BRST – Breast Infection or Mastitis

(Revised January 1, 2018)

DEFINITION: A breast abscess or mastitis must meet at least **ONE** ☐ of the following criteria:

- ☐ **Criterion 1**: ***(Revised January 1, 2018)***
  - Patient has organism(s) identified from **ONE** Δ of the following:
    - Δ tissue from affected breast obtained by invasive procedure[#]
    - Δ fluid from affected breast obtained by invasive procedure[#]
- ☐ **Criterion 2**: ***(Revised January 1, 2018)***
  - Patient has **ONE** Δ of the following:
    - Δ breast abscess on **ONE** ◊ of the following:
      - ◊ gross anatomic exam
      - ◊ histopathologic exam
    - Δ other evidence of infection on **ONE** ◊ of the following:
      - ◊ gross anatomic exam
      - ◊ histopathologic exam
- ☐ **Criterion 3**: ***(Revised January 1, 2018)***
  - Patient has **BOTH** Δ of the following:
    - Δ fever (>38.0°C)
    - Δ local inflammation of the breast

  AND
  - Physician initiates antimicrobial therapy within 2 days of the **ONE** Δ of the following:
    - Δ onset of symptoms
    - Δ worsening of symptoms

[#]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).

REPORTING INSTRUCTIONS: ***(Revised January 1, 2018)***

- For SSI after a BRST procedure: if the infection is in the subcutaneous region report as a superficial incisional SSI, and if the infection involves the muscle/fascial level report as deep incisional SSI.
- BRST Criterion 3, above, cannot meet organ/space Surgical Site Infections.

BURN – Burn

(Revised January 1, 2018)

DEFINITION: Burn infections must meet the following criterion:

- **Criterion 1**: ***(Revised January 1, 2018)***
  - Patient has **ONE** Δ of the following changes in burn wound appearance or character:
    - Δ rapid eschar separation
    - Δ dark brown, black, or violaceous discoloration of the eschar

  AND

  - Organism(s) identified from blood[#]

[#]***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).***

CIRC – Newborn Circumcision

(Revised January 1, 2018)

DEFINITION: Circumcision infection in a newborn (≤30 days old) must meet at least **ONE** ☐ of the following criteria:

☐ **Criterion 1**: ***(Revised January 1, 2018)***

- Newborn has purulent drainage from circumcision site

☐ **Criterion 2**: ***(Revised January 1, 2018)***

- Newborn has at least **ONE** Δ of the following signs or symptoms at circumcision site:

  ****with no other recognized cause***

  - Δ erythema*
  - Δ swelling*
  - Δ tenderness*

AND

- Newborn has a pathogen identified from circumcision site#

☐ **Criterion 3**: ***(Revised January 1, 2018)***

- Newborn has at least **ONE** Δ of the following signs or symptoms at circumcision site:

  ****with no other recognized cause***

  - Δ erythema*
  - Δ swelling*
  - Δ tenderness*

AND

- Newborn has a common commensal identified from circumcision site#

AND

- Physician initiates antimicrobial therapy within 2 days of **ONE** Δ of the following:
  - Δ onset of symptoms
  - Δ worsening of symptoms

#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).

DECU – Decubitus Ulcer Infection (also known as pressure injury infection), Including both Superficial and Deep Infections

(Revised January 1, 2018)

DEFINITION: Decubitus ulcer infections must meet the following criterion:

- **Criterion**: ***(Revised January 1, 2018)***
  - Patient has at least **TWO** Δ of the following signs or symptoms:

    ***with no other recognized cause**

    - Δ erythema*
    - Δ tenderness*
    - Δ swelling of decubitus wound edges*

  AND

  - Patient has organism(s) identified from **ONE** Δ of the following:
    - Δ needle aspiration of fluid#
    - Δ biopsy of tissue from ulcer margin#

#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).

