This training is designed for those who will collect and analyze Patient Safety Component data or enroll a hospital into NHSN. This includes the following:
- NHSN Facility Administrator
- Patient Safety Primary Contact
- Infection Control Professional (ICP)
- Epidemiologist
- Microbiologist
- Pharmacist
- Data entry staff

This training is designed for those who will collect and analyze Patient Safety Component data or enroll a hospital into NHSN. This includes: NHSN facility administrators, Patient Safety Primary contact, infection control professionals or ICPs, epidemiologists, microbiologists, pharmacists and data entry staff.
Objectives

1. Describe the NHSN Procedure-associated Module

2. Review key terms and definitions of infection and data fields used for reporting surgical site infection (SSI) and post-procedure pneumonia (PPP) events

3. Define the rates obtained using this module
Procedure-associated Module Components

- Procedure-associated Module
- Surgical Site Infections
- Post Procedure Pneumonia
NHSN surveillance is the active, patient-based, prospective, priority-directed collection of data that results in risk-adjusted, incidence rates. The following slides will look at these characteristics in greater depth.
In the Procedure-associated module protocol, first the facility first chooses which procedures to monitor during a month and on which surgical patients (inpatients only, outpatients only, or both). Currently, the only procedures included in the protocol are “NHSN Operative Procedures”.

*Currently, the only procedures included in the protocol are “NHSN Operative Procedures”*
Second, the facility chooses which events—SSI, PPP, or both—will be monitored.
When following the Procedure-associated module protocol, enter the procedures and events into the Monthly Reporting Plan.

Remember, the Monthly Reporting Plan informs CDC which modules a facility is following during a given month.

A facility must enter a Plan for every month of the year, even those in which no modules are followed.

A facility may enter data only for months in which Plans are on file.

When following the Procedure-associated module protocol, enter the procedures and events chosen for surveillance during the month. Remember that the Monthly Reporting Plan informs CDC which modules a facility is following during a given month.

A facility must enter a Plan for every month of the year, even those in which no modules are followed.

A facility may enter data only for months in which Plans are on file.
Here is a screen shot of a Monthly Reporting Plan for a facility monitoring Device- and Procedure-associated events according to the protocols for a month. Using pull down menus you can clarify your plan, choosing the locations, modules, procedures and events that you will follow that month.
NHSN Operative Procedure

- An operative procedure …
  - Is performed on a patient who is an NHSN inpatient or an NHSN outpatient
  - Takes place during an operation where a surgeon makes a skin or mucous membrane incision (including laparoscopic approach) and primarily closes the incision before the patient leaves the operating room
  - Is represented by an NHSN operative procedure code
NHSN Operative Procedures

- Each NHSN operative procedure category consists of a group of ICD-9-CM codes
  
  Example: CBGB (CABG with chest and donor site incisions) = ICD-9 codes 36.10 – 36.14, 36.19

- When monitoring a specific NHSN operative procedure category, all the ICD-9 codes within that category that are done in your facility must be followed
NHSN Inpatient

- A patient whose date of admission to the healthcare facility and the date of discharge are different calendar days
NHSN Outpatient

- A patient whose date of admission to the healthcare facility and date of discharge are the same calendar day
Operating Room

- A patient care area that meets the American Institute of Architects (AIA) criteria for an operating room
- May include an operating room, c-section room, interventional radiology room, or cardiac cath lab
Examples of SSI Data Sources

- Microbiology reports
- Infection control rounds on nursing units
- Pharmacy reports for antimicrobial use
- Temperature chart
- Operating room report of surgeries
- Use post-discharge surveillance methods for SSI
Examples of SSI - Postdischarge Sources

- Readmission to hospital
- Emergency Department or Clinic records
- Health care system/HMO may have pharmacy records for antimicrobial agents
- Surgeon surveys – phone or mail
- Patient surveys – less reliable
Superficial Incisional SSI

Infection occurs within 30 days after the operative procedure and involves only skin and subcutaneous tissue of the incision and patient has at least one of the following:
- purulent drainage from the superficial incision.
- organisms isolated from an aseptically obtained culture of fluid or tissue from the superficial incision.
- at least one of the following signs or symptoms of infection: pain or tenderness, localized swelling, redness, or heat, and superficial incision is deliberately opened by surgeon, and is culture-positive or not cultured. A culture-negative finding does not meet this criterion.
- diagnosis of superficial incisional SSI by the surgeon or attending physician.
Deep Incisional SSI

