

Kent County EMS, Inc.
Community Paramedicine Protocols
Urinary Complaints

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Revised Date:

Section 11-11

Urinary Complaints

This protocol provides guidance for the evaluation and treatment of a patient presenting with urinary complaints by Community Paramedic/Mobile Integrated Health Paramedic (CP/MIHP). These complaints may include pain with urination, urinary frequency, and increased urinary incontinence.

Purpose: Evaluation and treatment of patient with urinary complaints.

TANDEM365 Directives:

1. Follow *General Treatment Protocol 11.2*.
2. When assessment finding reveals two or more of the symptoms listed below, the CP/MIHP may do one of the following:
 - a. Obtain a clean catch sample of urine as outlined in the *Specimen Collection Protocol 11.12*. The sample is to be collected utilizing the appropriate procedure to prevent contamination. Urine specimen will be taken to a local hospital or laboratory affiliated with the patient's PCP or specialty physician for culture and sensitivity testing.
 - b. Utilize dipstick testing on a clean catch sample of urine. The sample is to be collected utilizing the appropriate procedure to prevent contamination.
 - i. If nitrites AND/OR leukocytes are positive via dipstick analysis, the urine specimen will be taken to a local hospital or laboratory affiliated with the PCP or specialty physician for culture and sensitivity testing. Results will be faxed to the PCP and specialty physician if involved. The patient's PCP may be contacted and advised of urine dip results for possible antibiotic orders.

Qualifying Symptoms Include:

- Urinary Frequency
 - Urinary Urgency
 - Dysuria
 - Flank Pain
 - Fever
 - Altered Mental Status
 - Hematuria
 - History of Recurrent UTI
 - Increased Urinary Incontinence
3. If flank pain, fever, or acute altered mental status is present, the patient will be carefully evaluated for additional signs and symptoms of sepsis, pyelonephritis, or stroke.
 4. The CP/MIHP will communicate with the patient's care team as outlined in the *General Treatment Protocol 11-2* to develop a continuity plan.