

Navigating the All NICU Admits Database For Higher and Lower Acuity NICU Admits

Data Entry

When is this data required to be collected?

Starting January 1, 2022.

What is required to be submitted and where?

Enter all NICU admissions (inborn and outborn) into the All NICU Admits Database (ANAD) via the [NICU Data site](#).

What hospitals are required to submit data to the All NICU Admits Database (ANAD)?

All CPQCC hospitals with inborn NICU admissions.

Note: Freestanding children's hospitals are not required to participate.

Am I required to enter admission reasons in the ANAD?

No. Admission reasons is **optional**; problems during the NICU stay are **required**. If you enter an admission reason, you can use the teal links to pre-populate the problems during NICU stay and make any needed edits.

Do I need to enter a specific diagnosis per ICD-10 ?

No. Enter one of the 15 listed diagnostic categories which represent the major problems encountered in our NICU admissions. Each category may contain several different specific diagnoses that are included in that specific category.

However if you would like to submit ICD-10 codes when uploading your data via a .csv file, you can do so by following the instructions in the [ANAD Manual](#)

What are the advantages of using the ANAD?

Entering your NICU admissions into the ANAD will allow you to:

- Pre-populate the CCS Supplemental form (for all sections pertaining to NICU admissions)
- Pre-populate the CPQCC A/D and CPeTS Form
- Pre-populate the MatEx Form
- Review real-time reports in the All NICU Admits Focusboards for all NICU admits
- “Problems during NICU Stay” can be imported from the A/D form for higher acuity infants.

Edit NAD Record

Demographics Admission ABX / Central Lines **Disposition**

NICU Discharge Date 01-09-2021
[Set to Admit Dis](#)

NICU Disposition **Home from this NICU**

- Transport-Out to another hospital
- Died in this NICU
- Transfer to another unit within my hospital

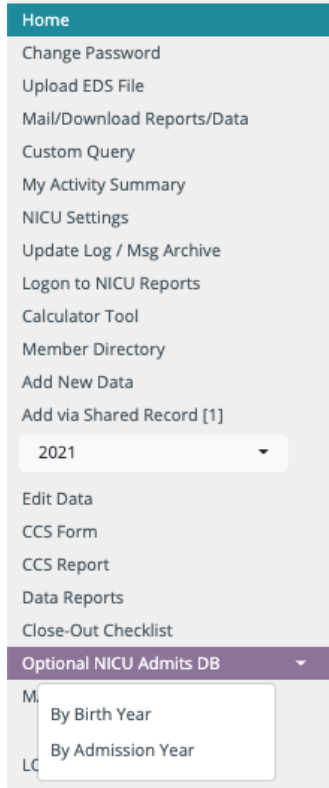
Problems during NICU Stay
[Check Admit Reasons](#)

- Suspected Infection ⓘ
- Resp Suspected infection ⓘ
 - Hypc* At risk for infection/sepsis
 - Hypc* Infection/sepsis
 - Hypc* Observe for infection/sepsis
 - Temp* Risk factors for infection/sepsis
 - Temp* Rule out infection/sepsis
 - Feed* Suspected infection/sepsis
 - BW/c* ABX greater than 3 days
- Small for gestational age ⓘ
- Perinatal transitional monitoring ⓘ
- Neonatal abstinence syndrome ⓘ
- Dysmorphic/chromosomal anomaly ⓘ
- Apnea/cyanotic event ⓘ
- Cardiac ⓘ
- Seizure/Neurological ⓘ
- Other Problem ⓘ

Check problems during NICU stay, i.e., problems that o

Use the teal copy link above to select the same items as the admit reasons used, make changes as needed.

Use your mouse to hover over the “i” for a description of each item



How do I access to the ANAD?

If you have access to the NICU Data site, you have access to the ANAD. On the NICU Data site, look for the **Optional NICU Admits DB** link in the left hand menu bar (as seen on the left).

If you do not have access to NICU Data, please submit a Help Desk ticket at www.cpqcchelp.org.

What fields am I required to complete?

