

Surgical Site Infection (SSI)

This domain performs a comprehensive assessment of SSI prevention practices at your facility as it currently functions.

Surgical Site Infection Surveillance

1 - Does the facility provide surgical or procedural services?

- Inpatient
- Outpatient
- In-clinic procedures
- None

2a - Does the facility perform Surgical Site Infection (SSI) surveillance?

- Yes
- No
- Not applicable

2b - How is SSI surveillance performed?

- Medical record review
- Admission and readmissions
- Operating Room Logs
- Diagnostic tests/ Imaging
- Communication from clinic
- Microbiology reports
- Electronic surveillance reports
- Provider notes and documentation
- ICD-10/ CPT codes
- Patient surveys
- None of the above
- Other

2c - How are procedures chosen for SSI surveillance?

- Based on risk assessment
- High volume procedures
- Surveillance is performed on all surgical procedures
- Regulatory requirements
- No formal program
- Other

3 - Is SSI data presented to the Infection Control Committee (ICC) or Quality Improvement Committee (QAPI)?

- Yes
- No
- Unsure

4 - Does the facility utilize SSI data to direct prevention activities?

- Yes
- No
- Unsure

5 - Do you report SSI to the National Healthcare Safety Network (NHSN) or other hospital quality data organizations?

- Yes
- No
- Unsure

6 - Do surgeons receive reports of their SSI data?

- Yes
- No
- Unsure

7 - Are case reviews (deep dives) performed when SSIs are identified?

- Yes
- No
- Unsure

Surgical Improvement Programs

8a - Does the facility have a team or working group focused on improving surgical care at the facility?

- Yes
- No
- Unsure

8b - Is the IP involved in the surgical improvement program?

- Yes
- No
- Unsure

9a - Does the surgical leadership have a process for addressing practice issues when CDC guidance is lacking or professional organizations do not have consensus on practice guidance?

- Yes
- No
- Unsure

9b - Is a risk assessment performed when making practice decisions when national guidance is absent?

- Yes
- No
- Unsure

9c - Is the IP involved with these practice decisions?

- Yes

- No
- Unsure

9d - Does this program report findings and decisions to ICC or Quality Improvement committees (QAPI)?

- Yes
- No
- Unsure

10a - Does the facility utilize SSI prevention practices and/or bundles for surgical procedures?

- Yes
- No
- Unsure

10b - What general perioperative practices are in place at your facility?

- MRSA/MSSA screening for applicable procedures
- Nares decolonization for applicable procedures
- Preoperative showering/bathing
- Mechanical bowel prep in applicable procedures
- Surgical hand antisepsis
- Surgical skin preparation
- Intraoperative irrigation of deep or subcutaneous tissues
- Sterile technique
- Blood glucose monitoring when applicable/ Glycemic control
- Maintenance of normothermia when applicable
- Use of alcohol-containing preoperative skin prep in combination with an antiseptic
- Prophylactic antimicrobial administration
- Increased FIO₂ during procedures
- Increased FIO₂ after extubation
- Post-operative wound education
- Avoidance of hair removal (unless it interferes with the surgical site)
- Other

What surgery-specific bundles are in use at your facility?

10d - Abdominal hysterectomies

- Yes
- No
- Not Applicable

10e - Cardiac surgeries

- Yes
- No
- Not Applicable

10f - Orthopedic surgeries

- Yes
- No

Not Applicable

10g - Are additional surgery-specific bundles in use at your facility?

- Yes
- No
- Unsure

10h - What additional bundle(s) are available: (i.e., C-sections, etc.)

Antimicrobial Stewardship

11 - Does the facility have a protocol for appropriate antimicrobial prophylaxis use based on clinical practice guidelines?

- Yes
- No
- Unsure

12a - Does the Antimicrobial Stewardship Program (ASP) provide recommendations for antimicrobial administration in surgical settings and review its implementation?

- Yes
- No
- Unsure

12b - What is included in the ASP review?

