

2022 NHSN Lower Respiratory Infection (LRI) Checklist

| Documentation Review Checklist | | |
|---|--------------------------|------|
| LRI - LOWER RESPIRATORY INFECTION, OTHER THAN PNEUMONIA | | |
| LUNG-Other infection of the lower respiratory tract and pleural cavity | | |
| Element | Element Met | Date |
| Other infections of the lower respiratory tract must meet at least <i>one</i> of the following criteria: | | |
| 1. Patient has organism(s) seen on Gram stain of lung tissue or pleural fluid or identified from lung tissue or pleural fluid (when pleural fluid was obtained during thoracentesis or within 24 hours of chest tube placement) 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). | <input type="checkbox"/> | |
| 2. Patient has a lung abscess or other evidence of infection (for example, empyema) on gross anatomic or histopathologic exam. | <input type="checkbox"/> | |
| 3. Patient has imaging test evidence of abscess or infection (excludes imaging test evidence of pneumonia), which if equivocal is supported by clinical correlation, specifically, physician documentation of antimicrobial treatment for lung infection. | <input type="checkbox"/> | |
| Reporting instructions: <ul style="list-style-type: none"> If patient meets LUNG and PNEU report as PNEU only, unless the LUNG is a surgical site organ/space infection, in which case, report both PNEU and SSI-LUNG. If pleural fluid specimen is collected after a chest tube is repositioned OR after 24 hours, this pleural fluid specimen is not eligible for LUNG 1. Repositioning must be documented in the patient record by a healthcare professional. | | |

