

2023 NHSN Skin and Soft Tissue (SST) Infection Checklist

Documentation Review Checklist		
SST-SKIN AND SOFT TISSUE INFECTION		
BRST-Breast infection or mastitis		
Element	Element Met	Date
A breast abscess or mastitis must meet at least one of the following criteria:		
1. Patient has organism(s) identified from affected breast tissue or fluid obtained by invasive procedure or from drainage from an aseptically-placed drain 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"/>	
2. Patient has a breast abscess or other evidence of infection on gross anatomic or histopathologic exam.	<input type="checkbox"/>	
3. Patient has fever (>38.0°C) and local inflammation of the breast AND Physician initiates antimicrobial therapy within 2 days of onset or worsening of symptoms.	<input type="checkbox"/>	
Reporting instructions: <ul style="list-style-type: none"> 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 a deep incisional SSI. BRST Criterion 3 is not eligible as an Organ/Space SSI following a BRST procedure. 		

SST-SKIN AND SOFT TISSUE INFECTION		
BURN-Burn infection		
Element	Element Met	Date
Burn infections must meet the following criteria:		
1. Patient has a change in burn wound appearance or character, such as rapid eschar separation, or 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).	<input type="checkbox"/>	
Reporting instruction: <ul style="list-style-type: none"> Report BURN in the setting of an infected burn covered with a temporary graft or dressing. In the setting of a permanent skin graft (autograft) over a burn wound, use the SKIN or ST criteria. 		



SST-SKIN AND SOFT TISSUE INFECTION

CIRC-Newborn circumcision infection

Element	Element Met	Date
Circumcision infection in a newborn (≤ 30 days old) must meet at least <u>one</u> of the following criteria:		
1. Newborn has purulent drainage from circumcision site.	<input type="checkbox"/>	
2. Newborn has at least <u>one</u> of the following signs or symptoms at circumcision site:		
• Erythema*	<input type="checkbox"/>	
• Swelling*	<input type="checkbox"/>	
• Tenderness*	<input type="checkbox"/>	
AND		
• Pathogen identified from circumcision 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).	<input type="checkbox"/>	
3. Newborn has at least <u>one</u> of the following signs or symptoms at circumcision site:		
• Erythema*	<input type="checkbox"/>	
• Swelling*	<input type="checkbox"/>	
• Tenderness*	<input type="checkbox"/>	
AND		
Common commensal is identified from circumcision 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)	<input type="checkbox"/>	
AND		
Physician initiates antimicrobial therapy within <u>two</u> days on onset or worsening of symptoms.	<input type="checkbox"/>	
<i>*With no other recognized cause documented by physician</i>		



SST-SKIN AND SOFT TISSUE INFECTION

SKIN-Skin infection (skin and/or subcutaneous) excluding decubitus ulcers, burns, and infections at vascular access sites (see VASC definition)

Element	Element Met	Date
Skin infections must meet at least <u>one</u> of the following criteria:		
1. Patient has at least <u>one</u> of the following:		
• Purulent drainage	<input type="checkbox"/>	
• Pustules	<input type="checkbox"/>	
• Vesicles	<input type="checkbox"/>	
• Boils (excluding acne)	<input type="checkbox"/>	
2. Patient has at least <u>two</u> of the following localized signs or symptoms:		
• Pain* or tenderness*	<input type="checkbox"/>	
• Swelling*	<input type="checkbox"/>	
• Erythema*	<input type="checkbox"/>	
• Heat*	<input type="checkbox"/>	
AND at least <u>one</u> of the following:		
a. Organism(s) identified from aspirate or drainage from affected site by a culture or non-culture based testing method, which is performed for purposes of clinical diagnosis and treatment for example, not Active Surveillance Culture/Testing (ASC/AST). 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 (<i>Corynebacterium</i> spp. not <i>C. diphtheria</i>), <i>Bacillus</i> spp. (not <i>B. anthracis</i>), <i>Propionibacterium</i> spp., coagulase-negative staphylococci (including <i>S. epidermidis</i>), viridans group streptococci, <i>Aerococcus</i> spp., <i>Micrococcus</i> spp., and <i>Rhodococcus</i> spp. For a full list of Common Commensals see the Common Commensal tab of the NHSN organisms list.	<input type="checkbox"/>	
b. Multinucleated giant cells seen on microscopic examination of affected tissue.	<input type="checkbox"/>	
c. Diagnostic single antibody titer (IgM) or 4-fold increase in paired sera (IgG) for organism.	<input type="checkbox"/>	