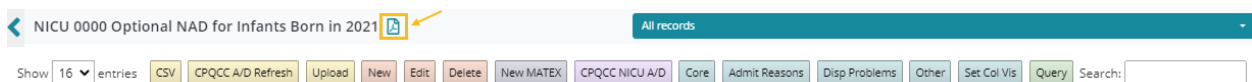
You are required to complete all fields, except for those that are marked “[optional]”.

Should I include infants being observed but not officially admitted to the NICU?

Please only enter data for infants who have been officially admitted to the NICU, i.e billed/charged for the NICU stay. If an infant was observed in the NICU but not billed/charged for the NICU stay, that infant would not qualify

Where can I find information about how to submit data in the All NICU Admits Database?

- The All NICU Admits Database manual can be found on top of the All NICU Admits Database screen, which can also be accessed [here](#).



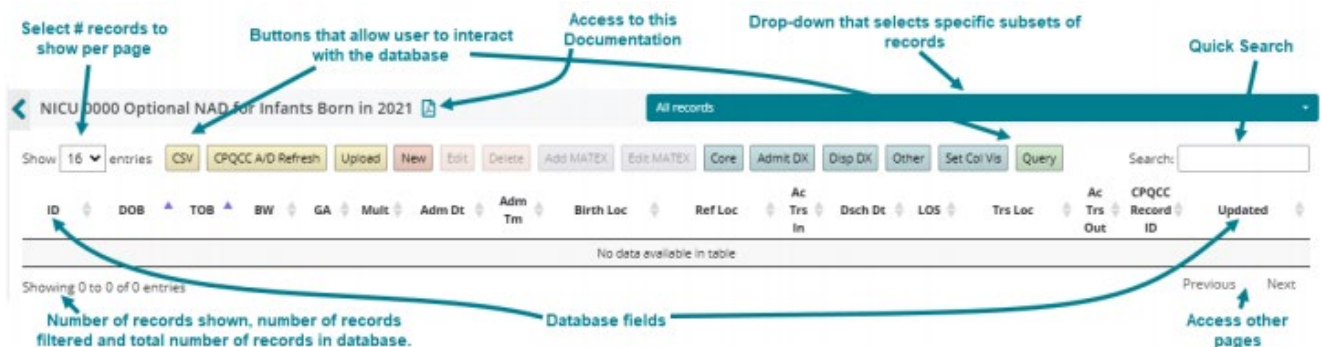
- The All NICU Admissions webpage (<https://www.cpqcc.org/nicu/nicu-data/all-nicu-admits-database>)

How do I enter data into the ANAD?

Records can be added or modified in 3 ways:

- Using the on-line form to add, edit or delete ANAD records.
- Uploading a CSV file by clicking on the Upload button.
- Adding existing CPQCC NICU A/D Records by clicking on the CPQCC A/D Refresh button.

Each of these options are explained in detail in the All NICU Admits [Instruction Manual](#).



Reports

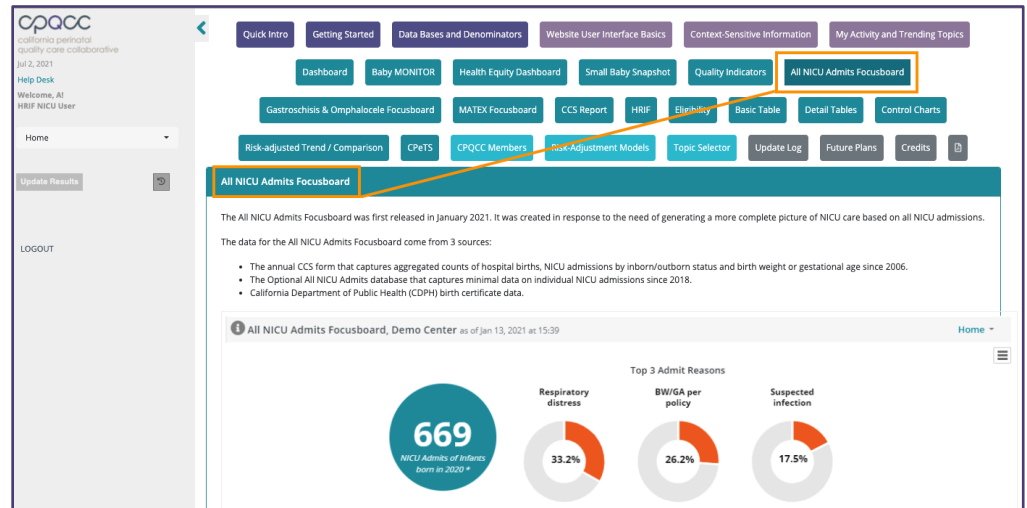
Where will the ANAD data be reported?

