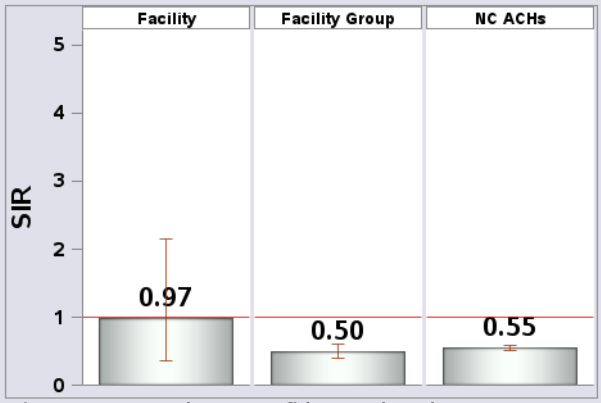


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**5**	**5.1**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Onslow Memorial Hospital, Jacksonville, Onslow County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

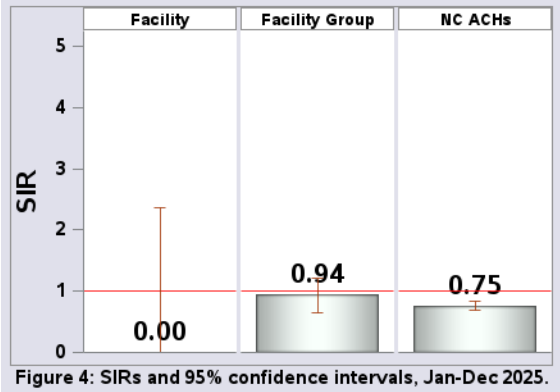


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	1.3	Same
All reporting units	**0**	**1.3**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

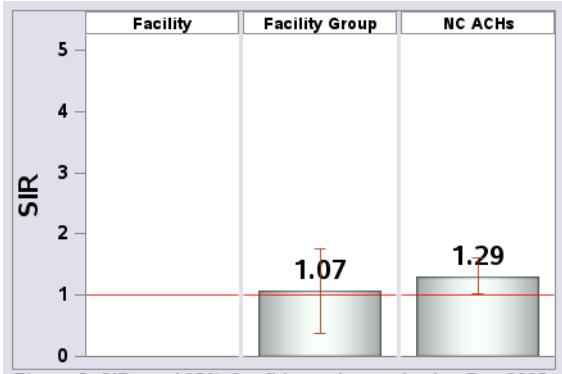


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

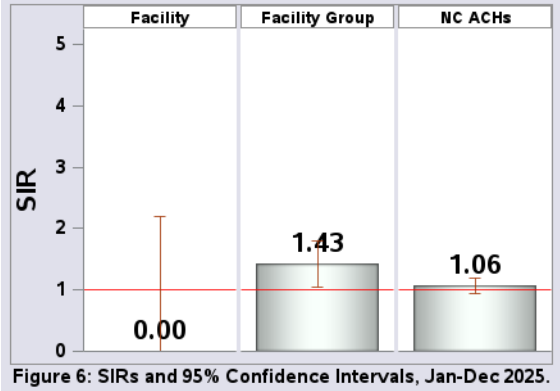


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**1.4**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Pam Specialty Hospital Of Rocky Mount, Rocky Mount, Nash County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Long-term Acute Care Hospital
Admissions in 2025:	338
Patient Days in 2025:	13,242
Total Number of Beds:	50
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	2.00

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

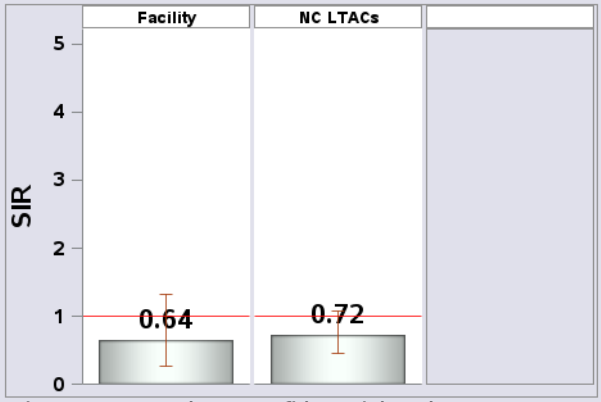


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Reporting Wards	6	9.4	Same
All reporting units	**6**	**9.4**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Note from NCDHHS Division of Public Health: MRSA is not reportable at this facility type after 2018Q3

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

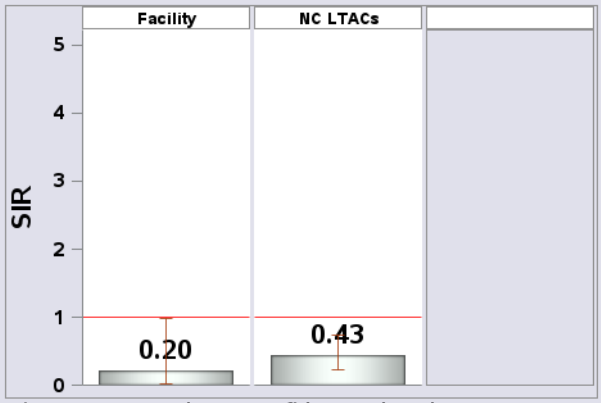


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**5.0**	**Better**
Facility-wide inpatient	**.**	**Less than 1.0**	**No Conclusion**
Facility-wide inpatient	**.**	**Less than 1.0**	**No Conclusion**
Facility-wide inpatient	**.**	**Less than 1.0**	**No Conclusion**
Facility-wide inpatient	**.**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Pam Specialty Hospital Of Rocky Mount, Rocky Mount, Nash County

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Central Line-Associated Bloodstream Infections (CLABSI)

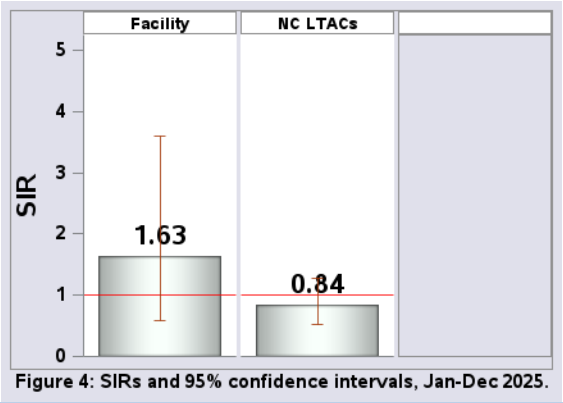


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Reporting Wards	5	3.1	Same
All reporting units	**5**	**3.1**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from NCDHHS Division of Public Health: SSIs are not reportable at this facility type

Surgical Site Infections (SSI) after Colon Surgeries

Note from NCDHHS Division of Public Health: SSIs are not reportable at this facility type

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Pardee Hospital, Hendersonville, Henderson County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Graduate
Admissions in 2025:	7,697
Patient Days in 2025:	34,840
Total Number of Beds:	143
Number of ICU Beds:	13
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	0.70

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

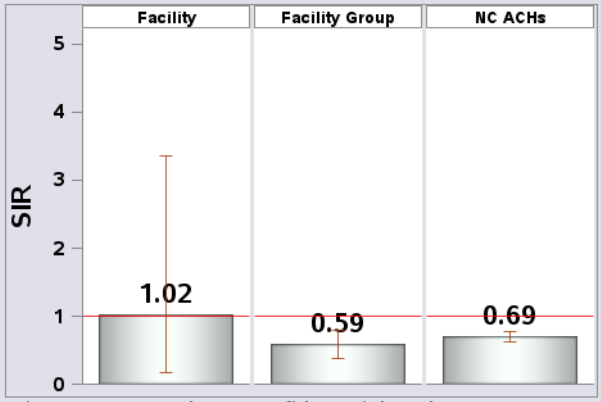


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	1	Less than 1.0	No Conclusion
Adult/Ped Wards	1	1.4	Same
All reporting units	**2**	**2.0**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**3**	**1.5**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

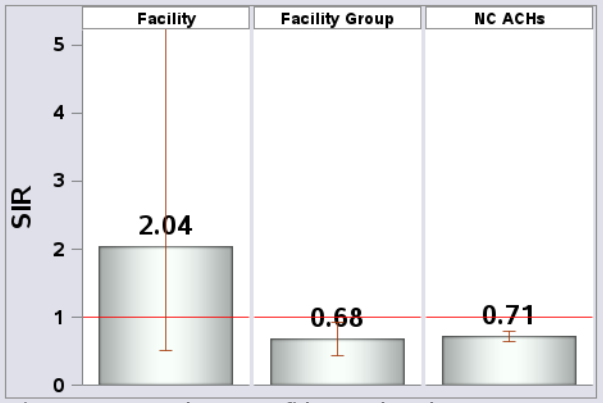


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

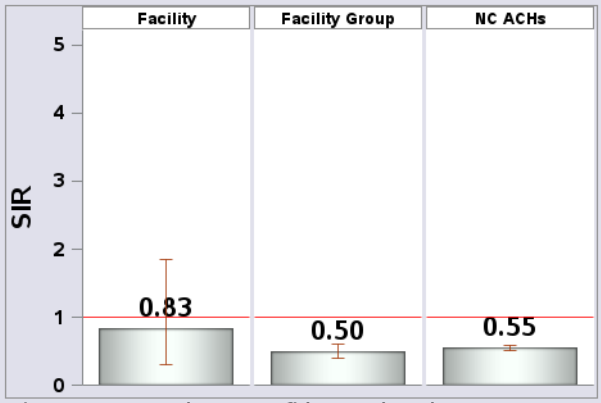


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**5**	**6.0**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Pardee Hospital, Hendersonville, Henderson County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

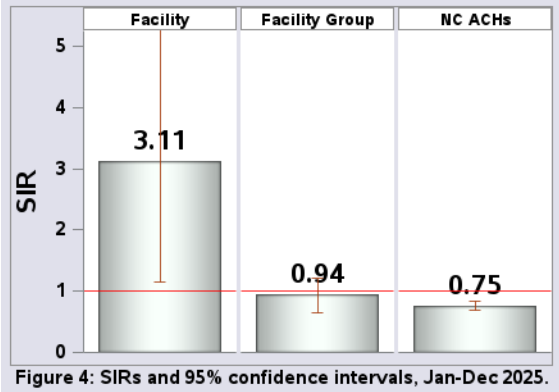


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	2	Less than 1.0	No Conclusion
Adult/Ped Wards	3	Less than 1.0	No Conclusion
All reporting units	**5**	**1.6**	**Worse**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
× Worse: More infections than predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

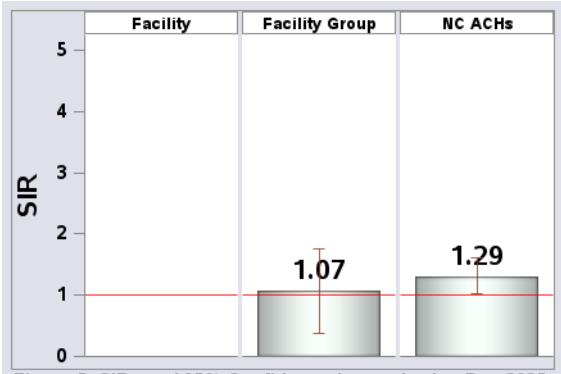


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

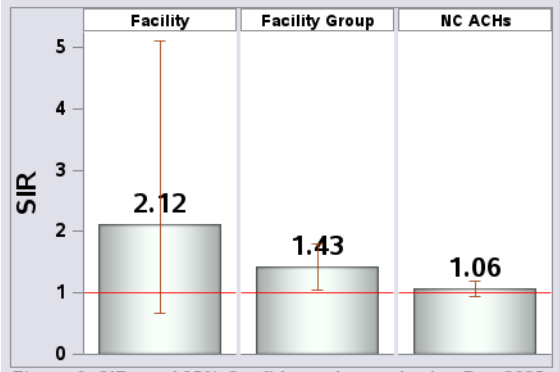


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**4**	**1.9**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Pender Memorial Hospital, Burgaw, Pender County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Critical Access Hospital
Admissions in 2025:	1,197
Patient Days in 2025:	4,447
Total Number of Beds:	25
FTE* Infection Preventionists:	0.70
Number of FTEs* per 100 beds:	2.80

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

Note from N.C. Division of Public Health: Data are unavailable for this time period.

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Pender Memorial Hospital, Burgaw, Pender County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Surgical Site Infections (SSI) after Colon Surgeries

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

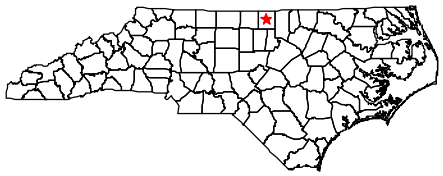
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Person Memorial Hospital, Roxboro, Person County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	1,132
Patient Days in 2025:	3,528
Total Number of Beds:	18
Number of ICU Beds:	6
FTE* Infection Preventionists:	0.88
Number of FTEs* per 100 beds:	4.86

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

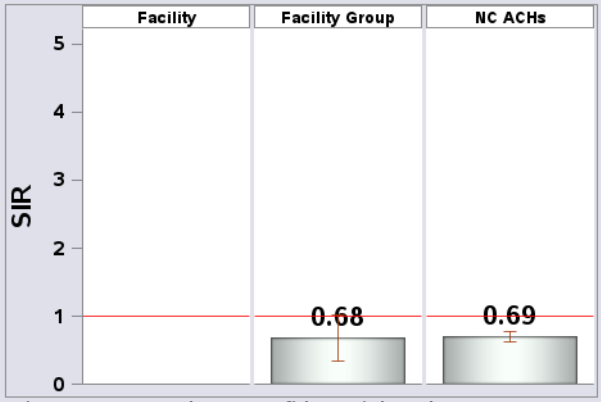


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

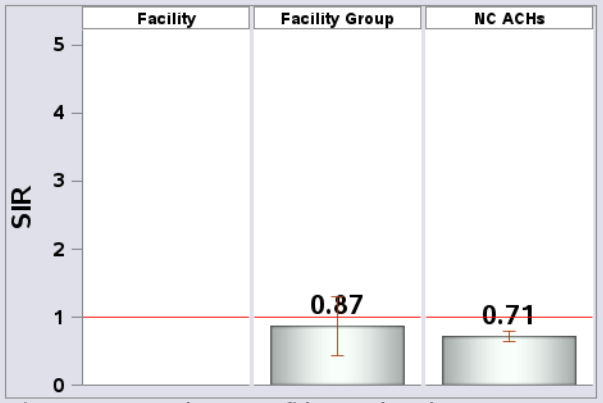


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

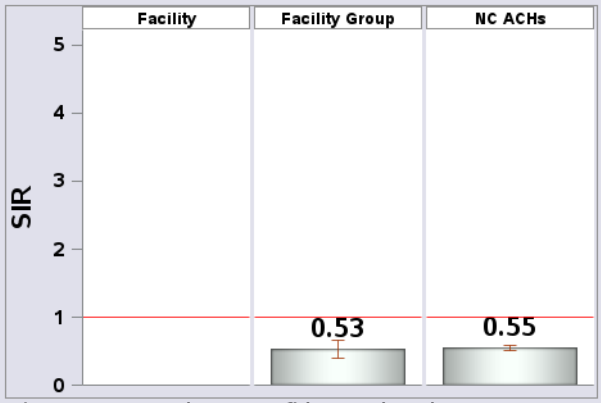


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Person Memorial Hospital, Roxboro, Person County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

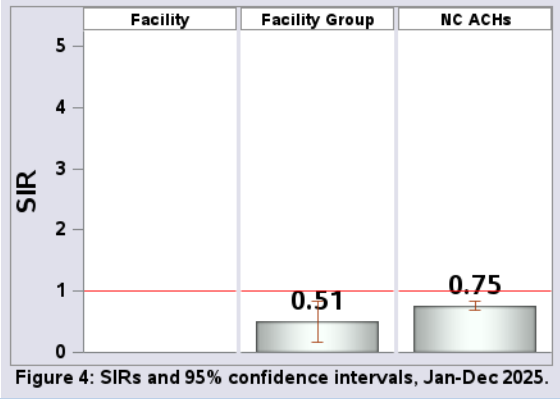


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Surgical Site Infections (SSI) after Colon Surgeries