Infection occurs within 30 days after the operative procedure if no implant is left in place or within one year if implant is in place and the infection appears to be related to the operative procedure and involves deep soft tissues (e.g., fascial and muscle layers) of the incision and patient has at least one of the following:

- purulent drainage from the deep incision but not from the organ/space component of the surgical site
- deep incision spontaneously dehisces or is deliberately opened by a surgeon and is culture-positive or not cultured when the patient has at least one of the following signs or symptoms: fever (>38°C), or localized pain or tenderness. A culture-negative finding does not meet this criterion.
- an abscess or other evidence of infection involving the deep incision is found on direct examination, during reoperation, or by histopathologic or radiologic examination
- diagnosis of a deep incisional SSI by a surgeon or attending physician.
Definitions

- **Superficial Incisional Primary (SIP)** – a superficial incisional SSI that is identified in the primary incision in the patient that has had an operation with one or more incisions (e.g., C-section incision or chest incision for CBGB)

- **Deep Incisional Primary (DIP)** – a deep incisional SSI that is identified in a primary incision in the patient that has had an operation with one or more incisions
Definitions

- **Superficial Incisional Secondary (SIS)** - a superficial incisional SSI that is identified in the secondary incision in the patient that has had an operation with more than one incision (e.g., donor site [leg] incision for CBGB)

- **Deep Incisional Secondary (DIS)** - a deep incisional SSI that is identified in the secondary incision in the patient that has had an operation with more than one incision (e.g., donor site [leg] incision for CBGB)
Infection occurs within 30 days after the operative procedure if no implant is left in place or within one year if implant is in place and the infection appears to be related to the operative procedure and infection involves any part of the body, excluding the skin incision, fascia, or muscle layers, that is opened or manipulated during the operative procedure and patient has at least one of the following:
- purulent drainage from a drain that is placed through a stab wound into the organ/space
- organisms isolated from an aseptically obtained culture of fluid or tissue in the organ/space
- an abscess or other evidence of infection involving the organ/space that is found on direct examination, during reoperation, or by histopathologic or radiologic examination
- diagnosis of an organ/space SSI by a surgeon or attending physician.
Organ/Space SSI

- Specific sites are assigned to organ/pace SSI to further identify the location of the infection.

- Example: Report appendectomy with subsequent subdiaphragmatic abscess as an organ/pace SSI at the intraabdominal specific site (SSI-IAB).
<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
<th>Abbreviation</th>
<th>Full Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>RONF</td>
<td>Osteomyelitis</td>
<td>JNT</td>
<td>Joint or bursa</td>
</tr>
<tr>
<td>BRST</td>
<td>Breast abscess or mastitis</td>
<td>LUNG</td>
<td>Other infections of the respiratory tract</td>
</tr>
<tr>
<td>CARD</td>
<td>Myocarditis or pericarditis</td>
<td>MED</td>
<td>Mediastinitis</td>
</tr>
<tr>
<td>DISC</td>
<td>Disc space</td>
<td>ORAL</td>
<td>Oral cavity</td>
</tr>
<tr>
<td>EAR</td>
<td>Ear, mastoid</td>
<td>OREP</td>
<td>Other reproductive tract</td>
</tr>
<tr>
<td>EMET</td>
<td>Endometritis</td>
<td>OUTI</td>
<td>Other urinary tract</td>
</tr>
<tr>
<td>ENDO</td>
<td>Endocarditis</td>
<td>SA</td>
<td>Spinal abscess without meningitis</td>
</tr>
<tr>
<td>EYE</td>
<td>Eye, other than conjunctivitis</td>
<td>SINU</td>
<td>Sinusitis</td>
</tr>
<tr>
<td>GIT</td>
<td>GI tract</td>
<td>UR</td>
<td>Upper respiratory tract</td>
</tr>
<tr>
<td>IAB</td>
<td>Intraabdominal, NOS</td>
<td>VASC</td>
<td>Arterial or venous</td>
</tr>
<tr>
<td>IC</td>
<td>Intracranial, brain abscess or dura</td>
<td>VCUF</td>
<td>Vaginal cuff</td>
</tr>
</tbody>
</table>
SSI Numerator Data

- Use Surgical Site Infection (SSI) form for each SSI that is identified during the month
- Indicate the specific site of the SSI
  - SIP
  - DIP
  - SIS
  - DIS
  - Organ/Space
Pathogen Data

