

UTI Advisor

Acute Uncomplicated Cystitis:

- Absence of fever, flank pain, or other suspicion for pyelonephritis
- Able to take oral medication

YES

Does the patient have ANY of the following risk factors?

- Hospitalization within the past 6 months
- Treatment for urinary tract infection within the past 6 months
- Treatment with fluoroquinolones within the past 6 months
- Presence of indwelling urinary catheter

YES

Complicated cystitis WITH risk factors for resistant infection

Recommended treatment:

- Nitrofurantoin 100mg po twice daily x 7 days*[€]
- Cefdinir 300mg po twice daily x 7 days*
- Fosfomycin 3gm po every 48 hours x 2 doses*

Optional (in addition to above):

- Ceftriaxone 1 gm IV/IM x 1

NO

Is the patient a healthy, non-pregnant female?

YES

Uncomplicated cystitis

Recommended treatment:

- Nitrofurantoin 100mg po twice daily x 3 days[€]
- TMP/SMX DS one tab po twice daily x 3 days
- Ciprofloxacin 250mg po twice daily x 3 days[¥]

NO

Complicated cystitis WITHOUT risk factors for resistant infection

Recommended treatment:

- Cefdinir 300mg po twice daily x 7 days*
- TMP/SMX DS one tab po twice daily x 7 days*
- Ciprofloxacin 250mg po twice daily x 7 days*[¥]

Optional (in addition to above):

- Ceftriaxone 1gm IV/IM x 1

* May consider treatment duration of 14 days if catheter present which cannot be removed
[€]Nitrofurantoin should not be used for patients with CrCl < 50 mL/min
[¥] Fluoroquinolones should be reserved for those patients with history of allergy or intolerance to other listed therapies