Scenario 1

In the following scenario, what type of HAI criteria are met?

7/11 56-year-old male patient presents to the ED with severe nausea, vomiting and abdominal pain. CT noted diverticulitis with perforation and fluid collection in left upper quadrant.

7/12 Procedure/description: Exploratory laparotomy, partial colectomy with end colostomy (Hartmann's procedure), mobilization of splenic flexure, small bowel repair, incisional wound vac
Operative Note Findings: Large amount of small bowel involved in inflammation and abscess in the left upper quadrant.
Coding: COLO 0DBN0ZZ REC 0DBP0ZZ SB 0D1B0Z4

7/16 Surgeon Progress note: Pt states significant abdominal pain. Slight increase in erythema around incision. Serosanguinous drainage noted. Colostomy pink and perfused. No stool. Gas noted in bag.

7/17 Nurse Wound Surgical Abdomen Mid: Moderate, Milky, Thick, Green drainage.

Does the patient have an SSI? Yes
If this is an SSI, what procedure would this be attributed to? COLO
What is the surveillance period for this type of procedure (30 or 90 days)? 30 days
If this is an SSI, what is the deepest criteria met (superficial, deep, organ/space): Superficial Incisional Primary SSI
List all NHSN criteria met at this deepest level (examples SUTI 1b, OREP1, BONE 1): SIP a 7/17 purulence
If this is an SSI, is it PATOS? No, only if SSI was organ space
What is the Date of Event (DOE)? 7/17

Scenario 2

77-year-old female patient with a history of Crohn disease admitted for elective colectomy procedure.

7/10 Low anterior colon resection w/end colostomy placement. Coding: COLO 0D1N0Z4, COLO 0DBN0ZZ
7/13 No issues noted during patient admission. Discharged home.

7/18 Surgeon Office Visit
Subjective:
Patient returns for follow up post colon resection. She denies nausea, vomiting or severe abdominal pain. She notes an increase yesterday in clear drainage from the wound. No significant complaints other than wound.

Physical Assessment:
Normal other than Wound assessment:
Incision approximated. Peri-wound clean, moist, red, edema. No purulence noted.

Notes:
3 staples removed and wound probed and packed - no fascial dehiscence identified.
Small wound infection noted - staples removed, wound packed. Antibiotics prescribed.

Does the patient have an SSI? Yes
If this is an SSI, what procedure would this be attributed to? COLO
If this is an SSI, what is the deepest criteria met (superficial, deep, organ/space): Superficial Incisional Primary SSI
List all NHSN criteria met at this deepest level (examples SUTI 1b, OREP1, BONE 1):
SIP c 7/18 deliberate opening by a surgeon, no culture, localized swelling & erythema (7/18 Surgeon Office visit Physical assessment and Notes)
SIP d 7/18 diagnosis of a superficial incisional SSI by a physician (7/18 Surgeon Office Visit Note)
If this is an SSI, is it PATOS? No
What is the Date of Event (DOE)? 7/18