Algorithm for Investigation of Health Care-Associated (Nosocomial) Infections as Sentinel Events

Developed by Consensus of Infection Control Professionals from Consortium of Comprehensive Cancer Centers.*

Issue: Cancer centers are faced with multiple confounding factors in the assessment of health care-associated (nosocomial) infections (NI) as sentinel events (SE). Because of the high-risk populations of our institutions, these confounders must be considered when attributing death or major loss of function to NI.

IC will use routine surveillance methods (including review of death reports), to identify NI (health care-acquired) that result in death or major loss of function. Is NI as SE obvious? Other factors did NO Was death anticipated? Screen not play a role in death or major loss of patient's admission records for function. anticipated death. YES Was admission: YES Palliative? Due to relapse? DNR? Consider Due to comorbidities or complications? Anticipated Sentinel Event. death NO Refer to Risk Management/QI **Not SE** for Root-Cause Analysis. Review deaths at M&M conferences: · Physician review Minutes review Develop Action Plan to reduce risk or recurrence. Unanticipated Anticipated death death Place interventions and monitoring system as identified. Investigate Not SE cause of death. Death caused Document and report SE as Comorbidities played role in death. appropriate. by NI. Cause of death unclear/due to compound factors.

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