**When to Send a Urine for Culture and Urinalysis**
(NB Provincial Health Authorities Anti-Infective Stewardship Committee, September 2017)

**UTI Symptoms**
- **Cystitis**
  - Dysuria
  - ↑ frequency
  - ↑ urgency
  - Suprapubic pain
- **Catheter-Associated UTI**
  - Fever
  - Acute hematuria
  - Delirium
  - Rigors
  - Flank Pain
  - ± Lower tract symptoms if catheter removed
- **Pyelonephritis**
  - Fever
  - Nausea, vomiting
  - Costovertebral pain
  - Flank pain
  - ± lower tract symptoms

Cloudy and/or foul smelling urine are **NOT** symptoms of UTI.

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**Clinical Pearls**
- “Changes in cognitive function and declines in activities of daily living **REQUIRE** careful clinical assessment. **DO NOT** assume they are secondary to UTI.” VCH/ASPIRES 2014
- Urine culture and susceptibility and urinalysis testing is **NOT** necessary or beneficial in healthy, non-pregnant, premenopausal, non-diabetic women with acute cystitis (at least 2 of 3 cardinal symptoms – dysuria, urgency or frequency) and NO vaginal discharge without functional or anatomical abnormalities of the urinary tract.
- Always obtain a culture for: pregnant women; patients with sign and symptoms of pyelonephritis; premenopausal adult females with recurrent cystitis; urological procedure; patients with complicated urinary tract infections (i.e. structural abnormality, obstruction, recent urologic procedure, male sex, immunosuppression, poorly controlled diabetes, spinal cord injury or catheterization)

*Refer to NB-ASC UTI Treatment Guideline for antibiotic selection*