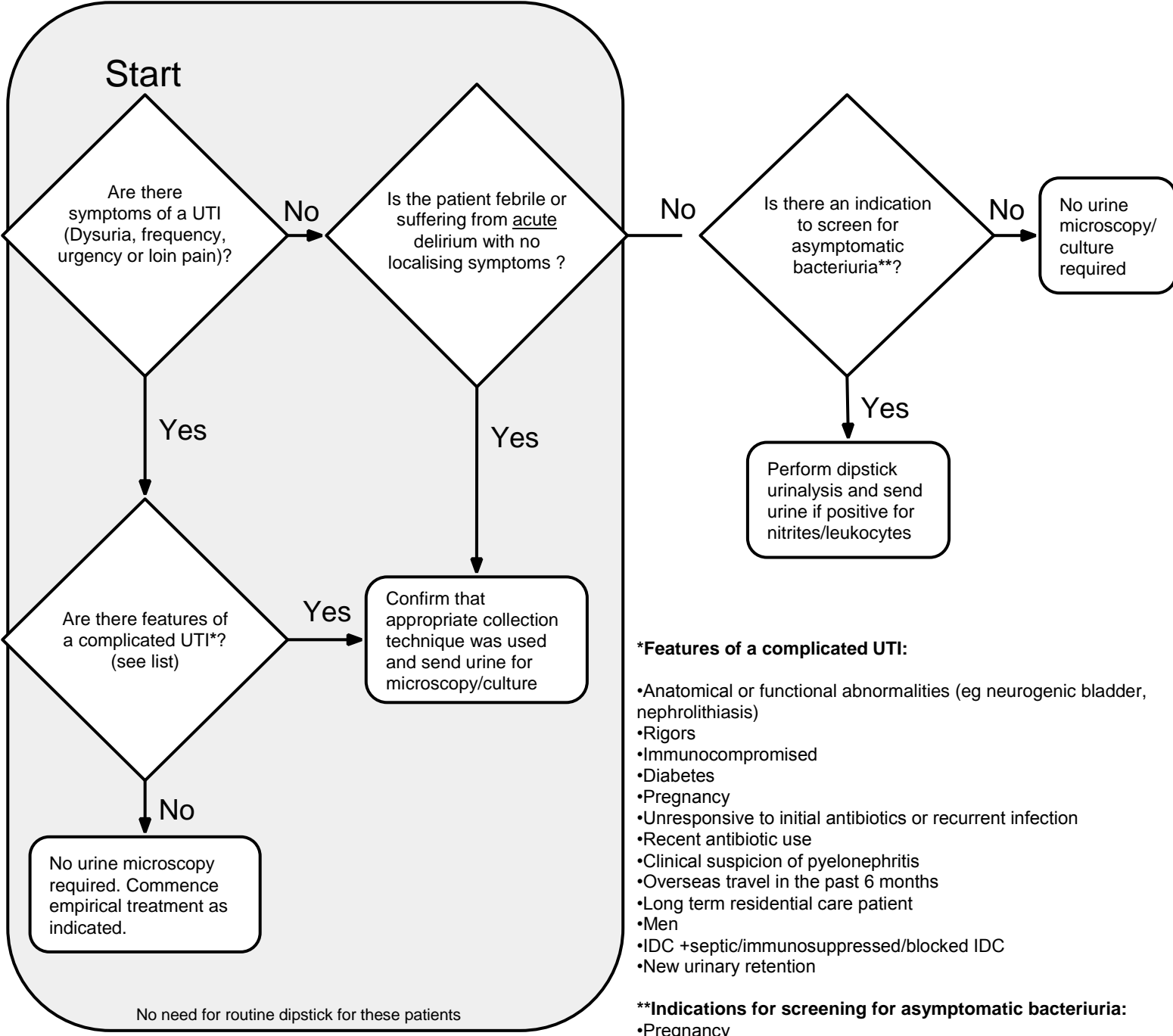


Does my adult patient need urine microscopy and culture?



***Features of a complicated UTI:**

- Anatomical or functional abnormalities (eg neurogenic bladder, nephrolithiasis)
- Rigors
- Immunocompromised
- Diabetes
- Pregnancy
- Unresponsive to initial antibiotics or recurrent infection
- Recent antibiotic use
- Clinical suspicion of pyelonephritis
- Overseas travel in the past 6 months
- Long term residential care patient
- Men
- IDC +septic/immunosuppressed/blocked IDC
- New urinary retention

****Indications for screening for asymptomatic bacteriuria:**

- Pregnancy
- Pending IDC and patient with pacemaker/artificial heart valve.
- Post renal transplant

•Notes:

- The presence of cloudy or malodorous urine alone are not an indication for urinalysis/urine microscopy.
- Patients being discharged home on empirical treatment should be provided with a letter for their GP advising them to send urine for M/C/S if their symptoms have not improved within 48 hours and to switch to second line antibiotics as per Therapeutic Guidelines.

All requests for urine M/C/S should discussed with a senior ED doctor