Investigation and management following a UTI (Urinary Tract Infection)

For use by healthcare professionals only





Yes

Yes

Clinical Assessment/Management tool for Children **Primary and Community Care Settings** Atypical and Recurrent UTI Consider predisposing factors: **Constipation (Healthier Together constipation pathway) Atypical UTI includes:** Recurrent UTI: Diagnosis and Management of Two or more episodes of UTI with acute upper UTI (acute pyelonephritis), or Poor fluid intake (ERIC https://www.eric.org.uk/blog/how-to-get-kids-to-drink-more Seriously ill Acute UTI in Children One episode of UTI with acute upper UTI plus 1 or more episodes of UTI with Poor urine flow Consider safeguarding concerns with frequent UTIs lower UTI (cystitis), or Abdominal or bladder mass Three or more episodes of UTI with lower UTI Raised creatinine Septicaemia Failure to respond to treatment with suitable antibiotics within 48 hours Infection with non E. coli organisms < 6 MONTHS Recommended imaging schedule for babies younger than 6 months: Test Responds well to treatment within 48 hours **Atypical urinary tract infection** Recurrent urinary tract infection Ultrasound during the acute infection No Yes Yes **Ultrasound within 6 weeks** Yes, if abnormal consider (MCUG) No No

6 MONTHS to 3 YEARS

DMSA scan 4 to 6 months after the acute infection

Recommended imaging schedule for babies and children between 6 months to under 3 years:

Yes

Yes

| Test | Responds well to treatment within 48 hours | Atypical urinary tract infection | Recurrent urinary tract infection |
|---|--|----------------------------------|-----------------------------------|
| Ultrasound during the acute infection | No | Yes | No |
| Ultrasound within 6 weeks | No | No | Yes |
| DMSA scan 4 to 6 months after the acute infection | No | Yes | Yes |
| MCUG | No | Yes | No |
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> 3 YEARS

MCUG

Recommended imaging schedule for children 3 years or older:

| Test | Responds well to treatment within 48 hours | Atypical urinary tract infection | Recurrent urinary tract infection |
|---|--|----------------------------------|-----------------------------------|
| Ultrasound during the acute infection | No | Yes | No |
| Ultrasound within 6 weeks | No | No | Yes |
| DMSA scan 4 to 6 months after the acute infection | No | No | Yes |
| MCUG | No | No | No |

Prophylaxis

- Do not routinely give prophylactic antibiotics to babies and children following first-time UTI.
- See the NICE guideline on urinary tract infection (recurrent): antimicrobial prescribing for prophylactic antibiotic treatment for recurrent UTI in babies and children.

No

No