

Discussion Guide: cUTIs

Questions to Ask About Complicated UTI Symptoms

Questions to ask your clinician

1. Do I need a urine culture or blood tests? When will I get the results?
2. What are my treatment options?
3. Once the results of the culture or blood tests are back, could my treatment change?
4. How long might it take before I feel better?
5. How long do I need to take this medication?
6. What should I do if my symptoms don't improve, come back or get worse? What side effects should I watch for?
7. Should I be evaluated for kidney stones or issues with my urinary tract?
8. Do I need to see a specialist to prevent future infections? If so, what type of specialist? How do I get a referral?
9. Could past UTIs and antibiotics affect the chances that the bacteria might be resistant to some antibiotics?
10. Is there anything I can do to reduce the risk of another UTI?

Glossary of relevant terms

When learning about cUTIs, you might come across words and terms you don't know. Here is a list of some of the more common ones you might encounter:

Antibiotic: Medication that kills bacteria to stop them from growing; used to treat bacterial infections

Antimicrobial resistance (AMR): When germs such as bacteria or fungi change (mutate), they may resist drugs that used to kill them or keep them from multiplying. This is called AMR.

Bacteria: Very small (single-cell) organisms, invisible to the naked eye

Bladder: The hollow, spherical organ that holds urine until you pee

Bloodstream infection: Infection in the blood

Catheter-associated urinary tract infection (CAUTI): A UTI related to having or using a urinary catheter is called a CAUTI

Complicated urinary tract infection (cUTI): A UTI with symptoms that suggest that it has spread beyond the bladder, including fever and pyelonephritis (kidney infection)

Cystitis: Inflammation of the bladder, often caused by a bladder infection

Dysuria: Discomfort, pain or burning when peeing

Flank pain: Pain in the side of the body between your ribs and hip

Hematuria: Red blood cells (blood) in your urine

Lower urinary tract: The part of the urinary tract that includes your bladder and urethra (the tube that carries urine out of your body)

Pyelonephritis: A kidney infection

Recurrent UTI: UTIs that happen two or more times within six months or three times in a year. Recurrent UTIs aren't necessarily cUTIs. Also called chronic UTIs.

Sepsis: The body's extreme reaction to an infection; a life-threatening emergency

Systemic symptoms: These are symptoms that affect more than one part of your body beyond your bladder. These include fever, chills, low blood pressure or feeling very unwell.

Upper urinary tract: This part of the urinary tract includes your kidneys and the ureters (tubes that bring urine from your kidney to the bladder)

Urinalysis: A test that examines urine for different substances, including blood and the presence of bacteria. It can't tell what type of bacteria is present, however.

Urinary catheter: A thin, flexible rubber or plastic tube inserted through your urethra to the bladder that allows urine to drain

Urinary frequency: Needing to pee more often than usual (more than seven times in a 24-hour period)

Urinary incontinence: Accidental or unintentional release of urine, loss of bladder control

Urinary retention: The inability to empty your bladder completely

Urinary urgency: The very strong, sudden need to pee

Urine culture: A urine test that identifies bacteria and other germs in the urine. If bacteria are found, testing can show what types of antibiotics are most likely to work.

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