The ANAD data will be reported in the CCS report and the All NICU Admits Focusboards.

How do I access the All NICU Admits Focusboards?

CPQCC members that have access to NICU Reports will also have access to the All NICU Admits Focusboards.

If you do not have access to the NICU Reports, or are unsure if you do, please submit a Help Desk ticket at www.cpqcchelp.org.



How will the Lower Acuity Inborn

Admissions (LAINA) data be reported in the CCS report?

% of Live Births in Your Center considered LAINA by BW and GA

% of Inborn Admissions to Your NICU considered LAINA by BW and GA

% of Total Admissions to Your NICU considered LAINA by BW (includes outborns)

Section A. Hospital Births and NICU Admissions by Birth Weight

	< 401 grams	401-500 grams	501-750 grams	751-1,000 grams	1,001-1500 grams	1,501-2500 grams	> 2500 grams	Total
Total Live Births in Your Center	0	2	5	7	30	158	1,285	1,487
Total Admissions to Your NICU	0	3	12	14	43	83	231	386
Inborn Admissions to Your NICU	0	2	5	7	30	35	38	117
Lower Acuity Inborn NICU Admissions (LAINA)								
% of Live Births in Your Center Admitted to Your NICU	NA	100.0	100.0	100.0	100.0	22.2	3.0	7.9
% of Live Births in Your Center considered LAINA								
% of Inborn Admissions to Your NICU considered LAINA								
% of Total Admissions to Your NICU considered LAINA								
Outborn Admissions to Your NICU	0	1	7	7	13	48	193	269
Acute Outborn Admissions to Your NICU	0	1	7	7	13	48	193	269
Non-Acute Outborn Admissions to Your NICU	0	0	0	0	0	0	0	0

*sections in gold will be automatically added in the CCS report to satisfy the CCS mandate – no additional data entry required

Section D. Hospital Births and Inborn NICU Admissions by GA

	≤ 21 6/7 weeks	22 0/7 - 31 6/7 weeks	32 0/7 - 33 6/7 weeks	34 0/7 - 36 6/7 weeks	37 0/7 - 38 6/7 weeks	39 0/7 - 41 6/7 weeks	≥ 42 0/7 weeks	Unknown	Total
Total Live Births in Your Center	0	63	40	160	377	847	0	0	1,487
Total Admissions to Your NICU									
Inborn Admissions to Your NICU	0	55	7	20	14	21	0	0	117
Lower Acuity Inborn NICU Admissions (LAINA)									
% of Live Births in Your Center Admitted to Your NICU	NA	87.3	17.5	12.5	3.7	2.5	NA	NA	7.9
% of Live Births in Your Center considered LAINA									
% of Inborn Admissions to Your NICU considered LAINA									

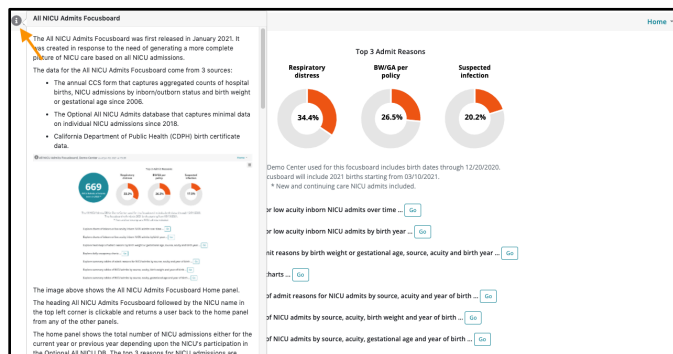
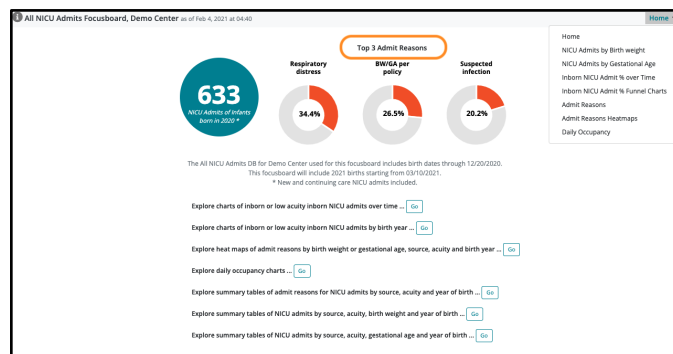
*sections in gold will be automatically added in the CCS report to satisfy the CCS mandate – no additional data entry required

