

Pathway:	Recurrent UTIs in Women
Referral Criteria/Commissioning position:	
<p><i>Routine referral to secondary care recommended for:</i></p> <ul style="list-style-type: none"> • recurrent cystitis – three episodes of UTIs in previous 12 months or two episodes in previous six months • those with risk factor for an abnormality of the urinary tract including women with: <ul style="list-style-type: none"> ○ past history of urinary tract surgery or trauma ○ past history of bladder or renal calculi ○ obstructive symptoms such as straining, hesitancy, poor stream ○ urea splitting bacteria on culture of the urine such as Proteus or Yersinia ○ persistent bacteriuria despite appropriate antibiotic treatment ○ past history of abdominal or pelvic malignancy ○ symptoms of a fistula such as pneumaturia ○ who are immunocompromised or who have diabetes ○ who have a known abnormality of their renal tract who might benefit from surgical correction, such as cystocele, vesicoureteric reflux, or bladder outlet obstruction ○ who have not responded to preventive treatments <p>'Red Flag' symptoms:</p> <ul style="list-style-type: none"> • Recommended for women with recurrent UTIs associated with haematuria (Non-Visible Haematuria (NVH) or frank) for investigations to exclude urological cancer. • Acute pyelonephritis: consider admission for any woman with loin pain, rigors and fever, especially with poor oral intake/ vomiting. <p>Investigations prior to referral</p> <ul style="list-style-type: none"> • Baseline USS 	
Information to include in referral letter:	
<p><i>The GP referral letter should contain:</i></p> <ul style="list-style-type: none"> • Details of treatments and measures tried including outcomes • Drug history (prescribed and non-prescribed) • Relevant past medical/surgical history • Current regular medication • BMI • Smoking status • Alcohol consumption 	
References & Additional information:	
<p>Patient Information Leaflets: Click Here</p> <p>References: CKS NICE guidance</p>	
CCG GP sign off:	SRCCG Business Committee (Delegated to Dr Greg Black)
Review date:	2017