

Surgical site infection rate can be reduced in hysterectomy

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infections in the pre-full bundle implementation period and post-full bundle implementation period (4.51 and 1.87 percent, respectively); during the last eight months of the study period there was a sustained reduction in the proportion of [patients](#) experiencing surgical site infection. Patients who underwent surgery after full implementation were significantly less likely to develop a surgical site infection than those undergoing surgery before full implementation, after adjustment for clinical characteristics (adjusted odds ratio, 0.46).

"The multidisciplinary implementation of a gynecologic perioperative surgical site infection prevention bundle was associated with a significant reduction in surgical [site](#) infection rate in patients undergoing hysterectomy," the authors write.

One author disclosed financial ties to 3M, which markets patient warming devices, and other companies in the health care industry.

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(HealthDay)—Implementation of a perioperative surgical site infection prevention bundle may reduce the rate of surgical site infection among patients undergoing hysterectomy, according to a study published online May 7 in *Obstetrics & Gynecology*.

Sarah E. Andiman, M.D., from the Yale School of Medicine in New Haven, Conn., and colleagues conducted a quality improvement study featuring a retrospective analysis of a prospectively implemented, multidisciplinary team-designed surgical site [infection](#) prevention bundle. The bundle included use of chlorhexidine-impregnated preoperative wipes, standardized aseptic surgical preparation, standardized antibiotic dosing, perioperative normothermia, and surgical dressing maintenance; when the protocol was breached, direct feedback was provided to clinicians.

During the 33-month study period, 2,099 hysterectomies were completed. The researchers found that there were 61 and 14 surgical site

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