


Reference Acknowledgement: 2024 NHSN Annual Training

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Part 1: Scenario 1 of Secondary BSI Definition

2/3	25-year-old female admitted with history of diabetes, fever (103°F), severe abdominal pain, nausea, vomiting and purulent vaginal drainage. Pt reported frequent tampon use. Blood cultures negative on admission. Toxic Shock Syndrome suspected. Antibiotics started. Blood glucose: 400
2/4	Fever (101.5°F); Hypotensive; Blood glucose: 350
2/5	Blood glucose: 250
2/6	Blood glucose: 190
2/7	Blood culture: <i>Streptococcus pyogenes</i> / <i>Candida albicans</i>
2/8	Endometrial biopsy and cultures collected during a non-NHSN operative procedure. Endometrial culture: <i>Streptococcus pyogenes</i>
2/9	Blood culture: <i>Candida albicans</i>



PICC placed on 2/3
for poor access.

Question 1

What event(s) can be cited in this case?

- A. POA LCBI 1
- B. HAI OREP 1
- C. HAI OREP 3a
- D. HAI LCBI 1
- E. Both A & C
- F. Both B & D

Question 2

Can the 2/7 *S. pyogenes* and *Candida* blood cultures be secondary to the HAI OREP 1?

- A. Yes
- B. No

Question 3

Is the LCBI 1 event on 2/9 a CLABSI?

- A. Yes
- B. No

Part 2: Scenario 2 of the Secondary BSI Definition

1/27	60-year-old male admitted to the hospital with abdominal pain and fever (102°F).
1/28	CT scan "fluid collection adjacent to the spleen". Blood cultures x2: <i>E. coli</i>
1/29	Fever (100.5°F) Progress note: Zosyn started for bacteremia
1/30	Abdominal pain, nausea
1/31	Hypotension
2/1	BC positive x 2: <i>Bacteroides fragilis</i> ; Abdominal pain; Fever (101°F)
2/2	CT scan: Splenic abscess
2/3	Pt remains in hospital.

Question 1

What event(s) can be cited in this case?

- A. POA IAB 3b
- B. POA LCBI 1

- C. HAI IAB 3b
- D. Both B & C
- E. Both A & B

Question 2

Can the *Bacteroides fragilis* blood culture be deemed secondary to the HAI IAB 3b?

- A. Yes
- B. No