

If patient is clinically improving, normalizing vital signs & down trending inflammatory markers –
Consider IV to ORAL switch
(Table 02)

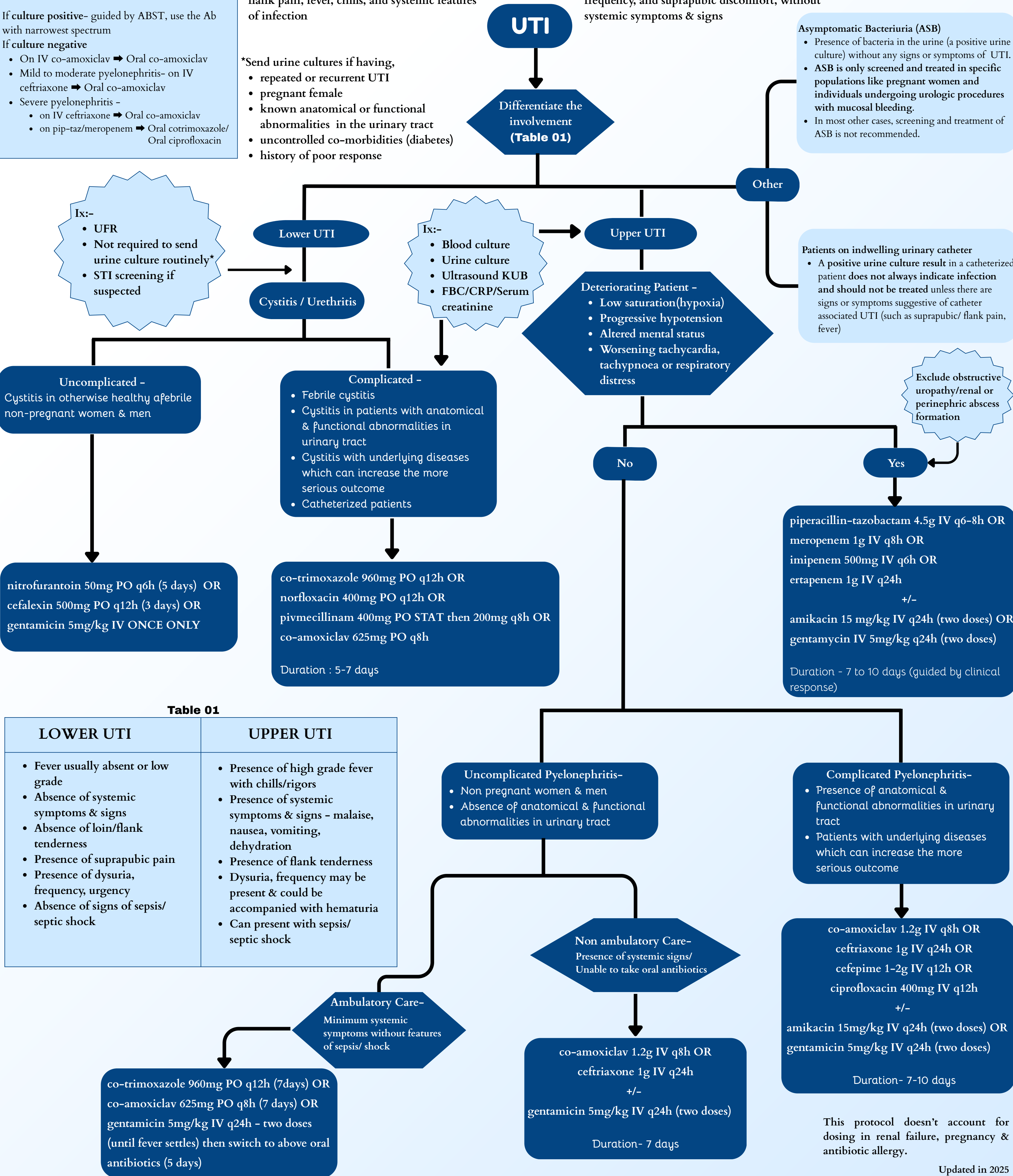
Table 02
IV to ORAL switch therapy (IVOST) & duration
If culture positive- guided by ABST, use the Ab with narrowest spectrum
If culture negative
• On IV co-amoxiclav ➔ Oral co-amoxiclav
• Mild to moderate pyelonephritis- on IV ceftriaxone ➔ Oral co-amoxiclav
• Severe pyelonephritis -
• on IV ceftriaxone ➔ Oral co-amoxiclav
• on pip-taz/meropenem ➔ Oral cotrimoxazole/ Oral ciprofloxacin

STEP-WISE APPROACH FOR TREATING URINARY TRACT INFECTIONS (UTI)

A SIMPLIFIED PROTOCOL FOR EFFECTIVE TREATMENT

UPPER UTI
Infection involving the kidneys and/or ureters (i.e., pyelonephritis), often associated with flank pain, fever, chills, and systemic features of infection

LOWER UTI
Infection involving the bladder and/or urethra, typically presenting with dysuria, urgency, frequency, and suprapubic discomfort, without systemic symptoms & signs



References:
• Sri Lanka College of Microbiologists. Empirical and prophylactic use of antimicrobials: national guidelines 2024 [Internet]. Colombo: SLCM; 2024 [cited 2025 Jun 24]. Available from: <https://slmicrobiology.lk/empirical-and-prophylactic-use-of-antimicrobials-national-guidelines-sri-lanka-2024/>
• Gupta K, Hooton TM, Naber KG, Wullt B, Colgan R, Miller LG, et al. International clinical practice guidelines for the treatment of acute uncomplicated cystitis and pyelonephritis in women: A 2010 update by the IDSA and the European Society for Microbiology and Infectious Diseases [Internet]. Arlington (VA): Infectious Diseases Society of America; 2010 [cited 2025 Jun 24]. Available from: <https://www.idsociety.org/practice-guideline/complicated-urinary-tract-infections/>

