

Patient Details Hidden [Show](#)[Show/Hide Annotations](#) [Stickies: Toggle All](#) [Toggle Open](#) [Toggle Resolved](#)

Form 6: Infection

[Toggle Question Year/Info](#)[Print this Form](#)

Not Started

- 1** Is this infection a severe infection that requires IV therapy, hospitalization for infection >2 days, or escalation of care in an already hospitalized patient?
- Yes
 No

If no to this question, this form is not required

2 Date of Infection

Date of diagnosis or clinical presentation, whichever date is earliest.
MM/DD/YYYY

Question Added: 01 JAN 1993

- 3** Drug Therapy at Time of Infection
- Yes
 No
 Unknown

Indicate if there was an ongoing prophylactic drug therapy at time (date) of infection diagnosis (i.e. valganciclovir for CMV prophylaxis post-transplant).

Do not include drugs that have been prescribed to treat a specific previous

infection unless that previous infection is considered to be resolved and the patient is now on long-term prophylaxis.

Do not include therapy for the current infection. Drug therapy for the current infection should be entered under 'intervention'.

Question Added: 01 JAN 1993

3a Specify drug therapy at time of infection.

- Acyclovir
 Alemtuzumab (Campath)
 ATGAM
 Azathioprine (Imuran)
 Basiliximab (Simulect)
 Bortezomib (Velcade)
 CMV Immunoglobulin, Cytogam
 Cyclosporine
 Cytoxan (cyclophosphamide)
 Dapsone
 Everolimus (Certican)
 Fluconazole
 Ganciclovir or Valganciclovir
 Immunoglobulin, IV Ig
 Methotrexate
 Mycophenylate, MMF (Cellcept, Myfortic)
 Nystatin
 Oseltamivir
 Pentamidine
 Prednisone
 Rituximab (Rituxan)
 Sirolimus (Rapamycin)
 Tacrolimus (Prograf, FK506)
 Thymoglobulin/ATG
 Trimethoprim-sulfamethoxazole, Septra

- Valacyclovir
 Other, specify

Question Added: 01 JAN 1993

3a

Ganciclovir or Valganciclovir IV
 PO

(No type selected)

Only organisms within a single category can be selected. For multiple types of infections, add additional Infection forms.

- No organism identified
 Unknown

4 Bacterial Infection

Select all that apply within this category

- Bordatella Pertussis
 Chlamydia
 Clostridium Difficile
 Enterobacter
 Enterococcus (including VRE)
 Escherichia Coli
 Haemophilus influenzae
 Haemophilus, NOS
 Klebsiella, NOS
 Moraxella
 Mycoplasma pneumonia
 Nocardia
 Pseudomonas
 Salmonella
 Serratia
 Staphylococcus Aureus, Methicillin/Oxacillin Resistant (MRSA)
 Staphylococcus Aureus, Methicillin/Oxacillin Sensitive (MSSA)
 Staphylococcus, Coagulase-Negative (Staph Epidermidis)
 Staphylococcus, Other
 Streptococcus Pneumoniae (Streptococcal Pneumonia)
 Streptococcus, Group A (S. pyogenes)
 Streptococcus, Viridians Group
 Streptococcus, NOS
 Streptococcus, Group B (S. agalactiae)
 Stenotrophomonas
 Mycobacterium tuberculosis (TB)
 Nontuberculous mycobacterium (NTM)
 Bacterial Organism(s)

4 Fungal Infection

Select all that apply within this category

- Aspergillus
 Candida albicans
 Candida, Not Albicans/Other
 Coccidioidomycosis
 Cryptococcus
 Histoplasmosis
 Mucormycosis
 Pneumocystis (PCP/PJP)
 Fungal Organism(s) Unknown
 Other, specify

Question Added: 01 JAN 1993

4 Protozoan Infection

Select all that apply within this category

- Cryptosporidium
 Giardia
 Toxoplasma (Toxo)
 Protozoan/parasitic Organism(s) Unknown
 Other, specify

Question Added: 01 JAN 1993

4 Viral Infection

Select all that apply within this category

- Adenovirus
 BK Virus
 Coronavirus
 Coxsackievirus (all serotypes)
 Cytomegalovirus, CMV
 Enterovirus
 Epstein Barr Virus, EBV (symptomatic)
 Hepatitis A
 Hepatitis B
 Hepatitis C
 Hepatitis D
 HIV
 Human Herpes Simplex Virus, Type 1/Type 2
 Influenzavirus A
 Influenzavirus B
 Influenzavirus H1N1
 Influenzavirus, NOS
 Metapneumovirus (HMPV)
 Norovirus (Norwalk Virus)
 Parainfluenza
 Parvovirus
 Respiratory Syncytial Virus (RSV)
 Rhinovirus
 Rhino/Enterovirus, NOS
 Rotavirus
 Varicella (Chicken Pox/Shingles)
 West Nile Virus
 Viral Organism(s) Unknown
 Other, specify

Question Added: 01 JAN 1993

Unknown

 Other, specify

Question Added: 01 JAN 1993

5

Location of infection

Check all that apply

- Blood: Culture positive
- Blood: PCR positive
- Bone: Osteomyelitis
- Central nervous system/ brain (ie. Meningitis /Encephalitis)
- Chest tube site infection
- Gastrointestinal infection (ie. Gastritis, colitis, infectious diarrhea)
- Heart (includes endocarditis)
- Hepatic/ liver: Infectious hepatitis
- Intrabdominal/ Peritoneal: Peritonitis
- Pericardium/ pericarditis
- Renal/ kidney/Urinary tract
- Respiratory (includes Pneumonia/ Bronchiolitis/Tracheitis/ Pleuritis)
- Skin or soft tissue: Cellulitis/fasciitis
- VAD infection
- Wound infection within 30 days, deep sternal: Deep sternal wound infection with positive culture or treated with prolonged antibiotics beyond perioperative prophylaxis when culture not obtained or pre-treated involving muscle, bone, and/or mediastinum requiring operative intervention
- Wound infection within 30 days, superficial sternal: Superficial, soft tissue
- Unknown
- Other, specify

Question Added: 01 JAN 1993

5a

Was the blood infection directly attributed to the presence of a central line (ie. organism cultured from blood is not related to an infection at another site)?

