

Surgical Site Infection (SSI)

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*required for saving **required for completion

Facility ID:		Event #:	
*Patient ID:		Social Security #:	
Secondary ID:		Medicare #:	
Patient Name, Last:		First:	Middle:
*Sex: F M		*Date of Birth:	
Ethnicity (Specify): Hispanic or Latino Not Hispanic or Latino Unknown Declined to respond		Race (Select all that apply): American Indian or Alaska Native Asian Black or African American Middle Eastern or North African Native Hawaiian or Pacific Islander White Unknown Declined to respond	
Language: (Specify)		Interpreter Needed: Yes No Declined to Respond Unknown	
*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) ☐ Deep Incisional Primary (DIP) ☐ Superficial Incisional Secondary (SIS) ☐ 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):			
<u>Signs & Symptoms</u>		<u>Laboratory</u>	
☐ Drainage or material [†]	☐ Sinus tract	☐ Organism(s) identified	
☐ Pain or tenderness	☐ Hypothermia	☐ Culture or non-culture based testing not performed	
☐ Swelling or inflammation	☐ Apnea	☐ Organism(s) identified from blood specimen	
☐ Erythema or redness	☐ Bradycardia	☐ Organism(s) identified from ≥ 2 periprosthetic specimens	
☐ Heat	☐ Lethargy	☐ Other positive laboratory tests [†]	
☐ Fever	☐ Cough		
☐ Incision deliberately opened/drained	☐ Nausea	☐ Imaging test evidence of infection	
☐ Wound spontaneously dehisces	☐ Vomiting	<u>Clinical Diagnosis</u>	
☐ Abscess	☐ Dysuria		
☐ Other evidence of infection found on invasive procedure, gross anatomic exam, or histopathologic exam [†]		☐ Physician diagnosis of this event type	
☐ Other signs & symptoms [†]		☐ 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 If Yes: ☐ Confirmed ☐ Suspected		
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)). Public reporting burden of this collection of information is estimated to average 14 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 H21-8, Atlanta, GA 30333, ATTN: PRA (0920-0666). CDC 57.120 (Front) Rev 7, v8.6		

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Pathogen #	Gram-positive Organisms								
	<i>Staphylococcus coagulase-negative</i> (specify species if available):	CEFOX/OX SRN VANC SIRN							
	_____ <i>Enterococcus faecium</i> _____ <i>Enterococcus faecalis</i> _____ <i>Enterococcus</i> spp. (Only those not identified to the species level)	DAPTO SS-DDNSR N GENTHL[§] SRN LNZ SIRN VANC SIRN							
	<i>Staphylococcus aureus</i>	CIPRO/LEVO/MOXI SIRN CEFOX/METH/OX SRN CEFTAR SS-DDIR CLIND SIRN DAPTO SNSN DOXY/MINO SIRN GENT SIRN LNZ SRN RIF SIRN TETRA SIRN TMZ SIRN VANC SIRN							
Pathogen #	Gram-negative Organisms								
	<i>Acinetobacter</i> (specify species) _____	AMK SIRN AMPSU L SIRN CEFTAZ/CEFOT/ CEFTRX SIRN CEFEP SIRN CIPRO/ LEVO SIRN COL/ PB SRN DORI/ MERO SIRN DOXY/ MINO SIRN GENT SIRN IMI SIRN PIPTA Z SIRN TMZ SIRN TOBRA SIRN							
	<i>Escherichia coli</i>	AMK SIR N AMP SIRN AMPSUL/ AMXCLV SIRN AZT SIRN CEFAZ SIRN CEFTAZ SIRN CEFOT/CEFTRX SIRN CEFE P S I/S- DDR N CEFTA VI SRN CEFTOTAZ SIRN CIPRO/LEVO/ MOXI SIRN COL/ PB[†] IRN DORI/IMI/ MERO SIRN DOXY/MINO/ TETRA SIRN ERTA SIR N GENT SIRN IMIREL SIRN MERVAB SIRN PIPTAZ SIRN TIG SIRN TMZ SIRN TOBR A SIR N							
	<i>Enterobacter</i> (specify species) _____	AMK SIRN AZT SIRN CEFTAZ SIRN CEFOT/CEFTRX SIRN CEFE P S I/S- DDR N CEFTA VI SRN CEFTOTA Z SIRN CIPRO/LEVO/ MOXI SIRN COL/ PB[†] IRN DORI/IMI/ MERO SIRN DOXY/MINO/ TETRA SIRN ERTA SIRN GENT SIRN IMIREL SIRN MERVAB SIRN PIPTAZ SIRN TIG SIRN TMZ SIRN TOBR A SIRN							

Pathogen #	Gram-negative Organisms (continued)										
	____ <i>Klebsiella pneumoniae</i>	AMK SIRN	AMPSUL/AMXCLV SIRN	AZT SIRN	CEFAZ SIRN	CEFTAZ SIRN	CEFOT/CEFTRX SIRN	CEFEP SIRN/SDDRN			
	____ <i>Klebsiella oxytoca</i>	CEFTAVI SIRN	CEFTOTAZ SIRN	CIPRO/LEVO/MOXI SIRN	COL/PB [†] SIRN	DORI/IMI/MERO SIRN	DOXY/MINO/TETRA SIRN	ERTA SIRN			
	____ <i>Klebsiella aerogenes</i>	GENT SIRN	IMIREL SIRN	MERVAB SIRN	PIPTAZ SIRN	TIG SIRN	TMZ SIRN	TOBRA SIRN			
	<i>Pseudomonas aeruginosa</i>	AMK SIRN	AZT SIRN	CEFTAZ SIRN	CEFEP SIRN	CEFTAVI SIRN	CEFTOTAZ SIRN	CIPRO/LEVO SIRN			
		COL/PB SIRN	DORI/IMI/MERO SIRN	GENT SIRN	PIPTAZ SIRN	TOBRA SIRN					
Pathogen #	Fungal Organisms										
	<i>Candida</i> (specify species if available) _____	ANID SIRN	CASPO SIRN	FLUCO SS-DDRN	MICA SIRN	VORI SIRN					
Pathogen #	Other Organisms										
	Organism 1 (specify) _____	Drug 1 SIRN	Drug2 SIRN	Drug3 SIRN	Drug 4 SIRN	Drug 5 SIRN	Drug 6 SIRN	Drug 7 SIRN	Drug 8 SIRN	Drug 9 SIRN	
	Organism 1 (specify) _____	Drug 1 SIRN	Drug2 SIRN	Drug3 SIRN	Drug 4 SIRN	Drug 5 SIRN	Drug 6 SIRN	Drug 7 SIRN	Drug 8 SIRN	Drug 9 SIRN	
	Organism 1 (specify) _____	Drug 1 SIRN	Drug2 SIRN	Drug3 SIRN	Drug 4 SIRN	Drug 5 SIRN	Drug 6 SIRN	Drug 7 SIRN	Drug 8 SIRN	Drug 9 SIRN	

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 _ / _ / _ _ / _ / _ _ / _ / _ _ / _ / _ _ / _ / _ _ / _ / _ _ / _ / _		
Comments			