

# UTI Nursing Care Plan

## Patient Information

Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

Gender: \_\_\_\_\_

Patient ID: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Care Facility: \_\_\_\_\_

Other Key Information: (eg. gestation period)

Catheter in use

## Symptoms present:

- Dysuria
- Urinary urgency and frequency
- Bladder fullness
- Lower abdominal discomfort
- Suprapubic and flank tenderness
- Bloody urine
- Fever
- Chills
- Malaise

## Acute Pain:

*Patients who have developed a UTI describe a burning sensation paired with a sense of urgency and frequency to void.*

- Pain in pelvis
- Dysuria
- Frequency
- Burning with urination

Suggested Intervention:	Notes/referral:
<ul style="list-style-type: none"> <li>• Heating pads for lower back and suprapubic area to relax muscles</li> <li>• Use of analgesics such as phenazopyridine</li> <li>• Monitoring of irritant foods such as coffee, alcohol, spicy food, and high-sugar drinks.</li> </ul>	

**Deficit Fluid Volume:**

- Altered mental status
- Hypotension
- Decreased urine output
- Increased body temperature
- Thirst

Suggested Intervention:	Notes/referral:
<ul style="list-style-type: none"> <li>• Encouraging fluid intake to flush bacteria out of the urinary system and dilute the urine.</li> <li>• Monitoring of the patient's intake and output to see changes in the deficit.</li> <li>• Limit the patient's consumption of caffeine, high-sugar drinks, and alcohol.</li> <li>• Chart for a urinalysis and watch for dehydration.</li> </ul>	

**Disturbed Sleep Pattern:**

Suggested Intervention:	Notes/referral:
<ul style="list-style-type: none"> <li>• Limiting fluid intake 2 to 4 hours before bed</li> <li>• Advising against caffeine and alcohol that act as urinary tract irritants, inducing diuresis.</li> </ul>	

<ul style="list-style-type: none"> <li>• Encourage and educate patients on healthy sleep habits such as avoiding phone use, dimming lights, and setting up a comfortable sleep environment.</li> <li>• Medication such as diuretics should be administered at least 6 hours before bedtime to avoid interrupting the patient's sleep schedule.</li> </ul>	
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**Impaired Urinary Elimination:**

- Urinary incontinence
- Frequency
- Urinary retention

<b>Suggested Intervention:</b>	<b>Notes/referral:</b>
<ul style="list-style-type: none"> <li>• Encouraging the patient to not dismiss or avoid the urge to void as this can worsen the infection with the stasis of urine.</li> <li>• Encourage the patient to void every 2 to 3 hours to avoid the accumulation of urine and retention.</li> <li>• In serious cases where the patient has a neurogenic bladder, catheter insertion may be needed.</li> <li>• Provide cranberry-based products or probiotics to create an acidic environment, slowing and potentially inhibiting future bacteria growth.</li> </ul>	

**Physician's Notes and Recommendations**

**Physician's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_