

Urinary Tract Infection Advice Sheet



Advice intended for parents/ carers taking their child home after seeing a doctor

How is your child?



RED

If your child has any of the following features:

- Becomes pale, mottled and feels extremely cold to touch
- Becomes extremely agitated (crying inconsolably despite distraction), confused or very lethargic (difficult to wake)
- Has blue lips or pauses in their breathing (apnoeas) or has an irregular breathing pattern
- Develops a rash that does not disappear with pressure (the 'Glass Test').

You need urgent help

Go to the nearest Hospital Emergency (A&E) Department or phone 999



AMBER

If your child has any of the following features :

- Is refusing to take their antibiotics or not keeping them down due to vomiting
- Seems dehydrated (dry mouth, sunken eyes, no tears, drowsy or passing less urine than normal)
- Starts to complain of pain in the back
- Starts getting uncontrollable shakes (rigors)
- Seems to be getting worse despite being on antibiotics for more than 2 days
- Is under 3 months of age with a temperature above 38°C / 100.4°F or 3-6 months of age with a temperature above 39°C / 102.2°F (but fever is common in babies up to 2 days after they receive vaccinations)
- Continues to have a fever above 38.0°C for more than 5 days

You need to contact a doctor or nurse today

Please ring your GP surgery or call NHS 111 - dial 111



GREEN

- None of the features above

Self Care

Continue providing your child's care at home.

How can I help my child?

- Ensure they get their antibiotics at regular intervals as instructed by your doctor
- It is important to make sure your child takes the antibiotics for as long as the doctor recommends. Otherwise, there is a chance that their infection won't be fully treated and your child might get ill again
- Children with UTIs may be uncomfortable so you may wish to give them paracetamol or ibuprofen to help with their pain.

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What is a urinary tract infection (UTI)?

A UTI is an infection of the bladder or kidneys. It is caused by bacteria and is treated with antibiotics. Bladder infections are far more common than kidney infections; kidney infections are more serious and may need treatment with antibiotics through a drip in their vein.

Your child is more likely to get a UTI if they are under 1 year old, a girl, or have problems with their urinary tract. About 8 in every 100 girls and 2 in every 100 boys will have had a urinary tract infection by the time they are 7 years old.

What are the symptoms?

It can be difficult to tell if a child has a UTI, especially if they are very young. The symptoms can vary depending on your child's age and the severity of the infection. Features suggesting a bladder infection include:

- Pain or stinging when passing urine
- Passing urine more often than normal
- Crying when passing urine
- Refusing to pass urine

If the following features are also present, your child might have a kidney infection:

- Fever
- Vomiting
- Back or tummy pain

What investigations will they need?

A UTI is diagnosed by testing a sample of your child's urine (pee). This sample needs to be 'caught' in a sterile pot.

The sample will usually be tested immediately (dipstick) and may also be sent to the hospital for further testing.

It will take a couple of days to get the results back - your child's antibiotics may be stopped or changed at that point.

If your child is under 6 months of age, they will need kidney scans soon after their UTI. This will be organised by their doctor. In addition, older children with frequent UTIs may also need a scan of their kidneys. This will look to see whether there is a structural problem that explains why your child is more likely to get UTIs and whether the infection has caused any damage to the kidney.

What is the treatment?

Your child will need antibiotics to treat their UTI. Most children with a bladder infection can be managed with oral antibiotics.

If your child has a kidney infection or if they are very young (under 3 months of age), they may need to go to hospital for antibiotics through a drip in their vein.

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Help your child to avoid getting UTIs in the future

- Ensure your child drinks plenty – aim for 6-8 glasses a day
- Ensure your child goes to the toilet regularly – aim for every 2-3 hours, including at school
- Treat constipation - see your GP
- Encourage girls to wipe their bottom from front to back
- Use loose-fitting cotton underwear
- Avoid bubble bath and excessive soap in the bath

Worried that your child has got another UTI?

Next time your child has a fever for no obvious reason, especially if nobody else is unwell in the family, make sure a urine sample is checked. If your child has a UTI, it is important that it is diagnosed and treated early. That way, there is far less chance that it will cause long term damage to their kidneys.

Useful Websites

ERIC The Children's Bowel and Bladder Charity: www.eric.org.uk