How will the LAINA data be reported in the All NICU Admits Focusboards?

The All NICU Admits Focusboards shows a number of different panels looking at different aspects of **all** NICU admissions (inborn and outborn).

For the first visit to the All NICU Admits Focusboard, the home page is loaded. Subsequent visits are started where the user left off.

The All NICU Admits Focusboard Home page shows the top 3 reasons for NICU admissions for Database participants only. The “Go” buttons or the drop-down menu in the upper right corner are used to select different types of reports. Clicking on the All NICU Admits Focusboard header in the top left corner always takes you back to the Home page.



You can click the “i” in the upper left corner of the page for more information about the All NICU Admits Focusboard.

NICU Admits Table

All NICU Admits Focusboard, Demo Center as of Feb. 3, 2021 at 04:38

NICU Admits by Birth Weight

	Birth Weight (grams)						Total
	under 501	501 to 750	751 to 1,000	1,001 to 1,500	1,501 to 2,500	2,501+	
Births at NICU Hospital	6	9	13	32	256	3,358	3,674
NICU Admits	2	12	16	40	177	387	634
Inborn NICU Admits (INA)	1	8	12	32	146	271	470
% INA of Births at NICU Hospital for my NICU	16.7	88.9	92.3	100.0	57.0	8.1	12.8
Q1-Q3 for the Network	0.0 - 33.3	87.5 - 100.0	98.6 - 100.0	91.7 - 100.0	48.8 - 61.9	5.7 - 10.7	8.8 - 15.6
Q1-Q3 for Regional NICUs	0.0 - 42.9	80.0 - 100.0	92.6 - 100.0	91.8 - 102.3	60.0 - 61.9	8.8 - 12.5	14.1 - 21.3
Low Acuity Inborn NICU Admits (LAINA)	na	na	na	na	na	110	218
% LAINA of NICU Admits for my NICU	na	na	na	na	62.1	56.3	
Q1-Q3 for the Network	na	na	na	na	54.3 - 74.5	54.0 - 74.6	
Q1-Q3 for Regional NICUs	na	na	na	na	53.2 - 70.4	36.0 - 63.2	
% LAINA of Inborn NICU Admits for my NICU	na	na	na	na	75.3	80.4	
Q1-Q3 for the Network	na	na	na	na	67.9 - 83.7	77.2 - 88.7	
Q1-Q3 for Regional NICUs	na	na	na	na	61.1 - 83.6	64.4 - 89.6	
% LAINA of Births at NICU Hospital for my NICU	na	na	na	na	43.0	6.5	
Q1-Q3 for the Network	na	na	na	na	34.2 - 52.0	4.4 - 8.9	
Q1-Q3 for Regional NICUs	na	na	na	na	37.8 - 54.2	6.9 - 10.0	

No births with unknown birth weight. No NICU Admits with unknown birth weight.
NICU admits that continue an episode of care excluded from admit counts.
The vital statistics birth data includes birth dates through 12/31/2020. The All NICU Admits DB includes birth dates through 12/22/2020.

