UTI in Older Adults

NICE NG109 (2018, updated 2022) | NHS AMS Guidance | Pharmacy First PGD (Oct 2025)

CALL 999: Signs of Sepsis

- ☐ Fast or laboured breathing, mottled or cyanotic skin, collapse, or severe deterioration
- ☐ Rigors with marked systemic upset
- ☐ Acute confusion with systemic illness, deterioration, or suspected sepsis
- ☐ Do not wait for improvement. Bring all medicines to the ambulance crew.

URGENT: Same-Day GP or NHS 111

- ☐ Fever at or above 38 degrees Celsius with urinary symptoms
- ☐ Hypothermia (below 36 degrees Celsius) in a frail older adult with possible infection
- ☐ Loin or flank pain, usually with fever and/or nausea and vomiting (possible pyelonephritis)
- ☐ Acute confusion that is a change from baseline: refer for delirium assessment, do not assume UTI
- ☐ Catheterised patient with systemic upset, fever, or catheter site pain (catheter change and fresh culture may be needed per local policy)

Lower threshold for frail older adults and care-home residents. Confusion alone does not diagnose UTI: assess for dehydration, constipation, medication effects, and other infection sites.

Stewardship: What Does NOT Diagnose UTI in Older Adults

Finding	What It Means	Correct Action
Cloudy or offensive urine alone	Common in asymptomatic bacteriuria; not diagnostic	Advise fluids where appropriate; ask about symptoms
Positive urine dipstick alone	Unreliable in over-65s; do not use to diagnose UTI	Do not treat without supporting symptoms
Confusion or falls alone (no urinary symptoms)	Delirium has many causes; UTI should not be assumed	Refer for clinical assessment
Bacteriuria on culture without symptoms	Asymptomatic bacteriuria; does not require treatment	Do not prescribe antibiotics
Urine dipstick in a catheterised patient	Bacteriuria universal in catheterised patients; dipstick unreliable	Do not use dipstick in catheterised patients; treat only if systemic features present

Pharmacy First Supply (Women 16-64 Only)

- ☐ Dysuria PLUS at least one of: frequency, urgency, or haematuria
- ☐ No fever, loin pain, systemic features, pregnancy, catheter, or recent antibiotics
- ☐ Antibiotic choice, dose and duration: follow current Pharmacy First PGD and BNF
- ☐ Men, under-16s, aged 65 and over, or frail: refer to GP, NHS 111, or urgent care
- ☐ Visible haematuria age 45 and over without UTI, or persisting after treatment: urgent suspected cancer referral

Safety-net all patients: seek urgent review if symptoms worsen, fever or loin pain develops, confusion occurs, no improvement within 48 hours, or unable to maintain adequate hydration.

Ask before treating: Urinary symptoms present? Systemic features (fever, rigors, hypothermia)? Adequate hydration? Bowels opened? Catheter in situ? Recent medication changes? Other infection sites?