

Root cause analysis in surgical site infections (SSIs)

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ABSTRACT: *Surgical site infections (SSIs) are wound infections that usually occur within 30 days after invasive procedures. The development of infections at surgical incision site leads to extend of infection to adjacent tissues and structures. Wound infections are the most common infections in surgical patients, about 38% of all surgical patients will develop a SSI. The studies show that among post-surgical procedures, there is an increased risk of acquiring a nosocomial infection. Root cause analysis is a method used to investigate and analyze a serious event to identify causes and contributing factors, and to recommend actions to prevent a recurrence including clinical as well as administrative review. It is particularly useful for improving patient safety systems. The risk management process is done for any given scenario in three steps: perioperative condition, during operation and post-operative condition. Based upon the extensive searches in several biomedical science journals and web-based reports, we discussed the updated facts and phenomena related to the surgical site infections (SSIs) with emphasis on the root causes and various preventive measures of surgical site infections in this review. The web based pubmed, openpdf, Elsevier and other journals were used to retrieve the information.*

Keywords—*Surgical Site Infections (SSIs), Patient Safety Systems, Root Cause Analysis, Risk Management Process.*

I. INTRODUCTION

Surgical site infections are the most common health care associated infections. A number of factors affect the occurrence of these infections such as old age, disease, malnutrition caloric, non-compliance with the standard and transmission based precautions, use objects contaminated during surgery, extended stay in hospital and the long duration of surgery. Root cause analysis is a method used to investigate and analyze a serious or sentinel event (an unexpected occurrence involving death or serious physical or psychological injury or risk) to identify causes and contributing factors, and to recommend actions to prevent a recurrence including clinical as well as administrative review. It is particularly useful for improving patient safety systems (Sberwin, J., 2011).¹ The common pathogens cause infections (sepsis) in surgery are *Staphylococcus aureus*, *Streptococcus milleri*, *Enterococcus faecium*, *Escherichia coli*, *Candida albicans* and *Pseudomonas aeruginosa*. Root cause analysis focuses primarily on system and processes not individual performance (Holloway, 2004).² The organisation include perioperative nurses, surgeons, anaesthesiology care providers, risk managers, quality improvement coordinators and other related staff members should overhaul perioperative assessment care plans and multidisciplinary planning records to reduce the risk of sepsis in the patients (Anderson, Fagerhaug and Beltz, 2010).³

The main cause of the appearance of surgical wound infection is the entrance of a microorganism during surgical intervention. A result of study conducted in United States shows that from all the nosocomial infection the surgical wound infection is most common. Reports show about 14 to 16% wound infection occurs in hospitalized patients and 38% of the surgical patients (Owens & Stoessel, 2008).⁴ During the surgical procedure microorganisms can penetrate the body through various ways such as contaminated environment, which mainly includes operating room and non-sterile techniques like unsanitary hands and non-sterile items. Moreover, at the same time if patient's body is not sterile, that is also act as a door for entry of microbes. Most

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June A. Schmele



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Youmans and Winn Neurological Surgery E-Book H. Richard Winn, 2022-01-21 Widely regarded as the definitive reference in the field Youmans and Winn Neurological Surgery offers unparalleled multimedia coverage of the entirety of this complex specialty Fully updated to reflect recent advances in the basic and clinical neurosciences the 8th Edition covers everything you need to know about functional and restorative neurosurgery deep brain stimulation stem cell biology radiological and nuclear imaging and neuro oncology as well as minimally invasive surgeries in spine and peripheral nerve surgery and endoscopic and other approaches for cranial procedures and cerebrovascular diseases In four comprehensive volumes Dr H Richard Winn and his expert team of editors and authors provide updated content a significantly expanded video library and hundreds of new video lectures that help you master new procedures new technologies and essential anatomic knowledge in neurosurgery Discusses current topics such as diffusion tensor imaging brain and spine robotic surgery augmented reality as an aid in neurosurgery AI and big data in neurosurgery and neuroimaging in stereotactic functional neurosurgery 55 new chapters provide cutting edge information on Surgical Anatomy of the Spine Precision Medicine in Neurosurgery The Geriatric Patient Neuroanesthesia During Pregnancy Laser Interstitial Thermal Therapy for Epilepsy Fetal Surgery for Myelomeningocele Rehabilitation of Acute Spinal Cord Injury Surgical Considerations for Patients with Polytrauma Endovascular Approaches to Intracranial Aneurysms and much more Hundreds of all new video lectures clarify key concepts in techniques cases and surgical management and evaluation Notable lecture videos include multiple videos on Thalamotomy for Focal Hand Dystonia and a video to accompany a new chapter on the Basic Science of Brain Metastases An extensive video library contains stunning anatomy videos and videos demonstrating intraoperative procedures with more than 800 videos in all Each clinical section contains chapters on technology specific to a clinical area Each section contains a chapter providing an overview from experienced Section Editors including a report on ongoing controversies within that subspecialty Enhanced eBook version included with purchase Your enhanced eBook allows you to access all of the text figures and references from the book on a variety of devices

