NATIONAL ENHANCED MANDATORY SURVEILLANCE OF Public Health England IN STRICT CONFIDENCE NATIONAL ENHANCED MANDATORY SURVEILLANCE OF GRAM-NEGATIVE BACTERAEMIA Please tick boxes or write in the white space(s) provided (see notes on page 3)					
PATIENT DETAILS	CONFIDENCE	riease lick boxes or write in the	ie writte space(s) provided (see notes on page s)		
Patient's initials:	Par	tient's surname:			
NHS number:		ospital number:			
Date of birth: dd	mm yyyy	Sex: Male:	Female: Unknown:		
Date specimen taken: dd	mm yyyy	Lab number:			
INFECTION EPISODE DETAILS					
	ichia coli Klebsiella specie	Pseudomonas aerug	vinosa		
If Klebsiella species Please select species (inc.	K. pneumoniae subspecies pneomiae & ozenae)	K. aerogenes	Other named		
riease select species (iiic.					
	K. oxytoca	Klebsiella spp.			
Episode category:	New infection:	Repeat/relapse:			
(please tick one option)	Continuing infection:	Unknown:			
Is patient on dialysis:	<u> </u>		lo: Unknown:		
io panoni on analysis					
ADMISSION DETAILS					
Patient category:	In-patient: Emerge	ncy assessment:	Regular attender:		
(please tick one option)	Day patient:	A & E only:	Other:		
	Outpatient:				
If Other:					
If patient admitted complete this section					
Admitted this episode:	Yes: No:	Unknown:	Date of admission: dd mm yyyy		
Admission method:	Not applicable: Pla	anned (deferred):			
(please tick one option)	Unknown:	Emergency:			
	Waiting list:	Other (inc. maty):			
Main specialty:					
Treatment specialty:					
Augmented care:					
		B			
Provenance of patient:	Home:	Private hospital:	Mental health hospital:		
(please tick one option)	' ==	y accommodation:	Not known:		
NU	· =	al establishment: Non-UK resident:	Other:		
If hasnital, hasnital name,	Community hospital:	Non-OK resident.			
If hospital; hospital name:					
If Other; location:					
If non UK country:					
Additional comments:					
PRIOR TRUST EXPOSURE Has the patient been discharged from an elective or emergency hospital admission in the reporting trust in the Please provide the date of discharge for the most recent elective or emergency hospital admission prior to the Yes: No: Don't know: y y y y					
RISK FACTORS					
	olease tick one option)		<u> </u>		
No clinical signs of bacteraemia:	Please complete Section 1	Skin/soft tissue:	Please complete Section 5		
No underlying focus of infection:	Please complete Section 1	(including ulcers, celluliti diabetic foot infections	s,		
Intravascular device:	Please complete Section 2	without OM)			
(including Pacemaker/ ICD or CVC) Bone and Joint:	Diagon consider Continue 2	Hepatobiliary:	Disease secondate Continue 7		
(with prosthetic material)	Please complete Section 3	r iepatobiliary.	Please complete Section 7		
Bone and Joint:	Please complete Section 3	Gastrointestinal or	Please complete the *		
(no prosthetic material)		Intraabdominal collection	questions in Section 2		
Lower Urinary Tract:	Please complete Section 4	(excluding hepatobiliary)			
Upper Urinary tract: (pyelonephritis/ abscess)	Please complete Section 4	0 11	Diagon complete Continue C		
(pyelonephritis/ abscess) Lower Respiratory Tract:	Please complete Section 5	Cardiovascular or vascular (without prosthetic material,			
(pneumonia. VAP. bronchiectasis. exac COPD etc)		(without prostrietic material,	morading natura intection)		
Upper Respiratory :	Please complete Section 5	Cardiovascular or vascul	ar: Please complete Section 6		
Tract & ENT	Please complete Section 6	(with prosthetic material e.g.			
Central nervous system:	Please complete Section 6	EVAR, stent, valve, prostheti fistula)	C		
Genital system: (including prostate if male)	Please complete Section 4	Unknown:	Please complete Section 1		

