

## **Surgical Wound Classification Table**

Classification	Description	Examples of Procedures
Class I: Clean Risk of infection: less than or equal to 2%	<ul> <li>Uninfected operative wound where respiratory, GI, genital, and urinary tracts aren't entered</li> <li>Wounds are primarily closed, and a drain (if needed) is connected to a closed system</li> <li>No inflammation is encountered</li> </ul>	<ul> <li>Exploratory laparotomy</li> <li>Eye surgery</li> <li>Hernia repair</li> <li>Mastectomy</li> <li>Thyroidectomy</li> <li>Total hip or knee replacement</li> <li>Vascular/cardiovascular procedures</li> </ul>
Class II: Clean/Contaminated Risk of infection: 5-15%	<ul> <li>Operative wound that enters the respiratory, GI, genital, or urinary tract under controlled conditions</li> <li>No major break in sterile technique</li> <li>No spillage</li> <li>No acute inflammation</li> </ul>	<ul> <li>Cesarean section</li> <li>Cholecystectomy (chronic inflammation)</li> <li>Colectomy</li> <li>Colostomy reversal</li> <li>Incidental or routine appendectomy</li> <li>Small bowel resection</li> <li>Transurethral resection of prostate (TURP)</li> <li>Vaginal hysterectomy</li> </ul>
Class III: Contaminated Risk of infection: greater than 15%	<ul> <li>Open, fresh, accidental wounds</li> <li>Operations with major breaks in sterile technique (e.g., open cardiac massage)</li> <li>Gross spillage from the GI tract</li> <li>Acute, non-purulent inflammation is encountered</li> <li>Necrotic tissue without evidence of purulent drainage (e.g., dry gangrene)</li> </ul>	<ul> <li>Bile spillage during cholecystectomy</li> <li>Bowel resection for infarcted or necrotic bowel</li> <li>Cholecystectomy or appendectomy for acute inflammation</li> </ul>
Class IV: Dirty/Infected Risk of infection: greater than 30%	<ul> <li>Old traumatic wounds with retained devitalized tissue</li> <li>Perforated viscera</li> <li>Presence of purulence or abscess</li> </ul>	<ul> <li>Incision and drainage (I&amp;D) of abscess</li> <li>Open fracture with prolonged time in the field before treatment</li> <li>Perforated bowel repair</li> <li>Perforated gastric ulcer</li> <li>Ruptured appendectomy</li> </ul>

Adopted from: Surgical Site Infection (SSI) Surveillance Protocol: Saskatchewan.