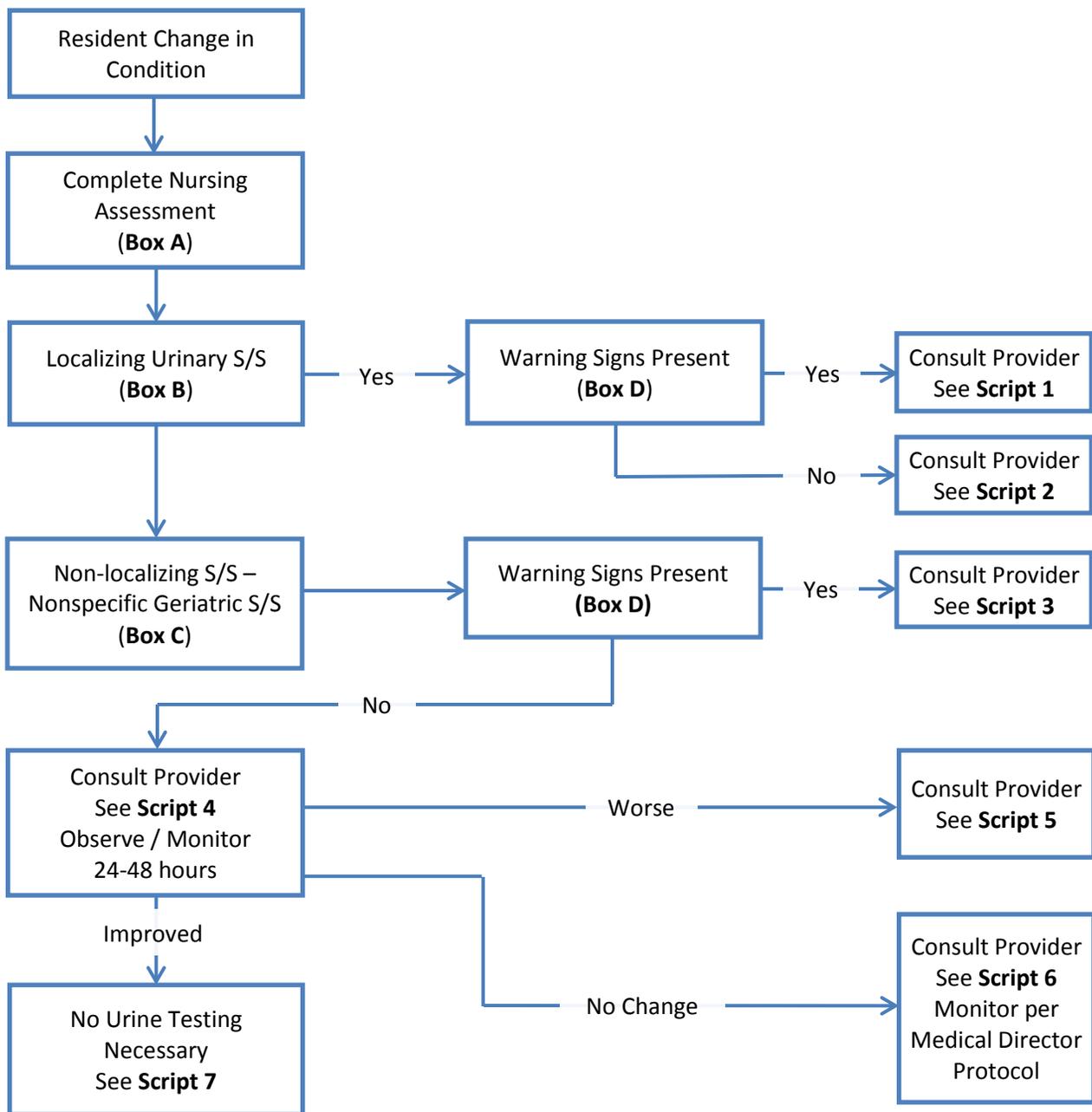




When to Test Urine – Nursing Tool

Wisconsin Healthcare-Associated Infections in LTC Coalition



<p>Box A Nursing Assessment^{1,2} Complete Nursing Assessment See Nursing Assessment on reverse side of this tool</p>
<p>Box B Localizing Urinary S/S^{3,4}</p> <ul style="list-style-type: none"> • Acute dysuria • New or worsening frequency • New or worsening urgency • New or worsening incontinence • Gross hematuria • Suprapubic pain • Costalvertebral angle pain • New scrotal / prostate pain • Urethral purulence
<p>Box C Non-localizing / Non-Specific Geriatric S/S^{1,5,6,7}</p> <ul style="list-style-type: none"> • Behavior Changes • Fever • Functional Decline • Mental Status Change • Falls • Restlessness • Fatigue • “Not Being Her-Himself”
<p>Box D Warning Signs⁶</p> <ul style="list-style-type: none"> • Fever • Clear-cut Delirium <ul style="list-style-type: none"> ○ Altered LOC ○ Disorganized Thinking ○ Psychomotor Retardation • Rigors (shaking chills) • Hemodynamic Instability <ul style="list-style-type: none"> ○ Hypotension ○ Tachycardia



When to Test Urine – Nursing Tool

Box A – Nursing Assessment^{1,2}
Fever defined as Single oral temperature > 100° F; or repeated oral temperatures >99°F or rectal temperature >99.5°F; increase in temperature of >2° above baseline)

Measure vital signs to include:	Assessment to include:	
<ul style="list-style-type: none">• Temperature• Heart rate• Blood pressure• Respiratory rate• Oxygen saturation• Finger stick glucose	<ul style="list-style-type: none">• Conjunctiva• Oropharynx• Chest• Heart• Abdomen	<ul style="list-style-type: none">• Skin (including sacral, perineum, and perirectal area)• Mental status• Functional status• Hydration status• Indwelling devices if present• Medication review

