

# Reducing Urinary Tract Infections in the Long-Term Care Setting

Improving member outcomes.

# UTI Statistics in the Long-Term Care Setting

- UTI is the second most common infection in long-term care facilities and the most common cause of hospitalization for bacterial infection.<sup>1</sup>
- E. coli is the most common organism causing UTI.<sup>2</sup>
- Indwelling catheters tend to be used for longer periods of time in nursing homes than other settings which can lead to infection including sepsis. <sup>3</sup>
- Diagnosis of UTI is complicated.<sup>4</sup>
- Up to 80% of older women have bacteria in urine but are asymptomatic for UTI.<sup>2</sup>
- Antibiotics may be prescribed when not needed, which contributes to antibiotic resistant organisms.<sup>3</sup>

# **Contributing Factors**

• Dehydration, immune compromise (diabetes, HIV, steroid use), impaired cognition or mobility, incontinence, indwelling catheters, infrequent toileting, poor perineal hygiene. 4

#### Women

- -Short urethra <sup>2</sup>
- -Postmenopausal 1, 6
  - Estrogen deficiency
- -Pelvic Organ Prolapse 1

#### Men

- -Prostate enlargement (benign or cancer related) 1, 6, 11
- -External catheters <sup>1</sup>

# Symptoms of UTI

#### Other indications of UTI

- Frequent urination
- Pain when urinating
- Sudden urge to urinate
- Odorous urine
- Cloudy or red tinged urine

- Delirium
- Fever greater than 100F (38.0C)
- Chills
- Abdominal, Flank or Back pain
- Nausea or vomiting
- Weakness

# Use Criteria to Determine Catheter Associated Urinary Tract Infection (CAUTI) or Urinary Tract Infection (UTI) Reportable Events

- Fever; Temp. >100°F or 38.0° C
- Pain or other symptoms of UTI
- Positive Urine Culture with organism identified
- Diagnosis of UTI
- Treatment with an antibiotic
- Documentation in Medical Record
- Follow Your Facility's and Other Required CAUTI or UTI Reportable Event Protocols

# Addressing UTIs in the Long-Term Care Setting

- Good Hand hygiene with 60% alcohol-based hand cleaner.
- Hand wash with soap for 20 seconds, rinse and dry hands if any visible soiling or if C. difficile or Norovirus.<sup>8</sup>
- Limit indwelling catheter use <sup>3</sup>
  - When needed give proper catheter care. <sup>3</sup>
- Evaluate staffing to address resident needs, safety and supplies.
- Review infection control practices, antibiotic stewardship, track and report CAUTI and UTI events.
   3, 9, 10
- Provide training that supports UTI and CAUTI reduction practices.<sup>3</sup>

This communication does not constitute medical advice or care and is no way intended to substitute for clinical judgement in individual cases. Always talk your provider about any health questions or concerns.

Information presented in this deck is general education and does not replace your facility's protocols, policies or procedures, nor does it replace federal or state mandates or guidelines. Participants should follow their facilities' respective protocols, policy and procedures and comply with federal and state mandates and guidelines at all times.

#### References

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