

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

Scenario #1

9/30 To OR for the following ICD-10 procedures:

0DB80ZZ Excision of small intestine open approach (SB)

0DBE0ZZ Excision of large intestine open approach (COLO)

OWPFOJZ Removal of synthetic substitute from abd wall (XLAP)

OWQFOZZ Repair abdominal wall open approach (HER)

10/5 progress note: abd tender to palpation on all quadrants. mild nausea

10/6 CT:

INDICATION: Subsequent encounter for intra-abdominal abscess after ventral hernia repair and small bowel resection.

IMPRESSION: Intra-abdominal fluid collection with rim enhancement along the right abdominal wall and tracks within the right paracolic gutter to the pelvic brim

10/7 Op report:

The procedure began by removing the staples at the midline, which was showing some fluid coming out of the skin approximation. Once inside the subcutaneous tissue, there was fat necrosis, as well as infected tissue and purulent-type drainage. The entire midline was then opened, exposing the fascia, which had a lot of necrosis and ischemic areas, as well as complete dehiscence of the midline, exposing the peritoneal cavity. This was all suspected to be a prefascial abscess in the subcutaneous tissue that likely caused the dehiscence. Attention turned to the perihepatic region. Easy palpation up into the right upper quadrant, felt the capsule, and once popping the capsule, had a lot of murky-type fluid come out. This was then cultured.

10/7 Peritoneal abscess culture: Gram Stain: Gram-negative rods. Culture: No growth

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): organ/space

List all NHSN criteria met at this deepest level (examples SUTI 1b, OREP1, BONE 1): o/s c (10/6 imaging test evidence suggestive of infection) and IAB 3a (10/5 abd tender, nausea, 10/7 organism seen on gram stain)

What is the Date of Event (DOE)? 10/5

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Scenario #2

9/5 To OR for the following CPT procedures

58573 Robotic Total lap hyst and bil salpingo-oophorectomy (HYST)

9/8 ED RN triage note: presents with abd pain and reports a fever yesterday at home of 102

9/8 ED physician note: Positive for dysuria, hematuria, pelvic pain. Empirical antibiotics started to cover MRSA and gram negative intraabdominal species with Vanc and Zosyn. CT ordered to rule out a pelvic abscess

9/8 Discharge summary: Patient left AMA before going for CT scan.

Does the patient have an SSI? Yes

If this is an SSI, what procedure would this be attributed to? HYST

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): organ space

List all NHSN criteria met at this deepest level (examples SUTI 1b, OREP1, BONE 1): o/s c (abd pain = other evidence of infection per FAQ) and OREP 3b (9/7 fever, 9/8 abd/pelvic pain, dysuria, 9/8 antibiotic started)

What is the Date of Event (DOE)? 9/7