



**HEALTHCARE-ASSOCIATED  
*CLOSTRIDIUM DIFFICILE* INFECTIONS  
IN CALIFORNIA GENERAL ACUTE CARE  
HOSPITALS, APRIL 1, 2010 THROUGH  
MARCH 31, 2011**

CALIFORNIA DEPARTMENT OF PUBLIC HEALTH  
CENTER FOR HEALTH CARE QUALITY  
HEALTHCARE-ASSOCIATED INFECTIONS PROGRAM

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**HEALTHCARE-ASSOCIATED *CLOSTRIDIUM DIFFICILE* INFECTIONS  
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## EXECUTIVE SUMMARY

This is the second California Department of Public Health (CDPH) report on *Clostridium difficile* infections (CDI) and the first using data submitted by hospitals to the Centers for Disease Control and Prevention (CDC) National Healthcare Safety Network (NHSN). California is only the second state (after New York) to report hospital CDI rates using NHSN data, and the first to do so statewide. Hospital reporting of laboratory-based CDI data to NHSN ensures accurate classification of CDI cases as either hospital related or community related. Classification of CDI cases was not available for the 2011 report.

*Clostridium difficile* (*C. difficile*) is a common cause of diarrhea in health care settings, resulting in increased hospital stays and higher morbidity and mortality rates among patients. Morbidity and mortality due to CDI has increased over the past several years due to the emergence of *C. difficile* strains that are more infectious and more virulent. Infection control precautions including hand hygiene and environmental cleaning are essential in preventing transmission. Virtually all patients with CDI received antibiotics between two weeks and three months prior to the infection; therefore, judicious use of antibiotics is also important in preventing infections. Costs associated with CDI have been estimated at \$3.2 billion per year in the United States, and \$384 million in California.

Health and Safety Code section 1288.55(a)(1) requires hospitals to report to CDPH all cases of CDI identified in their facilities. From April 1, 2010 through March 31, 2011, 350 (91.4%) of 383 California licensed general acute care hospitals (GACH) reported at least 10 months of CDI data. Among the 350 reporting hospitals, 36 reported no CDIs during the reporting period.

Hospital reporting of CDI data to NHSN allows for categorizing each case by whether the onset of illness occurred in the community or in a hospital. Cases identified as community onset (CO) are cases in which the positive stool sample for CDI was obtained during the first three days of the patient's hospital admission. These cases are presumed unrelated to the patient's stay in that hospital. Hospital-related cases are identified as hospital onset or hospital associated. Hospital-onset (HO) cases are cases in which the positive stool sample for CDI was obtained on day four or later during the hospital stay. Hospital-associated (HA) are HO cases plus cases in which a patient who was discharged from the same hospital within the previous four weeks is readmitted to that hospital with a new positive stool sample for CDI during the first three days of admission. For HA cases, the CDI could have occurred as a result of the recent hospitalization or could be related to other exposures outside of the hospital.

This report provides both an HA and HO CDI rate for each hospital, as both rates may reflect hospital care. For this reporting period NHSN did not collect information on type of laboratory test used by the facility to detect CDI. Rates from facilities using different types of laboratory tests are not comparable, as the sensitivity of the tests, i.e., the ability of the tests to detect *C. difficile* when present, can differ by as much as two-fold.

Although reporting CDI data to NHSN allows for accurate classification of CDIs, it does not allow the data to be used to compare hospitals with each other or with a state average. The data in this report should be used as a hospital baseline and not for comparing hospitals because: (1) for this reporting period, NHSN did not allow hospitals to report the laboratory methodology used to test for CDI, and tests with different sensitivities affect reported rates, and (2) NHSN does not adjust for differences in the risk for CDI in different hospital patient populations. Laboratory-based reporting also depends on appropriate clinician test ordering and laboratory processing. Data on laboratory methodology will be available in the next reporting period.

Long-term acute care (LTAC) hospitals have longer patient lengths of stay and length of stay is an established risk factor for CDI [1]. An LTAC hospital is a licensed GACH defined by the Centers for Medicare & Medicaid Services (CMS) as providing care for patients with medically complex conditions requiring an average length of stay for all patients of greater than 25 days. For this reason, we present HO and HA incidence rates for LTAC hospitals separately from the other GACHs.

HO incidence rate calculated pooled mean

- LTAC hospitals: 18.8 per 10,000 patient days.
- GACH: 7.0 per 10,000 patient days.

HA incidence rate calculated pooled mean

- LTAC hospitals: 18.8 per 10,000 patient days.
- GACH: 9.4 per 10,000 patient days.

LTAC hospitals as a group had CDI rates more than twice those of GACHs. This is likely related in part to the longer length of stay for patients in these hospitals compared with patients in GACHs; the average length of stay for a patient in California LTAC hospitals during this reporting period was 28.9 days, compared with 4.5 days in other GACHs.

Hospital rates for CDI may also differ because their patient populations have different risks for infection that are beyond the control of the hospital. Patients who are 65 years of age or older have higher rates of CDI. Adjusting hospital CDI rates for differences in the age of their patient populations requires individual patient level data, which NHSN does not collect. The rate of CO cases has also been shown to affect the rate of HO infections, perhaps reflecting higher rates of admission of patients already at increased risk for CDI, such as patients from skilled nursing facilities. An NHSN risk adjustment method using CO rates may be available in 2012. This report is the first step toward obtaining data to develop appropriate risk adjustment methods for CDI, which will allow for comparing hospitals within California and nationally.

## INTRODUCTION

This report covers the numbers and rates of *Clostridium difficile* (*C. difficile*) infections (CDI) reported by hospitals from April 1, 2010 through March 31, 2011. This is the second report on CDI developed by the California Department of Public Health (CDPH) and the first using data submitted by hospitals using National Healthcare Safety Network (NHSN), a web-based surveillance and reporting system for health care associated infections developed and maintained by the Centers for Disease Control and Prevention (CDC).

*C. difficile* is a common cause of diarrhea in health care settings, resulting in increased hospital stays and higher morbidity and mortality rates among patients [1, 2]. Morbidity due to CDI has increased over the past several years due to the emergence of *C. difficile* strains that are more infectious (more easily spread from person to person) and virulent (cause more severe illness) [2]; CDI appears to have replaced methicillin resistant *Staphylococcus aureus* as the most common hospital-onset infection in U.S. hospitals [3, 4]. Costs associated with CDI have been estimated at \$3.2 billion per year in the United States and approximately \$384 million in California [2, 5].

The *C. difficile* bacterium spreads person to person via fecal-oral contact. In health care facilities, *C. difficile* is commonly transmitted on the hands of personnel. The bacterium can also form spores that survive for prolonged periods in the environment and are resistant to many common disinfectants, leading to transmission from contaminated surfaces. Enhanced infection control measures including hand hygiene and environmental cleaning have been shown to decrease transmission and CDI [2]. Most people who acquire *C. difficile* will naturally clear the bacteria without treatment. Disruption of the normal bacterial flora of the colon, most commonly from use of antibiotics, allows the growth of *C. difficile*, which is resistant to many antibiotics. CDI occurs with the production of toxin, which can result in watery diarrhea (at least three bowel movements per day for two or more days), fever, loss of appetite, nausea, abdominal pain and tenderness, and more serious complications including colitis, megacolon, and death. Relapses of antibiotic-associated CDI occur in up to 20% of cases and can become increasingly unresponsive to treatment [2].

Once a patient acquires the *C. difficile* bacteria (generally during admission to a hospital or in another health care setting), the use of antibiotics can cause CDI by eliminating other bacteria that compete with *C. difficile*. Virtually all patients with CDI received antibiotics between two weeks and three months prior to infection; reducing the use of broad-spectrum antibiotics has been shown to decrease CDI [2, 6]. Up to 25% of cases of antibiotic-associated diarrhea in health care settings are caused by CDI. Additional risk factors for CDI include advanced age, extended hospital stays, gastrointestinal surgery, and cancer chemotherapy. Although CDI is increasing in pediatric and adult populations, it remains highest in persons aged 65 and older [2, 4, 7]. The prevalence of asymptomatic colonization can be more than 25% in acute care hospital patients and is also common in long-term care facility residents [2]. Newborn infants are frequently colonized with *C. difficile* but do not become symptomatic; testing for CDI is not recommended in children less than one year of age [2].

A *C. difficile* infection with onset in the hospital does not necessarily indicate that the patient acquired the bacteria during that hospitalization. A person may be colonized with *C. difficile* from a previous exposure; that is, the bacteria are present in the body without causing an infection and can be present for a year or more. In these individuals an infection may result when intestinal bacterial are disrupted, resulting in increased growth of already-present *C. difficile*. Hospitals that admit more patients who are colonized with *C. difficile* may have higher rates of hospital onset CDI. A recent study shows that rates of hospital onset CDI are higher in hospitals that also have higher rates of community onset cases [7]. Patients who are 65 years of age and older are also at increased risk of carrying *C. difficile* and developing CDI [7].

The type of laboratory test the hospital uses to detect CDI will also influence its CDI rate, as there can be as much as a two-fold difference in test sensitivity, which is the ability of the test to detect *C. difficile* when present. Before comparing rates of CDI among different hospitals, rates should be adjusted to account for differences in laboratory test methodologies and patient populations, such as patient's age and rates of community onset cases. Risk adjustment is based on characteristics of the entire patient population in the hospital, not just those with infections. Risk stratification is an alternative to risk adjustment. This process groups hospitals according to characteristics that substitute for differences in patient population. For CDI, length of stay is the only characteristic known to be both related to risk of CDI and different in different types of hospitals.

Differences in rates can represent differences in patient populations or differences in infection and transmission prevention practices. Because NHSN did not collect laboratory test methodology data, patient population data (such as age for all hospitalized patients), or community onset rates, the rates reported here have not been risk adjusted. Comparisons must also assume that all laboratory and patient day data have been entered into NHSN accurately and correctly according to NHSN protocols, which cannot be verified by CDPH.

## **METHODS**

California Health and Safety Code section 1288.55 (a) (1) requires all California licensed general acute care hospitals (GACHs) to report to CDPH all cases of health care associated CDI and the number of inpatient days. CDPH must post CDI incidence rates on its website.

### *Clostridium difficile* Laboratory-identified Event Surveillance

Beginning April 1, 2010, CDPH required all California licensed GACHs to report CDI using the NHSN Multidrug-Resistant Organism (MDRO) Laboratory-identified (LabID) Event module [8]. The LabID Event surveillance method requires the hospital to report only positive test results and the day the patient was admitted to the hospital, excluding neonatal intensive care units (NICUs) and well-baby nurseries. NHSN defines LabID Events as all non-duplicate *C. difficile* positive laboratory tests including specimens collected during an emergency department visit if the specimen was collected the same day as the patient admission. NHSN defines a duplicate laboratory test as being from the same patient following a previous laboratory test within two weeks prior to the current admission. Detailed definitions are provided below.

## Definitions

We identified 375 licensed GACHs representing 427 physical campuses with active acute care beds that operated continuously (for the full 12 months) during the reporting period. Of these, 44 licensed hospitals had more than one campus associated with its license. We defined a multi-campus reporting facility as a licensee that reported health care associated infection (HAI) data combined for two or more jointly operated general acute care campuses (37 licenses comprising 81 campuses). We defined a single-campus reporting facility as an individual general acute care campus whose license included: (a) only one general acute care campus (331 licenses comprising 331 acute care campuses) or (b) more than one jointly-operated general acute care campus each of which reported infection information separately (7 licenses comprising 15 campuses). In total, there were 383 reporting entities, hereafter referred to as hospitals. We referred to multi-campus hospitals by the business name of the licensee in CDPH Licensing and Certification (L&C) records, except for the licenses involving University of California hospitals, which are described as such.

