LET’S REDUCE SSI TOGETHER

SSI’s Impact on Hospitals
Take Action on Your Hospital’s SSI Prevention Bundle
Successful Colorectal SSI Prevention Bundles

STOP SURGICAL SITE INFECTION

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SSI’S IMPACT ON HOSPITALS

SSI has added **$3 TO $10 BILLION** to the cost of healthcare.

SSI patients have a **2 TO 11 TIMES** higher risk of death than patients without an SSI.

SSI patients are **60%** more likely to spend time in ICU.

SSI patients require an additional cost of **$27,631** per infection.

SSI patients are **5X** more likely to be readmitted to the hospital.

SSI patients spend an additional **7 - 11** days in the hospital.

Over **8,000** deaths were associated with over **290,000** cases of SSI in one year.

2% TO 5% of patients undergoing inpatient surgery will develop an SSI.
Mobilizing Your SSI Prevention Team

Your hospital’s success in SSI prevention may be largely dependent on the recruitment and involvement of a dedicated SSI team. Members of your SSI team should be qualified and committed to spearheading your hospital’s SSI program. These team members should be responsible for communicating and implementing all SSI prevention practices and driving participation and compliance across all ranks and disciplines.

Attributes to consider as you mobilize your team:

- Multidisciplinary representation
- Executive leadership participation
- Passion for SSI prevention
- Commitment to actively participate
- Strong communication skills

TAKE ACTION ON YOUR HOSPITAL’S SSI PREVENTION BUNDLE
Assessing Your Baseline

By conducting an assessment of your hospital’s current SSI prevention practices, you will be better poised to address your hospital’s performance goals. Accurate baseline knowledge will support the development of an effective SSI prevention bundle that includes customized and evidence-based measures to target your hospital’s greatest needs.

Questions to consider:

• What are your current SSI rates?
• What are your current bundle measures?
• How do you track and monitor your outcomes?
• How invested is your team and hospital in implementing change?

Investing in Education

Providing your physicians, staff and patients with meaningful education based on your hospital’s needs will help cultivate the adoption of clinically proven methods and influence positive change. Increasing awareness of best practices and empowering your staff with actionable knowledge will support and enhance your SSI prevention efforts.

Opportunities to provide for further education:

• National symposiums and congresses focused on SSI prevention best practices
• In-hospital workshops
• SSI awareness competency training
• Patient education classes
• Physician- and patient-engaging mobile applications

Implementing and Monitoring

After you have established your SSI prevention bundle and educated appropriate audiences on the importance and benefits of each measure, it is necessary to monitor and report your challenges and successes. Consistent surveillance will allow your SSI team to be aware of ongoing opportunities for education and improvement.

Strategies to consider for surveillance:

• Regular meetings with the SSI team
• Action plans for fallouts
• Dashboards to evaluate major trends

Through active surveillance, your SSI team will be better equipped to continue to improve your hospital’s SSI prevention practices and demonstrate improvement through measurable data.
SUCCESSFUL COLORECTAL SSI PREVENTION BUNDLES

*Cedars-Sinai Medical Center*

Los Angeles, California

**Multidisciplinary team**
- Executives
- Hospital managers
- Colorectal surgeons
- Anesthesiologists
- Nurses
- Other support staff

**Evidence-based measures**

**Preoperative**
- CHG Shower
- Bowel Prep with Choice of Antibiotics (optional)

**Intraoperative**
- Antibiotics
- Antibiotic Redosing
- CHG Skin Prep
- Wound Protector
- Observe Hand Hygiene
- Skin Closure Protocol

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<th>Postoperative</th>
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<td>Sterile Dressing</td>
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<td>Dedicated Wound Closure Tray</td>
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## Results

### Pre-Bundle

- **SSI Rate**: 15.5%

### Post-Bundle

- **SSI Rate**: 5.5%

## Duke University Hospital

*Durham, North Carolina*

### Multidisciplinary team

Surgeons, anesthesiologists, clinic nurses, operating room staff, unit nurses, house staff, and hospital mid-level providers

### Evidence-based measures

**Preoperative**

- Patient Education
- Mechanical Bowel Preparation with Oral Antibiotics
- Chlorhexidine Shower
- Antibiotic Prophylaxis
- Skin Prep

**Postoperative**

- Patient Education
- Timely Dressing Removal
- Daily Chlorhexidine Washings
- Temperature Control
- Glycemic Control

### Results

**Pre-Bundle**

- Superficial SSI Rate: 19.3%

**Post-Bundle**

- Superficial SSI Rate: 5.7%
### Multidisciplinary team
Surgeons, quality administration, anesthesia, nurses, statisticians, coders, and other support staff

### Evidence-based measures

#### Preoperative
- Set OR Temperature

#### Pre-incision
- Administer Antibiotic
- Prep Skin
- Perform Universal Prep
- Double Glove
- Initiate Intraoperative Warming
- Prepare Closing Pan

#### Intraoperative
- Use Alexis® Wound Protector
- Perform Irrigation

#### Postoperative
- Remove Instruments
- Retrieve Closing Pan
- Re-Glove
- Re-Towel Surgical Wound
- Pass Off New Suction and Bovie
- Close Fascia
- Close Skin
- Apply Sterile Dressing

### Results

#### Pre-Bundle
- SSI Rate: 18.79%

#### Post-Bundle
- SSI Rate: 8.17%

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6. Murthy R. Implementing a bundle to reduce colorectal surgical site infection. Talk presented at: Reducing SSI: Take action with evidence; May 2, 2014; Baltimore, MD.


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