Quality Measures Deeb N. Salem, 2020-03-11 While the healthcare system continues to shift towards more emphasis on quality metrics there remains a substantial gap between the expectations of healthcare policies and standards of hospital administrations vs the realistic care provided by the average healthcare provider This book offers the perspective of the healthcare provider and aims to fulfill the unmet need to educate other healthcare providers on recognizing quality measures and understanding how to achieve them to meet standards of quality care This book covers the historical perspective of quality measures the context of their existence their utility and the contemporary issues related to their use Simultaneously it critically addresses the quality of these quality metrics and presents the evidence available to date on the efficacy and the limitations of these quality measures This text is all inclusive and is organized into chapters that include the evolution of quality metrics in healthcare the practical role of hospitals as well

as the practical role of individual healthcare providers in addressing quality metrics The chapters also include assessment of quality metrics that uniquely pertain to medical and surgical practices as well as non clinical quality metrics that specifically target undergraduate and graduate medical training Finally the book reflects on the use of contemporary quality metrics and their impact on outcomes patient care and public health and policy making In these chapters tables and illustrations including algorithms will be used to provide systematic approaches to common issues related to quality metrics In addition historical anecdotes and case presentations will be used to address pearls in contemporary practice of quality metrics Quality Measures is the definitive reference on quality metrics in healthcare and is a valuable resource for healthcare providers trainees administrators and public health agencies *Hoshin Kanri for Healthcare* Gerard A. Berlanga, Brock C. Husby, Heather K. Anderson, 2018-05-11 The best healthcare organizations have developed effective approaches to develop compelling strategic visions and strategies based on long term thinking and continue to apply Lean principles across their organizations to create a culture of continuous improvement Establishing effective strategies and Toyota style Hoshin Kanri enables healthcare organizations to align everyone in the organizations and creates a unique competitive advantage This book follows a regional hospital s journey through the creation of long term strategic goals and Toyota Style strategy deployment **General Surgery Risk Reduction** Brendon J. Coventry, 2014-01-13 General Surgery Risk Reduction is part of the series Surgery Complications Risks and Consequences edited by Brendon Coventry **Assurance of Sterility for Sensitive Combination Products and Materials** Byron J. Lambert, Stan Lam, Joyce M. Hansen, Trabue D. Bryans, 2019-11-30 Assurance of Sterility for Sensitive Combination Products and Materials New Paradigms for the Next Generation of Medical Devices and Pharmaceuticals discusses the medical device industry and existing challenges regarding the exciting new world of sensitive combination products SCPs and their terminal sterilization This book reassesses the current assumptions to assure the patient s best interests are met in the development of increasingly rigorous sterilization methods used to counteract MRSA and other super bugs In addition the book discusses the special challenges faced with implantable medical devices sterilization requirements and further methods needed for material selection and the design process This book is unique in taking a holistic end to end approach to sterilization with a particular focus on materials selection and product design Introduces sterilization principles at the material selection and design stages Addresses the industry need for new sterilization processes for new medical devices and biomaterials Provides guidance to select the appropriate sterilization technique for newly developed sensitive combination products Examines forward thinking tactics for matching new developments in material compatibility with possible regulatory and QSR strategies [Jonas' Introduction to the U.S. Health Care System](#) Raymond Goldstein, Karen Goldstein, 2024-04-08 About This Text A concise authoritative tour of how U S health care is organized financed and regulated connecting history and policy to today s delivery quality access and reform landscape CourseConnect is an interactive learning platform designed to help you learn faster study smarter retain

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Joint Commission Journal on Quality and Patient Safety, 2007

Quality Management in Nursing and Health Care June A. Schmele, 1995 In this thought provoking compendium 40 experts representing various disciplines examine quality management both as a philosophy that is integral to health care and as it applies specifically to nursing The book considers quality management in both domestic and international settings and attempts to reconcile the polarities of quality care and cost concerns 170 illus

Journal of Neurosurgery, 2008-07

Handbook of Infections in Surgery Ralph C. Kester, 2000

ACS Surgery Wiley W. Souba, 2007 ACS Surgery has been developed to help practicing surgeons make critical decisions on patient care It is an evidence based reference of surgical best practices from leaders in the field