- List up to 3 pathogens for each SSI identified (in rank order of importance)
- For each pathogen, complete information about antimicrobial susceptibilities
- Only certain bug/drug combinations are required, but up to 20 drugs can be listed with susceptibilities
**Completed SSI Pathogen Form**

**Surgical Site Infection (SSI) Form**

<table>
<thead>
<tr>
<th>Pathogen #</th>
<th>Gram-negative Organisms</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td><strong>Staphylococcus aureus</strong></td>
</tr>
<tr>
<td></td>
<td>Clind</td>
</tr>
<tr>
<td></td>
<td>🟥</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Pathogen #</th>
<th>Gram-negative Organisms</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Acinetobacter spp.</td>
</tr>
<tr>
<td></td>
<td>Amik</td>
</tr>
<tr>
<td></td>
<td>🟥</td>
</tr>
</tbody>
</table>

<table>
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</thead>
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</tr>
<tr>
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</tr>
<tr>
<td></td>
<td>🟥</td>
</tr>
</tbody>
</table>

<table>
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</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Acinetobacter spp.</td>
</tr>
<tr>
<td></td>
<td>Amik</td>
</tr>
<tr>
<td></td>
<td>🟥</td>
</tr>
</tbody>
</table>
**Completed SSI Data Entry Screen**

Event 2487143 saved successfully.

Mandatory fields marked with *
Fields required for record completion marked with **
Fields required when in Plan marked with >

<table>
<thead>
<tr>
<th>Field</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility ID*</td>
<td>DHQP Memorial Hospital (10000)</td>
</tr>
<tr>
<td>Event ID*</td>
<td>36912</td>
</tr>
<tr>
<td>Social Security #</td>
<td></td>
</tr>
<tr>
<td>First Name*</td>
<td>Green</td>
</tr>
<tr>
<td>Middle Name</td>
<td></td>
</tr>
<tr>
<td>Last Name*</td>
<td></td>
</tr>
<tr>
<td>Gender**</td>
<td>M - Male</td>
</tr>
<tr>
<td>Date of Birth*</td>
<td>03/11/1962</td>
</tr>
<tr>
<td>Race**</td>
<td>American Indian/Alaska Native</td>
</tr>
<tr>
<td>X Black or African American</td>
<td></td>
</tr>
<tr>
<td>Asian</td>
<td></td>
</tr>
<tr>
<td>Native Hawaiian/Other Pacific Islander</td>
<td></td>
</tr>
<tr>
<td>Event Type**</td>
<td>SSI - Surgical Site Infection</td>
</tr>
<tr>
<td>Date of Event**</td>
<td>10/25/2009</td>
</tr>
<tr>
<td>NSN Procedure Code**</td>
<td>COLO - Colon surgery</td>
</tr>
<tr>
<td>ICD-9-CM Code**</td>
<td>Outpatient* N: No</td>
</tr>
</tbody>
</table>
| Procedure Date*        | 10/12/2009                      | Event Linked
**Completed SSI Data Entry Screen**

**Pathogens**

<table>
<thead>
<tr>
<th>Pathogen 1:</th>
<th></th>
<th>*10 drugs required</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Drug</strong></td>
<td><strong>Result</strong></td>
<td></td>
</tr>
<tr>
<td>OX - Oxacillin</td>
<td>R - Resistant</td>
<td></td>
</tr>
<tr>
<td>DAPTO - Daptomycin</td>
<td>N - Not Tested</td>
<td></td>
</tr>
<tr>
<td>CLIND - Clindamycin</td>
<td>R - Resistant</td>
<td></td>
</tr>
<tr>
<td>GENT - Gentamicin</td>
<td>R - Resistant</td>
<td></td>
</tr>
<tr>
<td>ERYTH - Erythromycin</td>
<td>R - Resistant</td>
<td></td>
</tr>
<tr>
<td>LINZ - Linzolid</td>
<td>N - Not Tested</td>
<td></td>
</tr>
<tr>
<td>QUEMAL - Quinupristin/dalfopristin</td>
<td>N - Not Tested</td>
<td></td>
</tr>
<tr>
<td>RIF - Rifampin</td>
<td>S - Susceptible</td>
<td></td>
</tr>
<tr>
<td>TMZ - Trimethoprim/sulfamethoxazole</td>
<td>S - Susceptible</td>
<td></td>
</tr>
<tr>
<td>VANC - Vancomycin</td>
<td>S - Susceptible</td>
<td></td>
</tr>
</tbody>
</table>