The NICU Admits table shows hospital births, NICU admissions, inborn NICU admissions and low acuity inborn NICU admissions by birth weight and gestational age that are derived from the

All NICU Admits Focusboard, Demo Center as of Feb. 4, 2021 at 04:40

NICU Admits by Gestational Age

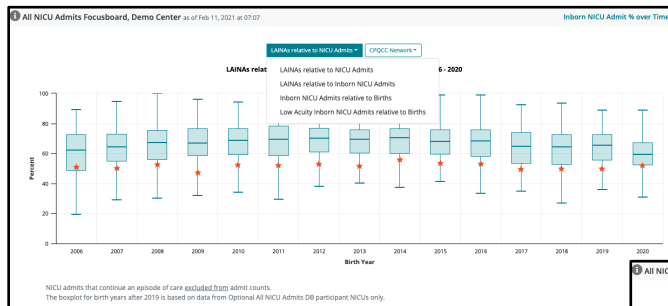
	Gestational Age						
	under 22	22 to 31 6/7	32 to 33 6/7	34 to 36 6/7	37 to 38 6/7	39 to 41 6/7	
Births at NICU Hospital	4	70	42	264	958	2,322	
NICU Admits	0	78	59	157	139	19	
Inborn NICU Admits (INA)	0	59	51	128	97	13	
% INA of Births at NICU Hospital for my NICU	0.0	84.3	121.4	48.5	10.1	5.1	
Q1-Q3 for the Network	0.0 - 0.0	76.0 - 94.4	102.7 - 131.3	41.6 - 53.2	7.2 - 12.0	3.3 - 7.9	0.0 - 22.5
Q1-Q3 for Regional NICUs	0.0 - 0.0	78.0 - 94.4	107.3 - 130.4	48.1 - 53.1	11.0 - 14.4	6.8 - 10.0	7.1 - 20.0
Low Acuity Inborn NICU Admits (LAINA)	0	0	36	106	76	108	
% LAINA of NICU Admits for my NICU	na	0.0	61.0	67.5	54.7	54.3	50.0
Q1-Q3 for the Network	0.0 - 0.0	0.0 - 2.2	41.2 - 77.8	63.3 - 80.2	48.1 - 76.1	53.5 - 75.3	50.0 - 100.0
Q1-Q3 for Regional NICUs	0.0 - 0.0	0.0 - 0.7	52.3 - 74.0	59.1 - 74.7	37.0 - 60.5	33.3 - 61.2	37.5 - 100.0
% LAINA of Inborn NICU Admits for my NICU	na	0.0	79.6	82.8	78.4	88.6	100.0
Q1-Q3 for the Network	0.0 - 0.0	0.0 - 2.4	55.6 - 81.8	78.0 - 91.0	73.5 - 88.6	77.8 - 90.7	100.0 - 100.0
Q1-Q3 for Regional NICUs	0.0 - 0.0	0.0 - 1.1	56.4 - 80.7	69.7 - 90.6	61.3 - 87.6	66.2 - 90.7	87.5 - 100.0
% LAINA of Births at NICU Hospital for my NICU	0.0	0.0	85.7	40.2	3.9	4.6	12.5
Q1-Q3 for the Network	0.0 - 0.0	0.0 - 2.2	55.6 - 100.0	31.4 - 40.5	5.5 - 10.3	3.0 - 6.6	0.0 - 18.3
Q1-Q3 for Regional NICUs	0.0 - 0.0	0.0 - 1.2	67.9 - 96.6	35.2 - 48.1	7.6 - 12.0	5.2 - 8.1	7.1 - 20.0

1 birth with unknown gestational age. No NICU Admits with unknown gestational age.
NICU admits that continue an episode of care excluded from admit counts.
The vital statistics birth data includes birth dates through 12/31/2020. The All NICU Admits DB includes birth dates through 12/20/2020.

CCS Form for closed-out years or the NICU Admits Database by year. You can change the table year using the drop-down in the header of the first column.

- The birth weight table resembles Section A of the CCS report.
- The gestational age table resembles Section D of the CCS report.