PHE publications gateway: GW - 1040 Published : January 2020

SECTION 1			
Urinary catheter in the last 28 days prior (including intermittent or temporary		No: Unknown:]
Urinary catheter manipulated 28 days prior (including intermittent or temporary)		No: Unknown:]
Prostate biopsy: in 28 days prior	Trans rectal:	No: Urethral	Unknown: Trans perineum:
Vascular access devices	Yes:	No: Unknown:	Surgical methods used: (tick all that apply)
(PPM or ICD) or CVC inserted, removed, manipulated 28 days prio			Open, including endoscopy-
UTI treatment: 28 days prior to onse		No: Unknown:	assisted procedures, not endoscopy-assisted procedures, involving implant in last 30 days implant in last 12
Intubated (Et or PT) or extubated: 28 days prior to onse		No: Unknown:	months
Surgery prior to procedure: (30 days or 12 months prosthetic material)	: Yes:	No: Unknown:	Solely endoscopic not involving implant in last 30 Solely endoscopic involving implant in
Hepatobiliary procedure	: Yes: 1	No: Unknown:	days last 12 months
(ERCP or MRCP or similar) 28 days prio Absolute neutrophil count:		No: Unknown:	Unknown
less than 500 (0.5) at time			Silvisiii L
Anti-cancer chemotherapy 28 days, prior to specimen date		No: Unknown:	
Open wounds/ulcer not diabetic foo infection 28 days prior to onse	: Yes:	No: Unknown:	Diabetic foot ulcer or infection: 28 days prior to onset Yes: No: Unknown:
SECTION 2.			
Vascular device: (PPM or ICD) or CVC inserted, removed	,	No: Unknown:	
manipulated 28 days prio * Surgery prior to procedure:		No: Unknown:	If 'Yes' please complete "Surgical Methods" Box in Section 1.
(30 days or 12 months prosthetic material) * Absolute neutrophil count:		No: Unknown:	, , , , , , , , , , , , , , , , , , ,
less than 500 (0.5) at time Anti-cancer chemotherapy		No: Unknown:	
28 days, prior to specimen date		rteermanown.	Go to Antibiotics Section
Surgery prior to procedure: (30 days or 12 months prosthetic material)	163. 110.	Unknown:	Absolute neutrophil cou Yes: ☐ No: ☐ Unknown: ☐ less than 500 (0.5) at time:
Open wounds/ulcer not diabetic foor infection. 28 days prior	Yes: No:		nti-cancer chemotherapy: Yes: No: I Inknown.
Diabetic foot ulcer or infection: 28 days prior	: Yes: No:	Unknown:	28 days prior to specimen date:
SECTION 4.			
Urinary catheter in the last 28 days prior: (including intermittent or temporary)	Yes:	No: Unknown:]
Urinary catheter manipulated 28 days prior		No: Unknown:]
(including intermittent or temporary UTI treatment:	Yes:	No: Unknown:]
28 days prior to onse Prostate biopsy :	: Trans rectal:	No: Urethral:	Unknown: Trans perineum:
in 28 days prior Surgery prior to procedure:		No: Unknown:	If 'Yes' please complete "Surgical Methods" Box in Section 1.
(30 days or 12 months prosthetic material) Absolute neutrophil count:		No: Unknown:	1
less than 500 (0.5) at time Anti-cancer chemotherapy:	•	No: Unknown:	<u> </u>
28 days prior to specimen date:	1es	NO. OTIKNOWN.	Go to Antibiotics Section
SECTION 5. Intubated (ETorPT) or extubated:	: Yes:	No: Unknown:]
28 days prior to onse Surgery prior to procedure:	Yes:	No: Unknown:	If 'Yes' please complete "Surgical Methods" Box in Section 1.
(30 days or 12 months prosthetic material) Absolute neutropnii count:	Yes:	NO: UNKNOWN:	
less than 500 (0.5) at time			Go to Antibiotics Section
Surgery prior to procedure: (30 days or 12 months prosthetic material)		No: Unknown:	If 'Yes' please complete "Surgical Methods" Box in Section 1.
Absolute neutrophil count	Yes:	No: Unknown:]
less than 500 (0.5) at time Anti-cancer chemotherapy	Yes:	No: Unknown:]
28 days prior top specimen date			Go to Antibiotics Section
SECTION 7.			
Surgery prior to procedure:	Yes:	No: Unknown:	If 'Yes' please complete "Surgical Methods" Box in Section 1.
(30 days or 12 months prosthetic material) Hepatobiliary procedure:	Yes:	No: Unknown: Unknown:	If 'Yes' please complete "Surgical Methods" Box in Section 1.
(30 days or 12 months prostnetic material) Hepatobiliary procedure: (ERCP or MRCP or similar) 28 days prio Absolute neutrophil count:	Yes: Yes:	== =	If 'Yes' please complete "Surgical Methods" Box in Section 1.
(30 days or 12 months prostnetic material) Hepatobiliary procedure: (ERCP or MRCP or similar) 28 days prio Absolute neutrophil count: less than 500 (0.5) at time Anti-cancer chemotherapy: 28 days prior to specimen date	Yes:	No: Unknown:	If 'Yes' please complete "Surgical Methods" Box in Section 1. Go to Antibiotics Section
(30 days or 12 months prostnetic material) Hepatobiliary procedure: (ERCP or MRCP or similar) 28 days prio Absolute neutrophil count: less than 500 (0.5) at time Anti-cancer chemotherapy: 28 days prior to specimen date	Yes:	No: Unknown: Unknown:	
(30 days or 12 months prostnetic material) Hepatobiliary procedure: (ERCP or MRCP or similar) 28 days prio Absolute neutrophil count: less than 500 (0.5) at time Anti-cancer chemotherapy: 28 days prior to specimen date ANTIBIOTICS Number of antibiotic courses: prescribed 28 days prio	Yes:	No: Unknown: Unknown:	Go to Antibiotics Section
(30 days or 12 months prostnetic material) Hepatobiliary procedure: (ERCP or MRCP or similar), 28 days prio Absolute neutrophil count: less than 500 (0,5) at time Anti-cancer chemotherapy: 28 days prior to specimen date ANTIBIOTICS Number of antibiotic courses: prescribed 28 days prior	Yes:	No: Unknown: Unknown:	Go to Antibiotics Section Date started Date Stopped dd / mm / yyyy
(30 days or 12 months prostnetic material) Hepatobiliary procedure: (ERCP or MRCP or similar) 28 days prio Absolute neutrophil count: less than 500 (0.5) at time Anti-cancer chemotherapy: 28 days prior to specimen date ANTIBIOTICS Number of antibiotic courses: prescribed 28 days prio	Yes:	No: Unknown: Unknown:	Go to Antibiotics Section

Public Health

NATIONAL ENHANCED MANDATORY SURVEILLANCE OF 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

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 bacteraemia caused by E.coli, Klebsiella spp. or P. aeruginosa.
- 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 >14days since the initial positive so is counted as a new episode.
- · Repeat/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 attender patients who make regular visits to hospital, for broadly similar treatment, and are discharged the same day; such as patients on dialysis or

Admitted this episode: Admission method indicates the primary reason why a patient is admitted for in - patient or day patient care. One of the following should be selected:

- · 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.
- · Planned (deferred) A patient admitted as planned to the specialty as an inpatient or day patient. A deferred admission occurs when a patient whose name was on the 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

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. First published: June 2017

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