



4.0 Urinary tract infection

Introduction

Urinary tract infections (UTI's) are common in children. ^(1,2) The last decade has seen a significant change in the approach to the investigation and management of children following a first UTI. Both the National Institute for Health and Care Excellence and the American Academy of Paediatrics published guidelines that support a far less aggressive approach to the imaging of children with UTI's (ie infrequent use of micturating cystourethrogram and DMSA) and the cessation of routinely commencing prophylactic antibiotics. ^(1,2, 3, 4)

Pre-referral investigations

All children with a confirmed UTI should have a renal tract ultrasound. ^(1,2,3,4) If the ultrasound is normal and the child had an E.Coli UTI, no further investigation is necessary. ^(1,3,4)

A repeat urine sample is advised after completion of the antibiotic course, to ensure the infection has cleared. ^(3, 4)

When to refer

- Children with an atypical (eg non E.Coli) UTI's ^(1, 4)
- Children with recurrent UTI's ^(1, 4)
- Children with an abnormal renal tract ultrasound ^(1, 4)

Related policies, procedures, protocols and guidelines

List and hyperlink the titles of related policies, procedures and guidelines.

Useful resources

List and hyperlink the titles of useful resources. Give a brief description of each.
Urinary tract infection in infants Health Facts handout
Urinary tract infection in children Health Facts handout