- Preoperative timing of prophylactic antimicrobial administration
- Appropriateness of prophylactic antimicrobial selection (based on procedure type)
- Additional dosing for lengthy procedures
- Discontinuation of prophylactic antimicrobials within the recommended timeframe (usually 24 hours)
- None of the above
- Other

Policy & Procedure

13a - Does the facility have policies and standard operating procedures related to SSI prevention?

- Yes
- No
- Unsure

13b - What is included in SSI prevention policies and procedures?

- SSI surveillance
- SSI reporting
- SSI education
- Preoperative patient preparation
- Prophylactic antibiotic administration
- Surgical attire and drapes
- Surgical hand hygiene

- Skin antisepsis and prep
- SSI prevention bundles
- Restricted Areas
- Traffic control
- Maximum barrier precautions
- Sterile field
- Asepsis and surgical technique
- Environmental cleaning in the OR
- Ventilation and air handling requirements in the OR
- Contaminated instrument handling
- Postoperative care
- None of the above
- Other

14 - Does the IP program review Operating Room and Procedural area policies and procedures as they pertain to Infection prevention and control?

- Yes
- No
- Unsure

Education & Training

15a - Does the facility provide competency-based training for SSI prevention strategies?

- Yes
- No
- Unsure

15b - What is included in SSI prevention education and training?

- Surgery-specific SSI prevention bundles
- General perioperative infection prevention interventions
- surgical hand antisepsis
- Surgical attire and PPE
- Preoperative bathing
- Preoperative skin prep
- OR traffic
- Restricted areas
- Antisepsis and surgical technique
- Postoperative SSI prevention
- None of the above
- Other

15c - What frequency is SSI training and education provided?

- Upon hire
- Annually
- When new equipment or protocols are introduced
- As remediation
- For targeted improvement efforts
- None of the above

15d - Who receives SSI education?

- Clinical Healthcare Personnel
- Ancillary Services
- Non-Clinical Healthcare Personnel
- Clinical Support
- Students & Trainees
- Volunteers
- None
- Other

15e - Are healthcare personnel required to demonstrate competency of the task/skill following each training?

- Yes
- No
- Unsure

15f - Does the facility maintain documentation for the completion of SSI prevention competency for healthcare personnel?

- Yes
- No
- Unsure

Audit & Feedback

16a - Does the facility perform audits to assess SSI prevention?

- Yes
- No
- Unsure

16b - What do the audits measure?

- Management and tracking of devices and instrumentation
- Environment of care (EOC) rounds
- Environmental cleaning and disinfection
- Maintenance of the surgical environment (e.g., air handling, doors closed, foot traffic, etc.)
- Maintenance of the surgical field
- None of the above
- Other

16c - Do auditors(s) provide immediate real-time feedback to healthcare personnel in the moment?

- Yes
- No
- Unsure

17a - How does the IPC program evaluate adherence to SSI prevention practices and policy?

- IP routinely rounds in the surgical and procedural areas
- IP routinely observes surgical procedures

- IP observes surgical procedures when an increase in SSI or other adverse events are noted
- The surgical department monitors adherence and reports to the IP
- Other

17b - Does the IPC program have a minimum number of observations as a monthly goal?

- Yes
- No
- Unsure

18 - Does the facility utilize SSI data to impact performance improvement?

- Yes
- No
- Unsure

19 - Which SSI data do frontline healthcare personnel receive?

- Facility-wide SSI data (SIR, superficial, deep, or organ space, etc.)
- Surgeon-specific SSI data
- Antibiotic usage data
- Procedure-specific SSI data
- Other

20 - What data is provided to the Infection Control Committee (ICC) or Quality Improvement Committee?

- SSI Audit data
- Surgical Site Infections
- Procedure-specific SSI data
- Antimicrobial consumption
- None
- Other

Device Evaluation and Tracking

21 - Do OR staff review indicators and instruments prior to procedure start to ensure sterilization parameters are met?

- Yes
- No
- Unsure

22a - Does the OR track equipment and sets used during cases?

- Yes
- No
- Unsure

22b - Are the equipment or set tracking numbers documented in the patient record?

- Yes
- No
- Unsure

Immediate Use Steam Sterilization

23a - Does the OR utilize immediate use steam sterilization (IUSS)?