**Pathogen 2:**

**Add Rows**
Data Sources for Denominators - Procedures

- Operating room record review - patient medical record
- OR logs
- ICD-9-CM procedure codes
SSI Denominator Data

- Complete a Denominator for Procedure form for each procedure that is selected for surveillance

  - Example: If you are monitoring APPY, complete a Denominator for Procedure form for every patient that has an appendectomy during the month
SSI Denominator Data

- Some operative procedures have more than one incision
  - Example: CBGB in which an incision to harvest a donor vessel is made that is separate from the primary incision

- Record these procedures only one time – there is no separate procedure code for the donor harvest site
Duration

- Record the hours and minutes between the skin incision and skin closure
- Do not record anesthesia time
- If the patient goes to the OR more than once during the same admission and another procedure is performed through the same incision within 24 hours of the original incision, report the combined duration of operation for both procedures
Wound Classification

- **Clean (I)**
  - Uninfected wound, no inflammation; respiratory, alimentary, genital, or uninfected urinary tracts not entered; primarily closed; closed drainage, if needed

- **Clean contaminated (II)**
  - Respiratory, alimentary, genital, or urinary tracts entered under controlled conditions and without unusual contamination; include operations on biliary tract, appendix, vagina, oropharynx
Wound Classification Cont’d.

- **Contaminated (III)**
  - Open, fresh, accidental wounds; major breaks in sterile technique or gross spillage from GI tract; includes incisions into acute, nonpurulent inflamed tissues

- **Dirty / Infected (IV)**
  - Old traumatic wounds with retained devitalized tissue and those that involve existing clinical infection or perforated viscera
ASA* Class

1 = Normally healthy patient
2 = Patient with mild systemic disease
3 = Patient with severe systemic disease that is not incapacitating
4 = Patient with an incapacitating systemic disease that is a constant threat to life
5 = Moribund patient not expected to survive for 24 hours with or without operation

*American Society of Anesthesiologists
Endoscope

- If the entire operative procedure was performed using an endoscope/laparoscope, select “Yes”
- Otherwise select “No”
- For CBGB, if the donor vessel was harvested using a laparoscope, select “Yes”
Implant

- A nonhuman-derived implantable foreign body (e.g., prosthetic heart valve, hip prosthesis) that is permanently placed in a patient during an NHSN operative procedure and is not routinely manipulated for diagnostic or therapeutic purposes.
- Screws, wires, and mesh that are left in place are considered implants.
Some products are a combination of human- and nonhuman-derived materials, such as demineralized human bone matrix with porcine gel carrier. When placed in a patient during an operative procedure, indicate “Yes” for both the Implant and Non-autologous Transplant fields.

Some operative procedures involve placement of both autologous and non-autologous products. For these procedures, indicate “Yes” for Non-autologous Transplant field.
More …

- Emergency
  - Nonelective, unscheduled operative procedure
- Trauma
  - Operative procedure performed because of blunt or penetrating injury to patient
- General anesthesia
  - Administration of drugs or gases that enter the general circulation and affect the central nervous system to render the patient pain-free, amnesic, unconscious, and often paralyzed with relaxed muscles
Surgeon Code

- Optional field
- Select the code of the surgeon who performed the principal operative procedure
### Completed Denominator for Procedure Form

<table>
<thead>
<tr>
<th>Patient Information</th>
<th>Procedure Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facility ID: DHQP Memorial Hospital (10000)</td>
<td>NHSN Procedure Code: COLO - Colon surgery</td>
</tr>
<tr>
<td>Patient ID: 200912</td>
<td>SCD-9-DM Code:</td>
</tr>
<tr>
<td>Social Security #: Green</td>
<td>Procedure Date: 10/22/2009</td>
</tr>
</tbody>
</table>
Completed Procedure Data Entry Screen

Patient Information
- Facility ID: DHOP MEMORIAL HOSPITAL (ID: 10018)
- Procedure #: 6237
- Patient ID: 457901
- Social Security #: [Redacted]
- Last Name: Jackson
- First Name: Gerald
- Gender: M - Male
- Date of Birth: 11/06/1945

Procedure Information
- Procedure Code: [Redacted]
- ICD-9-CM Code: [Redacted]
- Procedure Date: 06/06/2006

Procedure Details

Log Out
# Completed Procedure Data Entry Screen - Cont’d.

