

Description of preventive measures of Zero Surgical Infection Project (ZSIP) and their critical points.

Preventive measure	Description of critical points
Perioperative antibiotic prophylaxis (PAP)	1. Updated hospital PAP protocol <3 years ago. 2. Compliance with the PAP protocol regarding indication, choice and duration (maximum 24 hours). 3. Administration of PAP within 60 minutes before incision 4. PAP dose adjustment to weight, age, obesity, hemodilution, renal function. 5. Compliance of intestinal, pharyngeal or vaginal decontamination protocols. 6. PAP before incision in cesarean sections and before the tourniquet in traumatology.
Patient skin antisepsis (SA)	1. Ensure the patient's body hygiene <12 hours before surgery using neutral soap or antiseptic soap. 2. Pre-define interventions where CA should not be used. Use preferably applicators. Apply at least 2 successive layers of 2% Chlorhexidine gluconate (CHG), using friction and back and forth movement. 3. If manual antisepsis is used, do not apply more CHG than the 75th percentile of the expected consumption, with exceptions. 4. Extend the scrub area according to the type of surgical intervention. Perform visual inspection of spills. Danger of ignition. Allow to dry at least 2 minutes.
Hair removal (HR)	1. Do not remove hair if it is not necessary. If necessary, use hair clippers. Do not shave. Interval from hair removal to surgical intervention <12-16 hours. Use protocols that delimit the hair removal zone. They must be focused on the incision area. 2. Check that the incision area does not have wounds or dermatitis. Treat locally if appropriate. 3. Standardize certain strictly defined exceptions (NCG, hair removal at home, other methods of hair removal). 4. Ensure bathing and body hygiene of the patient after hair removal.
Normothermia (NT)	1. Check if normothermia is indicated in patients according to Hospital protocols. 2. Use reliable measurement devices for patient temperature. Check temperature every hour before, during and after surgery, always keeping >35.5°C. 3. Maintain the operating room between 21°-23°C. Use dehumidifiers or adjust temperature to seasonal changes. 4. Apply heat blankets and fluid heaters, if applicable. 5. Use international NT control algorithms.
Normoglycemia (NG)	1. Identify NG heads in plant, operating room and recovery room. Previous surgery, check if NG is indicated in patients. Adjust before entry into operating room. 2. Avoid prolonged fasting state and dehydration. If applicable, use carbohydrate drinks until 2 hours before surgery. 3. Use appropriate devices (glucometers) to monitor blood glucose levels. Measure blood glucose before, during and after the intervention and maintain <180 mg/dl. 4. Make sure you have prepared insulin dosage for administration in the operating room. Dose insulin according to international NG control algorithms.