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Isolation policies in musculoskeletal infection care: time to move from tradition to evidence

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Survey S1. Full questionnaire distributed to members of the European Bone and Joint Infection Society (EBJIS) during the 2025 Annual Meeting.

QUESTIONNAIRE ISOLATION POLICY

Section A: Current Isolation Practices in Your Center

In which country are you currently employed? _____

What is your current speciality or professional role?

☐ Orthopaedic/Trauma surgeon
☐ Plastic surgeon
☐ Infectious disease specialist
☐ Microbiologist
☐ Pharmacist
☐ Epidemiologist
☐ Infection control and prevention
☐ Other: _____

How many years of experience do you have in your current field?

☐ Student/Resident
☐ < 5 years
☐ 5–10 years
☐ 11–20 years
☐ > 20 years

What is the size or type of your hospital?

☐ Small hospitals: fewer than 100 beds
☐ Medium hospitals: 100 to 499 beds
☐ Large hospitals: 500 or more beds
☐ University hospitals: 500 or more beds

Does your center currently use a dedicated septic ward (separate unit) for musculoskeletal infection cases?

☐ Yes ☐ No ☐ No answer

Does your surgical ward currently have separate rooms available to isolate a single patient with a musculoskeletal infection (regardless of resistance pattern)?

☐ Yes ☐ No ☐ No answer

Do you currently differentiate isolation policies for musculoskeletal infection patients based on whether their pathogens are multidrug-resistant (MDR) or not?

☐ Yes ☐ No ☐ No answer

Does your center have a clearly defined standardized care package for musculoskeletal infection that includes standard precautions (e.g. hand hygiene, use of protective equipment, cleaning protocols)?

☐ Yes ☐ No ☐ No answer

Section B: Case scenarios

A patient is scheduled for elective total hip arthroplasty.

The adjacent bed is occupied by an individual diagnosed with an acute Methicillin-susceptible *Staphylococcus aureus* periprosthetic joint infection who does not have wound-related complications. Is it acceptable to place these two patients in the same room?

☐ Yes
☐ No
☐ No answer

The adjacent bed is occupied by someone with an Methicillin-susceptible *Staphylococcus aureus* fracture-related infection with a draining fistula. Is it acceptable to place these two patients in the same room?

☐ Yes
☐ No
☐ No answer

The adjacent bed is occupied by an individual diagnosed with an Methicillin-resistant *Staphylococcus aureus* periprosthetic joint infection who does not have wound-related complications. Is it acceptable to place these two patients in the same room?

☐ Yes
☐ No
☐ No answer

Section C: Personal view on Isolation Practices

Is there scientific evidence to support the implementation of dedicated septic wards for musculoskeletal infection patients?

☐ Yes ☐ No ☐ No answer

Is there scientific evidence to support the need for stricter isolation measures for musculoskeletal patients with multidrug-resistant pathogens compared to those with non-multidrug-resistant pathogens?

☐ Yes ☐ No ☐ No answer

Do you agree that it is important to have a clearly defined standardised care package (e.g. hand hygiene, use of protective equipment, cleaning protocols) implemented for the prevention of musculoskeletal infection patients?

☐ Strongly Agree
☐ Agree
☐ Neither agree nor disagree
☐ Disagree
☐ Strongly Disagree
☐ Not sure/not applicable
☐ No answer

Thank you for taking your time to participate in this survey

We value your input and feedback.