**With no other recognized cause documented by physician*

Reporting instructions:

- Do not report acne as a skin/soft tissue HAI.
- Report SKIN or ST criteria in the setting of a permanent skin graft (autograft) over a burn wound.
- 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 BURN in the setting of an infected burn covered with a temporary graft or dressing.
 - Report breast abscesses or mastitis as BRST.
 - Report localized infection at a vascular access site as a VASC unless there is an organism identified from blood, meeting LCBI criteria, which should instead be reported as an LCBI (see VASC definition).

SST-SKIN AND SOFT TISSUE INFECTION

ST-Soft tissue infection (muscle and/or fascia [for example, necrotizing fasciitis, infectious gangrene, necrotizing cellulitis, infectious myositis, lymphadenitis, lymphangitis, or parotitis]) excluding decubitus ulcers, burns, and infections at vascular access sites (see VASC)

Element	Element Met	Date
Soft tissue infections must meet at least one of the following criteria:		
1. Patient has organism(s) identified from tissue or 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).	<input type="checkbox"/>	
2. Patient has purulent drainage at affected site.	<input type="checkbox"/>	
3. Patient has an abscess or other evidence of infection on gross anatomic or histopathologic exam.	<input type="checkbox"/>	
Reporting instructions: <ul style="list-style-type: none"> • Report SKIN or ST criteria in the setting of a permanent skin graft (autograft) over a burn wound. • Apply the site-specific definitions identified below (not ST) for the following: <ul style="list-style-type: none"> o Report infected decubitus ulcers as DECU. o Report infected burns as BURN. o Report BURN in the setting of an infected burn covered with a temporary graft or dressing. o Report infection of deep pelvic tissues as OREP. o Report localized infection at a vascular access site as a VASC unless there is an organism identified from blood, then it should be reported as an LCBI (see VASC definition). 		

SST-SKIN AND SOFT TISSUE INFECTION

DECU-Decubitus ulcer infection (also known as pressure injury infection), including both superficial and deep infections

Element	Element Met	Date
Decubitus ulcer infections must meet the following criterion:		
1. Patient has at least two of the following signs or symptoms:		
• Erythema*	<input type="checkbox"/>	
• Tenderness*	<input type="checkbox"/>	
• Swelling of decubitus wound edges*	<input type="checkbox"/>	
AND		
Organism(s) identified from needle aspiration of fluid or 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).	<input type="checkbox"/>	
<i>*With no other recognized cause documented by physician</i>		



SST-SKIN AND SOFT TISSUE INFECTION	
UMB-Omphalitis	
Element	Element Met
Omphalitis in a newborn (≤ 30 days old) must meet at least one of the following criteria:	
1. Patient has erythema or drainage from umbilicus	<input type="checkbox"/>
AND at least one of the following:	
a. Organism(s) identified from drainage or needle aspirate 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"/>
b. 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).	<input type="checkbox"/>
2. Patient has erythema <u>and</u> purulence at the umbilicus.	<input type="checkbox"/>
Reporting instructions: <ul style="list-style-type: none"> Report infection of the umbilical artery or vein related to umbilical catheterization as VASC if there is no accompanying organism identified from blood specimen. However, if the patient meets criteria for LCBI, report as a LCBI (see VASC definition). Catheterized umbilical venous catheter (UVC) or umbilical arterial catheter (UAC) sites are not eligible for UMB criteria. 	