



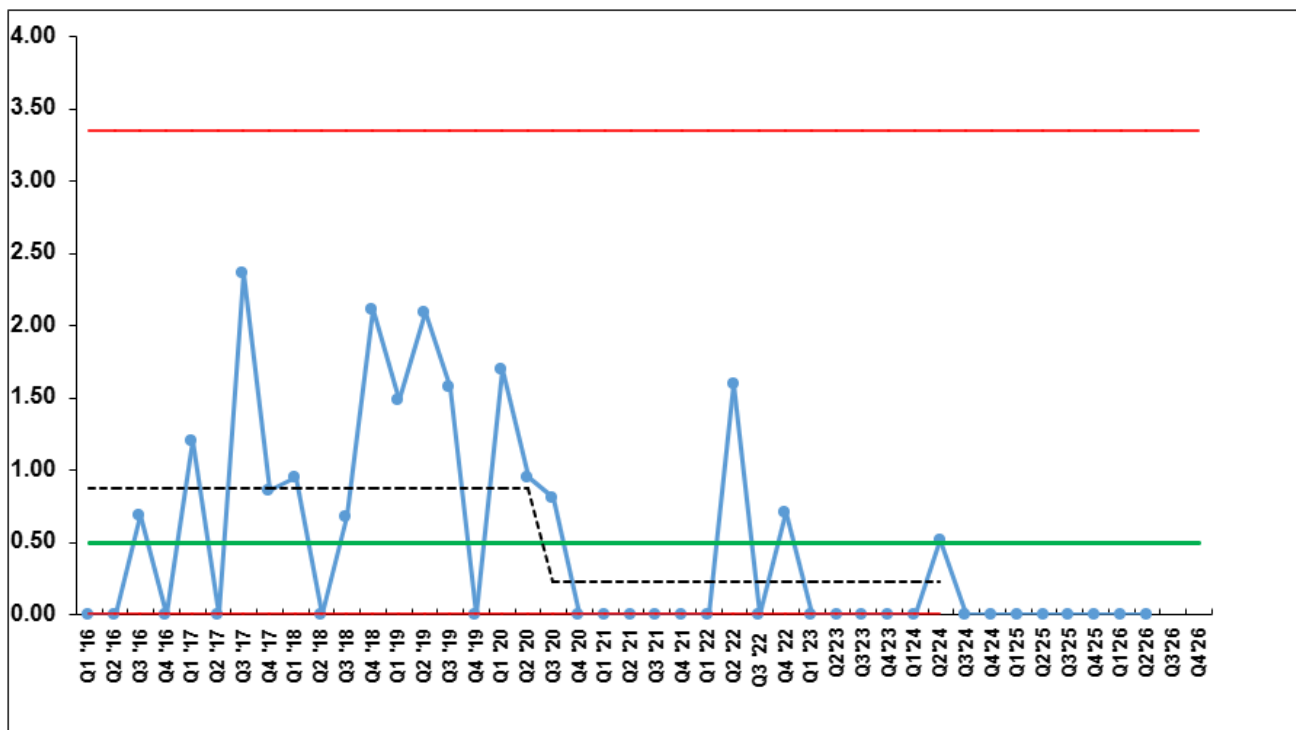
Neonatology

CLABSI- Combined data for all NICU sites

The National Healthcare Safety Network (NHSN) data indicates mean CLABSI rate for infants >2500 g birth weight is 0.6 infections per 1000 catheter days. For infants less than 750 g birth weight, the pooled mean CLABSI rate remains >2.5 infections per 1000 catheter days.

