

URINARY TRACT INFECTIONS

Complicated UTI

See also specific patient groups and conditions below

Complicated UTIs are more likely in the following situations:

- Recurrent infection
- Treatment failures
- Previous urogenital surgery
- Urinary tract abnormalities
- Urinary or suprapubic catheters
- Symptoms of renal infection e.g., fever or flank pain (see [Acute Pyelonephritis in Adults](#))
- Infants and neonates (see [UTI in Children](#))
- Pregnancy (see [UTI in Pregnancy](#))

Organisms

- *Escherichia coli*
- *Proteus sp.*
- *Klebsiella sp.*
- *Pseudomonas aeruginosa* (if recurrent infections)

Treatment

- Always send a pre-treatment MSU sample and review empirical treatment with the result. ([See Diagnosis of UTI in Adults - Quick Reference](#)).
- A positive catheter specimen urine does not necessarily mean there is a UTI present, a clinical assessment should be made, and antibiotics are only given if there are signs and symptoms of a UTI.
- If treating for a catheter-associated UTI, the catheter should be changed (or removed if possible) as soon as possible after starting antibiotics to prevent relapse of the infection.
- Treatment if recurrent is a longer 7-day course of antibiotics (see lower/UTI or pyelonephritis section).

Resources

- The [TARGET antibiotics toolkit hub](#) includes leaflets to discuss with patients, diagnostic tools, and other UTI resources.

Version Control- Complicated UTI			
Version	Author(s)	Date	Changes
V2.1	Shary Walker Interface and Formulary Pharmacist	03/05/22	1. Added the links; Upper UTI, UTI in Pregnancy, Quick Reference Guide, & UTI in Children 2. Added links to antibiotics toolkit hub