- Yes
- No
- Unsure

23b - Is documentation complete when IUSS is performed?

- Yes
- No
- Unsure

23c - What is included in the documentation if IUSS is performed?

- Item
- Patient information
- Surgeon
- Date of procedure
- Indicator loads
- Indication for IUSS
- Other

23d - Is there a goal to reduce IUSS usage at the facility?

- Yes
- No
- Unsure

23e - Does the facility investigate when elevated IUSS instances occur?

- Yes
- No
- Unsure

Environment of Care

24a - Does the facility monitor and validate the HVAC settings of procedural areas?

- Yes
- No
- Unsure

24b - What frequency are pressure differentials manually validated in procedural areas and operating rooms?

- Daily prior to opening
- Weekly
- Monthly
- Annually
- Other

25a - Does the facility have backup procedures in place if air exchanges, humidity or temperature parameters are not met?

- Yes

- No
- Unsure

25b - What downtime procedure strategies are in place if parameters are not met?

- Notification to facilities management
- Notification to Infection control/ hospital leadership
- Pause of active procedures if necessary
- Notification to surgical services personnel
- Delay of procedures until parameters are met or movement of procedure to different location
- Validation of parameters prior to reopening
- IPC program performs surveillance for period of time.
- Risk assessment of situation
- None of the above
- Other

26 - Are doors self-closing in surgical areas?

- Yes
- No
- Unsure

27 - Is the surgical or procedural area divided into restricted zones?

- Yes
- No
- Unsure

28 - Are hand hygiene locations placed outside of each OR or directly accessible in or near procedural areas?

- Yes
- No
- Unsure

Environmental Cleaning

29a - Does the surgical services department have a cleaning policy specific to surgical and procedural areas?

- Yes
- No
- Unsure

29b - What is included in the policy?

- Damp dusting of horizontal surfaces prior to first surgical procedure of the day
- Room turnover between procedures
- Terminal cleaning and disinfection at the end of procedure day
- Scheduled maintenance cleaning
- Cleaning of preop/postop areas between patients
- Cleaning and disinfection of in-room medical equipment
- Clearly defined roles and responsibilities for surgical personnel cleaning and disinfection
- High touch surface cleaning

- None of the above
- Other

30 - Do surgical cleaning staff use surgical-specific checklists for cleaning?

- Yes
- No
- Unsure

Answer Key

Surgical Site Infection Surveillance

1 - Does the facility provide surgical or procedural services? **(Not Scored – Informational Only)**

- Inpatient
- Outpatient
- In-clinic procedures
- None

2a - Does the facility perform Surgical Site Infection (SSI) surveillance? **(Not Scored – Informational Only)**

- Yes
- No
- Not applicable

2b - How is SSI surveillance performed? **(Select all preferred options)**

- Medical record review - **Preferred**
- Admission and readmissions - **Preferred**
- Operating Room Logs - **Preferred**
- Diagnostic tests/ Imaging - **Preferred**
- Communication from clinic - **Preferred**
- Microbiology reports - **Preferred**
- Electronic surveillance reports - **Preferred**
- Provider notes and documentation - **Preferred**
- ICD-10/ CPT codes - **Preferred**
- Patient surveys - **Preferred Optional**
- None of the above
- Other

2c - How are procedures chosen for SSI surveillance? **(Select all preferred options)**

- Based on risk assessment - **Preferred**
- High volume procedures - **Preferred Optional**
- Surveillance is performed on all surgical procedures - **Preferred Optional**
- Regulatory requirements - **Preferred**
- No formal program
- Other

3 - Is SSI data presented to the Infection Control Committee (ICC) or Quality Improvement Committee (QAPI)?

- Yes - Preferred**
- No
- Unsure

4 - Does the facility utilize SSI data to direct prevention activities?

- Yes - Preferred**
- No
- Unsure

5 - Do you report SSI to the National Healthcare Safety Network (NHSN) or other hospital quality data organizations?

Yes - Preferred

No

Unsure

6 - Do surgeons receive reports of their SSI data?

