

Infection Prevention and Control

SURGICAL SITE INFECTION

Client:		
DOB (dd/m	nmm/yyyy):	
HRN/MH	ISC:	
PHIN#: _		
	Addressograph/Place Label Here	

	TIKIN / IVITISC.
REPORT FORM	PHIN#:
	Addressograph/Place Label Here
	Addressograph/Place Laber Here
Patient: Please take this form to the nearest healthcare fac	cility if you develop ONE or MORE of the
symptoms indicated below (do not complete yourself).	omity if you develop divid the fitting
symptome maleated below (as not complete yourself).	
Comptens that developed after comment.	
Symptoms that developed after surgery:	
Redness, heat, and/or swelling around the surgical sit	re
☐ Pus from the surgical site	
☐ Increased pain or tenderness at the surgical site	
☐ Chills/fever with a temperature greater than 38° Celsium	us
Surgeon: If the patient develops ONE or MORE of the sym	
this form and fax to the Regional Coordinators, Infection Pr	evention & Control at:
(204) 326-2969.	
Program/Unit where infection identified:	
☐ Acute Care	
 Outpatient Department/Emergency Department 	
☐ Personal Care Home	
☐ Home Care	
☐ Primary Health Care	
☐ Public Health	
☐ Post-operative follow-up appointment	
□ Other (specify)	
Llagnital whom a surrent partares of	
Hospital where surgery performed:	_
Data of curaory: Sympto	om onset date:
Date of surgery: Sympto	om onset date:(dd/mmm/yyyy)
(331111111)	(33,11111111111111111111111111111111111
Type of Surgery:	
☐ Cesarean Section	
☐ Open Colorectal	
☐ Total Hip Arthroplasty	
· · · · · · · · · · · · · · · · · · ·	
☐ Total Knee Arthroplasty	
Please complete page 2 of this form, and identify the typ	op of SSI
i lease complete page 2 or this form, and identify the typ	C OI JOI
Health Care Provider Signature	Date (dd/mmm/yyyy)
	(GG/1111111/JJJJ)



Infection Prevention and Control

SURGICAL SITE INFECTION REPORT FORM

Client:
DOB (dd/mmm/yyyy):
HRN / MHSC:
PHIN#:

Sı	erficial Incisional SSI
	nfection occurs within 30 days after the operative procedure (where day 1 = the procedure date) and involves
	nly skin and subcutaneous tissue of the incision
D-	with an at least ONE (4) of the fallowing w
	nt has at least ONE (1) of the following:
1)	Purulent drainage from the superficial incision;
2) 3)	 Organisms isolated from an <u>aseptically obtained culture of fluid or tissue</u> from the superficial incision; Superficial incision that is deliberately opened by a surgeon, attending physician, or other designate**
3)	AND is culture-positive or not cultured (Note: A culture-negative finding does not meet this criterion); AND
	patient has at least ONE (1) of the following signs or symptoms of infection:
	☐ Pain or tenderness ☐ Localized swelling ☐ Redness ☐ Heat
4)	Diagnosis of superficial SSI by surgeon, attending physician, or other designate**
,	
Re	orting instructions for Superficial SSI:
	Do not report a stitch abscess (minimal inflammation and discharge confined to the points of suture
	penetration) as an SSI.
	Do not report a localized stab wound or pin site infection as an SSI. Cellulitis (redness/warmth/swelling), by itself, does not meet the criteria for an SSI.
	The type of SSI (superficial incisional, deep incisional, or organ/space) reported should reflect the deepest
	tissue layer involved in the infection (e.g. report infection that involves the superficial and deep incisional
	sites as deep incisional SSI).
_	n Indiaional CCI
D	p Incisional SSI
	nfection that occurs within 30 days after the operative procedure or within 90 days if an implant is left in place
	offection that occurs within 30 days after the operative procedure or within 90 days if an implant is left in place where day 1 = the procedure date) and involves deep soft tissues of the incision (e.g. fascial and muscle
	nfection that occurs within 30 days after the operative procedure or within 90 days if an implant is left in place
□	offection that occurs within 30 days after the operative procedure or within 90 days if an implant is left in place where day 1 = the procedure date) and involves deep soft tissues of the incision (e.g. fascial and muscle gayers)
□ Pa 1)	The procedure within 30 days after the operative procedure or within 90 days if an implant is left in place where day 1 = the procedure date) and involves deep soft tissues of the incision (e.g. fascial and muscle ayers) Int has at least ONE (1) of the following: Purulent drainage from the deep incision;
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^{**}may be interpreted to mean nurse practitioner, midwife, or physician assistant.