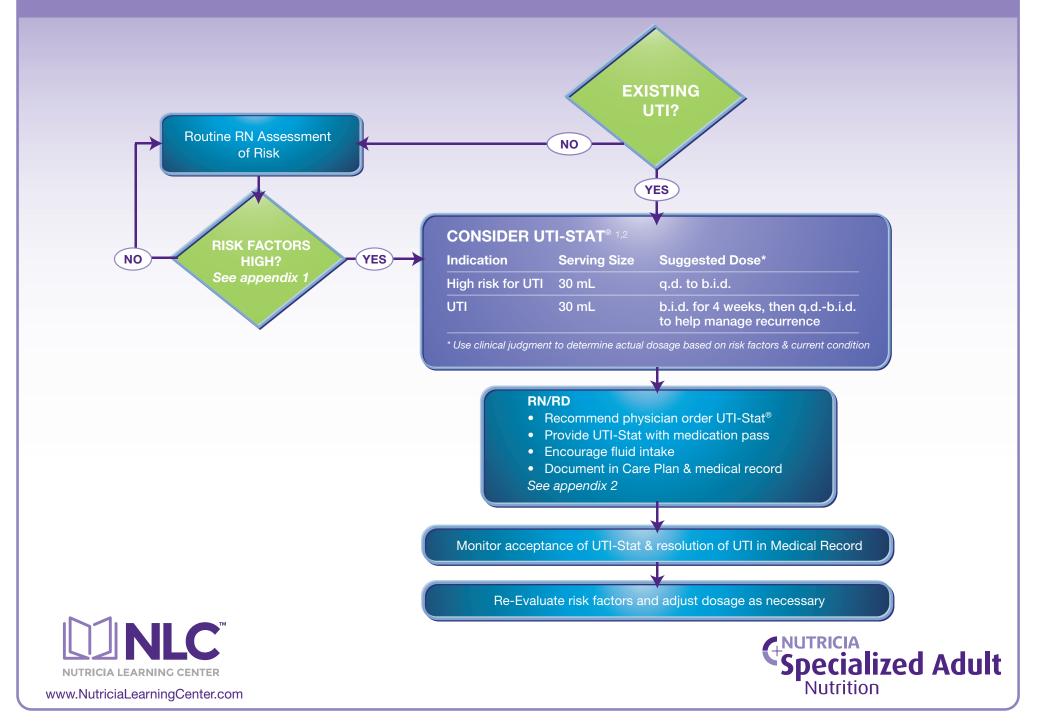
Urinary Tract Infections (UTI)



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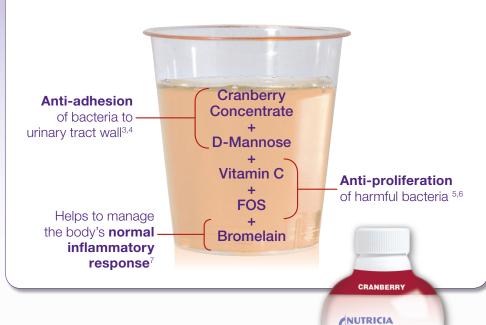
Appendix 1: Risk Factors

- Poor fluid intake less than 1000 mL/day
- Catheterization
- Two or more UTIs in the past 6 months
- Incontinence
- Urinary retention
- Immobility
- Orders for prophylactic antibiotics

Appendix 2: UTI-Stat® Administration

- Assess current fluid intake/type of liquids (thin or thickened)
- Asses allergy to cranberry products
- Recommend the physician hold or discontinue current orders for cranberry tablets, cranberry juice, cranberry containing supplements, D-mannose, or vitamin C if taking for UTI
- Recommend physician order UTI-Stat^{1,2}
- Communicate administration as appropriate to: Nursing, Dietary, Physician, Resident, & Caregiver
- Administer UTI-Stat PO with med pass, pour amount ordered into med cup
- UTI-Stat can be consumed straight or mixed with any food or beverage
- If administered via tube-feeding: flush tube with 30 mL water, measure appropriate dosage, administer into enteral tube, flush tube with additional 30 mL
- UTI-Stat provides 70 calories & 1 g of sugar per 30 mL
- Document intervention in care plan
- Encourage increased consumption of fluids
- Continue facility policies for UTI management (hygiene e.g.) (RN)
- Monitor & document acceptance of UTI-Stat & response to the intervention in medical record (RN)

UTI-Stat®, a proprietary protection complex that includes:



References:

1. Posthauer M. *The Director.* 2008;16:13-16. **2.** Efros M, et al. *Urology Gold.* 2010;76:841-5. **3.** Wang C, et al. *Arch Intern Med.* 2012;172(13):988-996. **4.** Ofek I, et al. Scand *J Infect Dis Suppl.* 1982;33:61-7. **5.** Carlsson S, et al. *Nitric Oxide-Biol Ch.* 2001;5(6):580-6. **6.** Cummings et al. *Am J Clin Nutr.* 2001;73(2):415s-420s. **7.** Mori S, et al. *Acta Obstetrica Et Gynaecologica Japonica.* 1972;19(3):147-53.





