

North Carolina Health Care-Associated Infections Report

Data from January 1 - September 30, 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.

2024 Hospital Survey Information

Hospital Type:	Acute Care Hospital
Medical Affiliation:	Graduate
Admissions in 2024:	13,491
Patient Days in 2024:	50,786
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)

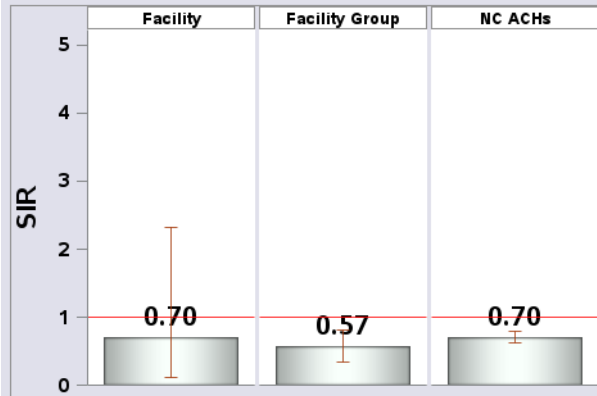


Figure 1: SIRs and 95% confidence intervals, Jan-Sept 2025.

Table 1. Number of Observed and Predicted Infections by ICU and Ward Type, Jan-Sept 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	2.1	Same
All reporting units	2	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-Sept 2025

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

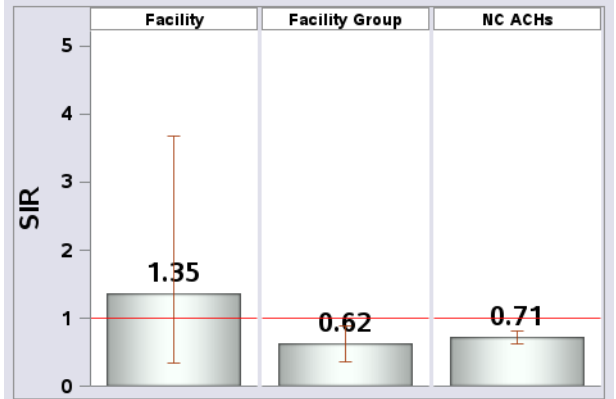


Figure 2: SIRs and 95% Confidence Intervals, Jan-Sept 2025.

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.

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

Unit Type	Observed Events	Predicted Events	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: Red line represents the NHSN baseline experience, 2022.

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

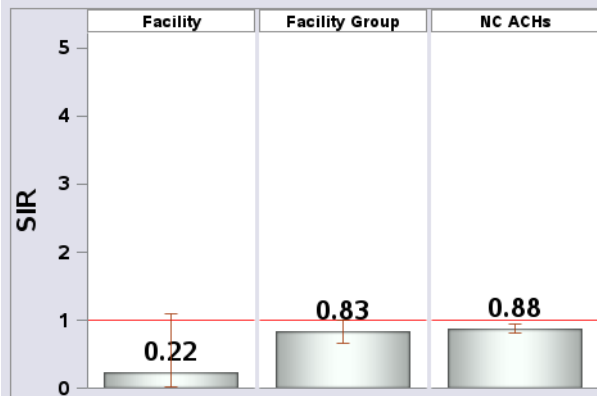


Figure 3: SIRs and 95% Confidence Intervals, Jan-Sept 2025.

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Central Line-Associated Bloodstream Infections (CLABSI)

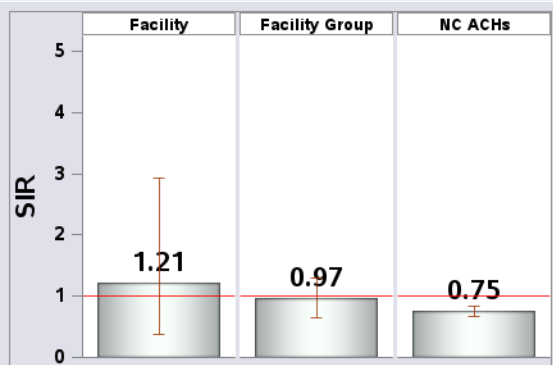


Figure 4: SIRs and 95% confidence intervals, Jan-Sept 2025.

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

Unit Type	Observed Infections	Predicted Infections	How Does This Facility Compare to the National Experience?
Adult/Ped ICUs	2	1.3	Same
Adult/Ped Wards	2	2.0	Same
All reporting units	4	3.3	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-Sept 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

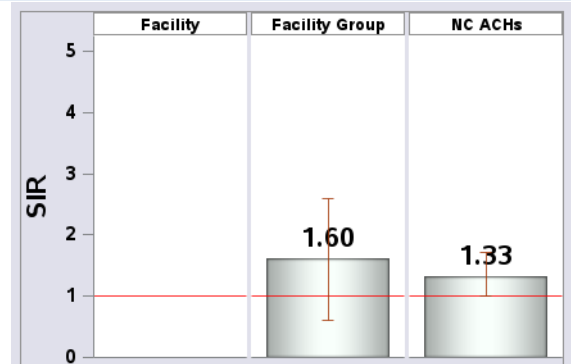


Figure 5: SIRs and 95% Confidence Intervals, Jan-Sept 2025

Surgical Site Infections (SSI) after Colon Surgeries

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

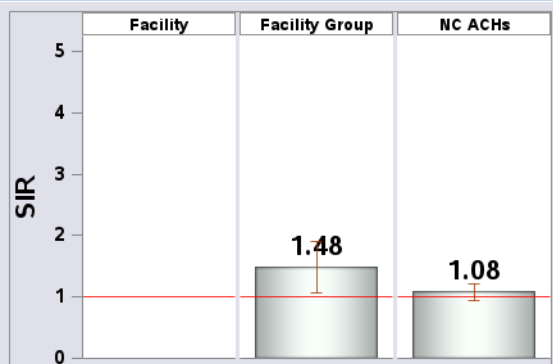


Figure 6: SIRs and 95% Confidence Intervals, Jan-Sept 2025

Ventilator-Associated Events (VAE)

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