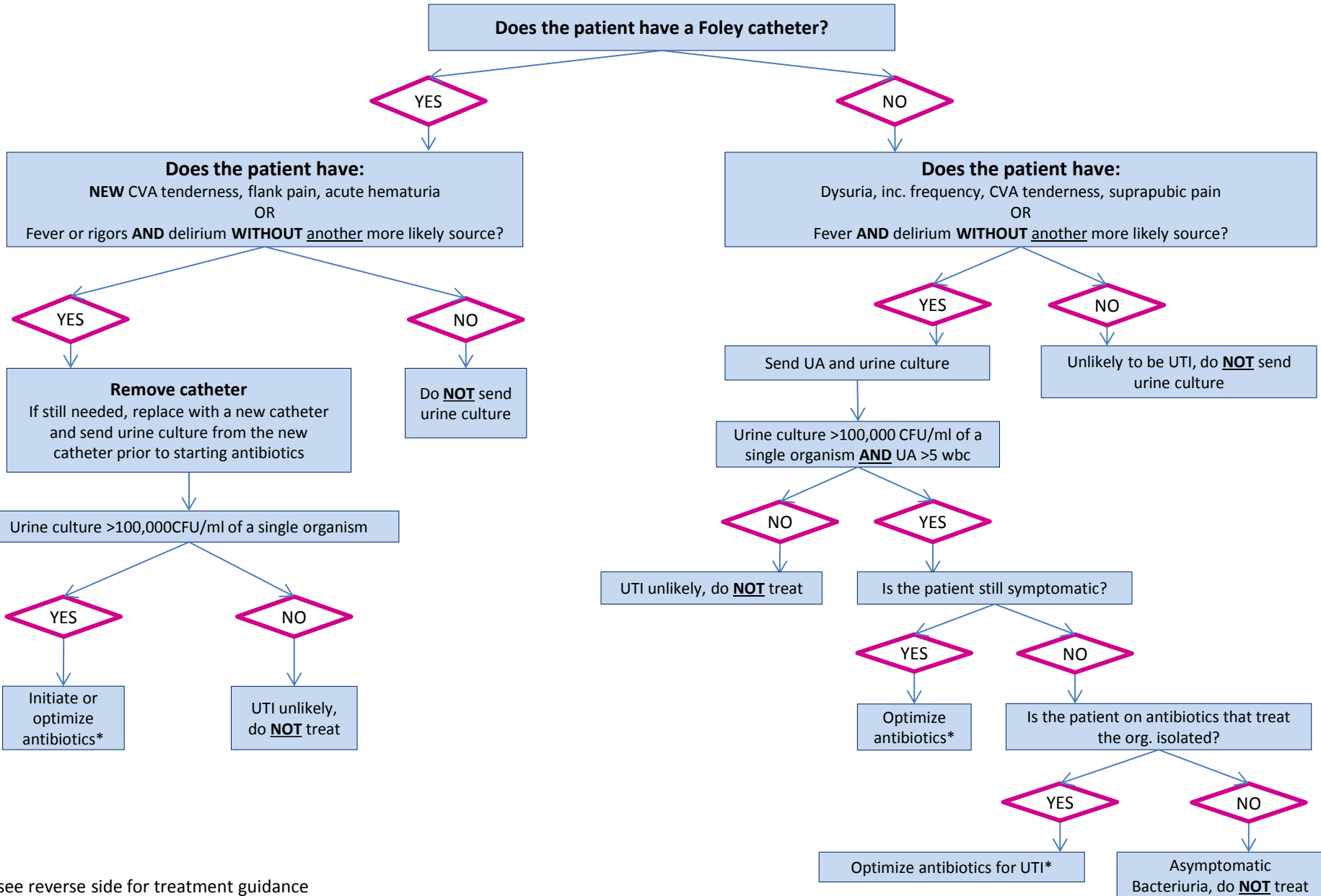


URINARY TRACT INFECTION (UTI) DIAGNOSIS & TREATMENT



*see reverse side for treatment guidance

Patient Category	Empiric Treatment ¹	Stepdown/ De-escalation
<u>Asymptomatic Bacteriuria</u>	Do NOT treat except in pregnancy or prior to urological procedures in which mucosal bleeding is anticipated	
<u>Uncomplicated Lower UTI</u> (Female, pre-menopausal, non-pregnant, no urologic abnormalities, no urinary catheter)	<ul style="list-style-type: none"> • TMP/SMX 1DS PO q12 x 3 days • Nitrofurantoin monohyd/macrocrystals 100mg PO q12h x 5 days NOT to be used in patients with Crcl <30 mL/min <p><u>If sulfa allergy</u></p> <ul style="list-style-type: none"> • Cefpodoxime 100mg PO q12h x 5 days ¹ 	
<u>Complicated Lower UTI</u> (Male, urinary catheter present or removal within last 48hrs, GU instrumentation, anatomic abnormality or obstruction, immunosuppression)	<ul style="list-style-type: none"> • Ceftriaxone 1g IV q24h <p><u>Severe PCN allergy</u></p> <ul style="list-style-type: none"> • Aztreonam 1g IV q8h^{1,2} <p>Duration: 7 days</p>	<ul style="list-style-type: none"> • Oral step-down upon signs of clinical improvement and if organism is susceptible <ul style="list-style-type: none"> ○ Nitrofurantoin monohyd/macro 100mg PO q12h ○ TMP/SMX 1DS PO q12h³ ○ Cefpodoxime 100mg PO q12h¹ ○ Cefuroxime 250mg PO q12h¹ ○ Ciprofloxacin 500mg PO q12h³ ○ Duration of empiric IV therapy should be counted towards total duration (7 days)
<u>Pyelonephritis</u>	<ul style="list-style-type: none"> • Ceftriaxone 1g IV q24h <p><u>Risk factors for MDR organism⁴</u></p> <ul style="list-style-type: none"> • Cefepime 1g IV q8h¹ • Piperacillin/tazobactam 3.375g IV q6h¹ • Imipenem/cilastatin 500mg IV q6h (history of ESBL)¹ <p><u>Severe PCN allergy</u></p> <ul style="list-style-type: none"> • Aztreonam 1g IV q8h^{1,2} with or without vancomycin IV <p>Duration: 7 days⁵</p>	<ul style="list-style-type: none"> • Oral step-down when stable and if organism is susceptible <ul style="list-style-type: none"> ○ TMP/SMX 1DS PO q12h ○ Cefpodoxime 100mg PO q12h¹ ○ Cefuroxime 250mg PO q12h¹ • Duration of empiric IV therapy should be counted towards total duration (7 days)

¹Dosing recommendations are based on patients with normal renal function. For patients with renal dysfunction, antibiotic dosages may need to be adjusted.

²Must request that the microbiology lab perform aztreonam susceptibility testing.

³Better prostate penetration if concern for prostatitis.

⁴Risk factors for MDR organisms may include recent use of IV broad spectrum antibiotics, recent hospitalization, prior history of MDR organism.

⁵Duration depends on clinical severity and response to treatment. In some cases, 10-14 days may be required.

*This is meant to serve as a general patient guideline, not a substitute for clinical judgment.