Form Approved
OMB No. 0920-0666
Exp. Date: 12/31/2027
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NHSN
NATIONAL HEALTHCARE SAFETY NETWORK

NHSN
National Healthcare Safety Network

Primary Bloodstream Infection (BSI)

*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: 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: BSI	*Date of Event:
Post-procedure BSI: Yes No	Date of Procedure:
NHSN Procedure Code:	ICD-10-PCS or CPT Procedure Code:

*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:

Risk Factors

*If ICU/Other locations, Central line: Yes No *If Specialty Care Area/Oncology, Permanent central line: Yes No Temporary central line: Yes No *If NICU, Central line, including umbilical catheter Yes No Birth weight (grams)	**Check all that apply:** **Yes□ No□** *Any hemodialysis catheter present **Yes□ No□** *Extracorporeal life support present (ECLS or ECMO) **Yes□ No□** *Ventricular-assist device (VAD) present **Yes□ No□** *Known or suspected Munchausen Syndrome by Proxy during current admission **Yes□ No□** *Observed or suspected patient injection into vascular line(s) within the BSI infection window period **Yes□ No□** *Epidermolysis bullosa during current admission **Yes□ No□** *Matching organism is identified in blood and from a site-specific specimen, both collected within the infection window period and pus is present at one of the following vascular sites from which the specimen was collected: □ Arterial catheter □ Arteriovenous fistula □ Arteriovenous graft □ Atrial lines (Right and Left) □ Hemodialysis reliable outflow (HERO) catheter □ Intra-aortic balloon pump (IABP) device □ Non-accessed central line (not accessed inserted during the admission) □ Peripheral IV or Midline catheter Location of Device Insertion: _____ Date of Device Insertion: ___ /___ /_____

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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Event Details		
*Specific Event: Laboratory-confirmed		
*Specify Criteria Used:		
Signs & Symptoms (check all that apply)		
Any Patient	≤ 1 year old	Underlying conditions for MBI-LCBI (check all that apply):
□ Fever	□ Fever	□ Allo-SCT with Grade ≥ 3 GI GVHD
□ Chills	□ Hypothermia	□ Allo-SCT with diarrhea
□ Hypotension	□ Apnea	□ Neutropenia (WBC or ANC < 500 cells mm^3)
	□ Bradycardia	
		Laboratory (check one)
		□ Recognized pathogen from one or more blood specimens
		□ Common commensal from ≥ 2 blood specimens
**Died: Yes No		BSI 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		

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 S-DD NS R N	**GENTHL**[§] S R N	**LNZ** S I R N	**VANC** S I R N			
	Staphylococcus aureus	**CIPRO/LEVO/MOXI** S I R N	**CEFOX/METH/OX** S R N	**CEFTAR** S S-DD I R	**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	**CEFTAZ/CEFOT/CEFTRX** S I R N	**CEFEP** 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	**CEFTAZ** S I R N	**CEFOT/CEFTRX** S I R N
		CEFEP S I/S-DD R N	**CEFTAVI** S 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

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		TOBRA S I R N
	Enterobacter (specify species) ____________	**AMK** S I R N **AZT** S I R N **CEFTAZ** S I R N **CEFOT/CEFTRX** S I R N **CEFEP** S I/S-DD R N **CEFTAVI** S 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 **CEFTAZ** S I R N **CEFOT/CEFTRX** S I R N **CEFEP** S I/S-DD R N **CEFTAVI** S 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 **CEFTAZ** S I R N **CEFEP** S I R N **CEFTAVI** S 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 **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 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 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

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	CEFTRX = ceftriaxone	IMIREL = imipenem/relebactam	RIF = rifampin

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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	

Primary Bloodstream Infection (BSI)

Custom Fields

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

Comments