

Case Report Form

Case report form has been divided into 5 components

- a) Demography
- b) Risk factor
- c) Antifungal prescription record
- d) Microbiological record
- e) Source control intervention

A	DEMOGRAPHY	
	Name	
	Age	
	Sex	a)Male b)Female
	Hospital registration no	
	Study no	
	Date of Hospital admission	
	Date of ICU admission	
	Date of suspicion/diagnosis of Intra-abdominal Sepsis (Date of Enrolment in the study)	
	Date of ICU discharge	
	Date of Hospital Discharge	
	Duration of Pre ICU hospitalization	
	Duration of ICU stay	
	Duration of Post ICU hospitalization	
	Source of Admission-	a) Community b) Hospital Ward c) Other ICU
	Type of Patients	a) Medical b) Surgical
	Admission Diagnosis	
	APACHE II at admission	
	SOFA at admission	
	Co-Morbidities	
	At 28 days	a)Survivor b) Nonsurvivor
	At discharge from ICU	a)Survivor b) Nonsurvivor
	At discharge from Hospital	a)Survivor b) Nonsurvivor
B	RISK FACTORS	
	>1 abdominal surgery within 30 days	a)Yes b)No
	GI perforation	a)Yes b)No
	GI anastomosis leakage	a)Yes b)No
	Severe Acute Pancreatitis	a)Yes b)No
	Severe Sepsis	a)Yes b)No
	TPN (duration, type)	
	Immunosuppression (duration, type)	
	DM (control/ uncontrolled/ insulin)	
	Catheters (names, type, duration) A) CVP B) Arterial C) Dialysis D) PCD E) ICD	
	AKI (duration, RRT)	

	CKD (duration, RRT)	
	Hepatic dysfunction (duration)	
	CLD (duration, stage)	
	Mechanical ventilation (elective/emergency, duration)	
	Antibiotic use (duration , type)	
	Shock (duration, requirement of vasopressor)	
	Multifocal colonization (CI/CCI)	
	Malnutrition (BM/duration/grade)	
	Alcoholic (duration/dose)	
	Malignancy(duration/stage/treatment)	
	Steroid use (duration/dose)	

C	ANTIFUNGAL PRESCRIPTION	a) Yes b) No
1)	Total duration of Antifungal therapy	
2)	Was a combination therapy used? (name , duration , dose)	
3)	Drug Name	
	Reason for starting	a) Prophylaxis b) Empirical c) Targeted
	Route	
	Dose	
	Reason for Discontinuation	a) Lack of response b) Clinical improvement c) Completion of prescribed duration d) Renal dysfunction e) Hepatic dysfunction f) Cost g) Death of the patient h) Other -specify
	Start Date	
	Stop date	
	Total Duration	
4)	Drug Name	
	Reason for starting	a)Prophylaxis b) Empirical c) Targeted
	Route	
	Dose	
	Reason for Discontinuation	a) Lack of response b) Clinical improvement c) Completion of prescribed duration d) Renal dysfunction e) Hepatic dysfunction f) Cost g) Death of the patient h) Others- specify
	Start Date	
	Stop date	
	Total Duration	

D	MICROBIOLOGY RECORD	
1)	Date of Diagnosis of intra abdominal sepsis	
	Date of Microbiological sampling done	
	Date of Culture positivity	
	Organism grown	
	Sensitivity (chart needed)	
2)	Date of Diagnosis of intra abdominal Candidiasis	
	Date of Microbiological sampling done	

	Date of Culture positivity	
	Organism grown	
	Sensitivity (chart needed)	
3)	Time difference between start of antifungal therapy and first blood culture/tissue culture collection that came to be positive	-7 days -48hrs -24hrs 0hrs (culture collection time) +24hrs +48hrs >48hrs
E)	SOURCE CONTROL MEASURES	
	Surgery (type, timing, adequate.....??)	
	PCD placement (type, number, timing, adequate.....??)	