We present CDI rates for long-term acute care (LTAC) hospitals separately from other hospitals based on the likelihood that their CDI rates will be higher as a result of longer patient lengths of stay. Length of stay is an established risk factor for CDI [1]. An LTAC hospital is a licensed GACH defined by the Centers for Medicare & Medicaid Services (CMS) as providing care for patients with medically complex conditions requiring an average length of stay for all patients of greater than 25 days. We identified California LTAC hospitals through CMS and assessments by HAI Program staff. We do not present CDI rates for hospitals by peer group or type of hospital, (i.e., major teaching, pediatric, or trauma), as there is no evidence that risk for acquiring CDI in these types of hospitals is higher or lower than in hospitals outside of these peer groups. Additionally, comparisons within hospital peer groups might be misleading due to differences in laboratory testing methodology between individual hospitals, as described previously.

We excluded from this report facilities with a GACH license that did not operate any acute care beds during the reporting period; this applied to one hospital open for three months. Hospitals included may no longer operate under a single license or may have closed since the end of the reporting period for these data. Additionally, new hospitals may have been licensed after the end of the reporting period.

We used the NHSN definitions for surveillance and reporting of CDI [8]. A *C. difficile* LabID Event was a positive result for a laboratory assay for *C. difficile* toxin A and/or B or a toxin-producing *C. difficile* organism detected in a stool sample. This included laboratory tests positive for *C. difficile* from all available inpatient locations except NICUs and well-baby nurseries. We entered each LabID Event for individual patients by location and categorized them based on facility admission date and specimen collection date into the following:

**Hospital Onset (HO):** LabID Event that occurred more than three days after admission to the facility (i.e., on or after day four).

**Community Onset Hospital Associated (CO-HA):** LabID Event from a patient within the first three days of admission who was discharged from the facility within four weeks prior to the current date of stool specimen collection.

**Hospital Associated (HA):** the sum of HO LabID Events and CO-HA LabID Events.

Hospitals summed and entered into NHSN the denominator data (patient days and admissions) for all inpatient locations except NICUs and well-baby nurseries. We calculated HO and HA incidence rates for every hospital that reported data in NHSN for at least ten months during the reporting period.

### *Quality Assurance*

Hospital personnel were solely responsible for the quality and completeness of their CDI data. CDPH helped hospitals identify potential systematic data errors by reviewing hospital-specific NHSN data and identifying and reporting to hospitals potential discrepancies. In April and May 2011, we distributed to all hospitals quality assurance and control reports, which identified missing, incomplete, or potentially aberrant data for the reporting period. We strongly encouraged hospitals to investigate and resolve these data issues. CDPH made available to hospitals consultation from program epidemiologists and regional infection prevention staff to help resolve NHSN enrollment or reporting issues. We also reminded facilities that denominator data (patient days and admissions) should exclude patient days and admissions from NICUs and well-baby nurseries, per NHSN protocol [8]. The facilities made all corrections in NHSN. Additionally, in October 2011 we sent an email to all facilities with missing NHSN data (numerator or denominator) notifying them of the number of months for which NHSN had no data. We encouraged facilities to make corrections and enter missing data before the final data download from NHSN on October 24, 2011. CDPH staff did not independently validate the hospital data in this report.

### *Analyses*

We performed the following calculations on data submitted to NHSN during the reporting period. The numerators for the rates were all LabID Events categorized as defined above. The denominators for the rates were total inpatient days for all available inpatient locations, excluding NICUs and well-baby nurseries. For each hospital, we calculated the HO Incidence Rate and the HA Incidence Rate. The equations for the rate calculations are shown below:

$$\text{HORateper } 10,000\text{inpatientdays} = \frac{\text{Number of HOCases}}{\text{TotalInpatientDays}} \times 10,000$$

$$\text{HARateper } 10,000\text{inpatientdays} = \frac{\text{Number of HACases}}{\text{TotalInpatientDays}} \times 10,000$$

For each rate, we calculated exact 95 percent confidence intervals using the Poisson distribution [10]. We calculated the pooled mean for each rate by dividing the sum of all CDI cases by the sum of all inpatient days.

For a measure of the severity of illness in hospital patient populations, we used campus-specific case mix indices (CMIs) published by the California Office of Statewide Health Planning and Development (OSHPD) for fiscal year 2008/2009, if available [<http://www.oshpd.ca.gov/HID/Products/PatDischargeData/CaseMixIndex/default.asp>], and rounded indices to two decimal places. Although OSHPD derived CMIs using weights based on resource consumption by Medicare patients, OSHPD applied the CMI calculation to all patient discharge data reported by California hospitals. CMIs were available only for individual hospital campuses, not for consolidated licensed hospitals as a whole. The CMI provides a useful reference point when examining individual hospital CDI rates as it can indicate whether a hospital serves patients with higher or lower severity of illness. Severity of illness is one factor associated with a hospital having a higher or lower CDI rate when compared to the pooled mean. For example a hospital caring for patients with higher severity of illness could be predicted to have higher rate of CDIs. It is important to note that the CMI is only one factor that may explain the difference between a hospital's CDI and the pooled mean. Additionally, CMI may not account completely for differences in severity of illness between hospital patient populations

## **RESULTS**

For the reporting period April 1, 2010 through March 31, 2011, L&C listed 383 licensed GACH and LTAC hospitals representing 427 physical campuses with active acute care beds. Among the 383 licensed facilities, 350 (91.4%) California licensed GACHs reported at least ten months of CDI data into NHSN. Table 1 displays reporting status and number of months of reporting for each of the 33 hospitals for which we did not calculate HO or HA incidence rates because the hospital reported less than ten months of CDI data. Tables 2 and 3 display the number of HO and HA CDIs, total number of patient days, and HO and HA incidence rates for each LTAC hospital and GACH, respectively. One of 16 LTAC hospitals reported 11 months of data; all other LTAC hospitals reported data for all 12 months of the reporting period. One GACH reported 10 months of data, eight GACH reported 11 months of data, and the remaining 325 GACHs reported data for all 12 months of the reporting period. Thirty-six hospitals reported no CDIs during the reporting period.

### *Hospital Onset Rate*

GACHs reported 9,870 HO cases from 14,111,508 inpatient days for a pooled mean HO rate of 7.0 per 10,000 inpatient days. LTAC hospitals reported 640 HO cases from 340,674 inpatient days for a pooled mean HO rate of 18.8 per 10,000 inpatient days.

### *Hospital Associated Rate*

GACHs reported 13,327 HA cases from 14,111,508 inpatient days for a pooled mean HA rate of 9.4 per 10,000 inpatient days. LTAC hospitals reported 641 HO cases from 340,674 inpatient days for a pooled mean HO rate of 18.8 per 10,000 inpatient days. HA rates for LTAC hospitals were not expected to differ from HO rates since LTAC hospitals rarely discharge and readmit patients.

## DISCUSSION

This is the second report of CDI incidence rates among California acute care facilities, and the first using NHSN data. California is only the second state (after New York) to report hospital CDI rates using NHSN data, and the first to do so on a statewide basis [11]. In addition to requiring CDI reporting only via NHSN, we implemented a quality assurance process and sent quality control reports to hospitals with NHSN data. Additionally, we identified hospitals with missing NHSN data and sent an additional email reminder to enter all data for the reporting period. As a result, reporting compliance, defined as reporting sufficient data to generate a CDI rate, increased from 87.2% in the first year of reporting to 91.4% for the second year of reporting.

Use of the NHSN LabID Event reporting method, rather than paper-based reporting which was used last year, ensures that all California hospitals use the same definitions for CDI events, which results in appropriate classification of HO and HA CDI cases. NHSN implements an algorithm based on the date of the test and the date of admission to categorize CDI LabID events as either HO or HA. Testing should be performed only in patients with diarrhea, since the CDI definition assumes that any patient with a positive test has a symptomatic infection. Practices such as testing patients to determine if they are responding to treatment or for placement in a long-term care facility are not recommended but could affect CDI rates if performed.

The LabID Event method ensures standardized reporting into NHSN, but does not include data on type of laboratory test used by the facility to detect CDI. Rates from facilities using different types of laboratory tests are not comparable, as there can be as much as a two-fold difference in the test sensitivity. Some facilities may have changed laboratory testing methodology during the reporting period. Without data on type of test, we could not adjust CDI rates for testing methods and therefore we cannot compare facility-specific CDI rates. In the next reporting period, NHSN data will include laboratory testing methodology.

CDI rates fully adjusted for differences in patient populations would then primarily reflect differences in infections prevention measures and/or antibiotic utilization. Hospitals may have high CDI rates for a variety of other reasons, including laboratory testing methods and patient populations with different risks for infection such as age and residence in a skilled nursing facility. In 2012, NHSN may have data to enable us to adjust the data for these factors. Facilities also may have falsely lower CDI rates if they failed to exclude patient days and admissions from NICUs and well-baby nurseries when reporting denominators, as required by NHSN LabID Event protocol. Future quality control procedures will include periodic reminders to facilities to exclude these data from CDI denominators.

LTAC hospitals as a group have CDI rates that are more than twice those of GACHs. This is likely be related in part to the longer length of stay for patients in LTAC hospitals compared with patients in GACHs. The average length of stay for a patient in California LTAC hospitals during this reporting period was 28.9 days, compared with 4.5 days in other GACHs. The risk of CDI increases with longer hospitalization [1]. Other factors in LTAC hospitals, including antibiotic usage and the higher risk for prior exposure to *C. difficile* (since most of these patients are admitted to LTAC hospitals following prolonged hospitalization in an acute care hospital), could also influence CDI rates.

## CONCLUSIONS

This is the first report of CDI incidence rates among California acute care facilities using NHSN data. The previous report [12] included quarterly summary data reported via paper forms that provided no definitions for CDI. As such, methods used by hospitals to identify CDI may have varied between the two reporting periods; therefore, rates reported by individual hospitals in the two reports should not be compared. As described above, some hospitals may have implemented a more sensitive laboratory test, which could increase their rates of HO and HA CDI from one reporting period to the next. Additionally, without risk adjustment methods, comparisons between reports and by hospital should be avoided.

These results indicate that reporting CDI data using the NHSN LabID Event method ensures use of standard definitions for CDI events and results in accurate classification of HO, HA, and CO CDI. This is the first step toward obtaining data to develop appropriate risk adjustment methods for CDI, which will allow for comparing hospitals within California and nationally.

In follow-up to this report, CDPH will take the following steps:

- Monitor hospital compliance with monthly reporting of LabID Event data into NHSN.
- Send quality control reports to hospitals with data currently in NHSN and identify missing data, including numerators and denominators, so that hospitals may correct data entry errors prior to the next report.
- Ensure that hospitals enter their data on laboratory testing methodology in NHSN.
- Participate, as appropriate, with state and public health stakeholders to identify appropriate risk factors for adjusting CDI data.

