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

Possible urinary tract infection if at least TWO are present:
- Fever / rigors
- Flank pain / suprapubic pain
- Pain on urination
- New frequency
- Hematuria
- New incontinence

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.