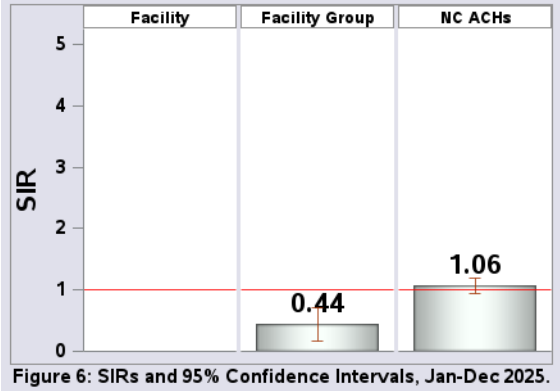


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

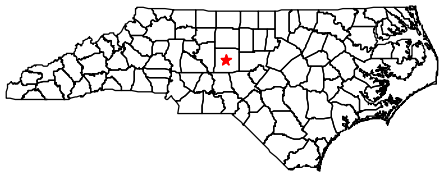
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Randolph Hospital, Asheboro, Randolph County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	No
Admissions in 2025:	5,792
Patient Days in 2025:	19,891
Total Number of Beds:	92
Number of ICU Beds:	10
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	1.09

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

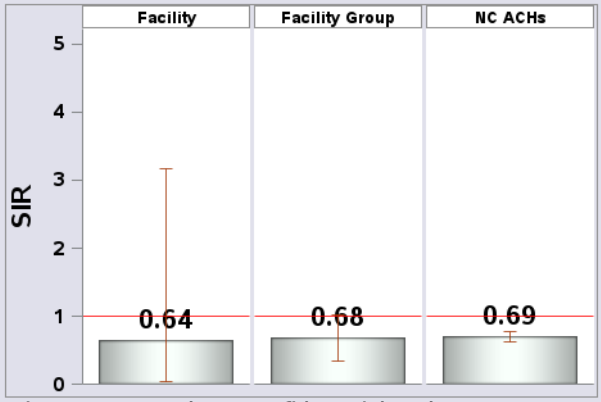


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	1	Less than 1.0	No Conclusion
Adult/Ped Wards	0	1.1	Same
All reporting units	**1**	**1.6**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

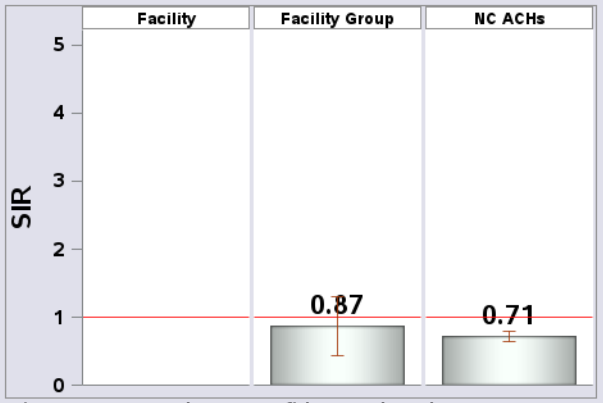


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

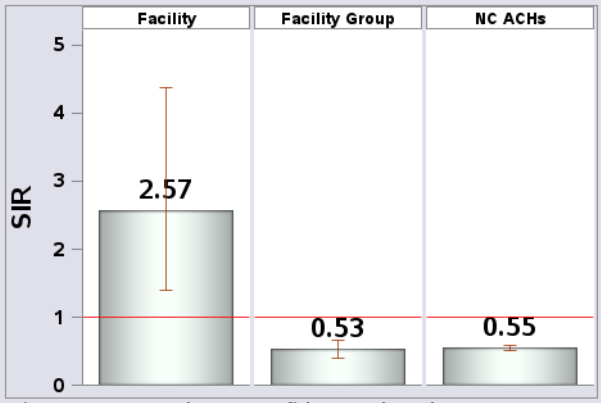


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**12**	**4.7**	**Worse**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
× Worse: More infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Randolph Hospital, Asheboro, Randolph County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

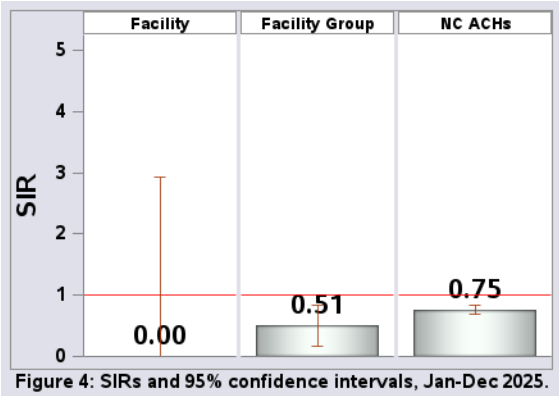


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**1.0**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

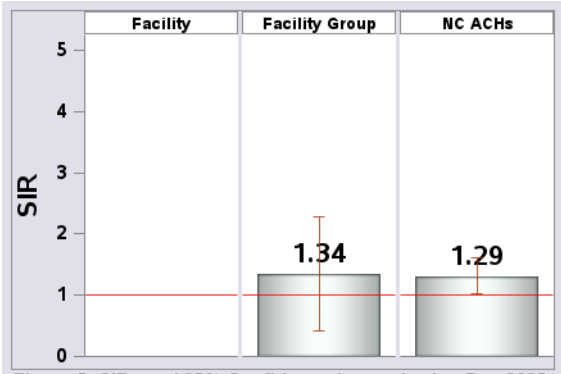


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

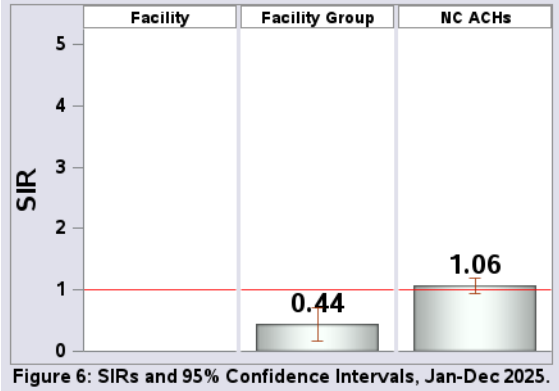


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

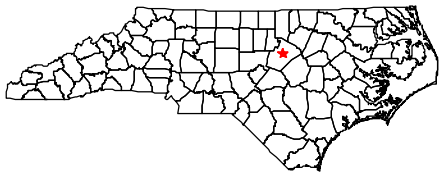
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Rex Healthcare, Raleigh, Wake County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	56,886
Patient Days in 2025:	168,974
Total Number of Beds:	559
Number of ICU Beds:	81
FTE* Infection Preventionists:	4.00
Number of FTEs* per 100 beds:	0.72

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

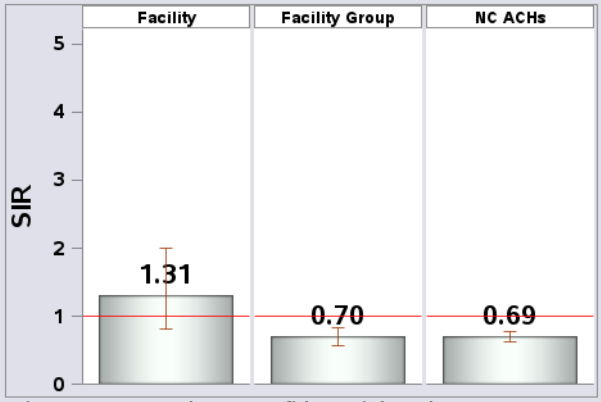


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	8	6.2	Same
Adult/Ped Wards	11	8.4	Same
All reporting units	**19**	**15**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**13**	**9.7**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

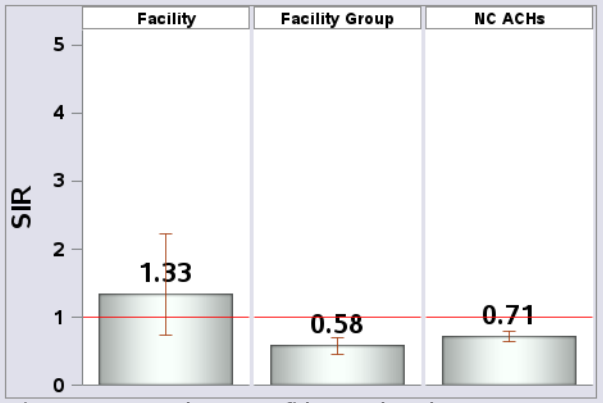


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

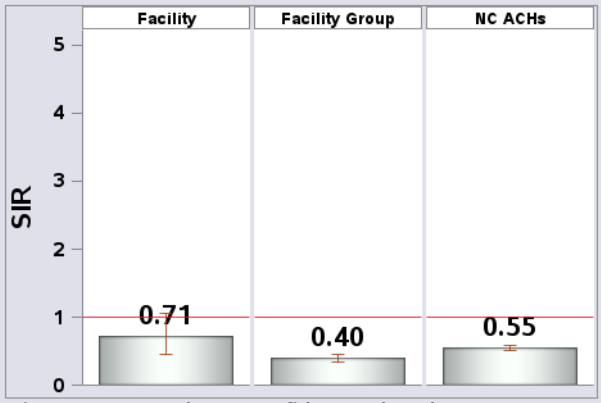


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**23**	**32**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Rex Healthcare, Raleigh, Wake County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

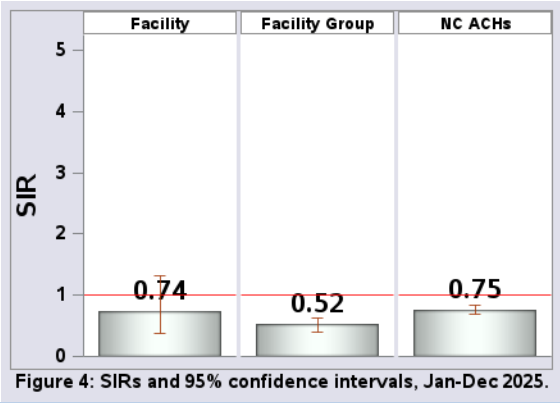


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	3	6.2	Same
Adult/Ped Wards	7	7.1	Same
Neonatal Units	0	Less than 1.0	No Conclusion
All reporting units	**10**	**14**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**1.7**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

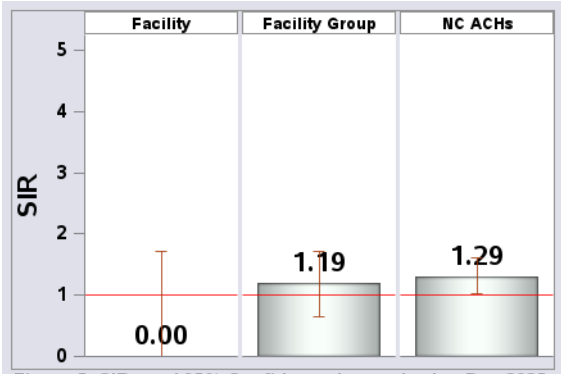


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

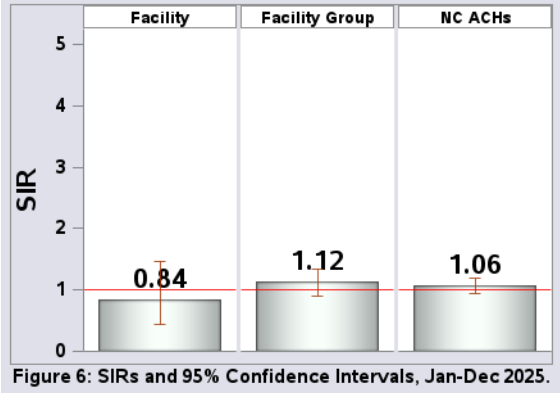


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**11**	**13**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Rutherford Regional Medical Center, Rutherfordton, Rutherford County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	3,620
Patient Days in 2025:	13,859
Total Number of Beds:	82
Number of ICU Beds:	6
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	1.22

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

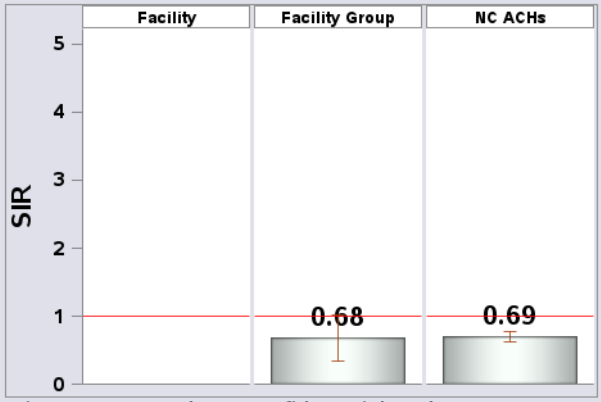


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

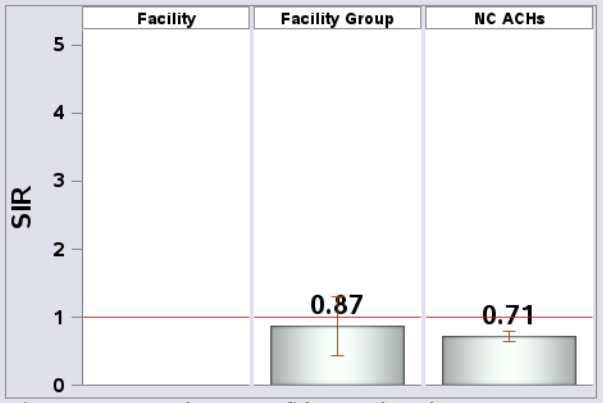


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

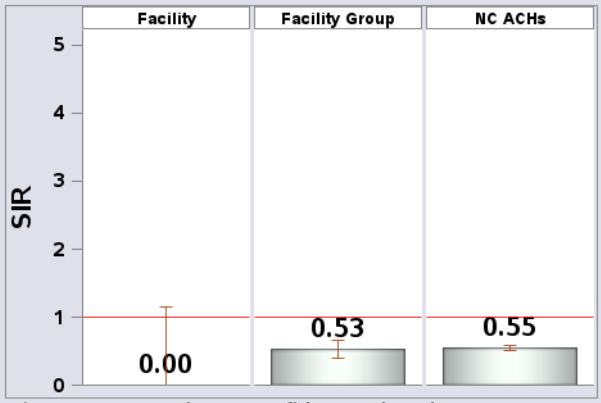


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**2.6**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Rutherford Regional Medical Center, Rutherfordton, Rutherford County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

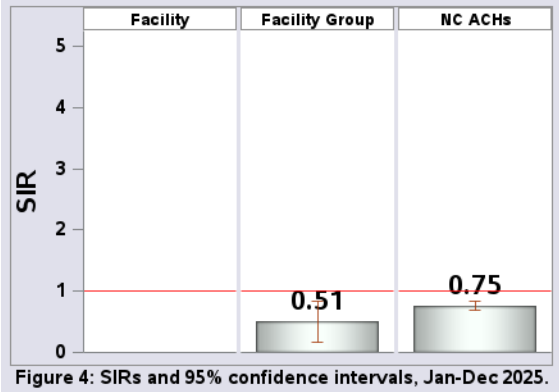


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

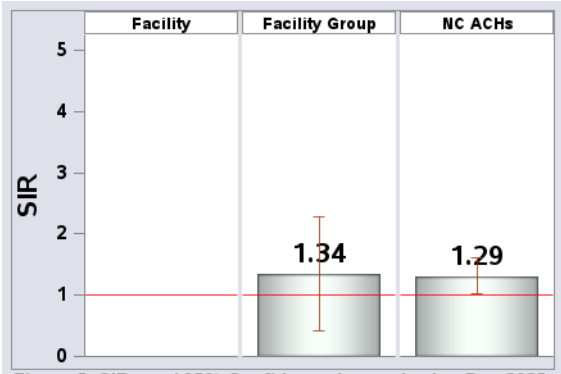


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

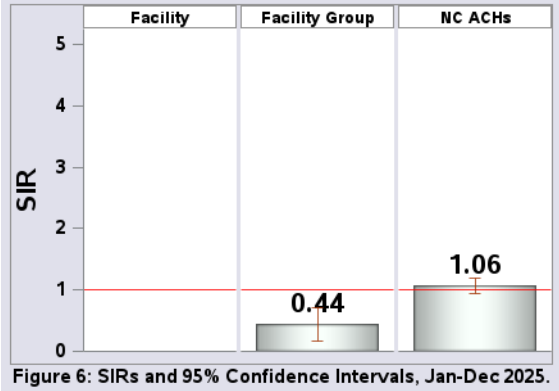


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

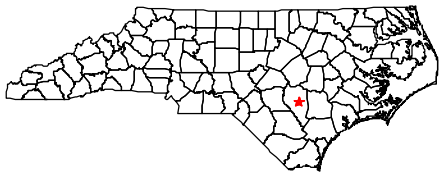
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Sampson Regional Medical Center, Clinton, Sampson County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Graduate
Admissions in 2025:	2,965
Patient Days in 2025:	10,705
Total Number of Beds:	116
Number of ICU Beds:	8
FTE* Infection Preventionists:	0.75
Number of FTEs* per 100 beds:	0.65

