







Has your patient got signs and symptoms of a catheter associated urinary tract infection (CAUTI)?

Diagnosis of a CAUTI must always involve assessing for clinical signs and symptoms compatible with a CAUTI. Signs and symptoms include:

- Fever
- Rigors, shivering, shaking
- New onset or worsening confusion / delirium
- Malaise / lethargy with no other identified cause
- Back pain
- Pelvic discomfort / pain
- Acute haematuria



Dip stick testing of urine must **NOT** be used to diagnose a CAUTI, because:

- Patients with a urinary catheter are likely to always have non visible haematuria due to ongoing trauma of the catheter
- Patients with a urinary catheter are likely to have bacterial colonisation of their urine due to the presence of the catheter
- These can all be normal findings in a catheterised patient and in isolation does not indicate infection



When to take a catheter sample of urine (CSU)

- A CSU should only be obtained when a diagnosis of CAUTI has been made
- Obtain the CSU before the patient commences antibiotics
- The CSU will help guide antimicrobial treatment but does not help in establishing the diagnosis
- Obtaining a CSU when there is no clinical evidence of a CAUTI may lead to a false positive result and unnecessary treatment with antibiotics

How to obtain a CSU:

- Obtain the specimen aseptically via the drainage bag needle free sampling port
- Clean the sampling port with a 70% isopropyl alcohol swab and allow to dry
- CSUs may also be obtained aseptically during catheterisation
- The sample should normally be sent in a red -topped (boric acid containing) sterile container and filled to the line
- A false negative culture result can occur with a small urine volume

Changing the catheter:

- Patients who have a diagnosis of a CAUTI should have their catheter changed with appropriate antibiotic cover*
- Change the catheter after the patient has commenced antibiotics for the **CAUTI**





Prescribing antibiotics when there is no clinical evidence of a CAUTI should not be done and may increase patient's multi-resistance to antibiotics.

References:

Urinary Catheterisation: Adults and Children's (Urethral, Supra Pubic and Intermittent) Policy and Standard Operating Procedures. Leeds Community Healthcare NHS Trust 2015 *Guideline for antimicrobial prophylaxis during urinary catheterisation in adults. Leeds Teaching Hospitals NHS Trust 2010

Catheter associated urinary tract infections (CAUTI). Management of infection guidance for primary care. Leeds Teaching Hospitals NHS Trust 2011

Catheter associated urinary tract infections (CAUTI) in adults (≥16 years of age) - Guideline for the management of in secondary care). Leeds Teaching Hospitals NHS Trust 2013