Urinary Tract Infection (UTI)

OMB No. 0920-0666
Exp. Date: xx-xx-20xx

*Facility ID # : _____ *Event # : _____

*Patient ID # : _____ Social Security # : ___ ___ ___ - ___ ___ - ___ ___ ___ ___

Secondary ID # : _____

Patient Name, Last: _____ First: _____ Middle: _____

*Gender: ___ F ___ M *Date of Birth: ____ / ____ / _____

Ethnicity (specify): _____ Race (specify): _____

*Event Type: _UTI_ *Date of Event: ___ / ___ / _____

*Post-procedure UTI: ____Y ____N Date of Procedure: ____ / ____ / _____

NHSN Procedure Code: _____ ICD-9-CM Procedure Code: _____

*Location: _____ *Date Admitted to Facility: ___ / ___ / _____

MDRO Infection: ____ Y ____ N

Risk Factors

*Urinary catheter: ____Y ____ N

Location of Device Insertion: _____ Date of Device Insertion: ___ / ___ / _____

Event Details

*UTI

____ Asymptomatic bacteriuria (ASB) – Specify criterion used:

____ Criterion 1 ____ Criterion 2

____ Symptomatic UTI (SUTI) – Specify criterion used:

____ Criterion 1 ____ Criterion 2__(specify) ____ Criterion 3 ____ Criterion 4__(specify)

____ Other UTI (OUTI) – Specify criterion used:

____ Criterion 1 ____ Criterion 2 ____ Criterion 3__(specify) ____Criterion 4__(specify)

*Secondary Bloodstream Infection: ____ Y ____ N

**Died: ____Y ____ N UTI Contributed to Death: ____ Y ____ N

Discharge Date: ____ / ____ / _____

*Pathogens Identified: ____ Y ____ N If Yes, specify on reverse →

Custom Fields

Label		Label	
_____	____/____/____	_____	____/____/____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Comments

Assurance of Confidentiality: The information obtained in this surveillance system that would permit identification of any individual or institution is collected with a guarantee that it will be held in strict confidence, will be used only for the purposes stated, and will not otherwise be disclosed or released without the consent of the individual, or the institution in accordance with Sections 304, 306 and 308(d) of the Public Health Service Act (42 USC 242b, 242k, and 242m(d)).

Public reporting burden of this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC, Reports Clearance Officer, 1600 Clifton Rd., MS D-79, Atlanta, GA 30333, ATTN: PRA (0920-0666).

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UTI Pathogens: Select up to 3 organisms

Pathogen #	Gram-positive Organisms									
_____	Coagulase-negative staphylococci (specify) _____	**VANC** S I R N								
_____	***Enterococcus faecalis***	**AMP** S I R N	**DAPTO** S I R N	**LNZ** S I R N	**PENG** S I R N	**VANC** S I R N				
_____	***Enterococcus faecium***	**AMP** S I R N	**DAPTO** S I R N	**LNZ** S I R N	**PENG** S I R N	**QUIDAL** S I R N	**VANC** S I R N			
_____	***Staphylococcus aureus***	**CLIND** S I R N	**DAPTO** S I R N	**ERYTH** S I R N	**GENT** S I R N	**LNZ** S I R N	**OX** S I R N	**QUIDAL** S I R N	**RIF** S I R N	**TMZ** S I R N	**VANC** S I R N

	Gram-negative Organisms								
_____	***Acinetobacter* spp.** (specify) _____	**AMK** S I R N	**AMPSUL** S I R N	**CEFEP** S I R N	**CEFTAZ** S I R N	**CIPRO** S I R N	**IMI** S I R N	**LEVO** S I R N	**MERO** S I R N	**PIPTAZ** S I R N
_____	***Escherichia coli***	**AMK** S I R N	**CEFEP** S I R N	**CEFOT** S I R N	**CEFTAZ** S I R N	**CEFTRX** S I R N	**CIPRO** S I R N	**IMI** S I R N	**LEVO** S I R N	**MERO** S I R N
_____	***Enterobacter* spp.** (specify) _____	**AMK** S I R N	**CEFEP** S I R N	**CEFOT** S I R N	**CEFTAZ** S I R N	**CEFTRX** S I R N	**CIPRO** S I R N	**IMI** S I R N	**LEVO** S I R N	**MERO** S I R N
_____	***Klebsiella oxytoca***	**AMK** S I R N	**CEFEP** S I R N	**CEFOT** S I R N	**CEFTAZ** S I R N	**CEFTRX** S I R N	**CIPRO** S I R N	**IMI** S I R N	**LEVO** S I R N	**MERO** S I R N
_____	***Klebsiella pneumoniae***	**AMK** S I R N	**CEFEP** S I R N	**CEFOT** S I R N	**CEFTAZ** S I R N	**CEFTRX** S I R N	**CIPRO** S I R N	**IMI** S I R N	**LEVO** S I R N	**MERO** S I R N
_____	***Serratia marcescens***	**AMK** S I R N	**CEFEP** S I R N	**CEFOT** S I R N	**CEFTAZ** S I R N	**CEFTRX** S I R N	**CIPRO** S I R N	**IMI** S I R N	**LEVO** S I R N	**MERO** S I R N
_____	***Pseudomonas aeruginosa***	**AMK** S I R N	**CEFEP** S I R N		**CEFTAZ** S I R N	**CIPRO** S I R N	**IMI** S I R N	**LEVO** S I R N	**MERO** S I R N	**PIP** S I R N
_____	***Stenotrophomonas maltophilia***	**TMZ** S I R N								

Pathogen #	Other Organisms									
_____	Organism 1 (specify) _____	_____ Drug 1 S I R N	_____ Drug 2 S I R N	_____ Drug 3 S I R N	_____ Drug 4 S I R N	_____ Drug 5 S I R N	_____ Drug 6 S I R N	_____ Drug 7 S I R N	_____ Drug 8 S I R N	_____ Drug 9 S I R N
_____	Organism 2 (specify) _____	_____ Drug 1 S I R N	_____ Drug 2 S I R N	_____ Drug 3 S I R N	_____ Drug 4 S I R N	_____ Drug 5 S I R N	_____ Drug 6 S I R N	_____ Drug 7 S I R N	_____ Drug 8 S I R N	_____ Drug 9 S I R N
_____	Organism 3 (specify) _____	_____ Drug 1 S I R N	_____ Drug 2 S I R N	_____ Drug 3 S I R N	_____ Drug 4 S I R N	_____ Drug 5 S I R N	_____ Drug 6 S I R N	_____ Drug 7 S I R N	_____ Drug 8 S I R N	_____ Drug 9 S I R N

AMK = amikacin
AMP = ampicillin
AMPSUL = ampicillin/sulbactam
CEFEP = cefepime
CEFOT = cefotaxime
CEFTAZ = ceftazidime
CEFTRX = ceftriaxone
CIPRO = ciprofloxacin
CLIND = clindamycin
DAPTO = daptomycin
ERYTH = erythromycin
GENT = gentamicin
IMI = imipenem
LEVO = levofloxacin
LNZ = linezolid
MERO = meropenem
OX = oxacillin
PENG = penicillin G
PIP = piperacillin
PIPTAZ = piperacillin / tazobactam
QUIDAL = quinupristin / dalfopristin
RIF = rifampin
TMZ = trimethoprim / sulfamethoxazole
VANC = vancomycin

Result codes:
S = susceptible I = intermediate
R = resistant N = not tested

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