SKIN AND SOFT TISSUE INFECTION (SST)

SKIN – Skin Infection (Skin and / or Subcutaneous) excludes decubitus ulcers and burns

(Revised January 1, 2018)

DEFINITION: Skin infections must meet at least **ONE** ☐ of the following criteria:

- ☐ **Criterion 1**: ***(Revised January 1, 2018)***
  - Patient has at least **ONE** Δ of the following:
    - Δ purulent drainage
    - Δ pustules
    - Δ vesicles
    - Δ boils (excluding acne)
- ☐ **Criterion 2**: ***(Revised January 1, 2018)***
  - Patient has at least **TWO** Δ of the following localized signs or symptoms:

    (*with no other recognized cause)
    - Δ pain* or tenderness*
    - Δ swelling*
    - Δ erythema*
    - Δ heat*

  AND
  - Patient has at least **ONE** Δ of the following:
    - Δ organisms identified from **ONE** ◊ of the following:
      - ◊ aspirate from affected site#
      - ◊ drainage from affected site#

#***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).***

Note: Identification of 2 or more Common Commensal organisms without a recognized pathogen, is not eligible for use. Common Commensal organisms include, but not are not limited to, diphtheroids (*Corynebacterium* spp. not *C. diphtheria*), *Bacillus* spp. (not *B. anthracis*), *Propionibacterium* spp., coagulase-negative staphylococci (including *S.epidermidis*), viridans group *streptococci*, *Aerococcus* spp. *Micrococcus* spp, and *Rhodococcus* spp. For a full list of Common Commensals see the Common Commensal tab of the NHSN organisms list.

- Δ multinucleated giant cells seen on microscopic examination of affected tissue
- Δ choose **ONE** ◊ of the following:
  - ◊ diagnostic single antibody titer (IgM) for organism
  - ◊ 4-fold increase in paired sera (IgG) for organism

REPORTING INSTRUCTIONS: ***(Revised January 1, 2018)***

- Do not report acne as a skin/soft tissue HAI
- Apply the site specific definition (not SKIN) for the following:
  - Report omphalitis in infants as UMB.
  - Report infections of the circumcision site in newborns as CIRC.
  - For decubitus ulcers, apply the DECU infection.
  - Report infected burns as BURN.
  - Report breast abscesses or mastitis as BRST.
  - Report localized infection at a vascular access site as VASC unless there is an organism identified from blood meeting LCBI criteria, which should instead be reported as an LCBI (see VASC definition).

SKIN AND SOFT TISSUE INFECTION (SST)

ST – Soft Tissue Infection

(Muscle and/or Fascia [for example, Necrotizing Fasciitis, Infectious Gangrene, Necrotizing Cellulitis, Infectious Myositis, Lymphadenitis, or Lymphangitis or parotitis] excluding decubitus ulcers and burns)

(Revised January 1, 2018)

DEFINITION: Soft tissue infections must meet at least **ONE** ☐ of the following criteria:

- ☐ **Criterion 1**: ***(Revised January 1, 2018)***
  - Patient has organism(s) identified from **ONE** Δ of the following:
    - Δ tissue from affected site#
    - Δ drainage from affected site#
- ☐ **Criterion 2**: ***(Revised January 1, 2018)***
  - Patient has purulent drainage at affected site
- ☐ **Criterion 3**: ***(Revised January 1, 2018)***
  - Patient has **ONE** Δ of the following:
    - Δ abscess on **ONE** ◊ of the following:
      - ◊ gross anatomic exam
      - ◊ histopathologic exam
    - Δ other evidence of infection on **ONE** ◊ of the following:
      - ◊ gross anatomic exam
      - ◊ histopathologic exam

#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).

REPORTING INSTRUCTIONS: ***(Revised January 1, 2018)***

- Apply the site-specific definitions identified below (not ST) for the following:
  - Report infected decubitus ulcers as DECU.
  - Report infected burns as BURN.
  - Report infection of deep pelvic tissues as OREP.
  - Report localized infection at a vascular access site as a VASC, unless there is an organism identified from blood, in which case it should be reported as an LCBI (see VASC definition).

