**DIAGNOSIS OF UTI**

1 SYMPTOMS
Patients without a catheter
One of the following:
- Acute dysuria
- Acute pain, swelling or tenderness of the testes, epididymis or prostate
- Fever or Leukocytosis* and ≥ 1+ of the symptoms list

Patients with a catheter
One of the following:
- Fever*, rigors or new-onset hypotension with no alternate site of infection
- Acute change in mental status/acute functional decline with no alternate diagnosis and leukocytosis
- New-onset suprapubic pain or costovertebral angle pain or tenderness
- Purulent discharge from around the catheter
- Acute pain, swelling, or tenderness of the testes, epididymis or prostate

* Fever: single oral >37.8°C, repeated oral >37.2°C, repeated rectal >37.5°C or >1.1°C increase from baseline
** Leukocytosis: >14,000 leukocytes/mm³

2 URINE CULTURE AND SENSITIVITY
Both of the following:
- ≥10⁵ cfu/L
- ≤2 organisms

3 ANTIBIOTIC TREATMENT
Treat with appropriate antibiotics, as per sensitivity test values and CrCl values

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### ASSESSMENT OF UTI

If resident does not meet symptom criteria, it may be **asymptomatic bacteriuria**. Do NOT send a urine C&S or treat **with antibiotics**. Push fluids for 24H then reassess, and review for alternate diagnosis.

#### Non-specific symptoms which do NOT indicate a UTI include...
- Worsening mental status, increased confusion, delirium or agitation*
- Worsening functional status*
- Falls (new or more often)
- Cloudy, foul-smelling, dark-colored urine or pyuria
- Positive dip stick test results

*May indicate UTI for catheterized residents, if they meet certain criteria

#### Urine C&S should NOT be sent for...
- Admission screening
- Follow-up after antibiotic treatment

#### When you notice UTI symptoms...
* Inform doctor/nurse practitioner of resident’s symptoms and request for an order for urine C&S (document indications and order on resident’s chart)
* Collect urine through clean void or midstream, in-and-out catheter or freshly applied condom catheter
* If catheter has been indwelling for ≥14days, change catheter then send in urine sample

#### Review with MD/NP if, at any point:
- Localizing genitourinary symptoms develop;
  - Fever >38.9; HR >100; RR>30; BP<90 systolic; or resident is unable to eat or drink

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**Created by the Antimicrobial Stewardship Program, adopted from guidelines published by DHPA, Saskatchewan Infection Prevention and Control Program, and the Government of Saskatchewan**