

Clinical Assessment/Management tool for Children

History	Examination: check for -	Consider Complications and Alternative diagnoses	Red Flag
 Fever Vomiting Poor feeding Lethargy Irritability Abdominal pain/loin pain Dysuria Urinary Frequency or urgency Offensive smelling urine Haematuria See <u>Child with Fever</u> page to assess risk of serious 	 Loin tenderness (pyelonephritis) Abdominal mass Palpable bladder - urinary retention Exclude balanitis or vulvovaginitis 	 Sepsis +\- meningitis (more common in infant under 3 months of age) Gastroenteritis Constipation Appendicitis GI obstruction 	 Child Unwell Known Conger Previor Vesico Abdom Poor u

Obtaining a Urine

In children over 3 months of age who appear well, if unable to obtain urine sample at time of initial review, send home with advice to return with urine sample within 6 hours

Where suspected UTI in infant under 3 months of age, refer to paediatrics same day (do not delay referral if unable to obtain urine sample)

Urine Dipstick

• Children less than 3 months where there are concerns about UTI should be referred to paediatrics

3 months to 3 years	>3 years
Do not start antibiotic treatment	Do not send urine for culture
Do not send urine for culture unless	Do not start antibiotic treatme
	Consider alternative diagnosis
failure to respond to treatment	
Send a urine sample for culture	Send urine sample for culture
Start antibiotic treatment	Start antibiotic treatment
Send a urine sample for culture	Send urine sample for culture
Start antibiotic treatment	Only start antibiotic treatment
	Consider alternative diagnosis
Send a urine sample for culture	Ensure sample was tested pror
Start antibiotic treatment	Send urine sample to the lab for
	Start antibiotic treatment
Amber Features	
Haemodynamically stable	 Age < 3 months
	 Unwell/septic appearance
	Underlying renal disease
	 Not able to tolerate antibiotic
Management	
Send urine sample for culture	• Send urine sample for culture
	 Send urine sample for culture Send to local paediatric depa
 Send urine sample for culture Start antibiotic treatment for UTI: Trimethoprim as per BNFC 	-
 Send urine sample for culture Start antibiotic treatment for UTI: Trimethoprim as per BNFC Cefalexin as per BNFC 	-
 Send urine sample for culture Start antibiotic treatment for UTI: Trimethoprim as per BNFC Cefalexin as per BNFC Local Policy or as culture results determine 	-
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 Send urine sample for culture Start antibiotic treatment for UTI: Trimethoprim as per BNFC Cefalexin as per BNFC Local Policy or as culture results determine If pyelonephritis likely and systemically well treat with Co-amoxiclav as per BNFC Cefalexin as per BNFC Total Policy or as culture results determine 	-
	Do not start antibiotic treatment Do not send urine for culture unless • does not correlate with clinical symptoms • recurrent infection • failure to respond to treatment Send a urine sample for culture Start antibiotic treatment Send a urine sample for culture Start antibiotic treatment Send a urine sample for culture Start antibiotic treatment Send a urine sample for culture Start antibiotic treatment Send a urine sample for culture Start antibiotic treatment Send a urine sample for culture Start antibiotic treatment Mathematical Send a urine sample for culture Start antibiotic treatment

This guidance has been reviewed and adapted by healthcare professionals across North East and North Cumbria with consent from the Hampshire development groups



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Red Features

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Management

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