UMB – Omphalitis

(Revised January 1, 2018)

DEFINITION: Omphalitis in a newborn (≤30 days old) must meet at least **ONE** ☐ of the following criteria:

☐ **Criterion 1**: ***(Revised January 1, 2018)***

- Patient has at **ONE** Δ of the following:
  - Δ erythema
  - Δ drainage from umbilicus

AND

- Patient has at least **ONE** Δ of the following:
  - Δ organism(s) identified from **ONE** ◊ of the following:
    - ◊ drainage#
    - ◊ needle aspirate#
  - Δ organism(s) identified from blood#

☐ **Criterion 2**: ***(Revised January 1, 2018)***

- Patient has erythema at the umbilicus

AND

- Patient has purulence at the umbilicus

#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).

REPORTING INSTRUCTIONS: ***(Revised January 1, 2018)***

- Report infection of the umbilical artery or vein related to umbilical catheterization as VASC if there is no accompanying organism identified from a blood specimen.
- If the patient meets criteria for LCBI, report as LCBI (see VASC).

USI – Urinary System Infection [Formerly OUTI) (Kidney, Ureter, Bladder, Urethera, or Perineprhic Space)

(Revised January 1, 2018)

DEFINITION: Urinary system infection must meet at least **ONE** ☐ of the following criteria:

- ☐ **Criterion 1**: ***(Revised January 1, 2018)***
  - Patient has microorganism(s) identified from **ONE** Δ of the following:
    - Δ fluid (NOT urine) from affected site#
    - Δ tissue from affected site#
- ☐ **Criterion 2**: ***(Revised January 1, 2018)***
  - Patient has **ONE** Δ of the following:
    - Δ abscess on **ONE** ◊ of the following:
      - ◊ gross anatomic exam
      - ◊ during invasive procedure
      - ◊ histopathologic exam
    - Δ other evidence of infection on **ONE** ◊ of the following:
      - ◊ gross anatomic exam
      - ◊ during invasive procedure
      - ◊ histopathologic exam
- ☐ **Criterion 3**: ***(Revised January 1, 2018)***
  - Patient has **ONE** Δ of the following signs or symptoms:
    - Δ fever (>38.0°C)
    - Δ localized pain or tenderness*

  AND
  - Patient has at least **ONE** Δ of the following:
    - Δ purulent drainage from affected site
    - Δ **BOTH** ◊ of the following:
      - ◊ organisms identified from blood#
      - ◊ imaging test evidence suggestive of infection**, which if equivocal is supported by clinical correlation^

**** with no other recognized cause***

SKIN AND SOFT TISSUE INFECTION (SST)

☐ **Criterion 4**: ***(Revised January 1, 2018)***

- Patient ≤1 year of age has at least **ONE** Δ of the following signs or symptoms:

  with no other recognized cause

  - Δ fever (>38.0°C)
  - Δ hypothermia (<36.0°C)
  - Δ apnea*
  - Δ bradycardia*
  - Δ lethargy*
  - Δ vomiting*

AND

- Patient has at least **ONE** Δ of the following:
  - Δ purulent drainage from affected site
  - Δ **BOTH** ◊ of the following:
    - ◊ Organism(s) identified from blood#
    - ◊ imaging test** evidence suggestive of infection, which if equivocal is supported by clinical correlation^

for example, ultrasound, CT scan, magnetic resonance imaging [MRI], or radiolabel scan [gallium, technetium]
#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).
^specifically, physician documentation of antimicrobial treatment for urinary system infection

REPORTING INSTRUCTIONS: ***(Revised January 1, 2018)***

- Report infections following circumcision in newborns as SST-CIRC.
- If patient meets USI criteria and they also meet UTI criteria, report UTI only, unless USI is a surgical site organ/space infection, in which case, only USI should be reported.