Yes - Preferred

No

Unsure

7 - Are case reviews (deep dives) performed when SSIs are identified?

Yes - Preferred

No

Unsure

Surgical Improvement Programs

8a - Does the facility have a team or working group focused on improving surgical care at the facility?

Yes - Preferred

No

Unsure

8b - Is the IP involved in the surgical improvement program?

Yes - Preferred

No

Unsure

9a - Does the surgical leadership have a process for addressing practice issues when CDC guidance is lacking or professional organizations do not have consensus on practice guidance?

Yes - Preferred

No

Unsure

9b - Is a risk assessment performed when making practice decisions when national guidance is absent?

Yes - Preferred

No

Unsure

9c - Is the IP involved with these practice decisions?

Yes - Preferred

No

Unsure

9d - Does this program report findings and decisions to ICC or Quality Improvement committees (QAPI)?

Yes - Preferred

No

Unsure

10a - Does the facility utilize SSI prevention practices and/or bundles for surgical procedures? (**Not Scored – Informational Only**)

Yes

No

Unsure

10b - What general perioperative practices are in place at your facility? (**Select all preferred options**)

MRSA/MSSA screening for applicable procedures - **Preferred Optional**

Nares decolonization for applicable procedures - **Preferred Optional**

Preoperative showering/bathing - **Preferred**

Mechanical bowel prep in applicable procedures - **Preferred Optional**

Surgical hand antisepsis - **Preferred**

Surgical skin preparation - **Preferred**

Intraoperative irrigation of deep or subcutaneous tissues - **Preferred Optional**

Sterile technique - **Preferred**

Blood glucose monitoring when applicable/ Glycemic control - **Preferred**

Maintenance of normothermia when applicable - **Preferred**

Use of alcohol-containing preoperative skin prep in combination with an antiseptic - **Preferred**

Prophylactic antimicrobial administration - **Preferred**

Increased FIO₂ during procedures - **Preferred Optional**

Increased FIO₂ after extubation - **Preferred Optional**

Post-operative wound education - **Preferred**

Avoidance of hair removal (unless it interferes with the surgical site) - **Preferred**

Other

What surgery-specific bundles are in use at your facility?

10d - Abdominal hysterectomies (**Not Scored – Informational Only**)

Yes - Not Scored

No - Not Scored

Not Applicable - Not Scored

10e - Cardiac surgeries (**Not Scored – Informational Only**)

Yes - Not Scored

No - Not Scored

Not Applicable - Not Scored

10f - Orthopedic surgeries (**Not Scored – Informational Only**)

Yes

No

Not Applicable

10g - Are additional surgery-specific bundles in use at your facility? **(Not Scored – Informational Only)**

- Yes
 No
 Unsure

10h - What additional bundle(s) are available: **(Not Scored – Informational Only)**

Antimicrobial Stewardship

11 - Does the facility have a protocol for appropriate antimicrobial prophylaxis use based on clinical practice guidelines?

- Yes - Preferred**
 No
 Unsure

12a - Does the Antimicrobial Stewardship Program (ASP) provide recommendations for antimicrobial administration in surgical settings and review its implementation? **(Not Scored – Informational Only)**

- Yes
 No
 Unsure

12b - What is included in the ASP review? **(Select all preferred options)**

- Preoperative timing of prophylactic antimicrobial administration - **Preferred**
 Appropriateness of prophylactic antimicrobial selection (based on procedure type) - **Preferred**
 Additional dosing for lengthy procedures - **Preferred**
 Discontinuation of prophylactic antimicrobials within the recommended timeframe (usually 24 hours) - **Preferred**
 None of the above
 Other

Policy & Procedure

13a - Does the facility have policies and standard operating procedures related to SSI prevention?

