Asymptomatic bacteriuria (bacteria in the urine with no symptoms) is colonization of the bladder that occurs frequently in the elderly, especially those with diabetes, immobility, incontinence, prostatic enlargement, or post-menopausal changes.

**Antibiotics Not Indicated!**
Asymptomatic bacteriuria is not an infection

Do not test urine even if foul-smelling, dark, or cloudy

For hemodynamically stable elderly patients with cognitive changes, seek other causes: drug interactions / side effects, dehydration, sleep disturbances, sensory deprivation, hypoxia, hypoglycemia, constipation, etc.

*Note: Falls, decreased appetite, verbal aggression, wandering, confusion, and disorientation alone are not indications for urine testing.*

HOLD URINE TESTING;
- Monitor frequently
- Rehydrate / push fluids for 24 hours if not contraindicated

**Typical Urinary Tract Infection Signs/Symptoms:**
- Acute dysuria and/or
- 2 or more of the following:
  - Fever
  - New urgency (or marked increase)
  - New frequency (or marked increase)
  - Suprapubic/flank pain
  - New urinary incontinence
  - Gross hematuria

Dipsticks are not recommended due to poor predictive value. Urine culture ideally should be submitted in preservative.

Send urine for urinalysis and urine culture

**It is hard to ignore a positive urine test...**
Unnecessary testing in colonized patients results in unnecessary antibiotics, which lead to adverse events (antibiotic resistance / failure, *C. difficile* infection, GI upset, etc.)

For more directions and guidance:
- www.ammi.ca
- #SymptomFreeLetItBe

A national initiative to stop inappropriate antibiotic use for asymptomatic bacteriuria in elderly patients.

[Symptom-Free Pee: Let It Be]