**PATIENT DETAILS**

Patient’s initials: [ ] Patient’s Surname: [ ]
NHS number: [ ] Hospital number: [ ]
Date of Birth: [ ] [ ] [ ] Sex: Male [ ] Female [ ] Unknown [ ]
Date Specimen Taken: [ ] [ ] [ ] Lab number: [ ]

**INFECTION EPISODE DETAILS**

<table>
<thead>
<tr>
<th>Gram-negative Data collection</th>
<th>Escherichia coli</th>
<th>Klebsiella spp</th>
<th>Pseudomonas aeruginosa</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>Escherichia coli</em></td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td><em>Klebsiella spp</em></td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td><em>(inc. subspecies pneumonia &amp; ozene)</em></td>
<td>[ ]</td>
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<td>[ ]</td>
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<tr>
<td><em>K. aerogenes</em></td>
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<td>[ ]</td>
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<tr>
<td><em>K. Oxytoca</em></td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td><em>Klebsiella spp.</em></td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
</tbody>
</table>

Episode category: [ ] New Infection: [ ] Repeat/Relapse: [ ]
Is patient on dialysis: [ ] Yes: Acute RF: [ ] Yes: Established RF: [ ] No: [ ] Unknown: [ ]

**ADMISSION DETAILS**

| Patient Category: | In-patient: [ ] Emergency Assessment: [ ] Regular Attender: [ ] |
|-------------------|-----------------------------|----------------------|
| (please tick one option) | Day patient: [ ] A & E only: [ ] Other: [ ] |
| Outpatient: [ ] | |
| If Other: [ ] No: [ ] Unknown: [ ] Date of Admission: [ ] [ ] [ ] |

Admitted this episode: [ ] Yes: [ ] No: [ ] Unknown: [ ]
Admission method: [ ] Not applicable: [ ] Planned (deferred): [ ]
(please tick one option) [ ] Unknown: [ ] Emergency: [ ]
| Waiting list: [ ] Other (inc. maty): [ ] |
| Main Specialty: [ ] |
| Treatment Specialty: [ ] |
Augmented care: [ ] |

Provenance of patient: [ ] Home: [ ] Private Hospital: [ ]
(please tick one option) Mental Health Hospital: [ ]
| Hospital: [ ] Temporary Accommodation: [ ] Not Known: [ ] |
| Nursing/Residential home: [ ] Penal Establishment: [ ] Other: [ ] |
| PCT Hospital: [ ] Non-UK resident: [ ] |

If hospital; Hospital name: [ ]
If Other; Location: [ ]
If non UK country: [ ]
Additional Comments: [ ]

**SOURCE**

Primary focus of bacteraemia: (please tick one option)
No clinical signs of bacteraemia: [ ]
No underlying focus of infection: [ ]
Intravascular device: [ ]
(please tick one option) Please complete Section 1
| Including Pacemaker/ ICD or CVC | Please complete Section 2 |
| Intravascular device: [ ] | Please complete Section 3 |
| Intravascular device: [ ] | Please complete Section 4 |
| Intravascular device: [ ] | Please complete Section 5 |
| Intravascular device: [ ] | Please complete Section 6 |
| Intravascular device: [ ] | Please complete Section 7 |
| No underlying focus of infection: [ ] | Please complete Section 8 |

Please complete the * questions in Section 2

Gastrointestinal or Intraabdominal collection: [ ]
Cardiovascular or Vascular: [ ]
(please tick one option) Please complete Section 1
| Cardiovascular or Vascular: [ ] | Please complete Section 2 |
| Cardiovascular or Vascular: [ ] | Please complete Section 3 |
| Cardiovascular or Vascular: [ ] | Please complete Section 4 |
| Cardiovascular or Vascular: [ ] | Please complete Section 5 |
| Cardiovascular or Vascular: [ ] | Please complete Section 6 |
| Cardiovascular or Vascular: [ ] | Please complete Section 7 |
| Intravascular device: [ ] | Please complete Section 8 |

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Clinical Information Reporting: Gram-negative bacteraemia

SECTION 1

Urinary catheter in the last 28 days prior:
Yes: [ ] No: [ ] Unknown: [ ]

Urinary catheter manipulated 28 days prior:
Yes: [ ] No: [ ] Unknown: [ ]

Prostate biopsy:
Trans rectal: [ ] No: [ ] Urethral: [ ] Unknown: [ ] Trans perineum: [ ]

Vascular access device:
(PPM or ICD) or CVC inserted, removed, manipulated 28 days prior:
Yes: [ ] No: [ ] Unknown: [ ]

UTI treatment:
28 days prior to onset:
Yes: [ ] No: [ ] Unknown: [ ]

Intubated (ET or PT) or extubated:
28 days prior to onset:
Yes: [ ] No: [ ] Unknown: [ ]