All hospitals should review these data and consider the following:

- Examine their CDI rates relative to hospitals they consider to be in their peer group, taking into account possible differences in laboratory testing methodology, and consider taking measures to address CDI prevention using the CDC [13], Society for Healthcare Epidemiology of America (SHEA)/Infectious Disease Society of America (IDSA) [5], and/or Association for Professionals in Infection Control and Epidemiology (APIC) guidelines [14] for prevention of CDI. Their CDI rates can be used to monitor progress in the prevention and control of CDI.
- Ensure that laboratory testing method is included in the annual facility survey so that rate data can be adjusted appropriately.
- Review the participation alerts available in NHSN to identify and correct potential data entry errors, including incomplete and missing data.
- Use the analysis tools available in NHSN to review data and verify timeliness and accuracy.
- Examine the rate tables generated by NHSN to ensure appropriate categorization of all CDI LabID events.

- Review quarterly quality control reports provided by CDPH to confirm that CDPH has correct and complete data and to identify additional data errors.

The public and consumers should consider the following:

- Ask your health care provider about the actions your hospital is taking to ensure patient safety, including CDI prevention measures that are in place or planned, including an antibiotic stewardship program to ensure appropriate and judicious use of antibiotics to help prevent CDI.
- Ask your health care provider about the actions you can take to ensure your safety in the hospital, including protecting against CDI.
- If you do not understand or have a question, speak up. Clear communication between you and your health care provider is one of the first steps you can take towards ensuring your own safety.

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**Table 1. Months of reporting, cases of *Clostridium difficile* infection, and patient days reported by California general acute care hospitals that submitted fewer than ten months of data, April 1, 2010 through March 31, 2011 (inclusive).**

Hospital Name	Months Reported	Hospital Onset Cases	Hospital Associated Cases	Patient Days
BANNER LASSEN MEDICAL CENTER	1	0	0	2
BARLOW RESPIRATORY HOSPITAL	3	17	17	5707
BEAR VALLEY COMMUNITY HOSPITAL	9	0	0	695
BIGGS GRIDLEY MEMORIAL HOSPITAL	0	-	-	-
BROTMAN MEDICAL CENTER	9	14	16	36589
CALIFORNIA MEDICAL FACILITY	8	0	0	1408
CATALINA ISLAND MEDICAL CENTER	0	-	-	-
CHINESE HOSPITAL	4	2	2	3831
CORCORAN DISTRICT HOSPITAL	1	0	0	40
DESERT VALLEY HOSPITAL	9	11	12	172
DOCTORS HOSPITAL OF WEST COVINA	0	-	-	-
EL CAMINO HOSPITAL				
EL CAMINO HOSPITAL	9	70	95	49187
EL CAMINO HOSPITAL LOS GATOS	9	6	10	8300
GOOD SAMARITAN HOSPITAL, BAKERSFIELD	0	-	-	-
GROSSMONT HOSPITAL	6	62	88	55735
HEALTHSOUTH BAKERSFIELD REHAB HOSPITAL	5	0	0	1585
JEROLD PHELPS COMMUNITY HOSPITAL	5	0	0	45
JOHN D KLARICH MEMORIAL HOSPITAL	6	0	0	11815
KENTFIELD REHAB & SPECIALTY HOSPITAL	6	13	13	24207
KINDRED HOSPITAL WESTMINSTER	7	55	55	19957
LAC/RANCHO LOS AMIGOS NATIONAL REHAB CTR	6	9	9	33806
LAGUNA HONDA HOSPITAL & REHAB CTR	1	0	0	117
MENLO PARK SURGICAL HOSPITAL	0	-	-	-
PACIFICA HOSPITAL OF THE VALLEY	7	0	0	13766
PIONEERS MEMORIAL HEALTHCARE DISTRICT	9	2	2	16525
PROMISE HOSPITAL OF SAN DIEGO	8	10	10	10333
RANCHO SPECIALTY HOSPITAL	0	-	-	-
REGIONAL MEDICAL CENTER OF SAN JOSE	2	0	0	11585
SETON MEDICAL CENTER	2	13	18	7205
SHRINERS HOSPITALS FOR CHILDREN NORTH CA	3	0	0	1078
SOUTHERN INYO HOSPITAL	3	0	0	25
TRI-CITY REGIONAL MEDICAL CENTER	8	0	0	10293
KINDRED HOSPITAL OF RIVERSIDE	1	1	1	904

Source: Healthcare-Associated *Clostridium difficile* Infections in California General Acute Care Hospitals, April 1, 2010 through March 31, 2011.

**Table 2. Patient days, patient admissions, and crude rates of hospital onset and hospital associated *Clostridium difficile* infections reported by long-term acute care hospitals, restricted to hospitals that reported at least ten months of data, California, April 1, 2010 through March 31, 2011 (inclusive).**

Hospital Name	Cases Hospital Onset	Patient Days	Hospital Onset Rate*	95% Confidence Interval	Cases Hospital Associated	Hospital Associated Rate**	95% Confidence Interval	Case Mix Index
<b>POOLED DATA</b>	<b>640</b>	<b>340674</b>	<b>18.8</b>	<b>-</b>	<b>641</b>	<b>18.8</b>	<b>-</b>	<b>2.32**</b>
BALLARD REHABILITATION HOSPITAL	14	14606	9.6	(5.2, 16.1)	14	9.6	(5.2, 16.1)	1.09
KINDRED HOSPITAL, BREA	31	14833	20.9	(14.2, 29.7)	31	20.9	(14.2, 29.7)	2.07
KINDRED HOSPITAL, LOS ANGELES	58	27186	21.3	(16.2, 27.6)	58	21.3	(16.2, 27.6)	3.08
KINDRED HOSPITAL, ONTARIO	56	28972	19.3	(14.6, 25.1)	56	19.3	(14.6, 25.1)	2.92
KINDRED HOSPITAL, SACRAMENTO	26	11954	21.8	(14.2, 31.9)	26	21.8	(14.2, 31.9)	2.95
KINDRED HOSPITAL, SAN DIEGO	21	17543	12.0	(7.4, 18.3)	21	12.0	(7.4, 18.3)	2.42
KINDRED HOSPITAL, SAN FRANCISCO BAY AREA	43	17310	24.8	(18, 33.5)	43	24.8	(18, 33.5)	3.89
MONROVIA MEMORIAL HOSPITAL	3	9112	3.3	(0.7, 9.6)	3	3.3	(0.7, 9.6)	2.52
NEWPORT SPECIALTY HOSPITAL	17	9235	18.4	(10.7, 29.5)	17	18.4	(10.7, 29.5)	2.09
NORTHERN CALIFORNIA REHAB HOSPITAL	19	17198	11.0	(6.7, 17.3)	19	11.0	(6.7, 17.3)	1.72
PROMISE HOSP OF EAST LA, EAST LA CAMPUS	25	9763	25.6	(16.6, 37.8)	25	25.6	(16.6, 37.8)	2.72
PROMISE HOSP OF EAST LA, SUBURBAN CAMPUS	58	41624	13.9	(10.6, 18.0)	58	13.9	(10.6, 18.0)	
SOUTHERN CALIFORNIA SPECIALTY CARE								
KINDRED HOSPITAL, LA MIRADA	68	24293	28.0	(21.7, 35.5)	69	28.4	(22.1, 35.9)	2.32
KINDRED HOSPITAL, SAN GABRIEL VALLEY	26	19760	13.2	(8.6, 19.3)	26	13.2	(8.6, 19.3)	
KINDRED HOSPITAL, SANTA ANA	49	14572	33.6	(24.9, 44.5)	49	33.6	(24.9, 44.5)	
VIBRA HOSPITAL OF SAN DIEGO	39	28866	13.5	(9.6, 18.5)	39	13.5	(9.6, 18.5)	2.11
VISTA HOSPITAL OF SAN GABRIEL	32	23512	13.6	(9.3, 19.2)	32	13.6	(9.3, 19.2)	2.85
VISTA HOSPITAL OF SOUTH BAY*	55	10335	53.2	(40.1, 69.3)	55	53.2	(40.1, 69.3)	2.31

\*Reported 11 months of data; all other hospitals reported 12 months of data.

\*\*Mean of all hospitals case mix indices

**Notes:** Rate per 10,000 patient days; 95% confidence interval calculated based on exact Poisson distribution; case mix index was available and listed for most but not all acute care campuses

Source: Healthcare-Associated *Clostridium difficile* Infections in California General Acute Care Hospitals, April 1, 2010 through March 31, 2011.

**Table 3. Incidence rates of hospital onset and hospital associated *Clostridium difficile* infections reported by general acute care hospitals other than long-term acute hospitals, restricted to hospitals that reported at least ten months of data, California, April 1, 2010 through March 31, 2011 (inclusive).**

Hospital Name	Cases Hospital Onset	Patient Days	Hospital Onset Rate*	95% Confidence Interval	Cases Hospital Associated	Hospital Associated Rate	95% Confidence Interval†	Case Mix Index
<b>POOLED DATA</b>	<b>9870</b>	<b>14111508</b>	<b>7.0</b>	<b>-</b>	<b>13327</b>	<b>9.4</b>	<b>-</b>	<b>1.20†</b>
ADVENTIST HEALTH SYSTEMS ADVENTIST MEDICAL CENTER, HANFORD SELMA COMMUNITY HOSPITAL	11	39417	2.8	(1.4, 5.0)	18	4.6	(2.7, 7.2)	
AHMC ANAHEIM REGIONAL MEDICAL CENTER	29	47297	6.1	(4.1, 8.8)	43	9.1	(6.6, 12.2)	1.28
ALAMEDA COUNTY MEDICAL CENTER FAIRMONT CAMPUS, SAN LEANDRO ALAMEDA COUNTY MED CTR, OAKLAND	25	52200	4.8	(3.1, 7.1)	34	6.5	(4.5, 9.1)	1.04
ALAMEDA HOSPITAL	8	10526	7.6	(3.3, 15)	12	11.4	(5.9, 19.9)	1.35
ALHAMBRA HOSPITAL MEDICAL CENTER	6	22280	2.7	(1.0, 5.9)	6	2.7	(1.0, 5.9)	1.44
ALTA LOS ANGELES HOSPITALS, INC LOS ANGELES COMMUNITY HOSPITAL NORWALK COMMUNITY HOSPITAL	2	42991	0.5	(0.1, 1.7)	2	0.5	(0.1, 1.7)	0.99 1.37
ALVARADO HOSPITAL, LLC ALVARADO HOSPITAL CAMPUS #1 ALVARADO HOSPITAL CAMPUS #2	32	40004	8.0	(5.5, 11.3)	43	10.7	(7.8, 14.5)	1.58
ANAHEIM GENERAL HOSPITAL	0	2608	0.0	(0, 11.5)	0	0.0	(0, 11.5)	1.14
ANTELOPE VALLEY HOSPITAL	44	105180	4.2	(3.0, 5.6)	62	5.9	(4.5, 7.6)	1.06
ARROWHEAD REGIONAL MEDICAL CENTER	50	78023	6.4	(4.8, 8.4)	63	8.1	(6.2, 10.3)	1.04
ARROYO GRANDE COMMUNITY HOSPITAL	4	10013	4.0	(1.1, 10.2)	9	9.0	(4.1, 17.1)	1.38
BAKERSFIELD HEART HOSPITAL	8	15221	5.3	(2.3, 10.4)	8	5.3	(2.3, 10.4)	1.84
BAKERSFIELD MEMORIAL HOSPITAL	26	65905	3.9	(2.6, 5.8)	31	4.7	(3.2, 6.7)	1.17
BARSTOW COMMUNITY HOSPITAL	4	7402	5.4	(1.5, 13.8)	6	8.1	(3.0, 17.6)	1.03
BARTON MEMORIAL HOSPITAL	3	8206	3.7	(0.8, 10.7)	5	6.1	(2.0, 14.2)	0.80
BELLFLOWER MEDICAL CENTER	0	22535	0.0	(0, 1.3)	0	0.0	(0, 1.3)	1.15
BEVERLY HOSPITAL	56	35980	15.6	(11.8, 20.2)	71	19.7	(15.4, 24.9)	1.19
CALIFORNIA HOSPITAL MEDICAL CENTER	10	67244	1.5	(0.7, 2.7)	13	1.9	(1.0, 3.3)	0.96

