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THE ROLE OF NURSE (PRACTITIONER) TO IMPROVE THE DIAGNOSIS OF URINARY TRACT INFECTIONS IN NURSING HOME RESIDENTS

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Urinary tract infections (UTIs) are of the most prevalent infections diagnosed among nursing home residents. Due to impairments of cognition or communication these residents are not always able to express the typical complaints of UTIs, such as frequency, stranguria, and dysuria. Observations of the nurses are important to support the doctor to confirm or to reject the diagnosis of a UTI. In our 370 bed long-term care facility, over a period of six months all putative UTIs treated with antibiotics (n=153) were recorded. In 60%, the prescriptions didn't meet minimum criteria to start antibiotic therapy. In 75%, the doctor based his diagnosis on the information of the nurses only. The most prevalent signs the nurses reported were a positive nitrite and leuco test (83%) and the patient was not herself (58%). Both symptoms are not objective signs to diagnose a UTI; however these residents were (incorrectly?) treated with antibiotics as having a UTI. Nitrite and leuco tests are frequently positive which indicate the presence of bacteriuria, but not the presence of a symptomatic UTI. Similarly, there are many reasons for the resident not being herself. Changes in cognition, behavior or general well-being without local urinary complaints, do not mean that the resident has a UTI. More detailed medical history, clinical observations and psychical examination are strongly recommended before a more reliable diagnosis of UTI can be made. In conclusion, if nurses know which findings are vital for the diagnosis of UTI in nursing home residents, they could play an important role by performing a careful clinical evaluation and guiding doctors in their decision-making process. This will result in a reduction of the incorrect use of antibiotics and consequently contribute to the control of the antibiotic resistance problem.

Biography

Jobje Haaijman completed her training as a General Practitioner in 1999 and as an Elderly care physician in 2005 (this is a distinct medical speciality in NL). She is now working on a Geriatric Rehabilitation Ward and takes part in national workforces for the development of guidelines for the diagnosis and treatment of Urinary Tract Infections and Lower Respiratory Tract Infections in frail elderly. She performs research on Antibiotic Stewardship in Nursing Homes.

Ellen Stobberingh is a medical microbiologist with special interest in prevalence and control of antibiotic resistance in the community, long term care facilities and general practice patients.

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