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

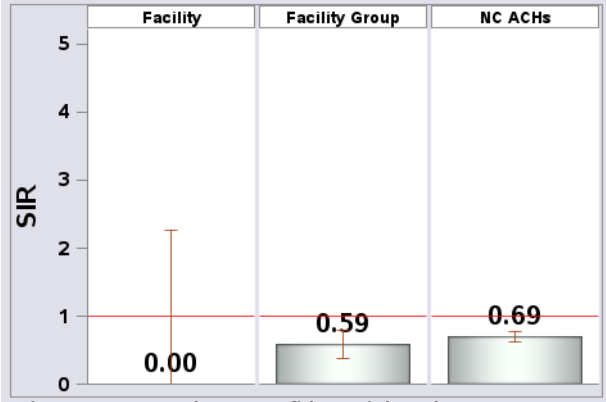


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**1.3**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

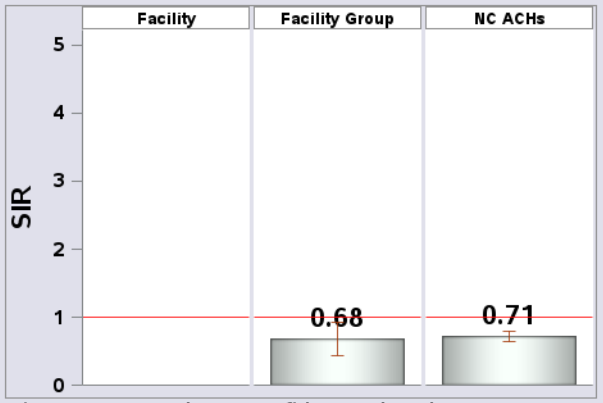


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

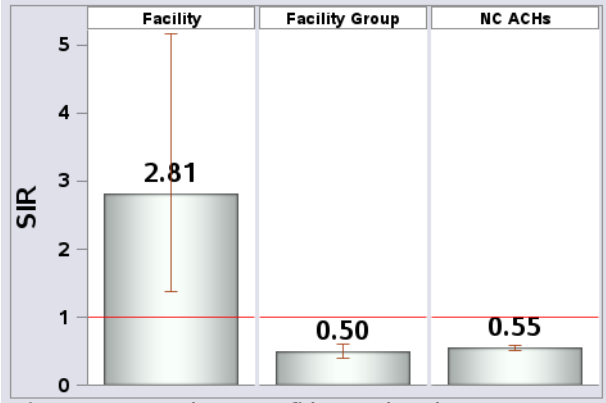


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**9**	**3.2**	**Worse**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
× Worse: More infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Sampson Regional Medical Center, Clinton, Sampson County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

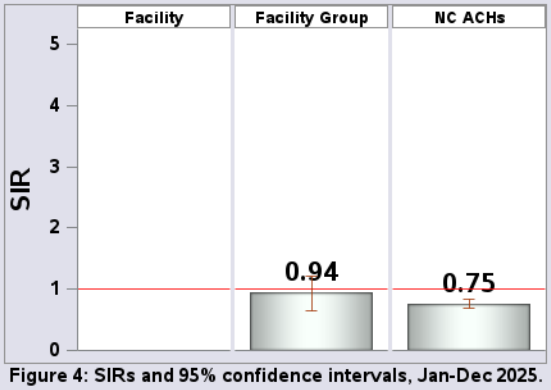


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Surgical Site Infections (SSI) after Colon Surgeries

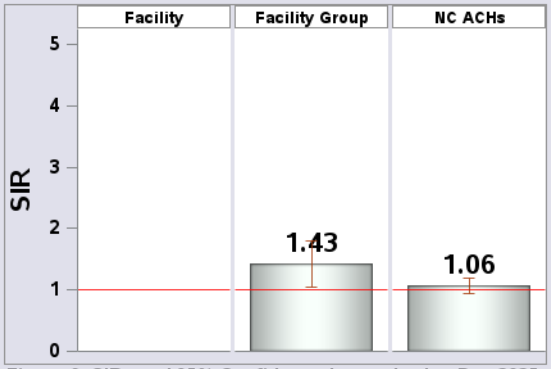


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

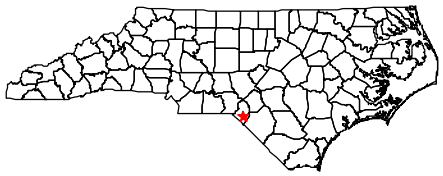
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Scotland Memorial Hospital, Laurinburg, Scotland County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	6,011
Patient Days in 2025:	21,322
Total Number of Beds:	104
Number of ICU Beds:	8
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	0.96

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

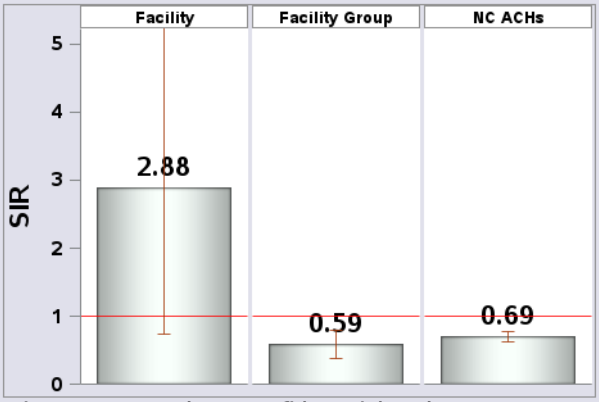


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	3	Less than 1.0	No Conclusion
All reporting units	**3**	**1.0**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**1.1**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

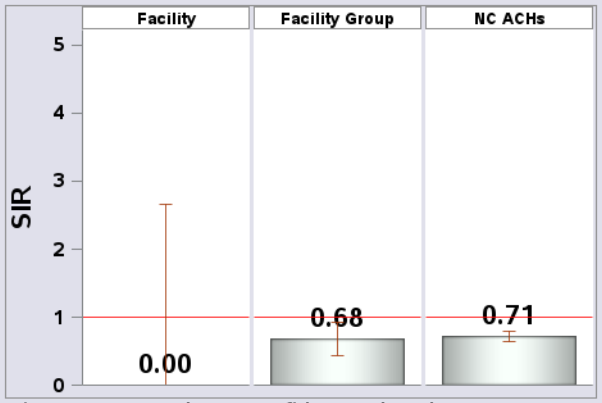


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

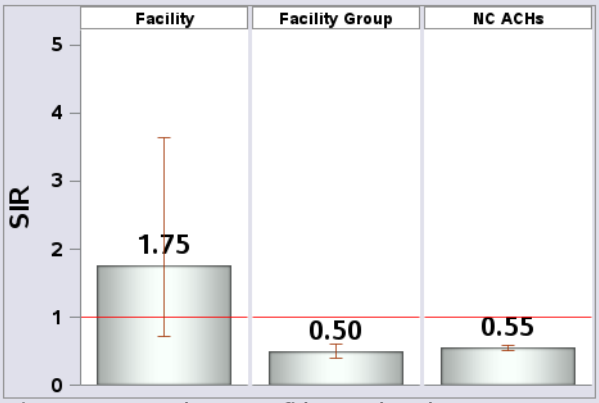


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**6**	**3.4**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Scotland Memorial Hospital, Laurinburg, Scotland County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

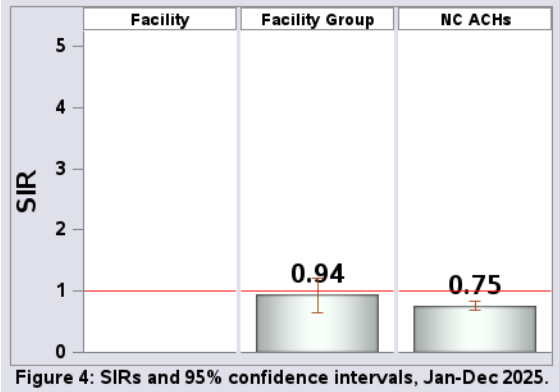


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	1	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

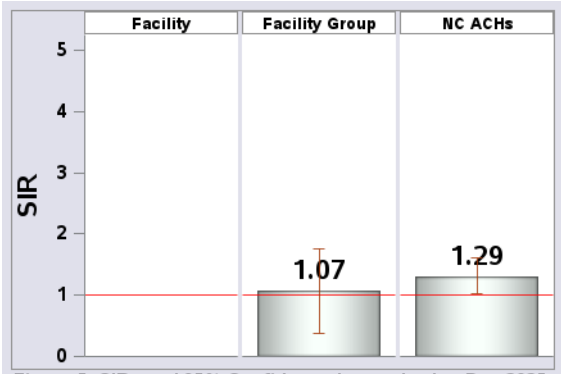


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

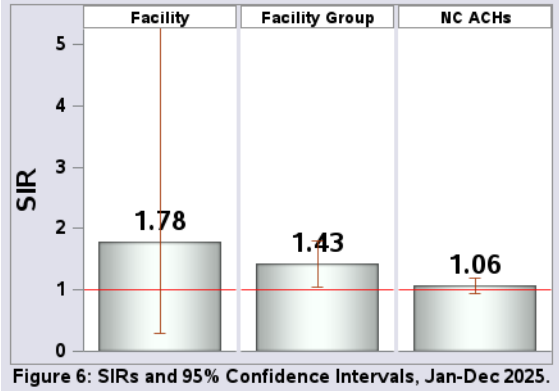


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**1.1**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

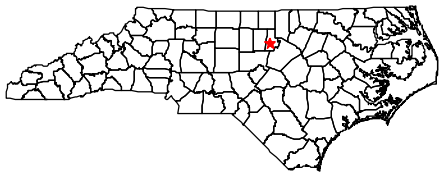
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Select Specialty Hospital-Durham, Durham, Durham County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Long-term Acute Care Hospital
Admissions in 2025:	271
Patient Days in 2025:	8,097
Total Number of Beds:	30
FTE* Infection Preventionists:	0.43
Number of FTEs* per 100 beds:	1.42

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

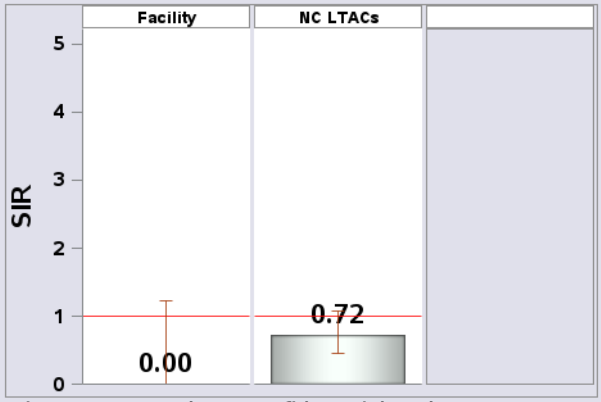


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Reporting Wards	0	2.4	Same
All reporting units	**0**	**2.4**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Note from NCDHHS Division of Public Health: MRSA is not reportable at this facility type after 2018Q3

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

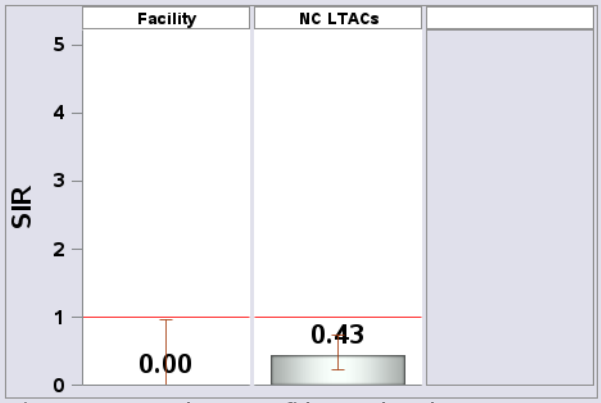


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**3.1**	**Better**
Facility-wide inpatient	**.**	**Less than 1.0**	**No Conclusion**
Facility-wide inpatient	**.**	**Less than 1.0**	**No Conclusion**
Facility-wide inpatient	**.**	**Less than 1.0**	**No Conclusion**
Facility-wide inpatient	**.**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Select Specialty Hospital-Durham, Durham, Durham County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

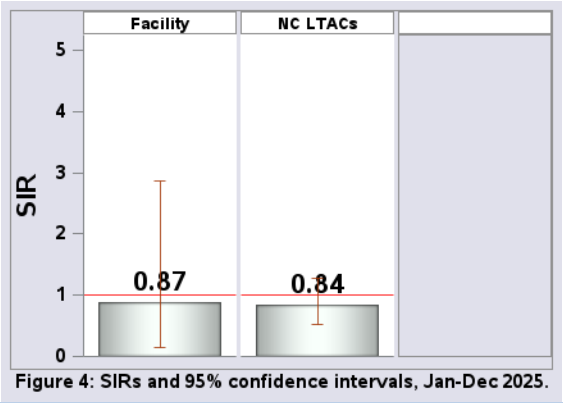


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Reporting Wards	2	2.3	Same
All reporting units	**2**	**2.3**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from NCDHHS Division of Public Health: SSIs are not reportable at this facility type

Surgical Site Infections (SSI) after Colon Surgeries

Note from NCDHHS Division of Public Health: SSIs are not reportable at this facility type

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

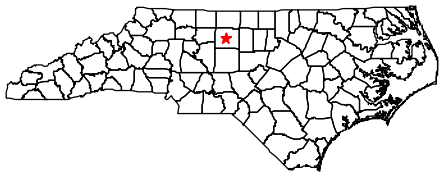
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Select Specialty Hospital-Greensboro, Greensboro, Guilford County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Long-term Acute Care Hospital
Admissions in 2025:	246
Patient Days in 2025:	9,167
Total Number of Beds:	30
FTE* Infection Preventionists:	0.50
Number of FTEs* per 100 beds:	1.67

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

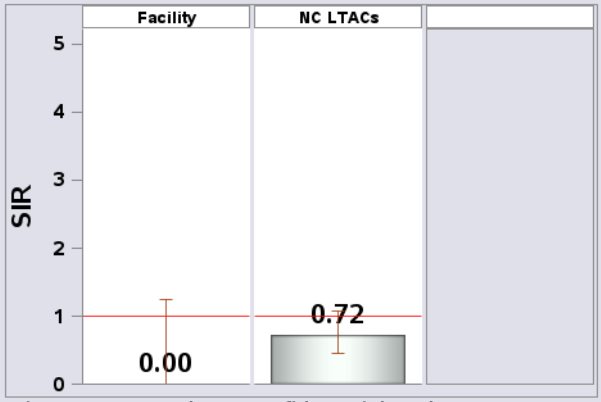


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Reporting Wards	0	2.4	Same
All reporting units	**0**	**2.4**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Note from NCDHHS Division of Public Health: MRSA is not reportable at this facility type after 2018Q3

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

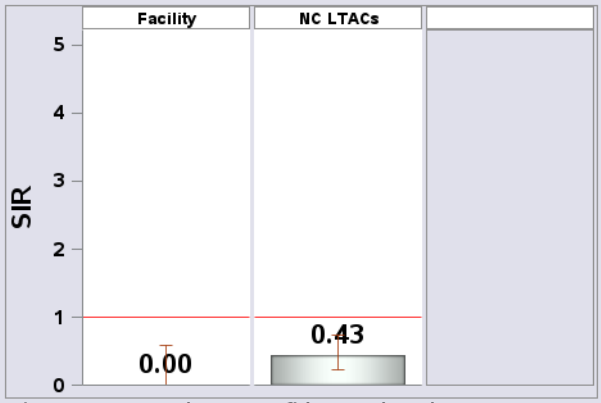


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**5.1**	**Better**
Facility-wide inpatient	**.**	**Less than 1.0**	**No Conclusion**
Facility-wide inpatient	**.**	**Less than 1.0**	**No Conclusion**
Facility-wide inpatient	**.**	**Less than 1.0**	**No Conclusion**
Facility-wide inpatient	**.**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Select Specialty Hospital-Greensboro, Greensboro, Guilford County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