- Yes - Preferred**
 No
 Unsure

13b - What is included in SSI prevention policies and procedures? **(Select all preferred options)**

- SSI surveillance - **Preferred**
 SSI reporting - **Preferred**
 SSI education - **Preferred**
 Preoperative patient preparation - **Preferred**
 Prophylactic antibiotic administration - **Preferred**
 Surgical attire and drapes - **Preferred**

- Surgical hand hygiene - **Preferred**
- Skin antisepsis and prep - **Preferred**
- SSI prevention bundles - **Preferred**
- Restricted Areas - **Preferred**
- Traffic control - **Preferred**
- Maximum barrier precautions - **Preferred**
- Sterile field - **Preferred**
- Asepsis and surgical technique - **Preferred**
- Environmental cleaning in the OR - **Preferred**
- Ventilation and air handling requirements in the OR - **Preferred**
- Contaminated instrument handling - **Preferred**
- Postoperative care - **Preferred**
- None of the above
- Other

14 - Does the IP program review Operating Room and Procedural area policies and procedures as they pertain to Infection prevention and control?

- Yes - Preferred**
- No
- Unsure

Education & Training

15a - Does the facility provide competency-based training for SSI prevention strategies?

- Yes - Preferred**
- No
- Unsure

15b - What is included in SSI prevention education and training? (**Select all preferred options**)

- Surgery-specific SSI prevention bundles - **Preferred Optional**
- General perioperative infection prevention interventions - **Preferred**
- surgical hand antisepsis - **Preferred**
- Surgical attire and PPE - **Preferred**
- Preoperative bathing - **Preferred**
- Preoperative skin prep - **Preferred**
- OR traffic - **Preferred**
- Restricted areas - **Preferred**
- Antisepsis and surgical technique - **Preferred**
- Postoperative SSI prevention - **Preferred**
- None of the above
- Other

15c - What frequency is SSI training and education provided? (**Select all preferred options**)

- Upon hire - **Preferred**
- Annually - **Preferred**
- When new equipment or protocols are introduced - **Preferred**
- As remediation - **Preferred**
- For targeted improvement efforts - **Preferred**

None of the above

15d - Who receives SSI education? (**Select all preferred options**)

- Clinical Healthcare Personnel - **Preferred**
- Ancillary Services - **Preferred Optional**
- Non-Clinical Healthcare Personnel - **Preferred Optional**
- Clinical Support - **Preferred Optional**
- Students & Trainees - **Preferred Optional**
- Volunteers - **Preferred Optional**
- None
- Other

15e - Are healthcare personnel required to demonstrate competency of the task/skill following each training?

- Yes - Preferred**
- No
- Unsure

15f - Does the facility maintain documentation for the completion of SSI prevention competency for healthcare personnel?

- Yes - Preferred**
- No
- Unsure

Audit & Feedback

16a - Does the facility perform audits to assess SSI prevention?

- Yes - Preferred**
- No
- Unsure

16b - What do the audits measure? (**Select all preferred options**)

- Management and tracking of devices and instrumentation - **Preferred**
- Environment of care (EOC) rounds - **Preferred**
- Environmental cleaning and disinfection - **Preferred**
- Maintenance of the surgical environment (e.g., air handling, doors closed, foot traffic, etc.) - **Preferred**
- Maintenance of the surgical field - **Preferred**
- None of the above
- Other

16c - Do auditors(s) provide immediate real-time feedback to healthcare personnel in the moment?

- Yes - Preferred**
- No
- Unsure

17a - How does the IPC program evaluate adherence to SSI prevention practices and policy?

(Select all preferred options)

IP routinely rounds in the surgical and procedural areas - **Preferred**

IP routinely observes surgical procedures - **Preferred**

IP observes surgical procedures when an increase in SSI or other adverse events are noted - **Preferred**

The surgical department monitors adherence and reports to the IP - **Preferred**

Other

17b - Does the IPC program have a minimum number of observations as a monthly goal?

Yes - Preferred

No

Unsure

18 - Does the facility utilize SSI data to impact performance improvement?

Yes - Preferred

No

Unsure

19 - Which SSI data do frontline healthcare personnel receive? **(Select all preferred options)**

Facility-wide SSI data (SIR, superficial, deep, or organ space, etc.) - **Preferred**

Surgeon-specific SSI data - **Preferred**

Antibiotic usage data - **Preferred Optional**

Procedure-specific SSI data - **Preferred**

Other

20 - What data is provided to the Infection Control Committee (ICC) or Quality Improvement Committee? **(Select all preferred options)**

SSI Audit data - **Preferred Optional**

Surgical Site infections - **Preferred**

Procedure-specific SSI data - **Preferred**

Antimicrobial consumption - **Preferred Optional**

None

Other

Device Evaluation and Tracking

21 - Do OR staff review indicators and instruments prior to procedure start to ensure sterilization parameters are met?

