



East Suffolk and
North Essex
NHS Foundation Trust

Urinary Tract Infection (UTI) in Children

***Children's Outpatients Department
Ipswich Hospital
Heath Road
Ipswich
IP4 5PD
Tel: 01473 702181***



What is a urinary tract infection (UTI)?

The urinary tract is made up of the kidneys, the bladder, the tubes that link them (the ureters) and the tube that carries urine out of the body (the urethra).

A UTI is a bacterial infection of the urinary tract.

Why is a UTI important?

It is important to diagnose and treat a UTI quickly. Occasionally a UTI which affects the kidneys (called an upper urinary tract infection) may lead to permanent kidney damage (scarring) if it is not treated.

How do I know if my child has a UTI?

It can be difficult to know whether a child has a UTI, especially in babies and young children. This is because a child with a UTI may be generally unwell, and may not have symptoms that suggest the illness is due to a UTI.

Listed below are possible symptoms or signs of a UTI.

General signs that your child is unwell, such as:

- fever
- vomiting
- irritability
- not feeding well
- not gaining weight.

Specific signs of a possible UTI, such as:

- pain when passing urine
- needing to pass urine frequently
- wetting (in a child who was previously dry)
- tummy pain
- pain in the side
- unpleasant smelling urine
- blood in the urine.



Diagnosing a UTI

If you think your child may have a UTI it is important to collect a urine sample for testing. It can sometimes be difficult to collect a sample from babies and young children, if you are unsure what to do, ask your doctor or nurse for advice.

Young children

- The urine should be collected in a sterile urine specimen bottle that you can get from your GP surgery.
- Catch the urine by holding the bottle in the stream of urine while your child is passing urine.
- Make sure you don't touch the open rim of the bottle because this could affect the sample.

Babies and children who are not toilet trained

- If you are unable to catch a sample of urine you can use a special absorbent pad which you put in the baby's nappy. You will need to get the pad from your GP or paediatrician.

Once the urine has been collected it can be tested, either by dipping a dipstick into the sample or by sending the sample to the laboratory to be looked at under a microscope. The most appropriate method of testing will depend on your child's age and symptoms.

Treatment of a UTI

UTIs are treated with antibiotics.

If your child is less than three months old, or if they are at risk of becoming seriously ill, they will be referred immediately to a paediatrician, who will choose the best antibiotic treatment. This will probably be intravenous antibiotic treatment, given directly into a vein through a needle.

Babies and children who are three months old or more, with an infection that does not involve the kidneys, will probably be prescribed oral (by mouth) antibiotics.

Most UTIs clear up within 1–2 days from the start of treatment.



If your child does not seem to be any better after two days you should return to see your doctor.

It is very important that your child finishes the course of antibiotics, even if they seem better.

Tests and investigations

Babies and children who are six months old or more, who respond well to treatment and do not have any other unusual features, do not need further tests unless they have further UTIs.

Babies under six months of age and older children with recurrent UTIs will usually be referred for further tests such as an ultrasound scan to look at the kidneys and bladder to make sure everything is working properly.

Further information

Further information on UTIs in children is available from the National Institute for Health and Clinical Excellence at www.nice.org.uk/CG054

Please ask if you need this leaflet in an alternative format.

Issued by:
East Suffolk and North Essex NHS Foundation Trust
Ipswich Hospital, Heath Road, Ipswich IP4 5PD
www.esneft.nhs.uk



Issue 4: November 2018 Review date: October 2021
© East Suffolk and North Essex NHS Foundation Trust, 2008-2018.
All rights reserved. Not to be reproduced in whole, or in part,
without the permission of the copyright owner.