

# 2026 NHSN Surgical Site Infection (SSI) Checklist

## Surgical Site Infection (SSI) Documentation Review Checklist

### Definition of an NHSN Operative Procedure

An NHSN Operative Procedure is a procedure:

- that is included in the [ICD-10-PCS](#) and/or [CPT](#) NHSN operative procedure code mapping  
**And**
- takes place during an operation where at least one incision (including laparoscopic approach and cranial Burr holes) is made through the skin or mucous membrane, or entry is through an existing incision (such as an incision from a prior operative procedure)  
**And**
- takes place in an operating room (OR), defined as a patient care area that met the Facilities Guidelines Institute's (FGI) or American Institute of Architects' (AIA) criteria for an operating room when it was constructed or renovated. This may include an operating room, C-section room, interventional radiology room, or a cardiac catheterization lab.

### PROCEDURE DETAILS:

Date of NHSN Operative Procedure (start of SSI surveillance period): \_\_\_\_\_

ICD-10-PCS/CPT Operative Procedure Code(s) Assigned: \_\_\_\_\_

NHSN Operative Procedure Category(ies) (COLO, HYST, etc.):  
\_\_\_\_\_

### SSI EVENT DETAILS:

Criterion	Criterion Met	Date of Event	Procedure of Attribution	PATOS
SIP	<input type="checkbox"/>			
SIS	<input type="checkbox"/>			
DIP	<input type="checkbox"/>			
DIS	<input type="checkbox"/>			
O/S	<input type="checkbox"/>			

If O/S SSI, specify site-specific criteria met: \_\_\_\_\_

Please refer to [Chapter 9 Surgical Site Infection \(SSI\) Event](#) of the Patient Safety Manual for additional information.

Surgical Site Infection (SSI)		
Superficial incisional SSI (SIP, SIS)		
Element	Element Met	Date
Must meet the following criteria:		
Date of event occurs within 30 days following the NHSN operative procedure (where day 1 = the procedure date)	<input type="checkbox"/>	
<b>AND</b>		
involves only skin and subcutaneous tissue of the incision	<input type="checkbox"/>	
<b>AND</b> Patient has at least <b>one</b> of the following:		
a. purulent drainage from the superficial incision.	<input type="checkbox"/>	
b. organisms identified from an aseptically obtained specimen from the superficial incision or subcutaneous tissue by a culture or non-culture based microbiologic testing method, which is performed for purposes of clinical diagnosis or treatment (for example, not Active Surveillance Culture/Testing [ASC/AST]).	<input type="checkbox"/>	
c. a superficial incision that is deliberately opened, re-accessed or aspirated by a surgeon, physician* or physician designee	<input type="checkbox"/>	
<b>AND</b>		
the surgeon, physician*, or physician designee initiates or continues antibiotic or antifungal therapy <b>on or in the two calendar days following the date of deliberate opening, re-access, aspiration</b> with a duration of two calendar days or longer		
<b>AND</b>		
patient has at least one of the following signs or symptoms:		
<ul style="list-style-type: none"> <li>new or worsening localized pain or tenderness</li> <li>localized swelling</li> <li>erythema</li> <li>heat</li> </ul>		
d. diagnosis of a superficial incisional SSI by a physician* or physician designee.	<input type="checkbox"/>	
*The term physician for the purpose of application of the NHSN SSI criteria may be interpreted to mean a surgeon, infectious disease physician, emergency physician, other physician on the case, or physician's designee (Advanced Practice Nurse [APN] or Physician's Assistant [PA]).		
<b>Comments:</b>		
There are two specific types of superficial incisional SSIs:		
<ol style="list-style-type: none"> <li>1. Superficial Incisional Primary (SIP) – a superficial incisional SSI that is identified in the primary incision in a patient that has had an operation with one or more incisions (for example, C-section incision or chest incision for CBGB)</li> <li>2. Superficial Incisional Secondary (SIS) – a superficial incisional SSI that is identified in the secondary incision in a patient that has had an operation with more than one incision (for example, donor site incision for CBGB)</li> </ol>		
<b>Note:</b> Refer to SSI Event Reporting Instruction #7 within <a href="#">Chapter 9 Surgical Site Infection (SSI) Event</a> for NHSN operative procedure categories with secondary incision sites available for SSI attribution.		
<b>Reporting Instructions for Superficial incisional SSI:</b>		
<b>The following do not qualify as criteria for meeting the NHSN definition of superficial incisional SSI:</b>		
<ul style="list-style-type: none"> <li>• Diagnosis/treatment of cellulitis ALONE does not meet superficial incisional SSI criterion 'd'.</li> <li>• A stitch abscess ALONE (minimal inflammation and discharge confined to the points of suture penetration/staple penetration site).</li> </ul>		

- A localized stab wound or pin site infection; depending on the depth. These infections might be considered either an HAI skin (SKIN) or soft tissue (ST) infection.

**Notes:**

- For the purpose of NHSN surveillance, the term “incision” refers to the incision made for the primary surgical procedure and the term “stab wound” refers to an incision made at another site, generally to accommodate a drain.
- For an NHSN operative procedure, a laparoscopic trocar site is considered a surgical incision and not a stab wound. If a surgeon uses a laparoscopic trocar site to place a drain at the end of a procedure this is considered a surgical incision.

