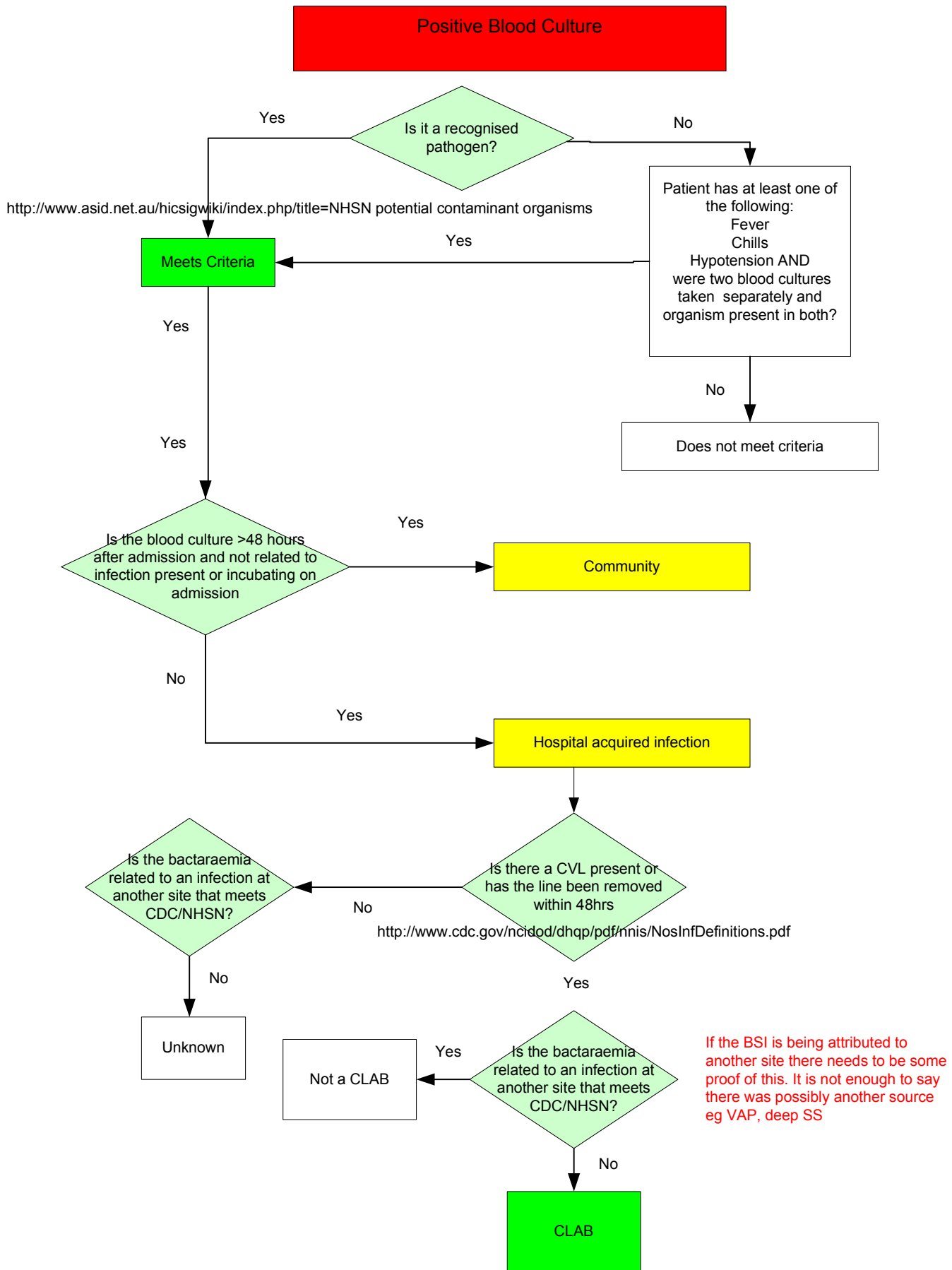


# Surveillance Process for Determining CLAB



If the BSI is being attributed to another site there needs to be some proof of this. It is not enough to say there was possibly another source eg VAP, deep SS

<http://www.cdc.gov/nhsn/PDFs/pscManual/>

## Attribution

Rules of attribution are that the CLAB will be attributed to the ICU if the CLAB was acquired while the patient was in ICU or within 48 hours of discharge from ICU.

**The bloodstream event must meet one of the following three criteria** (criteria 1 and 2 may be used for patients of any age, including < 1 year of age):

**Criterion 1:** Patient has a recognised pathogen cultured from one or more blood cultures and organism cultured from blood is not related to an infection at another site. (See Notes 1 and 2 below.)

**Criterion 2:** Patient has at least one of the following signs or symptoms:

fever (>38°C); chills; or hypotension;

and displays: signs and symptoms of infection and positive laboratory results are not related to an infection at another site and common skin contaminant is cultured from two or more blood cultures drawn on separate occasions. (See Notes 3 and 4 below.)

**Criterion 3:** Patient < 1 year of age has at least one of the following signs or symptoms:

- fever (> 38°C, rectal);
- hypothermia (<37°C, rectal);
- apnea;
- or bradycardia

and displays signs and symptoms of infection and positive laboratory results are not related to an infection at another site and common skin contaminant is cultured from two or more blood cultures drawn on separate occasions. (see Notes 3, 4 and 5 below.)