

Instructions for Completion of the Laboratory Record of Pneumonia (PNEU) form

Data Field	Instructions for Data Collection
Page 2	
Surveillance date	Write down surveillance date using the format: mm/yyyy.
Facility name	Write down the facility name
Facility code	Write down facility code using form A
Number of Pathogens	Write down the number of isolated pathogens as recorded on page 1
Pathogen (s) name (s)	<p>Write the name of the isolated microorganism (s)</p> <ul style="list-style-type: none"> • If multiple pathogens are identified, enter the pathogen judged to be the most important cause of infection as #1, the next most as #2 and the least as #3(usually this order will be indicated on the laboratory report). • If secondary BSI pathogens are cultured, they should be entered only after site-specific pathogens are entered. • If the species is not given on the lab report or is not found on the KNHSS list (form D), then select the “spp” choice for the genus.
Pathogen (s) code (s)	Write the code of each pathogen according to Form D
MDRO	<p>Check “Yes” and write the code if the isolated organism(s) was/were MDRO of the following, otherwise check “No”.</p> <p>(MRSA): <i>S. aureus</i> cultured from any specimen that tests oxacillin-resistant (R), cefoxitin-resistant, or methicillin-resistant by standard susceptibility testing methods, or any laboratory finding of MRSA (includes but not limited to PCR or other molecular based detection methods).</p> <p>VRE: <i>Enterococcus faecalis</i>, <i>Enterococcus faecium</i>, or <u>any <i>Enterococcus</i></u> species that is <u>resistant (R)</u> to vancomycin, by standard susceptibility testing methods or a laboratory finding of VRE (includes but not limited to PCR or other molecular based detection methods).</p>

ESBL producing Gram negative bacteria: Gram negative spp. producing ESBLs enzymes that mediate resistance to extended-spectrum (third generation) cephalosporins (e.g., ceftazidime, cefotaxime, and ceftriaxone) and monobactams (e.g., aztreonam) but do not affect cephamycins (e.g., cefoxitin and cefotetan) or carbapenems (e.g., meropenem or imipenem).

CRE: *Escherichia coli*, *Klebsiella oxytoca*, *Klebsiella pneumoniae*, *Klebsiella aerogenes*, *Enterobacter spp.* or any *Enterobacteriaceae spp.* (see table 1 of the “Updated KNHSS MDRO definitions 2020” document for a partial list of *Enterobacteriaceae spp.*) testing resistant (R) to imipenem, meropenem, doripenem, or ertapenem by standard susceptibility testing methods (i.e., minimum inhibitory concentrations of ≥ 4 mcg/mL for doripenem, imipenem and meropenem or ≥ 2 mcg/mL for ertapenem) OR by production of a carbapenemase (specifically, KPC, NDM, VIM, IMP, OXA-48) demonstrated using a recognized test (e.g., polymerase chain reaction, metallo- β -lactamase test, modified-Hodge test, Carba-NP). For ***Morganella morganii*, *Proteus spp* and *Providencia spp.*** that have intrinsic imipenem non-susceptibility, resistance to carbapenems other than imipenem is required.

MDR-*Pseudomonas aeruginosa*: Tested intermediate or resistant (I or R) for at least one agent in at least 3 of the following 5 classes:

β -lactam/ β -lactamase inhibitor combination	Aminoglycosides	Carbapenems	Fluoroquinolones
Piperacillin Piperacillin/tazobactam	Amikacin Gentamicin Tobramycin	Imipenem Meropenem Doripenem	Ciprofloxacin Levofloxacin
Cephalosporins			
Cefepime Ceftazidime			

Carbapenem Non-Susceptible (C-NS) *Pseudomonas aeruginosa*: *Pseudomonas aeruginosa* testing intermediate or resistant (I or R) to imipenem, meropenem or doripenem.

KNHSS

Kuwait National Healthcare-associated
Infections Surveillance System

	<p>MDR-<i>Acinetobacter</i> spp.: Any <i>Acinetobacter</i> spp. testing <u>intermediate or resistant (I or R)</u> to at least one agent in at least 3 antimicrobial classes of the following 6 antimicrobial classes:</p> <table border="1"> <thead> <tr> <th>β-lactam/β-lactamase inhibitor combination</th> <th>Aminoglycosides</th> <th>Carbapenems</th> <th>Fluoroquinolones</th> </tr> </thead> <tbody> <tr> <td>Piperacillin Piperacillin/tazobactam</td> <td>Amikacin Gentamicin Tobramycin</td> <td>Imipenem Meropenem Doripenem</td> <td>Ciprofloxacin Levofloxacin</td> </tr> <tr> <th>Cephalosporins</th> <th>Sulbactam</th> <td></td> <td></td> </tr> <tr> <td>Cefepime Ceftazidime</td> <td>Ampicillin/sulbactam</td> <td></td> <td></td> </tr> </tbody> </table> <p>Carbapenem Non-Susceptible (C-NS) <i>Acinetobacter</i> spp.: Any <i>Acinetobacter</i> spp. testing <u>intermediate or resistant (I or R)</u> to imipenem, meropenem or doripenem.</p>	β-lactam/β-lactamase inhibitor combination	Aminoglycosides	Carbapenems	Fluoroquinolones	Piperacillin Piperacillin/tazobactam	Amikacin Gentamicin Tobramycin	Imipenem Meropenem Doripenem	Ciprofloxacin Levofloxacin	Cephalosporins	Sulbactam			Cefepime Ceftazidime	Ampicillin/sulbactam		
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Date of sampling	Write the date the sample was taken using the format: dd/mm/yyyy																
Type of infection	Write the type of pneumonia using the PNEU criteria (e.g. PNU1/VAP, PNU2/Non VAP....)																
Type of sample	Write down the sample type (e.g. endotracheal aspirate, mini-BAL sample, lung tissue, pleural fluid.....)																
Antimicrobial agents and susceptibility results	<p>For each isolated organism:</p> <p>In front of each antimicrobial tested, mark the susceptibility result as either:</p> <p>S- Sensitive I-Intermediate Or R- Resistant</p> <p>Others specify: any antimicrobial other than listed can be included.</p>																