Surgery prior to procedure:
(30 days or 12 months prosthetic material):
Yes: [ ] No: [ ] Unknown: [ ]

Hepatobiliary procedure:
(ERCP or MRCP or similar) 28 days prior:
Yes: [ ] No: [ ] Unknown: [ ]

Absolute Neutrophil count:
less than 500 (0.5) at time:
Yes: [ ] No: [ ] Unknown: [ ]

Open Wounds/Ulcer Not Diabetic Foot infection:
28 days prior to onset:
Yes: [ ] No: [ ] Unknown: [ ]

Diabetic Foot Ulcer or infection:
28 days prior to onset:
Yes: [ ] No: [ ] Unknown: [ ]

Go to Antibiotics Section

SECTION 2.

Vascular device:
(PPM or ICD) or CVC inserted, removed, manipulated 28 days prior:
Yes: [ ] No: [ ] Unknown: [ ]

*Surgery prior to procedure:
(30 days or 12 months prosthetic material):
Yes: [ ] No: [ ] Unknown: [ ]

Absolute Neutrophil count:
less than 500 (0.5) at time:
Yes: [ ] No: [ ] Unknown: [ ]

Go to Antibiotics Section

SECTION 3.

Surgery prior to procedure:
(30 days or 12 months prosthetic material):
Yes: [ ] No: [ ] Unknown: [ ]

Open Wounds/Ulcer Not Diabetic Foot infection:
28 days prior:
Yes: [ ] No: [ ] Unknown: [ ]

Diabetic Foot Ulcer or infection:
28 days prior:
Yes: [ ] No: [ ] Unknown: [ ]

Absolute Neutrophil count:
less than 500 (0.5) at time:
Yes: [ ] No: [ ] Unknown: [ ]

Go to Antibiotics Section

SECTION 4.

Urinary catheter in the last 28 days prior:
Yes: [ ] No: [ ] Unknown: [ ]

Urinary catheter manipulated 28 days prior:
Yes: [ ] No: [ ] Unknown: [ ]

UTI treatment:
28 days prior to onset:
Yes: [ ] No: [ ] Unknown: [ ]

Prostate biopsy:
Trans rectal: [ ] No: [ ] Urethral: [ ] Unknown: [ ] Trans perineum: [ ]

Surgery prior to procedure:
(30 days or 12 months prosthetic material):
Yes: [ ] No: [ ] Unknown: [ ]

Absolute Neutrophil count:
less than 500 (0.5) at time:
Yes: [ ] No: [ ] Unknown: [ ]

Go to Antibiotics Section

SECTION 5.

Intubated (ET or PT) or extubated:
28 days prior to onset:
Yes: [ ] No: [ ] Unknown: [ ]

Surgery prior to procedure:
(30 days or 12 months prosthetic material):
Yes: [ ] No: [ ] Unknown: [ ]

Absolute Neutrophil count:
less than 500 (0.5) at time:
Yes: [ ] No: [ ] Unknown: [ ]

Go to Antibiotics Section

SECTION 6.

Surgery prior to procedure:
(30 days or 12 months prosthetic material):
Yes: [ ] No: [ ] Unknown: [ ]

Absolute Neutrophil count:
less than 500 (0.5) at time:
Yes: [ ] No: [ ] Unknown: [ ]

Go to Antibiotics Section

SECTION 7.

Surgery prior to procedure:
(30 days or 12 months prosthetic material):
Yes: [ ] No: [ ] Unknown: [ ]

Absolute Neutrophil count:
less than 500 (0.5) at time:
Yes: [ ] No: [ ] Unknown: [ ]

Go to Antibiotics Section

ANTIBIOTICS

Number of antibiotic courses:

<table>
<thead>
<tr>
<th>Antibiotic Name</th>
<th>Indication</th>
<th>Date Started</th>
<th>Date Stopped</th>
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<tbody>
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</table>

Go to Antibiotics Section
Clinical Information Reporting: Gram-negative bacteraemia

On completion please transfer this information to the mandatory surveillance of Gram-negative bacteraemia surveillance system at: https://hcaidcs.phe.org.uk/WebPages/GeneralHomePage.aspx

Guidance on the completion of the form

Please complete one reporting form for each case diagnosed on or after the 1st June 2011 in England meeting the following case definition of E. coli bacteraemia and each case diagnosed on or after April 2017 in England meeting the following case definition of Klebsiella spp and Pseudomonas aeruginosa.

