

**Module 4**  
*Section A: Basics of Surveillance and Surveillance Design*

**Term**  
Active surveillance

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**Module 4**  
*Section A: Basics of Surveillance and Surveillance Design*

**Term**  
Passive surveillance

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**Module 4**  
*Section A: Basics of Surveillance and Surveillance Design*

**Term**  
Surveillance

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**Module 4**  
*Section A: Basics of Surveillance and Surveillance Design*

**Term**  
Surveillance plan

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**Module 4**  
*Section B: Surveillance Methodologies and Purpose*

**Term**  
Concurrent data collection

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**Module 4**  
*Section B: Surveillance Methodologies and Purpose*

**Term**  
Retrospective data collection

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**Term**  
Targeted surveillance

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**Term**  
Total surveillance

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Surveillance that relies on others (e.g., physicians, nurses, or the microbiology laboratory) who are not trained on surveillance methods or primarily responsible for surveillance activities to report healthcare-associated infections.

Surveillance that involves trained individuals (such as IPs) actively looking for healthcare-associated infections using standardized definitions and protocols.

The set of protocols and guidelines that will direct surveillance activities

A system for routine, ongoing, and systematic collection, analysis, interpretation, and dissemination of surveillance data to identify infections (i.e., HAI and community-acquired), infection risks, communicable disease outbreaks, and to maintain or improve resident health status.

Collating of data that has already been collected, with a focus on examining what has already happened.

Collecting and referencing of data in real time, with a focus on new information as it comes in.

Measures and tracks all infections at a facility, across its entire population of residents and staff; also known as "comprehensive" or "whole house" surveillance.

Focuses on a narrow selection of infections and pathogens; also known as "priority-directed" surveillance.

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*Section C: Collection and Compilation of  
Surveillance Data*

**Term**  
Categorical data

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*Section C: Collection and Compilation of  
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**Term**  
Continuous data

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*Section C: Collection and Compilation of  
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Demographic data

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Discrete data

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**Term**  
Event data

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*Section C: Collection and Compilation of  
Surveillance Data*

**Term**  
Process data

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**Term**  
Qualitative data

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*Section C: Collection and Compilation of  
Surveillance Data*

**Term**  
Quantitative data

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Data that can be measured on a continuum or scale.

Data split into mutually exclusive groups.

Data representing whole numbers.

Data that is socio-economic in nature (e.g., age, sex, race).

Data related to facility protocols and practices (e.g., standard precautions, environmental cleaning).

Data related to high-volume, high-risk events within a facility (e.g., HAIs, immunization rates).

Data representing counts or values on a numeric scale.

Data representing qualities or characteristics.

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*Section C: Collection and Compilation of Surveillance Data*

**Term**  
Time data

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*Section D: Outbreak Management*

**Term**  
Case definition

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*Section D: Outbreak Management*

**Term**  
Control measures

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*Section D: Outbreak Management*

**Term**  
Line list

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**Module 4**  
*Section E: Data Management, Analysis, Interpretation, and Reporting*

**Term**  
2 by 2 table

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*Section E: Data Management, Analysis, Interpretation, and Reporting*

**Term**  
Action plans

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Attack rate

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Bar graph

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A set of uniformly applied criteria for determining whether a person should be identified as having a particular disease, injury, or other health condition; it usually specifies clinical, laboratory, and other diagnostic criteria.

Data bound by a unit of time (e.g., month, year).

A document that contains information related to patient symptoms (in case there is the possibility that it is a pseudo-outbreak), medications, procedures, consults, patient locations, contact with HCP, and host of other factors that might predispose the patients to the infection under investigation.

Protocols designed to interrupt the transmission of and reduce or eliminate the occurrence of communicable diseases and infections.

Detail the steps necessary for reaching the goals and addressing the issues identified during surveillance.

A table with two outcome columns (e.g., disease and no disease) and two exposure rows (e.g., exposed and not exposed).

Presents data as side-by-side bars for an easy comparison of magnitudes, frequency distributions, and time-series data.