Yes - Preferred

No

Unsure

22a - Does the OR track equipment and sets used during cases?

Yes - Preferred

No

Unsure

22b - Are the equipment or set tracking numbers documented in the patient record?

Yes - Preferred

No

Unsure

Immediate Use Steam Sterilization

23a - Does the OR utilize immediate use steam sterilization (IUSS)? **(Not Scored – Informational Only)**

Yes

No

Unsure

23b - Is documentation complete when IUSS is performed? **(Not Scored – Informational Only)**

Yes

No

Unsure

23c - What is included in the documentation if IUSS is performed? **(Select all preferred options)**

Item - **Preferred**

Patient information - **Preferred**

Surgeon - **Preferred**

Date of procedure - **Preferred**

Indicator loads - **Preferred**

Indication for IUSS - **Preferred**

Other

23d - Is there a goal to reduce IUSS usage at the facility?

Yes - Preferred

No

Unsure

23e - Does the facility investigate when elevated IUSS instances occur?

Yes - Preferred

No

Unsure

Environment of Care

24a - Does the facility monitor and validate the HVAC settings of procedural areas?

Yes - Preferred

No

Unsure

24b - What frequency are pressure differentials manually validated in procedural areas and operating rooms? **(Not Scored – Informational Only)**

Daily prior to opening

Weekly

Monthly

- Annually
- Other

25a - Does the facility have backup procedures in place if air exchanges, humidity or temperature parameters are not met? **(Not Scored – Informational Only)**

- Yes
- No
- Unsure

25b - What downtime procedure strategies are in place if parameters are not met? **(Select all preferred options)**

- Notification to facilities management - **Preferred**
- Notification to Infection control/ hospital leadership - **Preferred**
- Pause of active procedures if necessary - **Preferred**
- Notification to surgical services personnel - **Preferred**
- Delay of procedures until parameters are met or movement of procedure to different location - **Preferred**
- Validation of parameters prior to reopening - **Preferred**
- IPC program performs surveillance for period of time. - **Preferred**
- Risk assessment of situation - **Preferred**
- None of the above
- Other

26 - Are doors self-closing in surgical areas?

- Yes - Preferred**
- No
- Unsure

27 - Is the surgical or procedural area divided into restricted zones?

- Yes - Preferred**
- No
- Unsure

28 - Are hand hygiene locations placed outside of each OR or directly accessible in or near procedural areas?

- Yes - Preferred**
- No
- Unsure

Environmental Cleaning

29a - Does the surgical services department have a cleaning policy specific to surgical and procedural areas?

- Yes - Preferred**
- No
- Unsure

29b - What is included in the policy? (**Select all preferred options**)

- Damp dusting of horizontal surfaces prior to first surgical procedure of the day - **Preferred**
- Room turnover between procedures - **Preferred**
- Terminal cleaning and disinfection at the end of procedure day - **Preferred**
- Scheduled maintenance cleaning - **Preferred**
- Cleaning of preop/postop areas between patients - **Preferred**
- Cleaning and disinfection of in-room medical equipment - **Preferred**
- Clearly defined roles and responsibilities for surgical personnel cleaning and disinfection - **Preferred**
- High touch surface cleaning - **Preferred**
- None of the above
- Other

30 - Do surgical cleaning staff use surgical-specific checklists for cleaning?

- Yes - Preferred**
- No
- Unsure

Guidance

Surgical Site Infection Surveillance

Core Element Description: Assessment of surgical site infection surveillance practices within the facility.

Free Access: Guidelines

World Health Organization. (2018) Protocol for surgical site infection surveillance with a focus on settings with limited resources. <https://www.who.int/publications/i/item/protocol-for-surgical-site-infection-surveillance-with-a-focus-on-settings-with-limited-resources>

Surgical Improvement Programs

Core Element Description: Assessment of surgical improvement programs within the facility.