1. High KP, Bradley SF, et al. Clinical Practice Guideline for the Evaluation of Fever and Infection in Older Adults Residents of Long-Term Care Facilities: 2008 Update by the Infectious Disease Society of America. Clinical Infectious Diseases 2009;48:149-171
2. INTERACT Care Paths - https://interact2.net/tools_v4.html Accessed 08/25/15

Box B - Localizing Urinary S/S^{3,4}

3. Loeb M, Bentley DW, Bradley S, et al. Development of minimum criteria for the initiation of antibiotics in residents of long-term-care facilities: results of a consensus conference. Infect Control Hosp Epidemiol 2001;22:120–124
4. Stone ND, Ashraf MS, Calder J, et al. Definitions of infection for surveillance in long term care facilities: Revisiting the McGeer criteria. Infect Control Hosp Epidemiol 2012;33:965-977

Box C – Non-localizing / Non-specific Geriatric S/S

1. High KP, Bradley SF, et al. Clinical Practice Guideline for the Evaluation of Fever and Infection in Older Adult Residents of Long-Term Care Facilities: 2008 Update by the Infectious Diseases Society of America. Clinical Infectious Diseases 2009;48:149-171
5. Nace DA, Drinka PJ, Crnich CJ. Clinical Uncertainties in the Approach to Long Term Care Residents With Possible Urinary Tract Infections. JAMDA 2014,15:133-139
6. Drinka P. Treatment of bacteriuria without urinary signs, symptoms, or systemic infectious illness (S/S/S). JAMDA 2009,10:516-519
7. Sundvall PD et al. Urine Culture Doubtful in Determining Etiology of Diffuse Symptoms Among Elderly Individuals. BMC Family Practice 2011,12:36

Box D – Warning Signs

6. Crnich CJ, Drinka P. Improving the Management of Urinary Tract Infections in Nursing Homes: It’s Time to Stop the Tail From Wagging the Dog. Annals of Long Term Care 2014,22:9