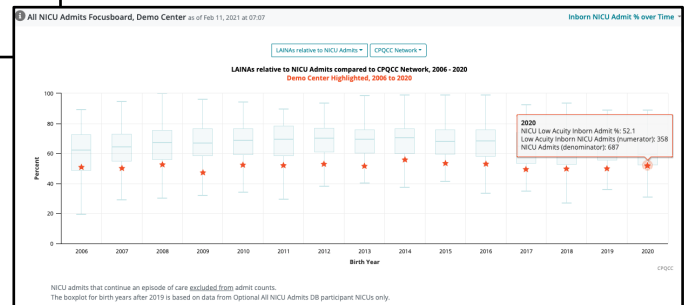
Inborn NICU Admit % over Time



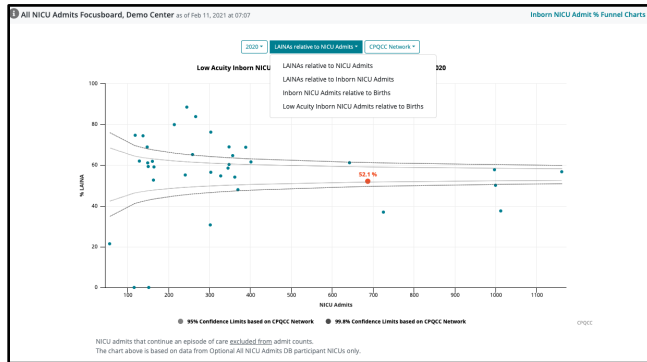
The Inborn NICU Admit % over Time report features NICU admit trends by year. For each year, a boxplot shows the NICU's observed percentage with box statistics derived either from the CPQCC network or the set of NICUs that provided a similar level of NICU care. The comparison group

can be modified using the right drop-down above the chart. The left drop-down above the chart allows the selection of different inborn admit metrics.

NOTE: This report is not available for freestanding children's hospitals.



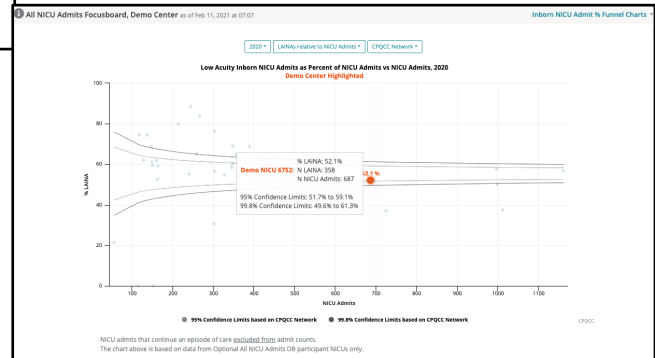
Inborn NICU Admit % Funnel Charts



The funnel charts give an alternative way to review annual Inborn NICU Admit percentages in comparison to all CPQCC network NICUs or the set of NICUs providing a similar level of NICU care. Each point in a funnel chart represents one NICU. The point for the currently active NICU is highlighted, slightly larger than all the other points and labeled with the observed,

unadjusted Inborn NICU Admit percent metric selected.

The funnel chart also features confidence limits that are constructed based on the selected comparison group at the 95% and 99.8% confidence level.



NOTE: This report is not available for freestanding children's hospitals.

Admit Reasons / Problems during NICU Stay Table

The Admit Reasons table shows the number and percent of NICU Admits (or subgroup) for each of the 17 admit reasons (derived from the All NICU Admits Database) for your NICU and a comparison group. The comparison group either consists of all Network NICUs or of those NICUs that provide a similar level of care. By default, the table is sorted by the largest to smallest admit reasons for the selected group. Length of stay (LOS) statistics are shown.