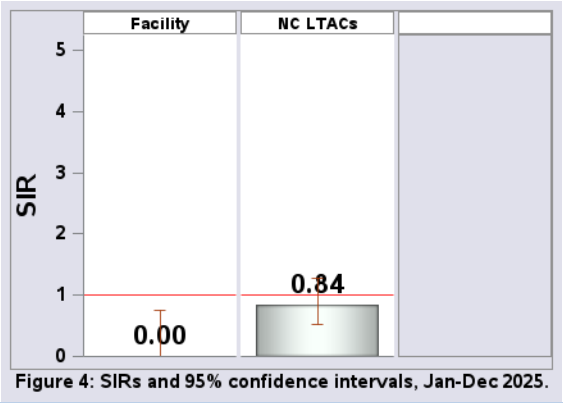


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Reporting Wards	0	3.9	Better
All reporting units	**0**	**3.9**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from NCDHHS Division of Public Health: SSIs are not reportable at this facility type

Surgical Site Infections (SSI) after Colon Surgeries

Note from NCDHHS Division of Public Health: SSIs are not reportable at this facility type

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Sentara Albemarle Medical Center Halstead, Elizabeth City, Pasquotank County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	5,803
Patient Days in 2025:	29,019
Total Number of Beds:	90
Number of ICU Beds:	10
FTE* Infection Preventionists:	1.10
Number of FTEs* per 100 beds:	1.22

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

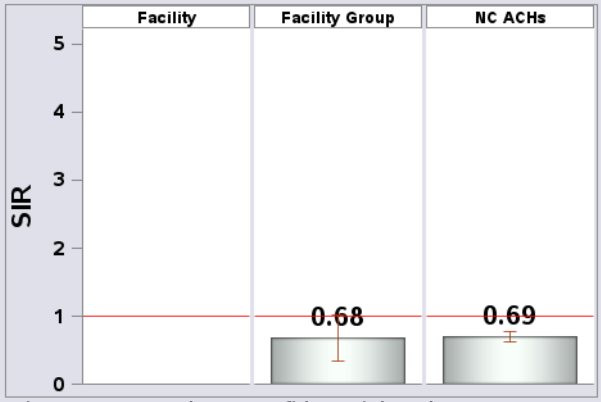


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	1	Less than 1.0	No Conclusion
Adult/Ped Wards	2	Less than 1.0	No Conclusion
All reporting units	**3**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**1.5**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

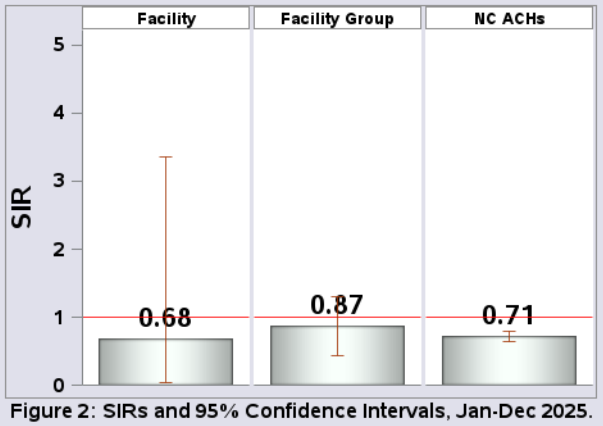


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

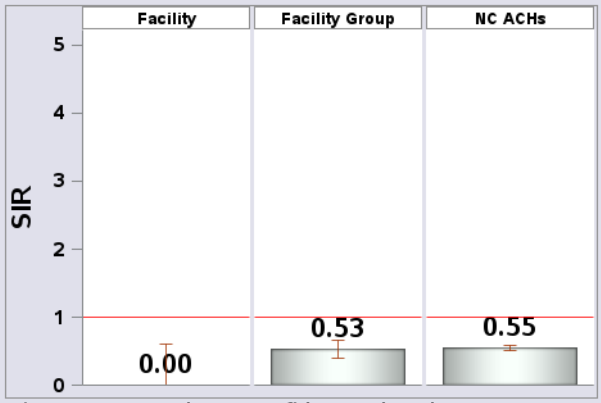


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**4.9**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Sentara Albemarle Medical Center Halstead, Elizabeth City, Pasquotank County

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Central Line-Associated Bloodstream Infections (CLABSI)

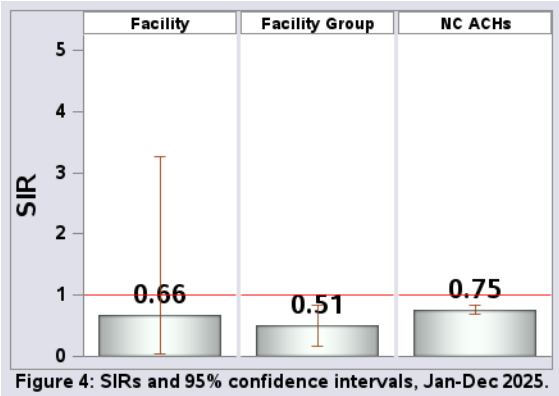


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	1	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**1**	**1.5**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

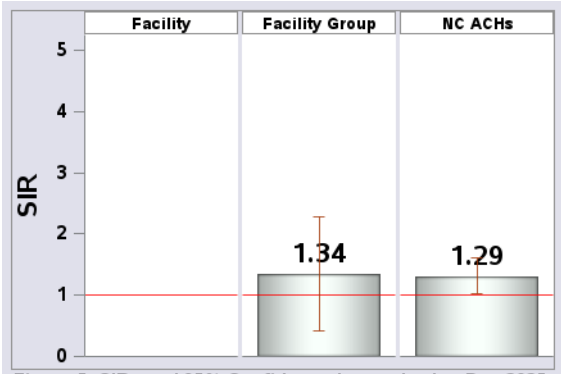


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

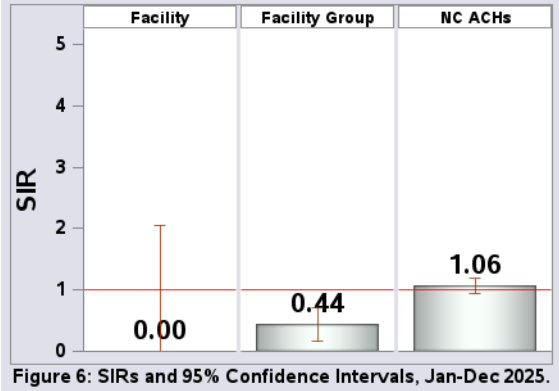


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**1.5**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

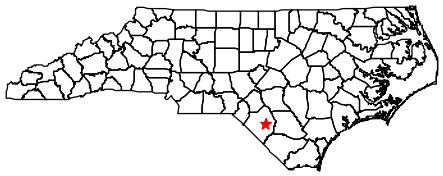
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Southeastern Regional Medical Center, Lumberton, Robeson County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Graduate
Admissions in 2025:	12,955
Patient Days in 2025:	49,588
Total Number of Beds:	199
Number of ICU Beds:	32
FTE* Infection Preventionists:	3.00
Number of FTEs* per 100 beds:	1.51

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

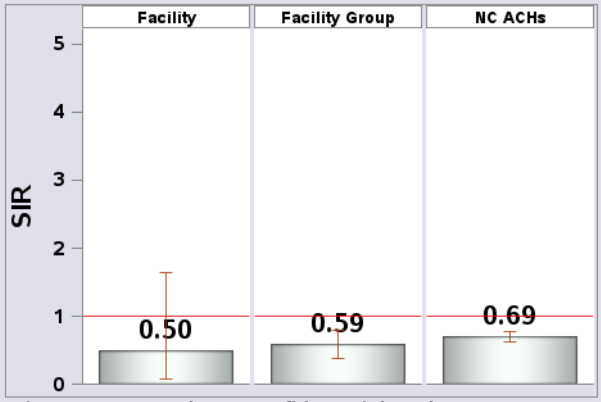


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	1.1	Same
Adult/Ped Wards	2	2.9	Same
All reporting units	**2**	**4.0**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**3**	**2.8**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

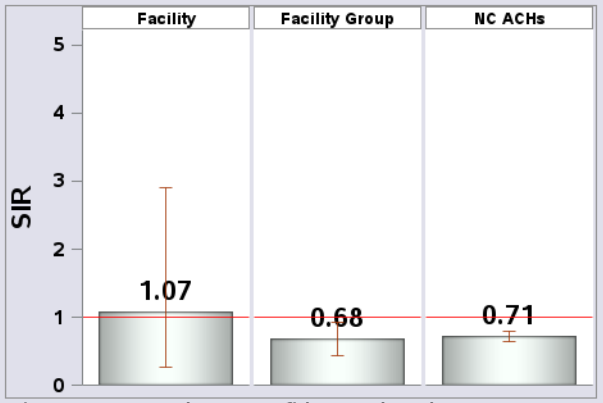


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

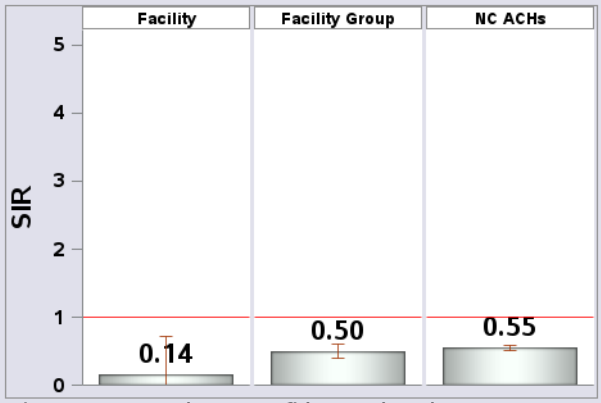


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**6.9**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
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N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Southeastern Regional Medical Center, Lumberton, Robeson County

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Central Line-Associated Bloodstream Infections (CLABSI)

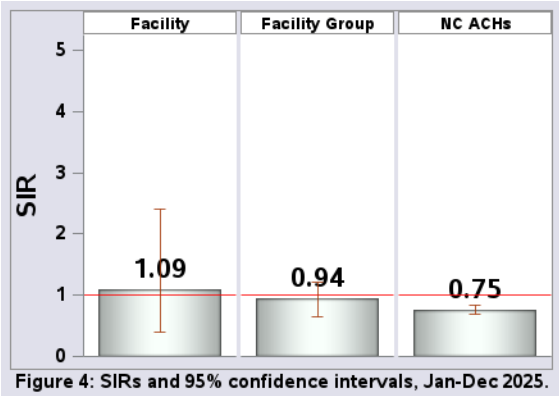


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	2	2.0	Same
Adult/Ped Wards	3	2.6	Same
All reporting units	**5**	**4.6**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

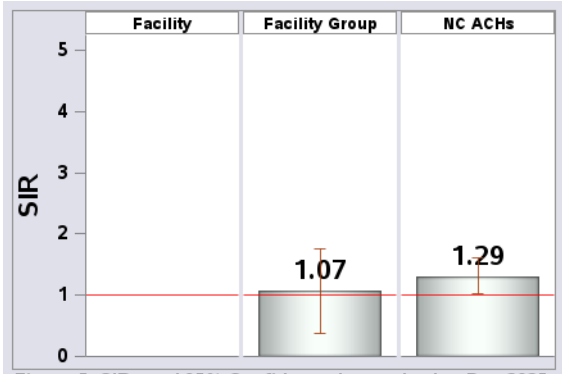


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

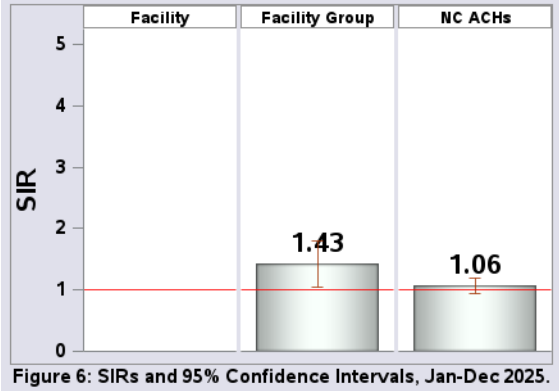


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

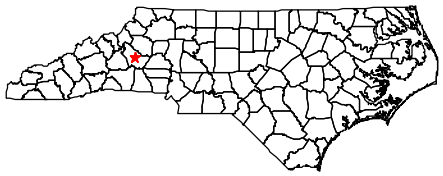
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
UNC Health Blue Ridge, Morganton, Burke County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	9,326
Patient Days in 2025:	44,532
Total Number of Beds:	175
Number of ICU Beds:	25
FTE* Infection Preventionists:	2.50
Number of FTEs* per 100 beds:	1.43

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

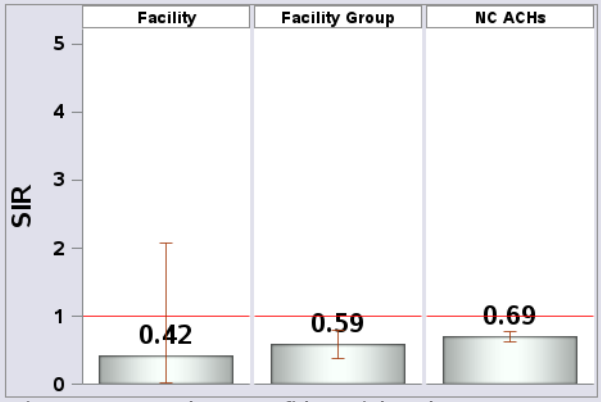


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	1.2	Same
Adult/Ped Wards	1	1.2	Same
All reporting units	**1**	**2.4**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**2.5**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

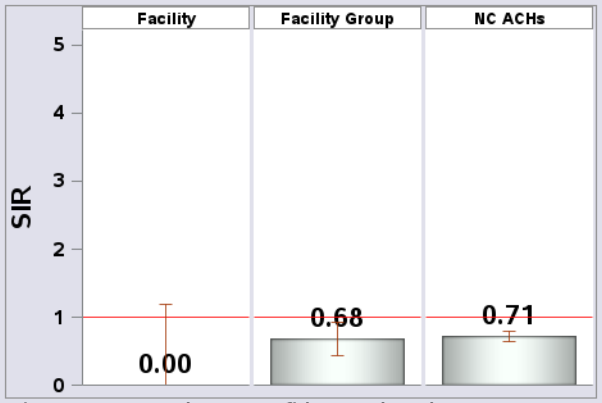


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

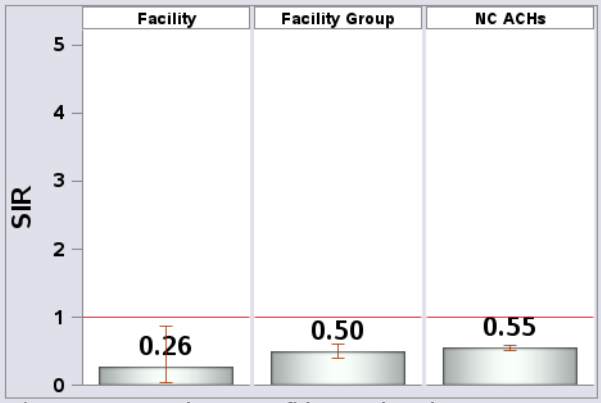


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**7.6**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
UNC Health Blue Ridge, Morganton, Burke County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

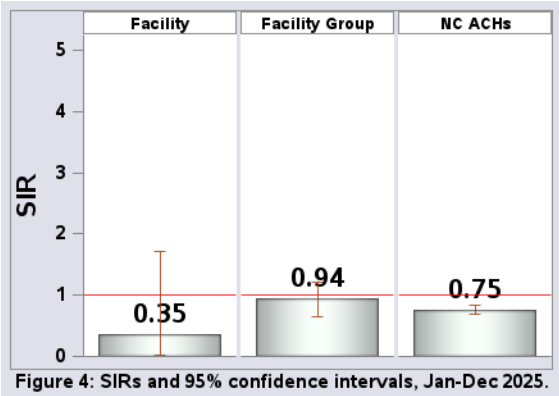


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	1.8	Same
Adult/Ped Wards	1	1.1	Same
All reporting units	**1**	**2.9**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

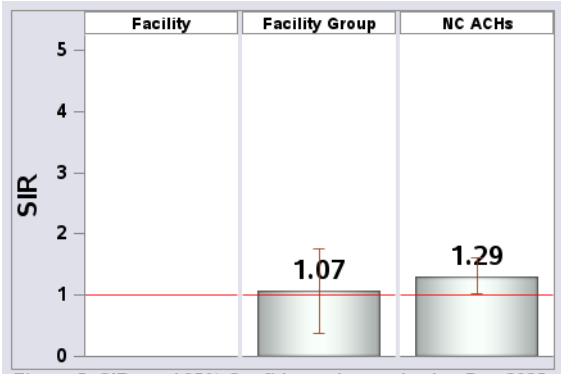


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

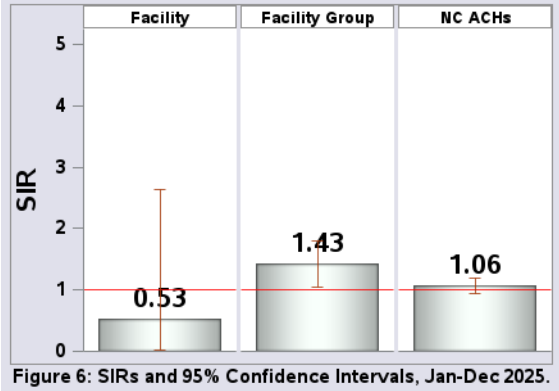


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**1.9**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
UNC Health Care, Chapel Hill, Orange County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	45,238
Patient Days in 2025:	334,651
Total Number of Beds:	1,122
Number of ICU Beds:	281
FTE* Infection Preventionists:	10.0
Number of FTEs* per 100 beds:	0.89