- Yes
- No
- Unknown

Question Added: 01 SEPT 2015

5b

VAD Infection Location

Check all that apply

- Cannulae
- Driveline
- Unknown

Question Added: 01 SEPT 2015

6

Location of patient

This is where the patient was at the time they developed the infection

- In Hospital
- Out of Hospital
- Unknown

Question Added: 01 SEPT 2015

7

Intervention

This is for treatments only, not diagnostic procedures.

- Drug therapy : Oral
- Drug therapy: IV or IM
- Invasive Mechanical Ventilation

- Newly required Dialysis (complete Form 14)
- Newly required mechanical support (complete Form 15)
- Surgical therapy, specify
- Unknown
- Supportive Care Only
- Other, specify

Question Added: 01 JAN 1993

7a Intervention - Surgical therapy, specify

(Do not include invasive diagnostic procedures (i.e. biopsies) or short term device placement for therapy (i.e. central line placement, PD placement, or ECMO procedures))

- Surgery
- New Device placed for treatment of infection
- Removal of pre-existing device
- Non-invasive procedure, specify
- Advanced wound care
- Unknown
- Other, specify

Question Added: 29 JUL 2019

7a.i

Surgery, specify

- ENT
- GI
- Dental
- Neurology (Brain, Peripheral/Spine)
- Cardiothoracic
- Nephrology/Urology
- Orthopedic
- Ophthalmology

Question Added: 29 JUL 2019

7a.i.i

GI, specify

- Appendectomy
- Other, specify

Question Added: 29 JUL 2019

7a.ii New Device placed for treatment of infection, specify

- Chest tube
- Long term central line
- Other, specify

Question Added: 29 JUL 2019

7a.iii Removal of pre-existing device, specify

- Replaced during same hospitalization
- Replaced after discharge

Question Added: 29 JUL 2019

7a Non-invasive procedure, specify

Question Added: 29 JUL 2019

7a.iii.i Replaced after discharge, specify

- Permanent pacemaker/AICD
- Long term PD catheter
- Long term central line

- VAD (complete Form 15)
 Other, specify

Question Added: 29 JUL 2019

7a.iv

Advanced wound care, specify

- Drainage procedure
 VAC placement
 Debridement
 Other, specify

Question Added: 29 JUL 2019

7a.iv.i

Drainage procedure, Location

Question Added: 29 JUL 2019

7a.iv.ii

VAC placement, Location

Question Added: 29 JUL 2019

7a.iv.iii

Debridement, Location

Question Added: 29 JUL 2019

8

Outcome at 30 days post-date of infection

Check only one.
Significant long term sequelae means any residual medical problem persisting for > 30 days after the onset of the infection (e.g.) renal failure, respiratory failure.

- Death
 Resolution
 Significant Long Term Sequelae
 Unresolved at 30 days
 Unknown

Question Added: 01 JAN 1993

8a

If death occurred, did the infection contribute to cause of death?

- Yes
 No
 Unknown

Question Added: 01 September 2015

9a

Current Status

Choose all that apply

- Continues in hospital, in intensive or critical care
 Continues in hospital, not in intensive or critical care
 Readmitted to hospital for treatment of infection, currently in intensive care
 Readmitted to hospital for treatment of infection, not in intensive care
 Ongoing therapy with enteral antibiotics
 Ongoing therapy with IV antibiotics
 Other, specify

Question Added: 29 JUL 2019

Question Added: 29 JUL 2019

9b

Details of Sequelae

Choose all that apply

**All current definitions of pediatric ARF or AKI (including KDIGO AKI which is the current recommended definition by peds nephrology) are based on measurements within the first 2 weeks.

**All current definitions of CKD (eGFR < 60 – measured by egfr = (0.413 * height) / creatinine) are based on eGFR < 60 persisting for 3 months.

Kidney Consequences at 30 days

- Acute Kidney Injury (Definition: serum creatinine \geq 2 times baseline) that resolved by 30 days
- Acute Kidney Injury (Definition: serum creatinine \geq 2 times baseline) still present at 30 days
- Chronic kidney insufficiency unchanged from before infection
- Worsened chronic kidney insufficiency
- Currently requiring dialysis

Neurological consequences at 30 days

- Neurological complication that resolved by 30 days and no longer requiring treatment (please specify complication)

- Encephalopathy with ongoing mental status changes or deficits
- Hydrocephalus requiring treatment or VP shunt
- Seizures requiring ongoing therapy
- Residual deficits from stroke

Respiratory Consequences at 30 days

- Need for invasive mechanical ventilation that resolved by 30 days
- Need for non-invasive mechanical (CPAP, BiPAP) ventilation that resolved by 30 days
- Ongoing need for non-invasive ventilation
- New or ongoing need for mechanical vent or trach

GI Consequences at 30 days

- GI symptoms that resolved by 30 days (please specify)

- Ongoing TPN
- Colostomy/ostomy

Post-Transplant Lymphoproliferative Disorder (PTLD) at 30 days

- PTLD (Also complete Form 7)