Purchase Required: Resources

American College of Surgeons: National Surgical Quality Improvement Program. (2022, January 4). Introducing a new resource to improve surgical quality for patients. <https://www.facs.org/quality-programs/data-and-registries/acs-nsqip/>

Antimicrobial Stewardship

Core Element Description: Assessment of antimicrobial stewardship practices within the facility.

Free Access: Guidelines

Berríos-Torres, S.I., Umscheid, C.A., Bratzler, D.W., Leas, B., Stone, E.C., Kelz, R.R., Reinke, C.E., Morgan, S., Solomkin, J.S., Mazuski, J.E., Patchen Dellinger, E., Itani, K.M.F., Berbari, E.F., Segreti, J., Parvizi, J., Blanchard, J., Allen, G., Kluytmans, J.A.J.W., Donlan, R., Schechter, W.P and the Healthcare Infection Control Practices Advisory Committee. (2017). Centers for Disease Control and Prevention Guideline for the Prevention of Surgical Site Infection, 2017. Journal of the American Medical Association Surgery, 152(8), 784–791. <https://jamanetwork.com/journals/jamasurgery/fullarticle/2623725>

Berríos-Torres, S.I., Umscheid, C.A., Bratzler, D.W., Leas, B., Stone, E.C., Kelz, R.R., Reinke, C.E., Morgan, S., Solomkin, J.S., Mazuski, J.E., Patchen Dellinger, E., Itani, K.M.F., Berbari, E.F., Segreti, J., Parvizi, J., Blanchard, J., Allen, G., Kluytmans, J.A.J.W., Donlan, R., Schechter, W.P and the Healthcare Infection Control Practices Advisory Committee. (2017). Centers for Disease Control and Prevention Guideline for the Prevention of Surgical Site Infection, 2017. Journal of the American Medical Association Surgery, 152(8), 784–791. <https://jamanetwork.com/journals/jamasurgery/fullarticle/2623725>

Section: Parenteral Antimicrobial Prophylaxis

Bratzler D.W., Dellinger E.P., Olsen K.M., Perl T.M., Auwaerter P.G., Bolon M.K., Fish D.N., Napolitano L.M., Sawyer R.G., Slain D., Steinberg J.P., Weinstein, R.A. (2013) Clinical practice guidelines for antimicrobial prophylaxis in surgery. <https://backend.production.deepblue-documents.lib.umich.edu/server/api/core/bitstreams/fd21c987-3643-4741-84a7-4b7594cd7b97/content>

Policy & Procedure

Core Element Description: Assessment of policy and procedures related to surgical site infection prevention practices within the facility.

Core Element Guidance:

Centers for Disease Control and Prevention, National Health and Safety Network. (2021, December 21). Surgical Site Infection (SSI) Events <https://www.cdc.gov/nhsn/psc/ssi/index.html>

World Health Organization. (2016). Global guidelines for the prevention of surgical site infection. Surgical site infection. <https://www.who.int/teams/integrated-health-services/infection-prevention-control/surgical-site-infection>

Berríos-Torres, S.I., Umscheid, C.A., Bratzler, D.W., Leas, B., Stone, E.C., Kelz, R.R., Reinke, C.E., Morgan, S., Solomkin, J.S., Mazuski, J.E., Patchen Dellinger, E., Itani, K.M.F., Berbari, E.F., Segreti, J., Parvizi, J., Blanchard, J., Allen, G., Kluytmans, J.A.J.W., Donlan, R., Schechter, W.P and the Healthcare Infection Control Practices Advisory Committee. (2017). Centers for Disease Control and Prevention Guideline for the Prevention of Surgical Site Infection, 2017. Journal of the American Medical Association Surgery, 152(8), 784–791. <https://jamanetwork.com/journals/jamasurgery/fullarticle/2623725>

Free Access: Resources

Association for Professionals in Infection Control and Epidemiology. (2010). Guide to the elimination of orthopedic surgical site infections. <https://apic.org/wp-content/uploads/2019/10/APIC-Ortho-Guide.pdf>

Purchase Required: Resources

Fry, D.E., & Miller, S.N. (2025). Surgical Site Infection. In Boston K.M, et al, eds. APIC Text. <https://text.apic.org/toc/prevention-measures-for-healthcare-associated-infections/surgical-site-infection>

Education & Training

Core Element Description: Assessment of education and training of healthcare personnel to appropriately perform surgical site infection prevention practices as it relates to their job role.