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

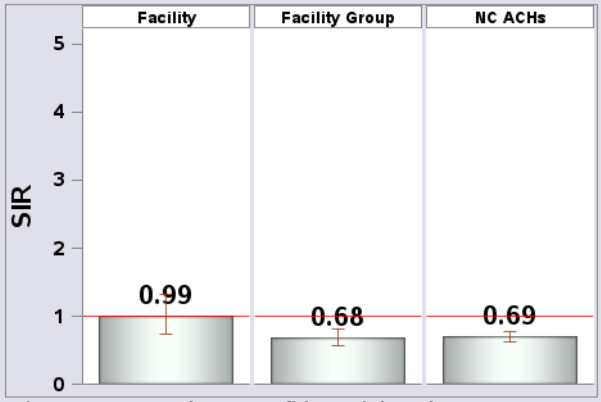


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	36	31	Same
Adult/Ped Wards	9	14	Same
All reporting units	**45**	**45**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**20**	**25**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

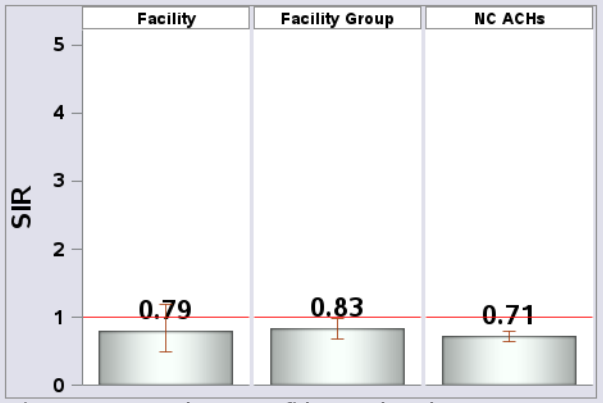


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

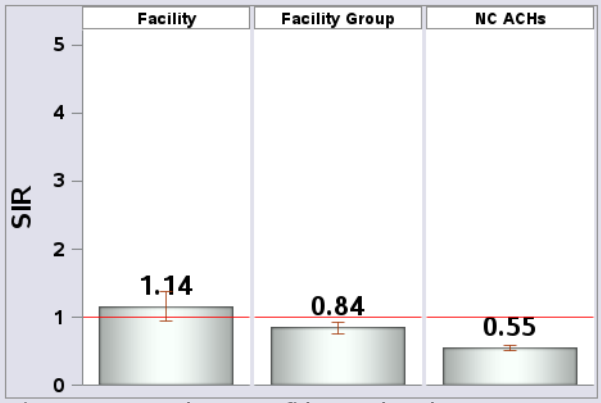


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**115**	**100**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
UNC Health Care, Chapel Hill, Orange County

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Central Line-Associated Bloodstream Infections (CLABSI)

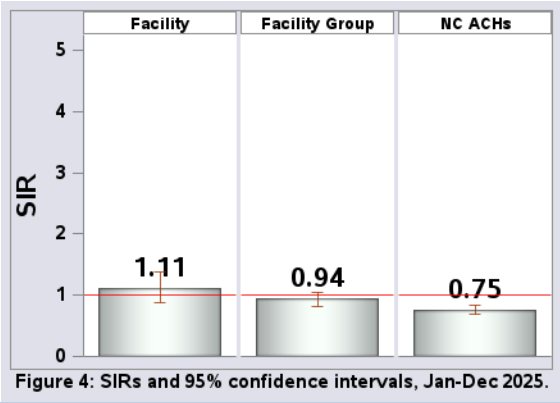


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	53	43	Same
Adult/Ped Wards	18	22	Same
Neonatal Units	9	6.4	Same
All reporting units	**80**	**72**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**3.3**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

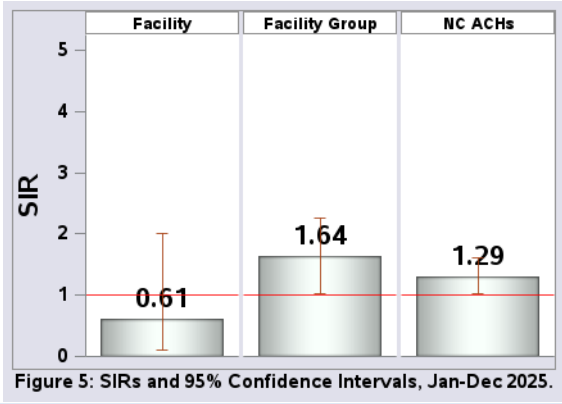


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

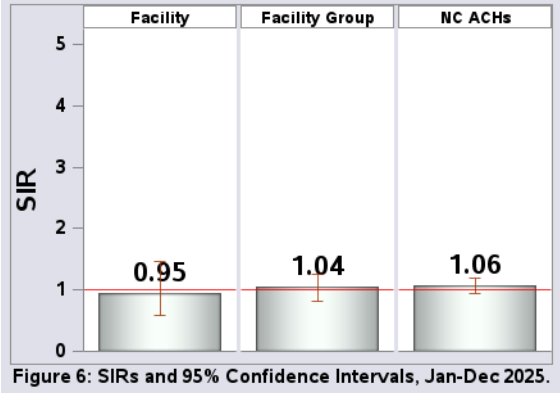


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**18**	**19**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

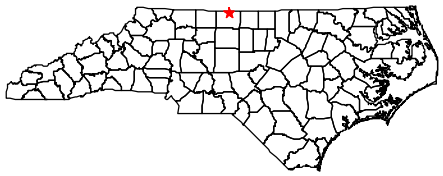
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
UNC Rockingham Health, Eden, Rockingham County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	1,831
Patient Days in 2025:	6,102
Total Number of Beds:	108
Number of ICU Beds:	9
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	0.93

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

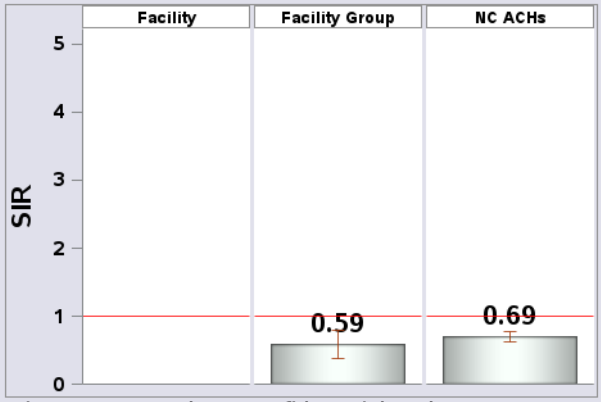


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

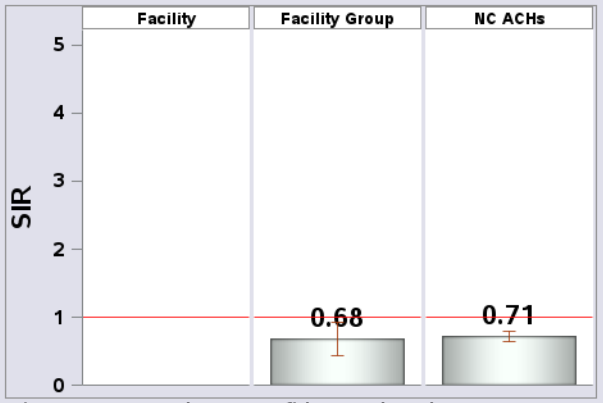


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

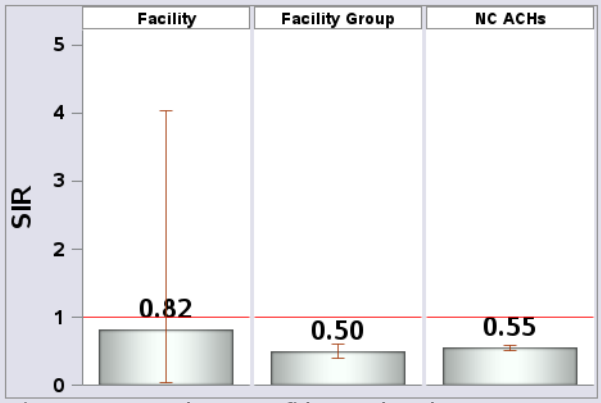


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**1.2**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
UNC Rockingham Health, Eden, Rockingham County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

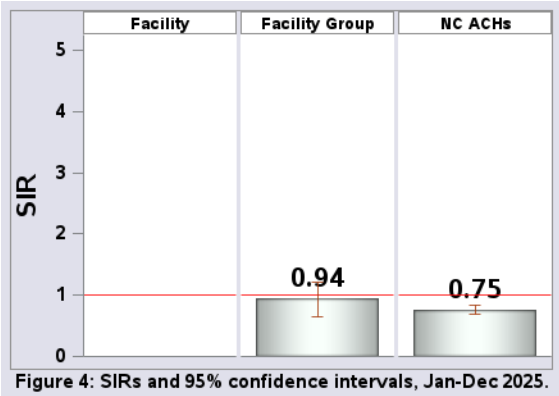


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

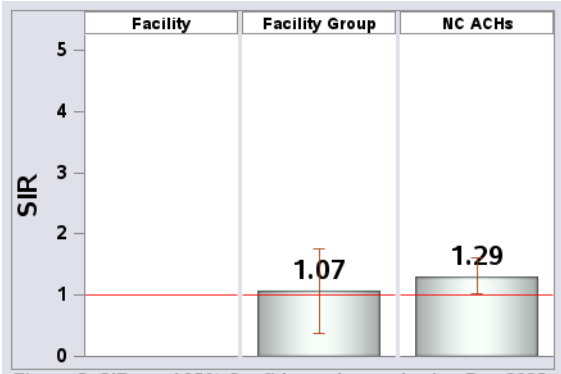


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

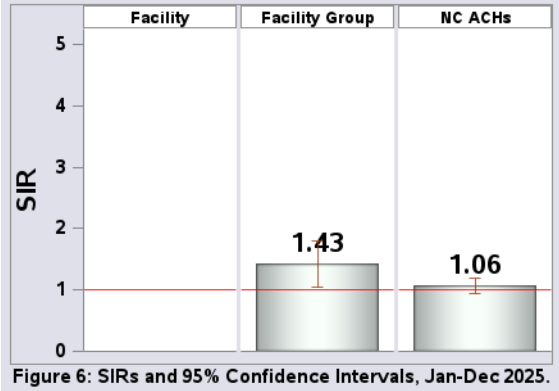


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Wake Forest Baptist Health-Davie Medical Center, Advance, Davie County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	4,499
Patient Days in 2025:	11,001
Total Number of Beds:	50
Number of ICU Beds:	0
FTE* Infection Preventionists:	0.30
Number of FTEs* per 100 beds:	0.60

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

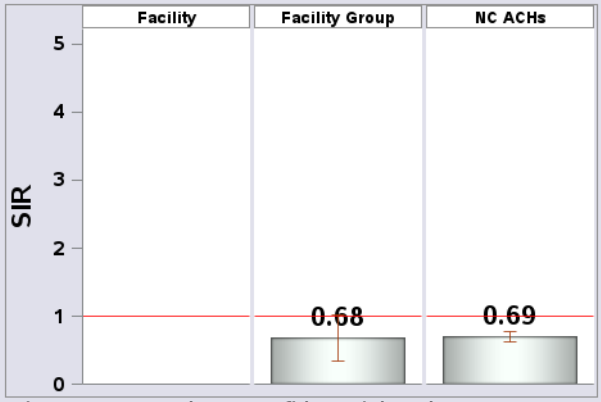


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

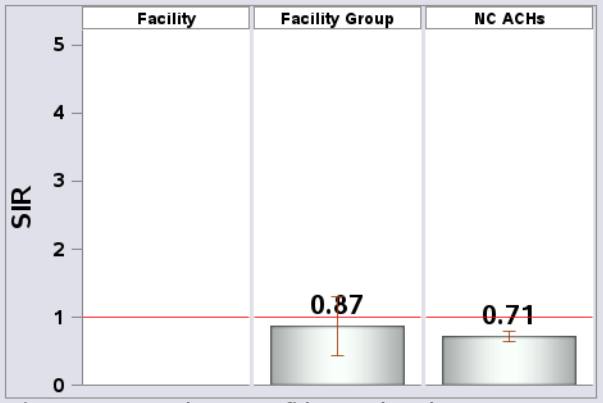


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

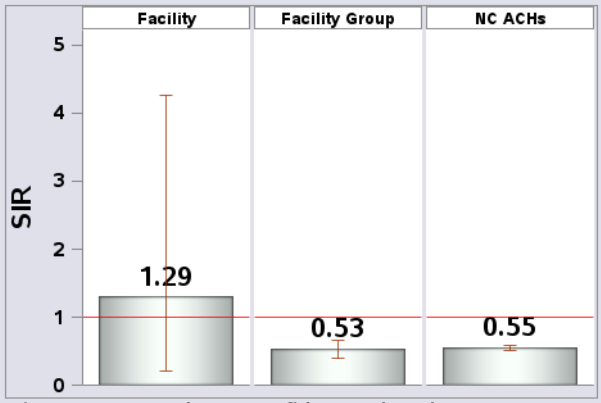


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**1.5**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Wake Forest Baptist Health-Davie Medical Center, Advance, Davie County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

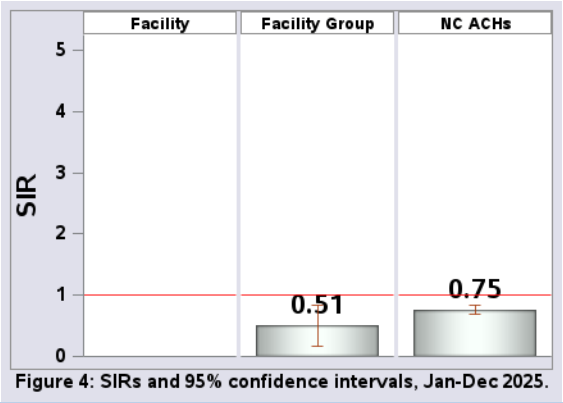


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Surgical Site Infections (SSI) after Colon Surgeries

Note from N.C. Division of Public Health: Data are unavailable for this time period.

