

only 20% of Spanish hospitals report postdischarge surveillance for SSI. Finally, the continued collaboration of surgeons, hospital pharmacists, hospital epidemiologists, and infection control practitioners is of paramount importance for the quality improvement of the National Health System.⁸

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This work was supported in part by a research grant from Glaxo-Wellcome and by a research grant from the Spanish Health Research Found (FIS Grant # 98/1391). This paper was presented at the 1996 American Society of Health-Care Pharmacy Mid-Year Meeting, December 1996, New Orleans, Louisiana; abstract Intl-20. Hospital Pharmacy Antimicrobial Prophylaxis Study Group Members: Rosa Anton, Pedro Cervera (Alicante); Elvira Gea (Andorra); Aparicio Antuña, Francisco Nieto, MªPaz Sacristán (Asturias); Clara Agustí, Joan Altimiras, Ana Ayestarán, María A. Carceller, Tomás Casasín, Isabel Castro, Roser Busquets, MªQueralt Gorgas, Santiago Grau, MªCarmen López, José Miralles, Josep Monterde, Magda Montserrat, Agustí Perelló, Carme Permanyer, Ramón Pla, Jaime Poquet, Cristina Roure, Mercedes Sora, Manuela Velázquez (Barcelona); Felipe Navarro (Bilbao); Juan Chico (Burgos); Pilar Tejada (Cáceres); Mercedes Izquierdo (Castellón); Marta Arteta, Juan C. Valenzuela (Ciudad Real); Andrés Castaño (Eivissa); MªJosé Buisan, Josefina Camós, MªAntonia Rafart, Elisenda Flotats (Girona); Angeles García (Guadalajara); Antonia Casas, María Outeda, José Vila (La Coruña); MªDolores Velázquez, Elena Castellanos, Alicia Díez, Bartolomé Domínguez (Las Palmas); Montse Navarro, María García (Leida); Alberto Alfaro, MªJose Martínez, MªCarmen Obaldía, MªFernanda Hurtado (Logroño); Lourdes Armentia, Soledad González, Gloria Hervás, Paloma Izquierdo, Pilar Sosa (Madrid); Carmen Gállego, Begoña Muros (Málaga); Olga Delgado (Mallorca); MªTeresa Antequera, MªMar Soler (Murcia); Luciano Martínez (Orense); Joaquín Giráldez (Pamplona); Leonor Munell, Ana García (Santander); Alvaro Aguirre, MªJesús Gayán (San Sebastián); José R. Ávila (Sevilla); MªJesús Gallart, Francesc Paez, MªAngels Vidal (Tarragona); Francisco Rodilla (Teruel); Lucas Lorduy, Carmen Mas, Juan P. Ordovás, José L. Póveda (Valencia); Ana M. Esteve (Vitoria); Carmen Floristan (Vizcaya); and Javier Cerezo (Glaxo-Wellcome, Spain).

98-OA-007. Codina C, Trilla A, Riera N, Tuset M, Carne X, Ribas J, Asenjo M-A, the Hospital Pharmacy Antimicrobial Prophylaxis Study Group. *Perioperative antibiotic prophylaxis in Spanish hospitals: results of a questionnaire survey.* Infect Control Hosp Epidemiol 1999;20:436-439.

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TB Screening in Physicians' Offices

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Schulte and coinvestigators from CDC's Division of Tuberculosis Elimination assessed tuberculin skin-testing practices of physicians after community-wide screening of 1,400 children exposed to a pediatrician with active TB in a medium-sized city in eastern Pennsylvania. A self-administered questionnaire was completed by 60 of 80 pediatricians and family practitioners seeing pediatric patients.

The 60 physicians had practiced a mean of 17 (range, 3-38) years, and only 1 did not do TB skin testing for pediatric patients. In total, the 59 physicians doing TB skin testing reported routinely tuberculin testing more than 900 children per month. Only 8 (14%) of 59 physicians followed published guidelines for placement and reading of tuberculin tests. It was concluded that, in this community where a highly publicized TB case prompted massive pediatric screening, most physicians seeing children in private practice do not fol-

low standard TB skin-testing guidelines. Increased understanding of how private-practice physicians learn about and decide to use recommended standards is needed if tuberculin tests are to be performed correctly and diagnosed appropriately.

FROM: Schulte JM, Moore M, Kistler V, Margraf P, Christman R, Valway SE, et al. Tuberculosis screening in private physicians' offices, Pennsylvania, 1996. *Am J Prev Med* 1999;16:178-181.