

CARDIOTHORACIC SURGERY (CTS)

SURGICAL SITE INFECTION (SSI) PREVENTION BUNDLE

PRIOR TO SURGERY

- ◆ Operating Room cleaned prior to patient arrival
- ◆ Pre-op screening and risk assessment screening completed if appropriate
 - ◆ MRSA/MSSA screening and labs ordered by provider (at pre-op clinic visit or as inpatient)
 - ◆ Treat remote infections (postpone elective procedures as needed)
- ◆ Soap and water bath
- ◆ CHG application, unless otherwise stated by surgeon
 - ◆ #1: CHG wipe application chin to toes after soap and water bath
 - ◆ #2: CHG wipe application in preoperative area
- ◆ Antibiotic ordered
 - ◆ Cefazolin 50 mg/kg (Max: < 120 kg: 2 grams; ≥ 120 kg: 3g)
 - ◆ If allergy, Clindamycin 10 mg/kg (Max: 900 mg)
 - ◆ If history of MRSA colonization or infection, Vancomycin 15 mg/kg (Max: 2g)
- ◆ All implants and instruments available at VUMC 24 hours prior to surgery
 - ◆ Sterilized prior to surgery; NO implants will be flashed.

DURING SURGERY

- ◆ Hand hygiene performed using hospital approved scrub (5 min) and Avagard
- ◆ AORN surgical attire guidelines followed
- ◆ Hair removed with disposable clippers if applicable
- ◆ Surgery site cleaned and prepped
 - ◆ Closed Chest: Apply Chloraprep and allow to dry for 3 minutes
 - ◆ ≥ 2 months: 30 seconds at incision site, then prep outward
 - ◆ < 2 months: Prep with care with non-tinted
 - ◆ If groins need prep, scrub for 2 minutes
 - ◆ Open Chest: Apply Betadine and allow to dry for 3 minutes
- ◆ Antibiotic administered prior to incision and re-dosed as indicated
- ◆ Traffic limited in the OR
- ◆ Dressing placed after incision closure
 - ◆ Open Chest: Ioban
 - ◆ Closed Chest: Dermabond w/Prineo OR Prevena (high risk patients)



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AFTER SURGERY

- ◆ Antibiotic re-dosed as indicated and discontinued ≤ 24 hours or 24 hours after chest closure
- ◆ CHG application
 - ◆ ≥ 2 months: Daily
 - ◆ < 2 months: Twice weekly
- ◆ Dressing change completed by surgical team
 - ◆ Prineo: Changed in 10-14 days
 - ◆ Prevena: Change in 7 days
- ◆ Wound care education provided to patients and family through Homeward Bound and reinforced by surgical team on day of discharge