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Wake Forest Baptist Health-Lexington Medical Center, Lexington, Davidson County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	5,415
Patient Days in 2025:	16,181
Total Number of Beds:	76
Number of ICU Beds:	0
FTE* Infection Preventionists:	0.40
Number of FTEs* per 100 beds:	0.53

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

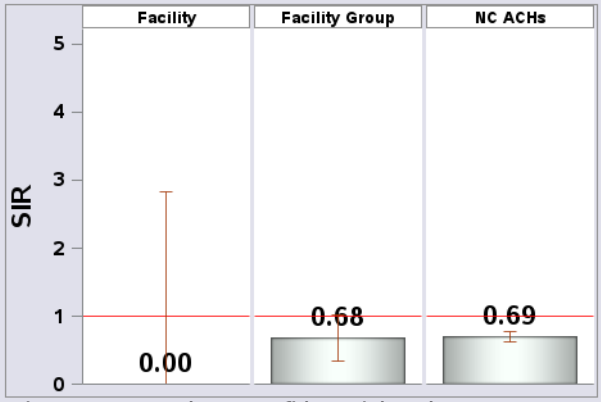


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped Wards	0	1.1	Same
All reporting units	**0**	**1.1**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

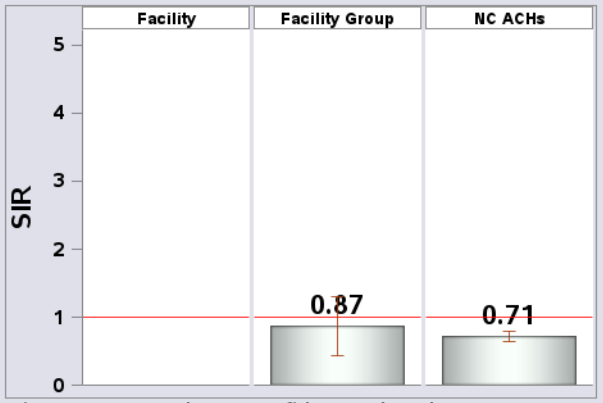


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

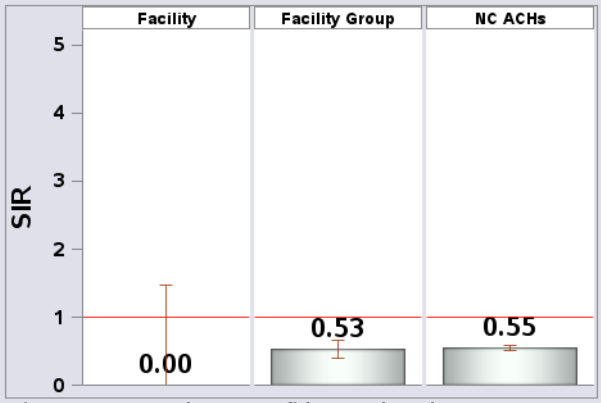


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**2.0**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Wake Forest Baptist Health-Lexington Medical Center, Lexington, Davidson County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

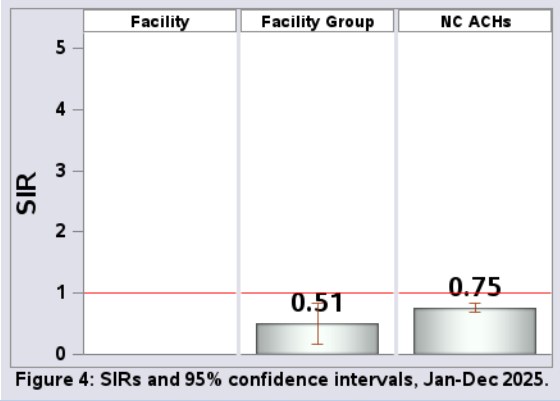


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

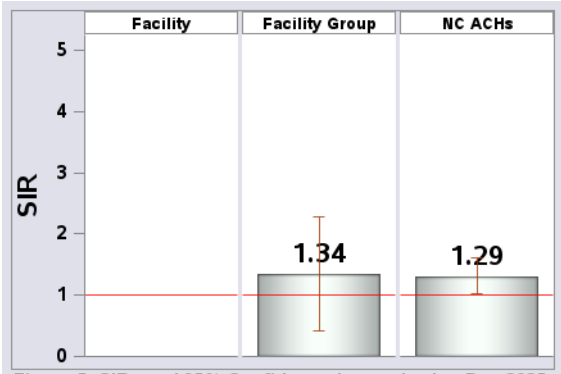


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

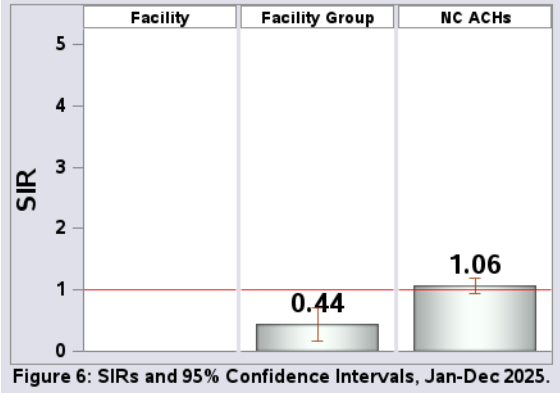


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

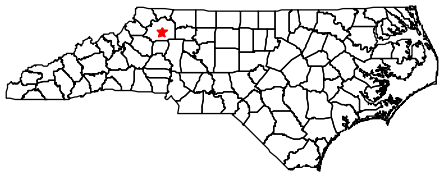
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Wake Forest Baptist Health Wilkes Medical Center, North Wilkesboro, Wilkes County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	5,166
Patient Days in 2025:	19,000
Total Number of Beds:	75
Number of ICU Beds:	8
FTE* Infection Preventionists:	0.70
Number of FTEs* per 100 beds:	0.93

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

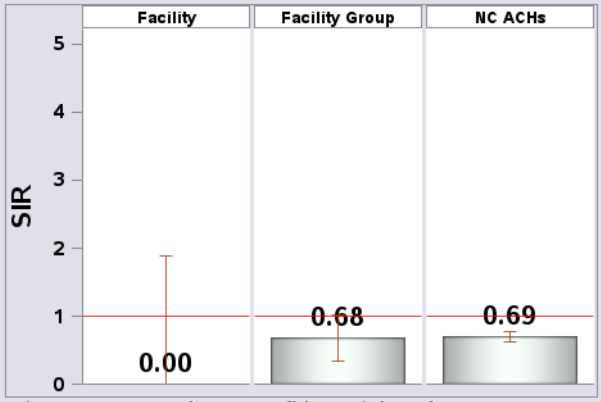


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	1.0	Same
All reporting units	**0**	**1.6**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**1.3**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

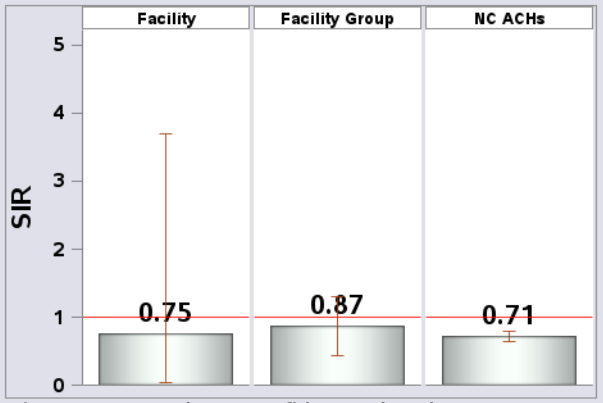


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

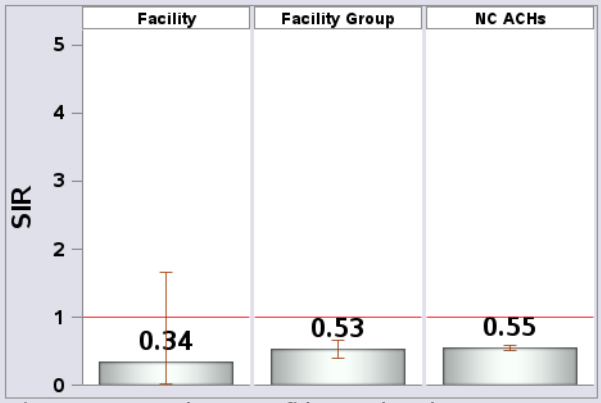


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**3.0**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Wake Forest Baptist Health Wilkes Medical Center, North Wilkesboro, Wilkes County

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Central Line-Associated Bloodstream Infections (CLABSI)

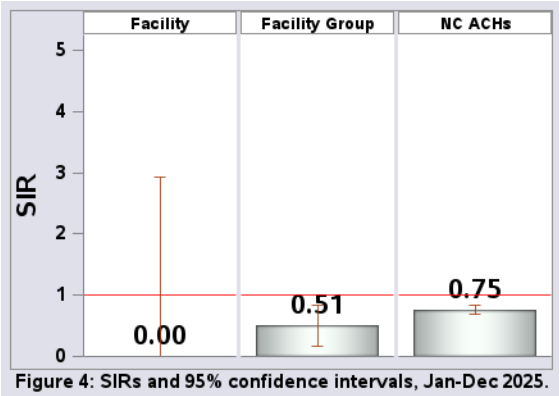

Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	Less than 1.0	No Conclusion
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**1.0**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

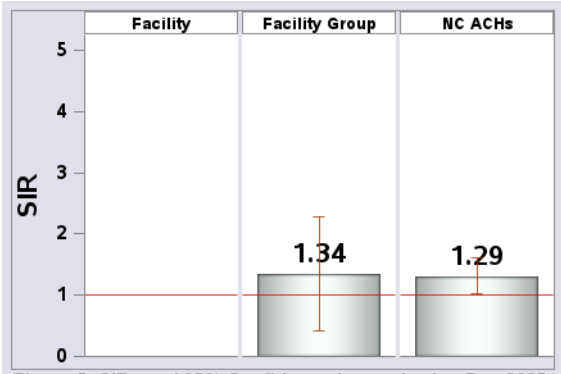

Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

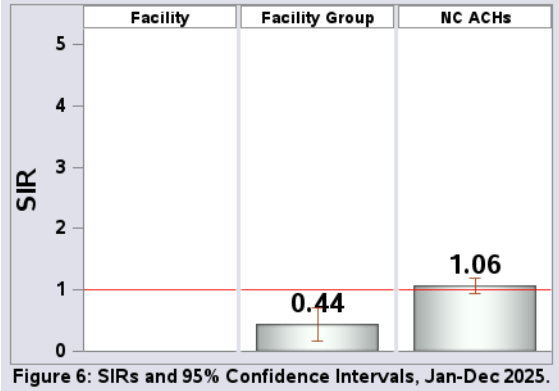

Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Wake Forest University Baptist Medical Center, Winston-Salem, Forsyth County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	51,691
Patient Days in 2025:	279,368
Total Number of Beds:	881
Number of ICU Beds:	201
FTE* Infection Preventionists:	8.00
Number of FTEs* per 100 beds:	0.91

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

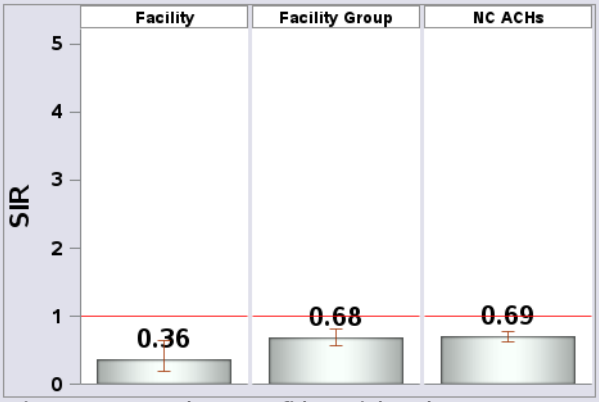

Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	2	18	Better
Adult/Ped Wards	8	9.6	Same
All reporting units	**10**	**28**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**29**	**24**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

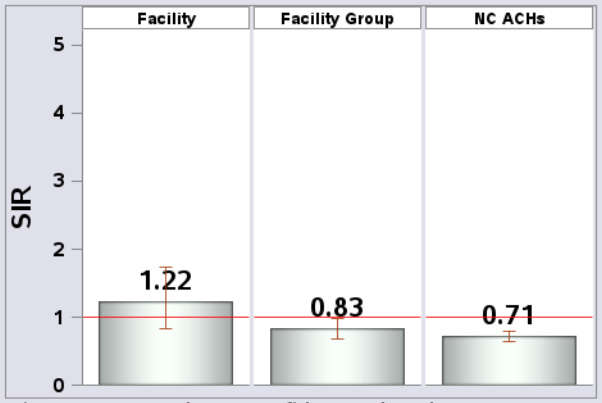

Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

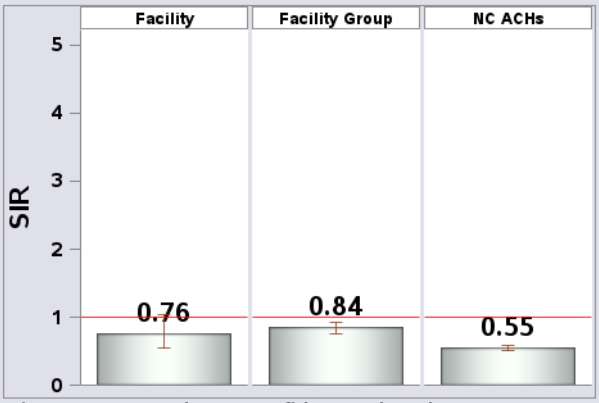

Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**38**	**50**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Wake Forest University Baptist Medical Center, Winston-Salem, Forsyth County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

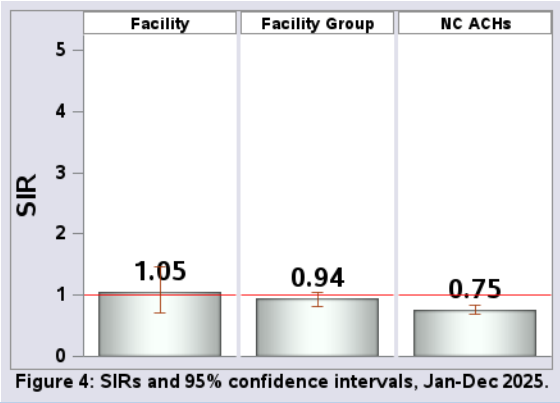

Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	14	14	Same
Adult/Ped Wards	5	8.1	Same
Neonatal Units	11	6.2	Same
All reporting units	**30**	**29**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**11**	**3.3**	**Worse**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
× Worse: More infections than predicted by the national baseline experience

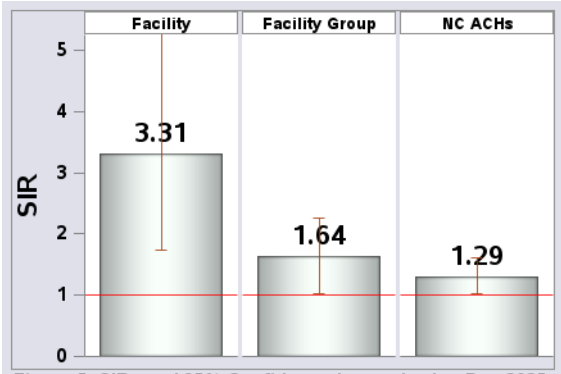

Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

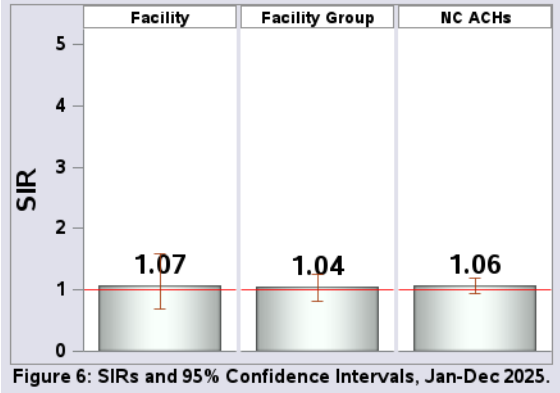

Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**22**	**21**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
WakeMed, Raleigh, Wake County

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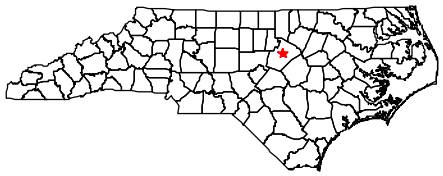
2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	40,844
Patient Days in 2025:	237,011
Total Number of Beds:	688
Number of ICU Beds:	142
FTE* Infection Preventionists:	7.00
Number of FTEs* per 100 beds:	1.02

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

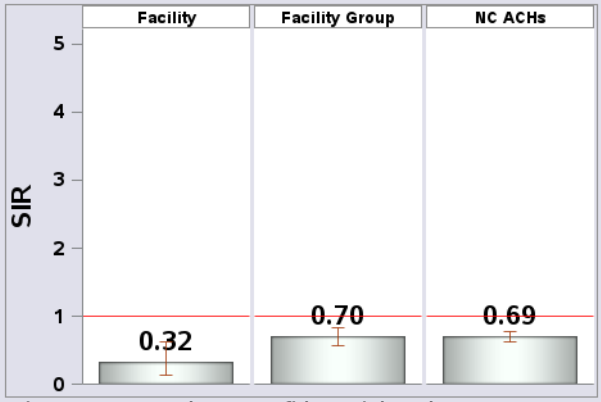


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	3	14	Better
Adult/Ped Wards	4	8.2	Same
All reporting units	**7**	**22**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**7**	**13**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