**Table 3. Incidence rates of hospital onset and hospital associated *Clostridium difficile* infections reported by general acute care hospitals other than long-term acute hospitals, restricted to hospitals that reported at least ten months of data, California, April 1, 2010 through March 31, 2011 (inclusive).**

Hospital Name	Cases Hospital Onset	Patient Days	Hospital Onset Rate*	95% Confidence Interval	Cases Hospital Associated	Hospital Associated Rate	95% Confidence Interval†	Case Mix Index
CALIFORNIA MENS COLONY	0	12282	0.0	(0, 2.4)	0	0.0	(0, 2.4)	
CALIFORNIA PACIFIC MEDICAL CENTER	34	34179	9.9	(6.9, 13.9)	37	10.8	(7.6, 14.9)	1.17
CASA COLINA HOSPITAL FOR REHAB MEDICINE	12	21640	5.5	(2.9, 9.7)	13	6.0	(3.2, 10.3)	1.17
CATHOLIC HEALTHCARE WEST DOMINICAN HOSP CAMPUS #1, SANTA CRUZ DOMINICAN HOSP CAMPUS #1, SANTA CRUZ	16	52450	3.1	(1.7, 5)	28	5.3	(3.5, 7.7)	1.30
CATHOLIC HEALTHCARE WEST MERCY HOSPITAL, BAKERSFIELD MERCY SOUTHWEST HOSPITAL, BAKERSFIELD	19	54077	3.5	(2.1, 5.5)	25	4.6	(3.0, 6.8)	1.16
CEDARS-SINAI MEDICAL CENTER	438	280028	15.6	(14.2, 17.2)	561	20.0	(18.4, 21.8)	1.46
CENTINELA HOSPITAL MEDICAL CENTER	95	65143	14.6	(11.8, 17.8)	113	17.3	(14.3, 20.9)	1.37
CENTRAL VALLEY GENERAL HOSPITAL	2	8987	2.2	(0.3, 8.0)	2	2.2	(0.3, 8.0)	0.68
CHAPMAN MEDICAL CENTER	4	5116	7.8	(2.1, 20.0)	4	7.8	(2.1, 20.0)	1.33
CHILDRENS HOSP AND RESEARCH CTR OAKLAND	22	50909	4.3	(2.7, 6.5)	25	4.9	(3.2, 7.2)	1.24
CHILDREN'S HOSP AT MISSION	0	4666	0.0	(0, 6.4)	0	0.0	(0, 6.4)	1.20
CHILDREN'S HOSP CENTRAL CALIFORNIA, MADERA	28	57230	4.9	(3.3, 7.1)	40	7.0	(5, 9.5)	1.44
CHILDRENS HOSP OF LOS ANGELES	104	77243	13.5	(11, 16.3)	127	16.4	(13.7, 19.6)	1.31
CHILDREN'S HOSP OF ORANGE COUNTY	41	44955	9.1	(6.5, 12.4)	58	12.9	(9.8, 16.7)	1.78
CHINO VALLEY MEDICAL CENTER	6	17569	3.4	(1.3, 7.4)	9	5.1	(2.3, 9.7)	1.31
CITRUS VALLEY MEDICAL CENTER, INC CITRUS VALLEY MED CTR IC, COVINA CITRUS VALLEY MED CTR QV, WEST COVINA	71	106764	6.7	(5.2, 8.4)	93	8.7	(7, 10.7)	1.37 1.01
CITY OF HOPE HELFORD CLINICAL	61	57353	10.6	(8.1, 13.7)	71	12.4	(9.7, 15.6)	2.10

**Table 3. Incidence rates of hospital onset and hospital associated *Clostridium difficile* infections reported by general acute care hospitals other than long-term acute hospitals, restricted to hospitals that reported at least ten months of data, California, April 1, 2010 through March 31, 2011 (inclusive).**

Hospital Name	Cases Hospital Onset	Patient Days	Hospital Onset Rate*	95% Confidence Interval	Cases Hospital Associated	Hospital Associated Rate	95% Confidence Interval†	Case Mix Index
CLOVIS COMMUNITY MEDICAL CENTER	14	32301	4.3	(2.4, 7.3)	23	7.1	(4.5, 10.7)	0.91
COALINGA REGIONAL MEDICAL CENTER	0	3633	0.0	(0, 8.2)	1	2.8	(0.1, 15.3)	0.85
COAST PLAZA HOSPITAL	5	13486	3.7	(1.2, 8.7)	5	3.7	(1.2, 8.7)	1.11
COASTAL COMMUNITIES HOSPITAL	7	21499	3.3	(1.3, 6.7)	7	3.3	(1.3, 6.7)	0.90
COLLEGE HOSPITAL COSTA MESA	0	37672	0.0	(0, 0.8)	0	0.0	(0, 0.8)	0.84
COLORADO RIVER MEDICAL CENTER	0	1427	0.0	(0, 21.0)	0	0.0	(0, 21.0)	0.77
COLUSA REGIONAL MEDICAL CENTER	0	2956	0.0	(0, 10.1)	0	0.0	(0, 10.1)	0.83
COMMUNITY HOSPITAL OF LONG BEACH	9	11506	7.8	(3.6, 14.8)	11	9.6	(4.8, 17.1)	1.12
COMMUNITY HOSPITAL OF SAN BERNARDINO	10	79170	1.3	(0.6, 2.3)	13	1.6	(0.9, 2.8)	0.93
COMMUNITY HOSPITAL OF THE MONTEREY PENINSULA	12	44637	2.7	(1.4, 4.7)	13	2.9	(1.6, 5.0)	1.35
COMMUNITY MEMORIAL HOSPITAL, SAN BUENAVENTURA	19	46197	4.1	(2.5, 6.4)	23	5.0	(3.2, 7.5)	1.28
COMMUNITY REGIONAL MEDICAL CENTER	114	148097	7.7	(6.3, 9.2)	157	10.6	(9, 12.4)	1.27
CONTRA COSTA REGIONAL MEDICAL CENTER	2	38448	0.5	(0.1, 1.9)	4	1.0	(0.3, 2.7)	0.91
COUNTY OF VENTURA VENTURA COUNTY MED CTR VENTURA COUNTY MED CTR, SANTA PAULA HOSPITAL	15	43222	3.5	(1.9, 5.7)	18	4.2	(2.5, 6.6)	1.01
DAMERON HOSPITAL	69	40018	17.2	(13.4, 21.8)	102	25.5	(20.8, 30.9)	1.18
DELANO REGIONAL MEDICAL CENTER	2	19781	1.0	(0.1, 3.7)	2	1.0	(0.1, 3.7)	0.96
DESERT REGIONAL MEDICAL CENTER	25	60153	4.2	(2.7, 6.1)	42	7.0	(5, 9.4)	1.23
DOCTORS HOSPITAL OF MANTECA	12	16719	7.2	(3.7, 12.5)	15	9.0	(5, 14.8)	0.93
DOCTORS MEDICAL CENTER, MODESTO	66	97675	6.8	(5.2, 8.6)	96	9.8	(8.0, 12.0)	1.20
DOCTORS MEDICAL CENTER, SAN PABLO	25	30945	8.1	(5.2, 11.9)	32	10.3	(7.1, 14.6)	1.48
DOWNEY REGIONAL MEDICAL CENTER	34	40692	8.4	(5.8, 11.7)	36	8.8	(6.2, 12.2)	1.15
EARL & LORAIN MILLER CHILDREN'S HOSP	48	63584	7.5	(5.6, 10.0)	60	9.4	(7.2, 12.1)	0.88

**Table 3. Incidence rates of hospital onset and hospital associated *Clostridium difficile* infections reported by general acute care hospitals other than long-term acute hospitals, restricted to hospitals that reported at least ten months of data, California, April 1, 2010 through March 31, 2011 (inclusive).**

Hospital Name	Cases Hospital Onset	Patient Days	Hospital Onset Rate*	95% Confidence Interval	Cases Hospital Associated	Hospital Associated Rate	95% Confidence Interval†	Case Mix Index
EAST LOS ANGELES DOCTORS HOSPITAL	38	29712	12.8	(9.1, 17.6)	43	14.5	(10.5, 19.5)	0.98
EAST VALLEY HOSPITAL MEDICAL CENTER	13	7890	16.5	(8.8, 28.2)	15	19.0	(10.6, 31.4)	1.06
EASTERN PLUMAS HEALTH CARE	0	1143	0.0	(0, 26.2)	0	0.0	(0, 26.2)	0.87
EDEN MEDICAL CENTER	42	55836	7.5	(5.4, 10.2)	66	11.8	(9.1, 15.0)	
EDEN MEDICAL CENTER, CASTRO VALLEY								1.31
SAN LEANDRO HOSPITAL								1.42
EISENHOWER MEDICAL CENTER	20	79330	2.5	(1.5, 3.9)	37	4.7	(3.3, 6.4)	1.56
EL CENTRO REGIONAL MEDICAL CENTER	10	22627	4.4	(2.1, 8.1)	14	6.2	(3.4, 10.4)	1.00
EMANUEL MEDICAL CENTER INC.	22	43328	5.1	(3.2, 7.7)	37	8.5	(6, 11.8)	1.05
ENCINO HOSPITAL MEDICAL CENTER	13	21064	6.2	(3.3, 10.6)	15	7.1	(4, 11.7)	1.43
ENLOE MEDICAL CENTER	35	68195	5.1	(3.6, 7.1)	50	7.3	(5.4, 9.7)	
ENLOE REHABILITATION CENTER								
ENLOE MEDICAL CENTER, COHASSET								
ENLOE MEDICAL CENTER, ESPLANADE								1.43
FAIRCHILD MEDICAL CENTER	4	4718	8.5	(2.3, 21.7)	5	10.6	(3.4, 24.7)	1.00
FAIRVIEW DEVELOPMENTAL CENTER**	3	463	64.8	(13.4, 189.4)	3	64.8	(13.4, 189.4)	
FALLBROOK HOSPITAL DISTRICT	2	7511	2.7	(0.3, 9.6)	3	4.0	(0.8, 11.7)	1.00
FEATHER RIVER HOSPITAL	12	20333	5.9	(3, 10.3)	21	10.3	(6.4, 15.8)	1.16
FOOTHILL PRESBYTERIAN HOSPITAL	12	20190	5.9	(3.1, 10.4)	16	7.9	(4.5, 12.9)	1.08
FOUNTAIN VALLEY REGIONAL HOSPITAL	42	80630	5.2	(3.8, 7.0)	58	7.2	(5.5, 9.3)	
FOUNTAIN VALLEY REGIONAL HOSPITAL & MEDICAL CENTER								1.31
FOUNTAIN VALLEY REGIONAL HOSPITAL & MEDICAL CENTER								
FRANK R. HOWARD MEMORIAL HOSPITAL	2	5579	3.6	(0.4, 12.9)	2	3.6	(0.4, 12.9)	1.41
FRENCH HOSPITAL MEDICAL CENTER	8	16637	4.8	(2.1, 9.5)	13	7.8	(4.2, 13.4)	1.35
FRESNO HEART AND SURGICAL HOSPITAL	8	10472	7.6	(3.3, 15.1)	8	7.6	(3.3, 15.1)	2.01
FRESNO SURGICAL HOSPITAL	0	4169	0.0	(0, 7.2)	0	0.0	(0, 7.2)	1.92

