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NHSN National Healthcare Safety Network

Surgical Site Infection (SSI)

*required for saving **required for completion

Facility ID:	Event #:
*Patient ID:	Social Security #:
Secondary ID:	Medicare #:
Patient Name, Last:	First: Middle:
*Gender: F M Other	*Date of Birth:
Sex at Birth: F M Unknown	Gender Identity (Specify):
Ethnicity (Specify):	Race (Specify):
*Event Type: SSI	*Date of Event:
*NHSN Procedure Code:	ICD-10-PCS or CPT Procedure Code:
*Date of Procedure:	*Outpatient Procedure: Yes No

*MDRO Infection Surveillance:

☐ Yes, this infection's pathogen & location are in-plan for Infection Surveillance in the MDRO/CDI Module

☐ No, this infection's pathogen & location are **not** in-plan for Infection Surveillance in the MDRO/CDI Module

*Date Admitted to Facility:	Location:

Event Details

*Specific Event:

☐ Superficial Incisional Primary (SIP)

☐ Superficial Incisional Secondary (SIS)

☐ Deep Incisional Primary (DIP)

☐ Deep Incisional Secondary (DIS)

☐ Organ/Space (specify site): _____

*Infection present at the time of surgery (PATOS): ☐ Yes ☐ No

*Specify Criteria Used (check all that apply):

Signs & Symptoms

☐ Drainage or material†
☐ Pain or tenderness
☐ Swelling or inflammation
☐ Erythema or redness
☐ Heat
☐ Fever
☐ Incision deliberately opened/drained
☐ Wound spontaneously dehisces
☐ Abscess
☐ Sinus tract
☐ Hypothermia
☐ Apnea
☐ Bradycardia
☐ Lethargy
☐ Cough
☐ Nausea
☐ Vomiting
☐ Dysuria

☐ Other evidence of infection found on invasive procedure, gross anatomic exam, or histopathologic exam †

☐ Other signs & symptoms†

Laboratory

☐ Organism(s) identified
☐ Culture or non-culture based testing not performed
☐ Organism(s) identified from blood specimen
☐ Organism(s) identified from ≥ 2 periprosthetic specimens
☐ Other positive laboratory tests†
☐ Imaging test evidence of infection

Clinical Diagnosis

☐ Physician diagnosis of this event type
☐ Physician institutes appropriate antimicrobial therapy†

†per specific site criteria

*Detected: ☐ A (During admission) ☐ P (Post-discharge surveillance)
☐ RF (Readmission to facility where procedure performed)
☐ RO (Readmission to facility other than where procedure was performed)

*Secondary Bloodstream Infection: Yes No	**Died: Yes No SSI Contributed to Death: Yes No
Discharge Date:	*Pathogens Identified: Yes No *If Yes, specify on pages 2-3.

*COVID-19: Yes No

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Pathogen #	Gram-positive Organisms							
	Staphylococcus coagulase-negative (specify species if available):	**CEFOX/OX** S R N	**VANC** S I R N					
	____*Enterococcus faecium* ____*Enterococcus faecalis* ____*Enterococcus* spp. (Only those not identified to the species level)	**DAPTO** S I/S-DD NS R N	**GENTHL**[§] S R N	**LNZ** S I R N	**VANC** S I R N			
	Staphylococcus aureus	**CEFOX/METH/OX** S R N	**CEFTAR** S S-DD I R N	**CIPRO/LEVO/MOXI** S I R N	**CLIND** S I R N	**DAPTO** S NS N	**DOXY/MINO** S I R N	**GENT** S I R N
		LNZ S R N	**RIF** S I R N	**TETRA** S I R N	**TMZ** S I R N	**VANC** S I R N		
Pathogen #	*Gram-negative Organisms*							
	Acinetobacter (specify species) _____	**AMK** S I R N	**AMPSUL** S I R N	**CEFEP** S I R N	**CEFTAZ/CEFOT/CEFTRX** S I R N	**CIPRO/LEVO** S I R N	**COL/PB** S R N	**DORI/MERO** S I R N
		DOXY/MINO S I R N	**GENT** S I R N	**IMI** S I R N	**PIPTAZ** S I R N	**TMZ** S I R N	**TOBRA** S I R N	
	Escherichia coli	**AMK** S I R N	**AMP** S I R N	**AMPSUL/AMXCLV** S I R N	**AZT** S I R N	**CEFAZ** S I R N	**CEFEP** S I/S-DD R N	**CEFOT/CEFTRX** S I R N
		CEFTAVI S R N	**CEFTAZ** S I R N	**CEFTOTAZ** S I R N	**CIPRO/LEVO/MOXI** S I R N	**COL/PB**[†] I R N	**DORI/IMI/MERO** S I R N	**DOXY/MINO/TETRA** S I R N
		ERTA S I R N	**GENT** S I R N	**IMIREL** S I R N	**MERVAB** S I R N	**PIPTAZ** S I R N	**TIG** S I R N	**TMZ** S I R N
		TOBRA S I R N						
	Enterobacter (specify species) _____	**AMK** S I R N	**AZT** S I R N	**CEFEP** S I/S-DD R N	**CEFOT/CEFTRX** S I R N	**CEFTAVI** S R N	**CEFTAZ** S I R N	**CEFTOTAZ** S I R N
		CIPRO/LEVO/MOXI S I R N	**COL/PB**[†] I R N	**DORI/IMI/MERO** S I R N	**DOXY/MINO/TETRA** S I R N	**ERTA** S I R N	**GENT** S I R N	**IMIREL** S I R N
		MERVAB S I R N	**PIPTAZ** S I R N	**TIG** S I R N	**TMZ** S I R N	**TOBRA** S I R N		