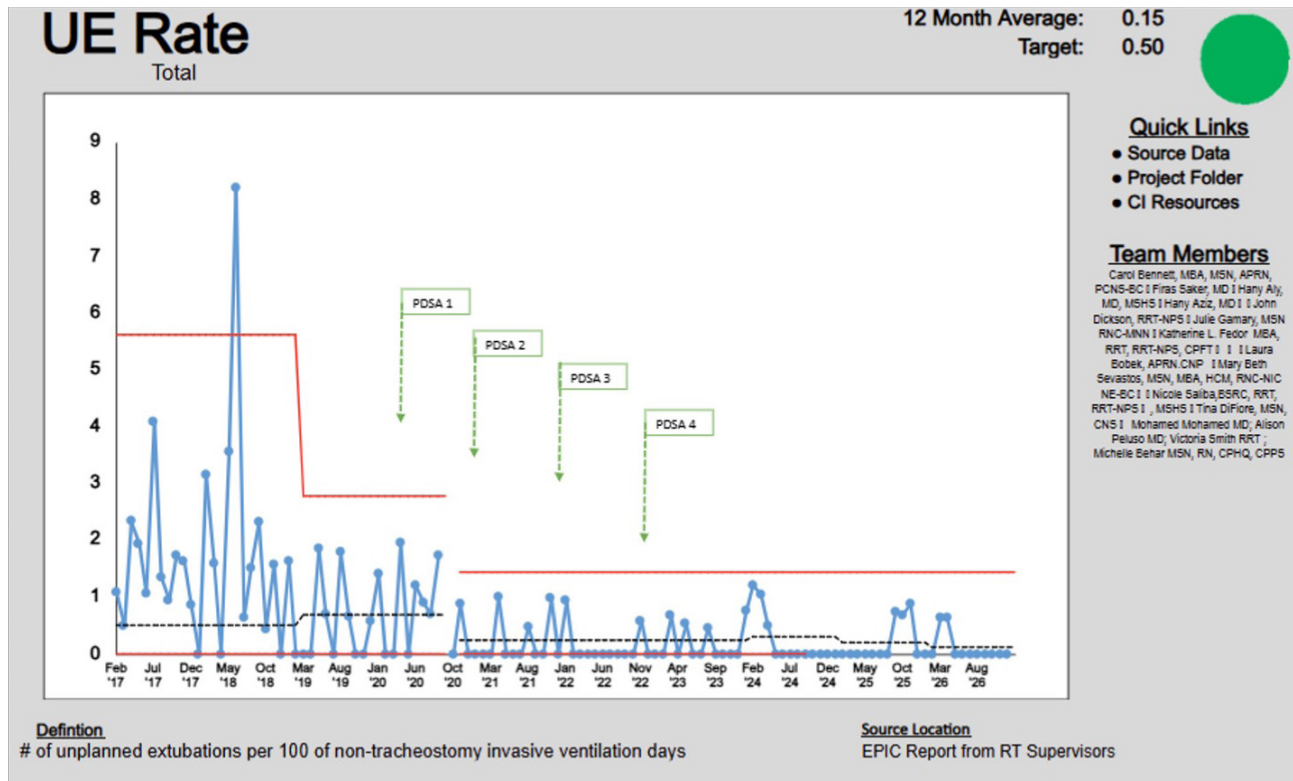
We are proud to report that we were CLABSI free at all our NICU sites for 2025.

CLABSI rate per 1000 line days



Unplanned Extubation per 100 Intubated Days

Unplanned extubation (UE) can lead to serious complications in mechanically ventilated infants. Since January 2019, our NICUs have implemented a number of measures to reduce the UE rate from 1.82 per 100 non-tracheostomy ventilation days in 2017 and 2018 to approximately 0.15 — now among the nation's lowest rates, according to U.S. News & World Report's survey of pediatric hospitals.

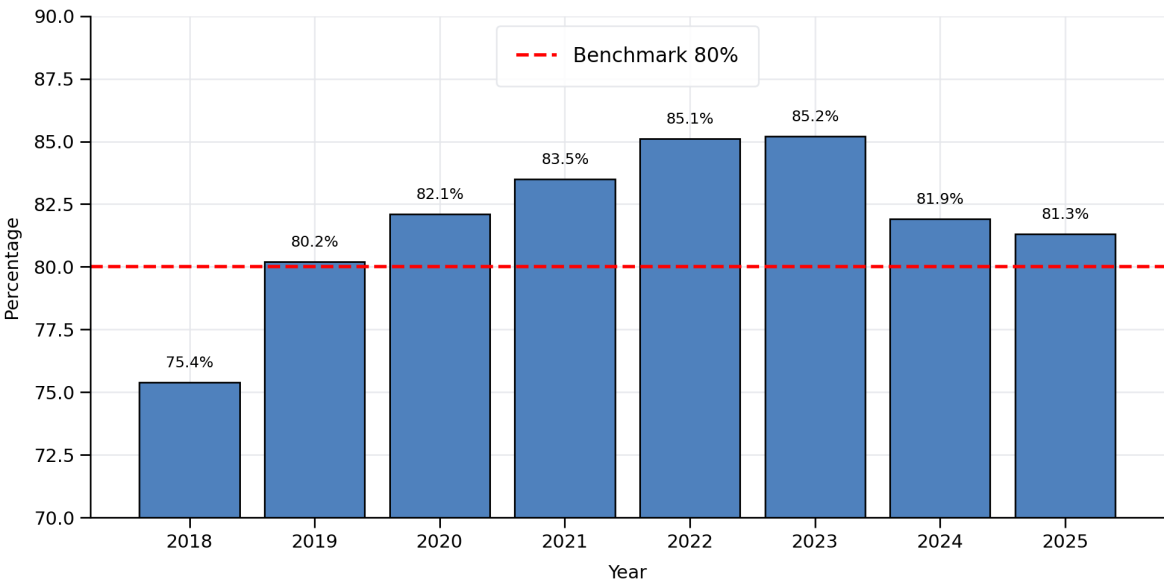


Any breast milk at discharge – combined data for all NICU sites

Human milk provides many specific health benefits to the vulnerable infant, both during the hospital stay and following discharge. These benefits include a lower incidence and severity of hospital-acquired infections, reduces the incidence of necrotizing enterocolitis (NEC). Infants who are fed human milk have improved visual acuity and higher scores on tests of neurocognitive and developmental outcomes. Furthermore, studies demonstrate that there is a dose response effect of human milk on the development of white matter in the brain.

