

PF Urinary Tract Infection (UTI) Pathway Summary: For women 16 - 64 years with suspected lower UTIs

This summary does not replace the Nitrofurantoin PGD or Clinical Pathway. Please make sure you have read, understood and signed the PGD.

Gateway criteria (and be eligible for PGD)

The patient **MUST HAVE** at least 2 of the following symptoms:

- Dysuria (burning pain when passing urine)
- New nocturia (needing to pass urine at night)
- Urine appears cloudy to the naked eye (visual inspection by pharmacist if practicable)

If patient only has one symptom is present, think self care and OTC treatment or consider referral to GP surgery or other provider (sexual health clinic/111) as other diagnosis equally likely.

Exclusions:

If the patient has any of the following, refer them to their GP surgery or other provider (sexual health clinic/111):

- Under 16 yrs or over 64 years
- Pregnant or breast feeding
- Care home resident
- Has a urinary catheter
- Recurrent UTIs (2 episodes in last 6 months, or 3 episodes in last 12 months)
- Previous antibiotics for this episode of UTI or previous treatment for UTI in the past 3 months
- Kidney pain/tenderness in back under ribs
- New/different myalgia: flu like illness, Shaking chills (rigors) or temperature of 37.9°C or above
- Nausea/vomiting
- Vaginal discharge: 80% do not have UTI (treat OTC if signs and symptoms of thrush)
- Inflammation post sexual intercourse or a chance of sexually transmitted infections
- Missed or lighter periods – the patient should carry out a pregnancy test if unsure
- Genitourinary syndrome of menopause (vulvovaginal atrophy)
- The patient is immunosuppressed
- Been in hospital in a foreign country within last 3mths or UK hospital for >7 days in last 6mths
- Porphyria (metabolic disorders) or G6PD deficiency (causes anaemia and jaundice)
- Anaemia
- Diabetes mellitus (Type 1 or 2)
- Vitamin B or folate deficiency
- Chronic Kidney Disease (CKD) stages 3b, 4 or 5 (eGFR <45ml/min/1.73m²) or electrolyte imbalance
- Peripheral neuropathy
- Less than 3 days before receiving, or 3 days after receiving oral typhoid vaccine

Treatment: 3 day supply

Mild symptoms – pain relief and OTC self care

Moderate/ Severe symptoms - Nitrofurantoin 100mg MR Caps twice a day for 3 days (or 50mg 4 times a day)

Advice/Safety Netting:

- If symptoms worsen rapidly or significantly at any time or do not improve in 48 hours of taking antibiotics the patient should contact their GP surgery or other provider as appropriate.
- Provide advice on alternative treatment available using TARGET UTI leaflet.
- Advise to take the medication at regular intervals with food or milk and to finish the course.
- Possible side effect of urine may become discoloured (brown/yellow) but that this is not of concern and urine will return to normal colour when the course is complete.
- Nitrofurantoin is not a penicillin related antibiotic.
- Medicines which make the urine less acidic such as OTC cystitis preparations decreases the antibacterial action of nitrofurantoin and should not be taken with nitrofurantoin.
- Antacids such as magnesium trisilicate can decrease the absorption of nitrofurantoin and should not be taken.
- If the individual is affected by dizziness or drowsiness, do not to drive or operate machinery.