ACTION TOOL



"Does the resident have new or worsening signs or symptoms that meet one of three criteria for suspected urinary tract infection?"

CRITERIA 1. Painful urination (meets criteria alone) or

CRITERIA 2. Fever: any fever >100°F or repeated temperatures > 99°F or >2°F over resident's baseline plus at least one new or worsening sign or symptom, including:

- Frequency of urination
- Sensation of urgency to urinate
- Incontinence
- Bloody urine
- Pain in the area over the urinary bladder, just above the pubic bone (no other known cause)
- Flank pain or tenderness

CRITERIA 3. No fever, but two or more of the signs or symptoms above.

If the resident meets one of the criteria above, **ask the healthcare provider to consider**:

- Sending urine for urinalysis and culture **and**
- Ordering empiric antibiotics until culture results return.

If the resident does not meet the above criteria, **refer to the facility's care paths** for considering alternative diagnoses and when to contact the provider.

Healthcare providers should hold an **antibiotic time-out** to review and document patient signs and symptoms and urine culture results within 48 hours. Healthcare providers should then narrow or stop antibiotics as indicated and determine appropriate duration.

Guidance for management of urinary tract infection and asymptomatic bacteriuria can be found in the *Infectious Diseases Society of America Practice Guidelines* at <u>www.idsociety.org</u>.

Suspected Urinary Tract Infection (UTI) Action Tool

Purpose

Guide nursing staff in the initial evaluation of possible urinary tract infection (UTI) in residents without a urinary catheter.

Setting

Nursing homes.

Rationale

Overuse or misuse of antibiotics leads to antibiotic-resistant bacteria, possible side effects and adverse drug events, added costs and *Clostridium difficile*.

References: 1) Stone, N, et. al., Surveillance Definitions of Infections in Long-Term Care Facilities: Revisiting the McGeer Criteria; Infection Control and Hospital Epidemiology, Vol. 33, No. 10 (October 2012), pp. 965-977; 2) Loeb et al. Development of Minimum Criteria for the Initiation of Antibiotics in Residents of Long-Term-Care Facilities: Results of a Consensus Conference. Infect Control Hosp Epidemiol 2001; 22: 120-124.









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