## Procedure Details

- **Outpatient**: N - No
- **Wound Class**: C - Clean
- **ASA Class**: 2 - Patients with severe systemic disease not limiting activity
- **Emergency**: N - No
- **Trauma**: N - No
- **Endoscope**: N - No

## Custom Fields

### Comments

![Comments Field]

[Save] [Back]
SSI Rate

\[
\text{SSI Rate} = \frac{\text{# SSI in patients during specified time}^*}{\text{# operations during specified time}} \times 100
\]

* Stratify by:
  - Type of NHSN operative procedure
  - NNIS basic or modified risk index
For each patient that has a specific NHSN procedure, assign a risk index based on the following:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Operation &gt; duration cut point</td>
<td>1 point</td>
</tr>
<tr>
<td>Wound class III or IV</td>
<td>1 point</td>
</tr>
<tr>
<td>ASA score ≥ 3</td>
<td>1 point</td>
</tr>
</tbody>
</table>
### Example of Assigning Risk Index Categories

<table>
<thead>
<tr>
<th>Elements</th>
<th>Pt #1</th>
<th>Pt #2</th>
<th>Pt #3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operation &gt; duration cut point</td>
<td>Y</td>
<td>N</td>
<td>Y</td>
</tr>
<tr>
<td>Wound class</td>
<td>IV</td>
<td>I</td>
<td>II</td>
</tr>
<tr>
<td>ASA score</td>
<td>4</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>NHSN Risk Index category</td>
<td>3</td>
<td>0</td>
<td>1</td>
</tr>
</tbody>
</table>
### Surgical Patient Component
SSI Rates by Operation & Risk Index

Table 24. SSI rates following inpatient coronary artery bypass graft procedure, by risk index category and specific site, PA module 2006 through 2007.

<table>
<thead>
<tr>
<th>Risk index category</th>
<th>%</th>
<th>No. SSI</th>
<th>Rate</th>
<th>%</th>
<th>No. SSI</th>
<th>Rate</th>
<th>%</th>
<th>No. SSI</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Secondary (donor site)</td>
<td>1</td>
<td>362</td>
<td>0.77</td>
<td>1</td>
<td>266</td>
<td>1.49</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Superficial incisional</td>
<td>1</td>
<td>0</td>
<td>0.00</td>
<td>0</td>
<td>0</td>
<td>0.00</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Deep incisional</td>
<td>0</td>
<td>0</td>
<td>0.00</td>
<td>0</td>
<td>0</td>
<td>0.00</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary (chest site)</td>
<td>2</td>
<td>1837</td>
<td>2.19</td>
<td>581</td>
<td>3.39</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Superficial incisional</td>
<td>1</td>
<td>1</td>
<td>0.10</td>
<td>1</td>
<td>0.10</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Deep incisional</td>
<td>0</td>
<td>0</td>
<td>0.00</td>
<td>0</td>
<td>0</td>
<td>0.00</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Organ space</td>
<td>0</td>
<td>0</td>
<td>0.00</td>
<td>0</td>
<td>0</td>
<td>0.00</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>3</td>
<td>1399</td>
<td>2.96</td>
<td>767</td>
<td>4.08</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

NOTE: Denominators for the risk categories are as follows: category 0 = 15,062; category 1 = 472,724; category 2 = 13,576.
2SB coronary artery bypass graft with primary (chest) and secondary (donor) incisions.
*For 1B operations.

NHSN Report 2008; AJIC Jun 37(5) 425
PPP Numerator Data

- Hospital-associated pneumonia that occurs in a post-operative inpatient
- Using the Pneumonia form, indicate the type and date of operative procedure
- Indicate the specific type of pneumonia
  - PNU1 – Clinically defined pneumonia
  - PNU2 – Pneumonia with common bacterial pathogens
  - PNU3 - Pneumonia in immunocompromised patients
PPP Numerator Data

- Indicate presence or absence of ventilator, secondary BSI, death

- Do not conduct post-discharge surveillance, report those detected only during initial hospitalization

- Do not report PPP following outpatient operative procedures
Pathogen Data

- List up to 3 pathogens for each PPP identified (in rank order of importance)
- For each pathogen, complete information about antimicrobial susceptibilities
- Only certain bug/drug combinations are required but up to 20 drugs can be listed with susceptibilities
### Completed PNEU Form

