



Criteria for urinary tract infections in older people

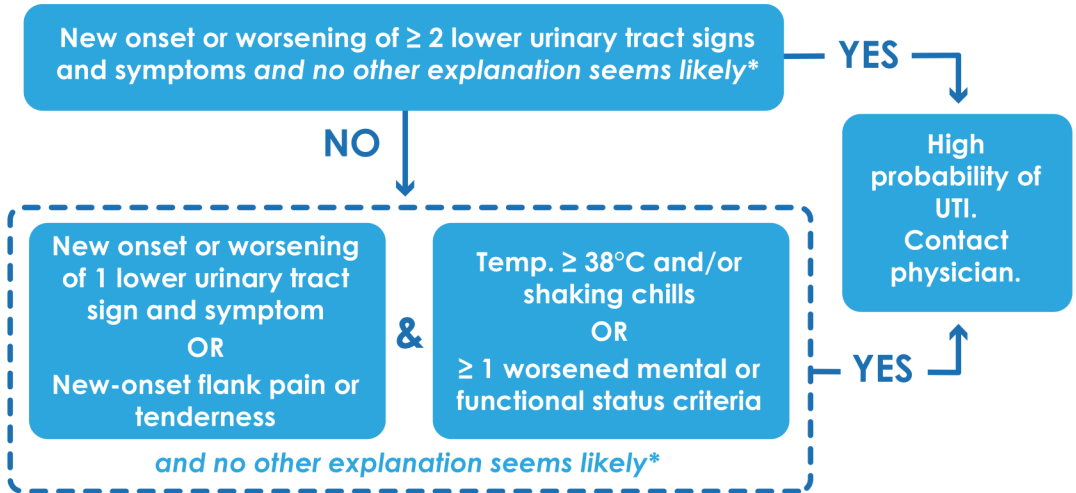


Co-funded by
the European Union

Co-funded by the european union, eu4health programme, project id 101079838. Views and opinions expressed are however those of the author(s) only and do not necessarily reflect those of the european union or the european health and digital executive agency (hadea). Neither the european union nor the granting authority can be held responsible for them.



UTI in residents WITHOUT indwelling catheter



**If other reasons for the respective signs and symptoms can be excluded, particularly urinary retention, dehydration, side effects of medication, other infectious foci, or other diseases.*

UTI in residents WITH indwelling catheter*

New onset or worsening of ≥ 1 criterion (and no other explanation seems likely**)

- Temperature $\geq 38^{\circ}\text{C}$
- Shaking chills
- Flank pain or renal angle tenderness
- Clear-cut worsened mental or functional status

YES



High probability of UTI.
Contact physician.

**Residents with an intermittent catheter or a condom catheter should be evaluated as if they are not catheterised.*

***If other reasons for the respective signs and symptoms can be excluded, particularly urinary retention, dehydration, side effects of medication, other infectious foci, or other diseases.*

Lower urinary tract signs and symptoms

Dysuria

Frequency

Urgency

Incontinence

Suprapubic pain or low abdominal pain

Pain, swelling or tenderness of the testes, epididymis, or prostate

Worsened mental or functional status

Acute confusion


*Acutely changed behaviour
(delirium, agitation, apathy)*

Acute general malaise

Loss of appetite (also vomiting, nausea)

Reduced fluid intake

Please remember:

- 
- Do NOT rely on dipsticks to determine if a resident is suspected of having a UTI.
 - Characteristics of the urine, such as darker colour, gross haematuria and/or bad odour are NOT signs of a UTI.