

**SURGICAL SITE INFECTION (SSI)  
 DEEP INCISIONAL SSI (DIP/DIS)**

(NHSN SSI protocol <http://www.cdc.gov/nhsn/PDFs/pscManual/9pscSSIcurrent.pdf?agree=yes&next=Accept>)

|  |                       |                            |                      |
|--|-----------------------|----------------------------|----------------------|
| <b>Patient Name</b>  |                       | <b>Medical Records No.</b> |                      |
| <b>Date of Procedure</b>   | <b>Date of Review</b> |                            | <b>Date of Event</b> |
| <input type="checkbox"/> Infection occurs within 30 or 90 days after the NHSN operative procedure (where day 1 = the procedure date) according to Table 3 below  |                       |                            |                      |
| <b>AND</b>   |                       |                            |                      |
| <input type="checkbox"/> Involves deep soft tissues (e.g., fascial and muscle layers) of the incision  |                       |                            |                      |
| <b>AND</b>   |                       |                            |                      |
| Patient has at least <u>one</u> of the following: <ul style="list-style-type: none"> <li><input type="checkbox"/> Purulent drainage from the deep incision</li> <li><input type="checkbox"/> A deep incision that spontaneously dehisces or is deliberately opened or aspirated by a surgeon, attending physician* or other designee and organism is identified by a culture or non-culture based microbiologic testing method which is performed for purposes of clinical diagnosis or treatment (e.g., not Active Surveillance Culture/Testing [ASC/AST]) or culture or non-culture based microbiologic testing method is <b>not</b> performed (a negative test finding does not meet this component) <b>AND</b> the patient has at least <b>one</b> of the following signs or symptoms:             <ul style="list-style-type: none"> <li><input type="checkbox"/> Fever (&gt; 38° C)</li> <li><input type="checkbox"/> Localized pain or tenderness</li> </ul> </li> <li><input type="checkbox"/> An abscess or other evidence of infection involving the deep incision that is detected on gross anatomical or histopathologic exam or imaging test</li> </ul> |                       |                            |                      |
| *The term attending physician for the purposes of application of the NHSN SSI criteria may be interpreted to mean the surgeon(s), infectious disease, other physician on the case, emergency physician, or physician's designee (nurse practitioner or physician's assistant).   |                       |                            |                      |
| <b>Note</b>  |                       |                            |                      |
| There are two specific types of deep incisional SSIs: <ol style="list-style-type: none"> <li>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 (e.g., C-section incision or chest incision for CBGB)</li> <li>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 (e.g., donor site incision for CBGB)</li> </ol>   |                       |                            |                      |