Pathogen #	Gram-negative Organisms (continued)	
	____*Klebsiella pneumoniae* ____*Klebsiella oxytoca* ____*Klebsiella aerogenes*	**AMK** S I R N · **AMPSUL/ AMXCLV** S I R N · **AZT** S I R N · **CEFAZ** S I R N · **CEFEP** S I/S-DD R N · **CEFOT/CEFTRX** S I R N · **CEFTAVI** S R N **CEFTAZ** S I R N · **CEFTOTAZ** S I R N · **CIPRO/LEVO/ MOXI** S I R N · **COL/PB**† I R N · **DORI/IMI/ MERO** S I R N · **DOXY/MINO/ TETRA** S I R N · **ERTA** S I R N **GENT** S I R N · **IMIREL** S I R N · **MERVAB** S I R N · **PIPTAZ** S I R N · **TIG** S I R N · **TMZ** S I R N · **TOBRA** S I R N
	Pseudomonas aeruginosa	**AMK** S I R N · **AZT** S I R N · **CEFEP** S I R N · **CEFTAVI** S R N · **CEFTAZ** S I R N · **CEFTOTAZ** S I R N · **CIPRO/LEVO** S I R N **COL/PB** S I R N · **DORI/IMI/MERO** S I R N · **GENT** S I R N · **PIPTAZ** S I R N · **TOBRA** S I R N
Pathogen #	Fungal Organisms	
	Candida (specify species if available) ______________	**ANID** S I R N · **CASPO** S I R N · **FLUCO** S S-DD R N · **MICA** S I R N · **VORI** S I R N
Pathogen #	Other Organisms	
	Organism 1 (specify) _____________	**Drug 1** S I R N · **Drug2** S I R N · **Drug3** 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 1 (specify) _____________	**Drug 1** S I R N · **Drug2** S I R N · **Drug3** 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 1 (specify) _____________	**Drug 1** S I R N · **Drug2** S I R N · **Drug3** 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

Result Codes

S = Susceptible I = Intermediate R = Resistant NS = Non-susceptible S-DD = Susceptible-dose dependent
N = Not tested
§ GENTHL results: S = Susceptible/Synergistic and R = Resistant/Not Synergistic
† Clinical breakpoints are based on CLSI M100-ED30:2020, Intermediate MIC ≤ 2 and Resistant MIC ≥ 4

Drug Codes:			
AMK = amikacin	CEFTAR = ceftaroline	GENT = gentamicin	OX = oxacillin
AMP = ampicillin	CEFTAVI = ceftazidime/avibactam	GENTHL = gentamicin –high level test	PB = polymyxin B
AMPSUL = ampicillin/sulbactam	CEFTOTAZ = ceftolozane/tazobactam	IMI = imipenem	PIPTAZ = piperacillin/tazobactam
AMXCLV = amoxicillin/clavulanic acid	CEFTRX = ceftriaxone	IMIREL = imipenem/relebactam	RIF = rifampin
ANID = anidulafungin	CIPRO = ciprofloxacin	LEVO = levofloxacin	TETRA = tetracycline
AZT = aztreonam	CLIND = clindamycin	LNZ = linezolid	TIG = tigecycline
CASPO = caspofungin	COL = colistin	MERO = meropenem	TMZ = trimethoprim/sulfamethoxazole
CEFAZ= cefazolin	DAPTO = daptomycin	MERVAB = meropenem/vaborbactam	TOBRA = tobramycin
CEFEP = cefepime	DORI = doripenem	METH = methicillin	VANC = vancomycin
CEFOT = cefotaxime	DOXY = doxycycline	MICA = micafungin	VORI = voriconazole
CEFOX= cefoxitin	ERTA = ertapenem	MINO = minocycline	
CEFTAZ = ceftazidime	FLUCO = fluconazole	MOXI = moxifloxacin	

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Custom Fields

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