

URINE SPECIMEN COLLECTION AND CULTURE DURING CATHETERISATION

* ADULT ACUTE CARE SETTINGS -

***Does your patient with an IDC need a urine culture?***

*Use the decision tree below to determine if it is necessary to collect a urine specimen for culture from an adult catheterised patient*

*and the type of specimen to be collected.*

**Is a septic work up required AND/OR does patient have UTI symptoms?**

Adults with a UTI may present with ≥1 of the following symptoms with no other recognised cause:

*fever, suprapubic tenderness, costovertebral angle pain or tenderness, delirium or hypothermia (<35.5oC core).*

**YES**

**NO**



***Remember:***

* Avoid dipstick urinalysis for asymptomatic patients - positive reactions for nitrite, pyuria, leukocyte and protein are likely but do not warrant laboratory investigation.
* Adults with spinal cord injury may have a different symptom presentation or may not present with pain. Seek further advice from a senior clinician if UTI is suspected.
* Asepsis must be maintained when collecting specimens and changing catheters.
* Document the indication for urine specimen collection.
* Interpret urine culture results with caution if patient was on an antimicrobial regime at the time of or prior to specimen collection.
* Signs and symptoms of UTI among older patients, particularly those with dementia, are often vague or atypical.

**Remove IDC**

**and collect MSU**

**Collect CSU from the existing IDC**

*Note: It may be difficult to interpret culture results*

*if catheter has been in situ >48 hours*

*due to biofilm colonisation.*

**Do not collect any urine specimens for culture**

IDC: Indwelling urinary catheter

UTI: Urinary tract infection

MSU: Mid stream urine

CSU: Catheter specimen of urine

* Disregard the appearance or smell of urine (e.g. cloudy, sediment, foul smelling
* Disregard positive urinalysis results for protein, leucocytes, blood or nitrite

**NO**

**NO**

**YES**

**YES**

**YES**

**NO**

Is the IDC still clinically indicated?

If IDC was removed, would patient be able to produce a clean MSU?

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