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Form 6: Infection

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Not Started

- 1 Evidence of Infectious Process Requiring IV Therapy** No
 Yes
 Unknown
- If "no" to both, infection does not meet definition of PHTS severe infection and form should not be completed.

Use a separate form for each infection episode and or type of infection.

- 2 Life Threatening Infection Requiring Oral Therapy** No
 Yes
 Unknown

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

- 4 Drug Therapy at Time of Infection** No
 Yes
 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 – to be included under section 6.

- 4a 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
- Trimethaprim-sulfamethoxazole, Septra
- Valacyclovir
- Other, specify

4b

Ganciclovir or Valganciclovir IV
 PO

6

Type of infection

Use a separate form for each episode and/or type of infection.

- Bacterial
- Fungal
- No Organism Identified
- Protozoan
- Viral
- Unknown

Type of Organism(s)

Indicate all organisms associated with the type of infection.

6a

Organism

7

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

Yes



7a 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)?

No
 Unknown

7b VAD Infection Location Cannulae
 Check all that apply Driveline
 Unknown

8 Location of patient Emergency care, no admit
 In Hospital
 Out of Hospital
 Unknown

9 Intervention Drug therapy : Oral
 Check all that apply Drug therapy: IV or IM
 Mechanical Ventilation
 Surgical therapy, specify
 Unknown
 Other, specify

9a Intervention - Surgical therapy, specify

10 Outcome at 30 days post-date of infection Death
 Resolution
 Significant Long Term Sequelae
 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.
 Unresolved at 30 days
 Unknown

10a If death occurred, did the infection contribute to cause of death? No
 Yes
 Unknown