

**UTI Tracking Sheet**

Patient Age Sex		SOC date	Baseline temp <sup>1</sup>	Catheter dates		Total days <sup>2</sup>	Total Infections <sup>3</sup>	bacteriuria <u>and</u> pyuria plus 1 or more of the following ▼ Check all that apply	OR	2 or more of the following w/out urinalysis or culture▼ Check all that apply
IN	OUT									
1								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline	
2								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline	
3								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline	
4								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline	
5								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline	
6								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline	
7								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline	
8								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline	
9								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline	
10								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline	
11								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline	
12								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline	
13								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline	
14								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline	

<sup>1</sup> Use temperature at admit/SOC

<sup>3</sup> If pt is asymptomatic for 14 days after infection tx, new symptoms = new occurrence

<sup>2</sup> Device days:catheter in for any part of the day= 1 day

<sup>4</sup> Fever= 2.4°F above pt baseline temperature

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				IN	OUT						
15								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
16								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
17								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
18								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
19								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
20								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
21								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
22								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
23								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
24								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
25								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
26								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
27								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
28								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		

<sup>1</sup> Use temperature at admit/SOC

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<sup>2</sup> Device days:catheter in for any part of the day= 1 day

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Patient Age		SOC date	Baseline temp <sup>1</sup>	Catheter dates		Total days <sup>2</sup>	Total Infections <sup>3</sup>	bacteriuria and pyuria plus 1 or more of the following ▼	OR	2 or more of the following w/out urinalysis or culture▼	Check all that apply
IN	OUT										
29								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
30								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
31								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
32								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
33								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
34								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
35								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
36								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
37								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
38								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
39								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
40								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
41								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
42								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		

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IN	OUT										
43								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
44								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
45								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
46								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
47								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
48								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
49								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
50								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
51								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
52								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
53								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
54								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
55								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
56								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		

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58								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
59								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
60								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
61								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
62								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
63								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
64								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
65								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
66								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
67								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
68								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
69								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
70								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		

<sup>1</sup> Use temperature at admit/SOC

<sup>3</sup> If pt is asymptomatic for 14 days after infection tx, new symptoms = new occurrence

<sup>2</sup> Device days:catheter in for any part of the day= 1 day

<sup>4</sup> Fever= 2.4°F above pt baseline temperature

**UTI Tracking Sheet**

Patient Age Sex		SOC date	Baseline temp <sup>1</sup>	Catheter dates		Total days <sup>2</sup>	Total Infections <sup>3</sup>	bacteriuria and pyuria plus 1 or more of the following ▼	OR	2 or more of the following w/out urinalysis or culture▼	Check all that apply
71				IN	OUT			<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
72								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
73								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
74								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
75								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
76								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
77								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
78								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
79								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
80								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
81								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
82								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
83								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		
84								<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline		

<sup>1</sup> Use temperature at admit/SOC

<sup>3</sup> If pt is asymptomatic for 14 days after infection tx, new symptoms = new occurrence

<sup>2</sup> Device days:catheter in for any part of the day= 1 day

<sup>4</sup> Fever= 2.4°F above pt baseline temperature

**UTI Tracking Sheet**

85							<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline
86							<input type="checkbox"/> flank or suprapubic pain <input type="checkbox"/> chills/fever <sup>4</sup>	<input type="checkbox"/> changes in urine (new blood, odor, sediment, etc.) <input type="checkbox"/> flank/suprapubic pain <b>OR</b> increase in urgency/frequency <input type="checkbox"/> chills/fever <sup>4</sup> <input type="checkbox"/> mental/functional status decline

<sup>1</sup> Use temperature at admit/SOC

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