The proportion of persons at risk who become infected over an entire period of exposure or a measure of the risk or probability of becoming a case.

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Chart

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Correlation

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Deviation

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Dispersion

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Histogram

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Incidence proportion

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Incidence rate

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Level of significance

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Calculation of the direction and magnitude of a relationship between two variables.

A form of visual data presentation used when the magnitudes of different events is important or when one wants to compare parts of the bigger picture.

The distribution of data around the mean.

The difference between an individual value in a data set and the mean value.

A measure of the number of new cases or events within the population at risk during the identified time period.

A graphic of frequency distribution that looks much like a bar graph but in which each bar represents a different time interval.

The probability value arbitrarily chosen by the researcher as the desired level of probability at which one may feel secure in rejecting the null hypothesis; typically set at 0.05 or 0.01.

Represents the proportion of new cases over a particular period of time.



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Line chart

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Loeb criteria

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McGeer criteria

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Mean

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Measures of central tendency

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Median

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Mode

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Mortality rate

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Guide antimicrobial treatment and prescribing decisions for specific patients.

Chart used to display the same data over time, for example, the rate of ICU CLABSI over a year; each time point is equidistant from the previous and next time points, with time running along the x axis.

The sum of all values divided by the total number of values.

Standardized definitions that address clinically relevant infections found in LTC settings

The midpoint of a set of observations

Describe how observations cluster around a middle value and locate only the center of a distribution measure; include mean, median, and mode.

A measure of the frequency of death in a defined population during a specified time (usually a year).

The observation that occurs most frequently in a data set.

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National Healthcare Safety Network (NHSN)  
criteria

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Negative predictive value (NPV)

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Normal distribution

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Odds ratio (OR)

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Period prevalence

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Pie chart

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Point prevalence

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Population

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A measure of the proportion of persons without a disease who test negative.

Guide decision-making based on certain conditions being met or signs and symptoms being in evidence.

The probability of having a particular risk factor if a condition or disease is present divided by the probability of having the risk factor if the disease or condition is not present.

A bell-shaped curve on a graph in which the distribution (spread) of the values is even on both sides of the mean (both halves are equal) and the mean, median, and mode are all equal.

Shows the proportion that a group represents within the whole population.

Prevalence during a span of time (e.g., over the course of a given month).

The set of all observations of interest to the investigator (the universe).

Prevalence at a specific point in time (e.g., on a given day).

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Positive predictive value (PPV)

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Power

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Proportion

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Range

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Rate

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Ratio

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Relative risk (RR)

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Reliability

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The ability of a test to detect a specified difference.

A measure of the proportion of persons with a positive test who have a disease.

The difference between the smallest and largest values in a data set.

A specific kind of ratio that compares a part to the whole.

The comparison of any two quantitative values.

A specific kind of ratio that includes a unit of time, and provides information about how fast events are occurring.

The ability of the indicator to accurately and consistently identify the events it was designed to identify across multiple healthcare settings. (The Joint Commission)

The probability of developing a disease if the risk factor is present divided by the probability of developing the disease if the risk factor is not present.

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Sample

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Sampling distribution

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Sensitivity

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Specificity

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Standard deviation

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Surveillance criteria

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Table

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Type I error

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The distribution of samples taken.

A group of observations selected from a population and chosen to represent the population as a whole.

A measure of the probability that a test correctly identifies persons without a disease as negative.

A measure of the probability that a test correctly identifies as positive persons who have a disease.

Specific conditions that qualify as infections for the purpose of surveillance data collection; they are also used in the calculation and reporting of infection rates.

A measure that reflects the distribution of values around the mean; it is the average of all deviations in a data set and indicates how spread out the data are around the mean.

Occurs when the null hypothesis is rejected when it is actually true or when significance is attributed when there actually is none.

A data set presented in rows and columns.



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Type II error

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Variance

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p value

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The deviation around the mean of a distribution.

Occurs when the null hypothesis is accepted when it is actually false or when significance is not attributed when it actually exists.

The probability of observing a sample in which the test statistic is greater than or equal to the test statistic for the sample that was actually observed.