

ANMC Pediatric FEBRILE Urinary Tract Infection Treatment Guideline (2-24 months)

Symptoms		Diagnostic Criteria for Acute Pyelonephritis		Risk Factors									
Fever Poor feeding Vomiting Irritability Strong-smelling urine		<u>Urinalysis results that suggest infection</u> Positive nitrite or Leukocyte esterase or Pyuria AND >50,000 CFUs per mL of a uropathogen cultured from a urine specimen obtained through catheterization or SPA		<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"><u>Girls</u></td> <td style="width: 50%; border: none;"><u>Boys</u></td> </tr> <tr> <td style="border: none;">Age <12 months</td> <td style="border: none;">Temp \geq39 C</td> </tr> <tr> <td style="border: none;">Temp \geq39 C</td> <td style="border: none;">Fever \geq24 hours</td> </tr> <tr> <td style="border: none;">Fever \geq2 days</td> <td style="border: none;">Uncircumcised</td> </tr> </table> Absence of another source of infection		<u>Girls</u>	<u>Boys</u>	Age <12 months	Temp \geq 39 C	Temp \geq 39 C	Fever \geq 24 hours	Fever \geq 2 days	Uncircumcised
<u>Girls</u>	<u>Boys</u>												
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Test		Treat		Imaging									
Obtain urine culture PRIOR to starting antibiotics		Adjust therapy based on sensitivity testing		Renal/bladder ultrasound for 1 st febrile UTI VCUG for 2 nd febrile UTI or if abnormalities seen on renal/bladder ultrasound									
Antibiotic Selection													
	Ambulatory Empiric Treatment	Inpatient Empiric Treatment	Duration of Therapy										
Preferred Treatment	Cephalexin 50mg/kg/day PO divided TID or QID	Ceftriaxone 50mg/kg IV Q24H	7-14 days										
Beta-lactam allergic	Sulfamethoxazole/trimethoprim 8-10mg/kg/day PO divided BID (trimethoprim component for dosing)	Gentamicin 5mg/kg/day IV											
Antimicrobial Stewardship Program Approved 2018													

Roberts KB. Urinary tract infection: clinical practice guideline for the diagnosis and management of the initial UTI in febrile infants and children 2 to 24 months. *Pediatrics*. 2011;128(3):595-610.