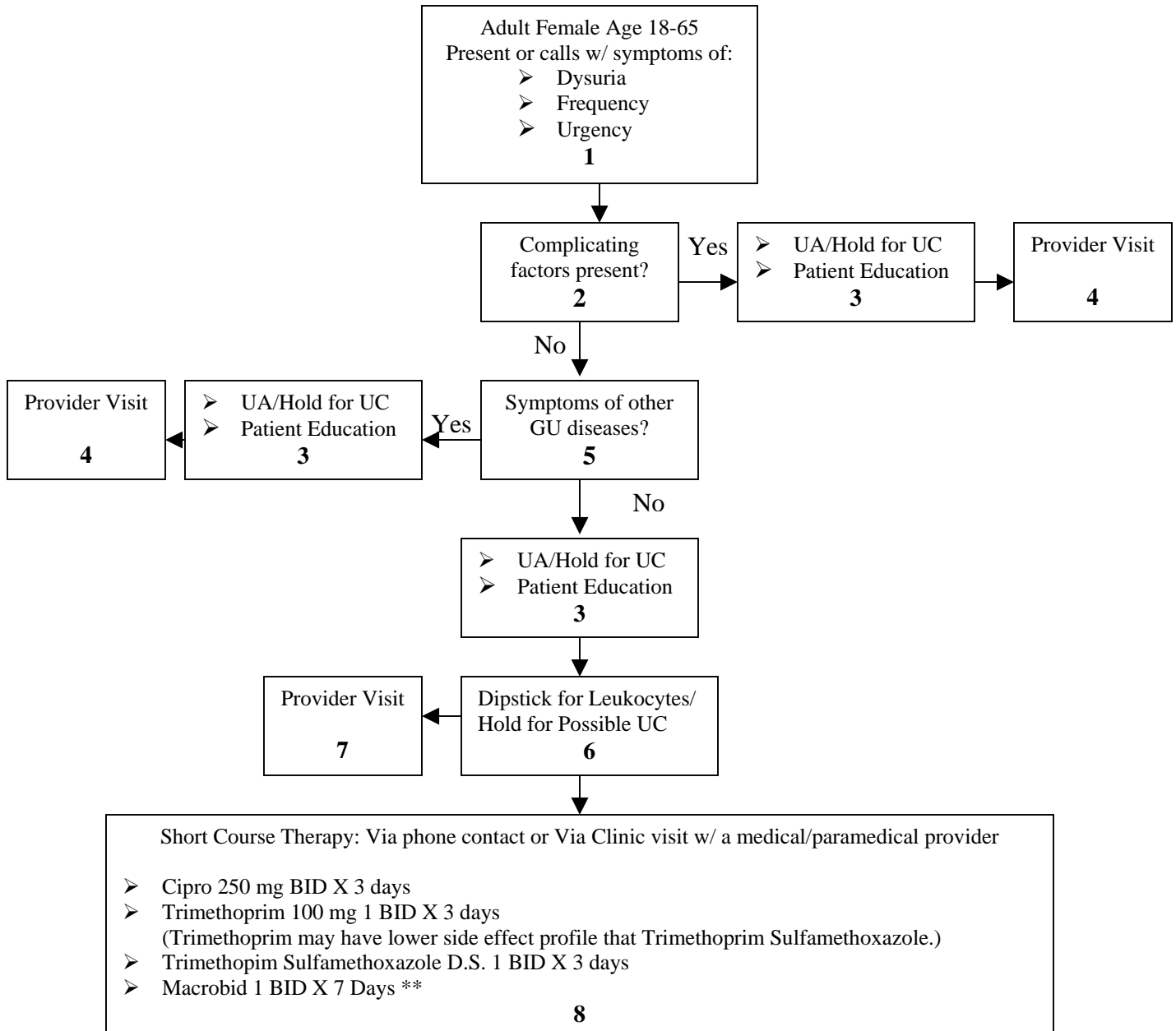


Guidelines for Uncomplicated and Recurrent Urinary Tract Infection in Women 2007

Guideline History

Date Approved	02/07
Date Revised	
Date Reviewed	01/07
Next Review Date	01/09

Uncomplicated Urinary Tract Infection in Women



Annotations

1. See Triage Phone Sheet (see page 2) regarding symptoms; dysuria, frequency, & urgency
2. Based on history and additional complications, each physician/practitioner will determine if a patient needs to be seen & if short course therapy is or is not appropriate.
3. Obtain a clean catch urine. Perform a dipstick (leukocytes). Mark specimens i.e. (Hold for possible UC). Provide patient education on UTI's (See page 4)
4. Depending on complicating factors or history, a physician visit may be necessary. Determine if UC is needed.
5. Rule out GU diseases. See Triage sheet. If member is determined to be HIGH RISK for STD, pelvic exam may be indicated. Finding an STD does not rule out concomitant UTI which could be treated w/ short course therapy.
6. Perform Dipstick (leukocytes) on all urines. Hold for UC as noted in #3.
7. For negative dipstick, patient will need to be scheduled for an office visit for further evaluation.
8. See short course therapy. Drug recommendations for short course therapy have been listed above & on triage sheet. Medication choices should be based on cost, antimicrobial resistance, side effects, and experience. ** Only recommend use if allergic to other drugs (Cipro or Bactrim)