All NICU Admits Focusboard, Demo Center as of Feb 11, 2021 at 07:07												
Admit Reasons												
2020 Low Acuity Inborn NICU Admits												
Demo Center (N=368)												
All Participating NICUs (N=7,056)												
	N	%	N w/ LOS	Mean LOS	Min LOS	Max LOS	N	%	N w/ LOS	Mean LOS	Min LOS	Max LOS
All NICU Admits												
Low Acuity NICU Admits												
High Acuity NICU Admits												
Respiratory	112	30.4	111	11.2	1	68	2,422	34.3	2,401	9.8	1	85
BW/GA per	101	27.4	101	16.6	2	53	1,993	28.2	1,956	17.3	1	158
Suspected i	93	25.3	93	8.8	2	45	1,851	26.2	1,845	8.6	1	71
Hypoglycemia	90	24.5	90	8.7	1	49	1,396	19.8	1,389	8.2	1	94
Hyperbilirubin	16	4.3	16	7.1	2	18	434	6.2	432	8.6	1	67
Cardiac eve	21	5.7	21	7.8	1	32	389	5.5	383	6.7	1	55
Small for ge	23	6.3	23	11.5	2	33	344	4.9	343	12.7	1	67
Feeding diff	10	2.7	9	11.2	3	22	332	4.7	327	12.0	1	67
Neonatal ai	18	4.9	18	18.4	1	68	300	4.3	298	15.1	1	74
Dysmorphic/chromosomal anomaly	12	3.3	11	11.7	1	32	249	3.5	247	12.0	1	110
Perinatal transitional monitoring	4	1.1	4	3.0	1	5	228	3.2	227	5.7	1	35
Apnea/cyanotic event	6	1.6	6	15.8	3	49	152	2.2	152	9.3	1	67
Temperature instability	6	1.6	6	11.7	3	33	150	2.1	149	8.8	1	33
Seizure	4	1.1	4	6.3	4	8	39	0.6	39	5.7	1	22
Transport-in for insurance reasons	0		0				1	0.0	1	8.0	8	8
Transport-in for bed availability reasons	0		0				0		0			
Other	45	12.2	45	8.4	1	33	668	9.5	664	8.5	1	77

Problems during the NICU stay has also been added as another option.

Admit Reasons / Problems during NICU Stay Heatmaps

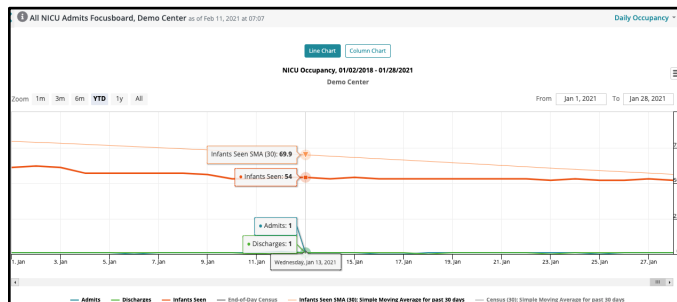


Heatmaps are used to display NICU admission counts and other metrics for each of admission reasons by birth weight or gestational age. A heatmap is a visual tool that focuses the user's attention on those combinations of admit reason and birth weight / gestational age that have the largest impact. In addition to specifying birth weight or gestational age as stratifiers, users may

select the birth year, all NICU admissions or a subgroup based on inborn/outborn status and/or acuity, the metric shown in the heatmap (NICU admissions, NICU average length of stay, total NICU days, etc.), and either the network or the group of NICUs that provide a similar level of care as the selected NICU to be displayed in a comparison heatmap. Problems during the NICU stay has been added as another heatmap option.

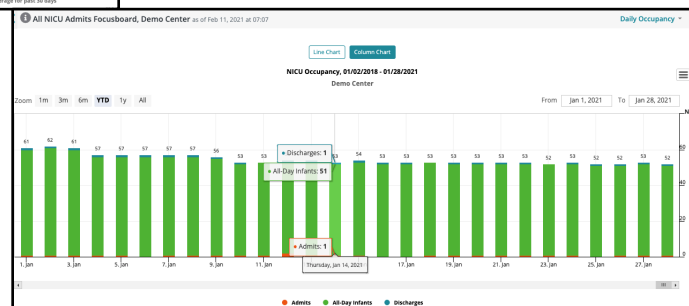


Daily Occupancy



The daily occupancy charts summarize NICU admits either as a column or as a line chart. The line chart distinguishes admits, discharges, infants seen, end-of-day census (hidden by default), and a simple moving average based on the previous 30 days for the last two metrics. Legend entries are clickable turning a line on (visible) or off

(invisible). The bar chart distinguishes admits discharges and all-day infants.



NOTE: When a NICU begins entering data into the All NICU Admits DB by birth year (rather than admit year), the first few months in the chart will show a steady increase until the birth years entered account for all NICU admits.