**Reviewer Notes/Comments:**

Surgical Site Infection (SSI)		
Deep incisional SSI (DIP, DIS)		
Element	Element Met	Date
Must meet the following criteria:		
Date of event occurs within 30 or 90 days following the NHSN operative procedure (where day 1 = the procedure date) according to the list in <a href="#">Table 2</a> (see below)	<input type="checkbox"/>	
<b>AND</b>		
involves deep soft tissues of the incision (for example, fascial and muscle layers)	<input type="checkbox"/>	
<b>AND</b> Patient has at least <b>one</b> of the following:		
a. purulent drainage from the deep incision.	<input type="checkbox"/>	
b. organism(s) identified from the deep soft tissues of the incision by a culture- or nonculture- based microbiologic testing method which is performed for purposes of clinical diagnosis or treatment (for example, not Active Surveillance Culture/Testing [ASC/AST])	<input type="checkbox"/>	
c. a deep incision that is deliberately opened <sup>†</sup> , re-accessed, or aspirated by a surgeon, physician‡ or physician designee or spontaneously dehisces <sup>¶</sup>	<input type="checkbox"/>	
<b>AND</b> the surgeon, physician‡, or physician designee initiates or continues antibiotic or antifungal therapy <b>on or in the two calendar days following the date of deliberate opening, re-access, aspiration or spontaneous dehiscence</b> with a duration of two calendar days or longer		
<b>AND</b> patient has at least <b>one</b> of the following signs or symptoms: <ul style="list-style-type: none"><li>• fever (&gt;38°C)</li><li>• new or worsening localized pain or tenderness</li></ul>		
d. an abscess or other evidence of infection involving the deep incision detected on gross anatomical exam, histopathologic exam, or imaging test.	<input type="checkbox"/>	
<sup>†</sup> Excludes any known multi-part/multi-phase procedures that occur over more than one operative episode (during the same admission) that is documented in the medical record by a surgeon prior to or during the first operative procedure (for example, a plan to return to OR that is documented in the operative narrative of the first procedure would be eligible for use).		
<sup>‡</sup> The term physician for the purpose of application of the NHSN SSI criteria may be interpreted to mean a surgeon, infectious disease physician, emergency physician, other physician on the case, or physician's designee (Advanced Practice Nurse [APN] or Physician's Assistant [PA]).		
<sup>¶</sup> Spontaneous dehiscence is defined as a re-opening of a surgical incision that is not due to external factors such as direct trauma.		
<b>Comments:</b> There are two specific types of deep incisional SSIs:		
1. Deep Incisional Primary (DIP) – a deep incisional SSI that is identified in a primary incision in a patient that has had an operation with one or more incisions (for example, C-section incision or chest incision for CBGB)		
2. Deep Incisional Secondary (DIS) – a deep incisional SSI that is identified in the secondary incision in a patient that has had an operation with more than one incision (for example, donor site incision for CBGB)		
<b>Note:</b> Refer to SSI Event Reporting Instruction #7 within <a href="#">Chapter 9 Surgical Site Infection (SSI) Event</a> for NHSN operative procedure categories with secondary incision sites available for SSI attribution.		

**Reviewer Notes/Comments:**

<b>Surgical Site Infection (SSI)</b>		
<b>Organ/Space SSI (O/S)</b>		
<b>Element</b>	<b>Element Met</b>	<b>Date</b>
Must meet the following criteria:		
Date of event occurs within 30 or 90 days following the NHSN operative procedure (where day 1 = the procedure date) according to the list in <a href="#">Table 2</a> (see below)	<input type="checkbox"/>	
<b>AND</b>		
involves the organ/space tissues (deeper than the fascia/muscle)	<input type="checkbox"/>	
<b>AND</b> Patient has at least <u>one</u> of the following:		
a. purulent drainage from a drain placed into the organ/space (for example, closed suction drainage system, open drain, T-tube drain, CT-guided drainage).	<input type="checkbox"/>	
b. organism(s) identified from fluid or tissue in the organ/space by a culture or non-culture based microbiologic testing method, which is performed for purposes of clinical diagnosis or treatment (for example, not Active Surveillance Culture/Testing [ASC/AST]).	<input type="checkbox"/>	
c. an abscess or other evidence of infection involving the organ/space detected on <ul style="list-style-type: none"><li>gross anatomical exam <u>or</u></li><li>histopathologic exam <u>or</u></li><li>imaging test evidence definitive or equivocal for infection</li></ul>	<input type="checkbox"/>	
<b>AND</b>		
meets at least <u>one</u> eligible [per <a href="#">Appendix A</a> ] criterion for a specific organ/space infection site listed in <a href="#">Table 3</a> . These criteria are found in the <a href="#">Surveillance Definitions for Specific Types of Infections (Chapter 17)</a> .	<input type="checkbox"/>	
<b>Comments:</b> Examples of gross anatomic evidence of organ/space infection: <ul style="list-style-type: none"><li>An intraabdominal abscess will require an invasive procedure to actually visualize the abscess.</li><li>Visualization of pus or purulent drainage (includes from a drain).</li><li>Abdominal pain or tenderness, pelvic or uterine pain <b>post Cesarean section (CSEC) or hysterectomy (HYST or VHYS)</b> is sufficient gross anatomic evidence of infection without an invasive procedure to meet <u>general Organ/Space SSI criterion 'c'</u> when a <a href="#">Chapter 17 Reproductive Tract Infection criterion is met</a>. Allowing the documentation of abdominal pain or tenderness as gross anatomic evidence of infection to meet general Organ/Space SSI criterion 'c' enables the user to report an SSI-OREP, SSI-EMET, or SSI-VCUF event. Abdominal pain or tenderness <u>cannot</u> be applied as 'other evidence of infection on gross anatomic exam' to meet Deep Incisional SSI criterion 'c' or to meet any <a href="#">Chapter 17</a> site-specific criterion (for example, OREP 2).</li></ul>		