Purchase Required: Regulatory

Test Purchase Required: Regulatory - Purchase Required: Regulatory TSET01111

Audit & Feedback

Core Element Description: Assessment of audit and feedback practices for surgical site infection prevention practices.

Free Access: Guidelines

Centers for Disease Control and Prevention. (2002) Guideline for Hand Hygiene in Health-Care Settings: Recommendations of the Healthcare Infection Control Practices Advisory Committee and the HICPAC/SHEA/APIC/IDSA Hand Hygiene Task Force. MMWR 2002;51. <https://www.cdc.gov/mmwr/PDF/rr/rr5116.pdf>

Free Access: Resources

Washer, L., Gilmartin, H.M., Olmstead, R. Centers for Disease Control and Prevention. (n.d.) Hand Hygiene: Education, Monitoring, and Feedback. <https://www.cdc.gov/infection-control/media/pdfs/Strive-HH102-508.pdf>

Device Evaluation and Tracking

Core Element Description: Assessment of device evaluation and device tracking practices as it relates to surgical site infection prevention.

Purchase Required: Regulatory

TesT Purchase Required: Regulatory - Purchase Required: RegulatoryTSET01111

Immediate Use Steam Sterilization

Core Element Description: Assessment of the immediate-use steam sterilization practices within the facility.

Free Access: Regulatory

Centers for Medicare and Medicaid Services. (2014). Change in terminology and update of survey and certification (S&C) memorandum 09-55 regarding immediate use steam sterilization (IUSS) in surgical settings. <https://www.cms.gov/medicare/provider-enrollment-and-certification/surveycertificationgeninfo/downloads/survey-and-cert-letter-14-44.pdf>

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The Joint Commission. (2017). What are important considerations associated with immediate-use steam sterilization? <https://www.jointcommission.org/en-us/knowledge-library/support-center/standards-interpretation/standards-faqs/000002122>

Environment of Care

Core Element Description: Assessment of the environment of care related to surgical site infection practices.

Free Access: Guidelines

Sehulster LM, Chinn RYW, Arduino MJ, Carpenter J, Donlan R, Ashford D, Besser R, Fields B, McNeil MM, Whitney C, Wong S, Juranek D, Cleveland J. Guidelines for environmental infection control in health-care facilities. Recommendations from CDC and the Healthcare Infection Control Practices Advisory Committee (HICPAC). Chicago, IL: American Society for Healthcare Engineering/American Hospital Association, 2004. https://www.cdc.gov/infection-control/media/pdfs/guideline-environmental-h.pdf?CDC_AAref_Val=https://www.cdc.gov/infectioncontrol/pdf/guidelines/environmental-guidelines-P.pdf

Purchase Required: Standards

American Society of Heating, Refrigerating and Air-Conditioning Engineers. (2018). ASHRAE 188-2018. Legionellosis: Risk Management for Building Water Systems (ANSI Approved) https://store.accuristech.com/ashrae/standards/ashrae-188-2021?product_id=2229689

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Environmental Cleaning

Core Element Description: Assessment of the environmental cleaning practices within the facility.

Free Access: Resources

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Purchase Required: Guidelines

Association for the Health Care Environment. Practice Guidance for Healthcare Environmental Cleaning (3rd ed.). Association for the Health Care Environment. <https://www.ahe.org/practiceguidance>

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Additional Guidance

Free Access: Guidelines

Centers for Disease Control and Prevention. (2024, March 19). Cleaning supplies and equipment. <https://www.cdc.gov/healthcare-associated-infections/hcp/cleaning-global/supplies-and-equipment.html>

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