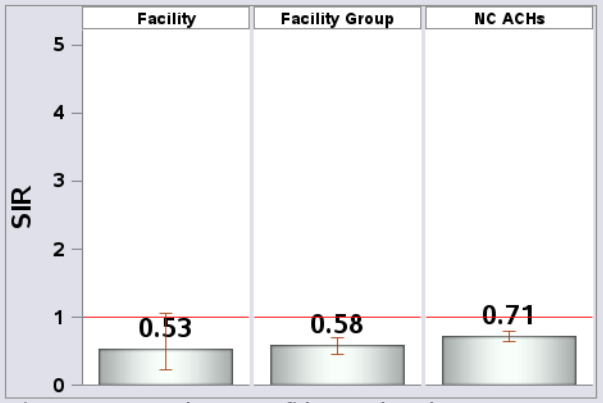


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

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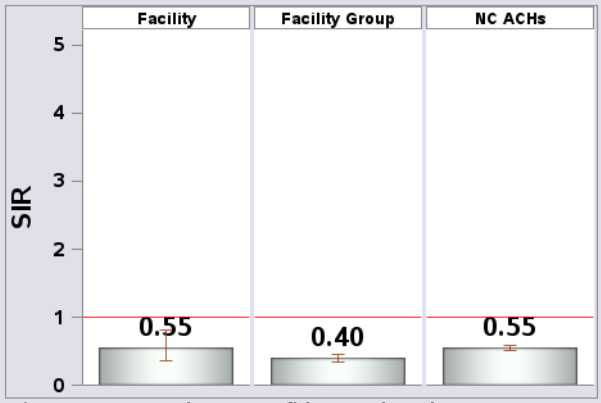

Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**23**	**42**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
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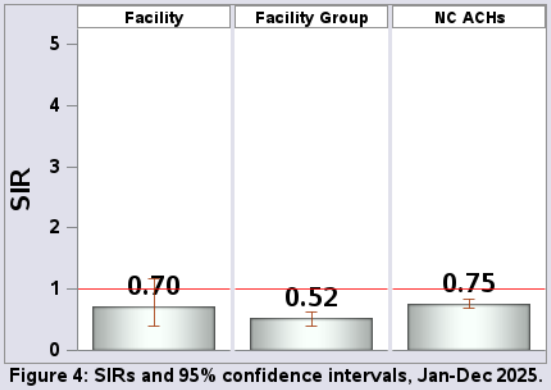

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Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	4	10	Better
Adult/Ped Wards	7	6.5	Same
Neonatal Units	2	1.9	Same
All reporting units	**13**	**19**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
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How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

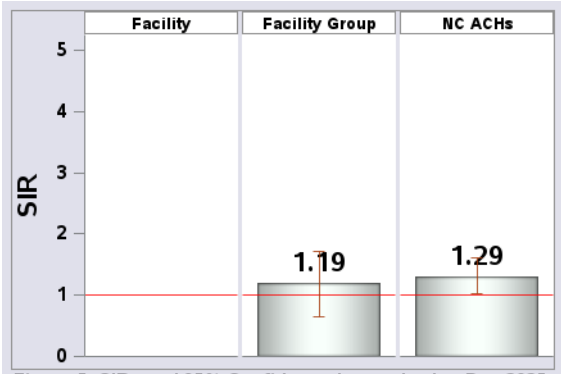
Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison



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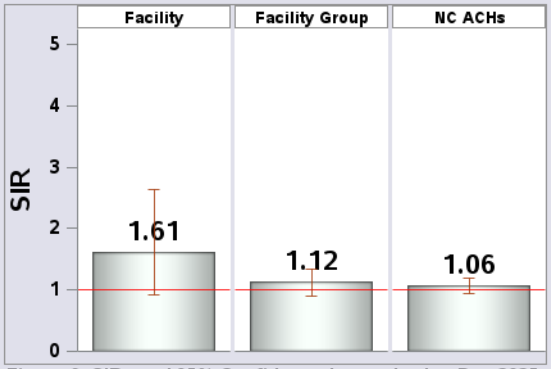

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Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**14**	**8.7**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

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Ventilator-Associated Events (VAE)

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WakeMed Cary Hospital, Cary, Wake County

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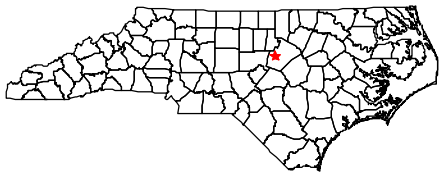
2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	22,690
Patient Days in 2025:	85,110
Total Number of Beds:	254
Number of ICU Beds:	12
FTE* Infection Preventionists:	1.38
Number of FTEs* per 100 beds:	0.54

[*FTE = Full-time equivalent]
[. = Data not reported]



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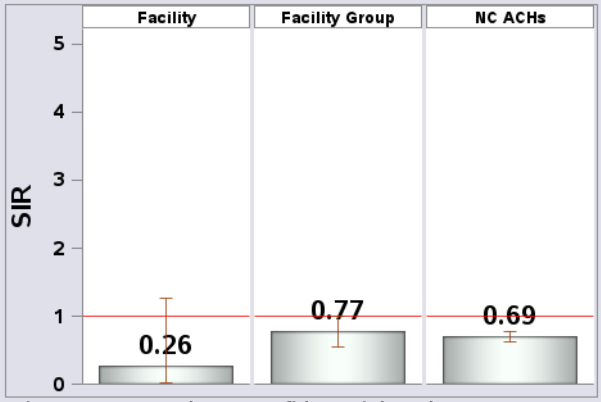

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Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	1.1	Same
Adult/Ped Wards	1	2.8	Same
All reporting units	**1**	**3.9**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
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Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

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Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**4**	**3.1**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
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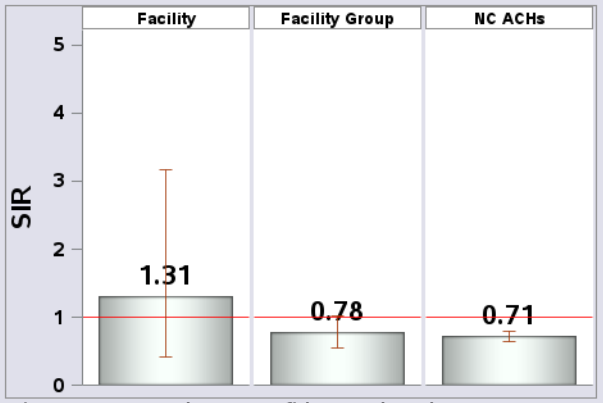

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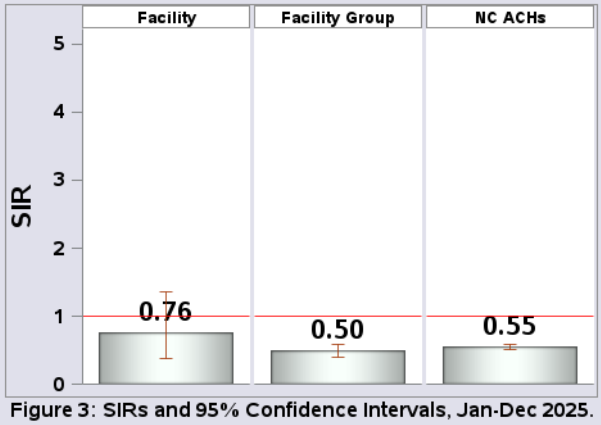

Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**10**	**13**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
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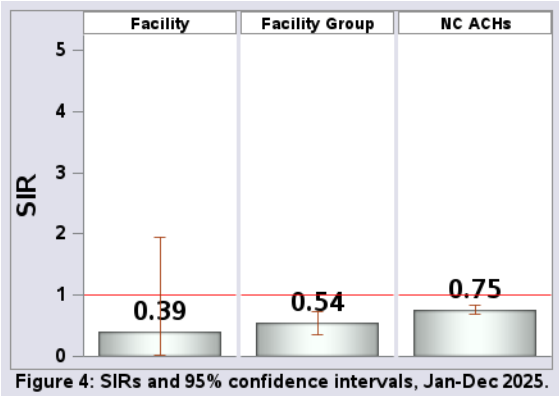

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Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	1	Less than 1.0	No Conclusion
Adult/Ped Wards	0	1.8	Same
All reporting units	**1**	**2.5**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
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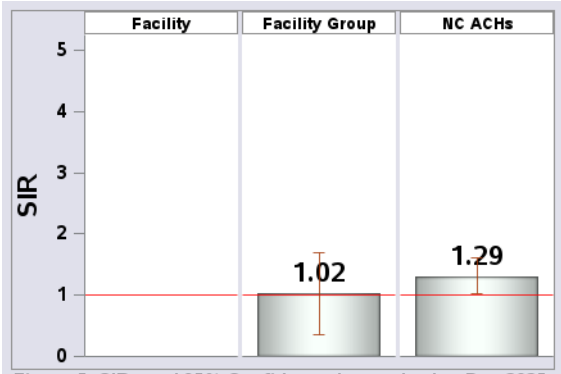
Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison



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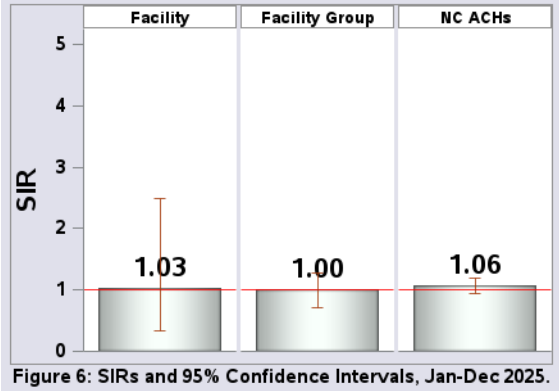

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Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**4**	**3.9**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
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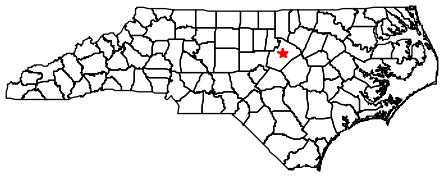
2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	10,960
Patient Days in 2025:	31,294
Total Number of Beds:	86
Number of ICU Beds:	0
FTE* Infection Preventionists:	1.13
Number of FTEs* per 100 beds:	1.31

[*FTE = Full-time equivalent]
[. = Data not reported]



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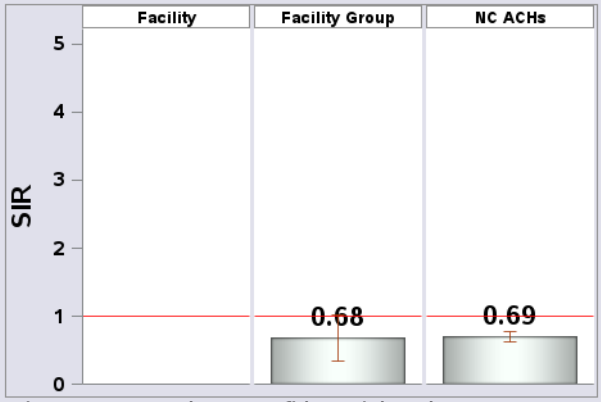

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Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

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Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**1.1**	**Same**

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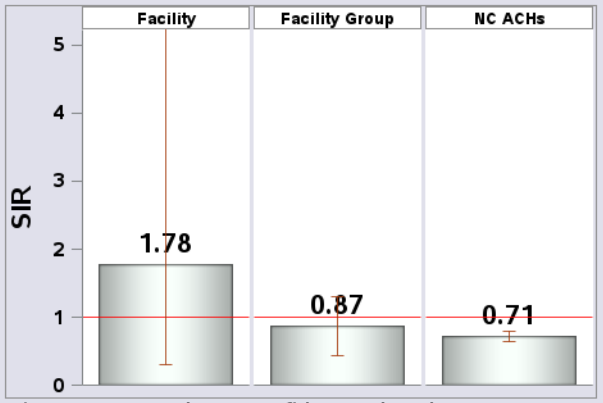

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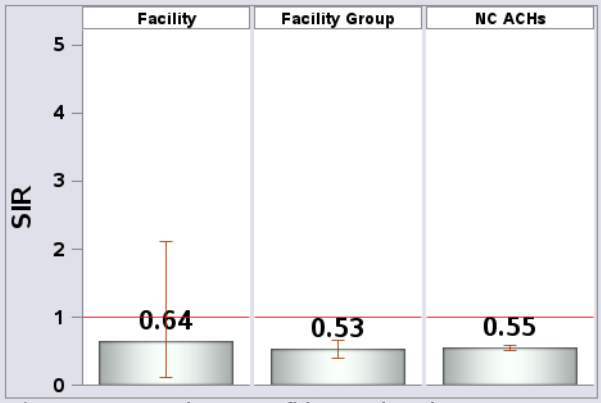

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Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**3.1**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
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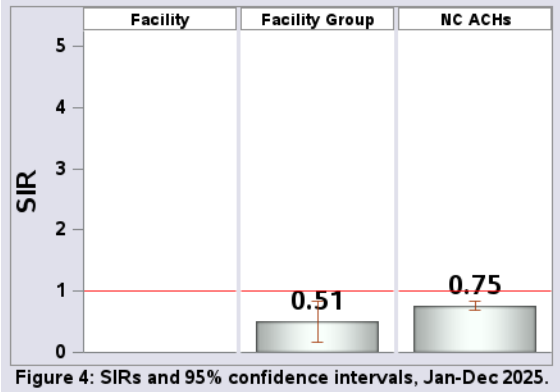

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Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

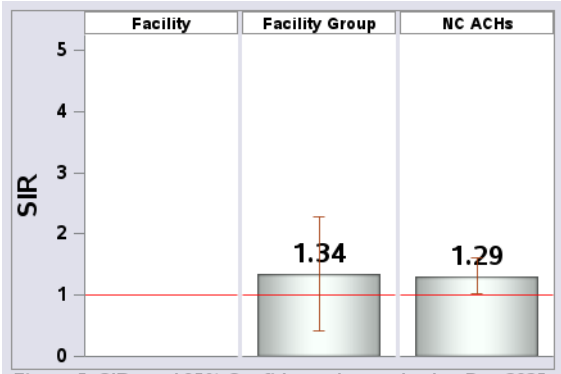


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

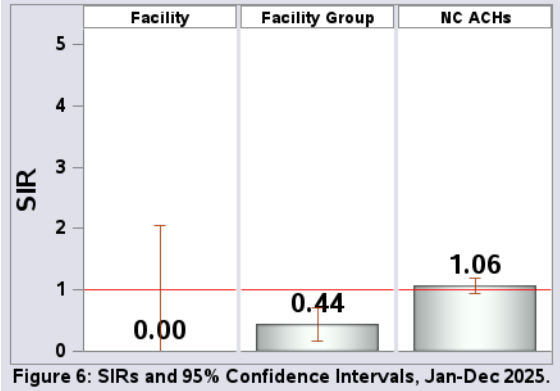


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**1.5**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Wayne Memorial Hospital, Goldsboro, Wayne County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	13,300
Patient Days in 2025:	57,668
Total Number of Beds:	226
Number of ICU Beds:	16
FTE* Infection Preventionists:	2.00
Number of FTEs* per 100 beds:	0.88

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

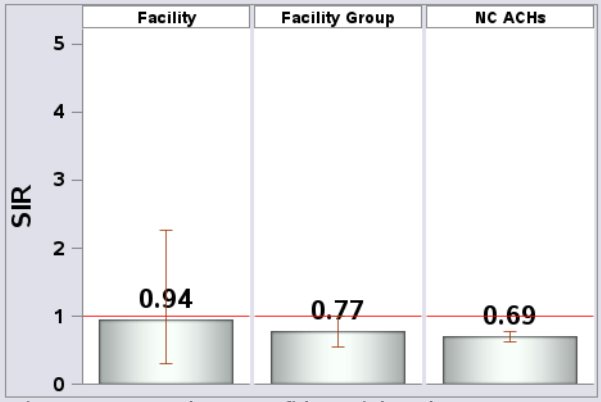


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	0	1.1	Same
Adult/Ped Wards	4	3.2	Same
All reporting units	**4**	**4.2**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**9**	**2.3**	**Worse**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
✕ Worse: More infections than predicted by the national baseline experience

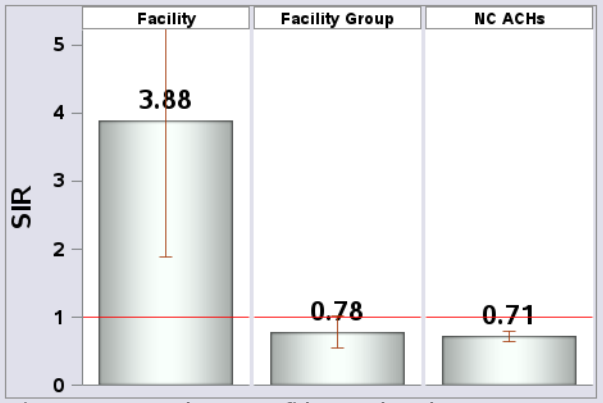


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

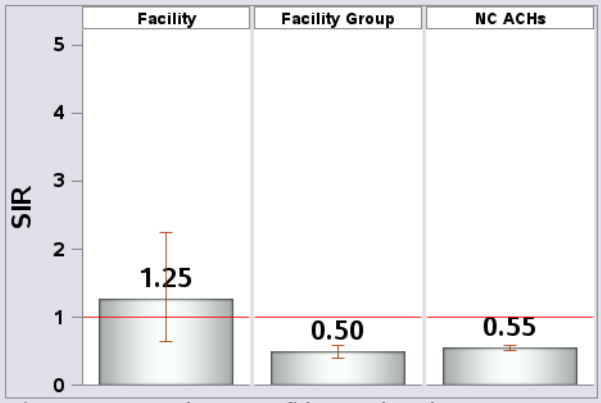


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**10**	**8.0**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Wayne Memorial Hospital, Goldsboro, Wayne County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

