## 2025 NHSN Reproductive Tract Infection (REPR) Checklist

Documentation Review Checklist		
REPR - REPRODUCTIVE TRACT INFECTION		
EMET-Endometritis		
Criterion met: 🗆 1 🗆 2		
Element	Element Met	Date
Endometritis must meet at least <u>one</u> of the following criteria:		
<ol> <li>Patient has organism(s) identified from endometrial fluid or tissue 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).</li> </ol>		
2. Patient has <b><u>suspected endometritis</u></b> with at least <b><u>two</u></b> of the following signs or symptoms:		
• Fever (>38.0°C)		
<ul> <li>Pain or tenderness (uterine or abdominal)*</li> </ul>		
Purulent drainage from uterus		
*With no other recognized cause		
<ul> <li>Reporting instructions:</li> <li>Do not report an HAI chorioamnionitis as EMET (see OREP).</li> <li>Do not report subsequent postpartum endometritis after a vaginal delivery as an HAI if a p with POA chorioamnionitis (OREP). (See next bullet for endometritis following a C-section)</li> <li>Report as an organ space SSI-EMET if a C-section was performed on a patient with chorioa patient later develops endometritis.</li> </ul>		

REPR - REPRODUCTIVE TRACT INFECTION		
EPIS-Episiotomy infection		
Criterion met: 🗆 1 🗖 2		
Element	Element	Date
	Met	
Episiotomy infections must meet at least <u>one</u> of the following criteria:		
1. Postvaginal delivery patient has purulent drainage from the episiotomy.		
2. Postvaginal delivery patient has an episiotomy abscess.		



REPR - REPRODUCTIVE TRACT INFECTION		
OREP-Deep pelvic tissue infection or other infection of the male or female reproductive epididymis, testes, prostate, vagina, ovaries, uterus) including chorioamnionitis, but exercise endometritis, or vaginal cuff infections Criterion met: 2123 33	-	-
Element	Element Met	Date
Other infections of the male or female reproductive tract must meet at least <u>one</u> of the following c	riteria:	
<ol> <li>Patient has organism(s) identified from tissue or fluid from one of the specified OREP sites (excludes urine and vaginal swabs) 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).</li> </ol>		
<ol> <li>Patient has an abscess or other evidence of infection of affected site on gross anatomic or histopathologic exam.</li> </ol>		
<ol> <li>Patient has suspected infection of one of the listed OREP sites AND <u>two</u> of the following lo symptoms:</li> </ol>	ocalized sign	ns or
• Fever (>38.0°C)		
Nausea*		
<ul> <li>Vomiting*</li> </ul>		
Pain or tenderness*		
• Dysuria*		
AND at least <u>one</u> of the following:		r
<ul> <li>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).</li> </ul>		
<ul> <li>Physician or physician designee initiates antimicrobial therapy within <u>two</u> days of onset or worsening of symptoms.</li> </ul>		
*With no other recognized cause		
<ul> <li>Reporting instructions:</li> <li>Report endometritis as EMET.</li> <li>Report vaginal cuff infections as VCUF.</li> <li>If patient has epididymitis, prostatitis, or orchitis and meets OREP criteria, and they also mereport UTI only, unless the OREP is a surgical site organ/space infection, in which case only</li> </ul>		
reported.		





<ol> <li>Purulent drainage from the vaginal cuff on gross anatomic exam.</li> <li>Abscess or other evidence of infection at the vaginal cuff on gross anatomic exam.</li> <li>Organism(s) identified from fluid or tissue obtained from the vaginal cuff by a culture or non-culture based microbiologic testing method, which is performed for purposes of</li> </ol>	Element Met	Date
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