



Bacterial Infections

GENERAL INSTRUCTIONS

This form captures all positive bacterial infection results from the onset of the episode of ALF through the 12 month follow-up period **or** until the time of transplantation for patients who receive a liver (or bone marrow) transplant. Results from samples collected prior to transplantation should be recorded.

This form is in log format and each line should be completed as needed to record new information.

SPECIFIC INSTRUCTIONS

Patient ID: Record the Patient ID

Infection: Select the site of the infection from the list. If the child has an infection originating from a source that is not listed, please contact the DCC.

Sample date: Record the date that the sample was obtained to test for infection. The date is recorded in month/day/year format (2 digits). If any part of the date is unknown, enter -3 for the unknown part of the date and enter the other parts of the date that are known. If the entire date is unknown, check "Unknown".

Test culture: Select the type of infection:

- S aureus Staphylococcus aureus, Staph infection
- S epid: Staphylococcus epidermidis
- S pneum: Streptococcus pneumoniae, pneumococcus
- E coli: Esherichia coli
- Klebsiella: K pneumonia, K ozaenae, K rhinoscleromatis, K oxytoca, K planticola, K terrigena K ornithiolytica
- Fungus: Fungal, candidiasis, thrush, mycosis, yeast
- MRSA: Methacillin-resistant staphylococcus aureus
- Enterococci: E. faecalis, E. faecium
- Serratia: S marcescens, S plymuthica, S liquefaciens, S rubidaea, S odoriferae
- Pseudomonas: P aeruginosa
- Bacillus: B. cerus, B. anthracis
- CoNS: Coagulase-negative staphylococci

If a culture type is not included in the listing, please contact the DCC.

Status: Indicate whether the infection is resolved, continuing, or unknown at the first of liver (or bone marrow) transplantation, death, or at the end of the follow-up period (or last patient contact date).

System ID: Record the system generated ID for the record.