**CCTH- UTI pathway (3 -12 months)**

Child diagnosed with UTI based on positive urine dip, or clinical symptoms & treatment commenced

Oral antibiotics commenced

IVAB commenced

Observations within normal limits

**Registrar (or above) decision** to refer to CCTH for ongoing monitoring.

Infant apyrexial **for** 24hrs or more since presentation.

**Registrar and above** can decide referral to CCTH for ongoing monitoring and IVAB

Infant apyrexial for less than 24 hours **but** appears well.

**Consultant decision** to refer to CCTH for monitoring and IVAB

Follow e-referral process and ensure acceptance by CCTH prior to discharge.

Discharge from hospital with medication/prescription, CCTH information leaflet, documentation and any necessary equipment.

CCTH review infant as required, monitor observations and clinical condition, administer IVAB if required. Virtual review with consultant during handover and liaison with paediatric medical team if required.

Deterioration in clinical symptoms or observations

Observations remain stable and child clinical well

**Child is re-admitted to ward for assessment**

Care Closer to Home team chase urine culture results for sensitivity (on CWS or by contacting microbiology - 01633 493918) and discuss results & treatment plan with Paediatricians

Treatment complete.

Discharge from virtual ward and CCTH database

**Paediatric team contact:**

**SHO bleep 3327**

**APNP bleep 3328**

**NB: All patients have direct open access to the acute area whilst under the care of the CCTH team.**