

BACKGROUND & EXPECTED GOAL

An upward trend of surgical site infections (SSI) was observed internally in 2014-2015. Although, the trend was below the CDC benchmark; our stakeholders saw this as an opportunity for improvement.

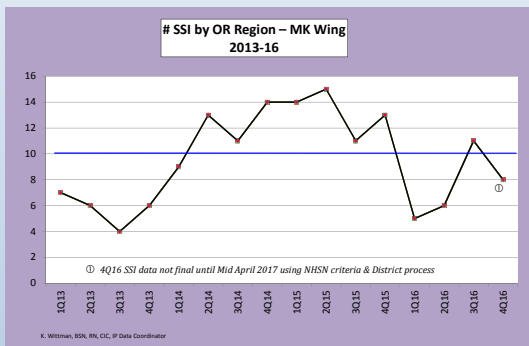
The overall committee goal was to reduce SSI's in the Mineral King OR to less than 10 per quarter. An SSI Subcommittee was formed consisting of the following stakeholders:

- Surgeons
- Infectious Disease (ID) physician
- ID Pharmacist
- Infection Prevention (Data & Field)
- Surgical Service Leaders
- OR educator and clinical staff
- APN & NSQIP Teams
- EVS & Facilities
- Anesthesiology

As part of the National Health and Safety Network (NHSN), a surgical site infection must be reported up to 30 days post-operatively or post-discharge. For surgeries involving implants, the infection can be identified 90 days post-operatively.

REDUCTION PLAN & IMPLEMENTATION

1. Pre-op **CHG bath** standardized procedure for all pre-surgical patients (Sep 2014).
2. Full implementation of updated **surgical attire policy** (Mar 2015).
3. **SSI Subcommittee** formed (April 2015).
4. District wide **patient education** implementation (Apr 2015).
5. **SSI Bundle** approved (Jul 2015).
6. **Colorectal Bundle** implemented (Sep 2015).
7. **Hair clipping** outside of surgical suites (Sep 2015).
8. Tighter **environmental controls** in surgical suites during construction (Oct 2015).
9. Minimize **OR traffic** specifically in implant surgeries Including implementation of **vendor carts** (Oct 2015).
10. Department of Surgery consensus to use **CHG skin prep** unless contraindicated. (Feb 2016).
11. **SSI Discharge Task Force** (Feb 2016).
12. **HVAC system cleaned** in all surgical suites (Mar 2016).
13. Implementation of **forced-air warming units** on post- surgical floors & 3 West (July 2016).
14. EVS: Switch to **Oxivir TB Wipes** in the OR. (July 2016)



RESULTS

After full implementation, SSIs in the **MK OR** were reduced by **40%**. Internally, we exceeded our reduction goal of 10 per quarter to an average of **7.5 SSIs** per quarter.



FUTURE STEPS & ACKNOWLEDGEMENTS

A special thanks to the clinical staff in the OR for their dedication and participation.

It takes a cohesive and dynamic team to improve patient safety. Together we remain dedicated to sustainable change that will improve patient outcomes. The stakeholders will pursue the following initiatives for the future:

- ✓ Implement Hysterectomy Bundle
- ✓ Prepare for transition to Cerner to accommodate comprehensive SSI prevention discharge order sets.
- ✓ Pre-operatively increase Cefazolin dosage for patients with a BMI > 40.