

### 1023. Infectious Complications of Pediatric Ambulatory Surgery

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**Background.** In the U.S., more than 75% of all surgical procedures are performed at an ambulatory surgical center (ASC). Little is known about the risk of infection after pediatric ambulatory surgery.

**Methods.** We conducted structured parental interviews 30 to 45 days after ambulatory surgery at a children's hospital or 3 affiliated ASC over a 13-month period.

Parenteral report of a surgical site infection (SSI), antibiotic prescription with abnormal wound or wound culture triggered chart review by an Infection Preventionist. Cases were categorized as National Healthcare Surveillance Network SSI (NHSN-SSI), a suspected SSI (for cases had 2 or more elements consistent with an SSI but failed to meet an NHSN definition), or NHSN infection at a secondary site related to surgery.

**Results.** We conducted 4513 parental interviews after 6280 targeted surgeries (71.9%), including 732 hernia repairs, 549 lesion excisions, and 757 orthopedic procedures. A total of 74 procedures (1.6%) underwent IP investigation. Nine NHSN-SSI were identified (overall SSI rate 0.2%), including 5 after orthopedic (orthopedic SSI rate 0.7%) and 2 after urologic procedures (urologic SSI rate 0.3%). Investigation also identified 46 suspected SSI and 1 infection at a secondary site for a possible post-operative infection rate of 1.2%.

**Conclusion.** The overall rate of infectious complications after pediatric ambulatory surgery may be higher than previously appreciated although relatively few cases meet the NHSN definition for SSI.

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