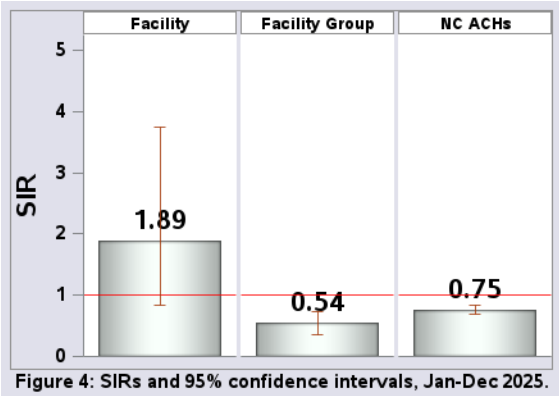


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	3	1.2	Same
Adult/Ped Wards	4	2.5	Same
All reporting units	**7**	**3.7**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

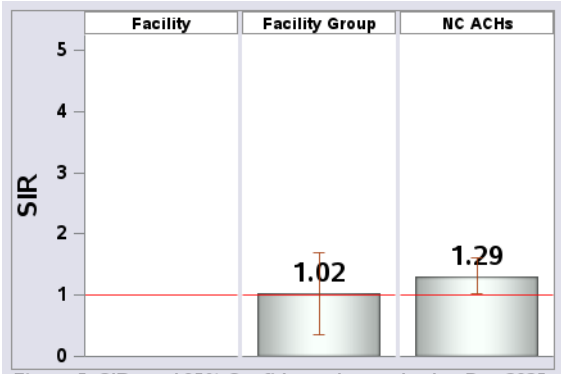


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

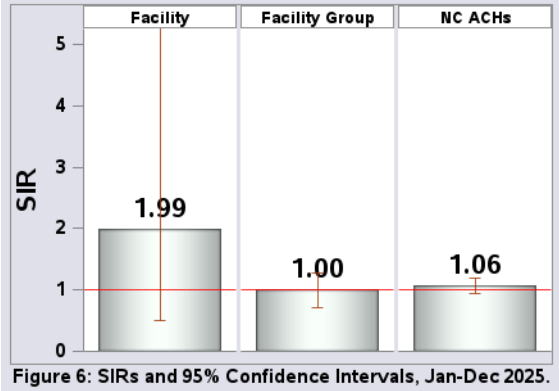


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**3**	**1.5**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

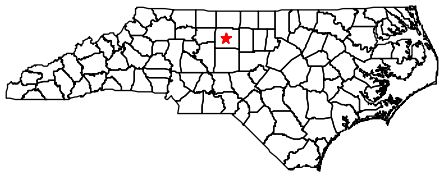
North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Wesley Long Hospital, Greensboro, Guilford County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Major
Admissions in 2025:	9,915
Patient Days in 2025:	53,773
Total Number of Beds:	150
Number of ICU Beds:	20
FTE* Infection Preventionists:	1.10
Number of FTEs* per 100 beds:	0.73

[*FTE = Full-time equivalent]
[. = Data not reported]



Catheter-Associated Urinary Tract Infections (CAUTI)

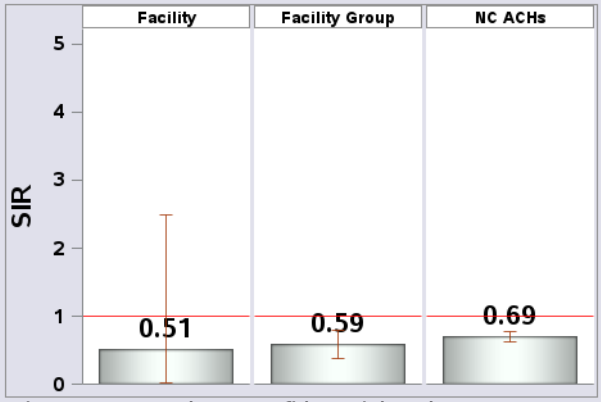


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	1	1.3	Same
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**1**	**2.0**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**2.9**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

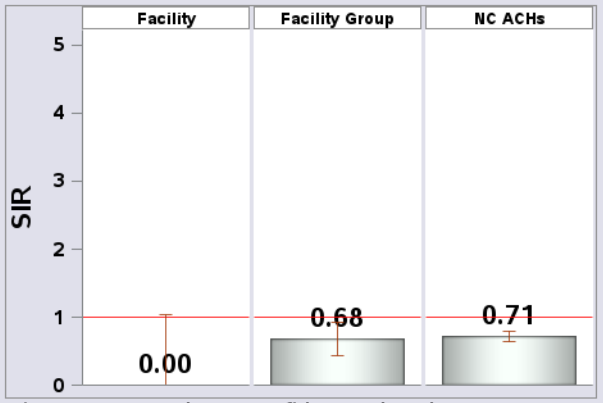


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

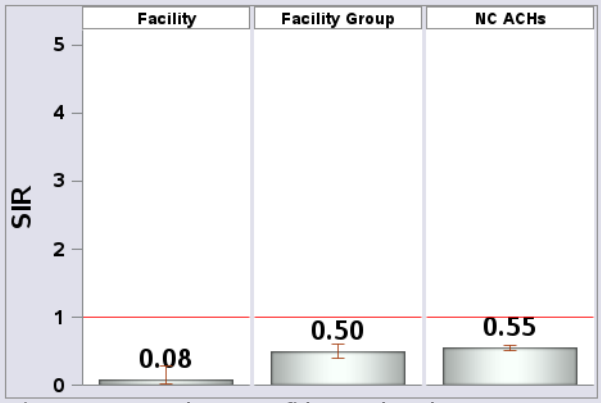


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**2**	**24**	**Better**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
★ Better: Fewer infections than predicted by the national baseline experience

Refer to HAI in N.C. Reference Report for further explanation of presented statistics (https://epi.dph.ncdhhs.gov/cd/hai/figures.html).
Data Generated: May 20, 2026.
NCDHHS Division of Public Health, SHARPPS Program

Report Generated: June 10, 2026
N.C. HAI 2025 Q4 Report

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Wesley Long Hospital, Greensboro, Guilford County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

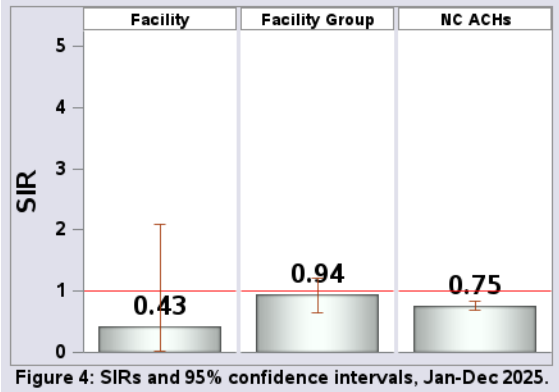


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	1	1.7	Same
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**1**	**2.3**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

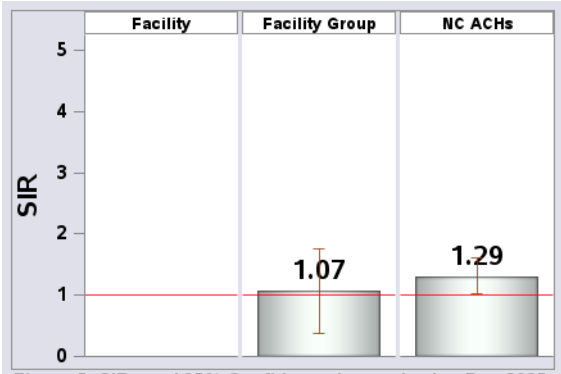


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

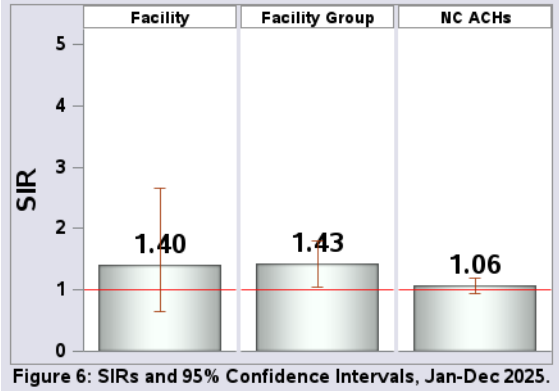


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**8**	**5.7**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Wilson Medical Center, Wilson, Wilson County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

2025 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Undergraduate
Admissions in 2025:	7,024
Patient Days in 2025:	31,228
Total Number of Beds:	141
Number of ICU Beds:	16
FTE* Infection Preventionists:	1.00
Number of FTEs* per 100 beds:	0.71

[*FTE = Full-time equivalent]
[. = Data not reported]

Catheter-Associated Urinary Tract Infections (CAUTI)

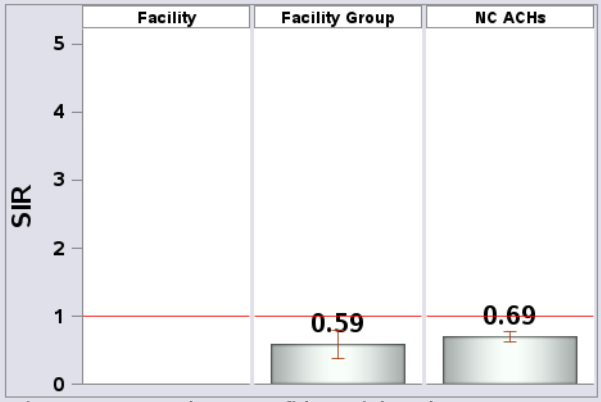


Figure 1: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped Wards	0	Less than 1.0	No Conclusion
All reporting units	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 catheter days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Methicillin-Resistant Staphylococcus aureus Laboratory-Identified Bacteremia (MRSA LabID)

Note: LabID events are based on positive laboratory results only; not all LabID events represent true illnesses. Events reported here may be higher than events based on clinically-defined illness.

Table 2. Number of Observed and Predicted MRSA Events, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**1.0**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

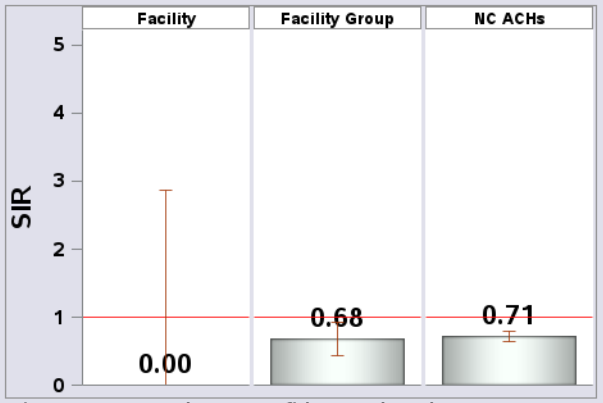


Figure 2: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Clostridioides difficile Laboratory-Identified Infections (CDI LabID)

Note: LabID events are based on positive laboratory results only - not all LabID events represent true illnesses. Rates reported here may be higher than rates based on clinically-defined illness.

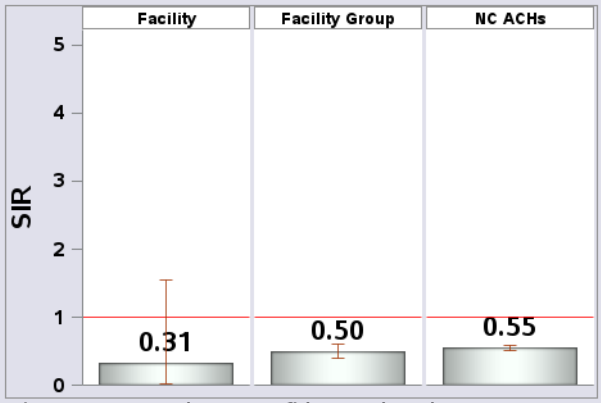


Figure 3: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 3. Number of Observed and Predicted CDIs, Jan-Dec 2025

Unit Type	Observed Events	Predicted Events	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**3.2**	**Same**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
= Same: About the same number of infections as predicted by the national baseline experience

North Carolina Health Care-Associated Infections Report
Data from January 1 - December 31, 2025
Wilson Medical Center, Wilson, Wilson County

Disclaimer: This report is for data cleaning purposes only. Hospitals have 30 days following receipt of this report to correct discrepancies in NHSN. A non-response within the 30 days will be interpreted as verification of data accuracy and completeness.

Central Line-Associated Bloodstream Infections (CLABSI)

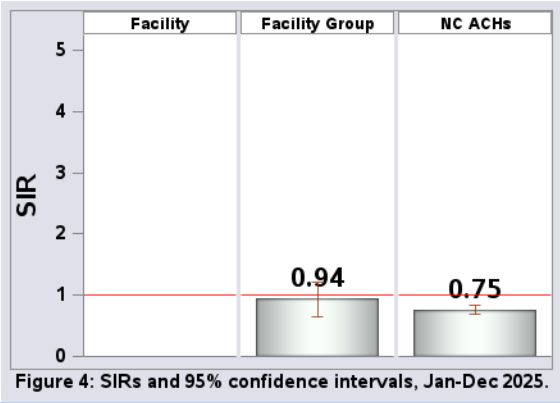


Figure 4: SIRs and 95% confidence intervals, Jan-Dec 2025.

Table 4. Number of Observed and Predicted CLABSI Infections by ICU and Ward Type, Jan-Dec 2025

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped Wards	3	Less than 1.0	No Conclusion
All reporting units	**3**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: SIR not calculated if <50 central line days or <1 predicted infection.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Surgical Site Infections (SSI) after Abdominal Hysterectomies

Table 5. Number of Observed and Predicted SSI Infections (abdominal hysterectomies), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**1**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

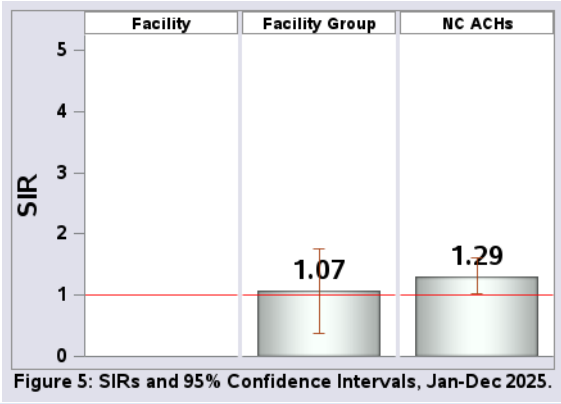


Figure 5: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Surgical Site Infections (SSI) after Colon Surgeries

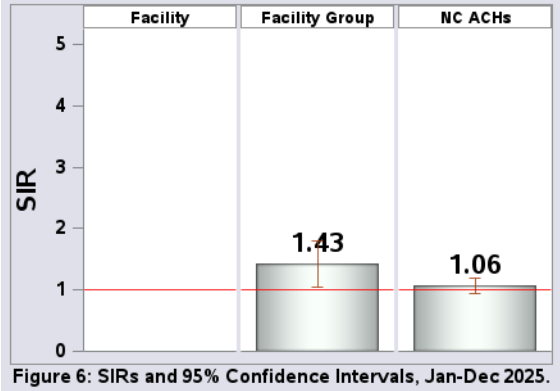


Figure 6: SIRs and 95% Confidence Intervals, Jan-Dec 2025.

Table 6. Number of Observed and Predicted SSI Infections (colon surgeries), Jan-Dec 2025.

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Facility-wide inpatient	**0**	**Less than 1.0**	**No Conclusion**

Note: SIR=Standardized Infection Ratio. SIR is calculated by #Observed/#Predicted.
Note: Infections from deep incisional and/or organ space.
Note: Red line represents the NHSN baseline experience, 2022.

How Does This Facility Compare to the National Experience?
No Conclusion: Data were reported, but there was not enough information to make a reliable comparison

Ventilator-Associated Events (VAE)

Note from NCDHHS Division of Public Health: VAEs are not reportable at this facility type after 2018Q3