Triage Form for Urinary Tract Infection in Women

Acute cystitis 595.0

Urinary tract infection 599.0

Physician _____ Date: _____
Pt. Name _____ Age: _____ (18 to 65 yr old)
Medical Record Number _____
Phone #: _____ Home# _____
Work# _____ Pharmacy# _____

Symptoms:

1. Do you have pain when you urinate or pee? Yes _____ No _____
2. Do you have to go (urinate or pee) more often? Yes _____ No _____
3. Do you feel like you can't wait to go (urinate or pee)? Yes _____ No _____

4. Are you allergic to any medications?

(Especially Sulfa, Penicillin, SMZ/TMP, Bactrim, Septra, Co-Trimoxazole, Macrochantin?)

Professional Health Care Provider appointment/encounter suggested if any of the following are Yes. (HCP will decide if candidate for short course therapy.)

Complicating factors, symptoms, or history:

1. Have you had this problem for more than 7 days? Yes _____ No _____
2. Do you have a fever higher than 101°? Yes _____ No _____
3. Have you had any severe shaking chills? Yes _____ No _____
4. Are you having nausea, vomiting or stomach pain? Yes _____ No _____
5. Do you have side, flank/back pain? Yes _____ No _____
6. Do you have diabetes? Yes _____ No _____
7. **ARE YOU PREGNANT?** Yes _____ No _____
8. Have you recently taken steroids or chemotherapy? Yes _____ No _____
9. Have you had kidney or bladder problems? Yes _____ No _____
If Yes, indicate: Surgery _____ Stones _____ Tube in bladder _____ Pyelonephritis _____ Kidney failure _____
10. Have you had 4 or more bladder/kidney infections in the last 12 months? Yes _____ No _____
11. Have you been on antibiotics for this problem (UTI) in the last 2 weeks? Yes _____ No _____

Symptoms of other GU Disease -- Physician visit may be required. Physician discretion for short course therapy. (Physician will consider STD.)

12. Have you had any recent change in vaginal discharge? Yes _____ No _____
13. Odor? Yes _____ No _____
14. Itching? Yes _____ No _____

Outcome/Treatment

U/A dropped off/obtained Yes _____ No _____
Dipstick U/A results: Positive _____ Negative _____