The Gale Encyclopedia of Nursing & Allied Health Kristine M. Krapp, 2002

Current Diagnosis and Treatment Surgery 14/E Gerard M. Doherty, 2014-09-05 Evidence based point of care information on 1000 diseases and disorders most often treated by surgeons Expansive coverage of general surgery and all subspecialties you need to be versed in including otolaryngology plastic and reconstructive surgery gynecology orthopedics urology and pediatrics Intuitively organized to help you find answers quickly and easily More than 600 photographs and illustrations Detailed treatment algorithms NEW Chapter ending multiple choice questions An outstanding review for the USMLE and shelf exams Updated throughout with the latest research and discoveries LANGE All medical libraries should acquire this book which is an outstanding text for medical students 4 star Doody's review of a

previous edition Essential for students residents practitioners and surgeons The best introductory text to the field of surgery

An Up-To-Date Nationwide Analysis On Surgical Site Infections After Total Knee Arthroplasty Hiba Anis,2017

Background Surgical site infections SSIs after total knee arthroplasty TKA can be a potentially catastrophic outcome There has been a large push to develop and implement SSI infection prevention strategies However the question remains as to whether these changes in practice have led to fewer SSIs in TKA The purpose of this study was to track the annual rate and trends of 1 overall 2 deep and 3 superficial SSIs following TKA using a large nationwide database Methods The NSQIP database was queried for all primary TKAs CPT code 27447 between 2012 and 2016 This yielded 197 192 cases which were then stratified into years A steady increase in total number of primary TKA cases was observed from 2012 to 2016 22 655 vs 59 197 261% Figure 1 Cases with reported superficial and or deep SSI were analyzed as individual cohorts and then combined to evaluate overall SSI rates The infection incidence for each year was calculated Pearson correlation coefficients and chi squared tests were used to determine correlation and statistical significance which was maintained at a p value less than 0 05 Results Overall there was a downward trend in SSI rates over the 5 years In total there were 1 287 cases out of 197 192 0 65% of all cases complicated by any SSI The lowest incidence of SSI was found to be during the most recent year 2016 n 370 0 63% while the greatest incidence was in the first year analyzed 2012 n 155 0 68% The combined SSI rate in 2016 decreased by 6% when compared to 2015 0 63% vs 0 67% p 0 05 A larger 9% decrease in rate was found between 2016 and 2012 0 63% vs 0 68% in 2012 p 0 05 Table 2A The rate of deep SSIs also decreased over the 5 year period with the lowest rate occurring in the most recent year 2016 0 11% The overall 5 year deep SSI incidence was found to be 0 14% 278 out of 197 192 cases There was a 28% decrease in deep SSI rate from 2016 to 2015 0 10% vs 0 15% p 0 05 A larger and significant 47% decrease was seen between 2016 and 2014 0 10% vs 0 20% p0 001 Table 2B During the 5 year period 1 017 cases out of 197 192 were complicated by a superficial SSI an incidence of 0 52% The lowest superficial SSI incidence occurred in the most recent year 2016 n 172 0 47% while the latest year analyzed 2012 had the greatest incidence n 121 0 53% Table 1 The superficial SSI rate in 2016 decreased by 1% when compared to 2015 0 52% vs 0 53% p0 05 A 2% decrease in rate was observed between 2016 and 2012 0 52% vs 0 53% p 0 05 Table 2C Conclusion An overall trend of decreasing SSI rates was observed nationwide over the 5 year study period A similar decreasing trend was also noted specifically for deep SSI which can be potentially more complicated to manage and result in decreased implant survivorship The down trending rate give credence to the value in new and developing SSI preventative therapies as well as improved medical and surgical patient management Nevertheless there is still room for improvement to further lower and potentially prevent all SSIs after TKAs

Abstracts of the Annual Meeting of the American Society for Microbiology American Society for Microbiology, Annual Meeting,1987 *Bacteriological Proceedings* American Society for Microbiology,American Society for Microbiology, Meeting,Society of American Bacteriologists,1987 Abstracts of the annual meeting **Infections in Surgery** Massimo

Sartelli, Raul Coimbra, Leonardo Pagani, Kemal Rasa, 2021-01-29 Although most clinicians are aware of the problem of antimicrobial resistance most also underestimate its significance in their own hospital The incorrect and inappropriate use of antibiotics and other antimicrobials as well as poor prevention and poor control of infections are contributing to the development of such resistance Appropriate use of antibiotics and compliance with infection prevention and control measures should be integral aspects of good clinical practice and standards of care However these activities are often inadequate among clinicians and there is a considerable gap between the best evidence and actual clinical practice In hospitals cultural determinants influence clinical practice and improving behaviour in terms of infection prevention and antibiotics prescribing practice remains a challenge Despite evidence supporting the effectiveness of best practices many clinicians fail to implement them and evidence based processes and practices that are known to optimize both the prevention and the treatment of infections tend to be underused Addressing precisely this problem this volume offers an essential toolkit for all surgeons and intensivists interested in improving their clinical practices

