

**Data collection tool**

1. Patient ID/CODE \_\_\_\_\_
2. Ward \_\_\_\_\_ Bed number \_\_\_\_\_ MRN \_\_\_\_\_
3. Age \_\_\_\_\_
4. Sex \_\_\_\_\_
5. Residence A. Urban \_\_\_\_\_ B. Rural \_\_\_\_\_
6. Reason for admission/Dx at the time of admission \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
7. Complete admission diagnoses \_\_\_\_\_
8. Date of admission \_\_\_\_\_
9. Patient health condition at the time of admission  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
10. Is there any other localized infection? Yes      No
11. If yes, type of treatment given \_\_\_\_\_
12. Previous hospitalization      Yes      No
13. If yes for question 14:
  - a. Place (including ward) \_\_\_\_\_
  - b. Time (month/year) \_\_\_\_\_
  - c. Duration \_\_\_\_\_
14. Previous antibiotic use for the current illness A. Yes \_\_\_\_\_ B. No \_\_\_\_\_
15. If yes for question 15, specify \_\_\_\_\_
16. If yes for question 15, for how many days? \_\_\_\_\_ days
17. Being on mechanical ventilator? A. Yes \_\_\_\_\_ B. No \_\_\_\_\_
18. Presence of intravenous line? A. Yes \_\_\_\_\_ B. No \_\_\_\_\_
19. Presence of urinary catheters? A. Yes \_\_\_\_\_ B. No \_\_\_\_\_  
If yes, for how long \_\_\_\_\_
20. Indication for catheterization \_\_\_\_\_

21. Drainage inserted ? A. Yes\_\_\_\_\_ B. No\_\_\_\_\_
- If yes, for how long \_\_\_\_\_
22. Indication for drainage \_\_\_\_\_
23. Presence of invasive medical devices? A. Yes\_\_\_\_\_ B. No\_\_\_\_\_
24. If yes for questions 20,21,22,26 (more than one answer is possible)
- A. Endotracheal tube? A. Yes\_\_\_\_\_ B. No\_\_\_\_\_
- B. NGT A. Yes\_\_\_\_\_ B. No\_\_\_\_\_
- C. Chest tube A. Yes\_\_\_\_\_ B. No\_\_\_\_\_
25. Peripheral intravenous line (IV) catheter A. Yes\_\_\_\_\_ B. No\_\_\_\_\_
26. Insertion of a urinary catheter A. Yes\_\_\_\_\_ B. No\_\_\_\_\_
27. Intubation A. Yes\_\_\_\_\_ B. No\_\_\_\_\_
28. Underlying diseases? A. Yes\_\_\_\_\_ B. No\_\_\_\_\_
29. If yes, underlying diseases (more than one answer is possible)
- i. Diabetes mellitus vi. Cardiac disorders
- ii. Chronic renal failure vii. Severe malnutrition (SAM)
- iii. Hypertension viii. TB
- iv. Chronic liver disease ix. Cancer
- v. HIV/AIDS x. Others (specify)
30. Surgery since admission A. Yes\_\_\_\_\_ B. No\_\_\_\_\_
31. Surgical procedure done? A. Yes\_\_\_\_\_ B. No\_\_\_\_\_
- If yes for question 36,
- A. Type of surgery A. Elective\_\_\_\_\_ B. Emergency\_\_\_\_\_
- B. Type of the procedure\_\_\_\_\_
- C. Date \_\_\_\_\_ Time \_\_\_\_\_
- D. Duration of the surgery \_\_\_\_\_ hours
- E. Type of surgical wound A. Clean B. Clean contaminated C. Contaminated D. Dirty
32. Antibiotic prophylaxis given? A. Yes\_\_\_\_\_ B. No\_\_\_\_\_
- If yes for Q36, specify/name of antibiotic \_\_\_\_\_
- If yes for Q36, how many doses? \_\_\_\_\_
33. Duration of stay hospital stay in days \_\_\_\_\_

34. Severe anaemia [haemoglobin <50 g/L (for patients older than 28 days) or haemoglobin <90 g/L (for neonates)]

A. Yes \_\_\_\_\_ B. No \_\_\_\_\_ C. Unknown/not tested \_\_\_\_\_

35. Immune deficiency A. Yes \_\_\_\_\_ B. No \_\_\_\_\_ C. Unknown/not tested \_\_\_\_\_

36. Nutritional status WAZ score (Weight-for-age Z score ) A. >-3 B. -3 to 4 C. <-4

37. McCabe score

- A. Non-Fatal diseases
- B. Ultimately fatal diseases
- C. Rapidly fatal diseases
- D. Unknown

38. American Society of Anesthesiology (ASA) classification

- a. Normally health patient
- b. Patient with mild systemic diseases
- c. Patient with severe systemic disease that is not incapacitating
- d. Patient with incapacitating systemic diseases that is a constant threat to life
- e. Unknown

39. HIV status A. Reactive B. Non-reactive C. Unknown

40. Presence of HAIs based on CDC definition:

\_\_\_\_\_  
\_\_\_\_\_

41. Type of HAIs:

\_\_\_\_\_  
\_\_\_\_\_

Name of data collectors : \_\_\_\_\_ Signature \_\_\_\_\_ date

Name of supervisor \_\_\_\_\_ Signature \_\_\_\_\_ date