



## Outpatient Procedure Component Monthly Denominators and Summary

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 \*required for saving

Facility ID: \_\_\_\_\_ \*Month/Year: \_\_\_\_\_ / \_\_\_\_\_

### Same Day Outcome Measures

\*Total number of admissions for the month: \_\_\_\_\_

### Prophylactic IV Antibiotic Timing

\*Number of admissions:

1. With an order for a prophylactic IV antibiotic that was administered on time: \_\_\_\_\_
2. With an order for a prophylactic IV antibiotic that was NOT administered on time: \_\_\_\_\_
3. With no order for a prophylactic IV antibiotic: \_\_\_\_\_

(Sum of 1, 2, and 3 should equal total number of admissions for the month)

### Surgical Site Infections Surveillance

\*Procedure Category (NHSN Code)\*: \_\_\_\_\_ \*Total Number of Admissions with a  
 Primary CPT Code in the Category†: \_\_\_\_\_

_____	_____
_____	_____
_____	_____
_____	_____

#### \*NHSN Codes for Procedure Categories:

BRST (Breast)	CHOL (Gallbladder)	COLO (Colon)	FX (Open reduction of fracture)
HER (Herniorrhaphy)	HPRO (Hip arthroplasty)	HYST (Abdominal hysterectomy)	KPRO (Knee arthroplasty)
LAM (Laminectomy)	VHYS (Vaginal hysterectomy)		

† Instructions and code mapping chart can be found on the tables of instructions for this form or in the NHSN Outpatient Procedure Component Protocol

### Custom Fields

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

### Comments

**Assurance of Confidentiality:** The voluntarily provided 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)).

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