

## SKIN AND SOFT TISSUE INFECTION (SST)

## BRST – Breast Infection or Mastitis

(Revised January 1, 2017)

**DEFINITION:** A breast abscess or mastitis must meet at least **ONE** ☐ of the following criteria:**☐ Criterion 1:** (Revised January 1, 2017)

- Patient has organism(s) identified from **ONE** ☐ of the following:
  - ☐ tissue from affected breast obtained by invasive procedure<sup>#</sup>
  - ☐ fluid from affected breast obtained by invasive procedure<sup>#</sup>

**☐ Criterion 2:** (Revised January 1, 2017)

- Patient has **ONE** ☐ of the following:
  - ☐ breast abscess on **ONE** ☐ of the following:
    - ☐ gross anatomic exam
    - ☐ histopathologic exam
  - ☐ other evidence of infection on **ONE** ☐ of the following:
    - ☐ gross anatomic exam
    - ☐ histopathologic exam

**☐ Criterion 3:** (Revised January 1, 2017)

- Patient has **BOTH** ☐ of the following:
    - ☐ fever (>38.0°C)
    - ☐ local inflammation of the breast
- AND**
- Physician initiates antimicrobial therapy within 2 days of the **ONE** ☐ of the following:
    - ☐ onset of symptoms
    - ☐ worsening of symptoms

<sup>#</sup>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)).



TENNESSEE DEPARTMENT OF HEALTH  
HEALTHCARE-ASSOCIATED INFECTIONS AND ANTIMICROBIAL RESISTANCE PROGRAM  
HAI Surveillance Definitions



**SKIN AND SOFT TISSUE INFECTION (SST)**

**REPORTING INSTRUCTIONS:** *(Revised January 1, 2017)*

- 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.
- BTST Criterion 3, above, cannot be applied to Surgical Site Infections.




## SKIN AND SOFT TISSUE INFECTION (SST)

### BURN – Burn

*(Revised January 1, 2017)*

**DEFINITION:** Burn infections must meet the following criterion:

**□ Criterion 1:** *(Revised January 1, 2017)*

- Patient has **ONE**  of the following changes in burn wound appearance or character-such as:
  -  rapid eschar separation
  -  dark brown, black, or violaceous discoloration of the eschar
- AND**
- Organism(s) identified from blood<sup>#</sup>

<sup>#</sup>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)).

## SKIN AND SOFT TISSUE INFECTION (SST)

## CIRC – Newborn Circumcision

(Revised January 1, 2017)

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

☐ **Criterion 1:** (Revised January 1, 2017)

- Newborn has purulent drainage from circumcision site

☐ **Criterion 2:** (Revised January 1, 2017)

- Newborn has at least **ONE** ☐ of the following signs or symptoms at circumcision site. (\*With no other recognized cause)

- ☐ erythema\*

- ☐ swelling\*

- ☐ tenderness\*

**AND**

- Newborn has a pathogen identified from circumcision site<sup>#</sup>

☐ **Criterion 3:** (Revised January 1, 2017)

- Newborn has at least **ONE** ☐ of the following signs or symptoms:

(\*with no other recognized cause)

- ☐ erythema\*

- ☐ swelling\*

- ☐ tenderness\*

**AND**

- Newborn has a common commensal identified from circumcision site<sup>#</sup>

**AND**

- Physician initiates antimicrobial therapy within 2 days of **ONE** ☐ of the following:

- ☐ onset of symptoms


- ☐ worsening of symptoms

<sup>#</sup>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)).




## SKIN AND SOFT TISSUE INFECTION (SST)

## DECU – Decubitus Ulcer, Including both Superficial and Deep Infections




*(Revised January 1, 2017)***DEFINITION:** Decubitus ulcer infections must meet the following criterion:**□ Criterion:** *(Revised January 1, 2017)*

- Patient has at least **TWO**  of the following signs or symptoms:

(\*with no other recognized cause)

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

**AND**

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

<sup>#</sup>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)).

## SKIN AND SOFT TISSUE INFECTION (SST)

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

(Revised January 1, 2017)

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

☐ **Criterion 1:** (Revised January 1, 2017)

○ Patient has at least **ONE** ☐ of the following:

- ☐ purulent drainage
- ☐ pustules
- ☐ vesicles
- ☐ boils (excluding acne)

☐ **Criterion 2:** (Revised January 1, 2017)

○ Patient has at least **TWO** ☐ of the following localized signs or symptoms:

(\*with no other recognized cause)

- ☐ pain\* or tenderness\*
- ☐ swelling\*
- ☐ erythema\*
- ☐ heat\*

**AND**

○ Patient has at least **ONE** ☐ of the following:

☐ organisms identified from **ONE** ☐ of the following:

- ☐ aspirate from affected site<sup>#</sup>
- ☐ drainage from affected site<sup>#</sup>

<sup>#</sup>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)).

**Note:** If organism is a Common Commensal it must be the only organism identified. Common Commensal organisms include, but 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.