Our department conducted A3 quality project to enhance and sustain maternal breast milk at discharge. The graph shows our measure above 80% consistent with top Children hospitals as measured by world news report.

2018-2025 Performance with 80% Benchmark



Bubble CPAP Program to Reduce Bronchopulmonary Dysplasia in Preterm Infants

Chronic lung disease (CLD) is a common complication in premature infants, particularly those born before 30 weeks' gestation, weighing less than 1,500 g or requiring mechanical ventilation. CLD is associated with poor growth and adverse neurodevelopmental outcomes.

To reduce CLD, a bubble CPAP (b-CPAP) strategy emphasizing avoidance of intubation and invasive respiratory support was implemented at Cleveland Clinic Children's in 2018. Following implementation, CLD rates decreased from 22% to 8.6% at Cleveland Clinic Fairview Hospital's NICU and from 30% to 14% at Cleveland Clinic Hillcrest Hospital's NICU.

Across Cleveland Clinic Children's NICUs, CLD incidence declined from 26.3% in 2017 to 8.8% currently.

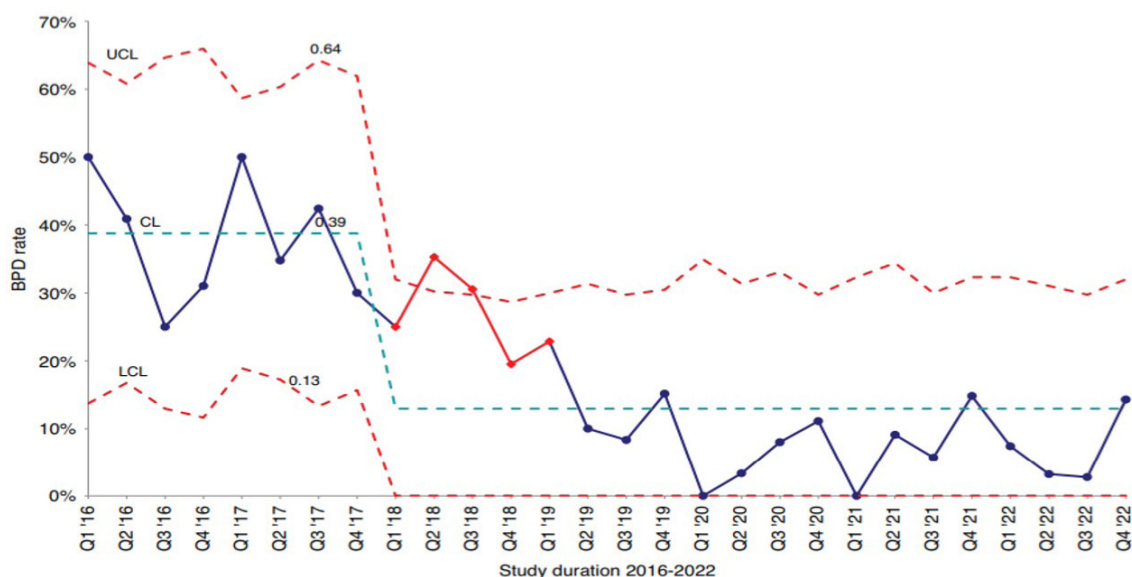
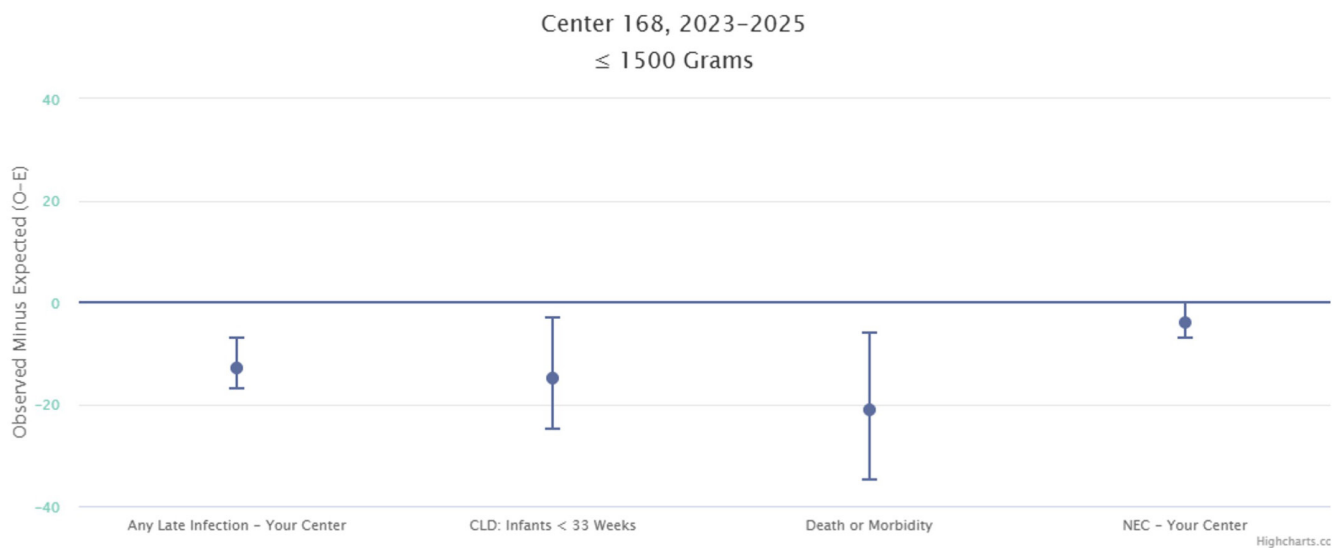


