

Asymptomatic

Includes:

- cloudy/malodorous urine without other symptoms
- Positive dipstick without urinary symptoms

Do not dipstick
Do not send urine for culture
Do not treat empirically



Symptomatic - cystitis

Typical symptoms. Acute onset of ≥ 2 of:

- Dysuria
- Frequency
- Urgency
- Suprapubic pain

Dipstick not required

Empiric nitrofurantoin*

- Urine culture not required **unless complicating patient factors**

Only 1 typical symptom

Dipstick for white cells

Positive

Negative

UTI unlikely

- Culture not required
- Look for alternative cause

Mental status change or other non-specific change in wellbeing, without specific urinary symptoms

Urine testing (dipstick or culture) no longer recommended as first line test.

Look for and correct other causes in the first instance
e.g. dehydration, medications, pain.

Symptomatic – complicated UTI

Includes:

- Systemically unwell e.g. fever
- Upper tract UTI e.g. pyelonephritis

Dipstick not required.

Send urine for culture.

Ensure request form states suspected complicated UTI (the lab tests different antibiotics for complicated UTI**)

Complicating patient factors

- Contraindications to nitrofurantoin
- Abnormal urinary tract
- Recent instrumentation
- Recent MDRO or suspicion of antibiotic resistance
- Treatment failure or recurrent UTIs

***Empiric Rx should be withheld if possible until culture result if complicating factors.**

Ensure request form states any of these – this alters the reporting of the result.

Antibiotics for UTI**

- These agents are useful for uncomplicated cystitis. They should generally be avoided for complicated UTI :
 - Nitrofurantoin
 - Trimethoprim
 - Cefalexin
- These agents can be used for complicated UTI (if susceptible):
 - Co-trimoxazole
 - Amoxicillin or Augmentin
 - Ciprofloxacin