

# Urinary Tract Infection

Urinary tract infections (UTIs) are less common in infants and children than in adolescents and young adults and are more common in girls than in boys. UTIs are sometimes difficult to diagnose in infants and young children as the symptoms are often vague and non-specific.

Symptoms of UTIs include fever, pain with urination and frequent urination. Some children will also have vomiting, abdominal pain and back pain. Infants may only have irritability and/or fever making the diagnosis even more difficult.

To make a diagnosis of UTI, a urine specimen must be obtained, often screened for evidence of infection, and cultured. The best urine specimen in infants and young children is collected by placing a catheter (small tube) through the urethra and into the bladder. Older children may provide a clean specimen by voiding into a specimen cup with the help of a parent. Other methods of collection are often contaminated with bacteria, making the specimen useless for culture, but may sometimes be used as a screening tool.

Treatment of UTIs is with antibiotics. The urine culture will help to determine the most appropriate antibiotic for your child. An antibiotic may need to be changed and it is important to follow up the results of the urine culture. It is important to complete the full course of antibiotics prescribed to prevent injury to the kidney and prevent spread of infection. Occasionally, especially for infants, children with high fever or vomiting, your child may require intravenous antibiotics in the hospital. If your pediatrician is concerned that your child may have an underlying condition that may put your child at risk for recurrent UTIs, he may discuss with you the need to do further testing. These may include an ultrasound of the kidney and/or a test to observe urinary function.

## When to call (if your child has a UTI):

- If the fever doesn't resolve in 24 hours.
- If your child begins to vomit after starting antibiotic.
- If vomiting lasts longer than 12 hours in a child who was vomiting prior to antibiotics.
- If your child has worsening abdominal or back pain.



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