

2024 NHSN Outpatient Procedure Component Surgical Site Infection Checklist

Outpatient Procedure Component Surgical Site Infection (OPC-SSI) Documentation Review Checklist

Definition of an NHSN Operative Procedure

An NHSN Operative Procedure is a procedure that

- is included in the NHSN [CPT](#) operative procedure category code mapping

And

- takes place during an operation where at least one incision (including laparoscopic approach) is made through the skin or mucous membrane, or reoperation via an incision that was left open during a prior operative procedure

And

- takes place in an operating room (OR), defined as a patient care area that met criteria for an operating room when it was constructed or renovated outlined by the Facilities Guidelines Institute’s (FGI), American Institute of Architects’ (AIA) or requirements of the State in which it operates. This may include an interventional radiology room or a cardiac catheterization lab.

PROCEDURE DETAILS:

Date of Procedure: _____

CPT Operative Procedure Code(s) Assigned: _____

NHSN Operative Procedure Category(ies) (BRST, HER, etc.): _____

SSI EVENT DETAILS:

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

Please refer to [Outpatient Procedure Component: Surgical Site Infection Protocol](#) for additional information.



OPC General - Surgical Site Infection (SSI)

Apply to all operative procedure categories except Breast Surgery (BRST).
Use Breast Surgery (BRST) - Surgical Site Infection Criteria for SSIs attributable to BRST.

OPC General - Superficial incisional SSI (SIP, SIS)

Element	Element Met	Date
Must meet the following criteria:		
Date of event for infection occurs within 30 days after any NHSN operative procedure (where day 1 = the procedure date)	<input type="checkbox"/>	
AND		
Involves skin and subcutaneous tissue of the incision	<input type="checkbox"/>	
AND Patient has at least <i>one</i> 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 by a surgeon, physician or physician designee AND Culture or non-culture based testing of the superficial incision or subcutaneous tissue is <i>not</i> performed AND Patient has <i>at least one</i> of the following signs or symptoms: <ul style="list-style-type: none"> • Localized pain or tenderness • Localized swelling • Erythema • Heat 	<input type="checkbox"/>	
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 (nurse practitioner or physician’s assistant).		
Comments: The two specific types of superficial incisional SSIs are: <ol style="list-style-type: none"> 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, the knee incision for KPRO procedure) 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, abdominal incision site for VSHN) Note: Refer to SSI Event Reporting Instruction #5 within the Outpatient Procedure Component [SSI] Event Reporting Instructions for NHSN operative procedure categories with secondary incision sites available for SSI attribution		
Reporting Instructions for OPC General - Superficial Incisional SSI: The following do not qualify as criteria for meeting the NHSN definition of superficial incisional SSI: <ul style="list-style-type: none"> • Diagnosis/treatment of cellulitis (redness/warmth/swelling), by itself, does not meet superficial incisional SSI criterion ‘d’. • A stitch abscess alone (minimal inflammation and discharge confined to the points of suture penetration). 		



A localized stab wound or pin site infection; depending on the depth, these infections might be considered either a 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.

Comments/Notes:

OPC General - Surgical Site Infection (SSI)

Apply to all operative procedure categories except Breast Surgery (BRST).
Use Breast Surgery (BRST) - Surgical Site Infection Criteria for SSIs attributable to BRST.

OPC General - Deep incisional SSI (DIP, DIS)

Element	Element Met	Date
Must meet the following criteria:		
Date of event for infection occurs within 30 or 90 days after the NHSN operative procedure (where day 1 = the procedure date) according to the list in Table 2 (see below)	<input type="checkbox"/>	
AND		
Involves deep soft tissues of the incision (for example, fascial and muscle layers)	<input type="checkbox"/>	
AND Patient has at least one of the following:		
a. purulent drainage from the deep incision.	<input type="checkbox"/>	
b. a deep incision that spontaneously dehisces, or is deliberately opened or aspirated by a surgeon, physician or physician designee AND Organism is identified from the deep soft tissues of the incision 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)) <u>or</u> culture or non-culture based microbiologic testing method is not performed. A culture or non-culture based test from the deep soft tissues of the incision that has a negative finding does not meet this criterion. AND Patient has at least one of the following signs or symptoms: <ul style="list-style-type: none"> • Fever (>38°C) • Localized pain or tenderness 	<input type="checkbox"/>	
c. an abscess or other evidence of infection involving the deep incision that is detected on gross anatomical or histopathologic exam, or imaging test.	<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 (nurse practitioner or physician’s assistant).		
<p>Comments: The two specific types of deep incisional SSIs are:</p> <ol style="list-style-type: none"> 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, the hip incision for an HPRO procedure) 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, abdominal incision for VSHN) <p>Note: Refer to SSI Event Reporting Instruction #5 within the Outpatient Procedure Component [SSI] Event Reporting Instructions for NHSN operative procedure categories with secondary incision sites available for SSI attribution</p>		
<p>Comments/Notes:</p>		