**Table 3. Incidence rates of hospital onset and hospital associated *Clostridium difficile* infections reported by general acute care hospitals other than long-term acute hospitals, restricted to hospitals that reported at least ten months of data, California, April 1, 2010 through March 31, 2011 (inclusive).**

Hospital Name	Cases Hospital Onset	Patient Days	Hospital Onset Rate*	95% Confidence Interval	Cases Hospital Associated	Hospital Associated Rate	95% Confidence Interval†	Case Mix Index
GARDEN GROVE HOSPITAL AND MEDICAL CENTER	31	24079	12.9	(8.7, 18.3)	37	15.4	(10.8, 21.2)	1.05
GARFIELD MEDICAL CENTER	31	55902	5.5	(3.8, 7.9)	41	7.3	(5.3, 9.9)	1.10
GEORGE L. MEE MEMORIAL HOSPITAL	1	4970	2.0	(0.1, 11.2)	1	2.0	(0.1, 11.2)	0.96
GLENDALE ADVENTIST MEDICAL CENTER	80	106303	7.5	(6, 9.4)	101	9.5	(7.7, 11.5)	1.21
GLENDALE MEMORIAL HOSPITAL AND HEALTH CENTER	32	54192	5.9	(4.0, 8.3)	45	8.3	(6.1, 11.1)	1.36
GLENN MEDICAL CENTER	1	1156	8.7	(0.2, 48.2)	1	8.7	(0.2, 48.2)	0.82
GOLETA VALLEY COTTAGE HOSPITAL	3	14618	2.1	(0.4, 6.0)	3	2.1	(0.4, 6.0)	1.47
GOOD SAMARITAN HOSPITAL, LOS ANGELES	69	64228	10.7	(8.4, 13.6)	77	12.0	(9.5, 15.0)	1.22
GOOD SAMARITAN HOSPITAL, LP MISSION OAKS HOSPITAL, LOS GATOS GOOD SAMARITAN HOSPITAL, SAN JOSE	35	75553	4.6	(3.2, 6.4)	46	6.1	(4.5, 8.1)	1.27
GREATER EL MONTE COMMUNITY HOSPITAL	3	14515	2.1	(0.4, 6.0)	3	2.1	(0.4, 6.0)	0.98
HAZEL HAWKINS MEMORIAL HOSPITAL	2	7320	2.7	(0.3, 9.9)	4	5.5	(1.5, 14)	1.26
HEALDSBURG DISTRICT HOSPITAL	2	4180	4.8	(0.6, 17.3)	2	4.8	(0.6, 17.3)	0.94
HEALTHBRIDGE CHILDREN'S HOSP	3	1927	15.6	(3.2, 45.5)	3	15.6	(3.2, 45.5)	1.09
HEALTHSOUTH TUSTIN REHAB HOSPITAL	7	15162	4.6	(1.9, 9.5)	7	4.6	(1.9, 9.5)	1.25
HEMET VALLEY MEDICAL CENTER	71	42002	16.9	(13.2, 21.3)	100	23.8	(19.4, 29.0)	1.21
HENRY MAYO NEWHALL MEMORIAL HOSPITAL	40	59306	6.7	(4.8, 9.2)	48	8.1	(6.0, 10.7)	1.11
HI-DESERT MEDICAL CENTER	4	11136	3.6	(1, 9.2)	5	4.5	(1.5, 10.5)	1.13
HOAG MEMORIAL HOSPITAL PRESBYTERIAN INC HOAG HOSPITAL, IRVINE HOAG MEMORIAL HOSP PRESBYTERIAN, NEWPORT BEACH	78	115297	6.8	(5.3, 8.4)	127	11.0	(9.2, 13.1)	0.99
HOLLYWOOD COMMUNITY HOSPITAL OF HOLLYWOOD	6	20751	2.9	(1.1, 6.3)	12	5.8	(3.0, 10.1)	1.19

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Hospital Name	Cases Hospital Onset	Patient Days	Hospital Onset Rate*	95% Confidence Interval	Cases Hospital Associated	Hospital Associated Rate	95% Confidence Interval†	Case Mix Index
HOLLYWOOD PRESBYTERIAN MED CTR, LOS ANGELES	29	63217	4.6	(3.1, 6.6)	31	4.9	(3.3, 7.0)	1.04
HOSPITAL COMMITTEE AREA LIVERMORE VALLEYCARE MEDICAL CENTER, PLEASANTON VALLEYCARE MEMORIAL HOSPITAL, LIVERMORE	21	31409	6.7	(4.1, 10.2)	23	7.3	(4.6, 11.0)	1.28
HUNTINGTON BEACH HOSPITAL	14	15786	8.9	(4.8, 14.9)	16	10.1	(5.8, 16.5)	1.38
HUNTINGTON MEMORIAL HOSPITAL	89	121351	7.3	(5.9, 9.0)	123	10.1	(8.4, 12.1)	1.27
JOHN C. FREMONT HEALTHCARE DISTRICT	0	704	0.0	(0, 42.6)	0	0.0	(0, 42.6)	0.90
JOHN F. KENNEDY MEMORIAL HOSPITAL	12	25006	4.8	(2.5, 8.4)	14	5.6	(3.1, 9.4)	0.94
JOHN MUIR MEDICAL CENTER, CONCORD	44	45808	9.6	(7.0, 12.9)	54	11.8	(8.9, 15.4)	0.97
JOHN MUIR MEDICAL CENTER, WALNUT CREEK	65	75695	8.6	(6.6, 10.9)	101	13.3	(10.9, 16.2)	1.73
KAISER FOUNDATION HOSP, ANTIOCH	18	33537	5.4	(3.2, 8.5)	33	9.8	(6.8, 13.8)	1.20
KAISER FOUNDATION HOSP, BALDWIN PARK	20	42154	4.7	(2.9, 7.3)	38	9.0	(6.4, 12.4)	1.10
KAISER FOUNDATION HOSP, DOWNEY	51	70151	7.3	(5.4, 9.6)	68	9.7	(7.5, 12.3)	1.10
KAISER FOUNDATION HOSP, FONTANA	71	112667	6.3	(4.9, 7.9)	83	7.4	(5.9, 9.1)	1.18
KAISER FOUNDATION HOSP, FRESNO	21	27546	7.6	(4.7, 11.7)	33	12.0	(8.2, 16.8)	1.24
KAISER FOUNDATION HOSP, MORENO VALLEY	10	17698	5.7	(2.7, 10.4)	12	6.8	(3.5, 11.8)	0.81
KAISER FOUNDATION HOSP, PANORAMA CITY	20	39698	5.0	(3.1, 7.8)	29	7.3	(4.9, 10.5)	1.10
KAISER FOUNDATION HOSP, REDWOOD CITY**	32	31233	10.2	(7.0, 14.5)	38	12.2	(8.6, 16.7)	1.40
KAISER FOUNDATION HOSP, RIVERSIDE	44	51132	8.6	(6.3, 11.6)	74	14.5	(11.4, 18.2)	1.10
KAISER FOUNDATION HOSP, SAN DIEGO	71	103754	6.8	(5.3, 8.6)	110	10.6	(8.7, 12.8)	1.17
KAISER FOUNDATION HOSP, SAN FRANCISCO	55	95254	5.8	(4.3, 7.5)	66	6.9	(5.4, 8.8)	1.40
KAISER FOUNDATION HOSP, SAN JOSE	45	50025	9.0	(6.6, 12.0)	61	12.2	(9.3, 15.7)	1.20
KAISER FOUNDATION HOSP, SAN RAFAEL**	15	20351	7.4	(4.1, 12.2)	30	14.7	(9.9, 21)	1.30

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KAISER FOUNDATION HOSP, SANTA CLARA	87	108112	8.0	(6.4, 9.9)	113	10.5	(8.6, 12.6)	1.36
KAISER FOUNDATION HOSP, SANTA ROSA	11	30526	3.6	(1.8, 6.4)	18	5.9	(3.5, 9.3)	1.16
KAISER FOUNDATION HOSP, SOUTH BAY HARBOR CITY	35	56712	6.2	(4.3, 8.6)	55	9.7	(7.3, 12.6)	1.18
KAISER FOUNDATION HOSP, SOUTH SACRAMENTO	42	41339	10.2	(7.3, 13.7)	69	16.7	(13.0, 21.1)	1.17
KAISER FOUNDATION HOSP, SOUTH SAN FRANCISCO	32	26858	11.9	(8.1, 16.8)	52	19.4	(14.5, 25.4)	1.48
KAISER FOUNDATION HOSP, SUNSET LOS ANGELES	83	104406	7.9	(6.3, 9.9)	105	10.1	(8.2, 12.2)	1.61
KAISER FOUNDATION HOSP, VACAVILLE	14	14573	9.6	(5.3, 16.1)	27	18.5	(12.2, 27)	1.25
KAISER FOUND. HOSP & REHAB CTR, VALLEJO	50	62822	8.0	(5.9, 10.5)	83	13.2	(10.5, 16.4)	1.14
KAISER FOUNDATION HOSP, WALNUT CREEK	74	63377	11.7	(9.2, 14.7)	85	13.4	(10.7, 16.6)	1.18
KAISER FOUNDATION HOSP, WEST LOS ANGELES	38	44773	8.5	(6.0, 11.6)	56	12.5	(9.4, 16.2)	1.17
KAISER FOUNDATION HOSP, WOODLAND HILLS	37	49691	7.4	(5.2, 10.3)	63	12.7	(9.7, 16.2)	1.30
KAISER FOUNDATION HOSPITALS								
KAISER FOUNDATION HOSP, ANAHEIM	33	46264	7.1	(4.9, 10.0)	47	10.2	(7.5, 13.5)	1.15
KAISER FOUNDATION HOSP, IRVINE	35	40318	8.7	(6.0, 12.1)	56	13.9	(10.5, 18.0)	
KAISER FOUNDATION HOSPITALS								
KAISER FOUNDATION HOSP, ROSEVILLE	44	78344	5.6	(4.1, 7.5)	88	11.2	(9.0, 13.8)	
KAISER FOUNDATION HOSP, SACRAMENTO	63	53139	11.9	(9.1, 15.2)	80	15.1	(11.9, 18.7)	1.31
KAISER FOUNDATION HOSPITALS								
KAISER FOUNDATION HOSP, FREMONT	36	53948	6.7	(4.7, 9.2)	79	14.6	(11.6, 18.3)	
KAISER FOUNDATION HOSP, HAYWARD/FREMONT								1.19
KAISER FOUNDATION HOSPITALS								
KAISER FOUNDATION HOSP, MODESTO	25	33215	7.5	(4.9, 11.1)	49	14.8	(10.9, 19.5)	