## SKIN AND SOFT TISSUE INFECTION (SST)

△ multinucleated giant cells seen on microscopic examination of affected tissue

△ 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, 2017)

- 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 [e.g., Necrotizing Fasciitis, Infectious Gangrene, Necrotizing Cellulitis, Infectious Myositis, Lymphadenitis, or Lymphangitis or parotitis] excluding decubitus ulcers and burns)

(Revised January 1, 2017)

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

☐ **Criterion 1:** (Revised January 1, 2017)

- ☐ Patient has organism(s) identified from **ONE** ☐ of the following:

- ☐ tissue from affected site<sup>#</sup>

- ☐ drainage from affected site<sup>#</sup>

☐ **Criterion 2:** (Revised January 1, 2017)

- ☐ Patient has purulent drainage at affected site

☐ **Criterion 3:** (Revised January 1, 2017)

- ☐ Patient has **ONE** ☐ of the following:

- ☐ abscess on **ONE** ☐ of the following:

- ☐ gross anatomic exam

- ☐ histopathologic exam

- ☐ other evidence of infection on **ONE** ☐ of the following:

- ☐ gross anatomic exam

- ☐ histopathologic exam

<sup>#</sup>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)).



## SKIN AND SOFT TISSUE INFECTION (SST)

### **REPORTING INSTRUCTIONS:** *(Revised January 1, 2017)*

- 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 a organism identified from blood, then it should be reported as an LCBI (see VASC definition).

## SKIN AND SOFT TISSUE INFECTION (SST)

## UMB – Omphalitis

(Revised January 1, 2017)

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

☐ **Criterion 1:** (Revised January 1, 2017)

- Patient has at **ONE** ☐ of the following:

- ☐ erythema

- ☐ drainage from umbilicus

**AND**

- Patient has at least **ONE** ☐ of the following:

- ☐ organism(s) identified from **ONE** ☐ of the following:

- ☐ drainage<sup>#</sup>

- ☐ needle aspirate<sup>#</sup>

- ☐ organism(s) identified from blood<sup>#</sup>

☐ **Criterion 2:** (Revised January 1, 2017)

- Patient has erythema at the umbilicus

**AND**

- Patient has purulence at the umbilicus

**REPORTING INSTRUCTIONS:** (Revised January 1, 2017)

- 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).

<sup>#</sup>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)).

## SKIN AND SOFT TISSUE INFECTION (SST)

### USI – Urinary System Infection [Formerly OUTI] (Kidney, Ureter, Bladder, Urethra, or Tissue Surrounding the Retroperitoneal or Perinephric Space)

(Revised January 1, 2017)

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

**☐ Criterion 1:** (Revised January 1, 2017)

- Patient has microorganism(s) identified from **ONE** ☐ of the following:
  - ☐ fluid (NOT urine) from affected site<sup>#</sup>
  - ☐ tissue from affected site<sup>#</sup>

**☐ Criterion 2:** (Revised January 1, 2017)

- Patient has **ONE** ☐ of the following:
  - ☐ abscess on **ONE** ☐ of the following:
    - ☐ gross anatomic exam
    - ☐ during invasive procedure
    - ☐ histopathologic exam
  - ☐ other evidence of infection on **ONE** ☐ of the following:
    - ☐ gross anatomic exam
    - ☐ during invasive procedure
    - ☐ histopathologic exam

**☐ Criterion 3:** (Revised January 1, 2017)

- Patient has **ONE** ☐ of the following signs or symptoms:
  - ☐ fever (>38.0°C)
  - ☐ localized pain or tenderness\*

**AND**

- Patient has at least **ONE** ☐ of the following:
  - ☐ purulent drainage from affected site

\* with no other recognized cause

<sup>#</sup> 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)).

## SKIN AND SOFT TISSUE INFECTION (SST)

△ **BOTH** □ of the following:

- organisms identified from blood<sup>#</sup>
- imaging test<sup>\*\*</sup> evidence suggestive of infection, which if equivocal is supported by clinical correlation<sup>^</sup>  
(<sup>\*\*</sup>e.g., *ultrasound, CT scan, magnetic resonance imaging [MRI], or radiolabel scan [gallium, technetium]*)

### □ **Criterion 4:** (Revised January 1, 2017)

- Patient ≤ 1 year of age has at least **ONE** △ of the following signs or symptoms: (<sup>\*</sup> *with no other recognized cause*)

- △ fever (>38.0°C)
- △ hypothermia (<36.0°C)
- △ apnea<sup>\*</sup>
- △ bradycardia<sup>\*</sup>
- △ lethargy<sup>\*</sup>
- △ vomiting<sup>\*</sup>

**AND**

- Patient has at least **ONE** △ of the following:

- △ purulent drainage from affected site

△ **BOTH** □ of the following:

- Organism(s) identified from blood
- imaging test<sup>\*\*</sup> evidence suggestive of infection, which if equivocal is supported by clinical correlation<sup>^</sup>  
(<sup>\*\*</sup>e.g., *ultrasound, CT scan, magnetic resonance imaging [MRI], or radiolabel scan [gallium, technetium]*)

<sup>#</sup>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).

<sup>^</sup>i.e., physician documentation of antimicrobial treatment for urinary system infection

## SKIN AND SOFT TISSUE INFECTION (SST)

### **REPORTING INSTRUCTIONS:** *(Revised January 1, 2017)*

- 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.
- For NHSN reporting purposes, Urinary System Infection (USI) cannot be catheter associated, therefore, USI will only present as specific event type if urinary catheter status is marked "Neither".