

# Older People >65 years with Suspected Urine Infection (UTI) - Guidance for Care Home staff

Complete resident's details, flow chart and actions (file in resident's notes after). DO NOT PERFORM URINE DIPSTICK.



|            |  |
|------------|--|
| Resident:  |  |
| DOB:       |  |
| Carer:     |  |
| Date:      |  |
| Care Home: |  |

| Any symptoms suggesting alternative diagnosis? | Tick if present          |
|--|--------------------------|
| Increased breathlessness or new cough          | <input type="checkbox"/> |
| Diarrhoea and vomiting                         | <input type="checkbox"/> |
| A new red warm area of skin                    | <input type="checkbox"/> |

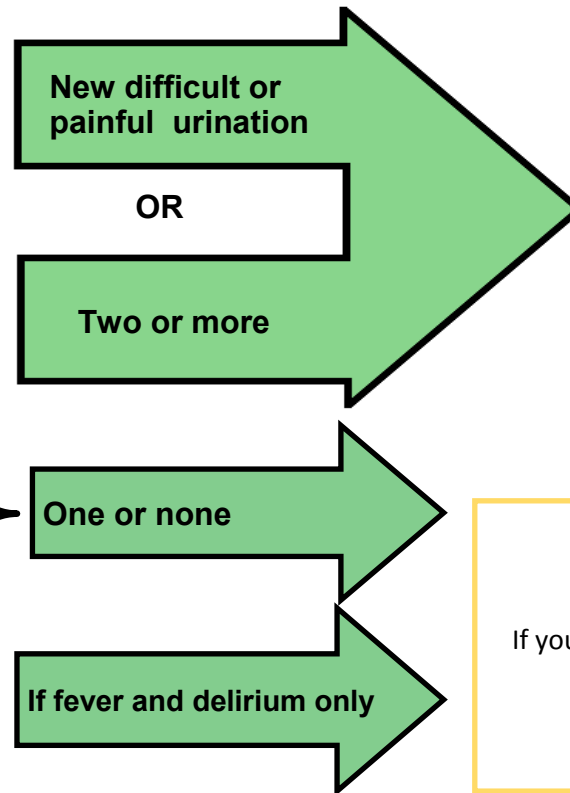
Any ticks

**UTI unlikely**  
Seek guidance as appropriate

## SYMPTOMS

| New onset of:  | Tick if present |
|--|-----------------|
| <ul style="list-style-type: none"> <li>Painful or difficult urination</li> </ul> |                 |

|  |  |
|--|--|
| <ul style="list-style-type: none"> <li>Frequency or urgency</li> </ul>                                       |  |
| <ul style="list-style-type: none"> <li>Urinary Incontinence</li> </ul>                                       |  |
| <ul style="list-style-type: none"> <li>Pain between belly button and pubic hair</li> </ul>                   |  |
| <ul style="list-style-type: none"> <li>Visible blood in urine</li> </ul>                                     |  |
| <ul style="list-style-type: none"> <li>Fever (temperature 1.5<sup>o</sup> above patient's normal)</li> </ul> |  |
| <ul style="list-style-type: none"> <li>Delirium</li> </ul>   |  |



| UTI likely  |           |
|---|-----------|
| Actions needed  | Tick when |
| Obtain Urine sample: see reverse form   |           |
| Phone/email form to GP practice   |           |
| Send urine sample to GP practice  |           |
| If patient is catheterised, change catheter after starting antibiotics on advice from nurse or GP |           |

**UTI unlikely**

If you are concerned about the resident, please contact GP, community nurses or community matron

CH NoDip v1.0

## Residents with Urinary Catheters:

### For Nursing Residents:

- Registered Nurse only to take catheter urine sample using aseptic non-touch technique.
- If antibiotics are commenced for UTI, catheter change should be performed by Registered Nurse as soon as possible.

### For Residential Residents:

- If antibiotics are commenced for UTI, catheter change should be arranged with District Nurses as soon as possible.

## Residents without a Urinary Catheter: Obtaining a Urine Sample

Urine cultures are very important in the elderly to guide antibiotic choice.

- Try to obtain a urine sample when the resident is in the middle of passing urine (rather than at the start).
- Put the urine in a Red Top urine bottle, filling to the 20ml line.
- Fill in the resident's details and type of sample carefully to help the lab to process the sample.
- Samples should be taken to the GP practice *as soon as possible*. If there is a delay, they can be refrigerated until taken to the GP practice at the next possible opportunity.
- Ensure the GP practice know what to write on the request card (the information from the assessment tool).

\*If there is not enough urine to fill to 20ml line, then use a white top specimen bottle instead



Fill red top urine bottle to 20ml line

Fill in resident details carefully