First Febrile Urinary Tract Infection
Risk Factors and Screening Recommendations
Evidence Based Outcome Center

**GUIDELINE EXCLUSION CRITERIA**
- Known genitourinary anatomical abnormality
- Known immunodeficiency and/or on immunosuppressants
- Known uncorrected, hemodynamically unstable complex heart disease
- Prior febrile UTI with pathogen other than E. coli
- Prior febrile UTI with E. coli pathogen known to be resistance to empiric antibiotics therapy
- Clinically unstable (Septic Shock)

**GUIDELINE INCLUSION CRITERIA**
- 2 months to 18 years of age with symptoms: fussiness, foul smelling urine, blood in urine, new incontinence, dysuria, or urethral discharge
- Febrile > 38°C with no apparent source

**Inpatient Criteria**
- Ill-appearing (SIRS/SEPSIS)
- Dehydration requiring IV or NG fluids
- Persistent vomiting or inability to tolerate PO ABX
- Social indicators that make treatment compliance and/or PCP follow-up difficult
- Failure of outpatient treatment with need for IV therapy

<table>
<thead>
<tr>
<th>Probability of UTI &gt; 1%:</th>
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</thead>
<tbody>
<tr>
<td>2 or more risk factors</td>
<td>Uncircumcised OR Circumcised with 3 or more Risk Factors</td>
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<tr>
<td>Female Risk Factors*</td>
<td>Male Risk Factors*</td>
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<tr>
<td>Non-black</td>
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<tr>
<td>T ≥ 39°C</td>
<td>T ≥ 39°C</td>
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<tr>
<td>Fever ≥ 2 days</td>
<td>Fever ≥ 2 days</td>
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<tr>
<td>No apparent source of fever</td>
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<tr>
<td>Age &lt; 12 months</td>
<td>Age &lt; 6 months</td>
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</tbody>
</table>

*Recommend screening if prior history of UTI, fever ≥ 2 days

**DCMC UTI Definition:** The presence of pyuria and/or bacteruria on urinalysis AND a positive urine culture.

- Pyuria should be considered present if there are ≥5 WBCs/hpf in a centrifuged specimen and ≥10 WBCs/hpf in a counting chamber. DCMC uses centrifuged specimens.

- Urine culture is considered positive if there are ≥50,000 cfu/mL in a specimen obtained by catheterization or suprapubic aspiration. If the specimen was obtained by the clean-catch method, ≥100,000 cfu/mL is considered optimal for diagnosis but 50,000-100,000 can also be accepted with the understanding that the sensitivity and specificity are decreased in this setting.

For questions concerning this pathway, Click Here
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