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KAISER FOUNDATION HOSP, MANTECA								1.08
KAISER FOUNDATION HOSPITALS	84	84083	10.0	(8.0, 12.4)	110	13.1	(10.8, 15.8)	
KAISER FOUNDATION HOSP, OAKLAND/RICHMOND								1.38
KAISER FOUNDATION HOSP, RICHMOND								
KARYKEION, INC.	3	11744	2.6	(0.5, 7.5)	6	5.1	(1.9, 11.1)	
COMMUNITY & MISSION HOSP OF HUNTINGTON PARK CAMPUS #1								0.91
COMMUNITY & MISSION HOSP OF HUNTINGTON PARK CAMPUS #2								
KAWEAH DELTA MEDICAL CENTER	63	126102	5.0	(3.8, 6.4)	83	6.6	(5.2, 8.2)	1.23
KERN MEDICAL CENTER	8	25995	3.1	(1.3, 6.1)	9	3.5	(1.6, 6.6)	0.95
KERN VALLEY HEALTHCARE DISTRICT	1	3961	2.5	(0.1, 14.1)	2	5.0	(0.6, 18.2)	1.06
LA PALMA INTERCOMMUNITY HOSPITAL	11	17240	6.4	(3.2, 11.4)	12	7.0	(3.6, 12.2)	1.11
LAC/HARBOR-UCLA MEDICAL CENTER	104	106390	9.8	(8.0, 11.8)	117	11.0	(9.1, 13.2)	1.32
LAC+USC MEDICAL CENTER	111	172980	6.4	(5.3, 7.7)	130	7.5	(6.3, 8.9)	1.24
LAKEWOOD REGIONAL MEDICAL CENTER	26	39727	6.5	(4.3, 9.6)	32	8.1	(5.5, 11.4)	1.53
LANTERMAN DEVELOPMENTAL CENTER	0	1213	0.0	(0, 24.7)	0	0.0	(0, 24.7)	
LODI MEMORIAL HOSPITAL ASSOCIATION	52	32674	15.9	(11.9, 20.9)	72	22.0	(17.2, 27.8)	
LODI MEMORIAL HOSPITAL (1RH)								1.01
LODI MEMORIAL HOSPITAL WEST								
LOMA LINDA UNIVERSITY MEDICAL CENTER	196	178555	11.0	(9.5, 12.6)	225	12.6	(11.0, 14.4)	
LOMA LINDA UNIV HEART & SURGICAL HOSPITAL								
LOMA LINDA UNIV MED CTR EAST HOSPITAL								1.62
LOMA LINDA UNIV MED CTR, LOMA LINDA								
LOMPOC VALLEY MEDICAL CENTER	2	8278	2.4	(0.3, 8.7)	2	2.4	(0.3, 8.7)	0.99
LONG BEACH MEMORIAL MEDICAL CENTER	136	104369	13.0	(10.9, 15.4)	168	16.1	(13.8, 18.7)	1.43

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LOS ALAMITOS MEDICAL CENTER	29	42525	6.8	(4.6, 9.8)	44	10.3	(7.5, 13.9)	1.07
LOS ANGELES COUNTY OLIVE VIEW-UCLA MED CTR	30	65129	4.6	(3.1, 6.6)	42	6.4	(4.6, 8.7)	1.07
LOS ANGELES METROPOLITAN MEDICAL CENTER	0	36542	0.0	(0, 0.8)	2	0.5	(0.1, 2.0)	0.91
LOS ROBLES REGIONAL MEDICAL CENTER LOS ROBLES HOSP AND MEDICAL CENTER EAST LOS ROBLES HOSP AND MEDICAL CENTER	74	77047	9.6	(7.5, 12.1)	92	11.9	(9.6, 14.6)	1.38
LUCILE SALTER PACKARD CHILDREN'S HOSP STANFORD	8	64572	1.2	(0.5, 2.4)	12	1.9	(1.0, 3.2)	1.37
MAD RIVER COMMUNITY HOSPITAL	0	8052	0.0	(0, 3.7)	0	0.0	(0, 3.7)	0.93
MADERA COMMUNITY HOSPITAL	8	23131	3.5	(1.5, 6.8)	17	7.3	(4.3, 11.8)	0.82
MAMMOTH HOSPITAL	0	1624	0.0	(0, 18.4)	0	0.0	(0, 18.4)	1.12
MARIAN MEDICAL CENTER	6	33054	1.8	(0.7, 4.0)	10	3.0	(1.5, 5.6)	1.09
MARIN GENERAL HOSPITAL	13	41270	3.1	(1.7, 5.4)	21	5.1	(3.1, 7.8)	1.25
MARINA DEL REY HOSPITAL	13	17027	7.6	(4.1, 13.1)	18	10.6	(6.3, 16.7)	1.75
MARK TWAIN ST. JOSEPH'S HOSPITAL	1	5242	1.9	(0, 10.6)	2	3.8	(0.5, 13.8)	1.12
MARSHALL MEDICAL CENTER (1-RH)	26	21349	12.2	(8.0, 17.8)	42	19.7	(14.2, 26.6)	1.25
MAYERS MEMORIAL HOSPITAL	0	1441	0.0	(0, 20.8)	0	0.0	(0, 20.8)	0.79
MEMORIAL HOSPITAL LOS BANOS	1	4904	2.0	(0.1, 11.4)	2	4.1	(0.5, 14.7)	0.69
MEMORIAL HOSPITAL OF GARDENA	18	25529	7.1	(4.2, 11.1)	24	9.4	(6.0, 14.0)	1.18
MEMORIAL MEDICAL CENTER	77	95151	8.1	(6.4, 10.1)	140	14.7	(12.4, 17.4)	1.35
MENDOCINO COAST DISTRICT HOSPITAL	1	4743	2.1	(0.1, 11.7)	2	4.2	(0.5, 15.2)	1.06
MENIFEE VALLEY MEDICAL CENTER*	14	13922	10.1	(5.5, 16.9)	18	12.9	(7.7, 20.4)	1.23
MERCY GENERAL HOSPITAL, SACRAMENTO	56	78339	7.1	(5.4, 9.3)	79	10.1	(8.0, 12.6)	1.58
MERCY HOSPITAL OF FOLSOM*	6	16647	3.6	(1.3, 7.8)	11	6.6	(3.3, 11.8)	1.05

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MERCY MEDICAL CENTER MT. SHASTA	0	3262	0.0	(0, 9.2)	0	0.0	(0, 9.2)	1.18
MERCY MEDICAL CENTER REDDING	13	50980	2.6	(1.4, 4.4)	29	5.7	(3.8, 8.2)	1.46
MERCY MEDICAL CENTER, MERCED	29	51312	5.7	(3.8, 8.1)	54	10.5	(7.9, 13.7)	1.00
MERCY SAN JUAN MEDICAL CENTER	53	87058	6.1	(4.6, 8.0)	74	8.5	(6.7, 10.7)	1.28
METHODIST HOSPITAL OF SACRAMENTO	11	30404	3.6	(1.8, 6.5)	16	5.3	(3.0, 8.5)	1.17
METHODIST HOSPITAL OF SOUTHERN CALIFORNIA	77	82196	9.4	(7.4, 11.7)	103	12.5	(10.2, 15.2)	1.28
MILLS-PENINSULA HEALTH SERVICES MILLS HEALTH CENTER, SAN MATEO PENINSULA MEDICAL CENTER, BURLINGAME	38	53563	7.1	(5, 9.7)	55	10.3	(7.7, 13.4)	1.23
MIRACLE MILE MEDICAL CENTER	0	805	0.0	(0, 37.2)	0	0.0	(0, 37.2)	3.08
MISSION COMMUNITY HOSPITAL, PANORAMA	3	15204	2.0	(0.4, 5.8)	3	2.0	(0.4, 5.8)	1.15
MISSION HOSPITAL REGIONAL MEDICAL CENTER MISSION HOSP REGIONAL MED CTR MISSION HOSP LAGUNA BEACH	60	76599	7.8	(6.0, 10.1)	82	10.7	(8.5, 13.3)	0.99 1.22
MODOC MEDICAL CENTER	0	1612	0.0	(0, 18.6)	0	0.0	(0, 18.6)	0.97
MONTCLAIR HOSPITAL MEDICAL CENTER**	9	12241	7.4	(3.4, 14.0)	10	8.2	(3.9, 15.0)	0.97
MONTEREY PARK HOSPITAL	7	16516	4.2	(1.7, 8.7)	13	7.9	(4.2, 13.5)	0.83
MOTION PICTURE & TELEVISION HOSPITAL	0	1229	0.0	(0, 24.4)	1	8.1	(0.2, 45.3)	0.94
MOUNTAINS COMMUNITY HOSPITAL	1	762	13.1	(0.3, 73.1)	1	13.1	(0.3, 73.1)	0.87
NATIVIDAD MEDICAL CENTER	5	32887	1.5	(0.5, 3.5)	7	2.1	(0.9, 4.4)	0.86
NORTHBAY HEALTHCARE GROUP NORTHBAY MEDICAL CENTER, FAIRFIELD NORTHBAY VACAVALLEY HOSPITAL	2 5	21732 12570	0.9 4.0	(0.1, 3.3) (1.3, 9.3)	10 12	4.6 9.5	(2.2, 8.5) (4.9, 16.7)	1.17 1.36
NORTHERN INYO HOSPITAL	1	2676	3.7	(0.1, 20.8)	1	3.7	(0.1, 20.8)	0.98
NORTHRIDGE HOSPITAL MEDICAL CENTER	59	77048	7.7	(5.8, 9.9)	80	10.4	(8.2, 12.9)	1.23
NOVATO COMMUNITY HOSPITAL	0	5986	0.0	(0, 5.0)	0	0.0	(0, 5.0)	1.54

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OAK VALLEY HOSPITAL DISTRICT	0	4290	0.0	(0, 7.0)	1	2.3	(0.1, 13)	1.09
O'CONNOR HOSPITAL	38	45840	8.3	(5.9, 11.4)	53	11.6	(8.7, 15.1)	0.96
OJAI VALLEY COMMUNITY HOSPITAL	0	2790	0.0	(0, 10.7)	0	0.0	(0, 10.7)	1.21
OLYMPIA MEDICAL CENTER	58	34885	16.6	(12.6, 21.5)	58	16.6	(12.6, 21.5)	1.50
ORANGE COAST MEMORIAL MEDICAL	27	41445	6.5	(4.3, 9.5)	44	10.6	(7.7, 14.3)	1.13
OROVILLE HOSPITAL	10	36989	2.7	(1.3, 5.0)	18	4.9	(2.9, 7.7)	1.14
PACIFIC ALLIANCE MEDICAL CENTER	8	25115	3.2	(1.4, 6.3)	12	4.8	(2.5, 8.3)	0.87
PACIFIC HOSPITAL OF LONG BEACH	0	40219	0.0	(0, 0.7)	0	0.0	(0, 0.7)	1.12
PALM DRIVE HOSPITAL	3	4434	6.8	(1.4, 19.8)	7	15.8	(6.3, 32.5)	1.55
PALMDALE REGIONAL MEDICAL CENTER	8	26278	3.0	(1.3, 6.0)	11	4.2	(2.1, 7.5)	
PALO VERDE HOSPITAL	2	4866	4.1	(0.5, 14.8)	2	4.1	(0.5, 14.8)	0.87
PALOMAR MEDICAL CENTER	33	78239	4.2	(2.9, 5.9)	47	6.0	(4.4, 8.0)	1.17
PARADISE VALLEY HOSPITAL	9	48815	1.8	(0.8, 3.5)	10	2.0	(1.0, 3.8)	1.06
PARKVIEW COMMUNITY HOSPITAL MED CTR	15	33868	4.4	(2.5, 7.3)	19	5.6	(3.4, 8.8)	1.00
PATIENTS' HOSPITAL OF REDDING	0	553	0.0	(0, 54.2)	0	0.0	(0, 54.2)	1.25
PETALUMA VALLEY HOSPITAL	6	9019	6.7	(2.4, 14.5)	15	16.6	(9.3, 27.4)	1.16
PLACENTIA LINDA HOSPITAL	3	14143	2.1	(0.4, 6.2)	6	4.2	(1.6, 9.2)	1.23
PLUMAS DISTRICT HOSPITAL	0	2121	0.0	(0, 14.1)	0	0.0	(0, 14.1)	0.92
POMERADO HOSPITAL	13	26044	5.0	(2.7, 8.5)	16	6.1	(3.5, 10.0)	1.16
POMONA VALLEY HOSPITAL MEDICAL CENTER	138	86144	16.0	(13.5, 18.9)	172	20.0	(17.1, 23.2)	1.14
POOLED				-			-	**
PORTERVILLE DEVELOPMENTAL CENTER	0	1377	0.0	(0, 21.8)	0	0.0	(0, 21.8)	
PRESBYTERIAN INTERCOMMUNITY HOSPITAL	60	69204	8.7	(6.6, 11.2)	93	13.4	(10.8, 16.5)	1.29
PROVIDENCE HOLY CROSS MEDICAL CENTER	53	82383	6.4	(4.8, 8.4)	62	7.5	(5.8, 9.6)	1.32
PROVIDENCE LITTLE COMPANY OF MARY MED CTR SAN PEDRO	23	39064	5.9	(3.7, 8.8)	29	7.4	(5.0, 10.7)	1.06

