# 2020 NHSN Urinary System Infection (USI) Checklist

## Documentation Review Checklist

### USI – Urinary System Infection (kidney, ureter, bladder, urethra, or perinephric space)

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**USI** - Urinary System Infection

**Element:** Urinary system infections must meet at least **one** of the following criteria:

1. Patient has organism(s) identified from fluid (not urine) or tissue from affected site by a culture or non-culture based microbiologic testing method, which is performed for purposes of clinical diagnosis or treatment, for example, not Active Surveillance Culture/Testing (ASC/AST).

2. Patient has an abscess or other evidence of infection on gross anatomical exam, during invasive procedure, or on histopathologic exam.

3. Patient has **one** of the following signs or symptoms:
   - Fever (>38.0°C)
   - Localized pain or tenderness*

   **AND** at least **one** of the following:
   - Purulent drainage from affected site.
   - Organism(s) identified from blood by a culture or non-culture based microbiologic testing method, which is performed for purposes of clinical diagnosis or treatment, for example, not Active Surveillance Culture/Testing (ASC/AST)
     **AND**
     Imaging test evidence suggestive of infection (for example, ultrasound, CT scan, magnetic resonance imaging [MRI], or radiolabel scan [gallium, technetium]), which if equivocal is supported by clinical correlation, specifically, physician documentation of antimicrobial treatment for urinary system infection.

4. Patient **≤1 year of age** has at least **one** of the following signs or symptoms:
   - Fever (>38.0°C)
   - Hypothermia (<36.0°C)
   - Apnea*
   - Bradycardia*
   - Lethargy*
   - Vomiting*

   **AND** at least **one** of the following:
   - Purulent drainage from affected site.
   - Organism(s) identified from blood by a culture or non-culture based microbiologic testing method, which is performed for purposes of clinical diagnosis or treatment, for example, not Active Surveillance Culture/Testing (ASC/AST)
     **AND**
     Imaging test evidence suggestive of infection (for example, ultrasound, CT scan, magnetic resonance imaging [MRI], or radiolabel scan [gallium, technetium]), which if equivocal is supported by clinical correlation, specifically, physician documentation of antimicrobial treatment for urinary system infection.

*With no other recognized cause

**Reporting instructions:**
- Report infections following circumcision in newborns as SST-CIRC.
- If patient meets USI criteria and they also meet UTI criteria, report UTI only, unless the USI is a surgical site organ/space infection, in which case, only USI should be reported.