

diagnosis codes. This new variable is currently optional.

NHSN's current definition of SCI-NB is in Chapter 7—UTI Events of the Patient Safety Component (PSC) manual ([https://www.cdc.gov/nhsn/pdfs/pscmanual/pcsmanual\\_current.pdf](https://www.cdc.gov/nhsn/pdfs/pscmanual/pcsmanual_current.pdf)). The SCI-NB ICD-10-CM diagnosis codes are available on the NHSN UTI Events web page ([https://www.cdc.gov/nhsn/xls/SCI-NB\\_ICD-10-CM.xlsx](https://www.cdc.gov/nhsn/xls/SCI-NB_ICD-10-CM.xlsx)). Additionally, the “Neurogenic Bladder” variable is accessible within the NHSN application (<https://sams.cdc.gov/>).

**Note:** The “Neurogenic Bladder” variable will be required starting January 2026. NHSN's definition of SCI-NB will be expanded to include both traumatic and non-traumatic etiologies of spinal cord injuries also starting January 2026.

This docket provides an opportunity for professionals who work with the SCI-NB patient population, as well as those who conduct NHSN UTI surveillance, to share their perspectives and concerns, which will help inform our decisions on the “Neurogenic Bladder” variable in the future. The CDC is also seeking additional insights into the unintended consequences of including the SCI-NB patient population in UTI surveillance, and public comments will help guide our approach moving forward. Specifically, CDC is interested in receiving information related to the following:

1. What challenges or barriers might the required reporting of spinal cord injury-associated neurogenic bladder ICD-10-CM diagnosis codes within the NHSN application pose for your facility? How could these challenges or barriers be minimized?

2. Would your facility be able to report the necessary procedure code data within 4.5 months of the end of the quarter in which the procedure occurred? If not, why not, and what is the shortest amount of time following the end of the quarter that the complete data would be available?

3. At your facility, of the patients with spinal cord injury, what injury type or condition (ICD-10-CM diagnosis codes can be provided) is most strongly associated with CAUTIs?

4. At your facility, have patients with spinal cord injury-associated neurogenic bladder experienced harms, complications, or any other unintended consequences from efforts to monitor and prevent CAUTIs?

## References

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2. McGuckin M. The patient survival guide: 8 simple solutions to prevent hospital and healthcare-associated infections. New York, NY: Demos Medical Publishing; 2012.
3. Lo E, Nicolle LE, Coffin SE, Gould C, Maragakis LL, Madding's J, et al. Strategies to prevent catheter-associated urinary tract infections in acute care hospitals: 2014 update. *Infection Control and Hospital Epidemiology* 2014; 35:464–79.
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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Medicare & Medicaid Services

[Document Identifier: CMS–855S]

#### Agency Information Collection Activities: Proposed Collection; Extension of Comment Period

**AGENCY:** Centers for Medicare & Medicaid Services (CMS), HHS.

**ACTION:** Agency information collection activities: Proposed collection; comment request; extension of comment period.

**SUMMARY:** This notice extends the comment period for a 60-day notice request for proposed information collection request associated with the notice [Document Identifier: CMS–855S] entitled “Medicare Enrollment Application: Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Suppliers.” and published in the August 18, 2025 (90 FR 40073) **Federal Register**. The comment period for the information collection request, which would have ended on

June 20, 2025, is extended to Monday, July 7, 2025.

**DATES:** The comment period for the information collection request published in the August 19, 2025, **Federal Register** (90 FR 40073) is extended to October 20, 2025.

**ADDRESSES:** When commenting, please reference the document identifier or OMB control number. To be assured consideration, comments and recommendations must be submitted in any one of the following ways:

1. *Electronically.* You may send your comments electronically to <http://www.regulations.gov>. Follow the instructions for “Comment or Submission” or “More Search Options” to find the information collection document(s) that are accepting comments.

2. *By regular mail.* You may mail written comments to the following address: CMS, Office of Strategic Operations and Regulatory Affairs, Division of Regulations Development, Attention: Document Identifier/OMB Control Number: \_\_\_\_\_ Room C4–26–05, 7500 Security Boulevard, Baltimore, Maryland 21244–1850. To obtain copies of a supporting statement and any related forms for the proposed collection(s) summarized in this notice, please access the CMS PRA website by copying and pasting the following web address into your web browser: <https://www.cms.gov/medicare/regulations-guidance/legislation/paperwork-reduction-act-1995/pra-listing>.

#### FOR FURTHER INFORMATION CONTACT:

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**SUPPLEMENTARY INFORMATION:** In the FR Doc. 2025–1561 of August 18, 2025 (90 FR 40073), we published a Paperwork Reduction Act notice requesting a 60-day public comment period for the document entitled “Medicare Enrollment Application: Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Suppliers.” There were technical delays associated with making the information collection request publicly available; therefore, in this notice we are extending the comment period from the date originally listed in the October 20, 2025, notice.

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