 **Surgical Site Infection (SSI) Case Review**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***Demographics*** | | | | | | | | | | | | | | | | | | | | | | | | |
| Patient ID | | | Service | | | | | | | | | Surgeon | | | | | | | | | | | Date of Surgery | |
| Age | Gender □ Male  □ Female | | | Source of Admission | | | | | | | | | | | | Admit Date | | | | | | | Discharge Date | |
| Principal Diagnosis | | | | | | | | | | | | Principal Procedure | | | | | | | | | | | | |
| ***Findings*** | | | | | | | | | | | | | | | | | | | | | | | | |
| Evidence for SSI (culture results with dates) | | | | | | | | | SSI Classification\*  □ Superficial  □ Deep  □ Organ/Space | | | | | | | | | | | | | | | Date of Diagnosis |
| ***Predisposing Factors*** | | | | | | | | | | | | | | | | | | | | | | | | |
| BMI | | Diabetes History  □ Yes  □ No | | | | Smoking History  □ Yes  □ No | | | | | Chronic Hemodialysis  □ Yes  □ No | | | | | | | | | + Nasal Culture  □ Yes  □ No □ Not done | | | | |
| Pre-operative Laboratory Values   |  | | --- | | Cr | | Alb | | TB | | WBC | | Hgb | | Hct | | Plt | | INR | | Blood Glucose | | HbA1c | | Lactate/Lactic Acid | | | | | | ASA Classification | | | | | Concomitant Infection  □ Yes  □ No  Type of Infection: | | | | | | | | | On Scheduled Antibiotics  Pre-operatively  □ Yes  □ No | | | | | |
| Surgical Priority**\***  □ Elective  □ Urgent  □ Emergent | | | | |
| Surgical Approach  □ Laparoscopic  □ Laparoscopic converted  to Open  □ Open  □ Robotic  □ Robotic converted to  Open | | | | | | | | | | Wound Classification**\***  □ Clean  □ Clean/Contaminated  □ Contaminated  □ Dirty | | | | | | Duration of Surgery  (surgery start time through surgery finish time)  \_\_\_\_\_\_\_\_\_ minutes  In Room Time \_\_\_\_\_\_\_\_\_\_\_  Out of Room Time\_\_\_\_\_\_\_\_ | | | |
| Intraoperative Hypotension**\***  □ Yes  □ No | | | | | | Blood Transfusion**\***  □ Yes  □ No | | | | | | | | | PCA  □ Yes  □ No | | | | | | Prosthetic Materials  □ Yes  □ No | | | |
| ***Perioperative Preventive Measures*** | | | | | | | | | | | | | | | | | | | | | | | | |
| Skin Antisepsis/Skin Prep (type) | | | | | | | | | | | | | | | | | | | | | | Mupirocin  □ Yes  □ No | | |
| Prophylactic Antibiotic(s) Administered | | | | | | | SCIP-Inf-1 Compliant**\***  □ Yes  □ No | | | | | | SCIP-Inf-2 Compliant**\***  □ Yes  □ No | | | | | Weight-based Dosing  □ Yes  □ No | | | | Redosing (procedure > 3 hrs)  □ Yes  □ No □ N/A | | |
| Intraoperative Normothermia**\***  □ Yes  □ No | | | | | | | | Intraoperative Normoglycemia**\***  □ Yes  □ No □ N/A | | | | | | | | | Oral Antibiotics (for colon procedures)  □ Yes  □ No □ N/A | | | | | | | |
| ***Event Determination*** | | | | | | | | | | | | | | | | | | | | | | | | |
| □ Not Preventable1 | | | | | | | | | | | | | | □ Possibly Preventable2 | | | | | | | | | | |

Reviewed by:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_Event Determination by:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_

(Physician Reviewer)

*\* See attachment for defining criteria*

Insert Your Hospital Confidentiality Statement

|  |  |
| --- | --- |
| ***Discussion Questions*** | ***Comments*** |
| □ Is case clean or contaminated?**\***  □ Is the organism cultured a skin contaminant or enteric?  □ Is the organism cultured drug resistant (example:  CRE)?  □ Was CHG used for skin prep?  □ Were appropriate antibiotics administered (SCIP-Inf-2  Compliant?\*  □ Were antibiotics given timely (SCIP-Inf-1 Compliant)?\*  □ Was appropriate antibiotic dose administered?  □ Was the patient redosed appropriately (if applicable)?  □ Was the patient’s intra-operative glycemic control  satisfactory?\*  □ Was intra-operative normothermia maintained?\*  □ Were oral antibiotics administered (if applicable)?  □ Could blood transfusion have been avoided (if  applicable)? |  |
| ***Big Picture Questions*** | ***Comments*** |
| □ Are our SSIs primarily due to skin contaminants or  enteric organisms?  □ Do we have a firm policy to culture all SSIs?  □ Is the problem primarily in emergent or elective cases?\*  □ Do we have a policy to use CHG-alcohol as skin prep?  □ Does our institution have an evidence-based policy  regarding intra-operative blood transfusion?  □ Do the SSIs seem localized to particular surgeon, or  operating room?  □ Do we have a concerted approach to increase bundle  compliance?  □ Do we need a policy of culturing nares pre-operatively  (if high volume of MRSA cases)?  □ Are our high-risk patients enrolled in an Enhanced  Recovery Program? |  |
| ***Additional Comments*** | |
|  | |

***Data Definitions:***

1 Not Preventable: SSI occurrence whereby the standard of care was met with ALL of the following:

1. Skin Disinfectant
2. SCIP-Inf-1 Compliant\*
3. SCIP-Inf-2 Compliant\*
4. Appropriate Weight-based dosing (if applicable)
5. Appropriate Redosing (if applicable)
6. Intra-operative Normothermia Maintained\*
7. Intra-operative Normoglycemia Maintained\*
8. Oral Antibiotics (if colon case)

2 Possibly Preventable: At least one identified process failure with opportunity for improvement

*\* See attachment for defining criteria*

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