

## **Postoperative SSI Surveillance Telephone Script**

(Infection Prevention and Control use only)

<u>Instructions</u>: The Site ICP will contact the colorectal surgical patient between the hours of 0800 and 1630 hrs. The phone call is to be made no sooner than Day 30 postoperative. A minimum of two attempts will be made to contact the patient and the date and time will be recorded in the chart below.

Patient Name:	Phone Number:		
Date of Surgery (dd/mm/yyyy):			
Procedure:			
Dates Called (dd/mm/yyyy):			
Purpose of Call: Introduce yourself.			
Recently you had bowel surgery at and we would like to know how you have			
been feeling since then and whether you developed a surgical site infection.			
Did your surgical site heal fully with no problems? ☐ Yes ☐ No			
If Yes, thank them for their time and end call			
If No, continue with the script questions			
Do you have time to answer a few questions? The information you provide may help us to improve the			
quality of patient care in our hospital. Your answers will be kept confidential within the care team.			
SECTION A:			
Was there redness, heat and/or swelling around y	our surgical site?	□ Yes	□ No
Was there pus draining from your surgical site?		□□ Yes	□ No
Did you experience increased pain or tenderness	at your surgical site?	□□ Yes	□ No
Did you have fever or chills?		□□ Yes	□ No
SECTION B:		T	
Did you visit a clinic, doctor's office or emergency	<u> </u>	□□ Yes	□ No
problems with your incision within one month of y If 'Yes'.	our surgery?		
<ul><li>1. Were you prescribed an antibiotic? ☐ Yes</li></ul>	□ No		
1. Were you prescribed air antibiotic?   Tes			
SECTION C:			
Were you given the Client Fact Sheet - Preventir	ng Surgical Site	□□ Yes	□ No
Infections when discharged following surgery?			
00111			
SSI identified □			
No SSI identified □			