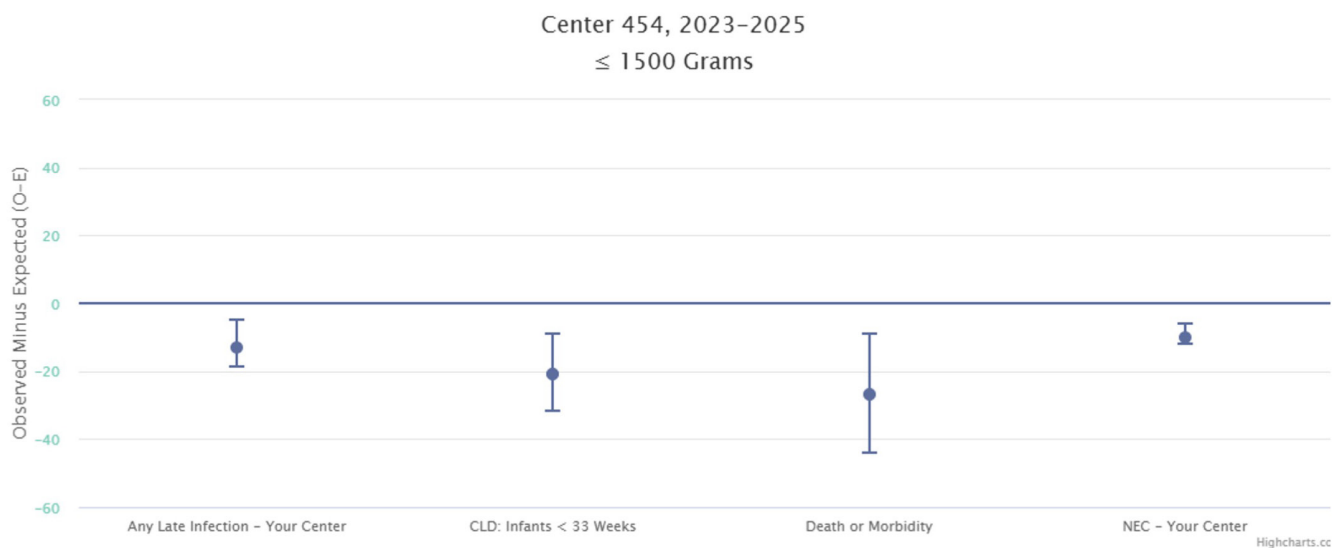
Fig. 2 Control chart for BPD rates to evaluate the efficacy of the b-CPAP implementation program. The X-axis represents study years (2016–2022), scaled quarterly, and the Y-axis represents BPD rates among included infants. The green dashed line indicates the center line (CL), while the red dotted lines indicate the upper (UCL) and lower (LCL) control limits. By Q2 2019, five consecutive points fell below the center line, indicating a favorable special cause variation consistent with improved efficacy of the b-CPAP program.

Pediatr Res. 2025 Dec 9. doi: 10.1038/s41390-025-04635-4. Epub ahead of print. PMID: 41366049.

Hillcrest Hospital's VON Risk-Adjusted Outcome in Very Low Birth Weight Infants



Fairview Hospital's VON Risk-Adjusted Outcome in Very Low Birth Weight Infants



Patients Served