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PROVIDENCE LITTLE COMPANY OF MARY MED CTR TORRANCE	40	67447	5.9	(4.2, 8.1)	62	9.2	(7.0, 11.8)	1.13
PROVIDENCE SAINT JOSEPH MEDICAL CENTER	65	86863	7.5	(5.8, 9.5)	87	10.0	(8.0, 12.4)	1.34
PROVIDENCE TARZANA MEDICAL CENTER	66	59552	11.1	(8.6, 14.1)	90	15.1	(12.2, 18.6)	1.26
QUEEN OF THE VALLEY MEDICAL CENTER	23	38101	6.0	(3.8, 9.1)	29	7.6	(5.1, 10.9)	1.43
RADY CHILDREN'S HOSP, SAN DIEGO	34	55657	6.1	(4.2, 8.5)	48	8.6	(6.4, 11.4)	1.44
REDLANDS COMMUNITY HOSPITAL	42	41972	10.0	(7.2, 13.5)	59	14.1	(10.7, 18.1)	1.12
REDWOOD MEMORIAL HOSPITAL	3	5548	5.4	(1.1, 15.8)	5	9.0	(2.9, 21)	0.99
RIDGECREST REGIONAL HOSPITAL	2	11160	1.8	(0.2, 6.5)	6	5.4	(2.0, 11.7)	1.02
RIVERSIDE COMMUNITY HOSPITAL	74	93515	7.9	(6.2, 9.9)	75	8.0	(6.3, 10.1)	1.35
RIVERSIDE COUNTY REGIONAL MED CTR	29	82505	3.5	(2.4, 5.0)	34	4.1	(2.9, 5.8)	1.04
RONALD REAGAN UCLA MEDICAL CENTER	181	141626	12.8	(11, 14.8)	221	15.6	(13.6, 17.8)	1.95
SADDLEBACK MEMORIAL MEDICAL CENTER SADDLEBACK MEMORIAL MED CTR SADDLEBACK MEMORIAL MED CTR, SAN CLEMENTE	65	64751	10.0	(7.7, 12.8)	124	19.2	(15.9, 22.8)	1.26
SAINT AGNES MEDICAL CENTER	38	105468	3.6	(2.5, 4.9)	49	4.6	(3.4, 6.1)	1.26
SAINT FRANCIS MEDICAL CENTER	25	91685	2.7	(1.8, 4.0)	32	3.5	(2.4, 4.9)	1.01
SAINT FRANCIS MEMORIAL HOSPITAL	18	31049	5.8	(3.4, 9.2)	27	8.7	(5.7, 12.7)	1.44
SAINT JOHN'S HEALTH CENTER	24	51469	4.7	(3.0, 6.9)	40	7.8	(5.6, 10.6)	1.50
SAINT LOUISE REGIONAL HOSPITAL	10	12388	8.1	(3.9, 14.8)	20	16.1	(9.9, 24.9)	1.08
SAINT VINCENT MEDICAL CENTER	71	42848	16.6	(12.9, 20.9)	87	20.3	(16.3, 25.0)	1.63
SALINAS VALLEY MEMORIAL HOSPITAL	12	43357	2.8	(1.4, 4.8)	17	3.9	(2.3, 6.3)	1.28
SAN ANTONIO COMMUNITY HOSPITAL	31	51676	6.0	(4.1, 8.5)	54	10.4	(7.9, 13.6)	1.29
SAN DIMAS COMMUNITY HOSPITAL	10	12615	7.9	(3.8, 14.6)	11	8.7	(4.4, 15.6)	1.13
SAN FRANCISCO GENERAL HOSPITAL	122	94532	12.9	(10.7, 15.4)	132	14.0	(11.7, 16.6)	1.18

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SAN GABRIEL VALLEY MEDICAL CENTER	41	29986	13.7	(9.8, 18.5)	50	16.7	(12.4, 22.0)	1.10
SAN GORGONIO MEMORIAL HOSPITAL	6	11841	5.1	(1.9, 11)	8	6.8	(2.9, 13.3)	1.05
SAN JOAQUIN COMMUNITY HOSPITAL	28	65585	4.3	(2.8, 6.2)	41	6.3	(4.5, 8.5)	1.24
SAN JOAQUIN GENERAL HOSPITAL	13	33930	3.8	(2.0, 6.6)	21	6.2	(3.8, 9.5)	1.03
SAN JOAQUIN VALLEY REHAB HOSPITAL	4	16992	2.4	(0.6, 6)	4	2.4	(0.6, 6.0)	1.20
SAN MATEO MEDICAL CENTER	10	21007	4.8	(2.3, 8.8)	14	6.7	(3.6, 11.2)	1.19
SAN RAMON REGIONAL MEDICAL CENTER	3	18732	1.6	(0.3, 4.7)	6	3.2	(1.2, 7.0)	1.30
SAN RAMON REGIONAL MEDICAL CENTER								
SAN RAMON REGIONAL MEDICAL CENTER SOUTH BUILDING								
SANTA BARBARA COTTAGE HOSPITAL	25	73917	3.4	(2.2, 5.0)	27	3.7	(2.4, 5.3)	1.31
SANTA CLARA VALLEY MEDICAL CENTER	76	107751	7.1	(5.6, 8.8)	76	7.1	(5.6, 8.8)	1.11
SANTA MONICA - UCLA MED CTR AND ORTHOPAEDIC HOSP	71	78384	9.1	(7.1, 11.4)	117	14.9	(12.3, 17.9)	1.29
SANTA ROSA MEMORIAL HOSPITAL	30	56189	5.3	(3.6, 7.6)	44	7.8	(5.7, 10.5)	1.54
SANTA YNEZ VALLEY COTTAGE HOSPITAL	0	1030	0.0	(0, 29.1)	0	0.0	(0, 29.1)	0.97
SCRIPPS GREEN HOSPITAL	19	41783	4.5	(2.7, 7.1)	37	8.9	(6.2, 12.2)	1.85
SCRIPPS HEALTH	95	143167	6.6	(5.4, 8.1)	133	9.3	(7.8, 11)	1.26
SCRIPPS MERCY HOSPITAL								
SCRIPPS MERCY HOSPITAL CHULA VISTA								
SCRIPPS MEMORIAL HOSPITAL, ENCINITAS	20	41464	4.8	(2.9, 7.4)	28	6.8	(4.5, 9.8)	1.19
SCRIPPS MEMORIAL HOSPITAL, LA JOLLA	51	72700	7.0	(5.2, 9.2)	65	8.9	(6.9, 11.4)	1.34
SENECA DISTRICT HOSPITAL	0	812	0.0	(0, 36.9)	0	0.0	(0, 36.9)	0.89
SEQUOIA HOSPITAL	12	30993	3.9	(2.0, 6.8)	16	5.2	(3.0, 8.4)	1.28
SHARP CHULA VISTA MEDICAL CENTER	37	66513	5.6	(3.9, 7.7)	49	7.4	(5.5, 9.7)	1.21
SHARP CORONADO HOSPITAL AND HEALTHCARE CTR	7	9558	7.3	(2.9, 15.1)	9	9.4	(4.3, 17.9)	1.72

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Hospital Name	Cases Hospital Onset	Patient Days	Hospital Onset Rate*	95% Confidence Interval	Cases Hospital Associated	Hospital Associated Rate	95% Confidence Interval†	Case Mix Index
SHARP MARY BIRCH HOSPITAL FOR WOMEN & NEWBORNS	1	32595	0.3	(0, 1.7)	2	0.6	(0.1, 2.2)	0.70
SHARP MEMORIAL HOSPITAL	64	97028	6.6	(5.1, 8.4)	104	10.7	(8.8, 13)	1.25
SHASTA REGIONAL MEDICAL CENTER	8	31670	2.5	(1.1, 5.0)	15	4.7	(2.7, 7.8)	1.63
SHERMAN OAKS HOSPITAL	15	17767	8.4	(4.7, 13.9)	17	9.6	(5.6, 15.3)	1.60
SHRINERS HOSPS FOR CHILDREN, LOS ANGELES	0	8522	0.0	(0, 3.5)	0	0.0	(0, 3.5)	2.13
SIERRA KINGS DISTRICT HOSPITAL	0	4613	0.0	(0, 6.5)	0	0.0	(0, 6.5)	0.64
SIERRA NEVADA MEMORIAL HOSPITAL	15	17288	8.7	(4.9, 14.3)	27	15.6	(10.3, 22.7)	1.15
SIERRA VIEW DISTRICT HOSPITAL	11	31095	3.5	(1.8, 6.3)	19	6.1	(3.7, 9.5)	1.01
SIERRA VISTA REGIONAL MEDICAL	9	21849	4.1	(1.9, 7.8)	15	6.9	(3.8, 11.3)	1.15
SILVER LAKE MEDICAL CENTER	0	22104	0.0	(0, 1.4)	0	0.0	(0, 1.4)	1.13
SIMI VALLEY HOSPITAL & HEALTH CARE SERVICES	38	29755	12.8	(9.0, 17.5)	42	14.1	(10.2, 19.1)	1.23
SONOMA DEVELOPMENTAL CENTER	0	902	0.0	(0, 33.2)	1	11.1	(0.3, 61.8)	
SONOMA VALLEY HOSPITAL	3	5646	5.3	(1.1, 15.5)	5	8.9	(2.9, 20.7)	1.19
SONORA REGIONAL MEDICAL CENTER SONORA REGIONAL MED CTR CAMPUS #1 SONORA REGIONAL MED CTR CAMPUS #2	17	20006	8.5	(5.0, 13.6)	19	9.5	(5.7, 14.8)	1.26
ST. BERNARDINE MEDICAL CENTER	53	57949	9.1	(6.9, 12)	63	10.9	(8.4, 13.9)	1.56
ST. ELIZABETH COMMUNITY HOSPITAL	1	8851	1.1	(0, 6.3)	3	3.4	(0.7, 9.9)	1.02
ST. HELENA HOSPITAL	6	18959	3.2	(1.2, 6.9)	8	4.2	(1.8, 8.3)	1.47
ST. HELENA HOSPITAL, CLEARLAKE	3	6735	4.5	(0.9, 13.0)	5	7.4	(2.4, 17.3)	0.89
ST. JOHNS PLEASANT VALLEY HOSPITAL	10	15395	6.5	(3.1, 11.9)	15	9.7	(5.5, 16.1)	1.33
ST. JOHNS REGIONAL MEDICAL CENTER	21	54050	3.9	(2.4, 5.9)	26	4.8	(3.1, 7)	1.28
ST. JOSEPH HOSPITAL, EUREKA ST. JOSEPH HOSPITAL, EUREKA ST. JOSEPH HOSPITAL, REHAB UNIT	19	27777	6.8	(4.1, 10.7)	26	9.4	(6.1, 13.7)	1.44
	0	2490	0.0	(0, 12.0)	0	0.0	(0, 12.0)	