Pt. requested/scheduled for office visit: Yes _____ No _____

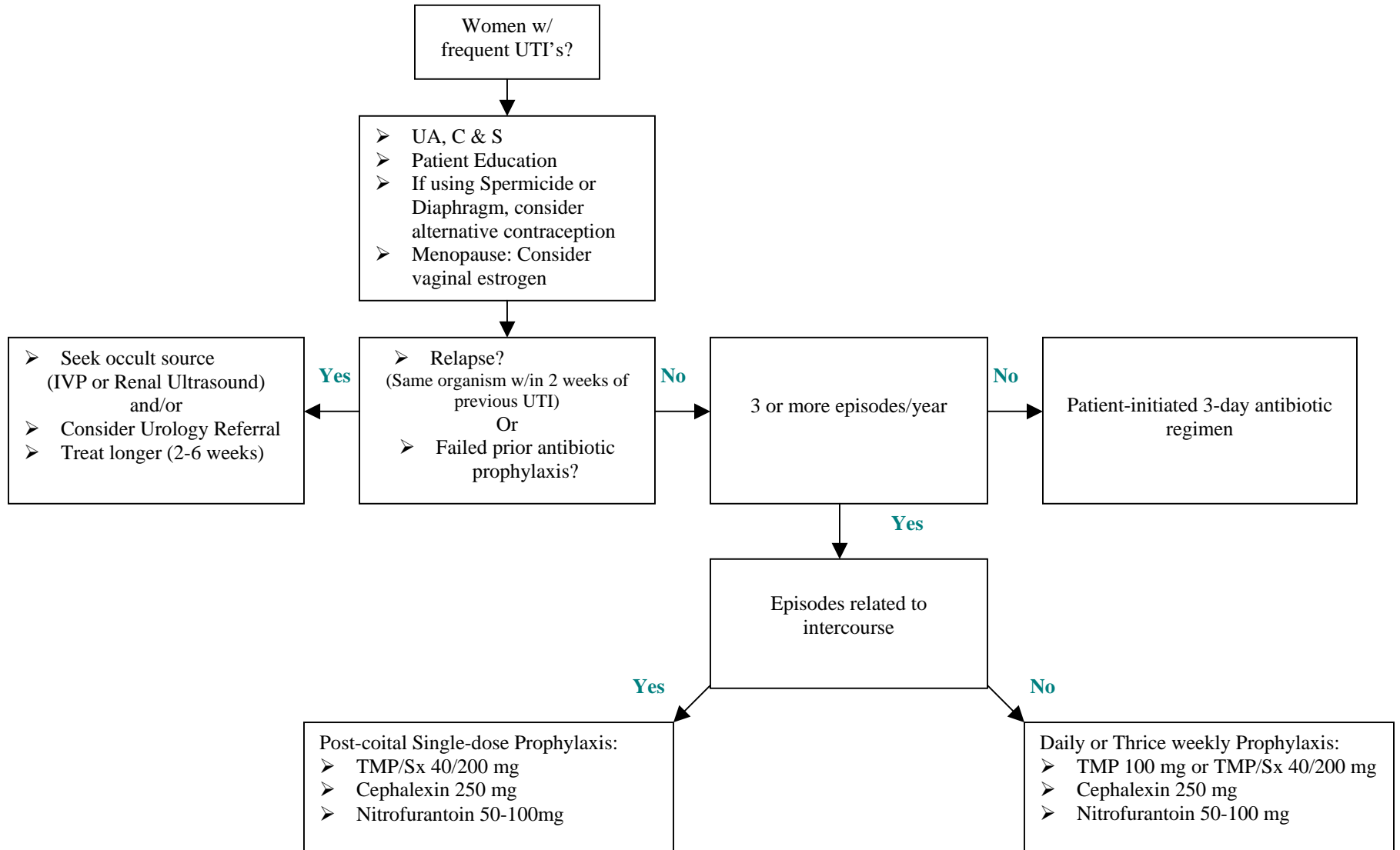
Short course therapy (check one):

- Trimethoprim 100 mg BID x 3 days _____
Trimethoprim Sulfamethoxazole DS (Bactrim) 1 BID x 3 days _____
Cipro 250 mg BID x 3 days _____
Macrobid 1 BID X 7 days _____

Other tests or meds _____

Pt. Education material given to patient: Yes _____ No _____

Recurrent Urinary Tract Infections in Women



Urinary Tract Infections What You Should Know



What is a urinary tract infection (UTI)?

A UTI is an infection anywhere in the urinary tract. Your urinary tract includes the organs that collect and store urine and release it from your body. They are the:

- Kidneys
- ureters
- bladder
- urethra

What causes a UTI?

Common Causes include:

* *Escherichia coli* (*E.coli*)

*Chlamydia

*Mycoplasma

Microorganisms that can also live in the digestive tract, in the vagina, or around the urethra, which is at the entrance to the urinary tract, can cause UTI's. Most often these microorganisms enter the urethra and travel to the bladder and kidneys. Usually, your body removes the bacteria, and you have no symptoms. Microorganisms called Chlamydia and Mycoplasma may also cause UTI's in both men and women, but these infections tend to remain limited to the urethra and reproductive system. Unlike *E. coli*, Chlamydia and Mycoplasma may be sexually transmitted, and infections require treatment of both partners.

Who is at Risk?

- Elderly
- People who use urinary catheters/tubes to empty their bladder
- People with obstructions i.e. kidney stones
- People with low immune systems
- People with the inability to empty their bladder i.e. enlarged prostate, uterine fibroids

When should I see my doctor?

You should see your doctor if you have any of these signs or symptoms:

- burning feeling when you urinate
- frequent or intense urges to urinate, even when you have little urine to pass
- pain in your back or lower abdomen
- cloudy, dark, bloody, or unusual-smelling urine
- fever or chills

How are UTIs treated?

Usually the doctor will ask you for a urine specimen to send to the lab to culture which microorganism is causing the infection. To prevent urinary tract infections:

- Drink plenty of fluids. I.e. water, cranberry juice
- Empty your bladder regularly and completely.
- If you use a diaphragm for contraception, consider checking the fit or using another method of contraception.
- Urinate after sexual intercourse.
- Wipe yourself from front to back to prevent bacteria from the anus from getting near the urethra.
- Keep the genital area clean.
- Wear loose all-cotton or cotton-crotch underwear and pantyhose.

Urinary Tract Infection

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