

**Scope and Target Population:**

To facilitate the triage and appropriate treatment for women age 18-65 with uncomplicated urinary tract infection.

**Clinical Highlights and Recommendations:**

- Assess all women ages 18-65 with symptoms of UTI for the presence of complicating factors. The presence of complicating factors warrant provider evaluation, and may require additional diagnostic work-up.
- Patients who have classic symptoms of urinary tract infection and no complicating factors can be offered the option of phone treatment, if preferred by both provider and patient.
- If laboratory evaluation is preferred by the provider, symptomatic women without complicating factors can be appropriately evaluated by a urinalysis rather than a urine culture.
- Symptomatic women without complicating factors can be effectively treated with the following recommended therapy:
  - Trimethoprim sulfamethoxazole D.S. 1 twice daily x 3 days
  - Trimethoprim 100 mg 1 twice daily x 3 daysIf allergic to sulfa or trimethoprim:
  - Nitrofurantoin (Macrobid) 100 mg twice daily x 7 days
  - Ciprofloxacin 250 mg BID x 3 daysSulfa and ciprofloxacin may cause an increase in INR values for patients taking warfarin.
- All patients should be provided patient education about the prescribed therapy, and the need to return to clinic if the symptoms do not subside.

**Priority Aims:**

1. Decrease the use of urine culture as a guide in therapy of uncomplicated UTI.
2. Increase the use of short course therapy in women with uncomplicated UTI.
3. Increase patient satisfaction with management of uncomplicated UTI.