

### Key

- "Must do" actions for GP's / (Triaged by RSS)
- Recommendations for Primary Care
- Red flag / urgent referral
- Routine referral
- Public health intervention
- Audio-visual aids for patients and GP
- Click icon for clinical evidence

URINARY SYMPTOMS (e.g. dysuria, frequency, urgency) IN ADULT WOMEN under 65  
This guide excludes patients with recurrent UTI (2 episodes in the last 6 months, or 3 episodes in months) or urinary catheter

YES

#### Consider other causes of urinary symptoms:

- Vaginal symptoms or discharge – 80% do not have UTI
- Urethritis – inflammation post sexual intercourse, irritants
- Check sexual history to exclude sexually transmitted infections
- Genitourinary symptoms of menopause (vulvo/vaginal atrophy)

YES → Follow relevant diagnostic guide and safety netting

**THINK SEPSIS** - check for signs/symptoms using local/national tool such as NICE, RCGP or NEWS2

**Check for any new signs of pyelonephritis** \*\*see box at bottom of page

#### Consider pyelonephritis or suspected sepsis:

- Send urine for culture.
- Immediately start antibiotic for upper UTI/sepsis using NICE/PHE guidance on pyelonephritis or local/national guidelines for sepsis.
- Refer if signs/symptoms of serious illness or condition

NO

#### Does patient have any of the 3 key diagnostic symptoms/signs?

- Dysuria (burning pain when passing urine)
- New nocturia (passing urine more often at night)
- Urine cloudy to the naked eye

2 or 3 symptoms

1 symptom

No symptoms

#### Perform Urine Dipstick Test

Positive Nitrite OR Leukocyte and RBC positive

Negative Nitrite Positive Leukocyte

ALL Nitrite, WBC, RBC negative

#### Other severe urinary symptoms:

- Urgency
- Visible haematuria
- Frequency
- Suprapubic tenderness

YES

UTI likely

UTI equally likely to other diagnosis

UTI LESS likely

- Send urine culture if risk of antibiotic resistance.
- If not pregnant and mild symptoms, watch and wait with back up antibiotic OR
- consider immediate antibiotic for lower UTI

*NICE/PHE guidance on lower UTI*

- Review time of specimen (morning is most reliable)
- Send urine for culture to confirm diagnosis
- Consider immediate or back-up antibiotic (if not pregnant) depending on symptom severity using antibiotic for lower UTI

*NICE/PHE guidance on lower UTI*

- No urine culture
- Consider other diagnosis
- Reassure that UTI less likely

Give and discuss TARGET UTI leaflet with safety netting advice  
If pregnant always send urine culture – follow national treatment guidelines if any bacteriuria

#### \* Signs/symptoms of moderate risk of sepsis:

- New alteration in mental state or decreased functional ability
- New heart rate above 90 beats/min at rest or dysthymia
- New dyspnoea or respiratory rate above 20 breaths/min
- New low blood pressure (systolic <100mm Hg)
- No urine passed in 12 hours (≤0.5 – 1ml/kg urine per hour if catheter)
- Tympanic temperature 36°C or below
- Impaired immune system (except if chemotherapy)

#### \*\* Signs of pyelonephritis:

- Kidney pain/tenderness in back under ribs
- New/different myalgia, flu like illness
- Shaking chills (rigors) or temperature 37.9°C or above
- Nausea/vomiting