

Appendix 1. Treatment selection tool: Antibiotic choices for uncomplicated* urinary tract infections in outpatients in the emergency department. Copyright © 2011 Regina Qu'Appelle Health Region. This algorithm is based on local (RQHR) outpatient urinary isolate susceptibility available at the time the study was conducted and, as such, may not apply to other centres.

First Line Therapy – No EDS/Inexpensive:

1. Nitrofurantoin (Macrobid® 100mg po bid) unless:

- Systemic infection – i.e. upper UTI, pyelonephritis, bacteremia
- Clcr <60mL/min

or,

2. TMP-SMX (1 DS tablet po q12h (If Clcr 15-30mL/min: 1 SS tablet PO q12h)) unless:

- Sulfa allergy; can use **trimethoprim** alone (100mg po q12h)
- Clcr <15mL/min

Second Line Therapy – EDS Required:

3. Amoxicillin/Clavulanate (Clavulin® 875mg/125mg po q12h, or 500mg/125mg q8h) unless:

- True penicillin allergy (anaphylaxis: hives, SOB, throat swelling)
- Known resistant organism (i.e. *Pseudomonas* on C&S result)

or,

4. Cefprozil or Cefuroxime (2nd gen cephs 250mg po q12h (500mg if upper UTI)) unless:

- Severe penicillin allergy (anaphylaxis: hives, SOB, throat swelling) or, cephalosporin allergy
- Known resistant organism (i.e. *Pseudomonas* on C&S result)

Last Resort – EDS Required & Lower E. coli** Susceptibility:

5. Ciprofloxacin (250mg po q12h (500mg if upper UTI)) only if:

- Sulfa *and* severe beta-lactam allergy
- Known resistance to all above agents (i.e. *Pseudomonas* on C&S result)

**** RQHR Antibiogram 2009-10**

N.B. Recurrent Symptoms/Relapse - Recurrence within 1-2 weeks after treatment; usually same organism ►► i.e. **Retreat with previous agent for longer duration** (e.g. If relapse with 3 day regimen, retreat for 7 days; with 7 day regimen, retreat for 14 days)

***Uncomplicated UTI defined as 13 years of age or older without the following:**

Pregnant, Nursing Home Resident, Indwelling Catheter, Spinal Cord Injury,
Abnormal Urinary Tract Anatomy, Physical Obstruction, Inpatient

DAILY Drug Cost only:

≈\$0.25 TMP/SMX

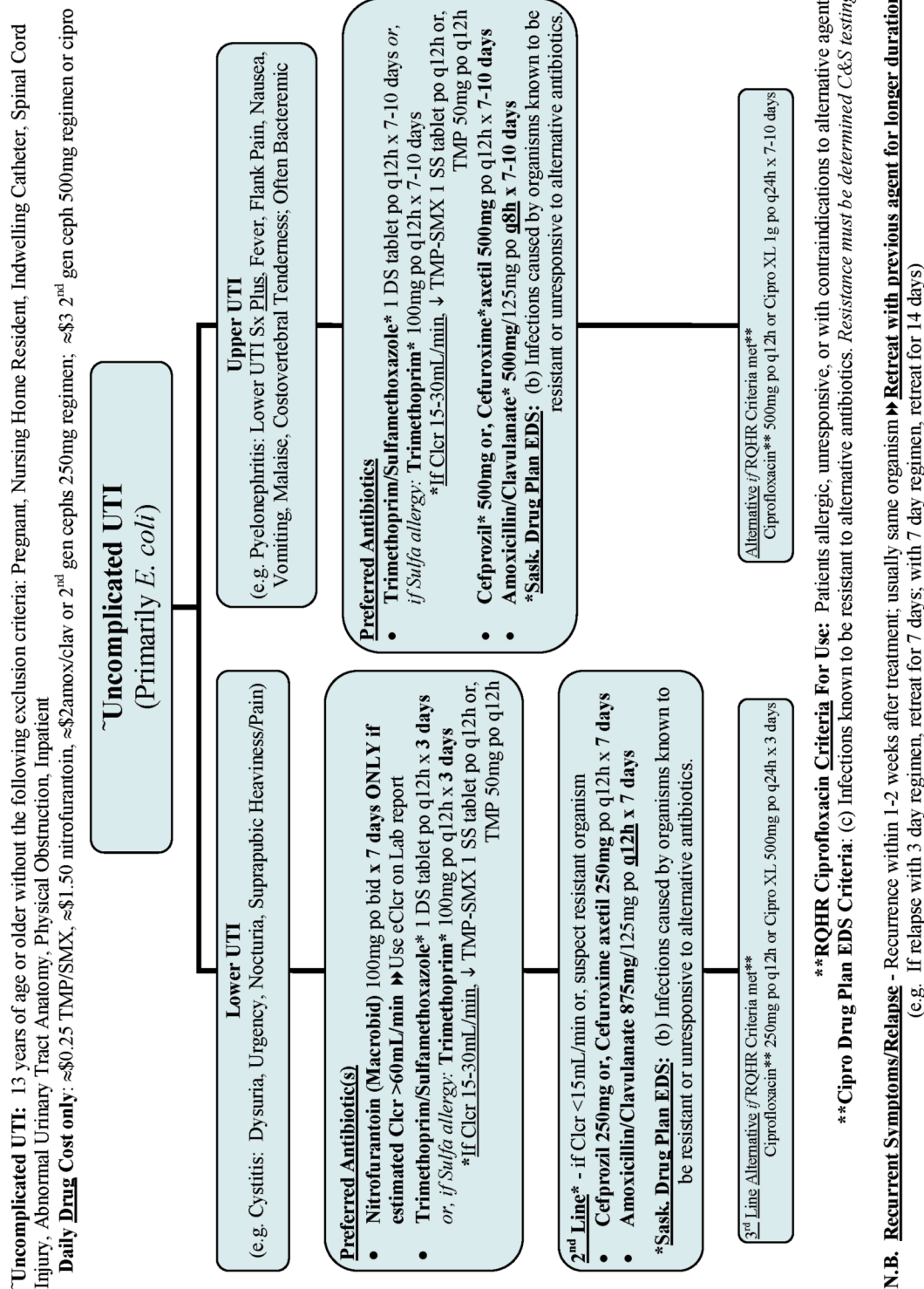
≈\$1.50 nitrofurantoin (Macrobid®)

≈\$2.00 amox/clav or, 2nd gen cephs 250mg regimen

≈\$3.00 2nd gen ceph 500mg regimen or cipro

Supplementary material for Landry E, Sulz L, Bell A, Rathgeber L, Balogh H. Urinary Tract Infections: Leading Initiatives in Selecting Empiric outpatient treatment (UTILISE). *Can J Hosp Pharm.* 2014;67(2):116-25.

Appendix 2. Best practice algorithm: Empiric treatment of uncomplicated* urinary tract infections in outpatients in the emergency department. Copyright © 2011 Regina Qu'Appelle Health Region. This algorithm is based on local (RQHR) outpatient urinary isolate susceptibility available at the time the study was conducted and, as such, may not apply to other centres.



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