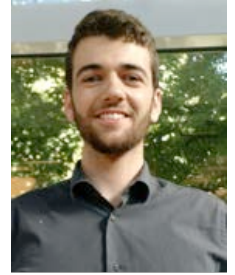


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Choosing Wisely CCDHB



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Urine is often considered to be completely sterile, but in the elderly it is common for 15-30% of people to have harmless bacteria in their urine. This makes it difficult to tell between harmful and harmless bacteria when testing for a urinary tract infection (UTI). Our research project was done with the principles of the Choosing Wisely campaign in mind, trying to reduce unnecessary testing and treatment.

Firstly, we did a literature review about over-testing and over-treatment of UTI, possible reasons for this, and ways of managing it. Secondly, we developed a survey to measure knowledge of UTI management guidelines, opinions about urine tests causing harm, and current practice among nurses and doctors. The results revealed nurses found both specific and nonspecific symptoms to be significant in diagnosing UTI, that nurses overwhelmingly believe urine tests cannot cause harm, and that nurses interpret a positive dipstick result as a sign of UTI rather than of asymptomatic bacteriuria. These results suggested possible areas of education to change nurse practice to reduce testing and treatment.

Thirdly, we conducted an audit of urine culture requests from four wards associated with the elderly at Kenepuru hospital. This revealed that fewer urine cultures were requested once dipsticks were removed from wards associated with elderly care. We cannot claim dipstick removal caused the decrease due to other possible causes, but removal of dipsticks from the wards potentially saves money and time, as well as exposing patients to fewer tests.

May 2018