<table>
<thead>
<tr>
<th>Patient ID: 203/68</th>
<th>Social Security #:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Secondary ID:</td>
<td></td>
</tr>
<tr>
<td><strong>Patient Name, Last:</strong> Green</td>
<td><strong>First:</strong> Kelly</td>
</tr>
<tr>
<td>Gender: <strong>F</strong></td>
<td>Race (Specify):</td>
</tr>
<tr>
<td><strong>Date of Birth:</strong></td>
<td>Race (Specify):</td>
</tr>
<tr>
<td><em>Event Type: PNEU</em></td>
<td><em>Date of Event: 9/30/09</em></td>
</tr>
<tr>
<td><em>Post-procedure PNEU:</em> Yes</td>
<td>Date of Procedure: 9/12/09</td>
</tr>
<tr>
<td>MDRO Infection Surveillance: □ Yes, this event’s pathogen &amp; location are in-plan for the MDRO/CDAD Mor No, this event’s pathogen &amp; location are not in-plan for the MDRO/CDAD Mor</td>
<td></td>
</tr>
<tr>
<td><em>Date Admitted to Facility:</em></td>
<td><em>Location:</em></td>
</tr>
<tr>
<td>Risk Factors:</td>
<td></td>
</tr>
<tr>
<td>Ventilator: Yes</td>
<td>Location of Device Insertion: <strong>RIJ</strong></td>
</tr>
<tr>
<td><strong>Date of Device Insertion:</strong> 9/12/2009</td>
<td></td>
</tr>
<tr>
<td><em>For NICU only:</em> Birth weight: ________ grams</td>
<td></td>
</tr>
<tr>
<td>Event Details:</td>
<td></td>
</tr>
<tr>
<td><strong>Specific Event:</strong> Yes PNU1 □ PNU2 □ PNU3</td>
<td>Immunocompromised: Yes No X</td>
</tr>
<tr>
<td><strong>Specify Criteria Used:</strong> (check all that apply)</td>
<td></td>
</tr>
<tr>
<td>X-Ray:</td>
<td></td>
</tr>
<tr>
<td>□ New or progressive and persistent infiltrate</td>
<td>□ Consolidation □ Cavitation □ Pneumatoceles (in)</td>
</tr>
</tbody>
</table>
### Completed PPP Data Entry Screen

#### Patient Information
- **Facility ID**: DHQ Memorial Hospital (ID 10018)
- **Event #**: 6235
- **Patient ID**: 457801
- **Social Security #:**
- **Last Name**: Jackson
- **Middle Name**:
- **First Name**: Gerald
- **Gender**: M - Male
- **Date of Birth**: 11/06/1945

#### Event Information
- **Type**: PNEU - Pneumonia
- **Date of Event**: 06/12/2006
- **Procedure**: Cardiac surgery
- **Code**:

---

**Event is not Linked**
Completed PPP Data Entry Screen- Cont’d.
Completed PPP Data Entry Screen - Cont’d.

**Custom Fields**
- INTUBATION: 06/08/2006
- INTUBATOR: PETERS

**Pathogens**
- Pathogen 2: 
- Pathogen 3: 

**Antibiotics**
- MERO - Meropenem
- LEVO - Levofloxacin
- P'THAL - Piperacillin/tazobactam
**Outpatient Surgery Procedure**

**Centers for Disease Control and Prevention**

---

**Mandatory fields marked with **

Fields required when in Plan marked with >

---

**Patient Information**

- **Facility**:
  - Site: Saint John's Hospital (10000)

- **Patient**:
  - Gender: M = Male
  - Mobile: 555-555-5555
  - Date of Birth: 06/13/1996

**Procedure Information**

- **ICD-9-CM Code**:
  - Procedure Group: COLO - Colon Surgery

**Procedure Details**

- **Outpatient**:
  - Duration (hrs, min): 1:00
  - Inhaled Anesthetics: Y = Yes
  - General Anesthesia: Y = Yes
  - Preop. Blood Transfusions: N = No

---

**Surgeon Code**:

- **Dr. Smith**, Hospital Dept.

- **Multiple Procedures**:
  - Y = Yes

- **Non-autologous Transplant**:
  - N = No
PPP Rate

\[
\text{PPP Rate}\* = \frac{\# \text{ PPP identified}}{\# \text{ of operative procedures}} \times 100
\]

\* Stratify by type of NHSN operative procedure
For more information about these topics, you can visit the NHSN Website.

References

- For more information about these topics, refer to the NHSN website
  - [http://www.cdc.gov/nhsn/](http://www.cdc.gov/nhsn/)
    - Tables of instruction for completing all forms
    - Key terms
    - Operative procedure codes
- NHSN data collection forms