

# UPDATE: Revision to Surgical Site Infection Goal

As announced in the May 2013 issue of *Perspectives*, Joint Commission surveyors stopped citing organizations for non-compliance with Element of Performance (EP) 5 of National Patient Safety Goal NPSG.07.05.01 on surgical site infection prevention for **ambulatory care organizations, critical access hospitals, hospitals, and office-based surgery practices**. The cessation allowed organizations to be in compliance with revised Centers for Disease Control and Prevention (CDC) surveillance requirements while maintaining compliance with NPSG.07.05.01.

The CDC no longer requires one-year surveillance for procedures in which devices or materials have been implanted during a surgery. Instead, surveillance is now required for either 30 or 90 days following a procedure; the surveillance period is defined by National Healthcare Safety Network (NHSN) procedural codes.

In addition, NHSN procedural codes require surveillance

for 90 days for certain procedures (such as breast surgery) regardless of whether implants were used. In these cases this represents an increase in surveillance requirements, as the previous methodology required 30-day surveillance for surgery without implants.

The final revised requirement, approved by The Joint Commission and **effective immediately**, will appear in the *2013 Update 2* to the *Comprehensive Accreditation Manuals* for ambulatory care organizations, critical access hospitals, hospitals, and office-based surgery practices as well as their fall 2013 E-dition® updates. The box below displays the revised requirements; new text is underlined and deleted text is shown in ~~strike through~~.

For more information on this revision, contact Kelly Podgorny, DNP, CPHQ, RN, project director in the Department of Standards and Survey Methods, at [kpodgorny@jointcommission.org](mailto:kpodgorny@jointcommission.org). For free guidance on how to implement NPSG.07.05.01, download *The Joint Commission's Implementation Guide for NPSG.07.05.01 on Surgical Site Infections: The SSI Change Project* at [http://www.jointcommission.org/assets/1/18/Implementation\\_Guide\\_for\\_NPSG\\_SSI\\_5\\_22\\_13.pdf](http://www.jointcommission.org/assets/1/18/Implementation_Guide_for_NPSG_SSI_5_22_13.pdf). 

\* Centers for Disease Control and Prevention/National Healthcare Safety Network. CDC/NHSN Surveillance Definition of Healthcare-Associated Infection and Criteria for Specific Types of Infections in the Acute Care Setting (see Table 12). Jan 2013. Accessed May 24, 2013. [http://www.cdc.gov/nhsn/PDFs/pscManual/17pscNosInfDef\\_current.pdf](http://www.cdc.gov/nhsn/PDFs/pscManual/17pscNosInfDef_current.pdf).



**Official Publication of Joint Commission Requirements**

## Revised National Patient Safety Goal on Surgical Site Infection

APPLICABLE TO AMBULATORY CARE ORGANIZATIONS, CRITICAL ACCESS HOSPITALS, HOSPITALS, AND OFFICE-BASED SURGERY PRACTICES

**Effective immediately**

**National Patient Safety Goals (NPSG)**

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**Standard NPSG.07.05.01**  
Implement evidence-based practices for preventing surgical site infections.

**Element of Performance for NPSG.07.05.01**

**A 5.** Measure surgical site infection rates for the first 30 or 90 days following surgical procedures ~~that do not involve inserting implantable devices and for the first year following procedures involving implantable devices~~ based on National Healthcare Safety Network (NHSN) procedural codes. The [organization's] measurement strategies follow evidence-based guidelines. 

**Note 1:** *Surveillance may be targeted to certain procedures based on the [organization's] risk assessment.*

**Note 2:** *The NHSN is the Centers for Disease Control and Prevention's health care-associated infection tracking system. NHSN provides facilities, states, regions, and the nation with data needed to identify problem areas, measure progress of prevention efforts, and ultimately eliminate health care-associated infections. For more information on NHSN procedural codes, see <http://www.cdc.gov/nhsn/CPTcodes/ssi-cpt.html>.*