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ST. JOSEPH HOSPITAL, ORANGE	60	77388	7.8	(5.9, 10)	90	11.6	(9.4, 14.3)	1.37
ST. JOSEPH'S MEDICAL CENTER OF STOCKTON	81	78728	10.3	(8.2, 12.8)	105	13.3	(10.9, 16.1)	1.32
ST. JUDE MEDICAL CENTER	35	68834	5.1	(3.5, 7.1)	51	7.4	(5.5, 9.7)	1.37
ST. MARY MEDICAL CENTER, APPLE VALLEY	57	64060	8.9	(6.7, 11.5)	70	10.9	(8.5, 13.8)	1.17
ST. MARY MEDICAL CENTER, LONG BEACH	35	54218	6.5	(4.5, 9.0)	43	7.9	(5.7, 10.7)	1.09
ST. MARY'S MEDICAL CENTER, SAN FRANCISCO	22	36631	6.0	(3.8, 9.1)	24	6.6	(4.2, 9.7)	1.56
ST. ROSE HOSPITAL	43	42620	10.1	(7.3, 13.6)	59	13.8	(10.5, 17.9)	1.18
STANFORD HOSPITAL	82	136276	6.0	(4.8, 7.5)	122	9.0	(7.4, 10.7)	1.96
STANISLAUS SURGICAL HOSPITAL	0	2311	0.0	(0, 13.0)	0	0.0	(0, 13.0)	1.67
SURPRISE VALLEY COMMUNITY HOSPITAL*	0	82	0.0	(0, 365.3)	0	0.0	(0, 365.3)	0.80
SUTTER AMADOR HOSPITAL	6	6871	8.7	(3.2, 19.0)	10	14.6	(7.0, 26.8)	1.02
SUTTER AUBURN FAITH HOSPITAL	7	13936	5.0	(2.0, 10.3)	20	14.4	(8.8, 22.2)	1.34
SUTTER COAST HOSPITAL	0	8164	0.0	(0, 3.7)	3	3.7	(0.8, 10.7)	1.09
SUTTER DAVIS HOSPITAL	2	8470	2.4	(0.3, 8.5)	3	3.5	(0.7, 10.4)	0.89
SUTTER DELTA MEDICAL CENTER	27	30536	8.8	(5.8, 12.9)	42	13.8	(9.9, 18.6)	1.13
SUTTER EAST BAY HOSPITALS	80	202980	3.9	(3.1, 4.9)	104	5.1	(4.2, 6.2)	
ALTA BATES SUMMIT MED CTR, ALTA BATES CAMPUS, BERKELEY								0.96
ALTA BATES SUMMIT MED CTR, HERRICK CAMPUS, BERKELEY								0.94
ALTA BATES SUMMIT MED CTR, SUMMIT CAMPUS 1, OAKLAND								1.78
ALTA BATES SUMMIT MED CTR, SUMMIT CAMPUS 2, OAKLAND								
SUTTER HEALTH SACRAMENTO SIERRA REGION	50	111953	4.5	(3.3, 5.9)	83	7.4	(5.9, 9.2)	
SUTTER GENERAL HOSPITAL, SACRAMENTO								1.64

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SUTTER MEMORIAL HOSPITAL, SACRAMENTO								1.27
SUTTER LAKESIDE HOSPITAL	2	6750	3.0	(0.4, 10.7)	3	4.4	(0.9, 13)	1.17
SUTTER MATERNITY & SURGERY CTR OF SANTA CRUZ	0	4305	0.0	(0, 7.0)	0	0.0	(0, 7.0)	0.82
SUTTER MEDICAL CENTER OF SANTA ROSA	23	20653	11.1	(7.1, 16.7)	29	14.0	(9.4, 20.2)	1.20
SUTTER ROSEVILLE MEDICAL CENTER	25	56834	4.4	(2.8, 6.5)	47	8.3	(6.1, 11.0)	1.24
SUTTER SOLANO MEDICAL CENTER	6	19820	3.0	(1.1, 6.6)	10	5.0	(2.4, 9.3)	1.20
SUTTER SURGICAL HOSPITAL, NORTH VALLEY	0	1664	0.0	(0, 18.0)	0	0.0	(0, 18.0)	1.57
SUTTER TRACY COMMUNITY HOSPITAL	10	15507	6.4	(3.1, 11.9)	13	8.4	(4.5, 14.3)	0.99
SUTTER WEST BAY HOSPITALS	117	154422	7.6	(6.3, 9.1)	148	9.6	(8.1, 11.3)	
CALIFORNIA PACIFIC MEDICAL CENTER, DAVIES CAMPUS HOSPITAL								
CALIFORNIA PACIFIC MEDICAL CENTER, PACIFIC CAMPUS HOSPITAL								1.31
CALIFORNIA PACIFIC MEDICAL CENTER, WEST CAMPUS HOSPITAL								
TAHOE FOREST HOSPITAL	1	5371	1.9	(0, 10.4)	1	1.9	(0, 10.4)	1.04
TEHACHAPI HOSPITAL	0	533	0.0	(0, 56.2)	1	18.8	(0.5, 104.5)	0.82
TEMPLE COMMUNITY HOSPITAL	0	15958	0.0	(0, 1.9)	0	0.0	(0, 1.9)	1.10
THE FREMONT-RIDEOUT HEALTH GROUP FREMONT MEDICAL CENTER, YUBA CITY RIDEOUT MEMORIAL HOSPITAL, MARYSVILLE	17	39066	4.4	(2.5, 7.0)	26	6.7	(4.3, 9.8)	1.59
THOUSAND OAKS SURGICAL HOSPITAL	0	2579	0.0	(0, 11.6)	0	0.0	(0, 11.6)	1.24
TORRANCE MEMORIAL MEDICAL CENTER	76	88935	8.5	(6.7, 10.7)	96	10.8	(8.7, 13.2)	1.20
TRI-CITY MEDICAL CENTER	19	60844	3.1	(1.9, 4.9)	39	6.4	(4.6, 8.8)	1.67
TRINITY HOSPITAL	0	2186	0.0	(0, 13.7)	0	0.0	(0, 13.7)	0.95
TULARE REGIONAL MEDICAL CENTER	3	22194	1.4	(0.3, 4.0)	3	1.4	(0.3, 4.0)	0.87
TWIN CITIES COMMUNITY HOSPITAL	20	31056	6.4	(3.9, 9.9)	27	8.7	(5.7, 12.6)	1.03

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UHS-CORONA, INC. CORONA REGIONAL MEDICAL CENTER CAMPUS #1 CORONA REGIONAL MEDICAL CENTER CAMPUS #2	20	49640	4.0	(2.5, 6.2)	28	5.6	(3.7, 8.2)	1.01
UKIAH VALLEY MEDICAL CENTER/HOSP DRIVE	2	10632	1.9	(0.2, 6.8)	4	3.8	(1.0, 9.6)	1.03
UNIVERSITY OF SOUTHERN CALIFORNIA USC UNIVERSITY HOSPITAL, LOS ANGELES USC KENNETH NORRIS JR. CANCER HOSPITAL	94	75971	12.4	(10.0, 15.1)	107	14.1	(11.5, 17.0)	1.75 2.35
UNIVERSAL HEALTH SERVICES OF RANCHO SPRINGS SOUTHWEST HEALTHCARE SYSTEMS, WILDOMAR SOUTHWEST HEALTHCARE SYSTEMS, MURRIETA	30	59698	5.0	(3.4, 7.2)	51	8.5	(6.4, 11.2)	1.01
UNIVERSITY OF CALIFORNIA DAVIS	108	149635	7.2	(5.9, 8.7)	138	9.2	(7.7, 10.9)	1.60
UNIVERSITY OF CALIFORNIA IRVINE	89	92013	9.7	(7.8, 11.9)	112	12.2	(10.0, 14.6)	1.53
UNIVERSITY OF CALIFORNIA SAN DIEGO UNIVERSITY OF CALIFORNIA, SAN DIEGO MED CTR UCSD-LA JOLLA, JOHN M. & SALLY B. THORNTON HOSP	129	128708	10.0	(8.4, 11.9)	131	10.2	(8.5, 12.1)	1.58
UNIVERSITY OF CALIFORNIA SAN FRANCISCO UCSF MEDICAL CENTER, SAN FRANCISCO UCSF MEDICAL CENTER AT MOUNT ZION	192	167264	11.5	(9.9, 13.2)	236	14.1	(12.4, 16)	1.85
VALLEY PRESBYTERIAN HOSPITAL	52	67776	7.7	(5.7, 10.1)	66	9.7	(7.5, 12.4)	1.05
VERDUGO HILLS HOSPITAL	14	26922	5.2	(2.8, 8.7)	23	8.5	(5.4, 12.8)	1.09
VICTOR VALLEY COMMUNITY HOSPITAL	3	20112	1.5	(0.3, 4.4)	5	2.5	(0.8, 5.8)	0.96

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WASHINGTON HOSPITAL	124	63992	19.4	(16.1, 23.1)	146	22.8	(19.3, 26.8)	1.28
WATSONVILLE COMMUNITY HOSPITAL	11	15662	7.0	(3.5, 12.6)	15	9.6	(5.4, 15.8)	1.02
WEST ANAHEIM MEDICAL CENTER	31	30793	10.1	(6.8, 14.3)	37	12.0	(8.5, 16.6)	1.57
WEST HILLS HOSPITAL & MEDICAL	25	39121	6.4	(4.1, 9.4)	35	8.9	(6.2, 12.4)	1.29
WESTERN MEDICAL CENTER, ANAHEIM	4	40856	1.0	(0.3, 2.5)	5	1.2	(0.4, 2.9)	0.84
WESTERN MEDICAL CENTER, SANTA ANA	31	36199	8.6	(5.8, 12.2)	37	10.2	(7.2, 14.1)	1.24
WHITE MEMORIAL MEDICAL CENTER	78	89496	8.7	(6.9, 10.9)	100	11.2	(9.1, 13.6)	1.10
WHITTIER HOSPITAL MEDICAL CENTER	10	25987	3.8	(1.8, 7.1)	13	5.0	(2.7, 8.6)	0.92

\*Reported 10 months of data. \*\*Reported 11 months of data. All other hospitals reported 12 months of data.

†Mean of all hospitals case mix indices

**Notes:** Rate per 10,000 patient days; 95% confidence interval calculated based on exact Poisson distribution; case mix index was available and listed for most but not all acute care campuses

Source: Healthcare-Associated *Clostridium difficile* Infections in California General Acute Care Hospitals, April 1, 2010 through March 31, 2011.