Patient episode of Staphylococcus aureus bacteraemia—Staphylococcus aureus bacteraemia status, code N

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Patient episode of Staphylococcus aureus bacteraemia—Staphylococcus aureus bacteraemia status, code N

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Staphylococcus aureus bacteraemia status
METEOR identifier:	458219
Registration status:	Health, Superseded 09/12/2022
Definition:	Identifies whether the patient episode of *Staphylococcus aureus* bacteraemia (SAB) is healthcare associated or community-acquired, as represented by a code.
Data Element Concept:	Patient episode of Staphylococcus aureus bacteraemia—Staphylococcus aureus bacteraemia status
Value Domain:	Staphylococcus aureus bacteraemia status, code N

Value domain attributes

Representational attributes

Representation class:	Code	
Data type:	Number	
Format:	N	
Maximum character length:	1	
	Value	**Meaning**
Permissible values:	1	Healthcare associated
	2	Community-acquired
Supplementary values:	8	Unknown
	9	Not stated/inadequately described

Source and reference attributes

Submitting organisation:	Australian Commission on Safety and Quality in Health Care (ACSQHC)
Origin:	ACSQHC Healthcare Associated Infection Technical Working Group

Data element attributes

Collection and usage attributes

Guide for use:	A *Staphylococcus aureus* bacteraemia (SAB) will be considered to be a healthcare associated event if:

EITHER

The patient's first SAB positive blood culture was collected more than 48 hours after hospital admission or less than 48 hours after discharge.

OR

The patient's first positive SAB blood culture was collected less than or equal to 48 hours after hospital admission and one or more of the following key clinical criteria was met for the patient-episode of SAB:

1. SAB is a complication of the presence of an indwelling medical device (e.g. intravascular line, haemodialysis vascular access, CSF shunt, urinary catheter)
2. SAB occurs within 30 days of a surgical procedure where the SAB is related to the surgical site
3. SAB was diagnosed within 48 hours of a related invasive instrumentation or incision
4. SAB is associated with neutropenia (Neutrophils: less than 1×10^9/L) contributed to by cytotoxic therapy

If none of these criteria are met, then the episode of SAB is considered to be community-acquired for the purposes of surveillance.

Comments:	To identify whether SABs are healthcare associated or community-acquired, SABs should undergo a standard case review by a healthcare worker trained in Infectious Diseases/Infection Control.

Source and reference attributes

Submitting organisation:	Australian Commission on Safety and Quality in Health Care (ACSQHC)
Origin:	ACSQHC Healthcare Associated Infection Technical Working Group

Relational attributes

Related metadata references:	Has been superseded by Patient episode of Staphylococcus aureus bloodstream infection—infection setting, origin code N Health, Standard 09/12/2022
Implementation in Data Set Specifications:	Surveillance of healthcare associated infection: Staphylococcus aureus bacteraemia NBPDS Health, Superseded 09/12/2022 *Conditional obligation:*