OPC General - Surgical Site Infection (SSI)

Apply to all operative procedure categories except Breast Surgery (BRST).
Use Breast Surgery (BRST) - Surgical Site Infection Criteria for SSIs attributable to BRST.

OPC General - Organ/Space SSI (O/S)

Element	Element Met	Date
Must meet the following criteria:		
Date of event for infection occurs within 30 or 90 days after the NHSN operative procedure (where day 1 = the procedure date) according to the list in Table 2 (see below)	<input type="checkbox"/>	
AND		
involves any part of the body deeper than the fascial/muscle layers that is opened or manipulated during the operative procedure	<input type="checkbox"/>	
AND Patient has at least one of the following:		
a. purulent drainage from a drain that is placed into the organ/space (for example, closed suction drainage system, open drain, T-tube drain, and CT-guided drainage).	<input type="checkbox"/>	
b. organisms are identified from an aseptically-obtained 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"> • gross anatomical exam <u>or</u> • histopathologic exam <u>or</u> • imaging test evidence definitive or equivocal for infection 	<input type="checkbox"/>	

NOTE:

Meeting additional infection criteria found in Chapter 17 of the CDC/NHSN Surveillance Definitions for Specific Types of Infections in the Patient Safety Manual is NOT required when reporting OPC General – Organ/Space SSIs.

Comments/Notes:



Breast Surgery (BRST) Surgical Site Infection Criteria

Apply to all BRST - Breast Surgery performed in Ambulatory Surgery Centers.
Use General OPC-SSI criteria for all operative procedures except breast surgery (BRST).

OPC BRST - Superficial incisional SSI (SIP, SIS)

Element	Element Met	Date
Must meet the following criteria:		
Date of event for infection occurs within 30 days after a BRST; where day 1 = the procedure date	<input type="checkbox"/>	
AND		
Involves either the skin, subcutaneous tissue (for example, fatty tissue) or breast parenchyma (for example, milk ducts and glands that produce milk) at the incision	<input type="checkbox"/>	
AND Patient has at least one 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. superficial incision that is deliberately opened by a surgeon, physician or physician designee AND Culture or non-culture based testing of the superficial incision or subcutaneous tissue is <u>not</u> performed AND Patient has at least one of the following signs or symptoms: <ul style="list-style-type: none"> • Localized pain or tenderness • Localized swelling • Redness (erythema) • Heat 	<input type="checkbox"/>	
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 (nurse practitioner or physician's assistant).

Comments:

The two specific types of superficial incisional SSIs are:

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, the breast incision for BRST procedure)
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, Transverse Rectus Abdominis Myocutaneous (TRAM) flap incision for BRST)

Note: Refer to SSI Event Reporting Instruction #5 within [the Outpatient Procedure Component \[SSI\] Event Reporting Instructions](#) for NHSN operative procedure categories with secondary incision sites available for SSI attribution

Reporting Instructions for OPC BRST - Superficial Incisional SSI:

The following do not qualify as criteria for meeting the NHSN definition of superficial incisional SSI:



- Diagnosis/treatment of cellulitis (redness/warmth/swelling), by itself, does not meet superficial incisional SSI criterion 'd'.
- A stitch abscess alone (minimal inflammation and discharge confined to the points of suture penetration).

A localized stab wound or pin site infection; depending on the depth, these infections might be considered either a skin (SKIN) or soft tissue (ST) infection.

