Department of HEALTH & HUMAN SERVICES | Division of Public Health

STATE OF NEW HAMPSHIRE
HEALTHCARE-ASSOCIATED INFECTIONS
2024 DIALYSIS CENTER REPORT

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New Hampshire Department of Health and Human Services

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EXECUTIVE SUMMARY

A healthcare-associated infection (HAI) is an infection that a patient acquires during the course of receiving treatment for another condition within a healthcare setting. Approximately 500,000 patients are treated with maintenance hemodialysis in the United States. Hemodialysis patients require a vascular access, which can be a catheter, a graft, or an enlarged blood vessel that can be punctured to remove and replace blood. Other access devices, such as catheter graft hybrid devices, also exist. Bloodstream infections and localized infections of the vascular access site cause substantial morbidity and mortality in hemodialysis patients. Hemodialysis vascular access types, in order of increasing risk of infection include arteriovenous fistulas created from the patient's own blood vessels; arteriovenous grafts typically constructed from synthetic materials; tunneled central lines; and non-tunneled central lines. Because of frequent hospitalizations and receipt of antimicrobial drugs, hemodialysis patients are also at high risk for infection with antimicrobial-resistant bacteria. Measuring and tracking rates of infection and utilizing this information is an important part of infection prevention.[i]

During the 2011 legislative season, the New Hampshire (NH) Legislature passed a bill amending NH Revised Statutes Annotated (RSA) 151:32-35, requiring dialysis centers to identify, track, and report selected HAI to the NH Department of Health and Human Services (DHHS). All facilities that reported data, did so in accordance to (RSA) 151:32-35. This report represents the third summary of HAI-related data reported by dialysis centers in NH.

Healthcare-Associated Infections in New Hampshire Dialysis Centers

During the year 2024, 95% of dialysis centers reported data. There was a statistically significant higher number of infections in NH than predicted based on national data. Twenty dialysis centers were licensed for the 2024 calendar year, nineteen dialysis centers reported into NHSN.

Vascular Access Infections

Nineteen dialysis centers reported:

- Access Related Bloodstream Infection (ARBSI):Positive blood culture with the suspected source reported as the vascular access or reported in NHSN as uncertain. Nineteen dialysis centers participated in reporting ARBSI; overall, ARBSI rates were similar compared to national data
- Bloodstream Infection (BSI): Any positive blood culture event. Nineteen dialysis centers participated in reporting BSI; overall, BSI rates were similar compared to national data.
- Local Access Site Infection (LASI): Pus, redness, or increased swelling of the vascular access site and access-related bloodstream infection not present. Nineteen dialysis centers participated in reporting LASI; overall, LABSI rates were higher compared to national data.
- Vascular Access Infection (VAI): Either a local access site infection or an access-related bloodstream infection. Nineteen dialysis centers participated in reporting VAI; overall, VAI rates were higher compared to national data.

Intravenous Antimicrobial Administration

Nineteen dialysis centers that administer intravenous (IV) antimicrobial therapy were licensed for the entire 2024 calendar year and therefore required to report IV

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antimicrobial therapy administration data. Intravenous antimicrobial administration can also be referred to as intravenous antimicrobial start.

Influenza Vaccination Coverage in Dialysis Center Healthcare Personnel

Nineteen dialysis centers licensed at any point during the 2024-25 influenza season were required to report healthcare personnel (HCP) influenza vaccination percentages.

National Healthcare Safety Network (NHSN) Dialysis Module

NHSN implemented a module for dialysis centers called the Dialysis Component. The Dialysis Component allows dialysis centers to report mandated, as well as optional measures, by using one web-based secure reporting system. This system contains two distinct modules: Dialysis Event Surveillance and Dialysis Prevention Process Measures.

All dialysis center-specific ratios, rates and corresponding p-values in this report were generated directly by NHSN using Poisson statistical methods. State-level rates and corresponding p-values were calculated using the NHSN statistical calculator.

Conclusion

This is the third report of NH dialysis data and it is an important part of continuing progress toward the goal of eliminating HAI in NH. This report provides selected HAI data that can be used by healthcare facilities in the state to identify areas for improvement as well as by healthcare consumers to make informed healthcare decisions.

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Statewide Bloodstream Infection Rates

Table 1 below shows the number of BSI reported by dialysis centers in NH. In 2024, there were 405 Vascular Access Site Infections (VASI) reported by the 19 dialysis centers in NH. All 19 dialysis centers were licensed for the entire 2024 calendar year and were required to report these data. The infections represent Bloodstream Infection (BSI), Access-Related Bloodstream Infections (ARBSI), Local Access Site Infection (LASI), Vascular Access Infection (VAI) procedures. The overall state rate for VASI was higher when compared to the national rate.

Table 1. Statewide dialysis bloodstream infection rates, Jan 1–Dec 31, 2024

	Observed Infections	Patient Months	Dialysis Rate	National Rate	P-Value	State Rate Compared to National Rate
Overall State Infections	405	42,000	1.0	0.27	0.00	Higher
BSI	35	10,500	0.3	0.30	0.52	Similar
LASI	153	10,500	1.5	0.30	0.00	Higher
ARBSI	32	10,500	0.3	0.23	0.12	Similar
VAI	185	10,500	1.8	0.43	0.00	Higher

HAI: Healthcare-associated infection
BSI: Bloodstream Infection
ARBSI: Access-Related Bloodstream Infection
LASI: Local Access Site Infection
VAI: Vascular Access Site Infection

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Table 13. Influenza vaccination percentages for dialysis HCP by dialysis, 2024-25 influenza season, Oct 1, 2024–Mar 31, 2025

Dialysis Name	HCP Vaccinated	Total HCP	% HCP Vaccinated	P-Value	Dialysis % Compared to State %
Central New Hampshire Kidney Center	-	-	-	-	-
Derry Dialysis	-	-	-	-	-
Fresenius Kidney Care Claremont	-	-	-	-	-
Fresenius Kidney Care Cocheco River	22	26	84.6	0.06	Similar
Fresenius Kidney Care Exeter	12	21	57.1	0.30	Similar
Fresenius Kidney Care of Nashua	13	24	54.2	0.16	Similar
Fresenius Kidney Care Strafford County	20	28	71.4	0.72	Similar
Fresenius Medical Care Lakes Region	†	†	†	†	†
Fresenius Medical Care Lancaster	†	†	†	†	†
Fresenius Medical Care Lebanon	24	33	72.7	0.58	Similar
Fresenius Medical Care Londonderry	16	28	57.1	0.23	Similar
Fresenius Medical Care Rockingham County	25	45	55.6	0.08	Similar
Fresenius Medical Care Southern NH	19	27	70.4	0.81	Similar
Manchester Dialysis	-	-	-	-	-
Manchester Kidney Center	35	50	70.0	0.78	Similar
Monadnock Dialysis Center	30	33	90.9	0.00	Higher
Mt Washington Valley Dialysis Center	12	20	60.0	0.45	Similar
Nashua Dialysis	-	-	-	-	-
New Hampshire Kidney Center	28	35	80.0	0.13	Similar
Seacoast Dialysis Center	14	36	38.9	0.00	Lower
State Total	**298**	**438**	**68.0**	**-**	

† Data are not shown for facilities reporting less than 20 total healthcare personnel.
- Facility did not report any data contributing to SIR or Rates during this time period.

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