**Reviewer Notes/Comments:**

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**Table 2. Surveillance Periods for SSI Following Selected NHSN Operative Procedure Categories.****Day 1 = the date of the procedure.**

30-day Surveillance			
Category	Operative Procedure	Category	Operative Procedure
<b>AAA</b>	Abdominal aortic aneurysm repair	<b>LAM</b>	Laminectomy
<b>AMP</b>	Limb amputation	<b>LTP</b>	Liver transplant
<b>APPY</b>	Appendix surgery	<b>NECK</b>	Neck surgery
<b>AVSD</b>	Shunt for dialysis	<b>NEPH</b>	Kidney surgery
<b>BILI</b>	Bile duct, liver or pancreatic surgery	<b>OVRY</b>	Ovarian surgery
<b>CEA</b>	Carotid endarterectomy	<b>PRST</b>	Prostate surgery
<b>CHOL</b>	Gallbladder surgery	<b>REC</b>	Rectal surgery
<b>COLO</b>	Colon surgery	<b>SB</b>	Small bowel surgery
<b>CSEC</b>	Cesarean section	<b>SPLE</b>	Spleen surgery
<b>GAST</b>	Gastric surgery	<b>THOR</b>	Thoracic surgery
<b>HTP</b>	Heart transplant	<b>THYR</b>	Thyroid and/or parathyroid surgery
<b>HYST</b>	Abdominal hysterectomy	<b>VHYS</b>	Vaginal hysterectomy
<b>KTP</b>	Kidney transplant	<b>XLAP</b>	Exploratory Laparotomy
90-day Surveillance			
Category	Operative Procedure		
<b>BRST</b>	Breast surgery		
<b>CARD</b>	Cardiac surgery		
<b>CBGB</b>	Coronary artery bypass graft with both chest and donor site incisions		
<b>CBGC</b>	Coronary artery bypass graft with chest incision only		
<b>CRAN</b>	Craniotomy		
<b>FUSN</b>	Spinal fusion		
<b>FX</b>	Open reduction of fracture		
<b>HER</b>	Herniorrhaphy		
<b>HPRO</b>	Hip prosthesis		
<b>KPRO</b>	Knee prosthesis		
<b>PACE</b>	Pacemaker surgery		
<b>PVBY</b>	Peripheral vascular bypass surgery		
<b>VSHN</b>	Ventricular shunt		

**Notes:**

- Superficial incisional SSIs are monitored for a 30-day period for all procedure categories.
- Secondary incisional SSIs are monitored for a 30-day period regardless of the surveillance period for the primary incision site.

**Table 3. Specific Sites of an Organ/Space SSI**

Category	Specific Site	Category	Specific Site
<b>BONE</b>	Osteomyelitis	MED	Mediastinitis
<b>BRST</b>	Breast abscess or mastitis	MEN	Meningitis or ventriculitis
<b>CARD</b>	Myocarditis or pericarditis	ORAL	Oral cavity infection (mouth, tongue, or gums)
<b>DISC</b>	Disc space infection	OREP	Deep pelvic tissue infection or other infection of the male or female reproductive tract
<b>EAR</b>	Ear, mastoid infection	PJI	Periprosthetic joint infection
<b>EMET</b>	Endometritis	SA	Spinal abscess/infection
<b>ENDO</b>	Endocarditis	SINU	Sinusitis
<b>GIT</b>	Gastrointestinal (GI) tract infection	UR	Upper respiratory tract, pharyngitis, laryngitis, epiglottitis
<b>IAB</b>	Intraabdominal infection, not specified elsewhere	USI	Urinary System Infection
<b>IC</b>	Intracranial infection	VASC	Arterial or venous infection
<b>JNT</b>	Joint or bursa infection	VCUF	Vaginal cuff infection
<b>LUNG</b>	Other infection of the lower respiratory tract		

**Notes:**

- Criteria for these sites can be found in [Chapter 17 Surveillance Definitions for Specific Types of Infections](#).
- Appendix A found within [Chapter 9 Surgical Site Infection \[SSI\] Event](#) contains a complete list of all NHSN operative procedure categories and the corresponding site-specific SSIs that may be attributable to each category.