Predictors of Surgical Site Infection Following Adult Cardiac Surgery at the Jewish General Hospital Victoria Allen, 2014 Background Surgical site infections SSI are the second most common cause of nosocomial infections and thus constitute a major concern to hospitals SSIs of the sternal and graft site wounds following cardiac surgery are associated with increases in hospitalisation costs length of in hospital stays and mortality Objective To identify modifiable risk factors for the development of SSIs within up to one year of surgery following invasive cardiac surgery at the Jewish General Hospital in Montreal JGH Quebec SSIs of interest include both sternal wound infections SWIs and leg incision infections LIIs Methods Using the Quebec Registry in Adult Cardiac Surgery QRACS the cohort of all patients undergoing cardiac surgery at the JGH between 1 April 2011 and 31 October 2013 was identified Outcomes of interest included all surgical site infections identified in the QRACS during a maximum of one year of follow up with particular attention paid to SWIs and LIIs Survival analysis using the Cox proportional hazards model was used to estimate the hazard ratios HRs of SSI associated with pre and intraoperative risk factors The Kaplan Meier method for survival data was employed to estimate cumulative incidence of sternal and leg SSIs Results The cohort included 1 210 patients who were on average 67 years old at the time of surgery and 72 1% were male SWIs constituted 77 9% of all SSI and LIIs 22 1% In multivariate analysis failing to remove hair from surgical sites prior to surgery HR 2 30 95% CI 1 18 4 48 surgeon B HR 1 87 95% CI 1 08 3 23 and use of immunosuppressants steroids HR 3 20 95% CI 1 36 7 54 were significantly associated with all varieties of infection In addition use of alpha blockers HR 3 62 95% CI 1 39 9 48 and immunosuppressants steroids HR 9 40 95% CI 2 65 33 42 were associated specifically with SWI and LII respectively Conclusion Patients with the identified modifiable risk factors should be monitored closely The usefulness of the QRACS in monitoring SSIs was demonstrated Keywords Surgical site infections SSI Cardiac surgery Sternal wound infections SWI Quebec Registry in Adult Cardiac Surgery QRACS

Surgical Site Infection Andrew Welsh, 2008 Infections that occur in the

wound created by an invasive surgical procedure are generally referred to as surgical site infections (SSIs). SSIs are one of the most important causes of healthcare-associated infections (HCIs). A prevalence survey undertaken in 2006 suggested that approximately 8% of patients in hospital in the UK have an HCAI. SSIs accounted for 14% of these infections and nearly 5% of patients who had undergone a surgical procedure were found to have developed an SSI. However, prevalence studies tend to underestimate SSI because many of these infections occur after the patient has been discharged from hospital. SSIs are associated with considerable morbidity and it has been reported that over one third of postoperative deaths are related at least in part to SSI. However, it is important to recognise that SSIs can range from a relatively trivial wound discharge with no other complications to a life-threatening condition. Other clinical outcomes of SSIs include poor scars that are cosmetically unacceptable such as those that are spreading, hypertrophic or keloid, persistent pain and itching, restriction of movement particularly when over joints and a significant impact on emotional wellbeing. SSI can double the length of time a patient stays in hospital and thereby increase the costs of health care. Additional costs attributable to SSI of between 814 and 6626 have been reported depending on the type of surgery and the severity of the infection. The main additional costs are related to re-operation, extra nursing care and interventions and drug treatment costs. The indirect costs due to loss of productivity, patient dissatisfaction and litigation and reduced quality of life have been studied less extensively.

Surgical Infections
Manal Mohammad Baddour, 2020-02-05

Skin is a natural barrier to infection. Surgical breakage of skin can lead to surgical site infections (SSIs). SSIs are relatively common and constitute a problematic issue in surgical procedures. Most common organisms include Gram positive such as Staphylococcus and Streptococcus as well as Gram negative such as Pseudomonas and others bacteria. The extent and outcome of SSI can vary widely depending on the procedure, organism, extent and other factors and can result in discomfort, severe morbidity or even life-threatening conditions. It is thus mandatory to be aware of and follow WHO and CDC guidelines for the prevention of SSIs and to reduce risk factors for acquisition. This book sheds light on certain aspects related to SSIs and how to avoid them.

Root Cause Analysis In Surgical Site Infections Ssis Book Review: Unveiling the Power of Words

In a global driven by information and connectivity, the power of words has be much more evident than ever. They have the capability to inspire, provoke, and ignite change. Such could be the essence of the book **Root Cause Analysis In Surgical Site Infections Ssis**, a literary masterpiece that delves deep in to the significance of words and their impact on our lives. Compiled by a renowned author, this captivating work takes readers on a transformative journey, unraveling the secrets and potential behind every word. In this review, we shall explore the book is key themes, examine its writing style, and analyze its overall effect on readers.

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