

## A REMINDER

### Diagnosis and Treatment of UTI

#### Diagnosis, Remember:

- Do not perform dipstick on patients over the age of 65 or those with a urinary catheter
- Only send a urine sample if the patient is symptomatic and displaying two or more signs of infections
- Review the urine culture results to check the empirical treatment is appropriate
- Do not treat asymptomatic bacteriuria

#### Treatment, Remember:

- ALWAYS check the APC guidance for the up-to-date treatment choices

#### [APC UTI Quick Reference Guide](#)

#### [Diagnosis of UTI—quick reference tool for primary care](#)



*Using patient leaflets interactively in consultations is the best way to support effective discussions and maintain patient satisfaction.*

#### [UTI patient information leaflets to discuss with patients.](#)

[Urinary Tract Infection](#) — links added to interconnect the other APC UTI guidelines. Antibiotic toolkit hub links including patient leaflets, diagnostic tools and other resources were also included.

[Acute Pyelonephritis in Adults](#), [Complicated UTI](#), [Lower UTI/Cystitis](#), [UTI in Pregnancy](#), and [Quick Reference Guide for the diagnosis of UTI](#).

## GUIDELINE UPDATES continued

- [Dermatophyte Infection of the Proximal Finger or Toe Nail](#) — It is recommended to monitor the baseline LFTs and then 1 month into treatment with both of the oral antifungals.

## NEWS

- ◆ [Hidradenitis Suppurativa](#)—New guideline.  
This is also known as acne inversa. It is a debilitating and distressing chronic inflammatory skin disease, requiring prolonged and repeated course of tetracyclines to reduce bacterial colonisation and inflammation.
- ◆ [Antibiotics for Acne](#)  
To promote antimicrobial stewardship, all antibiotics for acne have been updated as AMBER 3, in line with the APC antimicrobial guidelines.

## NICE GUIDELINE RECENT PUBLICATIONS

[Otitis media \(acute\): antimicrobial prescribing \(NG91\)](#) Acute otitis media can be caused by viruses or bacteria. It lasts for about a week, and most children get better in three days without antibiotics. Serious complications are rare.

## APC ANTIMICROBIAL GUIDELINE UPDATES

- [Acute Cough/Bronchitis](#) — Added antibiotic options for >18 years and <18 years, including self-care strategies and links to TARGET RTI and APC Cough PILs.
- [Acute Sinusitis](#) — For symptoms 10 days and over, either offer no antibiotics or a delayed antibiotic, considering the evidence on how antibiotics make little difference on how long the symptoms last.
- [Chronic Bacterial Sinusitis](#) — Patient's advice added, including symptom duration, self-care/trigger avoidance measures, links to NHS sinusitis PIL for nasal irrigation and etc.
- [Dental Abscess](#) — Antibiotics should not be prescribed in primary care, unless the patient is systemically unwell, or they are at high risk.