1. All laboratory confirmed cases of Gram-negative bacteraemia
2. This includes all Gram-negative positive blood cultures identified within each Trust, whether clinically significant or not, whether treated or not, whether acquired in the Trust providing the testing or not.
3. All cases should be reported regardless of location or origin of the patient at the time the specimen was taken i.e. regardless of whether the patient was in a hospital or another setting; this includes blood cultures taken within 3 days of admission to hospital and cases amongst Welsh patients diagnosed in English laboratories.
4. Positive blood cultures taken within 14 days of the first sample should not be reported as they are considered to be the same episode, unless a negative blood culture has been obtained in the interim period. Positive blood cultures taken more than 14 days after the first sample of each episode should be reported, as these are considered to be part of a new episode.

An "episode" relates to the 14 day period following the initial specimen (or subsequent specimens each greater than 14 days from the previous).

Definitions

Patient Detail information should be completed by the microbiologist on identification of an Gram-negative positive blood culture.

Episode Category: This allows the user to indicate whether the record applies to a new infectious episode, a continuing infection or whether the patient has suffered a repeat infection or relapse.
- New infection - is the first positive for a patient or an episode after 3 months without positive blood cultures.
- Continuing infection - is for a result where the patient has had on-going positive blood cultures but is >14 days since the initial positive so is counted as a new episode.
- Repeat or relapse - patient has had positive blood cultures in the past 3 months but with negative blood cultures up to this positive result.

Dialysis: Record whether the patient was dependent on renal dialysis at the time the specimen was taken and if so which type of dialysis (established RF if patient was dialysis dependent prior to current admission).
- Patient Category: Identifies the category of patient at the time the specimen was taken.
  - In patient - a patient already admitted to hospital at the time the specimen was taken
  - Outpatient - a patient who is not admitted and was receiving outpatient care at the time the specimen was taken.
- A&E only - a patient who was receiving care in an A&E department when the specimen was taken irrespective of whether they were subsequently admitted.
- Emergency assessment - a patient receiving care on a non admissions ward at the time the sample was taken; in an emergency assessment unit.
- Regular attendant - patients who make regular visits to hospital, for broadly similar treatment, and are discharged the same day; such as patients on dialysis or plasmapheresis.

Admitted this episode: Admission method indicates the primary reason why a patient is admitted for in-patient or day patient care.
- Waiting list - A waiting list admission occurs when a patient whose name was on an inpatient or day case waiting list for the specialty is admitted to that specialty as planned.
- Emergency - An emergency admission occurs when, for clinical reasons, a patient is admitted at the earliest possible time after seeing a doctor. The patient may or may not be admitted through Accident & Emergency.
- Deferred admission waiting list for the specialty, is admitted, as planned, to the specialty as an inpatient or day patient.
- Deferred admission waiting list for the specialty, is admitted, as planned, to the specialty as an inpatient or day patient.
- Other - any other type of admission including maternity and neonatal admissions and transfer from another provider.

Specialty: Records the specialty of the consultant the patient was under at the time the specimen was taken

Provenance of Patient: Records where the patient was located prior to this hospital admission, such as home (normal place of residence), other hospitals or abroad.

Primary Focus of bacteraemia: The anatomical location / system believed by the microbiologist attending to the patient to be the most likely, on the basis of their clinical judgement, initial primary focus or source of the infection. Secondary sites resulting from a complication are not included. Only one can be selected.
- No clinical signs of infection – the patient did not show signs of Gram-negative sepsis and did not require treatment i.e. the culture result is believed to represent contamination
- Unknown –although the bacteraemia was believed to be genuine on clinical grounds, it was not possible to identify its origin with any reasonable degree of certainty.
- Urinary catheter manipulated in last 28 days: Whether urinary catheter had been manipulated for clinical purpose in 28 days prior to the of onset of infection.

Hepatobiliary procedure 28 days prior: Any procedure performed on hepatobiliary organs, such as Magnetic Resonance Cholangiopancreatography (MRCP) or Endoscopic Retrograde Cholangio-Pancreatography (ERCP)
- UTI treatment 28 days prior: Patient has received medical care in 28 days prior to onset of bacteraemia with intention of treating a urinary tract infection.
- Intubated or extubated in 28 days prior to onset: Whether endotracheal or PT intubation was inserted or removed in last 28 days
- Surgery: The patient has undergone surgery in the past 30 days (if no implant was inserted), or past year if an implant was inserted.
- Open wounds or ulcers: Patient has an unhealed wound or ulcer in 28 days prior to onset of bacteraemia
- Diabetic foot ulcer or infection: Patient has had an unhealed diabetic ulcer or diabetes-related infection of the foot in the 28 days prior to onset of bacteraemia.
- Absolute neutrophil count < 500 (0.5) cells/μl: Patient has an absolute neutrophil count of less than 500 cells/μl at time of onset of bacteraemia.
- Number of antibiotic courses prescribed in 28 days prior: Number of antibiotic courses patient has received in 28 days prior to onset of bacteraemia.

The form should be stored securely or destroyed immediately if it contains patient identifiable information; please refer to local security policy for further guidance.

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