

URINARY TRACT INFECTION

Level II
(No Level I)

Skill Level: RN

Definition: Inflammation of the structures of the urinary tract caused by bacteria.

<p>Subjective:</p> <ul style="list-style-type: none">• Complains of urinary urgency and frequency.• May describe pain as cramp or spasm over bladder or burning during urination.• May state that there is blood in the urine.• No systemic complaints: flank pain, malaise, nausea, vomiting, chills, and high fever.	<p>Assessment:</p> <ul style="list-style-type: none">• Impaired urinary elimination.• Impaired comfort.• Ineffective Self Health Management.
<p>Objective:</p> <ul style="list-style-type: none">• No fever over 100.5.• Urine may be cloudy and odiferous.• No flank pain.• No nausea, vomiting, malaise or chills.• Not pregnant.	<p>Plan: Patient education and self-care items for this protocol include:</p> <ul style="list-style-type: none">• Use meds available on the housing unit to treat pain (handout). <p>At nursing discretion may use any of the below:</p> <ul style="list-style-type: none">• Chemstrip (dip stick) urinalysis:<ul style="list-style-type: none">* If frequency and burning without systemic signs and normal dip U/A increase fluids and return daily if symptoms persist. If symptomatic x 3 days refer to provider.* If dip stick is positive for blood, but without leukocytes and otherwise normal, refer to provider.

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Objective:	Plan: (Continued) <u>Patient without systemic symptoms:</u> <ul style="list-style-type: none">• If dip U/A positive for leukocytes and patient is without systemic symptoms, no C&S necessary. Treat with antibiotic. Septra DS BID X 3 days OR Cipro 250 mg BID X 3 days• Contact provider prior to antibiotic administration for pregnant females.• If previous UTI within 3 months, treat as appropriate, but schedule appointment with provider.• Males with Urinary Tract Infection should be treated as appropriate, and scheduled to see a medical provider.• Increase fluid intake to 2-3 liters a day. <u>Patient with systemic symptoms. (CVA tenderness to percussion, fever, chills, nausea, vomiting):</u> <ul style="list-style-type: none">• With positive leukocytes, obtain urine C&S• Antibiotic use should be as ordered by a medical provider. Call provider for instructions.
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Patient Education:

1. Advise patient that symptoms sometimes will decrease or disappear within days with or without treatment; however, residual bacterial infection is likely and may cause recurrence of symptoms.
2. Stress importance of completing antibiotic therapy.
3. Teach proper technique for collecting a clear catch urine specimen.
4. Instruct patient to increase fluids, but do not encourage intake of more than 2-3 liters/day because this may decrease the effectiveness of the antibiotic.

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APPROVED:

Medical Services Manager

Date

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Date

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Date

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