

		women and men.	nitrofurantoin eGFR ≥45, consider if eG 30-44.*** Trimethoprim reduced risk o resistance** Second line: pivmecillinam
Non-pregnant women & men.	•••	Cephalexin for 7- 10 days or ciprofloxacin for	
		seven days	
		(caution re:	
		muscle/tendon/	
		bone and	
		nervous system risks)	
		7.40 days of	
Children & young people <16 years		7-10 days of trimethoprim if	
Admit if age <3		reduced risk of	
months.		resistance **	
		or cephalexin.	
Pregnant women	•••	Cephalexin for 7-	
> 12 years old.*		10 days.	
		Contact	
		microbiology re:	
		second line	
		options.	

FR

Ask to return if not improved in 48 hours. Consider other antibiotics depending on culture and sensitivity results.

Consider liaising with specialist re:

- * pregnant women
- If increased risk of complications (known/suspected abnormality of genitourinary tract, underlying disease e.g. diabetes/immunosuppression
- If recurrent catheter-associated UTIs

** Reduced risk resistance if

- Trimethoprim not used in past three months
- Previous culture suggested sensitivity (but not used)
- Not in older people's care home
- Younger people where local data suggests low resistance

*** Avoid nitrofurantoin if eGFR <45; however may be used with caution if eGFR 30-44 for up to seven days, to treat uncomplicated lower UTI caused by suspected or proven multidrug resistant bacteria and only if potential benefit outweighs risk

