

*Eden Aldrich, RNP*

**STANDING ORDER**

**DYSURIA**

**I. ASSESSMENT**

**a. History**

- i.** Onset and duration
- ii.** Describe the pain and where it is present – is it due to sores in vaginal area or penile area?
- iii.** Do they have other symptoms – urinary frequency, urinary urgency, urinary incontinence, vaginal/penile discharge, hematuria, fever, nausea, vomiting, chills, flank pain, abdominal/pelvic pain in females or testicular pain in males, vaginal or penile lesions/sores?
- iv.** LMP in female inmates
- v.** History of BPH or taking Tamulosin in males
- vi.** History of substance abuse – if present, high likelihood of risky sexual behavior

**b. Exam**

- i.** Obtain Vital signs, including temperature
- ii.** Test for CVA tenderness (make hand into a fist, tap a few times firmly on back at mid-back level on each side of the spine – about at T12 level. Do not ask inmate if there is pain – if pain is present, it will be very evident on exam with inmate withdrawing/jumping on the exam table)
- iii.** Palpate abdomen if reporting abdominal and/or pelvic pain

<b>FEMALES</b>		
	<b>History</b>	<b>Exam</b>
<b>UTI</b>	Abrupt onset of dysuria along with urinary frequency and urgency and urinating in small amounts. Hematuria may be present. No fevers. No flank pain. No nausea or vomiting. No vaginal discharge.	No CVA tenderness No fever
<b>Pyelonephritis</b>	Symptoms of UTI along with any of the following: fever, flank pain, nausea, or vomiting. Hematuria usually	Fever, CVA tenderness, ill appearing. Hematuria on urine dipstick.

Supersedes: March 20, 2018

Review Date: May 2021

Total Pages: 3

	present, but inmate may not have noticed.	
<b>Sexually Transmitted Illness</b>	Dysuria, but no urinary frequency and urgency. Vaginal discharge present. No flank pain. No hematuria. Fever may be present. Reported sores in vaginal area.	Fever may or may not be present. No CVA tenderness. Suprapubic pain on exam, but may not be present.
<b>MALES</b>		
<b>Sexually Transmitted Illness</b> <i>High suspicion for STI in any male &lt;50 years old who has symptom of dysuria. He has STI until proven otherwise.</i>	Age <50, penile discharge may or may not be present. Testicular pain may or may not be present.	No CVA tenderness. <i>Refer to Facility Provider for GU exam</i>
<b>UTI and Pyelonephritis</b> Age >50 years old. Overall symptoms are the same as in females. Very uncommon to present in male <50 years old.	No penile discharge. May have known history of BPH or taking tamsulosin.	No CVA tenderness No fever

## I. MANAGEMENT

(Based on the above table follow the following steps based on history and presentation and suspected cause of symptoms)

### a. FEMALES

#### i. UTI

1. Obtain Clean Catch Urine and complete UA dipstick testing
  - a. If urine dipstick is negative for leukocytes, blood, and nitrites then increase recommend increase in fluids and recheck in 3 days. If symptoms persist, schedule to see Facility Provider at earliest time available.
  - b. If urine dipstick is positive for JUST leukocytes then send urine for urinalysis and culture if indicated and wait for Facility Provider to review results.
  - c. If urine is positive for Leukocytes AND nitrites OR blood then:
    - i. Send Urine for urinalysis and culture if indicated
    - ii. Test Urine for HCG to rule out pregnancy
    - iii. Check for allergies to medications and start the following medications:
      1. If no Sulfa allergy and NOT pregnant
        - a. Septra DS (800/160mg) 1 tab PO BID for 3 days
      2. If Sulfa allergic OR pregnant

- a. Nitrofurantoin 100 mg 1 tab PO BID for 5 days
  - d. If symptoms persist after 2 days of treatment or worsen at any point, schedule inmate to see Facility Provider at earliest availability to evaluate further.
- ii. Pyelonephritis
    - 1. Obtain Clean Catch Urine and complete UA dipstick testing
    - 2. Test urine for HCG to rule out pregnancy
    - 3. Notify Facility Provider for UA dipstick results and for concern of kidney involvement. Facility Provider will advise as to best management for this inmate.
  - iii. Sexually Transmitted Illnesses
    - 1. Obtain vaginal swab in females for CG/Chlamydia testing
    - 2. Schedule inmate to see Facility Provider at earliest availability to evaluate further.
- b. MALES**
- i. UTI
    - 1. Obtain Clean Catch Urine and complete UA dipstick testing
    - 2. Notify Facility Provider for UA dipstick results for further discussion and possible orders
  - ii. Sexually Transmitted Illnesses
    - 1. Obtain dirty urine sample for GC/Chlamydia testing
    - 2. Schedule inmate to see Facility Provider at earliest availability to evaluate further
    - 3. Obtain Clean Catch Urine and complete UA dipstick testing