Comments/Notes:

Breast Surgery (BRST) Surgical Site Infection Criteria

OPC BRST - Deep incisional SSI (DIP, DIS)

Element	Element Met	Date
Must meet the following criteria:		
Date of event for infection occurs within 90 days after a BRST; where day 1 = the procedure date	<input type="checkbox"/>	
AND		
Involves deep soft tissues of the incision (for example, fascial and muscle layers)	<input type="checkbox"/>	
AND Patient has at least <u>one</u> of the following:		
a. purulent drainage from the deep incision.	<input type="checkbox"/>	
b. a deep incision that spontaneously dehisces, or is deliberately opened or aspirated by a surgeon, physician or physician designee AND Organism is identified from the deep soft tissues of the incision 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)) <u>or</u> culture or non-culture based microbiologic testing method is not performed. A culture or non-culture based test from the deep soft tissues of the incision that has a negative finding does not meet this criterion. AND Patient has <u>at least one</u> of the following signs or symptoms: <ul style="list-style-type: none"> • Fever (>38°C) • Localized pain or tenderness 	<input type="checkbox"/>	
c. an abscess or other evidence of infection involving the deep incision that is detected on gross anatomical or histopathologic exam.	<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 (nurse practitioner or physician's assistant).		
Comments: The two specific types of deep incisional SSIs are: <ol style="list-style-type: none"> 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, the breast incision for BRST procedure) 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, Transverse Rectus Abdominis Myocutaneous (TRAM) flap incision for BRST) 		
Note: Refer to SSI Event Reporting Instruction #5 within the Outpatient Procedure Component [SSI] Event Reporting Instructions for NHSN operative procedure categories with secondary incision sites available for SSI attribution		
Comments/Notes:		

Breast Surgery (BRST) Surgical Site Infection Criteria
 Apply to all BRST - Breast Surgery performed in Ambulatory Surgery Centers.
 Use General OPC-SSI criteria for all operative procedures except breast surgery (BRST).

OPC BRST - Organ/Space SSI (O/S)

Element	Element Met	Date
Must meet the following criteria:		
Date of event for infection occurs within 90 days after a BRST; where day 1 = the procedure date	<input type="checkbox"/>	
AND		
involves any part of the body deeper than the fascial/muscle layers (subpectoral) that is opened or manipulated during the operative procedure	<input type="checkbox"/>	
AND Patient has at least one of the following:		
a. purulent drainage from a drain that is placed into the organ/space (for example, closed suction drainage system, open drain, T-tube drain, and CT-guided drainage).	<input type="checkbox"/>	
b. organisms identified from affected breast tissue or fluid obtained by invasive procedure 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. breast abscess or other evidence of infection on gross anatomical or histopathologic exam, or imaging test consistent with breast infection.	<input type="checkbox"/>	

NOTES:

- Breast surgeries may involve a secondary operative incision. Specifically, procedures that include flaps. The flap site is the secondary operative incision. Secondary sites have a 30-day surveillance period. If the secondary site meets criteria for an SSI, it is reported as either a superficial incisional SSI at the secondary site or deep incisional infection at the incisional site.
- Accessing a breast expander after a breast surgery is considered an invasive procedure and any subsequent infection is not deemed an SSI attributable to the breast surgery.

Meeting additional infection criteria found in Chapter 17, CDC/NHSN Surveillance Definitions for Specific Types of Infections is NOT required when reporting OPC BRST - Organ/Space SSIs.

Comments/Notes:



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

30-day Surveillance			
Category	Operative Procedure	Category	Operative Procedure
AMP	Limb amputation	NECK	Neck surgery
APPY	Appendix surgery	NEPH	Kidney surgery
AVSD	Shunt for dialysis	OVRY	Ovarian surgery
BILI	Bile duct, liver or pancreatic surgery	PRST	Prostate surgery
CEA	Carotid endarterectomy	REC	Rectal surgery
CHOL	Gallbladder surgery	SB	Small bowel surgery
COLO	Colon surgery	SPLE	Spleen surgery
GAST	Gastric surgery	THOR	Thoracic surgery
HYST	Abdominal hysterectomy	THYR	Thyroid and/or parathyroid surgery
LAM	Laminectomy	VHYS	Vaginal hysterectomy
-	-	XLAP	Exploratory Laparotomy
90-day Surveillance			
Category	Operative Procedure		
BRST	Breast surgery		
FUSN	Spinal fusion		
FX	Open reduction of fracture		
HER	Herniorrhaphy		
HPRO	Hip prosthesis		
KPRO	Knee prosthesis		
PACE	Pacemaker surgery		
PVBY	Peripheral vascular bypass surgery		
VSHN	Ventricular shunt		

NOTES:

- Superficial incisional SSIs are only followed for a 30-day period for all procedure types.
- Secondary incisional SSIs are only followed for a 30-day period regardless of the surveillance period for the primary site.

